

**HEALTHY SAN DIEGO  
 JOINT CONSUMER & PROFESSIONAL ADVISORY COMMITTEE  
 MINUTES – October 13, 2022**

**Members/Alternates Present:** Laverne Brizendine, Diane Bucon, Thomas, Coleman, MD, Jack Dailey, Vincent Diaz, MD, Jennifer Eisberg, Kimberly Fritz, Tina Hendizadeh, Anika Kadakia, MD, Jacqueline Kalajian, Kevin Kandalaft, Greg Knoll (Co-Chair), Kathleen Lang, Sarah Legg, Valerie Martinez, Eric McDonald, MD, Donald Miller, MD, James Schultz, MD (Co-Chair), Harriet Seldin, Kristen Smith, Caryn Sumek, Salvador Tapia, Janet Vadakkumcherry, Marisa Varond, Gavin Ward, Ann Warren, Lily Wang

**HSD Staff Present:** Jamie Beam, Lynn Carr, Angela Galba-Davis, Amelia Kenner-Brininger, Luwam Kidane, Emil Montoya, Raluca Pimenta, Alison Sipler, Heather Summers, Jennifer Tuteur, MD, Michael Worman

**Guests:** Kitty Bailey, Stephanie Gioia-Beckman, Randy Nater, Jenna Novotny, Stephanie Pann, Christy Rosenberg, Ivonn Velazquez, Lindsey Wade, Gavin Ward

ITEM	DISCUSSION	ACTION
<b>I. Welcome and Introductions</b>		
	<ul style="list-style-type: none"> <li>Meeting called to order at 3:00 p.m. by Jim Shultz</li> <li>Introductions were made</li> </ul>	
<b>II. Public Comment</b>		
	<ul style="list-style-type: none"> <li>None</li> </ul>	
<b>III. Presentation</b>		
	<ul style="list-style-type: none"> <li>Community Health Needs Assessment (Lindsey Wade, Senior Vice President, Hospital Association of San Diego &amp; Imperial Counties)</li> </ul>	
<b>IV. Healthy San Diego (HSD) Subcommittee Reports</b>		
<b>Quality Improvement Subcommittee</b> (Valerie Martinez)	<ul style="list-style-type: none"> <li><b>Health Education &amp; Cultural Linguistics (HE/CL) Workgroup</b>              There is a need for a HE/CL Workgroup co-chair. There were other updates from the ATCL meeting. There are no other plans for further training for 2022; however, support will be available for any needs identified through other HSD workgroups.</li> <li><b>Facility Site Review (FSR) Workgroup</b>              Angela Pacada reported that the FSR Workgroup met yesterday and had three updates. There was a FSR standards training conducted for San Ysidro Health with participation from other provider offices. A participant list will be provided to determine who was trained across San Diego County. There is a new FSR All Plan Letter (APL) 22-017 that supersedes the previous APL. The implementation of the prior APL requirements was delayed due to COVID. The plans now have 90 days to provide edits to policies and procedures to indicate</li> </ul>	

compliance with the new APL. The work group will then review the Healthy San Diego policies to ensure they are aligned.

• **Health Plan Workgroup**

Kathleen Lang presented information regarding the redetermination data sharing component between the County and the health plans.

• **Women, Infants, Children (WIC) Workgroup**

Mary from WIC stated that they are looking at the requirements for the new Memorandum of Understanding (MOU) that was signed between the health plans and the WIC agencies. Continued collaboration is still needed to help close gaps between partners and agencies to achieve a common goal.

• **San Diego Regional Center Workgroup**

A workgroup meeting will be scheduled in November. The annual review of the MOUs for San Diego managed care plans will be conducted to see if there are any changes or updates needed.

• **Community Based Adult Services (CBAS) Workgroup**

Molly Kerns reported that Temporary Alternative Services implemented during COVID ended on September 30. Individuals are now required to receive services onsite. There is a process for requesting Emergency Remote Services (ERS). If a beneficiary is not able to go onsite for a limited amount of time, there is a special application process. The number of individuals who are participating has declined compared to pre-COVID data. They are finding challenges for beneficiaries in returning and considering reporting these challenges to the State.

• **California Children Services (CCS) Workgroup**

Dr. Rich reported that there is a CCS Workgroup meeting next week. She introduced Ysobel Smith as co-chair.

• **Skilled Nursing Facility Workgroup**

This workgroup has not met but it was discussed in a prior meeting to keep the group open to discuss discharge planning from hospitals to the skilled nursing facility setting.

	<ul style="list-style-type: none"> <li> <b>• Fluoride Varnish</b>                      With the help of the HE/CL workgroup, the survey was sent out to two large FQHCs to get feedback. The survey is now ready to move forward to the provider network to get feedback on the fluoride varnish process. Gift cards will be provided for responders. Based on the results, further intervention and potential training will be planned.                 </li> <li> <b>• New Provider Trainings (NPTs)</b>                      Dr. Schultz’s ask that the QI Subcommittee please come back to the group and let us know what they have determined pertaining to an item presented earlier in the year concerning New Provider Trainings (NPTs) that are required by all managed care plans and their delegated groups. This is a sore spot for providers, as it creates a barrier to getting providers credentialed timely so that they can see patients as soon as possible, as well as it’s a substantial administrative burden due to the duplicate nature of the NPT content.                 </li> </ul>	
<p><b>Behavioral Health Subcommittee</b> (Salvador Tapia)</p>	<ul style="list-style-type: none"> <li>                     Contact cards have been updated. Judith Yates discussed CARE court and expressed implementation concerns. Tabatha Lang provided the BHS update: compared to last fiscal year there was a 17% decrease in monthly unique emergency psychiatric visits; an 11% decrease in voluntary emergency psychiatric unit; and a 21% decrease in readmission after 30 days. The behavioral health incentive program was discussed; its purpose is to break down silos between manage care plans and the schools to provide better care for school-age kids. Nilanie Ramos shared that there have been two cases of botulism due to black tar heroin.                 </li> </ul>	
<p><b>HSD CalAIM Workgroup</b> (Kim Fritz and Jack Dailey)</p>	<ul style="list-style-type: none"> <li>                     There has been a decision by the CalAIM Workgroup Co-Chairs to move the CalAIM Workgroup from the Behavioral Health Subcommittee to the QI Subcommittee The hope is to have a more collaborative discussion rather than report outs at the meetings. Currently working on a new format for the agenda to be able to get feedback.                 </li> </ul>	
<p><b>V. Action Items</b></p>		
<p><b>Approval of minutes from previous meeting</b></p>	<ul style="list-style-type: none"> <li>                     October 13, 2022, meeting minutes approved with conditions.                 </li> </ul>	
<p><b>Continuance of Teleconferencing Meeting Option</b></p>	<ul style="list-style-type: none"> <li>                     The continuation of teleconferencing was approved for this committee and subcommittees.                 </li> </ul>	

<p><b>Pursuant to Government Code Section 54953(e)</b></p>		
<p><b>VI. Chairs' Reports</b></p>		
<p><b>A. Health Services Advisory Board (HSAB)</b> (Co-Chairs)</p>	<ul style="list-style-type: none"> <li>Barbara Jiménez presented regarding the Department of Homeless Solutions and Equitable Communities cross threading with Public Health Services. The committee approved authorization for an amendment for the design and pre-construction services for the County Public Health Laboratory. There was also approval for the Public Health Nurse Home Visiting Program for a procurement process.</li> </ul>	
<p><b>VII. Information/Updates (Written or Oral)</b></p>		
<p><b>A. Medi-Cal Rx</b> (Jim Schultz)</p>	<ul style="list-style-type: none"> <li>Transitioning back to more strict prior authorization process and formulary adherence after a grandfathering in period. From the user point of view, the main hurdle is access to continuous glucose monitors because they are hard to come by and expensive. But we have found that it is easier to get patients under diabetic control when they receive immediate feedback from the glucose monitors. That is something that needs to be worked on over time.</li> </ul>	
<p><b>B. CalAIM UPDATES</b></p>	<ul style="list-style-type: none"> <li>Providers and the Hospital Association discussed challenges and successes.</li> </ul>	
<p><b>C. Clinical Providers</b> (FQHCs - Janet Vadakkaumcherry &amp; HASDIC - Caryn Sumek)</p>	<ul style="list-style-type: none"> <li><b>FQHCs - Janet Vadakkaumcherry</b> The main issue for health centers with pharmacies is reimbursement overpayment or underpayment. They are trying to figure out the methodology with Magellan/Medi-Cal Rx. There is currently no way for health centers with pharmacies to share data with the State. It is an overlooked component of the provider network and there is no way to bill. Through Health Center Partners, Dr. Schultz has been helping to map out any problems with formulary download and what it looks like in the system. Additionally, Health Center Partners' member clinics have a CalAIM workgroup that meets once a month.</li> <li><b>HASDIC - Caryn Sumek</b> The Case Management Workgroup will be meeting October 25 to talk about CalAIM.</li> </ul>	
<p><b>D. Public Health Services (PHS)</b> (Ankita Kadakia)</p>	<ul style="list-style-type: none"> <li>Public health is seeing declining numbers for COVID-19; the last daily case count is 246. San Diego is currently in the green for the CDC community levels. Updated masking guidance still</li> </ul>	

	<p>recommends wearing masks in correctional facilities and homeless shelters. Masks are still required within any healthcare facilities including long-term care and adult/senior care facilities. There has been an increase in influenza cases, with an inflation of influenza cases versus last year. There has been a decline in monkeypox and the current case count is 431.</p>	
<p><b>E. Behavioral Health Services/Board Conference</b> (Nilanie Ramos)</p>	<ul style="list-style-type: none"> <li>• No report was provided.</li> </ul>	
<p><b>F. Aging and Independence Services</b> (Kristen Smith)</p>	<ul style="list-style-type: none"> <li>• The MSSP multiple purpose senior service program enrollment is increasing. Ian Baxter is a new chief for IHSS operations. The three IHSS managers report to him. AIS has been working with the Regional Taskforce on Homelessness with certain seniors. There was a pilot training developed called Aging 101, specifically for homelessness service providers. The pilot was done in June and the announcement was rolled out to all members of the Regional Taskforce at the end of this month. The training will be available on the Regional Taskforce website. The AIS Workgroup decided to continue to meet but to change the meeting date and time.</li> </ul>	
<p><b>G. Medical Care Services/ Healthy San Diego Statistics</b> (Heather Summers)</p>	<ul style="list-style-type: none"> <li>• Lynn Carr, MCS's SDAIM Chief, presented during a CalAIM Workgroup meeting on the development of the SDAIM Roadmap and priorities. There were questions about community engagement and how to provide input. Stakeholder input sessions and community listening sessions will be conducted over the coming months with providers and consumer groups. We would like to engage HSD in those conversations and will be sending out more information. This outreach is the start of a longer-term community engagement approach. Additionally, the County has contracted with Health Management Associates (HMA) to look at how current CalAIM implementation is going, collaboration, and best practices for ECM and CS. There will be interviews and a survey. The impetus for this is lessons learned from Whole Person Wellness and making sure we are supporting our most vulnerable populations.</li> </ul>	
<p><b>H. Healthy San Diego Statistics</b> (Emil Montoya)</p>	<ul style="list-style-type: none"> <li>• There has been a slight increase every month for every single health plan over the course of the year. For August 2022, the total managed care enrollment is 903,361. Total Medi-Cal enrollment is 986,541. For total managed care enrollment compared to July 2022 we see an increase of 0.61% and for Medi-Cal enrollment from July to August there has been a</li> </ul>	

	<p>0.68% increase. Since August 2021, the total managed care enrollment has had a 10.73% increase and for Medi-Cal enrollment since August 2021 it's been a 9.06% increase. As of August 2022, we are at the same rate as the state for default rate. 6000 San Diego residents have selected a health plan compared to 76,000 with the state, and about 400 members made no choice and they were auto assigned. From that, 3000 San Diego residents were auto assigned and 41,000 were done from the State. Self-Sufficiency Services By the Numbers, for CalFresh we're seeing an upward movement from last year at 52%, Calworks is up 21.82% from last year, CMS is down 31.82%, general relief is up 47.16%, and Medi-Cal recipients are up 8.82% from last year. For September 2022 there are over 1 million unduplicated recipients for San Diego County.</p>	
<p><b>VIII. Agenda Items For Next Meeting</b></p>		
	<ul style="list-style-type: none"> <li>• None</li> </ul>	
<p><b>IX. Adjourn</b></p>		
	<ul style="list-style-type: none"> <li>• Meeting adjourned by Gregory Knoll at 5:00 p.m.</li> </ul>	

**THE NEXT HEALTHY SAN DIEGO JOINT CONSUMER & PROFESSIONAL ADVISORY COMMITTEE MEETING SCHEDULED**

Thursday, November 10, 2022, from 3:00 p.m. to 5:00 p.m.

*Via Zoom*

Minutes recorded and transcribed by Brittany Charity-Walker