

**CalViva Health
Commission
Meeting Minutes**
September 18, 2014

Meeting Location
Kings County Government Center
Administration Building
1400 W. Lacy Boulevard
Hanford, CA 93230

Teleconference Location

Hall of Records
County Administrative Office Conference Room
2281 Tulare Street 3rd floor
Fresno CA 93721

Fresno-Kings-Madera
Regional Health Authority

Commission Members	
• Deborah Poochigian, Fresno County Board of Supervisor	✓ David Rogers, Madera County Board of Supervisors
David Pomaville, 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	Vacant, 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 Nikoghosian, 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)	✓ Jeff Nkansah, Clerk to the Commission
✓ Patrick Marabella, M.D., Chief Medical Officer (CMO)	✓ Amy Schneider, Director of Medical Management
	✓ Kim Lopez, Office Assistant
General Counsel and Consultants	
✓ Jason Epperson, General Counsel	
✓ = Commissioners, Staff, General Counsel Present,	
✓ * = Commissioners arrived late/or left early	
• = Attended via Teleconference	

Commission Meeting Minutes

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
#1 Call to Order	The meeting was called to order at 1:30pm. A quorum was present.	
#2 Consent Agenda <ul style="list-style-type: none"> • Commission Minutes 7/17/14 • Finance Committee Minutes 5/15/2014 • QI/UM Committee Minutes 3/20/14 • QI/UM Committee Minutes 5/15/2014 • Public Policy Committee 6/4/2014 Action David Hodge, M.D, Chairman	All consent items were presented and accepted as read.	Motion: Approve the Consent Agenda. 11-0-0-6 (Rogers/Neves) A role call was taken
#3 Appoint Commission Clerk Action David Hodge, M.D, Chairman	The Commission Clerk position has been vacant since August 21, 2014. Mr. Jeff Nkansah was nominated to fill the Clerk position.	Motion: Approve the appointment 11-0-0-6 (Neves/Naz) A role call was taken
#4 Fresno County At-Large Seat Nominations Action David Hodge, M.D Chairman	D Hodge, M.D presented the Committee nominations for the Fresno County At-Large vacant seat. Two applications were received and presented to the commission; nominations of the applicants and open nominations were offered. J. Frye was elected by the commission to fill the vacant seat for the balance of the vacated term ending December 31, 2015. <i>V. Do Reynoso arrived at 1:40pm</i>	Motion: Approve the appointment 11-0-0-6 (Poochigian/Naz) A role call was taken
#5 Conflict of Interest	The Conflict of Interest Code for the Fresno-Kings-Madera Regional Health Authority was reviewed by staff and	Motion: Approve the Conflict of Interest Code 12-0-0-5 (Winkler/Rogers)

Commission Meeting Minutes

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>Action D Hodge, M.D Chairman</p>	<p>remains current with no updates required.</p>	<p>A role call was taken</p>
<p>#6 2014 Mid-Year Quality Improvement Work Plan Evaluation P .Marabella, M.D</p>	<p>1. P. Marabella, MD presented the 2014 Quality Improvement Work Plan Mid-Year Evaluation. Planned activities include three major areas of focus as follows: Access, Availability and Service</p> <ul style="list-style-type: none"> • CVH Medical Management staff continue to participate in the ICE Access Workgroup to establish a single vendor process for Provider Appointment and Availability Survey this year. • Improve Compliance with After Hours: a corrective action plan for providers has been initiated to improve emergency instructions for members and member call-back within 30 minutes. • Member Satisfaction with Access: the 90% goal was not met for “needed care” and “urgent care” according to the CAHPS member satisfaction survey results. Medical Management is coordinating with Provider Relations staff to establish improvement initiatives. <p>2. Quality and Safety of Care-- Meet or exceed HEDIS® Minimum Performance Levels for 6 Default Enrollment measures. All measure were met except 3 in Kings County. An Improvement Plan is in development.</p> <p>3. Quality Improvement Projects (QIPs) Health plans are required to participate in and report on at least two (2) QIPs per year.</p> <p>a) Diabetic Retinal Eye Exam – The annual report was</p>	<p>Motion: Approve 2014 QI Mid-Year Evaluation 12-0-0-5 (Soares/Naz) A role call was taken</p>

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>Action D. Hodge, M.D. Chairman</p> <p>#7 2014 Mid-Year Utilization Management Work Plan Evaluation</p> <p>P. Marabella, M.D</p>	<p>submitted to DHCS and HSAG on 8/30/14. Improvement was noted in 2014 HEDIS® Eye Exam completion rates in two of three counties. All counties are above the minimum performance level.</p> <p>b) All-Cause Readmission Collaborative – The annual report is due to DHCS and HSAG on 9/30/14. The following targeted interventions have been implemented to reduce hospital readmissions:</p> <ul style="list-style-type: none"> • Transitional Care Management, focus on member transition to home. • Onsite Nurses at local Hospitals, identification of high-risk members. • Modifications to Ambulatory Case Management, intervene with high-risk members. <p>P. Marabella presented the 2014 Utilization Management/Case Management (UM/CM) Work Plan Mid-Year Evaluation. CVH UMCM activities are focused in the following five areas:</p> <ol style="list-style-type: none"> 1. Compliance with Regulatory and Accreditation Requirements 2. Monitoring the UM Process 3. Monitoring Utilization Metrics 4. Monitoring Coordination with Other Programs and Vendor Oversight 5. Monitoring Activities for Special Populations <p>All activities are on target except for two metrics which are</p>	<p>Motion: Approve 2014 UM/CM Mid-Year Evaluation 12 – 0 – 0 – 5(Naz/Gruen)</p> <p>A role call was taken</p>

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>Action D. Hodge, M.D Chairman</p>	<p>too soon to tell for mid-year reporting and will be reported on in the year-end summary. Key data metrics reported include:</p> <ul style="list-style-type: none"> • Turn Around Time (TAT) for Processing Authorizations for Jan through May 97.7% • TAT for Appeals Jan through July 97.7% • The inpatient days/1000 members is on track except for non-SPD in Kings County and SPD in Fresno County • Additional Key findings include: New regulations incorporated into policies and procedures; • Participating Provider Group (PPG) i report cards are in development. ; • Additional over/underutilization metrics are in review. • Increased staffing for prior authorization process to address increases in membership. 	
<p>#8 Standing Reports</p> <ul style="list-style-type: none"> • Finance Report William Gregor, CFO <p>• Compliance Report</p>	<p>Finance: W Gregor presented Financial Statements as of August 31, 2014. As of August 2014, Tangible net equity stands at \$17.9 million; 220% of the minimum required by the state. Current ratio stands at a healthy 1.2.</p> <p>Compliance: MB Corrado presented the Compliance report. Highlights of this report included:</p> <ul style="list-style-type: none"> ➤ Filings remain up to date ➤ Potential Privacy Breaches <ul style="list-style-type: none"> ○ There have been 3 low risk cases between 	<p>Motion: Accept Finance Report 12 – 0 – 0 – 5 (Poachigian/Griffin)</p> <p>A role call was taken</p> <p>Motion: Accept standing reports</p>

Commission Meeting Minutes

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>Mary Beth Corrado, CCO</p>	<p>July and August.</p> <ul style="list-style-type: none"> ○ No New High risk cases since the last report. ○ No new potential fraud cases were identified. <p>➤ Oversight Audits – Annual Oversight Audits of Health Net continue to be in progress. Several of the audits have been completed with only two areas remaining which are expected to be completed within the next two weeks. When all audit activity is complete a full summary of the results of all audit areas will be presented to the Commission.</p> <p>➤ Quarter 4, 2013 Provider Dispute Resolution audit was completed with no corrective action needed. CVH is in the current process of completing Quarter 1, 2014.</p> <p>➤ CVH received the final DHCS 2012-13 EDV results on August 26, 2014. Overall, CVH performed very well and final results reflect the preliminary results that were presented at the November 21, 2013 Commission Meeting.</p> <p>➤ DHCS also issued the 2012-13 Aggregate EDV report and the report is available to the public posted on the DHCS website.</p> <p>➤ Mental Health and Substance Use Disorders Benefits status was provided by MB Corrado. CVH's program is operating under a DMHC Conditional Order of Approval. Once Health Net and Kaiser filings have been approved CVH's filing can be approved as we utilize their networks for Mental Health Services.</p> <p>➤ All amendments to the Mental Health MOU's are in place and the program is operating smoothly with all</p>	<p>12-0-0-9 (Rogers/Nikoghosian)</p> <p>A role call was taken</p>

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<ul style="list-style-type: none"> • Medical Management P. Marabella, M.D 	<p>three counties.</p> <ul style="list-style-type: none"> ➤ The Public Policy Meeting was held on September 3, 2014 and a quorum was met. The committee looked at enrollment, appeals and grievance data and received a presentation on the Mental Health Benefit. An update on the results of the State Medical Survey audits was presented to the Committee. The next Public Policy Meeting will be held in Fresno County on December 3, 2014. <p>Medical Management: Key Indicator Report</p> <p>P Marabella reviewed the Key Indicator Report as of August 20th and noted the following:</p> <ul style="list-style-type: none"> ➤ Inpatient utilization (days/1000) for non SPD members is currently over the goal of 222 and the SPD members is currently over the goal of 1244.8 ➤ The increasing trends in the rates may be attributed to increases in enrollment and demographics of new members. ➤ CVH has incorporated the 2013 YTD data column for purposes of comparison ➤ Medical Management is looking into the increase of days/1000 rates ➤ Complex Case Management has very few cases over the past 90 days due to an adjustment in the program. <p>Appeals and Grievances Report</p> <p>P. Marabella, MD presented the Appeals and Grievances</p>	

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>Dashboard for the month of July:</p> <ul style="list-style-type: none"> ➤ There were 85 grievances received in July. ➤ 87 grievances were resolved: 46 were for quality of service and 41 were for quality of care with no significant issues identified. ➤ There continues to be an increasing trend in the number of grievances per month which is currently being investigated. ➤ There were 21 appeals received in July. 14 appeals were resolved: 14 were pre-service appeals. <p><u>Quarterly Summary Report of QI/UM Activities:</u> <u>Meetings:</u> Two QI/UM meetings were held (March 20, 2014 and May 15, 2014) in which several guiding documents were presented and approved.</p> <p><u>Quality Improvement Reports:</u> Two new regulatory reports were submitted to the committee as part of corrective action plans related to the 2013 DHCS Audit.</p> <ul style="list-style-type: none"> • The first report provided a summary of CVH's monitoring of provider office wait times. • The second report provided a summary of CVH's monitoring to ensure member's receive prescription medications after emergency room visits. Both reports demonstrated compliance with the requirements and monitoring will continue. <p><u>UMCM Reports:</u> A variety of utilization and case management performance, programmatic and regulatory</p>	

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>• Executive Report G. Hund, CEO</p> <p>Action D. Hodge, M.D. Chairman</p>	<p>reports are monitored in an ongoing manner to oversee this function. Two new regulatory reports have been developed to ensure oversight of Specialty Referrals.</p> <p><u>Kaiser Reports:</u> First quarter reports (programmatic, performance and regulatory) were received from Kaiser for CVH members who are currently receiving care through Kaiser since the 8/1/2013 Healthy Families Transition. All reports were approved and remain current.</p> <p><u>Credentialing Sub-Committee Report Summary –Qtr 3</u> The Sub-Committee report summarizes the May 15th 2014 CalViva Credentialing Sub-Committee meeting. Fourth quarter 2013 Credentialing and Recredentialing Volumes for EHS, Sante, ChildNet and Health Net were reviewed. County specific reports for February and March were reviewed. No cases with significant issues were identified.</p> <p><u>Peer Review Sub-Committee Report Summary -Qtr 3</u> The Peer Review Sub-Committee report summarizes the May 15th, 2014 CalViva Peer Review Sub-Committee meeting. The summary reports for February and March 2014 were reviewed and approved. The first quarter 2014 Peer Review Count report was reviewed and approved. There was one closed and cleared case reported that required peer review. There was one case report with a Corrective Action Plan (CAP) outstanding. No significant quality of care issues were noted.</p>	

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p><u>Executive Report:</u> Executive Dashboard G. Hund presented the Executive Dashboard for July 2014. As of July 2014, CalViva Health had a total of 269,203 members. Market share has increased to 69.01% at the end of July.</p> <p>Autism Services Medi-Cal Managed Care Update Autism services are now a mandated benefit effective September 15, 2014. This resulted from a CMS July 2014 guidance and is being implemented by DHCS and the Medi-Cal managed care plans.</p>	
<p>#9 Final Comments from Commission Members and Staff</p>	<p>A. Naz, M.D stated primary care physicians in Madera County have not received their ACA payments. Second Comment is there is only one OB/GYN physician left in Madera County due to relocation and one no longer in practice. If any obstetricians are interested in assisting Madera County during this time please contact CVH.</p> <p>G Hund responded to the initial question regarding ACA payments. He indicated that EHS is responsible for these payments and EHS has come to an agreement with Health Net. EHS is currently within their time commitment of a 30day window to issue payments.</p>	
<p>#10 Announcements</p>	<p>Commissioner Abdul Kassir resigned from the Commission effective September 30, 2014 due to a change in his job position and relocation. The Commission seat held by Community Regional Medical Center(CRMC) will be filled as soon as CRMC fills Mr. Kassir's position.</p>	

Commission Meeting Minutes

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
#11 Public Comment	None	
#12 Adjourn	The meeting was adjourned at 2:36 PM. The next Commission meeting is scheduled for October 16, 2014 in Fresno County.	

Submitted this Day: September 18, 2014

Submitted by: Jeff Nikansa
 Jeff Nikansa

Clerk to the Commission