

**Santa Clara Family Health Plan  
 Provider Advisory Council  
 December 12, 2012  
 Boardroom**

PAC Attendees: Thad Padua, MD, Peter L. Nguyen, DO, Paul Estess, Kenneth Phan, MD, Bridget Harrison, MD, Karen Anton, Paul Taylor and Carmen Meza-Rocha

Delegated Groups: None

SCFHP Attendees: Matthew Woodruff, Jimmy Lin, MD, Mike Lipman, Jenny Vu, Vivian Than, Stacy Renteria, Diane Brown, Abby Baldovinos, and Sarah Moline

ITEM	DISCUSSION	ACTION	RESPONSIBLE PARTIES	DUE DATE
<b>Meeting Called To Order</b>	Co-Chair Dr. Thad Padua called meeting to order. Welcome to new Committee members Ms. Anton, Dr. Rocha and Mr. Taylor.	None		
<b>Review of Minutes</b>	Meeting minutes are approved by the Committee.	None		
<b>CEO Report</b>	<p><b><u>Dual Demonstration</u></b>            Matthew Woodruff, COO reported out on the progress of the Dual Demonstration project. The State is calling meetings and the regulations should be distributed on December 31<sup>st</sup>. The State has now scheduled a February 14<sup>th</sup> publication of payment/reimbursement rates. Contracts have to be signed by March 1<sup>st</sup>. The State is looking at extending the audit period. June 1<sup>st</sup> the Health Plan is expecting 6,500 members enrolled in the Dual Demonstration program, roughly 1,100 members a month based on the member's birth date or month of member re-determination.</p> <p>Dr. Lim stated some of his Dual members are already receiving notices about choosing a plan. Matt would like to see the letter because he is not aware of any member letters being</p>	None	N/A	N/A

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	<p>distributed by the State or the Health Plan at this time.</p> <p>Mike Lipman spoke about the community stakeholder workgroups around long-term support services and behavioral health for the Dual Demonstration project.</p> <p>Paul Taylor shared with the Committee from what he heard at the Policy Forum Conference: 1. Because of the Dual Demonstration project being a pilot program and funding, the Medicare rules of engagement do not apply around credentialing, etc. 2. Very unlikely that the mental health carve-out will go away. Very unlikely for CMS to do anything about the carve-out. 3. In a 2-plan county, if one plan backs out the county would go forward but no passive enrollment. 4. Mental health financial responsibility should remain as a carve-out.</p> <p>Matt stated as far as the Dual Demonstration project we are scheduling a town hall meeting tentatively February 6<sup>th</sup> open to members and sponsored by Santa Clara Family Health Plan, On-Lok and CareMore.</p> <p><b><u>Healthy Families Transition</u></b>          Members transitioned 4,660 with 438 members required to find a new PCP. The Health Plan has reached 37% of membership by phone and another 34% have contacted us and are in the process of choosing providers. The remaining membership</p>			

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	<p>will be getting letters and will be auto-assigned a new PCP. The auto assignment to a new provider based in member's neighborhood, speaks the same language and see's the appropriate age group of member.</p> <p><b><u>CBAS</u></b>            Membership is 485 members, have contracted providers and the Health Plan is paying claims. Medical management is working harder to compensate for the additional membership.</p>			
<b>Medical Management</b>	<p><b><u>Draft Authorization Policy</u></b> – Diane Brown, Medical Management Director reviewed the retrospective review process via Powerpoint presentation with the Committee. Retro authorizations are not issued passed 30 days of date of service.</p> <p>The goal is intended to clarify the authorization policy revisions with the Committee.            Committee has no questions or concerns.</p> <p><b><u>Authorization Updates for January 2013</u></b> - Authorization changes for 2013 – Jenny Vu reviewed Powerpoint presentation screen with list of services. The Committee discussed ambulance services to be updated around emergency vs. non-emergency ambulance services.</p> <p>Also revise podiatry piece - as it currently reads it does not</p>	Podiatry service	Medical	02/20/13

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	<p>make sense to Dr. Peter Nguyen. Make a PAR for members over 21 years old. Committee agreed to discuss this topic off-line and internally.</p> <p><b>HEDIS Update</b> – Dr. Padua, Medical Director, reviewed his Powerpoint presentation with the Committee. The Committee discussed different measures. There are no metrics for behavioral health yet.</p>	<p>revision on proposed authorization grid</p>	<p>Management/Jenny Vu</p>	
<p><b>Pharmacy</b></p>	<p><b>ForaCare</b> – Sarah Moline, Pharmacy Director, updated the Committee on the new ForaCare glucometer roll out progress. Santa Clara Family Health Plan has worked with Valley Health Plan and ForaCare regarding the accuracy of readings. The purchasing department at Valley health Plan is supplying ForaCare for members. The implementation date is January 1, 2013. Letters have been send to members and providers about the new product. The Pharmacy department is training Walgreens and CVS this Thursday and Friday.</p> <p><b>Pharmacy Request Form</b> – The form is included in the PAC binder for Committee review. It is being distributed and is ready for providers to sign and fax in.</p> <p>Committee discussed online ordering regarding prescriptions. Is Valley Health Plan changing everything over to ForaCare regardless is member is SCFHP or not? No.</p> <p>The Pharmacy department will call pharmacies to make sure the new prescriptions are signed off.</p>			

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<b>Compliance</b>	<b><u>Grievance Report</u></b> – Matt reviewed enclosed grievance report with Committee. Self explanatory and no comments or issues.			
<b>IT/Claims Issues</b>	<b><u>Encounter Data</u></b> – Mike Lipman reviewed the background issue of non-compliance with encounter data issues. Providers do not send because they are on CAP. Committee suggested penalizing providers by withholding cap checks until offices are compliant.  <b><u>Electronic Claims</u></b> – 80% compliance on electronic claims.			
<b>Provider Services</b>	<b><u>PAC Calendar</u></b> – Mike reviewed the proposed 2013 PAC calendar with the Committee.  <b><u>Future CME Topic</u></b> – For the new year – Palliative Care	None	N/A	
<b>Other</b>	Dr. Peter Nguyen stated he is taking care of patients that are not assigned to him and sending patients to specialist that won't see them because of no authorization. Determined that Provider Services needs to educate Dr. Kumar	Education of provider around authorization services	Provider Services	02/20/13
<b>Adjournment</b>	Adjourned at 2:00 pm			

Signature: \_\_\_\_\_

Date: \_\_\_\_\_