

Fresno-Kings-Madera
Regional Health Authority

**CalViva Health
Commission**
Meeting Minutes
November 21, 2013

Meeting Location
CalViva Health
1315 Van Ness Avenue; Suite 103
Fresno, CA 93721

Commission Members			
	Deborah Poochigian, Fresno County Board of Supervisor		David Rogers, Madera County Board of Supervisors
✓	David Pomaville, Interim Director, Fresno County Dept. of Public Health		Van Do-Reynoso, Director, Madera County Dept. of Social Services
✓	Stephen Ramirez Fresno County At-large Appointee	✓	Aftab Naz, Madera County At-large Appointee
✓	David Cardona, M.D., Fresno County At-large Appointee	✓	Tim Curley, Valley Children's Hospital Appointee
✓	David Hodge, M.D., Chair, Fresno County At-large Appointee		Abdul Kassir; Community Medical Center Representative
	Soyla Griffin, Fresno County At-large Appointee	✓	Conrad Chao, Commission At-large Appointee, Fresno
	Joe Neves, Vice Chair, Kings County Board of Supervisors		Derrick Gruen, Commission At-large Appointee, Kings County
✓	Keith Winkler, Director, Kings County Dept. of Public Health	✓	Paulo Soares, Commission At-large Appointee, Madera County
✓	Harold Nikoghoshian, Kings County At-large Appointee		
Commission Staff			
✓	Gregory Hund, Chief Executive Officer (CEO)	✓	Mary Beth Corrado, Chief Compliance Officer (CCO)
✓	William Gregor, Chief Financial Officer (CFO)	✓	Cynthia Reiter, Clerk to the Commission
✓	Patrick Marabella, M.D., Chief Medical Officer (CMO)	✓	Amy Schneider, Director of Medical Management
General Counsel and Consultants			
✓	Tom Ebersole, General Counsel		
✓ = Commissioners, Staff, General Counsel Present,			

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
#1 Call to Order	The meeting was called to order at 1:31pm. A quorum was present.	
#2 Consent Agenda • Commission Minutes 10/17/13 • Executive Committee Minutes 11/7/13	All consent items were presented and accepted as read.	Motion: <i>Approve the Consent Agenda.</i> <i>9-0 (Naz/Winkler)</i>

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<ul style="list-style-type: none"> • Finance Committee Minutes 11/7/13 • QI/UM Committee Minutes 9/19/13 Action D. Hodge, Chair		
#3 Executive Committee Charter Action D. Hodge, Chair	The Executive Committee (EC) recommended a revision to the EC charter. The changes will allow greater flexibility for scheduling meetings and eliminate duplicated responsibilities. (See revised Charter). One additional change was needed for final approval. The purpose of the EC shall read: There shall be an Executive Committee of the Commission which monitors the overall administrative and operational <u>activities</u> of CalViva Health.	Motion: <i>Approve Executive Committee Charter with the addition of "operational activities"</i> 9 - 0 (Nikoghosian/Winkler)
	<i>Paulo Soares arrived at 1:34pm</i>	
#4 Standing Reports <ul style="list-style-type: none"> • Finance Report W. Gregor, CFO 	<u>Finance:</u> W. Gregor presented the Financial Statements as of October 31, 2013 to the Commission. CalViva Health's current cash balance is \$39 million. Tangible Net Equity is at \$13.8 million. Increased revenues are due to increased enrollment and rates related to MCO Tax. Expenses accordingly increased in the areas of administrative fees and taxes for the same reasons stated above.	Motion: <i>Approve Finance Report</i> 10 - 0 (Chao/Naz)

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<ul style="list-style-type: none"> • Compliance Report <p>M.B. Corrado, CCO</p>	<p><u>Compliance:</u> MB Corrado presented the regulatory report and highlighted the following areas:</p> <ul style="list-style-type: none"> ➤ There were eight no/low risk security breaches reported in October. There was zero high risk security breaches reported. ➤ The oversight Health Net annual audits have begun with Claims, Credentialing, Member Rights, Call Center/Member Services, Marketing, and Cultural Linguistics currently underway. The remaining functions delegated to HN will be audited over the next six months. ➤ The Q2 2013 Provider Dispute Resolution (PDR) audit is now complete. Three cases were not processed within the mandated timeframe. A CAP has been requested to ensure timely resolution of future PDR cases. ➤ State Audits – A CAP was submitted to DHCS and DMHC on September 16, 2013. A response has not yet been received however several of the corrective action plans have already been completed and others are in progress. ➤ DHCS Encounter Data Validation Study Report (July 1, 2012- July 1, 2013) - CVH underwent a Health Services Advisory Group, Inc. (HSAG) to conduct an Encounter Data validation study. The goal of this study was to examine the accuracy and completeness of encounter data submitted by health plans. CVH performed better than average and their processes for aggregating and submitting claims and encounter data files adhere to industry best practices 	<p><i>Approve Compliance Report</i> <i>10 - 0 (Chao/Naz)</i></p>

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<p>• Medical Management P. Marabella, MD, CMO</p>	<ul style="list-style-type: none"> ➤ A new program QMED will be implemented in 2014. ➤ The ACA expansion section 1202 PCP payments has not changed, still waiting for DHCS to implement rate increases therefore the compliance plan submission has been extended until December 1, 2013. ➤ The Low Income Health Plan transition will be transitioned on January 1, 2014. Approximately 1,800 members in Madera County and 2,100 members in Kings County will be affected. There is no LIHP program in Fresno County. ➤ Effective January 1, 2014 managed care plans will assume responsibility for providing some of the mental health and substance abuse services. A Material Modification filing will be submitted to DHCS by December 2, 2013. DMHC will give conditional approval to Plans' meeting this requirement. A complete filing will be due on March 3, 2014. Plans are currently waiting on DCHS guidance in regards to implementation. ➤ The next Public Policy meeting will be held December 4, 2013 in Fresno County. <p><u>Medical Management:</u> QI/UM Committee: P. Marabella, MD presented the QI/UM Committee Report Summary. The following items were discussed/approved at the July 18th and September 19th meetings:</p> <ul style="list-style-type: none"> ➤ Medical policies ➤ Recommended Drug List ➤ QI Work Plan Mid-Year Evaluation 	<p><i>Approve Medical Management Report 10 - 0 (Chao/Naz)</i></p>

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	<ul style="list-style-type: none"> ➤ UM Work Plan Mid-Year Evaluation ➤ Culture and Linguistics Geo Access Summary Report ➤ The Appeals and Grievances dashboard was reviewed, in detail, at both meetings with no significant issues to report. ➤ Potential Quality Issues (PQI) Report - Reporting and trending has improved throughout the year. The majority of the cases have been evaluated and closed without the need for further action. ➤ Initial Health Assessment (IHA) Report – Compliance with DHCS mandates has been at 99% for the 1st and 2nd Quarters. ➤ DMHC Case Activity Evaluation and DHCS State Fair Hearing Case Activity – All Turn Around Times were met for the 1st and 2nd Quarters. ➤ Key Indicator Report – This report allows the committee to monitor and track trends on key utilization and data measures in order to meet county goals. The report is reviewed monthly by the Commission. ➤ Additional UM Reports were also reviewed with no significant findings: <ul style="list-style-type: none"> Top 10 Diagnosis Report PM – 160 Report SPD Implementation Authorization Tracking Report CCS Report Perinatal Services Report Pharmacy Reports Kaiser Reports 	

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	<p>Peer Review Sub-Committee:</p> <ul style="list-style-type: none"> ➤ Peer Review Sub- Committee met in May and July 2013 ➤ There were a total of 8 Peer Review Cases closed and cleared in the reporting period. One case report has a CAP still open ➤ No significant quality of care issues were noted, however, some opportunities for improved quality of service were identified. <p>Credentialing Sub-Committee:</p> <ul style="list-style-type: none"> ➤ Credentialing Sub-Committee met in May and July 2013. ➤ At the May 16th meeting a ChildNet focused Audit CAP report was reviewed. ➤ The 2013 ChildNet annual audit by Health Net was conducted in October; results are pending. ➤ The county specific credentialing reports indicate one case is undergoing monitoring. A Facility Site Review and Medical Record Review audit will be conducted in April 2014 to ensure requirements continue to be met. <p>Key Indicator Report</p> <ul style="list-style-type: none"> ➤ Inpatient Utilization Metrics for Non-SPD and SPD members have increased. This has coincided with the Medical Management reorganization at HN. CVH is investigating further the basis for this increase in Days/1000. 	

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<ul style="list-style-type: none"> Executive Report G. Hund, CEO 	<p>David Marquardt was introduced as the new Quality Analyst. He brings with him a wealth of knowledge and is a valuable asset to the team.</p> <p>Executive Report: Executive Dashboard G. Hund presented the Executive Dashboard for November 2013. CalViva Health member enrollment showed a slight increase this month. As of November 2013, CalViva Health had a total of 215,484 members.</p> <p>Affordable Care Act: The state has issued rates for the expansion that will be effective January 1, 2014.</p> <p>Annual Report CVH is currently working on the Annual Report which will be presented at the January 2014 Commission Meeting.</p> <p>Strategic Plan CVH is currently working on the Strategic Plan which will be presented to the Commission in March 2014.</p>	<p><i>Approve Executive Report 10 - 0 (Chao/Naz)</i></p>
<p>#5 Final Comments from Commission Members and Staff</p>	<p>Jennifer Kent was introduced to the commission and welcomed as the new Executive Director for Local Health Plans of California.</p> <p>The PCP Capitation Module has been deployed for the Family Health Care Network capitation agreement. A contract amendment will be executed to reflect the new</p>	

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	CPT code covered by the capitation module.	
#6 Announcements	None	
#7 Public Comment	None.	
#8 Adjourn	The meeting was adjourned at 2:16 PM. The next Commission meeting is scheduled for January 16, 2014 in Fresno County.	

Submitted this Day: November 21 2013

Submitted by: *Cynthia Reiter*
 Cynthia Reiter
 Clerk to the Commission