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## **CEO Message: Partnerships with Purpose**

Welcome to our 2018 Community Report! If you've read our yearly reports in the past, you'll notice we've changed the title from Annual Report to Community Report, and we've moved from a fiscal year to a calendar year. We made these changes to be clear about what it is we're sharing: A timely report to the community about what we have achieved this year and what we are working toward.

The theme of this report is "Partnerships with Purpose." Our name makes it clear that Partnership HealthPlan of California (PHC) is all about collaboration, so we wanted to highlight a few of our many partnerships.

A key new **partnership** for me this year has been with the California Future Health Workforce Commission. Its **purpose** is to help the state close the gap between the health workforce we have and the workforce we need.

It is composed of senior leaders who represent California's diversity and bring expertise from health, education, employment, labor, and government sectors. I am honored to be part of that group. The commission was designed to work for a set period of time (2017 and 2018) to develop a strategic plan for building the state's health workforce over the next five to 15 years. The group strives for creative thinking, and we divided into subgroups with special focus areas:

- Primary Care and Prevention
- Behavioral Health
- Healthy Aging and Care for Older Adults

I have been co-chair of the Behavioral Health subcommittee, which encompasses mental health and substance use. We've focused on integrating those two areas, ensuring access to all levels of care, and considering the role of technology in this type of care.

As for me, what's my purpose at Partnership? I would choose two verbs that I strive to do each day in my work as chief executive officer – lead and help.

The commission's final report will be out in the first half of 2019, so be on the lookout for that at https://futurehealthworkforce.org/.

While that gives you a glimpse of our future workforce, I also want to highlight PHC's current workforce – our wonderful staff! Throughout this Community Report,

you'll see photos of our staff members holding signs with various words on them. Those words describe that employee's "purpose" here at PHC. A Member Services representative might have chosen the word "Listen," while someone in Finance might have selected "Analyze."

As for me, what's my purpose at Partnership? I would choose two verbs that I strive to do each day in my work as chief executive officer – lead and help. The words I chose, and those selected by our staff, collectively, define our purpose and our mission: *To help our members, and the communities we serve, be healthy.* 



## **United in Partnership**

PHC is one managed care plan, but we reach members as diverse as the 14 counties we serve. A 6-year-old in Modoc County (bordering Oregon) has a vastly different life than a 60-year-old in Marin County (bordering San Francisco), but they both have the need for quality health care. And we know it's our job to meet the needs of all our members – more than **550,000 in 14 unique counties**. That's why we maintain offices in all four regions we serve – to be the local health plan for all of our members. It's also why we work to build and maintain relationships with providers and community partners in every corner of our service area. There's **one purpose to all those partnerships** – *to provide high quality health care to each and every one of our members*.



To help our members, and the communities we serve, be healthy



## VISION

To be the most highly regarded managed care plan in California



We asked PHC staff members what word best describes their purpose at PHC. And we got a wide variety of words, but many of them were on similar themes of helping and caring for our members. Throughout these pages, you'll see PHC staff members displaying their purpose words. We thank them for all they do!

Organize

Schedule

Measure Facilitate

Listen

Inspire

Study

Create

Interact

Recruit

Review

Engage

**Update** 

Design

Research

Teach

Monitor

Administer Heal Counsel

**Implement** 

Advocate

Advise



**Improve** 

Partner

Report Comfort

**Track** 



## **Spotlight on Childhood Immunizations**

**Our Partnership:** PHC's Quality Improvement and Health Education departments with Anderson Middle School in Shasta County.

**The Purpose:** To promote the importance of immunizations for children ages 9-13 and to increase adolescent immunization rates.

Childhood immunizations are critical for the health of our children and our communities. Collaborating with providers, we work to educate our members on the importance of having their children immunized on time. This year, we took that message to the children themselves.

We teamed up with Anderson Middle School in Shasta County to highlight immunizations for children ages 9-13. Included in that effort was a PHC-sponsored poster contest.

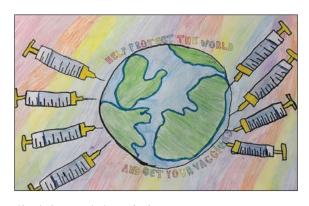
Sandra McMasters from our Quality Improvement team visited the school in March to educate sixth-graders about vaccines, and teachers followed up with additional lessons. PHC's goal was to increase immunization rates for TDaP, Meningococcal, and HPV among Anderson students entering seventh grade.

"The students were engaged and eager to learn," Sandra says. "And the posters they created show they understood the importance of immunizations. Plus, they're really talented artists."

Students were given the opportunity to enter the poster contest to highlight their research. Fifty-nine sixth-graders submitted entries, which were voted on at the school's open house. The winners were: Jordyn Hennings, first place; Kendra Adams, second place; and Hannah Scotti, third place. The winners received gift cards, and their posters have been displayed in health centers, community centers, schools, and the county immunization clinic.



Jordyn's first-place-winning entry



Kendra's second-place-winning entry



Hannah's third-place-winning entry

# Other childhood immunization efforts this year

## Some additional ways we've promoted adolescent immunizations this year include:

- Messaging and calls and member incentives focusing on the HPV vaccine. Partnered with Petaluma Health Center.
- Immunization clinics and member incentives.
   Partnered with Shasta County HHSA-Public
   Health, Mountain Valleys Health Center, Churn
   Creek Healthcare, and local school districts.
- Working on feasibility of identifying members who need one visit to complete their immunization series by age 13 and targeting messages to them. Partnered with multiple providers with largest immunization gaps to develop target messaging for those members to increase immunizations for their adolescent population.

## We've also worked to improve immunization rates among younger children:

- Workflow changes were made to improve provider capacity, resulting in 33 percent increase in immunizations. Partnered with Hill Country Health and Wellness Center, and changes have been adopted across all Hill Country clinics.
- Launched first intervention targeting immunization series completion for members nearing their second birthday. Partnered with Northeastern Rural Health Clinics.
- Well-Child Birthday Club targets members nearing their second birthday for timely completion of immunizations. Partnered with Shasta Community Health Center.
- Patient outreach to inform parent that child is in need of an immunization. Partnered, in separate efforts, with Sonoma County Indian Health Project, NorthBay Healthcare, and Solano County Family Health Services.



#### **New Online Member Portal**

**Our Partnership:** Our IT and Member Services teams with internal stakeholders and our Consumer Advisory Committee (CAC)

**The Purpose:** To create a self-service online portal for all members

Helping our members be healthy starts with providing easy access to quality care. Our new, web-based Member Portal was developed to create an intuitive, secure, and self-service portal enabling members to access clinical, non-clinical, and benefit information from a computer or smartphone.

Our Member Portal also fulfills one of the requirements for achieving NCQA accreditation (see Page 14). PHC's IT and Member Services departments worked closely with internal stakeholders (Member Services, Provider Relations, and Quality Improvement) and CAC members to help design the Member Portal. We are excited that our members have an easy way to perform functions such as request a primary care provider change, order/print an ID card, view lab results, or view current immunization records, all in one convenient location.

In July, our Member Portal was piloted for selected members and the feedback we received was positive and encouraging. PHC launched the Member Portal for all members in September 2018.

## **New Online Provider Directory**

**Our Partnership:** Our Provider Relations, Member Services, and IT teams with invaluable input from our provider community.

**The Purpose:** To create an online, searchable provider directory with "atthe-tip-of-your-fingers" information that includes facilities, sites, specialties, accessibility, and other details about providers and their services, with multilanguage translations.

Beginning in spring 2017, we undertook a project to create an online, searchable, provider directory that is updated daily.

The design and features of the directory are based upon the needs of our providers and members, as well as other factors. The basic search features include the ability to search for primary care or specialty providers, hospitals, clinics, laboratories, or pharmacies.

The directory lists provider languages spoken other than English and has a glossary of terms in English, Spanish, Russian, and Tagalog.

Feedback from site visits by our Provider Relations representatives is that the directory is trustworthy. Providers, clinicians, and site staff have been impressed that they have access to the most updated provider lists, that primary care providers can search for the most current information on specialists, and that we

have included a feature where they can enter changes about their status, address, and websites online.

As a part of the online provider directory, we have established internal teams dedicated to service, maintenance, support, and future updates.



## **Wellness and Recovery: Addressing Addiction**

**Our Partnership:** Our Wellness and Recovery Program team together with providers and community partners

**The Purpose:** To address alcohol and drug addictions as part of our overall service delivery system.

PHC's longstanding efforts to integrate care and to address the broad scope of our members' health care needs has led to the launching of our Wellness and Recovery Program. In its essence, this is our effort to address alcohol and drug addictions as part of our overall service delivery system.

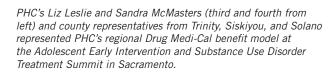
The substance use delivery system will include several services that were not previously available to many of our members including withdrawal management, residential care, and case management. This effort requires that we at PHC and our providers and partners work closely together since the Medi-Cal system for these services is disparate and often confusing.

Initially, the system will differ by county because the new Medi-Cal substance use benefit requires that individual counties opt-in and commit county funds to the effort. PHC will work to ensure that all PHC members, regardless of county, can access critical services and are aware of resources to help address addictions.

• In all PHC counties, we will encourage providers to address addiction as part of their ongoing services. This may include:

- o Combined mental health and substance use counseling when a member's addiction is contributing to their anxiety or depression.
- o Administration of medication assisted treatment by primary care providers and others
- o Work in emergency rooms and hospitals to help transition addicted members to community treatments and services.
- We are working with Marin, Napa, and Yolo counties to ensure that our members can receive the substance use treatment services administered by these counties.

In all PHC counties,
we encourage
providers to address
addiction as part of
their ongoing services.



PARTNERSHIP HEALTHPLAN OF CALIFORNIA

• We plan to administer the full array of substance use treatment services in Humboldt, Lassen, Mendocino, Modoc, Shasta, Siskiyou, Solano, and Trinity counties.

For many years, we have recognized that our staff, communities, and members were facing issues associated with addiction. The work in the Wellness and Recovery Program is a big step in our ongoing efforts to support the critical work that is being done by our providers, communities, and by individual members and their families to reduce the awful effects of addiction and substance abuse.





## **Housing for Healthier Communities**

**Our Partnership:** PHC provided \$25 million in housing grant funding to more than 20 entities in our service area.

**The Purpose:** To address homelessness and housing-related needs, which impact the health of our members.

After accepting grant applications in 2017, PHC awarded \$25 million for housing-related projects across our 14-county service area. Through this grant program, PHC aims to address the critical housing and housing-related needs that affect the health of our members.

In a press release issued in April 2018, our CEO Liz Gibboney said: "Without a roof over your head and a safe place to sleep, it's difficult to stay healthy."

"We decided to address this critical healthrelated issue right where it starts – by funding projects that address homelessness and the lack of housing for the most vulnerable populations in our communities."

Throughout 2018, the projects have been in various beginning stages, from planning to hiring new staff to construction, and we are eager to see them progress in the coming year.

The positive impact they will have on our members who have experienced homelessness or housing insecurity will be significant.



| COUNTY    | AGENCY   | GRANT AMOUNT  |
|-----------|--|---|
| Del Norte | Del Norte County Department of Health & Human Services     | \$493,118   |
| Humboldt  | Redwood Community Action Agency                            | \$1,266,486   |
| Humboldt  | Humboldt County Department of Health & Human Services      | \$1,050,000   |
| Lake      | Adventist Health Clear Lake                                | \$1,330,904   |
| Lassen    | Lassen County Health & Social Services                     | \$323,225   |
| Marin     | Homeward Bound of Marin                                    | \$1,567,065   |
| Mendocino | Health and Human Services/Redwood Community Services, Inc. | \$1,006,196   |
| Modoc     | Training, Employment & Community Help, Inc.                | \$133,239   |
| Napa      | Peter A. and Vernice Gasser Foundation                     | \$1,000,000   |
| Napa      | Abode Services   | \$260,820   |
| Shasta    | One Safe Place   | \$142,000   |
| Shasta    | Hill Country Community Clinic                              | \$1,730,260 (capital) and<br>\$269,740 (facilitation)   |
| Shasta    | Northern Valley Catholic Social Service                    | \$50,000 (facilitation) and<br>\$435,376 (capital)      |
| Siskiyou  | Siskiyou County Health & Human Services Agency             | \$219,949   |
| Siskiyou  | Siskiyou County  | \$560,000   |
| Solano    | CAP Solano Joint Powers Authority                          | \$4,913,964   |
| Sonoma    | Sonoma County Community Development Commission             | \$3,264,000 (capital) and<br>\$1,653,538 (facilitation) |
| Trinity   | Trinity County Behavioral Health Department                | \$195,390   |
| Yolo      | City of Woodland   | \$679,971   |
| Yolo      | City of West Sacramento                                    | \$914,444   |
| Yolo      | Davis Community Meals and Housing                          | \$750,313   |

#### **MEMBER DEMOGRAPHICS**

#### **Members**

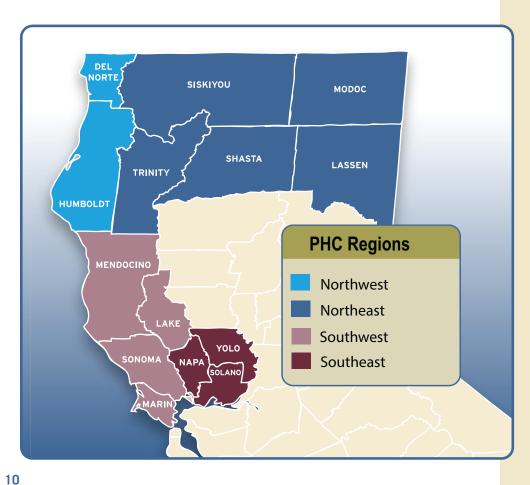
Total PHC Membership (as of November 1, 2018): 552,918

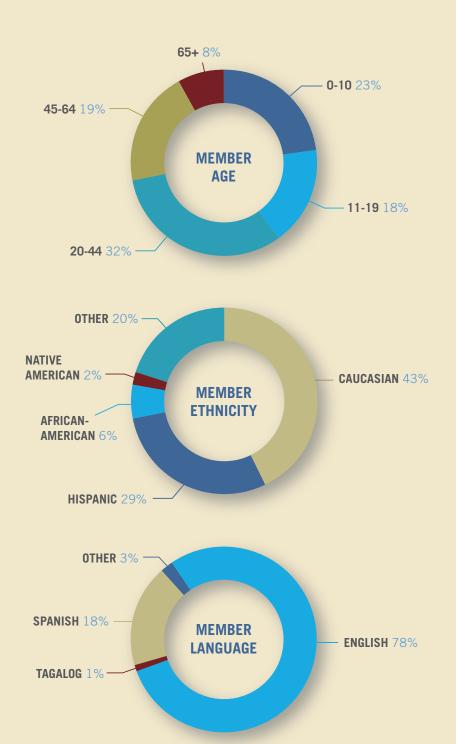
#### **Population**

Percentage of 14-county total population who are PHC members: 26%

Membership by Region (as of November 1, 2018):

Northwest: **62,972** Northeast: **91,456** Southwest: **211,427** Southeast: 187,063









## **Protecting Patient Privacy**

**Our Partnership:** PHC's Regulatory Affairs and Compliance team with all employees and our Board of Commissioners

**The Purpose:** To safeguard the privacy of our members' health information

Protecting the privacy of patient data is a major priority for all health care organizations, including providers and health plans, like PHC. We understand the value of our member's health information, so we take privacy very seriously. By maintaining compliance with evolving rules and regulations, PHC works to manage privacy risks, including cyber threats and misplaced documents or electronic files.

PHC works to follow all state and federal privacy rules including the Health Insurance Portability and Accountability Act of 1996 (HIPAA). The HIPAA Privacy Rule serves as the national standard for the protection of individuals' medical records and other personal health information. This rule provides member rights regarding their own health information and sets limits on who can look at and receive member health information.

Today, PHC navigates the tightrope of balancing individual privacy interests with the need to ensure appropriate care for our members. We take steps to effectively communicate our compliance standards, policies, and procedures to all employees and other partners. This includes:

- Annual compliance trainings for employees and the Board of Commissioners
- A Code of Conduct, signed yearly by all employees, acknowledging their responsibility to safeguard PHC member identity, eligibility, medical information, and other confidential information
- Regular compliance updates to the Board of Commissioners, including the presentation of PHC's Compliance Plan
- An employee "Compliance Week" held annually to promote awareness and understanding of requirements
- Internal monitoring and auditing programs including privacy checks conducted during walk-around "Caught You Being Compliant" audits at PHC offices
- An open door policy for reporting of any potential or actual noncompliance incidents.



#### The Road to NCQA Accreditation

**Our Partnership:** All PHC Departments, especially Quality Improvement, and the National Committee for Quality Assurance (NCQA)

**The Purpose:** To be certified by and receive the NCQA seal, a symbol of high-quality health care.

The National Committee for Quality Assurance (NCQA) is a private, not-for-profit organization dedicated to improving health care quality. The NCQA seal is a widely recognized symbol of quality. The seal is a reliable indicator that an organization is well-managed and delivers high quality care and service in six major areas: Quality Management and Improvement, Population Health Management, Utilization Management, Credentialing, Members' Rights and Responsibilities, and Member Connections with PHC.

The provision of high-quality health care to our members is fundamental to our vision and mission. We want to be one of the highest quality health plans in California. The NCQA Health Plan Accreditation supports this goal in multiple ways:

- It provides a framework to guide our operational and quality improvement activities
- It offers a nationally-recognized standard and definition for a high quality health plan, which will allow PHC to compare ourselves objectively against other high quality health plans
- It is the only health plan assessment that bases its results on clinical performance and member experience

We have received acceptance of our application for formal interim accreditation, with a survey date scheduled for June 4, 2019. Results will be communicated by NCQA to PHC by September 2019. Once we have achieved interim accreditation, we will move toward achieving first survey accreditation by March 2021 and renewal survey accreditation by March 2024.

The partnership among our departments and teams has been instrumental to preparing for full accreditation. Cross-departmental collaborations have allowed us to move closer to 100 percent compliance with interim requirements, while at the same time gearing up to first survey requirements by implementing new infrastructures and processes. A few examples include our online searchable provider directory, new member portal, strengthening of our delegation agreements, and defining a comprehensive analysis structure.



## **PHC** in an Emergency

**Our Partnership:** Our Community Emergency Response Plan team and all PHC staff, together with members, providers, and community partners.

**The Purpose:** To provide care to our members in times of emergency or disaster.

"Neither snow nor rain nor heat nor gloom of night stays these couriers from the swift completion of their appointed rounds."

Most of us are familiar with this quote, which is the unofficial motto of postal workers and a tribute to their dedication to deliver the mail, no matter the circumstances.

We at PHC can relate. Over the past year and a half, Northern California has endured a series of devastating wildfires, resulting in lost lives, the destruction of homes and businesses, and the scorching of hundreds of thousands of acres. As fires raged and first responders worked to save lives and structures, we at PHC were doing all we could to live out our mission: To help our members, and the communities we serve, be healthy.

In times of wildfires or other disaster, we have a Community Emergency Response Plan (CERP) that we put into action. During last summer's Carr Fire in Shasta County, for example, this took shape in several ways:

- Our CERP team met daily (via video conference from Redding, Fairfield, Santa Rosa, and Eureka) to assess impacts to our members, providers, and staff.
- We temporarily lifted some standard procedures and worked with doctors, hospitals, pharmacies, and health centers to ensure that members had access to their medications or medical care regardless of whether they were able to reach their assigned pharmacy or primary care physician.
- Our Provider Relations team monitored which medical facilities were evacuated or closed, and Health Services made any needed arrangements for members.
- Staff members visited evacuation shelters and set up an information table at a relief center to assist members.
- At our Redding Avtech office, we offered a temporary home to the United Way, which had been evacuated from its facility and needed a place to operate.



We created a banner and hung it on a fence visible from the highway to thank firefighters and law enforcement for their efforts during the Carr Fire in Redding.

All of this was happening while many of our staff members were forced from their residences, including two Redding employees who lost homes in the fire. Only nine months earlier, we'd experienced fires in Sonoma and Napa counties, during which three of our staff members also lost homes and others were evacuated.

PHC even has a first responder among us: Claims Specialist Justin Mabra is also a volunteer firefighter for the Suisun City Fire Department. He worked to protect structures during 2017's Atlas Fire. We thank Justin and all firefighters for their efforts.

We also commend all our staff for their work to help our members, and the communities we serve, be healthy – even in the most difficult of circumstances. And our members can rest assured that next time there's an emergency or natural disaster, we will be there to make sure their health care needs are met.



## **Building a Better Health Plan**

**Our Partnership:** Our leadership and Facilities teams with architects, contractors, and many construction workers.

**The Purpose:** To create a PHC campus in Fairfield with room for our growing staff, as well as community members, providers, and members who visit us.

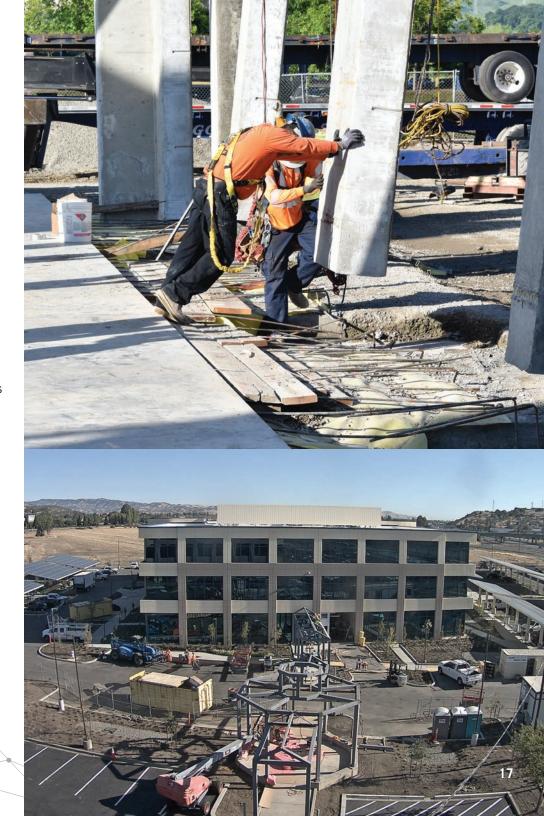
This year, our Fairfield "main office" became a "campus" with the addition of a brand-new building. We officially broke ground on the building, next door to our main office at 4665 Business Center Drive, on September 21, 2016. Just over two years later, staff members were set to move in to their new space in early December 2018, just as this report went to print.

The new building, at 4605 Business Center Drive in Fairfield, is a top-notch facility, with solar panels on the roof and in the parking lots, state-of-the art servers for our computer system, and a welcoming look and feel for staff and visitors alike.

The new building will house our Member Services, Claims, and OpEx/PMO departments, as well as additional support staff. It will feature Member Services interview rooms where members can speak with a representative in person, an event center for large meetings and conferences, not to mention offices, cubicles, meeting rooms, and break rooms. A breezeway and path will connect the new building with the "old" building, which remains home to our Health Services, Provider Relations, Human Resources, IT, Finance, and Administration departments.

Of course, in addition to our Fairfield campus, we maintain regional offices in Santa Rosa, Redding, and Eureka.

We are excited about the changes in Fairfield, and look forward to welcoming visitors to our new facility in 2019.



## **Customer Service Worth Complimenting**

These compliments about our Member Services representatives are actual quotes from voicemails or conversations with Member Services supervisors during 2018.

"(Dani) is clear, concise and incredibly helpful. She answered all of my questions and more without being pushy ... and provided me with necessary information to make this work for me. If I were to rate her, she'd be 5 out of 5 stars!"

"Ashley is incredible. I feel so much better after speaking to her. Good for you guys for having such a wonderful person who is so passionate about your callers."

"Hannah was stupendous, polite, had excellent manners, professional, kind, patient and is extremely gifted at customer service."

"I couldn't go another moment without calling PHC back (to compliment Jodie for) being so kind, understanding and professional."

"Tiffany went above and beyond my expectations. She really seemed to care and I never expected that ... I thought Tiffany was going to think I was just some crazy old lady, but she didn't. Tiffany is a wonderful human being and deserves a raise. I am so happy I got her."

"Claudia was polite, wonderful and most helpful."

Member Services Representative Claudia Vasquez

"Lisa was kind, considerate and waved her magic wand to fix everything."

"Shon knows his stuff."

"My mom is 98. It has been emotionally and financially hard. (Araceli) was very patient in walking me through the website and telling me what steps I needed to go through. I really appreciate it!"

"Logan took great care to respect HIPAA laws and pointed me in the right direction [to get documents submitted as needed]."

"Janell was really attentive, and I feel like she really heard me ... I get panicked regarding my health care problems, and when I do, I just have to remember to call Partnership."

## A Quarter Century of Partnership

PHC will celebrate its 25th anniversary in 2019! We began operations in May 1994 as an outgrowth of a local group, the Solano Coalition for Better Health. The coalition was formed in 1988 to address the problem of health care access for Solano County's growing number of medically uninsured and underserved. PHC expanded into Napa County in 1998, Yolo County in 2001, Sonoma County in 2009, Marin and Mendocino counties in 2011, and another eight counties (Del Norte, Humboldt, Lake, Lassen, Modoc, Shasta, Siskiyou, and Trinity) in 2013. Today, PHC serves over 550,000 members. In the coming months, we will take time to mark our 25-year milestone. We plan to reflect on the PHC journey, honor the partners who helped us grow into what we are today, and

look forward to what the next 25 years will bring.

In this photo, circa 1995-96, a team including three employees who are still with PHC – Alina Cardoza, left, Liz Gibboney (second from left), and Mary Kerlin (back right) – stuffs envelopes with quality payments to be sent to top-performing providers. The Quality Improvement Program continues today, but the envelope-stuffing process has become a bit more sophisticated.



### **Looking Ahead: Important Initiatives**

Some key areas we've been focusing on in 2018 and will keep as top priorities in 2019:

HEDIS Scores: HEDIS stands for Healthcare Effectiveness
Data Information Set. It is a library of performance measures
developed by the National Committee for Quality Assurance.
These measures help ensure we are offering quality preventive
and disease care management services to our members and
allow us to identify areas on which to focus our efforts. The
Department of Health Care Services selects a subset of these measures and
holds us accountable for our performance compared to other Medi-Cal health
plans, as well as to national benchmarks. We will continue to work on multiple
fronts to improve quality and thus boost our scores

California Children's Services/Whole Child Model: Starting January 1, 2019, PHC members who now receive CCS care from their county will get these services through PHC's Whole Child Model (WCM) program. PHC will manage both CCS care and Medi-Cal covered care for these members with special health care needs. We have formed two committees, the Family Advisory Committee and the Pediatric Quality Committee to offer input and guidance on this transition and in the future.



**New Core Claims System:** We are undertaking the huge job of replacing our claims/eligibility system. We started with a field of about 20 vendors and have been narrowing that down based on cost, technologies used, integration with our other systems, and many other factors. We have a 24-person project team, with every department represented, to ensure a smooth transition and completion of this multi-year endeavor.



# Finance Update: Fiscal Year 2017-18

At PHC, we are committed to ensuring that our resources are focused on providing quality care to each and every one of our members. Financial stewardship is one of our guiding principles and is reflected in the fact that our administrative expenses remain low, at just over 4 percent. Roughly 95 cents of every dollar PHC receives from the state goes to health care costs.

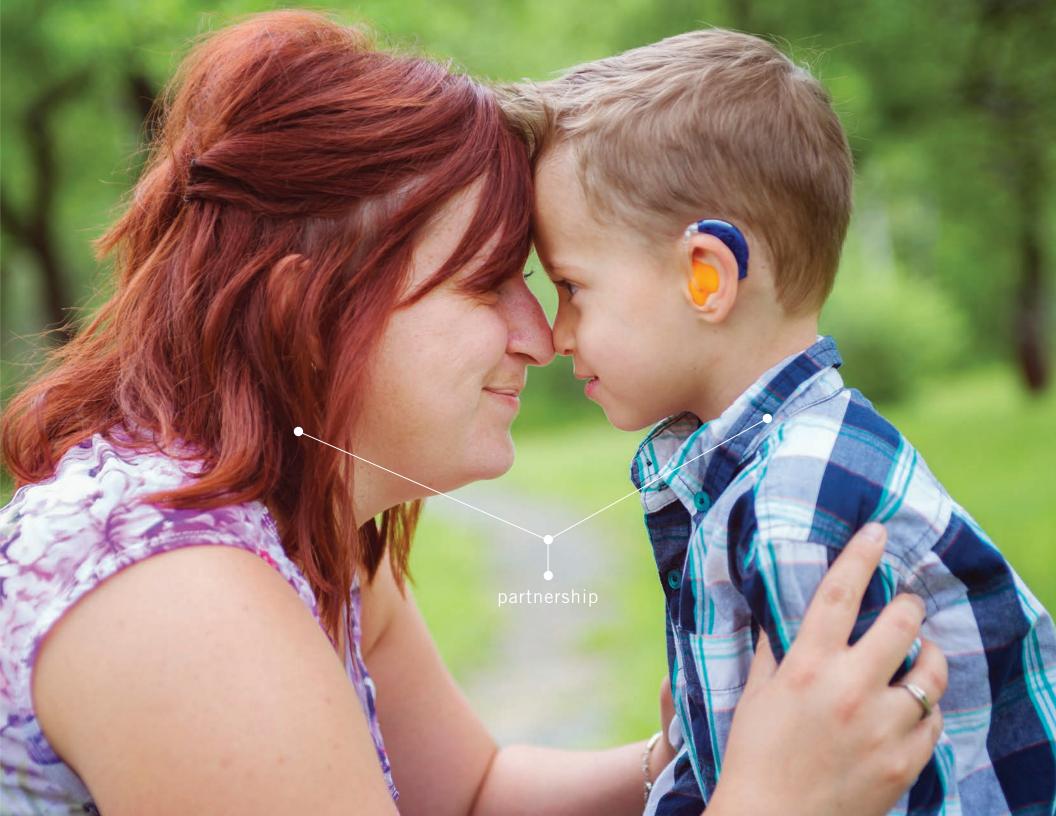
#### **HEALTH CARE EXPENDITURES**

| CATEGORY   | AMOUNT          |
|--|-----------------|
| Fee for service hospital, physician, and other costs | \$1.27 billion  |
| Capitated physician, hospital, and other costs       | \$493.7 million |
| Long-term care                                       | \$312.1 million |
| Pharmacy   | \$268.2 million |
| Quality Improvement Program                          | \$87.1 million  |
| TOTAL HEALTH CARE EXPENDITURES                       | \$2.43 billion  |









#### **Board of Commissioners**

Jonathon Andrus, Fairchild Medical Center

Aimee Brewer, NorthBay Healthcare

Lewis Broschard, M.D., Sutter Medical Group

Mary Kay Brooks, Kaiser Foundation Hospital

Tammy Moss Chandler, Mendocino County Health and Human Services Agency

Paula Cohen, Retired

Grant Colfax, M.D., Marin County Health and Human Services

Greta Elliott, I'SOT Inc. dba Canby Family Practice Clinic

Donnell Ewert, Shasta County Health and Human Services Agency

Richard Fogg, Retired

Robert Gardner, M.D., Lucerne Community Clinic

Letty Garza, Trinity County Health and Human Services

Dean Germano, Shasta Community Health Center

Alicia Hardy, Ole Health

Randall Hempling, Board Chair

Gerald Huber, Solano County Health and Social Services

Dave Jones, Mountain Valleys Health Centers

Karen Larsen, Yolo County Health and Human Services Agency

Viola Lujan, La Clínica de La Raza

Sarada Mylavarapu, M.D., Dignity Health - Woodland Memorial Hospital

Joy Newcom-Wade, Consumer

LaSonja Porter, Consumer

Mitesh Popat, M.D., Marin Community Clinic

Kathryn Powell, Petaluma Health Center

Barbie Robinson, Sonoma County Department of Health Services

Heather Snow, Del Norte Department of Health and Human Services

Cheyenne Spetzler, Open Door Community Health Center

Nancy Starck, Humboldt County Department of Health and Human Services

Kim Tangermann, Lakeview Health Center

Allan Yamashiro, Sutter Davis Hospital



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