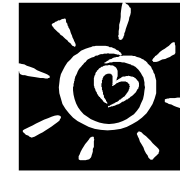


**Board of Governors
Regular Meeting Minutes #276
December 6, 2018**



L.A. Care
HEALTH PLAN

L.A. Care Health Plan, 1055 W. 7th Street, Los Angeles, CA 90017

All votes during a teleconferenced portion of the meeting were by roll call

Members

Hector De La Torre, *Chairperson* **
Alvaro Ballesteros, MBA, *Vice Chairperson*
Robert H. Curry, *Treasurer*
Layla Gonzalez-Delgado, *Secretary*
Stephanie Booth, MD
Christina R. Ghaly, MD *
George W. Greene, Esq.

Antonia Jimenez *
Hilda Perez
Courtney Powers, JD
Honorable Mark Ridley-Thomas
G. Michael Roybal, MD, MPH
Ilan Shapiro, MD *

Management/Staff

John Baackes, *Chief Executive Officer*
Terry Brown, *Chief of Human Resources*
Augustavia Haydel, *General Counsel*
Marie Montgomery, *Chief Financial Officer*
Richard Seidman, MD, MPH, *Chief Medical Officer*

**Absent **Via teleconference*

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>WELCOME</p> <p>Alvaro Ballesteros <i>Vice Chairperson</i></p>	<p>Alvaro Ballesteros, MBA, <i>Vice Chairperson</i>, called the meeting to order at 2:00 p.m., and noted that the photos presented just prior to the meeting were of the re-opening celebration at the new L.A. Care Family Resource Center (FRC) in Lynwood.</p> <p>He welcomed everyone to the meeting and invited the members of the Board and senior staff to introduce themselves.</p> <p>He announced that members of the public are welcome to introduce themselves or can remain anonymous, and the public may address the Board on matters listed on the agenda before or during the Board's consideration of the item, and on any other topic at the Public Comment item 2 on the agenda.</p> <p>He also announced that the Board is pleased that people are here to speak to the Board, and would like to ensure that everyone who would like to do so has the opportunity to speak today.</p> <p>He welcomed members of the CCIs and RCACs and informed them that members will be introduced later in this meeting during the ECAC report.</p>	
<p>APPROVAL OF MEETING AGENDA</p> <p>Alvaro Ballesteros</p>	<p>The agenda was approved as submitted.</p>	<p>Approved unanimously. 7 AYES (Ballesteros, Booth, Curry, Gonzalez-Delgado,</p>

APPROVED

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
		Perez, Powers, and Roybal)
PUBLIC COMMENT	<p>Alphonso Noriega, <i>Member</i>, RCAC 4, he is here to speak as a patient, consumer and a member. He has been going through aggravation. The directory of doctors is incorrect. Some of the doctors are not associated or affiliated. He has put in grievances. He has gone through hardships because the doctors do not accept L.A. Care members or patients. Broadway Radiologist takes CTs, ultrasounds and MRIs. After the procedure, he went to pick up the CD and they wanted \$5 cash for every CD. He was reimbursed, but this organization is embezzling because they are charging every patient. The third item is more aggravating. The authorization letter is called Met Plan, decided to change from six months to three months.</p> <p>John Baackes, <i>Chief Executive Officer</i>, commented that accuracy in the provider directory is a perennial problem for all health plans, especially the paper directory, because there are changes every day. Even the online directory has issues because provider information changes. This problem is shared by all health plans and there is an industry-wide effort to improve the accuracy of the directories.</p> <p>Dino Kasdagly, <i>Chief Operations Officer</i>, noted that the provider directory is being worked on at the state level and L.A. Care is working on it internally to develop a new process to improve accuracy.</p> <p>Mr. Baackes asked Mr. Noriega to speak with a member services representative today at the meeting about Broadway Radiologists because it is not part of the contract with the state for a provider to charge a patient for a CD with test results.</p> <p>Dr. Seidman responded that he would also follow up on the reduction of the period of time for the authorization process.</p> <p>Elizabeth Cooper, <i>Member, CCI Council Area 2 and RCAC 2</i>, indicated that she has asked to speak on each item on the Consent Agenda. She is experiencing extreme emotional distress because of the Agenda item. She asked about the charitable organization motion.</p> <p>Augustavia Haydel, <i>General Counsel</i>, explained that there is a process for Board Members to donate their stipends to two charitable organizations that are randomly selected.</p> <p>Ms. Cooper encouraged staff to look beyond the usual large charities to smaller organizations, and to seek diversity in the selection process.</p> <p><i>(Member Greene joined the meeting.)</i></p>	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>Ms. Cooper commented on ECA 100, in light of the fact that changes are being proposed, she asked the consumer representatives to take note that they should keep the members informed of proposed changes to advisory committees. She thanked the Board Members.</p>	
<p>APPROVAL OF CONSENT AGENDA</p> <p>Hector De La Torre</p>	<p>Andria McFerson, <i>Chair</i>, RCAC 6, asked if there was any motion on the consent agenda related to the CCI.</p> <p>Mr. Baackes stated that there is no motion on the Consent Agenda related to the Cal MediConnect consumer committee.</p> <ul style="list-style-type: none"> • Approve November 1, 2018 meeting minutes • Approval of Charitable Organizations to Receive Board Member Stipends <u>Motion BOG 100.1218*</u> To designate Insure the Uninsured Project and Project Angel Food as authorized recipients of funds from Board Member stipends according to Legal Services Policy 300 for the calendar year 2019. • Children’s Health Consultant Advisory Committee Members <u>Motion BOG 101.1218*</u> To approve the nominations of: <ul style="list-style-type: none"> ○ Tara Ficek, MPH, representing Maternal and Child Health Advocates, Parents or Consumers Seat ○ Rebecca Dudovitz, MD, MS, representing Undesignated seat • SAP America Contract <u>Motion FIN 100.1218*</u> To authorize staff to execute a contract in the amount of \$8,200,000 with SAP America to provide SAP HANA Enterprise Cloud Services for the period of January 1, 2019 to December 31, 2023. • Scout Exchange Contract <u>Motion FIN 101.1218*</u> To authorize staff to execute a contract in the amount of \$11,100,000 with Scout Exchange to provide Contingent Worker Vendor Management Services for the period of January 1, 2019 to December 31, 2021. 	<p>The Consent Agenda was approved unanimously. 7 AYES</p>

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<ul style="list-style-type: none"> • Health Dialog Contract Amendment <u>Motion FIN 102.1218*</u> To authorize staff to amend a contract with Health Dialog to add an additional \$3,531,632 for a total contract amount not to exceed \$10,208,387 for the period of February 1, 2019 to August 31, 2020. • IT Staff Augmentation Contract <u>Motion FIN 103.1218*</u> To authorize expenditures with: Cognizant, FlexTech, HCL, Infosys, Solugenix Corp., Cumberland Consulting, Insight Global, and Synaptix for \$14,550,000 (Total Contract Amount of \$85,580,000) for staff augmentation expenditures through June 30, 2019. • Consumer Advisory Committee Members <u>Motion ECA 100.1218*</u> To approve the following Regional Community Advisory Committee (RCAC) and Coordinated Care Initiative (CCI) Council members as reviewed by the Executive Community Advisory Committee (ECAC), during its November 14, 2018 meeting: <ul style="list-style-type: none"> ○ Dawoud Moore, Consumer, RCAC 1 ○ Blanca Nelly Folgar, Consumer, RCAC 5 ○ Johnny Chua, Consumer, RCAC 11 ○ Alma Whitehurst, Consumer, CCI Area 4 • Ratify Elected Executive Community Advisory Committee (ECAC) At-Large Members <u>Motion ECA 101.1218*</u> To ratify the election of Deaka McClain and Lluvia Salazar as At Large Members of the Executive Community Advisory Committee (ECAC) for the calendar year 2019. 	
CHAIRPERSON'S REPORT	<p><i>(Member De La Torre joined the meeting by phone.)</i></p> <p>Vice Chairperson Ballesteros announced that there would be no committee meetings in December and no Board meeting in January.</p>	
CHIEF EXECUTIVE OFFICER REPORT John Baackes	<p>Mr. Baackes reported:</p> <ul style="list-style-type: none"> • As Vice Chairperson Ballesteros reported, there was a celebration of the re-opening of the Lynwood Family Resource Center (FRC) on November 10, which several board members attended. The Board Chairperson, Hector De La Torre, had attended the opening 	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>celebration for the original FRC in Lynwood as the State Assembly member for that area and was back for the re-opening as the Board Chairperson.</p> <ul style="list-style-type: none"> • This is an important new facility, including more space for care management staff to work directly in the community instead of from L.A. Care’s downtown offices. Other FRCs will include care management teams. A sixth FRC will open in East Los Angeles early in 2019 and in Pomona in the second quarter of 2019. • L.A. Care was honored by the Los Angeles County Medical Association (LACMA) for Community Innovation, for the development of the <i>Elevating the Safety Net Program</i>. L.A. Care is pleased and proud to be recognized by LACMA, and hopes that more providers will learn about the new program, which is aimed at increasing the number of primary care physicians serving patients in the safety net in Los Angeles County. L.A. Care has received 30 applications for grants to support primary care physicians from clinics and practices in the County, and six applications for medical school debt relief grants. L.A. Care is also supporting eight scholarship recipients. 	
L.A. Care Covered Marketing Campaign	<p>Mr. Baackes welcomed Alex Gallegos, <i>Senior Director, Sales and Marketing, Product Sales</i>, and John Cota, <i>Director, Creative and Marketing Operations</i>. L.A. Care has developed marketing programs to attract and retain members for two programs offered in Los Angeles County.</p> <p>Mr. Gallegos presented information about L.A. Care’s latest market campaigns for programs that allow voluntary enrollment, L.A. Care Covered and Cal MediConnect (<i>a copy of the presentation can be requested from Board Services</i>). Much of the development work for the campaign is being done internally, to realize cost savings. Mr. Cota reviewed the internal development of the creative parts of the campaign. The campaign will be used for broadcast (radio and television), print (media and outdoors), digital and social media advertising.</p> <p>Board Member Hilda Perez thanked them for the presentation. She asked if there are ads on YouTube. Mr. Gallegos responded that there are.</p> <p>Mr. Gallegos thanked Hugo Sanchez, <i>Marketing Manager for L.A. Care Covered</i>, for his work.</p>	
FY 2017-18 Sponsorship Report	<p>Mr. Baackes referred to the report included in the meeting materials (<i>a copy of the written report can be requested from Board Services</i>). During FY 2017-18, L.A. Care supported 126 sponsorships (117 sponsorships in the prior year). Not every request is granted; there is criteria for sponsorship support.</p>	
Proposed Coordinated Care Initiative (CCI) Councils Restructure	<p>Mr. Baackes noted that this item was discussed at the Executive Committee meeting on November 26. L.A. Care has had regional advisory committees since inception. With the expansion under the Affordable Care Act, two new types of members were added for the Cal</p>	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>MediConnect (CMC) and Coordinated Care Initiative (CCI) programs. As a result, four years ago the ad hoc temporary CCI Councils were formed. Beginning in 2018, California changed the requirements for consumer advisory committees for CMC.</p> <p>At the Executive Committee on November 26, staff presented a recommendation on organization of the committee to meet the new requirements. L.A. Care received a number of comments about the recommendation at the meeting. The Executive Committee directed staff to begin proposal for the new CMC committee, and to review the changes with the CCI Councils and Regional Community Advisory Committees (RCACs) for additional feedback.</p> <p><i>(Member Ridley Thomas joined the meeting.)</i></p> <p>Francisco Oaxaca, <i>Senior Director Communications and Community Relations</i>, reviewed the process undertaken to arrive at a solution to comprise a CMC consumer advisory committee that will put L.A. Care in compliance with regulators and will provide opportunities for feedback directly to the health plan. <i>(A copy of his presentation can be requested from Board Services)</i></p> <p>The structure and composition of the CCI Councils does not meet the structure or composition of members required by L.A. Care’s three-way contract with the California Department of Health Care Services (DHCS) and the Centers for Medicare and Medicaid Services (CMS). There are currently only two CMC members in the CCI Councils. He reviewed the geographic representation under the currently structure and the recommended representation of one member for each of the eight Service Planning Areas (SPA) in Los Angeles County. The new committees will meet quarterly, and there will occasionally be special engagement sessions. Member term limits are proposed for the new structure to provide opportunities for new members to join and assume leadership roles. The new structure will improve representation for CMC members. The proposed changes will maintain levels of representation on the Executive Community Advisory Committee (ECAC) for members.</p> <p>Board Member Perez thanked Mr. Oaxaca and staff for their hard work. She believes that the proposed changes will make the committees more effective. She is concerned with recruitment, as she mentions frequently at ECAC and at Board meetings. She has been on the Board for six years and she knows that the RCACs have capacity of 35 members and CCI Councils can have up to 11 members. There now is a targeted number of 20 members in each advisory committee; members want committed members can fully participate in advisory committee activities. She asked for additional information about the CMC membership that is located in Los Angeles County within each of the eight SPA regions on the maps. She thanked the Board Chair and staff for responding to her suggestion to provide a platform for members to address the Executive Committee by inviting CCI members to the Executive Committee meeting on November 26. Members are concerned that they did not have access to information about the</p>	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>proposed changes. Although some members attended the two focus groups in September and October, the information was not reviewed with every CCI Council member. She congratulated members for their commitment in reaching out to recruit members to the CCI Councils. She feels that there are few members in the CCI Councils because there was no formal recruitment plan. This is the second time that term limits have been proposed. The presentation today has more information than the ECAC or Executive Committee presentations. Members also reached out to her with their concerns about how quickly this proposal is being moved forward. There is a lot of information to digest and the information keeps changing. As consumer member representative, she plans to visit all of the advisory committee meetings to ask members about this proposal. She respects the staff at L.A. Care and their decisions; she asked for flexibility and openness in listening to suggestions from the members. It is a lot of work and it is important to preserve the trust of the members. The core and purpose of the members is to provide input to the Board. She stated that she listens to members and tries to represent them at the Board meetings. She is the representative for the members and she encouraged members to keep coming to the Board and Committee meetings to address the Board.</p> <p>Mr. Baackes thanked Member Perez for her comments. He noted that the presentation today is not the same as was presented at the Executive Committee because it was revised based on feedback from Executive Committee members and advisory committee members. L.A. Care is proceeding with creation of the CMC advisory committee.</p> <p>Board Member Perez asked about the January 1 effective date, and Mr. Baackes responded that date is for formation of the new quarterly meetings with eight representatives from each of the eight SPAs. The CCI Councils will remain in place until advisory committee members can provide input. She indicated that members have not yet been provided with the documents that show that the new CMC advisory committees are necessary.</p> <p>Mr. Baackes responded that documents can be provided for the requirement is that the CMC advisory committees are comprised of CMC members, family members or care givers. The current CCI Councils have only two members that qualify to satisfy this requirement. There will be opportunities for further input from advisory committee members.</p> <p>Board Member Perez noted that Mr. Oaxaca told her there would be additional opportunities for members to provide input. She asked that the information about those meetings be provided at the next ECAC meeting. Mr. Oaxaca responded that staff would individually reach out to members to get their input before the next Executive Committee meeting in January.</p> <p>Board Member Perez asked which members will be invited, and Mr. Oaxaca responded that the members affected are SPD and CCI members (about 60 in the RCACs) and the approximately</p>	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>20 CCI Council members. There will be additional sessions scheduled to gather additional input.</p> <p>Mr. Oaxaca indicated that new committees would address recruitment. Nine RCAC members are also CMC members, but did not participate in the CCI Councils. L.A. Care advisory committee members are representative of the population, individuals who receive the services for that program provide input on their experience. The advisory committee members are not elected officials.</p> <p>Board Member Booth clarified that the change is in reaction to something the state regulators have decided, and she asked if it is recent. Mr. Baackes responded that the CMC is a demonstration project under the Affordable Care Act (ACA). DHCS created the rules for CMC advisory committees that were finalized in January 2018. The CCI Councils were created in 2014, before these rules were finalized, and L.A. Care is catching up with the latest rules for the advisory committees. Reason we have two sets of advisory committees reflects the growth of the organization. L.A. Care is trying to be compliant with contract and is working on accommodating the members.</p> <p>Board Member Delgado noted that if CMC is a demonstration project it could end, and she asked if a dissolution clause could be included in L.A. Care's plans.</p> <p>Mr. Baackes informed the Board that the federal government asked California to continue CMC for three more years. The state is considering that request. DHCS Director said it was almost certain that California would agree to an extension. L.A. Care can put in provisions in case the program ends. As a health plan L.A. Care can file an application to create a new health coverage plan to cover these people, the provision could be that the committees continue under that new coverage plan.</p> <p><u>PUBLIC COMMENTS</u></p> <p>Brenda White, <i>CCI Council Area 3 Chair</i>, said she was not available when the change was made. Next time when changes are happening, she asked that L.A. Care take more time. This has happened so fast. It is a mess. She told Mr. Baackes that L.A. Care took good care of her in every way during her recent surgery.</p> <p>Ana Romo, <i>RCAC 8 Chair</i>, commented on the speaker earlier in this meeting that L.A. Care was not at fault. It could have been were it not for the reimbursement of his expenses. Sometimes providers charge incorrectly but that is not in the hands of L.A. Care but it is because of the provider. That situation motivated him to show his leadership, to obtain the reimbursement and to speak here today. That is what RCACs are for, to be able to resolve the problems as he</p>	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>has, and he has done really well. The presentation was excellent, but one point is that she would like L.A. Care to be for the legal residents, it is not for all the residents, those of us that do not have a social security number do not benefit from it.</p> <p>Deaka McClain, <i>ECAC At-Large Member and CCI 4 Vice Chair</i>, said that up until today she did not feel that she was representing people because she was invited to participate in an ad hoc committee and told not to tell other members. They were told that the ad hoc meeting was to develop recommendations. She does not feel comfortable being a representative. She does not feel that the new structure will work. She feels that SPD members will not have a voice if they are put in the RCACs. These members already have difficulty getting services from the doctors. She wants members to really be heard and not be lied to.</p> <p>Demetria Saffore, <i>CCI Council Area 1 Chair</i>, said she feels the same way Ms. McClain feels. Not all the members were included in the discussion, just the Chairs from CCI Councils. When Mr. Oaxaca reported at ECAC, her fellow members felt she had withheld information from them and it was very uncomfortable. She felt that Mr. Oaxaca had betrayed her.</p> <p>Mr. Baackes noted that these opportunities are for more input so everyone has a chance to be heard.</p> <p>Ms. Saffore does not have a problem with the changes, but with the way the changes were presented. She asked that members be made aware that it was not her fault as a Chair. Mr. Baackes promised to go to each CCI Council meetings to explain the situation.</p> <p>Mary Jo Fernando, <i>CCI Council Area 2 Member</i>, thanked the Board and Mr. Baackes. She will not be at the next CCI Council meeting. She asked if the changes would be decided by the next CCI Council meeting on March 27. She wants to know because she wants to make a difference in her community.</p> <p>Wilma Ballew, <i>CCI Council Area 2 Chair</i>, commented she has been listening and appreciates the effort being made. She checks with herself to understand why she does not have a problem with this. She cannot change the state requirement. Given the requirements by state regulators, she does not understand the objections from the members. As a CCI member and Chair of CCI Area 2, she knows how hard it is to recruit members because the difference is that people with disabilities have extra special needs. Whatever issues they bring are magnified in the CCI Councils. She has gone to all the RCACs and all the CCI Councils and she sees the differences. Her question is why we can't move forward and see how this works. We do not really have a choice. She never thought about how many CCI Council members are CMC members, they just moved forward and did what was needed. She tries to listen with an open mind. She noted</p>	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>that she is trying to represent the members in her area, just as Board Members Perez and Delgado try to represent members from all over Los Angeles County. As she goes to area meetings, she does not see Member Perez, but she sees Member Gonzalez-Delgado at many meetings. There are members who are supportive of what L.A. Care is doing.</p> <p>Ms. McFerson stated that we are the state, so as far as the state making decisions on anything having to do with our programs, because we are the state and we did have some standing on the decision. She requested postponement of the appointment of the eight members to the new CMC committee, so the RCACs and ECAC can weigh in on the issues. This request is only if the Board approves removal of the CCI Chairs from the ECAC. CCI Council Chairs have representation on ECAC. She asked if there will be stipends and food available for the eight new members and she asked how the new committees would represent members who are not at the meetings.</p> <p>Mr. Baackes responded that the CMC advisory committee must have CMC members in it. L.A. Care will establish a committee that will meet those criteria.</p> <p>Ms. McFerson asked if CCI Council members could weigh in on that process and help with the appointment process for the members of the CMC advisory committees.</p> <p>Mr. Baackes suggested that CCI Council members could suggest members for the CMC advisory Committees. He said he is sorry that this has gotten to this state and spending so much time on this issue. This is a routine adjustment. L.A. Care is not destroying the RCACs or ECAC and is not disenfranchising a soul. L.A. Care is trying to meet requirements of the state of California that L.A. Care have a CMC advisory committee with members and family members participating. The CCI Councils do not now meet that requirement. L.A. Care is creating a new CMC advisory committee. Everything else remains in place. L.A. Care would like you to consider the recommendation that staff has made. There is open discussion on it right now.</p> <p>Ms. McFerson asked for any paperwork that people needed to sign to participate in the ad hoc committee and not tell other members. Mr. Baackes responded that there is no paperwork that anyone was required to sign.</p> <p>Estela Lara, <i>RCAC 2 Chair</i>, commented that she is disappointed that there is not enough transparency. It is vital that we have transparency for our members. When ECAC received the information, they were informed there was an ad hoc committee and CCI members were not informed. Ms. Lara stated that they cannot overlook the severity that was committed to our members. These members were entitled to know how they would be affected. They were not</p>	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>informed, and that is why we are having this discussion. She understands that this is a state mandate that has to happen, but the process did not flow the way it was supposed to. It is important that this be brought to the Board's attention, as it seems there was a discrepancy about letting the members know. Initially she thought it would only affect the CCI members. The CMC members in the RCACs will be moved to the new committee, and the CCI members will move to the RCACs. It will impact all the advisory committees. Going forward we need to be very transparent because this was a fiasco, and that is why the members are here.</p> <p>Mr. Baackes responded that the process has worked. Members did not have the right information and came to the Executive Committee to have a discussion, and now we are having a discussion here. Nothing will move forward until we have your input. Your input is welcome and we must move on the state requirement. Nothing has happened yet. The process has brought the situation out and we are discussing it.</p> <p>Ms. Lara emphasized that members should have been informed sooner.</p> <p>Member Booth indicated that she is hearing all this for the first time, but she does not feel that it was hidden from anyone. What she is hearing from L.A. Care members and member advocates is very different from what L.A. Care stands for. L.A. Care is very committed to hearing the concerns from members and advocates. At some point, it has to move forward. Looking from a more positive point of view, L.A. Care needs to do what the state requires with regard to the CMC advisory committee with CMC representation. L.A. Care does an outstanding job of including members of the public, members and advocates.</p> <p>Member Ridley Thomas indicated that it might be useful in interest of transparency and accountability for the board to benefit from a written document to understand what has transpired, what needs to take place to cure it. The rationale is to reduce the conversation to a document that all of us can have as a reference point.</p> <p>Mr. Baackes responded that he will create a document for distribution to the Board and will make it available to the public.</p> <p>Ms. Cooper stated that the enabling legislation included consumer representation as part of the Board. She asked the two representatives to note that she is very sorry that they did not come to the members sooner about this proposal. They are the representatives of the members. Under the constitution of the US and the California constitution we have right to have representative government hear us. She noted that under the Brown Act, meetings could not be held in private. She asked her county representative, Mark Ridley Thomas, to please take the information back to the Board of Supervisors. She proposed a motion for the two consumer</p>	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>representatives to ask that Mario Ramos and Carrie Broadus have a meeting with CCI Council members before this proposal is discussed. She feels this is not right. She stated that we are the people.</p> <p>Nesima Istrefi, <i>CCI Area 4 Chair</i>, stated that from the beginning in 2015, she completed all training. Now she needs to go to more training but she will just be a RCAC member and not a leader. She wants to know why she should go to leadership training again, and why L.A. Care is spending money on something that is not useful. It does not make sense.</p> <p>Vice Chair Ballesteros thanked all the speakers and noted that there will be more opportunities for everyone to weigh in on this issue.</p>	
<p>CHIEF MEDICAL OFFICER REPORT</p> <p>Richard Seidman, MD, MPH</p>	<p>Richard Seidman, MD, MPH, <i>Chief Medical Officer</i>, referred to his written report (<i>a copy of his written report can be requested from Board Services</i>) and highlighted the following information:</p> <p>It is flu season and LA County has reported its first death due to influenza. He encouraged everyone to get an influenza vaccine because prevention is the best defense against the flu.</p> <p>Board Member Delgado asked about the reference to breast cancer screening for MCLA and CMC members in his report, and she encouraged including the PASC SEIU members in that program. Dr. Seidman responded that he would bring the suggestion to the internal committee. He added that access to vaccines can be a challenge. If a member is not able to see their primary care provider, vaccines are offered without an appointment at many of L.A. Care's network pharmacies. He recommended seeing the regular provider for children's immunizations. Board Member Perez noted that 'flu vaccines were also offered at L.A. Care's FRCs, and she asked if there will be another date. Dr. Seidman will continue to advocate for more vaccine clinics but the best thing is for people to be vaccinated through their provider or at a network pharmacy. L.A. Care is working with a partner agency to have more vaccine clinics offered throughout the year.</p> <p>Board Member Curry congratulated L.A. Care on the Healthcare Effectiveness Data and Information Set (HEDIS) score, he is proud to be a Board Member when he sees the improvement year after year. Dr. Seidman thanked him, and noted that it is a huge accomplishment to attain the level of Commendable status from the National Committee for Quality Assurance for the Medi-Cal program.</p>	
ADVISORY COMMITTEE REPORT		
<p>Executive Community Advisory Committee</p>	<p>Board Member Gonzalez-Delgado welcomed individual advisory committee members attending the meeting as a representative of their community advisory committees.</p>	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>(ECAC)</p> <p>Hilda Perez/Layla Gonzalez-Delgado</p>	<p>Board Member Perez announced that ECAC met on November 14.</p> <ul style="list-style-type: none"> • Mr. Baackes updated the committee on issues that affect L.A. Care members that were reported today during his CEO report. • ECAC nominated At-Large Members Lluvia Salazar, RCAC 11 member, and Deaka McLain, CCI Council member. • Mr. Oaxaca provided an overview on the restructure of the CCI Councils that Mr. Baackes reported during his CEO report that was discussed earlier today. • Mr. Oaxaca also reported the following: <ul style="list-style-type: none"> ○ L.A. Care Health Plan has signed a three-year contract with UCLA Health that will allow its 2.2 million members to receive advanced and highly specialized care, when deemed medically necessary, at the world-class Ronald Reagan UCLA Medical Center and the UCLA Medical Center in Santa Monica. ○ Twenty-four new Health Promoters were chosen, with six selected to be program “Leads”. The six new Health Promoters Program Leads participated in a five-class training provided by Cal State Long Beach, from September to October that covered professionalism, participant retention, establishing collaborations, and program evaluation and how to analyze data. ○ Mr. Oaxaca announced that L.A. Care closed the Housing for Health (HfH) program to new referrals effective October 31, 2018. To date, L.A. Care has received 226 referrals, and 119 were enrolled in HfH and are receiving intensive case management services. <p>Board Member Gonzalez-Delgado continued with the report:</p> <ul style="list-style-type: none"> • Dr. Seidman and Nai Kasick, <i>Senior Director, Health Services</i>, provided a presentation on what L.A. Care is doing to address Social Determinants of Health (SDoH). This presentation was also provided at the Board Retreat in September: <ul style="list-style-type: none"> ○ Studies have shown that health care services impact health outcomes by about 20%, health behaviors impact outcomes around 30%, and social, economic and environmental factors impact outcomes around 50%. ○ The five areas prioritized by L.A. Care’s SDoH Steering Committee are: <ul style="list-style-type: none"> ▪ Housing ▪ Food Security ▪ Income Security ▪ Transportation ▪ Early Childhood Education ○ Next steps consist of: <ul style="list-style-type: none"> ▪ Continue CHIF grants focus on priority SDoH areas. 	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<ul style="list-style-type: none"> ▪ Increase efforts to assess and address SDoH in our everyday work, including introduce and integrate new community resource platform in care management services and other departments, as needed. Mentioned veggie vouchers and calls to diabetes patients. <p>Board Member Perez reported that health promoters call members with diabetes to encourage them to take the appropriate tests, for which they can receive an incentive award. This is part of L.A. Care’s work to improve care for members with a chronic condition.</p> <p>Member Gonzalez-Delgado reported that after the November ECAC meeting many members expressed a lack of trust in L.A. Care. A lot of work must be done to earn that trust again. She hopes L.A. Care takes the steps to do this.</p> <p><u>PUBLIC COMMENT</u></p> <p>Ms. McFerson stated that Board Member Perez talked about the health promoter program and she is a health promoter. The health promoters do a good job reaching out to the community and report back to help improve care for members. She requested that the Board seek more diversity in the health promoter program, with participation from different genders and races.</p>	
STANDING COMMITTEE REPORTS		
Executive Committee Alvaro Ballesteros	Mr. Ballesteros reported that the Executive Committee met on November 26. <i>(Minutes of the meeting are available by contacting Board Services.)</i>	
Government Affairs Update	Cherie Compartore, <i>Senior Director, Government Affairs</i> , reported: <ul style="list-style-type: none"> • Governor Elect Newsom will be sworn in as California’s new Governor in January and the Assembly and Senate will start its new legislative session with Democratic Supermajorities. This means that both houses of the Legislature will have the ability to raise taxes and pass urgent legislation without input from the Republican Caucus. • The California Nurses’ Association endorsed Governor-Elect Newsom in his campaign and he made many promises about health care while using the phrase, “Medicare for All” as a messaging platform. Although he has since tried to temper expectations about how fast California can enact major changes like single payer, it is unknown now how the Governor’ Elect will respond now that the campaign is over and the responsibility of governing is almost here and he must balance his priorities such as the wildfires, education, water, and health care. • Government Affairs expects a robust debate about health care reform and cost containment in 2018. Anticipating a lot of finger pointing going on as to who is responsible for 	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>increasing health care costs and L.A. Care will be involved in this debate as a constructive voice and will likely have to take on some challenges.</p> <ul style="list-style-type: none"> • Government Affairs will have new state appointments in key departments, several new legislators and key committee changes, and staffing changes at the Capitol. In January, Government Affairs will schedule meetings with legislative staff to discuss the value of L.A. Care, its programs and commitment to the community, showcase the <i>Elevating the Safety Net</i> program and housing initiatives, and emphasize the importance of the two-plan model in LA County. • It will be an incredibly busy year: a new Governor and all that goes with that and expiration of both the federal section 1115 Waiver and the MCO tax, for which managed care plans are the vehicle to bring \$1 billion annually to the Medi-Cal program. It will be a challenging year with all that needs to be accomplished. • There have been mirror bills introduced in the Legislature to provide Medi-Cal coverage to undocumented adults. Government Affairs will be tracking the bills and it is likely L.A. Care will take a support position in the future, once more details become known. • We will be bringing the 2019 Legislative Principles to the next Board meeting for consideration. • The Legislature passed a resolution that condemns the federal government’s proposed changes to the public charge rule and urges the Administration to reconsider and roll back the proposed rule. L.A. Care submitted comments on the public charge, requesting withdrawal of the proposed language and describing the significant harm this policy would cause for both the immigrant population and for citizen family members including children. L.A. Care worked with its various trade organizations to help draft public comment letters. The comment period closes on December 10 and to date; approximately 140K public comments were made so far. 	
Employee Annual Incentive Plan	<p>Terry Brown, <i>Chief Human Resources Officer</i>, summarized a motion to authorize payment of incentives to employees, based on successful achievement of individual goals and all of the fiscal year organizational priorities.</p> <p><u>Motion EXE 100.1218</u> To authorize the disbursement of funds up to \$7,000,000.00 for the Individual Annual Incentive Program, based on the completion of pre-determined individual goals and targets in support of L.A. Care’s 2017 – 2018 Organizational Goals. Distribution of the annual incentive payout shall be guided by Human Resource Policy No. 602, Annual Organizational Incentive Program.</p>	<p>Approved by roll call vote. 9 AYES (Ballesteros, Booth, Curry, De La Torre, Gonzalez-Delgado, Greene, Powers, Ridley-Thomas, and Roybal) 1 ABSTENTION (Perez)</p>

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p><u>PUBLIC COMMENT</u></p> <p>Ms. Cooper commented that L.A. Care has some of the best employees and they deserve the incentive. She encouraged Mr. Baackes to maintain the high quality in L.A. Care staff.</p> <p>Ms. McFerson commented that members need to be able to horn in on bonuses for Community Outreach and Engagement staff. There are members, who are not happy with employees and what they have done, and the members should be able to let staff know that they have to work for something; it is not just given to them.</p> <p>An individual on the phone commented that she has numerous grievances about specific employees, but things have not been resolved and they have continued the same behavior. It is deleterious to her health and health care, as well as many other peoples' health and health care. In addition, they do not have a voice in that at this point, and because these things have not been resolved, yet it is very unfair for employees to get the bonuses. She has grievances and they have not been resolved. She is getting the runaround on the grievances regarding specific people and their actions. They are still in their jobs, happily. It has taken a long time for to get one employee replaced as a grievance and appeals specialist. The response was that they wanted to keep the same person in place; management was behind it and knows that this person was not doing their job appropriately based on the track record that was proven. Yet that was ignored. So she doesn't really feel good about bonuses if those people are able to get bonuses. There are some lovely people who work for L.A. Care. But when her grievances went to the Grievances & Appeals department they completely messed them up. She does not feel the Grievance & Appeals department staff should be part of the bonus based on the number of grievances that she has had to file, the fact that L.A. Care has expressed dissatisfaction with the numerous grievances she has had to file (which are legitimate grievances), and the fact that she got two responses. The problem has not been solved. It has gone to the top and he is sitting there with the Board. The Grievance & Appeals Director refused to speak with her and only spoke with her with the top guy. So they should not be involved in it. She stated that the customer service reps, however, do a bang up job overall. There was a 97% rate in her specific case of taking down the grievances appropriately. She asked how one is to know when the grievance is being taken seriously and if the people that she filed grievances against for legitimate reasons will be up for the bonus.</p>	
Finance & Budget Committee	<p>Board Member Curry, <i>Treasurer</i>, reported that the Finance & Budget Committee met on November 26 (<i>Minutes of the meeting are available by contacting Board Services</i>). The Committee approved a contract amendment with Edmund Jung & Associates for professional services to support L.A. Care's Appeals & Grievances system, that does not require Board approval.</p>	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>Chief Financial Officer Report</p> <p>Financial Report</p>	<p>Marie Montgomery, <i>Chief Financial Officer</i>, reported (<i>A copy of the report can be obtained by contacting Board Services</i>).</p> <p>Highlights of the financial results for the fiscal year ending September 30, 2018:</p> <ul style="list-style-type: none"> • Membership levels are compared to the 8+4 forecast, showing a variance for SPD for deceased member adjustments and changes in categories of aid • Assuming membership will be flat in the coming year • Reporting a net surplus of \$15 million • Fee for service (FFS) claims more favorable this month as claims system is updated. Still being conservative with claims reserve • There were both favorable and unfavorable items in September. Rebate \$226 million was paid to DHCS. Risk adjustment payable for LACC was updated • Reserve set aside for expected for retroactivity • Ended at \$91 million • Administrative expense was \$1.6 million favorable; non-operating expense in line with forecast • Will continue to work with auditors through final audited financials to be presented to Audit Committee in January • Operating margin 93.8 v. forecast of 94.6 • For commercial products, the result is better than expected, but there may be further changes in estimates. LACC has performed very well this year • Tangible net equity (435%) below target (526%) <p><u>Motion FIN 104.1218</u></p> <p>To accept the Financial Report for the period ended September 2018, as submitted.</p> <p><u>PUBLIC COMMENT</u></p> <p>Ms. McFerson stated that L.A. Care is here to serve the low-income community including seniors and the disabled through state and federal funding. L.A. Care has to be completely transparent. With transparency there is trust, with trust, there will be more satisfied and healthier members. A motion was approved on March 28, 2018, to “delegate authority to the Executive Committee to direct up to \$31 million annually for five years”, also “direct Executive Committee to establish an ad hoc that will develop the processes to evaluate and approve expenditures”. Members need access to approved expenditures for that motion and who approved those particular expenditures at the next ECAC meeting.</p>	<p><i>Subsequent to the Public Comment the first roll call vote to approve motion FIN 104 was unanimously rescinded by roll call.</i></p> <p><i>The motion was then reconsidered and was unanimously approved by roll call.</i></p> <p>10 AYES (Ballesteros, Booth, Curry, De La Torre, Gonzalez-Delgado, Greene, Perez, Powers, Ridley-Thomas, and Roybal)</p>

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>Mr. Baackes reported that the Executive Committee later determined it would act as a Committee of the whole, rather than forming a separate ad hoc committee. He offered to report to ECAC on the program, as he reported earlier today. There were 31 applications for the grants to practices or clinics, 6 applications for the medical school debt relief, and 8 scholarships have been awarded.</p> <p>Ms. Ballew stated that she was discussing this today on the way to the meeting and she talked to a few other members. Last night she went over her check stubs from the stipends. She asked if the Finance department could put the correct date of the meeting or event and what kind of meeting so it is easier to match the stub with the event.</p> <p>Ms. Montgomery offered to look into changes to the check printing.</p> <p>Ms. Craft commented that she has brought up numerous times in her grievances and elsewhere many ways that L.A. Care can save money. There are HIPPA, OCR, ADA and patient rights violations that she has brought up. She asked that the issues be resolved. In addition, Grievances take up time. She sees duplicate acknowledgement and resolution letters and authorizations. She suggested that these be investigated and resolved. The same types of grievances are repeated. Authorizations are sent for the wrong thing. She also receives open envelopes. These are not acknowledged. All of this takes time and resources. Perhaps these can be investigated and stop the waste in these areas. She suggested that things that are resolved in the first grievance and not allowed to be taken to a state fair hearing, which just takes more time.</p>	
Monthly Investment Transaction Report	<p>Ms. Montgomery referred to the report on investment transactions included in the meeting materials for Committee member review. <i>(A copy of the report can be obtained by contacting Board Services).</i> As of October 31, 2018, L.A. Care's total investment market value was \$ 1.4 billion.</p>	
Compliance & Quality Committee	<p>Vice Chair Ballesteros reported that the Committee met on November 15. <i>(A copy of the minutes may be requested by contacting Board Services.)</i></p> <ul style="list-style-type: none"> • Dr. Seidman provided updates reported at his CMO Report earlier today. • Thomas Mapp, <i>Chief Compliance Officer</i>, provided Compliance updates: <u>Centers for Medicare and Medicaid Services (CMS) Audit.</u> <ul style="list-style-type: none"> ○ Live pre-audit webinars were conducted October 1-4 and CMS auditors were onsite on October 15-19 to audit the Cal MediConnect program (CMC). The audit focused on: 1) Formulary Administration, 2) Part D Coverage Determinations and Appeals & Grievances, 3) Service Authorization Requests, Appeals & Grievances, 4) Care 	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>Coordination, Quality Improvement Program, and 5) Compliance Program Effectiveness.</p> <ul style="list-style-type: none"> ○ This is the first CMC Audit by CMS. ○ A report on preliminary findings for each audit area was released on October 18 which outlined potential Corrective Actions Require (CARs) and Immediate Corrective Actions Required (ICARs). An ICAR is a severe systemic deficiency that requires immediate action. A CAR is a systemic deficiency that must be corrected, but correction can wait about 30 days until the audit report is issued. ○ L.A. Care’s preliminary findings were related to improvements needed in delegation oversight, appeals and grievances, Board compliance training, denial letter language, and corrective action validation. ○ L.A. Care has identified the root cause of all potential findings and is in the process of identifying all members impacted by the findings. L.A. Care will conduct member outreach for applicable findings. ○ CMS will notify L.A. Care of the final identified CARs and ICARs on December 16 . ○ L.A. Care staff is working on improvements based on the ICARs and CARs. ○ L.A. Care conducted its annual Disaster Recovery test on October 20, 2018. All participating departments were on site and the test was successful. ● The Committee received a report on 2018 Consumer Assessment of Healthcare Providers and Systems (CAHPS) Member Experience Survey. <ul style="list-style-type: none"> ○ Adult and Child CAHPS survey assesses quality of services based on member opinion. The survey is conducted by mail and telephone calls to a random sample of members. CAHPS surveys Adult (age 18+) members about services they received. CAHPS surveys parents of child members about services they received. The annual survey is administered from February to May for services received in the previous 6 months. ○ Each health plan can choose either adult or child for the 13 points (13%) of the total NCQA Accreditation quality rating. L.A. Care selected Child CAHPS for the 2018 rating, which lead to a favorable impact on NCQA accreditation score. Accreditation score for Child CAHPS was 6.53, up from 5.12 in 2017. ○ Adult CAHPS score was 3.29, up from 3.03 in 2017. ○ Another aspect of CAHPS, the Personal Doctor rating, also improved to 50th percentile. 	
PUBLIC COMMENT	Ms. Cooper noted the passing of former President George H.W. Bush, who was responsible for the Americans with Disabilities Act and she wrote to him once. On a non-partisan basis and on behalf of all disabled people and all advocates who fought for the Americans with Disabilities	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>Act she stated, “God Bless President Bush”. She also commented that she asked for reasonable accommodation and special consideration of her expenses to come to the meeting today. She needs to go home to her son, Jonathan, who was not able to be here today. This is a time for good will for all people and all faiths. She thanked Board members and staff for consideration and compassion for members and all the people here today. She acknowledged Dr. McMillan and thanked him as an Afro-American doctor and she encouraged Board members to use his expertise. She wished everyone Happy Holidays, Feliz Navidad, Shalom and Merry Christmas.</p> <p>Vice Chair Ballesteros indicated that her request would be considered.</p> <p>Ms. McFerson noted that it has been a great year volunteering for L.A. Care. Her participation in programs like the RCACs, ECAC and health promoter programs. She thanked everyone for the opportunities. She wished everyone Happy Holidays.</p> <p>Romelda Mesa commented that yesterday she wanted to confirm her appointment today but she did not have L.A. Care’s phone number handy. She looked it up on line and pressed the icon to call L.A. Care, but there was a recording that the number is not working. The number is (855) 576-1620. This is something incredible and people who want to know about L.A. Care cannot call for information. She called customer services through another number and the two people that picked up the phone did not talk to her but hung up. She was able to call home and her daughter gave her a number and she was able to call L.A. Care.</p> <p>Dorothy Lowry asked about her rights for a phone call from the referral specialist if a referral is denied. The letter was not clear and she wants information about why it was denied. She wants to know if the proper reasons were given to the doctor to make a final decision. She cannot get anyone to return her call.</p> <p>Mr. Baackes said that she should have the courtesy of a return call.</p> <p>Ms. Haydel suggested she submit information as a grievance, there would be an investigation and a determination would be made.</p> <p>Ms. Lowry noted that she wants to make sure the information given for the decision was correct. Her doctor has provided referrals but she has been going in circles and not getting services.</p> <p>Mr. Baackes asked staff to please meet with her so a proper investigation can be made about her issue.</p> <p>Ms. Craft commented that regarding a compliance audit, DHCS has audited L.A. Care numerous times for the same thing. They basically give L.A. Care a free pass. They audit L.A.</p>	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>Care, identify the problem and L.A. Care supposedly corrects the problem, but it is the same problem the next year. The problems are in the audits every year. In the last few years that she has been here, L.A. Care has ample notification of the problems that have been going on. Her grievances have been largely ignored. She has found that L.A. Care does not follow its own protocols, but she has to jump through hoops and follow protocols that no one tells her about and she has to figure out on her own. There is general non-responsiveness from most of L.A. Care's employees in the Grievances & Appeals department and in upper management as well. There are some people who are doing a wonderful job, and she is not talking about them. These things have caused massive delays and denials in my health care services and she has not received medicines she should have received eight months later. She has to keep on going outside the L.A. Care situation to beg L.A. Care for extended periods of time, generally 1½ years before she gets something, and she doesn't get what was requested but something somewhat close or whatever. And the Compliance Department sent a used Amazon Prime box with her protected health care information, and it was open on one side and hanging by two threads on another. Gaping open half way at the bottom of the box and there was only tape across the top. Yet L.A. Care maintains that this never happened and it was sent out to me perfectly. Everything that I say and I bring up has been denied by L.A. Care. There are many things that are going wrong. So, for the Compliance department and for the audit and stuff, which I have been for three years telling L.A. Care about. So L.A. Care should not have even had the majority of those ticks that they gave you. She has one life and L.A. Care keeps getting chance after chance after chance to fix these things. Its not right. In her opinion there is massive abuse of the system where she is stonewalled or blocked for filing grievances. She had to wait 15 minutes before they would take the grievance, then some grievances she has never received responses from. There is no tracking on certain things, and then she is vilified by people at L.A. Care for the number of grievances she has to make. It is not just her, it is happening to many people.</p> <p>Mr. Baackes reported that each year L.A. Care has improved its results for annual audits by the California Department of Health Care Services and the Department of Managed Health Care. In 2015, there were 50 audit findings, and the following year there were 15 findings, and the next year there were six findings. We are awaiting the results of the most recent audit.</p> <p>Board Member Gonzalez-Delgado noted that there have been three different people today who expressed concerns about Grievances & Appeals department and she asked for information on how it will be addressed.</p> <p>Mr. Baackes indicated that a report on Grievances & Appeals will be made at a future meeting.</p>	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
ADJOURN TO CLOSED SESSION	<p>Ms. Haydel announced the following items to be discussed in closed session. A report is not expected in open session. The Board adjourned to closed session at 3:54 p.m.</p> <p>CONTRACT RATES Pursuant to Welfare and Institutions Code Section 14087.38(m)</p> <ul style="list-style-type: none"> • Plan Partner Rates • Provider Rates • DHCS Rates <p>REPORT INVOLVING TRADE SECRET Pursuant to Welfare and Institutions Code Section 14087.38(n) Discussion Concerning New Product Lines <i>Estimated date of public disclosure: December 2020</i></p> <p>CONFERENCE WITH LEGAL COUNSEL—ANTICIPATED LITIGATION Initiation of litigation pursuant to paragraph (4) of subdivision (d) of Section 54956.9 of Ralph M. Brown Act: one case</p>	
RECONVENE IN OPEN SESSION	The Board reconvened in open session at 5:00 p.m. There was no report from the closed session.	
ADJOURNMENT	The meeting was adjourned at 5:01 p.m.	

Respectfully submitted by:
Linda Merkens, *Senior Manager, Board Services*
Malou Balones, *Senior Board Specialist*

APPROVED BY:

Layla Delgado-Gonzalez, *Board Secretary*

Date Signed _____

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
ADJOURN TO CLOSED SESSION	<p>Ms. Haydel announced the following items to be discussed in closed session. A report is not expected in open session. The Board adjourned to closed session at 3:54 p.m.</p> <p>CONTRACT RATES Pursuant to Welfare and Institutions Code Section 14087.38(m)</p> <ul style="list-style-type: none"> • Plan Partner Rates • Provider Rates • DHCS Rates <p>REPORT INVOLVING TRADE SECRET Pursuant to Welfare and Institutions Code Section 14087.38(n) Discussion Concerning New Product Lines <i>Estimated date of public disclosure: December 2020</i></p> <p>CONFERENCE WITH LEGAL COUNSEL—ANTICIPATED LITIGATION Initiation of litigation pursuant to paragraph (4) of subdivision (d) of Section 54956.9 of Ralph M. Brown Act: one case</p>	
RECONVENE IN OPEN SESSION	<p>The Board reconvened in open session at 5:00 p.m. There was no report from the closed session.</p>	
ADJOURNMENT	<p>The meeting was adjourned at 5:01 p.m.</p>	

Respectfully submitted by:
Linda Merkens, *Senior Manager, Board Services*
Malou Balones, *Senior Board Specialist*

APPROVED BY:



Ayla Delgado-Gonzalez, *Board Secretary*

Date Signed _____

APPROVED