Contra Costa Health Plan/Board of Supervisors Joint Conference Committee Meeting Minutes Friday, September 11, 2020 Via Zoom

Present:

Supervisor Candace Andersen, Dist. II*
Joe Cardinalli, PharmD, CCHP Pharmacy
Anna Roth, RN, MD, MPH, HSD Director
Belkys Teutle, CCHP Member Services Manager
Angela Choy, CCHP COO
Bob Sessler, CCHP Consultant
Pat Godley, HSD CFO, COO
Jill Ray, Field Representative, BOS Staff

Dennis Hsieh, M.D., CCHP Medical Director**
Sharron Mackey, M.H.S., M.P.A., CCHP CEO**
Supervisor Federal Glover, Dist. V*
Pamela Lee, CCHP CM Manager
Kevin Drury, CCHP QM Director
Kimberley Ceci, MD, LifeLong Medical Director*
Laura Sheckler
Arnold DeHerrera, Advanced Level Secretary

ITEM # & SUBJECT	DISCUSSION	ACTION / WHO
Call to Order	1.0 Call to Order Supervisor Candace Andersen called the meeting to order on September 11, 2020 at 9:30 AM.	Supervisor Candace Andersen
	1.1 Agenda Agenda/Minutes for September 13, 2019 reviewed and approved unanimously.	JCC Committee
	1.2 Approve June 12, 2020 Minutes Minutes approved unanimously.	JCC Committee
	1.3 <u>Public Comment</u> None	Public
	1.4 JCC Comment None	JCC Members
CEO Updates	2.1 New Staffing Updates The CCHP CEO, Sharron Mackey, introduced the new Medical Director for CCHP: Dennis Hsieh, MD, JD.	Sharron Mackey, MHS, MPA, CCHP CEO
	2.2 <u>Dr. Dennis Hsieh Biography</u> A biography about Dr. Hsieh was presented to the Committee. Dr. Hsieh gave a brief summary of his experience prior to coming to CCHP. Dr. Hsieh most recently came from Harbor-UCLA Medical Center.	
Medical Director's Report	3.1 CCHP Medical Management Program The Medical Management Manager manages the organization's clinical programs, which may include case management, utilization review, quality management, or community health education programs with the goal of providing high quality, cost effective health care services. Collects and analyzes data on utilization, outcomes, safety, and costs.	Dennis Hsieh, MD, JD
Focus Topics	4.1 Pharmacy – Medi-Cal Rx The new drug carve-out program, Medi-Cal Rx, was explained. Joe Cardinalli gave a synopsis of the program and how it will work. The program was established per Governor Newsom's executive order. It	Joe Cardinalli, PharmD

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	standardizes the Medi-Cal pharmacy benefit statewide, improves access to pharmacy services, applies statewide utilization management protocols and achieves cost savings for drug purchases made by the State. It is scheduled to go live on 1/1/2021.	
	CCHP will retain 100% of commercial pharmacy benefit, non-emergency medical transportation, physician administered drugs, DME (when billed as a medical claim) and responsibility for clinical oversight of member's pharmacy benefit.	
	4.2 Quality Initiatives/HEDIS The 2020 Annual Report for the Medi-Cal Accountability Set (MCAS), formerly The HEDIS Report, was presented by Kevin Drury.	Kevin Drury
	Contra Costa Health Plan (CCHP) is pleased to present a summary of our most recent performance measurement rates. The required set of measures for our Medi-Cal contract, formerly referred to as HEDIS, is called the MCAS. As of this year it includes CMS Core Measures, as well as HEDIS measures. Our contracts specify which measures we must report. Since the measures are required of virtually all plans, benchmarking using national Medicaid Health Maintenance Organization (HMO) or State Medicaid averages is possible and included in this report.	
	A summary of the results was provided.	
c	4.3 Member Grievances The staff processed a total of 53 grievances for Q2 2020. Out of the 53 grievances, 1 grievance involved two issues. A total of 54 issues were reported: 22 related to Quality of Care, 22 related to Quality of Services and 10 related to Access to Care. There has been 24% decrease of grievances over Q1 2020. CCHP experienced a decrease of grievances due to the Shelter in Place.	Belkys Teutle
	For this quarter, the Quality of Care (QC) grievances decreased 11%, and Quality of Service (QS) grievances remained stable over Q1 2020. However, the access to care (AC) grievances increased by 32% over Q1 2020.	
	68% of the 22 QC issues were categorized as inappropriate provider care (member's perception of receiving inappropriate provider care). The breakdown for the QC found 3 grievances involved the same Primary Care Provider which involved medication refills. However, no issues were identified. Records indicated that the members received adequate quality of care.	
	41% of the 22 QS issues were categorized as staff service issues. The breakdown for the QS found that no repeated staff members or department involved.	
	30% of the 10 AC issues were categorized as specialist access issues. The breakdown for the specialist access found that the members needed benefit/referral process education.	
	No trends were identified.	
	4.4 <u>Case Management</u> The report presented explained the redesign of the Care Management	Pamela Lee

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	department including: workload for each Care Manager (CM) to measure productivity, alignment of CM with UM to track severe medical diagnosis to prepare for outpatient services before discharge, team approach with UR Nurse for continuity of care linked to health delivery system, defined metrics to measure the successful impact of CM, Close out Care Coordination cases and track intervention, and all CM will have goals and intervention.	
	The Role of the Care Manager includes: Understanding Medical Management, Patient Advocate, and Community Resources Guru.	
CEO Report	5.1 COVID-19 Impact to the Medi-Cal Program Sharron shared the most All Plan letter from DHCS. It explained the expansion of the Plan: antibody tests are now covered, 2 COVID tests per day is now the limit which includes home health services, and pharmacists are now allowed to administer COVID tests. Our network has been updated on these changes.	Sharron Mackey, MHS, MPA, CEO
	5.2 New Medi-Cal Program Updates The Medi-Cal Program Updates include the Foster Kids Care Model, Family Therapy Benefit, Behavioral Health Integration Incentive Program, and Preventive Care Services Outreach Campaigns.	
	5.3 Children Now Report on Medi-Cal Managed Care in Contra Costa In some cases, health plans not only fail to deliver on contracted performance standards, they also fail to meet performance minimums required by state or federal law. This county-based analysis newly details Medi-Cal managed care plan enrollment, performance and quality, and compliance with access standards related to children's care.	
	Children Now developed an analysis for all 58 county landscapes of Medi-Cal managed care for children using county-specific data on Medi-Cal enrollment and children's access to care, as well as plan-specific information for each county about enrollment, performance and quality, and regulatory compliance with access standards. This information is intended to inform advocacy efforts to affect the procurement process so that Medi-Cal will better serve the needs of kids and lead to improved child health outcomes.	
	5.4 Managed Care Performance Monitoring Report The dashboard data for Managed Care Performance is updated quarterly, Network Adequacy data is refreshed monthly, and HEDIS data is refreshed annually. CCHP is measured against all other plans in the state in this data.	
	5.5 Results of DHCS 2020 Audit The DHCS Audit was to have been completed in May but was postponed due to COVID-19. The Audit was done from 8/17 to 9/4/2020. Possible findings include: Delegation and Oversight of Behavior Health: Low to Moderate services and Mental Health Parity Issues, Quality Programs: Enhance the Potential Quality Issues, Tracking of Initial Health Assessments and Member Grievances, Health Education Program – Oversight and Evaluation of the Health Education courses being offered to members, Health Risk Assessment: Employ a Stratification process to determine if a member is considered high or low risk and enrollment in case management, Prior Authorization clinical decisions documentation.	

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Legislative Updates	6.1 Important Legislation Sharron presented some legislative updates provided by LHPC. These summaries included AB 890 regarding increasing Scope of Practice for Nurse Practitioners, AB 2164 to help improve Telehealth services, and AB 2276 which would require providers seek a signed statement of voluntary refusal to be included in the medical record when the recommended screening is refused by the parent/guardian. It also requires that plans identify all children who have missed a recommended blood lead screening on a quarterly basis and notify the responsible provider.	Sharron Mackey, MHS, MPA, CEO
Review & Approval of Progress Reports	7.1 Medi-Cal Enrollment Trend Report The Enrollment Trend showed an increase over the last 6 months due to the COVID-19 pandemic. Enrollment has increased an average of 3000 members each month since April or 10.4%. 7.2 Medi-Cal Choice Rate The Medi-Cal Choice Rate in Contra Costa has CCHP receiving about 84.2% of eligible Medi-Cal lives. 7.3 CCHP Operations Dashboard The Dashboard shows that our operations are stable. One highlight	Angela Choy, MBA, MS, COO
	shows in Care Management: 13,210 health assessments were completed in 2Q2020. There was also a decrease in claims paid. This was attributed to Shelter In Place orders due to the pandemic. 7.4 Finance Report	Patrick Godley,
	Actual End of Year results for 6/30/2020 show a surplus of \$7,459,799. 7.5 Meeting Reminders 2020 Dates The next Joint Conference Committee meeting will occur on Friday, December 11, 2020 at 9:30 AM.	MBA, COO, CFO Sharron Mackey, MHS, MPA, CEO
Adjournment	Meeting adjourned at 10:51 AM.	Supervisor Candace Andersen

Approved:	- Carker Khilah-	
Date:	July 27, 2021	

Contra Costa Health Plan/Board of Supervisors Joint Conference Committee

Friday, September 11, 2020 9:30 AM — 11:30 AM

Virtual Meeting via Zoom Martinez, California

Minutes for Meeting

Unless otherwise indicated below, Contra Costa Health Plan—Community Plan, hereby adopts all issues, findings, or resolutions discussed in the Agenda for Contra Costa Health Plan's Joint Conference Committee, dated Friday, September 11, 2020 and attached herein.

Excepted Matters: None