

**HEALTH PLAN OF SAN MATEO  
CONSUMER ADVISORY COMMITTEE MEETING  
Meeting Minutes  
Thursday, July 27, 2020  
801 Gateway Blvd. 1<sup>st</sup> Floor-Boardroom  
South San Francisco, CA 94080  
\*\*Virtual Meeting\*\***

Important notice regarding COVID-19: Based on guidance from the California Department of Public Health and the California Governor's Office, in order to minimize the spread of the COVID-19 virus, the meeting was conducted via online meeting/teleconference. Members of the public were invited to submit public comment via email to the Assistant Clerk to the Commission in advance of the meeting and were also able to access the meeting using the web and teleconference information provided on the meeting notice.

**Committee Members Present:** Amira Elbeshbeshy, Ricky Kot, Rob Fucilla, Mary Pappas, Judy Garcia, Angela Valdez

**Committee Members Absent:** Cynthia Pascual, Hazel Carrillo

**Staff Present:** Maya Altman, Pat Curran, Dr. Richard Moore, M.D., Gabrielle Ault-Riche, Colleen Murphey, Karen Fitzgerald, Karla Rosado-Torres, Kiesha Williams, Megan Noe, Samareen Shami, Charlene Barairo,

- 1.0 Call to Order/Introductions:** The meeting was called to order at 12:02 pm by Ms. Elbeshbeshy.
- 2.0 Public Comment:** There was no public comment virtually or via email.
- 3.0 Approval of Agenda:** The agenda was unanimously approved as presented via roll call. **M/S/P**
- 4.0 Approval of Meeting Minutes for June 11, 2020:** The minutes from the June 11, 2020 meeting was unanimously approved as presented via roll call. **M/S/P**
- 5.0 HPSM Operational Reports and Updates**
  - 5.1 CEO Update:** Mr. Curran provided a verbal update on behalf of CEO, Maya Altman. He started with an update on the state budget. The good news is that there are no eligibility changes or tangible reduction in services for Medi-Cal. Services and eligibility are basically intact. However, he warned the state budget has suffered tremendously. To help, there will be a deferral of payments; this is a practice that was employed by the state during the last recession. There is also hope for some Federal relief. The HPSM budget will be affected by a 1.5% cut overall, while it may not seem drastic, it is somewhat significant.

He also went over HPSM's outreach to Providers, particularly the congregant and skilled nursing facilities. HPSM has also reached out broadly to their most vulnerable members, ensuring that they are getting the services they need at this time and keeping a focus on preparing for a return to services. HPSM is also preparing for the public safety power shutdowns (PSPS) planned for the summer months, concerned about members that may be affected, they are also planning for the upcoming flu season.

Ms. Pappas asked if HPSM employees are working remotely. Mr. Curran confirmed that a large majority, over 95% are successfully working from home. There are a handful of employees at the office to handle the day to day logistics like mail and upkeep of the facility. He remarked employees are not planning on returning to the office until the end of August and HPSM may consider extending that even later depending on how things look at that time. He emphasized that HPSM is focused on outreach and providing service to their members and there have not been shortfalls in that area.

**5.2 CMO Update:** Dr. Moore provided a brief COVID update. He informed the group that a consulting team has met with the Skilled Nursing facilities (SNF) to help them with infection control procedures. They will be conducting a second visit. This comes about four weeks after their first inspection when many deficiencies were identified. HPSM should hear their findings at the end of the week, but the signs are very encouraging. HPSM conducts weekly or bi-weekly coalition meetings with the county's SNFs. Recently, they invited assisted living facilities to join these meetings to take part of the presentations from community laboratories about COVID testing since facilities are required to regularly test staff and residents.

HPSM is currently addressing concerns with Intermediate Care Facilities or ICFs. These facilities are peer grouped by level of care and bed size. They provide custodial care under a physician's direction for residents who have a developmental disability.

Dr. Moore spoke about a recent town hall with Congresswoman Speier, she wanted to hear the concerns of the county's physicians. 36 physicians attended the event. The number one concern, was the availability of personal protective equipment (PPE) needed to safely re-open/run their practices. County Health doctor, Shruti Dhapodkar, MD attended the event. Having heard the PPE concerns, County Health has forwarded brochures to HPSM and to the medical association about the procedure to request PPE from the County. The other request of Congresswoman Speier was to ensure the preservation of telephone-only visits as a CMS-approved benefit.

Medi-Cal enrollment numbers have not gone up much yet, there was a slight uptick in May but not the numbers they expected. He also provided an update on the state's COVID numbers.

**5.3 Proposed Changes to Medi-Cal ID Cards:** Ms. Fitzgerald, Marketing and Communications Director, went over the new member ID cards and packets currently proposed by the Marketing & Communications Department in conjunction with Member Services. It's a cost saving, member engagement improvement initiative. The new user friendly, environmentally conscious design will save money and cut down on the number of mailings. She reminded the group that because DHCS has announced the pharmacy carve out effective January 1, 2021, they needed to update the information on the enrollment cards anyway. The proposal would combine the ID card and packet into one comprehensive package, instead of the piece meal approach currently in place, where members receive their ID card first, followed up with a large and cumbersome packet and directory. Going forward, they would like to invite new members to view the directory online or ask them to reach out to Member Services for that information, a practice currently used by a number of health plans in the area. Ms. Fitzgerald is confident the new streamlined process will not only save money but also improve member engagement. They are also making efforts to engage members thru paperless communication, starting with new members. Eventually, they'd like to procure email addresses for all members to streamline communication going forward. They are also working on a more robust "New Member" landing page on the HPSM website, improving navigation with easy to locate member materials. Their intent is to get members acclimated with the website right away. Ms. Pappas asked if most members have computers and how many are computer savvy. Ms. Fitzgerald said recent survey conducted showed that an increasing number of members, even those over the age of 65 are using computers more and more. Some surveys actually show that there is growing interest in getting less paper, with many members opting for paperless options. Mr. Kot asked what efforts are being made to reach those without computers or are just not savvy enough to take advantage of this. Ms. Fitzgerald noted they are not forcing anyone to choose paperless only options, they can continue to receive paper correspondence if they wish.

**5.4 Quality Improvement:** Ms. Noe provided an update on the interpreter services. She advised the group that HPSM offers telephonic interpreter services in over 200 languages as well as an in-person option for those who utilize American Sign Language (ASL). They are now announcing video interpreter services. These services are available for either in-person office visits or Telehealth video visits and includes ASL video interpreters too. If

members would like to use either the video or the phone interpreter option for either an in-person or Telehealth visit, they can let their Provider know ahead of time to arrange that. There is quite a bit of information available for both providers and members on the HPSM website in the language services section.

Ms. Shami reviewed HPSM's outreach efforts to two high risk populations, asthmatic members in the Asthma Outreach Program and expectant or postpartum mothers in the Baby and Me Program. In the early months of the shelter-in-place there was a lot of concern from members of these groups. They've expanded their outreach program to address COVID related issues and have reached out to over 100 adults with asthma and over 200 pregnant or post-partum members. She reported that members in the Baby and Me program were concerned about the risk of attending well-baby office visits. They were also concerned about pre-natal and post-partum appointments being changed to telehealth appointments. Procuring or being able to afford diapers were also big issues. HPSM stressed the importance of keeping well-baby appointments and helped members understand what to expect, in an effort to lessen their anxiety. They were also able to secure a 3 month supply of diapers for some members, with the help of HPSM Accountant II, Jeanette De La Rosa. Mr. Fucilla congratulated the group on their efforts in procuring diapers and supplies for these new moms.

The Asthma group had concerns about visiting an ED during an asthma episode. They also had questions about COVID screenings and what to expect when visiting their Provider. Some members were unable to reach their Provider in a timely manner and others were having issues with their prescriptions. The department addressed all health education questions and addressed all pharmacy related issues, encouraging members to obtain a 90 day supply of all medications.

**5.5 Grievance and Appeals:** Ms. Rosado-Torres reviewed the G&A report. This quarter the "Rate of complaint per member" was updated to reflect the change in membership. In the 2<sup>nd</sup> quarter most of the LOB's met their "Rate of Complaint per 1,000 members" goal, as well as timeliness goals for both grievance & appeals and Pharmacy. They saw a significant decrease to the volume of cases and believe this is attributed to COVID-19. There was a small reduction in appeals. The Rate for Overturned Cases is 50%, which represents 8 cases. She reminds the group there are a lot less cases, however that does make the percentages look higher. There was one case from the Medi-Cal LOB that went to the Department of Managed Health Care (DMHC) for the 2<sup>nd</sup> quarter. There were 9 Appeals cases that went to independent review. Medi-Cal grievances are less in Q2 than

Q1, however, there was a slight increase in the volume of appeals, the increase was mainly on Pharmacy appeals. The overturned percentage is at 40%, while that may seem high it represents half the number of cases from the last quarter. They've also updated their goals for rate of complaints for their NCQA data. The rate for non-behavioral appeals was slightly higher in Q2, something they will monitor. They were not able to get data on Kaiser for this report, but will include that in the next one. She went over PCP changes; 22 members requested to change their PCP from 17 different PCP's. Of those, 10 were clinics and 7 were individual providers.

**5.6 Provider Services:** Ms. Murphey provided a verbal report on Provider Services. She mentioned their focus on congregant care settings. They are focusing on both one-on-one process improvements and general items like how they are communicating with members and families. She also mentioned they are coordinating with the ombudsman office to share information and communication materials, and with Institute on Aging (IOA) to include our Residential Care Facilities for the Elderly (RCFEs) in our learning collaborative. A number of RCFEs joined our 7/2 call.

One major item they are working on is transferring BHRS admin work like contracting and claims payments to HPSM. They are moving the timeline up for that, hoping to have most in-network by 10/1/2020, which should help reduce member and provider confusion over the transition period. The goal is to have a more integrated partnership with the county.

They are talking with some of the hospitals while they are reopening. Some like Stanford are almost back to normal utilization, but not all are like that.

They are currently in talks with AHMC, a buyer for Seton. There are no major changes proposed at this time. Key people are staying on which will help with consistency.

For those who members who don't have a PCP or if their provider does not offer telemedicine, HPSM is offering teledoc. It provides on-demand, virtual visit with a physician. Utilization has been very low so far, only 30 have registered and only 10 visits so far. They are thinking of ways of promoting this.

They continue to conduct outreach to our primary care provider network with a recent focus on telemedicine, vaccines, and preventive services and are actively working on additional provider recruitment in the primary care space, NEMT, and speech therapy. Most other provider recruitment efforts are on pause until Oct 1 as we focus on BHRS.

Within our NEMT recruitment work, we have a new provider called Wheelcare Express who has increased their number of vans in San Mateo County and has the capacity to serve HPSM members.

- 5.7 Member Services:** Ms. Williams went over current enrollment, providing a breakdown for all the lines of business. Enrollment had been decreasing in 2019, but over the last couple of months there has been a slight uptick. Overall enrollment has been consistent. She briefly went over the Call Center report, all metrics have been steady and timelines were met. She noted they have robust email communications with members, with that often being the main course of communication.

Ms. Barairo went over the CareAdvantage (CA) numbers, Q2 enrollment numbers have increased slightly. This increase is due to Governor Gavin Newsom's order to suspend terminations other than those due to death, a move out of the county, or voluntary disenrollment. Regardless the team is encouraging members to complete their redetermination packets as soon as they can, providing outreach when necessary. Enrollment was extended to October 24, 2020. In April CMS allowed an extension to the deeming period, which has resulted in an overall increase in CMC enrollment. She also reviewed the Call Center numbers for Q2.

- 6.0 New Business:** There was no new business.

- 7.0 Adjournment:** The meeting was adjourned at 1:03 pm by Ms. Elbeshbeshy. **M/S/P**

Respectfully submitted:

*M. Heryford*

M. Heryford

Assistant Clerk to the Commission