

**Medi-Cal Community Advisory Committee  
Central Valley South  
March 19, 2025, 10:30am  
Meeting Minutes**

<b>Community Advisory Committee Members Present (names omitted for privacy)</b>	
Kaiser Permanente Medi-Cal members	12
Caregiver advocates of Kaiser Permanente Medi-Cal members	4
Community-based organization representatives	1 <ul style="list-style-type: none"> <li>Kern County Network for Children, Dream Center</li> </ul>

<b>Other Attendees</b>	
Public Attendees	0

<b>Kaiser Permanente Attendees</b>	
Amanda Flaum (presenter)	Vice President, Medi-Cal
Erica Mahgerefteh	Implementation Lead, Population Needs Assessment and Population Health Management Team
Gretchen Shanofsky (presenter)	Consultant, Population Needs Assessment and Population Health Management Team
Joseph De Los Santos	Health Equity Lead, Medi-Cal
Lori Kabangu	Community Advisory Committee Coordinator
Marco Diaz (presenter)	Community Advisory Committee Specialist
Melinda Yanonis (facilitator)	Community Advisory Committee Coordinator
Shahzad Dhanani	Regional Director, Medi-Cal Care Delivery & Operations
Shamiq Hussain	Director, Medi-Cal Policy
Tasha Chu	Community Advisory Committee Coordinator

Meeting Minutes			
Topic	Topic Summary	Member input and additional details	Action items
<b>Welcome &amp; Agenda Review</b>	<p>The Community Advisory Committee (CAC) Coordinator welcomed members to the meeting and shared the following:</p> <ul style="list-style-type: none"> <li>Members were reminded of the public meeting forum, meaning the privacy of any personal information shared cannot be guaranteed.</li> <li>CAC Team and Health Equity Partners were shared.</li> <li>Agenda topics were reviewed.</li> </ul>		
<b>Meeting Tips &amp; Guidelines</b>	<p>Technical tips and key functions for using Microsoft Teams on a phone or desktop/laptop were shared.</p> <p>The presenter introduced three options for participating in the meeting: raise hand to speak, use chat, or write comments in Microsoft Forms feedback form.</p>		
<b>CAC Expansion &amp; Overview</b>	<p>The CAC Coordinator shared details about the CAC expansion for 2025:</p> <ol style="list-style-type: none"> <li>North Bay: Marin, Napa, Solano, and Sonoma</li> <li>Sacramento Region: Amador, El Dorado, Placer, Sacramento, Sutter, Yolo, and Yuba</li> <li>San Francisco Bay Area: San Francisco, San Mateo, Santa Clara, and Santa Cruz</li> <li>East Bay: Alameda and Contra Costa</li> </ol>	<p>The CAC Coordinator reviewed Central Valley South CAC and the member representation, including Community Based Organization (CBO) stakeholders: Interface Children and Family Services; Kern County Network for Children, Dream Center; and Latino Coalition for Health California.</p>	

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	5. Central Valley: Fresno, Kings, Madera, Mariposa, San Joaquin, Stanislaus, and Tulare 6. Central Valley South: Kern and Ventura 7. Greater Los Angeles: Los Angeles 8. Inland Desert: Imperial, Riverside, and San Bernardino 9. South SoCal: Orange and San Diego		
<b>Interest in the CAC</b>	<p>The CAC Coordinator led a discussion with the CAC members to ask about their interest in joining the CAC, what they would like to learn, and what led them to participate.</p>	<p>The members shared:</p> <ul style="list-style-type: none"> <li>• Works at a mental health facility and is interested in information regarding mental health and medical services for residents who are Kaiser Permanente members. The individual wants to be a voice for residents and gather information to support their needs.</li> <li>• Interested in participating to address concerns related to mental health and medical services.</li> <li>• Fortunate to be a part of the CAC and represent the community and address issues related to access to health care services. The individual wants to help find solutions for the challenges faced by community members.</li> <li>• Motivated to participate to learn more about addiction therapy</li> </ul>	

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		<p>services and what is offered at Kaiser Permanente.</p> <ul style="list-style-type: none"> <li>• Joining as a parent to find ways to improve access and support for child's health care needs. The individual shared difficulties in getting appointments for special needs child and the differences in treatment for Medi-Cal versus private insurance members.</li> <li>• As a long-time Kaiser Permanente member and recent Medi-Cal member, individual expressed interest in learning more about the services available, including services not needed at present, but may be useful for the community.</li> <li>• Challenges in finding dental and orthodontic care for children and interested in learning more about the resources available for members and their children, as well as others in the community.</li> <li>• Interest in being part of the discussion to improve health care services and the importance of addressing both positive and negative experiences.</li> </ul>	
<b>Kaiser Permanente's</b>	The Medi-Cal leadership speaker was introduced. The leader reviewed Kaiser Permanente's mission statement, the	Amanda Flaum provided remarks for this CAC.	

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<b>Focus on Medi-Cal Members</b>	impact of CAC Feedback, and the vital role that our members play. The leader also shared Kaiser Permanente's Medi-Cal guiding principles.		
<b>Meeting Norms and Values</b>	The CAC Coordinator led a discussion with CAC members to establish norms and values for the CAC meetings. The norms and values will be collected across all nine (9) CACs and summarized for presentation in our Q2 CAC meetings.	<p>The following feedback was provided:</p> <ul style="list-style-type: none"> <li>• Important to value everyone's perspective and avoid judgment. All input should be respected and considered.</li> </ul>	
<b>CAC Purpose &amp; 2024 in Review</b>	<p>The CAC Coordinator reviewed the purpose of CAC meetings and set expectations for members for future meetings. The CAC Coordinator also shared examples of future topics where members' input and feedback can help drive improvements at Kaiser Permanente.</p> <p>The CAC Coordinator shared the impact of feedback from CAC members in 2024, which led to several accomplishments.</p>		
<b>Community Health Topics</b>	<p>In a pre-meeting survey, CAC members were asked what community health topics matter most to them.</p> <p>A guest speaker from Kaiser Permanente's Population Needs Assessment (PNA) and Population Health Management (PHM) Team explained how their team engages with local health departments and other Medi-Cal</p>	<p>The top health priorities identified for this CAC and feedback provided were:</p> <ol style="list-style-type: none"> <li>1. Availability of Doctors and other Health Care Providers <ul style="list-style-type: none"> <li>○ Difficulties in scheduling appointments with providers often facing long wait times and cancellations. Some providers have left Kaiser Permanente, and the individual wants more</li> </ul> </li> </ol>	<p>Member experiences, input, and feedback have been documented. The CAC Coordinator will follow up accordingly on active member issues.</p> <p>Send follow-up email to members with resources</p>

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	<p>health plans to identify the most important health topics in the community.</p> <p>The guest speaker presented the pre-meeting survey responses and asked for CAC members' feedback on the identified health topics.</p> <p>The guest speaker indicated future ways CAC members can participate in providing feedback about community health priorities to local health departments, including through surveys, focus groups, and county-led workgroups.</p>	<p>consistency in care. Other members agreed, and some shared experiences of needing to rely on urgent care, particularly for pediatric care.</p> <ul style="list-style-type: none"> <li>○ The importance of having more available providers to meet the community's needs was emphasized.</li> <li>○ Challenges faced by members at family resource centers in Kern County, including transportation issues and the need for local clinics, was shared. The importance of telehealth services in outlying areas and concerns about care coordination when referring individuals to multiple provider options were emphasized.</li> <li>○ Clarification was requested on whether telehealth could be used when a member is out of the Kaiser Permanente service area.</li> </ul> <p>2. Availability of Mental Health Providers</p> <ul style="list-style-type: none"> <li>○ The importance of in-person therapy and individual experience of feeling that care needs had fallen through the cracks was shared.</li> </ul>	<p>on accessing services and connecting with Member Services for more information on benefits</p> <p>Community health priority topic feedback will be evaluated for improvements to Kaiser Permanente programs and with local health departments for consideration in improvements to community health programs and resources.</p>

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		<ul style="list-style-type: none"> <li>○ Challenges with mental health support and with communicating with mental health departments was shared. The abrupt end to therapy services left the individual too overwhelmed to continue to seek support.</li> <li>○ Positive mental health experience at Kaiser Permanente and appreciation for virtual sessions and being able to email the provider were shared. The individual shared struggles to find mental health services for children, often having had to resort to private, out-of-pocket options.</li> </ul> <p>3. Chronic Disease &amp; Premature Deaths</p> <ul style="list-style-type: none"> <li>○ Need for consistent care from the same provider to monitor chronic conditions effectively was shared, including experience of being told to be "too young" for certain conditions, leading to delays in diagnosis and treatment.</li> <li>○ Experience with inconsistent communication regarding health screenings, highlighting the need for better follow-up and</li> </ul>	

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		<p>coordination. The individual also expressed being unsure if challenges were due to differences between private/commercial insurance versus Medi-Cal or between the Northern California and Southern California systems.</p> <ul style="list-style-type: none"> <li>○ The challenges of managing multiple chronic conditions and coordinating care among different providers was shared, including the importance of having a primary care provider who is accessible and responsive.</li> <li>○ Experience of feeling that the individual had to self-advocate to receive testing for autoimmune disorders and other possible diagnoses was shared, including frustration with provider for not being supportive of getting the testing the individual felt was needed.</li> </ul> <p>4. Health Communications</p> <ul style="list-style-type: none"> <li>○ Time elapsed, and members were encouraged to record additional feedback in the feedback form.</li> </ul> <p>5. Infectious Diseases</p>	



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		<ul style="list-style-type: none"> <li>○ Time elapsed, and members were encouraged to record additional feedback in the feedback form.</li> </ul>	
<b>Announcements</b>	The CAC Coordinator reviewed announcements with CAC members, including information about upcoming meetings and a reminder to keep personal contact details updated with Kaiser Permanente and their Medi-Cal County Eligibility Worker. The CAC Coordinator also shared contact and website information.		
<b>Open Forum &amp; Additional Questions and Comments</b>	CAC members and other attendees were invited to ask questions, share feedback, and provide any additional comment on today's agenda or on other Medi-Cal topics.	<ul style="list-style-type: none"> <li>● The following comments and questions were shared:</li> <li>● Concerns about the lack of verbal communication for pre-appointment processes and preparation, especially for patients with lower literacy levels or limited access to technology, was shared. The need for clear instructions and support for patients who may not be tech-savvy was emphasized.</li> <li>● An inquiry was made about the protocol for contacting specialists when hospitalized. The individual shared recommendation for better communication between contracted hospitals and primary care providers.</li> </ul>	CAC Team is also in review of Microsoft form submissions related to today's input topics and will complete follow-up incorporated into the follow-up process as described above.

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		<ul style="list-style-type: none"> <li>• Several asked about expansions related to networks, facility options, and provider availability and recommendation was shared that more options are needed, especially for underserved communities.</li> <li>• Experience with the approval process for seeing an outside neurologist was shared and individual asked if this experience is standard for all outside specialists.</li> </ul>	