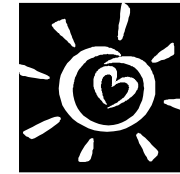


Board of Governors

Executive Community Advisory Committee

Meeting Minutes – July 12, 2017



L.A. Care
HEALTH PLAN

L.A. Care Health Plan, 1055 West 7th Street, Los Angeles, CA 90017

ECAC Members	RCAC Members/Public	L.A. Care Board of Governors/Staff
<p>María Adela Guadarrama, <i>RCAC 1 Chair</i> Ana Rodriguez, <i>RCAC 2 Chair</i> * Cynthia Contreas-Wood, <i>RCAC 3 Chair, ECAC Vice-Chair</i> * Maggie Belton, <i>RCAC 3 Vice Chair</i> Michael Shelton, <i>RCAC 4 Chair</i> Maria Sanchez, <i>RCAC 5 Chair</i> Andria McFerson, <i>RCAC 6 Chair</i> Fátima Vásquez, <i>RCAC 7 Chair</i> Maria Montes, <i>RCAC 8 Chair</i> Cristina Deh- Lee, <i>RCAC 9 Chair, ECAC Chair</i> Leticia Navarro, <i>RCAC 10 Chair</i> Lluvia Salazar, <i>RCAC 11 Chair</i> Elda Sevilla, <i>At Large Member</i> Deaka McClain, <i>At Large Member</i> Demetria Saffore, <i>CCI Area 1 Chair</i> Wilma Ballew, <i>CCI Area 2 Chair</i> Brenda White, <i>CCI Area 3 Chair</i> Nesima Istrefi, <i>CCI Area 4 Chair</i></p>	<p>Pedro Martinez, <i>RCAC 1</i> Adriana Martinez, <i>RCAC 1</i> Russel Mahler, <i>RCAC 1</i> Estela Lara, <i>RCAC 2</i> Diana Leff, <i>RCAC 2</i> Daniel Kwong, <i>RCAC 3</i> Araceli Aragon, <i>RCAC 4</i> Angelica Alvarez, <i>RCAC 7</i> Rosario Moreno, <i>RCAC 8</i> Thoura Day, <i>RCAC 9</i> Blanca Villagran, <i>RCAC 10</i> Beverly Caples, <i>CCI Area 1</i> Mary Jo Fernando, <i>CCI Area 2</i> Marilyn Streeter, <i>CCI Area 3</i> Bertha Poole, <i>CCI Area 4</i></p> <p>Eduardo Kogan, <i>Interpreter</i> Pamela Shepard Garcia, <i>Interpreter</i> Sina New, <i>Interpreter</i> Bo Uce, <i>Interpreter</i></p>	<p>Hilda Pérez, <i>Member, Board of Governors</i> Layla Delgado-Gonzalez, <i>Member Advocate, Board of Governors</i> Richard Seidman, MD, MPH, <i>Chief Medical Officer</i> Malou Balones, <i>Committee Liaison, Board Services</i> Vanessa Bernal, <i>CMC Health Navigator, Even MORE Outreach & Services</i> Idalia Chitica, <i>Field Specialist Supervisor, CO&E</i> Kristina Chung, <i>Community Outreach Field Specialist, CO&E</i> Misty De Lamare, <i>Director, Communications</i> Auleria Eakins, <i>Community Outreach Manager, CO&E</i> Erika Estrada, <i>Supervisor, Community Relations Communication Department</i> Laura Garcia, <i>Health Promoter Liaison CO&E</i> Felicia Gray, <i>Community Outreach Liaison, CO&E</i> Hilda Herrera, <i>Community Outreach Liaison CO&E</i> Judy Hsieh Bigman, <i>Senior Communication Specialist, Communication and Community Relations</i> Devina Kuo Fan, <i>Health Promoter Program Manager, CO&E</i> Susan Ma, <i>CCI Field Specialist, Communications and Community Relations</i> Linda Merkens, <i>Manager, Board Services</i> Frank Meza, <i>Community Outreach Field Specialist, CO&E</i> Nancy Molina, <i>CCI Liaison, Communications and Community Relations</i> Courtney Nicholas, <i>Community Outreach Field Specialist, CO&E</i> Francisco Oaxaca, <i>Senior Director, Communication & Community Relations</i> Jose Ricardo Rivas, <i>Community Outreach Liaison CO&E</i> Victor Rodriguez, <i>Community Outreach Liaison CO&E</i> Prity Thanki, <i>Local Government Advisor, Government Affairs</i> Martin Vicente, <i>Community Outreach Field Specialist, CO&E</i> Mariah Walton, <i>CCI Field Specialist, Communications and Community Relations</i></p>
<p>* <i>Excused Absent</i> ** <i>Absent</i> *** <i>Via teleconference</i></p>		

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN																		
CALL TO ORDER	Cristina Deh-Lee, <i>ECAC Chairperson</i> , called the meeting to order at 10:10 a.m.																			
APPROVE MEETING AGENDA	<p>Andria McFerson, RCAC 6 Chair asked about her request for an agenda item about a resource guide. Francisco Oaxaca, <i>Senior Director of Communications, Community Outreach and Education</i>, noted that due to the full agenda for today's meeting, Ms. McFerson's request will be added to the September 2017 ECAC Agenda.</p> <p>The Agenda for today's meeting was approved as submitted.</p>	<p>Approved. 11 AYES, (Ballew, Belton, Deh-Lee, Montes, Saffore, Salazar, Sanchez, Sevilla, Shelton, Vásquez, and White). 1 NAY (McFerson)</p>																		
APPROVE MEETING MINUTES	<p>The June 14, 2017 meeting minutes were approved as submitted.</p> <p>Maggie Belton was not present at the June 14, 2017 ECAC meeting and abstained from voting the approval of the meeting minutes.</p>	<p>Approved. 11 AYES, (Ballew, Deh-Lee, McFerson, Montes, Saffore, Salazar, Sanchez, Sevilla, Shelton, Vásquez, and White). 1 ABSTENTION (Belton)</p>																		
STANDING ITEMS																				
ECAC CHAIR PERSON REPORT	<p>ECAC Chair Deh-Lee presented the motion below.</p> <p><u>Motion ECA 100.0717</u> To approve the following candidate(s) as members of the Regional Community Advisory Committees (RCAC) and Coordinated Care Initiative Councils (CCI), as reviewed by the Executive Community Advisory Committee (ECAC) during the July 12, 2017 ECAC meetings.</p> <table border="1" data-bbox="514 1166 1703 1474"> <thead> <tr> <th data-bbox="514 1166 1136 1243">Name</th> <th data-bbox="1136 1166 1360 1243">RCAC/CCI #</th> <th data-bbox="1360 1166 1703 1243">Type of Member (Agency, if applicable)</th> </tr> </thead> <tbody> <tr> <td data-bbox="514 1243 1136 1284">Chun Choe</td> <td data-bbox="1136 1243 1360 1284">RCAC 2</td> <td data-bbox="1360 1243 1703 1284">Consumer</td> </tr> <tr> <td data-bbox="514 1284 1136 1325">Socrates Rodriguez</td> <td data-bbox="1136 1284 1360 1325">RCAC 2</td> <td data-bbox="1360 1284 1703 1325">Consumer</td> </tr> <tr> <td data-bbox="514 1325 1136 1365">Fung Ha Leung Kwong</td> <td data-bbox="1136 1325 1360 1365">RCAC 3</td> <td data-bbox="1360 1325 1703 1365">Consumer</td> </tr> <tr> <td data-bbox="514 1365 1136 1438">Community Health Alliance of Pasadena (ChapCare)</td> <td data-bbox="1136 1365 1360 1438">RCAC 3</td> <td data-bbox="1360 1365 1703 1438">Provider</td> </tr> <tr> <td data-bbox="514 1438 1136 1474">Pamela L. Richardson</td> <td data-bbox="1136 1438 1360 1474">RCAC 5</td> <td data-bbox="1360 1438 1703 1474">Consumer</td> </tr> </tbody> </table>	Name	RCAC/CCI #	Type of Member (Agency, if applicable)	Chun Choe	RCAC 2	Consumer	Socrates Rodriguez	RCAC 2	Consumer	Fung Ha Leung Kwong	RCAC 3	Consumer	Community Health Alliance of Pasadena (ChapCare)	RCAC 3	Provider	Pamela L. Richardson	RCAC 5	Consumer	<p>Approved unanimously. 12 AYES, (Ballew, Belton, Deh-Lee, McFerson, Montes, Saffore, Salazar, Sanchez, Sevilla, Shelton, Vásquez, and White).</p>
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<p>UPDATE FROM CHIEF MEDICAL OFFICER</p>	<p>Richard Seidman, MD, MPH, <i>Chief Medical Officer</i>, responded to questions from the last ECAC meeting. Dr. Seidman clarified how L.A. Care evaluates medical necessity in considering authorization for services. L.A. Care is required to use evidence-based criteria to determine whether or not L.A. Care will authorize payment for services. Not all referrals to specialty providers or recommended medications or therapies require “prior authorization” of payment for services provided from L.A. Care. Health coverage programs include benefits for medically necessary services which must have evidence to support the effectiveness of the treatment. Some therapies are considered experimental. L.A. Care reviews the evidence based criteria when determining whether or not to authorize the services.</p> <p>Ms. McFerson asked if tests will be authorized to determine the medical necessity of treatment.</p> <p>Dr. Seidman responded laboratory and/or imaging tests will determine the diagnosis. The recommended therapies could be medication or other treatment. Last month, members asked about enhanced external counter pulsation, a specific therapeutic intervention. All treatment needs to be evidence-based, based on specific criteria, for L.A. Care to authorize payment for the services. There are national organizations that look at medical evidence for therapies for every condition. L.A. Care is mandated to use those guidelines in determining authorization.</p> <p>In response to the question about enhanced external counter pulsation (EECP), Dr. Seidman informed the Committee that this has been used on an experimental basis with conditions such as angina or chest pain. There is insufficient medical evidence that it's an effective therapy. There are all kinds of stories in the media and there's always great interest in new therapies because when someone has a condition, they want it addressed and cured. When there is insufficient evidence, a health plan is not obligated to pay for the therapy. It does not mean that the doctor is wrong in recommending it. When the health plan considers whether or not to approve payment for the service, if there's insufficient evidence of medical effectiveness, the services would be denied. For example, hydrotherapy is recommended for all kinds of conditions, but there's not sufficient evidence that it is an effective treatment for some.</p> <p>Ms. McFerson noted that there are medical necessities for exercise, which causes improved blood flow. This could help people with conditions such as diabetes and could help quadriplegic members. It would be cheaper than water therapy and physical therapy. She asked Dr. Seidman what he recommends besides the physical or water therapy that is already available to members.</p> <p>Dr. Seidman responded that he is not sure he understands the question. But exercise has all kinds of unbelievable benefits.</p>			

Ms. McFerson expressed that she personally cannot handle physical pain. It takes longer for her to get better. She added that the care she was talking about is better for blood flow for those who cannot handle physical pain, and asked about alternatives.

Dr. Seidman noted it is a challenge to address individual cases. He added that when there are injuries, one essential element of effective healing is a targeted physical therapy that is supervised by expert physical therapist. It is up to the individual to participate in physical therapy or have somebody there who's going to encourage participation in the therapy. There is challenge in holding oneself accountable for physical therapy, and there is evidence of medical benefits from properly prescribed physical therapy.

Auleria Eakins, *Community Outreach Manager, CO&E*, noted that when medical services are approved by L.A. Care, there is no feedback because the member is satisfied. When services are not approved for payment there are complaints at our public meetings. Ms. Eakins asked Dr. Seidman if a member is denied a service following the evidence-based criteria, does L.A. Care offer alternatives for care or does the provider give the member alternatives for care?

Dr. Seidman responded that with an initial denial of care, a member can call and advocate on their own behalf, and/or their provider can appeal the decision. Alternatives are routinely offered when there is an alternative. For example, if a doctor orders an MRI, an expensive imaging test, it might be denied because a less expensive CT is a more appropriate test. The denial for the MRI would include a recommendation for the CT as an alternative that is more appropriate and cost-effective. For medication prescriptions, L.A. Care has a formulary of medications that do not require prior approval. If a doctor chooses to prescribe a non-formulary medication, it will require a request for prior authorization. If that request is denied, the appropriate and cost-effective alternative will be recommended. There is an appeal process for denials for both the members and providers.

Ms. Belton commented that sometimes things are considered experimental for a long time. She experienced being denied, and the appeal was still denied. She noted that gastric surgery was considered experimental before, but now it is a basic approval. Ms. Belton is interested what is L.A. Care's process regarding denials, appeals, denials and experimental treatments.

Dr. Seidman noted that the Member ID cards have a phone number for Member Services, which can handle appeals. Dr. Seidman suggested that grievance and appeals staff be invited to a future ECAC meeting to discuss the grievance process.

The last step in an appeal is a "state fair hearing", where an impartial third party reviews the denial. The decision is final. There are treatments or medication that are denied and will remain denied. There is a multi-level appeal process because L.A. Care understands that it is important that patients and providers have the opportunity to ask for review. The appeal process is thorough.

Dr. Seidman provided updates on the following:

- L.A. Care's eManagement program uses new technology that enables primary care providers to electronically communicate with psychiatrists. Timely access to appropriate behavioral or mental health services is difficult. The purpose of eManagement is to address the gap in desirable access and make it easier for primary care providers to get specialty support from a psychiatrist without the patient having to travel to a new provider, in a new location, on their own time and expense. Primary care providers are trained in primary care, pediatrics, family, and internal medicine. Pediatricians and internists are not psychiatrists. Primary care physicians may be able to treat certain conditions, but may need help from a specialist to treat more complex conditions or even common conditions that are not responding to the typical initial therapies.
- eManagement is a technology platform that facilitates direct communication between primary care providers and psychiatrists. Many times the patient can remain in the direct care of their primary care physician, and hopefully they're comfortable in that setting, and they can benefit from specialty care input without having to make another appointment. It's a very innovative concept, leveraging a platform more broadly to facilitate specialty referrals. L.A. Care does not have an evaluation completed on this yet, but is getting a lot of positive feedback.
- L.A. Care received a federal grant for a Practice Transformation Network Program to support over 3,000 clinicians throughout Los Angeles County. These are not exclusively L.A. Care network providers. The program hires coaches to work with the practices using many different assessments, interventions and strategies to help practices modernize the manner in which they approach care in order to improve outcomes for patients. The program is specifically focused on improving outcomes for diabetes and depression management and treatment. The broader goal is the transformation of the practice to modernize it, to improve patient outcomes, increase patient satisfaction, and ultimately lower costs.
- Dr. Seidman reported on the recent onsite survey by the National Committee for Quality Assurance (NCQA) Accreditation. NCQA reviews L.A. Care's policies, procedures and documentation, performance in clinical quality measures and in member experience. L.A. Care is awaiting the final results. Dr. Seidman thinks that L.A. Care did very well on the survey, better than last year. Dr. Seidman noted that L.A. Care's biggest challenge is with improving the member experience. He thinks that L.A. Care will maintain an accredited status with NCQA. L.A. Care will continue its work to improve member experience and all of the clinical quality measures.

Ms. McFerson thanked Dr. Seidman for his quick response to her question, and indicated that the test that she was proposing was not that important.

Board Member Gonzalez-Delgado asked which area are actually rated on member experience.

	<p>Dr. Seidman noted that there about 67 questions on member satisfaction, and the questions are about:</p> <ul style="list-style-type: none"> • Whether their provider listens to members • If members feel that their providers spend enough time listening to their issues. • Access to needed care and getting needed care quickly. One of the questions is how often the member was seen within 15 minutes of appointment time. <p>Dr. Seidman added that NCQA evaluates members' experience when calling L.A. Care member services call center and the type of responses members get when they call their PCPs or specialty provider. It also includes access to medication. It's an overall assessment and tough measure, and it's important. Member satisfaction is 13 points out of the 100 points for the NCQA Accreditation Score and L.A. Care needs to get as many of those points as possible.</p>	
<p>GOVERNMENT AFFAIRS UPDATE</p>	<p>Prity Thanki, <i>Local Government Advisor, Government Affairs</i>, was not able to attend the meeting and a written report was distributed to ECAC members. <i>(A copy of the report can be obtained by contacting CO&E).</i></p>	
<p>COMMUNICATION AND COMMUNITY RELATIONS UPDATE</p>	<p>Francisco Oaxaca, <i>Senior Director of Communications and Community Relations</i>, apologized that the written report from Government Affairs was not translated prior to the meeting. A translated report will be available for the Regional Community Advisory Committee (RCAC) and Coordinated Care Initiative (CCI) Council meetings. Mr. Oaxaca summarized the report.</p> <ul style="list-style-type: none"> • Mr. Oaxaca referred the Committee members to a sheet included in the meeting materials, "How Long Should I Wait for My Appointment". The report lists the expected standards when making an appointment, along with contact information if they have more questions. • Mr. Oaxaca introduced Erika Estrada, Supervisor for Coordinated Care Initiative Councils. Ms. Estrada will supervise the CCI Liaisons. • A RCAC 2 motion was approved at the June 14, 2017 ECAC meeting, regarding a request for information about the services L.A. Care offers for each product line. The motion was not clear to staff and staff is requesting clarification from RCAC 2. This issue will be addressed at the next ECAC meeting. • Devina Fan, <i>Supervisor, Health Promoters Program</i>, provided a presentation on Health Promoter recent disability empathy training, "A Walk in our Shoes". <i>(A copy of the presentation can be obtained by contacting CO&E).</i> <ul style="list-style-type: none"> ○ Staff will recommend increasing the Health Promoters' stipend by \$10 a month for their activities in the next fiscal year. ○ Ms. Fan presented recognition to Rosario Moreno and others for their work as Health Promoters. ○ Ms. Fan will be leaving L.A. Care on September 6 to spend more time with her daughter. <p><u>Public Comment</u></p>	

	<p>Maggie Belton, <i>RCAC 3 Vice Chair</i>, commented that there are people with hidden disabilities, not only those with canes or in wheelchairs. She provided her insights about people with hidden disabilities and asked if L.A. Care has programs for people with hidden disabilities. Ms. Belton also asked if L.A. Care has exercise membership benefits.</p> <p>Deaka McClain, <i>ECAC At-Large Member</i>, noted that she also spoke about people with hidden disabilities in the Training and will continue addressing this issue.</p> <p>Mr. Oaxaca noted that current Medi-Cal benefits does not include gym memberships, but L.A. Care’s Family Resource Centers (FRCs) offer free exercise classes, and is exploring an idea to put exercise equipment in the FRCs. Mr. Oaxaca announced that he is seeking to hire additional staff to support the Health Promoters Program.</p> <p>Board Member Hilda Perez recommended that the activities of the Health Promoters be elevated to a higher level and that Health Promoters get certificates for the workshops they complete.</p> <p>Andria McFerson suggested a focus on health promoter individual contributions, opportunities for classes in Inglewood, and that health promoters be more multi-cultural.</p> <p>Mr. Oaxaca noted that the expansion of health promoters program, if additional staff is approved, will support diversity in health promoters and address language barriers. This will provide an opportunity to dig deeper into the strengths of the health promoters and team up health promoters for certain communities, in place of the current generalized approach.</p> <p>Ms. McFerson added that the focus should be on category and demographics.</p> <p>Mr. Oaxaca noted that the health promoters program will focus on community needs.</p>	
<p>CCI STAKEHOLDER ADVISORY COMMITTEE UPDATE</p>	<p>Ms. McCain provided an update on the CCI Stakeholder Advisory Committees activities. <i>(A copy of the report can be obtained by contacting CO&E).</i></p>	
<p>GLOBAL MEMBER ISSUES</p>	<p>Mr. Oaxaca gave a quick update on a global issue motion from a past meeting regarding an issue that were raised by RCAC 9 and the Children's Clinic, Long Beach. In conversation with the Children’s Clinic, staff didn't have enough specific information because of incomplete grievances that were filed. After the conversation with the Children's Clinic staff, they did agree that it would be helpful if they actually went to an upcoming meeting of RCAC 9 and gave a presentation and spoke to the members directly about their experiences. Children's Clinic staff will be in an upcoming RCAC 9 meeting.</p> <p>Demetria Saffore, CCI Area 1 Chair, asked how to encourage members to call member services. Mr. Oaxaca informed the Committee that membership cards have information on how to call</p>	

<p>Urgent Care Clinic – Homework Discussion</p>	<p>member services, and there is also information on the cards for how to call Grievance and Appeals to document their complaints.</p> <p>Idalia Chitica, <i>Field Specialist Supervisor, CO&E</i>, reminded Committee members that members were asked to use the contact information on their membership ID cards to ask about Urgent care and Emergency Care locations.</p> <p><u>Feedback regarding Urgent Care Clinic Homework Discussion</u></p> <p>Ms. McFerson commented that focus should be more on issues with RCACs and participation in the community. Ms. McFerson encouraged members to call member services to find out where urgent care clinics are.</p> <p>Adela Guadarrama, <i>RCAC 1</i>, asked what a “medical group” is. She reported that she called members services using the number on her L.A. Care card and received information about urgent care locations in Lancaster.</p> <p>Nesima Istrefi, <i>CCI Area 4 Chair</i>, reported that she called Member Services and was given information about the location of urgent care clinics in her area. She noted that those sites are only for urgent care, and for emergencies, a member must go to the emergency room.</p> <p>Maria Montes, <i>RCAC 8 Chair</i>, called Member Services, asked about urgent care, and was directed to a provider with no urgent care. She called again and was referred to urgent care.</p> <p>Chair Deh-Lee called and was directed to urgent care in Orange County.</p> <p>Member Perez asked what members will do with the information.</p> <p>Mr. Oaxaca thanked the members for their experiences. He summarized that there are issues with L.A. Care’s member services staff, with their own provider, with their own clinic, with signage, with lack of understanding of the difference between an urgent care and an emergency care. L.A. Care would like to ensure that all information is available on L.A. Care website for members to look at when they search for providers or search for hospitals or urgent care.</p> <p>Mr. Oaxaca noted that he wanted to find out if there are other things L.A. Care can do now. Staff is still not sure exactly what it will do, but this is the first step to find out if there's anything L.A. Care can start doing now. It will take time to provide all information on L.A. Care’s website so that it's accurate and kept up to date. Mr. Oaxaca added that staff will report back to ECAC.</p> <p>Ms. Istrefi added there is also need to educate members when to go to urgent care and to emergency room.</p>	
<p>OLD BUSINESS</p>		
<p>REVISIONS TO THE OPERATING RULES</p>	<p>Mr. Oaxaca reviewed the revisions to the RCAC/ECAC operating rules.</p>	

**FOR THE
COMMUNITY
ADVISORY
COMMITTEES AND
EXECUTIVE
COMMUNITY
ADVISORY
COMMITTEE OF L.A.
CARE HEALTH PLAN**

In January 2017, changes were presented to the operating rules to add the CCI Councils and to clarify a provisional membership period and dual membership in CCI and RCACs.

The proposed changes were reviewed by all the RCACs and CCI Councils in January and February 2017. Staff did not receive any significant comments from the RCACs and CCI members.

The proposed revisions were brought back to ECAC in March 2017. At that meeting, ECAC members requested a redlined version of the operating rules, which is the version that is included in this meeting packet, which has the proposed changes in a highlighted font. This redlined version was provided to the ECAC members at the April 2017 meeting.

Even though staff had not received any additional comments from the RCACs and the CCI Councils, the redlined version of the operating rules was recirculated back to the committees one more time in May and June 2017 to give another opportunity for members to comment or ask questions. The proposed changes to the operating rules have been circulated about six times to the members of the committees and ECAC. Staff also worked directly with Board Members Perez and Gonzalez-Delgado to make sure that they have been kept up to date and have had opportunities to provide input and comments and express any concerns.

Mr. Oaxaca noted that the feedback received that staff strongly felt was important for members were incorporated in the revised operating rules. Mr. Oaxaca is looking forward to a final discussion today and a vote from ECAC to be able to move forward and present the revised operating rules to the Board's Governance Committee, and then to the full Board for approval. Mr. Oaxaca added that there is a 30-day public notice period before the final vote on revised operating rules. That will be another opportunity for public comment.

Judy Hsieh-Bigman, *Senior Communication Specialist, Communication and Community Relations*, reviewed the proposed revisions to the revised RCAC/ECAC Operating Rules included in today's meeting materials. *(Copy of the revised rules may be requested by contacting CO&E.)*

- Ms. Bigman reviewed the revisions page by page.
- Most of the changes are housekeeping, including the CCI Councils and the CCI staff, and updating the community outreach and engagement name.

Highlights of the revisions are:

- Definition of Consumer Advisory Committees, which will be called (CAC). CAC will refer to all RCACs, CCI Councils, and ECAC.
- References to "product line" have been crossed out. Staff is going to refocus its recruitment efforts to all consumers of L.A. Care.
- Language recommended by L.A. Care's Legal Department to clarify that ECAC has the ability to add agenda items directly on the Board of Governors meeting agenda.

- Defining categories of consumers: a consumer member, a provider member, or a community-based member, and clarifying that these are for RCACs only.
- CCI Council members should all be consumers.
- There will be no dual membership on Consumer Advisory Committees. If one is eligible to be on both a CCI and RCAC committee, a consumer member will have to pick one committee. L.A. Care has 2.1 million members and there are limited seats on the Consumer Advisory Committees. This rule will allow more consumer voices for all kinds of issues from the community in both the committees.

The current operating rules say that RCACs can have 35 members with a target membership of 20. When Mr. Oaxaca pointed that out that RCAC target membership is 20, the RCAC/ECAC members misconstrued his comment and thought that Mr. Oaxaca was decreasing the number of members on the RCACs.

And to clarify, even though the target is 20 members, if there are 20 members in your RCAC region, and you bring in more applications, the committee can have a maximum of 35 people. Staff wants to take the focus off of quantity and focus on the quality of members.

- A section on CCI Councils members was added to the Operating Rules.
- Eligibility Checks have been added in the Application and Membership section. L.A. Care's Regulatory and Compliance Department performs Office of the Inspector General (OIG) and the General Services Administration (GSA) eligibility checks to comply with regulatory requirements.
- Provisional membership has always been in the operating rules. Staff is recommending to change the provisional membership from one year to six months.

Once a new member is approved by the board, the new member will have to show that they are ready to be an active committee member. They will attend and complete a new member orientation; they should attend at least one ECAC or board meeting and have a good attendance record at the RCAC or CCI meetings.

Staff wants to clarify that the new member would have to complete the entire six months before becoming an active member. A new member has to finish the whole six months of the provisional membership before they will be entitled to receive stipend for attending the meetings. A provisional member is eligible to get mileage reimbursement and transportation support through L.A. Care to attend and participate in L.A. Care activities, as well as support for dependent care and child care.

- A member appeals process is in the operating rules.
- The revised rules clarify that member names are run through a database for re-certification every month. The OIG and the GSA checks are clarified. A section was added regarding the

30-day grace period, which is already current practice. The eligibility check is to make sure that a consumer is still an L.A. Care member.

- The rules include clarification that consumer members receiving stipend or other support from L.A. Care are required to complete the annual code of conduct training and sign the acknowledgment form within 60 days of training in order to continue membership on the committee. All L.A. Care employees and Board Members are also required to take this mandatory annual code of conduct training.
- There is clarification that if a consumer member cannot be part of that RCAC if they move out of the RCAC geographic area, but may become eligible to be a part of a RCAC that includes the geographic area for the new address.

Community-based organization RCAC members who no longer work in the geographic area for the RCAC would also lose membership in that RCAC.

Mr. Oaxaca thanked Mr. Hsieh-Bigman for the presentation. Mr. Oaxaca noted that it is very likely that not all of ECAC members' very specific individual situation can be covered in the operating rules. The operating rules are designed to give L.A. Care a framework for dealing with overall operations of the advisory committees and the ECAC. The approach is to leave enough flexibility for staff to be able to deal fairly with individual situations.

Ms. Belton asked if consumers getting some kind of government assistance and doing advocacy work for L.A. Care using government monies may have legal issues.

Mr. Oaxaca noted that there could be a perception of conflict of interest. Consumer members who serve as chairs and vice chairs are receiving a stipend and certain reimbursements for leading RCAC meetings and other activities. L.A. Care consumer members that visit legislators locally or go to Sacramento to advocate for certain legislation or other policy changes that may impact their benefits will receive transportation/reimbursements for mileage, and for child or dependent care. L.A. Care does not pay a stipend for those activities because L.A. Care does not want to be in the position of paying lobbyists, and also does not want to put consumer members in a position that can be seen as a payment to take a certain position on legislation or public policy. L.A. Care wants consumer members to feel free to advocate for legislation and policies that they support.

Board Member Perez noted that the operating rules will be reviewed by the Governance Committee of the Board and because she and Board Member Gonzalez-Delgado are part of the Governance Committee, she feels she has the responsibility to ask questions.

- She understood that one of the key changes to the operating rule is the inclusion of CCI councils to the RCAC. Why are they called Consumer Advisory Committee (CAC)?

- She noted that the provisional membership in the current operating rule is one year with full voting rights and receiving stipends/reimbursements. The proposed revision to the operating rules will now be a six-month provisional membership without stipends.
- Board Member Perez noted in the operating rules a committee may have 35 members with a target membership of 20. She expressed her concerns about the membership report included in the meeting packet, which shows there have been no interest cards submitted. She has noticed that few members are submitted for board approval. She asked about the efforts being done to fill the targeted RCAC/CCI membership.
- Board Member Perez noted there is a redetermination of eligibility process through the American Healthcare Act and the Better Care Recognition Act. Some consumer members have expressed concerns about the proposed six-month period for recertification. Board Member Perez asked if there be an appeals process for consumer members who lose their health coverage.
- She asked if the consumer member that moves and must join another committee will have to wait in line to be approved as a member of the new RCAC or if consumer members can move from one RCAC to another without waiting to be on the new committee.

Mr. Oaxaca mentioned that the feedback and comments on the operating rules will be submitted to the board. If there is any feedback or comment, it should be discussed by ECAC.

- Board Member Perez commented that ECAC/RCAC members received many copies of the proposed revised operating rules, which showed that staff did their best that the revisions being proposed are clear for ECAC/RCAC members. She expressed her concern that unfortunately it seems that ECAC members did not even read the document because they don't seem to understand or they did not give importance to the information provided. Board Member Perez expressed that when she signs in as a member, she commits to the roles, responsibilities and rights of her membership.
- Board Member Perez added that she informed members that one of the responsibilities of being a RCAC/CCI member is to provide feedback to L.A. Care about their member experience. L.A. Care expects that members read and understand the information provided so that when members come to a meeting, they are ready to ask questions. At some of the meetings Board Member Perez attended, she noted that many people did not bring a copy of the operating rules which was provided to them. It is the members' responsibility to bring the documents provided to them when they attend meetings. Board Member Perez reiterated that once members become part of the committee, there are rights and responsibilities. Board Member Perez reminded the members that they are representing the people of their RCACs.

	<ul style="list-style-type: none"> • Board Member Perez noted that if she was going to approve something today, the written feedback or background would help her make a better decision. <p>Mr. Oaxaca responded to the issues that were brought up by Board Member Perez:</p> <ul style="list-style-type: none"> • Recruitment is not part of the operating rules discussion. Mr. Oaxaca offered to discuss the recruitment issue at a future meeting, including recruitment opportunities for CCI Councils. The target committee membership of 20 has been part of the operating rules and is not being revised. This is each committee's responsibility to look at their membership and determine a strategy for recruitment. <p>Regarding loss of eligibility, the state or the county determines a member's eligibility. The grace period included in the operating rules will allow flexibility. There is no appeal process with L.A. Care for loss of Medi-Cal membership. L.A. Care receives a list of eligible members and staff ensures that the committee members are on that list.</p> <ul style="list-style-type: none"> • If there is a reduction of the Medi-Cal re-determination period to six months, members will have to make sure that their documentation is in order and submitted. L.A. Care can legally, only provide stipends or reimbursements to enrolled members. • Members moving from one RCAC region to another will not wait in line as long as the member is eligible. • With regard to the review process that L.A. Care used for these revisions, and of providing a list to ECAC of the feedback during the review of these proposed rules, L.A. Care provided multiple opportunities for everyone who is affected by the rules to be involved and to bring feedback to both staff and to their respective RCAC/CCI chairs. Mr. Oaxaca thinks that is a role of the RCAC/CCI chairs to be a channel through which feedbacks comes to the ECAC and to the staff. <p>Staff have been very careful to evaluate the feedback received and incorporate it into the proposed rules. There were many opportunities for members to ensure that their feedback has been included in the proposed rules.</p> <p>There are other more formal processes that L.A. Care applies for more complicated issues that need to be improved. For example, to improve an environmental report document, there is a specific process to record every single bit of feedback.</p> <p>In response to the provisional membership, there was some feedback from some members and discussion about extending that period from the six months that staff is proposing to one year. Staff felt that six months was an appropriate provisional period to give the committee members time to see if that new member is committed and active, and for the new member to understand the expectations for being a RCAC/CCI member. It is up to ECAC to decide the time period for the provisional membership.</p>	
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Board Member Perez Hilda thanked Mr. Oaxaca, and noted that if written feedback and comments were to be provided to the Board of Governors, she would have expected that ECAC would also receive that information.

Mr. Oaxaca confirmed that a motion that will be submitted to the Governance Committee and Board of Governors will include report from staff about the review process, the feedback and comments received, and how those were incorporated in the document. There will be a 30-day posting of the revised rules before the final approval of the Board of Governors. Anyone can comment during that time, and feedback provided during that period will also be provided to the Board of Governors.

Ms. McFerson asked:

- About the phrase that indicates that the proposed rules will be revised according to the L.A. Care bylaws.
- For the actual geographic areas of the RCACs.
- Wanted clarification what "may be given an opportunity to speak," means.
- For clarification of the statement that "All participants in the CAC serve on a voluntary basis regardless of category. Membership is not a form of employment nor is it permanent relationship or right to serve implied or established by membership."
- For clarification of the rule changing the term for ECAC chairperson from two-year to one-year.

Mr. Oaxaca clarified that only the proposed changes to the operating rules and the RCAC/CCI member comments are being discussed. Unless ECAC decides to make recommendations to make additional changes, the remaining rules will be unchanged. Mr. Oaxaca offered to respond to Ms. McFerson's questions which are not related to the proposed revisions outside of the meeting.

Board Member González-Delgado noted that members are concerned about the proposed new health care act changes for redetermination for Medi-Cal eligibility from 12 months to 6 months. She added that members should not base their approval of the proposed operating rules revisions on fear. She thinks that the proposed revisions are minor and clear. She noted that there was not much input during the RCAC/CCI meetings she attended, and she urged the ECAC members to push forward and vote on the revisions.

Demetria Saffore, At-Large Member, expressed that she agreed with proposed revisions to the operating rules. She asked what will L.A. Care do to current active members are not fulfilling their obligation, if the provisional membership is revised to six months with no stipend. Mr. Oaxaca noted this falls into the category of recruitment and expectations from members, for discussion at a future meeting.

	<p>Ms. McLain commented about dual membership that certain people are concerned about why they have to choose one committee. Mr. Oaxaca noted that the revised rules will not allow dual memberships.</p> <p>With the time nearing 1:00 pm, by consensus, a majority of the Committee members voted to extend the meeting time so the Committee can finish discussion of today’s agenda items.</p> <p>Elda Sevilla, <i>At Large Member</i>, commented she hopes that the ECAC members read the document and to be careful with their vote because this will affect the members. Ms. Sevilla added that as Board Member Gonzalez-Delgado said, we do not know if the laws may change in the near future at the federal level.</p> <p><i>The Operating Rules are revised according to the provisions of Article XI of the L.A. Care Bylaws, which requires an affirmative vote of at least 9 (of 13) board members. That means an affirmative vote by 12 of the 17 ECAC members is required to revise the Operating Rules.</i></p> <p>A roll call vote was requested.</p> <p><u>Motion ECA 101.0717</u></p> <p>Motion to approve revisions to the Consumer Advisory Operating Rules, as attached.</p> <p>The ECAC members voted by roll call and the motion failed to pass. Staff will go back to the Committee for next steps.</p>	<p>Motion ECA 101 Failed.</p> <p>7 AYES (McFerson, Deh-Lee, Salazar, McClain, Saffore, Ballew, White)</p> <p>6 NAYS (Shelton, Vasques, Montes, Navarro, Sevilla, Estrefi)</p> <p>3 ABSTENTIONS (Guadarrama, Belton, Sanchez)</p>
<p>ECAC AD HOC COMMITTEE – MEETING EFFECTIVENESS</p>	<p>Ms. Belton reported that the ECAC Ad Hoc Committee for Meeting Effectiveness met on Thursday, June 29, 2017. <i>(A copy of the report may be requested by contacting CO&E.)</i></p> <p>The following recommendations were discussed:</p> <ul style="list-style-type: none"> ○ Agenda Items and Time <ul style="list-style-type: none"> ✓ Reduce the number of agenda items to allow more time for committee members discussions. ✓ The Chair will review the agenda and the time allotted to each agenda item. ✓ The CEO update should be included on the ECAC agenda monthly. If the CEO is unable to attend, this time will be used to manage time for unscheduled presentation. ✓ The time allotted for each agenda item will include time for questions and answers. ✓ Speakers/Presenters will be given a set amount of time to speak/present and another set amount of time to answer questions from ECAC members and the public. ✓ CO&E staff will keep time of all agenda items and coordinate with the Chair the timing. ○ ECAC Members and the Public <ul style="list-style-type: none"> ✓ Each person or member will be allowed to address the committee for two minutes. If time is limited, the Chair may notify speakers that time has been adjusted to one minute. 	

	<ul style="list-style-type: none"> ✓ Each person or member will have the opportunity to ask only one question or provide one comment. This will allow other ECAC members and the public to speak if time is allotted. ✓ The ad-hoc committee members reviewed the recommendation for time sharing. They recommend time sharing be revisited in the future as it will take some time for the ECAC members and the public to get acquainted to the new meeting process. ○ Comment Cards <ul style="list-style-type: none"> ✓ Comments cards will continue to be used and numbered in the order they are received. ✓ If members of the public who submitted a comment card were not called to comment due to time limitation, each will be given an opportunity to write down the question or comment on an index card and L.A. Care staff will follow-up. ✓ ECAC members who raise their hand and are not called by the Chair due to limited time will have the opportunity to write down their question/comment on an index card and L.A. Care staff will follow-up. ○ Pilot and Training <ul style="list-style-type: none"> ✓ The recommendation will be reviewed during the August ECAC Leadership Training and include training for members on how to frame questions and comments made during the ECAC meeting. ✓ The recommendations will be piloted at the September ECAC meeting. ✓ An educational sheet with the meeting process will be created to distribute to ECAC and the public. ✓ Training will also be conducted at RCAC/CCI meetings so consumer advisory committee members understand the meeting process. <p>Ms. McFerson asked if this will affect the use of Robert’s Rules of Order. Ms. Chitica clarified that it will not, this is to run the meeting smoothly and to manage the timing of the meeting.</p> <p>Ms. McLain made a statement that this is part of parliamentary procedures and Robert's Rules of Order. She had been told by staff that part of the At-Large Members’ responsibilities is to be the parliamentarian to help the committee follow procedures and help the chair run the meeting smoothly.</p> <p>By consensus, the recommendations were approved the Committee.</p>	
<p>ECAC LEADERSHIP TRAINING</p>	<p>Ms. Chitica announced that the next ECAC Leadership Training is on August 16, and will last until 4 PM. The extended time is to pilot the new meeting effectiveness format so ECAC members get used to how it will be implemented in September. She added that the training is mandatory for all RCAC/CCI Chairs and Vice Chairs</p> <p>Ms. Chitica reminded everyone that attendance will be recorded, and members who do not attend the required ECAC leadership training may be subject to the removal process.</p>	

TRANSPORTATION SURVEY	<p>Auleria Eakins, <i>Community Outreach Manager, CO&E</i>, referred the ECAC Members to the transportation survey form included in the meeting materials. She asked that ECAC Members complete and return them. Forms will also be available at RCAC meetings.</p> <p>Ms. Eakins referred ECAC members to a “Save the Date” flyer, for September 22, 8:30 to 3 pm, for a “Members in Focus” Conference. This will be held at St. Anne's Maternity Home. More information will be provided at the RCAC and ECAC next meetings.</p>	
PUBLIC COMMENT	<p>Mary Jo Fernando, commented that every time she attends a meeting, a particular individual disrupts the meeting, delaying the flow of the agenda.</p> <p>Daniel Kwong, RCAC 3, commented that he received John Baackes’ report regarding the new health care bill.</p> <p>Ms. McLain suggested adding an agenda item for ECAC members to request agenda items for future ECAC meetings.</p>	
ADJOURNMENT	The meeting adjourned at 1:30 pm.	

RESPECTFULLY SUBMITTED BY:

APPROVED BY

Jennifer Carabali, *Committee Liaison, Board Services*
Malou Balones, *Board Liaison, Board Services*
Linda Merkens, *Manager, Board Services*

Christina Deh-Lee, *ECAC Chair*

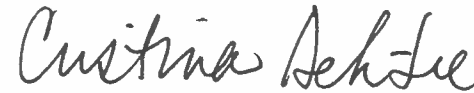
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Date 9/13/17