

**INLAND EMPIRE CCI STAKEHOLDER ADVISORY
COMMITTEE MEETING**

(APPROVED MINUTES FOR-November 19, 2013)

Location: 3801 University Avenue, Suite 400, Riverside 92501

Date: Tuesday, November 19, 2013- 1:30 pm -4:30pm

Minutes By: *Heidi Pringle, Inland Empire Health Plan*

Appointed Committee Members Present:

<u>Person</u>	<u>Title</u>	<u>Affiliation</u>
Barbara Porter	Program Director	Inland Empire Adult Day Healthcare Center
Dimitrios Alexiou	Vice President	Hospital Association of Southern California
Dr. Scott Allen	Physician	Provider
Eric Hernandez	Program Specialist	Riverside County In- Home Support Services
Felice Connolly	Provider	Riverside County In- Home Support Services Public Authority
Felix Minjarez for Leti Fierro (Attended by phone)	Senior Administrative Analyst	Riverside County In- Home Support Services Public Authority
G.G Crawley (Attended by phone)	Deputy Director	San Bernardino County In- Home Supportive Services
Kristine Loomis	Consumer	Riverside County In- Home Support Services
Lisbeth Roberts	Director	Health Insurance Counseling and Advocacy Program
Megan Juring	Deputy Director	Department of Rehabilitation
Myette Christian (Attended by phone)	Registry Manager	San Bernardino County In- Home Supportive Services Public Authority
Ron Stewart	Deputy Director	Riverside County Office on Aging
Sergio Calderon	Director	Alzheimer's Association
Sherwin Farr for Sarah Eberhardt-Rios	Deputy Director	San Bernardino 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
Fran Bates	Executive Director	Rolling Start
Mary Rios	Multicultural Affairs Advocate	Disability Rights California
Michele Wilham	Director	Riverside County Office on Aging,
Paul Van Doren	Executive Director	Community Access Center
Randy Schlecht	Consumer	San Bernardino County In- Home Supportive Services
Ricardo Cisneros	Regional Coordinator	United Domestic Workers
Ron Buttram (Chair)	Director	San Bernardino Department of Aging and Adult Services
Sharon Swayzer	Provider	San Bernardino County IHSS Public Authority
Steve Steinberg	Program Chief	Riverside County Department of Behavioral Health
Wendy Duchon		SEIU- ULTCW

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 Tompkins	Chief Medical Officer
Lisa Hayes	Director, Disability & Senior Access Services

INLAND EMPIRE CCI Stakeholder Advisory Committee Meeting
Meeting Minutes for November 19, 2013 @ 1:30-4:30 pm

Agenda Item	Discussion of Agenda Items	Action
I. Welcome and Introductions <i>Deborah Miller (Interim Chair)</i>	A. Deborah Miller of Molina Healthcare chaired Chris Stottlemyer, Ron Buttram was absent B. Introductions were made.	<i>No Action Required</i>
II. Acceptance of minutes from September 24, 2013 <i>Deborah Miller (Interim Chair)</i>	A. Minutes approved as presented	<i>No Action Required</i>
III. Review of Action Log from July 23, 2013 <i>Deborah Miller (Interim Chair)</i>	<p>A. To share presentations with the Stakeholders that will be utilized.</p> <ul style="list-style-type: none"> • It was reported that HICAP is currently working with the CDA and Harbage Consulting to create a standard PowerPoint that can be adapted by the Counties. CDA wants to ensure that all of the materials are fact checked and are readable. Lisbeth reported that she has put together a presentation to inform the HICAP counselors about CCI. Some of the volunteers did not understand fully on how IEHP and Molina provide these different services. Lisbeth would like to share PowerPoint with the group for review. <p>B. Look into materials and trainings to support HICAP with counseling persons with a disability.</p> <ul style="list-style-type: none"> • Lisa Hayes and Ben Jauregui are drafting a training presentation. There is a first draft that is under review. Training will possibly take place in either December 2013 or January 2014. <p>C. 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.</p> <ul style="list-style-type: none"> • The Plans to check with CMS guidance on the unique SHIP ID number. <p>D. Group to provide feedback on Website.</p> <ul style="list-style-type: none"> • Lisa Hayes and Ben Jauregui have received positive feedback from the Stakeholders. Test messages were sent to the “Ask a Question” link to ensure that it was functioning correctly. <p>E. To come up with ways to mitigate the top four identified risks. <i>(See IV under Risks)</i></p>	<p><i>In Progress</i></p> <p><i>In Progress</i></p> <p><i>In Progress</i></p> <p><i>New Action Item</i></p> <p><i>In Progress</i></p>
IV. Risks	A. The sub-groups were asked to report on the top 4 risks that were identified in the September 24, 2013 meeting. The top four risks identified from 1-4 with the subgroup volunteers are as follows:	

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	<ol style="list-style-type: none"> 1. Not Preparing consumers and providers to best navigate/ use the Managed Care Organization system, as well as the lack of education and participation by non-contracted providers. G.G. Crawley, Sarah Eberhardt-Rios, Ben Jauregui, Mary Rios <ul style="list-style-type: none"> • Ben Jauregui has reached out to other members of this sub-committee by sending a Doodle Invite, he is awaiting a response from members to come up with a date to meet and discuss this risk. Group anticipates that they will be able to report at the next meeting. • Ben Jauregui reported that he has reached out to Amber Cutler of the Senior Citizens Law Center to express his concern that there should be a training for consumers on Managed Care 101 so that the consumers know when to contact the Health Plan, and how long referrals should take etc. 2. Use clear and simple language. Proper/adequate interpretation and alternate formats. Lisa Hayes, Megan Juring, Fran Bates, Felice Connolly, Barbra Porter <ul style="list-style-type: none"> • The group has not yet met. Megan Juring provided the following information : <ol style="list-style-type: none"> a. The State is in the process of looking into web toolkits that could both be put out as templates for Plans but also as generic information in the people in the 8 counties to know what the CCI program is. The State approach is looking at one communication per issue. The Harbage Consulting Group who is being contracted by the State is interested in speaking with the Sub-group. <ul style="list-style-type: none"> • The group will schedule meeting with Harbage and will report at the January 2014 Stakeholder Meeting. 3. Beneficiaries in treatment during transition, continuity of care. Dr. Tompkins, Kristine Loomis (via phone, email) <ul style="list-style-type: none"> • Group has not yet met. Heidi Pringle will provide Kristine Loomis with the groups contact information so she can coordinate a time and date to meet. 4. Interoperability of data systems, and data sharing process. Roger Uminski, Steve Steinberg, Sarah Eberhardt-Rios, Leti Fierro <ul style="list-style-type: none"> • There has been a Doodle that has gone out to sub-group members; a meeting will be scheduled once a date has been agreed upon. Group will report at the January 2014 Stakeholder Meeting. 	
<p>V. CCI/ Cal MediConnect Updates <i>Roger Uminski, IEHP</i></p>	<p>A. CMS/State have not yet provided rates to the Plans.</p> <ul style="list-style-type: none"> • Once the contracts are signed and approved, the rates will then be certified. Medi-Cal rates will be posted on the website by the State. Medicare rates are 	

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	<p>considered confidential by CMS.</p> <ul style="list-style-type: none"> • On November 18, 2013 Jane Ogle conducted a State conference call and reported that the State and CMS are pleased with all of the Readiness Review Audits that have been conducted and completed. The State and CMS have reported that April 1, 2014 will remain the start date for this project. The Plans continue to work with their partners and the County to prepare the processes and procedure to ensure that the implementation will commence smoothly. It was also reported on the call that a grant was received for an Ombudsmen Program. This issue was brought up in a previous meeting by this committee that there was a concern about the Medi-Cal Ombudsmen Program was not as effective as anticipated. This message was passed along to the State. This particular Ombudsmen Program will be an independent Entity and will be focused on CCI specifically. <p>B. MOU Updates:</p> <ul style="list-style-type: none"> • All MOU's between the Plans and the Counties have been executed. As of November 19, 2013 the Plans were informed that there will need to be an adjustment made to the MSSP MOU's due to the change in the implementation date. Plans are currently working on an amendment to change the start date on the MOU's. • The three-way contracts between the Plans, the State and CMS have been distributed. All Plans are reviewing the contracts. The deadline for signature is December 10, 2013. The Plans have not yet received the Readiness Review audit result reports from the site visits. • Megan Juring asked what the Plans are envisioning now that Behavioral Health is being added as a benefit for Plans Statewide, how is IEHP and Molina envisioning the impact on this program? <ul style="list-style-type: none"> ○ This will be implemented January 1, 2014; the Plans are working very closely with their partners at the Counties to work out the details. IEHP has a network of Behavioral Health providers. Molina is working on their network to ensure that it is in place and adequate, a concern about the rates was expressed by Molina. The Plans have been working with the Counties on coming up and agreeing on a process to ensure no one goes without care; gets caught between the counties and the plan networks. This will help ensure a warm handoff in that spectrum of care. 	
VI. Public Comment	<ol style="list-style-type: none"> 1. Chris Long (Care Provider) – Mr. Long stated that he would like to speak about wound care. Mr. Long acknowledged that he believes that if electronic communication such as digital photographs and electronic communication were utilized and if IHSS had at least one person that specializes in wound care to service those in both Riverside and San Bernardino County there will be a lot of money saved in transportation and improvement in care. <ul style="list-style-type: none"> • Dr. Allen- Thanked Mr. Long for his prospective and stated that wound care is perhaps the best example of how things could be done better. When wounds go bad, they go bad 	

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	<p>catastrophically. They can develop osteomyelitis and sepsis which will cost approximately 10,000+ dollars. In some of these cases the root of the problem is that someone did not approve the right cushion or the right Durable medical equipment or a very simple low cost, low tech intervention. We are trying to develop systems that do just that. To make better use of expertise and to get it to those who need it and to share what works. This is the heart of what we are trying to do.</p> <ul style="list-style-type: none"> • Kristine Loomis- There is two venues here; one is for the experts to share information and that may be tricky because of liability but also to provide a means for care providers to exchange information themselves. • Dr. Allen- I agree, you talk about how we use networks for developing. You have to think of all levels, not only to care providers but also consumers; the patients themselves often have crafted solutions. Building communities for support, this has been done outside but it needs to be woven into the fabric of this group. • Barbara Porter- Reported that CBAS centers provide wound care up to stages one and two. There are people that are discharged from skilled nursing facilities or hospitals that come to the CBAS centers with wounds that need to be taken care of. It is very inexpensive as a resource to be able to take care of it. It is as simple as calling the managed care plan and get an order from the doctor to provide wound care, they have saved many people as well as educated the families. There are resources out there that can be an inexpensive way of solving a lot of medical problems. I think it is just a matter of bring the community together to let them know who does what and where. • Deborah Miller- Expressed that coming from a background of Case Management and the interdisciplinary care team and have learned a lot this last year on how to bring the right people into the inter disciplinary care team. The experience of the patient or member and the family is essential in that process because often the member and their families are the experts and know the most about their situation, the information that you bring teaches us but it also helps to make sure that we can shepherd a plan forward that is helpful in terms of solving health issues. 	
VII. Next Steps	<ul style="list-style-type: none"> A. Group has requested to discuss Care Coordination and how it works on behalf of each organization as well as the different organizations that could help access care move the process along faster for those that are in need. B. Dr. Allen asked if it was possible for each Plan to add an option for members to track their referrals on a web basis. C. Barbara Porter would like to see those that are providing the direct care to know their responsibilities in terms of the laws and regulations. D. Kristine Loomis informed the group of her personal experience with durable medical equipment; she waited four years for a replacement chair due to the lack of accountability during the process. <ul style="list-style-type: none"> • Dr. Allen replied by saying “If we can’t improve delivery on some of these things then what are we really promising the advantage on this approach is?” 	

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	E. Lisa Hayes asked if Lisbeth could share the PowerPoint that she created to the group at the next meeting.	
VIII. Closing Comments	A. There were no closing comments to report.	
IX. Next Meeting	A. January 28,2014, 1:30 pm-4:30pm Inland Regional Center 1425 S. Waterman Ave. San Bernardino, Ca 92408	

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	Pending	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.	
Look into materials and trainings to support HICAP with counseling persons with a disability.	Lisa Hayes/ Ben Jauregui	7/23/13	9/24/13	Pending		
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 counselors 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.	
Group to provide feedback on Website	Group	7/23/13	9/24/13	On Going		
To come up with ways to mitigate the top four identified risks.	Risk Subgroups	9/24/13	11/13			
The Plans to check with CMS guidance	IEHP/Molina	11/23/13	1/28/13			

on the unique SHIP ID number.						
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 the website will look like was presented.	Lisa Hayes	1/29/13	7/23/13	Complete	www.inlandempirecci.org	7/23/13
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
Send Acronyms to Stakeholders	Heidi Pringle	7/23/13	9/24/13	Completed		9/24/13
Provide the HICAP link to Lisa Hayes to add to the CCI Stakeholder Website.	Lisbeth Roberts	7/23/13	9/24/13	Completed	www.hicapsbc.org and www.hicaprc.org both links lead to the same site.	9/24/13
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	Completed		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	Completed		9/24/13