



595 Center Avenue, Suite 100 | Martinez, CA 94553 | Phone: (925) 313-6000  
cchealth.org

## Monthly Operational Compliance Meetings

April 29, 2025 | 02:00PM – 02:45PM | Microsoft Teams

### Attendees

- Dr. Irene Lo, Chief Medical Officer
- Chanda Gonzales, Deputy Executive Director / Compliance Officer
- Matthew Verdier, Compliance Director
- Aaron Graessley, Clinical Operations
- Alejandro Fuentes, Clinical Quality Auditing
- Belkys Teutle, Member Services
- Beth Hernandez, Quality Director
- Brandon Engelbert, Claims
- Coquise Fulgham, Utilization Management
- Cynthia Choi, Compliance
- David Chen, Compliance
- Dulce Orozco, Clinical Quality Auditing
- Janice Chang, Finance
- Jay Putta, Compliance
- Jena Cooper, Case Management
- Jersey Neilson, Quality
- Jill Perez, Appeals & Grievances and Utilization Management Director
- John Moral, Administration
- Dr. Joseph Cardinalli, Pharmacy Director
- Juliana Mondragon, Utilization Management
- Leizl Avecilla, Case Management Director
- Magda Souza, Clinical Quality Auditing & Behavioral Health Director
- Melissa Bailey, Compliance
- Michael Chavez, Compliance
- Dr. Michael Clery, Ambulatory Care
- Dr. Nicolas Barcelo, Medical Director
- Nikita Hughes, Appeals & Grievances
- Otilia Tiutin, Compliance
- Paralee Purviance, Finance
- Pasia Gadson, CalAIM Director
- Patricia Munoz-Zuniga, Advice Nurse Director
- Rebecca Lau, Pharmacy
- Dr. Sara Levin, Medical Director
- Shari Jones, Quality
- Sonia Escobar, Analysis & Reporting Director
- Sylvia Taqi-Eddin, Compliance

SUBJECT	DISCUSSION	ACTION / WHO
<b>1.0 Welcome</b>	<b>1.0 Welcome</b> Melissa Bailey starts the Monthly Operational Compliance Meeting.	Chanda Gonzales & Matthew Verdier
<b>2.0 All Plan Letters</b>	<b>2.0 All Plan Letters</b> <b>DHCS:</b> <ul style="list-style-type: none"> <li>- <b>25-004: Community Reinvestment Requirements</b> – issued 2-11-25. No current updates.</li> <li>- <b>25-005: Standards for Determining Threshold Languages, Nondiscrimination Requirements, Language Assistance Services, and Alternative Formats</b> – Issued 2-12-25. The due date has been changed to July 1, 2025. The Quality Department has submitted a ticket to IT to edit all letters to adhere to the update.</li> <li>- <b>25-006: Timely Access Requirements</b> – Issued 4-25-25. APL offers guidance regarding the ongoing requirement to meet timely access standards as outlines in Health and Safety Code (H&amp;S) section 1367.03. Additionally, this APL outlines the required minimum performance as set by the DHCS. Affected departments are Quality Management and Provider Relations. Due date to compliance is 7-15-25.</li> <li>- <b>25-007: Enforcement Actions: Corrective Action Plans, Administrative and Monetary Sanctions</b> – Issued 4-25-25. Supersedes DHCS APL 23-012. Awareness of the enforcement actions, including corrective action plans, and administrative and monetary sanctions, which are among the enforcement actions DHCS may take if CCHP does not meet the on-going contractual obligations</li> </ul>	Otilia Tiutin

	<p>and applicable state and federal laws. Affected units are Admin and Compliance.</p> <p><b><u>DMHC:</u></b></p> <ul style="list-style-type: none"> <li>- <b>25-004: AB 118: Part 1 – Compliance with Large Group Standardized Evidence of Coverage/Disclosure Form</b> – Issued 3-10-25. Changes apply to all commercial full-service health care service plans and require DMHC to develop standardized templates for various documents describing health plan member benefits, such as the Evidence of Coverage, Disclosure Form, Schedule of Benefits, Explanation of Benefits, and Cost-Share Summary. Affected departments are Compliance, Member Services, and Pharmacy.</li> <li>- <b>25-005: Southern California Fires and Flexibilities to Impacted Providers</b> – Issued 3-19-25. DMHC directs all health plans with providers in Los Angeles and/or Ventura Counties who were misplaced by the fires to follow certain guidelines related to extend prior auth. by 180 days. Extend timeframes to submit claims to 365 days, extend dispute or overpayment to 180 days, allow mobile clinics or temp locations for 6 months, create a resource web page for providers. Affected departments are Compliance, Auth-UM, Provide Relations, and Claims.</li> <li>- <b>25-006: Health Plan coverage of Mobile Crisis Services</b> – Issued 3-21-25. To provide guidance regarding the obligations of health plans related to behavioral health crisis services provided to an enrollee by a 988 center or mobile crisis team. Affected units are Claims and Behavioral Health Services.</li> <li>- <b>25-007: Assembly Bill 3275 Guidance (Claim Reimbursement)</b> – Issued on 4-1-25. Provide guidance to health care service plans (plans) on requirements for the processing and reimbursement of claims within 30 days of receipt on or after January 1, 2026. Affected units are Clinical Operations, A&amp;G, Member Services, and Contracts. Due date to compliance is 7-25-25.</li> <li>- <b>25-008: Provider Directory Annual Filing Requirements</b> – Issued on 4-8-25. To remind health plans to annually submit provider directory policies and procedures to the Department. In addition, the Department reminds plans to submit the changes to their provider directory policies and procedures. Affected unit is Provider Relations. Due date to compliance is 5-12-25.</li> <li>- <b>25-009: 2025 Health Plan Annual Assessments – Quarterly Financial Statements</b> – Issued on 4-15-25. Health plans are annually required to submit the Report of Enrollment Plan form to DMHC by May 15. Affected unit is Finance. Due date to compliance is 5-10-25.</li> </ul> <p><b><u>2.1 Upcoming APLs (currently still drafts)</u></b></p> <p><b><u>DHCS:</u></b></p> <ul style="list-style-type: none"> <li>- <b>24-XXX: Hospice Services and Medi-Cal Managed Care</b> – supersedes APL 13-014</li> <li>- <b>25-XXX: Targeted Provider Rate Increases</b> – Supersedes APLs 24-007, 10-014, and 10-003. Released 1-15-25</li> <li>- <b>25-XXX: Adult and Youth Screening and Transition of Care Tools</b> – Supersedes APL 22-028. Released 3-10-25</li> <li>- <b>25-XXX: Data Sharing and Quality Rate Production</b> – Released 4-25-25</li> </ul> <p><b><u>DMHC:</u></b></p> <ul style="list-style-type: none"> <li>- <b>25-XXX: Assembly Bill 3275 Guidance (Claim Reimbursement)</b> – released 02-13-25</li> </ul>	
<p><b>3.0</b></p> <p><b>Regulatory Deliverables</b></p>	<p><b><u>3.0 Regulatory Deliverables – Updates</u></b></p> <p>CMS – Additional information requested regarding pharmacy contract and compliance plan. 2<sup>nd</sup> response for deficiency corrections submitted 4-24-25</p> <p>DMHC Enforcement Matter 24-143 – Submitted 4-25-25</p> <p>DMHC Enforcement Matter 22-710 (Kaiser Grievance) – Due 5-5-25, reminder to relevant parties to submit to compliance their assignments</p> <p>DMHC APL 24-023: 2024 Legislation – Compliance has reached out to the impacted units about their assigned bills.</p> <p>Timely Access and Annual Network Report – Due 5-1-25. TA data has been validated and documents uploaded.</p> <p>DHCS – Reminder that the 2025 Audit CAP deliverables are due</p> <p><b><u>3.1 Regulatory Deliverables Tracker - Upcoming</u></b></p> <p>As of 4-28-25, the Plan is currently on track of all DMHC deliverables. 19 filings pending with CCHP while 24 under review with DMHC.</p>	<p>Chanda Gonzales</p>

<b>4.0</b> <b>Fraud Waste Abuse (FWA) &amp; HIPAA</b>	<p><b><u>4.1 FWA Cases</u></b>  The Plan has received 1 new case each month since February and has closed two out of the three cases received. April case is a DHCS referral about a provider billing issue.</p> <p><b><u>4.2 HIPAA Cases</u></b>  In Quarter 2, there are currently 4 cases reported in total.</p>	<p>Sylvia Taqi-Eddin</p> <p>Michael Chavez</p>
<b>5.0</b> <b>Regulatory &amp; Staff Trainings</b>	<p><b><u>5.1 Regulatory Trainings – TGI/DEI</u></b>  A reminder was sent out to complete the Transgender, Gender Diverse and Intersex (TGI) and Diversity, Equity &amp; Inclusion (DEI) trainings.</p> <p><b><u>5.2 Regulatory Trainings – FWA/HIPAA</u></b>  A reminder was sent out to complete the Fraud, Waste, and Abuse (FWA) and HIPAA trainings. Due by the end of the year.</p>	<p>John Moral</p>
<b>6.0</b> <b>Corrective Action Plans</b>	<p><b><u>6.1 2024 DHCS Medical Audit</u></b>  No feedback from DHCS.</p> <p><b><u>6.2 ECM Public Health CAP</u></b>  The Plan has submitted the update to DHCS for Quarter 1 status report. Expecting the Quarter 2 status report to be due on November 15.</p> <p><b><u>6.3 2024 DHCS Interoperability Requirements CAP</u></b>  Pending 1 minor correction by vendor.</p> <p><b><u>6.4 2023 DHCS Focus Audit CAP – Behavioral Health</u></b>  Waiting for DHCS Final Review</p>	<p>Cynthia Choi</p>
<b>7.0</b> <b>Auditor-Controller Audit</b>	<p><b><u>7.0 Office of Auditor-Controller 2025</u></b>  The Office of the Auditor-Controller will be conducting a routine audit of the financial practices and procedures related to CCHP Vendor Payments, focusing on the processing of vendor invoices. Relevant parties should have been alerted and are expected to participate.</p>	<p>Matthew Verdier</p>

Next meeting scheduled on

Tuesday, April 29, 2025 at 02:00PM

APPROVED BY : CHANDA GONZALES,  
COMPLIANCE OFFICER

SIGNED :  , 8/25/25