



Santa Clara  
Family Health Plan  
*The Spirit of Care*



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

Wednesday, May 9, 2018  
12:15 PM – 1:45 PM  
210 E. Hacienda Avenue  
Campbell, CA 95008

### Minutes

#### **Members Present:**

Bridget Harrison, M.D.  
Chung Vu, M.D.  
Thad Padua, M.D., Chair  
Sherri Sager

#### **Members Not Present:**

Dolly Goel, M.D.  
Jimmy Lin, M.D.  
Kingston Lum  
David Mineta  
Peter Nguyen, M.D.

#### **Staff Present:**

Lily Boris, MD, Medical Director  
Jeff Robertson, Chief Medical Officer  
Chris Turner, Chief Operating Officer  
Johanna Liu, Director of QI & Pharmacy  
Sherry Holm, Behavioral Health Program Manager  
Abby Baldovinos, Provider Network Associate  
Art Shaffer, Provider Network Associate  
Claudia Graciano, Provider Network Associate  
Rosa Perez, Provider Network Representative  
Robyn Esparza, Administrative Assistant

#### **ROLL CALL**

Thad Padua, MD, Chair, called the meeting to order at 12:28 pm.  
Roll call was taken and a quorum was not established.

#### 1. **MINUTES REVIEW AND APPROVAL**

Meeting minutes were reviewed. Dr. Padua asked the Council if there were any additional questions or comments regarding the February 1, 2018 meeting minutes.

- ✓ Review and approval of the minutes is deferred to the next meeting.

#### 2. **PUBLIC COMMENT**

- ✓ There were no public comments.

### 3. CHIEF EXECUTIVE OFFICER UPDATE

Dr. Robertson presented the April 2018 Membership Summary, noting the current enrollment is 262,569, with the majority of membership in Medi-Cal.

- Healthy Kids: 3,454 (1%)
- Cal MediConnect: 7,435 (3%)
- Medi-Cal: 251,680 (96%)

With regard to Medi-Cal Membership by Age Group and Network, the following was noted:

- Pediatrics: 41%
- Adults: 59%

Observations regarding the membership of SCFHP include:

- The age of membership is trending toward an older demographic compared, as our younger population ages.
- The decrease in membership was noted as being down approximately 5%. As was noted at the last meeting, the decline in membership since January 2018, continues to be most likely due to undocumented families, disqualifying eligibility due to increases in members' income; as well as families leaving the county due to the lack of affordable housing.

The following current events were noted:

#### a. SCFHP'S NEW BUILDING

Dr. Robertson reminded the council of the upcoming move of the plan's administration offices to South San Jose at the end of July.

### 4. PAC CHARTER

Dr. Robertson advised the council that he, Dr. Boris, Dr. Padua and Ms. Turner met and had a conversation regarding the PAC charter. He presented a revised PAC Charter for review, discussion and approval (Copy attached herein). Ms. Turner reviewed the charter for the council and noted a recommended change (which is noted in red font and highlighted in yellow for reference) as follows: include **"high quality/effective"** preceding "system of care in accordance with the six "C's of care." Council suggested removing the slash, replacing it with the "and" to read **"high quality and effective..."**

- ✓ **Quorum** not present. Will be reviewed for approval at the next meeting.

### 5. QUALITY AND PHARMACY

Ms. Johanna Liu, Director of Quality Improvement and Pharmacy, presented drug utilization reports on the Top 10 Drugs by Total Cost and Top 10 Drugs by Prior Authorization for the date range of 01/01/18 – 03/31/18 (Copy attached herein).

### 6. MEMBERSHIP OF PAC

#### a. Current Membership

The current PAC Roster membership was reviewed (Copy attached herein). Dr. Robertson reminded the council that the Chairperson and members are appointed by the CEO, and serve 2-year terms.

#### b. Proposed Membership

Dr. Robertson queried the council as to the best size and mix of the committee in order to receive input from all aspects of the provider network, and facilitate robust discussion. Dr. Harrison suggested not putting a minimum or maximum number of members, in order to allow flexibility.

Council members shared that the council currently has a good diversity and size, elaborating that it's small enough to be nimble, to have meaningful conversation, to get to know one another and build trust, to facilitate critical conversations and ask questions of each other, which is helpful in terms of the sustainability. There was agreement that it could be beneficial to have representation from the front line, as well as more high volume specialists (i.e, G.I., Cardio, and Obstetrics) and mid-level providers. Dr. Harrison shared O'Conner's educational program includes learning about systems of care, allowing residents blocks in schedules. Ms. Sager suggested chief residents could participate and will invite her chief resident as a guest to the next meeting.

- ✓ Have a formal **conversation** regarding this matter at the next meeting.

7. **SIX C'S OF CARE**

The Six C's of Care come from the PAC Charter and include:

1. Community - engagement and participation of all major stakeholders - i.e. all networks
2. Collaboration - share in best practices and resources to enhance efficiency
3. Coordination - continually improve timely access to specialty care
4. Communication - keep all clinicians up to date on regulations and compliance
5. Caring - promote high patient satisfaction and clinician satisfaction
6. Compassion - provide a medical home for all members

The council was solicited for their feelings/comments around the 6 C's of Care and the committee's role in delivering upon these themes.

Dr. Padua queried the council for input as it relates to interaction with the plan's authorization process and timely access to care and suggested this may be an area of interest for the council to focus upon, including looking at disparities in care. The council agreed that starting off with some education in these areas would be of interest.

8. **DISCUSSION, RECOMMENDATIONS**

The frequency and timing of the meeting was discussed.

Dr. Harrison noted that there were more people in attendance at past meetings. She inquired as to why meetings were cancelled last year. Ms. Turner noted one meeting was cancelled last year due to internal operations and the second cancellation was due to lack of a quorum.

We will confirm that this meeting time is acceptable to the council members.

Ms. Sager complimented the council, noting she has used PAC as an example for several other managed care plans who were creating advisory councils that included just physician issues which isn't adequate. They now use input from ancillary providers which we added over the years on this advisory council.

9. **ADJOURNMENT**

It was moved, seconded, and approved to adjourn the meeting at 2:00pm.



Dr. Thad Padua, Committee Chair



Date