

Los Angeles Community Advisory Committee

Meeting Minutes

Date: December 11, 2025
Time: 11:30 a.m. – 1:30 p.m.
Location: Molina Healthcare
In-person & Virtual Meeting

Members:		Guest:	Governing Board:	Guest Presenter:	Interpreters:
Member LG	Member IL	Guest MR	Dolores Nason, Disabled Resource Center	Jen Stillion	Jessica Zeichner
Member OV	Member CO		Anna Tiger, United American Indian Involvement		
Member DO	Member GA		Maria Aroch, Southern California Resource		
Member CS	Member MM		Services Independent Living		
Member AJ	Member JZ		Eric Burroughs, The 100 Black Men of Long Beach		
Member IG					
				Molina Presenters:	Molina Staff:
				Joyce Takeuchi	Adriana Bowerman
				Teena Martinez	Jennifer Barragan
				Amritha Roser	Janet Segura
				Sarah Murad	
				Marilyn Kempster	

Topic	Presentation/Discussion	Actions/Follow-Up
Call to Order	Adriana Bowerman called the meeting to order at 11:48 a.m.	
Welcome & Committee Self-Introductions	Adriana opened the last meeting of 2025 by welcoming the attendees, outlining the objectives, and shared that the purpose of the meeting is to offer a safe environment for members to share feedback, ideas, and concerns with Molina, with the goal of enhancing the health plan's services.	
Jen Stillion- Mental Wellness “Mindfulness”	Presentation: Jen began her final presentation of the year with excitement and shared how quickly December arrived and encouraged everyone to slow down and reconnect with themselves after a year full of highs, lows, growth, and challenges. Acknowledging that the holidays can feel both cozy and overwhelming. Jen invited the group into a Wellness reset, reflecting on what habits supported them in 2025 and what didn't—withou	

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Meeting minutes	<p>judgment, just awareness. Jen pointed out that even though nature naturally slows down in winter, people tend to rush through the season, and she encouraged everyone to use this time as an invitation to pause, focus on their own well-being, and choose what genuinely nourishes them. She then leads a calming breathing and visualization exercise, guiding participants to release stress and enter the new year with fresh, peaceful energy. To close, she lifted the mood with a fun dance moment. Jen ended thanking everyone and wishing them a wonderful holiday season.</p> <p>Reviewed minutes from September 18, 2025, meeting with a motion to approve the meeting minutes brought forth by Member CS and seconded by Member CO.</p>	
Action Items	No action items pending from the previous meeting.	
Sponsorships	<p>Adriana presented an update on third-quarter and year-to-date sponsorships in Los Angeles, highlighting Molina's ongoing commitment to investing in community partners. She explained that these sponsorships focus on five areas: improving neighborhoods and built environments, strengthening the healthcare workforce, supporting the well-being of priority populations, empowering local communities, and advancing overall health outcomes. She also described Molina's support efforts during the Los Angeles fires.</p> <p>Questions or Comments:</p> <ul style="list-style-type: none"> • Member GA: Suggested that Molina consider sponsoring agencies that support children with special needs and their families 	
Molina Healthcare Joyce Takeuchi, Quality Improvement, Molina Healthcare	<p>Presentation:</p> <p>Joyce Takeuchi from the Quality Improvement team with Molina Healthcare presented herself and provided a review of the Quality Program.</p> <p>Presentation Highlights:</p>	

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<p>Sarah Murad and Marilyn Ying Kempster, Manager, Population Health, Molina Healthcare</p>	<ul style="list-style-type: none"> • Molina Healthcare of California's Quality Improvement Program ensures members have access to qualified healthcare teams and reviews care quality issues • The program promotes safety through education for members and providers. • Resources include the "Grow and Stay Healthy Guide" and guidelines for children and teens. • Quality is evaluated through HEDIS® scores (tracking services like immunizations, screenings, prenatal care) and CAHPS® surveys (measuring member satisfaction). • The program aims to improve appointment access, provider availability, and overall member experience • Molina encourages members to get a flu shot for protection. Flyer with details was shared. • Important annual screenings: <ul style="list-style-type: none"> ○ Blood pressure, colon cancer (for adults 45–75), dental visits, diabetes management (A1c test, retinal eye exam, kidney evaluation), and women's health screenings (mammogram, bone density scan). ○ Provided links to full screening schedules by age for members. Emphasized the importance of regular checkups for early detection and prevention <p>No comments or questions from attendees.</p> <p>Sarah Murad, Program Manager for Population Health at Molina Healthcare, provided an overview of current work in Los Angeles County in partnership with the local health jurisdiction.</p> <p>Presentation Highlights:</p> <p>Background on Local Health Collaboration</p>	

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	<ul style="list-style-type: none"> • Under CalAIM's Population Health Management Program, DHCS redesigned Managed Care Plan (MCP) requirements for developing the Population Needs Assessment (PNA). • MCPs uses the PNA to identify members' priority health and social needs, including disparities. • Beginning in 2024, MCPs meet PNA requirements by participating in the county-led: <ul style="list-style-type: none"> ○ Community Health Assessment (CHA) ○ Community Health Improvement Plan (CHIP) • Collaboration includes local health departments, Community Based Organizations (CBOs), MCPs, hospitals, schools, higher education, and other government entities. • CHA/CHIP Overview <ul style="list-style-type: none"> ○ Public health agencies and nonprofit hospitals have long conducted community assessments to drive local action. ○ CHA (Community Health Needs Assessment): Systematic review of population health indicators. Identifies key community health problems and assets. ○ CHIP (Community Health Improvement Plan): Action plan based on CHA findings. Outlines strategies to improve community health outcomes. • DHCS Requirements for Managed Care Plans: MCPs must meaningfully participate in each local health jurisdiction's CHA/CHIP cycle. • Responsibilities include: <ul style="list-style-type: none"> ○ Data Sharing: Provide data supporting CHA/CHIP priority areas. ○ In-Kind Staffing or Funding: Support activities such as: <ul style="list-style-type: none"> ○ Administrative support ○ Project management ○ Consultants ○ Governance and data infrastructure ○ Community engagement and communications ○ CBO contracts and implementation strategies ○ Technical assistance ○ Stakeholder Engagement: ○ Attend township meetings ○ Serve on governance structures and subcommittees 	

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	<ul style="list-style-type: none"> ○ Engage the Community Advisory Committee for feedback ○ Public Posting: MCPs must publish the local CHA/CHIP on their websites. Los Angeles County MCP Collaboration ● Los Angeles County CHEIP (Community Health Equity Improvement Plan) Focus Areas <ul style="list-style-type: none"> ○ Black/African American Infant & Maternal Mortality: Ensure healthy births and thriving beyond the first year of life. ○ STIs & Congenital Syphilis: Protect current and future generations from STIs and congenital syphilis. ○ Environmental Justice: Reduce toxic exposures and climate-related health impacts in burdened communities. ○ Violence Prevention: Promote safe, peaceful communities free from violence. ● Long Beach CHIP Priority Areas <ul style="list-style-type: none"> ○ Better Health Through Strong Neighborhoods: Safe spaces, economic equity, housing stability, homelessness prevention. ○ Wellness Across the Lifespan: Maternal and child health, chronic disease, communicable disease, mental health. ● Pasadena CHIP Priority Areas <ul style="list-style-type: none"> ○ Improve health, function, and quality of life for older adults. ○ Support healthy development of adolescents and young adults. ○ Reduce chronic disease through supportive environments and policies. ○ Improve well-being of parents, infants, children, and families with a focus on health equity. ○ Reduce substance abuse and risk factors among high-risk groups. ○ Address psychological distress by improving access to mental health services. ○ Support housing and homelessness services. ● LAMCP Maternal Health Flyer <ul style="list-style-type: none"> ○ Developed collaboratively by MCPs and the local health jurisdiction. ○ Includes QR codes for: <ul style="list-style-type: none"> ■ All LA County health plans (Anthem, Blue Cross, Health Net, etc.) ■ Local resources for Los Angeles, Long Beach, and Pasadena ■ FindHelp ■ Black Infant & Family resources 	

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	<ul style="list-style-type: none"> ▪ Doula hotline <p>No comments or questions from attendees.</p> <p>Marilyn presented a review on Community Health Worker (CHW) Services & Molina Help Finder.</p> <p>Presentation highlights:</p> <ul style="list-style-type: none"> • Overview of Community Health Worker (CHW) Services: <ul style="list-style-type: none"> ○ CHWs are community members trained to help Molina members stay healthy and navigate the healthcare system. ○ They are not doctors but understand members' neighborhoods, cultures, and challenges. ○ CHW services are now a covered Medi-Cal benefit, though the work itself has existed for many years. ○ Members can access CHW services at no cost. • Examples of CHW Support: <ul style="list-style-type: none"> ○ Understanding a new diagnosis ○ Finding a doctor ○ Scheduling medical appointments ○ Arranging transportation ○ Connecting to community resources such as: <ul style="list-style-type: none"> ○ Food assistance ○ Housing support ○ Utility assistance • Role of CHWs: <ul style="list-style-type: none"> ○ Serve as a bridge between clinical care and social care. ○ Address social factors that significantly impact health outcomes • Molina Help Finder California Tool <ul style="list-style-type: none"> ○ A resource tool used by CHWs to help members locate community services. ○ Publicly available for any Molina member to use independently. ○ How the Tool Works: Users enter their zip code and the type of help they need (e.g., food, housing). The tool displays: <ul style="list-style-type: none"> ▪ A list of organizations in the area ▪ A map showing locations ▪ Contact information and business hours 	

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	<ul style="list-style-type: none"> ▪ Referral Function: <ul style="list-style-type: none"> • Users can make self-referrals. • CHWs can submit referrals on behalf of members to connect them with services. <p>Questions or Comments:</p> <ul style="list-style-type: none"> • Member JZ: Questioned whether the tool is available in the app or only on the web. • Marilyn: At his moment only on the web. • Member CO: Asked if account creation is necessary. • Marilyn: No log in is necessary. You may access the resources without creating an account. <p>Marilyn asked the attendees whether they preferred to be contacted by phone, email, or text.</p> <ul style="list-style-type: none"> • Phone call: 2 • Text: 5 • Email: 1 • Mail: 1 <p>Molina created a county-specific flyers with local CHW. For Los Angeles County, the flyer includes a map displaying all CHW providers in the area—about ten in total. The providers in Los Angeles County are shown as red dots on the map, and each represents an organization with a physical office location. Each flyer also lists the nearest Molina One-Stop Help Center, where staff can assist members and help them navigate services. Marilyn then asked for input on where these flyers should be placed so members can easily find them—beyond the usual locations like primary care offices.</p> <ul style="list-style-type: none"> • Member JZ: Social media such as Facebook, Instagram and WhatsApp. • Member CS: Dental offices or Eye Doctors • Member DO: Mail. • Member CO: Sharing with nonprofit organizations and at gyms • Member DO: At libraries 	

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Teena Martinez, Medicare Product Development, Molina Healthcare	<p>Teena Martinez from Medicare Product Development for Molina Healthcare, presented on upcoming plan changes for 2026. Teena shared all updates come from the Annual Notice of Changes (ANOC); members should contact Member Services if they have not received it. The ANOC is also available on the member website.</p> <p>Presentation highlights:</p> <p>Key Benefit Changes</p> <ul style="list-style-type: none"> • Maximum Out-of-Pocket (MOOP) <ul style="list-style-type: none"> ○ Reduced from \$9,350 to \$9,250. ○ Members with Medicare cost-sharing assistance (Medicaid) are not responsible for MOOP costs. • Food & Produce Benefit (SSPCI) <ul style="list-style-type: none"> ○ Monthly allowance reduced from \$75 to \$59. ○ SSPCI (Supplemental Benefits for the Chronically Ill) eligibility list expanded from 14 to 22 conditions, allowing more members to qualify. • Telehealth Expansion <ul style="list-style-type: none"> ○ Telehealth now available for a wider range of providers and services. ○ Includes physicians, chiropractors, group sessions, individual therapy, and more. • Transportation-Transportation benefit will now remain through Medicaid, addressing prior confusion with the vendor. • Over-the-Counter (OTC) Allowance <ul style="list-style-type: none"> ○ Reduced from \$100 to \$35 per month. ○ OTC allowance will be combined with OTC hearing aids. • Dental Benefit <ul style="list-style-type: none"> ○ Increased from \$1,000 to \$3,600 annually. • Vision Benefit <ul style="list-style-type: none"> ○ Increased from \$200 to \$250. • Post-Discharge Meals-New benefit for 2026. <ul style="list-style-type: none"> ○ After discharge from a hospital or skilled nursing facility: ○ 2 meals per day for 14 days, up to twice per year (total 56 meals). ○ Additional chronic-condition meal benefit available for members meeting specific criteria, coordinated through a case manager. 	

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Community Resources	<p>PERS (Personal Emergency Response System)</p> <ul style="list-style-type: none"> ○ No longer a covered benefit. <ul style="list-style-type: none"> ● Acupuncture <ul style="list-style-type: none"> ○ Newly added benefit. ○ Members now receive unlimited acupuncture. ● Hearing Aids-OTC Hearing Aids: <ul style="list-style-type: none"> ○ Now: Covered under the \$35 monthly OTC allowance. ● Drug Coverage <ul style="list-style-type: none"> ○ VBID program no longer used. ○ Drug coverage now relies on the Low-Income Subsidy (LIS) for most members. ○ Copays vary by drug tier. <p>Questions or Comments:</p> <ul style="list-style-type: none"> ● Member JZ: Questioned how medicine is categorized. ● Teena: It depends on the drug tier. When your provider prescribes a medication, they'll indicate whether it falls under Tier 1, Tier 2, and whether it's a generic or a non-generic drug. Most of the medications Molina providers prescribe are generics. Drug tier breakdown was shared with members. ● Member JZ: Questioned why benefits went up and others down. ● Teena: There was significant strategic planning behind this change. As noted on the earlier slide regarding the food and produce benefit, the list of chronically ill conditions was expanded. Because more members are now eligible for the monthly allowance, the benefit needed to be adjusted accordingly <p>Amritha encouraged members to sign up for the Molina member portal, where the fall newsletter is posted and the winter issue will be available soon. She explained that the fall issue focuses on staying healthy during the fall and winter seasons, including information on flu shots, COVID and RSV vaccines, and common flu symptoms. The newsletter also covers back-to-school reminders such as required vaccinations, sports physicals, and how to find local school meal programs. Additional articles address asthma management—emphasizing action plans at school—Molina's asthma education program, and the importance of fluoride varnish as a covered benefit to</p>	

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	<p>prevent cavities. Amritha also highlighted guidance on when to use virtual visits, urgent care, or the emergency room, along with reminders about mental health resources, seasonal stress, and the availability of behavioral health services, including the 988-crisis line. She noted that members may receive a CAHPS survey and encouraged them to complete it, reviewed the importance of the Health Risk Assessment, and invited members to refer others to join the Molina Community Advisory Team. Finally, she reminded everyone about the benefits of downloading the Molina app, including access to a digital ID card and the Nurse Advice Line.</p> <p>Questions or comments:</p> <ul style="list-style-type: none"> • Member CS: Recommended adding resources for programs that assist families who lack reliable transportation to get their children or grandchildren to childcare. She shared that she is currently facing this challenge and has not been able to get help despite contacting multiple workers. Her grandson is starting school to begin speech therapy, and although some transportation options are available, she needs a service that can take him directly to school and bring him home afterward. 	
Closing Remarks & Adjournment	<p>Adriana asked the attendees if they had any questions or comments.</p> <p>No questions or comments.</p> <p>Adriana closed the meeting and thanked everyone for their attendance.</p> <p>The meeting adjourned at 1:01 p.m.</p>	