



**San Francisco County  
Community Advisory Committee Meeting  
Q2 2024 Agenda**

<b>DATE:</b>	Friday, August 16, 2024
<b>TIME:</b>	1:00 PM – 2:00 PM
<b>LOCATION:</b>	Virtual via MicroSoft Teams

<b>SUBJECT</b>	<b>NOTES</b>
<b>Welcome and Introductions</b>	<p>Kalil Macklin: Program Manager            Rodolfo Garcia: Community Outreach Manager            Rachel Gandt: Community Relations Rep            Alana Pfeffinger: Regional Program Manager Cal-AIM            David Lavine: Program manager timely Access            Patricia Lacanfora: BH Case Manager            Maryiat Yeranossyan: Medicaid Strategy and Support Team            Terri Thomas: Revenue Cycle Manager HealthRight 360            Rocky O'Connor: Community Health Worker at St. Anthony's Foundation            Diana: Registered Nurse at St. Anthony's Foundation            Marlina Contreras: St. Anthony's Foundation            Alexis Cobbins: DEI Belonging and Accessibility Manager SFHSA            Andrew Linzer: ECM Program Manager at St. Anthony's Foundation            Carlos Barr:            Jessica Soriano:            Rondale Holloway: State Council on developmental disabilities            Wilma Batiste: UCSF Helen Diller Family Comprehensive Cancer Center. Abundant life Faith in health community ministries network</p>
<b>Anthem Updates</b>	<p><b>Anthem Health Plan Updates:            David Lavine: Timely Access Presentation</b></p>

- survey is from mid-July to mid-November. Started July 10th this year, we are trying to complete our survey before the holidays.
- each provider group is scored based on their compliance with these timely access standards... 2 days or 48 hours for an urgent or sick appointment for PCP's, 96 hours for specialists this year.
- Urgent appointment waiting times will include weekends on holidays.
- The routine appointment standards have not changed.
- It is ten business days for a primary care appointment and fifteen business days for a specialty care appointment.
- then there is a new metric that started last year, that is ten business days for a non-physician.
- Mental health follow up appointment practitioners must also maintain compliance with the timely access standards for the afterhours survey by instructing a caller to hang up and dial 911 or go to the nearest ER in the event of an emergency, and connecting a caller with a medical provider within 30 minutes for an urgent medical condition.
- We provide incentives for compliance.
- We recently implemented the medical value payment program, or MVP or provider groups can earn a monetary award in two domains, HEDIS and improvement activities.
- Providers can earn a per capita award if they meet or exceed the 50th percentile for specific HEDIS measures, such as timely access to care or if they complete anthem designated improvement activities. An example would be achieving 85% compliance on the posts for urgent care appointments.
- Groups can be paid up to \$1.50 per member per month for meeting timely access goals.
- There are also penalties for noncompliance, such as corrective action plans or caps for non-compliant provider groups as part of the CAP.
- providers must include policies and procedures and training at Test stations indicating they're taking the steps to meet timely access requirements.
- Provider groups with less than a 70% compliance rate for urgent or non-urgent appointments receive a cap.
- what can you do to help me timely access requirements? Well, for one, you can post the timely access flyer in or have providers post the timely access flyer and their front office.
- Train your front office scheduling staff in timely access.
- Many times providers will be aware of the timely access standards, but they're schedulers are not, and since they're the ones who do the scheduling, that's a problem.
- Have a policy and procedure in place to leave appointments available for last minute, urgent or sick appointments.
- Our urgent appointment rate of compliance is a problem area.
- This year, many providers don't know that they can actually use telehealth appointments for timely access because telehealth is more convenient.
- utilizing telehealth can make the difference.
- And finally, make sure you update Anthem immediately with any demographic changes, such as change in phone number, email.
- A big problem for us is our low response rates and having the correct contact information will make a big difference.

**CAC Policies & Procedures:**

**MOU Engagement:**

1. IHSS/Child Welfare
2. SSA Data Sharing
3. LHD/WIC
4. MHP/DMC\_ODS
5. GGRC

**Adult Expansion:**

**Anthem:** Adult Expansion A26-49 is to ensure individuals transitioning from restricted scope Medi-Cal or are otherwise uninsured to full-scope Medi-Cal maintain their existing Primary Care Provider (PCP) assignments to the maximum extent possible to minimize disruptions in services. As these individuals transition to full scope Medi-Cal, California has prioritized two goals: 1) Maintain PCP assignment to the maximum extent possible; and 2) Support and strengthen traditional county health providers who treat a high volume of uninsured and Medi-Cal patients. Working on establishing a stand-alone DAA with SFDPH. SFTP Site is set up. Test files have successfully been exchanged. Data will be exchanged once DAA is established. We met with SFDPH on 8/8 to further discuss the DAA.



APL 23-031 Adult Expansion Final\_Clean.pdf

**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

**UCSF Termination:**

*Good News & Extension* UC Health System

- agreement reached.
- All the UC Health contracts were fully executed in the beginning of April.
- Anthem’s Public Relations microsite: [anthem.com/ca/uhealth/](https://anthem.com/ca/uhealth/)

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

Met with Priscilla Chu (SFDPH), Bernadette Gates (SFDPH), Suzanne Samuel (SFHP), and Gretchen Shanofsky (Kaiser Permanente) to initiate conversations on meaningful participation in CHA/CHIP processes and co-developing SMART Goals that align with DHCS overall BOLD GOALS. We met the DHCS requirement and can attest to having engaged in conversation and started to develop our first SMART Goal.

By December 2025, San Francisco County and San Francisco, CalAIM Managed Care Providers (MCP) Anthem, Kaiser and the San Francisco Health Plan will work collaboratively to develop targeted MCP-specific interventions to improve the percentage of children aged 0 to 30 months who receive well-child visits to meet or exceed the DHCS 2023 MPL benchmarks and decrease disparities in rates for Black/African American and LatinX children by 20% when compared with the overall rates for these measures. **Confirmed on 1/30/24**

We just completed the LHJ/MCP Worksheet.

- CHIP Priorities: 1: Behavioral Health  
2: Access to Care

3: Economic Opportunity  
Funding Proposal (\$61,750)

- Member data for May 1:  
Anthem 34,311, 14% = \$8,645;  
Kaiser, 19,543, 8% = \$4,940;  
SFHP, 186,100, 78% = \$48,165. =  
239,954 Total Members in SF County

**LiveHealth Online:**

Kalil: Live Health Online can be used by everyone. Encourage our members to use this platform. Will continue to talk about it until our utilization increases.

[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:**

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.

**CalAIM:**

Anthem is continuing to implement CalAIM in San Francisco County with regular meetings occurring with key organizations.

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



CABC-CD-049197-24 CalAIM CS Flyer\_FINAL 1.pdf



ENGLISH CalAIM CS One-Pager\_FINAL.pdf



CA\_CalAIMILOSflier.pdf

**Enhanced Care Management:**

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

[Care Management | California Medicaid Anthem](#)



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

**Planning For the End of the Continuous Coverage Requirement when the Medi-Cal COVID-19 Public Health Emergency (PHE) Ends:**

Anthem:

- States **began** the redetermination process by **April 30, 2023**; and,
- States will have up to 14 months to complete all redeterminations (i.e., no later than May 31, 2024).

[Medicaid Renewal & Disenrollment Coverage Options | Anthem](#)

[Check Your Health Benefits Eligibility | Anthem \(myhealthbenefitfinder.com\)](#)

<https://www.readyrenew.com/835/index.html?m=ca&c=4&e=e>

[https://players.brightcove.net/3639471564001/QBcaf6zgr\\_default/index.html?videoid=6325324769112](https://players.brightcove.net/3639471564001/QBcaf6zgr_default/index.html?videoid=6325324769112)



6155712 1033874CAMENABS Ready Set Renew Buckslip UPD 08 22.pdf



6155712 1033874CAMSPABS Ready Set Renew Buckslip UPD 08 22.pdf

[Keep Your Medi-Cal \(socialpresskit.com\)](http://socialpresskit.com)

**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:

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

**Updated Case Management Form**



ACAPEC-2687-21 CA  
Medi-Cal Care Mgm

**Updated Preservice Review Form**



ACAPEC-3456-22 CA  
GBD PA Request For

**Utilization Reports:**

- Membership
- LiveHealth Online
- Modivcare Transportation



Q3 2024 Anthem Blue Cross \_ San Francisco CAC \_Reports\_8.16.2024.pdf

**Attendee Comments / Updates**

1. if the goal is to spread the word about Anthem CAC meetings, it is imperative for Anthem to post your meetings on your website. I see that you're creating apps and you other technical things that you're creating. I just don't understand why this CAC meetings are not on your website, considering the fact that attendance for Members are relatively low and it seems like a lot of professionals are here. I don't see a lot of members and a lot of Members do not have access to Facebook and it's still on Facebook, not your website. My hope is that you will implement that on your website, especially with your newly implemented policies and procedures.



	<p>2. My second input is to discuss designated record set.          It's my understanding that it's that a lot of antheams representatives are not aware of. What designated record set are so that when the Member calls in or requests their designated record set, they're either met with "call your physician or we don't have records" and the Members are dismissed.          It's my understanding that a member contacted Anthem, but it designated record set. They were dismissed to the point where they had to follow the a complaint with Department of Managed Healthcare Department, managed healthcare notified Anthem of the complaint and that's when the member received their designated record set.          Unfortunately, the Member actually didn't receive it.          The antheams team sent it over to the address that the former member used to live at 6 to 8 years ago.          They never confirmed with the former member what their current address was, and if the member had been given an opportunity to write the request for their designated record set, the Member would have taken the time to express what they currently live and therefore the PHI would have never been sent to the wrong address.</p>
<p><b>Closing Remarks &amp; Adjournment</b></p>	<p>1. Kalil will reach out to someone from the compliance grievance department and see if they can come give us a presentation on what that process looks like.          2. Send updated list of counties that Anthem provides Med-Cal services to the group. (Completed)          3. Does Anthem Reimburse for Public Transportation?</p>

**[www.anthem.com/ca/medi-cal](http://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.	<i>English</i>
Podemos traducir esto gratuitamente. Llame al número de servicio de atención al cliente que aparece en su tarjeta de identificación (ID Card).	<i>Spanish</i>
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。	<i>Chinese</i>
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.	<i>Hmong</i>
Мы можем перевести это бесплатно. Позвоните в отдел обслуживания участников плана по номеру, указанному в вашей карточке участника плана (ID Card).	<i>Russian</i>
Maaari namin itong isalin-wika nang walang bayad. Paki tawagan ang numero ng customer service sa inyong ID card na pang miyembro.	<i>Tagalog</i>
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.	<i>Vietnamese</i>