



## COUNTY OF SONOMA

575 ADMINISTRATION  
DRIVE, ROOM 102A  
SANTA ROSA, CA 95403

### SUMMARY REPORT

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**Agenda Date:** 7/27/2021

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**To:** Board of Supervisors of Sonoma County  
**Department or Agency Name(s):** Department of Health Services  
**Staff Name and Phone Number:** Tina Rivera, 565-4774  
**Vote Requirement:** Majority  
**Supervisory District(s):** Countywide

**Title:**

Partnership HealthPlan of California Commission Appointment

**Recommended Action:**

Adopt a resolution appointing Tina Rivera, Interim Health Services Director, to the Partnership HealthPlan of California Commission.

**Executive Summary:**

This item requests Board adoption of a resolution appointing Tina Rivera, Interim Health Services Director, to the Partnership HealthPlan of California Commission. Per Sonoma County Code, Chapter 34 - County Organized Health System, one of the four Sonoma County representatives on the Partnership HealthPlan of California Commission is to be the Health Services Director or designee.

**Discussion:**

Partnership HealthPlan of California Commission is a multi-county commission that provides for a managed healthcare plan for Medi-Cal recipients. Implementation of a county organized health system is authorized by Welfare and Institutions Code Section 14087.54. In September 2009 the Board of Supervisors of Sonoma County approved an ordinance adding Chapter 34 to the Sonoma County Code, authorizing the County to join the Commission.

The Partnership HealthPlan of California Commission is comprised of representatives from Del Norte, Humboldt, Lake, Lassen, Modoc, Marin, Mendocino, Napa, Solano, Shasta, Siskiyou, Sonoma, Trinity, and Yolo counties and provides coverage to over 510,000 Medi-Cal enrollees, including over 100,000 current Medi-Cal enrollees in Sonoma County.

The number of per-county Commission member seats is based upon the number of Medi-Cal beneficiaries within each county. There are currently 36 Partnership HealthPlan of California Commission members with per-county seats as follows: Del Norte (1), Humboldt (3), Lake (2), Lassen (1), Modoc (1), Marin (3), Mendocino (3), Napa (3), Solano (4), Shasta (4), Siskiyou (2), Sonoma (4), Trinity (1), and Yolo (4).

The Sonoma County Board of Supervisors is responsible for appointing members to the Commission based on the selection process and criteria specified in Chapter 34.

One Commission member is to be the Director of the Sonoma County Department of Health Services or designee. The Department requests the Board of Supervisors appoint Tina Rivera, Interim Director of Health Services, to serve in this capacity. The table below provides a complete list of Sonoma County Partnership

HealthPlan of California Commission representatives.

Sonoma County Partnership HealthPlan of California Commission Representation

<b>Name</b>	<b>Representation</b>	<b>On Commission Since</b>
Mary Kay Brooks	Hospital Representative	May 22, 2018
Tina Rivera	Sonoma County Director of Health Services	May 21, 2021 (new appointment)
Kathryn Powell	Clinic Representative	May 22, 2012
Cathryn Couch	Public Representative	January 1, 2021

**Prior Board Actions:**

On December 15, 2020 the Board adopted a resolution reappointing Cathryn Couch to the Partnership HealthPlan of California Commission for the four-year term of January 1, 2021 through December 31, 2024.

On November 10, 2020 the Board adopted a resolution re-appointing Barbie Robinson, Health Services Director, to the Partnership HealthPlan of California Commission for the four-year term of November 15, 2020 through November 14, 2024.

On June 9, 2020 the Board adopted a resolution reappointing Kathryn Powell to the Partnership HealthPlan of California Commission for the four-year term of May 22, 2020 through May 21, 2024.

On May 22, 2018 the Board adopted a resolution appointing Mary Kay Brooks to the Partnership HealthPlan of California Commission for the term of May 22, 2018 through May 21, 2022.

**FISCAL SUMMARY**

<b>Expenditures</b>	<b>FY 21-22 Adopted</b>	<b>FY 22-23 Projected</b>	<b>FY 23-24 Projected</b>
Budgeted Expenses			
Additional Appropriation Requested			
<b>Total Expenditures</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Funding Sources</b>			
General Fund/WA GF			
State/Federal			
Fees/Other			
Use of Fund Balance			
Contingencies			
<b>Total Sources</b>	<b>0</b>	<b>0</b>	<b>0</b>

**Narrative Explanation of Fiscal Impacts:**

There are no fiscal impacts associated with this item.

<b>Staffing Impacts:</b>
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<b>Position Title (Payroll Classification)</b>	<b>Monthly Salary Range (A-I Step)</b>	<b>Additions (Number)</b>	<b>Deletions (Number)</b>

**Narrative Explanation of Staffing Impacts (If Required):**

N/A

**Attachments:**

Attachment 1 - Resolution

**Related Items “On File” with the Clerk of the Board:**

None