

San Diego Member Advisory Committee Meeting Minutes

March 9, 2022, 01:30PM

Council Members

Council Members	Committee Members Absent	Blues Shield Promise Health Plan
<ul style="list-style-type: none"> • Member A, Blue Shield of California Promise Health Plan Member • Member B, Blue Shield of California Promise Health Plan Member • Member C, Blue Shield of California Promise Health Plan Member • Member D, Blue Shield of California Promise Health Plan Member • Aidee Roman, SD 211 • Jack Dailey, Consumer Center for Health Education and Advocacy Legal Aid Society of San Diego, Inc. • Rick Ochocki, National Alliance Mental Illness 	<ul style="list-style-type: none"> • Leticia Zuno, Access to Independence 	<ul style="list-style-type: none"> • Araceli Garcia, Program Manager, Sr. • Dr. James Cruz, Chief Medical Officer • Jennifer Schirmer, Vice President, Medi-Cal Growth • Kristen Cerf, President, and CEO Promise • Laretta Kim, Sr. Manager, Duels Program Integrity • Ron Bauer, Program Manager Quality • Sandra Rose, Sr. Director, Community, and Provider Engagement • Stephanie Stephens, Sr. Manager, Strategic Outreach Initiatives

Topic	Presenter	Decisions/Action items
<p>Welcome and Introductions Araceli and Sandra Rose welcomed the committee members and proceeded with introductions, called the meeting to order at 1:30pm</p>	<p>Sandra Rose</p>	
<p>Blue Shield Promise Health Plan Updates</p> <p>Jennifer Schirmer our new Vice president of Medi-Cal Growth introduced herself to the committee. She comes to us with more than 25 years in the health insurance industry. Most of that time spent in the Medi-Cal space. She is very excited to be working with this Promise team in a different role and continuing to build out product and work with the communities in both San Diego and Los Angeles.</p> <p>Jennifer updated the committee on the state bid protests process. It has come to an end, and it has resolved itself. We are thrilled to be remaining as a health plan in the San Diego County as well as Los Angeles County. We continue to look forward to additional growth opportunities for the Medi-Cal line of business across the state.</p> <p>Kristen Cerf shared her happiness and gratitude and thanked everyone for all the letters that we received in support. She stated that we now can focus on what really matters.</p> <p>Member D asked how long until Blue Shield Promise will have to resubmit or renew our contract?</p>	<p>Jennifer Schirmer</p>	

<ul style="list-style-type: none"> • Member were asked a few questions about some of our supplemental benefits, over the counter benefits, health, grocery, and modification. • Members stated that they like the over-the-counter benefits, they used it every single quarter. Using this benefit both in store and online. There was a learning curve when using this benefit online. So, they felt like they needed to ask a friend or family for help to place their orders. • Members were really interested in the healthy grocery benefit. They were concerns about a food benefit and food insecurity, but also how valuable a food benefit would be and to be able to use it in stores. <p><u>Member Newsletter</u></p> <p>Ron Bauer from our member experience team spoke about our Newsletter. His team makes sure that our members are getting the care that they need in a timely way.</p> <ul style="list-style-type: none"> • Timing: 2 newsletters sent to all members per year – spring and fall. • Purpose: to provide mandated health information to members. Topics are selected by the state – vaping, breastfeeding, flu, etc. • Changes in 2021/2022 <ul style="list-style-type: none"> • Improved look • Increased from 4 to 8 pages to include both mandated and additional topics. • Changes in 2023 <ul style="list-style-type: none"> • Increase translations from 1 language (Spanish) to all threshold languages. • Versions for San Diego and Los Angeles will be different to reflect local resources. <p><u>Survey Results</u></p> <p>What do you like about the Newsletter?</p> <ul style="list-style-type: none"> • Very informative / It has plenty of information. • I like everything from the newsletter. 	<p>Ron Bauer</p>	
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<ul style="list-style-type: none"> • Make the message more concise and less wordy to avoid confusion. • It has a good layout and is easy to read, good topics. <p>What changes do you recommend?</p> <ul style="list-style-type: none"> • Broader perspective on the subject matter / an article on restless leg syndrome • Certain information needs to be highlighted or printed larger such as the free transportation service, the interpretation service and filing a grievance. • I would like to see more photos. <p>What other topics do you recommend?</p> <ul style="list-style-type: none"> • Restless leg syndrome <p>Rate these topics:</p> <ul style="list-style-type: none"> • Parental support - Resources for families, how to navigate care for family 7.88 • Home care support - family caregivers 7.75 • Maternity program - doula and more 6.63 • Caregiver support 6.13 • Tele-Health 6 • What is available at your Community Resource Center (LA) 5.75 • Wellvolution Benefits - headspace, losing weight, quitting smoking 4.88 • Navigating your care (how to access the most appropriate care, when and where you need it) 4.75 • Mental Health 2.75 		
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<ul style="list-style-type: none"> Diabetes and Prediabetes 2.5 <p>Member D stated that she had issues with completing the survey. She used her cell phone, and she couldn't fill it out.</p> <p>Sandra asked the committee if they had any technical issues with the survey to please let us know and we can discuss different ways for them to provide their feedback.</p> <p>Member D added that she loves the "Ask Dr. Cruz" section but thinks it would be best to create a newsletter that is directed to seniors and a different one that is dedicated for families or individuals.</p> <p><u>Medi-Cal Redetermination</u></p> <p>Helping Members keep their coverage through redetermination.</p> <p>Sandra provided an overview on the Redetermination process that will start back up in April of this year.</p> <ul style="list-style-type: none"> Redetermination is an annual process for Medi-Cal beneficiaries go through at least once a year to see if they still are eligible for Medi-Cal. It was put on pause for three years during the pandemic, but it going to start back up next month. <p>Member D stated that members don't understand the word Redetermination. She thinks it's best to use the word renewal. She thinks people with lower compression will understand that better and even if we put it in the member's native language they may not understand and they may not fill out the forms for that reason.</p> <p>Sandra shared.</p> <ul style="list-style-type: none"> Redetermination will start in April, and the first group that must renew their Medi-Cal are people whose renewal date is in June. So, for Medi-Cal beneficiaries the 	<p>Sandra Rose</p>	
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<p>month in which they first got their Medi-Cal is when they will need to renew on a yearly basis.</p> <ul style="list-style-type: none"> • About half of Medi-Cal beneficiaries will never see a Redetermination packet, they will get a letter in the mail that says you're renewed again. • There is a process that does these renewals in the back end that the county social services department verifies eligibility. • They use state and federal databases to verify member's income and other criteria. • For the other half of Medi-Cal beneficiaries this process does not pass successfully, and then the county cannot verify it, automatically, they will mail those members a renewal packet which will be yellow. • Members will have 60 days to return their forms with all their supporting documents. • The packet will have a returning address and a due date. • Members can also do the renewal online. • If it is not completed in those 60 days Medi-Cal coverage will end. • Once you have been disenrolled Medi-Cal beneficiaries will have 90 days on an On-hold status. Benefits will continue during this time to give you time to fill out the paperwork and send back the renewal packet. • Our Enrollment Specialists and our community resources center representatives can help fill out these forms and contact you to the county office. <p>High Touch Support</p> <p>Help Members navigate the redetermination process.</p> <ul style="list-style-type: none"> • Provide telephonic and in-person assistance with renewal paperwork, troubleshooting and address updates. <ul style="list-style-type: none"> • Growth & Retention Call Center • Community/Information Resource Centers • Conduct additional outreach in areas with high levels of members facing homeless or housing insecurities. 		
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360 Touchpoints

At every touchpoint, remind members to update their contact info and recertify.

- With every contact, remind members to update their contact information, recertify and connect them to enrollment support services.
- Providers and CBOs are encouraged to sign up for the DHCS Coverage Ambassador Program for information and resources. Blue Shield Promise providers may access member eligibility reports on the provider portal.

Outreach and Member Communications

Optimize multiple communications channels and partnerships.

- Use an omni-channel approach, including direct mail, social media, health fairs and community events, to improve member awareness and offer a clear call to action.
- Provide informational sessions to providers and CBOs to help conduct member outreach.

County Partnerships

Coordinate with county agencies to update member contact information.

- Collaborate with county social service agencies (Los Angeles Department of Public Social Services through L.A. Care; San Diego Health and Human Services through Healthy San Diego) to update member contact information, coordinate outreach efforts and share DHCS and county collateral to ensure consistent messages to members.

Renewal reminder prepares Members of upcoming changes (direct mail #1)

On-Hold” notice prompts Members to act to restore their benefits (direct mail #2)

DHCS Keep Medi-Cal Coverage Campaign

- DHCS launched a statewide awareness campaign that will run from February 2023 through June 2024

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<ul style="list-style-type: none"> • The campaign will reach individuals across traditional and digital media channels, such as: <ul style="list-style-type: none"> • Radio • Facebook • Display advertising. • Out-of-home advertising (billboards and public transit signage) • Direct mail • Text messaging • Email • Collateral materials, including flyers, one-page fact sheets, and infographics, are available for government agencies, county enrollment offices, and community partners. <p>KeepMediCalCoverage.org</p> <p><u>Discussion:</u></p> <p>1. What was your experience with redetermination before the pandemic?</p> <p>Member D shared that she has been on Medi-Cal for a long time. She didn't always receive a renew packet. She thinks that the state needs to lower the literacy level for more members to understand it. She remembers they asked her about her income and other questions and to her it was easy, but she does not think that is the case for everyone.</p> <p>Member A added that it is very difficult for him to fill out these forms. His wife helps him fill them out and he asked if he would get his forms in April?</p> <p>Sandra answered that his forms most likely will come in on the month that he originally applied. Some people will go through the automatic renew process and they won't receive anything and just be renewed another year.</p> <p>Member A asked if this is once per year?</p>		
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<p>Sandra answered yes once a year all Medi-Cal beneficiaries will be asked to renew and reminded everyone that not everyone will receive a renewal packet as they will be automatically renew because they get it through Social Security Administration.</p> <p>2. What is your organization doing to remind and/or assist Medi-Cal beneficiaries with redetermination?</p> <p>Rick from NAMI San Diego asked for a statement/paragraph from us to provide the verbiage to his clients' newsletter. He also sheared that he partners with the county of San Diego to put on the wellness expo at the same time as their NAMI walks. He hasn't seen anyone from Blue Shield to be representative there and he would like to invite us to these events to speak on this subject.</p> <p>Jack from legal aid added that they are working with stakeholders to help train them on the specifics of what's new regarding this renewal process that existed prior to the pandemic because they learned a lot with regards to how renewals are completed and how to do thing a little bit more efficiently. Prior to the pandemic we didn't have an asset verification system. So, for certain categories Medi-Cal folks must show the county that their assets are under the asset limitation. Also, a report came out that the county changed to the asset limitation going up from 2,000 to 130,000 which is amazing. Now members can also now check online and send the verifications. And he stated that the most common reason for coverage is for non-renewing.</p> <p>3. How do we reach members who the state has lost contact with?</p> <p>4. What insights can you share about Medi-Cal beneficiaries, the renewal process and/or things we should keep in mind as redetermination starts again?</p>		<p>Araceli to follow up with Rick from NAMI to provide him language for his newsletter.</p> <p>Araceli to find out when the NAMI walk events are so we can participate.</p>
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<p>Member D added that at her doctor’s office they always asks her to update her information. She thinks that we should use public data base to look up members that we have lost contact with and thinks providers should share any new information for our members as well.</p> <p>Member C recommended that we participate in fairs at schools or universities. She feels that many kids helping their parents fill out these forms. So, she thinks that would help.</p> <p>Member D added that we should set up at different areas around town like swamp meets and famers markets to assist members fill out these forms.</p> <p>Sandra reminded the committee that we are here to assist with these forms on the phone with our enrollment specialist and through our CBOs throughout the county.</p> <p>Community Advisory Committee</p> <p>Stephanie Stephens provided an overview on changes to the Member Advisory Committee and Provider Advisory Council in 2024</p> <p>New requirement states that we must have a community advisory committee to give us input and feedback on out programs, policies, and initiatives to make sure they meet the needs of our members. And we do that today through this advisory committee and through our provider advisory committee.</p> <ul style="list-style-type: none"> • The state is asking us to bring these two committees together. • First change is that we will combine our two advisory committees into a community advisory committee in 2024 and the name change. <p><u>Today</u> Member Advisory Committee (MAC) Provider Advisory Council (PAC)</p> <p><u>Future State 2024</u> Community Advisory Committee (CAC)</p>	<p>Stephanie Stephens</p>	
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What is changing?

- Selection Committee,
 - Will help us find and select the participant of community advisory committee.
 - Will assist to make sure we select representatives that are from our medical population that we serve.
 - this selection committee is also going to help us create a participant questionnaire that every one of our participants is going to fill out.
 - Will help create an interview guide, this will help ask to get to know our member advisory committee members.
- Term limits
 - Committee participants will now commit to serving for two years. They can absolutely serve longer if they choose to.
- Meeting Management
 - Our selection committee is going to help us recruit. we will need to fill any vacant slots within 60 days.
 - We will need to post on our website our meeting minutes and dates and times of our meetings.
 - we need to keep our meeting minutes for certain period so that we can make them available to the state when they ask for them.
 - we now need to submit an annual report with a list of our participants because the state wants to ensure that it is representative of the population that we serve.
 - The state will now be hosting a medical member advisory committee and we are asked to identify one member from our committee advisory to participate in the state committee.
- June 2023
 - We are going to ask you to help us get this all-in order.
 - Help us create what we need for our selection committee.

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- o identify anyone you know who is interested in participating and helping us build this moving forward.

Jack asked regarding MMP (Medicare/Medi-Cal Plan) member representation in the new 2024. Is there anyone from that group in our current committee?

Sandra answered yes, as Laretta mentioned in her presentation, we actively joining both committees together.

Julianne Holloway added that the D-SNP team has integrated to this group both in San Diego and Los Angeles Counties to meet that requirement and we are setting up a third committee group for all other contracted counties. And they are trying to get additional ombudsman support for those meetings as well.

Sandra emphasized that Blue Shield has been doing this for a long time. And they state has made it very clear to contractors that they are serious about the feedback and input our committee members provide. In her mind are best in class and what you'll see is that we have a lot of different committees, like our quality improvement, Health equity committees. She encourages everyone to provide their feedback and input. All our leaders have many years in the Medi-Cal space, and they have never seen these robust requirements that stipulates who needs to be on the committee, the type of information that needs to be covered to the extent that it needs to be covered and evidence that not only was informed, but that we do something about the input we receive.

Jack added that whenever he has been asked regarding health plans, he has always mentioned that we are doing an excellent job. And they have asked Araceli to speak at workgroups and appreciates how sincerely we take this responsibility. He also give Sandra Rose credit on her sentiments here with regards to how seriously were taking it. And DHCS is also taking this very seriously and encourages our committee members to join the state Consumer Advisory Council, because you will be providing direct feedback to leaders.

Julianne Holloway to meet with Jack Dailey offline regarding MMP membership requirements and setting up additional support for the additional counties.

<p><u>Ombudsman:</u></p> <p>CONSUMER CENTER FOR HEALTH EDUCATION AND ADVOCACY A project of the Legal Aid Society of San Diego</p> <p>Presented by Jack Dailey Health Consumer Alliance Coordinator/Director of Policy and Training</p> <p><u>The Consumer Center or "CCHEA"</u></p> <ul style="list-style-type: none"> ○ Our team is comprised of knowledgeable consumer health advocates and experienced health care attorneys. ○ We help educate consumers about and navigate health systems. ○ We advocate for consumers to obtain/maintain needed coverage and access needed services. ○ We serve as the Dept. of Health Care Services' Medicare Medi-Cal Ombuds Program (MMOP); Dept. of Managed Health Care Consumer Outreach and Assistance (COAP) partners; and Covered California Consumer Assistance Program. <p><u>Updates for Members</u></p> <ul style="list-style-type: none"> • Cal MediConnect transition to Medicare Medi-Cal Plan largely successful • Renewals to begin April 1st, start with June renewal month. Key points: <ul style="list-style-type: none"> • Update your address with the county. • New renewal rules in effect: Asset Verification System, improvements to ex part review, verbal sworn statements still available. • LASSD's Consumer Center is here to help! 1-877-734-3258. • See our new "Keep Your Coverage after the COVID Emergency" information page on our website: www.healthconsumer.org/covid19/#Keepingmedi-cal or scan. 	<p>Jack Dailey</p>	
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<p>this QR code.</p> <p>Trends and Questions: Focus on Renewals of Medi-Cal and MMP Transition</p> <ul style="list-style-type: none"> • Before today, have BSP MAC members heard that Medi-Cal Renewals were going to start? If so, from what sources? • When you learned of Medi-Cal renewals starting again (either today or previously), did that general any concerns or questions for you or others in the community? • If you are a Blue Shield TotalDual Plan member (the new MMP), what were your impressions (or others you're aware of) regarding the transition from CMC to the new MMP? <p>Contact information:</p> <p>The Consumer Center for Health Education & Advocacy Toll-Free: 1-877-734-3258 Fax: 619-471-2782 Key Managers:</p> <ul style="list-style-type: none"> • Jack Dailey, HCA Coordinator/Director of Policy, and Training - 619-471-2606 or JackD@lassd.org • Alexandria Forester, Senior Attorney – 619-471-2686, AlexandriaF@lassd.org. • Carol Neidenberg, Program Manager - 619-471-2612 or CarolN@CCHEA.org • Websites – www.lassd.org and www.HealthConsumer.org <p>Open Discussion</p> <p>Member D stated that she found out about the subject of the renewal process coming back at our last committee meeting. Other than that, she has not heard about it all.</p> <p>Jack stated that is very helpful feedback and he imagine that will start to change as there are more people talking about it.</p>		
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<p>Rick added that they had participants call them panicked after they saw an article. It didn't have much information.</p> <p>Jack stated that they also heard some calls come into their office, when news articles came out. The article stated that 15 million people in California must complete renewals, and that state anticipates anywhere between 1.2 and 2.3 million will lose their Medi-Cal services through the renewal process. This was alarming to the public.</p> <p>Sandra shared what the renewal forms look likes now and want over each page.</p> <p>Jack added that these new forms are an improvement. He stated that they are aware that family members assist with filling out these forms, but the county has these forms in all threshold languages and they can set up calls with interpretation service to assist.</p> <p>Member D added that there are a lot of illiterate people that need help. Renewal assistance services need to be promoted and made accessible to more people. And she thinks more people would respond.</p> <p>Jack added that the county adds a language card in all renewal packets with even more languages if they need help. For members that are illiterate they typically refer to enrollment specialist and case manager to assist these members. They also advocate for the county to accommodate people and meet them where they're at and assist them because that's the county's responsibility. They are holding the government entities responsible for doing what they're supposed to do under the law. Always prioritizing helping people out and making sure that they can navigate to the quickest resolution.</p> <p>Sandra added that we are aware that the county telephone lines will have long wait times and reminding everyone that we have a call center team that can help our members with their online accounts and navigate through the process.</p> <p>Sandra stated that we can provide education to our community-based organizations and come out a do information session and for our members we can help walk them all the way through the process.</p>		
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Jack agrees and added that he remembers several years ago, the state did not want the plans engaging Medi-Cal members directly for retention efforts. He is thankful that is a philosophy that they've moved away from and they're bring plans back in as partners in this outreach effort. It all hands-on deck to try and communicate engage beneficiaries to make sure that they're navigate through this process.

Jennifer thanked the committee for their participation and conversation. She looks forward to the future.

Closing Remarks

Meeting ended at 3:00PM

Sandra Rose

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