



**Ventura County Medi-Cal Managed Care Commission (VCOMMCC)
dba Gold Coast Health Plan (GCHP)**

Consumer Advisory Committee Meeting

Wednesday, April 18, 2018, 4:00 p.m.

Gold Coast Health Plan, 711 E. Daily Drive, Community Room, Camarillo, CA 93010

AGENDA

CALL TO ORDER

PLEDGE OF ALLEGIANCE

ESTABLISH QUORUM

PUBLIC COMMENT

The public has the opportunity to address the Consumer Advisory Committee (CAC). Persons wishing to address the Committee should complete and submit a Speaker Card.

Persons wishing to address the CAC are limited to three minutes. Comments regarding items not on the agenda must be within the subject matter jurisdiction of the Committee.

APPROVE MINUTES

1. Regular Meeting of October 18, 2017

REPORTS

2. Chief Executive Officer (CEO) Update

Staff: Dale Villani, Chief Executive Officer

3. Legislative Update

Staff: Marlen Torres, Manager, Government and External Relations

4. State Mega Regulation Update

Current information on the Mega Regulation

Staff: Brandy Armenta, Compliance Officer

**Ventura County Medi-Cal Managed Care Commission (VCMCC) dba Gold Coast Health Plan (GCHP)
April 18, 2017 Consumer Advisory Committee Meeting Agenda (*continued*)
LOCATION: Community Room at 711 E. Daily Drive, Camarillo, CA 93010
TIME: 4:00 p.m.**

5. Financial Update

Staff: Kashina Bishop, Chief Financial Officer

6. Program of All-Inclusive Care for the Elderly (PACE)

Report on the PACE program

Staff: Ruth Watson, Chief Operating Officer

7. GCHP Annual Health and Resource Fair

Annual GCHP Community Resource Fair

Staff: Lupe Gonzalez, MPH, PhD, Director of Health Education

8. Conduent – Administrative Services Organization (ASO)

Status of the ASO

Staff: Chris Hodina, Director of Operations

9. Member Services Publication

New Member Services brochure

Staff: Luis Aguilar, Member Services Manager

COMMENTS FROM COMMITTEE MEMBERS

ADJOURNMENT

Unless otherwise determined by the Committee, the next regular meeting of the Consumer Advisory Committee will be held on July 18, 2018, 4:00 p.m. at Gold Coast Health Plan, 711 E. Daily Drive, Suite 110, Camarillo, CA 93010.

Meeting Agenda available at <http://www.goldcoasthealthplan.org>

Administrative Reports relating to this agenda are available at 711 East Daily Drive, Suite #106, Camarillo, California, during normal business hours and on <http://goldcoasthealthplan.org>. Materials related to an agenda item submitted to the Committee after distribution of the agenda packet are available for public review during normal business hours at the office of the Secretary of the Committee.

In compliance with the Americans with Disabilities Act, if you need assistance to participate in this meeting, please contact (805) 437-5562. Notification for accommodation must be made by the Monday prior to the meeting by 1:00 p.m. to enable GCHP to make reasonable arrangements for accessibility to this meeting.

The agenda was posted at the Gold Coast Health Plan Notice Board and on its website.

**Ventura County Medi-Cal Managed Care Commission
(VCOMMCC) dba Gold Coast Health Plan (GCHP)
Consumer Advisory Committee (CAC) Minutes
October 18, 2017
(Not official until approved)**

CALL TO ORDER

Committee Vice-Chair Pedro Mendoza called the meeting to order at 5:07 p.m. at the offices of Gold Coast Health Plan (GCHP), 711 E. Daily Drive, Suite 106, Camarillo, CA 93010, in the Community Room. The Pledge of Allegiance was recited.

ROLL CALL

COMMITTEE MEMBERS IN ATTENDANCE

Estelle Cervantes, Beneficiary Member
Norma Gomez, Mixteco / Indigena Community Organizing Project
Paula Johnson, ARC of Ventura County (arrived at 4:15)
Laurie Jordan, Rainbow Connection / Tri-Counties Regional Center (by phone)
Ruben Juarez, County Health Care Agency
Pedro Mendoza, Amigo Baby
Katharine Raley, County of Ventura Area Agency on Aging
Curtis Updike, County Human Services Agency (HSA)

ABSENT COMMITTEE MEMBERS

Rita Duarte-Weaver, Ventura County Public Health Department
Frisa Herrera, Casa Pacifica

Language interpreting and translating services were provided by GCHP from Lourdes González Campbell and Associates.

PUBLIC COMMENT / CORRESPONDENCE

None

APPROVE MINUTES

1. Regular Meeting of April 19, 2017

Committee Member Curtis Updike motioned to approve the Meeting Minutes of April 19, 2017. Committee Member Katharine Updike seconded. The motion carried with the following vote:

AYES:	Cervantes, Flores, Gomez, Johnson, Juarez, Mendoza, Raley and Updike
NOES:	None
ABSTAIN:	Jordan
ABSENT:	Duarte-Weaver, Herrera

REPORTS

2. Chief Executive Officer (CEO) Update

Dale Villani, Chief Executive Officer announced that Dr. Nancy Wharfield is the new Chief Medical Officer, replacing Dr. Al Reeves who has retired. He also introduced Kathy Neal, RN, DNP as the new Senior Director of Health Services.

Mr. Villani provided a briefing on issues regarding the federal government with the repeal and replace of the Affordable Care Act (ACA), provider directories and CMS MegaReg changes.

Mr. Villani stated that another program directly affecting us is the funding for the Children's Health Insurance Program (CHIP) program. The federal matching funding officially ended on September 20, 2017, but the state is required to continue funding through the Affordable Care Act through 2019. The 30,000 children whose parents are not eligible for Medi-Cal are potentially impacted.

Mr. Villani reported that there are new mental health parity requirements to make sure that all of the requirements we have in place for medical services are equally applied consistently to behavioral health services.

Dale Villani stated that there is a new template for provider directories and frequency the directories are updated. There are also changes to the member handbook and requirements for grievances and appeals. These changes are also related to the MegaReg.

Mr. Villani reported that there is new requirement for Non-Medical Transportation (NMT). The new requirement covers all Medi-Cal beneficiaries, regardless of the service as long as it is a Medi-Cal covered benefit. This is for round trip transportation to any medically necessary Medi-Cal covered service, but not limited to medical appointments, pharmacies, suppliers of medical supplies, and other equipment. This is inclusive of the carved out services, like dental appointments. Committee member Laurie Jordan asked if the ride is limited to only the patient and one caregiver or if the parent has other children, can they all travel along. Mr. Villani replied that the service is restricted to the member and a caregiver when necessary.

3. Financial Update

Lyndon Turner, Senior Finance Director provided a review of the financial report as presented in the meeting materials. The information provided is a result of the annual audit. Net results are a loss of \$13.6 million which was a planned effort driven by our commissioners to get more money into the provider community and spend more money on our member's health. We ended the year with a 95% Medical Loss Ratio (MLR), meaning that for every dollar premium revenue, we are spending \$.95 on member care.

Committee Member Curtis Updike stated that when looking at the growth of Medi-Cal over time and the growth of the adult expansion population, the population that is threatened by any change to the ACA, would have a huge impact on all of us because that is where the majority of Medi-Cal growth came from. COO Ruth Watson stated that besides having an impact on all of us; look at the impact at the county as a whole, the population, and the people who will be without coverage.

Discussion was held regarding the foreseen effects of the "repeal and replace" movement on the county and people in Ventura County.

4. Pharmacy Benefit Manager (PBM) Update

Dr. Nancy Wharfield, Chief Medical Officer (CMO) reported that our new Pharmacy Benefits Manager (PBM) started in June, OptumRx. Our main drive during this transition period was to minimize the effect on the members and the providers. Dr. Anne Freese, Pharmacy Director has been in charge of the changes. Dr. Wharfield went on to state some of the issues that occurred at the beginning of the transition. She said that Dr. Freese went to OptumRx and as a result, there was more training and many of those issues have been fixed. Through all of this, we have worked to keep our member's experience a positive one and to make sure they are getting their medications filled. We have also performed site visits and we have engaged OptumRx to go with us to meet with the pharmacists individually to hear what their concerns are and work out some of those business relationships.

Discussion was held regarding the safety of the network of providers and insuring that the members are served in all communities.

5. Health Information Form / Medical Evaluation Tool (HIF/MET)

Chris Hodina, Director of Operations reported that the Mega Rule, or MegaReg, has several components that we have been required to implement. The Health Information Form/Medical Evaluation Tool (HIF/MET) is part of the MegaReg that we will send to every newly eligible member in the new member package. The member is asked to fill out the form and return it to our Health Services team. It will have its own return envelope and we will be sending it out on yellow paper to distinguish it from the PCP selection form.

The goal of the HIF/MET form is to provide any information that our Health Services team may need to contact new members who might have urgent medical needs. It will require one form for every member of the family enrolled in Medi-Cal. Around day-17 and then around day-30 a call will be made to the member to remind them to complete the form. It will be a "robocall" reminding the member to complete the form and return it to us. As the program develops, we will continue to determine how better to implement the program.

Kathy Neal, Sr. Director of Health Services states that we have been sending these forms to our seniors and persons with disabilities (SPD) for several years. It is the same questionnaire and we are now expanding it to our whole population. Committee Member Paula Johnson asked about the benefits of this form. Kathy Neal replied that the benefit to the program is to identify those members who may have special needs before they are in the hospital or ER, so we can identify them up front. Committee Member Johnson asked if they check something on the form, will they get a call. Kathy Neal replied that yes, these will be scanned and sent electronically to the Care Management department. They currently have a process in place where they are screened and if there are any "yes" responses, they are given a call by a care management coordinator and depending on the condition, it could be a registered nurse.

Discussion was held regarding the necessity of the program and the languages used for the robocalls.

Guest speaker Rocio Gonzalez who works with MICOP asked for the opportunity to comment. Ms. Gonzalez asked if this is an appropriate place to add a question about interpretation services; if a member wants interpretation services or want to make sure that GCHP knows they need the services. Lupe Gonzalez, Director of Health Education, Outreach, Cultural & Linguistic indicated that

members are already receiving in the member welcome packet information about how to access language assistance services.

6. Health Education Update

Lupe Gonzalez, Director of Health Education, Outreach, Cultural & Linguistic Services reviewed the Group Needs Assessment as presented in the meeting materials. The purpose of the survey is to improve health outcomes of our members and to identify certain barriers that might impact the health of our members. Dr. Gonzalez stated that we had an 18% return rate on the questionnaires. There was an incentive of a \$50 gift certificate to those who completed and returned the questionnaire.

Discussion was held about childhood obesity issues.

7. CAC Policy and Processes

Connie Harden, Member Services Specialist stated that now that we have completed the Consumer Advisory Committee governance changes, we have prepared a policy to define how the committee will operate, rules, governance, etc. Connie Harden provided historical information on the committee and the current open position. She went on to say that, we are reaching out to different organizations in order to fill the open position and were targeting a member from the homeless community. In light of this, Committee Member Ruben Juarez has accepted a new position within the County Health Care Agency with the Whole Person Care Program. Committee Member Juarez expressed interest in representing this population on the CAC and provided the following comments. Committee Member Juarez stated that looking at this HIF/MET form, this is a perfect way to better serve our needs and the population we are working with. He stated that he transferred to the Whole Person Care Program in July 2017. What we try to do is register and enroll the high utilizers for the emergency room, hospitals, and urgent care facilities. Referrals come from the care coordinators. He went on to say that Pathways Recuperative Care at Salvation Army also refers many members. When a patient is discharged from the hospital, they go to recuperative care and the coordinator there sends a referral to the Whole Person Care Program. One of the team will then go out to see that member and then follow-up with their care, making sure they get their medication, that they follow-up with their doctor, get transportation and even go with them to their appointments. The program now has 10-12 staff members. The team will follow-up after doctor's appointments and let them know that they are there for them as advocates, and that they can be counted on for any service. The Whole Person Care Program partners with many different agencies who can help members with housing, counseling, utility assistance, rental assistance, food, sober living homes, etc. The population is 60% homeless and the address they use is at the One-Stop stations on Richmond in Oxnard or on Loma Vista in Ventura. They have over 160 members enrolled right now and their goal is to enroll 800 members. They have nurses on the team along with drug and alcohol specialists and mental health therapists. A call with the name and location of the member will prompt them to send a team member out to them right away. The phone number is 805-339-1122.

CMO Dr. Wharfield commended Committee Member Juarez and the whole person care team. She stated that what he beautifully described is the concept of whole-person care. These people are out in the communities with many needs and many barriers to getting what they needed. Previously, the person was challenged with task of getting to the services they need.

Discussion was held about free cell phones that are provided to those members at the One-Stop events. Members are given an active phone right there.

Connie Harden stated that if there were no concerns with the policy presented to the CAC, a motion to approve was requested. Committee Member Pedro Mendoza moved to approve the policy. Committee member Estelle Cervantes seconded the motion. The motion carried with the following vote:

AYES:	Cervantes, Flores, Gomez, Johnson, Juarez, Mendoza, Raley and Updike
NOES:	None
ABSTAIN:	Jordan
ABSENT:	Duarte-Weaver, Herrera

Comments from Committee Members

Committee Member Paula Johnson stated that she liked the information provided in the HIF/MET form and discussion was held about ways to use the form.

ADJOURNMENT

Meeting adjourned at 5:25 p.m.

DRAFT



AGENDA ITEM 2

To: Gold Coast Health Plan Consumer Advisory Committee
From: Dale Villani, Chief Executive Officer
Date: April 18, 2018
Re: Chief Executive Officer Update

Verbal Presentation

AGENDA ITEM 3

To: Gold Coast Health Plan Consumer Advisory Committee

From: Marlen Torres, Manager, Government and External Relations

Date: April 18, 2018

Re: Legislative Update

Legislative Update

Gold Coast Health Plan's Legislative Advocacy in Washington, D.C. and Sacramento

From February 20-21, Gold Coast Health Plan (GCHP) participated in a legislative advocacy "fly-in" hosted by the Association for Community Affiliated Plans (ACAP). This event is held annually to allow ACAP member plans to meet with members of Congress and/or members of their staff to discuss federal legislation and policies that may affect the Medicaid program (known as Medi-Cal in California).

Melissa Scrymgeour, GCHP's chief administrative officer (CAO), and Marlen Torres, the Plan's Government Relations manager, met with representatives for U.S. Senators Dianne Feinstein and Kamala Harris as well as U.S. Representatives Julia Brownley and Steve Knight. GCHP's staff provided updated information on the Plan and discussed the positive impacts that extending the Children's Health Insurance Program (CHIP) would have for Ventura County residents already receiving coverage through the program.

The fly-in also provided the opportunity for plans to learn about health policy initiatives and trends that are occurring at a national level. ACAP hosted a health policy seminar that featured speakers from the House Energy and Commerce Committee, the Senate Finance Committee (Democrats), and the Senate Committee on Health, Education, Labor and Pensions. They discussed initiatives being proposed by Congress on how to address the opioid epidemic, changes to the 340B Drug Program, and possible solutions for high-cost specialty drugs.

According to the deputy director of the Center for Medicaid and Children Services (CMCS), the center is working on streamlining the approval process for federal waivers and reviewing the Medicaid Managed Care Rule provisions, specifically the Medical Loss Ratio and the Quality Rating System. The center is also reexamining Section 1557, a nondiscrimination provision of the Affordable Care Act (ACA).

On February 28, Local Health Plans of California (LHPC) also held its yearly legislative briefing. Health plan leaders took the opportunity to discuss with legislative staff several initiatives their plans have launched to care for their members in the areas of housing, opioids, and non-emergency medical transportation (NEMT).

GCHP's chief executive officer, Dale Villani, along with Melissa Scrymgeour and Marlen Torres, also met with staff from the offices of Assembly members Jacqui Irwin, Monique Limon, and state Senator Hannah-Beth Jackson.

Sacramento Universal Healthcare

The Assembly Select Committee on Health Care Delivery Systems and Universal Coverage convened several hearings starting late last year in response to SB 562, the single payer legislative bill. The bill is supported by the California Nurses Association. The committee held a number of hearings on delivery system reform options, universal coverage, and financing options. The committee selected the University of California system to gather the information from the hearings and prepare a final report.

The report recommended policy solutions that can be pursued in the short and long term. The short-term solutions include expanding Medi-Cal eligibility, enhancing subsidies, increasing Medi-Cal provider payments, exploring a public option, requiring price transparency for hospitals and medical groups, and establishing an all-payer claims database.

The long-term solution would be a system based on unified public financing – a single payer system. The report essentially acknowledged that a single payer system would take many years to establish and would require constitutional amendments, federal approvals, and statutory changes.

GCHP's Government Relations Department will continue to monitor and provide updates on efforts to establish universal health care.

Assembly Budget Subcommittee on Health and Human Services Hearing

In March, the Assembly Budget Subcommittee on Health and Human Services held a hearing on the Department of Health Care Services (DHCS) budget requests. While no action was taken on budget items for this department, a number of issues were discussed, including an extensive discussion around this year's budget surplus and how the money can be used to strengthen the Medi-Cal program. Consumer advocates also voiced their support for the Legislature to fully restore podiatry, audiology, and speech therapy benefits, which were available to beneficiaries prior to the last recession. Any action on the department's budget will occur after revisions are made in May.

Legislative Bills Update

February 16 was the last day for legislators to introduce new bills. Once a bill has been introduced, it goes to the Senate or Assembly Rules Committee, where it is assigned to a policy committee. A legislative bill cannot be heard in its assigned policy committee until 30 days after it is introduced and printed.

Legislative bills that GCHP's Government Relations Department is tracking will be heard in the coming weeks. A complete report of these legislative bills will be presented at next month's commission meeting

According to the Kaiser Family Foundation, addiction to heroin, fentanyl, and prescription painkillers is increasing among Americans. The foundation estimated that in California, five people per 100,000 overdosed from opioids in 2016.

Thus, addressing the opioid epidemic has become a priority for legislators at the federal and state levels. In California, legislators are looking at various ways to address the issue and have introduced the following bills:

- [AB 1963 \(Waldron\)](#) Medi-Cal: Reimbursement: Opioid Addiction Treatment: This bill would require DHCS to increase the Medi-Cal provider reimbursement rates for medication-assisted treatments, buprenorphine/naloxone combination treatments, methadone treatments, and naltrexone treatments that are provided by certified providers for opioid addiction.
- [AB 1998 \(Rodriguez\)](#) Opioids: Prescription Limitations: This bill would prohibit the prescribing of an opioid in an amount greater than the patient needs for three days unless the prescriber believes, in his or her professional judgment, that a larger prescription is needed to treat a medical condition or chronic pain.
- [AB 2384 \(Arambula\)](#) Medication-Assisted Treatment: This bill would require a drug formulary maintained by a health care service plan, including a Medi-Cal managed plan, or a health insurer to include, at a minimum, specified prescription drugs for the medication-assisted treatment of substance abuse disorders. The bill would provide that medication-assisted treatment is presumed to be medically necessary and is not subject to prior authorization and an annual or lifetime dollar limit.
- [AB 2741 \(Burke\)](#) Prescription Drugs: Opioid Medications: Minors: This bill would require a prescriber to comply with specified conditions when prescribing opioid medications to a minor, including not prescribing more than a five-day supply of an opioid medication to that minor except in specified instances.



AGENDA ITEM 4

To: Gold Coast Health Plan Consumer Advisory Committee
From: Brandy Armenta, Compliance Officer
Date: April 18, 2018
Re: State Mega Regulation Update

Verbal Presentation

AGENDA ITEM)

To: Gold Coast Health Plan Consumer Advisory Committee
From: Kashina Bishop, CFO
Date: April 18, 2018
Re: Financial Update

Financial Update

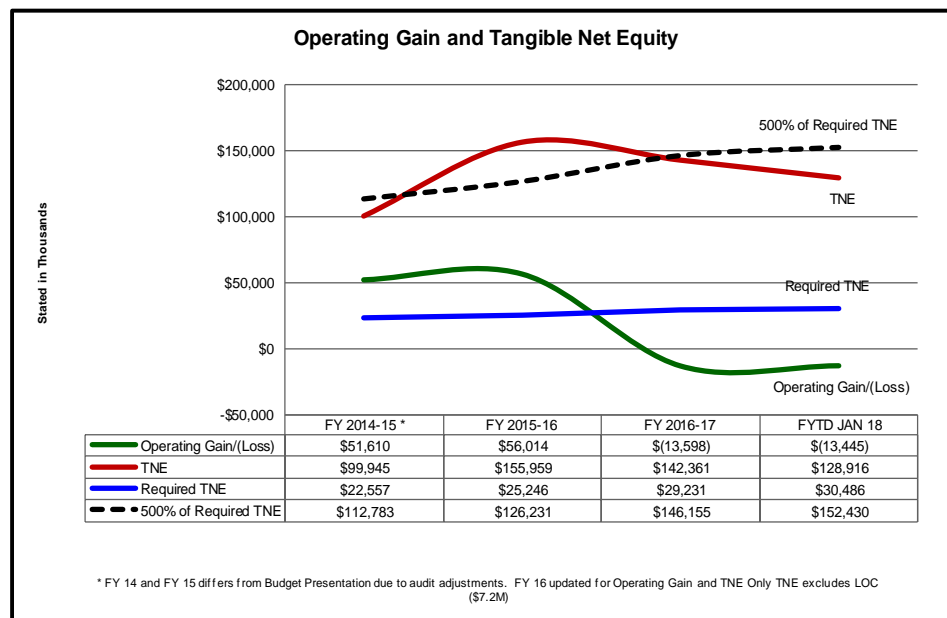
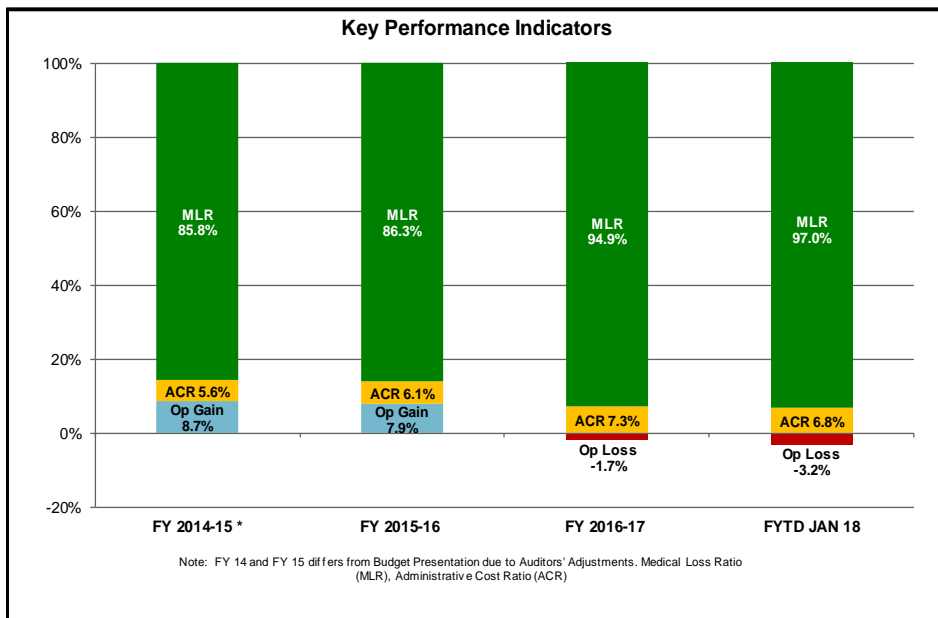
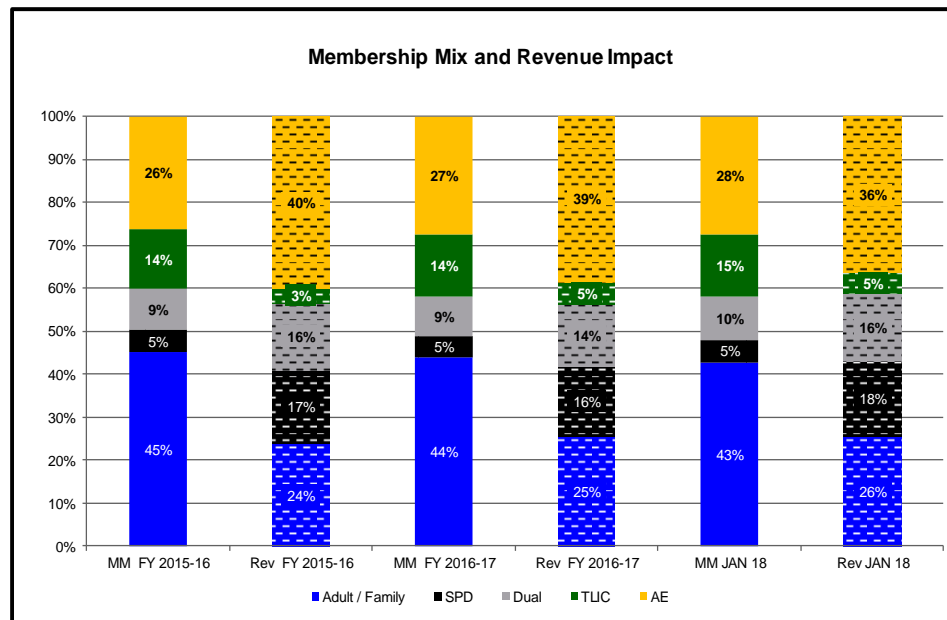
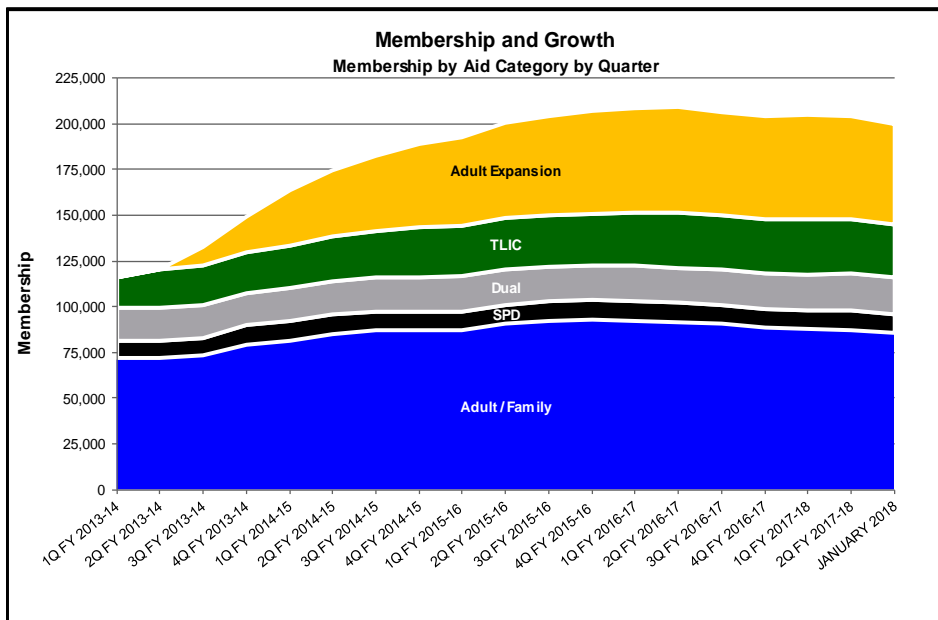
January membership of 199,712 was below budgeted membership by 4,170. Only two aid categories were above budget. Seniors and Persons with Disabilities ended the period at 10,285 or 520 better than budget, and Adult Expansion ended at 55,059, or 742 above budget.

For the seven months ended January 31, 2018, the Plan's performance was a decrease in net assets of \$13.4 million which was \$14.4 million lower than budget. This was largely the result of continued efforts to increase provider payments and reduce Tangible Net Equity (TNE) during the current fiscal year. Administrative expenses continued to be lower than budget, with \$0.6 million in year to date savings.

The Plan's fiscal year-to-date operating performance resulted in TNE of approximately \$128.9 million, which was \$14.4 million lower than budget. The Plan's TNE at January 31 was 423% of required TNE, within the range of the Plan's stated policy.

The current value of the Plan's investment portfolio was \$231.5 million at January 31, 2018. The portfolio consists of short-term, highly liquid investments with a current average yield of approximately 1.23%. Other cash balances are slowly being reduced in order to fund the state claw-back of previous rate overpayments.

**FINANCIAL PERFORMANCE DASHBOARD
FOR MONTH ENDED JANUARY 31, 2018**





AGENDA ITEM 6

To: Gold Coast Health Plan Consumer Advisory Committee
From: Ruth Watson, Chief Operating Officer
Date: April 18, 2018
Re: Program of All-Inclusive Care for the Elderly (PACE)

Verbal Presentation

AGENDA ITEM 7

To: Gold Coast Health Plan Consumer Advisory Committee
 From: Lupe González, Director of Health Education and Cultural & Linguistics
 Date: April 18, 2018
 Re: GCHP Annual Health and Resource Fair

GCHP is pleased to announce our Annual Community Health and Resource Fair. The Resource Fair will be held on Saturday, June 23, 2018 from 10:00 am – 2:00 pm at downtown Oxnard, Plaza Park. We currently have 24 agencies who have registered, however, we expect at least another 8-10 agencies to also register. We will be providing health screenings such as blood pressure, blood glucose, and body mass index (BMI). The event is free and is open to Members and the community.

Last year over 300 individuals and families participated in the event. This year we hope to exceed that amount by working with local school districts, faith based groups, and other non-profit agencies. For more information, please see the flyer below in English and Spanish.

No.	Agency/Organization
1.	Dignity Health, St. John's Hospitals
2.	Turning Point Foundation
3.	Kids & Families Together
4.	Human Services Agency, County of Ventura
5.	MICOP
6.	Ventanilla de Salud (Consulado de Mexico)
7.	VC Public Health - Children's Health Programs
8.	Community Action of Ventura County
9.	Oxnard Family Circle Adult Day Health Care Center
10.	WIC Program
11.	Child Development Resource (CDR)
12.	Ventura County Credit Union
13.	Ventura Transit System, INC. (VTS)
14.	Ventura County Behavioral Health - Office of Health & Equity
15.	VCBH - Alcohol & Drug Prevention
16.	New York Life
17.	211 Ventura County - Interface Children Family Services
18.	Health Insurance Counseling & Advocacy Program (HICAP)
19.	COSTCO

20.	Shield Healthcare
21.	Clinicas del Camino Real
22.	Coalition for Family Harmony
23.	Ventura County Adult Day Health Care Center
24.	CSUCI Nursing Program



www.goldcoasthealthplan.org

Annual Health and Resource Fair

FREE Health Screenings

- Body Mass Index (BMI)
- Blood Pressure
- Blood Glucose

Resources

- Medi-Cal and Cal-Fresh Information
- Employment and Housing Information
- Youth, Family and Senior Services

Entertainment

- Music
- Folkloric Dance
- Face Painting
- Zumba®

Saturday, June 23, 2018
10:00 am – 2:00 pm
 Plaza Park, 500 S. C Street
 Oxnard, CA 93030

For more information call the Health Education Department at:
805.437.5606
TTY 1.888.310.7347



Statement of Nondiscrimination and Language Assistance
 Gold Coast Health Plan cumple con la Ley Federal de Derechos Civiles y no discrimina en la base de raza, color, nacionalidad, edad, discapacidad o sexo.
 Gold Coast Health Plan cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.
 Gold Coast Health Plan 遵守適用的聯邦民權法律規定，不因種族、膚色、民族血統、年齡、殘障或性別而歧視任何人。
 ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-888-301-1228 (TTY: 1-888-310-7347).
 ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-301-1228 (TTY: 1-888-310-7347).
 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-888-301-1228 (TTY: 1-888-301-7347)。



www.goldcoasthealthplan.org

Feria Anual de Salud y Recursos

Exámenes de Salud **GRATIS**

- Índice de masa corporal (IMC)
- Presión Arterial
- Glucosa sanguínea

Recursos

- Información de Medi-Cal y Cal-Fresh
- Información de empleo y vivienda
- Servicios para jóvenes, familias y personas de la tercera edad

Entretención

- Música
- Danza Folklórica
- Pinta Caritas
- Zumba®

Sábado, 23 de Junio de 2018
10:00 am – 2:00 pm
 La Placita, 500 S. C Street
 Oxnard, CA 93030

Para más información, llame al Departamento de Educación para la Salud al:
805.437.5606
TTY 1.888.310.7347



Declaración de No Discriminación y Asistencia Lingüística
 Gold Coast Health Plan cumple con la Ley Federal de Derechos Civiles y no discrimina en la base de raza, color, nacionalidad, edad, discapacidad o sexo.
 Gold Coast Health Plan cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo.
 Gold Coast Health Plan 遵守適用的聯邦民權法律規定，不因種族、膚色、民族血統、年齡、殘障或性別而歧視任何人。
 ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-888-301-1228 (TTY: 1-888-310-7347).
 ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-301-1228 (TTY: 1-888-310-7347).
 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-888-301-1228 (TTY: 1-888-301-7347)。



AGENDA ITEM 8

To: Gold Coast Health Plan Consumer Advisory Committee
From: Chris Hodina, Director of Operations
Date: April 18, 2018
Re: Conduent – Administrative Services Organization (ASO)

Verbal Presentation



AGENDA ITEM 9

To: Gold Coast Health Plan Consumer Advisory Committee
From: Luis Aguilar, Member Services Manager
Date: April 18, 2018
Re: Member Services Publication

Gold Coast Health Plan has prepared a new all-in-one brochure complete with all information a new or potential member might need. This brochure covers our complete line of benefits with information on how to obtain them. Quantities of both brochure are being provided to each CAC member.

