



Health care you can count on.
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CAC Selection Committee Packet

**Tuesday, May 26, 2026
12:00 pm to 1:00 pm**

Virtual Meeting

AGENDA

CAC Selection Committee Meeting

May 26, 2026
12:00 p.m. – 1:00 p.m.

Video Conference Call

Oakland/Hayward Conference Room
1240 S. Loop Road
Alameda, CA 94502

PUBLIC COMMENTS: Public Comments can be submitted for any agenda item or for any item not listed on the agenda, by mailing your comment to: “Attn: Clerk of the Board,” 1240 S. Loop Road, Alameda, CA 94502 or by emailing the Clerk of the Board at bgonzalez@alamedaalliance.org. You may attend meetings in person or by computer by logging in to the following link: [Click here to join the meeting](#). You may also listen to the meeting by calling in to the following telephone number: [1-510-210-0967](tel:1-510-210-0967) [conference id 97045555#](#). If you use the link and participate via computer, you may use the chat function, and request an opportunity to speak on any agenda item, including general public comment. Your request to speak must be received before the item is called on the agenda. If you participate by telephone, please submit your comments to the Clerk of the Board at the email address listed above or by providing your comments during the meeting at the end of each agenda item. Oral comments to address the Board of Governors are limited to three (3) minutes per person. Whenever possible, the board would appreciate it if public comment communication was provided prior to the commencement of the meeting.

PLEASE NOTE: The Alameda Alliance for Health is making every effort to follow the spirit and intent of the Brown Act and other applicable laws regulating the conduct of public meetings.

1. CALL TO ORDER

A regular meeting of the Alameda Alliance for Health CAC Selection Committee will be called to order on May 26, 2026, at 12:00 PM in Alameda County, California, by Andrea Schwab-Galindo, Presiding Officer. This meeting is to take place by video conference call.

2. ROLL CALL

3. AGENDA APPROVAL OR MODIFICATIONS

4. INTRODUCTIONS

5. CONSENT CALENDAR

(All matters listed on the Consent Calendar are to be approved with one motion unless a member of the CAC Selection Committee removes an item for separate action. Any consent calendar item for which separate action is requested shall be heard as the next Agenda item.)

6. COMMITTEE BUSINESS

- a) REVIEW AND APPROVE CAC CHARTER UPDATES
- b) REVIEW AND APPROVE CAC MEMBERSHIP: TERMS OF SERVICE AND ATTENDANCE
- c) REVIEW AND APPROVE CAC MEMBER RECRUITMENT: CAC CANDIDATES

7. UNFINISHED BUSINESS

8. PUBLIC COMMENT

9. ADJOURNMENT

NOTICE TO THE PUBLIC

The agenda may also be accessed through the Alameda Alliance for Health's Web page at www.alamedaalliance.org

NOTICE TO THE PUBLIC

An agenda is provided for each CAC Selection Committee meeting. Please call the Clerk of the Board at 510-995-1207 for assistance or any additional information. Meeting agendas and approved minutes are kept current on the Alameda Alliance for Health's website at www.alamedaalliance.org.

An agenda is provided for each Committee meeting, which list the items submitted for consideration. Prior to the listed agenda items, the Committee may hold a study session to receive information or meet with another committee. A study session is open to the public; however, no public testimony is taken and no decisions are made. Following a study session, the regular meeting will begin at 3:00 PM. At this time, the Committee allows oral communications from the public to address the Committee on items NOT listed on the agenda. Oral comments to address the Committee are limited to three minutes per person. Staff Reports are available. To obtain a document, please call the Clerk of the Board at 510-995-1207.

Additions and Deletions to the Agenda: Additions to the agenda are limited by California Government Code Section 54954.2 and confined to items that arise after the posting of the Agenda and must be acted upon prior to the next CAC Selection Committee meeting. For special meeting agendas, only those items listed on the published agenda may be discussed. The items on the agenda are arranged in three categories. **Consent Calendar:** These are relatively minor in nature, do not have any outstanding issues or concerns, and do not require a public hearing. All consent calendar items are considered by the Committee as one item and a single vote is taken for their approval, unless an item is pulled from the consent calendar for individual discussion. There is no public discussion of consent calendar items unless requested by the Committee.

Public Hearings: This category is for matters that require, by law, a hearing open to public comment because of the particular nature of the request. Public hearings are formally conducted and public input/testimony is requested at a specific time. This is your opportunity to speak on the item(s) that concern you. If, in the future, you wish to challenge in court any of the matters on this agenda for which a public hearing is to be conducted, you may be limited to raising only those issues which you (or someone else) raised orally at the public hearing or in written correspondence received by the Committee at or before the hearing. **Committee Business:** Items in this category are general in nature and may require Committee action. Public input will be received on each item of Committee Business.


Public Input: If you are interested in addressing the Committee, you may submit comments on any agenda item or on any item not on the agenda, in writing via mail to “Attn: Alliance CAC Selection Committee,” 1240 S. Loop Road, Alameda, CA 94502; or through e-comment at bgonzalez@alamedaalliance.org. You may also provide comments during the meeting at the end of each topic.

Supplemental Material Received After The Posting Of The Agenda: Any supplemental writings or documents distributed to a majority of the Committee regarding any item on this agenda after the posting of the agenda will be available for public review. To obtain a document, please call the Clerk of the Board at 510-995-1207.

Submittal of Information by Members of the Public for Dissemination or Presentation at Public Meetings (Written Materials/handouts): Any member of the public who desires to submit documentation in hard copy form may do so prior to the meeting by sending it to the Clerk of the Board 1240 S. Loop Road Alameda, CA 94502. This information will be disseminated to the Committee at the time testimony is given.

Americans With Disabilities Act (ADA): It is the intention of the Alameda Alliance for Health to comply with the Americans with Disabilities Act (ADA) in all respects. If, as an attendee or a participant at this meeting, you will need special assistance beyond what is normally provided, the Alameda Alliance for Health will attempt to accommodate you in every reasonable manner. Please contact the Clerk of the Board, Brenda Gonzalez, at 510-995-1207 at least 48 hours prior to the meeting to inform us of your needs and to determine if accommodation is feasible. Please advise us at that time if you will need accommodations to attend or participate in meetings on a regular basis.

I hereby certify that the agenda for the Board of Governors was posted on the Alameda Alliance for Health’s web page at www.alamedaalliance.org on May 22nd, 2026, by 12:00 PM.



Clerk of the Board – Brenda Gonzalez

Community Advisory Committee (CAC) Selection Committee Meeting

May 26, 2026

Annual CAC Charter Review

CAC CHARTER Updates

Area	Description of Change(s)
Voting	<ul style="list-style-type: none"> • Removed requirement to have virtual attendance approved to vote.
Meeting Schedule and Special Participation	<ul style="list-style-type: none"> • Updated CAC member meeting participation to align with new Brown Act provisions and Senate Bill 707 and Welfare & Institutions Code requirements. • Added the following provisions: <ul style="list-style-type: none"> → CAC meetings may be held in person, virtually, and/or hybrid format. → CAC meetings will continue to be held in person based on operational/business needs and accessibility considerations. → CAC members are expected to participate regardless of meeting format.
Other Updates	<ul style="list-style-type: none"> • Minor grammar and formatting updates.

Review CAC Membership: Terms of Service and Attendance

CAC CHARTER - Membership Terms & Attendance

▷ CAC Charter-Membership Terms of Service and Attendance:

- ▶ “New CAC members will be invited to serve based on the membership criteria and with the approval of the CAC Selection Committee.
- ▶ The term of service for each CAC member shall be two (2) years.
- ▶ Committee members may serve more than two (2) terms, at the discretion of the CAC Selection Committee.
- ▶ The CAC Selection Committee may dismiss a member from the CAC if they do not attend at minimum two (2) quarterly meetings of the committee within one (1) year.
- ▶ Members shall notify the Alliance of expected absences.”

Last reviewed and approved by CAC SC on 09/05/2025

CURRENT MEMBERSHIP REVIEW

- ▶ Total CAC Members: 22
- ▶ Changes:
 - ▶ 1 CAC Member resigned in December 2025



CAC Membership Review: Representation Areas



1240 South Loop Road
 Alameda, CA 94502

**Community Advisory Committee (CAC) Membership:
 Representation Areas and Demographics**

Required Representation Areas:

Total CAC Members: 22

Representation Area (DHCS and DSNP Requirements)	Current Member Representation	Status
Adolescents and/or parents and/or caregivers of children	4	Met
Current/former foster youth and/or parents/caregivers	6	Met
Long-Term Support Services (LTSS) members/representatives	7	Met
Representatives from Indian Health Care Providers (IHCPs)	0	N/A for AAH, no IHCP in service area. (Provider from NAHC)
Providers	2	Met
Diverse/hard to reach populations:		Met
<ul style="list-style-type: none"> Ethnic and Racial Minorities 	22	Met
<ul style="list-style-type: none"> Seniors and Persons with Disability (SPD) 	9	Met
<ul style="list-style-type: none"> Limited English Proficient (LEP) 	2	Met Recruitment in progress
<ul style="list-style-type: none"> Older Adults 	6	Met
<ul style="list-style-type: none"> Populations with Developmental Disabilities 	3	Met
DSNP members/representatives	0	Recruitment in progress (There are 5 dual-eligible CAC members, but they are not enrolled in the Alliance D-SNP plan.)
Alliance members (overall, must be 51% or more)	13	Met (56.5%)

Note: Some members fill more than one representation area.

CAC Demographics:

	CAC %	All Membership %
Gender		
Female	78%	52%
Male	22%	48%
Age		
Age 00-18	5%	26%
Age 19-44	31%	38%
Age 45-64	32%	21%
Age 65+	32%	15%
Race/Ethnicity		
<i>Note: Some members represent more than one race/ethnicity</i>		
American Indian or Alaska Native	4%	.17%
Asian	17%	16%
Black/African American	48%	12%
Declined to State/Unknown	5%	17%
Hispanic/Latine	13%	30%
Native Hawaiian or Other Pacific Islander	0%	2%
Other	9%	16%
White	4%	7%
Preferred Language Spoken		
English	84%	60%
Spanish	6%	26%
Chinese	9%	7%
Other	5%	2%
Vietnamese	0%	2%
Farsi	0%	1%
Unknown	0%	2%

Current Membership Review: Member Attendance

CURRENT Membership Review: Member Attendance

▷ Situation:

- ▶ Seven (7) CAC members have missed two (2) or more CAC meetings since 2025.

▷ Background:

- ▶ Per the CAC Charter, “The CAC Selection Committee may dismiss a member from the CAC if they do not attend at minimum two (2) quarterly meetings of the committee within one (1) year.”
- ▶ Attendance is essential to maintaining committee participation and meeting quorum

▷ Assessment:

- ▶ Impact:
 - Meeting quorum for meetings
 - Delays in approving and voting of agenda items



Phone Number: **1.510.747.4500**
www.alamedaalliance.org

1240 South Loop Road
 Alameda, CA 94502

2025 – March 2026 CAC Member Attendance Overview

CAC Member	March 20, 2025	June 12, 2025	September 11, 2025	December 4, 2025	March 12, 2026	Total Non-Attendance
Mayra Matias Pablo						5/5
Sonya Richardson						5/5
Reginald Jackson	Not Yet a Member	Not Yet a Member				3/3
Jody Moore				X	X	3/5
Kerri Lowe				X	X	3/5
Valeria Brabata	X		X	X		2/5
MiMi Le		X	X		X	2/5
Lenore Harris	Not Yet a Member	Not Yet a Member	Not Yet a Member	X	X	0/2
Marilen Biding	Not Yet a Member	Not Yet a Member	Not Yet a Member	X	X	0/2
Shirley Tong	Not Yet a Member	Not Yet a Member	Not Yet a Member	X	X	0/2
Donna Griggsmurphy	Not Yet a Member	Not Yet a Member	Not Yet a Member	X	X	0/2
Len Turner	Not Yet a Member	Not Yet a Member	X	X	X	0/3

Donna Leonard-Pageau	Not Yet a Member	Not Yet a Member	X	X	X	0/3
Keith Pageau	Not Yet a Member	Not Yet a Member	X	X	X	0/3
Omoniyi Omotoso	Not Yet a Member	Not Yet a Member	X	X	X	0/3
Kenneth Porter	Not Yet a Member	Not Yet a Member	X	X	X	0/3
Robert Williams	Not Yet a Member	Not Yet a Member	X	X	X	0/3
Irene Garcia	X	X	X	X	X	0/5
Cecelia Wynn	X	X	X	X	X	0/5
Erika Garner	X	X	X	X	X	0/5
Tandra DeBose	X	X	X	X	X	0/5
Natalie Williams	X	X	X	X	X	0/5

CURRENT Membership Review: Member Attendance



▶ Additional member-specific background attendance details:

Member Name	Number of Missed Meetings (2025-2026)	2024 Attendance Notes	2025 Attendance Notes	2026 Attendance Notes
Sonya Richardson	5	<ul style="list-style-type: none"> On leave (Caregiving) No meetings attended 	<ul style="list-style-type: none"> On leave (Caregiving) No meetings attended 	<ul style="list-style-type: none"> On leave (Caregiving) No meetings attended Unable to contact
Mayra Matias Pablo	5	<ul style="list-style-type: none"> Attended one (1) meeting 	<ul style="list-style-type: none"> Limited availability due to work No meetings attended 	<ul style="list-style-type: none"> Non-attendance at the March meeting Unable to contact
Jody Moore	3	<ul style="list-style-type: none"> Attended four (4) out of the five (5) scheduled meetings 	<ul style="list-style-type: none"> Current and active BOG member. Received notifications when unable to attend meetings. Attended one (1) meeting 	<ul style="list-style-type: none"> In attendance at the March meeting Interested in still being a CAC member
Kerri Lowe	3	<ul style="list-style-type: none"> Became a member in December 2024 Attended two (2) meetings 	<ul style="list-style-type: none"> On maternity leave (March-September) and returned in December Attended one (1) meeting 	<ul style="list-style-type: none"> In attendance at the March meeting Interested in still being a CAC member

CURRENT Membership Review: Member Attendance



▶ Additional member-specific background attendance details:

Member Name	Number of Missed Meetings (2025-2026)	2024 Attendance Notes	2025 Attendance Notes	2026 Attendance Notes
Reginald Jackson	3	<ul style="list-style-type: none"> Not yet a member 	<ul style="list-style-type: none"> New CAC member Unable to contact 	<ul style="list-style-type: none"> Unable to contact
Mimi Le	2	<ul style="list-style-type: none"> Attended all five (5) scheduled meetings 	<ul style="list-style-type: none"> Attended two (2) of the four (4) meetings 	<ul style="list-style-type: none"> In attendance at the March meeting Interested in still being a CAC member
Valeria Brabata	2	<ul style="list-style-type: none"> Attended four (4) of the five (5) scheduled meetings 	<ul style="list-style-type: none"> Attended three (3) of four (4) meetings 	<ul style="list-style-type: none"> Non-attendance at the March meeting Interested in still being a CAC member

DISCUSSION/VOTE

- ▶ Committee discussion on presented information
- ▶ Consider a vote regarding members' continued participation on CAC

CAC Member Recruitment Update

CAC MEMBER RECRUITMENT UPDATE

▶ CAC Recruitment Workgroup

▶ Areas of Focus:

- ▶ Members: Younger Adults and Preferred Language is Non-English
 - Identified opportunities for outreach:
 - Youth Clinic
 - D-SNP recruitment overlap
 - Internal Member Services workflow to identify members
- ▶ D-SNP Members/Representatives
 - Identified opportunities for outreach:
 - D-SNP provider sites
 - Outreach to D-SNP enrollees

CAC Candidates

CAC CANDIDATES

CAC Candidate Name	Representation Area(s)
Diana Janeth Espinel	<ul style="list-style-type: none">• Alliance Medi-Cal Member• Limited English Proficiency (LEP) Representative
Darcell Davis	<ul style="list-style-type: none">• DSNP (Alliance Wellness) Member
Iris Abarca	<ul style="list-style-type: none">• DSNP (Alliance Wellness) Member• Limited English Proficiency (LEP) Representative
Nacerddine Azeb	<ul style="list-style-type: none">• DSNP (Alliance Wellness) Member• Limited English Proficiency (LEP) Representative
Tee Kimmons	<ul style="list-style-type: none">• DSNP (Alliance Wellness) Member
Jie Feng	<ul style="list-style-type: none">• Alliance Medi-Cal Member• Limited English Proficiency (LEP) Representative

Diana Janeth Espinel

CAC Candidate: **Diana Janeth Espinel**

▷ **Demographics**

- ▶ Age Group: 51-65
- ▶ Language: English/Spanish
- ▶ Race/Ethnicity: Hispanic
- ▶ Representation Area(s):
 - Alliance Medi-Cal Member/Community Advocate

▷ **Background:**

- ▶ Alameda Resident
- ▶ Over 6 years of experience working with families in need
 - Helps with the Medi-Cal application process as well

CAC Candidate: **Diana Janeth Espinel**

▶ **Additional Roles/What Can CAC Candidate Bring to the CAC:**

- ▶ Advocacy for families and member needs.
- ▶ Front-line experience with Alliance members.
- ▶ Strong connection to community.

▶ **Goals/Other Details:**

- ▶ Genuine interest in providing member's point of view on Alliance programs and services.
- ▶ Seeks to contribute lived experience and community perspective to the CAC.
- ▶ Advocates for health and language equity.

▶ **Reason(s) for Interest:**

- ▶ Advise the Alliance on how to best increase member access to care.
- ▶ Help the Alliance better serve members of different cultures and abilities.
- ▶ Passionate about improving access to equitable health care and ensuring community voices are heard.

Darcell Davis

CAC Candidate: Darcell Davis

▶ Demographics

- ▶ Age Group: 65+
- ▶ Language: English
- ▶ Race/Ethnicity: Black
- ▶ Representation Area(s):
 - Alliance D-SNP Member

▶ Background:

- ▶ Alameda resident
- ▶ Alliance member for about 6 years

CAC Candidate: **Darcell Davis**

- ▶ **Additional Roles/What Can CAC Candidate Bring to the CAC:**
 - ▶ Experience of having Alliance as health plan for over 6 years.
 - ▶ Can relate to members and speak on challenges that may be faced – particularly around transportation.

- ▶ **Goals/Other Details:**
 - ▶ Describes herself as a kind-hearted, giving and thoughtful person.
 - ▶ Genuine interest in providing member’s point of view on Alliance programs and services.
 - ▶ Seeks to contribute lived experience and community perspective to the CAC.

- ▶ **Reason(s) for Interest:**
 - ▶ Advise the Alliance on how to best increase member access to care.
 - ▶ Help the Alliance better serve members of different cultures and abilities.

Iris Abarca

CAC Candidate: Iris Abarca

▶ Demographics

- ▶ Age Group: 65+
- ▶ Language: English/Spanish
- ▶ Race/Ethnicity: Hispanic
- ▶ Representation Area(s):
 - Alliance D-SNP Member, Limited English Proficiency (LEP)

▶ Background:

- ▶ Retired
- ▶ Fluent in both, English and Spanish
- ▶ Education in Business Administration, Accounting, and Liberal Arts

CAC Candidate: Iris Abarca

- ▶ **Additional Roles/What Can CAC Candidate Bring to the CAC:**
 - ▶ Advocacy for members who do not speak English.
 - ▶ Commitment to help provide a voice for Limited English Proficient (LEP) members.

- ▶ **Goals/Other Details:**
 - ▶ Interested in improving health care access for LEP members.
 - ▶ Motivated to address disparities in quality of care linked to language differences
 - ▶ Aims to support clearer communication and understanding between members and providers

- ▶ **Reason(s) for Interest:**
 - ▶ Advise the Alliance on how to best increase member access to care.
 - ▶ Help the Alliance better serve members of different cultures and abilities.

Nacerddine Azeb

CAC Candidate: **Nacerddine Azeb**

▶ **Demographics**

- ▶ Age Group: 65+
- ▶ Language: Arabic, French, and English
- ▶ Race/Ethnicity: Algerian
- ▶ Representation Area(s):
 - Alliance D-SNP Member, Limited English Proficiency (LEP)

▶ **Background:**

- ▶ Trilingual
- ▶ Grew up in North Africa
- ▶ Advocate for holistic, herbal medicine

CAC Candidate: **Nacerddine Azeb**

▶ **Additional Roles/What Can CAC Candidate Bring to the CAC:**

- ▶ Multicultural (North African) perspective
- ▶ Trilingual communication skills
- ▶ Insight on cultural influences in healthcare decisions
- ▶ Strong advocate for members with non-Western health practices

▶ **Goals/Other Details:**

- ▶ Values a holistic approach to health, including the use of herbal and natural remedies
- ▶ Interested in ensuring members feel heard, respected, and not judged for their health beliefs or practices

▶ **Reason(s) for Interest:**

- ▶ Advise the Alliance on how best to increase member access to care.
- ▶ Give a member's point of view on Alliance programs and services.
- ▶ Help the Alliance better serve members of different cultures and abilities.
- ▶ Inform the Alliance about member health needs.

Tee Kimmons

CAC Candidate: Tee Kimmons

▶ Demographics

- ▶ Age Group: 51-65
- ▶ Language: English
- ▶ Race/Ethnicity: Multiracial – Asian & Black
- ▶ Representation Area(s):
 - Alliance D-SNP Member

▶ Background:

- ▶ Patient and clinic perspective
- ▶ Nonprofit leadership experience
- ▶ Insight on health care gaps

CAC Candidate: Tee Kimmons

- ▶ **Additional Roles/What Can CAC Candidate Bring to the CAC:**
 - ▶ Nonprofit leadership supporting at-risk populations
 - ▶ Experience connecting individuals to mental health, Medicare, housing, and rehabilitation services
 - ▶ Strong cross-agency collaboration background
- ▶ **Goals/Other Details:**
 - ▶ Aims to support at-risk populations through coordinated care experience/insight
 - ▶ Seeks to promote accessible, community-informed services
- ▶ **Reason(s) for Interest:**
 - ▶ Advise the Alliance on how best to increase member access to care.
 - ▶ Give a member's point of view on Alliance programs and services.
 - ▶ Help the Alliance better serve members of different cultures and abilities.
 - ▶ Inform the Alliance about member health needs.

Jie Feng

CAC Candidate: **Jie Feng**

▶ **Demographics**

- ▶ Age Group: 51-65
- ▶ Language: Mandarin
- ▶ Race/Ethnicity: Asian
- ▶ Representation Area(s):
 - Alliance Medi-Cal Member

▶ **Background:**

- ▶ Patient perspective
- ▶ Insight on complex courses of treatment

CAC Candidate: Jie Feng

- ▶ **Additional Roles/What Can CAC Candidate Bring to the CAC:**
 - ▶ Mandarin-speaking
 - ▶ Lived experience with complex health needs
 - ▶ Strong member advocate
- ▶ **Goals/Other Details:**
 - ▶ Aims to Improve care based on lived experience
 - ▶ Seeks to represent older adult and Mandarin-speaking members
- ▶ **Reason(s) for Interest:**
 - ▶ Advise the Alliance on how best to increase member access to care.
 - ▶ Give a member's point of view on Alliance programs and services.
 - ▶ Help the Alliance better serve members of different cultures and abilities.
 - ▶ Inform the Alliance about member health needs.

Thank you.

Questions?





ALAMEDA ALLIANCE FOR HEALTH COMMUNITY ADVISORY COMMITTEE (CAC) CHARTER

Purpose

The purpose of the Community Advisory Committee (CAC) is to provide a link between Alameda Alliance for Health (Alliance) and the community. The policy/scope, structure, and functions of the CAC, as outlined in this charter, shall be in accordance with the Alliance's Department of Health Care Services (DHCS) contract. In addition, pursuant to Title 22, California Code of Regulations, Section 53876(c), the CAC reflects the Alliance's member population and advises the Alliance on the development and implementation of policies and procedures that affect cultural and linguistic access, quality, and health equity. Per Title 42 Code of Federal Regulations (CFR) section 438.110 (b), the CAC includes at least a reasonably representative sample of Long Term Supports and Services (LTSS) population within the CAC.

Policy/Scope

The Alliance maintains a diverse CAC as a part of its implementation and maintenance of member and community engagement with stakeholders, community advocates for hard-to-reach populations, providers and Members. The CAC encourages Alliance members and others to participate in public policy of the health plan to ensure the comfort, dignity, and convenience of members. The Alliance leverages the CAC as a forum to better engage Members in the care they receive.

The CAC carries out, but is not limited to, the following duties:

- a) Identify and advocate for preventive care practices to be used by the Alliance.
- b) Develop and update cultural and linguistic policy and procedures related to cultural competency issues, educational and operational issues affecting seniors, people who speak a primary language other than English, and people who have a disability.
- c) Advise on Alliance member and provider-targeted services, programs, and trainings.
- d) Provide and make recommendations about the cultural appropriateness of communications, partnerships, and services.

- e) Provide recommendations and feedback on the diversity, equity, and inclusion training program.
- f) Inform and validate the development of the Alliance’s Community Reinvestment Plans.
- g) Provide input, advice, and making recommendations to address Quality of Care, Health Equity, Health Disparities, Population Health Management (PHM), children services, the Community Health Assessments/Community Health Improvement Plans (CHAs/CHIPs), including how to use findings from the CHAs/CHIPs to influence Alliance strategies and workstreams related to the Department of Healthcare Services Bold Goals, wellness and prevention, health equity, health education, and cultural and linguistic needs.
- h) Provide input and advice, including, but not limited to, the following:
 - i. Culturally appropriate services or program design
 - ii. Priorities for health education and outreach program
 - iii. Member satisfaction survey results
 - iv. Plan marketing materials and campaigns
 - v. Communication of needs for Network development and assessment
 - vi. Community resources and information
 - vii. PHM
 - viii. Quality
 - ix. Carved out services
 - x. Development of covered, Non-Specialty Mental Health Services (NSMHS) outreach and education plan.
 - xi. Input on Quality Improvement and Health Equity and the Population Needs Assessment
 - xii. Reforms to improve health outcomes, accessibility of services, and coordination of care for Members
 - xiii. Inform the development of the provider manual

The Alliance shall ensure the fulfillment of the following requirements in accordance with Title 28, California Code of Regulations, Section 1300.69.:

- a) The CAC shall receive information from the Alliance on public policy issues, including financial information and data on the nature and volume of grievances and their disposition.
- b) The CAC’s activities and recommendations shall be regularly reported to the Alliance Board of Governors (BOG) at board meetings.

Structure

1) CAC Selection Committee:

In consultation with the Alliance's Chief Health Equity Officer, the Alliance convenes a CAC Selection Committee, tasked with selecting members of the CAC, providing the recommendations and/or replacing former CAC members whose position(s) have been vacated that reflect the general Medi-Cal, Group Care and Alameda Alliance Wellness member populations, hard to reach populations, and those that experience health disparities in Alameda County. The CAC Selection Committee will report to the Alliance Board of Governors.

The CAC Selection Committee shall maintain sufficient membership to achieve the goal of selecting a diverse and reasonably representative CAC and include representation in the following areas:

- a) Persons who sit on the Alliance BOG
- b) Safety-Net Providers (including, Federally Qualified Health Centers/Rural Health Centers)
- c) Indian Health Care Providers (IHCP), as applicable
- d) Behavioral Health Providers
- e) People who represent Regional Centers
- f) Local Education Agencies
- g) Dental Providers
- h) Community Based Organizations
- i) Home and Community Based Service Providers
- j) Persons who are representatives of Alameda County.

2) Membership of CAC:

The CAC shall consist of voting members (including the chair and vice-chair) and regular/ad hoc guests of the committee. Membership on the committee will be changed as the Alliance's beneficiary population changes.

The CAC membership and representation must reasonably reflect the Medi-Cal, Group Care, and Alameda Alliance populations in Alameda County, and representation must include the following:

- a) General population of the Alliance members
- b) Adolescents and/or parents and/or caregivers of children
- c) Current/former foster youth and/or parents/caregivers of current/former foster youth
- d) Members who receive Long-Term Support Services and/or their representatives

- e) Representatives from Indian Health Care Providers (IHCP)
- f) Diverse and hard-to-reach populations (with emphasis on persons who are representative of or serving populations that experience health disparities, such as those with limited English proficiency (LEP), diverse racial and ethnic backgrounds, genders, gender identity, and sexual orientation and physical disabilities).
- g) Members who receive Enhanced Care Management (ECM) and Community Support Services (CS) as appropriate.
- h) At least 51% of the committee shall be Alliance members (and/or the parents/guardians of Alliance members who are minors or dependents).
- i) At least 4 seats of the committee shall be Alliance Wellness Dual Eligible Special Needs (D-SNP) members and/or their caretakers.

The Alliance may establish a CAC sub-committee comprised exclusively of Members to ensure Member voices are paramount.

To ensure the CAC membership is representative of the communities in the Alliance service areas, the Alliance shall complete and submit annually to DHCS, an Annual CAC Member Demographic Report by April 1st of each year. The Alliance shall also complete and submit annually to DHCS the CAC charter and membership by March 1st of each year.

If a CAC member resigns, is asked to resign or is unable to serve on the CAC, the Alliance must replace the vacant seat within 60 calendar days. All new CAC candidates must follow the selection process with the CAC Selection Committee.

If a CAC member has a change in the population they represent (e.g., Alliance CAC member is no longer an Alliance member), the CAC Selection Committee will determine within 60 calendar days whether it is appropriate for the individual to continue serving on the CAC and/or whether the Alliance needs to appoint a replacement to maintain representation for that population area.

All CAC members shall complete a Conflict of Interest (COI) Form relating to any financial or other relationship to an Alliance competitor. A member's links with outside interests shall not impair the responsible exercise of his or her duties as a CAC member.

The CEO shall not vote at CAC meetings.

At least one (1) CAC member will serve on the Alliance BOG. The Alliance Chief Executive Officer (CEO) will select CAC members to serve on the BOG.

3) Regular/Ad-hoc Guests (non-voting):

Regular/subcommittee guests shall not be counted towards a quorum or be subject to term limits. Non-voting guests may include:

- a) CAC candidates
- b) Any persons from the public
- c) Guests who will present information being discussed at a meeting

4) Officers of the CAC:

Officers of the CAC shall consist of the following:

- a) Chair
- b) Vice-Chair.

The CAC Chair and Vice-Chair shall be recommended by the CAC members by majority vote and announced in an open session meeting.

If both the Chair and Vice-Chair of the CAC are absent or unable to act at a meeting where a quorum is present, the Committee will select one of the attending committee members or Alliance staff to act as Chair pro tempore, with all the authority appurtenant thereto, if the Chair has not selected someone to preside at the meeting.

5) Meeting Agendas and Minutes:

- a) CAC meetings are held at least quarterly.
- b) CAC meeting agendas shall be developed with input from CAC members.
- c) At least 72 hours prior to a regular meeting, an agenda and meeting materials shall be posted on the Alliance website in a centralized location.
- d) The agenda shall be posted at the main entrance of the Alliance's principal offices and/or any other location freely accessible to members of the public.
- e) An agenda and meeting materials, including minutes of the previous meeting, shall be sent to the CAC members at the same time they are posted on the website.
- f) Meeting minutes shall be posted on the Alliance website and submitted to DHCS no later than 45 calendar days after each meeting.
- g) The minutes, including any CAC findings and/or activities are reported to the Quality Improvement Health Equity Committee (QIHEC).

6) Non-Agenda Items:

- a) Prior to discussing a matter which was not previously placed on an agenda, the item must be publicly identified so that interested members of the public can monitor or participate in the consideration of the item in question.
- b) The CAC may discuss a non-agenda item at a regular meeting if, by simple majority vote, the CAC determines that the matter in question constitutes an emergency pursuant to §54956.5. (§ 54954.2(b)(1).) or that it should be discussed at a future meeting.

7) Voting:

- a) A simple majority (50% of voting members + 1) shall mean approval of the proposed action.
- b) Absent CAC members may not vote by proxy.
- c) Electronic voting may be an option if attending a regular meeting, virtually is an option for a meeting attendance ~~and approved~~.

8) Quorum:

- a) A quorum, defined as a simple majority (50% + 1) of voting members, must be present for the CAC to vote on any matter.
- b) If a quorum is not met at a regular scheduled meeting, the meeting shall continue as informational only.

9) Meeting Schedule and Special Participation:

- a) The Alliance shall hold regular scheduled CAC meetings at least four (4) times per year.
- b) ~~The Alliance makes the regular scheduled~~ CAC meetings are open to the public.
- c) In accordance with Brown Act provisions, including applicable sections of Senate Bill 707, and applicable as a health authority formed pursuant to Welfare & Institutions Code requirements, committee meetings may be conducted:
 - In person
 - Virtually via teleconference
 - In a hybrid format
- d) ~~The Alliance is permitted to conduct teleconference meetings while remaining Brown Act compliant.~~
~~In-person meetings are no longer required for Brown Act compliance, however, the~~The CAC will continue to hold in-person meetings as to be determined ~~appropriated~~ based on:
 - Operational and business needs

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e) CAC members are expected to actively participate in meetings, regardless of meetingthe meeting format.

e)f) The Alliance may request special participation from the CAC members to provide input on topics such as, but not limited to, advancing member targeted efforts.

10) Public Comment:

- a) Every agenda for a regular meeting shall provide an opportunity for members of the public to directly address the CAC on any agenda items.
- b) Where a member of the public raises an issue which has not yet come before the committee, the item may be briefly discussed and put on the next meeting agenda for further discussion, but no action may be taken at that meeting.

Membership Terms of Service and Attendance

New CAC members will be invited to serve based on the membership criteria and with the approval of the CAC Selection Committee. The term of service for each CAC member shall be two (2) years. Committee members may serve more than two (2) term, at the discretion of the CAC Selection Committee.

The CAC Selection Committee may dismiss a member from the CAC if they do not attend at minimum two (2) quarterly meetings of the committee within one (1) year. Members shall notify the Alliance of expected absences.

Alliance Support

The Alliance will provide the following to the CAC:

- a) Adequate staff support for committee meetings and activities.
- b) Maintenance of meeting minutes and records.
- c) Organizational updates and relevant materials.
- d) Interpretation: The Alliance will arrange for a bilingual interpreter to assist CAC members whose preferred language is not English. CAC members shall make a request for an interpreter at least 72 hours before a regularly scheduled meeting.
- e) Accommodations: The CAC meeting location is wheelchair accessible. CAC members may call to request agendas and/or handouts in an alternative format, or request any other disability-related accommodation needed to take part in the meeting. CAC members shall make a request for accommodation at least 72 hours before a regular scheduled meeting.

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- f) Stipend: CAC members shall receive a stipend for each meeting attended. CAC members may choose not to accept the stipend.
- g) Transportation: The Alliance covers transportation costs. Members who cannot use regular transit because of a disability or disabling health conditions may request assistance from the Alliance to arrange for services from East Bay Paratransit.
- h) Childcare: CAC members will be reimbursed for the cost of childcare. A reimbursement will be sent once a childcare invoice has been received and confirmed.
- i) The Alliance will provide support for CAC candidates to attend one (1) meeting prior to becoming a member for the purpose of observation.
- j) Sufficient resources, within budgetary limitations, to support CAC activities, member outreach, retention, and support.