



Community Advisory Committee

Contra Costa Health Plan (CCHP)

595 Center Avenue, Suite 100

Martinez, CA 94553

March 19, 2026

CHAIR

✓	Belkys Teutle, Member Services Manager
✓	Cynthia Laird, Member Services Supervisor

CCHP STAFF

✓	Allison Liu
✓	Claire Sayle
✓	Sofia Rosales
✓	Miranda Pena
✓	Paisa Gadson
✓	Eloisa Lopez Valencia
✓	Tiffany Brelland

CAC MEMBERS

✓	Viridiana R, CAC Member	✓	Sheena G, CAC Member
✓	Norma P, CAC Member	✓	Helen M, CAC Member
✓	Isabel M, CAC Member	✓	Alicia N, CAC Member
✓	Chipo W, CAC Member		

COMMUNITY BASED ORGANIZATIONS/OTHER

✓	Patricia Bryson, CCHP – Notetaker
✓	Jill Ray – Board of Supervisor
✓	Yareni Reyes

Topic	Minutes	Person Assigned
Call to Order	<i>The meeting began at 4:06 pm.</i>	Belkys Teutle,

Minutes		
Welcome and Housekeeping	<p>Belkys Teutle begins the meeting and introduces Cynthia Laird. Belkys explains the issue with the interpreter. Participants are reminded of the following guidelines:</p> <p>The meeting is being recorded and any personal information that may be shared is not private. Comments made during the meeting should be respectful and relevant to the topic at hand. Participants should avoid personal attacks or inflammatory language. Additionally, persons wishing to comment should use the “raise your hand” feature in the Zoom app or post comments/questions in the “chat” section. All public comments will be limited to 2 minutes per speaker per topic.</p> <p>Staff will turn off their cameras, so that the camera will be on the speaker who will be presenting the day’s agenda.</p>	
Agenda	<p>Belkys provided an overview of the agenda:</p> <ul style="list-style-type: none"> Enhanced Care Management Health Education Program Member Survey Result Cultural & Linguistic Program 	

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<p>Enhanced Care Management (ECM)</p>	<p>Belkys introduced Paisa Gadson, Director of CalAIM to provide an overview of the Enhanced Care Management (ECM) program.</p> <ol style="list-style-type: none"> 1. ECM Overview – Pasia broke down the different types of services available for those who qualify It is a Medi-Cal program that provides extra help and health support. Members are assigned a Case Manager for a minimum of 1 year to help connect with a variety of different benefits and services. They provide a way to help organize a members health care and daily support. Additionally, they are able to help connect with other services known as Community Supports. 2. Eligibility – Provided an overview of eligibility requirements for ECM program and went through the different populations of focus as follows: <ol style="list-style-type: none"> a. Individuals experiencing homelessness (Type 1: Adults without dependent children; Type 2: Homeless families or Unaccompanied Children/Youths experiencing homelessness) b. Individuals at Risk for avoidable hospital or ED use (formerly “High Utilizers) c. Individuals with Serious Mental Health and/or substance use disorder d. Individuals transitioning from incarceration e. Adults Living in the Community and At Risk for Long-Term Care Institutionalization f. Adults Nursing Facility Residents transitioning to the Community g. Children/Youths enrolled in CCS or CCS WCM with Additional Needs Beyond the CCS Welfare h. Children and Youth Involved in Child Welfare (foster care) i. Birth Equity Population of Focus 3. ECM Seven Core Services <ol style="list-style-type: none"> a. Outreach – Care Manager that is assigned will begin outreach and inform applicants of the service and program b. Care Management Plan- Care Plan is made after assessment detailing goals to achieve while in the program c. Coordination – Making sure care is coordinated and aligning with care management plan work and coordinate transportation d. Promotion – Efforts to keep members healthy and promoting health e. Transitional Care – Any hospitals visits, care managers will assist with transitioning back home and securing follow up visits f. Family Supports – Making sure support people are educated and aware of the situation at hand g. Referral to Community – To connect member to different services that they need assistance with 4. Receiving ECM Discussed on how to receive ECM services, by asking their doctor or social worker to be referred. Members may also call Member Services (See slide deck for more information). There is a screening process to determine eligibility. 	

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	<p>Belky's provided contact information for Cal-AIM.</p> <p>Question: What is the birth equity? Answer/Pasia Gadson: The birth equity population of focus entails certain women of certain races where they may not have the best pregnancy outcomes. For example if you self identify as a black women, Native American, Polynesian, birth equity refers to making the birthing process equitable where everybody has positive outcomes.</p>	
<p>Health Education</p>	<p>Introductions made for Sofia Rosales, Miranda Pena, and Tiffany Brelland as Senior Health Education Specialists. Began presentation with an ice breaker, encouraging participation.</p> <p>Miranda provided a brief overview of what CCHP has done over the past year. Highlighted how the health education team developed health education and member materials, noting that they shared 2,500 of their unique one pagers that the team develops and hands out at events. Discussed how the team partners with various community clinics and programs, sharing nearly 6,000 of their materials to these partnerships with the idea that they share those materials with the members of the community. In 2025, the team engaged in about 126 workshops/events across Contra Costa County setting up tables. Added that they also go to resource fairs and farmers market events. Emphasized their efforts in collaborating with providers and conducting outreach to contact members that may have a healthcare gap. This includes aiding with scheduling of appointments and ensuring that members receive preventative care. Highlighted their efforts in giving presentations on medical benefits and community supports to both providers and members to ensure they are educated on the benefits and services.</p> <p>Shared new and recent member materials that they developed to provide an opportunity for feedback. Displayed materials that depict a comprehensive guide listing out all of the services that members have access to in the postpartum stage.</p> <p>Opened discussion for all to contribute on comments/feedback on the materials presented.</p> <p>Tiffany provided examples of their health education material and presented a flyer they created about healthy aging and asked for feedback.</p> <p>Discussed their work on creating an 11 pager on tobacco in which they worked with partners to help collaborate and put together. Opened up discussion for feedback.</p> <p>Question: Technology is something that is affecting seniors and youth and is something that is a barrier for seniors to be part of what is happening in the world. It affects their mental health so I am wondering, do you offer any services in that manner? Answer/Tiffany Brelland: That is an important topic about using technology, especially with AI that can have benefits and risks to health. At this time we do not have a specific one pager on that topic in particular, but we do know a few different community organizations that share materials on that topic and may host a class on that as</p>	

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	<p>well. That is something we can look into and share as it becomes available.</p> <p>Tiffany discusses the Health Education e-newsletters, having been the second year to do so. It was created for local community members but is open to all who sign up for them. Discussed how newsletters cover various health topics.</p> <p>Asked public what topics would be helpful to include in the newsletters.</p> <p>Provided contact information for health education.</p>																
<p>Member Survey Results</p>	<p>Introduced Eloisa Lopez Valencia to discuss their member survey called CAHPS, a national survey used by health plans across the country. Allows for members to answer questions about their experiences with their doctors. Survey helps learn about members experiences and to improve their care.</p> <p>Ice Breaker question</p> <p>Discussed the steps in how information is collected from choosing a group of members at random who have been enrolled for most of the year.</p> <p>Received 193 responses in 2025. Overall, members have shared having good experiences with health care, specialists, and personal doctor. Areas of improvement included getting needed care, getting care quickly, and overall customer service.</p> <p>Shared results by languages:</p> <table border="0" data-bbox="451 1010 1193 1260"> <thead> <tr> <th></th> <th>English</th> <th>Spanish</th> </tr> </thead> <tbody> <tr> <td>Rating of all health care</td> <td>75.0%</td> <td>94/3%</td> </tr> <tr> <td>Rating of personal doctor</td> <td>79.6%</td> <td>91.3%</td> </tr> <tr> <td>Rating specialists talked to most often</td> <td>82.6%</td> <td>90.0%</td> </tr> <tr> <td>Rating of health plan</td> <td>70.3%</td> <td>89.9%</td> </tr> </tbody> </table> <p>Spanish members have higher approval rates. This has been a recurring trend. We will continue to be looking at these differences to make sure all members are having positive experiences</p> <p>Public Questions/comments</p> <p>Comment: Specialty has very long wait times and because of that could lead to emergency room visits and complicate other issues they may have.</p> <p>Answer/Eloisa: It is a definite concern of high ER visits since members sometimes may not have access to services with their doctor.</p>		English	Spanish	Rating of all health care	75.0%	94/3%	Rating of personal doctor	79.6%	91.3%	Rating specialists talked to most often	82.6%	90.0%	Rating of health plan	70.3%	89.9%	
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<p>Cultural & Linguistic Program</p>	<p>Introduced Alison Liu as one of the Quality Managers within Quality and Health Equity department at CCHP and serves as Manager for Cultural & Linguistic Program.</p> <p>Discussed the Cultural and Linguistic Program and its services such as providing interpreter services for members needing language assistance.</p>																

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	<p>Mentioned that they track the languages spoken by members every year, tracking trends and ensuring that members have accurate resources. Went through additional services and resources provided.</p> <p>Discussed how to request an interpreter. Depending on the situation, a member may request when visiting a doctor's office or also call CCHP Member Services. Provided phone numbers and options to request on slide deck presentation.</p> <p>Three different types of interpreters: phone, zoom/video, and in-person.</p> <p>Briefly discussed the Language Access Survey which is only sent out to members who prefer a language other than English. This survey asks members to relay their experiences about language access.</p> <p>Shared the following findings:</p> <ul style="list-style-type: none"> ○ 80.6% of members used an interpreter in the past 6 months ○ 80% of members said they could get an interpreter when they needed one ○ 25.8% of members said they often ask friends or family to help interpret ○ 93.5% of members felt their doctor listened and treated them with respect ○ 72.0% of Members (that have used service recently) rated their interpreter positively <p>If members are not satisfied, they can file a formal complaint with Member Services and CCHP will make sure they are not paired with the same interpreter. - members are encouraged to file complaint if dissatisfied through member service to make sure you are not paired with an interpreter you have an issue with.</p>	
Close Up	Cynthia Laird gave closing remarks and notified them that members will receive an email and will send out health education flyers to participants along with the questions that were provided in the chat. Contact information was provided.	
Adjournment	<i>The meeting ended at 5:00 PM. The next meeting is scheduled for Thursday, June 11, 2026, from 4:00 p.m. to 5:15 p.m.</i>	

Additional Information		
Contact Us	<ul style="list-style-type: none"> • Email: CCHP-CAC@cchealth.org • Phone: 1-800-221-8040 • Business Hours: Monday – Friday, 8 a.m. – 5 p.m. (PST) 	

DRAFT: These minutes have not been formally approved by the Community Advisory Committee and are subject to change.