Fresno-Kings-Madera Regional Health Authority

## CalViva Health Commission Meeting Minutes July 19<sup>th</sup>, 2012

Council of Fresno County Governments 2035 Tulare Street Fresno, CA, 93721

	<b>Deborah Poochigian,</b> Fresno County Board of Supervisor	1	David Rogers, Madera County Board of Supervisors
/	Edward L Moreno, M.D., Director, Fresno County Dept. of		Van Do-Reynoso, Director, Madera County Dept. of Social
	Public Health		Services
	Stephen Ramirez Fresno County At-large Appointee	V	Aftab Naz, Madera County At-large Appointee
<b>✓</b>	David Cardona, M.D., Fresno County At-large Appointee	<b>V</b>	Tim Curley, Valley Children's Hospital Appointee
<b>√</b>	David Hodge, M.D., Chair, Fresno County At-large Appointee	<b>V</b>	Abdul Kassir; Community Medical Center Representative
✓	Soyla Griffin, Fresno County At-large Appointee	<b>V</b>	Conrad Chao, Commission At-large Appointee, Fresno
<b>√</b>	Joe Neves, Vice Chair, Kings County Board of Supervisors	<b>V</b>	Derrick Gruen, Commission At-large Appointee, Kings County
✓	Keith Winkler, Director, Kings County Dept. of Public Health		Paulo Soares, Commission At-large Appointee, Madera County
<b>√</b>	Harold Nikoghosian, Kings County At-large Appointee		
	Commission Staff		
/	Gregory Hund, Chief Executive Officer (CEO)	1	Mary Beth Corrado, Chief Compliance Officer (CCO)
<b>✓</b>	William Gregor, Chief Financial Officer (CFO)	<b>V</b>	Cynthia Reiter, Clerk to the Commission
	Patrick Marabella, M.D., Chief Medical Officer (CMO)	✓	Amy Schneider, Director of Medical Management
	General Counsel and Consultants		
	David Prentice, General Counsel		

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
#1 Call to Order	The meeting was called to order at 1:31pm. A quorum was	
	present.	
	Chair Hodge welcomed Abdul Kassir, to the Commission as	
	the newly appointed Commissioner representing	
	Community Regional Medical Center	

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
#2 Consent Agenda	All consent items were presented and accepted as read.	Motion: Approve the Consent Agenda.
- Commission Minutes		14-0 (Rogers/Neves)
5/17/2012		
- Executive Committee		
Minutes 6/29/2012		
Action		
D. Hodge, MD, Chair		
#3 Review Goals and Objectives	Four out of the five 2011/2012 strategic goals were met	
for 2011/2012	and/or exceeded. The one goal not met referred to moving	
Information	all direct contracts to capitated agreements. This goal will	
D. Hodge, MD, Chair	remain open to be completed in 2012/2013.	
#4 Goals and Objectives for	Strategic Goals for 2012/2013 were reviewed and	Motion: Approve the Goals and Objectives for
2012/2013	discussed. Goals expanded on 2011/2012 goals with an	2012/2013 as amended.
Action	addition to support state and federal advocacy groups and	14-0 (Neves/Naz)
D. Hodge, MD, Chair	improve resource utilization reports.	
	<ul> <li>Tangible Net Equity was amended to read:</li> </ul>	
	"Achieve 200% or greater of basic TNE requirement	
	to accommodate expected growth"	
#5 Second Quarter 2012	Events conducted on behalf of CalVivafor the first 6 months	
Marketing Outreach Events	of the year were presented. Further events are scheduled	
	for the remainder of 2012.	
	The Open House Solution Maker's events in Kings and	
	Madera Counties were a success with good media coverage	
Information	and attendance. The next scheduled Open house will be in	
D. Hodge, MD, Chair	Fresno on August 9 <sup>th</sup> , 2012	
#6 Withdrawal of Grant Policy	The Executive Committee advised the Commission to defer	Motion: Approve deferring the Grant Policy
	implementation of the Grant Policy indefinitely.	process indefinitely.
	Implementing such policy would increase administrative	14-0 (Rogers/Poochigian)

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Action	costs significantly	
D. Hodge, MD, Chair		
#7 Commission Education	John Ramey from Local Health Plans of California will hold	
Luncheon	an education luncheon on September 20, 2012. The	
Information	Commission Meeting has been moved to the Fresno	
Dr. Hodge, MD, Chair	County location.	
#8 Standing Reports		
Action		
W. Gregor, CFO	<u>Finance</u>	Motion: Accept the Monthly Financials.
	W. Gregor presented the financial statement as of June 30,	14-0 (Rogers/Cardona)
	2012. The TNE amount exceeds the fully phased in	
	minimum required by the state. The income statement	
	shows that overall positive variance to budget	
MB Corrado, CCO	<u>Compliance</u>	Motion: Accept Compliance Report.
Will con ado, eco	Summary of Filings-	14-0 (Rogers/Cardona)
	No new HIPAA or Fraud, Waste, and Abuse breaches were	11 0 (Nogers) curdona)
	reported in May/June.	
	7-1-2-1-3-1-3-1-3-1-3-1-3-1-3-1-3-1-3-1-3	
	Compliance Activities	
	Health Net Oversight Audit is in progress. The goal is for	
	CV to complete the desk reviews and onsite visit in late	
	July/early August.	
	• The mandatory enrollment period for transitioning SPD's	
	into managed care is now complete.	
	• The Public Policy Committee meeting, scheduled for June	
	6, 2012 was cancelled due to lack of quorum. Members	
	are currently needed for this committee.	
	Regulatory Reviews/Audits	

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	<ul> <li>The DMHC Financial audit took place on May 7-9, 2012.         Overall, the audit went very well. The DMHC will review the Plan's response and then issue a final report which will be public</li> <li>The DHCS conducted a Member Rights/Program Integrity Monitoring Review of CV during May and June 2012. The review was completed with the onsite visit on June 26, 2012. Based on the verbal exit conference the review went well. A preliminary report will be issued in the next 30 days.</li> </ul>	
	New Regulation Implementation The ADHC benefit ended on March 31, 2012 to be replaced with the CBAS program effective April 1, 2012. The new program will provide necessary medical and social services to individuals with intensive health care needs. CV will begin accepting eligible beneficiaries on October 1, 2012.	
MB Corrado, CCO	Appeals and Grievances Dashboard  This new report will provide a breakdown of appeal and grievance key measures by county on a monthly basis.  • May 2012 Standard and Expedited Grievance resolved.  Detailed quarterly analysis will continue to be provided.  • May 2012 Standard and Expedited Appeals resolved.  Detailed quarterly analysis will continue to be provided.	Motion: Accept Appeals and Grievances Report. 14-0 (Rogers/Cardona)
A. Schneider, DMM	Quality Improvement/Utilization Management General Documents Approved at the April/May Meetings	Motion: Accept Quality Improvement/Utilization Management Report. 14-0 (Rogers/Cardona)

MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<ul> <li>Annual Evaluations, Updated Program Descriptions, and Updated Annual Workplans for the Health Education and Cultural and Linguistics Programs have been approved.</li> <li>Appeals and Grievances and Pharmacy policies were reviewed and approved.</li> </ul>	
<ul> <li>QI/UM Reports</li> <li>Facility Site and Medical Record Review Report covered third and fourth quarters for 2011 providing data on FSR, MRR, and PARS. Corrective action plans were submitted in a timely manner. No corrective action plans are required for PARS at this time.</li> <li>The All Cause Readmission Statewide Collaborative QIP was approved by the QI/UM Committee.</li> </ul>	
<ul> <li>Key Indicator Report</li> <li>The Key Indicator Report provides a summary by month of key utilization and quality data measures to allow the committee to monitor for trends that may require further investigation.</li> <li>First few metrics are utilization focused for specific populations</li> <li>SPD membership, hospital admissions and lenth of stay have been increasing since June 2011. As of June 2012 all SPD's will have been moved over to managed care</li> <li>Alere is a vendor that provides CV members with complex case management. One of their current areas of focus is moving SPD's into ambulatory case management. This</li> </ul>	Motion: Accept Key Indicator Report. 14-0 (Rogers/Cardona)
	<ul> <li>Annual Evaluations, Updated Program Descriptions, and Updated Annual Workplans for the Health Education and Cultural and Linguistics Programs have been approved.</li> <li>Appeals and Grievances and Pharmacy policies were reviewed and approved.</li> <li>QI/UM Reports</li> <li>Facility Site and Medical Record Review Report covered third and fourth quarters for 2011 providing data on FSR, MRR, and PARS. Corrective action plans were submitted in a timely manner. No corrective action plans are required for PARS at this time.</li> <li>The All Cause Readmission Statewide Collaborative QIP was approved by the QI/UM Committee.</li> <li>Key Indicator Report The Key Indicator Report provides a summary by month of key utilization and quality data measures to allow the committee to monitor for trends that may require further investigation.</li> <li>First few metrics are utilization focused for specific populations</li> <li>SPD membership, hospital admissions and lenth of stay have been increasing since June 2011. As of June 2012 all SPD's will have been moved over to managed care</li> <li>Alere is a vendor that provides CV members with complex case management. One of their current areas of focus is</li> </ul>

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	<ul> <li>Perinatal case management statistics reflect improvement over time in the identification of high-risk OK patients to allow for implementation of strategies to better manage their care</li> <li>Provider Dispute Resolution data is reported. Turnaround time compliance has improved.</li> <li>The remainder of the report provides a breakdown of data by county</li> </ul>	
G. Hund, CEO	Dashboard Summary report of Dashboard as of July 2012, continues to show membership is growing at a steady pace.	Motion: Accept Executive Updates. 14-0 (Rogers/Cardona)
G. Hund, CEO	Affordable Care Act On June 28, 2012, the US Supreme Court upheld the Affordable Care Act (ACA) as constitutional. The ruling left the Medicaid Expansion optional for individual states. California has decided to opt in and is preparing for implementation in 2014. CV has been working with the Local Health Plans of California to meet the requirements in a timely fashion.	
G. Hund, CEO	Basic Health Plan The Basic Health Plan (BHP) is aimed at individuals who are between 133% and 200% of the federal poverty level. If the Plan is approved there will be a potential of 50,000 members in the Fresno, Kings, Madera Counties that could be enrolled into CV. CV would have to work towards becoming NCQA Accredited in the near future if the BHP is	

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	administered by the California Exchange.	
G. Hund, CEO	Kaiser Health	
	Kaiser is in discussions with the state regarding the	
	possibility of retaining their Healthy Families enrollment;	
	which will be moved to Medi-Cal through participation	
	with local health plans.	
G. Hund, CEO	Duals Eligible Special Needs Program	
	CV has signed an agreement with HN for the DSNP (Dual	
	Eligible Special Needs Plan) Program for Fresno County.	
#9 Closed Session	General Counsel reported that the Commission Chairman	
- Government Code 54957(b)(1)-	will discuss the results of the CEO's annual review with the	
Public Employee Appointment,	CEO.	
Employment, Evaluation, or		
Discipline - Chief Executive Officer		***************************************
#10 Final Comments from	A report from Commissioner Winkler, stated that CalViva is	
Commission Members and Staff	the 20 <sup>th</sup> largest plan in the state of California.	
#11 Announcements	None.	
#12 Public Comment	None.	
#13 Adjourn	The meeting was adjourned at 3:00pm. Next Commission	
	meeting is scheduled for September 20 <sup>th</sup> , 2012 in Fresno.	

Submitted this Day: Soptomber 20 2012
Submitted by: Cynthia R Router

Cynthia Reiter

Clerk to the Commission