

**INLAND EMPIRE CCI STAKEHOLDER ADVISORY
COMMITTEE MEETING**

(APPROVED MINUTES FOR-July 23, 2013)

Location: IRC 1425 S. Waterman Ave, San Bernardino, CA 92408

Date: Tuesday, July 23, 2013- 1:30 pm -4:30pm

Appointed Committee Members Present:

<u>Person</u>	<u>Title</u>	<u>Affiliation</u>
Barbara Porter	Program Director	Inland Empire Adult Day Healthcare Center
Cindy Chiu for Megan Juring	Deputy Director	Department of Rehabilitation
Dianne Sceranka for Sarah Eberhardt-Rios	Deputy Director	San Bernardino County Department of Behavioral Health
Dimitrios Alexiou	Vice President	Hospital Association of Southern California
Felice Connolly	Provider	Riverside County In- Home Support Services Public Authority
G.G Crawley	Deputy Director	San Bernardino County In- Home Supportive Services
Johnny Andrade	Supervising Program Specialist	Riverside County In- Home Support Services
Kristine Loomis	Consumer	Riverside County In- Home Support Services
Leti Fierro	Senior Administrative Analyst	Riverside County In- Home Support Services Public Authority
Lisbeth Roberts	Director	Health Insurance Counseling and Advocacy Program
Mary Rios (Attended by phone)	Multicultural Affairs Advocate	Disability Rights California
Miguel Benitez for Wendy Duchon		SEIU
Myette Christian	Registry Manager	San Bernardino County In- Home Supportive Services Public Authority
Paul Van Doren	Executive Director	Community Access Center
Ricardo Cisneros	Regional Coordinator	United Domestic Workers
Ron Stewart	Deputy Director	Riverside County Office on Aging
Sergio Calderon	Director	Alzheimer's Association
Steve Steinberg	Program Chief	Riverside County Department of Behavioral Health
Wasima Alvi	Clinical Services Manager	Inland Regional Center

Committee Members Absent

<u>Person</u>	<u>Title</u>	<u>Affiliation</u>
Chris Stottlemeyer (Vice-Chair)	Administrator	California Association of Health Facilities
Dr. Brad Gilbert	Chief Executive Officer	Inland Empire Health Plan
Dr. Scott Allen	Physician	Provider
Fran Bates	Executive Director	Rolling Start
Michele Wilham	Director	Riverside County Office on Aging,
Randy Schlecht	Consumer	San Bernardino County In- Home Supportive Services
Ron Buttram (Chair)	Director	San Bernardino Department of Aging and Adult Services
Sharon Swayzer	Provider	San Bernardino County IHSS Public Authority

IEHP Committee Members Present:

<u>Person</u>	<u>Title</u>
Ben Jauregui	Disability Program Manager
Roger Uminski	Director of Health Administration

Molina Healthcare of California Committee Members Present:

<u>Person</u>	<u>Title</u>
Deborah Miller	Vice President of Health Services
Dr. Richard Bock	Chief Medical Officer
Lisa Hayes	Director, Disability & Senior Access Services

**INLAND EMPIRE CCI Stakeholder Advisory Committee Meeting
Meeting Minutes for July 23, 2013 @ 1:30-4:30 pm**

Agenda Item	Discussion of Agenda Items	Action
<p>I. Welcome and Introductions <i>Roger Uminski, IEHP (Interim Chair)</i></p>	<p>A. Due to the absence of both the Chair and Vice-Chair, Roger Uminski of IEHP was appointed interim Chair for the July 23, 2013 CCI Stakeholder Advisory Committee Meeting.</p>	<p><i>No Action Required</i></p>
<p>II. Acceptance of minutes from March 21, 2013 <i>Roger Uminski, IEHP (Interim Chair)</i></p>	<p>A. A correction was made in attendance. Steve Steinberg was not an attendee of the May 21, 2013 meeting. B. Minutes were accepted with correction.</p>	<p><i>No Action Required</i></p>
<p>III. Review of Action Log from May 21, 2013 <i>Roger Uminski, IEHP (Interim Chair)</i></p>	<p>A. Create Website for Committee/ Public- Status Update: A draft picture of what the website will look like was presented. B. Create 2 list serves. One for Committee and One for Public- Both Committee and Public list serves have been created. They will be updated/ People will be able to add themselves via a link on the website.</p>	<p><i>Complete</i> <i>Complete</i></p>
<p>IV. Communication</p>	<p>A. The requested items that have been accomplished thus far include :</p> <ul style="list-style-type: none"> • The CCI Stakeholder Advisory Committee Website • Brochure template created by SCAN to customize and distribute • A list of Acronyms has been created. Additional acronyms can be added as they surface. <p>1. Kristine Loomis- If the group develops any kind of document; a process that may work the easiest would be to develop an “opt out” process. So, whatever a document that needs review and approval can circulate on the list serve giving each member of the committee 24-48 hours to opt out, if the member does not opt out than their names will be added to the document as a participant. The Trailer Bill language asks the State to use Stakeholder Reviews for the public four times a year; we might also want to contribute something as a committee to that process.</p> <ul style="list-style-type: none"> ○ A concern on having an opt out process is that many of the Stakeholders on the panel are incredibly busy and do not see all emails within the 24-48 hours and there may be something that is objected or sensitive to that person, with that being said if this process may need to be modified. ○ G.G. Crawley- In the Department of Aging and Adult services, if there is correspondence that is being signed it isn't just that specific department, it will have to go further up for approval to put a name on it. ○ If this process is decided upon, there will need to be a unanimous vote in a future meeting. Every organization is different and it will be tough to get consensus. ○ Barbara Porter- Would it be possible to pick a certain day to send out correspondence for review? ○ A way to not be controversial is to possibly submit the minutes from the meetings to the 	

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	<p>State to inform them of specific topics, and maybe highlight them to show what has been talked about in the meetings. In the meantime anything that will be sent out correspondence wise will be voted on at the meetings.</p> <ul style="list-style-type: none"> ○ Brenda Primo- It would be appropriate to designate to both Plans and then send the correspondence to the State with the minutes and state that “We do not believe this is understandable”, those forms can be changed and if enough of the Policy Committees agree then CMS will have to go back and look at the input provided. ○ Lisbeth Roberts- Because the HICAP counselor are a part of The State Health Insurance Assistance Program (SHIP) HICAP is assigned by CMS a unique ID number to be able to contact Health Plans and Medicare Advantage Plans on behalf of the member without the member being present in order to advocate for them, it would be helpful for the HICAP counselor and helping the clients if IEHP and Molina would utilize the same process that the Plans may already have the guidance for under the Medicare D-SNP, The Plans can then utilize this process for the Cal MediConnect Program so if HICAP needs to advocate and ask more questions there will be a direct SHIP aligned to the Plans that the councilors can utilize. <p>2. Roger Uminski- As this group’s purpose is to provide input to assist the Plans as the Plans are developing this product, what are some of the things that the group would like to see on the agenda for the next time that this group meets? Are there specific things that the group would like to provide input on?</p> <ul style="list-style-type: none"> ○ Lisbeth Roberts- The rates. Also, a Plan Benefit Design to show what the benefits will be. ○ Barbara Porter- How often do the Plans update their websites for when the Plans get new Providers? Is there a way to get that information as current as possible? <ul style="list-style-type: none"> • The Plans will look into it and report back to the group. ○ Paul Van Doren- Suggested that the Plans share a report of the findings from the Readiness Review. <ul style="list-style-type: none"> • If the Plans have that information by the next meeting they will share that information. ○ G.G. Crawley – Suggested revisiting Communication, and any updates about the flyers. ○ Ron Stewart- Look at the SPD experience, where they may have dropped the ball and not carried it forward as best as it could have been in attempt to get geared up for January. 	
<p>V. CCI/ Cal MediConnect Updates <i>Dr. Richard Bock, Molina</i> <i>Roger Uminski(Interim Chair),</i> <i>IEHP</i></p>	<p>A. CCI is still on track to move forward January 1, 2014. Both Plans are in preparation for the Readiness Review. The contractor (NORC) which was selected by CMS to review the Readiness Review documents and conduct an onsite review is currently onsite at IEHP. The review started yesterday July 22, 2013. The same review will take place at Molina the following week on July 29-30th. 600 + Readiness Review documents from each Plan were submitted to Department of Health Care Services (DHCS) April 19, 2013. Both Plans received a deficiency report back from the State requesting additional information for further preparation for the onsite review. The rates are still unknown. Contracts will need to be in place by September 1 for January 1</p>	

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	<p>implementation.</p> <p>B. The Medi-Cal portion of CCI is mandatory. If you have both Medicare and Medi-Cal, you can “opt out” of the Cal Medi-Connect portion of the Coordinated Care Initiative. This means your Medicare benefit will remain fee for service; this is sometimes called “straight Medicare”.</p> <p>C. The state will use a passive enrollment process. The State will enroll eligible individuals by their birth month into a health plan that combines their Medicare and Medi-Cal benefits unless the individual actively chooses not to join and notifies the state of this choice. Eligible beneficiaries will receive three notices about the change:</p> <ul style="list-style-type: none"> • 90 Day Notification: Will notify members about the Coordinated Care Initiative and describe how their Medicare & Medi-Cal benefits will be changing. • 60 Day Notification: Will Inform beneficiaries of their health plan choices (IEHP or Molina), provide a timeline and encourage them to choose. • 30 Day Notification will remind beneficiaries of the time remaining to choose a health plan and urge beneficiaries to make a choice. • Eligible beneficiaries that have not chosen a health plan will be passively enrolled into either Molina Healthcare or IEHP. <p>D. There are some beneficiaries that are exempt and will not be impacted by CCI:</p> <ul style="list-style-type: none"> • Beneficiaries under age 21 • ICF-DD Residents • People participating in the following waiver programs are excluded: Nursing Facility/Acute Hospital, HIV/AIDS, Assisted Living, and In- Home Operations; • Beneficiaries with Other Health Coverage <ol style="list-style-type: none"> 1. Kristine Loomis- What about people that are straight Medi-Cal? Like younger persons with disabilities who don’t have Medicare? Will it affect their Long Term Care? <ul style="list-style-type: none"> ○ This program will not impact those under 21. They should already be a part of a Managed Care Plan. If they are not a part of a Health Plan they may have received a one year emergency exemption. However, it will affect those in Log Term Care. <p>E. The State has decided to de-link The CCI Program and Cal MediConnect. This means if the State cannot come up to an agreement with CMS for the Cal MediConnect Program, the CCI Program will continue, and be implemented January 1, 2014.</p> <ol style="list-style-type: none"> 2. Paul Van Doren- What do you think the biggest effect would be for a person that is Medi-Medi that chooses not to get into HMO for the Medicare? <ul style="list-style-type: none"> ○ They lose the advantage of the demonstration project. Plans will not be able to fully leverage coordinating the Medi-Cal and Medicare benefits. Because of that the Plans will have a hard time managing care and transitions of care services on discharge. The Plans will also not be able to coordinate the Long Term Care piece. 3. Paul Van Doren- There are some things that Medi-Cal will pick up for people that 	

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	<p>are on Medicare, if the person chooses to opt of HMO Medicare is Medi-Cal still going to pay for those things?</p> <ul style="list-style-type: none"> o The Plans use what is called Medi-Cal wrap. Wrap services are still covered under the Health Plan. It is a matter of coordinating. The ability to maximize the benefits from both Medi-Cal and Medicare diminishes tremendously. <p>4. Barbara Porter- It will behoove all of the Stakeholders to get on board and stress the advantages of being “all in”.</p> <p>5. Kristine Loomis- Can you clarify the difference between contract and an MOU?</p> <ul style="list-style-type: none"> o Contract and MOU are just different names for agreements. The Memorandum of Understanding (MOU) that was presented was between CMS and the State, saying that CMS has accepted the waiver that the State of California is proposing for this demonstration project. Subsequent to that, the details need to be put together which include contracts which are referred to as three-way contracts. These are agreements between the State, CMS, and the health plans. The contracts have not been signed and contain the rates. <p>6. Dimitrios Alexiou- It was said that Sept 1, 2013 is the date that all contracts need to be signed. We are almost to August and you have not released the rates yet, are you still going back and forth on the rates? Would you sign the contracts without having feedback on the readiness review? When would you envision sharing rates with the providers?</p> <ul style="list-style-type: none"> o CMS and the State have not yet released the rates to the Plans. o There will be an exit conference for the readiness reviews that will give both Plans a feel of whether the Plans will pass or fail and the details will come after. o The Plans will share the rates as soon as there is a signed agreement. <p>7. Wasima Alvi- For clarification purposes is the Regional Center Population excluded for Long Term Care as well as Skilled Nursing Facilities?</p> <ul style="list-style-type: none"> o The excluded populations for the Regional Centers are the children under 21, and those in ICF. Seniors or adults that are 21 and over will be included in the project. <p>8. Kristine Loomis- What about people under 21 who receive IHSS or Long Term In-Home support services? Will they also be impacted?</p> <ul style="list-style-type: none"> o The under 21 population will be exempt. <p>9. Brenda Primo- Suggest that this group request for DHCS to answer that question for the Regional Centers in writing.</p> <ul style="list-style-type: none"> o <p>10. Felice Connolly- Anyone that is over 21 that is receiving In-Home services has to be enrolled in this demonstration? Will a person that has Other Health Coverage qualify?</p> <ul style="list-style-type: none"> o Yes, they will have to be in Managed Care. No, those with other health coverage will be excluded from enrollment but will keep IHSS. 	

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<p>VI. Outreach Discussion Follow-Up</p>	<p>A. During the Outreach Discussion that took place at the May 2013 Stakeholder meeting, the group suggested it would be best for the Plans to provide materials and tools for each organization to educate and pass the information on to their consumers. Each organization has already created a rapport with their consumers and may have a bigger impact.</p> <p>B. Lisbeth Roberts of the Health Insurance Counseling and Advocacy Program (HICAP) explained what the HICAP program does and how they will be able to assist with spreading the word. HICAP is available to provide unbiased information about all individuals' benefits. A way to assist HICAP would be to refer the consumers to HICAP by calling 1-800-434-0222. HICAP will provide this information to the consumer in effort to find the best service possible for that person. The focus is on the consumers that are the most vulnerable and people that have a hard time understanding who need intensive one on one counseling.</p> <ol style="list-style-type: none"> 1. Lisa Hayes- What is HICAP's capacity? There are around 80,000 individuals in the Inland Empire. <ul style="list-style-type: none"> o HICAP is not yet at capacity. With the current resources HICAP can serve up to 5,600 per year. They currently serve 4,800. HICAP recently received a grant over 2 years of \$100,000 from the California Wellness Foundation. HICAP was about to hire two additional staff, and are looking to add one more. Each member of the staff is able to council 1,000 consumers per year. With the increase in staff, the number of clients that HICAP can serve will increase. 2. Kristine Loomis- Do you serve in Orange County? Do you have Vietnamese personnel? <ul style="list-style-type: none"> o Yes, HICAP serves in Orange County. HICAP also has Vietnamese speaking staff. <p>C. HICAP's plan for outreach is to maintain the focus on Medicare. It depends on the additional funding that will be provided by the State of California to assist in the Duals Demonstration work. HICAP will be happy to partner with any organization to do presentations that will be tailored to each client.</p> <ol style="list-style-type: none"> 3. Roger Uminski- When HICAP does presentations that are tailored to the specific populations; do the presentations generally answer most people's questions? If the Stakeholders are successful in getting the word out about HICAP and HICAP becomes overwhelmed, does that help with receiving more funding to be able to handle the volume? <ul style="list-style-type: none"> o Yes it does tend to elicit more appointments for HICAP. But, the appointments tend to run faster and smoother because the consumer already has the basic knowledge rather than the consumer not having any knowledge and having to start from scratch. o Yes. Also, if anyone can provide referrals to any foundations that would be interested in funding a non-profit organization. 4. Roger Uminski- During the SPD's transition when the members received the 30day, 60day, 90 day notices, this is possibly a large percentage of members that do not pay 	

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	<p>very close attention and got assigned to a Plan whether they wanted to or not. There may be potential issues. Does HICAP get involved, or say “it’s too late”.</p> <ul style="list-style-type: none"> ○ HICAP will continue to council, they will not turn anyone away. <p>5. Barbara Porter- Are you going to have a chance to view the form that will be sent to the prospective consumers? During the CBAS transition the forms that were used were very misleading and people signed the incorrect box and lost the ability to join the Managed Care Plan at that time.</p> <ul style="list-style-type: none"> ○ The Plans have provided feedback on the notices to the State. The State has not yet sent out the final forms that will be sent. ○ Brenda Primo- The State has a Stakeholder process like this committee, the recommendations of the people that have provided feedback on that form. Inform the State of this problem. <p>6. Lisa Hayes- Can we add the HICAP website under resources on the CCI Stakeholder Advisory Committee Website?</p> <ul style="list-style-type: none"> ○ Lisbeth will provide the link to the HICAP Website to Lisa Hayes. <p>7. Ben Jauregui- Is HICAP listed in the 211 database?</p> <ul style="list-style-type: none"> ○ Yes HICAP is listed in the 211 database. <p>8. Roger Uminski- So that everyone is using consistent messaging, is HICAP is using the SCAN Foundation information and brochures?</p> <ul style="list-style-type: none"> ○ The SCAN Foundation put out a draft brochure that needed work. SCAN is hoping to place this information at Senior Centers, libraries and other places that seniors frequent. It will contain numbers on who to call depending on options. ○ This brochure is a template that they will provide to the Counties that can be modified. Any agency can put their Logo and contact information on the flyer and personalize it for consumers that you are serving. <p>9. Roger Uminski- It was talked about at a previous meeting to add a flyer in with the Meals on Wheels.</p> <p>10. G.G. Crawley- The IHSS workers or APS workers can provide this information when they go on visits.</p> <p>11. Lisa Hayes- An issue with the SCAN Foundation is that it looks like junk mail and would probably be thrown away.</p> <ul style="list-style-type: none"> ○ Lisbeth Roberts- The brochure is not intended to be put in the mail; it will be placed in Senior Centers and Social Services and places of that nature. ○ It is not finalized at this time. It will just be a template and information can be added and removed a needed. It does not belong to the Scan Foundation; it can be personalized. <p>12. G.G. Crawley- IHSS conducts Care Provider Orientations every week. IHSS can present this information to the providers that will be caring for the clients and trusted by them.</p> <p>13. Mary Rios- Dr. Bock mentioned the 30-, 60-, 90-, day letters; the medical facilities</p>	

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	<p>in themselves have some obligations under title 3 and public accommodations for people with disabilities, in terms of the transition. If people are having difficulty transitioning how are accommodations going to be provided?</p> <ul style="list-style-type: none"> ○ Brenda Primo- There is a plan to do alternate formats; there is also information about sign language interpreters which will come down to the Plans. Once the member is into a Plan it then becomes that Plans responsibility. As far as accommodations that have to do with physical or guidance that organization cannot provide that care. That will come down to the Regional Centers or the Health Plans to provide that transition. ○ The Plans will work to gather materials and trainings to provide to HICAP in an effort to train the HICAP counselors on properly assisting persons with disabilities. 	
<p>VII. Website <i>Lisa Hayes, Molina</i></p>	<p>A. The new CCI Stakeholder Advisory Committee Website has been launched. The website includes Tabs such as:</p> <ol style="list-style-type: none"> 1. Home 2. About CCI- This tab contains links to: <ul style="list-style-type: none"> ● About CCI- Overview ● About CCI- Population Summary ● About CCI- Participating Populations 3. Advisory Committee- This tab contains documents such as : <ul style="list-style-type: none"> ● List of Committee Members ● Committee Charter ● Meeting Agenda's ● Meeting Minutes 4. News and Announcements 5. Resources- This tab contains: <ul style="list-style-type: none"> ● FAQ's ● Useful Links 6. Contact Us <p>B. There is an "Ask a Question" Tab at the bottom that contains a form to add any questions that need to be answered about the Coordinated Care Initiative.</p> <p>C. The website address is www.inlandempirecci.org</p> <p>D. Committee Members were asked to go to the website, explore and provide feedback.</p>	
<p>VIII. Public Comment</p>	<ol style="list-style-type: none"> 1. Marjorie- Is HICAP services available throughout all of California or only the 8 counties that are a part Cal MediConnect? <ul style="list-style-type: none"> ○ HICAP is available for every county in California. 2. Burma Lee Manns- Would like information from HICAP. The African American Mental Health Coalition has funding through the Department of Behavioral Health and they go into households and do free mental health presentations. <ul style="list-style-type: none"> ○ Lisbeth Roberts of HICAP stated she has 10,000 flyers available that can be 	

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	<p>distributed.</p> <p>3. Sandy Salcedo- In Medicare if the person not only opts out but if they choose another Medicare Advantage Plan, how much disruption will this cause for the recipient? How will the cost be covered on things that are normally covered by Medi-Cal?</p> <ul style="list-style-type: none"> o The beneficiary always has the opportunity to change. o If someone is a Dual and they choose to opt out of Medicare Managed Care, those services that are not covered by Medicare will be covered by Managed Care Wraparound Services. 	
<p>IX. Closing Comments</p>	<p>A. Ben Jauregui- The National Senior Law Center has been following Cal MediConnect and have been providing trainings and webinars.</p> <p>B. Ben Jauregui- Asked members to sign an IEHP Code of Conduct Form</p> <p>C. Ben Jauregui- The IEDC will be hosting an “Aging Well with a Disability” conference Tuesday, September 17, 2013. The IEDC currently has about 580 members and meets monthly.</p>	
<p>X. Next Meeting</p>	<p>A. September 24, 2013. Future meetings will occur on the last Tuesday of every other month.</p>	

Action Log						
ACTION ITEM	RESPONSIBLE STAKEHOLDER	OPEN DATE	DUE DATE	STATUS	NOTES	COMPLETION DATE
To share presentations with the Stakeholders that will be utilized.	Lisbeth Roberts	7/23/13	9/24/13		HICAP's plan for outreach is to maintain the focus on Medicare. It depends on the additional funding that will be provided by the State of California to assist in the Duals Demonstration work. HICAP will be happy to partner with any organization to do presentations that will be tailored to each client.	
Provide the HICAP link to Lisa Hayes to add to the CCI Stakeholder Website.	Lisbeth Roberts	7/23/13	9/24/13			
Look into materials and trainings to support HICAP with counseling persons with a disability.	Lisa Hayes/ Ben Jauregui	7/23/13	9/24/13			
Send Acronyms to Stakeholders	Heidi Pringle	7/23/13	9/24/13	Completed		
Look into the State Health Insurance Assistance Program (SHIP) HICAP is assigned by CMS a unique ID number to be able to contact Health Plans and Medicare Advantage Plans on behalf of the member without the member being present in order to advocate for them	Lisbeth Roberts, IEHP, Molina	7/23/13	9/24/13		It would be helpful for the HICAP councilors and helping the clients if IEHP and Molina would utilize the same process that the Plans may already have the guidance for under the Medicare D-SNP, The Plans can then utilize this process for the Cal MediConnect Program so if HICAP needs to advocate and ask more questions there will be a direct SHIP aligned to the Plans that the councilors can utilize.	
The Plans to verify how often the Websites are updated when a Provider is added or removed.	Ben Jauregui/ Lisa Hayes	7/23/13	9/24/13			
Lisa to look into a possible cutoff period where the member could not go back. They would have to choose a Cal MediConnect Plan if they are Dual eligible.	Lisa Hayes	7/23/13	9/24/13			
Group to provide feedback on Website	Group	7/23/13	9/24/13			
Action Log - Resolved						
ACTION ITEM	RESPONSIBLE STAKEHOLDER	OPEN DATE	DUE DATE	STATUS	NOTES	COMPLETION DATE
Create Website for Committee/ Public-Status Update: A draft picture of what	Lisa Hayes	1/29/13	7/23/13	Complete		7/23/13

the website will look like was presented.						
Create 2 list serves. One for Committee and One for Public- Both Committee and Public list servers will be available on the website.	Heidi Pringle	1/29/13	7/23/13	Complete		3/21/13