

Addendum No. 1 to the Final Corrective Action Work Plan

The following images are submitted as Addendum No. 1 to the Final Corrective Action Work Plan submitted August 15, 2024, per the Department's request. This document includes higher-resolution copies of the following images, originally submitted in the Final Corrective Action Work Plan. Page numbers refer to pages of the Final Corrective Action Work Plan submitted August 15, 2024.

- Escalation Pathway/Levers (p. 13)
- Member Communication Goals (p. 28)
- Optimized Contingency Planning (p. 29)
- Ensure the uniform structure for situational awareness, coordination, oversight, and rapid resolution (p. 31)
- Behavioral Health Ecosystem (p. 37)
- Exhibit A – Governance Structure (p. 42)
- Exhibit C – Timelines and Detailed Plans (p. 47)

Escalation Pathway



Levers

- Highest level of leadership engagement
- Highest level of leadership engagement
- Assessment of external resourcing and alternatives
- Assessment with subject matter experts to resolve noncompliance

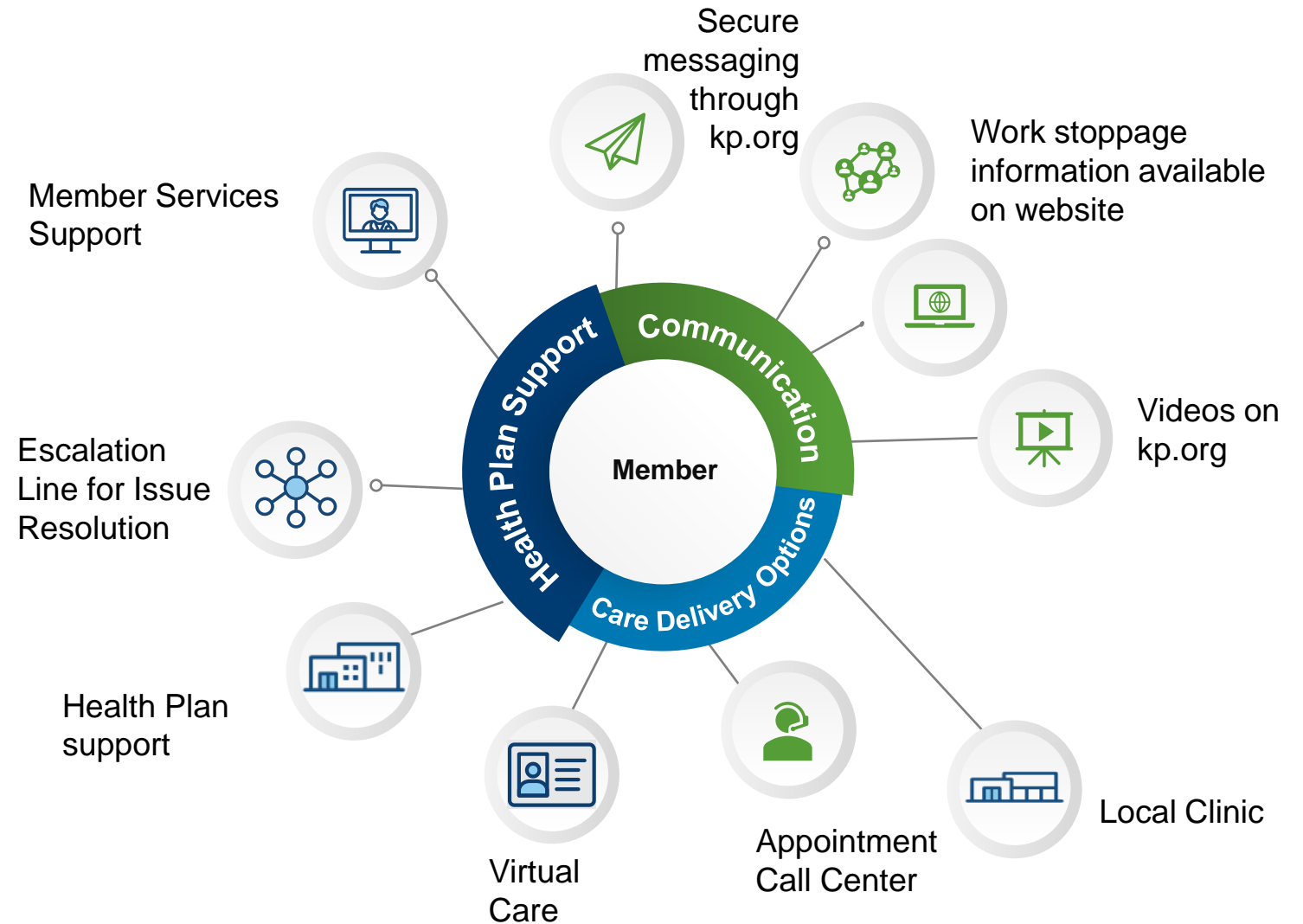
*Escalation is not always linear there could be several real-time solutions if a situation needs to be resolved immediately, such as leadership escalation or situation management teams

The strike contingency plan includes various channels of member communication

Member Communication Goals:

- Ensure members are aware of the strike and know the available options for care
- Update member communication processes for rescheduling

Members are informed of how to access care during work stoppage through these channels



Implementing changes for clear issues identification and quick resolution

Optimized Contingency Planning

PLANNING FOR COVERAGE OPERATIONS

- ✓ Utilize external network capacity
 - ✓ Create approach for utilizing external network
 - ✓ Additional staffing support for coverage
- Delineate roles and responsibilities to
- ✓ optimize health plan and PMG coordination

CONTINUITY OF OPERATIONS

- ✓ Ensure data transparency between Health Plan and Medical Groups
- ✓ Clear path to resolution & accountability to resolve
- ✓ Operate regional structure to provide standard reporting on member escalations
- ✓ Ensure quick resolution for member concerns and grievances

COMMUNICATIONS & TRAINING

- ✓ Pre-emptive care communications to members
- ✓ Ensure staff are informed of established escalation pathways
- ✓ Equip Regional Call Center, AACC and Member Services center staff with resources and support
- ✓ Prepare EPN for potential surge in demand

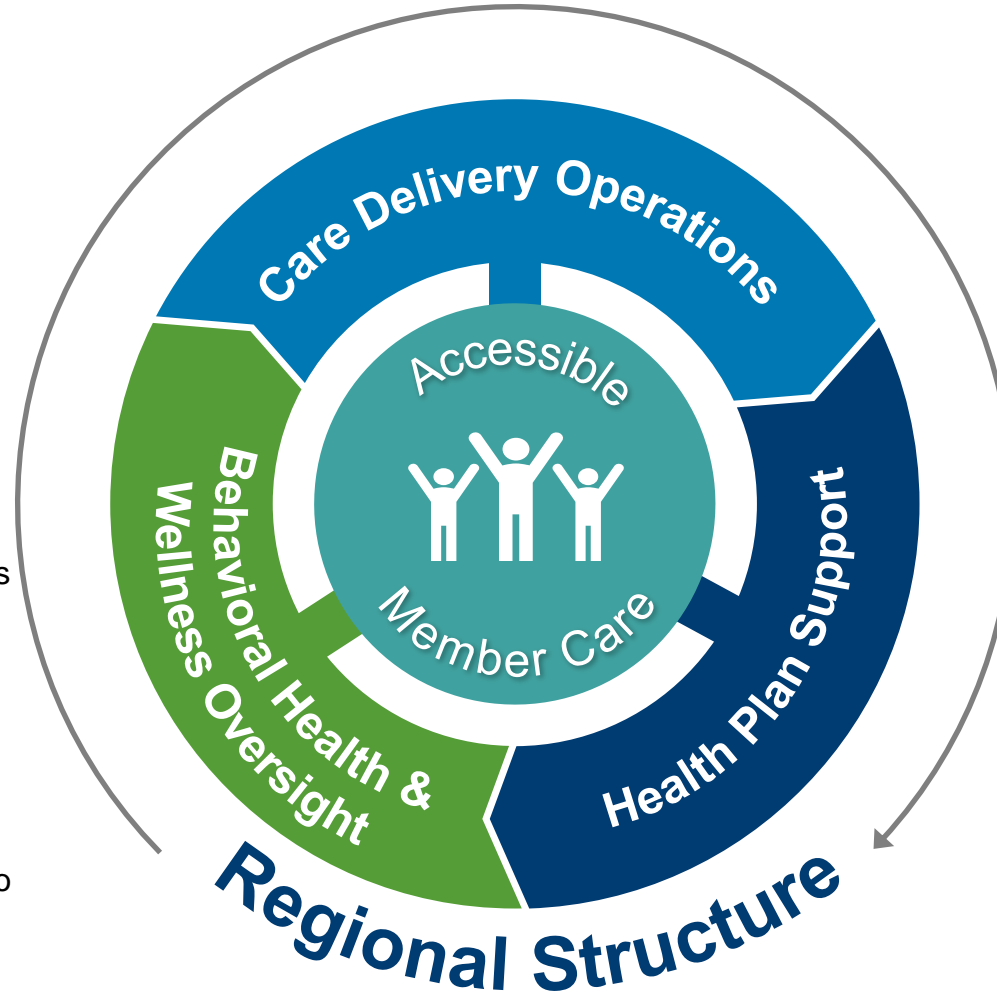
Ensure the uniform structure for situational awareness, coordination, oversight and rapid resolution

Structure:

- Refine regional structure for work stoppage
- Partner in remediation and reporting between Medical Group and Health Plan
- Build statewide alignment on incident management structure and escalation processes

Health Plan Oversight:

- Monitor member concerns to obtain access and coordinate with medical groups to resolve member issues in real-time
- Obtain timely data updates (i.e. CGAs, cancelled appointments, member escalation) via an oversight dashboard
- Oversee issue resolution & cancellations concerns
- Conduct audit of cancelled appointments to ensure members are rescheduled timely
- Focused review of member concerns and grievances post-strike



Care Delivery Operations:

- Ensure adequate access for capacity (e.g., before, during & after strike)
- Ensure plan for staffing coverage and support for high-risk groups in each clinic
- Daily inventory of clinical staff and deployment of contingent staff
- Coordinate with external network
- Identify members who are impacted in each clinic for rescheduling.
- Update member communications as needed for rescheduling and cancellations

Health Plan Support:

(Member Services and Grievances)

- Utilize updated scripting and FAQs to inform members of processes and potential office closures
- Specialized grievance tracks for member access concerns
- Triage member issues and ensure appropriate escalation.
- Daily report to health plan and medical groups on escalated issues

Behavioral Health Ecosystem

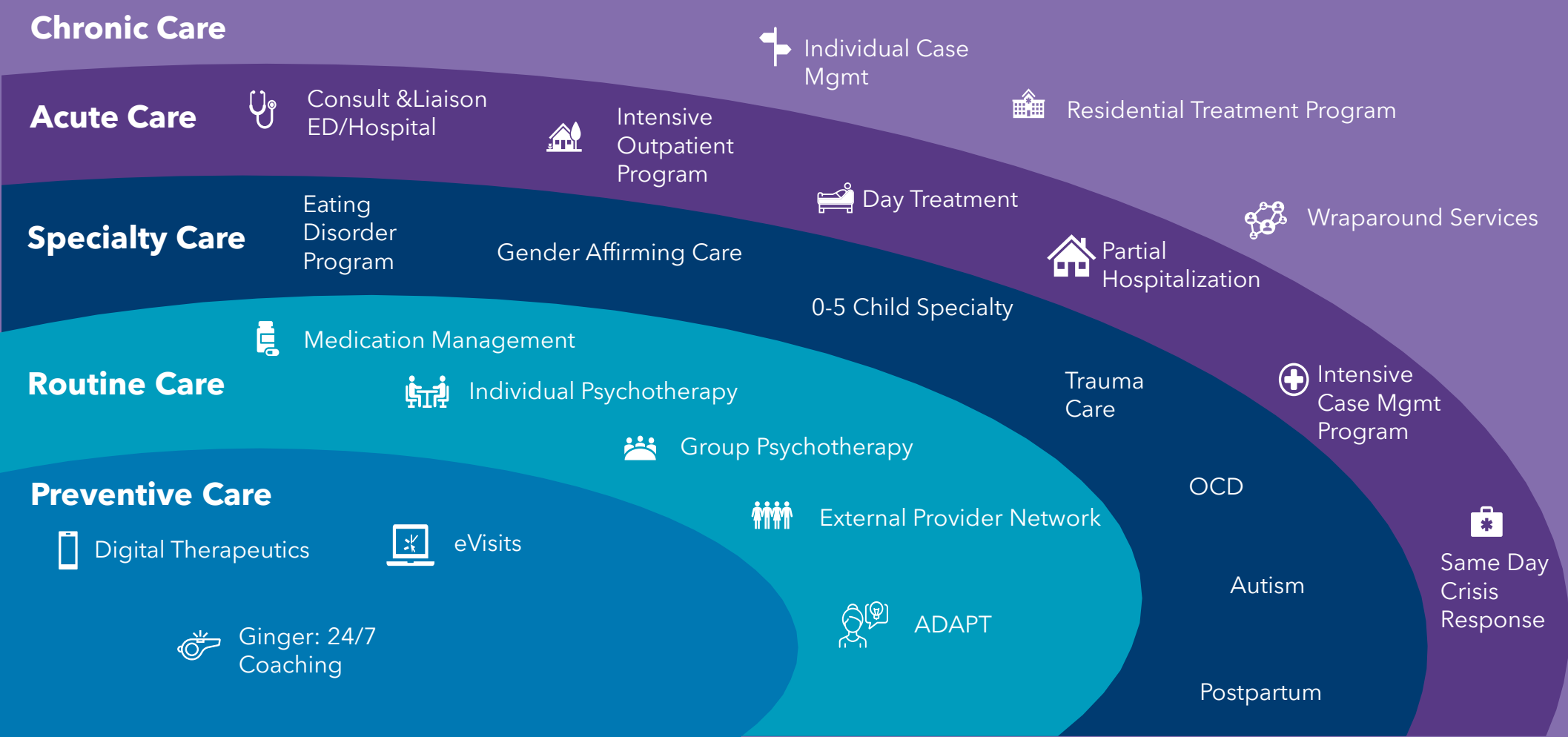


Exhibit A—Governance Structure

Health Plan Governance Structure

Executive Sponsors



Core Leadership Team



Legal, Regulatory & Compliance: VP, Enterprise Regulatory Services, VP, Health Plan Compliance, VP, Southern California Regional Counsel, VP, Northern California Regional Counsel, National Legal Senior Counsel, National Legal Senior Counsel, Senior Director, Enterprise Regulatory Services, Executive Director, Senior Managing Counsel, Commercial Compliance

Behavioral Health Leads: Executive Director of Behavioral Health & Wellness, Northern California & Executive Director of Behavioral Health & Wellness, Southern California

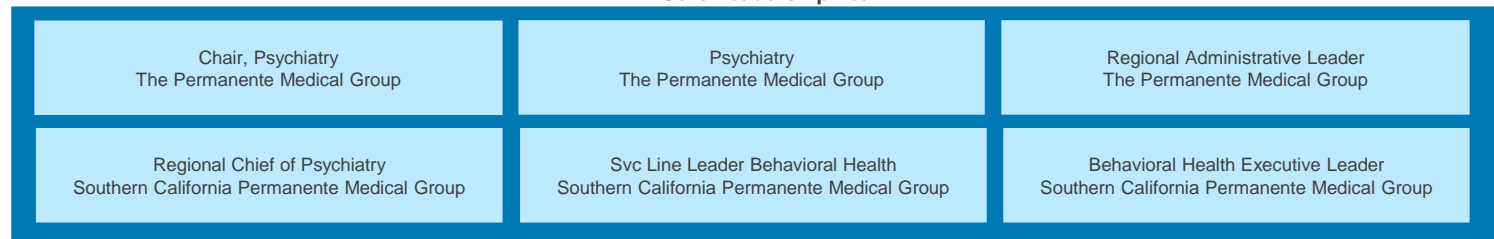
Consultant: Outside Consultant

Medical Group Behavioral Health Leadership

Executive Sponsors



Core Leadership Team

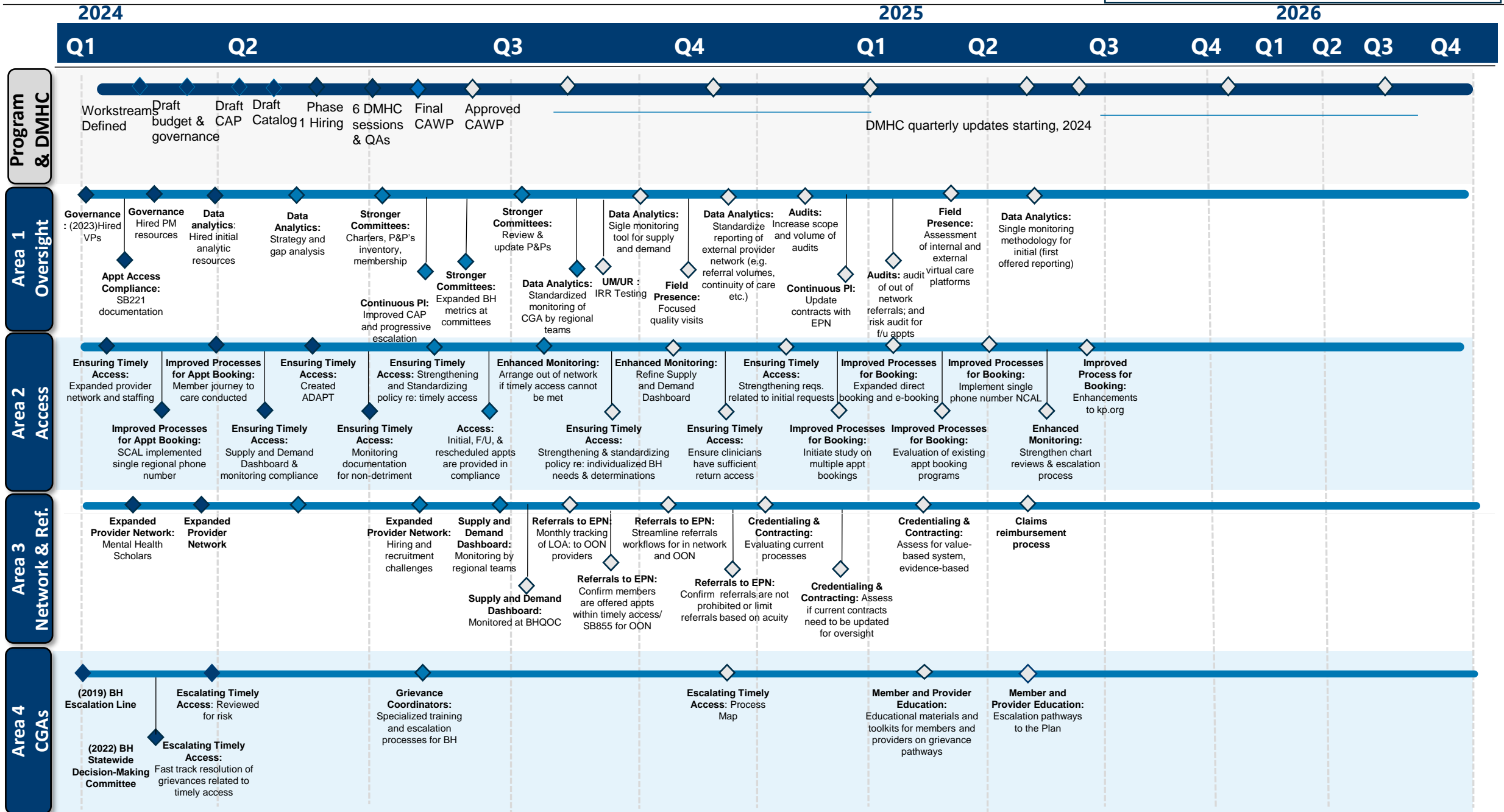


Legal, Regulatory & Compliance: The Permanente Medical Group Chief Legal Counsel, The Permanente Medical Group Assistant General Counsel, Southern California Permanente Medical Group Chief Legal Counsel, and Southern California Permanente Medical Group Senior Counsel

Behavioral Health Leads: Regional Behavioral Health Clinical Director, Southern California Permanente Medical Group and Regional Behavioral Health Clinical Director, The Permanente Medical Group

CA BH DMHC CAWP | Milestone Timeline | CAAs 1 – 4

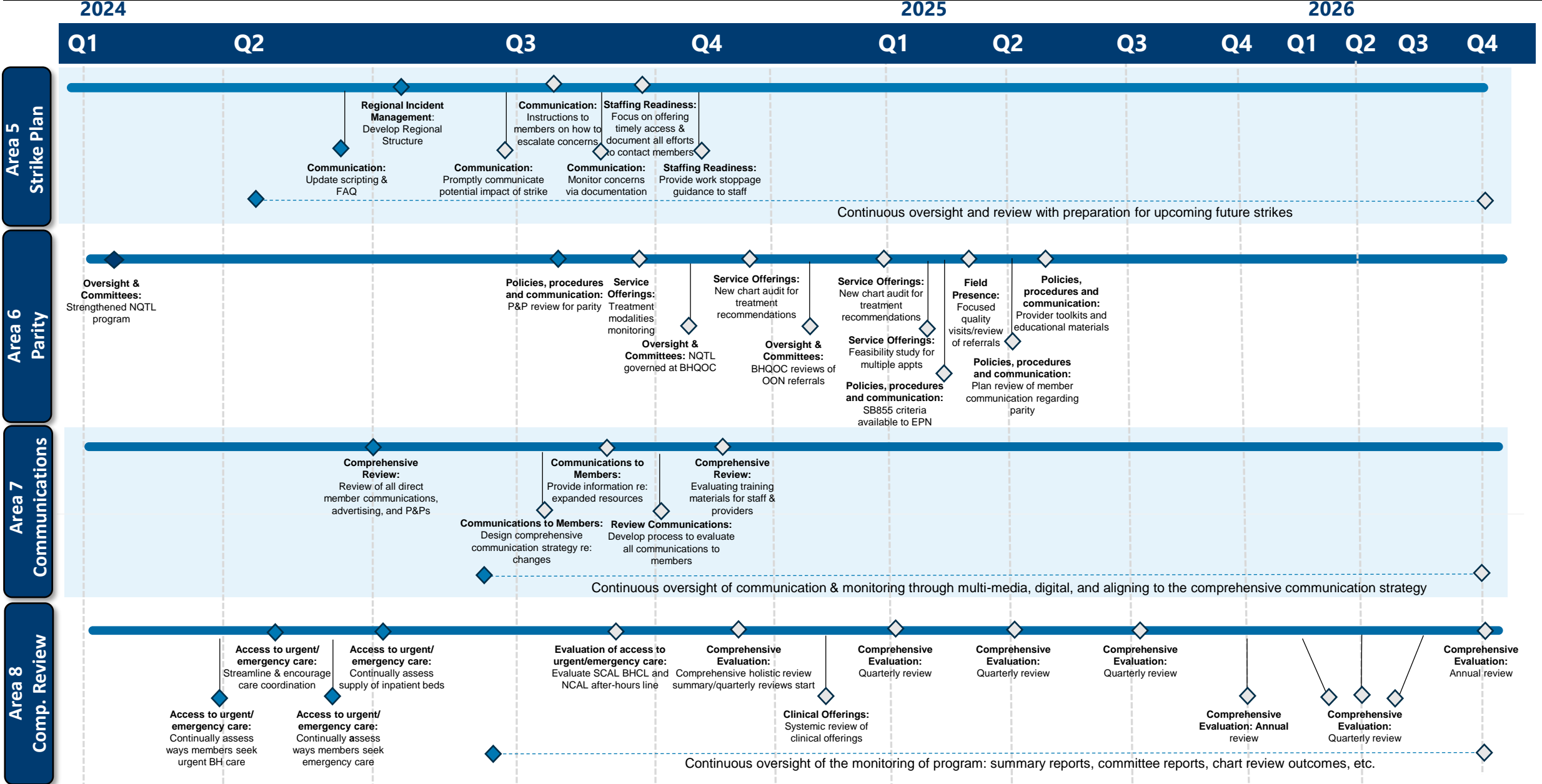
Key
 ◆ Completed work ◆ Started work ◆ Future work
 ----- Continuous oversight



CA BH DMHC CAWP | Milestone Timeline | CAAs 5 – 8

Key

- ◆ Completed work
- ◆ Started work
- ◇ Future work
- Continuous oversight



Note: These timelines are based upon current assumptions and subject to adjust/change based upon unknown future dependencies