

## **MEMBER ADVISORY COMMITTEE 2025 CHARTER**

### **Purpose**

The Member Advisory Committee (MAC) is CalOptima Health's Consumer Advisory Committee (CAC). Recognizing the critical role of member voices in shaping CalOptima Health's policies and services, the purpose of the MAC is to provide a link between CalOptima Health and the Orange County community. The policy, scope, structure and functions of the MAC, as outlined in this charter, shall be in accordance with CalOptima Health's Department of Health Care Services (DHCS) contract. In addition, pursuant to Title 22, California Code of Regulations, Section 53876(c), the MAC reflects CalOptima Health's member population and advises CalOptima Health on the development and implementation of policies and procedures that affect cultural and linguistic, access, quality and health equity. CalOptima Health values input from its MAC and the MAC Chair provides regular reports to the CalOptima Health Board of Directors to provide feedback to the Board from their bi-monthly meetings.

### **Policy**

CalOptima Health maintains a diverse MAC as a part of its strategy and implementation of member and community engagement with stakeholders, community advocates, traditional and safety net providers and members. The MAC encourages CalOptima Health members and others to participate in public policy of the health plan to ensure the comfort, dignity and convenience of members. As directed by CalOptima Health's Board of Directors (Board), the MAC shall report to the Board and shall provide advice and recommendations to the Board relative to CalOptima Health programs as well as relevant policies and procedures affecting quality and health equity updates. CalOptima Health shall inform MAC members how their input was incorporated.

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

- a) Identifies and advocates for preventive care practices to be used by CalOptima Health
- b) Develops and updates cultural and linguistic policy and procedures related to cultural competency issues as well as educational and operational issues affecting seniors, people who speak a primary language other than English and people who have a disability
- c) Advises on CalOptima Health member- and provider-targeted services, programs, and trainings
- d) Reviews CalOptima's Health Equity program description, work plan and program evaluation to identify and prioritize opportunities for improvements and provide feedback on barriers to meeting goals and possible solutions when appropriate.

- e) Identifies, evaluates and reduces health disparities
- f) Provides and makes recommendations about the cultural appropriateness of communications, partnerships and services
- g) Reviews findings from the Population Needs Assessment (PNA) and discusses improvement opportunities on health equity and social drivers of health as well as provides input on selecting targeted health education, cultural and linguistic, and Quality Improvement (QI) strategies
- h) Provides 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 as well as clarification of new and revised policies and procedures in the manual
  - xvi. Grievance and Appeals

CalOptima Health shall ensure the fulfillment of the following requirements in accordance with Title 28, California Code of Regulations, Section 1300.69:

- a) The MAC shall receive information from CalOptima Health on public policy issues, including financial information and data on the nature and volume of grievances and their disposition.
- b) The MAC's activities and recommendations shall be regularly reported to the CalOptima Health Board at Board meetings.
- c) The MAC shall regularly evaluate the effectiveness of its recommendations and their impact on CalOptima Health's policies and programs

## Structure

### MAC Selection Committee:

The MAC convenes a Nominations Ad Hoc committee during annual recruitment that is tasked with reviewing applicants and selecting candidates who reflect the general Medi-Cal and OneCare member populations, hard-to-reach populations and those that experience health disparities in Orange County.

The MAC Selection Ad Hoc committee shall consist of three committee members of good standing who currently sit on the committee and are not candidates for reappointment.

### **MAC Membership:**

The composition of the MAC shall reflect the diversity of the health care consumer. All MAC members shall have direct or indirect contact with CalOptima Health members. MAC membership and representation must reflect the Medi-Cal and OneCare (HMO D-SNP) populations in Orange County and representation must include the following:

- a) General population of CalOptima Health's members (e.g., adolescents as well as parents and/or caregivers of children, such as children with special health care needs and foster youth)
- b) Diverse and hard-to-reach populations (e.g., populations that experience health disparities, such as those with diverse racial and ethnic backgrounds; genders, gender identity, sexual orientation and physical disabilities)
- c) At least 35% of the committee shall be represented by CalOptima Health members, including the parents or guardians of CalOptima Health members who are minors or dependents
- d) All MAC members will be appointed by the Board based on recommendations from the MAC
- e) The MAC shall consist of 17 voting members, including the Chair and Vice Chair, and shall consist of the following representation by members and stakeholders:
  - i. Adult Beneficiaries
  - ii. Behavioral/Mental Health
  - iii. Children
  - iv. Family Support
  - v. Foster Children
  - vi. Medi-Cal Beneficiaries or Authorized Family Members (two seats)
  - vii. Member Advocate
  - viii. OneCare Member or Authorized Family Member (four seats)
  - ix. Persons with Disabilities
  - x. Persons with Special Needs
  - xi. Recipients of CalWORKs
  - xii. Seniors
  - xiii. Social Services Agency (standing seat)

One MAC member will be appointed as the CalOptima Health representative to the DHCS Statewide Consumer Advisory Committee, and CalOptima Health will compensate the MAC member representative for their time and participation on the DHCS' committee, including transportation expenses to appear in person, as per CalOptima Health's contract with DHCS. Candidates for MAC membership will be selected based on established criteria.

To ensure that the MAC's membership is representative of the communities in Orange County, CalOptima Health shall complete and submit to DHCS an Annual MAC Member Demographic Report by April 1 of each year. The Annual MAC Member Demographic Report must include descriptions of all the following:

- a) Demographic composition of MAC membership

- b) How CalOptima Health defines the demographics and diversity of its members and potential members within CalOptima Health's service area
- c) The data sources relied upon to validate that the MAC's membership aligns with CalOptima Health's member demographics
- d) Barriers to and challenges in meeting or increasing alignment between the MAC's membership and the demographics of the members within CalOptima Health's service area
- e) Ongoing, updated, and new efforts and strategies undertaken in MAC membership recruitment to address the barriers and challenges to achieving alignment between CalOptima Health's membership and the demographics of the members within CalOptima Health service area
- f) A description of the MAC's ongoing role and impact in decision-making about health equity, health-related initiatives, cultural and linguistic services, resource allocation, and other community-based initiatives, including examples of how the MAC's input impacted and shaped health plan initiatives and/or policies

If a MAC member resigns, is asked to resign or is unable to serve on the MAC, CalOptima Health will make every attempt to fill the vacant seat within a 60-day timeframe and immediately begin recruiting for the seat. All candidates must follow the recruitment process established for the MAC.

All MAC members shall complete yearly required CalOptima Health compliance courses that include a Conflict of Interest (COI) module relating to any financial or other relationship to a CalOptima Health competitor. A MAC member's link with outside interests shall not impair the responsible exercise of his or her duties as a MAC member.

Guests shall not be counted towards a quorum. Non-voting guests may include:

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

CalOptima Health staff shall not have voting rights at the MAC meetings.

### **Officers of the MAC:**

Officers of the MAC shall consist of the following:

- a) Chair
- b) Vice Chair

The MAC Chair and Vice Chair shall be recommended by MAC members by majority vote and appointed by the CalOptima Health Board.

If both the Chair and Vice Chair of the MAC are absent or unable to act at a meeting where a quorum is present, the MAC will select one of the attending committee members to act as Chair with all the authority of the Chair if the absent Chair has not selected someone to preside at the meeting.

### **Meeting Agendas and Minutes:**

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

### **Non-Agenda Items:**

The MAC will follow Brown Act Rules and may not discuss a non-agenda item at a regular meeting unless the MAC determines that the matter in question constitutes an emergency pursuant to §54956.5. (§54954.2(b)(1).) or is an item that it should be discussed at a future meeting.

### **Voting:**

A simple majority (50% of voting members + 1) shall mean an approval of the proposed action. MAC members may vote on the minutes from the prior meeting, their schedule and their accomplishments. The MAC may make recommendations to the Board on candidates for committee seats, Chair and Vice Chair.

- a) Absent MAC members may not vote by proxy

### **Quorum:**

A quorum, defined as a simple majority of voting members, must be present for the MAC to vote on any matter.

- a) If a quorum is not met at a regular scheduled meeting, the meeting shall continue as informational only.

### **Meeting Schedule:**

CalOptima Health shall hold regularly scheduled MAC meetings at least four (4) times per year.

- a) CalOptima Health allows the regularly scheduled MAC meetings to be open to the public and lists the annual schedule on the CalOptima Health's website
- b) CalOptima Health may request special participation from MAC members to provide input on topics such as but not limited to advancing member targeted efforts

### **Public Comment:**

Every agenda for a regular or special MAC meeting shall provide an opportunity for members of the public to directly address the MAC on any of the agenda items listed.

- a) When a member of the public raises an issue which has not yet come before the committee the item may be 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 MAC members will be recruited to serve based on the membership criteria and with the recommendation of the Nominations Ad Hoc Committee, with final approval from the CalOptima Health Board. The term of service for each MAC member shall be three years. Committee members may not serve more than two consecutive terms.

The MAC may dismiss a member from the committee for repeated absences. MAC members shall notify CalOptima Health of expected absences and can request a leave of absence if needed for up to one year for health or personal reasons.

## Committee Support

CalOptima Health will provide the following support to the MAC:

- a) Adequate staff support for committee meetings and activities
- b) Maintenance of meeting minutes and records
- c) Organizational updates and relevant materials
- d) Interpretation — CalOptima Health will arrange for a bilingual interpreter to assist MAC members whose preferred language is not English; MAC members shall make a request for an interpreter at least 72 hours before a regularly scheduled meeting.
- e) Meeting location — CalOptima Health will ensure that the meeting room is wheelchair accessible. MAC members and members of the public attending the meeting may call to request agendas and/or handouts in an alternative format or any other disability-related accommodation needed to attend the meeting. Contact information is placed on the agenda identifying who to contact for special assistance. MAC members or members of the public shall make a request for accommodation at least 72 hours before a regularly scheduled or special meeting.
- f) Stipend — MAC members who hold the Medi-Cal Beneficiaries or Authorized Family Members, or the OneCare Member or Authorized Family Member seats shall receive a stipend of \$50 for each meeting attended.
- g) Transportation — CalOptima Health covers transportation costs for members who hold the Medi-Cal Beneficiaries or Authorized Family Members, or the OneCare Member or Authorized Family Member seats who cannot use regular transit because of a disability or disabling health conditions; they may request assistance from CalOptima Health to arrange for services.
- h) Childcare — Certain MAC members will be reimbursed for the cost of childcare. MAC members who hold the Medi-Cal Beneficiaries or Authorized Family Members, or the OneCare Member or Authorized Family Member seats are eligible for reimbursement, and payment will be sent once a childcare invoice has been received and confirmed.
- i) CalOptima Health will retain sufficient resources, within budgetary limitations, to support MAC activities, member outreach, retention and support.

The MAC meets jointly with the Provider Advisory Committee (PAC) and benefits from the input of the provider community and stakeholders on that committee.