

Regular Meeting of the Santa Clara County Health Authority Provider Advisory Council (PAC)

Thursday, February 1, 2018 12:15 PM – 1:45 PM 210 E. Hacienda Avenue Campbell, CA 95008

AGENDA

1.	Roll Call	Dr. Boris, Acting Chair	12:15	5 min.
ari 2.	Meeting Minutes Review minutes from May 4, 2017 Possible Action: Approve minutes	Dr. Boris, Acting Chair	12:20	5 min.
3.	Public Comment Members of the public may speak to any item not on the agenda; 2 minutes per speaker. The Committee reserves the right to limit the duration of public comment period to 30 minutes	Dr. Boris, Acting Chair	12:25	5 min.
4.	Chief Executive Officer → Discussion on membership and current topics	Ms. Tomcala, CEO	12:30	10 min.
5.	Opioid Safety Programs → Presentation of Opioid Safety Program	Dang Huynh, PharmD	12:40	15 min.
6.	CAHPS Survey → Presentation of CAHPS Survey	Johanna Liu, PharmD Director, Pharm & QI	12:55	15 min.
7.	Provider Link SCFHP New Provider Portal Demo → Presentation of New Provider Portal	Abby Baldovinos, PSR Claudia Graciano, PSR	1:10	30 min.
8.	Quality and Pharmacy → Discussion on Drug Report	Johanna Liu, PharmD Director, Pharm & QI	1:40	5 min.
9.	2018 Confidentiality Statement	Dr. Boris, Acting Chair	1:47	2 min.
10.	Adjournment	Dr. Boris, Acting Chair		

Santa Clara Family Health Plan Provider Advisory Council

Notice to the Public-Meeting Procedures

- Persons wishing to address the PAC on any item on the agenda are requested to advise the Recorder so that the Chairperson can call on them when the item comes up for discussion.
- The PAC may take other actions relating to the issues as may be determined following consideration of the matter and discussion of the possible action.
- In compliance with the Americans with Disabilities Act, those requiring accommodations in this meeting should notify Caroline Alexander 48 hours prior to the meeting at 408-874-1835.
- To obtain a copy of any supporting document that is available, contact Caroline Alexander at 408-874-1835. Agenda materials
 distributed less than 72 hours before a meeting can be inspected at the Santa Clara Family Health Plan offices at 210 E. Hacienda
 Avenue, Campbell.
- This agenda and meeting documents are available at www.scfhp.com



PROVIDER ADVISORY COUNCIL MEETING

Thursday, February 1, 2018 12:15 - 1:45 PM **Board Room** SIGN IN SHEET

COMMITTEE MEMBERS

NA	ME	COMPANY	SIGNATURE
1.	Bridget Harrison, M.D.	Indian Health Center	EXCUSED
2.	Chung Vu, M.D.*	Premier Care	Climbal
3.	David Mineta*	Momentum for Mental Health	Excused
4.	Dolly Goel, MD	Valley Health Plan	Town
5.	Jimmy Lin, M.D.*	Premier Care	of Brufan
6.	Kingston Lum	In Home Supportive Services	Excused
7.	Peter L. Nguyen, D.O.*	Kelly Park Medical Clinic	Un
8.	Sherri Sager*	Lucille Packard CH-DPS	Den Rag
9.	Thad Padua, M.D.*	Center for Life	Excused

<u>ATTENDANCE NOTE:</u>
Thank you for your attendance. Committee Members whose names are marked with the (*), and who attended today's meeting, will receive a \$250.00 stipend.

Approved: Christinekaumer

2/5/18

SANTA CLARA FAMILY HEALTH PLAN

NAME	TITLE / DEPARTMENT	SIGNATURE ()
Christine Tomcala	Chief Executive Officer	Claustin to mealo
Jeff Robertson, MD	Chief Medical Officer	Excused
Chris Turner	Chief Operating Officer	alis surer
Abby Baldovinos	Sr. Provider Services Representative	AB
Art Shaffer	Sr. Provider Services Representative	No de la constante de la const
Claudia Graciano	Sr. Provider Services Representative	C. Grange
Rosa Perez	Provider Services Representative	Riose Perz
Irene Walsh	Provider Services Representative, LTSS	
Johanna Liu	Director of RX and QI Presen	4 10
Lily Boris, MD	Medical Director	#30 M
Lori Anderson	Operations Director, LTSS	
Ngoc Bui-Tong	Director of Health Care Economics	
Robyn Esparza	Administrative Assistant	1610
Sherry Holm	Med Management Mgr, Behavioral Health	Robert Course
Carel Peterson	Manager, Case Management	

GUESTS

NAME	TITLE / DEPARTMENT	SIGNATURE	
Dang Huynh	Pharmacy Manager	No of	
Andres Aguirre	QI Manager		
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Regular Meeting of the Santa Clara County Health Authority Provider Advisory Council (PAC)

Thursday, May 4, 2017 12:15 PM – 1:45 PM 210 E. Hacienda Avenue Campbell, CA 95008

Minutes

Members Present:

Thad Padua, M.D., Chair Steve Church Bridget Harrision, M.D. Peter Nguyen, D.O. Jimmy Lin, M.D. Sherri Sager

Members Not Present:

Kingston Lum

Dolly Goel, M.D.

Dave Mineta

Guest Present: Peter Goll, CEO, PMG, San Jose

Staff Present:

Christine Tomcala, Chief Executive Officer
Jeff Robertson, M.D., Chief Medical Officer
Chris Turner, Interim Chief Operating Officer
Sherry Holm, Behavioral Health Program Manager
Johanna Liu, Director of QI & RX
Lori Andersen, Operations Director, LTSS
Abby Baldovinos, Sr. Provider Services Representative
Art Shaffer, Sr. Provider Services Representative
Claudia Graciano, Sr. Provider Services Representative
Robyn Esparza, Administrative Assistant

Staff Not Present:

Jennifer Clements, Director of PNM
Irene Walsh, MLTSS Provider Services Representative
Lily Boris, MD, Medical Director
Lori Anderson, Operations Director, LTSS

1. Roll Call

Thad Padua, MD, Chairperson, called the meeting to order at 12:30 pm. Roll call was taken and a quorum was established.

2. MINUTES REVIEW AND APPROVAL

Meeting minutes were reviewed. Dr. Padua asked the Committee if there were any additional questions or comments regarding the February 2, 2017 meeting minutes.

✓ It was moved, seconded that the February 2, 2017 minutes be approved.

3. PUBLIC COMMENT

✓ There were no public comments.

4. COMMITTEE MEMBERSHIP

a) Resignation of Dr. Tuyen Ngo, President, Premier Care

Dr. Padua, Chair, advised the Committee that Dr. Tuyen Ngo, President, Premier Care, is moving on to other roles within the Premier Care organization and that Dr. Chung Vu, President of Premier Care, will be his successor and taking his place as a PAC Committee representative.

b) Introduction of New Committee Member

Dr. Padua, Chair, introduced and welcomed Dr. Chung Vu, President, and Premier Care, who is replacing the vacating member Dr. Tuyen Ngo, to the Committee. Dr. Vu's CV was presented and reviewed by the Committee.

✓ Dr. Vu's Committee membership approved.

c) Committee Membership Roster

Per last month's meeting, the Committee Membership Roster was presented for the Committee reference.

5. CHIEF EXECUTIVE OFFICER UPDATE

Ms. Tomcala presented the April 2017 Membership Summary, noting the current enrollment is 277,665, with the majority of our membership in Medi-Cal, down 1000 members since January

Healthy Kids: 2,794

Cal MediConnect: 7,567

Medi-Cal: 267,304

With regard to Medi-Cal Membership by Age Group and Network, Ms. Tomcala presented the following:

Pediatrics: 41%

Adults: 59%

Ms. Tomcala discussed the following current events:

a) Affordable Care Acts House Vote

Ms. Tomcala advised the Committee that the House vote on the Affordable Care Act (ACA) passed today with 217 in favor and 212 opposed.

b) DHCS Audit

Ms. Tomcala advised the Committee that the Plan was audited by the Department of Health Care Services (DHCS) in April of this year. The audit was the annual medical audit and that it went quite well. The Plan has been working diligently to identify any areas that needed improvement in regards to compliance and implement required policies and procedures. She noted that the auditors appreciated all the work the Health Plan has done to accomplish this task since the last Corrective Action Plan (CAP). The remaining compliance gap involves Provider Dispute Resolutions (PDRs). The Plan continues to work diligently and it will be completed by end of year.

c) Claims System Upgrade

Ms. Tomcala advised Committee The Plan has been using two systems to process claims: Cal MediConnect (CMC) claims processed by the QNXT system and Medi-Cal (MC) claims processed by XPRESS, a much older system. The Plan is in the process of converting our MC system over to QNXT, so we will now have a single platform processing all claims for all lines of business. The go live date for QNXT is July 1, 2017.

6. Chief Medical Officer

Dr. Robertson discussed the following items:

a) SCFHP 20th Anniversary

Dr. Robertson, CMO, informed the Committee that in honor of SCFHP's 20th Anniversary the Marketing Department asked a photographer to attend today's meeting to take photographs throughout the meeting. These pictures will be included in an album of events which is being created in celebration of our anniversary.

b) Technology Upgrade

Dr. Robertson informed the Committee that The Plan is implementing a lot of new technology that would be expected from a 21st century Silicon Valley company. A total of four systems are being implemented:

- Credentialing System: Upgrading to Vistar, which will be more automated, replacing our current paper process and help reduce our current application cycle. Currently, we get about 90% done in 60 days. We expect to shorten that even further with bringing new providers on board and credentialing.
- 2) Provider & Member Portal: Will allow providers to check eligibility, prior authorization and interact electronically with the Plan. Our current portal is very primitive and many providers only use it to check eligibility. Providers will receive notices from the Plan with instructions on how to register. Our goal is to reduce the need to call the Plan and provide more self-service opportunities for the provider office staff.
- Case Management System: The new system, Esset, will allow more interaction for providers in regards to their patients who are on case management.
- 4) Claims & Membership System: QNXT is not a new system, the Plan has been using it for two years for Cal MediConnect, so we know it works well. However, it is a new system for Medi-Cal, which is the vast majority of our membership. Dr. Robertson educated the Committee on bundling and unbundling, for the purpose of soliciting their feedback on any issues they see arising. He noted unbundling is when you take one procedure, break it down to as many parts as possible and then individually charge for each component. He advised that for the last 20 years, there has been an industry standard called CCI (Correct Coding Initiative) thru Medicare and it takes these unbundled elements and puts them back into the parent charge. So, QNXT will reject unbundled claims and rundle them. The Plan is prepared for questions form the providers.

7. Behavioral Health

Ms. Sherry Holm, Director of Behavioral Health, provided a presentation on of Behavioral Health. Ms. Holm directs the Autism Program and is liaison between the Plan and County partners.

Ms. Holm will develop a workflow to present at a future meeting.

8. Quality and Pharmacy

Ms. Johanna Liu, Director of QI and Pharmacy, presented the drug reports on the Top 10 Drugs by Total Cost and by Prior Authorization for the date range of 01/01/17 - 03/31/17.

9. ADJOURNMENT

It was moved, seconded, and approved to adjourn the meeting at 1:40pm. The next meeting is scheduled for August 3, 2017.

Dr. Lily Boris, PAC Committee Acting Chair

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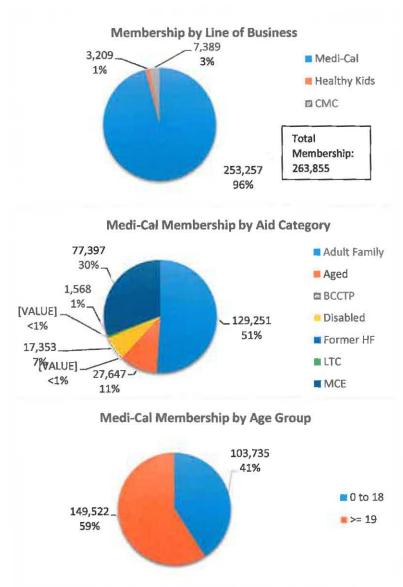


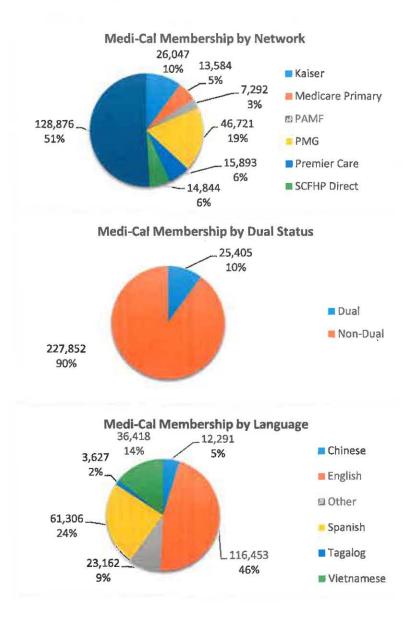
Medi-Cal Membership by Age Group and Network January 2018

Age Group	SCFHP Direct	Valley Health Plan	Kaiser	Palo Alto Medical Foundation	Physicians Medical Group	Premier Care	Total	Percentage
< 6 Years	1,673	14,810	3,904	671	7,581	1,174	29,813	11.8%
6 to 17	4,687	31,520	8,915	1,749	17,652	4,278	68,801	27.2%
18 to 34	3,936	30,725	5,472	1,216	8,480	3,299	53,128	21.0%
35 to 44	1,716	10,917	2,004	495	3,188	1,439	19,759	7.8%
45 to 54	1,757	12,020	1,836	593	3,964	2,443	22,613	8.9%
55 to 64	2,044	15,136	1,796	673	4,166	2,757	26,572	10.5%
65 to 74	5,838	7,633	805	479	1,084	361	16,200	6.4%
75 to 84	4,566	4,618	854	932	525	118	11,613	4.6%
>= 85 Years	2,211	1,497	461	484	81	24	4,758	1.9%
Total	28,428	128,876	26,047	7,292	46,721	15,893	253,257	100.0%
Percentage	11.2%	50.9%	10.3%	2.9%	18.4%	6.3%	100.0%	



JANUARY 2018 ENROLLMENT SUMMARY





PAC Membership Charts 2018 January

Santa Clara Family Health Plan

OPIOID Safety Program

Provider Advisory Council, Santa Clara Family Health Plan, Campbell, CA. Dang Huynh, Pharm.D.

What's the difference?

opiate vs. opioid

natural opium

morphine codeine heroin



synthetic

Santa Clara County Opioid Statistics

66

overdose deaths

4,659 opioid deaths in California 2015**

85

emergency department visits

88

overdose hospitalizations

*California Department of Public Health Data, Santa Clara Numbers at a Glance Count 2016

^{**}Centers for Disease Control and Prevention, National Center for Injury Prevention and Control, Division of Unintentional Injury

Santa Clara County Opioid Statistics

713,379

opioid prescriptions

*California Department of Public Health Data. Santa Clara Numbers at a Glance Count 2016

Some of the Things We Do...



Quantity Limits Quantity limits set to 120 MEDs



Naloxone Required

Request for greater than 120 MED requires naloxone to be co-prescribed



Early Refill

Refill thresholds increased to 90%

Some of the Things We Do...



Member Outreach

We encourage members to see one prescriber and use one pharmacy for pain medications



Prescriber Communication

Work with our prescribers regarding high utilizing opioid members



Case Management

Refer cases to our Case Management team

How We Can Do More ...



First Fill Program

Limit opioid new starts to 7 days.



Immediate-Release First

Extended-release/long-acting opioids require history of immediate-release opioids



Non-opioid Step

Require anti-inflammatories for chronic pain before opioids

Santa Clara Family Health Plan

Opioid Safety Program

Thank you.













First Fill Program







Consumer Assessment of Healthcare Providers & Systems (CAHPS) 2017

Quality Improvement, 2017

CAHPS Overview

- CMS required customer satisfaction survey administered annually to 800 Cal MediConnect members
- Conducted from March to June 2017
 - 2 survey mailings and 5 telephone calls
- Survey sent in English or Spanish
- SCFHP contracts with DSS Research (CMS approved vendor) to conduct the survey
- Results are made public on the CMS website
- Results influence Quality Withhold and Star Ratings



New in 2017

Changes:

- Survey was reduced by 24 questions to 68 questions total
- Addition of Spanish questionnaires to Spanish speakers
- Mailed educational postcards to encourage members to participate in survey
- Article in the member newsletter

Results:

- 29% SCFHP response rate up from 15.6% in 2016
 - Average response rate 27.7% for all plans
- Less N/A results due to insufficient responses



Questionnaire Topics

- Questions are related to the following topics:
 - Getting Needed Care
 - Getting Appointments and Care Quickly
 - Doctors Who Communicate Well
 - Customer Service
 - Care Coordination
 - Rating of Health Plan
 - Overall Rating of Health Care Quality
 - Overall Rating of Personal Doctor & Specialist
 - Getting Needed Prescription Drugs
 - Rating of Drug Plan



Results

Areas performing better than CA MMP average:

- Care Coordination
- Annual Flu Vaccine
- Pneumonia Shot

Areas that scored N/A

- Doctors Who Communicate Well
- Customer Service
- Overall Rating of Personal Doctor & Specialist
- Getting Needed Prescription Drugs

Areas performing worse than CA MMP average:

- Getting Needed Care
- Getting Appointments and Care Quickly
- Rating of Health Plan
- Overall Rating of Health Care Quality
- Overall Rating of Drug Plan



Getting Needed Care

Category		SCFHP 2016 Mean Score	SCFHP 2017 Mean Score	2017 National MMP	2017 CA MMP
Getting Needed		N(/ A	2.47	2.42	2.26
Care	In the last 6 months, how often was it	N/A	3.17	3.42	3.36
Question 10	easy to get the care, tests, or treatment	N/A	3.31	3.44	3.35
	In the last 6 months, how often did you				
Question 29	get an appointment to see a specialist as soon as you needed?	N/A	N/A	3.41	3.38



Getting Appointments & Care Quickly

Category	Description	SCFHP 2016 Mean Score	SCFHP 2017 Mean Score	2017 National MMP	2017 CA MMP
Getting					
Appointments and					
Care Quickly		3.09	3.02	3.27	3.19
Question 4	In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?	1	N/A	3.56	3.48
Question 6	In the last 6 months, how often did you get an appointment for a check-up or routine care as soon as you needed?	N/A	N/A	3.46	3.38
Question o	Todalic care as soon as you needed:			5.40	5.50
	In the last 6 months, how often did you see the person you came to see within				
Question 8	15 minutes of your appointment time?	2.72	2.60	2.78	2.71



Overall Rating of Health Plan, Health Care Quality & Drug Plan

Category	Description	SCFHP 2016 Mean Score	SCFHP 2017 Mean Score	2017 National MMP	2017 CA MMP
Rating of Health Plan		8.3	8.2	8.6	8.5
Overall Rating of Health Care Quality		N/A	8.2	8.5	8.3
Rating of Drug Plan		8.4	8.0	8.6	8.4



New in 2018

Changes:

- Mailing a series of educational postcards to encourage members to participate in survey
- Completing a study on Chinese and Vietnamese populations to determine impact on rates
- Adding provider network IDs to be able to stratify results
- Educated all staff that engages with members
- Educated providers
- Updating post call member satisfaction survey and call center workflow language to mirror CAHPS language

Additional Ideas?











Consumer Assessment of Healthcare Providers & Systems (CAHPS) 2017

Quality Improvement, 2017

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4/24/2018

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4/24/2018

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Results

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Areas performing worse than CA MMP average:

- Getting Needed Care
- Getting Appointments and Care Quickly
- Rating of Health Plan
- Overall Rating of Health Care Quality
- Overall Rating of Drug Plan



Santa Clara Family Health Plan

Getting Needed Care

Category	Description	SCFHP 2016 Mean Score	SCFHP 2017 Mean Score	2017 National MMP	2017 CA MMP
Getting Needed Care		N/A	3.17	3.42	3.36
Question 10	in the last 6 months, how often was it easy to get the care, tests, or treatment you needed?	N/A	3.31	3.44	3.35
Question 29	In the last 6 months, how often did you get an appointment to see a specialist as soon as you needed?	N/A	N/A	3.41	3.38



	Quick	ly			
Category	Description	SCFHP 2016 Mean Score	SCFHP 2017 Mean Score	2017 National MMP	2017 CA
Getting Appointments and Care Quickly		3.09	3.02	3.27	3.19
Question 4	In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?	1	N/A	3.56	3.48
Question 6	In the last 6 months, how often did you get an appointment for a check-up or routine care as soon as you needed?	N/A	N/A	3.46	3.38
Question 8	In the last 6 months, how often did you see the person you came to see within 15 minutes of your appointment time?		2.60	2.78	2.71

Overall Rating of Health Plan, Health Care Quality & Drug Plan SCFHP 2016 2017 Mean National Score Score MMP MMP Rating of Health Plan 8.3 8.2 8.6 8.5 Overall Rating of Health Care Quality N/A 8.2 8.5 8.3 Rating of Drug Plan 8.4 8.0 8.6 8.4

New in 2018

Changes:

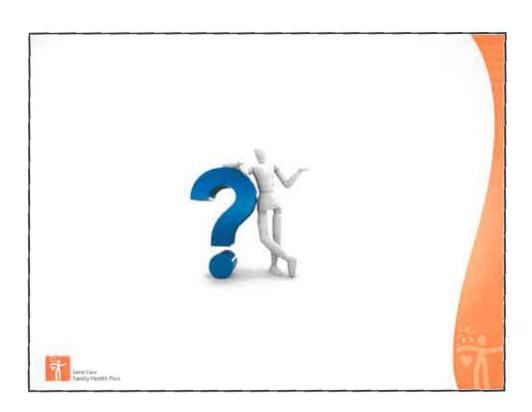
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- Educated providers
- Updating post call member satisfaction survey and call center workflow language to mirror CAHPS language

Additional Ideas?





4/24/2018





Provider Link

Santa Clara Family Health Plan's Provider Portal Training

Provider Link

Welcome to Santa Clara Family Health Plan's new provider portal!

Provider Link allows you to:

- Register and create your own accounts, you do not need to contact SCFHP for access
- Check a member's eligibility and print each transaction
- View and download a primary care physician's patient list
- Check the status of authorizations processed by SCFHP's Utilization
 Management Department
- Check the status of a claim that has been processed by SCFHP's Claims Department

Provider Link will allow electronic authorization submissions to SCFHP's Utilization Management Department. This feature will be available soon.

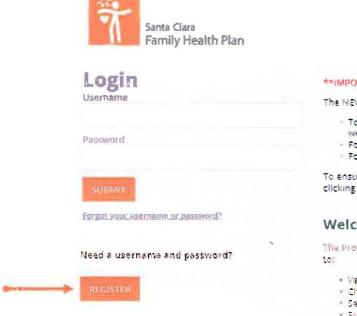


Please Note

- Provider Link gives you access to information maintained by SCFHP. SCFHP
 has a number of delegated relationships with its provider network for the
 Medi-Cal and Healthy Kids programs. Providers need to continue working with
 our delegates for any Medi-Cal or Healthy Kids enrollee assigned to one of our
 delegates.
- SCFHP manages the care for all SCFHP Cal MediConnect members directly. If you have any questions about a Cal MediConnect member's claim or authorization, contact our Customer Service Department at 408-874-1788.
- If you have questions about **Provider Link** features, or information found on **Provider Link**, please contact SCFHP's Customer Service Department at 408-874-1788 or by email at providerservices@scfhp.com.

Creating a New User Account

- Access Provider Link using the following URL:
 - Providerportal.scfhp.com
- Click on the orange REGISTER button to open the wizard and follow the steps



IMPORTANT INFORMATION FOR PROVIDERS

The NEW Provider Link is coming soon! During this transition, HealthTrio/Connect is no longer available.

- To look up rosters or eligibility in the interim, please go to Providers-Member Search on the SCFHP website
- . For claims please call us at 1-408-874-1788
- For authorization status please call us at 1-408-874-1821

To ensure you have access to the new Provider Link, register your new Provider Link account now by clicking on the <u>Register</u> button. Please note that some data may be missing or inaccurate until 8/1/2017

Welcome to the Provider Link

The Provider Link is an online tool for accessing eligibility, claims, and other helpful resources, You can login to:

- · Validate and update your practice information
- Check member eligibility
- Search claims
- Submit authorization requests
- Search member authorizations
- · Access patient roster
- Access plan announcements and glents



Step 1 – License Agreement

Click on the green AGREE button to open, Step 2 of 4: Validation



Step 1 of 4: License Agreement

The provider must agree to the Healthx License Agreement. If you have an additional documents you want the provider to review and agree to, please provide the document in PDF format. The default agreement cannot be modified.

License Agreement

License Grant. This is a legal Agreement between you and the producers of this website. The terms of this Agreement govern your use of and access to this website. By using this website, you are agreeing to be bound by this Agreement. In consideration of your agreement to these terms and for other valuable consideration, you are granted a nonexclusive, non-transferable, limited, terminable license to access and use the website under the laws of the United States. The producer of this website, Healthx Inc., reserves all rights not expressly granted in this Agreement.

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Term and Termination. This license is effective until terminated by either you or the producers of this website. This license will automatically terminate without notice if you fail to comply with any provisions of this Agreement. The provisions of this Agreement which by their nature extend beyond the termination of this Agreement shall survive termination of this Agreement, including but not limited to the sections relating to Restrictions, Content of the Website, Links to Third Party Websites, Disclaimer of Warranties, Limitation of Liability, and Governing Law.

Content of the Website. The insurance products, data, and other information referenced in the website are provided by parties other than the product of the website. We make no representations regarding the products, data, or any information about the products. We are not liable for errors in data or transmission or for lost data. Any questions, complaints, or claims regarding the products or data must be directed to the appropriate provider or yendor.

Links to Third Party Websites. The hypertext links in the website let you leave our website. The linked websites are not under our control, and therefore we are not responsible for the contents of any linked website. We are providing these links to you only as a convenience, and the inclusion of any link does not imply any endorsement by the producers of the site.

Security. You are responsible for changing your password upon entering the system for the first time. You are also responsible for safeguarding and maintaining the secrety of your password at all times. We believe that we have taken all reasonable security steps to encrypt your information so that it cannot







Step 2 -- Validation

- Fill in all fields to create an account on the system

Step 2 of 4: Validation

Please fill in the fields to create an account on the system.

- 1. Enter your First Name and Last Name to associate your name with your account
- 2. Enter the Tax Identification Number (TIN) and Address for the Practice you are registering to your account. The TiN must not include any spaces or dashes when entered
- 3. For security purposes, add a claim paid by SCFHP in the last 180 days for the TIN you entered
- 4. Include your Contact Name and Contact Phone Number in the event we have questions regarding your user account
- 5. Once all fields are filled in, click the 'Add TINs' button
- . To add any additional TIMs to your account, enter the new TIM, new address, and new claim number, then click the "Add TIMs" button again.

Click 'Fireshed adding TINs to account' when complete



Step 2 Continued

Enter the following:

- First and Last Name of the person registering for the account (your name). Note, each person in the office should have their own account.
- 2. The Tax Identification Number (TIN) for the practice you are registering for.
- 3. Your Address, City, State and Zip
- 4. An SCFHP claim number from a PAID claim (within the last six [6] months).
 - a. If you are using a Medi-Cal or Healthy Kids claim number with a paid date prior to July 1, 2017 you must add the letter "H" or "M" after the claim number.
 - "H" for a facility claim
 - · "M" for a professional claim
 - b. If you are using a Medi-Cal or Healthy Kids claim number with a paid date on or after July 1, 2017 you do not need to add an "H" or an "M" after the claim number.
 - c. You do not need to add an "H" or an "M" to any Cal MediConnect claim numbers.
- 5. Practice name
- 6. Your contact phone number



Step 2 Continued



If you are registering more than one TIN click on "ADD TINS"



If you register only one TIN click "FINISHED ADDING TINS TO ACCOUNT"

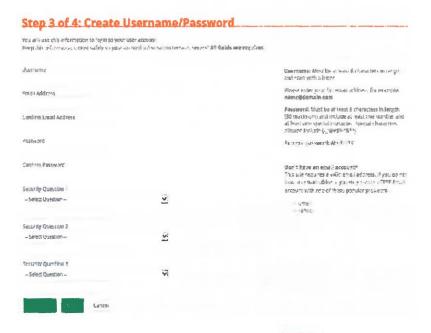
TIN SHED ADD NO TINS TO ACCOUNT



Step 3: Create Username/Password

Enter the following:

- Username Must be at least 6 characters and start with a letter
- **Email address**
- Confirm email address
- Password Must be at least 8 in length and include at least one number and at least one special character
- **Three Security Questions**



Remember to save your User Name and Password in a secure location.

Click on the green NEXT button



Step 4: Confirm Your Information

Review information displayed to confirm the login information is correct.

- Use the Previous button at the bottom of the screen to go back and edit information
- Click the Finish button
 to complete your registration



Step 4 of 4: Confirm Your Information

Username: You're Name Here

First Name: TesterFirst
Last Name: SepterLast
E-Mail Address:

Address: 123 Fake Test Ave
TesterPractice
Tik: You're TIN Here

Cancel



You are Now Registered with Provider Link

You can now:

- Check a member's eligibility and print each transaction
- View and download a primary care physician's patient list
- Check the status of authorizations processed by SCFHP's Utilization Management Department
- Check the status of a claim that has been processed by SCFHP's Claims Department
- Look up Pharmacy Formulary information by plan
- Access SCFHP Provider Resources, Quick Links and Documents

Now let's review each of the sections on Provider Link.

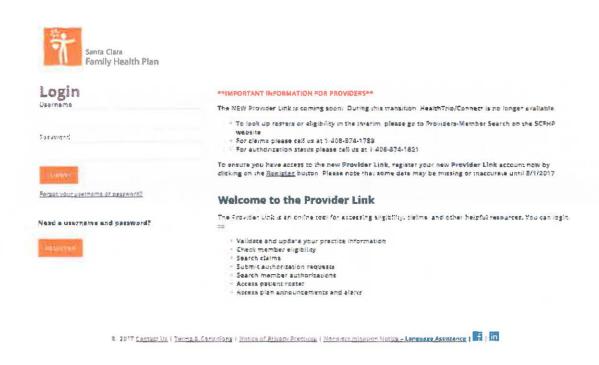




Accessing Provider Link, and the Home Page

Accessing Provider Link

- Access Provider Link using the following URL:
 Providerportal.scfhp.com
- Enter your Username and Password
- Click on the orange Submit button to access the Home Screen





Home Screen

The Home Screen provides access to the following:

- Welcome
- Quick Links
- Contact Us







Eligibility Tab

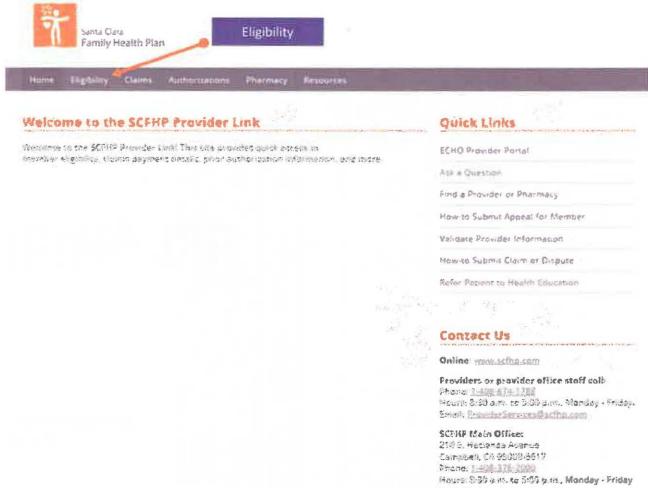
Eligibility

From the Home page:

Click on the Eligibility tab

Eligibility

to access the member search wizard

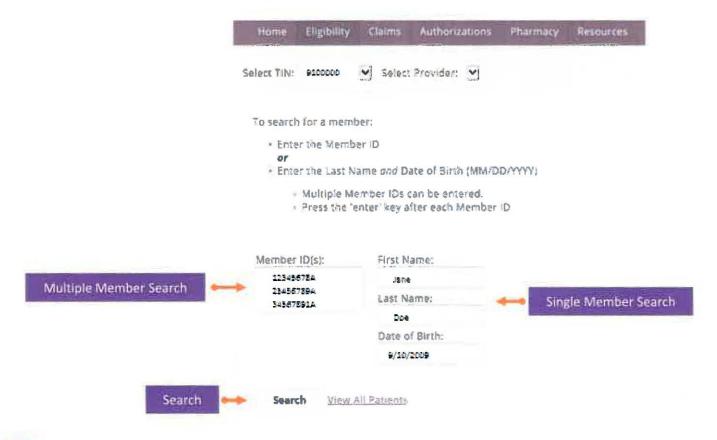




Member Search

Note: There are two ways to check a member's eligibility

- Single member search Enter the patient's First and Last name and Date of Birth.
- Multiple member search Using the Member ID(s) box, to enter the first Member ID Number, click enter and enter the second, etc. Click Search and results will be displayed under the search button





Search Results

- Results will be displayed under the search button search
- Results can be printed or downloaded by clicking on the Print Results
 Download Results buttons Download Results



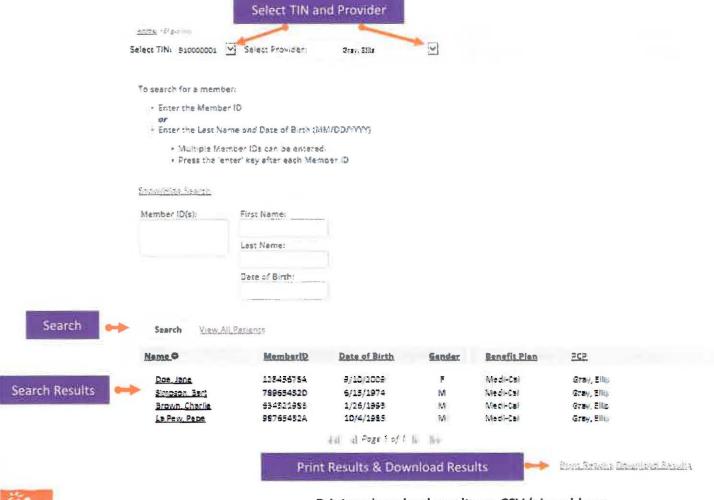
Print or download results as .CSV (viewable as Microsoft Excel Spreadsheet)



PCP Rosters

Primary Care Providers can generate and print their patient rosters from the Eligibility page

- Select the TIN and PCP Select TIN = \$10000001 ≥ Select Provider using the dropdown buttons
- Click Search search





Print or download results as .CSV (viewable as Microsoft Excel Spreadsheet).

Member Status and Coverage Dates

Once the Patient Roster has been generated, Click on the Member's Name to vi

to view their Eligibility Status and Coverage

Mame 0 MemberID Date of Birth Gender Benefit Plan PCP 9/10/2009 Member Name 12845678A Madi-Cal Doe, Jane Gray, Ellis Simpson, Bart 6/15/1974 M 78965432D Medi-Cal Gray, Ellis Brown, Charlie 654321986 1/28/1998 Medi-Cal Gray, Tillis Current Patient: Doe, Jane Show/Hide Search First Numes Member (D(s): Date of Birth: Last Name: Uroup: View All Patients Search Subscriber Member: Jane Doe Group Name: Medi-Cal Member ID: 12345678A SEWSUS: Active **Eligibility Status** Coverages Medi-Cal Current Senefit Effective Date __ 07/01/2015 Termination Date Coverage Dates Back to Search Results / Print View Back to Search Results | Print View



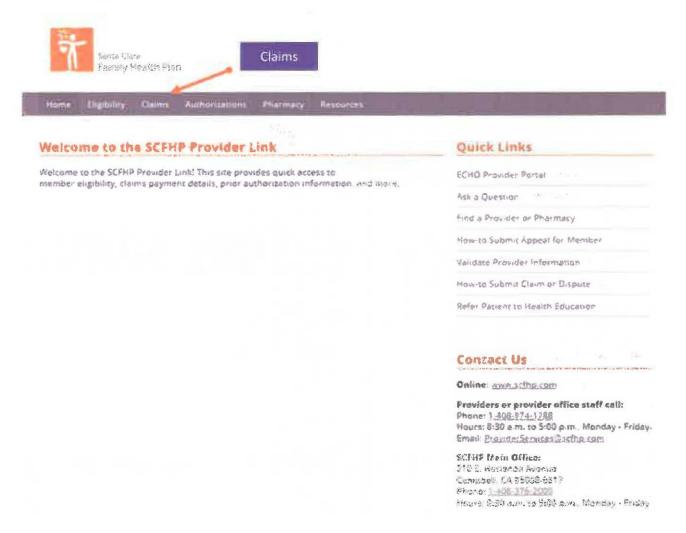
Dates.



Claims Tab

Home

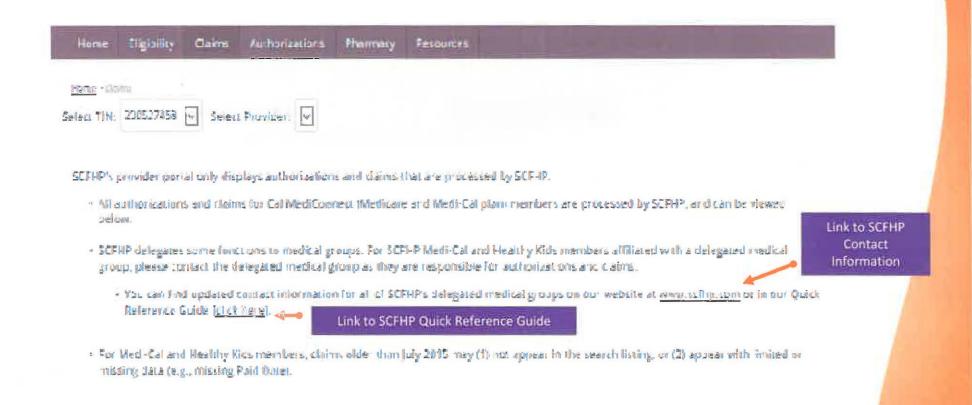
From the Home Screen, click on the Claims tab to access the search screen.





Claims Search Screen Message

Note: SCFHP's Provider Portal only displays claims processed by SCFHP





Claims Search

There are numerous ways to search claims on Provider Link

- Single Claim Search: Enter the Patient ID or Date of Birth or Claim Number or Check Number
- Multiple Claims Search: Using the Claims Number(s) box , enter the a
 Claim Number, click enter, and the enter the next Claim Number or use a
 date rage with Begin Date (1/17/2014) and End Date (1/17/2014)
- Click Search search , and results will be displayed under the search button

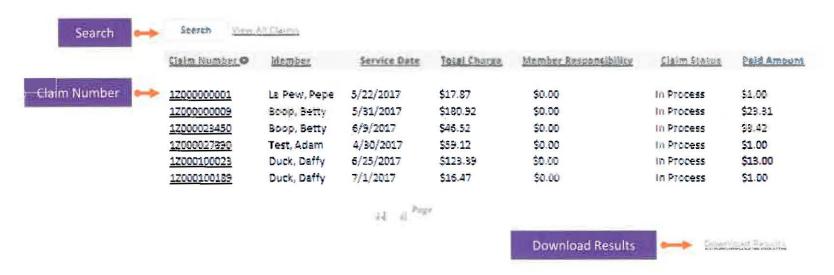
	To search for a patier	it claim:			
	* Enter the Patient	t ID			
	or				
	 Date of Birth (MI 	M/DD/YYYY) and the S	ervice Range Begin/End Dat	te	
	or				
	• Enter a Claim Nu	mber			
	Multiple Cla	im Numbers can be e	ntered		
		nter' key after each C			
			The state of the state of		
	Show/Hide Search		Single Member Search		
	Claim Number(s):	Patient ID:	Begin Date:	Check #	
	Clotti Nutitoetta).	rauentiu.		CHICK II	
Multiple Claims Search			7/20/2014		
		Date of Birth:	End Date:		
		Date of Sitti.	EHU Date.		
		Date of Birth.	7/20/2017	-	



Search Results

- Results will be displayed under the Search button
- Results can be downloaded by clicking on the Download Results button

To view the claim, click on the underlined Claim Number 1200000001



Download results in Microsoft Excel



Sparcia

View Claim

Click the Print View to print or save a copy of a claim

Claim # 1700000000001

Member: Pepe La Pew Member 10: 65498732D Date(s) of Service: 5/22/2017

Service Provider: XYZ MEDICAL EQUIPMENT

Charges \$17.67

Plan Paid 51.00

Youar Chargest \$17.87

Claims Status

in Process

Payment Details

Claim Received 06/27/2017

Pay To

Type rer

Amount 50.00

Oute Pala

Claim Details

Description	CPT	Charges	Member Copystologurance	Plan Polit
Nebulaer with compressor	20570	\$17.57	\$0.007.60.00	\$1.00
Yotal		\$17.87	50.00	\$1.00

Disclaimer

THIS IS NOT A BILL

Back to Search Results | Form View

Print

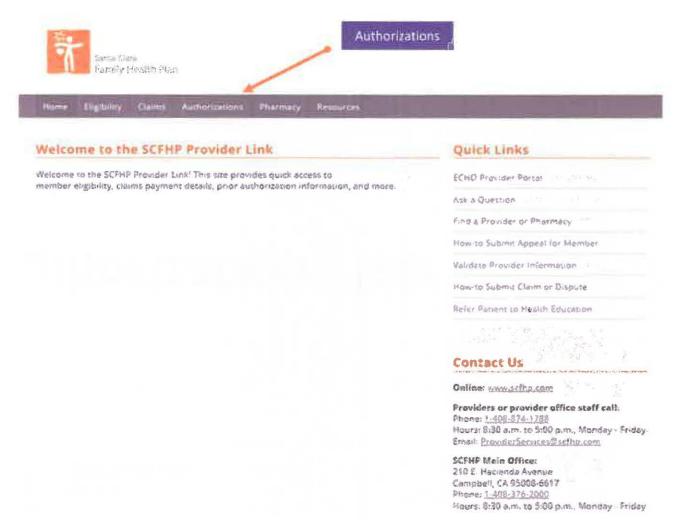




Authorizations Tab

Home

From the Home screen, click on the Authorizations tab to access the search screen





Search Authorizations

Provider Link has several options for searching authorizations:

Authorization types

Search by:

Family Health Plan

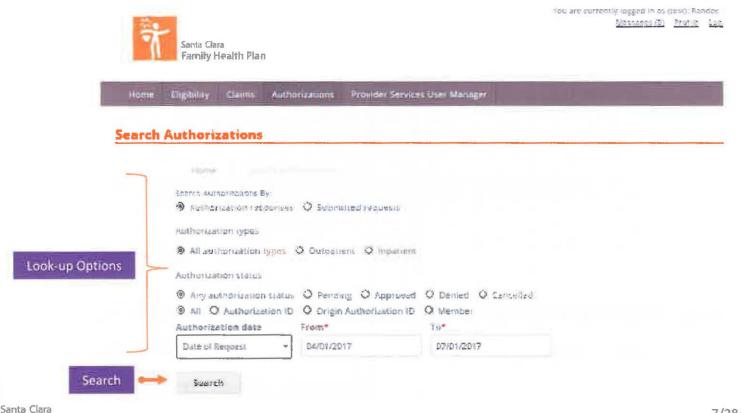
- Authorization responses or Submitted requests
- Authorization types All authorization types Q Dulpatient Q Impatient
- Authorization status
- Authorization dates; To and From
- Click Search search to display member(s) meeting your search criteria

© Any authorized could Different Different Distance O Language

Search Authorizations By

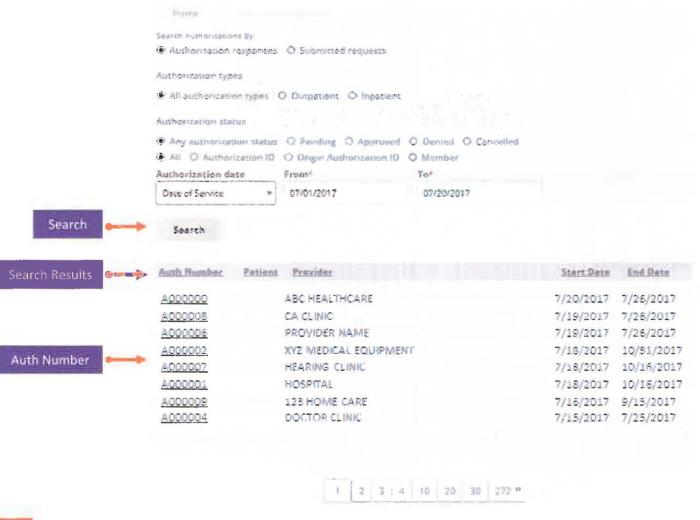
04/01/2017

Authorization responses O Submitted requests



Authorization Search Results

- Search results will be displayed under the Search button
- To view the authorization, click on the underlined Auth Number

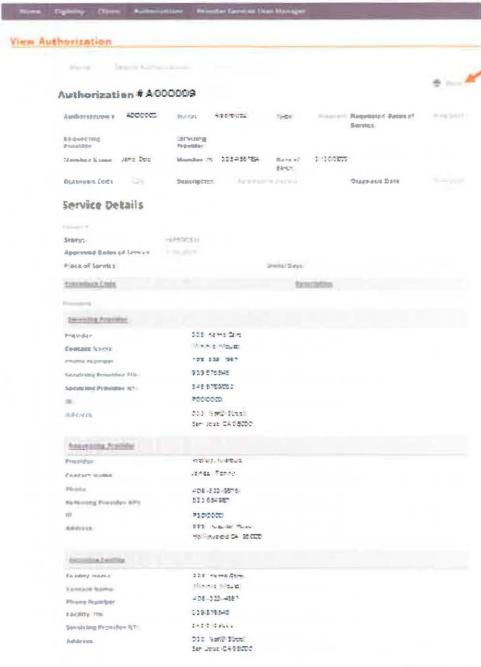




View Authorization

Click the print button to print or save an authorization

Print





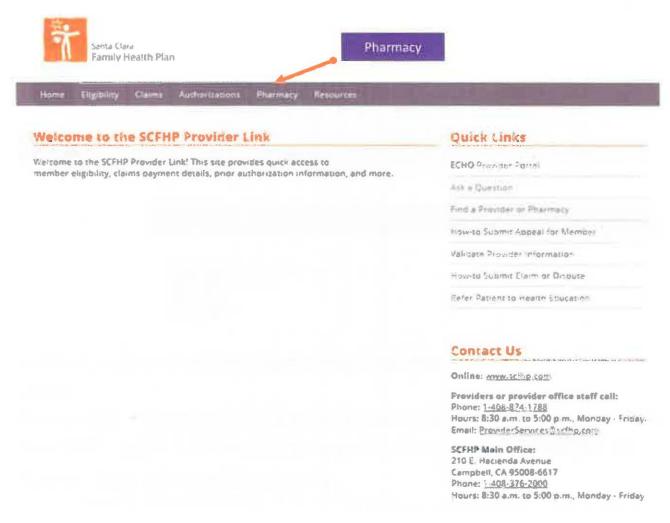
Print



Pharmacy Tab

Home

From the home screen, click on the Pharmacy tab to access the search screen.





Pharmacy Tools

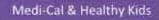
The Pharmacy screen provides access to the following tools for Medi-Cal, Healthy Kids, and Cal-MediConnect.

- Formulary View covered medications in SCFHP's drug formulary list
- Form 61-211 Complete Drug Prior Authorization form or step therapy exception request
- Directory Find in-network pharmacy locations



Eligibility

Claims Authorizations Pharmacy





Drug Formulary -- View covered medications on our drug formulary list

Prior Authorization Form -- Form 61-211 for drug prior authorization or step therapy exception request

Pharmacy Directory -- Find In-network pharmacy locations



Cal MediConnect Pharmacy Tools:

Drug Formulary -- View covered medications on our drug formulary list

Part D Coverage Determination Form - Submit a coverage determination request online

TransactRx -- Submit in-office administered Part D vaccination claims

Pharmacy Directory -- Find In-network pharmacy locations



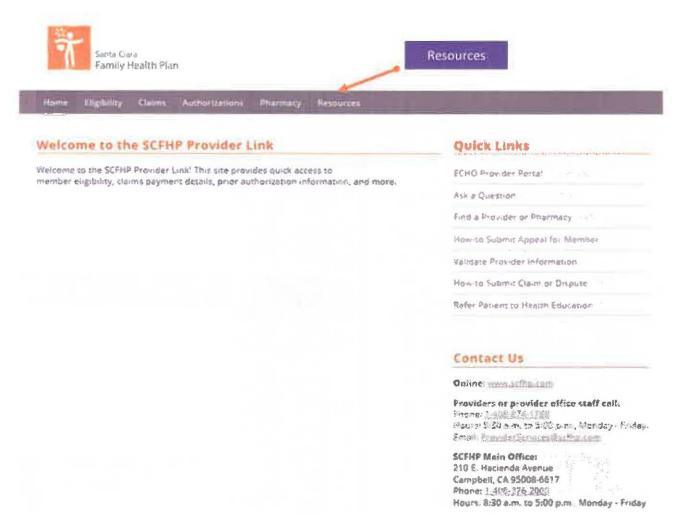
Home



Resources Tab

Home

From the Home screen, click on the Resources tab to access the search screen.





Documents & Resources

The Resources Home screen provides access to the following SCFHP Documents and Resources:

 Provider Manuals, Memos, Quick Reference Guides, Provider Training, Clinical Guidelines, P&Ps, Advanced Health Care Directive, Fraud-Waste & Abuse Resources, HIPAA, Submitting a Claim or Dispute, Medicare Part D Coverage forms, and Frequently Used Links & Downloads



Home Eligibility Claims Authorizations Pharmacy Resources

Documents & Resources

Provider Resources

Forms & Documents

Provider Manual (Medi-Cal & Healthy Kids)

Provider Manual (Cal MediConnect)

Policies and Procedures

Prescription Drug Prior Authorization Request Form

Medicare Part D Coverage Determination Online Submission Form

Medicare Part D Coverage Determination Request Form (PDF)

Ouick Reference (Medi-Cal & Healthy Kids)

<u>Outck Reference (Cal MediConnect)</u>





Are you able to navigate through Provider Link?



Do you understand the features available under each area of the Provider Link?

QUESTIONS?



If you have questions about any other feature **Provider Link features**, or information found on **Provider Link**, please call SCFHP's Customer Service Department at 408-874-1788 or email providerservices@scfhp.com.

Santa Clara Family Health Plan Top 10 Drugs by Total Cost

Fill date: 10/1/2017 - 12/31/2017

SAC01 - Medi-Cal

	Label Name	Total Cost	Petient Paid	Plan Paid	% of Total Plan Patd	Generic % of Plan Paid	Total Claims	% of Total Claims	Generic % of Total Classes	Plan Paid / Day	Plan Paid / Claim
1	HUMIRA 40 MG/0.8 ML PEN	\$1,282,573	50.00	\$1,282,973	4,3%	0.0%	278	0.1%	0.0%	\$164.66	\$4.613.37
2	FREESTYLE LITE TEST STRIP	\$1,008,348	\$0.00	\$1,008,348	3,4%	0.0%	9,239	1.7%	0.0%	\$3.52	\$109.14
3	ZEPATIER 50-100 MG TABLET	\$814,456	\$0.00	\$914,456	2.7%	0.0%	93	0.0%	0.0%	\$629.54	\$8,757.59
4	MAYYRET 100-40 MG TABLET	\$749,553	\$0.00	\$749,583	2.5%	0.0%	118	6.0%	0.0%	\$453.74	\$6,352.40
<u> </u>	HUMALOG 100 UNITS/ML VIAL	\$620,968	\$0.00	\$620,977	2.1%	0.0%	1,385	0.3%	0.0%	\$16.82	\$448.36
6	JANUVIA 100 MG TABLET	\$603,510	\$0.00	\$603,510	2.0%	0.0%	1,328	0.2%	0.0%	\$13.57	\$454.45
7	EPCLUSA 400 MG-100 MG TABLET	\$599,488	\$0.00	5599,658	2.0%	0.0%	50	0.0%	0.0%	\$836.65	\$11,993.15
4	VENTOLIN HEA 90 MCG	\$540,401	\$0.00	\$549,402	1.8%	0.0%	9,523	1.8%	0.0%	\$2.59	\$56.75
9	BASAGLAR 100 UNIT/ML KWIKPEN	\$519,837	\$0.00	\$519,837	1.7%	0.0%	1,918	0.4%	0.0%	\$8.31	\$271.03
10	RENAGEL 800 MG TABLET	\$432,250	\$0.00	\$432,250	1.4%	0.0%	242	0.0%	0.0%	\$61.95	\$1,786.16
Totals	for Top 10	\$7,171,583	\$0.00	\$7,171,594	23.8%	0.0%	24,174	4,5%	0.0%	\$10.90	\$296.67
Fotals	FOF SAC	\$30,070,029	\$0.00	530,070,064	100,0%	28.5%	532,304	100.0%	38.7%	\$1,81	\$56.49

SAC02 - Healthy Kids

	Label Name	Total Cost	Patient Paid	Pian Pald	% of Total Plen Paid	Generic % of Plan Paid	Total Claims	% of Total Claims	Generic % of Total Claims	Plan Paid / Day	Plan Paid / Claim
1	VALGANCICLOVIR HCL 50 MG/ML	\$10,386	\$0.00	\$10,386	10.3%	100.0%	2	0.2%	100.0%	\$199.73	\$5,192.86
2	HIMIRA 40 MG/0.8 ML PEN	\$8,637	\$0.00	\$3,537	8.6%	0.0%	1	0,1%	D.DE	\$508.45	58,636.5
3	PROMACTA 50 MG TABLET	\$7,121	\$0.00	\$7,121	7.1%	0.0%	4	0.1%	0.0%	\$237.36	\$7,120.73
4	HUMALOG 100 ENITS/AL VIAL	\$3,663	\$10	23,683	5.5%	0.0%	J.	0.3%	0.0%	\$38.20	\$942.10
5	CREON DR 24.000 UNITS	\$4,445	\$10	\$4,433	4.4%	0.0%	3	0.3%	0.0%	\$49.28	\$1,478.31
6	OVAR 40 MCG ORAL INHALER	\$4.059	520	\$4,039	4.0%	0.0%	25	2,3%	0.0%	\$4.64	\$161.5
7	VENTOLIN HEA 90 MCG	\$3,952	350	\$3,902	3.9%	0.0%	59	6.3%	0.0%	\$2.85	\$56.53
8	EPINEPHRINE 0,3 MG AUTO- INJECT	\$2,982	\$20	52,962	2.9%	100.0%	49	9.5%	100.0%	\$63.52	\$329.08
9	AMICAR 0.25 GRAM/ML ORAL SOLN	\$2,433	\$0.00	\$2,433	2.4%	0,0%	4	0.1%	0.0%	\$486.52	\$2,433.06
10	NITROFURANTOIN 25 MG/5 ML.	\$2,234	\$0.00	\$2,234	2.2%	100.0%	3	0.3%	100.0%	\$32.86	\$744.74
Totals	for Top 10	\$51,910	\$110	\$51,800	51.5%	30.1%	120	10.9%	11.7%	\$19.16	\$431.61
Totals	I for SAC	\$101,194	5475	\$100,519	100.0%	49.1%	1,102	100.0%	79.5%	54.38	\$91.22

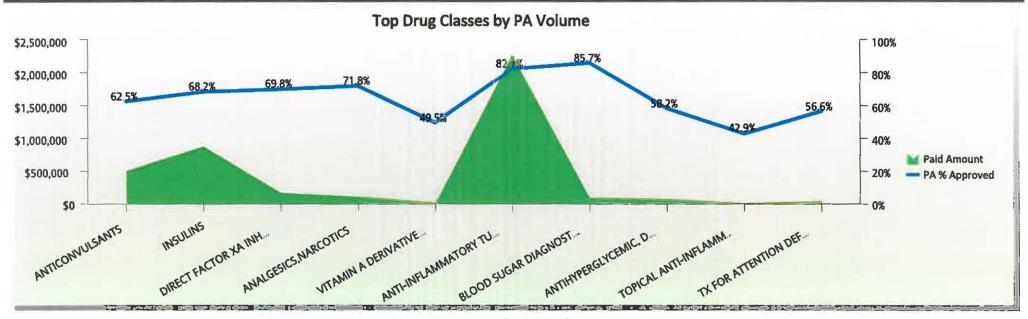
SAC06 - Cal MediConnect

W	Label Name	Total Cost	Patient Paid	Plan Paid	% of Total Plan Paid	Generic % of Pian Paid	Total Claims	% of Total Claims	Generic % of Total Claims	Plan Paid / Day	Plan Paid / Class
1	EPCLUSA 400 MG-100 MG TABLET	\$195,339	5.8	\$195,006	2.5%	0.03	è	0.0%	0.0%	5872.03	\$24,416.95
2	FREESTYLE LITE TEST STRIP	\$177,366	\$0.00	\$177,386	2.3%	0,03	1,550	2.0%	6.0ft	57,29	\$114.43
3	JAMUVIA 100 MG TABLET	\$155,445	\$616	5154,829	2.6%	0.0%	248	0.3%	0.06	\$12.46	\$624.31
4	LANTUS 100 UNIT/ML VIAL	5154,822	5809	\$154,013	2.0%	0.0%	375	0.5%	0.0%	\$11.55	\$410.70
5	INVEGA SUSTEMA 234 MG/1.5	\$141,688	\$0.00	\$141,688	1.8%	0.0%	58	12.3%	0.0%	\$87.03	52,442.90
6	RESTASIS 0.05% EYE EMILISION	\$124,370	5676	5123,694	1.6%	0.0%	243	0.3%	0.0%	514,44	\$509.03
7	LANTUS SOLOSTAR 100 UNIT/ML	\$123,557	\$905	\$122,653	1.6%	0.0%	382	0.5%	ti. tre	\$8.45	\$321.08
3	SPIRIVA 18 MCG CP- HANDIHALER	\$120,994	\$859	\$120,435	1,5%	0.0%	265	0.3%	0.0%	\$11.95	\$454,47
9	HOVOLOG 100 UNITS/ML FLEXPEN	\$115,126	\$ 143	5114,783	1.5%	0.0%	139	0.2%	0.0%	\$19.03	\$607.32
(1)	XTANDI 40 MG CAPSULE	\$110,995	\$0.00	\$110,995	1.4%	0.0%	12	0.0%	0.0%	\$308.32	\$9,249.57
Totals	for Top 10	51.419,703	\$3,911	\$1,415,792	18.0%	0.0%	3,330	4.3%	0.0%	511.70	\$425.16
Totals	i for SAC	57,914,180	568,675	57,845,506	100,0%	18.5%	77,329	100.0%	82.4%	\$2.11	\$101.46

Therapeutic PAs

SAC01 - Medi-Cal

Report Period: 10/01/2017 to 12/31/2017 Comparison Period: 10/01/2016 to 12/31/2016



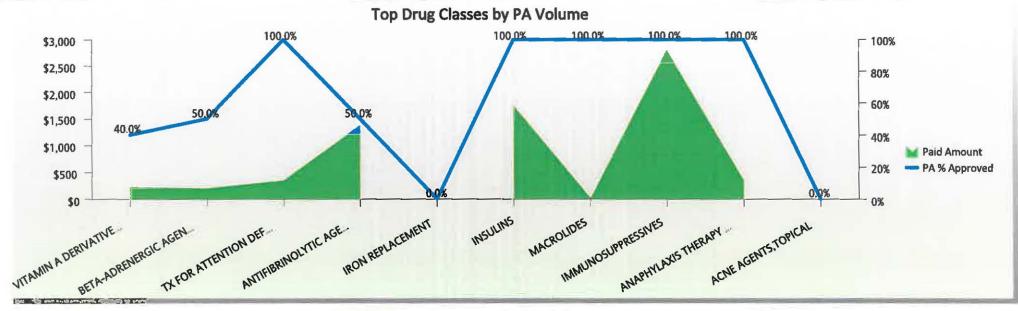
Top Drugs by PA Volume

Rank	Prior Rank	Drug Name	PA Count	% Approved	Ax Count	Plan Paid	Paid per Rx
1	2	HUMALOG KWIKPEN U-100	145	75.2%	550	\$354,967.03	\$645.39
2	1	LYRICA	140	65.0%	329	\$171,659.55	\$521.76
3	4	XARELTO	136	70.6%	343	\$140,304.03	\$409.05
4	3	TRETINOIN	94	51 1%	75	\$12,197 07	\$162.63
5	5	DICLOFENAC SODIUM	85	43.5%	81	\$6,697.86	\$82.69
6	8	JANUVIA	75	57.3%	109	\$49,169.93	\$451.10
7	818	MAVYRET	63	61.9%	106	\$673,534.40	\$6,354.10
8	12	FREESTYLE LITE STRIPS	57	91.2%	263	\$66,688.94	\$253.57
9	7	HUMIRA PEN	56	85.7%	266	\$1,218,221.65	\$4,579.78
10	6	RESTASIS	55	50.9%	141	\$64,783.04	\$459.45
Totals for Top	10		906	65.2%	2,263	\$2,758,223.50	\$1,218.83
Totals for All			4,398	56.6%	10)147	\$13,460,439.91	\$1,326.54

Therapeutic PAs

SAC02 - Healthy Kids

Report Period: 10/01/2017 to 12/31/2017 Comparison Period: 10/01/2016 to 12/31/2016



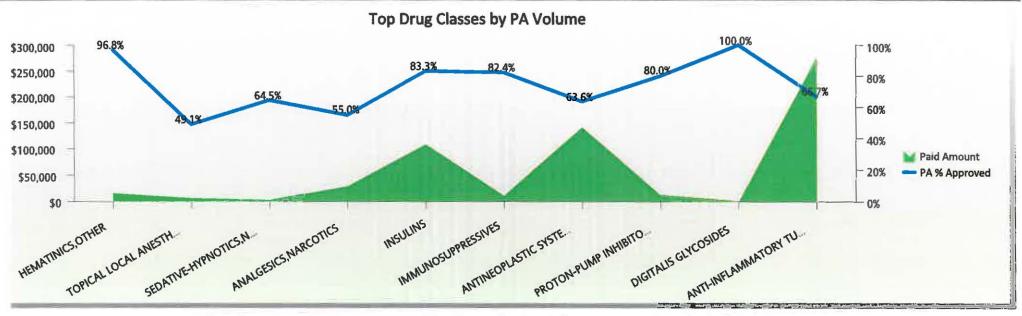
Top Drugs by PA Volume

Rank	Prior Rank	Drug Name	PA Count	% Approved	Rx Count	Plan Paid	Paid per Rx
1	1	TRETINOIN	4	50.0%	1	\$220.99	\$220.99
2	10	LEVALBUTEROL HCL	2	50.0%	1	\$133.91	\$133.91
3	10	LEVALBUTEROL TARTRATE HFA	2	50.0%	1	\$71.29	\$71.29
4	4	METHYLPHENIDATE HCL	1	100.0%	1	\$168.22	\$168.22
5	10	ADAPALENE	1	0.0%	0	\$0.00	\$0.00
6	10	AMICAR	1	0.0%	0	\$0.00	\$0.00
7	10	AZITHROMYCIN	1	100.0%	1	\$23.34	\$23.34
8	10	CHILDREN'S FERROUS SULFATE	1	0.0%	0	\$0.00	\$0.00
9	10	CLINDAMYCIN PHOS-BENZOYL PEROX	1	0.0%	0	\$0.00	\$0.00
10	10	DEXMETHYLPHENIDATE HCL ER	1	100.0%	1	\$183.78	\$183.78
Totals for To	p 10		15	46.7%	6	\$801.53	\$133.59
Totals for All			22	63.6%	34	\$36,715.95	\$1,079.88

Therapeutic PAs

SAC06 - Cal MediConnect

Report Period: 10/01/2017 to 12/31/2017 Comparison Period: 10/01/2016 to 12/31/2016



Top Drugs by PA Volume

Rank	Prior Rank	Drug Name	PA Count	% Approved	Rx Count	Plan Paid	Pald per Rx
1	4	PROCRIT	90	100.0%	11	\$14,715.82	\$1,337.80
2	1	LIDOCAINE	51	49.0%	42	\$5,734.94	\$136.55
3	2	ZOLPIDEM TARTRATE	26	61.5%	69	\$517.35	\$7.50
4	15	SILDENAFIL	7	42.9%	16	\$561.19	\$35.07
5	149	PROMETHAZINE HCL	7	100.0%	1	\$97.50	\$97.50
6	34	MYCOPHENOLATE MOFETIL	6	83.3%	34	\$2,023.59	\$59.52
7	149	INVOKANA	6	16.7%	0	\$0.00	\$0.00
8	20	HUMALOG	5	60.0%	4	\$377.06	\$94.26
9	34	XIFAXAN	5	100.0%	41	\$70,095.61	\$1,709.65
10	57	GLIPIZIDE	5	100.0%	28	\$209.69	\$7.49
Totals for Top	10		208	76.5%	246	\$94,332.75	\$383.47
Totals for All			475	69.9%	1,466	\$2,143,583.14	\$1,462.20



CONFIDENTIALITY, CONFLICT OF INTEREST & NON-DISCRIMINATION AGREEMENT 2017

CONFIDENTIALITY STATEMENT

I understand that Santa Clara Family Health Plan (SCFHP) has a legal and ethical responsibility to comply with all applicable federal and state laws established under the Health Insurance Portability and Accountability Act (HIPAA) and Privacy Rule adopted thereunder (45 CFR Parts 160 and 164) and all related SCFHP Policies and Procedures.

In addition, I understand that during the course of my affiliation with the Provider Advisory Council (PAC), I agree to respect and maintain the confidentiality of all confidential information, especially Protected Health Information (PHI). I also agree that my obligations under this agreement regarding PHI will continue after the termination of my affiliation with the PAC.

CONFLICT OF INTEREST STATEMENT

I understand and agree that I will report to the Committee Chairperson if I have a financial or non-financial conflict of interest which would impair my objectivity in performing my responsibilities as a member of the PAC. Furthermore, I will refrain from any proceeding or cast a vote on any issue related to conflict of interest.

NON-DISCRIMINATION

Santa Clara Family Health Plan (SCFHP) and all PAC Committee Members comply with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, religion, citizenship status, genetic information, marital status, sexual orientation and identity, medical condition, AIDS/HIV, military or veteran status, political affiliations or activities, or status as a victim of domestic violence, assault or stalking.

AGREEMENT

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an	d a	gree	to	abide	by	these	stan	dards	and	requi	rements	s in	the	cond u	ct o	f my	respo	onsibilities	related	to
m	atte	rs of	the	PAC.																

ignature	Date	



CONFIDENTIALITY, CONFLICT OF INTEREST & NON-DISCRIMINATION AGREEMENT 2017

CONFIDENTIALITY STATEMENT

I understand that Santa Clara Family Health Plan (SCFHP) has a legal and ethical responsibility to comply with all applicable federal and state laws established under the Health Insurance Portability and Accountability Act (HIPAA) and Privacy Rule adopted thereunder (45 CFR Parts 160 and 164) and all related SCFHP Policies and Procedures.

In addition, I understand that during the course of my affiliation with the Provider Advisory Council (PAC), I agree to respect and maintain the confidentiality of all confidential information, especially Protected Health Information (PHI). I also agree that my obligations under this agreement regarding PHI will continue after the termination of my affiliation with the PAC.

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I understand and agree that I will report to the Committee Chairperson if I have a financial or non-financial conflict of interest which would impair my objectivity in performing my responsibilities as a member of the PAC. Furthermore, I will refrain from any proceeding or cast a vote on any issue related to conflict of interest.

NON-DISCRIMINATION

Santa Clara Family Health Plan (SCFHP) and all PAC Committee Members comply with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, religion, citizenship status, genetic information, marital status, sexual orientation and identity, medical condition, AIDS/HIV, military or veteran status, political affiliations or activities, or status as a victim of domestic violence, assault or stalking.

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I, the undersigned, have read and understand the above Confidentiality and Conflict of Interest Statements and agree to abide by these standards and requirements in the conduct of my responsibilities related to matters of the PAC.

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Chungh	2-1-17
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CHUR VII M	ก



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