

**COHS Planning and Implementation Committee
Meeting Notes
February 22, 2008**

In Attendance

Implementation Committee Members: Naomi Fuchs, Sean Gaskie, Michael Humphrey, Joann Keyston, Jack Neureuter, Jim McSweeney, Irma Oregón, Nancy Oswald, Kelly Pfeifer, Kirk Pappas, Don Ransom, Evan Rayner, Rita Scardaci (for Mary Maddux-González), Kim Seamans (for Marion Deeds), Michael Smith, Jane Stone (for Mich Riccioni), Madrone Williams

Staff and Consultants: Alison Lobb, Lynn Scuri

Partnership HealthPlan: Jack Horn

Audience: Kathy Betts, Geza Kadar, Susan Keller, Barbara MacKenzie

Absent: Dianna Ball, Damon Doss, Paul Duranczyk, Joan Froess, Barbara Graves, Ann McGee, Diane Kaljian, Mary Szecsey, James Vaughn, Susan Zibblatt

Welcome, Introductions, Announcements

Ms. Lynn Scuri opened the meeting and welcomed the Planning and Implementation Committee and guests and asked that individuals introduce themselves.

Ms. Scuri then presented the agenda for the meeting. The request was made to move up the Dr. Kelly Pfeifer's presentation on Access to Specialty Physician Services. The goals of the meeting were agreed. There were no announcements.

Ms. Naomi Fuchs gave a brief update on the activities of the Health Action Council. She reported that the Council meets in intervals of approximately one month, and that it currently has two active taskforces. The Council is in the process of narrowing its focus around two main issues: (1) aspects of health and wellness, and (2) the healthcare delivery system in Sonoma County. Ms. Scuri stated that links to the Health Action Council will be posted on the Managed Medi-Cal Planning Group website (<http://www.sonoma-county.org/health/ph/mmc/>).

Partnership Updates and Rate Discussions

Mr. Jack Horn began with a brief update of Partnership HealthPlan operations. Partnership currently is being audited by the State and also by HEDIS.

Mr. Horn also stated that all aspects of the rate discussion are moving along slowly. One piece of information that Partnership recently received is that the community clinics account for 84% of Medi-Cal service provision in Sonoma County. The Governor and legislature have approved a 10% cut in Medi-Cal rates, but all indications are that the amount of cuts will be adjusted as budget discussions continue. A 10% cut in fee-for-service Medi-Cal translates to about a 7-8% cut in rates to Partnership. Partnership does not see the State budgetary constraints as a one-year problem, but as a longer term situation that requires a lot of work and planning on its part. Mr. Horn referred to the three-point strategy PHP has developed to deal with low levels of funding:

1. Explore cost savings.

2. Diversify business activities.
3. Legislation/advocacy.

Mr. Horn stated that Partnership has contacted State Senators Michael Machado and Patricia Wiggins as well as Assembly Members Noreen Evans and Lois Wolk to involve them in securing adequate rates. Partnership also has contacted Kim Belshé and the Governor's Office.

Specialty Physician Services

Dr. Kelly Pfeifer made a presentation of the existing levels of access to specialists in Sonoma County and possible, innovative solutions. The presentation is available at the Managed Medi-Cal Planning Group website (<http://www.sonoma-county.org/health/ph/mmc/>).

The main points of the discussion following the presentation are:

- The use of telemedicine/telehealth should be explored.
- Some constraints could be dealt with on a regional basis in partnership with other counties.
- Existing networks and partnerships should be inventoried and mapped out to see what resources are already available.
- Non-traditional reimbursement methods will be needed to support alternative forms of service provision. (But concern was expressed that creative solutions still will need to fit in with the larger, Medi-Cal structures.)
- If the cognitive aspects of specialty care could be made more readily available (e.g., through training mid-level healthcare providers), this could free up funding for the procedural aspects of specialty care.
- Healdsburg hospital is using a robot combined with telemedicine, which has been very successful in treating patients.

Advocacy Plan and Key Messages

Ms. Lynn Scuri presented the PIC Group Advocacy Plan draft of 2/22/08. Comments on the advocacy plan include:

- The letters to Wiggins, Evans, Berg, and Huffman have been sent.
- The Community Health Center state organization, the California Rural Health Association, the IHSS authority, and the Area Agency on Aging should be added to the list of statewide and community groups.
- Ms. Scardaci and Dr. Maddux-González should contact their counterparts in other counties.

Ms. Scuri also presented the key messages on the status of Sonoma County Managed Medi-Cal planning and implementation and the State rates. The PIC Group had the following comments on the key messages:

- It is important to note that it is not the proposed rates for Sonoma County that are problematic, but rather that the rates proposed for Partnership's existing, core business. The message should be that Sonoma County needs to partner on Managed Care Medi-Cal with a fiscally viable organization.

- Managed Care Medi-Cal is the answer, not the problem.

Public Comment

Ms. Susan Keller agreed that Telemedicine holds much promise for expanding specialty physician services in Sonoma County, and also advocated for more basic, low-cost applications of telehealth technology. For example, nurse home visits /patients at home being assisted through telephone and computer contact with doctors or clinics.

Next Meeting

The agenda for the next meeting of the COHS Planning and Implementation Committee is to include an update on advocacy activities, a look at statewide networks as well as possible funding sources for pilot projects involving alternative healthcare models (telemedicine, etc.), and a demonstration of the Healdsburg telemedicine robot. Dr. Pfeifer suggested inviting a representative from the California Telemedicine eHealth Center (CTEC).

The date and location of the next meeting of the COHS Planning and Implementation Committee will be announced with as much advance notice as possible.

Adjourned at 10:50 AM