

Southern California, Medi-Cal Community Advisory Committee June 27, 2024 10:30 am - 12:00pm Meeting Minutes

Community Advisory Committee Members Present (names not shared for privacy)

Kaiser Permanente Medi-Cal Members: 23

Parent Advocate of Kaiser Permanente Medi-Cal Member: 2

Representative from Sycamores: 1

Representative from Community Health Association Inland Southern Region (CHAISR): 1

Members of the Public: 1

Kaiser Permanente Meeting Participants		
Name	Role	
Celia Williams	Executive Director, Medi-Cal Care Delivery & Operations	
Jacqui Jenkins	Nurse Consultant, Behavioral Health	
Eboni Spears	Administrative Specialist, Medi-Cal Care Delivery & Operations	
Esme Cullen, MD	Medicaid Chief Health Equity Officer	
JM Brookey, MD	The Southern California Permanente Medical Group, CAC Physician Partner	
Kerry Litman, MD	The Southern California Permanente Medical Group, CAC Physician Partner	
Humberto Temporini, MD	Vice President, Associate Chief Medical Officer Mental Health & Wellness	
Lori Kabangu	Northern California Community Advisory Committee Coordinator	
Marco Diaz	Community Advisory Committee Administrator	
Melinda Yanonis	Southern California Community Advisory Committee Coordinator	
Shahzad Dhanani	Regional Director, Medi-Cal Care Delivery & Operations	
Vanessa Davis	Director, Medi-Cal External Engagement and Initiatives	
Vidya Iyengar	Vice President, Medi-Cal Care Delivery & Operations, California	
Amanda Flaum	Vice President, California Medi-Cal	

Kaiser Permanente Staff Guests			
Name	Role		
Linda Fahey, RN, NP, MSN	Regional Director, Care Experience & Patient and Family Centered Care, CAC		
	Workgroup Member		
Susan Mattera	Director of Quality and Oversight		
Tiffany Han	Kaiser Permanente Masters Level Intern		
Tiffany Weisberg	Director of Medicaid		
Arif Shaikh	Sr. Director, Medi-Cal Policy and Engagement		
Marie Sanchez	Community Health Lead – Central Valley, CAC Workgroup Member		



Meeting Agenda			
Topic	Facilitator	Discussion	Action Items
Meeting Tips & Guidelines	Melinda Yanonis	Technical tips and key functions for using Microsoft Teams on a phone or desktop/laptop shared. Attendees introduced to three options for participating in the meeting: raise hand to speak, use chat or write comments in Microsoft form link. A draft version of community meeting norms and values was shared for input from committee members. Input provided:	Kaiser Permanente CAC Team will finalize Community meeting norms.
		No additional feedback provided	
Our Purpose & Roles	Melinda Yanonis	Community Advisory Committee members were welcomed to the meeting. Committee members were asked: What would you like to get out of the Community Advisory Committee meetings? Why did you decide to participate?	Kaiser Permanente CAC Team will compile information for questions posed and share individually with members. Kaiser Permanente CAC Team
		 Input provided verbally and in comments: Joined as parent advocate of adult non-verbal member Joined to share input in general, and on specific topics: appointment wait times Learn about Medi-Cal programs and benefits Learn more about Kaiser Permanente Former Member Advisory Committee member, want to support new committee Represent Sycamores and participating to support Medi-Cal members and health centers through the recent Medi-Cal transitions Joined to ask questions on specific topics: coverage while traveling out of the country, get comfortable with Kaiser's services and processes for seeking medical care The Kaiser Permanente Community Advisory Committee team, leaders and 	has noted topics of interest for future agenda planning.
		guest speakers were introduced.	



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How Kaiser Permanente is Focused on Serving Medi-Cal Members	Shahzad Dhanani, Vanessa Davis, Esme Cullen, Vidya Iyengar, Amanda Flaum	 Background provided on the Kaiser Permanente mission, history providing Medi-Cal/Medicaid and integrated care delivery system. Committee members encouraged to provide feedback in this forum. Kaiser Permanente's transition to a single direct contract, to provide Medi-Cal, with California Department of Health Care Services (DHCS) was explained, including: Prior to 2024, KP had several contracts to provide Medi-Cal; some through the state and some through other Managed Care Plans. Now KP has one direct contract with the state and provides Medi-Cal in nine new counties in Northern California. KP is increasing Medi-Cal enrollment The Population Health Management initiative is focused on addressing health equity and eliminating health disparities to improve the health of all Californians. This initiative is a partnership with Kaiser Permanente, Community Health Centers, Regional Associations of California, the California Primary Care Association and DHCS. The Quality Improvement and Health Equity Committee (QIHEC) and Community Advisory Committee were introduced. The feedback collected in the Community Advisory Committee will be taken to Quality Improvement and Health Equity Committee to build a transformation plan. The Quality Improvement and Health Equity Committee to build a transformation plan. The Quality Improvement Activities for Kaiser Permanente Medi-Cal services. Information was shared about the opportunity for a CAC Medi-Cal committee member to also be a QIHEC committee member. This Medi-Cal committee member to also be a QIHEC committee member. This Medi-Cal committee member will be a voting member on recommendations and actions brought to this committee. Kaiser Permanente Medi-Cal leader shared positive personal experience with Medi-Cal in her family and why it is important to get Medi-Cal member input 	None



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Non-Specialty Mental Health	Jacqui Jenkins	An overview of non-specialty mental health benefits was provided. Information was presented about which benefits are available through Kaiser Permanente and other benefits provided by counties to Medi-Cal members. Committee members were asked: Do you feel comfortable talking to your care provider about your mental health? Have you experienced any roadblocks to getting mental health support at Kaiser Permanente? How could Kaiser Permanente improve your mental health experience? Input provided verbally and in comments: One individual asked for clarification around state covered benefits vs. Kaiser covered benefits Individual asked about other forms of therapies such a music or art therapy Individual asked about how we are addressing the homeless population and their mental health needs Three members shared concerns around be able to make appointments in a timely manner CBO: recommendation to provide specific focus on our foster youth population in prevention and early interventions Questions from members provided verbally and in comments: Individual asked how to get alternatives to medication for mental health conditions. Information provided on lifestyle medicine and links to resources during the meeting. How do we get a referral for mental health services? Does the therapy benefit include couples therapy?	Kaiser Permanente CAC Team will collect information for questions not answered in meeting and provide follow-up at next meeting.



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Announcements	Melinda Yanonis	 Details shared about: Reminder for anyone interested in being a QIHEC committee member to reach out to CAC team. 2024 Community Advisory Committee meeting schedule How to contact the Kaiser Permanente Community Advisory Committee team 	Medi-Cal members interested in participating in QIHEC send email to MediCalCommunity@kp.org by July 12 th . Any questions or feedback for the Community Advisory Committee should be sent via email to MediCalCommunity@kp.org
Open Forum for Questions/Comments	Melinda Yanonis	Committee members and public were invited to ask questions or share feedback on other Medi-Cal topics. Comments included: Here to advocate for moms, kids, and woman of color Member shared longtime experience with Kaiser including Labor and Delivery, OBGYN and pediatric medication concerns around CA laws for 12 yo and above. Understanding how to access care region to region Experienced tech issues Appointment availability for primary care CBO comment: I would like to learn and support how we can advocate prioritizing community need to improve care in bh health and physical health for low in income and foster youth and Transitional Age Youth (TAY). TAY youth that end up as part of the homeless population and need bx health support culturally appropriate service or program design priorities for health education and outreach program , help with quality improvement. etc.	Next Steps: All comments and feedback will be shared with relevant internal partners. Members that expressed unmet needs or care concerns will be followed-up with individually.