

Sacramento County Health Authority Commission General Meeting

Meeting Agenda

July 18, 2023, 3:00 – 5:00 PM

Meeting Invitees

- Commission Members
- General Public

Meeting Location

Sierra Health Foundation, Bannon Island Conf. Room, 1321 Garden Highway, Sacramento, CA 95833

[Zoom Meeting](#)

Call-in Number: +1 669 254 5252

Meeting ID: 161 391 2905

Attendance

Name	Attendance	Name	Attendance
SCHA Voting Members			
Ann Boynton	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent	Kirti Malhotra, MD	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent
April Ludwig	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent	Kyle Stefano	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent
Chet Hewitt, <i>Chair</i>	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent	Marvin Kamras, MD	<input type="checkbox"/> Present <input checked="" type="checkbox"/> Absent
Darrell Lake	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent	Michelle Monroe	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent
Edwin Kirby, <i>Vice Chair</i>	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent	Supervisor Patrick Kennedy	<input type="checkbox"/> Present <input checked="" type="checkbox"/> Absent
Janice Milligan	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent	Phil Jackson	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent
Jerry Bliatout	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent	Phyllis Baltz	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent
Joann Alston	<input type="checkbox"/> Present <input checked="" type="checkbox"/> Absent	Ravinder Khaira, MD	<input type="checkbox"/> Present <input checked="" type="checkbox"/> Absent
Jonathan Porteus	<input type="checkbox"/> Present <input checked="" type="checkbox"/> Absent	Stacy Lorenzen	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent
Katie Andrew	<input type="checkbox"/> Present <input checked="" type="checkbox"/> Absent	Tim Lutz	<input type="checkbox"/> Present <input checked="" type="checkbox"/> Absent
Kim Williams	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent		
SCHA Non-Voting Members			
Abbie Totten	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent	Janice Milligan	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent
Amber Kemp	<input type="checkbox"/> Present <input checked="" type="checkbox"/> Absent	Venu Kondle, MD	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent
Beau Hennemann	<input type="checkbox"/> Present <input checked="" type="checkbox"/> Absent	Katie Andrew	<input type="checkbox"/> Present <input checked="" type="checkbox"/> Absent
County Staff to SCHA			
Jenine Spotnitz	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent	Jake Abarca	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Absent

Agenda Item	Time
<p>1. Welcome/Opening Remarks – Chet Hewitt, Chair</p> <p>Commission Chair Chet Hewitt convened the meeting and provided introductions with a brief welcome message at 3:05 p.m.</p>	3:00 – 3:10 pm
<p>2. Agenda Review, New Member Introductions, and Updates – Jenine Spotnitz, Sacramento County Department of Health Services, Commissioners, and Yevgeniy Kurdyumov, Department of Human Assistance</p>	3:10 – 3:15 pm

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<p>Jenine Spotnitz presented the agenda for the meeting. She introduced Dr. Kirti Malhotra, who will take the position of Advocate for Medi-Cal Beneficiaries succeeding Dr. John Landefeld. Commissioner Dr. Kirti Malhotra introduced herself to the group, expressing her enthusiasm and excitement for serving Medi-Cal Beneficiaries through the Commission.</p> <p>Yevgeniy Kurdyumov began his presentation by highlighting Medi-Cal Renewal data. DHA determines eligibility for various programs and has over 300,000 cases.</p> <p>Commission Vice Chair Edwin Kirby asked if these numbers represented the current state before June. Yevgeniy Kurdyumov responded that these numbers were tallied beginning in June when renewals started in California.</p> <p>Commissioner Dr. Kirti Malhotra asked how many languages the County offers support in. There are currently three main languages staff speak, including English, Spanish, and Russian. The County contracts out for help with translations and materials for all the threshold languages besides these.</p> <p>Commissioner Phyllis Baltz wondered how individuals without addresses receive their redetermination packets. She asked if they might be underrepresented or not represented. Yevgeniy Kurdyumov stated that individuals can utilize the County PO box if they do not have an address.</p> <p>Commission Chair Chet Hewitt followed up with a question about community outreach and capacity. He pointed out that given the high non-return rate of 48%, staff should be on the ground doing community outreach. Commission Chair Chet Hewitt followed up with a second question surrounding CalWIN. Commission Chair Chet Hewitt stated that when CalWIN modules were released years ago, there was a tremendous drop-off rate. Commission Chair Chet Hewitt wants to ensure that the transition to the new system will not confront the same obstacles as CalSAWS. These transitions are often problematic and often have data transfer that is not accurate.</p> <p>Yevgeniy Kurdyumov understood the concern, as migration of data takes work. The State has been working diligently with counties migrating to CalSAWS in waves. Sacramento County will go through its transition in Wave 3. During each wave, the State, vendors, and contractors constantly communicate and train. DHA will similarly go</p>	

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<p>through these trainings. For example, staff development efforts include CalSAWS-related training and communications.</p> <p>Commission Chair Chet Hewitt mentioned that when people move counties, they often have to migrate across systems. Commission Chair Chet Hewitt asked if other counties have started in earlier waves. Yevgeniy Kurdyumov responded that Placer County is undergoing its wave.</p> <p>A last question was posed about whether there will be autorenewals or criteria for MAGI recipients. Yevgeniy Kurdyumov stated that about 60% of MAGI-based eligibility is based on information (e.g., income).</p>	
<p>3. Presentation and Discussion: 2024 Medi-Cal Managed Care Plan Transitions – Sarah Brooks, Sellers Dorsey</p> <p>Sarah Brooks initiated her presentation and provided her background. She works at Sellers Dorsey, and has experience across a wide range of Medicaid issues nationwide. Sarah shared that the presentation will highlight the transition data of each MCP and will show the breakdown of patient share. She discussed the MCP transition principles and the upcoming policy guide that will be released, containing information about member enrollment, data transfer, monitoring, and communication cadence. Version 1 of the 2024 MCP Transition Policy Guide has been released but is still in development. The Department of Health Care Services (DHCS) aims to minimize service interruptions and plan for a smooth transition.</p> <p>Members will receive a 90-day notice if enrolled in an MCP today and a 30 to 60-day notice from Health Care Options. Patients will be asked if they desire to change MCPs, or will be notified that their MCP is exiting. For counties with an exiting MCP, members can change monthly to new plans, and those already in non-exiting plans will remain enrolled.</p> <p>Agreement length terms between providers and MCPs can vary from 2 to 12 months. The Continuum of Care (CoC) program is available to members for up to 12 months.</p> <p>CoC for Covered Services extended from 90 days to 6 months. CoC Coordination and Care Management Information transfer must be complete by January 1st, 2024, or within 15 calendar days of the member changing to a new care manager. This proposed policy only applies to Special Populations.</p> <p>For ECM and Community Supports, ECM was defined as a mandatory</p>	<p>3:15 – 4:15 pm</p>

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<p>benefit, meaning all plans must offer this. Plans must also honor all previous ECM authorizations. If a beneficiary switches plans, for example, if they were eligible for ECM in the first plan, this must carry over to the second plan.</p> <p>The forthcoming policies should address concerns like data transfer, oversight and monitoring, and education and communications.</p> <p>Commissioner Dr. Venu Kondle asked if any efforts are underway to reach providers and patients. Sarah discussed that notices were going out to members and beneficiaries to share this information with them. A focus on making providers aware is underway to ensure there are no cracks in the system. Commissioner Dr. Venu Kondle stated there should be oversight somewhere, not just for Aetna, but for other plans and entities who are responsible.</p> <p>Commissioner Abbie Totten shared her concern over ensuring every provider understands what CoC looks like. Part of Molina Health Plan's process is to develop communication pathways, workflows, dedicated case managers, and a single Point of Contact who is 100% responsible for making sure an individual has everything they need. Because of the overlap between networks and IPAs, as long as plans can get data soon enough for transition, there might not be a high need for CoC on the health plan side. MCPs would work with medical groups and hospitals to ensure they each have the data in their system. There is a lot to work out before automation. Disruptions were minimal because of how close plans worked together.</p> <p>Commissioner Les Ybarra commented on the guidance and how, though the information on CoC is public, few people tends to read this. The network overlap has been significant, and the plans have a good partnership, which helps with continuity. Given the strong networks, Commissioner Les Ybarra also expressed his confidence in Sacramento County.</p> <p>Commissioner Les Ybarra followed up and asked if contracts for Kaiser Permanente (KP) have enrollment limitations, and if they are expanding or limiting this. Sarah responded that KP has a special deal with the State, that is different from other health plans. KP has said they will take up to 3,000 default enrollees, but not specifically in Sacramento County but 5 or 6 other counties. There are restrictions, though; if someone wanted to get into KP, they would need to have been with KP or have a family linkage. Those types of things exist in all counties. However, if KP is unavailable, patients could have a backup plan instead.</p>	

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<p>Mark Bertolini stated that only one of the plans is transitioning, and they want to ensure the CoC is the #1 priority. Plans are working closely together despite competition. Aetna will be here in the next meeting to present what is happening with the transition. Aetna transitioned out in San Diego with United, which worked very well. Aetna extracted lessons and learnings, too, such as specific data fields, that informed what information was helpful. The State is also making sure those data points are added to the layout of their shared data.</p>	
<p>4. Presentation, Discussion and Action: Approval of Implementation Strategies 1-4 and Appointment of Quality Improvement/Quality Assurance Committee – Jenine Spotnitz, Department of Health Services and Chet Hewitt, Chair</p> <p>Jenine Spotnitz presented the draft implementation plan for the strategic priorities.</p> <p>Commissioner Ann Boynton remarked that bringing in a consultant in October seemed late. She wondered what other staff support the Committee needs or what other support staff Committee members could expect support from the County of Sacramento.</p> <p>Jenine Spotnitz commented that a Comprehensive Data Request is underway to help with the prioritization after data is received; the consultant will be tasked with collecting the data, and then a more formal analysis will be done once the consultant is onboarded.</p> <p>Commissioner Les Ybarra shared that the measures will vary depending on what the Commission is asking for. The ask may be a conversation with plans to solicit feedback and help make decisions. A plan that scopes out priorities and what to expect while also looking at performance and not just outcomes data.</p> <p>Commissioner Les Ybarra also noted that one of the most significant areas of concern is data shared across plans surrounding community-level issues. With membership changing, this will also shift how plans perform. He noted the need to work collectively to implement change. HEDIS scores come out in the middle of the year the following year after data is submitted, so it is tricky to use that data.</p> <p>Jenine Spotnitz continued the conversation, highlighting how strategy 2 involves collecting qualitative data to determine gaps through focused data collection and gathering feedback.</p>	<p>4:15– 4:45 pm</p>

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<p>Commission Chair Chet Hewitt noted that the implementation strategies will not be voted on today but will be further developed and placed as a draft. Commission Chair Chet Hewitt requested a timeline to collect questions and reconvene, commenting that today’s discussion prompts reconsidering some content.</p> <p>Commission Vice Chair Edwin Kirby agreed and thought it would be great to get ideas from plans. He requested that plan partners brainstorm ideas and feedback and send them to the Ad Hoc Committee for Strategies 1-4.</p> <p>Commission Chair Chet Hewitt agreed and requested members of the Ad Hoc Committee for Strategies 1-4 to reconvene and revise the implementation plan based on the comments received.</p> <p>Commissioner Ann Boynton commented that there needed to be representation from the other two plans not present and encouraged them to attend as their participation is critical to ensure consistency and, for example, to understand data gaps, which should happen sooner rather than later.</p> <p>Commissioner Dr. Ravinder Khaira commented that the reasoning behind collecting qualitative and quantitative data stems not from the Health Authority operating as merely an oversight body but from working in partnership with the delegated entities to meet their CalAIM goals.</p> <p>Commissioner Dr. Ravinder Khaira thinks the Health Authority should not just confirm that MCPs are doing what they are supposed to but should work with MCPs to help them meet deliverables, and work in partnership with MCPs to help them help Sacramento County constituents.</p> <p>Commission Vice Chair Edwin Kirby stated that an early September deadline to collect and gather feedback could work to have time before the September 19th meeting. The Ad Hoc Committee for Strategies 1-4 will revise the Implementation Plan with feedback from MCPs and Commissioners.</p> <p>Commission Chair Chet Hewitt proceeded with appointing the QIQA Committee, including:</p> <ul style="list-style-type: none"> • Tim Lutz • April Ludwig • Stacey Lorenzen • Dr. Venu Kondle 	

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<ul style="list-style-type: none"> • Dr. Ravinder Khaira • Eddie Kirby 	
<p>5. Public Comment – <i>One comment per person, limited to two minutes.</i></p> <p>Commission Chair Chet Hewitt called for public comment. There was none.</p>	<p>4:45 – 4:55 pm</p>
<p>6. Closing Comments and Adjournment – <i>Chet Hewitt, Chair</i></p> <ul style="list-style-type: none"> • Next meeting: September 19, 2023, 3:00 – 5:00 PM <p>Commission Chair Chet Hewitt thanked Commissioners and members of the public for their input and work on the Implementation Strategies 1-4, noting the next meeting will be held September 19th, 2023 from 3:00 – 5:00 p.m. Commission Chair Chet Hewitt adjourned the meeting at 4:14 p.m.</p>	<p>4:55 – 5:00 pm</p>

Members of the public are encouraged to attend. Public comments are accepted during designated time. Members of the public may also submit written comments electronically to AbarcaJ@saccounty.gov, or by US Postal Service to 7001-A East Parkway, Suite 1000, Sacramento, CA 95823. Public comments will be accepted until the adjournment of the meeting, distributed to Health Authority Commission members, and included in the record. Electronic or hard copies of documents are available upon request. To request documents, or if you wish to attend and need to arrange for an interpreter or a reasonable accommodation, please contact Jake Abarca at AbarcaJ@saccounty.gov or 916-706-0668. Electronic copies of documents will be emailed upon request and hard copies of documents may be picked up at 7001-A East Parkway, Sacramento, CA 95823. For more information regarding the Sacramento County Health Authority Commission, please visit our website at Sacramento County Health Authority.