HEALTHY SAN DIEGO (HSD)
CONSUMER & PROFESSIONAL ADVISORY COMMITTEE
MINUTES – January 8, 2026

Members/Alternates Present In-Person: Suzanne Afflalo, Asya Anderson, Amanda Berry, Jack Dailey (Consumer Chair), Michelle Darnelle, Joanne Franciscus, Kim Fritz, Kristi Jones, Robin Joy Maxson, Jennipher Ohmstede, Harriet Seldin, Caryn Sumek, Patrick Tellez (Professional Chair), Sayone Thihalolipavan, Jennifer Tuteur, Janet Vadakkumcherry, Claudia Velasquez, Ann Warren, Lindsey Wright

Members/Alternates Present Virtual: Amanda Berry, Donald Miller

HSD Staff Present: Lynn Carr, Brittany Charity-Walker, Luwam Kidane, Lee Laydon, Cynthia Nambo, Alison Sipler, Michael Worman

Other Participants/Guests: Kitty Bailey, Amelia Kenner-Brininger, Wendy Ferguson, Andrew Gregor, Skylar Hanson, Danielle Ice, Monica Lin, Trixy Joy Manansala, Angela Martinez, Valerie Martinez, Kelly Motadel, Barbara Orozco-Valdivia, Joe Prickitt, Fadra Whyte

ITEM	DISCUSSION	ACTION
I. Welcome and Introductions		
A. Call to Order	The Consumer & Professional Advisory Committee (CPAC) was called to order by Professional Chair Dr. Patrick Tellez at 3:01 p.m.	
B. Announce-ments	Alison Sipler and Brittany Charity-Walker outlined new Zoom security measures implemented after a disruption occurred at the last meeting on November 13, 2026. New Zoom settings have been activated with security features that limit chat messages, camera use, use of thumbnail view, and enabling the waiting room at the start of the meeting. Entry into the meeting is now managed by the host and co-host. Virtual participants need to raise their hand to be unmuted. Caryn Sumek announced that Senate Bill (SB) 596 requires new Registered Nurse staffing ratios in freestanding psychiatric hospitals beginning January 31, 2026. This has significant financial and operational challenges. There is concern some facilities may reduce bed capacity to comply. Advocacy efforts are underway.	
C. Roll Call of Voting Members	The Roll Call of Voting Members confirmed a quorum was present for the meeting.	
II. Public Comment	None	
III. Action Items		
A. Approval of the Meeting Minutes from November 13, 2025	On MOTION of Janet Vadakkumcherry, seconded by Joanne Franciscus, the November 13, 2025, Meeting Minutes were approved, with all Committee Members present voting yes.	
B. County Counsel Updates	Andrew Gregor provided an update on SB 707 – Open meetings: meeting and teleconference requirements:	

(Andrew Gregor)	▪ Passage of SB 707 updated the Brown Act, potentially allowing more members (including voting members) to participate remotely via Zoom. Remote participation is allowed only if certain conditions are met and if the Board of Supervisors approves. This will provide greater flexibility for virtual and in-person attendance in the coming months. ▪ Staff are working with the Clerk of the Board to understand requirements and establish the approval process to request and obtain board approval for eligible subsidiary bodies to conduct meetings primarily virtually. ▪ Advisory Committee-friendly guidance is expected soon and will be shared once available. Updates will be provided at future meetings.	
IV. HSD Reports & Discussion		
A. HSD CPAC CalAIM Task Force Updates (Kim Fritz / Dr. Jennifer Tuteur)	Dr. Jennifer Tuteur reported: ▪ The California Advancing and Innovating Medi-Cal (CalAIM) Task Force was established per Board of Supervisors' recommendation to increase Medi-Cal managed care member participation in Community Supports (CS). The CalAIM Task Force includes multiple active workgroups with County staff support. ▪ The initial approach was to focus on four priority CS to achieve short-term wins for Housing Transition Navigation Services, Medically Tailored Meals/Medically Supportive Food. ▪ At the last meeting on December 11, 2025, the group reviewed current Medi-Cal managed care enrollment trends, noting declining enrollment affecting participation targets. State data was used due to need for de-duplicated, reliable counts; local Managed Care Plan (MCP) level data not used because deduplication is not feasible. San Diego utilization is generally trending upward; for most services, San Diego is in the higher performing quartiles. ▪ CS enrollment continues to rise, with approximately 10,000 recipients in San Diego County. Utilization trends across all 14 CS and San Diego's comparative performance statewide were presented. ▪ Explained how CS function as In Lieu of Services (ILOS) under the 1115 waiver. Comments/questions: ▪ Janet Vadakkumcherry: Is the data from the Department of Health Care Services (DHCS) or from Intrepid Ascent? - Response: We are using de-duplicated CS utilization data from DHCS. ▪ Janet Vadakkumcherry: The Board of Supervisors (Board) wants to achieve 25% of eligible Medi-Cal beneficiaries, but outcomes should be quality not utilization-driven. Are we going back to the Board? - Response: The Board directed us to form the Task Force and they set the goals of 50% utilization by all eligible people by January 1, 2027, and then 90% utilization by all eligible people by January 1, 2028. The only required report back was completed. There will be a courtesy update through a Board Memo in March 2026 to share where we are, the data we have, and what we are planning to do. We will continue to work on a global approach to look at quality outcomes, making sure we are using CS as an ILOS, and that we are all working together to ensure health and quality outcomes are maximized.	

	▪ Kristen Smith: What categories are used for the county comparisons? - Response: Comparisons were made based on neighboring, Geographic Managed Care, and/or similar geographic sized counties.	
B. **Medi-Cal Transformation Task Force Updates** (Jamie Beam)	Alison Sipler reported on behalf of Jamie Beam/Dr. Heather Summers: ▪ The Medi-Cal Transformation Task Force is a non–Brown Act Healthy San Diego body led by HHSA, with three leadership teams and 15+ workgroups. ▪ The ongoing changes to Medi-Cal remain a concern. ▪ The County and MCPs executed preliminary Memorandum of Understanding MOUs on September 30, 2025; documents are posted on County and MCP websites. MOU implementation and oversight occurs through various HSD workgroups. ▪ Overall, there is an effort to improve communication on workgroup activities through a standardized reporting process. ▪ CPAC and the Medi-Cal Transformation Task Force have a reciprocal relationship to identify trends that may have policy or systems impacts that could be addressed through a collective response.	
C. Emerging Trends and Issues (Jack Dailey/ Dr. Patrick Tellez)	Dr. Patrick Tellez invited members to share emerging trends impacting the Medi-Cal Managed Care delivery system. Comments: ▪ Jack Dailey: A topic worth tracking is the impact to immigrant populations. There was a recent federal court decision that lifted the injunction on data sharing between Centers for Medicare & Medicaid Services and Immigration and Customs Enforcement. Guidance is rapidly changing and there have already been multiple requests for clarification presentations. It is important to coordinate with stakeholders to ensure appropriate referral options for individuals seeking services but hesitant to pursue coverage. Ongoing policy pressures are also affecting clinics. ▪ Dr. Tellez: We should continue to track standing items, such as health needs assessments and how those are being used to inform strategic planning.	
D. Meeting Schedule – 2026 (Dr. Tellez)	Dr. Patrick Tellez reported: ▪ The 2026 meeting schedule maintains the Committee's every-other-month cadence (January, March, May, July, September, and November) on the second Tuesday from 3–5 pm. ▪ The schedule is included in the Outlook invitation for CPAC Members and posted on the Healthy San Diego webpage.	
E. Strategic Presentation Topics - 2026 (Dr. Patrick Tellez)	Dr. Tellez and Alison Sipler reported: ▪ CPAC Members annually prioritize strategic presentation topics to inform partners on key Medi-Cal Managed Care issues and support collaboration. ▪ Required or confirmed 2026 presentations include: Behavioral Health Services (BHS) Transformation Update, Tuberculosis Prevention and Care, Health and Human Services Agency (HHSA) Budget Overview, and County Community Health Data. ▪ Twelve members completed a poll to rank additional topics. Top selections were: 1) Self-Sufficiency Services (SSS) / H.R. 1 / Medi-Cal Renewal, 2) Birth	

	Equity / Maternal Health Crisis, 3) Population Health Management, 4) Healthy San Diego Clinical/Quality Measure Spotlight, 5) HHSA Interim Deputy Chief Administrative Officer Updates, 6) HIV/Hepatitis C/Sexual Health, and 7) Blood Lead Screening. ▪ County staff will develop a presentation schedule and identify speakers. Comments: ▪ Janet Vadakkumcherry/Jack Dailey: CalAIM and Medi-Cal waiver changes extend beyond eligibility and renewals, impacting scope of services, coverage, and broader Medicaid program operations. H.R. 1 and State/Federal policy changes should be addressed more broadly than SSS alone. There was a suggestion to separate topics into two presentations: one focused on Renewals and another on CalAIM, waivers, and related program changes. ▪ Dr. Fadra Whyte requested time to present on anticipated Proposition 56 cuts that could reduce Medi-Cal dental reimbursement by 50–70%, limiting anesthesia services and increasing emergency department (ED) use, hospital visits, and operating room wait times. - Response: County staff will coordinate with Dr. Whyte to add this topic to a future CPAC agenda.	
V. Chairs Report		
A. Health Services Advisory Board (Dr. Harriet Seldin)	Dr. Harriet Seldin reported: ▪ An update was received on two youth-related efforts; there is ongoing work with the Board of Supervisors to establish a formal youth engagement initiative, and a recent presentation on empowering young people and early career professionals to pursue public health advocacy and careers. These efforts are in early stages but aim to strengthen youth involvement and build a public health workforce pipeline. Comments: ▪ Robin Joy Maxson: Are you talking about youth that are consumers (receiving services) and then going into the field of public health? - Response: The County hosts a Public Health Advocate Camp for high school students to build interest in public health careers. Public Health Preventive Medicine residents are physicians that participate in meetings to increase their exposure to public health.	
B. Behavioral Health Advisory Board (Judith Yates)	No report; a new representative is being identified.	
VI. CalAIM Reports		
A. Providing Access and Transforming Health Collaborative	Skylar Hanson reported: ▪ The next San Diego PATH CPI meeting is on January 15, 2026, at 12:30pm. SSS will give a 20-minute presentation about Medi-Cal changes. Intrepid Ascent, the San Diego PATH CPI facilitator, will crowd-source topics for the remainder of the year.	

/ Intrepid Ascent (Skylar Hanson)	▪ 2026 is the last and final year of the PATH CPI program. ▪ Intrepid Ascent continues to meet with SDAIM and County staff.	
B. Medi-Cal Rx	Comments: ▪ Ann Warren: No issues have come up. ▪ Robin Joy Maxon: Elimination of the weight loss drugs to help alleviate other health conditions. Does this group (Committee) do advocacy or only report on trends? ▪ Dr. Tuteur: The HSD CPAC may submit recommendations to the HHSA DCAO for inclusion in the County's legislative agenda. The Board of Supervisors votes to approve the legislative agenda and, once approved, directs staff to work on issues. ▪ Jack Dailey: HSD CPAC previously raised Medi-Cal Rx issues with DHCS, helping improve the drug finder for pediatric asthma medications. The Legal Aid Society of San Diego also advocated for clearer messaging, leading DHCS to update its bulletins. Additional advocacy efforts supported escalation of Medi-Cal Transitions and Access to Care concerns with leadership involvement from Dr. McDonald and Dr. Miller. ▪ Michelle Darnelle: Michelle will share a flyer to distribute about over the counter medications that require prior authorization for continuing care.	
C. Health Plans / Advocates / Consumers / Clinical & Social Service Providers	No report	
VII. Information / Updates		
A. Public Health Services (Dr. Sayone Thihalolipavan)	Dr. Sayone provided a recap of the Public Health Officer Update that was presented to the Health Services Advisory Board. Some highlights included: ▪ Vaccines are receiving significant attention, with a major update to the immunization schedule issued this week. The American Academy of Pediatrics and the Western States Alliance have taken a strong stance, stating the changes are not justified. California will continue to follow California Department of Health (CDPH) guidance regarding health plan coverage of immunizations. Physicians remain the most trusted sources of health information, followed by family and friends. ▪ PHS posted updated autism advisory guidance on its immunization website following Centers for Disease Control and Prevention website changes. ▪ Hepatitis B vaccination rates are declining, with fewer newborns receiving the vaccine before discharge. ▪ The animated short "Hooper's Hope," from the perspective of a bacteria and highlighting the impact of misinformation; it was nominated for Best Animation at the San Diego Film Festival. ▪ The Public Health Laboratory launched in-house wastewater testing with results available on a public dashboard for early detection of circulating viruses.	

	▪ A new rabies dashboard was released with data on animals reported and tested for rabies. ▪ Silicosis became a reportable disease in California as of June 2025; providers are encouraged to screen at-risk patients. ▪ CDPH reported amatoxin poisonings from foraged wild mushrooms statewide, including severe illness and one confirmed death. ▪ A new study showed doxycycline post-exposure prophylaxis reduces Sexually Transmitted Infection rates; County clinics have implemented this practice. ▪ There is a new cost of living dashboard for older adults and a related dashboard on preventable hospitalizations, enabling regional comparisons of conditions that should be avoidable with adequate primary care. ▪ The California Surgeon General launched the "One Small Thing" campaign to address postpartum loneliness. ▪ The County launched OCHIN Epic, a unified electronic health record system for PHS clinics, field services, and administration. ▪ The County launched OCHIN Epic, a unified electronic health record system that will integrate PHS clinics, field services, and administration. OCHIN is an IT organization whose Epic platform is widely used by public health and safety net providers nationwide. ▪ The Olivenhain Municipal Water District may end water fluoridation; a public hearing is scheduled for January 21, 2026. Members were encouraged to support continued fluoridation due to potential oral health impacts. Comments: ▪ Dr. Patrick Tellez: There may be a common thread here. In August 2021, the County declared a Public Health Misinformation Crisis, and a review of the literature shows misinformation has only increased, particularly around fluoride, vaccines, and nutrition. The question was raised whether partners could collaborate on a trusted site or on-demand information source, which may help reduce avoidable emergency visits and hospitalizations. ▪ Dr. Sayone Thihalolipavan: There is a growing need for a trusted health information source as more people lose medical or dental coverage, which could help reduce avoidable ED use. Individuals who distrust government may not rely on government hosted information. ▪ Dr. Tuteur: Through the Health Professionals Telebriefing, a QR code is already in use and updated regularly linking to curated health information. The team is open to suggestions for additional topics to include.	
B. Behavioral Health Services (Kristi Jones)	Kristi Jones reported: ▪ Behavioral Health Services (BHS) key updates for 2025–26 include continued integration of County initiatives and participation in BH Connect to support real time data exchange, coordinated care, and modernized billing. ▪ BHS has initiated its participation in Phase 2 of the Medi-Cal Behavioral Health Demonstration Collaborative, focusing on follow-up after ED visits for mental illness and substance use.	

	▪ Launched Next Moves outpatient programs for justice involved youth up to age 21 and continued the school based Mobile Crisis Response Pilot across all public school districts. ▪ Partnering with Sharp Chula Vista on a new Crisis Stabilization Unit (CSU) using the Empath model, currently completing certification. ▪ Launched the San Diego Relay Program, a 24/7 peer support and navigation service for Medi-Cal patients after nonfatal overdoses or behavioral health holds. ▪ East County projects include a new East Region CSU opening soon, construction of a 12-bed acute psychiatric hospital at Edgemoor and plans for two regional facilities: an 89-bed Substance Use Disorder treatment center and a 16-bed children's crisis residential program. ▪ Continued use of the state Home Key Program to expand permanent and interim supportive housing. ▪ Opened a new 16-bed Psychiatric Health Facility on the Tri City Medical Center campus, which began accepting patients December 29, 2025. ▪ Expanded Community Health Worker operations. ▪ Moving forward with evaluating program priorities and aligning services with optimal care pathways; stakeholder input and opportunities for redesign are being considered; also coordinating with Behavioral Health Services Act implementation, CalAIM, and Behavioral Health Community-Based Organized Networks of Equitable of Care and Treatment (BH-CONNECT) statewide initiatives. ▪ BHS is preparing to become a standalone department separate from HHSA.	
C. Aging and Independence Services (Kristen Smith)	Kristen Smith reported: ▪ At Aging and Indepedence Services (AIS), the two main Medi-Cal funded programs are Multipurpose Senior Services Program (MSSP) and In-Home Support Services (IHSS). ▪ MSSP is care coordination similar to Enhanced Care Management (ECM). There are 457 clients enrolled in MSSP currently. ▪ IHSS is the largest program with over 49,000 recipients. ▪ The AIS team can look for caregiver availability impacts from Medi-Cal changes. ▪ AIS has published a comprehensive Personal Care Services Options Guide consolidating resources for Activities of Daily Living, including CalAIM CS for Personal Care, Respite, and Assisted Living Transition, etc. that may be useful to ECM providers and other counties.	
D. Medical Care Services (Dr. Jennifer Tuteur)	Dr. Jennifer Tuteur reported: ▪ E-blasts were sent to health providers before and after Christmas with flood warnings and information, including emergency contact numbers, "Turn Around, Don't Drown", medical prescription override codes, and Durable Medical Equipment (DME) customer service numbers. No issues were reported for residents in affected El Cajon apartments and a downtown shelter where DME and medications were lost. Appreciation was extended to health plans for rapid holiday and weekend responses	

	▪ As a reminder, insurance companies by law in California are required to pay for all immunizations or vaccinations according to the CDPH schedule. The coverage rate or vaccination rates and the quality are measured usually through Healthcare Effectiveness Data and Information Set measurement that are at least once a year. Any audits happening now will be reflected in future reporting cycles. Comments: ▪ Jack Dailey: Assembly Bill 144 applies to California-regulated health plans. There are some Californians who are in MCPs that are subject to the federal standards that may have other coverage challenges for accessing vaccinations. ▪ Joanne Franciscus: For whatever regulations they are subject to, would that be a floor or ceiling for what they have to provide? Insurance companies would likely have an interest. - Response: AB 144 establishes a mandatory baseline (floor) for insurance coverage of vaccines, but coverage can exceed federal standards.	
E. Healthy San Diego Statistics (Michael Worman)	Michael Worman provided the Healthy San Diego Statistics report: ▪ For December 2025, the total enrollment for Medi-Cal Managed Care in San Diego County was approximately 880,000 individuals. The Medi-Cal Enrollment by Health Plan was: Blue Shield Promise with 183,823 (20.9% of total), Community Health Group with 358,409 (40.7%), Kaiser with 72,324 (8.2%), and Molina with 265,324 (30.2%). ▪ For December 2025, the Eligibility Services by the Numbers Report showed total enrollment in the following programs: CalFresh with 381,679 recipients (down 6% from last year), CalWORKS with 51,671 recipients (down 2%), County Medical Services had 1 recipient (down 83.3%), General Relief had 5,300 recipients (down 12.2%), and Medi-Cal had 854,006 recipients (down 5%). For all these programs, the total number of unduplicated recipients was approximately 1.16 million individuals.	
VIII. Future Agenda Items	None	
IX. Adjourn	Meeting adjourned by Dr. Patrick Tellez at 4:49 p.m.	

THE NEXT HEALTHY SAN DIEGO CONSUMER & PROFESSIONAL ADVISORY COMMITTEE MEETING SCHEDULED

Thursday, March 12, 2026, from 3:00 p.m. to 5:00 p.m. *Via Zoom and in person.*

Minutes recorded and transcribed by Brittany Charity-Walker.