

# BOARD OF GOVERNORS

## Compliance & Quality Committee Meeting

### Meeting Minutes – November 16, 2017

L.A. Care Health Plan CR 1025, 1055 W. Seventh Street, Los Angeles, CA 90017



**L.A. Care**  
HEALTH PLAN

#### Members

Kimberly Uyeda, MD, *Chairperson*

Al Ballesteros, MBA\*

Stephanie Booth, MD

Hilda Perez

G. Michael Roybal, MD, MPH

\* *Absent* \*\* *Teleconference*

#### Management

John Baackes, *Chief Executive Officer*

Richard Seidman, MD, MPH *Chief Medical Officer*

Augustavia J. Haydel, *General Counsel*

AGENDA ITEM/ PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<b>CALL TO ORDER</b>	Chair Kimberly Uyeda, MD, called the meeting to order at 2:12 p.m.	
<b>APPROVAL OF MEETING AGENDA</b>	The Agenda was approved as submitted.	<b>Approved unanimously. 4 AYES (Booth, Perez, Roybal and Uyeda)</b>
<b>APPROVAL OF MEETING MINUTES</b>	The May 18, 2017 meeting minutes were approved as submitted.	<b>Approved unanimously. 4 AYES</b>
<b>CHAIRPERSON'S REPORT</b>	There was no Chairperson report.	
<b>CHIEF EXECUTIVE OFFICER'S REPORT</b>	John Baackes, <i>Chief Executive Officer</i> , reported that he expects continued legislative action related to Medicaid and the Affordable Care Act (ACA). The US Senate has included in the proposed tax reform legislation a repeal of the individual mandate. The financial penalties have coerced many younger healthier people to enroll in health care coverage. Repealing the mandate could reduce the enrollment for those members, significantly impacting the ACA. He assured Board Members that L.A. Care will continue to diligently follow legislative actions. The America's Health Insurance Plans board of directors agreed that a top priority in 2018 will be to protect Medicaid and develop appropriate Medicaid reform legislation. L.A. Care will continue to protect health care coverage for its members. Additional information will be provided at the	

APPROVED

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	<p>December Board meeting.</p> <p>Member Roybal asked if there are any plans in working with National Association of Medicaid Directors. Mr. Baackes responded that L.A. Care will work with all groups that support its goals.</p>	
<p><b>CHIEF MEDICAL OFFICER'S REPORT</b></p> <p>Richard Seidman, MD, MPH</p>	<p>Richard Seidman, MD, MPH, <i>Chief Medical Officer</i>, reported:</p> <ul style="list-style-type: none"> <li>• Dr. Matthew Emons and Dr. Asal Sepassi have left L.A. Care. Dr. Katrina Miller, <i>Chief Medical Information Executive</i>, is serving as interim director of Quality Improvement. Michael Brodsky, MD, has joined L.A. Care as Medical Director, Behavioral Health. Nai Kasick is Senior Director, Health Educator, Cultural and Linguistic Services. Other department changes will be made to promote increased efficacy for population health.</li> <li>• L.A. Care is ready to launch the Clinician &amp; Groups Consumer Assessment of Healthcare Providers and System (CG CAHPS) survey, pending Department of Health Care Services (DHCS) approval of cover letters.</li> <li>• The Member Experience Workgroup has recommended interventions: <ol style="list-style-type: none"> <li>1. Primary Care Physician (PCP) and Specialist pilot surveys, planned for early 2018.</li> <li>2. Response to complaint issues in the public forum. Members and providers are placing negative comments about L.A. Care online. The workgroup felt L.A. Care needs to respond to the concerns and provide information on contacting L.A. Care.</li> <li>3. A one-year mapping of all member touch points for each line of business. This will demonstrate the member experience to evaluate and think about balancing messaging.</li> </ol> </li> <li>• The 2017 Value Initiative for IPA Performance (VIIP) Reports were sent to independent physician associations (IPAs), Department of Health Services (DHS) and Kaiser in October. Plan Partners released reports to their contracted IPAs in the same week. All participating physician groups (PPGs) have submitted updates to the original action plans. Final reports on results of action plans are due December 15. L.A. Care has had meetings with PPGs and set up quarterly Quality Improvement (QI) meetings with high volume PPGs. A final VIIP webinar is scheduled in November 2017. Physician, Clinic, PPG and Plan Partner incentive payments will be released in November.</li> <li>• Interventions are underway for Healthcare Effectiveness Data and Information Set</li> </ul>	

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	<p>(HEDIS) improvements. The QI department will conduct an analysis of current interventions in early 2018 and ensure that they are aligned to the enterprise goals and provide a focused approach to improvement.</p> <ol style="list-style-type: none"> <li>1. Adult Prevention and Screening Workgroup is working on intervention efforts for all reportable measures: <ul style="list-style-type: none"> <li>▪ Mailers and robo calls for breast cancer screening, with member incentive program for L.A. Care Covered members</li> <li>▪ Member incentive program (partnered with DHCS) for cervical cancer screening</li> <li>▪ Provider mailer and robo calls were done to address chlamydia screening</li> <li>▪ Collaborating with Pharmacy for outreach on flu vaccination reminders</li> <li>▪ Reminders for both osteoporosis and rheumatoid arthritis to providers</li> </ul> </li> <li>2. Access and Availability Workgroup: <ul style="list-style-type: none"> <li>▪ Increased monitoring of the provider network between annual audits</li> <li>▪ Collaboration with Provider Network Management on cleaning up provider database prior to sending provider listing to vendor for audit</li> <li>▪ Assurance of having results to feed VIIP and P4P programs as it relates to access to care</li> <li>▪ Closer tracking and corrective action for those provider with complaints about access to care</li> <li>▪ Set-up and completion of CG CAHPS survey in fourth quarter <ul style="list-style-type: none"> <li>✓ Prepare staff to follow up on member issues</li> <li>✓ Added questions for analytic breakdowns of areas we can improve</li> </ul> </li> <li>▪ Development of PCP and specialist care providers post visit survey</li> <li>▪ Complete a member experience mapping of touch points to gain a true picture of the member experience and look for opportunities to improve messaging and balance our touch points.</li> <li>▪ Develop a process to respond publicly to negative opinions online</li> </ul> </li> <li>3. Clinical Care Workgroup <ul style="list-style-type: none"> <li>▪ Identification of asthma members who are not filling medication and provide this data to PCP to reach out to member about compliance</li> <li>▪ Diabetic annual mailing to members and providers, identification of those with high HgbA1c or no test and notify PCP, provide Facebook ads, and partner with vendor for additional outreach.</li> <li>▪ Educational poster for controlling high blood pressure and pocket card</li> </ul> </li> </ol>	

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	<p>guidelines were sent to provider offices</p> <p>Chair Uyeda asked if pharmacies can provide flu shots. Dr. Seidman responded they are allowed to provide the flu shot, and L.A. Care is looking to increase immunization scores.</p> <p>Member Booth asked if there is a data base to enter them where physicians can check for vaccines, mammogram and other routine checks. Dr. Seidman responded that physicians can use the California Immunization Registry to see vaccine records. L.A. Care does not transcribe patient records in the registry, but all providers do as part of their participation with VFC. Currently there is no database available for mammograms.</p> <p>Dr. Miller shared that the Customer Solution Center staff will soon be able to see any gap in care when they review a member's profile. They will be trained to help assist members in scheduling care services.</p> <p>Member Roybal asked about using social media and HIPPA regulations. Dr. Miller responded that staff is working with the communications department regarding social media.</p> <p>Member Perez invited Dr. Seidman to attend an Executive Community Advisory Committee (ECAC) meeting to talk about the new member experience projects. Dr. Seidman responded that he will provide an update at the January ECAC meeting.</p>	
<p><b>CHIEF COMPLIANCE OFFICER REPORT</b></p> <p>Elysse Palomo</p>	<p>Elysse Palomo, <i>Senior Manager, Regulatory Audits and Governance</i>, reported that the Compliance Department is engaged in the following key activities:</p> <ul style="list-style-type: none"> <li>• Annual DHCS Audit shows continued improvement. L.A. Care has continued a downward trend in audit findings – reduced from 50 for the 2015 audit to 15 for the 2016 audit, and an estimated 13 audit findings for 2017. Nearly 40% (5 of 13) of the anticipated 2017 findings are related to behavioral health, which is a new audit category not previously included in the annual DHCS audit.</li> <li>• The Annual Disaster Recovery test was conducted on October 28 at L.A. Care's offsite location in Cypress, California. L.A. Care successfully achieved connectivity to its backup system located in Scottsdale, Arizona. Staff from across the organization were able to log into key computer systems and conduct basic test exercises. Future activities will involve more challenging test exercises that will involve cross-functional tasks and access to L.A. Care systems from multiple</li> </ul>	

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	<p>locations (Cypress, California, Scottsdale, Arizona, staff homes around Los Angeles and L.A. Care's Family Resource Centers) and updating the enterprise-wide business continuity plan.</p> <ul style="list-style-type: none"> <li>• Due to staff changes, the anticipated timetables to complete development of 2018 Risk Assessment and Risk Management Plan have not been achieved. The 2017 risk assessment was completed and approved by the Internal Compliance Committee. A new senior director responsible for operations support (including risk management and disaster recovery) joined the department on October 31, 2017.</li> <li>• Internal Compliance Committee has established a Sanctions Committee, charged with evaluating potential disciplinary action for plan partners and participating provider groups. The first referrals to the committee are under development.</li> <li>• L.A. Care is developing a dashboard of compliance metrics for reporting to the Internal Compliance Committee and the Compliance and Quality Committee of the Board of Governors.</li> <li>• The Compliance Department is continuing to re-engineer the department, with focus on ensuring staff engagement with all business units through the liaison program, and evaluations based on core competencies and evidence of competency, urgency and communication skills.</li> <li>• Yasamin Hafid joined the Compliance Department as Senior Director and will be responsible for Regulatory Analysis and Communication, Marketing and Fulfillment and Risk Management/Business Continuity. Ms. Hafid has significant experience with health plans, as Compliance Officer at Molina Healthcare, and Compliance and Business Integrity Officer at the Veterans Administration of Greater Los Angeles Healthcare System.</li> </ul> <p>Member Booth asked for more information about The California Department of Justice report regarding excessive cardiac procedures. Ms. Palomo will get more information about that and report back to the Committee at its next meeting.</p>	
<b>COMMITTEE ISSUES</b>		
<b>VIIP RESULTS AND ACTION PLAN</b>  Katrina Miller, MD	<p>Dr. Miller reported on the Value Initiative for IPA Performance (VIIP) and Pay for Performance (P4P) programs. <i>(Copy of her report may requested by contacting Board Services.)</i></p> <ul style="list-style-type: none"> <li>• Medi-Cal and Medicare are moving to value-based contracts and reimbursement. L.A. Care's IPAs' performance are widely variable.</li> </ul>	

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	<ul style="list-style-type: none"> <li>• L.A. Care is accredited with NCQA. The goal is to achieve Commendable status.</li> <li>• IPA scorecard ranks all 58 delegated entities, revealing opportunities for improvement.</li> <li>• VIIP work group is a cross functional team with quality improvement incentives and clinical incentives.</li> <li>• The following five domains on the score card sum up the total of 100 points: <ul style="list-style-type: none"> <li>○ Access and Availability</li> <li>○ HEDIS</li> <li>○ Member Satisfaction</li> <li>○ Utilization</li> <li>○ Encounter Timeliness</li> </ul> </li> <li>• Since the VIIP domains are similar to the IPA P4P Program, the two programs will be merging and the score report will be the same.</li> <li>• All IPAs will be eligible for a P4P incentive payment regardless of membership, as long as they meet the required criteria for each measure.</li> <li>• Kaiser Permanente is included in the list of IPAs that are measured for performance.</li> <li>• The County and Kaiser are part of VIIP but not P4P.</li> <li>• Health Plans are required to have an action plan to ensure that they are working on increasing their scores. The action plan includes the goals, plan metrics and responsible departments as well as target dates of completion.</li> <li>• Dr. Miller summarized the VIIP plus P4P program timeline.</li> <li>• There was a significant improvement from 2015 to 2016.</li> <li>• Next steps for the program are: <ul style="list-style-type: none"> <li>○ Program assessment, optimization</li> <li>○ Consider using VIIP for auto-assignment and potential terminations</li> <li>○ Develop VIIP and/or P4P for LACC and CMC</li> </ul> </li> </ul> <p>Chair Uyeda asked if providers know their ranking number. Dr. Miller responded providers are given their ranking number for comparison, but other providers are not named.</p> <p>Member Booth asked about accountability. Dr. Miller responded that the score will determine if L.A. Care will consider termination of contracts.</p> <p>Member Perez expressed she is thrilled to see that the organization is trying different</p>	

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	<p>ways to ensure providers are providing the best service to members. as that is the overall goal and mission of L.A. Care.</p> <p>Member Roybal asked if L.A. Care provides counseling for providers to attain the greatest gains, and what protections are in place for members who may be dragging down a provider's score. Dr. Miller responded that L.A. Care provides education and training in various ways.</p>	
<b>ADJOURN TO A CLOSED SESSION</b>	<p>Augustavia J. Haydel, Esq., <i>General Counsel</i>, announced the following items to be discussed in closed session. A report is not expected in open session. The Committee adjourned to closed session at 3:40 p.m.</p> <p>CONFERENCE WITH LEGAL COUNSEL—ANTICIPATED LITIGATION Significant exposure to litigation pursuant to Section 54956.9(d)(2) Ralph M. Brown Act: two cases</p> <p>PEER REVIEW Welfare &amp; Institutions Code Section 14087.38(n)</p>	
<b>RECONVENE IN OPEN SESSION</b>	The Committee reconvened in open session at 4:06 p.m. There was no report on action taken during the closed session.	
<b>PUBLIC COMMENT</b>	There was no public comment.	
<b>ADJOURNMENT</b>	The meeting was adjourned at 4:09 p.m.	

Respectfully submitted by:

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

APPROVED BY:

  
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Kimberly Uyeda, MD, *Chairperson*  
Date Signed: March 19, 2018