

Fresno-Kings-Madera
Regional Health Authority

**CalViva Health
Commission**
Meeting Minutes
October 19, 2017

Meeting Location:
CalViva Health
7625 N. Palm Ave., #109
Fresno, CA 93711

Commission Members			
	David Cardona, M.D., Fresno County At-large Appointee	✓	Joe Neves, Vice Chair, Kings County Board of Supervisors
	Aldo De La Torre, Community Medical Center Representative	✓	Harold Nikoghosian, Kings County At-large Appointee
✓	Dennis Koch, Interim Director, Madera Co. Dept. of Public Hlth	✓	David Pomaville, Director, Fresno County Dept. of Public Health
✓	John Frye, Commission At-large Appointee, Fresno		Sal Quintero, Fresno County Board of Supervisor
✓*	Soyla Griffin, Fresno County At-large Appointee		Joyce Fields-Keene, Fresno County At-large Appointee
✓	Derrick Gruen, Commission At-large Appointee, Kings County		David Rogers, Madera County Board of Supervisors
✓	Ed Hill, Director, Kings County Dept. of Public Health		David Singh, Valley Children's Hospital Appointee
✓	David Hodge, M.D., Chair, Fresno County At-large Appointee	✓	Paulo Soares, Commission At-large Appointee, Madera County
✓	Aftab Naz, Madera County At-large Appointee		
Commission Staff			
✓	Gregory Hund, Chief Executive Officer (CEO)	✓	Amy Schneider, R.N., Director of Medical Management
✓	William Gregor, Chief Financial Officer (CFO)	✓	Daniel Maychen, Director of Finance & MIS
✓	Patrick Marabella, M.D., Chief Medical Officer (CMO)	✓	Mary Lourdes Leone, Director of Compliance
	Mary Beth Corrado, Chief Compliance Officer (CCO)	✓	Cheryl Hurley, Commission Clerk
✓	Jeff Nkansah, Chief Operating Officer		
General Counsel and Consultants			
✓	Jason Epperson, General Counsel		
✓ = Commissioners, Staff, General Counsel Present			
* = Commissioners arrived late/or left early			
● = Attended via Teleconference			

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
#1 Call to Order	The meeting was called to order at 1:30 pm. A quorum was present.	
#2 Roll Call	A roll call was taken for the current Commission Members.	<i>A roll call was taken</i>

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AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
Cheryl Hurley, Clerk to the Commission		
<p>#3 Consent Agenda</p> <ul style="list-style-type: none"> a) Commission Minutes 9/21/17 b) Finance Committee Minutes 7/20/17 c) QI/UM Committee Minutes 7/20/17 <p>Action David Hodge, MD, Chairman</p>	All consent items were presented and accepted as read.	<p>Motion: Approve Consent Agenda 10-0-0-7</p> <p>(Neves / Frye)</p>
<p>#4 Financial Audit Report – FY 2017</p> <p>Action C. Pritchard, Moss Adams</p>	<p>Chris Pritchard, representative from Moss Adams, presented the results of the audit. Moss Adams audit will result in the issuance of an unmodified opinion on the financial statements. A discussion of general audit procedures performed including confirmation of various account balances were discussed.</p> <p>The required communications and the organization’s accounting policies are in compliance with GAAP. After completing the work, it was found that the financial statements do not need to be adjusted and no difficulties were encountered when completing the work.</p> <p><i>Soyla Griffin arrived at 1:39 pm and did not take part in the vote</i></p>	<p>Motion: Approve Financial Audit for FY 2017 10-0-1-6</p> <p>(Neves / Naz)</p>
<p>#5 2018 Calendar Year Meeting Proposal</p> <p>Action David Hodge, MD, Chairman</p>	The 2018 calendar year meeting schedules were presented to the Commission for approval.	<p>Motion: Approve 2018 Calendar Year Meeting dates 11-0-0-6</p> <p>(Neves / Soares)</p>

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<p>#6 CVH Community Support Program Funding</p> <p>Action G. Hund, CEO</p>	<p>At this time Commissioners Soares and Griffin left the room during the discussion of the Community Support Program Funding to prevent what may appear as a conflict of interest, a potential conflict of interest, or an actual conflict of interest. They will be recused from voting, consideration, and discussion of item.</p> <p>An ad-hoc committee comprised of Greg Hund, CEO, William Gregor, CFO, Dr. Hodge, Commission Chairman, and Commissioners David Pomaville and Supervisor Neves were previously appointed and have reviewed requests for Community Support Program Funding. Each entity granted funding will sign a MOU that will require each to meet certain requirements in their recruitment process and also obligates CVH to make the payments as detailed in the letter. Nine funding requests were granted. Grants were awarded to Camarena Health, Clinica Sierra Vista, Family HealthCare Network, and Valley Health Team.</p>	<p>Motion: Approve Program Funding 9 – 0 – 2 – 6</p> <p>(Pomaville / Nikoghosian)</p>
<p>#7 2017 Cultural and Linguistics 2017 Mid-Year Executive Summary and Work Plan Evaluation</p> <p>Action P. Marabella, MD, CMO</p>	<p>Dr. Marabella presented the 2017 Cultural & Linguistics Work Plan Mid-Year Evaluation and Executive Summary.</p> <p>The summary of activities completed during the first six months of 2017 consisted of four areas:</p> <ul style="list-style-type: none"> • Language Assistance Services • Compliance Monitoring • Communication, Training and Education • Health Literacy, Cultural Competency and Health Equity 	<p>See #8 for Action Taken</p>

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	<p>By June 30, 2017, all activities were either completed or are on target to be completed by the end of the year. C & L staff will continue to implement the remaining six months of the 2017 Work Plan.</p>	
<p>#8 2017 Health Education Mid-Year Executive Summary and Work Plan Evaluation</p> <p>Action P. Marabella, MD, CMO</p>	<p>Dr. Marabella presented the 2017 Health Education Work Plan Mid-Year Evaluation and Executive Summary.</p> <p>Health Education (HE) has eleven initiatives this year. The three major areas of focus for the HE department for the first 6 months of 2017 included:</p> <ul style="list-style-type: none"> • Health Education Initiatives: <ul style="list-style-type: none"> ○ The Digital Education Program experienced challenges with obtaining DHCS approval. ○ Member Engagement ○ Obesity Prevention ○ Perinatal Initiative ○ Promotores Health Network • Health Education Programs: <ul style="list-style-type: none"> ○ Community Health Education ○ Public Policy Committee ○ Member Newsletter ○ Tobacco Cessation • Operations, Reporting and Oversight: <ul style="list-style-type: none"> ○ Compliance ○ Materials Update, Development & Inventory <p>Health Education will continue efforts to implement the second half of the 2017 Health Education Department Work Plan to meet or exceed year end goals.</p>	<p>Motion: Approve 2017 Mid-Year Cultural & Linguistics Executive Summary and Work Plan Evaluation; and 2017 Mid-Year Health Education Executive Summary and Work Plan Evaluation</p> <p>11 – 0 – 0 – 6</p> <p>(Neves / Gruen)</p>

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<p>#9 Standing Reports</p> <ul style="list-style-type: none"> • Finance Report William Gregor, CFO • Compliance ML Leone, Director of Compliance 	<p><u>Finance</u></p> <p>Financial Statements as of August 31, 2017:</p> <p>Total current assets are \$224.6M; total current liabilities are approximately \$184.1M. Current ratio is 1.2 which is a good liquidity measurement. TNE as of August 31, 2017 was approximately \$51.6M, which is approximately 390% of the minimum DMHC required TNE amount and near the 400% desired by DHCS.</p> <p>Revenues ending August 31, 2017 are \$195M and is ahead of budget because of rates being paid are higher than budgeted, the increased premium tax for the current fiscal year compared to what was budgeted. These items also give rise to increased expenses for Medical Costs and Premium Tax expense. Other expenses are in line with current year budget. Net income for July and August stands at \$2M which is approximately \$580K more than budget.</p> <p><u>Compliance</u></p> <p>ML Leone presented the Compliance report. There was one high risk case in October for Privacy and Security. Members affected by this were notified.</p> <p>Ongoing oversight audits of the activities delegated to Health Net (HN). Currently in progress are Appeals & Grievances, and Provider Network audit.</p>	<p>Motion: Approve Standing Reports</p> <p><i>11-0-0-6 (Naz / Neves)</i></p>

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<ul style="list-style-type: none"> • Medical Management P. Marabella, MD, CMO 	<p>In late September, DMHC and DHCS approved the Plan’s filings related to the termination of the contract between CalViva Health and Kaiser. Associated with that, are the undertakings which CVH is obligated to fulfill throughout the coming year through the end of August 2018.</p> <p>The Plan is still awaiting the draft report from the onsite DHCS audit that took place in April 2017.</p> <p>DMHC will be doing a limited follow-up survey to the findings of the 2016 audit, which is scheduled for January 2018. This is a limited scope survey which will only review cases/processes related to the 2016 survey deficiencies.</p> <p>The next Public Policy Committee meeting will be held December 6, 2017 at CalViva Health.</p> <p>CalViva Health employees participated in the annual Heritage Days C&L training and completed the required post-program quiz.</p> <p><u>Medical Management</u></p> <p>Appeals and Grievances Report Dr. Marabella presented the Appeals and Grievances Dashboard through August 2017.</p> <ul style="list-style-type: none"> • The total number of Grievances received in August increased slightly compared to the previous month, however the number of out of compliance cases has decreased. 	

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	<ul style="list-style-type: none"> • The number of Exempt Grievances has also increased. • The Appeal Decision Rates remain consistent with the prior month. <p>Key Indicator Report Dr. Marabella presented the Key Indicator report.</p> <ul style="list-style-type: none"> • Admit and Readmit numbers have remained consistent. • ER visits PTMPY have decreased. • Bed days and length of stay have remained consistent. • The population growth is stable. • Utilization remains consistent. • Turn-around-time for authorizations and deferrals has started to drift which has prompted a formal Corrective Action Plan. • Case Management has remained consistent. <p>QIUM Quarterly Summary Report</p> <p>Dr. Marabella provided the QI/UM Quarter 3 2017 update. Two QI/UM meetings were held in Quarter 3, one on July 20, 2017 and one on September 21, 2017.</p> <p>The following guiding documents were approved:</p> <ul style="list-style-type: none"> • 2017 Quality Improvement Mid-Year Evaluation • 2017 Utilization Management & Case Management Mid-Year Evaluation • Medical Policies (Q1) • Pharmacy Policies & Procedures • Public Health Policies & Procedures • Appeals & Grievances Policies & Procedures 	

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	<p>Some of the reports reviewed and approved included the following Quality Improvement Reports: Appeals and Grievances Dashboard & Quarter 2 Member Report, the Initial Health Assessment (IHA) Report, the MHN Performance Indicator Report, and the Public Programs Quarterly Report. Several QI Summary Reports were reviewed in order to provide updates on the quality projects for 2017, as well as the PM 160 Report, Emergency Drug Report, and the Potential Quality Issues (PQI) Report.</p> <p>The Utilization Management reports approved included the Key Indicator Report, the Concurrent Review Report, the Case Management Report, and Specialty Referral Reports.</p> <p>Pharmacy reports were reviewed, which included Operations Metrics, Top Medication Prior Authorization Requests, and quarterly Recommended Drug List changes.</p> <p>In Quarter 3 HEDIS® Activities included the review of the final RY2017 results, the identification of quality projects for the coming year (3) related to low performing measures, and the scheduling of Annual Clinic Visits for high volume clinics in all three counties. Two new Performance Improvement Projects (PIPs) will be initiated this year as well.</p> <p>The Access Workgroup met twice in Quarter 3 with a focus on identifying and establishing agreements with vendors to perform and validate the Provider Appointment and Provider Satisfaction surveys. The Workgroup also reviewed the corrective action plans for Specialist Access and After-Hours availability.</p>	

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<ul style="list-style-type: none"> • Operations J. Nkansah, COO • Executive Report G. Hund, CEO 	<p>Quarter 2 Kaiser reports were reviewed without any significant findings.</p> <p><u>Operations Report</u></p> <p>Jeffrey Nkansah presented information on the new Operations Report. This new category will outline new activities that have carried over to the Chief Operating Officer role. This report will cover high level activities related to Provider Network, Privacy and Security, Claims Processing, and the structural setup of CVH as it relates to Information Technology. The first report will be presented during the first meeting of 2018.</p> <p><u>Executive Report</u></p> <p>During the months of June through September, membership has slowly decreased, with the loss of membership being primarily in Fresno County. Kings and Madera Counties have either maintained their membership or slightly increased. The SPD membership has gradually increased since June 2017, and continues to grow. During this same time, the market share has increased. Open enrollment begins in November with membership anticipated to increase.</p>	
<p>#10 Final Comments from Commission Members and Staff</p>	<p>None.</p>	

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#11 Announcements	Mary Lourdes Leone was promoted to the Director of Compliance when Jeffrey Nkansah, who previously occupied that position, was promoted to Chief Operating Officer.	
#12 Public Comment	The Interim Director for Madera County Public Health Department, Dennis Koch, announced that Madera County has hired Sara Bosse as the new Director for the Health Department. Ms. Bosse will be officially appointed to the position in October and will assume the responsibility of RHA Commissioner for Madera County Public Health Department.	
#13 Adjourn	<p>The meeting was adjourned at 2:24 pm</p> <p>The next Commission meeting is scheduled for November 16, 2017 in Fresno County.</p>	

Submitted this Day: February 15, 2018
 Submitted by: Cheryl Hurley
 Cheryl Hurley
 Clerk to the Commission