A VISION OF VIBRANT HEALTH

INLAND EMPIRE HEALTH PLAN

2022 QUALITY REPORT





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Message From Our CEO and CQO



Jarrod McNaughton, MBA, FACHE Chief Executive Officer



Edward Juhn, MD, MBA, MPH Chief Quality Officer

t Inland Empire Health Plan (IEHP), we believe our Members deserve the highest quality of care so they can achieve their best possible health. We are committed to providing exceptional services and recognizing new opportunities to improve the care experience.

Simply put, when we are at our best so are those we serve.

The COVID-19 pandemic turned our world upside down and Members needed us to show up. From donating 2.4 million Personal Protective Equipment units to hosting a San Bernardino County COVID-19 vaccine clinic at our headquarters, IEHP took an active role in helping our Members and the community stay healthy during the pandemic.

In addition, we increased our commitment to support health equity through new initiatives, such as the Final Administrative Risk Stratification Tool. This tool combines IEHP's current internal clinical risk stratification algorithm with the California Healthy Places Index (HPI) to address clinical, communitylevel and social factors that may influence a Member's overall health outcome.

We are also beginning to look at quality in more transformative ways. This includes learning how quality ratings and performance, health care delivery, data and analytics, and experience can be more connected in service to delivering on our Mission, Vision and Values.

To ensure we are on the right path, we must be held accountable to ourselves and those we serve by being transparent when it comes to our quality performance.

This year's Quality Report showcases our most recent quality performance results, outlines new quality-driven initiatives, and highlights our Providers and IEHP Team Members who work hard to make a positive difference in the lives of our Members.

Overall, our performance results show that quality cannot happen without dedication, teamwork and perseverance. It is a joint effort that needs support from within and beyond IEHP. Your continued partnership is appreciated, and we thank you for everything you do to help us care for our communities.

Because of your best efforts, our Members can live their best lives.

Sincerely,

Jarrod McNaughton, MBA, FACHE

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Chief Executive Officer

Edward Juhn, MD, MBA, MPH Chief Quality Officer



nland Empire Health Plan (IEHP) is a top-10 largest Medicaid health plan and the largest not-for-profit Medicare-Medicaid plan in the nation. As the region's first Medi-Cal managed care plan, we currently serve more than 1.5 million residents in Riverside and San Bernardino counties.

For 25 years, we have worked to improve access to quality, affordable health care for low-income Inland Empire residents. Our guiding principle is to always put the needs of our Members first. In collaboration with our Providers, our counties and our community partners, we are committed to improving the delivery of quality health care services for those who need them most.

We will not rest in our journey toward innovation and excellence.

OUR MISSION



We heal and inspire the human spirit.

OUR VISION



We will not rest until our communities enjoy optimal care and vibrant health.

Our Mission, Vision and Values

ur Mission is why we exist. It is our ultimate purpose. A powerful mission transcends the past, present and future. It is both timely and timeless. Our Vision is a brief description of our desired, intentionally set future. A great vision harnesses the very best of our talents and capabilities

into a challenging but achievable future. Our Values are prioritized characteristics necessary to achieve our desired vision. Effective values are not an all-inclusive list of great human attributes, but key ingredients needed to reach our preferred future state.

OUR VALUES

We do the right thing by:



Placing our Members at the center of our universe.



Unleashing our creativity and courage to improve health and well-being.



Bringing focus and accountability to our work.



Never wavering in our commitment to our Members, Providers, Partners and each other.

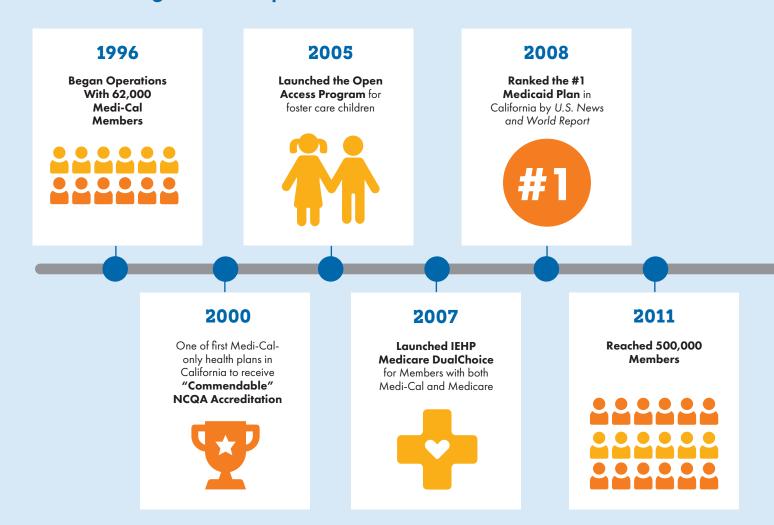
OUR LEGACY OF SERVICE

wenty-five years ago, IEHP became the region's first
Medi-Cal managed care plan. The roots of our beginning
sprouted from a revolutionary idea to create a world-class
health plan dedicated to mothers and children in the Inland
Empire, build an accessible network of health care Providers to
deliver high quality care, develop innovative programs that would
bring the community together, and promote a team culture that is
collaborative and does the right thing.

Even back then, everything IEHP did was centered on what was best for our Members. Early initiatives included the launch of the Healthy Families program, and then Healthy Kids, with services designed and dedicated to caring for those most in need. It is a legacy that continues to this day.

In our first two decades, we grew from 62,000 Members to more than 1.5 million. Our network of Providers has expanded

IEHP at a glance: September 1996 — Present



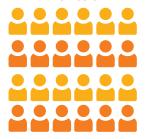
to more than 6,500. And our Mission is delivered by more than 2,700 dedicated Team Members.

IEHP has evolved and transformed in so many ways since we first opened our doors. Yet, there is one thing that will never change: our Mission to heal and inspire those we serve.



2015

Reached 1 Million Members



2019

Launched Health Homes Program to

support Members who have complex health issues



2021

Celebrated 25 Years of Service to the Inland Empire region

25

2018

Housing Program Initiative Opened

to Members in need of permanent housing, paired with management of health care services



2021

IEHP Served as a COVID-19 Vaccine Super Site

in partnership with San Bernardino County, with nearly 40,000 vaccines administered



2022

Reached 1.5 Million Members

IEHP adds 47,000 new Members in previously excluded zip code regions



OUR MEMBERS

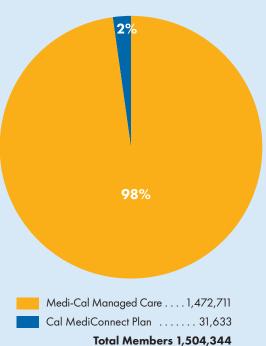
n 2022, IEHP experienced the highest enrollment in its 25-year history with more than 1.5 million Members — mainly attributed to the California governor's executive order to temporarily suspend Medi-Cal disenrollment during the COVID-19 pandemic.



IEHP Product and Enrollment Snapshot

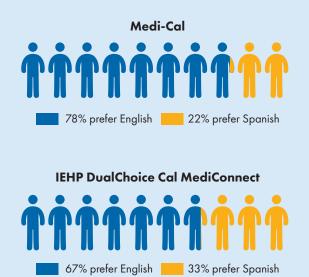
IEHP PRODUCTS

IEHP offers two health insurance products:



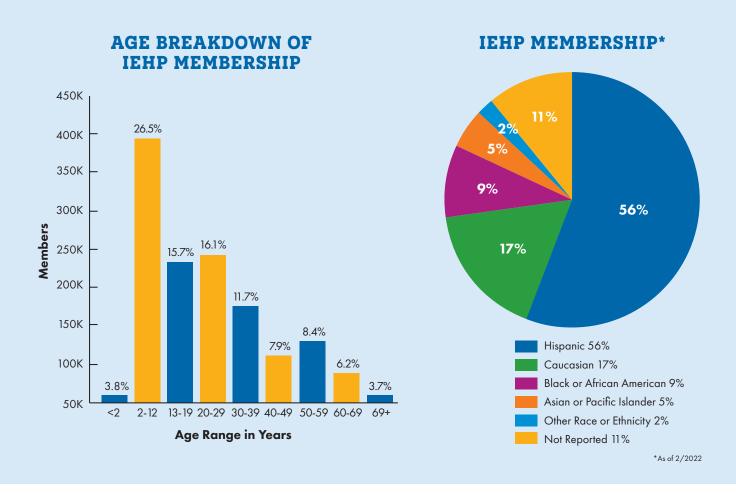
*As of 2/2022

LANGUAGE



*As of 2/2022



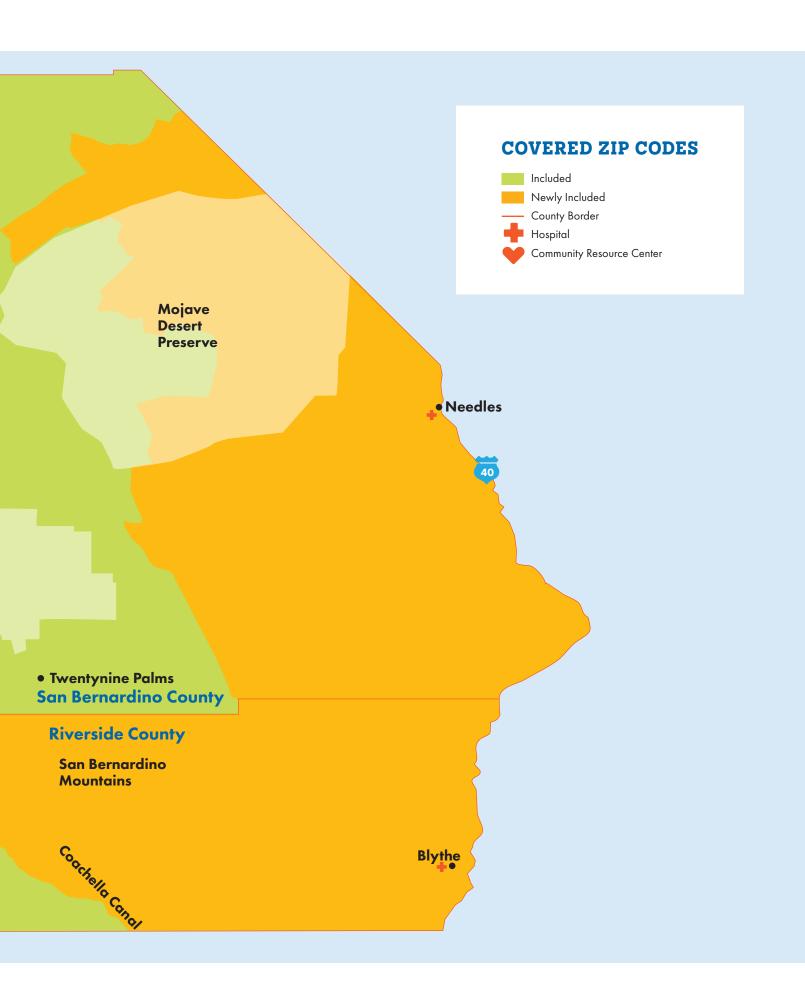


LOCATIONS

EHP Members reside in six core regions:
San Bernardino Proper, West San
Bernardino, Riverside Proper, Temecula/
Corona/Hemet, High Desert and Low Desert.
Throughout this region, IEHP has contracted with all available hospitals to ensure that IEHP Members have increased access to care across the two counties. IEHP's service area for Medi-Cal Members expanded in 2022 to include zip codes in the San Bernardino and Riverside counties that were previously excluded from IEHP's service area.

This expansion reinforces the continued importance of supporting Members in the Inland Empire.







OUR PROVIDERS

EHP partners with more than 6,500 health care Providers to coordinate care for our Members. Alongside our growing network of Providers, we are committed to improving health and health care access in the Inland Empire through impactful incentives and strategic support.

IMPACTFUL INCENTIVES

IEHP's Pay for Performance (P4P) programs are designed to reward network Providers who meet key quality improvement measure goals. The first Provider incentive program launched in 2000 and focused on the administration of immunizations prior to a Member's second birthday. The program has since evolved into other areas of care, including well-child visits, diabetes care, asthma care, cancer screenings, access to care, Member satisfaction, perinatal care and more.

IEHP's current Global Quality Pay for Performance program (GQP4P) offers incentives to Providers who demonstrate year-over-year improvement and achieve top-tier quality

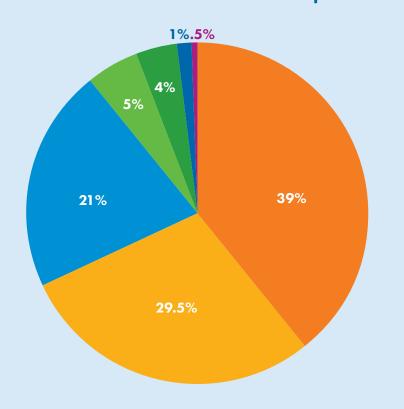
performance levels in key quality performance measures across multiple domains of care, including preventive and chronic care.

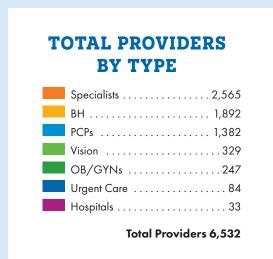
To significantly emphasize IEHP's commitment to this important work, the P4P program has increased its funding to more than \$260 million for program year 2022. IEHP currently offers six Provider P4P Programs:

- Global Quality P4P Primary Care Providers
- Global Quality P4P Independent Physician Associations
- Hospital P4P Program
- OB P4P Program
- Medicare P4P IEHP Direct Program
- DualChoice Annual Visit P4P IEHP Direct Program

Since the inception of the P4P program, IEHP has paid more than \$500 million in incentives to our valued Providers and has seen demonstrated improvement in IEHP Members' health outcomes and health plan measure performance.

Provider Network Snapshot





STRATEGIC SUPPORT

IEHP continues to address the Inland Empire's Provider shortage through our Health Care Scholarship Fund (HSF). Announced in 2020, the fund is a \$40 million, five-year commitment that will help develop a pipeline of health care professionals to care for the Medi-Cal population in the Inland Empire upon completion of their education.

In addition, our groundbreaking Network Expansion Fund (NEF) uses specially designated dollars to attract board-certified primary care Physicians, Specialists and mid-level Providers to the Inland Empire, addressing the region's Provider shortage to improve access to care for our 1.5 million IEHP Members. In 2021, \$10 million in program funding was approved, raising the total program budget to \$56 million since its start in 2014. To date, more than 383 Providers have been recruited as a direct result of this program.



"IEHP is always looking for meaningful and innovative ways to support our Providers in their efforts to care for our Members."

> - DR. EDWARD JUHN, **CHIEF QUALITY OFFICER**





OUR STRATEGIC PLAN

ur Mission, Vision and Values give us clarity of purpose and sets the stage for the important work that needs to be done to best serve our Members, Providers and community.

In 2021, IEHP launched a bold and dynamic Strategic Plan — a roadmap to guide our actions and focus our collective efforts on what will be most impactful to our Members. Over the next 10 years, the Strategic Plan will lead us toward our ultimate destination: to achieve the Vision of our communities enjoying optimal care and vibrant health.

Achieving this Vision requires specific and clear definitions and measures of success. We call these our "2030 Vision Commitments."

2030 Vision Commitments

OPTIMAL CARE



Optimal Care means that our Members and the residents of the Inland Empire are engaged in their care and can trust the following across entities providing care:

- Clinical care quality and outcomes exceed national benchmarks, and our region has created evidence-based best practices that are consistently followed.
- Care is accessible, anticipatory and seamlessly coordinated from prevention through the whole care continuum.
- Care is built on cultural humility and respectful, holistic, human-centered experiences.

By the end of 2030, 100 percent of our Members are receiving Optimal Care as defined above, and we have greatly influenced care for all who call the Inland Empire home.

VIBRANT HEALTH

Vibrant Health means that our Members and the residents of the Inland Empire have access to a better, more joyful life because:

- Exposure to the root causes of ill health is significantly reduced (e.g. by addressing harmful environmental, social and behavioral patterns).
- · Core needs are identified and increasingly met (e.g. by proactively addressing food, shelter and safety challenges).
- Health is equitably experienced across our diverse communities.

By the end of 2030, a collaborative multi-sector task force has created and implemented a community health and well-being model and is on track with mutually agreed-upon targets.



ORGANIZATIONAL STRENGTH



Organizational Strength means that IEHP is continuously improving and advancing our organization in support of Optimal Care and Vibrant Health through:

- Systems thinking that aligns our Mission, people, operations, technology and financial performance.
- Next generation innovation that drives us to make big leaps forward.
- Growth and new business development that expands our ability to serve.

By the end of 2030, we have built a transformational and resilient infrastructure that empowers us to deliver success.

Throughout this Quality Report, we will identify how our quality performance and initiatives support the 2030 Vision Commitments. Look for the following icons to see how each Vision Commitment is connected:







ORGANIZATIONAL STRENGTH



OUR ROAD TO TRANSFORMATION

EHP continues to advocate for the highest quality of care for our Members, and we developed a new Quality Evolve Framework to support this effort. This flexible framework connects IEHP's quality ratings and performance with our approach to health care delivery, data and analytics, and experience.

By allowing us to see how quality interconnects with key areas, we can advance our Strategic Plan and work toward a transformational future state, where people can enjoy their best possible health.

Quality Evolve Framework











IEHP donated 2.4 million units of Personal Protective Equipment to local hospitals during the COVID-19 pandemic.

OUR RESPONSE TO COVID-19

hen the COVID-19 pandemic hit the United States in early 2020, no one could have predicted the toll it would take on our lives. IEHP remained committed to going above and beyond to ensure our Members maintained access to the quality services they needed to stay healthy in body, mind and spirit.

During this challenging time, IEHP launched two critical initiatives to bridge care gaps for our at-risk Members.

Our Behavioral Health and Care Management Teams spearheaded the first initiative by calling Members to ask how they were and what they needed. Nearly 29,000 Members were contacted and provided with CDC guidelines, pharmacy information, access to critical resources, and services such as food or housing assistance. Aiming to reach even more

Members, 623,000 pre-recorded calls were also made, contacting 92,232 additional Members with important resource information.

The second initiative used a two-way SMS (text message) system. This Social Isolation Texting Program engaged Members through a series of texts based on their interaction and preferences. The campaign targeted seniors and Members with disabilities and encouraged them to establish routines, remain emotionally connected with friends, and foster healthy habits while staying safe at home. Many IEHP Members were home-bound and, for some, these calls and texts represented the only personalized contact they had during the pandemic.



In addition, IEHP helped our communities with resources to stay safe by:

- Donating more than \$50,000 to local food banks
- Purchasing more than 2.4 million units of PPE for area hospitals and Providers
- Providing grants to support COVID-19 testing
- Creating innovative emergency contract amendments to ensure our hospitals and Physicians maintained consistent cash flow
- Providing work-from-home options for more than 90 percent of our Team Members

Another significant undertaking during the pandemic was the launch of a COVID-19 vaccination super site at IEHP's Rancho Cucamonga headquarters. Made possible through a partnership with San Bernardino County, nearly 40,000 COVID-19 vaccines were administered to community Members through this clinic.

IEHP also joined forces with SAC Health System (SACHS) to provide a COVID-19 vaccine clinic for eligible residents at St. Paul African Methodist Episcopal Church (St. Paul AME) in San Bernardino. Through the collaboration, SACHS and IEHP administered 322 vaccines and distributed more than 300 bags of groceries.

These combined efforts are a testament to how IEHP never wavers in its commitment to doing the right thing.



To learn more about the St. Paul AME clinic, visit iehp.org.



OUR ROLE IN CalAIM

alifornia Advancing and Innovating Medi-Cal (CalAIM) is a multi-year transformational initiative launched by the Department of Health Care Services (DHCS). This five-year initiative began on January 1, 2022.

CalAIM will leverage Medi-Cal to address the complex challenges facing the state's most vulnerable residents. Social determinants of health such as homelessness, behavioral health care access and children with complex medical conditions — plus the growing number of justice-involved populations with significant clinical needs as well as the growing aging population — are all within focus.

Locally, IEHP is proactively engaging with our county partners and our community to share and receive information that will best position IEHP and our partners to develop a highly successful framework for the Inland Empire.

Although tied to CalAIM, these efforts will enhance IEHP's overall holistic approach to serving all of our 1.5 million Members.



"These reforms are fundamental to achieve the overall goals of improving the health care system and health outcomes for our Members."

- DR. TAKASHI WADA, CHIEF MEDICAL OFFICER





CORE MEASURES

EHP's efforts to improve our Members' health outcomes include ongoing assessments of key quality measures.

When it comes to providing quality health care, these results help identify areas for growth, issues of disparity and opportunities for innovation.

The data and initiatives shared in this report include results from IEHP's main quality measure set: Healthcare Effectiveness Data and Information Set (HEDIS®). HEDIS is a standardized measure set of more than 90 metrics that assess health plan quality performance across the United States. This measure set is managed and maintained by the National Committee for Quality Assurance (NCQA), IEHP's health plan accreditation agency. Along with 90 percent of other health plans across the country, IEHP reports our audited HEDIS rates annually. This is an important way for us to stay accountable as we journey toward our Vision that communities enjoy Optimal Care and Vibrant Health.

These core measures track IEHP's quality performance in preventive care, chronic care, behavioral health and patient safety.



HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).





PREVENTIVE CARE

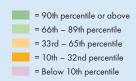
🔷 ood health starts with good preventive care. From annual check-ups to wellness classes, IEHP understands that even healthy Members need ongoing preventive care. Though the transition from in-person to virtual medical care was an adjustment for both Members and Providers during the COVID-19 pandemic, we recognize and continue to seek opportunities to improve.

For example, in response to our recent performance, IEHP launched a series of targeted outreach campaigns and projects in 2021 to encourage Members to access preventive health services from their Providers. Part of the education promoted awareness of new ways Members could visit their Providers, including the growing use of telehealth or virtual visits offered by IEHP Providers.

The table below summarizes the percent of Members who received recommended preventive care services.

Quality Measure	2018	2019	2020	National Percentile
Counseling for Nutrition for Children/Adolescents	81. <i>7</i>	83.4	77.4	66th‡
Counseling for Physical Activity for Children/Adolescents	80.3	83.7	76.4	66th‡
Weight Assessment for Children/Adolescents - BMI percentile	86.1	89.5	81.0	66th
Breast Cancer Screening	66.8	65.2	59.8	66th
Cervical Cancer Screening	65.0	70.1	62.0	66th
Chlamydia Screening in Women	63.8	65.0	62.4	66th
Timely Prenatal Care	80.3	92.9	89.0	66th
Timely Postpartum Care	66.4	<i>77</i> .1	75.2	33rd
Flu Vaccinations for Adults Ages 18-64	40.5	44.2	41.0	33rd
Immunizations for Adolescents	39.4	39.4	41.1	33rd
Avoidance of Antibiotic Treatment for Acute Bronchitis	N/A	42.6	42.5	10th
Colorectal Cancer Screening	65.2	65.2	67.9	10th
Childhood Immunization Status	31.1	31.1	29.2	10th

Percentiles are based on NCQA Medicaid Health Plan Ratings national benchmarks published 8/2021, unless otherwise noted ‡Benchmarks based on Quality Compass Benchmarks published 9/2021









PREVENTIVE CARE SPOTLIGHT 💖

Childhood Immunizations

multi-departmental workgroup was formed to evaluate IEHP's HEDIS Childhood Immunization Series (CIS) -Combo 10 measure. This measure focuses on the timely administration of vaccinations for children up to 2 years old.

Using insights based on available data, the team identified an opportunity to address common myths about the flu and the infant population and identified the need to offer Provider support in utilizing the California Immunization Registry (CAIR2).

While there is room for improvement, our teams will build upon these learnings for future interventions.

Flu messaging: IEHP implemented an outreach campaign to caregivers of newly enrolled infant Members with flu vaccine education and reminders that children can receive the flu vaccine as early as 6 months old. Education was performed

through various communication channels, including text messaging, social media and Member newsletters.

CAIR2: Internal Team Member training was developed to better support our Providers with California Immunization Registry inquiries, such as reporting and tracking immunizations.

Telephone Outreach: During 2020, IEHP conducted phone calls to nearly 7,400 caregivers of Members under the age of 2 who were identified as high-risk using disparity data. Approximately one-third of this Member population did not have a history of wellness, immunization, blood-lead screening or developmental screening visits, but received at least one of the needed preventive health services after receiving outreach from the IEHP team.

CHRONIC CARE

hronic care management is recognized as a key factor in primary health care. It can help a patient maintain improved health and wellness by addressing ongoing symptoms as well as balancing medication regimens.

IEHP's quality measures help assess the management of chronic conditions, and our recent performance shows significant improvement in statin therapy treatment of patients with cardiovascular disease and diabetes. Our results also show an opportunity to improve in comprehensive diabetes care as well as treatment of patients with asthma medication.

Initiatives are already underway for improvement in these areas. For example, care coordination programs have been implemented to address chronic care management through a multi-disciplinary team approach to include Physicians, Pharmacists, Utilization Management, Care Management, Behavioral Health and other health care Providers. These programs identify Members with specific health conditions,

harness insights from available health care data, and evaluate individual outcomes — all with the goal of providing comprehensive, coordinated care for our Members.



The table below summarizes the percent of Members who received recommended chronic care services.

Quality Measure	2018	2019	2020	National Percentage
Statin Therapy for Patients with Cardiovascular Disease - Statin Adherence	68.9	73.4	85.0	90th
Statin Therapy for Patients with Diabetes - Statin Adherence	64.0	68.0	84.2	90th
Comprehensive Diabetes Care - Blood Pressure Control	61.3	61.3	59.6	33rd
Comprehensive Diabetes Care - Eye Exams	60.6	60.6	55.0	33rd
Comprehensive Diabetes Care - HBA1c Control	57.4	57.4	49.1	33rd
Controlling High Blood Pressure	60.3	60.6	55.0	33rd
Asthma Medication Ratio	55.6	55.1	57.4	10th

Percentiles are based on NCQA Medicaid Health Plan Ratings national benchmarks published 8/2021, unless otherwise noted

= 90th percentile or above = 66th - 89th percentile = 33rd - 65th percentile = 10th - 32nd percentile = Below 10th percentile





From left: Jane Wang, Director of Health Education; Susan Agapeyev, Admin. Assistant; Ty Oehrtman, Health Educator II; Rosalinda Nava, Manager of Health Education; Jennifer Silva, Health Educator I; Claudia Mackesy, Project Specialist; Laura Cepeda, Health Education Specialist; and Vicky Anaya, Health Education Specialist.

CHRONIC CARE SPOTLIGHT

Members with Asthma

EHP conducted two pilot programs to help Members with asthma. These programs supported Member's health and wellness by focusing on health education, medication management, and navigating the health system.

The first project addressed the disparities of asthma selfmanagement among younger IEHP Members in San Bernardino. Parents/caregivers of the child Members received assistance through a high-touch and interdisciplinary model to help improve asthma management.

The findings were as follows:

ASTHMA ACTION PLAN (AAP)

The pilot was successful with at least 25 percent of Members stating they have an AAP at the eight-week follow-up assessment.

ASTHMA CONTROL TEST (ACT)

The pilot was successful in improving 6 percent of ACT scores of the 31 Members who had baseline and eightweek follow-up data. At the six-month follow-up, the pilot was successful in improving 5 percent of ACT scores.

ASTHMA MEDICATION RATIO (AMR)

The pilot was successful at maintaining or improving AMR compliance to 64 percent among Members who followed up at six months.



From left: Dr. Christina Neino, Director of Pharmacy Operations; Dr. Robert Chirk, Manager of Pharmacy Quality and Compliance; Jon Faia, Manager of Medication Management Pharmacy Operations; Dr. Edward Jai, Senior Director of Pharmaceutical Services; Dr. Adam Yu, Senior Formulary Pharmacist; and Dr. Michael Blatt, Director of Clinical Pharmacy and Product Strategy.

The second project, called the Comprehensive Medication Management (CMM) Pilot Program, focused on Members with asthma. It was launched in partnership with the University of Southern California School of Pharmacy, Desert Hospital Outpatient Pharmacy, Loma Linda University Outpatient Pharmacy, Inland Pharmacy, and Inland Behavior and Health Services.

The overall goals were to:

- Reduce asthma-related admissions and emergency visits
- Increase appropriate prescribing for asthma medications
- Increase the number of Physician protocols between pharmacists and local Primary Care Physicians to provide augmented primary care support

Since the program's launch, five clinical pharmacy hubs are operational in San Bernardino, Loma Linda, Banning, Hemet and Palm Springs. Collectively, 204 Members identified as high or rising risk for asthma were contacted and 54 percent enrolled in the program.

Providers have expressed their excitement over the program. "I know my patients will have better outcomes," Dr. Vivian Pacold said.

MEMBER TESTIMONIAL

"Before the program, I was having shortness of breath for a long time. I was using (an inhaler) twice a week and couldn't keep up with volunteer activities at church, but now I don't even need to use (it) at all. I definitely would recommend this program to all patients."

- STEPHANIE B., IEHP MEMBER



OVERVIEW

BEHAVIORAL HEALTH

ehavioral health is just as important as physical health because they both affect the whole person. In 2020, IEHP's performance in Behavioral Health quality metrics demonstrated rate increases in many areas as well as opportunities to improve.

The table below summarizes the percent of Members who received recommended behavioral health services.

Quality Measure	2018	2019	2020	National Percentage
Antidepressant Medication Management-Continuation Phase	39.8	40.0	50.3	66th
Adherence to Antipsychotic Medications for Individuals with Schizophrenia	53.6	63.2	68.6	66th
Diabetes Screening for People with Schizophrenia or Bipolar Disorder, who are Using Antipsychotic Medication	85.9	84.8	81.8	66th
Follow-Up Care for Children Prescribed ADHD Medication- Continuation and Maintenance Phase	23.8	44.0	48.3	10th

Percentiles are based on NCQA Medicaid Health Plan Ratings national benchmarks published 8/2021, unless otherwise noted

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BEHAVIORAL 👎 🔯 **HEALTH SPOTLIGHT**

Expanded Outreach

he goal of behavioral health services at IEHP is to help Members live their best lives, both mentally and physically. In response to the mental health crisis during the COVID-19 pandemic, IEHP launched the "Chat and Chai" podcast on Apple, Google and Spotify platforms. Hosted by Child and Adolescent Psychiatrist Dr. Gayani DeSilva and IEHP Clinical Behavioral Health Director Amrita Rai, the monthly podcast explored the connection between physical and mental health and provided practical advice and tools for listeners. Topics ranged from grief and loneliness to substance abuse and weight loss. During this time of significant mental health needs, IEHP also provided Members with access to three psychiatry walk-in clinics. At these clinic locations, Members could receive psychiatry services without a scheduled visit, see a behavioral health Nurse Practitioner or Psychiatrist for a consultation, and get a refill of behavioral health medication as needed. All services were available to children, teens and adults.



From left: Child and Adolescent Psychiatrist Dr. Gayani DeSilva and IEHP's Clinical Behavioral Health Director Amrita Rai.



From left: Gabriela Aguirre, Care Manager; Dale Santos, Care Manager; Claudia Menjivar, Coordinator of Care Management; Kim Hoang, Quality Program Nurse; and Egzine Goodwin, Care Manager.



OVERVIEW

PATIENT SAFETY

atient safety and quality care cannot exist without one another, and that is just one more reason to focus on our goal of quality care — it directly protects patients from

harm. A patient's discharge from the hospital is a critical time for recovery, and IEHP has various resources and programs to address Members' post-hospital care.

The table below summarizes the percent of Members who received services that promote safe discharges after an acute hospital visit.

Quality Measure	2018	2019	2020	National Percentile
Avoidable Readmissions	84.6	92.0	91. <i>7</i>	66th‡
Transitions of Care: Patient Engagement after Inpatient Discharge (65+ years)	84.1	84.1	87.1	66th
Transitions of Care: Medication Reconciliation Post Discharge (65+ years)	47.2	47.2	70.9	33rd
Follow-Up after Hospitalization for Mental Illness- 7 days	30.6	27.4	34.5	33rd
Follow-Up after Emergency Department Visit for Mental Illness- 7 days	45.6	40.1	35.4	33rd

Percentiles are based on NCQA Medicaid or Medicare Health Plan Ratings national benchmarks published 8/2021, unless otherwise noted ‡Percentiles are based on NCQA Quality Compass Medicaid Benchmarks published 9/2021

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PATIENT SAFETY SPOTLIGHT 👎

Reducing Avoidable Readmissions in High-Risk Patients

atients have a higher risk of being readmitted if they do not see their Provider within seven days of being discharged from the hospital.

With this in mind, IEHP launched a Rapid Improvement Event to reduce preventable hospital readmissions in high-risk cardiovascular diagnosis-related patients through discharge planning and Transitions of Care. Working with IEHP's Community Health Team and partnering with Riverside University Health System (RUHS), a Health Navigator was assigned to help these patients schedule their seven-day post-discharge follow-up visits with their Primary Care Physician (PCP) at the time of their hospital discharge. The team's efforts resulted in an improvement in avoidable readmission for cardiovascular conditions. Data capture, process improvement, Provider engagement and a "warm" connection directly with the Member and the PCP were the keys to this success.



From left: Provider Services Representative Alasha Fowler and Special Programs Manager Greg Worth.

The table below summarizes the percent of Members or Providers who received recommended patient safety services.

Measure	Pilot Baseline	Pilot Results
Avoidable Readmissions for Members with Cardiovascular Conditions	84.2	90.5
Post-Discharge Follow-Up Visits for RUHS	61.4	63.7
RUHS PCPs who Received Roster Training	N/A	100
Appropriate Referrals to BH for Members with Cardiovascular Conditions	N/A	100

PATIENT SAFETY SPOTLIGHT 💝

Medication Reconciliation

EHP Medication Reconciliation Programs consist of two major programs to support Member medication safety:

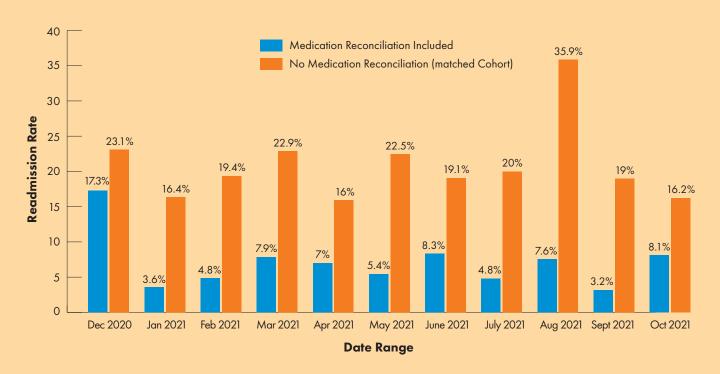
The Medication Reconciliation Post-Discharge Program serves all IEHP Medicare and high-risk seniors and persons with disabilities (SPD) Members. Pharmacists and pharmacy staff review hospital discharge medications, update medication lists, conduct Member interviews, and look into pharmacy claims. The Pharmacist provides a current medication list and clinical recommendations to the Provider within 72 hours after a Member is discharged from the hospital.

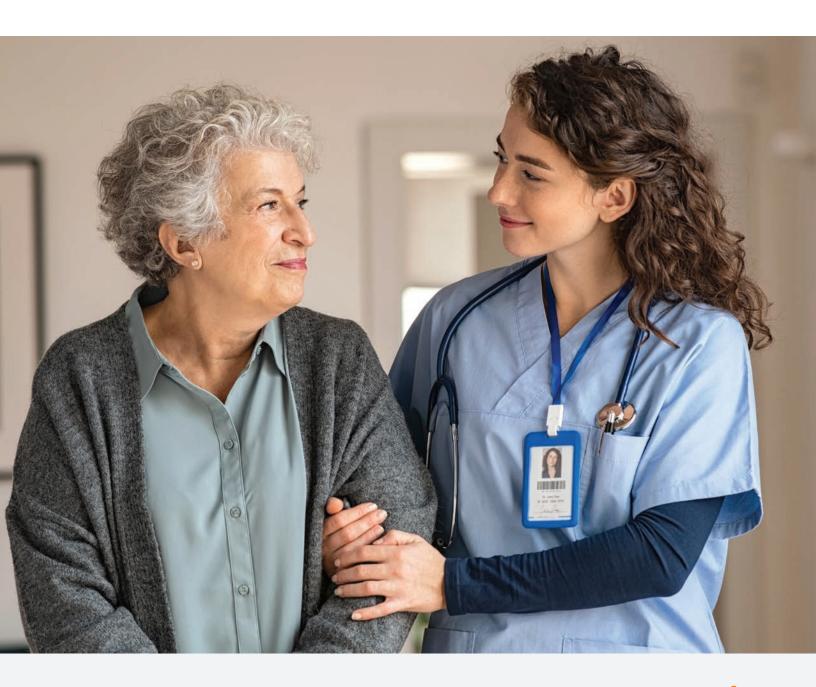
The Medication Reconciliation Health Homes Program serves the IEHP Medi-Cal Health Homes population by performing a review of medications when Members join the program and every six months thereafter, as well as during the post-hospital discharge process, as needed.



New Pharmacy Program Lowers Hospital Readmission Rates

Between December 2020 and October 2021, readmission rates were consistently lower for Medicare Members receiving support through IEHP's Medication Reconciliation Program.





PATIENT SAFETY SPOTLIGHT 💔 🔯





Placements and Care Transitions

he Placements and Care Transitions Team helps prevent unnecessary admissions of Members to Skilled Nursing Facilities. The team also assists Members with staying in their home environment by coordinating in-home health services, Community-Based Adult Services and more.

They also work with the Custodial Team to assist Members who are already in these nursing facilities, but no longer need to be

there. Together, the teams help Members transition back into the community by providing resources and educating them about available services.

In 2021, the team provided support for 470 Members as they transitioned out of a nursing facility and back into their homes. They also helped 105 Members receive the care they needed to prevent admission into a Skilled Nursing Facility.

HEALTH PLAN **ACCREDITATION AND RATINGS**

n 2000, IEHP became California's first Medi-Cal-only health plan to earn accreditation from the National Committee for Quality Assurance (NCQA), considered the gold standard of health plan quality assessment. While demonstrating our commitment to ongoing quality improvement, we have been NCQA accredited for more than 20 years.

To achieve NCQA accreditation, IEHP must demonstrate compliance with rigorous standards in the areas of clinical performance, care delivery and Member satisfaction. IEHP embraces the challenge of meeting these standards as we strive for continuous improvement and our best performance.

Commercial, Medicare and Medicaid health plans receive ratings based on their combined HEDIS, CAHPS® and NCQA Accreditation standards scores. NCQA scores health plans on the quality of care patients receive, how happy patients are with their care, and health plans' efforts to keep improving.

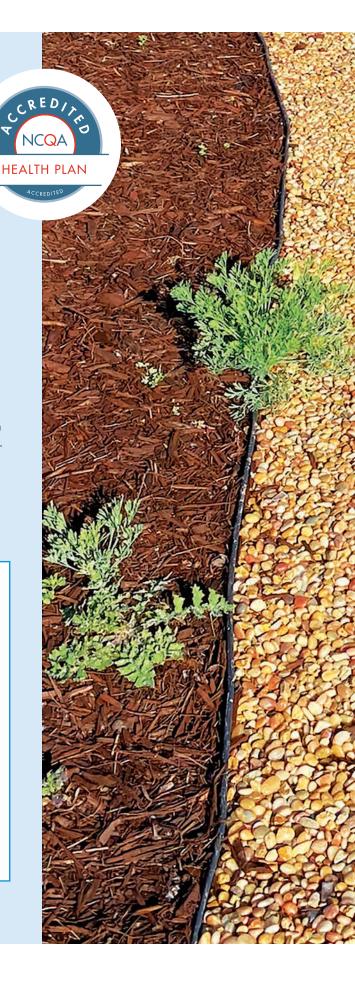
IEHP received an overall 3.5 out of 5 rating in NCQA's Medicaid Health Insurance Plan Ratings for 2020-2021.



"Our work around our core measures pushes us to improve our processes to best support our Members and Providers, while also aligning our goals with our Mission, Vision and Values."

> - GENIA FICK. **VICE PRESIDENT OF QUALITY**

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MEMBER SATISFACTION

t IEHP, we strive to do the right thing. Member satisfaction is our priority. One way we assess our Members' experiences is through the Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey. This survey asks Members about their experience with the health plan, Providers and access to care.

Though the results of our adult CAHPS survey show that Members have rated the health plan customer service as consistently satisfied since 2018, we continue to seek opportunities to improve Members' access to care and overall health care experience.

The table below summarizes the percent of Members who responded favorably to questions related to their health care experience.

IEHP CAHPS Survey Results

Quality Measure	2018	2019	2020	National Percentile
Rating of Health Plan	66.4	66.1	66.1	66th‡
Rating of All Health Care	56.1	56.7	63.6	66th
Customer Service	89.6	92.9	91.3	66th‡
Getting Needed Care	83.4	86.0	83.7	33rd
Getting Care Quickly	80. <i>7</i>	83.9	81.4	33rd
Rating of Personal Doctor	64.8	70.1	63.3	10th

Percentiles are based on NCQA Medicaid Health Plan Ratings national benchmarks published 8/2021, unless otherwise noted ‡Benchmarks based on Quality Compass Benchmarks published 9/2021

= 66th - 89th percentile = 33rd - 65th percentile = 10th - 32nd percentile = Below 10th percentile

= 90th percentile or above

CAITLIN'S STORY 😝 🔯

t 27, Caitlin thought she knew what her future looked like.

She had just started to pursue her bachelor's degree in Education at the University of California at Riverside and was finally pursuing her dream of becoming a preschool teacher.

But all that changed one day in 2019, when Caitlin noticed a bump on her head — a bump that appeared out of nowhere.

"It wasn't there one minute, and it was there the next," she remembered.

It turns out it wasn't just a bump. It was a tumor.

As a child, Caitlin was diagnosed with Neurofibromatosis — a condition that causes tumors to grow on the nervous system. The tumor she discovered that day meant her condition was progressing. It was the start of a new journey — one that would impact her goals of going to school and becoming a teacher. During the past two years, Caitlin endured 12 surgeries to

remove a total of five tumors and subsequent skin grafts. She has received countless tests, from MRIs and CT scans to X-rays and ultrasounds.

This wide range of treatments would not be possible without IEHP, according to Caitlin.

"All of my expenses are covered with IEHP," Caitlin said. "They are so quick to approve my visits with my specialists and hospital stays. The service and the care they have for their Members are beyond amazing."

Caitlin, a Norco resident, did face some initial obstacles. For example, she was instructed to get her imaging tests done at a different center instead of Loma Linda University Health, where Caitlin had been a patient for years. However, after working with her Care Manager at IEHP, Caitlin received the needed approvals and has not had an issue since.

Caitlin's dreams are now back on track.



MEMBER TESTIMONIAL



"I'm on the road to healing, enrolled in Norco Community College, and hope to transfer back to UC Riverside to get my bachelor's degree. I know I couldn't have done it without IEHP."

> -CAITLIN R. **IEHP MEMBER**

PROVIDER SATISFACTION





PROVIDER SATISFACTION

artnering with Providers is paramount in our quality journey. Ensuring they are well-equipped to provide care to IEHP Members is a priority. After all, a highly engaged Provider network helps foster better quality outcomes.

IEHP recently conducted a Provider Satisfaction Survey with contracted Primary Care, Specialty Care and Behavioral

Health Providers. Results showed the health plan earned a 96.4 percent satisfaction score for 2021, placing IEHP in the 99th percentile for Provider Satisfaction nationwide.

A notable 98.1 percent shared that they would recommend IEHP to other Physicians, and IEHP ranked within the 99th percentile in all categories.



IEHP Composite Category Results

Composite	2018	2019	2020	National Percentile‡
Overall Satisfaction	93.6	96.6	96.4	99th
Finance Issues	55.6	64.7	58.1	99th
Utilization Management and Quality Management	60.6	<i>7</i> 1.3	62.3	99th
Network/Coordination of Care	49.4	57.1	52.5	99th
Pharmacy	39.1	53.7	50.3	99th
Health Plan Call Center Service Staff	65.2	73.9	65.3	99th
Provider Relations	58.6	63.0	59.5	99th
Recommened to Other Physicians' Practices	98.5	99.0	98.1	99th

[‡]Percentiles are based on the 2020 Symphony Performance Health (SPH) Analytics Medicaid book of business national benchmarks comprised of 89 plans representing 15,911 respondents in Primary Care, Specialty Care and Behavioral Health.

Key Drivers of Overall Provider Satisfaction

Drivers*	2021 Summary Rate	National Percentile
Access to Case/Care Managers from this Health Plan	62.6	99th
Timeliness of Claims Processing	60.3	99th
Number of Specialists in the Health Plan's Network	57.0	99th

^{*} Only the top three key drivers are displayed



Dr. Romeo Samouh

Dr. Judith Bedoy

PARTNERS IN QUALITY

How Providers Help IEHP Make a Difference

r. Romeo Samouh understands that quality health care isn't always easy to access.

As a family medicine Physician in Upland, Dr. Samouh works hard to help people get the care they need. But he can't do it alone.

"We have a huge population of patients that are underserved," he said. "IEHP provides great support for Doctors who serve these patients."

That means going above and beyond — sometimes even beyond county lines.

Dr. Judith Bedoy recalled the time one of her pediatric patients needed a specific eye procedure, but could not find a local ophthalmologist to take the case. That is when she turned to IEHP for help.

"IEHP coordinated with my practice in Riverside, and we found a Doctor at Children's Hospital in L.A. to do the surgical repair," said Dr. Bedoy. "IEHP is always willing to work with us to provide the highest quality of care for our patients."

Another pediatrician, Dr. Irmgard Tackie, remembers when her Provider Services Representative stepped in to help get a patient's coverage reinstated with IEHP.

"My representative worked very hard to help us get the mother back in touch with her social worker, getting everything set up again so the child didn't have a long lapse in care," said Dr. Tackie, who operates a practice in Fontana. "That speaks to the fact that (IEHP) is thinking of the patient not as a number, but as an actual person."

Doing the right thing has always been a priority for IEHP. The resources offered to Providers by IEHP are meant to help make their job easier and ensure quality services for Members.



Dr. Irmgard Tackie

Dr. Loida V. Guevarra

Dr. Loida V. Guevarra, who has partnered with IEHP for nearly 25 years, said the plan supports her so she can support her patients, especially when it comes to quality tertiary care and non-medical needs.

"I like the fact that IEHP serves the patient in totality," said Dr. Guevarra. "I might see the patient in my office for a medical need, but IEHP provides the whole support for their care."

Dr. Samouh agreed.

"It's good to know that we have a health plan in the area that's well equipped to facilitate the care of the underserved — whether it's providing ancillary services, Specialists, transportation, or other numerous things that enable our patients to live healthy, active lives," Dr. Samouh said.



"As a community-based health plan, it is our duty to respond to the needs of our Providers and continue to adjust, improve and listen, so our Members and communities can enjoy optimal care and vibrant health."

- SUSIE WHITE, CHIEF OPERATING OFFICER







TEAM MEMBER SATISFACTION



hat does it mean to be an IEHP Team Member? It means being an innovative thinker, a trusted collaborator and a highly-skilled professional. It also means living with compassion as we serve our community.

And most importantly, it means we always do the right thing for our Members.

At IEHP, we understand that quality care starts with quality people. Our Team Members are highly engaged and invested in the mission of IEHP. We take steps to cultivate a team culture where respect, dedication and empathy are just as important as productivity and performance.

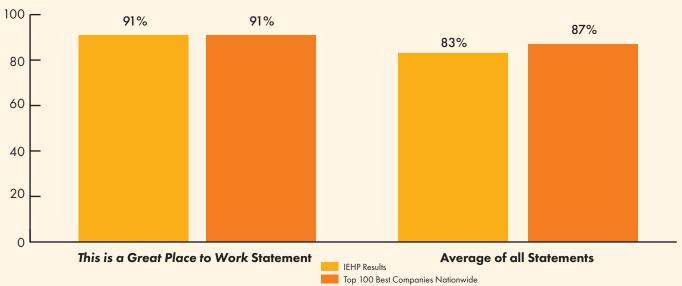
We track Team Member satisfaction with an annual employee

engagement survey to tell us what we are doing well and how we can improve.

In 2021, IEHP partnered with Great Place to Work, the global authority on workplace culture, and obtained an 85 percent response rate. Respect, camaraderie and pride were the positive themes reflected in responses, and 100 percent of Team Members agreed with the mission of the organization. It is no surprise that with these results, IEHP is officially certified as a "Great Place to Work."

"IEHP's team culture is based on strong relationships with each other in doing the right thing for our Members, Providers and each other," said Janet Nix, IEHP Chief Organizational Development Officer.

IEHP Compared to the Top 100 Best Companies



MEET ROSALINDA 🔯

or Rosalinda Nava, it's all about fulfilling a shared purpose. As the Manager of Health Education, Rosalinda leads a team to deliver accessible health education to IEHP's diverse community of Members.

"At the end of the day, my job is to help people manage their own health, their condition or help them to prevent future disease," said Rosalinda, a five-year IEHP Team Member.

She recalled a conversation with a newly enrolled Member who was very fearful about the managed care system. The Member's attitude changed when she learned IEHP could help manage not only her medical care, but also help with the struggles of daily life.

During the conversation, the Member shared how overwhelming it was to control her diabetes, especially how to test her blood sugar. IEHP's Health Education Specialist reached out to the Pharmacy department and found a way to get the Member a glucometer.

"It was really about us listening and taking the time to hear what she was dealing with," Rosalinda recalled.

Fulfilling that shared purpose to help our community one Member at a time is what really inspires Rosalinda, her staff and the overall team culture at IEHP.

"IEHP makes us proud to work here because we are part of the community," she said. "Whether it's giving food out to those in need or listening to what the community has to say at a Board of Supervisors meeting, it's all the different things that make us who we are. IEHP has a presence in our community and it has a presence within my heart."



TEAM MEMBER TESTIMONIAL



"IEHP has a presence in our community and it has a presence within my heart."

-ROSALINDA NAVA. MPH. MCHES MANAGER, HEALTH EDUCATION







OUR RECENT AWARDS AND ACHIEV

ENVISION CENTER DESIGNATION

In partnership with the Housing Authority of San Bernardino County (HASBC), IEHP's Victorville Community Resource Center was designated in 2021 as the first EnVision Center in San Bernardino County and the first center in the U.S. Department of Housing Region IX (AZ, CA, HI, NV).

This designation highlights the center's commitment to supporting households with resources to become self-sufficient. Enhancing this commitment, HASBC will now be accessible to Members and community residents at IEHP's Victorville Community Resource Center.





BUSINESS PARTNER OF THE YEAR AWARD

IEHP received the 2021 Business Partner of the Year award from the Rancho Cucamonga Fire District. The distinguished award recognized IEHP's partnership with the City and County of San Bernardino to host a super COVID-19 vaccine clinic at the health plan's headquarters. The award is traditionally given to a community business that assists the district as a problem solver.





DHCS INNOVATION AWARD

IEHP was awarded the California Department of Health Care Services (DHCS) "Innovation Award, Runner Up 2021" for our Medi-Cal PCP Auto Assignment Redesign project. This project allowed new and reinstated Members to be automatically assigned to Providers with higher quality performance outcomes.

This was the fifth time the health plan received a DHCS Innovation Award — more times than any other health plan in California. In prior years, the health plan received the Innovation Award for its groundbreaking work using location intelligence to reach high-risk Members and Providers during natural disasters (2020), creating the Housing Initiative (2018), the BH Integration and Care Initiative (2017), and the Transitional Care Project (2015).

EMENTS

INLAND EMPIRE TOP **WORKPLACES AWARD**

IEHP was named a winner of the Inland Empire Top Workplaces 2020 Award and placed second in the United States Health Care Industry (based on organization size category 1,000-2,499) for scoring in the 91st percentile in an Energage Survey. The survey highlighted IEHP's engaged and missionoriented employees, clued-in leaders and its strong commitment to innovation and company values.

This survey was administered to IEHP's employees in August 2020, nearly six months after the health plan transitioned most of its staff to work from home amidst the COVID-19 pandemic. The employee survey participation rate was 93 percent — well above average for most organizations.



HEALTH EOUITY AWARD

IEHP received the 2020 Health Equity Award for its ability to engage and connect with Members via text message during California's stay-at-home order. The award was given by mPulse Mobile, a leader in conversational AI solutions for health care, during their annual Activate Awards. IEHP launched the 45-day, twoway text campaign to engage at-risk Members (seniors or persons with disabilities), offering tips and resources to stay connected with friends and family, get physically active and explore new hobbies.













ENERGY STAR® CERTIFICATION

IEHP earned the United States Environmental Protection Agency's (EPA) 2020 ENERGY STAR® certification with a star score of 85. This indicates that IEHP's Atrium building in Rancho Cucamonga is more energy-efficient than 85 percent of similar properties nationwide. The certification is the only one of its kind in the country that is based on verified energy performance. Certified buildings save energy and protect the environment by generating fewer greenhouse gas emissions than typical buildings. To be certified, a building must meet or exceed a star rating of 75.







IEHP CEO Jarrod McNaughton (left) poses with Josiah Bruny, CEO and founder of Music Changing Lives — a nonprofit organization dedicated to providing music, art and tutoring programs in local public schools and community centers. During the pandemic, IEHP partnered with Mr. Bruny on activities such as food distributions, community murals and urban gardens.

ENHANCING HEALTH CARE ACCESS

EHP's vision is to ensure our communities enjoy Optimal Care and Vibrant Health. From providing housing assistance to supporting local food banks, IEHP is more than just another health plan.

We are passionate advocates through our community programs, awards and donations.

 IEHP launched a six-month pilot program to provide Members with heart failure the tools to manage their health condition. In collaboration with PurFoods, LLC (DBA Mom's Meals), 100 participating Members received healthy food and meals, nutrition education and digital weight scales. IEHP's Health Navigators also visited Members in their homes to help connect them to available resources.

• IEHP partnered with Riverside County Medical Association (RCMA) to create a Population Health Fellowship Program for Physicians who have recently completed their primary care residency programs. The program focuses on retaining and training by offering an unprecedented educational opportunity facilitated by physician leaders in the IEHP network. It also offers loan forgiveness incentives to help reduce the pressures of student debt.



- DHCS awarded IEHP with more than \$32 million in funding over two years to increase behavioral health integration with traditional health care models. IEHP will disperse these funds to medical organizations in Riverside and San Bernardino counties to help clinical Providers improve physical and behavioral health outcomes, care delivery, and patient experiences by developing or expanding integrated care practice models.
- IEHP provided a \$50,000 sponsorship to the Inland Empire Black Equity Fund to strengthen Black-led and Blackempowering organizations. The pooled fund, established by
- the Black Equity Initiative of the Inland Empire and the Inland Empire Funders Alliance, helps improve social and racial inequities through empowerment, education and policy change.
- IEHP donated \$15,000 to fund Point Source Youth's local Host Homes Program. The program provides supportive, short-term housing for 20 young adults (ages 18-24) in the Inland Empire who are experiencing housing instability.

PROGRAM SPOTLIGHT

Enhancing Emergency Preparedness

uality care includes ensuring our Members stay safe during emergency situations.

IEHP's Emergency Preparedness Web Application uses location intelligence to reach high-risk Members and Providers in geographic areas affected by power outages, wildfires and other natural disasters.

The idea for the application surfaced during the widespread Southern California power outages in 2019.

"Our Care Managers knew that Members with durable medical equipment could be affected and we needed a way to quickly identify which ones," said Eric Dick, IEHP Health Care Analytics Informaticist.

To make this happen, IEHP partnered with geospatial technology company Esri to implement its location intelligence project.

By overlaying data from local utilities, emergency response authorities and patient records, the application allows frontline staff to identify Members' homes and facilities that are in proximity of wildfire perimeters or power shutoffs. This helps IEHP's Care Teams connect with Members to assist in meeting their needs, including relocation to safer environments.



Eric Dick IEHP Health Care Analytics Informaticist

Darren Moser IEHP Health Care Analytics Informaticist Thanks to the application, IEHP was awarded the California Department of Health Care Services Innovation Award for 2020. Additionally, the application is part of a case study by Esri to demonstrate how geographical intelligence can benefit their client populations.

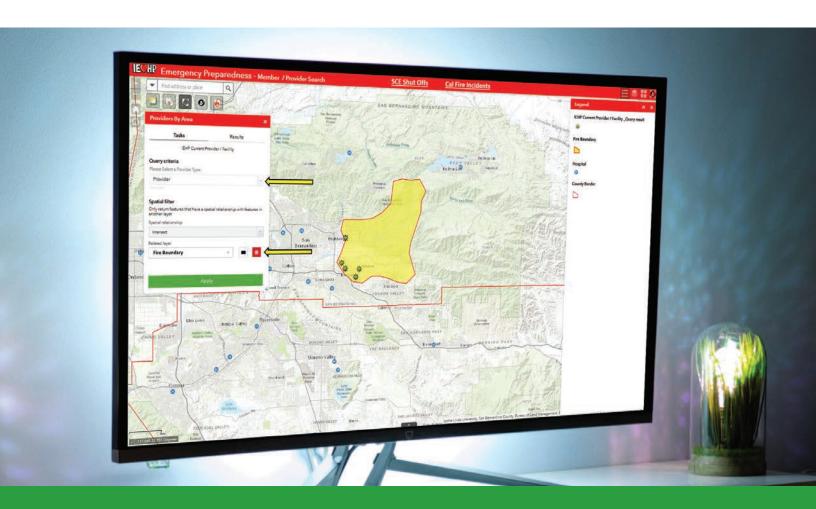
Since its implementation, the application's technology has continued to evolve and expand its reach.

The team is currently working on an enhancement that will identify IEHP Team Members who may be affected by future emergency situations.



"The best thing about this experience has been seeing the real-life impact it's having in our community."

- DARREN MOSER,
IEHP HEALTH CARE ANALYTICS
INFORMATICIST



IEHP's Emergency Preparedness Web Application locates areas affected by wildfires and assists IEHP business units in coordinating the transfer of Members away from burn areas.

OUR GOVERNING BOARD



Dawn Rowe Chair, San Bernardino County Elected Representative

San Bernardino County Third District Supervisor Dawn Rowe was appointed to the Board of Supervisors in December 2018. Prior to joining the Board of Supervisors, Supervisor Rowe served on the Yucca Valley Town Council from 2010 to 2014.

She represents one of the largest districts in the county, spanning the Mojave Basin to the mountain communities, and the city of Barstow to the valley communities. Supervisor Rowe was appointed to the IEHP Governing Board in January 2021.



Jeff Hewitt Vice-Chair, Riverside County Elected Representative

Jeff Hewitt represents the Fifth District on the Riverside County Board of Supervisors, serving the more than 2.4 million residents of six incorporated cities (Moreno Valley, Calimesa, Beaumont, Banning, Perris, and Menifee) and more than 25 unincorporated communities.

He was appointed to the IEHP Governing Board in January 2020. Supervisor Hewitt began his career in public service as a member, and then chairman, of the Calimesa Planning Commission. He was later elected to the Calimesa City Council in 2010 and served as mayor for three consecutive terms.



Dr. Dan Anderson Riverside County Public Member

Dr. Dan Anderson is a highly motivated executive with more than 35 years of experience working in the nonprofit sector. He has spent the last 15 years advocating health care access for the low-income and uninsured population. In April 2008, he was appointed to the IEHP Governing Board and served as the Vice-Chair from January 2018 to December 2020.

Dr. Anderson has addressed the health needs of the underserved and uninsured populations in his many lectures and presentations to the community. He is currently the President/CEO of Riverside Community Health Foundation.



Curt Hagman San Bernardino County Elected Representative

Curt Hagman was elected to the San Bernardino County Board of Supervisors in 2014. He served in the California State Assembly from 2008 to 2014 and represented communities in San Bernardino, Orange and Los Angeles counties.

He was appointed to the IEHP Governing Board in January 2015, became Vice Chair in February 2017, and served three years as Chair beginning in January 2018. Supervisor Hagman has an extensive resume of public service prior to his state office election.





Karen Spiegel Riverside County Elected Representative

Karen Spiegel represents the Second Supervisorial District in Riverside County. The Second District includes the unincorporated communities of Coronita, El Cerrito, Home Gardens, Highgrove, and the cities of Corona, Eastvale, Jurupa Valley, Norco, as well as the western half of the city of Riverside.

She was appointed to the IEHP Governing Board in February 2019, became Vice-Chair in January 2020, and Chair in 2021. Supervisor Spiegel began her political career as the elected city treasurer for the city of Corona in 1996. She continued her service in Corona as a council member for 16 years and as mayor for four terms.



Andrew Williams Joint County Public Member

Andrew Williams has been a member of the IEHP Governing Board since April 1995. For 20 years, he was a logistics support and communications electronics officer for the U.S. Air Force.

He received a Bachelor of Arts Degree in Mathematics from Morehouse College in 1964 and a Master of Science in Logistics Management, which he earned through the Air Force Institute of Technology in 1970.



Eileen Zorn San Bernardino County Public Member

Eileen Zorn spent more than 30 years in health care, focusing on clinical practice, education, operational management, research and quality improvement. She was first appointed to the IEHP Governing Board in January 2003.

She was appointed Vice-Chair in February 2015 and Chair in February 2016. Ms. Zorn has published many health care-related articles and has received many recognitions and awards during her career.



"We strive to provide innovation and excellence for our Members."

– DAWN ROWE, **IEHP GOVERNING BOARD CHAIR**

OUR EXECUTIVE LEADERSHIP TEAM



Jarrod B. McNaughton, MBA, FACHE Chief Executive Officer

Jarrod B. McNaughton is the Chief Executive Officer of IEHP. In this role, Mr. McNaughton works collaboratively with the IEHP Governing Board to set the strategic vision and provide executive leadership for one of the 10 largest Medicaid health plans and the largest not-for-profit Medicare-Medicaid Plan in the U.S.

He cultivates IEHP's strong partnership with Providers, hospitals and hundreds of community partners to deliver quality whole-person care to more than 1.5 million Members.



Vinil Devabhaktuni, MBA, FACHE Chief Information Officer

Vinil Devabhaktuni joined IEHP as Chief Information Officer in October 2021. In this role, Mr. Devabhaktuni provides leadership for the overall information technology architecture, as well as the design, development, implementation and support of IEHP's systems.

His focus includes maintaining the organization's connection to Providers, collaborating closely with IT leadership, and aligning initiatives with IEHP's overall strategic plan.



Keenan Freeman, **MBA** Chief Financial Officer

Keenan Freeman joined IEHP as Chief Financial Officer in October 2016. In this role, Mr. Freeman is responsible for the overall financial management of IEHP, its financial reporting and transparency, and for multiple plan financial functions including accounting, purchasing, capitation, cost recovery, risk management, and the coordination of fiscal and other operational audits.



Edward Juhn, MD, MBA, MPH Chief Quality Officer

Dr. Edward Juhn joined IEHP as Chief Quality Officer in June 2021. He is responsible for leading the advancement of IEHP's holistic focus on quality through transformative payment incentives, datadriven initiatives, innovative solutions, and strong internal and external partnerships. In this role, Dr. Juhn also ensures the health plan's commitment to providing the highest quality of care.





Janet Nix, EdD Chief Organizational Development Officer

Dr. Janet Nix joined IEHP as Chief of Organizational Development in August 2015. She is responsible for the organizational development and operations of Human Resources.

Utilizing her vast experience and expertise, Dr. Nix leads the way to continue developing and improving the core functions of IEHP's Human Resources, Leadership and Development, Recruiting and more. Dr. Nix's key focus includes impacting the IEHP culture and enriching IEHP's goal of developing each employee.



Michelle Rai, MS Chief Communications and Marketing Officer

Michelle Rai joined Inland Empire Health Plan as Chief Communications and Marketing Officer in March 2020. She oversees IEHP's communications and marketing programs and guides the development of long-term communication and marketing strategies.

In this role, Ms. Rai oversees the strategic execution of IEHP's branding, advertising, media relations, internal communications, digital and social media initiatives to align with IEHP's Mission, Vision and Values.



Takashi Wada, MD, MPH Chief Medical Officer

Dr. Takashi Wada was appointed Chief Medical Officer in August 2021. In this role, Dr. Wada provides clinical strategic leadership for IEHP in partnership with the Chief Quality Officer through collaborative, accountable processes to improve the quality-of-care delivery and drive improved health outcomes for IEHP Members.

He is responsible for the health services division, including utilization management, behavioral health and care management, pharmacy, community health, health education and practice transformation.

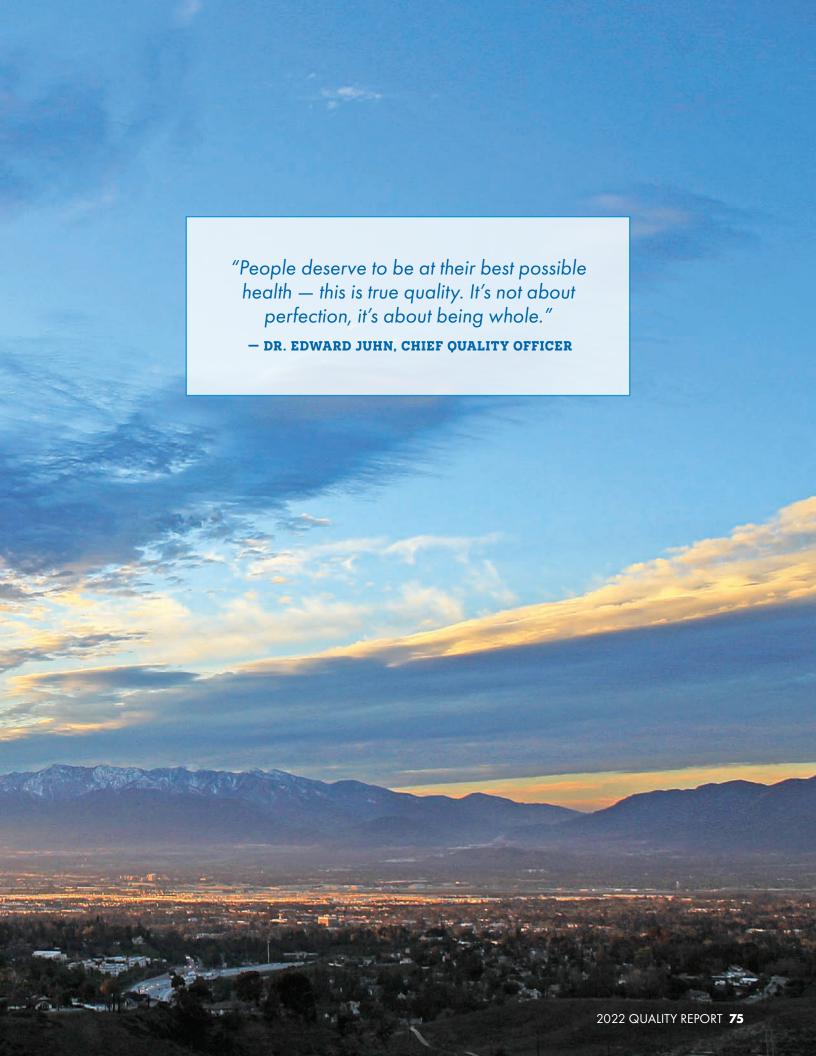


Susie White, MBA Chief Operating Officer

Susie White was appointed Chief Operations Officer in July 2019. She leads the plan's business operations and is responsible for implementing strategic initiatives and policies to support the Mission, Vision, and Values of IEHP and the delivery of cost-effective and efficient care to its more than 1.5 million Members.

Ms. White's areas of accountability include Member Services, Provider Services, facilities, security, business systems configuration and support, and delegation oversight.





We heal and inspire the human spirit.



Inland Empire Health Plan

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