

REGULATORY COMPLIANCE AND QUALITY COMMITTEE MINUTES

March 23, 2023

3:00—4:15 p.m.

The Regulatory Compliance & Quality Committee of the Board of Directors of Vaya Health held a regular meeting on Thursday, March 23, 2023 at the Vaya Health Administrative Office, located at 2929 Crouse Lane, Suite B, Burlington, NC 27215; with PUBLIC ACCESS via electronic communication only (real-time two-way audio and/or visual communication, i.e., telephone and Webex).

Committee Members:	Attending:	Apologies:
Billy Kennedy, Chair	X	
Dr. Tim Fitzsimons, Vice Chair	X (Virtual)	
Benita Purcell	X	
Carson Ojamaa	X (Virtual)	
Dakisha “DK” Wesley	X (Virtual)	
Pat McGinnis	X	

Also attending the Regulatory Compliance & Quality Committee meeting:

Dr. Richard Zenn, Chief Medical Officer; Rhonda Cox, Executive Vice President & Chief Population Health Officer; Marvin Sanders, Vice President of Regulatory Affairs; Taunula Grayson, Vice President of Compliance; Kate Glance, Performance Reporting Manager; Yvonne French, NC DHHS Liaison; Brandon Pittman, Vaya Health Governing Board Member; Shelley King, Regional Board Clerk; and no members of the public.

A. Call to Order

Mr. Billy Kennedy, Regulatory Compliance and Quality Committee Chair, called the meeting to order at 3:11 p.m.

B. Approval of Agenda and December 1, 2022 Meeting Minutes

Ms. Benita Purcell made a motion to approve the Agenda and the December 1, 2022 Meeting Minutes, as presented. Ms. Pat McGinnis seconded the motion.

Motion unanimously approved.

C. Service Level Agreements (SLAs)

Ms. Kate Glance, Performance Reporting Manager, provided the RCQC Committee with a presentation on Performance Metrics and Service Level Agreements with Liquidated Damages. Ms. Glance informed the committee that Vaya is responsible for meeting specific standards outlined in 135 Tailored Plan (TP) and 63 Medicaid Direct service level agreements or performance metrics with liquidated damages. In addition, Ms. Glance provided an overview of Vaya’s monitoring plans explaining that for each SLA, there will be a proactive, documented monitoring system entailing a clear and concise monitoring procedure for each.

D. Compliance Week 2022 Report

Ms. Taunula Grayson, Vice President of Compliance, provided the RCQC Committee with a Vaya Health 2022 Compliance Week overview. Ms. Grayson shared the agenda for training and compliance, a list of required trainings, and an attendance summary. In addition, Ms. Grayson discussed Vaya is required by The U.S. Department of Health and Human Services Office of Inspector General (HHS-OIG) to conduct a survey following Compliance Week. Ms. Grayson shared that Vaya conducted an anonymous ADKAR® survey which is designed to assess the awareness, desire, knowledge, ability and reinforcement of what was learned during Compliance Week.

E. Quarterly Comprehensive Performance Report

Ms. Kate Glance, Performance Reporting Manager, presented the Comprehensive Performance Quarterly Report. The report included Operational Performance Measures, Quality Improvement Metrics, Compliance Metrics, and Administrative Key Performance Indicators. Ms. Glance shared that super measures will stay in effect until the October 1 Tailored Plan (TP) Go-Live date. After the Go-Live date, some measures will continue to be monitored but will not be subject to liquidated damages, while others will be SLAs with liquidated damages. Continuing, Ms. Glance highlighted that Follow-Up After Discharge LME/MCO Comparison data indicated Vaya continues to be the only LME/MCO meeting 40% goals in both Medicaid and Non-Medicaid Mental Health and Substance Use Disorder categories.

Additionally, the presentation identified Quality Improvement Activities including Increasing the Rate of Routine Care Appointments Kept, Increasing the Rate of Follow-Up After Discharge, Increasing the Number of Members Retaining Housing, and Improving Timeliness for Denied and Partially Denied Decisions. Ms. Glance concluded the presentation with a Tailored Plan (TP) and Medicaid Direct Readiness update including deliverable status through March 17, 2023, TP Onsite Open Items, a TP Scorecard Executive Summary and a Medicaid Direct Scorecard Executive Summary, and Administrative Key Performance Indicators demonstrating a variety of administrative performance measurements across the organization.

Mr. Kennedy commended Ms. Glance and her team for their diligent work in providing detailed data.


F. Other Business

No other business was discussed.

G. Adjournment

Mr. Billy Kennedy made a motion to adjourn. Ms. Pat McGinnis seconded the motion.
Motion unanimously approved.

The Regulatory Compliance and Quality Committee adjourned at 4:17 p.m.



Shelley King,
Regional Board Clerk