COMMUNITY HEALTH PLAN OF IMPERIAL VALLEY

AGENDA

Community Health Plan of Imperial Valley Commission

August 10, 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	Attendance
LHA Chair	Lee Hindman	
LHA Vice-Chair	Yvonne Bell	
LHA Commissioner	Dr. Bushra Ahmad	
LHA Commissioner	Xochitl Fausto	
LHA Commissioner	Dr. Kathleen Lang	
LHA Commissioner	Paula Llanas	
LHA Commissioner	Dr. Majid Mani	
LHA Commissioner	Peggy Price	
LHA Commissioner	Dr. Carlos Ramirez	
LHA Commissioner	Dr. Unnati Sampat	
LHA Commissioner	Pablo Velez	
LHA Commissioner	Dr. Allan Wu	
LHA Commissioner	Carly Zamora	

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 7/13/2026...pg. 5-9

B. Approval of the monthly financial reports as reviewed and accepted by the Executive Committee

1. Executive Summary...pg. 10-11
2. Enrollment Report...pg. 12
3. Statement of Revenues, Expenses, and Changes in Net Position... pg. 13
4. Product Profit & Loss Statement...pg. 14
5. Product Profit & Loss Statement (YTD)...pg. 15
6. Change in Net Position Trend...pg. 16
7. Medicare PMPM Detail...pg. 17
8. Statement of Net Position...pg. 18
9. Summarized TNE Calculation...pg. 19
10. Cash Transaction Report...pg. 20-22
11. 6+6 Forecast...pg. 23-28

4. ACTION

No action items.

5. COMMITTEE CHAIR REPORTS

A. Quality Improvement Health & Equity Committee-*Quarterly*
(Dr. Gordon Arakawa, CMO) ...pg. 30-91

B. Finance Committee-*Monthly*
(Dr. Carlos Ramirez, Chair) ...pg. 10-11

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

D. Community Advisory Committee -*Quarterly*
(Xochitl Fausto, Chair) No meeting

6. INFORMATION

A. Health Services Report *(Dr. Gordon Arakawa, CMO and Jeanette Crenshaw, Executive Director of Health Services)* ...pg. 93-99

B. Compliance Report *(Cynthia Mesa, Interim CCO)* ...pg. 100-102

C. Operations Report *(Julia Hutchins, COO)* ...pg. 103-105

D. Human Resources Report *(Shannon Long, HR Consultant)* ...pg. 106-107

E. Financial Report 6+6 Forecast (David Wilson, CFO) ...pg. 23-28

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

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

7. CLOSED SESSION

A. Compliance

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

8. RECONVENE OPEN SESSION

A. Report on actions taken in closed session.

9. ADJOURNMENT

Next meeting: September 14, 2026

Consent Agenda

COMMUNITY HEALTH PLAN OF IMPERIAL VALLEY

MINUTES

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

1. **CALL TO ORDER** *Lee Hindman, Chair*
   The meeting was called to order at 5:33 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
   (Ramirez/Bell) 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.
(Lang/Velez) To approve the consent calendar. Motion carried.

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) No meeting

B. Finance Committee-*Monthly*
(Dr. Carlos Ramirez, Chair) ...pg. 9-10
Dr. Ramirez gave a summary of the July 7, 2026, Finance Committee meeting. Commissioner Velez inquired about the factors contributing to the decrease in Medi-Cal membership. Dr. Ramirez explained that the decline was primarily attributable to immigration-related adjustments. CHPIV CEO, Larry Lewis added that the decrease was also influenced by the Medi-Cal recertification process and the adult expansion transition.

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

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

Xochitl Fausto provided the Commission with an update on the Community Advisory Committee meeting held on June 16, 2026. She reported that members discussed concerns regarding the non-emergency medical transportation process, specifically that transportation requests were being delayed or denied when the required physician's letter was not received by the transportation company. Members noted that this issue had resulted in missed medical appointments. Additional concerns were raised about transportation vehicles with non-functioning air conditioning.

During the discussion, Cynthia Mesa, Interim Chief Compliance Officer, provided clarification on the process and requirements for obtaining the physician's letter needed to authorize transportation services.

Ms. Fausto also shared that members requested additional training for healthcare providers in serving children with special needs, with particular emphasis on caring for children with autism.

6. INFORMATION

A. Health Services Report *(Dr. Gordon Arakawa, CMO and Jeanette Crenshaw, Executive Director of Health Services)* ...pg. 26-32

Dr. Arakawa informed the Commission that Health Services has been actively preparing for the 2025 DHCS Audit. He also added that the department continues to do work in the integrated leadership team

Jeanette Crenshaw gave an update on the CHPIV D-SNP Model of Care.

B. Compliance Report *(Cynthia Mesa, Interim CCO)* ...pg. 33-34

Cynthia Mesa updated the Commission on the 2025 DHCS Medical Audit, 2024 DHCS Medical Audit Corrective Action Plan, and DMHC Enforcement Matter.

C. Operations Report *(Julia Hutchins, COO)* ...pg. 35-36

Julia Hutchins updated the Commission on the following:

- Onboarding of the new Provider Network Manager, Vanessa Guzman
- Provider Mixer was held on June 30, 2026
- Office Administrator Luncheon was held on July 1, 2026
- New CHPIV television and online commercial
- Key Metrics for Community Advantage Plus

D. Human Resources Report *(Shannon Long, HR Consultant)* ...pg. 37

Shannon Long updated the Commission on the following:

- One vacant position: Health Equity Officer
- Onboarding of the new Provider Network Manager, Vanessa Guzman
- Implementation of ideas generated from the most recent Employee of the Month Questions
- Ongoing interviews for the Chief Compliance Officer position
- Key Metrics:
  - Total number of employees: 41
  - Number of hires in 2026: 4
  - Number of exits in 2026: 7

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

Larry Lewis reported on the following:

- Ongoing recruitment efforts for an Oncologist in the Imperial Valley
- Driveway sign currently in development
- Kern County's Health Plans' artificial intelligence (AI) initiatives
- LHPC is advocating with the State and the Department of Health Care Services (DHCS) regarding the Undocumented Immigrant Status (UIS) population. The discussion noted that, as a result of H.R.1, the federal government will fund only emergency services for this population. It was further reported that the State has decided to transition all UIS members out of capitated health plans.
- LHPC Back to Basics Fundamental webinars

F. Other new or old business *(Lee Hindman, Chair)*
None.

7. CLOSED SESSION
No 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
The meeting was adjourned at 6:19 p.m.
Next meeting: August 10, 2026

Financial Results

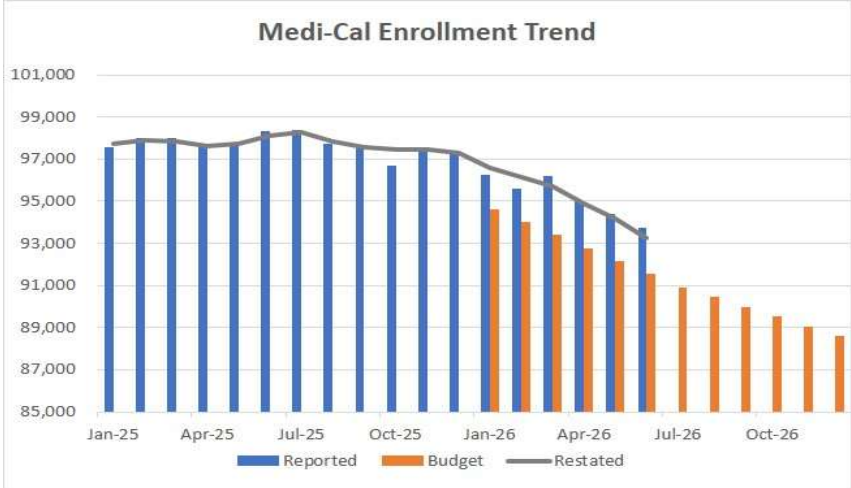
June 2026

Executive Summary

June results exceeded budget expectations driven primarily by favorable administrative costs, offset partially by unfavorable gross margin in Medicaid. Tangible Net Equity remained stable at levels just below 500%.

Membership

June Medi-Cal membership continued its downward trajectory, declining by 578 members to 94.2K. Preliminary reports for July suggest a membership increase for the first time since March. Membership increases are expected in the Adult, Child, and Full-Dual categories of aid.



Reported Medicare membership increased by 55 members month-over-month largely due to retroactive enrollment activity. The disenrollment rate slowed considerably in June, a trend which is continuing July activity.

Medi-Cal Gross Margin

Medi-Cal gross margin was unfavorable to budget by ($24K), driven almost entirely by delayed maternity kick payments of $0.7M, or approximately ($20K) in gross margin. This variance is expected to reverse within the quarter. For the current month, volume was unfavorable overall due to lower membership in SPD/LTC, both dual and non-dual, while all other categories of aid were favorable. June also included $256K in favorable prior-period development.

	Revenue (Current Month Reported)						
Category of Aid (COA)*	**Current**	**Budget**	**Variance**	**Vol**	**Maternity**	**Rate/Mix**	**Prior Period**
Child	$ 4,217,884	$ 4,098,928	$ 118,956	$ 186,506	$ (58,450)	$ (9,100)	$ 10,912
Adult	$ 3,769,348	$ 4,284,172	$ (514,823)	$ 26,477	$ (528,176)	$ (13,125)	$ 37,149
Adult Expansion	$ 7,734,612	$ 7,577,366	$ 157,246	$ 302,967	$ (74,545)	$ (71,176)	$ (16,132)
SPD-LTC	$ 4,609,184	$ 4,960,381	$ (351,197)	$ (302,501)	$ -	$ (48,696)	$ 120,987
SPD-LTC Full Dual	$ 6,473,823	$ 6,885,519	$ (411,696)	$ (351,003)	$ -	$ (60,692)	$ 103,999
Total Medicaid	**$ 26,804,852**	**$ 27,806,365**	**$ (1,001,513)**	**$ (137,553)**	**$ (661,171)**	**$ (202,789)**	**$ 256,915**

** Includes SPD Medicaid*

Medicare Gross Margin (DSNP & SPD Medicaid)

Medicare gross margin was unfavorable to budget by ($15K). Within the Medicare roll-up, DSNP was favorable by $40K, driven by the mid-year risk adjustment true-up, while SPD Medicaid was unfavorable by ($55K) due to higher claim volume and the associated change in reserves.

DSNP (Medicare Primary): DSNP was favorable for the month of June due to mid-year risk adjustment payment (Jan-June); the payment was 2% favorable to the accrual rate. Revenue is offset by IPA capitation payments, which reflect the increased rates.

Medicaid (Secondary): Incurred claims for June were significantly higher than the prior 6-month trend, resulting in increased reserves. On a YTD basis, SPD Medicaid MLR remains considerably below budget at 65%.

On a YTD basis, Medicare gross margin remains favorable to budget by $183K despite adverse volume impact ($147K). Year-to-date MLR is 88.4% compared to a budget of 95.3%.

Administrative Expenses

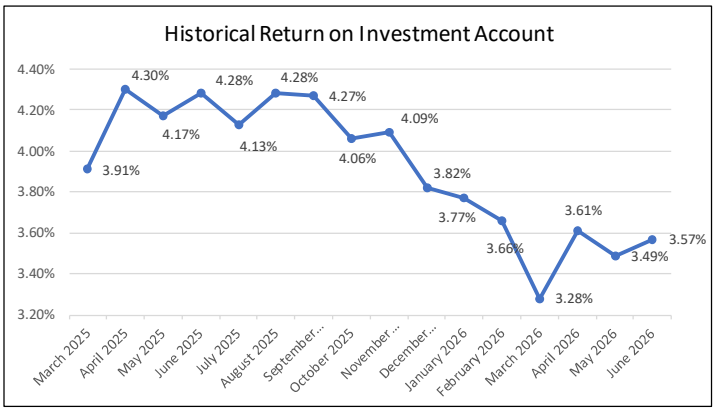
Administrative expenses were favorable to budget by $133K, driven primarily by prior-period property tax refund of $95K. Consulting fees were higher month-over-month but were fully budgeted as the contracted actuarial firm, Wakely, completed the Medicare bid submission. Travel costs contributed $14K of favorability, as the DHCS audit was conducted virtually, eliminating the need for remote employee travel.

Expenditures greater than $50,000: DMHC Regulatory Fees - $369K; Wakely - $72K

Other

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

Month	Return
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%
May 2026	3.49%
June 2026	3.57%



Net Income

Change in Net Position was $124K for June, which was $95K above budget for the month. Year-to-date, CHPIV remains ahead of budget by $520K, or 230%.

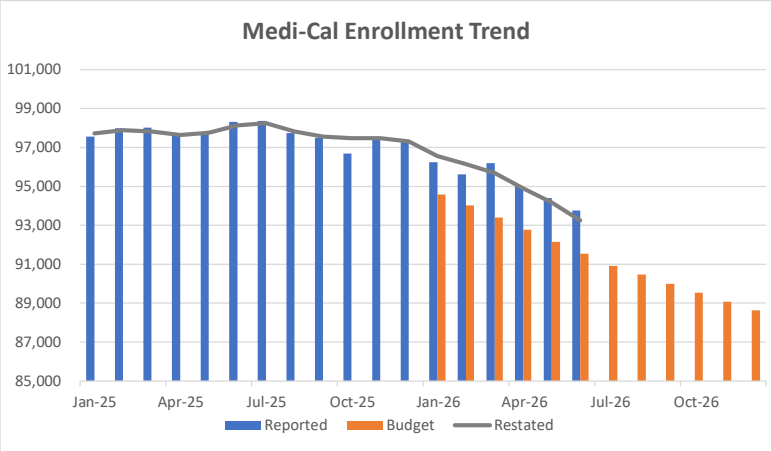
Tangible Net Equity (TNE)

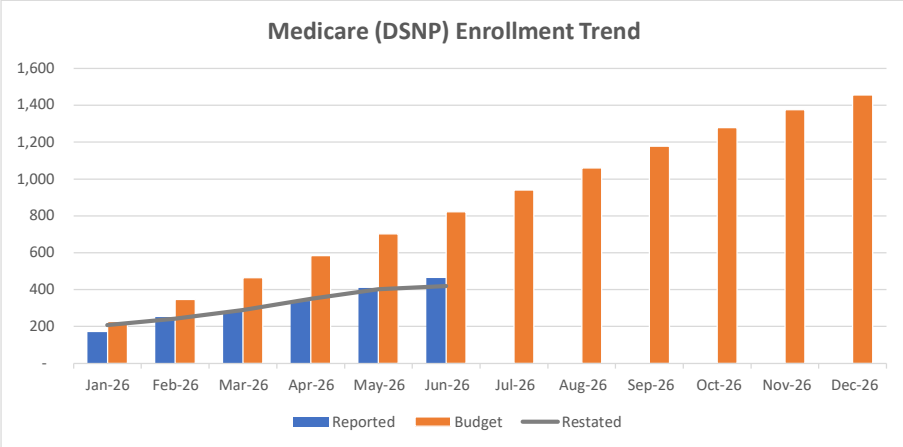
As of June, Tangible Net Equity totaled $24.5M, representing 498% of the required $4.9M. On a restated basis, Tangible Net Equity was 512% of required levels.

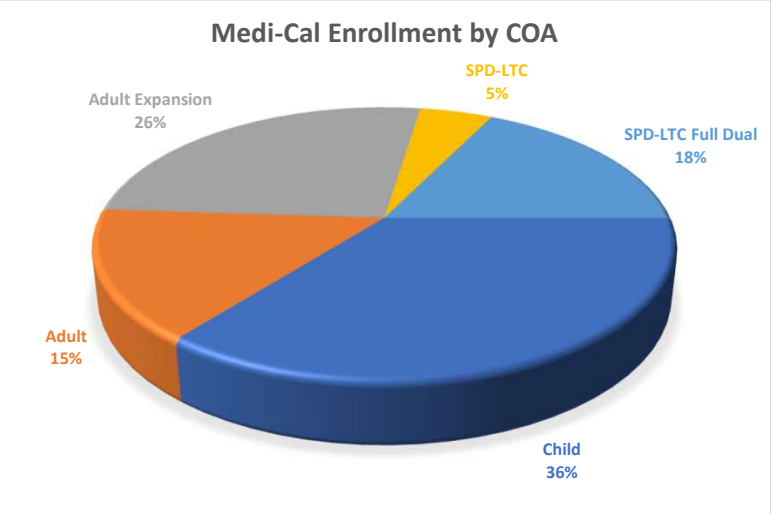
Community Health Plan of Imperial Valley
Enrollment Summary
For June 2026

	2025				2026				June				June (YTD)			
											B/(W)				B/(W)	
Category of Aid (COA)*	**Q1**	**Q2**	**Q3**	**Q4**	**Q1**	**Q2**	**Q3**	**Q4**	**Actual**	**Budget**	**#**	**%**	**Actual**	**Budget**	**#**	**%**
Child	35,139	35,129	34,728	34,555	34,434	33,656			33,656	32,109	1,547	5%	204,325	164,691	39,634	24%
Adult	15,801	15,754	15,471	15,306	14,887	14,267			14,267	14,077	190	1%	88,258	72,205	16,053	22%
Adult Expansion	25,995	26,028	25,808	25,988	25,493	24,715			24,715	23,785	930	4%	151,090	121,997	29,093	24%
SPD-LTC	4,693	4,790	4,662	4,684	4,640	4,577			4,577	4,739	(162)	-3%	27,805	23,380	4,425	19%
SPD-LTC Full Dual	16,381	16,614	16,823	16,835	17,026	17,015			17,015	17,655	(640)	-4%	101,681	87,015	14,666	17%
Total Medicaid	98,009	98,315	97,492	97,368	96,480	94,230	-	-	94,230	92,365	1,865	2%	573,159	469,288	103,871	22%
DSNP	-	-	-	-	282	463	-	-	463	822	(359)	-44%	1,911	2,325	(414)	-18%
Monthly/Quarterly Change		*0.3%*	*-0.8%*	*-0.1%*	*0.6%*	*-0.6%*			*-2.3%*	*-4.3%*			*-3.2%*	*-5.1%*		

** Source: DHCS 820 Remittance summary; includes retroactivity*







Medi-Cal Enrollment Trend (Restated)

	Mar-26	Apr-26	May-26	Jun-26	MoM Δ	% Δ
SIS						
Child	33,743	33,504	33,314	33,038	(276)	-0.8%
Adult	13,836	13,670	13,527	13,259	(268)	-2.0%
Adult Expansion	24,036	23,859	23,590	23,436	(154)	-0.7%
SPD-LTC	4,383	4,335	4,310	4,277	(33)	-0.8%
SPD-LTC Full Dual	16,351	16,323	16,314	16,172	(142)	-0.9%
Total SIS	**92,349**	**91,691**	**91,055**	**90,182**	**(873)**	**-1.0%**
% of Total	***96.2%***	***96.3%***	***96.3%***	***96.3%***		
UIS						
Child	504	519	516	532	16	3.1%
Adult	971	946	934	905	(29)	-3.1%
Adult Expansion	1,394	1,347	1,316	1,300	(16)	-1.2%
SPD-LTC	179	168	169	173	4	2.4%
SPD-LTC Full Dual	583	575	575	583	8	1.4%
Total UIS	**3,631**	**3,555**	**3,510**	**3,493**	**(17)**	**-0.5%**
% of Total	***3.8%***	***3.7%***	***3.7%***	***3.7%***		
Total	**95,980**	**95,246**	**94,565**	**93,675**	**(890)**	**-0.9%**

Community Health Plan of Imperial Valley

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

	June			June (YTD)			
	Actual	Budget	Variance - B/(W)	Actual	Budget	Variance - B/(W)	Current Month Explanations
REVENUE							
Medicaid Revenue	$ 27,061,767	$ 27,806,365	**$ (744,598)**	$ 197,873,624	$ 168,079,070	**$ 29,794,554**	- Medi-Cal revenue unfavorable on delayed maternity kick payments
Medicare Revenue	$ 1,002,614	$ 1,767,538	**$ (764,924)**	$ 4,063,643	$ 6,833,846	**$ (2,770,203)**	- Unfavorable on volume, partially offset by mid-year risk adjustment
Investment & Interest Income	$ 99,470	$ 122,565	**$ (23,095)**	$ 638,134	$ 734,741	**$ (96,607)**	- Investment income unfavorable due to interest rate pressure
TOTAL REVENUE	**$ 28,163,851**	**$ 29,696,467**	**$ (1,532,616)**	**$ 202,575,401**	**$ 175,647,657**	**$ 26,927,744**	
HEALTH CARE COSTS							
Global Capitation	$ 26,088,133	$ 26,672,155	**$ 584,023**	$ 192,164,858	$ 161,905,739	**$ (30,259,119)**	- Medicaid cap (HNT) favorable on maternity payment offset
Shared Risk Capitation	$ 269,679	$ 452,935	**$ 183,255**	$ 1,127,966	$ 1,759,078	**$ 631,112**	- Favorable volume, partially offset by mid-year risk adjustment to IPAs
FFS Claims	$ 595,648	$ 992,815	**$ 397,168**	$ 2,052,854	$ 3,818,271	**$ 1,765,418**	- Favorable medical cost trend in DSNP inpatient costs
Pharmacy (Net)	$ 204,783	$ 491,541	**$ 286,757**	$ 951,736	$ 1,923,995	**$ 972,258**	- Rx was favorable on both unit cost and utilization
All Other	$ 27,154	$ 70,208	**$ 43,054**	$ 115,866	$ 306,966	**$ 191,100**	
HEALTH CARE COSTS	**$ 27,185,397**	**$ 28,679,655**	$ 1,494,257	**$ 196,413,280**	**$ 169,714,048**	**$ (26,699,231)**	
Gross Margin	**$ 978,454**	**$ 1,016,813**	**$ (38,358)**	**$ 6,162,122**	**$ 5,933,609**	**$ 228,513**	
ADMINISTRATIVE EXPENSE							
Salaries & Wages	$ 499,997	$ 508,640	**$ 8,642**	$ 3,109,955	$ 3,095,070	**$ (14,886)**	
Benefits Expense	$ 64,226	$ 45,462	**$ (18,765)**	$ 343,993	$ 272,703	**$ (71,290)**	
Other Labor Expense	$ 1,530	$ 2,091	**$ 561**	$ 10,198	$ 11,713	**$ 1,515**	
Total Labor Costs	$ 565,754	$ 556,192	**$ (9,561)**	$ 3,464,146	$ 3,379,486	**$ (84,661)**	
Consulting, Legal, & Other Professional	$ 115,697	$ 143,459	**$ 27,762**	$ 358,887	$ 642,743	**$ 283,856**	- Favorable consulting in Operations and Executive departments
Outside Services	$ 37,946	$ 35,664	**$ (2,282)**	$ 275,017	$ 250,344	**$ (24,673)**	
MSO Fees	$ 117,739	$ 131,000	**$ 13,262**	$ 706,431	$ 786,000	**$ 79,569**	- Favorable due to unused contingency
Broker Commissions	$ 7,586	$ 13,032	**$ 5,447**	$ 24,908	$ 36,462	**$ 11,553**	
Advertising & Marketing	$ 6,262	$ 5,000	**$ (1,262)**	$ 42,952	$ 38,000	**$ (4,952)**	
Information Technology	$ 10,393	$ 6,385	**$ (4,008)**	$ 52,367	$ 42,731	**$ (9,636)**	
Membership and Subscriptions	$ 13,654	$ 12,544	**$ (1,110)**	$ 71,675	$ 71,439	**$ (236)**	
Regulatory Fees	$ 31,892	$ 23,949	**$ (7,943)**	$ 165,216	$ 143,694	**$ (21,522)**	
Travel	$ 2,969	$ 17,050	**$ 14,081**	$ 25,149	$ 71,050	**$ 45,901**	- Favorable due to DMHC audit conducted virtually
Occupancy & Facility	$ 2,337	$ 11,310	**$ 8,973**	$ 26,175	$ 68,215	**$ 42,040**	
Office Expense	$ 4,622	$ 5,035	**$ 413**	$ 35,500	$ 35,463	**$ (37)**	
Other Admin	$ (71,994)	$ 17,615	**$ 89,609**	$ 110,237	$ 83,169	**$ (27,068)**	- Favorable due to property tax refund
Total Administrative Expense	**$ 844,855**	**$ 978,234**	**$ 133,379**	**$ 5,358,661**	**$ 5,648,796**	**$ 290,135**	
Non-Operating Income/(Expense)							
Rental Income	$ 1,538	$ 1,494	**$ (45)**	$ 9,230	$ 8,961	**$ (269)**	
Depreciation & Amortization	$ (11,222)	$ (11,350)	$ 128	$ (67,240)	$ (68,100)	$ 860	
Change in Net Position	**$ 123,915**	**$ 28,722**	**$ 95,193**	**$ 745,451**	**$ 225,674**	**$ 519,777**	
Key Metrics							
Enrollment	94,230	92,365	**1,865**	573,159	561,653	**11,506**	
Medicaid Revenue PMPM	$ 288.61	$ 303.75	**$ (15.15)**	$ 346.39	$ 300.94		
Medicare Revenue PMPM	$ 2,165.47	$ 2,150.29	**$ 15.18**	$ 2,126.45	$ 2,171.54	**$ (45.09)**	
MLR (Medicaid)	97.0%	97.1%	**6 bps**	97.5%	97.1%	**(38) bps**	
MLR (Medicare)	93.0%	95.4%	**239 bps**	88.7%	95.7%	**702 bps**	
Admin Ratio	3.0%	3.3%	**29 bps**	2.6%	3.2%	**57 bps**	
FTEs	41	45	**4**	254	270	**16**	
Net Income PMPM	$1.32	$0.31	**$1.00**	$1.30	$0.40	**$0.90**	
Net Income %	0.4%	0.1%	**34 bps**	0.4%	0.1%	**24 bps**	

Community Health Plan of Imperial Valley

Community Health Plan of Imperial Valley
Product P&L
For June 2026

June

	Medi-Cal				Medicare				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	$ 26,558,177	$ 27,233,050	**$ (674,873)**	-2.5%	$ 176,889	$ 317,218	**$ (140,329)**	-44.2%	$ -	$ -	**$ -**	N/A	$ 176,889	$ 317,218	**$ (140,329)**	-44.2%	$ 26,735,066	$ 27,550,268	**$ (815,202)**	-3.0%
Pass-Through	$ 326,701	$ 256,097	**$ 70,604**	27.6%	$ -	$ -	**$ -**	N/A	$ -	$ -	**$ -**	N/A	$ -	$ -	**$ -**	N/A	$ 326,701	$ 256,097	**$ 70,604**	27.6%
Medicare																				
Part C Revenue					$ 734,887	$ 1,419,469	**$ (684,583)**	-48.2%	$ 734,887	$ 1,419,469	**$ (684,583)**	-48.2%	$ -	$ -	**$ -**	N/A	$ 734,887	$ 1,419,469	**$ (684,583)**	-48.2%
Part D Revenue					$ 129,163	$ 338,204	**$ (209,041)**	-61.8%	$ 129,163	$ 338,204	**$ (209,041)**	-61.8%	$ -	$ -	**$ -**	N/A	$ 129,163	$ 338,204	**$ (209,041)**	-61.8%
Other Medicare Revenue					$ 138,564	$ 9,864	**$ 128,700**	1304.7%	$ 138,564	$ 9,864	**$ 128,700**	1304.7%	$ -	$ -	**$ -**	N/A	$ 138,564	$ 9,864	**$ 128,700**	1304.7%
Other Revenue	$ 95,735	$ 117,565	**$ (21,829)**	-18.6%	$ 3,735	$ 5,000	**$ (1,265)**	-25.3%	$ 3,105	$ 5,000	**$ (1,895)**	-37.9%	$ 630	$ -	**$ 630**	N/A	$ 99,470	$ 122,565	**$ (23,095)**	-18.8%
TOTAL OPERATING REVENUE	**$ 26,980,613**	**$ 27,606,712**	**$ (626,098)**	**-2.3%**	**$ 1,183,238**	**$ 2,089,756**	**$ (906,518)**	**-43.4%**	**$ 1,005,719**	**$ 1,772,538**	**$ (766,819)**	**-43.3%**	**$ 177,519**	**$ 317,218**	**$ (139,699)**	**-44.0%**	**$ 28,163,851**	**$ 29,696,467**	**$ (1,532,616)**	**-5.2%**
HEALTHCARE COSTS																				
Medicaid Capitation	$ 25,761,432	$ 26,416,059	**$ 654,627**	2.5%													$ 25,761,432	$ 26,416,059	**$ 654,627**	2.5%
Medicaid Pass-Through	$ 326,701	$ 256,097	**$ (70,604)**	-27.6%													$ 326,701	$ 256,097	**$ (70,604)**	-27.6%
Total Medicaid	**$ 26,088,133**	**$ 26,672,155**	**$ 584,023**	**2.2%**													**$ 26,088,133**	**$ 26,672,155**	**$ 584,023**	**2.2%**
PCP Capitation					$ 269,679	$ 452,935	**$ 183,255**	40.5%	$ 257,294	$ 452,935	**$ 195,641**	43.2%	$ 12,386	$ -	**$ (12,386)**	N/A	$ 269,679	$ 452,935	**$ 183,255**	40.5%
Inpatient					$ 9,987	$ 332,894	**$ 322,907**	97.0%	$ 9,987	$ 332,894	**$ 322,907**	97.0%	$ -	$ -	**$ -**	N/A	$ 9,987	$ 332,894	**$ 322,907**	97.0%
Outpatient					$ 31,968	$ 121,118	**$ 89,150**	73.6%	$ 29,739	$ 121,118	**$ 91,379**	75.4%	$ 2,229	$ -	**$ (2,229)**	N/A	$ 31,968	$ 121,118	**$ 89,150**	73.6%
Other FFS					$ 60,322	$ 538,803	**$ 478,481**	88.8%	$ 20,898	$ 237,446	**$ 216,549**	91.2%	$ 39,425	$ 301,357	**$ 261,932**	86.9%	$ 60,322	$ 538,803	**$ 478,481**	88.8%
IBNR					$ 493,370	$ -	**$ (493,370)**	N/A	$ 331,130	$ -	**$ (331,130)**	N/A	$ 162,240	$ -	**$ (162,240)**	N/A	$ 493,370	$ -	**$ (493,370)**	N/A
Total FFS					**$ 595,648**	**$ 992,815**	**$ 397,168**	**40.0%**	**$ 391,754**	**$ 691,458**	**$ 299,704**	**43.3%**	**$ 203,893**	**$ 301,357**	**$ 97,464**	**32.3%**	**$ 595,648**	**$ 992,815**	**$ 397,168**	**40.0%**
Pharmacy (Gross)					$ 285,652	$ -	**$ (285,652)**	N/A	$ 285,652	$ -	**$ (285,652)**	N/A	$ -	$ -	**$ -**	N/A	$ 285,652	$ -	**$ (285,652)**	N/A
Federal Reinsurance					$ (43,530)	$ -	**$ 43,530**	N/A	$ (43,530)	$ -	**$ 43,530**	N/A	$ -	$ -	**$ -**	N/A	$ (43,530)	$ -	**$ 43,530**	N/A
LICS					$ (37,210)	$ -	**$ 37,210**	N/A	$ (37,210)	$ -	**$ 37,210**	N/A	$ -	$ -	**$ -**	N/A	$ (37,210)	$ -	**$ 37,210**	N/A
Other CMS Offsets					$ (23,286)	$ -	**$ 23,286**	N/A	$ (23,286)	$ -	**$ 23,286**	N/A	$ -	$ -	**$ -**	N/A	$ (23,286)	$ -	**$ 23,286**	N/A
OTC					$ 13,088	$ 31,636	**$ 18,549**	58.6%	$ 13,088	$ 31,636	**$ 18,549**	58.6%	$ -	$ -	**$ -**	N/A	$ 13,088	$ 31,636	**$ 18,549**	58.6%
Other Pharmacy					$ 10,069	$ 459,904	**$ 449,835**	97.8%	$ 10,069	$ 459,904	**$ 449,835**	97.8%	$ -	$ -	**$ -**	N/A	$ 10,069	$ 459,904	**$ 449,835**	97.8%
Total Pharmacy					**$ 204,783**	**$ 491,541**	**$ 286,757**	**58.3%**	**$ 204,783**	**$ 491,541**	**$ 286,757**	**58.3%**	**$ -**	**$ -**	**$ -**	**N/A**	**$ 204,783**	**$ 491,541**	**$ 286,757**	**58.3%**
Other Supplemental					$ 15,144	$ 42,076	**$ 26,932**	64.0%	$ 15,144	$ 42,076	**$ 26,932**	64.0%	$ -	$ -	**$ -**	N/A	$ 15,144	$ 42,076	**$ 26,932**	64.0%
Other Medical					$ 99	$ -	**$ (99)**	N/A	$ 99	$ -	**$ (99)**	N/A	$ -	$ -	**$ -**	N/A	$ 99	$ -	**$ (99)**	N/A
Reinsurance (Net)					$ 11,912	$ 9,910	**$ (2,002)**	-20.2%	$ 11,912	$ 9,910	**$ (2,002)**	-20.2%	$ -	$ -	**$ -**	N/A	$ 11,912	$ 9,910	**$ (2,002)**	-20.2%
Community Reinvestment	$ -	$ 18,223	**$ 18,223**	100.0%	$ -	$ -	**$ -**	N/A	$ -	$ -	**$ -**	N/A	$ -	$ -	**$ -**	N/A	$ -	$ 18,223	**$ 18,223**	100.0%
TOTAL HEALTHCARE COSTS	**$ 26,088,133**	**$ 26,690,378**	**$ 602,245**	**2.3%**	**$ 1,097,264**	**$ 1,989,276**	**$ 892,012**	**44.8%**	**$ 880,985**	**$ 1,687,919**	**$ 806,934**	**47.8%**	**$ 216,279**	**$ 301,357**	**$ 85,078**	**28.2%**	**$ 27,185,397**	**$ 28,679,655**	**$ 1,494,257**	**5.2%**
Gross Margin	**$ 892,481**	**$ 916,333**	**$ (23,853)**	**-2.6%**	**$ 85,973**	**$ 100,479**	**$ (14,506)**	**-14.4%**	**$ 124,733**	**$ 84,618**	**$ 40,115**	**47.4%**	**$ (38,760)**	**$ 15,861**	**$ (54,621)**	**-344.4%**	**$ 978,454**	**$ 1,016,813**	**$ (38,358)**	**-3.8%**
Total Administrative Expense	**$ 420,991**	**$ 485,775**	**$ 64,784**	**13.3%**	**$ 423,863**	**$ 492,458**	**$ 68,595**	**13.9%**	**$ 397,009**	**$ 459,530**	**$ 62,521**	**13.6%**	**$ 26,855**	**$ 32,928**	**$ 6,074**	**18.4%**	**$ 844,855**	**$ 978,234**	**$ 133,379**	**13.6%**
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	$ (10,801)	$ (11,249)	**$ 448**	-4.0%	$ (421)	$ (101)	**$ (320)**	317.1%	$ (350)	$ (91)	**$ (259)**	285.3%	$ (71)	$ (10)	**$ (61)**	603.4%	$ (11,222)	$ (11,350)	**$ 128**	-1.1%
Change in Net Position	**$ 462,226**	**$ 420,803**	**$ 41,424**	**9.8%**	**$ (338,311)**	**$ (392,080)**	**$ 53,769**	**-13.7%**	**$ (272,626)**	**$ (375,002)**	**$ 102,377**	**-27.3%**	**$ (65,685)**	**$ (17,078)**	**$ (48,608)**	**284.6%**	**$ 123,915**	**$ 28,722**	**$ 95,193**	**331.4%**
Key Metrics																				
Enrollment	93,767	91,543	2,224	2.4%	463	822	(359)	-43.7%	463	822	(359)	-43.7%	463	822	(359)	-43.7%	94,230	92,365	1,865	2.0%
Revenue PMPM	$287.74	$301.57	($13.83)	-4.6%	$2,555.59	$2,542.28	$13.31	0.5%	$2,172.18	$2,156.37	$15.81	0.7%	$383.41	$385.91	($2.50)	-0.6%	$298.88	$321.51	($22.63)	-7.0%
MLR	96.69%	96.68%	-1 bps		92.73%	95.19%	246 bps		87.60%	95.23%	763 bps		121.83%	95.00%	-2683 bps		96.53%	96.58%	5 bps	
Admin Ratio	1.6%	1.8%	20 bps		35.8%	23.6%	-1226 bps		39.5%	25.9%	-1355 bps		15.1%	10.4%	-475 bps		3.0%	3.3%	29 bps	
Net Income PMPM	$4.93	$4.60	$0.33	7.2%	($730.69)	($476.98)	($253.71)	53.2%	($588.82)	($456.21)	($132.62)	29.1%	($141.87)	($20.78)	($121.09)	582.9%	$1.32	$0.31	$1.00	322.9%
Net Income %	1.7%	1.5%	19 bps		-28.6%	-18.8%	-983 bps		-27.1%	-21.2%	-595 bps		-37.0%	-5.4%	-3162 bps		0.4%	0.1%	34 bps	
Gross Margin Vol Variance			$ 22,262				$ (43,883)				$ (36,956)				$ (6,927)				$ 20,531	
Gross Margin Rate Variance			$ (46,115)				$ 29,378				$ 77,071				$ (47,694)				$ (58,890)	

Community Health Plan of Imperial Valley

Community Health Plan of Imperial Valley
Product P&L
For June 2026

June (YTD)

	Medi-Cal				Medicare				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	$ 166,057,494	$ 165,295,745	**$ 761,750**	0.5%	$ 727,041	$ 1,214,459	**$ (487,418)**	-40.1%	$ -	$ -	**$ -**	N/A	$ 727,041	$ 1,214,459	**$ (487,418)**	-40.1%	$ 166,784,536	$ 166,510,204	**$ 274,332**	0.2%
Pass-Through	$ 31,089,088	$ 1,568,866	**$ 29,520,222**	NM	$ -	$ -	**$ -**	N/A	$ -	$ -	**$ -**	N/A	$ -	$ -	**$ -**	N/A	$ 31,089,088	$ 1,568,866	**$ 29,520,222**	NM
Medicare																				
Part C Revenue					$ 3,215,032	$ 5,491,005	**$ (2,275,972)**	-41.4%	$ 3,215,032	$ 5,491,005	**$ (2,275,972)**	-41.4%	$ -	$ -	**$ -**	N/A	$ 3,215,032	$ 5,491,005	**$ (2,275,972)**	-41.4%
Part D Revenue					$ 680,747	$ 1,305,077	**$ (624,330)**	-47.8%	$ 680,747	$ 1,305,077	**$ (624,330)**	-47.8%	$ -	$ -	**$ -**	N/A	$ 680,747	$ 1,305,077	**$ (624,330)**	-47.8%
Other Medicare Revenue					$ 167,864	$ 37,764	**$ 130,100**	344.5%	$ 167,864	$ 37,764	**$ 130,100**	344.5%	$ -	$ -	**$ -**	N/A	$ 167,864	$ 37,764	**$ 130,100**	344.5%
Other Revenue	$ 620,980	$ 704,741	**$ (83,762)**	-11.9%	$ 17,154	$ 30,000	**$ (12,846)**	-42.8%	$ 14,334	$ 30,000	**$ (15,666)**	-52.2%	$ 2,821	$ -	**$ 2,821**	N/A	$ 638,134	$ 734,741	**$ (96,607)**	-13.1%
TOTAL OPERATING REVENUE	**$ 197,767,563**	**$ 167,569,352**	**$ 30,198,210**	**18.0%**	**$ 4,807,839**	**$ 8,078,305**	**$ (3,270,466)**	**-40.5%**	**$ 4,077,977**	**$ 6,863,846**	**$ (2,785,869)**	**-40.6%**	**$ 729,862**	**$ 1,214,459**	**$ (484,597)**	**-39.9%**	**$ 202,575,401**	**$ 175,647,657**	**$ 26,927,744**	**15.3%**
HEALTHCARE COSTS																				
Medicaid Capitation	$ 161,075,770	$ 160,336,873	**$ (738,897)**	-0.5%													$ 161,075,770	$ 160,336,873	**$ (738,897)**	-0.5%
Medicaid Pass-Through	$ 31,089,088	$ 1,568,866	**$ (29,520,222)**	NM													$ 31,089,088	$ 1,568,866	**$ (29,520,222)**	NM
Total Medicaid	**$ 192,164,858**	**$ 161,905,739**	**$ (30,259,119)**	**-18.7%**													**$ 192,164,858**	**$ 161,905,739**	**$ (30,259,119)**	**-18.7%**
PCP Capitation					$ 1,127,966	$ 1,759,078	**$ 631,112**	35.9%	$ 1,075,008	$ 1,759,078	**$ 684,070**	38.9%	$ 52,958	$ -	**$ (52,958)**	N/A	$ 1,127,966	$ 1,759,078	**$ 631,112**	35.9%
Inpatient					$ 285,863	$ 1,282,808	**$ 996,945**	77.7%	$ 285,302	$ 1,282,808	**$ 997,506**	77.8%	$ 561	$ -	**$ (561)**	N/A	$ 285,863	$ 1,282,808	**$ 996,945**	77.7%
Outpatient					$ 108,842	$ 466,579	**$ 357,737**	76.7%	$ 98,627	$ 466,579	**$ 367,951**	78.9%	$ 10,215	$ -	**$ (10,215)**	N/A	$ 108,842	$ 466,579	**$ 357,737**	76.7%
Other FFS					$ 123,082	$ 2,068,884	**$ 1,945,802**	94.1%	$ 59,140	$ 915,149	**$ 856,009**	93.5%	$ 63,943	$ 1,153,736	**$ 1,089,793**	94.5%	$ 123,082	$ 2,068,884	**$ 1,945,802**	94.1%
IBNR					$ 1,535,066	$ -	**$ (1,535,066)**	N/A	$ 1,204,512	$ -	**$ (1,204,512)**	N/A	$ 330,554	$ -	**$ (330,554)**	N/A	$ 1,535,066	$ -	**$ (1,535,066)**	N/A
Total FFS					**$ 2,052,854**	**$ 3,818,271**	**$ 1,765,418**	**46.2%**	**$ 1,647,581**	**$ 2,664,535**	**$ 1,016,955**	**38.2%**	**$ 405,273**	**$ 1,153,736**	**$ 748,463**	**64.9%**	**$ 2,052,854**	**$ 3,818,271**	**$ 1,765,418**	**46.2%**
Pharmacy (Gross)					$ 1,325,832	$ -	**$ (1,325,832)**	N/A	$ 1,325,832	$ -	**$ (1,325,832)**	N/A	$ -	$ -	**$ -**	N/A	$ 1,325,832	$ -	**$ (1,325,832)**	N/A
Federal Reinsurance					$ (144,840)	$ -	**$ 144,840**	N/A	$ (144,840)	$ -	**$ 144,840**	N/A	$ -	$ -	**$ -**	N/A	$ (144,840)	$ -	**$ 144,840**	N/A
LICS					$ (235,569)	$ -	**$ 235,569**	N/A	$ (235,569)	$ -	**$ 235,569**	N/A	$ -	$ -	**$ -**	N/A	$ (235,569)	$ -	**$ 235,569**	N/A
Other CMS Offsets					$ (93,188)	$ -	**$ 93,188**	N/A	$ (93,188)	$ -	**$ 93,188**	N/A	$ -	$ -	**$ -**	N/A	$ (93,188)	$ -	**$ 93,188**	N/A
OTC					$ 50,439	$ 122,470	**$ 72,031**	58.8%	$ 50,439	$ 122,470	**$ 72,031**	58.8%	$ -	$ -	**$ -**	N/A	$ 50,439	$ 122,470	**$ 72,031**	58.8%
Other Pharmacy					$ 49,063	$ 1,801,525	**$ 1,752,462**	97.3%	$ 49,063	$ 1,801,525	**$ 1,752,462**	97.3%	$ -	$ -	**$ -**	N/A	$ 49,063	$ 1,801,525	**$ 1,752,462**	97.3%
Total Pharmacy					**$ 951,736**	**$ 1,923,995**	**$ 972,258**	**50.5%**	**$ 951,736**	**$ 1,923,995**	**$ 972,258**	**50.5%**	**$ -**	**$ -**	**$ -**	**N/A**	**$ 951,736**	**$ 1,923,995**	**$ 972,258**	**50.5%**
Other Supplemental					$ 67,037	$ 162,882	**$ 95,846**	58.8%	$ 52,073	$ 162,882	**$ 110,809**	68.0%	$ 14,964	$ -	**$ (14,964)**	N/A	$ 67,037	$ 162,882	**$ 95,846**	58.8%
Other Medical					$ 500	$ -	**$ (500)**	N/A	$ 500	$ -	**$ (500)**	N/A	$ -	$ -	**$ -**	N/A	$ 500	$ -	**$ (500)**	N/A
Reinsurance (Net)					$ 48,329	$ 37,939	**$ (10,390)**	-27.4%	$ 48,329	$ 37,939	**$ (10,390)**	-27.4%	$ -	$ -	**$ -**	N/A	$ 48,329	$ 37,939	**$ (10,390)**	-27.4%
Community Reinvestment	$ -	$ 106,144	**$ 106,144**	100.0%	$ -	$ -	**$ -**	N/A	$ -	$ -	**$ -**	N/A	$ -	$ -	**$ -**	N/A	$ -	$ 106,144	**$ 106,144**	100.0%
TOTAL HEALTHCARE COSTS	**$ 192,164,858**	**$ 162,011,883**	**$ (30,152,975)**	**-18.6%**	**$ 4,248,422**	**$ 7,702,165**	**$ 3,453,744**	**44.8%**	**$ 3,775,228**	**$ 6,548,429**	**$ 2,773,202**	**42.3%**	**$ 473,194**	**$ 1,153,736**	**$ 680,542**	**59.0%**	**$ 196,413,280**	**$ 169,714,048**	**$ (26,699,231)**	**-15.7%**
					$ -	$ -	**$ -**	427.0%	$ -	$ -	**$ -**	443.4%	$ -	$ -	**$ -**	35.5%	$ -	$ -	**$ -**	
Gross Margin	**$ 5,602,704**	**$ 5,557,469**	**$ 45,235**	**0.8%**	**$ 559,417**	**$ 376,140**	**$ 183,278**	**48.7%**	**$ 302,749**	**$ 315,417**	**$ (12,668)**	**-4.0%**	**$ 256,668**	**$ 60,723**	**$ 195,945**	**322.7%**	**$ 6,162,122**	**$ 5,933,609**	**$ 228,513**	**3.9%**
Total Administrative Expense	**$ 2,999,691**	**$ 2,991,557**	**$ (8,134)**	**-0.3%**	**$ 2,358,969**	**$ 2,657,239**	**$ 298,270**	**11.2%**	**$ 2,172,057**	**$ 2,457,994**	**$ 285,936**	**11.6%**	**$ 186,912**	**$ 199,246**	**$ 12,333**	**6.2%**	**$ 5,358,661**	**$ 5,648,796**	**$ 290,135**	**5.1%**
Non-Operating Income/(Expense)																				
Rental Income	$ 9,230	$ 8,961	**$ 269**	3.0%	$ -	$ -	**$ -**	N/A	$ -	$ -	**$ -**	N/A	$ -	$ -	**$ -**	N/A	$ 9,230	$ 8,961	**$ 269**	3.0%
Depreciation & Amortization	$ (65,426)	$ (67,717)	**$ 2,291**	-3.4%	$ (1,814)	$ (383)	**$ (1,431)**	373.6%	$ (1,530)	$ (345)	**$ (1,185)**	344.0%	$ (284)	$ (38)	**$ (245)**	640.4%	$ (67,240)	$ (68,100)	**$ 860**	-1.3%
Change in Net Position	**$ 2,546,817**	**$ 2,507,156**	**$ 39,660**	**1.6%**	**$ (1,801,366)**	**$ (2,281,482)**	**$ 480,117**	**-21.0%**	**$ (1,870,838)**	**$ (2,142,921)**	**$ 272,083**	**-12.7%**	**$ 69,473**	**$ (138,561)**	**$ 208,033**	**-150.1%**	**$ 745,451**	**$ 225,674**	**$ 519,777**	**230.3%**
Key Metrics																				
Enrollment	571,248	558,506	12,742	2.3%	1,911	3,147	(1,236)	-39.3%	1,911	3,147	(1,236)	-39.3%	1,911	3,147	(1,236)	-39.3%	94,230	92,365	1,865	2.0%
Revenue PMPM	$346.20	$300.03	$46.17	15.4%	$2,515.88	$2,566.99	($51.11)	-2.0%	$2,133.95	$2,181.08	($47.13)	-2.2%	$381.93	$385.91	($3.98)	-1.0%	$2,149.80	$1,901.67	$248.13	13.0%
MLR	97.17%	96.68%	-48 bps		88.36%	95.34%	698 bps		92.58%	95.40%	283 bps		64.83%	95.00%	3017 bps		96.96%	96.62%	-34 bps	
Admin Ratio	1.5%	1.8%	27 bps		49.1%	32.9%	-1617 bps		53.3%	35.8%	-1745 bps		25.6%	16.4%	-920 bps		2.6%	3.2%	57 bps	
Net Income PMPM	$4.46	$4.49	($0.03)	-0.7%	($942.63)	($724.97)	($217.66)	30.0%	($978.98)	($680.94)	($298.04)	43.8%	$36.35	($44.03)	$80.38	-182.6%	$7.91	$2.44	$5.47	223.8%
Net Income %	1.3%	1.5%	-21 bps		-37.5%	-28.2%	-923 bps		-45.9%	-31.2%	-1466 bps		9.5%	-11.4%	2093 bps		0.4%	0.1%	24 bps	
Gross Margin Vol Variance			$ 126,791				$ (147,731)				$ (123,882)				$ (23,849)				$ 119,809	
Gross Margin Rate Variance			$ (81,555)				$ 331,008				$ 111,214				$ 219,794				$ 108,703	

Community Health Plan of Imperial Valley

Community Health Plan of Imperial Valley
Change in Net Position Trend
For June 2026

($,000)	Actual						Budget						Full Year		
	January	February	March	April	May	June	July	August	September	October	November	December	Act+Budget	Budget	B/(W)
REVENUE															
Medicaid Revenue	$ 26,354	$ 59,555	$ 27,661	$ 28,255	$ 28,988	$ 27,062	$ 27,723	$ 27,679	$ 27,627	$ 27,575	$ 27,523	$ 27,471	$ 363,472	$ 333,677	$ 29,795
Medicare Revenue	$ 389	$ 567	$ 566	$ 673	$ 866	$ 1,003	$ 2,010	$ 2,242	$ 2,490	$ 2,681	$ 2,875	$ 3,029	$ 19,391	$ 22,161	$ (2,770)
Investment & Interest Income	$ 96	$ 89	$ 156	$ 98	$ 100	$ 99	$ 123	$ 123	$ 123	$ 123	$ 123	$ 123	$ 1,373	$ 1,470	$ (97)
TOTAL REVENUE	**$ 26,838**	**$ 60,210**	**$ 28,383**	**$ 29,026**	**$ 29,954**	**$ 28,164**	**$ 29,855**	**$ 30,043**	**$ 30,240**	**$ 30,379**	**$ 30,521**	**$ 30,623**	**$ 384,236**	**$ 357,309**	**$ 26,928**
HEALTH CARE COSTS															
Global Capitation	$ 25,509	$ 58,559	$ 26,739	$ 27,294	$ 27,976	$ 26,088	$ 26,546	$ 26,459	$ 26,364	$ 26,277	$ 26,189	$ 26,109	$ 350,110	$ 319,851	$ (30,259)
Shared Risk Capitation	$ 100	$ 143	$ 165	$ 225	$ 225	$ 270	$ 516	$ 576	$ 638	$ 687	$ 737	$ 777	$ 5,059	$ 5,690	$ 631
FFS Claims	$ 201	$ 343	$ 323	$ 306	$ 285	$ 596	$ 1,082	$ 1,282	$ 1,386	$ 1,571	$ 1,645	$ 1,624	$ 10,643	$ 12,408	$ 1,765
Pharmacy (Net)	$ 103	$ 41	$ 78	$ 316	$ 209	$ 205	$ 583	$ 668	$ 715	$ 842	$ 842	$ 905	$ 5,508	$ 6,480	$ 972
All Other	$ 10	$ 10	$ 58	$ 21	$ (10)	$ 27	$ 75	$ 86	$ 89	$ 100	$ 104	$ 100	$ 670	$ 861	$ 191
HEALTH CARE COSTS	**$ 25,922**	**$ 59,095**	**$ 27,363**	**$ 28,162**	**$ 28,685**	**$ 27,185**	**$ 28,803**	**$ 29,070**	**$ 29,192**	**$ 29,477**	**$ 29,518**	**$ 29,515**	**$ 371,990**	**$ 345,291**	**$ (26,699)**
Gross Margin	**$ 916**	**$ 1,115**	**$ 1,020**	**$ 864**	**$ 1,268**	**$ 978**	**$ 1,052**	**$ 973**	**$ 1,048**	**$ 902**	**$ 1,003**	**$ 1,107**	**$ 12,246**	**$ 12,018**	**$ 229**
Medical Gross Margin	*$ 820*	*$ 1,026*	*$ 864*	*$ 766*	*$ 1,169*	*$ 879*	*$ 929*	*$ 851*	*$ 925*	*$ 779*	*$ 880*	*$ 984*	*$ 10,873*	*$ 10,548*	*$ 325*
ADMINISTRATIVE EXPENSE															
Salaries & Wages	$ 556	$ 462	$ 501	$ 518	$ 573	$ 500	$ 523	$ 523	$ 533	$ 532	$ 532	$ 545	$ 6,298	$ 6,283	$ (15)
Benefits Expense	$ 52	$ 48	$ 57	$ 52	$ 71	$ 64	$ 47	$ 47	$ 47	$ 47	$ 47	$ 50	$ 629	$ 558	$ (71)
Other Labor Expense	$ 1	$ 3	$ 1	$ 2	$ 2	$ 2	$ 2	$ 2	$ 2	$ 2	$ 2	$ 2	$ 24	$ 26	$ 2
Total Labor Costs	$ 609	$ 513	$ 559	$ 571	$ 645	$ 566	$ 572	$ 571	$ 582	$ 582	$ 582	$ 598	$ 6,951	$ 6,867	$ (85)
Consulting, Legal, & Other Professional	$ 47	$ 78	$ 24	$ 73	$ 21	$ 116	$ 54	$ 49	$ 49	$ 43	$ 52	$ 72	$ 677	$ 961	$ 284
Outside Services	$ 47	$ 50	$ 44	$ 54	$ 42	$ 38	$ 36	$ 36	$ 36	$ 35	$ 35	$ 35	$ 488	$ 463	$ (25)
MSO Fees	$ 118	$ 118	$ 118	$ 118	$ 118	$ 118	$ 131	$ 131	$ 131	$ 131	$ 131	$ 131	$ 1,492	$ 1,572	$ 80
Broker Commissions	$ 0	$ 3	$ 3	$ 5	$ 6	$ 8	$ 17	$ 21	$ 27	$ 31	$ 36	$ 36	$ 193	$ 205	$ 12
Advertising & Marketing	$ 9	$ 2	$ 12	$ 4	$ 11	$ 6	$ 3	$ 3	$ 18	$ 4	$ 4	$ 6	$ 83	$ 76	$ (7)
Information Technology	$ 5	$ 10	$ 6	$ 10	$ 10	$ 10	$ 6	$ 6	$ 10	$ 7	$ 7	$ 7	$ 95	$ 86	$ (10)
Membership and Subscriptions	$ 11	$ 11	$ 11	$ 11	$ 13	$ 14	$ 14	$ 14	$ 14	$ 17	$ 14	$ 14	$ 160	$ 160	$ (0)
Regulatory Fees	$ 26	$ 25	$ 25	$ 25	$ 31	$ 32	$ 24	$ 24	$ 24	$ 24	$ 24	$ 24	$ 309	$ 287	$ (22)
Travel	$ 4	$ 4	$ 6	$ 5	$ 3	$ 3	$ 11	$ 11	$ 14	$ 11	$ 8	$ 16	$ 97	$ 143	$ 46
Occupancy & Facility	$ 3	$ 5	$ 7	$ 4	$ 4	$ 2	$ 11	$ 11	$ 11	$ 11	$ 11	$ 11	$ 93	$ 135	$ 42
Office Expense	$ 6	$ 4	$ 7	$ 5	$ 10	$ 5	$ 5	$ 5	$ 13	$ 5	$ 5	$ 5	$ 75	$ 75	$ (0)
Other Admin	$ 35	$ 34	$ 36	$ 35	$ 41	$ (72)	$ 11	$ 11	$ 18	$ 18	$ 11	$ 15	$ 194	$ 169	$ (25)
Total Administrative Expense	**$ 921**	**$ 857**	**$ 858**	**$ 922**	**$ 956**	**$ 845**	**$ 895**	**$ 894**	**$ 948**	**$ 920**	**$ 921**	**$ 972**	**$ 10,909**	**$ 11,199**	**$ 290**
Non-Operating Income/(Expense)															
Rental Income	$ 2	$ 2	$ 2	$ 2	$ 2	$ 2	$ 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**	**$ 124**	**$ 147**	**$ 69**	**$ 90**	**$ (28)**	**$ 71**	**$ 125**	**$ 1,220**	**$ 700**	**$ 520**
Key Metrics															
Enrollment	96,417	95,865	96,480	95,359	94,808	94,230	91,864	91,537	91,174	90,811	90,448	90,085	1,119,078	1,107,572	11,506
Medical MLR	96.9%	98.3%	96.9%	97.4%	96.1%	96.9%	96.9%	97.2%	96.9%	97.4%	97.1%	96.8%	97.2%	97.0%	-12 bps
Admin Ratio	3.4%	1.4%	3.0%	3.2%	3.2%	3.0%	3.0%	3.0%	3.1%	3.0%	3.0%	3.2%	2.8%	3.1%	30 bps
FTEs	42	42	42	43	44	41	46	46	47	47	47	52	539	555	16
Net Income PMPM	($0.14)	$2.59	$1.58	($0.71)	$3.19	$1.32	$1.60	$0.76	$0.98	($0.31)	$0.79	$1.39	$1.09	$0.63	$0.46
Net Income %	-0.1%	0.4%	0.5%	-0.2%	1.0%	0.4%	0.5%	0.2%	0.3%	-0.1%	0.2%	0.4%	0.3%	0.2%	12 bps

Community Health Plan of Imperial Valley

Community Health Plan of Imperial Valley
Medicare PMPM Detail
For June 2026

	June								June (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	$ 176,889	$ 317,218	**$ (140,329)**	-44.2%	$ 382.05	$ 385.91	**$ (3.86)**	-1.0%	$ 727,041	$ 1,214,459	**$ (487,418)**	-40.1%	$ 380.45	$ 385.91	**$ (5.46)**	-1.4%
Pass-Through	$ -	$ -	**$ -**	N/A	$ -	$ -	**$ -**	N/A	$ -	$ -	**$ -**	N/A	$ -	$ -	**$ -**	N/A
Medicare																
Part C Revenue	$ 734,887	$ 1,419,469	**$ (684,583)**	-48.2%	$ 1,587.23	$ 1,726.85	**$ (139.62)**	-8.1%	$ 3,215,032	$ 5,491,005	**$ (2,275,972)**	-41.4%	$ 1,682.38	$ 1,744.84	**$ (62.46)**	-3.6%
Part D Revenue	$ 129,163	$ 338,204	**$ (209,041)**	-61.8%	$ 278.97	$ 411.44	**$ (132.47)**	-32.2%	$ 680,747	$ 1,305,077	**$ (624,330)**	-47.8%	$ 356.23	$ 414.71	**$ (58.48)**	-14.1%
Other Medicare Revenue	$ 138,564	$ 9,864	**$ 128,700**	1304.7%	$ 299.27	$ 12.00	**$ 287.27**	2393.9%	$ 167,864	$ 37,764	**$ 130,100**	344.5%	$ 87.84	$ 12.00	**$ 75.84**	632.0%
Other Revenue	$ 3,735	$ 5,000	**$ (1,265)**	-25.3%	$ 8.07	$ 6.08	**$ 1.98**	32.6%	$ 17,154	$ 30,000	**$ (12,846)**	-42.8%	$ 8.98	$ 9.53	**$ (0.56)**	-5.8%
TOTAL OPERATING REVENUE	**$ 1,183,238**	**$ 2,089,756**	**$ (906,518)**	**-43.4%**	**$ 2,555.59**	**$ 2,542.28**	**$ 13.31**	**0.5%**	**$ 4,807,839**	**$ 8,078,305**	**$ (3,270,466)**	**-40.5%**	**$ 2,515.88**	**$ 2,566.99**	**$ (51.11)**	**-2.0%**
HEALTHCARE COSTS																
PCP Capitation	$ 269,679	$ 452,935	**$ 183,255**	40.5%	$ 582.46	$ 551.02	**$ (31.45)**	-5.7%	$ 1,127,966	$ 1,759,078	**$ 631,112**	35.9%	$ 590.25	$ 558.97	**$ (31.28)**	-5.6%
Hospital Risk Pool	$ -	$ 1,403	**$ 1,403**	NM	$ -	$ 1.71	**$ 1.71**	NM	$ 49,811	$ 5,382	**$ (44,428)**	NM	$ 26.07	$ 1.71	**$ (24.35)**	NM
Inpatient	$ 9,987	$ 332,894	**$ 322,907**	97.0%	$ 21.57	$ 404.98	**$ 383.41**	94.7%	$ 285,863	$ 1,282,808	**$ 996,945**	77.7%	$ 149.59	$ 407.63	**$ 258.04**	63.3%
Outpatient	$ 31,968	$ 121,118	**$ 89,150**	73.6%	$ 69.05	$ 147.35	**$ 78.30**	53.1%	$ 108,842	$ 466,579	**$ 357,737**	76.7%	$ 56.96	$ 148.26	**$ 91.31**	61.6%
Other FFS	$ 60,322	$ 538,803	**$ 478,481**	88.8%	$ 130.29	$ 655.48	**$ 525.19**	80.1%	$ 123,082	$ 2,068,884	**$ 1,945,802**	94.1%	$ 64.41	$ 657.41	**$ 593.01**	90.2%
IBNR	$ 493,370	$ -	**$ (493,370)**	N/A	$ 1,065.59	$ -	**$ (1,065.59)**	N/A	$ 1,535,066	$ -	**$ (1,535,066)**	N/A	$ 803.28	$ -	**$ (803.28)**	N/A
Total FFS	**$ 595,648**	**$ 992,815**	**$ 397,168**	**40.0%**	**$ 1,286.50**	**$ 1,207.80**	**$ (78.69)**	**-6.5%**	**$ 2,052,854**	**$ 3,818,271**	**$ 1,765,418**	**46.2%**	**$ 1,074.23**	**$ 1,213.31**	**$ 139.08**	**11.5%**
Pharmacy (Gross)	$ 285,652	$ -	**$ (285,652)**	N/A	$ 616.96	$ -	**$ (616.96)**	N/A	$ 1,325,832	$ -	**$ (1,325,832)**	N/A	$ 693.79	$ -	**$ (693.79)**	N/A
Federal Reinsurance	$ (43,530)	$ -	**$ 43,530**	N/A	$ (94.02)	$ -	**$ 94.02**	N/A	$ (144,840)	$ -	**$ 144,840**	N/A	$ (75.79)	$ -	**$ 75.79**	N/A
LICS	$ (37,210)	$ -	**$ 37,210**	N/A	$ (80.37)	$ -	**$ 80.37**	N/A	$ (235,569)	$ -	**$ 235,569**	N/A	$ (123.27)	$ -	**$ 123.27**	N/A
Other CMS Offsets	$ (23,286)	$ -	**$ 23,286**	N/A	$ (50.29)	$ -	**$ 50.29**	N/A	$ (93,188)	$ -	**$ 93,188**	N/A	$ (48.76)	$ -	**$ 48.76**	N/A
OTC	$ 13,088	$ 31,636	**$ 18,549**	58.6%	$ 28.27	$ 38.49	**$ 10.22**	26.6%	$ 50,439	$ 122,470	**$ 72,031**	58.8%	$ 26.39	$ 38.92	**$ 12.52**	32.2%
Other Pharmacy	$ 10,069	$ 459,904	**$ 449,835**	97.8%	$ 21.75	$ 559.49	**$ 537.75**	96.1%	$ 49,063	$ 1,801,525	**$ 1,752,462**	97.3%	$ 25.67	$ 572.46	**$ 546.78**	95.5%
Total Pharmacy	**$ 204,783**	**$ 491,541**	**$ 286,757**	**58.3%**	**$ 442.30**	**$ 597.98**	**$ 155.68**	**26.0%**	**$ 951,736**	**$ 1,923,995**	**$ 972,258**	**50.5%**	**$ 498.03**	**$ 611.37**	**$ 113.34**	**18.5%**
Other Supplemental	$ 15,144	$ 42,076	**$ 26,932**	64.0%	$ 32.71	$ 51.19	**$ 18.48**	36.1%	$ 67,037	$ 162,882	**$ 95,846**	58.8%	$ 35.08	$ 51.76	**$ 16.68**	32.2%
Other Medical	$ 99	$ -	**$ (99)**	N/A	$ 0.21	$ -	**$ (0.21)**	N/A	$ 500	$ -	**$ (500)**	N/A	$ 0.26	$ -	**$ (0.26)**	N/A
Reinsurance (Net)	$ 11,912	$ 9,910	**$ (2,002)**	-20.2%	$ 25.73	$ 12.06	**$ (13.67)**	-113.4%	$ 48,329	$ 37,939	**$ (10,390)**	-27.4%	$ 25.29	$ 12.06	**$ (13.23)**	-109.8%
Community Reinvestment	$ -	$ -	**$ -**	N/A	$ -	$ -	**$ -**	N/A	$ -	$ -	**$ -**	N/A	$ -	$ -	**$ -**	N/A
TOTAL HEALTHCARE COSTS	**$ 1,097,264**	**$ 1,989,276**	**$ 892,012**	**44.8%**	**$ 2,369.90**	**$ 2,420.04**	**$ 50.14**	**2.1%**	**$ 4,248,422**	**$ 7,702,165**	**$ 3,453,744**	**44.8%**	**$ 2,223.14**	**$ 2,447.46**	**$ 224.32**	**9.2%**
Gross Margin	**$ 85,973**	**$ 100,479**	**$ (14,506)**	**-14.4%**	**$ 185.69**	**$ 122.24**	**$ 63.45**	**51.9%**	**$ 559,417**	**$ 376,140**	**$ 183,278**	**48.7%**	**$ 292.74**	**$ 119.52**	**$ 173.21**	**144.9%**
Total Administrative Expense	**$ 423,863**	**$ 492,458**	**$ 68,595**	**13.9%**	**$ 915.47**	**$ 599.10**	**$ (316.37)**	**-52.8%**	**$ 2,358,969**	**$ 2,657,239**	**$ 298,270**	**11.2%**	**$ 1,234.42**	**$ 844.37**	**$ (390.04)**	**-46.2%**
Non-Operating Income/(Expense)																
Rental Income	$ -	$ -	**$ -**	N/A	$ -	$ -	**$ -**	N/A	$ -	$ -	**$ -**	N/A	$ -	$ -	**$ -**	N/A
Depreciation & Amortization	$ (421)	$ (101)	**$ (320)**	317.1%	$ (0.91)	$ (0.12)	**$ (0.79)**	640.6%	$ (1,814)	$ (383)	**$ (1,431)**	373.6%	$ (0.95)	$ (0.12)	**$ (0.83)**	680.0%
Change in Net Position	**$ (338,311)**	**$ (392,080)**	**$ 53,769**	**-13.7%**	**$ (730.69)**	**$ (476.98)**	**$ (253.71)**	**53.2%**	**$ (1,801,366)**	**$ (2,281,482)**	**$ 480,117**	**-21.0%**	**$ (942.63)**	**$ (724.97)**	**$ (217.66)**	**30.0%**
Key Metrics																
Enrollment	463	822	(359)	-43.7%					1,911	3,147	(1,236)	-39.3%				
MLR	92.73%	95.19%	246 bps						88.36%	95.34%	698 bps					
Admin Ratio	35.8%	23.6%	-1226 bps						49.1%	32.9%	-1617 bps					
Net Income %	-28.6%	-18.8%	-983 bps						-37.5%	-28.2%	-923 bps					
Gross Margin Vol Variance			$ (43,883)								$ (147,731)					
Gross Margin Rate Variance			$ 29,378								$ 331,008					

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

	May 2026	June 2026	Change
ASSETS			
Current Assets			
Cash and Investments			
Chase - Checking (Primary & DSNP)	$ 3,509,989	$ 3,469,543	$ (40,445)
JPMorgan Securities	$ 17,848,632	$ 18,465,196	$ 616,565
First Foundation Bank	$ 142,177	$ 142,177	$ -
Receivables			
Accounts Receivable	$ 1,538	$ 96,614	$ 95,076
Dividend & Interest Receivable	$ 99,192	$ 96,945	$ (2,247)
Capitation Receivable	$ 28,657,932	$ 26,735,066	$ (1,922,865)
Pass-Through Receivable	$ 329,650	$ 326,701	$ (2,949)
Medicare Receivables	$ 155,458	$ 271,957	$ 116,499
Other Current Assets			
Prepaid Admin	$ 624,747	$ 520,329	$ (104,418)
Prepaid Commissions	$ 49,607	$ 49,607	$ -
Prepaid Medical	$ 72,280	$ 63,789	$ (8,491)
Total Current Assets	**$ 51,491,201**	**$ 50,237,925**	**$ (1,253,277)**
Noncurrent Assets			
Restricted Deposit			
First Foundation Bank - Restricted	$ 300,000	$ 300,000	$ -
Capital Assets			
Buildings - Net	$ 2,812,194	$ 2,803,647	$ (8,548)
Computer Equipment / Software - Net	$ 4,874	$ 4,706	$ (168)
Improvements - Net	$ 189,421	$ 188,446	$ (975)
Intangible Assets	$ 47,706	$ 46,455	$ (1,250)
Operating ROU Asset (Copier) - Net	$ 1,689	$ 1,408	$ (282)
Total Noncurrent Assets	**$ 3,355,884**	**$ 3,344,661**	**$ (11,222)**
Total Assets	**$ 54,847,085**	**$ 53,582,586**	**$ (1,264,499)**
LIABILITIES			
Current Liabilities			
Payables			
Accounts Payable	$ 481,461	$ 444,775	$ (36,686)
Capitation Payable	$ 28,032,233	$ 26,184,623	$ (1,847,610)
IBNR	$ 1,042,006	$ 1,535,375	$ 493,370
Medicare Payables	$ 145,843	$ 170,233	$ 24,390
Community Reinvestment Reserve	$ 116,986	$ 127,680	$ 10,695
Credit Card Payable	$ 14,535	$ 1,164	$ (13,371)
Other Current Liabilities			
Short Term Lease Liability - Copier	$ 1,807	$ 1,509	$ (298)
Bonus Accrual	$ 141,718	$ 94,790	$ (46,928)
Salaries Accrual	$ 224,318	$ 259,225	$ 34,907
Vacation Accrual	$ 266,394	$ 259,511	$ (6,884)
Total Current Liabilities	**$ 30,467,301**	**$ 29,078,887**	**$ (1,388,414)**
Total Liabilities	**$ 30,467,301**	**$ 29,078,887**	**$ (1,388,414)**
NET POSITION			
Net investments in Capital Assets	$ 3,055,884	$ 3,044,661	$ (11,222)
Restricted by Legislative Authority	$ 300,000	$ 300,000	$ -
Unrestricted	$ 20,402,364	$ 20,413,587	$ 11,222
YTD Net Revenue	$ 621,536	$ 745,451	$ 123,915
Total Net Position	**$ 24,379,784**	**$ 24,503,699**	**$ 123,915**
Total Liabilities and Net Position	**$ 54,847,085**	**$ 53,582,586**	**$ (1,264,499)**

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

	Net Equity	$ 24,503,699
	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)	$ 24,503,699
	Required Tangible Net Equity *	$ 4,916,964
	TNE Excess (Deficiency)	$ 19,586,734

	Full Service Plan		* Calculated Required Tangible Net Equity	
		1	$ 170,848,179	- June
A.	Minimum TNE Requirement	$ 1,000,000	$ 341,696,358	- Annualized
B.	REVENUES:			
			$ 150,000,000	
	2% of the first $150 million of		x 2%	
	annualized premium revenues	$ 3,000,000	$ 3,000,000	
	(lines 1, 2, 4, 5, 7, 9 from Income Statement)			
	Plus			
			$ 191,696,358	
	1% of annualized premium revenues		x 1%	
	in excess of $150 million	$ 1,916,964	$ 1,916,964	
	Total	$ 4,916,964	$ 4,916,964	- Required TNE

Community Health Plan of Imperial Valley
June 2026 Cash/Credit Card Transactions

Date	Account	Vendor	Memo/Description	Amount
Chase Primary Checking				
06/01/26	Chase Primary Checking	Imperial Desert Landscape	Inv 1179	$ (250.00)
06/01/26	Chase Primary Checking	Quench USA	Inv INV10817083	$ (129.30)
06/01/26	Chase Primary Checking	Inerglo Creative	Inv INV-00701	$ (3,000.00)
06/01/26	Chase Primary Checking	Ascend Technologies, LLC	Inv INV053141	$ (6,766.02)
06/01/26	Chase Primary Checking	Alliance Insurance Services LLC	Inv INV APR20261-- bill.com Check Number: 81101213	$ (4,656.00)
06/01/26	Chase Primary Checking	Liebert Cassidy Whitmore	Inv 322092-- bill.com Check Number: 81134939	$ (369.50)
06/01/26	Chase Primary Checking	Law Office of William S. Smerdon	Inv 3034	$ (2,117.50)
06/01/26	Chase Primary Checking	Zamosky Communication	Inv 0000068	$ (8,000.00)
06/01/26	Chase Primary Checking	Imperial Desert Landscape	Inv 1221	$ (250.00)
06/01/26	Chase Primary Checking	Shalom Events Professionals	Inv INV061626-- bill.com Check Number: 81133520	$ (85.00)
06/01/26	Chase Primary Checking	Quench USA	Inv INV10955388	$ (129.30)
06/01/26	Chase Primary Checking	Stericycle, Inc.	Inv 8014327807-- bill.com Check Number: 81134569	$ (123.77)
06/01/26	Chase Primary Checking	JPMorgan Chase	Credit Card Expense	$ (11,746.23)
06/01/26	Chase Primary Checking	HealthNet	May 2026 - Rental Income Receivable	$ 1,538.31
06/03/26	Chase Primary Checking	Great America Financial Services	Inv 42028474	$ (306.01)
06/03/26	Chase Primary Checking	Language Line Services, Inc.	Inv INV 060326-- bill.com Check Number: 81142986	$ (3,281.23)
06/03/26	Chase Primary Checking	City of Imperial	Acct 80683 - Inv 1537258-- bill.com Check Number: 81142819	$ (229.87)
06/03/26	Chase Primary Checking	MAK Solutions	Inv CHPIV-10	$ (5,375.00)
06/04/26	Chase Primary Checking	Ascend Technologies, LLC	Inv INV053887	$ (7,034.70)
06/05/26	Chase Primary Checking	Manifest MedEx	Inv INV-3707	$ (24,223.13)
06/07/26	Chase Primary Checking	Blue Shield of California	Blue Shield of California	$ (42,458.90)
06/07/26	Chase Primary Checking	First Unum Life Insurance Company	Employee Accidental, Long Term and Hospital Insurances	$ (1,681.58)
06/07/26	Chase Primary Checking	First Unum Life Insurance Company	UNUM Invoice 06/01/26 - 06/30/26	$ (923.18)
06/07/26	Chase Primary Checking	JPMorgan Chase	Dividend Income - May 2026	$ 6,699.74
06/07/26	Chase Primary Checking	JPMorgan Chase	Service Charges Investment Sweep - April	$ (539.15)
06/07/26	Chase Primary Checking	Mid Atlantic Trust Company	P. Carpio - Loan Repayment - Mid Atlantic	$ (84.16)
06/07/26	Chase Primary Checking	Rippling	Employee Reimbursement - E. Torres, I. Aguirre, N. Mendivel and A. Rc	$ (328.08)
06/07/26	Chase Primary Checking	Rippling	Employee Reimbursement - S. Castro	$ (188.97)
06/07/26	Chase Primary Checking	Rippling	Employee Reimbursement - S. Levy	$ (101.22)
06/07/26	Chase Primary Checking	Rippling	Employee Reimbursement - S. Maldonado	$ (23.59)
06/07/26	Chase Primary Checking	Rippling	People Center	$ (58.22)
06/07/26	Chase Primary Checking	Rippling	People Center	$ (15.00)
06/07/26	Chase Primary Checking	Rippling	Replenish Rippling - FSA	$ (469.46)
06/07/26	Chase Primary Checking	State Compensation Insurance Fund	Workers Compensation Payment	$ (1,530.33)
06/07/26	Chase Primary Checking	Voya	Payroll Date: 05/29/26 Retirement Contribution	$ (8,888.62)
06/08/26	Chase Primary Checking	AM Copiers Inc.	Multiple invoices	$ (1,498.17)
06/08/26	Chase Primary Checking	Brawley Rotary Club	Inv May 2026 Statement-- bill.com Check Number: 81158440	$ (30.00)
06/09/26	Chase Primary Checking	Imperial Irrigation District	Inv May2026-- bill.com Check Number: 81161728	$ (1,930.87)
06/10/26	Chase Primary Checking	Rippling	Employee net pay paid by direct deposits for check date 06/10/2026	$ (5,977.50)
06/10/26	Chase Primary Checking	Rippling	Payroll taxes paid via Rippling for check date 06/10/2026	$ (4,478.45)
06/10/26	Chase Primary Checking	Rippling	2025 L. Lewis Bonus Payout	$ (46,510.12)
06/11/26	Chase Primary Checking	Language Line Services, Inc.	Inv 11946455	$ (880.57)
06/12/26	Chase Primary Checking	Sparkling Clean	Inv JUNE2026	$ (900.00)
06/12/26	Chase Primary Checking	Rippling	Employee net pay paid by direct deposits for check date 06/12/2026	$ (3,624.60)
06/12/26	Chase Primary Checking	Rippling	Payroll taxes paid via Rippling for check date 06/12/2026	$ (2,070.50)
06/12/26	Chase Primary Checking	Rippling	Employee garnishments paid via Rippling for check date 06/12/2026	$ (713.53)
06/12/26	Chase Primary Checking	Rippling	Employee net pay paid by direct deposits for check date 06/12/2026	$ (135,268.17)
06/12/26	Chase Primary Checking	Rippling	Payroll taxes paid via Rippling for check date 06/12/2026	$ (66,154.63)
06/14/26	Chase Primary Checking	Department of Health Care Services	Receipt - DHCS (June 2026 Revenue)	$ 27,999,662.34
06/14/26	Chase Primary Checking	Department of Health Care Services	Receipt - DHCS (June 2026 Revenue)	$ 918,878.39
06/14/26	Chase Primary Checking	Department of Health Care Services	Receipt - DHCS (June 2026 Revenue)	$ 64,457.99
06/14/26	Chase Primary Checking	Department of Health Care Services	Receipt - DHCS (June 2026 Revenue)	$ 2,720.51
06/14/26	Chase Primary Checking	Department of Health Care Services	Receipt - DHCS (June 2026 Revenue)	$ 1,862.71
06/14/26	Chase Primary Checking	JPMorgan Chase	Credit Card Payment	$ (6,587.15)
06/14/26	Chase Primary Checking	JPMorgan Chase	Wire Transfer	$ (28,500,000.00)
06/14/26	Chase Primary Checking	Rippling	Employee Reimbursement - D. Wilson	$ (729.20)
06/14/26	Chase Primary Checking	Rippling	Replenish Rippling - FSA	$ (1,047.24)
06/15/26	Chase Primary Checking	JPMorgan Chase	Account Analysis Settelement Charge	$ (473.68)
06/15/26	Chase Primary Checking	Rippling	Employee Reimbursement - E. Reyes	$ (27.41)
06/15/26	Chase Primary Checking	Voya	Payroll Date: 06/12/26 Retirement Contribution	$ (14,481.10)
06/16/26	Chase Primary Checking	Pillsbury Winthrop Shaw Pittman LLP	Inv 8719105	$ (2,000.00)
06/16/26	Chase Primary Checking	360 Business Products	Inv QE-QT-36126-- bill.com Check Number: 81183888	$ (1,642.43)
06/16/26	Chase Primary Checking	Wakely consulting Group	Inv 337072 - 0000005	$ (8,811.25)
06/16/26	Chase Primary Checking	Vic's Air Conditioning & Electrical	Inv 104572	$ (1,030.94)
06/22/26	Chase Primary Checking	Kaz-Bros Design Shop	Inv 15387-- bill.com Check Number: 81201000	$ (190.30)
06/22/26	Chase Primary Checking	RSC Insurance Brokerage, Inc.	Inv INV061926	$ (11,911.59)
06/22/26	Chase Primary Checking	Cambria Imperial Hotel	Inv 002938-- bill.com Check Number: 81198106	$ (574.88)
06/23/26	Chase Primary Checking	Inerglo Creative	Inv INV-00707	$ (3,000.00)
06/23/26	Chase Primary Checking	Wakely consulting Group	Inv 337071 - 0000005	$ (74,066.25)
06/25/26	Chase Primary Checking	Lee Hindman	Inv June Stipend	$ (300.00)
06/25/26	Chase Primary Checking	Carlos Ramirez	Inv June 2026 Stipend	$ (300.00)
06/25/26	Chase Primary Checking	Xochitl Fausto	Inv June 2026 Stipend	$ (100.00)
06/25/26	Chase Primary Checking	Liebert Cassidy Whitmore	Inv 325131-- bill.com Check Number: 81214459	$ (1,029.50)
06/25/26	Chase Primary Checking	Bushra Ahmad	Inv June 2026 Stipend	$ (100.00)
06/25/26	Chase Primary Checking	Allan Wu	Inv June 2026 Stipend	$ (200.00)
06/25/26	Chase Primary Checking	Pablo Velez	Inv June 2026 Stipend	$ (100.00)
06/26/26	Chase Primary Checking	Rippling	Employee garnishments paid via Rippling for check date 06/26/2026	$ (713.53)
06/26/26	Chase Primary Checking	Rippling	Employee net pay paid by direct deposits for check date 06/26/2026	$ (1,308.18)
06/26/26	Chase Primary Checking	Rippling	Payroll taxes paid via Rippling for check date 06/26/2026	$ (432.76)
06/26/26	Chase Primary Checking	Rippling	Employee net pay paid by direct deposits for check date 06/26/2026	$ (9,367.29)

06/26/26	Chase Primary Checking	Rippling	Payroll taxes paid via Rippling for check date 06/26/2026	$	(9,585.20)
06/26/26	Chase Primary Checking	Rippling	Employee garnishments paid via Rippling for check date 06/26/2026	$	(713.53)
06/26/26	Chase Primary Checking	Rippling	Employee net pay paid by direct deposits for check date 06/26/2026	$	(138,004.02)
06/26/26	Chase Primary Checking	Rippling	Payroll taxes paid via Rippling for check date 06/26/2026	$	(67,477.89)
06/29/26	Chase Primary Checking	Robert J Barros	Inv June 2026 Stipend	$	(100.00)
06/30/26	Chase Primary Checking	JPMorgan Chase	Credit Card Payment	$	(12,541.65)
06/30/26	Chase Primary Checking	Rippling	Employee Reimbursement - B. Castro	$	(20.30)
06/30/26	Chase Primary Checking	Rippling	Employee Reimbursement - J. Hutchins and L. Lewis	$	(1,903.28)
06/30/26	Chase Primary Checking	Rippling	Employee Reimbursement - J. Perez	$	(53.84)
06/30/26	Chase Primary Checking	Rippling	Employee Reimbursement - K. Maldonado	$	(46.92)
06/30/26	Chase Primary Checking	Rippling	Employee Reimbursement - L. Lewis	$	(113.29)
06/30/26	Chase Primary Checking	Rippling	Replenish Rippling - FSA	$	(585.87)
06/30/26	Chase Primary Checking	Rippling	Replenish Rippling - FSA	$	(468.81)
06/30/26	Chase Primary Checking	Voya	Payroll Date: 06/26/2026 Retirement Contribution	$	(19,718.92)
06/30/26	Chase Primary Checking	HealthNet	June 2026 - Rental Income	$	1,538.31

Chase Checking - DSNP

06/01/26	Chase Checking - DSNP	Community Health Group	Inv 33104248	$	(28,497.07)
06/01/26	Chase Checking - DSNP	Centrix Benefit Administrators	Inv INV060126	$	(6,500.76)
06/03/26	Chase Checking - DSNP	Community Health Group	Inv 2026-20	$	(13,528.17)
06/06/26	Chase Checking - DSNP	Imperial County Physicians Medical Group, In	Void Of Bill Payment #P26041401 - 4915933	$	3,280.36
06/07/26	Chase Checking - DSNP	CMS	Jun 2026 CMS Capitation	$	988,718.44
06/08/26	Chase Checking - DSNP	Imperial County Physicians Medical Group, In	Inv APR2026	$	(3,280.36)
06/08/26	Chase Checking - DSNP	Community Health Group	Inv 33119413	$	(53,811.17)
06/10/26	Chase Checking - DSNP	Community Health Group	Inv 2026-21	$	(32,412.46)
06/12/26	Chase Checking - DSNP	Community Health Group	Inv INV06122026	$	(90,000.00)
06/15/26	Chase Checking - DSNP	Community Health Group	Inv 33139215	$	(47,994.94)
06/15/26	Chase Checking - DSNP	Primary Healthcare Medical Group IPA, Inc.	Inv JUN2026	$	(57,428.35)
06/15/26	Chase Checking - DSNP	Community Care IPA, Inc.	Inv JUN2026	$	(50,338.47)
06/15/26	Chase Checking - DSNP	Premier Patient Care IPA, INC.	Inv JUN2026	$	(116,771.41)
06/15/26	Chase Checking - DSNP	Imperial County Physicians Medical Group, In	Inv JUN2026	$	(4,980.99)
06/15/26	Chase Checking - DSNP	Community Health Group	Inv 33139215	$	(47,994.94)
06/15/26	Chase Checking - DSNP	Primary Healthcare Medical Group IPA, Inc.	Inv JUN2026	$	(57,428.35)
06/16/26	Chase Checking - DSNP	Bustedknuckles Construction Services	Inv INV 053126-- bill.com Check Number: 81184558	$	(7,463.50)
06/16/26	Chase Checking - DSNP	Community Health Group	Void Of Bill Payment #P26061201 - 7362785	$	47,994.94
06/16/26	Chase Checking - DSNP	Primary Healthcare Medical Group IPA, Inc.	Void Of Bill Payment #P26061201 - 7367746	$	57,428.35
06/22/26	Chase Checking - DSNP	Nations Benefits, LLC	Inv INV238584	$	(916.06)
06/23/26	Chase Checking - DSNP	Community Health Group	Inv 33164107	$	(123,155.52)
06/25/26	Chase Checking - DSNP	Community Health Group	Inv 2026-23	$	(16,802.16)
06/25/26	Chase Checking - DSNP	Community Health Group	Inv 2026-22	$	(15,805.61)
06/26/26	Chase Checking - DSNP	Verisma Systems, Inc.	Inv 1002238-11071-- bill.com Check Number: 81219942	$	(27.00)
06/29/26	Chase Checking - DSNP	Nations Benefits, LLC	Inv INV238951	$	(19,929.98)
06/29/26	Chase Checking - DSNP	Community Health Group	Inv 33180670	$	(70,759.27)
06/30/26	Chase Checking - DSNP	JPMorgan Chase	Dividend Income - June 2026	$	2,360.63
06/30/26	Chase Checking - DSNP	JPMorgan Chase	6/15/26 - Account Analysis Settlement Charge	$	(287.84)
06/30/26	Chase Checking - DSNP	JPMorgan Chase	June 2026 Interest	$	164.34
06/30/26	Chase Checking - DSNP	CMS	Manufacturer Discount Program Receivable	$	25,811.81
06/30/26	Chase Checking - DSNP	JPMorgan Chase	Sweep Basis Fee	$	(189.90)

JPMorgan Securities

06/30/26	Chase Securities	Health Net	May Health Net Payment	$	(27,975,902.71)
06/30/26	Chase Securities	JPMorgan Chase	Bank Fee - May 2026 (Portfolio)	$	(25.00)
06/30/26	Chase Securities	JPMorgan Chase	May 2026 Accrued Investment Income	$	92,492.27

JPMorgan Credit Card

06/01/26	Chase Credit Card	Miscellaneous Vendors	Apple iCloud Storage	$	(13.75)
06/01/26	Chase Credit Card	Cognito, LLC	Cognito Enterprise	$	(129.00)
06/01/26	Chase Credit Card	Amazon	Amazon - Office Supplies	$	(102.35)
06/01/26	Chase Credit Card	Amazon	Amazon - Office Supplies	$	(8.61)
06/01/26	Chase Credit Card	DoorDash, Inc.	Lunch for Finance and Executive Committee Meeting 06/02/26	$	(344.32)
06/02/26	Chase Credit Card	Jazz HR	Jazz HR	$	(234.53)
06/03/26	Chase Credit Card	AT&T	AT&T	$	(203.30)
06/03/26	Chase Credit Card	Wal-Mart	Wal-Mart - Office Supplies	$	(130.15)
06/04/26	Chase Credit Card	Local Health Plans of California	LHPC Webinar for L. Lewis	$	(100.99)
06/05/26	Chase Credit Card	Wal-Mart	Wal-Mart - Office Supplies	$	(13.95)
06/05/26	Chase Credit Card	Amazon	Amazon - Office supplies	$	(84.26)
06/05/26	Chase Credit Card	GoDaddy.com	GoDaddy	$	(359.64)
06/08/26	Chase Credit Card	Microsoft Corporation	Microsoft	$	(141.75)
06/08/26	Chase Credit Card	GoDaddy.com	GoDaddy	$	(299.52)
06/08/26	Chase Credit Card	Miscellaneous Vendors	Worktime	$	(494.55)
06/08/26	Chase Credit Card	BestBuy	BestBuy - Office supplies	$	(26.29)
06/08/26	Chase Credit Card	BestBuy	BestBuy - IT Hardware	$	(750.85)
06/08/26	Chase Credit Card	Microsoft Corporation	Microsoft	$	(170.10)
06/08/26	Chase Credit Card	Lenovo	Lenovo for small conference room	$	(1,039.15)
06/09/26	Chase Credit Card	Lenovo	Lenovo for small conference room	$	(15.07)
06/09/26	Chase Credit Card	Microsoft Corporation	Microsoft	$	(6.69)
06/09/26	Chase Credit Card	Miscellaneous Meals & Entertianment	Commission Meeting Meal	$	(427.86)
06/09/26	Chase Credit Card	GoDaddy.com	GoDaddy	$	(856.02)
06/09/26	Chase Credit Card	BestBuy	BestBuy	$	(2,110.11)
06/09/26	Chase Credit Card	Miscellaneous Meals & Entertianment	Farwell Lunch	$	(265.38)
06/10/26	Chase Credit Card	GoDaddy.com	GoDaddy	$	(419.52)
06/10/26	Chase Credit Card	Wal-Mart	Wal-Mart - Office supplies	$	(1,000.00)
06/10/26	Chase Credit Card	Microsoft Corporation	Microsoft	$	(10.50)
06/11/26	Chase Credit Card	Wal-Mart	Wal-Mart - Office supplies	$	(138.13)
06/14/26	Chase Credit Card	TechSmith	Techsmith	$	(336.00)
06/15/26	Chase Credit Card	Miscellaneous Vendors	Vons - Office supplies	$	(72.73)
06/15/26	Chase Credit Card	Lowes	Lowes - Repairs	$	(9.09)

06/15/26	Chase Credit Card	Microsoft Corporation	Microsoft	$	(38.27)
06/15/26	Chase Credit Card	GoDaddy.com	GoDaddy	$	(287.52)
06/15/26	Chase Credit Card	Amazon	Amazon - Office supplies	$	(16.15)
06/16/26	Chase Credit Card	Amazon	Amazon - Office supplies	$	(70.56)
06/16/26	Chase Credit Card	Wal-Mart	Wal-Mart - Office supplies	$	(500.00)
06/16/26	Chase Credit Card	Amazon	Amazon - Office supplies	$	(223.04)
06/17/26	Chase Credit Card	Amazon	Amazon - Office supplies	$	(33.59)
06/17/26	Chase Credit Card	Miscellaneous Vendors	Meal for CAC	$	(759.51)
06/18/26	Chase Credit Card	GoDaddy.com	GoDaddy	$	(19.97)
06/18/26	Chase Credit Card	ZenDesk US	ZenDesk	$	(279.94)
06/18/26	Chase Credit Card	Adobe	Adobe	$	(767.68)
06/19/26	Chase Credit Card	Microsoft Corporation	Microsoft Corporation	$	(964.32)
06/19/26	Chase Credit Card	Local Health Plans of California	Training - C. Mesa and A. Flores	$	(599.00)
06/22/26	Chase Credit Card	GoDaddy.com	GoDaddy	$	(359.64)
06/22/26	Chase Credit Card	Wal-Mart	Wal-Mart - Office supplies	$	(99.28)
06/22/26	Chase Credit Card	Verizon Communications Inc.	Verizon	$	(612.77)
06/25/26	Chase Credit Card	Amazon	Amazon - Office Supplies	$	(52.67)
06/26/26	Chase Credit Card	Lowes	Lowes - Repairs and Matienance	$	(17.17)
06/26/26	Chase Credit Card	Amazon	Amazon - Office supplies	$	(134.32)
06/26/26	Chase Credit Card	Miscellaneous Meals & Entertianment	Pollo Loco - Farwell Meal	$	(239.31)
06/29/26	Chase Credit Card	Miscellaneous Meals & Entertianment	Pollo Loco - Farwell Meal	$	(239.32)
06/29/26	Chase Credit Card	Quickbooks Intuit	Quickbooks	$	(275.00)
06/29/26	Chase Credit Card	Wal-Mart	Wal-Mart - Office supplies	$	(260.24)
06/29/26	Chase Credit Card	Miscellaneous Vendors	ICloud Membership	$	(13.96)
06/30/26	Chase Credit Card	JPMorgan Chase	Credit Card - Annual Rewards Fees	$	(190.00)
06/30/26	Chase Credit Card	Dollar Tree	Dollar Tree - Office supplies	$	(3.89)
06/30/26	Chase Credit Card	Wal-Mart	Wal-Mart - Office supplies	$	(29.50)
06/30/26	Chase Credit Card	Amazon	Amazon - Office supplies	$	(58.13)
06/30/26	Chase Credit Card	Amazon	Amazon - Office supplies	$	(45.14)

Community Health Plan OF IMPERIAL VALLEY

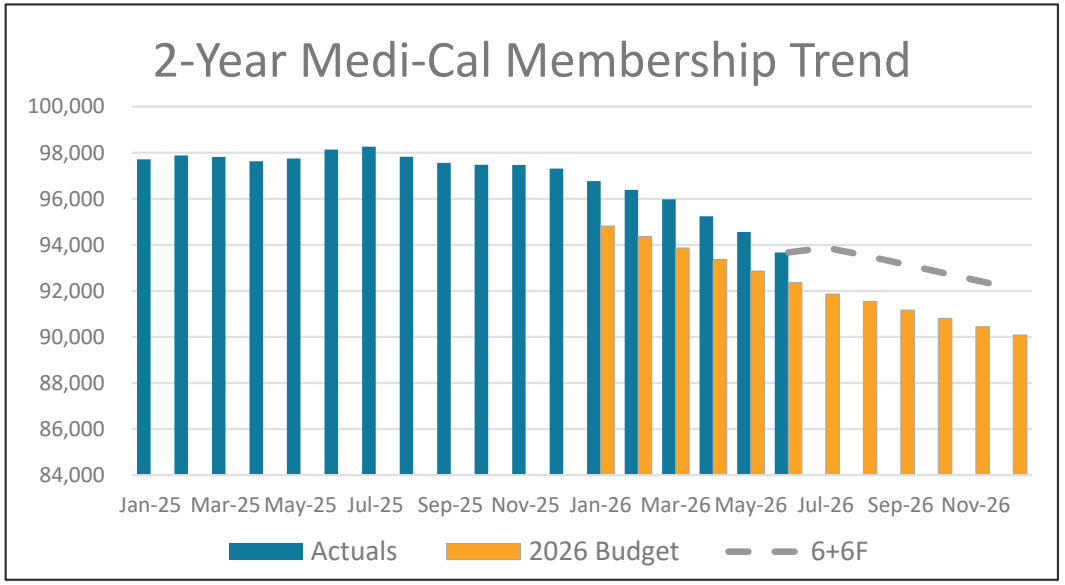
2026 6+6F Review

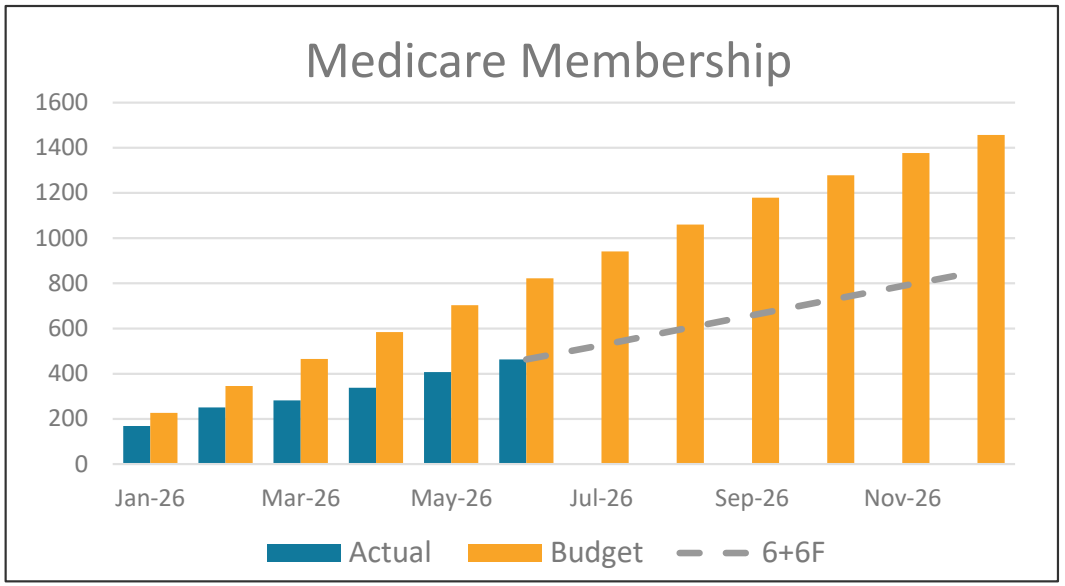
8/5/2026

Key Assumptions

Membership

- The Medi-Cal membership forecast was updated from a 7.4% erosion rate in the budget to a 5.3% reduction in the 6+6F. July actuals were used as the starting point, with a similar slope in the back half consistent with the budget.
- Medi-Cal December 2026 ending membership is forecasted at 92.1K compared with a budget of 90.1K.
- DSNP membership is forecasted to end the year at 852 compared with a budget of 1,457.
    - DSNP sales are struggling due to lighter benefits compared with competitors in the Imperial Valley.
    - New broker relationships, as well as strong inside sales performance, are expected to improve results in the back half of the year.





Key Assumptions (Continued)

Gross Margin

- Overall, Gross Margin is forecasted to increase by $0.5M, or 4.1%, from $12.0M to $12.5M, driven largely by DSNP performance.

Medi-Cal

- Medi-Cal margin, prior to the Community Reinvestment reclass, remains relatively stable in both H1 and H2, with medical MLRs of 97.5% and 97.0%, respectively.
  - H2 volume continues to exceed budget, yielding an additional $137K in margin, but the benefit is largely offset by rate/mix pressure.
  - Trend (+2.1%): Full-year trend factors were held constant with budget expectations.

Medicare (DSNP & Medicaid Wrap)

- Revenue rate and risk score assumptions were updated based on actual trends, which are lower than budget.
- DSNP FFS claims trend was held consistent with YTD actual results, increasing by 4.5% over budget assumptions.
- Net pharmacy spend was updated to include Federal Reinsurance and cost subsidy assumptions that were not available during the development of the budget.
- Medicaid wrap assumptions for H2 were held consistent with the budget despite favorable YTD results.

2026 Gross Margin Waterfall ($,000)		*H1*		*H2*		*Full Year*
2026 Budget - Gross Margin	***$***	***5,943***	***$***	***6,093***	***$***	***12,036***
2026 6+6F Change - B/(W)						
Gross Margin						
Medi-Cal						
Prior Period Development	*$*	*103*			*$*	*103*
Rate/Mix	*$*	*(193)*	*$*	*(107)*	*$*	*(300)*
Volume	*$*	*113*	*$*	*137*	*$*	*250*
Community Reinvestment Reclass	*$*	*106*	*$*	*104*	*$*	*211*
Total Medi-Cal Medical Change	***$***	***129***	***$***	***135***	***$***	***264***
Medicare						
DSNP Volume	*$*	*(138)*	*$*	*(266)*	*$*	*(404)*
Revenue Rate	*$*	*(80)*	*$*	*(203)*	*$*	*(283)*
FFS Claims	*$*	*(33)*	*$*	*(151)*	*$*	*(184)*
Pharmacy	*$*	*218*	*$*	*595*	*$*	*812*
Medicaid Wrap	*$*	*217*	*$*	*80*	*$*	*297*
Other	*$*	*12*	*$*	*245*	*$*	*257*
Total Medicare Gross Margin Change	***$***	***196***	***$***	***300***	***$***	***496***
Investment & Other Income	*$*	*(96)*	*$*	*(181)*	*$*	*(278)*
Total Gross Margin Variance	***$***	***229***	***$***	***253***	***$***	***482***
2026 6+6F - Gross Margin	***$***	***6,171***	***$***	***6,346***	***$***	***12,518***

Key Assumptions (Continued)

2026 Gross Margin Waterfall ($,000)	*H1*	*H2*	*Full Year*
2026 Budget - SG&A	***$ 5,649***	***$ 5,551***	***$ 11,199***
Administrative Costs Change - B/(W)			
Labor	*$ (85)*	*$ 155*	*$ 70*
Management Fees (MSO)	*$ 80*	*$ 51*	*$ 131*
Selling Costs	*$ 12*	*$ 62*	*$ 74*
Consulting & Professional Fees	*$ 259*	*$ (68)*	*$ 191*
All Other	*$ 152*	*$ (57)*	*$ 95*
Total Admin Variance b/f Reclass	***$ 418***	***$ 143***	***$ 561***
Community Reinvestment Reclass	*$ (128)*	*$ (192)*	*$ (319)*
Total 6+6F Change - B/(W)	**$ 290**	**$ (49)**	**$ 241**
2026 6+6F - SG&A	**$ 5,359**	**$ 5,600**	**$ 10,958**

Selling, General & Administrative Costs

- Overall, SG&A is forecasted to decrease from $11.2M to $11.0M between the 6+6F and the budget, or 2.2%; before the Community Reinvestment reclass, the favorable variance increases from $0.2M to $0.6M, or 5.0%.
- Labor costs are expected to improve in the back half of the year, driven largely by Healthcare Services and Compliance and partially offset by unfavorability in Operations and IT in support of Medicare.
- Before the reclass, H1 favorability was largely driven by consulting and professional fees, some of which were shifted to H2.
- MSO favorability in both H1 and H2 is driven by unused contingency reserves; however, contingency reserves are expected to be utilized in H2 for Risk Adjustment activities.
- Selling costs, primarily external broker commissions, are favorable due to lower-than-anticipated sales volume.
- All Other costs primarily consist of regulatory fees, office expense, and marketing

2026 P&L (by Product)

Community Health Plan OF IMPERIAL VALLEY

($, 000)	June YTD Actual	June YTD Budget	6+6F vs. Budget #	6+6F vs. Budget % Δ	July - Dec Forecast	July - Dec Budget	6+6F vs. Budget #	6+6F vs. Budget % Δ	Full Year Forecast	Full Year Budget	6+6F vs. Budget #	6+6F vs. Budget % Δ
REVENUE												
Medi-Cal Premium	$ 163,362	$ 166,510	$ (3,148)	-1.9%	$ 163,894	$ 164,099	$ (205)	-0.1%	$ 327,256	$ 330,609	$ (3,353)	-1.0%
Pass Through	$ 2,010	$ 1,569	$ 441	28.1%	$ 1,553	$ 1,499	$ 54	3.6%	$ 3,563	$ 3,068	$ 494	16.1%
Prior Period	$ 32,502	$ -	$ 32,502	NA	$ -	$ -	$ -	NA	$ 32,502	$ -	$ 32,502	NA
Medicare (Part C & D)	$ 4,064	$ 6,834	$ (2,770)	-40.5%	$ 8,499	$ 15,327	$ (6,829)	-44.6%	$ 12,562	$ 22,161	$ (9,599)	-43.3%
Other Revenue												
Investment/Dividend Income	$ 638	$ 735	$ (97)	-13.1%	$ 560	$ 735	$ (175)	-23.8%	$ 1,198	$ 1,470	$ (272)	-18.5%
Rental and Other	$ 9	$ 9	$ 0	3.0%	$ 3	$ 9	$ (6)	-65.7%	$ 12	$ 18	$ (6)	-31.3%
TOTAL REVENUES	**$ 202,585**	**$ 175,657**	**$ 26,928**	**15.3%**	**$ 174,508**	**$ 181,670**	**$ (7,161)**	**-3.9%**	**$ 377,093**	**$ 357,326**	**$ 19,767**	**5.5%**
HEALTHCARE COST												
Medi-Cal Capitation	$ 157,756	$ 160,337	$ 2,581	1.6%	$ 157,427	$ 156,446	$ (981)	-0.6%	$ 315,183	$ 316,783	$ 1,600	0.5%
Medi-Cal Pass Through	$ 2,010	$ 1,569	$ (441)	-28.1%	$ 1,553	$ 1,499	$ (54)	-3.6%	$ 3,563	$ 3,068	$ (494)	-16.1%
Prior Period	$ 32,399	$ -	$ (32,399)	NA	$ -	$ -	$ -	NA	$ 32,399	$ -	$ (32,399)	NA
Provider Cap & Risk Pool	$ 1,128	$ 1,759	$ 631	35.9%	$ 2,004	$ 3,931	$ 1,927	49.0%	$ 3,132	$ 5,690	$ 2,558	45.0%
FFS Claims	$ 2,053	$ 3,818	$ 1,765	46.2%	$ 4,948	$ 8,590	$ 3,642	42.4%	$ 7,001	$ 12,408	$ 5,407	43.6%
Pharmacy	$ 952	$ 1,924	$ 972	50.5%	$ 1,992	$ 4,556	$ 2,564	56.3%	$ 2,944	$ 6,480	$ 3,536	54.6%
Other Medical	$ 68	$ 163	$ 95	58.5%	$ 181	$ 362	$ 181	49.9%	$ 249	$ 525	$ 276	52.6%
Community Reinvestment	$ -	$ 106	$ 106	100.0%	$ -	$ 104	$ 104	100.0%	$ -	$ 211	$ 211	100.0%
Reinsurance (Net)	$ 48	$ 38	$ (10)	-27.4%	$ 57	$ 88	$ 31	35.3%	$ 105	$ 126	$ 21	16.4%
TOTAL HEALTH CARE COST	**$ 196,413**	**$ 169,714**	**$ (26,699)**	**-15.7%**	**$ 168,162**	**$ 175,577**	**$ 7,415**	**4.2%**	**$ 364,575**	**$ 345,291**	**$ (19,284)**	**-5.6%**
Gross Margin	**$ 6,171**	**$ 5,943**	**$ 229**	**3.8%**	**$ 6,346**	**$ 6,093**	**$ 253**	**4.2%**	**$ 12,518**	**$ 12,036**	**$ 482**	**4.0%**
Selling, General & Administrative (SG&A)												
Labor Costs	$ 3,464	$ 3,379	$ (85)	-2.5%	$ 3,332	$ 3,487	$ 155	4.4%	$ 6,797	$ 6,867	$ 70	1.0%
Management Fees	$ 706	$ 786	$ 80	10.1%	$ 735	$ 786	$ 51	6.5%	$ 1,441	$ 1,572	$ 131	8.3%
Selling Costs	$ 25	$ 36	$ 12	31.7%	$ 106	$ 168	$ 62	37.1%	$ 131	$ 205	$ 74	36.1%
Contract & Professional Fees	$ 634	$ 893	$ 259	29.0%	$ 599	$ 531	$ (68)	-12.8%	$ 1,233	$ 1,424	$ 191	13.4%
Advertising & Marketing	$ 43	$ 38	$ (5)	-13.0%	$ 68	$ 38	$ (30)	-78.9%	$ 111	$ 76	$ (35)	-46.0%
Regulatory Fees	$ 165	$ 144	$ (22)	-15.0%	$ 184	$ 144	$ (41)	-28.4%	$ 350	$ 287	$ (62)	-21.7%
Office, Occupancy & Maintenance	$ 62	$ 104	$ 42	40.5%	$ 96	$ 107	$ 10	9.7%	$ 158	$ 210	$ 52	24.9%
Community Reinvestment	$ 128	$ -	$ (128)	NA	$ 192	$ -	$ (192)	NA	$ 319	$ -	$ (319)	NA
All Other	$ 132	$ 268	$ 137	50.9%	$ 286	$ 290	$ 3	1.1%	$ 418	$ 558	$ 140	25.1%
TOTAL SG&A	**$ 5,359**	**$ 5,649**	**$ 290**	**5.1%**	**$ 5,600**	**$ 5,551**	**$ (49)**	**-0.9%**	**$ 10,958**	**$ 11,199**	**$ 241**	**2.2%**
Depreciation/Amortization	$ 67	$ 68	$ 1	1.3%	$ 68	$ 68	$ -	0.0%	$ 135	$ 136	$ 1	0.6%
Change in Net Position	**$ 745**	**$ 226**	**$ 520**	**230.3%**	**$ 679**	**$ 474**	**$ 205**	**43.1%**	**$ 1,424**	**$ 700**	**$ 724**	**103.5%**
Key Metrics												
Member Months	573,159	561,653	11,506	*2.0%*	558,027	545,919	12,108	*2.2%*	1,131,186	1,107,572	23,614	*2.1%*
Period Ending Membership	94,230	92,365	1,865	*2.0%*	92,103	90,085	2,018	*2.2%*	92,103	90,085	2,018	*2.2%*
Revenue PMPM	$ 353.45	$ 312.75	$ 40.70	*13.0%*	$ 312.72	$ 332.78	$ (20.05)	*-6.0%*	$ 333.36	$ 322.62	$ 10.74	*3.3%*
Medical Cost PMPM	$ 342.69	$ 302.17	$ (40.52)	*-11.8%*	$ 301.35	$ 321.62	$ 20.27	*6.7%*	$ 322.29	$ 311.75	$ (10.54)	*-3.3%*
MLR	*97.3%*	*97.0%*	*-24 bps*		*96.7%*	*97.0%*	*37 bps*		*97.0%*	*97.0%*	*4 bps*	
Admin Ratio	*2.6%*	*3.2%*	*57 bps*		*3.2%*	*3.1%*	*-15 bps*		*2.9%*	*3.1%*	*23 bps*	
Net Position Ratio	*0.4%*	*0.1%*	*24 bps*		*0.4%*	*0.3%*	*13 bps*		*0.4%*	*0.2%*	*18 bps*	

Questions?

Committee Chair Reports

Q2 2026 CHPIV

Quality Improvement Health Equity Committee

Community Health Plan OF IMPERIAL VALLEY

Agenda

1. Call Center Metrics
2. Utilization Management
3. Appeals & Grievances
4. Healthcare Effectiveness Data & Information Set (HEDIS)
5. Care Management
6. Enhanced Care Management/Community Supports
7. Long Term Support Services (LTSS)
8. Pharmacy
9. CCS

Agenda

10. Quality Improvement Update
    a. Quality Improvement Projects
    b. IHA
    c. Lead Screening
11. Credentialing
12. Facility Site Reviews
13. Provider Directory Accuracy Report
14. Population Segmentation
15. Questions for Health Net
16. DSNP QIHEC

Call Center Metrics

Call Center Metrics

Member Services				
KPI	Jan 2026	Feb 2026	Mar 2026	Q1
Calls Offered	2463	2327	2461	7251
Provider Services				
Calls Offered	1072	974	1096	3142

Q1-2026 Top Member Call Types

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

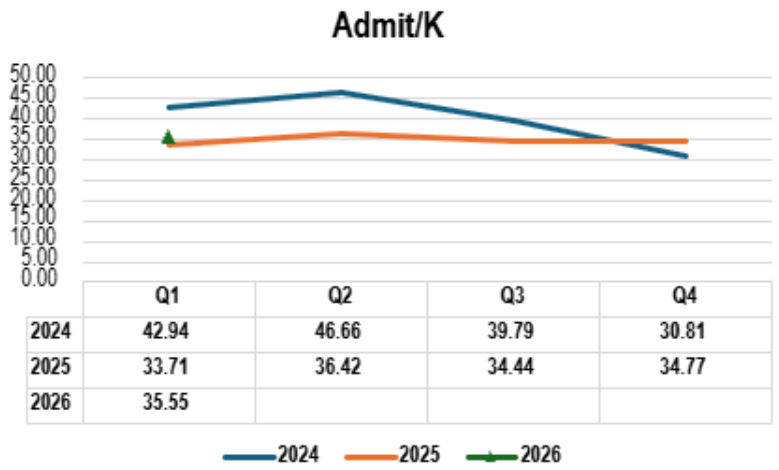
Q1-2026 Top Provider Call Types

1. Benefits & Provider Eligibility
2. Authorization Inquiries

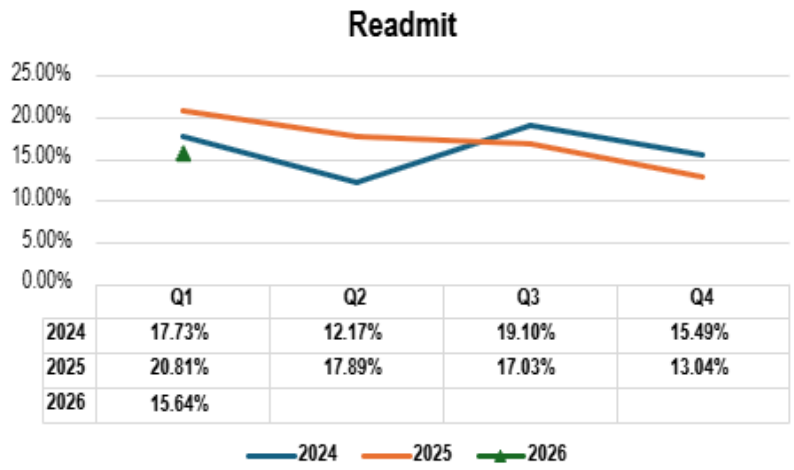
Utilization Management

Utilization Management Key Metrics - SPD

Performance metrics summary	Opportunities for improvement	Remediation action
Admit/K: Volumes declined from a 2024 Q2 peak and stabilized in 2025, with early 2026 remaining below 2024 levels and generally consistent with 2025 performance. **Readmit Rate:** Overall improvement year-over-year, with 2025 ending lower than 2024 and early 2026 tracking favorably compared to prior year Q1 results.	Continued monitoring and CM engagement. Continued monitoring of top diagnoses after multiple quarters of data becomes available.	Engage high ER utilizers in care coordination and CM services, as appropriate.



	Q1	Q2	Q3	Q4
2024	42.94	46.66	39.79	30.81
2025	33.71	36.42	34.44	34.77
2026	35.55			

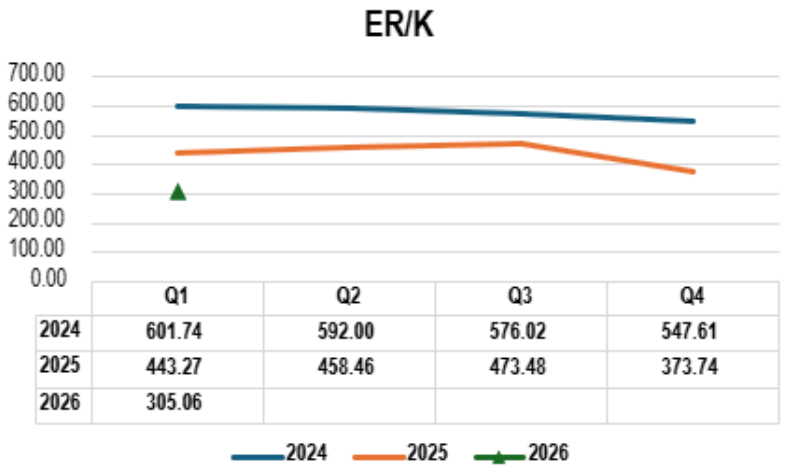


	Q1	Q2	Q3	Q4
2024	17.73%	12.17%	19.10%	15.49%
2025	20.81%	17.89%	17.03%	13.04%
2026	15.64%			

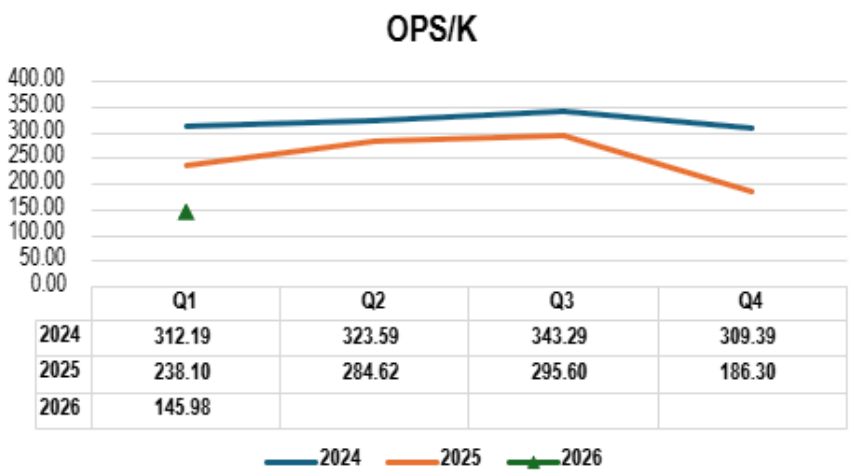
Top Diagnoses5	
Admit/K	Readmit
Shortness of breath	MALIGNANT NEOPLASM VERTEBRL COLUMN
Weakness	Shortness of breath
ACUTE KIDNEY FAILURE UNSPECIFIED	OTHER SPECIFIED RAILWAY ACCIDENT
Unspecified abdominal pain	OSTEOMYELITIS
MALIGNANT NEOPLASM VERTEBRL COLUMN	ANEMIA UNSPECIFIED

Utilization Management Key Metrics - SPD

Performance metrics summary	Opportunities for improvement	Remediation action
ER/K: Steady year-over-year improvement, with ER utilization declining from 2024 to 2025 and a significant reduction in 2026 Q1. **OPS/K:** Outpatient utilization decreased overall from 2024 to 2025, with continued downward movement in 2026 Q1.	Monitor OPS/K to ensure outpatient access and preventive services are not adversely impacted.	Monitor referrals to ensure access and network adequacy.



	Q1	Q2	Q3	Q4
2024	601.74	592.00	576.02	547.61
2025	443.27	458.46	473.48	373.74
2026	305.06			

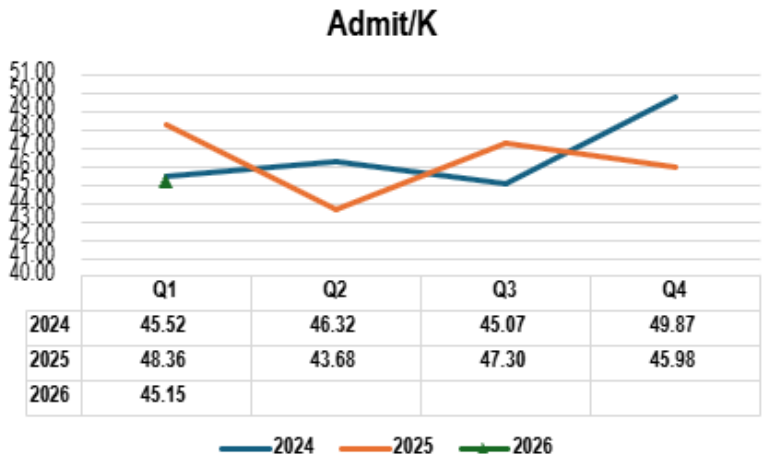


	Q1	Q2	Q3	Q4
2024	312.19	323.59	343.29	309.39
2025	238.10	284.62	295.60	186.30
2026	145.98			

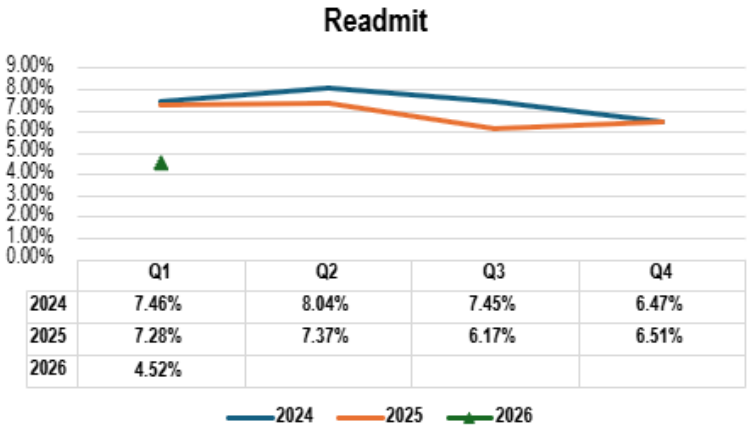
Top Diagnoses 5	
ER/K	OPS/K
Urinary tract infection, site not specified	DEB SUBQ TISSUE 20 SQ CM/<
Influenza due to other identified influenza virus with other	USE OF OPER ROOM OR CYST ROOM-FIRST HOUR
Chest pain, unspecified	USE OF OP OR CYSTO RM 1ST SUBSEQ HALF HR
Acute upper respiratory infection, unspecified	OFFICE/OUTPATIENT VISIT EST
Encounter for administrative examinations, unspecified	INJ FORAMEN EPIDURAL ADD-ON

Utilization Management Key Metrics – Non SPD

Performance metrics summary	Opportunities for improvement	Remediation action
Admit/K: Volumes declined from a 2024 Q2 peak and stabilized in 2025, with early 2026 remaining below 2024 levels and generally consistent with 2025 performance. **Readmit Rate:** Overall improvement year-over-year, with 2025 ending lower than 2024 and early 2026 tracking favorably compared to prior year Q1 results.	Continued monitoring and CM engagement. Continued monitoring of top diagnoses after multiple quarters of data becomes available.	Engage high ER utilizers in care coordination and CM services, as appropriate.



	Q1	Q2	Q3	Q4
2024	45.52	46.32	45.07	49.87
2025	48.36	43.68	47.30	45.98
2026	45.15			

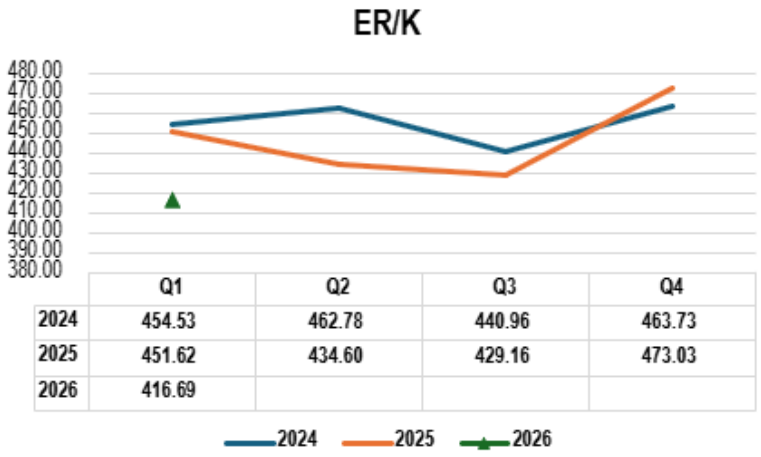


	Q1	Q2	Q3	Q4
2024	7.46%	8.04%	7.45%	6.47%
2025	7.28%	7.37%	6.17%	6.51%
2026	4.52%			

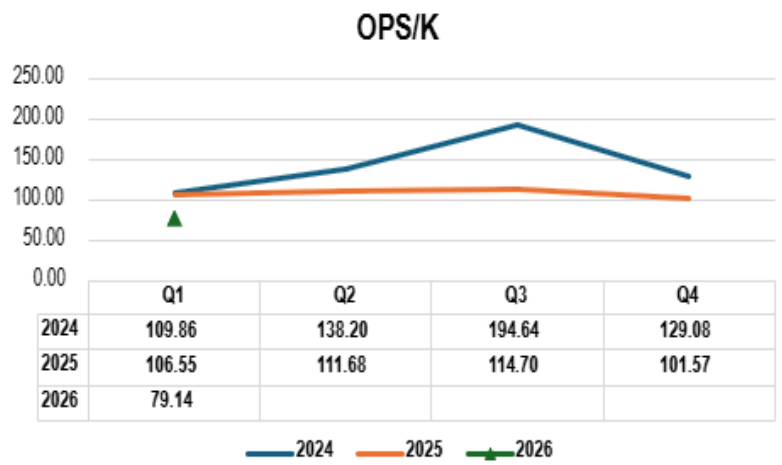
Top Diagnoses5	
Admit/K	Readmit
ENCOUNTR FULL-TERM UNCOMPLICATD DEL	Shortness of breath
SINGLE LIVE INFANT DELIV VAGINALLY	DYSPNEA UNSPECIFIED
ENCOUNTER FOR CD WITHOUT INDICATION	NEONATAL JAUNDICE UNSPECIFIED
NEWBORN AFCTD MAT INF AND PARASIT DZ	ACUTE KIDNEY FAILURE UNSPECIFIED
Unspecified abdominal pain	RDS OF NEWBORN

Utilization Management Key Metrics – Non SPD

Performance metrics summary	Opportunities for improvement	Remediation action
ER/K: Steady year-over-year improvement, with ER utilization declining from 2024 to 2025 and a significant reduction in 2026 Q1. **OPS/K:** Outpatient utilization decreased overall from 2024 to 2025, with continued downward movement in 2026 Q1.	Monitor OPS/K to ensure outpatient access and preventive services are not adversely impacted.	Monitor referrals to ensure access and network adequacy.



	Q1	Q2	Q3	Q4
2024	454.53	462.78	440.96	463.73
2025	451.62	434.60	429.16	473.03
2026	416.69			



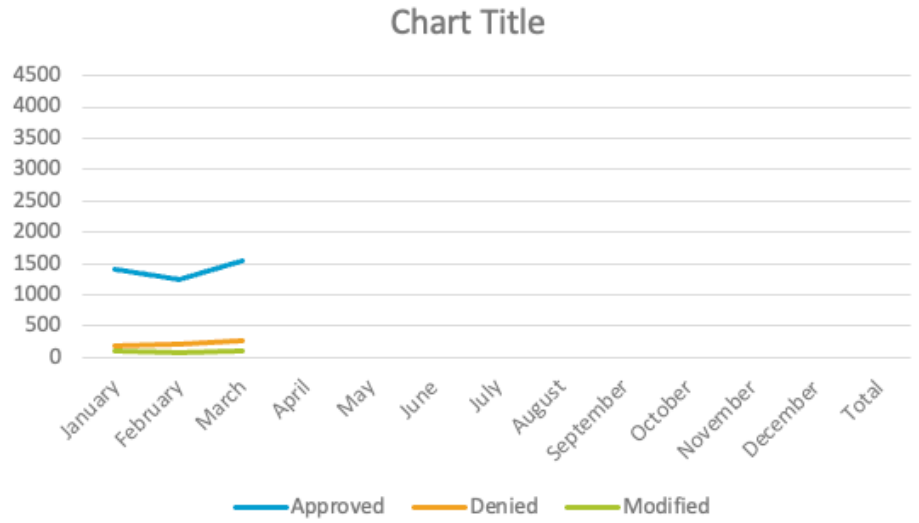
	Q1	Q2	Q3	Q4
2024	109.86	138.20	194.64	129.08
2025	106.55	111.68	114.70	101.57
2026	79.14			

Top Diagnosis	Top Procedures
ER/K	**OPS/K**
Influenza due to other identified influenza virus with other	USE OF OPER ROOM OR CYST ROOM-FIRST HOUR
Acute upper respiratory infection, unspecified	USE OF OP OR CYSTO RM 1ST SUBSEQ HALF HR
Urinary tract infection, site not specified	MSR PVR U&/BLADD CAPACTY US NON-IMG
Pneumonia, unspecified organism	PAY FOR RM AND BOARD AND GEN NURSING CAR
Viral infection, unspecified	USE OF RECOVERY ROOM

Authorization Volume

Performance metrics summary	Opportunities for improvement	Remediation action
The plan monitored approved, denied and modified authorization volume throughout 2026 and addressed staffing adequacy accordingly. In Q1 volumes decreased from prior periods.	Continued monitoring.	Continued monitoring.

Created Month	Approved	Denied	Modified
January	1395	196	94
February	1238	202	85
March	1554	268	117
April			
May			
June			
July			
August			
September			
October			
November			
December			
Total	4187	666	296

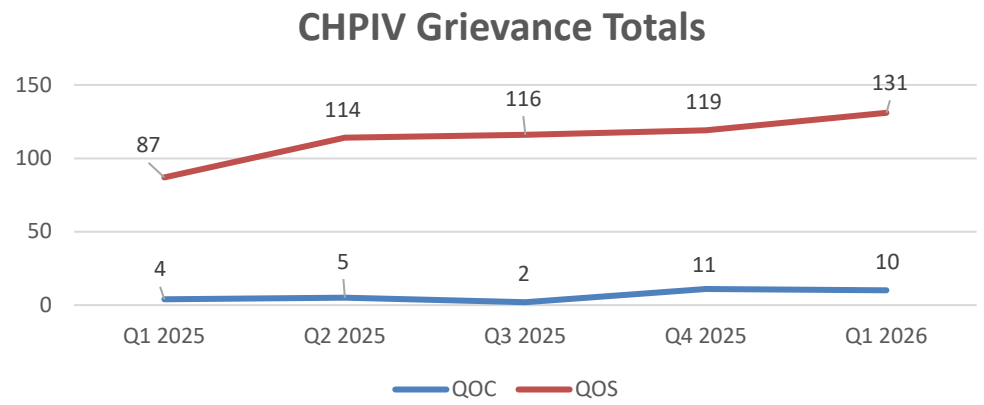


Appeals & Grievances

Appeals & Grievances

CHPIV - Appeals					
	Q1 2025	Q2 2025	Q3 2025	Q4 2025	Q1 2026
Appeals	23	22	22	29	34
Appeals PTMPY	0.71	0.68	0.68	0.90	1.07

CHPIV - Grievances					
	Q1 2025	Q2 2025	Q3 2025	Q4 2025	Q1 2026
Grievances	91	119	118	130	141
Grievances PTMPY	2.80	3.66	3.62	4.02	4.43



A&G Overview:

1. Total Appeals – 34
   - A. 33 Pre-Service Appeals
   - B. 1 Expedited Pre-Service Appeals
2. Total Grievances – 130
   - A. 76 Quality of Service (QOS)
   - B. 10 Clinical/Quality of Care (QOC)
   - C. 55– Access to Care (ATC) of which 8 cases were Expedited Grievances

Appeals & Grievances

QOC Grievances

Description	Volume	PTMPY
Quality of Care – PCP - Appropriateness of Treatment	3	0.09
Quality of Care - PCP – Refusal to Refer	2	0.06

QOS Grievances

Description	Volume	PTMPY
Transportation – General Complaint Vendor	18	0.56
Administrative Issues- Health Plan	13	0.40
Balance Billing- Par Provider	5	0.16
Transportation – Unsafe Driving	3	0.09
Interpersonal – 1557- Perceived provider (PAR0 Discrimination	2	0.06
Interpersonal – Provider Staff	2	0.06
Administrative Issues – Mbr unhappy with Services - Vendor	2	0.06

Access to Care

Description	Volume	PTMPY
Access to Care - Prior Authorization delay	27	0.85
Access to Care – PCP Referral for Services	9	0.28
Access to Care – Transportation Missed Appointment	4	0.13
Access to Care – DME Delivery Issue	3	0.09
Access to Care – Avail of Appt w/ Specialist	3	0.09

Appeals & Grievances

Cultural & Linguistic Grievances

Total # of C&L by County	Q1 2026
Imperial	5
Grand Total	**5**

Behavioral Health Grievances

Total # of C&L by County	Q1 2026
Imperial	2
Grand Total	**2**

Appeals & Grievances

Pre-Service Appeals

Description	Volume	PTMPY	OT
ILOS Related – Recuperative Care (Medical Respite)	8	0.25	4/8
Not Medically Necessary – Diagnostic - MRI	6	0.19	5/6
Not Medically Necessary – DME - Other	3	0.09	1/3
Not Medically Necessary – Diagnostic – CAT Scan	2	0.06	2/2
Not Medically Necessary – MUGA/PET Scan	2	0.06	1/2
Not Medically Necessary – Surgical - Arthroscopy	2	0.06	2/2

HEDIS Measures

CHPIV MY2025 Final Results

		Behavioral Health		Children's Domain (CH)								Chronic Disease Management			Reproductive Health and Cancer Prevention					Percent Achieve Goal	Percent Change from MY2024
		FUA	FUM	WCV	CIS-E	DEV	IMA-E	LSC	TFL	WC30		AMR	CBP	GSD	CHL	PPC		BCS-E	CCS-E		
		30 day	30 day	total	co10	total	co2		total	0 to 14 mos.	15 to 30 mos	total		>9.0	total	Post-partum	Prenatal	bcs	total		
MY25	Gap to Target	0	0	0	0	0	0	0	1807	2	0	0	0	0	86	0	5	200	0	72%	↓ 6%
	Final Reported Rate	65.41%	65.80%	55.98%	31.80%	57.18%	45.33%	77.29%	16.32%	63.22%	75.32%	90.68%	70.80%	28.71%	52.58%	85.89%	85.16%	52.75%	56.32%		
MY24	Gap to Target	0	0	151	0	0	0	0	1865	24	0	0	0	0	16	0	0	0	0	78%	
	Final Reported 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%	23.84%	55.28%	87.83%	88.56%	58.20%	61.80%		

= Meet MPL/50th percentile benchmark. Purple cell new MPL attainment

= Below MPL/50th percentile benchmark. Red indicates met MPL in 2024

Blue = Admin Measure

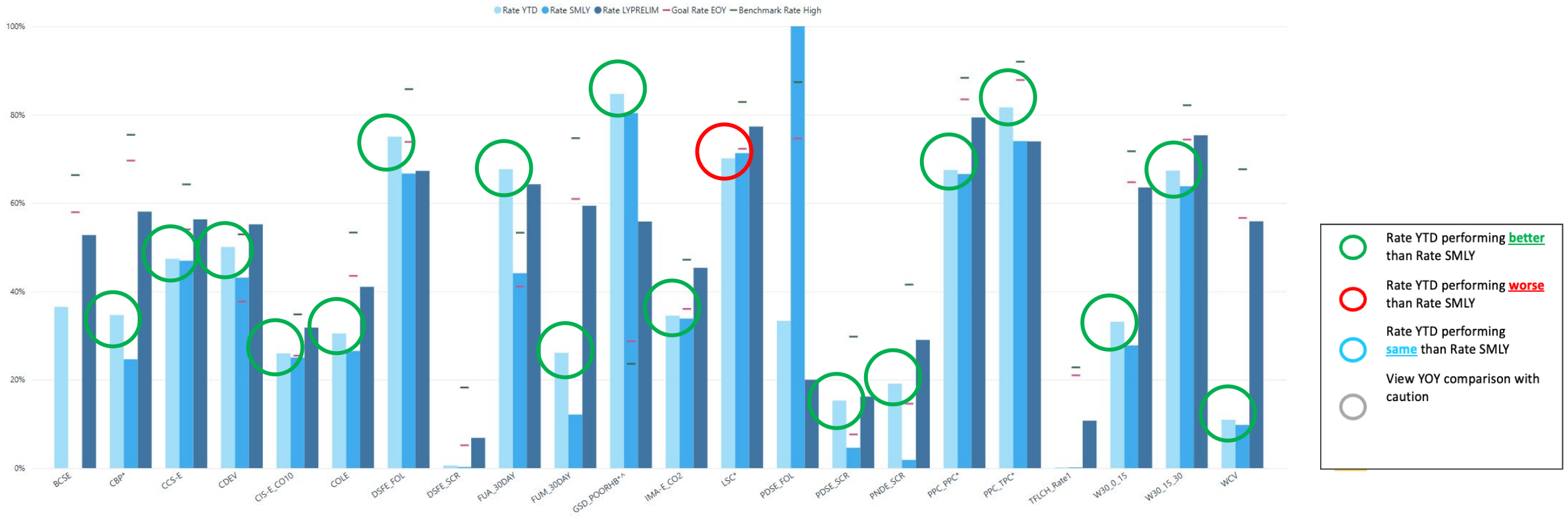
CIS, IMA, CCS: transition to ECDS in MY2205. All eligible members are included. MY24 based on hybrid sampling

BCS: MY2025 NCQA explanded the age band to 41.

1. CHPIV 2024- 14/18 reached MPL (MPL= 50th percentile)
2. CHPIV 2025 13/18 reached MPL

CHPIV MY2026 MPL Progress

Overview of YOY Performance – CHPIV Medi-Cal All MCAS *MY2026 April PPP (Data through 4/02/2026)*



Care Management

Care Management Q1 2026

	Members Engaged	Engagement Rate
Care Management - Total	548	66%
Care Management - PH	148	61%
Care Management - BH	103	63%
Care Management - Mat	79	71%
Care Management - TCS	362	84%
Care Management - FYOL	32	100%

Care Management - Readmissions

CHPIV CASE MANAGEMENT OUTCOMES REPORT

Physical Health and Behavioral Health

Members Case Managed Between 1/1/2025 and 12/31/2025, claims paid through 4/10/2026

Measure for Case Management	Members	90 days prior to CM enrollment			90 days following CM enrollment			Difference
		Admissions	Readmissions	Readmit Rate	Admissions	Readmissions	Readmit Rate	
Readmission Rate, within 30 days, all cause, based on claims data	293	146	39	26.7%	44	5	11.4%	-15.3%

CHPIV CASE MANAGEMENT OUTCOMES REPORT

Transitional Care Services

Members Case Managed Between 1/1/2025 and 12/31/2025, claims paid through 4/10/2026

Measure for Case Management	Members	90 days prior to CM enrollment			90 days following CM enrollment			Difference
		Admissions	Readmissions	Readmit Rate	Admissions	Readmissions	Readmit Rate	
Readmission Rate, within 30 days, all cause, based on claims data	525	558	162	29.0%	186	28	15.1%	-13.9%

FIRST YEAR OF LIFE (FYOL) OUTCOMES REPORT: CHPIV

Cases Referred Between 1/1/2025 and 12/31/2025, claims paid through 4/8/2026

Measure for Case Management	Members Not Enrolled in FYOL* First 90 Days after Referral			Members Enrolled in FYOL First 90 Days after Engagement			Difference
	Members	Admissions	Admits/K/Yr.	Members	Admissions	Admits/K/Yr.	Admits/K/Yr.
Hospital Admissions, per 1,000 members per year	155	2	52	90	0	0	-52

Care Management – ED Visits

Care Management - PH & BH

Measure for Case Management	Members	90 days prior to CM enrollment		90 days following CM enrollment		Difference	
		ED Claims	ED/1,000/Yr.	ED Claims	ED/1,000/Yr.	ED Claims	ED/1,000/Yr.
Emergency Department (ED) Claims, per 1,000 members per year	293	243	3,317	149	2,034	-94	-1,283

Care Management - Transitions of Care

Measure for Case Management	Members	90 days prior to CM enrollment		90 days following CM enrollment		Difference	
		ED Claims	ED/1,000/Yr.	ED Claims	ED/1,000/Yr.	ED Claims	ED/1,000/Yr.
Emergency Department (ED) Claims, per 1,000 members per year	525	619	4,716	381	2,903	-238	-1,813

Care Management - FYOL

Measure for Case Management	Members Not Enrolled in FYOL* First 90 Days after Referral			Members Enrolled in FYOL First 90 Days after Engagement			Difference
	Members	ED Claims	ED/1,000/Yr.	Members	ED Claims	ED/1,000/Yr.	ED/1,000/Yr.
Emergency Department (ED) Visits, per 1,000 members per year	155	19	490	90	4	178	-312

Care Management – Impacts

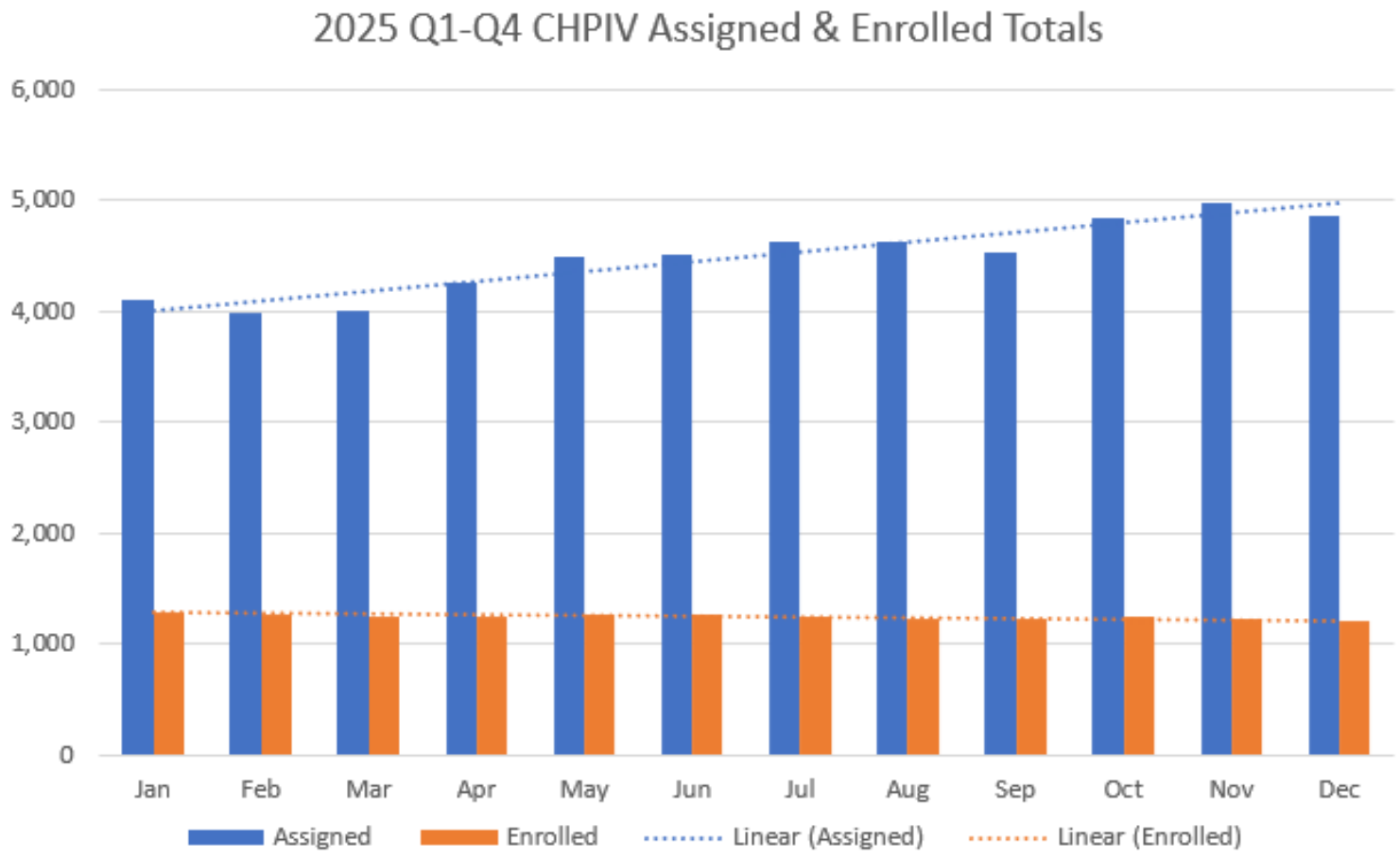
CHPIV Care Management Impacts

Category	Definition	Q1	Q2	Q3	Q4
Actions Performed	Facilitated access to cost effective health care, referrals, care giver well-being, financial and/or community resources Coordinated with other departments, providers Educated on medications, wound care, disease management, self-care.	30.86%			
Behavior Health	Faciitated collaboration with providers, link with providers, country providers Improve coping skills and Reduced symptions	23.33%			
Improved Clinical Outcomes	Improved weight, pain management, lab results, side effects	38.84%			
Medical Management	Facilitated medication dosage decreases or elimination or change to cost effective medications	36.60%			
Improved Utilization Outcomes	Facilitated change to in network providers, decreased in ER visits, decreased INPT admisssions, redirecting chronic infusion therapy to outpatient setting	27.86%			
Improved Humanistic Outcomes	Facilitated advance directives, Improved understanding of disease process, medications etc.	32.76%			
Improved Quality Outcomes	Improved weight, pain management, lab results, side effects, self-management	31.55%			

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

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

ECM Census



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

ECM Enrollment by POF

ECM Membership (Enrollment Adjusted From Claims)

Population Of Focus	Mar 2025	Apr 2025	May 2025	Jun 2025	Jul 2025	Aug 2025	Sep 2025	Oct 2025	Nov 2025	Dec 2025
	236	124	116	114	127	130	158	194	249	285
Adult - Birth Equity Population of Focus	5	5	5	4	4	4	5	5	5	5
Adult - Families Experiencing Homelessness	96	94	100	99	97	101	104	104	105	107
Adult - Individuals at Risk for Avoidable Hospital or ED Utilization	486	473	465	461	453	453	462	465	466	462
Adult - Individuals Experiencing Homelessness	223	223	206	206	202	204	207	211	208	212
Adult - Individuals Transitioning from Incarceration				1	1	1	2	3	3	3
Adult - LTC Eligible At-Risk for Institutionalization	38	43	46	50	48	47	52	59	61	62
Adult - Nursing Facility Residents Transitioning to Community	1	1	1	1	1	1	1	2	3	3
Adult - SMH or SUD	271	269	269	274	273	275	278	276	283	291
Child - CCS/CCS WCM with Additional Needs	36	40	43	51	78	82	89	96	90	93
Child - Families Experiencing Homelessness	21	21	20	20	20	21	21	21	21	21
Child - Individuals at Risk for Avoidable Hospital or ED Utilization	30	29	29	28	34	35	40	41	46	47
Child - Individuals Experiencing Homelessness	28	29	29	28	29	29	30	32	31	31
Child - Involved in Child Welfare			1	3	10	10	10	14	15	17
Child - SMH or SUD	3	3	3	3	3	2	3	4	8	8
Total	**1,474**	**1,354**	**1,333**	**1,343**	**1,380**	**1,395**	**1,462**	**1,527**	**1,594**	**1,647**

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

The **top three POFs in Imperial County** are:

1) Adults at risk for avoidable hospitalization or ED utilization;
2) Adults experiencing homelessness;
3) Adults with serious mental health or substance use disorders.

The **underperforming POFs in Imperial County** are:

1) Low ECM utilization for Child Welfare POF
2) Low ECM utilization for Adult Birth Equity POF

Opportunities:

1) Child Welfare POF
    a) Onboard Foster Youth ECM Provider(s)
2) Adult Birth Equity POF
    a) Increase Member awareness

Community Supports

CS Authorization and Claims Summary

Count	CS Service	Auth Count	Claims Count	Claims Unit
Imperial	Asthma Remediation	38	38	35
	Day Habilitation	21	34	31
	Environmental Accessibility Adaptations	25	25	24
	Housing Deposits	13	25	25
	Housing Tenancy and Sustaining Services	15	57	57
	Housing Transition/Navigation Services	216	910	899
	Medically Tailored Meals	7,879	102,085	123,092
	Personal Care Services	248	6,353	38,339
	Recuperative Care	241	9,024	8,316
	Respite Services	87	4,010	22,614
	Short-Term Post-Hospitalization Housing	1	58	58
	Total	**8,784**	**122,619**	**193,490**

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

Guiding Optimal/Appropriate Usage of CS Services for Program Sustainability

1) Increase in required supporting documentation during authorization and service extensions to confirm medical appropriateness;
2) Removal of data mined CS members to assign to CS providers and increased reliance on community-based referrals;
3) Narrowing current network of CS providers;
4) Recontract with providers at adjusted rates;
5) Develop incentive program for value-based outcomes;
6) Redesign program to meet needs of highest risk members.

Long Term Support Services (LTSS)

Long Term Support Services (LTSS) Q1 2026

LTC (Long Term Care)

Unique Utilizing LTC Members	Jan 2026	Feb 2026	Mar 2026
El Centro Post Acute	89	79	78
Imperial Manor	26	25	26
Pioneer Memorial D/P	65	55	57
Out of County	10	7	3

CBAS (Community Based Adult Services)

	Jan 2026	Feb 2026	Mar 2026
Unique Utilizing CBAS Mbrs	245	243	241
Average Days per Week	1.7	2.0	2.0
Members utilizing CBAS six months ago, now in LTC	1	0	0

ICF (Intermediate Care Facilities)

Unique Utilizing LTC Members	Jan 2026	Feb 2026	Mar 2026
ARC #1, #2, #3	14	13	13

Pharmacy

Pharmacy

Top 10 Most Requested Medications (Medical Benefit) in Q1 2026

October 2025	November 2025	December 2025	January 2026	February 2026	March 2026
botulinum toxin	botulinum toxin	IV iron	pegfilgrastim	pegfilgrastim	botulinum toxin
pegfilgrastim	pegfilgrastim	pegfilgrastim	botulinum toxin	botulinum toxin	pegfilgrastim
pembrolizumab	IV iron	botulinum toxin	denosumab	pembrolizumab	pembrolizumab
sacituzumab	bevacizumab	pembrolizumab	bevacizumab	IV iron	IV iron
trastuzumab	infliximab	trastuzumab	rituximab	denosumab	durvalumab
pertuzumab	pembrolizumab	goserelin implant	bortezomib	epoetin beta	epoetin beta
rituximab	daratumumab	leuprolide	daratumumab	durvalumab	eribulin mesylate
denosumab	durvalumab	aflibercept	eribulin mesylate	leuprolide	infliximab
IV iron	epoetin alfa	pertuzumab	IV iron	octreotide	sacituzumab
aflibercept	ipilimumab	atezolizumab	pembrolizumab	supprelin la	triptorelin

Pharmacy

Top 10 Denials in Q1 2026 based on Percentage and Total Number

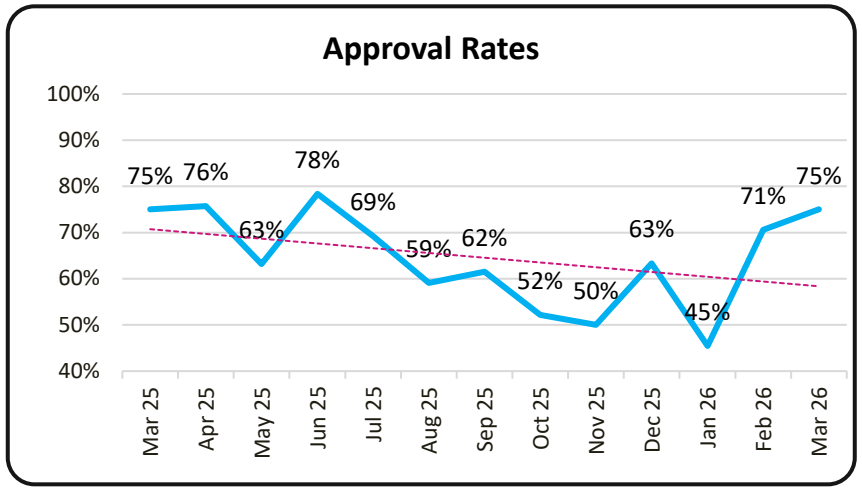
Top 10 Denials of the Quarter by Percentage and Total Number			
Drug Name	**% Denied**	**Drug Name**	**# Denied**
epoetin alfa	*100.00%*	IV iron	*13*
octreotide	*100.00%*	pegfilgrastim	*12*
IV iron	*92.86%*	botulinum toxin	*11*
denosumab	*75.00%*	denosumab	*6*
epoetin beta	*60.00%*	pembrolizumab	*5*
eribulin mesylate	*50.00%*	epoetin alfa	*3*
rituximab	*50.00%*	epoetin beta	*3*
pegfilgrastim	*38.71%*	octreotide	*3*
botulinum toxin	*37.93%*	eribulin mesylate	*2*
bortezomib	*33.33%*	rituximab	*2*

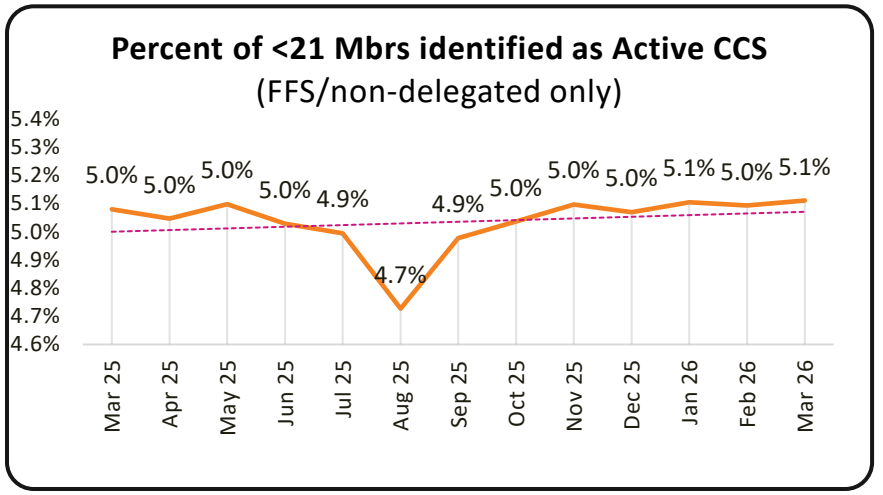
* Medications with less than 3 total requests are excluded from the above data to prevent heavy weighted or skewed results.

California Children Services (CCS)

CCS

CCS Key Metrics





Q4 2025 to Q1 2026 Trends

- Average quarterly approval rates increased by 16%, from 55% in Q4 2025 to 64% in Q1 2026
- Cases Pending Review increased by 2%
- Percent of <21 membership identified as active CCS (FFS/non-delegated only) increased by 2% (from 5% to 5.1%)
- Volume of UM <21 cases reviewed for CCS Eligibility increased by 6% from Q4 2025 to Q1 2026

Quality Improvement Update

Institute for Healthcare Improvement (IHI) & DHCS Child Health Equity Collaborative (CHEC) Sprint

PDSA Updates

Objective: to address barriers in scheduling and attending well-child visits for parents/caregivers of Hispanic newborns aged 0-30 months at Kapoor Pediatrics.
Change Idea: expand access to well-child visits by utilizing non-branded patient education talking points when conducting targeted outreach to parents and caregivers.
Date: 11/5/2025 – 12/31/2025 **Phase 2 Intervention:** #1 **This cycle is intended to:** *test a change*

Objective: to test efficacy of weekend clinics, walk-in/same-day visits, and online appointment scheduling for Hispanic newborns 0-30 months at Kapoor Pediatrics.
Change Idea: optimize workflows at the pilot site through Saturday clinics, walk-in/same-day appointments, and text message reminder tool via online patient portal.
Date: 11/5/2025 – 12/31/2025 **Phase 2 Intervention:** #1 **This cycle is intended to:** *test a change*

Objective: connect parents/caregivers of Hispanic newborns aged 0-30 months at Kapoor Pediatrics to W30 digital and printed health education resources during prenatal care.
Change Idea: encourage providers and clinic staff to promote the CDC Milestone Tracker App and Newborn Checklist to parents/caregivers for supporting well-child visits.
Date: 1/14/2026 – Present **Phase 2 Intervention:** #2 **This cycle is intended to:** *test a change*

Objective: connect parents/caregivers of Hispanic newborns aged 0-30 months at Kapoor Pediatrics to W30 digital and printed health education resources during prenatal care.
Change Idea: encourage providers and clinic staff to promote the CDC Milestone Tracker App and Newborn Checklist to parents/caregivers for supporting well-child visits.
Date: 2/26/2026 – 4/30/2026 **Phase 2 Intervention:** #2 **This cycle is intended to:** *test a change*

Initial Health Assessments

Medical Record Review/Facility Site Review

	Q4 2024		Q1 2025		Q2 2025		Q3 2025		Q4 2025	
	Total Records	% Compliant	Total Records	% Compliant	Total Records	% Compliant	Total Records	% Compliant	Total Records	% Compliant
PED IHA	36↑	33% ↑	22↓	82%↑	7 ↓	100% ↑	19↑	84%↓	7↓	14%↓
Adult IHA	16↓	50 % ↓	44↑	27%↓	19 ↓	63%↑	17↓	82%↑	0 ↓	0.0% ↓

Claims/Encounter Review (initial)

	Q4 2024	Q1 2025	Q2 2025	Q3 2025	Q4 2025
IHA Completion Rates (Enrollment From)	Oct- Dec 2024	Jan - Mar 2025	Apr - Jun 2025	Jul - Sept 2025	Oct- Dec 2025
IHA Completed within 120 days	43.81 ↑	44.35 ↑	45.52 ↑	47.52↑	43.03 ↓
Member Outreach Compliance (3 attempts completed)	49.42 ↑	49.35 ↓	48.64↓	42.73 ↓	44.03 ↑
Overall Compliant (outreach or IHA compliant)	73.38 ↑	72.52↓	73.83 ↑	70.60↓	69.40 ↓
Denominator (able and unable to contact)	3,602 ↑	3,912 ↑	3,649↓	3,119 ↓	3,409 ↑

Lead Screening in Children

Table 1: Overall Compliance

Age Ranges	Age 1 (6-17 Mos)	Age 2 (18-30 Mos)	Ages 3 (31-72 Mos)	Age 1 (6-17 Mos)	Age 2 (18-30 Mos)	Ages 3 (31-72 Mos)	Age 1 (6-17 Mos)	Age 2 (18-30 Mos)	Ages 3 (31-72 Mos)	Age 1 (6-17 Mos)	Age 2 (18-30 Mos)	Ages 3 (31-72 Mos)
	Q4 2024			Q1 2025			Q2 2025			Q3 2025		
Numerator	909	948↑	1,132↓	340↓	396↓	1,511↑	480↑	569↑	2,464↑	738↑	803↑	2,560↑
Denominator	1,666↑	1,790 ↑	7,807↑	1,531↓	1,668↓	7,174↑	1,551↑	1,655↓	7,170↓	1,557↑	1,678↑	7,206↑
% Compliant	54.60↓	53.00% ↓	16.00%↓	22.20%↓	23.70↓	21.10%↑	30.95%↑	34.38%↑	34.37% ↑	47.40%↑	47.85%↑	35.53%↑

Table 2: CPT Code 83655 (Lead Testing) Only

Age Ranges	Age 1 (6-17 Mos)	Age 2 (18-30 Mos)	Ages 3 (31-72 Mos)	Age 1 (6-17 Mos)	Age 2 (18-30 Mos)	Ages 3 (31-72 Mos)	Age 1 (6-17 Mos)	Age 2 (18-30 Mos)	Ages 3 (31-72 Mos)	Age 1 (6-17 Mos)	Age 2 (18-30 Mos)	Ages 3 (31-72 Mos)
	Q4 2024			Q1 2025			Q2 2025			Q3 2025		
Numerator	902	943↑	1,111↓	332↓	379↓	1,472↓	405↑	445↑	2,210↑	691↑	738↑	2,519↑
Denominator	1,666 ↑	1,790 ↓	7,807↓	1,531 ↓	1,668↓	7,174↑	1,551↑	1,655↓	7,170↓	1,557↑	1,678↑	7,206↑
% Compliant	54.10% ↓	52.70 %↑	15.70%↓	21.70 %↓	22.70%↓	20.50%↑	26.11% ↑	26.89% ↑	30.82%↑	44.38% ↑	43.98% ↑	34.96% ↑

Peer Review Credentialing

Health Net Credentialing

Peer Review Credentialing and Access Reports

Investigations

For Q1-2026

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 PROVIDER – Q1-2026

Initial Credentialing

First Name	Last Name	Professional Degree	Specialty	PCP/SCP/Non-Physician	License #	Board Certification (Y/N)	Specialty.	Board Certification Date	Approval Date
JUAN	VELAQUEZ	MD	Internbal Medicine	SCP	A000000053203	N	N/A	N/A	3/19/2026

Recredentialing

First Name	Last Name	Professional Degree	Specialty	PCP/SCP/Non-Physician	License #	Board Certification (Y/N)	Specialty.	Board Certification Date	Approval Date
MERVAT	KELADA	MD	FAMILY MEDICINE	PCP	A000000048353	N	FAMILY MEDICINE	12/31/2009	2/26/2026

Facility Site Reviews

Facility Site Reviews

Facility Site Reviews

12 reviews completed

Mean Score for Q3-4/2025: 96%

Medical Records Reviews

10 reviews Completed

Mean Score for Q3-4/2026: 95%

2025 Physician Directory Accuracy Assessment

Physician Directory Accuracy

Measure	MY: 2025		Goal = 80% Goal Met?
Total Responders		164	
Office locations	109 / 109	100.0%	Yes
Office phone numbers	109 / 123	88.6%	Yes
Accepting new patients	96 / 103	93.2%	Yes
Awareness of office staff of which networks the practitioner participates	92 / 98	93.9%	Yes

Physician Directory Accuracy

Barriers/Interventions

B: Provider and practitioner fatigue continues to negatively impact outreach validation responses due to receiving multiple requests for the same information
I: Continue to consolidate and time the requests for provider and responses

B: Providers and practitioners continue to fail to communicate demographic updates in a timely manner
I: Continue notifying participating physician groups (PPG) for changes identified through reported inaccuracies and regulatory and internal audits

B: Directory information continues to be out of date and/or inaccurate
I: Continue to employ automated systems to perform data cleansing
- Veda Process
- Symphony Provider Directory

Population Segmentation Report

Population Segmentation

The report reflects ongoing programs and activities for CHPIV targeting specific subpopulations. The following are listed:

- Applicable areas/products
- Criteria for eligibility
- Number of potentially eligible members of population
- Percentage of potentially eligible members of population

Population Segmentation

Program	# Eligible Members	% Eligible Members	Program	# Eligible Members	% Eligible Members
Improve Preventative Health: Flu Vaccinations	80,107	83.25%	Diabetes Prevention Program	4,924	5.12%
Improve Preventative Health: Breast Cancer Screening	16,693	17.35%	Diabetes Management Program	32,147	33.41%
Improve Behavioral Health: Severe and Persistent Mental Illness (SPMI) and Follow-Up Care after Mental Health Emergency Department Visits	Data Not Available	N/A	Cardiac + Diabetes	32,147	33.41%
Improve Behavioral Health: Follow-Up Care after Substance Use Disorder Emergency Department Visits	Data Not Available	N/A	Health Information Form	96,221	100%
Improve Behavioral Health: Depression Screening and Follow-Up Care	52,115	54.16%	Initial Health Appointment	96,221	100%
CHPIV Pregnancy Program	50	0.05%	Teladoc Mental Health (Digital Program)	73,295	76.17%
Care Management	11,845	12.31%	Behavioral Health Care Management	96,221	100%
Transitional Care Management	445	0.46%	Chronic Condition: Respiratory Conditions (COPD & Asthma)	5,360	5.57%
Chronic Condition Disease Management	39,947	41.52%	Emergency Room Diversion Program	38	0.04%
Chronic Condition Management: Substance Use Disorder-Opioid (SUD-O) Program	4,040	4.20%	Chronic Condition: Oncology	3,286	3.42%
Tobacco Cessation- Kick It California	73,295	76.17%	Telemedicine	96,221	100%
			Disease Management/Health Coaching- Be In Charge!	4,102	4.26%

Health Net Q1 QIHEC Questions

Question Follow-up

N/A

DSNP QIHEC

DSNP QIHEC

1. Member/Provider Metrics
2. Utilization Management ✓
3. Appeals & Grievances ✓
4. Quality
    a. STARS/HEDIS
    b. Process Improvement
5. Care Management ✓
6. Health Equity
7. Credentialing ✓

Utilization Management – Q1

Inpatient Admissions – Q1

Admits: 14

Readmits: 3*

Average Length of Stay (ALOS): 8.3 days

ER Utilization – Q1

Visits: 39

Outpatient Specialty Units– Q1

Visits/Procedures: 89

Appeals & Grievances – Q1

Grievances: 1

Credentialing

Q1- 97 Providers

Q2 – 16 Providers

Questions & Comments

Information Items

Community Health Plan
OF IMPERIAL VALLEY

CHPIV
D-SNP Model of Care

August 2026

Healthcare Services

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

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 July 2026 *(data pulled before end of month)*	42	12	41
Totals for January 2026 – Present Day	481	107	353

Community Health Plan OF IMPERIAL VALLEY

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

- July 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 and track progress toward established MOC goals.

Community Health Plan OF IMPERIAL VALLEY

Questions?

Appendix

COMMUNITY HEALTH PLAN OF IMPERIAL VALLEY

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 90th 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 90th 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 90th 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**

Community Health Plan OF IMPERIAL VALLEY

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 90th 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 90th 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 90th 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	

COMMUNITY HEALTH PLAN OF IMPERIAL VALLEY

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: Onsite Review Scheduled (July 13–24, 2026)
- 2024 DHCS Medical Audit Corrective Action Plan (CAP) Update
- DMHC Enforcement Matter: Grievance Reporting: Corrective Action Plan Progress
- 2027 D-SNP Integrated Member Materials: Submitted to CMS

2025 DHCS Medical Audit

CHPIV completed its document production phase for the 2025 DHCS Medical Audit. All required documentation was submitted in accordance with DHCS timelines, and all requested case files were identified, completed, and submitted for review. DHCS scheduled the onsite review for July 13 through July 24, 2026, with the closing conference on July 24. The onsite review falls outside the reporting period covered by this report.

During June, efforts shifted from document production to onsite readiness. Activities included validation of submitted materials, continued coordination with Health Net, mock interview and interview preparation sessions with subject matter experts, and targeted follow-up with internal departments and delegated partners on potential gaps identified during pre-onsite review.

CHPIV remained on track with all key audit milestones through the close of the reporting period. Because the onsite review has since been conducted, management will provide the Commission with a status update at the August meeting, in the appropriate session.

2024 DHCS Medical Audit Corrective Action Plan

CHPIV submitted its next Corrective Action Plan (CAP) report to DHCS on June 1, 2026, meeting the required deadline.

The submission provided a comprehensive update on CHPIV's expanded monitoring of Health Net, a draft job description for the Health Equity Officer position, and additional supporting documentation responsive to the items for which DHCS previously requested further clarification. Remediation efforts continue to center on Health Net operations, Delegation Oversight, and the hiring of a Health Equity Officer by September 2026.

CHPIV is awaiting DHCS review and feedback on the June 1 submission. Management will report to the Commission upon receipt of DHCS's response and will continue to advance the corrective actions in the interim.

DMHC Enforcement Matter – Grievance Reporting

The Department of Managed Health Care (DMHC) enforcement matter related to the untimely submission of the Q3 2025 quarterly grievance report remains under Department review. CHPIV timely submitted its response and Corrective Action Plan (CAP), which included root cause analysis, corrective actions, and supporting documentation addressing the reporting process.

During the reporting period, Compliance implemented the corrective actions identified in the CAP, including:

- Completion of staff training on regulatory grievance reporting requirements, submission timelines, and escalation procedures.
- Implementation of a formal escalation process for late delegate submissions.
- Continuation of bi-weekly regulatory reporting notifications to monitor upcoming filing deadlines.
- Successful on-time submission of all June 2026 regulatory reports under the enhanced monitoring process.

Additional enhancements, including a centralized regulatory reporting tracker with automated deadline reminders and expanded delegation oversight of Health Net's reporting performance, are scheduled for completion by July 31, 2026.

At this time, CHPIV has implemented all operational improvements necessary to strengthen reporting controls and is awaiting the Department's review of its CAP submission. Compliance will continue monitoring reporting performance and will provide an update upon receipt of DMHC's determination.

2027 D-SNP Integrated Member Materials

During June 2026, CHPIV completed and submitted its integrated member materials for the 2027 plan year to the Centers for Medicare & Medicaid Services (CMS) through the Health Plan Management System (HPMS). The submission was made within the CMS-established deadline.

The materials are currently under CMS review. Management will report the outcome of the review to the Commission, including any required corrections, resubmissions, or marketing review findings, and will ensure that approved materials are produced and distributed within required member notification timeframes.

Information Items

Operations report for review

Operations Report

Period Covered: Quarter 2, 2026

Highlights

- **Sales:** Alia Roma obtained her sales license last month, so we now have 3 full-time employees actively enrolling new members. We also executed 2 new external broker agency agreements, effective 8/1/2026.
- **Member services:** We added a new survey question to our member outreach calls: How easy is it to get the healthcare you need? How can we help? This is a variation on a CAHPS/STAR measure, so it will give us a baseline for how we are performing. We will report out next month on responses.
- **Provider:** We continue to focus on provider services, across Medi-Cal and Medicare lines of business. For Medicare, we are prioritizing service to 13 directly contracted PCPs and 2 specialists, based on number of members served. Our team will visit these offices weekly to assist with questions, concerns and issue resolution.

Key Metrics – Community Advantage Plus

Community Advantage Plus, Quarter 2 Performance Review, Apr – Jun 2026

Objective	Key Results	Learnings	Qtr 3 Focus
1. Increase membership	• Enrollment is 47% lower than projected, due to lower gross sales (31% below projections), and a higher than projected disenrollment rate. • 72% of enrollments from employed sales staff. • Disenrollment rate decreased from 12% to 6% from April to June.	• PCP referrals are lower than expected. • Benefits are not as competitive as other plans. • Proactive member outreach and authorization assistance has helped minimize disenrollments.	• Increase provider services for direct network PCPs. • Extend contracts to more external brokers. • Pay fair market value commissions.

Objective	Key Results	Learnings	Qtr 3 Focus
2. Operate a financially sustainable plan	• Admin costs are lower than budgeted. • Claims expense is lower than projected. • Risk score is lower than projected, and declining month over month.	• Lower medical expense is offsetting the budget impact of lower revenue. • Claims expense is immature and variable, given small membership. • We are attracting and retaining members with fewer chronic conditions than expected.	• Enhance early notification and reporting of key inpatient utilization metrics. • Implement initiatives to ensure capture of qualifying diagnoses for appropriate risk adjustment and revenue retention.
3. Provide quality care and services to members	• Hospital readmissions are relatively low (total of 2 this quarter). • CHPIV staff are: - fielding 100+ member inquiries per month; and - visiting 10-15 member/mo in their homes. • Only 12% of members have a documented PCP encounter. • Low # of grievances (6 for quarter).	• We have limited visibility on quality-of-care metrics due to delayed encounter data processing from several IPAs. • CHPIV staff are handling a majority of member inquiries, suggesting a preference for local support.	• Escalate resolution of IPA encounter data processing errors. • Enhance reporting of care management and utilization metrics.
4. Meet regulatory requirements	• 10 relatively minor corrective action plans open with delegates for >30 days. • 5 marketing-related complaints reported to CMS. • 99.5% of regulatory deliverables submitted timely to CHPIV.	• Marketing-related complaints are unsubstantiated, often initiated by brokers.	• Implement broker onboarding and monitoring plan. • Enhance CHG deliverable tracking.

Issues / Risks

- IPA encounter data – not currently processing data from 2 IPAs
- UCSD contract

Next 30 Days

- Onboard new brokers
- Initiate in-home visits
- Finalize 2027 benefits

Period Covered: July 14, 2026- July 13, 2026

Highlights

- 1 open position: Health Equity Officer
- Rolled out the employee recognition program called Hidden Hero Spotlight
    - Recognized 6 employees at the town hall meeting

    - Carlos Herbert is our Employee of the Quarter for his work on the Provider Network Directory
- 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	None this period 4 hires total in 2026
Number of exits in 2026	None this period Total exits YTD: 7 5 voluntary (12% YTD turnover)

Issues / Risks

- No known risks

Next 30 Days

- Assist with onboarding of the Chief Compliance Officer and the Health Equity Officer
- Final goal check-in of the year