

Fresno-Kings-Madera  
Regional Health Authority

**CalViva Health  
Commission**

**Meeting Minutes**

October 15, 2020

**Meeting Location:**

Teleconference Meeting due  
to COVID-19 Executive Order  
CalViva Health  
7625 N. Palm Ave., #109  
Fresno, CA 93711

<b>Commission Members</b>			
	Sara Bosse, Director, Madera Co. Dept. of Public Health	✓●	Aftab Naz, Madera County At-large Appointee
✓●	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
	Joyce Fields-Keene, Fresno County At-large Appointee	✓●	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	✓●	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
✓●	Kerry Hydash, Commission At-large Appointee, Kings County		
<b>Commission Staff</b>			
✓	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)		
<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>
#1 Call to Order	The meeting was called to order at 1:33 pm. A quorum was present via conference call in lieu of gathering in public per executive order signed	

Commission Meeting Minutes

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	<p>by the Governor of California on Monday, 3/16/2020, allowing Public Health Plans subject to the Brown Act to hold public meetings via teleconferencing due to COVID-19. A quorum remains a requirement to take actions, but can be achieved with any combination of Commissioners' physical attendance at the public location or by teleconferencing.</p>	
<p><b>#2 Roll Call</b> Cheryl Hurley, Clerk to the Commission</p>	<p>A roll call was taken for the current Commission Members.</p>	<p><i>A roll call was taken</i></p>
<p><b>#3 Confirmed Madera County BOS At-Large Reappointment</b></p>	<p>Madera County Board of Supervisors reappointed Dr. Aftab Naz for an additional three-year term.</p>	
<p><b>#4 Consent Agenda</b></p> <ul style="list-style-type: none"> <li>a) Commission Minutes 9/17/2020</li> <li>b) Finance Committee Minutes 7/16/2020</li> <li>c) QIUM Committee Minutes dated 7/16/2020</li> <li>d) Commission Calendar 2021</li> <li>e) Finance Calendar 2021</li> <li>f) QIUM Calendar 2021</li> <li>g) Credentialing Calendar 2021</li> <li>h) Peer Review Calendar 2021</li> <li>i) Public Policy Calendar 2021</li> </ul> <p>Action J. Neves, Co-Chair</p>	<p>All consent items were presented and accepted as read.</p> <p style="text-align: center;"><i>David Pomaville arrived at 1:38 pm, not included in vote</i></p>	<p><b>Motion:</b> <i>Approve Consent Agenda 14 – 0 – 0 – 3</i></p> <p><i>(Nikoghosian / Smullin)</i></p> <p><i>A roll call was taken</i></p>

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<p><b>#5 Financial Audit Report for Fiscal Year 2020</b></p> <p>Action J. Neves, Co-Chair</p>	<p>Rianne Suico, representative from Moss Adams, presented the results of the audit. Moss Adams’ audit will result in the issuance of an unmodified opinion on the financial statements, which is the highest audit opinion that could be provided by an external CPA firm. A discussion of general audit procedures performed including confirmation of various account balances were discussed.</p> <p>The required communications and the organization’s accounting policies are in compliance with GAAP. After completing the work, it was found that the financial statements do not need to be adjusted and no issues were encountered when completing the work.</p>	<p><b>Motion:</b> <i>Approve the Financial Audit for Fiscal Year 2020</i></p> <p><i>13 – 0 – 0 – 4</i> <i>(Rogers / Frye)</i></p> <p><i>A roll call was taken</i></p>
<p><b>#6 2020 Cultural &amp; Linguistics (C&amp;L) Executive Summary and Work Plan Mid-Year Evaluation</b></p> <p>Action P. Marabella, MD, CMO</p>	<p>Dr. Marabella presented the 2020 Cultural &amp; Linguistics (C&amp;L) Work Plan Mid-Year Evaluation.</p> <p>The 4 categories for the 2020 Work Plan are:</p> <ol style="list-style-type: none"> <li>1. Language Assistance Services</li> <li>2. Compliance Monitoring</li> <li>3. Communication, Training, and Education</li> <li>4. Health Literacy, Cultural Competency &amp; Health Equity</li> </ol> <p>By June 30, 2020 all activities were on target.</p> <p>Some of the activities completed consist of:</p> <ol style="list-style-type: none"> <li>1. Population Needs Assessment was completed in collaboration with Health Education and Quality Improvement.</li> <li>2. C &amp; L related grievances reviewed. Follow up completed when indicated.</li> </ol>	<p><b>See item #8 for Motion</b></p>

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	<ol style="list-style-type: none"> <li>3. Promoted Aunt Bertha platform as a member resource and included on Member Newsletter.</li> <li>4. Four Call Center trainings conducted.</li> <li>5. Collaborated on Breast Cancer Screening PIP intervention development.</li> </ol> <p>All of the Work Plan activities continue on target for completion by the end of calendar year 2020.</p>	
<p><b>#7 2020 Health Education (HE) Executive Summary and Work Plan Mid-Year Evaluation</b></p> <p>Action P. Marabella, MD, CMO</p>	<p>Dr. Marabella presented the 2020 Health Education Work Plan Mid-Year Evaluation.</p> <p>Two areas of focus for 2020 consist of:</p> <ol style="list-style-type: none"> <li>1. Programs and Services</li> <li>2. Department Operations, Reporting and Oversight</li> </ol> <p>Of the 19 Program Initiatives, 12 are on track to meet year-end goals. These consist of:</p> <ol style="list-style-type: none"> <li>1. Chronic Disease Education: Asthma</li> <li>2. Community Health</li> <li>3. Fluvention - Flu Vaccine Campaign</li> <li>4. Health Equity Project</li> <li>5. Immunizations</li> <li>6. Member Newsletter</li> <li>7. Mental Health</li> <li>8. Pediatric Education</li> <li>9. Perinatal Education</li> <li>10. Oversight and Reporting</li> </ol>	<p><b>See item #8 for Motion</b></p>

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	<p>11. Department Promotion and Materials Update, Development, Utilization and Inventory                      12. Operations: Geographic Information Systems</p> <p>The seven (7) initiatives that are off track or have been canceled due to the pandemic, consist of:</p> <ol style="list-style-type: none"> <li>1. Chronic Disease: Diabetes.</li> <li>2. Digital Health.</li> <li>3. Member Engagement.</li> <li>4. Obesity: Members and Community</li> <li>5. Promotores Health Network: Diabetes Classes</li> <li>6. Tobacco Cessation</li> <li>7. Women’s Health</li> </ol> <p>Barriers to full implementation of planned activities have been identified and are being addressed. 2020 initiatives will continue to be implemented in order to meet or exceed year end goals.</p>	
<p><b>#8 Quality Improvement (QI) Update 2020-2021</b></p>	<p>Dr. Marabella provided an update on HEDIS®: Managed Care Accountability Set (MCAS)</p> <p>Overall CalViva performed well on the new MCAS with the 50<sup>th</sup> percentile minimum performance level. Reporting Year 2020 (RY20) data reflects care and services provided during calendar year 2019. Some allowances were made for RY20 due to some of the limitations on data capture associated with the pandemic.</p> <p>All three counties were below the minimum performance levels (MPL) for Antidepressant Medication Management Acute Phase and Antidepressant Medication Continuation Phase. This is a new measure for this year. Our COVID-Quality Improvement Project (QIP) includes a</p>	<p><i><b>Motion:</b> Approve 2020 C&amp;L Work Plan Mid-Year Evaluation; the 2020 HE Work Plan Mid-Year Evaluation; and the 2020-2021 QI Update.</i></p> <p><i>13 – 0 – 0 – 4 (Naz / Cardona)</i></p> <p><i>A roll call was taken</i></p>

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	<p>Member Outreach effort by Behavioral Health Case Managers in Kings and Madera counties to encourage medication adherence.</p> <p>Fresno County fell below the MPL for Adolescent Well-Care Visits. This will be addressed through a MemberConnections Outreach intervention associated with our new COVID-Quality Improvement Project.</p> <p>Fresno and Kings counties fell below the MPL for Breast Cancer Screening, Childhood Immunizations- Under 2 Years, and Well Child Visits-First 15 Months. Two Performance Improvement Projects (PIPs) that were started approximately 1 year ago and placed on “pause” by the state due to the pandemic, will be restarted in the first quarter of 2021 to address these opportunities for improvement.</p> <p>Madera County fell below the MPL for Chlamydia Screening. A PDSA Improvement Project is being initiated with a high volume, low compliance provider in Madera County to improve compliance with this measure.</p>	
<p><b>#9 Standing Reports</b></p> <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>August 2020 Financials:</b></p> <p>Total current assets were approximately \$351.9M; total current liabilities were approximately \$254.7M. Current ratio is 1.38. TNE as of August 31, 2020 was approximately \$107.5M, which is approximately 725% above the minimum DMHC required TNE amount.</p>	<p><b><i>Motion: Approve Standing Reports</i></b></p> <p><i>14 – 0 – 0 – 3</i> <i>(Hodge / Naz)</i></p> <p><i>A roll call was taken</i></p>

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<ul style="list-style-type: none"> <li>• <b>Compliance</b> M.B. Corrado, CCO</li> </ul>	<p>For the first two months of fiscal year 2021 premium capitation income actual recorded was approximately \$211.5M which is approximately \$4.9M below budgeted amounts, primarily due to rates being lower than anticipated, and the MCO tax being less than what was budgeted. In July 2020 the MCO tax loss was approximately \$1M; whereas the MCO tax loss for August was approximately \$755K. The decrease was due to additional enrollment in August. DHCS has stated they are taking into consideration the MCO tax loss and could potentially make an adjustment beginning January 2021 to make up for the loss for the period of July 2020 through December 2020. DHCS is scheduled to present the new MCO tax rate, covering the time period of January 2021 to June 2021, to Plans in December 2020.</p> <p>Total cost of medical care expense actual recorded is approximately \$177.6M which is approximately \$3M less than budgeted due to rates being less than projected. All other expense line items are in line or below what is budgeted. For the first two months of fiscal year 2021, there is an approximate net loss of \$1.2M primarily due to the MCO tax loss.</p> <p style="text-align: center;"><i>Dr. Hodge arrived at 2:07 pm</i></p> <p><b><u>Compliance</u></b></p> <p>There was one (1) new Fraud, Waste &amp; Abuse case reported to the State in October, bringing the total for the year to 14.</p>	

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	<p>All oversight audits are continuing. The audit for Claims and Provider Disputes activity was completed and resulted in a CAP with regards to minor issues and has since been closed.</p> <p>Updates on the Medi-Cal Rx transition were reported. DHCS continues implementation activities to transition pharmacy services from Medi-Cal managed care to FFS by January 1, 2021. Member notices have begun. In addition, all Plans are required to conduct additional outreach to members informing them of the pharmacy benefit transition, and new membership cards will be distributed.</p> <p>The CalAIM initiative for Medi-Cal was put on hold due to COVID-19. CalAIM was intended to replace the Medi-Cal 2020 waiver that the Plan operates under. DHCS submitted the extension request for review and approval on September 16, 2020.</p> <p>An update on the COVID Crisis Response for the Central Valley was provided. The required meeting for Central Valley Medi-Cal Plans took place on October 1, 2020.</p> <p>With regard to COVID-19, the Department of Health and Human Services extended the public health emergency for an additional 90-days, through January 21, 2021.</p> <p>The next Public Policy Committee meeting is scheduled for December 2, 2020 at 11:30 am via teleconference.</p>	

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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 August 2020.</p> <p>The total number of grievances ending August 2020 has decreased slightly, presumably due to less interactions with providers.</p> <p>The majority of grievances were due to Quality of Service.</p> <p>The Exempt grievances decreased in August. It has been determined that the category “PCP Assignment/Transfer – Incorrect PCP assigned-Health Plan Error” has been incorrectly labeled, as these were found to be a request to change the assignment. The category label will be modified to better reflect the issue.</p> <p>The total number of Appeals Received as of the end of July was noted to have decreased from recent months, however, the number increased again in August. Opportunities to further evaluate these appeals and educate providers have been identified. Actions are underway.</p> <p><b>Key Indicator Report</b></p> <p>Dr. Marabella presented the Key Indicator Report through July 31, 2020.</p> <p>In-hospital utilization rates have begun to rise in all areas with the exception of the SPD (Seniors and Persons with Disabilities) population.</p>	

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	<p>An evaluation of these populations has identified an increase in respiratory admissions in alignment with the COVID-19 health crisis which began in March.</p> <p>Turn-around time compliance improved in June to 100% and has continued at 100% through August 2020.</p> <p>Case Management results in 2020 thus far, continue to demonstrate positive trends in all areas.</p> <p><b>QIUM Quarterly Report</b></p> <p>Dr. Marabella provided the QI/UM Qtr. 3, 2020 update. Two QI/UM meetings were held in Quarter 3; one on July 16, 2020 and one on September 17, 2020.</p> <p>The following guiding documents were approved at these meetings:</p> <ul style="list-style-type: none"> <li>• 2020 Quality Improvement (QI) Mid-Year Evaluation</li> <li>• 2020 Utilization Management Case Management (UMCM) Mid-Year Evaluation.</li> </ul> <p>In addition, the following general documents were approved at the meetings:</p> <ul style="list-style-type: none"> <li>• Pharmacy Formulary &amp; Provider Updates</li> <li>• Clinical Practice Guidelines</li> <li>• Medical Policies Q1</li> <li>• QI Policy &amp; Procedure Review</li> </ul>	

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	<p>The following Quality Improvement Reports were reviewed: Appeals and Grievances Dashboard &amp; Quarterly Reports, Facility Site &amp; Medical Record Review Report, Initial Health Assessment, MHN Performance Indicator Report, and Emergency Drug Report. Additional reports reviewed during Q3 included Provider Preventable Conditions, SPD HRA Outreach, County Relations, and Member Incentive Programs.</p> <p>The Utilization Management &amp; Case Management reports reviewed included the Key Indicator Report, UM Concurrent Review Report, PA Member Letter Monitoring Report, additional UMCM reports. Pharmacy quarterly reports were also reviewed.</p> <p>HEDIS® Activity:</p> <p>In Q3, HEDIS® related activities focused on analyzing the results for RY2020 under the new Managed Care Accountability Set (MCAS) measures and the minimum performance level (MPL) of 50<sup>th</sup> percentile.</p> <p>The areas CalViva reported results below the 50<sup>th</sup> percentile MPL are:</p> <ul style="list-style-type: none"> <li>• Antidepressant Medication Management, for both the Acute Phase and the Continuation Phase, for all three counties.</li> <li>• Adolescent Well-Care Visit for Fresno County.</li> <li>• Breast Cancer Screening for Fresno County.</li> <li>• Chlamydia Screening for Madera County.</li> <li>• Childhood Immunization – Combo 10 for Fresno and Kings counties.</li> <li>• Well-Child Visits in the first 15 months of life for Fresno and Kings counties.</li> </ul> <p>Current Performance Improvement Projects (PIPs) consist of:</p>	



Commission Meeting Minutes

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	The report out will be made available to all Commissioners at a later date.	
#10 Final Comments from Commission Members and Staff	G. Hund announced that Commissioner Joyce Fields-Keene was identified as one of the top ten professional women for the Marjaree Mason Center awards for 2020.	
#11 Announcements	None.	
#12 Public Comment	None.	
#13 Adjourn	The meeting was adjourned at 2:44 pm The next Commission meeting is scheduled for November 19, 2020 in Fresno County.	

Submitted this Day: 11-19-2020  
 Submitted by: *Cheryl Hurley*  
 Cheryl Hurley  
 Clerk to the Commission