

**REGULATORY COMPLIANCE AND QUALITY COMMITTEE**

**MEETING MINUTES**

**August 28, 2025**

**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 28, 2025, 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).*

<b>Committee Members:</b>	<b>Attending:</b>	<b>Apologies:</b>
<b>Billy Kennedy, Chair</b>	X	
<b>Pat McGinnis</b>	X (virtual)	
<b>Carson Ojamaa</b>		X
<b>Donnie Potter</b>		X (proxy to Mr. Kennedy)
<b>Dakisha “DK” Wesley, Vice Chair</b>	X (virtual)	

**Also participating in Regulatory Compliance and Quality Committee:**

*Steve Martin, General Counsel & Chief Compliance Officer; Rhonda Cox, Executive Vice President & Chief Operating Officer; Richard Zenn, Chief Medical Officer; Marvin Sanders, Vice President (VP) of Regulatory Affairs; Kate Glance, Regulatory Reporting Director; Megan Mise, Quality Director of NC Medicaid Managed Care; Onika Wilson, VP of Quality Management; Nancy Zachary, Regulatory Performance Reporting Analyst; McLean Moore, Chief of Staff – Business Integrity; Ricky Graves, Board Member; and no members of the public.*

**A. Welcome, Call to Order and Roll Call**

Mr. Billy Kenedy, Regulatory Compliance and Quality Committee Chair, called the meeting to order at 3:36 p.m.

Mr. Kennedy requested Ms. McLean Moore, Chief of Staff – Business Integrity, conduct roll call. Ms. Moore facilitated roll call as requested, confirming a quorum of the Regulatory Compliance and Quality Committee.

**B. Approval of Agenda and June 26, 2025 Meeting Minutes**

Ms. Pat McGinnis made a motion to approve the Agenda and Meeting Minutes, as presented. Mr. Billy Kennedy, proxy to Donnie Potter, seconded the motion.  
Motion unanimously approved.

**C. Quarterly Comprehensive Performance Report**

Ms. Kate Glance, Regulatory Reporting Director, presented the Comprehensive Performance Quarterly Report, including an overview of operational performance measures, quality improvement metrics, performance improvement projects and quality improvement activities, compliance metrics, and administrative key performance indicators.

Ms. Glance began by presenting data on Non-Medicaid Follow-up After Discharge. Mr. Billy Kennedy observed a downward trend in numbers, suggesting it could be due to either reduced access to care or improvements in care delivery. Ms. Glance clarified that the decrease is not related to access issues but rather reflects active care delivery by providers. Dr. Richard Zenn, Chief Medical Officer, emphasized that current figures are very low. Mr. Steve Martin, General Counsel and Chief Compliance Officer, noted that the data pertains exclusively to non-Medicaid.

Next, Ms. Glance presented Transition to Community Living (TCL), Emergency Department Admissions – Medicaid and Medicaid Expansion, Children Boarding in Emergency Departments, and Children in DSS Custody Boarding in Emergency Departments. Mr. Kennedy commented that County Commissioners actively monitor emergency department data, given that counties are financially responsible for DSS children’s hospital stays.

Continuing, Ms. Glance presented the Inclusion Connects Quarterly Reporting, which included data on I/DD In-reach, Diversion and Transition Report, Innovations Waitlist Dashboard, Social Determinants of Health Needs (BCM026), and Anti-Obesity and Anti-Diabetic (GLP1s) Drugs Plan Paid by Month. Ms. Glance noted that this data is expected to shift over time. Dr. Zenn added that Vaya does not yet have clarity on expected data indicators; while the weight loss indication may be removed, other qualifying indications for members could emerge. Ms. Glance then shared metrics on HEDIS, providing a Brief Overview and update on Current HEDIS Measure Progress.

Ms. Glance then presented data on Grievances by Provider Type and Access to Care across Vaya’s call lines. Mr. Martin highlighted that the Behavioral Care Crisis Line is answering calls in under 3 minutes. Mr. Kennedy acknowledged the consistent strength of the call line has always been superb and noted that this performance is especially commendable.

Ms. Megan Mise, Quality Director of NC Medicaid Managed Care, presented the PIP/QIA Performance Dashboard, and noted that while some projects show limited progress due to a data lag, continued efforts are underway and improvements are expected to become more apparent as updated data becomes available. Ms. Mise commended the EQR Overall Satisfaction workgroup for their dedicated efforts on the project.

**Ms. Rhonda Cox left the meeting.**

**D. Provider Satisfaction Survey Report**

Ms. Glance presented the results of the 2025 Provider Satisfaction Survey, which was open for responses from May 5 through 31, 2025. While the overall number of participants declined compared to last year, the survey showed an increase in positive responses, and open-ended responses primarily consisted of constructive suggestions.

**Ms. Rhonda Cox rejoined the meeting.**

Next, Ms. Glance presented data on several key areas of the 2025 Provider Satisfaction Survey, highlighting year-over-year improvements in: Overall Satisfaction, Provider Network Operations Responses, Central Website, Provider Portal and highlighted increased provider usage, Provider Advisory Council Responses, Call Center Responses, and Claims Department Responses which showed notable improvement compared to last year.

Ms. Glance concluded by sharing metrics on Utilization Management Responses, Quality Management Department Responses, and Tailored Care Management Responses.

Mr. Kennedy commented that the survey results were strong and confirmed that no Committee members had further questions. Mr. Kennedy emphasized the importance of this data and noted the need to allow more time for discussion in future meetings.

**E. Other Business**

Mr. Kennedy announced that the Regulatory Compliance and Quality Committee meeting cadence will shift to occur separately from Board of Directors meetings, noting that this change is intended to allow more time for data review and better alignment with reporting timelines. No Committee members expressed opposition to the adjustment.

**F. Adjournment**

Ms. Pat McGinnis made a motion to adjourn.

Ms. Dakisha Wesley seconded the motion.

Motion unanimously approved.

The Regulatory Compliance and Quality Committee adjourned at 4:13 p.m.

*McLean Moore*

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McLean Moore

Chief of Staff - Business Integrity