

Fresno-Kings-Madera  
Regional Health Authority

**CalViva Health  
Commission  
Meeting Minutes**  
July 18, 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>

Commission Meeting Minutes

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
Cheryl Hurley, Clerk to the Commission		
<p><b>#3 Consent Agenda</b></p> <ul style="list-style-type: none"> <li>a) Commission Minutes 5/16/19</li> <li>b) Finance Committee Minutes 3/21/19</li> <li>c) QI/UM Committee Minutes 3/21/19</li> <li>d) Public Policy Committee Minutes 3/6/19</li> <li>e) Finance Committee Charter</li> <li>f) Credentialing Committee Charter</li> <li>g) Peer Review Committee Charter</li> <li>h) QIUM Committee Charter</li> <li>i) Public Policy Committee Charter</li> <li>j) Compliance Report</li> </ul> <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 15 – 0 – 0 – 2</p> <p>(Neves / Rogers)</p>
<p><b>#4 Closed Session</b></p> <ul style="list-style-type: none"> <li>A. <b>Government Code section 59454.5 – Report Involving Trade Secret</b> – Discussion of service, program, or facility</li> </ul>	<p>Jason Epperson, General Counsel, reported out of Closed Session. Commissioners discussed those items agendized for closed session. Direction was given to staff.</p> <p>Closed Session concluded at 1:58 pm.</p>	<p><b>Motion:</b></p>

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<p><b>#5 Legal Services</b></p> <p>Action David Hodge, MD, Chairman</p>	<p>Jason Epperson announced that Prentice Long &amp; Epperson has now transitioned into Epperson Law Group, PC due to David Prentice moving into semi-retirement. The affiliation between Jason Epperson and David Prentice will still exist. Everything stated in the new ASA is exactly the same as previous ASA under Prentice Long &amp; Epperson, with the exception of the change of address and name of organization.</p>	<p><b>Motion:</b> Approve Attorney Services Agreement 15 – 0 – 0 – 2  (Neves / Nikoghosian)</p>
<p><b>#6 Community Support Program</b></p> <p>Action David Hodge, MD, Chairman</p>	<p>Greg Hund provided detailed information on recommended funding allocations based off the previously approved budget for the FY 2020 Community Support Program. The grantees include:</p> <ul style="list-style-type: none"> <li>• Training for Parlier FP Residency UHC</li> <li>• Providers: <ul style="list-style-type: none"> <li>○ Funding for 12 PCPs/Extenders</li> <li>○ Year End Provider Incentives</li> <li>○ Annual Provider Dinner</li> </ul> </li> <li>• Community Based Organizations: <ul style="list-style-type: none"> <li>○ Every Neighborhood Partnership</li> <li>○ Tzu Chi-See 2 Succeed Vision Program</li> <li>○ Habitat for Humanity Acts of Kindness Madera County</li> <li>○ West Fresno Green Space (Sports Complex)</li> </ul> </li> <li>• Fresno Glow Program which is an extension of the Preterm Birth Initiative.</li> </ul> <p><i>Dr. Naz stepped out at 2:02 pm; returned at 2:10 pm</i></p>	<p><b>Motion:</b> Approve Community Support Funding Recommendations FY 2020  15 – 0 – 0 – 2  (Nikoghosian / Quintero)</p>
<p><b>#7 Review of Fiscal Year End 2019 Goals</b></p>	<p>Greg Hund reported the results for fiscal year end 2019 goals. All targeted goals were met.</p>	



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Information David Hodge, MD, Chairman		
<b>#8 Goals &amp; Objective for Fiscal Year 2020</b>  Action David Hodge, MD, Chairman	Greg Hund presented the goals and objectives for FY 2020.	<b>Motion: Approve FY 2020 Goals &amp; Objectives</b>  15 – 0 – 0 – 2 (Neves / Frye)
<b>#9 Standing Reports</b>  <ul style="list-style-type: none"> <li>• <b>Finance Report</b>                              Daniel Maychen, CFO                         </li> </ul>	<p><b><u>Finance</u></b></p> <p><b>Financial Statements as of May 31, 2019:</b></p> <p>Total current assets were approximately \$179.8M; total current liabilities were approximately \$121M. Current ratio is 1.49. TNE as of May 31, 2019 was approximately \$69.5M, which is approximately 523% above the minimum DMHC required TNE amount.</p> <p>Premium capitation actual income was approximately \$1.079B which is \$32.2M 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, with the exception of License expense; this is the fee assessed by DMHC on Health Plans to fund their oversight operations. For the first 11 months of FY 2019, total net income is approximately \$9.6M which is approximately \$3.3M more than budgeted.</p>	<b>Motion: Approve Standing Reports</b>  12 – 0 – 0 – 5  (Naz / Gruen)

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<ul style="list-style-type: none"> <li><b>Medical Management</b> P. Marabella, MD, CMO</li> </ul>	<p><b><u>Medical Management</u></b></p> <p><b>Appeals and Grievances Dashboard</b></p> <p>Dr. Marabella presented the Appeals &amp; Grievances Dashboard through May 2019.</p> <p><b>Grievance &amp; Appeals Data:</b></p> <ul style="list-style-type: none"> <li>The number of grievances received through May 31, 2019 shows an increase as compared to end of 2018. Total cases resolved shows similar increase</li> <li>Majority of increase in grievances were Quality of Service with noted changes in Access, Administrative and Transportation.</li> <li>Quality of Care Grievances although similar to end of 2018 show slight increases in the areas of PCP Care and Specialist Care.</li> <li>Exempt grievances for YTD 2019 have decreased from YTD 2018 but there are still some issues with PCP assignment and transportation.</li> <li>The number of appeals received for YTD 2019 compared with YTD 2018; has increased slightly. The majority of increase was in the areas of Advanced Imaging and Pharmacy.</li> </ul> <p><b>Key Indicator Report</b></p> <p>Dr. Marabella presented the Key Indicator Report through May 31, 2019.</p>	

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	<ul style="list-style-type: none"> <li>• Acute Admits and bed days for Expansion population have a significant increase; whereas, the number for Family have remained comparable with previous months.</li> <li>• Readmission rates for SPD have significantly increased compared with previous months.</li> <li>• Prior Authorization TAT data show shows a decline in compliance rate; however, the data is a sample and not a full universe. There is further investigation into root cause with increased submissions affecting compliance</li> <li>• Perinatal Case Management outreach and engagement has significantly improved.</li> <li>• Overall, all Case Management programs have shown improvement in outreach and engagement.</li> </ul> <p><b>QI/UM Quarterly Report</b></p> <p>Dr. Marabella provided the QI/UM Qtr. 2, 2019 update. One QI/UM meeting was held in Quarter 2 in May.</p> <p>The following guiding documents were approved:</p> <ol style="list-style-type: none"> <li>1. 2018 Culture &amp; Linguistics (C &amp; L) End of Year Evaluation</li> <li>2. 2019 C &amp; L Program Description</li> <li>3. 2019 C &amp; L Work Plan</li> <li>4. 2018 Health Education End of Year Evaluation</li> <li>5. 2019 Health Education Program Description</li> <li>6. 2019 Health Education Work Plan</li> </ol> <p>In addition, the Pharmacy Formulary &amp; Provider Updates was also approved at this meeting.</p>	

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	<p>The following Quality Improvement Reports were reviewed: Appeals and Grievances Dashboard for March 2019, Emergency Drug Report, Potential Quality Issues Report &amp; Corrective Action Plan, and QI Summaries for Postpartum Care, Diabetes Care, Breast Cancer Screening and Childhood Immunizations.</p> <p>The Utilization Management &amp; Case Management reports reviewed included the Key Indicator Report, Utilization Management Concurrent Review Report, Case Management, TCM, MemberConnections, Behavioral Health Case Management &amp; Palliative Care, Inter-rater Reliability Results for Physicians and Non-physicians, and Pharmacy Reports.</p> <p>HEDIS® Activity:</p> <ul style="list-style-type: none"> <li>• Q2 HEDIS® related activities focused on the following: <ul style="list-style-type: none"> <li>○ HEDIS® data submission to DHCS and HSAG for External Accountability Set measures.</li> <li>○ 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.</li> <li>○ Continued activities on RY2019 Quality Projects.</li> </ul> </li> </ul> <p>Efforts also continue with the two Performance Improvement Projects (PIPs) on Childhood immunizations and Postpartum visits. These PIPs are scheduled to close June 30<sup>th</sup>, 2019.</p> <p><b>Credentialing Sub-Committee Quarterly Report</b></p>	



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	<p>In Quarter 2 the Credentialing Sub-Committee met on May 16, 2019. Routine credentialing and re-credentialing reports were reviewed for both delegated and non-delegated services. Reports covering Q4 2018 were reviewed for delegated entities and Q1 2019 report was reviewed for Health Net. Both the Q4 2018 and the Q1 2019 reports were reviewed for MHN. The Credentialing Sub-Committee reviewed and approved the 2019 Charter without changes. The Q1 2019 Credentialing report was reviewed with one case that resulted in the completion of a Fair Hearing. Other County-specific Credentialing Sub-Committee reports were reviewed and approved. No other significant cases were identified on these reports.</p> <p><b>Peer Review Sub-Committee Quarterly Report</b></p> <p>The Peer Review Sub-Committee met on May 16, 2019. The county-specific Peer Review Sub-Committee Summary Reports for Q1 2019 were reviewed for approval. There were no significant cases to report. The 2019 Peer Review Sub-Committee Charter was reviewed and approved without changes.</p> <p>The Q1 2019 Peer Count Report was presented with twelve (12) cases reviewed. Two cases were closed and cleared. One case was pending closure for Corrective Action Plan compliance. Seven cases pending for further information and two cases with outstanding CAPs. Follow up will be initiated to obtain additional information on tabled case and ongoing monitoring and reporting will continue.</p> <p><i>Dr. Naz stepped out at 2:19 pm; returned at 2:20 pm</i></p>	



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<ul style="list-style-type: none"> <li><b>Operations</b> J. Nkansah, COO</li> </ul>	<p><b><u>Operations Report</u></b></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, the Risk Analysis Report was completed by the CVH internal Compliance Committee in June 2019. The risk rating was upgraded to medium. The Active Business Associate Agreements decreased from seven to six. One new low-risk incident was reported since the last Commission meeting. Overall, the Privacy and Security cases remain low and not an area of concern at this point.</p> <p>With regard to the Member Call Center, there is no data to report for Q2 at this time.</p> <p>Activities related to Provider Network and Provider Relations are as of May 2019. The Plan continues to monitor the policy and outcome of the screening and enrollment requirements by DHCS. The Plan is actively enforcing new provider training, and screening and enrollment requirements. Results of the Network Adequacy filing with DMHC is currently pending. Preliminary results from the Plan’s Network Certification were received from DHCS. The Plan did pass the provider member ratios and the mandatory provider type categories; a partial approval was given for one zip code in Madera County related to hospital time and distance standards.</p>	

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<ul style="list-style-type: none"> <li>• <b>Executive Report</b> G. Hund, CEO</li> </ul>	<p>With regard to Claims Processing and Provider Disputes activity, Q1 2019 data is available for acupuncture, vision, transportation and the PPGs. Claims processing activity met goal for all areas, no deficiencies were disclosed. PPG 1 is no longer an active PPG in the CVH service area. For Provider Disputes activity, Behavioral Health metrics did not meet goal.</p> <p><b><u>Executive Report</u></b></p> <p>There have been no significant changes in Membership through June 2019. The market share for CVH continues to increase. Voluntary disenrollment numbers for Fresno County has shown a significant decrease.</p>	
<p><b>#10 Final Comments from Commission Members and Staff</b></p>		
<p><b>#11 Announcements</b></p>	<p>None.</p>	
<p><b>#12 Public Comment</b></p>	<p>None.</p>	
<p><b>#13 Adjourn</b></p>	<p>The meeting was adjourned at 2:48 pm The next Commission meeting is scheduled for September 19, 2019 in Fresno County.</p>	

Submitted this Day: 9-19-19

Submitted by: Cheryl Hurley  
Cheryl Hurley  
Clerk to the Commission