

COMMITTEE: EXECUTIVE QUALITY IMPROVEMENT HEALTH EQUITY COMMITTEE (EQIHEC) DATE OF MEETING: March 18, 2025

CALL TO ORDER: 7:18 AM BY TRACO MATTHEWS, CHAIR

Members	Jennifer Ansolabehere, KC Public Health	Allen Kennedy – Quality Team DME	Rukiyah Polk - CAC Chair
Present	Satya Arya, MD - ENT.	Chan Park, MD – Vanguard Family Medicine	Jasmine Ochoa – Health Equity Manager of Public Health
On-Site:	Danielle Colayco, PharmD – Komoto	Philipp Melendez, MD – OB/GYN	Traco Matthews – KHS Chief Health Equity Officer (Non-
	Martha Tasinga, KHS Chief Medical Officer		Voting)
Members			
Virtual			
Remote:			
Members	Debra Cox – Omni Family Health (A)		
Excused=E	Todd Jeffries – Bakersfield Community Healthcare (A)		
Absent=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 John Miller - Quality Improvement Medical Doctor Ann StoryGarza - Assistant General Counsel Amy Sanders - Member Services Manger	Magdee Hugais - Director of Quality Improvement Kailey Collier - Director of Quality Performance Maninder Khalsa - Medical Director Christine Pence - Senior Director of Health Services Nate Scott - Member Services Director Steven Kinnison - NCQA Manager Alma Garcia – NCQA Accreditation Specialist	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 Steve Pocasangre - NCQA Accreditation Specialist James Winfrey - Deputy Director of Provider Network

Agenda Item	Discussion/Conclusion	Recommendations/Action	Date Resolved
Quorum	10 of 12 committee members present; Debra Cox and Todd Jeffries were absent.	Committee quorum requirements met.	N/A
Call to Order	Traco Matthews, Chair, called meeting to order at 7:18 am.	N/A	N/A
Public Presentation	Julie Skelton, RN, addressed the EQIHEC in public comment with serious concerns regarding treatment denials for cancer patients, particularly young Hispanic women and men. She cited repeated denials by KHS based on current NCG Health Ambulatory Criteria, despite patients meeting national guidelines, including cases involving personal or family history of breast cancer. Ms. Skelton emphasized that national guidelines allow for screenings starting at age 50 – or earlier if clinical requirements are met – and that these guidelines, which	Dr. Tasinga will meet with the cancer center offline to discuss guidelines and criteria.	3/18/25

certified providers are obligated to follow, should be added to
KHS's criteria. She shared that these denials have led to delayed
surgeries or the need for second surgeries. Dr. Tasinga
acknowledged the concern and stated that many denials occur
due to incomplete clinical information provided during the
request process. She clarified that while NCG guidelines are
nationally recognized, the guidelines reference by Ms. Skelton
are not recognized by NCQA, which informs KHS policy. Dr.
Tasinga committed to discussing the matter further offline with
the cancer center.

Agenda Item	Discussion/Conclusion	Recommendations/Action	Date Resolved
Committee Announcements	Traco Matthews gave the opportunity for member updates. • There were no committee announcements.		
Committee Minutes	Approval of Minutes	Action:	240.05
	CA-3) The Committee's Chairperson, Traco Matthews, presented the EQIHEC Minutes for approval.	Philipp M. first, Satya A. second. All aye's. Motion carried.	3/18/25
Old Business	There was no old business to present.	N/A	N/A
New Business	 Consent Agenda Items CA-4) Behavioral Health Advisory Committee (BHAC) Minutes from January 15, 2025. CA-5) Health Equity Transformation Steering Committee (HETSC) Minutes from February 11, 2025. CA-6) Network Advisory Committee (NAC) Minutes from February 27, 2025. CA-7) Pharmacy Drug Utilization Review (DUR) Minutes from November 25, 2025. CA-8) Physician Advisory Committee (PAC) October 2, 2024, Redacted Summary of Proceedings. CA-9) Physician Advisory Committee (PAC) November 6, 2024, Redacted Summary of Proceedings. CA-10) Physician Advisory Committee (PAC) December 4, 2024, Redacted Summary of Proceedings. CA-11) Population Health Management Committee 	Action:	

 (PHMC) Minutes from December 4, 2024. CA-12) Utilization Management Committee (UMC) Minutes from December 11, 2024. CA-13) Quality Improvement Workgroup (QIW) Minutes from December 12, 2024. CA-14) Quality Improvement Workgroup (QIW) Minutes from March 7, 2025. CA-15) Wellness & Prevention (W&P) -Q3 2024 W&P Report -Q3 2024 C&L Report -Q4 2024 W&P Report -Q4 2024 C&L Report A motion to approve Consent Agenda Items was requested 	Satya A. first, Chan P. second. All aye's. Motion carried.	3/18/25
16) Quality Improvement Workgroup (QIW)	Action:	
 Magdee H. presented an overview of the Quality Improvement Trilogy documents which consists of the 2024 Quality Program Evaluation, the 2025 Quality Improvement Health Equity Program Description, and the 2025 Quality Improvement Work Plan. These documents provide a comprehensive assessment of program performance, outline strategic priorities for the coming year, and establish measurable goals to enhance clinical care, service quality, and member experience. Magdee H. presented the 2024 Quality Performance Evaluation. A motion to approve was requested. Magdee H. presented the 2025 Quality/Health Equity Program Description. A motion to approve was requested. Magdee H. presented the 2025 Quality Improvement Work Plan. A motion to approve was requested. 	 Informational only. Allen K. first, Satya A. second. All aye's. Motion carried. Satya A. first, Allen K second. All aye's. Motion carried. Satya A. first, Chan P. second. All aye's. Motion carried. 	3/18/25 3/18/25 3/18/25
17) Quality Performance (QP)		
Kailey C. presented the Quality Performance Q1 2025 report which provides a summary of the quarterly Page 13 of 8	Chan P. first, Satya A. second. All aye's. Motion carried.	3/18/25

ailipp M. first, Allen K. second. l aye's. Motion carried.
smine O. first, Satya A. second. l aye's. Motion carried. formational only.
nnifer A. first, Allen K. second. l aye's. Motion carried. 3/18/25
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at the third quarter EQIHEC meeting. A motion to approve the BHAC Q1 2025 report was requested.		
20) Member Services		
 Amy S. presented the Q4 2024 Operational Board Report that covers grievance trends. She stated that Q4 is historically slow and therefore dropped by 10%. A 	 Philipp M. first, Satya A. second. All aye's. Motion carried. 	3/18/25
 motion to approve was requested. Amy S. presented the Q4 2024 Grievance Summary Report that provides the types of grievances that are received. Dr. Tasinga commented on the quality-of-care grievances stating that every call is a quality of care. A 	Allen K. first, Satya A. second. All aye's. Motion carried.	3/18/25
motion to approve was requested. • Amy S. presented the Member Services Email Audit Summary Report which states that emails must achieve a monthly average score of 90% or higher and 100% of email must have a response within 1 business day; both	• Satya A. first, Jasmine O. second. All aye's. Motion carried.	3/18/25
conditions were met. A motion to approve was requested.	• Satya A. left the meeting at 8:27am.	3/18/25
21) Utilization Management (UM)		
• Dr. Khalsa presented the Q4 2024 UM report which contains a synopsis of both quantitative and qualitative analysis that reflect the performance of the UM department in Q4 2024. A motion to approve was	Philipp M. first, Allen K. second. All aye's. Motion carried.	3/18/25
requested. • Christine P. presented the 2024 UM Workplan Evaluation which provides an evaluation of the progress towards the goals and workplan from 2024. A motion to approve was requested.	Philipp M. first, Chan P. second. All aye's. Motion carried.	3/18/25
Christine P. presented the 2025 UM Workplan that covers the success of the goals and planned interventions set by the UM department. A motion to approve was requested.	Rukiyah P. first, Allen K. second. All aye's. Motion carried.	3/18/25

	Christine P. presented the UM Department Hierarchy of Criteria Report which discloses that new technology reviews that do not have established criteria and guidelines will be reviewed using HAYES. If a new technology has not been evaluated by HAYES, then KHS will send the specific case for independent medical review for appropriateness of use. A motion to approve was requested.	Philipp M. first, Allen K. second. All aye's. Motion carried.	3/18/25
22) Netw	vork Adequacy Committee (NAC)		
	Greg P. presented the NAC Q1 2025 report that provided an overview of the Plan's network adequacy	 No response was provided from the committee. 	3/18/25
	standards, monitoring activities, findings, and process improvements. Greg P. asked the committee to comment on how the NAC can improve. A motion to	 Philip M. first, Allen K. second. All aye's. Motion carried. 	3/18/25
	approve was requested.	• Philipp M. left the meeting at 8:55am.	3/18/25
23) Pop 3	Health Management (PHM)		
	Michelle C. presented a report on Improving Mental Healthcare Access in East Kern County due to a	No response was provided from the committee.	3/18/25
	previous discussion at EQIHEC regarding limited access to maternal healthcare in East Kern. The report includes findings from her SWOT analysis, along with feedback gathered from both internal and external partners. Additionally, the report includes recommendations for improving maternal health outcomes and reducing disparities in access to care. Michelle C. requested insight and feedback from the committee. A motion to approve was requested.	Jennifer A. first, Jasmine O. second. All aye's. Motion carried.	3/18/25

Isabel S. presented the 2024 Annual Wellness Report that summarizes department goals, objectives, and activities performed in 2024. Daniella C. asked what	Allen K. first, Danielle C. second. All aye's. Motion carried.	3/18/25
the departments success factors were. Isabel S. responded that partnering directly with parks and rec was the best success. Daniella C. asked how she can refer patients to the W&P activated and programs. Isabel S. responded that class locations such as the City of Delano are great about posting information. Additionally, there are flyers on the KHS website.		
	• Chan P. left the meeting at 9:20am	

Agenda Item	Discussion/Conclusion	Recommendations/Action	Date Resolved
Open Forum	Traco M. gave an update on the DHCS Transforming Maternal Health Model Press Conference that took place at Bakersfield Memorial Hospital on February 5, 2025. The day consisted of a tour of the birthing center at Bakersfield Memorial, a tour of the Bakersfield American Indian Health Project facility, a tour of Kern Medical, and a discussion led by KHS with Kern County Public Health. The DHCS and CA Surgeon General were in attendance and so impressed by Kern County that they have demanded that all areas follow what we do.	Informational only.	N/A
Next Meeting	The next meeting will be held Tuesday, June 17, 2025, at 7:15am.	Informational only.	N/A
Adjournment	The Committee adjourned at 9:23am. Respectfully Submitted: Vanessa Nevarez, Health Equity Project Coordinator	Danielle C. first, Jennifer A. second. All aye's. Motion carried.	N/A

For Signature Only – EQIHEC Minutes 3/25/25			
The foregoing minutes were APPROVED AS PRESENTED on:		<u></u>	
	Date	Name	
The foregoing minutes were APPROVED WITH MODIFICATION on:			
	Date	Name	