



Regular Meeting of the

## **Santa Clara County Health Authority Compliance Committee**

Thursday February 25, 2021, 2:00 PM – 3:00 PM

Santa Clara Family Health Plan - Teleconference

6201 San Ignacio Ave, San Jose, CA 95119

# **MINUTES**

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### **Members Present**

Tyler Haskell, Interim Compliance Officer  
Sue Murphy, Board Member  
Christine M. Tomcala, Chief Executive Officer  
Neal Jarecki, Executive Financial Officer  
Laurie Nakahira, D.O., Chief Medical Officer  
Jonathan Tamayo, Chief Information Officer  
Chris Turner, Chief Operating Officer  
Ngoc Bui-Tong, VP Strategies and Analysis  
Teresa Chapman, VP Human Resources  
Laura Watkins, VP Marketing and Enrollment

### **Staff Present**

Barbara Granieri, Controller  
Daniel Quan, Medicare Compliance Manager  
Anna Vuong, Compliance Manager  
Sylvia Luong, Audit Program Manager  
Mai-Phuong Nguyen, Oversight Manager  
Sonia Lopez, Compliance Coordinator  
Rita Zambrano, Executive Assistant

### **1. Roll Call**

Tyler Haskell, Interim Compliance Officer, called the meeting to order at 2:01 pm. Roll call was taken and a quorum was established.

### **2. Public Comment**

There were no public comments.

### **3. Meeting Minutes**

The minutes of the November 19, 2020 Regular Compliance Committee meeting were reviewed.

**It was moved, seconded, and the November 19, 2020 Regular Compliance Committee minutes were unanimously approved.**

**Motion:** Ms. Murphy

**Second:** Ms. Tomcala

**Ayes:** Mr. Haskell, Mr. Jarecki, Dr. Nakahira, Ms. Turner, Ms. Watkins, Ms. Bui-Tong, Ms. Chapman, Mr. Tamayo

### **4. Compliance Staffing Update**

Mr. Haskell provided an update on several staffing changes within the Compliance Department, noting three team members have left the organization, and Sonia Lopez has been hired as a Compliance Coordinator. Mr. Haskell also stated there are three open positions and the team was fairly close to making offers to fill all positions.

## 5. Regulatory Audit Report

Mr. Haskell presented regulatory audit updates for the Compliance Program Effectiveness (CPE), DHCS, DMHC, and Medicare Data Validation (MDV) audits. Anna Vuong, Medi-Cal Manager, provided updates on the upcoming state audits, stating that pre-audit documents have been provided to DMHC and DHCS which include policies and procedures, desktop procedures and member files. Mr. Haskell provided updates on outstanding DHCS corrective action plans (CAPs), stating that implementation steps for five out of six CAPs have been completed. Dr. Laurie Nakahira, Chief Medical Officer, provided an update on the CAP for initial health assessments (IHA), stating that three out of six planned implementation steps have been completed.

## 6. Oversight Activity Report

- a. Mai-Phuong Nguyen, Oversight Manager, presented the Compliance Dashboard and noted that measures not met for two consecutive quarters will result in a corrective action plan.

Ms. Nguyen indicated there was currently no data indicating completion of individual care plans for newly enrolled SPD (seniors and persons with disabilities) members. Sue Murphy, Board Member, asked when the data for this metric will be available. Ms. Nguyen responded that the data will be available April 1, 2021.

Ms. Nguyen stated there are no issues with general compliance measures.

- b. Daniel Quan, Medicare Compliance Manager, reported on delegation audits and noted the open audits included Kaiser, PCNC, PMG, and VHP. Mr. Quan stated that the MedImpact audit is closed and that no CAPs were issued. Mr. Quan also stated that the audit of Vision Service Plan (VSP) is also closed, with CAPs issued for staff and provider training as well as implementation of call center metrics and G&A data. Mr. Quan also reported on internal audits and stated that open audits included UM and Quality. Mr. Quan reported that the audit of Claims has been completed with one claim needing to be reprocessed and one data integrity issue. Mr. Quan reported that the audit of Pharmacy has also been completed, with observations to review and update policies and processes. Mr. Quan stated that the SCFHP Website audit has been completed and that an implementation of a prior authorization form into the web portal is currently in progress.

Mr. Quan further presented an overview of the Compliance Program Effectiveness (CPE) audit results conducted by MCS. Mr. Quan reviewed the conditions for not listening to calls during the audit of customer service, as well as for incorrectly classifying an identified deficiency for employee screening as an observation. Ms. Tomcala clarified that listening to call recordings was not an audit requirement, but if calls are recorded, CMS would listen to them during an audit. Mr. Quan stated that other observations included employee training being conducted outside of five days of hire and lack of detail regarding audit results within Compliance Committee meeting minutes. Mr. Quan stated that Compliance will be connecting with internal departments to address the results of the CPE audit.

- c. Mr. Quan presented the Risk Assessment and Audit Work Plan for 2021. Ms. Murphy asked if 2021 Q1 activities have started. Mr. Quan responded that they have not started and that Compliance will begin communications with internal departments to begin audit planning.

## 7. Fraud, Waste, and Abuse Report

Ms. Nguyen reported on Fraud, Waste, and Abuse (FWA), noting that since Jan 1, 2021, there have been a total of 12 suspected leads. Ms. Nguyen stated that the cases involved cost sharing, duplicate billing, drug diversions, and medically unnecessary cases.

Ms. Nguyen explained the FWA process of initial review and preliminary investigation, and stated that three cases were closed as non-FWA, three cases were sent to DHCS, one is undergoing ongoing monitoring, and three potential FWA cases are currently being investigated.

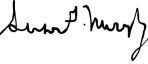


Ms. Nguyen also stated that the FWA team is currently working on two procedures, for the FWA program and FWA management, and hopes to have them done by the next FWA Workgroup meeting to be finalized and approved.

It was noted the Committee should expect to see a written FWA report at future meetings.

## 8. Adjournment

The meeting was adjourned at 2:57 pm. The next meeting will be on May 27, 2021.

DocuSigned by:  


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Susan G. Murphy, Secretary