

Fresno-Kings-Madera  
Regional Health Authority

**CalViva Health  
Commission**  
**Meeting Minutes**  
March 16, 2023

**Meeting Location:**  
CalViva Health  
7625 N. Palm Ave., #109  
Fresno, CA 93711

<b>Commission Members</b>			
✓	Sara Bosse, Director, Madera Co. Dept. of Public Health	✓	David Luchini, Director, Fresno County Dept. of Public Health
✓	David Cardona, M.D., Fresno County At-large Appointee	✓	Aftab Naz, Madera County At-large Appointee
✓	Aldo De La Torre, Community Medical Center Representative	✓	Joe Neves, Vice Chair, Kings County Board of Supervisors
✓	Joyce Fields-Keene, Fresno County At-large Appointee		Vacant, Kings County At-large Appointee
✓	John Frye, Commission At-large Appointee, Fresno		Sal Quintero, Fresno County Board of Supervisor
✓•	Soyla Griffin, Fresno County At-large Appointee	✓	Rose Mary Rahn, Director, Kings County Dept. of Public Health
✓	David Hodge, M.D., Chair, Fresno County At-large Appointee		David Rogers, Madera County Board of Supervisors
✓•*	Kerry Hydash, Commission At-large Appointee, Kings County	✓	Michael Goldring, Valley Children's Hospital Appointee
			Paulo Soares, Commission At-large Appointee, Madera County
<b>Commission Staff</b>			
✓	Jeff Nkansah, Chief Executive Officer (CEO)	✓	Mary Lourdes Leone, Chief Compliance Officer
✓	Daniel Maychen, Chief Financial Officer (CFO)	✓•	Amy Schneider, R.N., Director of Medical Management
✓	Patrick Marabella, M.D., Chief Medical Officer (CMO)	✓	Cheryl Hurley, Commission Clerk
<b>General Counsel and Consultants</b>			
✓	Jason Epperson, General Counsel		
✓ = Commissioners, Staff, General Counsel Present			
* = Commissioners arrived late/or left early			
• = Attended via Teleconference			

<b>AGENDA ITEM / PRESENTER</b>	<b>MOTIONS / MAJOR DISCUSSIONS</b>	<b>ACTION TAKEN</b>
<b>#1 Call to Order</b>	The meeting was called to order at 1:31 pm. A quorum was present.	
<b>#2 Roll Call</b> Cheryl Hurley, Clerk to the Commission	A roll call was taken for the current Commission Members.	<i>A roll call was taken</i>

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<p><b>#3 Kings County At-Large Commission Seat Appointment</b></p> <p>Action D. Hodge, MD, Chair</p>	<p>The Commission voted unanimously to reappoint Kerry Hydash for an additional three-year term for the Kings County At-Large Commission seat.</p>	<p><b>Motion:</b> <i>Reappointed Kerry Hydash to Commission for Kings County At-Large</i> 12 – 0 – 0 – 4</p> <p>(Neves / Fields-Keene) A roll call was taken</p>
<p><b>#4 Consent Agenda</b></p> <ul style="list-style-type: none"> <li>• <i>Commission Minutes dated 2/16/23</i></li> <li>• <i>Finance Committee Minutes dated 11/17/22</i></li> <li>• <i>QI/UM Committee Minutes dated 11/17/22</i></li> <li>• <i>Public Policy Committee Minutes 9/7/22</i></li> <li>• <i>Public Policy Committee Minutes 12/7/22</i></li> <li>• <i>Compliance Report</i></li> <li>• <i>2022 Quality Improvement End of Year Executive Summary</i></li> <li>• <i>2022 Quality Improvement Work Plan End of Year Evaluation</i></li> <li>• <i>2022 UMCM WP EOY Executive Summary</i></li> <li>• <i>2022 Utilization Management Case Management Work Plan End of Year Evaluation</i></li> <li>• <i>2023 Utilization Management Program Description</i></li> <li>• <i>2023 UMCM Work Plan</i></li> </ul>	<p>All consent items were presented and accepted as read.</p>	<p><b>Motion:</b> <i>Consent Agenda was approved.</i></p> <p>12 – 0 – 0 – 4</p> <p>(Frye / Neves)</p> <p>A roll call was taken</p>

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<ul style="list-style-type: none"> <li>2023 Case Management Program Description</li> </ul> <p>Action D. Hodge, MD, Chair</p>		
<p><b>#5 Closed Session</b></p> <p>1) Government Code section 54956.9(b) – Conference with Legal Counsel – Anticipated Litigation.</p>	<p>Jason Epperson, General Counsel, reported out of closed session. The Commission discussed in closed session the item agendized for closed session discussion and took no reportable action.</p> <p>Closed Session concluded at 1:47 pm.</p>	
<p><b>#6 2023 Quality Improvement</b></p> <ul style="list-style-type: none"> <li>2023 Program Description</li> <li>2023 Work Plan</li> </ul> <p>Action P. Marabella, MD, CMO</p>	<p>Dr. Marabella presented the 2023 Quality Improvement Annual Documents.</p> <p>The highlights of changes for the 2023 Quality Improvement Program Description consist of:</p> <ul style="list-style-type: none"> <li>Updated HN Medical Management Department to Population Health and Clinical Operations (PHCO).</li> <li>Updated Initial Health Assessment to Initial Health Appointments.</li> <li>Revised Health Promotion Program descriptions for 2023.</li> <li>Revised MemberConnections’ responsibilities to expanded role in Member Engagement.</li> <li>Changed Transition Care Management (TCM) to Transitional Care Services (TCS).</li> <li>Removed MHN references and replaced with Behavioral Health Administrator.</li> <li>Added information regarding delegated activities are reported to the CalViva QIUM Committee.</li> <li>Revised Committee Description to include chairperson, delegated and nondelegated activities and representatives from CalViva and HNCS departments.</li> </ul>	<p><b>Motion:</b> Approve 2023 Quality Improvement Program Description, and Work Plan.</p> <p>13 – 0 – 0 – 3</p> <p>(Naz / Cardona)</p> <p>A roll call was taken</p>

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	<ul style="list-style-type: none"> <li>• Revised description to separate out the Credentialing and Peer Review Subcommittees.</li> <li>• Staff Resources and Accountability – Added Org Chart for Med Mgt.</li> <li>• Appeals and Grievances section moved and revised to a workgroup description.</li> <li>• Chart revised to include CalViva Workgroups.</li> <li>• Updated the Chief Medical Officer description to include chairperson and oversight of QIUM Program information.</li> </ul> <p>Activities for the 2023 Quality Improvement Work Plan have been updated to include eight (8) key areas:</p> <ul style="list-style-type: none"> <li>• Behavioral Health:               <ul style="list-style-type: none"> <li>○ Follow up after ER visits for substance abuse.</li> <li>○ Follow up after ER visits for mental health.</li> </ul> </li> <li>• Chronic Conditions:               <ul style="list-style-type: none"> <li>○ Respiratory – AMR – Asthma Medication Ratio</li> <li>○ Heart - CBP – Control Blood Pressure</li> <li>○ Diabetes – CDC &gt;9 – HbA1c to below 9</li> </ul> </li> <li>• Maternal/Women’s Health:               <ul style="list-style-type: none"> <li>○ Perinatal Care</li> <li>○ PPC Prenatal Care visit / PPC-pre</li> <li>○ PPC Postpartum Care visit / PPC-post</li> </ul> </li> <li>• Member Engagement and Experience:               <ul style="list-style-type: none"> <li>○ Initial Health Appointment (IHA): Improve New Member completion IHA under 120 days.</li> <li>○ CAHPs Improvement: Improve CAHPs survey results - Access to Care; Customer Service; Doctor Communication; Care Coordination; Overall Rating Measures.</li> </ul> </li> <li>• Hospital Quality/ Patient Safety:               <ul style="list-style-type: none"> <li>○ Provide appropriate safe care, avoiding preventable harm.</li> </ul> </li> </ul>	

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	<ul style="list-style-type: none"> <li>○ Hospital Reportable Data Scorecard</li> <li>● Pediatric:               <ul style="list-style-type: none"> <li>○ Well Child Visits –MCAS- (W30 -6+)</li> <li>○ Childhood Immunization –MCAS- (CIS 10; W30): Immunizations for Children under 2 years old; Well Child Visits; utilizing SWOT Methodology</li> </ul> </li> <li>● Preventive Health:               <ul style="list-style-type: none"> <li>○ Screening - (MCAS): Breast Cancer Screening; Cervical Cancer Screening; and CHL - Chlamydia Screening</li> <li>○ Childhood Blood Lead Screening: LSC – Blood Lead Screening Children including Anticipatory Guidance</li> </ul> </li> <li>● Provider Engagement:               <ul style="list-style-type: none"> <li>○ Quality EDGE - Evaluating Data to Generate Excellence: Increase MCAS year over year by 10%.</li> <li>○ Provider Access, Availability, and Service: Improve Provider Appointment Access Survey results and Provider After-Hours Availability Survey results.</li> </ul> </li> </ul> <p><i>Kerry Hydash joined meeting at 1:52 pm</i></p>	
<p><b>#7 Standing Reports</b></p> <ul style="list-style-type: none"> <li>● <b>Finance Reports</b> Daniel Maychen, CFO</li> </ul>	<p><b>Finance</b></p> <p><u>Financials as of January 31, 2023:</u></p> <p>Total current assets recorded were approximately \$241.9M; total current liabilities were approximately \$118.8M. Current ratio is approximately 2.04.</p> <p>Total equity as of January 31, 2023 was approximately \$133.1M which is approximately 816% above the minimum DMHC required TNE amount.</p> <p>Interest income actual recorded was approximately \$2.4M which is approximately \$2.2M more than budgeted primarily due to rates on the Plan’s money market</p>	<p><i><b>Motion: Standing Reports Approved</b></i></p> <p><i>13 – 0 – 0 – 3</i> <i>(Neves / Naz)</i></p> <p><i>A roll call was taken</i></p>

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<ul style="list-style-type: none"> <li> <b>Medical Management</b>                      P. Marabella, MD, CMO                 </li> </ul>	<p>funds being higher than projected. Premium capitation income actual recorded was approximately \$755.5M which is approximately \$48.2M more than budgeted primarily due to rates and enrollment being higher than projected.</p> <p>Total cost of medical care expense actual recorded is approximately \$622.3M which is approximately \$46.2M more than budgeted due to rates and enrollment being higher than projected. Admin service agreement fees expense actual recorded was approximately \$32M, which is approximately \$1.6M more than budgeted due to higher than budgeted enrollment. All other expense line items are below or close to what was budgeted.</p> <p>Net income recorded for the first seven months of FY 2023 was approximately \$5.2M which is approximately \$3.2M more than budgeted due to rates and enrollment being higher than budgeted, in addition interest income being approximately \$2.2M higher than originally projected. The \$3.2M MCO tax gain communicated during the February 2023 Commission meeting was to be recouped by DHCS in calendar year Q1 2023; however, per DHCS, the date of the MCO tax gain recoupment has now been revised to calendar year Q3 2023 (i.e., next fiscal year). As a result, to capture the MCO tax recoupment in the current fiscal year, the Plan booked an accrual for the MCO tax gain recoupment in the January 2023 financials, which is why net income has declined in comparison to previous financials presented.</p> <p><b>Medical Management</b></p> <p><u>Appeals and Grievances Dashboard</u></p> <p>Dr. Marabella presented the Appeals &amp; Grievances Dashboard through January 31, 2023.</p>	

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	<ul style="list-style-type: none"> <li>• The grievances received remained consistent with previous months.</li> <li>• Quality of Service Grievances had a slight decrease compared to previous months.</li> <li>• Quality of Care Grievances remained consistent and most related to delay in PCP care.</li> <li>• Exempt Grievances had a significant decrease when compared to previous months. Transportation access showed improvement.</li> <li>• Appeals for the first month of 2023 remained consistent with previous months.</li> </ul> <p><u>Key Indicator Report</u></p> <p>Dr. Marabella presented the Key Indicator Report (KIR) through January 31, 2023.</p> <p>A summary was shared that provided the most recent data for Admissions, Bed Days, Average Length of Stay, and Readmissions through January 31, 2023, which showed numbers have remained steady compared to previous months. Membership continues to increase. Utilization remains steady.</p> <p>Turn-around times were at 100% compliance with standards. Case Management results have shown increased referrals and engagement and demonstrate positive outcomes in the areas of Perinatal CM, Integrated CM, Behavioral CM and Palliative CM. Transitional CM has drifted slightly.</p> <p><u>Credentialing Sub-Committee Quarterly Report</u></p> <p>The Credentialing Sub-Committee met on February 23, 2023. Routine credentialing and re-credentialing reports were reviewed for both delegated and non-delegated</p>	

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	<p>services. Reports covering Q3 2022 were reviewed for delegated entities, and Q4 2022 for Health Net and MHN.</p> <p>The 2023 Credentialing Sub-Committee annual policy and procedure review was completed. One policy was retired, one new policy was presented, and five policies were updated with minor or no changes. The policies were revised as follows:</p> <ul style="list-style-type: none"> <li>• New policy CR-109 Ongoing Monitoring of Sanctions-Complaints.</li> <li>• The Appeals Process policy was revised in order to add a health and safety precautions statement to assure the comfort levels of all fair hearing participants.</li> <li>• Policy CR-190 Medi-Cal Termination Appeals Process was retired and combined into CR-140.</li> </ul> <p>The policies and procedures were approved.</p> <p>There was one (1) Adverse Action Case. A determination was made; and the Credentialing Committee approved this determination</p> <p><u>Peer Review Sub-Committee Quarterly Report</u></p> <p>The Peer Review Sub-Committee met on February 23, 2023. The county-specific Peer Review Sub-Committee Summary Reports for Q4 2022 were reviewed for approval. There were no significant cases to report.</p> <p>The 2023 Peer Review Sub-Committee Policies and Procedures were reviewed. PR-001 policy was reviewed without changes. PR-100 Peer Review Committee Policy had significant changes including: changed "Investigations Team Data Analyst" to "Investigations Team" and "Data Analyst" to "Associate". Special Handle and Low-</p>	



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<ul style="list-style-type: none"> <li>• <b>Executive Report</b> J. Nkansah, CEO</li> </ul>	<p>Level reviews were modified from quarterly to semi-annual. Updated Attachment A "Peer Review Case Coding 2023". The policies were approved.</p> <p>The Q4 2022 Peer Count Report was presented with a total of three (3) cases reviewed. There were two (2) cases closed and cleared. There were no cases pending closure for Corrective Action Plan compliance or outstanding CAPs. There were no cases pended for further information.</p> <p>Ongoing monitoring and reporting will continue.</p> <p>The Quality Improvement/Utilization Management Committee Charter was presented to the Commission, with edits, for approval.</p> <p><b>Executive Report</b></p> <p>Enrollment through January 31, 2023 continues to increase due to the public health emergency (PHE); total enrollment is currently at 421,006. Management has been reviewing 2023 numbers in relation to the DHCS aligned enrollment policy. The policy aims to ensure that if a dual eligible beneficiary selects a Medicare plan that their Medi-Cal plan is also aligned with Medicare. CVH does not have a Medicare product and currently relies on an affiliation relationship with Health Net's Medicare product.</p> <p>There are no significant issues or concerns to report as it pertains to IT Communications and Systems.</p> <p>No significant issues or concerns with regard to the Member Call Center or CVH Website. It was confirmed that the number of users to the website was in fact 27,000; not 12,000 as initially reported.</p>	

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	<p>No significant issues or updates for Provider Network and Engagement Activities.</p> <p>For Claims Processing and Provider Disputes, Q3 2022 numbers are now available from the Plan's Administrator, Health Net, related to Acupuncture, Vision and Transportation. The Plan learned from additional discussions that Health Net is overseeing vendors with a separate team than their delegated PPGs so because of this they have separated reporting, which caused a delay in CVH's receipt initially.</p>	
<b>#8 Final Comments from Commission Members and Staff</b>	Sara Bosse, Madera County Public Health Department, requested information on data points with regards to Madera County members in reference to the closure of Madera Community Hospital.	
<b>#9 Announcements</b>	Mr. Harold Nikoghosian has resigned his position from the Commission and Finance Committee. The Plan is actively looking for his replacement for the Kings County At-Large position.	
<b>#10 Public Comment</b>	None.	
<b>#11 Adjourn</b>	<p>The meeting was adjourned at 2:32 pm.</p> <p>The next Commission meeting is scheduled for May 18, 2023 in Fresno County.</p>	

Submitted this Day: May 18 2023

Submitted by: Cheryl Hurley  
 Cheryl Hurley  
 Clerk to the Commission