Meeting Agenda

March 11, 2025

Meeting Location

Sierra Health Foundation, Bannon Island Conf. Room, 1321 Garden Highway, Sacramento, CA 95833

Name	Attendance	Name	Attendance		
SCHA Voting Members					
Ann Boynton	⊠Present □ Absent	Marvin Kamras, MD	□ Present ⊠ Absent		
April Ludwig	□ Present ⊠ Absent	Michelle Monroe	⊠Present □ Absent		
Britta Guerrero		Phylis Baltz			
Edwin Kirby, Vice-	⊠Present □ Absent	Ravinder Khaira, MD	⊠Present □ Absent		
Chair					
Jerry Bliatout		Stacy Lorenzen	□Present ⊠ Absent		
Julie Gallelo	⊠Present □ Absent	Supervisor Kennedy	□ Present ⊠ Absent		
Keri Thomas	⊠Present □ Absent	Tim Lutz	⊠Present □ Absent		
Kim Williams	⊠Present □ Absent				
Kirti Malhotra, MD	⊠Present □ Absent				
SCHA Non-voting Members					
Abbie Totten		Beau Henneman	⊠Present □ Absent		
Amber Kemp		Janice Milligan	□ Present □ Absent		
Banafsheh Siadat	⊠Present □ Absent	Venu Kondle	□ Present ⊠ Absent		
County Staff to SCHA					
Jenine Spotnitz	⊠Present □ Absent	Alyxe Lett	⊠Present □ Absent		
Gina Patterson	□ Present ⊠ Absent	Maryam Muslih	⊠Present □ Absent		
Angelica Jackson	⊠Present □ Absent				

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1. Welcome/Opening Remarks and Updates – Eddie Kirby, Interim Chair	
Vice-Chair Eddie Kirby convened the meeting and provided a brief welcome message and overview of the meeting objectives at 3:11pm.	
Commissioner Ann Boynton informed the Commission of her retirement and resignation from the Health Authority.	3:00 – 3:10pm
Vice-Chair Eddie Kirby introduced newly appointed Commission member, Julie Gallelo, who is the Executive Director of First 5 Sacramento and is joining as the Medi-Cal Dental Advisory Group representative.	

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Kerri Thomas from Sutter Health also introduced herself to the Commission as a recently appointed member representing the Hospital system.	
Updates from Sub-Committees	
Vice-Chair Eddie Kirby notified the Commission that Kyle Stefano has resigned from the Health Authority and that the Consumer Protection Committee (CPC) will be seeking a new Committee Chair.	
There were no updates from the Quality Improvement/Quality Assurance (QIQA) because the Committee has not met this calendar year. The intention is to meet once the contract with NORC is executed.	
Ad Hoc Committee 5 Chair Ann Boynton noted that Commissioner Michelle Monroe will be the new Chair of this Committee, as appointed by Vice-Chair Eddie Kirby.	
Program Manager, Jenine Spotnitz of the Department of Health Services (DHS) informed the Commission that DHS was able to negotiate with NORC the last remaining issues with the contract and the intention is to execute in the coming weeks to begin the work.	
2. Actions: Approval of 2/3 Meeting Minutes, Appointment of Access to Specialty Care Ad Hoc Committee, and Appointment of Ad Hoc Committee 5 Chair – Eddie Kirby, Interim Chair	
Vice-Chair Eddie Kirby facilitated voting to approve the meeting minutes from the February 3, 2025 General Commission meeting. Dr. Ravinder Khaira motioned to approve. Ann Boynton seconded the motion.	
Jenine Spotnitz did a rollcall of votes. The motion passed to approve the meeting minutes from 2/3/2025.	3:10 – 3:20 pm
Vice-Chair Eddie Kirby appointed the following members of the Specialty Care Ad Hoc Committee: Michelle Monroe, Phyllis Baltz, Kim Williams, and Britta Guerrero. The Committee can invite non-voting members to attend as needed.	
Vice-Chair Eddie Kirby appointed Michelle Monroe as Ad Hoc Committee 5 Chair.	
3. Presentation and Discussion: SCHA Commissioner Survey Findings – Ann Boynton, UC Davis Health	
Commissioner Ann Boynton provided background on the Health Authority survey and mentioned that the focus of the Commission's discussion for this meeting will be the narrative responses from the survey to the questions around the Commission's strengths, areas for	3:20 - 3:50 pm

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improvement, and changes that the Commission would like to recommend or amplify.	
 Survey responses for what are the SCHA's greatest strengths: Commitment to Mission and Community Well-being Diverse and Passionate Representation Commitment to Member and Stakeholder voices Effective collaboration and leadership 	
Discussion: A Commissioner mentioned a strength being the ability of the Commission to bring together so many diverse stakeholders and one worth building upon in the future to better serve the Sacramento population.	
Another Commissioner mentioned she was reassured by the focus on the commitment to diversity.	
Another Commissioner mentioned the process of finding more members and having more participation will be helpful and will help deepen the Commission's commitment to the community.	
Survey responses for what are the SCHA's areas for greatest improvement: • Governance, participation and accountability • Communication and strategic planning • Stakeholder engagement and systems healthcare gaps	
Discussion: A Commissioner commented on ensuring the Commission is creating a space that encourages participation and that they are not intentionally or unintentionally leaving people out, especially as the Commission seeks to recruit new members.	
Another Commissioner mentioned that with regard to recruitment of new members that maybe the timing and location of General Commission meetings might not be conducive to meet the needs of more individuals, and that the Commission may need to adjust to meet people where they are, especially if they are trying to engage with more Medi-Cal beneficiaries.	
A few Commissioners commented on the Commission by-laws regarding Commissioner attendance, specifically for those who do not attend Commission meetings regularly. There was interest in how the Commission can encourage members to fulfill their commitment and whether there should be more enforcement of the bylaws resulting in removal of a Commissioner who does not fulfill their participation	

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commitment. There were a few solutions provided by other Commissioners, including sending out a brief survey to individuals who are not attending regularly to better understand why they are not attending and the idea of Commissioners having a stand-in or designee attend in their place. Additionally, a Commissioner suggested providing a clear list of expectations to new Commissioners during their onboarding.	
Another Commissioner suggested that there could be more frequent communication around the Health Authority's Strategic Plan, especially updates on progress and to ensure that any actions or discussion from General Commission Meetings are aligned with the plan. Additionally, it was suggested that part of new member onboarding could be to go over the Strategic Plan.	
A few Commissioners suggested re-arranging the setup of the room in which Commission meetings take place in order to facilitate better discussion and the ability to hear one another more clearly. Similarly, a Commissioner proposed considering having small group discussions during Commission meetings and finding other ways to engage those who attend online.	
A Commissioner mentioned that in other Commissions they've been a part of they have implemented a "buddy" system or have paired members together, especially for community representatives or new members who may need more support to learn about the Commission or how to engage more effectively. They mentioned this was particularly helpful for supporting members for whom English wasn't their first language.	
A Commissioner pointed out that one of the responses from the survey was concerning to them because the person responded seemed to believe that no one serving on the Commission has had any experience having been on Medi-Cal or supporting someone who has been on Medi-Cal. The concern is that this may be the optics the public has of the Commission.	
Survey responses for what the Commission would recommend changing: • Governance and leadership • Stakeholder engagement and collaboration • Transparency and accountability	
Discussion: A non-voting member mentioned that they think it would be beneficial to invite non-voting members to some of the ad-hoc committees to provide additional perspective or at least consider ways to engage non-voting	

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members in other ways, such as inviting them as subject matter experts on specific topics of discussion in those Committees.	
A Commissioner mentioned that one area that the Commission could potentially investigate is securing independent funding so as not to have to depend on County funding and processes and, thus, things like contract execution with consultants could potentially move more quickly.	
A Commissioner asked what the next steps from this survey and conversation would be and how this feedback would be incorporated into future actions. Another Commissioner replied that this will be taken back to the Ad-Hoc Committee and incorporated into the Commission's work plan.	
A Commissioner suggested that the Commission consider having these meetings at the East Parkway County building or alternate locations for each meeting to make them accessible to more people. A comment was made that County Counsel approved up to two locations for Commission meetings as long as location details are posted in advance per the Brown Act requirements.	
A Commissioner suggested developing a simple dashboard on the Strategic Plan status to post on the Health Authority website and to include in meeting materials. Another Commissioner suggested that each General Commission meeting have a clear purpose, could incorporate more panel conversations, and have include more actions items.	
4. Public Comment – One comment per person, limited to two minutes	0.50 4.00
No public comment	3:50 – 4:00 pm
5. Closing Comments and Adjournment – Eddie Kirby, Interim Chair	
Vice-Chair Eddie Kirby noted that the next General Commission meeting is scheduled for Tuesday, May 11 th Additionally, he reminded Commissioners to submit their Form 700 to County DHS staff.	4:00 – 4:05 pm
The meeting was adjourned at 4:01 pm.	

Members of the public are encouraged to attend. Public comments are accepted during the designated time. Members of the public may also submit written comments electronically to <a href="scale="scal

95823. For more information regarding the Sacramento County Health Authority Commission, please visit our website at <u>Sacramento County Health Authority</u>.