



COMMITTEE: EXECUTIVE QUALITY IMPROVEMENT HEALTH EQUITY COMMITTEE (EQIHEC)

DATE OF MEETING: DECEMBER 12, 2024

CALL TO ORDER: 7:17 AM BY TRACO MATTHEWS, CHAIR

Members Present On-Site:	Jennifer Ansolabehere, KC Public Health Satya Arya, MD - ENT. Danielle Colayco, PharmD – Komoto	Allen Kennedy – Quality Team DME Michael Komin, MD – Komin Medical Group Chan Park, MD – Vanguard Family Medicine	Rukiyah Polk - CAC Chair Traco Matthews – KHS Chief Health Equity Officer
Members Virtual Remote:			
Members Excused=E Absent=A	Debra Cox – Omni Family Health (A) Jasmine Ochoa - Health Equity Manager of Public Health (E)	Todd Jeffries – Bakersfield Community Healthcare (E) Philipp Melendez, MD – OB/GYN (A)	
Staff Present:	Michelle Curioso - Director of Pop Health Management Pawan Gill - Health Equity Manager Sukhpreet Sidhu, MD – Pop Health Medical Director Anastasia Lester – Sr. Health Equity Analyst Devin Brown – Chief Human Resources Officer John Miller – Quality Improvement Medical Doctor Martha Tasinga, MD – KHS Chief Medical Officer	Magdee Hugais – Director of Quality Improvement Kailey Collier - Director of Quality Performance Maninder Khalsa – Medical Director Christine Pence, Senior Director of Health Services Adriana Salinas – Director of CSS Nate Scott – Member Services Director	Vanessa Nevarez - Health Equity Coordinator Greg Panero – Provider Network Analytics Abdolreza Saadabadi, MD – BH Medical Director Isabel Silva - Senior Director of Wellness & Prevention Melinda Santiago – Director of Behavioral Health Aurora De La Torre – MCAS Supervisor

Agenda Item	Discussion/Conclusion	Recommendations/Action	Date Resolved
Quorum	8 of 12 committee members present; Debra Cox, Jasmine Ochoa, Todd Jeffries, and Philipp Melendez were absent.	Committee quorum requirements met.	N/A
Call to Order	Traco Matthews, Chair, called meeting to order at 7:17 am.	N/A	N/A
Public Presentation	There were no public presentations.	N/A	N/A

Agenda Item	Discussion/Conclusion	Recommendations/Action	Date Resolved
Committee Announcements	Traco Matthews gave the opportunity for member updates. <ul style="list-style-type: none"> There were no committee announcements. 		
Committee Minutes	<u>Approval of Minutes</u> CA-3) The Committee's Chairperson, Traco Matthews, presented the EQIHEC Minutes for approval.	Action: <ul style="list-style-type: none"> Satya A. first, Chan P. second. All aye's. Motion carried. 	12/12/24
Old Business	There was no old business to present.	N/A	N/A
New Business	<u>Consent Agenda Items</u> <ul style="list-style-type: none"> CA-4) Behavioral Health Advisory Committee (BHAC) Minutes from October 16, 2024 CA-5) Health Equity Transformation Steering Committee (HETSC) Minutes from September 12, 2024 CA-6) Network Advisory Committee (NAC) Minutes from October 18, 2024 CA-7) Pharmacy Drug Utilization Review (DUR) Minutes from September 30, 2024 CA-8) Physician Advisory Committee (PAC) August 7, 2024, Redacted Summary of Proceedings CA-9) Physician Advisory Committee (PAC) September 4, 2024, Redacted Summary of Proceedings CA-10) Population Health Management (PHMC) Minutes from September 4, 2024 CA-11) Utilization Management Committee (UMC) Minutes from September 11, 2024 CA-12) Quality Improvement Workgroup (QIW) Minutes from September 26, 2024 A motion to approve Consent Agenda Items was requested. 	Action: <ul style="list-style-type: none"> Satya A. first, Chan P. second. All aye's. Motion carried. 	12/12/24

	<p><u>13) Behavioral Health Advisory Committee Report</u></p> <ul style="list-style-type: none"> • Melinda S. gave a presentation that covered the Q3 and Q4 reports of the Behavioral Health Department and posed a question to the committee regarding how the current KHS provider information is being promoted. • Chan P. replied to Melinda S. that he would like a more hands-on approach that includes more communication and follow-up. He recommended having more staff and resources for internal provider staff. • A motion to approve the Behavioral Health Advisory Committee Report was requested. <p><u>14) Quality Performance Report</u></p> <ul style="list-style-type: none"> • Kailey C. presented the Quality Performance Summary Report that covered Q3 2024 data. Kailey C. concluded by asking the group if site reviews have been helpful and for specifics within their practice that are working with their patients. • Danielle C. asked if the HPV rate is bringing down compliance rates. • Kailey C. responded that yes, the second dose is bringing down rates and that Care Data is required to report vaccines. The oversight and monitoring can be improved by KHS and KHS will work better with providers to report the data. • Kailey C. asked the committee how KHS can better educate our members. • Danielle C. identified an opportunity to start HPV vaccinations at age 9. • A motion to approve the Quality Performance Report was requested. 	<p>Action:</p> <ul style="list-style-type: none"> • Michael K. first, Satya A. second. All aye's. Motion carried. • No response was given from the committee. • No response was given from the committee. • Kailey C. will follow up on HPV age requirements. • Chan P. first, Satya A. second. All aye's. Motion carried. 	<p>12/12/24</p> <p>12/12/24</p> <p>12/12/24</p> <p>12/12/24</p> <p>12/12/24</p>
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	<p><u>15) Quality Improvement Workgroup Report</u></p> <ul style="list-style-type: none"> • Magdee H. presented the Quality Improvement Report that covered Q3 2024 data. • Quality of Care (QOC) Grievances for Q2 2024 was presented: 490 grievances were classified as Quality of Care (QOC) concerns and closed. 2,543 grievances were classified as non-QOCs and closed. 3,033 total grievances were closed. • A summary of PQI activity for Q2 2024 was presented: 162 PQIs were reviewed. 85 were classified as "No Quality Concern." 75 were classified as "Potential Harm." 2 were classified as "Actual Harm." • The results of the 2024 KHS Provider Satisfaction Survey showed significant improvements compared to 2023: Overall Satisfaction: 90%. Would Recommend: 98.8% (up from 98.3% in 2023). Coordination of Care: increased to 53.1%. • Magdee H. concluded by asking the group for any recommendations for QIW. • A motion to approve the Quality Improvement Workgroup Report was requested. <p><u>16) Grievance Summary Report</u></p> <ul style="list-style-type: none"> • Nate S. presented the 2023 Grievance Analysis, the Q3 2024 Grievance Operational Board Update, and the Q3 2024 Summary Report. • Michael K. asked if the 10 grievances KHS currently has is per provider. • Nate S. responded that the grievances are not per provider, they are overall. He then began to define what a grievance is. He explained that KHS is required to accept a member's dissatisfaction as a grievance, even though the member did not want to formally file a grievance. Nate S. added that per our member satisfaction survey, our members are very happy, however, there is always room for improvement as NCQA continues to raise the bar for quality assurance. 	<ul style="list-style-type: none"> • No response was given from the committee. • Satya A. first, Michael K. second. All aye's. Motion carried. 	<p>12/12/24</p> <p>12/12/24</p>
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	<ul style="list-style-type: none"> • Michael K. asked if providers ask to dismiss their grievances. • Dr. Martha T. responded no. She added that when providers ask to no longer have members as patients it is usually due to their relationship being broken. Also, if a member wants to change their doctor at any time, KHS will do that for them. • A motion to approve the Grievance Summary Report was requested. <p><u>17) Utilization Management Program Report</u></p> <ul style="list-style-type: none"> • Dr. Maninder K. presented the UM Program report that contains a synopsis of analytics that reflect the performance of the Utilization Management Department's in the 3rd quarter of 2024 including Utilization Management Metrics, and Internal Audit Results. • On October 1, 2024, KHS revised the codes required for Prior Authorization. Although a small number of codes were added, a significantly larger number of codes were removed to result in an overall reduction in authorizations throughout the Provider Network. The UM team is monitoring the impact of these changes and addressing Provider questions and concerns. • The Utilization Management Team audits performance to ensure regulatory and industry standards are met or exceeded. In addition, available data is analyzed using a Health Equity lens and identifying areas where additional effort will benefit the population we serve. • Dr. Martha T. added that KHS has 72 hours for urgent referrals and routine referrals are 5 days. • Satya A. left the meeting at 8:30am. • A motion to approve the Utilization Management Program Report was requested. 	<ul style="list-style-type: none"> • Jennifer A. first, Satya A. second. All aye's. Motion carried. 	12/12/24
		<ul style="list-style-type: none"> • Allen K. first, Chan P. second. All aye's. Motion carried. 	12/12/24

	<p><u>18) Network Adequacy Committee Report</u></p> <ul style="list-style-type: none"> • Greg P. presented the Network Adequacy Report that covered Q4 2024 data. • Greg P. addressed a follow-up from a previous concern that Jennifer A. had regarding lack of birthing centers at the 9-12-24 EQIHEC meeting. KHS is currently trying to be contracted with the Antelope Valley Hospital which has OBGYN access and that the Ridgecrest Regional Hospital should be opening their labor and delivery hospital soon. Dr. Sukhpreet S. added that KHS has recently credentialed a provider for OB services in Ridgecrest. • A motion to approve the Network Adequacy Committee Report was requested. <p><u>19) Pop Health Management Report</u></p> <ul style="list-style-type: none"> • Michelle C. presented the Pop Health Management Report that covered Q4 2024 data. She also addressed a concern that Jennifer A. had regarding lack of access of maternal healthcare in East Kern at the 9-12-24 EQIHEC meeting. • Michelle C. presented the problem of access to maternal healthcare in East Kern and sets the stage for understanding the issues surrounding this gap in care. The presentation evaluates healthcare access for pregnant women in East Kern, presenting population demographics, healthcare utilization data, and analyzing disparities related to age, ethnicity, and socioeconomic factors. The data on pregnancy care utilization (54% of pregnant women received care from a provider) provides insights into how well the current system is serving the community. The recommendation for action—improving access to healthcare for pregnant women in the region. 	<ul style="list-style-type: none"> • Chan P. first, Allen K. second. All aye's. Motion carried. 	12/12/24
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	<ul style="list-style-type: none"> • A call to action by the PHM Committee has resulted in a workgroup that was developed to tackle the issue of limited access to healthcare services for pregnant women in East Kern. • These actions are: Following up on the reopening of the Ridgecrest Hospital, increasing access to healthcare providers – new provider was added per PNM, offering mobile health clinics or improving telemedicine availability. Providing community outreach and education to increase utilization of available services. Partnering with CBOs. • Ongoing monitoring and assessment to ensure that improvements are being made include Tracking maternal health outcomes over time to see if access to care improves, conducting follow-up surveys with pregnant women in East Kern to assess whether access to care and the quality of care have improved, Monitoring changes in maternal and fetal health outcomes, such as rates of complications or preterm births, following the proposed interventions. • Jennifer A. questioned the data in Michelle C's. presentation that stated 46% of pregnant members were not seen by their providers. • Dr. Martha T. responded that some of the possibilities for such a high percentage is because some women may not keep their baby, or their cultural norm is to not see a doctor in the first trimester. Michelle C. added that KHS is participating in groups that are trying to find resolutions to address education and health literacy issues. • A motion to approve the Population Health Management Report was requested. 	<ul style="list-style-type: none"> • Jennifer A. first, Chan P. second. All aye's. Motion carried. 	12/12/24
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	<p><u>20) Health Equity Transformation Steering Committee</u></p> <ul style="list-style-type: none"> Pawan G. presented policy 22.08-I Collection of SOGI (Sexual Orientation & Gender Identity) Data 2024-140. Danielle C. asked if unisex is an option under the category ‘sex assigned at birth’ and stated she would like to get with Pawan offline to answer additional questions due to time constraints. Pawan G. responded that she welcomes feedback. The committee was asked to approve and adopt policy 22.08-I Collection of SOGI (Sexual Orientation & Gender Identity) Data. 	<ul style="list-style-type: none"> Chan P. first, Danielle C. second. All aye’s. Motion carried. 	12/12/24
	<p><u>21) EQIHEC Report Templates</u></p> <ul style="list-style-type: none"> Traco M. presented the new EQIHEC report template which includes a written summary that will be published on the KHS website for approval. 	<ul style="list-style-type: none"> Danielle C. first, Chan P. second. All aye’s. Motion carried. 	12/12/24

Agenda Item	Discussion/Conclusion	Recommendations/Action	Date Resolved
Open Forum	N/A	Informational only.	N/A
Next Meeting	The next meeting will be held Tuesday, March 18, 2024, at 7:15am.	Informational only.	N/A
Adjournment	<p>The Committee adjourned at 9:17am.</p> <p><i>Respectfully Submitted: Vanessa Nevarez, Health Equity Project Coordinator</i></p>	<ul style="list-style-type: none"> Danielle C. first, Chan P. second. All aye’s. Motion carried. 	N/A

For Signature Only – EQIHEC Minutes 12/12/24

The foregoing minutes were APPROVED AS PRESENTED on:

Date

Name

The foregoing minutes were APPROVED WITH MODIFICATION on:

Date

Name