



AGENDA

Local Health Authority Commission

August 11, 2025

5:30 PM

512 W. Aten Rd., Imperial, CA 92251

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

Microsoft Teams

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Meeting ID: 217 028 464 542

Passcode: 7KD7N4Yy

Committee Members	Representing	Present
Dr. Majid Mani	LHA Commissioner- Imperial County Medical Society	
Dr. Bushra Ahmad	LHA Commissioner- County of Imperial – CMO	
Dr. Carlos Ramirez	LHA Commissioner - CEO/Senior Consultant DCRC	
Dr. Unnati Sampat	LHA Commissioner - President of Imperial County Medical Society	
Dr. Allan Wu	LHA Commissioner - Inncare, CMO and President of CCIPA	
Dr. Kathleen Lang	LHA Commissioner - County of Imperial –CEO	
Christopher Bjornberg	LHA Commissioner- Imperial Valley Healthcare District-CEO	
Paula Llanas	LHA Commissioner - County of Imperial – Director of Social Services	
Ryan E. Kelley	LHA Commissioner - County of Imperial – Board of Supervisors	
Pablo Velez	LHA Commissioner - ECRMC CEO	
Yvonne Bell	LHA Vice-Chair - CEO – Inncare and CCIPA	
Lee Hindman	LHA Chair-Joint Chambers of Commerce representing the public	

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 7/14/2025..... *pg. 4-8*
- B. Motion to accept the monthly financial reports as reviewed and accepted by the Finance Committee
 - 1. Executive Summary.....*pg. 9-10*
 - 2. Enrollment Report *pg. 11*
 - 3. Statement of Revenues, Expenses, and Changes in Net Position..... *pg. 12*
 - 4. Statement of Net Position (Assets) *pg. 13*
 - 5. Statement of Net Position (Liabilities & Net Position) *pg. 14*
 - 6. Summarized TNE Calculation *pg. 15*
 - 7. Cash Transaction Report *pg. 16*
 - 8. Product P&L..... *pg. 17*
- C. Motion to accept the 2025 6+6 Forecast Update as reviewed and accepted by the Finance Committee..... *pg. 18-19*

4. ACTION

- A. Motion to approve the establishment of a Plan Committee for oversight and administration of the CHPIV 401(a) and 457(b) Plans..... *pg. 20*
- B. Motion to approve a \$5,000 Sponsorship of the Annual Imperial County Medical Society President's Dinner as presented.... *pg. 21-22*

5. COMMITTEE CHAIR REPORTS

- A. Quality Improvement Health & Equity Committee-*Quarterly*
(Dr. Gordon Arakawa, CMO) *pg. 23-71*
- B. Finance Committee-*Monthly*
(Dr. Carlos Ramirez, Chair)



C. Regulatory Compliance & Oversight Committee-*Quarterly*
(Dr. Allan Wu, Chair)pg. *no meeting*

D. Community Advisory Selection Committee-*Biannual*
(Dr. Carlos Ramirez, Chair) pg. *no meeting*

6. INFORMATION

A. Health Services Report (Dr. Gordon Arakawa, CMO and Jeanette Crenshaw, Executive Director of Health Services)pg. 72-76

B. Compliance Report (Elysse Tarabola, CCO)

C. Operations Report (Julia Hutchins, COO) pg. 77-81

D. Human Resources Report (Shannon Long, HR Consultant) pg. 82-125

E. CEO Report (Larry Lewis, CEO)

F. Introduction of Newly Appointed LHA Commissioner, Dr. Majid Mani, and Re-Appointed LHA Commissioner, Dr. Unnati Sampat (Larry Lewis, CEO)

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

7. 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. Compliance Report (Elysse Tarabola, CCO)

8. RECONVENE OPEN SESSION

A. Report on actions taken in closed session.

9. ADJOURNMENT

Next meeting: September 8, 2025



MINUTES

Local Health Authority Commission

July 14, 2025

5:30 PM

512 W. Aten Rd., Imperial, CA 92251

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

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Committee Members	Representing	Present
Dr. Theodore Affue	LHA Commissioner- Imperial County Medical Society	A
Dr. Bushra Ahmad	LHA Commissioner- County of Imperial – CMO	✓
Dr. Carlos Ramirez	LHA Commissioner - CEO/Senior Consultant DCRC	A
Dr. Unnati Sampat	LHA Commissioner - President of Imperial County Medical Society	✓
Dr. Allan Wu	LHA Commissioner - Innercare, CMO and President of CCIPA	R
Kathleen Lang	LHA Commissioner - County of Imperial –CEO	✓
Christopher Bjornberg	LHA Commissioner- Imperial Valley Healthcare District-CEO	✓
Paula Llanas	LHA Commissioner - County of Imperial – Director of Social Services	✓
Ryan E. Kelley	LHA Commissioner - County of Imperial – Board of Supervisors	A
Pablo Velez	LHA Commissioner - ECRMC CEO	✓
Yvonne Bell	LHA Vice-Chair - CEO – Innercare and CCIPA	✓
Lee Hindman	LHA Chair-Joint Chambers of Commerce representing the public	✓

1. CALL TO ORDER

Lee Hindman, Chair

Meeting called to order at 5:30 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

(Bell/Sampat) Approved the order of the agenda. Motion carried.



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.
No public comment.

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.

(Sampat/Velez) To approve the order of the agenda. Motion carried.

A. Approval of Minutes from 6/9/2025..... pg. 4-7

B. Motion to recommend to the full commission the acceptance of monthly financial reports as reviewed and accepted by the Finance Committee

1. Executive Summary.....pg. 8-9
2. Enrollment Report pg. 10
3. Statement of Revenues, Expenses, and Changes in Net Position..... pg. 11
4. Statement of Net Position (Assets) pg. 12
5. Statement of Net Position (Liabilities & Net Position) pg. 13
6. Summarized TNE Calculation pg. 14
7. Cash Transaction Report pg. 15

4. ACTION

A. Motion to appoint Lauren Wren, Counselor and School Nurse for the Imperial County Department of Education, to the Community Advisory Committee (CAC) Selection Committee.....pg. 16

(Julia Hutchins, COO)

(Sampat/Bell) To approve Lauren Wren, Counselor and School Nurse for the Imperial County Department of Education to the Community Advisory Committee (CAC) Selection Committee. Motion carried.



- B. Motion to approve updates to the Community Advisory Committee (CAC) Selection Committee Charter.....pg. 17-19
(Julia Hutchins, COO)
(Velez/Sampat) To approve updates to the Community Advisory Committee (CAC) Selection Committee Chair. Motion carried.

5. COMMITTEE CHAIR REPORTS

- A. Quality Improvement Health & Equity Committee-Quarterly
(Dr. Gordon Arakawa, CMO) *no meeting*
- B. Finance Committee-Monthly
(Dr. Carlos Ramirez, Chair)
Chair Hindman provided a report on July 8th, 2025, Finance Committee meeting, on behalf of Finance Committee Chair, Dr. Carlos Ramirez.
- C. Regulatory Compliance & Oversight Committee-Quarterly
(Dr. Allan Wu, Chair)pg. 20-22 **No report.**
- D. Community Advisory Selection Committee-Biannual
(Dr. Carlos Ramirez, Chair) pg. 23 **No report.**

6. INFORMATION

- A. Health Services Report (Dr. Gordon Arakawa, CMO and Jeanette Crenshaw, Executive Director of Health Services)pg. 24-43
Chief Medical Officer, Dr. Gordon Arakawa presented a review of Community Supports. Executive Director of Health Services Jeanette Crenshaw provided updates on Delegation Oversight NCQA Focused Audit Report
- B. Compliance Report (Elysse Tarabola, CCO)
Chief Compliance Officer Elysse Tarabola provided an update on the June 30th Regulatory Compliance & Oversight Committee meeting on behalf of Dr. Wu which included:
- 6 Policy Approvals
 - Delegation Oversight reorganization
 - Regulatory Audit Updates
 - DMHC Survey
 - Pre-Delegation Audits
 - Annual Audit of Health Net



- C. Operations Report (*Julia Hutchins, COO*) pg. 44-47
Chief Operation Officer Julia Hutchins provided updates on the progress of Community Advantage Plus, Community Advisory Committee meeting, and new hires for the Sales & Marketing Department.
- D. Human Resources Report (*Shannon Long, HR Consultant*) pg. 48-96
Human Resource Consultant Shannon Long provided updates on new hires, current job openings, and proposed employee handbook changes.
- E. CEO Report (*Larry Lewis, CEO*)
Chief Executive Officer Larry Lewis shared information on a draft policy for community reinvestments and HR1 Bill updates according to All-CEO meeting he attended last week. He explained cuts to programs and reduced funding on Medi Cal, CalFresh, and PCA marketplace eligibility criteria to name a few.
- F. Schedule Planning (*Larry Lewis, CEO*) pg. 97
CEO Larry Lewis informed the commission of scheduling conflicts between upcoming Finance and Executive Committee meetings and the DHCS All-CEO meetings. Due to these conflicts, the meetings will need to be rescheduled for the following months:
- October 2025
 - February 2026
 - April 2026
 - July 2026
 - October 2026
- New meeting dates are to be determined.
- G. Other new or old business (*Lee Hindman, Chair*)
None.

7. 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. Benefits Discussion (*Larry Lewis, CEO*)
Chair Hindman announced that the committee will enter closed session.



8. RECONVENE OPEN SESSION

A. Report on actions taken in closed session.

Chair Hindman announced that the committee has reconvened to open session and reports that direction has been given to staff.

9. ADJOURNMENT

Meeting was adjourned at 7:00 p.m.

Next meeting: August 11, 2025



Financial Result

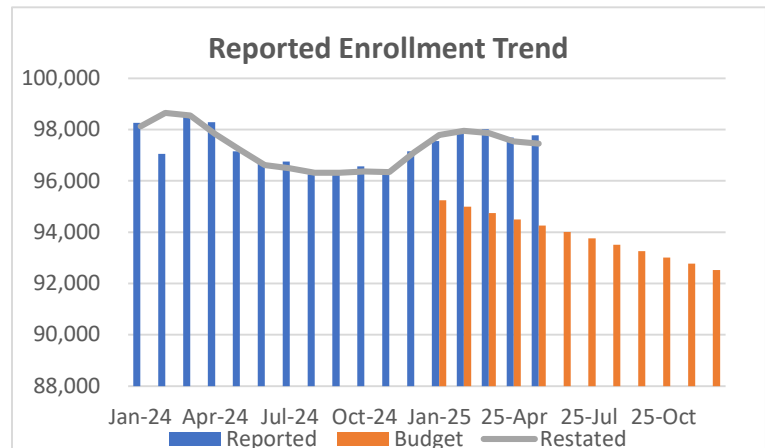
June 2025

Executive Summary

Membership

June Medi-Cal membership continues to build on both a reported and restated basis. Reported membership increased by 540 members since May, a 0.6% increase and a 5% increase relative to the budget. Category of aid distribution is relatively stable, with similar growth patterns to prior months (child, adult, and adult expansion leading the growth).

Preliminary data suggests that July enrollment is holding at current levels.



Year-to-date membership is favorable to the budget by 19K member months.

Gross Margin

Revenue exceeded forecasts by \$5.3M for the month, mainly due to retroactive rate adjustments of \$2.4M.

Rate Adjustment: The Category of Aid most impacted by rate adjustments (relative to the budget) is SPD Dual, which drove \$1.9M of the \$2.4M favorable variance.

Volume: Volume adjustments accounted for \$1.1M in favorable revenue, driven by Child and SPD Dual.

Prior Period: Prior period activity was favorable by \$1.8M, mostly related to favorable membership true-ups in 2025.

Category of Aid (COA)*	Revenue (Current Month Reported)				
	Actual	Forecast	Variance	Vol	Rate
Child	\$ 4,680,439	\$ 4,194,009	\$ 486,430	\$ 247,562	\$ 238,868
Adult	\$ 5,307,540	\$ 4,008,421	\$ 1,299,119	\$ 217,831	\$ 1,081,288
Adult Expansion	\$ 7,577,526	\$ 6,524,182	\$ 1,053,345	\$ 217,576	\$ 835,768
SPD	\$ 4,401,870	\$ 4,145,979	\$ 255,891	\$ (208,246)	\$ 464,136
SPD Dual	\$ 6,350,901	\$ 4,164,151	\$ 2,186,750	\$ 264,416	\$ 1,922,334
LTC	\$ (10,246)	\$ 26,289	\$ (36,535)	\$ (21,360)	\$ (15,175)
LTC Dual	\$ 38,442	\$ 28,694	\$ 9,748	\$ (1,877)	\$ 11,625
Total Medicaid	\$ 28,346,472	\$ 23,091,724	\$ 5,254,748	\$ 1,058,724	\$ 4,196,024

Overall, Gross margin was favorable by \$0.2M for the month of June, and \$0.8M YTD.



Administrative Expenses

Administrative expenses were unfavorable by (\$65K) for the month of June. The main drivers were timing of consulting services within the quarter, timing of property taxes, and IT costs for newly hired employees. On a YTD basis, Administrative costs are favorable by \$281K driven by the consulting & professional services, and labor costs. IT is running unfavorable due to the ramp-up of computer equipment for staff starting in Q3 and Q4.

Other

Investment income was favorable by \$8K in June and \$104K YTD. With an average daily balance of \$30M in the brokerage account, the estimated annual rate of return is 3.8%.

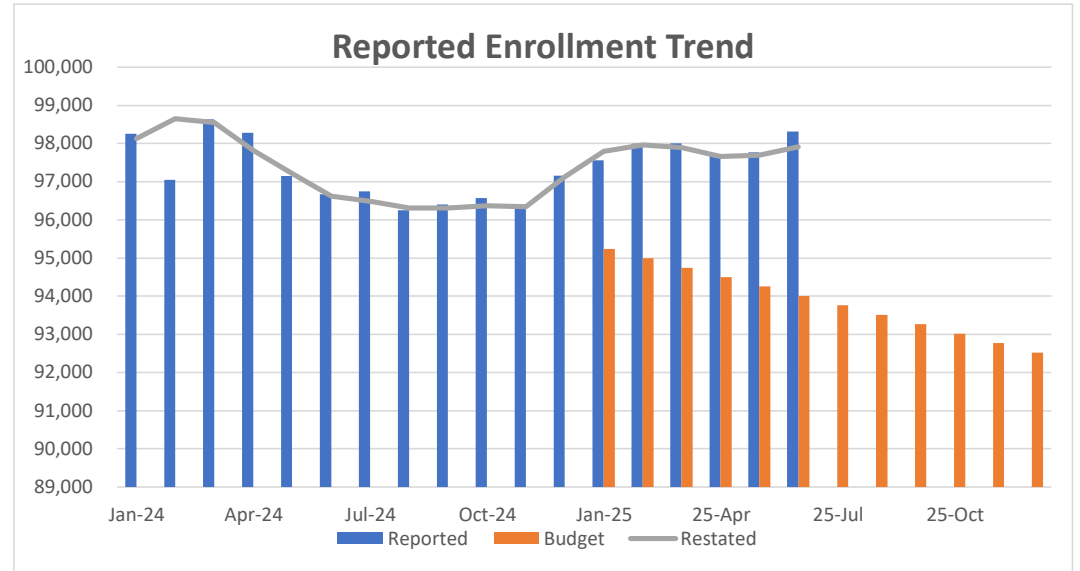
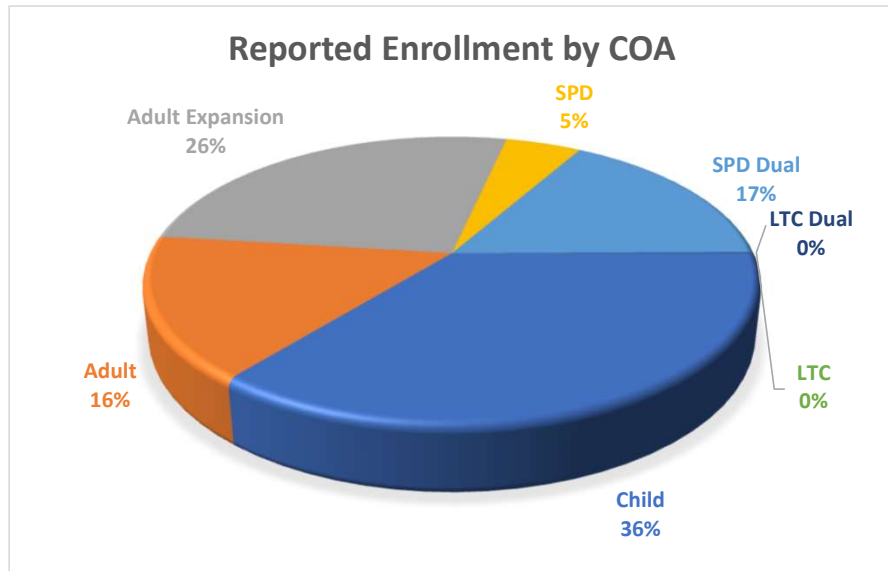
Tangible Net Equity (TNE)

For the month of June, TNE was \$22M, which is 466% of the required \$4.8M. On a restated basis, TNE stands at 478% of the required levels.

**Imperial County Local Health Authority
DBA Community Health Plan of Imperial Valley
Reported Enrollment
For June 2025**

Category of Aid (COA)*	2024				2025							
	Q1-24	Q2-24	Q3-24	Q4-24	June				June (YTD)			
					Actual	Budget	B/(W)		Actual	Budget	B/(W)	
							#	%			#	%
Child	34,607	34,589	34,424	34,551	35,129	33,171	1,958	6%	210,639	201,246	9,393	5%
Adult	16,997	15,767	15,675	15,768	15,754	14,942	812	5%	94,569	90,830	3,740	4%
Adult Expansion	26,579	25,784	25,733	26,019	26,028	25,188	840	3%	155,625	152,021	3,605	2%
SPD	5,007	5,041	5,085	5,139	4,784	5,037	(253)	-5%	28,111	30,365	(2,254)	-7%
SPD Dual	14,433	14,760	15,007	15,288	16,514	15,528	986	6%	97,695	92,493	5,202	6%
LTC	12	15	19	22	6	32	(26)	-81%	110	170	(60)	-35%
LTC Dual	79	87	92	104	100	107	(7)	-7%	585	620	(35)	-6%
Total Medicaid	97,714	96,043	96,035	96,891	98,315	94,005	4,310	5%	587,334	567,743	19,592	3%
<i>Monthly/Quarterly Change</i>		-1.7%	0.0%	0.9%	1.5%	-3.0%						

* 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 June 2025**

	June			June (YTD)			Current Month Explanations
	Actual	Budget	Variance - B/(W)	Actual	Budget	Variance - B/(W)	
REVENUE							
Premium	\$ 28,015,243	\$ 22,748,075	\$ 5,267,168	\$ 164,556,253	\$ 137,149,425	\$ 27,406,828	- Revenue was favorable by \$5.3M largely due to the Rate/Mix of the population relative to the Budget. Prior period revenue was favorable by \$1.8M; volume was favorable by \$1.1M.
Pass-Through	\$ 331,229	\$ 343,649	\$ (12,420)	\$ 2,835,201	\$ 2,072,224	\$ 762,978	
HN Settlements			\$ -			\$ -	
TOTAL REVENUE	\$ 28,346,472	\$ 23,091,724	\$ 5,254,748	\$ 167,391,454	\$ 139,221,649	\$ 28,169,805	
HEALTH CARE COSTS	\$ 27,506,015	\$ 22,409,282	\$ (5,096,733)	\$ 162,454,767	\$ 135,107,166	\$ (27,347,601)	
Gross Margin	\$ 840,457	\$ 682,442	\$ 158,015	\$ 4,936,688	\$ 4,114,483	\$ 822,205	
ADMINISTRATIVE EXPENSE							
Salaries & Wages	\$ 337,828	\$ 347,210	\$ 9,381	\$ 2,000,270	\$ 2,120,555	\$ 120,285	- Salaries were favorable due to hiring delays in Compliance and IT
Benefits Expense	\$ 26,015	\$ 28,495	\$ 2,480	\$ 149,041	\$ 154,896	\$ 5,855	
Other Labor Expense	\$ 1,424	\$ 1,272	\$ (152)	\$ 8,744	\$ 7,634	\$ (1,110)	
Total Labor Costs	\$ 365,267	\$ 376,977	\$ 11,710	\$ 2,158,056	\$ 2,283,085	\$ 125,030	
Consulting, Legal, & Other Professional	\$ 112,706	\$ 89,112	\$ (23,594)	\$ 455,204	\$ 616,947	\$ 161,742	- Unfavorable due to timing and lower-than-expected costs of actuarial services related to the Medicare bid.
Outside Services	\$ 31,563	\$ 22,770	\$ (8,793)	\$ 217,340	\$ 212,288	\$ (5,053)	
Advertising & Marketing	\$ 1,137	\$ 11,200	\$ 10,063	\$ 6,079	\$ 29,025	\$ 22,946	- Unfavorable due to acquisition of computers for new hires
Information Technology	\$ 25,033	\$ 4,921	\$ (20,112)	\$ 65,147	\$ 27,128	\$ (38,019)	
Membership and Subscriptions	\$ 10,949	\$ 9,180	\$ (1,769)	\$ 58,991	\$ 55,580	\$ (3,411)	- "True-down" to actual invoice
Regulatory Fees	\$ 21,389	\$ 27,597	\$ 6,208	\$ 156,578	\$ 168,045	\$ 11,466	
Travel	\$ 8,492	\$ 8,208	\$ (284)	\$ 40,014	\$ 54,375	\$ 14,361	
Meals & Entertainment	\$ 4,259	\$ 800	\$ (3,459)	\$ 13,131	\$ 3,600	\$ (9,531)	
Occupancy & Facility	\$ 4,720	\$ 4,717	\$ (3)	\$ 26,222	\$ 28,303	\$ 2,081	
Office Expense	\$ 7,021	\$ 7,060	\$ 39	\$ 26,238	\$ 38,959	\$ 12,721	
Other Admin	\$ 46,306	\$ 11,059	\$ (35,247)	\$ 83,230	\$ 70,381	\$ (12,849)	
Total Administrative Expense	\$ 638,842	\$ 573,602	\$ (65,241)	\$ 3,306,230	\$ 3,587,715	\$ 281,485	
Non-Operating Income							
Dividend, Interest & Investment Income	\$ 95,777	\$ 87,391	\$ 8,386	\$ 628,535	\$ 524,347	\$ 104,187	- Favorable investment income due a combination of higher portfolio balance and rate of return on investments.
Rental Income	\$ 1,494	\$ 1,450	\$ (44)	\$ 8,961	\$ 8,700	\$ (261)	
Total Non-Operating Income	\$ 97,271	\$ 88,841	\$ 8,430	\$ 637,496	\$ 533,047	\$ 104,448	
Depreciation & Amortization	\$ 10,656	\$ 11,000	\$ (344)	\$ 63,933	\$ 66,000	\$ (2,067)	
Change in Net Position	\$ 288,230	\$ 186,682	\$ 101,549	\$ 2,204,020	\$ 993,815	\$ 1,210,205	
Key Metrics							
Enrollment	98,315	94,005	4,310	587,334	567,744	19,590	
Revenue PMPM	\$288.32	\$245.64	\$42.68	\$285.00	\$245.22	\$39.78	
MLR	97.04%	97.0%	1 bps	97.1%	97.0%	(1) bps	
Admin Ratio	2.2%	2.5%	23 bps	2.0%	2.6%	60 bps	
FTEs	28	28	-	138	149	11	
Net Income PMPM	\$2.93	\$1.99	\$0.95	\$3.75	\$1.75	\$2.00	
Net Income %	1.0%	0.8%	21 bps	1.3%	0.7%	60 bps	

**Imperial County Local Health Authority dba
Community Health Plan of Imperial Valley
Statement of Net Position
As of June 30, 2025**

ASSETS

Current Assets	May 2025	Jun 2025	Change
Cash and Investments			
Chase - Checking	\$ 200,000	\$ 200,000	\$ -
Chase - Money Market	2,500,487	2,638,576	138,089
JPMorgan Securities	15,474,929	15,831,028	356,099
First Foundation Bank	150,838	79,340	(71,498)
Receivables			
Accounts Receivable	-	6,654	6,654
Dividend Receivable	11,837	9,224	(2,613)
Interest Receivable	96,450	86,553	(9,897)
Capitation Receivable	26,241,713	28,015,243	1,773,530
Pass-Through Receivable	284,228	331,229	47,001
Pass-Through Receivable - Other	1,640	1,990	350
Other Current Assets			
Prepaid Expenses	290,129	290,789	660
Total Current Assets	45,252,251	47,490,626	2,238,375
Noncurrent Assets			
Restricted Deposit			
First Foundation Bank - Restricted	300,000	300,000	-
Capital Assets			
Buildings - Net	2,914,767	2,906,219	(8,548)
Computer Equipment / Software - Net	69,601	68,182	(1,418)
Improvements - Net	43,954	43,546	(408)
Operating ROU Asset (Copier) - Net	5,067	4,786	(282)
Total Noncurrent Assets	3,333,389	3,322,733	(10,656)
Total Assets	\$ 48,585,640	\$ 50,813,359	\$ 2,227,719

**Imperial County Local Health Authority dba
Community Health Plan of Imperial Valley
Statement of Net Position
As of June 30, 2025**

LIABILITIES

CURRENT LIABILITIES	May 2025	Jun 2025	Change
Payables			
Accounts Payable	\$ 418,327	\$ 514,669	\$ 96,342
Capitation Payable	25,454,462	27,174,786	1,720,324
Pass-Through Payable	284,228	331,229	47,001
Pass-Through Payable - Other	1,640	1,990	350
Credit Card Payable	215	37,031	36,816
Other Current Liabilities			
Short Term Lease Liability - Copier	3,469	3,488	19
Bonus Accrual	137,383	152,012	14,629
Salaries Accrual	102,243	121,359	19,116
Vacation Accrual	159,733	164,924	5,191
Total Current Liabilities	26,561,701	28,501,488	1,939,787
NON-CURRENT LIABILITIES			
Long Term Lease Liability - Copier	1,807	1,508	(299)
Total Noncurrent Liabilities	1,807	1,508	(299)
Total Liabilities	26,563,508	28,502,996	1,939,488

NET POSITION

Net investment in Capital Assets	3,033,389	3,022,733	(10,656)
Restricted by Legislative Authority	300,000	300,000	-
Unrestricted	16,772,954	16,783,610	10,656
Net Revenue	1,915,790	2,204,020	288,230
Total Net Position	22,022,133	22,310,363	288,230
Total Liabilities and Net Position	\$ 48,585,640	\$ 50,813,359	\$ 2,227,719

**Imperial County Local Health Authority dba
Community Health Plan of Imperial Valley
Summarized Tangible Net Equity Calculation
As of June 2025**

Net Equity	\$ 22,310,362
Add: Subordinated Debt and Accrued Subordinated Interest	\$ 0
Less: Report 1, Column B, Line 27 including: Unsecured Receivables from officers, directors, and affiliates; Intangibles	\$ 0
Tangible Net Equity (TNE)	\$ 22,310,362
Required Tangible Net Equity *	\$ 4,791,125
TNE Excess (Deficiency)	\$ 17,519,236

Full Service Plan		
		1
A. Minimum TNE Requirement	\$	1,000,000
B. REVENUES:		
2% of the first \$150 million of annualized premium revenues (lines 1, 2, 4, 5, 7, 9 from Income Statement)	\$	3,000,000
Plus		
1% of annualized premium revenues in excess of \$150 million	\$	1,791,125
Total	\$	4,791,125

* Calculated Required Tangible Net Equity		
\$ 329,112,506	- Q1	
\$ 329,112,506	- Annualized	
\$ 150,000,000		
x 2%		
\$ 3,000,000		
\$ 179,112,506		
x 1%		
\$ 1,791,125		
\$ 4,791,125	- Required TNE	

Community Health Plan of Imperial Valley
June 2025 Cash Transactions

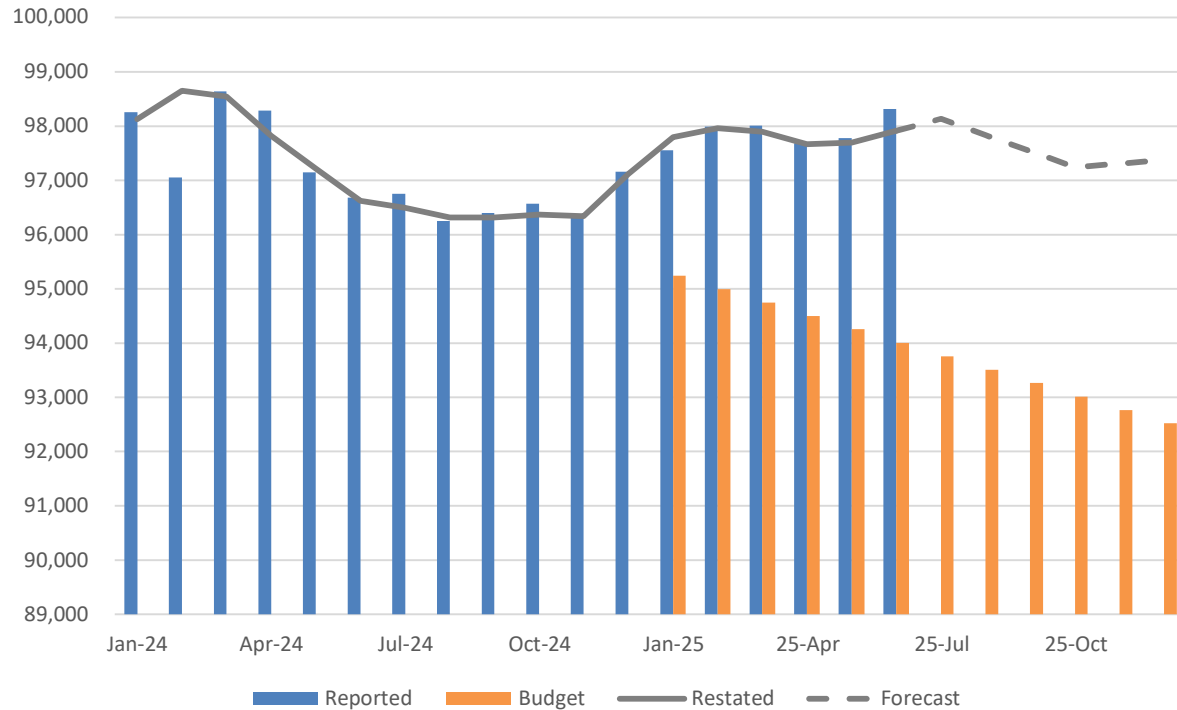
Date	Account	Vendor	Memo/Description	Amount
Chase Checking				
6/2/2025	Chase Checking	Health Management Associates, Inc.	Inv 206100-000023-- bill.com Check Number: 79528258	\$ (11,448.75)
6/2/2025	Chase Checking	Allan Wu	Multiple invoices (details on stub)-- bill.com Check Number: 79527927	(200.00)
6/2/2025	Chase Checking	Carlos Ramirez	Inv May2025-- bill.com Check Number: 79527256	(200.00)
6/2/2025	Chase Checking	360 Business Products	Inv OE-QT-34294-1-- bill.com Check Number: 79529136	(1,614.00)
6/2/2025	Chase Checking	45th District Agricultural Association	Inv 00408-- bill.com Check Number: 79526969	(1,000.00)
6/2/2025	Chase Checking	Jeffrey Scott Agency	Inv Project22201-- bill.com Check Number: 79526762	(570.00)
6/2/2025	Chase Checking	Ryan Kelley	Inv Jan2025-- bill.com Check Number: 79528229	(100.00)
6/2/2025	Chase Checking	Pablo Velez	Inv Jan2025-- bill.com Check Number: 79526866	(100.00)
6/2/2025	Chase Checking	KY Cakes	Inv 0012-- bill.com Check Number: 79526944	(50.00)
6/2/2025	Chase Checking	I.V. Termite & Pest Control	Inv 0350880-- bill.com Check Number: 79528588	(120.00)
6/2/2025	Chase Checking	AM Copiers Inc.	Inv IN7363-- bill.com Check Number: 79527288	(464.94)
6/2/2025	Chase Checking	Manifest MedEx	Inv INV-3114-- bill.com Check Number: 79529220	(24,502.25)
6/2/2025	Chase Checking	Lee Hindman	Commission Meeting	(200.00)
6/3/2025	Chase Checking	Great America Financial Services	Multiple invoices (details on stub)-- bill.com Check Number: 79535509	(612.02)
6/4/2025	Chase Checking	Sparkling Clean	Inv May2025-- bill.com Check Number: 79540509	(900.00)
6/7/2025	Chase Checking	JPMorgan Chase	Dividend Income - May 2025	11,836.74
6/7/2025	Chase Checking	JPMorgan Chase	Service Charges Investment Sweep - June 2025	(780.65)
6/7/2025	Chase Checking	Law Office of William S. Smerdon	Void Check - Law Office of William S. Smerdon	464.91
6/7/2025	Chase Checking	Law Office of William S. Smerdon	Void Check - Law Office of William S. Smerdon	(464.91)
6/7/2025	Chase Checking	Mid Atlantic Trust Company	Mid Atlantic	(13,957.24)
6/7/2025	Chase Checking	Moss Adams	Void Check - Moss Adams	10,500.00
6/7/2025	Chase Checking	Moss Adams	Void Check - Moss Adams Duplicate	(10,500.00)
6/7/2025	Chase Checking	JPMorgan Chase	Credit Card Payment	(2,211.73)
6/7/2025	Chase Checking	Lee Hindman	Commission Meeting	(200.00)
6/12/2025	Chase Checking	iAccess, Inc.	Inv WA2782505-- bill.com Check Number: 79585052	(817.23)
6/12/2025	Chase Checking	Health Management Associates, Inc.	Void Of Bill Payment #P25060201 - 5561813	11,448.75
6/13/2025	Chase Checking	Health Management Associates, Inc.	Inv 206100-000023-- bill.com Check Number: 79593035	(11,448.75)
6/13/2025	Chase Checking	Zamosky Communication	Inv 0000038-- bill.com Check Number: 79593141	(8,000.00)
6/13/2025	Chase Checking	Law Office of William S. Smerdon	Inv 2768-- bill.com Check Number: 79592843	(2,227.50)
6/13/2025	Chase Checking	Shannon Long	Inv 14-- bill.com Check Number: 79592130	(6,000.00)
6/13/2025	Chase Checking	Health Management Associates, Inc.	Inv 210806 - 0000009-- bill.com Check Number: 79592717	(576.25)
6/13/2025	Chase Checking	America's Finest Fire Pro	Inv 26M 927253-- bill.com Check Number: 79594375	(860.30)
6/13/2025	Chase Checking	Rick's Roadrunner Lock & Safe	Inv 22790-- bill.com Check Number: 79595942	(155.00)
6/13/2025	Chase Checking	Imperial Desert Landscape	Inv 25-190-- bill.com Check Number: 79592438	(250.00)
6/13/2025	Chase Checking	Rick's Roadrunner Lock & Safe	Inv 22083-- bill.com Check Number: 79594309	(80.00)
6/13/2025	Chase Checking	City of Imperial	Acct 80683 - Inv 1440994-- bill.com Check Number: 79592813	(141.61)
6/14/2025	Chase Checking	Department of Health Care Services	Receipt - DHCS (May 2025 Revenue)	25,592,792.62
6/14/2025	Chase Checking	Department of Health Care Services	Receipt - DHCS (May 2025 Revenue)	862,039.19
6/14/2025	Chase Checking	Department of Health Care Services	Receipt - DHCS (May 2025 Revenue)	58,781.49
6/14/2025	Chase Checking	Department of Health Care Services	Receipt - DHCS (May 2025 Revenue)	10,738.85
6/14/2025	Chase Checking	Department of Health Care Services	Receipt - DHCS (May 2025 Revenue)	1,640.41
6/14/2025	Chase Checking	Department of Health Care Services	Receipt - DHCS (May 2025 Revenue)	1,589.41
6/14/2025	Chase Checking	AT&T	Reimbursement for AT&T Bill	72.40
6/17/2025	Chase Checking	Sparkling Clean	Void Of Bill Payment #P25060401 - 6081646	900.00
6/18/2025	Chase Checking	Epstein Becker & Green, P.C.	Inv 1199783-- bill.com Check Number: 79615566	(1,144.00)
6/18/2025	Chase Checking	Epstein Becker & Green, P.C.	Inv 1199782-- bill.com Check Number: 79616353	(883.00)
6/18/2025	Chase Checking	Sparkling Clean	Inv May2025	(900.00)
6/20/2025	Chase Checking	AM Copiers Inc.	Inv IN7621-- bill.com Check Number: 79627429	(96.14)
6/20/2025	Chase Checking	Brawley Rotary Club	Inv May2025-- bill.com Check Number: 79624475	(250.00)
6/20/2025	Chase Checking	Kaz-Bros Design Shop	Inv 12503-- bill.com Check Number: 79624285	(54.36)
6/20/2025	Chase Checking	Jeffrey Scott Agency	Inv Project 22638-- bill.com Check Number: 79623068	(1,455.00)
6/20/2025	Chase Checking	City of Imperial	Acct 80683 - Inv 00080683-- bill.com Check Number: 79624970	(141.61)
6/20/2025	Chase Checking	Sparkling Clean	Inv June2025	(900.00)
6/21/2025	Chase Checking	Mid Atlantic Trust Company	Mid Atlantic	(8,719.50)
6/21/2025	Chase Checking	State Compensation Insurance Fund	Workers Compensation Payment	(1,424.41)
6/23/2025	Chase Checking	Quench USA	Inv INV09022864-- bill.com Check Number: 79633386	(129.30)
6/23/2025	Chase Checking	Republic Services	Inv 0467-001747688	(146.82)
6/23/2025	Chase Checking	Health Management Associates, Inc.	Inv 206100 - 000024R	(11,165.00)
6/23/2025	Chase Checking	Health Management Associates, Inc.	Inv 213079 - 0000001	(35,521.25)
6/23/2025	Chase Checking	Health Management Associates, Inc.	Inv 210806-0000010	(363.75)
6/24/2025	Chase Checking	Bonde & Associates, LLC	Inv 1001	(13,021.82)
6/24/2025	Chase Checking	America's Finest Fire Pro	Void Of Bill Payment #P25061301 - 8105290	860.30
6/30/2025	Chase Checking	Health Net	Rental Income - June 2025	1,493.50
First Foundation Bank				
6/13/2025	FFB Payroll	Rippling	[Rippling] Employee net pay for check date 06/13/2025	(89,561.86)
6/13/2025	FFB Payroll	Rippling	[Rippling] Payroll taxes paid via Rippling for check date 06/13/2025	(50,739.64)
6/15/2025	FFB Payroll	First Foundation Bank	Wire Fee	(10.00)
6/15/2025	FFB Payroll	Rippling	People Center Bill	(119.01)
6/15/2025	FFB Payroll	UNUM	UNUM Invoice 06/01/25 - 06/30/25	(604.08)
6/15/2025	FFB Payroll	Blue Shield Insurance	Blue Shield Insurance	(22,108.20)
6/15/2025	FFB Payroll	Rippling	People Center Bill	(128.80)
6/15/2025	FFB Payroll	Rippling	Employee Reimbursement - L. Galvin	(3,173.70)
6/15/2025	FFB Payroll	Rippling	Employee Reimbursement - M. Ortiz-Trujillo & G. Arakawa	(1,557.31)
6/15/2025	FFB Payroll	Rippling	Employee Reimbursement - J. Hutchins & S. Long	(1,086.62)
6/27/2025	FFB Payroll	Rippling	[Rippling] Employee net pay for check date 06/27/2025	(95,570.54)
6/27/2025	FFB Payroll	Rippling	[Rippling] Payroll taxes paid via Rippling for check date 06/27/2025	(50,359.94)
6/30/2025	FFB Payroll	Rippling	Employee Reimbursement - D. Wilson	(879.26)
6/30/2025	FFB Payroll	Rippling	Employee Reimbursement - D. O'campo	(113.40)
6/30/2025	FFB Payroll	Rippling	People Center Bill	(750.00)
6/30/2025	FFB Payroll	Rippling	Employee Reimbursement - D. Wilson	(639.27)
6/30/2025	FFB Payroll	Rippling	Employee Reimbursement - L. Lewis & J. Crenshaw	(4,086.34)
6/30/2025	FFB Payroll	First Foundation Bank	Wire Fee	(10.00)
J.P. Morgan Securities				
6/30/2025	Chase Bond Portfolio	Health Net	May Health Net Payment	(25,740,330.57)
6/30/2025	Chase Bond Portfolio	JPMorgan Chase	Accrued Investment Income - May 2025	96,449.88
6/30/2025	Chase Bond Portfolio	JPMorgan Chase	Bank Fee - May 2025 (Portfolio)	\$ (20.00)

**Imperial County Local Health Authority
DBA Community Health Plan of Imperial Valley
Product P&L
For June 2025**

	June						June (YTD)					
				% of Total						% of Total		
	Medi-Cal	Medicare	Total	Medi-Cal	Medicare		Medi-Cal	Medicare	Total	Medi-Cal	Medicare	
REVENUE												
Premium	\$ 28,015,243	\$ -	\$ 28,015,243	100%	0%		\$ 164,556,253	\$ -	\$ 164,556,253	100%	0%	
Pass-Through	\$ 331,229	\$ -	\$ 331,229	100%	0%		\$ 2,835,201	\$ -	\$ 2,835,201	100%	0%	
TOTAL REVENUE	\$ 28,346,472	\$ -	\$ 28,346,472	100%	0%		\$ 167,391,454	\$ -	\$ 167,391,454	100%	0%	
HEALTH CARE COSTS	\$ 27,506,015	\$ -	\$ 27,506,015	100%	0%		\$ 162,454,767	\$ -	\$ 162,454,767	100%	0%	
Gross Margin	\$ 840,457	\$ -	\$ 840,457	100%	0%		\$ 4,936,688	\$ -	\$ 4,936,688	100%	0%	
ADMINISTRATIVE EXPENSE												
Healthcare Services	\$ 53,354	\$ 60,165	\$ 113,519	47.0%	53.0%		\$ 359,773	\$ 438,702	\$ 798,475	45.1%	54.9%	
Care Management	\$ -	\$ 38,869	\$ 38,869	0.0%	100.0%		\$ -	\$ 100,796	\$ 100,796	0.0%	100.0%	
Compliance	\$ 72,365	\$ 11,780	\$ 84,145	86.0%	14.0%		\$ 345,950	\$ 56,317	\$ 402,268	86.0%	14.0%	
Operations	\$ 5,499	\$ 49,487	\$ 54,986	10.0%	90.0%		\$ 28,413	\$ 255,720	\$ 284,133	10.0%	90.0%	
Member & Provider Services	\$ 8,974	\$ 8,974	\$ 17,948	50.0%	50.0%		\$ 60,615	\$ 60,615	\$ 121,230	50.0%	50.0%	
Sales & Marketing	\$ 1,055	\$ 20,053	\$ 21,108	5.0%	95.0%		\$ 3,471	\$ 65,955	\$ 69,426	5.0%	95.0%	
Executive	\$ 46,817	\$ 15,606	\$ 62,422	75.0%	25.0%		\$ 289,278	\$ 96,426	\$ 385,704	75.0%	25.0%	
Finance	\$ 61,559	\$ 82,086	\$ 143,645	42.9%	57.1%		\$ 394,556	\$ 262,646	\$ 657,202	60.0%	40.0%	
Corporate	\$ 55,308	\$ 18,258	\$ 73,566	75.2%	24.8%		\$ 279,255	\$ 50,564	\$ 329,819	84.7%	15.3%	
Information Technology	\$ 10,045	\$ 7,334	\$ 17,379	57.8%	42.2%		\$ 57,390	\$ 41,901	\$ 99,291	57.8%	42.2%	
Human Resources	\$ 6,505	\$ 4,750	\$ 11,255	57.8%	42.2%		\$ 33,459	\$ 24,428	\$ 57,887	57.8%	42.2%	
Total Administrative Expense	\$ 321,481	\$ 317,362	\$ 638,842	50%	50%		\$ 1,852,161	\$ 1,454,069	\$ 3,306,230	56%	44%	
Non-Operating Income												
Dividend, Interest & Investment Income	\$ 95,777	\$ -	\$ 95,777	100%	0%		\$ 628,535	\$ -	\$ 628,535	100%	0%	
Rental Income	\$ 1,494	\$ -	\$ 1,494	100%	0%		\$ 8,961	\$ -	\$ 8,961	100%	0%	
Total Non-Operating Income	\$ 97,271	\$ -	\$ 97,271	100%	0%		\$ 637,496	\$ -	\$ 637,496	100%	0%	
Depreciation & Amortization	\$ 10,656	\$ -	\$ 10,656	100%	0%		\$ 63,933	\$ -	\$ 63,933	100%	0%	
Change in Net Position	\$ 605,592	\$ (317,362)	\$ 288,230	210%	-110%		\$ 3,658,089	\$ (1,454,069)	\$ 2,204,020	166%	-66%	
Key Metrics												
Enrollment	98,315	-	98,315	100%	0%		587,334	-	587,334	100%	0%	
Revenue PMPM	\$288.32	N/A	\$288.32				\$285.00	N/A	\$285.00			
MLR	97.04%	N/A	97.04%				97.05%	N/A	97.05%			
Admin Ratio	1.1%	N/A	2.2%				1.1%	N/A	2.0%			
Net Income PMPM	\$6.16	N/A	\$2.93				\$6.23	N/A	\$3.75			
Net Income %	2.1%	N/A	1.0%				2.2%	N/A	1.3%			

**Imperial County Local Health Authority
DBA Community Health Plan of Imperial Valley
2025 6+6 Forecast Summary
(Draft)**

6+6F Enrollment Summary



2025 6+6F Waterfall

2025 Plan - Change in Net Position	\$	1,654
Variance - B/(W)		
Gross Margin		
Prior Period Gross Margin	\$	182
Rate Adjustment	\$	927
Volume	\$	379
Investment & Other Income	\$	214
Total Gross Margin Variance	\$	1,702
Administrative Costs		
Labor	\$	257
Consulting	\$	(68)
Regulatory Fees	\$	49
Information Technology	\$	(28)
All Other	\$	45
Total Administrative Cost Variance	\$	256
Total Change	\$	1,958
2025 6+6F - Change in Net Position	\$	3,612

Community Health Plan of Imperial Valley
Statement of Revenues, Expenses, and Changes in Net Position
6+6 Forecast (Draft)

(\$, 000)	June YTD (H1)			Forecast (H2)			2025 6+6F			
	Actuals	Budget	Variance B/(W)	6+6F	Budget	Variance B/(W)	6+6F	Budget	6+6F vs. Budget	
									#	% Δ
REVENUE										
Premium Capitation	\$ 158,500	\$ 137,149	\$ 21,350	\$ 157,759	\$ 135,563	\$ 22,196	\$ 316,259	\$ 272,713	\$ 43,547	16.0%
Pass Through	\$ 1,759	\$ 2,072	\$ (313)	\$ 1,750	\$ 2,047	\$ (297)	\$ 3,510	\$ 4,120	\$ (610)	-14.8%
Prior Period Revenue	\$ 7,132						\$ 7,132	\$ -	\$ 7,132	NA
Other Revenue										
Investment/Dividend Income	\$ 629	\$ 524	\$ 104	\$ 634	\$ 524	\$ 109	\$ 1,262	\$ 1,049	\$ 214	20.4%
Rental and Other	\$ 9	\$ 9	\$ 0	\$ 9	\$ 9	\$ 0	\$ 18	\$ 17	\$ 1	3.0%
TOTAL REVENUES	\$ 168,029	\$ 139,755	\$ 28,274	\$ 160,153	\$ 138,144	\$ 22,009	\$ 328,182	\$ 277,898	\$ 50,283	18.1%
HEALTHCARE COST										
Medical Capitation	\$ 153,745	\$ 133,035	\$ (20,710)	\$ 153,027	\$ 131,496	\$ (21,530)	\$ 306,772	\$ 264,531	\$ (42,240)	-16.0%
Pass Through	\$ 1,759	\$ 2,072	\$ 313	\$ 1,750	\$ 2,047	\$ 297	\$ 3,510	\$ 4,120	\$ 610	14.8%
Prior Period Capitation	\$ 6,951						\$ 6,951	\$ -	\$ (6,951)	NA
TOTAL HEALTH CARE COST	\$ 162,455	\$ 135,107	\$ (27,348)	\$ 154,777	\$ 133,544	\$ (21,234)	\$ 317,232	\$ 268,651	\$ (48,581)	-18.1%
Gross Margin	\$ 5,574	\$ 4,648	\$ 927	\$ 5,375	\$ 4,600	\$ 776	\$ 10,950	\$ 9,247	\$ 1,702	18.4%
ADMINISTRATIVE COSTS										
Labor Costs										
Salaries & Wages	\$ 2,000	\$ 2,121	\$ 120	\$ 2,686	\$ 2,805	\$ 119	\$ 4,686	\$ 4,926	\$ 239	4.9%
Benefits Expense	\$ 149	\$ 155	\$ 6	\$ 219	\$ 233	\$ 14	\$ 368	\$ 388	\$ 20	5.1%
Workers' Compensation Insurance	\$ 9	\$ 8	\$ (1)	\$ 9	\$ 8	\$ (1)	\$ 17	\$ 15	\$ (2)	-13.2%
Total Labor Costs	\$ 2,158	\$ 2,283	\$ 125	\$ 2,914	\$ 3,046	\$ 132	\$ 5,072	\$ 5,329	\$ 257	4.8%
Contract & Professional Fees	\$ 673	\$ 829	\$ 157	\$ 571	\$ 346	\$ (225)	\$ 1,243	\$ 1,176	\$ (68)	-5.8%
Advertising & Marketing	\$ 6	\$ 29	\$ 23	\$ 24	\$ 24	\$ -	\$ 30	\$ 53	\$ 23	43.6%
Regulatory Fees	\$ 157	\$ 168	\$ 11	\$ 128	\$ 166	\$ 37	\$ 285	\$ 334	\$ 49	14.6%
Information Technology	\$ 65	\$ 27	\$ (38)	\$ 31	\$ 42	\$ 10	\$ 96	\$ 69	\$ (28)	-40.1%
Liability Insurance	\$ 27	\$ 27	\$ (0)	\$ 30	\$ 27	\$ (3)	\$ 57	\$ 54	\$ (3)	-6.0%
Travel	\$ 53	\$ 58	\$ 5	\$ 64	\$ 52	\$ (12)	\$ 117	\$ 110	\$ (8)	-7.0%
Office expenses	\$ 26	\$ 39	\$ 13	\$ 23	\$ 39	\$ 16	\$ 49	\$ 78	\$ 29	37.0%
Memberships & Subscriptions	\$ 59	\$ 56	\$ (3)	\$ 59	\$ 61	\$ 2	\$ 118	\$ 116	\$ (1)	-1.1%
Occupancy & Maintenance	\$ 26	\$ 28	\$ 2	\$ 28	\$ 28	\$ 0	\$ 54	\$ 57	\$ 2	4.1%
All Other	\$ 56	\$ 43	\$ (12)	\$ 29	\$ 43	\$ 14	\$ 85	\$ 87	\$ 1	1.7%
TOTAL ADMINISTRATIVE COSTS	\$ 3,306	\$ 3,588	\$ 281	\$ 3,901	\$ 3,873	\$ (28)	\$ 7,207	\$ 7,461	\$ 254	3.4%
Operating Income	\$ 2,268	\$ 1,060	\$ 1,208	\$ 1,474	\$ 727	\$ 748	\$ 3,742	\$ 1,786	\$ 1,956	109.5%
Depreciation/Amortization	\$ 64	\$ 66	\$ 2	\$ 66	\$ 66	\$ -	\$ 130	\$ 132	\$ 2	1.6%
Change in Net Position	\$ 2,204	\$ 994	\$ 1,210	\$ 1,408	\$ 661	\$ 748	\$ 3,612	\$ 1,654	\$ 1,958	118.3%
Key Metrics										
Member Months	587,334	567,744	19,590	585,432	558,834	26,598	1,172,766	1,126,578	46,188	4.1%
Period Ending Membership	97,913	94,005	3,908	97,376	92,520	4,856	97,376	92,520	4,856	5.2%
Revenue PMPM	\$ 286.09	\$ 246.16	\$ 39.93	\$ 273.56	\$ 247.20	\$ 26.36	\$ 279.84	\$ 246.67	\$ 33.16	13.4%
MLR	96.7%	96.7%	-1 bps	96.6%	96.7%	3 bps	96.7%	96.7%	1 bps	
Admin Ratio	2.0%	2.6%	60 bps	2.4%	2.8%	37 bps	2.2%	2.7%	49 bps	
FTEs (EOP)	28	28	-	45	46	1	45	46	1	2.2%
Net Income Ratio	1.3%	0.7%	60 bps	0.9%	0.5%	40 bps	1.1%	0.6%	51 bps	

Plan Resolution

Be it known that Imperial County Local Health Authority, doing business as Community Health Plan of Imperial Valley (CHPIV”) is an adopting employer to the Community Health Plan of Imperial Valley 401(a) Defined Contribution and 457(b) Deferred Compensation Plans (the “Plans”), as amended and restated; and are a qualified Plan and Trust as defined under ERISA. Further, this resolution serves to certify that the trustees of the Plan have met and having been duly authorized, hereby resolves the following.

Resolved, that a Plan Committee is hereby established to monitor the operation of the Plan and coordination or supervision of various plan service providers.

Resolved, that the Plan Committee will include but not be limited to various individuals in the position of:

David Wilson, CFO
Daniel O’Campo, Chief of Staff
Suzette Castro, Accountant

Resolved, that the Plan Committee is empowered to make decisions regarding the general operation of the Plan, engage vendors to provide service to the Plan and any decision requiring the continued compliance of applicable plan rules and regulations.

This resolution hereby is incorporated into the minutes of the Plan. Having met and duly resolved the items above, Community Health Plan of Imperial Valley does hereby authorize and certify the above matters.

Authorization

Lee Hindman, Chairman

8/11/2025

Date

Fact Sheet

Imperial County Medical Society President's Dinner

August 11, 2025

Recommendations

Motion to approve a \$5,000 sponsorship of the annual Imperial County Medical Society President's Dinner as presented

Background

The Imperial County Medical Society represents much of the total medical staff practicing in Imperial County. Dr. Arakawa is currently a member of the Medical Society, representing CHPIV. \$5,000 was approved in 2024 at the end of our first year of operation as well as in CHPIV's first year of operation (2023).

Current Situation

The annual President's dinner provides an excellent venue to communicate CHPIV's progress and plans, while hearing the same from the Medical Society and its members. With the introduction of the Medi-Medi (D-SNP) plan on January 1, 2026, and the related open enrollment in October 2025, this is a good time to update the physicians of Imperial County.

Financial Impact (including Budget Reference)

\$5,000

First Submission to Commission: 8/11/2025

Second Submission date: N/A



Imperial County Medical Society
8690 Aero Drive, Ste 115-220
San Diego, CA 92123
(858) 565-8888
ICMS@sdcms.org
www.icmsdocs.org



July 9, 2025

Larry Lewis, CEO
Community Health Plan of Imperial Valley

Subject: Sponsorship of the Imperial County Medical Society's 2025 President's Dinner

Dear Mr. Lewis,

On Wednesday, November 12, 2025, the Imperial County Medical Society will host its Annual President's Dinner and I am reaching out to ask if Community Health Plan of Imperial Valley would consider once again joining as a \$5,000 Sponsor for this year's event.

The Imperial County Medical Society is a professional association representing physicians from our local community, most in private practice or working at either or both of our local hospitals. Our physicians face many unique challenges presented to both physicians and patients in a rural setting and they are committed to ensuring that every patient receives the highest quality of care.

Historically most of the members of ICMS attend the President's Dinner so this event would be an ideal opportunity for you and your representatives to reach out and connect with the physicians of Imperial County and their spouses and office managers.

Our Silver Sponsorship is \$5,000 and along with your sponsorship you will receive the following sponsorship benefits:

Four complimentary tickets to the dinner
Sponsor Recognition during the event and on all promotional materials
Recognition on the ICMS website
Opportunity to speak for 5 minutes during the evening program

We would love to have CHPIV once again join us for what should be an evening of good food, comradery and celebrating this year's successes and challenges with the physicians of Imperial County.

Thank you for your continued support.

Regards,

A handwritten signature in blue ink, appearing to read "Paul Hegyi".

Paul Hegyi
Executive Director

Q2 CHPIV

Quality Improvement Health Equity Committee



**Community
Health Plan**

OF IMPERIAL VALLEY

Agenda

1. Call Center Metrics
2. Utilization Management
 - a. Over/Under Utilization
 - b. Specialty Access
3. Appeals & Grievances
4. Healthcare Effectiveness Data & Information Set (HEDIS)
5. Care Management KPI Report
6. Enhanced Care Management/Community Supports
7. Long Term Support Services (LTSS)
8. Pharmacy
9. Behavioral Health

Agenda

10. Quality Improvement Update
 - a. Quality Improvement Project
 - b. IHA
 - c. Lead Screening
11. Population Health Management (PHM) Quarterly Report
12. Peer Review Credentialing
13. California Children Services
14. Inter Rater Reliability
15. Network Access
16. Provider Directory Review
17. Vendor Management
18. Provider Satisfaction Program

Call Center Metrics



Call Center Metrics

Member Services

KPI	January 2025	February 2025	March 2025	Q1
Calls Offered	3,075	2,322	2,620	8,020

Provider Services

KPI	January 2025	February 2025	March 2025	Q1
Calls Offered	1,182	992	1,246	3,420

Q1-2025 Top Member Call Types

1. Benefits & Eligibility
2. PCP Update
3. Update Demographics

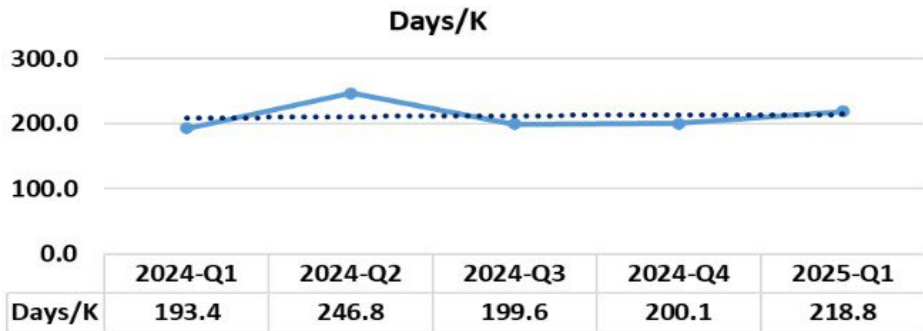
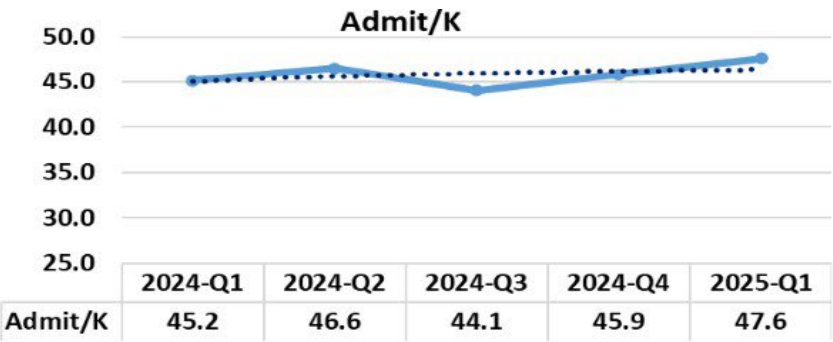
Q1-2025 Top Provider Call Types

1. Benefits & Provider Eligibility
2. Authorization Inquiries
3. Provider Search Inquiry

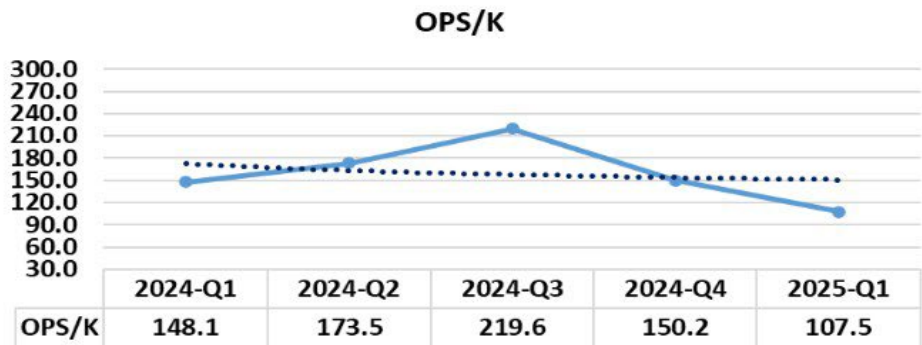
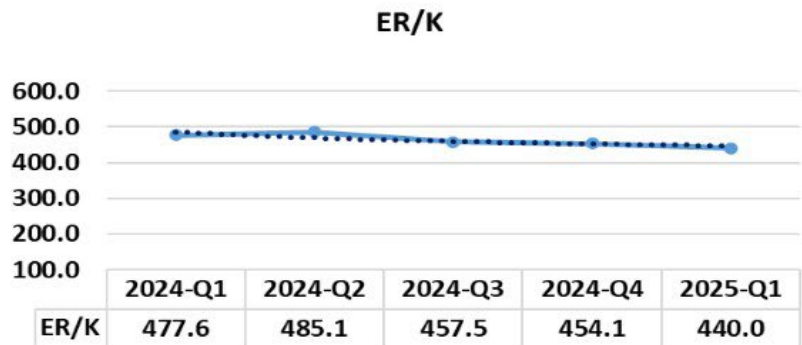
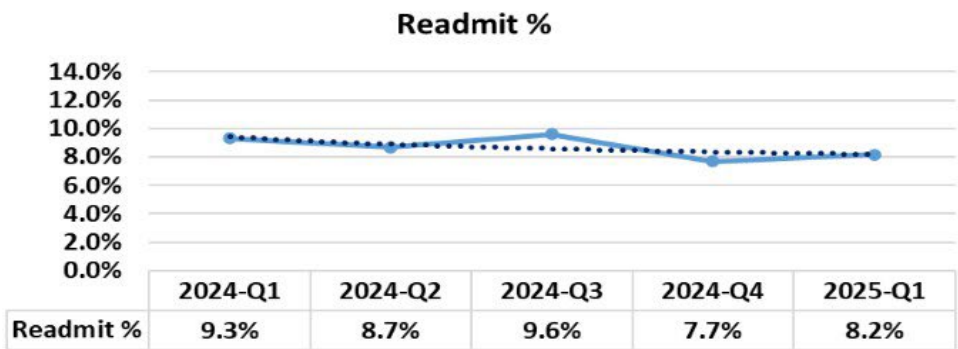
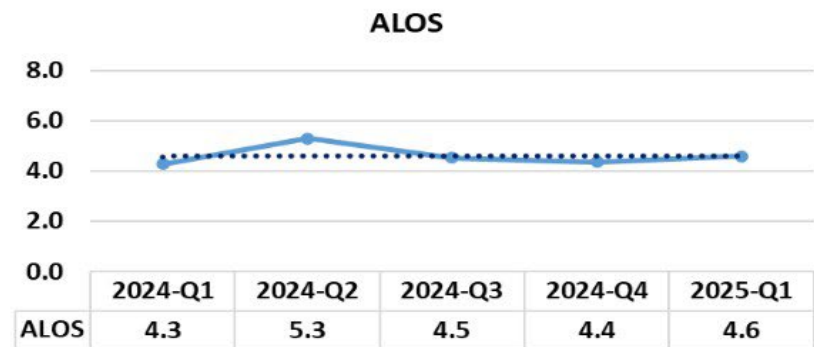
Utilization Management



Utilization Management Key Metrics



“Benchmark”
2025



Admit: 76

Days: 653

ALOS: 9

Readmit:
12.7

ER/K: 451

OPS: 77

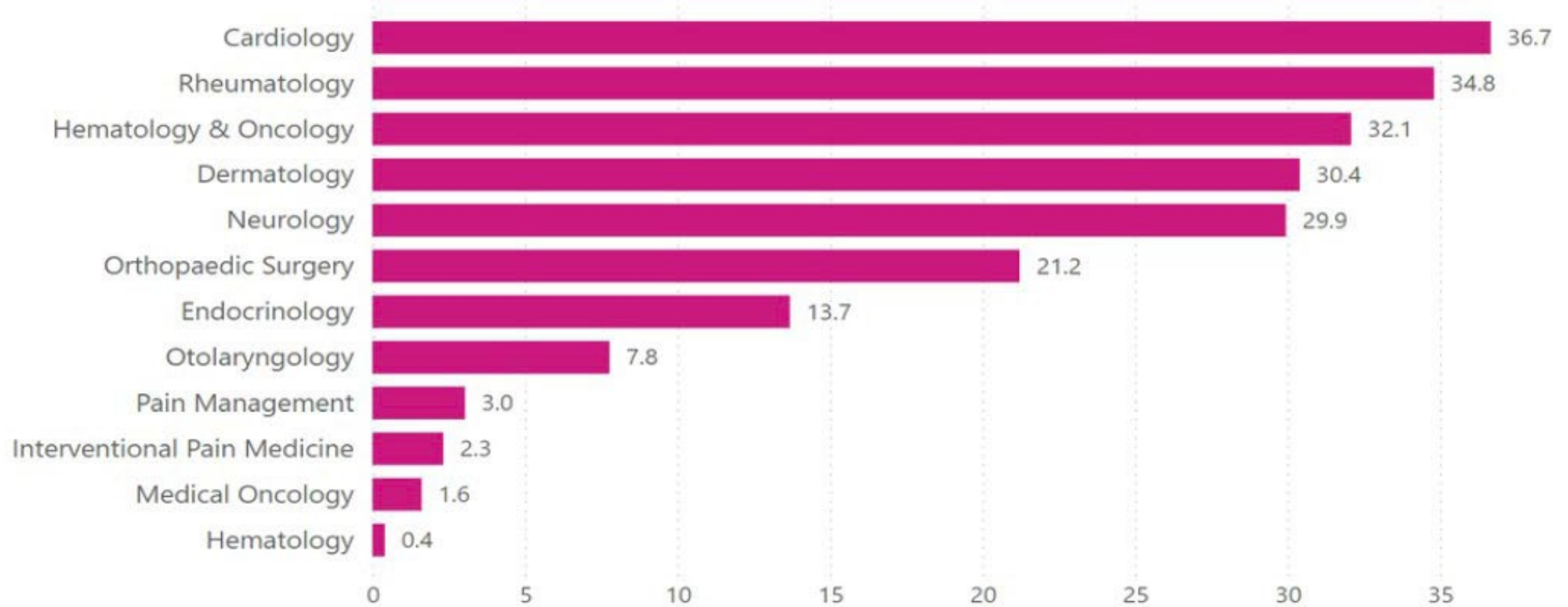
Utilization - Over/Under

UM Metrics Include:	Overall
1. Admissions/K	1.Utilization stable Q1-Q3
2.Bed Days/K	2.No significant Q over Q fluctuations
3.Acute care average length stay	3.High ER utilization reflective of access challenges
4. ER admits/K	4.Ongoing work to address re-admissions
5.All cause readmits	
6. Authorization appeals, denials, deferrals, and modifications	
7. Specialty referrals for target Specialties	

Health Net completed its metric review last year, and the findings indicated no evidence of either overutilization or underutilization of services

Utilization - Specialty Access Report

Average PTMPY for Focus Specialties



Appeals & Grievances



Appeals & Grievances

Appeals and Grievances – Rolling Year Totals

2024 Appeals	Q1	Q2	Q3	Q4	Q1 2025
CHPIV	7	15	16	13	23

2024 Grievances	Q1	Q2	Q3	Q4	Q1 2025
CHPIV - QOS	91	136	72	72	70
CHPIV - QOC	5	9	15	6	4
CHPIV - ATC	23	29	23	39	17

Appeals & Grievances

Top 3 Access to Care Grievances

CHPIV Description
Access to Care – Prior Authorization Delay
Access to Care – Transportation Missed Appointment
Access to Care – Prescription Delay

Top 3 QOS Grievances

Member Perceived QOS Grievances	
Quarter	Issue
Q1 2025	Transportation-General Complaint Vendor
Q4 2024	Balancing Billing Issues
Q3 2024	Transportation-General Complaint Vendor

Q1 - QOC Grievances

- 4 QOC Grievances filed in Q1
- Reasons:
 - Inadequate Care (2)
 - Delay in Rx refill (1)
 - Suspected neglect (1)
- All cases referred to Health Net Clinical Department for assignment of severity level
 - 2 cases- level 0
 - 2 cases - level 2
- All cases to be reviewed by Dr. Arakawa

Top 3 Appeals

Pre-Service Appeals	
Quarter	Issue
Q1 2025	Not Medically Necessary- Diagnostic-MRI
Q4 2024	Not Medically Necessary- Diagnostic-MRI
Q3 2024	Not Medically Necessary- Diagnostic-MRI

HEDIS Measures RY2025



CHPIV FINAL MY2024 MPL Attainment

		Behavioral Health		Children's Domain (CH)								Chronic Disease Management (CD)			Reproductive Health and Cancer Prevention					Percent Achieve Goal	Final MY 2023, Changes from prior year attainment
		FUA	FUM	WCV	CIS	DEV	IMA	LSC	TFL	W30	W30	AMR	CBP	GSD	CHL	PPC	PPC	BCS-E	CCS		
		total30d	total30d	total	CO10	all	CO2	LSC	total	0to14mth	15to30mth	5to64pd50	CBP	POOR HB	total	PPC-Pre	PPC-Post	BCS-E	CCS		
	GAPS to Target	0	0	175	0	0	0	0	2025	24	0	0	0	0	16	0	0	0	0	78%	56%, ↑5
	RATE	47.62	61.70	51.34	37.71	54.01	45.74	83.21	13.58	56.91	76.60	92.09	73.48	23.48	55.28	88.56	87.83	58.20	61.80		
X	= Meet selected percentile benchmark, white text is a new attainment of MPL																				
X	= Below selected percentile benchmark, red text is dropped from MPL met status in the prior year																				

1. CHW 2023 – 10/18 reached MPL (50th %)
2. CHPIV 2024 – 14/18 reached MPL

Care Management



Care Management

2025 Quarter 1 Engagement Rate	
Physical Health	66.7%
Behavioral Health	72.7%
Maternity	61.7%
Transitional Care Services	75.7%
First Year of Life	96.7%

Enhanced Care Management (ECM) & Community Supports (CS)



Enhanced Care Management (ECM) & Community Supports (CS)

ECM Information

ECM Enrollment by Population of Focus (POF) by County (Primary POF Only)

County	POF	Jan 2024	Feb 2024	Apr 2024	May 2024	Jul 2024	Aug 2024	Oct 2024	Nov 2024
Imperial	Total	1,246	1,219	1,285	1,276	1,340	1,337	1,339	1,314
Imperial	Adult - Birth Equity Population of Focus	4	5	6	6	7	6	9	9
Imperial	Adult - Individual Experiencing Homelessness: Adults without Dependent Child	63	68	77	83	99	101	112	112
Imperial	Adult - Individual Experiencing Homelessness: Homeless Family	50	55	81	80	91	88	85	82
Imperial	Adult - Individuals at Risk for Avoidable Hospital or ED Utilization	962	923	880	833	831	826	781	766
Imperial	Adult - Individuals Living in the Community and at Risk for LTC Institutionalization	18	22	30	28	25	22	23	21
Imperial	Adult - Individuals Transitioning from Incarceration	1	1	1	1	1	1	1	1
Imperial	Adult - Individuals with Serious Mental Health or Substance Use Disorder (SUD)	102	97	100	100	116	115	143	142
Imperial	Child/Youth - Enrolled in CCS or CCS WCM with Additional Needs Beyond the C	3	4	10	15	16	18	19	20
Imperial	Child/Youth - Individual Experiencing Homelessness: Homeless Family	0	2	15	19	19	21	21	21
Imperial	Child/Youth - Individuals at Risk for Avoidable Hospital or ED Utilization	32	32	49	55	59	59	60	55
Imperial	Child/Youth - Individuals Experiencing Homelessness: Unaccompanied Children	3	4	12	19	23	25	33	33
Imperial	Child/Youth - Individuals with Serious Mental Health or Substance Use Disorder	8	6	24	37	53	55	52	52

Long Term Support Services (LTSS)



Long Term Support Services (LTSS) Q1 2025

LTC (Long Term Care)

Unique Utilizing LTC Members	Jan 2025	Feb 2025	Mar 2025
El Centro Post Acute	96	96	77
Imperial Manor	30	32	29
Pioneer Memorial D/P	73	77	76
Out of County	29	34	28
Out of State	0	0	0

CBAS (Community Based Adult Services)

	Jan 2025	Feb 2025	Mar 2025
Unique Utilizing CBAS Mbrs	243	236	240
Average Days per Week	1.9	1.9	1.8
Members utilizing CBAS six months ago, now in LTC	0	0	0

ICF (Intermediate Care Facilities)

Unique Utilizing LTC Members	Jan 2025	Feb 2025	Mar 2025
ARC #1, #2, #3	15	15	13

Pharmacy



Pharmacy

Top 5 Denials in Q4 based on Percentage and Total Number

Drug Name	% Denied	Drug Name	# Denied
epoetin alfa	100.00%	IV Iron	10
epoetin beta	100.00%	botulinum toxin	8
IV Iron	100.00%	epoetin alfa	8
pegfilgrastim	47.06%	pegfilgrastim	8
nivolumab	40.00%	epoetin beta	6

Behavioral Health



Behavioral Health/ SUD

Referrals

Q1 BH Medi-Cal Referrals – CHPIV

8	members were referred to HN BH by County SMHP
1	members were referred by HN BH to County SMHS
44	members were referred to HN BH providers

Q1 Care Coordination Referrals

CHPIV	
members referred for health plan case management	6

Quality Improvement Update



Quality Improvement Update

MY2024 QI Year-End Activity Summary

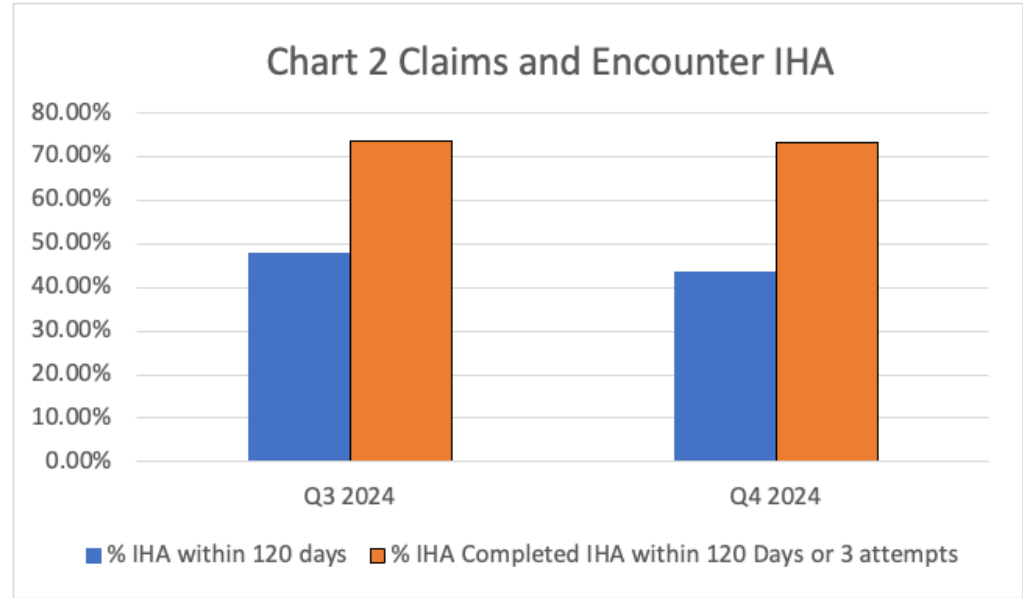
<i>Work Plan Initiatives</i>	<i>Activities Completed</i>
<i>I. BEHAVIORAL HEALTH</i>	4/5 80%
<i>II. CHRONIC CONDITIONS</i>	34/38 89.47%
<i>III. HOSPITAL QUALITY</i>	14/14 100%
<i>IV. MEMBER ENGAGEMENT & EXPERIENCE</i>	3/3 100%
<i>V. PEDIATRIC/PERINATAL/DENTAL</i>	58/62 93.55%
<i>VI. PHARMACY & RELATED MEASURES</i>	15/15 100%
<i>VII. PREVENTIVE HEALTH</i>	24/27 88.89%
<i>VIII. PROVIDER COMMUNICATION/ ENGAGEMENT</i>	13/15 86.67%
TOTAL	165/179 92.18%

Initial Health Assessments

Medical Record Review YTD 2024

	Total Records	% Compliant
PED IHA	46	30%
Adult IHA	176	60%

Claims/Encounter Review



Next Steps

1. Identify high volume, low performing Providers.
2. Revise Provider training
 - a. Best practices for Member outreach
 - b. Provider tip sheet for common IHA codes
 - c. Provide IHA content to bolster collection of information with each outreach/encounter

Lead Screening in Children

Q4 2024

	Q4 2024			
Age Ranges	Age 1 (6-17 Mos)	Age 2 (18-30 Mos)	Age 3 to 6 (31 -72 Mos)	Total
Numerator	909	948	1,132	2,989
Denominator	1,666	1,790	7,087	10,543
% Compliant	54.60%	53.00%	16.00%	28.50%

Next Steps

1. Identify high volume, low performing Providers.
2. Provide funding, distribute, and track use of POC lead analyzers.
3. Establish workflow guidance to providers who do not conduct POC blood lead screening.

Population Health Management



Population Health Management- Effectiveness Management

Program Name	Measure	Benchmark
Improve Preventive Health: Flu Vaccinations and/or Adult Immunization	Increase member flu& vaccination rates	Reach or maintain Medicaid 25% MPL for AIS-E
Tobacco Cessation	Increase smoking cessation	Increase participation in smoking cessation programs by 5%
Breast cancer screening	Improve breast CA screen rates	5% improvement in rates
Diabetes Management	Increase glycemic control rates	5% improvement in rates
Smart Start for Baby	Increase postnatal visit rates	10% improvement in postnatal visit rates
Improve behavioral health follow up after ED visit	Increase FUM/FUA rates	Achieve 50 th percentile in HEDIS FUM/FUA
Cardiac & Diabetes	Increase cardiac medication adherence	Increase outreach to encourage cardio-protective medication bundle adherence
Care Management	<ol style="list-style-type: none"> 1. Positive Member feedback 2. Reduce ER utilization and Readmissions 	Member feedback >90% Reduce ER visits by 10% Reduce readmissions by 5%

Peer Review Credentialing



Peer Review Credentialing and Access Reports

Investigations

For Q1-2025

- 1.0 Investigative Cases brought before Peer Review Committee
- 2.0 incidences of Appointment Availability Resulting in Substantial Harm
- 3.0 incidences of Adverse Injury Occurred During a Procedure by a Contracted Practitioner

Peer Review Credentialing and Access Reports

Credentialing/Recredentialing - Q1-2025

Initial Credentialing
Physical Health

First Name	Last Name	Professional Degree	Specialty	PCP/SCP/Non-Physician	License #	Board Certification (Y/N)	Specialty.	Board Certification Date	Approval Date
VINCENT	SOON	MD	Family Practice	PCP	000000129661	Y	Family Practice	2/15/2026	1/23/2025
EMILIANO	HIGUERA	MD	Pediatrics	PCP	000000046557	Y	Pediatrics	2/15/2025	1/30/2025

Certification/Recertification - Q4

Initial Certification

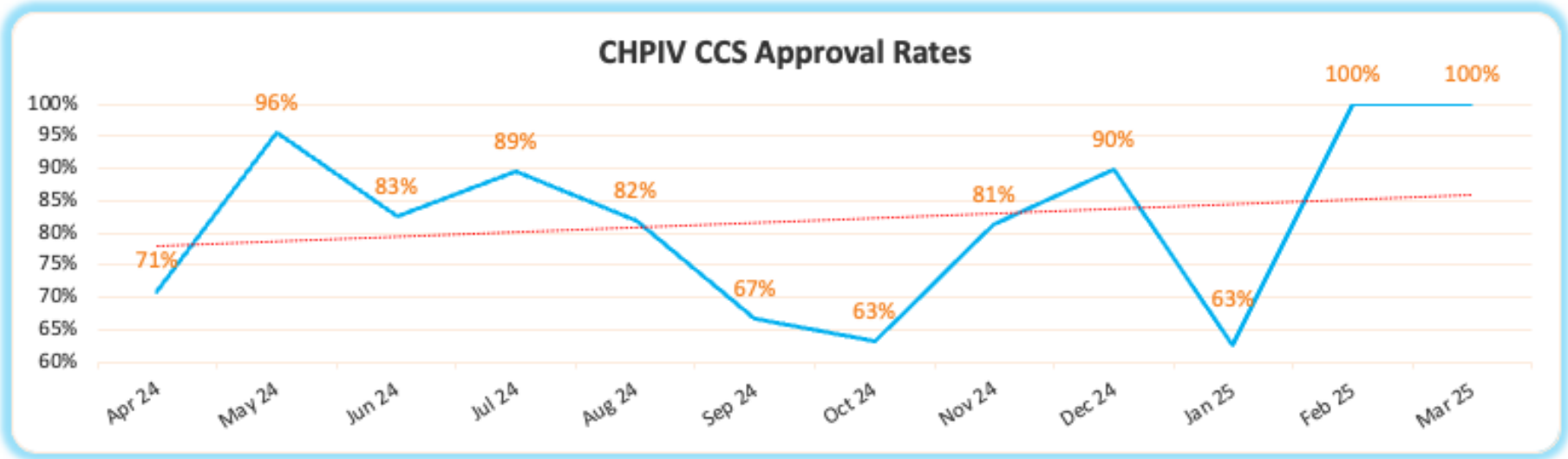
Name of Organizational	Type	Approval Date
All Valley Urgent Care	Urgent Care	3/20/2025

California Children's Service



California Children's Service

New SAR CCS Approval Rates

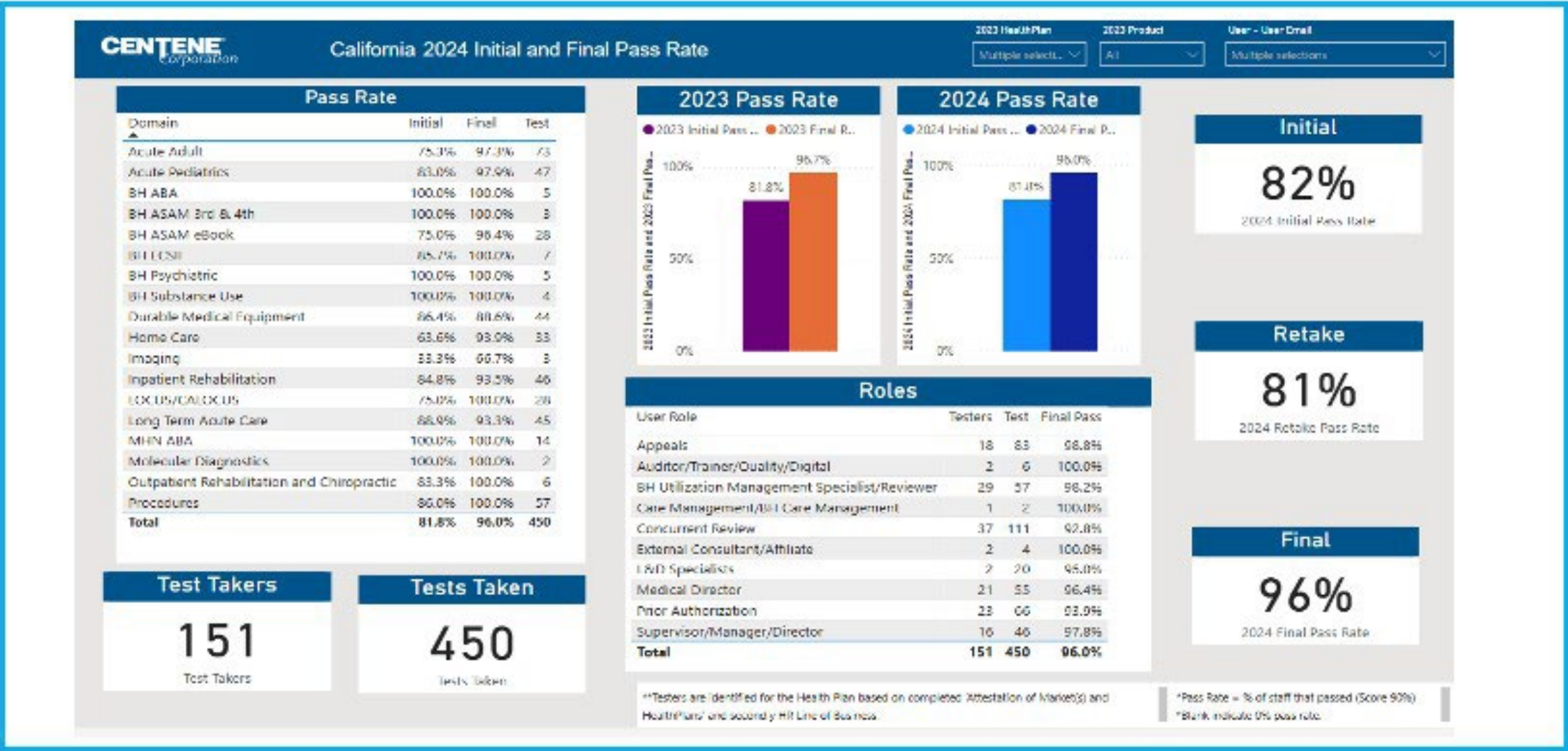


Over the past 12 months, the average CCS approval rate for new SAR submissions is 82%

Health Net Inter Rater Reliability Results



2024 Inter Rater Reliability Report



Network Access & Availability Governance



Q3/Q4 2024 Network Access & Availability Report

Q3/Q4 Updates

1. Network Access
 - a. PCP Adequacy: 90.7% | PCP Pediatric 99.3%
 - b. SPC Adequacy: 99.9% | SPC Pediatric 99.9%
 - c. Health Net to submit alternate access exemption request to DHCS
2. Subnetwork PPG Evaluation
 - a. PPGs placed on CAP for not meeting Network Adequacy standards
 - b. Several PPGs remain non-responsive to CAP issuance
 - c. Health Net to review possible enforcement actions

CHPIV Provider Directory Accuracy Report



2024 CHPIV Provider Directory Accuracy Report

Evaluate accuracy of CHPIV Provider Directory – “Find-A-Provider”

- 1. Methodology:
 - a. Phone Surveys
 - b. Standardized questions
 - c. Goal: 80% for each question

- 2. Results: 73 responders
 - Office locations: 56/56 Goal met
 - Phone numbers: 55/70 Goal NOT met
 - Accepting new patients 54/59 Goal met
 - Staff “Network Awareness” 59/59 Goal met

2024 CHPIV Provider Directory Accuracy Report

Issues identified

1. Provider information is out of date
 - a. Data cleansing efforts
2. Provider fails to communicate demographic updates in a timely manner
 - a. Explore ways to improve update process
3. Provider fatigue
 - a. Automated processes

Vendor Management Report



Vendor Management Report

Q4 2024 & Q1 2025 Monitoring/Oversight Activities

1. Joint Oversight Committee (JOC) meetings: Q4 2024 (25) Q1 2025 (12)
2. Two (2) vendor audits: NAL and Advanced Medical Review
3. Two (2) audits completed (Q4 2024): ModivCare and Cognizant
 1. ModivCare:
 - a. PCS forms
 - b. Call center - missed average speed
4. Seven (7) audits completed (Q1 2025): Deal & Hard of Hearinggg Service, Lifesigns, Akorbi, CommGap, Voiance, Cotiviti, Conduent

Provider Satisfaction



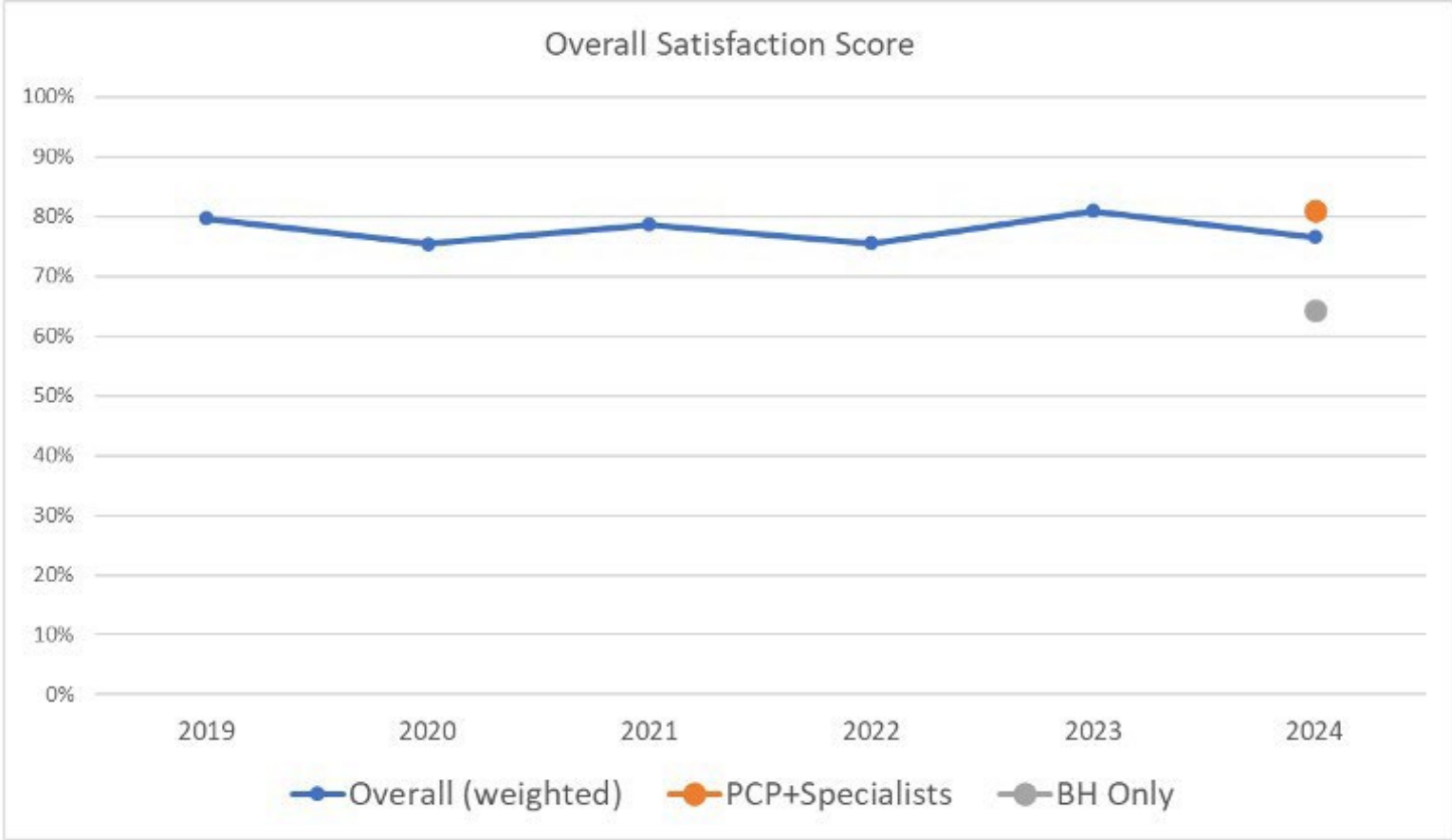
Provider Satisfaction

Survey Methodology

ANNUAL SURVEY	TOPICS
<ul style="list-style-type: none">Completed Q4 of 2024 (Sept-Nov)Surveyed PCP, Specialist, and BH officesAdministered via mail, phone, & internetVery low response rate for CHPIV (6%) and therefore not reportable	<p><u>Main Question Areas:</u></p> <ul style="list-style-type: none">Overall SatisfactionLikelihood to RecommendComparative Rating to All Other PlansFinance IssuesUtilization and Quality ManagementNetwork/Coordination of CarePharmacyHealth Plan Call Center Service StaffProvider Relations <p><u>Bonus/Custom Question Areas:</u></p> <ul style="list-style-type: none">Discharge PlanningAccess & Availability

Provider Satisfaction

Survey Results



Provider Satisfaction

2025 Strategy – Projects Snapshot

Below are highlights from several areas as we continue to work through project implementation and process improvements.



Enhanced Coordination and Messaging

Reviewing website messaging and instructions for clarity.

Implementing auto-reply messaging to external email addresses to confirm receipt.



Issue Resolution

Increased provider engagement staffing and structure to support behavioral health providers.

Reviewing Pulse survey data monthly for continuous improvement and follow-up.



Provider Data Management

Improving workflows for intake and validation of provider data changes, including integration with state-wide registry Symphony.



Provider Services

Rolled out new Availity platform to support providers online with enhanced and new self-service tools.

Completed CC training on ability to handle claims resolution without need for additional escalation.

Questions & Comments





NCQA Updates

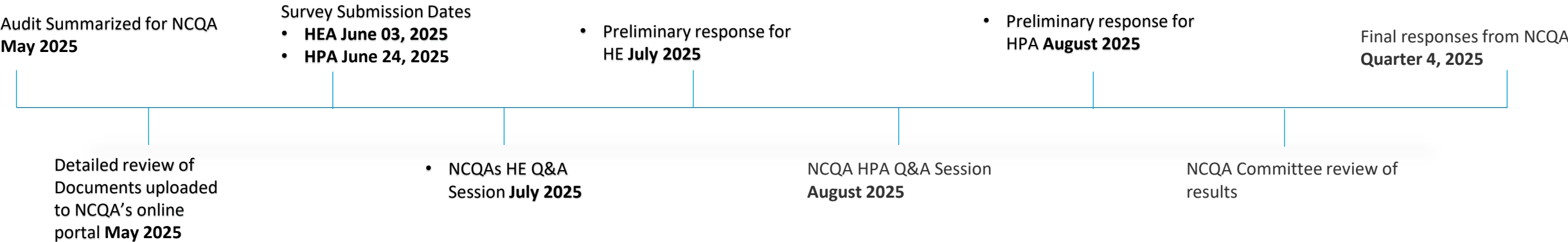
Health Services

Jeanette Crenshaw

Current Status

- Health Equity Accreditation (HEA) and Health Plan Accreditation (HPA) was submitted.
- Awaiting question/answer session with NCQA for HPA.
- Our HE reviewer is in the process of making their recommendation to NCQA's Review Committee.

Accreditation Timeline



Next Steps

The team is in the process of answering questions for the HPA portion of the accreditation and anticipate hearing back with preliminary results from NCQA by the end of August 2025. For the HE piece, we are awaiting NCQA's Committee review. We are anticipating finalized results by Q4 after NCQA Committee review is complete, at that time we will be able to formally post our NCQA Accreditation(s).

Questions?



Operations Report

Date: July 31, 2025

From: Julia Hutchins, Chief Operating Officer

Contributors: Daniel O'Campo, Chief of Staff and Michelle Ramirez, Manager of Sales & Retention

Executive Summary

This report contains a high-level summary of activities and priorities in the areas overseen by the Chief Operating Officer: product development, provider network, claims, grievances, member experience and marketing and communications.

Product Development

Priority: Go-Live January 1, 2026 with D-SNP Offering, Community Advantage Plus

Activities:

- **Implementation Progress & Activities.**
 - Our formulary is conditionally approved by CMS.
 - Key member materials have been developed and submitted.
 - Final benefit adjustments are complete.
 - CHG implementation is **ON TRACK**.
- **Planned Activities for Next Month**
 - Completion of pre-delegated reviews.
 - IPA implementation tracking.
 - Push to complete provider credentialing and contracting so we have a complete network listed in the printed provider directory on 10/1/25 when marketing begins.
 - Staff training, business process development, ID of hand-offs and data exchange requirements between CHPIV, CHG and IPAs.
- **Key Risks**
 - UCSD contract negotiation

Metrics: Below is a high-level status report of critical implementation milestones.

Provider Network

Priorities: (1) Contract D-SNP network and (2) validate accuracy of Medi-Cal provider directory

Activities:

- **Provider Event, Aug 13:** CHPIV will be hosting a provider mixer for local physicians to learn more about Community Advantage Plus and meet our staff. The event will be held at the Cambria Hotel from 6:00-7:30. To RSVP or for more information, please contact Daniel O'Campo at provider@chpiv.org.

Metrics: Below is a summary of our direct network contracting activity.

	Sent Agreement	Executed LOA	In Credentialing	Executed Contract
Primary Care	8	7	3	
Specialist	10	6	5	
Behavioral Health	8	8	35	
Ancillary	21	18	n/a	10
Hospital	4	2		

Operations – Member & Provider Experience

Priorities: (1) Ensure compliant handling and tracking of online and in person member inquiries, and (2) increase Medi-Cal mental health visits for depression and anxiety by 10% (CAC goal).

Staffing: Member services staff are now reporting to Daniel O'Campo. Ariday returns from maternity leave this month. Daniel is also hiring a Community Liaison to serve as the Community Advisory Committee coordinator, help advance our CAC goal, and other internal communication needs.

Activities:

- Working to initiate monthly Joint Operating Committee meetings with Health Net to review and advance operational improvement in key areas, starting in August
- Developing a more robust operational dashboard to include provider and claim metrics, ideally monthly (TBD)
- Fully implemented Zendesk for outbound and inbound call tracking
- Continuing validation of non-specialty mental health provider directory and in-process of enhancing provider information on CHPIV website
- Initiated internal audit of member access to and availability of urgent services

Metrics:

<div>Member Grievances (NEW)</div> <div>Source: Health Net Q2 grievance log</div> <div>Analysis: Top grievance reasons (Q2):<ul style="list-style-type: none">• Transportation• Prior auth delay• Balancing billing• Interpersonal – provider• PCP referral</div> <div>Q2 grievance volume in line with 2024 monthly average (41/month)</div>	<div>Count of Enrollee ID #</div> <div><table><thead><tr><th>Month</th><th>Access to Care</th><th>Quality of Care</th><th>Quality of Service</th><th>Total</th></tr></thead><tbody><tr><td>JAN</td><td>12</td><td>2</td><td>16</td><td>30</td></tr><tr><td>FEB</td><td>8</td><td>0</td><td>25</td><td>33</td></tr><tr><td>MAR</td><td>8</td><td>3</td><td>24</td><td>35</td></tr><tr><td>APR</td><td>7</td><td>3</td><td>33</td><td>43</td></tr><tr><td>MAY</td><td>12</td><td>2</td><td>29</td><td>43</td></tr><tr><td>JUN</td><td>1</td><td>0</td><td>1</td><td>2</td></tr></tbody></table><div>Month ▼</div></div>	Month	Access to Care	Quality of Care	Quality of Service	Total	JAN	12	2	16	30	FEB	8	0	25	33	MAR	8	3	24	35	APR	7	3	33	43	MAY	12	2	29	43	JUN	1	0	1	2
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<div>Member Calls</div> <div>Q2 not yet available</div>																																				
<div>CHPIV Member Walk-Ins and Online Inquires</div> <div>Source: Zendesk, July 2025</div> <div>Analysis: Volume remains low, and current staffing is adequate.</div>	<table><thead><tr><th>Interaction Reason</th><th>Tickets solved - This month</th></tr></thead><tbody><tr><td>Benefits</td><td>3</td></tr><tr><td>Claims</td><td>2</td></tr><tr><td>Eligibility</td><td>2</td></tr><tr><td>ID Card</td><td>1</td></tr><tr><td>Material Request</td><td>2</td></tr><tr><td>Other</td><td>7</td></tr><tr><td>PCP Change</td><td>1</td></tr><tr><td>Provider Contract</td><td>5</td></tr><tr><td>Provider Dispute</td><td>1</td></tr></tbody></table>	Interaction Reason	Tickets solved - This month	Benefits	3	Claims	2	Eligibility	2	ID Card	1	Material Request	2	Other	7	PCP Change	1	Provider Contract	5	Provider Dispute	1															
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<div><div>Net Promoter Score</div><div>Source: Zendesk, July 2025 (Medi-Medis)</div><div>Analysis: Score reflects a high level of satisfaction among members. The 2 detractors were b/c of referral approvals and confusion re: Medicare vs. Medi-Cal</div><div>Goal: 20/mo</div></div>	<table><tr><th>Promoters (9-10)</th><th>Neutral (7-8)</th><th>Detractors (0-6)</th><th>NPS Score</th></tr><tr><td>16</td><td>2</td><td>2</td><td rowspan="2">74</td></tr><tr><td>84%</td><td>11%</td><td>11%</td></tr></table>	Promoters (9-10)	Neutral (7-8)	Detractors (0-6)	NPS Score	16	2	2	74	84%	11%	11%																									
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<div><div>Member Utilization – Non-Specialty Mental Health Care (NEW)</div><div>Source: Health Net Paid claims through July 2025</div><div>Analysis: Too early to tell if utilization trends are increasing due to claims lag</div><div>Goal: Increase utilization by 10% from 2024</div></div>	<div><div>Members Accessing Care for Depression or Anxiety</div><table><thead><tr><th>Month</th><th>2024</th><th>2025</th></tr></thead><tbody><tr><td>Jan</td><td>150</td><td>20</td></tr><tr><td>Feb</td><td>130</td><td>60</td></tr><tr><td>Mar</td><td>160</td><td>100</td></tr><tr><td>Apr</td><td>155</td><td>55</td></tr><tr><td>May</td><td>175</td><td></td></tr><tr><td>Jun</td><td>135</td><td></td></tr><tr><td>Jul</td><td>160</td><td></td></tr><tr><td>Aug</td><td>155</td><td></td></tr><tr><td>Sep</td><td>10</td><td></td></tr><tr><td>Oct</td><td>10</td><td></td></tr><tr><td>Nov</td><td>10</td><td></td></tr></tbody></table></div>	Month	2024	2025	Jan	150	20	Feb	130	60	Mar	160	100	Apr	155	55	May	175		Jun	135		Jul	160		Aug	155		Sep	10		Oct	10		Nov	10	
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Sales & Marketing

Priorities: (1) D-SNP marketing materials, (2) Sales training and readiness

Team: Jonathan Garcia and Edgar Montejano joined the CHIPV sales team this month.

Activities:

- Finalizing Medicare marketing materials – Marketing starts in 2 months on October 1, 2025.
- Developing and implementing sales processes
- Sales rep licensing & training!
- Expand social media messaging and reach



HUMAN RESOURCES REVIEW August 11, 2025

THE MONTH IN REVIEW

- 5 new hires
- 12 current open positions: Care Manager, Clinical Compliance Auditor, Senior Compliance Advisor, Community Liaison, IT Support Tech, Sales and Marketing Rep, Care Coordinator (6)
- Began work on employee benefit enhancements for November open enrollment
 - o AFLAC
 - o HMO Option
 - o Voluntary life insurance
 - o Flex and Dependent care reimbursement accounts

HR NUMBERS AT A GLANCE (THROUGH AUGUST 11, 2025)

Total number of employees	30
Local	19
Remote	11
Number of exits in 2025	3 (+1)

EMPLOYEE HANDBOOK CHANGES FROM JULY COMMISSION MEETING

Topic	Change	Content	Page
Parking And Electric Vehicle Charging	New	Specifically prohibits charging electric vehicles.	Page 41
Employer-Sponsored Social Events	New	Reworded to continue to emphasize that the organization does not provide alcohol for employees, but if an employee chooses to consume alcohol, they must arrange for alternative transportation after the event	Page 29



EMPLOYEE HANDBOOK

IMPERIAL COUNTY LOCAL HEALTH AUTHORITY
DBA COMMUNITY HEALTH PLAN OF IMPERIAL VALLEY

REVISED AUGUST 2025

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INTRODUCTION

WELCOME TO IMPERIAL COUNTY LOCAL HEALTH AUTHORITY DBA COMMUNITY HEALTH PLAN OF IMPERIAL VALLEY!

We're very happy to welcome you to the Imperial County Local Health Authority Dba Community Health Plan of Imperial Valley ("CHPIV" or the "Plan"). Thanks for joining us! We would like you to feel that your employment with us will be mutually beneficial and enjoyable.

You are joining a plan that has established an outstanding reputation. Credit for this goes to every one of our employees and we hope that you will find satisfaction and take pride in your work here.

HISTORY

The Imperial County Local Health Authority was established to provide leadership and stakeholder collaboration and coordination to reduce health disparities and address health status improvements. Established in 2014, the primary focus was in seeking creative healthcare infrastructure improvements to facilitate the continued improvement in health status of Imperial County Residents. From the drafting of the Imperial County ordinance and the Imperial County Local Health Authority bylaws it was always a goal to develop a locally owned and governed Medi-Cal health plan.

In 2020 the Department of Health Care Services announced a large-scale reapplication process for all Medi-Cal Managed Care Plans, with a specific interest in local, single-plan models. The application process began in 2021 and led to the creation of Community Health Plan of Imperial Valley as a single-plan model for Imperial County.

As we transitioned to our role as the direct contract holder in Imperial County beginning January 1, 2024, our key responsibilities changed to governance and oversight of the health plan's administration of services to Medi-Cal members. We then engaged in expanded active dialogue with the community, providers, and Medi-Cal members regarding the resources available to support members in achieving optimal health. We strive to improve understanding of members and empower them to engage in improving their health. We also continuously search for ways to improve services for the benefit of membership improvement in their health. We are always charged with assuring the sustainability of Local Health Authority priorities, mission, and vision and the sustainability of the healthcare safety net network of providers.

MISSION AND VISION

Mission: The mission of the Community Health Plan of Imperial Valley is to work with community residents and stakeholders in both the public and private sectors to:

1. advance opportunities for improved health and access to comprehensive health care services
2. promote the long-term viability of safety net providers

3. increase prevention, education, and early intervention services
4. partner with Medi-Cal managed care plans to monitor and improve the local healthcare system.

Vision: Healthy Community, Healthy Residents

CORE VALUES

INTEGRITY. Honestly, Trustworthiness, hardworking, accountability for our actions, and helpful to all.

RESPECT. treating people how you would like to be treated.

RESPONSIBILITY: Own the service we provide.

TEAMWORK: Supporting your colleagues and team members when they need you and vice-versa, them being there when you need them.

SERVANT MANAGEMENT. serve the interests of all.

HANDBOOK PURPOSE

This employee handbook is presented as a matter of information and has been prepared to inform employees about Plan's philosophy, employment practices, policies, and the benefits provided to our valued employees, as well as the conduct expected from them. While this handbook is not intended to be a book of rules and regulations or a contract, it does include some important guidelines which employees should know. Except for the at-will employment provisions, the handbook can be amended at any time.

This employee handbook will not answer every question an employee may have, nor would the Plan want to restrict the normal question and answer interchange among us. It is in our person-to-person conversations that we can better know each other, express our views, and work together in a harmonious relationship.

We hope this guide will help employees feel comfortable with us. The Plan depends on its employees; their success is our success. Please don't hesitate to ask questions. Every manager will gladly answer them. We believe employees will enjoy their work and their fellow employees here. We also believe that employees will find the Plan a good place to work.

No one other than authorized management may alter or modify any of the policies in this employee handbook. No statement or promise by a supervisor, manager, or designee is to be interpreted as a change in policy, nor will it constitute an agreement with an employee.

Should any provision in this employee handbook be found to be unenforceable and invalid, such a finding does not invalidate the entire employee handbook, but only the subject provision. Nothing in this handbook is intended to infringe upon employee rights under Section 7 of the National Labor Relations Act (NLRA) or be incompatible with the NLRA.

We ask that employees read this guide carefully, become familiar with the Plan and our policies, and refer to it whenever questions arise.

EMPLOYMENT

EQUAL EMPLOYMENT

It is the policy of the Plan to provide equal employment opportunities to all qualified individuals and to administer all aspects and conditions of employment without regard to the following:

- Race and associated traits, including hairstyle.
- Color
- Age (40 and over)
- Sex
- Sexual orientation
- Gender
- Gender identity and gender expression
- Religion, including dress and grooming practices.
- National origin, including language use restrictions.
- Pregnancy, childbirth, or breastfeeding
- Marital status
- Genetic information, including family medical history.
- Physical or mental disability
- Military or veteran status
- Citizenship and/or immigration status
- Child or spousal support withholding
- Domestic violence, assault, or stalking victim status
- Medical conditions, including cancer and AIDS/HIV
- Lawful conduct occurring during nonworking hours not on COMMUNITY HEALTH PLAN OF IMPERIAL VALLEY's premises.
- Prior non-conviction arrest record
- Reproductive health decision making
- Any other protected class, in accordance with applicable federal, state, and local laws

Discriminatory, harassing, or retaliatory behavior is prohibited from coworkers, supervisors, managers, owners, and third parties, including clientele. The Plan takes allegations of discrimination, harassment, and retaliation very seriously and will promptly investigate when warranted.

Equal employment opportunity includes, but is not limited to, employment, training, promotion, demotion, transfer, leaves of absence and termination.

BACKGROUND CHECKS

The Community Health Plan of Imperial Valley may conduct a background check on any applicant or employee with their signed consent. The background check may

consist of prior employment verification, reference checks, education confirmation, criminal background, credit history, or other information, as permitted by law (if permitted by AB 22). Third-party services may be hired to perform these checks. All offers of employment and continued employment are contingent upon a satisfactory background check. Refusal to consent to a background check may result in discipline, up to or including termination.

CHPIV will not run a background check until after a conditional job offer has been made. If an applicant has a criminal conviction, CHPIV will conduct an individualized assessment and may determine that the applicant's employment will be denied based on the conviction.

In compliance with the organization's regulatory requirements, candidates will also be checked for exclusions in the Office of the Inspector General (OIG) database. Any exclusion against a candidate will result in the individual not being hired. Employees are subject to rechecks pursuant to regulatory requirements.

If an adverse decision is made, the individual will be provided with a copy of the background or OIG check.

Background checks will be retained for the period of time dictated by state law.

AT-WILL NOTICE

The employment relationship between the Plan and employees is at-will. This means that employees are not hired for any specified period and their employment may be terminated at any time, with or without cause, and with or without notice, by either the Plan or the employee. Community Health Plan of Imperial Valley's policy requires that all employees are at-will; any implied, oral, or written agreements or promises to the contrary are void and unenforceable, unless approved by an officer with the power to create an employment contract. There is no implied employment contract created by this Handbook or any other Community Health Plan of Imperial Valley document or written or verbal statement or policy.

ANNIVERSARY DATE AND SENIORITY

The employee's date of hire is their official employment anniversary date. Seniority is the length of continuous service starting on that date. Should an employee leave the Plan and then be rehired, previously accrued seniority will be lost, and seniority will begin to accrue again on the date of rehire. With the exception of certain protected leaves and paid time off, seniority does not accrue during leaves of absence that exceed 30 calendar days.

IMMIGRATION LAW COMPLIANCE

All employees are required to complete Section 1 of Form I-9 on their first day of employment, and produce, within three business days, acceptable proof of their

identity and eligibility to work in the United States. Failure to produce the proper identifying documents within three days will result in termination.

INTRODUCTORY PERIOD

The employee's first 90 days of employment with the Plan are considered an introductory period. This introductory period will be a time for getting to know fellow employees, managers and the tasks involved in the position, as well as becoming familiar with the Plan's products and services. The supervisor or manager will work closely with each employee to help them understand the needs and processes of their job.

This introductory period is a try-out time for the employee and the Plan. During this introductory period, the Plan will evaluate employees' suitability for employment and employees can evaluate the Plan as well. At any time during these first 90 days, employees may resign. If, during this period, employee work habits, attitude, attendance, performance, or other relevant factors do not measure up to our standards, the Plan may terminate employment.

At the end of the introductory period, the supervisor or manager will discuss each employee's job performance with them. During the discussion, employees are encouraged to give their comments and ideas as well.

Completion of the introductory period does not guarantee continued employment for any specified period, nor does it require that an employee be discharged only for cause. Completion of the introductory period also does not imply that employees now have a contract of employment with the Plan, other than at-will. Successful completion of the introductory period does not alter the at-will employment relationship.

A former employee who has been rehired after a separation from the Plan of more than one year is considered an introductory employee during the first 90 days following rehire.

EMPLOYMENT CLASSIFICATIONS

The Community Health Plan of Imperial Valley has established the following employee classifications for compensation and benefit purposes only. An employee's supervisor or manager will inform the employee of their classification, status, and responsibilities at the time of hire, re-hire, promotion or at any time a change in status occurs. These classifications do not alter the employment at-will status.

Regular Full-Time Employee

means an employee who is regularly scheduled to work forty (40) hours per week. Such employees may be exempt or nonexempt under the Fair Labor Standards Act (FLSA) as described below. Full-time employees are eligible for benefits as described in this handbook.

Regular Part-Time Employee

An employee who is scheduled to work less than 40 hours in a work week.

Temporary Employee

An employee who is scheduled to work on a specific need of the COMMUNITY HEALTH PLAN OF IMPERIAL VALLEY. The employee will not receive any benefits unless specifically authorized in writing.

Exempt

Employees whose positions meet specific tests established by the Fair Labor Standards Act (FLSA) and applicable state law and who are exempt from overtime pay requirements. The basic premise of exempt status is that the exempt employee is to work the hours required to meet their work responsibilities.

Non-Exempt

Employees whose positions do not meet FLSA and state exemption tests and who are paid a multiple of their regular rate of pay for overtime hours worked. Unless notified otherwise in writing by management, all employees of the Community Health Plan of Imperial Valley are non-exempt.

PERSONNEL RECORDS

The Community Health Plan of Imperial Valley will maintain various employment files while individuals remain employees of the Plan. Examples of these files are employee personnel files, attendance files, I-9 files, and files for medical purposes. If any changes with respect to personal information, such as a change in home address and telephone number or a change of name occur, employees are required to notify their supervisor or manager so the appropriate updates can be made to the files. The Community Health Plan of Imperial Valley will take reasonable precautions to protect employee files and employee personally identifiable information in its records.

Employee files have restricted access. Employees, their supervisor or manager, or their designated agents, may have access to those personnel files. If an employee (or former employee) wishes to review their personnel file, they must do so in the presence of a supervisor or manager.

Employees may review or obtain a copy of their personnel file or payroll records by making a written request to their supervisor or manager. The written request will become a permanent part of the personnel file and the Community Health Plan of Imperial Valley will make the contents of those records available within a reasonable time frame.

EMPLOYEE REFERENCES

All employee reference checks must be forwarded to Human Resources; only authorized members of management or Human Resources may provide this information. When the Community Health Plan of Imperial Valley is contacted for a reference check or employment verification, generally only positions held, and dates

of employment will be confirmed. In some circumstances, past salary, and eligibility for rehire may be provided as well.

JOB TRANSFERS

The Community Health Plan of Imperial Valley aspires to promote qualified internal candidates to fill open positions whenever possible and practical. When job openings occur, current employees who have been in their current role for at least 12 months are encouraged to apply.

Employees are encouraged to discuss their desire for a job transfer with their current manager. In all cases, if the hiring manager chooses to interview the employee for the vacancy, the current manager will be made aware.

Current managers are encouraged to openly discuss the employee's desire for a transfer with the employee.

Management reserves the right to place an employee in whatever job it deems useful or necessary. All job transfers, reassignments, promotions, or lateral transfers are at the discretion of the Community Health Plan of Imperial Valley.

EMPLOYMENT OF RELATIVES

The Community Health Plan of Imperial Valley does not have a general prohibition against hiring relatives. However, an employee will not be hired, transferred, or promoted into a position where they will be managed, directly or indirectly, by a family member or romantic partner. This includes family members of staff and LHA Commission. Other factors may also be considered when hiring a relative or romantic partner of a current employee, placing them in a particular position, or creating reporting relationships. The Community Health Plan of Imperial Valley may transfer an employee or otherwise change their employment status at any time for any reason, including to avoid the appearance of favoritism or other conflict of interest. Refer to our Conflict-of-Interest policy for more information.

CONDUCT AND BEHAVIOR

BEHAVIORAL EXPECTATIONS

Employees are expected to always exercise common sense and courtesy, for the benefit of clients, co-workers, and the Community Health Plan of Imperial Valley as a whole. Professionalism is expected, as is respect for the safety and security of people and property.

All CHPIV employees are expected to maintain ethical conduct and avoid conflicts of interest in accordance with the organization's core values. At a minimum, employees are expected to demonstrate the below-listed qualities at all times. Failure to meet these expectations may be grounds for discipline, up to and including termination.

Effective Communication:

- It is vital to communicate in a clear and respectful manner.
- It is imperative for professionals to engage in active listening, effectively communicate, and modify their manner of looking at diverse audiences.
- Empathy, active listening, and constructive criticism all contribute to the development of healthy relationships and teams.

Personal Accountability:

- Professionals are expected to effectively manage their time, adhere to deadlines, and assume responsibility for their assigned duties.
- Demonstrating accountability for one's actions and outcomes instills confidence and dedication.

Collaboration and Teamwork:

- Effective teamwork is critical.
- Professionals ought to engage in cross-team collaboration, contribute to the collective success, and exchange knowledge.
- A collaborative mindset results in improved outcomes and novel solutions.

Continuous Learning and Adaptability:

- The professional environment is undergoing accelerated change.
- Professionals ought to be adaptable, continually educate themselves, and embrace change.
- Growth mindsets foster qualities such as adaptability and resilience.

Affection and Competence in Appearance and Conduct:

- Adopt appropriate attire for the job site.
- Strive to uphold a professional demeanor.
- Demonstrate esteem for superiors, clients, and colleagues. Avoid using offensive language and unprofessional conduct.

Emotional Intelligence and Conflict Resolution:

- Conflicts are inevitable. Disagreements should be addressed constructively, win-win solutions should be sought, and emotions should be managed.
- Emotional intelligence facilitates healthy relationships and the ability to navigate difficult situations.

A Dedication to Inclusion and Diversity:

- It is imperative that professionals uphold the value of diversity, ensure that all individuals are treated with respect, and establish an environment that fosters inclusivity.
- The incorporation of diverse viewpoints into an organization fosters innovation and success.

STANDARDS OF CONDUCT

While it is impossible to list everything that could be considered misconduct in the workplace, what is outlined here is a list of examples of inappropriate conduct. Engaging in these behaviors may lead to discipline, up to and including termination.

Examples of misconduct include:

- Violation of the policies and procedures set forth in this handbook.
- Possessing, using, distributing, selling, or negotiating the sale of illegal drugs or other controlled substances.
- Being under the influence of alcohol or drugs during work hours, or on organization business.
- Inaccurate reporting of hours worked by you or any other employees.
- Providing knowingly inaccurate, incomplete, or misleading information when speaking on behalf of the organization or in the preparation of any employment-related documents including, but not limited to, job applications, personnel files, employment review documents, intra-organization communications, or expense records.
- Taking or destroying organizational property.
- Fighting with, or harassment of (as defined in our EEO policy), any fellow employee, vendor, or customer.
- Disclosure of organization trade secrets and proprietary and confidential commercially sensitive information (i.e., financial or sales records/reports, marketing or business strategies/plans, product development information, customer lists, patents, trademarks, etc.) of the organization or its members, contractors, suppliers, or vendors.
- Refusal or failure to follow directions or to perform a requested or required job task.
- Refusal or failure to follow safety rules and procedures.
- Excessive tardiness or absences.
- Working unauthorized overtime.
- Solicitation of fellow employees on organization premises during working hours.
- Use of obscene or harassing (as defined by our EEO policy) language in the workplace.
- Engaging in outside employment that interferes with your ability to perform your job at this organization or that is a conflict of interest to the organization.
- Engagement in criminal activity or criminal conviction.

SEXUAL AND OTHER UNLAWFUL HARASSMENT

The Community Health Plan of Imperial Valley is committed to providing a work environment free of harassment in any form, including inappropriate and disrespectful behavior, intimidation, and other unwelcome conduct directed at an individual because of their inclusion in a protected class. Applicable federal and state law defines harassment as unwelcome behavior based on someone's inclusion in a protected class.

Sometimes language or actions that were not expected to be offensive or unwelcome are, so employees should err on the side of being more sensitive to the feelings of their co-workers rather than less.

The following are examples of harassment; behaviors not in this list may also be considered harassment:

- Unwanted sexual advances.
- Offering employment benefits in exchange for sexual favors.
- Retaliation or threats of retaliation for refusing advances or requests for favors.
- Leering, making sexual gestures or jokes, or commenting on an employee's body.
- Displaying sexually suggestive content.
- Displaying or sharing derogatory posters, photographs, or drawings.
- Making derogatory epithets, or slurs.
- Ongoing teasing about an employee's religious or cultural practices.
- Ongoing teasing about an employee's sex, sexual orientation, or gender identity.
- Physical conduct such as touching, assault, or impeding or blocking movements.

Sexual harassment on the job is unlawful whether it involves coworker harassment, harassment by a manager, or harassment by persons doing business with or for the Community Health Plan of Imperial Valley, such as clients, customers, or vendors.

Retaliation

Any form of retaliation against someone who has expressed concern about any form of harassment, refused to partake in harassing behavior, made a harassment complaint, or cooperated in a harassment investigation, is strictly prohibited. A complaint made in good faith will under no circumstances be grounds for disciplinary action. Individuals who make complaints that they know to be false may be subject to disciplinary action, up to and including termination.

Enforcement

All managers and supervisors are responsible for:

- Implementing the Community Health Plan of Imperial Valley's harassment policy.
- Ensuring that all employees they supervise have knowledge of and understand the Community Health Plan of Imperial Valley policy.
- Reporting any complaints of misconduct to the designated Community Health Plan of Imperial Valley representative, the Office & Human Resources Manager, so they may be investigated and resolved internally.
- Taking and/or assisting in prompt and appropriate corrective action when necessary to ensure compliance with the policy; and
- Conducting themselves in a manner consistent with the policy.

Addressing Issues Informally

Employees who witness offensive behavior in the workplace - whether directed at them or another employee - are encouraged, though not required, to immediately address it with the employee whose behavior they found offensive. An employee who is informed that their behavior is or was offensive should stop immediately and refrain from that behavior in the future, regardless of whether they agree that the behavior could have been offensive.

Harassment Complaint Procedure

Employees are encouraged to use the Complaint Procedure to report behavior that they feel is harassing, whether that behavior is directed at them or not. The Complaint Procedure provides for immediate, thorough, and objective investigation of claims of harassment. Appropriate disciplinary action will be taken against those who are determined to have engaged in harassing behavior.

ABUSIVE CONDUCT

Abusive conduct means malicious conduct in the workplace that a reasonable person would find hostile or offensive and unrelated to an employer's legitimate business interests. Abusive conduct may include repeated infliction of verbal abuse, such as the use of derogatory remarks, insults, and epithets, verbal, or physical conduct that a reasonable person would find threatening, intimidating, or humiliating, or the sabotage or undermining of a person's work performance. A single act will generally not constitute abusive conduct, unless especially severe.

The Community Health Plan of Imperial Valley considers abusive conduct in the workplace unacceptable and will not tolerate it under any circumstances. Employees should report abusive conduct to a manager or Human Resources. Managers are responsible for ensuring that employees are not subjected to abusive conduct. All reports will be treated seriously and investigated when appropriate. Employees who are found to have engaged in abusive conduct will be subject to discipline, up to and potentially including termination. Retaliation against an employee who reports abusive conduct or verifies that it took place is strictly prohibited.

COMPLAINT PROCEDURE

The Community Health Plan of Imperial Valley has established a procedure for a fair review of complaints related to any workplace controversy, conflict, or harassment. Employees may take their complaint directly to the person or department listed in Step 2 if the complaint is related to their supervisor or manager or if the employee feels the supervisor or manager would not provide an impartial resolution to the problem.

Step 1

The complaint should be submitted orally or in writing to a supervisor or manager within three working days of the incident or as soon as possible. Sooner is better, as it will assist in a more accurate investigation, but complaints will be taken seriously regardless of when they are reported. Generally, a meeting will be held within three business days of the employee's request, depending upon scheduling availability.

Attempts will be made to resolve the issue during the meeting, but regardless of whether there is an immediate resolution, the supervisor or manager will give the employee a written summary of the meeting within three business days. Resolution may take longer if further investigation of the complaint is required. If the employee is not satisfied with the resolution, they may proceed to Step 2.

Step 2

The employee may submit an oral or written request for review of the complaint and Step 1 resolution to the Human Resources Department or a designated investigator. This request should be made within three working days following the receipt of the Step 1 resolution. The Human Resources Department or the designated investigator will review the complaint and resolution and may call an additional meeting to explore the problem. If warranted, additional fact-finding will be undertaken. A final decision will be as soon as practicable, thereafter receiving the Step 2 request, and a written summary of the resolution will be provided to the employee who filed the complaint.

EXTERNAL EEO COMPLAINTS

In addition to the organization's internal complaint procedure, employees may also contact either the Equal Employment Opportunity Commission (EEOC) or the California Civil Rights Department (CRD) to report unlawful harassment. You must file a complaint with the CRD within three years of the alleged unlawful action. The EEOC and the CRD serve as neutral factfinders and will attempt to assist the parties to voluntarily resolve their disputes. For more information, contact the nearest EEOC or CRD office.

CORRECTIVE ACTION

A high level of job performance and professionalism is expected from each employee. If an employee's job performance does not meet the standards established for the position, they violate Community Health Plan of Imperial Valley's policies or procedures, or their behavior is otherwise unacceptable, corrective action may ensue. Corrective action may include, but is not limited to: coaching, oral or written warnings, performance improvement plans, paid or unpaid suspension, demotion, and termination. The type and order of actions taken will be at management's sole discretion and the Community Health Plan of Imperial Valley is not required to take any disciplinary action before making an adverse employment decision, including termination.

COMPENSATION

PAY PERIODS

The standard seven-day payroll workweek for the Community Health Plan of Imperial Valley will begin at 12:00 a.m. Sunday. The designated pay period for all employees is bi-weekly. Paydays are bi-weekly on Friday. Except as otherwise provided, if any date of paycheck distribution falls on a weekend or holiday, employees will be paid on the preceding scheduled workday.

TIMEKEEPING

All non-exempt employees are required to use the timekeeping system to record their hours worked. For the purposes of this policy, all forms of timekeeping will be referred to as clocking in or out.

Employees should clock in no sooner than two minutes before their scheduled shift and clock out no later than two minutes after their scheduled shift. Additionally, employees are required to clock in and out for their designated lunch periods. Each hourly employee is required to take their meal break before the end of their 6th hour working. Lunch periods are unpaid when employees are relieved of all duties. Employees are entitled to uninterrupted meal breaks. Non-exempt employees are required to clock-out and clock-in at their lunchtimes.

Accurate timekeeping is a federal and state wage and hour requirement, and employees are required to comply. Failing to enter time into the timekeeping system in an accurate and timely manner is unacceptable job performance. Employees are required to record ALL time they are working on Plan business. Failure to do so could result in disciplinary action. Employees may not ask another employee to clock in or out for them. Should an employee miss an entry into the timekeeping system, they must notify their manager as soon as possible for correction.

Non-exempt employees are not permitted to work unscheduled times without prior authorization from their manager. This includes clocking in early or late.

Hourly employees are responsible for taking and attesting their paid 10-minute breaks. The break form is to be completed and submitted at the beginning of each pay period. These breaks are to be taken first at 10:00 am and then again at 3:30 PM.

OVERTIME

The Community Health Plan of Imperial Valley complies with all applicable federal laws regarding payment of overtime work. Non-exempt employees will be paid overtime (one and one-half times the regular rate of pay) for all hours worked over eight in one workday, over 40 in one work week.

If the Community Health Plan of Imperial Valley approves an employee's request to make up work time, the hours of that makeup work performed in the same week that

the work was lost do not count towards computing the total number of hours worked in a day.

Employees are required to work overtime when assigned. Any overtime worked must be authorized by a supervisor or manager, in advance. Working unauthorized overtime or the refusal or unavailability to work overtime is unacceptable work performance, subject to discipline including but not limited to termination.

PAYROLL DEDUCTIONS

The Community Health Plan of Imperial Valley complies with the salary basis requirements of the Fair Labor Standards Act (FLSA) and does not make improper deductions from the salaries of exempt employees. There are, however, certain circumstances where deductions from the salaries of exempt employees are permissible. Such circumstances include:

- When an exempt employee is absent from work for one or more full days for personal reasons other than sickness or disability
- When an exempt employee is absent for one or more full days due to sickness or disability if the deduction is made in accordance with a bona fide sick leave plan that provides compensation for salary lost due to illness.
- To offset amounts received as witness or jury fees, or for military pay.
- When an employee is on unpaid leave under the Family Medical Leave Act
- During an employee's first and last week of employment, if they work less than a full week.

If an employee believes that an improper deduction has been made, they should immediately report this to their manager or the person responsible for payroll processing. Reports will be promptly investigated and if it is determined that an improper deduction has occurred, the employee will be promptly reimbursed.

PAY ADJUSTMENTS, PROMOTIONS AND DEMOTIONS

All pay increases are based upon merit, market factors, and the profitability of the Community Health Plan of Imperial Valley. Any pay increases that are granted will be made in the 1st quarter of the new year. There is not an automatic annual cost of living or salary adjustment. Salary decreases may take place when there is job restructuring, job duty changes, job transfers, or adverse business economic conditions. Demotion is a reduction in responsibility, usually accompanied by a reduction in salary. If demotion occurs, employees will maintain their seniority with the Community Health Plan of Imperial Valley.

PERFORMANCE EVALUATION

Performance reviews are scheduled to take place at the end of the year. This evaluation may be either written or oral.

If the employee receives an evaluation sheet or other written document, they will be required to sign it. An employee's signature does not necessarily indicate that the

employee agrees with all the comments, but that they have been given the opportunity to examine the evaluation and discuss it with their manager. The completed and signed evaluation form will be placed in the employee's personnel file and the employee will receive a copy of the performance evaluation.

In addition to performance evaluations, informal counseling sessions may be conducted from time to time.

WORK ASSIGNMENTS

On occasion employees may be required to perform duties that are not part of their job description or usual tasks. This may happen because a co-worker is absent, a position is temporarily vacant, the business or department is particularly busy, or for other reasons. Employees are expected to perform these additional duties in a timely fashion and to the best of their ability. Should questions about process or procedure arise, employees should speak with their manager. Unless informed otherwise, employees will be paid at their regular rate of pay.

EXPENSE REIMBURSEMENT

The Community Health Plan of Imperial Valley will cover all reasonable, business-related expenses. Any cost that does not fall within the guidelines below must be approved by the appropriate manager *before* the expense is incurred. Employees may not be reimbursed for expenses that were not approved in advance and are deemed unnecessary or extravagant.

The following types of expenses may be reimbursable under this policy:

- Lodging
- Travel expenses including airfare, reasonable airline luggage fees, train fare, bus, taxi, and related tips.
- Meals, including tips up to 20%
- Laundry and dry-cleaning expenses during trips in excess of five days
- Car rental, parking fees, and tolls
- Mileage on a personal vehicle at the current IRS reimbursement rate
- Conference and convention fees
- Business entertainment expenses, up to pre-approved limits

Reimbursable limits on each type of expense will be found in the travel request forms in the Finance Department's policies. All travel outside of Imperial County requires your manager's approval on a completed Travel Request Form.

The following expenses are examples of expenses not reimbursable under this policy:

- Airline club dues
- Traffic fines
- Tips more than 20%
- In-flight movies, mini-bar expenses, and other forms of personal entertainment

- First-class airfare
- Alcohol Drinks

No policy can anticipate every situation that might give rise to legitimate business expenses. Reasonable and necessary expenses not listed above may be reimbursable. When prior approval is required, managers should use their best judgment to determine if an unlisted expense is reimbursable under this policy.

Credit Cards

Community Health Plan of Imperial Valley issued credit cards are to be used for purchases on behalf of the Plan and for any travel expenses incurred while traveling on Community Health Plan of Imperial Valley business only. At no time may an employee use a Plan credit card for purchases intended for personal use; such expenses will require that the Plan be reimbursed and may lead to revocation of credit card privileges and other discipline. Credit card expenses require the same reimbursement documentation as other expenses.

Documentation

Requests for reimbursement of business expenses must be submitted on the Expense Reimbursement Form. These forms are available through deluxe. To comply with IRS regulations, all business expenses be supported with adequate records. Employees are responsible for keeping these records as expenses are incurred. These records must include:

- The amount of the expenditure
- The time and place of the expenditure
- The business purpose of the expenditure
- The names and the business relationships of individuals for whom the expenditures were made.

Requests for reimbursement lacking this information will not be processed and will be returned to the employee. While original receipts are preferred for all expenses, they are required for those greater than \$25.00. Requests for exceptions to this policy should explain why the exception is necessary and be approved by management.

Approvals

Expense reimbursement forms, together with required documentation, and the approved Travel Request Form must be submitted to the employee's manager for review and approval. Once the expense reimbursement has been approved, it should be submitted for processing no more than 30 days after the expenses occurred. Managers approving expense reports are responsible for ensuring that the expense report has been filled out correctly with the required documentation and that the expenses submitted are allowable under this policy.

ADVANCES AND LOANS

The Community Health Plan of Imperial Valley does not give advances or loans to employees.

BENEFITS**HOLIDAYS**

Regular full-time employees are entitled to the following paid holidays observed by The Community Health Plan of Imperial Valley:

- New Year's Day
- Martin Luther King Jr. Day
- President's Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving
- Friday after Thanksgiving
- Christmas Day

Other days or parts of days may be designated as holidays with or without pay. No holiday pay will be paid to an employee who is on an unpaid status. If a holiday falls on a Sunday, the holiday may be observed on the following Monday. If the holiday falls on a Saturday, the holiday may be observed on the preceding Friday.

VACATION

Vacations provide a break beneficial to both the Community Health Plan of Imperial Valley and employees. Vacation time is available to all employees after their 90th day of employment. Therefore, employees are encouraged to take vacations annually. Eligible employees include:

- Full-time exempt
- Full Time Non Exempt

Employees Vacation Accrual is as follows:

Vacation	Executive	Directors	Managers	Individual Contributors
Year 1-3	17	12	10	10
Year 4 and 5	18	13	11	10
Year 6 and 7	19	14	12	11
Year 8 and 9	20	15	13	12
Year 10+	22	17	15	12

Unused vacation will be carried over each year with a maximum accrual bank of twice the amount allowed to accrual annually. For example, someone who accrues 12 days of vacation a year, can have a max accrual bank of 192 hours. Unused vacation will be paid out upon employment separation.

Vacations are to be requested through your manager/supervisor with 30 days advance notice prior to days out of the office. Employees are responsible for submitting time-off requests and hours used for vacation or sick-leave through Rippling.

SICK LEAVE

Each employee is entitled to 5 days (40 hours) of paid time off immediately after the date of hire. Sick time does not accrue and is on a use it or lose it basis. If employees have no more sick time left, they may use their vacation time or choose to take unpaid time off.

Sick leave may be used for diagnosis, care, or treatment of an existing health condition of, or preventive care for, an employee or an employee's family member, or by an employee who is a victim of domestic violence, sexual assault, stalking, or other crime in order to obtain a temporary restraining order or other court assistance to help ensure the health safety or welfare of the employee or their child; or (2) obtain medical attention or psychological counseling, services from a shelter, program or crisis center, or (3) participate in safety planning or other actions to increase safety. Unused sick leave will not be compensated for at the end of employment. Employees rehired within one year of separation will have their previously accrued sick leave restored.

Employees are responsible for advising their manager no later than 1 hour before the start of their shift when calling out sick.

Employees are encouraged to stay home when sick. This is to protect the health and safety of other employees.

The Plan requires employees to use paid sick leave under this policy in minimum increments of two hours.

HEALTH AND WELFARE BENEFITS

The Community Health Plan of Imperial Valley complies with all applicable federal and state laws with regard to benefits administration. All regular employees scheduled and generally working at least 40 hours a week are entitled to health insurance and other plan-sponsored health benefits, when in effect. The Community Health Plan of Imperial Valley reserves the right to change or terminate health plans or other benefits at any time.

New qualifying employees will be eligible for coverage on the 1st of the month after the employee starts. New employees may elect not to be covered, with the permission of The Community Health Plan of Imperial Valley provided the percentage of employees not covered is within the benefit plan specifications.

CONTINUATION OF BENEFITS

Under the federal Consolidated Omnibus Budget Reconciliation Act (COBRA), or a state mini-COBRA law, employees may be allowed to continue their health insurance benefits, at their own expense, for a set number of months after experiencing a qualifying event. Length of coverage may be dependent upon the qualifying event. (defined by COBRA regulations?)

To qualify for continuation of health benefits, the covered individual must experience a qualifying event that would otherwise cause them to lose group health coverage. The following are qualifying events:

For Employees

- Voluntary or involuntary termination of employment for reasons other than gross misconduct
- Reduction in number of hours worked.

For Spouses

- Loss of coverage by the employee because of one of the qualifying events listed above.
- Covered employees become eligible for Medicare.
- Divorce or legal separation of the covered employee
- Death of the covered employee

For Dependent Children

- Loss of coverage because of any of the qualifying events listed for spouses.
- Loss of status as a dependent child under the plan rules

See Human Resources for additional information.

STATE DISABILITY INSURANCE

The State of California has a partial wage-replacement insurance plan for California workers. The cost of this insurance is fully paid by the employee through payroll deductions. The SDI program includes both Disability Insurance and Paid Family Leave.

Disability Insurance (DI)

Employees who lose wages when an illness, injury or pregnancy-related disability prevents them from working and who meet all the state eligibility requirements can collect disability insurance benefits.

The benefits are calculated as a percentage of employee salary up to a weekly maximum as specified by law, for up to 52 weeks.

Employees are responsible for filing their claim and other forms promptly and accurately with the Employment Development Department. A claim form may be obtained from the Employment Development Department online, by telephone, or in person.

Paid Family Leave (PFL)

Employees may be eligible for partial wage replacement benefits under the Paid Family Leave Act for up to a maximum of eight weeks for the following reasons:

- To bond with a new child after birth or placement for adoption or foster care
- To care for a serious health condition of an employee's child, parent, parent-in-law, grandparent, grandchild, sibling, spouse, or registered domestic partner
- To participate in a qualifying event related to a family member's deployment to a foreign country.

The Paid Family Leave Act provides benefits based on past earnings. The cost of the insurance is fully paid by the employee. The 12-month period begins on the first day an employee submits a claim.

To be eligible for benefits, employees may be required to provide medical and/or other information that supports a claim for time off to bond with a new child or to care for a family member with a serious health condition.

The employee is responsible for filing their claim for family leave insurance benefits and other forms promptly and accurately with the Employment Development Department. A claim form may be obtained from the Employment Development Department by telephone, letter, the Internet or in person. All eligibility and benefit determinations are made by the Employment Development Department.

Employees may not be eligible for Paid Family Leave benefits if they are receiving Disability Insurance, Unemployment Compensation Insurance or Workers' Compensation benefits.

The Paid Family Leave Act does not provide a right to leave, job protection or return to work rights. Further, this policy does not provide additional time off; rather, family leave insurance may provide compensation during an approved leave pursuant to any employer-provided leave.

TEMPORARY DISABILITY LEAVE

The Community Health Plan of Imperial Valley recognizes that a temporary disability may prevent employees from coming to work for a period of time. In such cases, the Community Health Plan of Imperial Valley may grant temporary disability leave. This leave does not have a minimum or maximum time frame. Rather, the Community Health Plan of Imperial Valley will attempt to reasonably accommodate the needs of the employee as well as the needs of the Community Health Plan of Imperial Valley. If leave is granted, any extensions will be subject to the same considerations.

Employees requesting temporary disability leave must document their request in writing. That request should be accompanied by a doctor's statement identifying how the temporary disability limits the employee's ability to work, the date and the estimated date of return and, where appropriate, diagnosis and prognosis. Should the employee's expected return date change, the employee should notify the Community Health Plan of Imperial Valley as soon as possible. Prior to returning to employment with the Community Health Plan of Imperial Valley, employees will be required to submit written medical certification of their ability to work, including any restrictions. Upon returning to work, if employees qualify, they will be reinstated to their former position or one that is substantially the same, depending upon the availability of any position at that time.

The leave will be unpaid, except that employees must use any available paid sick leave concurrently and may choose to use other accrued paid time off concurrently once their sick leave has been exhausted.

MILITARY LEAVE

If employees are on an extended military leave of absence, they are entitled to be restored to their previously held position or similar position, if available, without loss of any rights, privileges or benefits provided the employee meets the requirements specified in the Uniformed Services Employment and Reemployment Rights Act (USERRA).

VOLUNTEER EMERGENCY RESPONDER LEAVE

Employees who are volunteer firefighters, reserve peace officers, or emergency rescue personnel will be allowed to take temporary unpaid leaves of absence for the purpose of performing emergency duties. Employees who are volunteer emergency responders should inform their supervisor so that they are aware that the employee may need to take time off for emergency duty. When an employee is called to an emergency and

needs to miss work, they should alert their supervisor before doing so whenever possible. Whether or not such leave is paid shall depend on federal and state law.

JURY SERVICE LEAVE

If an employee is summoned to report for jury duty, they will be granted a leave of absence when they notify and submit a copy of the original summons for jury duty to their supervisor or manager. The Community Health Plan of Imperial Valley reserves the right to request that they seek to be excused from or request postponement of jury service if the absence from work would create a hardship to the Community Health Plan of Imperial Valley

Any fees received for jury duty, including travel fees, are to be submitted to the Community Health Plan of Imperial Valley in exchange for paid leave provided by Community Health Plan of Imperial Valley. Employees are to report to work on any day, or portion thereof that is not actually spent in the performance of jury service. For each week of jury duty, a certificate of jury service must be certified by the Court and filed with the Community Health Plan of Imperial Valley no later than Wednesday of the following week. The leave is paid.

WITNESS LEAVE

If an employee is absent from work to serve as a witness in a judicial proceeding in which they are the victim, or in response to a subpoena or other order of the court, the employee will be granted leave without pay for such time as it is necessary to comply with the request. The Community Health Plan of Imperial Valley may request proof of the need for leave.

VOTING LEAVE

If an employee cannot vote because of their scheduled work hours, then the employee will be given additional time off to vote in any state or federal election.

Employees must apply for leave at least two days before Election Day. The Community Health Plan of Imperial Valley may specify the time during the day that leave can be taken. Generally, time off will be at the beginning or end of their shift, whichever allows the freest time for voting and the least time off from the regular working shift, unless otherwise mutually agreed upon.

Up to two hours will be compensated for at the employee's regular rate of pay. Additional time off, if necessary, will be unpaid. Exempt employees will be paid in accordance with the Fair Labor Standards Act.

CRIME VICTIM LEAVE AND ACCOMMODATIONS

An employee who is the victim of crime or abuse, or whose family member has died as a result of a crime, will be allowed to take time off work to attend court proceedings or to seek a restraining order or other relief for their or their child's health, safety, or welfare. Information regarding these rights and reporting requirements can be found [here](#).

Employees who may potentially have a need for this leave should discuss the situation with their manager or Human Resources.

SCHOOL LEAVE FOR DISCIPLINARY MATTERS

The Community Health Plan of Imperial Valley will grant unpaid time off for employees who are parents or guardians of school-age children who need time off to attend to school issues. More information about this leave can be found [here](#).

The employee must use available vacation or personal leave for school visitation and must take leave without pay if no paid leave is available. Exempt employees may be provided time off with pay when necessary to comply with state and federal wage and hour laws.

BEREAVEMENT LEAVE

A regular employee of the Community Health Plan of Imperial Valley may request a leave of absence with pay for a maximum of 3 Days working day(s) upon the death of a member of their immediate family. Employees will be offered up to 5 days total, 3 days paid, 2 days unpaid of Bereavement Leave (employees may use accrued paid time off for this portion of the bereavement leave). Members of the immediate family are defined as parents, spouse, domestic partner, child, sibling, grandchild, grandparent, parent-in-law, and corresponding step-relatives. Proof of the need for leave may be required.

BONE MARROW AND ORGAN DONATION LEAVE

Community Health Plan of Imperial Valley will provide employees who have been employed with the organization for at least 90 days, with a paid leave of absence for the purpose of donating organs or bone marrow. More information about this leave can be found [here](#).

REPRODUCTIVE LOSS LEAVE

A regular employee of the Community Health Plan of Imperial Valley may request a leave of absence with pay for a maximum of 5 unpaid days due to a reproductive loss, such as miscarriage, stillbirth, or failed adoption.

Days may be taken consecutively, or intermittently over the 3 months following the loss.

HEALTH, SAFETY, AND SECURITY

NON-SMOKING

California law prohibits smoking in any public building or within 20 feet of a main entrance, exit, or window of a public building. The Community Health Plan of

Imperial Valley does not permit smoking in any Community Health Plan of Imperial Valley buildings, facilities, work sites, or vehicles. Employees wishing to smoke should do so during their break times, outside Community Health Plan of Imperial Valley buildings in designated areas, and in accordance with local ordinances.

DRUG AND ALCOHOL

The Community Health Plan of Imperial Valley is dedicated to providing employees with a workplace that is free of drugs and alcohol. While on Community Health Plan of Imperial Valley premises, whether during work time or non-work time, employees are prohibited from being under the influence of drugs or alcohol. There are limited exceptions for the use of prescription drugs (not including marijuana), as long as they do not create safety issues or impair an employee's ability to do their job, and the moderate use of alcohol at Community Health Plan of Imperial Valley-sponsored or sanctioned events.

Employees are strictly prohibited from possessing illegal drugs, cannabis, or excessive quantities of prescription or over-the-counter drugs while on Community Health Plan of Imperial Valley premises, performing Community Health Plan of Imperial Valley-related duties, or operating any Community Health Plan of Imperial Valley equipment. Any drugs confiscated that are suspected of being illegal will be turned over to the appropriate law enforcement.

Employees taking medication should consult a medical professional to determine whether the drug may affect their personal safety or ability to perform their job and should advise their manager of any resulting job limitations. Once notified, the Community Health Plan of Imperial Valley will make reasonable efforts to accommodate the limitation.

The Community Health Plan of Imperial Valley reserves the right to test any employee for the use of illegal drugs, marijuana, or alcohol, in accordance with applicable law. Employees in safety-sensitive positions may be subject to regular or random drug testing. Drug or alcohol tests may also be conducted after an accident in which drugs or alcohol could reasonably be involved, or when behavior or impairment on the job creates reasonable suspicion of use. Under those circumstances, the employee may be driven to a certified lab for testing at the Community Health Plan of Imperial Valley's expense. Refusal to be tested for drugs or alcohol will be treated the same as a positive test result.

Violation of this policy may result in discipline, up to and including termination.

To the extent that any federal, state, or local law or regulation limits or prohibits the application of any provision of this policy, then that particular provision will be ineffective in that jurisdiction only, while the remainder of the policy remains in effect.

EMPLOYER-SPONSORED SOCIAL EVENTS

Community Health Plan of Imperial Valley holds periodic social events for employees. Be advised that your attendance at these events is voluntary and does not constitute part of your work-related duties.

The organization does not provide complimentary alcoholic beverages, but alcoholic beverages may be available for purchase at these events. If you choose to drink alcoholic beverages, you must do so in a responsible manner. Do not drink and drive. Instead, please call a taxi/ rideshare or appoint a designated driver.

OFF-DUTY USE OF PROPERTY AND PREMISES

For your safety, it is organizational policy to control off-duty and nonworking hour use of facilities either for business or personal reasons. Access to facilities during off-duty or non-working hours is limited to employees who have a legitimate business reason to be on the premises.

REASONABLE ACCOMMODATIONS

If the Community Health Plan of Imperial Valley is made aware of an employee's disability and resulting need for accommodation, Human Resources or the employee's manager will engage with them in the interactive process. This process will determine what, if any, accommodation is necessary and reasonable to assist the employee in doing the essential functions of their job. Whether accommodation is reasonable will be determined based on a number of factors, including whether it will effectively assist the employee in doing the essential functions of their job, the cost, and the effect on business operations. In most cases, employees will be required to provide documentation from an appropriate healthcare provider. Human Resources will provide employees with the necessary form.

All employees are required to comply with safety standards. Employees who pose a direct threat to the health or safety of themselves or others in the workplace may be temporarily moved into another position or placed on leave until it is determined if reasonable accommodation(s) will effectively mitigate the risk.

ACCOMMODATIONS FOR PREGNANT EMPLOYEES

Community Health Plans of Imperial Valley will provide reasonable accommodation to pregnant employees for known limitations related to pregnancy, childbirth, or other related medical conditions following the federal Pregnant Workers Fairness Act (PWFA).

If you require an accommodation, notify your manager. If the need for a particular accommodation is not obvious, you may be asked to include relevant information such as:

- The reason you need an accommodation.
- A description of the proposed accommodation.

- How the accommodation will address limitations caused by pregnancy, childbirth, or related medical conditions.

The organizations will comply with state or local laws that provide additional protections beyond the PWFA.

INJURY AND ACCIDENT RESPONSE AND REPORTING

If an employee is injured or witnesses an injury at work, they must report it immediately to the nearest available manager. Employees should render any assistance requested by that manager. When any accident, injury, or illness occurs while an employee is at work, regardless of the nature or severity, the employee must complete an injury reporting form and return it to Human Resources as soon as possible. Reporting should not be allowed to delay necessary medical attention. Once the accident is reported, follow-up will be handled by Human Resources or the designated Safety Officer, including a determination as to whether the injured employee may return to work. (Do we have an “Injury Report Form”?)

Questions asked by law enforcement or fire officials making an investigative report should be answered giving only information and avoiding speculation. Liability for personal injury or property damage should never be admitted in answering an investigatory question asked by law enforcement or fire officials.

In addition to compliance with safety measures imposed by federal Occupational Safety and Health Act (OSHA) and state law, the Community Health Plan of Imperial Valley has an independent interest in making its facilities a safe and healthy place to work. The Community Health Plan of Imperial Valley recognizes that employees may be able to notice dangerous conditions and practices and therefore encourages employees to report such conditions, as well as non-functioning or hazardous equipment, to a manager immediately. Appropriate remedial measures will be taken when possible and appropriate. Employees will not be retaliated against or discriminated against for reporting accidents, injuries, or illnesses, filing of safety-related complaints, or requesting to see injury and illness logs.

WORKERS' COMPENSATION

The Community Health Plan of Imperial Valley carries insurance that covers work-related injuries and illnesses. The workers' compensation insurance carrier governs the benefits provided. These benefits will not be limited, expanded, or modified by any statements of Community Health Plan of Imperial Valley personnel or Community Health Plan of Imperial Valley documents. In the case of any discrepancy, the insurance carrier's documents will be checked.

WORKPLACE VIOLENCE AND SECURITY

The Community Health Plan of Imperial Valley expects all employees to conduct themselves in a non-threatening, non-abusive, and professional manner always. No direct, conditional, or veiled threat of harm to any employee, customer, business

partner, or Community Health Plan of Imperial Valley property will be acceptable. Acts of violence or intimidation of others will not be tolerated. Any employee who commits, or threatens to commit, a violent act against any person while on Community Health Plan of Imperial Valley premises, will be subject to discipline, up to immediate termination.

Employees share the responsibility of identifying and alleviating threatening or violent behaviors. Any employee who is subjected to or threatened with violence, or who is aware of another individual who has been subjected to or threatened with violence, should immediately report this information to a manager. Threats will be investigated, and appropriate remedial or disciplinary action will be taken.

CHPIV maintains a Workplace Violence Prevention Program. All new hires will be required to complete training on workplace violence prevention. Employees will be required to retrain on the topic annually. The organization also maintains a log of workplace violence incidents that is available for review by any employee upon request to Human Resources.

DRIVING SAFETY

Employees who drive on Community Health Plan of Imperial Valley business are expected to drive safely and responsibly and to use common sense and courtesy. Employees are also subject to the following rules and conditions:

1. All employees are responsible for submitting a valid auto-insurance policy copy to the Human Resources department, the employer may request a copy from the employee at any time.
2. A valid driver's license must be maintained as a condition of continued employment for positions that require driving. The Community Health Plan of Imperial Valley may request to see an employee's license at any time.
3. Employees may not use a Community Health Plan of Imperial Valley vehicle without express authorization from management.
4. If Community Health Plan of Imperial Valley vehicles are generally used for business, employees must receive authorization from management to use their personal vehicle instead.
5. Let's summarize the Community Health Plan of Imperial Valley insurance coverage as it applies to employee use of personal vehicles for Community Health Plan of Imperial Valley business, Employees who drive their own vehicles for work must maintain the minimum amount of insurance required by state law as a condition of continued employment. The Community Health Plan of Imperial Valley may request proof of insurance at any time.
6. Employees must always wear seat belts, whether they are the driver or a passenger.
7. Except for a phone being used only for navigation purposes, employees are required to turn off cell phones or put them on silent before starting their car.
8. Employees who are using a device for navigation purposes should complete all the set up before starting the vehicle.

9. Use of electronic devices for purposes other than navigation is strictly prohibited. This includes, but is not limited to, making, or receiving phone calls unless hand-free technology is applied, sending, or receiving text messages or e-mails, browsing the internet, reading books, and downloading information from the web. If an employee needs to engage in any of these activities while driving, they must pull over to a safe location and stop the vehicle prior to using any device.
10. Employees should not engage in other distracting activities such as eating, shaving, or putting on makeup, even in stopped or slow-moving traffic.
11. The use of alcohol, drugs, or other substances that in any way impair driving ability is prohibited. This includes, but is not limited to, over-the-counter cold or allergy medications and sleep aids that have a residual effect.
12. Employees must follow all driving laws and safety rules, such as adherence to posted speed limits and directional signs, use of turn signals, and avoidance of confrontational or offensive behavior while driving.
13. All passengers must be approved by management in advance of travel.
14. Employees must not allow anyone to ride in any part of the vehicle not specifically intended for passenger use or any seat that does not have a working seat belt.
15. Employees must promptly report any accidents to local law enforcement as well as the Community Health Plan of Imperial Valley.
16. Employees must promptly report any moving or parking violations received while driving on Community Health Plan of Imperial Valley vehicles or business.

INCLEMENT WEATHER AND OUTAGES

This policy establishes guidelines for the Community Health Plan of Imperial Valley operations during periods of extreme weather and similar emergencies. The Community Health Plan of Imperial Valley will remain open in all but the most extreme circumstances. Unless an emergency closing is announced, all employees are expected to report to work. However, the Community Health Plan of Imperial Valley does not advise employees to take unwarranted risks when traveling to work in the event of inclement weather or other emergencies. Each employee should exercise their best judgment with regard to road conditions and other safety concerns.

Designation of Emergency Closing

Only with the authorization of the CEO or designated managers will the Community Health Plan of Imperial Valley will cease operations due to emergency circumstances. If severe weather conditions develop during working hours, it is at the discretion of Management to release employees. Employees will generally be expected to remain at work until the appointed closing time.

Procedures during Closings

If weather or traveling conditions delay or prevent an employee's reporting to work, their immediate supervisor should be notified as soon as possible. If possible, such notification should be made by telephone directly with the supervisor. If direct contact is not possible, leaving a detailed voicemail message or message with another employee is acceptable.

An employee who is unable to report to work may use any accrued time off or take the day off without pay.

Pay and Leave Practices

When a partial or full-day closing is authorized by Management, the following pay and paid leave practices apply:

- Non-exempt hourly employees will be sent home for partial days with the option of using paid time off for the remainder of the day. If paid time off is not available, employees will be excused from work without pay and without disciplinary action.
- Exempt employees will be expected to continue work from home if their job duties allow. The Community Health Plan of Imperial Valley will pay the exempt employee's regular salary regardless of, as outlined in the Payroll Deductions policy.
- Exempt and non-exempt employees already scheduled to be off during emergency closings are charged such leave as was scheduled.

Other Work Options

Supervisors may approve requests for employees to temporarily work from home, if doing so allows completion of work assignments.

WORKPLACE GUIDELINES

HOURS OF WORK

Employees are expected to be at their work area and ready to work at their scheduled time. Employees will be given their work hours upon hire and at the time of any change in position. If the normal work hours are changed or if the COMMUNITY HEALTH PLAN OF IMPERIAL VALLEY changes its operating hours, employees will be given notice.

OFF-THE-CLOCK WORK

Non-exempt employees must accurately record all time worked, regardless of when and where the work is performed. Off-the-clock work (doing work that is not reported in the timekeeping system) is prohibited. No member of management may request, require, or authorize non-exempt employees to perform work without compensation. Any possible violations should be reported promptly to a member of management.

Salaried and hourly in-office staff are required to complete their responsibilities from the hours of 8:00 – 5:00 pm.

MEAL PERIODS

All employees are entitled to take a non-compensated meal period of at least 30 minutes each workday. No employee will be scheduled to work more than five consecutive hours in a workday without taking a meal period. In no case may any meal period be waived to shorten an employee's work hours or to be used in lieu of time without pay.

When the work period is 10 hours per day, a second meal period of at least 30 minutes will be provided. If the total hours worked is 12 or fewer, the second meal period may be waived by mutual consent of the Community Health Plan of Imperial Valley and the employee only if the first meal period was not waived. If the nature of the work prevents relief from all duties, then the on-duty meal period will be compensated.

All mealtimes require the non-exempt employee to clock out and back in when their meal is finished, and they've returned to work.

REST PERIODS

Employees will take a 10-minute rest period during each half of a full workday or major fraction thereof. However, a rest period need not be authorized for employees whose total daily work time is less than three and one-half hours. Any variances in rest periods are subject to advance management approval. All hourly employees are required to fill out and submit the employee break-period tracking form and submit to Human Resources Bi-weekly on the Monday before payroll.

LACTATION ACCOMMODATION

The Community Health Plan of Imperial Valley provides a supportive environment to enable breastfeeding employees to express their milk during work hours.

Accommodation under this policy includes a private place (other than a bathroom) as well as unpaid time to express milk. If a dedicated lactation space is not possible, a multi-use area will be made available, and a lactating employee will be given priority.

Employees should request lactation accommodations through their manager or Human Resources in person or by phone or email. Managers who receive requests for lactation accommodations should contact Human Resources or a member of the leadership team if they have any doubt about their ability to accommodate the request. The Community Health Plan of Imperial Valley will respond to the request either by providing the requested accommodation in full or by providing what is possible and giving the employee a written explanation as to why any other part of the request could not be granted.

When possible, employees should take their lactation breaks concurrently with their meal and rest breaks, if applicable. Employees will be paid for the duration of their standard rest breaks, and additional time will be unpaid. Exempt employee pay will not be affected by lactation break time.

Any form of discrimination or harassment related to breastfeeding is unacceptable and will not be tolerated. Employees who believe they are not being provided with accommodations as required by law may file a complaint with the Labor Commissioner.

If you feel the organization is not providing you with adequate break time and/or a place to express milk as provided for in Labor Code § 1030, you may file a report/claim with the Labor Commissioner's Bureau of Field Enforcement (BOFE) at the BOFE office nearest your place of employment. The complaint must be filed within three years of the alleged unlawful action.

ATTENDANCE AND TARDINESS

Employees are expected to be at work and ready to go when their scheduled shift begins or resumes. If an employee is unable to be at work on time, or at all, they must notify their manager no later than 30 minutes before the start of their scheduled workday. If an employee's manager is not available, the employee should contact another member of management. If an employee is physically unable to contact the Community Health Plan of Imperial Valley, they should ask another person to make contact on their behalf. Leaving a message with a co-worker or answering service is not considered proper notification. Excessive tardiness or absences are unacceptable job performance and subject to disciplinary action up to and including termination.

When an employee calls in absent, they should provide their expected time or date of return. The Community Health Plan of Imperial Valley reserves the right to request proof of the need for absence, if allowed by law. If an employee is absent for three consecutive days and has not provided proper notification, the Community Health

Plan of Imperial Valley assumes that the employee has voluntarily quit their position and will proceed with the termination process.

If an employee becomes ill during their scheduled workday and feels they may need to leave before the end of their shift, they should notify their manager immediately. If an employee is unable to perform their job to an acceptable level, they may be sent home until they are well enough to work.

Absences should be arranged as far in advance as possible. When an employee needs to be absent during the workday, they should attempt to schedule their outside appointment or obligation so that their absence has the smallest impact possible on business operations.

TELECOMMUTING

The Community Health Plan of Imperial Valley maintains a Remote Work Policy to ensure continued productivity, collaboration, and security of information regardless of work location. The policy can be found [here](#).

PERSONAL APPEARANCE AND HYGIENE

Employees are expected to present a professional image, both through behavior and appearance. Accordingly, employees must wear work-appropriate attire during the workday or any time they are representing the Community Health Plan of Imperial Valley. Clothing does not need to be expensive but should be clean and neat in appearance. Employees should consider their level of customer and public contact and the types of meetings they are scheduled to attend in determining what attire is appropriate. The Dress code for Community Health Plan of Imperial Valley is Business Casual. Community Health Plan of Imperial Valley allows and encourages Casual Fridays. Keeping in mind the following below is unacceptable on casual Fridays as well.

The following are not acceptable:

- Bare feet or flip flops
- Spandex, sweats, or work out attire.
- Sagging pants, shorts, or
- Sexually provocative clothing or exposed undergarments
- Clothing with offensive slogans or pictures
- Clothing that shows excessive wear and tear.
- Any clothing or accessories that would present a safety hazard.

All Community Health Plan of Imperial Valley employees are expected to maintain appropriate oral and bodily hygiene. Hair (including facial hair) should be clean and neat. Accessories should not interfere with an employee's work. The excessive use of perfume or cologne is unacceptable, as are odors that are disruptive or offensive to others or may exacerbate allergies.

The Human Resources Department is responsible for enforcing dress and grooming standards for their department. Any employee whose appearance does not meet these standards may be counseled. If their appearance is unduly distracting or the clothing is unsafe, the employee may be sent home to change into something more appropriate.

Reasonable accommodation will be made for employees who hold religious beliefs and disabilities when such accommodations do not cause an undue burden. Employees who would like to request accommodation or have other questions about this policy should contact the Office and Human Resources Manager.

CONFIDENTIALITY

Employees may not disclose any confidential information or trade secrets to anyone outside the Community Health Plan of Imperial Valley without the appropriate authorization. Confidential information may include internal reports, financials, client lists, methods of production, or other internal business-related communications. Trade secrets may include information regarding the development of systems, processes, products, design, instrument, formulas, and technology. Confidential information may only be disclosed or discussed with those who need the information. Conversation of a confidential nature should not be held within earshot of the public or clients.

When any inquiry is made regarding an employee, former employee, client, or customer, the inquiry should be forwarded to Human Resources without comment from the employee.

This policy is intended to always alert employees to the need for discretion and is not intended to inhibit normal business communications. In addition, nothing in this policy is intended to infringe upon employee rights under Section 7 of the National Labor Relations Act.

SOLICITATION AND DISTRIBUTION

Solicitation during work time and in work areas is prohibited. Solicitation is defined as the act of asking for something, selling something, urging someone to do something, petitioning, or distributing persuasive materials. This could include, but is not limited to, asking for donations for a child's school (including through sales of a product), attempting to convert someone to or from a religion, distributing political materials, or collecting signatures. Work time includes time when either the person soliciting, or being solicited to, is scheduled to be performing their work duties. Work areas include areas where employees generally do work, such as cubicles, offices, or conference rooms, and does not include areas such as the lunch or break room.

This policy does not prevent employees from using their approved breaks and rest periods to solicit outside of working areas and is not intended to infringe an employee's Section 7 of the National Labor Relations Act rights. Those not employed by the

Community Health Plan of Imperial Valley are always prohibited from solicitation on Community Health Plan of Imperial Valley property.

BUSINESS GIFTS

Employees are prohibited from directly or indirectly requesting or accepting a gift for themselves or the Community Health Plan of Imperial Valley that has a value of \$50 or more. If an employee is offered or given anything of value from any client, prospective client, vendor, or business partner in connection with Community Health Plan of Imperial Valley business, they should alert their manager immediately.

OUTSIDE ACTIVITIES

Employees are not allowed to engage in outside employment during non-working hours without written permission of the CEO. If written permission is granted, such outside employment would not interfere with their job performance or constitute a conflict of interest. Prior to accepting outside employment, employees should notify their Senior Leader in writing. The Senior Leader would either deny, or forward to the CEO for discussion and decision. The notice must include the name of the outside Community Health Plan of Imperial Valley, the title and nature of the position, the number of working hours per week, and the time of scheduled work hours. If the position constitutes a conflict of interest or interferes with the employee's job at any time, they may be required to limit or end their outside employment.

REPORTING IRREGULARITIES

Employees should immediately report any actual or suspected theft, fraud, embezzlement, or misuse of Community Health Plan of Imperial Valley funds or property, as well as suspicious behavior. An employee who is aware of such activity but does not report will be disciplined accordingly.

INSPECTIONS AND SEARCHES

Any items brought to or taken off Community Health Plan of Imperial Valley premises, whether property of the employee, the Community Health Plan of Imperial Valley or a third party, are subject to inspection or search unless prohibited by state law. Desks, lockers, workstations, work areas, computers, USB drives, files, e-mails, voice mails, etc. are also subject to inspection or search, as are all other assets owned or controlled by Community Health Plan of Imperial Valley. Any inspection or search conducted by the Community Health Plan of Imperial Valley may occur at any time, with or without notice. Failure to submit to a search will be grounds for discipline.

HARDWARE AND SOFTWARE USE

The following guidelines have been established for using the Internet and email in an ethical and professional manner. For this policy, Community Health Plan of Imperial Valley Internet includes productivity software, instant messaging applications, the Community Health Plan of Imperial Valley cloud and networks, the intranet, and any other tool or program provided by or through the Community Health Plan of Imperial Valley or its internet connection.

- Community Health Plan of Imperial Valley Internet and email may not be used for transmitting, retrieving, or storing any communications of a defamatory, discriminatory, harassing, or obscene nature.
- Telephones should only be used for Community Health Plan of Imperial Valley business. Employees should always be professional and conscientious when using Community Health Plan of Imperial Valley phones or when using a personal phone for Community Health Plan of Imperial Valley business.
- Use of personal cell phones or other devices should be held to a reasonable limit. Reasonableness will be determined by management.
- Disparaging, abusive, profane, and offensive language are forbidden.
- Employees must respect all copyrights and may not copy, retrieve, modify, or forward copyrighted materials, except with permission or as a single copy for reference only. Almost every piece of content is or could be copyrighted (a notice of copyright is not required), so employees should proceed with caution when using or reproducing materials.
- Unless necessary for work, employees should avoid sending or receiving large files, watching videos, mass-forwarding emails, or engaging in other activities that either consume large amounts of bandwidth or create electronic clutter.
- Employees may not download any programs, applications, browser extensions, or any other files without prior approval or upon request of a manager.
- Each employee is responsible for the content of all text, audio, or images they place on or send over the Community Health Plan of Imperial Valley's internet and email system. Employees may not send messages in which they are not identified as the sender.
- Email is not guaranteed to be private or confidential. Community Health Plan of Imperial Valley reserves the right to examine, monitor, and regulate email messages, directories, and files, as well as internet usage.
- Internal and external email messages are considered business records and may be subject to discovery in the event of litigation.

All Community Health Plan of Imperial Valley-issued hardware and software, as well as the email system and Internet connection, are Community Health Plan of Imperial Valley-owned. Therefore, all Community Health Plan of Imperial Valley policies are always in effect when they are in use. Access to the internet through the Community Health Plan of Imperial Valley's network is a privilege of employment that may be limited or revoked at any time.

SOCIAL MEDIA

The Guiding Rule

Conduct that negatively affects an employee's job performance, the job performance of fellow employees, or the Community Health Plan of Imperial Valley legitimate business interests—including its reputation and ability to make a profit—may result in disciplinary action up to and including termination.

Below are some guidelines for the use of social media. These guidelines are not intended to infringe on an employee's Section 7 of the National Labor Relations Act rights and any adverse action taken in accordance with this policy will evaluate whether employees were engaged in protected concerted activity.

Avoiding Harassment

Employees must not use statements, photographs, video, or audio that could reasonably be viewed as malicious, obscene, threatening, or intimidating toward customers, employees, or other people or organizations affiliated with the Community Health Plan of Imperial Valley. This includes, but is not limited to, posts that could contribute to a hostile work environment based on race, sex, sexual orientation, disability, religion, national origin, or any other status protected by state or federal law.

Avoiding Defamation

Employees must not post anything they know or suspect to be false about Community Health Plan of Imperial Valley or anyone associated with it, including fellow employees and clients. Writing something that is untrue and harmful to any person or organization is defamation and can lead to significant financial liability for the person who makes the statement.

Confidentiality

Employees must maintain the confidentiality of Community Health Plan of Imperial Valley trade secrets and confidential information. Trade secrets include, but are not limited to, information regarding the development of systems, products, and technology. Private and confidential information includes, but is not limited to, customer lists, financial data, and private personal information about other employees or clients that they have not given the employee permission to share.

Representation

Employees must not represent themselves as a spokesperson for the Community Health Plan of Imperial Valley unless requested to do so by management. If the Community Health Plan of Imperial Valley is a subject of the content being created—whether by an employee or third party—employees should be clear and open about the fact that they are employed with the Community Health Plan of Imperial Valley but that their views do not necessarily represent those of Community Health Plan of Imperial Valley.

Accounts

Employees must not use Community Health Plan of Imperial Valley email addresses to register for social media accounts unless doing so at the request of management. Employees who manage social media accounts on behalf of the Community Health Plan of Imperial Valley ensure that at least one member of management has all the login information needed to access the account in their absence.

PERSONAL CELL PHONE USE

The use of personal cell phones, or work cell phones for personal matters, should be held to a reasonable limit during work hours and not interfere with an employee's productivity or the productivity of their coworkers. Reasonableness will be determined by management.

PERSONAL PROPERTY

The Community Health Plan of Imperial Valley is not liable for lost, misplaced, or stolen property. Employees should take all precautions necessary to safeguard their personal possessions. Employees should not have their personal mail sent to the Community Health Plan of Imperial Valley, as it may be automatically opened, and should check with their manager before having larger items delivered to the workplace.

PARKING AND ELECTRIC VEHICLE CHARGING

The parking lot is first come first serve. All parking is at an employee's own risk. Employees and visitors should lock their vehicles and take appropriate safeguards to protect their valuables, including removing them from the vehicle if appropriate under the circumstances. Employees are not permitted to park in areas reserved for visitors.

While parked in the CHPIV parking lot, employees are not prohibited to charge their electric vehicle using electricity supplied by CHPIV.

EMPLOYMENT SEPARATION**RESIGNATION**

The Community Health Plan of Imperial Valley requests that employees provide at least two weeks' written notice of their intent to resign. This notice should be submitted to the employee's manager. Dependent upon the circumstances, an employee may be asked to not work any or all their notice period, in which case they will be allowed to use up to two weeks of accrued paid time off, if available, from the time notice is given. An exit interview may be requested. If available accrued paid time off is not available and management chooses to terminate employment prior to the end of the two-week notice period, the Community Health Plan of Imperial Valley shall compensate for the remainder of the two-week notice period provided, but not in excess of two weeks.

TERMINATION

All employment with the Community Health Plan of Imperial Valley is "at-will." This means that either the Community Health Plan of Imperial Valley or the employee may terminate the employment relationship at any time, with or without notice, and for any reason allowed by law or for no reason at all. An employee's at-will status can only be changed by written contract, signed by both the employee and the CEO or Commission Chairperson.

**PERSONAL POSSESSIONS AND RETURN OF COMMUNITY HEALTH PLAN OF
IMPERIAL VALLEY PROPERTY**

All Community Health Plan of Imperial Valley property, such as computer equipment, keys, tools, parking passes, or credit cards, must be returned immediately at the time of termination. Employees may be responsible for any lost or damaged items. When leaving, employees should ensure that they take all their personal belongings with them.

EMPLOYEE HANDBOOK ACKNOWLEDGEMENT

IMPERIAL COUNTY LOCAL HEALTH AUTHORITY DBA COMMUNITY HEALTH PLAN OF IMPERIAL VALLEY

I acknowledge receipt of the Community Health Plan of Imperial Valley Employee Handbook and agree to follow the guidelines within it. I also acknowledge the following:

1. Receipt of this handbook does not create a contract of employment or in any way alter my at-will employment status; the Community Health Plan of Imperial Valley or I can end the employment relationship at any time, with or without notice, and with or without cause.
2. I am not entitled to any sequence of disciplinary measures prior to termination.
3. Except for the at-will employment policy, this handbook may be modified at any time.
4. Violation of any policy in this handbook, or any policy included as an addendum, may be grounds for discipline, up to and including termination.
5. This handbook does not include every process, policy, and expectation applicable to employees, or my position specifically; I may be counseled, disciplined, or terminated for poor behavior or performance even if the behavior or performance issue is not addressed in the handbook.
6. Should any provision in this handbook conflict with federal, state, or local law, that provision only will be considered ineffective, while the rest of the handbook remains effective.
7. If I have questions regarding any policy in this handbook, or other expectations related to my behavior or performance, it is my responsibility to speak with my manager or the Human Resources department.

Signature

Printed Name

Date