

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

**THURSDAY, OCTOBER 12, 2017
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 August 10, 2017 Regular Meeting of the CalOptima Board of Directors' Provider Advisory Committee
- B. Approve Minutes of the September 14, 2017 Joint Meeting of the CalOptima Board of Directors' Member Advisory Committee (MAC) and Provider Advisory Committee (PAC) Meeting

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 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

None

VI. CEO AND MANAGEMENT REPORTS

- A. Chief Executive Officer (CEO) Update
- B. Chief Operating Officer (COO) Update
- C. Chief Medical Officer (CMO) Update
- D. Chief Financial Officer (CFO) Update
- E. Network Operations Update
- F. Federal and State Legislative Update

VII. INFORMATION ITEMS

- A. Update on Behavioral Health Transition
- B. Whole Child Care Model
- C. Palliative Care Update
- D. [PAC Member Updates](#)

VIII. COMMITTEE MEMBER COMMENTS

IX. ADJOURNMENT

MINUTES

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

August 10, 2017

A Regular Meeting of the CalOptima Board of Directors' Provider Advisory Committee (PAC) was held on Thursday, August 10, 2017, at the CalOptima offices located at 505 City Parkway West, Orange, California.

CALL TO ORDER

Teri Miranti, PAC Chair, called the meeting to order at 8:04 a.m., and Member Flood led the Pledge of Allegiance.

ESTABLISH QUORUM

Members Present: Teri Miranti, Chair; Suzanne Richards, MBA, FACHE, Vice Chair; Anjan Batra, M.D.; Donald Bruhns; Alan Edwards, M.D.; Steve Flood; Jena Jensen; Pamela Kahn, R.N.; Craig G. Myers; John Nishimoto, O.D.; George Orras, Ph.D., FAAP; Pamela Pimentel, R.N.; Jacob Sweidan, M.D.

Members Absent: Theodore Caliendo, M.D.; Mary Pham, Pharm.D, CHC

Others Present: Michael Schrader, Chief Executive Officer; Ladan Khamseh, Chief Operating Officer; Richard Helmer, M.D., Chief Medical Officer; Gary Crockett, Chief Counsel; Nancy Huang, Interim Chief Financial Officer; Richard Bock, M.D., Deputy Chief Medical Officer; Candice Gomez, Executive Director, Program Implementation; Arif Shaikh, Director, Government Affairs; Cheryl Meronk, Director, Strategic Development; Kelly Rex-Kimmet, Director, Quality Analytics; Cheryl Simmons, Staff to the Provider Advisory Committee

MINUTES

Approve the Minutes of the June 8, 2017 Regular Meeting of the CalOptima Board of Directors' Provider Advisory Committee

Action: On motion of Member Sweidan, seconded and carried, the Committee approved the minutes of the June 8, 2017 meeting. (Motion carried 13-0-0; Members Caliendo and Pham absent)

PUBLIC COMMENTS

No requests for public comment were received.

Chair Miranti welcomed Craig G. Myers to the PAC as the new Community Health Centers Representative. Mr. Myers formerly held the Hospital seat from 2011-2013. The PAC also recognized Member Barry Ross for his six years of service as the Community Health Centers Representative. Mr. Ross thanked the PAC members, CalOptima leadership and staff for their support during the last six years.

CEO AND MANAGEMENT REPORTS

Chief Executive Officer Update

Michael Schrader, Chief Executive Officer, updated the PAC on healthcare reform as well as the Magellan contract for behavioral health services for Medi-Cal members. At the August 3, 2017 meeting, the CalOptima Board of Directors authorized extending the current contract with Magellan through December 31, 2017, and Board Chair Paul Yost formed an ad hoc to evaluate options for Board consideration, including a possible extension of the current contract with Magellan beyond December 31, 2017. Several PAC members indicated their support should CalOptima consider administering the Medi-Cal behavioral health benefit in-house, if necessary, on January 1, 2018.

Mr. Schrader also discussed the three-way non-binding Master Services Agreement that was approved by the Board at their August 3, 2017 meeting. The non-binding agreement between LA Care, Inland Empire Health Plan and CalOptima allows for partnership and engagement with the University of California (UC) Health System. The purpose of the agreement is to work with the UC system to contract with several of the UC HealthCare system hospitals such as UC Davis, UC Irvine and UCLA, including for services not available in Orange County. Currently CalOptima works with out of county providers including the University of Southern California (USC) Keck School of Medicine, City of Hope and Cedars Sinai to access such services as necessary.

Chief Operating Officer Update

Ladan Khamseh, Chief Operating Officer, discussed the current OneCare Connect (OCC) 30-day deeming period, and noted that DHCS is now requiring health plans to extend the deeming period to two months. Ms. Khamseh also updated the PAC on the non-medical transportation benefit that became effective July 1, 2017 for CalOptima Medi-Cal members. Ms. Khamseh noted that a Request for Proposal (RFP) process will be conducted in the near future for non-medical transportation services. Ms. Khamseh also discussed Medi-Cal Client Index Numbers (CIN) for newborns. She noted that the State considers the mother's Medi-Cal eligibility to cover the newborn for the month of birth and the month afterward, unless the newborn is assigned its own CIN number.

Chief Medical Officer Update

Richard Helmer, M.D., Chief Medical Officer, discussed Senate Bill 1004 on Palliative Care that would mandate that palliative care be implemented in Medi-Cal plans. He also noted that there would be no additional payment received from the State. CalOptima is currently working to insure that we meet regulatory requirements and will continue to work with the networks and hospitals before the January 1, 2018 implementation date.

Dr. Helmer updated the members on the process to allow for the credentialing of optometrists who are not contracted with VSP. Dr. Helmer noted that an internal ad hoc to review payment methodology to insure CalOptima is paying Optometrists properly. Member Nishimoto, a practicing optometrist volunteered to serve on the ad hoc based on his role as a Non-Medical Practitioner.

Dr. Helmer also discussed the Request for Information (RFI) that was recently released for PACE Alternative Care Settings to evaluate expanding PACE countywide, and responses are being clarified. In addition, an RFI for perinatal support services is being finalized for release to identify capabilities in the county. Dr. Helmer also noted that a Pay For Value (P4V) program is being developed for the CalOptima Community Network (CCN).

Chief Financial Officer Update

Nancy Huang, Interim Chief Financial Officer, presented CalOptima's Financial Summary as of June 2017, including a report of the Health Network Enrollment for the month of June 2017. Ms. Huang summarized CalOptima's financial performance and current reserve levels.

Federal and State Budget Update

Arif Shaikh, Director, Government Affairs, provided updates on Congressional activities around the reauthorization of funding for the Children's Health Insurance Program (CHIP), as well as the reauthorization of Dual Eligible Special Needs Plans (D-SNPs). Mr. Shaikh noted that approximately 110,000 CalOptima members are impacted by CHIP funding, and the reauthorization of the program is critical to ensure financial sustainability for the state. CHIP funding is authorized through September 2017; D-SNPs are authorized by Congress through the end of 2018. CalOptima currently has approximately 1,200 dual-eligible seniors enrolled in its D-SNP, OneCare.

Cheryl Meronk, Director, Strategic Planning, presented an overview of the approved Intergovernmental Transfer (IGT) Funds, and the most recent Board approved funding categories for IGT 6 and 7. IGT 6 and 7 funds will be used to deliver enhanced services for the Medi-Cal population, in the primary categories of opioid and other substance overuse, children's mental health, homeless health, and community grants to support program areas beyond those funded by IGT 5. Proposed expenditure plans will be presented to the Board after receiving input from the PAC and other stakeholder groups.

INFORMATION ITEMS

Program Implementation Updates

Candice Gomez, Executive Director, Program Implementation, presented an update the status of various programs that were recently implemented or are in the process of being implemented. Ms. Gomez noted that the County-led Whole Person Care started on July 1, 2017. This program increases the coordination of physical, behavioral health and social services for CalOptima members who are homeless or have a behavioral health condition and are at risk of being homeless. Services include recuperative care, housing support services and mental health

services. Ms. Gomez also noted that Palliative Care is slated to take effect on January 1, 2018. The Health Homes Program and the Whole Child Model are anticipated to begin on January 1, 2019.

HEDIS 2017 Results

Kelly Rex-Kimmet, Director, Quality Analytics, presented the annual HEDIS results for 2017 and noted that CalOptima met all Department of Health Care Services (DHCS) minimum performance levels.

PAC Member Information

Chair Miranti reminded the PAC members that the September 14, 2017 meeting would be a joint meeting with the Member Advisory Committee (MAC). She asked the members to review the draft agenda in their folders and provide any additional topic recommendations.

ADJOURNMENT

There being no further business before the Committee, Chair Miranti adjourned the meeting at 10:03 a.m.

Cheryl Simmons
Staff to the PAC

MINUTES

JOINT MEETING OF THE CALOPTIMA BOARD OF DIRECTORS' MEMBER ADVISORY COMMITTEE AND PROVIDER ADVISORY COMMITTEE

September 14, 2017

A Joint Meeting of the CalOptima Board of Directors' Member Advisory Committee (MAC) and Provider Advisory Committee (PAC) was held on Thursday, September 14, 2017, at the CalOptima offices located at 505 City Parkway West, Orange, California.

CALL TO ORDER

Teri Mirani, PAC Chair, called the meeting to order at 8:15 a.m., and MAC Chair Sally Molnar led the Pledge of Allegiance.

ESTABLISH QUORUM

Member Advisory Committee

Members Present: Sally Molnar, Chair; Patty Mouton, Vice Chair; Suzanne Butler, Connie Gonzalez, Donna Grubaugh, Jaime Muñoz, Velma Shivers, Christine Tolbert, Lisa Workman

Members Absent: Sandy Finestone, Carlos Robles, Ilia Rolon, Christina Sepulveda, Sr. Mary Therese Sweeney, Mallory Vega

Provider Advisory Committee

Members Present: Teri Miranti, Chair; Suzanne Richards, MBA, FACHE, Vice Chair; Anjan Batra, M.D.; Donald Bruhns; Theodore Caliendo, M.D.; Jena Jensen; Pamela Kahn, R.N.; John Nishimoto, O.D.; Mary Pham, Pharm.D, CHC; Pamela Pimentel, R.N.; Jacob Sweidan, M.D.

Members Absent: Alan Edwards, M.D.; Steve Flood; Craig Myers; George Orras, PhD;

Others Present: Michael Schrader, Chief Executive Officer; Ladan Khamseh, Chief Operating Officer; Gary Crockett, Chief Counsel; Becki Melli, Program Specialist; and Cheryl Simmons, Project Manager

PUBLIC COMMENTS

No requests for public comment were received.

Chief Executive Officer Report

Michael Schrader, Chief Executive Officer, provided an update on CalOptima's behavioral health transition plan that integrates administration of Medi-Cal covered Behavioral Health, which includes Mental Health and Applied Behavior Analysis services, within CalOptima internal operations effective January 1, 2018.

Community Forum for Member and Provider Stakeholders

Homeless Initiatives

Susan Price, Director of Care Coordination, County of Orange, presented on the County's Homeless Initiatives and presented the following data on behalf of the County on homelessness. As of the January 2017 Housing and Urban Development (HUD) census of the homeless in Orange County, there were 2,584 unsheltered homeless and 2,208 sheltered homeless. Of those, 422 individuals were residing on the Santa Ana River Trail as of the survey date. The Courtyard at the Santa Ana Civic Center serves over 700 homeless during the day, and 400 homeless at night as a safe sleep shelter. The Bridges at Kraemer in north Anaheim has space for 100 per night with on-going construction to house an additional 100 beds, which is anticipated to be operational in late 2018. She also mentioned that Crisis Stabilization Units are being established with \$23.9 million in funding from the County of Orange to increase the number of beds available for people in psychiatric crisis, which would allow homeless individuals to receive immediate psychiatric care through these units rather than sending homeless members in crisis as to the nearest emergency room.

Drug Medi-Cal and Substance Use Disorder

Sandra Fair, Administrative Manager, Behavioral Health Services, Orange County Health Care Agency, presented on Behavioral Health Services Drug Medi-Cal: An Organized Delivery System for Substance Use Disorder Services (SUD). Ms. Fair reviewed the 5-Year Pilot Project that was implemented after California received a waiver from the federal government to develop a pilot project to better serve individuals experiencing a substance use disorder, and who were eligible for Drug Medi-Cal (DMC) under the Affordable Care Act. She noted that approximately 900,000 Orange County residents are eligible Medi-Cal beneficiaries in Orange County, and estimated that between 7,000 and 13,000 Orange County residents may seek treatment for SUD services in a year. Ms. Fair added that the new model supports integrated services with mental health and physical health, including services provided by CalOptima.

Orange County Strategic Plan for Aging

Patty Mouton, Vice President of Outreach and Advocacy, Alzheimer's of Orange County and member of the MAC, presented the Orange County Strategic Plan for Aging. Ms. Mouton noted that by 2040, it is anticipated that nearly 1 in 4 individuals will be age 65 plus in Orange County. The strategic plan was developed to prepare Orange County for the growing numbers of older residents and the issues they will face. Ms. Mouton reviewed the plan and noted that it was developed through on-going collaboration, and finalized with a series of 18-month goals starting on July 1, 2017 and ending on December 31, 2018. During this 18-month timeframe, 10 initiatives will be developed, including: Healthcare, Elder Abuse Prevention and Awareness, Transportation, Housing, Technology, OC Successful Aging, Social Engagement, Food Security Fundraising and Sustainability and Communications.

ADJOURNMENT

There being no further business before the Committees, the meeting adjourned at 10:16 a.m.

Cheryl Simmons
Staff to the PAC

Becki Melli
Staff to the MAC

**CalOptima Board of Directors'
Provider Advisory Committee**

GOALS AND OBJECTIVES FY 2017-2018

CalOptima Strategic Priority	CalOptima Goals	CalOptima Objectives	PAC Activities	1st Quarter (Jun - Sep 17/18)	Results of PAC Activities for Period
I. Innovation	Pursue innovative programs and services to optimize member access to care	1. Delivery System Innovation - Utilize pay-for performance, creative partnerships, sponsored initiatives and technology to empower networks and providers to drive innovation and improve member access.	Increase overall outcome of HEDIS metrics for cancer screenings, diabetes care and preventive care by: 1) Obtaining and reviewing quarterly reports from CalOptima Management for HEDIS and CAHPS indicators blinded by Networks and Community Health Centers. 2) PAC membership addressing their constituencies to set establish a goal to improve HEDIS performance metrics. PAC Members to discuss ideas collected from their constituencies to develop a plan to reach the goal. 3) Coordinating data from community and CalOptima using CalOptima's data warehouse.	PAC received a comparison study of the Community Network and the delegated Health Networks at the June meeting. The study included Performance Metrics for Adult & Child Med-Cal Clinical Measures; CAHPS outcomes. PAC received Medi-Cal and OneCare HEDIS 2017 results for 2016 data at the August meeting. OneCare Connect baseline results were also presented. Next steps were discussed to implement strategies of low performing results.	The Health Networks and CalOptima created a work group to review data and identify gaps in data.
		2. Program Integration - Implement programs and services that create an integrated service experience for members, including an integrated physical and behavioral health service model.	1) Monitor access and coordination of behavioral health and medical services through regular updates from CalOptima and Magellan. 2) Continue Whole Person Care Model updates.	1) Regular updates have been presented at all PAC meetings. At the Sept joint MAC/PAC meeting Michael Schrader provided us an update on the status to move the administrative services from Magellan to CalOptima effective 1/1/18. 2) WPC update was presented to the PAC at the August meeting. The start date was July 1st.	PAC members will provide feedback to CalOptima staff regarding the transition of behavioral health services for the Medi-Cal members (mild to moderate).

**CalOptima Board of Directors'
Provider Advisory Committee**

GOALS AND OBJECTIVES FY 2017-2018

CalOptima Strategic Priority	CalOptima Goals	CalOptima Objectives	PAC Activities	1st Quarter (Jun - Sep 17/18)	Results of PAC Activities for Period
		3. Program Incubation - Incubate new programs and pursue service approaches to address unmet member needs by sponsoring program pilots addressing areas such as substance abuse, behavioral health services, childhood obesity and complex conditions.	PAC will provide input into IGT funding recommendations prior to board approval.	At the August PAC meeting staff presented the status of the IGT the approved IGT funding categories for IGT 6&7. The PAC was also provided a status on IGT funding for 1-5.	PAC members will solicit feedback from their constituents for potential future IGT projects. Discuss in Q2.

**CalOptima Board of Directors'
Provider Advisory Committee**

GOALS AND OBJECTIVES FY 2017-2018

CalOptima Strategic Priority	CalOptima Goals	CalOptima Objectives	PAC Activities	1st Quarter (Jun - Sep 17/18)	Results of PAC Activities for Period
II. Value	Maximize the value of care for members by ensuring quality in a cost effective way	1. Data Analytics Infrastructure - Establish robust IT infrastructure and integrated data warehouse to enable predictive modeling, effective performance accountability and data-based decision making.	PAC Members to identify three (3) burdensome administrative pain points to improve efficiencies and work with CalOptima Staff to address these.	1) CalOptima implemented EFT funds transfer for capitation payment for the health networks (Medi-Cal and the Medi-Cal payment for OneCare Connect). Future cap payments for OneCare and OneCare Connect will be implemented. 2) Data exchange processes were simplified from excel file format to XLM. This will allow CalOptima to pull data directly instead of asking the delegated health networks for the same data. 3) Predictive modeling - presentation	Request Predictive modeling presentation in Q2.
		2. Pay for Value - Launch pay-for-performance and quality incentive initiatives that encourage provider participation, facilitate accurate encounter data submissions, improved clinical quality and member experience outcomes, and the spread of best practices.	Increase overall outcome of HEDIS metrics for cancer screenings, diabetes care and preventive care by: 1) Obtaining and reviewing quarterly reports from CalOptima Management for HEDIS and CAHPS indicators blinded by Networks and Community Health Centers 2) PAC membership addressing their constituencies to set establish a goal to improve HEDIS performance metrics. PAC Members to discuss ideas collected from their constituencies to develop a plan to reach 3) Coordinating data from community and CalOptima using CalOptima's data warehouse.		CalOptima will continue to provide reports for discussion by PAC.

**CalOptima Board of Directors'
Provider Advisory Committee**

GOALS AND OBJECTIVES FY 2017-2018

CalOptima Strategic Priority	CalOptima Goals	CalOptima Objectives	PAC Activities	1st Quarter (Jun - Sep 17/18)	Results of PAC Activities for Period
		3. Cost Effectiveness - Implement efficient systems and processes to facilitate better understanding of internal cost drivers, eliminate administrative redundancies, and promote effective and standardized internal practices.	Explore ideas to broaden access for hard to find providers.		Request agenda item in Q2.

**CalOptima Board of Directors'
Provider Advisory Committee**

GOALS AND OBJECTIVES FY 2017-2018

CalOptima Strategic Priority	CalOptima Goals	CalOptima Objectives	PAC Activities	1st Quarter (Jun - Sep 17/18)	Results of PAC Activities for Period
III. Partnership and Engagement	Engage providers and community partners in improving the health status and experience of our members	1. Provider Collaboration - Enhance partnerships with networks, physicians and the Provider Advisory Committee to improve service to providers and members, expand access, and advance shared health priorities.	Provide timely input on key issues prior to Board decision	This issue was identified to be discussed at the joint MAC/PAC September meeting, however we ran out of time. This will be discussed at a future joint meeting or a regular meeting of the PAC.	CalOptima will continue to provide reports for discussion by PAC.
		2. Member Engagement - Seek input from the Member Advisory Committee and plan's diverse membership to better understand member needs, and ensure the implementation of services and programs that strengthen member choice and experience and improve health outcomes.	Hold a joint MAC/PAC Meeting once a year to share information if MAC is agreeable.		
		3. Community Partnerships - Establish new organizational partnerships and collaborations to understand, measure and address social determinants of health that lead to health disparities among the plan's vulnerable populations.	Review quarterly reports from CalOptima Management for HEDIS and CAHPS indicators blinded by Networks and Community Health Centers	PAC received Medi-Cal and OneCare HEDIS 2017 results for 2016 data at the August meeting. OneCare Connect baseline results were also presented. Next steps were discussed to implement strategies of low performing results.	CalOptima will continue to provide reports for discussion by PAC.

**CalOptima Board of Directors'
Provider Advisory Committee**

GOALS AND OBJECTIVES FY 2017-2018

CalOptima Strategic Priority	CalOptima Goals	CalOptima Objectives	PAC Activities	1st Quarter (Jun - Sep 17/18)	Results of PAC Activities for Period
III. Partnership and Engagement (Cont.)	Engage providers and community partners in improving the health status and experience of our members (Cont.)	4. Shared Advocacy - Utilize provider and community relationships to educate stakeholders about health policy issues impacting the safety-net delivery system and community members, and promote the value of CalOptima to members, providers, and the broader population health of the Orange County Community.	Support Board and CalOptima to proactively respond to ACA, OCC and Cal MediConnect changes.	CalOptima informed members to utilize our associations (CAPG, HASC etc.) to help develop awareness for the continuation of the SNP, Cal MediConnect and Medi-Cal programs with the State. Discussions should include the Medi-Cal Expansion and Classic rates.	Request agenda item in Q2.
<i>Charge of the Advisory Committees pursuant to Resolution No. 2-14-95:</i>					
1. Provide advice and recommendations to the Board on issues concerning CalOptima as directed by the Board.					
2. Engage in study, research and analysis on issues assigned by the Board or generated by the committees.					
3. Serve as liaisons between interested parties and the Board.					
4. Assist the Board in obtaining public opinion on issues related to CalOptima.					
5. Initiate recommendations on issues of study to the Board for their approval and consideration.					
6. Facilitate community outreach for CalOptima and the CalOptima Board.					