



**Alameda Alliance for Health**  
Community Advisory Committee Special Session Agenda

YOU MAY SUBMIT COMMENTS ON ANY AGENDA ITEM OR ON ANY ITEM NOT ON THE AGENDA, IN WRITING VIA MAIL TO “ATTN: ALLIANCE COMMUNITY ADVISORY COMMITTEE” 1240 SOUTH LOOP ROAD, ALAMEDA, CA 94502; OR THROUGH E-COMMENT AT [lee@alamedaalliance.org](mailto:lee@alamedaalliance.org). YOU MAY WATCH THE MEETING LIVE BY LOGGING IN BY COMPUTER. CLICK THE LINK PROVIDED IN YOUR EMAIL OR MAY LISTEN TO THE MEETING BY CALLING IN TO THE FOLLOWING TELEPHONE NUMBER: **1.510.210.0967**, CODE: **525 391 946#**. IF YOU USE THE LINK AND PARTICIPATE VIA COMPUTER, YOU MAY, THROUGH THE USE OF THE CHAT FUNCTION, REQUEST AN OPPORTUNITY TO SPEAK ON ANY AGENDIZED ITEM, INCLUDING GENERAL PUBLIC COMMENT. YOUR REQUEST TO SPEAK MUST BE RECEIVED BEFORE THE ITEM IS CALLED ON THE AGENDA. IF YOU PARTICIPATE BY TELEPHONE, YOU MAY SUBMIT ANY COMMENTS VIA THE E-COMMENT EMAIL ADDRESS DESCRIBED ABOVE OR PROVIDE COMMENT DURING THE MEETING AT THE END OF EACH TOPIC.

**PLEASE NOTE:** THE ALAMEDA ALLIANCE FOR HEALTH IS MAKING EVERY EFFORT TO FOLLOW THE SPIRIT AND INTENT OF THE BROWN ACT AND OTHER APPLICABLE LAWS REGULATING THE CONDUCT OF PUBLIC MEETINGS, IN ORDER TO MAXIMIZE TRANSPARENCY AND PUBLIC ACCESS. DURING EACH AGENDA ITEM, YOU WILL BE PROVIDED A REASONABLE AMOUNT OF TIME TO PROVIDE PUBLIC COMMENT. THE COMMITTEE WOULD APPRECIATE, HOWEVER, IF COMMUNICATIONS OF PUBLIC COMMENTS RELATED TO ITEMS ON THE AGENDA, OR ITEMS NOT ON THE AGENDA, ARE PROVIDED PRIOR TO THE COMMENCEMENT OF THE MEETING.

<b>Meeting Name:</b>	<b>Community Advisory Committee (CAC) Special Session</b>		
<b>Date of Meeting:</b>	December 28, 2023	<b>Time:</b>	10:00 AM – 11:00 AM
<b>Meeting Chair and Vice Chair:</b>	Melinda Mello, Chair Tandra DeBose, Vice Chair	<b>Location:</b>	Video Conference Call and in-person.  Oakland/Hayward Rooms 1240 South Loop Road Alameda, CA 94502
<b>Call In Number:</b>	Telephone Number: <b>1.510.210.0967</b> Code: <b>525 391 946#</b>	<b>Webinar:</b>	<a href="#">Click here to join the meeting</a> in Microsoft Teams. Link is also in your email.

**I. Meeting Objective**

Advise Alameda Alliance for Health on the development and implementation of its cultural and linguistic accessibility standards and procedures.

**II. Members**

Name	Title	Name	Title
Natalie Williams	Alliance Member	Mayra Matias Pablo	Parent of Alliance Member
Valeria Brabata Gonzalez	Alliance Member	Melinda Mello	Alliance Member
Cecelia Wynn	Alliance Member	Jody Moore	Parent of Alliance Member
Tandra DeBose	Alliance Member	Sonya Richardson	Alliance Member
Roxanne Furr	Alliance Member	Amy Sholinbeck, LCSW	Asthma Coordinator, Alameda County Asthma Start
Irene Garcia	Alliance Member		
Erika Garner	Alliance Member		
Mimi Le	Alliance Member		

**III. Meeting Agenda**

Topic	Responsible Party	Time	Vote to approve or Information
<b>Welcome</b> • Member Roll Call	<b>Melinda Mello</b> , Chair	5	Information
<b>Approval Agenda</b>			
1. Approval of Agenda	<b>Melinda Mello</b> , Chair	5	Vote
<b>CAC Business</b>			
1. CAC Charter Updates	<b>Linda Ayala</b> Director, Population Health & Equity	25	Vote
2. Resolution for CAC Selection Committee	<b>Danube Serri</b> Senior Legal Analyst	20	Vote
<b>Adjournment</b>	<b>Melinda Mello</b> , Chair	5	Next meeting: <b>March 14, 2024</b>

**Americans with Disabilities Act (ADA):** It is the intention of the Alameda Alliance for Health to comply with the Americans with Disabilities Act (ADA) in all respects. If, as an attendee or a participant at this



**Alameda Alliance for Health**  
**Community Advisory Committee Special Session Agenda**

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meeting, you will need special assistance beyond what is normally provided, the Alameda Alliance for Health will attempt to accommodate you in every reasonable manner. Please contact **Lena Lee** at **510.747.6104** at least 48 hours prior to the meeting to inform us of your needs and to determine if accommodation is feasible. Please advise us at that time if you will need accommodation to attend or participate in meetings on a regular basis.



# CAC Business

Linda Ayala

Director, Population Health & Equity  
and

Danube Serri

Senior Legal Analyst

# CAC Charter Updates

# SUMMARY OF CHANGES

Charter Section/Topic	Update(s)
Committee Name	<ul style="list-style-type: none"><li>• Changed committee name to Community Advisory Committee (CAC)</li></ul>
Purpose and Policy/Scope	<ul style="list-style-type: none"><li>• Added activities to existing committee member duties</li><li>• Added specific areas where committee member input and advice is needed</li></ul>
Selection Committee	<ul style="list-style-type: none"><li>• Added new details on forming a Selection Committee and process to select members</li><li>• Added details on who needs to be a part of the Selection Committee: Persons who sit on the Alliance BOG and Persons and community-based organizations that represent Alameda County.</li></ul>

# COMMITTEE DUTIES & AREAS OF FOCUS

1. Member and provider programs and trainings
2. Policies related to cultural and linguistic services and programs
3. Culturally appropriate service or program design
4. Priorities for health education and outreach program
5. Member satisfaction survey results
6. Marketing materials and campaigns
7. Provider network needs
8. Community resources and information
9. Population Health Management and Needs Assessment findings
10. Quality Improvement
11. How the Alliance improve health outcomes
12. Carved out services such as Dental, California Children's Services.
13. Coordination of care
14. Health equity
15. Accessibility of services
16. Alliance provider manual

# SUMMARY OF CHANGES

Charter Section/Topic	Update(s)
Membership	<ul style="list-style-type: none"><li>• Added new information on submission of a Demographic Report and membership make-up requirements: due: April 1<sup>st</sup> of each year)</li><li>• Added new guidelines on member resignations: each vacant seat must be replaced within 60 calendar days</li></ul>
Regular/Ad-hoc Guests	<ul style="list-style-type: none"><li>• Added information that regular and ad-hoc guests will not be counted towards a quorum</li><li>• Added examples of non-voting guests</li></ul>
Chair and Vice-Chair	<ul style="list-style-type: none"><li>• Added duties of both Chair and Vice-Chair</li><li>• Added information on Committee ability to select a temporary Chair when both Chair and Vice-Chair are absent, and quorum is present</li></ul>



# SUMMARY OF CHANGES

Charter Section/Topic	Update(s)
Meeting Minutes	<ul style="list-style-type: none"><li>• Added new website posting timeline and submission to DHCS: no later than 45 calendar days after each meeting</li><li>• Added meeting minutes will be reported to the Alliance Quality Improvement Health Equity Committee (QIHEC)</li></ul>
Non-agenda Items	<ul style="list-style-type: none"><li>• Added information on process to include non-agenda items by majority vote in cases of emergency and informing the public</li></ul>
Voting and Quorum	<ul style="list-style-type: none"><li>• Added information that electronic voting is an option once virtual attendance for meetings is approved</li></ul>

# SUMMARY OF CHANGES

Charter Section/Topic	Update(s)
Public Comment	<ul style="list-style-type: none"><li>• Added new information on ensuring an opportunity for the public to address meeting agenda items and non-agenda items</li></ul>
Terms of Service and Attendance	<ul style="list-style-type: none"><li>• Updated term from 1 to 2 years.</li><li>• Updated reason for dismissal if members fail to attend two (2) meetings of the committee within one (1) year.</li><li>• Added: Members can request a leave of absence if needed for up to one (1) year for health or personal reasons.</li></ul>
Alliance Support	<ul style="list-style-type: none"><li>• Included stipend information on attendance, transportation, and childcare</li></ul>

# CAC Selection Committee Resolution

RESOLUTION NO. 2023-01

A RESOLUTION OF THE COMMUNITY ADVISORY COMMITTEE CREATING THE COMMUNITY ADVISORY SELECTION COMMITTEE, A SUBCOMMITTEE OF THE ALAMEDA ALLIANCE COMMUNITY ADVISORY COMMITTEE

WHEREAS, the Alameda Alliance for Health (“Alliance”) Board of Governors has adopted *Bylaws*, Article 7 of which, allow for the creation of committees by way of resolution to carry out the purposes of the Board of Governors; and

WHEREAS, Resolution #2023-11, approved by the Alliance Board of Governors on December 8, 2023, established the Community Advisory Committee in accordance with Exhibit A, Attachment III, Section 5.2.11(E) of Contract #23-30212 (“the Contract”) between Alameda Alliance for Health and the Department of Health Care Services; and

WHEREAS, the Contract requires that the Community Advisory Committee have a Selection Committee, responsible for selecting its members; and

WHEREAS, the Community Advisory Committee has determined that the creation of a subcommittee is most appropriate to carry out the duties of the Selection Committee.

NOW, THEREFORE, THE COMMUNITY ADVISORY COMMITTEE OF THE ALAMEDA ALLIANCE FOR HEALTH DOES HEREBY RESOLVE, DECLARE, DETERMINE, AND ORDER AS FOLLOWS:

SECTION 1. The Community Advisory Selection Subcommittee, tasked with selecting members of the Community Advisory Committee, shall be created pursuant to this Resolution #2023-01.

SECTION 2. The Community Advisory Selection Subcommittee shall, in accordance with the Contract, be composed of person(s) on the Alliance Board of Governors, including representation in the following areas: Safety Net Providers including Federally Qualified Health Centers (FQHC), Behavioral Health Providers, Regional Centers (RC), Local Education Agencies (LEAs), Dental Providers, Indian Health Care Providers (IHCPs), and Home and Community-Based Service (HCBS) program Providers, and other persons and community-based organizations who are representatives within the Alliance’s Service Area adjusting for changes in membership diversity.

SECTION 3. The meeting schedule of the Community Advisory Selection Subcommittee shall be determined by its members and scheduled on an as-needed basis.

PASSED AND ADOPTED by the Community Advisory Committee at a meeting held on the 28<sup>th</sup> day of December 2023

\_\_\_\_\_  
CHAIR, Community Advisory Committee

ATTEST:

\_\_\_\_\_  
Secretary

# Thank you!

Please contact us if you have ideas to help improve  
Alliance Programs and Policies.

Linda Ayala, Director, Population Health and Equity

[layala@alamedaalliance.org](mailto:layala@alamedaalliance.org)

Mao Moua, Manager, Cultural and Linguistic Services

[mmoua@alamedaalliance.org](mailto:mmoua@alamedaalliance.org)



**ALAMEDA ALLIANCE FOR HEALTH  
MEMBER-COMMUNITY ADVISORY COMMITTEE (CAC) CHARTER**

**Purpose**

The purpose of the ~~Member-Community~~ Advisory Committee (CAC) is to provide a link between Alameda Alliance for Health (Alliance) and the community. The ~~policy/scope, structure, and functions, and scope~~ of the ~~Member Advisory Committee~~ CAC, as outlined in this charter, shall be in accordance with the Alliance’s Department of Health Care Services (DHCS) contract. In addition, pursuant to Title 22, California Code of Regulations, Section 53876(c), the ~~Member Advisory Committee acts as the Community Advisory Committee~~ CAC, ~~reflects the Alliance’s member population,~~ and advises the Alliance on the development and implementation of ~~policies and procedures that affect its~~ cultural and linguistic access, ~~quality, and health equity. ability standards and procedures, including policies and procedures that affect quality and Health Equity.~~

**Policy/Scope**

The Alliance will maintain ~~a diverse~~ CAC as a part of its implementation and maintenance of member and community engagement with ~~stakeholders, community advocates, traditional and Safety-Net providers and Members.~~ ~~Its Member Advisory Committee~~ AC to gather cultural and linguistic information from ~~stakeholders and the community that the Alliance serves. The MAC is chaired by an appointed MAC Chair, in collaboration with an appointed MAC Vice Chair and the Alliance’s designated MAC coordinator and planning committee.~~ he CAC encourages Alliance members and others to participate in public policy of the health plan to ensure the comfort, dignity, and convenience of members.

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The CAC is responsible for the following activities carries out, but is not limited to, the following duties:

- a) Identify and advocate for preventive care practices to be used by the Alliance.
- b) Develop and update cultural and linguistic policy and procedures related to committee's responsibilities include advising on cultural competency issues, and educational and operational issues affecting seniors, people who speak a primary language other than English, and people who have a disability.
- c) Advise on Alliance member- and provider-targeted services, programs, and trainings.
- d) Provide and make recommendations about the cultural appropriateness of communications, partnerships, and services.
- e) Review findings from the Population Needs Assessment (PNA) and discuss improvement opportunities on Health Equity and Social Drivers of Health and provide input on selecting targeted health education, cultural and linguistic, and Quality Improvement (QI) strategies.
- f) Provide input and advice, including, but not limited to, the following:
  - i. Culturally appropriate service or program design
  - ii. Priorities for health education and outreach program
  - iii. Member satisfaction survey results
  - iv. PNA findings
  - v. Marketing materials and campaigns
  - vi. Communication of needs for network development and assessment
  - vii. Community resources and information
  - viii. Population Health Management
  - ix. Quality
  - x. Health delivery systems to improve health outcomes
  - xi. Carved out services
  - xii. Coordination of care
  - xiii. Health Equity
  - xiv. Accessibility of services
  - xv. Development of the provider manual and clarification of new and revised policies and procedures in the manual.

The Member Advisory Committee AC encourages Alliance members and others to participate in public policy of the health plan to ensure the comfort, dignity, and convenience of members.

The Alliance shall ensure the fulfillment of the following requirements in accordance with Title 28, California Code of Regulations, Section 1300.69.:

- a) The CAC shall receive information from the Alliance on public policy issues,

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including financial information and data on the nature and volume of grievances and their disposition.

b) The CAC's activities and recommendations shall be regularly reported to the Alliance Board of Governors (BOG) at board meetings.

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## Membership Structure

### 1) CAC Selection Committee:

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The CAC convenes a n-Ad Hoc CAC Seselection- Subc-committee and is shall be created by the Alliance and will be tasked with selecting members of the CAC that reflect the general Medi-Cal and Group Care member populations, hard to reach populations, and those that experience health disparities in Alameda County.

The CAC Sselection Subc-committee shall consist of the following representation: persons who sit on the Alliance BOG, which include representation in the following areas:

a) Safety-Net Providers (including, Federally Qualified Health Centers, behavioral health, regional centers, local education authorities, dental providers, Indian Health Service facilities, home, and community-based service providers).

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b) Persons and community-based organizations that represent Alameda County.

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Persons who sit on the Alliance BOG, which include the following: Safety-Net Providers (including, Federally Qualified Health Centers, behavioral health, regional centers, local education authorities, dental providers, Indian Health Service facilities, home, and community-based service providers) Persons and community-based organizations that represent Alameda county.

### 2) Membership of CAC:

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The CAC shall consist of voting members (including the chair and vice-chair) and standing members regular/ad hoc guests of the committee. Membership on the committee must be changed as the Alliance's beneficiary population changes. At least one (1) CAC member will serve on the Alliance BOG. The Alliance Chief Executive Officer (CEO) will nominate CAC representatives to the BOG.

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The CAC membership and representation must reflect the Medi-Cal and Group Care populations in Alameda County, and representation must include the following:

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a) General population of the Alliance members (including, adolescents and/or

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- parents and/or caregivers of children, including foster youth)
- b) Diverse and hard-to-reach populations (including, populations that experience health disparities, such as those with diverse racial and ethnic backgrounds, genders, gender identity, and sexual orientation and physical disabilities).
- c) At least 51% of the committee shall be Alliance members (and/or the parents/guardians of Alliance members who are minors or dependents).

To ensure the CAC membership is representative of the communities in the Alliance service areas, the Alliance shall complete and submit annually to DHCS, an Annual CAC Member Demographic Report by April 1<sup>st</sup> of each year.

If a CAC member resigns, is asked to resign or is unable to serve on the CAC, the Alliance must replace the vacant seat within 60 calendar days. All new CAC candidates must follow the selection process with the CAC selection committee.

All CAC members shall complete a Conflict of Interest (COI) Form relating to any financial or other relationship to an Alliance competitor. A member's links with outside interests shall not impair the responsible exercise of his or her duties as a CAC member. **Voting Members:**

- ~~2) The Committee shall be comprised of up to 20 members, as follows:~~
  - ~~a) Alliance members~~
  - ~~b) Community advocates for hard-to-reach populations~~
  - ~~c) Safety net provider (minimum of one)~~
  - ~~d) Traditional provider (minimum of one)~~

The CEO shall not vote at CAC meetings.

At least one (1) CAC member will serve on the Alliance BOG. The Alliance Chief Executive Officer (CEO) will select CAC members to serve on the BOG.

~~3) **Regular/Ad-hoc Guests (non-voting):** At least 51% of the committee shall be Alliance members (and/or the parents/guardians of Alliance members who are minors or dependents).~~

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Regular/Ad-hoc-subcommittee guests shall not be counted towards a quorum or be subject to term limits, but they shall be allowed to participate fully in discussion and shall be required to complete a Conflict of Interest (COI) Form annually. N. Non-voting guests may include:

- a) CAC candidates
- b) Any persons from the public
- c) Guests who will present information being discussed at thata meeting.

#### 4) Officers of the CAC:

Officers of the CAC shall consist of the following:

- a) Chair
- b) Vice-Chair.

The CAC Chair and Vice-Chair shall be recommended by the CAC members by majority vote and approved by the CEO.

The CAC Chair and Vice-Chair shall be responsible for, but not limited to, the following:

- Start the meeting and review the agenda
- Puts off topic issues into a “Parking Lot” for future discussion.
- Decides whether to continue the discussion if a topic goes into overtime
- Ensures that everyone can take part in discussions.

If both the Chair and Vice-Chair of the CAC are absent or unable to act at a meeting where a quorum is present, the ChairCommittee will select one of the attending committee members or Alliance staff to act as Chair pro tempore, with all the authority appurtenant thereto, if the Chair has not selected a committee member to someone to preside at the meeting. At least one Member Advisory Committee member will serve on the Alliance Board of Governors. The Alliance Chief Executive Officer (CEO) will nominate MAC representatives to the Board of Governors.

#### 5) Meeting Agendas and Minutes:

- a) CAC meeting agendas shall be developed with input from CAC members.
- b) At least 72 hours prior to a regular meeting, an agenda and meeting materials shall be posted on the Alliance website in a centralized location.
- c) The agenda shall be posted at the main entrance of the Alliance's principal

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- offices and/or any other location freely accessible to members of the public.
- d) An agenda and meeting materials, including minutes of the previous meeting, shall be sent to the CAC members at the same time they are posted on the website.
- e) Meeting minutes shall be posted on the Alliance website and submitted to DHCS no later than 45 calendar days after each meeting.
- f) The minutes, including any CAC findings and/or activities are reported to the Quality Improvement Health Equity Committee (QIHEC).

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**6) Non-Agenda Items:**

- a) Prior to discussing a matter which was not previously placed on an agenda, the item must be publicly identified so that interested members of the public can monitor or participate in the consideration of the item in question.
- b) The CAC may discuss a non-agenda item at a regular meeting if, by simple majority vote, the CAC determines that the matter in question constitutes an emergency pursuant to §54956.5. (§ 54954.2(b)(1).) or that it should be discussed at a future meeting.

—Any discussion held pursuant to non-agenda items must be conducted in open session, since emergency meetings held pursuant to §54956.5 cannot be conducted in closed session.

The Member Advisory Committee’s membership and representation must reflect the Medi-Cal and Group Care populations in Alameda County. The Plan must make a good faith effort to include representatives from hard-to-reach populations, e.g., seniors and persons with disabilities. Membership on the committee must be changed as the Alliance’s beneficiary population changes.

**7) Voting:**

- a) A simple majority (50% of voting members + 1) shall mean an approval of the proposed action.
- b) Absent CAC members may not vote by proxy.
- c) Electronic voting may be an option if attending a regular meeting, virtually is an option for a meeting attendance and approved.

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**8) Quorum:**

- a) A quorum, defined as a simple majority (50% + 1) of voting members, must be present for the CAC to vote on any matter.
- b) If a quorum is not met at a regular scheduled meeting, the meeting shall be postponed to a future date or cancelled-continue as informational only.

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**9) Meeting Schedule and Special Participation:**

- a) The Alliance shall hold regular scheduled CAC meetings at least four (4) times per year.
- b) The Alliance must makemakes the regular scheduled CAC meetings open to the public.
- c) The Alliance may request special participation from the CAC members to provide input on topics such as, but not limited to, advancing member targeted efforts.

~~All members shall complete a Conflict of Interest form relating to any financial or other relationship to an Alliance competitor. A member's links with outside interests shall not impair the responsible exercise of his or her duties as a Member Advisory Committee member.~~

**10) Public Comment:**

- a) Every agenda for a regular meeting shall provide an opportunity for members of the public to directly address the CAC on any agenda items.
- b) Where a member of the public raises an issue which has not yet come before the committee, the item may be briefly discussed and put on the next meeting agenda for further discussion, but no action may be taken at that meeting.

**Membership Terms of Service and Attendance**

New ~~C~~MAC members will be invited to serve based on the membership criteria and with the approval of the ~~Committee~~CAC Selection Committee. The term of service for each ~~Member Advisory Committee~~CAC member shall be ~~one-two (21)~~ years. Committee members may serve more than ~~one-two (21)~~ term, at the discretion of the ~~CAC Selection Subcommittee~~eChief Executive Officer (CEO). ~~Each new and approved CAC member shall complete an Attendance Policy Attestation.~~

The ~~C~~MAC Selection Subcommittee ~~committee~~ may dismiss a member from the committee if ~~:~~

- ~~— they fail to attend two (2) meetings of the committee within one (1) year without an excused or approved absence. for reasons other than illness~~
- ~~— Members shall notify the Alliance of expected absences. Members can request a leave of absence if needed for up to one (1) year for health or personal reasons.~~

**Committee Meetings**

~~• The Member Advisory Committee Chair and Vice Chair shall be recommended by the MAC by majority vote and approved by the CEO.~~

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- The CEO shall not vote at Member Advisory Committee meetings.
- A quorum, defined as a simple majority (50% + 1) of voting members, must be present for the Member Advisory Committee to vote on any matter.
- The Member Advisory Committee shall hold regular meetings four times per year.
- Minutes of the Committee proceedings shall be prepared and maintained in the records of the Alliance, and available for review.
- An agenda and meeting materials, including minutes of the previous meeting, shall be prepared and submitted to the Committee members.

### Functions and Scope

The Member Advisory Committee's function is to provide information, advice, and recommendations to the Alliance on educational and operational issues in respect to the administration of the Alliance's cultural and linguistic services. These advisory functions include, but are not limited to, providing input on the following:

1. Culturally appropriate service or program design
2. Priorities for the health education and outreach program
3. Member satisfaction survey results
4. Findings of health education and cultural and linguistic group needs assessment
5. The Alliance's outreach materials and campaigns
6. Communication of needs for provider network development and assessment
7. Community resources and information

The Alliance shall ensure the fulfillment of the following requirements in accordance with Title 28, California Code of Regulations, Section 1300.69.:

### Duties and Responsibilities of All MAC Members

CAC members are responsible for, but not limited to, the following:

- Contribute their individual ideas and perspectives.
- Give each other the opportunity to contribute to discussions.
- Make recommendations for the consideration of Alliance staff and the Alliance Board of Governors.
- Suggest topics for discussion at CAC meetings.
- Avoid side conversations.
- Do not use committee membership status to try to obtain special extra services as an Alliance member.

- a) The Member Advisory Committee shall receive information from the Alliance on public policy issues, including financial information and data on the nature and volume of grievances and their disposition.

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~~b) The Member Advisory Committee's activities and recommendations shall be regularly reported to the Alliance Board of Governors at board meetings.~~

## Alliance Support

The Alliance will provide the following to the ~~Member Advisory Committee~~CAC:

- a) ~~Adequate staff support for committee meetings and activities.~~
  - b) ~~Maintenance of meeting minutes and records.~~
  - c) ~~Organizational updates and relevant materials.~~
  - d) ~~Interpretation: The Alliance will arrange for a bilingual interpreter to assist CAC members whose preferred language is not English. CAC members shall make a request for an interpreter at least 72 hours before a regularly scheduled meeting.~~
  - e) ~~Accommodations: CAC meeting location is wheelchair accessible. CAC members may call to request agendas and/or handouts in an alternative format, or any other disability-related accommodations needed to take part in the meeting. CAC members shall make a request for accommodation at least 72 hours before a regular scheduled meeting.~~
  - f) ~~Stipend: CAC members shall receive a \$75 stipend for each meeting attended virtually, or \$155 for each meeting attended in person. Stipends may be received by check or refillable e-credit card. Stipends may either be sent or provided in person after the meeting and attendance is confirmed. MCMAC members may choose not to accept the stipend.~~
  - g) ~~Transportation: The MAC stipendAlliance covers transportation costs. MAC members are responsible for arranging and paying for their own transportation by their preferred method (i.e., car, public transportation, taxi, Lyft, Uber, etc.). Members who cannot use regular transit because of a disability or disabling health conditions may request assistance from the Alliance to arrange for services from East Bay Paratransit.~~
  - h) ~~Childcare: CAC members will be reimbursed for the cost of childcare. at a maximum rate of \$20/hour. A reimbursement will be sent once a childcare invoice has been received and confirmed.~~
  - i) ~~The Alliance will provide support for CAC candidates to attend one (1) meeting prior to becoming a member for the purpose of observation.~~
  - j) ~~Sufficient resources, within budgetary limitations, to support CAC activities, member outreach, retention, and support.~~
- a) ~~Adequate staff support for committee meetings and activities~~
  - b) ~~Maintenance of meeting minutes and records~~
  - c) ~~Organizational updates and relevant materials~~
  - d) ~~Support to address barriers to participation in MAC (i.e., childcare,~~

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~~transportation, interpretation, flexible meeting times, and convenient location). The Alliance will provide support for MAC applicants to attend one meeting prior to becoming a member for the purpose of observation.~~

~~e) Sufficient resources, within budgetary limitations, to support Member Advisory Committee activities, member outreach, retention and support~~





## ALAMEDA ALLIANCE FOR HEALTH COMMUNITY ADVISORY COMMITTEE (CAC) CHARTER

### Purpose

The purpose of the Community Advisory Committee (CAC) is to provide a link between Alameda Alliance for Health (Alliance) and the community. The policy/scope, structure, and functions of the CAC, as outlined in this charter, shall be in accordance with the Alliance's Department of Health Care Services (DHCS) contract. In addition, pursuant to Title 22, California Code of Regulations, Section 53876(c), the CAC reflects the Alliance's member population, and advises the Alliance on the development and implementation of policies and procedures that affect cultural and linguistic access, quality, and health equity.

### Policy/Scope

The Alliance maintains a diverse CAC as a part of its implementation and maintenance of member and community engagement with stakeholders, community advocates, traditional and Safety-Net providers and Members. The CAC encourages Alliance members and others to participate in public policy of the health plan to ensure the comfort, dignity, and convenience of members.

The CAC carries out, but is not limited to, the following duties:

- a) Identify and advocate for preventive care practices to be used by the Alliance.
- b) Develop and update cultural and linguistic policy and procedures related to cultural competency issues, educational and operational issues affecting seniors, people who speak a primary language other than English, and people who have a disability.
- c) Advise on Alliance member and provider-targeted services, programs, and trainings.
- d) Provide and make recommendations about the cultural appropriateness of communications, partnerships, and services.
- e) Review findings from the Population Needs Assessment (PNA) and discuss improvement opportunities on Health Equity and Social Drivers of Health and provide input on selecting targeted health education, cultural and linguistic,

and Quality Improvement (QI) strategies.

- f) Provide input and advice, including, but not limited to, the following:
- i. Culturally appropriate service or program design
  - ii. Priorities for health education and outreach program
  - iii. Member satisfaction survey results
  - iv. PNA findings
  - v. Marketing materials and campaigns
  - vi. Communication of needs for network development and assessment
  - vii. Community resources and information
  - viii. Population Health Management
  - ix. Quality
  - x. Health delivery systems to improve health outcomes
  - xi. Carved out services
  - xii. Coordination of care
  - xiii. Health Equity
  - xiv. Accessibility of services
  - xv. Development of the provider manual and clarification of new and revised policies and procedures in the manual.

The Alliance shall ensure the fulfillment of the following requirements in accordance with Title 28, California Code of Regulations, Section 1300.69.:

- a) The CAC shall receive information from the Alliance on public policy issues, including financial information and data on the nature and volume of grievances and their disposition.
- b) The CAC's activities and recommendations shall be regularly reported to the Alliance Board of Governors (BOG) at board meetings.

## Structure

### 1) CAC Selection Committee:

The CAC convenes a CAC Selection Subcommittee and is tasked with selecting members of the CAC that reflect the general Medi-Cal and Group Care member populations, hard to reach populations, and those that experience health disparities in Alameda County.

The CAC Selection Subcommittee shall consist of persons who sit on the Alliance BOG, which include representation in the following areas:

- a) Safety-Net Providers (including, Federally Qualified Health Centers, behavioral health, regional centers, local education authorities, dental providers,

- Indian Health Service facilities, home, and community-based service providers).
- b) Persons and community-based organizations that represent Alameda County.

## **2) Membership of CAC:**

The CAC shall consist of voting members (including the chair and vice-chair) and regular/ad hoc guests of the committee. Membership on the committee must be changed as the Alliance's beneficiary population changes.

The CAC membership and representation must reflect the Medi-Cal and Group Care populations in Alameda County, and representation must include the following:

- a) General population of the Alliance members (including, adolescents and/or parents and/or caregivers of children, including foster youth)
- b) Diverse and hard-to-reach populations (including populations that experience health disparities, such as those with diverse racial and ethnic backgrounds, genders, gender identity, and sexual orientation and physical disabilities).
- c) At least 51% of the committee shall be Alliance members (and/or the parents/guardians of Alliance members who are minors or dependents).

To ensure the CAC membership is representative of the communities in the Alliance service areas, the Alliance shall complete and submit annually to DHCS, an Annual CAC Member Demographic Report by April 1<sup>st</sup> of each year.

If a CAC member resigns, is asked to resign or is unable to serve on the CAC, the Alliance must replace the vacant seat within 60 calendar days. All new CAC candidates must follow the selection process with the CAC selection committee.

All CAC members shall complete a Conflict of Interest (COI) Form relating to any financial or other relationship to an Alliance competitor. A member's links with outside interests shall not impair the responsible exercise of his or her duties as a CAC member.

The CEO shall not vote at CAC meetings.

At least one (1) CAC member will serve on the Alliance BOG. The Alliance Chief Executive Officer (CEO) will select CAC members to serve on the BOG.

## **3) Regular/Ad-hoc Guests (non-voting):**

Regular/subcommittee guests shall not be counted towards a quorum or be subject to term limits. Non-voting guests may include:

- a) CAC candidates
- b) Any persons from the public
- c) Guests who will present information being discussed at a meeting

#### **4) Officers of the CAC:**

Officers of the CAC shall consist of the following:

- a) Chair
- b) Vice-Chair.

The CAC Chair and Vice-Chair shall be recommended by the CAC members by majority vote and approved by the CEO.

If both the Chair and Vice-Chair of the CAC are absent or unable to act at a meeting where a quorum is present, the Committee will select one of the attending committee members or Alliance staff to act as Chair pro tempore, with all the authority appurtenant thereto, if the Chair has not selected someone to preside at the meeting.

#### **5) Meeting Agendas and Minutes:**

- a) CAC meeting agendas shall be developed with input from CAC members.
- b) At least 72 hours prior to a regular meeting, an agenda and meeting materials shall be posted on the Alliance website in a centralized location.
- c) The agenda shall be posted at the main entrance of the Alliance's principal offices and/or any other location freely accessible to members of the public.
- d) An agenda and meeting materials, including minutes of the previous meeting, shall be sent to the CAC members at the same time they are posted on the website.
- e) Meeting minutes shall be posted on the Alliance website and submitted to DHCS no later than 45 calendar days after each meeting.
- f) The minutes, including any CAC findings and/or activities are reported to the Quality Improvement Health Equity Committee (QIHEC).

#### **6) Non-Agenda Items:**

- a) Prior to discussing a matter which was not previously placed on an agenda, the item must be publicly identified so that interested members of the public

can monitor or participate in the consideration of the item in question.

- b) The CAC may discuss a non-agenda item at a regular meeting if, by simple majority vote, the CAC determines that the matter in question constitutes an emergency pursuant to §54956.5. (§ 54954.2(b)(1).) or that it should be discussed at a future meeting.

**7) Voting:**

- a) A simple majority (50% of voting members + 1) shall mean an approval of the proposed action.
- b) Absent CAC members may not vote by proxy.
- c) Electronic voting may be an option if attending a regular meeting, virtually is an option for a meeting attendance and approved.

**8) Quorum:**

- a) A quorum, defined as a simple majority (50% + 1) of voting members, must be present for the CAC to vote on any matter.
- b) If a quorum is not met at a regular scheduled meeting, the meeting shall continue as informational only.

**9) Meeting Schedule and Special Participation:**

- a) The Alliance shall hold regular scheduled CAC meetings at least four (4) times per year.
- b) The Alliance makes the regular scheduled CAC meetings open to the public.
- c) The Alliance may request special participation from the CAC members to provide input on topics such as, but not limited to, advancing member targeted efforts.

**10) Public Comment:**

- a) Every agenda for a regular meeting shall provide an opportunity for members of the public to directly address the CAC on any agenda items.
- b) Where a member of the public raises an issue which has not yet come before the committee, the item may be briefly discussed and put on the next meeting agenda for further discussion, but no action may be taken at that meeting.

**Membership Terms of Service and Attendance**

New CAC members will be invited to serve based on the membership criteria and with the approval of the CAC Selection Committee. The term of service for each CAC member shall be two (2) years. Committee members may serve more than two (2) term, at the discretion of the CAC Selection Subcommittee.

The CAC Selection Subcommittee may dismiss a member from the committee if they fail to attend two (2) meetings of the committee within one (1) year without an excused or approved absence. Members shall notify the Alliance of expected absences. Members can request a leave of absence if needed for up to one (1) year for health or personal reasons.

## **Alliance Support**

The Alliance will provide the following to the CAC:

- a) Adequate staff support for committee meetings and activities.
- b) Maintenance of meeting minutes and records.
- c) Organizational updates and relevant materials.
- d) Interpretation: The Alliance will arrange for a bilingual interpreter to assist CAC members whose preferred language is not English. CAC members shall make a request for an interpreter at least 72 hours before a regularly scheduled meeting.
- e) Accommodations: CAC meeting location is wheelchair accessible. CAC members may call to request agendas and/or handouts in an alternative format, or any other disability-related accommodation needed to take part in the meeting. CAC members shall make a request for accommodation at least 72 hours before a regular scheduled meeting.
- f) Stipend: CAC members shall receive a stipend for each meeting attended. CAC members may choose not to accept the stipend.
- g) Transportation: The Alliance covers transportation costs. Members who cannot use regular transit because of a disability or disabling health conditions may request assistance from the Alliance to arrange for services from East Bay Paratransit.
- h) Childcare: CAC members will be reimbursed for the cost of childcare. A reimbursement will be sent once a childcare invoice has been received and confirmed.
- i) The Alliance will provide support for CAC candidates to attend one (1) meeting prior to becoming a member for the purpose of observation.
- j) Sufficient resources, within budgetary limitations, to support CAC activities, member outreach, retention, and support.