

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

Monthly Operational Compliance Meetings

March 25, 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	1.0 Welcome	
Welcome	Chanda Gonzales starts the Monthly Operational Compliance Meeting.	Chanda Gonzales
2.0	2.0 Introduction – New Compliance Director	
Introduction	Matthew Verdier is introduced as the new Compliance Director.	Matthew Verdier
3.0	3.0 All Plan Letters	
All Plan	DHCS:	Otilia Tiutin
Letters	- 24-019: Minor Consent to Outpatient Mental Health Treatment or Counseling - No current	
	updates; nothing currently due to Compliance Unit.	
	- 25-002: Skilled Nursing Facility Workforce Quality Incentive – issued 01-13-25. No current	
	updates.	
	 25-004: Community Reinvestment Requirements – issued 2-11-25. No current updates. 25-005: Standards for Determining Threshold Languages, Nondiscrimination Requirements, 	
	Language Assistance Services, and Alternative Formats – Issued 2-12-25. The due date has been	
	changed to July 1, 2025. The Quality Department has submitted a ticket to IT to edit all letters to	
	adhere to the update.	
	DMHC:	
	- 21-011: Grievance and Appeals Requirements, Notice and "Your Rights" Templates – Issued 1-	
	10-25. No current updates	
	- *25-004: AB 118: Part 1 - Compliance with Large Group Standardized Evidence of	
	Coverage/Disclosure Form – Issued 3-10-25. Changes apply to all commercial full-service health	1:
	care service plans and require DMHC to develop standardized templates for various documents	

	In quarter 1, CCHP received 15 total cases. Of the 15, 14 were external incidents.	Michael Chavez
	FWA process is under review, in April, CCHP and Cotiviti will meet to discuss their analysis and supporting materials. 5.2 HIPAA Cases	
	As for the follow-up case received in late February, it has been closed since 2023, but communication with DHCS had been lost.	
5.0 FWA/HIPAA	5.1 FWA Cases There are two pending cases and one follow-up case. The new referral was received this month from the PQI Committee. They discovered two other patterns with a specific provider and have reported it to Compliance. The case is still under investigation and has been reported to DHCS.	Sylvia Taqi-Eddin
	4.2 DHCS Audit Preparation As of this moment, there is no official information of when the Audit will occur. There is information that other Plans have experienced both DMHC and DHCS performing a joint audit. A reminder was sent out that July is normally the time for preparations of audit documents. No confirmation whether the audit will be performed in person or virtually. Mock audits may be set up by Compliance in preparation for the audits.	
	4.1 DMHC Regulatory Deliverables Tracker The Plan is currently on track of all DMHC deliverables. Compliance will reach out to relevant departments when more information is released.	
	corrected" so departments have been reached out to. DMHC will do a "follow-up review" within 9 months. DHCS - Reminder that the 2024 Audit CAP deliverables are due today	
	will notify any additional requests to departments. DMHC – 2022 Survey (Audit) – Final report has been published on 3-23-25. 12 noted deficiencies were "not	
Regulatory Deliverables	CMS/DSNP – Application deficiency corrections for Medicare Part C and Pharmacy Part D submitted 3-24-25. DMHC – APL24-023: 2024 Legislation; Many P&Ps to be updated and submitted by 4-30-25. Compliance	Chanda Gonzales
4.0	Released 3-10-25. Draft has been sent out to departments, any new information will be sent out. 4.0 Regulatory Deliverables - Updates	
	DMHC: - 25-XXX: Targeted Provider Rate Increases – supersedes APLs 24-007, 10-014, and 10-003.	
	 DHCS: 24-XXX: Hospice Services and Medi-Cal Managed Care supersedes APL 13-014 25-XXX: Targeted Provider Rate Increases Supersedes APLs 24-007, 10-014, and 10-003. Released 1-15-25 25-XXX: Assembly Bill 3275 Guidance (Claim Reimbursement) released 02-13-25 	
	* APLs are under review with compliance. Cover letters will be sent out to appropriate units. 3.1 Upcoming APLs (currently still drafts)	
	departments are Compliance, Auth-UM, Provide Relations, and Claims. - 25-006: Health Plan overage of Mobile Crisis Services – Issued 3-21-25. To provide guidance regarding the obligations of health plans related to behavioral health crisis services provided to an enrollee by a 988 center or mobile crisis team. Affected units are Claims and Behavioral Health Services.	
	Compliance, Member Services, and Pharmacy. - *25-005: Southern California Fires and Flexibilities to Impacted Providers – Issued 3-19-25. DMHC directs all health plans with providers in Los Angeles and/or Ventura Counties who were misplaced by the fires to follow certain guidelines related to extend prior auth. by 180 days. Extend timeframes to submit claims to 365 days, extend dispute or overpayment to 180 days, allow mobile clinics or temp locations for 6 months, create a resource web page for providers. Affected	
	describing health plan member benefits, such as the Evidence of Coverage, Disclosure Form, Schedule of Benefits, Explanation of Benefits, and Cost-Share Summary. Affected departments are	

6.0 Regulatory and Staff	6.1 Regulatory Trainings – TGI/DEI Both trainings have been added to an automatic enrollment for new employees to meet the completion qualification of two weeks of hire.	John Moral
Trainings	6.2 Regulatory Trainings – FWA/HIPAA 2025 HIPAA training has been assigned to all staff on 3-11-25. If not enrolled, please reach out to Compliance.	
7.0 Corrective	7.1 Corrective Action Plans – 2024 DHCS Medical Audit Cap A reminder was sent out that the 2024 DHCS Medical Audit CAP responses are due by COB March 25, 2025.	Melissa Bailey
Action Plans	7.2 Corrective Action Plans – ECM Public Health CAP The Plan has submitted the update to DHCS for Quarter 1 status report. Expecting the Quarter 2 status report to be due on November 15.	8
	7.3 Corrective Action Plans – 2024 DHCS Interoperability Requirements CAP Under review by DHCS.	
	7.4 Corrective Action Plans – 2023 DHCS Focused Audit CAP – Behavioral Health Pending DHCS final review.	Cynthia Choi

Next meeting scheduled on

Tuesday, April 29, 2025 at 02:00PM

APPRALED BY: CHANDA GONZALDS,

COMPLIANCE OFFICER

SIGNED: Chu Ca, 8/25/25