



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

Wednesday, October 21, 2020, 6:00 PM – 8:00 PM
 Santa Clara Family Health Plan, Teleconference
 6201 San Ignacio Ave, San Jose, CA 95119

Minutes - Approved

Members Present

Ria Paul, MD, Chair
 Ali Alkoraishi, MD
 Nayyara Dawood, MD
 Jennifer Foreman, MD
 Jimmy Lin, MD
 Lily Boris, Medical Director
 Christine Tomcala, Chief
 Executive Officer

Members Absent

Jeffery Arnold, MD
 Laurie Nakahira, D.O.,
 Chief Medical Officer

Specialty

Geriatric Medicine
 Adult & Child Psychiatry
 Pediatrics
 Pediatrics
 Internist

Emergency Medicine

Staff Present

Chris Turner, Chief Operating Officer
 Tyler Haskell, Interim Compliance Officer
 Chelsea Byom, Director, Marketing &
 Communications
 Janet Gambatese, Director Provider Network
 Operations
 Johanna Liu, PharmD, Director, Quality &
 Process Improvement
 Raman Singh, Director, Case Management
 Theresa Zhang, Manager, Communications
 Natalie McKelvey, Manager, Behavioral Health
 Carmen Switzer, Manager, Provider Network
 Access
 Lucile Baxter, Manager, Quality & Health
 Education
 Victor Hernandez, Grievance & Appeals
 Quality Assurance Program Manager
 Bryon Lu, Process Improvement Manger
 Carmen Switzer, Provider network Access
 Manager
 Jayne Giangreco, Manager, Administrative
 Services
 Rita Zambrano, Executive Assistant

1. Roll Call

Ria Paul, MD, Chair, called the meeting to order at 6:03 pm. Roll call was taken and a quorum was established.

2. Public Comment

There were no public comments.

3. Meeting Minutes

Minutes of the August 12, 2020 Quality Improvement Committee (QIC) meeting were reviewed.

It was moved, seconded and the minutes of the August 12, 2020 meeting were unanimously approved.



Motion: Dr. Dawood
Second: Dr. Alkoraishi
Ayes: Dr. Alkoraishi, Dr. Boris, Dr. Dawood, Dr. Foreman, Dr. Paul, Ms. Tomcala
Absent: Dr. Arnold, Dr. Foreman, Dr. Lin

4. CEO Update

Christine Tomcala, Chief Executive Officer, reported the current Plan membership is 266,000 members. Of which, approximately 9,600 are Cal MediConnect (CMC) members and 256,500 are Medi-Cal members. Santa Clara Family Health Plan's (SCFHP) membership continues to increase. However, this increase isn't caused by new members, but rather by their redeterminations that are on hold due to the public health emergency.

Ms. Tomcala spoke to the Pharmacy benefit being transitioned on January 1, 2021. A state-wide Pharmacy Benefit Manager (PBM), Magellan, will be responsible for all Medi-Cal pharmacy benefits. This will include enteral nutrition amongst others. Dang Huynh, Director, Pharmacy and Therapeutics, and the Pharmacy team are currently working on a transition plan. With a major transition such as this, SCFHP anticipates some hiccups, but is hopeful for a smooth transition for our members.

Ms. Tomcala announced a second outbreak of COVID-19 within the skilled nursing facilities (SNF) over the past couple of weeks. There was an issue with one SNF in particular, Gilroy Healthcare and Rehab, a Covenant Care Facility. An outbreak occurred within this center and was reported on the news just this last week. The outbreak started in the summer, however, Gilroy Healthcare and Rehab was not forthcoming in reporting members with COVID-19 to SCFHP when asked. SCFHP learned a number of our members within Gilroy Healthcare and Rehab had COVID-19, and some of which, have passed on.

Dr. Alkoraishi inquired if it's possible to obtain a copy of the Magellan pharmacy benefit formulary, specific to psychotropic medication. Dr. Boris spoke to this and shared she does not expect changes for psychotropic medications, as they are a Medi-Cal carve out for fee-for-service. SCFHP does not oversee this formulary. No further questions were asked.

Dr. Foreman joined the meeting at 6:13pm

5. Annual Assessment of Physician Directory Accuracy Report 2020

Janet Gambatese, Director, Provider Network Operations, reviewed the Annual Assessment of Physician Directory Accuracy Report 2020. Ms. Gambatese presented a high level overview of goals SCFHP did not meet, their barriers, and how SCFHP can overcome them.

Dr. Paul asked why the provider participation was so, with only 60 providers. Ms. Gambatese explained the survey is administered to a select 60 providers. No further questions were asked.

It was moved, seconded and the Annual Assessment of Physician Directory Accuracy Report 2020 was unanimously approved.

Motion: Dr. Foreman
Second: Dr. Alkoraishi
Ayes: Dr. Alkoraishi, Dr. Boris, Dr. Dawood, Dr. Foreman, Dr. Paul, Ms. Tomcala
Absent: Dr. Arnold, Dr. Lin

6. Provider Satisfaction Survey MY2020 Analysis

Dr. Lin joined the meeting at 6:31pm.

Carmen Switzer, Provider Network Access Manager, presented the Provider Satisfaction Survey (PSS) MY2020 Analysis. Ms. Switzer reviewed SCFHP's goals and objectives, the methodology, results of the PSS, and any areas for improvement.

Dr. Paul asked why there wasn't participation from Palo Alto Medical Foundation (PAMF) this year. Ms. Switzer explained the most SCFHP can do is hope the providers will complete the survey.

Dr. Lin asked if there is an incentive for the providers to complete the PSS. Ms. Switzer confirmed incentives are not provided, as the hope is that providers would want to provide input so that SCFHP can make improvements. Ms. Switzer added she will follow up with PAMF to increase their participation.

It was moved, seconded and the Provider Satisfaction Survey MY2020 Analysis was **unanimously approved.**

Motion: Dr. Lin

Second: Dr. Dr. Dawood

Ayes: Dr. Alkoraishi, Dr. Boris, Dr. Dawood, Dr. Foreman, Dr. Lin, Dr. Paul, Ms. Tomcala

Absent: Dr. Arnold

7. Call Code Analysis for Assessing Member Understanding of Policies and Procedures

Theresa Zhang, Manager, Communications, presented the Call Code Analysis for Assessing Member Understanding of Policies and Procedures. Ms. Zhang reviewed how SCFHP completed the analysis, its findings, and the opportunities for improvement.

Dr. Dawood asked if the member's preference in communication is determined by an SCFHP administered survey. Ms. Zhang explained that a postcard or form is being developed, rather than a survey, to mail to members. On this postcard or form, members can check the appropriate boxes to indicate their preferred method of communication and fill in their contact information. Ms. Zhang mentioned that the postcard and form are still in a preliminary stage, and ongoing discussions and planning are taking place.

No further questions were asked.

8. PHM 2C Activities and Resources

Natalie McKelvey, Manager, Behavioral Health, reviewed the PHM 2C Activities and Resources. Ms. McKelvey highlighted some of the populations identified in the assessment and how SCFHP is addressing their needs.

The QIC discussed the following needs and changes to programming, resources, and the community resources available to address these identified needs from the population assessment.

Members over 75 or adults with disabilities and have a dependency for 3 or more activities of daily living who currently reside in the community or a LTC facility have needs around transitions of care, personal care and social determinants of health such as food security. To address these complex needs, CM programs conduct a comprehensive assessment of ADLs, social determinants of health, financial management and more. Aunt Bertha, a large inventory of resources in the community, is now available organizationally to assist with the identification and coordination of community resources and social services for these members during this transition. Updates are made to this inventory as new resources become available. The intensive support needed for successful transition indicated additional staffing was warranted. Added a dedicated RN CM for members transitioning from LTC back to the community.

Members who are experiencing homelessness or housing instability had frequent hospitalization and multiple barriers to care related to social determinants of health. Added the Homeless Management Information System (HMIS) to the community resources list.

Members with SMI had frequent ED visits and a lack of sufficient connections with primary care physicians. BH Program identified a need for more intensive follow up after hospitalization to connect members with appropriate BH and Medical follow-up. BH CM team members were dedicated to conducting more frequent outreach. The team works closely with community based organizations to address the member's needs.

Dr. Paul asked for clarification as to what HMIS is. Ms. McKelvey explained HMIS is a county-run health management system, which can assess a member's food and housing needs, as well as offer available resources.

It was moved, seconded, and the PHM 2C Activities and Resources were **unanimously approved.**

Motion: Ms. Tomcala
Second: Dr. Lin
Ayes: Dr. Alkoraishi, Dr. Boris, Dr. Dawood, Dr. Foreman, Dr. Lin, Dr. Paul, Ms. Tomcala
Absent: Dr. Arnold

9. Consumer Assessment of Healthcare Providers and Systems (CAHPS) Survey 2020

Johanna Liu, Pharm D, Director, Quality & Process Improvement, presented the CAHPS Survey 2020. Dr. Liu presented the CAHPS Survey objectives, timeline, response rate, 2020 updates, overall performance, and ratings. Dr. Liu reviewed the opportunities for improvement and the next steps in improving the work plan.

This concludes Dr. Liu's presentation. No questions were asked.

10. CY 19 HEDIS Measures Below MPL Analysis

Lucile Baxter, Manger, Quality Improvement, presented the four (4) HEDIS measures that performed below the MPL levels in 2019. These measures included: Asthma Medication Ration (AMR), Adolescent Well Care Visit (AWC), Cervical Cancer Screening (CCS), and Comprehensive Diabetes Care – HbA1c Testing (CDC-HT).

Ms. Baxter reviewed the current interventions for members and providers to help increase the rates on these HEDIS measures. Dr. Lin suggested SCFHP offer incentives to members for greater participation. Ms. Baxter explained the current incentives available for members. Dr. Foreman, VHP, would like to collaborate with SCFHP to help increase the completion rate of these measures. Ms. Baxter will connect with Dr. Foreman offline.

11. Policies

Ms. McKelvey reviewed minor changes to the policies. No questions were asked.

- a. QI.17 Behavioral Health Care Coordination. Minor sentence restructure in section II.B.
- b. QI.20 Information Sharing with San Andreas Regional Center (SARC). The APL was updated in section II.A.3.
- c. QI.21 Information Exchange Between SCFHP & County of Santa Clara Behavioral Health Services Department. No changes required.
- d. QI.22 Early Start Program. No changes required.
- e. QI.23 Alcohol Misuse: Screening and Behavioral Counseling Interventions in Primary Care (SBIRT). The Gateway Access phone number was updated in section II.D.

It was moved, seconded, and the Policies QI.17, QI.20, QI.21, QI.22, QI.23 were unanimously approved.

Motion: Dr. Lin
Second: Dr. Dawood
Ayes: Dr. Alkoraishi, Dr. Boris, Dr. Dawood, Dr. Foreman, Dr. Lin, Dr. Paul, Ms. Tomcala
Absent: Dr. Arnold

12. 2021 Board and Committee Meeting Calendar

Dr. Liu presented the 2021 Board and Committee Meeting Calendar. Dr. Liu reviewed the dates for the QIC meetings, and pointed out one of the QIC meeting dates that was moved outside of the regular meeting pattern.

There were no issues with the shared QIC meeting dates for 2021. This concludes Dr. Liu's presentation.

13. Grievance and Appeals Report Q2 2020

Victor Hernandez, Grievance & Appeals Quality Assurance Program Manager, presented the Grievance and Appeals Report for Q2 2020. Mr. Hernandez noted a decrease in cases received this year. This was likely due to COVID-19.

Mr. Hernandez reviewed the top three (3) Medi-Cal and CMC Grievance categories. Also reviewed were the grievances and appeals by network, vendor, reason, and the rational for overturns.

Ms. Tomcala suggested presenting the grievance rates moving forward. Mr. Hernandez agreed to include this in future QIC presentations. No further questions were asked.

14. Quality Dashboard

Dr. Liu presented the Quality Dashboard. Dr. Liu reviewed the completion rates for the Initial Health Assessment (IHA) and Potential Quality of Care Issues (PQI). Also reviewed were SCFHP's Member Incentives, Outreach Call Campaign, Health Homes Program (HHP), and Facility Site Review (FSR).

No questions were asked.

15. Compliance Report

Tyler Haskell, Interim Compliance Officer, presented the Compliance Report. Mr. Haskell reviewed the recent and ongoing audit activity. Mr. Haskell announced the CMS Program Audit has been officially closed out and expressed his felicitations to the various departments and staff involved.

Dr. Lin inquired when the next CMS Program Audit would be conducted. Mr. Haskell confirmed the next CMS Program Audit would be in 2022.

Mr. Haskell announced the Compliance Program Effectiveness (CPE) Audit will be launched soon. Any findings will not be reported to CMS, but rather used internally to correct and improve performance.

16. Utilization Management Committee

Minutes of the July 15, 2020 Utilization Management Committee (UMC) meeting were reviewed by Dr. Lin.

It was moved, seconded and the minutes of the July 15, 2020 meeting were **unanimously approved.**

Motion: Ms. Tomcala

Second: Dr. Alkoraishi

Ayes: Dr. Alkoraishi, Dr. Boris, Dr. Dawood, Dr. Foreman, Dr. Lin, Dr. Paul, Ms. Tomcala

Absent: Dr. Arnold

17. Pharmacy and Therapeutics Committee

Minutes of the June 18, 2020 Pharmacy and Therapeutics Committee (P&T) meeting were reviewed by Dr. Lin.

It was moved, seconded and the June 18, 2020 P&T Committee meeting minutes were **unanimously approved.**

Motion: Dr. Dawood

Second: Dr. Alkoraishi

Ayes: Dr. Alkoraishi, Dr. Boris, Dr. Dawood, Dr. Foreman, Dr. Lin, Dr. Paul, Ms. Tomcala

Absent: Dr. Arnold

18. Credentialing Committee Report

Dr. Boris reviewed the Credentialing Committee Report for August 5, 2020. There were no questions asked.

It was moved, seconded, and the Credentialing Committee Meeting Report was **unanimously approved.**

Motion: Dr. Lin

Second: Ms. Tomcala

Ayes: Dr. Alkoraishi, Dr. Boris, Dr. Dawood, Dr. Foreman, Dr. Lin, Dr. Paul, Ms. Tomcala

Absent: Dr. Arnold

19. Adjournment

The next QIC meeting will be held on December 9, 2020. The meeting was adjourned at 8:03 pm.



DocuSigned by:

Ria Paul

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1/6/2021

Ria Paul, MD, Chair

Date