

## San Diego Member Advisory Committee Meeting Minutes

April 6<sup>th</sup> • 1:00 p.m. to 3:00 p.m.

## **Committee Members**

## Committee Members

- Ruth Relyea (Consumer)
- Antonio Garcia (Consumer)
- Gary Martin (Consumer)
- Erin Murphy (Interfaith Community Services)
- Cathryn Nacario (NAMI)
- Jessica Romero (SRC)
- Nancy Vera (Access to Independence)
- Tanissha Harrell (211)
- Steve Carroll (LGBT Center)
- Hodge Patterson (YMCA)
- Jack Dailey (Consumer Center for Health Education and Advocacy)

Irene Cabanting (Consumer)

**Committee Members Absent** 

- Kristen Cerf (Blue Shield Promise Health Plan CEO President)
- Dr. James Cruz (Blue Shield Promise Health Plan Interim Chief Medical Officer)

Blues Shield Promise Health Plan

- Kellie Todd Griffin (Blue Shield Promise Health Plan Sr. Director, Community and Provider Engagement)
- Araceli Garcia (Program Manager for Consumer and Stakeholder Engagement)



Topic	Presenter	Decisions/Action items
Welcome and introductions	Araceli Garcia Kristen Cerf	
Old Business  No action items to report back	Araceli Garcia	
<ul> <li>Coronavirus (COVID-19) Update</li> <li>At BlueShield of CA Promise Health Plan, your health is our top concern. We want to remind you that screening and doctorapproved testing for the new coronavirus (COVID-19) is available at no cost. Your provider does not need to get prior approval to screen or test you.</li> <li>If you have a fever, cough, and feel short of breath, we suggest using your Teladoc benefit or Blue Shield Promise's Nurse Advice Line before seeking in-person care. There is no cost for Teladoc visits or Nurse Advice Line calls.</li> <li>Blue Shield of California is taking additional steps to remove barriers and help its members receive the health care they need during the coronavirus (COVID-19) pandemic, announcing it will cover member's coinsurance, copayments and deductibles for COVID-19 medical treatment through May 31, 2020.</li> <li>For the most up-to-date information about your care options, visit blueshieldca.com/coronavirus. You can also call member services at 800-605-2556 (TTY:711).</li> </ul>	Dr. James Cruz	
<ul> <li>Ombudsman Report</li> <li>Ombudsman provided an overview of the Medi-Cal for Adults. Medi-Cal pays for health care for certain eligible residents. Any person has the right to apply for Medi-Cal. Even if you are working, own a house or are married, you be eligible to Medi-Cal. You can apply for Medi-Cal any time, but keep in mind that it will take time for your application to be processed. Because there are so many factors and a variety of programs, it is important for anyone interested in making an application to speak with someone who is qualified to offer assistance.</li> </ul>	Jack Dailey	



Community Outreach Updates	Marguerite	
• Marguerite Womack, Director of Community Engagement, gave an overview of the work of the community engagement department. She stated they work with community-based organizations who serve our members and Medi-Cal eligible community members. Staff maintain relationships through consistent communication and connecting organizations with resources and creating collaborations to address community needs. In this time of COVID-19, community engagement staff continue to reach out to organizations by telephone and are bringing them together for virtual meetings. They are learning about their present needs and have made small mini grants to organizations who have made shifts to continue serving the community. The Community Resource Centers are presently closed and staff there are seeking opportunities to bring classes and resources to the community via the internet.	Womack	
New Business: National Culturally and Linguistically Appropriate Services (CLAS)Program Documents and Policy	Marilyn Ventura	
<ul> <li>Marilyn Ventura, Health Equity Program Manager, from the Clinical Quality department introduced the CLAS program and policy that Blue Shield Promise has implemented. The purpose of the CLAS program is to demonstrate Blue Shield Promise's dedication to the reduction of health care disparities of its members and the overall improvement of their health. It was announced to the committee that to support this mission, the BSC Board has given the MAC committee the responsibility and oversight of the CLAS program and its activities. The purpose of the MAC is to help BSC Promise advance health equity, improve quality, and the elimination of health care disparities of its members.</li> <li>The MAC Committee was presented and asked to approve the CLAS Policy. The CLAS policy lists the 15 National CLAS standards and outlines that on an annual basis, the health plan will identify 2 focus areas. The policy also adheres to the organization's HIPPA-PHI</li> </ul>		The committee approved of the policy and the 2020 goals.



privacy policies and Code of Conduct rules and IT policies system management. She highlighted that the policy details data access controls, permissible uses of data, and impermissible uses of data regarding race/ethnicity, and language.

- o The 2 focus areas for 2020:
  - CLAS #6: inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.
  - CLAS #7: Ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.
- Consumer Irene complimented BSC Promise for introducing the CLAS program to the committee and is excited to learn about the improvement initiatives that the team is facilitating specifically on the CLAS policies.
- Marilyn presented to the committee the 2019 CLAS report where she shared this is the first time this report was being presented to the MAC. She also informed the committee that this report will be shared with them annually.
- Marilyn provided an overview of the CLAS Report. She shared that this is an assessment of the following 2019 data:
  - o Medi-Cal Membership and provider demographic information
  - An analysis on the Medi-Cal membership by race/ethnicity/language needs and preference and comparison to BSC Promise Provider Network
  - Quarterly analysis of appeals and grievances specifically as they relate to cultural including religion preferences and/or linguistic services.
- The key results from the CLAS analysis included:
  - o Top 3 Race/Ethnicity Categories for San Diego
    - Hispanic/Latino
    - Caucasian



- African American/Black
- o Top 3 Spoken Languages by Providers & Specialists
  - Blue Shield Promise meets and exceeds the standards for providers' who speak Spanish, Vietnamese and Armenian
  - 2. Meet and exceed access to OB/GYN specialists
- A total of 54,919 members used over-the-phone interpreter services
- o Top 3 languages were:
  - 1. Spanish
  - 2. Vietnamese
  - 3. Mandarin
- o In 2019, a total of 14 complaints were filed. 2 were from San Diego. None of the complaints were about religious preferences.
- o The committee reviewed the team's process improvement plan which includes:
  - Increase data capturing for providers' race/ethnicity information. Quality Improvement to work with Provider Engagement/Network to develop outreach strategy to BSC Promise providers.
  - 2. Improve interpreter service vendor reporting by line of business to support appropriate strategic decisions regarding members' needs. Actively engage with interpreter services vendor to develop and deploy line of business breakout reporting.
  - Increase the number of Vietnamese speaking pediatric providers in San Diego county to ensure network adequacy. BSC Promise needs to reach out to provider offices and inquire if staff/provider speaks Armenian. BSC Promise can also identify opportunities for potential providers via local associations.

The committee voted and approved of this report.



- 4. Increase the number of Armenian speaking pediatrics, FP/GP, and internal medicines providers in LA to ensure network adequacy. Outreach to all existing network providers to notify Blue Shield Promise if office staff and/or provider speaks Armenian. Provider Network will look to connect with local Armenian community to help identify potential providers who speak Armenian.
- 5. Improve complaints data capture and drill down specifically for complaints on cultural/linguistic/religion. Revise the process and categories for capturing CLAS related complaints.
- The committee discussed the interventions and the how this aligned with the CLAS policy goals. The committee agreed that these are acceptable interventions and that all are a priority and the number order is approved as is. Dr. Buchert recommended that BSC Promise should engage with local community organizations or California Medical Association to identify professional organizations in the area to assist with provider linkage. Consumer Irene commented that she is supposed she did not see Farsi or other Middle Eastern/Asian languages are priority areas. She was very surprised to see a low number of complaints as it relates to culture. Irene asked Marilyn if the team is considering looking into focusing provider training and/or education on culture and how to culturally appropriate concerns about healthcare. Marilyn shared that while it might not be the focus there are teams in BSC Promise that are looking to revamp training and look if this area is part of the curriculum.
- 2019 BSC Promise Member Experience Report Face-to-Face Interpreter Services
  - Marilyn shared with the committee results from an annual survey that BSC Promise conducts to its members who have used face-to-face interpreter services.
  - o The purpose of the survey was to allow members to provide rate their satisfaction with the interpreter services vendors.

The committee voted and approved of this report.



Members who used interpreter services at least once in 2019 received a survey in the mail or were contact via telephone.

- The response rate for this survey was 30 BSC Promise Medi-Cal members.
- o Key survey results were shared with the committee:
  - 47% of respondents said they learned about interpreter services from their doctor while 36% said they learned about it from the health plan.
  - 70% of respondents said they were very satisfied with the interpreter services
  - 100% of respondents said the interpreter arrived on time and last 100% of respondents said they would use an interpreter at their next doctor's appointment
- The committee reviewed the barriers to the survey: that this
  was only surveying members who received face to face
  interpreter services and the ability to successfully reach
  members and participate in the survey.
- The committee reviewed the team's improvement plan which includes:
  - Increasing the number of survey questions to allow for more drill down questions
  - Improve the number of participants to ensure member voices are heard
  - Expand the scope of the survey to encompass other interpreter/translation services
  - Improve member awareness t these services on behalf of the health plan

The committee reviewed the prioritization and interventions and agreed that this report is a good baseline report. Consumer Irene strongly urged that the team improve response rates. She does not feel that a response rate of thirty members is enough and can truly tell BSC Promise enough information on their experience. Marilyn shared that is one area the team is looking to quickly remedy and help understand the member

The committee voted and approved of this report.



experience not just at the doctor office but also when members call the Customer Care line. Community Based Organization representative Ruth recommended that perhaps an opportunity to increase the survey is to conduct right after interaction. It is also an opportunity for members to provide health plan feedback that can be useful in other improvement work.

- 2019 BSC Promise Employee Experience Report Language Services Survey
  - The committee was presented with the BSC Promise Employee Experience Report, which allows employees to provide feedback on their experience with interpreter and/or translation services, a vital service for members and employees.
  - o This survey was distributed to employees who used interpreter and/or translation services vendors at least once in 2019.
  - o Two types of surveys were developed: Survey A, with departments who did not have a bilingual employee. Survey B was developed and deployed to the BSC Promise Customer Care (aka Member Services) department, as this department has bilingual employees embedded into its system.
  - o A total of 81 employees responded to the survey.
  - o Key results that was shared with the committee:
    - Overall employees were satisfied with the interpreter services vendor.
    - 95% of employees felt that the interpreter did assist them and the member.
  - Marilyn shared areas of opportunity and improvement plans with the committee:
    - Develop clear training on how to request translation of written materials
    - Educate employees on next steps when interpreter does not meet BSC Promise standards.





<ul> <li>Conduct quarterly staff surveys with departments to rate their experiences.</li> </ul>		
The committee reviewed the prioritization and interventions and agreed that this report is a good baseline report. Community Based Organization representative Nancy commented that she is glad BSC Promise is looking at both member and staff satisfaction on the valuable services that is offered. She strongly urged that the health plan review the survey modalities for all the surveys, especially the member survey as it would be of great to have all members provide feedback.		
Closing Remarks and Adjournment	Kristen Cerf	
The meeting adjourned at 3:00 p.m. The next MAC is scheduled for June 24 <sup>th</sup> , 2020 at 12:30PM-2:30PM		