

**Health Plans/Pilots Strategy Group
Meeting Notes**

August 20, 2002

I. Welcome and Introductions

<u>Participants</u>	<u>Title</u>	<u>Organization</u>
Leane Marchese	Executive Director	Elderhelp of San Diego
John Hamilton	Director of Case Management	Elderhelp of San Diego
Jennifer Guthrie	QA & Program Dev. Coordinator	Lifemark Evercare
Julie Johnston	Dir. Strtgic Plg/Bsn Dev.	Lifemark Evercare
Cheryl Wilson	CEO	St. Paul's Senior Homes
Sophia Nguyen	Intern	St. Paul's Senior Homes
Mark Meiners (via phone)	National Director	RWJF MCaid/MCare Integration Prg.
Sara Barnett	Intern	Aging & Independence Services

The goals and objectives of the Health Plans/Pilots Strategy Group fall under two key areas, both of which are essential for options development in San Diego:

- 1. Identify and understand the aged, blind and disabled (ABD) population enrolled in Healthy San Diego (HSD).**
 - Examine and estimate the resources needed to survey and compile data about ABDs.
 - Design and develop survey model, content and desired outcomes.
- 2. Identify voluntary pilots to test integration models in San Diego.**
 - Assess resources needed to assist in implementation.
 - Design cost and quality indicators for the pilots.

II. Updates

- It was reported that John Pierce contacted the State about generating mailing lists for the ABD population. He has not received a response and is not confident that the State will provide the information we need in a timely fashion. Other group members noted, however, that obtaining information from the State should still be pursued because it would probably provide the most complete and accurate picture of the ABD population.
- Teresa Graves reported that Sharp Healthcare is able to send mailings to patients for measuring quality and satisfaction. They are able to sort by disenrollment, but not by aide code.
- Lifemark Evercare has been unable to reach Texas Star Plus contacts regarding survey, but will continue to try.
- Teresa obtained a copy of the 8-question frailty assessment and will send out to the group.
- Jennifer will share an electronic version of the modified CAHPS tool used by CalOptima in Orange County to assess satisfaction of health plan membership for persons with disabilities. She will also share a membership survey from Minnesota Senior Health Options.

III. Discussion points regarding survey

- The purpose of studying the ABD population is to obtain baseline data about who these people are and how they are currently being served. This information will help to better understand the systems of care already in place and can be used to emphasize the effectiveness HSD or a similar type of delivery model. It is important to fully and completely understand this population because the health plans will ultimately want to know that any type of change will actually improve the current system and significantly benefit them and their patients in some way.
- It was agreed upon that baseline data should be obtained from both enrollees and the health plans.

<http://www.co.san-diego.ca.us/cnty/cntydepts/health/ais/ltc>

- The health plan's willingness to share data needs to be addressed early in the planning process.
- Confidentiality/privacy rights need to be assured, monitored and maintained.
- Total ABD enrollment information should be gathered from all six health plans. It was noted that Community Health Group has the greatest number of ABD enrollees followed by Sharp and then the remaining health plans.
- It was agreed upon that a combination mail and phone survey would produce the best results. Further discussion is needed for making recommendations regarding follow-up time, manpower and other resources.

IV. Survey content

Information and sample questions that can be obtained from the enrollee and/or caregiver:

- Financial/economic status
- Ethnicity
- Complaints and grievances
- How did you hear about the program?
- What factors did you use in choosing your plan?
- Where do you access care?
- How do you access care?
- Were you able to stay with your doctor when you enrolled in this plan?
- How satisfied are you with the care you receive?
- How well do you feel your services are coordinated?
- What other supportive services do you use in the community?
- Do you have any current unmet needs? If so, what are they?
- What are the greatest barriers/obstacles to receiving care?

Information that can be obtained from the health plan or both the health plan and enrollee:

- Cost utilization
- Type of services provided
- Voluntary disenrollment rate
- Age of enrollee
- Frequency of visits, level of care enrollee entered system (claims data, readmission rates)
- Functional disability (both)
- Level of frailty (both)
- Place of residence (zip code, live alone vs. with others)

V. Tabled Items – detailed review of pilots.

VI. Next Steps

- Research earlier work done on ABD population in the Health Plan workgroup to see if any information can be applied to meet this group's goals and objectives.
- Outline survey methodology and feasibility plan for next meeting.
- Contact Health Plan group and ask to be invited to their next meeting to brief them on the progress of the Health Plans/Pilots sub-group. Also ask to present feasibility plan to group at a future meeting.

VII. Next Meeting

Tuesday, September 10, 2002 from 2 to 4 PM. Location – Aging and Independence Services, Hazard View Room (1st floor), 9335 Hazard Way, San Diego 92123. For further information or questions, please contact Leane Marchese, group chair, at 619-284-9281.