

BOARD OF GOVERNORS

Compliance & Quality Committee Meeting

Meeting Minutes – August 15, 2019

L.A. Care Health Plan CR 100, 1055 W. Seventh Street, Los Angeles, CA 90017



L.A. Care
HEALTH PLAN

Members

Stephanie Booth, MD, *Chairperson*
Al Ballesteros, MBA
Christina R. Ghaly, MD *
Hilda Perez **
Courtney Powers, JD *
Ilan Shapiro, MD

Management

Richard Seidman, MD, MPH *Chief Medical Officer*
Augustavia J. Haydel, *General Counsel*
Thomas Mapp, *Chief Compliance Officer*
James Kyle, MD, *Medical Director, Quality, Quality Improvement*
Elysse Palomo, *Director, Regulatory Affairs, Compliance*
* *Absent* ** *Teleconference*

AGENDA ITEM/ PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
CALL TO ORDER	Stephanie Booth, MD, <i>Committee Chairperson</i> , called the meeting to order at 2:03 pm. She announced that members of the public may address the Committee on each matter listed on the agenda before or during the Committee's consideration of the item, or on any other topic at the Public Comment section.	
APPROVAL OF MEETING AGENDA	The Agenda was approved as submitted.	Approved unanimously. 4 AYES (Ballesteros, Booth, Perez, and Shapiro)
PUBLIC COMMENT	There was no public comment.	
APPROVAL OF MEETING MINUTES	The May 16, 2019 meeting minutes were approved as submitted.	Approved unanimously. 4 AYES
CHIEF MEDICAL OFFICER'S REPORT Richard Seidman, MD, MPH	Richard Seidman, MD, MPH, <i>Chief Medical Officer</i> , referred to his written report (<i>a copy of the report can be requested from Board Services</i>): <u>Health Homes Program</u> At the end of July 2019, 153 members had enrolled in the Health Homes program with an expectation of reaching 500 enrollees by end of September, 2019. As of August 14 there are 285 enrolled in the program.	

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	<p>Chairperson Booth asked about how the enrollees are referred. Dr. Seidman responded that they are coming from a variety of sources. The referral network has 21 Community Based Care Management Entities. There will be a second round of entities going live on October 1.</p> <p><u>Access to Care (ATC)</u> Advanced Access is a scheduling methodology that builds in same day access to care and is preferred over more traditional appointment scheduling practices. L.A. Care has an Advanced Access policy and is gathering information about which primary care physicians (PCPs) in L.A. Care’s network offer Advanced Access. In partnership with L.A. Care’s contracted IPAs and Medical Groups, L.A. Care is requesting signed attestations from providers offering Advanced Access scheduling. As an incentive, PCPs that offer advanced access will be deemed compliant in the 2019 Provider Appointment Availability Survey. To date, approximately 1,100 providers have indicated that they offer Advanced Access. Final results are due in mid-July.</p> <p>Member Ballesteros asked when it is best for providers to use this method. Dr. Seidman responded that the goal is to build a schedule template with appointments and leave some slots open for same day appointments. Providers will rely on historical information to determine the number of appointments they should leave open each day.</p> <p>Member Shapiro stated that patients are responding really well to this type of appointment access. Dr. Seidman noted that members who perceive that they need medical care and are not able to get in to see the PCP may use the emergency room.</p> <p><u>HEDIS/CAHPS 2019 Preliminary Results</u> Measurement Year (MY) 2018 Healthcare Effectiveness Data and Information Set (HEDIS) and Consumer Assessment of Healthcare Providers and Systems (CAHPS) data has been submitted to the National Commission on Quality Assurance (NCQA). L.A. Care anticipates maintaining Commendable status for Medi-Cal and Accredited status for the Cal MediConnect and Covered California lines of business. More detailed presentations will be shared at the Compliance & Quality Committee later this year.</p> <p><u>Incentives</u> The physician P4P team is reviewing new measures included in the Managed Care Accountability Set (MCAS) to consider adding the measures to L.A. Care’s incentive program. After measure testing is completed, selected measures will be added to the program descriptions during the mid-year update (around September) for reporting</p>	

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	<p>purposes only. Performance on new measures added in the mid-year update will not be factored into incentive payment calculations until MY 2020. Providers are expected to give vaccinations to patients in the immunization registry. Pharmacies are also providing services to patients that are in the registry.</p> <p>Member Shapiro stated that the best way to calculate cost efficiency is to show the cost to provide these immunizations to patients in the registry. He suggested having an incentive for Telehealth.</p> <p>Chairperson Booth noted that L.A. Care pays for the vaccine but does not update the California Immunization Registry. Dr. Seidman stated that as an entity that administers the registry, L.A. Care does not populate the registry, rather, the individuals that actually administer the immunization are responsible. There is a lot of detailed information that is necessary to populate the registry, which is why providers may elect not to adopt it.</p> <p><i>The above paragraph was corrected by Chairperson Booth at the November 7, 2019 meeting of the Board of Governors.</i></p>	
<p>MANAGED CARE ACCOUNTABILITY SET (MCAS)</p> <p>James Kyle, MD.</p>	<p>James Kyle, MD, <i>Medical Director, Quality, Quality Improvement</i> presented on the Managed Care Accountability Set (MCAS). <i>(A copy of his written report can be requested from Board Services.)</i></p> <p><u>Managed Care Accountability Set</u></p> <ul style="list-style-type: none"> • Formerly known as the External Accountability Set (EAS) • Based on the Centers for Medicare and Medicaid Services Adult and Child Core Set measures • Effective January 1, 2019 for MY 2019 • Measures were finalized by California Department of Health Care Services (DHCS) on May 29, 2019 • Increase in reporting for seven new measures <p>Progressively increasing oversight and sanctions, including financial penalties, will be imposed for measure performance below the Minimum Performance Level.</p> <p>Member Shapiro stated that he is testing birth health calendars as a sort of check list to ensure newborns are going to all necessary appointments. He also suggested creating an application with a calendar to remind patients to see their pediatrician.</p>	

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	Dr. Seidman stated that there is an application that L.A. Care is exploring called Wild Flower to assist women with postpartum care and infant health checks.	
CHIEF COMPLIANCE OFFICER REPORT Thomas Mapp Elysse Palomo	<p>Thomas Mapp, <i>Chief Compliance Officer</i>, asked Elysse Palomo, <i>Director, Regulatory Affairs, Compliance</i>, to present his written report included in the meeting materials. <i>(A copy of his written report can be requested from Board Services).</i></p> <p><u>Key Compliance Initiatives and Activities</u></p> <ul style="list-style-type: none"> • 2019 DHCS Medical Audit for Medi-Cal onsite audit occurred from July 15-26, 2019. DHCS verbally listed the preliminary findings during the closing interview on July 26, 2019. A written report of the findings has not been released. • L.A. Care continues to conduct ongoing monitoring of its internal business units and delegates to ensure correction of deficiencies in preparation for the validation audit by Centers for Medicare and Medicaid Services (CMS) for Cal MediConnect (CMC). • On July 30, 2019, John Baackes, <i>Chief Executive Officer</i>, announced the creation of a Delegation Oversight department within L.A. Care to centralize management of all activities to ensure delegate performance. This includes audit implementation and planning, streamlining performance monitoring, and creating an account management and communications program to ensure that L.A. Care staff speaks with one voice to the delegated entities. • During the last three years there has been steady improvement in the performance of the Appeals and Grievances Department. <p>Lisa Marie Golden, <i>Director, Customer Solution Center Appeals and Grievances, CSC Appeals & Grievance</i> presented information on CMS Appeals & Grievances Pre-CAHPS Validation Audit and Member & Provider Material Review Process (Podio) Audit.</p> <p>Member Perez stated that L.A. Care has a Facebook page and other social media pages. She asked if members who post complaints on those pages get their issues addressed. Ms. Golden responded that there is an automatic reply referring them to Member Services and providing that Department's contact information.</p>	
ADJOURN TO CLOSED SESSION	<p><i>(The following two agenda items were not discussed.)</i></p> <p>PEER REVIEW Welfare & Institutions Code Section 14087.38(n)</p>	

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	<p>REPORT INVOLVING TRADE SECRET Pursuant to Welfare and Institutions Code Section 14087.38(n) Discussion Concerning New Service, Program, Business Plan Estimated date of public disclosure: <i>August 2021</i></p> <p>CONFERENCE WITH LEGAL COUNSEL –ANTICIPATED LITIGATION Pursuant to Section 54956.9 (d) (2) of the Ralph M. Brown Act One potential case</p>	
ADJOURNMENT	The meeting was adjourned at 3:40 p.m.	

Respectfully submitted by:
Victor Rodriguez, *Board Specialist II, Board Services*
Malou Balones, *Board Specialist III, Board Services*
Linda Merkens, *Senior Manager, Board Services*

APPROVED BY:

Stephanie Booth, MD, *Chairperson*
Date Signed: _____

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 Stephanie Booth, MD, *Chairperson*
 Date Signed: 9/19/2019