

**Medi-Cal Community Advisory Committee  
East Bay  
March 20<sup>th</sup>, 2025, 10:30 AM  
Meeting Minutes**

<b>Community Advisory Committee Members Present (names omitted for privacy)</b>	
Kaiser Permanente Medi-Cal members	8
Caregiver advocates of Kaiser Permanente Medi-Cal members	1
Community-based organization representatives	3 <ul style="list-style-type: none"> <li>• Rubicon Programs</li> <li>• Hijas Del Campo</li> <li>• Pacific Center</li> </ul>

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

<b>Kaiser Permanente Attendees</b>	
Arif Shaikh	Senior Director Medi-Cal Policy & Engagement
Debbie Dyer	Clinical Practice Consultant, Medi-Cal Care Delivery & Operations
Esme Cullen, MD	Medi-Cal Chief Health Equity Officer
Gretchen Shanofsky	Consultant, Population Needs Assessment & Population Health Management
Joanna Mroz	Senior Director, Strategy Consulting, Corporate & Business Development
Joseph De Los Santos	California Health Equity Strategy Lead, Medi-Cal
Kent Jolly, MD	MD, Assistant Medical Director for Medi-Cal
Lori Kabangu (Facilitator)	Community Advisory Committee Coordinator
Marco Diaz (Presenter)	Community Advisory Committee Specialist
Melinda Yanonis	Community Advisory Committee Coordinator
Shahzad Dhanani	Regional Director, Medi-Cal Care Delivery & Operations
Shamiq Hussain	Director Medi-Cal Policy & Engagement
Tasha Chu	Community Advisory Committee Coordinator
Vidya Iyengar (Presenter)	Vice President, Medi-Cal Care Delivery & Operations

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 the East Bay region and the member representation, including Community Based Organization (CBO) stakeholders: Rubicon Programs, Hijas Del Campo, and Pacific Center.</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>• Joined the committee to represent the LGBTQIA+ community and engage in further partnership with Kaiser Permanente. Emphasized the importance of gender-affirming care and mental health services for their community.</li> <li>• Joined to bridge the gap between the community and healthcare services. Rubicon Programs provide workforce services and support for adults with various barriers, including physical and mental health issues, and aims to bring updated information back to staff and the community.</li> <li>• Joined to represent farm workers in Contra Costa County. Highlighted the barriers to accessing healthcare services faced by farm workers and the</li> </ul>	

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		<p>importance of addressing trust issues within the community.</p> <ul style="list-style-type: none"> <li>• Joined to share mental health challenges and to advocate for more individualized care. Emphasized the importance of therapeutic relationships and the potential harm caused by generalized approaches.</li> <li>• A caregiver for nearly 27 years, joined to seek solutions for communication issues and resource access for Medi-Cal recipients. Aims to help elderly family members and young people to navigate the healthcare system and access Kaiser Permanente benefits.</li> <li>• Joined to learn about the different services Medi-Cal provides. Expressed a desire to understand the full range of services available and to dispel the misconception that Medi-Cal services are limited.</li> <li>• Has an autistic family member and would like to know about more options in Medi-Cal and contribute as well to this Community Advisory Committee.</li> </ul>	
<b>Kaiser Permanente's Focus on Medi-Cal Members</b>	The Medi-Cal leadership speaker was introduced. The leader reviewed Kaiser Permanente's mission statement, the impact of CAC Feedback, and the vital role that our members play. The leader also	Vidya lyengar provided remarks for this CAC.	

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	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>• Be culturally sensitive in discussions and interactions and encourage participants to listen to others with curiosity and openness.</li> <li>• Incorporate trauma-informed care (TIC) principles and be aware of trauma in conversations; develop a deeper awareness of trauma-informed care and its impact on individuals and communities. Highlighted the need to acknowledge and be aware of the ongoing trauma experienced by various communities, including LGBTQIA+ and those facing housing insecurity, substance abuse, and mental health.</li> <li>• Be mindful of how we express ourselves to avoid triggering others.</li> <li>• Create a safe and supportive environment for all participants to share their experiences and perspectives.</li> </ul>	CAC Team to compile feedback from all CACs and build the norms and values to share at the next meeting.
<b>CAC Purpose &amp; 2024 in Review</b>	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		

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	<p>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 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>The top health priorities identified for this CAC were:</p> <ol style="list-style-type: none"> <li>1. <b>Availability of Doctors and Other Healthcare Providers:</b> <ul style="list-style-type: none"> <li>Highlighted the long wait times for appointments and the limited time spent with doctors, which affects trust and the quality of care. Emphasized the need for doctors to build trust with patients to ensure they feel comfortable and supported.</li> <li>Expressed frustration with long wait times for specialist appointments and a personal experience of waiting over a month to see a podiatrist.</li> <li>Highlighted the importance of individualized care and the potential harm caused by generalized approaches. Emphasized the need for therapeutic relationships and the harm that can result from a lack of personalized care.</li> <li>Stated the challenges of accessing timely care with Dermatology and OBGYN procedures.</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>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>Discussed the need for gender-affirming care, particularly for trans and non-binary individuals with eating disorders. Highlighted the lack of specialized care for gender-diverse patients and the challenges faced by the LGBTQIA+ community in accessing appropriate healthcare and emphasized the ongoing HIV and AIDS epidemics and the lack of comprehensive treatment and education. Lastly, stressed the importance of prevention and the need for more public health announcements and resources.</li> <li>Mentioned the challenges in accessing care when doctors leave or change, leading to feelings of being treated as a number. Shared experience of being assigned a new doctor without prior knowledge, which impacted trust and satisfaction with the care received. Expressed the challenges of accessing mental health services and mentioned the difficulty of building a relationship with new doctors and the financial burden of outsourced mental health services.</li> </ul> <p>2. <b>Availability of Mental Health Providers:</b></p>	

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		<ul style="list-style-type: none"> <li>Pointed out the difficulty in accessing mental health services due to long wait times. Emphasized the need for patient-centered care and the impact of delays on mental health treatment when someone is reluctant to get mental health treatment already.</li> <li>Reiterated the need for culturally sensitive and gender-affirming mental health care. The Pacific Center faces a high demand for mental health services and struggles to meet the needs of the community.</li> <li>Raised concerns about the lack of support for individuals who cannot advocate for themselves, particularly in mental health services. Highlighted the challenges faced by young adults transitioning to independent care.</li> <li>Parent of a child with autism shared the need for more information and resources on mental health services and interest to learn more about available options.</li> </ul> <p>3. <b>Housing and Homelessness:</b></p> <ul style="list-style-type: none"> <li>Discussed the impact of unstable housing on overall health, including cases of individuals living in vehicles or inadequate housing. Shared a story about a farmworker living in a car who</li> </ul>	



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		<p>developed a serious health issue due to their living conditions and mentioned the broad definition of homelessness, including multi-family housing situations without lease agreements, and how this affects people's health and well-being. Lastly, spoke on how to connect housing insecurity to mental health issues, emphasizing the compounded trauma experienced by those facing housing instability.</p> <p><b>4. Sexual and Reproductive Health:</b></p> <ul style="list-style-type: none"> <li>Highlighted the ongoing HIV/AIDS epidemic and the need for comprehensive education, prevention, and treatment. Stressed the importance of culturally aware and LGBTQIA+ affirming care in sexual and reproductive health and shared their personal experience of needing an exploratory gynecological procedure and facing long wait times, underscoring the need for more accessible reproductive health services. Lastly, emphasized the importance of providing young people with access to testing, prevention, treatment, and education on sexual and reproductive health, ensuring that these services are culturally sensitive.</li> </ul>	

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<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.	Feedback and comments shared: <ul style="list-style-type: none"> <li>• Recommend more resources and services are made available for addressing obesity and diabetes, especially among youth.</li> <li>• Looking for Information on nutrition and diet programs.</li> <li>• Would like updates on mental health provider contracting and availability.</li> </ul>	The CAC Team will follow up with members with resources for specific care needs.  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.