

BOARD OF GOVERNORS

Children's Health Consultant Advisory Committee

Meeting Minutes –March 20, 2018



L.A. Care
HEALTH PLAN

1055 W. Seventh Street, Los Angeles, CA 90017

All votes during a teleconferenced portion of the meeting were by roll call

Members

Lyndee Knox, PhD, *Chair*

Reena John, *Vice Chair*

Edward Bloch, MD*

Maria Chandler, MD, MBA**

Nayat Mutafyan**

Gwendolyn Ross Jordan*

Toni Frederick, PhD*

Maryjane Puffer, BSN, MPA

Diana Ramos, MD*

Richard Seidman, MD, MPH, CMO

Kimberly Uyeda, MD, MPH

* *Absent* ***Via Teleconference*

AGENDA ITEM/ PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
CALL TO ORDER	Lyndee Knox, PhD, <i>Chair</i> called the meeting to order at 8:39 a.m.	
APPROVAL OF MEETING AGENDA	Today's meeting agenda was approved as submitted.	Approved unanimously by roll call. 7 AYES (Chandler, John, Knox, Mutafyan, Puffer, Seidman and Uyeda).
PUBLIC COMMENTS		
APPROVAL OF MEETING MINUTES	Member John noted the minutes did not include the Committee discussion about AB-11, Early and Periodic Screening Program. The minutes for the January 16, 2018 meeting were approved as amended.	Approved unanimously by roll call. 7 AYES
CHIEF MEDICAL OFFICER'S REPORT Richard Seidman, MD, MPH	Richard Seidman, MD, MPH, <i>Chief Medical Officer</i> , reported: <ul style="list-style-type: none"> California now requires that palliative care services; treatment of the physical, emotional, and spiritual suffering associated with a serious illness, be made available to Medi-Cal patients. L.A. Care hosted a continuing medical education event on February 24 focused on end of life and palliative care. More than 200 L.A. Care network providers and others attended this very informative event. KPCC 89.3 featured the Palliative Care Conference in a story called, "Critically ill Medi-Cal patients just got an important new benefit." The conference was the first to present 	

APPROVED

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	<p>information about the new palliative care benefit, which took effect January 1, 2018, to Los Angeles County health providers. The conference focused on closing the knowledge and experience gaps, explaining the differences between the services and how to refer patients for services under this new benefit.</p> <ul style="list-style-type: none"> • On March 24, L.A. Care, in conjunction with Kaiser Permanente and SafeMed LA, hosted an all-day CME event titled, “The Opioid Epidemic: Trends, Updates, Where We Stand Now.” Topics included hot topics and trends for the epidemic, substance use system of care, pain management and non-opioid alternative therapies, medication assisted therapy, and naloxone training and certification. • Applications are being received for the Community Clinic Physician Leadership Program, which will provide leadership coaching and development support for up to 25 physicians working at community clinics. Seven physicians have applied. • L.A. Care funded the fees for ten community clinic physicians to attend the UC Davis Primary Care Psychiatry Train New Trainers Fellowship. Participants also attended a two-day conference with a focus on integrating recent scientific data with current clinical practice for mood and anxiety disorders, substance misuse, personality disorders, collaborative care, pain psychiatric management and how to do a primary care psychiatric interview. • L.A. Care awarded a \$4 million <u>grant to Brilliant Corners as the first in a five-year \$20 million commitment.</u> The grant funds rent subsidies. L.A. Care has <u>successfully placed the first member in permanent housing, a woman who had a substance abuse and incarceration history and her newborn twins.</u> There are more individuals in the pipeline. <p>Chair Knox shared that having health plans be involved in the efforts of finding permanent housing for homeless individuals is great.</p> <p>Dr. Seidman continued his report:</p> <ul style="list-style-type: none"> • The CHCAC Committee has a total of 33 seats and currently 12 seats are filled. Dr. Seidman noted that he would like new members to join the Committee. He encouraged current members to review the vacant seats and make suggestions for potential members. <p>Chair Knox asked if the meeting start time might be a variable. Dr. Seidman responded the start time could be changed with the consensus of the Committee.</p>	

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	<p>Chair Knox asked for an update on the AB-11 bill. Dr. Seidman responded AB-11 will be an agenda item for May's meeting.</p> <p>Dr. Seidman shared that Dr. Diane Tanaka will be a great asset to the Committee as she has many years of experience as an adolescent medicine physician.</p> <p><u>Motion CHC 100.0318</u> To approve the nomination of:</p> <ul style="list-style-type: none"> • Diane Tanaka, MD, representing Adolescent Health Seat 	<p>Approved unanimously by roll call. 7 AYES</p>
COMMITTEE ISSUES		
<p>CHILDHOOD IMMUNIZATION STATUS (CIS) COMBO 3 PERFORMANCE IMPROVEMENT PROJECT</p> <p>Carolina Coleman, <i>Quality Improvement Project Manager</i></p>	<p>Carolina Coleman, <i>Quality Improvement Project Manager</i>, provided the Committee an introduction on the Childhood Immunization Status (CIS) Combo 3 Performance Improvement Project:</p> <ul style="list-style-type: none"> • Medi-Cal Performance Improvement Projects (PIPs) are required by the California Department of Health Care Services and are focused on the Healthcare Effectiveness Data and Information Set (HEDIS) measures • Aims to evaluate intervention in short period of time • L.A. Care selected the following topics for Fall 2017- June 2019: <ul style="list-style-type: none"> ○ Diabetes medication adherence for African American members ○ Childhood Immunization Status- Combo 3 (CIS-3) in the San Gabriel Valley • The SMART Aim is by June 30, 2019, increase the rate of CIS-3 completion by age two in the San Gabriel Valley from 40.9% to 51%. • The biggest issue is data capture due to underutilization of California Immunization Registry (CAIR) and CAIR 2 <p>Member Uyeda noted that patients change providers which creates problems for the provider that inputs the data into CAIR. If the provider does not have information about all of the immunizations, then the data entered is shown as incomplete. Another issue is the potential for error when transcribing the student's immunization records from the yellow cards to CAIR. The hope is that physicians who provide immunizations to children from birth to five years' old are inputting data correctly and completely. Dr. Seidman added that there has been great improvement with CAIR 2, although there is inadequate funding for CAIR.</p>	

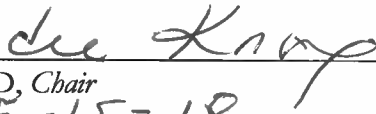
AGENDA ITEM/ PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>Ms. Coleman continued her report:</p> <ul style="list-style-type: none"> • DTaP & PCV are the antigens least likely to be completed • 87% of noncompliant members are missing more than one dose of any antigen • Many members face delays and/or gaps in enrollment • Vaccines given in first few days of life are often linked to mom • Vaccine supply issues • Harder to get parents to come back after baby is 12 months old • Currently looking into the disparities in San Gabriel Valley and Pomona regions, especially in the Chinese community <p>Member. Puffer suggested staff work with Chinatown Service Center.</p> <p>Ms. Coleman noted that staff has reached out to physicians identified as high volume but low performance to ask if they use CAIR. There is an impression that the providers are not open to using electronic records. Most of the physicians belong to a particular medical group that in the past has not been cooperative.</p> <p>Next steps:</p> <ul style="list-style-type: none"> • Health Services Advisory Groups will review Process Map and Failure Modes Analysis • Determine intervention • Start intervention testing <p>Member Uyeda suggested that if there are known independent practice association that are more problematic they could try to find a way to incentivize them through the Pay for Performance program. Dr. Seidman noted that immunization rate is one of the group incentive program measures. There is also opportunity to intervene directly with the physicians.</p> <p>Member Mutafyan suggested presenting this information in the Department of Children and Family Services (DCFS), Asian Pacific Unit office located in Pasadena as they focus on the community that shows disparity in immunization data records.</p> <p>Dr. Seidman noted that L.A. Care is always trying to engage nontraditional partners in this effort. L.A. Care is working on addressing gaps in care by training call center staff and regional center case managers when interacting with members to help address gaps</p>	

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	<p>in care. Partnering up with DCFS would be another great opportunity to address gaps in care with our members.</p> <p>Member John shared that one of the most significant First 5 programs is around home visiting. She suggested looking into programs that are currently operating. She noted that they work in the San Gabriel Valley with the Pacific Asian Counseling Services.</p> <p>Member Puffer shared that the Every Child By Two campaign was very successful and encouraged further review of the marketing. She added that The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) offices in those communities could play an important role as they interact with new mothers which will be a great opportunity for intervention. She also suggested that L.A. Care look into the different dialects spoken by providers in the Chinese community.</p> <p>Chair Knox shared that she runs a team for the county called Transforming Clinical Practice Initiative (TCPI) coaches, which is also an L.A. Care project. An idea is to use the TCPI coaches to look into this situation to possibly find a root cause of the disparity.</p> <p>Dr. Seidman asked Committee members their thoughts on offering immunizations at L.A. Care's Family Resource Centers.</p> <p>Member Puffer responded it is good to provide immunizations wherever possible. She shared that in the past they would offer immunizations at WIC offices.</p> <p>Member Chandler responded that she believes as long as the child's primary provider is aware that the immunizations were given. If the primary physician is not on CAIR relaying that information might become tricky.</p> <p>Dr. Seidman shared that L.A. Care is in the process of <u>contracting with Minute Clinic, which has 14 locations through L.A. Count, to offer an alternative to urgent care issues.</u> The Minute Clinics also offer immunizations, and he has recommended limiting those immunizations to adults. He will invite Ms. Coleman in a future meeting to update the Committee.</p>	
ADJOURNMENT	The meeting was adjourned at 10 a.m.	

Respectfully submitted by:

Malou Balones, *Committee Liaison, Board Services*
Jennifer Carabali, *Committee Liaison, Board Services*
Linda Merkens, *Manager, Board Services*

APPROVE



Lyndee Kno hD, *Chair*
Date Signed: 5-15-18

APPROVED