San Francisco Health Plan℠

Quality Improvement and Health Equity Committee Minutes

Date:	August 21, 2025
Meeting Place:	50 Beale Street, 12th Floor
	San Francisco, CA 94119
	Microsoft Teams Meeting
	+1 323-475-1528,,636203727#
Meeting Time:	8:00AM – 10:00AM

QIHEC Members Present:

Dr. Kathleen Chung, Medical Director, Value Based Care, *SFHN*; Dr. David Ofman, Chief Medical Officer, *San Francisco Consortium of Community Clinics (SFCCC)*; Yves Tcheutchoua, *SFHP MAC Member*; Maria Contreras, *SFHP MAC Member*

Not present: Dr. Amy Lu, Chief Quality Officer, *UCSF;* Dr. Lisa Inman, *SFDPH Behavioral Health Services*; Dr. Kenneth Tai, Chief Health Officer, *NEMS*; Dr. Jackie Lam, Medical Director/QI/QA Director*, NEMS*; Dr. Ana Valdes, Chief Healthcare Officer, *HealthRight360*; Dr. Luke Day, Chief Medical Officer, *ZSFGH*; Dr. Blake Gregory, Primary Care Director of Population Health and Quality, Medical Director, Complex Care Program, *SFHN*; Alecia Martin, Director of Quality Management, *SF BHS*

SFHP Staff Present:

Dr. Steve O'Brien, Chief Medical Officer; Edwin Poon, Chief Health Equity Officer; Shenita Hurskin, Director, Quality Population Health Management; Yves Gibbons, Manager, Quality Improvement; Emily Turpin Srock, Sr. Program Manager, Quality Improvement; Lauren Jami-Williams, Sr. Program Manager, Quality Programs; Michelle Gomez-Dediu, Associate Program Manager, Access to Care; Maya Velardez, Associate Program Manager, Quality Improvement; Rami James, Quality Improvement Specialist; José Méndez, Manager, Quality Data Analytics; Jorge Ramirez, Program Manager, Quality Data Analytics; Tanya Yared, Program Manager, Population Health Management; Edgar Rodriguez, Associate Program Manager, Population Health Management; Dr. Rina Shah, Sr. Medical Director; Tommy Williams, Manager, Behavioral Health; Kristin Jones, Nurse Manager, Transitional Care Services; Dayana Chaves, Sr. Manager, Care Management; Shauntessa Aguon-Clark, Manager, Enhanced Care Management & Community Supports; Isabella Urbano, Manager, NCQA, Compliance; Leslie Mulhern, Nurse Supervisor, Quality Review

Guests Present:
Amber Allred, Senior Clinical Quality Audit Analyst, Carelon

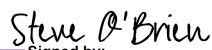| Topic		Follow-up [if Quality Issue identified, Include Corrective Action]	Resolution, or Closed Date [for Quality Issue, add plan for Tracking after Resolution]
Call to Order	Meeting called to order at 8:02am by Steve O'Brien, MD, CMO, San Francisco Health Plan (SFHP).		
Welcome/Updates	Dr. O'Brien welcomed attendees and initiated the session by outlining the day's agenda and inviting discussion on several critical updates impacting quality improvement and equity efforts across SFHP's membership. He opened with a strategic overview of the organization's key developments and provided an update on SFHP's preparation for the Dual Special Needs Plan (D-SNP), which is expected to serve individuals dually eligible for Medicare and Medi-Cal beginning January 1, 2026. Dr. O'Brien explained that internal alignment and planning are ongoing, with a focus on workforce development, partner engagement, and developing a quality-focused model of care. He noted that a future QIHEC meeting will review the D-SNP's quality framework. In addition, he presented an overview of SFHP's three lines of business: Medicare (in development), Healthy Workers (currently stable), and Medi-Cal, which is experiencing declines in membership and a growing gap in access, particularly among undocumented individuals. Dr. O'Brien raised concerns about declining rates of primary care visits and emphasized the need for deeper collaboration with county and community partners to address both access and trust challenges.		

Consent Calendar	Items for Approval:
	• Follow Up Items
	• May 2025 QIHEC Minutes
	• Q1 2025 Emergency Room Rx Access Report
	• Q1 2025 Appeals Report
	• 2024 Grievance & Appeals Annual Report
	• UM Committee Minutes and supporting documentation
	    ○ April 2025 Minutes
	    ○ June 2025 Minutes
	• Health Services Policies & Procedures (P&P) Updates Summary
	• CY 2024 Annual PQI Report
	• Q2 2025 QIHEC Scorecard
	• 2025 PHM Program Description
	• PHM 1, 2, 6
	• QI3 Report Update
			Motion to Approve: Maria Contreras
			Second: Dr. David Ofman
			Opposed: None
			Abstained: Yves Tcheutchoua
			Approved:
			• Follow Up Items
			• May 2025 QIHEC Minutes
			• Q1 2025 Emergency Room Rx Access Report
			• Q1 2025 Appeals Report

	Prior to the committee being presented with a comprehensive set of documents for review and approval, Shenita Hurskin, Director of Quality Population Health Management, presented the Population Health Management documents, focusing on the organization's core strategies for improving member outcomes across four key domains: keeping members healthy, ensuring patient safety, managing emerging risks, and addressing chronic conditions. She highlighted the W30 measure, Well Child Visits for children 15 to 30 months, as a priority area where performance narrowly missed the established benchmark. The target rate for this measure was 77.78%, while the actual rate achieved was 77.5%, falling short by only 0.6%. Shenita explained that although the gap was small, it reflected larger systemic barriers affecting families, particularly those facing social and economic challenges. She identified major barriers to W30 compliance, including limited work flexibility for parents, lack of understanding around appointment timing, and challenges related to transportation access.
	
	To address these gaps, Shenita outlined recent and planned interventions, such as the rollout of gift card incentives to motivate attendance and the dissemination of educational materials to providers aimed at reinforcing the importance of timely well-child visits. Dr. Steve O'Brien opened the floor for committee input, prompting an active discussion. Dr. David Ofman raised concerns that fear of immigration enforcement may be deterring undocumented parents from attending non-urgent visits. Dayana Chaves added that transportation challenges, particularly for single mothers, remain a persistent barrier and affirmed that transportation issues are among the most frequently cited obstacles in care management and stressed the value of early intervention. Edgar Rodriguez shared that CARECEN SF workshops have proven effective in educating members about the availability of transportation benefits, while Shauntessa Aguon-Clark echoed similar findings from the Enhanced Care Management (ECM) program. Shenita thanked participants for their feedback and confirmed that she would incorporate this input into future program modifications. She committed to compiling a summary of the committee's recommendations and sharing revised strategies at a subsequent meeting. A motion to approve all consent calendar items was made by Maria Contreras and seconded by Dr. David Ofman. There were no oppositions, and one abstention by Yves Tcheutchoua. The motion was carried, and all items were formally approved.
		Shenita Hurskin to compile Committee feedback and QPHM team will develop W30 strategies for improvement opportunities.	• 2024 Grievance & Appeals Annual Report
			• UM Committee Minutes and supporting documentation
			   ○ April 2025 Minutes
			   ○ June 2025 Minutes
			• Health Services Policies & Procedures (P&P) Updates Summary
			• CY 2024 Annual PQI Report
			• Q2 2025 QIHEC Scorecard
			• 2025 PHM Program Description
			• PHM 1, 2, 6
			• QI3 Report Update

Quality Improvement	• QIHEC Measure Spotlight (FUM/FUA) Tommy Williams, Manager of Behavioral Health, presented an in-depth update on two high-priority performance measures: Follow-Up After Emergency Department Visit for Mental Illness (FUM) and Follow-Up After Emergency Department Visit for Substance Use (FUA). He began by reviewing current performance data, noting that there has been continued improvement since the December 2024 baseline. Interventions contributing to this progress include daily data sharing of ED discharges with care teams, targeted pay-for-performance (PQP) programs for providers, enhanced training for ED navigators, increased focus on timely documentation, and the implementation of monthly coordination meetings between providers and SFHP staff.		

Tommy emphasized the critical role of Community Health Workers (CHWs) in supporting successful follow-ups, particularly for members facing behavioral health challenges. However, he noted variability in CHW deployment and capacity across clinic sites, which poses an ongoing barrier. Dr. Kathleen Chung raised questions regarding data discrepancies and year-to-date accuracy. José Méndez explained challenges related to lag in supplemental data submission, especially for behavioral health services not captured in claims. Dr. O'Brien added that state-level efforts are underway to centralize behavioral health data, which may reduce variability and improve reliability over time. Maria Contreras and Dayana Chaves reiterated the importance of CHWs in fostering trust with members, especially those who are undocumented or hesitant to engage with traditional healthcare systems.

- RY 2025 CAHPS Analysis/Lessons Learned

Emily Turpin Srock, Sr. Program Manager of Quality Improvement, delivered the RY 2025 Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey results. She shared that SFHP's performance remains at a 2-star level, with a 10th percentile ranking nationally, underscoring a significant gap between clinical quality and member experience. Response rates for the adult and child surveys were 23% and 28%, respectively. Notable improvements were seen in the domain of "getting needed care," but disparities remain, particularly among members with limited English proficiency.

Emily outlined the organization's 2026 goals, including boosting member satisfaction scores through new communication strategies, targeted outreach to underserved populations, and expanded pay-for-performance incentives that reward providers for improvements in patient experience. Dr. O'Brien acknowledged the positive trajectory but emphasized that quality scores alone are not sufficient if member satisfaction continues to lag. Dayana Chaves supported this point by citing examples from care management where members' ability to access services is still limited by system navigation challenges, transportation issues, and benefit awareness.

- MY 2024 Quality Performance

José Méndez, Manager of Quality Data Analytics, presented the 2024 Managed Care Accountability Set (MCAS) results. Of the 18 quality measures held to minimum performance level (MPL), only one did not meet the 50th percentile benchmark, while 15 measures either improved or were maintained from the prior year. Importantly, SFHP incurred no sanctions under the Annual Technical Submission (ATS). Looking ahead to 2025, José explained that a shift to fully administrative reporting will affect how performance is assessed, increasing the reliance on accurate and timely claims data.

During discussion, committee members raised concerns regarding compliance barriers among immigrant members. Maria Contreras shared anecdotes of fear and mistrust among newcomer families, which impact health-seeking behaviors. Dr. O'Brien acknowledged these systemic
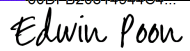
	challenges and reiterated SFHP's support for member-facing roles, like CHWs, that can help bridge the gap.		
Health Equity	• Health Equity Updates: o CHA Executive Summary o CHIP Development Process o Health Story SF (Health Equity Training) o TGI Training Update Edwin Poon, Chief Health Equity Officer, provided updates on the Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) development. The CHA highlighted major demographic and health trends in the region, including an aging population, income disparities, and increased prevalence of heart disease, drug addiction, and inequities in outcomes for Black/African American residents. Edwin also discussed the results of the NCQA Health Equity Accreditation survey, which SFHP successfully completed (results pending). Key efforts such as the Health Story San Francisco training and pending TGI (Transgender, Gender Diverse, Intersex) training were introduced as tools to support culturally competent care. Committee members including Dayana Chaves and Yves Tcheutchoua emphasized the importance of engaging care management members in community surveys and ensuring follow-up is built into implementation plans. Edwin committed to returning with additional updates on accreditation outcomes and CHIP progress at future meetings.	Edwin Poon to report back on NCQA Health Equity Accreditation and promote CHA survey participation.	
Care Management	• Care Management Highlights: o Complex Care Management, Enhanced Care Management & Community Supports, and Transitional Care Services Dayana Chaves, Sr. Manager of Care Management, presented key updates from SFHP's internal Complex Care Management (CCM) program. Operational improvements this year have included the removal of a multi-step vetting process involving nurses and pharmacists, which has freed up staff capacity and allowed each nurse to support up to 50 members, compared to 30 previously. CCM currently serves approximately 300 members each month, with referrals accepted from providers and self-referrals. Dr. O'Brien outlined distinctions between three levels of case management: basic care management (typically conducted in the provider office), care coordination (short-term, issue-based support), and complex case management for the highest-need members. Shauntessa Aguon-Clark, Manager of Enhanced Care Management & Community Supports, followed with an update on the ECM program, a community-based intervention model that focuses on social determinants of health. ECM currently supports ~3,300 adult members, with total enrollment nearing 3,500 out of 14,000 eligible members.		

	She reviewed the core elements of ECM and described proactive outreach strategies aimed at improving engagement. Kristin Jones, Nurse Manager of Transitional Care Services, concluded the segment with a report on Transitional Care Services (TCS), a program designed to support members within 30 days of post-hospital discharge. Kristin explained that SFHP audits both internal and delegated TCS programs and recently identified key areas for improvement. Current metrics show that 51% of high-risk members are contacted within 7 days of discharge, with 40–42% receiving follow-up ambulatory care. Given the high volume of discharges (800–1,000 per month), Dr. O'Brien stressed the importance of scaling outreach strategies and enhancing workflow efficiency.		
Cultural Linguistics Services	• Interpreter Services Survey Results: Edgar Rodriguez, Associate Program Manager of Population Health Management, shared the results of a recent member survey evaluating interpreter services. The survey reached 1,000 members across 13 languages and yielded a 23% response rate. Among respondents, 82% reported that interpreter services were offered, and 92% knew they had a right to request one. However, only 67% knew how to access interpreter services, and gaps were particularly noted in Cantonese-speaking populations and other underserved language groups. Edgar, in partnership with Shenita Hurskin, outlined current interventions under the Language Access Initiative, which includes producing multilingual videos, launching social media outreach campaigns, and conducting staff and provider interviews to identify process barriers. Maria Contreras encouraged the use of visual cues (e.g., posters, staff screensavers) to prompt interpreter use, particularly in clinical settings where bilingual staff may default to informal communication. Follow-up activities include continued provider interviews and refinement of awareness materials.		
Closing Remarks	Dr. O'Brien invited final questions from the committee. Yves Tcheutchoua requested guidance on how to communicate community-driven success stories from a member perspective. Dr. O'Brien responded affirmatively and offered to follow up with Shenita Hurskin on structured examples. Dr. David Ofman highlighted SFHN and SFGH's success in using specialist ratings and consortium collaboration to improve outcomes. Maria Contreras asked for insights into UCSF's quality strategy. Emily Turpin Srock responded with a description of SFHP's re-launched Quality Collaboratives, which facilitate provider knowledge exchange and continuous improvement.		
Meeting Adjourned	Meeting adjourned at 10:00am		

QIHE Committee Co-Chair's Signature & Date: *Steve O'Brien*   12/12/2025

QIHE Committee Co-Chair's Signature & Date: *Edwin Poon*   12/12/2025

Minutes are considered final only with approval by the QIHEC at its next meeting.