

**Santa Clara Family Health Plan  
Provider Advisory Council  
July 9, 2015  
Boardroom**

PAC Attendees: Dr. Thad Padua, IHC Pediatric Center; Dr. Peter Nguyen, Kelly Park Clinic; Sherri Sager, Lucile Packard Children's Hospital; Steve Church, Willow Glen Center; Bridget Harrison, Valley Medical Center, Dr. Tuyen Ngo, Premier Care

SCFHP Attendees: Dave Cameron, Jeff Robertson, MD, Jimmy Lin, MD, Tony Solem, Ngoc Bui-Tong, Gary Kaplan, Pat McClelland, Jennifer Clements, Irene Walsh, Claudia Graciano, Shenita Hurskin, Phuong Au, Rita Zambrano

ITEM	DISCUSSION	ACTION	RESPONSIBLE PARTIES	DUE DATE
MEETING CALLED TO ORDER	Dr. Thad Padua, Chairperson, called meeting to order at 12:25PM. A quorum is present. The minutes were approved as presented.	None		
PUBLIC COMMENT	No Public Comment	None		
REVIEW OF MINUTES	The minutes were reviewed and approved.	None		
CEO REPORT	<p><b><u>PLAN UPDATE</u></b></p> <p>Mr. Dave Cameron, Chief Financial Officer, provided an update on the Health Plan. Membership is at 230,000. SCFHP is in the process of signing a contract with St. Louise Hospital. The Governing Board approved the Health Plan's 2015/2016 budget during the June 25<sup>th</sup> 2015 meeting. Mr. Cameron also reported that the Health Plan's revenue continues to increase and currently have 1.6% net surplus.</p>	None	N/A	N/A
	<p><b><u>CEO ANNOUNCEMENT</u></b></p> <p>The new CEO, Christine Tomcala, starts July 20<sup>th</sup>. Ms. Tomcala comes from SoundPath Health and led a provider-owned Medicare Advantage Plan in Washington State.</p>	None	N/A	N/A

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CEO REPORT	<p><b><u>ACA PAYMENT UPDATE</u></b>            Ms. Ngoc Bui-Tong, Director of Healthcare Economics, provided an update on the status of the ACA Payment for the primary care providers. Ms. Bui-Tong began by recapping the intent of the program, which was to increase the Medi-Cal payments to primary care providers so they were commensurate with the Medicare fee schedule. The program was scheduled for calendar year 2013-14. The last payment for those two calendar years was sent to the providers in June. SCFHP will process another payment for any claims that come in with those service dates. Providers have one year from the date of service to submit eligible claims which the Health Plan will pay. The Health Plan is about 99% done processing the received claims. The Health Plan is currently discussing how to continue payment for contract year 2015 utilizing the components of the original CY 13-14 plan. SCFHP will seek the Governing Board's approval to extend the program.</p>	None	N/A	N/A
CMO REPORT	<p><b><u>O'CONNOR AND ST. LOUISE HOSPITAL UPDATE:</u></b>            Dr. Jeff Robertson, Chief Medical Officer, addressed the Committee regarding the status of the Health Plan's contracts with O'Connor and St. Louise hospitals. St. Louise terminated their contract with the Health Plan which presented a concern for people in the South County particularly around Obstetrics. SCFHP is pleased to announce that we have come to a tentative agreement that is currently in process. The one year agreement will provide services for emergency, obstetrics and inpatient services.             The Health Plan is still in contract negotiations with O'Connor.</p>	Dr. Robertson will provide updates on the hospital contracts and access issues at future meetings.	Dr. Robertson	10/08/15

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CMO Report	<p><b><u>DHCS CRITERIA FOR COVERAGE OF HEPATITIS C TREATMENT</u></b></p> <p>Dr. Robertson advised the Committee that last year's new breakthrough treatments in Hepatitis were released at a price tag of \$100,000 per patient. This is significant for the Health Plan because about 5% of our membership carries the Hepatitis C virus which will eventually cause the disease in about 20% of those individuals. The treatment would have extraordinary financial impact that neither the state nor the Health Plan would survive. Last year the Department of Health Care Services (DHCS) issued guidelines for coverage of advanced liver disease, called stage 3 to stage 4.</p> <p>This year DHCS published new criteria which the Health Plan has adopted because it lowers the threshold for qualification and it adds numerous other qualifying conditions without a diagnosis of liver disease. DHCS also adopted the American Association for the Study of Liver Disease (AASLD) criteria, which is much broader than the previous manufacturer's recommendations.</p> <p><b><u>BEHAVIORAL HEALTH</u></b></p> <p>Dr. Robertson discussed the treatment of Autism as a covered benefit for the Health Plan. Dr. Robertson reminded the Committee that this became a benefit under managed Medi-Cal in September 2014. Prior to September this benefit was carved out to the San Andreas Regional Center (SARC). Effective November 1, 2015, SARC will no longer provide treatment for approximately 280 persons in our community. SCFHP will provide coverage for those individuals.</p> <p>In preparation of this change, and in response to the new benefit that was effective in September, the Health Plan has been contacting many providers in the community about a contract. There is a shortage of providers in our community and this has impacted the Health Plan's efforts to contract.</p> <p>Ms. Jennifer Clements, Director of Provider Operations, commented that the Health Plan has tried to contract with the same providers that work with SARC. Due to the lack of guidance from the state regarding credentialing guidelines and rates, it is difficult to get one standard approach for everyone.</p>	None	N/A	N/A
		None	N/A	N/A

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MLTSS	<p><b><u>MLTSS UPDATE</u></b>            Ms. Irene Walsh, MLTSS Provider Relations Representative, provided an update on one of the Health Plans newest partners, ArcWell Medical. Arc Well Medical is a group of affiliated physicians providing primary care services in skilled nursing facilities (SNFs). The Health Plan now has more than 600 long term care members in SNFs.</p> <p>Some of the goals for this new partnership are:</p> <ul style="list-style-type: none"> <li>• A reduction in avoidable readmissions and SNF acute care</li> <li>• Provide medically necessary visits at regular intervals, as appropriate for the member's medical needs and level of care required.</li> <li>• Ongoing three way communication</li> <li>• Improved care management for members in SNFs</li> <li>• Coordination of specialty and ancillary services</li> <li>• PCP's participation in all coordination efforts: ICT meetings (scheduled and ad hoc), transitions of care program, identification of potential members who would be able to transition back into the community.</li> <li>• Safe transitions back to the community</li> </ul>	The Health Plan will continue to provide the Committee with updates regarding MLTSS activities at future meetings.	Lori Anderson	10/08/15
Children's Complex Care Issues	<p><b><u>CHILDREN'S COMPLEX CARE ISSUES</u></b>            Ms. Sheri Sager, LPCH, provided an update on children's complex care issues. Ms. Sager noted that the legislation regarding California Children's Services (CCS) could potentially have a big impact the Health Plan. There are currently two pieces of legislation in process. The first is by assemblyman Rob Bonta that would extend the carve-out of CCS for one year. The second is by Senator Ed Hernandez and it would implement a new network of care for kids ready to move out of the existing CCS system. It is expected that Governor would veto both bills; they want to move the kids into Medi-Cal Managed Care.</p>	Ms. Sager will continue to provide updates at future Committee meetings.	S. Sager	10/08/15

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	<p>The State would like to have four 2-plan model counties where they can move kids into managed care in 2017. CCS families and advocates are uniformly opposed to this and there is great concern that children will not get to the right places at the right times like rural communities. Dr. Thad Padua, Committee Chair, noted that the system is already fragmented and with this new approach it will further perpetuate the issues with the system. Ms. Sager noted that everyone is in agreement that the current system is not sustainable and they are looking at solutions for children with complex care needs.</p>			
<p><b>Other Business</b></p>	<p><b><u>PAC COMMITTEE ROSTER AND CHARTER</u></b></p> <p>Dr. Jeff Robertson, CMO, advised the Committee that two members have retired and are no longer on the Committee. In addition, the current Health Plan by-laws indicate that each council member may serve for a maximum of three two-year terms. Therefore, the Committee has five members who will be leaving at the end of their 2016 term.</p> <ol style="list-style-type: none"> <li>1. Dr. Thad Padua, Chair – term end of 2016</li> <li>2. Ms. Sheri Sager – term end of 2016</li> <li>3. Dr. Peter Nguyen – term end of 2016</li> <li>4. Dr. Bridget Harrison – term end of 2016</li> <li>5. Dr. Kenneth Phan – term end of 2016</li> <li>6. Mr. Paul Taylor – retired</li> <li>7. Dr. Connie Tucker – retired</li> <li>8. Mr. Steve Church</li> <li>9. Dr. Stephen Ho</li> <li>10. Dr. Tuyen Ngo</li> <li>11. Dr. Dolly Goel</li> </ol> <p>The committee discussed adding new members to the roster, including new physicians and other provider types such as MLTSS providers or facility representatives.</p> <p>Dr. Thad Padua also suggested reviewing the Health Plan by-laws to propose edits to allow current members to extend their membership.</p>	<p>Provide the Committee with a copy of the by-laws.</p> <p>Proposed changes will be presented to the Governing Board for approval.</p>	<p>J. Clements</p>	<p>10/08/15</p>

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ADJOURNMENT	Meeting Adjourned 1:30. Next Meeting is January 7th, 2016	Informational		

Signature: 

Date: 11/7/15