

Quality Improvement and Health Equity Council Minutes Contra Costa Health Plan–Community Plan April 14, 2026

MEMBERSHIP

X	*Nicolás Barceló, MD, CCHP Medical Director
X	*Michael Clery, MD, CCHP Medical Consultant
X	*Stephen Field, MD
X	*David Gee, MD, CCHP Medical Consultant
X	*Iman Junaid, MD, Medical Consultant, Jiva Health
	*Anita Juvvadi, MD, Medical Consultant, La Clinica de la Raza
X	*Olga Kelly, MD, CCH Medical Consultant, Pediatrics/Clinical Consultant
X	*Sarah Levin, MD, CCHP Senior Medical Director, Chair
X	Allison Liu, CCHP Quality and Health Equity Program Manager
X	Sefanit Mekuria, MD
X	Jersey Neilson, CCHP Quality and Health Equity Program Manager
	*Yui Nishiike, NP, Chief Medical Information Officer, LifeLong Medical Care
X	*Andrea Sandler, MD

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

GUESTS

SCRIBE

X	Arnie DeHerrera, Quality and Health Equity Administrative Assistant
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Topic	Discussion/Decision/Action	Follow up Action and Person Assigned
Call to Order	The Quality Council meeting was called to order at 12:00 PM on April 14, 2026, via Zoom.	
Introductions and Information	There were no introductions at this session of Council.	

Reports		
Deputy CMOs/CHEO Updates	Update was presented by the Senior Medical Director, Sara Levin, MD. Beth Hernandez, former Director of Quality, has been appointed as Chief Operations Officer of Contra Costa Health Plan (CCHP). Recruitment for Chief Medical Officer is ongoing. Dr. Barceló also updated the Council on the performance improvement working groups (PIWs) at CCHP; PIWs are a multi-year initiative introduced by our CEO, Irene Lo. An update will be presented at a future meeting of the Council.	
Annual UM Presentation	The Medical Director, Nicolás Barceló, presented the annual documents for the Utilization Management Unit (UM). Program Description: This is a regular semi-static document that describes who UM is, what they do, and how they are structured. Work Plan: This document identifies accomplishments as well as pain points of the prior year. It gives an opportunity to “chart a	

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	<p>course” for the upcoming year. Operational opportunities were identified to help with improving the Unit including:</p> <p>Staff Satisfaction – This is top of mind for the day-to-day experience in the Unit. Opportunities of improvement have been identified to help with the working lives of staff.</p> <p>Internal Staffing – A search for a UM Director is ongoing.</p> <p>Improve Over and Under Analysis – This has been an ongoing weak spot in the organization for several years. We have ideas for improvement in this area. We want to have better reporting structures to accomplish this.</p> <p>Long-Term Care Coordination – There are some difficulties with transition of care in skilled facilities and hospitals. We are looking to have a clear line of sight for our members with the care they receive in our community.</p> <p>IT/Systems Improvement – This is massive project filled with potential to update Epic EHRs as well as artificial intelligence. Epic is beginning to offer plans for managed care plans to help facilitate work.</p>	
<p>Quarterly QIHEC Update</p>	<p>The Quality Program Managers, Jersey Neilson and Allison Liu, presented this update.</p> <p>Performance Improvement Projects: continued outreach calls for cervical cancer screening and well-care visits; support RMC with mammogram outreach calls; first PDSA cycle complete for IHI collaboration for well-care visits, continue to plan for further intervention; follow-up after behavioral health ED visits collaboration with County Behavioral Health, Public Health, and Kaiser Permanente; biweekly case conference with Kaiser Richmond</p> <p>Population Health Initiatives: attended for 15 outreach events in prior quarter including farmers markets, health fairs, and new partnership with Pittsburg Library; ED utilization reduction project with Advice Nurse Unit; provider engagement including quality reviewing meetings and enhanced data sharing with additional quality reports</p> <p>Regulator Updates: NCQA Health Plan Accreditation achieved February 2026; DHCS announced they plan to remove requirement to achieve the NCQA Health Outcome Accreditation (formerly the Health Equity Accreditation)</p> <p>Quality Measure Status: MY2025 rates will be finalized in Jun 206; completed test and production runs, successful audit with no findings by Advent or HSAG; we anticipate meeting MPLs for all MCAS measures</p> <p>Community Advisory Committee (CAC): committee meets quarterly (last meeting was on March 19, 2026); continue to gather feedback from members; completed annual demographic report to DHCS; plan to recruit more members this summer with focus on younger members, members with children, and Asian American members. Dr. Levin asked about recruitment of members for the CAC; she would like to come up with a strategy to include members representing behavioral health. She also asked about obligations for</p>	

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	<p>members of the committee and what incentives are offered. Allison explained that the CAC meets once quarterly, and that incentives include gift cards for those members that attend.</p> <p>DEI Training Update: 100% of CCHP staff has completed training; DHCS expected 75% completion by 2026; non-delegate CPN providers at 66%; aim to work on tracking and more provider engagement this year</p> <p>D-SNP: We have had our first enrollee experiences committee (similar to the CAC). CBOs and members are on the committee. The D-SNP Stars quality dashboards have been built. D-SNP Stars measure are being tracked for quality performance; this makes early intervention possible. We are also currently working on a Member Experience focus group with AGD, Member Services, and Case Management. We want the Member Experience to be as seamless as possible.</p>	

Consent Items		
<p>Consent Items</p>	<p>The Consent Items were included in the distributed document packet for this session of the Council.</p> <ul style="list-style-type: none"> • QHE – Quality Council Minutes 03-10-2026 • QHE – Cultural and Linguistic Analysis • Pharm – NCQA Detailed PA Turnaround Time (Commercial) • Pharm – NCQA Detailed PA Turnaround Time (Medi-Cal) • PQI – Q1 2026 Track and Trend Report • QHE – Q1 2026 Activities Report • UM – UM Program Description and Work Plan <p>The Consent Items were unanimously approved by the Council.</p>	
<p>Policies and Procedures</p>	<ul style="list-style-type: none"> • CalAIM5.045 Community Supports Overview, Eligibility, Restrictions, and Limitations • CLIN13.002 Reproductive Care • CLIN13.003 Street Medicine • CQA10.707 Reporting Provider Preventable Conditions • QM14.701 Initial Health Appointment • QM14.707 Health Information Form Screening and Health Risk Assessment • UM15.113 Transgender Services <p>All policies were reviewed and unanimously approved by the Quality Council as presented.</p>	

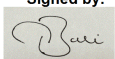
Closing		
<p>Adjournment</p>	<p>Meeting in recess at 1:00 PM. The next Quality Council meeting is scheduled for May 19, 2026, at 12:00 PM via Zoom.</p>	


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 Improvement and Health Equity Committee, dated April 14, 2026, and attached herein.

Excepted Matters: None

Approved by CCHP Quality Council:

Signed by:  5/20/2026
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Committee Chair Signature Date

Signed by:  5/29/2026
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Committee Co-Chair Signature Date

Signed by:  5/29/2026
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Quality Management Administrative Assistant Signature Date