



# County of San Diego

## HEALTH SERVICES ADVISORY BOARD

1600 PACIFIC HIGHWAY, SAN DIEGO, CALIFORNIA 92101-2417

Tuesday, April 2, 2019 | 3:00 PM-5:00 PM

County Administration Room 302/303  
1600 Pacific Highway, San Diego, CA 92110

### MEETING MINUTES

Members/Alternates Present		Members Absent/Excused		Presenters	HHSA Support
Seat 1/Dist 1	Karrar Ali	Seat 3/Dist 2	Judith Shaplin	Nick Macchione, MS, MPH, FACHE, Agency Director and Deputy Chief Administrative Officer Agency Updates  Karen Ventimiglia, Agency Program and Operations Manager  Charissa Japlit Departmental Budget Manager	Dr. Wilma Wooten, Public Health Officer and Director
Seat 2/Dist 1	Suzanne Afflalo	Seat 10/Dist 5	(vacant)		
Seat 4/Dist 2	LaVonna Connelly	Seat 11/SDCMS	Paul Hegyi		
Seat 5/Dist 3	Gregory Effron	Seat 11/Alt	Jennifer Ohmstede		Dr. Anuj Bhatia, Deputy Director
Seat 6/Dist 3	Stuart A. Cohen	Seat 12/HASDI	Dimitrios Alexiou		
Seat 6/Dist 3	Frank Xu (Alternate)	Seat 13/HCPSC	Henry Tuttle		
Seat 7/ Dist 4	James Lepanto (Chair)	Seat 14/Alt	Jack Dailey		
Seat 8/Dist 4	Geysil Arroyo	Seat 15 /Alt	Jenifer Mendel		Petra Montiel, Administrative Secretary
Seat 9/Dist 5	Therese Cisneros- Remington	Seat 16/Alt	Harriet Seldin		
Seat 12/Alt	Judith Yates	Seat 17/HSDCA	(vacant)		
Seat 13/Alt	Tim Fraser				
Seat 14/CCHE	Greg Knoll				
Seat 15/BHAB	Michael Matthews				
Seat 16/HSDPA	Leonard Kornreich				
			Acronyms: HSDPA: Healthy San Diego Professional Advisory  SDCMS: San Diego County Medical Society  HCPSC: Health Center Partners of Southern California  HASDI: Hospital Association of San Diego and Imperial  CCHE: Consumer Center for Health Education  BHAB: Behavioral Health Advisory Board  HSDCA: Healthy San Diego Consumer Advisory		

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Minutes	Lead	Follow-up Actions	Due
Apr. 2, 2019	Anuj Bhatia	Minutes for March 5, 2019 to be emailed to all members.	Complete
Mar. 5, 2019	James Lepanto	Prepare and distribute agenda for Advance.	April 2019
Mar. 5, 2019	James Lepanto	White Paper regarding Senior Dental Care and propose that the Board of Supervisors (BOS) may want to carry this forward.	May 2019
Mar. 5, 2019	James Lepanto	The committee is to be provided with a County Legislative Agenda.	April 2019
Mar. 5, 2019	James Lepanto	To extend an invitation to the new director of Behavioral Health, Luke Bergmann.	May 2019
Mar. 5, 2019	James Lepanto	To extend an invitation to the new director of Integrated Services, Omar Passons.	May 2019
Apr 2, 2019	James Lepanto	Contact Paul Hegyi (Chair) of the Health Legislation to receive a summary of each bill and then present this to the Committee.	May 2019
Apr. 2, 2019	James Lepanto	James to provide the committee with a link to assembly and senate bills that the subcommittee would like HSAB to support.	May 2019

Near Dates of Importance
<b>Next Meeting:</b> Tuesday, May 7, 2019, 3-5 PM – County Administration Center, 1600 Pacific Highway, Rooms 302/303.

Agenda Item	Discussion
<b>I. Welcome &amp; Introduction</b>	James Lepanto called the meeting to order at 3:04 PM. The HSAB members and people in attendance were introduced.
<b>II. Public Comment</b>	No public comment.

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<p><b>III. Update/ Presentation/ Discussion/ Follow-up Action Items</b></p>	<p><b>A. Updates, Nick Macchione, Agency Director, Deputy Chief Administrative Officer, San Diego County HHSA.</b></p> <ol style="list-style-type: none"> <li>1. Background             <ol style="list-style-type: none"> <li>a. Director Macchione, thanked the Health Services Advisory Board (HSAB) for their contributions in 2018 that have made a difference in improving the health and well-being for the San Diego communities.</li> <li>b. Director Macchione acknowledged and thanked the HSAB for providing relevant and expert advice on public health issues, policies, programs, budget, and legislation to the BOS. This is crucial in ensuring quality public health services are provided to the community.</li> <li>c. Director Macchione stated that as an Advisory Board, HSAB has done an exceptional job in:                 <ol style="list-style-type: none"> <li>1) Establishing formal processes to coordinate Advances.</li> <li>2) Developing and reassessing their strategic plan.</li> <li>3) Restructuring sub-committees.</li> <li>4) Developing an Annual Accomplishments Report.</li> <li>5) Incorporating the inclusion and consideration of Health Equity for topics being presented to the HSAB.</li> <li>6) Annually evaluating the effectiveness of the HSAB through the administration of a survey tool.</li> </ol> </li> <li>d. Director Macchione stated that not every Advisory Board has accomplished this much in just one year.</li> <li>e. The HSAB Committee, as part of its formal process has conducted an in-depth Strategic Planning Process that includes:                 <ol style="list-style-type: none"> <li>1) An environmental scan.</li> <li>2) Monitoring health trends affecting the community.</li> </ol> </li> <li>f. This Committee was proactive and identified priorities to address the health trends for the HSAB Strategic plan, which included focusing on chronic and infectious diseases.</li> <li>g. Based on these priorities, HSAB developed an “STD White Paper” to highlight the risk of Sexually Transmitted Diseases (STDs), specifically for those adversely at-risk, and to provide recommendations to the BOS to address these concerns.</li> <li>h. HSAB has also convened subcommittee meetings to thoroughly discuss areas of focus related to chronic disease and the social determinants of health.</li> <li>i. Director Macchione encouraged the HSAB to align their efforts to relevant County and Public Health initiatives to advance the <i>Live Well San Diego</i> vision. For example, recent initiatives that were shared with the HSAB were:                 <ol style="list-style-type: none"> <li>1) Getting to Zero to eliminate all new HIV infections in the County within 10 years.</li> <li>2) Elimination Hepatitis C to decrease the incidence of new cases of chronic Hepatitis C by 80% and reduce mortality by 65% in San Diego County by 2030.</li> <li>3) Tuberculosis Elimination to decrease the incidence of active Tuberculosis cases in the County by 98.6% from 7.1 per 100,000 to 1 per 100,000.</li> </ol> </li> <li>j. Director Macchione further specified that this Advisory Board’s insights and feedback on these initiatives are vital to ensuring HIV, Hepatitis C, and Tuberculosis are no longer public health threats in San Diego County.</li> </ol> </li> </ol>
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- k. Director Macchione encouraged HSAB members to regularly meet with their BOS and Board Aides to update them on HSAB efforts and provide their recommendations related to public health legislation, budget, policies and programs.

- 1) Their expertise as healthcare professionals and knowledge of community needs is invaluable to the BOS.

2. Discussion (Q/A)

- a. Would you please explain to the Board members immediate initiatives that this committee may address without duplicating initiatives that other Committees or advisory boards may be working on?
  - 1) Getting to Zero to eliminate all new HIV infections in the County within 10 years.
  - 2) Elimination Hepatitis C to decrease the incidence of new cases of chronic Hepatitis C by 80% and reduce Hepatitis C mortality by 65% in San Diego County by 2030.
  - 3) Tuberculosis Elimination to decrease the incidence of active Tuberculosis cases in the County by 98.6% from 7.1 per 100,000 to 1 per 100,000.
- b. A peer support network is a real important factor. Is there any way that we could incorporate this factor throughout the spectrum?
  - 1) The newest member of our team, Dr. Luke Bergman, Director of Behavioral Health, is working on incorporating peer support, not just in our mental health system but in our drug Medi-Cal system.

**B. Public Comment**

There was no comment.

<b>IV. Action Items</b>	<p><b>A. Approval of March 5, 2019 Meeting Minutes</b></p> <ol style="list-style-type: none"><li>1. Greg Knoll moved and Leonard Kornreich, MD seconded.</li><li>2. The following corrections are to be reflected on the March 5, 2019, minutes:<ol style="list-style-type: none"><li>a. Dr. Stuart Cohen’s initial is to be corrected to “A”.</li><li>b. Therese Cisneros-Remington is to be marked present.</li><li>c. Tim Fraser was present.</li><li>d. Karrar Ali is to be marked present.</li></ol></li><li>3. All HSAB members in attendance voted Aye, with no oppositions or abstentions.</li><li>4. The motion carried and the minutes were approved with the above corrections.</li></ol> <p><b>B. Approval of Board of Supervisor Resolution for Department of Health Care Services (DHCS) Agreement with MAA Board Letter, Karen Ventimiglia, Agency Program &amp; Operations Manager, MAA/TCM Program</b></p> <ol style="list-style-type: none"><li>1. Background<ol style="list-style-type: none"><li>a. The Board Letter presented is regarding the request for the BOS to approve the MAA Revenue Agreement, from 7/1/19 through 6/30/22.</li><li>b. This agreement enables participating County and community programs to be reimbursed for eligible Medi-Cal related administrative activities.</li><li>c. Total MAA revenue will be approximately \$37 million over the next three years. The MAA program has been receiving funds for over 20 years.</li><li>d. The amount for the 2016-2019 cycle was \$37 million.</li></ol></li><li>2. Supports Building Better Health Initiative, County 2019-2024 Strategic Plan, and <i>Live Well San Diego</i> vision by improving the service delivery system for Medi-Cal programs in San Diego County.</li><li>3. The HSAB members approved the Board Letter that would go before BOS to take action on April 30, 2019.<ol style="list-style-type: none"><li>a. Greg Knoll moved for approval and Leonard Kornreich, MD seconded. All HSAB members in attendance voted Aye, with no oppositions or abstentions. The motion carried and the Board letter was approved.</li></ol></li><li>4. Discussion (Q/A)<ol style="list-style-type: none"><li>a. Please explain the estimated cost and revenue for 2018-19 and why it more than doubled for the 2019 and 2020 budget?<ol style="list-style-type: none"><li>1) We did not want to limit the program to something we may surpass.</li><li>2) One of the priorities of this program is to develop marketing tools.</li><li>3) There are community and internal organizations that can be claiming medical administrative activities.</li></ol></li><li>b. Do you know the reason why new contracts require a board resolution?<ol style="list-style-type: none"><li>1) The Department of Health Services has mandated that all Counties entering into a new agreement for MAA have a Board Resolution.</li><li>2) This resolution provides the authority or evidence to enter into such agreements.</li></ol></li></ol></li></ol>
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	<ul style="list-style-type: none"><li>c. Has there been any difference in recruitment or ability to claim?<ul style="list-style-type: none"><li>1) There has been no difference in recruitment or ability to claim.</li><li>2) Recently there was a decision with the Transit Districts who are no longer able to receive MAA reimbursement in California as the health plans are required to provide those services.<ul style="list-style-type: none"><li>a) Otherwise there are no changes that will impact the claiming ability.</li></ul></li></ul></li><li>d. What do you see as barriers that are preventing community-based organizations from benefiting from MAA? Why aren't they engaging?<ul style="list-style-type: none"><li>1) There is a fear that the money would have to be returned.</li><li>2) Tools will need to be developed to streamline the process.</li></ul></li></ul> <p><b>C. Approval of Infectious Homeless Housing Board Letter, Susannah Graves, MD, Tuberculosis Control and Refugee Health Chief/Medical Officer.</b></p> <ul style="list-style-type: none"><li>1. Background: Item Pulled from the Agenda.</li></ul> <p><b>D. Approval of 2019 HHSA Fee Schedule, Charissa Japlit, Departmental Budget Manager.</b></p> <ul style="list-style-type: none"><li>1. Background: The Board Letter presented to the Committee is for approval of an Ordinance to amend fees charged for services related to the following Health and Human Services Agency (HHSA) divisions:<ul style="list-style-type: none"><li>a. Public Health Services (PHS).</li><li>b. Behavioral Health Services (BHS).</li><li>c. On 4/17/18, Board action was taken to update these fees and rate charges.</li><li>d. Today's action provides an adjustment to these costs.</li></ul></li><li>2. Approval of Board Letter<ul style="list-style-type: none"><li>a. Leonard Kornreich, MD, moved for approval and Greg Knoll, seconded.</li><li>b. All HSAB members in attendance voted Aye, with no oppositions or abstentions.</li><li>c. The motion carried and the Board Letter was approved.</li></ul></li><li>3. Discussion/(Q/A):<ul style="list-style-type: none"><li>a. Please explain the Increase for the private pay fee?<ul style="list-style-type: none"><li>1) The increase is made by salary and benefits.</li></ul></li><li>b. Can you please explain why the clinical laboratory fees are so different between the fee that you charge and the full cost of the government fees?<ul style="list-style-type: none"><li>1) In our ordinance we include Section 239 that enables us to charge the Medi-Cal fee.<ul style="list-style-type: none"><li>a) There is a Contingent Plan for emergencies that allows flexibility to react to the immediate needs of the public.</li></ul></li></ul></li><li>c. Some of the lab fees are decreasing. Is this due to the testing getting less expensive or the duplication of the labs?<ul style="list-style-type: none"><li>1) The methodology is changing in the overhead rate calculation. This reduces cost and distribution.</li><li>2) Also, the cost within the Agency is lower and thereby decreases the lab cost.</li></ul></li></ul></li></ul>
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<p><b>V. Chair's Report</b></p>	<p>d. Does the County receive section 317, CDC funds for some of the immunizations received?</p> <ol style="list-style-type: none"><li>1) The Immunization Program does receive Section 317, but not funding. Rather, we receive vaccines from the State.</li><li>2) The CDC has a budget that they allocate to all the states throughout the United States and they send the product to the California Department of Public Health (CDPH) who then distributes the vaccines to the local health departments.</li></ol> <p><b>A. Public Comment</b></p> <ol style="list-style-type: none"><li>1. There was no comment.</li></ol> <p><b>B. Annual Accomplishment Report Health</b></p> <ol style="list-style-type: none"><li>1. The Annual Report will be presented to the BOS at the end of the month.</li><li>2. The HSAB the approved the letter recommending night budget meetings to the BOS.</li></ol> <p><b>C. Board Evaluation</b></p> <ol style="list-style-type: none"><li>1. The Evaluation Report would be reviewed and discussed at length at the Advance.</li></ol> <p><b>D. STD Report</b></p> <p><b>E. Health Services Advisory Board Advance</b></p> <ol style="list-style-type: none"><li>1. Discussion on Schedule Date<ol style="list-style-type: none"><li>a. Doodle Poll was emailed for the Advance with new proposed dates.</li></ol></li></ol> <p><b>E. Vacancies</b></p> <ol style="list-style-type: none"><li>1. Committee is still waiting for the BOS to assign new members.</li><li>2. Currently we have two vacancies.</li></ol>
<p><b>VI. Informational Items</b></p>	<p><b>A. Committee Reports</b></p> <ol style="list-style-type: none"><li>1. Policies and Program: Leonard Kornreich (Chair), Greg Knoll, Harris Effron, Karrar Ali, LaVonna Connelly.</li><li>2. Budget: James Lepanto (Chair) and Judith Shaplin.<ol style="list-style-type: none"><li>a. James Lepanto (chair) stated that one member is needed to meet a Quorum.</li><li>b. Stuart Cohen, MD, agreed to join the budget committee.</li></ol></li><li>3. Health Legislation: Paul Hegyi (Chair), Elly Garner, Harriet Seldin, Henry Tuttle, Dimitrios Alexiou.<ol style="list-style-type: none"><li>a. James Lepanto (Chair) to contact Paul Hegyi (Chair) to receive a summary of the bills and links that can be emailed to the Committee.</li></ol></li><li>4. Strategic Planning/Annual Report/Nominating Committee: James Lepanto (Chair)<ol style="list-style-type: none"><li>a. No update.</li></ol></li></ol>

**VII. Public Health Officer's Report**

**A. Communicable Disease Issues: Meningococcal Disease Outbreak**

1. The County and San Diego State University (SDSU) conducted four vaccination clinics this semester in addition to supporting similar opportunities.
2. A total of 795 doses were given over the course of the four clinics.
3. As of 3/21/2019, 35% of undergraduates 23 years of age and younger had received at least one dose of the meningococcal B vaccine and 14% were fully vaccinated.
  - a. Among students living in residence halls, 69% had received at least one dose of the vaccine and 32% were fully vaccinated.

**B. Board Action**

1. Public Health Issues
  - a. Asylum Seeker Shelter's: Since opening, Public Health has received reports of nine varicella cases within the shelter.
  - b. As of 3/25/19, 7,774 health screening assessments have been conducted.
  - c. The shelter location moved to County-approved property and has been operational since March 6, 2019.

**C. Grants**

1. Drs. Wooten and Hernandez met with the City of San Diego to plan efforts to address the Kresge initiative.
  - a. This aligns with one of the recommendations of the State Hepatitis A Audit.
  - b. Scheduling meetings continues with other municipalities over the remaining year.
2. Interim Report submitted on Friday, 3/29/19.
3. Training workshops will be held from 4/19 to 10/19.

**D. Funding**

1. Maternal Child and Family Health Services (MCFHS) submitted and were awarded two new grant applications:
  - a. CDC-RFA-DP18-1817.
    - 1) The Year 2 Continuing Application was submitted before the 4/1/19 deadline.
  - b. CDC-RFA-DP18-1813: REACH Grant.
    - 1) The Year 2 Continuing Application is due by April 15, 2019.
2. Gonorrhea Surveillance
3. Naloxone Program
4. Local Oral Health Program (LOHP)
5. Strategic HIV Prevention Projects
6. Tobacco Control Resource Program (TCRP):
  - a. The County posted a Notice of Intent to Award for four regional contracts to:
    - 1) Vista Community Clinic.
    - 2) Social Advocates for Youth (SAY) San Diego.
    - 3) American Lung Association of California.
    - 4) Community, Action, Service & Advocacy (CASA).
  - b. All contracts were executed effective 3/21/19.



- 7. STD FUNDING:
- 8. SNAP-ED:
  - a. Nutrition Education and Obesity Prevention (NEOP) Work plan was submitted to meet the 4/2/19 deadline.
- 9. Perinatal Equity Initiative
- 10. Childhood Obesity Prevention Services

**E. Public Health Initiatives**

- 1. Getting to Zero Initiative
  - a. The March 11, 2019, meeting was cancelled.
    - 1) The next meeting is April 8, 2019.
  - b. A CAHAN alert release is planned on March 25, 2019.
    - 1) This will inform providers of the County's recommendation for routine HIV testing.
- 2. Hepatitis C Initiative
  - a. Steering Committee Meeting took place on January 4, 2019
  - b. Research and Surveillance Subcommittee Meeting took place on April 16, 2019

**F. Branch and Program Fact Sheets**

**G. Board Letter Forecast**

- 1. July 9, 2019 Board Letter to accept Tuberculosis Funding from the State.
- 2. July 9, 2019 Board Letter to accept HIV Surveillance Funding.

**H. Announcements**

**I. Site Visits**

Time Frame	Description	Auditor
6/5/19	CDC Operational Readiness Review	CDC

**J. Legislation**

No public comment.

**VIII. Public Comments**

<b>IX. Agenda items – suggested future meetings</b>	<b>A. Agenda Items - Suggested future meetings</b> <ol style="list-style-type: none"><li>1. Title V Maternal and Child Health (MCH) Block Grant Board Letter – (April 2019).</li><li>2. Hansen’s Disease Board Letter – (April 2019).</li><li>3. Health Services Advisory Board Advance – (April 2019).</li><li>4. Annual Youth Risk Behavior Survey – (April 2019).</li><li>5. Community Health Assessment Community Health Improvement Plan, and Public Health Services Strategic Plan- (May 2019).</li><li>6. Accept Tuberculosis funding from the State Board Letter – (June 2019).</li></ol>
<b>X. Adjournment</b>	<p>This meeting was adjourned at 4:58 PM.</p> <p>Next meeting: May 7, 2019 at the County Administration Center, Rooms 302/303.</p>
<b>XI. Supplemental information</b>	<p>Aging and Independence Services Update - Long Term Care integration Project.</p>