NOTICE OF A
REGULAR MEETING OF THE
CALOPTIMA BOARD OF DIRECTORS’
ONECARE CONNECT CAL MEDICONNECT PLAN
(MEDICARE-MEDICAID PLAN)
MEMBER ADVISORY COMMITTEE

THURSDAY, FEBRUARY 27, 2020
3:00 P.M.

CALOPTIMA
505 CITY PARKWAY WEST, SUITE 109-N
ORANGE, CALIFORNIA 92868

AGENDA

This agenda contains a brief, general description of each item to be considered. The Committee may take any action on all items listed. Except as otherwise provided by law, no action shall be taken on any item not appearing in the following agenda.

Information related to this agenda may be obtained by contacting the CalOptima Clerk of the Board at 714.246.8806 or by visiting our website at www.caloptima.org. In compliance with the Americans with Disabilities Act, those requiring special accommodations for this meeting should notify the Clerk of the Board’s office at 714.246.8806. Notification at least 72 hours prior to the meeting will allow time to make reasonable arrangements for accessibility to this meeting.

I. CALL TO ORDER
   Pledge of Allegiance

II. ESTABLISH QUORUM

III. APPROVE MINUTES
   A. Approve Minutes of the October 10, 2019 Special Joint Meeting of the CalOptima Board of Directors’ Member Advisory Committee (MAC), OneCare Connect Member Advisory Committee (OCC MAC), Provider Advisory Committee (PAC) and the Whole-Child Model Family Advisory Committee (WCM FAC).

   B. Approve Minutes of the October 24, 2019 Regular Meeting of the CalOptima Board of Directors’ OneCare Connect Member Advisory Committee (OCC MAC).
IV. **PUBLIC COMMENT**

At this time, members of the public may address the Committee on general topics. Public Comment on posted item(s) will follow staff presentation of the item(s) to the Committee. If you wish to speak on an item contained in the agenda, please complete a Public Comment Request Form(s) identifying the item(s) and submit the form to the assistant to the OCC MAC. When addressing the Committee, it is requested that you state your name for the record. Please address the Committee as a whole through the Chair. Comments to individual Committee members or staff are not permitted. Speakers will be limited to three (3) minutes.

V. **REPORTS**

A. Consider Recommendation to Revise OneCare Connect Member Advisory Committee Chair and Vice Chair Term Lengths

VI. **CEO AND MANAGEMENT REPORTS**

A. Chief Executive Officer (CEO) Update
B. Chief Operating Officer (COO Update)
C. Chief Medical Officer (CMO) Update

VII. **INFORMATION ITEMS**

A. OneCare Connect Member Advisory Committee Member Updates
B. Health Homes Program Update
C. Intergovernmental Transfer (IGT) 9 Update
D. Medi-Cal Healthier California for All Update
E. Behavioral Health Update

VIII. **COMMITTEE MEMBER COMMENTS**

IX. **ADJOURNMENT**

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MINUTES
SPECIAL JOINT MEETING OF THE
CALOPTIMA BOARD OF DIRECTORS’
MEMBER ADVISORY COMMITTEE,
ONECARE CONNECT
CAL MEDICONNECT PLAN (MEDICARE-MEDICAID PLAN)
MEMBER ADVISORY COMMITTEE,
PROVIDER ADVISORY COMMITTEE AND
WHOLE CHILD MODEL FAMILY ADVISORY COMMITTEE

October 10, 2019

A Special Joint Meeting of the CalOptima Board of Directors’ Member Advisory Committee (MAC), OneCare Connect Member Advisory Committee (OCC MAC), Provider Advisory Committee (PAC) and Whole-Child Model Advisory Committee (WCM FAC), was held on Thursday, November 8, 2018, at the CalOptima offices located at 505 City Parkway West, Orange, California.

CALL TO ORDER
PAC Chair Nishimoto called the meeting to order at 8:12 a.m., and WCM FAC Chair Byron led the Pledge of Allegiance.

ESTABLISH QUORUM

Member Advisory Committee
Members Present:  Christine Tolbert, Chair; Pamela Pimentel, Vice Chair; Diana Cruz-Toro; Connie Gonzalez; Sally Molnar; Patty Mouton; Jamie Munoz (8:50 A.M.);
Ilia Rolon; Sr. Mary Therese Sweeney

Members Absent:   Sandy Finestone, Jacqueline Ruddy, Mallory Vega

OneCare Connect Member Advisory Committee
Members Present:  Patty Mouton, Chair; Jyothi Atluri (non-voting); Josefina Diaz; Keiko Gamez (9:10 AM); Sara Lee; Mario Parada; Donald Stukes

Members Absent:  Gio Corzo; George Crits (non-voting); Sandy Finestone; Erin Ulibarri (non-voting)

Provider Advisory Committee
Members Present:  John Nishimoto, O.D., Chair; Teri Miranti, Vice Chair; Donald Bruhns;
Jena Jensen; John Kelly, M.D.; Junie Lazo-Pearson Ph.D.; Craig Myers;
Jacob Sweidan M.D.; Loc Tran, Pharm.D.

Members Absent:  Anja Batra, M.D., Tina Bloomer, MHNP, Pat Patton, MSN, RN

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Others Present: Michael Schrader, Chief Executive Officer; Ladan Khamseh, Chief Operating Officer; Dr. David Ramirez, M.D. Chief Medical Officer; Len Rosignoli, Chief Information Officer, Candice Gomez, Executive Director, Program Implementation; Albert Cardenas, Director, OneCare Connect Customer Service; Tracy Hitzeman, Executive Director Clinical Operations; Thanh-Tam Nguyen, M.D., Medical Director, Medical Management; Dr. Emily Fonda, Medical Director, Medical Management; Cheryl Simmons, Staff to the Advisory Committees, Customer Service; Samantha Fontenot, Program Assistant, Customer Service

Whole-Child Model Family Advisory Committee

Members Present: Maura Byron, Chair; Pam Patterson, Vice Chair (8:58 AM); Sandra Cortez; Brenda Deeley, Kristen Rogers (8:39 AM); Malissa Watson

Members Absent: Cathleen Collins, Kathleen Lear

PUBLIC COMMENT

There were no requests for public comment.

Michael Schrader, Chief Executive Officer, welcomed all the four Board Advisory Committee members and provided a brief background of the strategic plan formulation and introduced Athena Chapman and Caroline Davis of Chapman Consulting who would be presenting the draft plan.

INFORMATION ITEMS

CalOptima Strategic Plan Update

Athena Chapman and Caroline Davis of Chapman Consulting provided a comprehensive presentation regarding CalOptima’s 2020-2022 Strategic Plan. Mrs. Davis reviewed CalOptima’s goals and strategic plan development process with the Members. This process included interviews with CalOptima Board Members, Executive Staff, and the Board Advisory Committees’ Chairs and Vice Chairs. Mrs. Chapman discussed the five priorities and objectives for the 2020-2022 Strategic Plan and provided the members with three key discussion questions to solicit feedback. The feedback received by the Advisory Committee Members will be included in the draft presentation at the November 7, 2019 CalOptima Board of Director’s Meeting for approval.
Health Homes Program Whole Person Care Program Comparison
MAC Chair Tolbert introduced Melissa Tober-Beers from the Orange County Health Care Agency (OCHCA) along with CalOptima’s Candice Gomez, Executive Director, Program Implementation and Tracey Hitzeman, Executive Director, Clinical Operations. Ms. Tober-Beers, Ms. Gomez, and Ms. Hitzeman jointly presented on the Whole Person Care (WPC) and Health Homes Program (HHP) providing details on the comparisons and contrasts of each of these programs.

ADJOURNMENT

There being no further business before the Committees, PAC Chair Nishimoto adjourned the meeting at 10:10 a.m.

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Cheryl Simmons
Staff to the Advisory Committees
A Regular Meeting of the CalOptima Board of Directors’ OneCare Connect Cal MediConnect Plan (Medicare-Medicaid Plan) Member Advisory Committee (OCC MAC) was held on October 24, 2019 at CalOptima, 505 City Parkway West, Orange, California.

CALL TO ORDER
Chair Patty Mouton called the meeting to order at 3:07 p.m. and led the Pledge of Allegiance.

ESTABLISH QUORUM
Members Present: Patty Mouton, Chair; Josefina Diaz; Sandy Finestone; Keiko Gamez (3:20 p.m.); Sara Lee; Mario Parada; Donald Stukes; Erin Ulibarri (non-voting)

Members Absent: Gio Corzo, Vice Chair; Adam Crits, M.D. (non-voting), Jyothi Atluri (non-voting)

Others Present: Michael Schrader, Chief Executive Officer; Ladan Khamseh, Chief Operating Officer; David Ramirez, M.D., Chief Medical Officer; Emily Fonda, M.D., Deputy Chief Medical Officer; Belinda Abeyta, Interim Executive Director, Operations; Candice Gomez, Executive Director, Program Implementation; Shamiq Hussain, Sr. Policy Advisor, Government Affairs; Albert Cardenas, Director, Customer Service (Medicare); Andrew Tse, Manager, OneCare Connect Customer Service; Cheryl Simmons, Staff to the Advisory Committees; Samantha Fontenot, Program Assistant, Customer Service.

MINUTES

Approve the Minutes of the August 22, 2019 Special Meeting of the CalOptima Board of Directors’ OneCare Connect Member Advisory Committee

Action: On motion of Member Sandy Finestone, seconded and carried, the Committee approved the minutes of the August 22, 2019 meeting. (Motion carried 6-0-0; Members Corzo and Gamez absent)

PUBLIC COMMENT
There were no requests for public comment
CEO AND MANAGEMENT REPORTS

Chief Executive Officer Update
Michael Schrader, Chief Executive Officer, provided a verbal update on CalOptima’s NCQA Rating and noted that this year we tied with four other public plans with a 4.0 rating. Goal for next year is to achieve a 4.5 rating. Mr. Schrader also discussed the 2020-2022 Strategic Plan that is being formulated by Chapman Consulting. He noted that a draft proposal will be discussed at the November 7, 2019 Board meeting and based on feedback received by the Board the consultants will come back in December for final approval of the Strategic Plan. Mr. Schrader also discussed the Delivery System evaluation that is being prepared by Pacific Health Group (PHG) who is working with Milliman to determine a new delivery model. He noted that providers had requested individual meetings prior to a decision by the Board before they present a draft recommendation at the December 5, 2019 Board meeting and a possible final decision at the February 6, 2020 Board meeting.

Mr. Schrader also discussed a new Department of Health Care Services (DHCS) program called California Advancing and Innovating Medi-Cal (CalAIM). CalAIM is a multi-year initiative by DHCS to improve the quality of life and health outcomes for Medi-Cal members by implementing a broad delivery system, program and payment reform across the Medi-Cal program. He noted that DHCS will formally release the CalAIM proposal on October 29, 2019 and he would keep the OCC MAC updated as information becomes available.

Chief Operating Officer Update
Ladan Khamseh, Chief Operating Officer discussed the Qualified Medicare Beneficiary (QMB) Program. The QMB program is one of four Medicare savings program that allows members to get help from DHCS to pay their Medicare premiums with help paying for Part A premiums, Part B premiums and deductibles, coinsurance as well as copayments. She noted that working in conjunction with the Orange County Social Services Agency (SSA) outreach has begun to members who were eligible for Medicare Part A through Social Services. Ms. Khamseh notified the committee that a vacancy exists for a Consumer Representative on the Member Advisory Committee (MAC) and asked the members to notify Cheryl Simmons, Staff to the Advisory Committees if they knew of a Medi-Cal member who might be interested in applying for the Consumer Representative seat on the MAC.

Chief Medical Officer Update
David Ramirez, M.D., Chief Medical Officer, announced that Emily Fonda, M.D., had been promoted to Deputy Chief Medical Officer. Dr. Ramirez also discussed the initiative to become a 4.5 quality rated health plan.

INFORMATION ITEMS

Homeless Health Update
Marie Jeannis, Enterprise Analytics Manager, presented an update on the Homeless Health Initiative. Ms. Jeannis gave a comprehensive overview of CalOptima’s homeless identification methods and homeless disparities, which were identified as diagnoses of behavioral health, chronic conditions, homeless utilization metrics, and cost comparisons. Ms. Jeannis provided a detailed disparities summary regarding CalOptima members who are homeless in comparison to those who aren’t
homeless. Ms. Jeannis also noted that CalOptima is in alignment with partnering organizations such as, the Orange County Health Care Agency (OCHCA) who provides data from the DHCS and the Sheriff’s and Coroner’s office of the deceased members.

**Ombudsman Update**

Member Sara Lee, Legal Aid Society of Orange County (LASOC), reported that the Ombudsman Service Program (OSP) at LASOC continues to assist members with OneCare Connect (OCC) enrollment issues, potential OCC disenrollment, and to help bridge services for members who have been terminated from OCC. Other services include assistance to those dual eligible members with Share of Cost issues and education of members on their OCC benefits, the role of the Personal Care Coordinator and care coordination. Ms. Lee noted that the phone number for members to contact Legal Aid has recently been changed and asked that CalOptima update their records so that the correct phone number is given to the member. Ms. Lee will provide CalOptima’s OCC Customer Service with the new number.

**Federal & State Legislative Update**

Shamiq Hussain, Sr. Policy Analyst, Government Affairs provided a verbal update on the Federal and State Budgets. Mr. Hussain reported on the State of California’s health policy to date and gave a preview of the 2020 State health policy agenda, which includes CalAIM and Healthy California for All. Mr. Hussain noted SB 29 bill which offers expanded full-scope Medi-Cal to the undocumented individuals of the senior population, which will be highlighted in Governor Newsom’s 2020 Health policy agenda. Mr. Hussain also discussed the SB 503 and AB 1642 bills which highlight the Medi-Cal Managed Care Plans.

**OCC MAC Member Updates**

Chair Mouton reminded the members that their compliances courses were due by November 8, 2019 and if they needed assistance to contact Cheryl Simmons, Staff to the Advisory Committees. Chair Mouton also discussed the Recruitment Ad Hoc Committee that was formed with members from MAC and PAC. She noted that the first ad hoc meeting was held on October 16, 2019 and the first meeting was spent reviewing seat descriptions. Chair Mouton suggested that members form a similar ad hoc to review seat descriptions for the OCC MAC. Sandy Finestone, Keiko Gamez and Chair Mouton agreed to be part of the OCC MAC recruitment ad hoc.

**ADJOURNMENT**

Chair Mouton announced that the next regular meeting would be held on Thursday, December 19, 2019 at 3:00 p.m.

Hearing no further business, the meeting adjourned at 4:46 p.m.

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Cheryl Simmons
Staff to the Advisory Committees
MEMORANDUM

DATE: January 28, 2020
TO: CalOptima Board of Directors
FROM: Michael Schrader, CEO
SUBJECT: CEO Report — February 6, 2020, Board of Directors Meeting
COPY: Sharon Dwiers, Clerk of the Board; Member Advisory Committee; Provider Advisory Committee; OneCare Connect Member Advisory Committee; and Whole-Child Model Family Advisory Committee

January 2020 Brings Two Program Launches, Restoration of Medi-Cal Benefits
As the new decade rang in, two CalOptima programs designed to enhance services and care coordination for members began and a variety of Medi-Cal benefits were restored.

- **Health Homes Program (HHP):** Phase 1 of CalOptima’s HHP went live January 1 for members with eligible chronic conditions and substance use disorders. Raising awareness about the voluntary program is an ongoing priority, and CalOptima and our health networks are reaching out to eligible members with information about the program and enrollment details. HHP benefits range from comprehensive care management and care transitions support to housing navigation services and accompaniment to doctor visits. Data show that approximately 7,000 members may be eligible to participate in the first phase. A second phase is planned for July 2020.

- **Behavioral Health:** Administration of behavioral health benefits for OneCare and OneCare Connect (OCC) members has transitioned from Magellan Healthcare to CalOptima. Members in need of services for mild to moderate mental health conditions will now work with CalOptima directly. The January 1 change went smoothly, as CalOptima took over utilization management of members with active services and began responding to incoming calls. The transition allows for a more coordinated approach to physical and mental health.

- **Restored Medi-Cal Benefits:** California has reinstated several Medi-Cal benefits that were cut in 2009 due to the recession. Effective January 1, adult members are now covered for eyeglasses, podiatry, audiology, speech therapy, and incontinence creams and washes. The FY 2019–20 state budget includes more than $17 million for the benefits.

California Advancing and Innovating Medi-Cal (CalAIM) Changed to Medi-Cal Healthier California for All; Stakeholder Engagement Continues
Effective January 8, Gov. Gavin Newsom and the Department of Health Care Services (DHCS) renamed CalAIM to Medi-Cal Healthier California for All. The change was made to highlight the well-known Medi-Cal name and better align the initiative with the governor’s platform to build a “California for All,” according to a press release. The effort to gather stakeholder feedback about the many proposals is ongoing. As I have shared in prior reports, CalOptima is focused on those initiatives that have the most potential to immediately impact our agency, especially enhanced care management and in lieu of services. In fact, managed care plans must provide a transition plan by July 2020 that addresses how Whole-Person Care and HHP will move to enhanced care management and in lieu of services, effective January 2021. CalOptima is looking forward to a February 10 meeting with DHCS to learn more about the proposed
transition. Given the significance of the changes under consideration, I will continue to share regular updates about Medi-Cal Healthier California for All with your Board.

**State Budget Proposal Offers a Glimpse at FY 2020–21 Priorities**

On January 10, Gov. Newsom released his proposed budget for FY 2020–21. Overall, the budget anticipates that the California economy will continue to grow (albeit at a slower rate than previous years) and proposes a total state budget of $222.2 billion, with a surplus of more than $5 billion. Some of the surplus will support the governor’s policy priorities, including expanding access to Medi-Cal for undocumented seniors age 65 and older, and addressing the state’s homelessness crisis. To that end, the budget proposes $750 million to establish the California Access to Housing and Services Fund, which would be dedicated to moving individuals and families into stable housing. The governor is also pursuing an ambitious agenda to transform the Medi-Cal delivery system through the newly renamed Medi-Cal Healthier California for All package of proposals, which received a $695 million allocation. Another major piece of the governor’s health plan is reducing prescription drug costs. This past year, his emphasis was on bulk purchasing of prescription drugs by carving out pharmacy from Medi-Cal managed care. This year, he proposes that the state negotiate partnerships with generic drug manufacturers to establish California’s own generic drug label. The May Revision is the next step in California’s budget process, and staff are monitoring its development.

**Organizations Respond to Behavioral Health Integration (BHI) Incentive Opportunity**

Aiming to improve health outcomes, DHCS created six BHI incentive programs using Proposition 56 funds and tasked Medi-Cal managed care plans with administering the application process and applying DHCS-developed selection criteria. CalOptima received 30 BHI incentive program applications from 15 organizations seeking nearly $10 million.

<table>
<thead>
<tr>
<th>BHI Incentive Program</th>
<th>Number of Applications</th>
<th>Dollars Requested</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic behavioral health integration</td>
<td>13</td>
<td>$6,974,676</td>
</tr>
<tr>
<td>Maternal access to mental health and substance use disorder screening and treatment</td>
<td>1</td>
<td>$200,000</td>
</tr>
<tr>
<td>Medication management for beneficiaries with co-occurring chronic medical and behavioral diagnoses</td>
<td>4</td>
<td>$710,000</td>
</tr>
<tr>
<td>Diabetes screening and treatment for people with serious mental illness</td>
<td>5</td>
<td>$740,160</td>
</tr>
<tr>
<td>Improving follow-up after hospitalization for mental illness</td>
<td>4</td>
<td>$755,000</td>
</tr>
<tr>
<td>Improving follow-up after emergency department visit for behavioral health diagnosis</td>
<td>3</td>
<td>$530,000</td>
</tr>
<tr>
<td><strong>TOTALS</strong></td>
<td><strong>30</strong></td>
<td><strong>$9,909,836</strong></td>
</tr>
</tbody>
</table>

CalOptima is required to review and score applicants, subject to DHCS criteria and approval, as well as distribute funding and monitor the programs. CalOptima formed an evaluation committee of internal and external reviewers, and the group met in late January for training on the state’s scoring criteria and timeline. Reviews are due to DHCS by February 18, and CalOptima will issue participation decisions by March 18. Programs are then expected to go live on April 1 and continue until December 31, 2022.
CalOptima Submits Medicaid Fiscal Accountability Rule (MFAR) Comment Letter
In my December 2019 CEO Report, I shared the growing concern about MFAR’s impact on Medi-Cal financing. At the recommendation of our advocates, CalOptima submitted formal comments to complement the efforts of DHCS and our state and federal trade associations. MFAR’s proposed constraints on generating additional funding through public hospital financing, the Managed Care Organization tax, and supplemental payments, such as Intergovernmental Transfers, could leave a large hole in California’s budget that was previously filled by federal matching dollars.

Supreme Court Permits Public Charge Rule, Potentially Affecting Medicaid Enrollment
On January 27, in a 5–4 decision, the Supreme Court ruled to allow the Trump Administration to implement the Public Charge Final Rule with an expanded means test for immigrants seeking naturalization. The rule expands how the federal government interprets and determines “public charge” to include immigrants who access cash public benefits, such as welfare, but also non-cash public benefits, including Medicaid (Medi-Cal in California). The rule makes it more difficult for immigrants to obtain permanent residency if they have used or are likely to use public benefits. Observers believe the rule will discourage immigrants from seeking health care coverage or cause them to drop their existing coverage, lest they compromise their naturalization status. The Supreme Court lifted a stay that had blocked implementation until a lawsuit against the rule was settled. The lawsuit is still pending.

California Children’s Services (CCS) Advisory Group to Gather Post-Transition Data
The January 22 quarterly meeting of the CCS Advisory Group focused on upcoming efforts to capture family feedback about the Whole-Child Model (WCM) and establish health plan performance measures.

- **Telephone Survey:** UC San Francisco has been engaged to conduct a telephone survey of parents of CCS children in WCM and non-WCM counties. The goal is to assess participant satisfaction, experiences with care, and perceived changes in access, quality and care coordination since the WCM transition. UCSF is in the process of finalizing the survey, which will be administered from April to June. The target sample size is 3,000 respondents. Preliminary findings are not expected until December 2020.

- **Dashboard Template:** The state released a sample WCM Performance Dashboard for stakeholder review and comment. It is designed to collect data about health plans’ WCM programs. Some of the suggested measures include enrollment figures, emergency room visits, inpatient admissions, prescription use, mental health services, NICU authorizations, and grievances and appeals. The timeframe for publishing the dashboard was not announced. The group was supportive of the dashboard and asked that it include data from not only the five WCM plans but also from the counties that have not transitioned to WCM.

Annual State Audit Underway, Reviewing Medi-Cal and OCC
On January 27, DHCS began its annual medical audit of Medi-Cal and OCC (Medicaid-based services only). Auditors are expected to be on site until February 7, studying CalOptima’s compliance with contractual and regulatory requirements in the areas of utilization management, case management and coordination of care, availability and accessibility, member’s rights, quality management, and administrative and organizational capacity, for the review period of February 1, 2019, to January 31, 2020.
OCC Event Draws Current and Prospective Members
On Saturday morning, January 25, CalOptima welcomed more than 60 prospective and current members to our third OCC Member Retention/Outreach Event at the Garden Grove Community Center. The event included a presentation about the 2020 OCC program and benefits, which was followed by a Q&A session with internal subject matter experts from our Customer Service and Pharmacy departments as well as external experts from Community Legal Aid SoCal, Vision Service Plan and Denti-Cal. In addition, members had an opportunity to visit 16 resource tables, which featured contracted health networks, vendors, CalOptima departments and community-based organizations.

CalOptima Names Sharon Dwiers Clerk of the Board
After serving in an interim capacity, Sharon Dwiers has been named Clerk of the Board. Ms. Dwiers assists the Board and Board committee chairs in conducting public meetings and serves as the custodian of official agency records for public and government use. She has been with CalOptima for more than 23 years.