



**Consumer Advisory Board  
Meeting Minutes  
3.25.15**

1. **Welcome:** Lori Andersen, Santa Clara Family Health Plan (SCFHP), welcomed Consumer Advisory Board members to the third Consumer Advisory Board meeting. Health plan representatives, guests, and Consumer Advisory Board members introduced themselves to the group. 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. Members were also informed that the meeting is being recorded for meeting minutes.

2. **In Home Supportive Services Overview (IHSS):** Kingston Lum, IHSS Supervisor, provided a presentation regarding IHSS in Santa Clara County. Kingston discussed how IHSS is structured in the State and within the County. Kingston noted that it is one of California's most expensive and fastest growing social services program. In order to qualify for IHSS, a person will need to be over 65 years old, disabled and/or blind, and require in-home care to be safe in the home and have Medi-Cal and be a resident in Santa Clara County. Kingston discussed the type of IHSS program which is known as Independent Provider (IP) that is currently the model operation for Santa Clara County.

The Independent Provider (IP) Mode means that a beneficiary can hire and/or fire their IP as they choose. The maximum hours that a beneficiary can receive is up to 283 for severely impaired and 195 for non-severely impaired. The demographics shows that in Santa Clara County, there are a little over 19,000 recipients receiving IHSS and also have about the equivalent number of IP, of which, 70% are family members that is providing care. The IPs are required to be registered through the Public Registry and are paid \$12.81/hour and is one of the highest rate of pay in California for IPs.

The IHSS Social Worker's primary duties are to conduct an assessment in the home to determine the level of functioning and activities of daily living, for example: housecleaning, cooking, bathing, laundry.) The hours that are approved coincide with the tasks that the recipients are able to or not able to do at home. The Social Workers will then provide the authorization of the monthly hours from the assessment. Reassessment are generally done on an annual basis or if there has been some change in the beneficiary's condition.

Quality Assurance is also in place to make sure that the Social Workers will consistently give an accurate assessment across the board. The IHSS case management database system is called CMIPPS and includes all the information about each IHSS participant's assessment and services. The IHSS Public Authority is the entity that manages the Public Registry of available IHSS workers. They can assist people who need it, with finding an IHSS provider and they also provide training, conduct background checks, and are the employee of record of the provider.

The overall goal for the IHSS program is to keep beneficiaries safe in the home so if there are any issues that may arise, beneficiaries are encouraged to contact their social workers right away. IHSS is a program that has grown a great deal and is expected to continue growing because of Cal MediConnect and the increase in the aging population in the county.

### Questions/Answers - IHSS

**Q: What insurance do you have to have for IHSS?**

A: In order to qualify for IHSS, a beneficiary has to have Medi-Cal.

**Q: If I have Anthem Blue Cross and on the Cal MediConnect program, do I qualify for it?**

A: Yes, if a member is on the Cal MediConnect program, you are eligible for IHSS. A social worker can provide an assessment to determine the needs of the member who is referred to IHSS.

**Q: What if someone is in the hospital and someone requires care after the hospital, does this program apply?**

A: IHSS can assist once the person is back at home. When the person is in the hospital, IHSS can assess the beneficiary's needs for IHSS and help facilitate with the transition. IHSS wants to make sure that the hours are enough for the person to be able to be discharged safely but keep in mind the maximum amount of hours that can be allocated: 283 for severely impaired and 195 for non-severely impaired.

**Q: How are the hours allocated for instance: only 1 hour of shopping is approved per week and that is not enough?**

A: The actual hours are only for the actual act of shopping not the transportation. That is how IHSS is required to calculate the hours. If you are on IHSS, when the social worker does a reassessment, it's important to tell them so that he/she can understand all your needs and what has changed.

**Q: Does the Registry have bilingual IPs who can speak Spanish?**

A: Yes, the Registry has IPs that are bilingual with the primary languages being Spanish, Vietnamese, Russian, Mandarin, Tagalog. If you have a family member or someone you know who would like to provide care, they can also become your provider as long as they register with the IHSS Public Authority.

**Q: If someone lives with a family member lives with them, can they provide the care?**

A: Yes, they can provide the care as long as they are registered with the IHSS Public Authority. Because they also live in the house, the IHSS hours authorized will be adjusted accordingly, especially for the allocation of the domestic chores. The recipient signs off on their bi-weekly timesheet to agree on the number of hours for the home care tasks.

**Q: Past issues have been that when I contact the Social Worker, they would not be willing to assist with the IPs paycheck or say it is not my duty, what can we do then?**

A: Sometimes the timesheets may not be legible so the State returns it and this may cause a delay. If issues are arising that may affect your care, ask to speak with an IHSS Supervisor if the Social Worker is not willing to assist. In addition, there will soon be a health plan liaison for IHSS, so the health plans can be reached to help facilitate some of these issues.

**Q: If you have a special diet need, can the IHSS provider help with the special care?**

A: Yes, if the care is required for your safety and needs, it should be covered.

### 3. Sharing Stories and Ideas

The group had a discussion regarding compilations of stories and issues that are working or not working that would allow all Consumer Advisory Board members to feel comfortable to share these stories, whether in an open forum or privately with the health plan representatives. The stories would not disclose any information with different name, age, etc.

- a. CAB Member stated that her mom was having a hard time getting medical supplies and through the help of Anthem Blue Cross Cal MediConnect, she was able to get the supplies that she needed so she wanted to express her “thanks” to Joaquin who assisted her.
- b. A SCFHP CAB Member was at a doctor’s office and the doctor was not willing to make a referral to Stanford, claiming that this benefit was not available to her. The member was able to get a SCFHP Case Manager on the phone who explained to the physician’s office about his contract with the plan for Cal MediConnect. The member was able to get the referral and appointment.
- c. CAB Member shared that she experienced an unpleasant customer service experience from an RN at a physician’s office and was told that she had to wait to reschedule her appointment for 2 weeks when she needed the care asap for her health issues.
  1. *CAB Members were reminded that they can contact the health plans case managers to assist with any obstacles like this to help facilitate the care and not have to wait for so long to get urgent type care.*
- d. There are issues with unpleasant customer services experiences at physicians’ offices from front line staff.
  1. *Members were encouraged to provide continuous feedback about experiences at these physician’s offices and clinics to help correct these ongoing issues.*

### 4. Questions/Feedback

**Q: How do people not know about Cal MediConnect because I received a lot of mails about it?**

A: There has been a lot of outreach efforts and materials about CMC in Santa Clara County led by a local Communications Committee including many presentations by Shelly Grimaldi (*presented at the first CAB meeting*) from Harbage Consulting. But there is still more to do in terms of outreach so if you know of places that would be interested in having a presentation, such as senior centers, senior housings or any frequented places, that would be appreciated. Shelly Grimaldi from Harbage can be a contact for outreach and education.

**Q: How have the homebound people being reached?**

A: The IHSS Public Authority agency – SourceWise mailed a newsletter with information about these programs to the IHSS recipients and more follow-up can be done. There are also online training webinars with people who work directly with homebound seniors and with programs serving them such as Meals on Wheels and Senior Center Without Walls.

### 5. Next Meeting:

April 29, 2015 @ 11 am at the same location.