

Fresno-Kings-Madera
Regional Health Authority

**CalViva Health
QI/UM Committee
Meeting Minutes**
October 17th, 2019

CalViva Health
7625 North Palm Avenue; Suite #109
Fresno, CA 93711
Attachment A

Committee Members in Attendance		CalViva Health Staff in Attendance	
✓	Patrick Marabella, M.D., CalViva Chief Medical Officer, Chair		Mary Beth Corrado, Chief Compliance Officer (CCO)
✓	Fenglaly Lee, M.D., Central California Faculty Medical Group	✓	Amy Schneider, RN, Director of Medical Management Services
	Brandon Foster, PhD. Family Health Care Network	✓	Mary Lourdes Leone, Director of Compliance
✓	David Cardona, M.D., Fresno County At-large Appointee, Family Care Providers	✓	Melissa Mello, MHA, Medical Management Specialist
✓	John Zweifler, MD., At-large Appointee, Kings County	✓	Ashelee Alvarado, Medical Management Administrative Coordinator
	Joel Ramirez, M.D., Camarena Health Madera County	✓	Lori Norman, Compliance Manager
	Rajeev Verma, M.D., UCSF Fresno Medical Center		
	David Hodge, M.D., Fresno County At-large Appointee, Chair of RHA (Alternate)		
Guests/Speakers			
✓	Lali Witrago, Sr. Cultural and Linguistic Specialist		
✓	Justina Felix, Health Education		

✓ = in attendance

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
#1 Call to Order Patrick Marabella, M.D, Chair	The meeting was called to order at 10:32 am. A quorum was present.	
#2 Approve Consent Agenda - Committee Minutes: September 19, 2019 - Provider Preventable Conditions (Q2) - Preventive Health Guidelines 2019 - Standing Referrals Report (Q2)	The September 2019 QI/UM minutes were reviewed and highlights from today's consent agenda items were discussed and approved. Any item on the consent agenda may be pulled out for further discussion at the request of any committee member.	Motion: Approve Consent Agenda (Lee/Cardona) 4-0-0-3

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>- Pharmacy Provider Update (Q2) - Compliance Regulatory Report (Attachments A-F) Action Patrick Marabella, M.D Chair</p>		
<p>#3 QI Business - Appeals & Grievances Dashboard & Turn Around Time Report (August) (Attachment G) Action Patrick Marabella, M.D, Chair</p>	<p>The A & G Dashboard provides monthly data to facilitate monitoring for trends in the number and types of cases over time. This Dashboard included data through the end of August 2019. The following items were noted for August: <u>Grievances:</u> ➤ There was a total of 118 grievances resolved in August. ➤ There was a total of 82 Quality of Service grievances resolved. ➤ There were 36 Quality of Care grievances resolved. ➤ Number of Grievances received remains higher than previous years. <u>Appeals:</u> ➤ The number of appeals received in July and August compared with quarter 2 2019, has increased. The majority of this increase can be attributed to the areas of Advanced Imaging, Pharmacy, and Surgery.</p>	<p>Motion: Approve - Appeals & Grievances Dashboard & Turn Around Time Report (August) (Cardona/Zweifler) 4-0-0-3</p>
<p>#3 QI Business - Behavioral Health Performance Indicator Report (Q2) (Attachment H) Action Patrick Marabella, M.D, Chair</p>	<p>The MHN Performance Indicator Report for Behavioral Health Services (Q2 2019) was presented. 19 out of the 20 metrics met or exceeded their targets. ➤ Authorization Decision Timeliness was below target for Provider Disputes. Quarter 2 2019 resolution timeliness was below target by 7%. A number of interventions have been implemented by the MHN Dispute Unit to improve performance: ➤ ABA claims continue to be the largest category for disputes. There were 5 non-ABA reviews and 312 ABA reviews in Q2 2019. All of them were compliant with timeliness standards. ➤ Member appointment access data revealed no (0) Life-threatening or Non-life-threatening Emergent cases. However, in quarter 2 there was 1 Urgent case and the appointment access standard was met. ➤ There were 2 PQI cases in Quarter 2 2019 and they were resolved within timeliness standards. ➤ .</p>	<p>Motion: Approve - Behavioral Health Performance Indicator Report (Q2) (Zweifler/Cardona) 4-0-0-3</p>

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<p>#3 QI Business - Performance Improvement Project Update Monitoring Persistent Medications (Attachment I) Action Patrick Marabella, M.D, Chair</p>	<p>The Quality Improvement Project to address Annual Monitoring for Patients on Persistent Medications (MPM) was reviewed with the committee. The report summarizes quality improvement activities associated with HEDIS® measures that have performed below the minimum performance level. The MPM project was focused in Madera County and the MPM QI Summary described improvement interventions, results, and recommendations for the project. Final RY19 compliance rates for the ACE/ARB measure in Madera county was 89.13% and for diuretics 90.37% exceeding the 50th percentile.</p>	<p>Motion: Approve - Performance Improvement Project Update Monitoring Persistent Medications (Lee/Zweifler) 4-0-0-3</p>
<p>#3 QI Business - Culture & Linguistics Geo Access Report (Attachment J) Action Patrick Marabella, M.D, Chair</p>	<p>The Geo Access Assessment of Cultural and Linguistic Needs Report examines race, ethnicity and language of CalViva Health’s members and corresponding provider network for calendar year 2018.</p> <ul style="list-style-type: none"> ➤ All members identified as Spanish-speaking members residing in Fresno, Kings and Madera counties had their access needs related to language met. ➤ Of the members identified as Hmong speakers, seven members residing in Fresno County were identified as having an access gap related to PCP availability according to the report’s parameters. ➤ Khmer and Arabic are the two-member language needs identified with the most gaps. ➤ Madera County showed the least gaps in language barriers in the three-county area. <p>Telephonic interpreter services are available in all provider locations. The results of the study were shared with Provider Relations staff for provider recruiting purposes.</p>	<p>Motion: Approve - Culture & Linguistics Geo Access Report (Zweifler/Lee) 4-0-0-3</p>
<p>#4 Access Business - Appointment Availability & After-Hours Access Survey Results (Provider Update) (Attachment K) Action Patrick Marabella, M.D, Chair</p>	<p>The annual 2018 Provider Appointment Availability Survey and Provider After-Hours Access Survey results were reviewed from the random sample of participating primary care physicians (PCPs), specialty care providers, ancillary providers, and non-physician mental health providers included in the survey. Data was gathered from August 2018 through December 2018. Then following DMHC appointment access metrics did not meet the performance goal of 80%:</p> <ul style="list-style-type: none"> ➤ Urgent care appointment with PCP within 48 hours (71.4%). ➤ Urgent care appointment with a specialist within 96 hours (62.8%). ➤ Non-urgent care appointment with a specialist within 15 business days (68.1%). ➤ Preventive or well-child appointment with PCP (73.6%). 	<p>Motion: Approve - Appointment Availability & After-Hours Access Survey Results (Provider Update) (Zweifler/Lee) 4-0-0-3</p>
<p>#5 Cultural &</p>	<p>Dr. Marabella presented the 2019 Cultural & Linguistics Work Plan Mid-Year Evaluation and Executive Summary.</p>	<p>Motion: Approve</p>

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>Linguistics/Health Education Business</p> <ul style="list-style-type: none"> - Culture & Linguistics Work Plan Mid-Year Evaluation & Executive Summary - Culture & Linguistics Language Assistance Program Report - Health Education Work Plan Mid-Year Evaluation & Executive Summary (Attachment L-N) <p>Action Patrick Marabella, M.D, Chair</p>	<p>The summary of activities completed during the first six months of 2019 consist 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>Some of the Activities Completed include:</p> <ol style="list-style-type: none"> 1. Ninety-one (91) translation reviews coordinated to ensure accuracy of translation. 2. C & L related grievances reviewed. Follow up completed when indicated. 3. Conducted trainings for staff on: “Impact of Poverty” “Emotional Intelligence” and “Making Reasonable Accommodations” . 4. Collaborated with Health Ed to plan and host Mendota Community Advisory Group (CAG). Working with the CAG developed an action plan for improvement. 5. Initiated research on barriers to breast cancer screening among the Hmong community (literature review, focus groups and key informant interviews). <p>By June 30, 2019, all activities were either completed or are on target to be completed by the end of the year. CVH will continue to implement, monitor and track C & L related services and activities.</p> <p><u>Culture & Linguistics Language Assistance Program Report</u></p> <p>This Report provides information on the language service utilization by CalViva Health members for January 1st to June 30th, 2019. The Language Assistance Program incorporates MHN Services’ Mental Health/Behavioral Health language utilization for the same reporting period. It also evaluates, telephonic and in-person interpretation services, Sign Language and document translations.</p> <ul style="list-style-type: none"> ➤ C&L language assistance service utilization is consistent with previous reporting periods. ➤ The number of grievance cases is consistent with 2018 data when an increase was identified. This increase can be attributed to new coding structure and training efforts. ➤ MHN Services’ documentation and reporting of data is complete and on track for future reporting periods. (2019 is first full year for MHN) 	<ul style="list-style-type: none"> - Culture & Linguistics Work Plan Mid-Year Evaluation & Executive Summary - Culture & Linguistics Language Assistance Program Report - Health Education Work Plan Mid-Year Evaluation & Executive Summary (Zweifler/Lee) <p>4-0-0-3</p>

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	<p><u>Health Education Work Plan Mid-Year Evaluation & Executive Summary</u> Dr. Marabella presented the 2019 Health Education Work Plan Mid-Year Evaluation and Executive Summary.</p> <p>Health Education activities are selected based upon the county-specific Group Needs Assessment. The two major areas of focus for 2019 include:</p> <ul style="list-style-type: none"> • Health Ed Programs and Services • Department Operations, Reporting and Oversight <p>Activity Status at the mid-year:</p> <ol style="list-style-type: none"> 1. 16 Program Initiatives for 2019 2. 12 met or exceeded 50% of the year-end goal 3. 4 Initiatives did not meet 50% of year-end goal by 6/30/18 <p>Barriers to full implementation of planned activities have been identified and are being addressed. Continue with implementation of 2019 initiatives to meet or exceed year end goals.</p>	
<p>#6 UM Business - Key Indicator Report (August) (Attachment O) Action Patrick Marabella, M.D., Chair</p>	<p>The Key Indicator Report reflects data for the months of June, July and August in 2019. This report includes key metrics for tracking utilization and case management activities.</p> <ul style="list-style-type: none"> ➤ Admission and readmission rates for SPDs are down slightly in August compared to recent months. ➤ The fluctuation in ER Visits and Inpatient Admissions for TANFs is related to seasonal respiratory illnesses. ➤ A CAP has been established for Prior Authorization (PA) Turn-around time results . Non-compliant rates are related to staffing challenges, a significant increase in submission of PA requests by a few providers. Improvement strategies are underway. ➤ CCS rates have shown a gradual increase over time. ➤ Perinatal Case Management referrals have continued to increase as a result of improved outreach and engagement associated with our new CalViva Pregnancy Program plus the two Perinatal Case Management staff in our area. ➤ Improvements are seen for Integrated Case Management, Transitional Case Management and Behavioral Case Management related to an increase in referrals, improved engagement, and ultimately an increase in the total number of cases managed. <p style="text-align: center;">Dr. Cardona stepped out at 11:09 am; returned at 11:13 am.</p>	<p>Motion: Approve - Key Indicator Report (August) (Lee/Zweifler) 4-0-0-3</p>

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>#6 UM Business - Specialty Referrals Report – HN (Q2) - Specialty Referrals Reports: La Salle, First Choice, IMG, Adventist, Central Valley Medical Physicians (Q2) (Attachment P-Q) Action Patrick Marabella, M.D., Chair</p>	<p>The Health Net Specialty Referrals Report provides a summary of Specialty Referral Services that require prior authorization in the tri-county area in the second quarter of 2019. This report provides evidence of the tracking process in place to ensure appropriate access to specialty care for CalViva Health members.</p> <p>The following delegated entities provided a summary of Specialty Referral Services for Quarter 2 in the tri-county area: La Salle, First Choice, IMG, Adventist, Sante, and Central Valley Medical Physicians. Parameters for these reports have recently been clarified with Delegation Oversight staff to improve the accuracy and consistency of reporting.</p> <p>These reports provide evidence of the tracking process in place to ensure appropriate access to specialty care for CalViva Health members.</p> <p>Referral and denial rates are monitored on a quarterly basis and compared over time. Top priority medical specialties are tracked along with turn-around times. Trends will continue to be monitored and follow up initiated when indicated.</p>	<p>Motion: Approve - Specialty Referrals Report – HN (Q2) - Specialty Referrals Reports: La Salle, First Choice, IMG, Adventist, Central Valley Medical Physicians (Q2) (Cardona/Lee) 4-0-0-3</p>
<p>#7 Policies & Procedures - Public Health Policy Grid (Attachment R) Action Patrick Marabella, M.D., Chair</p>	<p>Public Health Policy & Procedure Annual Review grid was presented to the committee. The majority of policies were updated without changes or had minor edits. Seven policies that required more extensive review were included in the meeting packet:</p> <ul style="list-style-type: none"> ➤ PH-004 Pediatric Preventative Care Services ➤ PH-008 Early Start Program ➤ PH-013 Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Services ➤ PH-016 Coordination Services with Local Educational Agency (LEA) Providers ➤ PH-041 DDS-Administered Home and Community Based Waiver Program ➤ PH-048 Regional Centers Coordination ➤ PH-050 California Children’s Services (CCS) <p>The policy edits were discussed and the Public Health policies were approved.</p>	<p>Motion: Approve - Public Health Policy Grid (Cardona/Lee) 4-0-0-3</p>
<p>#8 Public Comment</p>	<p>None.</p>	
<p>#9 Adjourn Patrick Marabella, M.D, Chair</p>	<p>Meeting was adjourned at 11:37 am.</p>	

NEXT MEETING: November 21, 2019

Submitted this Day: November 21, 2019

Submitted by: Amy B. Schneider
Amy Schneider, RN, Director Medical Management

Acknowledgment of Committee Approval:

Patrick Marabella
Patrick Marabella, MD Committee Chair