

December 6, 2024

THIS LETTER SENT VIA EMAIL

Sharron Mackey, Chief Executive Officer Contra Costa Health Plan 595 Center Avenue, Suite 100 Martinez, CA 94553

NOTICE OF IMPOSITION OF MONETARY SANCTIONS FOR FAILURE TO MEET OR EXCEED MINIMUM PERFORMANCE LEVELS FOR MEDI-CAL MANAGED CARE ACCOUNTABILITY SET PERFORMANCE MEASURES

Dear Sharron Mackey,

The Department of Health Care Services (DHCS) sends this Notice of Imposition of Monetary Sanctions Letter on Contra Costa Health Plan for failure to meet or exceed required minimum performance levels (MPLs) for measurement year 2023 (MY23)⁷ Medi-Cal Managed Care Accountability Set (MCAS) performance measures (Exhibit A, Attachment 3, Quality Improvement System, section 2.2 External Quality Review Requirements).

On September 5, 2024, DHCS received validated MCAS measure rates from the External Quality Review Organization and confirmed that Contra Costa Health Plan has 2 plan-wide measures below MPL across 1 domain(s) for MY23 (see Table 2 for enforcement tier designation triggers).

Contra Costa Health Plan did not request a meet and confer conference with DHCS within two business days after the effective date of the Notice of Intent to Impose Monetary Sanctions Letter that was sent on October 25, 2024. This Notice of Imposition of Monetary Sanctions Letter supersedes the Notice of Intent to Impose Monetary Sanctions Letter and is made in accordance with W&I section 14197.7(g) and with the Quality Sanction Bulletin issued October 17, 2024. DHCS is imposing monetary sanctions for Contra Costa Health Plan's failure to comply with its obligations set forth in the Medi-Cal managed care plan (MCP) contract. Under W&I section 14197.7(f) and the

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⁷ Measurement Year 2023 (MY 2023) covered activities conducted from January 1, 2023, to December 31, 2023.

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MCP contract, DHCS is authorized to impose a \$25,000 sanction per violation of Contra Costa Health Plan's contractual obligation to meet or exceed MPLs for each MCAS performance measure (Exhibit A, Attachment 3, Quality Improvement System, section 2.2 External Quality Review Requirements).

The total sanction amount for Contra Costa Health Plan is \$57,000 for the following 2 measures below the MPL for MY23:

Quality Reporting Unit	Measures*	Domains*	MCP Rates	MPL	TRENDING Difference from HEDIS MY 2022	Population Impacted
Contra Costa	LSC	CH	52.81%	62.79%	1.3	1,444
	TFL-CH	CH	15.21%	19.30%	2.48	57,187

^{*}Please see Table 1 for acronym definitions

Successful administration of the Medi-Cal program requires a collaborative partnership between DHCS and MCPs. This collaboration includes the expectation that MCPs will meet or exceed their contractual and programmatic requirements on an ongoing basis. Contra Costa Health Plan and DHCS regularly collaborated on strategies for improving the Plan's MCAS performance measures required to meet or exceed MPLs (Exhibit A, Attachment 3, Quality Improvement System, section 2.2 External Quality Review Requirements).

As noted above, DHCS is authorized to impose sanctions for failure to meet or exceed MPLs for each MCAS performance measure. Contra Costa Health Plan confirming failure to meet or exceed the MPLs as outlined in the contract creates good cause for DHCS to impose monetary sanctions (Exhibit A, Attachment 3, Quality Improvement System, section 2.2 External Quality Review Requirements; Exhibit E, Program Terms and Conditions, section 1.1.19 Sanctions; W&I § 14197.7(e)).

Pursuant to W&I section 14197.7 and in accordance with APL 23-012, DHCS has considered the factors set forth in W&I section 14197.7(f) and (g) in determining the sanction amount, including the following:

 Scope of the violations, which are determined by the number of eligible members impacted by the quality-of-care violation (e.g., the number of eligible members who did not receive the recommended preventive service).

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- In determining the nature, scope, and gravity of the violation under W&I section 14197.7(g)(1), DHCS will consider the degree to which the MCP is below the MPL for the measure at issue and will increase sanction amounts per violation based upon the severity of the violation (see Table 3 for violation factors).
- DHCS will consider whether the MCP's performance on the MPL at issue has improved or worsened over the previous MY under W&I section 14197.7(g)(6). If performance has worsened over the previous MY, the sanction amount will increase; and if performance has improved, the sanction amount will decrease (see Table 4 for trending factors).
- DHCS has reduced the total sanction amount for MCPs in counties with Healthy Places Index (HPI) scores under the 50th percentile, as determined by DHCS (see Table 5 for HPI percentile and impact factors).
 This amount has already been accounted for in the sanction total above.

MCP by County	HPI Percentile	HPI Impact Factor
Contra Costa Health Plan/Contra Costa	81.4%	0.0%

Please follow the included payment instructions to effectuate payment in full to DHCS. Please indicate the name of the MCP, MY, and the reason for payment when submitting your payment to DHCS. The effective date of this sanction is December 6, 2024. Payment for the MCAS MY23 Sanctions is due immediately.

If Contra Costa Health Plan does not pay within 30 business days, Contra Costa Health Plan will receive a past due notice. Please provide notice of receipt and payment via email to DHCS' Quality Monitoring inbox. Please include the account number and check number or wire transfer number once payment has been sent.

If you have any questions, send an email to the Quality Monitoring inbox at QualityMonitoring@dhcs.ca.gov.

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Sincerely,

Sarah Lahidji Division Chief, Quality and Health Equity Quality and Population Health Management Department of Health Care Services

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California Health and Human Services Agency

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ACH/Wire to:

Beneficiary Account Name: Department of Health Care Services

Bank Name: US Bank

Laurel Heights Branch

3471 California St San Francisco, CA 94118

Routing Number: 122235821

Bank Account Number: 1-583-0005-7623

Reference: Sanction or any identifier

For Check Payment:

Payable to: Department of Health Care Services

Cash Receipts Unit 1501 Capitol Avenue MS 1101 PO Box 997415

Sacramento, CA 95899-7415

For check payment, please include the Notice of Imposition of Monetary Sanctions Letter

and any backup documents that will identify the payment.



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CC

Michelle Baass
Director
Department of Health Care Services

Tyler Sadwith
State Medicaid Director
Department of Health Care Services

Sarah Brooks Chief Deputy Director, Health Care Programs Department of Health Care Services

Lindy Harrington Assistant State Medicaid Director Department of Health Care Services

Palav Babaria
Deputy Director, Chief Quality Officer
Quality and Population Health Management
Department of Health Care Services

Judith Recchio
Deputy Director and Chief Counsel
Department of Health Care Services

Susan Philip Deputy Director, Health Care Delivery Systems Department of Health Care Services

Bambi Cisneros Assistant Deputy Director, Managed Care Health Care Delivery Systems Department of Health Care Services

Michelle Retke
Contracting Officer, Chief of Managed Care Operating Division
Health Care Delivery Systems
Department of Health Care Services

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Dana Durham
Chief of Managed Care Quality and Monitoring Division
Health Care Delivery Systems
Department of Health Care Services

Irene Lo, MD, FACS, Chief Medical Officer Contra Costa Health Plan 595 Center Avenue, Suite 100 Martinez, CA 94553

Ronda Arends, Director of Compliance and Government Regulations Contra Costa Health Plan 595 Center Avenue, Suite 100 Martinez, CA 94553

Patrick Godley, Chief Financial Officer Contra Costa Health Plan 595 Center Avenue, Suite 100 Martinez, CA 94553



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Enclosure

TABLE 1: DOMAIN, MEASURE, & ACRONYM			
Domain	Measure	Acronym	
Children's	Child and Adolescent Well-Care Visits	WCV	
Health	Childhood Immunization Status: Combination 10	CIS-10	
(CH)	Developmental Screening in the First Three Years of Life	DEV	
	Immunizations for Adolescents: Combination 2	IMA-2	
	Lead Screening in Children	LSC	
	Topical Fluoride for Children	TFL-CH	
	Well-Child Visits in the First 30 Months of Life – 0 to 15 Months – Six or More Well-Child Visits*	W30-6+	
	Well-Child Visits in the First 30 Months of Life – 15 to 30 Months – Two or More Well-Child Visits*	W30-2+	
Reproductive	Chlamydia Screening in Women	CHL	
Health and	Prenatal and Postpartum Care: Postpartum Care	PPC-Post	
Cancer	Prenatal and Postpartum Care: Timeliness of	PPC-Pre	
Prevention (RC)	Prenatal Care	500 5	
	Breast Cancer Screening	BCS-E	
	Cervical Cancer Screening	CCS	
Chronic	Asthma Medication Ratio	AMR	
Disease	Controlling High Blood Pressure	CBP	
Management (CD)	Comprehensive Diabetes Care: HbA1c Poor Control (>9.0%)*	HBD-H9*	

^{*}A lower rate is better for this measure

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TABLE 2: QUALITY ENFORCEMENT TIER DESIGNATION TRIGGERS				
Enforcement Tiers	Tier 1	Tier 2	Tier 3	
Triggers	One (1) measure below the MPL in any one (1) domain	Two (2) or more measures below the MPL in any one (1) domain	Three (3) or more measures below the MPL in two (2) or more domains	
Enforcement Action	Not subject to monetary sanction	Subject to monetary sanction	Subject to monetary sanction	

TABLE 3: VIOLATION AND BENEFICIARY IMPACT (W&I section 14197.7(g)(1))			
Severity/Beneficiary Impact	Violation per Measure	Severity Violation Factor	
Slight Violation	<1.00% below MPL	1.0	
Minimal Violation	1.00% - 2.99% below MPL	1.1	
Minor Violation	3.00% - 5.99% below MPL	1.2	
Moderate Violation	6.00% - 10.99%	1.4	
Moderately Severe Violation	11.00% - 15.99%	1.6	
Severe Violation	16.00% - 20.99%	1.8	
Extremely Severe Violation	≥21.00% below the MPL	2.0	

TABLE 4: TRENDING FACTOR (W&I section 14197.7(g)(6))			
Degrees of Improvement	Trending Difference per Measure	Trending Factor	
Significant Worsening	>(-)15.01%	2.0	
Moderately Significant Worsening	(-)15.00% - (-)11.01%	1.8	
Moderate Worsening	(-)11.00% - (-)7.01%	1.6	
Minimal Worsening	(-)7.00% - (-) 4.01%	1.4	
Slight Worsening	(-)4.00% - (-) 0.01%	1.2	
No Improvement	0.00 - 1.00%	1.0	
Slight Improvement	1.01% - 4.00%	0.8	
Minimal Improvement	4.01% - 7.00%	0.6	
Moderate Improvement	7.01% - 11.00%	0.4	
Moderately Significant Improvement	11.01% - 15.00%	0.2	
Significant Improvement	≥15.01%	0.0	

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TABLE 5: HPI IMPACT AND SANCTION REDUCTION			
Severity (Impact) of HPI (per county and MCP)	HPI Percentile	HPI Impact Factor (Sanction Reduction)	
Very High	0-9%ile	50%	
High	10-19%ile	40%	
Moderate	20-29%ile	30%	
Low Moderate	30-39%ile	20%	
Low	40-49%ile	10%	

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NOTICE OF APPEAL RIGHTS

Contra Costa Health Plan has the right to request a hearing in connection with any sanctions within fifteen (15) working days after the "effective date" of the sanctions letter. DHCS will stay the imposition of sanctions upon receipt of the request for a hearing until the effective date of a final decision from the Office of Administrative Hearings and Appeals (OAHA). Contra Costa Health Plan may request a hearing by sending a letter so stating to the Office of Administrative Hearings and Appeals at the address below:

Chief Administrative Law Judge
Office of Administrative Hearings and Appeals
Department of Health Care Services
3831 N. Freeway Blvd., Suite 200
Sacramento, CA 95834

A copy of the hearing request must also be sent to:

Thomas Mahoney
Quality and Health Equity Measurement Monitoring Section Chief
Quality and Population Health Management
Department of Health Care Services
MS 0020
P.O. Box 997413
Sacramento CA 95899-7413

Judith Recchio
Deputy Director and Chief Counsel
Office of Legal Services
Department of Health Care Services
MS 0010
P.O. Box 997413
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