

BOARD OF GOVERNORS
Executive Committee
Meeting Minutes – October 25, 2021
 1055 West 7th Street, Los Angeles, CA 90017



Members

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

Management/Staff

John Baackes, *Chief Executive Officer*
 Terry Brown, *Chief Human Resources Officer*
 Linda Greenfeld, *Chief Product Officer*
 Augustavia J. Haydel, Esq., *General Counsel*
 Tom MacDougall, *Chief Information & Technology Officer*
 Marie Montgomery, *Chief Financial Officer*
 Francisco Oaxaca, *Chief of Communications & Community Relations*
 Noah Paley, *Chief of Staff*
 Acacia Reed, *Chief Operating Officer*
 Richard Seidman, MD, MPH, *Chief Medical Officer*

State and local officials continue to impose or recommend measures to promote social distancing to reduce transmission of the COVID 19 virus. It is prudent to use caution in protecting the health of the public, L.A. Care’s employees and its members where adequate virtual means exist to permit the meeting to occur by teleconference/videoconference with the public being afforded the ability to comment in real time. The Board of Governors and all legislative bodies of the L.A. Care Health Plan, and the Board of Directors and all legislative bodies of the Joint Powers Authority will continue to meet virtually and the Boards will review that decision on an on-going basis as provided in the Brown Act. Members of the public had the opportunity to listen to the meeting via teleconference, and share their comments via voicemail, email, or text.

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
CALL TO ORDER	<p>Hector De La Torre, <i>Chairperson</i>, called to order the L.A. Care Executive Committee and the L.A. Care Joint Powers Authority Executive Committee meetings at 2:05 p.m. The meetings were held simultaneously. He welcomed everyone to the meetings.</p> <ul style="list-style-type: none"> • For those who provided public comment for this meeting by voice message or in writing, we are really glad that you provided input today. The Committee will hear your comments and we also have to finish the business on our Agenda today. • If you have access to the internet, the materials for today’s meeting are available at the lacare.org website. If you need information about how to locate the meeting materials, please let us know. • Information for public comment is on the Agenda available on the web site. Staff will read the comment from each person for up to three minutes. 	

APPROVED

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<ul style="list-style-type: none"> The Chairperson will invite public comment before the Committee starts to discuss the item. If the comment is not on a specific agenda item, it will be read at the general Public Comment item 2 on today's agenda. 	
APPROVE MEETING AGENDA	The Agenda for today's meeting was approved.	Approved unanimously by roll call. 5 AYES (Ballesteros, Booth, De La Torre, Gonzalez and Perez).
PUBLIC COMMENTS	There were no public comments.	
APPROVE MEETING MINUTES	The minutes of the September 27, 2021 meeting were approved as submitted.	Approved unanimously by roll call. 5 AYES
CHAIRPERSON'S REPORT	<p>Chairperson De La Torre reported that the Officer Election will be held at the November Board Meeting. Nominations received clearly indicate four individuals, Chair: Hector De La Torre, Vice Chair: Al Ballesteros, Treasurer: Ilan Shapiro, MD and Secretary: Stephanie Booth, MD. Additional nominations can be made at that meeting.</p> <p>Mr. Robert Curry has submitted a letter of resignation. Mr. Curry was nominated by Private Essential Access Community Hospitals (PEACH) in October 2017, and was appointed by the Los Angeles County Board of Supervisors as a member the L.A. Care Board of Governors in January 2018 to represent the private disproportionate share hospitals serving Medi-Cal and other government program beneficiaries in Los Angeles County. His first Board meeting was in February 2018 and later that year he was elected Treasurer of this Board. He was re-elected Treasurer in 2019 and 2020. L.A. Care experienced tremendous growth and the effects of the COVID pandemic during his tenure. Mr. Curry oversaw L.A. Care's finances through these changes, working with L.A. Care's staff. Chairperson De La Torre thanked Mr. Curry for his service over the years to the Medi-Cal community. He has been an effective Board Member and colleague and he wished him well in his retirement.</p> <p>Board members asked that Mr. Curry be invited to a future meeting so they can express their appreciation and wish him well. <i>(The CEO Report was presented later in the meeting.)</i></p>	

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<p>Government Affairs Update</p>	<p>Cherie Compartore, <i>Senior Director, Government Affairs</i>, reported:</p> <ul style="list-style-type: none"> • The California legislative year has ended. The Governor had until October 10 to sign bills into law. There are 13 bills with direct impact on L.A. Care’s operations. • At the upcoming Board Meeting Ms. Compartore will review pertinent legislation. • A written summary will be included in the board meeting materials. • California Department of Health Care Services (DHCS) announced last week that implementation of the new Doula benefit for Medi-Cal is being delayed from January 1, 2022 to July 1, 2022. From the doula stakeholder workgroup DHCS has indicated that additional effort must be made to define the program and develop rates in more detail. L.A. Care supports this new benefit for Medi-Cal beneficiaries. • Also being delayed to July are provisions to allow Community Health Workers to provide some benefits to Medi-Cal enrollees. The delays are due to the workload state departments are under as they work on the implementation of the new California Advancing and Innovating Medi-Cal (CalAIM) program. • Work is beginning on the new State Budget Proposal which is normally released around January 10 each year. A budget surplus is expected, and it is anticipated that interesting new programs and legislation will be proposed in addition to the two-year bills. • Ms. Compartore will have a more complete update on activities at the federal level for the Board Meeting next week. She noted that Democrats are still negotiating on final components of two pieces of legislation included in the Build Back Better bill package which included \$3.5 trillion in cost, with investments in home health care, paid family leave, climate change and other social services, but faced serious opposition from several congressional representatives. Some Medicare benefits may be eliminated, as well as guaranteed family leave for all U.S. workers. The bill must have a yes vote from all Democrats, so the effort to negotiate a suitable final bill is critical. The other component of Build Back Better is a \$1.2 trillion bill to support infrastructure, which has already passed in the Senate. Members of the Progressive Congressional Caucus have indicated they will vote against this bill in the House of Representatives if it comes up before a bill is passed on the budget reconciliation social bill. <p>Chairperson De La Torre noted that Mr. Baackes has been delayed in arriving at today’s meeting because he is advocating for L.A. Care and its members right now in a meeting with a group of state legislators.</p>	

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Ratify execution of Amendment A33 to Contract 04-36069, and Amendment A15 to Contract 03-75799, between L.A. Care Health Plan and the California Department of Health Care Services	<p>Augustavia J. Haydel, Esq., <i>General Counsel</i>, reported that L.A. Care received Amendment A33 and Amendment A15 from DHCS on October 1, 2021 with a request that it be reviewed, signed, and returned to DHCS by October 15, 2021. Amendment A33 modifies the contract term of the primary Medi-Cal Agreement and Amendment A15 modifies the contract term of the Hyde Agreement. Effective dates for both contracts are extended to December 31, 2023.</p> <p><u>Motion EXE 100.1121</u> To ratify execution of Amendment A33 to Contract 04-36069, and to ratify execution of Amendment A15 to Contract 03-75799, between L.A. Care Health Plan and the California Department of Health Care Services, by L.A. Care Chief Executive Officer, John Baackes.</p>	<p>Approved unanimously by roll call. 5 AYES By consensus, the committee agreed that this motion will be added to the consent agenda at the November 4, 2021 Board meeting.</p>
Nomination for Charitable Organizations for donated Board Stipends	<p>Ms. Haydel informed Committee Members that Board Members will have the opportunity to nominate non-profit organizations to receive donated stipends. Staff will randomly select two organizations and a motion will be presented at the December 2, 2021 Board meeting. Board members were invited to send the name of organizations they would like to nominate to Board Services staff.</p>	
Community Health Investment Fund (CHIF) FY 2021-22 Priorities	<p>Roland Palencia, <i>Director, Community Benefits</i>, indicated that each year approval of allocation and priorities for the Community Health Investment Fund (CHIF) is presented for Board consideration. On September 2, 2021, as part of the general organizational budget, the L.A. Care Board of Governors approved a CHIF funding allocation of \$10 million for FY 2021-22.</p> <p>All CHIF grants are well-vetted before they reach the Board of Governors. This includes Community Benefits staff, a review committee composed of internal staff and community experts, Strategic Planning Senior Director, and CEO authorization. Grant requests over \$250,000 will be brought to the Board for final approval. Upon approval, a grant agreement is executed with the grantee, outlining responsibilities and accountability to perform according to agreed objectives. Grantees will submit progress reports bi-annually and progress will be reported to the Board annually. Additionally, staff will also report monthly to the Board on approved grants and sponsorships.</p> <p>Member Booth suggested an amendment to the motion, to add the words “health/social determinants of health related” in front of the word, “organizations” in section 1.d.</p> <p><i>Member Ballesteros may have financial interests in Plans, Plan Participating Providers or other programs and as such refrained from the discussion of those issues identified below. In order to expedite</i></p>	

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	<p><i>the process, his vote on this motion reflects a vote concerning the entire motion excluding Section 1a, for which the member is abstaining.</i></p> <p><u>Motion EXE 101.1121</u></p> <ol style="list-style-type: none"> 1. To approve the recommended approach for the Community Health Investment Fund (CHIF) FY 2021-22 allocation of up to \$10 million in the following priority categories: <ol style="list-style-type: none"> a) support the health care safety net to improve infrastructure and address racial inequities, recommended at \$4.1 million, b) address social determinants of health that result in inequities, recommended at \$2.4 million, c) close the health disparities gap, recommended at \$1.8 million, and d) empower and invest in <i>health/social determinants of health related</i> organizations that address systemic racism, recommended at \$1.7 million. 2. Delegated authority to the CEO to implement the CHIF program and approve up to \$250,000 per grant through September 30, 2022. This authority will allow L.A. Care to make grants for larger projects as well as respond to COVID-19 ongoing needs and its aftermath. Also, allow for CEO to adjust CHIF priority category amounts noted above to align with changing community needs and requests. All other policies and approvals related to grant making investments will remain in place. 	<p>Approved unanimously as amended and by roll call, with consideration of potential conflict as noted. 5 AYES</p>
<p>Continue funding of Elevating the Safety Net Residency Support Program</p>	<p>Cynthia Carmona, <i>Senior Director, Safety Net Initiatives</i>, presented the motion to support the Residency Support Program. In 2019 and 2020, the Executive Board approved a combined \$9,652,928 (two funding cycles) under the ESN initiative RSP to support expansion of graduate medical education training for 38 residents and 4.0 FTE faculty across five teaching institutions: AltaMed Health Services Corporation (AltaMed), Children’s Hospital of Los Angeles, Charles R. Drew University of Medicine and Science (CDU), UCLA Foundation (UCLA), and White Memorial Medical Center Charitable Foundation (White Memorial).</p> <p>Residency Support Program (RSP) In 2021, L.A. Care invited AltaMed, CDU, UCLA, and White Memorial to apply for a third cycle of funding. After thoroughly reviewing the applications, the committee recommends an expenditure of up to \$3.23 million to fund salaries and benefits for 25 residents across the four institutions over the course of three years. Grant awards will</p>	

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	<p>support residents starting in academic year 2022-23 through academic year 2024-25. Proposed awards are as follows:</p> <table border="1" data-bbox="495 272 1570 688"> <thead> <tr> <th data-bbox="495 272 743 321"><i>Institution</i></th> <th data-bbox="751 272 1356 321"><i>Expansion</i></th> <th data-bbox="1365 272 1570 321"><i>Award</i></th> </tr> </thead> <tbody> <tr> <td data-bbox="495 321 743 378"><i>AltaMed</i></td> <td data-bbox="751 321 1356 378"><i>Family Medicine: 18 Residents for 3 years</i></td> <td data-bbox="1365 321 1570 378">\$1,127,380</td> </tr> <tr> <td data-bbox="495 378 743 467"><i>CDU</i></td> <td data-bbox="751 378 1356 467"><i>Internal Medicine: 1 Chief Resident for 1 year and 2 Internal Medicine Residents for 2 years</i></td> <td data-bbox="1365 378 1570 467">\$640,610</td> </tr> <tr> <td data-bbox="495 467 743 524"><i>UCLA</i></td> <td data-bbox="751 467 1356 524"><i>Pediatric Medicine: 2 Residents for 3 years</i></td> <td data-bbox="1365 467 1570 524">\$558,231</td> </tr> <tr> <td data-bbox="495 524 743 630" rowspan="2"><i>White Memorial</i></td> <td data-bbox="751 524 1356 573"><i>Family Medicine: 1 Resident for 3 years</i></td> <td data-bbox="1365 524 1570 630" rowspan="2">\$897,600</td> </tr> <tr> <td data-bbox="751 573 1356 630"><i>Internal Medicine: 1 Resident for 3 years</i></td> </tr> <tr> <td data-bbox="495 630 743 688"><i>TOTAL</i></td> <td data-bbox="751 630 1356 688"><i>25 Residents</i></td> <td data-bbox="1365 630 1570 688"><i>\$3,223,821</i></td> </tr> </tbody> </table> <p>Board Member Gonzalez asked if the students in the Residency positions that L.A. Care is funding will make a commitment to remain in Los Angeles County serving the safety net. Ms. Carmona responded that L.A. Care has discussed this with the institutions that are selected, which have excellent track records of students remaining in service to the safety net in Los Angeles County.</p> <p>Dr. Seidman added that medical residency is a stage in training following undergraduate medical education. The people in residencies have graduated from medical schools. L.A. Care has focused funding on primary care specialties of pediatrics, internal medicine, family medicine and psychiatry. L.A. Care has been very selective in picking the institutions and the specific training programs to help fund or expand, because of the institutions' track records of producing residents that upon graduation, are very likely to stay in Los Angeles County serving in the safety net of providers.</p> <p>Board Member Booth asked if the program receives funding in one lump sum or divided over three years. Ms. Carmona responded that funds are sent as a lump sum. Board Member Booth noted that it is difficult for the Board to understand the value of this program because there is no data to indicate if there is an increase in the number of providers accessible to L.A. Care members. She suggested that measurable goals be stated for this program for measuring access during the funded residency in order to evaluate the program. Statistics to track could be the number of patients that a resident</p>	<i>Institution</i>	<i>Expansion</i>	<i>Award</i>	<i>AltaMed</i>	<i>Family Medicine: 18 Residents for 3 years</i>	\$1,127,380	<i>CDU</i>	<i>Internal Medicine: 1 Chief Resident for 1 year and 2 Internal Medicine Residents for 2 years</i>	\$640,610	<i>UCLA</i>	<i>Pediatric Medicine: 2 Residents for 3 years</i>	\$558,231	<i>White Memorial</i>	<i>Family Medicine: 1 Resident for 3 years</i>	\$897,600	<i>Internal Medicine: 1 Resident for 3 years</i>	<i>TOTAL</i>	<i>25 Residents</i>	<i>\$3,223,821</i>	
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	<p>sees during the residency and to follow up with how many of the residents remain in practice in Los Angeles County after completing the program. Board Member Booth would like to see results that can be attributed to L.A. Care's funding.</p> <p>Chairperson De La Torre noted that it is very difficult to attribute a direct effect of funding other than providing the training in the right places and the right settings in the hope the residents will remain. He noted that the statewide program and the Bureau of Indian Affairs programs operate on the same concept that placing residents in the right places leads to increased access to care. It is difficult to track the cause and effect.</p> <p>Member Booth noted that it is possible to state the increased access while the resident is in the program. Chairperson De La Torre noted that he has seen these in so many areas, where training is provided and there can be no obligation to make the trainee stay in the area. Measuring access during the residency could be done and he would support that effort.</p> <p><u>Motion EXE 102.1121</u> Approve and authorize an expenditure of up to \$3.23 million to continue funding awards under the Residency Support Program (RSP).</p> <p><i>(The CEO Report was presented next.)</i></p>	<p>Approved unanimously by roll call with consideration of potential conflict as noted. 5 AYES</p>
<p>CHIEF EXECUTIVE OFFICER REPORT</p>	<p>John Baackes, <i>Chief Executive Officer</i>, reported:</p> <ul style="list-style-type: none"> • He apologized for arriving late to the meeting. He attended a meeting with members of the state assembly that are touring the state to learn about homelessness and affordable housing. He was invited to represent Medi-Cal managed care plans to provide information about homelessness from the health plan perspective. • The biggest issue related to COVID-19 is to get more L.A. Care health plan members to get a vaccine. There is a significant gap in vaccination rates among the general population and the rate of Medi-Cal beneficiaries. • He reported at a previous meeting that California has made additional funds available to health plans to encourage vaccination. There are conditions on accessing those funds and L.A. Care is working hard to maneuver within those rules. More information on the program will be provided at the December Board meeting. L.A. Care is collaborating with Health Net and with Plan Partners to design an effective program. • Progress is being made with planning for implementation of the California Advancing and Innovating Medi-Cal (CalAIM) program. Some minor parts, such as 	

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	<p>the doula program, have been postponed. CalAIM has so many details, and there are areas that have not been addressed in sufficient clarity for health plans to move forward. The lack of detail is being recognized by state officials and health plans are comfortable with some aspects being delayed, in order that the major parts of CalAIM can be successfully launched by January 2022.</p> <ul style="list-style-type: none"> • The major segments of Enhanced Care Management (ECM) and In Lieu of Services, which is now known as Community Supports, are still on the January 1 launch. The current pilot programs of Health Homes and Whole Person Care, which L.A. Care partnered with L.A. County to offer, will end December 31, 2021. It will be a challenge to transition the participants in those two programs to the new permanent programs. There may be about 10,000 L.A. Care members for which L.A. Care must find new providers under ECM. L.A. Care staff is working diligently on the details of the transition. • California is moving forward on carving pharmacy benefits out of Medi-Cal. L.A. Care co-authored, with Inland Empire Health plan, an op-ed about this topic, which is included in the meeting materials. The joint op-ed suggested that modifications could be made in the carve out to help Medi-Cal plans support their members. A big concern is that the plans will no longer have contact with members about their prescription drug benefits, a key part of their health care. • L.A. Care is continuing to open new Community Resource Centers and will have official grand openings in the future. He highlighted the reopening of the Inglewood Community Resource Center in a new location, because the landlord at the old location would not negotiate with L.A. Care, the CRC in Inglewood had to be closed since April, 2021. An official opening ceremony will be held after January 2022. • He noted that the final progress report on Vision 2021 is included in the meeting packet. <p>Board Member Booth asked about the new Vision statement. Wendy Schiffer, <i>Senior Director, Strategic Planning, Strategy, Regulatory and External Affairs</i>, reported that Vision 2024 began on October 1, 2021. The first report on Vision 2024 will be provided in January, and she offered to provide the Vision 2024 plan in the materials for the next Board Meeting.</p> <p>Board Member Perez noted that she did not attend the opening of the Community Resource Center in Wilmington. Advisory committee members had complained that there was a lack of communication. She thanked Board Members for their support of</p>	

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	<p>the Community Resource Centers. She noted that there is an effort to connect with the community members at the Resource Centers. She recognized the work that goes into the opening events. She complimented the work that went into the successful flu shot clinic held in Pacoima. Even with limitations due to the COVID-19 pandemic, these events do help the community. She thanked Richard Seidman, MD, MPH, <i>Chief Medical Officer</i>, for the information he provides to members. She thanked Olivia from Communications for the pictures she takes at the events. She enjoys attending these events and she invites Board Members to attend the events. It is an effort to help members in the community get healthier. She appreciates all that is done. She thanked Board Member Gonzalez. She noted that Board Member Gonzalez remembers to acknowledge the lives lost due to the pandemic whenever she reports to the members.</p> <p><i>(The Approved Revisions to Human Resources Policies item was presented next.)</i></p>	
<p>Approved Revisions to Human Resources Policies</p> <ul style="list-style-type: none"> • HR-602 Annual Organizational Incentive • HR-609 Wage and Salary 	<p>Terry Brown, <i>Chief Human Resources Officer</i>, presented motions to approve revisions to two Human Resources policies.</p> <p>L.A. Care has established the Incentive Program that provides monetary incentives to eligible employees based on the achievement of approved goals set by the Chief Executive Officer or his/her respective designees. The award of an annual incentive payment is not automatic and is at the sole discretion of the Board of Governors. L.A. Care reserves the right to modify or terminate the Incentive Program.</p> <p>Staff is proposing additional revisions to HR-602 Annual Incentive Program, as noted in the attached document.</p> <p><u>Motion EXE A.1021</u> To approve the Human Resources Policy & Procedure HR-602 Annual Incentive Program, as presented.</p> <p>L.A. Care’s compensation philosophy is designed to reward employees for higher levels of performance and to pay all employees fairly and equitably, in comparison with both the external market and internal positions and classifications, and which reflects the duties and responsibilities of each employee’s job. The organization is committed to providing a work environment that supports all staff with dignity and respect and rewards individuals according to their accomplishments and work outcomes.</p>	

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	<p>Staff is proposing additional revisions to HR-609 Wage and Salary, as noted in the attached document:</p> <p><u>Motion EXE B.1021</u> To approve the Human Resources Policy & Procedure HR-609 (Wage and Salary), as presented.</p>	<p>Motions EXE A and EXE B were simultaneously and unanimously approved by roll call. 5 AYES</p>
<p>Approve Consent Agenda for November 4, 2021 Board of Governors Meeting.</p>	<ul style="list-style-type: none"> • September 2, 2021 Board of Governors Meeting & Retreat Minutes • September 27, 2021 Board of Governors Special Meeting Minutes • Ratify execution of Amendment A33 to Contract 04-36069, and Amendment A15 to Contract 03-75799, between L.A. Care Health Plan and the California Department of Health Care Services, by L.A. Care Chief Executive Officer, John Baackes • Accounting & Financial Services Revised Policies: <ul style="list-style-type: none"> ➤ Policy AFS 008 (Annual Investment Review) ➤ Policy AFS-027 (Travel Expenses) • Ntooitve Contract • Change Healthcare Resources Contract Amendment • Claris Health Contract Amendment Scope of Works 2, 4, and 6 	<p>Approved unanimously by roll call. 5 AYES</p>
<p>PUBLIC COMMENTS</p>	<p>There were no public comments for the closed session items.</p>	
<p>ADJOURN TO CLOSED SESSION</p>	<p>The Joint Powers Authority Executive Committee meeting was adjourned at 3:04 p.m. Ms. Haydel 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 3:04 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 • Plan Partner Services Agreement <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>October 2023</i></p>	

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	<p>CONFERENCE WITH LEGAL COUNSEL—EXISTING LITIGATION Pursuant to Section 54956.9(d)(1) of Ralph M. Brown Act <i>Long Beach Memorial Medical Center et al v. L.A. Care Health Plan</i> - AAA Case No. 012000002356</p> <p>CONFERENCE WITH LEGAL COUNSEL—ANTICIPATED LITIGATION Significant exposure to litigation pursuant to Section 54956.9(d)(2) of Ralph M. Brown Act: Four Potential Cases</p>	
RECONVENE IN OPEN SESSION	The meeting reconvened in open session at 3:47 p.m. No reportable actions were taken during the closed session.	
ADJOURNMENT	The meeting adjourned at 3:47 p.m.	

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:

DocuSigned by:



Hector De La Torre, *Chair*

Date: 11/15/2021 | 3:38 PM PST