

# Quality Council Meeting Minutes

## Contra Costa Health Plan–Community Plan

### January 14, 2025

#### MEMBERSHIP

✓	*Nicolás Barceló, MD, CCHP Medical Director
✓	*Kimberly Ceci, MD, Medical Director, LifeLong Medical Care
	*Yaron Friedman, Medical Consultant, CPN OB/GYN Provider
✓	*David Gee, MD, Medical Consultant
✓	Beth Hernandez, Director, CCHP Quality, Co-chair
✓	*Iman Junaid, MD, Medical Consultant, Jiva Health
	Anita Juvvadi, MD, Medical Consultant, La Clinica de la Raza
✓	*Olga Kelly, MD, Medical Consultant, Pediatrics/Clinical Consultant
✓	*Irene Lo, MD, CCHP Chief Medical Officer
	Lisa Schilling, RN
	*Suzanne Tavano, Ph.D, Director, CCH Behavioral Health Services

\* Voting members. Quorum is one half of eligible voting members.

#### GUESTS

✓	Aaron Graessley
✓	Alejandro Fuentes
✓	Maggie Souza
✓	Michael Clery, MD
✓	Nusrat Chaudry
✓	Patricia Muñoz-Zuniga

#### SCRIBE

✓	Arnie DeHerrera, Quality Administrative Assistant
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Topic	Discussion/Decision/Action	Follow up Action and Person Assigned
<b>Call to Order</b>	The Quality Council meeting was called to order at 12:00 PM on January 14, 2024, via Zoom.	
<b>Introductions and Information</b>	There were no introductions at this meeting.	

Reports		
<b>CMO Update</b>	<p>The Chief Medical Officer, Irene Lo, MD, provided the update. CCHP will become a Duals and Special Needs Plan (D-SNP) in 2026; we are currently working on our application for this transition.</p> <p>As a follow-up, CCHP has carved-in foster youth from Fee-for-Service Medi-Cal as of January 1, 2025; we are working towards continuity of care.</p>	
<b>Advice Nurse Unit (ANU) Report</b>	The ANU Director, Patricia Muñoz-Zuniga, presented this report. Over 168,000 calls were handled by the Unit in 2024 with a 2% call abandonment rate; average answer time was consistently under 60 seconds (improvement over 2023-2 minute wait time). Of those calls, over 25% were resolved with a home care solution and only 18% resulted in an ED referral.	

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	<p>Operational updates were provided including a personnel update, improvement plans, and challenges the ANU faces.</p> <p>Dr. Gee congratulated the ANU on their improvement of average answer time and call abandonment rate and asked how this was accomplished. Patricia stated that offering nurses extra hours while working from home; nurses volunteered to work these extra hours because they were able to work from home; supervisors also assisted in taking calls during times of heavy call volume. Nasrat Chaudhry asked about same day appointments in the "reasons for calls" section of the report (1.4% of calls). She wanted clarification of this statistic. Patricia explained that potentially there are more same day appointments that occur once the call is sent to TCC; nurses also refer members to Urgent Care. Home care advice also reduces the need for a same day appointment.</p>	
<b>Behavioral Health</b>	<p>Medical Director Nicolás Barceló, MD presented a general overview of the Behavioral Health Department (BHD). BHD is charged with authorizing and coordinating all mental and behavioral health services for CCHP members; this includes services for Autism Spectrum Disorder (ASD). Currently, CCHP is staffing up to meet member needs and comply with regulatory expectations. For UM performance, BHD consistently performs at or greater than 95% for authorization turnaround time standards.</p> <p>The "No Wrong Door" policy for BHD means members can access services via Access Line, referral from a PCP, call to Member Services or ANU, or by way of self-referral via the provider directory.</p> <p>Specialty Mental Health Services (moderate-severe acuity) are carved out to Behavioral Health Services (BHS). Coordination efforts are made challenging by systems and data fragmentation. Currently, CCHP is working on a corrective action by piloting new systems and processes for tracking and monitoring CCHP members.</p> <p>Substance Use Disorder (SUD) Services are carved out to BHS. These services are also fragmented between specialty and non-specialty services. A new collaboration between CCHP, BHS, and local emergency departments regarding coordination of services following ED discharge for substance use concerns is in place. We are actively working to improve quality.</p> <p>CCHP manages all aspects of MH/BH for commercial members. As with Medi-Cal, most routine or ambulatory services for commercial members do not require authorization.</p> <p>We are actively working to promote neuropsych testing. It is a small, but growing portion of BHD work. We are anticipating increased demand with the D-SNP launch and aging population in the County.</p> <p>School-based services are a statewide project. BHD is point for CCHP's involvement in the Children and Youth Behavioral Health Initiative. CCHP is working with local school districts and building internal processes to implement the Multi-Payor Fee Schedule, a program for schools to bill insurers for BH services provided on campuses. We have MOUs in place with Regional Center of the</p>	

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	East Bay and First Five of Contra Costa County to help facilitate data sharing.	
<b>Facility Site Review (FSR), Medical Record Review (MRR), and Physical Accessibility Review Survey</b>	<p>This report was presented by the Director of Clinical Quality Auditing and BHD, Maggie Souza and FSR Nurse Alejandro Fuentes. Nurses from CQA visit offices of PCPs to inspect and evaluate the continuing capacity of the site to support the delivery of quality health care services. Site reviews consist of a FSR and a MRR. These reviews are conducted every 3 years (or every year if a failing score is recorded).</p> <p>Areas of improvement in 2024 include:</p> <ul style="list-style-type: none"> <li>• Access (Disabled Accessibility) and Safety Criteria – employee alarm system, emergency medications</li> <li>• Personnel Criteria – training on member rights, cultural and linguistics, and disability rights and provider obligations</li> <li>• Office Management Criteria</li> <li>• For Medical Records Review – format criteria (is the medical record well organized providing key information, notice of privacy, documentation criteria, and coordination of care criteria); this is more an issue for smaller providers</li> </ul> <p>New review items for PCP sites in 2024:</p> <ul style="list-style-type: none"> <li>• Clinical Services Criteria – pharmaceutical: written plan for vaccine protection and California Immunization Registry</li> <li>• Preventive Services Criteria – autoclave vs. cold chemical sterilization (autoclaving is preferable to cold chemical)</li> <li>• For Medical Records Review – IHA: history and physical, member risk assessments, and IHAs within 120 days of assignment to PCP</li> </ul> <p>Other new review items for Medical Record Review – Pediatric Preventive Criteria:</p> <ul style="list-style-type: none"> <li>• Alcohol, drug, and tobacco use screening using validated tools (Adult and Pediatric)</li> <li>• Autism Spectrum Disorder screening using validated tools</li> <li>• Blood Lead Screening at 12 and 24 months including anticipatory guidance</li> <li>• Dental health including fluoride supplementation and fluoride varnish application</li> <li>• Depression screening (Adult and Pediatric) using validated tool</li> <li>• Hearing and Vision screening – FSR requires training for pediatric sites (previously CHDP)</li> <li>• Hep B, Hep C, and HIV risk assessments including one time blood screening (Adult and Pediatric)</li> </ul>	

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	<ul style="list-style-type: none"> <li>• Sudden Cardiac Arrest and Sudden Cardiac Death Screening</li> <li>• Tuberculosis risk assessments (Adult and Pediatric)</li> <li>• Vaccination status including Flu and COVID (Adult and Pediatric)</li> </ul> <p>For Adult Preventive Criteria:</p> <ul style="list-style-type: none"> <li>• Abdominal Aneurysm screening for males with a history of smoking</li> <li>• Lung Cancer screening</li> <li>• Folic Acid supplementation recommendations</li> <li>• Intimate Partner violence screening</li> <li>• Skin Cancer counseling (24 years old and younger)</li> <li>• Vaccination status (shingles, pneumococcal, Tdap and evidence of MMR and Varicella immunity)</li> </ul> <p>Physical Accessibility Review Survey: This is a standardized review of a site to determine the level of accessibility for members with disabilities.</p> <p>To help mitigate some of these challenges, we've had providers sign an attestation. We will remind them of the 120-day IHA requirement, provide them with FSR and MRR tools and links to training videos for the newer items. We provide the USPSTF A and B recommendations. We provide training packets for the office staff. Solo providers and smaller offices are more challenging than FQHC and larger practices; we provide these smaller locations with sample Policies and Procedures to help them get a leg up on standardizing practices.</p> <p>Olga Kelly asked for clarification of details regarding pediatric cardiac screening. Alejandro Fuentes provided additional information to answer her question.</p>	
<b>Quality Plan Updates</b>	<p>The Quality Director, Beth Hernandez, provided Quality Plan updates.</p> <p>Data Project Highlights for Q4 2024 – completed onboarding of all PCP groups with data sharing on CCHP Provider Portal; real time data sharing with PCP providers in CPN network; future reports in Q1 2025 include ADT, Initial Health Appointment, Redetermination due</p> <p>Performance Improvement Projects</p> <ul style="list-style-type: none"> <li>• Lead screening project: In follow-up from a discussion during the February 2024 Quality Council meeting, there has been an 8% improvement since April 2024 when this project began, we appear to be about 20 tests under the DHCS target (perhaps some late claims will come in), MY2025 appears to be in better shape with rates increased for testing at age 1</li> </ul>	

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	<ul style="list-style-type: none"> <li>Follow-up for ED visits for MH/AOD: strong collaboration with County Behavioral Health; In-Services at ED, very strong participation (Kaiser, John Muir)</li> <li>Well Care Visits for African American and Native Hawaiian/Pacific Islander: 2-3% increase in well care visits</li> </ul> <p>Value Based Payment (VBP) Program – tiered rollout of program; transition to capitated incentive dollars for PCP group based on empanement, not tied to quality of new VBP program; tiered payment is based on high performance and MPL targets; differential weighting on measures that are at risk</p> <p>Currently, La Clinica and LifeLong are participating. The program will be rolled out to 8 additional provider groups in 2025 and the remaining providers (based on small-panel model) in 2026.</p> <p>Looking ahead to 2025 – At the next Quality Council, we will review the evaluation on the 2024 Quality Work Plan initiatives, and discuss strategic priorities for 2025 and align on focus areas.</p> <p>Dr. Ceci thanked CCHP for the support at LifeLong. She stated that they have implemented Point of Care Testing for Lead Screening at their Contra Costa County sites. The Council took note of this implementation and believes that we should see an improvement of Lead Screening in 2025 for our HEDIS measurement.</p>	

Consent Items		
<b>Review / Approval of Minutes and Reports</b>	<ul style="list-style-type: none"> <li>CCHP Quality Council Minutes 11/12/2024</li> <li>CCHP Quality Improvement and Health Equity Committee Quarterly Report</li> <li>UM Appeals and Grievances</li> <li>Advice Nurse Unit Report 2024</li> <li>UM Referrals, Turnaround Time, Denials 10/2024</li> <li>UM Committee Minutes 11/18/2024, 12/09/2024</li> <li>MD and RN IRR Results Summary Q3 2024</li> </ul> <p>All documents were reviewed by Council members, and approved unanimously as presented.</p>	
<b>Policies and Procedures</b>	<ul style="list-style-type: none"> <li>ADMIN1.041 Community Supports Operations and Evaluation</li> <li>ADMIN1.042 ECM Enrollment, Disenrollment and Graduation</li> <li>ADMIN1.045 Community Supports Criteria</li> <li>ADMIN1.046 Data System requirements and Data Sharing to Support Community Supports and Enhanced Care Management (ECM)</li> <li>ADMIN1.048 ECM Engagement, Operations, and Evaluation</li> </ul>	

	<ul style="list-style-type: none"> <li>• ADMIN1.051 Child Welfare Liaison</li> <li>• AGD20.002 Handling of Complaints and Grievances</li> <li>• AGD20.004 Discrimination Grievance Policy</li> <li>• BHD18.001 - BHD18-007 (7 policies – annual review)</li> <li>• CLIN13.001 Maternal and Infant Health</li> <li>• CLIN13.006 Immunizations</li> <li>• CLIN13.007 Minor Consent Requirements</li> <li>• CLIN13.010 Clinical Operations Remote Work Policy</li> <li>• CM16.204 Private Duty Nurse Case Management Responsibilities</li> <li>• CM16.300 Transitional Care</li> <li>• PA9.834 Enhanced Approach to PR</li> <li>• QM14.001 Quality Council</li> <li>• QM14.201 External Quality Review</li> <li>• QM14.202 HEDIS Data Collection and Reporting</li> <li>• QM14.203 Long Term Care QAPI</li> <li>• QM14.301 Delegation Oversight</li> <li>• QM14.401 Quality and Performance Improvement Projects</li> <li>• QM14.501 Provision of Health Education Services</li> <li>• QM14.502 Development and Provision of Health Education Resources</li> <li>• QM14.603 Clinical Practice and Preventive Health Guidelines</li> <li>• QM14.701 Initial Health Appointment</li> <li>• QM14.702 REAL and SOGI Data Collection</li> <li>• QM14.703 Blood Lead Screening</li> <li>• QM14.706 Population Health Management</li> <li>• QM14.707 Health Information Form Screening and Health Risk Assessment</li> <li>• QM14.801 Cultural &amp; Linguistic Policy</li> </ul> <p>All policies were unanimously approved by the Quality Council as presented.</p>	
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Closing		
<b>Adjournment</b>	Meeting in recess at 12:58 PM. The next Quality Council meeting is scheduled for February 11, 2025, at 12:00 PM via Zoom.	

Unless otherwise indicated below, Contra Costa Health Plan—Community Plan, hereby adopts all issues, findings, or resolutions discussed in the meeting minutes for Contra Costa Health Plan's Quality Committee, dated January 14, 2025, and attached herein.

Excepted Matters: None

**Approved by CCHP Quality Council:**

  
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Committee Chair Signature

2/14/25  
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Date

  
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Committee Co-Chair Signature

2/14/25  
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Date

  
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Quality Management Administrative Assistant Signature

2/14/25  
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Date