

Fresno-Kings-Madera  
Regional Health Authority

**CalViva Health  
Commission  
Meeting Minutes**  
October 18, 2018

**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
	Sara Bosse, Director, Madera Co. Dept. of Public Health		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
✓	Daniel Maychen, Chief Financial Officer (CFO)	✓	Mary Lourdes Leone, Director of Compliance
✓	Patrick Marabella, M.D., Chief Medical Officer (CMO)	✓	Cheryl Hurley, Commission Clerk
	Mary Beth Corrado, Chief Compliance Officer (CCO)		
✓	Jeff Nkansah, Chief Operating Officer (COO)		
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 1:37 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>

Commission Meeting Minutes

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>Cheryl Hurley, Clerk to the Commission</p>		
<p><b>#3 Consent Agenda</b>            a) Commission Minutes 9/20/18            b) Finance Committee Minutes 7/19/18            c) QI/UM Committee Minutes 7/19/18</p> <p>Action            David Hodge, MD, Chairman</p>	<p>All consent items were presented and accepted as read.</p>	<p><b>Motion:</b> Approve Consent Agenda            9 – 0 – 0 – 8</p> <p>(Neves / Soares)</p>
<p><b>#4 Financial Audit Report for Fiscal Year 2018</b>            Presenter: R. Suico, Moss Adams</p> <p>Action            David Hodge, MD, Chairman</p>	<p>Rianne Suico, 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, which is the highest audit opinion that could be provided by an external CPA firm. 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><b>Motion:</b> Approve Financial Audit Report for Fiscal Year 2018            9 – 0 – 0 – 8</p> <p>(Rogers / Gruen)</p>
<p><b>#5 2019 Calendar Year Meeting Proposal</b></p> <p>Action            David Hodge, MD, Chairman</p>	<p>The 2019 calendar year meeting schedules were presented to the Commission for approval.</p>	<p><b>Motion:</b> Approve 2019 Calendar Year Meeting Schedules            9 – 0 – 0 – 8</p> <p>(Neves / Soares)</p>

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p><b>#6 Cultural &amp; Linguistics – 2018 Executive Summary and Work Plan Evaluation</b></p> <p>Action P Marabella, MD, CMO</p>	<p>Dr. Marabella presented the 2018 Cultural &amp; Linguistics Work Plan Mid-Year Evaluation.</p> <p>The 4 categories for the 2018 Work Plan are:</p> <ol style="list-style-type: none"> <li>1. Language Assistance Services</li> <li>2. Compliance Monitoring</li> <li>3. Communication, Training, and Education</li> <li>4. Health Literacy, Cultural Competency &amp; Health Equity</li> </ol> <p>By June 30, 2018 all activities were on target.</p> <p>Some of the activities completed consist of:</p> <ol style="list-style-type: none"> <li>1. Non-Discrimination Notice updated and implemented.</li> <li>2. Thirty-three (33) materials, including member newsletters reviewed for readability level, content, and layout.</li> <li>3. Cultural &amp; Linguistics related grievances reviewed with follow-up completed when indicated.</li> <li>4. Training for Appeals &amp; Grievances Coordinators focused on culture, language and perceived discrimination and how to code appropriately for these issues.</li> <li>5. Language Assistance Program trainings for new Call Center staff.</li> <li>6. Health Disparity Training for staff and Volume 2 of the Health Equity Newsletter was distributed to staff.</li> </ol> <p>All Work Plans continue on target for completion by the end of calendar year 2018.</p>	<p><b>See #7 for Motion</b></p>

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<p><b>#7 Health Education – 2018 Executive Summary and Work Plan Evaluation</b></p> <p>Action P. Marabella, MD, CMO</p>	<p>Dr. Marabella presented the 2018 Health Education Work Plan Mid-Year Evaluation.</p> <p>Two areas of focus for 2018 consist of:</p> <ol style="list-style-type: none"> <li>1. Health Ed Programs and Services</li> <li>2. Department Operations, Reporting and Oversight</li> </ol> <p>Of the 14 Program Initiatives, 11 have met or exceeded 50% of the year- end goal. These consist of:</p> <ol style="list-style-type: none"> <li>1. Chronic Disease Education</li> <li>2. Community Partnerships</li> <li>3. Digital Health</li> <li>4. Health Equity</li> <li>5. HEDIS® Incentives</li> <li>6. Immunizations</li> <li>7. Member Engagement</li> <li>8. Member Newsletter</li> <li>9. Promotores Health Network</li> <li>10. Oversight &amp; Reporting</li> <li>11. Materials updates, development, utilization &amp; inventory</li> </ol> <p>The three (3) initiatives that did not meet 50% of year-end goal by 6/30/18 and barriers with plans to address this include:</p> <ol style="list-style-type: none"> <li>1. Obesity Prevention-decrease in referrals noted, therefore a new self-enrollment process will be initiated.</li> <li>2. Perinatal Education-DHCS stopped providing eligibility list, so the internal notice of pregnancy list will be utilized to identify women to receive educational materials.</li> </ol>	<p><b>Motion:</b> <i>Approve 2018 Cultural &amp; Linguistics Executive Summary and Work Plan Evaluation; and 2018 Health Education Executive Summary and Work Plan Evaluation</i></p> <p><i>9 – 0 – 0 – 8 (Nikoghosian / Neves)</i></p>

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	<p>3. Tobacco Cessation-decrease in referrals noted, therefore Provider Updates and webinars will be initiated to inform providers about the referral process.</p> <p>Barriers to full implementation of planned activities have been identified and are being addressed. 2018 initiatives will continue to be implemented in order to meet or exceed year end goals.</p>	
<p><b>#8 Standing Reports</b></p> <ul style="list-style-type: none"> <li>• <b>Finance Report</b> Daniel Maychen, CFO</li>   <li>• <b>Compliance</b></li> </ul>	<p><u><b>Finance</b></u></p> <p><b>Financial Statements as of August 31, 2018:</b></p> <p>Total current assets were approximately \$171.4M; total current liabilities were approximately \$120.8M. Current ratio is 1.42. TNE as of August 31, 2018 was approximately \$61.4M, which is approximately 463% of the minimum DMHC required TNE amount.</p> <p>Total premium capitation income recorded was \$196.2M which is \$5.9M above budgeted amounts primarily due to actual rates being higher than budgeted and enrollment being higher than budgeted.</p> <p>All other expense line items are in line with current year budget. Total net income for the two months of the fiscal year is approximately \$1.6M, which is approximately \$472K more than budgeted.</p> <p><u><b>Compliance</b></u></p> <p>M.L. Leone presented the Compliance report.</p>	<p><b>Motion: Approve Standing Reports</b></p> <p><i>9 – 0 – 0 – 8 (Nikoghosian / Neves)</i></p>



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	<ul style="list-style-type: none"> <li>• Additionally, there have been some PPG changes and transitions following the EHS closure which have contributed to an increase in Exempt Grievances.</li> <li>• Appeals have decreased in number for the month of August compared to previous months, however, year-to- date, appeals have increased this year compared to last.</li> <li>• Cases related to Advanced Imaging have remained consistent.</li> <li>• The Uphold/Overturn rates are at approximately 70%/30%. Continue to monitor monthly.</li> </ul> <p><b>Key Indicator Report</b></p> <p>Dr. Marabella presented the Key Indicator report through July 2018.</p> <ul style="list-style-type: none"> <li>• Membership has remained consistent to date for 2018.</li> <li>• The increase in ER Visits and Inpatient Admissions noted in Q1 &amp; Q2, particularly for TANFs was further investigated and analyzed and found to be related to a particularly virulent strain of flu this season. These rates are back down in July.</li> <li>• A new CalViva Pregnancy Program has recently been initiated and we are beginning to see an increase in referrals and engagement.</li> <li>• Turn-around Times for Utilization Management are all above 95% with 4 of 6 metrics at 100%. Continue to monitor all cases that do not meet standard through the Turn-around Time Report.</li> <li>• Integrated Case Management &amp; Transitional Care Management are demonstrating good engagement rates. These two teams work together to provide smooth care transitions.</li> </ul>	

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	<ul style="list-style-type: none"> <li>• MHN data is now provided on this report. Outreach efforts are being modified to improve reach and engagement rates for the behavioral health population.</li> </ul> <p><b>QIUM Quarterly Summary Report</b></p> <p>Dr. Marabella provided the QI/UM Qtr. 3, 2018 update. Two QI/UM meetings were held in Quarter 3; one on July 19, 2018 which was reported during the September Commission meeting, and the second was held on September 20, 2018 and is reported upon today.</p> <p>The following general documents were approved at the September meeting:</p> <ul style="list-style-type: none"> <li>• Quality Improvement Mid-Year Work Plan Evaluation</li> <li>• Utilization Management Mid-Year Work Plan Evaluation</li> <li>• UMCM Annual Policy Review</li> <li>• Medical Policies Q2</li> <li>• Pharmacy Provider Update</li> <li>• Pharmacy Formulary (July, Full &amp; Condensed)</li> </ul> <p>The following Quality Improvement Reports were reviewed: Appeals and Grievances Dashboard through July 2018, the Initial Health Assessment Report (Q1 &amp; Q2), Potential Quality Issues Report, Public Programs Report (Q2), and other QI reports.</p> <p>The Utilization Management &amp; Case Management reports reviewed included the Key Indicator Report, Utilization Management Concurrent Review Report, and the Case Management, Transitional Case Management, and Palliative Care Report.</p>	



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	<p>The quarterly Pharmacy reports were reviewed covering Operations Metrics, Top Medication Prior Authorization Requests and quarterly Formulary Changes. These reports assess for emerging patterns in authorization requests and compliance with prior authorization (PA) turn-around times. All second quarter PA metrics were within 5% of standard.</p> <p>HEDIS® Activity:</p> <ul style="list-style-type: none"> <li>• Final RY18 results became available during Q3 and analysis was initiated. Measures not meeting the MPL will continue into 2019.</li> </ul> <p>Projects for RY2019 Include:</p> <ul style="list-style-type: none"> <li>○ Monitoring Patients on Persistent Medications – Madera County</li> <li>○ Avoid Antibiotics in Adults with Bronchitis – Madera County</li> <li>○ Breast Cancer Screening – Fresno County</li> <li>○ Comprehensive Diabetes Care – Fresno County</li> </ul> <p>In Quarter 3, efforts continued for the two HEDIS® Performance Improvement Projects (PIPs):</p> <ul style="list-style-type: none"> <li>○ Childhood Immunizations.</li> <li>○ Postpartum Care Disparity Project.</li> </ul> <p>Bi-weekly team meetings continue. Monitoring of interventions and development of subsequent interventions is in progress.</p> <p>Quarter 2 2018 Kaiser reports were reviewed with no significant findings.</p>	

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<ul style="list-style-type: none"> <li>• <b>Operations</b> J. Nkansah, COO</li>   <li>• <b>Executive Report</b> G. Hund, CEO</li> </ul>	<p><u><b>Operations Report</b></u></p> <p>Jeff Nkansah presented the Operations Report.</p> <p>Microsoft will be ending support for Microsoft Windows 7 in January 2020; security updates for Windows 7 will no longer be offered. This issue does not impact CVH as all workstations have been updated to the most recent operating system.</p> <p>There were eight (8) Privacy &amp; Security incidents for the month of September; none of which were high risk cases.</p> <p>CVH continues to track and monitor the new state and federal regulations ensuring contracted network providers are enrolled in the Medi-Cal program.</p> <p><u><b>Executive Report</b></u></p> <p>Membership for the month of September remains consistent with previous month. Preliminary numbers for October show a slight decrease in membership in the TANF population. Membership will continue to be monitored.</p>	
<p><b>#9 Final Comments from Commission Members and Staff</b></p>	<p>None.</p>	
<p><b>#10 Announcements</b></p>	<p>None.</p>	
<p><b>#11 Public Comment</b></p>	<p>None.</p>	
<p><b>#12 Adjourn</b></p>	<p>The meeting was adjourned at 2:35 pm</p>	

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	The next Commission meeting is scheduled for November 15, 2018 in Fresno County.	

Submitted this Day: Feb 21, 2019

Submitted by: Cheryl Hurley  
Cheryl Hurley  
Clerk to the Commission