

NOTICE OF A REGULAR MEETING OF THE CALOPTIMA BOARD OF DIRECTORS' PROVIDER ADVISORY COMMITTEE

THURSDAY, DECEMBER 12, 2019 8:00 A.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, OneCare Connect Member Advisory Committee, Provider Advisory Committee and Whole-Child Model Family Advisory Committee
- B. Approve Minutes of the November 14, 2019 Regular Meeting of the CalOptima Board of Directors' Provider Advisory Committee

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

Notice of a Regular Meeting of the CalOptima Board of Directors' Provider Advisory Committee December 12, 2019 Page 2

Comment Request Form(s) identifying the item(s) and submit the form to the assistant to the PAC. 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 Reclassify Provider Advisory Committee Seat(s)
- B. Consider Recommendation to Revise Provider Advisory Committee Chair and Vice Chair Term Lengths

VI. MANAGEMENT REPORTS

- A. Chief Executive Officer Update
- B. Chief Operating Officer Update
- C. Chief Medical Officer Update

VI. INFORMATION ITEMS

- A. Delivery System Update
- B. Homeless Health Update
- C. Proposition 56 (Tobacco Tax) Update
- D. Federal and State Legislative Update
- E. Provider Advisory Committee Member Updates

VII. COMMITTEE MEMBER COMMENTS

VIII. ADJOURNMENT

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

CalOptima Board of Directors' Minutes of the Special Joint Meeting of the Member Advisory Committee, OneCare Connect Member Advisory Committee, Provider Advisory Committee and the Whole-Child Model Family Advisory Committee October 10, 2019 Page 2

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

WCM FAC did not achieve a quorum.

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.

CalOptima Board of Directors' Minutes of the Special Joint Meeting of the Member Advisory Committee, OneCare Connect Member Advisory Committee, Provider Advisory Committee and the Whole-Child Model Family Advisory Committee October 10, 2019 Page 3

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.

Cheryl Simmons
Staff to the Advisory Committees

MINUTES

REGULAR MEETING OF THE CALOPTIMA BOARD OF DIRECTORS' PROVIDER ADVISORY COMMITTEE

November 14, 2019

A Regular Meeting of the CalOptima Board of Directors' Provider Advisory Committee (PAC) was held on Thursday, November 14, 2019, at the CalOptima offices located at 505 City Parkway West, Orange, California.

CALL TO ORDER

John Nishimoto, O.D., PAC Chair, called the meeting to order at 8:03 a.m. Anjan Batra, M.D. led the Pledge of Allegiance.

ESTABLISH QUORUM

Members Present: John Nishimoto, O.D., Chair; Teri Miranti, Vice Chair; Anjan Batra,

M.D.; Donald Bruhns; Jena Jensen; Junie Lazo-Pearson, Ph.D.; Craig Myers; Jacob Sweidan, M.D.; Tina Bloomer, MHNP; Dr. Loc Tran; Pat

Patton, MSN

Members Absent: John Kelly, M.D.

Others Present: Michael Schrader, Chief Executive Officer; Ladan Khamseh, Chief

Operating Officer; David Ramirez, M.D., Chief Medical Officer; Gary Crockett, Chief Counsel; Nancy Huang, Chief Financial Officer; Emily Fonda, M.D., Deputy Chief Medical Officer; Candice Gomez, Executive

Director, Program Implementation; Michelle Laughlin, Executive

Director, Network Operations; Betsy Ha, Executive Director, Quality and Population Health Management, Tracy Hitzeman, Executive Director,

Clinical Operations; Shamiq Hussain, Sr. Policy Advisor,

Government/Legislative Affairs; Cheryl Simmons, Staff to the Advisory

Committees; Samantha Fontenot, Program Assistant

MINUTES

<u>Approve the Minutes of the September 12, 2019 Regular Meeting of the CalOptima Board of Directors' Provider Advisory Committee</u>

Action: On motion of Member Sweidan, seconded and carried, the Committee

approved the minutes of the September 12, 2019 meeting. (Motion

carried 11-0-0; Member Kelly absent)

CalOptima Board of Directors' Provider Advisory Committee Meeting November 14, 2019 Page 2

PUBLIC COMMENTS

There were no requests for public comment.

CEO AND MANAGEMENT REPORTS

Chief Executive Officer Update

Michael Schrader, Chief Executive Officer (CEO), provided brief updates on the Department of Health Care Services' (DHCS') California Advancing and Innovating Medi-Cal (CalAIM) program and the proposed state waiver for FY 2021-25. Mr. Schrader announced the promotion of Nancy Huang to Chief Financial Officer.

Chief Operating Officer Update

Ladan Khamseh, Chief Operating Officer, provided an update on the Qualified Medicare Beneficiary (QMB) Program. Ms. Khamseh noted that the beneficiary outreach letters have been sent out to CalOptima members encouraging them to apply for the Medicare Part A Plan. Ms. Khamseh also notified the members of the open Member Advisory Committee Consumer seat.

Chair Nishimoto reordered the agenda to hear item VI.A CHOC Children's Autism Center before continuing with the Chief Medical Officer Report.

CHOC Children's Autism Center

Jonathan T. Megerian, M.D., a Board-Certified Pediatric Neurologist at CHOC Children's provided a comprehensive presentation on CHOC's new Thompson Autism Center. Dr. Megerian described the benefits and services that will be offered at the grand opening scheduled for January 2020. Dr. Megerian also provided an overview of the assessment clinic, the challenging behavior unit, and the co-occurring clinic which will be available to children and their families.

Chief Medical Officer Update

David Ramirez, M.D., Chief Medical Officer, notified the PAC that Emily Fonda, M.D., had been promoted to Deputy Chief Medical Officer. He also reported that CalOptima received a commendable rating from the National Committee for Quality Assurance (NCQA).

INFORMATION ITEMS

Proposition 56 Tobacco Tax Update

Candice Gomez, Executive Director, Program Implementation, discussed the Proposition 56 (Tobacco Tax) initiatives. Ms. Gomez noted that CalOptima's providers may see an increase in funding whether it's fee-for service or capitation. Ms. Gomez also noted that additional funding is available and mentioned that additional initiatives have been released by DHCS. DHCS has indicated that they will start reimbursing for developmental screenings, as well as advanced childhood experience screening (ACE) effective January 1, 2020.

CalOptima Board of Directors' Provider Advisory Committee Meeting November 14, 2019 Page 3

Health Network Quality Rating Methodology Presentation

Betsy Ha, Executive Director, Quality and Population Health Management, provided a presentation on Health Network Rating Methodology guiding principles and proposed changes. Ms. Ha noted that CalOptima is proposing a health network rating methodology and measurement for FY 2020. She also mentioned that DHCS is requiring that managed care plans such as CalOptima must perform at least or well above the fifty percent of the Medicaid plans across the country.

Federal and State Budget Update

Shamiq Hussain, Sr. Policy Advisor, Government/Legislative Affairs, provided a brief update on the State budget. Mr. Hussain noted that the DHCS policy discussion is centered around the CalAIM proposals, which will further develop once DHCS has received stakeholder feedback along with the Centers for Medicare & Medicaid Services (CMS) feedback.

PAC Member Updates

Chair Nishimoto provided an update on the Joint Advisory Committees' Recruitment Ad Hoc meetings and noted that the ad hoc has been developing a recruitment process for each committee seat and will provide a report at the next PAC meeting on December 12, 2019.

Committee Member Comments

Member Jensen thanked the PAC on behalf of Dr. Megerian for providing the opportunity to present on the CHOC Thompson Autism Center.

Member Sweidan provided feedback to CalOptima staff on the Whole-Child Model transition process, noting that the transition has been transparent and seamless.

ADJOURNMENT

There being no further business, Chair Nishimoto adjourned the meeting at 9:31 a.m.

Cheryl Simmons
Staff to the Advisory Committees

2020 PAC Position Description

Allied Health Services (two seats)

- Current experience collaborating with, and ability to reach out, seek input and represent; independent, non-hospital, non-network allied providers, such as:
 - Ambulatory surgery centers
 - Audiology
 - Certified Acupuncturist
 - Chronic Dialysis Center
 - Dialysis providers
 - Dispensing Opticians
 - DME providers
 - Emergency Transportation
 - Exempt from Licensure Clinics
 - Family planning centers
 - Hearing Aid Dispensers
 - Home health providers
 - Home infusion providers
 - Hospice
 - Laboratory
 - Non-emergency transportation (NEMT) providers
 - Occupational therapists
 - Physical therapists
 - Podiatrists
 - Portable X-ray Lab
 - Prosthetics
 - Psychologists
 - Radiation therapy centers
 - Radiology
 - Rehabilitation Clinics
 - Respiratory Care Practice
 - Speech Therapist
 - Surgery Clinics
- When license or credential is required, applicant must have active CA license/credential as appropriate
- Preferred for applicant to belong to appropriate professional/trade association(s)
- Knowledge of managed care systems and CalOptima programs

- Minimum three years of experience as a provider for CalOptima or representing CalOptima providers directly
- Understanding and familiarity with the diverse cultural and/or social environments of Orange County
- Availability and willingness to attend regular, special and ad hoc PAC meetings
- All appointments to the committee will be appointed by the CalOptima Board and are subject to OIG/GSA verification and possible background checks

Behavioral/Mental Health Provider

Position Description

- Current experience collaborating with, and ability to reach out, seek input and represent providers such as:
 - Licensed Clinical Social Worker (LCSW)
 - Marriage and Family Therapist (MFT)
 - Mental Health Facility
 - Psychologists
 - Psychiatrist
 - Registered Psychiatric Nurse (Psych RN)
 - Multi-Specialty Clinics/Group Practice
 - Community Mental Health Center
 - Board Certified Behavior Analyst-D (BCBA-D)
- When license or credential is required, applicant must have active CA license/credential as appropriate
- Preferred for applicant to belong to appropriate professional/trade association(s)
- Knowledge of managed care systems and CalOptima programs
- Minimum three years of experience as a provider for CalOptima or representing CalOptima providers directly
- Understanding and familiarity with the diverse cultural and/or social environments of Orange County
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Community Clinic

- Current experience collaborating with, and ability to reach out, seek input and represent Orange County Community Health Centers:
 - Representing a licensed community clinic

- When license or credential is required, applicant must have active CA license/credential as appropriate
- Preferred for applicant to belong to appropriate professional/trade association(s)
- Knowledge of managed care systems and CalOptima programs
- Minimum three years of experience as a provider for CalOptima or representing CalOptima providers directly
- Understanding and familiarity with the diverse cultural and/or social environments of Orange County
- Availability and willingness to attend regular, special and ad hoc PAC meetings
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Health Network

Position Description

- Current experience collaborating with, and ability to reach out, seek input and represent CalOptima contracted Health Networks.
- When license or credential is required, applicant must have active CA license/credential as appropriate
- Preferred for applicant to belong to appropriate professional/trade association(s)
- Knowledge of managed care systems and/or CalOptima programs
- Minimum three years of experience working directly for a health network
- Understanding and familiarity with the diverse cultural and/or social environments of Orange County
- Availability and willingness to attend regular, special and ad hoc PAC meetings
- All appointments to the committee will be appointed by the CalOptima Board and are subject to OIG/GSA verification and possible background checks

Hospital

- Current experience collaborating with, and ability to reach out, seek input and represent Orange County CalOptima contracted Hospitals.
- When license or credential is required, applicant must have active CA license/credential as appropriate
- Preferred for applicant to belong to appropriate professional/trade association(s)
- Knowledge of managed care systems and CalOptima programs
- Minimum three years of experience as a hospital provider for CalOptima or representing CalOptima hospital providers directly

- Understanding and familiarity with the diverse cultural and/or social environments of Orange County
- Availability and willingness to attend regular, special and ad hoc PAC meetings
- All appointments to the committee will be appointed by the CalOptima Board and are subject to OIG/GSA verification and possible background checks

Long Term Services and Supports

- Current experience collaborating with, and ability to reach out, seek input and represent providers, such as:
 - Intermediate Care Facility Developmentally Disabled
 - Intermediate Care Facility Developmentally Disabled Nursing
 - Intermediate Care Facility -Developmentally Disabled Habilitative
 - Level B Adult Subacute
 - Level B Pediatric Subacute
 - Level B Skilled Nursing Facility
 - Nursing Facilities Intermediate Care Facility Level A
 - Skilled Nursing Facilities
 - Skilled Nursing Facilities/Subacute Level B
 - Adult Day Health Care
- When license or credential is required, applicant must have active CA license/credential as appropriate
- Preferred for applicant to belong to appropriate professional/trade association(s)
- Knowledge of managed care systems and CalOptima programs
- Minimum three years of experience as a provider for CalOptima or representing CalOptima providers directly
- Understanding and familiarity with the diverse cultural and/or social environments of Orange County
- Availability and willingness to attend regular, special and ad hoc PAC meetings
- All appointments to the committee will be appointed by the CalOptima Board and are subject to OIG/GSA verification and possible background checks

Non-Physician Medical Practitioner Representative

Position Description

- Current experience collaborating with, and ability to reach out, seek input and represent such as: nurse practitioners, nurse midwife, physician assistants, registered psychiatric nurse (Psych RN), chiropractors, dentists, optometrists, and others as appropriate
- When license or credential is required, applicant must have active CA license/credential as appropriate
- Professional Degree (e.g. DC, DDS, DNP MMS, OD) required
- Preferred for applicant to belong to appropriate professional/trade association(s)
- Knowledge of managed care systems and CalOptima programs
- Minimum three years of experience as a provider for CalOptima or representing CalOptima providers directly
- Understanding and familiarity with the diverse cultural and/or social environments of Orange County
- Availability and willingness to attend regular, special and ad hoc PAC meetings
- All appointments to the committee will be appointed by the CalOptima Board and are subject to OIG/GSA verification and possible background checks

Nurse Representative

- Current experience collaborating with, and ability to reach out, seek input and represent such as; nurses, nurse Practitioner, nurse midwife, registered nurses, registered psychiatric nurse (Psych RN), nurse anesthetist, advanced practice nurse
- When license or credential is required, applicant must have active CA license/credential as appropriate
- Preferred for applicant to belong to appropriate professional/trade association(s) and local chapters.
- Knowledge of managed care systems and CalOptima programs
- Minimum three years of experience as a provider for CalOptima or representing CalOptima providers directly
- Understanding and familiarity with the diverse cultural and/or social environments of Orange County
- Availability and willingness to attend regular, special and ad hoc PAC meetings
- All appointments to the committee will be appointed by the CalOptima Board and are subject to OIG/GSA verification and possible background checks

Pharmacy Representative

Position Description

- Current experience collaborating with, and ability to reach out, seek input and represent pharmacies and pharmacy associations
- When license or credential is required, applicant must have active CA license/credential as appropriate
- Preferred for applicant to belong to appropriate professional/trade association(s)
- Knowledge of managed care systems and CalOptima programs
- Minimum three years of experience as a provider for CalOptima or representing CalOptima providers directly
- Understanding and familiarity with the diverse cultural and/or social environments of Orange County
- Availability and willingness to attend regular, special and ad hoc PAC meetings
- All appointments to the committee will be appointed by the CalOptima Board and are subject to OIG/GSA verification and possible background checks

Physician Representative (three positions)

- Seats will individually be represented by:
 - Adult Primary Care Physician
 - Pediatric Physician
 - Specialist
- Current experience collaborating with, and ability to reach out, seek input, represent and secure input from their physician constituency as well as their community-based physician professional association. When license or credential is required, applicant must have active CA license/credential as appropriate
- Have an active, unrestricted California medical license and board certification as appropriate
- Membership in appropriate medical professional association(s)
- Knowledge of managed care systems and CalOptima programs
- Minimum three years of experience as a provider for CalOptima
- Understanding and familiarity with the diverse cultural and/or social environments of Orange County
- Familiarity with California and federal health care delivery regulatory requirements and mandates
- Familiarity with provider quality and service requirements and risk adjustment factors

- Availability and willingness to attend regular, special and ad hoc PAC meetings and actively contribute
- All appointments to the committee will be appointed by the CalOptima Board and are subject to OIG/GSA verification and possible background checks

Safety Net

Position Description

- Current experience collaborating with, and ability to reach out, seek input and represent safety net providers
 - Safety-Net Provider means a provider of comprehensive primary care and/or acute hospital inpatient services that provides these services to a significant total number of Medi-Cal and charity and/or medically indigent patients in relation to the total number of patients served by the provider. Examples of safety net providers include Federally Qualified Health Centers; governmentally operated health systems; community health centers; rural and Indian Health Service facilities; disproportionate share hospitals; and public, university, rural and children's hospitals.
- When license or credential is required, applicant must have active CA license/credential as appropriate
- Preferred for applicant to belong to appropriate professional/trade association(s)
- Knowledge of managed care systems and CalOptima programs
- Minimum three years of experience as a provider for CalOptima or representing CalOptima providers directly
- Understanding and familiarity with the diverse cultural and/or social environments of Orange County
- Availability and willingness to attend regular, special and ad hoc PAC meetings
- All appointments to the committee will be appointed by the CalOptima Board and are subject to OIG/GSA verification and possible background checks

Health Care Agency Representative (Standing Seat)

- Represent the Orange County Health Care Agency
- No term limits
- All appointments to the committee will be appointed by the CalOptima Board and are subject to OIG/GSA verification and possible background checks

PAC Chair

Position Description

- Availability and willingness to attend regular and special PAC meetings
- Facilitate all PAC meetings using standard meeting rules of order
- Demonstrate leadership and openness, enabling meeting attendees to achieve preset meeting goals
- Liaison between PAC, MAC and the Board of Directors
- Provide PAC Report to CalOptima Board of Directors' monthly meetings
- Two-year term
- All appointments to the committee will be appointed by the CalOptima Board and are subject to OIG/GSA verification and possible background checks

PAC Vice-Chair

- Availability and willingness to attend regular and special PAC meetings
- Facilitate in absence of the PAC Chair all PAC meetings using standard meeting rules of order
- Demonstrate leadership and openness, enabling meeting attendees to achieve preset meeting goals
- Liaison in absence of the PAC Chair between PAC, MAC and the Board of Directors
- Provide PAC Report to CalOptima Board of Directors' monthly meetings when PAC Chair is unavailable
- Two-year term
- All appointments to the committee will be appointed by the CalOptima Board and are subject to OIG/GSA verification and possible background checks



MEMORANDUM

DATE: November 26, 2019

TO: CalOptima Board of Directors

FROM: Michael Schrader, CEO

SUBJECT: CEO Report — December 5, 2019, Board of Directors Meeting

COPY: Sharon Dwiers, Interim Clerk of the Board; Member Advisory Committee;

Provider Advisory Committee; OneCare Connect Member Advisory Committee; and Whole-Child Model Family Advisory Committee

CalOptima Earns State Quality Award for the Fifth Year in a Row

Great news! CalOptima extended our run of recognition by the state, receiving the Department of Health Care Services (DHCS) Outstanding Performance Award for Large Scale Plans for the fifth year in a row. Presented recently at the regulator's annual quality meeting, CalOptima had staff on hand to accept the honor, with a certificate that states "in recognition of your efforts for going above and beyond for Medi-Cal managed care members..." Thanks to your Board and all providers for continuing to support this agency's efforts to lead California in Medi-Cal quality.

Community Health Centers Group Honor CalOptima for Partnership

On November 14, the Coalition of Orange County Community Health Centers honored CalOptima during the group's 45th anniversary event, presenting the agency with the Community Partner Award. I thanked coalition members for their partnership, emphasizing our longstanding shared mission to care for vulnerable populations as well as our current initiatives to better serve individuals experiencing homelessness through clinical field teams and other programs.

CalOptima Names New Executive Director, Operations

Former Customer Service Director Belinda Abeyta has been promoted to Executive Director, Operations. Belinda filled this role in an interim capacity for seven months, ensuring that CalOptima's day-to-day functions of serving members and ensuring provider payments ran smoothly. As Executive Director, Belinda is responsible for overseeing Customer Service, Grievance and Appeals Resolution Services (GARS), Claims Administration, E-Business and Coding Initiatives. She started her career with CalOptima in 2014 as director of GARS before moving into her Customer Service role. She has 25 years of leadership experience in claims for both public and private health care organizations, including Inland Empire Health Plan and St. Joseph Heritage Heath. She holds a bachelor's degree in health science from California State University, Long Beach and an MBA from University of Phoenix.

America's Health Insurance Plans (AHIP) Meeting Brings Opportunity to Interact With Key Federal Policy Makers

On November 12–13, I attend an AHIP Board meeting during which the association reiterated its Medicaid managed care focus on three areas: rates, coverage and benefits, and managed care plan value. Regarding rates, AHIP is monitoring block grant waivers, medical loss ratio guidance, and CMS rate reviews and rule changes, including the Medicaid Fiscal Accountability

Rule (described below). Regarding coverage and benefits, AHIP is focused on waivers, the public charge rule and dual eligible integration. Finally, about managed care plan value, AHIP is examining research on quality and the impact of carve-outs. Further, the Board meeting was also valuable for the opportunity to connect with policy makers. Three senators with leadership roles on health care and financial committees made presentations, and I was part of a small group of six CEOs from public and commercial health plans invited to attend a private meeting with Alex Azar, secretary of U.S. Health and Human Services, which oversees the Centers for Medicare & Medicaid Services (CMS). During the meeting, Azar stated that his vision for health care centers on affordability, quality and choice. Finally, I was appointed to a new AHIP Administrative Committee, exploring how the association can strengthen service to the three "vertical" markets defined as Medicare, Medicaid and Commercial. AHIP plans even more commitment to Medicaid by hiring staff and bringing on other resources, and as part of the committee, I will help guide these efforts.

Medicaid Fiscal Accountability Rule Focused on More Transparent Financial Practices

On November 12, CMS released its draft Medicaid Fiscal Accountability Rule, which was proposed in response to federal Medicaid spending growth and concerns about financial transparency. In a fact sheet accompanying the rule, CMS stated that the intent of the proposed regulations is to strengthen the fiscal integrity of the Medicaid program and ensure that state supplemental payments and financing arrangements are transparent and value-driven. Three major provisions would: 1) strengthen state-level reporting requirements; 2) clarify Medicaid financing definitions and processes for "base" and "supplemental" payments; and 3) reduce questionable financing mechanisms. Regarding the third category, the rule would update some requirements around Intergovernmental Transfers (IGTs) and their funding sources as well as health care-related taxes and donations. At this stage, CMS is soliciting stakeholder input on the rule and will be accepting comments for 60 days.

California Advancing and Innovating Medi-Cal (CalAIM) Initiative Garnering Considerable Attention Statewide as Workgroup Meetings Begin

In the short time since the October 28 introduction of CalAIM, activity has ramped up quickly. DHCS held the first three workgroup sessions: Population Health Management and Annual Health Plan Open Enrollment (November 5), Behavioral Health (November 8), and Enhanced Care Management and In Lieu of Services (November 20). Another 19 sessions are planned through February 2020. CalOptima has clear visibility of the activity in the groups through our associations, Local Health Plans of California (LHPC) and California Association of Health Plans (CAHP). The workgroup sessions are highly structured, involving detailed PowerPoint presentations and specific written questions about which DHCS is seeking feedback. LHPC and CAHP are hosting weekly calls and compiling answers to the questions. Separately, the state and the associations are engaging outside of the meetings on topics in CalAIM but not covered by a workgroup, such as regional rate setting and long-term care integration. Public plans, including CalOptima, consider population health management, enhanced care management and in lieu of services the priority areas, since they have the earliest proposed implementation, starting 2021. In fact, an all-day meeting between the state and plan leaders about enhanced care management and in lieu of services was just announced for February 10, 2020. I will continue to share CalAIM updates with your Board.

State to Audit CalOptima in January, Delegated Entity to Participate

DHCS formally notified CalOptima about the annual medical audit of Medi-Cal and OneCare Connect (Medicaid-based services only). The regulator will be on site from January 27–February 7, 2020. DHCS will audit 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. A key difference in the 2020 audit is the requirement that a CalOptima delegate participate, and DHCS has chosen to engage Monarch HealthCare for its review of OneCare Connect.

Health Education Team Organizes Successful Anti-Vaping Event in Anaheim

CalOptima's Health Education team within the Population Health Management department partnered with community organizations to present Escape the Vape, an educational antismoking event targeted at school children. Held on November 21 at the Ponderosa Park Community Center in Anaheim, more than 300 children attended, many with a parent. The American Cancer Society was a key collaborator as the event coincided with the 40th anniversary of the Great American Smokeout, a nationwide effort encouraging smoking cessation. Escape the Vape included a dozen booths with information, entertainment and activities. The anti-vaping theme attracted TV coverage from Telemundo and KTLA.

Employee Engagement Survey Results Show Positive Ratings, Highlight Opportunities CalOptima shared results of the Employee Engagement Survey with employees during the All Hands meeting on November 14. DecisionWise administered the survey, and DecisionWise Senior Consultant David Long presented an overview that showed CalOptima's scores, highlighting areas receiving positive feedback and those needing improvement. He said that CalOptima's overall rating was 72% favorable and 18% neutral, which are similar to the averages seen across DecisionWise's large client base. Executive Director, Human Resources Brigette Gibb announced that workgroups have been formed to respond to three opportunities for improvement: cross-functional communication, professional growth and employee voice (being responsive to ideas and suggestions from employees). The workgroups, which include employees from various departments and at various career levels, started November 15.