



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

Wednesday, November 10, 2021, 12:15 – 1:45 PM
Santa Clara Family Health Plan, Teleconference
6201 San Ignacio Ave, San Jose, CA 95119

MINUTES - Approved

Committee Members Present

Thad Padua, MD, Chair
Clara Adams, LCSW
Dolly Goel, MD
Bridget Harrison, MD
Jimmy Lin, MD
David Mineta
Peter L. Nguyen, DO
Sherri Sager
Meg Tabaka, MD

Committee Members Absent

Michael Griffis, MD
Pedro Alvarez, MD

Additional Attendees

Jack Pollack, MD, Guest

Staff Present

Christine Tomcala, Chief Executive Officer
Dang Huynh, PharmD, Director, Pharmacy & Utilization Management
Janet Gambatese, Director, Provider Network Operations
Johanna Liu, PharmD, Director, Quality & Process Improvement
Brandon Engelbert, Manager, Provider Network Operations
Robyn Esparza, Administrative Assistant

Staff Absent

Laurie Nakahira, DO, Chief Medical Officer

Additional Staff

Jessica Bautista, Manager, Community Based Case Management
Nicole Bell, Manager, Home & Community Based Services Program Manager
Karen Fadley, Manager, Provider Data, Credentialing and Reporting
Stephanie Vielma, Manager, Provider Performance Program

1. Roll Call/Establish Quorum

Thad Padua, MD, Chair, called the meeting to order at 12:20 pm. Roll call was taken and a quorum was established.

Dr. Padua introduced Dr. Jack Pollack and welcomed him as a new member of the Provider Advisory Council (PAC).

Dr. Padua noted that new member Dr. Ghislaine Guez could not attend today's meeting. She will be in attendance at the next meeting on February 9, 2022, and will be officially welcomed to the council then..

2. Public Comment

There was no public comment.

3. Meeting Minutes

The minutes of the August 11, 2021, Provider Advisory Council (PAC) meeting were reviewed.

It was moved, seconded, and the August 11, 2021, Provider Advisory Council (PAC) minutes were unanimously approved.

Motion: Dr. Peter Nguyen

Second: Mr. David Mineta

Ayes: Dr. Lin, Ms. Adams, LCSW, Dr. Harrison, Dr. Lin, Dr. Nguyen, Dr. Tabaka, Mr. Mineta, Dr. Padua, Ms. Sager, Dr. Dolly Goel

4. Chief Executive Officer Update

Ms. Christine Tomcala, CEO, presented the November 2021 Enrollment Summary, noting a total enrollment of 289,288, with 10,415 members in Cal MediConnect (CMC) and 278,873 members in Medi-Cal(MC).

Ms. Tomcala noted COVID continues to be the focus of the Plan. She noted the Plan would like to narrow, if not close, the gap between the vaccine percentages of our Medi-Cal members compared to the county as a whole. In most counties around the state, it runs about a 20% difference. To help close the gap, the Plan has held some vaccine clinics at our new Blanco Alvarado Community Resource Center in collaboration with the county's vaccination efforts.

Ms. Tomcala noted the Plan is also in the process of sponsoring other community-based organization events to encourage the remaining population to get vaccinated. The Plan is offering a \$50 incentive for members ages 12 and up, who have not yet been vaccinated to get a vaccine.

Dr. Bridget Harrison asked if the \$50 is automatically sent to members. Ms. Tomcala confirmed incentives would automatically be sent to members. She noted the member does not have to take any action and that it is based on claims information received by the Plan.

Dr. Harrison inquired about the difference between the local vaccination rate and our membership vaccination rate. Ms. Tomcala noted the difference is roughly about 20%, and in general, the Plan is the second-highest health plan in the state for Medi-Cal membership vaccination rates. Even though the Plan is still lagging 20 percentage points, our county does so well that our population is more vaccinated than any other population, other than San Francisco, which might be a touch more than us. She noted we are doing very well from that perspective, but we still have that 20% gap as many of the counties do.

5. Pharmacy

a. Review and Discuss the Current Drug Reports

Dr. Dang Huynh, Director, Pharmacy and Utilization Management, presented the drug utilization reports for the '2021 Q3 Top 10 Drugs by Total Cost' and 'Top 10 Drug Classes by Prior Authorization Volume' for the reporting period of July 1, 2021 – September 30, 2021.

For MC, Dr. Huynh noted cost were related to diabetes, cancer, and biologics for psoriasis and rheumatoid arthritis. Claims have increased to about 15,000 claims with an increase of about a million dollars quarter over quarter.

For CMC, same drug mix as the previous quarter, which includes diabetes and HIV. Eliquis, a drug used to treat atrial fibrillation to prevent clotting, came in tenth. Overall, there was an increase of roughly 3,000 claims and about half a million dollars versus last quarter.

Medi-Cal Prior Authorization (PA) volume were similar to the previous quarter. The volume decreased roughly to about 100 for our MC and 76 for our CMC. CMC Pas volume remains low. Therefore, any increases of a couple PAs may cause the drug to be on the list. Prolia, which is used to treat bone health, had a slight increase in requests. It was previously ranked at 268 and is now ranked 3rd.

b. Pharmacy Updates

Medi-Cal RX

Dr. Huynh provided an update on the Medi-Cal RX, state wide pharmacy benefit FFS carve for MC. The 60-day member notice has gone out. The plan is currently working on updating a provider communication. There will be internal training again as well. The Plan was previously prepared for all this before the multiple delays from the State. Plan is on track for the transition with training and communication. Dr. Huynh also noted that DHCS and Magellan has computer-based training on the Medi-Cal Rx portal. The Plan is still working with DHCS to finalize some recommendations for scope of medical vs pharmacy billing. The state is still working on closing the gap in terms of drugs and items typically covered by managed care plans, but not on the State's contracted drug list. The state has announced they will allow alcohol pads to be billable under Medi-Cal Rx.

Dr. Huynh provided an update that therapeutic continuous glucose monitors (CGMs) for Type 1 diabetes will be a Medi-Cal benefit and may be billed through the pharmacy effective 1/1/2022.

COVID Vaccinations

Dr. Huynh noted the plan is working with our local independent pharmacies to close the gap on COVID-19 vaccinations. We have reached out to all the independent pharmacies in the county. Those independent pharmacies are reaching out to our members to provide education and answer any questions on any hesitancy regarding the vaccination. These independent sites are covered sites and we are happy that they are willing to collaborate with us on this matter.

Regarding the COVID-19 vaccination costs as well as the administration fee, all the pharmacies are billing to Medicare FFS for right now. Starting 1/1/22, the financial responsibility will land on the Plan.

6. Utilization Management

a. UM Updates

Dr. Dang Huynh, Director, Pharmacy and Utilization Management, provided an update to the council regarding the Spanish-speaking blood glucose meter. He noted the Quality team identified that there were about 200 Hispanic-speaking or Hispanic members that may benefit from the meters. Letters have been sent to both members and providers about the meters. He noted that, as of today, we have about 25 members that are on the meter and we are trying to capture how their A1C is doing. The outreach has only been via letter communication. A Clinical Pharmacist has been hired to do clinical programs. One of the programs they will be doing is to manage diabetes. Initially, the pharmacist will be reaching out to DM members with an A1C greater than 9 in addition to reaching out to the doctors to collaborate and help the physicians manage prescription regimens, coordinate A1C orders and labs, for the member. They will also be speaking with the members to identify any barriers surrounding their diabetes (i.e., diet, medication adherence, transportation). They will also be contacting the remainder of 175 members that have not received the Spanish-speaking meters. In the future, they will be expanding to members with hypertension, hyperlipidemia, CHF, and osteoporosis.

b. Discuss the New Major Organ Transplant (MOT) Carve-in Benefit

Dr. Huynh updated the council that for the MC line of business major organ transplants will be the Plan's plan responsibility, effective January 1, 2022. The plan already does have criteria and processes in place as the plan already has prior authorization processes for the CMC line of business.

7. Quality

Cal MediConnect CAHPS Survey Results 2021

Dr. Johanna Liu presented on the "Cal MediConnect CAHPS Survey Results 2021" and reviewed the findings in detail. CAHPS is a consumer satisfaction survey that the health plan is required to administer annually by the Centers for Medicare and Medicaid Services (CMS). She noted that SCFHP contracts with SPH Analytics to conduct the survey. Results impact NCQA accreditation and health plan star ratings. COVID-19 has had a significant impact on the CAHPS survey methodology and reporting for 2021.

The health plan achieved a 33.5% response rate, which is the highest response rate since CAHPS started in 2016. CAHPS language was integrated into the Customer Service post-call survey and social media platform implemented on March 15, 2021. Dr. Liu reviewed the survey findings outlined in the presentation in detail on the following areas: 'SCFHP's Overall Performance based on SPH Benchmark and CMS National benchmark', 'Overall Performance of Providers', 'Overall Performance of SCFHP', 'Overall CAHPS Performance from 2019 to 2021', 'Findings by Demographic', 'Estimated NCQA Health insurance Plan Ratings', 'Estimated 2021 CMS Medicare Star Ratings', 'Flowchart - Understanding Relative Performance', 'Successful CAHPS Improvement Projects', and 'Opportunities for Improvement, and Next Steps for CAHPS 2022 Work Plan and Strategies'.

8. Provider Network Operations

a. Discuss the Quality Provider Bonus

Ms. Janet Gambatese, Director, Provider Network Operations (PNO), briefed the council on the Provider Bonus for CY2021. She noted that we recently communicated to our providers about the bonus. We're providing a last-minute quality care gap closure bonus from now until December 31, 2021. We report, these measures to CMS and NCQA to show our health plan quality performance, and hope this end of the year push will help our performance as well as support our providers with an incentive.

She noted this is a one-time bonus for MC and CMC lines of business. The eligible providers are SCFHP PCPs and the target members are those members assigned to each PCP panel. The service timeframe is related to care gaps closed between October 1 and December 31, 2021. The provider memos for MC and CMC are included in the meeting packet, and includes all of the details: the measures, the services to be completed, strategies for gap closures, the provider bonus, and the member incentive.

b. Discuss SCFHP's Objective Regarding Provider Satisfaction

Each year, SCFHP does a survey to providers to rate their satisfaction with Santa Clara County Health Plan (SCFHP). This year, in addition to this regular annual survey we do for regulatory purposes, we are going to conduct an enhanced provider/delegate satisfaction survey, as we have created a plan objective around provider satisfaction. We want to use other tactics such as focus groups, or interviews to gain additional insights into provider and delegate satisfaction, which we will use to establish action plans to increase provider satisfaction. We brought this to PAC to get the council's input as to how we can successfully get providers and delegates to participate in this endeavor, for example, should we do small focus groups, one-on-one meetings, interviews, or any other ideas?

Suggestions from the council included:

- An online survey, such as Survey Monkey, with questions and a field for additional comments.
- Focus groups or one-on-one for small group practitioners.
- Break down the survey into multiple surveys, rather than one long survey.
- Be aware of the timing of the survey, such as do not survey providers at the end of the year, when providers are busier.

9. Old Business

There was no old business discussed.

10. New Business

a. Discuss the 2022 Meeting Calendar

Ms. Gambatese, Director, Provider Network Operations, presented the PAC Meeting Calendar for 2022. The council will revert to holding all meetings on the second Wednesday of the month, quarterly. The meeting dates are as follows: Wednesday, February 9th, May 11th, August 10th, and November 9th.



b. Discuss Enhanced Care Management (ECM)/Community Support (CS)

The purpose of our presentation is to provide updated information on the CalAim implementation and give the Provider Advisory Council a high level overview of the new Enhanced Care Management benefit and complimentary Community Supports that will launch on January 1, 2022. The overview includes a brief explanation of the benefit and services being offered and how to refer members.

Ms. Jessica Bautista, Manager, Community Based Case Management, provided a detailed presentation on ECM.

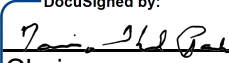
Ms. Nicole Bell, Manager, Home & Community Based Services Program Manager, provided a detailed presentation on Community Supports.

11. Discussion / Recommendations

There were no further discussions and/or recommendations.

12. Adjournment

The meeting adjourned at 1:55 p.m. The next meeting is scheduled for Wednesday, February 9, 2022.

DocuSigned by:


Thad Padua, Chair

4/20/2022

Date