

DRAFT

**HEALTH PLAN OF SAN MATEO  
CONSUMER ADVISORY COMMITTEE MEETING  
Meeting Minutes  
Thursday, March 7, 2019  
801 Gateway Blvd. 1<sup>st</sup> Floor-Boardroom  
South San Francisco, CA 94080**

Agenda Item: 4.0

Date: June 6, 2019

**Committee Members Present:** Judy Garcia, Rob Fucilla, Tricia Vinson, Angela Valdez, Ricky Kot, Mary Pappas

**Committee Members Absent:** Hazel Carrillo, Cynthia Pascual

**Staff Present:** Gabrielle Ault-Riche, Carolyn Thon, Charlene Barairo, Rustica Escandor, Pat Curran, Karla Rosado-Torres, Richard Moore, Trent Ehrgood, Megan Noe, Colleen Murphey, Michelle Heryford

**1.0 Call to Order/Introductions:** The meeting was called to order at 12:01 pm by Ms. Vinson.

**2.0 Public Comment:** There was no public comment.

**3.0 Approval of Agenda:** The agenda was approved as presented. **M/S/P**

**4.0 Approval of Meeting Minutes for December 13, 2019:** Ricky Kot inquired about one of the figures noted in the last sentence in section 5.5 – Member Services. It read “In every month of Q3, HPSM enrolled a record number of members with a high of 11.” That is a typo and should instead read “In every month of Q3, HPSM enrolled a record number of members with a high of 111,” (19 re-enrolled and 92 new members). The minutes were approved as corrected.  
**M/S/P**

**5.0 HPSM Operational Reports and Updates**

**5.1 CEO Update:** Pat Curran provided the CEO report on behalf of Maya Altman. He introduced the committee to HPSM’s new CFO, Trent Ehrgood. Trent comes to HPSM from Brown and Toland Medical Group.

Mr. Curran also advised the group of a conglomerate from southern California who plans to acquire all four Verity properties including Seton and Seton Coastside. The buyer has indicated informally that they plan to keep the hospital operating as it has been; which will help with continuity of care. There is an auction occurring in April. Should that go their way, the transaction will take place in the summer. Mr. Curran will provide more information about the buyer at the next meeting.

Mr. Curran also noted appointments by Governor Gavin Newsom for two health related positions. The first appointee is Dr. Nadine Burke Harris, a national leader in

pediatric medicine. She will serve as California's first-ever Surgeon General. The second is Kris Perry, a national leader in early childhood policy. She will serve as Deputy Secretary of the California Health and Human Services Agency for Early Childhood Development and Senior Advisor to the Governor on Implementation of Early Childhood Development Initiatives.

He also informed the group about the proposal by Governor Newsom to carve out pharmacy benefits from all health plans. HPSM does not feel this is in the best interest of their members and not good for integration of care. If passed, implementation would not occur until January of 2021.

Mr. Curran also updated the group on Long Term Care. He advised the group of the creation of a Long Term Care Partnership program; the group includes 11 Skilled Nursing Facilities that meet quarterly to address important issues like access to skilled nursing and LTC and improving quality at the facilities. They would also like to attempt building a new payment model. The group has met twice so far and will continue meeting thru October.

Mr. Curran updated the group on the proposed Dental program; HPSM is continuing to explore administering dental access locally instead of at the state level. The Plan is currently working on a financial analysis to see what such a program would cost. The State has very low utilization and low rates, which HPSM would like to improve. HPSM has been meeting with community stakeholders who have been very supportive. The next step is to update the Commission at the March meeting. The final recommendation should be presented to the Commission in June.

Mr. Curran notified the group that HPSM has decided not to go forward with the Health Homes program, a proposed state program to fund activities to coordinate care for members. HPSM did not see the interest required from community organizations and clinics.

Finally he updated the group on NCQA (National Committee for Quality Assurance); HPSM did very well. There are two corrective action items that need to be addressed with BHRS. HPSM won't receive official approval until early 2020.

- 5.2 CMO Update:** Dr. Moore reported on behalf of Dr. Susan Huang. He updated the committee on the termination of contracts by the Verity group as part of the Seton transition. It has not been a seamless process and many members are being left out or are being referred to providers who are not contracted with HPSM. HPSM is taking steps to ensure their members are not adversely affected by the termination of these

contracts. Members who had been assigned to PCP's have been reassigned by Member Services.

Dr. Moore also reported on the Influenza outbreak at Seton Coastside. A number of residents and staff are confirmed with the flu and as a result the facility cannot take new patients. HPSM has asked Seton Hospital to help with the SNF beds available on the 9<sup>th</sup> floor. He also reminded the group that the current flu strain going around is the H1N1. The flu vaccine efficacy level is 47% this year, which is better than last year's.

Dr. Moore also reported on the AFSCME strike by the County involving the Human Services Agency. This was a 2 day strike by County employees. If there is no agreement, the union will consider a 5 day or indefinite strike; that decision will need to be made by 66% or 2/3 of the involved employees.

HPSM will be holding a sponsored provider forum on April 23<sup>rd</sup>. The topic: Prior Authorization process. They will review current processes and the sources of the coverage criteria used to make decisions, peer-to-peer opportunities, updated treatment recommendations and/or services that HPSM should consider to remove the prior authorization requirement.

Lastly, Dr. Moore spoke about the Post-Acute Care Program with Landmark Health. There have been excellent reviews from long term care administrators. There have been some program improvements and Landmark and HPSM are conducting site visits to discuss new processes.

**5.3 Quality Department Q1 Report:** Megan Noe reported on the HEDIS Measure Overview for Medi-Cal in 2018. She noted there were no measures below the minimum performance level (MPL) and seven above the high performance level (HPL). The 2018 Measure Overview for CareAdvantage/CMC notes successful reporting on all 45 reports required by CMS for Medicare-Medicaid plans. She reviewed all of the CMS Core Quality Withhold measures that were above the withhold benchmarks. They include:

- Controlling High Blood Pressure (CBP)
- Plan All-Cause Readmissions (PCR)
- Follow-Up after Hospitalization for Mental Illness (FUH)
- Annual Flu Vaccine (CAHPS)

She also noted the Quality Withhold changes for 2019, which include:

- Medication Adherence for Diabetes Medications – NEW
- Fall Risk Management (FRM) – RETIRED

- Screening for Clinical Depression and Follow-Up – RETIRED

The department is also looking at opportunities for improvement in the following areas:

- Cancer Screening
  - Cervical Cancer Screening (CCS)
  - Breast Cancer Screening (BCS)
  - Colorectal Cancer Screening (COL)
- Asthma Medication Ratio (AMR)
- Timeliness of Prenatal Care (PPC)
- Plan All Cause Readmissions (PCR)
- Diabetes Measures (CDC) and Medication Adherence – New!

The department's HEDIS goals for 2019 include increasing timely prenatal care from 83.88% to 87.06%, increasing the Medi-Cal Asthma Medication Ratio (AMR) rate of 58.15% to 62.3% and the Cervical Cancer Screening (CCS) rate from 59.95% to 60.1%.

She also spoke about the goals for the Prenatal/Postpartum Outreach program and the incentives offered. Lastly, she informed the group about how they identify members that qualify for this program as well as the outreach calls that are conducted by the Health Promotion Coordinator.

**5.4 Grievance and Appeals:** Ms. Ault-Riche reviewed the Grievance and Appeals report. The Unit has struggled with case timeliness in Q3 and Q4; however changes to the case review process are expected to have a positive effect in 2019. The department has also added additional staff to conduct case reviews. They expect these additional resources will reduce the care turn-around time and improve timeliness.

**5.5 Provider Services:** Ms. Murphey spoke of the Provider Services department's efforts to obtain a Palliative Care and Diabetes Prevention Provider. The DPP in particular has been hard to find. This benefit is a new one for both Medi-Cal and Medicare members and as such there are a strict set of requirements providers would need to adhere to, including recognition of the curriculum by the Centers of Disease Control. They have identified a couple of potential providers and hope to have one in network soon.

They are also working with Verity Providers from the Professional Group at Seton. Some of the providers are not sure if they will join an existing group or not. In the meantime PS is actively working to keep them contracted. PS has also been working with SOAR, an orthopedic provider to bring them into the network before they officially leave Verity. The goal is to get that in place before June.

They are also meeting with PCP's to address concerns on access and care coordination, in particular the North County primary care providers are having difficulties related with the Home Advantage benefit.

The department is also continuing their work on Pain Management. There is one provider in the network, Apex Pain and Wellness, they are contracted but have not been actively seeing members; PS is working with them to ensure a higher volume of members are seen.

**5.6 Member Services/CareAdvantage:** Gabrielle presented the Member Services report; she noted a dip in Medi- Cal enrollment of 9.3% from January 2017 to December 2018. The reasons are unclear. Customer Support leadership is currently working with community and county partners to identify the causes of the decrease and whether there is a need for intervention. This is a top priority for HPSM.

**6.0 New Business:** There was no new business.

**7.0 Adjournment:** The meeting was adjourned by Ms. Vinson at 1:04 pm. **M/S/P**

Respectfully submitted:

*M. Heryford*

M. Heryford  
Assistant Clerk to the Commission