

# Board of Governors

## Executive Community Advisory Committee

### Meeting Minutes – April 11, 2018

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



**L.A. Care**  
HEALTH PLAN

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, ECAC Vice Chair</i>            Cynthia Contreas-Wood, <i>RCAC 3 Chair</i>            Michael Shelton, <i>RCAC 4 Chair</i>            Maria Sanchez, <i>RCAC 5 Chair</i>            Andria McFerson, <i>RCAC 6 Chair *</i>            Maria E. Núñez, <i>RCAC 6 Vice Chair</i>            Fátima Vázquez, <i>RCAC 7 Chair</i>            Maria Montes, <i>RCAC 8 Chair</i>            Cristina Deh- Lee, <i>RCAC 9 Chair, ECAC 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>Russell Mahler, <i>RCAC 1</i>            Virginia Martinez, <i>RCAC 2</i>            Estela Lara, <i>RCAC 2</i>            Daniel Kwong, <i>RCAC 3</i>            Pascuala Rosales, <i>RCAC 5</i>            Ley Ding, <i>RCAC 6</i>            Maria Manjarrez, <i>RCAC 7</i>            Maria Isabel Tamyó, <i>RCAC 8</i>            Ravy Morrath, <i>RCAC 9</i>            Marta Perez, <i>RCAC 10</i>            Sandra Aramburo, <i>RCAC 11</i>            Elizabeth Cooper, <i>CCI Area 2</i>            Joseph Airo, <i>CCI Area 3</i>            Annie Lee-Houang, <i>Public</i></p> <p>Eduardo Kogan, <i>Interpreter</i>            Paula Alvira, <i>Interpreter</i></p>	<p>Hilda Pérez, <i>Member, Board of Governors</i>            Layla Gonzalez-Delgado, <i>Member Advocate, Board of Governors</i>            John Baackes, <i>Chief Executive Officer, L.A. Care Health Plan</i>            Malou Balones, <i>Committee Liaison, Board Services</i>            Jennifer Carabali-Cunningham, <i>Committee Liaison, Board Services</i>            Idalia De La Torre, <i>Field Specialist Supervisor, CO&amp;E</i>            Kristina Chung, <i>Community Outreach Field Specialist, CO&amp;E</i>            Misty De Lamare, <i>Director, Communications</i>            Auleria Eakins, <i>Community Outreach Manager, CO&amp;E</i>            Erika Estrada, <i>Supervisor, Communication and Community Relations</i>            Felicia Gray, <i>Community Outreach Liaison, CO&amp;E</i>            Hilda Herrera, <i>Community Outreach Liaison CO&amp;E</i>            Maria Jurado, <i>Product Solution Manager, MCLA, Executive Director Administration</i>            Susan Ma, <i>CCI Field Specialist, Communication and Community Relations</i>            Rudy Martinez, <i>Safety and Security Specialist, Facilities Services</i>            Marie Mercado Grijalva, <i>Interim Director, Health Education, Cultural &amp; Linguistic Services</i>            Linda Merkens, <i>Manager, Board Services</i>            Nancy Molina, <i>CCI Liaison, Communication and Community Relations</i>            Candace Nafissi, <i>Senior Communication Specialist, Communication and Community Relations</i>            Francisco Oaxaca, <i>Senior Director, Communication &amp; Community Relations</i>            Jose Ricardo Rivas, <i>Community Outreach Liaison CO&amp;E</i>            Victor Rodriguez, <i>Community Outreach Liaison CO&amp;E</i>            Martin Vicente, <i>Community Outreach Field Specialist, CO&amp;E</i>            Mariah Walton, <i>CCI Field Specialist, Communication and Community Relations</i>            Jesucita Zuniga, <i>Member Retention Unit, Member Services Department</i></p>
<p>* <i>Excused Absent</i>    ** <i>Absent</i>            *** <i>Via teleconference</i></p>		

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<b>CALL TO ORDER</b>	Cristina Deh-Lee, <i>ECAC Chairperson</i> , called the meeting to order at 10:00 a.m.	
<b>APPROVE MEETING AGENDA</b>	<b>The Agenda for today’s meeting was approved as submitted.</b>	<b>Approved unanimously. 14 AYES (Ballew, Conteas-Wood, Deh- Lee, Guardarrama, Istrefi, Navarro, Nunez, Rodriguez, Salazar, Servino, Sevilla, Shelton, Vásquez and White)</b>
<b>APPROVE MEETING MINUTES</b>	Demetria Saffore, <i>CCI Area 1 Chair</i> , noted a correction on page 2 for Covered California. <b>The meeting minutes for March 14, 2018 were approved as amended.</b>	<b>Approved unanimously. 14 AYES</b>
<b>STANDING ITEMS</b>		
<b>ECAC CHAIR PERSON REPORT</b>  <b>APPROVAL OF RCAC/CCI MEMBERSHIP</b>	Chair Deh-Lee presented a motion to approve Maria Sara Monico Elias, Consumer, as RCAC 2 member, and Maria Magdalena Guerra, Consumer, as RCAC 7 member.  <i>(Cynthia Conteas-Wood, RCAC 3 Chair, left the meeting)</i>  <i>(Deaka McClain, At Large Member, joined the meeting)</i>	<b>Approved unanimously. 14 AYES</b>
<b>BOARD MEMBER REPORT</b>	Layla Gonzalez-Delgado, <i>Member Advocate, Board of Governors</i> reported that the Board of Governors met on April 5. John Baackes, <i>Chief Executive Officer</i> , reported that March 23 is his third year anniversary at L.A. Care. He reported that Phinney Ahn has been promoted to Executive Director of Medi-Cal.  Corinne Eldridge, <i>Executive Director at California Long-Term Care Education Center (CLTCEC)</i> , provided an update to the Board on the In-Home Support Services (IHSS) Home Care Integration Training Program, sponsored by L.A. Care. The program continues to positively impact the IHSS workforce and the consumers to whom they provide care. Since July 2017, 17 classes have been taught in five languages across nine Los Angeles County communities, and CLTCEC trained 579 IHSS providers who provide care for 696 L.A. Care members. L.A. Care renewed a contract for \$4.6 with CLTCEC to provide education and training for IHSS providers for dual-eligible beneficiaries for the period of May 15, 2018 through May 15, 2020.	

	<p>Ms. Degaldo continued her report; after a thorough review of Mr. Baackes' job performance, the Board approved an increase of 8% for a base salary of \$554,090.76 effective March 23, 2018. The Board believes Mr. Baackes' salary is a fair and appropriate amount. The health care industry is complex and heavily regulated. L.A. Care's goal is to provide the best possible care to its members, and to do so, we need to have experienced leadership. His salary increase reflects the Board's commitment to retain high quality leaders, which helps ensure that members receive the highest quality service. She added that Mr. Baackes has done a great job leading this organization during difficult times and has made everyone feel at ease.</p> <p>The Consumer Advisory Committee Operating Rules became effective at the Board meeting on April 5.</p> <p>Member Perez shared that on page 5 of last month's meeting minutes it notes that Estella Lara suggested staff mail out meeting packets two weeks prior then the meeting. Ms. De La Torre responded that members can choose to receive meeting packets via email. All members are responsible for updating contact information to avoid a delay in receive meeting packets.</p> <p>Elizabeth Cooper, <i>RCAC 2 member</i>, thanked staff for their attentiveness in caring for members. She applauded Rudy Martinez, <i>Safety and Security Specialist</i>, for his quick response to assist an ECAC member.</p>	
<p><b>UPDATE FROM CHIEF EXECUTIVE OFFICER</b></p>	<p>Mr. Baackes reported that every year L.A. Care the California Department of Health Care Services conducts an audit which incorporates a wide range of operational processes. During the 2015 onsite audit there were 50 findings, many of those repeated from prior years. By 2016, the findings were reduced to 15. During the 2017 audit, the adverse findings were down to six. The significant decrease demonstrates the improvement that L.A. Care has made as a health plan, to meet the rules and requirements of Medi-Cal.</p> <p>Mr. Baackes provided an overview of the different ways doctors engage with L.A. Care.</p> <p>1) L.A. Care Plan Partner Network contracts with three health plans, they in turn contract with the medical groups who in turn contract with the doctors. 2) L.A. Care IPA Network contracts with the medical groups who in turn contract with the doctors. 3) L.A. Care Direct Network contracts directly with the doctors.</p> <p>L.A. Care launched the direct network in 2016 to provide doctors with another option to participate in L.A. Care's network of providers. Doctors participating through a health plan or a medical group give up some of their payment for administration. The direct network allows L.A. Care to provide direct compensation to the doctors, which will keep them more engaged in the network.</p> <p>As a follow up to an ECAC member's question about cuts to the IHSS, Mr. Baackes noted that IHSS is funded through federal, state and county programs. L.A. Care has invested in training</p>	

	<p>IHSS workers because it sees the value in helping members achieve independence. There is a projected 6% increase in funding for the upcoming fiscal year due to several factors; an increase in minimum wage, a new law that IHSS workers will earn paid sick leave beginning in July, and restoration of service hours that were previously cut. The state and counties must agree on the dollar number that will support the 6% growth target.</p> <p>Ms. Saffore thanked Mr. Baackes for getting a few hands out of the cookie jar.</p> <p>Chair Deh-Lee thanked Mr. Baackes for all his hard work and noted that he earned everything.</p>	
<p><b>COMMUNICATION AND COMMUNITY RELATIONS UPDATE</b></p>	<p>Francisco Oaxaca, <i>Senior Director of Communications and Community Relations</i>, reported that the theme for advocacy day is still being worked out but that the general focus will be on member health disparities. There will be a call to action for lawmakers to recognize the poor health outcomes of minorities in their districts and to support opportunities to address the health of their constituents. Attendees will talk about the work of CAC members to disseminate health information in their individual communities through participation in health fairs, community events and festivals, which serves to brand L.A. Care as well as promote awareness in the community on health topics such as diabetes, heart health and the importance of cancer screenings. They will also highlight the CAC work plan partnerships which contribute to better health across Los Angeles County. Final training leading up to legislative day will take place offsite, staff will call members with detailed information.</p> <p>As a follow-up to the presentation that Roland Palencia, Community Benefits Program, and Alison Klurfeld, Safety Net Initiatives, provided at the February ECAC meeting, a video was shown to introduce L.A. Care's first member housed through L.A. Care's Housing for Health grant. Ma' Lissa was among the first L.A. Care members to qualify for the program, and in January she moved into an apartment with her three-month-old twins.</p> <p>A dozen interviews were conducted about the transportation benefit. Feedback provided by participants will help design a service model that will improve the delivery of transportation benefits to all members. Next step is issuing a request for proposal from vendors. L.A. Care is looking into creating a transportation department in the future.</p> <p>Member Perez shared her excitement to improve the transportation benefits provided. She asked if Hanan Obeidi, <i>Senior Director Medi-Cal</i>, would continue to provide updates to the Committee. She also requested an update on hospitals contracted with L.A. Care in the Pasadena area. Mr. Oaxaca responded that Ms. Obeidi will be providing quarterly updates. He suggested members from RCAC 3 share any confusion or issues with accessibility to hospitals in that area. He noted the information ECAC, RCAC and CCI Council members have provided regarding inaccurate urgent care information has helped the organization address the issue.</p>	

	<p>Idalia De La Torre, <i>Field Specialist Supervisor, CO&amp;E</i>, reported that a health navigator contacted each member from RCAC 3 to inform them that if their medical group is contracted with Huntington Memorial Hospital, the member is able to go there for any service needed. If not, members can still use that hospital for emergency services. Members from that region are now more aware of their options.</p> <p>Chair Deh-Lee shared that as long as a member has a Medi-Cal card they can go to any hospital.</p> <p>Mr. Oaxaca reported that Wilma Ballew will remain as Chair of the Area 2 CCI Council until the council membership has at least 5 people. As per the CAC Operating Rules, if a CCI Council falls below the minimum membership of 5 people the CCI Council must refrain from selecting a chair or vice-chair. When the 5-person membership minimum is achieved, the Area 2 CCI Council will be able to nominate and vote on a Chair and Vice Chair.</p>	
<p><b>GLOBAL MEMBER ISSUES</b></p>	<p>Ms. Saffore reported that members in her area continue to have issues getting prescriptions filled. She suggested more education be provided regarding access to prescription medication. She requested L.A. Care look into the number of pharmacies in the Antelope Valley area as well as follow up on the motion approved previously about a shortage of physicians in the Antelope Valley. Mr. Oaxaca recommended that members contact the Customer Solution Center about problems they are having with access. He noted that members can use their transportation benefit to go to the pharmacy to pick up their prescriptions. L.A. Care also offers prescriptions by mail.</p> <p>Ana Rodriguez, <i>RCAC 2 Chair, ECAC Vice Chair</i>, asked why her RCAC did not receive the meeting agenda in a timely manner. Ms. De La Torre responded it was human error and she apologized.</p> <p>Maria Montes, <i>RCAC 8 Chair</i>, asked why the cervical cancer test is conducted only every three years. A member in her RCAC developed a tumor and it grew in six months which put her life at risk. Mr. Oaxaca responded that L.A. Care follows standards that are set by the American Medical Association for the length of time between screenings. For individual cases members should contact a member navigator.</p> <p>Deaka McClain, <i>At Large Member</i>, shared that it was brought to her attention that the door to the L.A. Care reception office on the first floor is heavy and difficult to open. She encouraged staff to look into this to prevent anyone getting hurt. Mr. Oaxaca responded he will have someone from the facility department look into it.</p>	
<p><b>OLD BUSINESS</b></p>		
<p><b>C&amp;L PROGRAM OVERVIEW AND FY16-17 EVALUATION</b></p>	<p>Marie Mercado Grijalva, <i>Interim Director, Health Education, Cultural &amp; Linguistic Services</i>, provided the Committee with information about cultural and linguistic services provided to all members.</p> <ul style="list-style-type: none"> <li>• The overall goals of the C&amp;L Program are to:</li> </ul>	

- Meet the cultural and language needs of our members
- Make sure members have access to services, such as language assistance.
- Meet regulatory requirements
- Review and improve C&L programs and services
- L.A. Care Health Plan provides great care to our diverse members and received NCQA's Multicultural Healthcare Distinction in 2017
- The C&L Services Unit is in charge of:
  - No Cost language assistance services for members
  - Cultural Competency Program to train our staff and doctors to be culturally sensitive
  - Oversee agencies that L.A. Care works with
- The C&L services are important because:
  - Meet the needs of our members
  - Help members who do not speak English to better understand their health plan and doctors
  - Get preventative care and needed care
- L.A. Care tries to match you with doctors who speak your language
  - Doctors who speak a language other than English must be assessed and qualified
- If your doctor does not speak your language, L.A. Care offers language assistance services
- L.A. Care has several free language assistance services available which include the following:
  - Face-to-face interpreting is the most effective and preferred mode of interpreting. It is strongly recommended for members' medical appointments.
  - Telephonic interpreting is available 24-hours 7-days a week. It is used for over-the-phone encounters with members such as providing customer services and phone consultations. It could be also used when face-to-face interpreting is not available for medical appointments.
  - Translation services should be used when you need to send member informing materials such as letters, evidence of coverage and health education materials in their language.
  - Alternative format is a conversion of written member informing materials into large print or audio. This is to make the written materials more accessible to members who have visual impairment.
  - You can learn more about these services and how to access them in the Interpreting and Translation services training modules.
- Call Member Services at 1-888-839-9909 at least 10 business days before your doctor's visit and provide the following:
  - ID number
  - Members language, if they want a male or female
  - Date, time and length of appointment
  - Address, doctor's name

	<ul style="list-style-type: none"> <li>○ And reason for doctor’s visit</li> <li>● It is extremely important to use trained interpreters as they have experience, education, knowledge of medical terminology and the ability to be objective.</li> <li>● Members can call Member Services to update their language preference or request a document in your language or format.</li> <li>● L.A. Care provides translated materials in the threshold languages for Los Angeles County. In 2017, two new threshold languages were identified for PASC-SEIU.</li> <li>● Last year, the C&amp;L Services Unit processed 1,224 documents totaling over three million words. This year, 74,297 words were converted into other formats.</li> <li>● L.A. Care converts materials into alternate formats, including audio and large print.</li> <li>● Members are encouraged to provide feedback on services by completing the surveys that are mailed out following interpreting appointments. Also, completing the survey mailed out with health education material in member’s language.</li> <li>● If member is dissatisfied with services, they should file a grievance.</li> <li>● L.A. Care also has C&amp;L resources for the members and these materials are mailed to the members. <ul style="list-style-type: none"> <li>○ The Language card is a wallet size card that members can carry, and use to identify their preferred language and request for an interpreter. It is available in 14 languages.</li> <li>○ The language video is available in eight languages. It is a three-part educational video on the importance of using trained and qualified interpreting services, members’ rights to free interpreting services and how to access the services. The video is also available on L.A. Care’s website.</li> </ul> </li> </ul> <p>Member Gonzalez-Delgado shared that she was speaking on behalf of Ms. Cooper and RCAC 5 members that have addressed the issue that nothing related to culture is addressed by L.A. Care, especially regarding African-Americans and Native-Americans. She added that there might be some hesitancy in respect to eastern medicine versus western medicine. She asked how L.A. Care is addressing both things. Ms. Mercado Grijalva responded that L.A. Care has provided cultural competency trainings to both staff and providers that addresses those aspects. Last year L.A. Care trained more than 1,000 providers. Health disparities are L.A. Care’s current priority issue. Some of those health disparities are significant in both African-American and Native-American communities. There are initiatives in various departments throughout L.A. Care to address health disparities in a culturally competent way. She will suggest staff to present at a future RCAC 5 meeting to provide information on current initiatives that are being conducted.</p>	
<p><b>I-SPEAK ADVOCACY TRAINING PILOT PROGRAM SUCCESS</b></p>	<p>Auleria Eakins, <i>Manager, CO&amp;E</i>, provided an update on the <i>I-Speak</i> advocacy pilot program that wrapped up on April 6, 2018:</p> <ul style="list-style-type: none"> <li>● 28 members participated <ul style="list-style-type: none"> <li>○ All participants completed pre and post test</li> </ul> </li> </ul>	

- All participants completed a comprehensive exam of all information learned in sessions
- Using Clark and Estes Model, *I-Speak* focused on building increased knowledge, increased motivation and organizational influence
- The training included:
  - Understanding LAC Mission
  - International Health
  - Review other Health Care Systems
  - Managed Care 101
  - Introduction to Manage Care
  - Introduction to Data
  - Health Equity
  - Data Validation
  - Conference Calling
  - Introduction to Advocacy
  - Working with your Board Advocates
  - Technology and Health
  - Talking to your legislative representatives
- Next steps are:
  - Participants who signed up for Legislative Day in Sacramento will join ECAC members April 26 and May 16 for a final training session
  - Training dates will be scheduled for non-Legislative Day participants to receive legislative day training
  - All participants will be acknowledged by L.A. Care Board during the May Board meeting.
  - CO&E will host a focus group to understand strengths and future opportunities

Member Gonzalez-Delgado asked to make this a permanent program. Ms. Eakins responded that staff is currently looking into opportunities to improve the program in specific areas.

Member Perez asked how this program differs from previous advocacy training, and she reminded the Committee that advocacy for lift tables is still needed. Ms. Eakins responded this was a foundational training.

Ms. McClain thanked staff for this program. She asked if members of the public will be able to attend future meetings. Ms. Eakins responded that staff is looking into how the program can be beneficial to all members of the advisory committees.

Wilma Ballew, *CCI Area 2 Chair*, shared that she heard great feedback about the program. She suggested having mini training for new members. She asked about local legislative office visits. Ms. Eakins responded that focus groups will be created to be able to get as much feedback to



	<p>use to develop the program. She added that L.A. Care sponsors Sacramento legislative visits every other year. During the off year they conduct local legislative visits.</p> <p>Ms. Cooper thanked all staff and encouraged all to speak up and continue to advocate.</p> <p>Estela Lara, <i>RCAC 2 member</i>, shared that she participated in the program two years ago and noticed great improvements. The curriculum was great and all staff have been fundamental.</p>	
<p><b>NEW BUSINESS</b></p>		
<p><b>CALIFORNIA LONG-TERM CARE EDUCATION PRESENTATION</b></p>	<p>Annie Lee-Houang, <i>Director of Home Care Programs</i>, provided a summary of the program for Care Team Integration of the Home-based Workforce.</p> <p>L.A. Care began supporting the program in 2012 through a Healthcare Innovation funding award. The 6,000 consumer/home care provider pairs trained over three years included about 1,900 L.A. Care members. Through the training intervention there was a reduction in hospitalization, emergency room use and nursing home lengths of stay.</p> <p>The current program provided training for over 900 providers in 10 months, in six languages and across nine cities in Los Angeles County. Some of those providers assist more than one consumer. The program honors consumer directed care. Participants attend 35 hours of classroom training with about eight hours of take home assignments. Graduates demonstrate competence in five important roles in caring for the consumer: 1) Monitor, 2) Communicator, 3) Coach, 4) Navigator, and 5) Care aide.</p> <p>Pre- and post-training surveys illustrate improvement in knowledge and well-being for both the patient and the caregiver.</p> <p>Ms. Lee-Houang thanked L.A. Care for the partnership which will train an additional 1800 care providers in the next two years. She indicated that in addition to working more closely with the RCACs, the program would also seek deeper integration with care teams and develop a research partnership.</p> <p>Nesima Istrefi, <i>CCI Area 4 Chair</i>, thanked Ms. Lee-Houang for the information provided. She asked if the providers are trained on CPR and personal care. Ms. Lee-Houang responded yes providers receive training in both.</p> <p>Lluvia Salazar, <i>RCAC 11 Chair</i>, asked if training can take place in her RCAC region. Ms. Lee-Houang responded that currently they are recruiting for the next trimester that starts in June. That location will be suggested for the fifth trimester.</p> <p>Mr. Oaxaca thanked Ms. Lee-Houang for her presentation and shared that the Board passed a motion to fund the program for two more years.</p>	

<b>L.A. CARE 21<sup>ST</sup> ANNIVERSARY ACTIVITIES</b>	Mr. Oaxaca shared that L.A. Care is celebrating 21 years of elevating health care in Los Angeles County. L.A. Care is the nation’s largest publicly operated health plan, serving more than two million members. L.A. Care’s mission is to provide access to quality health care for vulnerable and low-income communities and residents, and to support the safety net required to achieve that purpose. As the Local Initiative plan in Los Angeles County, L.A. Care fills an important role as a partner to state and local governments, while supporting the health care safety net of providers. L.A. Care provides health care coverage and promotes access to care for hard-to-serve populations such as low-income seniors and people with disabilities, populations that many other health plans do not readily accept. L.A. Care is looking forward to many more years of serving Los Angeles County and remaining vigilant and a voice for its members and providers at the local, state, and national levels to ensure members have appropriate access to care. He thanked all consumer advisory council members and the members of ECAC for their dedication to improving the health care of L.A. Care members.	
<b>FUTURE AGENDA ITEMS</b>	Member Perez suggested membership and recruitment to be placed on a future agenda to discuss strategies to get more members in the CACs. She recommended that the committee revisit the time allotted for member discussion of agenda items not limiting response to only one topic.	
<b>PUBLIC COMMENT</b>	Ms. Cooper thanked all for everything they do for the members.	
<b>ADJOURNMENT</b>	The meeting adjourned at 1:08 pm.	

**RESPECTFULLY SUBMITTED BY:**

**APPROVED BY**

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

Christina Deh-Lee, *ECAC Chair*  
Date \_\_\_\_\_

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RESPECTFULLY SUBMITTED BY:

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

APPROVED BY



Christina Deh-Lee, *ECAC Chair*

Date 5/9/18