

Fresno-Kings-Madera
Regional Health Authority

**CalViva Health
Commission**
Meeting Minutes
May 16, 2019

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		Brian Smullin , 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 Operations 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 1:30 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>

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AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
Cheryl Hurley, Clerk to the Commission		
<p>#3 Chair and Co-Chair Nominations for RY 2020</p> <p>Action David Hodge, MD, Chairman</p>	<p>The Commissioners nominated and subsequently re-elected David Hodge, MD as chair and Supervisor Joe Neves as Co-Chair to serve during Fiscal Year 2019.</p>	<p>Motion: <i>Nominate and Approve Chair:</i> 11 – 0 – 0 – 6 (Naz / Nikoghosian)</p> <p><i>Nominate and Approve Co-Chair:</i> 11 – 0 – 0 – 6 (Nikoghosian / Gruen)</p>
<p>#4 Consent Agenda</p> <ul style="list-style-type: none"> a) Commission Minutes 3/21/19 b) Finance Committee Minutes 2/21/19 c) QI/UM Committee Minutes 2/21/19 <p>Action David Hodge, MD, Chairman</p>	<p>All consent items were presented and accepted as read.</p>	<p>Motion: <i>Approve Consent Agenda</i> 11 – 0 – 0 – 6</p> <p>(Neves / Naz)</p>
<p>#5 Closed Session</p> <ul style="list-style-type: none"> A. Government Code section 59454.5 – Report Involving Trade Secret – Discussion of service, program, or facility B. Government Code 54957(b)(1) – Public Employee Appointment, 	<p>Jason Epperson, General Counsel, reported out of Closed Session. Commissioners discussed those items agendized for closed session.</p> <p>Regarding #5.A, Government Code section 59454.5 – Report Involving Trade Secret – Discussion of service, program, or facility, direction was given to staff.</p>	<p>Motion for item 5.B: <i>Approve CEO Annual Review</i> 12 – 0 – 0 – 5</p> <p>(Rogers / Naz)</p>

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<p>Employment, Evaluation, or Discipline – CEO Annual Review</p>	<p>Regarding item #5.B, involving Public Employee Appointment, Employment, Evaluation, or Discipline; Chief Executive Officer, per Government Code Section 54957(b)(1). A motion was made and passed unanimously that CEO Greg Hund be given a 5% increase to his base salary effective on his employment anniversary date.</p> <p>Closed Session concluded at 1:45 pm.</p> <p><i>Supervisor Quintero arrived at 1:37 pm</i></p>	
<p>#6 Committee Appointments for FY 2020</p> <p>Information David Hodge, MD, Chairman</p>	<p>No changes in Commission members were made for FY 2020 to the following committees, as described in BL 19-008:</p> <ul style="list-style-type: none"> ➤ Finance Committee ➤ Quality Improvement/Utilization Management Committee ➤ Credentialing Sub-Committee ➤ Peer Review Sub-Committee ➤ Public Policy Committee 	<p>No Motion</p>
<p>#7 Fiscal Year 2020 Proposed Budget</p> <p>Action David Hodge, MD, Chairman</p>	<p>D. Maychen presented the proposed budget for Fiscal Year 2020. The budget was reviewed and approved by the Finance Committee in March 2019.</p> <p>Overall, the budget reflects consistency in enrollment in comparison to FY 2019, with a slight increase to account for the addition of undocumented immigrants ages 19-26. MC revenue is projected to be \$1.131B, which is \$10.7M less than budgeted for FY 2019 primarily due to rates paid by DHCS decreasing by 1%. Interest income is increasing by approximately 565% due to moving excess funds into short term</p>	<p>Motion: <i>Approve FY 2020 Proposed Budget</i> <i>12 – 0 – 0 – 5</i></p> <p><i>(Neves / Frye)</i></p>

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	<p>investment accounts, and implementation of a daily cash sweep investment account. Community Support Grant expense is projected to decrease by approximately \$350K. Marketing expense is projected to increase by approximately \$250K due to additional marketing activities and community-based sponsorships. MCO tax was not included in the State budget proposals by the Governor; however, it still is on the negotiating table; therefore, the MCO tax is included in the FY 2020 budget due to the fact of losing money due to paying more in taxes than receiving on the revenue side. Projected net income for FY 2020 is approximately \$7.5M.</p>	
<p>#8 Community Support Program – Ad-Hoc Committee Selection</p> <p>Action David Hodge, MD, Chairman</p>	<p>A new ad-hoc committee will be appointed by Commission Chair prior to July meeting. One Commissioner volunteered; two additional Commissioners will be appointed.</p>	<p><i>No Motion taken</i></p>
<p>#9 Cultural and Linguistics Program Description and Work Plan Evaluation</p> <p>Action David Hodge, MD, Chairman</p>	<p>Dr. Marabella presented the Cultural and Linguistic 2018 Work Plan Annual Evaluation, the 2019 Program Description and the 2019 Work Plan.</p> <p>For 2018, 100% of the Work Plan activities were completed in all four areas.</p> <ul style="list-style-type: none"> • Language Assistance Services: The Non-Discrimination Notice was updated and implemented. • Compliance Monitoring: Investigated and completed follow up on 32 grievances in 2018; and assisted with coordination of four Public Policy Committee meetings. • Communication, Training and Education: Trained staff on new culture, language and perceived discrimination coding structure for 	<p><i>See #10 for Motion</i></p>

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	<p>Appeal & Grievance cases; and conducted seven LAP trainings for new Call Center staff.</p> <ul style="list-style-type: none"> • Health Literacy and Cultural Competency & Health Equity: Conducted training for clinic staff on cultural sensitivity and postpartum cultural practices and how to complete the cultural section of the revised OB form; and partnered with Health Education team to form the Mendota Community Advisory Group. <p>The 2019 Program Description is consistent with 2018, in addition has incorporated the following:</p> <ul style="list-style-type: none"> • Communication for LAP: Added provider relations representative. • C & L Consulting Services: Modified gender preference to sexual orientation. • Cultural Competency Education for Providers: Modified gender preference to sexual orientation and added update that Cultural Competency training is documented in the provider directory. • Health Equity Interventions: Included Medical Directors' support as part of the disparity reduction efforts. • Appendix 1: Updated staff roles and responsibilities and updated Health Net name to Health Net LLC. <p>The 2019 Work Plan activities will continue with an emphasis in the following areas:</p> <ul style="list-style-type: none"> • Enhancing LAP reporting activities inclusive of GEOAccess mapping, timely access reporting for language services and bilingual staff certification oversight. • Expand training and consulting services for contracted provider and staff inclusive of new disparity reduction efforts for postpartum care and breast cancer screening. 	

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	<p><i>David Pomaville stepped out at 1:59 pm; returned at 2:03 pm</i></p>	
<p>#10 Health Education Program Description and Work Plan Evaluation</p> <p>Action David Hodge, MD, Chairman</p>	<p>Dr. Marabella presented the Health Education 2018 Work Plan Annual Evaluation, the 2019 Program Description, and the 2019 Work Plan.</p> <p>Overall, 11 of the 14 Program Initiatives met or exceeded the year-end goal. Three initiatives partially met goal. Some sub-elements were not completed.</p> <p>The seven initiatives that were fully met are:</p> <ol style="list-style-type: none"> 1) Chronic Disease Ed 2) Community Partnerships 3) Digital Health Education Program 4) Health Equity Projects 5) HEDIS® Incentive Program 6) Immunization Initiative 7) Member Engagement 8) Member Newsletter 9) Promotores Health Network 10) Compliance: Oversight and Reporting 11) Materials Update, Development & Inventory <p>The three initiatives partially met were:</p> <ol style="list-style-type: none"> 1) Obesity Prevention: Members & Community 2) Pregnancy Matters 3) Smoking Cessation Program <p>Follow up is planned for these areas in 2019.</p>	<p>Motion: <i>Approve Cultural & Linguistics 2018 Executive Summary and Annual Evaluation, 2019 Change Summary and Program Description, and 2019 Executive Summary and Work Plan Summary; and the Health Education Executive Summary, 2018 Annual Evaluation, 2019 Change Summary and Program Description, and 2019 Work Plan.</i></p> <p>11 – 0 – 0 – 6</p> <p>(Naz / Cardona)</p>

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	<p>Changes to the 2019 Program Description include:</p> <ol style="list-style-type: none"> 1) Programs & Resources: Added diabetes prevention 2) Programs & Services: Updated to reflect new weight management and pregnancy programs. Removed recorded/support services no longer available and added Health Ed Resource Section. 3) Group Needs Assessment (GNA): Added updated GNA findings incorporated into annual work plan. 4) Members: Removed Breastfeeding & Nutrition Support Line. 5) Providers: Added Practice Transformation to Provider Relations Department & deleted Overweight Toolkits for providers. 6) CalViva Health and Health Net Staff: updated. 7) Standards & Guidelines: updated terms used to “Counseling” and modified description. 8) Leadership team/Incorporating Health Ed/Strategies: Updated titles and added Practice Transformation and PPGs. 9) Program Evaluation: Updated process to include internal monitoring and evaluation and reference to APLs. Updated reference to GNA to indicate changes are monitored annually. <p>The 2019 Work Plan initiatives will continue with the following enhancements:</p> <ol style="list-style-type: none"> 1) Diabetes Prevention Program – New benefit. 2) Asthma, behavioral health and geomapping capabilities added as new initiatives. 	
<p>#11 Standing Reports</p> <ul style="list-style-type: none"> • Finance Report Daniel Maychen, CFO 	<p><u>Finance</u></p> <p>Financial Statements as of March 31, 2019:</p>	<p>Motion: <i>Approve Standing Reports</i></p> <p>11 – 0 – 0 – 6</p>

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<ul style="list-style-type: none"> • Compliance M.B. Corrado, CCO 	<p>Total current assets were approximately \$452M; total current liabilities were approximately \$395.8M. Current ratio is 1.14. TNE as of March 31, 2019 was approximately \$66.8M, which is approximately 505% above the minimum DMHC required TNE amount.</p> <p>Premium capitation actual income was approximately \$879.9M which is \$23.6M above budgeted amounts primarily due to enrollment and rates being higher than projected. For those same reasons, medical costs and admin service fees expense are higher than budgeted.</p> <p>All other expense items are in line or below what was budgeted. Total net income for the first nine months of the fiscal year is approximately \$7M which is approximately \$1.8M more than budgeted.</p> <p><u>Compliance</u></p> <p>Mary Beth Corrado presented the Compliance Report.</p> <p>Since the 3/21/19 Commission Report, two new potential FWA case MC609s were submitted. One case involved a high prescriber of opioid cocktails. The second case involved a mid-level practitioner with billing and upcoding issues; DHCS has advised after their review they have closed this case with no further action. CVH was also informed that CA DOJ has opened a case on one of the January cases related to billing issues and possible Stark Law violations.</p> <p>Oversight activity and monthly meetings with Health Net continue.</p>	<p>(Frye / Neves)</p>

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<ul style="list-style-type: none"> • Operations J. Nkansah, COO 	<p>On March 27, 2019, CVH received a letter from DHCS approving the CAP for the 2018 DHCS Medical Audit and have closed it.</p> <p>On March 19, 2019, DHCS sent a letter closing the encounter data CAP.</p> <p>Information regarding the Health Homes Program has been updated and the decision to withdrawal from the program was communicated to all Commissioners via email from the CEO as explaining the reasoning behind the withdrawal. In addition, the State has also been notified.</p> <p>The Public Policy will be meeting June 12, 2019 in Kings County.</p> <p>A summary of the 2018 CalViva Health Oversight Audit Results was reported out to the Commission. Call Center/Member Services Audit, Claims Audit, and Provider Disputes Audit were the areas where CAPs were issued. Appeals and Grievance, Credentialing, Provider Network, and Utilization Management areas were given discretionary improvement recommendations.</p> <p><u>Operations Report</u></p> <p>Jeff Nkansah presented the Operations Report.</p> <p>Currently, there are no issues, concerns, or items of significance as it relates to IT Communications and Systems.</p> <p>For Privacy and Security, a draft of the updated Risk Analysis Report is on schedule to be delivered to a CVH internal committee; once approved, results will be formalized and reported out to Commission at</p>	

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	<p>a future date. The update of the annual mailing of Privacy Practices is pending receipt of model handbook from DHCS. Annual mailing will be completed once this has been received. One new high-risk case was reported since the last Commission meeting, with one member being impacted. This case was not a health plan error, nor an administrative error. The actual source occurred from a State agency.</p> <p>With regard to the Member Call Center, numbers for transportation continue to increase due to heightened interest in transportation benefits. All other areas of the Call Center did meet goal.</p> <p>Additional feedback regarding the CVH website and a member portal was acquired from the CVH Public Policy Committee, a local Promotores group in Madera county, and also the Local Health Plan Collaborative COO group. Due to information received from all groups, and the low engagement rate, CVH will look to more of a cosmetic revamp as opposed to creating a member portal.</p> <p>Activities related to Provider Network and Provider Relations are as of March 2019. The Plan is beginning the process to notify providers who have not been screened and enrolled that termination proceedings will begin. As of May 2019, if proof of screening and enrollment is not received, termination from the network will occur.</p> <p>With regard to Claims Processing and Provider Disputes activity, there is nothing significant to report at this time.</p>	

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<ul style="list-style-type: none"> • Medical Management P. Marabella, MD, CMO 	<p><u>Medical Management</u></p> <p>Appeals and Grievances Dashboard</p> <p>Dr. Marabella presented the Appeals & Grievances Dashboard through Q1 2019.</p> <p>Grievance & Appeals Data:</p> <ul style="list-style-type: none"> • A total of 298 grievances were received through March 31, 2019. • Total grievances resolved for Q1 2019 was 300, compared to 183 in Q1 of 2018 which depicts that grievances have increased. • Majority of grievances were Quality of Service with respect to Access, Administrative, Interpersonal, and Transportation. • Exempt grievances for Q1 2019 were relatively low compared Q1 2018. • The number of appeals received for Q1 2019 was 154, compared to 136 in Q1 2018. • Total number of appeals resolved for Q1 2019 was 146, compared to 116 in Q1 of 2018. The majority of increase fell in the areas of DME, Advanced Imaging, and Surgery. <p>Key Indicator Report</p> <p>Dr. Marabella presented the Key Indicator Report through Q1 2019.</p> <ul style="list-style-type: none"> • Membership for TANF and SPD slightly increased in Q1 2019 compared to Q1 2018. Membership for MCE in Q1 2019 decreased from Q1 2018. 	

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	<ul style="list-style-type: none"> • Admits and bed days for TANF were increased in Q1 2019 as they were in Q1 2018 possibly due to increased respiratory illness. • Case Management data show that members enrolled in these programs had fewer Admissions and Readmission. • Emergency Department (ED) Utilization also shows that after Case Management Enrollment, ED claims had a significant decrease in numbers. • Perinatal Case Management shows an improvement for prenatal visits and postpartum visits when members are enrolled in Case Management. <p>QI/UM Quarterly Report</p> <p>Dr. Marabella provided the QI/UM Qtr. 1, 2019 update. Two QI/UM meetings were held in Quarter 1; one in February and one in March.</p> <p>The following guiding documents were approved:</p> <ol style="list-style-type: none"> 1. QI/UM Committee Charter 2019 2. 2019 Quality Improvement Program Description 3. 2019 Quality Improvement Work Plan 4. 2019 Utilization Management Program Description 5. 2019 Case Management Program Description 6. 2019 Utilization Management/Case Management Work Plan <p>In addition, the Pharmacy Formulary & Provider Updates were also approved at these meetings.</p> <p>The following Quality Improvement Reports were reviewed: Appeals and Grievances Dashboard for January 2019, MHN Performance Indicator Report, and PM 160 Reporting.</p>	

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	<p>The Utilization Management & Case Management reports reviewed included the Key Indicator Report, Utilization Management Concurrent Review & Inter-rater Reliability Reports, and Delegated Specialty Referrals Reports.</p> <p>The quarterly Pharmacy reports were reviewed covering Operations Metrics, Top Medication Prior Authorization Requests and quarterly Formulary Changes. All fourth quarter pharmacy PA metrics were within 5% of standard. Inter-rater Reliability results met 90%. Annual Quality Assurance Report demonstrated that cumulative results met standard for all quarters.</p> <p>HEDIS® Activity:</p> <ul style="list-style-type: none"> • Q1 HEDIS® related activities focused on the following: <ul style="list-style-type: none"> ○ Finalized and submitted the 2019 HEDIS® Roadmap by 1/31/19. ○ HEDIS® data gathering from clinics and providers with final submission to DHCS and HSAG mid-June 2019 ○ Continue improvement activities as required and described in the DHCS Correction Action Plan (CAP) for the Minimum Performance Level (MPL) for three measures in Madera County. ○ <p>Efforts also continue with the two Performance Improvement Projects (PIPs) on Childhood immunizations and Postpartum visits. These PIPs are scheduled to close June 30th, 2019.</p>	

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<ul style="list-style-type: none"> Executive Report G. Hund, CEO 	<p><u>Executive Report</u></p> <p>There have been no significant changes in Membership through April 2019. The market share for CVH has remained consistent.</p>	
<p>#12 Final Comments from Commission Members and Staff</p>	<p>Commissioner Quintero announced Dr. Hodge and Dr. Cardona were reappointed by the Fresno County Board of Supervisors. An official announcement will be included on the agenda for the July Commission meeting.</p>	
<p>#13 Announcements</p>	<p>None.</p>	
<p>#14 Public Comment</p>	<p>None.</p>	
<p>#15 Adjourn</p>	<p>The meeting was adjourned at 2:57 pm The next Commission meeting is scheduled for July 18, 2019 in Fresno County.</p>	

Submitted this Day: 7-18-19

Submitted by: Cheryl Hurley
Cheryl Hurley
Clerk to the Commission