Board of Governors

Executive Community Advisory Committee

Meeting Minutes – February 9, 2022

1055 W. 7th Street, Los Angeles, CA 90017

ECAC Members	RCAC Members/Public	L.A. Care Board of Governors/Senior Staff
Russell Mahler, *RCAC 1 Chair **	Pablo De La Puente, *Interpreter ****	Hilda Pérez, *Member, Board of Governors ****
Estela Lara, *RCAC 2 Chair ****	Sula Godfrey-Jensen, *Interpreter ****	Layla Gonzalez, *Advocate, Board of Governors ****
Cynthia Conteas-Wood, *RCAC 3 Chair, ECAC Vice-Chair ****	Isaac Ibarlucea, *Interpreter ****	John Baackes, *Chief Executive Office, L.A. Care ****
Silvia Poz, *RCAC 4 Chair ****	Eduardo Kogan, *Interpreter ****	James Kyle, *MD, M.Div., Director of Quality, L.A. Care ****
Maria Sanchez, *RCAC 5 Chair ****	Alex Mendez, *Interpreter ****	Richard Seidman, *M.D, Chief Medical Officer, L.A. Care ****
Andria McFerson, *RCAC 6 Chair ****	Ruth Nuno, *Interpreter ****	Miriam Admasu, *Department Assistant, CO&E ****
Fátima Vázquez, *RCAC 7 Chair, ECAC Chair ****	Marcia Ramos, *RCAC 1, Public ****	Malou Balones, *Board Specialist, Board Services ****
Ana Romo, *RCAC 8 Chair ****	Maria Teresa Rabaja, *RCAC 1, Public ****	Idalia De La Torre, *Field Specialist Supervisor, CO&E ****
Tonya Byrd, *RCAC 9 Chair ****	Silvia Quezada, *RCAC 4, Public ****	Auleria Eakins, *Manager, CO&E ****
Damares O Hernández de Cordero, *RCAC 10 Chair ****	Richard Hernandez, *RCAC 9, Public ****	Joseph Gonzales, *Unified Communication Mobility Engineer I, IT Operations & Infrastructure****
Maria Angel Refugio, *RCAC 11 Chair ****	Reba Stevens, *Public*	Penny Griego, *Media Relations Specialist II, Communications*
Lluvia Salazar, *At-Large Member ****	Sal Lua, *Public*	Hilda Herrera, *Community Outreach Field Specialist, CO&E ****
Deaka McClain, *At Large Member ****	Gloria Luprecio, *Public*	Linda Merkens, *Senior Manager, Board Services ****
	Dawn Jackson, *Los Angeles, USAF,Public ****	Frank Meza, *Community Outreach Field Specialist, CO&E ****
		Nicole Moussa, *Manager, Technical Information, Pharmacy & Formulary ****
		Francisco Oaxaca, *Chief, Communication and Community Relations ****
		Cindy Pozos, *Community Outreach Field Specialist, CO&E ****
		Jose Ricardo Rivas, *Community Outreach Field Specialist, CO&E ****
		Victor Rodriquez, *Board Specialist, Board Services ****
		Prity Thanki, *Local Government Advisor, Government Affairs ****
		Martin Vicente, *Community Outreach Field Specialist, CO&E ****

** Excused Absent ** Absent*

**** Via teleconference*

***** Via teleconference (with technical issues)*

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
CALL TO ORDER	Fatima Vazquez, *ECAC Chair*, read the instructions for today's meeting agenda. She advised the public to please recheck these directions for updates prior to the start of the meeting. She said: "This meeting will be conducted in accordance with the provisions of the Ralph M. Brown Act, allowing members of the Executive Community Advisory Committee, members of the public and staff to participate via teleconference, because State and Local officials are recommending measures to promote social distancing. Accordingly, members of the public should join this meeting via teleconference as follows: https://zoom.us/j/98097077222 Teleconference Call –In information/Site Call-in number: 1-415-655-0002 Participants Access Code: 2495 589 4468 (English) Call-in number: 1-415-655-0002 Participants Access Code: 2496 220 4901 (Spanish) Members of the Executive Community Advisory Committee or staff may also participate in this meeting via teleconference. The public is encouraged to submit public comments or comments on Agenda items in writing by email to COEpubliccomments@lacare.org or by sending a text or voicemail to (213) 605-4197. Attendees who log on using the URL above will be able to use "chat" during the meeting for public comment. Attendees must be logged into Zoom to use the "chat" feature. The log in information is at the top of the meeting Agenda. This is a new function during the meeting so public comments can be made live and direct. 1. The "chat" will be available during the public comment periods before each item. 2. To use the "chat" during public comment periods, look at the bottom of the screen for the icon that has the word, "chat" on it. 3. Click on the chat icon. It will open a window. 4. Select "Everyone" in the To: window. 5. Type the public comment in the box. 6. After hitting the enter key, the message is sent and everyone can see it. 7. The chat message, text, voicemail, or email must indicate if the submitter wishes to be identified or remain anonymous, and must also include the name of the item to which the comment relates. 8. L.A. Care staff will read the chat messages for up to three minutes during public comment so people who are on the phone can hear the comment.	

	Your comments can also be sent by text, voicemail, or email. If we receive your comments by 10:00 a.m. on February 9, 2022, it will be provided to the members of the Executive Community Advisory Committee at the beginning of the meeting. The chat message, text, voicemail, or email must indicate if you wish to be identified or remain anonymous, and must also include the name of the item to which your comment relates. If you do not indicate an Agenda item for your comment, your comment(s) will be read for up to 3 minutes at item VIII Public Comments on the Agenda. Once the meeting has started public comments should be submitted prior to the time the Chair announces public comments for each agenda item and staff will read those comments for up to three minutes. Chat messages submitted during the public comment period for each agenda item will be read for up to three minutes. If your public comment agenda is not related to any of the agenda item topics, your public comment will be read for up to 3 minutes at item VIII Public Comments on the agenda. These are extraordinary circumstances, and the process for public comment is evolving and may change at future meetings. We thank you for your patience. Please note that there may be delay in the digital transmittal of emails, texts and voicemail. The Chair will announce when public comment period is over for each item. If your public comments are not received on time for the specific agenda item you want to address, your public comments will be read at the public comment section of the agenda. The purpose of public comment is that it is an opportunity for members of the public to inform the governing body about their views. The Executive Community Advisory Committee appreciates hearing the input as it considers the business on the Agenda. All votes in a teleconferenced meeting shall be conducted by roll call. If you are an individual with a disability and need a reasonable modification or accommodation pursuant to the Americans with Disabilities Act please contact the Community Outreach & Engagement staff prior to the meeting for assistance by text (213) 605-4197 or by email to COEpubliccomments@lacare.org." Idalia De La Torre*, Field Specialist Supervisor, CO&E* called roll. Chairperson Vazquez called the meeting to order at 10:11 a.m.	

APPROVE MEETING AGENDA	Cynthia Conteas-Wood, *RCAC 3 Chair*, asked that New Business be discussed before Old Business. Andria McFerson, *RCAC 6 Chair*, stated that she agrees with changing the order of the agenda items. She has changes to the way her motion is written, but due to time she was not able to make them. **The Agenda for today's meeting was approved with the requested changes.**	**Approved by roll call. 11 AYES (Byrd, Hernandez De Cordero, Lara, McClain, Poz, Romo, Salazar, Sanchez, Conteas-Wood, Refugio, Vazquez)** **1 Abstention McFerson**
APPROVE MEETING MINUTES	Member Conteas-Wood stated that on page 25, second sentence, where it reads "German News, 6 of 8…" it should read "60%." Lluvia Salazar, Member At-Large, questioned why the comment she made during the Community Resource Center update was not noted in the meeting minutes. Her comment should read "Member Salazar asked that the resource centers please provide food that is not expired, and that is in good condition for all." Victor Rodriguez, *Board Specialist, Board Services,* responded that her comments will be recorded in the February 9 meeting minutes. Mr. Rodriguez noted that the year at the top of the meeting minutes should be 2022, not 2021. **The January 12, 2022 meeting minutes were approved with the changes noted above.**	**Approved by roll call. 12 AYES (Byrd, Conteas-Wood, Hernandez De Cordero, Lara, McClain, McFerson, Poz, Refugio, Romo, Salazar, Sanchez and Vazquez)**
STANDING ITEMS		
UPDATE FROM CHIEF MEDICAL OFFICER	Richard Seidman, *MD, MPH*, *Chief Medical Officer*, gave the following report: Overall COVID-19 cases and hospitalizations have decreased worldwide, countrywide and locally in LA County. While cases and hospitalizations are decreasing, deaths continue to increase. Deaths lag behind infections and hospitalizations. Data is showing positive trends. There is still a long way to go locally and globally. Los Angeles is seeing announcements from state and local public health departments, and anticipated relaxation of masking and other COVID related mandates. Los Angeles County announced that once hospitalizations stabilize at or below 500 per day for 7 days in a row, it will relax outdoor masking mandates. It is expected that within the next couple of weeks, will achieve lower case counts. This is good news; we are going in the right direction. Public health experts are still urging caution. He cautioned everyone that is gathering for the Super Bowl to gather in smaller crowds and that testing is conducted in advance of a gathering. He noted that gathering outdoor is better than indoors.	

	He reported that students may opt for online learning if they are not vaccinated. L.A. Care data shows that of its 2.5 million members, in the past week there were 3k COVID-19 cases and 300 hospitalizations, lower than the week prior. In the past week there were 64 deaths, more than the week prior. PUBLIC COMMENT **Submitted by Elizabeth Cooper, *RCAC 2 Member*, on February 8, 2022 via phone call:** *Good Morning ECAC members and Dr. Seidman. Thank you for your presentation to the ECAC and public. I would like to bring to your attention Dr. Seidman, that I appreciate the work you and your staff are doing. I would like the Community Health Equity Council (CHEC) staff to be more transparent with all RCAC members and provide them the opportunity to participate in CHEC meetings. Thank you for the information you presented to us today we will be sharing with the community.* *How can members obtain the free home testing kits?* Dr. Seidman responded there are a couple of different ways that members can access the free test kits. The information is posted for members on the L.A. Care website under COVID-19 resources. The free test kits are available by applying for four free test kits from the federal government that are mailed through the U.S. Postal Service. Another way that people can get free test kits is by going to a Medi-Cal participating pharmacy. Hilda Perez, *Member Representative, Board of Governors*, thanked Dr. Seidman for the information that he presented. She asked for his opinion about the statewide indoor mask mandate expiring on February 15. She noted that people without vaccinations will still have to wear masks. Dr. Seidman responded that recommendations are coming from the state and L.A. County departments of public health. The cities of Pasadena and Long Beach have their own departments of public health. He noted that the recommendations align with the Los Angeles County Department of Public Health. Local health authorities can have recommendations or requirements that are stricter than the statewide recommendations or county requirements. Los Angeles County is estimating that we're a couple of weeks away from Los Angeles County Public Health lifting the requirement for indoor masking for vaccinated people. Currently, we're still in the highest level of community transmission, based on a case rate per 100,000 populations. The county has been coming down by about 50% week over week. So it's reasonable within the next couple of weeks, it'll move from the highest community transmission through substantial down to moderate, which is about half of where it is today. And then public health has announced	

	that their plan is, that they want the rate to stay at the moderate or below of community transmission for at least two weeks before the indoor mask mandate is lifted. Member McFerson wished everyone a happy Black History Month and thanked Dr. Seidman for his report. She asked if it is possible for L.A. Care to give out tickets for Rams games in exchange for getting members vaccinated. She noted that L.A. Care is working with the Rams now. She believes it will help get many people vaccinated. She noted that Mental Health Awareness Month is coming up and she thinks it's important, because there are a lot of people suffering out here for many other things besides just being born with a mental health disability. She asked Dr. Seidman if staff can present on this topic and make it an open forum possibly through the Equity Steering Council. James Kyle, *Chief of Equity and Quality Medical Director, Quality Improvement,* responded that he is not in control of the committee, but is a member of the committee. He suggested that CO&E can help coordinate member participation. Silvia Poz, *RCAC 4 Chair*, stated that not all pharmacies give out COVID test kits. She would like this discussed. Dr. Seidman responded that some pharmacies require prescriptions, and he noted that Pharmacists can sign prescriptions. Deaka McClain, At-Large Member, stated that she did not know they she can visit a Medi-Cal contracted pharmacy to obtain a free test kit. She thanked him for that update. She noted that she was unable to get a test kit from the federal government, because only one request is eligible per household. She is happy to know that she can obtain one from a Medi-Cal contracted pharmacy. She noted the importance of getting this information out. Dr. Seidman responded that he will pass on the message to the Communications team.	
UPDATE FROM CHIEF EXECUTIVE OFFICER	John C. Baackes, *Chief Executive Officer*, gave the following update: As L.A. Care has advised for a long time, the pharmacy benefit was taken away from L.A. Care and all the other managed care plans on January 1. The state is now running the prescription drug program through a contractor called Magellan Rx Management. L.A. Care expected that with this huge move of 14 million people out of their various plans and into a new program, that there would be some glitches. And there has been some. There was an article this morning in L.A. Times online about the glitches that the state is experiencing through their pharmacy vendor. L.A. Care has not experienced as many issues with our members or participating pharmacies as those he has been hearing about from the other health plans. He noted that wait times are very long. If anyone is in dire need of a prescription to be filled, they should call the member services department and let L.A. Care know. Many health plans disbanded their Pharmacy teams, but L.A. Care did not due to its Covered California and Cal MediConnect lines of business. L.A. Care will try to assist members in getting prescriptions filled through Magellan.	

	He reported that that there is a proposal for Kaiser Permanente to be directly contracted with the state for Medi-Cal managed care. If this happens, Kaiser will no longer be a plan partner of any of the public plans that they now subcontract with. L.A. Care had heard rumors for a couple of weeks, but the state confirmed it last Thursday at 5:00 p.m. in a call with CEOs of the existing Medi-Cal managed care plans. Kaiser has been a plan partner from the inception of L.A. Care. This deal was made in the Governor's office behind closed doors, without input from stakeholders that might have a vested interest in the outcome. Legislative approval is required for this contract to go forward. So it will show up in the budget process, and be voted on there. L.A. Care, along with the other local health plans, will oppose this legislation. He noted that Kaiser requires permission to enroll through Medi-Cal. Kaiser will only allow enrollment for people who previously had health coverage with Kaiser or are directly related to someone enrolled in Kaiser. As a result, the number of people that are enrolled with Kaiser are mostly very low risk. They have a higher proportion of mothers and children than other health plans. They have a disproportionately low number of people with disabilities, mental health problems or who are experiencing homelessness. By removing Kaiser as a plan partner and setting them up as a competitor, people will not have the same choices. This will also affect quality ratings and future costs. That might not be of importance directly to members, but the Plan Partner relationship has worked well, and the reasons for the change is a mystery to most of us. He added that Kaiser is considered a commercial health plan, and any other commercial health plan which are plan partners, like Anthem Blue Cross and Blue Shield Promise, have to go through a competitive bidding process to participate in Medi-Cal. Kaiser has been handed this deal without competitive bidding and without the transparency and scrutiny. *(A copy of L.A. Care Statement on DHCS Announcement about Kaiser Permanente's Statewide Medi-Cal Contract can be obtained through CO&E.)* PUBLIC COMMENT **Submitted by Elizabeth Cooper, *RCAC 2 member*, on Feb 8, 2022, via phone call:** *Good morning Mr. Baackes, first I would like to welcome you as a member of the RCAC and community advocate. Mr. Bacckes, I would like to bring to your attention as CEO the Communications department's lack of communication/participation of members who are interested and who were once eligible to participate. Recently a few weeks ago the Communications dept. invited members to participate in a survey. I am disappointed as one who has supported, participated, etc. in most issues that they have addressed. I am requesting you as the CEO of L.A. Care to please inquire and look into the matter regarding member participation. It cries out for your response and inquiry. Many members of a public agency, of public programs of L.A. Care should be*	

	considered for participation. Your inquiry on behalf of my concern will be welcomed. *Finally, for the month of February Afro-American history month, which is everyone's history month. I thank you all for your interest.* **Submitted by Dawn Jackson, *Los Angeles, USAF*, February 9, 2022 at 10:54 AM via chat:** *I am a Kaiser Permanent Psychiatric Patient and was directed to Magellan - got through with the advice and brought it back to KP staff have been denied my prescriptions and am in a grievance process* *KP's billing system is not upgraded enough to bill for the Medi-Cal Rx changes from 1/1/2022. I have been a KP member for 7 years and have an active insurance. I am a disabled veteran now left unmedicated having to take time off work and have been unable to be connected to a social worker or veteran liason to guide me through this claims problem process to even get my prescription* Mr. Baackes wished everyone a happy Black History Month. He is unsure what survey Ms. Cooper is referring to he will have to look into it. He noted that Kaiser is no longer managing their prescription drug program for Medi-Cal members. Kaiser Medi-Cal members will also have to go through the state to get their prescriptions filled. Chairperson Vazquez stated that there is enough time on the agenda for two more questions. Member McFerson stated that every ECAC member should be able to speak. She thanked Mr. Baackes for his report. She noted that they are all a family and they should fight towards positive legislation and health coverage. She asked if there can be incentives for getting vaccinated. She stated that the Black community is reluctant to get health care because they are not diagnosed properly. She asked how RCAC members can assist with creating legislation. Mr. Baackes stated that the legislation to approve Kaiser's contract is fairly new. L.A. Care is working with other health plans and safety net providers to oppose the legislation. He noted that these types of contracts without competitive bidding have happened twice under the current Governor. He thanked Ms. McFerson for her interest in volunteering.	
UPDATE FROM GOVERNMENT AFFAIRS DEPARTMENT	Prity Thanki, *Local Government Advisor, Government Affairs Department*, gave a Government Affairs update *(A copy of the report can be obtained from CO&E.)*. State Budget Update On January 10, 2022 Governor Gavin Newsom unveiled a $286.4 billion budget proposal.	

	He is projecting a $46 billion surplus which is a combination of higher revenue collections for the past two budgets and higher than anticipated revenue for the 2022-23 budget. The budget also includes a record $35 billion reserve. The proposed state budget is the starting point for the budget process. Over the course of the next five months, Governor Newsom will negotiate with the Legislature on a final budget. It's no surprise that the pandemic continues to influence state budget negotiations. The Governor is requesting that the Legislature take action now to approve $1.4 billion to help support immediate needs related to the state's COVID-19 response. He is also asking the Legislature to allocate an additional $1.3 billion for the state's COVID-19 response for the 2022-23 fiscal year. In May, Governor Newsom will present a revised budget that may look different than what the Governor proposed in January because it will consider the state's economy as a result of federal interest rates as well as potential changes in the future due to the pandemic. The Legislature will have until June 15 to pass the budget and the Governor will have 12 days to review, sign or veto the budget bill. Once the budget is signed by the Governor it goes into effect on July 1. The budget year runs from July 1 through June 30. Highlights of the January Budget, specifically health related proposals impacting L.A. Care Members: Medi-Cal Expansion of Coverage Last year, Med-Cal was expanded to include low-come Californians 50 and older regardless of immigration status. Healthcare coverage for these individuals is set to begin on May 1, 2022. The Governor's January proposal expands full-scope Medi-Cal coverage to an estimated 700,000+ undocumented adults ages 26 through 50, effective no sooner than January 1, 2024. This would make California the first state in the nation to cover all adults, and with the recent increase in the income level for seniors and people with disabilities, as well as the scheduled elimination of the Medi-Cal assets test by January 1, 2024, all adults under 138 percent of the poverty level will be eligible for free, full-scope Medi-Cal. Medi-Cal Redeterminations The proposal contains funding to assist counties with the expected backlog of eligibility redeterminations that will need to be conducted when the pandemic is over. As a reminder, most Medi-Cal beneficiaries do not have to go through the annual redetermination process during the pandemic. Elimination of Medi-Cal Premiums Effective July 1, 2022, the budget proposes to eliminate Medi-Cal premiums for about 500,000 Medi-Cal enrollees who pay monthly premiums for coverage. This policy change reduces premiums to zero for the Optional Targeted Low Income Children Program	

	(OTLICP), all state Children's Health Insurance Programs (CHIP), and the 250% Working Disabled Program. Cognitive Health Assessments The budget proposal contains funding for Medi-Cal to cover an annual cognitive health assessment (screening for dementia and Alzheimer's Disease) for individuals 65 or older, if they are ineligible for such service under Medicare. This benefit was passed into law last year and the budget proposal appears to extend the implementation date to July 1, 2022. Behavioral Health Services and Supports Bridge Housing Proposed budget funding for behavioral health bridge housing to address the immediate housing and treatment needs of people experiencing unsheltered homelessness with serious behavioral health conditions by purchasing and installing tiny homes and providing time-limited operational supports in various bridge housing settings. Mobile Crisis Services The proposal includes funding and trailer bill language to add qualifying 24/7 community-based mobile crisis intervention services as a Medi-Cal benefit as soon as January 1, 2023. The benefit will be implemented through county behavioral health delivery systems by multidisciplinary mobile crisis teams in the community. Insulin Cost Reduction The budget acknowledged the high cost of insulin and the Administration's commitment to ensuring the availability of insulin to all Californians. The Governor stated that California is working on a plan to contact and manufacture its own insulin. No further details are available at this time. California Food Assistance Program The budget proposes to allocate about $35 million for initial planning to expand CalFresh eligibility, among other food assistance benefits, to all low-income residents ages 55 and over regardless of immigration status. It also allocates about $113 million annually starting in the 2025-26 budget year for the full expansion. The budget also includes expanded funding to house people experiencing homelessness, a large investment in health care related workforce development, and an expansion of proposals intended to reduce poverty such as increasing CalWORKs grants, passing on all child support to families formerly on public assistance, and expanding the state child tax credit to households with no reported income. Government Affairs will continue to monitor and provide key updates on the budget process as it related to RCAC Members.	

	PUBLIC COMMENT **Submitted by Elizabeth Cooper, *RCAC 2 member*, on January 12, 2022, via phone call:** *I thank you and I am always interested in what happens in our government, great state of CA and the United States. I would like to ask a question.* *How is voting important for good healthcare policies, issues and members?* Member McFerson thanked Ms. Thanki for the Government Affairs update. She asked how members can get involved in the legislation regarding Kaiser. She would like to support L.A. Care in any way that she can. Ms. Thanki responded that she will provide more information at a later time.	
BOARD MEMBER REPORT	Hilda Perez, *Member Representative, Board of Governors*, and Layla Gonzalez, *Member Advocate, Board of Governors,* gave the Board member report *(a copy of the report can be obtained from CO&E):* The Board Members send their best wishes to everyone during Black History Month. • Thank you to all of the RCAC members that joined the Board meeting and all the past ECAC and BOG meetings. • We urge everyone to continue wearing masks and washing their hands. • In the event that you need assistance with downloading Zoom to join virtual meetings, please reach out to CO&E staff. • Mr. Baackes presented the Chief Executive Officer report, and he gave us an update earlier in this meeting. • Dr. Seidman presented the January 2022 Chief Medical Officer report. He also gave an update earlier today. • The list of motions approved at the board and committee meetings is available from CO&E or Board Services. PUBLIC COMMENT **Submitted by Elizabeth Cooper, *RCAC 2 member*, on February 9, 2022, via phone call:** *To the two board members. I thank you for your representation as board members for the consumers. I hope for the next elections on the two board seats that you give your support to the candidates. In order to make sure they are given in a timely manner your input and wisdom. Participation during your tenure on the board have made a difference for consumer members.*	

	It is my hope that those candidates will be effective and represent all the members with fairness and justice. Thank you again, please address this issue Member McFerson asked Ms. Perez if she can raise the issue of providing incentives in exchange for members getting vaccinated. She noted that the partnership with the Rams would be a good opportunity to create incentives. Ms. Perez thanked Ms. McFerson and Ms. Cooper for their comments and suggestions.	
COMMUNICATION AND COMMUNITY RELATIONS DEPARTMENT UPDATE	Auleria Eakins, *Ed.D, Manager, CO&E*, gave the Communications and Community Relations update *(a copy of the report can be obtained from CO&E):* 2022 Care Harbor The 2022 Care Harbor will take place on March 4-6 at the Reef located at 1933 South Broadway in downtown Los Angeles. Staff will be sharing information with you regarding how and where to obtain wristbands prior to the events. Board Elections Update Unfortunately, there is no update on the election process because of the emergency public health guidelines during the ongoing pandemic. Many inquired about the Board Seat Election application process. The Application Deadline has been Extended by Default: The deadline for submission of applications for Board Seat nominations is extended by default until further notice. Applications will continue to be accepted for the Board Seat nominations until further notice. CO&E will be working closely with Board Services to keep you abreast of updates as information becomes available. Black History Month Education The first Black History education event took place last Thursday on the topic of Revolutionizing access to care. It was filled with lots of information, and ideas on how RCAC members can advocate for increased access and collaboration efforts. There were 79 English participants 29 Spanish participants and eight Khmer participants. She thanked those who attended. She encourages everyone to participate in tomorrow's webinar which will be a live cooking demonstration with Chef Noel of Black Women for Wellness the webinar will take place starting at 10am. Next week's session will take place Thursday, February 17th at 10 a.m. it will be a pre-recorded session on Housing and Homelessness and its impact on the Black Community. The final session will take place Thursday, February 25 at 10 am, The topic of discussion will be Black Health and Mental Health RCAC Reconvening Starting with RCAC's that would meet in March, CO&E will host "RCAC Connect" meetings with a reintroduction of L.A. Care and follow up to discussions of ECAC. The first connect meetings will provide brief updates on how we will be moving forward with	

	reconvening of RCAC meetings and review the LAC code of conduct and standards of behavior. Moving forward RCAC meetings will be quarterly starting May and Jun 2022. Your Field Specialist will have more information as we move forward with the process and date of your first meeting. Survey Call from CO&E Staff It will be very important for all member to be present as well we ask that if you know of those who were members of your advisory committee, please share information with them and ask that they look out for a call from their FS or Liaison. PUBLIC COMMENT **Submitted by Elizabeth Cooper, *RCAC 2 member*, on February 8, 2022, via phone call:** *Auleria, first I would like to say hello to you and to your staff. I'd like to always address to remember the importance of the RCACs.* *Please give your analysis on what you and your staff have done to support the continuation of the RCACs and RCAC meetings. The RCACs are the voices of the community! Your input and comments are vital and also it is very important to keep the RCACs informed.* *Finally, I would like to say thank you to all who supported and participated in the month of February (Afro-American history month). I also try to support all culture celebrations because I think it is important. Thank you!* Member McFerson asked if the RCACs will be meeting quarterly moving forward or only throughout the public health emergency. Dr. Eakins responded that ECAC meetings will continue on a monthly basis and RCAC meetings on a quarterly basis. Member McFerson asked if it will affect their stipends. Dr. Eakins responded that stipend rules will apply as the RCACs reconvene. Member Poz asked Dr. Eakins if she can provide the date and time of distribution for Care Harbor. Dr. Eakins responded that she will share the dates she has available for the event in the chat box. Member Perez asked Dr. Eakins if CO&E can provide wrist bands to ECAC and RCAC members because of their involvement with the organizations. This was done in previous years. She noted that CO&E is trying to get information from ECAC in a survey. In her opinion her staff is already doing a great amount of work. She suggested working with Dr. Kyle's team on this. Dr. Eakins responded that she will take this back to the department that is assisting with the Care Harbor sponsorship. She said that she could not make any guarantees on procuring bracelets for ECAC and RCAC members.	

MEMBER ISSUES	Member McFerson stated that she knows people that are trying to be treated for chronic illnesses and they are being affected by the COVID-19 restrictions at doctor offices and hospitals. She noted that many people are not being treated for major illnesses. She questioned what could be done about it. Member Poz stated that someone she knows is being forced to select a Medicare plan and it seems as if she has been sent to a plan, as opposed to being given the opportunity to select her own plan. She asked where she could refer the members for assistance. Ms. De La Torre referred her to member services for proper guidance. Chairperson Vazquez stated that she went to a doctor appointment and she was able to see medical students who were there to learn more about her community. There were also students who did not know how to speak Spanish. She noted that L.A. Care has been supporting students and schools to create more providers for its safety net.	
OLD BUSINESS		
L.A. CARE BOARD ELECTION UPDATE	Victor Rodriguez, *Board Specialist, Board Services,* gave the following report about the L.A. Care Board Election Update: • CO&E is working to resume RCAC meetings. • RCAC meetings are essential to the campaign process for Board Seat nominations. We need to identify who is a still a RCAC member and validate RCAC membership for eligibility to vote in the board seat election. • When RCAC meetings resume staff will propose a process for the election. • The election process will be considered by ECAC at a future meeting. • We are working on different methods to accept and validate votes to ensure a fair and transparent process. • One method currently being considered is an electronic voting platform created by Marketing. Very easy to use remotely, do not believe it will require much training. At least for those that are tech savvy or use mobile devices daily. Currently working on other methods to accept votes. **Submitted by Elizabeth Cooper, *RCAC 2 member*, on February 8, 2022, via phone call:** *Hello Victor, I would like to make an inquiry regarding the board elections. May I ask are you informing us about the L.A. Care Board Elections or upcoming Consumer board elections?* *Please inform regarding election dates and upcoming consumer board elections. Point of authority, we can also use the recent board elections and board appointments as our model.*	

	Mr. Rodriguez responded that the update he provided was in regards to the Board Seat elections that were supposed to take place two years ago, but were suspended due to the public health emergency. Member McFerson asked how candidates would campaign now that the RCACs will only meet quarterly. Dr. Eakins responded that staff has not gotten that far ahead in planning and will provide details later.	
NEW BUSINESS		
MOTION TO ECAC	PUBLIC COMEMNT **Submitted by Elizabeth Cooper, *RCAC 2 member*, on February 8, 2022, via phone call:** *As a public person, I do not understand this motion. Please explain in more detail.* Cynthia Conteas-Wood, *RCAC 3 Chair*, presented a motion to ECAC. She stated that Community Outreach & Engagement Staff would meet with the ECAC Chair and Vice Chair to review the results of the ECAC survey that was disseminated to all ECAC and the two Board members during the month of December 2022. They had the opportunity to review the approved ECAC meeting participation guidelines that were implemented when they met in person prior to the start of the pandemic. After review of the ECAC survey findings and ECAC meeting participation guidelines, they thought it would be logical to ask ECAC to create and ad-hoc committee to review the ECAC meeting participation guidelines and make necessary changes as needed in support of effective virtual meetings. She presented the following motion: ***Motion: To create an ad-hoc committee of no more than five ECAC members to review and revise the ECAC meeting participation guidelines as needed to support virtual meetings.*** Member McFerson asked if they have been trained on this new virtual world that they are in. Either by L.A. Care staff or L.A. Care period. She noted that there are amendments, provisions to the Robert's Rules of Order and the Brown Act. Dr. Eakins responded that at the beginning of their virtual meetings somewhere around July or August of 2020, CO&E conducted a training with members on how they would be meeting virtually. All members participated prior to the start of the Zoom platform. They went over the process that they would be using in this meeting based off the Zoom utilization. This opportunity now is to	**Approved by roll call. 12 AYES (Byrd, Conteas-Wood, Hernandez De Cordero, Lara, McClain, McFerson, Poz, Refugio, Romo, Salazar, Sanchez and Vazquez)**

	reconvene the group, because now the RCACs are reconvening. It's an opportunity to set those parameters for how they will be meeting virtually moving forward. Ad hoc committee: Cynthia Conteas-Wood, RCAC 3 Chair Silvia Poz, RCAC 4 Chair Andria McFerson, RCAC 6 Chair Tonya Byrd, RCAC 9 Chair Lluvia Salazar, Member At-Large	
MOTION TO ECAC	Andria McFerson, RCAC 6 Chair, presented a motion to ECAC. ***Motion: To create an ad-hoc committee for all available ECAC members to discuss and develop educational programs, events, etc., that focus on mental health to inform and show support to the community during Mental Health awareness month held through May 2022. (revised February 4, 2022)*** PUBLIC COMEMNT **Submitted by Elizabeth Cooper, *RCAC 2 member*, on January 12, 2022, via phone call:** *I Elizabeth cooper agree with this motion and think mental health is an important issue.* **Submitted by Dawn Jackson, *Los Angeles, USAF*, on February 9, 2022 at 12:41 PM via chat:** *I Dawn Jackson agree with this motion* Ad hoc committee: Silvia Poz, RCAC 4 Chair Andria McFerson, RCAC 6 Chair Ana Romo, RCAC 8 Chair Deaka McClain, Member At-Large	**Approved by roll call. 12 AYES (Byrd, Conteas-Wood, Hernandez De Cordero, Lara, McClain, McFerson, Romo, Salazar, and Sanchez)** **3 Abstentions (Poz, Refugio, Vazquez)**
FUTURE AGENDA ITEMS		
	Member McFerson stated that she previously raised the issue of the money that each RCAC is allocated $5,000 for outreach purposes. She asked if they will be granting these funds to an organization of their choosing. She asked if ECAC members could receive training on this issue. Ms. Vazquez responded that it would be placed on the agenda for March's ECAC meeting.	
PUBLIC COMMENTS		
PUBLIC COMMENT	**Submitted by Elizabeth Cooper, *RCAC 2 Member*, received on February 8, 2022 via telephone:**	

	I would like to wish all the L.A. Care staff, members and the public a very happy valentine's day. Please show caring for that day to friends and loved ones on February 14th. **Submitted by Marcia Ramos, *RCAC 1 Member*, received on February 9, 2022 via email:** *Mr. Baackes Chief Medical Officer, in regards to your Statement to your report with the news about Kaiser does this mean LA Care will lose some funding or connections which may give Kaiser Leg up and can this affect LA Care in the Long Term?* *Also, with many people feeling getting a COVID test to show they have COVID is a waste of time they ask how do they get treated without going to the hospitals. Doctors' offices still turn patients away because of symptoms. Even when patients test positive there seems to be nothing in place for treatment. This sometimes puts people's health gravely at risks especially when they go to local stores and pharmacies to buy medication.* *As a member of LA Care and a person recovering from when I had COVID last month I found myself unable to even get medical care from my primary doctor's office. I turned to media and also discussed treatment with my child's pediatrician because they also came down sick but was unable to take them to get tested but I was very sick during this ordeal I felt nothing is in place for anyone to get any treatment when positive for Covid. No one discussed test results or even what type COVID I had. Many questions.* *What can be done to help people and families in the future with these issues and problems?* *Thank you for your time with this.* *Happy Valentine's*	
ADJOURNMENT	The meeting was adjourned at 1:35 p.m.	

RESPECTFULLY SUBMITTED BY:

Victor Rodriguez, *Board Specialist II, Board Services*
Malou Balones, *Board Specialist III, Board Services*
Linda Merkens, *Senior Manager, Board Services*

APPROVED BY

Fatima Vasquez (due to public health orders the document will be signed when it is possible)
Fatima Vasquez, *ECAC Chair* _____
Date 3/9/22