

# Sacramento County Public Health Advisory Board

## Meeting Minutes

November 6, 2013, 12:00 – 1:30 p.m.

## Primary Care Center

4600 Broadway

Sacramento, CA 95820

Conference Room 2020

**Moderator:** Morgan Staines - Chair

**Scribe:** Mark Thorpe - Staff

**Board Attendees:** Morgan Staines, Adam Dougherty, Raquel Simental, Raymond Wilson, Pheng Lee, Robert Meagher, Mildred Kahane, Sandy Damiano, Olivia Kasirye, Michelle Rivas

**Board Members Excused:** Ana Estrada, Sheila Johnston

**Board Members Absent:** Edward Lewis, Peter Simpson, Don McClurg, Estella Geraghty

**Guests:** Nikolay Yurashku, Darryl Meadows

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Topic	Minutes
Welcome and Introductions	Meeting began with introductions at 12:00pm
Minutes Review	October minutes – Approved
Primary Health Services Update	<p>Sandy Damiano, PhD:</p> <p>If you have clients who have health services through the Low Income Health Program (LIHP), County Medically Indigent Services Program (CMISP) or are uninsured, the following information is applicable.</p> <p>If your client is uninsured, staff can discuss new health care coverage programs, assist and follow-up with the application process. Coverage programs are available for those with low incomes (up to 138% FPL – Expanded Medi-Cal; 139% - 400% Subsidies under the Exchange). Applicants must be a citizen or legal resident.</p> <p><b>LIHP:</b></p> <ul style="list-style-type: none"> <li>• <b><u>Information Notices</u></b> – Enrollees received the first notice in late September. The notice informed enrollees of the transition to Medi-Cal effective January 1, 2014. It also lets the enrollee know that they <u>do not</u> need to take action. Plan Choice Notice (60 day notice) was sent for distribution 11/01/13. Enrollees will receive a 30-day notice in mid-November.</li> <li>• There will be no eligibility redetermination for active LIHP enrollees in the last quarter (October – December).</li> </ul> <p><b>CMISP:</b></p> <ul style="list-style-type: none"> <li>• <b><u>Information Notices</u></b> – County Eligibility sent notices to enrollees early October. The notice informs enrollees of the new health care programs and encourages them to apply during the open enrollment period (Oct 1, 2013 – March 31, 2014). CMISP is a last resort health care program. Most CMISP will be eligible for the new expanded Medi-Cal. Some of the CMISP Share of Cost may be eligible for a federal subsidy with the</li> </ul>

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exchange. Eligibility will send the second notices at the beginning of December 2013.

- County eligibility will be conducting in-reach to county populations such as CMISP and General Assistance beneficiaries. General assistance beneficiaries are categorically eligible for CMISP.

### **Medi-Cal:**

- Eligibility for Medi-Cal will be expanded. This means an individual making up to \$15,856 per year or a family of four with an income of up to \$32,499 per year, may now qualify for Medi-Cal benefits. This includes people who are non-disabled, non-elderly and qualifying adults aged 19-64 with income levels at or below 138% the Federal Poverty Level (FPL).
- Eligibility determinations for expanded Medi-Cal began on October 1<sup>st</sup> with health coverage beginning in January 2014.

### **PRIMARY CARE MEDICAL HOME**

Selecting from the Health Plan's network of contracted providers, beneficiaries will have a primary care medical home for their usual source of primary care. The Health Plan will send the beneficiary informing materials including information regarding their benefits, an ID card, member services and RN advice line.

The medical home is responsible for coordination of care within the network such as need for a specialist, services outside the network such as Mental Health Plan specialty services or across levels of care (post-hospital follow-up).

### **CARVE OUTS**

#### **Dental**

- Dental services are offered under Dental Managed Care. As of July 1, 2013, the following Dental Plans are available: Access Dental Plan, Health Net of California and Liberty

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Dental Health.

- Some Adult Dental will be restored as of May 2014 per AB 82.

**Mental Health** – *This is currently undergoing change. Detail is not yet available.*

- Health Plans have provided those services that can be rendered through a Primary Care Medical Provider’s office. This has typically been treatment for depression or anxiety.
- Local County Mental Health Plans have provided “specialty” mental health services.

**Covered California (health insurance subsidies)**

- Federal subsidies reduce the cost of health insurance. Individuals who earn up to \$45,960 and families of four that earn up to \$94,200 per year may qualify.
- Starting in January 2014, most people will be required to have health insurance or pay a penalty.
- Information, enrollment as well as a Cost Estimate Calculator is available on: <http://www.coveredca.com/>

### DHHS PRIMARY HEALTH HEALTH CARE TRANSITION RESOURCE LIST

**County DHA Eligibility** – can apply three ways:

- Online at [www.mybenefitscalwin.org](http://www.mybenefitscalwin.org)
- Call DHA Eligibility: **(916) 874-3100** or **(209) 744-0499** (Galt residents)
- In-person at a local county DHA office (M-F, 8am – 4pm)

4433 Florin Road Sacramento, CA 95823	10013 Folsom Blvd Rancho Cordova, CA 95827
2700 Fulton Ave. Sacramento, CA 95821	3960 Research Dr. Sacramento, CA 95838

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1725 28 <sup>th</sup> St Sacramento, CA 95816	2450 Florin Road Sacramento, CA 95822
5747 Watt Ave. North Highlands, CA 95660	210 North Lincoln Way Galt, CA 95632

**Note:** LIHP/CMISP Portals remain the same – County Clinic (4600 Broadway), Pharmacy, Case Management, local Hospitals. LIHP does not require a medical need or an assets test, CMISP does.

SACRAMENTO MEDI-CAL MANAGED CARE HEALTH PLANS	
HEALTH PLAN	MEMBER SERVICES PHONE (See ID card with PCP and RN line)
Anthem Blue Cross	(800) 407-4627 TTY/TDD (888) 757-6034
Health Net Community Solutions, Inc.	(800) 675-6110 TTY/TDD (800) 431-0964
Kaiser Permanente	(800) 464-4000 English (800) 788-0616 Spanish (800) 757-7585 Chinese Dialects TTY/TDD (800) 777-1370
Molina Health Care	(888) 665-4621 TTY/TDD (800) 479-3310

If a Medi-Cal enrollee has not chosen a plan, s/he call **Health Care Options at 1-800-430-4263**

COVERED CALIFORNIA	
Region 3: Sacramento, Placer, El Dorado and Yolo	
<ul style="list-style-type: none"> <li>▪ Anthem – PPO, HMO</li> <li>▪ Blue Shield – PPO</li> <li>▪ Kaiser Permanente – HMO</li> <li>▪ Western Health Advantage – HMO</li> </ul>	Covered California: <a href="http://www.coveredca.com/">http://www.coveredca.com/</a>  Or call 1-800-300-1506 (TTY: 1-888-889-4500)

*Can also apply for Medi-Cal through Covered California*

Health Care Transition information is available  
at: <http://www.dhhs.saccounty.net/PRI/Pages/PRI-Home.aspx>

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<p>Public Health Division Update</p>	<p>Olivia Kasirye, MD:</p> <ul style="list-style-type: none"> <li>• Quarterly Communicable Disease Report reviewed.</li> <li>• <b>Disease:</b> Chronic Hepatitis C – 1,681 YTD, Campylobacter – 114 YTD, Salmonella – 63 YTD, Giardia – 45 YTD.</li> <li>• <b>Vaccine Preventable:</b> Hepatitis B Carrier – 730 YTD, Influenza ICU – 41 YTD, Pertussis – 41 YTD.</li> <li>• Flu activity (H1N1) is in Sacramento but it seems like a mild season to start.</li> <li>• Public Health is waiting for the annual Sexually Transmitted Disease report from the State and will update PHAB once the numbers have been reviewed.</li> <li>• Disease Investigators are being hired; they receive reports of people who test positive, and contact these individuals to ensure that they get treated and that their contacts get evaluated for SDTs as well.</li> </ul>
<p>Sacramento Sheriff discussion on prescription abuse and overdose in Sacramento County</p>	<p>Sheriff Darrell Meadows – Narcotic Taskforce:</p> <ul style="list-style-type: none"> <li>• Heroin and Pills are the top two substances being abused.</li> <li>• Minors (15 year old range) are selling their parents pills for \$10-\$20 per pill using social media.</li> <li>• The “Drug Endangered Children” program ensures Drugs are kept out of the reach of children in the home and report any cases of child endangerment.</li> <li>• Heroin overdoses in Emergency Rooms are common and the patient often has the drug on their person when they are checked in. Hospitals cannot provide Law Enforcement with information regarding the patient, so it takes time for Law Enforcement to intervene and provide resources to the patient and ensure the drug is disposed of properly.</li> <li>• Dental offices are seeing an increase in “out of town” individuals claiming to need emergency dental care where severe pain is reported and treated with pain killers. These pills are often sold on the street.</li> <li>• Heroin dealers are typically found doing business near Methadone Clinics.</li> <li>• Individuals get involved with Heroin and Pill abuse usually after an accident where pain medication was prescribed.</li> <li>• “Pill Parties” are events being hosted by youth where unmarked pills are ingested causing overdoses that make it difficult to treat because it is uncertain what/how much medication the individual ingested.</li> <li>• Drug Abusers, posing as County employees or health clinic representatives, are known to</li> </ul>

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	<p>follow obituaries to target families who have recently lost a loved one to obtain their unused medications to sell on the street.</p> <ul style="list-style-type: none"> <li>• Middle and Upper Class demographics are more likely to abuse medications over heroin, whereas low income demographics are more likely to abuse marijuana.</li> <li>• Marijuana brownies commonly fall into children’s hands and cause accidental overdoses. However, there are reports of parents giving marijuana to their child to suppress crying, encourage sleep, or treat minor illnesses like a cold.</li> <li>• Drug collection bins at pharmacies tend to draw undesired theft/crime as patients go to drop off their unused pills and HAZMAT intervention when bad batches of homemade methamphetamines are disposed of in the bin.</li> </ul>
Update on Covered CA Grantees	<p>Raquel Simental:</p> <ul style="list-style-type: none"> <li>• There has been a lot of robust activity with Covered CA Outreach and Enrollment.</li> <li>• Saturday, November 16<sup>th</sup> – Get Cities Covered Campaign</li> <li>• Saturday, November 23<sup>rd</sup> – California Family Health Council and Assemblymember Pan are hosting an event.</li> <li>• December 15<sup>th</sup> is the last day to enroll in Covered CA to be covered on January 1st, 2014.</li> <li>• March 31<sup>st</sup> is the last day to enroll in Covered CA.</li> <li>• March 31<sup>st</sup> is the cutoff for enrolling in the Affordable Care Act without penalty.</li> <li>• Covered CA Enrollment Counselor Training and Certification is backlogged.</li> <li>• Communication with Covered CA Grantees regarding the schedule of events has seen improvements.</li> </ul>
Public Comments	<ul style="list-style-type: none"> <li>• None</li> </ul>
Adjourn	Meeting adjourned at 1:30 p.m.