BOARD OF GOVERNORS

Technical Advisory Committee Meeting Minutes – November 12, 2021

1055 W. Seventh Street, Los Angeles, CA 90017



Members

Richard Seidman, MD, MPH, Chairperson

John Baackes, CEO

Elaine Batchlor, MD, MPH*

Paul Chung, MD, MS

Muntu Davis, MD, MPH*

Hector Flores, MD

Rishi Manchanda, MD, MPH

Management

Santiago Munoz Wendy Schiffer, Senior Director, Strategic Planning

Katrina Parrish, Chief Quality and Information Executive, Health Services James Kyle, MD, Chief of Equity and Quality Medical Director, Quality

Improvement



California Governor Newsom issued Executive Orders No. N-25-20 and N-29-20, which among other provisions amend the Ralph M. Brown Act. Members of the public can hear and observe this meeting via teleconference and videoconference, and can share their comments via voicemail, email or text.

Elan Shultz

Stephanie Taylor, PhD

| AGENDA ITEM/ PRESENTER | MOTIONS / MAJOR DISCUSSIONS | ACTION TAKEN |
|--------------------------------|--|---|
| CALL TO ORDER | Member Richard Seidman, MD, MPH, Chief Medical Officer, called the meeting to order at 2:02 p.m. | |
| APPROVAL OF MEETING AGENDA | The Agenda for today's meeting was approved as submitted. | Approved Unanimously. 7 AYES (Chung, Flores, Manchanda, Munoz, Seidman, Shultz, Taylor) |
| PUBLIC COMMENT | There were no public comments. | |
| APPROVAL OF MEETING MINUTES | The August 5, 2021 meeting minutes were approved as submitted. | Approved Unanimously. 7 AYES (Chung, Flores, Manchanda, Munoz, Seidman, Shultz, Taylor) |

| AGENDA ITEM/ PRESENTER | MOTIONS / MAJOR DISCUSSIONS | ACTION TAKEN |
|---------------------------|---|--------------|
| CHIEF EXECUTIVE | (Member John Baackes, Chief Executive Officer, joined the meeting at 2:08 pm.) | |
| OFFICER UPDATE | Member Baackes gave the following report: | |
| | The Medi-Cal managed care plans are having to absorb a host of changes on January 1, one being CalAIM. For the last six years there has been a demonstration called whole person care and L.A. Care has also been involved in a program called Health Homes for the past 2.5 years. Demonstrations are coming to an end on December 31, the state is installing new programs. The programs are called Enhanced Care Management and Community Supports. They are aimed at the most vulnerable members. They require addressing social determinants of health that make it difficult for them to respond to treatment and get healthier. They all roll into place on January 1. State colleagues have been scrambling to provide details on rates. That puts pressure on L.A. Care to do work in a compressed period, but L.A. Care is ready. | |
| | Another big change is the prescription drug carve out. The state has taken the prescription drug benefit out of plans benefits package. L.A. Care opposes this decision, because it believes in integrating care. Prescription drugs are an important roll in managed care plans. By January 1, all Medi-Cal beneficiaries should have received card that will cover their prescription drugs. These members can't call L.A. Care to get help in processing prescriptions. If anyone has issues they will call L.A. Care not the vendor. He noted that there is an ethical issue on who was elected as the vendor. | |
| | The pandemic suspended redetermentations for Medi-Cal. The usual cohort of 30k to 40k members falling off has been suspended. This has caused enrollment to rise. About 70% of the Medi-Cal market is an L.A. Care member. He expects this to remain until the public health emergency is lifted. L.A. Care has about 103k Covered California members. In L.A. County, L.A. Care is the least expensive. Member Baackes stated that when the public health emergency is declared over. It'll be almost two years since they were suspended. He hopes they ignore the past and people will be redetermined based on current status. About 60% of redetermentations are done automatically, because of arrangements for government agencies to share data. | |
| | Member Ilan Shultz asked Member Baackes if L.A. Care has any concerns that the Department of Social Services may not be prepared to process redterminations. Member Baackes responded that Antonia Jimenez, <i>Director, Los Angeles County Department of Public Social Services (DPSS)</i> , is part of L.A. Care's Board and has been very accessible, the Medi-Cal team has been actively working with DPSS. | |

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| CHIEF MEDICAL OFFICER REPORT | Member Richard Seidman, MD, MPH, Chief Medical Officer, gave the following updates: Lead Screening Another state priority is to improve lead screening. The L.A. Care Quality Improvement (QI) Department conducted an analysis looking at the geographic distribution by zip code of increased lead levels among our members. This led to identifying a lead "hotspot" in the community in the 90011 zip code in Southeast LA. Based on the information, QI reached out to the Los Angeles County Department of Public Health (LAC DPH) Childhood Lead Poisoning Prevention Program. County DPH runs a lead abatement, a case management and education program called Lead Free Homes in LA. As a result of this analysis and outreach, L.A. Care will be collaborating with Public Health on social media to promote their hotline and lead abatement program in high risk zip codes, including 90011. L.A. Care also sends a list of members not yet screened for lead to their doctors, to encourage efforts to get them in for lead screening and routine care they may need such as Well Child Care visits and immunizations. James Kyle, MD, MDin, Chief of Equity and Quality Medical Director, Quality Improvement, stated that L.A. Care was prompted to look into lead screening was abetment. L.A. Care looked for a hotspot and found one. L.A. Care went across the county to conduct lead abetment. Some homes and buildings across the county will be painted to make them safer for families and children. Member Paul Chung, MD, asked Dr. Kyle how much effort logistically was needed. He | |
| | asked if it was labor intensive. Dr. Kyle responded that it was a straight forward effort. The data is available and was pulled based on zip code. | |
| DIVERSITY, EQUITY, AND INCLUSION PRESENTATION | James Kyle, Chief of Equity and Quality Medical Director, Quality Improvement, gave a presentation on Diversity, Equity, and Inclusion (A copy of the presentation can be obtained from Board Services.). | |
| | Equity Council Goal and Internal Structure The goal of the Equity Council Steering Committee is to address and improve equity, fairness, and inclusion. • Equity Council Steering Committee • L.A. Care Team Council • Provider & Vendor Council | |

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|---------------------------|---|--------------|
| | Member Equity Council (staff) Consumer Equity Council (members) | |
| | Updates Provider & Vendor Equity Council • Small business day – Wednesday, August 18 • Vendor Diversity L.A. Care website | |
| | Member Equity Council Creating goals for next year. As last year, focusing on member voice, social determinants of health, health plan as community partner, systematic change and equitable health Consumer Health Equity Council provided feedback on food security programs and Teladoc/telehealth – integrating member feedback | |
| | L.A. Care Team Council Bystander training by Asian American Advancing Justice. L.A. Care Officers received training on Anti-Racism & Cultural Humility Training for Healthcare Leaders by Drs. Jann Murray-Garcia and Victoria Ngo Expanding training to Directors and above | |
| | Equity Council Steering Committee 100% completion of enterprise-wide Diversity, Equity and Inclusion training by all staff Biases, micro-aggressions, workplace diversity Working on DEI enterprise goals for L.A. Care functional areas: Health Services, Product, Operations, Finance | |
| | Introduced Provider Equity Award that measures and rewards provider performance on health equity efforts. Focus on reducing health disparities and addressing the social determinants of health, specifically food security. Award includes acknowledgement at the annual L.A. Care provider recognition ceremony, publication in provider newsletters, and other ways to publicly recognize the awardee. No payments are included for this inaugural year. | |

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| | Hosted a film screening of the documentary Black Men in White Coats followed by a panel discussion. | |
| | Member Stephanie Taylor, <i>PhD</i> , stated that she is at a loss for words when she is asked "How can they address these disparities?" First they must be measured. She suggested teaming up with L.A. County Department of Public Health and targeting interventions in specific areas depending on the issue. Dr. Kyle responded that L.A. Care is focusing on place-based strategies. Looking at hotspots and identifying the issue of that community. | |
| | Member Hector Flores, MD, stated that it is an opportunity to influence the larger body across the state and do a concerted effort with plan partners in L.A. County to pull resources so that L.A. Care is not taking on all the responsibility. | |
| COVID-19 VACCINE RESPONSE PLAN UPDATE | Alexi Li, MD, Deputy Chief Medical Officer, Health Services, and Misty De Lamare, Director, Communications, gave an update on L.A. Care's COVID-19 Vaccine Response Plan (A copy of the presentation can be obtained from Board Services.). | |
| | DHCS Vaccination Program Rules Program Goal (per APL 21-010) Close the vaccination rate gap between Medi-Cal managed care members (49%) and all Californians (74%)* | |
| | Populations of Focus Medi-Cal managed care (MCLA, Plan Partners, CMC) Homebound/unable to travel Age 50-64 years with >1 chronic condition Persons of color Youth 12-25 years 3 Measurement Dates (Milestones) October 31st, 2021, January 2nd, 2022, March 6th, 2022 Data source is vaccinations reported through the California Immunization Registry (CAIR) | |
| | Vaccination Rate: L.A. Care Baseline (August 31, 2021) and Milestone 1 (October 31, 2021) | |

| AGENDA ITEM/ PRESENTER | MOTIONS / MAJOR DISCUSSIONS | | | ACTION TAKEN | |
|---------------------------|---|------------|----------------------------------|---------------------|--|
| | Table 1: L.A. Care Medi-Cal Vaccination | Rates Comp | pared to Los Angeles Co | inty and California | |
| | Total 12+ Popula | | Population at least | Vaccination Rate | |
| | L.A. Care Medi-Cal 1,827 | | artially Vaccinated 1,110,185 | 60.7% | |
| | Los Angeles County 8,620 | | 6,977,943 | 80.9% | |
| | State of California 33,330 | ,857 | 26,320,335 | 79.0% | |
| | | | Baseline Rate | Current Rate | |
| | Total 12+ Medi-Cal Membersh | in _ | 55.5% | 60.7% | |
| | Ages 12-25 Medi-Cal Membersh | _ | 49.9% | 56.9% | |
| | Ages 26-49 Medi-Cal Membersh | _ | 51.1% | 56.3% | |
| | Ages 50-64 Medi-Cal Membersh | _ | 64.2% | 67.9% | |
| | Ages 65+ Medi-Cal Membership Black or African American American Indian or Alaskan Native | | 69.0% | 71.9% | |
| | | | 36.5% 48.7% | 42.6% 54.1% | |
| | Homebound | itive | 64.5% | 70.1% | |
| | Ages 50-64 w Chronic Disease | | 66.9% | 72.6% | |
| | Vaccine Incentive Program Collaborative Efforts and Highlights IEHP Partnership Jaime Camil PSA Pharmacy & Provider Incentives Department of Public Health & UCLA (Antelope Valley) Homebound Vacciantions The Rams partnership LAUSD Vaccine Clinics Collaboration with Health Net High Touch Engagement, Faith-based, BIPOC organizations, Food banks Vaccine Clinic Support for CBOs, Schools, Colleges, Faith-Based Organizations Direct Member Incentives Targeted Equity Initiatives for Black/African Americans Member Material, Call & Social Media Campaigns | | | | |

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| | Social Media TV KTLA Interview Opportunity: Jaime Camil as a guest to KTLA News Radio Jose 97.5 (Spanish) Viva 103.1 (Spanish) KWKW 1330am (Spanish) KTNQ 1020am (Spanish) KTNQ 1020am (Spanish) Sample African-American Outreach Efforts Target and prioritize South LA and Antelope Valley providers and initiatives Seek consultants focused on Black/African-American communities that are endorsed by Equity Council Steering Committee. Identify Micro influencers, faith-based leaders, and groups focused on vaccinated BAA populations in Public Health and Provider Incentives and Collaboration Public Health Departments Sponsorships Grants Messaging/Canvassing FQHCs: ~\$2 Million Grant Support Provided Learning collaborative Unvaccinated list/Vaccine Incentive Program Pharmacy Phase 1: 10 retail pharmacies (target ~25K unvaccinated members) LA County Department of Health Services In discussion Private Providers High volume practices Unvaccinated list and vaccine incentive program Next Steps | |

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| | Member Incentives | |
| | Provider (DHS, Pharmacy and Private Providers) Incentives | |
| | Messaging | |
| | Collaboration with CBOs, Schools etc. | |
| | Homebound vaccine efforts | |
| | Track efforts | |
| ADJOURNMENT | The meeting was adjourned at 3:57 p.m. | |

Respectfully submitted by: Malou Balones, *Board Specialist III, Board Services* Victor Rodriguez, *Board Specialist II, Board Services* Linda Merkens, *Senior Manager, Board Services* APPROVED BY:

Richard Seidman, MD, MPH, Chairperson

2/24/2022 | 2:36 PM PST

Date Signed

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Chief Medical Officer L.A. Care Health Plan

Security Level: Email, Account Authentication

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| Operating Systems: | Windows2000? or WindowsXP? |
|----------------------------|--|
| Browsers (for SENDERS): | Internet Explorer 6.0? or above |
| Browsers (for SIGNERS): | Internet Explorer 6.0?, Mozilla FireFox 1.0, |
| | NetScape 7.2 (or above) |
| Email: | Access to a valid email account |
| Screen Resolution: | 800 x 600 minimum |
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