MEMBER SERVICES ADVISORY GROUP

Meeting Agenda
Thursday, February 11, 2021
10:00 – 11:30 a.m.

Important notice regarding COVID-19: Based on guidance from the California Department of Public Health and the California Governor’s Office, in order to minimize the spread of the COVID-19 virus, Alliance offices will be closed for this meeting. The following alternatives are available to members of the public to view this meeting and to provide comment to the Advisory Group.

1. Members of the public wishing to join the meeting may do so as follows:
   a. Via computer, tablet or smartphone at:
      https://global.gotomeeting.com/join/388191189
   c. New to GoToMeeting? Get the app now and be ready when your first meeting starts: https://global.gotomeeting.com/install/759946981

2. Members of the public wishing to provide public comment on items not listed on the agenda that are within jurisdiction of the commission or to address an item that is listed on the agenda may do so in one of the following ways.
   a. Email comments by 5:00 p.m. on Wednesday, February 10, 2021 to the Clerk of the Board at mmiddleton@ccah-alliance.org
      i. Indicate in the subject line “Public Comment”. Include your name, organization, agenda item number, and title of the item in the body of the e-mail along with your comments.
      ii. Comments will be read during the meeting and are limited to five minutes.
   b. Public comment during the meeting, when that item is announced.
      i. State your name and organization prior to providing comment.
      ii. Comments are limited to five minutes.

3. Mute your phone during presentations to eliminate background noise.
   a. State your name prior to speaking during comment periods.
   b. Limit background noise when unmuted (i.e. paper shuffling, cell phone calls, etc.).

1. Call to Order by Chairperson Beleutz. 10:00 a.m.
   A. Introductions

2. Oral Communications. 10:05 a.m.
   A. Members of the public and may address the Advisory Group on items not listed on today’s agenda, up to a maximum of 3 minutes per person, with oral communications time not to exceed 20 minutes in total.
MEMBER SERVICES ADVISORY GROUP

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B. If any member of the public wishes to address the Advisory Group on any item that is listed on today’s agenda, they may do so when that item is called.

3. Comments and announcements by Advisory Group members.
   A. Advisory Group members may provide comments and announcements.

4. Comments and Announcements by Plan Staff.
   A. Plan staff may provide comments and announcements.

Consent Agenda Items: 10:10 a.m.
5. Approve Member Services Advisory Group minutes of November 12, 2020.
   - Reference materials: Minutes as above.

6. Accept Plan Staff Reports:
   A. Current Enrollment
   B. January 2021 Call Statistics Report
   C. Q3 & 4 2020 Member Grievance Report
   - Reference materials: Reports as above.

Regular Agenda Items: 10:15 a.m.
7. Elect Advisory Group Chair (10:15 – 10:20 a.m.)
   Action: Open nominations and elect Chair for 2021

8. Meeting Facilitation Ownership Update (10:20-10:35 a.m.)
   Informational: Dana Marcos, Member Services Director and Ronita Margain, Regional Operations Director will provide an update about MSAG meeting facilitation.

9. Pharmacy Benefit Transition (10:35 – 10:40 a.m.)
   Informational and Feedback: Dana Marcos, Member Services Director will provide an update about the Medi-Cal Rx Carve-out. New implementation date of April 1, 2021.

10. New Member Packet Presentation (10:40 – 11:00 a.m.)
    Informational: Megan Sims, MS Operations Manager to present on the updated New Member Packet

11. Vaccinating Against COVID-19 in our Community (11:00 – 11:25 a.m.)
    Informational and Feedback: Hilary Gillette-Walch, RN, will update on COVID-19 vaccinations.

12. Adjourn
MEMBER SERVICES ADVISORY GROUP

Meeting Agenda
Thursday, February 11, 2021
10:00 – 11:30 a.m.

The next meeting of the Member Services Advisory Group, after this February 11, 2021 meeting:

- Santa Cruz – Monterey – Merced
  Thursday, May 13, 2021, 10:00 – 11:30 a.m.
  Locations: Videoconference via GoToMeetings

Members of the public interested in attending should call the Alliance at (831) 430-5523 to verify meeting dates and locations prior to the meetings.

The complete agenda packet is available for review at Alliance offices, and on the Alliance website at www.ccah-alliance.org/boardmeeting.html. The Committee complies with the Americans with Disabilities Act (ADA). Individuals who need special assistance or a disability-related accommodation to participate in this meeting should contact Maura Middleton at least 72 hours prior to the meeting at (831) 430-5567. Committee meeting locations in Salinas and Merced are directly accessible by bus, however, until further notice all meetings are being online.
Meeting Minutes
Thursday, November 12, 2020
10:00 – 11:30 a.m.

In Santa Cruz County:
Central California Alliance for Health
1600 Green Hills Road, Suite 101, Scotts Valley, California

In Monterey County:
Central California Alliance for Health
950 East Blanco Road, Suite 101, Salinas, California

In Merced County:
Central California Alliance for Health
530 West 16th Street, Suite B, Merced, California

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Advisory Group Members Present:
Santa Cruz County:
John Beleutz       Health Projects Center
Alene Smith      Consumer
Candi Walker      Consumer

Monterey County:
Enid Donato      Natividad Medical Center
Humberto Carrillo     Consumer
Elsa Quezada       Commissioner
Julie Edgecomb     Commissioner

Merced County:
Rob Smith      Commissioner
Erika Peterson      Merced County Head Start

Members Absent:
Martha Rubbo       Consumer
Doris Drost      Consumer
Yona Adams      HSA/CareTEAM
Lupe Chavez      Consumer
Ashley Lynne Gregory
Alexandra Heidelbach
Linda Jenkins      Consumer
Myisha Reed      First 5 Merced County
Rex Resa      Consumer
Linda Villa      Consumer
Silvia Wilson      Monterey County-CalHeers
Vivian Pittman     Consumer
Rebekah Capron      Merced HAS
Michael Molesky     Commissioner
Call to Order by Chairperson Beleutz.
John Beleutz, Chairperson, called the meeting to order at 10:02am. Self-introductions were made.

Oral Communications.
John Beleutz, Chairperson, opened the floor for any members of the public to address the Committee on items listed in the agenda.

No members of the public addressed the committee.

John Beleutz, Chairperson, opened the floor for Advisory Group members to make comments.

No comments from Advisory Group members.

Comments and Announcements by Plan Staff.
No comments from Plan Staff.

Consent Agenda Items:
Chairperson Beleutz opened the floor for approval of the Consent Agenda
Action: All consent items approved.

Regular Agenda Items:
Population Needs Assessment (PNA)
Informational: Deborah Pineda, Quality and Health Programs Manager provided an overview of the findings of the Alliance PNA. The purpose of the PNA is to improve health outcomes for members and to ensure the Alliance is meeting member needs. The PNA identifies unique needs of targeted populations, such as seniors and persons with disabilities, children and youth with special health care needs, members with limited English proficiency, and other member groups from diverse cultural and ethnic backgrounds. Based on member data, a member survey, and member committee feedback, key findings of the PNA include the following:

- 75-80% of members reported satisfaction with timely access to care.
- 98% of members were satisfied with the help they received from the Alliance in coordinating care within the last 12 months (PNA survey).
- Members are interested in receiving more information or help from the Alliance regarding afterhours care. Such as, who to call at night when sick?
• Spanish speaking members would like more information and help regarding how to access medical care and Alliance services.
• The use of behavioral health services in 2019 was higher in Santa Cruz County, over Merced and Monterey.
• California Children’s Services (CCS) members under the age of 10 access preventative services at a higher rate than non-CCS members.
• Asian and Hispanic members showed higher rates of accessing care and services over other ethnicity groups.
• Male adolescents, ages 12 – 19 were less likely to have a PCP visit than their female peers.
• Health literacy, or understanding, is a newly identified need. Members would like:
  o Information in a simple, understandable format (e.g. infographic).
  o Opportunities for Alliance benefits to be explained in-person.
  o To better understand terms commonly used, such as “Primary Care Provider; PCP” and “coordination”.

Member Outreach During a Natural Disaster
Hilary Gillette – Walsh, RN, Quality and Population Health Manager presented about the Alliance’s outreach response to recent public emergencies, such as the drinking water crisis in Merced County, wildfire events throughout all counties, and the ongoing COVID pandemic. The goals of Alliance outreach to members during such events is to educate and connect members to needed emergency resources, and inform members that they can safely return to provider visits and resume care. Since April, 2020 the Alliance has reached out to 77,518 members.

Pharmacy Benefit Transition
Dana Marcos, Member Services Director presented about the Medi-Cal Rx Pharmacy Carve-out. Medi-Cal Rx was initially planned to transition on January 1, 2021, but this date has now been extended to a new date of April 1, 2021. The Alliance continues to prepare for this transition of Medi-Cal pharmacy benefits to a single, state-wide Fee for Service (FFS) delivery system. Staff is currently executing a robust member outreach plan to ensure Alliance members understand this transition and know how to access services through a new DHCS Pharmacy Benefits Manager (PBM), Magellan. To educate and inform members about Medi-Cal Rx, the DHCS and the Alliance is conducting member outreach in a variety of ways. The DHCS distributed 90-day and 60-day notices to all Medi-Cal members state-wide and the Alliance will issue a 30-day notice to members. In addition, the following Alliance outreach efforts are underway:
• An educational flyer is in development to be shared with providers and community partners to distribute to members.
• A Medi-Cal Rx article will be included in the Alliance Member Newsletter.
• The Alliance member website will be updated with information about the transition to Medi-Cal Rx, including links to the DHCS website and Magellan PBM.
• The Alliance will post social media information on Facebook that directs members to visit a member-oriented information page.

Proposed Dates for 2021 were accepted as listed below:
• Thursday, February 11, 2021
• Thursday, May 13, 2021
• Thursday, August 12, 2021
Thursday, November 4, 2021** (Thursday, November 11 is Veterans Day and the Alliance will be closed. Therefore we will meet the 1st Thursday of the month instead of the 2nd Thursday of the month.)

Meeting adjourned at 10:55 a.m.
Respectfully submitted,
Maura Middleton, Clerk of the Advisory Group/Member Services Administrative Assistant
Central California Alliance for Health
Member Services Telephone Statistics - 2021/2020

Member Services Call Volume
Per Thousand Members Per Year (PTMY)
January 2021
MS Queue Calls: 10,921

Member Services Speed to Answer
Monthly Administrative Quality Indicator (AQL)
Calls Answered within 30 seconds of entering the ACD

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### Transportation Call Volume
Per Thousand Members Per Year (PTMY)
January 2021
Transportation Queue Calls: 5,029

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### Monthly Administrative Quality Indicator (AQI)
Calls Answered within 30 seconds of entering the ACD

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Q3 2020 Appeals and Grievances: 527

Appeals: 13% (85% in favor of Plan; 35% in favor of Member)
Exempt Grievances: 3%
Grievances: 82%
Other: 2% [Inquiries, Duplicates, Withdrawn]

Category Figures
Referrals: 2%
Access Issues: 8%
Benefits and Coverage: 2%
Quality of Care Issues: 15%
Other: 70%
  - Transportation: 47% of “Other” Category
  - Provider Billing Issues: 18% of “Other” Category
  - Medication Issues: 6% of “Other” Category
  - Communication Issues: 2% of “Other” Category

Analysis and Trends
  - A high percentage of “Other” grievances involved transportation issues for late, missed rides to appointments and quality of service issues.
  - Grievances re-stabilized following 3 month COVID 19 shelter in place
  - No significant trends noted for grievances in Q3 2020.

Highest Grievances Filed by County
1. Merced: 40%
2. Monterey: 38%
3. Santa Cruz: 21%

Behavioral Health Beacon Grievances:
  - Member Grievances: 10

IHSS Summary:
  - Member Grievances: 0

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<td>2019 Enrollment</td>
<td>343,495</td>
<td>343,060</td>
<td>342,453</td>
<td>343,500</td>
<td>343,242</td>
<td>341,899</td>
<td>338,929</td>
<td>338,408</td>
<td>338,144</td>
<td>337,494</td>
<td>336,610</td>
<td>335,289</td>
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<tr>
<td>A &amp; G Issues</td>
<td>190</td>
<td>200</td>
<td>287</td>
<td>225</td>
<td>214</td>
<td>150</td>
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<td>2020 Enrollment</td>
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*Grievances Per 1,000 Member Month
Grievances Per 1,000 Member

Month

Appeals and Grievances: 445
- Appeals: 14% [52% in favor of Plan, 48% in favor of Member]
- Exempt Grievances: 4%
- Grievances: 77%
- Other: 3% [Inquiries, Duplicates, Withdrawn]

Category Figures
- Referrals: 4%
- Access Issues: 6%
- Benefits and Coverage: 3%
- Quality of Care Issues: 15%
- Other: 69%
  - Transportation: 56% of "Other" Category
  - Provider Billing Issues: 28% of "Other" Category
  - Medication Issues: 9% of "Other" Category
  - Communication Issues: 3% of "Other" Category

Analysis and Trends
- A high percentage of "Other" grievances involved transportation issues for late, missed rides to appointments and quality of service issues.
- Grievances stable with a dip in volume toward the end of the year.
- No significant trends noted for grievances in Q4 2020.

Highest Grievances Filed by County
1. Monterey: 39%
2. Merced: 31%
3. Santa Cruz: 30%

Behavioral Health Beacon Grievances:
- Member Grievances: 12

IHSS Summary:
- Member Grievances: 4

Appeal and Grievance Rate PKPM

- A lower rate demonstrates a good or positive result when compared to Upper Control Limits (UCL) and Lower Control Limits (LCL) which represent three (3) standard deviations from mean or average performance.

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*Grievances Per 1,000 Member Month
New Member Welcome Packet

Megan Sims, MS Operations Manager
Member Services Advisory Group
February 11th, 2021

GO LIVE:
JANUARY 1ST, 2021

What Changed?
Members will now be informed of how to access certain member materials electronically*:
- Member Handbook
- Formulary
- Provider Directory (with the exception of seniors and persons with disabilities)

The New Member Welcome packet has been redesigned as a result of this change

*Approved by DHCS per APL 19-003 for Medi-Cal materials
What’s Included?

New Member Welcome Packets now include:

- Member ID Card
- Member Notice which advises members how to access the provider directory, formulary and member handbook
- Welcome Letter—Orientation to the Alliance and five steps for new members:
  - How to use your Alliance ID Card
  - How to Pick a Doctor
  - Know How Your Health Plan Works—Covered Services and Benefits
  - How to Contact the Alliance If You Have Questions or Issues
  - How to Use The Things We’ve Sent You In This Packet
- Covered Benefits Matrix provides a summary of coverage under the Alliance.
- Taglines and Non-Discrimination Notice
- PCP Selection Form
- Business Reply Envelope
- Health and Wellness Rewards Brochure
- Note: seniors & persons with disabilities will continue to receive the Provider Directory

How Does it Look?

Important Plan Information

Provider Directory, Member Handbook, and Formulary Insert

If you want to access the Provider Directory, that lists all of the primary care doctors in the Alliance network, the Member Handbook, that tells you about your coverage under the Alliance, or the approved Drug List, also called a “Formulary”, please visit our website at www.caah-alliance.org. If you want a copy mailed to you, or if you need help finding a network provider or have benefits questions, please call Member Services at 800-700-3874. For the Hearing or Speech Assistance Line, call 800-735-2029 (TTY; Dial 711). We are here 8 a.m. – 5:30 p.m. Monday through Friday. The call is toll free. If you speak another language other than English, language assistance services are available to you at no cost.

Important phone numbers to know:
- Alliance Member Services: 800-700-3874 (TTY; Dial 711)
- 24/7 Alliance Nurse Advice Line: 844-391-9807
- Language Assistance Services: 800-700-3874, ext. 5580
- Mental Health Services: Beacon Health Options 855-765-9700
- Vision Services Plan (for routine vision services): 800-877-7198
- Medi-Cal Dental Program (for dental services): 800-322-6384
- Alliance Care Management Line: 800-700-3874, ext. 5612
- Alliance Health Education Line: 800-700-3874, ext. 5600
- Alliance Transportation Services: 800-700-3874

“Alliance ID card attached below”

Note: As of 4/1 notice will no longer include formulary information due to Medi-Cal Rx.
What are the Benefits?

• Clear and concise step-by-step information to guide new members as they enroll with the Alliance
• Promotes self-service and empowers members to use the Alliance Website which contains the most accurate and up-to-date information
• Supports sustainability
• Assists with reduction in returned packets due to mailbox sizes

Questions?
Vaccinating Against COVID-19 in Our Community

Hilary Gillette-Walch, RN, MPH
Quality and Population Health Manager
Member Services Advisory Group
February 11, 2021

Objectives

1. Review current COVID-19 Activity
2. Vaccination Recommendations
3. Issues and Challenges
4. Summary
Will a COVID-19 vaccination protect me?

Yes!
The COVID-19 vaccine teaches your immune system to:

- recognize the virus
- fight the virus
- protect you from COVID-19
**Who Should Be Vaccinated?**

- **Everyone 16 years and older** with no severe allergic reaction to
  - a prior dose of vaccine or
  - any ingredient of the vaccine
- Distribution waves for priority everywhere

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**About COVID-19 Vaccines**

- Common reactions include injection site pain, fever, fatigue, headache, muscle aches
- **Efficacy 95%** overall after two doses
  - Similar across age, gender, race, and high risk conditions
  - Full protection two weeks after 2nd dose given
  - 1st and 2nd dose: three weeks apart

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https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2020-12/slides-12-12/COVID-02-Gruber.pdf on 12/13/2020
https://www.fda.gov/media/144246/download on 12/13/2020
About continued...

- **Different** minimum ages for use (16 vs. 18 years)
- **Different** periods of time needed between 1<sup>st</sup> dose and 2<sup>nd</sup> dose
- If you receive your 1<sup>st</sup> dose with one type of vaccine, you must receive the **same vaccine for the 2<sup>nd</sup> dose**
- Slight elevated risk for severe symptoms for those receiving the Moderna vaccine

https://www.fda.gov/media/144414/download
https://www.cdc.gov/mmwr/volumes/70/wr/mm7004e1.htm

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**Can** this vaccine give me COVID-19?

- **No**
- Common reactions:
  - Fever
  - Redness at injection site
  - Fatigue
  - Headache
  - Muscle aches
- Takes 2-4 weeks after vaccination to build protection
  - Possible a person could be infected with the virus that just before or after vaccination and still get sick
If I have had COVID-19 and recovered, do I still need to get the COVID-19 vaccine?

- **Yes!**
- Severe health risks associated with COVID-19
- Re-infection is possible
  - Experts unsure how long you’re protected
- Vaccine should be offered to you if you have had COVID-19
- Natural immunity varies from person to person
  - Some early evidence suggests natural immunity may not last very long

Is it safe to get a COVID-19 vaccine if I would like to have a baby one day?

- **Yes!** People who want to get pregnant in the future may receive the COVID-19 vaccine
- Experts believe COVID-19 vaccines are safe for a person trying to become pregnant
- Currently no evidence that antibodies formed from COVID-19 vaccination cause any problems with pregnancy or development of the placenta
- No evidence suggesting fertility problems are a side effect of ANY vaccine
Challenges – Myths and Disinformation

**Myth:** The process was rushed and compromised safety
**Fact:** False. The vaccine was studied in thousands of people over a two month period, has undergone rigorous review by the FDA, CDC, and data were published in the New England Journal of Medicine

**Myth:** People who get vaccinated don’t have to wear masks anymore
**Fact:** Not true. Evidence shows that vaccination will prevent people from getting sick, but they may still acquire and transmit the virus to others

**Myth:** The vaccine has microchips that allow the government to track people
**Fact:** Nope!

Alliance Partnerships

- Federally Qualified Health Centers (FQHC)
- Long-Term Care Facilities (LTCFs)
- Pharmacies
- Many others
CDC – ACIP Phased Approach for Vaccine Allocation

**Phase 1:** Provide limited supply of COVID-19 vaccine and/or vaccinations to:
- 1a – Health care workers, beginning with hospital based, highest risk of exposure
- 1a – Long-term care facility (LTCF) staff and residents
- 1a – Unaffiliated healthcare workers including EMS personnel
- 1b – Essential workers, including first responders, corrections officers, education sector, food and agriculture, utilities, transportation
- 1c – High risk adults

**Phase 2:** Expand the vaccination strategy to provide COVID-19 vaccines in a manner that allows for equitable access
- Phase 1 critical population members who were not vaccinated in Phase 1
Key Issues

- Funding
- Communication and trust
- Federal, state, and local roles
- Racial and ethnic disparities
- Supply and logistics
- Coverage and Costs

Challenges – Vaccine Hesitancy

Black Americans less likely to get a COVID-19 Vaccine
(Even if free & determined safe)

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Challenges – Health Inequities

Santa Cruz County

Monterey County

Merced County

In Summary

- COVID-19 vaccine is safe and effective
- Every eligible person should get one
- COVID-19 vaccine distribution:
  - roll out is in phases
  - Starting with healthcare workers and Seniors (+65)

Sign up for vaccination information at: [https://myturn.ca.gov/](https://myturn.ca.gov/)
For more information, go to: [www.cdc.gov/](http://www.cdc.gov/)
Questions?

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Email: hwalch@ccah-alliance.org