

2023 Year End Report Health Equity Department

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Table of Contents

I.	Purpose of Report	3 -
II.	Highlights of 2023 accomplishments as aligned with Culturally and Linguistically Appropriate Services (CLAS)	3 -
	CLAS 1:	3 -
	CLAS 2:	3 -
	CLAS 3:	4 -
	CLAS 4:	4 -
	CLAS 5:	5 -
	CLAS 6	5 -
	CLAS 7	6 -
	CLAS 8:	6 -
	CLAS 9	7 -
	CLAS 10:	7 -
	CLAS 11:	7 -
	CLAS 12:	8 -
	CLAS 13:	8 -
	CLAS 14:	2 -
	CLAS 15:	2 -
III.	Barrier Progress and Analysis	4 -

I. Purpose of Report

To provide an overview of the Health Equity Department activities, main achievements, and barriers for the year 2023. This report encompasses end of year reporting for both Health Net (HN) and California Health and Wellness (CH&W).

II. Highlights of 2023 accomplishments as aligned with Culturally and Linguistically Appropriate Services (CLAS)

CLAS 1: Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.

- All of the activities described in the 2023 Year End Health Equity Report are reflective of our commitment to providing culturally competent services to our membership. Our commitment is affirmed by Health Net achieving in 2012 the status of the first health plan in the country to earn the National Committee for Quality Assurance (NCQA) Multicultural Health Care (MHC) Distinction simultaneously for California Commercial, Medicare and Medi-Cal lines of business. In 2022, Health Net renewed our Health Equity Accreditation (formerly the MHC distinction) for the fifth time for California Medicaid, Medicare, and Commercial product lines, including Marketplace. The next renewal is on-track for 2024.
- In 2022, Health Net also was awarded the Health Equity Accreditation Plus through a pilot program with NCQA, becoming one of only 9 plans in the U.S. to achieve such award. The next renewal is on-track for 2024.

CLAS 2: Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices, and allocated resources.

Health Net's robust governance and leadership structure promotes CLAS and health equity. In 2023, the new Health Equity structure and strategic plan was formalized and integrated in the day-to-day work across Health Net departments. Our Chief Health Equity Officer established this new structure in 2022, to strengthen the committee governance and ecosystem. The committee ecosystem support & connections supports the foundation of the governance structure. This ecosystem is comprised of the Public Policy Committee, Community Advisory Selection Committee, Community Advisory Committees, Community Impact Council, as well as other committees. There are also Internal Health Equity Governance Committee and Taskforce bodies supporting the ecosystem. The entire ecosystem reports to the Quality Improvement & Health Equity Committee, which reports up to the Board of Directors.

In 2023, we achieved the following:

- Conducted data analysis and presented findings and recommendations to organizational leadership on Health Equity Department subject areas including:
 - **HN** Language Assistance Program (LAP) trend analysis; 2023 year-end report and barrier analysis and disparities annual report.
 - CH&W 2023 LAP year-end report and barrier analysis; and disparities analysis on quality measures.
- Sustained health equity and cultural and linguistic (C&L) programs to support continued program implementation of Medi-Cal expansion, Commercial (on and off exchange) and CH&W.
- Prepared nine broad reports to inform leadership on accomplishments and barriers to health equity and C&L services specific to Health Net. The reports were the following: Language Assistance Program (LAP) Mid-Year, LAP End of Year, Workplan Evaluation Mid-Year, Workplan End of Year, Health Equity End of Year, Health Disparity and Action Report, Defining the Community, Social Risks and Social

Needs Analysis and Prioritization, and Social Risk and Social Needs Resource Assessment Analysis Reports.

- Conducted monitoring and oversight activities to Health Net specialty plans and medical management vendors.
- Participated in 3 audits by state and federal regulators related to Health Equity/Cultural and Linguistic Services (California Department of Insurance filing, Department of Managed Health Care Health Net of California, and Department of Managed Health Care Health Net Community Solutions).
- Internal audit of all cultural and linguistic contract requirements from Covered California, Department of Health Care Services (Medi-Cal, CH&W), and Department of Managed Health Care.

CLAS 3: Recruit, promote, and support a culturally and linguistically diverse governance, leadership, and workforce that are responsive to the population in the service area.

To ensure that Health Net and CH&W is continually striving to be responsive to our membership, we conduct data analysis and design and implement services that meet the needs of our members. Internally, Health Net and CH&W surveys new employees to determine staff diversity and we support and train bilingual associates. Externally, we conduct a biennial Geo Access report, which uses member zip code data and correlates it with member language preference. This data is further overlaid with provider network language capabilities and a gap analysis is conducted to target network expansion. Health Net and CH&W's Human Resources Department and Diversity and Inclusion team is responsible for the overall coordination to ensure a diverse leadership and workforce. In 2023, the Health Equity Department was successful in achieving the following:

• Completed health care bilingual certification for 285 Health Net and CH&W serving staff.

CLAS 4: Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis.

In 2023, the Health Equity Department provided 47 trainings reaching nearly 10,461 attendees on language services, cultural competency, health literacy, health disparities, Social Determinants of Health, gender neutral language and gender diverse populations, and cultural humility and implicit bias, among other topics, to support internal and external customers.

External customers such as Health Net members, employer groups and contracted providers have access to cultural and linguistic materials, culturally relevant research, and education and training programs to improve health access and outcomes. Internal customers such as Health Net staff and departments have access to C&L services, training programs, and data that assist in providing quality services for all Health Net members. In 2023, the Health Equity Department completed the following training and development achievements:

Internal training and development:

Health Equity provided 25 company in-services/online trainings to 8,949 attendees, updated 10 policies and procedures (P&Ps), created two new P&Ps, and published 32 articles on training and education. Specifically, we accomplished the following:

Coordinated and implemented CLAS/Heritage Month for the California Market, nearly 3,000 staff
participated in educational events celebrating membership and employee diversity. The theme for 2023
was promoting Gender Neutral Care. Training consisted of weekly articles, a Centene University
training, one guest speaker webinar, and a virtual activity aimed to engage in learning of different
cultures, and incentives to boost participation.

- Deployed online Cultural Competency training to 3,799 staff with 94% completing with a score of 80% or higher.
- Developed and delivered tailored cultural competency, health equity, Unnatural Causes, gender neutral language, health literacy, social needs platform and language assistance trainings to key customer-facing departments.
- Deployed LAP training to 2,000 staff, with 92.4% % completing with a score of 80% or higher to ensure compliance with regulations.
- Implemented three trainings addressing gender neutral language, gender affirming care, and gender diverse barriers to care trainings to 156 staff.
- Implemented three findhelp (Health Net Community Connect) trainings.
- Implemented a Healthcare Barriers for Gender Diverse Populations training to 68 internal staff and 127 external providers.

External training and development:

- Provided 22 provider and community trainings on language services, cultural competency, health literacy and health disparities.
- Implemented special population Implicit Bias trainings.
 - Strengthening Cultural Humility Dismantling Implicit Bias (August 4th and November 3rd).
- Educated providers on cultural and linguistic best practices through 14 touch points including online newsletters, provider updates and provider operations manuals.
- External trainings reached 1,512 providers, office staff, and community-based individuals.

CLAS 5: Offer language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them, to facilitate timely access to all health care and services.

In 2023, 33% of Health Net's membership and 28% of CH&W membership identified as limited English proficient.

To meet the needs of our diverse members, we have a strong Language Assistance Program that is designed to support members and empower them to be active participants in their health.

The support of 399,816 interpreter services to members (384,942 HN; 14,874 CH&W). This included:

- HN services include: 128,038 telephone interpreter, 5,116 face-to-face interpreter, 816 American Sign Language, 188 Video Remote Interpreter, and 250,784 answered by HN bilingual staff.
- CH&W services include: 14,774 telephone interpreter, 719 face-to-face interpreter, 9 American Sign Language, and 20 Video Remote Interpreter. CH&W calls are also answered by bilingual staff and are combined with the HN number above.
- 208 video remote interpreter services (188 HN; 20 CH&W)
- Maintained process for Health Equity to maintain compliance and monitoring of Standing Requests for applicable lines of business.

CLAS 6: Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.

Health Net and CH&W provide members with multiple mechanisms to learn about Language Assistance Services, inclusive of written and verbal notification. In 2023, the Health Equity Department was successful in achieving the following:

- Updated and remediated 6 taglines (Notices of Language Assistance [NOLA] or Multilanguage Insert [MLI]) by updating traditional Chinese to simplified Chinese.
- Developed a new tagline for Community Health Plan of Imperial Valley (CHPIV).
- Updated and remediated one Non-Discrimination Notices (NDN) for CHPIV.
- Produced 11 annual newsletter article for all lines of business that advised members of the availability of language services and how to access them.

CLAS 7: Ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.

Health Net ensures quality language services for our members or potential members through robust oversight and monitoring including:

- Contractual oversight to 13 interpreter and/or translation vendors including:
 - 8 for American Sign Language.
 - 9 vendors provide interpreter services.
 - o 5 vendors provide written translation and alternate format services.
 - Note: Some vendors provide both interpreter (American Sign Language and/or languages) and translation or alternate format services.
- Distributed the Health Industry Collaborative Effort recommendations to providers to ensure providers and staff support quality interpreter requirements.
- 74 interpreter complaints, which resulted in documented follow-up action for 46 of the complaints.
- Sustained the capacity of Health Net departments to conduct independent translation coordination. Health Equity coordinated 5 translations in 2023.
- Conducted 160 translation reviews (148 for HN; 12 for CH&W).
- Provision of education to providers on the use of untrained individuals and/or minors to provide interpretation services (Operations Manual, LAP Provider Updates).
- Oversight of translation and interpretation member and provider requests.
 - In 2023, 99 translations and alternate formats, 7,468 interpreter services, 973 sign language interpreter services, and 139,575 telephonic interpretation requests were successfully fulfilled.

CLAS 8: *Provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.*

In 2023, Health Net sustained an organization wide-effort to integrate knowledge of health literacy best practices across departments. The Health Equity Department has sustained health literacy efforts through the provision of plain language training and readability software to Health Net associates. In 2023, Health Equity successfully:

- Trained 7 staff on plain language principles and processes. In addition, 75 staff installed/activated Readability Studio software in 2023.
- Sustained 6th grade reading level of member materials sent for C&L review. Health Equity has developed a health literacy thesaurus, guidelines for writers and a robust evaluation process for all member materials.
- Conducted 238 English Material Reviews (EMR) of which 203 were HN, 35 for CH&W materials The EMR process helps to ensure health literacy principles are followed, readability score is meeting the regulatory requirements and ensures cultural competency of print and multimedia materials.
- Provided health literacy learning opportunities during National Health Literacy Month for all staff in the form of Executive Sponsor article, webinar trainings for internal staff and providers and other activities. Nearly 1,650 employees engaged through the activities and/or articles.
- Published biannual Health Literacy newsletter with two issues disseminated to the stakeholders.

CLAS 9: Establish culturally and linguistically appropriate goals, policies, and management accountability, and infuse them throughout the organization's planning and operations.

The 2023 Health Equity department goals were used as the foundation for the work plan, objectives, and results from the Year End report. In addition, the implementation of activities as aligned with department objectives are done through inter-departmental efforts to ensure collaboration on Health Equity services.

The 2023 mission of the Health Equity Department is to:

- Improve <u>structural determinants of health equity</u>, by working within and across societal institutions and systems.
- Improve neighborhood-level <u>social determinants of health</u>, by working with and across institutions in defined geographic communities.
- Improve <u>institutional drivers</u> of health equity, by working within our institution, all lines of business, with providers, and with other key stakeholders.
- Improve individual & household-level <u>social needs</u> & networks, by improving access, quality, and value of services for our members.

2023 Department Goals

Health Net's overall aim is to provide equitable, high-quality care services to its culturally and linguistically diverse population no matter the individual's personal characteristics. The purpose of the organization's Health Equity Accreditation and Health Equity Accreditation Plus programs is to reduce health care inequities and disparities by implementing interventions for identified individuals who are likely to experience or are experiencing obstacles to health care services due to their race/ethnicity, language preference, gender identity, and/or sexual orientation.

The goal is to improve care by working to eliminate bias and discrimination within communities and the healthcare industry.

Since 2020, the collection of race and ethnicity data has become a larger priority in the organization. A Health Equity Officer position was created in early 2021 and throughout the years has developed a comprehensive health equity strategy that addresses ways that Health Net can promote health equity through member programs, hiring practices, and contracting with diverse vendors.

CLAS 10: Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into measurement and continuous quality improvement activities.

The Health Equity Department routinely conducts assessments of Health Net's integration of CLAS related measures into our quality improvement activities. This is accomplished through 1.) Routine Health Equity Accreditation Plus standards analysis which integrates CLAS activities and related measures, 2.) Annual evaluations (contract assessments, vendor and specialty plan oversight evaluations, P&P reviews) and barrier analysis, and 3.) Annual work plans. Health Net meets all 15 CLAS standards as evidenced by the achievement of the Health Equity Accreditation and Health Equity Accreditation Plus statuses.

CLAS 11: Collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes and to inform service delivery.

Health Net and CH&W strive to collect and maintain accurate and reliable demographic data and to use data to effectively analyze member health outcomes and target health equity efforts. Health Net and CH&W procures race, ethnicity, and language (REL) from members through the Customer Call Center, member surveys and eligibility files from state and federal files for Medi-Cal, Medicare, and exchange members. Health Net uses data to analyze targeted outcomes by member demographics so that health disparities

can be analyzed for CH&W and Health Net. In 2023, the Health Equity Department successfully accomplished the following:

- Supported Health Net in collecting spoken language data on 93% of HN members and 54% of CH&W members. Additionally, we successfully collected 91% of Race/Ethnicity data for Health Net members and 99% for CH&W members.
- Methodology supports Health Net in obtaining Race/Ethnicity data through mixed method (direct and indirect).
- Continued to use a multimodal campaign to enhance self-reported Race/Ethnicity data collection for members with unknown or blank data.

CLAS 12: Conduct regular assessments of community health assets and needs and use the results to plan and implement services that respond to the cultural and linguistic diversity of populations in the service area.

Health Net conducts a Population Needs Assessment (PNA) every year to improve health outcomes for members. Starting in 2022, the Department of Health Care Services changed the frequency of the PNA to every 3 years. In 2023, the Health Equity Department successfully accomplished the following:

- Deployed Language Assistance Program trainings and updated materials to successfully meet the goals listed in the PNA annual action plan for the Health Equity Department.
- Completed Community Advisory Council-based focus groups for disparity projects to understand barriers with achieving targeted health outcomes.
- Worked towards a community-based partners development of place and topic specific community advisory groups for disparity projects to coordinate community assets and support member outcome improvement. See barrier analysis.
- Enhanced the implementation and utilization of social services platform Health Net Community Connect (powered by findhelp) for HN and CH&W staff and members. Implemented a social needs screening function on the website for staff or members to self-screen.
- Trained multiple internal departments on language assistance services and scheduled a training for providers to increase utilization of language assistance services.

CLAS 13: Partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.

The Health Equity Department recognizes that Health Net and CH&W cannot be successful if we do not use the expertise that exists with our surrounding communities to improve cultural and linguistic appropriateness and impact positive health outcomes related to Health Equity. As such, Health Net and CH&W engages in multiple collaborations to support us in meeting our goals. The following is a summary of our activities for 2023:

- Due to ongoing precautions around COVID 19, the Community Advisory Committee (CAC) meetings continued to be virtual meetings.
- Overall, 32 CAC meetings (24 HN; 8 CH&W) were hosted by the Public Policy Department.
 - There were 24 county/region-specific CACs for HN.
 - A total of 8 CACs were hosted for CH&W (4 for Rural Northern Counties, 4 for Imperial County).
 - The CACs were attended by 267 participants with an average of 8 attendees per meeting/sessions across all counties.
- Developed and/or supported community committees and initiatives focused on health equity and social determinants of health including:
 - Westside Infant Family Network (WIN)

- Frontline Doulas
- o Black Women for Wellness
- West Fresno Resource Center
- Fresno Metro Ministry
- San Diego Wellness Collaborative
- o Southern California Center for Latino Health
- o African American Infant Maternal Mortality of LA County
- Black Infant Health (Fresno County)
- Children Service Network
- California Association of Adult Day Services
- o Bakersfield Kern Regional Homeless Collaborative
- Diversity Uplifts, Inc.
- Consumer Center for Health Education and Advocacy/Legal Aid Society of San Diego Inc.
- LA County First 5 LA
- o Findhelp utilization search data and assessment responses
- Partnered with local and national collaborations to share best practices and leverage resources.
 - o AHIP Health Equity Workgroup
 - NCQA Health Equity Expert Workgroup
 - Health Industry Collaboration Effort (HICE)
 - HICE Health Equity Accreditation Workgroup
 - Healthy San Diego C&L/Health Education Work Group and Medi-Cal Health Education and Cultural and Linguistic Workgroup

Health Disparity Efforts

In 2023, Health Net continued to strengthen and diversify the scope and implementation of the Health Equity efforts to improve member outcomes through disparity and social drivers of health (SDoH) focused efforts. Strong inter-departmental partnerships were fostered to leverage resource investment and broaden the impact of disparity work. The Health Equity Department continued to deploy the disparity reduction model to support several projects throughout California. The following is a summary of the health disparity and SDoH initiatives undertaken in 2023:

Health Equity and SDOH Initiatives						
Northern California Projects						
Projects	Outcomes					
Sacramento Pediatric	The Sacramento Quality Monitoring Improvement Program (QMIP) is a 6-					
Quality Monitoring Improvement Program	month initiative aim to increase well child visits and immunizations compliance rate in Black/African American members living in Sacramento County. Interventions includes a multi-gap outreach calls and connecting members to resources to address their social needs. Call reach and attempts were made to 1,597 members. The project also supported Sacramento members with 321 referrals made and 73 assessments					
completed at the end of the project in September 2023.						
Southern California Projects						
Projects	Outcomes					
Community Health Detailing Campaign	In 2023, Health Net in partnership with Health Begins launched a 4- month equity focused improvement campaign that aims to reduce racial inequities in well child visits and immunizations in Black/African American					

	2023 Health Equity Department Year End Report
	members living in South and Central Los Angeles County. To achieve
	this goal, Health Net partnered with clinical practices (St. John's, T.H.E.
	Clinic, Dr. Latkineh, and Dr. Perey's offices), community-based
	organizations (Frontline Doulas and Westside Family Infant Network) and
	people with lived experiences to help healthcare providers advance
	health care equity while strengthening clinical-community relationships.
	The campaign concluded in Quarter 1 of 2024.
Covered CA Diabetes	Covered California Disparity Reduction Project addressed HbA1c
Management Disparity	management among Latinx members with Allied Pacific IPA (independent
Project	physician association). Intervention designs were guided by barrier
	analysis at the member, provider, and community level to improve
	management of diabetes (HbA1c level < 8; hemoglobin A1C less than 8
	percent). Two interventions were completed in 2023 at the member and
	community levels. The member intervention consisted of One Stop Clinic
	with specific Participating Physician Group (PPG) for Latino non-
	compliant for A1c<8% to be screened. The community intervention
	deployed 4 social media posts addressing diabetes management (diet,
	exercise, blood glucose). The posts were published in Spanish and
	English. Additionally, we supported Covered California presentations and
	reporting on disparity project status. With the completion of the final
	interventions in 2023, the disparity project outcomes are currently being
	evaluated.
LA Prenatal and Postpartum	The disparity project is focused on improving prenatal and postpartum
Care Project	(PPC) rates for Black/African American members living in South Los
	Angeles County. A barrier analysis was completed which included a
	disparity data analysis and focus groups and key interviews completed
	with community leaders, community members, members and providers
	Interventions were designed and implemented at the member, provider,
	and community levels. Member interventions focused on partnering with
	Centene's Start Smart for Your Baby Case Management program to
	outreach to Black/African American pregnant members in Los Angeles
	County. Community and Provider interventions included establishing a
	partnering with a local Community Based Organization, Black Women for
	Wellness. A Reproductive Justice training was completed for Los Angeles
	area providers focused on maternal and pediatric health. While the
	project has concluded, next steps for continued maternal health disparity
	reduction efforts for the Black/African American include collaborative
	efforts across departments to utilize the state's Birth Equity population of
	focus through Enhanced Care Management (ECM), building upon
	established community partnerships, and expansion of Reproductive Justice provider training. The project concluded in October 2023.
Noighborhood Initiations	
Neighborhood Initiatives	Health Net is partnering with Westside Infant Family Network (WIN) on a
Project (Formerly Quest	neighborhood, place-based health equity initiative designed to improve
Project)	Healthcare Effectiveness Data and Information Set (HEDIS) measures
	and reduce disparities. The initiative will be focused on African Americans
	living in SPA 6 (service provider area) in Los Angeles County. Childhood
	immunization status(CIS-10 Combination) and well child visits (0-30
	months) are the measures of focus. A comprehensive barrier analysis
	was completed in 2023 and included both qualitative and quantitative
	data collection. Qualitative data sources included focus groups and key
	informant interviews with members, provider and community members
	and a literature review. Quantitative data analysis included HEDIS
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	2023 Health Equity Department Year End Report
	measures and social needs disparity analyses. Interventions will be
	designed and implemented based on the barrier analysis aimed at the
	provider, community, and member levels. The project is in progress.
Neighborhood Networks	The continuation of a pilot program using Community Health Workers
Project	(CHW) implemented at a Rady Children's Clinic in San Diego to address
	well child visit disparities among the African American population. The
	CHW focused on member referrals to findhelp. By December 2023, the
	CHW outreached to 659 members and referred 424 to findhelp. The pilot
	program concluded on 12/31/23.
Statewide Projects and Initia	
Projects	Outcomes
Community Connect (Aunt	Implementation and roll out of Health Net Community Connect (findhelp
Bertha)	formerly known as Aunt Bertha). Key successes included:
	✓ Initiated Cozeva and findhelp integration.
	✓ Rebranded findhelp to include Wellcare.
	 ✓ Developed three on demand trainings for providers.
	✓ Updated flyers and postcards for all lines of business.
	 ✓ Conducted 3 live trainings for staff and community partners.
	 ✓ 753 programs were added to the Community Connect website.
	 ✓ 1,526 assessments were completed.
	 ✓ 5,553 referrals were made, and 1,506 referral loops were closed.
	 Produced and branded how-to guides for community members,
	providers, and staff.
	 ✓ Renew contract for 2024 to include TruCare and Cozeva
	integration.
Chronic Care Improvement	The disparity project is focused on controlling blood pressure for African
Plan	American and American Indian and Alaska Native population of
	Medicare. Intervention includes health education on lifestyle factors
	(diet/exercise), medication adherence, partnership with a community-
	based organization on providing education, and potential provider
	training. The Health Equity Department will provide consultation on
	making sure interventions meet the Health Equity model for disparity
	projects.
Improving Well Child Visits	The disparity project is focused on improving well child visits (W306+)
(W306+) Performance	among Black or African American members living in Los Angeles,
Improvement Project	Sacramento, San Joaquin, Stanislaus, and Tulare counties. Interventions
improvement reject	will be designed at the member, provider, and community levels after the
	completion of the barrier analysis. This project is in progress.
University of California	
Quality Improvement Project	
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Conferences, Presentations	The University of California (UC QIP) disparity project will focus on comprehensive diabetes control, colorectal cancer screening and child and adolescent well care visits. In 2023, barrier analyses were completed for each measure and reported to support the design of interventions. The Health Equity Department also developed, presented, and recorded for on demand access a training to address cultural &health equity barriers of each measure to support a provider intervention. Additionally, in 2023 supported the cultural and linguistic review of documents for each of the UC QIP measures. and Awards
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Award	Successful completion of Massachusetts General Hospital 2022-2023 Disparities Leadership Program. October 18, 2023.
Conference	 Poster Presentation for the 2023 Centers for Medicare & Medicaid Services Quality Conference. May 1-2, 2023. Present "It Takes All of Us: A community/Members/Provider Approach to Achieving Health Equity" at the Institute for High Quality Care Summit on August 25th Presented "Improving Food Security and Controlling HbA1c Rates in Fresno County" at the Disparity Leadership Program on Oct. 19. Submitted Breast Cancer Screening Performance Improvement Project for Southeast Asian women in Fresno County to the Department of Health Care Service 2023 Quality Conference on Oct. 18. Presented at Continuity of Care Coalition; "Housing is Health Care" July 27th. Presented at Continuity of Care Coalition; "Compassion Fatigue & HN Medi-Cal Services" August 24th. Presented at California Association of Adult Day Care Services; "Inclusive, Empathetic Care: Building Authentic Engagement Across Diverse Populations" November 14th.

CLAS 14: Create conflict and grievance resolution processes that are culturally and linguistically appropriate to identify, prevent, and resolve conflicts or complaints.

The Health Equity Department collaborates with Appeals and Grievance (A&G) department to analyze and follow-up on C&L-related member concerns. Analysis helps to identify cultural and/or linguistic issues that may act as barriers to accessing health care. When barriers are identified, Health Equity develops a provider or member education program to meet that need. In 2023, we were successful in achieving the following:

- Conducted analysis, tracking, and monitoring of a total of 592 grievance cases sent to the Health Equity Department by A&G (387 HN; 19 CH&W). Of these, 406 (387 HN; 19 CH&W) were coded to culture or language. 34 were determined to have a HN or CHW fault and an internal Corrective Action Plan (CAP) was issued and 18 resulted in a HN vendor CAP.
- Completed 22 Health Net provider interventions with education, tools, and resources on language requirements, cultural competency and or cultural sensitivity.

CLAS 15: Communicate the organization's progress in implementing and sustaining CLAS to all stakeholders, constituents, and the general public.

Health Net and CH&W communicates on our progress towards CLAS standards to a diverse range of participants, constituents, and the public. In 2023, we conducted the following to accomplish this goal:

- Wrote content about Cultural and Linguistic services in 8 Member Newsletters: Medicare, State Health Plans (HN, CMC, CH&W) and Commercial newsletters.
- Ongoing participation in Health Net and California Health and Wellness Community Advisory Committees in collaboration with Community Health Education team.
- Filed Health Net reports including C&L program description, demographic profile, and LAP utilization with the Department of Health Care Service.

- Non-Discrimination Notice and tagline documents were updated on Health Net member facing websites. Members also have the opportunity to update their race, ethnicity and language information using the member profile feature found on Health Net websites for members.
- Shared findhelp data with Community Advisory Committees and asked them for feedback on proposed goals addressing social needs and social risks.

III. Barrier Progress and Analysis

A. 2023 Progress

Ide	ntified Barriers	Impact of Barrier	Rationale for mitigating barrier	Progress	Next Steps	Status
1.)	Shortage of American Sign Language interpreters in CA regions	Compliance Risk • Department of Health Care Service and Department of Managed Health Care risk for lack of quality interpreter services.	Meet compliance requirements and support member needs to drive Healthcare Effectiveness Data and Information Set (HEDIS) and customer experience.	 Continue to work with interpreter vendors to increase the available pool of sign language interpreters. Terminate contracts that were not fulfilling our needs. Brought on new vendors to fill in potential gaps in coverage. 	 Introduced capability of scheduling video remote interpreters for sign language and other languages. in support of COVID 19 patient care and to address shortage of sign language interpreters. 	 Video Remote Interpretation (VRI) pilot launched for 5 Clinics. We are planning to expand on demand VRI to other clinics in 2024.
2.)	Sexual Orientation and Gender Identity Fields and Data Collection	Data fields and value are new to Health Net and there are several systems that need updating to collect and store this data.	Systems are being updated and data collection is beginning. Several regulators are beginning to require this data so we are meeting this requirement early.	 Call center system (OMNI) updates are complete, and fields are successfully storing data. Member Portal fields are on track for Q2 2024. Unified Member View (UMV) system updates are complete, and fields are successfully storing data. 	 Ensure completeness of Member Portal updates. Monitor regulator updates to SOGI- related requirements and ensure alignment within our systems and across requestors. 	 Member REAL SOGI data collection went live on December 12, 2023. REAL SOGI data is reflective in OMNI, Prime, TruCare Could, and Member RTR. Member Enrollment File Processing will be completed on 1/18/2023. Member Portal SOGI go live pushed to Q2 2024.

B. 2023 Barrier Analysis

Ide	entified Barriers	Impact of Barrier	Rationale for mitigating barrier	Progress	Next Steps	Progress
1)	Increase in grievances	Member experience Risk for quality of Language Assistance Program (LAP) services.	Fully support member language needs, monitor the effectiveness of LAP program and meet compliance requirements.	Continue to monitor cultural and linguistic (C&L) coded grievances and analyze how they impact patient care and delivery of LAP services. If a barrier is identified, C&L adjusts the process to mitigate the barriers. All discrimination grievances are reviewed by a specialized committee.	C&L conducts reviews on all C&L related grievances and conduct follow up as needed with provider level interventions. Trending and tracking of grievances will be done annually.	Continue to trend and track grievances on quarterly basis. An end of year report will be produced that identifies issues that may be acting as barrier to LAP services. Health Equity reviewed 551 C&L related grievances for 2023. There was an increase of 56 cases in comparison to 2022. Cultural cases totaled 342 for 2023. There was an increase of 30 cases in comparison to 2022. Linguistic cases totaled 209. There was an

Identified Barriers	Impact of Barrier	Rationale for	Progress	Next Steps	nent Year End Report Progress
		mitigating barrier	lingitist		°
2) Covered CA Race, Ethnicity and Language (REL) data capture and Medicare REL data capture	Compliance Risk Passive Risks: NCQA, CMS, DMHC, CDI and ACA Decreased ability to improve member outcomes.	Meet compliance requirements and understand member cultural needs.	Continue to monitor progress on Cov CA REL data and guide/support fixes for correct data ingestion and accurate cross walking of R/E categories including overwrite issue in UMV.	Continue to monitor and QA/acceptance test Covered CA REL data and UMV fix. Continue to quality check CH&W and Medicare/DSNP member REL data.	increase of 28 cases in comparison to 2022. Health Equity plans to continue to monitor and analyze the cases. Health Equity will identify and implement any adjustments that need to be made to the LAP program to prevent future occurrences if barriers are found. Ongoing efforts and coordinate with IT and on exchange plan management team.
3) Neighborhood Initiative project formerly the Quest Project to improve HEDIS measures required a shift in community- based partner, target population, HEDIS measures, and location.	Decreased ability to proactively impact HEDIS measures	Establishing a community-based partners in LA County to support development of place and topic specific community advisory groups for disparity projects to coordinate community assets and support member outcome improvement.	Health Net launched a neighborhood, placed-based health equity initiative in July 2023 in Los Angeles with Westside Infant Family Network, a local CBO. The project will focus on pediatric health disparities in the Black population. By the end of 2023, a barrier analysis consisting of a membership disparity data analysis, a literature review, and focus groups and listening sessions with members, community, and providers was completed.	Interventions will be designed based on the barrier analysis aimed at the provider, community, and member levels and will launch along with the neighborhood equity council in 2024.	Community-based partner search and selection is completed. Initiative focus is determined to focus on African Americans living in SPA 6 (service provider area) in Los Angeles County. Childhood immunizations CIS-10 Combo and well child visits.
4) Implementation and scaling of closed loop referrals on Community Connect, findhelp. Less than 50% of referrals by Health Net staff were closed.	Decreased ability to improve member social needs and social risks. Passive risk: NCQA	Fully understand member social needs and risks by ensuring referrals on the Community Connect program are updated with a conclusive status (closed loop).	Continue to track referrals on a quarterly basis. By ensuring the referral status is closed, all groups, based on REL, can remain updated and tracked in findhelp to better stratify referrals and referral statuses by demographic options.	Conducting training to internal staff, members, and providers on the closed loop referral process. Piloting closed loop referral process with Care Management and Member Connections Departments for Sacramento County to establish a tracking and monitoring process.	Continue to produce analytics and segmented utilization reports to ensure that 50% of referrals by HN staff are closed within each quarter. Between January to June of 2023, 497 out of 1,535 referrals were closed (32.4%) and between July to December of 2023, 618 out of 2,592 referrals were closed (23.8%). The Health Equity Department plans on reaching out to internal departments to ensure all

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		Time consuming process to manually combining referral data with member demographics to stratify and produce reporting.	Combining referral activity internally to produce joint reporting instead of relying on manual process.		referrals are updated and closed.