

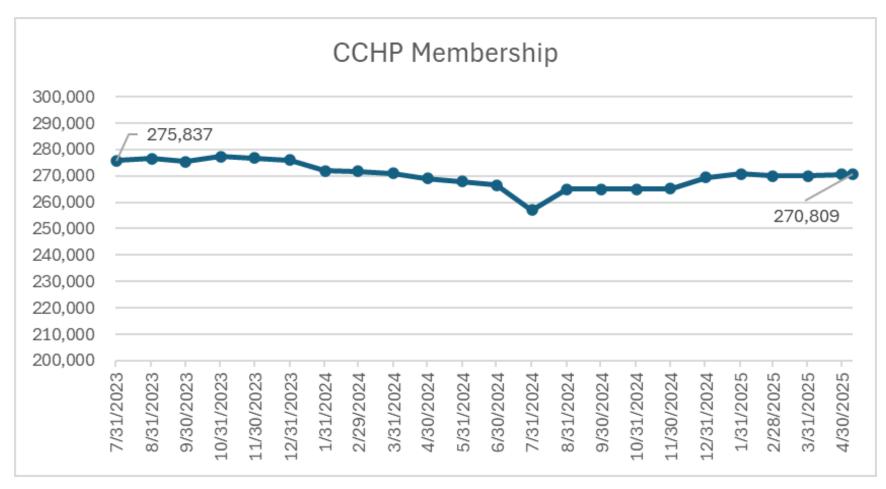
cchealth.org

9.0 **Executive Dashboard**

Presented by: Bhumil Shah, Chief Digital Officer



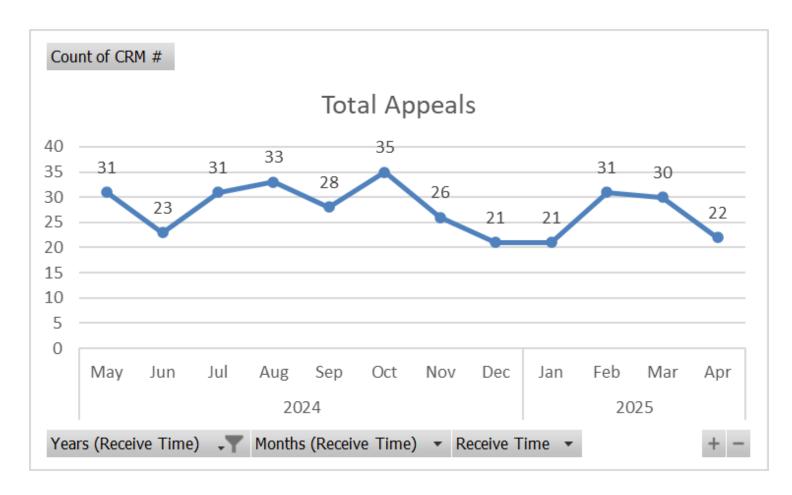




Source: CCHP Population Health Dashboard (Power BI) as of 5/9/2025



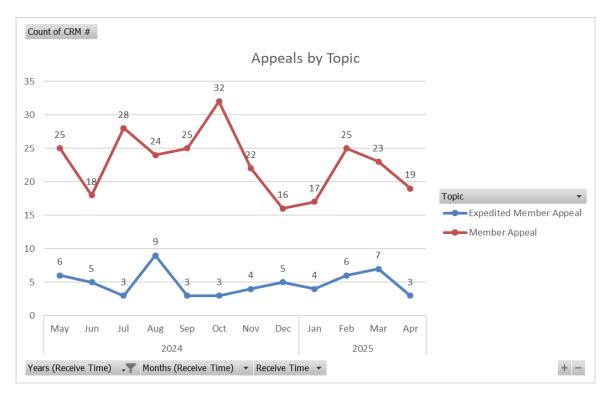




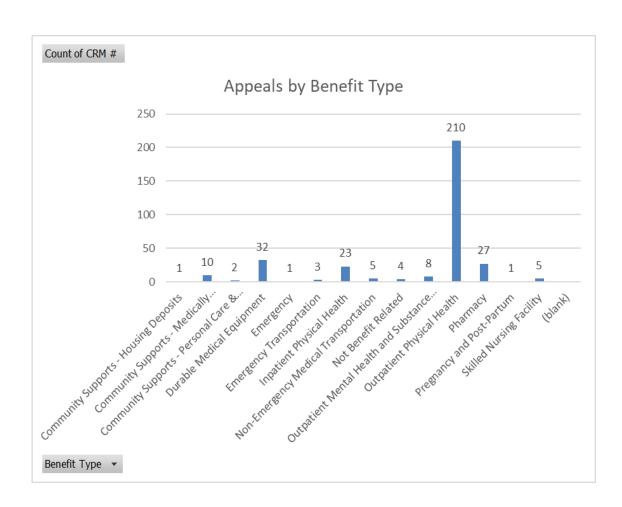
Source: TAP2393 CRM Appeals Report | Date Range: 5/1/2024 – 4/30/2025



Appeals (Continued)



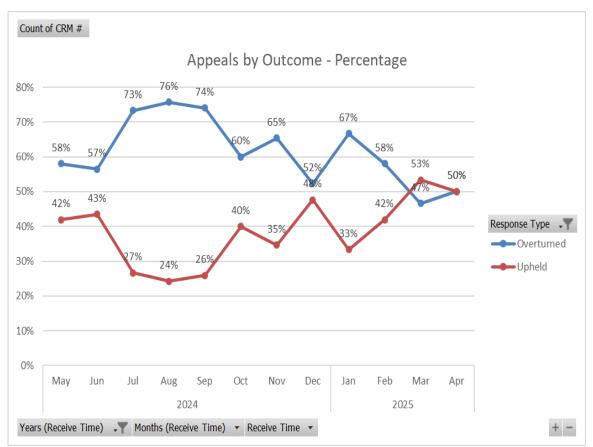
Expedited appeals are defined as appeals where waiting for a standard decision may seriously put the health of the member at risk (like if they are currently in the hospital or urgently need medication)

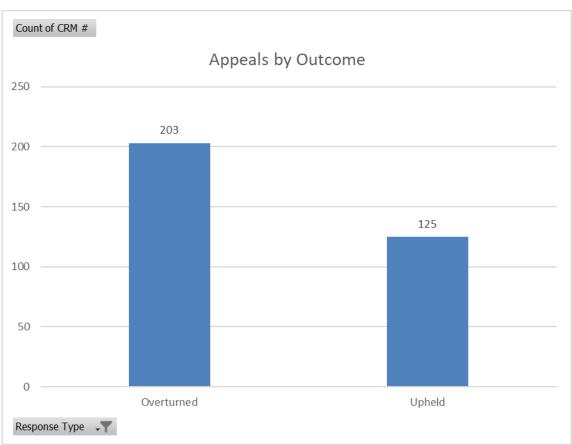


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Appeals (Continued)





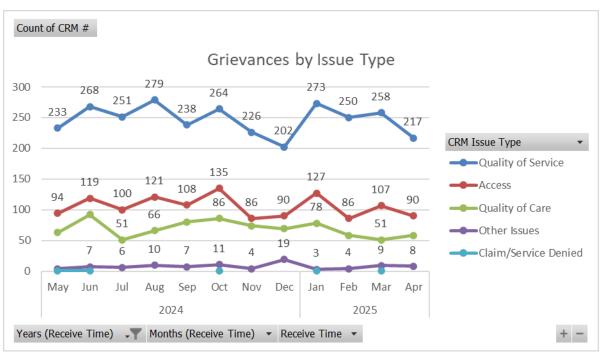
Source: TAP2393 CRM Appeals Report | Date Range: 5/1/2024 – 4/30/2025 Filter: Removed "Other" outcomes (member cancelled or not yet resolved)



Grievances



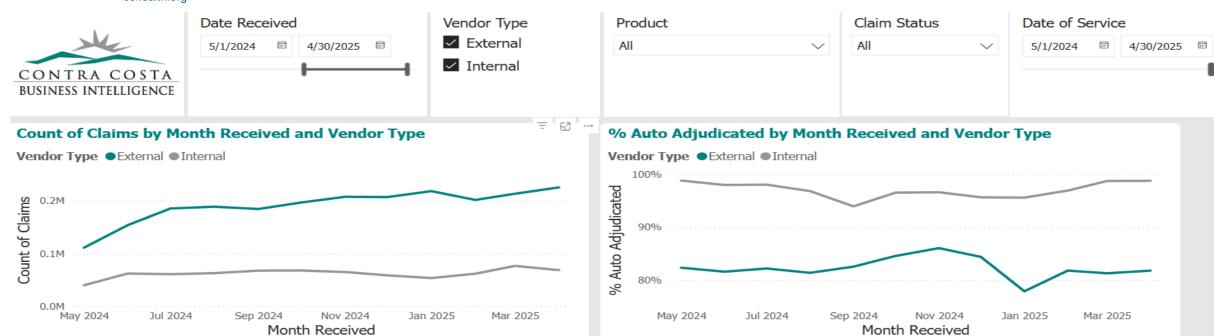
CCHP: 1.7 grievances per 100K member California Medi-cal average: 3.1 grievances per 100K member



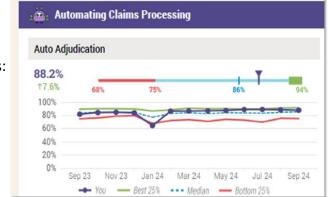
Access examples: physical access, provider availability, language access
Quality of Care examples: inappropriate care, provider grievances
Quality of Service examples: case management, provider/staff attitude, member materials
Other Issues examples: Referrals, billing, appeal timeliness



Operational Dashboard-Claims



CCHP's auto adjudication rate compared to other Epic customers:



As of 5/16/2025





- DMHC requires health plans to pay HMO claims from 45 to 30 days starting 1/1/2026 require higher efficiency in claim payment. Currently, roughly 20% of non-RMC claims require manual intervention, with 80% automatically adjudicated.
- Actively working on securing an outside vendor for claim payment validation





Public Comments

JCC Comments