

BOARD OF GOVERNORS
Executive Committee

Meeting Minutes – March 23, 2020

1055 West 7th Street, Los Angeles, CA 90017



L.A. Care
 HEALTH PLAN

Members

Hector De La Torre, *Chairperson*
 Al Ballesteros, *Vice Chairperson*
 Robert H. Curry, *Treasurer*
 Layla Gonzalez, *Secretary*
 Stephanie Booth, MD
 Hilda Perez

**Absent*

Management/Staff

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

California Governor issued Executive Order No. N-29-20, which among other provisions amends the Ralph M. Brown Act and Executive Order No. 33-20, ordering all residents to stay in their homes, except for specific essential functions.

Members of the public can listen to this meeting via teleconference.

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
<p>CALL TO ORDER</p>	<p>Hector De La Torre, <i>Chairperson</i>, called the meeting to order for L.A. Care Executive Committee and L.A. Care’s Joint Powers Authority Executive Committee at 2:17 p.m. The meetings were held simultaneously.</p> <p>He welcomed everyone to the meeting and invited the members of the Committee, staff and guests to introduce themselves.</p> <p>Chair De La Torre summarized the process for this teleconference meeting as reflected on the meeting agenda.</p> <ul style="list-style-type: none"> • Public comments received by voicemail, email or text received by 2pm today were provided to the Executive Committee members. Public comments will be read for 3 minutes during the meeting. • Once the meeting has started, voicemails, emails and texts for public comment should be submitted before the item is called by the meeting Chair. If you wish to submit public comment on an item, you must submit it at any time prior to the time the Chair starts consideration of the item. The Chair will ask for public comment and will announce the item. The Chair will announce when public comment period is over. 	

APPROVED

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
APPROVE MEETING AGENDA	The Agenda for today's meeting was approved.	Approved unanimously by roll call. 4 AYES (Booth, De La Torre, Gonzalez, and Perez)
PUBLIC COMMENTS	<p>(Copy of text message received March 20, 2020)</p> <p>This is a documented message from Carolyn Navarro, mother of Synermed victim Vanessa Navarro, today 3-20-2020 I observed at your website that my 6 minutes of public comment at you Feb 6 2020 board meeting are not listed at your site but you have all of your other minutes listed from the past 1.5 year a least, seeing "Achievamed " pasted onto the old Synermed site and them being located at the same address with same employees gives me good cause to believe they are the same people who repackaged themselves and it's a slap in the face of the victims I keep locating ! I also saw them as co-defendants in a whistleblower lawsuit where the plaintiff says she was told to keep falsifying records AFTER the DMHC cease and decist. I intend to follow up on this regarding my Brown Act and commenting against a non profits rights. YOU are the bad people not me, I'm a mother who was and has been pushed too far and isn't taking your crap!</p> <p>https://en.m.wikipedia.org/wiki/Brown_Act</p> <p>(Photos of LA Care Board pg today 3-20-2020)</p> <p>If Achievamed is so kosher they should welcome my questions, I called them and asked if they service Blue Shields "promise plan" and the agent refused to tell me acted defensive, I asked promise plan if they use Achievamed and they would not tell me, that doesn't sound like companies with a fiduciary / ethical duty to Medi-Cal recipients.</p> <p>Chair De La Torre Hector noted that L.A. Care is not those entities.</p> <p>John Baackes, <i>Chief Executive Officer</i>, noted that L.A. Care never had a contract with Synermed. L.A. Care Plan Partner Care 1st (later renamed Blue Shield Promise Health Plan) had some L.A. Care members who had selected primary care physicians that used Synermed as a management services organization (MSO).</p>	
APPROVE MEETING MINUTES	The minutes of the February 24, 2020 Executive Committee and the Finance & Budget Committee meetings were approved, as submitted.	Approved unanimously by roll call. 4 AYES

APPROVED

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CHAIRPERSON'S REPORT	Chair De La Torre thanked all staff for their work under these extraordinary circumstances.	
CHIEF EXECUTIVE OFFICER REPORT	<p>John Baackes, <i>Chief Executive Officer</i>, reported</p> <ul style="list-style-type: none"> • L.A. Care's workforce is working remotely. Approximately 4.5% are working on site. • Metrics are being met for responding to member calls, claims payment timeliness, utilization management, and care management. • Mr. Baackes complimented Information Technology staff for their quick response and continuing support for remote staff connectivity. <p><i>(Member Curry joined the meeting.)</i></p> <ul style="list-style-type: none"> • L.A. Care is working with the Department of Health Care Services (DHCS), the Department of Managed Health Care (DMHC) and the Los Angeles County Department of Health Services (DHS); as well as with hospital providers, the Community Clinics Association of Los Angeles County, and the Federally Qualified Health Clinics to continue access to quality health care services for members. • Hospitals are creating bed capacity. The Department of Public Health is providing a daily update on bed availability. • We have yet to see a surge in hospital admittance as has been experienced in New York City and Seattle. • L.A. Care is working on sourcing personal protective equipment (PPE) and ventilator availability and has successfully procured masks today for health care workers. • L.A. Care is also helping to source childcare services for clinic workers. • St. Vincent Hospital in Los Angeles has been leased by the state of California to increase available hospital beds. Work to provide staff for the facility is under way. • L.A. Care is lobbying for sufficient financing for Medicaid beneficiaries and the safety net providers who serve them. Staff is working with national health plan trade associations to keep this topic on the legislative agenda and working on creative financing options. • L.A. Care is communicating with employees through daily updates from the CEO, CMO and communications department, and a personal email from the CEO. Staff is responding positively. Mr. Baackes has asked staff to develop a post-pandemic work from home policy. • L.A. Care is well positioned for the long run 	

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	<p>Member Booth asked about requirements for productivity of working remotely, and the cost savings for L.A. Care. Mr. Baackes responded that L.A. Care has been measuring productivity, claims volume is the same, incoming calls to customer service are being answered quickly. Mr. Baackes noted that he does not know what to expect, and there may be a drop off in productivity.</p> <p>Member Perez asked if there has been any relaxing in regulations because of the crisis. Mr. Baackes responded that L.A. Care is maintaining all standards. There has been a remarkable temporary regulatory change to allow payment of claims for telemedicine visits. This may result in a permanent change.</p> <p>Member Perez asked about the Nurse Advice Line (NAL). Richard Seidman, MD, MPH, <i>Chief Medical Officer</i>, noted that use of NAL has gone up significantly as members access care remotely.</p>	
<p>Government Affairs Update</p>	<p>Cherie Compartore, <i>Senior Director, Government Affairs</i>, reported that the legislature is recessed and all floor and committee sessions are on hold. There is a possibility the health committee will hear all bills in a short session at the end of April. The California Senate and Assembly leadership has advised members that priority bills are to be introduced, and other bills should be withheld.</p> <p>L.A. Care has reached out to congressional offices to support California Association of Health Plan's letters requesting that Medicaid not finalize any fiscal responsibility regulations and extend current federal waivers until the COVID 19 emergency is over, so there will be no interruption in financing for health care programs.</p> <p>Mr. Baackes added that L.A. Care is working with America's Health Insurance Plans (AHIP) to encourage legislators to maintain health coverages and support the safety net of providers. The new Director of Department of Health Care Services (DHCS), Brad Gilbert, and the Secretary of Health and Human Services (HHS), Mark Ghaly, are both physicians, and it is hoped this will ensure that both organizations are patient focused. Dr. Gilbert is an advocate of Local Initiatives and is the former CEO of Inland Empire Health Plan.</p>	

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<p>COVID-19 Update</p> <p>Board Delegation for COVID 19 Actions</p>	<p>Augustavia J. Haydel, Esq., <i>General Counsel</i>, summarized the motion requesting approval to delegate authority to the Board Chairperson and CEO to act on urgent matters to decide on actions relating to COVID19. Based on orders and guidelines from public health officials, L.A. Care may consider additional activities as appropriate to ensure the continued operation of the health plan and to protect the health and safety of members of the public, health plan, Board, advisory committees and staff. This will enable flexibility regarding Board and L.A. Care operations. The Board members will be notified of any changes made using this delegated authority.</p> <p>Member Booth suggested an amendment to include payment of stipends to Regional Community Advisory Committee members for cancelled meetings. Committee members agreed to include the amendment in the motion that will be presented to the Board on April 2.</p> <p>Staff will update the motion for presentation to the Board at the April 2 Board meeting.</p> <p><u>Motion EXE 100.0420</u></p> <p>Public health orders and guidelines have been issued, promoting social distancing and other actions to prevent the spread of the coronavirus (COVID-19). This motion will delegate to the Board Chairperson and Chief Executive Officer of L.A. Care the authority to act urgently and prudently to enhance or safeguard the health and safety of members of the public, Board, Advisory Committees, health plan and staff. Referring to Centers for Disease Control, public health recommendations and the Chief Medical Officer as indicated, potential actions could include:</p> <ol style="list-style-type: none"> 1) Postponing, updating locations or rescheduling meetings of the Board and its committees, including advisory committees; 2) Providing Board members with written reports from the Chief Executive Officer, Chief Medical Officer and Chief Financial Officer to update Board members in months when a Board meeting is postponed or cancelled; 3) Temporarily delegating final approval of financial statements to the Finance & Budget Committee; 4) Such other actions related to Board operations as may be prudent for the health and safety of all. 	<p>Approved unanimously by roll call. 6 AYES (Ballesteros, Booth, Curry, De La Torre, Gonzalez, and Perez)</p>

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<p>Revisions to Human Resources Policy HR-114 (Paid Time Off)</p>	<p>Terry Brown, <i>Chief Human Resources Officer</i>, summarized proposed revisions to Human Resources Policy HR-114 (Paid Time Off).</p> <p>Member Booth asked if L.A. Care has resources available to continue the emergency PTO for a long period of time. Mr. Brown noted that the key element is that the employee is not able to telecommute, and responded that L.A. Care would be able to cover all employees. Member Booth suggested editing section 4.4.6.1 on page 12 of the policy, to add “or employee is not able to telecommute.”</p> <p>Member Gonzalez commended Mr. Brown for the revision. It is a very difficult time for those who need childcare, and co-workers are not able donate time off to them.</p> <p>Member Perez asked about a potential staff shortage. Mr. Baackes responded that a shortage will be supplemented using temporary staff. He added that L.A. Care should prepare in case this goes on for months, because there may be some degradation in service levels. He is hopeful that L.A. Care is minimizing potential exposure to the virus by enabling staff to work remotely. If there are significant drop in staffing for skilled positions, L.A. Care would have to lower services until staffing is appropriately restored.</p> <p>Marie Montgomery, <i>Chief Financial Officer</i>, responded regarding the financial aspects of Member Booth’s question above. The change in policy will extend PTO, and staff would have earned that salary. If there is backfill in staffing, there would be an additional expense.</p> <p>Mr. Baackes noted that a larger issue is a potential surge in medical care. Administrative cost is 5.5% of L.A. Care’s entire budget. Medical care expenses are the much larger portion of budgeted expenses. Chair De La Torre suggested that the new PTO provision be carefully monitored and that changes are reported to the Board.</p> <p>Ms. Haydel asked that the motion be amended amendment to add, “as allowed under applicable law”. Member Booth accepted the amendment.</p> <p><i>(Member Ballesteros joined the meeting.)</i></p> <p>A final revised policy, reflecting the above suggested amendments will be presented to the Board for approval at its April 2 meeting.</p> <p><u>Motion EXE A.0320</u></p> <p>1) To approve then revisions to Human Resources Policy & Procedure HR-114 (Paid Time Off) as presented; and</p>	

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	<p>2) in approving the provisions relating to emergency paid time off related to COVID-19, the Committee makes the following findings:</p> <ul style="list-style-type: none"> a) H.R. 6201 would, if enacted, require L.A. Care to provide emergency paid sick leave benefits to employees who are unable to work for substantially similar reasons as those provided for under the emergency paid time off provisions of HR-114; b) granting emergency paid time off during COVID-19 emergency serves a public purpose by encouraging sick employees to remain home, thereby reducing other employees' potential exposure to, and the risk of further spread of, the novel coronavirus; c) doing so is necessary to mitigate the potentially severe financial impact on employees who would otherwise suffer a loss of income if they are unable to work as a result of COVID-19 impacts on them or their family members; and d) in actively participating in activities to mitigate spread of COVID-19, as well as directives by federal, state and local authorities, the public purpose of mitigating the potential spread within community and the impact on the healthcare system is served. 	<p>Approved unanimously by roll call. 6 AYES (Ballesteros, Booth, Curry, De La Torre, Gonzalez, and Perez)</p>												
<p>Blue Shield partnership restricted funds authorization</p>	<p>In February 2019, Blue Shield’s Board of Directors awarded L.A. Care a 5-year grant totaling \$73 million to support the joint operations of 14 community resource centers. The period of performance is from approximately August 1, 2019 to September 30, 2024 (Motion BOG 102.0719 had an end date of July 31, 2024). The below motion has corrected the end date to September 30, 2024. The grant amounts will be awarded annually by Blue Shield based on an annual budget developed jointly between L.A. Care and Blue Shield.</p> <p>In Motion BOG 102.0719, L.A. Care’s Board of Governors authorized the CEO to execute the grant agreement, which included L.A. Care’s expenditures as provided below. L.A. Care staff requests approval to restrict these funds for five years as the grant from Blue Shield is received each year, in these amounts:</p> <table border="1" data-bbox="495 1289 1602 1427"> <thead> <tr> <th>Date</th> <th>Blue Shield Funding</th> <th>Requested L.A. Care Restricted Funding</th> </tr> </thead> <tbody> <tr> <td>August 1, 2019</td> <td>\$5.25 million</td> <td>\$16.3 million</td> </tr> <tr> <td>October 1, 2020</td> <td>\$12.8 million</td> <td>\$18 million</td> </tr> <tr> <td>October 1, 2021</td> <td>\$20.2 million</td> <td>\$14 million</td> </tr> </tbody> </table>	Date	Blue Shield Funding	Requested L.A. Care Restricted Funding	August 1, 2019	\$5.25 million	\$16.3 million	October 1, 2020	\$12.8 million	\$18 million	October 1, 2021	\$20.2 million	\$14 million	
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	<p>October 1, 2022 \$17.15 million \$14 million October 1, 2023 \$17.4 million \$14 million</p> <p><u>Motion EXE B.0320</u> To authorize annual restricted funds for the L.A. Care partnership with Blue Shield to operate community resource centers from August 2019 to September 30, 2024. The L.A. Care portion will be deemed restricted only upon annual receipt of the agreed grant funding from Blue Shield.</p>	<p>Approved unanimously by roll call. 6 AYES (Ballesteros, Booth, Curry, De La Torre, Gonzalez, and Perez)</p>
<p>Chief Financial Officer's Report</p> <ul style="list-style-type: none"> • Financial Report • 4+8 Forecast • Monthly Investments Transactions Report 	<p>Ms. Montgomery provided an update on the financial performance for February 2020. <i>(A copy of her presentation may be requested by contacting Board Services.)</i></p> <ul style="list-style-type: none"> • Membership in February was 2,124,222; 63,106 members unfavorable to the budget. YTD member months is unfavorable 147,342 to the budget. The budget assumed flat growth for Plan Partners and MCLA, except for the expansion of coverage to undocumented young adults. • L.A. Care Covered (LACC) enrollment increased in February and is slightly higher than budget expectations. • Medi-Cal enrollment may increase later in the year if an economic recession ensues (not yet included in forecast) due to the pandemic. • Net surplus in February was \$15.6 million and \$55.6 million YTD, \$5.5 million unfavorable to the budget. • Retroactive rate increases received in December 2019 have contributed to positive revenue despite unfavorable membership. • Fee-for-service claims are unfavorable to the budget by \$74 million on a year with nearly \$56 million coming from Skilled Nursing Facility (SNF). • Budget did not include changes in timing for SNF retro fee schedule increases. Coordinated Care Initiative (CCI) rate increases in revenue reflect these higher expenses. Administrative expenses are favorable to budget by \$3.3 million. • Non-operating revenue is favorable by \$6 million due to unrealized gains. • Expect market volatility for the remainder of the fiscal year due to the pandemic. • Overall Medical Cost Ratio (MCR) is 93.3% versus a budget of 92.5%. • Tangible Net Equity is 631% with cash on hand to cover operating expenses for the next 50 days. 	

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	<p>Member Booth asked about the Tangible Net Equity (TNE). Ms. Montgomery responded that she has met with investment advisors. L.A. Care has high quality short duration investments which may take longer to trade. L.A. Care is monitoring its working capital and the financial position is in good shape overall.</p> <p>Ms. Montgomery reviewed the 4+8 forecast update:</p> <ul style="list-style-type: none"> • Year-end membership is forecasted at 2,159,682, 46,140 members unfavorable to the budget, and 474,325 member months unfavorable for the year versus the budget. • The forecast assumes a 3.5% decrease in membership by year-end for Plan Partners and 2.5% decrease for MCLA, based on trend over the previous six months. • These decreases are partially offset by an increase in enrollment from MCE undocumented young adults and increase to the auto-assignment rate. • Cal-MediConnect (CMC) lowered their forecast vs. the budget by 8.5%. • LACC assumes an average membership of 80,000 members for the remainder of the year. • Forecast assumes net surplus of \$72.2 million, \$81 million unfavorable to the budget. This is driven by operating margin and updated estimates for Skilled Nursing Facility expenses. • Net impact to operating margin includes \$60 million unfavorable impact due to higher institutional rates and membership net of favorable CCI revenue, with additional \$10 million unfavorable impact due to volume of lower member months and \$8 million adjustment for the deceased member audit. • Operating expenses include increased estimate of vendor fees for overpayment recoveries. • Non-operating expense is lower in the forecast due to timing of grants and the updated investment expectations. <p>Risks and Opportunities</p> <p>Member Curry suggested it will be helpful to framing the potential future financial position with alternative worst, probable and best case scenarios. Mr. Baackes noted that he, Ms. Montgomery, and Richard Seidman, MD, <i>Chief Medical Officer</i>, will be meeting with CAPH to discuss this topic. L.A. Care is lobbying at the federal level to ensure</p>	

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	<p>sufficient funding for Medicaid. Staff is also working through the national trade association, AHIP, to ensure Medicaid funding is sufficient.</p> <p>Mr. Baackes has also offered to work with community clinics and all safety net stakeholders, and he has contacted Health Net and L.A. Care’s Plan Partners. Mr. Baackes will also schedule a call with Barbara Ferrer, PhD, MPH, MEd, Los Angeles County Public Health Director, to establish regular daily updates to align resources among safety net stakeholders. He is encouraged that California has two doctors as head of DHCS and Secretary of HHS. Mr. Baackes offered to contact Member Curry about including coordination with hospitals associated with Private Essential Access Community Hospitals (PEACH).</p> <p>Member Curry expressed concern about the potential effects of COVID 19 on the health care system. Mr. Baackes noted that cooperation among health plans, payors and providers will be needed to maintain sufficient services.</p> <p>Member Ballesteros also referred Mr. Baackes to Community Clinics Association of Los Angeles County for coordination.</p> <p>Mr. Baackes mentioned that adding telephone visits to health care benefits is a significant factor in enabling members to access care while staying home. Member Ballesteros commented that it is a great improvement.</p> <p><u>Motion EXE 101.0420</u> To accept the Financial Report as submitted for February 2020.</p> <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 may be requested by contacting Board Services).</i> As of February 29, 2020, L.A. Care’s total investment market value was \$2 billion:</p> <ul style="list-style-type: none"> • \$1.8 billion managed by Payden & Rygel and New England Asset Management • \$72 million in Local Agency Investment Fund • \$106 million in Los Angeles County Pooled Investment Fund 	<p>Approved unanimously by roll call. 6 AYES</p>
<p>California Long Term Care Education Center (CLTCEC) Contract Extension (EXE 102)</p>	<p>Mr. Baackes presented the motion requesting approval to renew the contract with California Long Term Care Education Center (CLTCEC) from May 15, 2020 through May 14, 2023, for \$8,711,339. CLTCEC provides education and training to In-Home Supportive Services (IHSS) and Personal Assistance Services Council (PASC) workers. It</p>	

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	<p>is a remarkable program. The original contract included training for about 3,000 caregivers. The current training was suspended due to COVID 19.</p> <p>Indicators show a reduced utilization of emergency room services. Mr. Baackes reminded Committee members about one of the program participants who stated that he is better both being a son and caregiver after taking the program.</p> <p>Member Booth complimented L.A. Care for the success of the program.</p> <p>Mr. Baackes noted an unintended result of the program is the development of cohesion among the participants, who initiated a phone tree to reach out after the training is over. L.A. Care continues to look for ways to support this group dynamic.</p> <p>Member Gonzalez noted that the CLTCEC training program is excellent. She asked if the curriculum could be expanded to better equip the trainees. The current training is great, and could include other important aspects like information on using equipment safely and paramedical training. Mr. Baackes will ask CLTCEC if timeframe of the program could be increased to include more content; and it may also be worthwhile to ask them conduct a presentation to the Board at a future meeting.</p> <p>Member Booth asked if the people who bring the lift equipment into the home are responsible for training the user. Dr. Seidman noted that unfortunately caregivers are not always trained properly, and suggested training for users on how to reach out to get additional training. Mr. Baackes added that one way to address may be to set up a resource guide so users can get more help.</p> <p>Member Curry stated that this is an important program for L.A. Care to support.</p> <p><u>Motion EXE 102.0420</u> To authorize a contract renewal in the amount of \$8,711,339 with California Long Term Care Education Center (CLTCEC) to provide education and training for In-Home Supportive Services (IHSS) providers for dual-eligible beneficiaries for the period of May 15, 2020 through May 14, 2023.</p> <p>Mr. Baackes added that when the trainees complete the 10-week program, there is a graduation, which is important to the participants. L.A. Care executives have attended the graduation ceremonies. Mr. Baackes thanked the Board for their support of this program.</p>	<p>Approved unanimously by roll call. 6 AYES</p>

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Approve the Consent Agenda for April 2, 2020 Board of Governors meeting	<ul style="list-style-type: none"> • Approve February 6 Board of Governors meeting minutes • Board Delegation for COVID 19 Actions • California Long Term Care Education Center (CLTCEC) Contract Extension • Regional Community Advisory Committee Members • Children’s Health Consultant Advisory Committee Members 	Approved unanimously by roll call. 6 AYES
PUBLIC COMMENTS	There were no public comments.	
ADJOURN TO CLOSED SESSION	<p>Augustavia J. Haydel, Esq., <i>General Counsel</i>, announced the items to be discussed in closed session. She announced there is no report anticipated from the closed session. The meeting adjourned to closed session at 2:40 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 Service, Program, Business Plan Estimated date of public disclosure: <i>March 2022</i></p> <p>PUBLIC EMPLOYEE PERFORMANCE EVALUATION Section 54957 of the Ralph M. Brown Act Title: Chief Executive Officer</p> <p>CONFERENCE WITH LABOR NEGOTIATOR Section 54957.6 of the Ralph M. Brown Act Agency Negotiator: Hector De La Torre Unrepresented Employee: Chief Executive Officer</p>	
RECONVENE IN OPEN SESSION	The meeting reconvened in open session at 3:39 pm. No reportable actions were taken during the closed session.	
CEO Compensation	This agenda item was not discussed.	

APPROVED

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ADJOURNMENT	The meeting adjourned at 3:39 pm.	

Respectfully submitted by:

Linda Merkens, *Senior Manager, Board Services*
Malou Balones, *Board Specialist III, Board Services*
Victor Rodriguez, *Board Specialist II, Board Services*

APPROVED BY:



Hector De La Torre, *Chair*
Date: 4-27-20

APPROVED