

Public Policy Committee Meeting Minutes June 5, 2024

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			
✓	Martha Miranda, Kings County Representative		Staff Members			
	Sylvia Garcia, Fresno County Representative	✓	Courtney Shapiro, Director Community Relations & Marketing			
	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, Compliance Manager			
			Jeff Nkansah, CEO			
		√	Maria Sanchez, Senior Compliance Manager			
		✓	Patrick Marabella, MD, CMO			
-		✓	Amy Schneider, RN, Senior Director, Medical Management			
		✓	Sia Xiong-Lopez, Equity Officer			
		*	= late arrival			
		•	= participation by teleconference			

AGENDA ITEM / PRESENTER	DISCUSSIONS	RECOMMENDATION(S) / QUESTION(S) / COMMENT(S)	ACTION TAKEN
#1 Call to Order	The meeting was called to order at 11:30 am. A quorum was present.		
Joe Neves, Chair			
#2 Meeting Minutes from	The March 6, 2024, meeting minutes were reviewed and approved.		Motion: Approve
March 6, 2024			March 6, 2024, Minutes
	Jeff Garner arrived at 11:34 am; not included in vote		6-0-0-3
Action			(R. Garcia / D. Phillips)
Joe Neves, Chair	Courtney Shapiro introduced Sia Xiong-Lopez, CalViva Health's new Equity Officer.]

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#3 Enrollment Dashboard Information Maria Sanchez, Compliance	Maria Sanchez presented the enrollment dashboard through March 2024. Membership as of March 31, 2024, was 435,626. CalViva Health maintains a 66.83% market share.		No Motion
Manager #4 Health Education	2023 Summary Work Plan Evaluation		No Motion
2023 Year-End Evaluation Summary 2024 Work Plan Information Steven Si	The 2023 Health Education Work Plan consisted of 15 initiatives with 40 measurable objectives (there are multiple objectives within each initiative). Of the 40 measurable objectives: 25 were attained as of the end of the year 1 is partially attained as of the end of the year		
	 7 were attained and did not meet the measurable objective as of the end of the year 2 were suspended given the Quality Department's quadrant analysis 5 were canceled Accomplishments included: 177 members enrolled in the Central California Asthma Collaborative in-home visitation 		
	 program and 141 members completed the 12-month program. 524 members attended 81 virtual and in-person Breast Cancer Screening/Cervical Cancer Screening classes. 226 charlas with a 68% member participation rate. Promotores Health Network conducted in-person and virtual classes on bailoterapia (physical activity), walking club, literacy club, and health education topics such as: A1C Diabetes, Vaccination, Cervical Cancer, and Cholesterol. 364 members enrolled in myStrength. 1,276 members enrolled in the pregnancy program. 		
	Barriers were:		

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	 Tobacco Cessation Program Email promotion, Chronic Disease Education Asthma email and mailing campaigns were canceled because they have limited impact and are resource intensive. Low enrollment for Obesity Prevention. Outreach campaigns to promote new DPP delayed as implementation is contingent upon submission to DHCS and approval of the program. 2024 Health Education Work Plan Focus areas for 2024 Health Education Programs are: Continue onboarding process with new proposed vendor for the Diabetes Prevention Program. Submit application to DHCS. Continue "charlas" and engagement with other stakeholders. Continue to promote mental/behavioral health resources to members by way of providers and digital QR codes. Continue promotion of BCS and CCS screenings via Every Woman Counts. Continue enrollment of members in the CalViva Pregnancy Program. Re-evaluate opportunities for Fit Families for Life and Healthy Habits Healthy People programs (obesity prevention) to increase access to available resources. Continue promotion of the Kick It California program. Partnering with health plans to determine if a submission of the Tobacco Cessation Nicotine Replacement Therapy kits pilot project with Kick It California will be made. Implement Fluvention education activities to encourage the promotion of Flu vaccinations during patient visits. Collaborate with Marketing to update health educational resources as needed and increase member and provider promotion of the Krames online resources. 		
#5 Appeals, Grievances and Complaints Information Maria Sanchez Dr. Marabella, CMO	For Q1 2024 there was one (1) Coverage Dispute (Appeals), 77 Disputes Involving Medical Necessity (Appeals), 48 Quality of Care, 110 Access to Care, and 289 Quality of Service, for a total of 525 appeals and grievances for Q1. The majority of which are from Fresno County.		No Motion

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	There were 58 appeal cases for Fresno County, 1 for Kings County, and 16 for Madera County, for a total of 75 for Q1 2024. There were 379 grievances cases for Fresno County, 29 for Kings County, and 40 for Madera County for a total of 448 for Q1 2024.		
	The turn-around time compliance for resolving appeal and grievance cases was met at 100% for Standard Grievances, Expedited Grievances, Standard Appeals and Expedited appeals.	Martha Miranda	
	There was a total of 457 Exempt Grievances received in Q1 2024.	asked if a member sees a physician out	
	Of the total grievances and appeals received in Q1, the following were associated with Seniors and Persons with Disabilities (SPD):	of town, does the member have to pay? And who can	
	Grievances: 84 Appeals: 14	help a member find a doctor that CVH	
	• Exempt: 20	will cover?	
	The majority of appeals and grievances were from members in Fresno County (largest CalViva Health enrollment).	Dr. Marabella clarified that if the physician is "out of	•
	The majority of quality of service (QOS) grievance cases resolved were categorized as Access-Other, Administrative, and Other.	network" then the member would have to see a physician	
	The majority of quality of care (QOC) cases were categorized as Other, PCP Care, and Specialist Care.	that is In network. CalViva Health members should not	
	The top categories of appeal cases were related to Advanced Imaging, Other, and DME.	have to pay for services; unless it is	
	The top categories for exempt grievances were Balance Billing, PCP Assignment/Transfer Health Plan Assignment Change Request, and Health Plan Materials-ID cards not received.	a service that the Plan does not cover (i.e. elective plastic	
	Dr. Marabella presented the Appeals & Grievances Dashboard for Q1 2024. The total of grievances for Q1, as stated, was 448 which is consistent with previous year Q1 2023. The majority of grievances are Quality of Service, having to do with prior authorizations,	surgery/cosmetic). Members can contact Member	
	administrative, phone calls, and balanced billing. The Plan is working on the balanced billing	Services for	

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	issue as a lot of the issues stem from member ID cards, and physicians switching to different provider groups which causes billing issues. Transportation remains an issue; however, has improved slightly from same time last year. Exempt grievances remain consistent with same time last year Q1 2023. Appeals for Q1 2024 remain stable when compared with Q1 2023. The majority of pre-service appeals were Advanced Imaging and is showing an improvement as the numbers have decline when compared with Q1 2023.	assistance with finding a physician in the CVH network. Amy Schneider confirmed if the member has a prior authorization for a physician outside of the network (i.e. specialty care), then the member can see that physician out of	
		network. David Phillips asked if the Plan has data on how many members repeat grievances.	
		Dr. Marabella stated the Plan tracks members complaints and complaints on physicians.	
		Steven Si added that Member Services is available 24/7 and the phone number is listed on the back side of member ID	

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		cards, and also on the CVH website.	
#6 Health Equity Information Steven Si	Steven Si presented the Health Equity 2023 Summary and Work Plan Evaluation, and the 2023 Summary and Language Assistance Program; and the 2024 Summary and Program Description, and the 2024 Summary and Work Plan. Cultural and Linguistics has been renamed to Health Equity.	the CVH website.	No Motion
	 2023 Annual Evaluation of C&L All 2023 work plan activities were completed: Language Assistance Services: 86 staff completed a bilingual assessment/reassessment; and integrated sexual orientation and gender identity (SOGI) and preferred pronouns in OMNI. Compliance Monitoring: Investigated and completed follow up on 45 cultural and linguistic grievances and 4 interpreter complaints; and conducted 2 findhelp trainings and added 753 overall new programs to findhelp. Communication, Training and Education: Completed a coding and resolution training to A&G Department; and completed 9 trainings to new CCC hires, training includes HEQ Core areas, LAP program, Cultural Competency and Implicit Bias. Health Literacy: completed 56 EMRs; and revised Plan Language training and posted online Cultural Competency: Completed 6 cultural competency trainings for 350 providers. Trainings includes (2) Healthcare Barriers for Gender Diverse Populations, (2) Implicit Bias, Special Needs and Cultural Competency; and completed 3 live cultural competency trainings for staff; 191 staff attended live trainings. Trainings includes LGBTQ+ 101 for Medical Professionals and Support Staff, Implicit Bias, and Healthcare Barriers for Gender Diverse Populations. Health Equity: Successfully co-led and supported the completion of quality projects. Projects targets HEDIS measure: CIS-10, WCV, and CDC. 		
	 2023 Summary and Language Assistance Program End of year summary includes: A total of 5,662 interpreter requests were fulfilled for CalViva Health members, 4,763 (84%) of these requests were fulfilled utilizing telephonic interpreter services with 1,125 (20%) for in-person and 148 (3%) for sign language interpretation. Member Services Department representatives handled a total of 139,171 calls across all languages. Of these, 43,598 (31%) were handled in Spanish and Hmong. 		

MHN Member Services Department representatives handled a total of 4,049 calls across all languages with 624 in Spanish, 5 in Hmong and 12 in other languages. No requests for an alternate format translation were received. For written translation requests, 145 were	
 received and fulfilled by MHN Services in 2023. MHN Services fulfilled 287 interpreter requests. English material review was completed for a total of 56 CalViva Health documents/materials. A total of 86 staff were assessed or re-assessed for their billingual skills during this reporting period. A total of 45 grievances were reviewed by the Health Equity Department. Of these cases, 21 were coded as culture perceived discrimination, 13 were coded as culture non-discriminatory, none were coded as linguistic perceived discrimination, and 12 were coded as linguistic non-discriminatory. Interventions were identified in 2 of the cases and delivered with support by the Provider Engagement Department. As of December 31, 2023, CalViva Health membership totaled 431,853 members with 68% Latino/Hispanic, 11% White/Caucasian, 9% Asian/Pacific Islander, and 5% African American/Black. Of the 150,381 CalViva Health members with limited English proficiency (LEP), 81,108 (54%) identified as female and make up 34.8% of the overall female membership (232,834). Of the 150,381 members with LEP, there is a total of 69,273 (46%) who identified as male, and they make up 34.8% of the overall male membership (199,019). The majority of members with LEP are female, while both male and female with LEP make up an equal part of the overall membership. To assist in meeting CalViva Health members' language needs, the Member Services Department ensures that bilingual representatives and/or interpreters are available to speak with members in their preferred language. During 2023, a total of 5,662 requests for interpreter services were fulfilled. Of these, 84% (4,763) were fulfilled utilizing telephonic interpreter services were fulfilled. Of these, 84% (4,763) were fulfilled utilizing telephonic interpreter services were requested in 2023. 	

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	A total of 45 grievances were received and reviewed by the Health Equity Department. Of these		
	cases, 22 were coded as culture perceived discrimination, 12 were coded as culture non-		
	discriminatory, none were coded as linguistics perceived discrimination, and 11 were coded as		<u> </u>
	linguistic non-discriminatory. Interventions were identified in 2 of the linguistic cases while 43		1
	cases were identified as track and monitor. The two cases identified as corrective action plans		
	include coaching the Call Center Staff on how to appropriately route the language request to		
	the appropriate department, and ensuring the correct language is requested.		
	The notable changes for the 2024 Health Equity Program Description include:		:
	Mission, Goals, and Objective:		
	o Expanded and added introduction to the Mission, Goals, and Objective section to align		
	with the Health Equity Accreditation requirements.		
	Added vision to section. Edited heading to include "vision".		
	Replaced and enhanced goals		
	Health Equity Work Plan		
	 Expanded on CLAS standards and the accreditation requirements it meets. 		
	Public Policy Committee		
	o Expanded on the roles and objectives of the Public Policy Committee. Include language		
	regarding committee selection.		
	CalViva Health Monitoring and Evaluation		
	 Expanded on the roles and objectives of the Governing Body and QI/UM Committee. 		1
	Data Collection		1
	Broaden how data will be collected including SOGI data.		
	CalViva Health Staff Roles and Responsibilities		
	 Added Equity Officer's role and responsibilities. 		}
	For the 2024 Health Equity Work Plan, the 2023 initiatives will continue into 2024 with the		
	following enhancements:		
	Information Technology: Updated technology efforts to include SOGI data collection.		
	Regulatory (Community Connect): Added measurable objectives to findhelp oversight		
	based on PPC's comments and feedback.		
	Provider Communication & Training: Include new methods for how providers can obtain		
	C&L materials: provider's library.		

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,	Health Equity (Operations): Updated PIP projects and included SUD/MH non-clinical project.		
#7 Annual Public Policy Committee Charter Review Information	The PPC reviewed the Charter and approved to move forward to Commission for approval with stated revisions.		Motion: Approve PPC Charter to move forward to Commission for final approval.
Courtney Shapiro			6-0-0-3 (J. Garner / D. Phillips)
#8 Audit Updates	Mary Lourdes provided updates to the following audits:		No Motion
Information Mary Lourdes Leone	2022 DMHC Audit Final Report: The Plan received the final report from DMHC on 4/18/24. There were two findings. DMHC stated the Plan had not corrected those findings when the CAP was submitted in December so the DMHC will do an 18-month follow-up and the Plan will need to show by that time that the deficiencies have been corrected.		
	2023 DHCS Audit CAP Closure: The Plan received the DHCS CAP closure document in April. In 2023 when the Plan was audited, DHCS found a deficiency. The Plan had since, on a monthly basis, provided DHCS with how the deficiency would be corrected leading to the CAP closure.		
	2024 DHCS Audit: The Plan completed the 2024 DHCS audit on Friday, May 31st. The Plan expects to receive the DHCS final report in August.		
	NCQA Plan Accreditation Audit: All Plans are required to achieve NCQA Accreditation by 2026. CVH has been preparing and submitting documents during the past year to attain this accreditation. Official submission was May 6 th , 2024. Final determination will be in July.		
	Annual Health Systems Advisory Group (HSAG) Network Validation Audit: This is a brand new annual DHCS audit conducted via an external vendor. This is a federal government requirement for the State to assess how the Plan validates the sufficient network of Providers to take care of members. This audit is to determine how the plan derived at the numbers, the systems used, what's the logic, how it's pulled, and the source data that produces a higher level output. The Plan filed this May 15 th and currently pending response.		

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#9 2024 CVH Member Handbook / Evident of Coverage Update (Errata)	The Plan received an errata for the 2024 Evidence of Coverage (EOC); the changes include language revision to minor consent services, the removal of biomarker testing as an offered health benefit, and additional perinatal benefits identified under maternity and new born care. This errata will be posted to the CVH website by July 1, 2024.		No Motion
Information Maria Sanchez			
#10 Final Comments from Committee Members and Staff	Maria Arreola shared the promotores finished training for Parkinsons. Martha Miranda shared the farmers market opened in Hanford, sponsored by CVH. St. Bridget's		No Motion
	in having a Christmas in July boutique sale.		
	Norma Mendoza shared Madera had an Active Aging walking in collaboration with the City of Madera. The promotores also had Mental Health training to help promotores learn how to provide information to members in need of assistance.		
	David Phillips shared UHC started performing in-house mammography at the Minnewawa (southeast Fresno) location. A second unit for Visalia will take place this summer. The UHC Fowler Health Center's open house will be June 26 th . The UHC Fun Run will be on June 29 th at Woodward Park.		
	Jeff Garner shared the KCAO will be stopping their Medi-Cal outreach services May 31st due to State funding issues. When funding comes back, they will begin outreach again. KCAO is trying to get started with CalAIM. They have begun constructing their new shelter and food bank in Kings County. They just finished their "point in time" survey for Kings County, which looks at the homeless population in Kings County. The homeless population in Kings County dropped by 5 individuals, as compared to the other CVH service counties that have seen a spike in numbers. Kings County has approximately 433 individuals that are considered street homeless. KCAO will be planting a pumpkin patch at the location where they are building their shelter and food bank, as they have the area to grow pumpkins as it waits for the shelter and food bank to be built.		
	Roberto Garcia shared Self-Help continues to build throughout the valley from Kern County to Stanislaus County. They are tapping into NPLH funding (No Place Like Home) and PSH		

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	(Permanent Supportive Housing), in dealing with the homeless situation. They have over 55 multi-family communities throughout the valley.		
	Courtney Shapiro shared the promotores team will join CVH at the Reading Heart Reading Extravaganza event at Storyland 6/8/24. CVH will now be sharing information on Instagram in addition to Facebook. CVH will be celebrating the promotores at the July Commission meeting and also at the September PPC meeting. There is a survey on the CVH website for anyone that visits the website to provide feedback. CVH funded a food pantry in conjunction with Family Health Care Network at the ambulatory care center in downtown Fresno at CRMC. Sia Xiong-Lopez, CVH Equity Officer, shared her background in that she came from Catholic Charities as a Program Manager. She graduated from FPU focusing on diversity and change management.		
#11 Announcements			
#12 Public Comment	None.		
#13 Adjourn	Meeting adjourned at 12:59 pm.		

NEXT MEETING September 4, 2024, in Fresno County 11:30 am - 1:30 pm

Submitted This Day: September 4, 2024,

Submitted By:

Courtney Shapiro, Directo Community Relations & Marketing

Approval Date: September 4, 2024