



**Santa Clara County
Community Advisory Committee Meeting
Q1 2025 Agenda**

DATE:	Tuesday, March 11, 2025
TIME:	2:00 PM – 3:00 PM
LOCATION:	Virtual via MicroSoft Teams

SUBJECT	NOTES
Welcome and Introductions	<p>Anthem Team:</p> <p>Patricia Lacanfora, MA LMFT BH Case Manager II</p> <p>David Lavine Program Manager Timely Access to Care</p> <p>Alana Pfeffinger, RPM</p> <p>Oanh Nguyen,</p> <p>Mina Farag, LTSS Liaison Manager</p> <p>Dolores Dalke, LTSS RN SC</p> <p>Rebecca Samaha, Regional Housing Program Manager</p> <p>Rodolfo Garcia, Community Outreach Manager</p> <p>Maryiat Yeranossyan, Strategy and Project Support</p> <p>Dolores Dalke, Anthem LTSS RN Service Coordinator</p> <p>Crystal Maciel,</p> <p>Dolores Dalke, HCMS LTSS</p> <p>Tuere Redus, Anthem LTSS Manager</p> <p>Linh Casas, Whole Health Director Medicaid</p> <p>Jennifer Gerhardt, Medicare DSNP</p> <p>CAC: Rami Keisari, CCS Medical Director</p> <p>Joe Tansek, SCC BH</p> <p>Tonya Robinson,</p> <p>Oanh Nguyen,</p> <p>Peter Saechao,</p>

	Arianne Mine SCCPHD
	Shilpa Joshi, Program Manager SCCPHD
	Hung Nguyen, BHSD QI Division Director
	Sarah Kim, Licensed Clinical Supervisor Central Wellness & Benefits Center
	Gustavo Lozano, PM II, BHSD QI
	Judy De Leon- Program Manager II- BHSD/CWBC
	Natalie McKelvey, BHSD School Linked Services
	Charisse Feldman, MCAH Director/PHN Manager, Public Health
	Catherine Aspiras, BHSD, Division Director School-Based Services
	Duy Le, BHSD
	Aida Pena, SCCPHD
	Elena Guzman, CHP
	Victoria Cholette, SCCPHD
	Beverly White-Macklin, Senior program Manager Public Health Santa Clara County. Black Infant Health, CHDOP, Teen Parent Support Program and Perinatal Equity Initiative Program
	John Sum, MD. Santa Clara County CCS
	Emma Mendez, Public Health Nurse Manager II, California Children's Services
	Nishma Samat-Singh, FIRST 5 Santa Clara County
	Rachel Potens, BHSD-QI
	Numbiya Aziz, Men's Wellness Provider / Employee Wellness Provider
	Gaudalupe Ramirez,
	Elizabeth Alavarez, Healthy Kids SF
	Samantha Lopez, SCC HHS
	Bibiana Vega, Healthy Kids San Francisco
	Leatrice Nguyen, Conifer Health
	Veronica Marquez, SCC HHS
	Grace Meregillano, SCC DPH
	Jaime Flores, SCC DPH
	Cecilia Taison,
	Thanh Le,

<p>Anthem Updates</p>	<p>Anthem Health Plan Updates:</p> <p>MOU Engagement:</p> <ul style="list-style-type: none"> • Health Plans are actively working with other entities to execute MOU including: <ul style="list-style-type: none"> ◦ Regional Center - separately ◦ County Welfare ◦ WIC ◦ County Behavioral Health ◦ In-Home Supportive Services (IHSS) • For some entities, MCPs are meeting together and other entities, MCPs are meeting separately. • All executed MOUs will be posted on MCPs website • DHCS recently released First 5 MOU. • MHP/DMC_ODS MOU: in discussion and engagement with County. • DHCS MOU Webpage - https://www.dhcs.ca.gov/Pages/MCPMOUS.aspx <p>PNA/CHA/CHIP Update: Linh Casas –</p> <p>Timely Access: David Lavine –</p> <p>Survey Update: Santa Clara's provider appointment availability survey for timely access standards from the DMHC in Q3 and Q4 last year. Standards: 10 business days for routine PCP, 48 hours for urgent PCP, includes weekends/holidays. Specialists have 15 business days for non-urgent, 48/96 hours for urgent depending on referral. Mental health follow-up appointments: 10 business days; after-hours calls require urgent responses within 30 mins.</p> <p>Santa Clara Compliance: Overall compliance rate: 60% (DMHC threshold: 70%). Non-urgent compliance: 65%, Urgent: 55%. Specialty compliance: 51%, impacted by new urgent standards including weekends/holidays.</p> <p>Improvement Programs: Monitoring with a timely access dashboard using real-time data from grievance enrollee surveys, and PAAS. Drill-down capability to identify problem areas at the group, clinic, and specialty level. Meetings with specific groups (e.g., RCMG) to address issues. Advanced Access Program incentivizing same/next-day scheduling for PCPS; automatic compliance for those certified</p> <p>Tonya Robinson: PEI/BIH-</p> <ul style="list-style-type: none"> - Health Disparities: Black maternal and infant health disparities prevalent in Santa Clara County and California. High rates of maternal morbidity and low birth rates among Black birthing persons - Programs Addressing Disparities: Focus on stress and structural racism, not socioeconomic factors <ul style="list-style-type: none"> - Black Infant Health (BIH): Services: Postpartum and prenatal education groups, one-on-one support, home visits by public health nurses - Prenatal Equity Initiative (PEI): Services: Preconception/interconception health promotion, personal support, doula services. Partners: Community-based organizations like Roots and Ujima - Role of Man Program: Focus: Fatherhood program with workshops, support, resource access - Program Outcomes (2015-2023): Maternal Hypertension: 7.7% in participants vs. 11%+ in non-participants (35% reduction)
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	<ul style="list-style-type: none"> - Gestational Diabetes: 13% in participants vs. 9% in non-participants (50% increased detection) - STIs: 89% in participants vs. 72% in non-participants (24% increase) - Postpartum Depression: 18% in participants vs. 27% in non-participants (33% decrease) - Doula Program Feedback: <ul style="list-style-type: none"> - 92% reported positive birth experiences - 85% reported faster postpartum recovery - Success Indicators: Highlights the importance of qualitative aspects valued by participants in BIH program. <p>Participant Satisfaction: Overall satisfaction with programs, positive clinical outcomes</p> <ul style="list-style-type: none"> - BIH Program Insights: Crisis support for homelessness and hospital navigation highly valued. 42% felt better-informed on medical decisions. Lifelong community connections valued - Doula & Ujima Services: 82% valued prenatal support, 94% during labor, 76% postpartum. 88% improved breastfeeding outcomes with lactation specialist access. Mama Africa Women's Group highly valued - Cultural Celebration: Cultural tailored care rated 9.4/10 by participants - Program Key Outcomes: 35% lower maternal hypertension in BIH participants. 100% satisfaction with doula services. 92% improved stress management through BIH. Stronger cultural identity (78%) - Referral Information: Online via sccbih.org. Phone: 408-937-2270. Contact Black Infant Health for direct referrals - Contacts: <ul style="list-style-type: none"> - Tanya Robinson, Black Infant Health Program Manager - Shilpa Joshi, Program Manager for PEI and Role of Man Program - Event Reminder: <ul style="list-style-type: none"> - Prenatal Equity Conference - Date: April 11th - Time: 9:30 AM to 3:00 PM - Virtual registration available <p>https://sccgov-org.zoom.us/webinar/register/WN_FxhcKKm5TR-0XopHU8tjWA#/registration</p> <p>Alana Pfeffinger: CalAIM Update:</p> <ul style="list-style-type: none"> - Current Status: All populations of focus are live; Birth Equity and Justice-Involved went live January 1, 2024. Individuals can receive both Doula Services and Enhanced Care Management (ECM) - Cal AIM Implementation Highlights: Effective January 1st: <ul style="list-style-type: none"> - Streamlined Authorization: ECM providers can initiate services for 30 days with payment, provided no other ECM provider is serving the member. Standardized Referral Guidelines: Uniformity in referral form requirements - Upcoming Changes: Closed Loop Referral Process: To be implemented July 2025. Transitional Rent: Expected January 1, 2026
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- Community Support Definitions: Ensuring network readiness by July 2025. Focus on asthma remediation, post-hospitalization care
 - Provider Opportunities: Interest in ECM and Community Support providers, focusing on children, youth, and birth equity populations
 - Meetings & Engagement: Cal AIM stakeholder meetings monthly. Next Santa Clara meeting scheduled for next Wednesday (1:00-3:00, exact time to be confirmed)
- Registration information for the upcoming PATH CPI meeting is available here: When: Mar 19, 2025 01:00 – 3:00 PM Pacific.
- Register in advance for this meeting:
- <https://chapmanconsult.zoom.us/meeting/register/tZ0td-gqzkrGtPOeDvOVpGCbsHy1WXJ2-0>
- Additional Resources: Information on engagement and updates available through monthly Cal AIM meetings

CAC Policies & Procedures:

- Community Advisory Committee Membership Survey - *Please share the following* – You will be receiving this survey because of your participation in our Community Advisory Committee (CAC). As a Department of Healthcare Services contractual requirement, Anthem Blue Cross must ensure its CAC membership reflects the general Medi-Cal Member population in its service area. In order to comply with this requirement, we are requesting your assistance with answering the following questions. Your valuable time and insight is greatly appreciated.
- Anthem recently hired a CAC Coordinator.

DEI: Participating in a workgroup that consists of San Francisco Health Plan, Santa Clara Family Health Plan, Kaiser, and Anthem to discuss how we will collaborate to fulfill the DEI APL requirements below.

Sharing and Exchange of Educational Resources

MCPs located in the same county must coordinate DEI trainings that are reflective and encompassing of the criteria outlined in this APL so that if an MCP, Subcontractor, Downstream Subcontractor, or Network Provider completes the training for one MCP within the same county, then they will have met the obligation to complete the training for all other MCPs within the same county and can provide an attestation of training completion. All MCP HEOs within a similar geographical region or county must collaborate on DEI training criteria to ensure alignment and accurate training records.



APL23-025 diversity equity inclusion.pdf

CHA/CHIP PHM/PNA: Community Health Assessment/ Community Health Improvement Plan Population Health Management/Population Needs Assessment :

Conducting regular meetings to discuss our Goals, Deliverables, Time Frames, Measurables, Budget, Funding Proposals, etc.

GOAL 1: Lead: By the end of 2025, all health plans will achieve DHCS's Bold Goal of exceeding the 50th percentile for children's preventative care measures in partnership with Santa Clara County Public Health Department (SCC PHD) by supporting the Childhood Lead Poisoning Prevention Program (CLPPP) through the expansion of the number of lead awareness and outreach events by xx%, through the contribution of resources, data sharing, and by assisting with the planning of targeted provider education campaigns and follow up services.

GOAL 2: Oral Health: By the end of 2025, all health plans will achieve DHCS's Bold Goal of exceeding the 50th percentile for children's preventive care measures, in Partnership with the County of Santa Clara Public Health Department (SCC PHD) to move forward the Oral Health Strategic Plan, through training, data sharing, promotion and outreach, and referrals to improve the oral-systemic health among members ages 1-20.

Latino Health Assessment:

- Housing and Neighborhood Conditions
- Access to Care
- Acute and Chronic Conditions
- Maternal and Child Health

We are currently collaborating on the 2024 Annual DHCS Strategy Deliverable Template for the CHA/CHIP.

We just completed the LHJ/MCP Worksheet.

CHIP Priorities: 1: Behavioral Health

2: Access to Care

3: Economic Opportunity

Funding Proposal:

Total membership in Santa Clara is 417,837 members.

SCFHP has 67% of membership with 280,606 members.

Anthem has 22% of the membership with 92,487 members.

Kaiser has 11% of the membership with 44,744 members

The financial support from Anthem would be \$15,400 based on the membership breakdown and our commitment based upon that membership breakdown. Let me know if you have any questions.

i. Cal-AIM Programs- Flyers: ECM, CS and CHW

Anthem is continuing to implement CalAIM in Santa Clara County with regular meetings occurring with key organizations.

1. [CalAIM Overview](#)
1. [Community Health Workers \(ca.gov\)](#)
2. [ECM Overview](#)
3. [CS Overview](#)

Community Health Worker:

[California Advancing and Innovating Medi-Cal \(CalAIM\) | Anthem Blue Cross](#)



CABC-CD-015396-22 Community Health Worker Overview_FINAL.pdf



CABC-CD-014756-22 EXPRESS CHW Certification Tool_FINAL.pdf



2541329 1000712CAMENABC Community Health Worker Member Flier UPD CM 04 21.pdf



2541329 1000712CAMSPABC Community Health Worker Member Flier UPD CM 04 21.pdf



ACAPEC-2783-21 CA Community Health Referral Form FINAL FILLABLE.pdf

Community Supports:

[California Advancing and Innovating Medi-Cal \(CalAIM\) | Anthem Blue Cross](#)



CA_CalAIMCSmemberreferrallform.pdf



CABC-CD-049197-24 CalAIM CS Flyer_FINAL 1.pdf



ENGLISH CalAIM CS One-Pager FINAL.pdf



CA_CalAIMILOSflier.
pdf

Enhanced Care Management:

When providers are fully contracted they are posted on our website under “Find Care.” [Find Care & Estimate Costs for Doctors Near You | Anthem.com](#) Type ECM Field-Based in the search bar. That is the most real time update as required by DHCS.

[California Advancing and Innovating Medi-Cal \(CalAIM\) | Anthem Blue Cross](#)

[Care Management | California Medicaid Anthem](#)

ECM Referral Form Updates:

- ECM referral forms (for both adults and children & youth) will be revised and become available in Jan 2025 to include [standardized referral language as set by the DHCS](#). You may continue using the current ECM referral forms until Jan 2025.



CA_CAID_ECMProviderDirectory.pdf



CalAIM ECM Referral Form_FINAL_Fillable.pdf



CalAIM-ECM Referral Form with Checklist_CABC-CD-047080-23 _V3_fillable.pdf



CABC-CD-049193-24 EXPRESS CalAIM ECM Flier_FINAL (1) 2.pdf



CABC-CD-053882-24 EXPRESS Hlthy Rwrds Prg Flier_FINAL.pdf

Benefits, Programs, and Services:

[Medi-Cal Plan Benefits and Programs | California Medicaid Anthem](#)

LiveHealth Online:

	SSCASA (Santa C)
Jan 2024	44
Feb	20
Mar	36
Apr	22
May	39
Jun	41
Jul	33
Aug	36
Sep	26
Oct	43
Nov	24
Dec	29

[Urgent Care - See a Doctor 24/7 - LiveHealth Online](#)



Live Health Online Flyer FINALv6.pdf



LHO User Instructions Flier.pdf



LHO Overview FINAL.pdf



LHO SP.pdf

Transportation/ModivCare Services:

[Non-emergency medical transportation — provider certification statements - Provider News \(anthem.com\)](#)



Transportation BR FINAL 12 21 (2).pdf



Transportation BR Flier Spanish HR 12 21.pdf

Healthy Rewards Program:

[Value-Added Benefits | California Medicaid Anthem](#)

Through our Healthy Rewards Program, members can earn \$10 to \$80 for getting certain health services. At the same time, you increase your practice's quality scores by providing members with the vaccinations, screening visits, and medications they need. When an Anthem member meets the eligibility criteria for the activities listed below and completes the service, they will earn the corresponding reward amount after the service is confirmed by the Claims department. The reward dollars are loaded into the member's Healthy Rewards account and can be redeemed for a variety of retail gift cards. Please ensure you file your claims timely so the members can receive their awards.



12292504 1057170CAMSPABC Healthy Rewards BR MKT 02 24.pdf



12292504 1057170CAMENABC Healthy Rewards BR MKT 02 24.pdf



CA_CAID_PU_HealthyRewardsProgram.pdf

Provider Flier only.

Provider Relations - Community Relations - Quality:

Care Coordination:

Health Care Services Management:

Case Management

Case Management referral forms and our Preservice Review form (which was recently revised). Attaching both here, and both can be downloaded from our provider website:

- [Case Management referral form](#)
- [Pre-Service Review form](#)

Updated Case Management Form




ACAPEC-2687-21 CA
Medi-Cal Care Mgm't

Updated Preservice Review Form



ACAPEC-3456-22 CA
GBD PA Request For

Utilization Reports:

	<ul style="list-style-type: none"> • Anthem membership • Behavioral Health Utilization • LiveHealth Online Utilization • Modivcare Transportation Utilization <div data-bbox="800 359 849 417" data-label="Image">  </div> <p>Q1 2025 Anthem Blue Cross _ Santa Clara CAC _Reports_3.11.2025.pdf</p>
Attendee Comments / Updates	<ol style="list-style-type: none"> 1. Perennial Equity Initiative: Upcoming Event: Conference on April 11th. Anthem sponsoring food for the conference. Attendance: In-person attendance full. Virtual attendance welcome. 2. Collaboration Inquiry (Numbiya Aziz): How can community health workers (CHWs) engage with Anthem Blue Cross? Are there Current Training Programs? Example: NAMI's peer specialist certification, Santa Clara County and Catholic Charities certification programs. What happens after obtaining certification? Is there a pathway or connection to work with Anthem Blue Cross? Seeking opportunities for CHWs to collaborate or engage with Anthem Blue Cross programs and initiatives. 3. (Alana Pfeffinger): Recent meeting with Catholic Charities. Contract Structure: Anthem contracts with supervising providers. Providers oversee CHWs and ensure compliance and certification maintenance. Contact info provided for more details. Description of CHW benefit and requirements available. Alignment with Santa Clara Family Health Plan and DHCS guidance.e
Closing Remarks & Adjournment	<p>Quarter 2 CAC Meeting will be conducted on June 10, 2025 @ 2:00 pm</p>



www.anthem.com/ca/medi-cal

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We can translate this at no cost. Call the customer service number on your member ID card.

English

Podemos traducir esto gratuitamente. Llame al número de servicio de atención al cliente que aparece en su tarjeta de identificación (ID Card).

Spanish

我們可以免費為您提供翻譯版本。請撥打您ID卡上所列的電話號碼洽詢客戶服務中心。

Chinese

Peb txhais tau qhov no pub dawb. Hu mus rau qhov chaw pab neeg tus naj npawb xov tooj nyob rau ntawm koj daim ID ua mej zeej.

Hmong

Мы можем перевести это бесплатно. Позвоните в отдел обслуживания участников плана по номеру, указанному в вашей карточке участника плана (ID Card).

Russian

Maaari namin itong isalin-wika nang walang bayad. Paki tawagan ang numero ng customer service sa inyong ID card na pang miyembro.

Tagalog

Chúng tôi có thể phiên dịch văn bản này miễn phí. Xin gọi văn phòng dịch vụ hội viên qua số điện thoại ghi trên thẻ ID (thẻ hội viên) của quý vị.

Vietnamese