



P R O M I S E

MEETING OF BLUE SHIELD OF CALIFORNIA PROMISE HEALTH PLAN
SAN DIEGO COMMUNITY ADVISORY COMMITTEE (CAC)

Date/Time:	Friday, March 13, 2026 1:30 – 3:00 p.m.
Location:	Hybrid (Virtual and in-person: 3131 Camino Del Rio, North Suite 1300, San Diego, CA 92108)
Attendance:	<p>Committee Members present:</p> <ol style="list-style-type: none"> 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. Chris Almeida, San Diego American Indian Health Center 10. Jack Dailey, Consumer Center for Health Education and Advocacy, Legal Aid Society of San Diego, Inc. 11. Eygiel Limbo, Promise2Kids 12. Rick Ochocki, National Alliance on Mental Illness (NAMI) 13. Aidee Roman, San Diego 211 <p>Committee Members absent:</p> <ol style="list-style-type: none"> 1. Leticia Zuno, Access to Independence <p>Blue Shield of California Promise Health Plan Representatives present:</p> <ol style="list-style-type: none"> 1. Araceli Garcia, Program Manager, Consultant 2. Rosa Hernandez, Senior Manager, Health Education 3. Valerie Martinez, Chief Health Equity Officer 4. Jennifer Nuovo, M.D., Chief Medical Officer 5. Sandra Rose, Senior Director, Community Programs 6. Mary Zwerneman, Senior Manager, Product Management
Agenda	<ol style="list-style-type: none"> I. Chief Medical Officer Updates II. Re-cap of Q4-2025 Meeting and Updates on APL 24-016 Advancing Health Equity Training III. Member Portal IV. Community Reinvestment Plan V. Population Needs Assessment Update VI. Open Discussion/Closing Remarks

Introductions and Welcome

- Araceli Garcia began the meeting with roll call and went over meeting logistics.
- Sandra Rose welcomed the committee and reviewed the agenda.

I. Chief Medical Officer Updates

- Dr. Jennifer Nuovo provided updates on:
 1. The new Dietary Guidelines for Americans (DGA) that are jointly developed by the U.S. Department of Health and Human Services and the U.S. Department of Agriculture.
 2. The measles outbreaks being reported in multiple states, including California.
 3. The change in recommendation for Hepatitis B vaccination for some infants.
- The committee discussed campaign to promote childhood vaccinations, including outreach in schools and through other community-based platforms and developing educational materials for the San Diego Information Resource Center, health fairs and community events.

II. Recap of Q4-2025 Meeting and Updates on APL 24-016 Advancing Health Equity Training

- Sandra Rose reviewed the Q4-2025 meeting topic, which addressed Medi-Cal program changes impacting eligibility and coverage.
- Valerie Martinez provided an update on the Advancing Health Equity Training, highlighting how community feedback was incorporated into the 2026 training.

III. Discussion: Member Portal

- Mary Zwerneman provided an overview and live demonstration of the Blue Shield Promise member portal and led a discussion on opportunities to improve the portal's features and adoption.
 - The member portal (web and mobile app) is designed to give members self-service access to find doctors, view claims, access plan benefits, and more.
 - Some committee members noted that members who are not tech-savvy may be less likely to use the portal.
 - Suggested improvements to the portal include:

- Add alerts or flags such as reminders to complete vaccinations or care gaps
- Create a short introductory “how-to” video covering:
 - How to register
 - How to log in
 - Where to find key features

IV. Discussion: Community Reinvestment Plan

- Sandra Rose provided an overview of the Community Reinvestment Plan requirements from the Department of Health Care Services (DHCS) and facilitated a discussion to gather committee input on investment ideas and strategy.
 - DHCS requires Medi-Cal managed care plans to demonstrate a commitment to the communities they serve by contributing a minimum percentage of annual net income toward community reinvestment activities.
 - Additional investments are required for plans that do not meet quality outcome metrics.
 - The first Community Reinvestment Plan is due September 1, 2026.
 - Community reinvestment activities must be aligned with county-identified needs informed by the:
 - Community Health Assessment (CHA)
 - Community Health Improvement Plan (CHIP)
 - Behavioral Health Transformation Community Planning Process
 - Behavioral Health Integrated Plan
 - Medi-Cal managed care plans must get input about community reinvestment activities from the County Public Health Director, County Behavioral Health Director, and the Community Advisory Committee.
 - Activities may not be used to fund Medi-Cal covered services, Blue Shield Promise member-only programs, member incentives, or administrative activities.
 - Community reinvestment activities must fall within one of five categories:
 - Neighborhoods and Built Environment: Investments that create neighborhoods and environments that promote health, well-being, and safety.

- Health Care Workforce: Investments that build the next generation of health care workers and address workforce shortages.
 - Well-Being for Priority Populations: Investments addressing needs identified through CHA/CHIP and/or focused on foster youth, justice-involved individuals, children, and families.
 - Local Communities: Investments in education, employment and training programs, poverty reduction, and initiatives addressing social isolation.
 - Improved Health: Investments targeting upstream root causes of poor health, including structural racism, discrimination, neighborhood conditions, intergenerational.
- Key priority areas identified by the San Diego County Public Health and Behavioral Health Departments include:
 - Housing and homelessness
 - Behavioral health
 - Thriving and resilient communities
- Committee members shared their ideas for investment:
 - Mobile clinics to serve unhoused individuals
 - Mobile food distribution programs
 - Scholarships and financial support for CNAs, LVNs, RNs, medical assistants, doulas, and behavioral health workers
 - Partnerships with community colleges and local education programs to promote healthcare careers
 - Investments in education and job training programs
 - Support for programs that eradicate poverty and improve long-term economic stability
 - Technical assistance for community-based organizations, particularly around administrative systems, record keeping, and grant readiness
 - Support for low-income housing development, especially in East County communities

- Housing assistance for youth aging out of foster care
- Community-based wellness activities (e.g., Zumba, yoga, fitness classes in parks)
- Outdoor fitness equipment in public spaces to promote physical activity for all ages
- Programs addressing intergenerational trauma, discrimination, and mental health
- Committee members shared differing perspectives on how funds should be allocated:
 - Several smaller investments:
 - Allows support of multiple needs simultaneously (food, housing, health, education)
 - Ensures continued funding, even if amounts fluctuate quarter to quarter
 - Signals that the plan is addressing a broad range of community concerns
 - Fewer, larger investments:
 - Enables organizations to add staff capacity rather than stretching limited resources
 - Reduces the risk of programs stalling due to insufficient funding
 - Supports deeper, more sustainable impact over time
- The next step is for Blue Shield Promise to write the Community Reinvestment Plan that reflects input from internal and external stakeholders. The Community Reinvestment Plan will be presented to the committee for awareness prior to submission to DHCS.

V. Discussion: Population Needs Assessment Update

- Rosa Hernandez provided an update on the Population Needs Assessment, noting that it has been renamed “Local Planning” to reflect an expanded scope that now integrates:
 - The Community Health Assessment (CHA)

- The Community Health Improvement Plan (CHIP)
- Community Reinvestment priorities
- County behavioral health goals
- It was explained that local planning is county-led and conducted in partnership with Medi-Cal managed care plans and community stakeholders.
- Blue Shield Promise’s role, along with other Medi-Cal plans, includes:
 - Participating in ongoing county planning meetings
 - Providing monetary contributions to support the work
 - Sharing de-identified and aggregated data (with all member-identifying information removed) to inform the community assessment and resulting improvement plan

VI. Closing Remarks and Adjournment

- Sandra Rose concluded the meeting by thanking the committee for their time and feedback and reminding the group to review the materials in the appendix.
 - Appendix A: Standing Reports
 - Membership & Interpreter Services
 - Appendix B: Key Contacts
 - Blue Shield Promise Contacts
 - Appendix C:
 - Dietary Guidelines and Vaccine Resources