



CalOptima Health Seeks Candidates to Participate on its Provider Advisory Committee

The CalOptima Health Board of Directors welcomes input and recommendations from the provider community regarding issues concerning CalOptima programs. For this reason, the CalOptima Health Board encourages providers to become involved through an advisory group known as the **Provider Advisory Committee (PAC)**.

The PAC advises the CalOptima Health Board of Directors and staff. The committee is composed of 15 members representing diverse provider constituencies. These include, but are not limited to, health plans, hospitals, physicians, nurses, allied health professionals, long-term care services and community health centers. The committee's charge is to:

- Provide advice and recommendations to the CalOptima Health Board on issues concerning CalOptima Health programs as directed by the CalOptima Board
- Engage in study, research and analysis of issues assigned by the Board or generated by the committee
- Serve as a liaison between interested parties and the Board
- Assist the Board in obtaining public opinion on issues relating to CalOptima Health programs
- Initiate recommendations on issues for study to the CalOptima Health Board for their approval and consideration
- Facilitate community outreach for CalOptima Health and the Board

At this time, CalOptima Health is seeking candidates to participate on the PAC. **Service on the PAC is voluntary, with no salary.** The following seat is available to fulfill an existing term:

- **Allied Health Services Representative**

The committee encourages interested individuals with knowledge and support of Medi-Cal and Medicare programs to apply. To apply or to nominate an individual for the PAC, please mail, fax or email the attached candidate application along with a **biography or resume** and **two letters of reference** to:

CalOptima Health
Attn: Cheryl Simmons
505 City Parkway West
Orange, CA 92868

Fax: 714-571-2479 or email: csimmons@caloptima.org

For any questions, please call Cheryl Simmons at **714-347-5785**.



Provider Advisory Committee Application

Instructions: Please answer all questions. You may write or type your answers. Please use a separate sheet if necessary. Please attach a resume or biography outlining your qualifications and signed disclosure forms. If you have any questions regarding the application, please call Cheryl Simmons at 714-347-5785.

Name: _____ Work Phone: _____
Address: _____ Cell Phone: _____
City, State, ZIP: _____ Fax: _____
Email: _____ Date: _____

I hereby submit my application for the following Provider Advisory Committee (PAC) seat, and I understand that service on the PAC is on a voluntary basis:

☐ **Allied Health Services Representative**

Current position and tenure (i.e., employee, student, volunteer, retired or agency).

Education and/or licenses (if applicable):

What is your direct or indirect experience working with the CalOptima Health population you wish to represent on the PAC? Please include any relevant community experience.

Explain your ability and specific plan to reach out for input and communicate with the CalOptima Health population you would represent on the PAC (i.e., primary professional/trade association(s), stakeholder involvement, etc.).

Please list similar committees on which you have served or describe your ability to collaborate in a multidisciplinary way.

What is your understanding, experience and familiarity with the diverse cultural community in Orange County?

What is your current understanding and experience with CalOptima Health programs?

Please explain why you wish to serve on the PAC and how you might uniquely contribute to this advisory committee on behalf of all CalOptima Health members.

Please specify which of CalOptima's threshold languages you speak fluently:

☐ English ☐ Spanish ☐ Vietnamese ☐ Farsi ☐ Korean ☐ Chinese ☐ Arabic

Please submit two letters of recommendation along with a biography or resume with this application.

- 1) Professional
- 2) Community or Personal

Name: _____

Relationship: _____

Address: _____

City, State, ZIP: _____

Phone: _____

Email: _____

Name: _____

Relationship: _____

Address: _____

City, State, ZIP: _____

Phone: _____

Email: _____

If selected, are you able to commit to attend all regularly scheduled PAC meetings and volunteer to serve on at least one subcommittee? ☐ Yes ☐ No

Do you agree that you will advocate on behalf of all CalOptima Health members and/or providers during your service on the PAC? ☐ Yes ☐ No

If selected as a representative on PAC, do you agree that you will complete the required compliance courses within the appointed time frame? ☐ Yes ☐ No

All advisory committee representatives are appointed by the CalOptima Health's Board of Directors and are subject to the CalOptima Health's Code of Conduct.

Public Records Act Notice

Under California law, this form, the information it contains and any further information submitted with it, such as biographical summaries and resumes, are public records, with the exception of your address, email address and telephone numbers, and the same information of any references provided. These documents may be presented to the Board of Directors for their consideration at a public meeting, at which time they will be published, with the contact information removed, as part of the board materials that are available on CalOptima Health's website, and even if not presented to the Board, will be available on request to members of the public.

Signature

Date

Submit this application along with a biography or resume and your two reference letters to:

CalOptima Health
505 City Parkway West
Orange, CA 92868
Attn: Cheryl Simmons

Phone: 714-347-5785 Fax: 714-571-2479 Email: csimmons@caloptima.org

PAC Position Description

Allied Health Services

Position Description

- Current experience collaborating with, and ability to reach out, seek input and represent; independent, non-hospital, non-network allied providers, such as:
 - Ambulatory surgery centers
 - Audiology
 - Certified Acupuncturist
 - Chronic Dialysis Center
 - Dialysis providers
 - Dispensing Opticians
 - DME providers
 - Emergency Transportation
 - Exempt from Licensure Clinics
 - Family planning centers
 - Hearing Aid Dispensers
 - Home health providers
 - Home infusion providers
 - Hospice
 - Laboratory
 - Non-emergency transportation (NEMT) providers
 - Occupational therapists
 - Physical therapists
 - Podiatrists
 - Portable X-ray Lab
 - Prosthetics
 - Psychologists
 - Radiation therapy centers
 - Radiology
 - Rehabilitation Clinics
 - Respiratory Care Practice
 - Speech Therapist
 - Surgery Clinics
- When license or credential is required, applicant must have active CA license/credential as appropriate
- Preferred for applicant to belong to appropriate professional/trade association(s)
- Knowledge of managed care systems and CalOptima Health programs
- Minimum three years of experience as a provider for CalOptima Health or representing CalOptima Health providers directly
- Understanding and familiarity with the diverse cultural and/or social environments of Orange County including Limited English Proficiency, Black, Indigenous and People of Color, LGBTQ+ and other underserved members
- Availability and willingness to attend regular, special and ad hoc PAC meetings
- All appointments to the committee will be appointed by the CalOptima Health Board and are subject to OIG/GSA verification and possible background checks