

# Sacramento County Public Health Advisory Board

## Meeting Minutes

November 2, 2016 (12:10 pm - 1:45 pm)

## Primary Care Center

4600 Broadway  
Sacramento, CA 95820  
Conference Room 2020

**Moderator:** Dr. Steven Orkand, Chair

**Scribe:** Dr. Steven Orkand

**Board Attendees:** Dr. Steven Orkand, Allie Budenz, Dr. Sandy Damiano, Dr. Adam Dougherty, Cathleen Ferraro, Paula Green, Dr. Olivia Kasirye, Dr. Jeff Rabinovitz, Kim Sloan, Trevor Shanklin

**Board Members Excused:** Ben Avey, Dr. William Douglas, Barbara Law

**Board Members Absent:** Sherry Patterson-Jarrett

**Guest Speakers:** Sandy Damiano, PhD, Deputy Director, Primary Health Services Division; Danielle Rodriquez, MPH, Research Scientist and Regional Epidemiologist, Cancer Registry of Greater California.

**Guests:** Dr. Melody Law, Public Health Division; Steve Heath, Executive Director, Capitol Health Network; Fahm Saetern, Project Manager, Capitol Health Network; Sheri Chambers, Primary Health Services Division

**Meeting Opened** at 12:10 pm

**Welcome and Introductions**

Dr. Orkand welcomed PHAB members and guests. He acknowledged Trevor Shanklin, PHAB's newest member.

### **Minutes Review**

Dr. Damiano made minor corrections to the September minutes prior to the meeting. August minutes were approved as submitted. September minutes were approved as corrected. There was no October meeting.

### **PHAB Vacancies**

Dr. Orkand announced that Dr. William Douglas's term on PHAB has expired, and he has retired from the Board. He was thanked for his service.

There are currently 4 empty positions on PHAB. One applicant is pending approval by the Board of Supervisors.

Dr. Orkand announced that he has appointed Dr. Jeff Rabinovitz to be the PHAB representative on the First 5 Sacramento Advisory Committee.

Dr. Orkand also announced that he has asked Ben Avey and Sherry Patterson-Jarrett to form a committee to suggest nomination for PHAB Chair, Vice-Chair, and two Executive Committee members. Volunteers will be solicited during November, and a slate will be presented at the December meeting.

### **HIV Health Services Planning Council Nominees**

Paula Gammell, Chair of the HIV Health Services Planning Council, asked that PHAB consider four candidates for the Council:

Kevin Johnson  
Chioko Grevious  
Rachel Alvarez  
Kristina Kendricks-Clark

Information about these candidates was distributed to PHAB members. Their nominations were unanimously accepted. A letter will be sent to Paula Gammell.

### **Public Health Division Update**

Dr. Kasirye, Public Health Officer, reported that her Division is tracking cases of influenza. Though there are cases in surrounding counties, none have been reported yet in Sacramento County. Influenza this year appears relatively mild. Dr. Kasirye believes that the vaccine is relatively effective. Unlike previous years, the nasally inhaled vaccine is not available.

### **Sacramento County GMC Medi-Cal Managed Care Overview**

Special presenter: **Dr. Sandy Damiano, PhD**  
**Deputy Director**  
**Primary Health Services Division**  
**Department of Health and Human Services**

Dr. Damiano was asked to provide PHAB with a “primer” on the Medi-Cal Managed Care Program in Sacramento County. Materials she presented can be accessed by these links:

- 1) <http://www.dhhs.saccounty.net/PUB/Documents/Public-Health-Advisory-Board/PHAB-Meeting-Documents/2016/Minutes/GMC%20Medi-Cal%20Managed%20Care%20PPP%202016.pdf>
- 2) <http://www.dhhs.saccounty.net/PUB/Documents/Public-Health-Advisory-Board/PHAB-Meeting-Documents/2016/Minutes/MMCDModelFactSheet.pdf>

Dr. Damiano reported that at the end of September, 2016, there were 438,291 enrollees in Sacramento County. These members are provided coverage through four health plans: Anthem Blue Cross (176,152), Health Net Community Solution (121,483), Kaiser (80,275), and Molina Health Care (60,381). Each of these plans has different features. Two new plans will be available by July 2017. The default rate - people who don't pick a plan - is 27%, considered fairly low.

Dr. Damiano pointed out that only two counties in California, Sacramento and San Diego, have elected to provide a geographic managed care model. There are five other models of care provided by different counties. She then gave

details of Sacramento's program, describing eligibility and enrollment procedures, and descriptions of the various health plans and the Independent Provider Associations utilized by three of these plans. She discussed the member services that each plan must provide. There are access standards for care, but these have proven difficult to meet. Dr. Damiano was unable to tell how often members are able to obtain an urgent care appointment within 48 hours, for example. Medi-Cal requires certain core services, which were described, but there are also "carve outs." In Sacramento County, these include mental health specialty care, drug Medi-Cal, dental care, and California children's services. Some mental health benefits are provided through the health plans, but individuals with serious mental health needs obtain services they require through the county. There are benefits available for individuals with substance use disorders, but these have not yet been rolled out. Dental managed care plans include: Access Dental Health, Health Newt, and Liberty Dental.

Dr. Damiano answered questions. Time for her presentation was short, so she will provide further details at subsequent PHAB meetings.

## **Cancer Trends and Cancer Screening in Sacramento County**

Special presenter:

**Danielle Rodriquez, MPH  
Research Scientist and Regional Epidemiologist  
Cancer Registry of Greater California  
Public Health Institute**

There are three registries in California that track the incidence and prevalence of cancer in this state. One is in the Bay Area, one is in Los Angeles County, and the third, Cancer Registry of Greater California, covers the rest of the state. The data collected is used by internal and external researchers, clinicians, cancer registrars, public health officials, legislators, policy makers, community groups, health educators, and the public. Ms. Rodriquez was asked to present information about Sacramento County, and to focus on cancers for which there are screening methods available.

Overall cancer incidence has dropped slightly between 1988 and 2014, both in Sacramento County, and California as a whole. During this period, mortality has also dropped slightly. By county, Sacramento is 13th in incidence and 12th in mortality from cancer, overall. The breakdown by race was surprising. Incidence and mortality have dropped across all groups, but are lowest for Hispanics and Asian / Pacific Islanders. There are discrepancies by socioeconomic status, but the pattern is not generally clear.

An important indicator of the effectiveness of cancer screening is the stage at which cancers come to medical attention. If screening is not widely available or not utilized, cancers are more advanced when they are detected.

Danielle reviewed statistics on female breast cancer presentation. In Sacramento County, more advanced stages (II - IV) were evident in 40% non-Hispanic Blacks, 38% Hispanics, 36% Asian/Pacific Islanders, and 34% non-Hispanic Whites. Similarly, more advanced stages were evident in 40% of people with low SES, but only 33% of those with high SES.

For cervical cancer, 53% presented with regional or remote cancers in Sacramento County, compared to 49% for California as a whole. Non-Hispanic Blacks had more advanced cancers 66% of the time, compared to 63% for Asian/Pacific Islanders, 52% for non-Hispanic Whites, and 43% for Hispanics. Women with high SES presented with regional or remote cervical cancers 45% of the time, compared to 62% for people with low SES.

For colorectal cancer, Sacramento County incidence was in the top quartile for the State. Regarding staging, 57% presented with regional or remote cancers in Sacramento County, compared to 55% in California. There was less discrepancy by race or SES.

Data was also presented for prostate and lung cancers.

Cancers that have a screening mechanism yet are diagnosed beyond the localized stage can be indicative of screening failures. Danielle asked:

Do people have access to screening?

Are there disparities in regards to race / ethnicity or SES? Other disparities?

Do people know they need to get screened?

Are physician offices following appropriate protocols in screening for these cancers?

PHAB members remaining at the meeting felt that the accessibility to cancer screening in Sacramento County should be an area of research for our Board. Cathy Ferraro will lead the research committee. Kim Sloan and Steve Orkand will assist. Other members will be solicited.

## **Public Comment**

There was none

### **Adjournment**

The meeting was adjourned at 1:44 PM

### **The next meeting of the Public Health Advisory Board:**

Wednesday, December 7, 12:00 PM  
Primary Care Center  
4600 Broadway  
Sacramento, CA  
Conference Room 2020