

Fresno-Kings-Madera  
Regional Health Authority

**CalViva Health  
Commission**  
Meeting Minutes  
March 21<sup>st</sup>, 2013

CalViva Health  
1315 Van Ness Avenue; Suite 103  
Fresno, CA 93721

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

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
#1 Call to Order	The meeting was called to order at 1:30pm. A quorum was present.	
#2 Consent Agenda <ul style="list-style-type: none"> <li>Commission Minutes 1/17/2013</li> </ul>	All consent items were presented and accepted as read.	<b>Motion:</b> <i>Approve the Consent Agenda. 14-0 (Neves/Rogers)</i>

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<ul style="list-style-type: none"> <li>Executive Committee Minutes 3/7/2013</li> </ul> <p>Action D. Hodge, MD, Chair</p>		
<p><b>#3 Hospital Appointed Commissioner</b> Information D. Hodge, MD, Chair</p>	<p>Tim Curley was selected to serve as Commission member by Valley Children’s Hospital for the next three years.</p>	
<p><b>#4 Annual Administration</b> Information D. Hodge, MD, Chair</p>	<p>A reminder was given to the Commissioners to renew their Ethics certificate and submit Form 700: Statement of Economic Interest by April 2, 2013.</p>	
<p><b>#5 CEO Annual Review</b></p> <p>Action D. Hodge, MD, Chair</p>	<p>The External Evaluation Form and External Distribution List were presented to the commissioners for the CEO Annual Review. The CEO will also be required to complete a self-evaluation. An Ad-Hoc Committee was established to discuss the assessment of the CEO and present the review to the Commission in May.</p>	<p><b>Motion:</b> <i>Approve Selection of Ad-Hoc Committee.</i> <i>14-0 (Rogers/Nikoghosian)</i></p>
<p><b>#6 New Member Default Rates</b></p> <p>Information G. Hund, CEO</p>	<p>CalViva Health’s default rates have changed.</p> <ul style="list-style-type: none"> <li>55% for Fresno County, a decrease of 5%</li> <li>65% for Kings County, an increase of 5%</li> <li>55% for Madera County, a decrease of 5%</li> </ul> <p>The SPD rates continue to be reviewed by DHCS.</p>	
<p><b>#7 Privacy and Security Program Description Annual Review</b></p>	<p>The HIPAA program description has been renamed to the Privacy and Security Program. Major changes to the program description include:</p> <ul style="list-style-type: none"> <li>Broadened language of the program document to reflect compliance with HIPAA requirements and</li> </ul>	<p><b>Motion:</b> <i>Approve Privacy and Security Program Description.</i> <i>14-0 (Winkler/Curley)</i></p>

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>Action M.B. Corrado, CCO</p>	<p>other federal and state confidentiality, privacy, and security requirements.</p> <ul style="list-style-type: none"> <li>• Added regulatory citations, provisions, and definitions to be consistent.</li> <li>• Changed the title and references to reflect that this is both a privacy and security program.</li> <li>• Added a risk management and risk assessment component to the program description, including definitions and provisions.</li> <li>• Removed references to Health Net and some references to Medi-Cal to broaden the program and minimize possible future changes for reasons such as delegating to other entities, adding other types of business, or other requirements.</li> <li>• Minor wording clarifications.</li> </ul>	
<p>#8 Code of Conduct Annual Review</p> <p>Action</p>	<p>The Code of Conduct was presented to the Commissioners with the following changes:</p> <ul style="list-style-type: none"> <li>• Updated the Members Rights section to be consistent with the Members' Rights list in the Member Handbook/Evidence of Coverage.</li> <li>• Added information about requirement for commissioners and officers to take an ethics course every 2 years.</li> <li>• Minor wording clarifications.</li> </ul> <p>Commissioners suggested the following changes to the Code of Conduct:</p> <ul style="list-style-type: none"> <li>✓ Correct item 2e on page 2</li> <li>✓ Correct item 13 on page 4 to reflect the correct</li> </ul>	<p><i>Motion: Approve Code of Conduct with changes. 14-0 (Rogers/Curley)</i></p>

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>M.B. Corrado, CCO</p> <p><b>#9 2012 Quality Improvement (QI) Work Plan Evaluation</b></p> <p>Action P. Marabella, MD, CMO</p>	<p>name of Form 700</p> <p>The QI Work Plan Evaluation provides evidence of the overall effectiveness of the QI activities and processes, and identifies barriers and opportunities for improvement in 2013. The 2012 Workplan planned eight initiatives and/or projects. All eight were completed by the due date with a few activities continuing on into 2013.</p> <p>Highlights of the 2012 QI Workplan are:</p> <ul style="list-style-type: none"> <li>• Developed and implemented the Provider Access Survey and the Provider Satisfaction Survey to obtain feedback about access to care.</li> <li>• CalViva Health has maintained a compliance rate of 99.85%, meeting DHCS requirements.</li> <li>• Implemented outreach initiatives to improve postpartum visits.</li> <li>• CalViva Health continues monitoring ongoing activities related to Complex Case Management, Appeals and Grievances, Credentialing and Re-credentialing, Facility Site Review, and Medical Record Compliance.</li> </ul>	<p><b>Motion:</b> <i>Approve 2012 QI Work Plan Evaluation.</i> <i>14-0 (Ramirez/Gruen)</i></p>
<p><b>#10 2013 Quality Improvement Program Description</b></p>	<p>P. Marabella, MD presented the 2013 Quality Improvement Program Description. The three main changes to the Program Description are:</p> <ul style="list-style-type: none"> <li>• Medi-Cal Complex Case Management transitions from Alere to McKesson effective March 1, 2013.</li> <li>• The QI/UM Workgroup was established. This workgroup meets on a weekly basis with Health Net to monitor and evaluate QI/UM related services.</li> </ul>	<p><b>Motion:</b> <i>Approve 2013 Quality Improvement Program Description.</i> <i>14-0 (Cardona/Naz)</i></p>

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>Action P. Marabella, MD, CMO</p>	<ul style="list-style-type: none"> <li>• An Access Workgroup began in January of 2013 with Health Net to manage and monitor all issues pertaining to access.</li> </ul>	
<p>#11 2013 Quality Improvement Work Plan</p> <p>Action P. Marabella, MD, CMO</p>	<p>P. Marabella, MD presented CalViva Health’s 2013 Quality Improvement Work Plan to the Commission. The 2013 Quality Improvement Work Plan for 2013 has five basic areas:</p> <ul style="list-style-type: none"> <li>• Chronic Care/Disease Management. <ul style="list-style-type: none"> <li>- Improve Asthma patients self-management</li> <li>- Improve outcomes for patients with diabetes</li> </ul> </li> <li>• Access, Availability, and Service. <ul style="list-style-type: none"> <li>- Improve access to care</li> <li>- Improve compliance with after-hours access to care</li> <li>- Improve member satisfaction with access to care</li> </ul> </li> <li>• Quality and Safety of Care. <ul style="list-style-type: none"> <li>- Meet or exceed HEDIS minimum performance levels for default enrollment measures</li> <li>- Decrease percent of members with multiple narcotic prescriptions</li> </ul> </li> <li>• Wellness/Preventive Health. <ul style="list-style-type: none"> <li>- Breast Cancer Screening project .</li> </ul> </li> <li>• Quality Improvement Projects (QIPs). <ul style="list-style-type: none"> <li>- Comprehensive Diabetes Care – Eye Exam</li> <li>- All Cause Hospital Readmissions – statewide collaborative</li> </ul> </li> </ul>	<p><b>Motion:</b> <i>Approve 2013 Quality Improvement Work Plan.</i> <i>14-0 (Rogers/Nikoghosian)</i></p>
	<p><i>Mr. Ramirez left at 2:20pm</i></p>	

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p><b>#12 Standing Reports</b></p> <p>Action W. Gregor, CFO</p> <p>M. B. Corrado, CCO</p>	<p>CalViva Health presented the following standing reports:</p> <p><b>Finance:</b> W. Gregor presented the February Financial Report to the Commission. CalViva Health's current ratio is 1.24 and the net working capital is \$11.1 million. The fiscal year 2014 budget will be presented to the Commission at their next meeting in May 2013.</p> <p><b>Compliance:</b> M.B. Corrado presented the Compliance Report to the Commission.</p> <ul style="list-style-type: none"> <li>• CalViva Health received four potential privacy incidents that were reported to DHCS and all were determined to be no/low risk and no communication or notice was required to be sent to the member(s).</li> <li>• CalViva Health also completed all activities for the annual oversight audit. Corrective actions have been implemented.</li> <li>• There were no significant findings in the 2012 Quarter 3 Provider Dispute Resolution Cases Audit. CalViva Health is in the process of completing the 2012 Quarter 4 Provider Dispute Resolution Cases Audit.</li> </ul> <p>CalViva Health is currently undergoing a joint audit by DMHC and DHCS. DMHC is performing a SPD Medical</p>	<p><b>Motion: Accept the Monthly Financials.</b> 13-0 (Poochigian/Neves)</p> <p><b>Motion: Accept the Compliance Report.</b> 13-0 (Poochigian/Neves)</p>

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>Survey Audit and DHCS is performing a Full Service Medical Survey. DHCS performs the Full Service Medical Survey every 2 years while DMHC performs the SPD Medical Survey Audit every 3 years.</p> <p>DHCS also performed a HEDIS Audit through Health Services Advisory Group (HSAG). HSAG audited both CalViva Health and Health Net at the same time looking at HEDIS data collection methodology, analysis, reporting, and storage of the data. The initial report was received on March 20, 2013. All issues have to be resolved prior to the final data submission to DHCS and HSAG on June 3, 2013.</p> <p>The report of the DHCS Member Rights &amp; Program Integrity Review completed last year required no corrective actions. DHCS did give CalViva Health a follow up call regarding the implementation of DHCS's recommendations. In February 2013, DHCS requested CalViva Health provide a written report of the implementation of recommendations of improvement.</p> <p>The Public Policy Committee met on March 6, 2013 The Committee reviewed the physical accessibility requirements, annual summary for appeals and grievances activities, and marketing activities for 2012. An update was provided for Healthy Families, Public Health Programs, and the Medical Survey Audit. The committee did not have any recommendations for the Commission's review.</p>	

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>P. Marabella, MD, CMO</p>	<p><i>Supervisor Poochigian left at 2:26pm</i></p> <p><b><u>Medical Management:</u></b>            QI/UM Committee Report            P. Marabella, MD presented the QI/UM Committee Report to the Commission. The QI/UM Committee Report is a summary report of the October 18<sup>th</sup> and November 15<sup>th</sup>, 2012 meetings. Documents reviewed included Preventative Health Guidelines, the QI/UM Meeting Calendar for 2013, the Health Education Mid-Year Evaluation, focusing on areas such as Pregnancy, Weight Control, Member Engagement, Smoking Cessation, Preventative Health Care Services, and Disease Management for Diabetes and Asthma. 17 of 18 initiatives are on track. One was postponed due to administrative reasons. The Cultural and Linguistic Mid-Year Work Plan was also provided with all four areas on target. Policies that were approved included the Pharmacy- Recommended Drug List Development (RX-101) and Timely Access- Accessibility of Providers and Practitioners Policy (QI-007). The following QI Reports were also presented in the October and November 2012 meetings:</p> <ul style="list-style-type: none"> <li>• Appeals and Grievance Dashboard. There were no significant issues reported.</li> <li>• Facility Site Review and Medical Records Review Report for Quarter 1 &amp; 2 of 2012.</li> <li>• Disease Management and Nurse Advice Line Report. 10 out of 13 diabetes measures met the performance targets and all five asthma clinical</li> </ul>	<p><b>Motion:</b> <i>Accept the Medical Management Report.</i>  <i>12-0 (Moreno/Do-Reynoso)</i></p>



AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>measures met the performance targets. The Nurse Advice Line helped reduce the number of unnecessary ER visits.</p> <ul style="list-style-type: none"> <li>• Public Health Programs Report. The Madera and Kings County Public Health MOUs will be reviewed at Board of Supervisor meetings in early 2013.</li> <li>• Language Assistance Program Report</li> <li>• Health Education Incentive Program Report</li> <li>• Quality Improvement Project (QIP) Overview reports</li> </ul> <p>The Credentialing and Peer Review Committees met in November 2012. The ChildNet Annual Audit results and Corrective Action Plan were reviewed. A follow up report will be provided after the first quarter of 2013.</p> <p>The Key Indicator Report and Case Management and Audit Monitoring Report were both presented as UM Reports. There is an increasing trend in Inpatient Utilization and SPD Readmissions. Initiatives to improve these areas will begin in 2013.</p> <p>Pharmacy reports include the Top 30 Prior Authorization Drugs Report, Pharmacy Operations Metrics, and Pharmacy RDL 4<sup>th</sup> Quarter.</p> <p>CalViva Health was asked to establish a benchmark or comparative rates for appeals and grievances data in the October QI/UM meeting and continues working on developing a benchmark.</p>	

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>G. Hund, CEO</p>	<p>Key Indicator Report                      P. Marabella, MD presented the full 2012 Key Indicator Report and the 2013 Key Indicator Report, including January data. Improvements from the 2012 to 2013 Key Indicator Reports include the separation of SPDs and non-SPDs, including readmission rates, and goals for Inpatient Utilization.</p> <p>A&amp;G Dashboard                      P. Marabella, MD presented the A&amp;G Dashboard to the Commission. The A&amp;G Dashboard presents January data. February's data will also include the breakdown of SPDs and non-SPDs, as well as CBAS data.</p> <p><u>Executive Report:</u>                      G. Hund presented the Executive Dashboard to the Commission. CalViva Health continues to increase market share. As of March 2013, there are approximately 194,000 CalViva Health members. CalViva Health projects membership at 209,000 in April 2013 after the Healthy Families Transition.</p> <p>Healthy Families Update                      Health Net Healthy Families is scheduled to transition to CalViva Health on April 1, 2013. Kaiser Healthy Families' members are scheduled to transition to CalViva Health on August 1, 2013 if a contract is executed.</p>	<p><i>Motion: Accept the Executive Report.                      12-0 (Moreno/Do-Reynoso)</i></p>

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>Bridge Plan                      G. Hund reviewed the current status of the Covered California "Bridge Plan". Concerns remain about affordability and CMS approval. Staff will monitor the proposed program and report at the May Commission meeting.</p> <p>Family Practice Residency Support                      HCAP and Clinica Sierra Vista have secured a grant to start a Family Practice Residency Program starting July 1, 2013. . CalViva Health staff has recommended financial support for the program.</p> <ul style="list-style-type: none"> <li>✓ The Commission has asked CalViva Health staff to provide additional program information and withhold sponsorship until the next Commission meeting in May 2013.</li> </ul>	
#13 Closed Session A	General Counsel reported that the Commission authorized G. Hund, CEO to sign the contract with Kaiser for the Healthy Families transition	
#14 Closed Session B	General Counsel reported that the Commission authorized G. Hund, CEO to sign an amendment to the contract with Health Net for a period of fifteen months beginning April 1, 2013.	
#15 Final Comments from Commission Members and Staff	None	
#16 Announcements	G. Hund made the following announcements: <ul style="list-style-type: none"> <li>• CalViva Health has signed a direct contract with Valley Health Team effective April 1, 2013.</li> </ul>	

AGENDA ITEM / PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<ul style="list-style-type: none"> <li>• CalViva Health intends to file a Notice of Deficiency with DHCS on the SPD rates.</li> </ul>	
#17 Public Comment	None	
#18 Adjourn	The meeting was adjourned at 3:43 PM. Next Commission meeting is scheduled for May 16 <sup>th</sup> , 2013 in Fresno County.	

Submitted this Day: May 16 2013

Submitted by: Cynthia Reiter  
 Cynthia Reiter  
 Clerk to the Commission