



**Ventura County Medi-Cal Managed Care Commission (VCMMCC)
dba Gold Coast Health Plan (GCHP)**

Executive Finance Committee

Special Meeting

Thursday, January 23, 2023 – 3:00 p.m.

711 E Daily Drive, Camarillo

Community Room

Members of the public can participate using the Conference Call Number below.

Conference Call Number: 805-324-7279

Conference ID Number: 994 805 445#

Adventist Health Simi Valley
2975 N. Sycamore Dr.
Simi Valley, CA. 93065

Clinicas del Camino Real Inc.
1040 Flynn Rd.
Camarillo, CA 93012

233 Corte Linda
Santa Paula, CA 93060

AGENDA

CALL TO ORDER

ROLL CALL

PUBLIC COMMENT

The public has the opportunity to address Ventura County Medi-Cal Managed Care Commission (VCMMCC) doing business as Gold Coast Health Plan (GCHP) on the agenda.

Persons wishing to address VCMMCC are limited to three (3) minutes unless the Chair of the Commission extends time for good cause shown. Comments regarding items not on the agenda must be within the subject matter jurisdiction of the Commission.

Members of the public may attend the meeting in person, call in, using the numbers above, or can submit public comments to the Committee via email by sending an email to ask@goldchp.org. If members of the public want to speak on a particular agenda item, please identify the agenda item number. Public comments submitted by email should be under 300 words.

CONSENT

1. Approval of Executive Finance Committee special meeting minutes of January 19, 2023.

Staff: Maddie Gutierrez, MMC, Clerk to the Commission

RECOMMENDATION: Approve the minutes as presented.

FORMAL ACTION

2. Contract Approval – Claims Processing Software

Staff: Alan Torres, Chief Information Officer

RECOMMENDATION: It is the Plan's recommendation that the Executive Finance Committee recommend the Commission waive any irregularities in HealthEdge's proposal and authorize the CEO to execute a contract with HealthEdge Software Inc., subject to non-material terms to be agreed upon and acceptable to the CEO and General Counsel. The term of the contract will be 16 months of implementation and 6 years of production commencing March 1, 2023, and expiring on June 30, 2030, for an amount not to exceed \$19.5M.

ADJOURNMENT

Administrative Reports relating to this agenda are available at 711 East Daily Drive, Suite #106, Camarillo, California, during normal business hours and on <http://goldcoasthealthplan.org>. Materials related to an agenda item submitted to the Committee after distribution of the agenda packet are available for public review during normal business hours at the office of the Clerk of the Board.

In compliance with the Americans with Disabilities Act, if you need assistance to participate in this meeting, please contact (805) 437-5512. Notification for accommodation must be made by the Tuesday prior to the meeting by 3 p.m. will enable the Clerk of the Board to make reasonable arrangements for accessibility to this meeting.

AGENDA ITEM NO. 1

TO: Executive Finance Committee
FROM: Maddie Gutierrez, MMC -Clerk of the Board
DATE: February 23, 2023
SUBJECT: Executive Finance Committee Special Meeting Minutes of January 19, 2023.

RECOMMENDATION:

Approve the minutes.

ATTACHMENTS:

Copies of the Executive Finance Committee special meeting minutes of January 19, 2023.

**Ventura County Medi-Cal Managed Care Commission (VCMACC)
Executive/Finance Committee
Special Meeting via Teleconference**

January 19, 2023

CALL TO ORDER

Committee Chair Dee Pupa called the meeting to order at 1:10 p.m. The meeting was held in the Community Room located at Gold Coast Health Plan, 711 East Daily Drive, Camarillo, California.

ROLL CALL

Present: Commissioner Dee Pupa, James Corwin attended in person. Commissioners Laura Espinosa, and Jennifer Swenson attended the meeting remotely. Commissioner Anwar Abbas also attended virtually but was not allowed to vote due to lack of posting at his location.

Absent: None.

GCHP Staff in attendance: CEO Nick Liguori, CIO Alan Torres, CCO Robert Franco, CPPO Erik Cho, CMO Nancy Wharfield, M.D., ACO Felix Nunez, M.D., CDO Ted Bagley, Michael Murguia, Exec. Director of Human Resources, Marlen Torres, Exec. Director of Strategy & External Affairs, Anna Sproule, Exec. Director of Operations, Bob Bushey, Susana Enriquez-Euyoque, Jaime Louwerens, and General Counsel, Scott Campbell.

PUBLIC COMMENT

None.

CONSENT

- 1. Approval of Executive Finance Committee regular meeting minutes for June 23, 2022, special meeting minutes of August 18, 2022, and November 16, 2022.**

Staff: Maddie Gutierrez, MMC, Clerk to the Commission

RECOMMENDATION: Approve the minutes as presented.

Commissioner Swenson motioned to approve Consent items 1. Commissioner Corwin seconded the motion.

AYES: Commissioners James Corwin, Laura Espinosa, Dee Pupa and Jennifer Swenson.

NOES: None.

ABSENT: None.

ABSTAIN: Commissioner Anwar Abbas

Commissioner Pupa declared the motion carried.

FORMAL ACTION

2. Contract Approval – Medical Management Software

Staff: Alan Torres, Chief Information Officer

RECOMMENDATION: It is the Plan's recommendation that the Executive Finance Committee recommend that the Commission waive all irregularities in Casenet's proposal and authorize the CEO to execute a contract with Casenet, subject to non-material terms to be agreed upon and acceptable to the CEO and General Counsel. The term of the contract will be 77-months commencing February 1, 2023, and expiring on June 30, 2029, for an amount not to exceed \$3.5M.

General Counsel, Scott Campbell explained that GCHP received a protest letter from an incumbent on the award of the contract. The incumbent has requested documentation and they may be filing supplemental materials. There also may be Public Comment. General Counsel recommends the Commission hear the information and continue the matter to the next special meeting. At that time, a determination/recommendation will go to the Commission. Staff would like to educate the Committee on the Medical Management software (MMS) and RFP process.

CMO Nancy Wharfield, M.D., explained what MMS is. This system allows GCHP to get integrated view of member communication tool. The MMS gathers information on members, which allows health plans to effectively manager member health care needs, improve outcomes and also lower costs. The system provides a 360-degree view of each member, which enables GCHP staff to identify gaps in care, implement interventions and perform authorizations as needed. The software is also utilized to support Utilization Management, Care Management, Grievance & Appeals, Model of

Care and Integrative Care teams. We have defined fields to help tag members for services and have configuration control of user defined fields.

The system also real-time pharmacy data for authorization planning. We will be able to take actionable steps to care for the member. There are fields which allow us to organize our member populations for rapid interventions which result in a better member experience and improved health outcomes.

With the MMS we will have the ability to configure in-house for new regulatory changes and benefit implementations with the use of user defined fields. We will have increased visibility into the members care across teams managing care. There are added tools to assist with improved communication between GCHP and providers.

Commissioner Corwin stated that with flexibility comes maintenance. His concern is if we have enough technological skill to keep up with changes. He does encourage the program but noted that implementation is going to possibly be a challenge. He encourages the system for maximum performance.

CIO Alan Torres stated more self-service efficiencies go up; all will increase. Commissioner Corwin stated that managing changes and customization is his point. Bob Bushey, Procurement Officer, stated their technology is configurable. We can maintain support going forward.

Commissioner Espinosa stated she is leery about advantages of a multi-year contract. If an assessment is made by staff and it is noted that it will work over five years, then she is in agreement. Commissioner Pupa stated user defined field is critical.

CEO Liguori stated CMO Wharfield described the primary aims of the system. It will ensure all members get care when they need it. Our Model of Care is to ensure full access to appropriate care.

CMO Wharfield stated GCHP wants to reach our most fragile members and integrate care, including outside of GCHP. This will allow us to see, flag, and bucket into the appropriate care. It will get us to a level of understanding, face and clear up barriers. It generates a plan which is critical to the main focus.

CIO Torres gave an overview of the RFP. Process. He noted that the goal is to implement by 7/1/2024. 14 vendors were identified for the RFP process. The leaders were identified and there was good representation from the users of the platform. There was a broad range of participants in the process. We received responses from 8 vendors. Four candidates presented demos and CaseNet was the leader. Mr. Bushey noted that all major issues have been negotiated. CaseNet has worked well with GCHP.

CIO Torres noted that we are looking at over a 77-month timeline. Costs are inclusive of implementation as well as over 5 years. We are close to wrapping up negotiations and are looking for approval to contract with CaseNet.

Commissioner Corwin asked if \$3.5 million was full carrying cost. CIO Torres responded it is the projected cost over timeline A review of annual spend shows a significant savings.

General Counsel, Scott Campbell stated we do have a protest. The Committee can agree to recommend award of contract or wait until February 6, 2023, at a special Commission meeting. Mr. Campbell noted the deadline was Friday, February 3, 2023, if there is a delay, there is no impact. Commissioner Espinosa stated it behooves to wait and allow the appeal process to go through. It is a better position to state the appeal process was allowed. We can wait until February since there is no impact.

Commissioner Corwin motioned to allow the protest to go through. Commissioner Pupa seconded the motion.

Discussion:

Commissioner Abbas agrees to let protest go through; it shows due diligence. Commissioner Espinosa asked if there was a written appeal process. General Counsel, Scott Campbell replied yes. We give vendors the opportunity to protest and we are following the process. Commissioner Espinosa requested outcome of protest be provided to Commission at the special meeting.

Vote on Motion made by Commissioner Corwin, seconded by Commissioner Pupa:

AYES: Commissioners James Corwin, Laura Espinosa, Dee Pupa and Jennifer Swenson.

NOES: None.

ABSENT: None.

ABSTAIN: Commissioner Anwar Abbas

Commissioner Pupa declared the motion carried.

The Executive Finance Committee entered into Closed Session at 1:45 p.m.

CLOSED SESSION

- 3. REPORT INVOLVING TRADE SECRET:**
Discussion will concern: Proposed New Service and Program
Estimated Date of Public Disclosure: February 27, 2023.
- 4. PUBLIC EMPLOYMENT:**
Title: Chief Medical Officer.
- 5. PUBLIC EMPLOYEE PERFORMANCE EVALUATION**
Title: Chief Executive Officer
- 6. CONFERENCE WITH LABOR NEGOTIATORS**
Agency designated representatives: Executive Finance Committee
Unrepresented employee: Chief Executive Officer

General Counsel Campbell stated there was no reportable action in Closed Session. The meeting was adjourned at 3:30 p.m.

Approved:

Maddie Gutierrez, MMC
Clerk to the Commission



AGENDA ITEM NO. 2

TO: Executive Finance Committee

FROM: Alan Torres, Chief Information Officer

DATE: February 23, 2023

SUBJECT: Contract Approval – Claims Processing Software

BACKGROUND/DISCUSSION:

Project Background

By this request, GCHP staff is asking that the Executive Finance Committee recommend the Commission award a competitively bid contract for Claims Processing Software that will deliver claims processing efficiencies with an enhanced provider and member experience. Following the health plan industry's standard practice of regularly evaluating capabilities and performance against the nationwide market of system and service providers, GCHP began a comprehensive procurement of technologies and services, (reference the initiative list below in table 1). GCHP intends to implement these solutions by July 1, 2024. The Commission has authorized GCHP staff to undertake improvements throughout the Plan to improve medical care and outcomes and become a leader in the delivery of health care services to members. This specific initiative relative to this request was to survey the marketplace through a competitive bidding process (RFP 2) for a new modernized Claims Processing system which will help transform GCHP. The solution will be expected to facilitate the modernized capabilities of the Core Administration system which is the software utilized to support set up and maintenance of Product/Benefits, Provider information and Member Enrollment information as well Claims Processing and the generation of Claims Payments for the vendors.

GCHP staff is recommending that Health Edge be awarded the contract. GCHP staff has meet with the current Claims Processing Software vendor, Conduent, and has explained the reasons why GCHP is upgrading to a significantly better Claims Processing Software.

Table 1

RFP 1	EDI Services
RFP 2	Core Claims Processing Software
RFP 3	Medical Management Software
RFP 4	Provider and Member Portal Software
RFP 5	BPO (Claims Processing Services)
RFP 6	Mailroom and Claims Editing Services
RFP 7	Print and Fulfillment Services
RFP 8	Call Center Software/Technology

Procurement Background

Lead by GCHP’s Executive team on September 6, 2022, staff issued a Request For Proposal, (RFP) for Claims Processing Software directly to the fourteen, (14) vendors listed:

Cognizant	Evolent Health
HealthEdge	Accenture
Oracle	Deloitte
Conduent	Gainwell Technologies
Virtual Benefits Administrator	OptumInsight
Epic	UST
PLEXIS Healthcare Systems	First Choice

Set forth below is the schedule utilized for the RFP.

	Date	Time (If applicable)
RFP Released	9/6/2022	
Questions Due	9/20/2022	5:00pm. PT
Questions Answered via Bidders Conference	9/30/2022	TBD
Intent to Propose Notification Due By	10/7/2022	5:00pm. PT
Proposal Due Date	10/17/2022*	5:00pm. PT
Short List Established and Contractual Discussions Begin	11/7/2022	
Short List – Product Demo	11/18/2022	Scheduled for the week of the 11/14

GCHP received six (6) responsive proposals. A cross functional evaluation team was formed with representation from IT, (5 team members), Operations, (4 team members) and Procurement, (1 team member) to evaluate the proposals. Using predetermined evaluation criteria and weights, the team scored each proposal from the RFP’s qualitative and quantitative requirements.

The scoring results from the evaluation team are as follows:

Overall Scores (High to Low):

Vendor	Qualitative Score	Quantitative Score	Overall Score
Virtual Benefits Administrator	41.31	17.86	59.17
Oracle	44.94	13.89	58.84
HealthEdge	44.17	11.65	55.82
Cognizant	44.93	10.65	55.58
Trillian*	36.45	14.40	50.85
Conduent	35.84	14.44	50.28

*Response received from the public posting of the RFP.

The GCHP team then conducted scripted demonstrations with the top scoring four vendors and the incumbent, Conduent. The demonstration script was scored as follows:

Overall Scores (High to Low, Scale 1-10):

Consolidated Scores	Average Weighted Score
HealthEdge	8.04
Cognizant	7.33
Virtual Benefits Administrator	7.29
Oracle	6.60
Conduent	6.34

Key takeaways from the demonstration:

- HealthEdge was the clear leader. Their team followed the script, they were responsive, and the product capabilities and their implementation approach aligned with the RFP expectations.
- Cognizant was also responsive, and their product and implementation approach was aligned with the RFP expectations.
- Oracle’s product seems difficult to follow from a “life of claim” process and was considerably more expensive.
- During the implementation discussion Virtual Benefits Administrator confirmed that their low implementation cost reflected minimal effort on their part and that the majority of the effort was expected to be completed by GCHP or another third party of GCHP’s choice. Based upon this information, GCHP decided not to pursue negotiations with Virtual Benefits Administrator.

- Conduent as the incumbent, presented functionality that GCHP was familiar with but the product did not constitute an upgrade in services and functionality

Contracting Discussions

The GCHP team determined that HealthEdge, Cognizant and Oracle offered substantial upgrades in services and as such commenced further due diligence and contracting discussions.

Key takeaways during the contracting discussions:

- HealthEdge committed the time and resources to engage in meaningful discussions. These included
 - on-site meetings, implementation discussion, contract discussions
- Cognizant was non-responsive to discussions, refused to review GCHP contract language and did not appear interested in the business
- GCHP requested Oracle return and provide a “life of a claim” demo and start contracting discussions, but due to the holidays and their end of year they could not align resources and meet our scheduling timeframe

HealthEdge’s Qualitative Value

HealthEdge’s Core Administration software will provide advantages for GCHP in delivering improved operational efficiencies across multiple departments. The tools and features of the system will help us improve member and provider experience as well as user experience. It will help to eliminate technical debt and less intervention from IT staff for support of the system. HealthEdge is continually investing in the software and adding functionality to help health plans achieve their goals and increase productivity.

- **Audit tracking and traceability**
 - Deep audit tracking capabilities to ensure GCHP can trace back to specific root causes for any issues (system, performance, manual processes, notes, etc.)
- **Real-Time claim status**
 - Potential for real time communication of claim status to the provider
- **Workflows**
 - The system lets GCHP set the activities for automated routing and workflows which eliminates the guess work of a manual process
- **Highly Configurable**
 - Highly configurable system that allows GCHP more control and less dependency on a vendor
 - Robust controlled environment that allows for greater oversight and financial accuracy

- **Flexible technical architecture**
 - The system is flexible enough to be incorporated into GCHP’s thoughtful strategic technical architecture and allows for easier traceability of all the Core Administration transactions

- **Integrated Modules – Visibility**
 - Productivity will be increased within the Core Administration system because the visibility across all modules will allow staff to manage our members with more insight and collaboration.
 - Improved end user experience through thoughtful screen design and ease of navigation.

- **Portal Integration Capabilities**
 - Superior functionality for portal integrations will improve accuracy and efficiency of processing Claims and communicating with our members and providers.
 - Improve the member and provider experience with GCHP with self-service capabilities.
 - The Plug In will also improve productivity for IT and the business by eliminating maintenance and production issues between the Core Administration system and the Provider Portal.

- **NCQA Accredited**
 - HealthEdge is already NCQA accredited and will provide best practices for us to achieve our NCQA accreditation goals.

Contract Negotiations

GCHP prioritized contract negotiations with HealthEdge. They agreed to GCHP’s contracting timeline, structure and templates. Concurrently GCHP conducted several positive HealthEdge reference checks. GCHP concluded negotiations on a contract that is acceptable to GCHP, and the proposers were notified of the recommendation to award the contract to HealthEdge.

FISCAL IMPACT:

Award of the contract to HealthEdge will deliver an estimated \$900k reduction in annual recurring costs once implemented. The total cost over the projected useful life of the 16-month implementation period and 6-year agreement (3/1/2023- 6/30/2030) is projected to not exceed \$19.5M. This is substantially less than would have been spent had GCHP not gone to the market. The annual license fee is fixed through 6/30/2030 and thereafter may not exceed 5% per year. The projected costs from HealthEdge, Cognizant and the current incumbent vendor over the contracted period are set forth below.

HealthEdge \$19.5
Cognizant \$26.1M
Current incumbent vendor*\$21.7M

**includes an estimated \$6.3M cost associated with the current service agreement from 3/1/2023 until 6/30/2024*

RECOMMENDATION:

It is the Plan's recommendation that the Executive Finance Committee recommend to the Commission to waive any irregularities in HealthEdge's proposal and authorize the CEO to execute a contract with HealthEdge Software Inc., subject to non-material terms to be agreed upon and acceptable to the CEO and General Counsel. The term of the contract will be 16 months of implementation and 6 years of production commencing March 1, 2023, and expiring on June 30, 2030, for an amount not to exceed \$19.5M.

If the Committee desires to review this contract, it is available at Gold Coast Health Plan's Finance Department.