



16, 202COMMUNITY ADVISORY COMMITTEE (CAC) Special Meeting

Thursday, December 16, 2024, 12:00 PM – 1:30 PM

Committee Members	Role	Present
Natalie Williams	Alliance Member	
Valeria Brabata Gonzalez	Parent of Alliance Member	
Cecelia Wynn	Alliance Member	x
Tandra DeBose	Community Advocate	x
Irene Garcia	Alliance Member	x
Erika Garner	Alliance Member	x
Jody Moore	Parent of Alliance Member	
Sonya Richardson	Alliance Member	
MiMi Le	Alliance Member	x
Mayra Matias Pablo	Parent of Alliance Member	
Amy Sholinbeck	Asthma Coordinator, Alameda County Asthma Start	
Irene Garcia	Alliance Member	x
Roxanne Furr	Alliance Member	
Kerrie Lowe	Social Worker, Alameda County Public Health Department (ACPHD)	x

Other Attendees	Organization	Present
Melodie Shubat	CHME	x
Kathrine Shea	Department of Health Care Services	x
Jesus Verduzco	ACPHD	x
Preston Poon	Department of Health Care Services	x

Alliance Staff Members	Title	Present
Matthew Woodruff	Chief Executive Officer	x
Michelle Lewis	Senior Manager, Communications & Outreach	x
Alejandro Alvarez	Community Outreach Supervisor	x
Thomas Dinh	Outreach Coordinator	
Linda Ayala	Director, Population Health and Equity	x
Mao Moua	Manager, Cultural and Linguistic Services	x
Steve Le	Outreach Coordinator	x
Isaac Liang	Outreach Coordinator	x
Rosa Carroodus	Disease Management Health Educator	x
Lao Paul Vang	Chief Health Equity Officer	x

Gil Duran	Manager, Population Health and Equity	x
Emily Erhardt	Population Health and Equity Specialist	x
Gabriela Perez-Pablo	Outreach coordinator	
Michelle Stott	Senior Director, Quality Improvement	x
Mara Macabinguil	Interpreter Services Coordinator	x
Katrina Vo	Senior Communications and Content Specialist	x
Misha Chi	Health Education Coordinator	x
Farashta Zainal	Quality Improvement Manager	x
Loc Tran	Manager, Access to Care	
Jorge Rosales	Manager, Case Management	
Anne Margaret Macsiljig	Quality Engagement Coordinator	
Taumaog Gaoteote	Director, Diversity, Equity, Inclusion	
Donna Carey	Chief Medical Officer	x
Peter Currie	Senior Director of Behavioral Health	x
Yen Ang	Director of Health Equity	
Taumaog Gaoteote	Director of Diversity, Equity, and Inclusion	
Jessica Jew	Population Health and Equity Specialist	x
Jennifer Karmelich	Director of Quality Assurance	
Monique Rubalcava	Health Education Specialist	x
Stephen Smyth	Director of Compliance and Special Investigations	x
Andrea DeRochi	Behavioral Health Manager	x
Sean Pepper	Compliance Special Investigator	x
Debbie Spray	Manager, IT Governance and Incident Management	x
Yemaya Teague	Senior Analyst of Health Equity	x
Karina Rivera	Senior Manager, Public Affairs and Media Relations	x
Cecilia Gomez	Senior Manager, Provider Services	x
Oscar Macias	Housing Manager	x
Stephen Smyth	Director of Compliance and Special Investigations	x
Krystaniece Wong	Regulatory Compliance Specialist	x

AGENDA ITEM SPEAKER	DISCUSSION	ACTION	FOLLOW-UP
1. WELCOME AND INTRODUCTION			
T. Debose	T. Debose called the meeting to order at 12:03 pm. Roll call was taken of the CAC members and a quorum was not established.	None	None

	An introduction of staff and visitors was completed.		
2. APPROVAL OF MINUTES AND AGENDA – APPROVAL OF AGENDA			
T. Debose	The CAC was unable to approve the agenda as a quorum was not established at the time of roll call.	None	None
3. a. NEW BUISINESS – ALLIANCE LOGO AND DSNP NAME FEEDBACK			
M. Lewis K. Rivera	Michelle Lewis, Senior Manager of Communications and Outreach introduced the video which presents the proposed new logo for the Alliance and proposed names for the upcoming D-SNP product. - The video was played, and a QR code for a survey was displayed at the end. - The QR code did not work, however, the online survey link worked which could be accessed by the virtual attendees. In-person attendees were asked to complete the paper survey. ❖ <i>Member Feedback-T. Debose: The shapes were odd. The arch was shaped like a home and the circle encompassed everything. While it looks colorful, the different shapes don't seem to represent people. Maybe do something with the shapes so they mean something. The 4 shapes look weird to me.</i> ➤ <i>Response-K. Rivera: Part of it represents diversity of the community, they look like two little people. The pictorial marks and colors represent the different lines of service.</i> ❖ <i>Member Feedback-T. Debose: The ball on top of the house is weird. I like the colors.</i> ➤ <i>Response-M. Lewis: We will take back to the team these questions about why these shapes were selected.</i> ❖ <i>Member Feedback: M. Le: First thing that comes to mind is that service is for everybody. Different backgrounds, races, and ethnicities. Services are for all.</i> ❖ <i>Member Feedback- C. Wynn: Are there no more logo choices? I just wish there were more choices.</i>	None	M. Lewis and K. Rivera to take back to the Alliance team the questions around the new logo-why the shapes were selected.

	➤ <i>Response-M. Lewis: No, there are no other choices at this time.</i> ❖ <i>Member Feedback-T. Debose: As far as the DSNP name, Well+ is trendy, but for most people, they want it to be straightforward, Wellness.</i> ❖ <i>Member Feedback-M. Le: + is recognizable, + means better.</i> • M. Lewis thanked the CAC members for the feedback and acknowledged T. Debose's background in marketing. • The paper surveys were collected by Alliance staff.		
3. b. NEW BUISINESS – PROVIDER MANUAL			
C. Gomez M. Lewis	Cecilia Gomez, Senior Manager of Provider Services, presented on the Alliance Provider Manual. • Current: The Alliance Provider has been available for many years now. It includes important information such as services, benefits, requirements, and contacts for network providers and facilities. • Future: The Alliance will review the Provider Manual with CAC for suggestions or feedback. • Requirements: ○ Must be reviewed on an annual basis. ○ Must solicit feedback from contractor committees, including CAC. ○ Provider Manual was reviewed by the Quality Improvement Health Equity Committee (QIHEC) on 11/15/24. • Plan staff who are Subject Matter Experts (SMEs) are consulted to make sure information is accurate. • Discussion: How can the Alliance improve information that is available in our Provider Manual? ❖ <i>Member Feedback-T. Debose: The updated version looks really good. The layout is clear and straightforward, nothing to completely change.</i> • M. Lewis: The provider manual is available online. Similar to the member handbook, we do have a printed version. ➤ <i>Member Question-T. Debose: Does the 11/15/24 have the most recent changes?</i>	None	None

	➤ <i>Response-M. Lewis: Yes</i> ❖ <i>Member Comment-T. Debose: You did a great job.</i> ➤ <i>Member Question: Will the Care Books be incorporated?</i> ➤ <i>Response-M. Lewis: No, they will not be.</i> ➤ <i>Response-L. Ayala: But there is a connection, the members get the Care Books, and the Provider Manual goes to the providers. The Provider Manual provides information to providers on health education information like the care books, available to members, as well as immunizations are required, and how to document for billing.</i>		
3. c. NEW BUISINESS – NON-SPECIALTY MENTAL HEALTH SERVICES			
A. DeRochi	Andrea DeRochi, Behavioral Health Manager presented on Non-Specialty Mental Health Services (NSMHS). • Problem: mental health symptoms are undertreated, which is a problem across the country, but worse in the Medi-Cal population. • Solution: Senate Bill 1019 requires plans to develop and conduct outreach to members and primary care providers regarding covered non-specialty mental health services. • Requirements: ○ Align with cultural and linguistic appropriateness. ○ Apply best practices in stigma reduction. ○ List more than one point of contact for member access. ○ Involve stakeholder engagement, including the CAC. • Discussion: How can the Alliance encourage more members to use mental health services? ➤ <i>Member Question: T. Debose: How easy is it to access information and to talk to someone if they have a problem?</i> ➤ <i>Response-A. DeRochi: It is very easy to call Member Services. We also have a Behavioral Health team doing referrals. County Behavioral Health is also available. The challenge is capacity, identifying who has appointments available. We have care managers and coordinators. Primary care providers can also refer.</i> ➤ <i>Member Question-T. Debose: What happens after the first contact? Do you help them get connected?</i>	None	None

	➤ <i>Response-A. DeRochi: We ask them if they want assistance in connecting with a provider. The challenge is that members don't usually call us back after they are connected to care.</i> ➤ <i>Member Question-T. Debose: Do you do anything to make sure that the member gets connected because a person with mental health issues may not be as consistent. If you leave it to them, they may not follow through.</i> ➤ <i>Response-A. DeRochi: People want different things; some people prefer more help than others.</i> ➤ <i>Guest Question-J. Verduzco: Do you have information that we can provide? We will be happy to share.</i> ➤ <i>Response-A. DeRochi: We are developing promotional materials right now. We have a large network of mental health providers, largely telehealth. Our goal is to engage more providers to do in-office services.</i> ➤ <i>Member Question-K. Lowe: Can you clarify the self-referral process? What happens if they are pending PCP assignment?</i> ➤ <i>Response-A. DeRochi: PCP referral is not required, no prior authorization is needed, and there is also no need for PCP assignment. We complete assessments over the phone.</i> ❖ <i>Staff Comment- M. Lewis: We have the No Wrong Door messaging to let the members know that there is no wrong door to access mental health services.</i> • Discussion: Do you think people respond to social media? ❖ <i>Guest Comment-J. Verduzco: We definitely use social media (at Alameda County Public Health Department (ACPHD), we partner with wellness influencers.</i> ❖ <i>Member Comment- E. Garner: I don't follow ACPHD social media, I follow more community-based organizations. We don't usually know unless we ask.</i> • Discussion: What do you think about QR codes and posters?		
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	❖ <i>Member Feedback- E. Garner: I hate automated systems. It works best when my doctor refers me. I'm not good with the internet, I get frustrated, a phone call is better for me.</i> ➤ <i>Member Question-T. Debose: Have you partnered with a sports team to take away stigma from mental health?</i> ➤ <i>Response-M. Lewis: No, we have not worked with sports teams, but I know they make public service announcements (PSAs) all the time. In the past, we were contacted by the Warriors for a health fair night, but that was before COVID. We now have digital well-child ads at the DMV.</i>		
4. a. CAC BUSINESS – CAC SELECTION COMMITTEE			
L. Ayala	Linda Ayala, Director of Population health and Equity provided updates on the CAC Selection Committee (CAC SC). • CAC SC: new committee that makes sure that CAC represents our community. • 1st meeting was held on 09/30/2024. • Kerri Lowe, Alameda County Public Health Department was approved as a new CAC member. • CAC SC Guidance: The CAC SC provided guidance on the following CAC member recruitment focus areas: ○ Limited English Proficient (LEP) ○ Men ○ Ages 19-44	None	None
4. b. CAC BUSINESS – CAC MEMBERSHIP RECRUITMENT			
L. Ayala	Linda Ayala, Director of Population Health and Equity provided updates on CAC Membership Recruitment. • The Alliance has connected and presented information about the CAC to the following groups: ○ First 5 Alameda County Fathers Corps: ▪ Father-Friendly Provider Network Members (FFPN) on 11/15/2024. ▪ Healthy Relationships Learning Community (HRLC) on 11/21/2024. ○ Health and Human Resource Education Center (HHREC): ▪ We received interest from the Senior Program Manager. ○ Alameda County Public Health Fatherhood Initiative:	None	L. Ayala to explore the organizations suggested for recruitment.

	▪ We received interest to support recruitment and connect the Alliance with interests. ➤ <i>Member Question-E. Garner: How are you outreaching?</i> ➤ <i>Response-L. Ayala: It is easier through community organizations. I believe we also put it in the newsletter.</i> ➤ <i>Response-M. Moua: Yes, we did. We now have an updated flyer that we can share. Also, we would like to leverage CAC members support and you can refer interests to us.'</i> ❖ <i>Guest Comment: I can connect you with Brighter Beginnings, a community-based organization in the Latino community.</i> ❖ <i>Member Feedback-C. Wynn: Health and Human Resource Education Center (HHREC) is another good organization to reach out. Black Men Speak came out of it.</i> ❖ <i>Staff Feedback-M. Lewis: It would also be good to reach out to Peralta Colleges, it would be good to have their voices as well. We can also potentially explore holding our meetings on weekends as not everyone can attend on weekdays.</i> ❖ <i>Member Feedback-E. Garner: It would be good to reach out to Black Infant health as well. They have a connection to the Men's Group.</i> ❖ <i>Staff Feedback-M. Lewis: Churches as well.</i>		
5. ALLIANCE CARE BAGS			
M. Lewis	Michelle Lewis, Senior Manager of Communications and Outreach presented on the Alliance Care Bags. • This project was started by CAC members, Ms. Mello and Ms. Williams, a small and thoughtful thing that we do as helpers in the community. • The Alliance created 5,000 care bags this year. The bags include the following items: ○ socks ○ masks ○ first aid kit	None	None

	○ hand sanitizer ○ personal hygiene items ○ non-perishable food items. • The bags given to the shelters do not contain non-perishable food items as it causes issues for them. ➤ <i>Member Question-E. Garner: Why do shelters not like non-perishables?</i> ➤ <i>Response-M. Lewis: Community partners usually reach out to us for care bags, but they request no food items as it causes issues, such as rodents when they are storing them.</i> ➤ <i>Member Question-E. Garner: Is there an updated shelter list? And does it include family size?</i> ➤ <i>Response-M. Lewis: Yes, the county list is updated yearly. Some places do not allow children, and we include that information there. We also recommend calling 211 as they can look for shelter beds.</i> • 2024 Care Bag Distribution: ○ Alliance CAC members ○ Local Alameda County shelters ○ Local churches ○ Street medicine teams ○ Warming centers ❖ <i>Staff Comment-A. Alvarez: The Alliance Outreach team gathered in conference rooms to assemble them, 120 minutes total spent.</i> ❖ <i>Member Comment-T. Debose: I would like to share some with my church.</i> <i>Staff Response-M. Lewis: Of course, we can get those ready for you.</i>		
6. OPEN FORUM			
	❖ <i>Member Comment-M. Le: Thanks for this meeting, we got to finish the items we were not able to cover during the last meeting.</i>	None	None
7. ADJOURNMENT			

T. Debose	Tandra Debose, CAC Vice Chair adjourned the meeting at 1:20 pm.	None	None
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Meeting Minutes Submitted by: Mara Macabinguil, Interpreter Service Coordinator

Date: 12/31/24

Approved by:

DocuSigned by:



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Date: 09/16/2025 | 4:31 PM PDT