Anthem

QUALITY IMPROVEMENT AND HEALTH EQUITY COMMITTEE (QIHEC) Q3 2024 MEETING

SEPTEMBER 30, 12PM-2PM

TOPIC	DISCUSSION
Opening Remarks	Les Ybarra provided welcome and Mayra Serrano started the meeting at 12:05 pm • The purpose of the meeting was to review updates related to quality improvement and health equity. • Mayra outlined the committee's objectives, including oversight of HealthEquity requirements, alleviating health disparities, ensuring equal access to healthcare, and supporting program development.
QIHETP Health Equity Update Mayra Serrano	An overview of the HealthEquity program emphasized addressing social determinants of health, promoting DEI, and cultural competency training. • Emphasis on involving members, providers and community-based organizations in the prioritization of these goals, including QIHEC and CACs. • Updates on health equity workplan goals: • Increased utilization of interpreter services via audio/video by 43%, surpassing goal of 1.5% increase. • Increased postpartum care rates among Black/African American women from 45% to 58%, surpassing goal of 5% increase • Increased the number of individuals receiving housing navigation and transition services by 66%, surpassing goal of 5% increase. • Increased the use of e-Consults in rural counties from 1 e-consult the year prior to 22 e-consults. • Discuss expanding provider DEI and TGI curriculum to meet state requirements. Will present DEI and TGI curriculum at next QIHEC meeting to get feedback. • Provided information on how social needs and risks assessment is conducted to develop annual goals. • Most common social needs and risks are housing and Substance Use Disorder (SUD) in our 5 most populous counties
Well Child Visit and Behavioral PIP Updates Cynthia Cervantes	Well Child Visits: Focus on Black/African American members, aiming for six well-child visits in the first 15 months. • Focus on barriers to improving well-child visit rates, including social determinants of health (SDOH) • Current interventions include employing Community Health Workers (CHWs) and addressing barriers such as mistrust, transportation and childcare barriers. Strategy includes CHWs conducting outreach to schedule follow-up appointments and make reminder calls. Behavioral Health PIP: Improving follow-up care for substance abuse and mental health diagnoses post-ER visits in Tulare County within 7 days • Partnering with Adventist Health, Kaweah Health Medical Center in Tulare and Sierra View Medical Center in Porterville. • Overall objective is to improve the follow-up within 7 days of ER visit for any alcohol/substance abuse or mental health by implementing outreach campaign by our CHWs. CHWs will identify members and make calls at discharge. Will outreach to members every 2-3 days until member is reached or made at least 3 calls within the 7 days. CHWs will also provider navigation and address any barriers to care (transportation).

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Health Equity Well Child Visit and Behavioral Health Collaboratives Updates Dr. Elizabeth Stewart	Collaborative efforts focused on Hispanic adolescents' well-child visits • Partnering with Clinica Sierra Vista (Elm Street Location) in Fresno County for this collaborative. • Started looking at data and found low completion rates among Hispanic adolescents ages 12-17, thus our focus population. • To better understand patient/caregiver perspective we conducted key informant interviews with pediatricians and parents of children attending the clinic to try to understand challenges to completing well child visits. • Identified barriers including language, scheduling appointments in advance; not able to get same day or appointments soon. • Will focus on efforts on interpreter use and equitable scheduling in clinics • Clinica Sierra Vista currently undergoing an EHR transition to EPIC> Engagement with Fresno County Behavioral Health to improve follow-up appointments after ER visits for SUD/SMH to improve FUA and FUM • FUA and FUM is follow up after an ER visit for alcohol or substance use and ER visit for mental health diagnosis. • Also partnering with CalViva/HealthNet • Identified 2 high volume hospitals in Fresno County to focus on, Regional Medical Center and Clovis Community Medical Center. • Interventions will focus on having guaranteed/reserved appointment for follow-up after ER visit, having ED staff schedule with outpatient behavioral health providers; Sending members for follow up at Fresno Behavioral Health walk in clinics and promote use of 24/7 access line with Fresno Behavioral Health dept; looking at ADT data for real time admission, discharge and transfer data. • Emphasized how intervention meets SUD need identified in assessment.
Social Needs/Risks QIHETP Goal-Housing Update Kristopher Kuntz	Housing Goals: Increase in enhanced care management and housing transition services for members experiencing homelessness. • Performance updates highlighted a significant increase in services provided during the first half of 2024. • In 2023, over 1200 members received ECM services; almost 1000 served in the first six months of 2024. • Over 4000 members received housing transition services in 2023; over 3000 served in the first half of 2024. • Specific challenges noted in counties like Los Angeles and Calaveras with relatively low service uptake. • Strategies to engage more local housing organizations and enhance service delivery through proactive identification and referrals. • Possibly leverage new community support called transitional rent that would allow health plan to pay up to 6 months of rental assistance for eligible members.
FindHelp Update Spenser Rudd	Spencer Rudd presented referral data for the first half of 2024:

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	• Q1: 991 searches, equating to 90 shares leading to 46 referrals, 7 closed loops (15% closed loop rate). • Q2: 118 associates within the platform; 717 searches, 62 shares of program information, 65 referrals equating to 9 closed loops (14% closed loop rate). • Looking to see how member facing associates are utilizing the platform to convert searches in referrals. Providing trainings on Anthem Associate Platform WorkDay assigned to member facing associates that are utilizing case management platform like HIP or FindHelp • Current Status: 6 of 24 Community Based Organizations (CBOs) onboarded for referrals. • Emphasis was placed on increasing referral volume and closed loop rates, targeting a 25% closed loop rate. Want to maintain 2023 levels (429 referrals in Q1 and Q2). Currently 103 referrals behind compared to 2023. Quarter 3 numbers should reflect gain. • Emphasis on refining member-facing associates' use of the platform for better outcomes. • Trusted Network Development: Onboarding status of 6 out of 24 community-based organizations (CBOs).
External Stakeholder Feedback/Priority Setting	• Participants discussed the potential benefits and challenges of developing a trusted network for FindHelp • Emphasis on the need to increase referral volume and closed loop rates for FindHelp • Question asked to clarification on social needs analysis methodology for QIHETP social needs/risk assessment. Mayra described the use of our internal dashboard including Atlas (now Health Equity Explorer) looing at member claims with z-codes and community advisory committees and publicly available sources like County CHAs. Emphasis on ensuring member voices are included. • Discussion on barriers faced during member interviews for Child Well Visit Collaborative, what was the most common barrier? Language and length of appointments came up, appointment being too short, more for adolescents than for younger children. • Question arose about how many children were being delivered by OBs versus family practice providers? Cynthia responses by saying most come from OBs but she will look at that data to confirm. • Question regarding was it means to have a “carved out” mental health benefit. Cynthia explained the moderate to severe cases are referred to county and Anthem handles other cases. • Question regarding who member has to see with 7 days of ER visit for SUD or mental health visit. Cynthia clarified that it depends on what they are being treated for, it can be PCP, psychiatrist or other health professional.
Q&A/Closing Remarks	• Reminder to nominate external stakeholders to participate in QIHEC • Next meeting will review draft of QIHETP • Next meeting scheduled for Monday, December 9, 2024 12pm-1:30pm
Adjourn Meeting	Mayra Serrano adjourned the meeting at 1:26 PM PST

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Attendees	Title	Present	Absent
Mayra Serrano (Co-chair)	Health Equity Director -Anthem	X	
Cynthia Cervantes (Co-chair)	Quality Director - Anthem	X	
Elizabeth Stewart (Co-chair)	Plan Performance Medical Director- Anthem	X	
Meline Aleksanyan	Clinical Quality Program Manager- Anthem	X	
John Angell	External- Sequoia Family Medical Center		X
Linh Casas	Whole Health Director-Anthem		X
Mary Crandall	Manager I GBD QM- Anthem		X
Jennifer Cruz	External-Guadalajara Medical Clinic	X	
Muninder Dhaliwal	External-One Community Cares Clinic	X	
Selina Escobar	Director GBD Special Programs- Anthem	X	
Dr. Christina Ford	Behavioral Medical Director – Anthem	X	
Danielle Frouws	Accreditation Consultant-Anthem	X	
Gelissa Garcia Diaz	Director Healthcare Management-Anthem		X
Michelle Garcia	External-Northern Inyo Healthcare District		X
Andrew Gomes	Manager Provider Relations- Anthem		X
Dr. Rafael Gonzalez-Amezcua	Medical Director- Anthem	X	
Beau Hennemann	Director Medicaid QM-Anthem	X	
Joselyn Huffman	Director II HCMS- Anthem	X	
Jerry Low	Director Clinical Info- Anthem		X
Desiree Lowe	External- Kings County Behavioral Health		X
Christina Ma	GBD Finance Director- Anthem	X	
Beth Maldonado	Director II Compliance-Anthem		X
Jared Martin	Program Director Field Ops- Anthem	X	
Eric Medina	External-Altura Clinic		X
Roy Melendez	External-Tuolumne Me-Wok Indian Health Center		X
Christina Menchaca	Director Clinical Inf-Anthem		X
Armando Millan	Director Program/Program Management-Anthem	X	
Dieumi Nguyen	Program Director SBHIP – Anthem	X	
Lisa Nickle	Nurse Case Manager Lead - Anthem	X	
Jessica Nott	External-Northern Inyo Health District		X
Janet Paine	Director Program Management- Anthem	X	
Sarah Paulsen	Director Behavioral Health Services- Anthem	X	
Dr. Victor Pedroza	External-Guadalajara Medical Clinic		X
Andrea Perez	External-Guadalajara Medical Clinic		X
Molly Roha-Fuentes	Manager Provider Network-Anthem		X
Spenser Rudd	Externa-FindHelp	X	
Eric Schwimmer	Program Director Special Programs- Anthem		X

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Rhonda Smith	External-California Black Health Network	X	
Andrea Share	VP Ops & Ent Delegation Oversight – Anthem	X	
Dr. Chad Sparks	RVP II Senior Clinical Officer-Anthem	X	
Melissa Stringfellow	Provider Collaboration Director- Anthem	X	
Brenda Tamayo Pagan	External-Kings County Behavioral Health	X	
Brittni Ursick	Accreditation Manager – Anthem	X	
Lilet Vallangca	Project Director-Anthem	X	
Lucida Vang	Manager II Health Services CHW - Anthem	X	
Anjali Vardhan	LTSS Contract Adhere Auditor- Anthem	X	
Breanna Villalobos	LTSS Admin Services Coordinator – Anthem	X	
Dawn Wells	External-Altura Clinic		X
Dr. Jackie Williams-Pascal	Medical Director- Anthem		X
Les Ybarra	Plan President – Anthem	X	