

# CDN Sacramento Community Advisory Committee (CAC) Meeting Minutes

**Contractor:** California Dental Network (CDN)

**Meeting:** Sacramento Community Advisory Committee (CAC)

**Date:** March 12, 2026

**Time:** 12:00 PM – 1:30 PM PT

**Location:** Microsoft Teams (Recorded and Transcribed)

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## Purpose of the Community Advisory Committee

The Sacramento County Community Advisory Committee (CAC) serves as a forum for community members, providers, and stakeholders to provide input to inform program planning and oversight and to support equitable access to oral health services across the service area. The Community Advisory Committee (CAC), discusses member benefits and support services, provides clinical and program updates, reviews oral health population needs assessment findings, and gathers feedback from providers and community stakeholders.

## Agenda

Time	Agenda Item	Presenter
12:00 – 12:10 PM	Call to Order	Dr. Katrina Eagilen, Chief Oral Health Access Officer
12:10 – 12:20 PM	Introduction of Attendees (CDN and Community)	Anne Peres, CAC Coordinator
12:20 – 12:30 PM	Member Benefit Spotlight	Dr. Katrina Eagilen Chief Oral Health Access Officer
12:30 – 12:40 PM	Clinical Updates	Dr. Santosh Sundaresan, Dental Director
12:40 – 12:55 PM	Oral Health Population Needs Assessment Update	Dr. Katrina Eagilen Chief Oral Health Access Officer
12:55 – 1:10 PM	Open Forum: Member Concerns, Navigation, Community Events	Dr. Katrina Eagilen Chief Oral Health Access Officer
1:10 PM	Next Meeting / Adjournment	Dr. Katrina Eagilen Chief Oral Health Access Officer

## Attendees

Name
Anne Peres -DentaQuest/CDN
Dr. Katrina Eagilen- DentaQuest/CDN
Neelam Singh-Well Space Health
Elsie Vaughn Smith- Well Space Health
Dr. Jordan Gaddis – DentaQuest/CDN Provider
Dr. Sandra Nnodim – DentaQuest/CDN Provider
Aldamar R.- Spanish Interpreter
Savannah Robinson -Anthem
Laura Valle – DentaQuest/CDN Provider Partner

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## Call to Order

The meeting was called to order at approximately 12:14 PM PT. Meeting purpose, recording notice, and CAC charge were reviewed.

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## Introductions

Participants introduced themselves and their roles. Attendees represent community dental centers, private dental practices, dental plan community relations, and language access services.

- Dr. Eagilen outlined the role of the Community Advisory Committee (CAC), emphasizing its function as a platform for members, providers, and stakeholders, and others—to share experiences, provide input on oral health services, and advise on program priorities and improvements.
  - Committee Role and Input: Dr. Eagilen explained that the CAC is designed to gather insights from members, providers, and community stakeholders to inform service delivery, reduce disparities, and support fair care. The committee is expected to provide advice on oral health education, outreach programs, marketing materials, community resources, and quality initiatives.
  - Areas of Committee Focus: The committee is tasked with advising on culturally appropriate services, member satisfaction surveys, population health management, delivery system reforms, health outcomes improvements, care coordination, and oral health access.
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## Member Benefit Spotlight

Dr. Eagilen described key member benefits—including transportation to dental appointments, interpreter services, and care coordination/case management clarifying scheduling procedures and eligibility, with questions from Elsie Vaughn Smith and Savannah Robinson of Well Space addressed during the discussion.

- Transportation Services – Free transportation is available for members and may be scheduled by members or providers by calling customer service.
- Interpreter Services – Interpreter services are available at no cost (virtual, telephonic, and in-person for special situations). Providers may request interpreter services for patients, including assistance identifying language needs.
- Care Coordination and Case Management – Eligible members may receive care coordination or case management and are identified through the Oral Health Information Form (OHIF).

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## Clinical Updates

Clinical updates included information regarding Dental Home assignments, Indian Health Care Facility access, periodontal treatment guidance for Members with special-needs, and Medi-Cal eligibility considerations for Members with Unsatisfactory Immigration Status.

- Member Assignment – Members may choose any participating in-network primary care dentist. Members may also receive care from any in-network provider; once preventive services are provided and claims submitted, assignment can be updated automatically.
- Indian Health Care Facility (IHCF) Access – Members may access IHCF clinics; clinics may bill for services provided to members even if credentialing is still in progress.
- Periodontal Treatment for Special Needs – DentaQuest follows Manual of Criteria periodontal frequency guidelines. Providers may request additional periodontal services by submitting appropriate documentation with claims.
- Unsatisfactory Immigration Status (UIS) Coverage – After July 1, 2026, full-scope Medi-Cal coverage will be limited to UIS members under age 19; children under 19, pregnant individuals up to one year postpartum, and foster youth up to age 26 remain eligible regardless of immigration status. UIS was clarified as individuals without legal immigration documentation.

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## Oral Health Population Needs Assessment – Sacramento County

Dr. Katrina Eagilen presented a summary of findings from the Sacramento County Population Needs Assessment, including member demographics, language distribution, utilization gaps, and Oral Health disparities. CAC members were invited to support outreach and access improvement strategies.

- The member base in Sacramento County is over 70,000, with the largest age group being 19–44 years. The population is ethnically diverse, with 27% Hispanic, 22% white, 15% African, 14% Pacific Islander, and 23% not designated. Primary languages are English (81%) and Spanish (12%).
- Dental Visit and Preventive Care Gaps – Annual dental visit rates are below 18% across all age groups, with the lowest rates in the 0–1 and 19–20 age groups. 86% of adults and nearly 70% of children had no dental visit in the past six months; 90% of adults had no preventive care, and less than 1% received fluoride treatments.
- Children’s Preventive Care and Disparities – 22% of children had no preventive care in the past six months, with the lowest rates in the 0-1 age

group and adolescent group. Over half of eligible children lacked sealants, and 90% of children aged 0–6 did not receive the caries risk bundle.

- Additional Challenges Identified: The assessment revealed increases in emergency room visits for dental issues among children and adults, insufficient operating room access, unreliable kindergarten oral health assessments, higher risk among children at 200% of the federal poverty level, and lack of oral health services for patients in substance use care.
  - Next Steps – A qualitative follow-up (focus groups, surveys, interviews) with members, stakeholders, and providers was described to better understand barriers; some of these activities will be implemented at the next CAC meeting.
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## Community Events and Outreach

Upcoming outreach events were shared. Savannah shared details about upcoming community events.

- Multicultural Health and Resource Fair on April 18 and the
  - High Blood Pressure Education Month Health and Resource Fair on May 23.
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## Open Forum

- Anne Peres facilitated an open forum where Elsie Smith-Well Space Health, Neelam Singh-Well Space Health, and Savannah Robinson-Anthem raised questions about patient assignments, communication issues, and community events, with Dr. Eagilen, Dr. Sundaresan, and Laura Valle-DentaQuest Provider Partner addressed concerns and agreed to follow up as needed.
    - Patient Assignment to Locations: Elsie inquired about increasing patient assignments to new and existing Well Space Health locations, particularly in Roseville. Dr. Eagilen and Dr. Sundaresan confirmed that all providers are credentialed and agreed to follow up with Laura, the Provider Partner, to address assignment distribution.
    - Communication About Reassignment: Neelam Singh of Well Space reported that some patients were told they would be reassigned to another organization after July, causing confusion. Laura Valle, the DentaQuest Provider Partner, clarified that this was not the case, and Dr. Sundaresan committed to further follow-up to ensure accurate communication.
    - Transportation Scheduling Clarification: Elsie asked whether transportation scheduling is based on zip code or time length. Dr. Eagilen confirmed that the team would provide detailed information on scheduling requirements. This has been added as an action item for the next meeting.
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## Action Items

Action Item	Responsible Party
<ul style="list-style-type: none"> <li>Transportation Scheduling Guidelines: Follow up and provide the exact required advance notice timeframe for scheduling transportation for members, as requested during the meeting, in the meeting post notes.</li> </ul>	DentaQuest/CDN
<ul style="list-style-type: none"> <li>Patient Assignment for New Locations: Investigate and address the request for increased patient assignments to Well Space Health's new Roseville (Placer County) location and other credentialed sites, coordinating with Laura (DentaQuest Provider Partner) as needed.</li> </ul>	DentaQuest/CDN
<ul style="list-style-type: none"> <li>Patient Reassignment Communication: Connect with Laura to confirm and clarify the situation regarding patients being told they would be reassigned to another organization after July, and ensure accurate information is communicated to Well Space Health staff.</li> </ul>	DentaQuest/CDN
<ul style="list-style-type: none"> <li>Customer Service Number Requested <b>833-479-1984, TTY/TDD 711</b></li> </ul>	DentaQuest/CDN

## Adjournment

The meeting adjourned at approximately 1:01 PM PT.