

Discussion Item

D.6. ACCEPT report from Information Technology

Bhumil Shah, Chief Information Officer

Information Technology Updates

Data Driven Organization

- IT is developing comprehensive dashboard for each business and functional unit in CCHP to track performance and outcomes.

Technology Modernization

- CCHP and IT have developed a twelve-month project roadmap.

CCHP Performance Dashboard: Proposed KPIs by Unit

Unit/Focus Area	Proposed KPIs
Advise Nurse	TBD
Grievances and Appeals	<ol style="list-style-type: none"> 1. Open to Acknowledgment Letter / Resolved Average Turnaround Times 2. Top Issue Codes per LOB 3. Count of Grievances and Appeals per 1000 members
CalAIM	<ol style="list-style-type: none"> 1. Authorized Volume for Case Management & Community Supports 2. Enrolled Volume for Case Management & Community Supports 3. Uptake Rate for Case management & Community Supports
Care Management	TBD
Claims	<ol style="list-style-type: none"> 1. % of Claims Paid Within 30 Calendar Days of Receipt 2. % of Claims Paid Within 90 Calendar Days of Receipt

Unit/Focus Area	Proposed KPIs
Enrollment	<ol style="list-style-type: none"> 1. Monthly Redetermination Rate 2. Monthly Disenrollment Rate 3. Monthly Enrollment/Disenrollment Ratio
Member Services	TBD
Pharmacy	<ol style="list-style-type: none"> 1. PMPM Cost by LOB 2. Paid Claim Counts by LOB 3. Top 20 Drugs by Cost / Usage
Provider Network Operations	<ol style="list-style-type: none"> 1. Count of Total Active Providers with Open Locations by Network 2. Count of Terminations 3. Provider Training Completion %
Quality	<ol style="list-style-type: none"> 1. Count of MCAS MPL Measures Meeting Target 2. Count of Quality Withhold Measures Currently Meeting Target 3. DMHC Equity Index: Proportion of Racial/Ethnic Groups Meeting Benchmarks for Each DMHC HEQMS Measure
Utilization Management	<ol style="list-style-type: none"> 1. Prior Authorization Volume by LOB 2. Turnaround Time 3. Prior Authorization Denial Rate

KPI Dashboard Samples: Quality & Utilization Management

KPI: Percent of MCAS Measures Meeting Target

90.9%

MCAS Measures Not Meeting Target

Measure Name	Target	Rate
Controlling Blood Pressure	67.88	67.15
Topical Fluoride for Children	21.60	19.86

KPI: Percent of Quality Withhold Measures Meeting Target

100.0%

Quality Withhold Measures Not Meeting Target

Measure Name	Target	Rate
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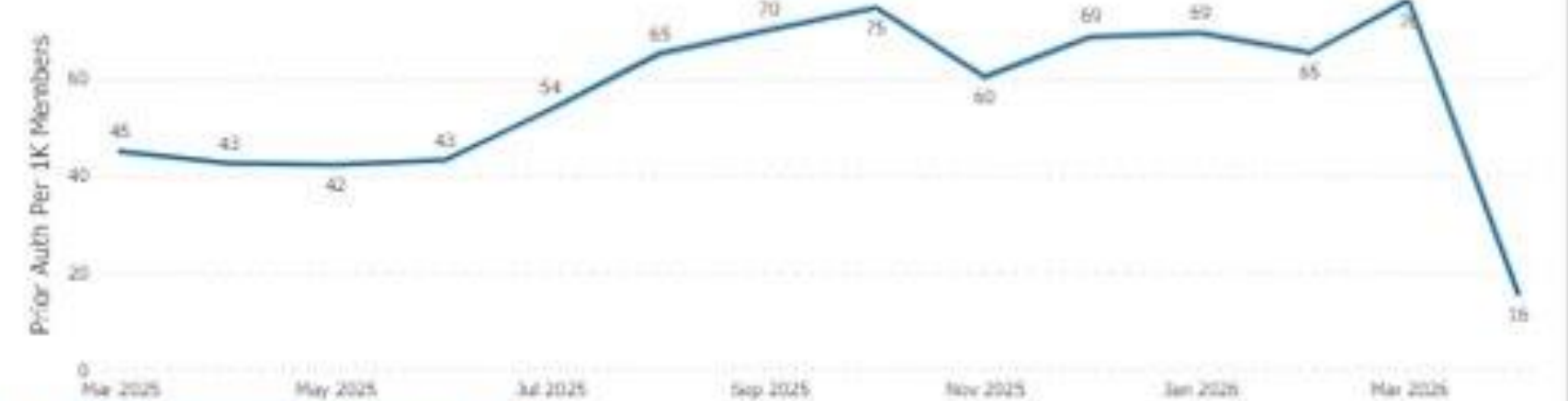
KPI: Percent of Racial/Ethnic Groups Meeting the Benchmark for each DMHC HEQMS Measure

Measure Name	Numerator	Denominator	Percentage
Follow up for Depression	9	9	100.0%
Screening for Depression	9	9	100.0%
Colorectal Cancer Screening	8	9	88.9%
Plan All-Cause Readmissions	8	9	88.9%
Childhood Immunization Status - Combination 10	6	9	66.7%
Postpartum Care	6	9	66.7%
Prenatal Care	6	9	66.7%
Glycemic Status Assessment for Diabetic Patients	2	9	22.2%
Total	54	72	75.0%

KPI: Prior Auth Requests by 1k Members

Definition: Number of prior authorization requests by one thousand members

KPI: Prior Auth Requests by 1k Members



KPI: Average Turn Around Time in Hours

Definition: Average turn around time of prior authorizations in hours.

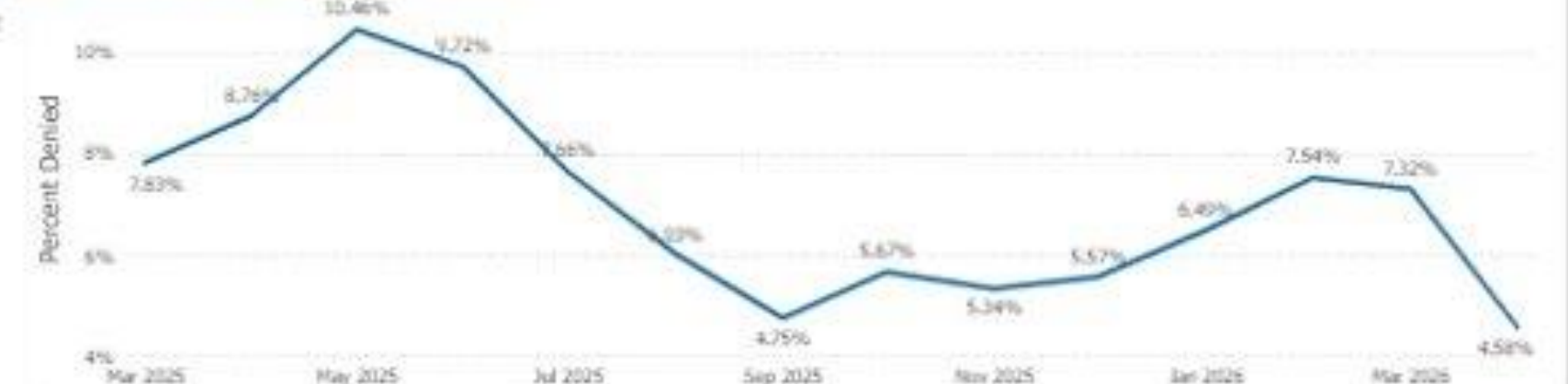
KPI: Average Turn Around Time in Hours



KPI: Denial Rate of Prior Auth Requests

Definition: Percent of prior authorizations that were denied.

KPI: Denial Rate of Prior Auth Requests





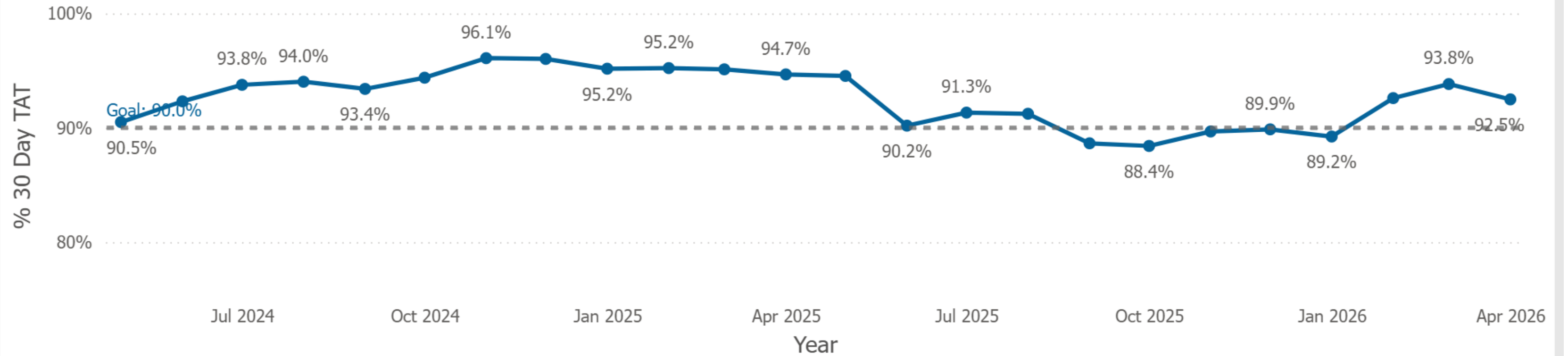
KPI Dashboard Sample: Claims

KPI: Claims Paid within 30 Calendar Days of Receipt

Definition: Percentage of claims paid within 30 calendar days of received date, grouped by received month.

Goal: 90%, higher is better.

KPI: Claims Paid within 30 Calendar Days of Receipt

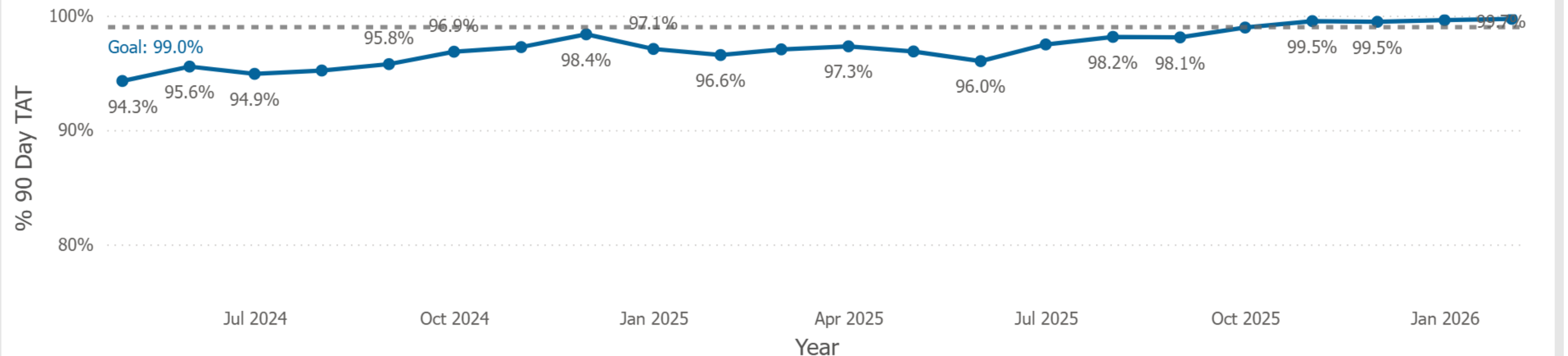


KPI: Claims Paid within 90 Calendar Days of Receipt

Definition: Percentage of claims paid within 90 calendar days of received date, grouped by received month.

Goal: 99%, higher is better.

KPI: Claims Paid within 90 Calendar Days of Receipt





KPI Dashboard Sample: Enrollment

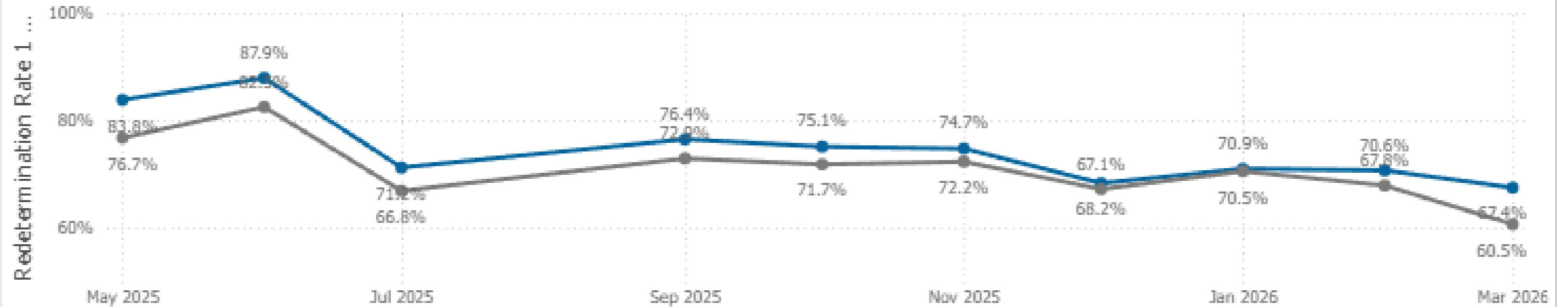
KPI: Redetermination Rate

Definition: Percentage of members with an active coverage one or two months after redetermination date.

Goal: TBD, higher is better.

KPI: Redetermination Rate

● Redetermination Rate 1 Month ● Redetermination Rate 2 Month

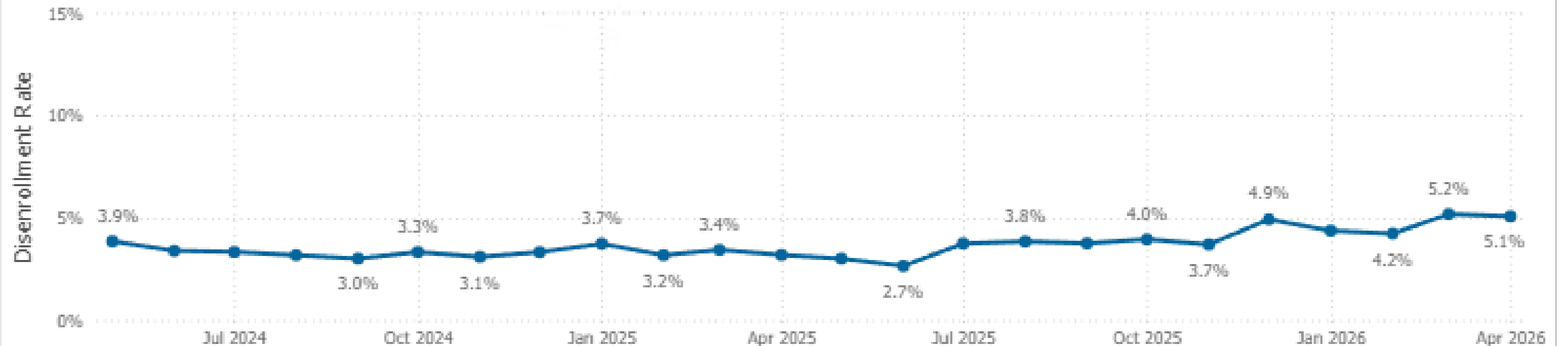


KPI: Disenrollment Rate

Definition: Percentage of members with an active Medi-Cal coverage that termed in the month.

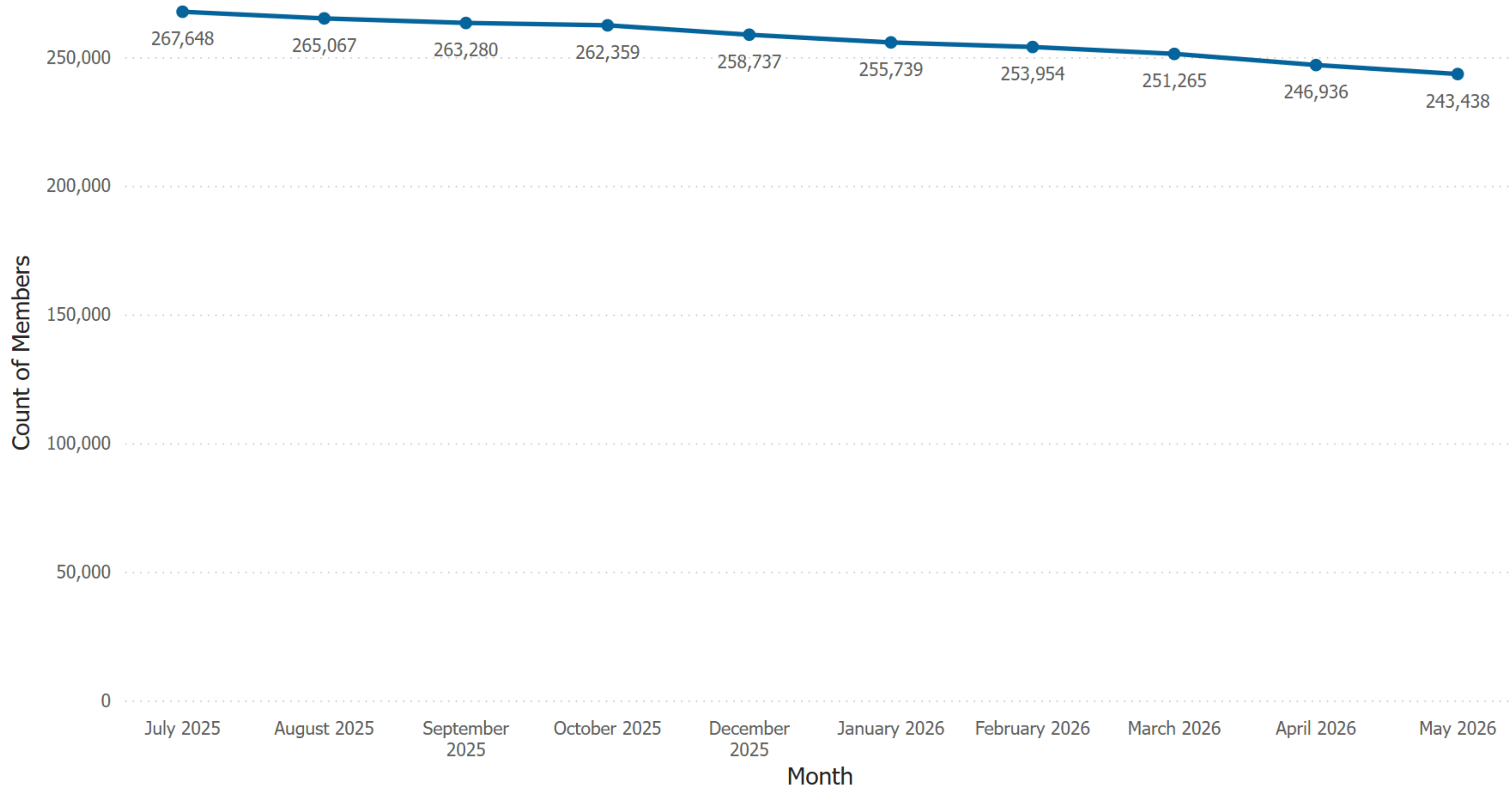
Goal: TBD, Lower is better.

KPI: Disenrollment Rate





KPI Dashboard: CCHP Medi-Cal Membership



IT Project Roadmap for FY26-27

1. **CMS System Interoperability Compliance:**
Upgrade Epic and other systems to comply with CMS interoperability requirements
2. **Claims Code Editing for Payment Integrity:**
Ensure claims are paid accurately, at the right amount, and in compliance with contracts and policies
3. **New Pharmacy Benefits Manager:**
Implementation of new third party administrator of prescription drug benefits for Commercial, BHC and DSNP members
4. **Daily & Monthly Enrollment Automation and Upgrade:**
Automate daily update of membership data to reduce manual work and provide better member service
5. **Referral Location Finder:**
Help providers and utilization management pick external providers for referrals using contractual and other parameters



CONTRA COSTA HEALTH

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To: Joint Conference Committee (JCC) Members

From: Bhumi Shah, Chief Information Officer, Contra Costa Health Information Technology (IT)

Date: June 5, 2026

Report Title: IT Report

RECOMMENDATIONS

D.6. ACCEPT report from Information Technology

FISCAL IMPACT

N/A

BACKGROUND

The purpose of this report is to provide JCC with a high-level overview of activities within the IT Department. This includes progress made, priorities and challenges.

The IT Department supports all of Contra Costa Health Plan's technology needs. IT supports CCHP from infrastructure and software systems to analytics, artificial intelligence, information security and technology procurement.

KEY ACCOMPLISHMENTS AND HIGHLIGHTS

Contra Costa Health Plan (CCHP) went to the Epic Customer Convention in May 2026 at Madison, WI. At this convention, CCHP was recognized to be one of the first to successfully implement the Medicare Advantage module in Epic. This module allowed CCHP to directly submit Medicare Advantage encounters to the Centers of Medicare and Medicaid Services. This convention was attended by more than 10,000 healthcare industry professionals. More than 300 provider systems and payor systems also attended.

Here are two photos of the slides that were presented at the convention:



CURRENT PRIORITIES AND WORK IN PROGRESS

- **Cotiviti Claims Code Editing for Payment Integrity**
To ensure claims are paid accurately and at the right amount. To comply with contracts and policies. Projected savings in the first year after implementation are expected to be between \$6 and \$8 million.
- **MedImpact New Pharmacy Benefits Manager**
Implement a new, third-party administrator of prescription drug benefits for Commercial, Basic Health Care and D-SNP members.

CHALLENGES

CCHP utilizes the Tapestry module of Epic for claims, eligibility, enrollment, contract management, utilization management, appeals and grievances. Tapestry resources are extremely hard to find nationwide because of a small pool and large demand. In the Bay Area, there are only 150-200 Tapestry resources in the nine counties. There are over a dozen systems competing for Tapestry resources, including Kaiser, John Muir, Hill Physicians, etc. CCHP will need to extend consultant contracts to ensure that the system continues to be supported and enhanced.

LOOKING AHEAD

IT and CCHP leadership will be at an Executive Offsite on June 9 to develop a twelve-month prioritized IT roadmap.

CONSEQUENCE OF NEGATIVE ACTION

If this action is not accepted, the Board will not receive a required update on IT's progress, priorities and challenges.