



IEHP  
 February 9, 2026, IEHP Health Access Governing  
 Board Meeting  
 February 09, 2026  
 9:00 am Pacific Time

## **Board Report #369**

**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 BoardServices@IEHP.org during regular business hours of IEHP (M - F 8:00 a.m. – 5:00 p.m.)*

### **PUBLIC COMMENT AT IEHP HEALTH ACCESS GOVERNING BOARD MEETINGS:**

The meeting of IEHP Health Access 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. 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 or by contacting the Secretary to the Governing Board by phone at (909) 736-6891 or by email at BoardServices@iehp.org.

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

**\*\* LIVE STREAMING FOR THIS MEETING \*\***

**<https://youtube.com/live/Q2hP6buBI2M?feature=share>**

### **AGENDA**

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

VII. 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 IEHP Health Access despite their affiliation with both public entities.*

VIII. Adopt and Approve the Meeting Minutes from the November 13, 2025, Regular Meeting of the Governing Board of IEHP Health Access  
IEHP HA November 13, 2025 Meeting Minutes - Draft

IX. CONSENT AGENDA

**ADMINISTRATION (Edward Juhn, M.D.)**

X. POLICY AGENDA AND STATUS REPORT ON AGENCY OPERATIONS

**FINANCE DEPARTMENT (Edward Juhn, M.D.)**

1. Monthly Financial Report

i. Health Access Financial Report 202512

XI. Comments from the Public on Matters not on the Agenda

XII. Board Member Comments

XIII. Closed Session

XIV. Adjournment

XV. The next meeting of the IEHP Health Access Governing Board will be held on March 9, 2026, at the Dr. Bradley P. Gilbert Center for Learning and Innovation in Rancho Cucamonga

**THE GOVERNING BOARD  
OF THE  
IEHP HEALTH ACCESS**

Inland Empire Health Plan  
Dr. Bradley P Gilbert Center for  
Learning and Innovation – Board Room  
9500 Cleveland Avenue  
Rancho Cucamonga, CA 91730

**DRAFT - MINUTES OF THE NOVEMBER 13, 2025, REGULAR MEETING**

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**Governing Board Members Present:**

Supervisor Yxstian Gutierrez  
Supervisor Karen Spiegel  
Supervisor Jesse Armendarez

Eileen Zorn  
Drew Williams  
Dr. Dan Anderson

**Governing Board Members Absent:** Supervisor Curt Hagman

**Governing Board Member Vacancy:** None

**Inland Empire Health Plan Employees and Legal Counsel Present:**

Jarrod McNaughton, Chief Executive Officer  
Edward Juhn, Chief Medical Officer  
Sylvia Lozano, Chief Transformation Officer  
Michelle Rai, Communications & Marketing  
Officer  
Chief Supriya Sood, Chief People Officer  
Susie White, Chief Operations Officer

Anna Wang, Esq., Vice President, General Counsel  
Raymond Mistica, Esq. Deputy County Counsel  
Victoria Ostermann, Director of Government  
Affairs Administrator  
Annette Taylor, Secretary to the Governing Board

**IEHP Staff Absent:** Genia Fick, Chief Quality Officer

**Guests:**

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- I. Call to Order:  
Chair Gutierrez called the August 11, 2025, regular meeting of IEHP Health Access Governing Board to order at 9:02 a.m.
- II. Pledge of Allegiance:
- III. Roll Call
- IV. Agenda Changes: None
- V. Public Comment: None
- VI. Conflict of Interest Disclosure: None

MEETING MINUTES - DRAFT

VII. Adopt and Approve the Meeting Minutes from August 11, 2025, Meeting of the Governing Board of the IEHP Health Access Governing Board.

**Action: On motion of Member Anderson and seconded by Member Armendarez, the Meeting Minutes from the August 11, 2025, Regular Meeting of the Governing Board of IEHP Health Access were approved as presented. (Anderson/Armendarez; Hagman Absent, Zorn not present).**

VIII. IEHP Health Access:

Consent Agenda:

**Action: On motion of Member Anderson and seconded by Member Armendarez, Item 1 on the IEHP Health Access Consent Agenda was approved as presented. (Anderson/Armendarez; Hagman Absent, Zorn not present).**

IX. POLICY AGENDA AND STATUS REPORT ON AGENCY OPERATIONS

FINANCE DEPARTMENT (Edward Juhn, M.D.)

Dr. Juhn presented the following Finance section of the Status Report:

Item 2: Monthly Financial Review:

*Dr. Juhn, Chief Executive Officer, presented the financials for PE093025.*

X. Comments from the Public on Matters Not on The Agenda: None

XI. Board Comments: No comments

XII. Adjournment

*Gutierrez adjourned the November 13, 2025, IEHP Health Access Governing Board meeting at 9:11 a.m.*

The Approved Governing Board Minutes for November 13, 2025, will have a copy of the IEHP Health Access Board Report #366 attached

These Meeting Minutes were duly adopted and approved on February 9, 2025.

\_\_\_\_\_  
Annette Taylor  
Secretary to the IEHP Governing Board

**Department: FINANCE**

**A.1. MONTHLY FINANCIAL REVIEW**

**Chief:** Edward Juhn, M.D., Chief Executive Officer

**Background & Discussion:**

Monthly Financials for Period Ending December 31, 2025

**Recommendation(s):**

Review and File

# Health Access

December 2025  
Monthly Financials

# December 2025: Actual vs Budget

	December Month-to-Date			December Year-to-Date		
	Actual	Budget	Variance	Actual	Budget	Variance
Revenue	\$ 1,042,789	\$ 1,733,815	\$ (691,026)	\$ 13,498,116	\$ 17,503,080	\$ (4,004,964)
Operating Expenses	783,754	1,083,933	300,179	9,044,544	12,007,200	2,962,656
Non Operating Income (Expense)	21,330	-	21,330	228,082	-	228,082
<b>Net Surplus (Deficit)</b>	<b>\$ 280,364</b>	<b>\$ 649,882</b>	<b>\$ (369,518)</b>	<b>\$ 4,681,655</b>	<b>\$ 5,495,880</b>	<b>\$ (814,225)</b>

## Highlights for the Month:

- The unfavorable Revenue variance compared to budget is primarily driven by lower-than-expected Adult members stemming from the following reasons:
  - Higher number of Team Member absences in December (e.g. due to illness, vacation)
  - ECM Care Team unfilled vacancies
- The favorable Operating Expenses variance compared to budget is due to Care Division's expenses are lower than expected.
- The favorable Non Operating Income (Expense) variance compared to budget is due to unbudgeted interest income.

\*Differences are due to rounding

# December 2025: Current Month vs. Prior Month

	Dec-25	Nov-25	Variance
Revenue	\$ 1,042,789	\$ 1,090,860	\$ (48,071)
Operating Expenses	783,754	743,284	(40,470)
Non Operating Income (Expense)	21,330	19,400	1,930
<b>Net Surplus (Deficit)</b>	<b>\$ 280,364</b>	<b>\$ 366,976</b>	<b>\$ (86,612)</b>

## Highlights for the Month:

- Decrease in Revenue is primarily due to reversal of fee-for-service outreach adjustments.
- Increase in Operating Expenses is primarily due to outside service costs in the Care Division.

\*Differences are due to rounding

# December 2025: Three Month Trend

	Income Statement - Three Months Trend		
	Oct-25	Nov-25	Dec-25
Revenue	\$ 1,402,240	\$ 1,090,860	\$ 1,042,789
Operating Expenses	762,370	743,284	783,754
Non Operating Income (Expense)	19,500	19,400	21,330
<b>Net Surplus (Deficit)</b>	<b>\$ 659,370</b>	<b>\$ 366,976</b>	<b>\$ 280,364</b>

**Trend Highlights:**

- Decrease in Revenue is primarily due to reversal of fee-for-service outreach adjustments.
- Increase in Operating Expenses is primarily due to outside service costs in the Care Division.

\*Differences are due to rounding

# Balance Sheet: Current Month vs. Prior Month

	Dec-25	Nov-25	Variance
<b>Assets</b>			
Current Assets	\$ 7,447,238	\$ 7,147,030	\$ 300,208
Cash	7,131,518	6,383,040	748,478
Accounts Receivable	255,320	678,371	(423,051)
Other Receivables	60,400	85,619	(25,219)
Capital Assets	7,223	7,311	(88)
<b>Total Assets</b>	<b>\$ 7,454,460</b>	<b>\$ 7,154,341</b>	<b>\$ 300,119</b>
<b>Liabilities, and Net Position</b>			
Liabilities	\$ 31,527	\$ 11,772	\$ 19,755
Current Liabilities	31,527	11,772	19,755
Net Position	7,422,933	7,142,569	280,364
<b>Total Liabilities, and Net Position</b>	<b>\$ 7,454,460</b>	<b>\$ 7,154,341</b>	<b>\$ 300,119</b>

## Highlights for the Month:

- Increase in Cash primarily due to capitation payment received partially offset by management fee paid.
- Decrease in Accounts Receivable due to capitation accrual and payment received for VBP CY2025 (CY2024 Bridge Period).

\*Differences are due to rounding

# Cash Flow: Current Month vs. Prior Month

	Dec-25	Nov-25	Variance
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>			
Revenue	\$ 1,465,840	\$ 953,320	\$ 512,520
Operation Expenses	(763,911)	(743,196)	(20,715)
Net cash provided (used) by operating activities	701,929	210,124	491,805
<b>CASH FLOWS USED IN CAPITAL FINANCING AND RELATED ACTIVITIES</b>			
Net cash used in capital financing activities	-	(7,399)	7,399
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>			
Net cash provided by investing activities	46,549	-	46,549
<b>Net increase (decrease) in cash and cash equivalents</b>	<b>748,478</b>	<b>202,725</b>	<b>545,753</b>
<b>Cash, Beginning Balance</b>	<b>6,383,040</b>	<b>6,180,315</b>	<b>202,725</b>
<b>Cash, Ending Balance</b>	<b>\$ 7,131,518</b>	<b>\$ 6,383,040</b>	<b>\$ 748,478</b>

## Highlights for the Month:

- Increase in Cash primarily due to capitation payment received partially offset by management fee paid.