SAN FRANCISCO HEALTH PLAN™
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Quality Improvement Committee Minutes

Date:	October 14, 2021
Meeting Place:	Microsoft Teams Meeting
	+1 323-475-1528 : Conference ID: 982 103 462#
Meeting Time:	7:30AM - 9:00 AM
Members Present:	Fiona Donald, MD *Chief Medical Officer, SFHP*; Jackie Lam, MD *Medical Director and QI Director Northeast Medical Services;* Kenneth Tai, MD *Chief Medical Officer, North East Medical Services*; Jaime Ruiz, MD *Chief Medical Officer, Mission Neighborhood Health Center;* Irene Conway *SFHP Member Advisory Committee Member*; Idell Wilson *SFHP Member Advisory Committee Member;* Ana Valdes, MD *Chief Healthcare Officer, Healthright360;* Lukejohn Day, MD *Chief Medical Officer, Zuckerberg San Francisco General Hospital*; Claire Horton, MD *Chief Medical Officer, San Francisco Health Network*
Staff Present:	Lisa Ghotbi, PharmD *Director, Pharmacy;* Se Chung *Health Services Administrative Specialist*; Suu Htaung *Policy Analyst;* José A. Méndez *Senior Program Manager, Health Services Product Management (HSPM);* Kaitie Hawkins, PharmD BCPS *Pharmacist Supervisor, Clinical Programs;* Elizabeth Sekera, RN *Manager, Population Health;* Nicole Ylagan *Interim Supervisor of Appeals & Grievances*; Etecia Burrell *Population Health Program Manager*; Yves Gibbons *Sr. Program Manager, Quality & Access*; Sue Chan *Program Manager, Pharmacy Compliance*; Jim Glauber, MD *Health Plan Physician Advisor*

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 7:34 AM with a quorum. • Roll Call.		

Consent Calendar	All in favor to approve consent calendar. IHA Reinstatement update: State has requested that all Health Plans restart program and create a plan to catch up post pandemic. IHA requirement: All new enrollees as required to have an Initial Health Assessment within 120 days.		Approved. • Review of August 2021 Minutes • UM Committee Minutes - August and September 2021 • Q2 2021 Grievance Report • Q2 2021 Appeals Report • Q3 2021 PQI Report • Q2 PHM/QI Scorecard • P&T Committee Assignments • HE P&P Updates Summary - August – September 2021 • IHA Reinstatement
Quality Improvement	• ***Health Plan Consumer Assessment of Healthcare Providers and Systems (HP-CAHPS) 2021*** Presented by Yves Gibbons -SFHP achievements: Rating of All Healthcare-ranking maintained, highest performing ranking. Improvement projects: increased registration & utilization of Teladoc, increased visits to primary/specialty care through telehealth, and created multi-language member experience videos. -Approximately 50 questions in survey; key focus area examples: rating of health plan, rating of personal doctor, coordination of care, etc. SFHP steady increase as of 2015. Getting Care quickly was the only area where there a slight decrease in performance. But also had slight increase in Getting Needed care. -Top Key Drivers: 3 priority questions for SFHP to address to improve overall member experience. 1. Ease of access to care, tests		

	or treatment (currently SFHP's score 77%; room for improvement 17% to reach best practice). Rating of doctor (current score 67%; 8% room for improvement to reach best practice) 3. Customer service provided needed information or help (current score 74%; 17% room for improvement to reach best practice). -Next Steps – CAHPS workgroup planning FY21/22 off cycle survey. Purpose to see if interventions are effective. Also providing feedback/guidance on member experience projects. SFHP has set an organization goal to meet NCQA's Health Equity accreditation standard. Also, there are plans to develop and implement a process to use this data in two member facing programs. *Dr. Fiona Donald: Any comments/challenges regarding access to care?* *Dr. Jamie Ruiz: Difficult recruitment from primary care, specialty and staff has created challenges for access to care. Especially in Behavioral Health.* *Dr. Fiona Donald: Beacon Health Options is SFHP's behavioral health provider. SFHP working with Beacon for solutions, looking expand telehealth.* **• *Disparities Leadership Program (DLP)*** Presented by Etecia Burrell, Elizabeth Sekera, RN, and Jim Glauber, MD -Project purpose: To support leaders in health care organizations to develop quality improvement programs/initiatives that specifically focus on disparities in the populations that they serve. -Project title: *Centering the Voices of Black & Transgender SFHP Members.* Focusing on these two populations because of ongoing trend of rates in access. Examples: Black members high utilization		

of ER vs primary care. Transgender & Non-binary data is difficult to capture because this is a self- reported identity. Data shows: 31% lack access to regular care, 25% report insurance programs related to gender, and 23% avoid healthcare. -Milestone: Identifying TG/NB members – to develop quantitative data to analyze; traditionally qualitative data was collected since 2015. SFHP has developed an internal data model that can be added to HEDIS disparities and population assessment dashboards. Agreement with Quality Director's group of sister plans to have LHPC advocate on their behalf to DHCS to start to process of submitting the wavier to CMS to start collecting SO/GI data upon Medi-Cal enrollment. State has begun this process. -Milestone: Provider Directory Enhancement – create a filter function to include race, ethnicity, language, and LGBT identity. In early internal development and planning stage. -Milestone: Community Collaborations – partnerships to better understand community access, equity issues in vulnerable populations. SFHP developing more robust TG/NB Medical Necessity criteria; participating in State Doula access workgroup; discussing POC midwives to join network; collaborated with SF Women's Cancer Network & Rafiki Coalition for Breast Cancer Screening PDSAs. -Milestone: Social Vulnerability index – census tracked data to be incorporated into core data at member level. Will be able to apply scoring methodology for SDOH factors. -Milestone: Programs Incorporating DEI – include DEI lens to current projects. PIP has added health equity improvement project. DEI evaluation tool being used to evaluate and plan for health services programs. Diversified languages in Health Education materials.		

	• *Potential Quality Issue (PQI)* Presented by Nicole Ylagan and Fiona Donald, MD -Identified adverse variation from expected clinical standard of care requiring further investigation. Can be a confirmed quality issue with a provider or system. -Monitoring and oversight by quarterly report back to QIC; Inter-Rater Reliability (IRR) process; specific Policy & Procedure QI-18; trained staff to identify PQIs and make referrals. -SFHP PQI team: Quality Review Registered Nurse, CMO, Facility Site Review Nurse, Medical Director & Supervisor of Appeals & Grievances, Clinical Operations & Care Management clinical staff. -Examples of sources of PQI: external referrals, utilization management, provider preventable conditions, etc. -4 Steps in PQI process: 1. Referral (Description of quality concern) 2. Investigation (Nurse review, recommend to MD) 3. Findings (MD reviews; assigns severity rank) 4. Follow up or Recommendations (Notification, Correction Action Plan (CAP) and notification to Physician Advisory Committee (PAC)). • Will be reporting any PQIs to PAC for discussion and comments. • Meeting adjourned at 8:40 AM.		

QI Committee Chair's Signature & Date __ Fiona Donald, MD _____12/9/21_____ __

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