



Quality Improvement and Health Equity Committee (QIHEC) Quarterly Report

Report Period: April 1, 2025 – June 30, 2025

1. Meeting Dates and Main Topics Covered

April 8, 2025: Quality Council

- **Senior Medical Director Update.** The Senior Medical Director shared that she has assumed the role of co-chair of Quality Council following the appointment of the previous Chief Medical Officer to Interim CEO.
- **DHCS Annual Medical Audit.** The Council reviewed results from the annual audit covering August 2023 to July 2024, which had 19 findings across six categories. Many findings have already been addressed, with continued work underway. The Council also discussed preparations for the upcoming D-SNP bid and proposal.
- **Appeals, Grievances, and Disputes (AGD) Annual Report.** The Council reviewed trends showing higher grievance rates for seniors and people with disabilities, primarily due to billing and access issues. Quality of care grievances declined, but access to timely appointments remains a focus. Disproportionate grievance rates were noted among racial/ethnic groups, with particular attention to staff service concerns for Black/African American members. Appeals performance met NCQA targets.
- **UM Annual Report.** The Utilization Management team outlined operational priorities to improve efficiency, communication, and readiness for D-SNP. Key projects included simplifying the authorization process, updating member letters, and department reorganization to improve service and compliance.
- **Quarterly Quality Activities Update.** The Quality and Health Equity team shared improvements in HEDIS measures despite high member turnover. Final scores will be reviewed by the Council in Q3 2025. The Council also discussed Cultural and Linguistic analysis work in progress.
- **Self-Swab Cervical Cancer Screening.** The Council was briefed on new FDA-approved self-swab HPV screening options for use in clinical settings. Discussion focused on improving screening rates among populations uncomfortable with pelvic exams and ensuring clear guidance on its use alongside cytology.

- **Additional Comments.** The Council discussed potential cuts to Medicaid coverage, including extended coverage for undocumented individuals and possible work requirements, highlighting the need for clear communication to reduce member anxiety.
- **Consent Items.** The Council unanimously approved prior meeting minutes, quarterly reports on AGD, UM, Advice Nurse stats, pharmacy denials, audit summaries, and member experience updates.
- **Policies and Procedures.** The Council approved updates to 21 policies covering ECM operations, grievances and appeals, reproductive and pediatric care, palliative care, cultural and linguistic services, utilization management processes, and continuity of care.

May 13, 2025: Quality Council

- **Medical Director Update.** The Medical Director shared progress on D-SNP preparation, ongoing regulatory compliance work, and Clinical Operations projects focused on Population Health Management.
- **Annual Access Report.** The Council reviewed appointment availability data, satisfaction surveys, and emergency instruction compliance. While overall access standards were met for most networks, there were gaps in urgent specialty care and Plan A urgent appointments. Prenatal appointment compliance dipped during the holidays but returned to target levels. Initial Health Appointment rates showed marginal but steady improvement over last year. Emergency instruction compliance was 79%, with provider phone and in-office wait times showing high compliance. Follow-up actions include provider education, network expansion, and detailed data reviews.
- **Provider Satisfaction.** Results from the annual Provider Satisfaction Survey showed high ratings for timeliness of UM decisions, claims support, and language access services. Opportunities were identified to improve call center accessibility and effectiveness. Providers also reported that recent changes, like the simplified authorization process, improved their experience.
- **Provider Relations Report.** The interim COO presented Provider Relations updates, including key recommendations and actions such as talent management redesign, improvements to provider data operations, simplifying the provider experience, accelerating D-SNP network expansion, and managing interdependencies across departments.
- **Consent Items.** The Council unanimously approved meeting minutes, enrollee and provider experience survey results, physician directory accuracy, geographic reports, UM committee minutes, credentialing integrity reports, and the annual report on access and availability.
- **Policies and Procedures.** The Council approved 27 policies and procedures, covering Community Supports, Behavioral Health access and screening, care coordination, disaster planning, site reviews, medical record standards, quality audits, provider preventable conditions, marketing, member circumstances, non-discrimination, and utilization management information integrity.

June 10, 2025: Equity Council

- **Senior Medical Director Report.** The Acting Interim CMO emphasized the organization's mission and commitment to members despite ongoing budget pressures in Sacramento and changes at the federal level, highlighting CCHP's continued focus on high-quality care.
- **DEI & TGI Trainings Update.** Staff training updates included completion of Transgender, Gender Diverse, and Intersex (TGI) training for all staff (required every two years) and the rollout of Diversity, Equity & Inclusion (DEI) training in January 2025, with 46.5% staff completion as of June. DEI and D-SNP training for providers will launch in July 2025. Clarifications about which provider trainings are required were also shared.
- **NCQA Accreditation.** A high-level update on NCQA Health Equity Accreditation was provided. Five specific elements related to gender identity data collection and DEI staffing practices will be scored as "N/A" through June 2026 under temporary guidance. The Provider Directory was also updated to include languages spoken and available race/ethnicity information to better align with equity standards.
- **Community Advisory Committee.** The team shared updates about the CAC, including participation in the DHCS MCP CAC Workshop in March and ongoing recruitment of new members as original 2023 members term out. Quarterly meetings will continue throughout 2025 to meet DHCS requirements.
- **Health Education and IHI Project.** The Health Education team reported on projects to improve health literacy, maternal health initiatives, chronic disease management, and CalAIM center support. "One-Pagers" for member education will soon be available on the CCHP website. Results of a targeted project to improve Well Child Visit rates for 18–21 year-olds showed a 95% relative increase to 21.5%, supported through a collaboration with IHI and Brighter Beginnings.
- **Quarterly and Annual Review: Grievances Related to Language Access and Discrimination.** The Council reviewed an approved CAP addressing past audit findings about grievance reporting to DHCS. The report noted an increase in grievances with common issues such as appointment cancellations, transportation concerns, and language access, with recommended outreach to providers about interpreter services.
- **Consent Items.** The Council unanimously approved three items: Equity Council Meeting Minutes (3/11/2024), Policy QM14.802 (CCHP Staff & Network Provider Cultural Competency Training), and the new ADMIN Policy on the Community Advisory Committee.

2. Update on Quarterly Activities in QIHETP Program

Program Structure:

- Convened two Quality Council meetings and one Equity Council meeting.
- Joint Conference Committee received and approved the annual Quality and Health Equity Evaluation, Workplan, and Program Description to send to the Contra Costa County Board of Supervisors.

- Convened Community Advisory Committee (CAC) on June 12, 2025, with topics covering Provider Directory, Access to Services and Coordination of Services.

NCQA Accreditation

- The Health Plan accreditation audit is on schedule with 50% of the documentation collected and ready for final consultant review prior to the NCQA audit deadline of December 9th.
- The Health Equity Accreditation initial submission is on schedule with 97% documentation ready for consultant review prior to submission deadline of August 26th deadline.

Measurement, Analytics, Reporting, and Data Sharing

- All audit requirements were met for the Healthcare Effectiveness Data & Information Set (HEDIS) & Consumer Assessment of Healthcare Providers & Systems (CAHPS) audits were approved by both Advent Advisory Group and HSAG auditing agencies and submitted prior to deadline of June 13th required with the National Committee for Quality Assurance (NCQA). CCHP exceeded the Minimum Performance Levels (MPLs) in all the 18 submitted measures and is awaiting NCQA Star ratings, released in September 2025.
- Completed fielding of annual member experience CAHPS survey with analysis to begin in Q3.
- Completed the analysis of the 2024 Provider Satisfaction Survey and conducted interactive workshop with CCHP staff to brainstorm improvement opportunities.
- Provider Appointment Availability Survey (PAAS) MY2024 results submitted to DMHC. Urgent specialty care access in the Plan A network was identified as a deficiency; a corrective action plan is in development to address this gap.
- Comprehensive Annual Access Report for MY2024 completed and reviewed by the Quality Council in May; the report provides updates on all access program efforts and ongoing tracking activities.
- Network Adequacy Validation (NAV) Audit is on schedule, Quality submitted the Information Systems Capabilities Assessment Tool (ISCAT) to the Health Services Advisory Group (HSAG) on June 24th, prior to the July 17, 2025 due date, and is awaiting on feedback from auditor.
- Quality submitted 100% of the 411 requested records by May 1st, prior to the May 13th due date for the Encounter Data Validation (EDV) audit. CCHP is waiting on feedback from the HSAG auditors.
- Collaborated with stakeholders to finalize Case Management Survey content, to ensure alignment with program goals and member needs. Coordinated with the contracted vendor to complete survey programming, establish data collection protocols, and initiate fielding activities.
- Launched the Experiences in Care and Health Outcomes (ECHO) survey in collaboration with the survey vendor, targeting eligible members to assess their experiences and perceptions related to behavioral health services. Ensured all outreach materials were finalized and distributed according to the established timeline.
- Presented at the Safety Net Institute/Local Health Plans of California (SNI/LHPC) Data Sharing Seminar on Contra Costa's approaches to quality data integration between health systems and health plans.

Performance Improvement Projects

- Demonstrated improvements in the Follow-up after Emergency Department for Mental Health and Alcohol and Other Drugs measures with Contra Costa Behavioral Health through the Institute for Healthcare Improvement collaborative. Conducted additional in-services with area Emergency Departments to discuss behavioral health referral patterns. Created substance use navigator network (SUN network) with SUNs across area EDs to increase collaboration. Launched text message pilot and sent text messages to nearly 500 patients.
- Organized and facilitated a Lunch & Learn for providers and care team staff to promote evidence-based strategies for improving childhood immunization rates. Participants engaged in peer-to-peer discussion and shared successful approaches from their own practices, fostering collaboration and knowledge exchange to support improved preventive care outcomes.
- Conducted over 350 outreach calls to members aged 0-2 years due for well-care visits and scheduled over 70 appointments for members.
- Conducted around 1,000 outreach calls to members for Denti-Cal benefits and Topical Fluoride Treatment.
- Collaborated with community network providers to conduct over 600 outreach calls for well care visits and over 800 calls for cervical cancer screening.
- Continued to conduct outreach calls for African American and Pacific Islander members assigned to RMC due for well care visits.
- Completed over 60 calls to members under two who are due for lead screening.
- Presented IHI-DHCS Child Health Equity Collaborative results at Harvard TH Chan School of Public Health Practical Applications of Improvement Science class.
- Sponsored a student project with UC Berkeley School of Public Health Quality Improvement class focusing on Cultural and Linguistic Services.
- Presented to UC Berkeley School of Public Health Quality Improvement class and Cal State East Bay Public Health Informatics class.
- Collaborated with Regional Medical Center Prenatal/Postpartum Quality Team to identify gaps in postpartum care for members who deliver at non-RMC facilities. The workgroup explored strategies to improve data sharing, streamline referral processes, and enhance outreach to ensure timely enrollment into case management services. The goal is to improve continuity of care, support maternal health outcomes, and reduce disparities in postpartum follow-up.

Population Health

- Initiated first pay for performance payment for largest two provider groups. For calendar year 2025, 7 provider groups will be in a pay for performance program.
- Transgender, Gender Diverse, or Intersex (TGI) training curriculum was approved by DHCS and completed by CCHP all staff. Around 50% of CCHP staff completed newly roll-out Diversity, Equity & Inclusion Training.
- Completed 2024 Cultural & Linguistic Analysis Report, including assessment of Provider Cultural Responsiveness and Cultural & Linguistic program evaluation.

- The summer edition of Health Sense was mailed to members and included timely health tips, seasonal wellness information, and updates on available plan services. In addition, two new editions of the new maternal health, mental health, and children and family e-newsletters were developed and sent. Each edition featured curated content such as health education, community resources, preventive care reminders, and program highlights aimed at engaging members and supporting their overall well-being.
- The Health Education team participated in over 30 outreach events, including outreach at the Concord Library, tabling at network Federally Qualified Health Centers, Los Medanos Health Fair, Youth Wellness Summit, Senior Health Fair, Parks Rx, and Stege Elementary lead education.
- Initiated the reassessment process for members enrolled in the California Children and Youth with Special Health Care Needs and Long-Term Services and Supports programs.
- Engaging with 4 Community-based Organizations to roll out CalAIM centers. Successfully conducted 2 presentations with CalAIM centers and start implementation of office hours on site.
- Conducted new member survey to assess understanding of patient materials.
- Initiated planning for an emergency department (ED) utilization reduction project. Conducted preliminary data analysis to identify high-utilizing member populations and common drivers of avoidable ED visits. Began engaging key stakeholders across departments, including Advice Nurse Unit, Clinical Operations, and Health Education teams, to develop targeted intervention strategies.
- Participated in Contra Costa Public Health Community Health Assessment Steering Committee to support countywide planning and collaboration. Attending Bridging Public Health and Managed Care event with Public Health Departments and Managed Care plans across California.
- Actively engaged in Supervisor Burgis' Health Literacy Council, working on strategies to reduce emergency department utilization and improve health literacy for Far East County residents.

Patient Safety

- Continued monitoring and investigating Potential Quality Issues, Provider Preventable Conditions, and medical safety incidents.
- Completed scheduled Facility Site Reviews and Medical Record Reviews.
- Publicized Clinical Practice Guidelines in newsletter and provider network training

Provider Engagement

- Conducted quarterly provider network training sessions and quarterly network newsletter.
- Held six quality meetings with providers (Lifelong, La Clínica, Axis, Brighter Beginnings, Asian Health Services, and John Muir) focusing on specific rates and improvement projects.
- Partnered with Contra Costa Regional Medical Center in their Ambulatory Care Redesign improvement projects, joining the Population Health and Alternative Care Delivery workgroups. As part of the Alternative Care Delivery workgroup, CCHP provided support for a nurse-led asthma clinic to better serve patients with moderate to severe asthma.



Part of the support efforts for the asthma clinic included input on eligible patient population, services available to CCHP members, and information on best practices other health systems have implemented. The CCHP Health Educator conducted outreach to over 100 patients to schedule into the nurse led clinics and completed appointment reminder outreach. As part of the Population Health workgroup, CCHP provided input and recommendations on pre-visit screenings.