



MEETING OF BLUE SHIELD OF CALIFORNIA PROMISE HEALTH PLAN
LOS ANGELES COMMUNITY ADVISORY COMMITTEE (CAC)

Date/Time:	Tuesday, September 9, 2025 1:30 – 3:00 p.m.
Location:	Hybrid (Virtual and in-person: 3840 Kilroy Airport Way, Long Beach, CA 90806)
Attendance:	Committee Members present: 1. Member A, Blue Shield of California Promise Health Plan 2. Member B, Blue Shield of California Promise Health Plan 3. Member C, Blue Shield of California Promise Health Plan 4. Member D, Blue Shield of California Promise Health Plan 5. Member E, Blue Shield of California Promise Health Plan 6. Member F, Blue Shield of California Promise Health Plan 7. Member G, Blue Shield of California Promise Health Plan 8. Member H, Blue Shield of California Promise Health Plan 9. Kristine Choulakian, Outreach Specialist, Personal Assistance Councils 10. Connor Hannigan, Staff Attorney, Neighborhood Legal Services of Los Angeles County 11. Margie Harper, LA South-Central Mental Health Non-Profit 12. Halina Fardin, Health Educator, Worksite Wellness LA 13. Araceli Quintero, Pathways LA Committee Members absent: 1. Anwar Zoueihid, VP of Long-Term Services & Supports, Partners in Care Foundation Blue Shield of California Promise Health Plan Representatives present: 1. Jill Chapman, Director, Member Marketing and Creative Account Management 2. Araceli Garcia, Program Manager, Consultant 3. Rosa Hernandez, Sr. Manager, Lifestyle Medicine 4. Jennifer Nuovo, M.D., Chief Medical Officer 5. Sandra Rose, Senior Director, Community Programs
Agenda	I. Blue Shield Promise Health Plan Updates II. Re-cap of Q2-2025 Meeting III. Appeals and Grievance Report IV. Relay Network V. Culturally and Linguistically Appropriate Services (CLAS) Updates VI. Ombudsman Report VII. Open Discussion/Closing Remarks

Introductions and Welcome

- Araceli Garcia began the meeting with rollcall, went over the meeting logistics, welcomed the committee, and reviewed the agenda.

I. Blue Shield Promise Health Plan Update

- Dr. Jennifer Nuovo provided the following health plan updates:
 - **Vaccine Clinics:** Blue Shield Promise and L.A. Care will launch a series of vaccine clinics at the Community Resource Centers starting Friday, September 12, 2025.
 - The vaccine clinics are free and open to the public.
 - In addition to the flu and COVID-19 vaccines, school required vaccines will be available, which is new this year.
 - **New Moms and Newborn Value-Added Benefit:** Blue Shield Promise received approval from the California Department of Health Care Services (DHCS) to offer a comprehensive array of essential products for newborns and Members post-delivery as a new value-added benefit.
 - The new value-added benefit includes a kit with diapers, baby wipes, nursing pads, pacifiers, a thermometer, and more.
 - Members can earn up to four \$100 Amazon vouchers to get additional supplies by completing a series of newborn health check-ups.
 - The program will launch in San Diego County this year and in Los Angeles County in 2026.
 - This value-added benefit was developed based on feedback from the Community Advisory Committee.
 - Connor Hannigan inquired about enrollment. Members can enroll into the program by calling Blue Shield Promise Customer Care.
 - Committee members expressed strong support for the program.

II. Recap of Q2-2025 Meeting

- Sandra Rose reviewed the topics covered in the Q2-2025 meeting, which was about Customer Service, with a focus on how to request language services and an introduction to the new moms & newborn value-added benefit.

III. Discussion: Appeals and Grievance Report

- Dr. Nuovo introduced the appeals and grievances report by defining the terms and explaining how Members can submit an appeal or grievance.
- Dr. Nuovo presented trends in Los Angeles, noting a rise in grievances in early 2025, mainly related to changes in the transportation benefit. She summarized the main grievance categories:
 1. Access to care
 2. Customer service
 3. Billing and financial
- Dr. Nuovo noted a drop in appeals in early 2025 compared to 2024 and outlined the key appeal categories:
 1. Medical necessity
 2. Non-covered services
 3. Billing and financial
- Sandra Rose reiterated the rights of Members to file a grievance or appeal and explained the standard and expedited response times.
- Connor Hannigan asked if the number of grievances include state-filed complaints. Dr. Nuovo confirmed the reporting includes all sources and explained that cases submitted directly to the Department of Managed Health Care (DMHC) are routed back to the plan for investigation and resolution.
- Member G's mother described an out-of-state billing situation she is experiencing. Blue Shield Promise will follow up to provide Member G with assistance.
- Member C's caregiver asked whether the term "grievance" is synonymous with "complaint," and inquired whether the forms are user-friendly. Dr. Nuovo explained that a grievance is equivalent to a complaint and went over the different ways to file a grievance (i.e. online, by phone, mail, fax or through a provider's office).
- Member C's caregiver raised concerns regarding potential provider retaliation against Members who filed grievances against them. Dr. Nuovo stated that

grievances are not submitted anonymously, and providers are notified about any reported concerns. However, Dr. Nuovo reassured the committee that providers should not be retaliating against individuals who file grievances. Connor Hannigan added that complaints concerning provider conduct can be submitted to the Medical Board and facility concerns can be directed to the California Department of Public Health (CDPH).

- Members A and B shared they have grievances that remain unresolved. Blue Shield Promise will follow up to provide assistance.
- Action Items:
 - Araceli Garcia will contact Members A, B and G to help address their issues.

IV. Discussion: Relay Network

- Jill Chapman led a discussion about Relay Network, a web-based, mobile-optimized communication platform that does not require an application download. Jill explained:
 - The platform is HIPAA and Telephone Consumer Protection Act (TCPA) compliant, using opt-in consent. Members may reply STOP to opt out.
 - Members 18 and older get a text from 21867 with a unique link to their health news feed.
 - Onboarding messages are sent on days 1, 15, 30, and 45 over a 45-day period. Topics include preventive screening reminders, benefits information, health education, and disease management.
- Jill requested feedback from the committee regarding ways to enhance Member communications on the platform.
 - Some committee members wanted to know more about data usage charges. Jill clarified that no app download is required, and the process involves minimal clicks and data usage.
 - Some committee members recommended including additional mental health resources and clearer guidance on health plan benefits.
 - Overall, the committee was supportive of the new communication tool.

V. Discussion: Culturally and Linguistically Appropriate Services (CLAS) Updates

- Rosa Hernandez led a discussion about Culturally and Linguistically Appropriate Services (CLAS) by first defining CLAS and explaining the type of activities that fall under CLAS such as:
 - Learning about our Members' needs (language, culture, disability)
 - Finding out if our doctors meet the needs of our Members
 - Tracking the use of interpreters and information that is translated
 - Tracking Member complaints when we fall short in providing culturally and linguistically appropriate care
- Rosa Hernandez reviewed the feedback we heard from Members about CLAS and explained the steps Blue Shield Promise has taken to respond to their input.
 - We heard:
 - Members want to feel understood by their doctor.
 - Members want information about interpreter services and how to access services in the form of flyers and short videos
 - Actions taken:
 - Blue Shield Promise requires providers to complete training on providing culturally competent health care
 - Blue Shield Promise continues to promote interpreter services in the Member newsletter, website and Member Handbook
 - Blue Shield Promise is exploring the suggestion to create flyers and video
- Rosa Hernandez explained that Blue Shield Promise asks about our Members' race, ethnicity, language, sexual orientation and gender identity to help us:
 - Create programs based on Members' needs and;
 - Better understand if our contracted providers can meet the needs and preferences of our Members.

- Rosa Hernandez acknowledged some people may not feel comfortable answering questions about race, ethnicity, language, sexual orientation and gender identity. She asked the committee:
 - How do you suggest we request this type of information?
 - Would it be helpful if we explained why we are asking for this information and how we will maintain confidentiality?
 - Would you prefer to provide the information on a form or to a health plan representative, who would then enter it on your behalf?
- Member A expressed concerns about the security of Member's information and potential for increased racial targeting. Rosa Hernandez acknowledged the concerns and explained the safeguards that are in place to protect Members' information.
- Member B emphasized the need to effectively communicate with Members to build trust and assure them that their information will be kept private.

VI. Ombudsman Report

- Connor Hannigan gave an update on changes to the Los Angeles Dental Managed Care (DMC) plan that went into place July 2025.
 - Medi-Cal Members can enroll in Health Net of California, Liberty Dental Plan of California, California Dental Network (new), or dental Fee-For-Service (FFS).
 - Medi-Cal Members enrolled in Access Dental Plan can enroll into one of the available DMC plans.
 - If the Medi-Cal Member does not decide between a Medi-Cal DMC plan or Medi-Cal Dental FFS plan by June 20, they will be placed in FFS July 1. Notices were sent out beginning April 2025.
- Connor Hannigan let the committee know that Medi-Cal Members can contact Neighborhood Legal Services for assistance.
- Member A asked about coverage for crowns/partial dentures. Connor Hannigan confirmed these are covered if medically necessary and when criteria are met.

VII. Closing Remarks

- Araceli Garcia concluded the meeting by thanking the committee for their time and feedback and reminding the group to review the appendix materials.
 - Appendix A: Standing Reports
 - Membership & Interpreter Services
 - Grievances Q2-2025
 - Appeals Q2-2025
 - Appendix B: Blue Shield Promise Contacts