

Consumer Advisory Board Meeting Minutes 10.26.16

1. **Welcome:** Consumer Advisory Board (CAB) members were welcomed to the October Consumer Advisory Board meeting. Members were reminded about the confidentiality agreement and to not share personal health information in the open group forum and any individual health concerns can be addressed privately with health plan representatives after the meeting. Meeting minutes from the last Consumer Advisory Board meeting were distributed for review, along with a required non-Discrimination Provision handout.

1. **Guest Presentation – Manooch Pouransari | Grace Adult Day Care** provided a presentation on CBAS, Community Based Adult Services (CBAS). This benefit offers a day program for eligible participants through nursing care, individualized care, and social/mental/behavioral health needs. The center focuses on person-centered care and does face to face assessments by a nurse to ensure they get what they need at the center. CBAS Centers support members through multiple languages spoken.

What sort of services are provided?

- Door to door transportation (for most areas)
- Nutritious food, hot meals and snacks, as well as dietician services
- Skilled Nursing
- Blood Pressure & glucose monitoring
- Therapeutic activities, socialization
- Social Services / Counseling to help connect members and their families to social services
- Training for Care givers
- Physical, occupational and speech therapy
- Group exercises and activities including games, singing, puzzles, art and music
- Program runs between 4 to 5 hours per day

How does it help?

- Services keep participant's health "at the same level" to prevent decline and potentially a nursing home admission.
- The participant gets help keeping their medications regulated and managed, including the dispensing of prescriptions throughout the day
- Caregivers get time off (respite) from caring for their loved one
- Participants are happier, and more motivated. They get dressed for the day to go out.

Question and Answer

Q1: How many CBAS Centers do Blue Cross/Anthem and Santa Clara Family Health Plan contract with? **There are five contracted facilities.**

Q2: Do you need to be referred by a doctor? **Yes.**

Q3: Is this a good option for short term care for a participant? **Yes. When people discharge from the hospital, they can easily get their therapies needed.**

Q4: The CBAS Center I attended “did not work for me” because most people there were speaking a language foreign language. **We are sorry this specific center did not work for you. You are welcome to visit other centers to see if they are a better match. Each center has a different cultural frame and has different activities. Each Center tries to include everyone by providing a wide variety of activities and people who speak various languages.**

Q5: What’s the difference between Pace and On-Lok and CBAS?

Program of All-Inclusive Care for the Elderly (PACE) is an option for beneficiaries 55 or older and need a higher level of care in order to live at home. PACE provides all Medicare and Medi-Cal benefits coordinated within their network. On-Lok is a PACE program and offers a CBAS program in San Jose.

Q5: Don’t the Social Workers in the Hospitals know about this program? When I was discharged, they never told me about this. **Many hospital staff do know if this program. It would typically be mentioned if a member was likely to meet the eligibility requirements. CBAS referrals can also come from the patient’s doctor.**

Q6: Do you keep your doctor when you go to CBAS? **Yes, you keep your existing doctor.**

Q7: Is there a quiet place at the Facility I can go, in case I don’t want to participate in the activities or want to nap? **Yes. There is a quiet room and there are some beds for resting.**

Member Stories/Feedback:

1. Member expressed the need for more people knowing about CBAS to take advantage of this benefit. The Health Plans mentioned education to Providers would help.
2. A member received a call from a Case Manager at their Health Plan. It was nice to hear from her, and she spoke to her in her language (Spanish). She was “glad for the call” and the check-in.
3. Member is working with Anthem Blue Cross Nurse Case Manager named Bridget. They are very happy to be working with this Nurse Case Manager because she “does a good job”, and so this member was able to select her.

4. The Health Plans addressed questions around qualifications for CalMediConnect, and when the Share of Cost applies. There was also some discussion around the importance of the Medi-Cal Redetermination being returned timely so coverage is not lost.
5. No issues or concerns were addressed at this meeting.

Next meeting: November 30, 2016 @ 11 a.m.



Santa Clara
Family Health Plan

Discrimination is Against the Law

Santa Clara Family Health Plan (SCFHP) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. SCFHP does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

SCFHP:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact the Grievance and Appeals Manager.

If you believe that SCFHP has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Attn: Grievance and Appeals Manager
Santa Clara Family Health Plan
210 East Hacienda Avenue
Campbell, CA 95008
Phone: 1-877-723-4795
TTY/TDD: 1-800-735-2929 or 711
Fax: 1-408-874-1962
Email: CalMediConnectGrievances@scfhp.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Grievance and Appeals Manager is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue SW
Room 509F, HHH Building
Washington, DC 20201
Phone: 1-800-368-1019
TDD: 1-800-537-7697

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

Language Assistance Services

English: ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-877-723-4795. (TTY: 1-800-735-2929 or 711).

Spanish: ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-877-723-4795 (TTY: 1-800-735-2929 o 711).

Chinese: 注意：如果您说中文，将为您提供免费的语言服务。请致电 1-877-723-4795。（TTY：1-800-735-2929 或 711）。

Vietnamese: CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-877-723-4795 (TTY: 1-800-735-2929 hoặc 711)

Tagalog: PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-877-723-4795 (TTY: 1-800-735-2929 o 711).

Korean: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-877-723-4795(TTY: 1-800-735-2929 □□ 711)□□□ □□□ □□□□.

Armenian: Ուշադրություն: Եթե խոսում եք հայերեն, ապա ձեզ անվճար կարող են տրամադրվել լեզվական աջակցության ծառայություններ: Ջանգախարհք 1-877-723-4795 (TTY (հեռատիպ) 1-800-735-2929 կամ 711).

Persian, Farsi:

توجه: اگر به زبان فارسی صحبت می کنید، کمک در زمینه زبان به صورت رایگان در اختیارتان قرار خواهد گرفت. با 4795-723-877-1 (TTY 2929-735-800-1 یا 711) تماس بگیرید.

Russian: ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-877-723-4795 (телетайп: 1-800-735-2929 или 711).

Japanese: 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-877-723-4795(TTY: 1-800-735-2929 または 711)まで、お電話にてご連絡ください。

Arabic:

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 4795-723-877-1 (رقم الهاتف النصي: 1-800-735-2929 أو 711).

Punjabi: ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਭਾਸ਼ਾ ਬੋਲਦੇ ਹਾਂ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਭਾਸ਼ਾ ਸੇਵਾਵਾਂ ਮੁਫਤ ਵਿੱਚ ਉਪਲਬਧ ਹਨ।

1-877-723-4795 (TTY: 1-800-735-2929 ਜ 711) ਤੇ ਕਾਲ ਕਰੋ।

Mon-Khmer, Cambodian: ប្រមូលកិច្ចការដាក់: "ប្រសិនបើលោកអ្នកនិយាយ"ភាសាខ្មែរ"នោះលោកអ្នកអាចស្វែងរកសេវាជំនួយផ្នែកភាសា"

បានដោយឥតគិតថ្លៃ។"សូមទូរស័ព្ទទៅលេខ"1-877-723-4795" (TTY: 1-800-735-2929 ឬ 711)។

Hmong: LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-877-723-4795 (TTY: 1-800-735-2929 los sis 711).

Hindi: ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-877-723-4795 (TTY: 1-800-735-2929 या 711) पर कॉल करें।

Thai: เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 1-877-723-4795

(TTY: 1-800-735-2929 หรือ 711).