

MINUTES
CMSP GOVERNING BOARD
Thursday, July 26, 2018

Governing Board Conference Room
1545 River Park Drive, Suite 435-A
Sacramento, CA 95815

MEMBERS PRESENT

Patrick Blacklock, County Administrator, Yolo County
Richard Egan, County Administrator, Lassen County
Robert Ducay, Assistant Secretary, California Health and Human Services Agency
Richard Forster, County Supervisor, Amador County
Elizabeth Kelly, Director, Colusa County Health and Human Services
Tammy Moss-Chandler, Director, Mendocino County Health and Human Services
Leonard Moty, County Supervisor, Shasta County
Brad Wagenknecht, County Supervisor, Napa County
Christine Zoppi, Director, Glenn County Health and Human Services

MEMBERS ABSENT

Birgitta Corsello, County Administrator, Solano County
Sanjay Bugay, Director, Kings County Human Services

Opening of Meetings

Request for Public Comments

There were no public comments and the Board convened in Closed Session.

Welcoming Remarks and Request for Public Comments

Brad Wagenknecht, Chair, opened the Open Session meeting and asked for introductions. Board members introduced themselves.

Richard Forster reported that Amador County won the Golden Bear Award at the California State Fair this year. Mr. Forster recommended everyone attend the State Fair.

Correspondence and Consent Calendar

Mr. Wagenknecht requested a motion on the Correspondence and Consent Calendar.

ACTION MSC: Approve the Correspondence and Consent Calendar for July 26, 2018.

APPROVED	Votes:	Aye	8
		Nay	0

Report on Closed Session

Cathy Salenko, CMSP General Counsel, reported that the Governing Board met in Closed Session and provided direction to the General Counsel and Governing Board staff concerning contract terms pertaining to negotiations with specified health care providers, and took no action. The Board also discussed three potential Governing Board litigation matters and provided direction to the General Counsel, and took no action.

Report from Legislative Representative

Paul Yoder and Karen Lange of Shaw/Yoder/Antwih Inc. greeted the Governing Board. Ms. Lange reported that Shasta County was just declared for evacuation due to the wildfire.

Ms. Lange stated that the Legislature is on summer recess and comes back in about a week and a half. Then, the Legislature will make the final slog through the end of the Legislative session and adjournment on August 31. The biggest single issue before the Legislature is wildfire liability and the impacts of last year's wildfires. Pacific Gas and Electric (PG&E) is actively seeking changes to their liability (reverse condemnation) for wildfire damage. Two days ago the Governor released language and public agencies (CSAC, League of Cities, RCRC) are working together. Local governments are doing this through a Conference Committee process, which is done on the Budget, but has not been done on a regular bill. Following the conference report, both houses will vote on that bill.

Ms. Lange stated that right before the Legislature adjourned for the summer recess there was a lot of activity around three initiatives: soda taxes, lead paint liability, and personal privacy. All of them have been pulled from the November ballot. At the same time, SB1 (a repeal of Prop 6) continues forward for the November ballot. Finally, both Gavin Newsom and Diane Feinstein are up high in the polls over their opponents.

Ms. Lange reported that SB 1047, regarding Medi-Cal Rates for rural counties, was referred to the budget process where it could be considered along with other potential actions to improve the Medi-Cal program.

Finally, Ms. Lange pointed out that the Governor's approval of ongoing new expenditures, outside of the University of California and CalWORKS, was limited to \$50 million, although there were many one-time expenditures.

Affordable Care Act (ACA)

Kari Brownstein, Administrative Officer, reported there are no new ACA repeal bills or other federal actions to report. The ACA tax penalty for failure to purchase health coverage is going away in 2019. With this change, Covered California is projecting that 262,000 covered persons, mostly younger healthy persons, will drop coverage next year. Robert Ducay reported that a Council on Healthcare Delivery Systems was established, composed of 5 members appointed by the Governor and Legislature, and the Council will prepare a plan for a unified healthcare financing system by 2021.

Ms. Lange stated that Gavin Newsom has a set of big ideas, including ones in the health care arena. So, if he is elected Governor, it is anticipated Mr. Newsom will make proposals to move toward universal health coverage.

Report on Board Member Elections

Ms. Brownstein reported that Sanjay Bugay was elected to fill the open Social Services Director position and Robert Ducay, Assistant Secretary, was appointed to the Board to represent the State Health and Human Services Agency.

Appointment of Board Member to Eligibility Committee

Ms. Wagenknecht invited nominations for a Board Member to serve on the Eligibility Committee. This matter was deferred to the October Board meeting agenda.

Conflict of Interest Code

Cathy Salenko, CMSP General Counsel, reported that every two years, the law requires the Board to adopt a Conflict of Interest Policy. Ms. Salenko recommended that the Governing Board's current policy needs no changes, and she recommended that the Board re-approve the existing Conflict of Interest Policy.

ACTION MSC: Governing Board approve the current Conflict of Interest Code and direct the Administrative Officer to notify the FPPC regarding the Board's approval of the code.

APPROVED	Votes:	Aye	8
		Nay	0

Local Health Systems Development Grant Program

Alison Kellen, Program Manager, provided background information on the Local Health Systems Development Grant Program. The grant program's Request for Proposals (RFP) was based on the RFP for the prior Health Systems Mini Grants program, and

was revised to include an innovations component and to require a 20% in-kind contribution requirement from grantees. During discussion, Patrick Blacklock suggested that equipment be added to the list of covered items.

ACTION MSC: Governing Board approve the proposed Local Health Systems Development Grant Program Request for Proposals (RFP), with the addition of equipment to funded items, and authorize the Administrative Officer to release the RFP.

APPROVED	Votes:	Aye	8
		Nay	0

Ms. Brownstein reported that the Governing Board previously approved establishment of a new Program Analyst position to provide support on various CMSP grant programs and pilot project. Ms. Brownstein described the Program Analyst job description.

ACTION MSC: Governing Board approve the proposed Program Analyst job description and authorize the Administrative Officer to proceed with hiring for the position.

APPROVED	Votes:	Aye	8
		Nay	0

Path2Health Pilot Project

Ms. Brownstein reported that the Governing Board, at its meeting of May 31, 2018, approved development of the Path2Health Pilot Project to expand access to primary care benefit coverage for undocumented adults in CMSP counties with incomes of 0-138% FPL, who are otherwise eligible for pregnancy and emergency-only Medi-Cal. Parameters for the pilot project included:

- Primary care benefit coverage is the same as that provided under the CMSP Primary Care Benefit (PCB);
- Changes to the ISAWS automated welfare eligibility systems (C-IV and CalWIN) are not required;
- Application process for Pilot Project applicants is streamlined;
- Path2Health member enrollment and data collection is structured in a manner that is uniform across all Pilot Project grantees;
- Path2Health benefit administration builds upon existing administrative structure and provides uniform enrollment and claims data that is needed to conduct an effective Pilot Project evaluation;
- Structure of benefit program will allow for program expansion at a future time; and,
- Path2Health name (mark) that is owned by the Governing Board will be reinstated for the new program

Ms. Brownstein then presented the proposed Path2Health Request for Applications (RFA) for release to community health centers (FQHC/RHC/Tribal Health Programs).

During discussion, Mr. Blacklock raised a concern that the RFA needed to more clearly require participating community health centers to provide Path2Health applicants with information about pathways for obtaining documented status. He suggested that community health centers responding to the RFA be asked to propose a strategy for providing information to applicants about the pathways to documentation in their county.

Laura Sheckler, Community Clinic Consortium, stated that their agency has reviewed the draft RFA and has not received feedback that the timeline is too aggressive.

ACTION MSC: Governing Board approve the proposed Path2Health Request for Applications (RFA) with an additional requirement under Section VIII that asks community health centers to propose how they will inform Path2Health enrollees of the pathways to documented status in the county; and, authorize the Administrative Officer to release the RFA.

APPROVED	Votes:	Aye	8
		Nay	0

Proposed Path2Health Marketing Request for Proposals

Ms. Brownstein reported that CMSP staff have identified specific marketing efforts that staff believe should be carried out for the Path2Health Pilot Project as well as the existing CMSP program including developing an awareness of the Path2Health Pilot Project, update CMSP and Path2Health branding and to refresh the Path2Health and CMSP websites. Ms. Brownstein presented a proposed Request for Proposals (RFP) to solicit marketing and brand management services to support the Path2Health and CMSP programs. Ms. Brownstein reported that these activities were anticipated and funded in the FY 2018-19 Program Budget.

Discussion among Board members ensued. Ms. Sheckler, Community Clinic Consortium, recommended that the Governing Board look at marketing firms that have experience with ethnic media and make sure that marketing materials are in English and Spanish, at a minimum.

ACTION MSC: Governing Board approve the proposed Path2Health Marketing Request for Proposals (RFP) and authorize the Administrative Officer to release the RFP.

APPROVED	Votes:	Aye	8
		Nay	0

Proposed Path2Health Evaluation Request for Proposals

Ms. Brownstein stated the Governing Board's approval of the Path2Health Pilot Project included approval of an evaluation component to assess the effectiveness of the Pilot Project and determine its impacts on enrollees, community health centers, and local health systems. Ms. Brownstein presented a proposed Request for Proposals (RFP) for program evaluation services. Discussion among Board members ensued.

ACTION MSC: Governing Board approve the proposed Path2Health Evaluation Request for Proposals (RFP) with a change that requires evaluators to analyze: 1) the underlying health conditions of program enrollees, their dynamics of care, and their utilization of emergency and other health care services; and, 2) barriers to participation among eligible, but not enrolled, persons, and persons eligible for Medi-Cal, but not enrolled in Medi-Cal. As revised, Governing Board authorize the Administrative Officer to release the RFP.

APPROVED	Votes:	Aye	8
		Nay	0

Proposed Social Interest Solutions Services Agreement

Ms. Brownstein stated that the Path2Health Pilot Project calls for the development of a separate enrollment system that utilizes readily available Medi-Cal enrollment information from applicants. She asked Chris Salmon, IT Systems Manager, to describe the process CMSP staff undertook to assess available enrollment systems and vendors that are qualified to develop and implement an enrollment system for Path2Health. Mr. Salmon briefed the Governing Board on the process undertaken to identify potential vendors, and then outlined the functional requirements and system requirements for the new Path2Health enrollment system.

Ms. Brownstein said that based on the process undertaken, the set of functional and system requirements, and that assessment of firms conducted by CMSP staff, the staff recommended the Governing Board approve a Services Agreement with Social Interest Solutions (SIS) to develop the Path2Health enrollment system. Ms. Brownstein briefly presented the proposed Services Agreement with SIS, and stated that the dollar amount for the new enrollment system was included in the FY 2018-19 budget.

ACTION MSC: Governing Board approve the proposed Services Agreement with Social Interest Solutions for Path2Health enrollment system development, and maintenance; and, authorize the Administrative Officer, with the assistance of the General Counsel, to finalize and execute the agreement, assuming non-substantive changes. If substantive changes need to be made to the approved Services

FY 2017-18 Program Budget Expenditures Year-to-Date

Ms. Brownstein presented a report on year-to-date actual versus budgeted Program expenditures. As of May 31, 2018 there were expenditures of \$5,528,163 (accrual basis). As of June 30, 2018 there were expenditures of \$6,345,433 (accrual basis). The approved Program Budget for FY 2017-18 is \$17,615,232.

FY 2017-18 Administrative Office Budget Expenditures Year-to-Date

Ms. Brownstein presented a report on year-to-date actual versus budgeted Administrative Office expenditures. As of May 31, 2018 there were expenditures of \$1,286,465 (accrual basis). As of June 30, 2018 there were expenditures of \$1,407,924 (accrual basis). The approved Administrative Office Budget for FY 2017-18 is \$1,973,000.

Program Administration

Advanced Medical Management (AMM)

Ms. Kellen reported that AMM is working on integration of the PCB into the Standard CMSP Benefit. This benefit change will take effect September 1, 2018. AMM will be hosting three provider trainings and information about the trainings will be going out to providers shortly. As the Path2Health program is being established, AMM will be involved in setting up systems for the new benefit.

MedImpact

Ms. Brownstein reported that MedImpact is also working on integration of the PCB into the Standard CMSP Benefit. This benefit change will take effect September 1, 2018. As the Path2Health program is being established, MedImpact will also be involved in setting up systems for the new benefit.

Low Income Health Program (LIHP) Transition

Ms. Brownstein reported that a small amount of LIHP receivables for administrative costs and small amount of payment to one hospital is pending.

Public Comments

Mr. Wagenknecht asked for additional public comments. There were no additional public comments.

Mr. Ducay stated that DHCS Director Jennifer Kent requested the opportunity to make a presentation to the Governing Board in October to discuss a potential partnership

between DHCS and the Governing Board for administration of Drug Medi-Cal services, specifically five currently required services, for counties that participate in CMSP. Ms. Kent would like to outline where the gaps in drug treatment services exist and talk about the Governing Board taking on administrative responsibility for administration of the Medi-Cal required substance use disorder treatment benefits for interested CMSP counties. The Governing Board agreed to place that matter on the October 11, 2018 Board agenda.