

October 13, 2010

Committee Members in Attendance		Staff in Attendance	
✓	Terrie Stanley, Co-Chair, Interim CEO	✓	Dee Pupa, Interim Assistant Clerk of the Board
✓	Narcisa Egan, Co Chair, Assistant Health Care Agency CFO		
	Lanyard Dial, MD, Physician, Ventura County Medical Association (Excused)		Guests in Attendance
	Rick Jarvis, Private Hospitals / Healthcare System (Excused)	✓	Bob Cosway, Consultant, Milliman
✓	Roberto S. Juarez, CEO, Clinicas del Camino Real, Inc.	✓	Lynette Coverly, Coverly Professional Services
✓	Michael Powers, Director, Ventura County Health Care Agency	✓	Ken Dixon, Consultant, ACS
✓	Catherine Rodriguez, Ventura County Medical Health System	✓	Candice Limousin, Human Resources, RGS-LGS
		✓	Traci R. McGinley, GCHP Consultant

AGENDA ITEM / PRESENTER		MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
1	Call to Order Welcome and Roll Call Terrie Stanley	<ul style="list-style-type: none"> The meeting was called to order at 4:05 p.m. All Members present, except for Member Dial and Member Jarvis. A quorum was present. <p>Co-Chair Stanley welcomed everyone and introduced Bob Cosway of Milliman, Candice Limousin Human Resources, RGS-LGS, Lynette Coverly of Coverly Professional Services and Ken Dixon of ACS.</p>	
2	Public Comment / Correspondence Terrie Stanley	None.	
3	Correspondence from Health Education League of America – Request for Television Coverage of Scheduled Meetings Draft Gold Coast Health Plan’s Consumer Awareness Campaign Strategy Terrie Stanley	<p>Request for Television Coverage of Scheduled Meetings. Co-Chair Stanley advised the Committee that she would forward this Request for Television Coverage of Scheduled Meetings to the full Commission after the Committee Meeting. She then reviewed the conditions of Government Code §54953.6.</p> <p>Co-Chair Stanley continued stating that the request is also that the live broadcasts occur bilingually (English / Spanish). This really is public awareness and a draft plan is also being presented for Committee review.</p>	There was Committee Consensus that Co-Chair Stanley would draft a response to Health Education League of America for Committee review.

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		<p>Member Juarez asked if they were looking for this group to fund the public awareness.</p> <p>Co-Chair Stanley stated that the room utilized is not set up for public broadcasting and the current location is fairly limited.</p> <p>Member Juarez expressed his concern that it could cause disruptions of the meeting.</p> <p>Co-Chair Stanley stated that a response was needed and suggested she contact Mr. Cruz to see what his actual desires are. Member Powers thought that was fine but cautioned as there may be other entities that wish to broadcast.</p> <p>Member Juarez added that if this was approached, being in Spanish would be great and expressed his concern that more groups that work with the Spanish population need to be identified in the Draft Gold Coast Health Plan's Consumer Awareness Campaign Strategy.</p> <p>Member Powers asked how they would be found. Member Juarez responded that the groups on the list, and area faith based organizations should be contacted. Member Powers suggested the co-ops, Mextecho, CAUSE and United Way.</p> <p>Co-Chair Stanley responded that the list can be expanded as more entities are identified.</p> <p>Member Juarez requested that School Districts be added as well.</p>	
4	<p>Review and Approval - Minutes September 27, 2010</p> <p>Terrie Stanley</p>	<p>The minutes of September 27, 2010 meeting were presented for review and approval.</p> <p>It was noted that Item Number 1, Roll Call, was corrected to show Co-Chair Egan, not Commissioner Egan.</p>	<p>Member Juarez moved to approve the minutes with the correction as noted. Member Powers seconded. Approved 3-0.</p>

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<p>5</p>	<p>Financial Update and Discussion on Primary Care Capitation Rates and Budgets for Providers</p> <p>Narci Eagan</p> <p>Bob Cosway</p>	<p>Co-Chair Stanley explained that the capitation rates presented are an attempt to value primary care services, as well as what is what is currently being paid within the industry as a whole. Milliman looked at reimbursement rates and trends. Also taken into consideration is the fact that Federally Qualified Health Clinics (FQHC's) are paid supplemental payments by the State and GCHP will need to demonstrate that it pays all PCP's the same reimbursement amounts. There are also services that can be billed, and will be paid for, outside of cap. CHDP is one example of services paid in addition to the capitation rates. The analysis included a review of comparable plan data along with information regarding Ventura cost and utilization from the State.</p> <p>Financial Update. Co-Chair Egan reviewed the cash flow, with note to the ACS line of credit. She then added the additional expense for office furniture down payment of \$8,000. In response to Member Rodriguez question about the furniture being free, Co-Chair Stanley advised that about \$10,000 worth of furniture was received free, but additional was necessary.</p> <p>Member Juarez added that he thought he had cubicles. Member Rodriguez asked if it would be considered a donation, member Juarez responded, yes.</p> <p>Co-Chair Egan then reviewed the draw down amounts from the cash flow.</p> <p>Discussion on Primary Care Capitation Rates and Budgets for Providers. Bob Cosway of Milliman provided a status update on the rate setting. While the actual rates from the State are not yet final, Ventura has been provided with the summary claim data from 2007. There are more members than originally noted from the State information was from 2005 originally, it is likely that current 2010 data would show even more members per month. Aid code categories</p>	<p>Member Juarez moved to accept the Financial update (recommendation #1. Member Rodriguez seconded. Approved 3-0. Recommendation #2 and #4 were deferred</p> <p>Member Juarez moved to approve _recommended services be included in PCP cap (Recommendation #3; Member Powers seconded. Approved 3-0.</p> <p>Member Powers moved to explore options on #5 & #6, Member Juarez seconded Approved 3-0.</p>
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<p>(type's-ie Aged, Family ect) were then reviewed.</p> <p>Bob Cosway added that the State took 2007 data and trended it forward, that was then trended to April/March. The State indicates that is what they will pay Ventura, but he does not believe that is consistent with how State has paid other plans in the past. It appears to be less then what was trended, as the actual came out less than would have been expected.</p> <p>Member Juarez asked if it was comparable to other counties or below due to the fact that the Ventura providers have kept the utilization low. Member Powers agreed.</p> <p>Member Powers expressed his belief that we could prove to the State that additional funding would be needed and we could make a case to the State is that they would need to pay more, as the provider community has been saving the state money all along.</p> <p>Member Juarez added that this is why Ventura is last to go to managed care because of its efficient care model. It appears as if Ventura is being punished for doing good job.</p> <p>Bob Cosway responded that GCHP could argue that issue and possibly get 100%. Member Powers asked if the State acknowledges that Ventura county providers are saving them money.</p> <p>Member Rodriguez added that the point is that we are already the best run County and should not be penalized. Another factor is that there are now two trauma hospitals in the county.</p> <p>Member Powers asked if we know what rates are in other counties. Bob Cosway responded that we did not know off hand. Member Powers added that it would be a good bench mark. Bob Cosway added that he does know some of the two plan model rates.</p>

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	<p>Member Rodriguez stated that she was surprised when it was trended how it showed our efficiency. Member Powers added it was because of the clinic systems that operate within the county, they do an excellent job of keeping people out of the emergency room as individuals are able to see a physician for care.</p> <p>Bob Cosway stated that the State wants to pay 97%, but thinks Gold Coast may be able to get somewhere between 100-103%, as the state could pay 100% of FFS and still show they are saving money.</p> <p>Member Juarez stated that he would like to see more on how they are treating FQHC's.</p> <p>Co-Chair Stanley, even though there are an FQHC's in the provider network, the plan needs to pay all PCP's the same across the board. If you look at the pages showing the Physician Primary Care Services rates, all categories are relatively the same. There are other services PCP;s do and bill the plan for , for those additional services, the providers will be paid for IN ADDITION to what is covered under the capitation rate- that is how you get to the number that represents the reimbursed costs. As an FQHC, they get paid by the state and are "made whole" to their cost.</p> <p>Member Juarez asked how the pharmacy and labs will be handled. Is there a way to put this all together? Would like to see it all and not just a piece at a time.</p> <p>Member Juarez asked what about labs. Co-Chair Stanley responded that we will not have just one lab provide services and Gold Coast has been approached by Clinicas and VCMC for cap rates on lab as well as some other services. Member Juarez stated that we are required to give patients choice, but have not discussed how all of this will be handled. He would like to see more complete information as well as how people get auto assigned.</p>	
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	<p>Co-Chair Stanley stated that auto assignment was discussed in detail at the Commission; it was one of the items discussed by both this committee and the full board at the earlier meetings. Co-Chair Stanley stated that GCHP has been asked by private doctors to be included in the auto assignment process as well.</p> <p>Co-Chair Stanley indicated that Recommendation #2 was critical to show the State that we are moving forward. Member Rodriguez stated she will not recommend moving forward on this because she does not have enough information. Member Powers would like this taken to Commission as the feeling is we cannot move forward because we need more information from State</p> <p>Co-Chair Stanley stated that given what GCHP and Milliman has reviewed in terms of data and information from other like plans in other counties, it is reasonable to set PCP capitation rates as these will not change much given what has been reviewed to date. Contracts only bind the plan at the point there is implementation.</p> <p>Bob Cosway stated that if the committee were to look at paying Medi-Cal rates, it seems reasonable that primary care rates would be basically set at what has been presented.</p> <p>Member Juarez would like to see how we will spend the money. There has to be a way to force State on this. One recommendation is that committee members need to go up to Sacramento for a discussion with the state. Bob Cosway responded that before Gold Coast asked this of State, he would like to more closely look at the all figures and information that has been provided.</p> <p>Member Juarez stated that Recommendation #2 & #4 go together. Co-Chair Stanley responded yes, and with Recommendation #3 we heard back from all clinic groups, as well private physicians within the community, and they agreed the list makes sense. There were no</p>	
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		<p>issues with it being approved and implemented.</p> <p>Member Juarez asked if recommendations came back from the physician work groups, Co-Chair Stanley stated yes.</p>	
6	<p>Presentation of Gold Coast Health Plan Logo Options</p> <p>Lynette Coverly, Coverly Professional Services and City Creating Group</p>	<p>Lynette Coverly stated that four logos would be reviewed and hopefully narrowed down to two (Logos numbered from #1-16).</p> <p>Member Rodriguez stated that she preferred blue, but liked #10.</p> <p>Ms. Coverly indicated that blue could be used instead of the orange, with different shades.</p> <p>Members Juarez, Powers and Rodriguez all agreed on the orange color.</p> <p>Different variations were discussed.</p> <p>Member Powers suggested that #5 be forwarded to the full Commission since it incorporated people.</p> <p>Member Juarez left the meeting at 5:48 p.m.</p>	<p>Member Juarez moved to move forward with two logos to be presented at the commission meeting Oct 27. Member Powers seconded.</p> <p>Approved 3-0.</p>
7	<p>CEO Transition Plan</p> <p>Terrie Stanley</p>	<p>Co-Chair Stanley indicated that the Plan could be carried out in two weeks.</p>	<p>There was committee consensus to defer this item</p>
8	<p>Permanent CEO Compensation</p> <p>Michael Powers</p>	<p>Co-Chair Stanley stated that because Mr. Greenia will be coming from Hawaii and agreed to come sooner, the additional items need to be approved.</p> <p>Compensation Review. At the end of 6 months with satisfactory or above performance.</p> <p>Leaves. Time off of two (2) weeks over holidays, Member Juarez asked if this was additional time off. Member Powers asked if it</p>	<p>Member Juarez moved to approve the new compensation package, Evaluation in 6 months, with possibility up to 5% increase. Holiday is as accrued or without pay. Car allowance up to \$1,000, \$10,000</p>

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		<p>affected the dollar amount. Candice Limousin responded that it was two weeks without pay.</p> <p>Member Juarez suggested they could front time off from accrued leave. Member Rodriguez clarified that it would be no additional time off, just advancement of time. Candice Limousin stated, that was up to the Committee. Committee consensus was either way.</p> <p>Car Allowance. Requesting additional car allowance to pay for rental car until own car arrives from Hawaii. After discussion, Committee consensus was they would approve up to \$1,000 for the first month and then just regular car allowed thereafter.</p> <p>Relocation Costs. Requesting \$17,000 to move himself and family.</p> <p>Housing Costs. Requesting short-term temporary housing costs for hotel until able to find other appropriate housing. Committee consensus was that they would approve an additional \$1,000.</p> <p>Severance Package. Requesting six (6) months' severance package should he be dismissed without cause.</p>	<p>relocation and \$1,000 Housing. Severance 2, 2, 2 1-2-3 years. Member Powers seconded. Approved 3-0.</p>
9	<p>Revised Project Implementation, Timeline, Deliverables and Immediate Staffing Requirement</p> <p>Ken Dixon, Affiliated Computer Services (ACS)</p>	<p>Ken Dixon, stated that the State was asked to provide GCHP with a list of deliverables. The group then set down and mapped out a plan and the timeframe that would be need for implementation, regardless of the actual date to be selected.</p> <p>Items in the Green section are those that require action on the part of the State.</p> <p>PCP cap rates and 80% of provider network MUST be in place before the State would feel comfortable from a contract perspective. Anything going to State for approval can take up to 30 days for a turn around. A number of items were discussed that cannot be accomplished or completed without GCHP having additional staffing.</p>	<p>Member Powers moved to accept the revised Project Implementation, Timeline, Deliverables and Immediate Staffing Requirements. Member Rodriguez seconded. There was not a quorum present so no motion was carried forward.</p>

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		<p>Member Powers asked if there are any alternatives. One alternative would be to wait and hire all staff; the other is to begin to look at the possibility of bringing interim staffing in to assist until full staff is in place. The group asked to have the key positions identified-they are noted in the document and include CMO/CEO/IT and Claims. Group asked what was the expectation on amount of time that would be required for each of the positions.</p> <p>Co-Chair Stanley responded that CMO should be full-time and minimum would be eight weeks. Member Powers stated that there are some IPA doctors around here and this is what they do all the time. There may also be someone on the Commission that can do it.</p> <p>All agreed that there is a lot of work to be done, and Member Powers suggested that as there is a Commission coming up, a plan be taken to that next meeting.</p> <p>In addition to the CMO, a CFO needs to be in place to assist with rate discussions with State.</p> <p>Russ Fendley added that Gold Coast needs their IT person and it needs to be someone that knows the County system. It was noted that David Herzog, IT Director from County was present in the audience. Russ Fendley suggested having someone from ACS contact him.</p> <p>Candice Limousin added there are good candidates for all of the positions.</p> <p>Member Rodriguez suggested that Interim CEO Stanley hire a full time Claims Director.</p> <p>Member Powers suggested having a conference call with Earl Greenia to get him on board with a staffing plan.</p>	
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10	Adjourn		Adjourned at 6:11 p.m.

Submitted by: 
Recorder