

AGENDA

Executive Committee January 8, 2025 12:00 PM

512 W. Aten Rd., Imperial, CA 92251

All supporting documentation is available for public review at https://chpiv.org

Committee Members	Representing					
Lee Hindman	LHA Chairperson – Joint Chambers of Commerce Nominee					
Yvonne Bell	LHA Vice-Chair & Finance Committee Vice-Chair – CEO, Innercare					
Dr. Carlos Ramirez	Finance Committee Chair – CEO/ Senior Consultant DCRC					
Dr. Unnati Sampat	LHA Commissioner – Imperial Valley Medical Society					
Dr. Allan Wu	LHA Commissioner – Innercare					

1. CALL TO ORDER

Lee Hindman. Chair

A. Roll Call

Donna Ponce. Commission Clerk

- B. Approval of Agenda
 - 1. Items to be pulled or added from the Information/Action/Closed Session Calendar
 - 2. Approval of the order of the agenda

2. PUBLIC COMMENT

Lee Hindman, Chair

Public Comment is limited to items NOT listed on the agenda. This is an opportunity for members of the public to address the Commission on any matter within the Commission's jurisdiction. Any action taken as a result of public comment shall be limited to the direction of staff. When addressing the Commission, state your name for the record prior to providing your comments. Please address the Commission as a whole, through the Chairperson. Individuals will be given three (3) minutes to address the board.

3. CONSENT AGENDA

All items appearing on the consent calendar are recommended for approval and will be acted upon by one motion, without discussion. Should any Commissioner or other person express their preference to consider an item separately, that item will be addressed at a time as determined by the Chair.

A. Approval of Minutes from 12/4/2024

- B. Motion to recommend to the full commission the acceptance of monthly financial reports as reviewed and accepted by the Finance Committee.
 - 1. Enrollment Report
 - 2. Statement of Revenues, Expenses, and Changes in Net Position
 - 3. Statement of Net Position (Assets)
 - 4. Statement of Net Position (Liabilities & Net Position)
 - 5. Summarized TNE Calculation
 - 6. Cash Transaction Report

4. ACTION

A. Motion to recommend to the full commission the acceptance of the 2025 Budget *David Wilson, CFO*

5. INFORMATION

- A. Health Services Report (Dr. Gordon Arakawa, CMO)
- B. Financial Services Report (David Wilson, CFO)
- C. Compliance Report (Chelsea M. Hardy, Senior Director of Compliance)
- D. Community Relations Report (Michelle S. Ortiz-Trujillo, Head of Member Experience Development and Julia Hutchins, Chief Operating Officer)
- E. CEO Report (Larry Lewis, CEO)
- F. Other new or old business (Lee Hindman, Chair)

6. CLOSED SESSION

Pursuant to Welfare and Institutions Code § 14087.38 (n) Report Involving Trade Secret new product discussion (estimated date of disclosure, 10/2025)

- A. Update/Action on Contract with Health Net Community Solutions, Inc.
- B. Public Employee Annual Performance Evaluation



- 7. RECONVENE OPEN SESSION
 - A. Report on actions taken in closed session.
- 8. COMMISSIONER REMARKS (Lee Hindman, Chair)
- 9. ADJOURNMENT





MINUTES

Executive Committee December 4th, 2024 12:00 PM

512 W. Aten Rd., Imperial, CA 92251

All supporting documentation is available for public review at https://chpiv.org

Committee Members	ee Members Representing	
Lee Hindman	LHA Chairperson – Joint Chambers of Commerce Nominee	✓
Yvonne Bell	LHA Vice-Chair & Finance Committee Vice-Chair – CEO, Innercare	✓
Dr. Carlos Ramirez	LHA Commissioner-CEO/Senior Consultant DCRC	✓
Dr. Unnati Sampat	LHA Commissioner – Imperial Valley Medical Society	✓
Dr. Allan Wu	LHA Commissioner – Innercare	✓

1. CALL TO ORDER

Lee Hindman. Chair

Meeting called to order at 12:04 p.m.

A. Roll Call Donna Ponce, Commission Clerk Roll call taken and quorum confirmed. Attendance is as shown.

- B. Approval of Agenda
 - 1. Items to be pulled or added from the Information/Action/Closed Session Calendar
 - 2. Approval of the order of the agenda *Items 6A and 6B to be moved after items 3A and 3B.*

2. PUBLIC COMMENT

Lee Hindman, Chair

Public Comment is limited to items NOT listed on the agenda. This is an opportunity for members of the public to address the Commission on any matter within the Commission's jurisdiction. Any action taken as a result of public comment shall be limited to the direction of staff. When addressing the Commission, state your name for the record prior to providing your comments. Please address the Commission as a whole, through the Chairperson. Individuals will be given three (3) minutes to address the board. *None*.



3. CONSENT AGENDA

All items appearing on the consent calendar are recommended for approval and will be acted upon by one motion, without discussion. Should any Commissioner or other person express their preference to consider an item separately, that item will be addressed at a time as determined by the Chair. (Ramirez/Wu) To approve the consent agenda. Motion carried.

- A. Approval of Minutes from 11/6/2024
- B. Motion to recommend to the full commission the acceptance of monthly financial reports as reviewed and accepted by the Finance Committee.
 - 1. Enrollment Report
 - 2. Statement of Revenues, Expenses, and Changes in Net Position
 - 3. Statement of Net Position (Assets)
 - 4. Statement of Net Position (Liabilities & Net Position)
 - 5. Summarized TNE Calculation
 - 6. Cash Transaction Report

4. ACTION

A. Motion to recommend to the full commission the Moss Adams Audit Engagement for 2024 as reviewed and accepted by the Finance Committee.

David Wilson, CFO
(Ramirez/Wu) Motion to recommend to the full commission the Moss Adams Audit Engagement for 2024 Motion carried.

5. INFORMATION

- A. Health Services Report (Dr. Gordon Arakawa, CMO)

 CMO, Dr. Gordon Arakawa and EDHCS, Jeanette Crenshaw presented updates on Q4 QIHEC Review and NCQA.
- B. Financial Services Report (David Wilson, CFO) CFO, David Wilson, presented the financial reports.
- C. Compliance Report (Chelsea M. Hardy, Senior Director of Compliance)
 CCO, Elysse Tarabola reported the resignation of Delegation Oversight Manager, Jadira
 Alcaraz. Ms. Alcaraz's last day of employment was November 27, 2024. Ms. Tarabola further
 stated that interviews are currently underway to fill the vacant position.

D. Community Relations Report (Michelle S. Ortiz-Trujillo, Head of Member Experience Development and Julia Hutchins, Chief Operating Officer)

HMED, Michelle Ortiz-Trujillo reported that she will be conducting the Q4 Community Advisory Committee (CAC) meeting on-site next week. She further informed the commission that CHPIV will have a booth at the "Christmas in a Small Town" event in Imperial.

Mrs. Ortiz-Trujillo concluded by encouraging members to provide feedback on CHPIV's services via the organization's website.

E. CEO Report (Larry Lewis, CEO)

CEO Larry Lewis reported that he and Dr. Gordon Arakawa have been communicating with Janet Angulo and Angela Ramirez of Public Health. These discussions have involved several meetings focused on three state programs. The objective is to assemble a core group of leaders to develop a comprehensive workplan which aims at prioritizing the individual members and integrate community support groups to assist members. They also intend to invite Leticia Plancarte, Director of Behavioral Health, to participate.

Healthcare Services will be holding all CEO and all CFO meetings next week.

F. Other new or old business (Lee Hindman, Chair)

6. CLOSED SESSION

Pursuant to Welfare and Institutions Code § 14087.38 (n) Report Involving Trade Secret new product discussion (estimated date of disclosure, 01/2025) Chair Hindman announced the committee will enter into closed session.

- A. Update/Action on Contract with Health Net Community Solutions, Inc.
- B. Public Employee Annual Performance Evaluation

7. RECONVENE OPEN SESSION

A. Report on actions taken in closed session.

Chair Hindman announced the committee has reconvened into open session and reports that no action has been taken.

8. COMMISSIONER REMARKS (*Lee Hindman, Chair*)

Chair Hindman reminded the commission that the LHA Commission meeting will be held at Maranatha Steakhouse on Monday, December 9^{th} , 2024.

9. ADJOURNMENT

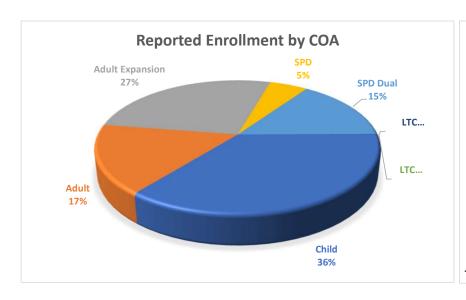
The meeting was adjourned at 12:57 p.m. Next meeting: January 13, 2024

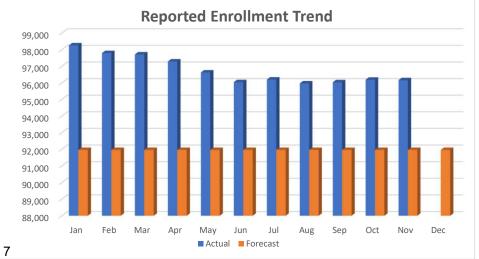
Imperial County Local Health Authority DBA Community Health Plan of Imperial Valley Enrollment Report For November 2024

							2024	(Reported)						
Category of Aid (COA)*	January	February	March	April	May	June	July	August	September	October	November	December	YTD Months	YTD Δ
Child	34,676	34,549	34,607	35,210	34,897	34,589	34,598	34,421	34,424	34,437	34,423		380,831	-0.7%
Adult	17,225	17,130	16,997	16,065	15,906	15,767	15,725	15,675	15,675	15,690	15,664		177,519	-9.0%
Adult Expansion	27,003	26,696	26,579	26,347	26,042	25,784	25,857	25,795	25,733	25,780	25,733		287,349	-4.7%
SPD	5,005	4,982	5,007	5,010	5,025	5,041	5,061	5,057	5,085	5,090	5,096		55,459	1.6%
SPD Dual	14,258	14,342	14,433	14,555	14,652	14,760	14,851	14,910	15,007	15,068	15,122		161,958	5.3%
LTC	11	11	12	17	17	15	17	18	19	19	19		175	72.7%
LTC Dual	81	80	79	83	86	87	88	92	92	105	105		978	13.6%
Total Medicaid	98,259	97,790	97,714	97,287	96,625	96,043	96,197	95,968	96,035	96,189	96,162		1,064,269	-2.3%
Monthly Change		-0.5%	-0.1%	-0.4%	-0.7%	-0.6%	0.2%	-0.2%	0.1%	0.2%	0.0%		-0.2%	

							2024	(Restated)						
Category of Aid (COA)*	January	February	March	April	May	June	July	August	September	October	November	December	YTD Months	YTD Δ
Child	35,296	35,591	35,539	35,338	35,097	34,800	34,736	34,565	34,580	34,512	34,423		384,477	-2.0%
Adult	16,468	16,578	16,496	16,188	16,059	15,924	15,840	15,823	15,783	15,720	15,664		176,543	-4.2%
Adult Expansion	26,823	26,742	26,667	26,376	26,046	25,788	25,781	25,682	25,656	25,694	25,733		286,988	-4.4%
SPD	5,055	5,120	5,114	5,104	5,110	5,113	5,099	5,102	5,098	5,087	5,096		56,098	0.9%
SPD Dual	14,399	14,530	14,632	14,714	14,792	14,881	14,920	14,992	15,059	15,088	15,122		163,129	4.6%
LTC	10	10	13	16	16	15	19	18	19	19	19		174	90.0%
LTC Dual	79	80	79	85	84	86	85	89	93	104	105		969	17.7%
Total Medicaid	98,130	98,651	98,540	97,821	97,204	96,607	96,480	96,271	96,288	96,224	96,162		1,068,378	-1.9%
Monthly Change		0.5%	-0.1%	-0.7%	-0.6%	-0.6%	-0.1%	-0.2%	0.0%	-0.1%	-0.1%	·	-0.2%	

^{*} Source: DHCS 820 Remittance summary; includes retroactivity





Imperial County Local Health Authority DBA Community Health Plan of Imperial Valley Statement of Revenues, Expenses, and Changes in Net Position For November 2024

	October November					November (YTD))						
							Varian	nce - B/(W)							
		Actual		Actual	Foreca	st	vs. Forecast	vs. Pri	or Month		Actual		Budget	Vari	ance - B/(W)	Current Month Explanations
REVENUE																
Premium	\$ 2	23,049,788	\$ 2	2,580,622	\$ 22,249	,362	\$ 331,260	\$	(469,166)	\$	250,877,363	\$ 2	244,742,979	\$	6,134,385	
Pass-Through		657,816		321,811	883	,592	(561,781)		(336,005)		6,366,412		9,719,508		(3,353,096)	Maternity down in November, offset by Medical cost
HN Settlements		-		-		-	-		-		602,764		1,135,000		(532,236)	Timing of settlements booked in 2023
Government Grants		-		-		-	-		-		134,859		-		134,859	
TOTAL REVENUE	- 2	23,707,604	2	2,902,433	23,132	,953	(230,521)		(805,171)		257,981,398	2	255,597,487		2,383,912	Favorable due to member volume (+\$1.1M),
HEALTH CARE COSTS	\$ 2	23,016,110	\$ 2	2,225,014	\$ 22,465	,472	\$ 240,458	\$	791,096	\$	249,620,881	\$ 2	47,120,197	\$	(2,500,683)	offset by rate/mix (-\$1.3M)
Gross Margin		691,494		677,419	667	,481	9,938		(14,075)		8,360,517		8,477,289		(116,772)	
·																
ADMINISTRATIVE EXPENSE																
Salaries & Wages	\$	269,510	\$	271,243		,139	\$ (30,103)	\$	(1,733)	\$	2,821,322	\$	2,564,199	\$	(257,123)	
Benefits and Bonus		29,518		30,490	78	,663	48,173		(973)		386,211		837,297		451,087	
Total Labor Costs		299,028		301,733	319	,803	18,070		(2,705)		3,207,532		3,401,496		193,963	Total labor in line with forecast
Consulting, Legal, & Other Professional	\$	173,592	\$	113,942	\$ 15	,508	\$ (98,434)	\$	59,649	\$	825,015	\$	130,592	\$	(694,423)	HMA, Moss Adams, Manifest MedEx, and Legal
Insurance and Banking		4,492		4,492	6	,380	1,888		-		41,505		70,182		28,676	
IT Hardware/Software		2,994		3,162	9	,820	6,657		(168)		43,992		188,017		144,024	
Office Expense		5,779		3,182	14	,606	11,424		2,597		157,488		160,666		3,178	
Other Admin		49,757		65,827	12	,443	(53,383)		(16,070)		517,512		106,542		(410,971)	Regulatory fees of \$53K paid to DHCS
Total Administrative Expense		535,642		492,338	378	,560	(113,778)		43,304		4,793,046		4,057,494		(735,552)	
Non-Operating Income																
Dividend, Interest & Investment Income	\$	94,351	\$	103,403	\$ 100	,347	\$ 3,056	\$	9,052	\$	924,113	\$	990,319	\$	(66,206)	
Rental Income		1,450		1,450		-	1,450				15,950		· -	-	15,950	
Total Non-Operating Income		95,801		104,853	100	,347	4,506		9,052		940,063		990,319		(50,256)	
Develoption 9 Amountination	\$	10.050	\$	10 220	ć		(10.220)	,	(420)	,	100 702	Ļ			(100 703)	
Depreciation & Amortization		10,656		10,228		_	(10,228)		(428)	\$	106,703				(106,703)	
Change in Net Position	\$	240,997	\$	279,705	\$ 389	,267	\$ (109,562)	\$	38,708	\$	4,400,832	\$	5,410,114	\$	(1,009,283)	
Key Metrics																
Enrollment		96,189		96,162	91	,964	4,199		(27)		1,064,269		1,011,599		52,671	
Revenue PMPM		\$246.47		\$238.17		1.54	(\$13.38)		(\$8.30)		\$242.40		\$252.67		(\$10.26)	
MLR		97.08%		97.04%		7.1%	7 bps		4 bps		96.8%		96.7%		(13) bps	
Admin Ratio		2.3%		2.1%		1.6%	(51) bps		11 bps		1.9%		1.6%		(27) bps	
Net Income PMPM		\$2.51		\$2.91		4.23	(\$1.32)		\$0.40		\$4.14		\$5.35		(\$1.21)	
Net Income %		1.0%		1.2%		1.7%	(46) bps		20 bps		1.7%		2.1%		(41) bps	
		1.070		2.270		,,0	(.5, 505		_v ~ps		2.770		2.170		(. - ,	

Imperial County Local Health Authority dba Community Health Plan of Imperial Valley Statement of Net Position As of November 30, 2024

ASSETS			
Current Assets	Oct 2024	Nov 2024	Change
Cash and Investments			
Chase - Checking	\$ 199,830	\$ 199,830	\$ -
Chase - Money Market	3,370,693	25,799,897	22,429,204
JPMorgan Securities	12,304,439	13,039,168	734,729
First Foundation Bank	152,098	40,960	(111,138)
Receivables			
Accounts Receivable	4,223	2,773	(1,450)
Dividend Receivable	10,460	15,153	4,693
Premium Receivable	23,049,788	22,580,622	(469,166)
Pass-Through Receivable	359,633	321,811	(37,822)
Other Current Assets			
Prepaid Expenses	150,067	246,749	96,682
Total Current Assets	39,601,231	62,246,963	22,645,732
Noncurrent Assets			
Restricted Deposit			
First Foundation Bank - Restricted	300,000	300,000	-
Capital Assets			
Buildings - Net	2,974,601	2,966,053	(8,548)
Computers & Office Equipment - Net	8,068	7,900	(168)
Improvements - Net	46,809	46,401	(408)
Intangible Assets - Net	44,957	44,134	(823)
Operating ROU Asset (Copier) - Net	7,037	6,756	(281)
Total Noncurrent Assets	3,381,472	3,371,244	(10,227)
Total Assets	\$ 42,982,703	\$ 65,618,207	\$ 22,635,505

Imperial County Local Health Authority dba Community Health Plan of Imperial Valley Statement of Net Position As of November 30, 2024

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CURRENT LIABILITIES	Oct 2024	Nov 2024	Change
Payables			
Accounts Payable	\$ 183,605	\$ 273,895	\$ 90,290
Capitation Payable	22,358,294	44,261,497	21,903,203
Pass-Through Payable	657,816	979,627	321,811
Credit Card Payable	9,294	13,395	4,101
Other Current Liabilities			
Short Term Lease Liability - Copier	3,359	3,375	15
Bonus Accrual	119,194	131,114	11,919
Salaries Accrual	46,190	56,664	10,474
Vacation Accrual	105,152	119,425	14,273
Total Current Liabilities	23,482,905	45,838,992	22,356,087
NON-CURRENT LIABILITIES			
Long Term Lease Liability - Copier	3,853	3,565	(288)
Total Noncurrent Liabilities	3,853	3,565	(288)
Total Liabilities	23,486,758	45,842,557	22,355,799
NET POSITION			
Net investment in Capital Assets	3,381,472	3,371,244	(10,228)
Restricted by Legislative Authority	300,000	300,000	-
Unrestricted	11,693,346	11,703,574	10,228
Net Revenue	4,121,127	4,400,832	279,705
Total Net Position	19,495,945	19,775,650	279,705
Total Liabilities and Net Position	\$ 42,982,703	\$ 65,618,207	\$ 22,635,505

Imperial County Local Health Authority dba Community Health Plan of Imperial Valley Summarized Tangible Net Equity Calculation As of November 30, 2024

Net Equity	\$ 19,775,650
Add: Subordinated Debt and Accrued Subordinated Interest	\$ 0
Less: Report 1, Column B, Line 27 including:	\$ 0
Unsecured Receivables from officers, directors, and affiliates; Intangibles	
Tangible Net Equity (TNE)	\$ 19,775,650
Required Tangible Net Equity *	\$ 4,248,292
TNE Excess (Deficiency)	\$ 15,527,358

	Full Service Plan	
A.	Minimum TNE Requirement	1 \$ 1,000,000
В.	REVENUES:	
	2% of the first \$150 million of annualized premium revenues (lines 1, 2, 4, 5, 7, 9 from Income Statement) Plus	\$ 3,000,000
	1% of annualized premium revenues in excess of \$150 million	\$ 1,248,292
	Total	\$ 4,248,292

•	* Calculated Requi	red Tangible Net E	quity
\$	22,902,432	- Current Month Pr	remium
	x 12		
\$	274,829,184	- Annualized —	1
\$	150,000,000	4	
	x 2%		
\$	3,000,000		
\$	124,829,184	4	
	x 1%		
\$	1,248,292		
\$	4,248,292	- Required TNE	

Date	Account	Vendor	Memo/Description	Amount
Chase Checking				
11/15/2024	Chase Checking	J.P. Morgan Chase	Dividend Income - Oct 2024 \$	10,459.91
11/15/2024	Chase Checking	Health Net	Rental Income - Oct 2024	1,450.00
11/15/2024	Chase Checking	Imperial Irrigation District	IID Energy Efficiency Savings Rebate / State Compensation Refund	3,302.40
11/15/2024	Chase Checking	Department of Health Care Services	11/15/24 Receipt - DHCS (Oct 2024 Revenue)	22,911,510.19
11/15/2024	Chase Checking	Department of Health Care Services	11/15/24 Receipt - DHCS (Oct 2024 Revenue)	429,749.97
11/15/2024	Chase Checking	Department of Health Care Services	11/15/24 Receipt - DHCS (Oct 2024 Revenue)	59,278.91
11/15/2024	Chase Checking	Department of Health Care Services	11/15/24 Receipt - DHCS (Oct 2024 Revenue)	7,689.85
11/15/2024	Chase Checking	Department of Health Care Services	11/15/24 Receipt - DHCS (Oct 2024 Revenue)	1,191.58
11/15/2024	Chase Checking	Mid Atlantic Trust Company	Payroll Date: 11/01/24 - Retirement Contributions	-5,976.98
11/15/2024	Chase Checking	JPMorgan Chase	Service Charges - Oct 2024	-698.42
11/15/2024	Chase Checking	AM Copiers Inc.	Chase Bill Pay - Invoice: IN6141	-356.15
11/15/2024	Chase Checking	American Trust Retirement Services	Chase Bill Pay - Invoice: 466513	-1,494.87
11/15/2024	Chase Checking	Brawley Rotary Club	Chase Bill Pay - October Statement	-155.00
11/15/2024	Chase Checking	City of Imperial	Chase Bill Pay - Service Period: 09/23/24 - 10/23/24	-164.47
11/15/2024	Chase Checking	Conveyor Group	Chase Bill Pay - Invoices: 11291 / 11338	-7,100.93
11/15/2024	Chase Checking	Epstein Becker & Green, P.C.	Chase Bill Pay - Invoices: 1177118 / 1177119	-17,956.00
11/15/2024	Chase Checking	Health Management Associates, Inc.	Chase Bill Pay - Invoice: 210806-0000003	-25,066.25
11/15/2024	Chase Checking	i.Access, Inc.	Chase Bill Pay - Invoice: WA2782410	-45.00
11/15/2024	Chase Checking	I.V. Termite & Pest Control	Chase Bill Pay - Invoice: 0341988	-120.00
11/15/2024	Chase Checking	I.V. Termite & Pest Control	Chase Bill Pay - Invoice: 0343165	-120.00
11/15/2024	Chase Checking	Imperial County Treasurer-Tax Collector	Chase Bill Pay - ASMT Number: 990-134-189-000 2nd Installment	-1,016.00
11/15/2024	Chase Checking	Imperial County Treasurer-Tax Collector	Chase Bill Pay - ASMT Number: 990-134-189-000 2nd Installment	-12,601.02
11/15/2024	Chase Checking	Imperial Desert Landscape	Chase Bill Pay - Invoice: 24-273	-250.00
11/15/2024	Chase Checking	Imperial Irrigation District	Chase Bill Pay - Service Period: 09/24/24 - 10/20/24	-1,310.08
11/15/2024	Chase Checking	Junior's Cafe	Chase Bill Pay - Invoice: 13-17267	-502.58
11/15/2024	Chase Checking	Law Office of William S. Smerdon	Chase Bill Pay - Invoice: 2805	-2,805.00
11/15/2024	Chase Checking	Liebert Cassidy Whitmore	Chase Bill Pay - Invoice: 277834	-544.00
11/15/2024	Chase Checking	Milliman, Inc.	Chase Bill Pay - Invoices: 1529840 / 1532945 / 1541428 / 1546909	-68,134.75
11/15/2024	Chase Checking	Oracle America, Inc.	Chase Bill Pay - Invoice: 2006541	-33,024.99
11/15/2024	Chase Checking	Quench USA	Invoice: INV080903339	-129.30
11/15/2024	Chase Checking	Republic Services	Chase Bill Pay - Invoice: 0467-001727372	-141.17
11/15/2024	Chase Checking	Salary.com	Chase Bill Pay - Invoice: INV67407	-6,400.00
11/15/2024	Chase Checking	Shannon Long	Chase Bill Pay - Invoice: 1 / Invoice: 2	-9,139.23
11/15/2024	Chase Checking	State Compensation Insurance Fund	Chase Bill Pay - Invoice: 1002048097	-815.08
11/15/2024	Chase Checking	Stericycle, Inc.	Invoice: 8008714813	-110.84
11/30/2024	Chase Checking	Health Net	Rental Income - Nov 2024	1,450.00
11/30/2024	Chase Checking	Mid Atlantic Trust Company	Payroll Date: 11/15/24 - Retirement Contributions	-6,122.28
First Foundation	Bank			
11/30/2024	FFB Payroll	Rippling	Module - Time & Attendance	-230.40
11/30/2024	FFB Payroll	First Foundation Bank	CC Payment 11/07/24	-5,801.70
11/30/2024	FFB Payroll	Amazon	Office Desk	-119.06
11/30/2024	FFB Payroll	Rippling	Payroll Date 11/15/24 - Employee / Employer Taxes	-41,128.76
11/30/2024	FFB Payroll	Rippling	Payroll Date 11/15/24 - Net Salaries / Wages	-73,345.35
11/30/2024	FFB Payroll	Paychex of New York LLC	Service Fee - OAB Invoice (11/20/24)	-49.50
11/30/2024	FFB Payroll	Employee - D. Wilson	Employee Reimbursement - D.Wilson	-620.70
11/30/2024	FFB Payroll	Blue Shield of California	Insurance Benefits - Dec 2024	-16,067.31
11/30/2024	FFB Payroll	Rippling	Payroll Date 11/29/24 - Employee / Employer Taxes	-40,774.74
11/30/2024	FFB Payroll	Rippling	Payroll Date 11/29/24 - Net Salaries / Wages	-74,606.78
11/30/2024	FFB Payroll	Rippling	J. Alcaraz Final Paycheck - Employee / Employer Taxes	-992.68
11/30/2024	FFB Payroll	Rippling	J. Alcaraz Final Paycheck - Net Salaries / Wages	-5,523.24
11/30/2024	FFB Payroll	First Foundation Bank	11/07/24 - Wire Fee	-10.00
J.P. Morgan Secu	ırities			
		es J.P. Morgan Securities	Investment Income - Nov 2024 \$	88,283.32



2025 Budget Review

1/8/2025

Key Assumptions



Membership & Gross Margin

- Membership was forecasted with a -3.1% erosion in overall member months, consistent with DMHC projections for the county; net gross margin impact: (\$311K)
 - December 2025 ending membership: 92,520 (November 2024: 96,162)
 - No DSNP membership forecasted in 2025
- Revenue was down (\$4.5M), or -1.6%, from \$282.4M to \$277.9M, driven largely by Pass-Through revenue
 - Premium capitation improved from \$214 PMPM to \$233 PMPM (9% mix-adjusted increase) based on 2025 Preliminary rate guidance from DMHC
 - Pass-through revenue was down (\$2.6M), all of which is offset in medical costs
 - Profit Share revenue down by (\$0.6M) due to higher medical costs anticipated with Health Net

Key Assumptions (Continued)



Administrative Costs

- Overall, Administrative costs are forecasted to increase in 2025 by \$2.1M, driven by DSNP investment of \$2.6M
- FTE's increase from 18 to 46, all of which are related to the DSNP launch in 2026 and are back-loaded in second half of year; Sales, Case Management and Health Services make up the majority of the increase

Administrative Cost Bridge		
2024 Administrative Costs	\$	5,329,071
Legacy Administrative Changes - B/(W)		
Cost of Living Increase on Legacy Salaries	\$	(140,386)
FTE Efficiencies	\$	(11,521)
Consulting/Start-up	\$	262,318
All Other (Annualization of Outside Services, FTEs, Other)	\$	(171,602)
Total Legacy Cost Changes	\$	(61,192)
	Ψ	(01,192)
· · · · · · · · · · · · · · · · · · ·	Ψ	(01,192)
DSNP Changes - B/(W)	\$	(2,070,095)
3 , 3		, , ,
3 , 3		, , ,
DSNP Changes - B/(W)	\$	(2,070,095)
DSNP Changes - B/(W)	\$	(2,070,095)

FTE Bridge	
December 2024 FTEs	18
Change in FTEs	
Healthcare Services	4
Case Management	9
Compliance	2
Operations	-
Member & Provider Services	2
Sales & Marketing	6
Corporate (Executive, IT, Finance, HR)	5
Total Change in FTEs	28
December 2025 FTEs	46

DSNP Assumptions



DSNP Administrative Cost Projection

DSNP costs, both start-up and ongoing, were forecasted at \$2.6M, a \$2.1M increase over
 2024

DSNP Cost Summary	2025	% of Total
Salary	\$ 1,641,759	64.0%
Benefits	\$ 134,886	5.3%
Bid Development (Milliman)	\$ 260,000	10.1%
Legal & Consulting	\$ 399,000	15.6%
Other Outside Services	\$ 40,000	1.6%
Marketing & Advertising	\$ 40,985	1.6%
Other	\$ 49,085	1.9%
Total DSNP Estimate:	\$ 2,565,715	100%

- The DSNP Feasibility study projected 2025 DSNP incremental cost to be \$2.7M; key changes included a reduction to IT start-up costs (\$500K) offset by increases in consulting
- Total <u>2026</u> CHPIV administrative costs in the Feasibility Study were forecasted at \$11M, inclusive of MSO fees, and fully loaded (annualized) Salaries & Wages

CHPIV 2025 P&L



													_			
			2024						2025		vs. 2024			Feasibi	lity Study (2	2025)
(\$, 000)	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Q4	Total	vs. 2024 B/(W)	% Δ		\$	B/(W)	% Δ
REVENUE	Q1	QZ	Q0	47	70.07		- 42	40	47	10141	5/(11)	70 -		<u> </u>		70 1
Premium Capitation	\$66,748	\$68,897	\$69,602	\$68,640	\$ 273,887	\$68,7	73 \$68,376	\$67,980	\$67,583	\$ 272,713	\$ (1,175)	-0.4%	,	\$ 269,345	\$ 3,367	1.3%
Pass Through	\$ 2,651	\$ 1,665	\$ 1,071	\$ 1,324	\$ 6.711	\$ 1,0	. ,		. ,	\$ 4,120	, ,	-38.6%			\$ (4,450)	-51.9%
Quality/Profit Sharing	\$ -	\$ 603	\$ -	\$ -	\$ 603	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (603)	-100%		. ,	\$ (1,000)	-100%
, c	Ψ -	ψ 000	Ψ -	Ψ	000	Ψ	Ψ -	Ψ -	Ψ -	•	Ψ (000)	-10070	l`	ψ 1,000	Ψ (1,000)	-10070
Other Revenue																
Investment & Other Income	\$ 269	\$ 287			. ,	\$ 20					. , ,	-9.7%	_	· /	\$ (221)	-17.2%
TOTAL REVENUES	\$69,668	\$71,452	\$70,992	\$70,270	\$ 282,381	\$70,0	79 \$69,676	\$69,273	\$68,870	\$ 277,898	\$ (4,483)	-1.6%	- 1	\$ 280,202	\$ (2,304)	-0.8%
HEALTHCARE COST																
Medical Capitation	\$64,746	\$66,734	\$67,514	\$66,581	\$ 265,574	\$66,7	10 \$66,325	\$65,940	\$65,556	\$ 264,531	\$ 1,043	0.4%		\$ 261,265	\$ (3,266)	-1.3%
Pass Through	\$ 2,651	\$ 1,665	\$ 1,071	\$ 1,324	\$ 6,711	\$ 1,0	39 \$ 1,033	\$ 1,027	\$ 1,021	\$ 4,120	\$ 2,591	38.6%	:	\$ 8,570	\$ 4,450	51.9%
TOTAL HEALTH CARE COST	\$67,396	\$68,399	\$68,585	\$67,905	\$ 272,285	\$67,7	49 \$67,358	\$66,967	\$66,576	\$ 268,651	\$ 3,634	1.3%		\$ 269,835	\$ 1,184	0.4%
Gross Margin	\$ 2,272	\$ 3,053	\$ 2,407	\$ 2,365	\$ 10,096	\$ 2,3	30 \$ 2,318	\$ 2,306	\$ 2,294	\$ 9,247	\$ (849)	-8.4%		\$ 10,367	\$ (1,120)	-10.8%
	* -,	7 1,111	+ =,	+ =,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- + -,-	· · · · · · · · · · · · · · · · · · ·	¥ _,	* -,= • ·	*	+ ()		F	,,	+ (1)1=1)	
ADMINISTRATIVE COSTS																
Labor Costs																
Salaries & Wages	\$ 623	\$ 874	\$ 891		\$ 3,232		. ,	\$ 1,207	. ,		\$ (1,668)	-51.6%				
Benefits Expense	\$ 66	\$ 73	\$ 80	\$ 58	\$ 277		74 \$ 89			\$ 403	\$ (125)	-45.2%				
Total Labor Costs	\$ 688	\$ 948	\$ 971	\$ 903	\$ 3,510	\$ 1,0	20 \$ 1,250	\$ 1,313	\$ 1,720	\$ 5,303	\$ (1,794)	-51.1%				
Contract & Professional Fees	\$ 96	\$ 149	\$ 264	\$ 326	\$ 835	\$ 30	02 \$ 277	\$ 104	\$ 89	\$ 772	\$ 63	7.6%				
Outside Services	\$ -	\$ -	\$ 28	\$ 117	\$ 145	\$ 9	94 \$ 155	\$ 88	\$ 91	\$ 429	\$ (284)	-195%				
Advertising & Marketing	\$ 16	\$ 8	\$ 14	\$ 16	\$ 54	\$	7 \$ 22	\$ 13	\$ 10	\$ 53	\$ 1	2.6%				
Regulatory Fees	\$ (0)	\$ 0	\$ 175	\$ 81	\$ 256	\$ 8	35 \$ 83	\$ 83	\$ 83	\$ 334	\$ (78)	-30.4%				
Information Technology	\$ 13	\$ 10	\$ 14	\$ 10	\$ 47	\$	15 \$ 12	\$ 23	\$ 18	\$ 69	\$ (21)	-45.0%				
Travel	\$ 4	\$ 32	\$ 18	\$ 23	\$ 76	\$	32 \$ 26	\$ 25	\$ 27	\$ 110	\$ (33)	-43.8%				
Office & Occupancy Expense	\$ 44	\$ 72	\$ 33	\$ 17	\$ 165	\$	35 \$ 32	\$ 34	\$ 34	\$ 135	\$ 31	18.6%				
Memberships & Subscriptions	\$ 1	\$ 56	\$ 29	\$ 31	\$ 117	\$ 2	28 \$ 28	\$ 29	\$ 31	\$ 116	\$ 1	0.5%				
Taxes, Licenses & Other Financial	\$ 23	\$ 30	\$ 22	\$ 33	\$ 107	\$	28 \$ 35	\$ 23	\$ 36	\$ 123	\$ (15)	-14.3%				
Other	\$ -	\$ 5	\$ 3	\$ 8	\$ 16	\$	2 \$ 6	\$ 7	\$ 3	\$ 18	\$ (2)	-14.8%				
TOTAL ADMINISTRATIVE COSTS	\$ 885	\$ 1,311	\$ 1,570	\$ 1,563	\$ 5,329	\$ 1,6	47 \$ 1,927	\$ 1,743	\$ 2,144	\$ 7,460	\$ (2,131)	-40.0%	,	\$ 8,418	\$ 957	11.4%
Operating Income	\$ 1,386	\$ 1,743	\$ 837	\$ 801	\$ 4,767	\$ 68	33 \$ 391	\$ 563	\$ 150	\$ 1,787	\$ (2,980)	-62.5%	9	\$ 1,950	\$ (162)	-8.3%
Depreciation/Amortization	\$ 28	\$ 29	\$ 29	\$ 31	\$ 117	\$	33 \$ 33	\$ 33	\$ 33	\$ 132	\$ (15)	-12.9%	!	\$ 118	\$ (14)	-12.2%
Change in Net Position	\$ 1,359	\$ 1,714	\$ 808	\$ 770	\$ 4,650	\$ 6	50 \$ 358	\$ 530	\$ 117	\$ 1,655	\$ (2,995)	-64.4%	9	\$ 1,832	\$ (177)	-9.7%
Period Ending Membership	98,539	96,580	96,035	95,490		94,74	18 94,005	93,263	92,520		(2,970)	-3.1%		96,777	(4,257)	-4.4%
Ratios											,				,	
Revenue PMPM	\$235.91	\$245.03	\$246.05	\$244.83	\$ 242.91	\$245.9	90 \$246.42	\$246.94	\$247.47	\$ 246.68	\$ 3.76	1.5%	1	\$ 242.61	\$ 4.06	1.79
Medical Cost PMPM	\$228.21	\$234.56	\$237.70	\$236.59	\$ 234.23	\$237.			•	\$ 238.47		-1.8%		•	\$ (4.83)	-2.19
MLR	96.7%	95.7%	96.6%	96.6%	96.4%	96.7				96.7%	25 bps			96.3%	-37 bps	
Admin PMPM	\$ 3.00	\$ 4.49	\$ 5.44		\$ 4.58	\$ 5.7				\$ 6.62	•	-44.5%	Ι.		\$ 0.67	0.40
Admin Patio	\$ 3.00 1.3%	ъ 4.49 1.8%	\$ 5.44 2.2%	\$ 5.45 2.2%	\$ 4.56 1.9%	ъ э. 2.4				2.7%	,	-44.5%	- [\$ 7.29 3.0%	\$ 0.67 32 bps	9.19
											-80 bps				•	
Net Position Ratio	2.0%	2.4%	1.1%	1.1%	1.6%	0.9	9% 0.5%	0.8%	0.2%	0.6%	-105 bps		$oldsymbol{\perp}$	0.7%	-6 bps	

CHPIV 2025 P&L (by Department)



			Hea	althcare	Case				Member &	Sales &				vs	s. 2024	
(\$, 000)	F	Y 2024	Se	rvices	Mgmt.	(Compliance	Operations	Provider	Marketing	Corporate*	F١	2025		B/(W)	% Δ
ADMINISTRATIVE COSTS																
Labor Costs																
Salaries & Wages	\$	3,232		1,097	380	0	929	430	244	268	1,554	\$	4,901	\$	(1,668)	-51.6%
Benefits Expense	\$	277		75	34	4	71	27	33	29	134	\$	403	\$	(125)	-45.2%
Total Labor Costs	\$	3,510		1,172	413	3	1,000	456	277	298	1,688	\$	5,303	\$	(1,794)	-51.1%
Contract & Professional Fees	\$	835		60	-		48	95	-	-	569	\$	772	\$	63	7.6%
Outside Services	\$	145		179	-		13	-	-	72	164	\$	429	\$	(284)	-195%
Advertising & Marketing	\$	54		-	-		-	-	12	41	-	\$	53	\$	1	2.6%
Regulatory Fees	\$	256		-	-		-	-	-	-	334	\$	334	\$	(78)	-30.4%
Information Technology	\$	47		5	1	1	2	-	2	12	36	\$	69	\$	(21)	-45.0%
Travel	\$	76		10	(3	31	28	9	4	25	\$	110	\$	(33)	-43.8%
Office & Occupancy Expense	\$	165		5	(9	3	-	3	5	109	\$	135	\$	31	18.6%
Memberships & Subscriptions	\$	117		-	-		-	-	-	-	116	\$	116	\$	1	0.5%
Taxes, Licenses & Other Financial	\$	107		-	-		-	-	-	-	123	\$	123	\$	(15)	-14.3%
Other	\$	16		-	-		6	-	-	2	10	\$	18	\$	(2)	
TOTAL ADMINISTRATIVE COSTS	\$	5,329	\$	1,431	\$ 43	5	\$ 1,104	\$ 579	\$ 303	\$ 434	\$ 3,174	\$	7,460	\$	(2,131)	-40.0%
% of Total				19.2%	5.89	%	14.8%	7.8%	4.1%	5.8%	42.5%		100%			
Ratios																
Admin PMPM	\$	4.58										\$	6.62	\$	(2.04)	-44.5%
December 2024 FTE		18		4	-		4	2	2	-	6				•	
December 2025 FTE				8		9	6	2	4	6	11		46			
Change in FTE				4		9	2	-	2	6	5		28			156%

^{*} Includes Executive, Finance, IT, and HR

CHPIV 2024 & 2025 Balance Sheet



(\$,000)	<u></u>	For	ecast	
Balance Sheet	D	ec 2024	D	ec 2025
Premiums Receivables (Medicaid)	\$	23,354	\$	22,823
Cash from Operations and Investing	\$	16,604	\$	18,391
Restricted	\$	300	\$	300
Net Property & Equip/Other	\$	3,061	\$	2,929
TOTAL ASSETS	\$	43,319	\$	44,443
Claims Liability (Medicaid)	\$	22,664	\$	22,149
Other Liabilities	\$	397	\$	407
TOTAL LIABILITIES	\$	23,061	\$	22,556
Restricted Deposits	\$	300	\$	300
Unrestricted Funds	\$	16,648	\$	18,577
Capital Assets	\$	3,061	\$	2,929
Net Income	\$	250	\$	82
TOTAL NET POSITION	\$	20,258	\$	21,887
TOTAL LIABILITIES & NET POSITION	\$	43,319	\$	44,443

Tangible Net Equity Analysis	De	ec 2024	De	c 2025
Required TNE	\$	4,302	\$	4,239
TNE - Minimum	\$	1,000	\$	1,000
TNE - 2 % of Premium (1% > 150M)	\$	4,302	\$	4,239
TNE - 8 % Health Care (4% Mgd Inp)				
TANGIBLE NET EQUITY	\$	20,258	\$	21,887
EXCESS TANGIBLE NET EQUITY	\$	15,956	\$	17,648
PERCENT OF TNE FULFILLED		471%		516%

Risks & Opportunities (Not included in Plan)



Amount	Risk Level	Description
Risks		
-\$150,000	High	Consulting budgets and other outside vendors will continue to be tightly managed; however, unknown factors surrounding DSNP implementation could create pressure to engage outside support
-\$50,000	Med/Low	Community Investment requirements will likely be satisfied by Health Net; the quantified risk reflects maximum exposure
-\$10,000	Low	Administrative challenges in hiring patterns for internal DSNP support based on anticipated 2026 growth

^{- \$210,000} Total Risk

Opportunitie	es	
\$500,000	Med	Preliminary 2025 Medi-Cal rates suggest a 7% increase over previously published rates; opportunity is not fully quantified, but will be finalized in Q2 forecast
\$300,000	Med	Health Net profit share has been removed based on preliminary rates and emerging medical cost trends; new rates could impact profit share opportunity
\$26,000	High	CHPIV qualifies for exemption of property taxes; applications have been submitted to county but are still pending
¢026.000	T-1-1 0 1	

\$826,000 Total Opportunity





Health Services Report

- 1. Quality Improvement Update
- 2. NCQA Update



Local Health Authority Commission

Executive Summary: CHPIV Compliance Department Update January 2025

Delegation Oversight Monitoring Program - 2024 Quarter 3

The CHPIV Delegation Oversight reviewed Health Net's performance across various high-risk delegated functions for 2024 Quarter 3 (July through September) and issued the Q3 final scorecard on 11/27/2024.

CHPIV Delegation Oversight identified one new Key Performance Indicator (KPI) that failed to meet compliance standards for two consecutive quarters, resulting in the issuance of a Corrective Action Plan (CAP). The noncompliant KPI is Member Notification Timeliness at 94.1%, with the CAP due on 12/13/2024. The CAP was received and is currently under review. Additionally, Provider Notification Timeliness at 88.3% remains noncompliant, with a CAP already in place that CHPIV is actively monitoring for effectiveness. We will continue to oversee the implementation of corrective actions to ensure compliance and assess their impact.

Overall, Health Net has shown significant improvement in quarter 3 2024, with only 2 KPIs in the red and all other 22 KPIs in the green.

The table below highlights the KPIs that were noncompliant for two consecutive quarters:

Category	KPI	Q2 Results	Q3 Results	Thresholds*	CAP Status
Utilization	UM002: Member	94.6%	94.1%	Green: >96%	Received; under
Management	Notification			Yellow: 95-96%	review by CHPIV
	Timeliness			Red: <95%	Compliance

^{*} Thresholds are established based on the performance standards outlined in Exhibit A-5 of CHPIV's Plan-to-Plan agreement with Health Net

Noncompliant KPIs from Quarter 3 2024:

Functional Area	KPI#	КРІ	Quarter 3 Results	Thresholds
UM	UM002	Member Notification Timeliness	94.1%	Green: >96% Yellow: 95-96% Red: <95%
UM	UM003	Provider Notification Timeliness	88.3%	Green: >96% Yellow: 95-96% Red: <95%

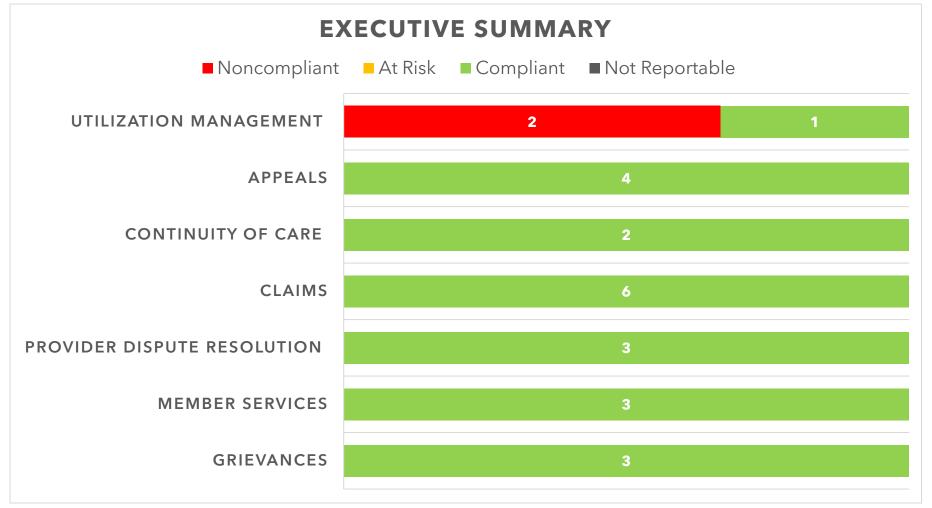
See Exhibit A: Quarter 3 2024 Monitoring Scorecard for all quarter 3 results.



Health Net 2024 Quarter 3 Final Scorecard

Report Issued: November 27, 2024

The CHPIV Delegation Oversight Monitoring Program ensures continuous oversight of high-risk and critical delegated activities that have high member impact and regulatory focus. The Executive Summary provides a concise overview of the performance metrics and categorizes each area into compliant (green), areas at risk (yellow), non-compliant (red), and not reportable (grey) giving a clear snapshot of where performance is strong and where improvements are needed. The thresholds are defined in Exhibit 1, in accordance with the Plan-to-Plan agreement. KPIs that are deemed not reportable are due to CHPIV being unable to calculate compliance because the data was either unavailable or inaccurate.



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Health Net 2024 Quarter 3 Final Scorecard

Report Issued: November 27, 2024

This section provides an overview of Health Net's high-performing areas, non-compliant areas, and necessary actions. It highlights the sections where the program excels, identifies specific areas needing improvement, highlights logs that could not be validated, and outlines next steps.

HIGH PERFORMING AREAS

- 100% Appeals Acknowledgement, Decision, Effectuation of Overturned Appeals and Member Notification Timeliness
- ✓ 100% Continuity of Care Processing and Notification Timeliness
- ✓ 98.07% Calls Answered within 30 seconds
- ✓ 1.79% Call Center Abandonment Rate Level
- ✓ 100% Timely Issuance of Member ID Cards
- ✓ 100% Grievance Acknowledgement, Resolution and Member Notification Timeliness
- √ 99.95% PDR Acknowledgement Timeliness
- ✓ 99.28% PDR Written Determination Timeliness
- √ 100% Interest Payment on Late PDRs Timeliness
- √ 99.4% UM Decision Timeliness
- ✓ 96.66% 30 C- Days, 99.50% 45 W-Days and 100% 90 C- Days Claims Payment Timeliness
- 99.99% Claims Acknowledgment Timeliness
- √ 99.82% Misdirected Claims Timeliness
- ✓ 99.85% Timeliness of Interest Payment on Late Claims



NON-COMPLIANT AREAS

× 94.1% UM Member Notification Timeliness

▼ 88.3% UM Provider Notification Timeliness

! ACTIONS REQUIRED

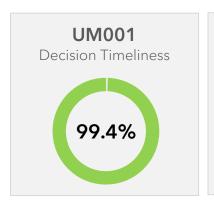
FUNCTIONAL AREA	ACTION	DUE DATE
UTILIZATION MANAGEMENT	Corrective Action Plan (CAP)	12/13/2024
APPEALS	None	NA
CONTINUITY OF CARE	None	NA
CLAIMS	None	NA
PROVIDER DISPUTE RESOLUTION	None	NA
MEMBER SERVICES	None	NA
GRIEVANCES	None 24	NA

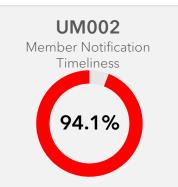


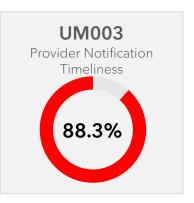
Health Net 2024 Quarter 3 Final Scorecard

Report Issued: November 27, 2024

UTILIZATION MANAGEMENT







KPI#	KPI	Quarter 1	Quarter 2	Quarter 3	Quarter 4
UM001	Decision Timeliness	98.3%	99.6%	99.4%	
UM001SP	Standard Preservice	98.3%	98.3%	97.6%	
UM001EP	 Expedited Preservice 	95.2%	100%	100%	
UM001C	▶ Concurrent	98.9%	100%	100%	
UM001R	▶ Retrospective	100%	100%	100%	
UM001PS	▶ Post Stabilization	No cases	No cases	No Cases	
UM002	Member Notification Timeliness	96%	94.6%	94.1%	
UM002SP	Standard Preservice	100%	98.3%	91.3%	
UM002EP	Expedited Preservice	86.8%	66.7%	71.4%	
UM002C	Concurrent	97%	93.2%	98.9%	
UM002R	▶ Retrospective	100%	100%	83.3%	
UM003	Provider Notification Timeliness	89.1%	90.2%	88.3%	
UM003SP	► Standard Preservice	89.7%	100%	96.4%	
UM003EP	 Expedited Preservice 	85.4%	100%	100%	
UM003C	Concurrent	89.2%	86.4%	84.7%	
UM003R	Retrospective	100%	100%	83.3%	



Health Net 2024 Quarter 3 Final Scorecard

Report Issued: November 27, 2024

APPEALS









KPI#	KPI	Quarter 1	Quarter 2	Quarter 3	Quarter 4
APPEAL001	Acknowledgement of Appeals Timeliness	100%	100%	100%	
APPEAL002	Decision of Appeals Timeliness	100%	100%	100%	
APPEAL002S	▶ Standard	100%	100%	100%	
APPEAL002E	Expedited	No cases	100%	100%	
APPEAL003	Effectuation of Overturned Appeals Timeliness	80%	100%	100%	
APPEAL004	Member Notification Timeliness	100%	100%	100%	
APPEAL004S	▶ Standard	100%	100%	100%	
APPEAL004E	Expedited	No cases	100%	100%	

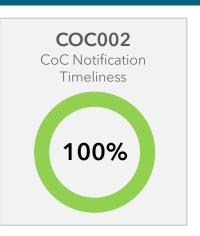


Health Net 2024 Quarter 3 Final Scorecard

Report Issued: November 27, 2024

CONTINUITY OF CARE





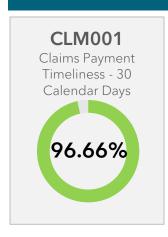
KPI#	KPI	Quarter 1	Quarter 2	Quarter 3	Quarter 4
COC001	CoC Processing Timeliness	73.08%	80%	100%	
COC001N	Non-Urgent	100%	80%	100%	
COC001I	▶ Immediate	No Cases	No Cases	No Cases	
COC001U	▶ Urgent	36.36%	No Cases	No Cases	
COC002	CoC Notification Timeliness	100%*	100%	100%	
COC002N	Non-Urgent	100%	100%	100%	
COC002I	▶ Immediate	No Cases	No Cases	No Cases	
COC002U	▶ Urgent	100%	No Cases	No Cases	



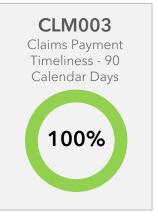
Health Net 2024 Quarter 3 Final Scorecard

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CLAIMS













KPI#	KPI	Quarter 1	Quarter 2	Quarter 3	Quarter 4
CLM001	Claims Payment Timeliness - 30 Calendar Days	99.86%	99.92%	96.66%	
CLM002	Claims Payment Timeliness - 45 Working Days	100%	100%	99.50%	
CLM003	Claims Payment Timeliness - 90 Calendar Days	100%	100%	100%	
CLM004	Acknowledgement Timeliness	99.76%	99.99%	99.99%	
CLM004E	 Acknowledgement Timeliness - Electronic 	100%	100%	100%	
CLM004P	Acknowledgement Timeliness - Paper	93.69%	99.76%	99.52%	
CLM005	Misdirected Claims Timeliness	99.9%	99.84%	99.82%	
CLM006	Timeliness of Interest Payment on Late Claims	100%	No Cases	99.85%	



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PROVIDER DISPUTE RESOLUTION







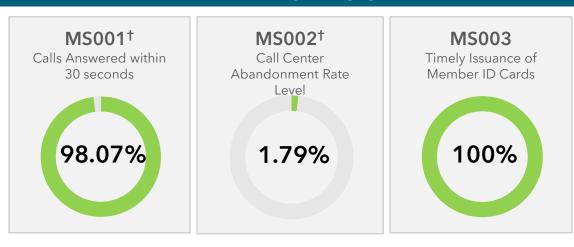
KPI#	KPI	Quarter 1	Quarter 2	Quarter 3	Quarter 4
PDR001	Acknowledgement Timeliness	99.25%	100%	99.95%	
PDR001E	 Acknowledgement Timeliness - Electronic 	No Cases	No Cases	No Cases	
PDR001P	Acknowledgement Timeliness - Paper	99.25%	100%	99.95%	
PDR002	Written Determination Timeliness	100%	99.92%	99.28%	
PDR003	Timeliness of Interest Payment on Late PDRs	100%	100%	100%	



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MEMBER SERVICES



KPI#	KPI	Quarter 1	Quarter 2	Quarter 3	Quarter 4
MS001	Calls Answered within 30 seconds	83.17% [†]	98.11% [†]	98.07%	
MS002	Call Center Abandonment Rate Level	3.42% [†]	0.78% [†]	1.79%	
MS003	Timely Issuance of Member ID Cards	81.27%	90.61%	100%	

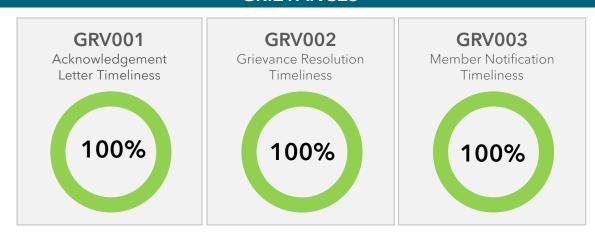
[†] Self-reported compliance rate



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GRIEVANCES



KPI#	KPI	Quarter 1	Quarter 2	Quarter 3	Quarter 4
GRV001	Acknowledgement Letter Timeliness	95.3%	97.9%	100%	
GRV002	Grievance Resolution Timeliness	100%	100%	100%	
GRV002S	Standard	100%	100%	100%	
GRV002E	Expedited	100%	100%	100%	
GRV003	Member Notification Timeliness	100%	100%	100%	
GRV003S	▶ Standard	100%	100%	100%	
GRV003E	Expedited	100%	100%	100%	



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Appendix 1 - KPI Details

This appendix provides comprehensive details for each Key Performance Indicator (KPI), including the KPI type, predefined thresholds, and the specific log used to calculate the KPI compliance rate.

Functional	KPI Type	KPI#	KPI	Threshol	ds		Log	
Area				Green Yellow		Red		
Utilization Management (UM)	Quantitative	UM001	Decision Timeliness	>96%	95-96%	<95%	UM Authorizations Log	
Utilization Management (UM)	Quantitative	UM002	Member Notification Timeliness	>96%	95-96%	<95%	UM Authorizations Log	
Utilization Management (UM)	Quantitative	UM003	Provider Notification Timeliness	>96%	95-96%	<95%	UM Authorizations Log	
Appeals	Quantitative	APPEAL01	Timely Acknowledgement of Appeals	>96%	95-96%	<95%	Appeal Log	
Appeals	Quantitative	APPEAL02	Timely Decision of Appeals	>96%	95-96%	<95%	Appeal Log	
Appeals	Quantitative	APPEAL03	Timely Effectuation of Overturned Appeals	>96%	95-96%	<95%	Appeal Log	
Appeals	Quantitative	APPEAL04	Member Notification Timeliness	>96%	95-96%	<95%	Appeal Log	
Continuity of Care	Quantitative	COC001	CoC Processing Timeliness	>96%	95-96%	<95%	CoC Log	
Continuity of Care	Quantitative	COC002	CoC Notification Timeliness	>96%	95-96%	<95%	CoC Log	
Claims	Quantitative	CLM001	Claims Payment Timeliness - 30 Calendar Days	>91%	90-91%	<90%	Claims Log	
Claims	Quantitative	CLM002	Claims Payment Timeliness - 45 Working Days	>96%	95-96%	<95%	Claims Log	
Claims	Quantitative	CLM003	Claims Payment Timeliness - 90 Calendar Days	>99%	99%	<99%	Claims Log	
Claims	Quantitative	CLM004	Claims Acknowledgement Timeliness	>96%	95-96%	<95%	Claims Log	
Claims	Quantitative	CLM005	Misdirected Claims Timeliness	>96%	95-96%	<95%	Claims Log	
Claims	Quantitative	CLM006	Timely Interest Payment on Late Claims	>96%	95-96%	<95%	Claims Log	



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Functional	KPI Type	KPI#	KPI	Threshold	ls		Log	
Area				Green Yellow		Red		
Provider Dispute Resolution (PDR)	Quantitative	PDR001	PDR Acknowledgement Timeliness	>96%	95-96%	<95%	PDR Log	
Provider Dispute Resolution (PDR)	Quantitative	PDR002	PDR Written Determination Timeliness	>96%	95-96%	<95%	PDR Log	
Provider Dispute Resolution (PDR)	Quantitative	PDR003	Timeliness of Interest Payment on Late PDRs	>96%	95-96%	<95%	PDR Log	
Member Services	Quantitative	MS001	Calls Answered within 30 seconds	>90%	80%-90%	<80%	Call Center SLA Log	
Member Services	Quantitative	MS002	Call Center Abandonment Rate Level	less than 5%	5%	>5%	Call Center SLA Log	
Member Services	Quantitative	MS003	Timely Issuance of Member ID cards	100%	NA	<100%	Member ID Cards Log	
Grievances	Quantitative	GRV001	Timely Acknowledgement Letter	>96%	95-96%	<95%	Grievance Log	
Grievances	Quantitative	GRV002	Timely Grievance Resolution	>96%	95-96%	<95%	Grievance Log Call Log	
Grievances	Quantitative	GRV003	Member Notification Timeliness	>96%	95-96%	<95%	Grievance Log	





Operations Report, Jan 2025

Member & Provider Experience

Member Calls (Per 1000)	January	February	March	April	May	June	July	August	September	October	November	December	YTD	% CHPIV
Coordination of Benefits	76	29	21	20	17	20	27	26	24	25			23	0.1%
Benefits and Eligibility for Member	48	15	11	10	-	11	15	14	13	13			20	0.0%
Update PCP	31	17	14	12	10	11	14	13	12	12			18	0.3%
Update member demographics	26	11	10	8	8	8	11	12	11	10			14	0.0%
Provider search inquiry	20	10	8	6	5	6	7	6	6	6			10	0.1%
Materials Fulfillment	15	5	3	2	2	3	3	3	3	4			5	0.2%
Update member preferences	4	3	3	4	3	3	5	5	4	5			5	0.0%
ID CARD	14	3	2	2	2	2	3	3	3	3			5	3.0%
Log view status	3	4	2	2	2	2	2	2	2	2			3	0.0%
Medical authorization Inquiry	1	1	1	1	1	1	1	1	1	2			1	0.2%

Provider Calls	January	February	March	April	May	June	July	August	September	October	November December	Total
Coordination of Benefits	1,558	843	1,068	1,049	1,391	2,457	2,563	2,782	2,306	2,654		18,671
Benefits and Eligibility for Provider	1,435	999	1,038	999	1,057	798	797	892	840	885		9,740
Medical authorization Inquiry	603	503	572	470	478	421	573	620	495	575		5,310
Provider search inquiry	15	13	17	27	8	11	10	13	5	11		130
Form based communication	18	4	3	2	4	5	3	6	3	6		54
Care management	3	1	3	3	1	3	3	7	6	6		36
Language services	2	1		1		1	3	1	. 4	3		16
Scheduled Activity		3		1				4	4	4		16
Appeals & Grievance Inquiry For Provider		3		2	2					1		8
Pharmacy claims Inquiry	1	1		1		1		2	1			7





Provider Contracting

	1	Adequate		1 1
Speciality		Network	Contracted	#Direct
	Specialty Type	(979)	Providers	Contracts
001	General Practice	Y	2	
002	Family Practice	Y	18	
003	Internal Medicine	Y	43	
004	Geriatrics	Y	0	
005	Primary Care - Physician Assistants	Y	1	
006	Primary Care - Nurse Practicioners	Y	0	
503	Primary Care	Y	64	
007	Allergy and immunology	Y	6	
008	Cardiology	Y	11	1
010	Chiropractor	N	7	
011	Dermatology	Y	46	
012	Endocrinology	Y	15	
013	ENT/Otolaryngology	Y	10	
014	Gastroenterology	Y	14	
015	General Surgery	Y	25	
016	Gynecology, OB/GYN	Y	3	
MC	Hematology	Y	44	
017	Infectious Diseases	Y	39	
018	Nephrology	Y	43	
019	Neurology	Y	39	
020	Neurosurgery	X	1	
021	Oncology - Medical, Surgical	Y	1	
022	Oncology - Radiation	Y	18	
023	Ophthalmology	Y	20	
025	Orthopedic Surgery	Y	11	
026	Physiatry, Rehabilitative Medicine	Y	1	
027	Plastic Surgery	Y	12	
028	Podiatry	Y	26	
029	Psychiatry	Y	28	18
030	Putmonology	Y	66	
031	Rheumatology	Y	34	
033	Urology	Y	77	
034	Vascular Surgery	Y	33	
035	Cardiothoracic Surgery	Y	1	
036	Clinical Psychology	Y	2	1
037	Clinical Social Work	Y	9	8
040	Acute Inpatient Hospital Beds	Y	0	2
041	Cardiac Surgery Program	X	0	0
042	Cardiac Catheterization Services	Y	0	2
	Critical Care Services / Intensive Care		ļ <u> </u>	
043	Units	Y	0	2
045	Surgical Services (Outpatient or ASC)	Y	0	2
046	Skitted Nursing Facilities	Y	0	1
047	Diagnostic Radiology	Y	32	2
048	Mammography	Y	0	2
049	Physical Therapy	Y	50	2
050	Occupational Therapy	Y	0	1
051	Speech Therapy	Y	0	2
· <u> </u>				
052	Inpatient Psychiatric Facility Services	X	0	0
057	Outpatient Infusion/Chemotherapy	Y	0	
New	Outpatient Behavioral Health	Y	0	





		Advente		
Speciality		Adequate Network	Contracted	#Direct
apricially.	Specialty Type	07/10	Providers	Contracts
MC	DME	Y	0	
MC	Freestanding Birthing Centers	Y	0	
MC	Nurse Midwives (CM/LM)	N	0	
MC	Doulas	X	0	
MC	Indian Health Care Programs	Y	0	
MC	Transportation	Y	0	1
	Intermediate Care Facility /			
MC	Developmentally Disabled	N	0	
MC	Housing Transition Navigation Services	N	0	
MC	Housing Deposits	N	0	
MC	Housing Tenancy and Sustaining Services	N	0	
			i	i
MC	Short-term Post-Hospitalization Housing	N	0	
MC	Recuperative Care (Medical Respite)	N	0	
MC	Respite Services (Caregiver)	N	0	
MC	Day Habilitation Programs	N	0	
	Nursing Facility Transition / Diversion to			
	Assisted Living Facilities, such as		İ	ĺ
	Residential Care Facilities for Elderly &		i	i
	Adult (RCFE) and Adult Residential			
MC	Facilities (ARF)	N	0	
	Community Transition Services / Nursing			
MC	Facility Transition to a Home	N	0	
	Personal Care (beyond in Home Services			
MC	and Supports) and Homemaker Services	N	0	
	Environmental Accessibility Adaptations			
MC	(Home Modifications)	N	0	
MC	Meals / Medically Tailored Meals	N	0	
MC	Sobering Centers	X	0	
MC	Asthma Remediation	N	0	
MC	Audiology	N	0	
MC	Optometry	N	1	
MC	Hearing aids	N	0	<u> </u>
MC	Hospice (room and Board)	N	0	
MC	Ambulance - air	N	0	
MC	Orthotics	N	0	
MC	Acupunture	N	0	



December 2024 Recap:

- 1. Community Advisory Committee:
 - a. Cultural Appropriateness of Messaging:

Overview of how CHPIV develops materials that are culturally appropriate and easy to understand. These are the materials you see on the website, get in the mail, Flyers you may see.



b. Member Experience Survey/Consumer Assessment of Healthcare Providers and Systems (CAHPS)

Shared Health Net's results from the CAHPS survey – CAHPS is a survey that all managed care plans utilize to learn more about the Member's experience in accessing their health care.

c. Health Equity Workplan and Social Needs

Reviewed the Health Equity department's 2024 workplan and polled committee on their social needs. – a dept. at CHPIV that focuses on various Health Equity projects for the plan, does LAP.

d. Access and Availability

Shared access standards and county-level results with committee – how long to get appt., transportation etc.

e. Health Education Material Field Testing: Fluvention Email

Reviewed a flu prevention email campaign targeting Members and collected committee feedback. Field testing will continue. Value input will be used to ensure message is clear.

f. Population Health Campaigns

Provided an overview of CHPIV's campaigns that will promote better health outcomes.

PH Campaigns: Feedback was directly provided to departments who developed campaigns to enhance outreach efforts.

g. DEI training

- shared 4 different trainings CHPIV will implement for providers and plan staff.
- Staff collected feedback during the meeting and implement as the Plan is developing training program.
- -The Plan reviewed the outreach and education plan requirements and requested feedback from the committee.
- Insights on barriers and challenges in accessing benefit are being used to inform strategies.

h. Population Needs Assesment

The Plan shared information on the new Population Needs Assessment, which is a collaboration with other plans and local health department to identify the priority needs of the community. The feedback taken to Local Health Department directly. Next year, we will report back on more specific details on how to work towards/approach goal.

- 2025 Q1 Meeting: Next CAC meeting: March 18, 2025 / 12pm 2:00pm
- "Christmas in a Small-Town" Imperial Event was successful. See photos below:







Follow us on social media to keep up with your local health plan:

@CommunityHealthPlan