Los Angeles Community Advisory Committee
Meeting Minutes

Date: September 17, 2026
Time: 11:30 a.m. – 1:30 p.m.
Location: Molina Healthcare
In-person & Virtual Meeting

Members:
Member CS
Member IL
Member MO
Member IG
Member MM
Member JZ
Member YA
Member UC
Member AJC
Member OV
Member LG
Member DO

Guest:
Guest MH

Governing Board:
Jiovanni Perez, Northeast Valley Health Corporation
Maria Aroch, Southern California Resource Services Independent Living
Jennifer Kumiyama, Disabled Resource Center (not in attendance)
Anna Tiger, United American Indian Involvement (Not in attendance)
Eric Burroughs, The 100 Black Men of Long Beach (Not in attendance)

Guest Presenter:
Jen Stillion
Grace Ramos
Laura Siegel

Molina Presenters:
Jennifer Barragan
Samareen Shami
Golshan Sadighi
Alicia Carbajal
Adriana Bowerman

Interpreters:
Marta Uribe

Molina Staff:
Ruthy Argumedo
Janet Segura
Juanita Carrola

Topic	Presentation/Discussion	Actions/Follow-Up
Call to Order	Jennifer Barragan called the meeting to order at 11:45 a.m.	
Welcome & Committee Self-Introductions	Jennifer opened the meeting by welcoming attendees and introduced herself. Jennifer explained the purpose of the Community Advisory Committee meeting and briefly walked through the agenda, highlighting presentations from Mental Health, Population Health, Medicare, Teladoc, followed by community resources.	
Jen Stillion- Mental Wellness "Mindfulness"	**Presentation:** Jen discussed how healthy habits are formed through repetition and routine rather than motivation alone. She introduced the concept of "micro moments" small, intentional actions such as stretching, taking a short walk, drinking water, stepping	

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	outside for fresh air, or pausing before reacting to stress. Jen emphasized that while these actions may seem small, they are powerful because they create sustainable change over time. Participants were encouraged to focus on creating one small wellness moment each day rather than attempting to make major life changes all at once. The presenter explained that these moments accumulate, eventually becoming habits that support a healthier, calmer, and more resilient lifestyle. She then guided attendees through a one-minute reset exercise, using the 5-5-5 breathing technique (inhale, hold, and exhale for five seconds each), along with posture adjustments and mindfulness practices to help them stay present and reduce tension. The session also included gentle stretching exercises, shoulder and chest-opening movements, and simple stress-relief techniques such as shaking out the hands and relaxing the shoulders. To conclude, participants engaged in a brief dance and movement activity designed to elevate mood, release stress, and increase energy. Jen closed by encouraging attendees to incorporate micro moments throughout their day, reinforcing the message that small moments can lead to significant improvements in overall well-being.	
Meeting minutes	Reviewed minutes from June 17, 2026, meeting with a motion to approve the meeting minutes brought forth by Member CS and seconded by Member MO.	
Action Items	The action items from the previous meeting were reviewed, and the following updates were provided: • Member reported not receiving member incentives/rewards for her daughter's appointments. Quality improvement investigated with the vendor team and responded that the member's daughter was not eligible for member incentives/rewards due to age restrictions. Members can check eligibility by calling the Wellness Rewards line at 866-621-5056 or Member Services at 888-665-4621	

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	• Member reported not receiving a member incentive for Medicare or Medi-Cal qualifying check-ups. Medicare representative connected with the member to verify that the member was eligible and redirected the member to the member incentives team to receive assistance. • Member reported waiting months for a medical appointment. Quality Improvement team received the member's provider information and member concern was directed to the provider's ACCESS department. Member services connected with the member to inform the member that if this is a recurring issue the member can change primary care provider. • Member stated that she was unaware that Molina provided transportation. One Stop Help Specialists connected with the member to provide education on scheduling transportation services. • Member expressed issues with securing cataract surgery. Member was assigned a Case Manager to assist member with coordination of care.	
Molina Healthcare **Samareen Shami, Population Health, Molina Healthcare**	**Presentation:** Samareen Shami, Director of Population Health at Molina, presented an overview of Population Needs assessment findings on Community Health Worker (CHW) program and provided a breakdown of Molina's community reinvestment efforts, seeking member feedback on both initiatives. She explained that Molina evaluated the CHW benefit to determine whether engagement with CHWs increased primary care provider (PCP) visits and helped members close preventive care gaps, such as annual checkups, immunizations, and recommended screenings. Samareen shared that the findings demonstrated positive outcomes. Members who worked with a CHW were approximately twice as likely to visit their PCP and complete preventive health screenings compared to those who did not utilize CHW services. The data also showed that adults ages 50 to 64 most frequently used CHW support to access primary care, while members ages 0 to 21 experienced the greatest improvement in completing preventive care and closing care gaps. Samareen explained that CHWs, also referred to as promotoras or health navigators, assist members in connecting to healthcare services and community resources, including medical appointments, food assistance, and housing support. She noted that CHWs also help Molina identify community needs through the information they gather while assisting members.	

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	The presentation highlighted key social determinants of health identified in Los Angeles, including food insecurity, housing instability, and homelessness. Data showed that housing and homelessness concerns were most reported among White/Caucasian and Black/African American members. Additionally, Russian-speaking and some Spanish-speaking members were found to experience higher rates of housing insecurity and homelessness. Samareen emphasized the importance of providing resources in the languages most needed by local communities and discussed opportunities to expand the CHW workforce with multilingual staff. She noted that increasing access to CHWs who speak languages such as Russian could help address identified community needs more effectively. Samareen concluded that the findings demonstrate the positive impact of Molina's CHW program on member engagement and preventive care outcomes. She invited participants to share their experiences with CHWs and provide feedback on the benefit. Members feedback and questions: • **Member JZ:** Asked how the information for the report is collected. • **Samareen:** Explained that the information is collected when members report their needs and experiences during healthcare visits. Data is also received from providers, and the organization works collaboratively with county partners to identify and address community needs and other key issues affecting members. Samareeen asked the group if they had any experience working with CHWs or promotoras. • **Member DO:** Member shared that she has worked with a Community Health Worker in the past. • **Samareen:** Asked the member how the member's experience was. • **Member DO:** Shared that the CHW was very helpful. Samareen asked whether any members received outreach calls from a Community Health Worker (CHW). Members reported that they had not received any calls from a CHW. • **Member MO:** Asked if CHWs were the doctors that go to your home or if they	

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	provided information. • **Samareen:** Explained that CHW's help members access appropriate resources, navigate the healthcare system, and better understand their benefits. She clarified that CHWs are not medical providers. • **Alicia:** Is CHW different than a Case manager? • **Samareen:** Yes, A case manager is different than a CHW. A case manager is usually medically licensed and would help you with your medical care. That does not mean that the case manager does not help you navigate the system, they may help you connect with your doctors if your case is complicated. A CHW is an additional resource and can allow you to receive general help, not always clinical. Samareen asked members if they have faced any barriers? • **Member JZ:** Stated language is a barrier. • **Member UC:** Shared that customer service representatives can be rude during interactions. • **Member DO:** Member shared that members could file a grievance if they are experiencing poor services. • **Ruthy:** Explained that Molina partners with Community Health Worker organizations to provide support services to members. She encouraged members to contact the office if they experience issues such as lack of response, unprofessional behavior, or poor communication from a CHW organization. She noted that staff members, including Isaac and Juanita, are available to assist and address concerns. Ruthy emphasized the importance of reporting these issues so that the organization can identify the responsible agencies, work with internal teams to investigate concerns, and take appropriate steps to prevent similar experiences for other members. • **Member UC:** Member clarified that the complaint about poor customer service was in regards transportation customer service through American Logistics. • **Ruthy:** Clarified that American Logistics is separate from the Community Health Workers. • Members can receive assistance with scheduling transportation through calling the One Stop Help Centers or Member Services. Members were thanked for their feedback.	

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Golshan Sadighi, Population Health, Molina Healthcare	Golshan Sadighi introduced herself and provided an overview of the Community Reinvestment Program Initiative, a state-mandated requirement for all Medicaid health plans, including Molina. She explained that the program requires health plans to reinvest a portion of their profits into the communities they serve through projects that address health-related social needs and support community-based interventions benefiting the broader community. She noted that while proposals were originally due to the state on September 1, the submission deadline was extended to October 15. Upon state approval, funding will be released to the selected organizations and projects will be implemented. Golshan shared that the proposals selected for Los Angeles County align with the state's spending categories, including cultivating neighborhoods and built environments, developing the healthcare workforce, improving outcomes for priority populations, strengthening local communities, and advancing overall community health. She reported that Molina had completed its internal review of the proposals and was presenting them to CAC members for feedback. The proposals were developed based on identified community needs and Molina's community reinvestment priorities. Golshan reviewed six proposed projects for Los Angeles County and highlighted several key initiatives. One proposal focuses on expanding Community Health Worker (CHW) workforce capacity to strengthen services and enhance the skills and capabilities of CHWs serving the community. She also highlighted the Parks and Recreation and Everybody Plays initiatives, along with Community Health Outreach Initiatives (CHOI), noting that these projects are being co-funded and implemented in partnership with other health plans to increase community access to services and resources. Members were given time to review the proposals before providing feedback and participating in discussion. Members feedback and questions: • **Member JZ:** Member asked how long will it take for the State to approve initiatives?	

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	• **Golshan**: Explained that proposals are scheduled to be submitted to the state by October 15 and that the review process is expected to take approximately 60 days. She noted that, pending state approval, the organization is prepared to launch the approved initiatives with implementation anticipated to begin as early as December. • **Member MO:** Member highlighted the Parks and Recreation proposal and shared that, as a parent of young children, after-school programs are an important community resource and agreed with the funding. • **Golshan:** Agreed that it was a great after-school program to fund for 7-12 year old children, adding the importance of building confidence, developing new skills and supporting overall health and well-being. • **Member CS:** Member highlighted the importance of expanding access to healthy foods and nutrition education, particularly for seniors, homebound individuals, and individuals living with chronic health conditions. Members were thanked for their feedback.	
Alicia Carbajal, Sales & Medicare Product Development, Molina Healthcare	Alicia Carbajal, from Sales & Medicare Product Development for Molina Healthcare, presented an overview of Molina's 2026 California Medicare benefits, with a focus on the supplemental Food and Produce Benefit available through the Molina Medicare Complete Care Plus (HMO D-SNP) plan. She reviewed eligibility requirements, the approval process, card activation, methods for purchasing food and produce, and the availability of online purchases through participating retailers. Members were encouraged to ask questions throughout the presentation and provided information on accessing additional support. Alicia reviewed participating retail locations for the Food and Produce Benefit, including Albertsons, Vons, and Costco, and shared that Superior Grocers is expected to be added by the end of the current quarter, with Northgate Markets anticipated to participate by the end of the year. Alicia explained that members receive a MyChoice card, which includes a monthly over-the-counter (OTC) allowance of $35 with no rollover and access to an OTC product catalog. She noted that eligible members with qualifying chronic conditions may also receive a $59 monthly Food and Produce Benefit. Eligibility is determined through a Health Risk Assessment (HRA), during which members answer a series of	

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	health-related questions. She also reviewed the NationsBenefits website and customer service resources available to members for viewing benefits, checking eligibility, browsing the OTC catalog, placing online orders, and activating their cards. Members feedback and questions: • **Member OV:** Member shared that she is approaching Medicare eligibility and requested assistance in understanding the enrollment process and preparation requirements. • **Alicia:** Stated that she would connect with the member following the meeting to provide additional guidance. • **Member OV:** Member inquired about the chronic conditions required to qualify for the Food and Produce Benefit. • **Alicia:** Explained that qualifying conditions may include diabetes, cancer, chronic heart failure, chronic liver disease, and asthma, among other chronic illnesses. She noted that eligibility is determined through an assessment conducted by a case manager. • **Member MO:** Member asked whether the benefit was associated with Medicare and requested clarification regarding eligibility age requirements. • **Alicia:** Confirmed that the benefit is available through a Medicare plan and explained that individuals generally qualify for Medicare at age 65 or, in some cases, after receiving disability benefits for two years or more. • **Member UC:** Asked if a diabetes condition would qualify for the benefit. • **Alicia:** Clarified that, for individuals under age 65, Medicare eligibility may also be established through a qualifying disability. She advised that members may apply through the Social Security Administration to determine eligibility. Members were thanked for their feedback.	
Grace Ramos, Teladoc Health	Grace Ramos, Manager at Teladoc Health, introduced herself and provided an overview of Teladoc services available as a Molina member benefit. She explained that eligible Molina members can access virtual healthcare services at no cost through Teladoc, offering a convenient option for receiving medical and behavioral health care remotely. Grace reviewed the two primary services available through Teladoc: 24/7 General Medical Care and Mental Health Services. She explained that the general medical service is available to eligible Medicaid, Marketplace, and Medicare members of all	

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	ages and provides access to licensed physicians for non-emergency health concerns, including cold and flu symptoms, ear infections, pink eye, bronchitis, and other common illnesses. Members may access services at any time through the Teladoc website, mobile application, or dedicated telephone line. She emphasized that Teladoc services are provided at no cost to Molina members and can help address barriers such as transportation challenges, limited appointment availability, and the need for medical care outside of traditional office hours. She noted that licensed providers can assess symptoms, provide diagnoses, and prescribe medications when medically appropriate. Grace outlined the account registration process, stating that members must create an account by submitting basic personal information, including their name, date of birth, contact information, and medical history. Once registered, members may request virtual visits as needed without restrictions on the number of consultations. Grace highlighted the availability of Mental Health Services for members ages 18 and older. Members can schedule virtual appointments with therapists, psychologists, and psychiatrists and may continue ongoing care with a provider of their choice. Appointments are available seven days a week and are generally scheduled within seven days of the initial request. Interpreter and translation services are available for both medical and behavioral health visits to support members with language access needs. Grace concluded the presentation by reviewing Teladoc contact information, the website, and the mobile app, encouraging members to utilize the benefit as a convenient and accessible option for receiving healthcare services. Members feedback and questions: • **Member CS:** Asked whether Teladoc provides in-home assistance for members following a hospital visit, sharing a personal experience in which support was provided after severe asthma episodes. • **Juanita:** Clarified that the service involving in-home visits is through the CareConnections team, rather than Teladoc.	

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	• **Member JZ:** Asked whether members with an assigned Primary Care Provider (PCP) could still use Teladoc services. • **Grace:** Explained that Teladoc serves as an additional option for accessing care and that members are not penalized for utilizing Teladoc. She noted that members may choose either a Teladoc consultation or an appointment with their PCP, depending on their needs and preferences. • **Member AJC:** Commented that Teladoc is a valuable benefit, particularly when a member's Primary Care Provider does not have appointments available. Members were thanked for their feedback.	
Adriana Bowerman, Manager, Growth & Community Engagement, Molina Healthcare	Adriana, Community Resources Manager, presented a draft Community Advisory Committee (CAC) recruitment flyer and asked members for feedback on its content, messaging, and overall appeal. She explained that the flyer was designed to support member recruitment and is currently available only in English, with translations planned after final approval. Adriana asked members to consider whether the flyer clearly conveyed the CAC's purpose and encouraged participation. • Members reviewed the flyer and indicated that it was informative, welcoming, and clearly communicated the purpose of the Community Advisory Committee. Members shared that the content was appealing and would encourage participation in future meetings. • **Member MO:** Asked about the frequency of Community Advisory Committee (CAC) meetings and if there were more meetings. • **Adriana**: Explained that CAC meetings are held quarterly and are intended for members residing in the counties served by Molina. • **Member MO:** Inquired about attendance options and asked whether meetings could be attended virtually. • **Adriana:** Explained that while virtual participation is available, when necessary, Molina encourages members to attend in person to promote engagement, networking, and relationship-building with fellow members. She noted that members who are unable to attend in person may arrange to participate virtually by notifying the Molina representative coordinating meeting invitations.	

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Laura Siegel, Attorney, Neighborhood Legal Services of Los Angeles County	Adriana reviewed the organization's Seasonal wellness newsletter, which was included in the meeting materials. She highlighted that the newsletter contains health education resources, benefit information, dental care topics, and wellness-related content. She informed members that the newsletter is available online through Molina's website and can also be accessed in the lobby. Members were encouraged to review the publication and utilize the health and wellness resources provided. Adriana introduced Laura Siegel, Attorney with Neighborhood Legal Services of Los Angeles County (NLSLA), providing an overview of the organization and the free legal services available to residents throughout Los Angeles County. Laura explained that NLSLA is a nonprofit legal aid organization that has served the community since 1965 and helps at multiple office locations as well as telephone-based services. She noted that the organization offers legal support across a wide range of practice areas, including healthcare access, housing and landlord-tenant matters, family law and domestic violence, public benefits, re-entry services, workers' rights, estate planning, disaster assistance, consumer debt, bankruptcy, and education rights. She also highlighted the organization's medical-legal partnerships, self-help court services, legal clinics, community education, and outreach efforts. Laura emphasized that language access services are available to community members in any language through bilingual staff and interpretation services. She encouraged members to seek assistance when language barriers may affect access to legal or healthcare-related services. Representing the Health Consumer Center, Laura explained that her team assists individuals with a variety of healthcare-related legal issues, including obtaining and maintaining Medi-Cal and Covered California coverage, resolving insurance denials, addressing medical debt and billing concerns, accessing dental care services, securing In-Home Supportive Services (IHSS), and resolving issues related to skilled nursing facilities. She noted that the Health Consumer Center assists with most healthcare consumer issues, except for medical malpractice and disability appeals. Laura also reviewed several recent and upcoming Medi-Cal policy changes that may affect eligibility and benefits. She informed members about changes related to	

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	immigration-based eligibility for full-scope Medi-Cal, asset limits for certain seniors and individuals with disabilities, upcoming work requirements, reduced retroactive coverage periods, more frequent renewal requirements, and future limitations to dental coverage for certain immigrant populations. She encouraged members to remain informed about these changes, maintain current contact information with Medi-Cal, complete all required renewals and paperwork, and seek assistance before making decisions regarding their healthcare coverage. Laura emphasized that while several policy changes are occurring, many members will not experience significant changes to their benefits. Laura encouraged members to verify how the changes may affect their specific circumstances and to consult trusted organizations before taking action. She also advised members who may lose dental benefits in the future to utilize currently available services and preventive care. Laura concluded the presentation by providing information on how to access services through the Health Consumer Center hotline, the organization's general legal assistance hotline, and online intake resources. She also highlighted the Health Consumer Alliance, a statewide network of legal aid organizations that assist individuals with healthcare-related legal issues throughout California and encouraged members to utilize available resources for information and support. Members feedback and questions: • **Alicia:** Asked whether Neighborhood Legal Services helps with Powers of Attorney (POA). • **Laura:** Explained that a Power of Attorney is a legal document that allows an individual to designate another person to make decisions or act on their behalf, particularly in situations where they are unable to communicate or manage their own affairs. She shared that NLSLA's Estates and Trusts team can provide guidance and referrals regarding Powers of Attorney, including referrals to an organization called Bet Tzedek, but does not currently prepare the documents directly. Laura emphasized the importance of establishing a Power of Attorney before it becomes necessary, as the individual must be capable of making and communicating that decision at the time the document is executed. She also noted that conservatorships may be appropriate in situations where an individual is no longer able to make decisions	

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	independently. • **Member MO:** Member asked whether Neighborhood Legal Services assists with conservatorships. • **Laura:** Clarified that conservatorship matters are typically handled by Bet Tzedek Legal Services and explained that conservatorships are more complex legal proceedings because they involve a court determining that an individual is unable to make decisions independently.	
Closing Remarks & Adjournment	Jennifer asked the attendees if they had any questions or comments. No questions or comments. Jennifer closed the meeting and thanked everyone for their attendance. The meeting adjourned at 1:23 p.m.	