

BOARD OF GOVERNORS
Children's Health Consultant Advisory Committee
Meeting Minutes –May 16, 2017

1055 W. Seventh Street, Los Angeles, CA 90017



L.A. Care
 HEALTH PLAN

Members

Lyndee Knox, PhD, *Chair*
 Kimberly Uyeda, MD, MPH, *Vice Chair*
 Edward Bloch, MD*
 Maria Chandler, MD, MBA*
 Toni Frederick, PhD
 Matthew Emons, MD

Reena John
 Gwendolyn Ross Jordan*
 Nayat Mutafyan**
 Maryjane Puffer, BSN, MPA*
 Diana Ramos, MD
 Richard Seidman, MD, MPH, CMO

* 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 8:30 a.m.	
APPROVAL OF MEETING AGENDA	Chair Knox noted that the chair election will be moved to the July meeting to allow the participation of the Committee members that did not attend this meeting. Today's Agenda was approved as amended.	Approved unanimously by roll call. 7 AYES (Emons, Frederick, John, Knox, Mutafyan, Seidman and Uyeda).
PUBLIC COMMENTS	There were no public comments.	
APPROVAL OF MEETING MINUTES	The minutes for the November 15, 2016 meeting were approved as amended.	Approved by roll call. 6 AYES (Emons, Frederick, John, Knox, Mutafyan and Uyeda). 1 ABSTENTION (Seidman).
CHIEF EXECUTIVE OFFICER'S REPORT	John Baackes, <i>Chief Executive Officer</i> , welcomed Richard Seidman, MD, MPH, <i>Chief Medical Officer</i> , to the Committee. Mr. Baackes reported that the US House of	

APPROVED

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	<p>Representatives passed a health care bill last week. The bill will now be considered by the Senate. There are several areas of the bill that concern L.A. Care because of potential effects on Medicaid:</p> <ul style="list-style-type: none"> • Changes in the federal portion of funding will cause significant increases in cost to states that over time may result in reduction of benefits or enrollment. California estimates that by 2020, the funding will be reduced by \$700 million. • Increased frequency of eligibility redetermination and new rules for continued coverage will also decrease federal funding. • Cuts in funding for In Home Support Service workers of \$400 million. • Elimination of the individual health care mandate and taxes that have been used to support premium subsidies will weaken the health benefit exchanges. <p>There are opportunities for the bill to be derailed. This bill will change the Medi-Cal structure and goes beyond repeal and replacement of the Affordable Care Act.. If the bill becomes law there could be 24 million uninsured people. The cost increase for Medi-Cal is higher than the consumer price index, and the program will become unsustainable. L.A. Care staff continues to be vigilant and proactive through trade associations and will lobby to preserve coverage for its members.</p>	
<p>CHIEF MEDICAL OFFICER'S REPORT Richard Seidman, MD, MPH</p>	<p>Dr. Seidman reported the following: Health Services Staffing</p> <ul style="list-style-type: none"> • Dr. Carter, former CMO, and Lynnette Hutcherson, Senior Director of Health Services, left L.A. Care on May 2. • David Wedemeyer, Sr. Directory of Quality, started March 10, replacing Jim Banks who will assist with NCQA until May 30. • Dr. Alex Li, Sr. Medical Director of Health Services, will begin on May 22. • Dr. Michael Brodsky, Medical Director of Behavioral Health, will begin on May 30. <p>National Committee for Quality Assurance (NCQA) accreditation</p> <ul style="list-style-type: none"> • Onsite survey will take place May 22 and 23. • Delegates have been selected for file review. • Files have been selected, allowing ample time to prepare. • Currently, we are in the midst of internal file review. <p><i>(Diana Ramos, MD joined the meeting)</i></p>	

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	<p>Quality Improvement (QI)</p> <ul style="list-style-type: none"> • A provider mailing launched in March, advising providers to assess asthma control and adjust medications where appropriate based on a QI department report showing members with an Asthma Medication Ratio less than 0.5. Disease Management is collaborating on member outreach. • A similar mailing was sent in late April, prompting primary care providers to review diabetes therapy and make appropriate adjustments for members with elevated A1-C values. • QI staff has been working closely with Healthcare Outcomes & Analysis department to improve the timely identification for member outreach of pregnant women without referrals, labs or pharmacy. eConnect will be leveraged to identify members with recent live births to promote postpartum care. <p>Social Media Campaign</p> <ul style="list-style-type: none"> • A second pilot for a social media campaign is planned in collaboration with Communications staff for cervical cancer Screening. The first pilot for chlamydia screening in March 2016 was implemented by Health Education staff. In 30 days the message displayed more than 61,000 times, generated 1,107 unique views, 200 “likes” and 18 shares with the user’s network of Facebook friends. These campaigns target specific age ranges in low-income zip codes in L.A. County. <p>Nai Kasick, <i>Director Health Education, Cultural & Linguistic Services</i>, added that the chlamydia measure for HEDIS is targeted to 16 to 24 year olds and this campaign is targeted to those between the ages of 18 and 24. L.A. Care has a different outreach for 16 and 17 year olds that is directed towards the parents. The campaign will be implemented for three consecutive months for a week at a time.</p> <p>Member Uyeda asked about directly communicating with 16 and 17 year olds. Ms. Kasick responded that parental consent would be needed to communicate directly, but the Facebook message can be read by anyone.</p> <p>Member Ramos shared that L.A. County has a preconception text program called La Familia. It is in both English and Spanish languages, providing information on contraception, healthy living, relationships and nutrition. Participants can text La Familia to 55000 and they will receive free text messages for three months.</p> <p>Dr. Seidman noted that a challenge is completing tests for patients between the ages of 16 and 24 who do not declare themselves sexually active. At his previous position with</p>	

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	<p>Northeast Valley Health Corporation, the standing order was for all patients 16 to 24 years of age, male or female, whether they declared sexual activity or not to be screened for HIV and chlamydia. Dr. Seidman asked the Committee members their thoughts about targeting young men in the campaign as well. Member Chandler shared that her clinic did not find it worthwhile to screen every single person 16 to 24 years of age. They are now targeting the screening and using the CLAIM system to identify sexually active females. Screening all uses a lot of resources. Dr. Seidman noted that the cost for laboratory testing is borne by the physician group. Member Chandler shared that many patients still want the screening, even if they say that they are not sexually active.</p> <p>Member Ramos shared that increased education for each male partner drives action on the part of the female partner. The La Familia program targets both males and females.</p> <p>Member Uyeda shared that the school based health centers are doing a PCORI study on reproductive health care for sexual health in general, including screening for STIs. iPads are available in the waiting rooms for teens to complete a risk assessment while they are waiting to see the doctor. Depending on the response, the provider can assess the individual's risk.</p> <p><i>(Chair Knox left the meeting)</i></p> <p>Incentives</p> <ul style="list-style-type: none"> Physician P4P payments totaling \$17,600,182 were mailed to 829 physicians and 48 community clinics for 2015. Payments and reports for 2016 are scheduled for Q4 2017. The program has been finalized for 2017 and was announced to providers on April 12. To more closely align with L.A. Care's Value Initiative for IPA Performance (VIIP), a component was added for Access and Availability. Providers who are non-compliant with the Access and Availability Surveys will forfeit a portion of their incentive bonus. <p>Matthew Emons, MD, <i>Medical Director, QI & Health Assessment</i>, noted that the new Access and Availability component was suggested by IPA staff to spur improvement among noncompliant physician practices.</p> <p>Dr. Uyeda asked about the average incentive payment. Dr. Seidman responded that the average is about one dollar per member per month.</p>	

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	<p>Member John asked if access and availability measures are similar to the Consumer Assessment of Healthcare Providers and Systems (CAHPS) measures and are related to member experience. Dr. Emons responded that member perception of access is a component of CG-CAHPS and is collected through office surveys, including after-hours access and urgent care appointment availability.</p> <p>Dr. Seidman continued his report:</p> <ul style="list-style-type: none"> • LA P4P payments totaling \$15,380,639 were mailed to 40 PPGs for 2015. These payments covered three domains: Patient Experience (20%), Appropriate Resource Use (10%) and Clinical Quality-HEDIS (70%). Payments and reports for 2016 are scheduled for Q4 2017; these will have two domains, Clinical Quality-HEDIS (905) and Appropriate Resource Use (10%). • LA P4P, was merged into VIIP to create VIIP+P4P. This will fully align the program for 2017 and 2018. <p>Member Chandler shared that she was notified that they are trying to make new STD testing more accessible for clinics. She suggested finding ways to make it easier to have test results submitted to L.A. Care. Dr. Seidman noted that it is always difficult to get the point of service testing data to the plan in a manner where it can be credited for the incentives. There are new tools being reviewed which could improve data submission.</p>	
COMMITTEE ISSUES		
SUBCOMMITTEE DISCUSSION	This item was deferred to the next meeting.	
<p>Help Me Grow</p> <p>Wendy Schiffer</p>	<p>Wendy Schiffer, <i>Senior Director, Strategic Planning</i>, reported on Help Me Grow (<i>a copy of the proposal can be obtained by contacting Board Services</i>):</p> <p>Help Me Grow (HMG) is a system that promotes early identification and connects at-risk children to the community-based programs and services they need.</p> <ul style="list-style-type: none"> • Supports providers and families to promote early detection. • Provides a central access point for child development information and referrals. • Supports a coordinated system of care by creating greater access and collaboration. <p>HMG has four core components</p> <ul style="list-style-type: none"> • Child health provider outreach • Community outreach 	

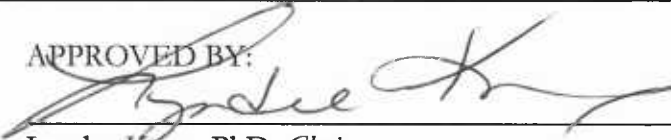
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	<ul style="list-style-type: none"> • Data collection and analysis • Centralized access point <p>Cross sector collaboration</p> <ul style="list-style-type: none"> • Leadership Council and workgroups have been launched that includes 30 agencies. • Meet on a regular basis through fall 2017 and are responsible for shaping the creation of HMA-LA. <p>L.A. Care proposed pilot project goals and phases</p> <ul style="list-style-type: none"> • Educate providers on American Academy of Pediatrics guidelines and validated screening tools. • Increase children screened using validated tools. • Improve coding of developmental screening. • Educate families and providers on available resources and navigating the system. • Phase 1: pre-discovery; practice workflow observation • Phase 2: small number of providers with high 0-5 membership • Phase 3: rollout to more providers • Pre-discovery phase (July 2017-December 2017) <ul style="list-style-type: none"> ○ Funded by L.A. Care (CHIF) ○ Capture learning from gap analysis, First 5 LA first connections investment ○ Informed by HMG-L.A. provider work group • Pilot project (January 2018; duration to be determined) <p>HMG current status</p> <ul style="list-style-type: none"> • HMG-L.A. Leadership Council and workgroups continue to meet • Presentation by Orange and Alameda counties • Pilot project current status <ul style="list-style-type: none"> ○ First 5 LA and L.A. Care Boards approved extension of Healthy Kids contract for up to 12 months, with potential use of the funding for HMG aligned pilot project ○ RFA for phase one to be released May 10 ○ First 5 LA approval for Strategic Partnership – Summer 2017 ○ Leveraging opportunities being explored <p>Member Uyeda asked about funding from First 5 LA to L.A. Care, initially for the Healthy Kid program. Ms. Schiffer shared that there is discussion about funding.</p>	

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	<p>Member Uyeda suggested that the mechanisms of recouping cost should be reviewed. She added that school districts are great at leveraging.</p> <p>Member John shared that the First 5 LA strategic plan includes quality and systems change and suggests reducing funding for direct services. This Help Me Grow model fits with that vision.</p> <p>Member Uyeda noted that a gap analysis is urgent to determine what resources are lacking and to inform providers when they are conducting the screening.</p> <p>Member John shared that there are 25 Help Me Grow statewide groups and 25 states in the nation have a Help Me Grow program.</p> <p>Dr. Seidman noted that advocacy is needed to increase resources. Ms. Schiffer noted that she will provide updates to this Committee.</p>	
2017 CHILDREN'S HEALTH CONFERENCE	<p>Dr. Emons shared that the 2017 Children's Health Conference will be held June 24 in Alhambra with 150 to 200 participants expected. The first half of the agenda is consideration of California Children Health Services, immunization for children and adolescents, and preventive services. Three other topics will be considered: childhood obesity and diabetes, childhood mental health and substance abuse, and autism spectrum disorder. Dr. Emons will send information to Committee members.</p> <p>Member Ramos shared that they have a new Public Health Director, Barbara Ferrer, who will focus on decreasing infant mortality, decreasing gonorrhea and chlamydia, and the environmental health aspects of reproduction.</p>	
ADJOURNMENT	The meeting was adjourned at 10:00 a.m.	

Respectfully submitted by:

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

APPROVED BY:


 Lyndee I. Hoax, PhD, *Chair*

Date Signed: 1-16-18