

Fresno-Kings-Madera
Regional Health Authority

CalViva Health
QI/UM Committee
Meeting Minutes
October 18th, 2018

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
✓	Joel Ramirez, M.D., Camarena Health Madera County	✓	Kari Willis, Administrative Coordinator, Temporary
	Rajeev Verma, M.D., UCSF Fresno Medical Center		
	David Hodge, M.D., Fresno County At-large Appointee, Chair of RHA (Alternate)		
Guests/Speakers			
		✓	Justina Felix, Health Education

✓ = 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 10:35 am.	
#2 Approve Consent Agenda - Committee Minutes: September 20 th , 2018 - 2019 QIUM Meeting Schedule - Medical Policies Provider Update (Q2) - Pharmacy Provider Update (Q3) - Provider Preventable Conditions (Q2) - Preventive Screening Guidelines	The September QI/UM minutes were reviewed and highlights from the consent agenda items were discussed and approved. The full Formulary (RDL) was available for review at the meeting. The proposed 2019 QI/UM Meeting Schedule was reviewed with the Committee.	Motion: Approve Consent Agenda (Ramirez/Cardona) 4-0-0-3

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
- Pharmacy Formulary List (October) (Attachments A-F) Action Patrick Marabella, M.D Chair		
#3 QI Business Appeals & Grievances: - Dashboard (Attachment G) Action Patrick Marabella, M.D, Chair	The A & 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 2018. <ul style="list-style-type: none"> ➤ An increase is noted in the number of grievances received and resolved for August. Recent staff training may have resulted in improved identification and reporting of grievances which may have contributed to the increase. ➤ Additionally, there have been some PPG changes and transitions following the EHS closure which have also contributed to an increase in Exempt Grievances. These have not been serious issues, but they have been disruptive. ➤ Appeals have decreased in number for the month of August compared to previous months, however, year-to- date, appeals have increased this year compared to last. ➤ Cases related to Advanced Imaging have remained consistent. ➤ The Uphold/Overturn rates are at approximately 70%/30%. Continue to monitor monthly. 	Motion: Approve Appeals & Grievances Report - Dashboard (Zweifler/Ramirez) 4-0-0-3
#3 QI Business - MHN Performance Indicator Report for Behavioral Health Services (Attachment H) Action Patrick Marabella, M.D, Chair	The MHN Performance Indicator Report for Q2 2018 was presented. All 18 metrics met or exceeded their targets. <ul style="list-style-type: none"> ➤ Per committee request, a metric has been added to monitor the number of CalViva members that receive Mild to Moderate Behavioral Health Services through MHN on a quarterly basis. ➤ 1.7% of CVH total membership (362,722) had at least one claim during the quarter and therefore approximately 6,200 individual members received services. ➤ We will monitor this rate over time for trends. 	Motion: Approve MHN Performance Indicator Report for Behavioral Health Services (Cardona/Ramirez) 4-0-0-3
#3 QI Business - Public Programs Report (Attachment I) Action Patrick Marabella, M.D, Chair	Public Programs Report for Quarter 3 This report provides a summary of the relevant Public Health, Behavioral Health (BH) and Regional Center Activities, initiatives and updates for Fresno, Kings and Madera Counties. <ul style="list-style-type: none"> ➤ Fresno County has successfully contracted out their Psychiatry Services and these staffing updates have been shared. ➤ Fresno County Suicide Prevention Collaborative has released its Strategic Suicide Prevention Plan. 	- Motion: Approve Public Programs Report Q3 (Zweifler/Cardona) 4-0-0-3

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	<ul style="list-style-type: none"> ➤ Fresno County CCS plans to have a conference in 2019. ➤ On October 30th a Safe Sleep Practices for Infants Conference hosted by Maternal, Child and Adolescent Health will be held. ➤ Kings County Behavioral Health is contracted with Aspiranet to provide high-intensity wraparound services for children. ➤ Kings County Public Health reports that immunization rates are increasing as children head back to school. ➤ Madera County Behavioral Health is working on two Performance Improvement Plans (PIPs). One is clinical (PTSD diagnosis in children) and the other is administrative (texting reminder messages for appointments). ➤ Madera Public Health continues to focus on Sexually Transmitted Diseases, particularly syphilis and congenital syphilis. <p>Quarter 3 data for BH referrals, TB screening and CCS enrollment in Fresno, Kings and Madera counties were reviewed.</p>	
<p>#3 QI Business - C & L Language Assistance Program Mid-Year Report (Attachment J) Action Patrick Marabella, M.D, Chair</p>	<p>This report provides a summary of language service utilization by CalViva Health members for January 1 to June 30, 2018. This report includes Managed Health Network’s (MHN) Behavioral Health language utilization by CalViva Health members for the same reporting period.</p> <p>During the first six months of 2018:</p> <ul style="list-style-type: none"> ➤ Member Services representatives handled approximately 75,034 calls across all languages. ➤ 11,302 (15%) were handled in Spanish and Hmong languages. ➤ 2,718 interpreter requests were also fulfilled for CalViva Health members. The majority of interpreter services were fulfilled through telephonic interpretation (93%) and 4% were for in-person interpretation. ➤ The final 3% (75) were for sign language interpretation. ➤ MHN Member Services Department representatives handled a total of 2,420 calls across all languages and fulfilled a total of 49 interpreter requests. Of the 49 requests, 48 were fulfilled in-person and 1 was for sign language interpretation. <p>It was noted that during the reporting period there were seven (7) complaints identified with five interventions initiated. Two potential discrimination cases were also identified. Additionally, challenges with data capture were identified for MHN. C & L staff will be working with MHN staff during the second half of 2018 to address these issues.</p>	<p>Motion: Approve C & L Language Assistance Program Mid-Year Report</p> <p>(Ramirez/Cardona) 4-0-0-3</p>

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>#4 Cultural & Linguistics/Health Education</p> <p>- C&L Work Plan Mid-Year Evaluation & Executive Summary (Attachment K)</p> <p>Action</p> <p>Patrick Marabella, M.D, Chair</p>	<p>Dr. Marabella presented the 2018 Cultural & Linguistics Work Plan Mid-Year Evaluation and Executive Summary.</p> <p>The summary of activities completed during the first six months of 2018 consist of four areas:</p> <ul style="list-style-type: none"> • Language Assistance Services • Compliance Monitoring • Communication, Training and Education • Health Literacy, Cultural Competency and Health Equity <p>Some of the Activities Completed include:</p> <ol style="list-style-type: none"> 1. Non-Discrimination Notice updated and implemented on January 1, 2018. 2. Thirty-three (33) materials, including member newsletters reviewed for readability level, content and layout. 3. C & L related grievances reviewed with follow up completed when indicated. 4. Conducted training for A & G Coordinators focused on culture, language and perceived discrimination and how to code appropriately for these issues. 5. Language Assistance Program trainings held for new Call Center staff. 6. Health Disparity Training was provided for staff and Volume 2 of the Health Equity Newsletter was distributed to staff in January. <p>By June 30, 2018, all activities were either completed or are on target to be completed by the end of the year. CVH will continue to implement, monitor and track C & L related services and activities.</p>	<p>Motion: Approve C&L Work Plan Mid-Year Evaluation & Executive Summary</p> <p>(Ramirez/Zweifler)</p> <p>4-0-0-3</p>
<p>#4 Cultural & Linguistics/Health Education</p> <p>- Health Education Mid-Year Work Plan Evaluation & Executive Summary (Attachment L)</p> <p>Action</p> <p>Patrick Marabella, M.D, Chair</p>	<p>Dr. Marabella presented the 2018 Health Education Work Plan Mid-Year Evaluation and Executive Summary.</p> <p>Health Education activities are selected based upon the county-specific Group Needs Assessment. The two major areas of focus for 2018 include:</p> <ul style="list-style-type: none"> ➤ Health Ed Programs and Services ➤ Department Operations, Reporting and Oversight <p>Activity Status at the mid-year:</p> <ul style="list-style-type: none"> ➤ 14 Program Initiatives for 2018 	<p>Motion: Approve Health Education Mid-Year Work Plan Evaluation & Executive Summary</p> <p>(Cardona/Zweifler)</p> <p>4-0-0-3</p>

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	<ul style="list-style-type: none"> ➤ 11 met or exceeded 50% of the year-end goal ➤ 3 Initiatives did not meet 50% of year-end goal by 6/30/18 <p>Barriers to full implementation of planned activities have been identified and are being addressed. Continue with implementation of 2018 initiatives to meet or exceed year end goals.</p>	
<p>#5 UM Business - Key Indicator Report & Turn-around Time Report for July (Attachment M & N) Action Patrick Marabella, M.D., Chair</p>	<p>The Key Indicator Report reflects data as of 7/30/2018. This report includes key metrics for tracking utilization and case management activities.</p> <ul style="list-style-type: none"> ➤ The increase in ER Visits and Inpatient Admissions noted in Q1 & Q2, particularly for TANFs was further investigated and analyzed and found to be related to a particularly virulent strain of flu this season. These rates are back down in July. ➤ A new CalViva Pregnancy Program has recently been initiated and we are beginning to see an increase in referrals and engagement. ➤ Turn-around Times for Utilization Management are all above 95% with 4 of 6 metrics at 100%. Continue to monitor all cases that do not meet standard through the Turn-around Time Report. ➤ Integrated Case Management & Transitional Care Management are demonstrating good engagement rates. These two teams work together to provide smooth care transitions. ➤ MHN data is now provided on this report. Outreach efforts are being modified to improve reach and engagement rates for the behavioral health population. 	<p>Motion: Approve Key Indicator Report & Turn-around time report (Zweifler/Cardona) 4-0-0-3</p>
<p>#5 UM Business - Specialty Referrals Reports: Health Net (Q1 & Q2) (Attachment O) Action Patrick Marabella, M.D., Chair</p>	<p>These reports provide a summary of Specialty Referral Services in Quarters 1 and 2 that require prior authorization in the tri-county area for Health Net. In comparing volumes of cases, it was noted that Quarter 2 volumes were significantly higher than Quarter 1, however, denial and turn-around time results are similar.</p> <p>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: Health Net (Q1 & Q2) (Zweifler/Cardona) 4-0-0-3</p>
<p>#5 UM Business - Specialty Referrals Reports: La Salle, IMG, Adventist (Q2) (Attachment P) 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 La Salle, IMG and Adventist. As parameters for these reports have recently been clarified with Delegation Oversight staff, there may be some edits or updates. First Choice will be available for review at the November meeting.</p> <p>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: La Salle, IMG, Adventist (Q2) (Ramirez/Zweifler) 4-0-0-3</p>

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<p>#5 UM Business - Standing Referrals Report (Q2) (Attachment Q) Action Patrick Marabella, M.D, Chair</p>	<p>The Standing Referrals Report provides a summary of any denials during the reporting period for Standing Referrals for Chronic Conditions within or outside of the provider network. A Standing Referral is defined as 2 or more office visits with a single provider where the primary diagnosis may include, but is not limited to Congestive Heart Failure, Diabetes, End Stage Renal Disease, Coronary Artery Disease, Asthma, Chronic Obstructive Pulmonary Disease, Hypertension or HIV. In Quarter 2, there were three denials for Standing Referrals. All cases were for the hypertension diagnosis and they did not meet medical necessity criteria.</p>	<p>Motion: Approve Standing Referral Report (Q2) (Cardona/Zweifler) 4-0-3</p>
<p>#6 Compliance Update (Attachment R)</p>	<p>ML Leone presented the Compliance report.</p> <ul style="list-style-type: none"> ➤ 2018 DHCS Medical Audit – CalViva is awaiting DHCS Preliminary Report ➤ On 9/25/18 received written DHCS notification of a Quality Improvement Corrective Action Plan (CAP); Plan response due 10/12/18. ➤ On 9/28/18 Plan received written notification of the 2019 DMHC Medical Survey; DMHC on-site week of 2/25/19 ➤ Public Policy Committee “At-Large” member vacancy ➤ The next Public Policy Committee meeting is scheduled for December 5th, 2018 11:30 a.m. in Fresno County at the CalViva office on Palm Ave. 	
<p>#9 Old Business</p>	<p>None.</p>	
<p>#10 Announcements</p>	<p>None.</p>	
<p>#11 Public Comment</p>	<p>None.</p>	
<p>#12 Adjourn Patrick Marabella, M.D, Chair</p>	<p>Meeting was adjourned at 11:55 am.</p>	

NEXT MEETING: November 15th, 2018

Submitted this Day: November 15 2018

Submitted by: 
Amy Schneider, RN, Director Medical Management

Acknowledgment of Committee Approval:


Patrick Marabella, MD Committee Chair