

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

Tuesday, February 11, 2020, 12:15 PM – 1:45 PM
 Santa Clara Family Health Plan, Boardroom
 6201 San Ignacio Ave., San Jose, CA 95119

AGENDA

1. Roll Call / Establish Quorum Introduce new employee, Angela Chen, Manager, Utilization Management (UM)	Dr. Padua, Chair Dr. Nakahira	12:15	5 min
2. Public Comment Members of the public may speak to any item not on the agenda; two minutes per speaker. The committee reserves the right to limit the duration of public comment to 30 minutes	Dr. Padua, Chair	12:20	5 min
3. Meeting Minutes Review minutes of the November 13, 2019 Provider Advisory Committee Possible Action: Approve minutes	Dr. Padua, Chair	12:25	5 min
4. Chief Executive Officer Update Discuss SCFHP membership and current topics	Ms. Tomcala	12:30	5 min
5. Pharmacy a. Review and discuss the current drug reports b. Update on the Medi-Cal prior authorization criteria c. Update on the Medi-Cal pharmacy carve out	Dr. Huynh	12:35	15 min
6. Proposition 56 Discuss developmental and trauma screenings	Dr. Nakahira	12:50	10 min
7. Utilization Management a. Review the revised Pre-Authorization Form b. Review the Developmental Screening Flow Chart	Ms. Chen	1:00	10 min
8. Quality a. Review and discuss the results of the Consumer Assessment of Healthcare Providers and Systems (CAHPS) from 2019 b. Review and discuss the 2020 Quality Measures and Provider Performance Program (PPP)	Dr. Liu	1:10	20 min

9. Provider Network Management Updates Review the new Provider Performance Program (PPP) Report Card	Mr. Welch	1:30	5 min
10. Future Agenda Items	All	1:35	5 min
11. Adjournment	Dr. Padua, Chair	1:40	

Next Meeting: Wednesday, May 13, 2020

Notice to the Public—Meeting Procedures

- Persons wishing to address the Utilization Management Committee 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 Committee 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 Amy O'Brien 48 hours prior to the meeting at (408) 874-1997.
- To obtain a copy of any supporting document that is available, contact Amy O'Brien at (408) 874-1997. Agenda materials distributed less than 72 hours before a meeting can be inspected at the Santa Clara Family Health Plan offices at 6201 San Ignacio Ave, San Jose, CA 95119.
- This agenda and meeting documents are available at www.scfhp.com.

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

Wednesday, November 13, 2019, 12:15 – 1:45 PM
Santa Clara Family Health Plan, Boardroom
6201 San Ignacio Ave, San Jose, CA 95119

MINUTES

Committee Members Present

Thad Padua, MD, Chair
Clara Adams, LCSW
Bridget Harrison, MD
David Mineta
Sherri Sager
Meg Tabaka, MD, Resident

Committee Members Absent

Dolly Goel, MD
Jimmy Lin, MD
Peter Nguyen, DO
Hien Truong, MD

Staff Present

Brandon Engelbert, Manager, PNM
Janet Gambatese, Director, PNM
Johanna Liu, Director, PharmD, Quality &
Process Improvement
Laurie Nakahira, DO, CMO
Chris Turner, COO
Christine Tomcala, CEO

Others Present

Michael Griffis, MD, PMGSJ
Robyn Esparza, Administrative Assistant
Angelique Tran, Pharmacy

1. Roll Call/Establish Quorum

Thad Padua, MD, Chair, called the meeting to order at 12:35 pm. Roll call was taken and a quorum was established.

Dr. Michael Griffis, CMO, Physician's Medical Group of San Jose was introduced as a new prospective member of the Provider Advisory Council, appointed by Ms. Christine Tomcala, CEO.

Ms. Janet Gambatese was introduced as the new Director of Provider Network Management.

2. Meeting Minutes

The previous minutes from August 7, 2019 were reviewed.

It was moved, seconded and the August 7, 2019 Provider Advisory Council minutes were unanimously approved.

3. Public Comment

There were no public comments.

4. Chief Executive Officer Update

Ms. Christine Tomcala, CEO, presented the October 2019 Enrollment Summary. She noted a total current enrollment of 245,330, with a breakout of 8,233 members in the Cal MediConnect line of business and 237,095 members in the Medi-Cal line of business. It was also noted the State rolled the Healthy Kids CCHIP membership into the Medi-Cal program. She pointed out there are two (2) members that still fall under Health Kids line of business until December 31, 2019, when it officially ends and these Healthy Kids members will be offered enrollment assistance for the Valley Kids Program.

Ms. Tomcala shared with the committee SCFHP's At a Glance flyer, which demonstrates the member demographics, as well as information related to SCFHP's contracted providers.

Ms. Tomcala noted that the State just released an initiative called California Advancing and Innovating Medi-Cal (CalAIM) which is a multi-year initiative to improve the quality of life and health outcomes of our population by implementing broad delivery system, program and payment reform across the Medi-Cal program. SCFHP has representation on two work groups -Johanna Liu, Director, Quality & Process Improvement, is on the NCQA Workgroup, and Lori Andersen, Director of Long Term Services and Supports, is on the Enhanced Care Management Workgroup.

5. PAC Membership

Dr. Laurie Nakahira, CMO, reminded the council that members must attend 50% of the scheduled meetings as outlined in the charter. Dr. Nakahira noted she reached out to Dr. Dolly Goel, who has not been in attendance in some time, to inquire if she wishes to continue membership.

Ms. Sherri Sager pointed out that the Membership Attendance Roster is incorrect, in that she did not attend the August meeting.

- Roster to be revised to reflect the correct attendance record.

6. Pharmacy

Ms. Angelique Tran, Prior Authorization Supervisor, Pharmacy, presented the drug utilization reports on the 'Top 10 Drugs by Total Cost' and 'Top 10 Drug Classes by Prior Authorization Volume' for the date range 07/01/2019 – September 30, 2019.

Dr. Michael Griffis, CMO, Physicians' Medical Group San Jose, inquired about the following two matters: (1) Is Vancomycin oral or IV administration on the prior authorization report, and (2) Inquiry into Hepatitis C utilization and whether it is decreasing over time.

- Ms. Tran to take back Dr. Griffis' questions for Dang Huynh, Director, Pharmacy.

Ms. Tomcala commented about Medi-Cal carve-out continuing to move forward. The effective date is January 2021. Mr. Mineta inquired if any other states are doing the same. Dr. Griffis also inquired if they factored in the cost of increased stays in hospital. Per Dr. Johanna Liu, the state would create and maintain a formulary in the carve-out.

7. Quality

Johanna Liu, PharmD, Director of Quality & Process Improvement, presented the council with the Medi-Cal Wellness Rewards Program 2019 Summary. The program's target population is children's health (i.e., well-child visits in the first 15 months of life; 6 visits within 15 months; well-child visit, ages 3-6, who have not completed a well-child visit in the last year; adolescent well-care visit), women's health (prenatal program), and chronic disease management (asthma and diabetes). As an incentive, the health plan is providing gift cards for eligible compliant members in said target populations between the eligibility dates of 1/1/19-12/31/19. Dr. Liu noted this is no longer a manual process, where the form would be mailed to the member, who would then take to their MD's office, and then returned said completed form to health plan for validation. Now, the health plan is running data on claim and encounters, so nobody has to sign/attest that the appointment happened. A vendor will now mail out and the member can select their preferred gift card to help incentivize members. It was noted the process could take several months for member to receive their gift card depending on when the provider submits their claim or encounter data.

Council members voiced their appreciation for doing away with the manual process. Dr. Liu inquired if the council had any suggestions for any other areas they would like to focus. Colorectal screening was suggested. Dr. Harrison also suggested maternal mortality rate, as it is a great opportunity to get birth control post-partum as it is hard to get members back into clinic after delivery.

8. Utilization Management

There were no items to discuss at this time.

9. PNM Updates

There were no items to discuss at this time.

10. Old Business

Ms. Chris Turner, COO, noted that due to time constraints, there was no discussion at last month's meeting on Provider Communication topic. For the record, she noted the health plan is working on improving provider communication and looking into best practices by others. Currently, provider communications are blasted via fax to independently contracted providers. Communications are sent to our delegate admins and they push them out to their providers. Communications are also posted to our portal for provider viewing. It was noted that the "open rate" was pretty good on the quarterly e-news. Dr. Padua, Chair, shared he, personally, prefers faxed communications, as he doesn't have to open emails.

- Council members encouraged to forward their preferences of communication (i.e., via email or continued faxing.)

11. New Business

SCFHP Calendar for all SCFHP's Committee meetings for 2020 presented to council. It was noted that PAC's standing meeting date of the 2nd Wednesday of February, May, August, and November, conflicts with the Quality Committee and there are members that sit on both committees. In addition, the November 11, 2020 meeting falls on Veteran's Day holiday. The agreed upon meeting dates for 2020 will be as follows: Tuesday, February 11, 2020; Wednesday, May 13, 2020; Wednesday, August 12, 2020, and Tuesday, November 10, 2020.

- A new meeting invitation for the year will be sent out.

12. Discussion / Recommendations

Continued Medical Education (CME)

There was a brief discussion about the health plan's Continued Medical Education (CME) event(s). Dr. Laurie Nakahira, CMO, welcomed idea topics for CME planning. She noted that the last CME event on Behavioral Health was exceptional with about 140 attendees. Ms. Sherri Sager, Lucile Packard Children's Hospital / Stanford, suggested a topic on social determinants of health barriers.

- Council members encouraged to submit any further CME topics for consideration.

Council Members Appreciation

Dr. Liu noted the goodie bag containing a SCFHP insulated water bottle was in appreciation for the council members' participation for the 2019 calendar year.

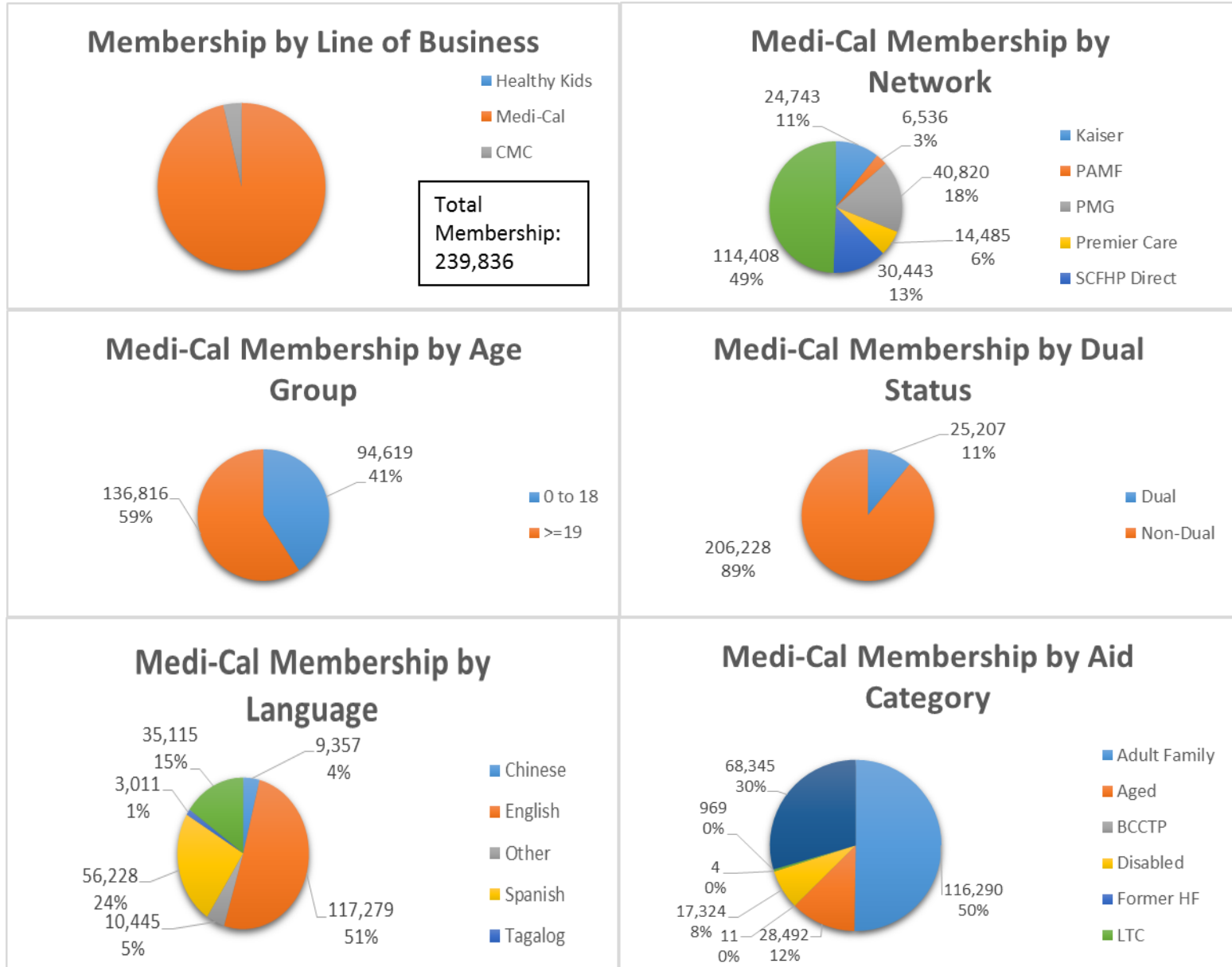
13. Adjournment

The meeting was adjourned at 1:30 pm. The next meeting is scheduled for February 11, 2020.

Dr. Thad Padua, Chair

Date

**ENROLLMENT SUMMARY
JANUARY 2020**



Medi-Cal Membership by Age Group and Network
January 2020

Age Group	SCFHP						Premier	Total	%
	Direct	VHP	Kaiser	PAMF	PMG	Care			
0 to 6	1,751	13,153	3,702	523	5,875	1,041	26,045	11.3%	
6 to 17	5,098	29,553	7,746	1,574	15,467	3,997	63,435	27.4%	
18 to 34	3,869	26,313	5,402	1,133	7,626	2,974	47,317	20.4%	
35 to 44	1,680	9,758	1,973	436	2,710	1,201	17,758	7.7%	
45 to 54	1,733	9,925	1,734	447	3,490	2,206	19,535	8.4%	
55 to 64	2,163	13,167	1,890	630	4,054	2,564	24,468	10.6%	
65 to 74	6,188	6,780	833	386	1,009	362	15,558	6.7%	
75 to 84	5,200	4,255	920	882	502	118	11,877	5.1%	
>= 85	2,761	1,504	543	525	87	22	5,442	2.4%	
Grand Total	30,443	114,408	24,743	6,536	40,820	14,485	231,435	100.0%	
Percentage	13.2%	49.4%	10.7%	2.8%	17.6%	6.3%	100.0%		

Santa Clara Family Health Plan 2019 Q4 Top 10 Drugs by Total Cost

Fill date: 10/1/2019 – 12/31/2019

SAC01 – Medi-Cal

	Label Name	Total Cost	Patient Paid	Plan Paid	% of Total Plan Paid	Generic % of Plan Paid	Total Claims	% of Total Claims	Generic % of Total Claims	Plan Paid / Day	Plan Paid / Claim
1	HUMIRA PEN 40 MG/0.8 ML	\$1,573,002	\$0.00	\$1,573,002	5.2%	0.0%	288	0.1%	0.0%	\$194.73	\$5,461.81
2	TRULICITY 1.5 MG/0.5 ML PEN	\$1,020,353	\$0.00	\$1,020,364	3.3%	0.0%	1,185	0.2%	0.0%	\$28.25	\$861.07
3	FREESTYLE LITE TEST STRIP	\$950,571	\$0.00	\$950,577	3.1%	0.0%	7,808	1.6%	0.0%	\$3.03	\$121.74
4	MAVYRET 100-40 MG TABLET	\$894,162	\$0.00	\$894,162	2.9%	0.0%	140	0.0%	0.0%	\$456.21	\$6,386.87
5	BASAGLAR 100 UNIT/ML KWIKPEN	\$847,035	\$0.00	\$847,037	2.8%	0.0%	3,563	0.7%	0.0%	\$7.86	\$237.73
6	TRULICITY 0.75 MG/0.5 ML PEN	\$678,984	\$0.00	\$678,989	2.2%	0.0%	825	0.2%	0.0%	\$28.70	\$823.02
7	TAGRISSO 80 MG TABLET	\$536,941	\$0.00	\$536,941	1.8%	0.0%	36	0.0%	0.0%	\$497.17	\$14,915.02
8	ENBREL 50 MG/ML SURECLICK	\$467,783	\$0.00	\$467,783	1.5%	0.0%	86	0.0%	0.0%	\$189.85	\$5,439.34
9	ALBUTEROL HFA 90 MCG INHALER	\$421,914	\$0.00	\$421,915	1.4%	100.0%	8,811	1.8%	100.0%	\$2.12	\$47.89
10	XARELTO 20 MG TABLET	\$406,567	\$0.00	\$406,567	1.3%	0.0%	724	0.1%	0.0%	\$15.15	\$561.56
Totals for Top 10		\$7,797,312	\$0.00	\$7,797,337	25.6%	5.4%	23,466	4.7%	37.5%	\$10.83	\$332.28
Totals for SAC		\$30,482,037	\$11	\$30,482,239	100.0%	26.5%	498,023	100.0%	90.3%	\$1.85	\$61.21

SAC06 – Cal MediConnect

	Label Name	Total Cost	Patient Paid	Plan Paid	% of Total Plan Paid	Generic % of Plan Paid	Total Claims	% of Total Claims	Generic % of Total Claims	Plan Paid / Day	Plan Paid / Claim
1	JANUVIA 100 MG TABLET	\$266,191	\$727	\$265,464	2.6%	0.0%	316	0.4%	0.0%	\$14.06	\$840.08
2	FREESTYLE LITE TEST STRIP	\$254,622	\$0.00	\$254,622	2.5%	0.0%	1,630	2.0%	0.0%	\$2.71	\$156.21
3	BIKTARVY 50-200-25 MG TABLET	\$241,229	\$15	\$241,215	2.4%	0.0%	81	0.1%	0.0%	\$100.01	\$2,977.96
4	INVEGA SUSTENNA 234 MG/1.5 ML	\$226,224	\$15	\$226,209	2.2%	0.0%	84	0.1%	0.0%	\$95.85	\$2,692.97
5	XELJANZ 5 MG TABLET	\$213,170	\$18	\$213,152	2.1%	0.0%	50	0.1%	0.0%	\$143.54	\$4,263.04
6	TRULICITY 1.5 MG/0.5 ML PEN	\$212,594	\$176	\$212,418	2.1%	0.0%	221	0.3%	0.0%	\$25.94	\$961.17
7	HUMIRA PEN 40 MG/0.8 ML	\$180,846	\$0.00	\$180,846	1.8%	0.0%	30	0.0%	0.0%	\$215.29	\$6,028.21
8	TRADJENTA 5 MG TABLET	\$177,080	\$431	\$176,649	1.7%	0.0%	195	0.2%	0.0%	\$13.53	\$905.89
9	LANITUS SOLOSTAR 100 UNIT/ML	\$175,369	\$671	\$174,698	1.7%	0.0%	379	0.5%	0.0%	\$8.38	\$460.95
10	RESTASIS 0.05% EYE EMULSION	\$153,174	\$457	\$152,718	1.5%	0.0%	215	0.3%	0.0%	\$17.08	\$710.31
Totals for Top 10		\$2,100,500	\$2,510	\$2,097,991	20.7%	0.0%	3,201	4.0%	0.0%	\$12.28	\$655.42
Totals for SAC		\$10,204,931	\$65,293	\$10,139,489	100.0%	13.0%	80,903	100.0%	83.5%	\$2.52	\$125.33

Authorizations are based on covered benefits and medical necessity. Authorizations are contingent upon member's eligibility and are not a guarantee of payment. The provider is responsible for verifying the member's eligibility on the date of service. **Important: Appropriate clinical documentation is required to support your request.**

Member Information		Type of Request (please check <u>only one</u>)	
Last Name:		<input type="checkbox"/> Routine	Medi-Cal: 5 business days Cal MediConnect: <u>14 calendar days</u>
First Name:			
Member ID:		<input type="checkbox"/> Urgent	<u>72 hours</u> Inappropriate use will be monitored
DOB:			
Line of Business:	<input type="checkbox"/> Medi-Cal <input type="checkbox"/> Cal MediConnect	<input type="checkbox"/> Retro	<u>30 calendar days</u> <i>Only granted for member eligibility on DOS</i> Date of Service: _____

Requesting Provider					
Name:			Specialty/Dept:		
Address:					
City:		State:		Zip:	
Office Contact:		Phone:		Fax:	
NPI #:		TIN #:			

Rendering Provider/Facility					
Name:			Specialty/Dept:		
Address:					
City:		State:		Zip:	
Office Contact:		Phone:		Fax:	
NPI #:		TIN #:			
<input type="checkbox"/> Non-Contracted. Reason for out of network request:					

Service Requested:	<input type="checkbox"/> Inpatient (Elective)	<input type="checkbox"/> Skilled Nursing Facility	<input type="checkbox"/> Home Health
	<input type="checkbox"/> Provider Office	<input type="checkbox"/> Outpatient	<input type="checkbox"/> DME
ICD-10 Code(s)			

No.	CPT/HCPCS	Description	Mod	Quantity	
				Unit(s)	Visit(s)
1.					
2.					
3.					
4.					
5.					

Please attach separate page if you have additional line items.

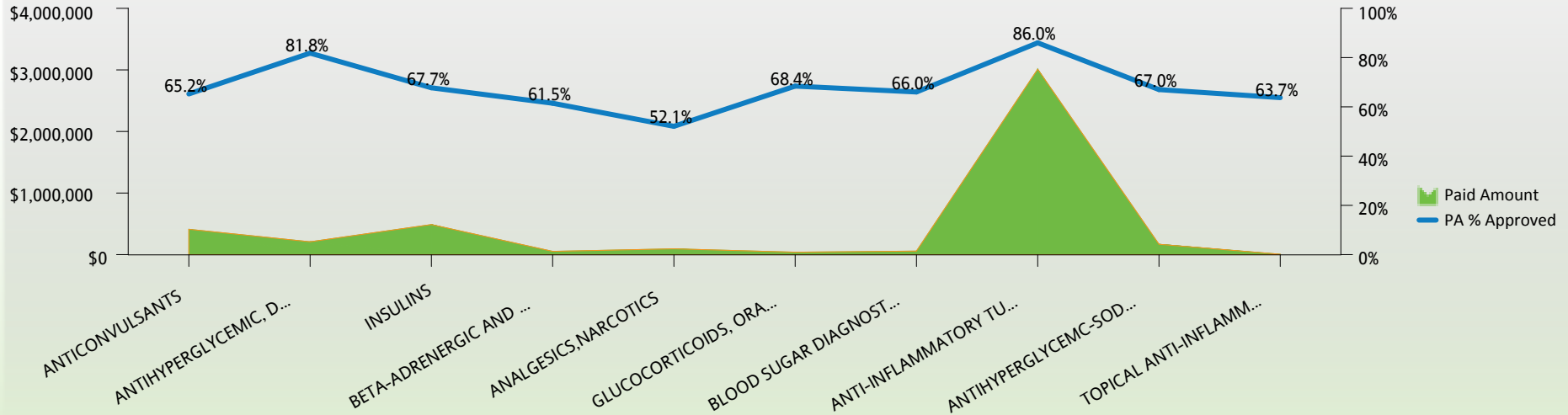
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Therapeutic PAs

SAC01 - Medi-Cal

Report Period: 10/01/2019 to 12/31/2019
Comparison Period: 10/01/2018 to 12/31/2018

Top Drug Classes by PA Volume



Top Drugs by PA Volume

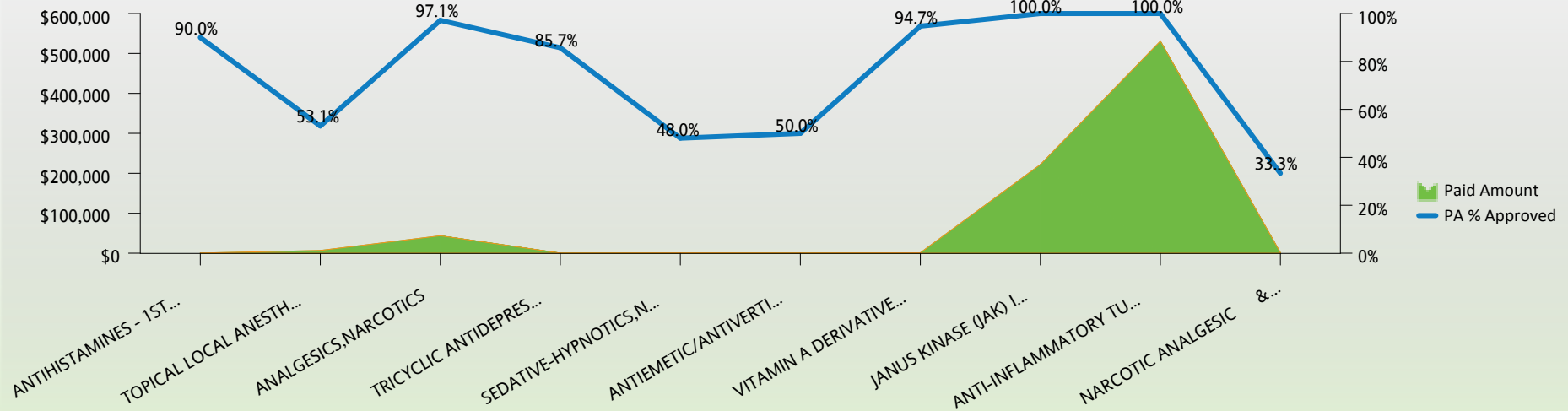
Rank	Prior Rank	Drug Name	PA Count	% Approved	Rx Count	Plan Paid	Paid per Rx
1	2	DICLOFENAC SODIUM	87	67.8%	161	\$6,728.45	\$41.79
2	340	SYMBICORT	86	61.6%	65	\$23,275.91	\$358.09
3	21	JANUVIA	78	76.9%	212	\$100,616.79	\$474.61
4	38	FLOVENT HFA	76	73.7%	105	\$26,804.30	\$255.28
5	4	TRETINOIN	73	69.9%	79	\$37,788.86	\$478.34
6	22	JARDIANCE	67	73.1%	163	\$116,056.70	\$712.00
7	13	TACROLIMUS	64	51.6%	44	\$10,016.92	\$227.66
8	65	ASSURE PLATINUM	63	68.3%	112	\$5,964.80	\$53.26
9	5	XIFAXAN	52	57.7%	111	\$282,381.16	\$2,543.97
10	9	TRULICITY	52	80.8%	225	\$172,900.62	\$768.45
Totals for Top 10			698	68.2%	1,277	\$782,534.51	\$612.79
Totals for All			4,054	58.8%	9,596	\$14,723,979.92	\$1,534.39

Therapeutic PAs

SAC06 - Cal MediConnect

Report Period: 10/01/2019 to 12/31/2019
Comparison Period: 10/01/2018 to 12/31/2018

Top Drug Classes by PA Volume



Top Drugs by PA Volume

Rank	Prior Rank	Drug Name	PA Count	% Approved	Rx Count	Plan Paid	Paid per Rx
1	3	HYDROXYZINE HCL	41	97.6%	31	\$238.65	\$7.70
2	2	LIDOCAINE	40	55.0%	46	\$4,853.16	\$105.50
3	206	AMITRIPTYLINE HCL	25	96.0%	13	\$183.91	\$14.15
4	5	ZOLPIDEM TARTRATE	24	45.8%	56	\$159.72	\$2.85
5	90	TRETINOIN	19	94.7%	8	\$1,058.09	\$132.26
6	206	BUPRENORPHINE	18	100.0%	32	\$10,729.80	\$335.31
7	12	XIFAXAN	14	57.1%	48	\$87,822.98	\$1,829.65
8	55	XELJANZ	12	100.0%	50	\$213,151.78	\$4,263.04
9	90	VANCOMYCIN HCL	10	90.0%	8	\$2,384.39	\$298.05
10	206	ESTRADIOL	10	70.0%	1	\$61.17	\$61.17
Totals for Top 10			213	79.3%	293	\$320,643.65	\$1,094.35
Totals for All			686	65.7%	1,897	\$2,460,695.71	\$1,297.15



**Santa Clara Family
Health Plan™**

CMC Consumer Assessment of Healthcare Providers and Systems (CAHPS) 2019 Results

Johanna Liu, Director, Quality & Process Improvement

CAHPS 2019

Overview

- CAHPS is a consumer satisfaction survey that the health plan is required to administer annually by the Centers for Medicare and Medicaid Services (CMS)
- SCFHP contracts with DSS to conduct the survey
- Results available annually in the Fall and published by CMS
- Results impact NCQA accreditation and CMS Star Ratings



CAHPS 2019

Methodology

- Conducted telephonically and by mail March '19 – May '19
 - 2 mailings
 - 6 telephone calls
- SCFHP mails two reminder postcards to members
- Sample size = 1,600 CMC members
- Official survey sent in English, Spanish, Chinese and Vietnamese



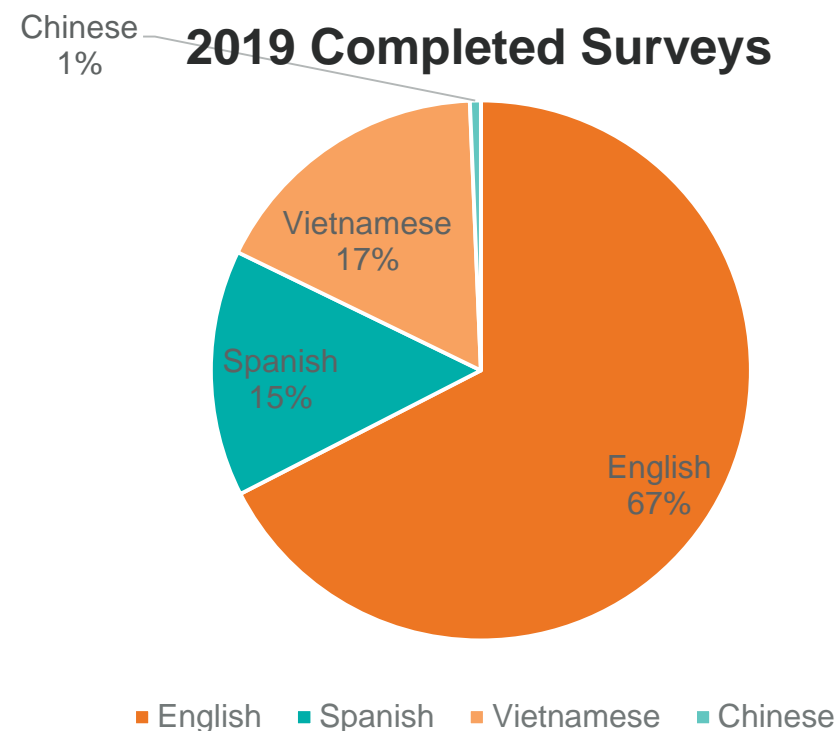
CAHPS 2019

Survey Response Breakdown:

Beneficiaries eligible for the survey were those 18 years and older who were enrolled in the plan and had been continuously enrolled for six months or longer (at the time of the sample draw).

Response Rate: 28.8%

Sample size:	1600
Ineligibles:	65
Total Completed Surveys:	461
-Mail:	348
-Phone:	113



CAHPS 2019

2019 Updates

- Implemented Chinese and Vietnamese language surveys
- 2019 Response Rate = 28.8%
 - +2.7 percentage points from 2018 response rate
 - CA MMP average response rate in 2019 was 27.9%
- CAHPS reminder in February 2019 Provider newsletter
- CAHPS notification in Spring 2019 CMC Member newsletter
- Provided feedback to contracted provider groups regarding CAHPS 2018 performance
- Maintained +800 member oversample to the standard 800 members of the official survey



CAHPS 2019

SCFHP's Overall Performance

- SCFHP's overall performance similar to 2018
- Added languages did not lead to significantly different results
- Per DSS analysis, there were no statistically significant changes compared to prior year (2018)
- The **Customer Service** composite continues to trend upward, significantly increasing over a two year span (2017 – 2019)

CAHPS 2019

Overall Performance: Providers

	SCFHP Mean Score			Yr/Yr Change		National MMP Mean Score	CA MMP Mean Score	ABC + Caremore Mean Score
	2017	2018	2019	17/'19	18/'19	2019	2019	2019
Composite								
Getting Needed Care	3.17	3.25	3.32 ↑	0.15 ↑	0.07	3.45	3.38	N/A
Getting Appointments and Care Quickly	3.02	3.15	3.18 ↑	0.16 ↑	0.03	3.33	3.24	3.19
Doctors Who Communicate Well	N/A	N/A	N/A	N/A	N/A	3.73	3.70	N/A
Care Coordination	3.52	3.47	3.50 ↓	(0.02) ↑	0.03	3.57	3.51	N/A

*ABC + Caremore = Anthem Blue Cross in Santa Clara and Los Angeles Counties

CAHPS 2019

Highest Year/Year Decrease (2018-2019)

		SCFHP Mean Score			Yr/Yr Change		National MMP Mean Score	CA MMP Mean Score	ABC + Caremore Mean Score
Category	Description	2017	2018	2019	17/'19	18/'19	2019	2019	2019
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	2.88	2.71	↑ 0.11	↓ (0.17)	2.85	2.75	2.69

CAHPS 2019

Highest Year/Year Increase (2018-2019)

		SCFHP Mean Score			Yr/Yr Change		National MMP Mean Score	CA MMP Mean Score	ABC + Caremore Mean Score
Category	Description	2017	2018	2019	17/'19	18/'19	2019	2019	2019
Overall Rating of Health Care Quality	0-10 scale. 10 (best), 0 (worst)	8.18	8.30	8.50	↑ 0.32	↑ 0.20	8.50	8.40	N/A

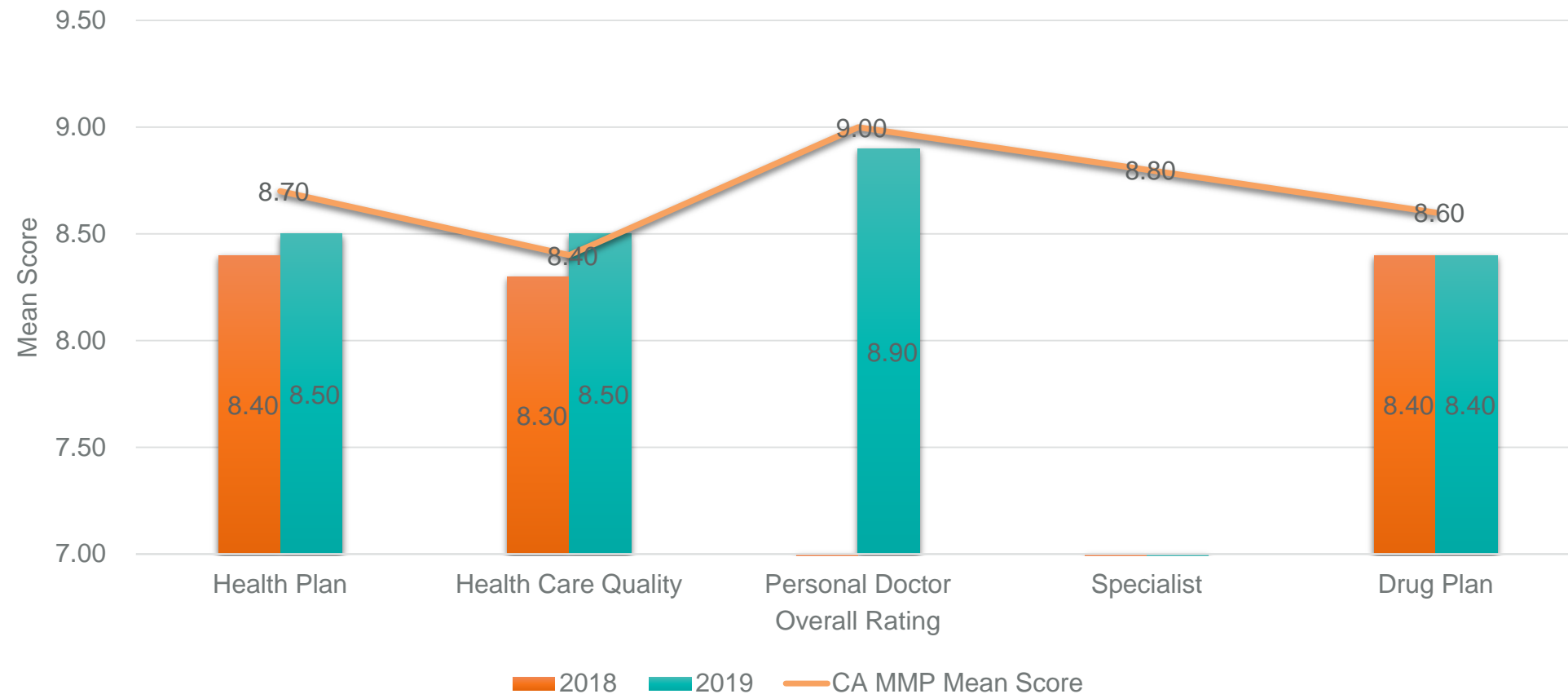
CAHPS 2019

Other Notable Increases

		SCFHP Mean Score			Yr/Yr Change		National MMP Mean Score	CA MMP Mean Score
Category	Description	2017	2018	2019	17/'19	18/'19	2019	2019
Question 10	In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?	3.31	3.31	3.41	↑ 0.10	↑ 0.10	3.47	3.39
Question 34	In the last 6 months, how often did your health plan's customer service give you the information or help you needed?	N/A	3.25	3.36	N/A	↑ 0.11	3.49	3.45
Question 32	In the last 6 months, how often did your personal doctor seem informed and up-to-date about the care you got from specialists?	N/A	3.21	3.32	N/A	↑ 0.11	3.40	3.31
Overall Rating of Health Plan	0-10 scale. 10 (best), 0 (worst)	8.15	8.40	8.50	↑ 0.35	↑ 0.10	8.70	8.70

CAHPS 2019

Overall CAHPS Ratings 2018 to 2019



CAHPS 2019

Opportunities for Improvement*

- Overall Rating of Health Plan
- Overall Rating of Drug Plan
- Overall Rating of Personal Doctor
- Customer Service
 - “In the last 6 months, how often did your health plan's customer service give you the information or help you needed?” (0.09 points below the CA MMP Mean Score)
- Getting Needed Care
 - “In the last 6 months, how often did you get an appointment to see a specialist as soon as you needed?” (0.13 points below CA MMP Mean Score)
- Getting Appointments and Care Quickly
 - “In the last 6 months, how often did you see the person you came to see within 15 minutes of your appointment time?” (Decreased by 0.17 points from 2018)
- Care Coordination
 - Multiple questions that addressed whether or not the member’s doctor talked to them about their prescription drugs scored lower than the CA MMP Mean Score

CAHPS 2019

Next Steps

- Meet with provider groups in monthly quality meetings to deliver results and gather feedback on improving scores for 2020
- Implement cross-functional workgroups to conduct qualitative analyses on CAHPS results and identify interventions to address opportunities for improvement
- Collaborate with Marketing to continue 2020 CAHPS campaign promotion and evaluate other opportunities for outreach





**Santa Clara Family
Health Plan™**



Santa Clara Family Health Plan™

Santa Clara Family Health Plan (SCFHP)

Provider Performance Program - Calendar Year 2020

Johanna Liu, Director, Quality & Process Improvement

Provider Performance Program

SCFHP Provider Performance Program (PPP) Goals

- Improve Healthcare Effectiveness Data and Information Set (HEDIS) preventive care outcomes with focus on electronic medical record and supplemental data.
- Improve overall access and quality of care.
- Improve care for certain high-need, high-cost populations.
- Renewed commitment to early childhood development.
- Improve timeliness and completeness of the Plan's encounter data submissions to regulators.
- Align with new Department of Health Care Services (DHCS) Quality advancements for 2020 Measurement Year.

Provider Performance Program

Department of HealthCare Services (DHCS) Quality Advancements from 2019

- DHCS implemented new Quality advancements in Reporting Year (RY) 2020.
- Advancements:
 - Include Measures from Centers for Medicare & Medicaid Services (CMS) Child and Adult Core Sets.
 - Require Plans to perform at least at the 50% Minimum Performance Level (MPL).
 - Require Plans not meeting the MPL for any of the required measures to do improvement work.
 - Impose immediate sanctions for not meeting MPLs.