ALAMEDA ALLIANCE FOR HEALTH BOARD OF GOVERNORS REGULAR MEETING

March 13, 2020 12:00 pm – 2:00 pm Regular Board Meeting (conference Call) 1240 S. Loop Road, Alameda, CA

SUMMARY OF PROCEEDINGS

Board of Governors on Conference Call: Dr. Evan Seevak (Chair), Rebecca Gebhart (Vice Chair), Dr. Noha Aboelata, Aarondeep

Basrai, Dr. Rollington Ferguson, Marty Lynch, Feda Almaliti, Delvecchio Finley, David B. Vliet, Dr. Kelley Meade

Excused: Wilma Chan, Nicholas Peraino, Dr. Michael Marchiano

Alliance Staff Present: Scott Coffin, Dr. Steve O'Brien, Gil Riojas, Tiffany Cheang, Diana Sekhon, Sasi Karaiyan, Anastacia Swift,

Christine Corpus, Sandra Galindo, Jeanette Murray, Matt Woodruff

Guest Speakers: None

AGENDA ITEM SPEAKER	DISCUSSION HIGHLIGHTS	ACTION	FOLLOW UP	
1. CALL TO OR	DER			
Dr. Seevak	The regular board meeting was called to order by Dr. Seevak at 12:14 PM.	None	None	
2. ROLL CALL				
Dr. Seevak	A telephonic roll call was taken of the Board Members, and a quorum was confirmed.	None	None	
3. AGENDA AP	PROVAL OR MODIFICATIONS			
Dr. Seevak	Diane Sekhon will be updating the Board of Governors on the discussion held at the Compliance Advisory Committee, held earlier in the day.	None	None	
4. INTRODUCTIONS				
Dr. Seevak	Introduction of Board Members, staff, and guests was completed.	None	None	

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SPEAKER	DISCUSSION HIGHLIGHTS	ACTION	FOLLOW UP

5. CONSENT CALENDAR			
Dr. Seevak	Motion to approve the February 2020 Board of Governors Meeting Minutes.	Motion: M. Lynch Second: D. Vliet	None
		Vote: Yes	
		No opposed or abstained.	
6. a. BOARD ME	EMBER REPORT – COMPLIANCE ADVISORY COMMITTEE		
D. Sekhon	The Compliance Advisory Committee met telephonically on March 13, 2020 and discussed the below four (4) compliance dashboards. Diana Sekhon gave the following updates:	Informational update to the Board of Governors. Vote not required.	
	 2020 DMHC Medical Services Audit (follow up from 2018 audit with 12 deficiencies): Created a new dashboard to review audit items, added to the existing Corporate Compliance Dashboard for tracking and resolution. Self-identified seven potential compliance issues. Three of these were with UM – which the team is working on being more clear and concise. The Alliance's goal is to resolve issues self-identified in preparation for the October 2020 audit. 2019 DMHC Financial Audit: Audit started in December 2019 and the Alliance received preliminary audit report on 2/13/20. The audit includes five findings; three related to claims, no finance issues found. Examples of these findings are payment accuracy, unclear denial reasons or inappropriate denials, and one issue with mailroom control of stamping and counting each claim. The Alliance will be providing additional information for DMHC's consideration before the final report. 		

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	 2019 DHCS Medical Audit from – June 2019: 25 of 28 Findings are completed; three in progress, Alliance is coordinating with DHCS to close out all items. 2018 DHCS Medical Audit – June 2018: All 38 Findings completed; 35 of these validated; three remain open to validate. Future Audits: DHCS Annual Medical Audit – June. DMHC Medical Routine Audit – October 12th. NCQA Accreditation Review – June 1-2, will be submitting documentation in April. 		
6. b. BOARD ME	EMBER REPORT – FINANCE COMMITTEE		
Dr. Ferguson	The Finance Committee met telephonically on Tuesday, March 10 th , 2020. Finance Issues: • Medi-Cal membership continues to decline by 1,200 to 1,800 per month. • TNE remains around 600 percent. • Discussion related to additional medical costs associated to the COVID-19 virus. The Federal Government and California State are meeting about this issue but no details are available.	Informational update to the Board of Governors. Vote not required.	

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7. CEO UPDAT	E	
7. CEO UPDAT S. Coffin	 a) COVID-19 Outbreak Preparedness, Readiness, and Response actions (page 29): Alliance has taken immediate steps to identify and prepare staff for transition into remote work environments to comply with the shelter-in-place order. Communications is important, we are communicating with Alameda County Public Health, California Department of Public Health, and the Centers for Disease Control. The CEO appointed an Incident Commander in February to organize the efforts, and manage the communications with external partners and staff. The Alliance's Provider Services field staff have been called into the office to support the providers telephonically, and the provider portal is available for online authorizations. The Alliance member portal is available and up-to-date, and members may contact the Member Services Department, Monday through Friday, 8AM to 5PM. As of March 16th, the Alliance temporarily suspended the walk-in service for members at the corporate headquarters. Announcements were posted online, and a message is being broadcasted to members calling the service center. Question: Are you coordinating with Alameda County Agencies? Answer: Dr. O'Brien - Alameda County is on point for Public Health, we 	Informational update to the Board of Governors. Vote not required.
	coordinate with them. Question: Is there a code to use for Telephonic/remote (not Telehealth) visits? Answer:	

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	 Effective Monday, March 16th thru June 30 any contracted provider can have a telephonic call (not Video) and use Code 99442 - Service 11 which is a Medicare Code we have adopted for this occasion since Medi-Cal does not have a code for this. This service is available to active Alliance members. b) Department of Health Care Services (DHCS) - CalAIM Updates: Formal name change from Medi-CAL Healthier California for All (MCHCA) to CalAIM. c) Quality Improvement and HEDIS: Tiffany will report on HEDIS during Staff Updates. 		
8. a. MEDI-CAL S. Coffin	Scott Coffin explained the following two documents: a) CalAIM Timeline (page 40). • The CalAIM deliverables were explained to the Board of Governors, and implementation dates were reviewed. • This document is also being used in meetings with the county and other safety-net partners. b) CalAIM Activity Report (page 42) • The Activity Report is a tracking tool dashboard to help keep the Board informed of Alliance CalAIM activities, and contains the milestones, status, and outcomes. • This report will transform into a dashboard report for the Board Members, similar to our corporate operations dashboard.	Informational update to the Board of Governors. Vote not required.	

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9. a. BOARD BU	Question: • How does the timeline change due to the COVID-19 situation? Answer: • The DHCS issued a statement earlier this week, stating that dates have not officially changed, and the timeline is current. JSINESS – REVIEW AND APPROVE MONTHLY FINANCIAL STATEMENTS		
G. Riojas	 Gil Riojas gave the following Finance updates: Net Income and Enrollment (Page 60): For the month ending January 31, 2020, the Alliance had enrollment of 246,461 members, a Net Income of \$449.000 and Tangible Net Equity is 602%. For the year-to-date, the Alliance recorded a Net Income of \$15.4M. Our enrollment has decreased about 12,000 members since June 2019. SPDs, Duals, and Group Care Program remain flat. Reductions continue in the Adult and Child and Optional Expansion categories of aid are consistent over the last 12 months. Revenue: For the month ending January 31, 2020, we reported \$2.0M more than what was budgeted. The largest variances are due to higher than anticipated Prop 56 Revenue, and Behavioral Heath Therapy Supplemental Payments. Medical Expense: For the month ending January 31, 2020, actual Medical Expenses were \$73.0M vs. our budgeted amount of \$72.9M. For the year-to-date, Medical Expenses are \$521.8M vs. budgeted amount of \$514.7M. Medical Loss Ratio: For the month ending January 31, 2020, the MLR was 93.3% vs year-to-date of 92.2%. Due to COVID-19, the MLR is forecasted to increase. 		

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	Administrative Expense: For the month ending January 31, 2020, Actual Administrative Expenses were on target with the Budgeted Administrative Expense. Actual Administrative Expense year-to-date is \$31.3M vs budgeted \$35.3M. The second half of the year as we begin delayed projects and hiring hence, the administrative budget should increase and be closer to the actual budgeted amount. Other Income / (Expense): As of January 31, 2020, our YTD interest income from investments is \$3.2M, and YTD claims interest expense is \$192,000. A meeting is scheduled with the Alliance investment manager to talk about strategy of the Alliance investments due to COVID-19. Tangible Net Equity (TNE): Tangible net equity results continue to remain healthy, and at the end of January 31, 2020, the TNE was reported at 602% of the required amount, with a surplus of \$163.6M. Cash Position and Assets: For the month ending January 31, 2020, we reported \$218.3M in cash; \$146.5M is uncommitted cash. Our current ratio is above the minimum required at 1.95 compared to the minimum of 1.0.	Motion: Dr. Seevak Second: All Board Motion passed by roll call. Vote: Yes	
		No opposed or abstained.	

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9. b. BOARD	BUSINESS – REVIEW AND APPROVE FISCAL YEAR 2020 SECOND QUAR	TER FORECAST
G. Riojas	The Fiscal Year 2020 Second Quarter Forecast was reviewed. Gil Riojas presented the second quarter forecast (page 98): Forecast versus budget results. Medi-Cal Loss Ratio by line of business. Medi-Cal medical loss ratio by Category of Aid. Staffing. Question: What is the extra cost to the Alliance to have employees work at home? Answer: The Senior Leadership has been discussing a strategic plan for transitioning into a remote working environment and has sufficient budget to cover the costs. Question: What is the security rick with employees working from home? Answer: The Alliance has contacted our insurer and we have insurance coverage for such events. Employees will be connecting into the corporate network through the same infrastructure they use, and it is the same as if they were working from the office. Gil announced Barbara Granieri, the Alliance's Controller for the past 5 years would be leaving the Alliance. Barbara was acknowledged and thanked for her years of service at the Alliance.	Motion: Dr. Seevak Second: F. Almaliti Motion passed by roll call. Vote: Yes No opposed or abstained.

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9. c. BOARD AGREEMENT	BUSINESS – RESOLUTION NO. 2020-01 TO TERMINATE THE ALLIANCE J	OINT POWERS AUTHORITY
S. Coffin	 Resolution No. 2020-01 To Terminate The Alliance Joint Powers Authority (JPA) Agreement and Notice of Termination (page 45 - 53). Scott Coffin explained in detail the Notice of Termination letter that would be delivered to the Alameda County Board of Supervisors with Resolution No. 2021-01. Motion to authorize the CEO to execute a notice of termination for the agreement between the Alameda Alliance for Health and the Alameda County Social Services. S. Galindo highlighted the activities related to terminating the JPA in 2020:: The Notice of termination letter would be hand-delivered to the Alameda County Board of Supervisors by Monday. Completion of DMHC & DHCS regulatory compliance filings. Amendment to existing Alliance Bylaws, and voting by the Board of Governors to recommend to the Alameda County Board of Supervisors for approval. Removal of JPA from financial reports and other public materials. 	Motion: S Coffin Second: D. Finley Motion passed by roll call. Vote: Yes No opposed or abstained.
10. a. STAND	ING COMMITTEE UPDATES – PEER REVIEW AND CREDENTIALING COMM	ITTEE
Dr. O'Brien	The Peer Review and Credentialing Committee (PRCC) was held on February 18, 2020. Initially Credentialed Providers: 3 Initial. Re-credentialed Providers: 46.	Informational update to the Board of Governors. Vote not required.

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SPEAKER	DISCUSSION HIGHLIGHTS	ACTION	FOLLOW UP

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T. Cheang	 HEDIS Update Measurement Year (MY) 2019. An overview of the presentation was presented by Tiffany Cheang (page 176): The presentation consisted of: What is HEDIS (Healthcare Effectiveness Data and Information Set) is a NCQA standard metrics designed to measure quality improvement and performance. Current Status – MMR project collection of medical records for services not captured in the administrative data. DHCS Measure Changes – DHCS introduced the Managed Care Accountability Set (MCAS) and minimum performance level increase. Measure Comparison between MY 2018 EAS to MY 2019 MCAS. Risks and Implications – New MCAs measure set, major system conversion to Epic. Summary of Alliance's HEDIS Performance 2014 – 2019. 	Informational update to the Board of Governors. Vote not required.
Dr. O'Brien	Pediatric Pilot Update An overview of the presentation was presented by Dr. Steve O'Brien (page 144): The presentation consisted of: • Pediatric Strategy: Early & Periodic Screening, Diagnosis & Treatment (EPSDT). • Pediatric health is a priority for Governor Newsom and public health officials statewide • Proposition 56 is the expansion of support for trauma and developmental screening. Alliance Pediatric Pilot Goal is to: • Improve access to EPSDT services,	

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	 Improve Quality of Care, reflected by increased HEDIS scores. Improve connection/understanding of community EPSDT partners. Next year we want to continue with our partners. Lesson learned is when we target immediate specific measures with specific incentives, then our HEDIS scores go up. 		
12. UNFINISHEI	D BUSINESS		
Dr. Seevak	Alliance Next steps:	None	None
	 Will the April Board meeting be held telephonically due to the COVID-19 shelter in place order? Answer: Evan and Scott will review the status of the situation by end of March, and communicate to the Board Members. 		
13. STAFF AD	VISORIES ON BOARD BUSINESS FOR FUTURE MEETINGS		
Dr. Seevak	None	None	None
14. PUBLIC CC	MMENTS (NON-AGENDA ITEMS)	I	
Dr. Seevak	None	None	
15. CLOSED SE	SSION		
Dr. Seevak	The meeting was adjourned at 1:32 pm and the Board entered into a Closed Session.	None	
16. ADJOURNM	ENT		

Respectfully Submitted By: Jeanette Murray
Executive Assistant to the Chief Executive Officer and Clerk of the Board