



Policy: AA.1219a
Title: **Member Advisory Committee**
Department: Executive Office
Section: Office of the Clerk of the Board

CEO Approval: /s/ Michael Hunn 09/12/2024

Effective Date: 07/01/2015

Revised Date: 09/01/2024

Applicable to: ☒ Medi-Cal
☒ OneCare
☐ PACE
☐ Administrative

I. PURPOSE

This policy describes the composition and role of CalOptima Health's Member Advisory Committee (MAC) and to establish a process for recruiting, evaluating, and selecting prospective candidates to CalOptima Health's MAC.

II. POLICY

- A. As directed by CalOptima Health's Board of Directors (CalOptima Health Board), the MAC shall report to the CalOptima Health Board and shall provide advice and recommendations to the CalOptima Health Board relative to CalOptima Health's programs, and relevant policies and procedures affecting quality and Health Equity updates. CalOptima Health shall inform MAC members how their input was incorporated.
- B. CalOptima Health's Board encourages Member involvement in CalOptima Health's programs.
- C. CalOptima Health shall designate a staff member and maintain a written job description detailing the staff member's responsibilities, which includes having responsibility for managing the operations of the MAC in compliance with all statutory, regulatory, and contractual requirements.
- D. MAC members shall recuse themselves from voting or from decisions where a conflict of interest may exist and shall abide by CalOptima Health Policies GA.8012: Conflicts of Interest and AA.1204: Gifts, Honoraria, and Travel Payments.
- E. The composition of the MAC shall reflect the diversity of the health care consumer and include seniors and persons with disabilities, persons with chronic conditions (such as asthma, diabetes, congestive heart failure) and limited English proficient Members, and Members from diverse cultural and ethnic backgrounds or their representatives. All MAC members shall have direct or indirect contact with CalOptima Health Members.
- F. An organization may have no more than one (1) employee or representative on the MAC at any one time.
- G. An individual may participate in no more than one (1) CalOptima Health advisory committee at any one time.

- H. In accordance with CalOptima Health Board Resolution Numbers 2-14-95 (effective February 14, 1995) and 23 1207-01 (effective December 7, 2023), MAC shall be comprised of seventeen (17) voting members, each seat representing a constituency served by CalOptima Health.
1. One (1) of the seventeen (17) positions is a standing seat and is held by the Social Services Agency (SSA).
 2. The remaining sixteen (16) members shall serve staggered terms of three (3) years.
 - a. Two (2) of the remaining sixteen (16) positions shall be dedicated Medi-Cal Beneficiaries or Authorized Family Member seats.
 - b. Four (4) of the sixteen (16) positions shall be dedicated to OneCare Member or Authorized Family Member seats.
 - a. The three (3) year term shall coincide with CalOptima Health's fiscal year (i.e., July 1 through June 30).
 - b. Effective July 1, 2023, staggered nominations shall occur at a rate of approximately one-third (1/3) of the membership each year.
 - c. MAC members may serve no more than two (2) consecutive terms or the equivalent of six (6) consecutive years.
 - d. MAC members shall be allowed to reapply after a hiatus of six (6) years.
 3. MAC may include, but is not limited to, individuals representing, or that represent the interests of:
 - a. Adult beneficiaries;
 - b. Behavioral/Mental Health;
 - c. Children;
 - d. Family Support Representative;
 - e. Foster children;
 - f. Medi-Cal or Authorized Family Member beneficiaries;
 - g. Member Advocate;
 - h. OneCare Member or Authorized Family Member;
 - i. Orange County SSA;
 - j. Persons with disabilities;
 - k. Persons with Special Needs;
 - l. Recipients of CalWORKs; or

- m. Seniors.
- 4. The MAC shall carry out duties in accordance with DHCS contract requirements. Duties include, but are not limited to:
 - a. Identifying and advocating for preventive care practices to be utilized by CalOptima Health;
 - b. Involvement in developing and updating cultural and linguistic policy and procedure decisions including those related to Quality Improvement (QI), education, and operational and cultural competency issues affecting Members who speak a primary language other than English. The MAC may also advise on necessary Member or provider targeted services, programs, and trainings;
 - c. Providing and making recommendations to CalOptima Health regarding the cultural appropriateness of communications, partnerships, and services;
 - d. Reviewing Population Needs Assessment (PNA) findings and having a process to discuss improvement opportunities with an emphasis on Health Equity and Social Determinants of Health (SDOH); and
 - e. Providing 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. Findings of the PNA;
 - v. Plan marketing materials and campaigns;
 - vi. Communication of needs for network development and assessment;
 - vii. Community resources and information;
 - viii. Population Health Management (PHM);
 - ix. Quality;
 - x. Health delivery systems reforms to improve health outcomes;
 - xi. Carved out services;
 - xii. Coordination of care;
 - xiii. Health Equity;
 - xiv. Accessibility of services; and
 - xv. Grievance and Appeals.

5. CalOptima Health shall allow the MAC to provide input on selecting targeted health education, cultural and linguistic, and QI strategies, provide sufficient resources for the MAC to support the required MAC activities outlined above, including supporting the MAC in engagement strategies such as consumer listening sessions, focus groups, and/or surveys.
6. CalOptima Health shall provide a location for MAC meetings and all necessary tools and materials to run meetings, including, but not limited to, making the meeting accessible to all participants, and providing accommodations to allow all individuals to attend and participate in the meetings.
7. CalOptima Health shall draft written minutes of each MAC meeting and associated discussions. All minutes shall be posted on CalOptima Health's website and submitted to DHCS no later than forty-five (45) calendar days after each meeting.
8. CalOptima Health shall retain minutes for no less than ten (10) years and provide copies to DHCS, upon request.
9. CalOptima Health shall support MAC members in their MAC roles, including but not limited to providing resources to educate MAC members to ensure they are able to effectively participate in MAC meetings, providing transportation to MAC meetings, arranging childcare as necessary, and scheduling meetings at times and in formats to ensure the highest MAC member participation possible.
10. CalOptima Health shall appoint one (1) member of the MAC to serve as CalOptima Health's representative to DHCS' Statewide Consumer Advisory Committee.
 - a. The appointed MAC representative shall be reimbursed for eligible expenses associated with attending the DHCS Statewide Consumer Advisory Committee in accordance with CalOptima Health Policy GA.5004: Travel and Other Reimbursable Expenses.

I. Stipends

1. CalOptima Health may provide a reasonable per diem payment of up to fifty dollars (\$50) per meeting to the Medi-Cal Member or Authorized Family Member beneficiaries representative and the OneCare Member or Authorized Family Member beneficiaries serving on the MAC. CalOptima Health shall maintain a log of each payment provided to the Member or family representative, including type and value, and shall provide such log to DHCS upon request.
2. Representatives of provider organizations, community-based organizations and consumer advocates are not eligible for stipends.

J. The MAC shall conduct a nomination process to recruit potential candidates for the impending vacant seats, in accordance with this policy.

1. The MAC shall conduct an annual recruitment and nomination process.
 - a. At the end of each fiscal year, approximately one-third (1/3) of the MAC seats' terms expire, alternating between six (6) vacancies, one (1) year and four (4) vacancies each of the following two (2) years. The standing seat on the MAC is not impacted by term expiration.
2. The MAC shall conduct a recruitment and nomination process if a seat is vacated mid-term.

- a. Candidates that fill a vacated seat mid-term shall complete the term for that specific seat, which will be less than a full three (3) year term.

K. Special Elections

1. Special elections for the MAC shall occur under the following circumstances:
 - a. A MAC seat is vacant due to the resignation of a sitting MAC member; or
 - b. The current MAC member is deemed unqualified to serve in his or her current capacity as a MAC member.
 - i. Every effort will be made to replace the vacant seat within sixty (60) calendar days from the date the seat is vacated.
2. Any new MAC member appointed to fill an open seat created mid-term shall serve the remainder of the resigning member's term.

L. MAC Vacancies

1. If a vacancy occurs prior to the start of the nomination process, there shall be no need for a special election and the vacant seat shall be filled during that nomination process.
2. If a vacancy occurs after the annual nomination process is complete, a special election may be conducted to fill the open seat, subject to approval by the MAC.

M. On a bi-annual basis, the MAC shall select a Chair and Vice-Chair from its membership to coincide with the annual recruitment and nomination process. Recruitment and selection shall be conducted in accordance with Section III.C-E of this policy.

1. The MAC Chair and Vice-Chair may serve one (1) two (2) year term.
2. The MAC Chair or Vice-Chair may be removed by a majority vote from CalOptima Health's Board.

N. To establish a nomination ad hoc subcommittee, the MAC Chair or Vice-Chair shall ask for three (3) to four (4) members to serve on the ad hoc subcommittee. MAC members, who are being considered for reappointment, cannot participate in the nomination ad hoc subcommittee.

1. The MAC nomination ad hoc subcommittee shall:
 - a. Review, evaluate, and select a prospective Chair, Vice-Chair and a candidate for each of the open seats, in accordance with Section III.C-E of this policy; and
 - b. Forward the prospective Chair, Vice-Chair and slate of candidate(s) to the full MAC for consideration.
2. Following approval from the MAC, the recommended Chair, Vice-Chair and slate of candidate(s) shall be forwarded to CalOptima Health's Board for review and approval.

O. CalOptima Health's Board shall review and have final approval for all appointments, reappointments, and Chair and Vice-Chair appointments to the MAC.

- P. MAC members shall attend all regularly scheduled meetings unless they have an excused absence. An absence shall be considered excused if a MAC member provides notification of an absence to CalOptima Health staff prior to the MAC meeting. CalOptima Health staff shall maintain an attendance log of the MAC members' attendance at MAC meetings. Upon request from the MAC Chair, the Vice-Chair, the Chief Executive Officer, or the CalOptima Health Board, CalOptima Health staff shall provide a copy of the attendance log to the requester. In addition, the MAC Chair or Vice-Chair shall contact any committee member who has three consecutive unexcused absences.
1. MAC members' attendance shall be considered as a criterion upon reapplication.

III. PROCEDURE

A. MAC composition

1. The composition of MAC shall reflect the cultural diversity and special needs of the CalOptima Health population.
2. Specific agency representatives shall serve on the MAC as standing members.
 - a. The SSA representative shall serve as a standing member and shall not be subject to reapplying.

B. MAC meeting frequency

1. The MAC shall hold its first regular meeting promptly after all initial members have been selected by the MAC selection committee and at least quarterly thereafter.
2. The MAC shall adopt a yearly meeting schedule at the first regularly scheduled meeting in or after January of each year.
3. MAC meetings shall be open to the public, in person or virtually, meeting information shall be posted publicly on CalOptima Health's MAC webpage thirty (30) calendar days prior to the meeting, and in no event later than seventy-two (72) hours prior to the meeting.
4. Attendance by a simple majority of appointed members shall constitute a quorum.
 - a. A quorum must be present for any votes to be valid.

C. MAC recruitment process

1. CalOptima Health shall begin recruitment of potential candidates in February of each year. In the recruitment of potential candidates, the ethnic and cultural diversity and special needs of the CalOptima Health population shall be considered. Nominations and input from interest groups and agencies shall be given due consideration.
2. CalOptima Health shall recruit potential candidates utilizing a variety of notification methods, which may include, but are not limited to, the following:
 - a. Outreach to the respective Member community;
 - b. Placement of vacancy notices on the CalOptima Health Website

3. Prospective candidates shall be notified at the time of recruitment regarding the deadline to submit their application to CalOptima Health.
 4. During the MAC meeting held before June 30 of a recruitment year for the Chair and Vice-Chair, the current Chair or Vice-Chair shall inquire of its membership whether there are interested candidates who wish to be considered as a Chair or Vice-Chair for the upcoming fiscal year. The candidates are requested to submit a letter of interest for these positions.
- D. CalOptima Health shall conduct a special election with a truncated recruitment process to fill a MAC seat that has been vacated mid-term.
- E. MAC nomination process
1. The MAC Chair or Vice-Chair shall request three (3) to four (4) members, who are not being considered for reappointment, to serve on the nomination ad hoc subcommittee.
 - a. At the discretion of the MAC nomination ad hoc subcommittee, a subject matter expert (SME) may be included on the subcommittee to provide consultation and advisement.
 2. Prior to the MAC nomination ad hoc subcommittee meeting:
 - a. Ad hoc subcommittee members shall individually evaluate and score the application for each of the prospective candidates using the Applicant Evaluation Tool.
 - b. Ad hoc subcommittee members shall individually evaluate and select a Chair and Vice-Chair.
 - c. At the discretion of the ad hoc subcommittee, subcommittee members may contact a prospective candidate's references for additional information and background validation.
 3. The ad hoc subcommittee shall convene to discuss and select a candidate for each of the expiring seats by using the findings from the Applicant Evaluation Tool, the attendance record if relevant, and the prospective candidate's references.
- F. MAC selection and approval process for prospective Chair, Vice-Chair and MAC candidates
1. Upon selection of a recommendation for a slate of candidates, the ad hoc subcommittee shall forward its recommendation to the MAC for consideration.
 2. Following consideration, the MAC's recommendation for a slate of candidates shall be submitted to CalOptima Health's Board for review and final approval.
 3. Chair and Vice-Chair candidates who submitted a letter of interest will be reviewed at the first MAC meeting of the fiscal year and the members will vote on their candidate of choice for both positions. Candidates must have a quorum of members approving their recommendation in order to be submitted to CalOptima Health's Board for appointment. If the Chair is no longer able to serve on the MAC, the Vice-Chair will automatically assume the Chair seat and will be officially appointed by the Board at an upcoming meeting and a Vice-Chair will be recruited among the members to fulfill the remaining term.

4. Following CalOptima Health's Board approval of MAC's recommendation, the new MAC members' terms shall be effective July 1.
 - a. In the case of a selected candidate filling a seat that was vacated mid-term, the new candidate shall attend the immediately following MAC meeting.
 5. CalOptima Health shall provide new MAC members with a new member orientation.
- G. CalOptima Health shall complete and submit to DHCS an annual MAC member demographic report by April 1 of each year.

IV. ATTACHMENT(S)

- A. Member Advisory Committee - Member Application
- B. Member Advisory Committee - Community Application
- C. Member Advisory Committee - Applicant Evaluation Tool
- D. Member Advisory Committee - Seat Descriptions

V. REFERENCE(S)

- A. CalOptima Health Contract with the Department of Health Care Services (DHCS) for Medi-Cal
- B. CalOptima Health Policy AA.1204: Gifts, Honoraria, and Travel Payments
- C. CalOptima Health Policy GA.5004: Travel and Other Reimbursable Expenses
- D. CalOptima Health Policy GA.8012: Conflicts of Interest
- E. CalOptima Board Resolution 2-14-95
- F. CalOptima Board Resolution 06-0707
- G. CalOptima Board Resolution 11-1103
- H. CalOptima Board Resolution 13-0307
- I. CalOptima Board Resolution 15-08-06-02
- J. CalOptima Board Resolution 16-08-04-02

VI. REGULATORY AGENCY APPROVAL(S)

Date	Regulatory Agency	Response
09/15/2014	Department of Health Care Services (DHCS)	Approved as Submitted
08/11/2017	Department of Health Care Services (DHCS)	Approved as Submitted
06/27/2023	Department of Health Care Services (DHCS)	Approved as Submitted
09/05/2024	Department of Health Care Services (DHCS)	File and Use

VII. BOARD ACTION(S)

Date	Meeting
03/07/2013	Regular Meeting of the CalOptima Board of Directors
08/06/2015	Regular Meeting of the CalOptima Board of Directors
08/04/2016	Regular Meeting of the CalOptima Board of Directors
06/01/2017	Regular Meeting of the CalOptima Board of Directors
05/07/2020	Regular Meeting of the CalOptima Board of Directors
08/06/2020	Regular Meeting of the CalOptima Board of Directors
12/01/2022	Regular Meeting of the CalOptima Health Board of Directors
12/07/2023	Regular Meeting of the CalOptima Health Board of Directors

VIII. REVISION HISTORY

Action	Date	Policy	Policy Title	Program(s)
Effective	07/01/2015	AA.1219a	Member Advisory Committee	Medi-Cal
Revised	08/04/2016	AA.1219a	Member Advisory Committee	Medi-Cal
Revised	07/01/2017	AA.1219a	Member Advisory Committee	Medi-Cal
Revised	03/01/2020	AA.1219a	Member Advisory Committee	Medi-Cal
Revised	08/06/2020	AA.1219a	Member Advisory Committee	Medi-Cal
Revised	02/01/2022	AA.1219a	Member Advisory Committee	Medi-Cal
Revised	12/01/2022	AA.1219a	Member Advisory Committee	Medi-Cal OneCare
Revised	12/07/2023	AA.1219a	Member Advisory Committee	Medi-Cal OneCare
Revised	03/01/2024	AA.1219a	Member Advisory Committee	Medi-Cal OneCare
Revised	09/01/2024	AA.1219a	Member Advisory Committee	Medi-Cal OneCare

IX. GLOSSARY

Term	Definition
Health Equity	The reduction or elimination of Health Disparities, Health Inequities, or other disparities in health that adversely affect vulnerable populations.
Member	A beneficiary enrolled in a CalOptima Health program.
Member Advisory Committee (MAC)	A committee comprised of community advocates and Members, each of whom represents a constituency served by CalOptima Health, which was established by CalOptima Health to advise its Board of Directors on issues impacting Members.
Social Drivers of Health (SDOH)	The environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health functioning, and quality-of-life outcomes and risk. Also known as Health Related Social Needs.
Threshold Language	<p><u>Medi-Cal</u>: The non-English threshold and concentration standard languages in which CalOptima Health is required to provide written translations of Member Information, as determined by DHCS.</p> <p><u>OneCare</u>: A threshold language is defined by CMS as the native language of a group who comprises five percent (5%) or more of the people served by the CMS Program.</p>