

Regular Meeting of the
Santa Clara County Health Authority
Quality Improvement Committee

Wednesday, June 12, 2019, 6:00-8:00 PM
Santa Clara Family Health Plan, Redwood
6201 San Ignacio Ave, San Jose, CA 95119

VIA TELECONFERENCE AT:

Residence
3411 S. Conway Ct.
Kennewick, WA 99337

MINUTES

Voting Committee Members Present:

Ria Paul, MD and Chair
Jimmy Lin, MD, Internal Medicine
Ali Alkoraishi, MD, Psychiatrist
Christine Tomcala, CEO, SCFHP
Laurie Nakahira DO, CMO, SCFHP

Voting Committee Members Absent:

Nayyara Dawood, MD
Jennifer Foreman, MD
Jeffrey Arnold, MA

Committee Members Present:

Chris Turner, Chief Operating Officer
Johanna Liu, Director, Quality and Process Improvement
Sandra Carlson, Director of Medical Management
Robin Larmer, Chief Compliance and Regulatory Affairs Officer
Lori Andersen, Director, Long-Term Services and Support
Mai Chang, Quality Improvement Manager
Mary Perryman, Grievances and Appeals Supervisor
Nancy Aguirre, Administrative Assistant

Via Teleconference:

Carmen Switzer, Provider Network Access Manager

1. Introduction

Dr. Ria Paul called the meeting to order at 6:05 p.m. A Quorum was established.

2. Review and Approval of Meeting Minutes

The minutes of the April 10, 2019 Quality Improvement Committee were reviewed.

It was moved by Dr. Lin and seconded by Dr. Alkoraishi to approve the minutes as written.

3. Public Comment

No Public Comment.

4. CEO Update

Christine Tomcala, CEO, shared the following updates:

As of June 2019, at the Plan has 249,205 enrollees. This is an anticipated decrease from the figure of 250,778 members reported in April, but an increase from the month of May.

Ms. Tomcala stated that, with respect to the Healthy Kids program, the majority of the enrollees will be moved into Medi-Cal later this year, according to the schedule announced by DHCS. Only three children of the approximately 3,500 children enrolled will be considered ineligible, although Ms. Watkins believes there is a strong possibility they will also be found eligible.

No action required. Informational only.

5. Action Items

a. CMC Assessment of Member Cultural and Linguistic Needs and Preferences

Ms. Switzer presented the results of the assessment of SCFHP's provider network's ability to address the cultural, ethnic, racial, and linguistic needs and preferences of the Plan's Cal MediConnect members. The Plan is committed to providing members with language services at no cost, and with equal access to members with hearing or language-related needs. Ms. Switzer reviewed the statistical breakdown of the 3 most common non-English languages spoken, and the percentage of members that speak each.

Ms. Switzer reviewed a statistical breakdown of the CMC providers who speak these same 3 languages, including the high-volume behavioral health providers. Ms. Switzer noted that 52.7% of Santa Clara County citizens are speakers of a language other than English. This is higher than the national average of 21.5%. However, the Plan's analysis indicated that members' needs for services in languages other than English are being met either through languages spoken by providers or through the use of interpreter services.

Dr. Paul raised concern that there is only 1 Chinese-speaking licensed clinical social worker. Ms. Switzer explained that the Plan offers telephonic and face to face interpreter services, and there appear to be no member complaints regarding this issue. The Plan will continue to seek contract providers with diverse backgrounds and language skills.

Action: Chair Paul called for a motion to approve the CMC Assessment of Member Cultural and Linguistic Needs and Preferences. It was moved by Dr. Lin and seconded by Dr. Alkoraishi to approve the CMC Assessment of Member Cultural and Linguistic Needs and Preferences. The motion carried.

b. Review of Population Health Management Strategy 2019

Ms. Carlson reminded the Committee that in its last meeting, the Quality team presented the Population Health Assessment, which identified member population characteristics. The results of that assessment are the foundation of recent revisions to the Population Health Strategy. Ms. Carlson gave a brief summary of the revisions, which include changes to the process for placing members into different risk tiers and programs. At the August QIC meeting, she will present the results of a Population Effectiveness Analysis, which will indicate the Plan's success in meeting the goals and objectives outlined in 2018. Ms. Carlson also gave an overview of the Case Management department goals for 2019.

Action: Chair Paul called for a motion to approve the Review of Population Health Management Strategy 2019. It was moved by Dr. Lin and seconded by Dr. Alkoraishi to approve the Review of Population Health Management Strategy 2019. The motion carried.

c. Review of Quality Improvement Policies

- i. QI.13 Comprehensive Case Management
- ii. QI.15 Transitions of Care
- iii. QI.16 Managed Long-Term Services and Support (MLTSS) Care Coordination
- iv. QI.17 Behavioral Health Care Coordination
- v. QI.18 Sensitive Services, Confidentiality, Rights of Adults and Minors
- vi. QI.19 Care Coordination Staff Training
- vii. QI.20 Information Sharing with San Andreas Regional Center (SARC)
- viii. QI.21 Information Exchange between Santa Clara Family Health Plan and Health Services Department
- ix. QI.22 Early Start Program (Early Intervention Services)
- x. QI.23 Alcohol Misuse: Screening and Behavioral Counseling Interventions in Primary Care
- xi. QI.24 Outpatient Mental Health Services: Mental Health Parity
- xii. QI.25 Intensive Outpatient Palliative Care
- xiii. QI.27 Informing Members of Behavioral Health Services

Ms. Carlson reviewed the Quality Improvement Policies, noting that with just 2 exceptions, there are no substantive changes to the policies. Ms. Carlson noted one substantive change to QI.25 Intensive Outpatient Palliative Care, which removed Cal-Medi-Connect from its scope. Ms. Andersen then addressed changes to QI.16 Managed Long-term Services and Support (MLTSS) Care Coordination, related to the role of MLTSS. Finally, Ms. Carlson reviewed the Behavioral Health Care Policies, to which no substantive changes have been made.

Action: Chair Paul called for a motion to approve the Review of Quality Improvement Policies. It was moved by Dr. Lin and seconded by Dr. Alkoraishi to approve the Review of Quality Improvement Policies. The motion carried.

6. Discussion Items

Appeals and Grievances:

Ms. Mary Perryman, Grievances and Appeals Supervisor, presented an overview of Q1 2019 Grievance and Appeals reporting.

Ms. Perryman's presentation included data for New Case Assignment, Rates per 1,000, Grievances by Category and Sub-Category, and Appeals by Determinations for the Medi-Cal/Healthy Kids and Cal MediConnect lines of business, for medical and pharmacy benefits.

Rates for Grievances and Appeals trended up from January to March for Medi-Cal and Cal MediConnect. This is in part due to the issues experienced with California Home Medical Equipment (CHME). We have been monitoring CHME related grievances and appeals due to significant service concerns and CHME is no longer a preferred DME provider.

Action: The committee requested that future reports provide year over year data for comparison purposes.

7. Committee Reports

a. Credentialing Committee

Dr. Nakahira presented an overview of the April 3, 2019 Credentialing Committee report, noting actions taken, outcomes and re-measurement.

Action: Chair Paul called for a motion to approve the April 3, 2019 Credentialing Committee Report. It was moved by Dr. Lin and seconded by Dr. Alkoraishi to approve the April 3, 2019 Credentialing Committee Report as presented. The motion carried.

b. Pharmacy and Therapeutics Committee

Dr. Lin presented a review of the minutes of the March 21, 2019 Pharmacy and Therapeutics Committee meeting. A discussion ensued regarding AB2760, which is now the law, wherein physicians must document the fact that, as applicable, they offered any patients with a history of opioid abuse a prescription for Narcan.

Action: Chair Paul called for a motion to approve the minutes of the March 21, 2019 Pharmacy and Therapeutics Committee meeting. It was moved by Dr. Lin and seconded by Dr. Nakahira to approve the March 21, 2019 Pharmacy and Therapeutics Committee meeting minutes. The motion carried.

c. Utilization Management Committee

Dr. Lin next presented a review of the minutes of the April 17, 2019 UM Committee meeting.

Action: Chair Paul called for a motion to approve the April 17, 2019 UM Committee meeting minutes. It was moved by Dr. Alkoraishi and seconded by Dr. Lin to approve the April 17, 2019 UM Committee meeting minutes. The motion carried.

d. Compliance Report

Ms. Larmer presented a review of the May 23, 2019 Compliance Activity Report, which includes the preliminary results of the DHCS audit. The DHCS exit conference is scheduled for June 13, 2019.

Ms. Larmer also noted that the Plan is moving into the validation phase of the CMS Program Audit, with the first validation audits beginning in July 2019. discussed that they are now moving into the phases of the independent validation audit, with the 1st phase in July, and the other 4 phases primarily taking place in August and September.

Action: Chair Paul called for a motion to approve the May 23, 2019 Compliance Activity Report. It was moved and seconded to approve the May 23, 2019 Compliance Activity Report. The motion carried.

e. Quality Dashboard

Ms. Liu presented the May 2019 Quality Improvement Dashboard results.

Action: No motion to approve or disapprove was called.

8. Adjournment

The meeting adjourned at 7:47 p.m.

The next QIC meeting is scheduled for Wednesday, August 14, 2019.



Ria Paul, MD Quality Improvement Committee Chairperson

8/29/19

Date