

Alameda County Health Community Provider Advisory Group (CPAG)

Meeting 1: CPAG Overview
July 22, 2024

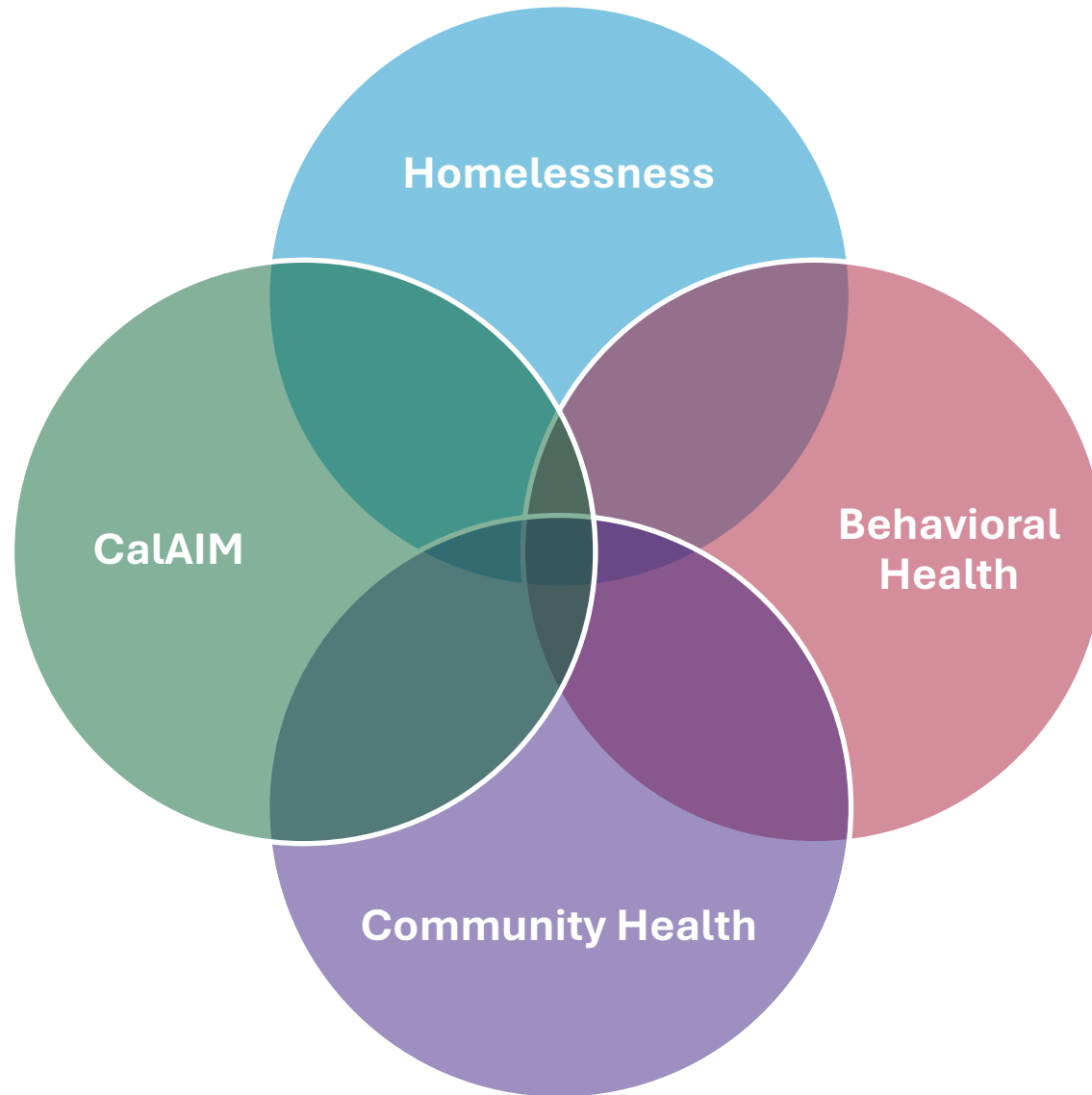


Agenda

Topic	Presenter
Welcome and Opening Remarks	Supervisor Carson Director Colleen Chawla
Introductions	All
Community Provider Advisory Group Overview	Alameda County Health
Alameda County Health Landscape	Alameda County Health
Breakout Groups and Discussion	All
Public Comment	
Closing	Supervisor Carson Director Colleen Chawla

Introductions

Why are we here?



Cross-cutting priorities

- Equitable access to care and services
- Addressing physical, behavioral, and social health care needs
- Preventing and reducing homelessness
- Preventing and reducing justice involvement
- Integrated service delivery
- Supporting resilient communities
- Cross-systems coordination and data infrastructure

Community Provider Advisory Group Objectives & Deliverables

- **Objectives**

- Develop shared understanding of evolving safety net policies and landscape
- Align cross-sector priorities to support health and wellbeing of our communities
- Identify system strengths and opportunities

Deliverables

Guiding principles for CPAG meetings

System priorities to support planning and future investments

CPAG will not discuss program-specific funding to avoid future conflict of interest

CPAG Meeting Logistics

- Five (5) in-person meetings Summer-Fall 2024
 - Meeting 1 – Overview: July 22, 12:30 – 3pm
 - Meeting 2 – Community Health: August 19, 12:30 – 3pm
 - Meeting 3 – Behavioral Health: September 3, 12:30 – 3pm
 - Meeting 4 - Homelessness: October 7, 12:30 – 3pm
 - Meeting 5 – Wrap-Up: November 4, 12:30 – 3pm
- Discussion limited to CPAG members; Zoom webinar available for public
- Agenda to include presentations from County and partners

CPAG Structure and Roles

Roles	Notes
CPAG Members	<ul style="list-style-type: none"> • Representatives from Community Providers and Partners (list on next slide)
Co-Chairs	<ul style="list-style-type: none"> • Supervisor Keith Carson • Colleen Chawla
AC Health Executive Leadership	<ul style="list-style-type: none"> • Aneeka Chaudhry • Dr. Kathleen Clanon • Dr. Karyn Tribble • Kimi Watkins-Tartt • Jonathan Russell
Backbone Planning Team	<ul style="list-style-type: none"> • Liz Taing • Kimia Pakdaman • Subject matter experts
Consultants	<ul style="list-style-type: none"> • Kerry Landry • Michael Arnold

CPAG Members

Perspective	Organization	Representative
FQHCs	Community Health Center Network	Andie Martinez Patterson
Safety Net Health System	Alameda Health System	James Jackson
Independent Clinic	Roots Health Center	Dr. Noha Aboelata
Alameda Alliance for Health	Alameda Alliance for Health	Matt Woodruff
Public Health	CalPEP	Lisa Ryan
Public Health	TriValley NonProfit Alliance	Kathy Young
Public Health	Building Opportunities for Self-Sufficiency	Donald Frazier
Behavioral Health	Behavioral Health Collaborative of Alameda County	Matthew Maddaus
Behavioral Health	Crisis Support Services (988)	Narges Dillon
Behavioral Health	La Familia	Aaron Ortiz
Housing & Homelessness	Bay Area Community Services	Jamie Almanza
Housing & Homelessness	Great Expectations	Dr. Chika Ugbaja
Housing & Homelessness	Satellite Affordable Housing Associates	Cristi Ritschel
Unincorporated	Resources for Community Development	Ana Rasquiza

Draft CPAG Guiding Principles

How do you behave when things get difficult?

- Keep a systemwide perspective
- Focus on advancing people's ability to get care equitably
- Focus on coordination, common goals, and shared priorities
- Considerations for discussions and planning
 - Where are connections/opportunities to align across community health, behavioral health, homelessness?
 - How can we collectively strengthen the safety net system in Alameda County to support those who need it most?
 - What should be prioritized over the next three to five years?
 - What do data and trends highlight? Where are there gaps?
- *Any additions?*

Small Group Discussion

How do you behave when things get difficult?

Organization	Representative	Small Groups
Community Health Center Network (CHCN)	Andie Martinez Patterson	1
Alameda Health System (AHS)	James Jackson	2
Roots Health Center	Dr. Noha Aboelata	3
Alameda Alliance for Health	Matt Woodruff	4
CalPEP	Lisa Ryan	1
TriValley NonProfit Alliance	Kathy Young	2
Building Opportunities for Self-Sufficiency (BOSS)	Donald Frazier	3
Behavioral Health Collaborative of Alameda County	Matthew Maddaus	4
Crisis Support Services (988)	Narges Dillon	1
La Familia	Aaron Ortiz	2
Bay Area Community Services (BACS)	Jamie Almanza	3
Great Expectations (Board and Care)	Dr. Chika Ugbaja	4
Satellite Affordable Housing Associates (SAHA)	Cristi Ritschel	1
Resources for Community Development (RCD)	Ana Rasquiza	2
Alameda County Health – Public Health	Kimi Watkins-Tartt	3
Alameda County Health – Behavioral Health	Dr. Karyn Tribble	4
Alameda County Health – Housing & Homelessness Services	Jonathan Russell	1
Alameda County Health – Office of Medical Director	Dr. Kathleen Clanon	2

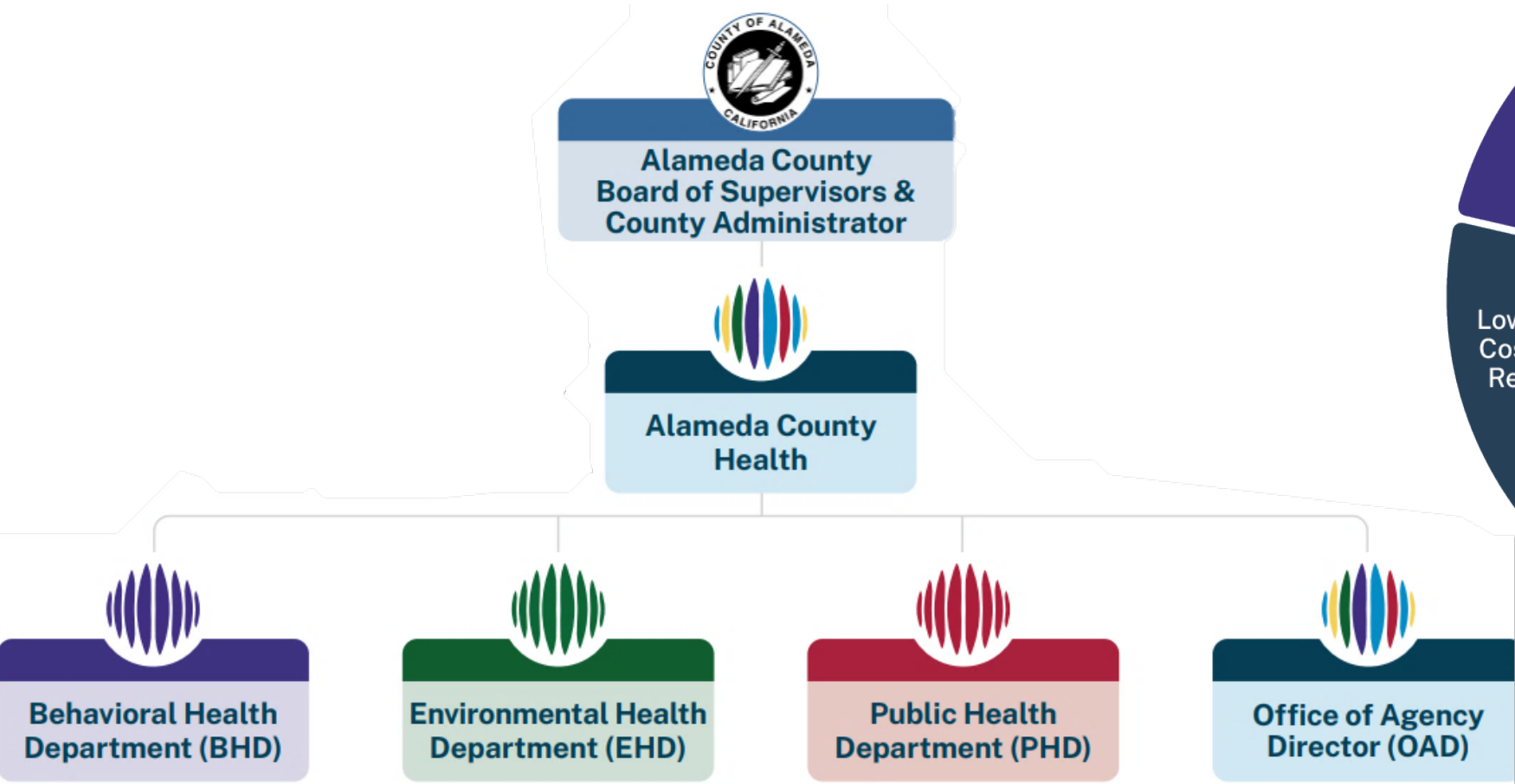
High Level Landscape

AC Health's Mission and Agencywide Priorities

- **Promote and protect the well-being** of people in Alameda County
- Cultivate partnerships with community organizations and providers to help **ensure access to care and services**
- Center **health equity** through programs and systemic solutions
- Promote services and supports that care for the **whole person**



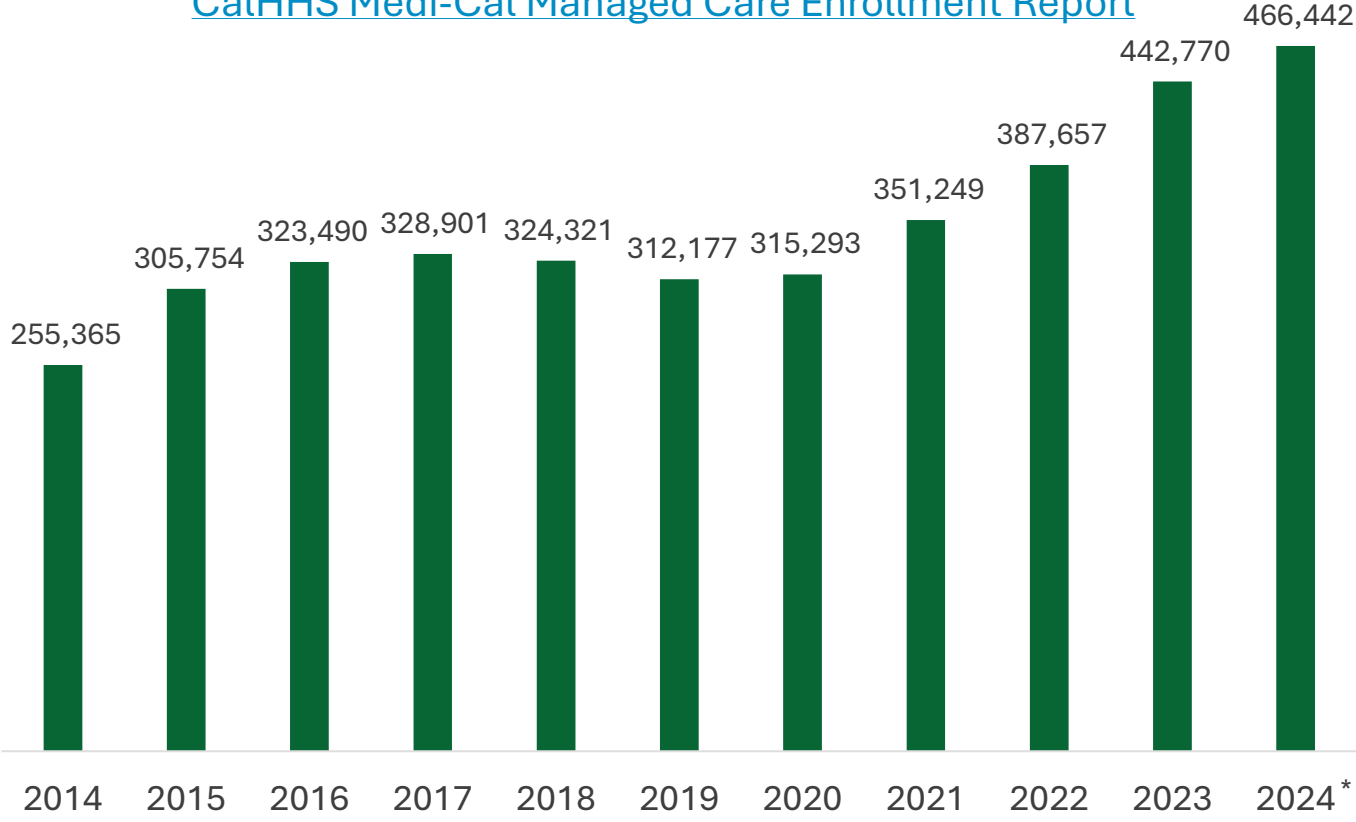
AC Health Organization and Key Services



Local Trends: Medi-Cal

Alameda County Medi-Cal Enrollment
(Average Number of Enrollees By Year)

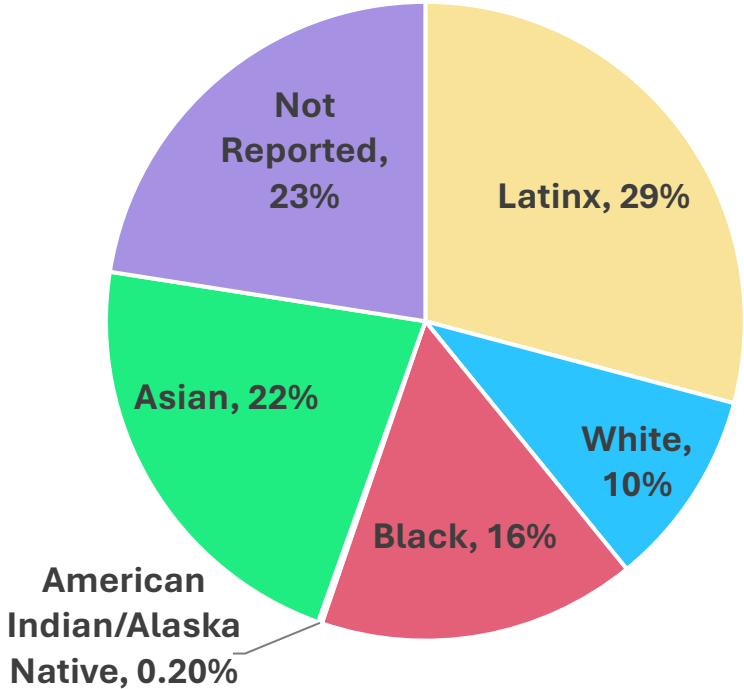
[CalHHS Medi-Cal Managed Care Enrollment Report](#)



*Jan – May 2024

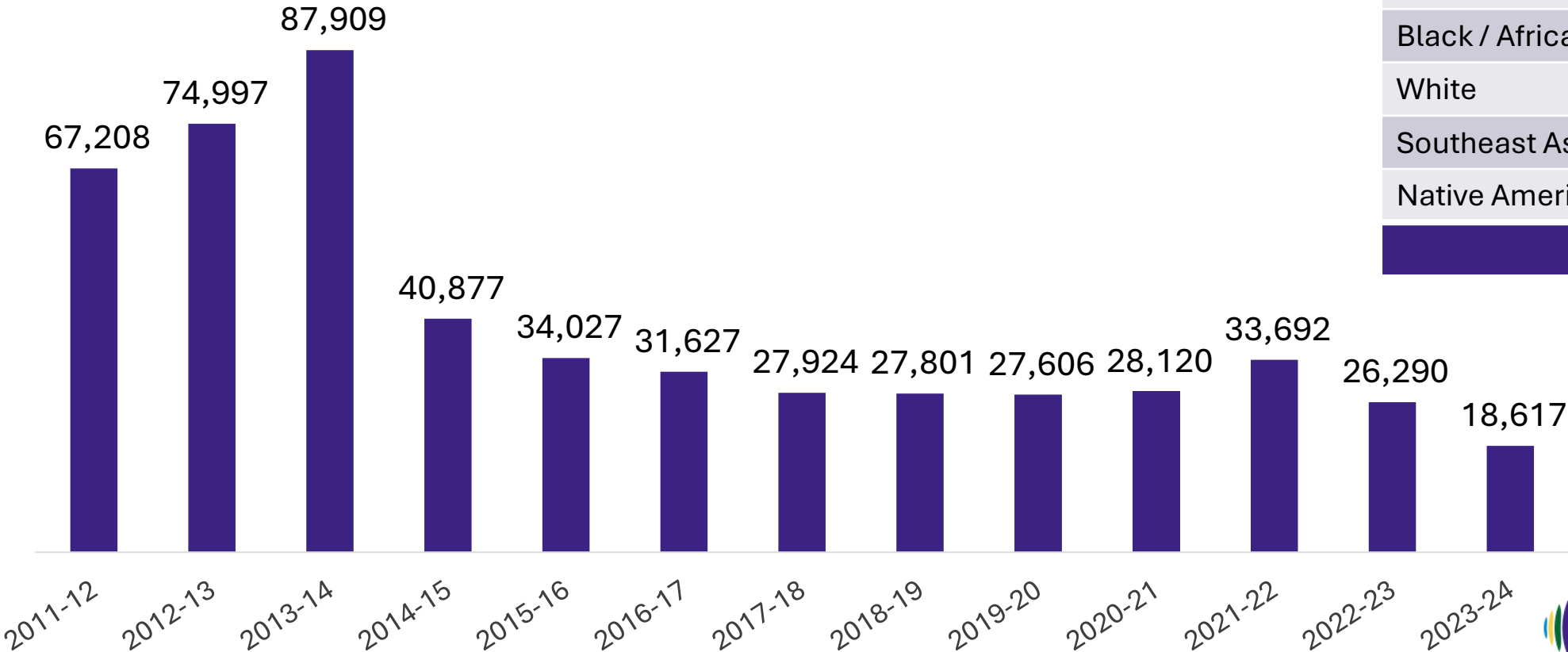
Medi-Cal Enrollment, by Race/Ethnicity
April 2021

[ITUP Bay Area Counties, 2021](#)



Local Trends: HealthPAC

HealthPAC Enrollment

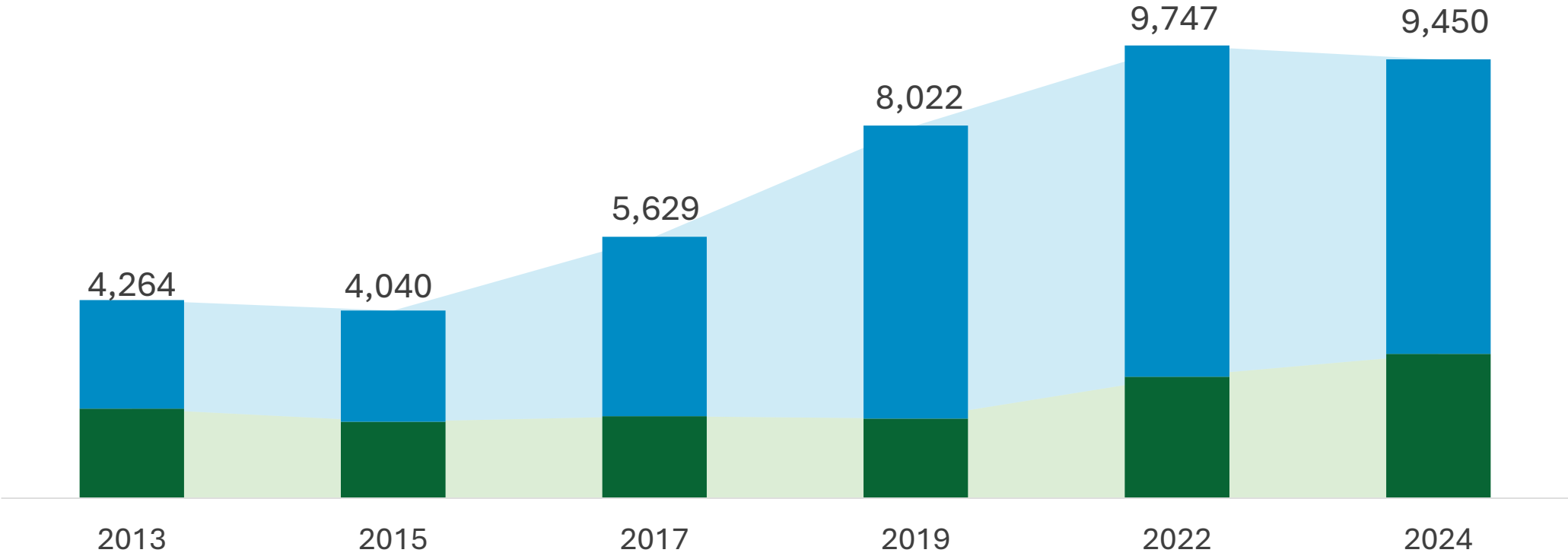


HealthPAC Enrollees by Ethnicity (June 2024)	%
Latinx	94.2%
Unknown	1.5%
Pacific Islander	1.3%
Asian	1.0%
Other	0.9%
Asian Indian	0.6%
Black / African American	0.3%
White	0.2%
Southeast Asian	0.1%
Native American / Alaskan	0.0%

Local Trends: Homelessness

Alameda County Point-in-Time Count by Year

■ Unsheltered ■ Sheltered



Why a Community Provider Advisory Group (CPAG)?

- Alameda County Health is implementing multiple large initiatives
- State mandates require more coordination, alongside significant shifts in funding and service delivery models
- Long-standing health disparities persist
- Improving health outcomes requires strategic collaboration across AC Health departments, community-based service providers, and other system partners

Community Health 1

Initiative	What is it?	Priorities	Timeline	System intersections
<p>HealthPAC (Health Program of Alameda County)</p>	<ul style="list-style-type: none"> Provides care for the uninsured Fulfills obligation that all California counties provide care for the uninsured (Section 17000, Welfare and Institutions Code) 	<ul style="list-style-type: none"> Access to care for low-income people without insurance options Improving health outcomes 	<p>2011 - current</p>	<ul style="list-style-type: none"> Medi-Cal expansion impact on enrollment Supports integration across health sectors

Community Health 2

Initiative	What is it?	Priorities	Timeline	System intersections
<p>Community Health Improvement Plan (CHIP)</p>	<ul style="list-style-type: none"> • Long-term Public Health effort to improve the health of Alameda County’s communities • Framework for community health priorities, bridging safety net and population health 	<ul style="list-style-type: none"> • Access to care, including physical, dental, and behavioral health • Economic security and opportunity • Community and individuals free from violence 	<p>2023-25 + 3-year cycle</p>	<ul style="list-style-type: none"> • CalAIM requires Medi-Cal managed care plans to coordinate with CHIP starting 2025 • Prop 1 requires BH plans to coordinate with CHIP starting 2026

Community Health 3

Initiative	What is it?	Priorities	Timeline	System intersections
Medi-Cal Population Health Management (PHM)	Statewide approach to promote health equity and ensure Medi-Cal members have access to comprehensive services and supports, improved health outcomes	<ul style="list-style-type: none"> • Improve whole person health for Medi-Cal enrollees • Reduce health disparities • Make meaningful advances in quality 	2023 - ongoing	Requires MCPs to <ul style="list-style-type: none"> • Focus on upstream approaches to public health • Identify and mitigate social drivers of health

Behavioral Health

Initiative	What is it?	Priorities	Timeline	System intersections
Behavioral Health Department Strategic Plan	Roadmap to creating more equitable specialty behavioral health services for Medi-Cal members	<ul style="list-style-type: none"> • Access • Community expertise • Housing Programs • Equitable care • Re-entry and Criminal Justice • Acceptable and equitable distribution of funds for MH/SUD 	2023-2025	<ul style="list-style-type: none"> • Community-informed guide for ACBHD work with communities and providers

Behavioral Health & Justice Involvement

Initiative	What is it?	Priorities	Timeline	System intersections
Care First, Jails Last (CFJL)	<ul style="list-style-type: none"> BOS resolution approved in 2021, CFJL Task Force issued recommendations June 2024 Calls for coordinated criminal justice, behavioral health, and wraparound services to reduce the number of people with mental illness, substance use, and co-occurring disorders in Santa Rita Jail 	<ul style="list-style-type: none"> African American Resource Center Collaboration, Case Mgmt, and Reentry Community-Based Support, Outreach & Education Crisis Services/5150 & Treatment Beds Diversion Funding & Financial Transparency Housing & Residential Facilities Staff Training & Professional Development Family Supports 	2022-2024	<ul style="list-style-type: none"> Services and benefits connections for CalAIM justice-involved populations Housing supports as part of continuum of care

Behavioral Health & Homelessness

Initiative	What is it?	Priorities	Timeline	System intersections
Behavioral Health Transformation (Prop 1)	Effective 2026, transitions the MHSAs to BHSA and revises the distribution of funding to focus on people with serious mental illness & SUD, and housing. Includes: <ul style="list-style-type: none"> Behavioral Health Infrastructure Bond Act (AB 531) Behavioral Health Services Act (SB 326) 	<ul style="list-style-type: none"> Inpatient supportive housing and residential treatment beds Permanent supportive housing Outpatient treatment slots Housing interventions Full Service Partnerships Behavioral health services & supports Training and employment supports 	Jan 2025- July 2026 + 3 year cycle	<ul style="list-style-type: none"> Eliminates PEI (prevention and early intervention) funding Focuses on housing as a priority Requires BH coordination with PH and homelessness

Housing & Homelessness Services

Initiative	What is it?	Priorities	Timeline	System intersections
<p>Home Together 2026 Community Plan</p>	<p>Goals, strategies, and investments needed to dramatically reduce homelessness in Alameda County and combat racial disparities in homelessness by centering racial equity</p>	<ul style="list-style-type: none"> • Prevent Homelessness for our residents • Connect people to shelter and needed resources • Increase housing solutions • Strengthen coordination, communication, and capacity 	<p>2022-2026</p>	<ul style="list-style-type: none"> • Connections to physical and behavioral health supports across the continuum of housing and homelessness services • Many people who are unsheltered are also uninsured or have inconsistent Medi-Cal coverage

CaAIM

Initiative	What is it?	Priorities	Timeline	System intersections
CaAIM (California Advancing and Innovating Medi-Cal)	Set of initiatives referred to as “Medi-Cal Transformation”: <ul style="list-style-type: none"> • Behavioral Health • Community Supports • Dental • Enhanced Care Management • Integrated Care for Dual Eligible Members • Justice-Involved • Population Health Management • Statewide Managed Long-Term Care • Supporting Health & Opportunity for Children and Families 	<ul style="list-style-type: none"> • Address physical and behavioral health needs • Improve and integrate care • Equity and justice • Collaboration to build healthier state 	2022 – 2027+	<ul style="list-style-type: none"> • Medi-Cal Managed Care involved in social determinants of health services • Cross-sector coordination • Payment reforms

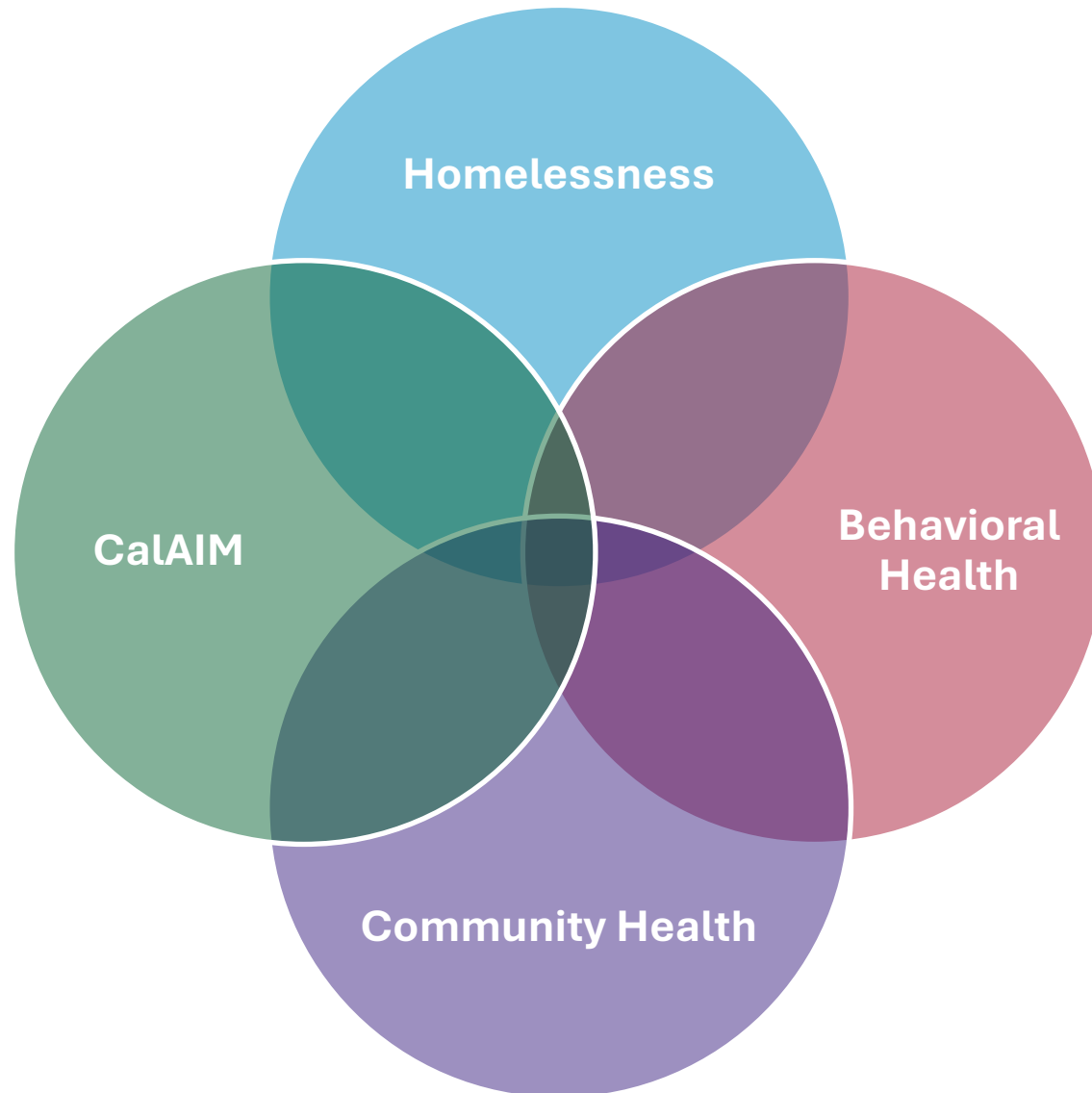
Data Exchange 1

Initiative	What is it?	Priorities	Timeline	System intersections
Social Health Information Exchange (SHIE)	<ul style="list-style-type: none"> Fosters the exchange of health and social services information among social service organizations and healthcare providers Supports AC Health and small CBOs with CalAIM implementation 	<ul style="list-style-type: none"> Enhanced care coordination Improved health outcomes Efficiency and cost savings Equity and social justice Data-informed decision-making 	2016-ongoing	<ul style="list-style-type: none"> Facilitates cross-sector planning and care coordination Supports population data

Data Exchange 2

Initiative	What is it?	Priorities	Timeline	System intersections
Data Exchange Framework (DxF)	Statewide requirement to establish a single Data Sharing Agreement and common set of policies and procedures to govern and require the exchange of health information among health care entities and government agencies in California.	<ul style="list-style-type: none"> • Advance health equity • Make data available to drive decisions and outcomes • Support whole person care • Promote individual data access • Reinforce data privacy and security • Adhere to data exchange standards • Ensure accountability 	2022 – ongoing	<ul style="list-style-type: none"> • Hospitals, SNFs, MCPs, Counties, and others agreeing to share data • SHIE asset

Why are we here?



Cross-cutting priorities

- Equitable access to care and services
- Addressing physical, behavioral, and social health care needs
- Preventing and reducing homelessness
- Preventing and reducing justice involvement
- Integrated service delivery
- Supporting resilient communities
- Cross-systems coordination and data infrastructure

Breakout Groups

We will pause the Zoom Webinar and will come back on at 2:40pm

Breakout groups with your small group

- Discussion Prompts:
 - What questions emerge from what was shared?
 - What considerations or issues are most important to address in these topics?

Community Health	Homelessness	Behavioral Health
Cross-Cutting		

Organization	Small Groups
Community Health Center Network (CHCN)	1
Alameda Health System (AHS)	2
Roots Health Center	3
Alameda Alliance for Health	4
CalPEP	1
TriValley NonProfit Alliance	2
Building Opportunities for Self-Sufficiency (BOSS)	3
Behavioral Health Collaborative of Alameda County	4
Crisis Support Services (988)	1
La Familia	2
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Public Comment



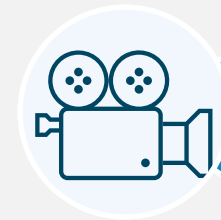
Alameda County Health



Raise your hand via Zoom if you would like to speak.



Your microphone will be unmuted once you are called on.



You are welcome to turn on your camera.



Please keep your comments under 1 minute.

Thank you for attending our first meeting

Preparing for our next meeting

- Next meeting: Aug 19, 12:30-3pm (same location)
- If your organization would like to present at our next meetings, please email cpag@acgov.org

Date/Time	Topic	Email us by
Aug 19, 12:30 – 3:00pm	Community Health (HealthPAC, CHIP)	Aug 2
Sept 3, 12:30 – 3:00pm	Behavioral Health (BH Transformation)	Aug 5