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Utilization Management Committee Meeting Minutes

December 15, 2023, 11:00 AM – 12:30 PM

Teams

Member Name and Title	Present	Member Name and Title	Present
Steve O'Brien, Chief Medical Officer		Hope Desrochers, Manager, Outpatient UM	X
Richard Golfin, Chief Compliance Officer		Jaymelee Chambers-Skondin, Manager, UM LTC	X
Tiffany Cheang, Chief Analytics Officer		Jennifer Karmelich, Director, Quality Assurance	X
Allison Lam, Senior Director, Health Care Services	X	Jorge Rosales, Manager, Case & Disease Management	X
Alma Pena, Sr. Manager, G&A	X	Judy Rosas, Sr. Manager, Member Services	
Amani Sattar, Executive Assistant	X	Katherine Goodwin, Supervisor, Health Plan Audits	
Amy Stevenson, Clinical Manager, Enhanced Care Management		Kimberly Glasby, Director, Long Term Services & Supports	X
Andrea DeRochi, Manager, Behavioral Health	X	Kisha Gerena, Manager, Grievances & Appeals	
Annie Lam, Manager, Provider Services Call Center		Laura Grossman-Hicks, Sr. Director, BH Services	X
Beverly Juan, Medical Director, Community Health	X	Lily Hunter, Director, Social Determinants of Health	X
Brittany Nielsen, Executive Assistant		Linda Ayala, Director, Population Health & Equity	
Carla Healy-London, Manager, Inpatient UM		Loc Tran, Manager, Access to Care	
Cecilia Gomez, Sr. Manager, Provider Services		Marie Broadnax, Manager, Regulatory Affairs & Compliance	X
Darryl Crowder, Director, Provider Relations and Contracting		Michelle Stott, Senior Director, Quality	X
Donna Carey, Medical Director, CM	X	Michelle Findlater, Director, Utilization Management	X
Farashta Zainal, Manager, Quality Improvement	X	Nancy Pun, Sr. Director, Analytics	
Gia Degrano, Senior Director, Member Services		Peter Currie, Senior Director, Behavioral Health	X
Gil Duran, Manager, Population Health & Equity		Rosalia Mendoza, Medical Director, Utilization Management	X
Grace St. Clair, Director, Compliance		Sanjay Bhatt, Senior Medical Director	X
Heather Wanket, Clinical Manager, ECM	X	Sanja Bedi, Healthcare Services Specialist	X
Helen Lee, Senior Director, Pharmacy Services	X	Stephen Williams, Supervisor, OP UM	X

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I. Call to Order/ Introductions	A. Lam	The meeting was called to order by Allison Lam at **11:00 am**		
II. Review and Approval of minutes	A. Lam	The UM Committee Minutes from **October 27, 2023,** were approved electronically by a quorum of the committee prior to the meeting.	UMC_Meeting_Minutes_10.27.23.pdf	**Approved via e-vote:** 11/3/23 – 11/6/23
III. Policies and Procedures	L. Hunter	• CM-001 • CM-021 • CM-022 • CM-023 • CM-024 • CM-025 • CM-026 • CM-027	PP Summary of Changes_12.15.23.pdf	**Vote to Approve:** None opposed: The policies will be finalized as approved and moved forward to QIHEC
IV. Monitoring of UM Operational Activities	A. Lam	• A Board Certified Consultant used whenever a physician reviewer of the appropriate specialty is not available to make a decision on a denial or appeal, including: High Complexity or Specialized Procedures and Services, Insufficient Levels of Certification and Conflict of Interest		

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A. Use of Board-Certified Consultants		• Alameda Alliance for Health contracts with Advanced Medical Review (AMR) to provide independent medical review services from Board Certified Consultants.	Use of Board Certified Consultants.p AMR Reviewer Details.xlsx	
B. TAT: OP, IP, LTC, Rx	C. Healy-London H. Desrochers J. Chambers-Skondin H. Lee	• **Outpatient** ○ By Count: Outpatient Authorizations for Q3 of 2023 ▪ Routine Non-Urgent Pre-Service = 8,364 ▪ Routine Non-Urgent Pre-Service, Extension Needed = 21 ▪ Urgent Pre-Service = 2017 ▪ Urgent Pre-Service, Extension Needed = 1 ▪ Post- Service / Retrospective = 644 ○ Outpatient TAT Requirements for Q3 of 2023 ▪ Routine Non-Urgent Pre-Service = 99% ▪ Routine Non-Urgent Pre-Service, Extension Needed = 100% ▪ Urgent Pre-Service = 98% ▪ Urgent Pre-Service, Extension Needed = n/a ▪ Post- Service / Retrospective = 100% ▪ Standing Referrals = n/a • **Inpatient** ○ By Count: Inpatient Authorizations for Q3 of 2023 ▪ Concurrent = 3934 ○ By Request Type: Inpatient TAT for Q3 of 2023 = 95%	TAT_OP.pdf TAT_IP.pdf TAT_LTC.pdf TAT PAD_Rx.pdf TAT_Rx.pdf	

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		• **LTC** ○ By Count: LTC Authorizations for Q3 of 2023 = 1060 ○ By Request Type: LTC TATs for Q3 of 2023 = 99% • **Rx** ○ Q3 of 2023 = 100% ○ Q4 of 2023 = 100%		
C. Under Utilization	R. Mendoza	• **Unused Authorization Services** ○ MidCycle Not Utilized Auths = none ○ Past MidCycle Not Utilized Auths = 449 • **Specialty for Unused Authorizations** ○ Specialty Problems: Oncology > Ear Nose and Throat > Neurology ○ Oncology Diagnoses ▪ Breast Cancer = 16 ▪ Prostate Cancer = 6 ○ By Specialty: Urologist, ENT, Pulmonary, Ortho, Heme / Onc • **Affiliation for Unused Authorizations** ○ UCSF Benioff Childrens Hospital = 1 ○ Sutter = 4 ○ SHC = 6 ○ UCSF Health = 78	Under Utilization.pdf	
D. OON	R. Mendoza	• Alliance OON Utilization = 289	OON.pdf	

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		• CHCN erroneously assigned 186 OON Diagnostic Radiology
		• Kaiser facilities continue to be a high OON ED point of service (OON Hospitalization is driven by Emergency Room Utilization)
		• Kaiser also represents the largest OON IP Hospital Utilization
		• Next Steps
		• Multi-disciplinary OON Data Workgroup
		  ○ Clean up erroneous reporting (UM/Analytics)
		  ○ Continued collaboration with PR for network specialty needs & Delegate needs
		  ○ Underway: CHCN ETLmapping for OON reasons/ Auth Type (IT/UM/CHCN)
		  ○ Project: Validation of Auth Level of Care (servicetype) categories, CPT alignment needed in 2024 (IT/ Analytics)
		  ○ Continued expansion of LTC SNF network/County enrollment alignment (LTC/PR)		

E. Speech Therapy DHCS 1.2.1	H. Desrochers	• For The Speech Therapy DCHS CAP from January – November 2023, there were no members under the age of 21 that were denied for speech therapy services. ○ DHCS CAP finding from annual audit is from 2020. DHCS has dropped this requirement of reporting, however current reporting is for ongoing monitoring post correction as request from Dr. O' Brien; Report set to end 12/2023	DHCS_Speech Therapy.pdf	

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F. Transportation DHCS	J. Rosales	• PCS Forms ○ AAH analytics created report to track PCS form status for member on Date of Trip ○ AAH Compliance Department working with AAH CM Department on year-round PCS audits. • Lyft RideShare Pilot ○ Pilot results presented to AAH Leadership • Delegation Audits ○ AAH Compliance Department waiting for response from Modivcare for annual delegation audit. • Contract with subcontractor ○ Vendor Management working on updated contract with subcontractor Modivcare	CM Report.pdf	
V. Activities to Improve Member Experience **A. Case Management Report**	J. Rosales	• **Patient Volume** ○ Increase in Complex ○ Care Coordination Cases at baseline ○ Transitional Care Services (TCS) Cases at baseline • **Internal Audit** ○ Q2 Audit ResultsReviewed Complex cases from Q3 2023, using NCQA auditing tool ○ Assessment Factors – 96% ○ Care Plan Factors – 93% ▪ Conclusion: More regular auditing / feedback to team regarding CCM cases effective.	CM Report	

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B. HRA / HIFMET	J. Rosales	• **DHCS 2021 Audit Findings** ○ Plan received DHCS' CAP notification dated August 24, 2021 ○ Plan's CAP response was submitted on September 23, 2021 ○ CAPs have been put in place for the DHCS CM Finding 2.1.1 HRA Timely Completion ○ DHCS has not requested any new follow-up items regarding this finding since October 2021 ○ CM has stabilized this area and continues to monitor for compliance, this update is being removed as a standing reporting item. • We will retire the HRA/HIFMET reporting at UMC going forward.	CM Report	
C. Grievance and Appeals Report	A. Pena	• Summary of Appeals - MCAL ○ There were 11 appeals initially denied for medical necessity during the reporting period: ▪ 10 overturned/approved all based on medical necessity. ▪ 21 Upheld/Denied ○ There were 29 appeals initially denied for out-of-network request during the reporting period: ▪ 5 overturned/approved ▪ 24 Upheld/Denied ○ There were 5 appeals initially denied for not being a covered benefit during the reporting period: ▪ 2 overturned/approved ▪ 3 Upheld/Denied • Summary of Appeals - IHSS	G&A_MCAL_Q3.pdf G&A_IHSS_Q3.pdf	

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		○ There were 4 appeals initially denied for medical necessity during the reporting period: ▪ 1 Overturned/Approved ▪ 3 Upheld/Denied ○ There were 6 appeals initially denied for Out-of-Network during the reporting period. ▪ 6 Upheld/Denied ○ Overturn Rate: The overall overturn rate was within our goal of 25.0% or below.		
D. CalAIM ECM	L. Hunter	• As of November 2023, there are currently 1495 enrolled members. ○ 7.6% of eligible members are enrolled in the ECM program. ○ 359 members have completed the ECM Program since January 2022 • Admits/1000 (+16) and BedDays/1000 (+5) were higher in ECM members that were enrolled and completed the program. • Average LOS (-0.2) decreased among ECM enrolled members (5.6) when compared to the eligible members population (5.8) • ER Visits/1000 (-1000) and Avoidable ER Visits/1000 (-404) were lower in ECM members that were enrolled and completed the program. • Readmits/1000 were lower at 152 (-32) among enrolled and completed members of the ECM program Readmission rate: ○ Enrolled: 24.6% ○ Unenrolled: 30.7%	CalAIM_ECM.pdf	

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E. CalAIM CS	L. Hunter	• Housing ○ Majority of CS Auth requests are for Tenancy Sustaining ○ Working closely with HCSA to create concrete graduation criteria. • Asthma ○ Conversation to expand to adults continues. • Meals ○ Recipe 4 Health – All In – Went live 9/1/22. ○ Spike in Authorizations in September • Medical Respite ○ Cardea and Lifelong are slow, but consistent. ○ Partnering with Lifelong to improve authorization and claims submissions. ○ BACS very low enrollment in CS due to other bed contracts	CalAIM_CS.pdf	
F. DUR Report	H. Lee	• Q3 of 2023 ○ July = 223 ○ August = 228 ○ September = 203	DUR Report_Q3.pdf	
G. Rx IRR	H. Lee	• Rx IRR is at 100%	Rx_IRR.pdf	

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VI. Adjournment	A. Lam	The meeting was adjourned at **3:03 pm**		**Next Meeting:** January 26, 2024 at 1:30 PM

Meeting Minutes submitted by: DocuSigned by: Amani Sattar 1515265B2F7F4DC... **Date:** 01/31/2024
Amani Sattar,
EA to the CMO

Approved by: DocuSigned by: Allison Lam 8E7713C4669F403... **Date:** 01/31/2024
Allison Lam,
Sr. Director, Health Care Services

Approved by: DocuSigned by: Rosalia Allan Mendoza, MD 39B79088420042E... **Date:** 01/31/2024
Rosalia Mendoza, MD
Medical Director, Utilization Management

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