

Quality Improvement Health Equity Committee

Quarter 1, 2024 Summary Report

Background

The purpose of this report is to summarize Blue Shield of California Promise Health Plan (BSCPHP, BSC Promise, or Blue Shield Promise) Quality Improvement Health Equity Committee (QIHEC) activities, findings, recommendations, and actions that is prepared after each meeting and submitted to the Board Quality Improvement Committee (BQIC). In addition, for the remainder of 2024, the QIHEC will report to the Medi-Cal Committee who reports to the Blue Shield of California Board of Directors via consent agenda, and to DHCS upon request. A written summary of the QIHEC activities will be made available publicly on the Plan's website at least on a quarterly basis.

Summary of QIHEC Activities

The Blue Shield of California Promise Health Plan QIHEC meeting was called to order on Thursday, March 21, 2024, by the Chairperson, Dr. Jennifer Nuovo, Chief Medical Officer via telephone conference. Dr. Nuovo welcomed committee members and previewed the agenda.

Introductions and Welcome

Dr. Jennifer Nuovo welcomed committee members, called the meeting to order, and previewed the meeting agenda.

Old Business

Valerie Martinez, Chief Health Equity Officer, Blue Shield Promise Medi-Cal Health Equity Office and QIHEC Co-Chair, confirmed the action item to add additional participants to Poverty Simulation was closed and registration was opened to other teams. The event took place on January 26th.



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Document Review and Approval (Pre-reads)

The Quality Improvement and Health Equity Transformation Program (QIHETP) program documents were circulated to voting committee members for review and approval via email prior to the QIHEC Quarter (Q), 1, meeting. The following documents were approved by voting committee members:

- BSC Promise QIHEC Meeting Minutes Q4 2023
- BSC Promise QIHEC Work Plan 2024
- QIHEC Charter
- 2024-2025 QIHET Program Description
- Health Equity Advancements Resulting in Transformation (HEART) measure set.

Blue Shield of California Promise Health Plan Medi-Cal Goals

Valerie Martinez reviewed the HEART program, including program infrastructure, governance, data and analytics, focus on diversity and inclusion and tailored strategies and collaboration with teams, providers and community organizations. Additionally, 2024-2028 health equity goals for achieving bold goals, obtaining health equity accreditation, integrating health equity, ensuring contract compliance, and building a culture of equity.

Violet Health

Dr. Nina Birnbaum, Medical Director, Innovation Acceleration, Blue Shield of California, introduced Violet Health pilot program for committee feedback regarding the platform. The proposed Violet Health pilot program targeting San Diego County Medi-Cal Providers. The pilot would include the following activities:

- Clinician Training to upskill providers in cultural competency offering extensive Continuing Education (CE) curriculum opportunities.
- Provider data collection to improve payor insight into network composition and representation
- Inclusivity Score and potential to add to Find a Doctor (FaD) feature.

Action: The committee asked if Violet Health could demo their platform in presentation offline for the group.



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HEART Measure Set Monitoring Data Report

Brigitte Lamberson, Health Equity Principal Program Manager, Blue Shield Promise Medi-Cal Health Equity Office, presented the HEART Measure Set Monitoring Data Report, metrics identified in partnership with each functional area across the health plan, in process automated work, analysis, and initial trend observations by measure domain. Initial observations have led to recommendations per metric including planned or current activities.

To date, we have tracked and monitored data for three (3) quarters. Work begun in Quarter 3 2023.

Some initial observations were found under the Equitable Structures of Care. The call center number of internal bilingual calls by member's preferred language metric, we noted a high call volume in Spanish calls, totaling (10,939); while Language Line utilization was a total of 78 requests.

Under the Overall Well-Being domain, for the DSF measure we noted a geographical variance, and potential trend in race/ethnicity data. Notably among the Native Hawaiian/ Pacific Islander population.

Under the Equitable Access to Care, again Language Line utilization metric we noted ASL to be the highest utilization of onsite interpreter service compared to other languages.

Under Equitable Social Interventions, we've noted 1% of members with Social Determinants of Health reported. We're not surprised to see this trend as we were aware this would result in a low result, as there is opportunity to further train Providers for z code submissions.

Under the Equitable High-Quality Clinical Care domain, we noted low childhood immunizations among African American children and White children.



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Figure 1. HEART Measure Set: Emerging Trends

Interpreter Service Utilization			
LA & San Diego	Q2 2023	Q3 2023	Q4 2023
Total	1,122	620	477
American Sign Language	19.20% (236)	30.16% (187)	38.99% (186)
Spanish	24.59% (276)	21.94% (136)	16.35% (78)
Russian	13.72% (154)	15.81% (98)	16.14% (77)

Childhood Immunizations					
	SD Q2 2023	LA Q3 2023	SD Q3 2023	LA Q4 2023	SD Q4 2023
Screening by Race	28.64%	20.97%	29.60%	22.05%	31.33%
Black or African American	22.2% (54)	7.92% (202)	23.08% (52)	9.47% (190)	24.00% (52)
White	23.64% (330)	10.40% (173)	24.76% (319)	10.92% (174)	26.10% (318)
Native Hawaiian or Pacific Islander	36.17% (47)	21.43% (14)	36.965 (46)	35.71% (14)	39.53% (43)
Asian	43.75% (32)	31.87% (91)	43.75% (32)	31.25% (96)	43.75% (32)

Call Center Number of Internal Bilingual Calls by Member's Preferred Language			
LA & San Diego	Q2 2023	Q3 2023	Q4 2023
Total Calls	31,286	46,759	64,721
English	81.17% (25,384)	81.00% (37,875)	81.60% (52,810)
Spanish	17.59% (5,502)	17.56% (8,212)	16.9% (10,939)

Depression Screening Follow-Up				
	SD Q2 2023	SD Q3 2023	LA Q4 2023	SD Q4 2023
Follow up by Race	79.31%	78.26%	45.45%	77.66%
Native Hawaiian/ Pacific Islander	75.00% (16)	78.57% (14)	0.00% (2)	75.86% (29)
Other Race	68.55% (159)	67.7% (155)	42.86% (84)	100.00% (1)
Asian	80% (5)	75.00% (4)	100.00% (4)	90.00% (10)
Black or African American	82.61% (23)	81.82% (22)	66.67% (6)	84.58% (52)
White	89.53% (96)	89.87% (79)	57.14% (7)	84.24% (165)
Native	100.00% (1)	100.00% (1)	0% (1)	100.00% (2)

Findings and Recommendations

Our initial observations have led to recommendations per metric, including planned or current activities. For example, the SDOH reporting metric, the Quality team is leading SDOH incentives for Providers. The program has been officially submitted to the DHCS and is under desk review for approval. For Childhood Immunization Status, we need to assess the root causes for why our measures are low among African American and White populations, could it be vaccine hesitancy vs. access issues. For the DSF measure, we would like to continue to track the next 6 months' worth of data to confirm the geographical variance trend we're seeing now. Regarding the bilingual calls managed by call center, our initial observation is to ensure call center agents can meet the need of our Spanish-speaking members. We did reach out to Call Center leadership who confirmed they are prioritizing recruitment of bilingual Call Center staff; 21 of 29 recent hires are bilingual. For interpreter service utilization, we saw a higher request service for ASL utilization when compared to other languages. We have requested membership data to identify people with disabilities, and ASL category across all HEART measures to assess health outcomes for people with disabilities, specifically among our hard of hearing members.



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Figure 2. Opportunities/Next Steps

Domain	Metric	Observation	Recommendation
Equitable Social Interventions	SDOH Reporting	1% of members with Social Determinants of Health reported	SDOH Incentives for Providers pending DHCS approval
Equitable High-Quality Clinical Care	Childhood Immunization Status	Low Childhood Immunizations among African American (24%) and White (26%)	Assess root causes (vaccine hesitancy vs. access)
Overall Well-Being	Depression Screening follow-up	Geographical variance	Track next 6 months to confirm trend
Equitable Structures of Care	Bilingual calls managed by Call Center	Assess if Call Center agents can meet need of Spanish-speaking members	Call Center Leadership to prioritize recruitment of bilingual Call Center staff 21 of 29 recent hires are bilingual
Equitable Access to Care	Interpreter service utilization	American Sign Language highest utilization of onsite interpreter service	<ol style="list-style-type: none"> 1. Request membership data to identify hard of hearing members 2. ASL category across all HEART measures to assess health outcomes for hard of hearing members

Social Drivers of Health (SDOH) Z-Codes

Vanessa Ogbu, Senior Manager, Blue Shield Promise Medi-Cal Quality Improvement, presented the Promise Quality Performance Incentive, PQPI program to increase 25 priority SDOH Z-codes submission for payment. The intention is to fully train clinical teams on this program to make sure they understand and how to support the providers on a new initiative around increasing the assessments required to capture these codes. The program is currently in the process of being approved by both LA Care and DHCS regulators.

Health Equity Spotlight: Redetermination

Xiaoli Li, Business Analyst, Principal, Blue Shield Promise Medi-Cal Growth, presented the Health Equity Spotlight regarding Blue Shield of California Promise Health Plan redetermination efforts that resulted in redetermination retention rate among Spanish speaking members of 81%, generalized to the Latino population. Promise’s redetermination retention rate among children and families is 83%. Promise ended with 48,000 members favorable to plan.

Actions

The committee requested a follow-up Violet Health demo presentation of the proposed pilot program features.



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Closing and Adjournment

Dr. Jennifer Nuovo thanked the committee for their time and feedback. The next QIHEC meeting will be held June 20, 2024.