



cchealth.org

5.0 CCHP IT Report

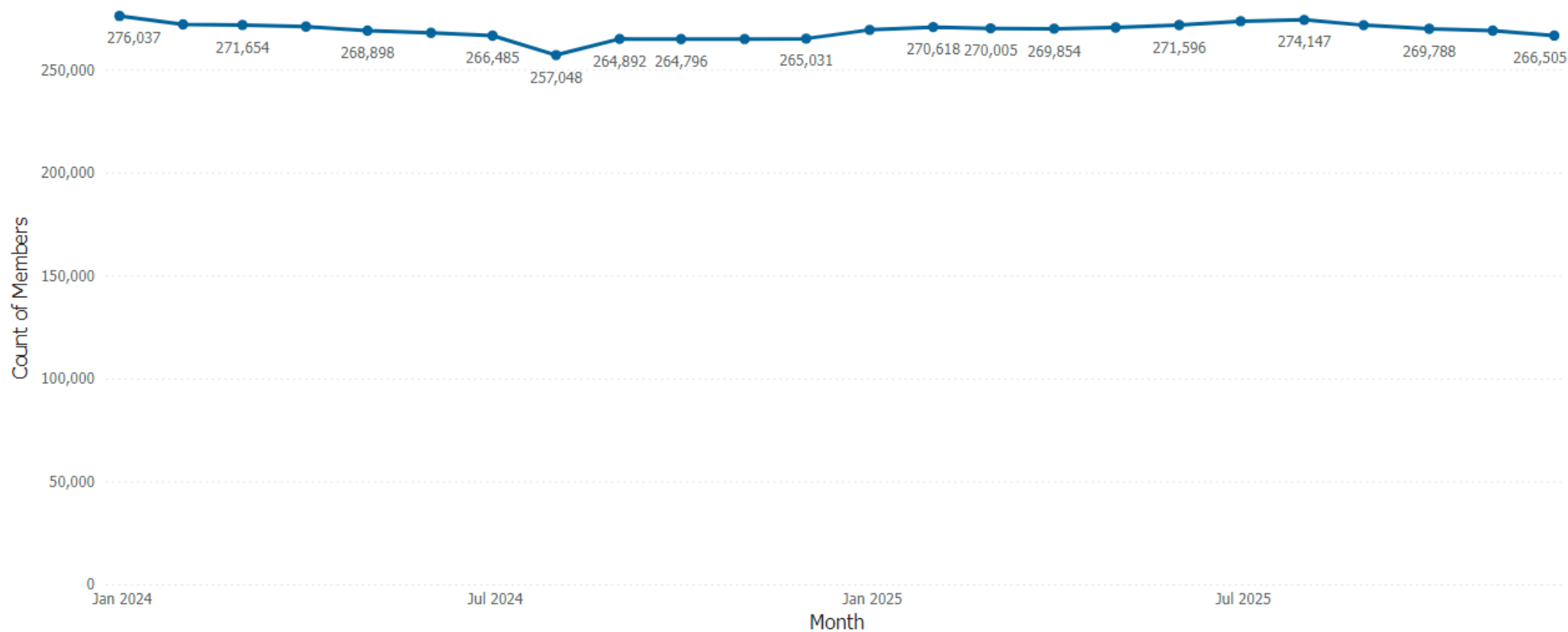
Presented by:
Bhumil Shah
Chief Information Officer



Membership

Count of Members

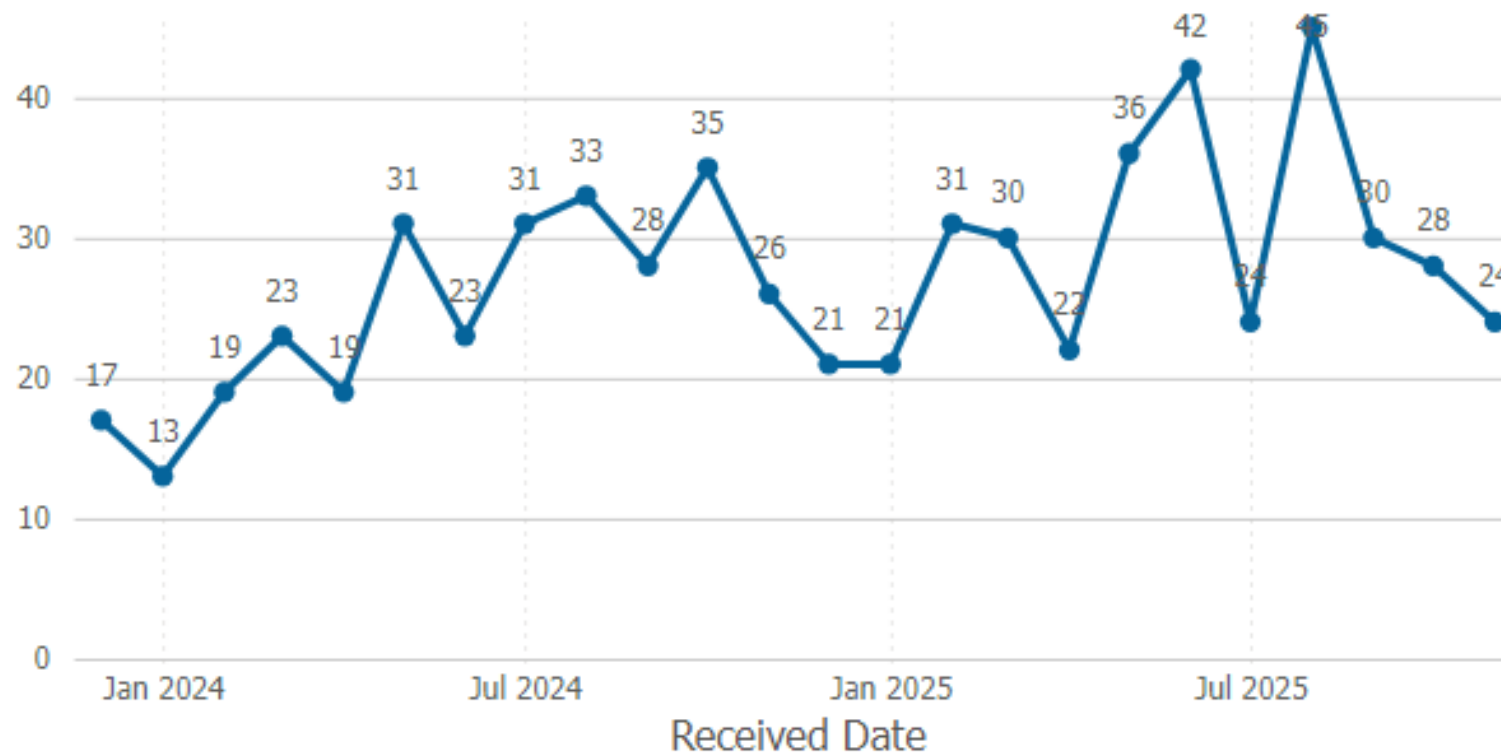
BY MONTH



Source: CCHP Population Health Dashboard (Power BI) as of 11/30/2025



Total Appeals



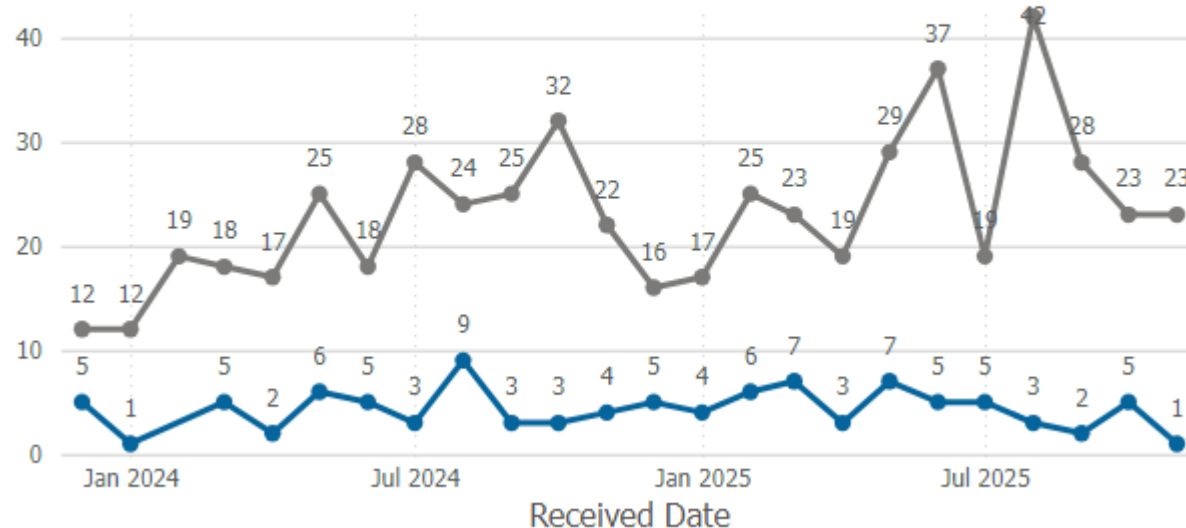
Source: CCHP Appeals and Grievances Dashboard (Power BI) as of 11/26/2025



Appeals (Continued)

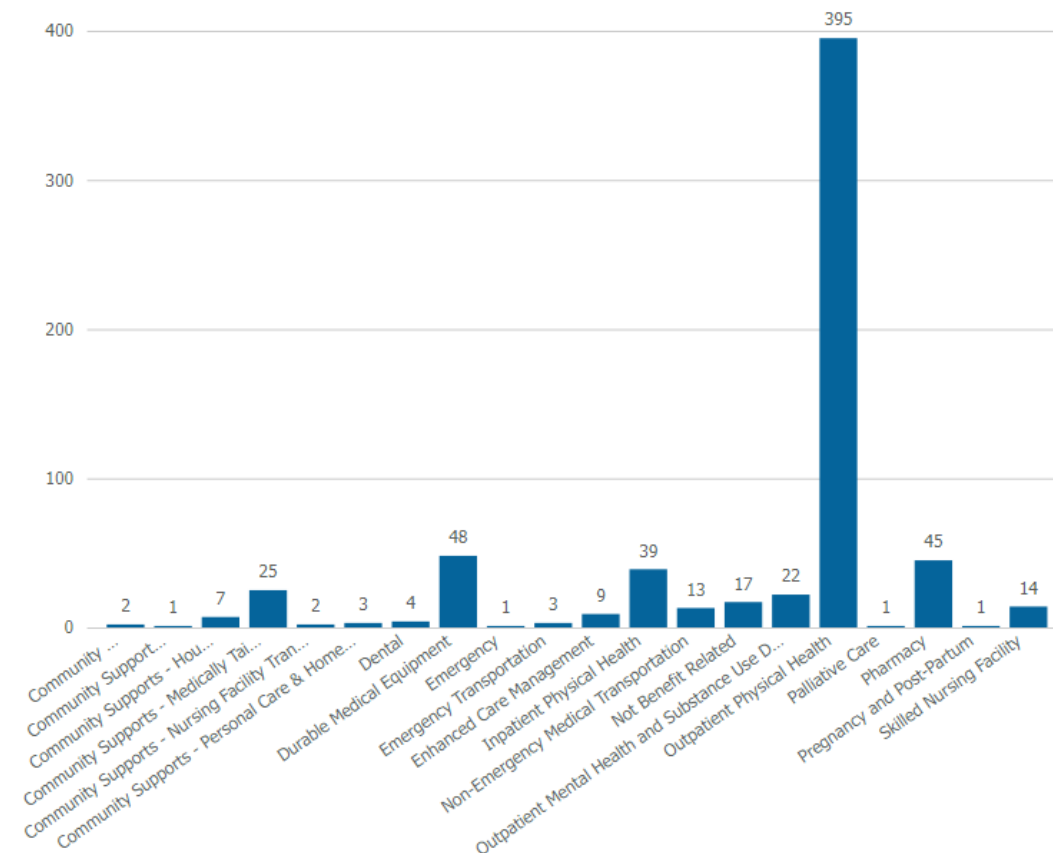
Appeals by Topic

Topic ● Expedited Member Appeal ● Member Appeal



Expedited appeals are defined as appeals where waiting for a standard decision may seriously put the health of the member at risk (like if they are currently in the hospital or urgently need medication)

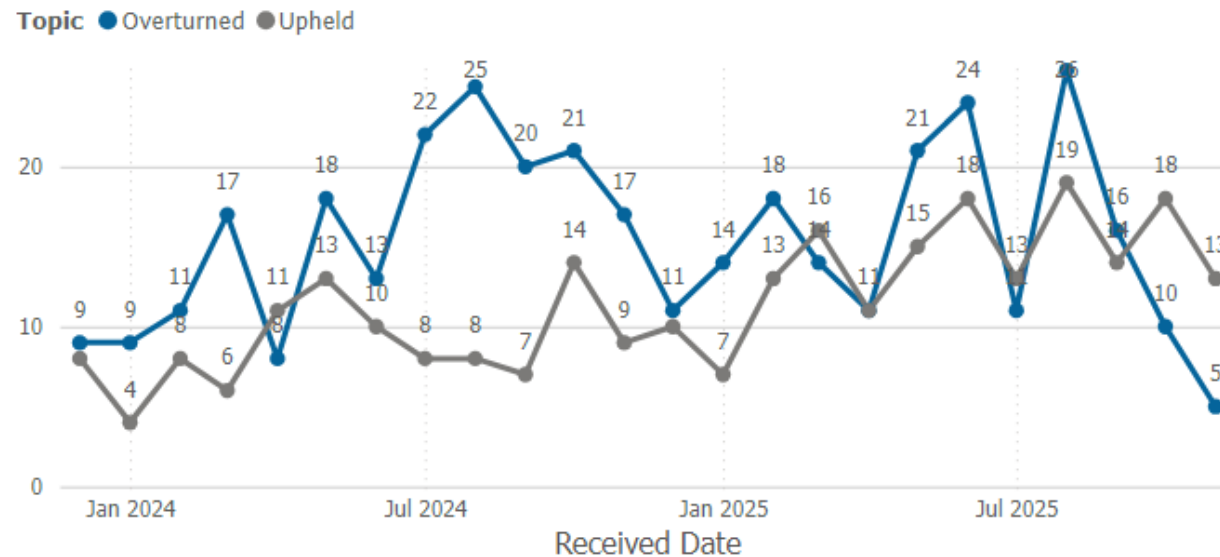
Appeals by Benefit Type



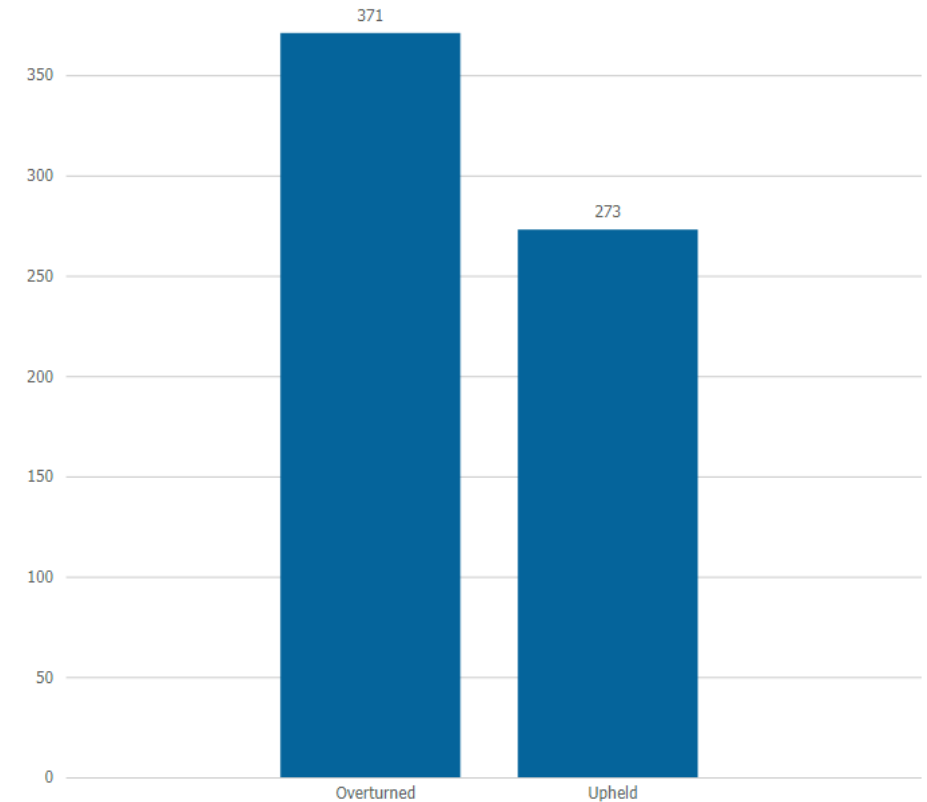
Source: CCHP Appeals and Grievances Dashboard (Power BI) as of 11/26/2025

Appeals (Continued)

Appeals by Outcome



Appeals by Outcome

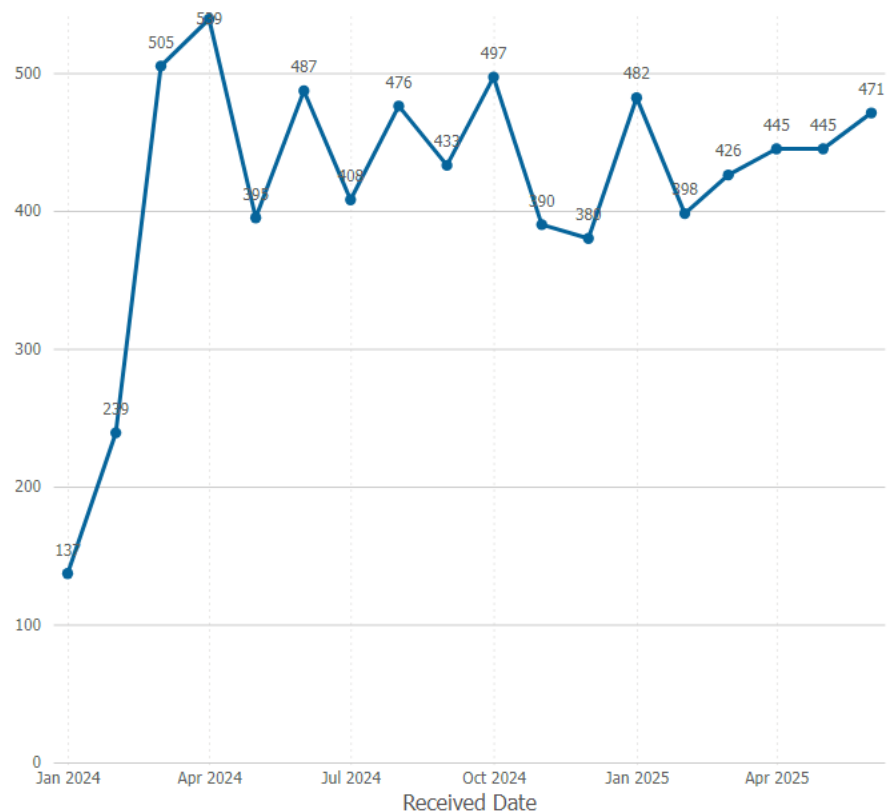


Source: CCHP Appeals and Grievances Dashboard as of 11/20/2025
 Filter: Removed “Other” outcomes (member cancelled or not yet resolved)



Grievances

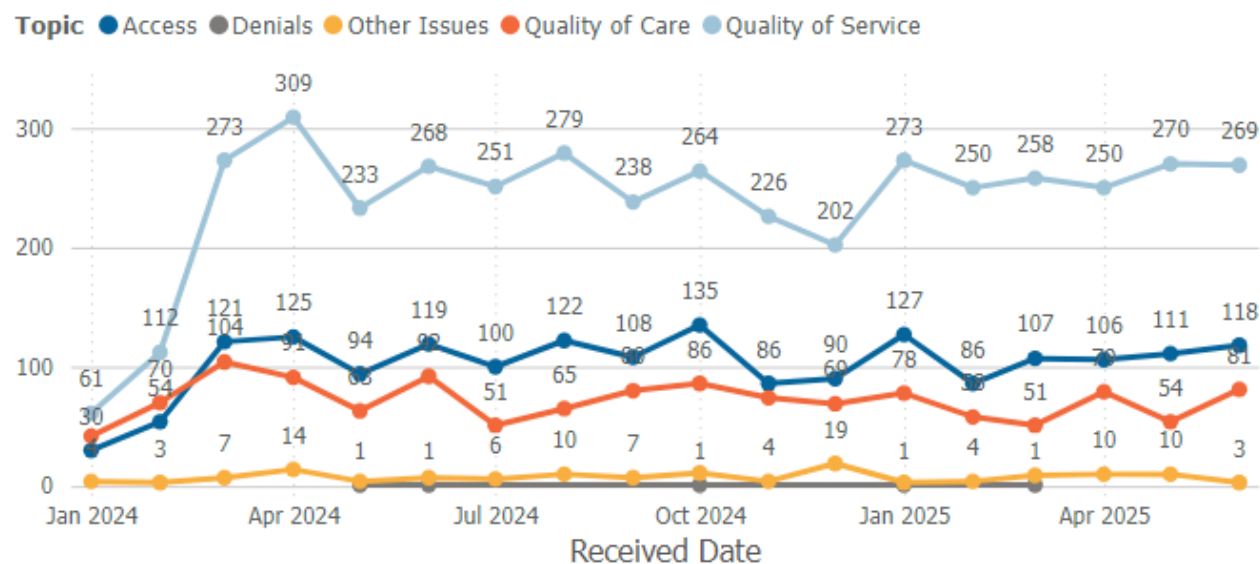
Total Grievances



CCHP: 1.7 grievances per 100K member

California Medi-cal average: 3.1 grievances per 100K member

Grievances by Issue Type



Access examples: physical access, provider availability, language access

Quality of Care examples: inappropriate care, provider grievances

Quality of Service examples: case management, provider/staff attitude, member materials

Other Issues examples: Referrals, billing, appeal timeliness

Source: CCHP Appeals and Grievances Dashboard(Power BI) as of 6/30/2025

Key IT Project Update

- Key In Progress IT Projects
 - New Line of Business: D-SNP
 - Regulatory: CMS Interoperability
 - Member Rides: RoundTrip
- Key Upcoming IT Projects
 - Data: New Dashboards
 - Claims: Payment Integrity
 - AI: Member Services, Claims and Compliance

New Line of Business: D-SNP

The D-SNP Program is a strategic enterprise initiative that enables us to serve members eligible for both Medicare and Medicaid through a fully compliant Dual Eligible Special Needs Plan. This program ensures we meet all CMS and State requirements while strengthening our capabilities in care coordination, data accuracy, and operational performance.

Key Metrics

- The program supports the exchange of approximately **100 D-SNP files** with CMS and DHCS.
- A total of **44 third-party systems** required detailed scoping and integration.
- The team documented over **1,200 system build decisions** to support readiness.
- Evaluated and improved **22 operational and technical workstreams**.
- Engagement with **8 new third-party vendors** necessitated new or revised contractual agreements.
- The D-SNP effort included **7 comprehensive testing phases**, executing more than **1,500 test scenarios**.
- Enrollment has reached **133 members** as of December 1.

Regulatory: CMS Interoperability

The Centers for Medicare & Medicaid Services (CMS) released the CMS Interoperability and Prior Authorization Final Rule (CMS-0057-F) on January 17, 2024. This final rule emphasizes the need to improve health information exchange to achieve appropriate and necessary access to health records for patients, healthcare providers, and payers.

The **CMS-0057-F final rule** requires specific healthcare payers—including Medicare Advantage organizations, state Medicaid and CHIP programs (FFS and managed care), and Qualified Health Plan (QHP) issuers on the Federally Facilitated Exchanges (FfEs)—to implement technical and operational changes to streamline prior authorization and improve data exchange.

Application Programming Interfaces (API)'s to be implemented:

- Patient Access API
- Provider Access API
- Payer to Payer API
- Prior Auth Support API
- Coverage Requirements Discovery API
- Documentation Templates and Rule API
- Provider Directory API



Member Rides: Roundtrip

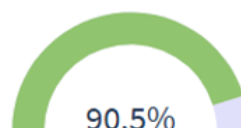
Booked

129,018 Rides for
5,547 Unique Riders

Completed

78,277 Rides for
5,008 Unique Riders

Fulfillment Rate



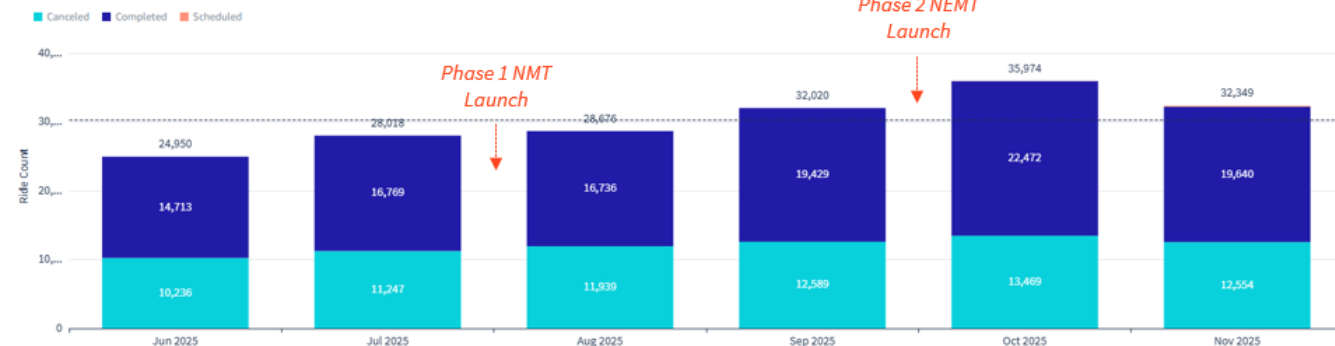
All Data from 08-1-25 thru 11-30-25

Vehicle & Payment Types

| Vehicle Type | Payment Type | |
|-----------------------|---------------|---------------|
| | Facility | Total |
| Advanced life support | 2 | 2 |
| Basic life support | 11 | 11 |
| Medical sedan | 95 | 95 |
| Rideshare | 73,418 | 73,418 |
| Stretcher van | 213 | 213 |
| Taxi | 3,507 | 3,507 |
| Wheelchair | 1,031 | 1,031 |
| Total | 78,277 | 78,277 |

Monthly Ride Volume Trend

Includes All rides for the last 6 months ending 2025-11-30

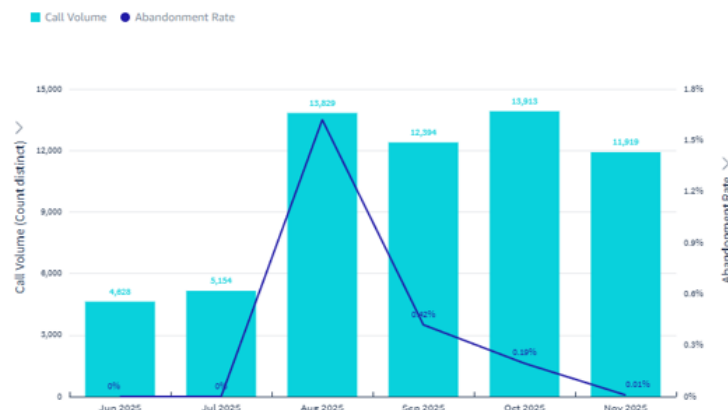


Key Accomplishments:

- New FHIR-integrated data flow for CCHP member data, enabling member search, eligibility check and booking seamlessly within Roundtrip booking portal
- New FWA control features, including:
 - o Public Transit Check
 - o In-Network Location Check
- Managed 150% increase in call volume, ride bookings and authorization checks

roundtrip

Call Volume Trend



Average Distance
Per Transport

10.7 miles



Partners Completing
Transports

12



Average Rider
Transport Rating

4.8/5

Public Comments

JCC Comments