



Special Meeting of the  
**Santa Clara County Health Authority**  
**Governing Board**  
**Strategic Planning Session**

Thursday, March 11, 2021, 12:00 PM – 2:00 PM  
Santa Clara Family Health Plan  
6201 San Ignacio Ave, San Jose, CA 95119

**Via Teleconference**  
(669) 900-6833  
Meeting ID: 964 3809 1428  
Passcode: SPECBD0312  
<https://zoom.us/j/96438091428>

## AGENDA

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<b>1. Welcome, Meeting Goals and Setting the Stage</b> Christine Tomcala, CEO Bobbie Wunsch, Pacific Health Consulting Group	12:00	10 min
<b>2. Public Comment</b> Members of the public may speak to any item not on the agenda; two minutes per speaker. The Governing Board reserves the right to limit the duration of the public comment period to 30 minutes.	12:10	5 min
<b>3. Presentation of the Vision, Mission and Value Statements</b> Christine Tomcala, CEO	12:15	25 min
<b>4. Review of Strategic Planning Themes / Environmental Context</b> Rafael Gomez & Bobbie Wunsch, Pacific Health Consulting Group	12:40	35 min
<b>5. Discussion: Board Questions, Reflections and Feedback on Strategic Plan</b> Bobbie Wunsch, Pacific Health Consulting Group	1:15	40 min
<b>6. Next Steps</b> <ul style="list-style-type: none"><li>• Implementation, Reporting and Communication</li><li>• Bold Initiative</li></ul>	1:55	5 min
<b>7. Adjournment</b>	2:00	

### **Notice to the Public—Meeting Procedures**

- Persons wishing to address the Governing Board 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 Rita Zambrano 48 hours prior to the meeting at (408) 874-1842.
- To obtain a copy of any supporting document that is available, contact Rita Zambrano at (408) 874-1842. 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).

### Quality Improvement

*Support improved quality outcomes among provider networks and delegated entities*

- **Improvement Initiatives** to increase patient access, care coordination, and health promotion.
- **Quality Incentive Programs** and redesigned contract arrangements to promote higher quality and value
- **National Committee Quality Accreditation** to meet the highest standards
- **HEDIS Score Improvement** through targeted initiatives and efforts

### Complex Care Delivery

*Successfully implement model of care for members with complex conditions*

- **Managed Long Term Care Services & Supports** continued program development
- **Enhanced Internal Complex Care Delivery Expertise** to support care for members with complex conditions
- **Strengthened Behavioral Health Program** including enhancing internal capacity and expanding the external provider network
- **Strengthened Community Partnerships** to more effectively address the social determinants of health
- **ACA 2703 Health Homes Implementation** to pilot comprehensive systems of care for most vulnerable members

### Growth

*Explore opportunities to add new health plan products and grow membership*

- **Exploration of Medicare Product Options** for Cal Medi-Connect opt-outs & new Medicare enrollees, such as Medicare Advantage, including Chronic SNP, DSNP, or other products for dual eligibles
- **New Program Options Exploration** such as service area expansions or other new products
- **Marketing and Outreach** to maximize program enrollment and retention

### Value-Based Care

*Expand contracting, reimbursement, and other arrangements that incentivize value-based care*

- **Alternative Reimbursement/Incentive Arrangements and Contracts** that align incentives, promote higher quality, and encourage innovation
- **Pharmacy Contracts and Management** that contain costs and enhance oversight
- **Innovation Pilots** to explore new and emerging models of care
- **Contractual Arrangements & Score Cards** that increase accountability, promote shared savings, and increase capacity

### Internal Optimization

*Enhance internal systems to support integrated operations and sophisticated business analysis in a value-based care environment*

- **Data Analytics and Reporting Functionality** to enable robust analytics, reporting, and compliance
- **Single Claims Operating System** to enable integration with ancillary sub-systems across all departments and lines of business
- **Fraud Waste & Abuse Program** to improve efficiency and quality
- **Risk Adjusted Payment & Quality Withholds** to achieve appropriate levels of revenue
- **Provider Network and Delegated Entity Accountability** for quality, cost, and compliance

#### BUILDING BLOCKS

Financial Strength

Culture of Compliance

Effective Workforce

Positive County, State and Federal Relationships

## Mission

Santa Clara Family Health Plan is dedicated to improving the health and well-being of the residents of our region. Our mission is to provide high quality, comprehensive health care coverage for those who do not have access to, or are not able to purchase, good health care at an affordable price. Working in partnership with select providers, we act as a bridge between the health care system and those who need coverage.

## The Spirit of Care

*The Spirit of Care* is the guiding principle of Santa Clara Family Health Plan. It is our commitment that our members will receive the care they need and the respect they deserve. It goes beyond the specific medical need of an individual and takes into account the mental, spiritual, and cultural implications of health-care decisions.

## Core Values

- We believe that health status cannot improve without parallel improvements in economic opportunities and social status.
- Economic status is the single greatest determinant of community health.
- We believe that as a publicly-funded, local health plan, we have a unique responsibility to work toward improving the health status of our community.
- We must always be a voice for promoting community health, using a comprehensive approach to health care and wellness.
- We believe that to achieve our mission, we must be a well-run, financially viable business that makes a significant investment in our community.
- We believe that our services must be easy to use, and our processes must be easy to understand and follow.
- We believe that our services must be culturally and linguistically appropriate, and that we must teach our members how to use the health-care system.
- We believe that respect for our members, providers, and staff is fundamental to our operations.
- We believe that our network of providers and staff must put our values into action. Our providers and staff must meet high standards of medical service and customer service.
- We believe that the safety-net providers and the traditional providers of quality care to low-income individuals are essential partners of our health plan.

## Distinguishing Characteristics

- We are a community-based local health plan.
- We are separate from county government.
- We are a public agency acting on behalf of the people of our community.
- We conduct business in public.
- We are accountable to our members and to the residents of this region.
- We work closely with our safety-net providers and with our community providers.
- We help to ensure the providers' continuing financial viability.
- We help our providers give members high-quality, comprehensive, and culturally and linguistically appropriate services.
- We work in the community to promote health and well-being for all.
- We have a governing board of stakeholders from the community.

## **Vision --- *Our Desired Future***

- Look beyond the life of the Long-Term Plan, often 20-30 years out
- Audacious aspirations or dreams that may never be achieved
- Success often dependent upon the actions of multiple organizations

<b>Examples:</b>	
LA Care	A healthy community in which all have access to the health care they need.
Central California Alliance for Health	Healthy people. Healthy communities.
Health Plan of San Mateo	We believe that <i>Healthy is for Everyone</i> — and we fight to make that possible.
San Francisco Health Plan	San Francisco is a healthy community for all.

## **Mission --- *What We Do***

- Typically describes the business we are in
- Provides a brief statement of our purpose

## **Values --- *Who We Are***

- Core ethics that define what we stand for
- Guide how we operate as an organization and serve our community

## **Strategic Plan --- *Framework for future annual plans & budgets***

- A high-level plan to help focus and prioritize the Plan's efforts over the next three years
- It sets direction, but does not provide the detail of annual Plan objectives and budget

## Vision

Health equity for all—where everyone has the opportunity to be as healthy as possible.

## Mission

To improve the well-being of our members and the community by providing equitable access to high quality health care, engaging members, and partnering with providers and community organizations.

## Values

- **Members First:** Our actions, behaviors, and attitudes focus on the health and welfare of our members.
- **Excellence:** We strive to deliver the highest quality experience to our members and partners.
- **Better Together:** We listen to, invest in, and collaborate with our partners and each other to benefit the community.
- **Integrity:** We do the right things for the right reasons to earn and keep our members' and partners' trust.
- **Equity and Inclusion:** We value and respect the diversity of our membership, our staff, and our county.
- **Culture of Caring:** Together, we create a work culture that supports, develops, and recognizes team members.
- **Accountability and Stewardship:** We are accountable to each other and the community we serve, and are prudent financial stewards of our resources.

Goals	Strategies	Success Measures
<p><b>Community Health Leadership</b></p> <p><i>Be a recognized local leader and collaborator in improving the health of vulnerable communities</i></p>	<ul style="list-style-type: none"> <li>As an essential partner in the safety net system, lead improvement in the health of vulnerable communities</li> <li>Raise Plan <b>visibility</b> among members and the community</li> <li>Deepen <b>partnerships</b> with local officials and agencies, health systems, and Community Based Organizations</li> </ul>	<ul style="list-style-type: none"> <li>Lead a major community health initiative</li> <li>Increase brand awareness among the targeted demographic from 54% to 65% who are at least moderately familiar with SCFHP</li> <li>Partner with CBOs on programming for the Blanca Alvarado Community Resource Center (CRC)</li> </ul>
<p><b>Quality, Access, &amp; Equity</b></p> <p><i>Deliver exceptional quality outcomes and health equity for all Plan members</i></p>	<ul style="list-style-type: none"> <li>Increase overall Plan <b>quality</b> across all networks</li> <li>Meet <b>NCQA Medicaid Module</b> standards</li> <li>Seek <b>NCQA Distinction in Multicultural Health Care</b></li> <li>Reduce <b>health and access disparities</b> among Plan membership, including strategies that address <b>social determinants of health</b></li> <li>Implement programs and benefits to serve populations with <b>complex care</b> medical and social needs</li> </ul>	<ul style="list-style-type: none"> <li>Increase HEDIS average performance score for CMC &amp; Medi-Cal across all networks and ethnic groups</li> <li>Achieve Medi-Cal NCQA Accreditation</li> <li>Develop a roadmap for NCQA Distinction in Multicultural Health Care</li> <li>Implement CalAIM population health management (PHM) programs, including Enhanced Care Management (ECM) and In Lieu of Services (ILOS).</li> </ul>
<p><b>Organizational Excellence</b></p> <p><i>Consistently demonstrate administrative and service excellence</i></p>	<ul style="list-style-type: none"> <li>Enhance and streamline the <b>member experience</b></li> <li>Develop a <b>DSNP</b> Medicare product</li> <li>Deliver a responsive and timely <b>provider relations experience</b></li> <li>Promote <b>staff development</b>, a <b>cohesive organizational identity</b>, and an <b>equitable and inclusive workplace</b></li> <li>Foster a <b>culture of compliance</b> across the Plan and delegated entities</li> <li>Ensure sustainable <b>financial health</b></li> </ul>	<ul style="list-style-type: none"> <li>Increase market share in both lines of business</li> <li>Improve provider and delegate net promoter score between 2022 and 2023</li> <li>Achieve overall ratings on employee satisfaction survey that exceed the norm of California health plans surveyed</li> <li>Successfully launch a Dual Eligible Special Needs Plan (DSNP) effective Jan. 2023</li> <li>≥ 95% of dashboard metrics in compliance</li> <li>Achieve positive net income and maintain at least two months of expenses in reserve</li> </ul>