

Regular Meeting of the

## Santa Clara County Health Authority Utilization Management Committee

Wednesday, October 20, 2021, 6:00-7:30 PM

Santa Clara Family Health Plan

6201 San Ignacio Ave., San Jose, CA 95119

### Via Zoom

(669) 900-6833

Meeting ID: 890 0448 7918

Passcode: **umc102021**

<https://us06web.zoom.us/j/89004487918>

## AGENDA

|                                                                                                                                                                                                             |              |      |        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|------|--------|
| <b>1. Introduction</b>                                                                                                                                                                                      | Dr. Lin      | 6:00 | 5 min  |
| <b>2. Public Comment</b><br>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. Lin      | 6:05 | 5 min  |
| <b>3. Meeting Minutes</b><br>Review minutes of the Q3 July 21, 2021 Utilization Management Committee (UMC) meeting.<br><b>Possible Action:</b> Approve Q3 July 21 2021 UMC Meeting Minutes.                 | Dr. Lin      | 6:10 | 5 min  |
| <b>4. Chief Executive Officer Update</b><br>Discuss status of current topics and initiatives.                                                                                                               | Ms. Tomcala  | 6:15 | 5 min  |
| <b>5. Chief Medical Officer Update</b><br>a. General Update<br>b. Cal MediConnect NCQA Audit Timeline                                                                                                       | Dr. Nakahira | 6:20 | 10 min |
| <b>6. Old Business/Follow-Up Items</b><br>a. General Old Business<br>b. Plan All-Cause Readmissions Rates Due to COVID-19                                                                                   | Ms. Vu       | 6:30 | 10 min |
| <b>7. Summary of DMHC Final Report - 2020</b><br>Summary of results from DMHC Final Report.                                                                                                                 | Ms. Vu       | 6:40 | 5 min  |
| <b>8. UM Delegate Oversight Matrix Dashboard</b><br>Review of UM Delegation Process.                                                                                                                        | Ms. Vu       | 6:45 | 5 min  |
| <b>9. Inter-Rater Reliability (IRR) BH Report – 2021</b><br>Annual review of IRR BH Report for 2021.                                                                                                        | Ms. McKelvey | 6:50 | 5 min  |

|                                                                                                              |              |      |        |
|--------------------------------------------------------------------------------------------------------------|--------------|------|--------|
| <b>10. Medical Covered Services Prior Authorization (PA) Grid</b><br><b>Possible Action:</b> Approve PA Grid | Ms. Vu       | 6:55 | 5 min  |
| <b>11. Reports</b>                                                                                           |              |      |        |
| a. Membership                                                                                                | Dr. Nakahira | 7:00 | 5 min  |
| b. Over/Under Utilization by Procedure Type/Standard UM Metrics                                              |              |      |        |
| c. Dashboard Metrics <ul style="list-style-type: none"> <li>• Turn-Around Time – Q3 2021</li> </ul>          | Mr. Perez    | 7:05 | 5 min  |
| d. Cal MediConnect and Medi-Cal Quarterly Referral Tracking – Q3 2021                                        | Ms. Vu       | 7:10 | 10 min |
| e. Quality Monitoring of Plan Authorizations and Denial Letters (HS.04.01) – Q3 2021                         |              |      |        |
| f. Behavioral Health UM                                                                                      | Ms. McKelvey | 7:20 | 10 min |
| <b>12. Adjournment</b><br>Next meeting: January 19, 2022 at 6:00 p.m.                                        | Dr. Lin      | 7:30 |        |

**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](http://www.scfhp.com).



**Santa Clara Family  
Health Plan™**

Public Comment



# Santa Clara Family Health Plan™

UMC Meeting Minutes

July 21, 2021

Regular Meeting of the  
**Santa Clara County Health Authority**  
**Utilization Management Committee**

Wednesday, July 21, 2021 6:00 – 7:30 PM  
Santa Clara Family Health Plan  
6201 San Ignacio Ave, San Jose, CA 95119

## Minutes - Draft

---

### Members Present

Jimmy Lin, M.D., Internal Medicine, Chair  
Ali Alkoraishi, M.D., Psychiatry  
Ngon Hoang Dinh, OB/GYN  
Laurie Nakahira, D.O., Chief Medical Officer  
Habib Tobbagi, PCP, Nephrology

### Members Absent

Dung Van Cai, D.O., Head & Neck  
Indira Vemuri, Pediatric Specialist

### Staff Present

Dang Huynh, PharmD, Director, Utilization  
Management & Pharmacy  
Lily Boris, M.D., Medical Director  
Natalie McKelvey, Manager, Behavioral  
Health  
Luis Perez, Supervisor, Utilization  
Management  
Hoang Mai Vu, Utilization Management &  
Discharge Planning Nurse  
Amy O'Brien, Administrative Assistant

#### 1. Roll Call

Jimmy Lin, MD, Chair, called the meeting to order at 6:06 p.m. Roll call was taken and a quorum was established.

#### 2. Public Comment

There were no public comments.

#### 3. Meeting Minutes

The minutes of the April 21, 2021 Utilization Management Committee (UMC) meeting were reviewed.

**It was moved, seconded, and the minutes of the April 21, 2021 UMC meeting were unanimously approved.**

**Motion:** Dr. Alkoraishi

**Seconded:** Dr. Nakahira

**Ayes:** Dr. Alkoraishi, Dr. Lin, Dr. Nakahira, Dr. Tobbagi

**Absent:** Dr. Cai, Dr. Dinh, Dr. Vemuri

#### 4. Chief Executive Officer Update

This item was addressed during the Chief Medical Officer update.

## 5. Chief Medical Officer Update

### a. General Update

Dr. Laurie Nakahira, Chief Medical Officer, began with a reminder to committee members to complete the diversity survey that was sent via email. The survey is brief and will provide valuable data as to the diversity of our committee members. Dr. Nakahira also reminded the committee that the Whole Person Care and Health Homes programs will sunset on December 31, 2021. SCFHP is in the process of implementing Enhanced Care Management (ECM) and In-Lieu-of Services (ILOS). There are approximately 14 ILOS that the Department of Health Care Services (DHCS) requests the Plan implement now. Over the next few years, ILOS will turn into a benefit. The Plan's goal is to implement ECM and ILOS by January 1, 2022.

Respective to COVID-19, the Plan is working on transitioning staff back into the office sometime after Labor Day 2021. SCFHP continues to work in conjunction with Public Health to hold pop-up vaccination clinics at the Blanca Alvarado Community Resource Center. The first 2 or 3 clinics were very successful with only a few leftover vaccines. Recently, attendance at these clinics has decreased. The Plan believes this is due to the vaccine hesitancy issue. The Plan will continue to work with Public Health to determine if and when future pop-up clinics will be held. Public Health continues to recommend indoor mask wearing for all Bay Area residents, including those who are fully vaccinated.

Behavioral Health has contracted with Array for telehealth behavioral health care services. These services will go live between August and September of 2021. Further updates will be included in the provider newsletters, as well as on the SCFHP website.

Dr. Nakahira continued with a Medi-Cal Rx update. The Plan is pending further details and direction from the DHCS as to the implementation date.

Dr. Tobbagi asked if Array behavioral health care services will offer virtual services, and Ms McKelvey confirmed that virtual services are included.

Dr. Nakahira concluded with a reminder to committee members to please update their contact information and forward to Ms. O'Brien for our records.

## 6. Old Business/Follow-Up Items

### a. Prior Authorization Volume 2019 vs. 2020 vs. 2021

Dr. Dang Huynh, PharmD, Director Utilization Management and Pharmacy, presented an overview and comparison of the Prior Authorization Volumes for 2019, 2020, and 2021. This data was requested at the April 2021 UMC meeting to provide a snapshot of the impact of COVID on the Plan's prior authorization volume. The data presented is specific to our Cal MediConnect and Medi-Cal lines of business.

The number of Cal MediConnect authorizations for 2019 and 2020 are within the 11,000 range. The reason the number of authorizations in 2020 falls within this 11,000 range is largely due to an increase in membership due to COVID, as well as retroactive authorizations. In 2021, the volume dropped dramatically; however, it is expected to at least double for the remainder of 2021. The number of Medi-Cal authorizations drops from 19,274 in 2019 to 17,364 in 2020. The number of authorizations in 2021 currently stands at 9,143. Dr. Huynh reminded committee members that, during the peak of COVID, the Plan waived prior authorizations, and many claims were paid for certain services without the requirement of prior authorizations.

Dr. Lin commented that patients may have chosen not to receive services that were not of an urgent nature. Dr. Boris agreed that COVID did impact the volume of prior authorizations, and whether or not services were rendered, in spite of increased membership.

## **b. Plan All-Cause Readmissions Rates Due to COVID-19**

Dr. Huynh continued with an overview of Plan All-Cause Readmissions Rates for 2021 as a result of COVID. The Readmission Rate column represents readmissions for any cause within 30 days from discharge. Dr. Lin requested that the UM department break down these numbers to determine how many admissions and readmissions resulted from unvaccinated members. Dr. Huynh stated the UM analytics department will be able to run this data against our vaccinated members and bring the comparison to the October 2021 UMC meeting. Dr. Huynh believes approximately 13% of initial admissions were due to COVID.

Dr. Boris stated that the data shows how initial admissions due to COVID also impacted the number of readmissions for both the Cal MediConnect and Medi-Cal lines of business.

## **7. UM Policy Updates**

### **a. HS.02 Medical Necessity Criteria**

Dr. Huynh explained that, in order to meet National Committee for Quality Assurance (NCQA) requirements, a slight update to the verbiage was made under Section II. Policy, Item A, to include the use of the term 'current', as per UM QA 5 of the NCQA requirements. In addition, there are some minor changes to grammar and sentence structures.

**It was moved, seconded and the UM Policy Updates were unanimously approved.**

**Motion:** Dr. Alkoraishi

**Second:** Dr. Tobbagi

**Ayes:** Dr. Alkoraishi, Dr. Lin, Dr. Nakahira, Dr. Tobbagi

**Absent:** Dr. Cai, Dr. Dinh, Dr. Vemuri

*Dr. Dinh joined the meeting at 6:25 p.m.*

## **8. Inter-Rater Reliability (IRR) UM Report – 2021**

Dr. Boris presented the results of the annual UM IRR testing to the Committee. The testing is designed to assess the consistency and accuracy of review criteria applied by all physician and non-physician reviewers, and to identify areas for improvement. The majority of staff members passed, and only 2 staff members did not pass. The 2 staff members who did not pass will receive individual coaching sessions. Dr. Boris conducted a group meeting with all staff members, and all 10 cases were analyzed and discussed. The UM team remains stable with no staff changes. Dr. Lin remarked that this speaks highly of UM department leadership and their team.

## **9. UM Review of Delegation Results and Process**

### **a. Annual Review of UM Delegation Results**

Dr. Boris presented the results from the Annual Review of UM Delegation Results and Process. This will become a standing item for the UMC in order to meet NCQA accreditation requirements. It is necessary to show that the Plan understands their delegation responsibilities to our delegated groups, such as Valley Health Plan, PMG, Premier Care, and Kaiser, and that delegation audits are conducted.

Dr. Huynh presented an overview of the annual oversight audit results for 2020. Delegates are offered an opportunity for rebuttal of the results. Dr. Lin asked if the Plan conducts the audits, or do we use a consulting firm. Dr. Huynh responded that audits are conducted by an in house oversight department. Delegates must meet the same DHCS, Department of Managed Health Care (DMHC), and NCQA requirements as SCFHP.

### **b. Annual Review of the UM Delegation Process**

Dr. Huynh next presented an overview of the documentation preparation and submission processes. Dr. Huynh discussed the items that constitute the Plan's audit request process. Monthly prior authorization audits are also conducted; however, this is the main annual UM oversight audit. Delegates have 15 business days to respond. The audit includes oversight of the delegates' individual UMC committee meetings. UM Quality

Assurance (QA) and Policies and Procedures (P&P) are also included. Delegates are provided the results of the audit and offered an opportunity for rebuttal of these results.

**It was moved, seconded and** the Annual Review of the UM Delegation Process was **unanimously approved**.

**Motion:** Dr. Lin

**Second:** Dr. Tobbagi

**Ayes:** Dr. Alkoraishi, Dr. Dinh, Dr. Lin, Dr. Nakahira, Dr. Tobbagi

**Absent:** Dr. Cai, Dr. Vemuri

## 10. UM 1B Annual Provider and Member Satisfaction with UM Process - 2020

Dr. Boris gave an overview of the 2020 UM 1B Annual Provider and Member Satisfaction with UM process results. The Cal MediConnect line of business uses the Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey tool, while the Medi-Cal line of business uses the number and types of grievances filed in the calendar year.

Dr. Boris discussed the CAHPS survey results for 2020 in comparison with 2019. Though there appears to be a slight drop in 2020, overall Customer Service satisfaction remains high. There is also a high level of satisfaction with the Pharmacy benefit. Dr. Boris also discussed the numbers and types of grievances filed against the UM department from both our Cal MediConnect and Medi-Cal members. The overall volume of grievances is low, and there were no physician related grievances. The UM program continues to improve, and no changes to the program are required at this time.

## 11. Reports

### a. Membership

Dr. Boris gave a brief summary of the Membership Report from July 2020 through July 2021. The Plan's Cal MediConnect membership continues to grow with 10,148 members. Medi-Cal membership has increased to 274,030 members, largely due to the pause on Medi-Cal redeterminations due to COVID-19. The Plan's total population has increased from 257,036 members to 284,178 members. The majority of our members remain delegated to Valley Health Plan, with the remaining majority delegated to Physicians Medical Group, Kaiser Permanente, and Premier Care.

### b. Over/Under Utilization by Procedure Type/Standard UM Metrics

Dr. Boris presented the Committee with the UM objectives and goals. Dr. Boris summarized the results of the Medi-Cal SPD and non-SPD lines of business from September 1, 2020 through June 30, 2021. The numbers for discharges per thousand and average length of stay remain stable and similar to the results presented at the April 2021 UMC meeting. As you compare inpatient utilization rates for our SPD and non-SPD populations, the SPD population, which is high risk and consists of approximately 30,000 to 40,000 members, appears to have a high rate of discharges per thousand. This rate is offset by our membership of approximately 280,000 members, which normalizes the discharges per thousand rate to 4.0 and average length of stay of 4.5. Dr. Boris also summarized the results for the Cal MediConnect line of business. The Cal MediConnect line of business has a slightly higher rate of average length of stay and discharges per thousand compared to our Medi-Cal line of business.

Dr. Boris presented a summary of the inpatient readmission rates for Cal MediConnect and Medi-Cal. These rates are higher than normal and may have been impacted by COVID-19.

Dr. Boris concluded with an overview of the ADHD Medi-Cal Behavioral Health metrics. These numbers remain stable, and there are minimal changes in these numbers from the April 2021 UMC meeting.



**c. Dashboard Metrics**

- Turn-Around Time – Q2 2021

Mr. Perez summarized the Cal MediConnect Turn-Around Time metrics for Q2 2021. The turn-around times in all categories are compliant at 99.6% or better, with many reaching 100%. Mr. Perez next summarized the Turn-Around times for Medi-Cal authorizations for Q2 2021. The turn-around times for all combined Medi-Cal authorizations are compliant at 98.9% or better.

Dr. Tobbagi requested clarification of exactly what 100% means. Does it mean there are more staff members than there are requests, or does it mean the staff works a lot of overtime? Dr. Boris clarified that these reports cover a 3 month period, in this case, April, May, and June, and she used the 'Routine Authorizations' and 'Expedited Authorizations' categories to break down these numbers and explain how they were achieved. Dr. Boris explained that the DHCS mandates response times within 5 business days, with a turnaround time of 72 hours for 'Expedited Prior Authorization Requests'.

Dr. Tobbagi was still unclear as to how the volume of all these requests can be turned around so quickly. Dr. Huynh provided an overview of the UM staff and their roles and responsibilities. Dr. Huynh advised that between 80-150 authorizations are completed on a daily basis. There are approximately 14-17 individuals directly responsible for authorizations. Of the entire staff, each individual may be responsible for a certain element that contributes to compliant turnaround times. Dr. Lin and Dr. Tobbagi agreed these numbers are excellent.

**d. Cal MediConnect and Medi-Cal Quarterly Referral Tracking – Q2 2021**

Ms. Hoang Mai Vu, UM and Discharge Planning Nurse, summarized the data from the Q2 2021 Cal MediConnect Quarterly Referral Tracking report for the Committee. Ms. Vu drew the committee's attention to the column '% Auths w/No Services Rendered' at 44.2%. Ms. Vu explained this is due partly to a higher number of authorizations, and to transportation, home health, and outpatient services that are still in process, and to claims that are open or pending.

Ms. Vu continued and summarized the data from the Q2 2021 Medi-Cal Quarterly Referral Tracking report. Ms. Vu explained that the 37.4% in the '% Auths w/No Services Rendered' column is also attributable to a higher number of authorizations, as well as transportation, home health, and outpatient services that are still in process, and claims that are open or pending.

**e. Quality Monitoring of Plan Authorizations and Denial Letters (HS.04.01) – Q2 2021**

Ms. Vu provided the committee with the results from Q2 2021 Quality Monitoring of Plan Authorizations and Denial Letters for the Committee. Ms. Vu reported that the UM department received a 100% score in virtually all categories, with the exceptions of 1 letter that was mistakenly sent in English instead of the member's threshold language, Spanish, and 1 letter that did not reference the applicable Medicare guideline. UM leadership will continue to take an active role in QA oversight.

**f. Behavioral Health (BH) UM**

Ms. Natalie McKelvey, Manager, Behavioral Health, presented an overview of utilization of the Behavioral Health Treatment program. Ms. McKelvey highlighted the screenings that the BH team wants to complete during the upcoming fiscal year. The BH team will take advantage of the new funding from the Newsom administration to increase BH services in schools. The BH team will survey our community partners and assess the current Santa Clara County school districts to identify opportunities to build the infrastructure and offer more BH services. The Plan's new Community Resource Center (CRC) will be an integral way to offer these services. The DHCS has yet to offer guidance on how the school incentive program will work, though it may follow the same structure as the Behavioral Health Integration Incentive Program (BHIIIP).

Ms. McKelvey gave an overview of the screenings already completed as of 7/8/2021. There is a large decrease in May and June; however, this may be attributable to a claims lag. Trauma screenings are trending

upward as awareness of this tool increases. Ms. McKelvey broke down the number of developmental screenings by network.

In the area of treatment, Ms. McKelvey discussed the number of psychiatric admissions for the Cal MediConnect line of business. She compared the number of Cal MediConnect members in mild to moderate psychiatric treatment for 2019 vs. 2020 vs. 2021. In addition, Ms. McKelvey summarized the number of Medi-Cal members in mild to moderate psychiatric treatment per each provider network. Dr. Boris commented that it appears that at least 1/10<sup>th</sup> of our Cal MediConnect members are in some sort of treatment program, and Ms. McKelvey stated that this number reflects BH specialty services. She agreed that this is a large number of patients.

Ms. McKelvey next reviewed BH treatment, which includes ABA, broken down per one thousand members, per treatment hours, per network. Ms. McKelvey concluded with an announcement that the Plan is up and running with our new telehealth provider, Array. Dr. Lin congratulated the entire UM team on their accomplishments thus far for 2021.

## 12. Adjournment

The meeting adjourned at 7:15 p.m. The next meeting of the Utilization Management Commitment is on October 20, 2021 at 6:00 p.m.

---

Jimmy Lin, M.D, Chair  
Utilization Management Committee

---

Date



**Santa Clara Family  
Health Plan™**

Chief Executive Officer Update



**Santa Clara Family  
Health Plan™**

## Chief Medical Officer Update

- General Update
- Cal MediConnect NCQA Audit Timeline



**Santa Clara Family  
Health Plan™**

## Old Business/Follow-Up Items

- General Old Business
- Plan All-Cause Readmissions Rates due to COVID-19

# Plan All-Cause Readmissions (PCR)

Due to COVID-19: CY2020 – Cal MediConnect

| Hospital                                | # PCR member(s) with COVID-19 Admission | # of Readmissions | Readmission Rate |
|-----------------------------------------|-----------------------------------------|-------------------|------------------|
| EL CAMINO HOSPITAL-MOUNTAIN VIEW CAMPUS | 1                                       | 0                 | 0%               |
| GOOD SAMARITAN HOSPITAL                 | 3                                       | 0                 | 0%               |
| KAISER HOSPITAL - SAN JOSE              | 1                                       | 0                 | 0%               |
| O'CONNOR HOSPITAL                       | 8                                       | 0                 | 0%               |
| REGIONAL MEDICAL CENTER OF SJ           | 6                                       | 0                 | 0%               |
| SAINT LOUISE REGIONAL HOSPITAL          | 5                                       | 1                 | 20%              |
| SCVMC ACUTE CARE HOSPITAL               | 8                                       | 0                 | 0%               |
| <b>Grand Total</b>                      | <b>32</b>                               | <b>1</b>          | <b>3%</b>        |

# Plan All-Cause Readmissions (PCR)

Due to COVID-19: CY2020 – Medi-Cal

| Hospital                                          | # PCR with COVID-19 Admission | # Readmissions | Readmission Rate |
|---------------------------------------------------|-------------------------------|----------------|------------------|
| EL CAMINO HOSPITAL-MOUNTAIN VIEW CAMPUS           | 4                             | 0              | 0%               |
| EMERGENCY MEDICINE                                | 3                             | 0              | 0%               |
| GOOD SAMARITAN HOSPITAL                           | 4                             | 0              | 0%               |
| KAISER HOSPITAL - SAN JOSE                        | 5                             | 0              | 0%               |
| KAISER HOSPITAL - SANTA CLARA                     | 4                             | 1              | 25%              |
| O'CONNOR HOSPITAL                                 | 5                             | 0              | 0%               |
| REGIONAL MEDICAL CENTER OF SJ                     | 19                            | 1              | 5%               |
| SAINT LOUISE REGIONAL HOSPITAL                    | 2                             | 0              | 0%               |
| SCVMC ACUTE CARE HOSPITAL                         | 39                            | 5              | 13%              |
| SOUTHWEST HEALTHCARE SYSTEM RANCHO SPRINGS CAMPUS | 1                             | 0              | 0%               |
| ST ROSE HOSPITAL                                  | 1                             | 0              | 0%               |
| STANFORD MEDICAL CENTER HOSPITAL                  | 3                             | 0              | 0%               |
| SUTTER TRACY COMMUNITY HOSPITAL                   | 1                             | 0              | 0%               |
| WESTERN MEDICAL CENTER-SANTA                      | 1                             | 0              | 0%               |
| <b>Grand Total</b>                                | <b>92</b>                     | <b>7</b>       | <b>8%</b>        |



**Santa Clara Family  
Health Plan™**

7. Summary of DMHC Final Report – for Routine  
Survey of 2020



## **In the Routine Survey (Final Report), dated 02/06/2020, DHMC found 2 uncorrected deficiencies:**

1. The Plan did not conduct adequate oversight of its delegates to ensure compliance with required utilization management (UM) denial letter requirements below:

- a. Denial reason is clear and concise;
- b. Applicable criteria or guidelines used are identified;
- c. Denial notice to provider includes name and telephone of physician making decision; and
- d. Notice of interpretation services and non-discrimination is included.

2. The Plan failed to provide evidence that care is deemed authorized if the Plan fails to approve or disapprove a request for post-stabilization medical care within 30 minutes of the request.

## Corrective Action Plan:

**Deficiency 1:** The Plan did not conduct adequate oversight of its delegates to ensure compliance with required utilization management (UM) denial letter requirements below:

- a. Denial reason is clear and concise;
- b. Applicable criteria or guidelines used are identified;
- c. Denial notice to provider includes name and telephone of physician making decision; and
- d. Notice of interpretation services and non-discrimination is included.

SCFHP has now instituted a monthly review of our delegated providers authorization process for: timeliness, readability, use of guidelines, peer to peer process and corrected template use.

SCFHP reviews a sampling of letters and feedback is provided to the delegate.

UMC will also receive ongoing quarterly updates by delegate about the findings of our delegated authorization review.

**Deficiency 2:** The Plan failed to provide evidence that care is deemed authorized if the Plan fails to approve or disapprove a request for post-stabilization medical care within 30 minutes of the request.

\_ This has been corrected with the Plan conducted review of all 64 authorization requests, and found no post-stabilization denials, and no Medi-Cal post-stabilization denials that exceeded 30 minutes from the time of the received request.



# Santa Clara Family Health Plan™

UM Delegate Oversight Matrix Dashboard



# Santa Clara Family Health Plan™

| UM Delegation PA Oversight - Passing Percentage |     |     |     |     |     |     |      |     |     |     |     |     |      |
|-------------------------------------------------|-----|-----|-----|-----|-----|-----|------|-----|-----|-----|-----|-----|------|
|                                                 | Jan | Feb | Mar | Apr | May | Jun | Jul  | Aug | Sep | Oct | Nov | Dec | Year |
| <b>VHP</b>                                      | N/A | N/A | 50% | 70% | 60% | 80% | 90%  | 50% | 60% |     |     |     | 2021 |
| <b>PMG</b>                                      | N/A | N/A | N/A | 90% | 80% | 90% | 100% | 80% | 80% |     |     |     | 2021 |
| <b>PCNC</b>                                     | N/A | N/A | N/A | 60% | 40% | 40% | 30%  | 40% |     |     |     |     | 2021 |



**Santa Clara Family  
Health Plan™**

Inter-Rater Reliability (IRR) BH Report - 2021

**InterRater Reliability Summary – Behavioral Health Department  
2021**

1. In accordance with Policy HS.09, Santa Clara Family Health Plan (SCFHP) scheduled IRR testing is completed biannually. Behavioral Health Department IRR Testing for September 2021 is complete. This testing is required twice a year. IRR testing is scheduled for SCFHP 1<sup>st</sup> and 2<sup>nd</sup> half of the calendar year. In accordance with NCQA/DHCS, DMHC guidelines, and SCFHP policy, 10 random BH authorizations are selected to test BH staff with the authority to Authorize services. Our BH staff consists of non-licensed (Personal Care Coordinators) as well as Licensed Staff (Licensed Clinical Social Workers, Medical Directors/Chief Medical Director) .
2. It is the policy of SCFHP to monitor the consistency and accuracy of review criteria applied by all reviewers - physicians and non-physicians - who are responsible for conducting Behavioral Health service reviews and to act on improvement opportunities identified through this monitoring.
3. The Chief Medical Officer or Manager of Behavioral Health will review and approve the assessment report of decision making performance of staff responsible for conducting Behavioral Health approval reviews for BH staff. The report results and recommendations for improvement will be presented annually to the Utilization Management Committee.
4. The Plan classifies reviews into one of two performance categories: Proficient (80% - 100% of the records are in compliance with the criteria); Not proficient (below 80% in compliance) Scores below 80% require increased focus by Supervisors/Managers with actions described in Policy/Procedure HS.09/HS.09.01 or an individual corrective action plan.

The following are the findings for all BH UM staff tested on September 2021:

| <u>Reviewer</u> | <u>UM (BH) Staff Position</u> | <u>Pass/Failed</u> |
|-----------------|-------------------------------|--------------------|
| 1               | Manager Behavioral Health     | Pass               |
| 2               | Project Manager BHT           | Pass               |
| 3               | Behavioral Health PCC         | Pass               |
| 4               | Medical Director              | Pass               |
| 5               | Medical Director              | Pass               |
| 6               | Chief Medical Director        | Pass               |

In the testing, we found that 6/6 of our staff are proficient during this review. There was no need for any corrective action planning. The Project Manager for Behavioral Health Treatment has provided trainings to Behavioral Health staff to monitor and implement any necessary UM changes.

Currently all Behavioral Health staff who are completing authorizations have received a passing grade.

Our common finding after the testing process was:

1. Staff who are currently authorized to review/approve BH services through SCFHP express comfort in knowing the process/where to go to for clarification.
2. Ongoing support throughout the department helps all performing UM functions to operate at an efficient level – all of those who completed BH IRR testing passed with 80-100% grading.

The corrective action's plan after identifying the common findings:

1. Mandatory remedial training with post testing for all non-proficient staff – Required.
  - a. None necessary to provide at this time.
2. Mandatory review of guidelines and criteria as well as biannual testing will continue to be scheduled for all staff who complete behavioral health authorizations.





**Santa Clara Family  
Health Plan™**

Medical Covered Services Prior Authorization (PA) Grid



## Medical Covered Services Prior Authorization Grid

This Prior Authorization Grid contains services that require prior authorization only and is not intended to be a comprehensive list of covered services. Providers should refer to the appropriate Evidence of Coverage (EOC) for a complete list of covered services.

### **Santa Clara Family Health Plan (SCFHP) Utilization Management Department:**

Telephone: 1-408-874-1821

Prior Authorization Request Submission Fax Lines: 1-408-874-1957

When faxing a request to SCFHP, please:

1. Use the SCFHP Prior Authorization Request – Medical Services Form found at [www.scfhp.com](http://www.scfhp.com)
2. Attach pertinent medical records, treatment plans, test results and evidence of conservative treatment to support medical necessity.

### **Other Contact Information:**

SCFHP Automated Eligibility: 1-800-720-3455 SCFHP

Customer Service:

Medi-Cal: 1-800-260-2055

Cal MediConnect: 1-877-723-4795

For Non-Emergency Medical Transportation (NEMT) & Non-Medical Transportation (NMT) contact SCFHP Customer Service

### **Benefits Authorized by Vendors:**

Dental Services

Denti-Cal: 1-800-322-6384

Vision Services

Vision Service Plan (VSP): 1-844-613-4779

## Medical Covered Services Prior Authorization Grid

| Category of Service                                                                                                                        | Services Requiring Prior Authorization                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|--------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Behavioral Health Treatment                                                                                                                | All Behavioral Health Treatment Services for members age 21 years and under with behavioral conditions that may or may not include autism spectrum                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Durable Medical Equipment (DME)<br><br><i>*Benefit and frequency limits apply. Refer to CMS, Noridian, and/or Medi-Cal Provider Manual</i> | <b>Cal MediConnect</b>                                                                                                                                                                                                                                                                                                 | <b>Medi-Cal</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|                                                                                                                                            | <ul style="list-style-type: none"> <li>• Custom made items</li> <li>• Any other DME or medical supply exceeding \$1000</li> <li>• Prosthetics &amp; customized orthotics exceeding \$1000</li> <li>• Hearing aids and repairs</li> <li>• Other specialty devices</li> <li>• Requests over the benefit limit</li> </ul> | <ul style="list-style-type: none"> <li>• CPAP and BIPAP</li> <li>• Enteral formula and supplies</li> <li>• Hospital bed and mattress</li> <li>• Power wheelchairs, scooters, manual wheelchairs <b>except standard adult and pediatric</b>, and motorized wheelchairs and accessories</li> <li>• Respiratory: Oxygen, BIPAP, CPAP, ventilators</li> <li>• Prosthetics &amp; customized orthotics <b>except off-the-shelf covered items</b></li> <li>• Hearing aids and repairs</li> <li>• Other specialty devices</li> <li>• Requests over the benefit limit</li> </ul> |
| Experimental Procedure                                                                                                                     | <ul style="list-style-type: none"> <li>• Experimental procedures</li> <li>• Investigational procedures</li> <li>• New technologies</li> </ul>                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Home Health                                                                                                                                | <ul style="list-style-type: none"> <li>• All home health services</li> <li>• Home IV infusion services</li> </ul>                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |

## Medical Covered Services Prior Authorization Grid

|                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Inpatient Admissions                   | <p>☐ All elective medical and surgical inpatient admissions to:</p> <ul style="list-style-type: none"> <li>• Acute hospital</li> <li>• Long Term Acute Care (LTAC) ☐ All admissions for:</li> <li>• Acute inpatient psychiatric</li> <li>• Partial hospital psychiatric treatment</li> <li>• Substance use disorder including detoxification ☐</li> </ul> <p>Rehabilitation and therapy services:</p> <ul style="list-style-type: none"> <li>• Acute rehabilitation facilities</li> <li>• Skilled Nursing Facilities (SNF)</li> </ul> |
| Long-Term Services and Supports (LTSS) | <ul style="list-style-type: none"> <li>• Community-Based Adult Services (CBAS)</li> <li>• Long-Term Care (LTC)</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                             |

| Category of Service      | Services Requiring Prior Authorization                                                                                                                                                                         |
|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Medications              | <ul style="list-style-type: none"> <li>• Refer to the 2021 Medical Benefit Drug Prior Authorization Grid</li> <li>• Physician administered drugs in the doctor's office or in an outpatient setting</li> </ul> |
| Non-Contracted Providers | All non-urgent/non-emergent services provided by non-contracted providers                                                                                                                                      |
| Organ Transplant         | All organ transplants                                                                                                                                                                                          |

## Medical Covered Services Prior Authorization Grid

|                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|-------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Outpatient Services and Procedures</p> | <ul style="list-style-type: none"> <li>• Abdominoplasty/Panniculectomy</li> <li>• Bariatric surgery</li> <li>• Breast reduction and augmentation surgery</li> <li>• Cataract surgery</li> <li>• Cochlear auditory implant</li> <li>• Dental surgery, jaw surgery and orthognathic procedures □</li> <li>Dermatology:             <ul style="list-style-type: none"> <li>• Laser treatment</li> <li>• Skin injections</li> <li>• Implants</li> </ul> </li> <li>• All types of endoscopy <b>except colonoscopy and nasal endoscopy</b></li> <li>• Gender reassignment surgery</li> <li>• Genetic testing and counseling</li> <li>• Hyperbaric oxygen therapy</li> <li>• Intensive Outpatient Palliative Care (IOPC) □ Neuro and spinal cord stimulators □ Outpatient diagnostic imaging:             <ul style="list-style-type: none"> <li>• Magnetic Resonance Imaging (MRI)</li> <li>• Magnetic Resonance Angiography (MRA)</li> <li>• Nuclear cardiology procedures</li> <li>• Single-Photon Emission Computerized Tomography (SPECT)</li> <li>• Positron-Emission Tomography (PET/PET-CT)</li> </ul> </li> <li>• Outpatient therapies             <ul style="list-style-type: none"> <li>• Occupational Therapy (OT)</li> <li>• Physical Therapy (PT)</li> <li>• Speech Therapy (ST)</li> </ul> </li> <li>• All plastic surgery and reconstructive procedures □ Podiatric surgeries □ Radiation therapy:             <ul style="list-style-type: none"> <li>• Proton beam therapy</li> <li>• Stereotactic Radiation Treatment (SBRT)</li> </ul> </li> <li>• Sleep studies</li> <li>• Spinal procedures <b>except epidural injections</b></li> <li>• Surgery for Obstructive Sleep Apnea (OSA)</li> <li>• Temporomandibular Disorder (TMJ) treatment</li> </ul> |
| <p><b>Category of Service</b></p>         | <p><b>Services Requiring Prior Authorization</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |

## Medical Covered Services Prior Authorization Grid

|                |                                                                                                                                                                                                        |
|----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                | <ul style="list-style-type: none"> <li>• Transplant-related services prior to surgery <b>except cornea transplant</b></li> <li>• Unclassified procedures</li> <li>• Varicose vein treatment</li> </ul> |
| Transportation | Non-Emergency Medical Transportation (NEMT) <b>except ground transportation from facility to facility and hospital to home.</b>                                                                        |



# Santa Clara Family Health Plan™

Membership Report

# Membership

Source: iCat (10/1/2021)

| Mbr Ct Sum         |                                | Cap Month      |                |                |                |                |                |                |                |                |                |                |                |                |
|--------------------|--------------------------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|
| LOB                | Network Name                   | Oct-20         | Nov-20         | Dec-20         | Jan-21         | Feb-21         | Mar-21         | Apr-21         | May-21         | Jun-21         | Jul-21         | Aug-21         | Sep-21         | Oct-21         |
| <b>CMC</b>         |                                | <b>9,570</b>   | <b>9,679</b>   | <b>9,820</b>   | <b>9,807</b>   | <b>9,893</b>   | <b>9,880</b>   | <b>9,924</b>   | <b>9,989</b>   | <b>10,080</b>  | <b>10,148</b>  | <b>10,245</b>  | <b>10,325</b>  | <b>10,368</b>  |
|                    | Santa Clara Family Health Plan | 9,570          | 9,679          | 9,820          | 9,807          | 9,893          | 9,880          | 9,924          | 9,989          | 10,080         | 10,148         | 10,245         | 10,325         | 10,368         |
| <b>MC</b>          |                                | <b>256,490</b> | <b>259,202</b> | <b>261,287</b> | <b>263,093</b> | <b>265,095</b> | <b>266,962</b> | <b>269,043</b> | <b>271,246</b> | <b>272,590</b> | <b>274,030</b> | <b>275,227</b> | <b>276,227</b> | <b>554,334</b> |
|                    | ADMIN-MEDI-CAL ONLY            |                |                |                |                |                |                |                |                |                | 2,088          | 1,931          | 1,881          | 3,974          |
|                    | ADMIN-MEDICARE PRIMARY         | 15,742         | 15,830         | 16,002         | 15,941         | 16,048         | 16,085         | 16,094         | 16,124         | 16,224         | 15,925         | 16,078         | 16,152         | 32,478         |
|                    | KAISER PERMANENTE              | 28,868         | 29,337         | 29,706         | 30,131         | 30,557         | 31,024         | 31,418         | 31,885         | 32,224         | 32,568         | 32,864         | 33,163         | 66,804         |
|                    | NEMS                           |                |                |                |                |                |                |                |                |                |                |                |                | 6,885          |
|                    | PALO ALTO MEDICAL FOUNDATION   | 6,935          | 6,985          | 7,010          | 7,065          | 7,143          | 7,221          | 7,277          | 7,338          | 7,388          | 7,400          | 7,378          | 7,343          | 14,688         |
|                    | PHYSICIANS MEDICAL GROUP       | 44,223         | 44,560         | 44,861         | 45,178         | 45,466         | 45,631         | 45,945         | 46,224         | 46,462         | 46,353         | 46,561         | 46,655         | 85,813         |
|                    | PREMIER CARE                   | 15,473         | 15,593         | 15,646         | 15,695         | 15,781         | 15,852         | 15,941         | 15,966         | 15,981         | 15,864         | 15,818         | 15,805         | 31,759         |
|                    | SCFHP DIRECT                   | 16,627         | 16,829         | 16,938         | 16,987         | 17,132         | 17,266         | 17,442         | 17,510         | 17,579         | 17,504         | 17,592         | 17,619         | 35,685         |
|                    | VHP NETWORK                    | 128,622        | 130,068        | 131,124        | 132,096        | 132,968        | 133,883        | 134,926        | 136,199        | 136,732        | 136,328        | 137,005        | 137,609        | 276,248        |
| <b>Grand Total</b> |                                | <b>266,060</b> | <b>268,881</b> | <b>271,107</b> | <b>272,900</b> | <b>274,988</b> | <b>276,842</b> | <b>278,967</b> | <b>281,235</b> | <b>282,670</b> | <b>284,178</b> | <b>285,472</b> | <b>286,552</b> | <b>564,702</b> |





**Santa Clara Family  
Health Plan™**

Over/Under Utilization by Procedure Type

# UMC Goals and Objectives

- Compare SCFHP utilization levels against relevant industry benchmarks and monitor utilization trends among SCFHP membership over time
- Analyze key drivers and potential barriers, prioritize opportunities for improvement, and develop interventions that promote high-quality and cost-effective use of medical services

# Membership

Source: iCAT (10/14/2021)

| Year-Month      | 2021-04        | 2021-05        | 2021-06        | 2021-07        | 2021-08        | 2021-09        |
|-----------------|----------------|----------------|----------------|----------------|----------------|----------------|
| Medi-Cal        | 269,043        | 271,246        | 272,590        | 274,030        | 275,227        | 276,227        |
| Cal MediConnect | 9,924          | 9,989          | 10,080         | 10,148         | 10,245         | 10,325         |
| <b>Total</b>    | <b>278,967</b> | <b>281,235</b> | <b>282,670</b> | <b>284,178</b> | <b>285,472</b> | <b>286,552</b> |

# Inpatient Utilization: Medi-Cal –SPD

## DOS 12/1/2020 – 9/30/2021

Source: MCL Enrollment & QNXT Claims and Encounter Data (Run Date:10/14/2021)(SPD, no Kaiser no SPD Full Dual

| Quarter | Discharges | Discharges / 1,000 Member Months | Days   | Average Length of Stay |
|---------|------------|----------------------------------|--------|------------------------|
| 2020-Q4 | 810        | 12.86                            | 4,184  | 5.17                   |
| 2021-Q1 | 816        | 12.92                            | 4,308  | 5.28                   |
| 2021-Q2 | 886        | 13.97                            | 4,763  | 5.38                   |
| 2021-Q3 | 904        | 14.22                            | 5,302  | 5.87                   |
| Total   | 3,416      | 13.50                            | 18,557 | 5.43                   |

Note: Data are less complete for more recent quarters due submission lag.

# Inpatient Utilization: Medi-Cal – Non-SPD

## DOS 12/1/2020 – 9/30/2021

Source: MCL Enrollment & QNXT Claims and Encounter Data (Run Date:10/14/2021)

| Quarter | Discharges | Discharges / 1,000 Member Months | Days   | Average Length of Stay |
|---------|------------|----------------------------------|--------|------------------------|
| 2020-Q4 | 2,098      | 3.59                             | 8,139  | 3.88                   |
| 2021-Q1 | 2,434      | 3.98                             | 10,007 | 4.11                   |
| 2021-Q2 | 2,247      | 3.56                             | 10,058 | 4.48                   |
| 2021-Q3 | 2,568      | 3.96                             | 11,944 | 4.65                   |
| Total   | 9,347      | 3.78                             | 40,148 | 4.30                   |

Note: Data are less complete for more recent quarters due submission lag.

# Inpatient Utilization: Cal MediConnect (CMC)

## DOS 12/1/2020 – 9/30/2021

Source: CMC Enrollment & QNXT Claims Data (Run Date:10/14/2021)

| Quarter | Discharges | Discharges / 1,000 Member Months | Days   | Average Length of Stay |
|---------|------------|----------------------------------|--------|------------------------|
| 2020-Q4 | 544        | 19.05                            | 2,982  | 5.48                   |
| 2021-Q1 | 581        | 20.01                            | 3,578  | 6.16                   |
| 2021-Q2 | 545        | 18.42                            | 2,937  | 5.39                   |
| 2021-Q3 | 467        | 15.45                            | 2,708  | 5.80                   |
| Total   | 2,137      | 18.20                            | 12,205 | 5.71                   |

Note: Data are less complete for more recent quarters due submission lag.

# Medi-Cal Inpatient Utilization

## DOS 12/1/2020 – 9/30/2021

| Measure                          | Medi-Cal Population |       |       |
|----------------------------------|---------------------|-------|-------|
|                                  | Non-SPD             | SPD   | Total |
| Discharges / 1,000 Member Months | 3.78                | 13.50 | 4.68  |
| ALOS                             | 4.30                | 5.43  | 4.59  |

Note: Data are less complete for more recent quarters due submission lag. Therefore comparison is limited.

# Inpatient Readmissions: Medi-Cal

Source: HEDIS Plan All-Cause Readmissions (PCR) data for 2020 and YTD 2021 measurement period (Run Date: 09/17/2021)

| Year | LOB      | Count of Index Stays (Denominator) | Count of 30-Day Readmissions (Numerator) | Actual Readmission Rate <sup>1,2,3</sup> |
|------|----------|------------------------------------|------------------------------------------|------------------------------------------|
| 2020 | MC - All | 3,977                              | 380                                      | 9.55%                                    |
| 2021 | MC - All | 3,410                              | 357                                      | 10.47%                                   |

<sup>1</sup> A lower rate indicates better performance.

<sup>2</sup> Only for members aged 18-64 in Medi-Cal.

<sup>3</sup> Outliers are not included in the rates.

Note: Data are less complete for more recent quarters due submission lag. Therefore comparison is limited.



# Cal MediConnect (CMC) Readmission Rates

Source: HEDIS Plan All-Cause Readmissions (PCR) data for 2020 and YTD 2021 measurement period (Run Date: 09/17/2021)

| Rate Description              | PCR 2020 | PCR 2021 |
|-------------------------------|----------|----------|
| Count of Index Hospital Stays | 943      | 869      |
| Count of 30-Day Readmissions  | 99       | 108      |
| Actual Readmission Rate       | 10.50%   | 12.43%   |

<sup>1</sup> A lower rate indicates better performance.

<sup>2</sup> The PCR rate applies only to SCFHP's CMC line of business and includes members 18 years of age and older.

Note: Data are less complete for more recent quarters due submission lag. Therefore comparison is limited.

# ADHD Medi-Cal Behavioral Health Metrics

Source: HEDIS data for 2020 and YTD 2021 measurement period (Run Date: 09/17/2021)

| Measure                                                                          | NCQA Medicaid 50 <sup>th</sup> Percentile | 2020 Rate | 2020 SCFHP Percentile Rank | 2021 Rate | 2021 SCFHP Percentile Rank |
|----------------------------------------------------------------------------------|-------------------------------------------|-----------|----------------------------|-----------|----------------------------|
| Follow-Up Care for Children Prescribed ADHD Medication                           |                                           |           |                            |           |                            |
| Initiation Phase                                                                 | 44.91%                                    | 45.26%    | 50 <sup>th</sup>           | 37.79%    | 10 <sup>th</sup>           |
| Continuation & Maintenance Phase                                                 | 55.96%                                    | 49.28%    | 25 <sup>th</sup>           | 34.00%    | 5 <sup>th</sup>            |
| Antidepressant Medication Management                                             |                                           |           |                            |           |                            |
| Acute Phase Treatment                                                            | 56.66%                                    | 64.15%    | 75 <sup>th</sup>           | 68.55%    | 90 <sup>th</sup>           |
| Continuation Phase Treatment                                                     | 40.28%                                    | 50.40%    | 90 <sup>th</sup>           | 49.70%    | 75 <sup>th</sup>           |
| Cardiovascular Monitoring for People with Cardiovascular Disease & Schizophrenia | 73.43%                                    | 71.43%    | 10 <sup>th</sup>           | 66.67%    | 10 <sup>th</sup>           |

Note: Data are less complete for more recent quarters due submission lag. Therefore comparison is limited.



**Santa Clara Family  
Health Plan™**

Dashboard Metrics

Turn-Around Time – Q3 2021



| <b>CAL MEDICCONNECT</b>                                                                                       | <b>Jul</b> | <b>Aug</b> | <b>Sep</b> | <b>Q3 2021</b> |
|---------------------------------------------------------------------------------------------------------------|------------|------------|------------|----------------|
| # of Concurrent Requests Received                                                                             | 174        | 183        | 166        | 523            |
| # of Concurrent Review of Authorization Requests (part C) completed within five (5) working of request        | 174        | 183        | 165        | 522            |
| % of Concurrent Review of Authorization Requests (part C) completed within five (5) working of request        | 100.0%     | 100.0%     | 99.4%      | 99.8%          |
| <b>PRE-SERVICE ORGANIZATION DETERMINATIONS</b>                                                                |            |            |            |                |
| <b>Standard Part C</b>                                                                                        |            |            |            |                |
| # of Standard Pre-Service Prior Authorization Requests Received                                               | 746        | 745        | 763        | 2,254          |
| # of Standard Pre-Service Prior Authorization Requests (part C) completed within fourteen (14) calendar days  | 746        | 741        | 759        | 2,246          |
| % of Standard Pre-Service Prior Authorization Requests (part C) completed within fourteen (14) calendar days  | 100.0%     | 99.5%      | 99.5%      | 99.6%          |
| <b>Expedited Part C</b>                                                                                       |            |            |            |                |
| # of Expedited Pre-Service Prior Authorization Requests Received                                              | 253        | 293        | 273        | 819            |
| # of Expedited Pre-Service Prior Authorization Requests (part C) completed within seventy-two (72) hours      | 251        | 291        | 271        | 813            |
| % of Expedited Pre-Service Prior Authorization Requests (part C) completed within seventy-two (72) hours      | 99.2%      | 99.3%      | 99.3%      | 99.3%          |
| <b>POST SERVICE ORGANIZATION DETERMINATIONS</b>                                                               |            |            |            |                |
| # of Retrospective Requests Received                                                                          | 76         | 76         | 73         | 225            |
| # of Retrospective Requests (part C) completed within thirty (30) calendar days                               | 76         | 75         | 73         | 224            |
| % of Retrospective Requests (part C) completed within thirty (30) calendar days                               | 100.0%     | 98.7%      | 100.0%     | 99.6%          |
| <b>PART B DRUGS ORGANIZATION DETERMINATIONS</b>                                                               |            |            |            |                |
| # of Standard Prior Authorization Requests (part B drugs) Requests Received                                   | 15         | 14         | 19         | 48             |
| # of Standard Prior Authorization Requests (part B drugs) completed within seventy-two (72) hours of request  | 15         | 14         | 19         | 48             |
| % of Standard Prior Authorization Requests (part B drugs) completed within seventy-two (72) hours of request  | 100.0%     | 100.0%     | 100.0%     | 100.0%         |
| # of Expedited Prior Authorization (part B drugs) Requests Received                                           | 17         | 15         | 17         | 49             |
| # of Expedited Prior Authorization requests (part B drugs) completed within twenty-four (24) hours of request | 17         | 15         | 17         | 49             |
| % of Expedited Prior Authorization requests (part B drugs) completed within twenty-four (24) hours of request | 100.0%     | 100.0%     | 100.0%     | 100.0%         |

| <b>MEDICAL AUTHORIZATIONS - HS COMBINED</b>                                                                                                                |            |            |            |                |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------|------------|----------------|
| <b>Concurrent Review</b>                                                                                                                                   | <b>Jul</b> | <b>Aug</b> | <b>Sep</b> | <b>Q3 2021</b> |
| Total # of Concurrent Requests <b>Resolved</b>                                                                                                             | 194        | 232        | 203        | 629            |
| # of Concurrent Review of Authorization Requests completed within five (5) working days of request                                                         | 194        | 228        | 201        | 623            |
| % of Concurrent Review of Authorization Requests completed within five (5) working days of request                                                         | 100.0%     | 98.3%      | 99.0%      | 99.0%          |
| <b>Routine Authorizations</b>                                                                                                                              |            |            |            |                |
| Total # of Routine Prior Authorization Requests <b>Resolved</b>                                                                                            | 1,162      | 1,236      | 1,067      | 3,465          |
| # of Routine Prior Authorization Requests completed within five (5) working days of request                                                                | 1,157      | 1,229      | 1,064      | 3,450          |
| % of Routine Prior Authorization Requests completed within five (5) working days of request                                                                | 99.6%      | 99.4%      | 99.7%      | 99.6%          |
| <b>Expedited Authorizations</b>                                                                                                                            |            |            |            |                |
| Total # of Expedited Prior Authorization Requests <b>Resolved</b>                                                                                          | 151        | 161        | 182        | 494            |
| # of Expedited Prior Authorization Requests completed within seventy-two (72) hours of request                                                             | 151        | 161        | 181        | 493            |
| % of Expedited Prior Authorization Requests completed within seventy-two (72) hours of request                                                             | 100.0%     | 100.0%     | 99.5%      | 99.8%          |
| <b>Retrospective Review</b>                                                                                                                                |            |            |            |                |
| Total # of Retrospective Requests <b>Resolved</b>                                                                                                          | 351        | 347        | 346        | 1,044          |
| # of Retrospective Requests completed within thirty (30) calendar days of request                                                                          | 351        | 347        | 346        | 1,044          |
| % of Retrospective Requests completed within thirty (30) calendar days of request                                                                          | 100.0%     | 100.0%     | 100.0%     | 100.0%         |
| <b>Member Notification of UM Decision</b>                                                                                                                  |            |            |            |                |
| Total # of UM decisions                                                                                                                                    | 1,682      | 1,754      | 1,609      | 5,045          |
| # Member Notification of UM decision in writing within two (2) working days of the decision.                                                               | 1,677      | 1,742      | 1,603      | 5,022          |
| % Member Notification of UM decision in writing within two (2) working days of the decision.                                                               | 99.7%      | 99.3%      | 99.6%      | 99.5%          |
| <b>Provider Notification of UM Decision</b>                                                                                                                |            |            |            |                |
| # Provider Notification of UM decision by telephone, facsimile or electronic mail and then in writing within twenty-four (24) hours of making the decision | 1,654      | 1,698      | 1,587      | 4,939          |
| % Provider Notification of UM decision by telephone, facsimile or electronic mail and then in writing within twenty-four (24) hours of making the decision | 98.3%      | 96.8%      | 98.6%      | 97.9%          |



**Santa Clara Family  
Health Plan™**

Cal MediConnect and Medi-Cal Quarterly Referral  
Tracking  
Q3 2021

## Cal MediConnect Q3 2021 Referral Tracking Report

| LOBRollupN..    | Template     | Disposition                     | Total # of Auths | # Auth Services Rendered within 90 days | # Auth Services Rendered After 90 days | # Auth Services Not Rendered | % Auths w/ No Services Rendered |
|-----------------|--------------|---------------------------------|------------------|-----------------------------------------|----------------------------------------|------------------------------|---------------------------------|
| Cal MediConnect | CBAS         | Retro Request                   | 15               | 12                                      | 0                                      | 3                            | 20.0%                           |
|                 |              | Routine - Extended Service      | 17               | 14                                      | 0                                      | 3                            | 17.6%                           |
|                 |              | Routine - Initial Request       | 1                | 1                                       | 0                                      | 0                            | 0.0%                            |
|                 | CONT OF CARE | Member Initiated Org Determi..  | 12               | 2                                       | 0                                      | 10                           | 83.3%                           |
|                 |              | Overturned Denial               | 1                | 1                                       | 0                                      | 0                            | 0.0%                            |
|                 | CUSTODIAL    | Non Contracted Provider - Ret.. | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |
|                 |              | Retro Request                   | 142              | 133                                     | 0                                      | 9                            | 6.3%                            |
|                 |              | Routine - Initial Request       | 39               | 31                                      | 0                                      | 8                            | 20.5%                           |
| Dental          |              | Routine - Initial Request       | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |
| DME             |              | Member Initiated Org Determi..  | 11               | 1                                       | 0                                      | 10                           | 90.9%                           |
|                 |              | Member Initiated Org Determi..  | 6                | 0                                       | 0                                      | 6                            | 100.0%                          |
|                 |              | Member Rep Initiated Org Det..  | 4                | 0                                       | 0                                      | 4                            | 100.0%                          |
|                 |              | Member Rep Initiated Org Det..  | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |
|                 |              | Non Contracted Provider - Ret.. | 2                | 1                                       | 0                                      | 1                            | 50.0%                           |
|                 |              | Non Contracted Provider - Ro..  | 33               | 8                                       | 0                                      | 25                           | 75.8%                           |
|                 |              | Non Contracted Provider - Urg.. | 7                | 2                                       | 0                                      | 5                            | 71.4%                           |
|                 |              | Overturned Denial               | 7                | 3                                       | 0                                      | 4                            | 57.1%                           |
|                 |              | PDR/Claims Medical Review       | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |
|                 |              | Retro Request                   | 8                | 5                                       | 0                                      | 3                            | 37.5%                           |
|                 |              | Routine - Initial Request       | 198              | 90                                      | 0                                      | 108                          | 54.5%                           |
|                 |              | Urgent - Initial Request        | 13               | 8                                       | 0                                      | 5                            | 38.5%                           |
| HomeHealth      |              | Member Initiated Org Determi..  | 3                | 1                                       | 0                                      | 2                            | 66.7%                           |
|                 |              | Member Initiated Org Determi..  | 4                | 2                                       | 0                                      | 2                            | 50.0%                           |
|                 |              | Member Rep Initiated Org Det..  | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |
|                 |              | Member Rep Initiated Org Det..  | 4                | 1                                       | 0                                      | 3                            | 75.0%                           |
|                 |              | Non Contracted Provider - Ro..  | 2                | 0                                       | 0                                      | 2                            | 100.0%                          |
|                 |              | Non Contracted Provider - Urg.. | 3                | 0                                       | 0                                      | 3                            | 100.0%                          |
|                 |              | Operational PA                  | 90               | 30                                      | 0                                      | 60                           | 66.7%                           |
|                 |              | Overturned Denial               | 4                | 1                                       | 0                                      | 3                            | 75.0%                           |
|                 |              | PDR/Claims Medical Review       | 3                | 2                                       | 0                                      | 1                            | 33.3%                           |
|                 |              | Retro Request                   | 15               | 11                                      | 0                                      | 4                            | 26.7%                           |
|                 |              | Routine - Extended Service      | 24               | 13                                      | 0                                      | 11                           | 45.8%                           |

## Referral Tracking Report

| LOBRollupN..    | Template                        | Disposition                     | Total # of Auths | # Auth Services Rendered within 90 days | # Auth Services Rendered After 90 days | # Auth Services Not Rendered | % Auths w/ No Services Rendered |      |
|-----------------|---------------------------------|---------------------------------|------------------|-----------------------------------------|----------------------------------------|------------------------------|---------------------------------|------|
| Cal MediConnect | HomeHealth                      | Routine - Initial Request       | 30               | 13                                      | 0                                      | 17                           | 56.7%                           |      |
|                 |                                 | Urgent - Extended Service       | 159              | 65                                      | 0                                      | 94                           | 59.1%                           |      |
|                 |                                 | Urgent - Initial Request        | 226              | 93                                      | 0                                      | 133                          | 58.8%                           |      |
|                 | HOSPICE                         | Non Contracted Provider - Ret.. | 2                | 0                                       | 0                                      | 2                            | 100.0%                          |      |
|                 |                                 | Non Contracted Provider - Ro..  | 2                | 1                                       | 0                                      | 1                            | 50.0%                           |      |
|                 |                                 | Non Contracted Provider - Urg.. | 1                | 1                                       | 0                                      | 0                            | 0.0%                            |      |
|                 | Inpatient                       |                                 |                  | 2                                       | 2                                      | 0                            | 0                               | 0.0% |
|                 |                                 | Non Contracted Provider - Ret.. | 1                | 1                                       | 0                                      | 0                            | 0.0%                            |      |
|                 |                                 | Non Contracted Provider - Ro..  | 7                | 7                                       | 0                                      | 0                            | 0.0%                            |      |
|                 |                                 | PDR/Claims Medical Review       | 13               | 10                                      | 0                                      | 3                            | 23.1%                           |      |
|                 |                                 | Retro Request                   | 2                | 2                                       | 0                                      | 0                            | 0.0%                            |      |
|                 |                                 | Routine - Extended Service      | 2                | 2                                       | 0                                      | 0                            | 0.0%                            |      |
|                 |                                 | Routine - Initial Request       | 584              | 556                                     | 0                                      | 28                           | 4.8%                            |      |
|                 | InpatientPsych                  | Routine - Initial Request       | 8                | 3                                       | 0                                      | 5                            | 62.5%                           |      |
|                 | Inpt Elective                   | CMC Part B Drugs – Urgent       | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |      |
|                 |                                 | Member Initiated Org Determi..  | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |      |
|                 |                                 | Member Initiated Org Determi..  | 1                | 1                                       | 0                                      | 0                            | 0.0%                            |      |
|                 |                                 | Non Contracted Provider - Urg.. | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |      |
|                 |                                 | Routine - Initial Request       | 49               | 28                                      | 0                                      | 21                           | 42.9%                           |      |
|                 |                                 | Urgent - Initial Request        | 26               | 4                                       | 0                                      | 22                           | 84.6%                           |      |
|                 | OP-BehavioralGr                 | Non Contracted Provider - Ro..  | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |      |
| OP-Behaviorial  | Non Contracted Provider - Ret.. | 4                               | 3                | 0                                       | 1                                      | 25.0%                        |                                 |      |
|                 | Non Contracted Provider - Ro..  | 1                               | 1                | 0                                       | 0                                      | 0.0%                         |                                 |      |
|                 | Routine - Initial Request       | 1                               | 0                | 0                                       | 1                                      | 100.0%                       |                                 |      |
| OPHospital      |                                 |                                 | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |      |
|                 | CMC Part B Drugs – Routine      | 24                              | 11               | 0                                       | 13                                     | 54.2%                        |                                 |      |
|                 | CMC Part B Drugs – Urgent       | 34                              | 7                | 0                                       | 27                                     | 79.4%                        |                                 |      |
|                 | Member Initiated Org Determi..  | 32                              | 4                | 0                                       | 28                                     | 87.5%                        |                                 |      |
|                 | Member Initiated Org Determi..  | 18                              | 3                | 0                                       | 15                                     | 83.3%                        |                                 |      |
|                 | Member Rep Initiated Org Det..  | 3                               | 0                | 0                                       | 3                                      | 100.0%                       |                                 |      |
|                 | Non Contracted Provider - Ret.. | 1                               | 1                | 0                                       | 0                                      | 0.0%                         |                                 |      |
|                 | Non Contracted Provider - Ro..  | 44                              | 4                | 0                                       | 40                                     | 90.9%                        |                                 |      |



## Referral Tracking Report

| LOB Rollup N..           | Template   | Disposition                     | Total # of Auths | # Auth Services Rendered within 90 days | # Auth Services Rendered After 90 days | # Auth Services Not Rendered | % Auths w/ No Services Rendered |
|--------------------------|------------|---------------------------------|------------------|-----------------------------------------|----------------------------------------|------------------------------|---------------------------------|
| Cal MediConnect          | OPHospital | Non Contracted Provider - Urg.. | 15               | 2                                       | 0                                      | 13                           | 86.7%                           |
|                          |            | Non-contracted CMC Part B D..   | 1                | 1                                       | 0                                      | 0                            | 0.0%                            |
|                          |            | Overtured Denial                | 8                | 1                                       | 0                                      | 7                            | 87.5%                           |
|                          |            | PDR/Claims Medical Review       | 33               | 25                                      | 0                                      | 8                            | 24.2%                           |
|                          |            | Retro Request                   | 20               | 13                                      | 0                                      | 7                            | 35.0%                           |
|                          |            | Routine - Extended Service      | 21               | 6                                       | 0                                      | 15                           | 71.4%                           |
|                          |            | Routine - Initial Request       | 826              | 174                                     | 0                                      | 652                          | 78.9%                           |
|                          |            | Urgent - Extended Service       | 5                | 2                                       | 0                                      | 3                            | 60.0%                           |
|                          |            | Urgent - Initial Request        | 262              | 114                                     | 0                                      | 148                          | 56.5%                           |
| OPHospitalGr             |            | CMC Part B Drugs – Routine      | 24               | 11                                      | 0                                      | 13                           | 54.2%                           |
|                          |            | CMC Part B Drugs – Urgent       | 14               | 7                                       | 0                                      | 7                            | 50.0%                           |
|                          |            | Member Initiated Org Determi..  | 16               | 6                                       | 0                                      | 10                           | 62.5%                           |
|                          |            | Member Initiated Org Determi..  | 4                | 3                                       | 0                                      | 1                            | 25.0%                           |
|                          |            | Member Rep Initiated Org Det..  | 1                | 1                                       | 0                                      | 0                            | 0.0%                            |
|                          |            | Member Rep Initiated Org Det..  | 1                | 1                                       | 0                                      | 0                            | 0.0%                            |
|                          |            | Non Contracted Provider - Ro..  | 7                | 1                                       | 0                                      | 6                            | 85.7%                           |
|                          |            | Non Contracted Provider - Urg.. | 2                | 0                                       | 0                                      | 2                            | 100.0%                          |
|                          |            | Non-contracted CMC Part B D..   | 3                | 1                                       | 0                                      | 2                            | 66.7%                           |
|                          |            | Overtured Denial                | 3                | 0                                       | 0                                      | 3                            | 100.0%                          |
|                          |            | PDR/Claims Medical Review       | 30               | 22                                      | 0                                      | 8                            | 26.7%                           |
|                          |            | Retro Request                   | 2                | 1                                       | 0                                      | 1                            | 50.0%                           |
|                          |            | Routine - Extended Service      | 17               | 8                                       | 0                                      | 9                            | 52.9%                           |
|                          |            | Routine - Initial Request       | 253              | 93                                      | 0                                      | 160                          | 63.2%                           |
|                          |            | Urgent - Extended Service       | 2                | 2                                       | 0                                      | 0                            | 0.0%                            |
| Urgent - Initial Request | 66         | 37                              | 0                | 29                                      | 43.9%                                  |                              |                                 |
| SkilledNursing           |            | Member Rep Initiated Org Det..  | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |
|                          |            | Operational PA                  | 67               | 44                                      | 0                                      | 23                           | 34.3%                           |
|                          |            | Retro Request                   | 17               | 13                                      | 0                                      | 4                            | 23.5%                           |
|                          |            | Routine - Initial Request       | 52               | 36                                      | 0                                      | 16                           | 30.8%                           |
|                          |            | Urgent - Initial Request        | 99               | 59                                      | 0                                      | 40                           | 40.4%                           |
| Transportation           |            | Member Initiated Org Determi..  | 19               | 1                                       | 0                                      | 18                           | 94.7%                           |
|                          |            | Member Initiated Org Determi..  | 3                | 0                                       | 0                                      | 3                            | 100.0%                          |

## Referral Tracking Report

| LOB Rollup N..     | Template       | Disposition                    | Total # of Auths | # Auth Services Rendered within 90 days | # Auth Services Rendered After 90 days | # Auth Services Not Rendered | % Auths w/ No Services Rendered |
|--------------------|----------------|--------------------------------|------------------|-----------------------------------------|----------------------------------------|------------------------------|---------------------------------|
| Cal<br>MediConnect | Transportation | Member Rep Initiated Org Det.. | 3                | 0                                       | 0                                      | 3                            | 100.0%                          |
|                    |                | Operational PA                 | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |
|                    |                | Overtured Denial               | 2                | 0                                       | 0                                      | 2                            | 100.0%                          |
|                    |                | Retro Request                  | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |
|                    |                | Routine - Initial Request      | 76               | 11                                      | 0                                      | 65                           | 85.5%                           |
| <b>Grand Total</b> |                |                                | <b>3,932</b>     | <b>1,892</b>                            | <b>0</b>                               | <b>2,040</b>                 | <b>51.9%</b>                    |

Medi-Cal Q3 2021  
Referral Tracking Report

| LOBRollupN..                    | Template                        | Disposition                     | Total # of Auths | # Auth Services Rendered within 90 days | # Auth Services Rendered After 90 days | # Auth Services Not Rendered | % Auths w/ No Services Rendered |
|---------------------------------|---------------------------------|---------------------------------|------------------|-----------------------------------------|----------------------------------------|------------------------------|---------------------------------|
| Medi-Cal                        | CBAS                            | Operational PA                  | 1                | 1                                       | 0                                      | 0                            | 0.0%                            |
|                                 |                                 | Retro Request                   | 87               | 83                                      | 0                                      | 4                            | 4.6%                            |
|                                 |                                 | Routine - Extended Service      | 59               | 46                                      | 0                                      | 13                           | 22.0%                           |
|                                 |                                 | Routine - Initial Request       | 5                | 4                                       | 0                                      | 1                            | 20.0%                           |
|                                 | CONT OF CARE                    | Non Contracted Provider - Ret.. | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |
|                                 |                                 | Non Contracted Provider - Ro..  | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |
|                                 |                                 | Non Contracted Provider - Urg.. | 2                | 1                                       | 0                                      | 1                            | 50.0%                           |
|                                 | CONT OF CARE GR                 | PDR/Claims Medical Review       | 1                | 1                                       | 0                                      | 0                            | 0.0%                            |
|                                 | CUSTODIAL                       | Non Contracted Provider - Ret.. | 8                | 3                                       | 0                                      | 5                            | 62.5%                           |
|                                 |                                 | Non Contracted Provider - Ro..  | 4                | 2                                       | 0                                      | 2                            | 50.0%                           |
|                                 |                                 | Retro Request                   | 774              | 727                                     | 0                                      | 47                           | 6.1%                            |
|                                 |                                 | Routine - Initial Request       | 242              | 162                                     | 0                                      | 80                           | 33.1%                           |
|                                 | Dental                          | Non Contracted Provider - Ro..  | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |
| Non Contracted Provider - Urg.. |                                 | 2                               | 0                | 0                                       | 2                                      | 100.0%                       |                                 |
| Routine - Initial Request       |                                 | 55                              | 32               | 0                                       | 23                                     | 41.8%                        |                                 |
| Urgent - Initial Request        |                                 | 7                               | 1                | 0                                       | 6                                      | 85.7%                        |                                 |
| DME                             | Non Contracted Provider - Ret.. | 15                              | 9                | 0                                       | 6                                      | 40.0%                        |                                 |
|                                 | Non Contracted Provider - Ro..  | 32                              | 6                | 0                                       | 26                                     | 81.3%                        |                                 |
|                                 | Non Contracted Provider - Urg.. | 3                               | 0                | 0                                       | 3                                      | 100.0%                       |                                 |
|                                 | Operational PA                  | 7                               | 7                | 0                                       | 0                                      | 0.0%                         |                                 |
|                                 | Overtured Denial                | 3                               | 3                | 0                                       | 0                                      | 0.0%                         |                                 |
|                                 | PDR/Claims Medical Review       | 19                              | 14               | 0                                       | 5                                      | 26.3%                        |                                 |
|                                 | Reopening CMC                   | 1                               | 0                | 0                                       | 1                                      | 100.0%                       |                                 |
|                                 | Retro Request                   | 26                              | 8                | 0                                       | 18                                     | 69.2%                        |                                 |
|                                 | Routine - Extended Service      | 2                               | 0                | 0                                       | 2                                      | 100.0%                       |                                 |
|                                 | Routine - Initial Request       | 323                             | 130              | 0                                       | 193                                    | 59.8%                        |                                 |
|                                 | Urgent - Initial Request        | 49                              | 29               | 0                                       | 20                                     | 40.8%                        |                                 |
| HomeHealth                      | Non Contracted Provider - Ret.. | 4                               | 2                | 0                                       | 2                                      | 50.0%                        |                                 |
|                                 | Non Contracted Provider - Ro..  | 2                               | 0                | 0                                       | 2                                      | 100.0%                       |                                 |
|                                 | Non Contracted Provider - Urg.. | 3                               | 0                | 0                                       | 3                                      | 100.0%                       |                                 |
|                                 | Operational PA                  | 20                              | 5                | 0                                       | 15                                     | 75.0%                        |                                 |
|                                 | PDR/Claims Medical Review       | 3                               | 2                | 0                                       | 1                                      | 33.3%                        |                                 |

## Referral Tracking Report

| LOBRollupN..    | Template   | Disposition                     | Total # of Auths | # Auth Services Rendered within 90 days | # Auth Services Rendered After 90 days | # Auth Services Not Rendered | % Auths w/ No Services Rendered |
|-----------------|------------|---------------------------------|------------------|-----------------------------------------|----------------------------------------|------------------------------|---------------------------------|
| Medi-Cal        | HomeHealth | Retro Request                   | 3                | 0                                       | 0                                      | 3                            | 100.0%                          |
|                 |            | Routine - Extended Service      | 3                | 0                                       | 0                                      | 3                            | 100.0%                          |
|                 |            | Routine - Initial Request       | 3                | 0                                       | 0                                      | 3                            | 100.0%                          |
|                 |            | Urgent - Extended Service       | 9                | 3                                       | 0                                      | 6                            | 66.7%                           |
|                 |            | Urgent - Initial Request        | 38               | 16                                      | 0                                      | 22                           | 57.9%                           |
| HOSPICE         |            | Non Contracted Provider - Ret.. | 24               | 17                                      | 0                                      | 7                            | 29.2%                           |
|                 |            | Non Contracted Provider - Ro..  | 6                | 3                                       | 0                                      | 3                            | 50.0%                           |
|                 |            | Non Contracted Provider - Urg.. | 4                | 0                                       | 0                                      | 4                            | 100.0%                          |
|                 |            | Retro Request                   | 1                | 1                                       | 0                                      | 0                            | 0.0%                            |
|                 |            | Routine - Initial Request       | 1                | 1                                       | 0                                      | 0                            | 0.0%                            |
| Inpatient       |            |                                 | 1                | 1                                       | 0                                      | 0                            | 0.0%                            |
|                 |            | Concurrent Review               | 4                | 0                                       | 0                                      | 4                            | 100.0%                          |
|                 |            | Non Contracted Provider - Ro..  | 24               | 18                                      | 0                                      | 6                            | 25.0%                           |
|                 |            | Operational PA                  | 1                | 1                                       | 0                                      | 0                            | 0.0%                            |
|                 |            | PDR/Claims Medical Review       | 32               | 26                                      | 0                                      | 6                            | 18.8%                           |
|                 |            | Retro Request                   | 4                | 4                                       | 0                                      | 0                            | 0.0%                            |
|                 |            | Routine - Extended Service      | 3                | 1                                       | 0                                      | 2                            | 66.7%                           |
|                 |            | Routine - Initial Request       | 726              | 589                                     | 0                                      | 137                          | 18.9%                           |
| InpatientAdmin  |            |                                 | 2                | 2                                       | 0                                      | 0                            | 0.0%                            |
|                 |            | PDR/Claims Medical Review       | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |
|                 |            | Routine - Initial Request       | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |
| Inpt Elective   |            | Non Contracted Provider - Urg.. | 2                | 0                                       | 0                                      | 2                            | 100.0%                          |
|                 |            | Overtured Denial                | 1                | 1                                       | 0                                      | 0                            | 0.0%                            |
|                 |            | Routine - Extended Service      | 2                | 0                                       | 0                                      | 2                            | 100.0%                          |
|                 |            | Routine - Initial Request       | 67               | 36                                      | 0                                      | 31                           | 46.3%                           |
|                 |            | Urgent - Initial Request        | 19               | 6                                       | 0                                      | 13                           | 68.4%                           |
| OP-BehavioralGr |            | Non Contracted Provider - Ret.. | 1                | 1                                       | 0                                      | 0                            | 0.0%                            |
|                 |            | Non Contracted Provider - Ro..  | 7                | 3                                       | 0                                      | 4                            | 57.1%                           |
|                 |            | PDR/Claims Medical Review       | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |
|                 |            | Retro Request                   | 11               | 6                                       | 0                                      | 5                            | 45.5%                           |
|                 |            | Routine - Extended Service      | 64               | 28                                      | 0                                      | 36                           | 56.3%                           |
|                 |            | Routine - Initial Request       | 7                | 3                                       | 0                                      | 4                            | 57.1%                           |

## Referral Tracking Report

| LOBRollupN..             | Template       | Disposition                     | Total # of Auths | # Auth Services Rendered within 90 days | # Auth Services Rendered After 90 days | # Auth Services Not Rendered | % Auths w/ No Services Rendered |
|--------------------------|----------------|---------------------------------|------------------|-----------------------------------------|----------------------------------------|------------------------------|---------------------------------|
| Medi-Cal                 | OP-Behaviorial | Non Contracted Provider - Ro..  | 23               | 2                                       | 0                                      | 21                           | 91.3%                           |
|                          |                | Overtured Denial                | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |
|                          |                | Retro Request                   | 4                | 4                                       | 0                                      | 0                            | 0.0%                            |
|                          |                | Routine - Extended Service      | 58               | 41                                      | 0                                      | 17                           | 29.3%                           |
|                          |                | Routine - Initial Request       | 36               | 13                                      | 0                                      | 23                           | 63.9%                           |
|                          |                | Urgent - RN review; Expedite..  | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |
| OPHospital               | OPHospital     | Non Contracted Provider - Ret.. | 21               | 4                                       | 0                                      | 17                           | 81.0%                           |
|                          |                | Non Contracted Provider - Ro..  | 64               | 9                                       | 0                                      | 55                           | 85.9%                           |
|                          |                | Non Contracted Provider - Urg.. | 27               | 1                                       | 0                                      | 26                           | 96.3%                           |
|                          |                | Operational PA                  | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |
|                          |                | Overtured Denial                | 8                | 2                                       | 0                                      | 6                            | 75.0%                           |
|                          |                | PDR/Claims Medical Review       | 128              | 38                                      | 0                                      | 90                           | 70.3%                           |
|                          |                | Retro Request                   | 41               | 27                                      | 0                                      | 14                           | 34.1%                           |
|                          |                | Routine - Extended Service      | 75               | 21                                      | 0                                      | 54                           | 72.0%                           |
|                          |                | Routine - Initial Request       | 571              | 154                                     | 0                                      | 417                          | 73.0%                           |
|                          |                | Urgent - Extended Service       | 2                | 0                                       | 0                                      | 2                            | 100.0%                          |
| Urgent - Initial Request | 191            | 80                              | 0                | 111                                     | 58.1%                                  |                              |                                 |
| OPHospitalGr             | OPHospitalGr   | Non Contracted Provider - Ro..  | 10               | 4                                       | 0                                      | 6                            | 60.0%                           |
|                          |                | Non Contracted Provider - Urg.. | 3                | 0                                       | 0                                      | 3                            | 100.0%                          |
|                          |                | Operational PA                  | 1                | 1                                       | 0                                      | 0                            | 0.0%                            |
|                          |                | Overtured Denial                | 6                | 2                                       | 0                                      | 4                            | 66.7%                           |
|                          |                | PDR/Claims Medical Review       | 40               | 17                                      | 0                                      | 23                           | 57.5%                           |
|                          |                | Retro Request                   | 16               | 14                                      | 0                                      | 2                            | 12.5%                           |
|                          |                | Routine - Extended Service      | 127              | 54                                      | 0                                      | 73                           | 57.5%                           |
|                          |                | Routine - Initial Request       | 540              | 159                                     | 0                                      | 381                          | 70.6%                           |
|                          |                | Urgent - Extended Service       | 4                | 0                                       | 0                                      | 4                            | 100.0%                          |
| Urgent - Initial Request | 123            | 52                              | 0                | 71                                      | 57.7%                                  |                              |                                 |
| SkilledNursing           | SkilledNursing | Operational PA                  | 34               | 22                                      | 0                                      | 12                           | 35.3%                           |
|                          |                | PDR/Claims Medical Review       | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |
|                          |                | Retro Request                   | 11               | 10                                      | 0                                      | 1                            | 9.1%                            |
|                          |                | Routine - Initial Request       | 26               | 13                                      | 0                                      | 13                           | 50.0%                           |
|                          |                | Urgent - Initial Request        | 65               | 44                                      | 0                                      | 21                           | 32.3%                           |

## Referral Tracking Report

| LOB                | RollupN.. | Template       | Disposition                     | Total # of Auths | # Auth Services Rendered within 90 days | # Auth Services Rendered After 90 days | # Auth Services Not Rendered | % Auths w/ No Services Rendered |
|--------------------|-----------|----------------|---------------------------------|------------------|-----------------------------------------|----------------------------------------|------------------------------|---------------------------------|
| Medi-Cal           |           | Transportation |                                 | 1                | 1                                       | 0                                      | 0                            | 0.0%                            |
|                    |           |                | Non Contracted Provider - Ret.. | 1                | 1                                       | 0                                      | 0                            | 0.0%                            |
|                    |           |                | PDR/Claims Medical Review       | 71               | 69                                      | 0                                      | 2                            | 2.8%                            |
|                    |           |                | Retro Request                   | 9                | 6                                       | 0                                      | 3                            | 33.3%                           |
|                    |           |                | Routine - Extended Service      | 1                | 0                                       | 0                                      | 1                            | 100.0%                          |
|                    |           |                | Routine - Initial Request       | 391              | 141                                     | 0                                      | 250                          | 63.9%                           |
| <b>Grand Total</b> |           |                |                                 | <b>5,568</b>     | <b>3,051</b>                            | <b>0</b>                               | <b>2,517</b>                 | <b>45.2%</b>                    |



**Santa Clara Family  
Health Plan™**

Quality Monitoring of Plan Authorizations and Denial  
Letters

Q3 2021

## Quality Monitoring of Denial Letters for HS.04.01 3<sup>st</sup> Quarter 2021

### I. Purpose of the Quality Assurance (QA)

In order to present the results to Utilization Management Committee (UMC), Santa Clara Family Health Plan (SCFHP) completed the quarterly review for timely, consistent, accurate and understandable notification to members and providers regarding adverse determinations.

### II. Procedure

Santa Clara Family Health Plan reviewed in accordance to this procedure, 30 authorizations for the 1<sup>st</sup> quarter of 2021 in order to assess for the following elements.

#### A. Quality Monitoring

1. The UM Manager and Medical Director are responsible for facilitating a random review of denial letters to assess the integrity of member and provider notification.
  - a. At least 30 denial letters per quarter
  - b. Is overseen by the Utilization Management Committee on a quarterly basis
  - c. Assessment of denial notices includes the following:
    - Turn-around time for decision making
    - Turn-around time for member notification
    - Turn-around time for provider notification
    - Assessment of the reason for the denial, in clear and concise language
    - Includes criteria or Evidence of Benefit (EOB) applied to make the denial decision and instructions on how to request a copy of this from UM department.
    - Type of denial: medical or administrative
    - Addresses the clinical reasons for the denial
    - Specific to the Cal Medi-Connect membership, the denial notification includes what conditions would need to exist to have the request be approved.
    - Appeal and Grievance rights
    - Member's letter is written in member's preferred language within plan's language threshold.
    - Member's letter includes interpretation services availability
    - Member's letter includes nondiscriminatory notice.
    - Provider notification includes the name and direct phone number of the appropriately licensed professional making the denial decision



### III. Findings

- A. For Q3 2021, the dates of service and denials were pulled in October 2021.
1. 30 unique authorizations were pulled with a random sampling.
    - a. 50% or 15/30 Medi-Cal LOB and 50% or 15/30 CMC LOB
    - b. 100% or 30/30 were denials
    - c. 53% or 16/30 were expedited requests
      - 100% of the expedited authorizations are compliant with regulatory turnaround time of 72 calendar hours
    - d. 47% or 14/30 were standard requests
      - 100% of standard authorization are compliant with regulatory turnaround time (5 business days for Medi-Cal LOB and 14 calendar days for CMC LOB / or 30 calendar days for retro)
    - e. 40% or 12/30 were medical denials
    - f. 60% or 18/30 were administrative denials
    - g. 100% were denied by a Medical Director
    - h. 100% or 30/30 of all requests were provided written notifications to both member and provider
    - i. 100% or 16/16 of the expedited authorizations were provided oral notifications to member.
    - j. 100% or 30/30 of the member letters are in the member's preferred language.
    - k. 100% or 30/30 of the written notifications were readable
    - l. 100% or 30/30 of the written notifications included the rationale for denial
    - m. 100% or 30/30 of the letters included the criteria or EOC that the decision was based upon.
    - n. 100% or 30/30 of the letters included interpreter rights and instructions on how to contact the Medical Director.

### IV. Follow-Up

The Utilization Management leadership team and Medical Director reviewed the findings of this audit and recommendations from that finding presented to UMC are as follows:

1. Quality and productivity will continue to be monitored on a regular basis including these quarterly audits. Findings were reviewed by the Medical Director.
2. Issues will be addressed with the appropriate staff member.

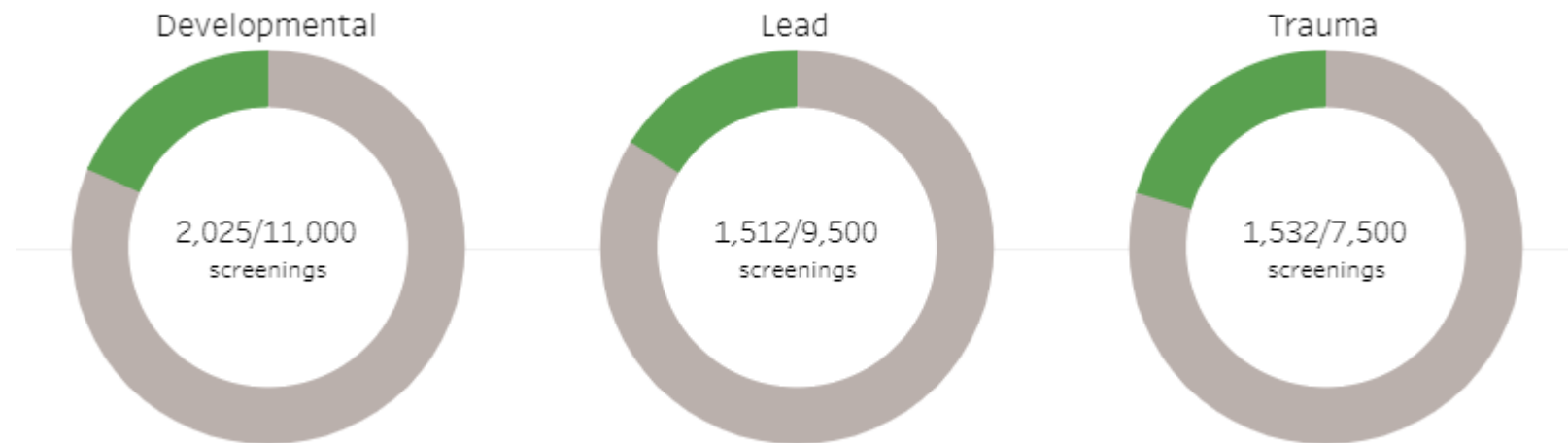


**Santa Clara Family  
Health Plan™**

Behavioral Health UM

# Behavioral Health

## Screening Goals (Jul 2021- Jun 2022)



# Behavioral Health

## Psychiatric Admissions: **CMC**

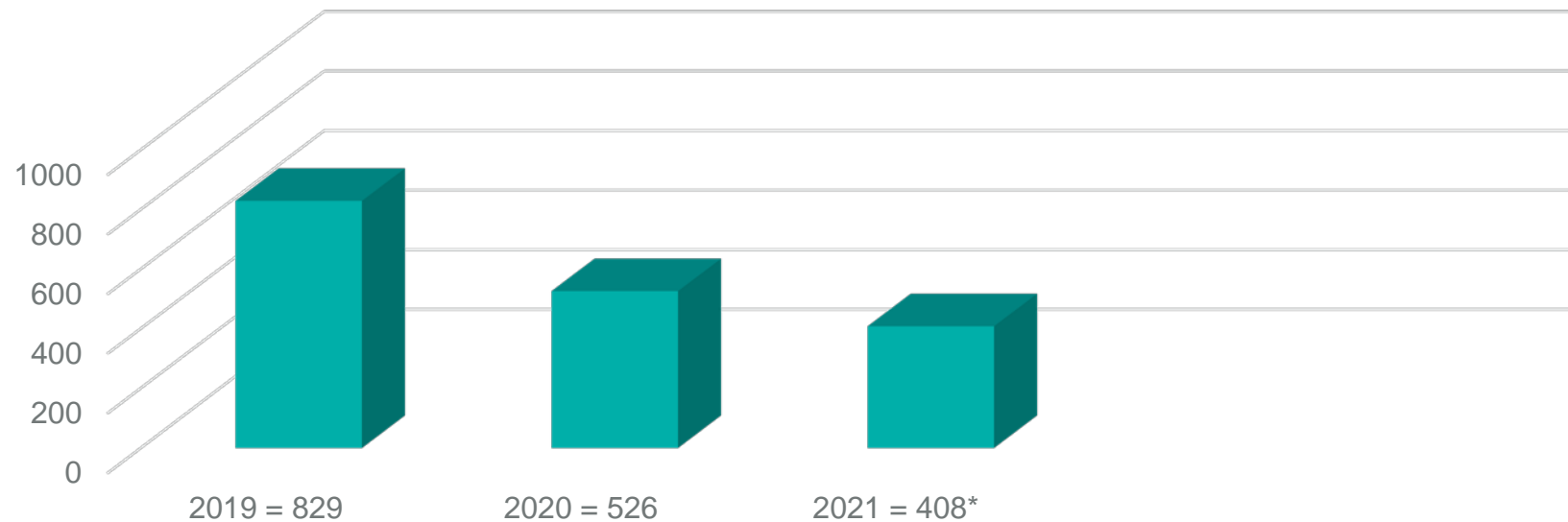
Quarter 1- 2021: 11 admissions, one readmission at Reno Behavioral Health

Quarter 2- 2021: 9 admissions

Quarter 3- 2021: 14 admissions

# Behavioral Health

## Utilization: Behavioral Health\*\* Cal MediConnect per 1,000



2021\* = Jan – Oct

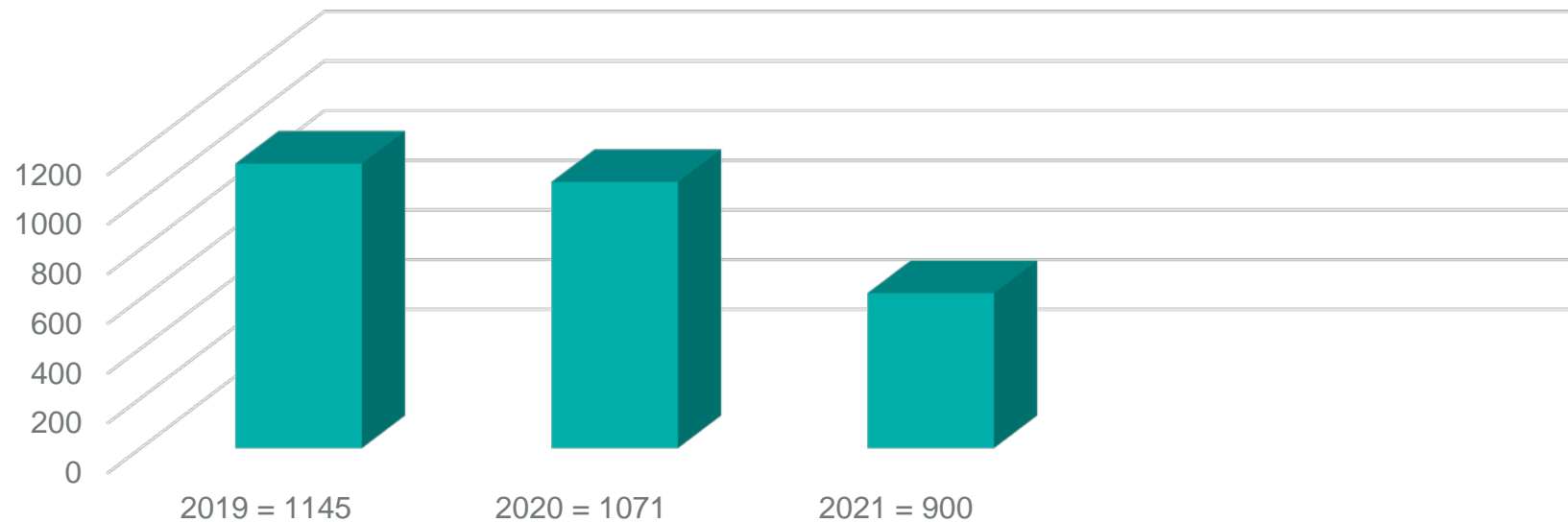
Run Date 10/13/2021

\*\* Utilization includes both specialty and mild to moderate

Category of Service: Visit, Unique member, Service NPI, Date of service

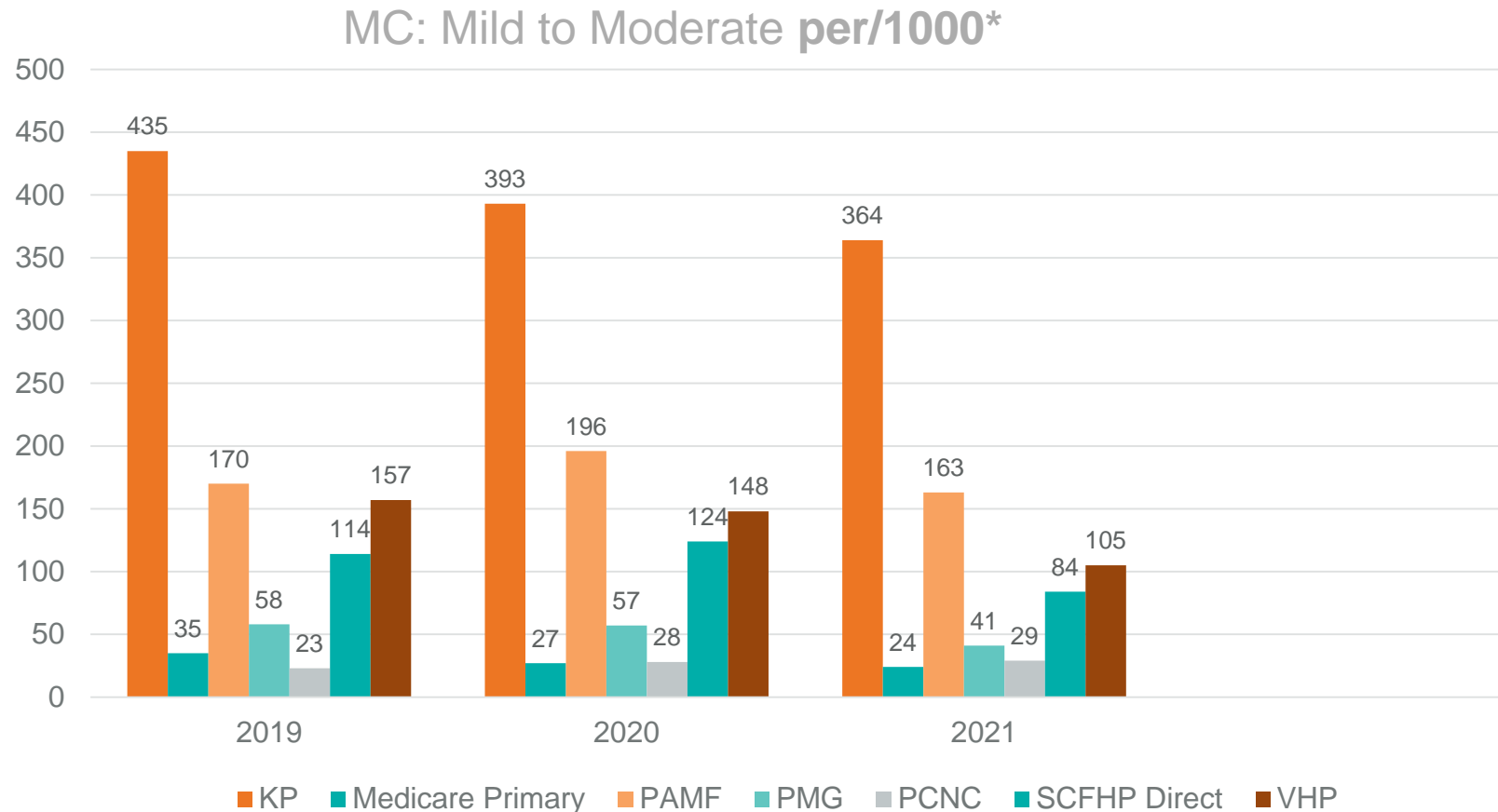
# Behavioral Health

## Utilization: Cal MediConnect Unique Members



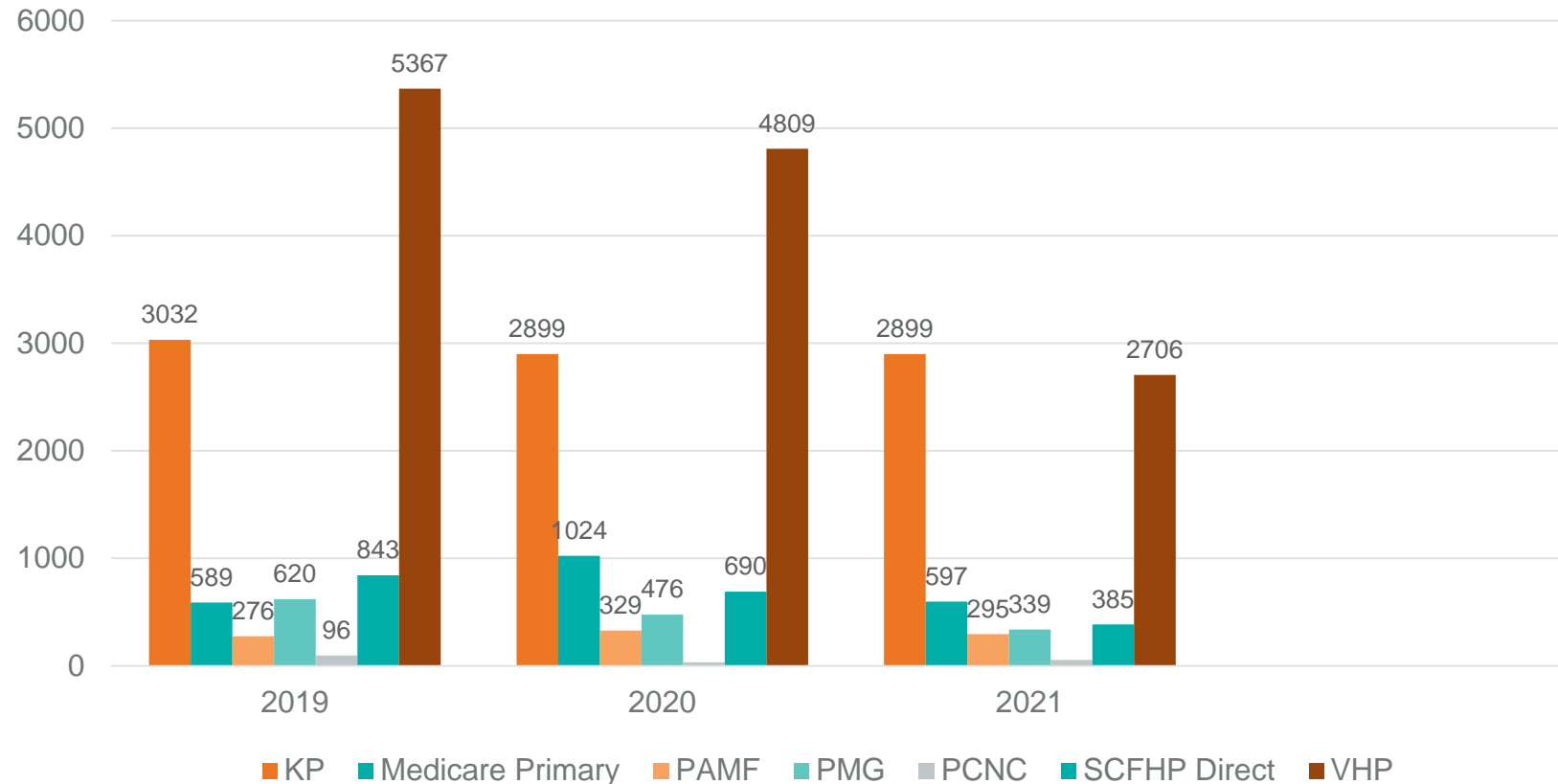
2021\* = Jan – OCT  
Run Date 10/13/2021  
Category of Service: Visit, Unique member, Service NPI, Date of service  
Mental Health = All ages

# Behavioral Health



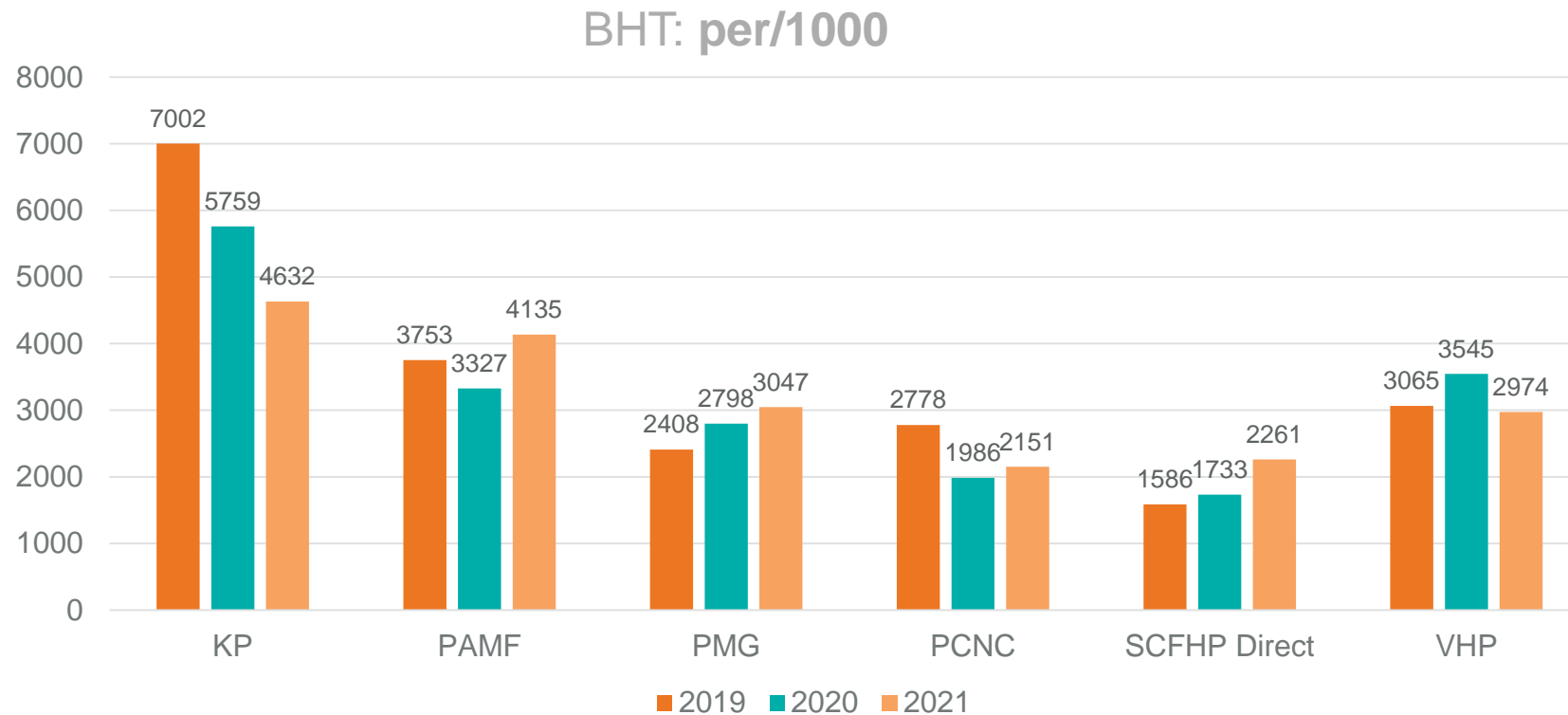
# Behavioral Health

MC: Mild to Moderate Unique Members





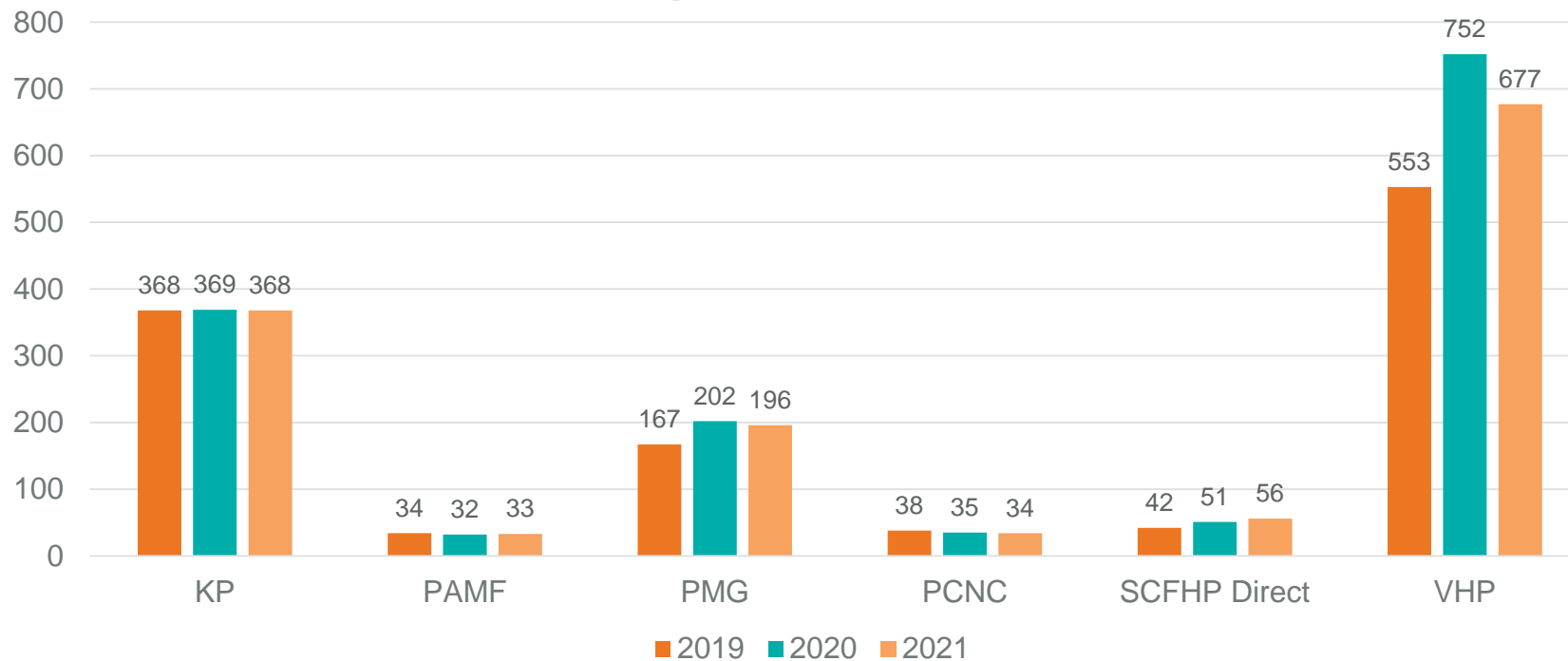
# Behavioral Health Treatment



2021 = Jan – Oct  
 Run date 10/13/21  
 BHT = Units = hours  
 Member = <21 years

# Behavioral Health Treatment

BHT: Unique Members



2021 = Jan – Oct  
 Run date 10/13/21  
 BHT = Units = hours  
 Member = <21 years



**Santa Clara Family  
Health Plan™**

Adjournment

Next Meeting: January 19, 2022 at 6:00 p.m.