

COMMUNITY HEALTH PLAN OF IMPERIAL VALLEY



AGENDA

Community Health Plan of Imperial Valley Commission

July 13, 2026

5:30 p.m.

512 W. Aten Rd., Imperial, CA 92251

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

Commission Role	Member	Representing	Attendance
LHA Chair	Lee Hindman	Joint Chamber of Commerce (Public Representative)	
LHA Vice-Chair	Yvonne Bell	CEO, Innercare	
LHA Commissioner	Dr. Bushra Ahmad	CMO, County of Imperial	
LHA Commissioner	Xochitl Fausto	Medi-Cal Member	
LHA Commissioner	Dr. Kathleen Lang	CEO, County of Imperial	
LHA Commissioner	Paula Llanas	Director of Social Services, County of Imperial	
LHA Commissioner	Dr. Majid Mani	Imperial County Medical Society	
LHA Commissioner	Peggy Price	Board of Supervisors, County of Imperial	
LHA Commissioner	Dr. Carlos Ramirez	CEO/Senior Consultant, DCRC	
LHA Commissioner	Dr. Unnati Sampat	President, Imperial County Medical Society	
LHA Commissioner	Pablo Velez	CEO, El Centro Regional Medical Center	
LHA Commissioner	Dr. Allan Wu	CMO, Innercare	

1. CALL TO ORDER

Lee Hindman, Chair

A. Roll Call

Donna Ponce, Commission Clerk

B. Approval of Agenda

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

2. PUBLIC COMMENT

Lee Hindman, Chair

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

3. CONSENT CALENDAR

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 6/8/2026...pg. 5-8
- B. Approval of the monthly financial reports as reviewed and accepted by the Executive 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. Product Profit & Loss Statement...pg. 13
 - 5. Product Profit & Loss Statement (YTD)...pg. 14
 - 6. Change in Net Position Trend...pg. 15
 - 7. Medicare PMPM Detail...pg. 16
 - 8. Statement of Net Position...pg. 17
 - 9. Summarized TNE Calculation...pg. 18
 - 10. Cash Transaction Report...pg. 19-21

4. ACTION

No action items.

5. COMMITTEE CHAIR REPORTS

- A. Quality Improvement Health & Equity Committee-*Quarterly*
(*Dr. Gordon Arakawa, CMO*)
- B. Finance Committee-*Monthly*
(*Dr. Carlos Ramirez, Chair*) ...pg. 9-10
- C. Regulatory Compliance & Oversight Committee-*Quarterly*
(*Dr. Allan Wu, Chair*) *No meeting*

- D. Community Advisory Committee -Quarterly
(Xochitl Fausto, Chair) ...pg. 23-24

6. INFORMATION

- A. Health Services Report (Dr. Gordon Arakawa, CMO and Jeanette Crenshaw, Executive Director of Health Services) ...pg. 26-32
- B. Compliance Report (Cynthia Mesa, Interim CCO) ...pg. 33-34
- C. Operations Report (Julia Hutchins, COO) ...pg. 35-36
- D. Human Resources Report (Shannon Long, HR Consultant) ...pg. 37
- E. CEO Report (Larry Lewis, CEO)
- F. Other new or old business (Lee Hindman, Chair)

7. CLOSED SESSION

- A. Pursuant to Welfare and Institutions Code § 14087.38 (n) Report involving Trade Secret new product discussion (estimated date of disclosure, 10/2026)
- B. Compliance

8. RECONVENE OPEN SESSION

- A. Report on actions taken in closed session.

9. ADJOURNMENT

Next meeting: August 10, 2026

Consent Agenda

COMMUNITY HEALTH PLAN OF IMPERIAL VALLEY



MINUTES

Community Health Plan of Imperial Valley Commission

June 8, 2026

5:30 p.m.

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

Commission Role	Member	Representing	Attendance
LHA Chair	Lee Hindman	Joint Chamber of Commerce (Public Representative)	Present
LHA Vice-Chair	Yvonne Bell	Chief Executive Officer, Innercare	Present
LHA Commissioner	Dr. Bushra Ahmad	Chief Medical Officer, County of Imperial	Present
LHA Commissioner	Xochitl Fausto	Medi-Cal Member	Present
LHA Commissioner	Peggy Price	Board of Supervisors, County of Imperial	Absent
LHA Commissioner	Dr. Kathleen Lang	Chief Executive Officer, County of Imperial	Absent
LHA Commissioner	Paula Llanas	Director of Social Services, County of Imperial	Absent
LHA Commissioner	Dr. Majid Mani	Imperial County Medical Society	Present
LHA Commissioner	Dr. Carlos Ramirez	Chief Executive Officer/Senior Consultant, DCRC	Present
LHA Commissioner	Dr. Unnati Sampat	President, Imperial County Medical Society	Present
LHA Commissioner	Pablo Velez	Chief Executive Officer, El Centro Regional Medical Center	Present
LHA Commissioner	Dr. Allan Wu	Chief Medical Officer, Innercare	Present

1. CALL TO ORDER

Lee Hindman, Chair

The meeting was called to order at 5:32 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

(Sampat/Ramirez) To approve 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 Committee on any matter within the Committee's jurisdiction. Any action taken as a result of public comment shall be limited to the direction of staff. When addressing the Committee, state your name for the record prior to providing your comments. Please address the Committee as a whole, through the Chairperson. Individuals will be given three (3) minutes to address the board.

No public comment.

3. CONSENT CALENDAR

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

(Ramirez/Wu) To approve the consent calendar. Motion carried.

- A. Approval of Minutes from 5/11/2026...pg. 5-8
- B. Approval of the monthly financial reports as reviewed and accepted by the Executive 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. Product Profit & Loss Statement...pg. 13
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 - 8. Statement of Net Position...pg. 17
 - 9. Summarized TNE Calculation...pg. 18
 - 10. Cash Transaction Report...pg. 19-20

4. CLOSED SESSION **(Item 4 was heard out of order following Item 8)**

Chair Hindman announced that the committee entered into closed session.

- A. Pursuant to Welfare and Institutions Code § 14087.38 (n) Report involving Trade Secret new product discussion (estimated date of disclosure, 10/2026)
- B. Compliance

5. RECONVENE OPEN SESSION

- A. Report on actions taken in closed session.

Chair Hindman announced that the committee reconvened into open session. No action taken.

6. ACTION

No action items.

7. COMMITTEE CHAIR REPORTS

- A. Quality Improvement Health & Equity Committee-Quarterly
(Dr. Gordon Arakawa, CMO) No meeting
- B. Finance Committee-Monthly
(Dr. Carlos Ramirez, Chair) ...pg. 9-10
Dr. Carlos Ramirez gave a brief summary for the June 2, 2026, Finance Committee meeting.
- C. Regulatory Compliance & Oversight Committee-Quarterly
(Dr. Allan Wu, Chair) No meeting
- D. Community Advisory Committee -Quarterly
(Julia Hutchins, COO) No meeting

8. INFORMATION

- A. Health Services Report (Dr. Gordon Arakawa, CMO and Jeanette Crenshaw, Executive Director of Health Services) ...pg. 23-40
Dr. Gordon Arakawa presented a report on System of Care for Imperial County Youth.
Jeanette Crenshaw provided a report on CHPIV D-SNP Model of Care.
- B. Compliance Report (Elysse Tarabola, CCO and Chelsea Hardy, Senior Director of Compliance) ...pg. 41-42
Cynthia Mesa, Senior Director of Delegation Oversight provided an update on 2025 DHCS Medical Audit, 2024 DHCS Medical Audit Corrective Action Plan (CAP), and DMHC Enforcement Matter-Grievance Reporting.
- C. Operations Report (Julia Hutchins, COO) ...pg. 43-44
Julia Hutchins provided an update on key metrics, including enrollment and disenrollment rates, member satisfaction, and member issues.
She also shared information regarding upcoming meetings:
 - Community Advisory Committee meeting scheduled for June 16.
 - Administrator Luncheon scheduled for July 1.Additionally, a provider mixer in collaboration with CHG is currently being planned, with the date to be determined.
Julia reported that the first joint operating committee meetings with the IPAs are being launched.

D. Human Resources Report (*Shannon Long, HR Consultant*) ...pg. 45

Shannon Long provided an update on current open positions. She reported that the team is assisting CHG with recruitment efforts for a Clinical Home Assessment Contractor position. She also shared that the Provider Network Manager position is nearing the offer stage, while the Finance Manager position remains open.

Additionally, Shannon introduced a proposed new question of the month initiative for employees.

E. CEO Report (*Larry Lewis, CEO*)

Larry Lewis reported that Chief Compliance Officer (CCO), Elysse Tarabola and Senior Director of Compliance, Chelsea Hardy, will be resigning from their positions at CHPIV. He announced that Senior Director of Delegation Oversight, Cynthia Mesa, will serve as Interim CCO.

Larry also shared that he attended the Education Collaborative in Coachella on May 13.

Additional updates included:

- The driveway sign project remains in progress. Efforts are underway to obtain a second round of competitive bids.
- Discussions have begun with Duggins Construction regarding potential building expansion opportunities to support future organizational reconfiguration and operational efficiencies.
- Ongoing discussions in Kern County are focused on the use of artificial intelligence (AI) and collaborative with social services agencies to help mitigate membership losses.
- Participation in the LHPC webinar, Medi-Cal Back to Basics.
- Continued engagement with LHPC activities and UIS funding initiatives

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

None.

9. ADJOURNMENT

Meeting was adjourned at 6:57 p.m.

Next meeting: July 13, 2026



Financial Results

May 2026

Executive Summary

May results exceeded budget expectations, driven primarily by Medi-Cal wrap services associated with DSNP members and favorable pharmacy costs. Administrative expenses were unfavorable due to Commission-approved one-time employee bonus payments. Tangible Net Equity remains well above required levels.

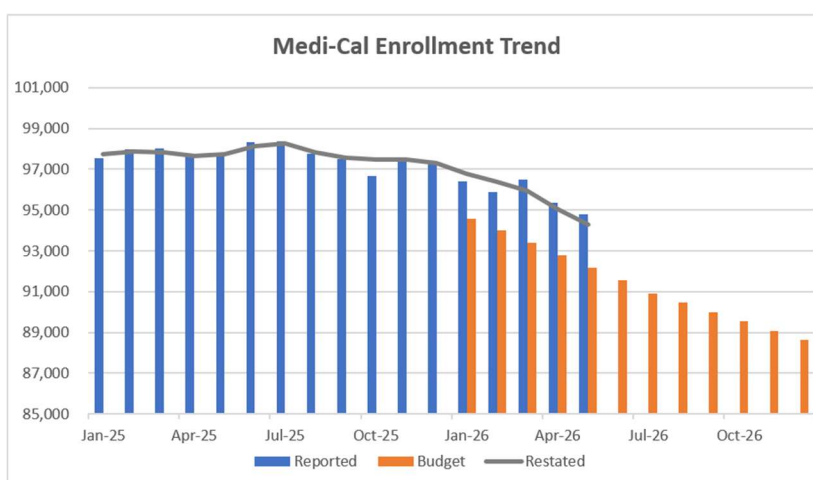
Membership

May Medi-Cal membership continued its downward trajectory, declining by 551 members to 94.8K. Despite the reduction, actual membership remains ahead of budget, which assumed a steeper decline for both May and year-to-date results.

In connection with the May payment, DHCS conducted a “Date of Death” reconciliation retroactive to January 1, 2024, accounting for approximately 15% of the membership reduction.

Preliminary enrollment reports for June suggest another significant decline, currently estimated at approximately 1,100 members. If confirmed, June would represent the second-largest monthly membership reduction to date, although membership would remain approximately 1,600 members above the June budget.

Reported Medicare membership increased by 73 members month-over-month largely due to retroactive enrollment activity; restated membership remained flat. The disenrollment rate continues to be elevated, although the adverse trend has stabilized.





Medicare

Medicare gross margin was favorable by \$294K. Within the Medicare roll-up, DSNP was favorable by \$119K, driven by favorable pharmacy costs, while Medicaid was favorable by \$175K due to a reduction in fee-for-service claims.

DSNP (Medicare Primary): Net pharmacy claims were \$138 PMPM favorable to forecast, resulting in a Part D MLR of 136%, nearly 20 percentage points favorable to forecast and consistent with the year-to-date Part D MLR.

Part C medical MLR was also favorable to forecast, contributing \$20K in favorable gross margin. On a year-to-date basis, Part C margin remains in line with forecast.

Medicaid (Secondary): Incurred claims for Medicare cost-share coverage and LTSS services remain well below forecast, resulting in a partial release of reserves.

Administrative Expenses

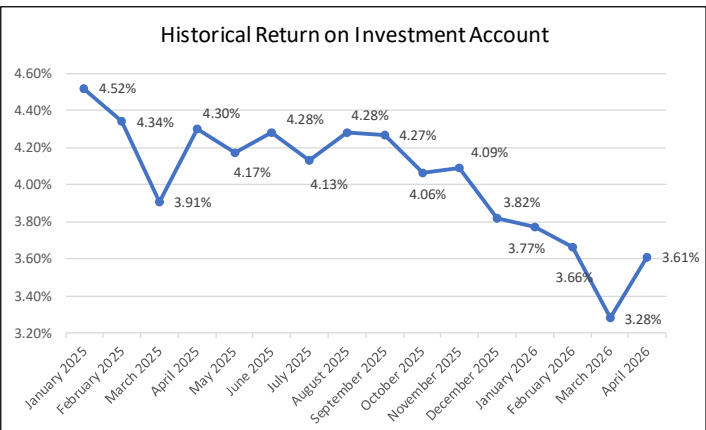
Administrative expenses were unfavorable to budget by \$67K, driven primarily by one-time employee bonuses. In addition, at the request of regulators, community reinvestment was reclassified from gross margin to administrative costs. This reclassification affects the current-month variance by \$28K and the year-to-date variance by \$116K but is neutral to net income. Excluding labor and community reinvestment, May administrative expenses were favorable by \$47K due to lower consulting costs.

No new expenditures above \$50,000 were committed in May.

Other

Investment income was unfavorable by \$23K in May. Interest rate pressure relative to budget persists despite recent rate increases.

Month	Return
January 2025	4.52%
February 2025	4.34%
March 2025	3.91%
April 2025	4.30%
May 2025	4.17%
June 2025	4.28%
July 2025	4.13%
August 2025	4.28%
September 2025	4.27%
October 2025	4.06%
November 2025	4.09%
December 2025	3.82%
January 2026	3.77%
February 2026	3.66%
March 2026	3.28%
April 2026	3.61%



Net Income

Change in Net Position was \$302K for May, which was \$259K above budget for the month. Year to date, CHPIV remains ahead of budget by \$425K.

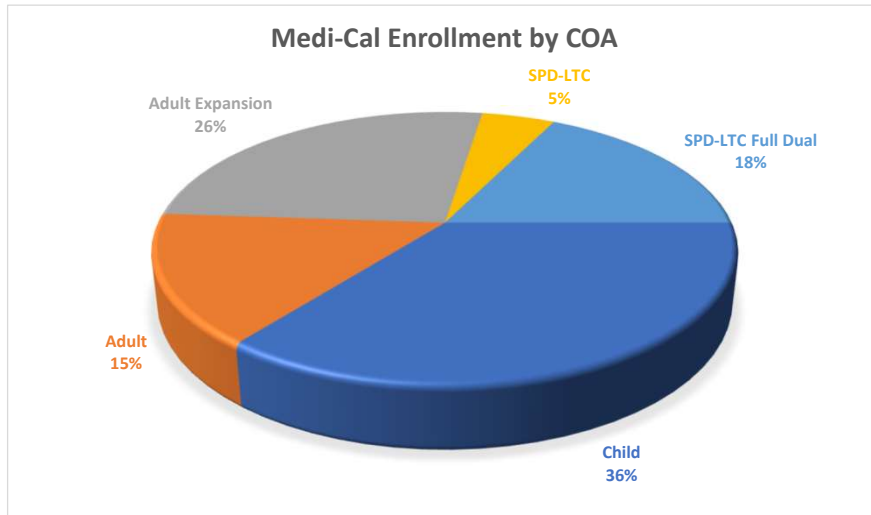
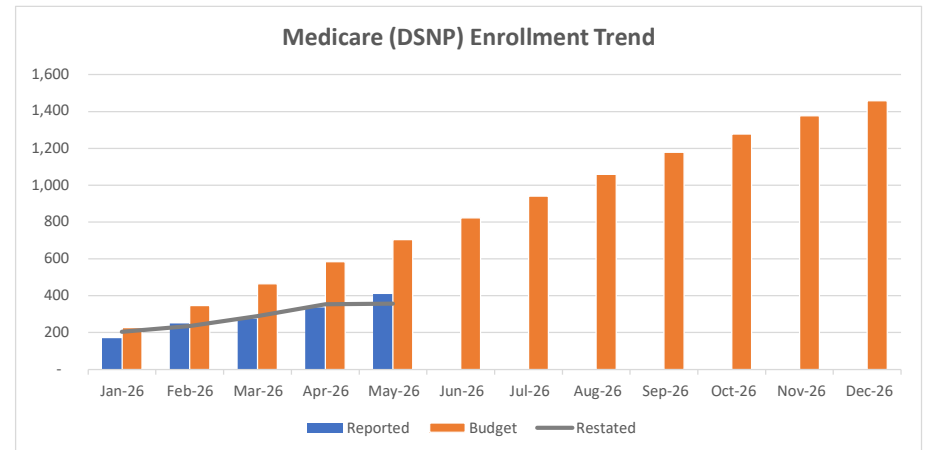
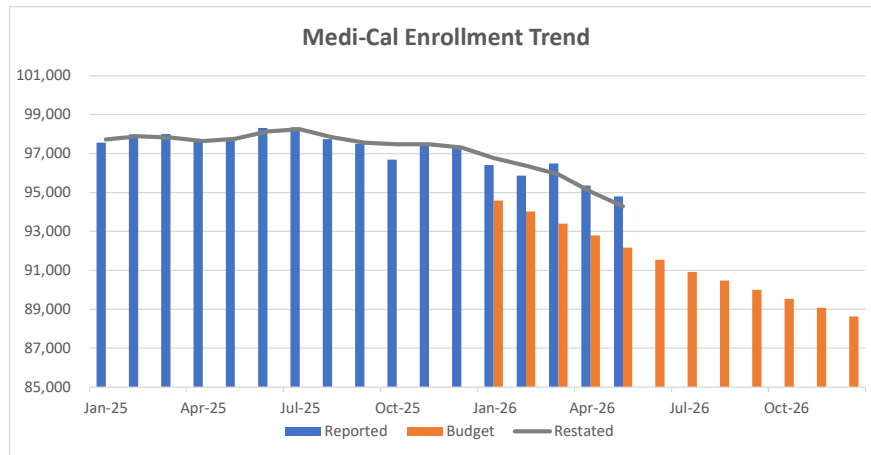
Tangible Net Equity (TNE)

At the end of May, Tangible Net Equity totaled \$24.4M, representing 494% of the required \$4.9M. On a restated basis, Tangible Net Equity was 508% of required levels.

2025

Category of Aid (COA)*										May				May (YTD)			
	Q1	Q2	Q3	Q4	Q1	April	May	Q3	Q4	Actual	Budget	B/(W)		Actual	Budget	B/(W)	
										#	%			#	%		
Child	35,139	35,129	34,728	34,555	34,434	33,968	33,826			33,826	32,387	1,439	4%	170,669	132,304	38,365	29%
Adult	15,801	15,754	15,471	15,306	14,887	14,676	14,503			14,503	14,199	304	2%	73,991	58,006	15,985	28%
Adult Expansion	25,995	26,028	25,808	25,988	25,493	25,058	24,873			24,873	23,991	882	4%	126,375	98,006	28,369	29%
SPD-LTC	4,693	4,790	4,662	4,684	4,640	4,726	4,623			4,623	4,718	(95)	-2%	23,228	18,662	4,566	24%
SPD-LTC Full Dual	16,381	16,614	16,823	16,835	17,026	16,931	16,983			16,983	17,571	(588)	-3%	84,666	69,444	15,222	22%
Total Medicaid	98,009	98,315	97,492	97,368	96,480	95,359	94,808	-	-	94,808	92,866	1,942	2%	478,929	376,422	102,507	27%
DSNP	-	-	-	-	275	337	410	-	-	410	465	(55)	-12%	1,440	1,622	(182)	-11%
Monthly/Quarterly Change		0.3%	-0.8%	-0.1%	-0.9%	-1.2%	-0.6%			-0.6%	-4.6%			-0.6%	-4.6%		
					(1,121)	(551)											

* Source: DHCS 820 Remittance summary; includes retroactivity



Medi-Cal Enrollment Trend (Restated)						
	Feb-26	Mar-26	Apr-26	May-26	MoM Δ	% Δ
SIS						
Child	33,807	33,741	33,467	33,217	(250)	-0.7%
Adult	13,972	13,829	13,638	13,470	(168)	-1.2%
Adult Expansion	24,134	24,049	23,828	23,557	(271)	-1.1%
SPD-LTC	4,384	4,360	4,306	4,297	(9)	-0.2%
SPD-LTC Full Dual	16,347	16,321	16,267	16,228	(39)	-0.2%
Total SIS	92,644	92,300	91,506	90,769	(737)	-0.8%
% of Total	96.1%	96.2%	96.3%	96.3%		
UIS						
Child	565	504	516	528	12	2.3%
Adult	1,005	971	940	929	(11)	-1.2%
Adult Expansion	1,411	1,395	1,346	1,323	(23)	-1.7%
SPD-LTC	185	180	172	174	2	1.2%
SPD-LTC Full Dual	570	579	566	558	(8)	-1.4%
Total UIS	3,736	3,629	3,540	3,512	(28)	-0.8%
% of Total	3.9%	3.8%	3.7%	3.7%		
Total	96,380	95,929	95,046	94,281	(765)	-0.8%

Community Health Plan of Imperial Valley
Statement of Revenues, Expenses, and Changes in Net Position
For May 2026

	May			May (YTD)			Current Month Explanations
	Actual	Budget	Variance - B/(W)	Actual	Budget	Variance - B/(W)	
REVENUE							
Medicaid Revenue	\$ 28,987,582	\$ 27,889,951	\$ 1,097,631	\$ 170,811,857	\$ 140,272,705	\$ 30,539,152	- Medi-Cal revenue favorable on volume and retro-maternity
Medicare Revenue	\$ 866,351	\$ 1,526,443	\$ (660,092)	\$ 3,061,029	\$ 5,066,309	\$ (2,005,279)	- Medicare revenue unfavorable largely due to volume
Investment & Interest Income	\$ 99,864	\$ 122,583	\$ (22,719)	\$ 538,664	\$ 612,177	\$ (73,513)	- Investment income unfavorable due to interest rate pressure
TOTAL REVENUE	\$ 29,953,796	\$ 29,538,977	\$ 414,819	\$ 174,411,550	\$ 145,951,190	\$ 28,460,360	
HEALTH CARE COSTS							
Global Capitation	\$ 27,975,903	\$ 26,797,845	\$ (1,178,058)	\$ 166,076,725	\$ 135,233,583	\$ (30,843,142)	- Medicaid cap (HNT) in line with revenue favorability
Shared Risk Capitation	\$ 225,379	\$ 390,256	\$ 164,878	\$ 858,286	\$ 1,306,143	\$ 447,857	
FFS Claims	\$ 284,749	\$ 887,304	\$ 602,555	\$ 1,457,206	\$ 2,825,456	\$ 1,368,250	- Favorable medical cost trend in SPD Medicaid services (LTSS)
Pharmacy (Net)	\$ 209,415	\$ 455,932	\$ 246,517	\$ 746,953	\$ 1,432,454	\$ 685,501	- Favorable Rx due to seasonality and to a lesser degree lower cost trend
All Other	\$ (10,072)	\$ 65,330	\$ 75,402	\$ 88,712	\$ 236,758	\$ 148,046	
HEALTH CARE COSTS	\$ 28,685,374	\$ 28,596,667	\$ (88,707)	\$ 169,227,882	\$ 141,034,394	\$ (28,193,489)	
Gross Margin	\$ 1,268,422	\$ 942,310	\$ 326,112	\$ 5,183,668	\$ 4,916,797	\$ 266,871	
ADMINISTRATIVE EXPENSE							
Salaries & Wages	\$ 572,900	\$ 511,069	\$ (61,831)	\$ 2,609,958	\$ 2,586,430	\$ (23,528)	
Benefits Expense	\$ 71,029	\$ 45,462	\$ (25,567)	\$ 279,766	\$ 227,241	\$ (52,526)	
Other Labor Expense	\$ 1,530	\$ 2,035	\$ 504	\$ 8,668	\$ 9,622	\$ 955	
Total Labor Costs	\$ 645,460	\$ 558,565	\$ (86,894)	\$ 2,898,393	\$ 2,823,293	\$ (75,099)	- Unfavorable due to unplanned employee bonus
Consulting, Legal, & Other Professional	\$ 21,178	\$ 71,599	\$ 50,421	\$ 243,191	\$ 499,284	\$ 256,094	- Favorable consulting in Operations and Finance
Outside Services	\$ 41,695	\$ 35,664	\$ (6,031)	\$ 237,071	\$ 214,681	\$ (22,390)	
MSO Fees	\$ 117,739	\$ 131,000	\$ 13,262	\$ 588,693	\$ 655,000	\$ 66,308	- Favorable due to unused contingency
Broker Commissions	\$ 6,422	\$ 9,790	\$ 3,368	\$ 17,323	\$ 23,429	\$ 6,107	
Advertising & Marketing	\$ 11,163	\$ 3,000	\$ (8,163)	\$ 36,690	\$ 33,000	\$ (3,690)	
Information Technology	\$ 10,028	\$ 6,825	\$ (3,203)	\$ 41,974	\$ 36,346	\$ (5,628)	
Membership and Subscriptions	\$ 13,199	\$ 11,344	\$ (1,855)	\$ 58,021	\$ 58,895	\$ 874	
Regulatory Fees	\$ 31,243	\$ 23,949	\$ (7,294)	\$ 133,325	\$ 119,745	\$ (13,579)	
Travel	\$ 3,444	\$ 8,050	\$ 4,606	\$ 22,180	\$ 54,000	\$ 31,820	
Occupancy & Facility	\$ 4,462	\$ 11,154	\$ 6,692	\$ 23,838	\$ 56,905	\$ 33,068	
Office Expense	\$ 9,676	\$ 4,979	\$ (4,697)	\$ 30,878	\$ 30,428	\$ (450)	
Other Admin	\$ 40,779	\$ 13,239	\$ (27,540)	\$ 182,231	\$ 65,555	\$ (116,676)	- Unfavorable due to reclass from healthcare costs; neutral to P/L
Total Administrative Expense	\$ 956,486	\$ 889,158	\$ (67,328)	\$ 4,513,806	\$ 4,670,562	\$ 156,757	
Non-Operating Income/(Expense)							
Rental Income	\$ 1,538	\$ 1,494	\$ (45)	\$ 7,692	\$ 7,468	\$ (224)	
Depreciation & Amortization	\$ (11,222)	\$ (11,350)	\$ 128	\$ (56,018)	\$ (56,750)	\$ 733	
Change in Net Position	\$ 302,252	\$ 43,296	\$ 258,956	\$ 621,536	\$ 196,952	\$ 424,584	
Key Metrics							
Enrollment	94,808	92,866	1,942	478,929	469,288	9,641	
Medicaid Revenue PMPM	\$ 307.08	\$ 302.62	\$ 4.46	\$ 357.73	\$ 300.39	\$ (57.34)	
Medicare Revenue PMPM	\$ 2,113.05	\$ 2,171.33	\$ (58.28)	\$ 2,125.71	\$ 2,179.06	\$ (53.34)	
MLR (Medicaid)	97.0%	97.1%	6 bps	97.5%	97.1%	(45) bps	
MLR (Medicare)	69.4%	99.0%	2,967 bps	87.3%	95.8%	854 bps	
Admin Ratio	3.2%	3.0%	(18) bps	2.6%	3.2%	61 bps	
FTEs	44	45	1	213	225	12	
Net Income PMPM	\$3.19	\$0.47	\$2.72	\$1.30	\$0.42	\$0.88	
Net Income %	1.0%	0.1%	86 bps	0.4%	0.1%	22 bps	

	Medi-Cal				Medicare				May DSNP				SPD Medicaid				Consolidated			
	Actual	Budget	Variance B/(W)	% Var	Actual	Budget	Variance B/(W)	% Var	Actual	Budget	Variance B/(W)	% Var	Actual	Budget	Variance B/(W)	% Var	Actual	Budget	Variance B/(W)	% Var
REVENUE																				
Medi-Cal																				
Premium	\$ 28,501,291	\$ 27,360,395	\$ 1,140,896	4.2%	\$ 156,641	\$ 271,295	\$ (114,654)	-42.3%	\$ -	\$ -	\$ -	N/A	\$ 156,641	\$ 271,295	\$ (114,654)	-42.3%	\$ 28,657,932	\$ 27,631,690	\$ 1,026,242	3.7%
Pass-Through	\$ 329,650	\$ 258,261	\$ 71,389	27.6%	\$ -	\$ -	\$ -	N/A	\$ -	\$ -	\$ -	N/A	\$ -	\$ -	\$ -	N/A	\$ 329,650	\$ 258,261	\$ 71,389	27.6%
Medicare																				
Part C Revenue					\$ 706,717	\$ 1,227,523	\$ (520,807)	-42.4%	\$ 706,717	\$ 1,227,523	\$ (520,807)	-42.4%	\$ -	\$ -	\$ -	N/A	\$ 706,717	\$ 1,227,523	\$ (520,807)	-42.4%
Part D Revenue					\$ 152,134	\$ 290,484	\$ (138,350)	-47.6%	\$ 152,134	\$ 290,484	\$ (138,350)	-47.6%	\$ -	\$ -	\$ -	N/A	\$ 152,134	\$ 290,484	\$ (138,350)	-47.6%
Other Medicare Revenue					\$ 7,500	\$ 8,436	\$ (936)	-11.1%	\$ 7,500	\$ 8,436	\$ (936)	-11.1%	\$ -	\$ -	\$ -	N/A	\$ 7,500	\$ 8,436	\$ (936)	-11.1%
Other Revenue	\$ 96,442	\$ 117,583	\$ (21,141)	-18.0%	\$ 3,422	\$ 5,000	\$ (1,578)	-31.6%	\$ 2,898	\$ 5,000	\$ (2,102)	-42.0%	\$ 524	\$ -	\$ 524	N/A	\$ 99,864	\$ 122,583	\$ (22,719)	-18.5%
TOTAL OPERATING REVENUE	\$ 28,927,383	\$ 27,736,239	\$ 1,191,144	4.3%	\$ 1,026,413	\$ 1,802,738	\$ (776,325)	-43.1%	\$ 869,249	\$ 1,531,443	\$ (662,194)	-43.2%	\$ 157,164	\$ 271,295	\$ (114,130)	-42.1%	\$ 29,953,796	\$ 29,538,977	\$ 414,819	1.4%
HEALTHCARE COSTS																				
Medicaid Capitation	\$ 27,646,252	\$ 26,539,583	\$ (1,106,669)	-4.2%													\$ 27,646,252	\$ 26,539,583	\$ (1,106,669)	-4.2%
Medicaid Pass-Through	\$ 329,650	\$ 258,261	\$ (71,389)	-27.6%													\$ 329,650	\$ 258,261	\$ (71,389)	-27.6%
Total Medicaid	\$ 27,975,903	\$ 26,797,845	\$ (1,178,058)	-4.4%													\$ 27,975,903	\$ 26,797,845	\$ (1,178,058)	-4.4%
PCP Capitation					\$ 225,379	\$ 390,256	\$ 164,878	42.2%	\$ 213,994	\$ 390,256	\$ 176,263	45.2%	\$ 11,385	\$ -	\$ (11,385)	N/A	\$ 225,379	\$ 390,256	\$ 164,878	42.2%
Inpatient					\$ 170,884	\$ 303,140	\$ 132,256	43.6%	\$ 170,884	\$ 303,140	\$ 132,256	43.6%	\$ -	\$ -	\$ -	N/A	\$ 170,884	\$ 303,140	\$ 132,256	43.6%
Outpatient					\$ 22,542	\$ 110,242	\$ 87,700	79.6%	\$ 20,162	\$ 110,242	\$ 90,080	81.7%	\$ 2,380	\$ -	\$ (2,380)	N/A	\$ 22,542	\$ 110,242	\$ 87,700	79.6%
Other FFS					\$ 33,355	\$ 473,922	\$ 440,567	93.0%	\$ 20,628	\$ 216,192	\$ 195,564	90.5%	\$ 12,727	\$ 257,730	\$ 245,003	95.1%	\$ 33,355	\$ 473,922	\$ 440,567	93.0%
IBNR					\$ 57,969	\$ -	\$ (57,969)	N/A	\$ 123,368	\$ -	\$ (123,368)	N/A	\$ (65,399)	\$ -	\$ 65,399	N/A	\$ 57,969	\$ -	\$ (57,969)	N/A
Total FFS					\$ 284,749	\$ 887,304	\$ 602,555	67.9%	\$ 335,042	\$ 629,574	\$ 294,532	46.8%	\$ (50,292)	\$ 257,730	\$ 308,022	119.5%	\$ 284,749	\$ 887,304	\$ 602,555	67.9%
Pharmacy (Gross)					\$ 268,128	\$ -	\$ (268,128)	N/A	\$ 268,128	\$ -	\$ (268,128)	N/A	\$ -	\$ -	\$ -	N/A	\$ 268,128	\$ -	\$ (268,128)	N/A
Federal Reinsurance					\$ (35,496)	\$ -	\$ 35,496	N/A	\$ (35,496)	\$ -	\$ 35,496	N/A	\$ -	\$ -	\$ -	N/A	\$ (35,496)	\$ -	\$ 35,496	N/A
LICS					\$ (38,539)	\$ -	\$ 38,539	N/A	\$ (38,539)	\$ -	\$ 38,539	N/A	\$ -	\$ -	\$ -	N/A	\$ (38,539)	\$ -	\$ 38,539	N/A
Other CMS Offsets					\$ (17,707)	\$ -	\$ 17,707	N/A	\$ (17,707)	\$ -	\$ 17,707	N/A	\$ -	\$ -	\$ -	N/A	\$ (17,707)	\$ -	\$ 17,707	N/A
OTC					\$ 20,929	\$ 28,699	\$ 7,770	27.1%	\$ 20,929	\$ 28,699	\$ 7,770	27.1%	\$ -	\$ -	\$ -	N/A	\$ 20,929	\$ 28,699	\$ 7,770	27.1%
Other Pharmacy					\$ 12,099	\$ 427,233	\$ 415,133	97.2%	\$ 12,099	\$ 427,233	\$ 415,133	97.2%	\$ -	\$ -	\$ -	N/A	\$ 12,099	\$ 427,233	\$ 415,133	97.2%
Total Pharmacy					\$ 209,415	\$ 455,932	\$ 246,517	54.1%	\$ 209,415	\$ 455,932	\$ 246,517	54.1%	\$ -	\$ -	\$ -	N/A	\$ 209,415	\$ 455,932	\$ 246,517	54.1%
Other Supplemental					\$ (20,812)	\$ 38,170	\$ 58,981	154.5%	\$ (28,275)	\$ 38,170	\$ 66,445	174.1%	\$ 7,464	\$ -	\$ (7,464)	N/A	\$ (20,812)	\$ 38,170	\$ 58,981	154.5%
Reinsurance (Net)					\$ 10,369	\$ 8,475	\$ (1,894)	-22.3%	\$ 10,369	\$ 8,475	\$ (1,894)	-22.3%	\$ -	\$ -	\$ -	N/A	\$ 10,369	\$ 8,475	\$ (1,894)	-22.3%
Community Reinvestment	\$ -	\$ 18,685	\$ 18,685	100.0%	\$ -	\$ -	\$ -	N/A	\$ -	\$ -	\$ -	N/A	\$ -	\$ -	\$ -	N/A	\$ -	\$ 18,685	\$ 18,685	100.0%
TOTAL HEALTHCARE COSTS	\$ 27,975,903	\$ 26,816,530	\$ (1,159,373)	-4.3%	\$ 709,472	\$ 1,780,137	\$ 1,070,665	60.1%	\$ 740,916	\$ 1,522,407	\$ 781,491	51.3%	\$ (31,444)	\$ 257,730	\$ 289,174	112.2%	\$ 28,685,374	\$ 28,596,667	\$ (88,707)	-0.3%
Gross Margin	\$ 951,481	\$ 919,709	\$ 31,771	3.5%	\$ 316,942	\$ 22,601	\$ 294,341	1302.3%	\$ 128,333	\$ 9,036	\$ 119,297	1320.2%	\$ 188,608	\$ 13,565	\$ 175,044	1290.4%	\$ 1,268,422	\$ 942,310	\$ 326,112	34.6%
Total Administrative Expense	\$ 533,200	\$ 481,238	\$ (51,962)	-10.8%	\$ 423,286	\$ 407,919	\$ (15,367)	-3.8%	\$ 382,823	\$ 375,419	\$ (7,404)	-2.0%	\$ 40,463	\$ 32,500	\$ (7,962)	-24.5%	\$ 956,486	\$ 889,158	\$ (67,328)	-7.6%
Non-Operating Income/(Expense)																				
Rental Income	\$ 1,538	\$ 1,494	\$ 45	3.0%	\$ -	\$ -	\$ -	N/A	\$ -	\$ -	\$ -	N/A	\$ -	\$ -	\$ -	N/A	\$ 1,538	\$ 1,494	\$ 45	3.0%
Depreciation & Amortization	\$ (10,838)	\$ (11,264)	\$ 426	-3.8%	\$ (385)	\$ (86)	\$ (299)	347.6%	\$ (326)	\$ (77)	\$ (248)	321.2%	\$ (59)	\$ (9)	\$ (50)	585.4%	\$ (11,222)	\$ (11,350)	\$ 128	-1.1%
Change in Net Position	\$ 408,981	\$ 428,700	\$ (19,720)	-4.6%	\$ (106,729)	\$ (385,404)	\$ 278,675	-72.3%	\$ (254,816)	\$ (366,460)	\$ 111,644	-30.5%	\$ 148,087	\$ (18,944)	\$ 167,031	-881.7%	\$ 302,252	\$ 43,296	\$ 258,956	598.1%
Key Metrics																				
Enrollment	94,398	92,163	2,235	2.4%	410	703	(293)	-41.7%	410	703	(293)	-41.7%	410	703	(293)	-41.7%	94,808	92,866	1,942	2.1%
Revenue PMPM	\$306.44	\$300.95	\$5.49	1.8%	\$2,503.45	\$2,564.35	(\$60.90)	-2.4%	\$2,120.12	\$2,178.44	(\$58.32)	-2.7%	\$383.33	\$385.91	(\$2.58)	-0.7%	\$315.94	\$318.08	(\$2.14)	-0.7%
MLR	96.71%	96.68%	-3 bps		69.12%	98.75%	2962 bps		85.24%	99.41%	1417 bps		-20.01%	95.00%	11501 bps		95.77%	96.81%	104 bps	
Admin Ratio	1.8%	1.7%	-11 bps		41.2%	22.6%	-1861 bps		44.0%	24.5%	-1953 bps		25.7%	12.0%	-1377 bps		3.2%	3.0%	-18 bps	
Net Income PMPM	\$4.33	\$4.65	(\$0.32)	-6.9%	(\$260.31)	(\$548.23)	\$287.91	-52.5%	(\$621.50)	(\$521.28)	(\$100.22)	19.2%	\$361.19	(\$26.95)	\$388.13	-1440.3%	\$3.19	\$0.47	\$2.72	583.8%
Net Income %	1.4%	1.5%	-13 bps		-10.4%	-21.4%	1098 bps		-29.3%	-23.9%	-539 bps		94.2%	-7.0%	10121 bps		1.0%	0.1%	86 bps	
Gross Margin Vol Variance			\$ 22,303				\$ (9,420)				\$ (3,766)				\$ (5,654)				\$ 19,705	
Gross Margin Rate Variance			\$ 9,468				\$ 303,760				\$ 123,063				\$ 180,697				\$ 306,406	

May (YTD)																			
Medi-Cal					Medicare					DSNP					SPD Medicaid				
Actual	Budget	Variance B/(W)	% Var		Actual	Budget	Variance B/(W)	% Var		Actual	Budget	Variance B/(W)	% Var		Actual	Budget	Variance B/(W)	% Var	
REVENUE																			
Medi-Cal																			
Premium	\$ 139,499,317	\$ 138,062,695	\$ 1,436,623	1.0%	\$ 550,152	\$ 897,241	\$ (347,089)	-38.7%		\$ -	\$ -	\$ -	N/A		\$ 550,152	\$ 897,241	\$ (347,089)	-38.7%	
Pass-Through	\$ 30,762,387	\$ 1,312,769	\$ 29,449,618	NM	\$ -	\$ -	\$ -	N/A		\$ -	\$ -	\$ -	N/A		\$ -	\$ -	\$ -	N/A	
Medicare																			
Part C Revenue					\$ 2,480,145	\$ 4,071,535	\$ (1,591,390)	-39.1%		\$ 2,480,145	\$ 4,071,535	\$ (1,591,390)	-39.1%		\$ -	\$ -	\$ -	N/A	
Part D Revenue					\$ 551,584	\$ 966,873	\$ (415,289)	-43.0%		\$ 551,584	\$ 966,873	\$ (415,289)	-43.0%		\$ -	\$ -	\$ -	N/A	
Other Medicare Revenue					\$ 29,300	\$ 27,900	\$ 1,400	5.0%		\$ 29,300	\$ 27,900	\$ 1,400	5.0%		\$ -	\$ -	\$ -	N/A	
Other Revenue	\$ 525,244	\$ 587,177	\$ (61,933)	-10.5%	\$ 13,420	\$ 25,000	\$ (11,580)	-46.3%		\$ 11,229	\$ 25,000	\$ (13,771)	-55.1%		\$ 2,191	\$ -	\$ 2,191	N/A	
TOTAL OPERATING REVENUE	\$ 170,786,949	\$ 139,962,641	\$ 30,824,308	22.0%	\$ 3,624,601	\$ 5,988,549	\$ (2,363,948)	-39.5%		\$ 3,072,258	\$ 5,091,309	\$ (2,019,051)	-39.7%		\$ 552,343	\$ 897,241	\$ (344,898)	-38.4%	
HEALTHCARE COSTS																			
Medicaid Capitation	\$ 135,314,338	\$ 133,920,814	\$ (1,393,524)	-1.0%															
Medicaid Pass-Through	\$ 30,762,387	\$ 1,312,769	\$ (29,449,618)	NM															
Total Medicaid	\$ 166,076,725	\$ 135,233,583	\$ (30,843,142)	-22.8%															
PCP Capitation					\$ 858,286	\$ 1,306,143	\$ 447,857	34.3%		\$ 817,714	\$ 1,306,143	\$ 488,429	37.4%		\$ 40,572	\$ -	\$ (40,572)	N/A	
Inpatient					\$ 275,876	\$ 949,914	\$ 674,038	71.0%		\$ 275,315	\$ 949,914	\$ 674,599	71.0%		\$ 561	\$ -	\$ (561)	N/A	
Outpatient					\$ 76,874	\$ 345,461	\$ 268,587	77.7%		\$ 68,888	\$ 345,461	\$ 276,572	80.1%		\$ 7,986	\$ -	\$ (7,986)	N/A	
Other FFS					\$ 62,760	\$ 1,530,081	\$ 1,467,321	95.9%		\$ 38,242	\$ 677,702	\$ 639,460	94.4%		\$ 24,518	\$ 852,379	\$ 827,861	97.1%	
IBNR					\$ 1,041,696	\$ -	\$ (1,041,696)	N/A		\$ 873,381	\$ -	\$ (873,381)	N/A		\$ 168,315	\$ -	\$ (168,315)	N/A	
Total FFS					\$ 1,457,206	\$ 2,825,456	\$ 1,368,250	48.4%		\$ 1,255,826	\$ 1,973,077	\$ 717,251	36.4%		\$ 201,380	\$ 852,379	\$ 650,999	76.4%	
Pharmacy (Gross)					\$ 1,040,180	\$ -	\$ (1,040,180)	N/A		\$ 1,040,180	\$ -	\$ (1,040,180)	N/A		\$ -	\$ -	\$ -	N/A	
Federal Reinsurance					\$ (101,310)	\$ -	\$ 101,310	N/A		\$ (101,310)	\$ -	\$ 101,310	N/A		\$ -	\$ -	\$ -	N/A	
LICS					\$ (198,360)	\$ -	\$ 198,360	N/A		\$ (198,360)	\$ -	\$ 198,360	N/A		\$ -	\$ -	\$ -	N/A	
Other CMS Offsets					\$ (69,903)	\$ -	\$ 69,903	N/A		\$ (69,903)	\$ -	\$ 69,903	N/A		\$ -	\$ -	\$ -	N/A	
OTC					\$ 37,351	\$ 90,833	\$ 53,482	58.9%		\$ 37,351	\$ 90,833	\$ 53,482	58.9%		\$ -	\$ -	\$ -	N/A	
Other Pharmacy					\$ 38,994	\$ 1,341,621	\$ 1,302,626	97.1%		\$ 38,994	\$ 1,341,621	\$ 1,302,626	97.1%		\$ -	\$ -	\$ -	N/A	
Total Pharmacy					\$ 746,953	\$ 1,432,454	\$ 685,501	47.9%		\$ 746,953	\$ 1,432,454	\$ 685,501	47.9%		\$ -	\$ -	\$ -	N/A	
Other Supplemental					\$ 51,893	\$ 120,806	\$ 68,913	57.0%		\$ 36,930	\$ 120,806	\$ 83,877	69.4%		\$ 14,964	\$ -	\$ (14,964)	N/A	
Reinsurance (Net)					\$ 36,418	\$ 28,030	\$ (8,388)	-29.9%		\$ 36,418	\$ 28,030	\$ (8,388)	-29.9%		\$ -	\$ -	\$ -	N/A	
Community Reinvestment	\$ -	\$ 87,922	\$ 87,922	100.0%	\$ -	\$ -	\$ -	N/A		\$ -	\$ -	\$ -	N/A		\$ -	\$ -	\$ -	N/A	
TOTAL HEALTHCARE COSTS	\$ 166,076,725	\$ 135,321,505	\$ (30,755,220)	-22.7%	\$ 3,151,157	\$ 5,712,889	\$ 2,561,731	44.8%		\$ 2,894,242	\$ 4,860,510	\$ 1,966,268	40.5%		\$ 256,915	\$ 852,379	\$ 595,464	69.9%	
Gross Margin	\$ 4,710,224	\$ 4,641,136	\$ 69,088	1.5%	\$ 473,444	\$ 275,661	\$ 197,783	71.7%		\$ 178,016	\$ 230,799	\$ (52,783)	-22.9%		\$ 295,428	\$ 44,862	\$ 250,566	558.5%	
Total Administrative Expense	\$ 2,558,194	\$ 2,505,782	\$ (52,413)	-2.1%	\$ 1,955,611	\$ 2,164,781	\$ 209,169	9.7%		\$ 1,795,554	\$ 1,998,464	\$ 202,910	10.2%		\$ 160,057	\$ 166,317	\$ 6,260	3.8%	
Non-Operating Income/(Expense)																			
Rental Income	\$ 7,692	\$ 7,468	\$ 224	3.0%	\$ -	\$ -	\$ -	N/A		\$ -	\$ -	\$ -	N/A		\$ -	\$ -	\$ -	N/A	
Depreciation & Amortization	\$ (54,625)	\$ (56,468)	\$ 1,843	-3.3%	\$ (1,392)	\$ (282)	\$ (1,110)	393.9%		\$ (1,180)	\$ (254)	\$ (926)	365.0%		\$ (212)	\$ (28)	\$ (184)	653.7%	
Change in Net Position	\$ 2,105,096	\$ 2,086,354	\$ 18,742	0.9%	\$ (1,483,560)	\$ (1,889,402)	\$ 405,842	-21.5%		\$ (1,618,718)	\$ (1,767,919)	\$ 149,201	-8.4%		\$ 135,158	\$ (121,483)	\$ 256,641	-211.3%	
Key Metrics																			
Enrollment	477,489	466,963	10,526	2.3%	1,440	2,325	(885)	-38.1%		1,440	2,325	(885)	-38.1%		1,440	2,325	(885)	-38.1%	
Revenue PMPM	\$357.68	\$299.73	\$57.95	19.3%	\$2,517.08	\$2,575.72	(\$58.64)	-2.3%		\$2,133.51	\$2,189.81	(\$56.30)	-2.6%		\$383.57	\$385.91	(\$2.34)	-0.6%	
MLR	97.24%	96.68%	-56 bps		86.94%	95.40%	846 bps			94.21%	95.47%	126 bps			46.51%	95.00%	4849 bps		
Admin Ratio	1.5%	1.8%	29 bps		54.0%	36.1%	-1781 bps			58.4%	39.3%	-1919 bps			29.0%	18.5%	-1044 bps		
Net Income PMPM	\$4.41	\$4.47	(\$0.06)	-1.3%	(\$1,030.25)	(\$812.65)	(\$217.60)	26.8%		(\$1,124.11)	(\$760.40)	(\$363.71)	47.8%		\$93.86	(\$52.25)	\$146.11	-279.6%	
Net Income %	1.2%	1.5%	-26 bps		-40.9%	-31.6%	-938 bps			-52.7%	-34.7%	-1796 bps			24.5%	-13.5%	3801 bps		
Gross Margin Vol Variance			\$ 104,618				\$ (104,929)					\$ (87,852)					\$ (17,077)		
Gross Margin Rate Variance			\$ (35,530)				\$ 302,712					\$ 35,070					\$ 267,642		

(\$,000)	Actual					Budget								Full Year		
	January	February	March	April	May	June	July	August	September	October	November	December	5+7F	Budget	B/(W)	
REVENUE																
Medicaid Revenue	\$ 26,354	\$ 59,555	\$ 27,661	\$ 28,255	\$ 28,988	\$ 27,806	\$ 27,723	\$ 27,679	\$ 27,627	\$ 27,575	\$ 27,523	\$ 27,471	\$ 364,216	\$ 333,677	\$ 30,539	
Medicare Revenue	\$ 389	\$ 567	\$ 566	\$ 673	\$ 866	\$ 1,768	\$ 2,010	\$ 2,242	\$ 2,490	\$ 2,681	\$ 2,875	\$ 3,029	\$ 20,156	\$ 22,161	\$ (2,005)	
Investment & Interest Income	\$ 96	\$ 89	\$ 156	\$ 98	\$ 100	\$ 123	\$ 123	\$ 123	\$ 123	\$ 123	\$ 123	\$ 123	\$ 1,397	\$ 1,470	\$ (74)	
TOTAL REVENUE	\$ 26,838	\$ 60,210	\$ 28,383	\$ 29,026	\$ 29,954	\$ 29,696	\$ 29,855	\$ 30,043	\$ 30,240	\$ 30,379	\$ 30,521	\$ 30,623	\$ 385,769	\$ 357,309	\$ 28,460	
HEALTH CARE COSTS																
Global Capitation	\$ 25,509	\$ 58,559	\$ 26,739	\$ 27,294	\$ 27,976	\$ 26,672	\$ 26,546	\$ 26,459	\$ 26,364	\$ 26,277	\$ 26,189	\$ 26,109	\$ 350,694	\$ 319,851	\$ (30,843)	
Shared Risk Capitation	\$ 100	\$ 143	\$ 165	\$ 225	\$ 225	\$ 453	\$ 516	\$ 576	\$ 638	\$ 687	\$ 737	\$ 777	\$ 5,242	\$ 5,690	\$ 448	
FFS Claims	\$ 201	\$ 343	\$ 323	\$ 306	\$ 285	\$ 993	\$ 1,082	\$ 1,282	\$ 1,386	\$ 1,571	\$ 1,645	\$ 1,624	\$ 11,040	\$ 12,408	\$ 1,368	
Pharmacy (Net)	\$ 103	\$ 41	\$ 78	\$ 316	\$ 209	\$ 492	\$ 583	\$ 668	\$ 715	\$ 842	\$ 842	\$ 905	\$ 5,795	\$ 6,480	\$ 686	
All Other	\$ 10	\$ 10	\$ 58	\$ 21	\$ (10)	\$ 70	\$ 75	\$ 86	\$ 89	\$ 100	\$ 104	\$ 100	\$ 713	\$ 861	\$ 148	
HEALTH CARE COSTS	\$ 25,922	\$ 59,095	\$ 27,363	\$ 28,162	\$ 28,685	\$ 28,680	\$ 28,803	\$ 29,070	\$ 29,192	\$ 29,477	\$ 29,518	\$ 29,515	\$ 373,484	\$ 345,291	\$ (28,193)	
Gross Margin	\$ 916	\$ 1,115	\$ 1,020	\$ 864	\$ 1,268	\$ 1,017	\$ 1,052	\$ 973	\$ 1,048	\$ 902	\$ 1,003	\$ 1,107	\$ 12,284	\$ 12,018	\$ 267	
Medical Gross Margin	\$ 820	\$ 1,026	\$ 864	\$ 766	\$ 1,169	\$ 894	\$ 929	\$ 851	\$ 925	\$ 779	\$ 880	\$ 984	\$ 10,888	\$ 10,548	\$ 340	
ADMINISTRATIVE EXPENSE																
Salaries & Wages	\$ 556	\$ 462	\$ 501	\$ 518	\$ 573	\$ 509	\$ 523	\$ 523	\$ 533	\$ 532	\$ 532	\$ 545	\$ 6,307	\$ 6,283	\$ (24)	
Benefits Expense	\$ 52	\$ 48	\$ 57	\$ 52	\$ 71	\$ 45	\$ 47	\$ 47	\$ 47	\$ 47	\$ 47	\$ 50	\$ 610	\$ 558	\$ (53)	
Other Labor Expense	\$ 1	\$ 3	\$ 1	\$ 2	\$ 2	\$ 2	\$ 2	\$ 2	\$ 2	\$ 2	\$ 2	\$ 2	\$ 25	\$ 26	\$ 1	
Total Labor Costs	\$ 609	\$ 513	\$ 559	\$ 571	\$ 645	\$ 556	\$ 572	\$ 571	\$ 582	\$ 582	\$ 582	\$ 598	\$ 6,942	\$ 6,867	\$ (75)	
Consulting, Legal, & Other Professional	\$ 47	\$ 78	\$ 24	\$ 73	\$ 21	\$ 143	\$ 54	\$ 49	\$ 49	\$ 43	\$ 52	\$ 72	\$ 705	\$ 961	\$ 256	
Outside Services	\$ 47	\$ 50	\$ 44	\$ 54	\$ 42	\$ 36	\$ 36	\$ 36	\$ 36	\$ 35	\$ 35	\$ 35	\$ 486	\$ 463	\$ (22)	
MSO Fees	\$ 118	\$ 118	\$ 118	\$ 118	\$ 118	\$ 131	\$ 131	\$ 131	\$ 131	\$ 131	\$ 131	\$ 131	\$ 1,506	\$ 1,572	\$ 66	
Broker Commissions	\$ 0	\$ 3	\$ 3	\$ 5	\$ 6	\$ 13	\$ 17	\$ 21	\$ 27	\$ 31	\$ 36	\$ 36	\$ 199	\$ 205	\$ 6	
Advertising & Marketing	\$ 9	\$ 2	\$ 12	\$ 4	\$ 11	\$ 5	\$ 3	\$ 3	\$ 18	\$ 4	\$ 4	\$ 6	\$ 82	\$ 76	\$ (6)	
Information Technology	\$ 5	\$ 10	\$ 6	\$ 10	\$ 10	\$ 6	\$ 6	\$ 6	\$ 10	\$ 7	\$ 7	\$ 7	\$ 91	\$ 86	\$ (6)	
Membership and Subscriptions	\$ 11	\$ 11	\$ 11	\$ 11	\$ 13	\$ 13	\$ 14	\$ 14	\$ 14	\$ 17	\$ 14	\$ 14	\$ 159	\$ 160	\$ 1	
Regulatory Fees	\$ 26	\$ 25	\$ 25	\$ 25	\$ 31	\$ 24	\$ 24	\$ 24	\$ 24	\$ 24	\$ 24	\$ 24	\$ 301	\$ 287	\$ (14)	
Travel	\$ 4	\$ 4	\$ 6	\$ 5	\$ 3	\$ 17	\$ 11	\$ 11	\$ 14	\$ 11	\$ 8	\$ 16	\$ 111	\$ 143	\$ 32	
Occupancy & Facility	\$ 3	\$ 5	\$ 7	\$ 4	\$ 4	\$ 11	\$ 11	\$ 11	\$ 11	\$ 11	\$ 11	\$ 11	\$ 102	\$ 135	\$ 33	
Office Expense	\$ 6	\$ 4	\$ 7	\$ 5	\$ 10	\$ 5	\$ 5	\$ 5	\$ 13	\$ 5	\$ 5	\$ 5	\$ 75	\$ 75	\$ (0)	
Other Admin	\$ 35	\$ 34	\$ 36	\$ 35	\$ 41	\$ 18	\$ 11	\$ 11	\$ 18	\$ 18	\$ 11	\$ 15	\$ 284	\$ 169	\$ (115)	
Total Administrative Expense	\$ 921	\$ 857	\$ 858	\$ 922	\$ 956	\$ 978	\$ 895	\$ 894	\$ 948	\$ 920	\$ 921	\$ 972	\$ 11,043	\$ 11,199	\$ 157	
Non-Operating Income/(Expense)																
Rental Income	\$ 2	\$ 2	\$ 2	\$ 2	\$ 2	\$ 1	\$ 1	\$ 1	\$ 1	\$ 1	\$ 1	\$ 1	\$ 18	\$ 18	\$ 0	
Depreciation & Amortization	\$ 11	\$ 11	\$ 11	\$ 11	\$ 11	\$ 11	\$ 11	\$ 11	\$ 11	\$ 11	\$ 11	\$ 11	\$ 135	\$ 136	\$ 1	
Change in Net Position	\$ (14)	\$ 249	\$ 152	\$ (67)	\$ 302	\$ 29	\$ 147	\$ 69	\$ 90	\$ (28)	\$ 71	\$ 125	\$ 1,124	\$ 700	\$ 425	
Key Metrics																
Enrollment	96,417	95,865	96,480	95,359	94,808	92,365	91,864	91,537	91,174	90,811	90,448	90,085	1,117,213	1,107,572	9,641	
Medical MLR	96.9%	98.3%	96.9%	97.4%	96.1%	97.0%	96.9%	97.2%	96.9%	97.4%	97.1%	96.8%	97.2%	97.0%	-13 bps	
Admin Ratio	3.4%	1.4%	3.0%	3.2%	3.2%	3.3%	3.0%	3.0%	3.1%	3.0%	3.0%	3.2%	2.9%	3.1%	27 bps	
FTEs	42	42	42	43	44	45	46	46	47	47	47	52	543	555	12	
Net Income PMPM	(\$0.14)	\$2.59	\$1.58	(\$0.71)	\$3.19	\$0.31	\$1.60	\$0.76	\$0.98	(\$0.31)	\$0.79	\$1.39	\$1.01	\$0.63	\$0.37	
Net Income %	-0.1%	0.4%	0.5%	-0.2%	1.0%	0.1%	0.5%	0.2%	0.3%	-0.1%	0.2%	0.4%	0.3%	0.2%	10 bps	

	May								May (YTD)							
	-----Dollars-----				-----PMPM-----				-----Dollars-----				-----PMPM-----			
	Actual	Budget	Variance B/(W)	% Var	Actual	Budget	Variance B/(W)	% Var	Actual	Budget	Variance B/(W)	% Var	Actual	Budget	Variance B/(W)	% Var
REVENUE																
Medi-Cal																
Premium	\$ 156,641	\$ 271,295	\$ (114,654)	-42.3%	\$ 382.05	\$ 385.91	\$ (3.86)	-1.0%	\$ 550,152	\$ 897,241	\$ (347,089)	-38.7%	\$ 382.05	\$ 385.91	\$ (3.86)	-1.0%
Pass-Through	\$ -	\$ -	\$ -	N/A	\$ -	\$ -	\$ -	N/A	\$ -	\$ -	\$ -	N/A	\$ -	\$ -	\$ -	N/A
Medicare																
Part C Revenue	\$ 706,717	\$ 1,227,523	\$ (520,807)	-42.4%	\$ 1,723.70	\$ 1,746.12	\$ (22.42)	-1.3%	\$ 2,480,145	\$ 4,071,535	\$ (1,591,390)	-39.1%	\$ 1,722.32	\$ 1,751.20	\$ (28.87)	-1.6%
Part D Revenue	\$ 152,134	\$ 290,484	\$ (138,350)	-47.6%	\$ 371.06	\$ 413.21	\$ (42.15)	-10.2%	\$ 551,584	\$ 966,873	\$ (415,289)	-43.0%	\$ 383.04	\$ 415.86	\$ (32.82)	-7.9%
Other Medicare Revenue	\$ 7,500	\$ 8,436	\$ (936)	-11.1%	\$ 18.29	\$ 12.00	\$ 6.29	52.4%	\$ 29,300	\$ 27,900	\$ 1,400	5.0%	\$ 20.35	\$ 12.00	\$ 8.35	69.6%
Other Revenue	\$ 3,422	\$ 5,000	\$ (1,578)	-31.6%	\$ 8.35	\$ 7.11	\$ 1.23	17.4%	\$ 13,420	\$ 25,000	\$ (11,580)	-46.3%	\$ 9.32	\$ 10.75	\$ (1.43)	-13.3%
TOTAL OPERATING REVENUE	\$1,026,413	\$ 1,802,738	\$ (776,325)	-43.1%	\$ 2,503.45	\$ 2,564.35	\$ (60.90)	-2.4%	\$ 3,624,601	\$ 5,988,549	\$ (2,363,948)	-39.5%	\$ 2,517.08	\$ 2,575.72	\$ (58.64)	-2.3%
HEALTHCARE COSTS																
PCP Capitation	\$ 225,379	\$ 390,256	\$ 164,878	42.2%	\$ 549.70	\$ 555.13	\$ 5.43	1.0%	\$ 858,286	\$ 1,306,143	\$ 447,857	34.3%	\$ 596.03	\$ 561.78	\$ (34.25)	-6.1%
Hospital Risk Pool	\$ -	\$ 1,200	\$ 1,200	NM	\$ -	\$ 1.71	\$ 1.71	NM	\$ 49,811	\$ 3,979	\$ (45,831)	NM	\$ 34.59	\$ 1.71	\$ (32.88)	NM
Inpatient	\$ 170,884	\$ 303,140	\$ 132,256	43.6%	\$ 416.79	\$ 431.21	\$ 14.42	3.3%	\$ 275,876	\$ 949,914	\$ 674,038	71.0%	\$ 191.58	\$ 408.57	\$ 216.98	53.1%
Outpatient	\$ 22,542	\$ 110,242	\$ 87,700	79.6%	\$ 54.98	\$ 156.82	\$ 101.84	64.9%	\$ 76,874	\$ 345,461	\$ 268,587	77.7%	\$ 53.38	\$ 148.59	\$ 95.20	64.1%
Other FFS	\$ 33,355	\$ 473,922	\$ 440,567	93.0%	\$ 81.35	\$ 674.14	\$ 592.79	87.9%	\$ 62,760	\$ 1,530,081	\$ 1,467,321	95.9%	\$ 43.58	\$ 658.10	\$ 614.52	93.4%
IBNR	\$ 57,969	\$ -	\$ (57,969)	N/A	\$ 141.39	\$ -	\$ (141.39)	N/A	\$ 1,041,696	\$ -	\$ (1,041,696)	N/A	\$ 723.40	\$ -	\$ (723.40)	N/A
Total FFS	\$ 284,749	\$ 887,304	\$ 602,555	67.9%	\$ 694.51	\$ 1,262.17	\$ 567.66	45.0%	\$ 1,457,206	\$ 2,825,456	\$ 1,368,250	48.4%	\$ 1,011.95	\$ 1,215.25	\$ 203.30	16.7%
Pharmacy (Gross)	\$ 268,128	\$ -	\$ (268,128)	N/A	\$ 653.97	\$ -	\$ (653.97)	N/A	\$ 1,040,180	\$ -	\$ (1,040,180)	N/A	\$ 722.35	\$ -	\$ (722.35)	N/A
Federal Reinsurance	\$ (35,496)	\$ -	\$ 35,496	N/A	\$ (86.58)	\$ -	\$ 86.58	N/A	\$ (101,310)	\$ -	\$ 101,310	N/A	\$ (70.35)	\$ -	\$ 70.35	N/A
LICS	\$ (38,539)	\$ -	\$ 38,539	N/A	\$ (94.00)	\$ -	\$ 94.00	N/A	\$ (198,360)	\$ -	\$ 198,360	N/A	\$ (137.75)	\$ -	\$ 137.75	N/A
Other CMS Offsets	\$ (17,707)	\$ -	\$ 17,707	N/A	\$ (43.19)	\$ -	\$ 43.19	N/A	\$ (69,903)	\$ -	\$ 69,903	N/A	\$ (48.54)	\$ -	\$ 48.54	N/A
OTC	\$ 20,929	\$ 28,699	\$ 7,770	27.1%	\$ 51.05	\$ 40.82	\$ (10.22)	-25.0%	\$ 37,351	\$ 90,833	\$ 53,482	58.9%	\$ 25.94	\$ 39.07	\$ 13.13	33.6%
Other Pharmacy	\$ 12,099	\$ 427,233	\$ 415,133	97.2%	\$ 29.51	\$ 607.73	\$ 578.22	95.1%	\$ 38,994	\$ 1,341,621	\$ 1,302,626	97.1%	\$ 27.08	\$ 577.04	\$ 549.96	95.3%
Total Pharmacy	\$ 209,415	\$ 455,932	\$ 246,517	54.1%	\$ 510.77	\$ 648.55	\$ 137.78	21.2%	\$ 746,953	\$ 1,432,454	\$ 685,501	47.9%	\$ 518.72	\$ 616.11	\$ 97.39	15.8%
Other Supplemental	\$ (20,812)	\$ 38,170	\$ 58,981	154.5%	\$ (50.76)	\$ 54.30	\$ 105.06	193.5%	\$ 51,893	\$ 120,806	\$ 68,913	57.0%	\$ 36.04	\$ 51.96	\$ 15.92	30.6%
Reinsurance (Net)	\$ 10,369	\$ 8,475	\$ (1,894)	-22.3%	\$ 25.29	\$ 12.06	\$ (13.23)	-109.8%	\$ 36,418	\$ 28,030	\$ (8,388)	-29.9%	\$ 25.29	\$ 12.06	\$ (13.23)	-109.8%
Community Reinvestment	\$ -	\$ -	\$ -	N/A	\$ -	\$ -	\$ -	N/A	\$ -	\$ -	\$ -	N/A	\$ -	\$ -	\$ -	N/A
TOTAL HEALTHCARE COSTS	\$ 709,472	\$ 1,780,137	\$ 1,070,665	60.1%	\$ 1,730.42	\$ 2,532.20	\$ 801.78	31.7%	\$ 3,151,157	\$ 5,712,889	\$ 2,561,731	44.8%	\$ 2,188.30	\$ 2,457.16	\$ 268.85	10.9%
Gross Margin	\$ 316,942	\$ 22,601	\$ 294,341	1302.3%	\$ 773.03	\$ 32.15	\$ 740.88	2304.5%	\$ 473,444	\$ 275,661	\$ 197,783	71.7%	\$ 328.78	\$ 118.56	\$ 210.22	177.3%
Total Administrative Expense	\$ 423,286	\$ 407,919	\$ (15,367)	-3.8%	\$ 1,032.40	\$ 580.26	\$ (452.15)	-77.9%	\$ 1,955,611	\$ 2,164,781	\$ 209,169	9.7%	\$ 1,358.06	\$ 931.09	\$ (426.98)	-45.9%
Non-Operating Income/(Expense)																
Rental Income	\$ -	\$ -	\$ -	N/A	\$ -	\$ -	\$ -	N/A	\$ -	\$ -	\$ -	N/A	\$ -	\$ -	\$ -	N/A
Depreciation & Amortization	\$ (385)	\$ (86)	\$ (299)	347.6%	\$ (0.94)	\$ (0.12)	\$ (0.82)	667.4%	\$ (1,392)	\$ (282)	\$ (1,110)	393.9%	\$ (0.97)	\$ (0.12)	\$ (0.85)	697.4%
Change in Net Position	\$ (106,729)	\$ (385,404)	\$ 278,675	-72.3%	\$ (260.31)	\$ (548.23)	\$ 287.91	-52.5%	\$ (1,483,560)	\$ (1,889,402)	\$ 405,842	-21.5%	\$ (1,030.25)	\$ (812.65)	\$ (217.60)	26.8%
Key Metrics																
Enrollment	410	703	(293)	-41.7%					1,440	2,325	(885)	-38.1%				
MLR	69.12%	98.75%	2962 bps						86.94%	95.40%	846 bps					
Admin Ratio	41.2%	22.6%	-1861 bps						54.0%	36.1%	-1781 bps					
Net Income %	-10.4%	-21.4%	1098 bps						-40.9%	-31.6%	-938 bps					
Gross Margin Vol Variance			\$ (9,420)								\$ (104,929)					
Gross Margin Rate Variance			\$ 303,760								\$ 302,712					



Community Health Plan of Imperial Valley
Statement of Net Position
May 2026

	April 2026	May 2026	Change
ASSETS			
Current Assets			
Cash and Investments			
Chase - Checking (Primary & DSNP)	\$ 3,093,805	\$ 3,509,989	\$ 416,183
JPMorgan Securities	\$ 18,052,183	\$ 17,848,632	\$ (203,551)
First Foundation Bank	\$ 142,177	\$ 142,177	\$ -
Receivables			
Accounts Receivable	\$ (0)	\$ 1,538	\$ 1,538
Dividend & Interest Receivable	\$ 97,095	\$ 99,192	\$ 2,097
Capitation Receivable	\$ 27,869,187	\$ 28,657,932	\$ 788,744
Pass-Through Receivable	\$ 385,726	\$ 329,650	\$ (56,076)
Medicare Receivables	\$ 111,361	\$ 155,458	\$ 44,097
Other Current Assets			
Prepaid Admin	\$ 633,299	\$ 624,747	\$ (8,552)
Prepaid Commissions	\$ 42,643	\$ 49,607	\$ 6,964
Prepaid Medical	\$ 38,736	\$ 72,280	\$ 33,544
Total Current Assets	\$ 50,466,213	\$ 51,491,201	\$ 1,024,989
Noncurrent Assets			
Restricted Deposit			
First Foundation Bank - Restricted	\$ 300,000	\$ 300,000	\$ -
Capital Assets			
Buildings - Net	\$ 2,820,742	\$ 2,812,194	\$ (8,548)
Computer Equipment / Software - Net	\$ 5,042	\$ 4,874	\$ (168)
Improvements - Net	\$ 190,395	\$ 189,421	\$ (975)
Intangible Assets	\$ 48,956	\$ 47,706	\$ (1,250)
Operating ROU Asset (Copier) - Net	\$ 1,971	\$ 1,689	\$ (281)
Total Noncurrent Assets	\$ 3,367,106	\$ 3,355,884	\$ (11,222)
Total Assets	\$ 53,833,319	\$ 54,847,085	\$ 1,013,766
LIABILITIES			
Current Liabilities			
Payables			
Accounts Payable	\$ 479,689	\$ 481,461	\$ 1,772
Capitation Payable	\$ 27,347,870	\$ 28,032,233	\$ 684,363
IBNR	\$ 984,037	\$ 1,042,006	\$ 57,969
Medicare Payables	\$ 90,653	\$ 145,843	\$ 55,190
Community Reinvestment Reserve	\$ 88,684	\$ 116,986	\$ 28,302
Credit Card Payable	\$ 31,976	\$ 14,535	\$ (17,441)
Other Current Liabilities			
Short Term Lease Liability - Copier	\$ 2,103	\$ 1,807	\$ (296)
Bonus Accrual	\$ 287,382	\$ 141,718	\$ (145,663)
Salaries Accrual	\$ 177,285	\$ 224,318	\$ 47,033
Vacation Accrual	\$ 266,108	\$ 266,394	\$ 286
Total Current Liabilities	\$ 29,755,787	\$ 30,467,301	\$ 711,515
Total Liabilities	\$ 29,755,787	\$ 30,467,301	\$ 711,515
NET POSITION			
Net investments in Capital Assets	\$ 3,067,106	\$ 3,055,884	\$ (11,222)
Restricted by Legislative Authority	\$ 300,000	\$ 300,000	\$ -
Unrestricted	\$ 20,391,142	\$ 20,402,364	\$ 11,222
YTD Net Revenue	\$ 319,284	\$ 621,536	\$ 302,252
Total Net Position	\$ 24,077,532	\$ 24,379,784	\$ 302,252
Total Liabilities and Net Position	\$ 53,833,319	\$ 54,847,085	\$ 1,013,766



Community Health Plan of Imperial Valley
Summarized Tangible Net Equity Calculation
As of May 2026

Net Equity	\$ 24,379,784
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)	\$ 24,379,784
Required Tangible Net Equity *	\$ 4,934,652
TNE Excess (Deficiency)	\$ 19,445,131

Full Service Plan		* Calculated Required Tangible Net Equity
A. Minimum TNE Requirement	1	\$ 143,110,499 - May
	\$ 1,000,000	\$ 343,465,197 - Annualized
B. REVENUES:		
	2% of the first \$150 million of annualized premium revenues (lines 1, 2, 4, 5, 7, 9 from Income Statement)	\$ 150,000,000
		x 2%
	Plus	\$ 3,000,000
	1% of annualized premium revenues in excess of \$150 million	\$ 193,465,197
		x 1%
		\$ 1,934,652
Total	\$ 4,934,652	\$ 4,934,652 - Required TNE

Community Health Plan of Imperial Valley
May 2026 Cash Transactions

Date	Account	Vendor	Memo/Description	Amount
Chase Primary Checking				
05/01/26	Chase Primary Checking	Great America Financial Services	Inv 41774136	\$ (307.21)
05/04/26	Chase Primary Checking	Xavier Media LLC	Inv 1120	(1,275.00)
05/04/26	Chase Primary Checking	Stericycle, Inc.	Inv 8013759170-- bill.com Check Number: 81037059	(112.72)
05/04/26	Chase Primary Checking	America's Finest Fire Pro	Inv 951281-- bill.com Check Number: 81037274	(980.79)
05/04/26	Chase Primary Checking	Lee Hindman	Inv April 2026 Statement	(200.00)
05/04/26	Chase Primary Checking	Carlos Ramirez	Inv April 2026 Stipend	(300.00)
05/04/26	Chase Primary Checking	Xochitl Fausto	Inv April 2026 Stipend-- bill.com Check Number: 81036812	(100.00)
05/04/26	Chase Primary Checking	Bushra Ahmad	Inv April 2026 Stipend	(100.00)
05/04/26	Chase Primary Checking	Allan Wu	Inv April 2026 Stipend	(100.00)
05/04/26	Chase Primary Checking	Pablo Velez	Inv April 2026 Statement-- bill.com Check Number: 81036567	(200.00)
05/05/26	Chase Primary Checking	City of Imperial	Acct 80683 - Inv 1529788-- bill.com Check Number: 81040891	(202.93)
05/05/26	Chase Primary Checking	Rippling	Employee Reimbursement - Iris Alysane Aguirre	(11.39)
05/05/26	Chase Primary Checking	Rippling	Employee Reimbursement - Luis E Gutierrez	(9.61)
05/05/26	Chase Primary Checking	Rippling	Employee Reimbursement - Luis E Gutierrez	(9.92)
05/05/26	Chase Primary Checking	Rippling	Employee Reimbursement - Iris Alysane Aguirre	(9.78)
05/05/26	Chase Primary Checking	Rippling	Employee Reimbursement - Luis E Gutierrez	(9.61)
05/05/26	Chase Primary Checking	Rippling	Employee Reimbursement - Karla Linnette Maldonado	(27.67)
05/05/26	Chase Primary Checking	Rippling	Employee Reimbursement - Iris Alysane Aguirre	(2.25)
05/05/26	Chase Primary Checking	Rippling	Employee Reimbursement - Iris Alysane Aguirre	(3.86)
05/05/26	Chase Primary Checking	Rippling	Employee Reimbursement - Iris Alysane Aguirre	(11.91)
05/06/26	Chase Primary Checking	Inerglo Creative	Inv INV-00696	(700.00)
05/06/26	Chase Primary Checking	Rippling	Employee Reimbursement - Nailea-Guadalupe Diaz Mendivel	(21.60)
05/06/26	Chase Primary Checking	Rippling	Employee Reimbursement - Iris Alysane Aguirre	(0.88)
05/06/26	Chase Primary Checking	Rippling	Employee Reimbursement - Nailea-Guadalupe Diaz Mendivel	(27.12)
05/06/26	Chase Primary Checking	Rippling	Employee Reimbursement - Nailea-Guadalupe Diaz Mendivel	(8.37)
05/07/26	Chase Primary Checking	Zamosky Communication	Inv 0000065	(8,000.00)
05/07/26	Chase Primary Checking	Law Office of William S. Smerdon	Inv 3020	(1,512.50)
05/07/26	Chase Primary Checking	Brawley Rotary Club	Inv April 2026 Statement-- bill.com Check Number: 81050769	(100.00)
05/07/26	Chase Primary Checking	Health Management Associates, Inc.	Inv 340027 - 0000001	(4,942.50)
05/07/26	Chase Primary Checking	MAK Solutions	Inv CHPIV-09	(5,750.00)
05/07/26	Chase Primary Checking	Rippling	Employee net pay paid by direct deposits for check date 05/08/2026	(2,515.85)
05/07/26	Chase Primary Checking	Rippling	Payroll taxes paid via Rippling for check date 05/08/2026	(1,162.34)
05/07/26	Chase Primary Checking	Rippling	Employee Reimbursement - Cynthia Nicole Mesa	(200.00)
05/07/26	Chase Primary Checking	Rippling	Employee Reimbursement - Brian Castro	(20.44)
05/07/26	Chase Primary Checking	Rippling	Steve Levy, April Mileage , Marketing & Prospecting 4/17-4/30	(62.36)
05/07/26	Chase Primary Checking	Blue Shield of California	Blue Shield of California	(38,822.46)
05/07/26	Chase Primary Checking	First Unum Life Insurance Company	UNUM Invoice 05/01/26 - 05/31/26	(902.02)
05/07/26	Chase Primary Checking	JPMorgan Chase	Credit Card Payment	(34,040.36)
05/07/26	Chase Primary Checking	JPMorgan Chase	Dividend Income - April 2026	6,672.29
05/07/26	Chase Primary Checking	JPMorgan Chase	Service Charges Investment Sweep - April	(530.97)
05/07/26	Chase Primary Checking	Mid Atlantic Trust Company	Mid Atlantic Quarter 2 Administration Cost	(1,475.47)
05/07/26	Chase Primary Checking	Rippling	People Center	(211.44)
05/07/26	Chase Primary Checking	Rippling	People Center	(10.00)
05/07/26	Chase Primary Checking	Rippling	Replenish Rippling - FSA	(267.98)
05/07/26	Chase Primary Checking	Voya	Payroll Date: 05/01/26 Retirement Contribution	(14,322.06)
05/07/26	Chase Primary Checking	Rippling	Employee Reimbursement - Elizabeth Torres	(30.78)
05/07/26	Chase Primary Checking	Rippling	Employee Reimbursement - Alia Fatima Romo	(31.54)
05/07/26	Chase Primary Checking	Rippling	Employee Reimbursement - Elizabeth Torres	(44.77)
05/07/26	Chase Primary Checking	Rippling	Employee Reimbursement - Shannon Long	(108.16)
05/08/26	Chase Primary Checking	Stericycle, Inc.	Inv 8014045279-- bill.com Check Number: 81057314	(117.39)
05/08/26	Chase Primary Checking	Junior's Cafe	Inv 13-19885-- bill.com Check Number: 81055362	(519.47)
05/08/26	Chase Primary Checking	Health Management Associates, Inc.	Inv 339047 - 0000002	(267.50)
05/12/26	Chase Primary Checking	Oracle America, Inc.	Inv 2475927	(6,818.18)
05/12/26	Chase Primary Checking	Kaz-Bros Design Shop	Inv 15156-- bill.com Check Number: 81067003	(108.74)
05/13/26	Chase Primary Checking	Alliance Insurance Services LLC	Multiple invoices (details on stub)-- bill.com Check Number: 81071299	(18,624.00)
05/13/26	Chase Primary Checking	FEX Partners Insurance Agency LLC	Multiple invoices	(8,148.00)
05/13/26	Chase Primary Checking	Rippling	Employee net pay paid by direct deposits for check date 05/13/2026	(3,605.47)
05/13/26	Chase Primary Checking	Rippling	Payroll taxes paid via Rippling for check date 05/13/2026	(1,501.17)
05/14/26	Chase Primary Checking	Rippling	Employee net pay paid by direct deposits for check date 05/14/2026	(599.04)
05/14/26	Chase Primary Checking	Rippling	Payroll taxes paid via Rippling for check date 05/14/2026	(187.08)
05/14/26	Chase Primary Checking	Rippling	Employee net pay paid by direct deposits for check date 05/14/2026	(130,406.00)
05/14/26	Chase Primary Checking	Rippling	Payroll taxes paid via Rippling for check date 05/14/2026	(101,544.05)
05/14/26	Chase Primary Checking	Rippling	Employee garnishments paid via Rippling for check date 05/15/2026	(713.53)
05/14/26	Chase Primary Checking	Rippling	Employee net pay paid by direct deposits for check date 05/15/2026	(136,081.36)
05/14/26	Chase Primary Checking	Rippling	Payroll taxes paid via Rippling for check date 05/15/2026	(71,961.63)
05/14/26	Chase Primary Checking	Department of Health Care Services	5/14/26 - Receipt - DHCS (June 2026 Revenue)	27,407,053.63
05/14/26	Chase Primary Checking	Department of Health Care Services	5/14/26 - Receipt - DHCS (June 2026 Revenue)	818,798.50
05/14/26	Chase Primary Checking	Department of Health Care Services	5/14/26 - Receipt - DHCS (June 2026 Revenue)	22,652.07
05/14/26	Chase Primary Checking	Department of Health Care Services	5/14/26 - Receipt - DHCS (June 2026 Revenue)	5,351.19
05/14/26	Chase Primary Checking	Department of Health Care Services	5/14/26 - Receipt - DHCS (June 2026 Revenue)	1,057.94
05/14/26	Chase Primary Checking	First Unum Life Insurance Company	5/14/25 - Employee Contributions to Insurances	(1,710.78)
05/14/26	Chase Primary Checking	Rippling	Replenish Rippling - FSA	(511.11)
05/14/26	Chase Primary Checking	State Compensation Insurance Fund	Workers Compensation Payment	(1,530.33)
05/15/26	Chase Primary Checking	Community Health Group	Inv INV05142026	(90,000.00)
05/15/26	Chase Primary Checking	Sparkling Clean	Inv MAY2026	(900.00)
05/18/26	Chase Primary Checking	Wakely consulting Group	Multiple invoices	(8,063.75)
05/18/26	Chase Primary Checking	Republic Services	Inv 0467-001778591	(187.80)
05/18/26	Chase Primary Checking	RSC Insurance Brokerage, Inc.	Inv INV 051526	(10,368.90)
05/18/26	Chase Primary Checking	Jeffrey Scott Agency	Inv Project 24361	(5,347.07)
05/19/26	Chase Primary Checking	Wakely consulting Group	Inv 337071 - 0000004	(35,895.00)

05/19/26	Chase Primary Checking Rippling	Employee net pay paid by direct deposits for check date 05/19/2026	(4,305.27)
05/19/26	Chase Primary Checking Rippling	Employee Reimbursement - David Scott Wilson	(51.21)
05/19/26	Chase Primary Checking Rippling	Employee Reimbursement - David Scott Wilson	(19.40)
05/19/26	Chase Primary Checking Rippling	Employee Reimbursement - David Scott Wilson	(46.78)
05/19/26	Chase Primary Checking Rippling	Employee Reimbursement - David Scott Wilson	(89.34)
05/19/26	Chase Primary Checking Rippling	Employee Reimbursement - David Scott Wilson	(260.79)
05/19/26	Chase Primary Checking Rippling	Employee Reimbursement - David Scott Wilson	(37.14)
05/19/26	Chase Primary Checking Rippling	Employee Reimbursement - David Scott Wilson	(197.18)
05/19/26	Chase Primary Checking Rippling	Employee Reimbursement - David Scott Wilson	(18.00)
05/19/26	Chase Primary Checking Rippling	Employee Reimbursement - David Scott Wilson	(20.00)
05/19/26	Chase Primary Checking Rippling	Employee Reimbursement - David Scott Wilson	(268.00)
05/21/26	Chase Primary Checking JPMorgan Chase	Account Analysis Settlelement Charge	(741.06)
05/21/26	Chase Primary Checking Rippling	Replenish Rippling - FSA	(484.50)
05/21/26	Chase Primary Checking Rippling	Rippling Refund	3,953.34
05/21/26	Chase Primary Checking Voya	Payroll Date: 05/15/26 Retirement Contribution	(14,529.26)
05/22/26	Chase Primary Checking Epstein Becker & Green, P.C.	Inv #1234551	(1,325.00)
05/22/26	Chase Primary Checking Republic Services	Inv 0467-001781759	(177.80)
05/22/26	Chase Primary Checking Professional Office Services, Inc.	Inv 003863230-- bill.com Check Number: 81105921	(3,944.70)
05/22/26	Chase Primary Checking Allan Wu	Inv February 2026 Statement	(200.00)
05/22/26	Chase Primary Checking Allan Wu	Void of Bill Payment #P26031701 - 9428511	200.00
05/27/26	Chase Primary Checking Kaz-Bros Design Shop	Inv 15254-- bill.com Check Number: 81119225	(108.74)
05/27/26	Chase Primary Checking Lee Hindman	Inv May 2026 Stipend	(300.00)
05/27/26	Chase Primary Checking Carlos Ramirez	Inv May 2026 Stipend	(300.00)
05/27/26	Chase Primary Checking Bushra Ahmad	Inv May 2026 Stipend	(100.00)
05/27/26	Chase Primary Checking Allan Wu	Inv May 2026 Stipend	(200.00)
05/27/26	Chase Primary Checking Pablo Velez	Inv May 2026 Stipend	(100.00)
05/28/26	Chase Primary Checking Association for Community Affiliated Plan	Inv INV 051526-- bill.com Check Number: 81123263	(16,395.54)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Elysse Palomo Tarabola	(26.47)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Elysse Palomo Tarabola	(68.32)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Julia Rebecca Hutchins	(20.01)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Julia Rebecca Hutchins	(9.50)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Julia Rebecca Hutchins	(60.00)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Julia Rebecca Hutchins	(30.86)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Brian Castro	(16.53)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Julia Rebecca Hutchins	(15.77)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Julia Rebecca Hutchins	(79.42)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Julia Rebecca Hutchins	(124.90)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Cynthia Nicole Mesa	(159.45)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Julia Rebecca Hutchins	(10.24)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Julia Rebecca Hutchins	(178.40)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Julia Rebecca Hutchins	(21.65)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Julia Rebecca Hutchins	(7.40)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Julia Rebecca Hutchins	(148.40)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Cynthia Nicole Mesa	(19.00)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Brian Castro	(17.83)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Cynthia Nicole Mesa	(316.91)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Cynthia Nicole Mesa	(161.23)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Julia Rebecca Hutchins	(21.44)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Cynthia Nicole Mesa	(26.52)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Cynthia Nicole Mesa	(18.84)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Julia Rebecca Hutchins	(8.55)
05/28/26	Chase Primary Checking Rippling	Employee Reimbursement - Julia Rebecca Hutchins	(288.96)
05/29/26	Chase Primary Checking Rippling	Employee garnishments paid via Rippling for check date 05/29/2026	(713.53)
05/29/26	Chase Primary Checking Rippling	Employee net pay paid by direct deposits for check date 05/29/2026	(137,012.46)
05/29/26	Chase Primary Checking Rippling	Net pay credits applied for check date 05/29/2026	(0.01)
05/29/26	Chase Primary Checking Rippling	Payroll taxes paid via Rippling for check date 05/29/2026	(70,334.22)
05/31/26	Chase Primary Checking Mid Atlantic Trust Company	P. Carpio - Loan Repayment - Mid Atlantic	(126.24)
05/31/26	Chase Primary Checking Rippling	Replenish Rippling - FSA	(801.46)
05/31/26	Chase Primary Checking Rippling	Replenish Rippling - FSA	(660.21)
05/31/26	Chase Primary Checking Voya	Payroll Date: 05/29/26 Retirement Contribution	(14,398.74)
05/31/26	Chase Primary Checking Voya	Payroll Date: 05/29/26 Retirement Contribution	(177.37)
05/31/26	Chase Primary Checking Rippling	Employee Reimbursement - Suzette Priscilla Castro	(49.99)
05/31/26	Chase Primary Checking Rippling	Employee Reimbursement - Lawrence Edward Lewis	(98.22)
05/31/26	Chase Primary Checking Rippling	Employee Reimbursement - Lawrence Edward Lewis	(493.29)

Chase Checking - DSNP

05/01/26	Chase Checking - DSNP CMS	May 2026 CMS Capitation	969,186.15
05/04/26	Chase Checking - DSNP Community Health Group	Inv 33038244	(64,666.73)
05/04/26	Chase Checking - DSNP Centrix Benefit Administrators	Inv INV050426	(5,794.44)
05/07/26	Chase Checking - DSNP Community Health Group	Inv 2016-17	(18,793.31)
05/08/26	Chase Checking - DSNP Community Health Group	Inv 33057660	(73,601.06)
05/13/26	Chase Checking - DSNP Community Health Group	Inv 2016-18	(102,180.47)
05/13/26	Chase Checking - DSNP Community Care IPA, Inc.	Inv MAY2026-- bill.com Check Number: 81071340	(44,928.28)
05/13/26	Chase Checking - DSNP Primary Healthcare Medical Group IPA, Ir	Inv MAY2026	(46,316.53)
05/13/26	Chase Checking - DSNP Imperial County Physicians Medical Grou	Inv MAY2026-- bill.com Check Number: 81070585	(3,483.67)
05/13/26	Chase Checking - DSNP Premier Patient Care IPA, INC.	Inv MAY2026	(128,240.15)
05/18/26	Chase Checking - DSNP Nations Benefits, LLC	Inv INV238474	(19,651.73)
05/18/26	Chase Checking - DSNP Community Health Group	Inv 33072933	(54,698.03)
05/19/26	Chase Checking - DSNP Community Health Group	Inv 2016-19	(81,609.48)
05/21/26	Chase Checking - DSNP Nations Benefits, LLC	Inv INV238136	(779.36)
05/22/26	Chase Checking - DSNP Community Health Group	Inv 33093988	(128,255.82)
05/27/26	Chase Checking - DSNP Community Health Group	Inv 2016-20	(24,404.90)
05/31/26	Chase Checking - DSNP JPMorgan Chase	Dividend Income - May 2026	501.98
05/31/26	Chase Checking - DSNP JPMorgan Chase	5/01/26 - Investment Sweep Basis Fee	(39.88)
05/31/26	Chase Checking - DSNP JPMorgan Chase	5/15/26 - Account Analysis Settlement Charge	(337.86)
05/31/26	Chase Checking - DSNP JPMorgan Chase	May 2026 Interest	169.82
05/31/26	Chase Checking - DSNP Centene Corporation	P2P Pharmacy	764.38
05/31/26	Chase Checking - DSNP Healthspring	P2P Pharmacy	1,607.18

05/31/26	Chase Checking - DSNP Humana	P2P Pharmacy	69.04
05/31/26	Chase Checking - DSNP Healthspring	P2P Pharmacy	768.83
05/31/26	Chase Checking - DSNP Centene Corporation	P2P Pharmacy	1,614.72

JPMorgan Securities

05/31/26	Chase Securities	Health Net	May Health Net Payment	(27,293,949.39)
05/31/26	Chase Securities	JPMorgan Chase	Bank Fee - April 2026 (Portfolio)	(25.00)
05/31/26	Chase Securities	JPMorgan Chase	May 2026 Accrued Investment Income	\$ 90,423.19

Committee Chair Reports

Committee Report

Summary of committee meetings by commissioner chairs

Community Advisory Committee Report

Chair: Xochitl Fausto

Date: Jun 16, 2026

Agenda Items Reviewed

- Approval of Goals for 2026
 - Access to Care - Reduce Grievances by 2% related to authorization and referrals.
 - Behavioral Health (Children's Autism) - Increase member awareness of local resources to support children with autism spectrum disorder
 - Health Literacy - Grievance and denial letters are at a 6th-grade level in English and Spanish
 - Member experience - >87% of D-SNP members report positive experience with health plan
- Language Assistance Program
- Elder Abuse
- Authorization Process – a delegation oversight perspective
- Member feedback

Recommendations

1. **Lab Accommodations for Children with Disabilities:** Work with labs and providers to implement appropriate accommodations for blood collection in children with disabilities, especially severe autism.
2. **Clinic for Children with Autism:** Bring updated information about the opening of the clinic for children with autism and special conditions in the valley at future meetings.
3. **Senior Dental Clinic Presentation:** Request the senior dental clinic to send a representative to give an informational presentation at the next meeting.
4. **Medical Transportation:** Collect and communicate feedback on the quality of medical transportation vehicles, especially on the lack of air conditioning.

Actions Taken

- Approved minutes from Mar 2026 meeting
- Approved CAC goals for 2026

Information Items



**Community
Health Plan**
OF IMPERIAL VALLEY

CHPIV D-SNP Model of Care

July 2026

Healthcare Services

Model of Care Goals

Overall Measures	Health Risk Assessment (HRA)	F2F Visits (HRA)	Interdisciplinary Care Team (ICT)
Description	Initial HRA and Reassessment (annual) HRA Completion Rate	All Enrollees will have an ICP	All Enrollees will have an ICT
Performance Measure	Improve utilization of required services by reporting the percentage of assessments completed.	Improve coordination of care by reporting the percentage of care plans completed.	Improve access to care by reporting percentage of Enrollee satisfaction scores.
Goal	100%	100%	100%
Totals for June 2026 <i>(data pulled before end of month)</i>	57	12	56
Totals for January 2026 – Present Day	439	101	312

MOC Implementation and Data Roll Out

Current Implementation Status

- Model of Care implementation remains on schedule.
- Standardized workflows, documentation practices, and reporting processes are operational across all MOC functions.
- Data collection is actively underway to establish baseline performance for all CMS-required Model of Care measures.

Data Rollout

- June 2026 reporting reflects preliminary implementation activity and should be considered baseline operational data.
- Ongoing data collection will continue throughout 2026 to improve data completeness and validate performance.
- As additional data becomes available, CHPIV will begin reporting measurable outcomes, trend analyses, and progress toward established MOC goals.

Model of Care Progress

- Measurement has been initiated for core MOC performance indicators, including:
 - Health Risk Assessment (HRA) Completion
 - Individualized Care Plans (ICPs)
 - Interdisciplinary Care Team (ICT) Participation
- CHPIV has successfully transitioned from MOC implementation to performance measurement. Current efforts remain focused on establishing reliable baseline data to support future evaluation, regulatory reporting, and continuous quality improvement.

Questions?

Appendix



Table 4.1 Goals and Performance or Outcome Measures

Overall Measure	Transitions of Care	Health Outcome Measure
Description:	An acute or nonacute inpatient discharge on or between January 1 and December 1 of the measurement year. Reduces re-admissions.	% of discharges for Enrollees 18 yrs & older who had each: Notification of inpatient admission, Receipt of discharge information, Patient engagement after inpatient discharge & Medication reconciliation post-discharge
Benchmark:	Quality Compass 90 th percentile	The outcome for measure: The new H contract will be assessed and monitored.
Goal:	75%	Activities implemented to address measures if the stated goals are not met are found in MOC 4. B. Factor 5: Take action when the goal is not met.
Reporting Timeframe:	CY 2026, Quarterly, Ad-Hoc	
Remeasurement:	CY2027	
Overall Measure	Breast Cancer Screening (BCS)	Performance Measure
Description:	Women 50–74 years of age who had a mammogram to screen for breast cancer	Early breast cancer detection to find cancers before they start to cause symptoms
Benchmark:	Quality Compass 90 th percentile	The outcome for measure: The new H contract will be assessed and monitored.
Goal:	75%	Activities implemented to address measures if the stated goals are not met are found in MOC 4. B. Factor 5: Take action when the goal is not met.
Reporting Timeframe:	CY 2026, Quarterly, Ad-Hoc	
Remeasurement:	CY2027	
Overall Measure	Plan Cause Readmissions (PCR)	Health Outcome Measure
Description:	% of acute inpatient stays and observation stays during measurement year that were followed by an unplanned acute readmission for any diagnosis within 30 days, for Enrollees 18 years and older.	A substantial portion of all hospitalizations are patients returning to the hospital soon after their previous stay (readmission). Readmissions are often a sign of a fragmented health care system and an indication of poor care or lack of care coordination.
Benchmark:	Quality Compass 90 th percentile	The outcome for measure: The new H contract will be assessed and monitored.
Goal:	75%	Activities implemented to address measures if the stated goals are not met are found in MOC 4. B. Factor 5: Take action when the goal is not met.
Reporting Timeframe:	CY 2026, Quarterly, Ad-Hoc	
Remeasurement:	CY2027	
Overall Measure	Glycemic Status Assessment (GSD)	Health Outcome Measure



Description:	% of Enrollees 18–75 years with diabetes whose most recent glycemic status or glucose management indicator showed their blood sugar is less than or equal to 9.0%.	Diabetes is a common disease in the United States. Out of control blood sugar levels can lead to serious short-term problems and long-term damage.
Benchmark:	Quality Compass 90 th percentile	The outcome for measure: The new H contract will be assessed and monitored.
Goal:	75%	Activities implemented to address measures if the stated goals are not met are found in MOC 4. B. Factor 5: Take action when the goal is not met.
Reporting Timeframe:	CY 2026, Quarterly, Ad-Hoc	
Remeasurement:	CY2027	
Overall Measure	Blood pressure control (BPD)	Health Outcome Measure
Description:	% of Enrollees 18–85 years of age who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (<140/90 mm Hg) during the measurement year.	As people age, their blood vessels become stiffer, increasing the likelihood of having high blood pressure (hypertension). High blood pressure makes the heart work too hard and can cause serious health issues.
Benchmark:	Quality Compass 90 th percentile	The outcome for measure: The new H contract will be assessed and monitored.
Goal:	75%	Activities implemented to address measures if the stated goals are not met are found in MOC 4. B. Factor 5: Take action when the goal is not met.
Reporting Timeframe:	CY 2026, Quarterly, Ad-Hoc	
Remeasurement:	CY2027	
Overall Measure	Reducing Risk of Falling (FRM)	Performance Measure
Description:	% of Enrollees who had a fall or had problems with balance or walking in the past 12 months, who were seen by a practitioner in the past 12 months and who received a recommendation for how to prevent falls or treat problems with balance or walking from their current practitioner.	Measures whether the Enrollees discussed with their physician and received treatment for balance or falling problems. As patients age, the risk of falling increases. Studies have shown more than 1/3 of people over the age of 65 fall each year, but less than half of them talk to their doctors about it.
Benchmark:	Quality Compass 90 th percentile	The outcome for measure: The new H contract will be assessed and monitored.
Goal:	75%	Activities implemented to address measures if the stated goals are not met are found in MOC 4. B. Factor 5: Take action when the goal is not met.
Reporting Timeframe:	2026 captured in 1Q 2027	
Remeasurement:	CY2029	



Overall Measure	Health Risk Assessment (HRA)	Performance Measure
Description:	Initial HRA and Reassessment (annual) HRA Completion Rate	Improve utilization of required services by reporting the percentage of assessments completed.
Benchmark:	CHPIV internal goal will be utilized as a benchmark	The outcome for measure: The new H contract will be assessed and monitored.
Goal:	100%	Activities implemented to address measures if the stated goals are not met are found in MOC 4. B. Factor 5: Take action when the goal is not met.
Reporting Timeframe:	CY 2026, Monthly, Ad-Hoc	
Remeasurement:	CY2027	
Overall Measure	Interdisciplinary Care Team (ICP)	Performance Measure
Description:	All Enrollees will have an ICP	Improve coordination of care by reporting the percentage of care plans completed.
Benchmark:	CHPIV internal goal will be utilized as a benchmark	The outcome for measure: The new H contract will be assessed and monitored.
Goal:	100%	Activities implemented to address measures if the stated goals are not met are found in MOC 4. B. Factor 5: Take action when the goal is not met.
Reporting Timeframe:	CY 2026, Quarterly, Ad-Hoc	
Remeasurement:	CY2027	
Overall Measure	Interdisciplinary Care Team (ICT)	Performance Measure
Description:	All Enrollees will have an ICT	Improve access to care by reporting percentage of Enrollee satisfaction scores.
Benchmark:	CHPIV internal goal will be utilized as a benchmark	The outcome for measure: The new H contract will be assessed and monitored.
Goal:	100%	Activities implemented to address measures if the stated goals are not met are found in MOC 4. B. Factor 5: Take action when the goal is not met.
Reporting Timeframe:	CY 2026, Quarterly, Ad-Hoc	
Remeasurement:	CY2027	

Compliance Report

Period Covered: June 2026

Highlights

- 2025 DHCS Medical Audit
- 2024 DHCS Medical Audit Corrective Action Plan (CAP) Update
- DMHC Enforcement Matter – Grievance Reporting

2025 DHCS Medical Audit

The 2025 DHCS Medical Audit is in active review, with the onsite review scheduled for July 13–24, 2026. During June, CHPIV received 19 additional document requests (DRLs #26–44); 18 have been submitted and 1 remains pending (the entrance-conference presentations, due June 30). Most claims-related requests were routed to Health Net as delegate for completion, while CHPIV retained plan-level items, including the member-transition oversight gap analysis, entrance-conference presentations, and interview scheduling.

June Document Requests (DRLs)	Received	Submitted	Pending
3.17 – Timely Payments (Claims)	17	17	0
Miscellaneous (Entrance Conf. / Interviews)	2	1	1
TOTAL	19	18	1

DHCS's review is focused on Section 3.17 – Timely Payments and Health Net / Centene claims operations. Requests to date cover timely-payment practices, claim filing timeframes, universe (UNV) claim files, overturned emergency-services claims, and the audit tools used to review delegated claims. The review also covers the delegated member-transition matter, specifically the affected PPGs and the transition of former Molina members to in-network providers, along with CHPIV's related oversight. CHPIV remains on track and will continue readiness activities through the July onsite review.

2024 DHCS Medical Audit Corrective Action Plan

CHPIV submitted its 2024 DHCS Medical Audit CAP responses for the July 1, 2026 deadline; DHCS responses remain pending. To demonstrate active monitoring of its delegate, CHPIV is currently auditing Health Net files under its new AMP program, with resulting scorecards anticipated for the next CPC and RCOC meetings in August. Remediation continues to focus on Health Net operations and Delegation Oversight, including the hiring of a Health Equity Officer by September 2026. Management will update the Commission as DHCS responds, and remaining corrective actions are closed.

DMHC Enforcement Matter – Grievance Reporting

The DMHC enforcement matter concerns the untimely submission of the quarterly grievance report for the period ending September 30, 2025, for which DMHC proposed an administrative monetary penalty and requested a corrective action plan. CHPIV submitted its corrective action plan to DMHC, consisting of staff retraining and enhanced tracking and checks-and-balances to strengthen the timeliness of delegated regulatory submissions and prevent recurrence. Management will update the Commission on resolution of the matter.

Information Items

Operations report for review

Operations Report

Period Covered: June 2025

Highlights

- **Team:** Onboarded new Provider Network Manager: Vanessa Guzman, previously with Unicare.
- **Events:** Hosted a provider mixer on June 30 and an office administrators meeting on July 1. We had modest attendance at both events. No new issues were raised.
- **Marketing:** Filmed a commercial, emphasizing our local presence and service:
https://youtu.be/suRBtKj_1wo

Key Metrics – Community Advantage Plus

Trend	Category	Goal	Current Performance
	Total Enrollment	822	434* 400 in May
	New Members Per Month	119	61 94 new in May
	Monthly Disenrollment Rate	5%	8% (May) 12% in March
	Member Satisfaction	Net Promoter Score >50%	62% (rolling) 63% in May
	Member Inquires	Declining month over month	263 per 1000 members (Jun) 198 in May

*Enrollment numbers reported are actual members enrolled and effective on June 1, as of July 1. This number may differ from the enrollment numbers reported by finance due to differences in reporting timeframes for retroactive adjustments.

- **Enrollment:** New member acquisition was lower in June than previous two months due to emphasis on strategic marketing and provider engagement initiatives, which are important to support continued enrollment growth and retention. Team members were actively in the field re-educating provider offices on our health plan, key processes, and available

resources to strengthen provider partnerships and help reduce disenrollment from the provider office perspective. Additionally, the Sales team dedicated significant efforts to marketing initiatives, particularly during the last two weeks of the month. Their primary focus was promoting and driving attendance for two special events by engaging providers and practice administrators, strengthening relationships, and increasing awareness of CHPIV's programs and services.

- **Disenrollment:** Our disenrollment rate improved, partially due to having a larger base of satisfied members as well as proactive work from sales, member experience and care management to appropriately set expectations and minimize issues in the first 90-days.
- **Member Inquiries:** Member inquiries handled by CHPIV team members increased slightly in June. We have transitioned reporting from a spreadsheet to Zendesk, our member ticketing system, so we may be capturing more interactions. Top three contact reasons include: disenrollment request, care coordination assistance, and questions related to provider bills/statements.

Issues / Risks

- IPA encounter data – not able to process data from 2 IPAs
- UCSD contract

Next 30 Days

- Initiate in-home visits
- Onboard two additional brokers.
- Finalize risk adjustment documentation workplan
- First IPA quarterly Joint Operating Committee meetings (Aug)
- Secure DME contract with Apria

Period Covered: June 9, 2026- July 13, 2026

Highlights

- 1 open position: Health Equity Officer
- Implementing ideas for the most recent employee of the month questions about strengthening professional relationships.
- Assisting in facilitating the Chief Compliance Officer position interviews and scoring

Key Metrics

Total number of employees	41
Local	30
Remote	11
Number of hires in 2026	+1 since last report 4 hires total in 2026
Number of exits in 2026	Total exits YTD: 7 5 voluntary (12% YTD turnover)

Issues / Risks

- Watch the turnover rate, although the rate is still well below industry benchmarks.

Next 30 Days

- Launch the Employee of the Quarter Program
- Host the next town hall meeting
- Make a decision on the internal candidate for the Chief Compliance Officer position