

Fresno-Kings-Madera  
Regional Health Authority

**CalViva Health  
Commission**  
**Meeting Minutes**  
July 20, 2017

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

<b>Commission Members</b>			
✓	<b>David Cardona, M.D.</b> , Fresno County At-large Appointee	✓	<b>Joe Neves</b> , Vice Chair, Kings County Board of Supervisors
✓	<b>Aldo De La Torre</b> , Community Medical Center Representative	✓	<b>Harold Nikoghosian</b> , Kings County At-large Appointee
	<b>Van Do-Reynoso</b> , Director, Madera Co. Dept. of Social Services	✓	<b>David Pomaville</b> , Director, Fresno County Dept. of Public Health
✓	<b>John Frye</b> , Commission At-large Appointee, Fresno	✓*	<b>Sal Quintero</b> , Fresno County Board of Supervisor
	<b>Soyla Griffin</b> , Fresno County At-large Appointee		<b>Stephen Ramirez</b> , Fresno County At-large Appointee
✓*	<b>Derrick Gruen</b> , Commission At-large Appointee, Kings County	✓	<b>David Rogers</b> , Madera County Board of Supervisors
✓	<b>Ed Hill</b> , Directory, Kings County Dept. of Public Health		<b>David Singh</b> , Valley Children's Hospital Appointee
✓	<b>David Hodge, M.D.</b> , Chair, Fresno County At-large Appointee		<b>Paulo Soares</b> , Commission At-large Appointee, Madera County
✓	<b>Aftab Naz</b> , Madera County At-large Appointee		
<b>Commission Staff</b>			
✓	<b>Gregory Hund</b> , Chief Executive Officer (CEO)	✓	<b>Amy Schneider, R.N.</b> , Director of Medical Management
✓	<b>William Gregor</b> , Chief Financial Officer (CFO)	✓	<b>Jeff Nkansah</b> , Director, Compliance and Privacy/Security
✓	<b>Patrick Marabella, M.D.</b> , Chief Medical Officer (CMO)	✓	<b>Cheryl Hurley</b> , Commission Clerk
✓	<b>Mary Beth Corrado</b> , Chief Compliance Officer (CCO)	✓	<b>Daniel Maychen</b> , Director of Finance & MIS
<b>General Counsel and Consultants</b>			
✓	<b>Jason Epperson</b> , 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 1:30 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>

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p><b>#3 Madera County At-Large Reappointment</b> Information David Hodge, MD, Chairman</p>	<p>Dr. Naz has been reappointed by the Madera County BOS for a three-year term.</p>	
<p><b>#4 Fresno County At-Large Appointment/Reappointment</b> Information David Hodge, MD, Chairman</p>	<p>No action from the Fresno County BOS has been taken; appointment/reappointment is pending.</p>	
<p><b>#5 Kings County, Director of Public Health Dept. Appointment</b> Information David Hodge, MD, Chairman</p>	<p>Mr. Ed Hill, Director of Kings County Public Health Department has been appointed to the Commission.</p>	
<p><b>#6 Closed Session</b>  A. Government Code section 54954.5 – Report Involving Trade Secret.</p>	<p>Jason Epperson, General Counsel, reported out of Closed Session. Regarding item #5.A, Government Code Section 54954.5, reporting Involving Trade Secret, Discussion of Service, Program or Facility. The report out is the relationship between CalViva Health and Kaiser will end August 31, 2017. Members will be transitioned to CalViva Health in network providers.</p> <p><i>Mr. Gruen arrived at 1:33 pm</i> <i>Supervisor Quintero arrived at 1:37 pm</i></p>	
<p><b>#7 Consent Agenda</b> a) Commission Minutes 5/18/17 b) Finance Committee Minutes 3/16/17 c) Public Policy Committee Minutes dated 3/1/17</p>	<p>All consent items were presented and accepted as read.</p>	<p><i>Motion: Approve Consent Agenda 12 – 0 – 0 – 5</i></p> <p><i>(Neves / Frye)</i></p>

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>d) QI/UM Committee Minutes 3/16/17</p> <p>e) Finance Committee Charter</p> <p>f) Credentialing Committee Charter</p> <p>g) Peer Review Committee Charter</p> <p>h) QIUM Committee Charter</p> <p>i) Public Policy Committee Charter</p> <p>j) Compliance Report</p> <p>Action David Hodge, MD, Chairman</p>		
<p><b>#8 Standing Reports</b></p> <ul style="list-style-type: none"> <li><b>Finance Report</b> William Gregor, CFO</li> </ul>	<p><b><u>Finance</u></b></p> <p><b>Financial Statements as of April 30, 2017:</b> Total current assets are \$155M; total current liabilities are approximately \$116M. Current ratio is 1.34. TNE as of May 31, 2017 was approximately \$50.5M, which is 354% of the minimum DMHC required TNE amount. We are on goal to achieve 400% of the DMHC required TNE amount.</p> <p>As of May 31, 2017, revenues are \$1.169B, which is ahead of budget due to rates being paid, higher than budgeted enrollment, and increase in income tax premiums received compared to what was budgeted. Capitation Medical Cost expense, Admin Service Agreement Fees expense, and taxes are all above budget also due to those same reasons. All other expenses are in line with current</p>	<p><b>Motion:</b> Approve Standing Reports</p> <p><i>12-0-0-5 ( Neves / Nikoshosian )</i></p>

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<ul style="list-style-type: none"> <li>• <b>Medical Management</b> P. Marabella, MD, CMO</li> </ul>	<p>budget. Net income through May 31, 2017 is \$12.2M which is approximately \$3.1M more than what was budgeted.</p> <p><b><u>Medical Management</u></b></p> <p><b>Appeals and Grievances Report</b> Dr. Marabella presented the Appeals and Grievances Dashboard through May 31, 2017.</p> <ul style="list-style-type: none"> <li>• The total number of Grievances decreased in Q2.</li> <li>• The compliance rates for Grievances remain good.</li> <li>• Exempt grievance numbers increased slightly in Q2 of 2017.</li> <li>• Appeals resolved were all Preservice; the highest volumes by type were DME and Pharmacy related.</li> <li>• The overall rate for Appeals compared to 2016 remains the same and the Grievance rate has increased slightly year-to-date.</li> </ul> <p><b>Key Indicator Report</b> Dr. Marabella presented the Key Indicator report.</p> <ul style="list-style-type: none"> <li>• Admit and Readmit numbers have remained consistent.</li> <li>• ER visits PTMPY has remained the same.</li> <li>• Utilization remains consistent.</li> </ul> <p><b>QI/UM Quarterly Report</b> Dr. Marabella provided the QI/UM Quarter 2 2017 update. One QI/UM meeting was held in Quarter 2, on May 18, 2017.</p>	

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	<p>The following guiding documents, and one general document, were approved at the May meeting:</p> <ul style="list-style-type: none"> <li>• 2016 Culture &amp; Linguistics (C &amp; L) Annual Workplan Evaluation</li> <li>• 2017 C &amp; L Program Description</li> <li>• 2017 C &amp; L Work Plan</li> <li>• 2016 Health Education (HE) Annual Workplan Evaluation</li> <li>• 2017 HE Program Description</li> <li>• 2017 HE Work Plan</li> <li>• Quality Improvement Policies &amp; Procedures</li> <li>• Pharmacy Provider Update Q1</li> </ul> <p>Some of the reports reviewed and approved included the following Quality Improvement Reports: Appeals and Grievances Dashboard &amp; Quarter 1 Member Report, Potential Quality Issues (PQI) Report, QI Summary Reports for Cervical Cancer Screening, Childhood Immunizations and the Postpartum Visit Quality Improvement Projects.</p> <p>The Utilization Management reports approved included the Key Indicator Report, the Concurrent Review Report, and the Case Management Report.</p> <p>Pharmacy reports were reviewed, which included Operations Metrics.</p> <p>In addition, HEDIS® Activity was reviewed and updated.</p> <p>Also reviewed was Access &amp; Availability, and Kaiser Reports. No significant compliance issues were identified.</p>	

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<ul style="list-style-type: none"> <li>• <b>Executive Report</b> G. Hund, CEO</li> </ul>	<p><b>Credentialing Sub-Committee Quarterly Report</b></p> <p>In Quarter 2 the Credentialing Sub-Committee met on May 18, 2017. Routine credentialing and re-credentialing reports were reviewed for both delegated and non-delegated entities. The Charter, Credentialing policies, and county specific reports were reviewed and approved. The Credentialing Oversight Audit was completed and required a corrective action plan (CAP) to address two opportunities for improvement.</p> <p><b>Peer Review Sub-Committee Quarterly Report</b></p> <p>The Peer Review Sub-Committee met on May 18, 2017. The Charter and Peer Review policies were reviewed and approved. The Peer Count Report was presented indicating that there were three cases closed and cleared. There were no cases with an outstanding corrective action plan. Five cases were pended for further information.</p> <p>No significant Quality of Care issues were identified. Follow up will be initiated to obtain additional information on tabled cases and ongoing monitoring and reporting will continue.</p> <p><b><u>Executive Report</u></b></p> <p>Membership has remained flat with the expectation of only small adjustments each month.</p> <p>The most recent update to the ACA was reported to the Commission.</p>	

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#9 Final Comments from Commission Members and Staff	None.	
#10 Announcements	None.	
#11 Public Comment	None.	
#12 Adjourn	<p>The meeting was adjourned at 2:12 pm</p> <p>The next Commission meeting is scheduled for September 21, 2017 in Fresno County.</p>	

Submitted this Day: September 21, 2017

Submitted by: Cheryl Hurley  
 Cheryl Hurley  
 Clerk to the Commission