



Quality Improvement and Health Equity Committee (QIHEC) Q4 2024 Activity Summary

Reporting Period: Q4 2024

QIHEC Meeting Date & Time: December 19, 2024 | 8:00 AM – 10:00 AM

Topics Discussed

NCQA Renewal Survey – Accreditation Update

The committee received an update on SFHP's preparation for the NCQA re-survey, with a focus on:

- Quality Improvement 3 (QI 3): Continuity and Coordination of Medical Care
- Quality Improvement 4 (QI 4): Continuity and Coordination between Medical Care and Behavioral Healthcare
- SFHP staff facilitated provider engagement sessions in April and May to discuss performance gaps in postpartum care, diabetic eye exams, plan all-cause readmissions, cardiovascular monitoring, and antidepressant medication management.
- Interventions Implemented:
 - Provider consultation note templates to improve care coordination
 - Outreach through provider newsletters and surveys
 - \$50 incentives for provider engagement
- Challenges Identified: Low provider participation in interventions due to time constraints, misalignment with provider workflows, and lack of system integration.

DSNP/STARS Update

- SFHP is preparing for Dual Eligible Special Needs Plan (DSNP) expansion into Medicare, aligning with 42 STAR quality measures.
- Challenges: First-time implementation of Medicare products, ensuring process alignment with STAR measures.
- Next Steps:
 - Enhance provider education
 - Improve data collection strategies
 - Address identified quality gaps before the NCQA re-survey in January 2025

Health Equity Updates

1. NCQA Health Equity Accreditation: SFHP is working toward compliance with the DHCS-mandated health equity accreditation by June 2025, with a focus on improving Sexual Orientation and Gender Identity (SOGI) data collection.

2. Auto-Assignment Formula Changes: DHCS revisions led to a drop in SFHP's auto-assignment rate from 82% to 77%, affecting Medi-Cal member distribution.
3. Monetary Sanctions for Accountability Measures: SFHP faced a \$25,000 sanction for missing well-child visit (W30) and topical fluoride application targets, primarily due to data collection gaps rather than service delivery failures.
4. Diversity, Equity, and Inclusion (DEI) Training:
 - Required for all staff, providers, and contractors by 2025
 - Training will integrate region-specific data to address local health disparities

Behavioral Health Initiatives

1. Non-Specialty Mental Health Services (NSMHS) Outreach Plan:
 - Senate Bill 1019 requires SFHP to develop a member and provider education plan to increase awareness and reduce stigma around mental health services.
 - The plan includes culturally and linguistically tailored materials available via mail, online, and in provider offices.
2. Carelon Quality Management (QM) Evaluation:
 - SFHP is evaluating Carelon's quality management and behavioral health service delivery.
 - Identified challenges: Low member awareness, stigma, and referral gaps between PCPs and behavioral health providers.

Clinical Operations & Utilization Management Updates

1. Reviewed Utilization Trends: Addressed prior authorization processes to improve service access.
2. Identified Challenges: Data integration issues affecting tracking of utilization metrics.
3. Proposed Improvements:
 - Enhanced provider communication regarding UM policies
 - System upgrades for better tracking of service usage

Actions Taken

- Approval of Consent Calendar Items:
 - July 2024 QIHEC Minutes
 - Q2 2024 Emergency Room Rx Access Report
 - Q2 2024 Grievance & Appeals Reports
 - Utilization Management (UM) Committee Minutes (July, September, October 2024)
 - Health Services Policies & Procedures (P&P) Updates
 - Q2 2024 PQI Report & P&T Reappointments
- Committee Discussions on Alternative Interventions:
 - Strengthening provider-to-provider communication for improved care coordination
 - Expanding community reinvestment initiatives under new Medi-Cal requirements



Next Steps

- Continue monitoring NCQA re-survey readiness and provider engagement efforts.
- Expand behavioral health outreach to increase access to services.
- Refine DEI training based on stakeholder feedback.
- Improve data collection strategies to address gaps in HEDIS and DHCS measures.
- Continue advocating for adjustments to DHCS's auto-assignment formula to ensure equitable distribution of members.