



Public Policy Committee  
Meeting Minutes  
March 1, 2023

CalViva Health  
7625 N. Palm Ave. #109  
Fresno, CA 93711

Committee Members		Community Base Organizations (Alternates)	
✓	Joe Neves, Chairman		Jeff Garner, KCAO
✓	David Phillips, Provider Representative	✓	Roberto Garcia, Self Help
✓	Lisa Sanchez, Kings County Representative		<b>Staff Members</b>
✓	Sylvia Garcia, Fresno County Representative	✓	Courtney Shapiro, Director Community Relations
✓	Kristi Hernandez, Fresno County Representative	✓	Cheryl Hurley, Commission Clerk / Director, HR /Office
✓	Maria Arreola, At-Large Representative	✓	Mary Lourdes Leone, Chief Compliance Officer
✓	Norma Mendoza, Madera County Representative	✓	Steven Si, Senior Compliance & Privacy/Security Specialist
		✓	Maria Sanchez, Compliance Manager
			Patrick Marabella, MD, CMO
			Amy Schneider, RN, Director, Medical Management
		*	= late arrival
		•	= participation by teleconference

AGENDA ITEM / PRESENTER	DISCUSSIONS	ACTION TAKEN
<b>#1 Call to Order</b> Joe Neves, Chair	The meeting was called to order at 11:33 am. A quorum was present.	A roll call was taken.
<b>#2 Meeting Minutes from December 7, 2022</b>  <b>Action</b> Joe Neves, Chair	The December 7, 2022, meeting minutes were reviewed.	<b>Motion:</b> Approve December 7, 2022, Minutes 8-0-0-1 (D. Phillips / J. Neves)

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<p><b>#3 Enrollment Dashboard</b></p> <p><b>Information</b> Maria Sanchez, Compliance Manager</p>	<p>Maria Sanchez presented the enrollment dashboard through December 2022. Membership as of December 31, 2022, was 418,051. CalViva Health maintains a 68.23% market share. It is anticipated that enrollment will decrease as the public health emergency ends. Moving forward the Default numbers, the County Share of Choice %, and the Voluntary Disenrollments numbers will no longer be available as the State has stopped providing that information. The State is working on an alternative way to provide Plans with this information in the future.</p>	<p><b>No Motion</b></p>
<p><b>#4 Annual Report</b></p> <p><b>Information</b> Courtney Shapiro, Director, Community Relations &amp; Marketing</p>	<p>The Annual Report is a mandated report and is for the benefit of stakeholders, community partners, and elected officials, and is posted on the CVH website for public viewing. Each PPC member was provided a hard copy of the annual report.</p>	<p><b>No Motion</b></p>
<p><b>#5 Committee Membership Update</b></p> <p><b>Information</b> Courtney Shapiro, Director, Community Relations &amp; Marketing</p>	<p>Public Policy Committee membership has been updated as follows:</p> <p>New members: Maria Arreola, At-Large member for a term of one year. Lisa Sanchez, Kings County, for a term of one year.</p> <p>Renewals: Kristi Hernandez moved from the At-Large position to a Fresno County position with a term of three years. Norma Mendoza, Madera County, was renewed for a three-year term. David Phillips, UHC representative, was renewed for a three-year term.</p>	<p><b>No Motion</b></p>
<p><b>#6 Appeals, Grievances and Complaints</b></p> <p><b>Information</b></p>	<p>For Q4 2022 there was 1 Coverage Dispute (Appeal), 82 Disputes Involving Medical Necessity (Appeals), 79 Quality of Care, 116 Access to Care, and 121 Quality of Service, for a total of 399 appeals and grievances. The total for calendar year 200 was 1,621 which was a decrease from calendar year 2021. The majority of which are from Fresno County.</p>	<p><b>No Motion</b></p>

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<p>Maria Sanchez, Compliance Manager</p>	<p>The turn-around time compliance for appeal and grievance cases was as follows:</p> <ul style="list-style-type: none"> <li>• Standard Grievances: 100%</li> <li>• Expedited Grievances: 100%</li> <li>• Standard Appeals: 100%</li> <li>• Expedited Appeals: 99%</li> </ul> <p>There was a total of 553 Exempt Grievances received in Q4 2022.</p> <p>Of the total grievances and appeals received in Q4, the following were associated with Seniors and Persons with Disabilities (SPD):</p> <ul style="list-style-type: none"> <li>• Grievances: 99</li> <li>• Appeals: 4</li> <li>• Exempt: 15</li> </ul> <p>The majority of appeals and grievances were from members in Fresno County (largest CalViva Health enrollment).</p> <p>The majority of quality of service (QOS) grievance cases resolved were categorized as Administrative, Access-Other, and Transportation-Access.</p> <p>The majority of quality of care (QOC) grievance cases were categorized as PCP Delay, Specialist Care and PCP Care.</p> <p>The top categories of appeal cases were related to Advanced Imaging, Surgery, and Pharmacy.</p>	

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	<p>The top categories for exempt grievances were Health Plan Material-ID Cards Not Received, PCP Assignment/Transfer Health Plan Assignment Change Request, and PCP-HCO Assignment - Change Request.</p>	
<p><b>#7 Regulatory Audit Status</b></p> <ul style="list-style-type: none"> <li>• 2020 DHCS Audit Monthly CAP</li> <li>• 2022 DHCS Audit CAP</li> <li>• 2022 DMHC Audit</li> </ul> <p><b>Information</b> Mary Lourdes Leone, Chief Compliance Officer</p>	<p>The 2020 DHCS Audit Monthly CAP was accepted and approved by DHCS in February 2022, however DHCS only notified the Plan in January 2023.</p> <p>The recently completed 2022 DHCS Audit CAP resulted in three findings; two of which had to do with blood-lead screening in children, and the third had to do with transportation. The Plan has submitted two monthly responses in reference to the CAP. The Plan will continue to submit monthly responses until DHCS confirms all findings have been addressed adequately.</p> <p>The 2022 DMHC Audit was completed in the Fall of 2022; the preliminary report of findings is pending.</p>	
<p><b>#8 Health Education</b></p> <p><b>Information</b> Steven Si, Senior Compliance Privacy/Security Specialist</p>	<p>A total of 1,747 CalViva Health members participated in six-member incentive programs during Q3- Q4 2022. In total, \$44,350.00 worth of gift cards; \$1,260 equivalent value in bags of rice; and \$665 worth in digital weight scales were given to CalViva Health members. Of the award recipients: 86% were from Fresno County, 8% from Kings County, 5% from Madera County, and for 1% the county was unknown. There was an increase in the percentage of total member incentive awards given of 66% (+612) for Q3-Q4 2022.</p> <p>Next steps include:</p> <ul style="list-style-type: none"> <li>• Breast Cancer Screening (BCS) PIP: Provider Engagement will continue with BCS events throughout 2023.</li> </ul>	<p><b>No Motion</b></p>

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	<ul style="list-style-type: none"> <li>• Strength Weaknesses, Opportunities, and Threats (SWOTs) process for Well-Child (W30) and Childhood Immunizations (CIS-10).</li> <li>• COVID-19 and CDC H-9: these two programs have been closed out.</li> <li>• Diabetes Prevention Program: currently searching for a new Diabetes Prevention vendor.</li> <li>• Child and Adolescent Well Care Visits (WCV): continue to focus on point (POC) of care incentives.</li> </ul>	
<p><b>#9 Annual Compliance Report</b></p> <p><b>Information</b> Mary Lourdes Leone, Chief Compliance Officer</p>	<p>The Member Service Call Center received 110,473 calls, of which 109,176 were answered. Overall service level was 93%.</p> <p>The Member Service Call Center for Mental Health received 4,560 calls, of which 4,504 were answered. Overall service level was 88%.</p> <p>There were 2,768 welcome calls made to new members in 2022.</p> <p>The Provider Network remains stable.</p> <p>In 2022, contracted providers were sent approximately 214 Provider Updates with information on contractual and regulatory matters as well as health plan news and announcements. CalViva Health staff also reviewed 17 informational letter templates for contracted providers and 5 forms intended for provider use.</p> <p>In 2022, 45 communications were reviewed by the Plan. This included member-informing materials, health education, and information about incentive programs. It also included 12 Printed Provider Directories and 1 Member Newsletter. The 2022 Member Handbook/Evidence of Coverage (EOC) was made available to members by posting to the CalViva Health website for downloading.</p>	

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	<p>In 2022 the Plan completed eight (8) Delegation Oversight Audits for Health Net in the areas of Access &amp; Availability, Claims, Continuity of Care, Provider Disputes, Utilization Management, Fraud, Waste &amp; Abuse, Emergency Services, and Provider Network. Corrective action plans (CAPs) were required for two of the functional areas, Claims and Utilization Management. CAPS have been completed and approved for all categories.</p> <p>For calendar year 2022, the Plan had a total of 1,626 Grievances and Appeals, of which 1,637 were resolved with 99.88% turn-around-time. The number of cases resolved for Seniors &amp; Persons with Disabilities (SPDs) was 474 with a 100% turn-around-time. The number of cases resolved for Exempt Grievances was 2,429 with a 100% turn-around-time.</p> <p>The 2022 Regulatory audits and Corrective Action Plans (CAPs) included:</p> <ul style="list-style-type: none"> <li>• 2020 DHCS Audit CAP</li> <li>• 2022 DHCS Audit</li> <li>• DHCS -2020-2021 EQR Performance Evaluation</li> <li>• DHCS 2022 Encounter Data Validation (EDV) Study</li> <li>• 2022 DHCS Annual Network Certification (ANC)</li> <li>• DHCS MOT Corrective Action Plan (CAP)</li> <li>• Measurement Year (MY) 2021 DMHC Timely Access Report (TAR)</li> <li>• March 2021 DMHC 18-Month Follow-Up Audit</li> <li>• September 2022 DMHC Triennial Audit</li> <li>• March 2022 DMHC Routine Financial Exam</li> </ul> <p>New or expanded benefits or programs consist of:</p> <ul style="list-style-type: none"> <li>• Enhanced Care Management (ECM) and Community Supports (CS)</li> <li>• Community Health Worker (CHW) Services</li> <li>• Community-Based Adult Services (CBAS) Emergency Remote Services (ERS)</li> <li>• Long Term Care (LTC)</li> <li>• MMCE Phase II</li> </ul>	

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	<ul style="list-style-type: none"> <li>• Doula Services</li> <li>• Cognitive Health Assessment</li> <li>• Medi-Cal Expansion</li> </ul> <p>In 2023, the Plan anticipates developing new policies and implementing/revising existing processes as a result of the initiatives described above, as well as new regulatory guidance and laws becoming effective in 2023.</p> <p>The Plan will continue its efforts to implement ECM/CS in Fresno, Kings and Madera counties by submitting updated Models of Care (MOCs) that include updated reports of new POFs transitioning into ECM and expanding provider capacity for CS.</p> <p>In 2023, the Compliance Program will also continue to focus on meeting the regulatory requirements associated with the upcoming execution of the 2024 DHCS Contract, working with our Plan Administrator towards achieving NCQA Accreditation, and implementing a Dual-Eligible Special Needs Program (D-SNP) in our service area.</p> <p>In 2023, CalViva will once again be audited by DHCS, and will continue to submit all required documentation in fulfillment of the Operational Readiness Contract.</p> <p>The Plan expects increased regulatory oversight and monitoring of health plan activities, in the following areas:</p> <ul style="list-style-type: none"> <li>• Provider network adequacy and certification requirements for direct and delegated networks</li> <li>• Timely Access</li> <li>• Non-Emergency Medical Transportation (NEMT) and Non-Medical Transportation (NMT)</li> <li>• Behavioral Health</li> <li>• Encounter data quality and timeliness</li> <li>• Clinical Quality Improvement (MCAS measures)</li> <li>• Member Grievances/Appeals</li> </ul>	

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<p><b>#10 2023 CalViva Health Member Handbook/Evidence of Coverage</b></p> <p><b>Information</b> Mary Lourdes Leone, Chief Compliance Officer</p>	<p>The new CVH Member Handbook/Evidence of Coverage was posted to the CalViva Health website January 1, 2023. A printed format is available to members by request.</p>	
<p><b>#11 CalAIM Update – Enhanced Care Management, Community Supports</b></p> <p><b>Information</b> Elizabeth Campos</p>	<p>DHCS has developed a multi-year initiative which is intended to improve the quality of life and health outcomes of our Medi-Cal population by implementing a broad delivery system program, and payment reform across Medi-Cal program. The two programs within CalAIM that support Medi-Cal members are Enhanced Care Management (ECM), and Community Supports (CS).</p> <p>ECM is a benefit and is intended to be rendered in person. The role of the ECM provider is to coordinate all primary, acute, behavioral, developmental, oral, and long-term services and supports for the member, including participating in the care planning process, regardless of setting. The ECM core service components include: Comprehensive Assessment &amp; Care Management Plan, Enhanced Coordination of Care, Health Promotion, Comprehensive Transitional Care, Member &amp; Family Supports, and Coordination of Referral to Community &amp; Social Support Services.</p> <p>Community Supports is medically appropriate and cost-effective alternatives to state plan services. These services provide considerable flexibility for plans to go beyond services defined in the Medicaid state plan to address social needs. Community Supports assists with things such as: housing navigation, housing deposits, housing tenancy &amp; sustaining services, meals &amp; medically tailored meals, asthma remediation, environmental accessibility, nursing facility transition/diversion to assisted living facilities, RCFE and ARF, community transition services/nursing facility transition to a home, day habilitation, personal care, respite, sobering centers, recuperative care, and short-term post hospitalization housing.</p> <p>Each program, ECM and CS, has a referral process which is made to educate members, refer members to the correct program, and connect them with a Provider.</p>	



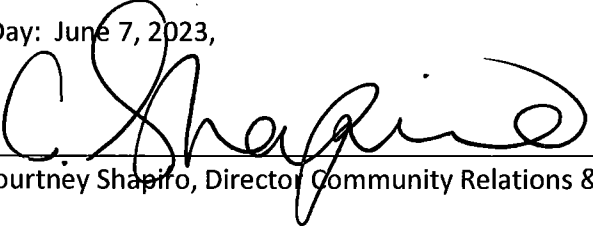
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<p><b>#12 Promotores Health Network and Collaboration with Alzheimer's Association update</b></p> <p>Information Adela Corona</p>	<p>Adela Corona provided an in-depth update on community promotores activities.</p>	
<p><b>#13 Announcements</b></p>	<p>Jeff Nkansah, CEO for CalViva Health, reported the State is beginning to unwind flexibilities with regard to COVID-19 restrictions. Medi-Cal redeterminations will begin again in April and will be based on redetermination dates. The State is working to coordinate Medi-Cal Medicare dual eligibles; questions can be directed to Courtney Shapiro, Director of Community Relations &amp; Marketing.</p> <p>Courtney Shapiro shared information in reference to CalViva's Youth Recreation Fund. There are funds available from the FY 2023 budget. Anyone interested can complete an application that is found on the CalViva Health website. CalViva will be participating in the backpack give away on August 5, 2023, at Grizzlies Stadium.</p> <p>David Phillips with United Health Centers (UHC) announced their new President/CEO, Justin Preas. UHC opened a new site in Visalia, and a new optometry center in downtown Fresno. UHC has six urgent care locations in Fresno, Mendota, and Kerman.</p> <p>Norma Mendoza announced the Health Fair in Mendota took place on February 23, 2023. There were 62 CalViva members in attendance.</p>	
<p><b>#14 Public Comment</b></p>	<p>None.</p>	
<p><b>#15 Adjourn</b></p>	<p>Meeting adjourned at 1:11 pm.</p>	


**CalViva Health Public Policy Committee**

**NEXT MEETING**      **June 7, 2023, in Kings County**  
**11:30 am - 1:30 pm**

Submitted This Day: June 7, 2023,

Submitted By:   
Courtney Shapiro, Director Community Relations & Marketing

Approval Date: June 7, 2023

Approved By:   
Joe Neves, Chairman