Enrollee Advisory Committee (EAC) Meeting Minutes

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Date: September 10, 2026

Time: 1:30 p.m. to 3:00 p.m.

Chairperson: Sara Macdonald, Member / Board of Directors (BOD) Liaison

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Enrollee Advisory Committee (EAC) Members Present:
Cynthia Guerrero, Member
Deborah Goodwin, Member
Sara Macdonald, Member / Board of Directors (BOD) Liaison

EAC Members Excused:
N/A

CenCal Health Staff Present:
Bao Xiong, Director of Program Development, EAC Coordinator
Cammie Flores, RN, BSN, MBA, CCM, Health Services Operations Officer
Eric Buben, Senior Director of Member Experience and Services
Gabriella Djuarna, MPH, Program Development Specialist
Nicolette Worley Marselian, MBA, Director of Communications and Marketing
Rachel Lambert, LMFT, MBS-HCM, Director of Behavioral Health
Hector Garcia, Medicare Director
Santiago Segovia, Manager of Program Development and Health Equity
Dr. Van Do-Reynoso, MPH, PhD, Chief Customer Experience Officer, Chief Health Equity

Guests:
Carmen Gaitan, Consumer Advocate, Access Central Coast
Penny Jones, CenCal CareConnect Member
Philippe Chapelle, CenCal CareConnect Member
Tamara Broder, Consumer Advocate, Health Insurance Counseling and Advocacy Program (HiCAP)
Wendy Davis, CenCal CareConnect Member

Administrative Support: Gabriella Djuarna, MPH, Program Development Specialist

Location: Hybrid Meeting

- 2125 S Centerpointe Pkwy, Santa Maria, CA 93455
- Virtual: Zoom

Agenda Item	*Discussion*

DRAFT

1. Welcome, Introductions, and Announcements All	**Ms. Macdonald** called the meeting to order at 1:40 p.m., reviewed the announcements, agenda, and facilitated introductions. The following agenda items were moved to the end of the meeting: *EAC Selection Committee Approval of New EAC Members and Follow-up Items from Q2 EAC Meeting*.
2. Public comment on any non-agenda item of interest to the public that is within the subject matter jurisdiction of the EAC All	There were no public comments.
3. Approval of Minutes – May 26, 2026 EAC Meeting – Action Item All	**Mr. Guerrero** submitted a motion to approve the minutes from May 26, 2026. **Ms. Goodwin** seconded the motion. The May 26, 2026 EAC Meeting Minutes was unanimously approved by the EAC.
4. CenCal CareConnect Membership E. Buben, Senior Director of Member Experience and Services	**Mr. Buben** presented a PowerPoint presentation titled, CenCal CareConnect Enrollment Data and Member Demographics. The CenCal CareConnect enrollment goal and enrollment growth were presented. As of September 10, 2026, there were 865 CenCal CareConnect members. This number is expected to grow. CenCal CareConnect's member demographics were also shared by age distribution by county, gender by county, and language by county. Demographic data indicate that the majority of members are aged 65 or older. The membership is composed of 61% females and 39% males. Additionally, most members are English-speaking, with 85% reporting English as their primary language.
5. CenCal CareConnect Materials N. Worley Marselian, Director of Communications and Marketing	**Ms. Worley Marselian** presented a PowerPoint presentation titled, CenCal CareConnect Materials. This included an overview of the CareConnect Plan website: (https://www.cencalhealth.org/health-plans/careconnect/) The website provides information on eligibility requirements and member benefits as well as important plan documents.
6. CenCal CareConnect Marketing and Outreach Plan	**Ms. Worley Marselian** presented a PowerPoint presentation titled, Age-In Outreach and Marketing. The term "age-in" refers to individuals who are turning 65 years of age and are currently enrolled in Medi-Cal but have not yet

DRAFT

N. Worley Marselian, Director of Communications and Marketing	become eligible for Medicare. The age-in marketing timeline begins with a letter sent ten (10) months before an individual's 65th birthday to inform them of their upcoming Medicare eligibility. Three months before their birthday, during their Initial Enrollment Period, a second letter and a CenCal CareConnect brochure are mailed to provide enrollment information. During the individual's birthday month, a birthday card is sent that includes the enrollment deadline. Three months after their 65th birthday, a postcard is mailed to individuals, providing them with a phone number they can all with questions about Medicare. **Discussion:** **Ms. Guerrero** inquired whether CenCal CareConnect plans to expand its presence at community events through additional informational booths. **Ms. Worley Marselian** responded that, during the upcoming Annual Enrollment Period (AEP) from October 1 through December 7, 2026, CenCal CareConnect will participate in community-based outreach events to educate individuals about Medicare and CenCal CareConnect. CenCal Health's Strategic Engagement team regularly participates in community events, with staff available to answer questions regarding CenCal CareConnect. **Ms. Guerrero** expressed interest in serving as a CenCal CareConnect ambassador and would appreciate the opportunity to participate in community events alongside CenCal Health. **Ms. Worley Marselian** welcomed **Ms. Guerrero's** participation and will connect with her after the meeting. **Ms. Macdonald** also expressed interest in serving as a CenCal CareConnect ambassador. **Ms. Worley Marselian** welcomed her participation as well.
7. Behavioral Health Services R. Lambert, Director of Behavioral Health	**Ms. Lambert** presented a PowerPoint presentation titled, Behavioral Health Services. Behavioral health care is shared between CenCal Health and County Behavioral Health. For the Medi-Cal line of business, CenCal Health covers outpatient mental health care, therapy and assessments, and medication support, which are generally appropriate for members with mild to moderate behavioral health needs. The County Behavioral Health covers specialty mental health services, crisis and higher levels of care, and additional intensive supports for individuals with more significant or acute behavioral health needs. CenCal CareConnect covers all levels of mental health care, as well as substance use disorder services. CenCal CareConnect members can continue seeing their same

DRAFT

	behavioral health providers whether they are receiving care through Medi-Cal or CenCal CareConnect. Ms. Lambert highlighted the role of CenCal Health's Behavioral Health Coordinators, who assist members in accessing care by helping them locate providers, schedule initial appointments, and connect with specialists when needed. Members can contact the Behavioral Health Coordinators by calling (877) 814-1861. **Discussion:** **Ms. Gaitan** shared that she serves as a Community Supports provider through her job at the Access Central Coast. She provides Housing Transition Navigation Services (HTNS) and Housing Tenancy and Sustaining Services (HTSS).
8. Care Coordination and Care Management Services C. Flores, Health Services Operations Officer	**Ms. Flores** presented a PowerPoint presentation titled, Care Coordination and Care Management for D-SNP CareConnect Members. Every CenCal CareConnect member is supported by a dedicated care team that consists of a nurse, care manager, and coordinator. The care team serves as the member's primary point of contact, providing support with navigating healthcare services, benefits, and care coordination across Medi-Cal and Medicare. The care team ensures that every CenCal CareConnect member has completed a Health Risk Assessment (HRA), Individualized Care Plan (ICP), and Interdisciplinary Care Team (ICT) case review, Face-to-Face visit, and other care coordination activities as part of comprehensive D-SNP care management. The overall goal is to provide seamless care, improve health outcomes, and enhance members' quality of life. The Care team serves as an advocate and trusted partner for members by helping them understand their benefits, treatment options, and next steps in care. The team also provides health education and promotes self-management by helping members better understand their health conditions, medications, and preventive care needs. The care team helps bridge services across healthcare and community-based systems by connecting members to behavioral health services, community resources, and social supports. Assistance may also be provided for social drivers of health that impact health, such as housing, food, and transportation needs. Through regular member contact and health monitoring, the Care Team can identify potential concerns early and intervene before issues worsen. Care management follows a whole-person approach that considers members' physical, behavioral, social, and spiritual needs when developing care plans.

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	The Care Team also promotes continuity of care by supporting smooth transitions between care settings, including assisting members with follow-up instructions and appointment scheduling after hospital discharge. The Interdisciplinary Care Team (ICT) is a collaborative group of clinical and care management staff who review members' individualized care plans, share clinical insights, and address emerging needs or barriers to care. Primary care providers, specialists, and nurse care managers may submit referrals to support members' care needs. Timely submission of referrals and authorization requests is important to help prevent delays in service delivery. Coordination across Medi-Cal and Medicare benefits helps ensure timely access to services, reduces duplication of care, and supports comprehensive, whole-person care planning. Regular collaboration among the ICT, specialists, and primary care providers help address care gaps and improve health outcomes for dual-eligible members. The program's goal is to maintain continuity of care for all members regardless of risk level or engagement status. Communication among healthcare settings and providers during transitions is important to reduce fragmentation of care and ensure members receive the appropriate services at the right time and in the appropriate setting. Following a hospital discharge, care managers conduct outreach to D-SNP members to confirm that a follow-up appointment has been scheduled within 7 to 14 days, as appropriate, and assist with scheduling when necessary. **Ms. Flores** reported that Utilization Management processed 1,374 authorizations while maintaining a turnaround time compliance rate of more than 99%. She also reported that 245 members had accepted care management services. **Discussion:** **Ms. Guerrero** requested an opportunity to meet with Ms. Flores to address her specific questions about care coordination and care management services.
9. Follow-up Items from Q2 EAC Meeting B. Xiong, Director of Program Development	**Ms. Xiong** addressed four follow-up items from the prior meeting: • In response to the EAC request to develop outreach materials to support EAC recruitment, CenCal Health developed a flyer in both English and Spanish. The flyer was included in today's EAC meeting packet and made available to EAC members via email. • Thank you to Ms. Guerrero for supporting EAC recruitment efforts. Staff connected with an EAC

	applicant, who will be presented to the EAC Selection Committee during today's meeting. • In response to an EAC member's request for information on SortPak Pharmacy, staff emailed the requested information to interested EAC members. • In response to the EAC request to provide an overview of the CenCal CareConnect Marketing and Outreach Plan, this topic was covered in today's EAC meeting.
10. EAC Selection Committee Approval of New EAC Members All	**Ms. Macdonald** introduced the five EAC applicants and invited each applicant to share their interest in serving on the EAC. Applicants included: • Carmen Gaitan, Consumer Advocate, Access Central Coast • Penny Jones, CenCal CareConnect Member • Philippe Chapelle, CenCal CareConnect Member • Tamara Broder, Consumer Advocate, Health Insurance Counseling and Advocacy Program (HiCAP) • Wendy Davis, CenCal CareConnect Member **Ms. Guerrero** submitted a motion to approve. **Mr. Buben** seconded the motion. All five applicants were unanimously approved by the EAC Selection Committee to be EAC members.
10. Member Experience Insights All	**Dr. Do-Reynoso** facilitated a discussion on members' experience with CenCal CareConnect. **Ms. Guerrero** shared that Member Services has always been there for her. **Ms. Macdonald** echoed Ms. Guerrero's sentiments, sharing that she also had a positive experience with Member Services. She expressed appreciation for Member Services supporting her with her pharmacy benefits. **Ms. Davis** shared that it would be helpful if there were shorter wait times to reach someone from CenCal CareConnect. **Ms. Guerrero** concurred with Ms. Davis. **Mr. Chapelle** shared that he appreciates human contact instead of using AI. **Ms. Broder** suggested a general email inbox that CenCal CareConnect members can contact for assistance. **Mr. Buben** confirmed that CenCal Health has a secure member portal where members can securely send a message, and that CenCal Health does not use AI to answer phone calls from members. **Dr. Do-Reynoso** thanked the EAC members for sharing their experience.

	Ms. Macdonald adjourned the meeting at 3:00 p.m. She thanked the EAC for their time and participation.
Next meeting: December 17, 2026	

Respectfully submitted,

(To be approved at the December 17, 2026 meeting, Meeting by EAC vote)

Bao Xiong
Director of Program Development, EAC Coordinator

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