

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

Compliance Committee Meeting

July 29, 2025 | 02:02PM - 03:00PM | Microsoft Teams

Attendees

- ☐ Dr. Irene Lo, Interim Chief Executive Officer
- ☐ Elena White, Interim Director of Operations
- □ Chanda Gonzales, Deputy Executive Director /

Compliance Officer

- ☐ Beth Hernandez, Quality Director / Health Equity
- Officer
- ☐ Bhumil Shah, Chief Information Officer
- ☐ Brandon Engelbert, Member Services Director
- □ Cynthia Choi, Compliance
- ☑ David Chen, Compliance
- □ Denise Valder, Claims
- ☑ Jill Perez, Appeals & Grievances and Utilization

Management Director

- ☑ Dr. Joseph Cardinalli, Pharmacy Director

- □ Leizl Avecilla, Case Management Director
- ☐ Magda Souza, Clinical Quality Auditing and Behavioral

Health Director

- Melissa Bailey, Compliance
- Michael Chavez, Compliance
- ☑ Dr. Nicolas Barcelo, Medical Director
- ☑ Otilia Tiutin, Compliance
- ☑ Pasia Gadson, CalAIM Programs and Transitional Care

Services Director

- ☑ Patricia Munoz-Zuniga, Advice Nurse Director
- ☑ Dr. Sara Levin, Senior Medical Director

- Sylvia V. Taqi-Eddin, Compliance
- □ Terry Reiser, Senior Compliance Director

DISCUSSION

- Meeting Minutes Approved
- Reviewed Policy Review Process (Clinical vs. Non-Clinical Policies)
- Modified Compliance Charter, incorporating the new policy review process Approved
- Reviewed following P&Ps for approval:
 - a. Member Services Brandon Engelbert
 - i. MS 8.053 Changes in Member Circumstances (New) Approved
 - b. Claims Denise Valder
 - i. CLM 4.007e Claims Processing, Determination Timeliness Internal Monitoring (Modified) Approved
 - ii. CLM 4.573e Sensitive Services (Modified) Proposed to delay
 - iii. CSU 4.159e Recovery of Provider Overpayment (Modified) Approved
 - iv. CLM Claims Payment Requirements (New) Approved
 - c. Compliance Terry Reiser
 - i. COMP 3.002 All Plan Letters (Modified) Approved
 - i. COMP 3.006 Anti-Fraud Program Policy (Modified) Approved
 - ii. COMP 3.007 Enforcement Actions Policy (New) Approved
 - iii. COMP 3.022 Health Plan Documentation (To be Retired) Approved to retire
 - ii. COMP 3.039 HIPAA Reporting of Improper Disclosures (Modified) Approved
 - iii. COMP 3.040 Compliance Program (Modified) Approved
 - iv. COMP 3.502 Investigation Compliance (Modified) Approved
 - d. Business Operations Terry Reiser
 - i. BOPS 1.052 Community Reinvestments Policy (New) Approved
 - ii. BOPS 1.053 Medical Loss Ratio Policy (New) Approved
- Open CAP Review
 - a. Reviewed actions taken to complete the DHCS Medical Audit CAP

- i. Provider Terminations Self-Monitoring Results (Brandon Engelbert)
- ii. Change in Member Circumstances Self-Monitoring Results (Brandon Engelbert)
- Open Discussion
 - a. 2025 DHCS Audit audit period August 18 August 29

ACTION ITEMS

- Melissa Bailey, due by August 12, 2025 Provide clarity that the department lead ensures that Clinical Policies go to appropriate council and how the Compliance Department will receive the finalized P&Ps
- Denise Valder, due by August 12, 2025
 - i. CLM 4.573e move discussions with Dr. Sara Levin to another offline meeting for clarity of P&P (Terry Reiser will schedule)
 - ii. CSU 4.159 add definition of "TRAP" abbreviation Target Research Assess Present
 - iii. Claims Payment Requirements add references to bottom of the page

Next meeting will be held on

Tuesday August 12, 2025 at 02:00PM - 03:00PM

Approved:	Date:
an Co	2/15/25
Chanda Gonzales, Compliance Officer	