MINUTES OF THE MEETING OF THE SAN JOAQUIN COUNTY HEALTH COMMISSION

September 24, 2025
Health Plan of San Joaquin – Community Room

COMMISSION MEMBERS PRESENT:

Genevieve Valentine, Chair
Brian Jensen, Vice-Chair
Julienne Angeles, MD
Paul Canepa
Jim Diel – *joined remotely from El Dorado County HHSA Office*
Joy Farley, MD
Michael Herrera, DO
Jay Krishnaswamy
Ruben Imperial
Michael Sorensen
Terry Withrow
Terry Woodrow

COMMISSION MEMBERS ABSENT:

Sandra Regalo

STAFF PRESENT:

Lizeth Granados, Chief Executive Officer
Betty Clark, Chief Regulatory Affairs and Compliance Officer
Dr. Lakshmi Dhanvanthari, Chief Medical Officer
Evert Hendrix, Chief Administrative Officer
Tracy Hitzeman, Executive Director – Clinical Operations
Elizabeth Le, Chief Operations Officer
Robert Ruiz, Executive Director – Quality Improvement and Health Equity
Michelle Tetreault, Chief Financial Officer
Victoria Worthy, Chief Information Officer
Quendrith Macedo, County Counsel
Sue Nakata, Executive Assistant and Clerk of the Health Commission

CALL TO ORDER

In Chair Valentine called the Health Commission meeting to order at 5:05 p.m.

PRESENTATIONS/INTRODUCTIONS

None.

PUBLIC COMMENTS

No public comments were forthcoming.

CONSENT CALENDAR

Chair Valentine presented two consent items for approval:

1. August 27, 2025 Health Commission Meeting Minutes

2. Community Reinvestment Committee – 09/10/2025
   a. August 13, 2025 Meeting Minutes
   b. Grant Applications Approval Request
      i. Capital Projects Grant Program – CSU Stanislaus School Nursing: $2,500,000

Pursuant to the requirements of the Ralph M. Brown Act (Gov. Code § 54950 et seq.) and its teleconferencing provisions, and because Commissioner Diel is participating remotely (via a teleconference connection), the Commission must take its vote by roll call, to ensure that each member's vote is publicly identified and recorded in the minutes.

ACTION: With no questions or comments, Vice-Chair Jensen moved to approve the two consent items as presented. The motion was seconded by Commissioner Canepa and was unanimously approved (12/0).

DISCUSSION/ACTION ITEMS

3. Formation of Ad-Hoc Strategic Planning Committee

In preparation for the expiration of the current Strategic Plans on June 30, 2026, an Ad-Hoc Strategic Planning Committee has been established to lead the development of the new 18-month Strategic Plan. Commissioner Sorensen will serve as Chair, with Commissioners Imperial and Krishnaswamy serving as members. To support this effort, Health Management Associates (HMA) have been selected as the consulting partner to guide and assist with the planning project.

4. QIHEC Committee Meeting – 09/17/2025

Dr. Lakshmi Dhanvanthari, CMO submitted for approval the QIHEC Committee meeting report for 09/17/2025, highlighting the following committee meetings, work plans, program descriptions, policies updates and reports that were reviewed and approved:

- Annual Program Evaluations FY 2025-2026

- Quality Improvement & Health Equity Program Evaluation - all aspects of the program, the structure, staffing, committee structure and participation and the effectiveness of interventions are evaluated, discussed, and changes are recommended for the work plan for the following year to ensure continuous quality improvement

- Annual Provider Partnership
  - MY 2026 had 26 providers participate in the program compared to 22 in MY2024 Provider Partners
  - Provider Partners outperform non-Provider Partners on MY2024 MCAS measures
  - Program enhancements: in-person support for more provider offices, in-depth analysis and focused interventions on missed opportunities for data capture, documentation issues, and collaborative opportunities

- Facility Site Reviews
  Quantitative:
  - 27.7% increase in total audit volume FY2025- 175 audits & in FY2024 137 audits
  - FSR: 36.5% increase 27 during FY2025 and 93 in FY2024
  - MRR: 56.3% increase from 48 in FY2024 to 75 during FY2025
  - PARS: 21.2% increase from 33 in FY2024 to 40 during FY2025

  Qualitative:
  - FSR: There was an increased trend in deficiencies related controlled substance logs, laundry handling, training documentation, policies and procedures, emergency equipment and cleaning surfaces
  - MRR: There was an increased trend in deficiencies related to preventive screenings, vaccinations, interpretation services

- Health Education Annual Evaluation FY 2025
  - Programs: Chronic Disease Management (diabetes, cardiovascular and other chronic conditions), Maternal Health for birth equity and full Early Periodic Screening, Diagnosis and Treatment (EPSDT)

  Quantitative:
  - Mailers: HEDIS: 551,384
  - EPSDT=107,642
  - Chronic Disease=23,374
  - Prenatal and Newborn=17,427
  - Smoking Cessation =15,490
  - 90% found materials understandable, 78% improved knowledge, 73% changed behavior
  - Qualitative: Program Strengths include partnerships with members and community, increased satisfaction with materials
  - Program Opportunities: Ongoing gaps in member representation, gaps in care and MCAS measures not meeting MPLs

- Initial Health Appointment (IHA) Focus Study - Calendar Year 2024, 81.7% compliance with IHA, decreased 2.34% from CY2023 and improved 11.7% from CY2022. The CY rate is 19.3% below the goal of 100%. Newly Enrolled Adults 72.7%, Newly enrolled Children 0-21, 93.91% compliance with IHA
  - Interventions used to encourage IHA - Provider education**,** provider orientation, provider alerts, new member lists for providers, and IHA training during provider partnership meetings

- Annual Accreditation Summary - In 2024, 3-year accreditation awarded for Health Plan Accreditation, in 2025, 3-year accreditation awarded for Health Equity Accreditation

- Equity and Practice Transformation Program - 6/7 practices are on track for meeting EPT milestones, between 28-40% of funding has been dispersed based on milestone achievement

- Lead Screening
  - 3607/6412 (56.25%) 2-year-olds were compliant for receiving lead screening in MY 2024. There was a 10% increase from MY 2023 rate of 46.16 %. But MPL was not met
  - 204/411 (49.64%) children up to age 6 received at least 1 screening by age 6in MY 2024, an 8.28% improvement from MY2023

- QIHETP Program Workplan Highlights 2025-2026 – *Noteworthy Changes*
  - Updated Population Health Monitoring Metrics
  - Carried forward Quality and Equity projects
  - Added Medicare Stars High Level objectives
  - Added DSNP Quality Monitoring
  - As metric monitoring capabilities are developed, work plan items will be updated

Upon review of Dr. Dhanvanthari's report, Commissioner Canepa inquired about lead screening and whether the Health Plan would be sanctioned if it does not meet the 50th percentile. Dr. Dhanvanthari confirmed that this is the case, noting that the Health Plan is on track to meet the requirement for 2025–2026 in both San Joaquin and Stanislaus counties. However, the criteria were not met for 2024–2025.

Pursuant to the requirements of the Ralph M. Brown Act (Gov. Code § 54950 et seq.) and its teleconferencing provisions, and because Commissioner Diel is participating remotely (via a teleconference connection), the Commission must take its vote by roll call, to ensure that each member's vote is publicly identified and recorded in the minutes.

ACTION: With no additional questions or comments, a motion was made (Vice-Chair Jensen) and seconded (Commissioner Krishnaswamy) to approve the QIHEC Committee Report for 09/17/2025 as presented (12/0).

Peer Review and Credentialing Committee – 09/11/2025

Dr. Dhanvanthari submitted for approval the Peer Review and Credentialing Committee report for September 17, 2025:

- Direct Contracted Providers: 279
  - Initial Credentialed for 3 years = 90
  - Initial Credentialed for 1 year = 3
  - Recredentialed for 1 Year = 3
  - Recredentialed for 3 Years = 97
- Clean File Initial Credentialing Sign Off Approval by CMO: 86
- Clean File Recredentialing Sign Off Approval by CMO: 0
- Termination-Involuntary: 0

ACTION: With no questions or comments, a motion was made (Commissioner Krishnaswamy) and seconded (Chair Valentine), with abstention by Commissioner Herrea to approve the Peer Review and Credentialing Committee report for September 11, 2025, as presented (11/1).

EDUCATION /TRAINING SESSION for HEALTH COMMISSION

5. Federal and State Updates – *Lizeth Granados + Michelle Tetreault*

6. CalAIM Implementation Overview – *Evert Hendrix + Victoria Worthy*

7. Regulatory Requirements Impacting Providers and FQHC's – *Betty Clark*

8. D-SNP Program Update – *Liz Le*

9. Community Support – *Tracy Hitzeman + Victoria Worthy*

10. Closed Loop Referrals – *Tracy Hitzeman + Victoria Worthy*

11. Medi-Cal Connect, HEDIS & Stars Update – *Dr. Lakshmi Dhanvanthari and Robert Ruiz*

12. Community Reinvestment Highlights – *Michelle Tetreault*

INFORMATION ITEMS – *refer to meeting packet*

13. CEO Update

14. Legislative Update

CHAIR'S REPORT

Chair Valentine announced that she will be absent from the October 29 Health Commission meeting, and that Vice-Chair Jensen will facilitate the meeting on her behalf.

COMMISSIONER COMMENTS

Commissioner Sorensen thanked the Health Plan for the sponsorship of the successful Friends Outside event that was held on September 21.

The Health Commission went into a Closed Session at 6:42 pm.

CLOSED SESSION

15. Closed Session – Public Employee Performance Evaluation
Government Code Section 54957
Title: Chief Executive Officer – Performance Review

The Health Commission came out of Closed Session at 6:50pm. No actions were forthcoming.

ADJOURNMENT

Chair Genevieve adjourned the meeting at 6:51 p.m. The next regular meeting of the Health Commission is scheduled for October 29, 2025.