

REGULATORY COMPLIANCE AND QUALITY COMMITTEE

MEETING MINUTES

August 22, 2024

3:00 – 4:15 p.m.

The Regulatory Compliance and Quality Committee of the Board of Directors of Vaya Health conducted its regular meeting on Thursday, August 22, 2024, at the Vaya Health Regional 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 Microsoft Teams).

Committee Members:	Attending:	Apologies:
Billy Kennedy, Chair	X	
Pat McGinnis	X (Proxy to Ronnie Beale)	
Carson Ojamaa	X	
Donnie Potter	X	
DK Wesley, Vice Chair	X (Proxy to Billy Kennedy)	

Also participating in Regulatory Compliance and Quality Committee:

Steve Martin, General Counsel & Chief Compliance Officer; Rhonda Cox, Executive Vice President (EVP) & Chief Operating Officer; Richard Zenn, Chief Medical Officer; Taunula Grayson, Vice President (VP) of Compliance; Marvin Sanders, VP of Regulatory Affairs; Onika Wilson, VP of Quality Management; Kate Glance, Regulatory Reporting Director; Megan Mise, Quality Director of NC Medicaid Managed Care; Yvonne French, NCDHHS Liaison; Ronnie Beale, Chairman of the Board, Ashley Logan, Board Support & Administrative Professional; and no members of the public.

A. Welcome, Call to Order and Roll Call

Mr. Billy Kennedy, RCQC Chair, called the meeting to order at 3:42 p.m.

Ms. Ashley Logan, Board Support & Administrative Professional, facilitated roll call at the request of Mr. Kennedy, confirming a quorum of the committee.

B. Approval of Agenda and June 27, 2024 Meeting Minutes

Mr. Donnie Potter made a motion to approve the Agenda and Meeting Minutes, as presented. Mr. Ronnie Beale seconded the motion.

Motion unanimously approved.

C. Quarterly Comprehensive Performance Report

Ms. Kate Glance, Regulatory Reporting Director, addressed the committee for presentation of the FY24/25 Q1 Quarterly Comprehensive Performance Report. The presentation included an overview of

Operational Performance Measures, Quality Improvement Metrics, Performance Improvement Projects, Compliance Metrics, and Administrative Key Performances Indicators. Ms. Glance shared Medicaid Follow-Up After Discharge, Non-Medicaid Follow-Up After Discharge, and Follow-Up After Discharge LME/MCO Comparison data. Mr. Billy Kennedy asked for clarity on the data presented. Ms. Glance shared with the committee, NCDHHS has not provided updated data since January 2024.

Ms. Glance presented metrics on Transitions to Community Living (TCL) reflecting the effort by Vaya's staff to house eligible members living with serious mental illness in the reporting period. Mr. Steve Martin, General Counsel & Chief Compliance Officer commented Vaya exceeded the net goal of 104 by housing 109 eligible members. Mr. Billy Kennedy complimented Vaya on its efforts.

Ms. Glance next presented Pharmacy Benefit Manager Key Metrics, commenting that Vaya is closely watching these metrics to ensure quality and continuity of care along with prevention of noncompliance subject to potential liquidated damages. Dr. Richard Zenn, Chief Medical Officer, noted Dr. Jay Vora, Pharmacy Director of NC Medicaid Managed Care, would be presenting on Vaya's new pharmacy program during the full board meeting.

Ms. Glance presented the annual review of transition status from 1915(b)(3) services to the 1915(i) benefit. Ms. Glance stated a dashboard will be created reflecting verified SLA compliance data. Ms. Glance noted teams are working to ensure SLA non-compliance items are met.

Continuing, Ms. Glance presented Quality Improvement Metrics. Mr. Donnie Potter and Mr. Ronnie Beale questioned where the data is generated concerning Substance Use Related Death. Ms. Glance confirmed the data is generated by NCDHHS. Mr. Potter and Mr. Beale commented the numbers are inaccurate based on their knowledge of substance related deaths in their respective counties. Dr. Richard Zenn explained causes of death recorded on death certificates are completed prior to toxicology reports are completed. Mr. Potter commented the resources and services are not being based on the true problems, and unfortunately, incomplete and inaccurate data generates inadequate resources.

Ms. Glance asked Committee Members to review Performance Improvement Projects, Compliance Metrics, and Administrative Key Performance Indicators.

D. Provider Satisfaction Survey Report

Ms. Kate Glance presented the 2024 Provider Satisfaction Survey results to the Committee Members. The survey was developed by Vaya staff in collaboration with the Provider Advisory Council. Ms. Glance shared 270 surveys were completed, of which 46 respondents identified as an EOR or a representative of the EOR program. The survey included four categories by role: senior leadership, manage direct staff, direct staff, and claims. Responses surveyed provider network operations, attendance at Provider Advisory Council meetings, and interactions with Vaya's call centers, claims department, provider monitoring teams and utilization management team. Lastly, the survey included satisfaction regarding Employer of Record. Mr. Kennedy thanked Ms. Glance for the report.

E. Other Business

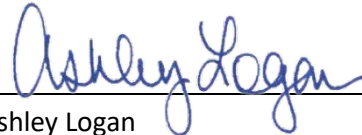
No other business was discussed.

F. Adjournment

Mr. Donnie Potter made a motion to adjourn. Mr. Billy Kennedy seconded the motion.

Motion unanimously approved.

The Regulatory Compliance and Quality Committee adjourned 4:21 p.m.



Ashley Logan

Board Support & Administrative Professional