

## Los Angeles Member Advisory Committee Meeting Minutes

March 3, 2022, 01:30

### Council Members

| Council Members   | Committee Members Absent   | Blues Shield Promise Health Plan   |
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| <ul style="list-style-type: none"> <li>• Member A, Blue Shield Promise Health Plan Member</li> <li>• Member B, Blue Shield Promise Health Plan Member</li> <li>• Member C, Blue Shield Promise Health Plan Member</li> <li>• Member D, Blue Shield Promise Health Plan Member</li> <li>• Member E, Blue Shield Promise Health Plan Member</li> <li>• Anwar Zoueihid – Partners in Care Foundation</li> <li>• Connor Hannigan- Neighborhood Legal Services of LA County</li> <li>• Halina Fardin- Worksite Wellness LA</li> <li>• Jackie Dai- Neighborhood Legal Services of LA County</li> <li>• Margie Harper- National Alliance Mental Illness - Present</li> </ul> | <ul style="list-style-type: none"> <li>• Member F, Blue Shield Promise Health Plan Member</li> <li>• Member G, Blue Shield Promise Health Plan Member</li> <li>• Rigo Saborio- St. Barnabas - Absent</li> <li>• Terrance Hanson replacing Hector Ochoa - Southern California Services for Independent Living (removed "Resource", replaced with "Services")</li> <li>• Richard Ayoub- Project Angel Food – Present</li> <li>• Joann Cannon – Personal Assistance Service Council - Absent</li> </ul> | <ul style="list-style-type: none"> <li>• Sandra Rose – Sr. Director of Community and Provider Engagement</li> <li>• Dr. James Cruz- Interim Chief Medical Officer</li> <li>• Marguerite Womack – Director of Community Engagement</li> <li>• Joycelyn Smart-Sanchez – Sr. Manager, Social Services Management</li> <li>• Patricia Mowlavi - Sr. Director, Finance Analytics</li> <li>• Kari Dixon – Sr. Director, Business Development</li> <li>• Sean O'Brien – Program Director NON-IT</li> <li>• Araceli Garcia - Program Manager, Sr.</li> <li>• Joselito Marquez – Program Manager, Consultant</li> </ul> |

| Topic  | Presenter                    | Decisions/Action items |
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| <p><b>Welcome and Introductions</b></p> <p>Anwar Zoueihid, Vice-Chair, called the meeting to order at 01:32pm</p> <p>Introduced four new committee members:</p> <ul style="list-style-type: none"> <li>• Lisa Cahill - Chief Operating Officer for Pathways LA</li> <li>• Inocencia Zambrano - Promise Member</li> <li>• Marleny Zambrano - Promise Member</li> <li>• Maria Cruz - Promise Member</li> </ul> <p>Introduced new Senior Director of Community and Provider Engagement Sandra Rose</p> <ul style="list-style-type: none"> <li>• Sandra Rose recognizes Araceli Garcia for creating an environment that is inclusive and accessible to our members. Sandra also expressed that, <i>"It is a testament to our commitment to make this community advisory committee reflective of the members that we serve."</i></li> </ul> | <p><b>Anwar Zoueihid</b></p> |                        |
| <p><b>Purpose and Mission</b></p> <p>Sandra reiterated that this is a forum to hear our Blue Shield Promise members and stakeholders and assist us in being a better health plan. We want our members to be involved in their care, and we want our community partners to help inform and partner with us in delivering that care. The purpose of this meeting is for us to listen to our members and invite all to share and provide input and ideas on how we can better Blue Shield Promise Health Plan.</p>  | <p><b>Sandra Rose</b></p>    |                        |



- c. Vaccination rates for all individuals residing in LA County regardless of their health insurance (e.g., private, Medi-Cal, Medicare, etc.), for members initiating in October 2021 79% and after the beginning of 2022 it went up to 81%
- d. In October all Med-Cal members regardless of plan enrollment (e.g., LA Care, BSP, Health Net, etc.) the vaccination rate for all Medi-Cal members was at 57% and for Promise members the number were initiated above with 59.9%
- e. Reducing overall rate to start ended up vaccinating 57% of BSP Medi-Cal members in LA County five years of age and over. Over 48,000 members were vaccinated from September 2021 to mid-January 2022 at an increase of 15% which is about 2 members per minute
- f. The program has ended; however, BSP will continue to have the same capabilities and encourage members to receive their COVID-19 vaccine for those that have not completed the series in addition to the booster

**Comments and Feedback**

**Terrance Henson**, Public Policy Manager for Southern California Center for Independent Living, partnered with Department of Public Health and have participated with Lynwood and Whittier school districts in vaccine clinics assisting Spanish speaking families, having the younger population sign up and targeting students that have not been vaccinated. Terrance is offering to collaborate and support BSP for any vaccination outreach efforts.

**Richard Ayoub** from Project Angel Food brought up the historical cycle of the different variants and asked Dr. Cruz if he was aware that we may have a new variant in June or July. Dr. Cruz is aware and stated that based on the historic cycle of the variant we may see something happen during the summer months. Is still reviewing data and based on boosters, the longevity of the immune response from the vaccine, other variants that might come up will not seem to cause the same level of symptoms or severity of infection compared to the Delta or Omicron and are optimistically guarded

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| <p>in what might occur in the later months. He also encourages organizations and members to see what is published and announced since changes are seen weekly. Also, the number of infections and hospitalizations are decreasing which are positive signs.</p> <p><b>BSP Member B</b> asked, how the new variant was established or known of whether there would be other variants. Dr. Cruz stated predictions are based upon prior COVID variants have done and how they acted, how they could detect them, and vaccination rates. Therefore, the medical scientist and public health project particular possibilities and gather all the information to make this decision.</p> <p><b>2. California Advancing and Innovating Medi-Cal (CalAIM)</b></p> <ol style="list-style-type: none"> <li>a. CalAIM is about improving how we support our Med-Cal members making sure they have better access to care, addressing barriers, identifying any social factors that may impact their ability to access medical care and be healthy</li> <li>b. Enhance Care Management program (ECM) launched as of January 1<sup>st</sup> with a large network and partnered with organizations with 21 in LA and 15 in SD county region and counting with the ability to add on more that provide enhanced care management to BSP members</li> <li>c. Training the enhanced care management organizations to make sure they are delivering the best possible care to BSP members and working through technical and system issues, and large part of the work has been enrolling new members in the ECM program.</li> <li>d. Assisting members who were currently being assisted through the health homes program and those that were linked to the county for similar services. These members have been able to obtain services under BSP as of January 1<sup>st</sup> and there were over 4000 members between the county and health home programs that were able to remain under the ECM. A letter went out to BSP Medi-Cal members about this coverage in late December 2021 informing them about the new benefit</li> </ol> | <p><b>Joycelyn Smart-Sanchez</b></p> |  |
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- e. The Community Supports Component went live as of January 1<sup>st</sup> and there are a total of 14 services that plans can choose to opt into and BSP for LA County opted into 9 services to and SD region into 10 and looking in adding more services this year. For the network, currently working with 17 organizations in LA County and 18 in SD county. The team has been supporting internal teams with understanding how to connect members supporting ECM organizations and understanding what CS services are and have members linked also training organizations to ensure that they provide the best care to BSP members
- f. As with ECM, there were members connected to the county services and health homes that were obtaining similar services for housing case management and were able to grandfather and assist these members to continuing their services as of January 1<sup>st</sup>. The member notice that went out for ECM had information about additional support services that may be available to members (e.g., housing assistance). The first two weeks of January 2022 the team was able to have members linked to these services

**Comments and Feedback**

**Sandra Rose** acknowledged Joycelyn and her team on doing a wonderful great service and that some closure was provided for the committee in terms of planning, however this is just the beginning and as needed there will be reports and updates. The same goes for the Medi-Cal RX team since there was dramatic change and wanted to make sure the information loop had closure.

**3. Medi-Cal Rx**

- a. The State Department of Health Care Services transitioned the pharmacy benefit program to a state run program called Medi-Cal RX and is no longer under BSP health plan. It has been carved out by the state to the new manager Magellan, does not apply to Cal-MediConnect members and it is only for full duals (Medicare Medi-Cal) and Medi-Cal members. Members that have existing prescriptions and

**Joselito Marquez**

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| <p>approvals should have been transitioned; therefore, should not need approvals or a new prescription. The transition period is good until the end of June 2022</p> <ul style="list-style-type: none"> <li>b. As of January 1<sup>st</sup>, members have experienced and expressed challenges. There has been long wait times with the new Customer Care Center for Medi-Cal RX, have been denied prescriptions and delays in approval for prescriptions. BSP has taken all information and assist members on-site while at the pharmacies</li> <li>c. Benefit manager Magellan have been pushed to institute changes and improve the situations which include educating the pharmacies to have a better understanding of this change and how they should process and bill prescriptions properly</li> <li>d. The emergency supply that was available to BSP members in the event there were challenges with coverage has been expanded from 72 hours supply to 14-day supply in which allows any issue to be resolved and have enough medication</li> <li>e. BSP encouraged to have better training of their Medi-Cal RX customer care staff since it has been found that they are not completely informed what the policies and procedures are and assisting them to better understand. They recognize that more staff in needed to handle all members needs to have less wait time, it has been addressed and have seen improvements</li> </ul> <p><b>Comments and Feedback</b></p> <p><b>Terrance Henson</b>, Public Policy Manager for Southern California Center for Independent Living voices his concern and states that the state took a step back in pulling out the pharmacy benefits from the health plans and questions why this was done and interrupt member's care. Joselito stated that the purposes were to streamline the benefit and reduce the costs for members. Also, research was performed, and studies were made to make this determination.</p> |  |  |
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| <p><b>BSP Member B</b> has had issues in obtaining medication for her heart and that the pharmacy she uses are not taking handwritten prescriptions any longer and they need to be called in. She is asking how true this is and is this also part of the new Medi-Cal RX benefit program. Joselito assured that members who have existing prescriptions and approvals should have been transitioned; therefore, should not need approvals or a new prescription. He encourages to reach out to BSP, and they will assist in navigating through the challenges members are experiencing and escalate to Medi-Cal RX so that they may contact the pharmacy to have it resolved. <b>Jackie Dai</b> also stated that there is a complain process that member B may choose to pursue on the legal side if her issue is not resolved.</p> |                          |  |
| <p><b>Ombudsman Report</b></p> <p><b>Jackie Dai</b> stated there were a significant number of cases – in October there were 63, November 55, December 36 and so far in January there were 46 (numbers lowered due to the holidays).</p> <ul style="list-style-type: none"> <li>• Top trending issues that were seen at the Health Consumer Center and the Ombudsman were clients with unpaid medical healthcare debt, problems with medication access issues due to the prescription transition to Medi-Cal RX</li> <li>• Non-emergency Medi-Cal transportation delays and no shows for those with transportation appointments</li> </ul>  | <p><b>Jackie Dai</b></p> |  |
| <ul style="list-style-type: none"> <li>• There are a few Medi-Cal updates beginning with the <b>Medi-Cal negative actions</b> during the pandemic is currently suspended until April 16, 2022, and waiting to hear one week before April 16th if PHE will be extended</li> <li>• <b>Non-MAGI Medi-Cal Asset Test will be eliminated:</b> <ul style="list-style-type: none"> <li>○ First phase will raise asset test limit from \$2,000 to \$130,000 for a single person</li> <li>○ Starting July 2022 from \$3,000 to 195,000 for a couple</li> <li>○ Complete elimination scheduled for no sooner than January 2024</li> </ul> </li> <li>• <b>Older Adult Expansion:</b> If over age 50, immigration status will no longer be a barrier to full-scope Medi-Cal after May 1, 2022</li> </ul>   |                          |  |

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| <p><b>Share of Cost (SOC)</b><br/>A SOC occurs if a person is over the age of 65 or living with a disability, on non-MAGI Medi-Cal, and their income is above 138% of the Federal Poverty Level.</p> <ul style="list-style-type: none"> <li>• <b>Purchase Supplemental Insurance</b></li> <li>• <b>Apply for 250% Working Disabled Program</b> <ul style="list-style-type: none"> <li>○ Applicant must have a disability diagnosis before age 65 and be willing to work</li> </ul> </li> <li>• <b>Assess for Spousal Impoverishment</b> <ul style="list-style-type: none"> <li>○ One spouse must require nursing home level of care</li> </ul> </li> <li>• Ensure that SOC has not been added since March 2020 during the Public Health Emergency (unless for Long Term Care)</li> <li>• Meeting the Monthly Share of cost (saving receipts of monthly expenses)</li> </ul>   | <p><b>Connor Hannigan</b></p> |  |
| <p><b>Marketing and Redetermination Plan</b></p> <p><b>Marketing Goals and Objectives</b><br/>Build Awareness of Medi-Cal as health care option and expand Blue Shield of California Promise Health Plan's Medi-cal enrollment by:</p> <ul style="list-style-type: none"> <li>• Educating beneficiaries about managed care</li> <li>• Medi-Cal enrollment process</li> <li>• Their rights and responsibilities for the maintenance of their overall health</li> </ul> <p>Expressed we have an incredible marketing team that advertises on billboards and social media campaigns as well as an incredible group that works with community partners in schools and churches, stakeholders, and providers in providing information on who we are and what we do and how to obtain health care coverage.</p> <p><b>What is Medi-Cal redetermination and how are we impacted?</b><br/>There are three work streams to implement that will assist members:</p> | <p><b>Sandra Rose</b></p>     |  |

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| <ul style="list-style-type: none"> <li>• <b>Member outreach component</b> - Make sure member understands what the process is and remind them before their renewal date. Planning to outreach both over the phone and through print communication and advise if they don't renew the case will be placed into a <b>hold</b> status for 90 days. If they fail to renew, they will lose eligibility</li> <li>• <b>Partnership with providers and clinics</b> - Reminding providers that it has been two years since the redetermination process has been in place, have them understand what the implications are and that their patients/members must go through the renewal process again. Encourage providers to outreach however they may possibly can and remind them</li> <li>• <b>Partnering with organizations</b> - Collaborate both at the county level and with community organizations to inform beneficiaries that the renewal process will start again and what needs to be done. Have been discussing this with LA Care, other health plans and the DPSS office as well. This process will take effort and coordination across various organizations</li> </ul> <p><b>Medi-Cal redetermination</b> – the annual review of a member's financial eligibility to remain or lose coverage through Medi-Cal</p> <ul style="list-style-type: none"> <li>• A public health emergency (PHE) was declared by the federal government in 2020 which did not allow terminations or reduction in benefits to occur</li> </ul> <p><b>When the public health emergency is lifted:</b></p> <ul style="list-style-type: none"> <li>• Up to 3 million Medi-Cal beneficiaries could lose eligibility</li> <li>• Medi-Cal beneficiaries will be redetermined</li> <li>• <b>Beneficiaries who are no longer eligible could:</b> <ul style="list-style-type: none"> <li>○ Enroll in an Individual and Family Plan (IFP) (i.e., Covered CA)</li> <li>○ Gain coverage through their employer sponsored coverage</li> <li>○ Or be uninsured</li> </ul> </li> </ul> <p>Blue Shield of California has the Individual and Family Plan (IFP) product statewide so this may be an opportunity for membership growth over the next two years and help retain these members within Blue Shield of California.</p> | <p><b>Sean O'Brien</b></p> |  |
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| <p><b>Comments and feedback</b></p> <p><b>Anwar Zoueihid</b> asked if the redetermination process will start on the beneficiary's renewal date and not all at the same time in one given month. Sean stated it might start in the summer and not in April how it was anticipated. It will roll out monthly and moving forward until the state reaches all beneficiaries and they are all caught up.</p> <p><b>BSP Member B</b> would like to know when the health plan will start contacting members for the redetermination and what method will be used. She also feels the process should start soon since the plan is to start during the summer. Sean clarified that the process stopped due to COVID and the Public Health Emergency (PHE) declaration from the federal government. When the PHE stops this is when the redetermination process will begin and since it has been pushed back from January to February and now until July and this is was being focused on now. When the process begins it will be based on the beneficiary's renewal date.</p> <p><b>Terrance Henson</b> stated as a short-term goal for the outreach strategy, his CBO Southern California Center for Independent Living, is interested in partnering with BSP since they are in the process of completing an MOU and will be housed in the CRC El Monte and CRC in East LA. Sandra Rose stated one way may be mailing out the post cards that are in the process of being printed and distributed accordingly. She also said there may be other ways in which the engagement may be deepen, however will continue to explore other ways of assisting our BSP members in the outreach efforts.</p> |  |  |
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| <p><b>Open Discussion and Closing Remarks</b></p> <p><b>BSP Member D</b> is very happy to be part of BSP and has been a member for 12 years. She also mentioned that her Medi-Cal benefits were terminated and was told that her paperwork was received, however was never processed. A BSP representative from SD assisted her in calling DPSS, guided her through the process and was reinstated and is very grateful. Is hopeful that the assistance BSP provided her remains.</p> <p><b>BSP Member E</b> was happy to have joined us for the first time and appreciates to have learned many things and know how to obtain assistance. She expressed that it was a beautiful chat that went on today.</p> | <p><b>Araceli Garcia</b></p> |  |
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