

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

Monthly Operational Compliance Meetings

January 14, 2025 | 02:00PM - 03:00PM | Microsoft Teams

Attendees

- Dr. Irene Lo, Chief Medical Officer
- Chanda Gonzales, Deputy Executive Director / Compliance Officer
- Alejandro Fuentes, Clinical Quality Auditing
- Belkys Teutle, Member Services
- Beth Hernandez, Quality Director
- Brandon Engelbert, Claims
- Cynthia Choi, Compliance
- David Chen, Compliance
- Dulce Orozco, Clinical Quality Auditing
- Jay Putta, Compliance
- 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 Director
- Melissa Bailey, Compliance
- Michael Chavez, Compliance
- Dr. Nicolas Barcelo, Medical Director
- Nikita Hughes, Appeals & Grievances
- Otilia Tiutin, Compliance
- Pasia Gadson, CalAIM Programs and Transitional Care Services 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
- Terri Lieder, Provider Relations Director
- Wendy Mascitto, Compliance

SUBJECT	DISCUSSION	ACTION/WHO
1.0 Welcome	1.0 Welcome Chanda Gonzales starts the Monthly Operational Compliance Meeting.	Chanda Gonzales
2.0 All Plan Letters	2.0 All Plan Letters Otilia Tiutin presents a list of All Plan Letters from both regulators and their due dates. All departments that are impacted have been notified and are in discussion. 2.1 Upcoming APLs There are three upcoming All Plan Letters that are in draft with the regulators. They have been shared to the	Otilia Tiutin
3.0	impacted departments for review and to prepare when the drafts will be finalized. 3.0 Regulatory Deliverables	SF
Regulatory Deliverables	Two important deliverables were reminded to the staff in attendance. The first is the CMS Application to have materials and documents ready for the submission goal of January 31st. The other is a DMHC APL 24-023. Compliance will send out a filing matrix and submission folder link that has info for impacted departments on what is needed. A reminder was sent out that due to the Bird Flu and Southern California Fires, the Plan remains in	Chanda Gonzales
	emergency operations status and the plan will prioritize support to members impacted by these events. Another reminder is that DHCS is still drafting an APL to provide guidance to health plans about the use of Artificial Intelligence. 3.1 Regulatory Deliverables Tracker A snapshot of upcoming submissions for January and February was shown with the due dates and impacted	-

	units. There are a total of one hundred and twenty one known deliverables for both months.	
	A graph was shown comparing the inflow and completions of DMHC eFilings that the Plan receives. We are currently on track. As of January 7, there are 21 filings pending with CCHP and 21 under review with	
4.0	DMHC. 4.1 FWA Cases	
Fraud Waste Abuse (FWA) & HIPAA	In December, the Plan received three cases regarding billing, CCC residency, and medication issues. Two out of the three cases were closed, the billing issue being the remaining one. The FWA team is waiting on additional clarification on follow-up questions.	Sylvia Taqi-Eddin
	4.2 HIPAA Cases There are a total of 32 cases in the past 6.5 months, 28 external incidents and 4 internal. 21 of the cases are closed, while 11 are still under investigation.	Chanda Gonzales
	4.3 Protected Health Information (PHI) /Patient Confidentiality A reminder was sent out that patient/protected health information should only be viewed on an as-needed basis. Staff should be mindful when emailing and saving information and to remove PHI when it is not necessary, using initials instead of the full name, and add [ENCRYPT] in the subject line of any email that is being sent outside of CCH. Staff was also reminded to lock their computer when leaving their workstation.	
5.0 Regulatory & taff Trainings	5.1 Regulatory Trainings – TGI/DEI The Transgender, Gender Diverse and Intersex (TGI) training were sent out last month in December. It is due by the end of January. Alerts will be sent out to staff to complete this training and their immediate manager/supervisor. A Diversity, Equity & Inclusion (DEI) has also been included in the training package, but not due until November 31.	Otilia Tiutin
	A reminder was posted that both trainings must be completed within the first two weeks for new hires.	
2	5.2 Regulatory Trainings – FWA/HIPAA The 2025 Fraud Waste & Abuse training was enrolled to everyone in CCHP on January 14. This training is due by the end of the year but is encouraged for it to be finished as soon as possible.	John Moral
	The HIPAA training has not been rolled out to staff, HR is still working on the training and will release when available.	<
6.0 Corrective Action Plans	6.0 Corrective Action Plans The 2023 DHCS Medical Audit Corrective Action Plan (CAP) and 2024 DHCS Primary Care Provider (PCP) Facility Site and Medical Record Review were closed. The Plan is still waiting for the 2024 DHCS Medical Audit preliminary filings. ECM Public Health CAP Quarter 1 status report were submitted to DHCS while Quarter 2 will be due November 15.	Cynthia Choi
	6.1 2023 DHCS Focused Audit CAP – Behavioral Health Submissions for the CAP are currently under review by DHCS. BHD is now following up for closed loop referrals for 3 populations: Specialty Mental Health Services, Transitions of Care, and Inpatient Transitions. All findings partially accepted; closure is pending internal audit results.	
	6.2 2023 DHCS Focused Audit CAP - Transportation	

Next meeting scheduled on

Tuesday, February 25, 2025 at 02:00PM

APPROX 00 By: Che Ce
DATE: 8/25/25

NAME, TITLE: CHANDA GONZALES, COMPLIANCE OFFICEN