



County of San Diego

HEALTH SERVICES ADVISORY BOARD

1700 PACIFIC HIGHWAY, SAN DIEGO, CALIFORNIA 92101-2417

Thursday, November 15, 2012, 4:00 - 6:00 pm

1600 Pacific Highway, Room 302/303

San Diego, CA 92101

MEETING MINUTES

Members Present	Members Excused	Presenters	HHSA Support Staff
Michelle Davis, Vice Chair Adriana Andres-Paulson James Beaubeaux Greg Knoll James Lepanto Colin Mackinnon Ben Medina Stephen O'Kane Jack Rogers Estelle Wolf	Judith Shaplin, Chair Steven Escoboza Robert Hertzka Dennis Holz Leonard Kornreich Bob Prath John Sturm Judith Yates	Karen Waters-Montijo, Chief Epidemiology and Immunization Services Branch.	Wilma Wooten Linda Lake Lisa Fitzpatrick Peter Shih
Issue	Discussion		Action
1. WELCOME – Michelle Davis, Vice Chair			
	The meeting was called to order at 4:05 p.m. Vice Chair, Michelle Davis welcomed everyone and requested that everyone introduce themselves as all members were not present at the last meeting to meet the new member. New Member: James Lepanto, District 4 Ms. Davis asked if there were any additions/corrections to today's agenda.		No additions or correction noted to agenda
2. PUBLIC COMMENTS			
<ul style="list-style-type: none"> Public Comment 	No Public Comment was presented at this time.		

3. PRESENTATION/DISCUSSIONS		
Issue	Discussion	Action
Approval of Minutes		
	<p>Ms. Davis noted that the minutes from the May 17, 2012, HSAB meeting were not approved due to a lack of a quorum at the following meeting.</p> <p>Ms. Davis asked if there were any corrections or additions to the May 17th & November 15, 2012 minutes.</p>	<p>No corrections or additions were noted to the meeting minutes:</p> <p>May 17, 2012 & November 15, 2012</p> <p>Motion passed</p>
<ul style="list-style-type: none"> Updates of pertinent items from other Advisory Board members. 	<p>Estelle Wolf announced that she is a Senior Assembly Member for the California Senior Legislature. Ms. Wolf attended her first session meeting in Sacramento.</p> <p>The California Legislature consists of 40 Senators and 80 Assembly Members. The California Senior Legislature group reviewed 85 proposed bills and/or potential laws over a two-day period. Out of the 85 bills presented, 10 have gone to the State Legislature for consideration and 10 to the Federal Legislature for consideration on being passed.</p> <p>The proposed bills and/or laws covered a whole realm of issues that affect our seniors, e.g. Safety in the Community, Funding for the Ombudsman program, etc.</p> <p>Ms. Wolf stated that the California Senior Legislature has had several successes over the past year; e.g. 10 bills were sent to the State Legislature for review and all 10 bills proposed were passed and signed by the Governor due to information submitted by this group.</p>	
4. ACTION ITEMS: NO ACTION ITEMS		
Issue	Discussion	Action
<ul style="list-style-type: none"> Change in Immunization and Tuberculosis Control Services – Karen Waters-Montijo 	<p>This information was presented before this Board at the September meeting. Karen will be reviewing suggested changes/additions requested by this body before a vote is made to present this Board Letter to the Board of Supervisors.</p> <p>This board letter addresses proposed reduction in services for Immunizations and Tuberculosis</p>	<p>Greg Knoll motioned to approve the passage of this board letter as written to the Board of Supervisors.</p> <p>Stephen O’Kane seconded the motion.</p>

	<p>Control Services set by new changes to the guidance by the Centers for Disease Control (CDC). The new guidelines state that we cannot use the section 317 vaccines anymore for individuals that have insurance, as resources are being reserved for those individuals who are most at need.</p> <p>Only children without insurance and children with insurance that does not cover vaccines will be allowed to receive vaccines through the public health center clinics. People with Medi-Cal and Medicare will still be provided services; however, they will be encouraged to go to their primary providers and keep the relationship with their medical home.</p> <p><i>Is this the same information that was brought before this board in September?</i></p> <p>Yes.</p> <p><i>Comments or Questions:</i></p> <p><i>What is the implication of this change? What do we anticipate will happen?</i></p> <p>People who have come to public health center clinics to receive vaccines will be asked if they have insurance and if so, they will be asked to go to their primary care provider for their vaccine.</p> <p><i>They can get their vaccine if they have Medi-Cal?</i></p> <p>Adults with Medi-Cal are considered to have insurance and they will be referred back to their medical home. Children with Medi-Cal can continue to come to the public health center clinics.</p> <p>Previous State policy allowed the clinics to tell clients that had insurance that they could receive their vaccine today, but in the future they will need to go to their medical provider.</p> <p><i>Will this impact primary care physicians in a way they are not anticipating?</i></p>	<p>All in favor. Motioned passed.</p>
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	<p>We don't think so; however, we have no evidence to this fact. We have sent notices to the providers letting them know of this change.</p> <p><i>Have schools been made aware of this change?</i></p> <p>Yes, school health officials have been informed of this change.</p> <p><i>This is not a decision that the County has much control over; however, the biggest obstacle is that people who are not use to paying, may now have a co-pay associated with receiving their vaccine.</i></p>	
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5. PUBLIC HEALTH OFFICER'S REPORT

<ul style="list-style-type: none"> • Wilma J. Wooten, M.D., M.P.H., Public Health Officer 	<p>Dr. Wooten provided the Board with Public Health Officer's Report (handout).</p> <p>In addition, Dr. Wooten circulated a copy of the draft of the California, Let's Get Healthy Task Force report. The Task Force consists of primary care and public health officials. The report is due December 12, 2012.</p> <p>The State has been very inclusive during this process, i.e. accepting feedback and recommendations from workgroups over the past four months.</p> <p><i>Comments or Questions</i></p> <p><i>In the Public Health Officer's Report, it states that influenza cases "...continue to be at expected levels..." Does this mean the level is zero?</i></p> <p>No, what this means is that the activity is at the normal level of what is expected during this time of year. In other words, 2-5% of emergency room visits are secondary to influenza-like illnesses.</p> <p><i>Now that the CTG grants are required to have CDC approval, what happens to programs such as Chula Vista Schools (which indicate their SOW is pending approval by the CDC) if the</i></p>	<p>A copy of the California, Let's Get Healthy Task Force report or internet link will be sent to the Board members for review.</p>
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CDC returns a denial and this program is already up and running? .

Dr. Wooten indicated that “SOW” means Scope of Work and it does not mean that this program is up and running, but that the deliverables have been developed.

So, does this mean that the programs are not initiated until we receive full CDC approval?

Dr. Wooten stated that “yes, this is correct”.

Are the influenza vaccines correct this year in relation to the strains of influenza that are being presented?

Dr. Wooten stated that it appears that the activity is within expected range. The requirement that all individuals ages six months and older be vaccinated has helped with keeping the numbers down.

December 31, 2012, is the last day for Healthy Family enrollees. How are we preparing to make sure that everyone does not lose coverage starting January 1, 2013?

Peter Shih stated that plans to roll a detailed transition plan to the communities and providers are underway.

The major focus currently is on the severely mentally ill children. There is a plan put together that is being rolled out to the community and providers to ensure that there is no break in coverage for the children.

The State have already sent notices and it will be conducted in phases – San Diego in January, HealthNet in March, and Blue Cross/Blue Shield in August. The FRCs will be increasing their staff in anticipation of getting the applications processed.

What are we doing to get more providers to accept Medi-Cal?

We should appeal to the Medical Society at some point to ask if there is a smooth way to transition these children into care and specialty services and to give us a timeframe that makes sense.

San Diego County has always been committed to the underserved and we strengthen the Community Clinics as best we can. However, we cannot make providers accept Medi-Cal.

Healthy San Diego has had a number of workgroups working with the Health Plans that are about to deal with these children. There are approximately 1000 children that fall under the category in which Peter is talking about. They are not all severely mentally ill, but some are indicated as receiving mentally-ill services.

Come January 1, 2013, these children will have to locate new providers for their mental health services. Some of the agreements that are being made are: if a patient still needs treatment and the providers are willing to accept County pay for this patient, then the County will develop a “one-on-one” contract with the provider. These will be done on an individual basis.

There are a lot of positive things happening regarding the Affordable Care Act, e.g. increased payments, increased incentives, etc. Now that it is a requirement for everyone to have health insurance, maybe now we can work toward fixing the long standing problem of lack of capacity.

Are there systems in place to track where there are gaps?

Sure.

Peter Shih stated that there will be GIS Mapping to find out where the children are and an overlay will be done to identify where the kids are, where the providers are, and where the FRCs are located; in order to staff them appropriately. This data will be used to help us make some decisions and begin some conversations with

	<p>providers.</p> <p><i>Are you reaching out to the community organizations that work with these families, children, and schools to make sure they understand the challenges and resources that are available on their behalf?</i></p> <p>Yes, we have a workgroup that has been meeting on a regular basis; and as part of this workgroup, a sub-committee on communication has been developed to make sure that we are communicating with these communities appropriately. However, this is a challenge.</p> <p><i>What kind of outreach is being done to assist people with special needs?</i></p> <p>The Children’s Mental Health Re-procurement Contracts and RFPs that have come out recently (i.e. therapy behavioral services) are identifying the particular need within the SOW and the contractors are being required to write, navigate, and conduct outreach for those specific areas.</p> <p><i>The clinics in San Diego have been preparing for the increase of clients with Medi-Cal coverage. The clinics have been working on becoming “patient-centered medical homes”; which allow them to function in medical teams. There is a team of people responsible for patients, which in turn allows them to see more patients. This will help with Healthy Families clients and access to care.</i></p> <p><i>The children that are receiving specialty care at hospitals, e.g. treatment for cancer, will still be able to receive this care because the hospitals take Medi-Cal.</i></p>	
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6. AGENDA ITEMS – December 20, 2012

<ul style="list-style-type: none"> • Update on Healthy Families • Behavioral Health Services reorganization 		
<ul style="list-style-type: none"> • Cancellation of December Meeting 	<p>The Vice Chair asked if this Board wanted to have a meeting on December 20, 2012. This will</p>	<p>Lisa Fitzpatrick will send out a Poll requesting</p>

	be several days before the holiday and due to holiday travel, we may not have a quorum.	Board Members to confirm their attendance at the December 20, 2012, meeting. If a quorum is not reached, that meeting will be canceled.
7. OTHER ISSUES		
• No other issues		
8. ADJOURNMENT		
	This meeting was adjourned at 4:40 pm.	With no other business Adriana Andres-Paulson motioned to adjourn this meeting. James Beaubeaux seconded motion. All in favor.