



**REGULAR MEETING OF THE GOVERNING BOARD
OF THE
INLAND EMPIRE HEALTH PLAN**

September 9, 2024 - 9:00 AM

Board Report #352

**Dr. Bradley P Gilbert Center for Learning and Innovation
9500 Cleveland Avenue - Board Room
Rancho Cucamonga, CA 91730**

If disability-related accommodations are needed to participate in this meeting, please contact Annette Taylor, Secretary to the IEHP Governing Board at (909) 296-3584 during regular business hours of IEHP (M-F 8:00 a.m. – 5:00 p.m.)

PUBLIC COMMENT AT INLAND EMPIRE HEALTH PLAN GOVERNING BOARD MEETINGS:

The meeting of the Inland Empire Health Plan Governing Board is open to the public. A member of the public may address the Board on any item on the agenda and on any matter that is within the Board's jurisdiction at the time of the meeting when the item listed on the agenda is called. Each speaker should begin by identifying themselves for the record and announce any contributions in excess of \$250.00 made by them or their organization in the past twelve (12) months to any IEHP Governing Board member as well as the name of the Governing Board member who received contribution. In order to keep track of speakers and to be able to notify the Board of any speakers on a particular agenda item, a speaker slip is requested to be completed and provided to the Board Secretary by the commencement of the public meeting and no later than the time the agenda item has been called so that you may be recognized by the Board to speak. The Board may limit the public input on any item, based on the number of people requesting to speak and the business of the Board.

All public record documents for matters on the open session of this agenda can be viewed at the meeting location listed above, IEHP main offices at 10801 6th Street, Suite 120, Rancho Cucamonga, CA 91730 and online at <http://www.iehp.org>.

Any member of the public may observe the scheduled proceedings by using the information listed below

<https://youtube.com/live/G3Vbn8fuoRc?feature=share>

AGENDA

- I. Call to Order
- II. Pledge of Allegiance
- III. Roll Call
- IV. Changes to the Agenda
- V. Public Comments on Matters on the Agenda

AGENDA

VI. Conflict of Interest Disclosure:

Please note that Board members who also serve as a member of a legislative body of another public entity, such as San Bernardino County or the County of Riverside, does not by itself constitute a disqualifying conflict of interest that would prevent such members from participating on matters appearing on the agenda for the Inland Empire Health Plan or IEHP Health Access despite their affiliation with both public entities.

VII. Adopt and Approve of the Meeting Minutes from the August 9, 2024 Regular Meeting of the Governing Board of the Inland Empire Health Plan

VIII. CONSENT AGENDA

ADMINISTRATION (Jarrod McNaughton)

1. Ratify and Approve Amendment 02 to the Local Initiative Primary Contract (#23-30225) with the California Department of Health Care Services
2. Approve the Designation of Negotiators on Behalf of Inland Empire Health Plan for the Potential Sale and Purchase of Real Property Located at 10769 Hole Avenue, Riverside, California
3. Delegation of Authority to Approve the First Amendment to the Professional Services Agreement with the County of Riverside Department of Public Social Services.
4. Delegation of Authority to enter into a Funding Agreement with Riverside County Medical Association and San Bernardino County Medical Society

FINANCE DEPARTMENT (Keenan Freeman)

5. Approve the Maintenance and Repair Services Agreement with Action Door Repair
6. Approve the Public Works Contract with New Tangram LLC
7. Approve the Public Works Contract with Phillips Draperies and Curtains, Inc.
8. Approve the First Amendment to the Professional Services Agreement with Health Management Associates, Inc.

HEALTH SERVICES DEPARTMENT (Takashi Wada, M.D.)

9. Approve the Memorandum of Understanding with Population Health Learning Center, A Project of The Tides Center

INFORMATION TECHNOLOGY DEPARTMENT (Vinil Devabhaktuni)

10. Approve Additional Funding for the Technical Support Services Renewal Order with Oracle America, Inc.

AGENDA

11. Approve the Award of Request For Proposal #23-05096 to, and Delegation of Authority to Approve Contractual Documents with, Cloud Technology Innovations, LLC d/b/a Healthcare Fraud Shield

OPERATIONS DEPARTMENT (Susie White)

12. Delegation of Authority to Approve the Sixth Amendment to the Professional Services Agreement with Deloitte Consulting LLP

PROVIDER CONTRACTING DEPARTMENT (Susie White)

13. Ratify and Approve the Enhancement Care Management Provider Agreement with Bridge Prenatal PC – Multiple Locations
14. Ratify and Approve the Agreement to Reinstate and Extend the Hospital Per Diem Agreement with Palo Verde Health Care District dba Palo Verde Hospital – Blythe
15. Ratify and Approval of the Standard Template
 - 1) Memorandum of Understanding – Provider Network Expansion Fund Program
16. Approval of the Evergreen Contracts
 - 1) El Mirador Medical Plaza Pharmacy Inc-Ancillary Agreement – Palm Springs
 - 2) Providence Medical Foundation-Enhancement Care Management Provider Agreement – Victorville
 - 3) Seventh Day Adventists Loma Linda University Medical Center dba Loma Linda University Faculty Pharmacy - Ancillary Agreement– Loma Linda
 - 4) Keck Medical Center of USC dba USC Kenneth Norris Jr Hospital -Hospital Per Diem Agreement -Los Angeles
 - 5) Keck Medical Center of USC dba Keck Hospital of USC -Hospital Per Diem Agreement – Los Angeles
 - 6) Galen Inpatient Physicians PC - Hospitalist Agreement – Modesto
 - 7) Jess Ranch Healthcare LLC dba Apple Valley Care Center – Skilled Nursing Facility Provider Agreement - Apple Valley
 - 8) Childrens Primary Care Medical Group Inc - Admitter Agreement– San Diego
 - 9) California Imaging & Diagnostic Medical Group Inc – Ancillary Agreement – Murrieta
 - 10) Gary Jeandron– Participating Provider Agreement - Behavioral Health – La Quinta
 - 11) Breathing Sol Inc– Participating Provider Agreement - Behavioral Health – Murrieta
 - 12) JDR Family Therapy Inc dba Equilibrium Counseling Services -Participating Provider Agreement - Behavioral Health – Rancho Cucamonga
 - 13) Kelly Sheline – Arellano dba Kelly Sheline - Arellano MS LMFT- Participating Provider Agreement - Behavioral Health - Murrieta
 - 14) Lloyd Alan Wager- Participating Provider Agreement - Behavioral Health – Corona
 - 15) Wandalyn Lane dba Insite -Participating Provider Agreement - Behavioral Health – San Bernardino
 - 16) Raimel Y Perez-Pasillao MD Inc– Open Access Agreement– Chino
 - 17) Rani Elias MD Inc- Open Access Agreement (Excluding Medicare)– Rancho Cucamonga

AGENDA

- 18) New Hope Medical Group A Professional Corp– Capitated Primary Care Provider Agreement– Corona
- 19) Benacare Medical Center– Capitated Primary Care Provider Agreement (Medicare Only) – Upland
- 20) Comprehensive Medical Center Inc dba Clinica Medica Comunidad– Capitated Primary Care Provider Agreement (Medicare Only)– Pomona
- 21) California Care Medical Group Inc– Participating Provider Agreement – QASP - San Bernardino
- 22) Grove Internal Medicine Inc– Capitated Primary Care Provider Agreement (Excluding Medicare) – Rancho Cucamonga
- 23) Jasmine L Ramos MD dba Jasmine L Ramos MD PC- Capitated Primary Care Provider Agreement (Excluding Medicare) – Palm Desert
- 24) Anabi Medical-Fee-For-Service Primary Care Provider Agreement -Pomona
- 25) Afua Bema Isoken Khumalo dba Apple Red Nutrition Services- Participating Provider Agreement - Specialist – San Bernardino
- 26) Executive Mental Health Inc - Skilled Nursing Facility Attending Physician Agreement - Behavioral Health – Los Angeles
- 27) Aleida Gordon dba Saude Consulting Services LLC- Participating Provider Agreement – Specialist- Victorville
- 28) California Vascular Center -Participating Provider Agreement – Specialist -Apple Valley
- 29) Elber S Camacho-Participating Provider Agreement – Specialist- Palm Springs
- 30) Homan A Zadeh MD MPH Inc- Participating Provider Agreement – Specialist -Palm Springs
- 31) Hussain Al Darsani MD Inc– Participating Provider Agreement – Specialist – Chino
- 32) J Robert Evans MD PC - Participating Provider Agreement – Specialist – San Bernardino
- 33) Med Ped ID Inc- Participating Provider Agreement – Specialist – Murrieta
- 34) Platinum Digestive Health - Participating Provider Agreement – Specialist – Rancho Cucamonga
- 35) The Neuron Clinic GP - Participating Provider Agreement – Specialist – Murrieta
- 36) Yasser A Slayyeh MD FACC A Medical Corporation - Participating Provider Agreement – Specialist- San Bernardino

IX. POLICY AGENDA AND STATUS REPORT ON AGENCY OPERATIONS

ADMINISTRATION (Jarrod McNaughton)

17. Chief Executive Officer Update

FINANCE DEPARTMENT (Keenan Freeman)

18. Review of the Monthly Financials

- X. Comments from the Public on Matters not on the Agenda
- XI. Board Member Comments

AGENDA

XII. Closed Session

1. With respect to every item of business to be discussed in closed session pursuant to Government Code Section 54956.8:

Conference with Real Property Negotiators

Property: 10769 Hole Avenue, Riverside, CA

Agency Negotiator(s): Jarrod McNaughton, Chief Executive Officer
Keenan Freeman, Chief Financial Officer
Jack Mansour, Vice President, Property Management, and
Development
Tom Pierik, Lee & Associates

Negotiating Party: Dave Mudge, Reid Sisson, and Lindsay Mingee, Lee & Associates
Under negotiation: Instruction to negotiator(s) concerning price and terms of payment

2. With respect to every item of business to be discussed in closed session pursuant to California Government Code Section 54956.9:

Conference with Legal Counsel-Anticipated Litigation: Initiation of litigation pursuant to subdivision (d)(4) of Government Code Section 54956.9:

- a. One potential case

XIII. Adjournment

The next meeting of the IEHP Governing Board will be held on October 7, 2024, at the Dr. Bradley P. Gilbert Center for Learning and Innovation in Rancho Cucamonga.

ADMINISTRATION

1. RATIFY AND APPROVE AMENDMENT 02 TO THE LOCAL INITIATIVE PRIMARY CONTRACT (#23-30225) WITH THE CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

Recommended Action:

That the Governing Board of the Inland Empire Health Plan (IEHP) ratify and approve Amendment 02 to the Local Initiative Primary Contract (#23-30225) with the California Department of Health Care Services (DHCS) for the provision of Medi-Cal Health Plan Services effective January 1, 2024.

Contact:

Jarrold McNaughton, Chief Executive Officer

Background:

In March 1993, DHCS issued a State Strategic Plan for Medi-Cal Managed Care (Strategic Plan). The Strategic Plan was designed to transfer the delivery of care for the majority of the Medi-Cal population from a predominantly fee-for-service payment system to a capitated managed care system. Riverside and San Bernardino counties were designated as two (2) of the 12 counties in the State to initiate the Medi-Cal Managed Care Program.

Riverside and San Bernardino counties are organized as a Two-Plan Model Managed Care Program. In Two-Plan Model counties, there is a Local Initiative (county organized) and a Commercial Plan in which DHCS contracts with both health plans. IEHP is the Local Initiative Medi-Cal Managed Care Health Plan and Molina Healthcare is the Commercial Plan in Riverside and San Bernardino counties. As of January 1, 2024, Kaiser Permanente is also present in the counties as an Alternative Health Care Service Plan. These health plans provide the Medi-Cal population freedom of choice in selecting medical services. They also allow for competition between the two (2) systems in terms of services and cost.

Each Plan in the Two-Plan Model Managed Care Program entered into a contract with DHCS in order to receive funds from the State to provide health care services to the Medi-Cal population.

In December 2023, IEHP received the new Primary Contract with DHCS for Medi-Cal Health Plan Services. DHCS issued a new Primary Contract to reflect a more rigorous contract that holds health plans to new standards of care and greater accountability in order to ensure Medi-Cal Members have the care and support they need. The parties agree to comply with the terms and conditions to provide health care services to eligible Medi-Cal recipients within the scope of Medi-Cal benefits as defined in the contents of the Primary Contract. The term of the Primary Contract is from January 1, 2024, through December 31, 2024.

The First Amendment to the Primary Agreement was approved in April 2024 under Minute Order 24-050 and incorporated updated Calendar Year 2024 Capitation Payment rates for both Riverside and San Bernardino counties.

Discussion:

This Amendment incorporates changes and new requirements for Medical Loss Ratio, Network Provider Agreements, Enhanced Care Management, Population Needs Assessment, Justice Involved Reentry & Coordination, Transitional Care Services, Federally Qualified Health Center Alternative Payment Model Risk Corridor, Unsatisfactory Immigration Status Risk Corridor, and Data Sharing that had previously been put into requirements from DHCS through All Plan Letters, Policy Guides and other communications.

The term of this Agreement in its entirety is January 1, 2024, through December 31, 2024. All other items and conditions of the Agreement remain in full force and effect.

Fiscal Impact	Financial Review	Procurement Review	Reviewed by Counsel	Director Approval	Chief Approval
None	K. Robbins N/A 7/30/2024	C. Goss N/A 7/30/2024	M. Popka 8/23/24	L. Nery 7/31/2024	S. White 08/13/2024

ADMINISTRATION

2. APPROVE THE DESIGNATION OF NEGOTIATORS ON BEHALF OF INLAND EMPIRE HEALTH PLAN FOR THE POTENTIAL SALE AND PURCHASE OF REAL PROPERTY LOCATED AT 10769 HOLE AVENUE, RIVERSIDE, CALIFORNIA

Recommended Action:

That the Governing Board of the Inland Empire Health Plan (IEHP) approve the designation of the Chief Executive Officer, Chief Financial Officer, Vice President of Property Management and Development, and Lee & Associates (real estate broker) as IEHP's negotiators to engage the owner for the sale and purchase of real property located at 10769 Hole Avenue, Riverside, California.

Contact:

Jarrold McNaughton, Chief Executive Officer

Background:

IEHP seeks to acquire real property located at 10769 Hole Avenue, Riverside, CA 92505 and designate the Chief Executive Officer, Chief Financial Officer, Vice President, Property Management and Development, and Lee and Associates, IEHP's appointed real estate broker, to negotiate the transaction on behalf of IEHP. The property is owned by River Pointe One LLC and negotiations will be conducted between IEHP's negotiators and another broker team at Lee and Associates on behalf of River Pointe One LLC, representatives of the owner of the property.

Discussion:

IEHP seeks to pursue this real estate acquisition for the following reasons:

- To upgrade the existing 7,559 square foot Riverside Community Wellness Center ("CWC") under leasehold obligation in a retail center with a larger 37,601 square foot IEHP-owned facility to allow for better flexibility and presence in serving the needs of our members in the community.
- Increased size allows for more robust programming to better serve the Riverside community including space to provide to IEHP's immigrant and minority serving CBO Partners to allow for multiple needs to be served in a single location. The goal is that those who participate in CWC programs and services will improve overall health and wellness, as well as improve their healthcare experience.
- Easy to reach location with public transit stops for both eastbound and westbound buses directly adjacent on Hole Ave. The relocation also provides easier access for many members with over 10,000 members living within a 1-mile radius of this location.
- Owning the facility versus leasing allows for the longer amortization of up-front improvement costs versus a fixed time-period lease as well as increased flexibility for programming with the potential use of outdoor space.

Fiscal Impact	Financial Review	Procurement Review	Reviewed by Counsel	Director Approval	Chief Approval
None	N/A	N/A	A. Wang 08/20/24	J. Mansour 08/15/24	J. McNaughton 08/16/24

Reviewed by Counsel:

N/A

ADMINISTRATION

3. DELEGATION OF AUTHORITY TO APPROVE THE FIRST AMENDMENT TO THE PROFESSIONAL SERVICES AGREEMENT WITH THE COUNTY OF RIVERSIDE DEPARTMENT OF PUBLIC SOCIAL SERVICES

Recommended Action:

That the Governing Board of the Inland Empire Health Plan (IEHP) authorize the Chief Executive Officer or his designee to negotiate and, after legal review and approval, sign the First Amendment to the Professional Services Agreement (Agreement) with the County of Riverside Department of Public Social Services (DPSS) for the provision of providing necessary labor to perform eligibility-related services for the IEHP Medi-Cal members within Riverside County for an additional amount not to exceed \$1,128,661.00 through August 31, 2025. The total amount payable under this Agreement shall not exceed \$1,745,486.27 through August 31, 2025.

Contact:

Jarrold McNaughton, Chief Executive Officer

Background:

IEHP requires special eligibility services for select members to ensure its members maintain or gain their correct eligibility status. The County of Riverside DPSS is the only entity that provides eligibility-related services for Medi-Cal members within Riverside County. Therefore, IEHP and the County of Riverside DPSS entered into an Agreement on September 1, 2020, to support DPSS with funding to provide enhanced data entry and eligibility-related services for IEHP members. Examples of eligibility related services include:

- Update demographic changes,
- Review and assign proper category of aids,
- Coordinate inter-county transfers, and
- Partner with IEHP on any special eligibility projects.

Since the inception of the agreement the County of Riverside DPSS has assisted approximately 15,000 IEHP members, resulting in additional revenue of \$60 million.

Discussion:

Given the success of this agreement over the last four years, IEHP seeks to expand the partnership with the County of Riverside DPSS, by increasing our financial support to the County of Riverside DPSS office to help accelerate any eligibility related services requested by IEHP. It is expected that this expansion will cover 80,000 IEHP members per year, resulting in additional revenue in the amount of \$40 million to \$80 million per year.

The additional cost of this of this First Amendment shall not exceed \$1,128,661.00. The total cost (including this request) of this Agreement shall not exceed \$1,745,486.27 through August 31, 2025.

Fiscal Impact	Financial Review	Procurement Review	Reviewed by Counsel	Director Approval	Chief Approval
New Expenditure	D. Ferguson, 7/26/24	E. Jennings S. Cox 8/16/24	M. Popka 8/29/24	S. Jones, 8/29/24	J. McNaughton 8/29/27

ADMINISTRATION

4. DELEGATION OF AUTHORITY TO ENTER INTO THE FUNDING AGREEMENT WITH RIVERSIDE COUNTY MEDICAL ASSOCIATION AND SAN BERNARDINO COUNTY MEDICAL SOCIETY

Recommended Action:

That the Governing Board of the Inland Empire Health Plan (IEHP) authorize the Chief Executive Officer or his designee to negotiate and, upon legal review and approval, execute the Funding Agreement for group membership with Riverside County Medical Association (RCMA), San Bernardino County Medical Society (SBCMS) and the California Medical Association (CMA), to support the costs of RCMA, SBCMS and CMA 2025 membership dues for participating IEHP-contracted physicians (estimated at 4,090 physicians) for an amount not to exceed \$4,100,000, through December 31, 2025.

Contact:

Jarrold McNaughton, Chief Executive Officer

Background:

The purpose of this membership program is to increase participation of IEHP physicians in organized medicine and for IEHP credentialed physicians to receive the benefits and services offered by RCMA, SBCMS and CMA. RCMA offers annual memberships to physicians in Riverside County, and SBMCA offers annual memberships to physicians in San Bernardino County. Membership benefits include billing assistance, educational resources, news updates, practice resources, legal help and tools and support for provider practices that help improve patient care, including care to IEHP Members.

Discussion:

Under this Funding Agreement, IEHP will provide one-time funding to cover the annual membership costs for eligible network physicians, for 2025 annual membership in either the RCMA or SBCMA and the CMA. Once a physician is enrolled into either the RMCA or SBCMA, they are automatically enrolled into the CMA.

IEHP will issue a lump sum payment to cover the cost of all enrolled physicians, calculated at a group membership rate of \$1,000 per physician. Physicians will be automatically enrolled but will be given notice to “opt-out” should they choose not to be a member of RCMA or SBCMA. Any unused funds will be retained by RCMA, SBCMS and CMA and utilized for newly credentialed physicians joining IEHP over the course of the agreement. In the event those funds are not used during the agreement, they will be returned to IEHP.

The cost of this Funding Agreement shall not to exceed \$4,100,000 through December 31, 2025.

Fiscal Impact	Financial Review	Procurement Review	Reviewed by Counsel	Director Approval	Chief Approval
Included in CY2024 Budget	D. Ferguson 09/03/24	N/A	M. Popka 09/04/24	N/A	J. McNaughton

FINANCE DEPARTMENT

5. APPROVE THE MAINTENANCE AND REPAIR SERVICES AGREEMENT WITH ACTION DOOR REPAIR

Recommended Action:

That the Governing Board of the Inland Empire Health Plan (IEHP) approve the Maintenance and Repair Services Agreement (Agreement) with Action Door Repair (Action Door) for the provision of Door Repair and Replacement Services for an amount not to exceed \$400,000.00 for a term of one (1) year effective September 9, 2024, through September 8, 2025.

Contact:

Keenan Freeman, Chief Financial Officer

Background:

IEHP requires Door Repair and Replacement Services to maintain, repair, or replace nonfunctional doors, as well as to troubleshoot and repair issues with automatic door openers to stay in compliance with American with Disabilities Act (ADA) requirements at all IEHP locations.

IEHP procured this service using the terms of a Cooperative Agreement provided by the Orange County Fire Authority and Action Door via Request for Proposal (RFP) RO2590 for Apparatus Bay Door Maintenance and Repair Services dated November 9, 2022. This RFP allows a “piggyback” clause that enables Action Door to extend the same prices, terms, and conditions to other public agencies.

Discussion:

IEHP will enter into the Maintenance and Repair Services Agreement with Action Door for on call Door Repair and Replacement Services for a term of one (1) year, for a cost not to exceed \$400,000.00.

Fiscal Impact	Financial Review	Procurement Review	Reviewed by Counsel	Director Approval	Chief Approval
Included in CY2024 Budget	S. McCalley 08/20/24	L. Marroquin 08/19/24	M. Popka 8/22/24	R. Fleig 08/19/24	K. Freeman 09/04/24

FINANCE DEPARTMENT

6. APPROVE THE PUBLIC WORKS CONTRACT WITH NEW TANGRAM LLC

Recommended Action:

That the Governing Board of the Inland Empire Health Plan (IEHP) approve the Public Works Contract with New Tangram, LLC. (New Tangram) for the 9500 Building Phase 3 – 3rd Floor Cubicles project for an amount not to exceed \$1,895,739.00.

Contact:

Keenan Freeman, Chief Financial Officer

Background:

IEHP requires this service to furnish the third floor with cubicles for current planned and future staffing needs as part of the Tenant Improvement of the Dr. Bradley P. Gilbert Center for Learning & Innovation (Center) 3rd Floor project. This area will be used as a business office and will consist of open work areas with cubicles, conference rooms, private offices, print and data rooms, collaborative areas, restrooms, reception area, and storage rooms.

On June 12, 2024, IEHP issued Request for Bid (RFB) #24-05662 on Bonfire, its public third-party bidding website. As a result, 47 bidders were invited to bid, 22 bidders downloaded the documents, two (2) bidders attended the mandatory job walk, with two (2) submitting bids with the following results.

Vendor	Quote
BKM Office Environments	\$1,982,779.59
New Tangram LLC.	\$1,579,782.47

On July 11, 2024, IEHP issued an Intent to Award Notice that New Tangram was the lowest priced, responsive and most responsible bidder for the 9500 Building Phase 3 – 3rd Floor Cubicles project.

Discussion:

Under the Public Works Contract, New Tangram will supply and install Office Master Standard PT78 chairs and 529 Steelcase Answer Panel Systems cubicles of company standard sizes in the following quantities in accordance with architectural plans.

- 10' x 10' Manager Cubicles: 20
- 6' x 10' Supervisor Cubicles: 22
- 6' x 6' General Staff Cubicles: 487

Upon IEHP's issuance of the Notice to Proceed, New Tangram shall complete all work required for the 9500 Building Phase 3 – 3rd Floor Cubicles project within 60 calendars days.

CONSENT AGENDA

After final budget review, New Tangram’s final bid proposal is \$1,579,782.47. For unforeseen field conditions or change orders, IEHP has incorporated a 20% contingency of \$315,956.53 to the project budget. The total cost of this Public Works Contract with New Tangram shall not to exceed \$1,895,739.00.

Fiscal Impact	Financial Review	Procurement Review	Reviewed by Counsel	Director Approval	Chief Approval
Included in CY2024 Budget	S. McCalley 08/20/24	C. McNair, 8/19/24	M. Popka 8/22/24	R. Fleig 08/19/24	K. Freeman 09/04/24

FINANCE DEPARTMENT

7. APPROVE THE PUBLIC WORKS CONTRACT WITH PHILLIPS DRAPERIES AND CURTAINS, INC.

Recommended Action:

That the Governing Board of the Inland Empire Health Plan (IEHP) approve the Public Works Contract with Phillips Draperies and Curtains, Inc. (Phillips Draperies) for the Atrium Mechanical Skylight Shades project for an amount not to exceed \$253,052.46.

Contact:

Keenan Freeman, Chief Financial Officer

Background:

IEHP requires this service to black out natural light coming through the skylights during special events such as the monthly “Make A Difference” meetings that are conducted in the Atrium corridor. These skylight shades will reduce heat and improve visibility of the video screens for participants in these events.

On May 1, 2024, IEHP issued Request for Bid (RFB) #24-05519 on Bonfire, its public third-party bidding website for the Atrium Mechanical Skylight Shades project. As a result, 26 bidders were invited to bid, 18 bidders downloaded the documents, three (3) bidders attended the mandatory job walk, with one (1) submitting a bid with the following result.

Vendor	Quote
Phillips Draperies	\$210,877.05

On June 4, 2024, IEHP issued an Intent to Award Notice that Phillips Draperies was the lowest priced, responsive and most responsible bidder for the Atrium Mechanical Skylight Shades project.

Discussion:

Under the Public Works Contract, Phillips Draperies will supply the design and construction of four (4) custom motorized skylight shades, capable of horizontal function. These shades must ensure proper tension to prevent any gaps, thereby effectively blocking sunlight from entering the building interior as needed. Specifically, this includes two (2) motorized shades for each of the following skylights:

- 18’ x 18” skylights: 3
- 9’ x 18’ skylight: 1

Phillips Draperies will also be responsible for the inclusion of seismic and structural design/calculations to ensure accommodation for seismic roof loads, and provision and installation of all necessary electrical conduits, electrical cable within these conduits, and motor controls, which must be operable via a wireless wall switch or remote.

CONSENT AGENDA

Upon IEHP’s issuance of the Notice to Proceed, Phillips Draperies shall complete all work required for the Atrium Mechanical Skylight Shades project within 30 calendars days.

After final budget review, Phillips Draperies final bid proposal is \$210,877.05. For unforeseen field conditions or change orders, IEHP has incorporated a 20% contingency of \$42,175.41 to the project budget. The total cost of this Public Works Contract with Phillips Draperies shall not to exceed \$253,052.46.

Fiscal Impact	Financial Review	Procurement Review	Reviewed by Counsel	Director Approval	Chief Approval
Included in CY2024 Budget	S. McCalley 08/20/24	L. Marroquin 08/19/24	M. Popka 8/22/24]	R. Fleig 08/19/24	K. Freeman 09/04/24

FINANCE DEPARTMENT

8. APPROVE THE FIRST AMENDMENT TO THE PROFESSIONAL SERVICES AGREEMENT WITH HEALTH MANAGEMENT ASSOCIATES, INC.

Recommended Action:

That the Governing Board of the Inland Empire Health Plan (IEHP) approve the First Amendment to the Professional Services Agreement (Agreement) with Health Management Associates, Inc. for the provision of Managed Care Consulting Services for an additional one (1) year term through September 30, 2025. There are no additional costs associated with this Amendment and the total cost under this Agreement remains unchanged for an amount not to exceed \$225,000 through September 30, 2025.

Contact:

Keenan Freeman, Chief Financial Officer

Background:

IEHP has contracted with Health Management Associates, Inc. since April 13, 2017, for Managed Care Consultant Services and was selected through a single source procurement. IEHP determined a single-source procurement was justified as:

- a. HMA is the market leader in vendor landscapes, capabilities, contracting terms, and pricing. In addition, HMA has verifiable benchmarking capabilities of like-client implementation and operations experiences.
- b. HMA research and consulting has deep knowledge of the organization's landscape position to understand the unique needs of IEHP and assist them in selecting the optimal Managed Care Consulting Services in an efficient and cost-effective manner.

In October 2023 under Minute Order 23-219, the Governing Board approved a new Agreement with HMA for the provision of Strategic Consulting Services on an as needed basis. These services include, but are not limited to the following:

1. Revenue reconciliation of the Line of Business (LOB's), particular focus on Managed Long-Term and Support (MLTSS).
2. Rate Development Template (RDT) production process.
3. In-Home Health Supportive Services (IHSS) expense tracking.
4. Incurred But Not Reported (IBNR) process and accuracy.
5. Providing coordination within the Finance Department's internal controls, expected deliverables, internal procedures/processes, recommendation of internal employee structure, and technology around a "Best in Class" finance operation.

CONSENT AGENDA

6. Attending financing meetings, advising staff on matters specific to the financing, preparing, and reviewing financing documents, and assisting with due diligence and disclosure processes.
7. Assessing and providing recommendation of a fully functioning performance management process to include:
 - a. Setting organization objectives across all levels of the department
 - b. Identifying indicators to measure progress toward achieving objectives on a regular basis
 - c. Identifying responsibility for monitoring progress
 - d. Identifying areas where achieving objectives requires focused quality improvement processes.

IEHP currently has two independent agreements with HMA for Actuarial Services and Pharmacy Operations. The services provided under these existing engagements are unrelated to this agreement and request.

Discussion:

IEHP wishes to continue utilizing HMA on an as needed basis to provide the above strategic consultation services for assisting its Leadership by providing readily available resources that have the expertise, established rapport and historical knowledge of IEHP. This Amendment also replaces the current Business Associate Agreement (BAA). The existing BAA does not conform to IEHP's Board approved BAA template under MO 23-221; therefore, it will be replaced accordingly.

There are no costs associated with this Amendment and the total cost under this Agreement remains unchanged for an amount not to exceed \$225,000 through September 30, 2025.

Fiscal Impact	Financial Review	Procurement Review	Reviewed by Counsel	Director Approval	Chief Approval
Included in CY2024 Budget	J. Haines 8/28/24	T. Rankins/C. Andrade 8/27/24	M. Popka 08/27/24	NA	K. Freeman 8/28/24

HEALTH SERVICES DEPARTMENT

9. APPROVE THE MEMORANDUM OF UNDERSTANDING WITH POPULATION HEALTH LEARNING CENTER, A PROJECT OF THE TIDES CENTER

Recommended Action:

That the Governing Board of the Inland Empire Health Plan (IEHP) approve the Memorandum of Understanding (MOU) with the Population Health Learning Center (PHLC) for administration of the Equity and Practice Transformation (EPT) Provider Directed Payment Program Practice Coaching for an amount not to exceed \$262,000 for a 12-month term.

Contact:

Takashi Wada, M.D., Chief Medical Officer

Background:

On January 1, 2024, the Department of Health Care Services (DHCS) launched the EPT program, a one-time \$700 million program focused on transforming primary care practices to advance health equity and reduce Covid-19-driven care disparities. The EPT program will continue over a five-year period, with the goal of funding practice transformation aligned with value-based payment models and implement the infrastructure necessary to expand the utilization of evidenced-based models of team-based care to improve health equity. Providers throughout the state could apply for acceptance into the EPT program, upon acceptance the providers would be granted funds to cover costs associated with advancing DHCS' equity goals initiatives

DHCS selected 12 IEHP providers to participate in the EPT program. According, DHCS approved funding in the amount of \$23.6 million for these 12 providers, which is disbursed to IEHP based on completion of specified milestones agreed between the participating provider and DHCS. In accordance with the approval by the IEHP Governing Board under MO 24-101, IEHP has entered into Memorandums of Understanding (MOUs) with those 12 IEHP providers, under which IEHP disburses funds in support of the EPT program. Those selected IEHP providers are:

1. Aruna Pallapati Md Inc.
2. Bendito Medical Corporation
3. Children's Primary Care Medical Group, Inc. Db a Children's Primary Care Medical Group
4. Chorong Lii Hwang Md
5. Mission Pediatrics, Inc.
6. Mommy & Me Medical Group, Inc.
7. Odochi Nwagwu MD Inc. Db a Adelanto Medical Group
8. Sushil Anand And Associates Medical Corp. Db a American Pediatrics
9. Sushil Anand MD FAAP Db a Sunshine Pediatrics
10. The Children's Doctor Professional Corporation
11. Yvonne D'sylva MD Inc.
12. Pilar J. Condry MD Inc. – *Provider has since sold their practice and is no longer a participant.*

IEHP participated in the Initial Planning Incentive Payments Program prior to the launch of the EPT program which allowed Managed Care Plans (MCPs) to identify and work with small to

CONSENT AGENDA

medium sized independent practices using a standardized assessment tool (Population Health Management Capabilities Assessment Tools (PhmCAT)) to support those practices as they develop EPT Provider Directed Payment Program plans and applications. Payments were paid to MCPs based on achievement of predetermined milestones and activities by DHCS. Based on IEHP's efforts and performance, DHCS awarded IEHP with \$4.7 million.

Discussion:

The PHLC acts as the Program Office for DHCS' EPT payments program and recognized a need to create an approach to EPT technical assistance on behalf of the awarded EPT Providers. Their role involves vetting and partnering with qualified practice coaches to support practices participating in the EPT Program. . PHLC is creating a EPT Coaching Pool, designed to tailor coaching to strengthen implementation of EPT curriculum and leverage EPT resources to create consistent, high-quality coaching across practices. The coaching pool enables sponsors (which includes MCPs such as IEHP, Practices and other funders) to maximize and align resources to deliver customized practice coaching in support of meeting EPT milestones. PHLC will offer three coaching packages: low, medium and high intensity coaching. Each package will include resources, tools and information related to EPT curriculum and deliverables. Centralized administration by the PHLC creates efficiencies in cost, alignment with EPT curriculum, and maximizes choice for practices to select a coach to meet their needs.

IEHP is partnering with PHLC to provide support to its 11 awarded EPT providers as they complete their deliverables. Accordingly, IEHP is seeking to allocate \$262,000 of the \$4.7 million funding earned through the Initial Planning Incentive Payments Program to financially support 12-months of coaching for its interested IEHP EPT Providers. The total cost under this MOU shall not exceed \$262,000 for a 12-month term.

Fiscal Impact	Financial Review	Procurement Review	Reviewed by Counsel	Director Approval	Chief Approval
Included in CY2024 Budget	M. Martinez 07/31/24	N/A	M. Popka 08/22/24	M. Wray 07/26/24	T. Wada 07/26/24

INFORMATION TECHNOLOGY DEPARTMENT

10. APPROVE ADDITIONAL FUNDING FOR THE TECHNICAL SUPPORT SERVICES RENEWAL ORDER WITH ORACLE AMERICA, INC.

Recommended Action:

That the Governing Board of the Inland Empire Health Plan (IEHP) approve additional funding for the continued provision of Oracle Technical Support Services for a cost not to exceed \$66,397.86 through November 17, 2025. The total amount payable under the Oracle America database licensing and support Agreements shall not exceed \$860,791.81 through November 17, 2025.

Contact:

Vinil Devabhaktuni, Chief Digital & Information Officer

Background:

In 2010, when IEHP acquired the MAXMC medical management system, it required database support services from Oracle America to maintain and update critical Oracle-based hardware, such as servers, and associated Oracle software and databases. Although the company's Oracle-based platforms have evolved with the purchase of new solutions over the years, the need for these support services remains essential as long as IEHP continues to use Oracle-based software. Oracle, as the original equipment manufacturer (OEM) of the database software, has granted IEHP a perpetual license for its use. Additionally, Oracle is the legacy vendor supporting the platform for Magnum dba Lyric's ClaimsXten, which is crucial for pricing claims and is integrated into IEHP's HSP claims administrations system. As the sole vendor capable of providing updates and support for its products, there are no viable alternative suppliers with the same capabilities.

The Governing Board had previously approved the following contractual documents for Oracle Database Services as follows:

Date Approved	MO #	Purpose	Term Expiration	Cost
10/12/2010	10-266	Approved the renewal of the software update and support agreement for the MaxMC Oracle Database.	11/21/2010	\$62,000.00
10/11/2011	11-277	Approved the renewal of the software update and support agreement for the MaxMC Oracle Database.	11/21/2012	\$64,000.00
11/5/2012	12-321	Approved the renewal of the software update and support agreement for the MaxMC Oracle Database.	11/21/2013	\$65,000.00
10/15/2013	13-49	Approved the renewal of the software update and support agreement for the MaxMC Oracle Database.	11/21/2014	\$74,115.16

CONSENT AGENDA

Date Approved	MO #	Purpose	Term Expiration	Cost
09/20/2020	16-65	Ratify and approved the renewal for Oracle Database Enterprise Edition Processor Perpetual - Software Update License and Support.	Perpetual	\$317,157.28
01/10/2022	22-006	Ratify and Approve the Ordering Document with Oracle America Inc. for Annual Technical Support Services Program for Software Update License and Support.	11/17/2022	\$54,736.01
07/11/2022	22-257	Ratify and Approve the Ordering Document for Oracle Database compression processor licenses, accompanying support and maintenance for one (1) year.	06/29/2023	\$38,980.00
08/08/2022	22-273	Ratify and Approve the First Amendment to the Ordering Document with Oracle America for Oracle Database Processor Licenses and Support.	06/12/2023	No Cost
10/11/2022	22-329	Approve additional funding for Oracle Database processor licenses, support and maintenance for one (1) year.	11/17/2023	\$56,926.00
11/14/2022	22-361	Approve the First Amendment to the Ordering Document to add language for data security with Oracle America Inc. for Oracle Database Processor Licenses and Support.	06/12/2023	No Cost
10/10/2023	23-231	Rescind Minute Order 23-074, Delegation of Authority to approve an ordering document and public sector agreement for oracle cloud services (unrelated to this agreement), and technical support services renewal order with Oracle America, Inc.	11/17/2024	\$61,479.50
Oracle Database Services Total Agreement Cost:				\$794,393.95
New Cost:				\$66,397.86
Total Not to Exceed Cost:				\$860,791.81

Discussion:

Each year, IEHP requests funding for Oracle technical support services tied to its perpetual license. This license allows IEHP to operate the latest software versions and apply essential patches for all Oracle software and databases that support critical business systems. These systems play a vital role in serving members, providers, and fulfilling regulatory obligations, including ClaimsXten, which is essential for accurately pricing claims for payments to IEHP's provider network. Given

CONSENT AGENDA

the specialized nature of these services and the existing relationship, Oracle remains the only vendor capable of meeting IEHP’s needs.

The additional cost for the continued provision of Oracle technical support services with Oracle America Inc., shall not exceed \$66,397.86, through November 17, 2025. The total cost for Oracle Database Services shall not exceed \$860,791.81 through November 17, 2025.

Fiscal Impact	Financial Review	Procurement Review	Reviewed by Counsel	Director Approval	Chief Approval
Included in CY2024 Budget	K. Tsui 8/16/2024	W. Yanes 8/16/2024	M. Popka 8/23/2024	J. Lopez 8/15/2024	V. Devabhaktuni 8/27/24

INFORMATION TECHNOLOGY

11. APPROVE THE AWARD OF REQUEST FOR PROPOSAL #23-05096 TO, AND DELEGATION OF AUTHORITY TO APPROVE CONTRACTUAL DOCUMENTS WITH, CLOUD TECHNOLOGY INNOVATIONS, LLC d/b/a HEALTHCARE FRAUD SHIELD

Recommended Action:

That the Governing Board of the Inland Empire Health Plan (IEHP) approve the award of Request for Proposal #23-05096 (RFP# 23-05096) to, and authorize the Chief Executive Officer (CEO) or his designee to negotiate and, after legal review and approval, sign contractual documents with, Cloud Technology Innovations, LLC d/b/a Healthcare Fraud Shield (HCFS) to provision a Fraud Waste and Abuse (FWA) software platform for an amount not to exceed \$2,751,715 for a five (5) year period. The total amount payable under this Agreement(s) shall not exceed of \$2,751,715.

Contact:

Vinil Devabhaktuni, Chief Digital and Information Officer

Background:

IEHP is required to implement an effective compliance program that includes measures that prevent, detect, and correct fraud, waste, and abuse as set forth in 42 C.F.R. §§ 422.503(b)(4)(vi), 423.504(b)(4)(vi) and 438.608. IEHP's Fraud, Waste, and Abuse Program (FWA) is designed to ensure health care funds are used appropriately by identifying, preventing, remediating, and reporting fraudulent and abusive activities towards State and Federal health care programs.

In order to perform effective FWA monitoring and with the increasing complexity of healthcare FWA schemes, the use of data analytics is necessary for IEHP to strengthen its fraud detection and prevention capabilities. As such, IEHP requires an innovative FWA software platform designed to detect and provide actionable insights in the identification of potential fraudulent or abusive activities. Additionally, the FWA software platform will track and report on staff performance to ensure transparency and efficiency.

By leveraging FWA technology, IEHP will benefit from the following:

- Develop and coordinate a targeted response to suspected inappropriate billing practices.
- A cross functional departmental solution to detect and mitigate inappropriate billing practices;
- Establish baseline data to recognize unusual trends, patterns in utilization and billing practices.
- Develop indicators that will be used to identify norms, abnormalities, and individual variables that describe statistically significant time-series trends;
- Develop cost savings reports to establish savings benchmarks; and
- Develop centralized metrics dashboard to track FWA trends, practices, payment accuracies, and cost savings.

The IEHP Compliance Department initiated its journey to establish necessary processes and enhance established operational processes by developing initiatives for the Organizational Strength Strategy OS EG5 to focus on 100% audit readiness and ensure ongoing regulatory compliance. Acquiring the FWA software platform will equip the IEHP Compliance Program with the necessary tools and system to effectively support and drive the success of its strategic initiatives.

On October 9, 2023, IEHP issued Request for Proposal (RFP# 23-05096) on Bonfire, its public third-party bidding website. 36 bidders indicated interest, with five (5) bidders submitting proposals. Three (3) of the five (5) bidders, Alivia Analytics, Codoxo Inc., and Healthcare Fraud Shield (HCFS), were down selected as finalists for further evaluation. Scores were as follows:

TECHNICAL PROPOSAL SCORES WITHOUT COST (Out of 70)	
Codoxo Inc.	39.68
Healthcare Fraud Shield	39.17
Alivia Analytics	37.83

TECHNICAL PROPOSAL SCORES INCLUDING COST (Out of 100)	
Codoxo Inc.	69.68
Healthcare Fraud Shield	61.36
Alivia Analytics	56.94

DEMONSTRATION SCORES (Out of 10)	
Healthcare Fraud Shield	7.08
Alivia Analytics	6.91
Codoxo Inc.	6.77

FINAL SCORING (Out of 110)	
Codoxo Inc.	76.45
Healthcare Fraud Shield	68.44
Alivia Analytics	63.85

After thorough evaluation, the Evaluation Committee recommended an award for RFP# 23-05096 be made to HCFS. The evaluation consisted of an extensive vendor selection process which included technical evaluations, product demonstrations, and analyzing pricing structures. Although Codoxo, Inc. received the highest total score by 8 points, this score was driven mainly by price, as the technical and demo scores were only 1.8 higher than HCFS' scores. HCFS emerged as the best value bidder, showcasing experience and focus in the areas of payment integrity and a clear understanding of the business' specific requirements for the FWA solution. Contributing technical factors to HCFS' selection included:

CONSENT AGENDA

1. HCFS case management system demonstrated key fields and user-friendly features that met IEHP specifications. The platform affirmed HCFS knowledge of industry best practices and solid understanding of healthcare fraud waste and abuse investigations. Customized workflows, dashboard visuals and document attachment capability were also additional desired features met by this system.
2. HCFS provided a comprehensive description of its product and effectively addressed all aspects of IEHP's demonstration agenda with robust responses and provided examples relevant to IEHP when compared to other bidders; and
3. HCFS analytics and case management modules allows the data to be manipulated for in-depth analyses while on one (1) integrated solution platform.
4. HCFS has a proven track record working with other large California managed care plans. HCFS offers industry leading internal tracking and reporting features that allows for the ability to monitor work performance with dashboard visuals.
5. IEHP's Evaluation Committee Members found that HCFS' software platform delivers a user-friendly interface, which can support a quick adoption and ensure a seamless integration within IEHP's current and future work environment.

Based on the above justifications, HCFS was selected as the bidder to provide the best overall value for IEHP based on the above stated criteria and its capability to tailor its services to meet the specific needs of The Plan.

Discussion:

IEHP and HCFS will enter into contractual document(s) that clearly define the terms and conditions, responsibilities of HCFS and IEHP, products being purchased, and the costs associated with the critical deliverables and key implementation milestones essential to the FWA software platform roll-out success, including: 1) implementation of project plan 2) data migration 3) end user training 4) user acceptance testing (UAT) and 5) post-implementation subject matter expert (SME) support and customer service.

The table below denotes the Best and Final Offer pricing for the HCFS FWA software platform.

Year 1	Year 2	Year 3	Year 4	Year 5	Total Cost
\$662,343	\$522,343	\$522,343	\$522,343	\$522,343	\$2,751,715

The insights derived from this service significantly reinforces IEHP's commitment to its Vision for Organizational Strength contributing to its community's optimal care and vibrant health. This commitment is also exemplified by IEHP's dedication to delivering on its values for "bringing focus and accountability to its work."

The cost for the provision of the FWA software platform shall not exceed \$2,751,715, effective upon execution of the contractual document(s), for a five (5) year period.

CONSENT AGENDA

Fiscal Impact	Financial Review	Procurement Review	Reviewed by Counsel	Director Approval	Chief Approval
Included in CY2024 Budget	K. Tsui 8/27/2024	C. Hendricks 9/03/24	M. Popka 8/27/24	M. Hayes 8/26/2024	V. Devabhaktuni 9/4/24

OPERATIONS DEPARTMENT

12. DELEGATION OF AUTHORITY TO APPROVE THE SIXTH AMENDMENT TO THE PROFESSIONAL SERVICES AGREEMENT WITH DELOITTE CONSULTING LLP

Recommended Action:

That the Governing Board of the Inland Empire Health Plan (IEHP) authorize the Chief Executive Officer (CEO) or his designee, to negotiate and, after legal review and approval, execute the Sixth Amendment to the Professional Services Agreement with Deloitte Consulting LLP (Deloitte) for the provision of Program Management and Project Governance services for the Covered California (CCA) program for an additional amount not to exceed \$600,000. The total amount payable under this Agreement shall not exceed \$4,801,650 through December 31, 2024.

Contact:

Susie White, Chief Operating Officer

Background:

As part of IEHP's strategic growth strategy, IEHP entered into a Commercial Line of Business (LOB) with the California Health Benefit Exchange (i.e., Covered CA) on November 1, 2023, for plan year 2024. Launching this new product required coordination across different functional areas and external platform/provider partners, and the implementation of new operational and technical capabilities. This impacted IEHP by successful implementation of Covered California by:

- Integrating multiple project plans from IEHP business and IT teams with external partners into one program level plan.
- Establishing a centralized Program Management function that helped teams identify and escalate risks and developed plans to resolve these issues.
- Developing processes to define/prioritize scope and monitored go-live deliverables to ensure requirements were met.

The above was accomplished by the March 7, 2023 release of Request for Proposal RFP #23-04648 on Bonfire, IEHP's public third-party bidding website. As a result, 23 bidders indicated interest with one (1) bidder submitting a proposal. The RFP was awarded to Deloitte at the April 10, 2023, Governing Board meeting under Minute Order 23-080 based upon their successful proposal and resulting scores.

The Governing Board has previously approved the Agreement and subsequent Amendments as follows:

Date approved	MO#	Purpose	Term Expiration	Cost
04/10/23	23-080	RFP Award for Program Management and Project Governance Services	12/31/2024	\$2,425,000

CONSENT AGENDA

Date approved	MO#	Purpose	Term Expiration	Cost
08/14/23	23-185	Ratify and Approve the First Amendment to include travel expenses for onsite resources	12/31/2024	\$75,000
10/10/23	23-233	Ratify and Approve the Second Amendment for the provision of Program Management and Project Governance Services for CCA	12/31/2024	\$95,680
11/13/23	23-273	Ratify and Approve the Third Amendment for the continued provision of Program Management and Project Governance Services for CCA	12/31/2024	\$113,320
04/08/2024	24-056	Ratify and Approve the Fourth Amendment for the continued provision of Program Management and Project Governance Services for CCA	12/31/2024	\$985,000
04/08/2024	24-056	Ratify and Approve the Fifth Amendment for the continued provision of Program Management and Project Governance Services for CCA	12/31/2024	\$507,650
Total Cost to Date:				\$4,201,650
New Cost – Sixth Amendment				\$600,000
Total Cost:				\$4,801,650

Discussion:

As implementation progresses, IEHP has identified additional support needed for the completion of CCA implementation. Deloitte will continue to provide support and consulting services relating to configuration capabilities, Health Rules Payer (HRP), a product of Health Edge and is the Core Claims processing system for CCA, authorization mapping, non-par pricing automation, production optimization and claim operations/payment support.

Deloitte will:

1. Develop configuration support staffing model, including resource and skill requirements.
2. Describe scope of work for each identified role.

CONSENT AGENDA

3. Develop migration plan, including recommendations for a phased transition of configuration responsibilities.
4. Develop roadmap to complete the transition of configuration support responsibility to IEHP by a target date of 1/1/2025.
5. Develop plan to complete testing and deployment of HRP authorization matching functionality to production.
6. Monitor implementation activities and identify potential issues/risks.
7. Work with stakeholders to resolve implementation-related issues/risks.
8. Develop detailed implementation plan to complete testing and deployment the source non-par pricing automation solution.
9. Monitor implementation activities and identify potential issues/risks.
10. Work with stakeholders to resolve implementation-related issues/risks.
11. Continue to support project management activities relating to CCA production stabilization, including:
 - a. Steering committee facilitation.
 - b. Monitor operational performance and identify/escalate issues as appropriate.
 - c. Facilitate completion of remaining production optimization initiatives (non-par pricing automation, claim backlog production load).
12. Continue to support CCA claims operations activities, including:
 - a. Facilitate claim processing war room calls.
 - b. Produce periodic claim operations reports, including overall claim backlog and batch-specific reporting.
 - c. Coordinate scheduling of payment cycles and other claim processing-related activities.
 - d. Facilitate identification and resolution of claim processing-related issues across IEHP and vendor stakeholders.

The additional cost of the Sixth Amendment shall not exceed \$600,000. The total cost (including this request) of this Agreement shall not exceed \$4,801,650 through December 31, 2024.

Fiscal Impact	Financial Review	Reviewed by Counsel	Director Approval	Chief Approval
New Expenditure	C. Aguirre/S. McCalley 8.15.24	M. Popka 8/22/24	G. Cleary 8/15/24	S. White 08/28/2024

PROVIDER CONTRACTING DEPARTMENT

13. RATIFY AND APPROVE THE ENHANCEMENT CARE MANAGEMENT PROVIDER AGREEMENT WITH BRIDGE PRENATAL PC – MULTIPLE LOCATIONS

Recommended Action:

That the Governing Board of the Inland Empire Health Plan (IEHP) ratify and approve the Enhancement Care Management Provider Agreement for Bridge Prenatal PC, effective September 1, 2024.

Contact:

Susie White, Chief Operating Officer

Background:

Bridge Prenatal PC would like to participate as an Enhancement Care Management Provider with IEHP for all lines of business.

Discussion:

The new Agreement was tailored to reflect the Enhanced Care Management services offered by Bridge Prenatal PC

Fiscal Impact:

Included in CY2024 Budget

Financial Review:

N/A

Reviewed by Counsel:

Yes

PROVIDER CONTRACTING DEPARTMENT

14. RATIFY AND APPROVE THE AGREEMENT TO REINSTATE AND EXTEND THE HOSPITAL PER DIEM AGREEMENT WITH PALO VERDE HEALTH CARE DISTRICT DBA PALO VERDE HOSPITAL – BLYTHE

Recommended Action:

That the Governing Board of the Inland Empire Health Plan (IEHP) ratify and approve the Agreement to Reinstatement and Extend the Hospital Per Diem Agreement for Palo Verde Health Care District dba Palo Verde Hospital, effective June 1, 2024.

Contact:

Susie White, Chief Operating Officer

Background:

Palo Verde Health Care District dba Palo Verde Hospital is currently a contracted Hospital in the IEHP Network.

Discussion:

The Amendment is to extend the term through December 31, 2024.

Fiscal Impact:

Included in CY2024 Budget

Financial Review:

N/A

Reviewed by Counsel:

Yes

PROVIDER CONTRACTING DEPARTMENT

15. RATIFY AND APPROVAL OF THE STANDARD TEMPLATE

Recommended Action:

That the Governing Board of the Inland Empire Health Plan (IEHP) ratify and approve the IEHP Standard Template Agreements, referenced below in section (d), and authorize the Chief Executive Officer or his designee to execute the templates, wherein the body of the document remains unchanged except for the identifying information of the individual provider and non-material changes per individual provider requirements.

Contact:

Susie White, Chief Operating Officer

Background:

IEHP contracts with physicians and other providers using Governing Board approved Standard Template Agreements. On a periodic basis IEHP reviews the IEHP Direct Standard Templates and updates are made to the templates, as necessary. The Governing Board has authorized the Chief Executive Officer to sign the Agreement in lieu of having the Chair of the Governing Board execute the documents.

Discussion:

The following standard template is being presented to the Governing Board for ratified approval, effective August 1, 2024:

- 1) Memorandum of Understanding – Provider Network Expansion Fund Program

Fiscal Impact:

Included in CY2024 Budget

Financial Review:

N/A

Reviewed by Counsel:

Yes

PROVIDER CONTRACTING DEPARTMENT

16. APPROVAL OF THE EVERGREEN CONTRACTS

Recommended Action:

That the Governing Board of the Inland Empire Health Plan (IEHP) approve the listed Evergreen Contracts for an additional one (1) year to five (5) year term.

Contact:

Susie White, Chief Operating Officer

Background:

An Evergreen Contract is a contract that automatically renews on the same terms and subject to the same conditions as the original agreement, unless sooner terminated in accordance with the terms and conditions.

Discussion:

Renewal under the Evergreen Clause of the following Agreements effective, October 1, 2024:

Additional one (1) year term:

- 1) El Mirador Medical Plaza Pharmacy Inc-Ancillary Agreement – Palm Springs
- 2) Providence Medical Foundation-Enhancement Care Management Provider Agreement – Victorville
- 3) Seventh Day Adventists Loma Linda University Medical Center dba Loma Linda University Faculty Pharmacy - Ancillary Agreement– Loma Linda
- 4) Keck Medical Center of USC dba USC Kenneth Norris Jr Hospital -Hospital Per Diem Agreement -Los Angeles
- 5) Keck Medical Center of USC dba Keck Hospital of USC -Hospital Per Diem Agreement – Los Angeles
- 6) Galen Inpatient Physicians PC - Hospitalist Agreement – Modesto
- 7) Jess Ranch Healthcare LLC dba Apple Valley Care Center – Skilled Nursing Facility Provider Agreement - Apple Valley

Additional five (5) years term:

- 8) Childrens Primary Care Medical Group Inc - Admitter Agreement– San Diego
- 9) California Imaging & Diagnostic Medical Group Inc – Ancillary Agreement – Murrieta
- 10) Gary Jeandron– Participating Provider Agreement - Behavioral Health – La Quinta
- 11) Breathing Sol Inc– Participating Provider Agreement - Behavioral Health – Murrieta
- 12) JDR Family Therapy Inc dba Equilibrium Counseling Services -Participating Provider Agreement - Behavioral Health – Rancho Cucamonga
- 13) Kelly Sheline – Arellano dba Kelly Sheline - Arellano MS LMFT- Participating Provider Agreement - Behavioral Health - Murrieta
- 14) Lloyd Alan Wager- Participating Provider Agreement - Behavioral Health – Corona
- 15) Wandalyn Lane dba Insite -Participating Provider Agreement - Behavioral Health – San Bernardino
- 16) Raimel Y Perez-Pasilliao MD Inc– Open Access Agreement– Chino

CONSENT AGENDA

- 17) Rani Elias MD Inc- Open Access Agreement (Excluding Medicare)– Rancho Cucamonga
- 18) New Hope Medical Group A Professional Corp– Capitated Primary Care Provider Agreement– Corona
- 19) Benacare Medical Center– Capitated Primary Care Provider Agreement (Medicare Only) – Upland
- 20) Comprehensive Medical Center Inc dba Clinica Medica Comunidad– Capitated Primary Care Provider Agreement (Medicare Only)– Pomona
- 21) California Care Medical Group Inc– Participating Provider Agreement – QASP - San Bernardino
- 22) Grove Internal Medicine Inc– Capitated Primary Care Provider Agreement (Excluding Medicare) – Rancho Cucamonga
- 23) Jasmine L Ramos MD dba Jasmine L Ramos MD PC- Capitated Primary Care Provider Agreement (Excluding Medicare) – Palm Desert
- 24) Anabi Medical-Fee-For-Service Primary Care Provider Agreement -Pomona
- 25) Afua Bema Isoken Khumalo dba Apple Red Nutrition Services- Participating Provider Agreement - Specialist – San Bernardino
- 26) Executive Mental Health Inc - Skilled Nursing Facility Attending Physician Agreement - Behavioral Health – Los Angeles
- 27) Aleida Gordon dba Saude Consulting Services LLC- Participating Provider Agreement – Specialist- Victorville
- 28) California Vascular Center -Participating Provider Agreement – Specialist -Apple Valley
- 29) Elber S Camacho-Participating Provider Agreement – Specialist- Palm Springs
- 30) Homan A Zadeh MD MPH Inc- Participating Provider Agreement – Specialist -Palm Springs
- 31) Hussain Al Darsani MD Inc– Participating Provider Agreement – Specialist – Chino
- 32) J Robert Evans MD PC - Participating Provider Agreement – Specialist – San Bernardino
- 33) Med Ped ID Inc- Participating Provider Agreement – Specialist – Murrieta
- 34) Platinum Digestive Health - Participating Provider Agreement – Specialist – Rancho Cucamonga
- 35) The Neuron Clinic GP - Participating Provider Agreement – Specialist – Murrieta
- 36) Yasser A Slayyeh MD FACC A Medical Corporation - Participating Provider Agreement – Specialist- San Bernardino

Fiscal Impact:

Included in CY2024 Budget

Financial Review:

N/A

Reviewed by Counsel:

N/A

ADMINISTRATION

17. CHIEF EXECUTIVE OFFICER UPDATE

Recommended Action:

Review and File

Contact:

Jarrold McNaughton, Chief Executive Officer

Recommended Action:

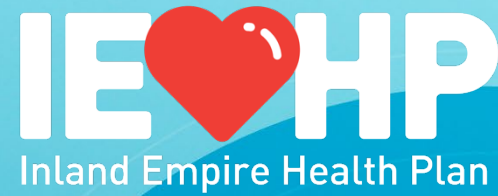
Review and File

Contact:

Jarrold McNaughton, Chief Executive Officer

Discussion:

Chief Executive Officer update for the September 9, 2024 Governing Board Meeting.



Governing Board Meeting

CEO BOARD REPORT | *Sep. 9, 2024*

MISSION MOMENT – COLLEGE OF THE DESERT NURSING PROGRAM EXPANSION

- IEHP joined Desert Care Network, Desert Healthcare District & Foundation, Eisenhower Health and OneFuture Coachella Valley to help fund the expansion the RN program at College of the Desert.
- The group committed a combined \$2.9 million.
- The funding will help add 70 students to the 2024-2025 nursing class, cover program costs, add 10 more training beds in the skills lab, provide scholarships and help fund holistic support services.
- Chief of Staff Dr. Luciana Starks and Director of Strategic Provider Partnerships Marci Coffey represented IEHP at an Aug. 28 press conference to announce the joint funding.



IEHP MONTHLY MEMBERSHIP REPORT

MONTH	FORECAST MEMBERSHIP	ACTUAL MEMBERSHIP	+ OR – FORECAST	+ OR – LAST MONTH
July 2024	1,477,336	1,509,149	31,813	2,738
August 2024	1,467,318	1,507,457	40,139	(1,692)
September 2024	1,508,864	1,510,866	2,002	3,409



IEHP RECEIVES NATIONAL PROCUREMENT AWARD

- The Supply Chain Management team recently learned it was one of 198 national winners of the award for Achievement of Excellence in Procurement by the National Procurement Institute, Inc. (NPI).
- IEHP is the **FIRST** health plan to receive this notable award, which recognizes agencies that go beyond the minimum requirements set by NPI.
- Recognized for our vendor transparency, fair and open bid processes, use of innovation and code of ethics.
- Huge thanks to the team, led by Cita Hendricks who completed the award application!



IEHP REPRESENTED AT NATIONAL CONFERENCES

- Community Health Workers **Fausto Figueroa III** and **Erika Mier** were selected to present at the National Association of Community Health Workers Unity Conference in August.
- Quality Improvement Facilitator **Alexis Abundis** will speak at this month's National Association for Latino Healthcare Executives Annual Leadership Summit.



Fausto Figueroa III

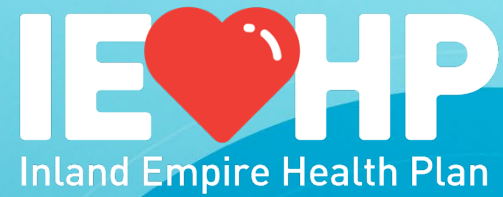


Erika Mier



Alexis Abundis





Care Division Presentation

Care Division Update

IEHP Governing Board

September 9, 2024



Cycle 2 | 2024 Annual Strategic Plan

GOAL 1 | Preventive Care

- Member Quality
- Provider Quality
- Policy Impact
- Internal Operations

GOAL 2 | Integrated & Equitable Care Services

- Pop Health Management
- Improve Health Equity

GOAL 3 | Hospital Care

- Quality Hospitalist Network
- Clinical Variation Reduction
- Member Experiences in Hospitals
- Optimize Quality Rating System: In-Network
- Hospital Quality Workforce



GOAL 1 | Vibrant Health Model (In Partnership with IEHP Foundation)

- Direct Investments
- Facilities & Infrastructure
- Advocacy & Policy
- VH Prioritized Interventions

GOAL 1 | Brand Strength

- Quality & Marketing Campaigns
- Storytelling
- Marketing Business Strategy

GOAL 2 | Systems

- Improve Security Posture
- Production Engineering
- Reliable & Resilient Systems
- Vendor Management
- Infrastructure Modernization
- Business Analysis & Quality Engineering
- Digital Transformation
- NDDDB Upgrade

GOAL 3 | Quality Driven Contracts

- New Quality Driven Contracts
- In Place Value Based Programs
- ROH Model (IEHP Plan)

GOAL 4 | Membership Growth

- Medicare
- Medi-Cal
- Covered California

GOAL 5 | Operation Critical

- Operational Performance
- Regulatory / Compliance
- Member Experience
- Provider Experience

GOAL 6 | Data Strategy

- Data Acquisition
- Data Normalization
- Data Usability

GOAL 7 | Future Network

- Care Division

GOAL 8 | Share Vision Partners

- RUHS
- ARMC
- Onboard 3 Additional SVP's

GOAL 9 | Workforce of the Future

- Organizational Effectiveness & Operational Readiness
- Workforce Development
- Workforce Engagement

Momentum

- Identified our priority problems to solve.
- Established clear goals for the Care Division based on a broad set of regional inputs.
- Developing baseline thoughts around who we want to be and how we will initially enter the market.
- Researched and directionally aligned on a recommendation for a preferred legal structure.
- Built our strategic road map & draft 3-year deliverables.
- Launched our Care Division Advisory Council with regional leaders.



The Problems to Solve

Shorter Term (2025, 2026)

- PCP shortage
- Access
- Quality & Experience

Longer Term (2027-2030)

- Physician alignment
- Health disparities
- Community health
- Integrated and coordinated care
- Market threats



Care Division Goals

Shorter Term

- Access to care has been improved.
- The shortage of PCP's has been significantly impacted by the development of a Care Division.
- Quality and Patient Satisfaction are at or above the 75th percentile for the Care Division.

Longer Term

- Aligned IEHP provider workforce with sufficient market share to influence healthcare in the IE.
- A technology-enabled integrated delivery system will demonstrate Optimal Care and Vibrant Health.
- Our partners are an integral part of the Care Division development and realization.
- We will increase regional influence, creating our own future.



The Medical Practice of Future: Who will we be?

- A distinction of difference – far beyond other options in our market.
- Tightly aligned with the Mission, Vision, Values of the health plan.
- Fully deliver on the commitments to Optimal Care & Vibrant Health.
- Our sole shareholder is the public good.
- Locally led and shaped.
- A unique culture that attracts and retains.
- Embracing a “utility” function.



The Medical Practice of Future: How will we begin?

- Employed model medical group.
- Primary Care initially.
- Multi-modal access points (virtual, mobile, and physical clinics).
- Expect 50+ providers over the first 3 years.



Challenges

- Recruitment of providers.
- Recruitment of staff.
- Financial investment.
- Acceptance in the community.

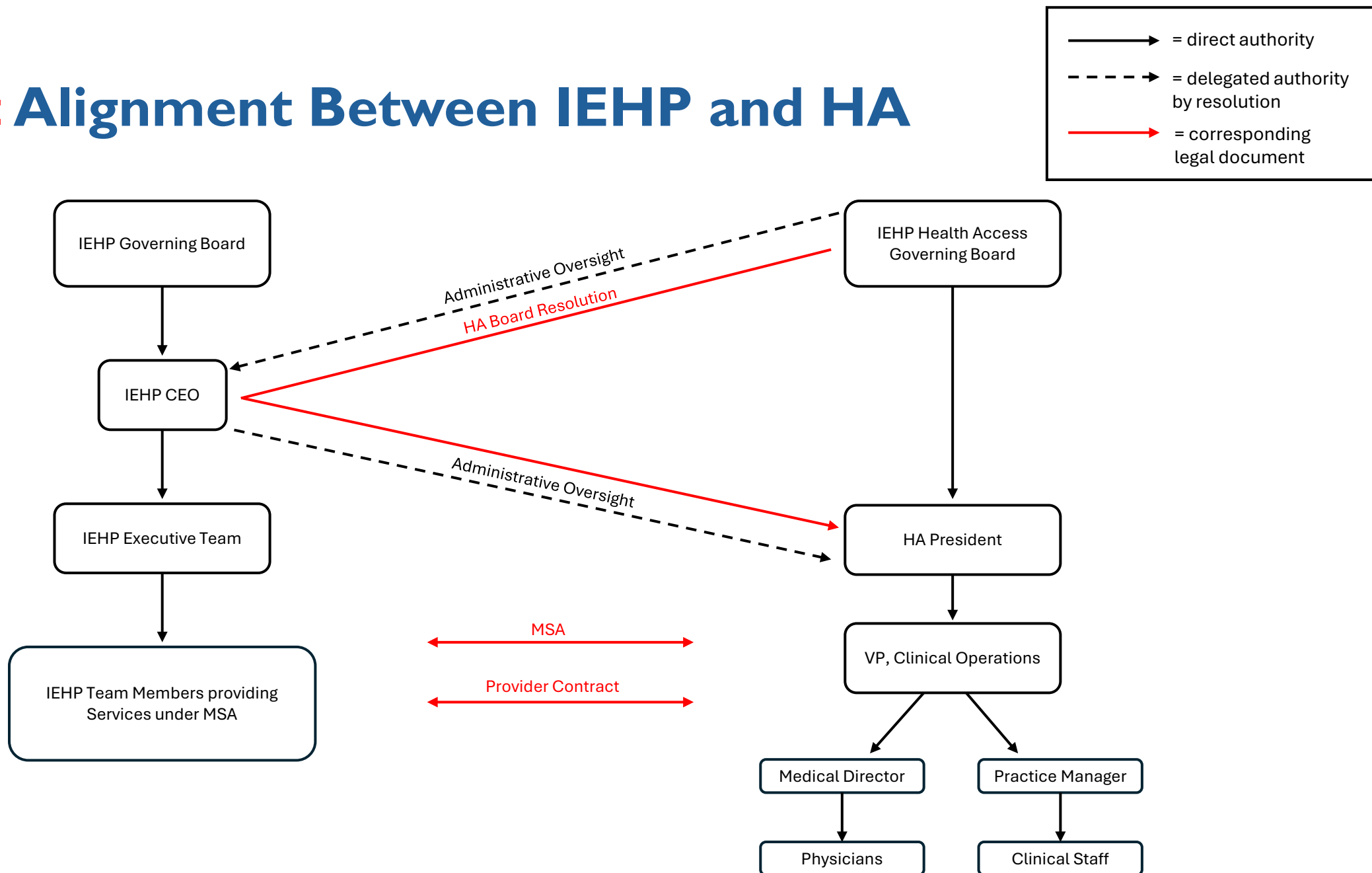


Recommended Legal Structure

- After extensive research and legal consultation, we have arrived at a preferred structure recommendation:
 - Reside within Health Access
- We will bring a formal recommendation to the Health Access Board in the upcoming months.



Draft Alignment Between IEHP and HA



Strategic Road Map & Work Streams

1. Practice Model
2. Clinic Infrastructure
3. Staffing
4. Location
5. Finance



Draft 3 Year Targets (2025-2027)

By the end of 2027:

- Performing 75,000 visits annually.
- Enrollment of 35,000 lives.
- Opened 3 clinics, 2 mobile clinics, a virtual clinic, placed doctors in 4 FQHC locations.
- Hired 31 physicians and 19 AHP's (total 50 FTE's).
- Quality score at the 90th percentile for the Care Division.
- Timely access scores at or greater than the 90th percentile.
- CG-CAHPS (Patient Experience) score exceeds the 75th percentile.



Care Division Advisory Council

- Jennifer Cruikshank: CEO, RUHS Medical Center & Clinics
- Andrew Goldfrach: CEO, Arrowhead Regional Medical Center
- Dolores Green: CEO, Riverside County Medical Association
- Alison Elsner: CEO, San Bernardino County Medical Society
- Dr. Tarek Mahdi: Physician leader from Riverside County
- Dr. Tarek Moqattash: Physician leader from San Bernardino County
- Dr. Jason Lohr: CEO, SAC Health



Next Steps

- Continue designing and building medical group infrastructure.
- Scope out key components of infrastructure including Electronic Medical Records, Mobile Clinic, and design/build out of first clinic.
- Bring forward 2025 capital and operating budgets.
- Update and discussion at the Board Retreat in December.



Questions & Discussion



FINANCE DEPARTMENT

18. REVIEW OF THE MONTHLY FINANCIALS

Recommended Action:

Review and File

Contact:

Keenan Freeman, Chief Financial Officer

Discussion:

Monthly Financials for Period Ending July 31, 2024.

FINANCE DIVISION

July 2024

MONTHLY FINANCIALS

Presented
September 9, 2024



July 2024 Actual vs Budget: Consolidated

	July Month-to-Date			July Year-to-Date		
	Actual	Budget	Variance	Actual	Budget	Variance
Total Revenue	\$ 604,770,939	\$ 579,531,625	\$ 25,239,314	\$ 4,207,003,157	\$ 4,170,569,160	\$ 36,433,997
Total Medical Costs	\$ 637,589,488	\$ 575,192,069	\$ (62,397,419)	\$ 4,044,083,610	\$ 3,864,742,356	\$ (179,341,254)
Total Operating Expenses	\$ 56,636,109	\$ 54,884,082	\$ (1,752,027)	\$ 282,185,409	\$ 285,072,901	\$ 2,887,492
Total Non Operating Income (Expense)	\$ 11,069,905	\$ 9,742,410	\$ 1,327,495	\$ 69,458,083	\$ 51,495,644	\$ 17,962,439
Non-Medical Expenses	\$ 2,603,851	\$ 10,666,666	\$ 8,062,815	\$ 7,439,896	\$ 17,848,359	\$ 10,408,463
Net Surplus (Deficit)	\$ (80,988,603)	\$ (51,468,783)	\$ (29,519,822)	\$ (57,247,675)	\$ 54,401,189	\$ (111,648,863)

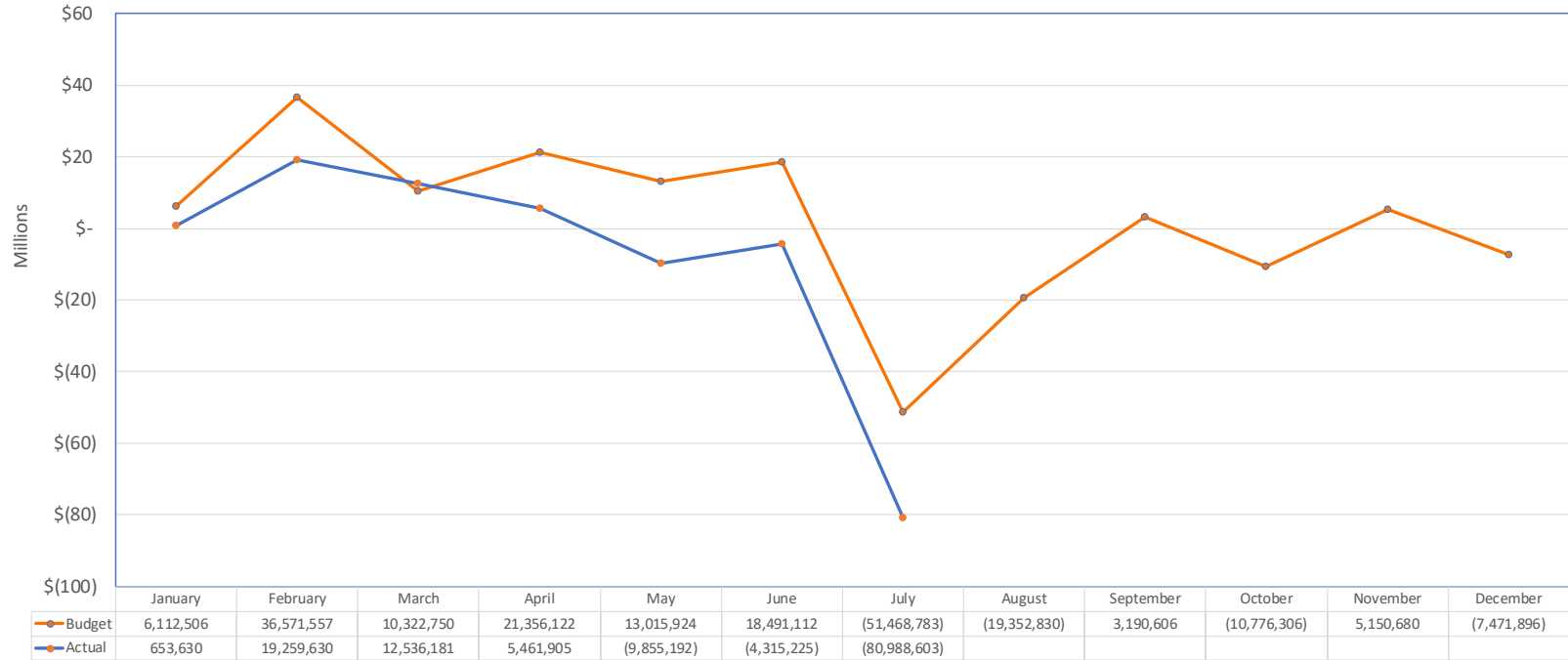
Highlights for the Month:

- The favorable revenue variance compared to budget is primarily due to higher-than-expected LTC Full Duals, Child, and CCA Silver member months, favorable D-SNP Part A/B risk adjustment, and Maternity revenue.
- The unfavorable medical costs variance compared to budget is primarily due to higher-than-expected utilization in FFS claims and prior paid claims restatements partially offset by favorable P4P HQ CY2023 adjustment and capitation expense.
- The favorable non-medical expenses variance compared to budget is primarily due to the Shared Vision Partners program expense partially offset by the Healthcare Scholarship Fund.



Net Surplus Year-Over-Year - Consolidated

Consolidated
Net Surplus by Month (Actuals) - CY 2024
Actual vs. Budget Comparison



Actual vs Budget: Medi-Cal

	July Month-to-Date			July Year-to-Date		
	Actual	Budget	Variance	Actual	Budget	Variance
Total Revenue	\$ 523,678,842	\$ 510,128,536	\$ 13,550,306	\$ 3,684,956,044	\$ 3,685,871,254	\$ (915,210)
Total Medical Costs	\$ 560,314,161	\$ 503,741,133	\$ (56,573,028)	\$ 3,566,678,258	\$ 3,403,898,288	\$ (162,779,970)
Total Operating Expenses	\$ 46,501,172	\$ 45,147,043	\$ (1,354,129)	\$ 228,959,662	\$ 234,267,593	\$ 5,307,931
Total Non Operating Income (Expense)	\$ 2,824,871	\$ 2,912,732	\$ (87,861)	\$ 19,519,515	\$ 20,389,121	\$ (869,606)
Net Surplus (Deficit)	\$ (80,311,620)	\$ (35,846,909)	\$ (44,464,711)	\$ (91,162,360)	\$ 68,094,494	\$ (159,256,854)

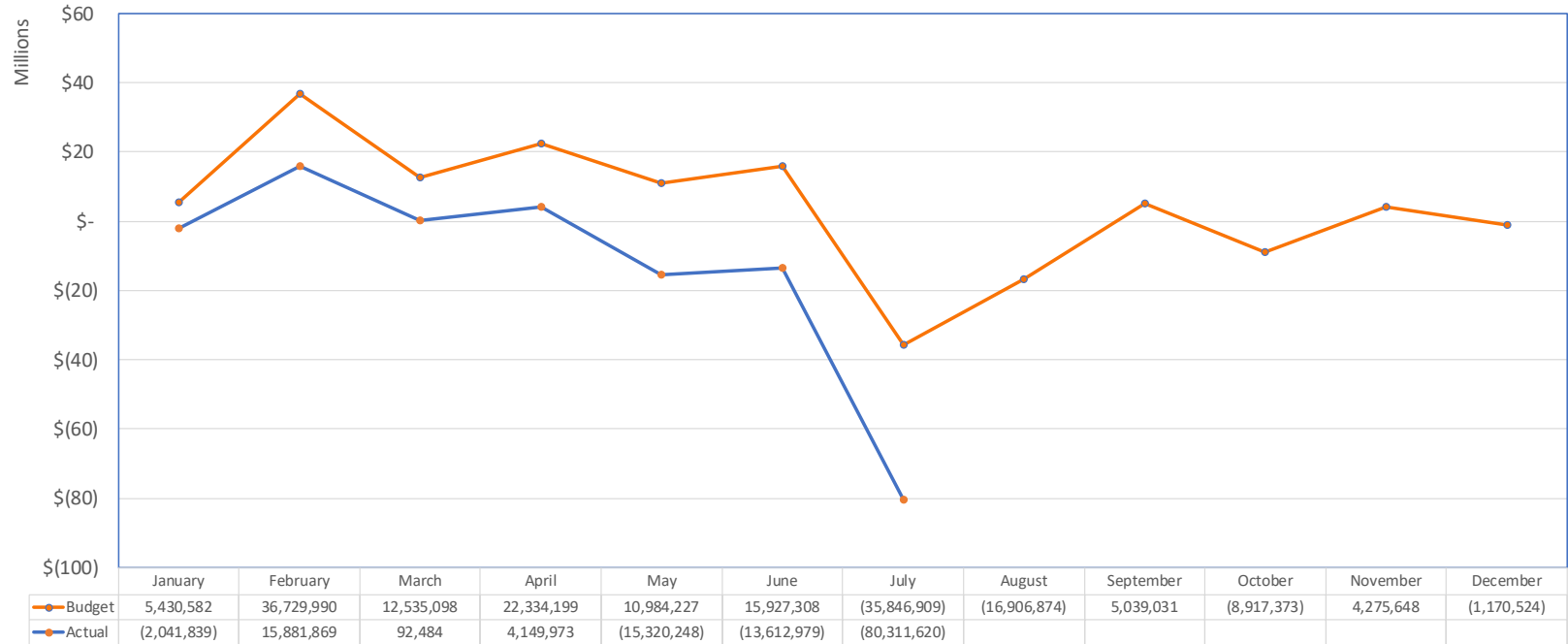
Highlights for the Month:

- The favorable revenue variance compared to budget is primarily due to higher-than-expected LTC Full Duals and Child member months, and favorable Maternity revenue.
- The unfavorable medical costs variance compared to budget is primarily due to higher-than-expected utilization in FFS claims and prior paid claims restatements partially offset by favorable P4P HQ CY2023 adjustment and capitation expense.



Net Surplus Year-Over-Year: Medi-Cal

Medi-Cal
Net Surplus by Month (Actuals) - CY 2024
Actual vs. Budget Comparison



Actual vs Budget: D-SNP

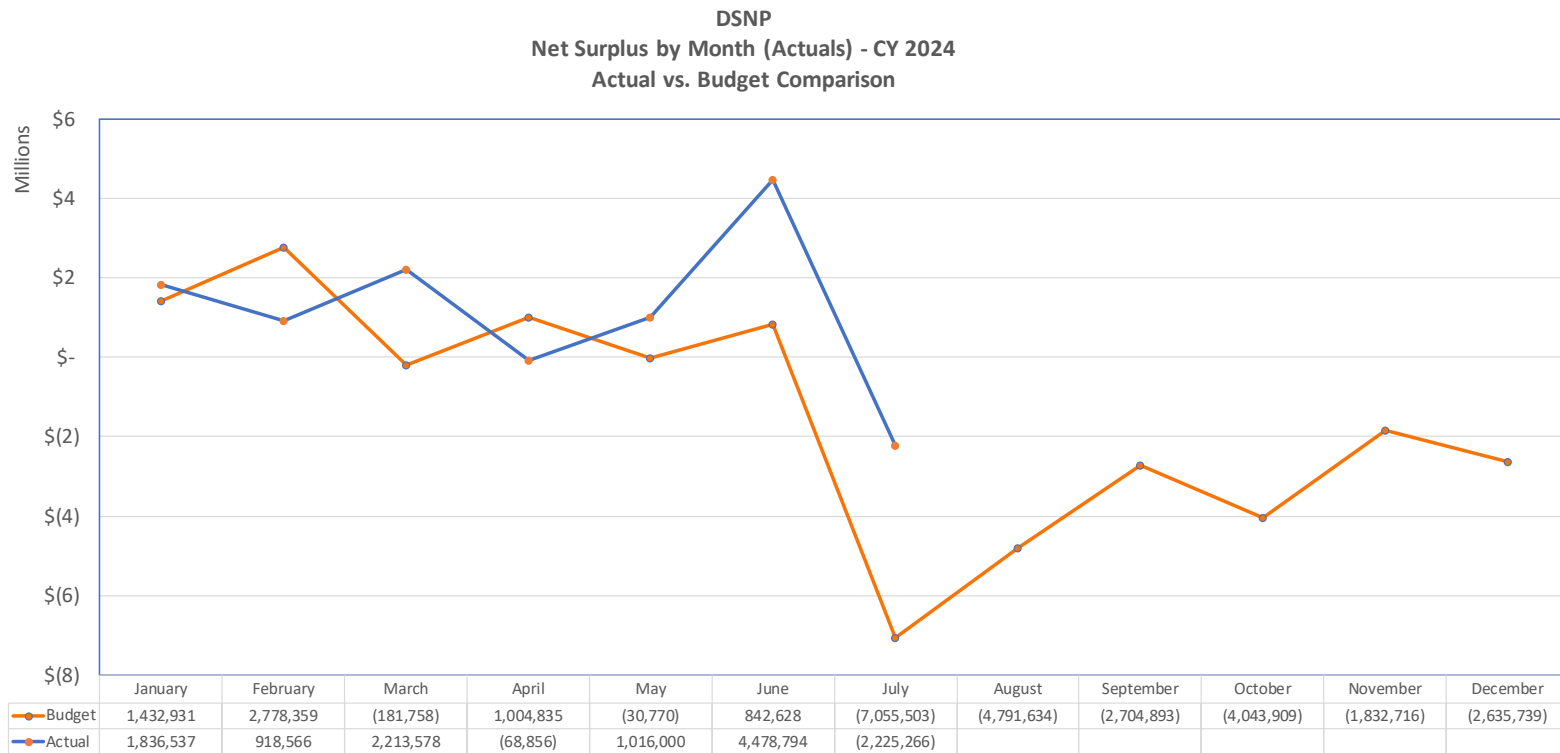
	July Month-to-Date			July Year-to-Date		
	Actual	Budget	Variance	Actual	Budget	Variance
Total Revenue	\$ 72,616,517	\$ 64,223,601	\$ 8,392,916	\$ 467,917,969	\$ 455,391,224	\$ 12,526,745
Total Medical Costs	\$ 68,292,260	\$ 64,446,219	\$ (3,846,041)	\$ 428,590,915	\$ 422,613,992	\$ (5,976,923)
Total Operating Expenses	\$ 6,549,523	\$ 6,832,885	\$ 283,362	\$ 31,157,703	\$ 33,986,510	\$ 2,828,807
Total Non Operating Income (Expense)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Net Surplus (Deficit)	\$ (2,225,266)	\$ (7,055,503)	\$ 4,830,237	\$ 8,169,352	\$ (1,209,278)	\$ 9,378,630

Highlights for the Month:

- The favorable revenue variance compared to budget is primarily due to favorable Part A/B risk adjustment.
- The unfavorable medical costs variance compared to budget is primarily due to higher-than-expected professional claims utilization.



Net Surplus Year-Over-Year: D-SNP



Actual vs Budget: IEHP Covered (CCA)

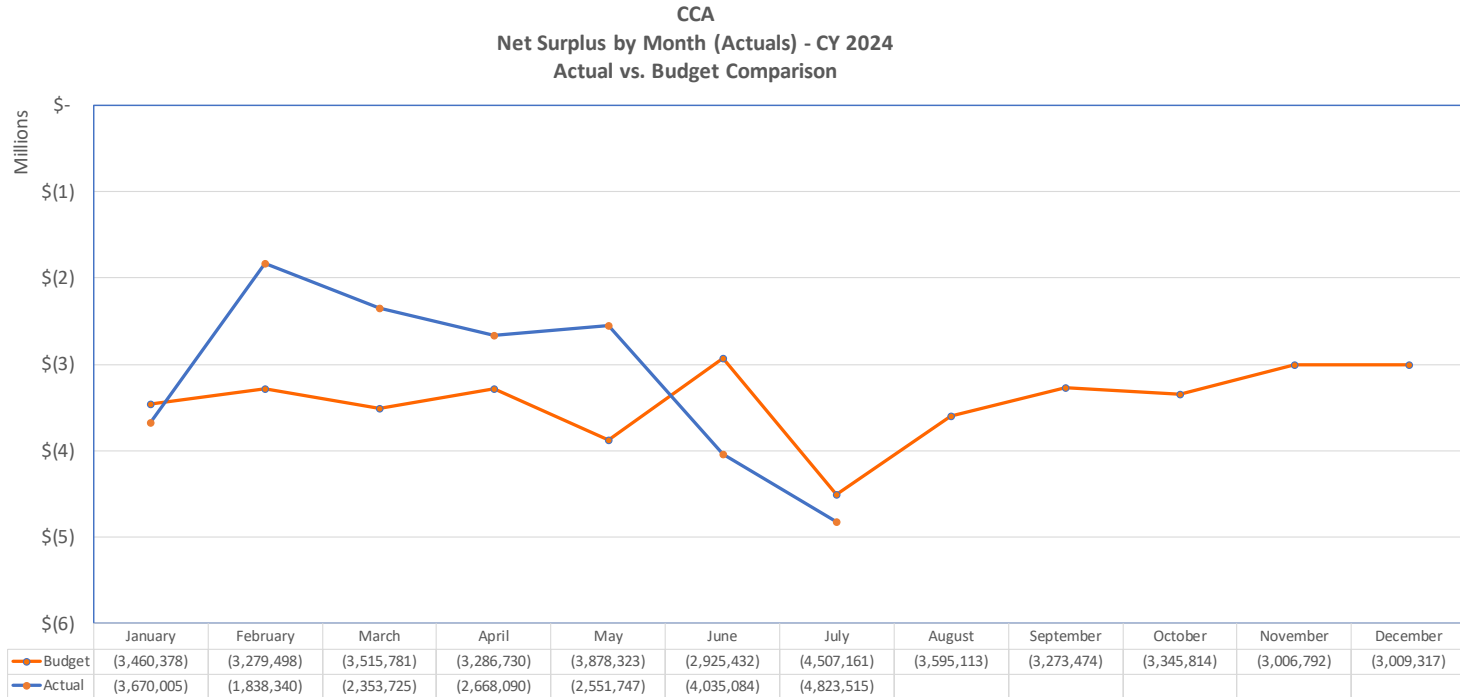
	July Month-to-Date			July Year-to-Date		
	Actual	Budget	Variance	Actual	Budget	Variance
Total Revenue	\$ 8,477,016	\$ 5,179,488	\$ 3,297,528	\$ 47,417,453	\$ 29,306,681	\$ 18,110,772
Total Medical Costs	\$ 9,715,118	\$ 7,004,716	\$ (2,710,402)	\$ 47,289,914	\$ 38,230,076	\$ (9,059,838)
Total Operating Expenses	\$ 3,585,413	\$ 2,681,933	\$ (903,480)	\$ 22,068,045	\$ 15,929,908	\$ (6,138,137)
Total Non Operating Income (Expense)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Net Surplus (Deficit)	\$ (4,823,515)	\$ (4,507,161)	\$ (316,354)	\$ (21,940,506)	\$ (24,853,302)	\$ 2,912,796

Highlights for the Month:

- The favorable revenue variance compared to budget is primarily due to higher-than-expected CCA Silver member months.
- The unfavorable medical cost variance compared to budget is strictly an actuarial best estimate of our claims liability until we have more actual claims experience.



Net Surplus Year-Over-Year: IEHP Covered (CCA)



Balance Sheet: Current Month vs Prior Month

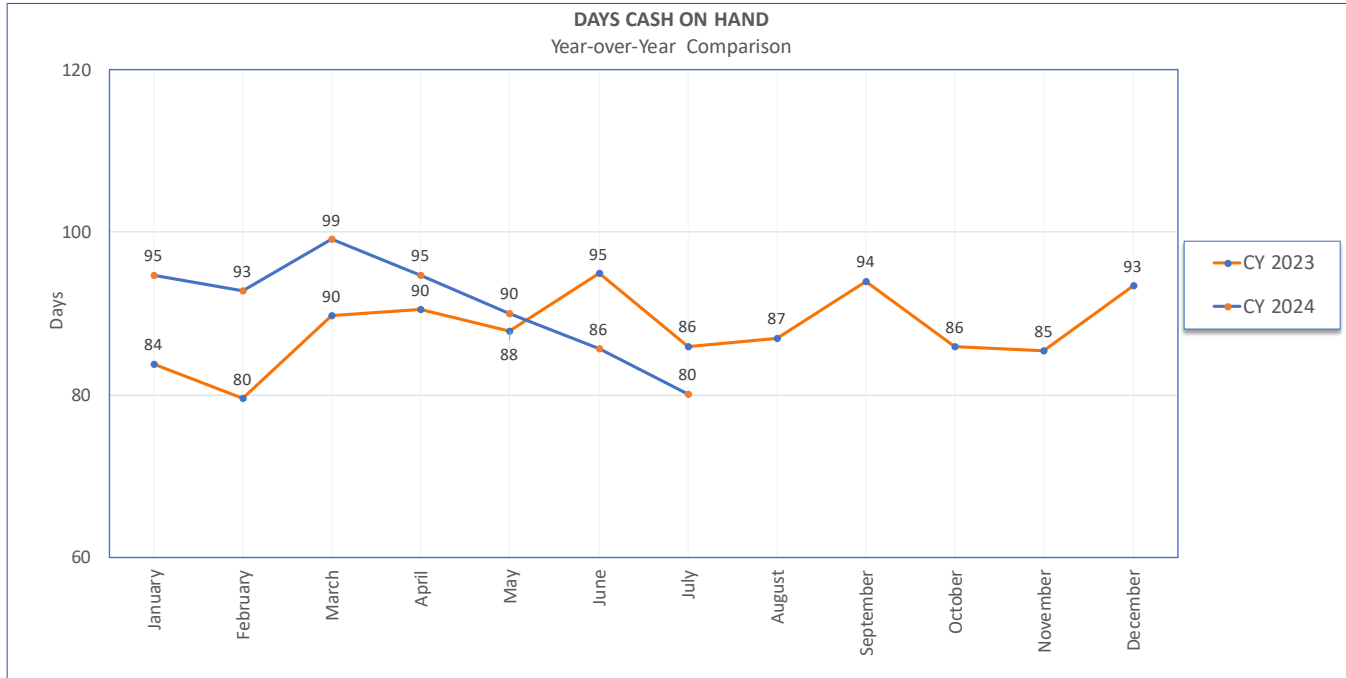
	Jul-24	Jun-24	Variance
<u>Assets and Deferred Outflows</u>			
Current Assets	\$ 2,396,705,263	\$ 2,530,077,741	\$ (133,372,478)
Long Term Receivables	\$ 16,780	\$ 20,076	\$ (3,296)
Capital Assets	\$ 276,132,537	\$ 272,202,146	\$ 3,930,391
Deferred Outflows of Resources	\$ 130,826,110	\$ 130,826,110	\$ -
Net Other Assets	\$ -	\$ -	\$ -
Total Assets and Deferred Outflows	\$ 2,803,680,689	\$ 2,933,126,072	\$ (129,445,383)
<u>Liabilities, Deferred Inflows, and Net Position</u>			
Current Liabilities	\$ 1,352,025,362	\$ 1,401,000,577	\$ (48,975,215)
Long-Term Liabilities	\$ 74,092,996	\$ 73,571,639	\$ 521,357
Deferred Inflows	\$ 392,692	\$ 395,613	\$ (2,922)
Net Position	\$ 1,377,169,639	\$ 1,458,158,243	\$ (80,988,603)
Total Liabilities, Deferred Inflows, and Net Position	\$ 2,803,680,689	\$ 2,933,126,072	\$ (129,445,383)

Highlights for the Month:

- Decrease in Current Assets is primarily due to decrease in Cash for -\$78M net MCO tax payment, -\$84M increase in paid claims and other payments partially offset by \$99M CMS payment and other receipts.
- Decrease in Current Liabilities is primarily due to decrease in Due to DHCS for \$84M net MCO tax partially offset by -\$25M IBNR accrual.



Days Cash on Hand



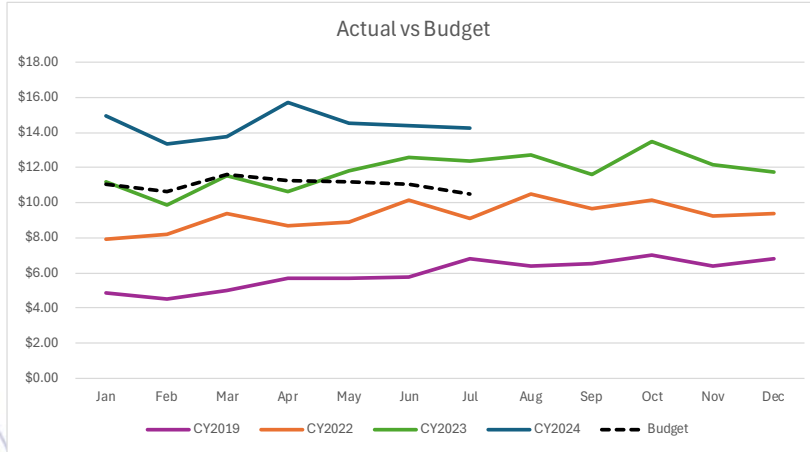
Highlights for the Month:

- Decrease is primarily due to \$148M increase in expenses.

Note: Days Cash on Hand calculation excludes pass-thru receipts and payments effective January 2023 and MCO tax effective January 2024.



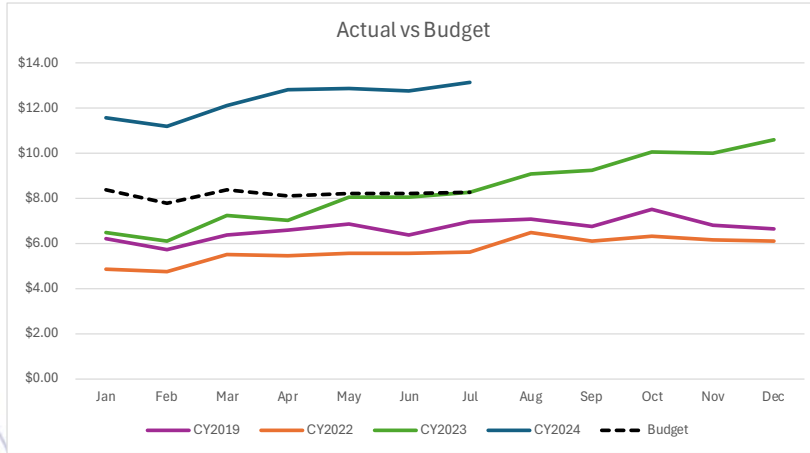
Behavioral Health Therapy – Autism



Service Month	Incurred PMPM				Trends		Variance to
	CY2022	CY2023	CY2024	Budget	CY2023	CY2024	Budget
Jan	\$7.91	\$11.17	\$14.98	\$11.08	41.2%	34.1%	35.2%
Feb	\$8.17	\$9.83	\$13.37	\$10.64	20.3%	36.0%	25.6%
Mar	\$9.40	\$11.55	\$13.79	\$11.63	22.9%	19.4%	18.5%
Apr	\$8.68	\$10.63	\$15.68	\$11.28	22.5%	47.6%	39.1%
May	\$8.89	\$11.78	\$14.56	\$11.20	32.5%	23.6%	30.0%
Jun	\$10.15	\$12.56	\$14.40	\$11.05	23.8%	14.7%	30.4%
Jul	\$9.11	\$12.37	\$14.23	\$10.47	35.8%	15.1%	36.0%
Aug	\$10.52	\$12.69			20.6%		
Sep	\$9.68	\$11.58			19.7%		
Oct	\$10.11	\$13.49			33.4%		
Nov	\$9.22	\$12.14			31.7%		
Dec	\$9.41	\$11.76			25.0%		



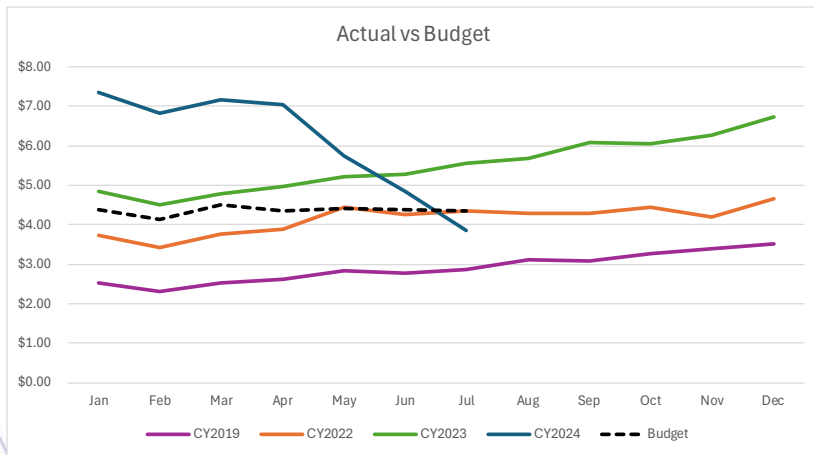
Transportation



Service Month	Incurred PMPM				Trends		Variance to
	CY2022	CY2023	CY2024	Budget	CY2023	CY2024	Budget
Jan	\$4.85	\$6.47	\$11.54	\$8.37	33.4%	78.4%	37.8%
Feb	\$4.73	\$6.09	\$11.17	\$7.76	28.8%	83.4%	43.9%
Mar	\$5.51	\$7.24	\$12.13	\$8.39	31.3%	67.6%	44.6%
Apr	\$5.46	\$7.00	\$12.81	\$8.11	28.3%	83.1%	58.1%
May	\$5.54	\$8.03	\$12.88	\$8.23	44.9%	60.4%	56.6%
Jun	\$5.55	\$8.03	\$12.74	\$8.19	44.5%	58.7%	55.5%
Jul	\$5.61	\$8.29	\$13.16	\$8.26	47.9%	58.8%	59.4%
Aug	\$6.47	\$9.07			40.2%		
Sep	\$6.09	\$9.26			51.9%		
Oct	\$6.31	\$10.04			59.0%		
Nov	\$6.16	\$10.02			62.6%		
Dec	\$6.12	\$10.62			73.5%		



Home Health



Service Month	Incurred PMPM				Trends		Variance to
	CY2022	CY2023	CY2024	Budget	CY2023	CY2024	Budget
Jan	\$3.74	\$4.84	\$7.35	\$4.39	29.4%	51.8%	67.3%
Feb	\$3.41	\$4.50	\$6.82	\$4.15	31.9%	51.6%	64.6%
Mar	\$3.75	\$4.79	\$7.17	\$4.51	27.8%	49.5%	59.0%
Apr	\$3.87	\$4.97	\$7.05	\$4.35	28.4%	41.8%	62.0%
May	\$4.44	\$5.21	\$5.76	\$4.40	17.3%	10.5%	30.9%
Jun	\$4.25	\$5.29	\$4.85	\$4.37	24.6%	-8.3%	11.0%
Jul	\$4.36	\$5.57	\$3.85	\$4.36	27.9%	-31.0%	-11.8%
Aug	\$4.28	\$5.68			32.6%		
Sep	\$4.28	\$6.08			42.2%		
Oct	\$4.45	\$6.07			36.2%		
Nov	\$4.21	\$6.27			48.9%		
Dec	\$4.68	\$6.72			43.7%		



Acronyms & Definitions

BHT – Behavioral Health Treatment
CCA – Covered California
CY– Calendar Year
DHCS – Department of Health Care Services
D-SNP – Dual Eligible Special Needs Plan (Medicare and Medi-Cal)
FFS – Fee-for-Service
G&A – General & Administrative
HCBS – Home and Community-Based Services
HHIP – Housing and Homelessness Incentive Program
HQ – Hospital Quality
IBNR – Incurred But Not Reported
IGT – Intergovernmental Transfers
LTC – Long Term Care
MCE – Adult Medi-Cal Expansion
MCO – Managed Care Organization
MLR – Medical Loss Ratio
MOT – Major Organ Transplant
P4P HQ – Pay for Performance Hospital Quality
PHDP – Private Hospital Directed Payment
QIP – Quality Incentive Pool
SIS/UIS – Satisfactory Immigration Status/Unsatisfactory Immigration Status
SPD – Seniors and Persons with Disabilities
YTD – Year-to-date

