

Fresno-Kings-Madera  
Regional Health Authority

CalViva Health  
**QI/UM Committee**  
**Meeting Minutes**  
 October 19, 2017

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	✓	Melissa Holguin, Medical Management Administrative Coordinator
	David Cardona, M.D., Fresno County At-large Appointee, Family Care Providers	✓	Mary Lourdes Leone, Director of Compliance
✓	John Zweifler, MD., At-large Appointee, Kings County	✓	Melissa Mello, Medical Management Specialist
✓	Kenneth Bernstein, M.D., Camarena Health		
	Rajeev Verma, M.D., UCSF Fresno Medical Center		
	David Hodge, M.D., Fresno County At-large Appointee, Chair of RHA (Alternate)		
Guests/Speakers			
✓	Lali Witrigo, Cultural & Linguistics	✓	Merritt Beckett, Health Education Manager
✓	Brianne Jackson, Health Education Department		

✓ = 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 10:40 am.	
#2 Approve Consent Agenda - Committee Minutes: September 21 <sup>st</sup> , 2017 - 2018 QIUM Meeting Schedule - Pharmacy Provider Update - Pharmacy Formulary List Condensed Version (October) (Attachments A-D) Action Patrick Marabella, M.D. Chair	The September QI/UM minutes were reviewed and highlights from the consent agenda items were discussed and approved. The full Recommended Drug List was available for review at the meeting. The proposed 2018 QI/UM Meeting Schedule was reviewed with the Committee.	Motion: Approve Consent Agenda (Bernstein/Zweifler) 4-0-0-3

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>#3 <b>QI Business</b>                      Appeals &amp; Grievances:                      - Dashboard                      (Attachment E)                      Action                      Patrick Marabella, M.D,                      Chair</p>	<p>The A &amp; G Dashboard provides monthly data to facilitate monitoring for trends in the number and types of cases over time. The Dashboard included data through the end of August 2017.</p> <p>The number of Quality of Care and Quality of Service grievances for August are similar to previous months. Exempt grievances are noted to have increased in several categories this month. Continue to monitor for trends. The Dashboard is currently being modified to add some new categories related to Continuity of Care. The modified Dashboard is expected to be implemented for the September report.</p>	<p>Motion: Approve Appeals &amp; Grievances Report - Dashboard                      (Bernstein/Zweifler)                      4-0-0-3</p>
<p>#3 <b>QI Business</b>                      - DMHC EXR Member Notification Report                      (Attachment F)                      Action                      Patrick Marabella, M.D,                      Chair</p>	<p>This report was created as part of a Corrective Action Plan (CAP) associated with CalViva’s Appeal &amp; Grievance processes. As part of this CAP, the Customer Contact Center (CCC) staff are required to read a script to notify members of their rights when filing any type of grievance, to specifically include expedited grievances. The CCC staff also documents this in the grievance file thus allowing for compliance monitoring of this new process. Compliance monitoring began in November 2016 and is reported on a monthly basis. Improvement is noted since monitoring was initiated. CalViva recently received preliminary notification that the DMHC will perform a follow up audit related to these new processes in January 2018. More information regarding the audit will be provided as it becomes available.</p>	<p>Motion: Approve DMHC EXR Member Notification Report                      (Foster/Bernstein)                      4-0-0-3</p>
<p>#3 <b>QI Business</b>                      - Provider Preventable Conditions Report                      (Attachment G)                      Action                      Patrick Marabella, M.D,                      Chair</p>	<p>This report provides a summary of Provider Preventable Conditions (PPCs) identified during the reporting period. PPCs may be identified by providers/facilities, through claims data, encounter data or Potential Quality Issues (PQI) submissions. PPCs are associated with Hospital Acquired Conditions, Health Care Acquired Conditions and Other Provider Preventable Conditions as defined by state and federal regulations. When identified, DHCS requires health plans to report these cases via DHCS form 7107. There was one case identified and reported to DHCS during the reporting period.</p>	<p>Motion: Approve Provider Preventable Conditions Report                      (Foster/Bernstein)                      4-0-0-3</p>
<p>#3 <b>QI Business</b>                      - Office Wait Time Report (Q2)                      (Attachment H)                      Action                      Patrick Marabella, M.D,                      Chair</p>	<p>This report provides a summary of CalViva’s ongoing monitoring of provider office wait times as required by DHCS. This audit relies on monthly submissions of patient wait times by provider offices. It was noted that submissions have been adequate for Fresno, Kings, and Madera Counties.</p> <p><u>Follow up Activities:</u></p> <ul style="list-style-type: none"> <li>➤ Provider-specific outliers will be monitored for trends and follow up initiated when indicated.</li> <li>➤ Results will be shared with clinics/providers via reports emailed to clinic/office managers.</li> </ul> <p>Provider Relations will assist with targeting clinics with low data submission rates.</p>	<p>Motion: Approve Office Wait Time Report (Q2)                      (Bernstein/Zweifler)                      4-0-0-3</p>
<p>#3 <b>QI Business</b>                      C&amp;L Language Assistance Program Report                      (Attachment I)</p>	<p>This report provides information on language services utilization by CalViva Health members for January – June 2017. During this time period, the total number of calls handled by Member Services Department representatives was 67,002 for all languages with 12,103 (18%) handled in Spanish or Hmong. Additionally, a total of 731 interpreter</p>	<p>Motion: Approve C&amp;L Language Assistance Program Report</p>

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Action Patrick Marabella, M.D, Chair	requests were fulfilled for CalViva Health members. Of these, 507 requests were fulfilled utilizing telephonic interpreter services followed by 120 for in-person and 104 for sign language interpretation. As of June 30, 2017, 33% of CalViva Health members are Limited English Proficient (LEP).	(Bernstein/Zweifler) 4-0-0-3
#3 <b>QI Business</b> - C & L Geo Access Report & Summary (Attachment J) Action Patrick Marabella, M.D, Chair	The purpose of the Geo Access Assessment of Cultural and Linguistic Needs is to examine the race, ethnicity and language of CalViva Health’s members and provider network in order to identify language needs or gaps for Fresno, Kings and Madera Counties. This report is produced every other year and includes the follow up activities conducted to address language needs and gaps identified between reporting periods. Based on the geographic analysis findings, the Cultural and Linguistic Services department will collaborate with Provider Network Management in order to use this information when developing network priorities for primary care and specialist sites in Fresno, Kings and Madera Counties that will support members’ language needs.	Motion: Approve C & L Geo Access Report & Summary  (Bernstein/Zweifler) 4-0-0-3
#3 <b>QI Business</b> - Comprehensive Diabetes Care QI Summary (Attachment K) Action Patrick Marabella, M.D, Chair	This year CalViva Medical Management staff continued efforts to improve Diabetes Care through a formal Performance Improvement Project (PIP) related to Completion of HbA1c Testing. This is a HEDIS® measure that evaluates the percentage of members 18-75 years of age with diabetes (type 1 and type 2) who complete at least annual HbA1c testing. This QI Summary describes activities associated with these efforts completed in conjunction with a high volume, low performing clinic in Fresno and Kings Counties. This project concluded in June 2017 with a number of lessons learned and efforts to improve the health and safety of members will continue with providers in our three counties.	Motion: Approve Comprehensive Diabetes Care QI Summary  (Bernstein/Zweifler) 4-0-0-3
#4 <b>Cultural &amp; Linguistics/Health Education</b> - C&L Work Plan Mid-Year Evaluation & Executive Summary (Attachment L) Action Patrick Marabella, M.D, Chair	Dr. Marabella presented the 2017 Cultural & Linguistics Work Plan Mid-Year Evaluation and Executive Summary.  The summary of activities completed during the first six months of 2017 consist of four areas: <ul style="list-style-type: none"> <li>• Language Assistance Services</li> <li>• Compliance Monitoring</li> <li>• Communication, Training and Education</li> <li>• Health Literacy, Cultural Competency and Health Equity</li> </ul> By June 30, 2017, all activities were either completed or are on target to be completed by the end of the year. CVH will continue to implement the remaining six months of the C&L 2017 Work Plan.	Motion: Approve C&L Work Plan Mid-Year Evaluation & Executive Summary  (Bernstein/Foster) 4-0-0-3
#4 <b>Cultural &amp; Linguistics/Health Education</b> - Health Education Mid-	Dr. Marabella presented the 2017 Health Education Work Plan Mid-Year Evaluation and Executive Summary.  Health Education activities are selected based upon the county-specific Group Needs Assessment. The three major areas of focus for 2017 include:	Motion: Approve Health Education Mid-Year Work Plan Evaluation & Executive Summary

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<p>Year Work Plan Evaluation &amp; Executive Summary (Attachment M) Action Patrick Marabella, M.D, Chair</p>	<p>1. Health Education Initiatives:  <ul style="list-style-type: none"> <li>○ There are 11 program initiatives; 10 of which are on track in meeting year-end goals</li> <li>○ The Digital Education Program initiative experienced challenges with obtaining DHCS approval for one project.</li> </ul> </p> <p>2. Health Education Programs:  <ul style="list-style-type: none"> <li>○ This includes items such Member Newsletters and the CVH Public Policy Committee.</li> </ul> </p> <p>3. Operations Report and Oversight.  <ul style="list-style-type: none"> <li>○ Oversight monitoring and materials updates.</li> </ul> </p> <p>Health Education will work to implement the second half of the 2017 Health Education Department Work Plan to meet or exceed year end goals.</p>	<p>(Bernstein/Foster) 4-0-0-3</p>
<p>#5 <b>UM Business</b> - Key Indicator Report (Attachment N) Action Patrick Marabella, M.D, Chair</p>	<p>The Key Indicator Report reflects data as of August 31, 2017. This report includes key metrics for tracking utilization and case management activities.</p> <ul style="list-style-type: none"> <li>➤ Admit and Readmit numbers have remained consistent. Some downward trends have been noted, however, this may represent random variation. Continue to monitor through end of year.</li> <li>➤ ER visits PTMPY have remained the same.</li> <li>➤ The population growth is stable.</li> <li>➤ Utilization remains consistent, however Turn-around Times have been inconsistent in recent months. A Corrective Action Plan has been submitted and accepted. Continue to monitor to assess for improvement.</li> <li>➤ Case Management will be initiating some new strategies to improve engagement rates including partnering with the Member Connections team to do home visits for difficult to reach members.</li> <li>➤ Challenges continue with engaging High-Risk OB patients. A new program will be initiated in 2018.</li> </ul>	<p>Motion: Approve Key Indicator Report  (Bernstein/Foster) 4-0-0-3</p>
<p>#4 <b>UM Business</b> - Specialty Referrals Reports: EHS, La Salle, IMG, Adventist (Q2) (Attachment O) Action Patrick Marabella, M.D, Chair</p>	<p>These reports provide a summary of Specialty Referral Services in quarter 2 that require prior authorization in the tri-county area for HN, EHS, La Salle, IMG and First Choice. These reports provide evidence of the tracking process in place to ensure appropriate access to specialty care for CalViva Health members. Results will continue to be monitored over time.</p>	<p>Motion: Approve Specialty Referrals Reports: EHS, La Salle, IMG, Adventist (Q2)  (Bernstein/Foster) 4-0-0-3</p>
<p>#6 <b>Compliance Update</b> (Attachment O)</p>	<p>ML Leone presented the Compliance report.</p> <ul style="list-style-type: none"> <li>➤ There was one high risk case in October for Privacy and Security. Members affected by this were notified.</li> <li>➤ Oversight audits of the activities delegated to Health Net (HN) continue in 2017. Currently in progress are Appeals &amp; Grievances and Provider Network audit.</li> </ul>	

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	<ul style="list-style-type: none"> <li>➤ In late September, DMHC and DHCS approved the Plan’s filings related to the termination of the contract between CalViva Health and Kaiser. DMHC issued Undertakings which CVH is obligated to fulfill throughout the coming year through the end of August 2018.</li> <li>➤ The Plan is still awaiting the draft report from the onsite DHCS audit that took place in April 2017.</li> <li>➤ 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.</li> <li>➤ The next Public Policy Committee meeting will be held December 6, 2017 at CalViva Health. All Commissioners and members of the public are welcome to attend the meeting.</li> <li>➤ CalViva Health employees participated in the annual Heritage Days C&amp;L training and completed the required post-program quiz for 2017.</li> </ul>	
#9 Old Business	None.	
#10 Announcements	None.	
#11 Public Comment	None.	
#12 Adjourn Patrick Marabella, M.D, Chair	Meeting was adjourned at 11:17 am.	

NEXT MEETING: December 8<sup>th</sup>, 2017

Submitted this Day: December 8<sup>th</sup> 2017

Submitted by: *Amy Schneider*  
Amy Schneider, RN, Director Medical Management

Acknowledgment of Committee Approval:

A handwritten signature in black ink, appearing to read "Patrick Marabella", written in a cursive style.

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Patrick Marabella, MD Committee Chair