L.A. Care HEALTH PLAN

For All of L.A.

BOARD OF GOVERNORS MEETING

February 2, 2023 • 1:00 PM

L.A. Care Health Plan

1055 W. 7th Street, Los Angeles, CA 90017

ELEVATING HEALTHCARE IN LOS ANGELES COUNTY SINCE 1997

About L.A. Care Health Plan

Statement

L.A. Care's mission is to provide access to quality health care for Los Angeles County's vulnerable and low-income communities and residents and to support the safety net required to achieve that purpose.

Overview

Committed to the promotion of accessible, affordable and high quality health care, L.A. Care Health Plan (Local Initiative Health Authority of Los Angeles County) is an independent local public agency created by the State of California to provide health coverage to low-income Los Angeles County residents. Serving more than 2.7 million members in four product lines, L.A. Care is the nation's largest publicly operated health plan.

L.A. Care Health Plan is governed by 13 board members representing specific stakeholder groups, including consumer members, physicians, federally qualified health centers, children's health care providers, local hospitals and the Los Angeles County Department of Health Services.

L.A. Care advances individual and community health through a variety of targeted activities including a Community Health Investment Fund and sponsorships program that have awarded more than $180 million throughout the years to support the health care safety net and expand health coverage. The patient-centered health plan has a robust system of consumer advisory groups, including 11 Regional Community Advisory Committees (governed by an Executive Community Advisory Committee), 35 health promoters and nine Resource Centers that offer free health education and exercise classes to the community, and has made significant investments in Health Information Technology for the benefit of the more than 10,000 doctors and other health care professionals who serve L.A. Care members.

Programs

- **Medi-Cal** – In addition to offering a direct Medi-Cal line of business, L.A. Care works with three subcontracted health plans to provide coverage to Medi-Cal members. These partners are Anthem Blue Cross, Blue Shield of California Promise Health Plan and Kaiser Permanente. Medi-Cal beneficiaries represent a vast majority of L.A. Care members.

- **L.A. Care Covered™** – As a state selected Qualified Health Plan, L.A. Care provides the opportunity for all members of a family to receive health coverage under one health plan in the Covered California state exchange.

- **L.A. Care Cal MediConnect Plan** – L.A. Care Cal MediConnect Plan provides coordinated care for Los Angeles County seniors and people with disabilities who are eligible for Medicare and Medi-Cal.

- **PASC-SEIU Homecare Workers Health Care Plan** – L.A. Care provides health coverage to Los Angeles County's In-Home Supportive Services (IHSS) workers, who enable our most vulnerable community members to remain safely in their homes by providing services such as meal preparation and personal care services.

L.A. Care Membership by Product Line – As of December 2022	
Medi-Cal	**2,586,146**
L.A. Care Covered	**112,337**
Cal MediConnect	**17,128**
PASC-SEIU	**49,582**
Total membership	**2,765,193**
L.A. Care Providers – As of April 2022	
Physicians	**5,709**
Specialists	**13,534**
Both	**364**
Hospitals, clinics and other health care professionals	**14,276**
Financial Performance (FY 2021-2022 budget)	
Revenue	**$8.6B**
Fund Equity	**$1,143,510**
Net Operating Surplus	**($90,772)**
Administrative cost ratio	**5.2%**
Staffing highlights	
Full-time employees (Actual as of September 2021)	**1,911**
Projected full-time employees (FY 2021-2022 budget)	**1,945**

AGENDA
BOARD OF GOVERNORS MEETING
L.A. Care Health Plan
Thursday, February 2, 2023, 1:00 P.M.

L.A. Care Health Plan, 1055 W. 7th Street, Conference Rooms 1017-18, 10th Floor
Los Angeles, CA 90017

DRAFT

Please recheck these directions for updates prior to the start of the meeting.

This meeting will be conducted in accordance with the provisions of the Ralph M. Brown Act, allowing members of the Board of Governors, members of the public and staff to participate in person and via teleconference, because State and Local officials are recommending measures to promote social distancing. Accordingly, members of the public should join this meeting in person and via teleconference as follows:

NEW: Members of the Board of Governors, staff and the public can attend the meeting in person at the address listed above. Public comment can be made live and in person at the meeting. A form will be available at the meeting to submit public comment.

To listen to the meeting via videoconference please register by using the link below:
https://lacare.webex.com/lacare/j.php?MTID=m0147127c36a4e68d8282a8054424dfa7

To listen to the meeting via teleconference please dial: +1-213-306-3065
English Meeting Access Number: 2495 091 0285 Password: lacare
Spanish Meeting Access Number: 2499 095 2380 Password: lacare

For those not attending the meeting in person, public comments on Agenda items can be submitted in writing by e-mail to BoardServices@lacare.org, or by sending a text or voicemail to (213) 628-6420.

Attendees who log on to lacare.webex using the URL above will be able to use "chat" during the meeting for public comment. You must be logged into WebEx to use the "chat" feature. The log in information is at the top of the meeting Agenda. The chat function will be available during the meeting so public comments can be made live and direct.

1. The "chat" will be available during the public comment periods before each item.
2. To use the "chat" during public comment periods, look at the bottom right of your screen for the icon that has the word, "chat" on it.
3. Click on the chat icon. It will open two small windows.
4. Select "Everyone" in the "To:" window,
5. The chat message must indicate if you wish to be identified or remain anonymous, and must also include the name of the item to which your comment relates.
6. Type your public comment in the box that says "Enter chat message here".
7. When you hit the enter key, your message is sent and everyone can see it.
8. L.A. Care staff will read the chat messages for up to three minutes during public comment so people who are on the phone can hear the comment.

You can send your public comments by voicemail, email or text. If we receive your comments by 2:00 P.M., February 2, 2023, it will be provided to the members of the Board of Governors in writing at the beginning of the meeting. The chat message, text, voicemail, or email must indicate if you wish to be identified or remain anonymous, and must include the name of the item to which your comment relates.

Once the meeting has started, public comment submitted in writing must be received before the agenda item is called by the Chair. If your public comment is not related to any of the agenda item topics, it will be read in the general public comment agenda item.

Please note that there may be delay in the digital transmittal of emails, texts and voicemail. The Chair will announce when public comment period is over for each item. If your public comments are not received on

time for the specific agenda item you want to address, your public comments will be read at the public comment section prior to the board going to closed session.
The purpose of public comment is an opportunity for members of the public to inform the governing body about their views. The Board of Governors appreciates hearing the input as it considers the business on the Agenda. All public comments submitted will be read for up to 3 minutes during the meeting. These are extraordinary circumstances, and the process for public comment is evolving and may change at future meetings. We thank you for your patience.

All votes in a teleconferenced meeting shall be conducted by roll call.

If you are an individual with a disability and need a reasonable modification or accommodation pursuant to the Americans with Disabilities Act (ADA) please contact L.A. Care Board Services staff prior to the meeting for assistance by text to 213 628-6420 or by email to BoardServices@lacare.org.

Welcome — Al Ballesteros, MBA, *Chair*

1. Approve today's Agenda — *Chair*
2. Approval of findings under the Ralph M. Brown Act **(BOG 100)** p.17 — *Chair*
3. Public Comment *(Please read instructions above.)* — *Chair*
4. Approve Consent Agenda Items — *Chair*
   - December 1, 2022 Board of Governors Meeting Minutes p.19
   - Ratify L.A. Care Chief Executive Officer, John Baackes execution of Department of Health Care Services Medi-Cal Secondary Contract 22-20466, DSNP Contract 22-20236 Amendments **(BOG 101)** p.46
   - Appointment of Sameer Amin, MD, Chief Medical Officer, as member of the Children's Health Consultant Advisory Committee **(BOG 102)** p.57
   - Appointment of Sameer Amin, MD, Chief Medical Officer, as member of the Technical Advisory Committee **(BOG 103)** p.58
   - Scout Exchange Contract Amendment **(EXE 100)** p.59
   - Cognizant Contract Amendment for Healthcare Effectiveness Data and Information Set (HEDIS) and Align. Measure. Perform (AMP) services **(FIN 100)** p.60
   - Toney Health Care Consulting (THCC) to provide Utilization Management Frontline Nursing and Leadership Staffing Augmentation **(FIN 101)** p.61
   - 2023 Compliance Work Plan **(COM 100)** p.62
   - 2023 Internal Audit Plan **(COM 101)** p.69
5. Chairperson's Report — *Chair*
   - Welcome Board Member Supervisor Hilda Solis
   - 2023 Committee Assignments and Update to 2023 Board Meeting Schedule
6. Chief Executive Officer Report p.75 — John Baackes, *Chief Executive Officer*
   - In Memoriam for Dr. Robert E. Tranquada
   - Redetermination of Medi-Cal Eligibility
   - Quarterly Vision Progress Report p.79
   - Monthly Grants & Sponsorship Report p.98

7. Chief Medical Officer Report p.100 — Sameer Amin, MD, *Chief Medical Officer*

Advisory Committee Reports

8. Executive Community Advisory Committee — Hilda Perez / Layla Gonzalez, *Consumer member and Advocate member*

9. Children's Health Consultant Advisory Committee — Tara Ficek, MPH, *Chairperson, CHCAC*

Committee Reports

10. Executive Committee — *Chair*

- Government Affairs Update — Cherie Compartore, *Senior Director, Government Affairs*
  - L.A. Care's 2023 State and Federal Policy Agenda **(EXE 101)** p.125
- Housing and Homelessness Incentive Program **(EXE 101)** p.129 — Sameer Amin, MD; Karl Calhoun, *Director, Safety Net Programs and Partnerships*

11. Finance & Budget Committee — Stephanie Booth, MD, *Committee Chair*

- Chief Financial Officer Report p.160 — Marie Montgomery, *Chief Financial Officer*
  - Financial Reports – October & November 2022 **(FIN 102)** p.171
  - Monthly Investment Transactions Reports p.192

12. Compliance & Quality Committee — Stephanie Booth, MD, *Committee Chair*

13. Audit Committee — Al Ballesteros, MBA, *Committee Chair*

14. Public Comment on Closed Session Items *(Please read instructions above.)* — *Chair*

ADJOURN TO CLOSED SESSION (Estimated time: 60 minutes) — *Chair*

15. CONTRACT RATES
Pursuant to Welfare and Institutions Code Section 14087.38(m)
- Plan Partner Rates
- Provider Rates
- DHCS Rates
- Plan Partner Services Agreement

16. REPORT INVOLVING TRADE SECRET
Pursuant to Welfare and Institutions Code Section 14087.38(n)
Discussion Concerning new Service, Program, Technology, Business Plan
Estimated date of public disclosure: *February 2025*

17. CONFERENCE WITH LEGAL COUNSEL—EXISTING LITIGATION
Pursuant to Section 54956.9(d)(1) of the Ralph M. Brown Act
- L.A. Care Health Plan's Notice of Contract Dispute under Contract No. 04-36069 Department of Health Care Services (Case No. Unavailable)

18. CONFERENCE WITH LEGAL COUNSEL—EXISTING LITIGATION
Pursuant to Section 54956.9(d)(1) of the Ralph M. Brown Act
HRRP Garland, LLC v. Local Initiative Health Authority for Los Angeles County
L.A.S.C. Case No. 21STCV47250

19. 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

20. CONFERENCE WITH LEGAL COUNSEL—EXISTING LITIGATION
Pursuant to Section 54956.9(d)(1) of the Ralph M. Brown Act
- Department of Managed Health Care Enforcement Matter Numbers: 18-799, 20-063, 21-428, 21-509, 21-680
- Department of Health Care Services, Office of Administrative Hearings and Appeals, In the matter of: L.A. Care Health Care Plan Appeal No. MCP22-0322-559-MF

21. CONFERENCE WITH LEGAL COUNSEL—EXISTING LITIGATION
Pursuant to Section 54956.9(d)(1) of the Ralph M. Brown Act
Marilyn Dyson vs. L.A. Care Health Plan, et al,
Los Angeles Superior Court, Case No. 22STCV41016

RECONVENE IN OPEN SESSION *Chair*

22. Plan Partner Services Agreement Contract Amendments **(EXE 103)** Augustavia J. Haydel, Esq.
General Counsel

Adjournment *Chair*

The next meeting is scheduled on March 2, 2023 at 1 PM and may be conducted as a teleconference meeting.
The order of items appearing on the agenda may change during the meeting.

THE PUBLIC MAY SUBMIT COMMENTS TO THE BOARD OF GOVERNORS BEFORE DISCUSSION OF EACH ITEM LISTED ON THE AGENDA BY SUBMITTING THE COMMENT IN WRITING BY TEXT MESSAGE TO 213 628 6420, OR IN WRITING BY EMAIL TO BoardServices@lacare.org. Please follow additional instructions on the first page of this Agenda.

ACTION MAY NOT BE TAKEN ON ANY MATTER RAISED DURING THE PUBLIC COMMENT PERIODS UNTIL THE MATTER IS SPECIFICALLY LISTED ON A FUTURE AGENDA, according to California Govt Code Section 54954.2 (a)(3) and Section 54954.3.

NOTE: THE BOARD OF GOVERNORS CURRENTLY MEETS ON THE FIRST THURSDAY OF MOST MONTHS AT 1:00 P.M.

AGENDA and PRINTED MEETING MATERIALS ARE AVAILABLE FOR INSPECTION 72 HOURS BEFORE THE MEETING:
1. **At L.A. CARE'S Website:** http://www.lacare.org/about-us/public-meetings/board-meetings
2. **L.A. Care's Offices at 1055 W. 7th Street, Los Angeles, CA 90017 through the Reception Area in the Building Lobby, or**
3. **by email request to BoardServices@lacare.org**

Any documents distributed to a majority of the Board Members regarding any agenda item for an open session after the agenda and meeting materials have been posted will be available for public inspection by email request to BoardServices@lacare.org

An audio recording of the meeting is made to assist in writing the minutes and is retained for 30 days.

Meetings are accessible to people with disabilities. Individuals who may require any accommodations (alternative formats - i.e., large print, audio, translation of meeting materials, interpretation, etc.) to participate in this meeting and wish to request an alternative format for the agenda, meeting notice, and meeting packet may contact L.A. Care's Board Services Department at (213) 628 6420. Notification at least one week before the meeting will enable us to make reasonable arrangements to ensure accessibility to the meetings and to the related materials.

L.A. Care HEALTH PLAN

Schedule of Meetings
February 2023

Monday	Tuesday	Wednesday	Thursday	Friday
		1	2 ***Board of Governors Meeting*** ***1 pm*** *(for approx. 6 hours)*	3
6	7	8 ***ECAC Meeting*** *10 AM* *(for approx. 2 hours)*	9 ***Technical Advisory Committee Meeting*** *2 PM* *(for approx. 2 hours)*	10
13	14	15 ***RCAC 6*** *10 AM* *(for approx. 1-1/2 hours)*	16 ***RCAC 10*** *2 PM* *(for approx. 1-1/2 hours)*	17 ***RCAC 1*** *10 AM* *(for approx. 1-1/2 hours)*
20	21 ***RCAC 3*** *10 AM* *(for approx. 1-1/2 hours)*	22	23	24
27 ***RCAC 2*** *10 AM* *(for approx. 1-1/2 hours)* ***RCAC 5*** *2 PM* *(for approx. 1-1/2 hours)*	28 ***Finance & Budget Committee Meeting*** *1 PM* *(for approx. 1 hour)* ***Executive Committee Meeting*** *2 PM* *(for approx. 2 hours)*			

For information on the current month's meetings, check calendar of events at www.lacare.org. Meetings may be cancelled or rescheduled at the last moment. To check on a particular meeting, please call (213) 694-1250 or send email to boardservices@lacare.org.

Prepared by mhbalones/printed on 01/23/23

L.A. Care HEALTH PLAN
1055 W. 7th Street, 1st Floor, Los Angeles, **CA 90017**
Tel. (213) 694-1250 / Fax (213) 438-5728

BOARD OF GOVERNORS & PUBLIC ADVISORY COMMITTEES
2023 MEETING SCHEDULE / MEMBER LISTING

	MEETING DAY, TIME & LOCATION	MEETING DATES	BOARD MEMBERS / STAFF CONTACT
BOARD OF GOVERNORS	**1st Thursday** 1:00 PM *(for approximately 3 hours)* L.A. Care Health Plan 1055 W. 7th Street, 1st Floor, Los Angeles, CA 90017 (213) 694-1250 **Placeholder meetings* ***Offsite meeting – location TBD* ****All Day Retreat – location TBD*	*No meeting in January* February 2 March 2* April 6 May 4 June 1** July 27 *No meeting in August* September 7*** October 5* November 2 December 7	Alvaro Ballesteros, MBA, *Chairperson* Ilan Shapiro, MD, *Vice Chairperson* Stephanie Booth, MD, *Treasurer* John G. Raffoul, *Secretary* Hector De La Torre Christina R. Ghaly, MD Layla Gonzalez, George W. Greene, Esq. Hilda Perez G. Michael Roybal, MD, MPH Supervisor Hilda Solis Nina Vaccaro, MPH VACANT **Staff Contact:** John Baackes *Chief Executive Officer, x4102* Linda Merkens *Senior Manager, Board Services, x4050*
BOARD COMMITTEES			
EXECUTIVE COMMITTEE	**4th Tuesday of the month** 2:00 PM *(for approximately 2 hours)* L.A. Care Health Plan 1055 W. 7th Street, 1st Floor, Los Angeles, CA 90017 (213) 694-1250 **2nd Tuesday due to Thanksgiving holiday*	January 24 February 28 March 28 April 25 May 23 June 27 *No meeting in July* August 22 September 26 October 24 November 14* *No meeting in December*	Alvaro Ballesteros, MBA, *Chairperson* Ilan Shapiro, MD, *Vice Chairperson* Stephanie Booth, MD, *Treasurer* John G. Raffoul, *Secretary* Hilda Perez *Compliance & Quality Committee Chair* **Staff Contact:** Linda Merkens *Senior Manager, Board Services, x4050* Malou Balones *Board Specialist III, Board Services x4183*

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BOARD OF GOVERNORS, BOARD COMMITTEES, PUBLIC ADVISORY COMMITTEES AND REGIONAL COMMUNITY ADVISORY COMMITTEES
2023 MEETING SCHEDULE / MEMBER LISTING

	MEETING DAY, TIME & LOCATION	MEETING DATES	BOARD MEMBERS / STAFF CONTACT
COMPLIANCE & QUALITY COMMITTEE	**3rd Thursday of the month** 2:00 PM *(for approximately 2 hours)* L.A. Care Health Plan 1055 W. 7th Street, 1st Floor, Los Angeles, CA 90017 (213) 694-1250	January 19 February 16 March 16 April 20 May 18 June 15 *No meeting in July* August 17 September 21 October 19 November 16 *No meeting in December*	Stephanie Booth, MD, *Chairperson* Alvaro Ballesteros, MBA Christina R. Ghaly, MD Hilda Perez G. Michael Roybal, MD, MPH **Staff Contact:** Victor Rodriguez *Board Specialist II, Board Services x 5214*
FINANCE & BUDGET COMMITTEE	**4th Tuesday of the month** 1:00 PM *(for approximately 1 hour)* L.A. Care Health Plan 1055 W. 7th Street, 1st Floor, Los Angeles, CA 90017 (213) 694-1250 **2nd Tuesday due to Thanksgiving holiday*	January 24 February 28 March 28 April 25 May 23 June 27 *No meeting in July* August 22 September 26 October 24 November 14* *No meeting in December*	Stephanie Booth, MD, *Treasurer* Al Ballesteros, MBA Hilda Perez G. Michael Roybal, MD, MPH Nina Vaccaro **Staff Contact:** Malou Balones *Board Specialist III, Board Services x4183*
GOVERNANCE COMMITTEE	L.A. Care Health Plan 1055 W. 7th Street, 1st Floor, Los Angeles, CA 90017 (213) 694-1250 **MEETS AS NEEDED**		Hilda Perez, *Chairperson* Stephanie Booth, MD Layla Gonzalez Nina Vaccaro, MPH **Staff Contact:** Malou Balones *Board Specialist III, Board Services/x 4183*

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BOARD OF GOVERNORS, BOARD COMMITTEES, PUBLIC ADVISORY COMMITTEES AND REGIONAL COMMUNITY ADVISORY COMMITTEES
2023 MEETING SCHEDULE / MEMBER LISTING

	MEETING DAY, TIME & LOCATION	MEETING DATES	BOARD MEMBERS / STAFF CONTACT
SERVICE AGREEMENT COMMITTEE	L.A. Care Health Plan 1055 W. 7th Street, 1st Floor, Los Angeles, CA 90017 (213) 694-1250 **MEETS AS NEEDED**		Layla Gonzalez, *Chairperson* George W. Greene Hilda Perez **Staff Contact** Malou Balones *Board Specialist III, Board Services/x 4183*
AUDIT COMMITTEE	L.A. Care Health Plan 1055 W. 7th Street, 1st Floor, Los Angeles, CA 90017 (213) 694-1250 **MEETS AS NEEDED**		Hector De La Torre Layla Gonzalez George Greene **Staff Contact** Malou Balones *Board Specialist III, Board Services, x 4183*

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L.A. CARE COMMUNITY HEALTH PLAN	**Meets Annually or as needed** L.A. Care Health Plan 1055 W. 7th Street, 1st Floor, Los Angeles, CA 90017 (213) 694-1250		Alvaro Ballesteros, MBA, *Chairperson* Ilan Shapiro, MD, *Vice Chairperson* Stephanie Booth, MD, *Treasurer* John G. Raffoul, *Secretary* Hector De La Torre Christina R. Ghaly, MD Layla Gonzalez, George W. Greene, Esq. Hilda Perez G. Michael Roybal, MD, MPH Supervisor Hilda Solis Nina Vaccaro, MPH VACANT **Staff Contact:** John Baackes, *Chief Executive Officer, x4102* Linda Merkens, *Senior Manager, Board Services, x4050*
L.A. CARE JOINT POWERS AUTHORITY	L.A. Care Health Plan 1055 W. 7th Street, 1st Floor, Los Angeles, CA 90017 (213) 694-1250 **Placeholder meetings* ***Offsite meeting – location TBD* ****All Day Retreat – location TBD*	*No meeting in January* February 2 March 2* April 6 May 4 June 1** July 27 *No meeting in August* September 7*** October 5* November 2 December 7	Alvaro Ballesteros, MBA, *Chairperson* Ilan Shapiro, MD, *Vice Chairperson* Stephanie Booth, MD, *Treasurer* John G. Raffoul, *Secretary* Hector De La Torre Christina R. Ghaly, MD Layla Gonzalez, George W. Greene, Esq. Hilda Perez G. Michael Roybal, MD, MPH Supervisor Hilda Solis Nina Vaccaro, MPH VACANT **Staff Contact:** John Baackes, *Chief Executive Officer, x4102* Linda Merkens, *Senior Manager, Board Services, x4050*

BOARD OF GOVERNORS, BOARD COMMITTEES, PUBLIC ADVISORY COMMITTEES AND REGIONAL COMMUNITY ADVISORY COMMITTEES
2023 MEETING SCHEDULE / MEMBER LISTING

PUBLIC ADVISORY COMMITTEES			
CHILDREN'S HEALTH CONSULTANT ADVISORY COMMITTEE GENERAL MEETING	**3rd Tuesday of every other month** 8:30 AM *(for approximately 2 hours)* L.A. Care Health Plan 1055 W. 7th Street, 1st Floor, Los Angeles, CA 90017 (213) 694-1250	January 17 March 14 May 16 *No meeting in July* August 15 September 19 November 21	**Tara Ficek, MPH,** *Chairperson* **Staff Contact:** Victor Rodriguez *Board Specialist II, Board Services/x 5214*
EXECUTIVE COMMUNITY ADVISORY COMMITTEE	**2nd Wednesday of the month** 10:00 AM *(for approximately 3 hours)* L.A. Care Health Plan 1055 W. 7th Street, 1st Floor, Los Angeles, CA 90017 (213) 694-1250	January 11 February 8 March 8 April 12 May 10 June 14 *No meeting in July* August 9 September 13 October 11 November 8 December 13	**Fatima Vasquez,** *Chairperson* **Staff Contact:** Idalia Chitica**,** *Community Outreach & Education, Ext. 4420*
TECHNICAL ADVISORY COMMITTEE	**Meets Quarterly 2nd Thursday of meeting month** 2:00 PM *(for approximately 2 hours)* L.A. Care Health Plan 1055 W. 7th Street, 1st Floor, Los Angeles, CA 90017 (213) 694-1250	February 9 May 11 August 10 November 9	**Staff Contact:** Victor Rodriguez *Board Specialist II, Board Services/x 5214*

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BOARD OF GOVERNORS, BOARD COMMITTEES, PUBLIC ADVISORY COMMITTEES AND REGIONAL COMMUNITY ADVISORY COMMITTEES
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REGIONAL COMMUNITY ADVISORY COMMITTEES			
REGION 1 **ANTELOPE VALLEY**	**3rd Friday of every other month** 10:00 AM *(for approximately 2-1/2 hours)* L.A. Care Family Resource Center 2072 E. Palmdale Blvd. Palmdale, CA 93550 (213) 438-5580	February 17 April 21 June 16 August 18 October 20 December 15	**Russel Mahler,** *Chairperson* **Staff Contact:** Kristina Chung, Field Specialist Cell Phone (213) 905-8502 *Community Outreach & Education*
REGION 2 **SAN FERNANDO VALLEY**	**3rd Monday of every other month** 10:00 AM *(for approximately 2-1/2 hours)* L.A. Care Family Resource Center 10807 San Fernando Rd. Pacoima, CA 91331 (844) 858-9942	February 27 * April 17 June 26 * August 21 October 16 December 18 **Dates have changed due to holidays or L.A. Care Special events*	**Estela Lara,** *Chairperson* **Staff Contact:** Martin Vicente, Field Specialist Cell Phone (213) 503-6199 *Community Outreach & Education*
REGION 3 **ALHAMBRA, PASADENA AND FOOTHILL**	**3rd Tuesday of every other month** 10:00 AM *(for approximately 2-1/2 hours)* Robinson Park Recreation Center 1081 N. Fair Oaks Ave. Pasadena, CA 91103 (626) 744-7330	February 21 April 18 June 20 August 15 October 17 December 19	**Cynthia Conteas-Wood,** *Chairperson* **Staff Contact:** Frank Meza, Field Specialist Cell phone (323) 541-7900 *Community Outreach & Education*
REGION 4 **HOLLYWOOD-WILSHIRE, CENTRAL L.A. AND GLENDALE**	**3rd Wednesday of every other month** 9:30 AM *(for approximately 2-1/2 hours)* Community Resource Center Metro LA 1233 S. Western Ave. Los Angeles, CA 90006 (213) 428-1457	January 19 ** March 16 May 18 July 20 September 21 November 16 *** Indicates a RCAC Check-in and not an official RCAC meeting*	**Sylvia Poz,** *Chairperson* **Staff Contact:** Kristina Chung, Field Specialist Cell Phone (213) 905-8502 *Community Outreach & Education*

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BOARD OF GOVERNORS, BOARD COMMITTEES, PUBLIC ADVISORY COMMITTEES AND REGIONAL COMMUNITY ADVISORY COMMITTEES
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REGION 5 **CULVER CITY, VENICE, SANTA MONICA, MALIBU, WESTCHESTER**	**3rd Monday of every other month** 2:00 PM *(for approximately 2-1/2 hours)* Veterans Memorial Bldg Multipurpose Room 4117 Overland Avenue Culver City, CA 90230 (310) 253-6625	February 27 * April 17 June 26 * August 21 October 16 December 18	**Maria Sanchez,** *Chairperson* **Staff Contact:** Cindy Pozos, Field Specialist Cell phone (213) 545-4649 *Community Outreach & Education*
REGION 6 **COMPTON, INGLEWOOD, WATTS, GARDENA, HAWTHORNE**	**3rd Thursday of every other month** 10:00 AM *(for approximately 2-1/2 hours)* Community Resource Center Inglewood 2864 W. Imperial Highway Inglewood, CA 90303 (310) 330-3130	February 15 April 19 June 21 August 16 October 18 December 20	**Andria McFerson,** *Chairperson* **Staff Contact:** Frank Meza, Field Specialist Cell phone (323) 541-7900 *Community Outreach & Education*
REGION 7 **HUNTINGTON PARK, BELLFLOWER, NORWALK, CUDAHY**	**3rd Thursday of every other month** 10:00 AM *(for approximately 2-1/2 hours)* Community Resource Center Norwalk 11721 Rosecrans Ave. Norwalk, CA 90650 (562) 651-6060	January 17 ** March 21 May 16 July 18 September 19 November 21 *** Indicates a RCAC Check-in and not an official RCAC meeting*	**Fatima Vasquez,** *Chairperson* **Staff Contact:** Martin Vicente, Field Specialist Cell Phone (213) 503-6199 *Community Outreach & Education*
REGION 8 **CARSON, TORRANCE, SAN PEDRO, WILMINGTON**	**3rd Friday of every other month** 10:30 AM *(for approximately 2-1/2 hours)* Community Resource Center Wilmington 911 N. Avalon Ave. Wilmington, CA 90744 (213) 428-1490	January 20 ** March 17 May 19 July 21 September 15 November 17 *** Indicates a RCAC Check-in and not an official RCAC meeting*	**Ana Romo – *Chairperson*** **Staff Contact:** Hilda Herrera, *Field Specialist* Cell phone (213) 605-4197 *Community Outreach & Education*

FOR INFORMATION ON THE CURRENT MONTH'S MEETINGS, CHECK CALENDAR OF EVENTS AT WWW.LACARE.ORG. MEETINGS MAY BE CANCELLED OR RESCHEDULED AT THE LAST MOMENT. TO CHECK ON A PARTICULAR MEETING, PLEASE CALL (213) 694-1250 OR SEND EMAIL TO BOARDSERVICES@LACARE.ORG.

BOARD OF GOVERNORS, BOARD COMMITTEES, PUBLIC ADVISORY COMMITTEES AND REGIONAL COMMUNITY ADVISORY COMMITTEES
2023 MEETING SCHEDULE / MEMBER LISTING

REGION 9 **LONG BEACH**	**3rd Monday of every other month** 10:00 AM *(for approximately 2-1/2 hours)* Community Resource Center Long Beach 5599 Atlantic Ave. Long Beach, CA 90805 (213) 905-8502	January 23 *** March 20 May 15 July 17 September 18 November 20 *** *Date have changed due to holidays or L.A. Care Special events and indicates a RCAC Check-in and not an official RCAC meeting*	**Tonya Byrd**, *Chairperson* **Staff Contact:** Kristina Chung, Field Specialist Cell Phone (213) 905-8502 *Community Outreach & Education*
REGION 10 **EAST LOS ANGELES, WHITTIER AND HIGHLAND PARK**	**3rd Thursday of every other month** 2:00 PM *(for approximately 2-1/2 hours)* L.A. Care East L.A. Family Resource Center 4801 Whittier Blvd Los Angeles, CA 90022 (213) 438-5570	February 16 April 20 June 15 August 17 October 19 December 21	**Damares Hernández de Cordero,** *Chairperson* **Staff Contact:** Hilda Herrera, *Field Specialist* Cell phone (213) 605-4197 *Community Outreach & Education*
REGION 11 **POMONA AND EL MONTE**	**3rd Thursday of every other Month** 10:00 AM *(for approximately 2-1/2 hours)* Pomona Community Resource Center 696 W. Holt Street Pomona, CA 91768 (909) 620-1661	January 18 ** March 15 May 17 July 19 September 20 November 15 ** *Indicates a RCAC Check-in and not an official RCAC meeting*	**Maria Angel Refugio,** *Chairperson* **Staff Contact:** Frank Meza, Field Specialist Cell phone (323) 541-7900 *Community Outreach & Education*

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L.A. Care
HEALTH PLAN

Board of Governors
MOTION SUMMARY

Date: February 2, 2023 **Motion No. BOG 100.0223**

Committee: **Chairperson:** Al Ballesteros, MBA

Issue: Remote Teleconference Meetings

Background: On March 17, 2020, Governor Newsom issued Executive Order N-29-20 suspending certain provisions of the Ralph M. Brown Act (the "Brown Act") in order to allow for local legislative bodies to conduct their meetings completely telephonically or by other electronic means due to public health orders restricting gatherings during the COVID-19 pandemic.

AB 361 was signed into law on September 16, 2021 to amend the Brown Act allowing legislative bodies to continue meeting virtually with relaxed protocols provided there is a state of emergency declared by the Governor, and either (1) state or local officials have imposed or recommended measures to promote social distancing; or (2) the legislative body determines by majority vote that meeting in person would present imminent risks to the health and safety of attendees (AB 361). The Governor, by executive order signed on September 20, 2021, suspended the effective date of this new legislation to October 1, 2021 to avoid confusion in the overlap between Executive Order N-29-20 and new AB 361 requirements.

In order to continue conducting virtual meeting under the revised provisions of the Brown Act the Board of Governors, or any other legislative bodies of L.A. Care Health Plan and L.A. Care Joint Powers Authority, including Committees, must, within thirty days of the first meeting pursuant to Government Code Section 54953(e)(1) and every thirty days thereafter, make findings that (a) state or local officials continue to recommend measures to promote social distancing, or that (b) an in-person meeting would directly impact the ability of the members to meet safely in person.

Findings:

1. The Board of Governors has reconsidered the circumstances of the state of emergency initially declared by the Governor on March 4, 2020, pursuant to section 8625 of the California Emergency Services Act, relating to the COVID-19 public health crisis and finds that the declaration still remains in effect.
2. The Board of Governors finds that given that the vaccination status of meeting participants is not known and COVID-19 continues to be a threat to people's health and safety, it is prudent to use caution in protecting the health of the public, L.A. Health Care's employees and its members. Where, as here, meeting safely in person is impacted by COVID-19 and 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 teleconference/videoconference option should be exercised.
3. The Board of Governors finds that state and local officials continue to impose or recommend measures to promote social distancing. The Department of Industrial Relations' issuance of COVID-19 Prevention regulations through Title 8 of the California Code of Regulations, section

3205 *et seq*., includes informing employees that masking and social distancing in the workplace are most effective when used in combination because particles containing the virus can travel more than six feet. Further, as of the date of this Motion, the Los Angeles County Department of Public Health continues to recommend measures to promote social distancing, including recommendations to avoid crowded indoor spaces and to maintain six feet of social distancing, especially in cases where the vaccination status of persons outside a person's household is unknown. The continuation of virtual meetings will allow for full participation by members of the public while social distancing recommendations remain in effect and will facilitate the purposes of such social distancing recommendations by preventing large crowds from congregating in indoor facilities for extended periods of time.

As such, staff recommends approval of this motion so that the Board of Governors, all legislative bodies of the L.A. Care Health Plan, and L.A. Care Joint Powers Authority may continue to meet virtually. The Board of Governors, or other legislative bodies on the Board's behalf, may extend the authorization for an additional thirty days via another motion summary that makes the above specific findings in support of continuing virtual meetings.

Member Impact: L.A. Care members will benefit from this motion by providing for public participation in Board of Governor meetings, while following social distancing measures promoted by State and Local public health officials.

Budget Impact: The approval of a motion to continue virtual meetings will maintain the status quo and minimal financial impact is anticipated by the approval of this motion, though some costs may be associated with the technical solutions required to conduct teleconference meetings in compliance with the Brown Act.

Motion:

1. **Authorize remote teleconferencing consistent with the Ralph M. Brown Act;**
2. **Adopt findings as set forth in this Motion Summary and,**
3. **For all L.A. Care Health Plan and L.A. Care Joint Powers Authority meetings subject to the Ralph M. Brown Act that are not held within 30 days, delegate authority to the Executive Committees to authorize findings to continue remote teleconferencing consistent with the Ralph M. Brown Act.**

Board of Governors
Regular Meeting Minutes #313
December 1, 2022

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

Members

Hector De La Torre, *Chairperson*
Alvaro Ballesteros, MBA, *Vice Chairperson*
Ilan Shapiro, MD, *Treasurer**
Stephanie Booth, MD, *Secretary*
Christina R. Ghaly, MD
Layla Gonzalez
George W. Greene, Esq.*
Honorable Holly J. Mitchell
Hilda Perez
John G. Raffoul
G. Michael Roybal, MD, MPH
Nina Vaccaro, MPH

All via teleconference
**Absent*

Management

John Baackes, *Chief Executive Officer*
Terry Brown, *Chief of Human Resources*
Augustavia Haydel, *General Counsel*
Linda Greenfeld, *Chief Product Officer*
Tom MacDougall, *Chief Technology & Information Officer*
Thomas Mapp, *Chief Compliance Officer*
Marie Montgomery, *Chief Financial Officer*
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 Health Plan'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 will continue to meet virtually and the Board will review that decision as provided in the Brown Act.

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
WELCOME	Hector De La Torre, *Chairperson,* called to order at 1:04 p.m. the regular and Special Supplemental meetings of L.A. Care Health Plan Board of Governors and the L.A. Care Health Plan Joint Powers Authority Board of Directors. The meetings were held simultaneously. Chairperson De La Torre announced that for those with access to the internet, the materials for today's meeting are available on the L.A. Care website. If you need information about how to locate the materials, please let us know. He welcomed everyone and thanked those who have submitted public comment by voice mail, text or email. He informed participants that for those using the video software during the meeting, the "chat" function will be available to provide live and direct public comment to everyone participating in the virtual meeting. The Chat feature will be open throughout the meeting for public comment. Board Members have received in writing the voice messages and written comments that were sent before the meeting. All comments sent before and during the meeting were read for up to three minutes. All are welcome to provide input.	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	He noted that public comments should be related to the meeting topic on the Agenda to inform Board Members. That is the purpose of public comment; it is not to rant or say whatever what comes into one's mind. It is to inform the Board regarding today's meeting and the items that are being discussed. Submitters should include the Agenda item for which the comment is to be read. If one does not tell us which item, the comment will be read in the general public comment section of the Agenda. Public comments on any topic that are not listed on the Agenda will be heard at the Public Comment section of the Agenda, and comments on the items listed on the Agenda will be heard before the item is discussed by the Board. Public comment must be submitted before the public comment period for an item. This is normal procedure and every government agency that has public comment does it before the item because it is intended, and the State law is designed in a way to inform the discussion of the Board members. That is why we read the comments before the Board members discuss the item. He thanked participants for their public comment. The Board members value hearing the ideas and comments about the items on the Agenda. It better informs the Board's discussion on those items and about what is happening at L.A. Care.	
APPROVAL OF MEETING AGENDA	The agendas were approved as presented.	**Unanimously approved by roll call. 7 AYES (Ballesteros, Booth, De La Torre, Ghaly, Perez, Roybal and Vaccaro)**
APPROVAL OF FINDINGS UNDER THE RALPH M. BROWN ACT	**<u>Motion BOG 100.1222</u>** **1. Authorize remote teleconferencing consistent with the Ralph M. Brown Act;** **2. Adopt findings as set forth in this Motion Summary and,** **3. For all L.A. Care Health Plan and L.A. Care Joint Powers Authority meetings subject to the Ralph M. Brown Act that are not held within 30 days, delegate authority to the Executive Committees to authorize findings to continue remote teleconferencing consistent with the Ralph M. Brown Act.** *(Board Member Mitchell joined the meeting.)*	**Unanimously approved by roll call. 7 AYES**
PUBLIC COMMENTS	**Submitted by Elizabeth Cooper, RCAC 2 Member today at 12:28 pm via voicemail:** *First I would like to say hello to the Board members Mr. John C. Baackes, Chief Executive Officer, and the public. I would like to speak to Board members, welcome, I'm glad to see elections for the Board members, it is very important, but I would also like to see the RCACs start again and have communication and bring*	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	things to the agenda. It has been several years and I think there are so many important things the RCACs have done invlolving the ECAC and the Board of Governors. But I am still very concerned the RCACs have not been given enough info and participation in Board decisions and Board meetings, etc. I would like to see the Board in particular to please start the RCACs be more active so that they can see the importance. And staff can carry it on to the ECAC and members can share their concerns with members of the Board. I appreciate it but I feel the RCACs play a very vital role and I believe that some of the issues discussed have been brought by the RCACs and discussed by ECAC and approved by members of the Board. And I appreciate each and everyone of you and it is a privilege to be part of the RCACs over the years. It is my deep appreciation and hope that you allow the RCACs to operate in a timely manner in person so they can give their point of view so their voices can be heard. I am deeply concerned about public input. **Submitted by Andria McFerson, RCAC 6 Chair today at 1:04 pm via email:** *I myself, Andria McFerson, Chair of RCAC 6, ask that LA Care abide all rights relative the public's efforts to try to communicate with you today.* *Because repeatedly I feel as a Chair I'm look at as though I'm speaking out of order. I ask again that the agenda items during our ECAC meeting that are actually pertaining to LA Care Members, do not get impeded on by staff. During an actual ECAC meeting staff members filibuster my motions and I know technically you can't filibuster unless your chair but yet the staff still do it anyway which always affects how the fellow co-chairs vote towards my motions and they usually vote nay. Chair please let the staff know not to interrupt motion I want to make sure my current outreach doesn't get confused and members of the public and our own RCAC members understand as well. By the way the motion was just to have an ad hoc to speak about a survey for members to receive better care.* Chairperson De La Torre thanked the contributors for their comments.	
APPROVE CONSENT AGENDA ITEMS	*(Board Member Raffoul joined the meeting.)* • November 3, 2022 Board of Governors Meeting Minutes • Nomination for Charitable Organizations for donated Board Stipends **Motion BOG 101.1222** **To designate Covenant House California and Planned Parenthood Los Angeles as authorized recipients of funds from Board Member stipends according to Legal Services Policy 300 for the calendar year 2023.**	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	• Gensler Contract **Motion BOG 102.1222** **To delegate to the *Chief Executive Officer* discretionary authority to finalize MSA and SOW agreements with the architectural firm Gensler for the hybrid space planning, design development and construction documents for capital leasehold improvements at 1200 W. 7th Street, Los Angeles, CA (Garland) building. The total budget for all agreements is not to exceed $1,600,000 without written amendment approved by the Board of Governors.** • CEO Delegation of Amendments to L.A. Care's Medi-Cal Contract Number 04-36069 with the Department of Health Care Services **Motion BOG 103.1222** **To delegate authority to L.A. Care Chief Executive Officer, John Baackes, to negotiate and execute three (3) Amendments to Medi-Cal Contract (04-36069), and to ratify any changes to the associated Amendments which may be made or negotiated by the Chief Executive Officer and/or his designees.** • Revisions to Legal Services Policy LS-006 (Gifts and Donations) **Motion EXE 100.1222** **To approve Legal Services Policy LS-006 (Gifts and Donations) as amended to create consistent gift polices for L.A Care employees consistent with law and general policy updates and authorize General Counsel and her designees to make edits to the policy as needed to effectuate the amendments.** • Biennial Review of L.A. Care Health Plan's Conflict of Interest Code **Motion EXE 101.1222** **To approve revisions to the Conflict of Interest Code of the L.A. Care Health Plan, as attached, for submission to the Los Angeles County Board of Supervisors and delegate authority to the CEO and General Counsel (including their respective designees) to make any non-substantive changes or changes that may be required by the County upon their review.** • Quarterly Investment Reports **Motion FIN 100.1222** **To accept the Quarterly Investment Report for the quarter ending September 30, 2022, as submitted.**	**Unanimously approved by roll call, as amended.** **8 AYES (Ballesteros, Booth, De La Torre, Ghaly, Perez, Raffoul, Roybal and Vaccaro)** *Member Mitchell was unable to vote on this motion due to technical difficulties.*

- Global Processor, Inc. Contract for SAP Ariba Software Implementation
  Motion FIN 101.1222
  To authorize staff to execute a contract in the amount $2,300,000 with Global Processor, Inc. to provide SAP Ariba software implementation services for the period of January 1, 2023 to December 31, 2023.

- Salesforce, Inc. Customer Relationship Management Subscription Renewal
  Motion FIN 102.1222
  To authorize staff to execute a contract with Salesforce in an amount up to $2,160,000 for the renewal of subscription services through October 31, 2023.

- Cognizant Technology Solutions, HCL America, Inc., Infosys Limited, and Solugenix Corporation Contracts Amendments for Information Technology Staff Augmentation
  Motion FIN 103.1222
  To authorize staff to amend contracts with Cognizant Technology Solutions, HCL America, Inc., Infosys Limited, and Solugenix Corporation, not to exceed a total of $14,296,629 (total contracts not to exceed $38,760,978), for Information Technology staff augmentation services through June 30, 2023.

- Cognizant Technology Solutions Contract Amendment for Continued Hosting Services for the QNXT and CCA Core Systems
  Motion FIN 104.1222
  To amend the existing contract with Cognizant Technology Solutions in the amount of $6,200,000 (total contract not to exceed $106,084,459), for continued hosting services for L.A. Care's Core Systems through December 31, 2023.

From the Supplemental Special Meeting Agenda, item 3.:

- Appointment of Agency Negotiator: Alvaro Ballesteros
  Motion BOG 104.1222
  To appoint Alvaro Ballesteros as the Agency Negotiator for L.A. Care Health Plan for all terms and conditions of employment for L.A. Care's Chief Executive Officer, effective January 1, 2023.

Board Member Booth requested that the Motions for approval of the November 3, 2022 Board of Governors Meeting Minutes, Gensler Contract and CEO Delegation of Amendments to L.A. Care's Medi-Cal Contract Number 04-36069 with the Department of Health Care Services be removed from the Consent Agenda for discussion.

Board Member Roybal indicated that he has a question on Motion BOG 103.

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	Augustavia Haydel, *General Counsel,* noted that the information was still coming in on the Medi-Cal Contract, and staff would like to propose a correction in the background description of the amendments, and one of the documents in the meeting materials is incorrect. 1. The Amendments should be described as Amendment 38, which includes Calendar Year 2022B, and does not include Calendar Year 2022C. This is a final version. The Amendment includes language related to Community Supports. 2. Two-Plan CCI Boilerplate Calendar Year 2022C is a draft version. The Amendment incorporated language related to interoperability, alternative format selections, waiver updates, no wrong door, CBAS special terms and conditions, updates and cognitive assessments. 3. Calendar Year 2023A Contract Amendment is a draft version. The Amendment incorporates language related to dyadic care, long term care, risk sharing mechanisms, MMCE Phase 2, and new and updated definitions. In the separate document described as Two Plan CCI 2022B, pages 207 to 223 in the meeting materials are erroneously included and should not be considered part of Motion BOG 103.1222. Board Member Booth commented that a lot of the things don't make a lot of sense to her and she would like to clarify some items. She found these items concerning: Page 4 of the document (page 59 of the meeting materials): it looks to her that everything about pharmacy contracts was taken out of the contract except provision V, 2.C.1., which indicates what the contractor is responsible and 2.C.2., which appears to contradict the previous statements. Ms. Haydel responded that it is the location of the administration of the physician-administered drugs. Alex Li, *Deputy Chief Medical Officer,* confirmed that is correct. Board Member Booth clarified that physician administered drugs would be in the hospital. Dr. Li noted that would include outpatient clinics as well and may include IV infusions and other things. He added that there are drugs that are prescribed in a community setting as well as in clinic/hospital settings. John Baackes, *Chief Executive Officer*, noted that the distinction is when a therapeutic is administered in the doctor's office by the doctor it is a medical expense and is not part of the pharmacy benefit. Everything else that is excluded is part of the pharmacy benefit which was carved out of the state contract and is administered by a third party vendor. These provisions segregate the financial responsibility for these services. Ms. Haydel clarified that prior authorization is by the health plan in the second case. Dr. Li offered to provide further information outside of the meeting.	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	Board Member Ghaly asked about the cover memo on page 56 of the meeting materials, where the member impact states that "all relevant business units have reviewed the draft amendments for member impact". She asked if member impact is anticipated and what the potential impact might be. Dr. Li asked to respond to her after the meeting. Board Member Booth asked about a sentence on page 9 of the document (page 64 of the meeting materials), item C.2. is not a complete sentence. Ms. Haydel indicated that the motion authorizes the CEO to negotiate changes to the contract, and that applies in situations such as this incomplete sentence. Board Member Booth thanked her and noted that she raises these issues in the Board Meeting so that others can hear the explanations. She can review her comments with Dr. Li and he can forward them to others as the contract is finalized. Board Member Mitchell commented that she is thrilled that the list of providers includes birthing centers and midwives in the scope of services. Beginning January 1, 2023, Medi-Cal benefits will include doulas. This is particularly important, because of the role that they play with Black women delivering, given the disproportionately high rates of Black maternal morbidity. She invited everyone to view the documentary, "Birthing Justice", which will premiere at *LA LIVE* on January 5, 2023 (for more information go to https://www.birthingjustice.com/). This highlights the role midwives and doulas play in addressing the strikingly high maternal morbidity rate. She hopes L.A. Care will be proactive in making sure that doulas become a part of the benefit plan. Mr. Baackes commented that the new benefit will include new education among members and participating providers to clarify the role of the doula and the opportunity it represents. L.A. Care accepts this as part of its responsibility and is endeavoring to do what is necessary. As with all the benefits that have been added, the ramp up time to get everyone in the ecosystem that touches it to be knowledgeable about it so it becomes second nature will probably take longer than we like. Dr. Li added that L.A. Care has an internal group to work through the contracting and community resources for this new benefit. It will take time to complete the contract negotiations and getting information out, but hopefully not too long. There is a meeting soon about this benefit with Los Angeles County provider sites. Board Member Mitchell encouraged the Regional Community Advisory Committees (RCAC) to lean in to this effort to help build demand for the services, which will encourage service providers to participate. She hopes the RCAC members will help educate L.A. Care members about the options for birthing centers, midwives and doulas for women experiencing higher risk pregnancies. These additional supports are wonderful and she	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	hopes to move the needle quickly to save lives. Mr. Baackes responded that RCAC members will have the opportunity to learn about their potential role in spreading information about these programs. The vast majority of the RCAC members are women, and this will be an issue that they will embrace. Board Member Mitchell noted that she has had conversations with RCAC leadership about health equity, and from her perspective this is a wonderful solution to challenges in health disparities and health equity. Board Member Mitchell acknowledged that this is her last Board Meeting. The leadership of the Board of Supervisors changes every December. She noted it has been a phenomenal two years on this Board. She supports Mr. Baackes and the work of L.A. Care. She will continue to engage on issues around access to health care services. She is just a phone call away. Her colleague, Hilda Solis, will be appointed to the Board of Governors. She thanked her former legislative colleague, Board Chairperson Hector De La Torre, and welcomed the new Chairperson, Al Ballesteros. She thanked all the Board Members for the privilege to serve with them. Mr. Baackes thanked her and he hopes she will call. Board Member Booth thanked Board Member Mitchell for her services. Chairperson De La Torre also thanked Board Member Mitchell for her service. She has been an amazing Board Member: always engaged, always giving her well thought-out insights and her constant concern for the community is always welcome. Board Member Roybal asked about physician administered medications. These are part of the pre-authorization process and are often the most expensive medications. He had hoped that the state would take advantage of its buying power to help manage those costs for all health plans. Dr. Li thanked Board Member Roybal for the question. Unfortunately, this is one of the quirks in the separation of the pharmacy benefits, where health plans are left with managing this cost. Board Member Roybal strongly encouraged working with the state and other health plans to work collaboratively to control the costs for these medication. Mr. Baackes responded that L.A. Care has an excellent pharmacy benefit manager (PBM) to help address this issue and there may be other collaborative arrangements L.A. Care can make through the PBM. Board Member Booth would like to add to her comments about Mr. Baackes' work to organize L.A. Care's objectives to support the main goals. On page 38 of the meeting materials, she would like to add remarks to the meeting minutes: There are multiple connections between a given tactic with the stated goals. The tactics listed under a single goal often drive several different goals and may even be a driving factor for goals listed under the other strategies.	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	The interrelationships and interdependence of tactics, goals and strategies makes it difficult to ascertain specific priorities, because health care is so complicated and L.A. Care has many projects, each with many tasks to complete. Additionally, externally established expectations are continually changing, increasing the overall number and complexity of projects. This way, work on one tactic necessarily aids the progress of one or more other tactic. It helps me to envision the whole of "Vision 2024" as a tapestry where each thread expresses the progress of one tactic toward meeting the defined goal. Each thread is important and necessary to the overall goals; and affects and supports the other threads as they form their part of the picture. The final tapestry represents achieving the L.A. Care mission. Ms. Haydel suggested that this will be included as a subsequent statement. Board Member Booth asked about what the Gensler contract entails. Mr. Baackes responded that this is a design project for the office space to accommodate the needs of L.A. Care's employees.	
CHAIRPERSON'S REPORT	Chairperson De La Torre thanked the board members for their support during his term as Chair. Through the craziness of the last few years due to the pandemic, L.A. Care is doing good work for its members, and enrollment has grown. He is proud of the growth and the scale of the health plan, in enrollment and in access to quality health care services for the members. L.A. Care is here to provide quality care. He will continue to serve on this Board proudly and he is proud to hand the gavel to Board Member Ballesteros. He encouraged the Board to continue to move in the right direction and continue to identify opportunities to serve the 2.5 million human beings as best as possible. Vice Chairperson Ballesteros thanked Chairperson De La Torre for his stewardship, his caring for the members and his diligence in commitment to the mission has been wonderful to see. He joins his colleagues in thanking Chairperson De La Torre for his hard work. Mr. Baackes thanked Chairperson De La Torre on behalf of the staff, for his exemplary partnership in achieving the mission of L.A. Care. Mr. Baackes presented a commemorative gavel as a memento. Board Member Booth thanked Chairperson De La Torre for modeling the role for her. His handling of the meetings has been beyond reproach, and he has done an excellent job.	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	Board Member Roybal thanked Chairperson De La Torre for his work throughout this very trying time. Chairperson De La Torre has shown great leadership and it is greatly appreciated. Board Member Perez echoed her fellow Board Members. She thinks of Chairperson De La Torre as respectful, understanding, knowledgeable, politically involved, community involved, and she appreciates that he is present at many of the community events and that he understands the communities that L.A. Care serves. Board Member Perez is honored to serve as the member representative, and on behalf of the membership, she thanked Chairperson De La Torre for his efforts in making sure members have access to quality health care services, regardless of ethnicity, religion, color, or anything. He is one of the Chairs that met individually with Board Members, which showed he is a true leader because he thought about the members of the Board. She commented that she looks up to Board Member Roybal. The first time she attended a Board meeting she felt that Board Member Roybal is smart and he cares, and she wanted to perform to his standards. Board Member Ghaly commented that Chairperson De La Torre is a natural Chair and has done so well in the role. He carried the Board through the COVID pandemic which was not easy. He did it so well, and was always a professional. He is a true advocate for the people of Los Angeles County. She thanked him for his service as Chair. Vice Chairperson Ballesteros noted that he will have big shoes to fill next year as Chairperson and he will do the best job he can. One of the first tasks is to assign Committee membership. He appreciates the hard work of every Board Member and he looks forward to a good year in 2023.	
CHIEF EXECUTIVE OFFICER REPORT	**PUBLIC COMMENT** **Submitted by Elizabeth Cooper, RCAC 2 Member, today at 12:28pm via voicemail:** *Mr Baackes I hope you and your staff have a happy holiday this season.* Mr. Baackes introduced Sameer Amin, MD, *Chief Medical Officer,* who assumes his duties on December 5, 2022. Dr. Amin thanked Mr. Baackes for the opportunity. He is extremely excited to be joining such a mission-driven organization that is so meaningful to the residents of this community. He is an interventional cardiologist by training, and his first thought was that he wanted to be in value-based care and provide better access and better quality for his patients. He started his career at Healthcare Partners, which eventually became Optum. He got into clinical leadership very early in his career, taking Medical Director positions in Specialty and in General Medicine. He moved on to CareMore, became Chief Medical Officer of Southern California and was promoted to Chief Medical Officer of the Western United States. His main goals were to help deliver care to the sickest of the sick, to those who are most vulnerable. The	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	CareMore mission was key to his path and his thinking as to what he wanted to do in his life. He wanted to become more involved in the Affordable Care Act and administration of services to the patients. Two years ago he joined Oscar as the Chief Medical Officer, and after meeting Mr. Baackes he was drawn to L.A. Care. He learned more about L.A. Care and the more than two million patients that it serves, the mission and the heart that L.A. Care has, and its meaning to the community. He jumped on the opportunity to join L.A. Care. He is excited and hopes this will be the beginning of a beautiful relationship and hopes to move care forward for the community. Mr. Baackes thanked him. L.A. Care is excited to have him join the facility. He will be a welcome addition. Mr. Baackes stated, for the record, that L.A. Care has 2,755,000 members, almost to 3 million. Mr. Baackes reported: • This is the last meeting of the calendar year, and the Chief Financial Officer will present financial results for the fiscal year ended September 30, 2022. He commented that going into the third year of the COVID pandemic and all of the challenges, L.A. Care had a solid performance. Many new members were enrolled. He feels L.A. Care is in a good position to meet the challenges coming in 2023. • L.A. Care will resume RCAC meetings in person in 2023 in a hybrid structure for in-person and virtual participation. The elections for the board representatives will be held. • Headwinds coming in 2023 include the resumption of the eligibility redeterminations for Medi-Cal beneficiaries. He assured the Board and public that L.A. Care realizes the enormous consequences of resuming redeterminations and the possibility of beneficiaries being dropped from the program if they are not able to complete the redetermination process. L.A. Care wants to make sure that every person who is still eligible for Medi-Cal benefits stays in the program and is able to receive those benefits. • L.A. Care has not received the rates for next year, which could be a challenge. • There will be additional enrollment in January 2023; L.A. Care expects about 100,000 new Medi-Cal members. • L.A. Care is preparing for events occurring January 2024: o Approximately 260,000 Kaiser members will leave L.A. Care o Approximately 140,000 newly-eligible for Medi-Cal are expected to enroll o The commercial plan in Los Angeles County may be changed from Health Net to Molina Health o A new Medi-Cal contract will bring new sanctions and added reporting requirements for delegated entities.	

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	• Enrollment is open now for the Dually-eligible Special Needs Plan and more than 1,000 new members have enrolled. The current members will automatically be enrolled in the new model on January 1 and no action is necessary. • L.A. Care Covered enrollment is ongoing since October. L.A. Care has the lowest price point in all the metal tiers. More than 6,000 new members have enrolled.	
• Grants and Sponsorship Report	Mr. Baackes referred Board Members to the written report included in the meeting materials.	
CHIEF MEDICAL OFFICER REPORT	Dr. Li expressed that Dr. Seidman sends his farewell and best wishes as he was unable to attend this meeting. He loves L.A. Care and its mission, he enjoyed working with everyone on the Board and the L.A. Care team. Dr. Li referred to the written report included in the meeting materials, which highlights activities at L.A. Care and external events. He encouraged everyone to keep vaccinations up to date. L.A. Care did relatively well with the Healthcare Effectiveness Data Information Set (HEDIS) survey, reaching the Medicaid 50th percentile benchmark for most measures. For two measures, due to impacts of the pandemic, the benchmark was not reached. L.A. Care will work on interventions for next year to address those shortcomings. L.A. Care continues to work with community partners on programs to improve care and access for members and in addressing other activities for health information exchange. These areas are important to continue efforts to support providers and build infrastructure to help with care coordination and communication of health information. Finally, L.A. Care continues to be a health plan that is innovative in serving members through virtual care and improving member engagement and fostering quality improvement. Board Member Booth asked about the total number of members requiring the homeless services. Dr. Li indicated that the people enrolled have met the eligibility for the program and L.A. Care does not have the number of others who may not yet be enrolled. Mr. Baackes noted that there have been estimates as high as 7% of the potential membership for Enhanced Care Management. It is clear there may be more who could benefit from these programs. It will take some time for members to enroll. The new program is also a challenge for new service providers. The program is likely to grow over the next two to three years as members and providers become more familiar. Chairperson De La Torre acknowledged that Board Member Mitchell may have comments or questions for this item, and discussion will resume before the end of this meeting (*see page 15*).	

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ADVISORY COMMITTEE REPORTS		
Executive Community Advisory Committee (ECAC)	**PUBLIC COMMENT** **Submitted by Andria McFerson, RCAC 6 Chair, today at 2:13pm via Email:** *Hello, Welcome to our new BOG chair thank you for your service, we look forward to our BOARD OF GOVERNORS making necessary decisions in order to adhere to the medical necessities of the people who are low-income residents of LA County and are suffering. This comment consist of the previous items along with Item 8 because we are not able to participate in real time I had missed opportunities to speak about the items on the agenda today after the agenda item is called and we only get seconds to make our comments with no participation of the decision making process after that item is explained. Also Chair can you please discuss this with the Board and instruct staff to post the co-chairs of ECAC on the LA Care website? The Executive Community Advisory Committee consists of fellow LA Care Members including myself who are stakeholders, throughout this County, we have been here for a surmountable amount of years and while representing no one but the public residents throughout LA county's 11 regions we are the only party whose not posted on the website. While being elected to these seats the chairs give information from the public about successful healthcare and the health disparities which are both life saving. So it is important to know the name of the person who speaks out and represents you and your region please post the committee chairs on the website. Please let me know if you have any further questions or concerns.* *Topic 2: We need to have a BLACK HISTORY Month event as well and unfortunately it seems as though the decisions about our own budget is made by staff. How can an official planning from the committee Stakeholders' be beneficial if we can't we get together and speak as a team to plan that event?* *Topic 3: Now we have been told that some RCAC members who have not received a COVID 19 shot are not allowed to be a committee member anymore. How can the RCAC members still help educate members of the public to different available resources and inform the board about health disparities if they're not allowed to cohesively attend a virtual meeting just like right now at this BOG meeting? Please work on a better solution because I received a lot of complaints from RCAC members who really want to participate and have been advocating for better healthcare and LA Care for over 10 years but they can no longer participate please allow the RCAC's to meet virtually as well as in person because our low-income community's health conditions are just as important as everyone else if they cannot*	

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	receive the vaccination. We deserve to have a voice whether we can meet in person or not with stipends as well *(three minutes expired, comments continue at the end of these minutes.)* Chairperson De La Torre noted that the meeting Agenda is posted well ahead of the meeting with all the topics listed. The chat is open through the entire meeting. There is plenty of time available for comments to be submitted. It is made clear at the beginning of every meeting that the public comment will be read before Board consideration. The process is not going to change. If one wishes to make a comment, he invited comments through the options available for public comment. There is plenty of lead time. All comments are welcome, and must be made timely. Chairperson De La Torre also noted that with regard to vaccination, L.A. Care is a health organization. Employees were dismissed because they were not vaccinated. This will not be changed. Vaccination in a health organization and many people with preexisting conditions who can be severely harmed or killed by this disease. L.A. Care will not risk exposing them to the disease. People are welcome to not be vaccinated but they cannot come into a setting that L.A. Care controls. That is a personal choice. L.A. Care has 2.7 million members, many with medical conditions, and L.A. Care has determined they will not be exposed to disease. Board Member Perez noted that the RCAC 6 *Field Specialist*, Frank Mesa, sent information about the board meeting on November 29, including how to participate in the meeting and how to make a public comment. She thanked L.A. Care for listening to her suggestion that the Children's Health Consultant Advisory Committee Chairperson, Tara Ficek, join the meeting. She thanked Ms. Ficek for joining the meeting. She thanked everyone listening to the Board meeting today and to the RCAC and ECAC members and public that were able to attend in person today. She appreciates your attendance and welcomes your comments, suggestions and questions. ECAC met on November 9, and the approved minutes can be obtained by contacting Community Outreach & Engagement staff. • Dr. Li spoke about L.A. Care's new Chief Medical Officer, Dr. Sameer Amin. He also spoke about how you can protect yourself and your family during the upcoming flu season and continued COVID-19 outbreaks. The number of flu cases dropped during the public health emergency over the last two years because people were wearing masks. It is very important to stay safe and to get your flu shot. It is also important to keep current on all vaccinations for you and your loved ones. She thanked L.A. Care for continuing to offer flu and COVID vaccinations and boosters at the Community Resource Centers (CRCs).	

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	Events at the CRCs include distributing food, diapers, coats, dish soap and detergent to community members. She thanked volunteers and staff for their hard work and dedication. • Dr. Eakins spoke about: o Community Resource Center events and activities o RCAC members began check-in meetings in person starting in November o ECAC will continue to meet virtually through February o Information on Suicide Prevention and Awareness will be presented at the January ECAC. o Disability Awareness month is in March. CO&E staff will keep you posted as we plan these events. • Dr. Eakins and Ms. Merkens discussed the ECAC Consumer and Consumer Advocate 2023 nomination and election process. Committee members had the opportunity to ask questions about the application and the tentative timeline for the election. Anyone with questions about the process can contact Dr. Eakins. • Ms. Martinez reviewed L.A. Care Preventative Health Guidelines brochures and members had an opportunity to provide input and feedback, and learned how they can be more effective in helping members learn tips on staying healthy. Board Member Perez thanked Supervisor Mitchell for attending the Inglewood CRC back to school event. She appreciates the Supervisor's respectful way of approaching the community and understanding their needs. Board Member Perez looks forward to continue sharing ideas, projects, because RCAC members are eager to participate and engage community members in projects that help them make more informed decisions about health.	
Chief Medical Officer Report (*continued*)	Board Member Mitchell asked about the quality improvement overview, and that L.A. Care did not meet performance levels for children 30 months or younger. She asked about the cause for the poor performance and if L.A. Care plans to improve the performance. Dr. Li thanked her for the question. He noted that all health plans are judged against a national Medicaid percentile. On one hand, there can be some onus on the pandemic. Moving forward, L.A. Care will be working on communication with members and providers about improving performance for these measures. It is a major concern among all health care providers, as children are very important. Providers and health plans are working on catching up with vaccination rates for children. Board Member Mitchell asked about timing for improvements in these measures. Dr. Li noted that the benchmarks will move over time, L.A. Care will improve in these areas and so will other health plans. Historically, California has done a great job with access and availability, but the number of providers available for Medi-Cal beneficiaries is tighter than for members of	

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	commercial health coverage plans. It is important to encourage Medi-Cal members to get preventive services at the most available site. The main constraint is a lack of primary care providers. Mr. Baackes noted that L.A. Care's overall measures for reporting year 2021 improved over the prior year. He has seen similar scores from other Medi-Cal plans in California. He believes that 2022 will show continued improvement as we move away from the pandemic. He noted that this measure has been included in the survey for many years, and has been consistently low. L.A. Care has seen significant improvement in this measure over the years. Board Member Mitchell thanked L.A. Care for the implicit bias training for health providers which was jointly held with Health Net. Dr. Li noted that there were well over 200 participants in the training session, which was well-received in the community. Chairperson De La Torre provided information from an audit report released on September 13, 2022 (see https://www.auditor.ca.gov/reports/2022-502/index.html): • Approximately half of California's children receive medical care through the California Medical Assistance Program (Medi-Cal). • Nearly all of these 5.5 million children receive care through managed health care plans (health plans) to which California pays a monthly premium for each enrolled child. • However, in analyzing data for nearly the past decade, the state auditor determined that less than 50 percent of the children in Medi-Cal have received the required preventive services that would help ensure that they live healthier, more productive lives. Chairperson De La Torre noted that this was a follow up to a report released in 2019 regarding the Department of Health Care Services' (DHCS) oversight of the delivery of preventive services to children in Medi-Cal. It was determined that DHCS made some progress implementing that audit's recommendations, but it has yet to fully implement eight of the 14 recommendations that were made in the prior audit, and many of DHCS's efforts to improve its oversight were placed on hold during the COVID-19 pandemic. He noted there was no movement on the part of DHCS statewide on this measure. L.A. Care can't control what other plans are doing but it can improve its programs and outperform the statewide statistics.	
Children's Health Consultant Advisory Committee	Tara Ficek, *Committee Chairperson*, reported that the members of the Children's Health Consultant Advisory Committee met on November 15 (*minutes can be obtained by contacting Board Services).* • Dr. Seidman presented the November 2022 Chief Medical Officer report.	

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	• This was Dr. Seidman's last meeting. The committee acknowledged his many accomplishments, shared their appreciation for his guidance and support, and offered well wishes in his next phase. • Laura Gunn gave a report about Child and Adolescent Health, *Get Back to Care* Interventions. She spoke about L.A. Care's current well care visits and interventions that L.A. Care is implementing to increase well-child visits. The 2022 Get Back to Care interventions are automated call scripts, social media posts, and postcards. Ms. Gunn asked for feedback and suggestions. Feedback focused on sharing information via text for easy access and preferred use among members. • Phinney Ahn gave a report about Medi-Cal Redeterminations, Community Health Workers, and Doula Benefit Update. Regarding Medi-Cal redetermination, emphasis was on efforts underway to ensure members maintain enrollment, given renewal requirements will shift once the public health emergency ends (projected in January 2023). Wanting to ensure continuous coverage for eligible members, opportunity exists for collaboration between states, counties and managed care plans. L.A. Care is working closely with L.A. County Department of Public Social Services, also developing a provider toolkit and supporting multiple member outreach and support activities to avoid disruption in coverage. Doula services will be added as a Medi-Cal preventive service starting January 1, 2023. Doula services have shown to improve the maternal experience, reduce disparities, reduce maternal and infant mortality, low birth weight babies, and improve the entire perinatal experience from and postpartum care. A lot of the discussion focused on building awareness and knowledge of the new doula benefit. • Cynthia Carmona gave an update on CalAIM Enhanced Care Management (ECM) and Community Supports initiatives. ECM will be available to seven defined Populations of Focus, one of which is specific to children and youth, which will begin in July 2023. Managed Care Plans can offer Community Supports, including but not limited to, housing navigation, medically tailored meals, respite services, and asthma remediation; as cost-effective alternatives to services that can be covered under the Medi-Cal State Plan. Providers serving patients with complex social risk factors, such as food insecurity or homelessness will be able to offer a menu of social supports provided by experienced community-based organizations as part of patient-integrated whole person care. Both ECM and Community Supports provide important partnership opportunities for L.A. Care to work more closely with community based organizations to better serve and support our members to meet medical and social needs. Mr. Baackes commented that it is great to have Ms. Ficek report to the Board and he thanked her for participating.	

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BOARD COMMITTEE REPORTS		
Executive Committee	Chairperson De La Torre reported that the Executive Committee met on November 15 (*approved meeting minutes can be obtained by contacting Board Services and will be available on the website).*	
• Government Affairs Update	Cherie Compartore, *Senior Director, Government Affairs,* reported: • Governor Newsom called the legislature back for a special session starting December 5, the same day new members of the legislature take the oath of office. The purpose of the special session is to apply taxes to windfall profits that are earned by the oil and gas industry over the past year. The oil and gas industry is blaming a surge in gas prices on an increase in oil prices, while the industry is reporting record high profits. Governor Newsom has not unveiled his detailed plan for the legislature on how the tax would work, what the amounts would be or what the revenue would be. It is interesting because a Special Sessions is intended as a one-subject session, so only the tax should be considered. Sometimes other issues become loosely involved. *(Board Member Mitchell left the meeting.)* • The Legislative Analyst Office reported that state revenues are likely to be far less than the Governor had anticipated in the 2022-23 Budget. A $25 billion loss is projected for the 2023-24 Budget. If the state economy goes into recession the deficit could be higher, estimated at $30-$50 billion. There is no discussion yet if the Governor's January draft budget plan will contain cuts in programs or services. State Legislative Committee meetings will begin in a few weeks and staff will report at a future meeting. • Congress has returned to Washington, D.C. to finish outstanding business. A new Congress will begin on January 3, 2023. Democrats will lose the majority in the House of Representatives in 2023. • The continuing 2023 budget resolution will expire December 16. It is unclear if a full budget will be considered or if the continuing resolution will be extended. There is a cut to Medicare providers which also may be addressed. • California Department of Health Care Services has begun accepting applications for the Hospital and Skilled Nursing Facility COVID-19 Worker Retention Payments. These payments are the result of legislation enacted on June 30, 2022 and many workers and physicians in qualifying facilities will be eligible to receive a retention payment if they: o Were employed at least part-time during the qualifying work period of July 30, 2022 through October 28, 2022.	

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	○ Are independent physicians or physicians that are part of Physician Group Entities (PGEs) who provided onsite services during the same qualifying work period of July 30, 2022 through October 28, 2022. ○ Are employed by Covered Entities (CEs) or Covered Services Employers (CSEs) or who is a physician who continues to provide onsite services as of the date of record, November 28, 2022. • The deadline for applying is December 22, 2022. L.A. Care is communicating with providers to build awareness of this program. Board Member Booth asked about the State legislature Special Session. Ms. Compartore indicated that there will be discussion on proposals for applying the revenue. L.A. Care will participate in the discussions.	
• Employee Annual Incentive Program FY 2021-22	Mr. Baackes reported that L.A. Care offers employees an incentive program that comes in two parts: 40% of the potential incentive payment is based on achievement of individual goals agreed on by the employee and a direct supervisor, and 60% is based on achievement of enterprise goals. L.A. Care met 85% of the enterprise goals. It is recommended that the Board authorize payment of the 2021-22 incentive. Terry Brown, *Chief of Human Resources Officer*, noted that the budget included payment of the incentives. This request is for authorization to payout for the Annual Incentives Program, not to exceed $7.7 million. Board Member Ballesteros asked if the incentive is paid to the entire workforce. Mr. Brown responded that employees receiving "does not meet" on the annual performance evaluation and employees who joined after June 30, 2022 are not eligible to receive the incentive. **<u>Motion EXE 102.1222</u>** **To authorize the disbursement of funds not to exceed $7.7 million for the Individual Annual Incentive Program, based on the completion of pre-determined individual goals and targets in support of L.A. Care's FY 2021-2022 Organizational Goals. Distribution of the annual incentive payout shall be guided by Human Resource Policy No. 602, (Annual Organizational Incentive Program).**	**Unanimously approved by roll call. 8 AYES (Ballesteros, Booth, De La Torre, Ghaly, Perez, Raffoul, Roybal and Vaccaro)**
Finance & Budget Committee	Chairperson De La Torre reported that the Finance & Budget Committee met on November 15. *(approved meeting minutes can be obtained by contacting Board Services and are available on the website).* • The Committee reviewed and approved motions at that meeting that were approved earlier today on the Consent Agenda. • The Committee reviewed and approved a contract amendment with Resources Global Professionals, which does not require full Board approval.	

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Chief Financial Officer Report	*(Board Member Gonzalez joined the meeting.)* Marie Montgomery, *Chief Financial Officer,* presented Financial Reports for September 2022 *(a copy of the presentation can be requested by contacting Board Services).* <u>Membership</u> The September membership was 2,719,197, which is 9,349 unfavorable to the forecast, and 30,500 unfavorable year-to-date (YTD). The unfavorability is mainly due to two reasons, 1) a Plan Partner that terminated two provider group contracts that resulted in approximately 41,000 members moving from Plan Partners to MCLA for continuity of care and 2) a lower than forecasted member transfer of 5,000 members L.A. Care Covered (LACC) membership dropped to just over 112,000, unfavorable to the forecast by 2,500 members. Board Member Booth asked how L.A. Care will track members receiving transplants. Ms. Montgomery responded that those members will be included in their aid category and a separate analysis will be conducted to understand the cost. The transplant cost is covered through a risk corridor, but pre- and post-transplant care will be incurred and tracked separately by L.A. Care. Afzal Shah, *Deputy Chief Financial Officer*, reported that L.A. Care is seeing financial risk related to the cost for pre- and post-transplant care and is communicating with regulators about the expenses. <u>Consolidated Financial Performance</u> The net surplus for September was $20 million; $20 million favorable to the forecast, expected to be at break-even. The operating margin was favorable to the forecast by $18 million, driven by a true-up to the capitation deduct of $54 million, retroactive to October 2019. Mitigating this favorability is the impact of a reduction of $23 million for a Risk Adjustment Factor (RAF) adjustment for LACC. An update was received that L.A. Care's RAF score decreased from 0.75 to 0.67. Staff is looking at ways to improve the RAF with the time left in the calendar year. There was also an adjustment to the Proposition 56 risk corridor for CY 2021 and 2022 of -$14 million, which resulted in a decrease in revenue of $251 million and a decrease in healthcare costs of $237 million. With this latest estimate, the payable to providers for Prop 56 payments will be an estimated risk corridor payable to the Department of Health Care Services (DHCS). Community Based Adult Services (CBAS) continues its favorable trend at $5 million. Administrative expense was favorable $1.6 million to the forecast due to lower spending in salaries and benefits driven by open positions. Non-operating was favorable $854,000 vs the forecast due to timing in grant spending, lower CRC expenses and higher interest income; offset by unrealized losses.	

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	YTD net surplus was $38 million, which is $13 million favorable to the forecast. The YTD variances were very similar to the variances for the month. The large variances in both revenue and healthcare costs were due to the Prop 56 adjustments. The operating margin was unfavorable to the forecast by $14 million driven primarily by incurred fee for service claims, which are unfavorable to the forecast by $44 million due to higher institutional claims driven by higher institutional membership (which means higher revenue), higher transportation expense and higher COVID 19 testing expense due to SB 510. These were mitigated by the favorable items in September including CBAS favorability of $14 million YTD. Administrative expense YTD was favorable $9.2 million to the forecast due to lower spending in salaries and benefits, which was driven by open positions. Non-operating is favorable $18M vs the forecast driven by timing of grant spending, lower CRC expenses, higher interest income; but offset by our unrealized losses. <u>Variances Budget vs Actuals</u> Ms. Montgomery summarized the variances from the projected net surplus of $91 million to the final net surplus of $38 million. It is interesting to note that the operating margin on revenue of $9 billion, is close to the original budget. The most significant is $175 million related to incurred claims, net of collected claims activity, higher number of institutional members (which also means higher revenue and claims), and COVID-19 testing costs driven by SB 510. The Proposition 56 risk corridor reconciliation update of $29 million unfavorable and the updates to the RAF for LACC resulting in $49 million unfavorable and the full year CBAS of $56 million unfavorable. The budget assumed that the public health emergency would end earlier and L.A. Care would see a lower claims level. The administrative expenses were $57 million unfavorable to the budget, which includes the $55 million regulatory fine. Non-Operating expense was $5 million favorable. There was $38 million in unrealized losses for the fiscal year due to the rising interest rate environment and not credit quality deterioration. Mr. Baackes noted that the $55 million fine is included as a contingent liability and the fine has not been paid pending the results of a dispute resolution process underway that may result in a lower fine amount. <u>Operating Margin</u> • Overall Medical Cost Ratio (MCR) is equal to the forecast of 93.4% • Commercial MCR is higher than the forecast due to the PASC Pharmacy cap deduct true-up but partially offset by LACC RAF risk score adjustment from 0.76 to 0.67.	

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	Reported vs Paid Claims Trend • The reserve is $782 million, within one percent of the estimate from our external auditors. • Actuarial team has done a great job in dealing with the uncertainty. • The higher paid claims, a much lower claims inventory level, and the corrected claims process introduces more uncertainty for the reserve position. Mr. Baackes noted that L.A. Care is paying claims more quickly compared to past performance, which is an important message for L.A. Care's provider stakeholders. Ms. Montgomery noted that the new processes and efficiency adjustments have sped up claims payment and the claims inventory is less than half compared to historical levels. Mr. Baackes noted that claims are being paid timely, even as there are small disputes in the amount paid to providers. • As in prior years, a goal is to issue the financial statements before the end of the year. Key Financial Ratios • The Medical Care Ratio is 93.4%. • The administrative ratio was 5.7%, higher than the forecast of 5.6%. • Working Capital and Tangible Net Equity are ahead of benchmarks. • Cash to claims is below the benchmark and will recover when the IHSS balances are settled with DHCS. Tangible Net Equity and Days of Cash on-Hand The September 2022 Fund Balance was $1.09 billion, which represents 525% of Tangible Net Equity. A target level of 600% was set based on the average of eight Local Initiatives and County Organized Health Systems. **Motion FIN 105.1222** **To accept the Financial Reports for September 2022 as submitted.**	**Unanimously approved by roll call. 9 AYES (Ballesteros, Booth, De La Torre, Ghaly, Gonzalez, Perez, Raffoul, Roybal and Vaccaro)**
• Monthly Investments Transactions Report	Ms. Montgomery referred to the investment transactions reports included in the meeting materials. (*A copy of the report can be obtained by contacting Board Services).* This report is provided to comply with the California Government Code and is presented as an informational item. L.A. Care's total investment market value as of September 30, 2022 was $2.3 billion. • $1.96 billion managed by Payden & Rygel and New England Asset Management (NEAM) • $73 million in Local Agency Investment Fund • $255 million in Los Angeles County Pooled Investment Fund	
• Quarterly & Annual Reports Required by Internal Policy	Ms. Montgomery referred to the expenditure reports pursuant to internal policies which are included in the meeting materials. The reports relate to business travel and non-travel related	

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	expenses and authorization and approval policies and purchases over $250,000, and sole source purchases over $250,000.	
• Board Designated Funds	Ms. Montgomery reported that there were $105 million in Board Designated Funds. The bulk is related to the Elevating the Safety Net programs, and within the Community Health Investment Fund. The Community Resource Center maintenance and expansion category has $22 million in designated funds. Ms. Montgomery provided additional information on operating and capital expenses for the CRCs. Board Member Booth asked about the Community Health Worker program. Mr. Baackes indicated that it is included as an element of the Elevating the Safety Net program.	
Compliance & Quality Committee	**PUBLIC COMMENT** **Submitted today at 2:54pm via email by Andria McFerson, RCAC 6 Chair:** *Hello again my name is Andria McFerson Chair of Region 6 of the Executive Community Advisory Committee I requested by myself several times on record at previous public meetings for the public and the committee members, that all applied linguistics during our meetings be within a reasonable amount of time and also be recognizable to the general Public by breaking things down in layman's terms so that we may understand. In order to fathom how dire the information given to the public is and how it relates to them we need to cohesively discuss these topics. This would include the disabled and seniors and many other populations who may be affected by misunderstandings of the Life changing healthcare decisions made by the board. Life saving details need to have a broader level of understanding and easily show those listening how it generally relates to them. I believe that's what the whole stakeholder population with benefit from in order to express how their lives are affected and clear up misunderstandings that low income people go through showing real empathy towards the community that are undiagnosed, under diagnosed, misdiagnosed so you have to self diagnose before going to the doctor in order to have a proper diagnosis we need better information regarding our coverage and health conditions. I feel that proper communication effecting the low-income populations has not been practiced during recent and many prior RCAC/ECAC meetings. For example; there could be simpler communication with a brief synopsis from each presenter during our own public meetings or speaker at our public meetings on how the new changes and law's pertaining to our coverage could positively effect LA County residents in regards to improve LA Care's Health Plan which make more people engage in better preventive measures I don't understand what the disconnection is the planning meetings. The efforts of the Stakeholder*	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	meetings on how the decisions made from the BOG usually the Stakeholders are given word about the plan and give our word of the best decision. We are left out of major decisions help that safe out own lives. Where is the community input before major decisions I have grave concerns on this whole new process and you can say it due to COVID 19 but, wouldn't that be when (*three minutes expired, remaining comments are included at the end of these Minutes*) The Compliance & Quality Committee met on November 17 (*approved meeting minutes can be obtained by contacting Board Services and will be available on the website).* • Mr. Mapp and Compliance Department staff reported: o 2022 Internal Audit Update: DHCS issued a Notice of Deficiency to L.A. Care on May 11, 2020, after finding L.A. Care to be non-compliant with the requirements for provider terminations notifications and requested Corrective Action Plans submission within 30 days of the notice for St. Vincent Medical Center, Lyon's Pharmacy Benefit Management Navitas Network, Dr. Vigen Zarganian, and Dr. Nancy Ekeke. The review identified four issues from two of the corrective action plans which are still open. Dr. Nancy Ekeke's corrective action plan was effectively closed because the review confirmed that it was implemented accurately, timely, and completely. o The 2022 Issue Inventory is being updated and going through a clean-up process. Compliance will be updating the Issues log related to outcomes from Corrective Action Plans reviews from Internal Audit and will give an update at the next Compliance & Quality committee meeting, following a risk assessment survey and interviews. Recommendations about risks to monitor are obtained from many different sources. • Dr. Seidman presented the November & December Chief Medical Officer report. He spoke briefly about COVID-19 and the rise in cases of Respiratory Syncytial Virus (RSV). RSV can cause serious illness in young children and may require hospitalization. He noted that Orange County has declared a public health emergency due to the overwhelming demand on hospitals and emergency rooms. As part of his Quality Improvement overview, he reported that DHCS released their Quality Improvement Activities and Submission requirements for 2022-23. L.A. Care met the minimum performance level, set at the 50th percentile of the national Medicaid average, on 12 of the 15 Managed Care Accountability Set (MCAS) measures. L.A. Care did not meet the minimum performance level on the well care visits for children under 30 months of age and Immunization measures (CIS-10). This was mentioned earlier today. Part of the problem is that the measure requires previous activities that patients may not have completed timely, so subsequent activities will also not meet the standard for the measurement. Based on our performance, L.A. Care will be	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	required to conduct two Performance Improvement Projects, two *Plan Do Study Act* or one *Strengths Weaknesses Opportunities and Threats* (SWOT) analysis. Despite meeting the minimum performance levels for the majority of the measures, DHCS policy enables the Department to issue monetary sanctions for Plans not meeting the minimum performance level for all measures. To date, L.A. Care has not been informed whether the Department intends to impose any monetary sanctions on L.A. Care. • Elaine Sadocchi-Smith presented information about California Advancing and Innovating Medi-Cal (CalAIM) Population Health Management Transitional Care Services. o Implementation will begin January 1, 2023. Health Plans must develop and execute a plan to ramp up transitional care services and ensure that all Transitional Care Services are complete for all high risk and complex care members. o DHCS is allowing a phased in approach, so that by January, 2024 health plans are required to complete transitional care services for all members. This is including, but not limited to, discharges from hospitals, institutions, other acute care facilities, and skilled nursing facilities, to home or community-based settings, community supports programs, post-acute care facilities, or long-term care settings. • Linda Carberry gave a presentation about L.A. Care's 2022 Member Experience Survey Goals. Through the survey L.A. Care aims to gain: o Actionable feedback to help improve member experience o Reach and maintain a four star rating o Connect members with the care they need when they need it, that includes medication and informational resources o Response Rates for children CAHPS survey: ➢ 4956 members received the survey, 717 completed it ➢ Response rate: 14.61% o Response Rates for adults: ➢ 4,059 members received the survey, 537 completed it ➢ Response rate: 13.48% o NCQA Results for 2022: ➢ Children's rating for L.A. Care was 86.88% ➢ Adults rating for L.A. Care was 72.4% o L.A. Care's STARS reportable rates either stayed the same or improved in 2022 for all measures Board Member Booth commented that Population Health management transitional care is required for all L.A. Care patients leaving a system and going to another or going home; she is	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	concerned that there is a lack of funding to support the services that are required. It should help some patients but she feels that a great majority of patients may find it to be a nuisance. Mr. Baackes responded that he agrees with her and L.A. Care is preparing to discuss this further. It is typical of new rules in recent years that do not seem to be realistic, and this may be due to a lack of street level experience among regulatory representatives. It is another burden for health plans and will be subject to sanctions against health plans.	
PUBLIC COMMENT on Closed Session Items	**Submitted by Demetria Saffore, today at 1:53pm via text:** *This is a public comment for th BOG Meeting. I don't understand why we come together every month to discuss the members issues to only have them ignored and things are getting worse. There's a member who was hospitalized at Palmdale Regional Medical Center and he is a victim of patient dumping, the young man is not in a state of mind to make his own medical decisions; so his Mother does that for him, so the hospital sent him to Las Vegas because they claimed that they didn't have a Ear Nose and Throat doctor to see him. I think you all need to provide care for us in our community where we live; we shouldn't have to go out of state to get health care.* *Demetria Saffore*	
ADJOURN TO CLOSED SESSION	The Joint Powers Authority Board of Directors meeting adjourned at 3:42 pm. Augustavia J. Haydel, Esq., *General Counsel,* announced the following items to be discussed in closed session. The L.A. Care Board of Governors adjourned to closed session at 3:42 pm. No report is anticipated from the closed session. CONTRACT RATES Pursuant to Welfare and Institutions Code Section 14087.38(m) • Plan Partner Rates • Provider Rates • DHCS Rates 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: *December 2024* CONFERENCE WITH LEGAL COUNSEL—EXISTING LITIGATION Pursuant to Section 54956.9(d)(1) of the Ralph M. Brown Act L.A. Care Health Plan's Notice of Contract Dispute under Contract No. 04-36069 Department of Health Care Services (Case No. Unavailable) L.A. Care Health Plan v. United States, (U.S. Court of Federal Claims Case No. 17-1542); (U.S. Court of Appeals for the Federal Circuit Case No. 20-2254)	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	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 CONFERENCE WITH LEGAL COUNSEL—EXISTING LITIGATION Pursuant to Section 54956.9(d)(1) of the Ralph M. Brown Act HRRP Garland, LLC v. Local Initiative Health Authority for Los Angeles County L.A.S.C. Case No. 21STCV47250 CONFERENCE WITH LEGAL COUNSEL—EXISTING LITIGATION Pursuant to Section 54956.9(d)(1) of the Ralph M. Brown Act • Department of Managed Health Care Enforcement Matter Numbers: 18-799, 20-063, 21-428, 21-509, 21-680 • Department of Health Care Services, Office of Administrative Hearings and Appeals, In the matter of: L.A. Care Health Care Plan Appeal No. MCP22-0322-559-MF	
RECONVENE IN OPEN SESSION	The Board reconvened in open session at 4:50 p.m. There was no report from closed session.	
ADJOURNMENT	The meeting adjourned at 4:52 p.m.	

Respectfully submitted by:
Linda Merkens, *Senior Manager, Board Services*
Malou Balones, *Board Specialist III*
Victor Rodriguez, *Board Specialist II*

APPROVED BY:

_____
Stephanie Booth, MD, *Board Secretary*
Date Signed _____

Public comment:

Submitted today at 2:13pm via email by Andria McFerson, RCAC 6 Chair:
(*continued from page 13, above)*
or food gift cards like the stipends mentioned today in item #4 thank you so much to all of our BOG Chairs and happy holidays.

Submitted today at 2:54pm via email by Andria McFerson, RCAC 6 Chair:
(*continued from page 23, above)*
input about our health conditions are needed the most?
Other topics like equity, or lack there of, in our own communities and how it affects our mental sustainability and our general health is important. What needs to be decided is not if we've received the meeting notes what needs to be decided is if we as Stakeholders' are involved in the decision making even if we don't have the resources that you have as a chair.
Thanks again Merry Christmas and Happy New year.
Andria McFerson

Board of Governors
MOTION SUMMARY

Date: February 2, 2023 **Motion No. BOG 101.0223**

Committee: **Chairperson:** Al Ballesteros, MBA

Issue: Request ratification of execution by L.A. Care Chief Executive Officer, John Baackes, of the Department of Managed Health Care (DHCS) contracts listed below.

☐ **New Contract** ☒ **Amendment** ☐ **Sole Source** ☐ **RFP/RFQ was conducted**

Background: L.A. Care received the following Amendment and Contract from DHCS in December 2022, with the request that the Plan execute them on a shortened schedule, prior to the date of the next Board of Governors meeting; therefore, L.A. Care executed and submitted the contract documents to DHCS. L.A. Care informed DHCS that the execution was contingent upon Board approval; for that reason, staff is seeking ratification of the following:

(1) DHCS "Secondary" Contract 22-20466 (which is a companion to Medi-Cal Contract 04-36069 ("Primary Contract"), to cover specific Medi-Cal State-Supported Services to the Plan's Members enrolled under Contractor's Primary Contract, including Unsatisfactory Immigration Status members).
(2) DHCS DSNP Contract 22-20236 A02 (consists of updates to Exhibits A and E).

Member Impact: Member impact is being assessed.

Budget Impact: Budget impact is being assessed and will be reflected in the organization's financial records.

Motion: **To ratify execution by L.A. Care Chief Executive Officer, John Baackes, of the following: DHCS "Secondary" Contract 22-20466; and Amendment 2 to DHCS DSNP Contract 22-20236.**

EXHIBIT A
Scope of Work

1. Service Overview

This is a companion to Contractor's Medi-Cal Managed Care Health Plan Contract 04-36069, hereafter referred to as the "Primary Contract", to cover specific Medi-Cal State-Supported Services to Contractor's Members enrolled under Contractor's Primary Contract.

A. All Covered Services as defined in Contractor's Primary Contract will be provided to Unsatisfactory Immigration Status (UIS) Members in the same manner and subject to the same requirements as described in the Primary Contract, except as described in this Contract.

B. Private Services described in Exhibit A, Provision 4, Paragraph A must be provided in the same manner as described in the Primary Contract under Exhibit A, Attachment 9, Access and Availability.

C. Contractor must provide services and interact with UIS Members on an equal basis as with Members covered under the Primary Contract. Contractor, including but not limited to Contractor's Network Providers and Subcontractors are required to cover and provide services to UIS Members in a manner that is indistinguishable from the rest of Contractor's Members covered under the Primary Contract.

2. Service Location

The Service Area covered under this Contract between Department of Health Care Services (DHCS) and Contractor is the same as specified in the Primary Contract.

3. Project Representatives

A. The Contract representatives during the term of this Contract will be:

Department of Health Care Services	**L.A. Care Health Plan**
Managed Care Operations Division Attention: Chief, Procurement and Contract Development Branch Telephone: (916) 449-5000 Fax: (916) 449-5090	Attention: Surah Alsawaf, Compliance Advisor III Telephone: (213) 503-1454 ext 7259 Fax: (213) 438-5725

EXHIBIT A
Scope of Work

B. Direct all inquiries to:

Department of Health Care Services	**L.A. Care Health Plan**
Managed Care Operations Division	
Attention: Contracting Officer	Attention: John Baackes, CEO
1501 Capitol Avenue, Suite 71.4001	1055 W 7th Street, 10th floor.
Mail Stop 4408	Los Angeles, CA 90017
P.O. Box 997413	
Sacramento, CA 95899-7413	
Telephone: (916) 449-5000	Telephone: (213) 694-1250 ext 4151
Fax: (916) 449-5090	Fax: (213) 438-5725

C. Either party may make changes to the information above by giving written notice to the other party. Said changes shall not require an amendment to this Contract.

4. All State-Supported Services to be Performed

A. Contractor agrees to provide, or arrange to provide, to eligible Members enrolled under either this Contract or the Primary Contract, the following Private Services:

1) Current Procedural Terminology Codes*: 59840 through 59857

2) CMS Common Procedure Coding System Codes*: X1516, X1518, X7724, X7726, Z0336

B. The codes identified above in Provision 4, Paragraph A are subject to change upon the DHCS implementation of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) electronic transaction and code sets provisions. Such changes shall not require an amendment to this Contract.

C. Contractor agrees to provide, or arrange to provide, to UIS Members enrolled under this Contract all Covered Services specified in the Primary Contract, except as set forth in Exhibit A, Provision 5 of this Contract.

EXHIBIT A
Scope of Work

5. Primary Contract Covered Services Excluded from This Contract

The following services are covered, and will remain covered, in the Primary Contract and are therefore excluded from this Contract:

A. The provision of pregnancy-related services for UIS Members as described in Exhibit A, Attachment 10, Provision 7, of the Primary Contract.

B. The provision of Emergency Services for UIS Members as described in Exhibit A, Attachment 8, Provision 13, and defined in Exhibit E, Attachment 1, of the Primary Contract.

EXHIBIT B
Budget Detail and Payment Provisions

1. Overview

Unless otherwise provided for herein, Contractor and DHCS agree to be bound by all applicable terms and conditions of Exhibit B of the Primary Contract between Contractor and DHCS, in accordance with Exhibit E, Provision 1, of this Contract.

2. Capitation Rates

A. DHCS shall remit to Contractor a Capitation Payment for each month that a Member appears on the approved list of Members supplied to Contractor by DHCS. Subject to Paragraph C of this Provision, Capitation Payments shall be made in accordance with the schedule of Capitation Payment rates set forth below. Contractor and DHCS agree to update the table below upon the establishment of Capitation Payment rates in accordance with Paragraph E of this Provision.

For period January 1, 2023 through December 31, 2023:

	Los Angeles
Aid Group	**Rate**
PS Adult & Family/OTLIC (Under 19)	
PS Adult Expansion	
PS Adult & Family/OTLIC (19 & Older)	
UIS Adult & Family/OTLIC (Under 19)	
UIS Adult & Family/OTLIC (19 & Over)	
UIS SPD	
UIS SPD Dual	
UIS BCCTP	
UIS LTC Non-Dual	
UIS LTC Dual	
UIS Adult Expansion	

B. Aid Codes within each Aid Group for this time period are set forth in the Primary Contract for Members enrolled under the Primary Contract. For the purposes of this Contract, UIS Members are additionally defined in Exhibit E, Provision 10.

EXHIBIT B
Budget Detail and Payment Provisions

C. UIS Member Capitation Payments and Private Services (PS) payments will be made monthly, in alignment with Capitation Payments in the Primary Contract. Payments for this Contract will begin after August 1, 2023. After August 1, 2023, retroactive payments will be issued for the months back to January 2023.

D. The amount shall be calculated based on the enrollment of Members identified in the approved list for the month of eligibility of each month at the rate specified for each Service Area included under this Contract.

E. DHCS shall establish Capitation Payment rates on an actuarial basis, and that basis shall be set forth in the DHCS rate certification(s), including any amendment(s) or revision(s), for the applicable Rating Period. Upon completion, said rate certification(s) are hereby incorporated by reference and made a part of this Contract by this reference as if attached hereto in full.

EXHIBIT E
Additional Provisions

1. Additional Incorporated Exhibits

A. Unless otherwise provided for herein, Contractor and DHCS agree to be bound by all applicable terms and conditions of the Primary Contract between Contractor and DHCS, including all applicable amendments to the Primary Contract as of the effective date of this Contract, all applicable subsequent amendments to the Primary Contract, and all applicable Exhibits and Attachments to the Primary Contract, all of which are hereby incorporated by reference as if fully set forth herein, except for the following Exhibits and Provisions from the Primary Contract, which shall be excluded from this Contract:

1) Exhibit B, Provision 3, Capitation Rates;

2) Exhibit B, Provision 11, Paragraph B regarding disallowance of Federal Financial Participation (FFP);

3) Exhibit B, Provision 13, Adult Expansion Risk Corridor;

4) Exhibit B, Provision 14, Supplemental Payments;

5) Exhibit B, Provision 20, State Programs Receiving Federal Financial Participation;

5) Exhibit D(F);

6) Exhibit E, Attachment 2, Provision 3, Amendment Process;

7) Any Primary Contract provision deemed not applicable by DHCS to the performance of this Contract; and

8) Any Primary Contract provision otherwise provided for in this Contract.

B. In the event of a conflict between the provisions of this Contract and the Primary Contract, the provisions of this Contract shall prevail.

EXHIBIT E
Additional Provisions

2. Governing Law

In addition to Exhibit C, Provision 14, Governing Law, Contractor also agrees to the following:

A. If it is necessary to interpret this Contract, all applicable laws may be used as aids in interpreting the Contract. However, the parties agree that any such applicable laws shall not be interpreted to create contractual obligations upon DHCS or Contractor, unless such applicable laws are expressly incorporated into this Contract in some section other than this provision, Governing Law. Except for Exhibit E, Attachment 2, Provision 15, Sanctions, the parties agree that any remedies for DHCS' or Contractor's non-compliance with laws not expressly incorporated into this Contract, or any covenants judicially implied to be part of this Contract, shall not include money damages, but may include equitable remedies such as injunctive relief or specific performance. This Contract is the product of mutual negotiation, and if any ambiguities should arise in the interpretation of this Contract, both parties shall be deemed authors of this Contract.

B. Any provision of this Contract that is in conflict with current or future applicable federal or State laws or regulations is hereby amended to conform to the provisions of those laws and regulations. Such amendment of the Contract shall be effective on the effective date of the statutes or regulations necessitating it, and shall be binding on the parties even though such amendment may not have been reduced to writing and formally agreed upon and executed by the parties.

Such amendment shall constitute grounds for termination of this Contract in accordance with the procedures and provisions of Exhibit E, Attachment 2, Provision 13, Paragraph C, Termination – Contractor in the Primary Contract. The parties shall be bound by the terms of the amendment until the effective date of the termination.

3. Entire Agreement

This written Contract and any amendments shall constitute the entire agreement between the parties. No oral representations shall be binding on either party unless such representations are reduced to writing and made an amendment to the Contract.

EXHIBIT E
Additional Provisions

4. Amendment Process

Should either party, during the life of this Contract, desire a change in this Contract, that change shall be proposed in writing to the other party. The other party shall acknowledge receipt of the proposal within 10 days of receipt of the proposal. The party proposing any such change shall have the right to withdraw the proposal any time prior to acceptance or rejection by the other party. Any proposal shall set forth an explanation of the reason and basis for the proposed change and the text of the desired amendment to this Contract that would provide for the change. If the proposal is accepted, this Contract shall be amended to provide for the change mutually agreed to by the parties on the condition that the amendment is approved by the State Department of Finance, if necessary.

5. Notices

All notices to be given under this Contract will be in writing and will be deemed to have been given when mailed to DHCS or the Contractor:

Department of Health Care Services
Managed Care Operations Division
Attention: Contracting Officer
MS 4408
P.O. Box 997413
Sacramento, CA 95899-7413

L.A. Care Health Plan

Attention: John Baackes, CEO
1055 W 7th Street, 10th floor.
Los Angeles, CA 90017

6. Term

The Contract will become effective January 1, 2023, and will continue in full force and effect through the term of the Primary Contract, subject to the provisions of Exhibit B, Provision 1, Budget Contingency Clause, of the Primary Contract.

7. Non-Cancellation

Except as set forth in Exhibit E, Provision 8 below, this Contract will thereafter continue in full force and effect through the end date specified in the Primary Contract, subject to Exhibit B, Provision 1, of the Primary Contract.

8. Termination for Cause and Other Terminations

Contractor agrees to the termination provisions in the Primary Contract, which are incorporated into this Contract.

EXHIBIT E
Additional Provisions

9. Administrative Duties/Responsibilities

Contractor shall maintain the organizational and administrative capabilities to carry out its duties and responsibilities under this Contract in the same manner as required by the Primary Contract.

10. Definitions

As used in this Contract, unless otherwise expressly provided or the context otherwise requires, the definitions of terms in the Primary Contract will govern the construction of this Contract.

A. **Primary Contract** means Contract Number 04-36069, including all applicable amendments, Exhibits, and/or Attachments to that Contract as of and subsequent to the effective date of this Contract. Termination of the Primary Contract shall be deemed a termination of this Contract.

B. **Private Services (PS)** means Current Procedural Terminology Codes 59840 through 59857 and CMS Common Procedure Coding System Codes X1516, X1518, X7724, X7726, and Z0336.

C. **State-Supported Services** means Private Services as defined and described in this Contract, and Covered Services, as identified in the Primary Contract, for UIS Members with the exception of pregnancy-related services for UIS Members and emergency services as they are described in the Primary Contract.

D. **Unsatisfactory Immigration Status (UIS) Member** means a Member enrolled under the Primary Contract for whom, by virtue of their immigration status, federal financial participation is available only for emergency services and qualifying pregnancy-related services as they are described in the Primary Contract, and are included in any of the following groups:

1) "Qualified" Non-Citizen (QNC), subject to, and have not met, the five-year bar;

2) Permanently Residing Under Color Of Law (PRUCOL);

3) Senate Bill 75 (Chapter 18, Statutes of 2015), under the age of 19;

4) Young Adult Expansion (YAE), under the age of 26;

5) Trafficking and Crime Victim Assistance Program (TCVAP); and

6) Older Adult Expansion (OAE), 50 years of age or older.

III. Exhibit A, Attachment 1, COORDINATION OF CARE, is amended to add:

9. Provider Network Requirements

A. D-SNP Contractor can obtain Medi-Cal participating providers by reviewing the California Health and Human Services Open Data Portal. The California Health and Human Services Open Data Portal can be found at: **https://data.chhs.ca.gov/dataset/enrolled-medi-cal-fee-for-service-provider**. Alternatively, D-SNP Contractor can obtain the file from the affiliated Medi-Cal plan.

18. Additional Guidance

D-SNP Contractor must adhere to the State-specific requirements described in this Contract, in addition to all existing Medicare requirements.

In addition, D-SNP Contractor must meet the definition of an applicable integrated plan per 42 CFR section 422.561 and as an applicable integrated plan must use the unified appeals and grievance procedures under 42 CFR §§ 422.629 through 422.634, 438.210, 438.400, and 438.402. Per 42 CFR § 422.629(c) and the state discretion to implement standards for timeframes or notice requirements that are more protective for the Member, D-SNP Contractor must comply with the deadlines specified in Health and Safety Code section 1367.01for integrated organization determinations of Medicare and Medi-Cal services. Further, D-SNP Contractor may not extend timeframes for integrated reconsiderations (appeals) of Medicare and Medi-Cal services, per APL 21-011.

IV. Exhibit E, Attachment 1, DEFINITIONS, is amended to add:

2. Care Coordinator means a clinician or other trained individual who is employed or contracted by the Member's Primary Care Provider or D-SNP Contractor, serves on one (1) or more Interdisciplinary Care Teams (ICT), and coordinates and facilitates meetings and other activities of those ICTs, as well as participates in the Initial Assessment of each Member on whose ICT they serve.

V. All rights, duties, obligations and liabilities of the parties hereto otherwise remain unchanged.

Board of Governors
MOTION SUMMARY

Date: February 2, 2023 **Motion No. BOG 102.0223**

Committee: **Chairperson:** Al Ballesteros, MBA

Issue: Approval of Children's Health Consultant Advisory Committee (CHCAC) membership

☐ **New Contract** ☐ **Amendment** ☐ **Sole Source** ☐ **RFP/RFQ was conducted in _____**

Background:

Member Impact: None

Budget Impact: None

Motion: **To approve the appointment of Sameer Amin, MD, for the seat representing L.A. Care's Chief Medical Officer as member of the Children's Health Consultant Advisory Committee (CHCAC), effective February 2, 2023.**

Board of Governors
MOTION SUMMARY

Date: February 2, 2023 **Motion No. BOG 103.0223**

Committee: **Chairperson:** Al Ballesteros, MBA

Issue: Approval of Technical Advisory Committee (CHCAC) membership

☐ **New Contract** ☐ **Amendment** ☐ **Sole Source** ☐ **RFP/RFQ was conducted in _____**

Background:

Member Impact: None

Budget Impact: None

Motion: **To approve the appointment of Sameer Amin, MD, for the seat representing L.A. Care's Chief Medical Officer as member of the Technical Advisory Committee (TAC), effective February 2, 2023.**

L.A. Care
HEALTH PLAN

Board of Governors
MOTION SUMMARY

Date: February 2, 2023 **Motion No.** **EXE 100.0223**

Committee: Executive **Chairperson:** Al Ballesteros, MD

Issue: Execute Amendment V to the contract with Scout Exchange providing contingent worker vendor management services.

☐ **New Contract** ☒ **Amendment** ☐ **Sole Source** ☐ **RFP/RFQ was conducted**

Background: L.A. Care staff requests approval to execute Amendment V to the contract with Scout Exchange adding $14,500,000 to the maximum compensation.

Scout provides L.A. Care with software to assist in the management of contingent workers. Using Scout will streamline the contingent workforce management process, including timecards, staffing requests, and vendor management.

We request approval to extend the contract through September 30, 2023 with an additional $14,500,000 (for a total cost not to exceed $48,464,908).

Budget Impact: The cost was not anticipated and was not included in the approved budget for Human Resources. The cost associated with this expense will be reflected in the next budget forecast.

Motion: **To authorize staff to increase the spend of the existing purchase order, by an additional amount of $14,500,000 not to exceed a total spend of $48,464,908 with Scout Exchange for contingent worker vendor management services rendered through the end of the contract term on September 30, 2023.**

Board of Governors
MOTION SUMMARY

Date: February 2, 2023 **Motion No. FIN 100.0223**

Committee: Finance & Budget **Chairperson:** Stephanie Booth, MD

Issue: Execute an amendment with Cognizant to extend the existing contract to provide Healthcare Effectiveness Data and Information Set (HEDIS) and Align. Measure. Perform (AMP) services.

☐ **New Contract** ☒ **Amendment** ☐ **Sole Source** ☐ **RFP/RFQ was conducted**

Background: HEDIS reporting is required by Centers for Medicare and Medicaid Services (CMS), Department of Health Care Services (DHCS), National Commission on Quality Assurance (NCQA), and Covered California. The AMP Program is administered by the Integrated Healthcare Association. Participation in the AMP Program is the primary way L.A. Care meets the Covered California requirement to offer some portion of reimbursement to our network using a value based payment methodology. Utilization of certified HEDIS software is required to complete the audit and submission process to these entities.

L.A. Care executed a three-year agreement with Cognizant to provide HEDIS and AMP services in 2017. Since that agreement was due to expire in 2020, a request for proposal process was conducted from December 2019 to May 2020. Five vendors were evaluated, including current vendor, Cognizant. Staff concluded that it was best to delay implementation of a new HEDIS engine at that time given competing priorities, including those related to the COVID-19 pandemic. A contract with Cognizant was approved for August 2020 through July 2021, and a new one-year contract executed through July 2022.

Cognizant and L.A. Care agreed to a new contract through July 2023 at a 3% increase in pricing from the prior year. Motion FIN B.0622 was approved by the Finance and Budget Committee in June 2022 in the amount of $1,184,500. Due to challenges in further negotiation with the Vendor, we instead executed an eight-month amendment with Cognizant from August 2022 to March 2023, not to exceed $800,000. This amendment brought the existing contract to a total of $1,900,000.

We are now requesting that the remaining approved $384,500 from Motion FIN B.0622 be utilized to cover an additional amendment for April to July 2023, not to exceed $300,000. This new amendment will bring the existing contract to a total of $2,200,000.

Member Impact: The HEDIS engine, in addition to producing HEDIS rates for the plan, also drives services to members by identifying gaps in care for recommended services that are used to inform providers and PPGs to spur improvement in care for L.A. Care members.

Budget Impact: The cost is budgeted for FY 2022-2023.

Motion: **To authorize staff to execute a 4 month-amendment to the existing contract with Cognizant to provide Healthcare Effectiveness Data and Information Set (HEDIS) & Align. Measure. Perform (AMP) software and services for the period of April 2023 through July 2023 with fees not to exceed $300,000 for a contract total $2,200,000.**

L.A. Care
HEALTH PLAN

Board of Governors
MOTION SUMMARY

Date: February 2, 2023 **Motion No. FIN 101.0223**

Committee: Finance & Budget **Chairperson:** Stephanie Booth, MD

☐ **New Contract** ☒ **Amendment** ☐ **Sole Source** ☐ **RFP/RFQ was conducted**

Issue: Execute two amendments (SOWs 3 and 7) with Toney Health Care Consulting (THCC) to provide Utilization Management (UM) Frontline Nursing and Leadership staffing augmentation through September 30, 2023, at a total cost of $1,509,200.

Background: In July 2019, following a notice of non-compliance due to persistent poor performance and Centers for Medicare and Medicaid Services (CMS) audit findings for one of our delegates, L.A. Care de-delegated Care Management (CM) activities for that delegate. At that time, L.A. Care executed a staff augmentation agreement with THCC to add Frontline Nurses to enable L.A. Care to perform these activities internally. These staff performed well and were transitioned to UM activities in Q2 of 2021, after the UM department experienced a significant period of non-compliance and was placed on a corrective action plan (CAP) with enhanced monitoring by the California Department of Health Care Services (DHCS). Frontline Nurses and a Senior Clinical Advisor (Director level) from Toney were moved to UM to remediate backlog and sustain efforts to maintain compliance with timeliness and accuracy for UM review requests. These Toney staff have been extended to also address backlogs in UM portion of Provider Dispute Resolution cases (PDR) and to fill significant UM FTE vacancies due to attrition, leaves of absences, COVID surges, and significant challenges in recruitment and hiring of permanent staff.

To address the business needs described above, Clinical Operations requests the following:

1. Execute Amendment No. 7 to extend the current SOW 3 through September 30, 2023 for an additional $1,232,000 for a total contract not to exceed $13,160,571. The scope includes UM Nurses to support routine operations for prior authorization, concurrent review, and PDR.
2. Execute Amendment No. 7 to extend the current SOW 7 for the Senior Clinical Advisor through September 30, 2023 for an additional $277,200 for a total contract not to exceed $2,026,000.

Member Impact: Executing these amendments allows the UM department to continue to meet and improve authorization timeliness and quality in accordance with our Corrective Action Plans and to ensure members' care is not delayed.

Budget Impact: Theses costs were not anticipated and were not included in the approved FY 2022-23 Budget for UM (cost center 2750). However, UM currently has 17 line staff vacancies to mitigate these consulting costs.

Motion: To authorize amendment extensions of the current contracts with Toney Health Care Consulting (SOWs 3 & 7) for UM services through September 30, 2023, at an additional cost of $1,509,200 for a total UM contract not to exceed $15,186,571.

L.A. Care
HEALTH PLAN

Board of Governors
MOTION SUMMARY

Date: February 2, 2023

Motion No. COM 100.0223

Committee: Compliance and Quality

Chairperson: Stephanie Booth, MD

Issue: Approve 2023 Compliance Work Plan

☐ **New Contract** ☐ **Amendment** ☐ **Sole Source** ☐ **RFP/RFQ was conducted in**

Background: L.A. Care's Compliance Plans establish a foundation for responding to multiple state and federal regulatory initiatives. Not only does the implementation of our Compliance Plans help identify and prevent deficiencies, but it also may reduce the potential for liability should violations occur. Additionally, the Compliance Plans establish the organization's commitment to ethical behavior and the proper way of doing business.

Member Impact: None

Budget Impact: None

Motion: To approve the 2023 Compliance Work Plans, as submitted.

LA CARE HEALTH PLAN
2023 COMPLIANCE WORK PLAN

Item #	Planned Activity	Compliance Unit	Start Date	Completion Date	Description	Purpose/Value Add	Delegates Involved (Y/N)
1	Regulatory Compliance Quarterly Reporting	Regulatory Compliance	01/01/23	12/31/23	Design and launch a trending and actionable implementation report of regulatory agency inquiries, noncompliance communications, regulatory reports, regulatory audits and deficiencies and corrective action plans. The report will be communicated to senior management and used to monitor business unit investigation and remediation activities. to any particular trends. Each section will also include any new initiatives or programs and implementation updates.	Visibility of regulatory focus to inform organizational priorities from a regulatory and compliance perspective.	N
2	Regulatory Reports Quality Assurance & Monitoring	Regulatory Compliance	01/01/23	12/31/23	Continue to develop and expand the Regulatory Reporting Quality Assurance process including the following actions: - Comprehensive technical specifications document for regulatory reports including regulatory review tools. - Data validation protocols for data that may pose a high-risk to the organization if it is found to be inaccurate. - Streamline coordination of report development and ensure data governance.	Ensure submissions are timely, complete, and accurate upon submission to regulators. Improve report quality, and ensure reports are usable and accurate through increased data governance.	Y
3	Delegate Member Communication - Validation & Monitoring Process	Material Review	10/01/22	9/30/23	Implement process for distribution of member communications/letter templates to delegates: - Regulatory required communications for all LOBs - Best practice (i.e., not required by regulations) - Develop tracking tool - Draft Communication Work plan (identify roles, responsibilities, action required, deadlines, etc.) - Report distribution results and/or delegate compliance rates to Business Units, Committees, etc.,	Delegates contracted for UM functions, D-SNP, etc. will distribute approved/compliant letters to members	Y

LA CARE HEALTH PLAN
2023 COMPLIANCE WORK PLAN

Item #	Planned Activity	Compliance Unit	Start Date	Completion Date	Description	Purpose/Value Add	Delegates Involved (Y/N)
4	Improve Policy Management Program	Regulatory Analysis and Communication	10/01/22	12/31/23	Improve enterprise-wide Policy Management Program: • Update Policy template. • Review and revise Policy Management Workflow. • Implement new workflow to all affected parties, with monitoring to ensure enterprise-wide compliance with policy management requirements	Ensure that policies and procedures and consistently developed, reviewed and updated.	Y
5	Enhance enterprise-wide Regulatory Change Management (RCM) Program	Regulatory Analysis and Communication	10/01/22	12/31/23	Enhance the enterprise-wide regulatory change management program, including but not limited to: • Develop and socialize Regulatory Implementation Dashboard. • Implement Regulatory Implementation Artifact Inventory. • Review and revise Regulatory analysis templates and change management workflow.	This enhancement will assure complete implementation of new or updated regulatory requirements and improve regulatory audit performance.	N
6	Create the 2023 Business Continuity Plan	Risk Management/ Business Continuity	10/01/22	12/31/23	* Create new BCP P&Ps to incorporate all DHCS 2024 requirements * Meet all deliverables for 2024 Operational Readiness associated with BCP and emergency preparedness *Conduct DR testing, Business Impact Analysis (BIA) and develop departmental BCPs to reflect multiple scenarios * Test enterprise level BCP by end of 2023	Required to ensure effective business operations and comply with new DHCS contractual requirements effective 1/1/2024.	N
7	Enhance and improve risk assessment process	Risk Management/ Business Continuity	10/01/22	9/30/23	* Catalog risks from key stakeholders and document current and desired management of risks. * Build Management Action Plans (MAP) to support remediation efforts and allow Compliance to monitor progress *Integrate the Annual Risk Assessment into the 2023 Internal Audit Work Plan	Improve effectiveness of annual risk assessment and remediation actions.	Y

LA CARE HEALTH PLAN
2023 COMPLIANCE WORK PLAN

Item #	Planned Activity	Compliance Unit	Start Date	Completion Date	Description	Purpose/Value Add	Delegates Involved (Y/N)
8	Develop plan for acquisition of compliance software to manage workflow, tracking and reporting of all compliance activities	All	10/01/22	12/31/23	* Collection and prioritization of business requirements * Vendor request for proposals * System Design and Implementation * Training for Compliance and Business users	Create stronger tracking of compliance tasks and reduce duplication of efforts.	Y
9	Develop HIPAA Resource Page	Privacy	January 2023	December 2023	Develop an intranet resource page to centralize Privacy and InfoSec resources related to workflows, guidance, relevant rules/regs, micro trainings, and policies.	Increase organizational understanding of HIPAA and how it is operationalize to reduce privacy/InfoSec violations.	N
10	Create BAA review tool to align contracts with federal/state/ and contractual requirements.	Privacy	January 2023	December 2023	Develop a BAA matrix to help Privacy staff review BAAs to ensure HIPAA risks are identified, and that a review worksheet is completed for auditing and monitoring purpose.	Reduce liability and exposure due to misidentified risks.	Y
11	External facing HIPAA Policy	Privacy	January 2023	December 2023	Create an external facing HIPAA policy used to communicate our privacy and security expectations with our vendors and delegates.	Enforce compliance with HIPAA, state regs and contractual requirements.	Y

LA CARE HEALTH PLAN
2023 COMPLIANCE WORK PLAN

Item #	Planned Activity	Compliance Unit	Start Date	Completion Date	Description	Purpose/Value Add	Delegates Involved (Y/N)
12	Launch Internal Audit Unit within Compliance Department	Compliance / Internal Audit	January 2023	6/1/23	Complete management and staffing plan for new internal audit unit	Reduce external consultant expenditures	N
13	Improve quality and integrity of enterprise and network performance data	EPO	07/14/05	12/31/23	Aggregate and distill all applicable requirements into performance criteria, validate these criteria with stakeholders, implement quantitative and qualitative metrics and attestations, and systematically measure the performance of retained and delegated functions against these standards.		Y
14	Enhance risk-based approach for annual delegate audits	EPO	01/01/23	9/30/23	Continue design and documentation of risk-based method for selecting and sequencing the entities that must be audited, as well as the topics and methods to be used. Risk audits will identify areas of high risk and tailor auditing protocols and plans. Design and implement focused network provider audits. for targeted and real-time examinations of entities that are considered at high risk of non-compliance for certain functions.	Risk-based auditing will reduce administrative burden and improve timeliness of audit completion, while maximizing the benefits of the audits. Focused audits will target categories of high risk and remediation of ongoing nonperformance.	Y
15	Develop track and trend tools and processes for network audit findings.	EPO	01/01/23	9/30/23	Ensure that audit results and corrective actions are tracked and reported centrally, and that evidence-based action is taken on all systemic issues or patterns showing improvement opportunities.	Improves ability to monitor performance and compare performance over time.	Y

LA CARE HEALTH PLAN
2023 COMPLIANCE WORK PLAN

Item #	Planned Activity	Compliance Unit	Start Date	Completion Date	Description	Purpose/Value Add	Delegates Involved (Y/N)
16	Design and implement centralized performance dashboard for enterprise and network data	EPO	01/01/23	9/30/23	The results and trends enterprise rom these three Programs, as well as all other information germane to understanding internal and external performance will be consolidated and presented centrally to all stakeholders through the Centralized Dashboard. To that end, EPO will work collaboratively with IT, across the Enterprise, and notably with Quality Improvement (QI), with Legal, and within Compliance, including with Regulatory Compliance, Enterprise Risk Management, the SIU, and Privacy, to ensure relevant data is represented on the Centralized Dashboard.	The Centralized Dashboard consolidates all performance intelligence in one place and allows proactive monitoring and reporting on the status of delegated and non-delegated functions.	Y
17	Complete Communications and Engagement Survey	EPO	10/01/22	5/1/23	Complete the survey of the L.A. Care Enterprise Stakeholders to determine opportunities to streamline the touchpoints and bi-directional communications with L.A. Care's Service Delivery Network. Develop strategies to addresses issues identified in survey.	Improve touchpoints and communications with the Network regarding performance requirements, oversight activities, audits, and other matters will increase efficiencies for L.A. Care and the Network.	Y
18	Focus investigations on priority fraud matters and development of strategies to prevent fraudulent behavior.	Special Investigations Unit	01/01/23	12/31/23	The SIU will focus on priority fraud matters such as hospice fraud, fraudulent prescribing of opioids, duplicate billings, pharmacy fraud, false billings and provider fraud. The SIU will continue to work closely with our State and Federal Law Enforcement partners. Develop strategies to change the behavior of fraudulent providers to stop future payments by L.A. Care that constitute fraud, waste of abuse.	Complete recovers and prevent fraud, waste and abuse.	Y

LA CARE HEALTH PLAN
2023 COMPLIANCE WORK PLAN

Item #	Planned Activity	Compliance Unit	Start Date	Completion Date	Description	Purpose/Value Add	Delegates Involved (Y/N)
19	Provide oversight of our Planned Partner and delegate SIU Units.	Special Investigations Unit	01/01/23	12/31/23	The SIU will continue to oversee our Planned Partner and PPG SIUs. SIU will maintain ongoing communication and continue to exchange information and collaborate with our Planned Partners and PPG SIUs on matter of healthcare fraud. the SIU will continue to host quarterly healthcare fraud roundtables with our PP and PPG SIU counterparts.	We share the vast experiences of the L.A. Care SIU personnel and ensure This collaboration and information sharing leads to an increase in leads and better healthcare fraud investigations.	Y
20	Establish internal investigations unit	Special Investigations Unit	01/01/23	3/31/23	Hire internal investigations staff and complete appropriate staff training.	Avoid expense and delay associated with using outside counsel and consultant resources to conduct investigations.	N

L.A. Care
HEALTH PLAN

Board of Governors
MOTION SUMMARY

Date: February 2, 2023

Motion No. COM 101.0223

Committee: Compliance and Quality

Chairperson: Stephanie Booth, MD

Issue: Approve 2023 Internal Audit Plan

☐ **New Contract** ☐ **Amendment** ☐ **Sole Source** ☐ **RFP/RFQ was conducted in**

Background: The Internal Audit Plan summarizes the plan projects and activities as well as the audit schedule for 2023.

Member Impact: None

Budget Impact: None

Motion: To approve the 2023 Internal Audit Plan, as submitted.

2023 Internal Audit Plan

Thomas Mapp
Chief Compliance Officer
Compliance Department

Todd Gower
Internal Audit Consultant Leader (RGP)
Compliance Department

Michael Sobetzko
Sr. Director, Risk Management and Operations
Compliance Department

2023 Internal Audit Plan

Presenter(s): Todd Gower

INTERNAL AUDIT PLAN OBJECTIVES

Internal Audit considers the following objectives when supporting the annual risk assessment process and developing the annual Internal Audit Plan:

- Improve the effectiveness of governance, risk management and control processes;
- Assist leadership in the discharge of their oversight, management and operating responsibilities;
- Assist management in addressing significant financial, operational and compliance risks and making informed risk acceptance decisions;
- Support and leverage business efforts to identify, evaluate and mitigate risks;
- Support the evolution of the Compliance Audit and Risk Program; and
- Meet the challenge to enhance the value of the Internal Audit Program.

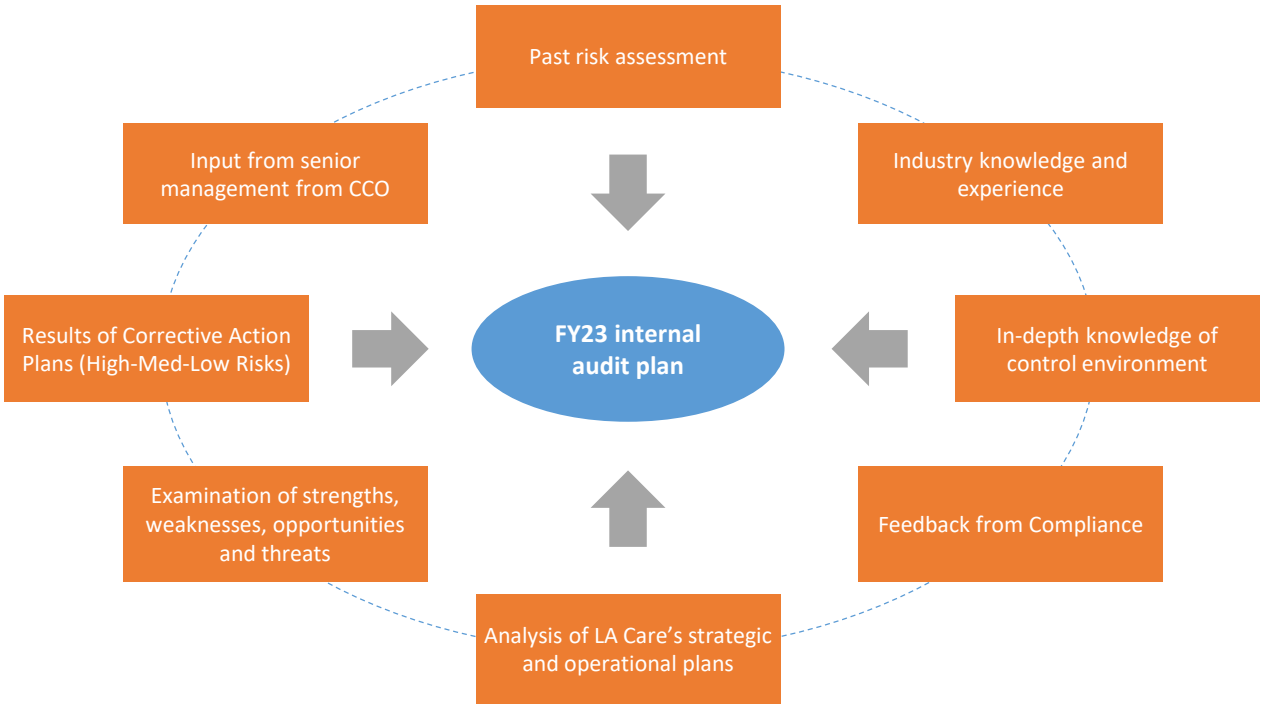
2023 Internal Audit Plan Development Process

Presenter(s): Todd Gower

LA Care's Internal Audit Plan is driven by the information gathered through the Risk Assessment process (survey and interviews) and prior year IA and Regulator Audit reports.

Recognizing the importance of being fully operational and effective the projects which make up the Internal Audit Plan were identified and prioritized based on a number of key inputs.

Key Inputs to the development of the Internal Audit Plan:



2022 Internal Audit Update
(12 Projects)

Presenter(s): Todd Gower

Considered | Delayed | In process/operational | With Mgmt.. | Completed

Audit	Risk Focus	Status	Status Comments	Next Steps
Compliance Request: OOA Emergency Services Claims and Grievances Audit	Ops/Claims	Completed	• Management approved CAPs	Test CAPs – Starting JAN 2023C
Compliance Request: Mail Processes Audit	Admin	Completed	• Management approved CAPs	Test CAPs – Starting JAN 2023
Compliance Request: Transportation Benefit Audit (NMT & NEMT)	Ops / Member Services	Completed	• Management approved CAPs	Final Report with CAPs
Ongoing: HICE Shared IT Integrity and Security Audits	IT	Ongoing-Rollover to 2023	• Ongoing effort, with Summary CAPs presented for final Mgmt. actions by Delegated Entities. IT Security is involved to make sure L.A. Care Mgmt. is tracking.	Ongoing Audits to the next set of entities
Follow-up: DHCS Findings	Follow-up	Completed	• 16 CAP were reviewed for effectiveness 5 were rated effective; 5 were rated partially effective; and 6 CAPs were rated not effective.	Wil follow-up after current DHCS Audit
Follow-up: Sales and Marketing (Regulatory audit 2020 and IA 2021)	Member Services	Completed	• Final report submitted and provided to Management- All CAPs Closed	Complete final audit on effectiveness in 2023- Date TBD following Risk Assessment
Follow-up: Provider terminations	Network	Completed	• Final report submitted and provided to Management	CAP plan being validated
IA Plan: IT Project and IT Configuration Audit	IT	With mgmt. to review – Rollover to 2023	• Reviewed draft observations for Management to substantiate or provide sufficient evidence	Final Conference/Final Report with CAPs
Risk Assessment Support	Risk Oversight	Completed	• Consolidated survey results and in process of prioritization, linking prior year risks and scheduling interviews with Risk Team	2023 Risk Assessment and IA Plan
Internal Investigations	Compliance	Ongoing-Rollover to 2023	• Support Adhoc Investigations as requested from Compliance	Privileged
2023 IA Plan	Risk Oversight	Completed	• Normalized Audit Plan in Draft and waiting for Risk Assessment outcomes to formalize a 3-year plan	2023 IA Plan to present to C&Q and BOD
Other	Risk Oversight	In Process-Rollover to 2023	• Intake process for Issues is being reviewed for tech solution – JIRA is a candidate	Working closely with new Sr Dir of Risk on Issues and Risk Updates

Proposed- 2023 Internal Audit Plan
(15 Projects)

Presenter(s): Todd Gower

Considered | Delayed | In process/operational | With Mgmt.. | Completed

Audit	Risk Focus	Status	Type and Approach	Internal Audit Project High-Level Descriptions	Proposed Timing
New- Staffing / Talent Acquisition Process	Staffing	**Considered**	Audit-Full	Assessing the current staff management program to include talent acquisition process, onboarding, and retention oversight.	January-March 2023
New- Data Management	IT	**Considered**	Audit-Agile	Assess overall data management governance	January-March 2023
New- Delegation Oversight Assessment	Delegation Oversight	**Considered**	Assessment- Agile	Assess current Delegation Oversight program effectiveness	January-March 2023
New- DSNP Program Assessment	Key Programs	**Considered**	Assessment- Agile	Past go-live assessment	April-June 2023
New- Provider Network – Access	Network	**Considered**	Assessment- Agile	Validate Network Access oversight and risk .	April-Jun 2023
New- Cost Containment Assessment	FWA	**Considered**	Assessment- Agile	Validate current cost containment follow-up, recovery and feedback process	July-September 2023
Annual Audit: Marketing and Member Services	Member Services	**Considered**	Audit- Agile	Annual effectiveness audit related to member services	July-September 2023
New- Disaster Recovery	Ops	**Considered**	Assessment-Agile	Assess revised operationalizing of the new DR/BC program	Oct-Dec 2023
Follow-up Assessment- Transportation Benefit Audit (NMT & NEMT)	Member Services	**Considered**	Follow-up Assessment- Agile	Follow-up on NMT and NEMT CAPs	April-June 2023
Follow-up Assessment- IT Security CAPs	IT	**Considered**	Follow-up Assessment- Agile	Follow-up on IT Security 3rd Party Assessment CAPs	April-June 2023
Follow-up Assessment-IT Project and IT Configuration Audit	IT	**Considered**	Follow-up Assessment- Agile	Follow-up on 2022 IT Audit CAPs	July-August 2023
Ongoing: HICE Shared IT Integrity and Security Audits	IT	**Ongoing**	IT Audit- NIST	Ongoing effort, with CAP presented for final Mgmt. actions by Delegation Entities. IT Security is involved to make sure L.A. Care Mgmt. is tracking.	2023
New- Internal Investigations	Compliance Support	**Ongoing**	Compliance Support	Ongoing support of Internal Investigations	2023
Risk Management Support	Risk Oversight	**Ongoing**	Operational	Provide support on Risk Assessment activities and Issues Inventory corrective actions, GRC, Issue Management SW (JIRA)	2023
2024 IA Plan	Risk Oversight	**Ongoing**	Operational	Continue to build out a 3 year plan to create a rotating audit program	Oct-Dec 2023

January 24, 2023

TO: Board of Governors

FROM: John Baackes, *Chief Executive Officer*

SUBJECT: CEO Report – February 2023

Unfortunately, my first CEO report of 2023 begins with a saddening truth – the epidemic of mass shootings in our country continues to plague so many communities, including one of our very own here in Los Angeles. I was devastated to learn of the horrific mass shooting that took place on January 21 in Monterey Park, a predominantly Asian community, during what should have been a joyful Lunar New Year celebration. Instead, family members and friends were lost to senseless violence and yet another community is grieving. Just two days later, a second mass shooting took place here in California, this time in Half Moon Bay in San Mateo County. We at L.A. Care mourn with our neighbors and the Half Moon Bay community and offer our condolences and support. This violence must end. L.A. Care views gun violence as a public health crisis and will continue to advocate for gun safety legislation and other gun violence prevention measures vital to ending this deadly epidemic.

Following is a snapshot of our progress on some of our community- and provider-focused work.

	Since Last CEO Report (11/23/22)	**As of 1/24/23**
Provider Recruitment Program Physicians hired under PRP[1]	1	149
Provider Loan Repayment Program Active grants for medical school loan repayment[2]	-2	132
Medical School Scholarships Grants for medical school scholarships[3]	—	40
Elevating Community Health Home care worker graduates from CCA's IHSS training program	331	5,601

Notes:
1. The number of physicians fluctuates as physicians are hired and/or leave clinics.
2. The number of active grants for loan repayment may decrease due to physicians completing their service commitment, paying off debt, or leaving prior to completing their service commitment.
3. The count includes scholarships that have been awarded and announced, not prospective scholar seats.

Below please find organizational updates for December 2022 and January 2023:

L.A. Care Commits Nearly $14.5 Million to Support Efforts to Advance and Innovate Medi-Cal
L.A. Care has committed $14,426,430 in CalAIM Incentive Payment Program (IPP) funding to 64 providers to help them develop the infrastructure necessary to deliver Enhanced Care Management and Community Supports, as well as to allow them to build capacity through technology upgrades and recruitment, hiring, and training of new staff. Of the 64 IPP applications approved by L.A. Care, 36 requested funding for Community Supports and 48 requested funding for Enhanced Care Management.

L.A. Care Commits $2 Million in Medical School Loan Repayment Grants and $625,000 to Help Recruit Five New Physicians into Los Angeles County

As part of L.A. Care's $155 million Elevating the Safety Net initiative, which launched in 2018, the health plan has announced the sixth round of Provider Loan Repayment Program grants—an investment of $2 million to provide student loan debt relief to 14 physicians who are working in the Los Angeles County safety net. L.A. Care also announced $625,000 in Provider Recruitment Program grant awards to three clinics and one medical group—Herald Christian Health Center, Saban Community Clinic, Valley Community Healthcare, and Fairway Children's Medical Group—to hire new physicians to serve in the Los Angeles County safety net.

Star Trek: The Next Generation Star LeVar Burton Joins the L.A. Care-Nimoy Family COVID-19 Billboard Campaign

Beginning in May 2021, L.A. Care and the family of actor Leonard Nimoy, of Star Trek fame, launched a billboard and social media campaign to encourage vaccination and masking. Now, actor LeVar Burton, one of the stars of Star Trek: The Next Generation, is joining the effort with a billboard message saying "Get Vaxxed. Get Boosted. Be There For The Next Generation." Leonard Nimoy, who was diagnosed with chronic obstructive pulmonary disease in 2013, focused on raising awareness about the disease in the last years of his life and his family views this COVID-19 vaccine campaign as an extension of that effort. The billboards in this renewed campaign will initially go up in three Inglewood neighborhoods and in the San Fernando Valley. A social media campaign will also share the same message seen on the billboards.

Attachments
L.A. Care Statement on Monterey Park Tragedy

L.A. Care Statement on Monterey Park Tragedy

Monday, January 23, 2023

L.A. Care Health Plan extends its deepest condolences to everyone impacted by the horrific mass shooting on Saturday, January 21, in Monterey Park, California. Ten people* who had gathered at a dance hall that served mostly senior citizens were killed and 10 others hospitalized. People had gathered in Monterey Park, a predominantly Asian community, to celebrate the Lunar New Year, and we are saddened to know that they are now grieving. We mourn with them. L.A. Care serves residents of Los Angeles County and we stand in support of the people of Monterey Park, Alhambra and Torrance, communities directly affected by this tragedy.

We don't yet know what precipitated these horrendous events, but we do know that they involved firearms. Just 23 days into the New Year, and this country has already seen 36 mass shootings where four or more people were shot. L.A. Care has taken a strong stance against gun violence. In a letter to Congress last year, our CEO urged lawmakers to take action on gun safety legislation. While we were pleased about the subsequent federal gun safety law expanding background checks, it didn't go far enough.

L.A. Care refuses to accept that the situation is hopeless. That's why our CEO convened a gun violence prevention summit last fall, bringing together leaders from a variety of sectors to talk about solutions to address gun violence. We will continue to urge lawmakers to take further action on gun safety, including a ban on assault weapons, a 10-day waiting period for all gun purchases, and age restrictions. L.A. Care will continue to advocate for social justice and offer our comfort and support to all who have suffered the terror of gun violence.

*Update - One of the people in the hospital died Monday, January 23, raising the number to 11 killed.

About L.A. Care Health Plan

L.A. Care Health Plan serves more than 2.7 million members in Los Angeles County, making it the largest publicly operated health plan in the country. L.A. Care offers four health coverage plans including Medi-Cal, L.A. Care Covered™, L.A. Care Medicare Plus and the PASC-SEIU Homecare Workers Health Care Plan, all dedicated to being accountable and responsive to members. As a public entity, L.A. Care's mission is to provide access to quality health care for L.A. County's low-income communities, and to support the safety net required to achieve that purpose. L.A. Care prioritizes quality, access and inclusion, elevating health care for all of L.A. County.

For more information, follow us on Twitter, Facebook, LinkedIn and Instagram.

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Introduction

Vision 2024

L.A. Care's strategic plan, Vision 2024, outlines our major goals for 2021-2024. Vision 2024 guides us towards continued growth and success using the framework offered by the four strategic directions that remain our guideposts—Operational Excellence, High Quality Network, Member Centric Care, and Health Leader. The Vision 2024 document is shared with the Board of Governors at the beginning of the Fiscal Year, and is available upon request thereafter.

Progress Reports

L.A. Care reports to the Board of Governors regarding the progress made towards the goals in Vision 2024 on a quarterly basis. Each quarterly report is retrospective, and captures a high-level summary of activities from the previous quarter. **The following report covers the first quarter of our fiscal year, from October 1 through December 31.**

A more detailed report is available in the Appendix of this document.

Operational Excellence

Achieve operational excellence by improving health plan functionality.

Goals	Q1: October – December 2022 Highlights
Build out information technology systems that support improved health plan functionality.	• The Courtesy Callback feature allowing customers to "hold" their place in line by receiving a call back instead of waiting on the phone was deployed in December. • The SAP General Ledger Finance solution went live and accounting processes have been streamlined using the ERP system. • SyntraNet implementation was completed for new Community Supports under CalAIM as well as utilization management for D-SNP with a January go-live. • Provider Data Management finalized the functional requirements used to assess and evaluate provider data management platforms and narrowed the selection to two platforms. • Technology Roadmap was refined to include more modern technology and tools such as software packages and a potential cloud-based solution.
Support and sustain a diverse and skilled workforce and plan for future needs.	• Human Resources developed an L.A. Care Management Certification Program to support advancement opportunities for non-management employees. • L.A. Care successfully transitioned to a new CMO and a new CFO is prepared to begin in April upon the retirement of Marie Montgomery.
Ensure long-term financial sustainability.	• Administrative expenses are tracking in accordance with the Board approved budget. Additional funding will be added in the next forecast update due to business needs and regulatory requirements.
Mature L.A. Care's family of product lines, taking an "all products" approach whenever possible.	• L.A. Care Medicare Plus (D-SNP) entered the Medicare Annual Elective Period with coverage beginning in January. • Cal MediConnect (CMC) ended on December 31 and CMC members have successfully transitioned to L.A. Care Medicare Plus (D-SNP). • Medi-Cal Choice marketing campaign launched November – December. • L.A Care Covered Open Enrollment Period campaign is live.

High Quality Network

Support a robust provider network that offers access to high-quality, cost-efficient care.

Goals	Q1: October – December 2022 Highlights
Mature and grow our Direct Network.	• The Care Management and Utilization Management departments completed the insourcing of their respective functions from Optum Health in advance of the contract termination date of December 31, 2022. • Direct Network membership has grown to over 38,000 • We have strengthened the Direct Network through reporting enhancements, improving the timing of provider onboarding training, and expanding our specialty network.
Improve our quality across products and providers.	• Several interventions, including automated calls, mailers, letters and social media campaigns, launched in October and November. L.A. Care sent out over one million text messages to members in 2022. • New workgroups formed to focus on improving STARS ratings for L.A. Care Covered and L.A. Care Medicare Plus (D-SNP) lines of business. • L.A. Care received sanctions from DHCS for not exceeding the Minimum Performance Levels for Childhood Immunization Status and Well-Child Visits. L.A. Care is partnering with Blue Shield Promise and Anthem to improve these rates.
Invest in providers and practices serving our members and the L.A. County safety net.	• Provider Loan Repayment Program (PLRP): 14 new primary care physicians, for a total of 132 active loan repayment awards. • Provider Recruitment Program (PRP): 149 active providers, 20 vacancies. • In-Home Supportive Services Training Program (IHSS) Center for Caregiver Advancement (CCA): CCA and L.A. Care hosted the 17th trimester graduation ceremony online from December 12 through December 17. With the new graduating class, we have now trained a total of 5,601 IHSS providers. • Community Benefits released a $1.5M Oral Health Initiative Request for Applications.

Member Centric Care

Provide services and care that meet the broad health and social needs of our members.

Goals	Q1: October – December 2022 Highlights
Operate all components of California Advancing and Innovating Medi-Cal (CalAIM) as they are launched.	• L.A. Care had over 661 new enrollments in Enhanced Care Management (ECM) in Q1 of the fiscal year, serving a total of over 22,000 in 2022. Additionally, obtained state approval for the January launch of two new ECM Populations of Focus: o Adults Living in the Community and At Risk for LTC Institutionalization o Adult Nursing Facility Residents Transitioning to the Community • L.A. Care served over 14,000 members via Community Supports (not including Plan Partners) in 2022. We also added Environmental Accessibility Adaptations (home modifications) as a Community Support. • Multiple departments prepared for influx of new members who will be transitioning from Fee-For-Service to Managed Care.
Establish and implement a strategy for a high-touch care management approach.	• All Care Management Community Health Workers were trained as DHCS “Coverage Ambassadors” to assist with the redetermination process when it resumes. • Through data analytics, we have found many more members who would benefit from palliative care services and we are providing direct education and outreach to eligible members.
Ensure that the services we provide to members promote equity and are free of implicit and explicit bias.	• The Provider Equity Award Program Description was released in October. • Health Education produced a Pregnancy Resource Guide for Black parents, available through the L.A. Care website and distributed through prenatal mailings. • A Gender Affirming Care Webinar was held for providers to review terms commonly used and preferred with patients who self-identify as transgender and the role of trauma informed care in providing comprehensive care for this patient population.

Health Leader

Serve as a national leader in promoting equitable healthcare to our members and the community and act as a catalyst for community change.

Goals	Q1: October – December 2022 Highlights
Drive improvements to the Affordable Care Act by serving as a model of a successful public option.	• Los Angeles County Safety Net Coalition widened its scope and renamed itself California Safety Net Coalition to reflect a statewide effort.
Optimize members' use of Community Resource Centers and expand our member and community offerings.	• Community Resource Centers (CRCs) 11 and 12 in Long Beach and West L.A. were completed in Q1 of the fiscal year. • The final CRC location in Panorama City (replacement for the Pacoima CRC) was leased.
Drive change to advance health and social services for our members and the community.	• L.A. Care hosted the Gun Violence Prevention Summit in collaboration with Los Angeles County Office of Violence Prevention on December 9, 2022. • L.A. Care is engaging the L.A. County IT/Data Advisory Group and providing funding opportunities for community organizations through the Incentive Payment Program to improve their technical infrastructure and promote interoperability. • In 2022, L.A. Care served approximately 13,100 Homeless and Housing Support Services members (not including Plan Partners), providing housing navigation and tenancy services.

APPENDIX

Detailed Vision 2024 Progress Report
Fiscal Year Quarter 1
October – December 2022

Operational Excellence

Achieve operational excellence by improving health plan functionality.

Build out information technology systems that support improved health plan functionality.	
Tactics	**Update**
Improve customer service through the Voice of the Customer (VOICE) initiative, our customer service information technology system.	The Courtesy Callback feature will deploy by the end of December 2022. This will allow customers to "hold" their place in line by receiving a call back instead of waiting on the phone. The Prior Authorization build-in for the Intelligent Desktop has begun and anticipated to deploy in late January 2023. Planning is underway for the Call Flow Project, which includes post-call surveys and other self-service tools to help improve the overall customer experience. The build for this project is anticipated to begin January 2023.
Improve efficiency and effectiveness of financial management functions with the implementation of the additional phases of the SAP Enterprise Resource Planning (ERP).	The SAP General Ledger Finance solution went live and accounting processes have been streamlined using the ERP system. Initial discussion started for the next phase to implement Analytics Cloud for Planning and Reporting. This implementation will provide a hands-on tool for efficient reporting and forecasting. Automation of the Revenue Recognition process is live, which adds accuracy and efficiency to the restructured Revenue and Plan Partners Capitation process.
Complete the implementation of SyntraNet to support new and updated regulatory requirements, in addition to operational improvements across the enterprise.	**CalAIM:** new Community Support services implementation was completed and will be going live in January. This will deliver operational enhancements including code stabilization, data fixes, and oversight reporting. **Utilization Management:** initial implementation was completed for D-SNP and will be going live in January. Foundational Optimization requirements and forms continued to be developed and reviewed with the vendor. **Appeals:** minimum viable product requirements for phase 2 were finalized. Overall, Information Technology and Portfolio Management Office departments worked with multiple other departments to prioritize pending enhancement, future new work, and develop a new scope of work with the vendor.

Build out information technology systems that support improved health plan functionality.	
Tactics	**Update**
Modernize provider data management by defining and creating a roadmap for achieving our target state for our provider data ecosystem.	Provider Data Management continued its efforts towards achieving target state and has: • expanded the ongoing remediation of data discrepancies within existing provider data applications; • finalized the functional requirements used to assess and evaluate provider data management platforms; and • narrowed the selection of provider data management solutions to two platforms that are capable of accommodating L.A. Care's functional requirements.
Refine and implement our three-year technology roadmap and ensure that the reference architecture serves as a blueprint that evolves with L.A. Care's needs.	Further solidified the Technology Roadmap to include more modern technology and tools such as software packages and the selection of a cloud-based solution to for our Data Integration and Data Governance Roadmaps.
Develop real-time interoperability capabilities to share data with providers and members.	In accordance with a CMS mandate, deployed a set of Application Program Interfaces, which provides a data connection for members to access their health information maintained by L.A. Care. The data connection interfaces enable third party applications (typically on smart phones) to access member data, but only with member consent, and after the third party app has registered with L.A. Care. L.A. Care is currently testing with one such third party, OneRecord, and expects to enable this application by the end of Q2 of this fiscal year, if testing goes well. At this point, OneRecord is the only third party that has approached L.A. Care with a desire to connect.

Support and sustain a diverse and skilled workforce and plan for future needs.	
Tactics	**Update**
Conduct succession planning, particularly at the leadership level.	L.A. Care successfully transitioned to a new CMO and a new CFO is prepared to begin in April upon the retirement of Marie Montgomery. A succession plan framework will be launched in Q2 of this fiscal year.

Support and sustain a diverse and skilled workforce and plan for future needs.	
Tactics	**Update**
Maintain a diverse and inclusive workforce, validated by data analysis, to model L.A. Care's commitment to Diversity, Equity, and Inclusion.	Completed the two-day Cultural Humility & Anti-Racism Education to all Directors and above; 95% of Directors completed the training. We continue to monitor current employee demographics, and remain an ethnically diverse organization with 33.6% Hispanic or Latino, 23.5% Asian, 13.1% Black or African American, 9.1% White, 8% Native Hawaiian or other Pacific Islander, 3.3% two or more races, 9.3% non-applicable. Additionally, our employees are 67% Female and 33% Male.
Improve managed care and Management Services Organization (MSO) acumen among staff.	In progress.
Promote retention of staff in an evolving work environment.	Developed an L.A. Care Management Certification Program (being launched in Q2 of this fiscal year) for non-management employees to substitute when previous management experience is required for an entry level management position.

Ensure long-term financial sustainability.	
Tactics	**Update**
Implement recommendations from the administrative expense benchmarking study and update the administrative expense target in the revised forecasts.	Q1 fiscal year administrative expenses are tracking in accordance with the Board approved budget. Additional funding will be added in the next forecast update due to business needs and regulatory requirements.

Mature L.A. Care's family of product lines, taking an "all products" approach whenever possible.	
Tactics	**Update**
Launch a D-SNP to serve the dually-eligible Medicare and Medi-Cal population and transition members from Cal MediConnect (CMC) to the D-SNP.	L.A. Care Medicare Plus (D-SNP) entered the Medicare Annual Elective Period (October 15 – December 7) for dually eligible beneficiaries to enroll, with coverage beginning in January. Cal MediConnect (CMC) ended on December 31, 2022; CMC members have successfully transitioned to the new L.A. Care Medicare Plus (D-SNP). Operational readiness and validations across the enterprise were conducted to ensure a successful January 1, 2023 D-SNP launch.
Increase membership across all products by implementing member recruitment and retention strategies.	**Sales** • Successfully executed the D-SNP sales distribution strategy launch as well as the Annual Elective Period (AEP). Full quarter sales production on trend to exceed the initial January 2023 D-SNP net membership and revenue targets. • Cal MediConnect (CMC) retention efforts resulted in more CMC members rolling over to D-SNP than budgeted. • L.A. Care Covered renewals have exceeded budget and by the end of Q1 of this fiscal year, new plan year sales were trending 20% more than prior year. **Marketing** • Medi-Cal Choice campaign launched November – December; annual go-to-market plan in development for a tentative Spring go-live. • D-SNP campaign launched in November, and continues to be enhanced dynamically through the remainder of the fiscal year. • L.A Care Covered Open Enrollment Period campaign is live; Special Enrollment Period launches in February, inclusive of retention and growth efforts. • Community Resource Center campaign closed out the 2022 calendar year; brand lift and foot traffic attribution efforts reported to Steering Committee.
Engage in a provider network strategy that meets distinct business and competitive needs of all products and ensures that members receive high-value care.	We continue to focus on building, growing, and adding valued providers to our Direct Network through focused recruitment efforts and targeted strategic measures. Membership in the Direct Network has increased to just over 38,000. The team is building a dashboard to better evaluate network performance. Additionally, we continue to work closely with our regulators to ensure we are meeting the time and distance standards across all lines of business for all our members to access high-value care within the appropriate distance or time.

Mature L.A. Care's family of product lines, taking an "all products" approach whenever possible.	
Tactics	**Update**
	Ongoing activities include evaluating opportunities to transition PPG shared risk business to dual risk and to full risk where it aligns with our hospital partners, as appropriate.

High Quality Network

Support a robust provider network that offers access to high-quality, cost-efficient care.

Mature and grow our Direct Network.	
Tactics	**Update**
Insource delegation functions that are currently outsourced, as appropriate and cost effective.	The Care Management and Utilization Management departments completed the insourcing of their respective functions from Optum Health in advance of the contract termination on December 31, 2022. External providers were notified via multiple communication modes and were able to attend one of four training webinars in October. All affected L.A. Care departments also received training customized to their functional responsibilities related to Direct Network members and providers. All Care Management cases were transitioned to L.A. Care staff as of November 1, 2022. Utilization Management began handling all new authorizations effective November 1, 2022. In early December, the remaining three open Utilization Management cases were transitioned to L.A. Care staff for ongoing management.
Improve the operations of all L.A. Care functions necessary to support and scale up the Direct Network.	Efforts for operational improvements, with the support of the Direct Network Administration Steering Committee, continue. Currently user acceptance testing is underway for "Therefore" (our provider load process tool), with a projected start date of July 31, 2023. Ongoing reporting enhancements are underway within the Provider Portal to support Direct Network needs. We have moved New Provider Onboarding training to the beginning of the contracting process in order to have ample time for providers to complete the training.
Strategically address gaps in the Direct Network to meet all member needs countywide.	We continue to work closely with our regulators to ensure we meet the needs of our growing network countywide. We are building a deeper network by having multiples of existing specialty types to reduce the amount of wait time for a member to see a specialist.

Mature and grow our Direct Network.	
Tactics	**Update**
Increase access to virtual care by implementing L.A. Care's Virtual Specialty Care Program (V-SCP).	Recruiting and training more high volume Direct Network practices and adding more adult and pediatric specialists were our main priorities for our V-SCP pilot. However, in Q1 of this fiscal year, we saw both progress as well as growing pains. The number of eConsults and telehealth requests slowed as our participating primary care practices feel that "traditional" referrals (e.g. send the patient for in-person visit directly or via a referral) is easier than an actual dialog with a specialist to meet the patient's need at the primary care level or needing to encourage the member to use telehealth. We are focusing our efforts in reinforcing our engagement and training efforts.

Improve our quality across products and providers.	
Tactics	**Update**
Achieve quality scores for the Direct Network that are commensurate with the median IPA network scores.	The Incentives and Health Informatics Management teams completed quality checks on the data for use in the Measure Year (MY) 2021 Direct Network Pay-for-Performance (P4P) Program. The program budget increased compared to the MY2020 program as the Direct Network's incentive amount earned within the Medi-Cal Value Initiative for IPA Performance (VIIP) was added to the Direct Network P4P budget. Monthly distribution of Provider Opportunity Reports for HEDIS and Utilization Management measures continue.
Exceed the DHCS Minimum Performance Level for all measures for Medi-Cal, achieve a four-star quality rating for L.A. Care Covered, and build the infrastructure to achieve a four-star quality rating for our D-SNP.	• Several interventions, including automated calls, mailers, letters and social media campaigns, launched in October and November. L.A. Care sent out over one million text messages to members in 2022. • There were six trainings focused on the fundamentals of patient experience in October and November. • L.A. Care will continue to work with providers on how to properly code for clinical quality success. • New workgroups formed focusing on improving STARS ratings for L.A. Care Covered and L.A. Care Medicare Plus (D-SNP).

Improve our quality across products and providers.	
Tactics	**Update**
Improve clinical data integration and data governance, starting with race, ethnicity, language, sexual orientation, and gender identity data, in order to achieve the NCQA Health Equity Accreditation.	We are preparing for the roll-out for Race and Ethnicity data elements. We are also entering the planning phases for the selection of a cloud-based software solution and a vendor to aid us in the completion of our Data Governance and Clinical Integration projects.
Improve clinical performance for children's care.	• L.A. Care received sanctions from DHCS for not exceeding the Minimum Performance Levels for Childhood Immunization Status and Well-Child Visits. L.A. Care has a SWOT (Strengths, Weaknesses, Opportunities, Threats) project underway addressing these measures. L.A. Care is partnering with Blue Shield Promise and Anthem to improve these rates. • A wellness visit reminder postcard and a lead poisoning prevention letter were mailed in November 2022. • A new report that alerts providers of missing infant well care visits (several visits are needed before age two) was designed and will be available in 2023.

Invest in providers and practices serving our members and the L.A. County safety net.	
Tactics	**Update**
Assist our providers in adopting and using Health Information Technology (HIT) resources.	The **Transform L.A.** practices are reporting 10 clinical quality measures from their electronic health record system. Nine practices are now receiving regularly Admit, Discharge or Transfer (ADT) report electronically. **Help Me Grow**: L.A. practices are working to incorporate validated developmental screening tools and referrals processes into their electronic medical record software programs to streamline workflows and increase overall screenings and referrals.
Provide practice coaching to support patient-centered care.	**Transform L.A.** increased the number of Direct Network practices to 20 with 116 providers, 34% of Direct Network members. Eight practices are reporting 3% improvement from baseline in Diabetes A1c Poor Control (>9%). Eleven practices are reporting a 1% improvement from baseline in Controlling Blood Pressure.

Invest in providers and practices serving our members and the L.A. County safety net.	
Tactics	**Update**
	Help Me Grow: L.A. initiative Year 2 work is underway. Cohort 1 practices have generated 24% improvement over baseline for the number of screenings conducted. Three of the five practices targeted for Cohort 2 are enrolled and transformation work is underway. Outreach is continuing for the remaining two practices. Nine of the planned 20 early childhood development classes have been provided to the community and L.A. Care members.
Implement innovative programs to train, recruit, and retain highly qualified providers through the Elevating the Safety Net initiative.	**Provider Loan Repayment Program (PLRP):** L.A. Care committed an additional $2 million to award 14 new primary care physicians in exchange for a three-year service commitment in the safety net. Additionally, eight physicians who completed their initial three-year commitment received a two-year extension to continue paying their loans. This brings our total to 132 active loan repayment awards. **Provider Recruitment Program (PRP):** We continue to grow the PRP program, with 149 active providers totaling almost $19.9 million in investment. There are currently 20 vacancies. **Medical School Scholarship Program:** L.A. Care committed to awarding a new cohort of eight scholars in 2023. With this new grant, four new students who receive admission to the David Geffen School of Medicine at UCLA and four at Charles R. Drew University College of Medicine will receive a full-tuition scholarship from L.A. Care. **In-Home Supportive Services Training Program (IHSS) Center for Caregiver Advancement (CCA):** CCA and L.A. Care hosted the 17th trimester graduation ceremony online from December 12 through December 17. In the 17th trimester, 331 IHSS providers graduated, bringing the grand total of providers trained during the course of the program to 5,601.
Utilize the Community Health Investment Fund (CHIF) to leverage opportunities for providers to increase quality and access to care.	On November 3, 2022, the L.A. Care Board of Governors approved Community Health Investment Fund (CHIF) grantmaking priorities for FY 2022-23. Community Benefits released a $1.5M Oral Health Initiative Request for Applications. Upon approval, community dental health providers will implement integrated care models for dental and physical/behavioral health and/or enhance compliance with the state's oral health assessment requirement.

Member Centric Care

Provide services and care that meet the broad health and social needs of our members.

Operate all components of California Advancing and Innovating Medi-Cal (CalAIM) as they are launched.	
Tactics	**Update**
Maximize care for L.A. Care members, within funding constraints, through successful implementation of Enhanced Care Management (ECM) and Community Supports (CS) for specified populations of focus.	**Enhanced Care Management (ECM):** L.A. Care had over 661 new enrollments in ECM in Q1 of the fiscal year; serving over 22,000 members in 2022. We have added six new ECM providers to start on January 1, 2023. Additionally, we obtained state approval for the January launch of two new ECM Populations of Focus: • Adults Living in the Community and At Risk for LTC Institutionalization • Adult Nursing Facility Residents Transitioning to the Community **Community Supports (CS):** Effective January 1, 2023, L.A. Care added Environmental Accessibility Adaptations (aka Home Modifications) as a Community Support. L.A. Care served approximately 14,269 members via Community Supports (not including Plan Partners) in 2022. Additionally, L.A. Care continues to address upcoming and ongoing DHCS requirements to further improve all Community Support services.
Ensure CalAIM Population Health Management (PHM) requirements are met.	• Coordinated CalAIM workgroups for Transitional Care Services and Skilled Nursing Facilities (SNF) coordination and Member Assessments. Identified current state and gap analysis. • Worked with Subject Matter Experts and the Plan Partners to complete the DHCS Contract Readiness review.
Monitor and establish infrastructure for longer-term CalAIM initiatives.	Medi-Cal Product, Customer Solution Center, Finance, Utilization Management, Care Management, Information Technology, Enterprise Performance Optimization, Provider Network Management, and Compliance prepared for projected influx of over 100K fee-for-service Medi-Cal members on 1/1/23 and 2/1/23. Other large CalAIM initiatives (Enhanced Care Management, Community Supports, D-SNP) updates captured in separate, specific tactics.

Establish and implement a strategy for a high-touch care management approach.	
Tactics	**Update**
Maximize use of care managers and community health workers within our care management model.	The Care Management team successfully insourced Care Management responsibilities for all Direct Network members and have been focused on maximizing the use of Care Managers, Care Coordinators, and Community Health Workers to support the Direct Network membership. In order to help members navigate through the upcoming Medi-Cal redetermination process, all Care Management Community Health Workers were trained as DHCS "Coverage Ambassadors." The team has also prepared for the implementation of the new L.A. Care Medicare Plus (D-SNP) and is ready to provide seamless care coordination activities for members transitioning from Cal MediConnect (CMC) to the D-SNP.
Expand upon our progress with palliative care and add other end-of-life services.	Through CalAIM Enhanced Care Management (ECM), we continue to expand with new populations of focus and there is overlap for a subset of members that will need services from palliative care as well as ECM. Major organ transplant is a benefit now and there is significant need in this population for palliative care services. Through our data analytics, we have found that there are many more members who would benefit from palliative care services and we are providing direct education and the opportunity to receive the services by contacting eligible members.

Ensure that the services we provide to members promote equity and are free of implicit and explicit bias.	
Tactics	**Update**
Leverage external partnerships, grantmaking, and sponsorships to implement programs that address the root causes of inequity, including racism and poverty.	New Member Equity Council goals for FY 2022-23 are being created. The categories for the goals will include member voice, social determinants of health, health plan as community partner, systematic change, and equitable health. These goals will align with new regulatory requirements. The Provider Equity Award Program Description was released in October. Currently, we are evaluating options for a winner for Provider Recognition Awards.

Ensure that the services we provide to members promote equity and are free of implicit and explicit bias.	
Tactics	**Update**
Identify and reduce health disparities among our members by implementing targeted quality improvement programs.	L.A. Care focused on disparities in prenatal and postpartum care, diabetes, and hypertension: • MCLA prenatal and postpartum text messaging campaigns continued, with 28% of enrolled members completing their postpartum visits and 38% of members participating in the six-week prenatal campaign. • Health Education produced a Pregnancy Resource Guide for Black Parents. Guide is available through the L.A. Care maternal webpage and distributed through prenatal mailings. • Pre-Implementation work started on the DHCS Doula benefit with a focus on establishing a doula network for L.A. Care members.
Implement initiatives to promote diversity among providers, vendors, and purchased services.	No activity in Q1 of the fiscal year. Activities will resume once the new Procurement Director (hired during Q1) and the upcoming Chief Health Equity Officer are in place.
Offer providers Diversity, Equity, and Inclusion resources to promote bias-free care.	In alignment with L.A. Care's focus on Gun Violence Prevention, L.A. Care provided a resource, "Preventing Firearm Injury: What Clinicians Can Do," located on L.A. Care's website under "provider resources." We held Gender Affirming Care webinar in October. The webinar reviewed terms commonly used and preferred with patients who self-identify as transgender. It also provided information about the role of trauma informed care in providing comprehensive care for this patient population.

Health Leader

Serve as a national leader in promoting equitable healthcare to our members and the community and act as a catalyst for community change.

Drive improvements to the Affordable Care Act by serving as a model of a successful public option.	
Tactics	**Update**
Play a leading role in advocating for a public option at the state and national levels.	The California Safety Net Coalition (previously the Los Angeles County Safety Net Coalition, renamed to reflect a statewide effort) met in December to further define its scope. The Coalition is working to create an ecosystem of plans and providers that serve Medi-Cal recipients and to collectively advocate for increased reimbursement for Medi-Cal services.
Provide expertise and assistance to other public plans interested in participating in state exchanges.	No specific activity during Q1 of this fiscal year. L.A. Care continues to make itself available to advise other public plans considering entering the Covered California market.

Optimize members' use of Community Resource Centers and expand our member and community offerings.	
Tactics	**Update**
Increase the number of Community Resource Centers to 14, in partnership with Blue Shield of California Promise Health Plan, and increase number of annual visits to 60,000 by Q4 2023.	Community Resource Centers (CRCs) 11 and 12 in Long Beach and West L.A. were completed in Q1 of this fiscal year. The final CRC location in Panorama City (replacement for the Pacoima CRC) was leased.
Partner with community-based organizations to offer a range of services onsite.	Community-Based Organization partners continue to provide health care enrollment assistance, CalFresh enrollment assistance, food boxes and bags for food pantries, classes to address chronic conditions such as childhood obesity, diabetes and hypertension and other services and resources.

Drive change to advance health and social services for our members and the community.	
Tactics	**Update**
Identify and prioritize actions, interventions, and programs to promote equity and social justice.	L.A. Care hosted the Gun Violence Prevention Summit in collaboration with Los Angeles County Office of Violence Prevention on December 9, 2022. Drs. Barbara Ferrer, Prothrow-Stith, and Stone were speakers along with our CEO, John Baackes. "L.A. Care University" launched its internal Rainbow Health Training as a health equity resource regarding educational resources for LGBTQ+, health equity, and other topics.
Support regional Health Information Exchanges (HIE).	L.A. Care is dedicated to supporting regional Health Information Exchanges (HIEs) by encouraging contracted hospitals to participate in the HIE and incentivizing IPAs for meaningful use of HIEs. Further, L.A. Care is engaging the L.A. County IT/Data Advisory Group and providing funding opportunities for community organizations through the Incentive Payment Program (IPP) to improve their technical infrastructure and promote interoperability. We are participating in California Health and Human Services (CalHHS) Statewide Data Exchange Agreement in accordance with AB133 Healthcare Trailer Bill, and launching initiatives that would allow access to Skilled Nursing Facility data.
Create a deliberate and tailored strategy to address homelessness among our members.	L.A. Care is focused on improving operational processes for all Community Supports programs that have launched thus far. L.A. Care served approximately 13,100 Homeless and Housing Support Services members (not including Plan Partners) in 2022. L.A. Care Homeless and Housing Support Services provides housing navigation and tenancy services to eligible members. Housing Navigation are services to help homeless members find housing, and Tenancy Services help formerly homeless members with maintaining safe and stable tenancy once housing is secured.

November2022
Grants & Sponsorships Report
January2022 Board of Governors Meeting

#	Organization Name	Project Description	Grant/ Sponsorship Aproval Date	Grant Category/ Sponsorship	Grant Amount*	Sponsorship Amount	FY CHIF & Sponsorships Cummulative Total
1	Brotherhood Crusade	A Journey of Resillence Fundraising event	11/15/2022	Sponsorship	$ -	$ 7,500	$ 7,500
2	Coalition of Black Men Physicians	Education and Game Networking event	11/15/2022	Sponsorship	$ -	$ 16,000	$ 16,000
3	Leonard Nimoy Foundation	COVID-19 Billboards	11/9/2022	Sponsorship	$ -	$ 25,000	$ 25,000
4	March Of Dimes	It Starts with Mom Seminar	11/9/2022	Sponsorship	$ -	$ 5,000	$ 5,000
5					$ -		
6					$ -		
	Total of grants and sponsorships approved in November2022				**$ -**	**$ 53,500**	**$ 53,500**

* No grants were approved in October.

December2022
Grants & Sponsorships Report
February2022 Board of Governors Meeting

#	Organization Name	Project Description	Grant/ Sponsorship Aproval Date	Grant Category/ Sponsorship	Grant Amount*	Sponsorship Amount	FY CHIF & Sponsorships Cummulative Total
1	California Association of Public Hospitals and Health Systems	CAPH/SNI Annual Conference	12/6/2022	Sponsorship	$ -	$ 10,000	$ 10,000
	Total of grants and sponsorships approved in December2022				**$ -**	**$ 10,000**	**$ 10,000**

* No grants were approved in October.

Chief ~~Medical Officer~~ Report

As part of my first CMO Report, I would like to take a moment to thank everyone for the warm welcome. The L.A. Care staff and Los Angeles healthcare community have been gracious with their time and knowledge, allowing me to onboard as quickly and effectively as possible.

It is an honor to succeed Dr. Richard Seidman as the Chief Medical Officer of L.A. Care. This company represents a promise of greater access to quality healthcare for the most vulnerable populations in the County. The term access is often simplified as availability. In my view, the concept of access is far deeper. True access presents healthcare in a way that people can understand, prioritize, utilize, and afford it. Without innovative social programs, initiatives to reduce barriers to entry, and efforts to improve health equity, our members will often access the healthcare system through acute care or not at all. At L.A. Care, we are in a unique position with an opportunity to bolster the safety net and improve the lives of our members. This is a sacred mission that I take to heart as the incoming Chief Medical Officer. I am excited to serve the community and will be committed to putting forward services that address the needs of our diverse membership, achieving operational excellence, working as a partner with our broad provider network, and acting as a catalyst to improve our healthcare system.

With that, I will proceed with an update from each of our departments within Health Services:

Quality Improvement

General Updates

- Enterprise Goals have been set with two QI measures embedded – "Success in the NCQA Discretionary Review, the Population Health Management Index" and rate improvement in our "Not Seen Within One Year" metric for DSNP and LACC.
- CMS Interoperability Implementation continues and policies and procedures are in development.
- L.A. Care will be participating in the "Equity and Quality at Independent Practices in LA County" (EQUiP-LA) Practice Transformation Grant with the California Health Care Foundation (CHCF) and California Quality Collaborative (CQC). We are in the midst of identifying practices.
- Beacon has completed all the necessary mitigation and met all the requirements for QI standards as part of the Quality Improvement (QI) 2022 Annual Audit

Equity

- We are working with IT and CSC to build and collect adult member Sexual Orientation & Gender Identity (SOGI) information as part of our NCQA Health Equity accreditation.

- Member Equity Council goals for FY 2022-23 are currently being drafted. Pillars will remain the same including: 1) Member Voice, 2) Social Determinants of Health, 3) Health Plan as a Community Partner, 4) Systemic Change and, 5) Equitable Health.
- The Provider Equity Award criteria were released in October. Equity categories for the award included 1) reducing health disparities, 2) language care and, 3) SOGI collection.
- L.A. Care hosted a Gun Violence Prevention Summit December 9, 2022. Key stakeholders discussed the impact of gun violence and elevated the issue as a significant public health crisis. The conference ended with a goal of supporting actionable prevention strategies.

Social Determinants of Health (SDOH)

- APL 21-009 requires providers to submit Social Determinants of Health (SDOH) ICD-10 "Z-codes" to L.A. Care. We are now educating providers on using and submitting SDOH data.
- An SDOH VIIP measure was introduced into the Medi-Cal, LACC, CMC, and Direct Network P4P programs.

Health Education & Cultural Linguistic Services (HECLS)

- The race and ethnicity (R/E) enterprise wide data remediation program has been underway to address the erroneous categorization of race and ethnicity data.
- Covered California informed L.A. Care of R/E categorization issues in the Healthcare Evidence Initiative (HEI) files on November 3, 2022. They requested remediation of the previously submitted 2020 R/E data. The short-term R/E data fix for the HEI files is being handled outside of the larger R/E data remediation program.
- The project to integrate translation workflow for NOA/NAR in Syntranet has been underway. The project is currently estimated to complete in June 2023.
- We are continuing to automate the alternative format selection (AFS) data ingestion process and data sharing with delegates to ensure compliance with APL 22-002.
- The Request for Proposal (RFP) for a new health and wellness site was launched in November with vendor proposals due back shortly.
- The Smoker Registry Script in collaboration with Kick It California Tobacco Cessation Program was approved by the Department of Health Care Services (DHCS).
- The CalAIM Community Support Medically Tailored Meals (MTM) Program (launched in January 2022) continues to grow. The program distributed 45,215 meals by the end of FY 2021-2022.
- The Fight the Flu program is in full swing. An email blast was launched to L.A. Care Covered (LACC) members in English and Spanish with over 60,000 emails sent out. The onsite flu vaccine events concluded with a total of 315 flu vaccines distributed across four CRC sites.
- The first Diabetes Prevention Program (DPP) cohort has completed its four core sessions. The recruitment for our second cohort is underway for launch in January.

Practice Transformation

First 5/Help Me Grow (HMG): LA

- The team is developing a "Missed Opportunities Report" to help practices follow-up on patients who have missed an appointment where a developmental screening was scheduled.

Transform L.A. (TLA)

- TLA practices reporting data through October are demonstrating 10% improvement (from Baseline) in Diabetes A1C Poor Control (>9%).

Provider Quality Review (PQR) for Potential Quality Issues (PQI)

- **Aging of PQI Cases:** As of November 30, 2022, we had 2371 cases open with 479 cases open in the untimely aging category of 214+ days and only 24 in the highest risk category.
- **PQR Spot Bonus Program:** A new Spot Bonus program was implemented October 2022 and has been highly effective in reducing the number of untimely cases. For the month of October, the PQR team closed 730 cases followed by an additional 596 cases in November.
- **PQR and Appeals and Grievances Data Discrepancies**: The PQR team identified 400+ possible PQI cases from grievance reporting. We are currently working with Grievances to identify which cases, if any, require a review and why these cases aren't being filtered in for review.

Accreditation:

National Committee for Quality Assurance (NCQA):

- A review will be scheduled in January with our NCQA consultants to review UM (A&G, UM-NON BH, BH, and RX) files. This is being conducted to ensure L.A. Care is prepared for the NCQA file review survey. The NCQA Health Plan Accreditation (HPA) Survey is 6/6/23.

STARS Excellence

Medicare and Commercial/Marketplace Exchange Stars Strategy:

- STARS Strategy:
  - Resuming efforts for CAHPS in Q1 - continue to share best practices and address lower performing "moments that matter" from the Member Journey map
  - Defining an Independent Review Entity (IRE) LAC reconciliation process for Appeals
  - Developing a Tableau sheet to highlight high-level contract info, slated to be available in Q1 with detailed member data in Q2
  - Conducting outreach to educate providers on HEDIS for MY2023 with a focus on: Controlling Blood Pressure (CBP), Prenatal and Postpartum Care (PPC), Childhood Immunization Status (CIS), Lead Screening for Children (LSC), Well Child Visits (W30), and Transitions of Care (TRC). Outreach will continue through Oct 2023.
  - For the TTY / Foreign Language line we are:
    - ✓ Utilizing a mystery shopper (pre-CMS shopper) to audit calls
    - ✓ Adding monthly mock audits to evaluate TTY / Foreign language compliance
    - ✓ Implementing an incentive program to compensate Customer Service (CSC) and Sales staff for calls that pass CMS audit criteria
    - ✓ Creating a daily command center to provide immediate resolution for failed calls

Population Health Management (PHM)

- The 2022 PHM Index was finalized and met 11 out of 14 goals, placing us in the mid-met range.
- The goals for 2023 are being developed, including primary care visit, depression screening, and member and provider experience measures.

- The PHM NCQA year one documentation for the 2023 audit is final and expected to meet requirements. The PHM team has started collecting info for year two NCQA documentation.
- The PHM team will develop the 2023 PHM Program Description in Q1 2023 and will include the CalAIM requirements. The CalAIM Strategy document is due October 2023.
- The PHM CalAIM readiness assessment was submitted to DHCS ahead of the October 21, 2022 deadline. To date L.A. Care has not received feedback from DHCS.
- DHCS announced a new phased approach to Transitional Care Services (TCS). DHCS will be revising the program guide and we will need to document our new approach within 30-days of receiving it.
  - The PHM team has developed an overall work plan to track the deliverables for January 1, 2023 and January 1, 2024. The business units impacted by TCS have been asked to submit a strategy and action plan for addressing the TCS requirements.
  - The PHM team sent out a provider communication to all network providers on the new CalAIM requirements.
  - Our areas of concentration will be high risk / complex members not enrolled in care management who have a transition of care event and delegation oversight of providers who are conducting basic PHM activities.
- DHCS announced its selection of Gainwell Technologies LLC as the PHM system. The platform is expected to use member level SDOH data to help risk stratify.

Initial Health Assessment (IHA) transitioning to Initial Health Appointment

- All Network Providers (PPG and Direct Network) now have access to monthly IHA reports to ensure all new enrollees have an IHA within 120 days.
- Enterprise Performance Optimization (EPO) is monitoring sample PPGs and developing a program for the Direct Network. The updated KPIs for IHA completion will coincide with the new CalAIM IHA requirements in January 2023.
- The PHM team and IHA Workgroup are submitting all required documentation for the DHCS Audit (July 1, 2021-January 31, 2023). Additionally, they reviewed the draft IHA APL revision and provided regulatory feedback and questions.

Facility Site Review (FSR)

- L.A. Care FSR is working with the LA County Collaborative regarding the periodic backlog.
  - DHCS approved the LA Care FSR backlog methodology and granted a 2-year plan to address FSR/MRR (Medical Record Review) /PARS (Physical Accessibility Review Survey) backlog audits by December 31, 2023.
  - Quarter 3 progress report via the MCP (Managed Care Plan) Site Review Tracker has been submitted to DHCS.
  - With the launch on August 1, 2022, the MSRP does not have the functionality to accept bulk data uploads from HDS. Thus, LA Care reporting will stay the same until January 2023.
  - FSR is working with a subgroup of the collaborative to develop an FSR tool for mobile units. The draft was sent to DCHS for review in August. DHCS has not given a response or revised the mobile unit tool to date.
- FSR departments across all health plans have noticed an increase in the length of time to complete a FSR and Medical Record Review (MRR) due to the increase in review criteria

  - This has resulted in a decrease in the number of periodic backlog FSR/MRRs completed per quarter (from 53 to 45). This information will be included in the Q3 DHCS Backlog Tracker report sent to DHCS.
- The total backlog for March 14, 2020 to December 31, 2021 is now **117**. To date, 280 audits have been completed from the backlog. 757 total virtual/onsite audits have been conducted.

Population Health Informatics

- Check requests for Medi-Cal VIIP and Physician P4P have been submitted.
- The VIIP team is currently reviewing the Action Plans from IPAs and checking progress on performance goals and activities. Feedback will be shared with the IPAs mid-December
- Analysts will aim to finish modeling a physician level incentive program for the Medicare Plus, D-SNP population by the end of Q1 2023.

Health Information Exchange Ecosystem (HIEc)

- We are in discussions to amend the current Hospital Services Agreement (HAS) to require HIE Participation.
- The HIEc team is bringing on additional entities for Enhanced Care Management / Community Support (ECM/CS) programs. The HIEc program continues to support the transition of the existing Health Homes Clinics and CB-CMEs to the new ECM program.
- The HIEc team and IT are engaged in implementation with LANES and CMT to bring in ADT data via Fast Healthcare Interoperability Resources (FHIR). L.A. Care has successfully received the first set of FHIR ADT Resources.

Behavioral Health (BH)

On December 15, 2022, L.A. Care submitted a needs assessment and four proposed project plans to DHCS under the auspices of the School Behavioral Health Incentive Program (SBHIP). If all projects are funded, L.A. Care will bring telehealth services to participating school districts, increase staffing and workspaces for student wellness programs, expand the number of psychotherapist interns who provide support in schools, and enhance district-level visualization of BH data and its connection to educational outcomes.

Safety Net Initiatives

Elevating the Safety Net Initiatives

- **Provider Loan Repayment Program** – L.A. Care disbursed a new grant of $2 million to Uncommon Good to award 14 new physicians. We have 134 active physician awards.
- **Medical School Scholarship Program** – We currently have 37 active scholarships. We will fund a new cohort of 8 medical students in 2023 - 4 at UCLA and 4 at Charles Drew University (CDU).
- **CDU New Medical Education Program** – L.A. Care and CDU are preparing to co-name the Center for Faculty Excellence and welcoming the first class of 60 medical students in July 2023.

Incentive Payment Program

- **1st Round of Funding for Enhanced Care Management (ECM) and Community Supports (CS) Providers** – L.A. Care and our Plan Partners approved funding for 64 ECM/CS providers

of up to $14,477,378.32. Providers will receive incentive payments to improve their ECM and CS systems, hire staff, and improve quality reporting.

- **ECM and CS Provider Second Report** – Providers who received funding in the first round must submit a report by January 9, 2023. Upon review of the second report, we will determine disbursement of the second incentive payment (25% of the incentive).
- **Plan Partner Incentive Payments** – A total of $10,766,537.50 will be offered to Plan Partners to cover systems upgrades, hiring, and enhancements to reporting quality capabilities.
- **Department Health Services (DHS) Incentive Payment** – We are reviewing a $5.15 million proposal from DHS for improvements in the administration of CS.

Homeless & Housing Initiatives / Community Clinic Initiatives

Homeless and Housing Support Services (HHSS) Data and Operations:

- As of December 15, 2022, over 10,800 members have been enrolled in HHSS
- SNI staff sent HHSS Providers their November "Claims Needed Report." This report will help them be compliant with submission of their HHSS claims
- SNI staff is working with Cognizant to help support data entry for both the HHSS MIF data and Housing Assessment/Individualizing Housing Support Plan uploads

SyntraNet:

- SNI staff are continuing to work with IT and UpHealth to build out reports and on several data discrepancies during Daily Scrum meetings and Technical CalAIM calls

CS Reporting:

- SNI staff participated in giving feedback to DHCS on two new proposed standardized DHCS reports, the CS MIF and the CS Authorization tracker

Community Clinics:

- L.A. Care's Provider Leadership Program was completed with 9 providers presenting their leadership projects and reflecting on their experience in the program. SNI is working with the Center for Health Care Strategies on planning an alumni focused program for 2023.
- SNI in collaboration with QI and the vendor SullivanLuallin Group are currently planning for the next virtual Customer Service series to be launched in 2023 along with limited in person trainings.
- SNI continues to lead internal and external preparations for FQHC APM, set to launch January 2024. SNI has brought key stakeholders and internal decision makers together this month to finalize a decision on the payment and contracting model.
- We are collaborating with internal business units on planning L.A. Care's Street Medicine strategy, including deliverables related to the DHCS Street Medicine APL and existing HHIP KPIs.

DHS Operations Unit

UM/Medical Management Workgroup

- DHS Decompression:
  - Dr. Kagan will coordinate introductions with strategic hospital partners who can support future DHS decompression. L.A. Care is awaiting DHS's identification of personnel to support this endeavor.

- DHS Transfer Center & Inpatient Repatriation
  - The L.A. Care UM / DHS Transfer Center Team continues to meet on a bi-monthly basis. The active repatriation case volume is currently low.
- Transitions of Care:
  - L.A. Care has asked DHS to expedite specialty appointments in cases of:
    - ✓ Inpatient Discharge
    - ✓ Outpatient Redirection
    - ✓ Case Management Escalation
  - DHS has presented a form for L.A. Care to review and potentially pilot

SyntraNet

- SNI is working with UM and IT to build a DHS repatriation form within SyntraNet that will allow for better repatriation reporting capabilities.

Member Operations Workgroup

- SNI continues to support DHS with delayed member transfers.
  - Overview of cases processed by SNI:
    - ✓ September 2022: 12
    - ✓ October 2022: 30
    - ✓ November 2022: 50

Third Party Liability (TPL)

- DHS has remedied all concerns around the DHCS template and is now in production
- DHS has become compliant with all TPL requests from L.A. Care

Appeals & Grievances (A&G)

- We continue to obtain grievance reporting & DMHC case responses from DHS.
- SNI continues to support the DHS G&A unit on pending cases.

Pharmacy

Comprehensive Medication Management (CMM) via California Right Meds Collaborative (CRMC):

- CRMC has 15 participating pharmacies and 20 clinic/provider partners. As of December 14, 2022, we have 554 members engaged in the program. Among the 554 members, 285 members are in Antelope Valley and South LA, 271 are Hispanic or Latino, and 132 are Black or African American.
- Clinical eligibility for the CRMC program has expanded beyond diabetes to:
  - Behavioral Health – enrollment to begin January 2023
  - Cardiovascular Disease
  - Medication Adherence/MTM (specific to LACC/CMC)
- The Pharmacy Department is working closely with USC, CDC, and DHCS to conduct a meticulous evaluation of the CRMC program.
  - Current performance for those who have 5+ visits with a CRMC Pharmacist as of December 28, 2022:
    - ✓ Average A1c reduction of 3.3%, with baseline A1c of 11.6%

- ✓ Average SBP ↓ 34mmHg and average DBP ↓ 11mmHg
- ✓ 89.4% of members with diabetes are on a statin if not otherwise contraindicated

o The CRMC Program was selected by the Centers for Disease Control and Prevention (CDC) as one of 3 programs to be showcased for its innovative uses of telehealth to prevent and manage cardiovascular disease.

Clinical Pharmacy Pilot Program (Ambulatory Care):

- We have restarted the Ambulatory Care Program at Wilmington Community Clinic and APLA and are now identifying other FQHC partners for the program.

Medication Adherence – Comprehensive Adherence Solutions Program (CASP)

- Beginning June 14, 2021, we have been outreaching to CMC members who are at risk for med nonadherence to offer them mail order service, 100-day prescription conversion, and education.
  - o Outreach summary from January 1, 2022 to December 9, 2022:
    - ✓ Total attempts: 6,853
    - ✓ Total successful calls: 2,377
    - ✓ Total interventions: 4,962
    - ✓ If appropriate, members are also provided resources via Community Link and/or referred to Social Services. A total of 170 members completed the PRAPARE assessment and were offered further resources.
- Navitus Clinical Engagement Center (CEC) and L.A. Care's internal pharmacy department have also collaborated to expand outreach efforts in Q4 2022 to improve medication adherence.

Medication Adherence – Pack4U/Custom Health Collaboration

- The pharmacy team is working with a new vendor, CustomHealth (formerly known as Pack4U), to pilot medication dispensing devices in member homes. The devices are equipped with Bluetooth connectivity and built-in telehealth functionality to dispense medications and engage with members. The pilot program is planned to run for 6 months with a goal of enrolling 100 non-adherent CMC members who have qualifying chronic diseases. Outreach will begin January 3, 2023.

Medication Adherence – IVR Medication Refill Reminders

- CSC restarted IVR medication refill reminders in November 2021.
  - o The results of the campaign are shown below (January 2022 to December 2022).

Attempts	Voice	Busy	No Answer	No Ring back	No Dial tone	Fax	Answer Machine	Canceled	Customer Abandoned
69,727	26,991	503	6,970	2,232	2,097	22	20,933	0	9,976

Transitions of Care Program (TCP):

- Pharmacy has been collaborating with Social Services since October 2020 to provide medication reconciliation for the Transitions of Care Program (TCP), targeting MCLA members recently discharged from the hospital.
- A pharmacist works with a CHW to review each member's discharge summary to identify and resolve medication-related problems. A summary of recommendations is shared with the member's healthcare team. As of December 15, 2022, there are 80 completed cases.

Drug Management Programs - Opioid Home Program (OHP):

- L.A. Care implemented two drug management programs, the Pharmacy Home Program (PHP) and the Opioid Home Program (OHP). PHP targets the LACC and PASC lines of business, and OHP targets the CMC line of business.
- Both programs lock members into one designated provider and/or pharmacy for receiving opioids and benzodiazepines for 12 months.
- As of December 12, 2022, 38 members have been identified for high utilization of opioids and/or a history of opioid overdose within 12 months.

CAHPS - Rating of Drug Plan (D05)/Getting Needed Prescription Drugs (D06)

- Starting January 19, 2022, Pharmacy has implemented a department wide member experience survey to prep for CAHPS (Rating of Drug Plan/Getting Needed Prescription Drugs).
- As of December 13, 2022, 905 Cal MediConnect members were asked to complete the survey. Results for unique responses included 778 consents to participate and 127 declines. Of the 778 members that responded to the survey, 576 (74.0%) of members reported that it is always easy to get the medicines their doctors prescribed. 589 (75.7%) of members reported that it is always easy to fill a prescription at their local pharmacy. 608 (78.2%) of members did not use mail order pharmacy to fill a prescription. From a rating of 0 to 10, where 0 is the worst prescription drug plan and 10 is the best, average member rating is 9.24. Pharmacy attempts to outreach members to resolve barriers mentioned in the survey responses including transportation issues, delays with mail order, and opportunities for aligning medication refill dates. We will keep monitoring the results and report to the STARS Workgroup.

CAHPS - Formulary Team Projects for D-SNP Line of Business

- Pharmacy's formulary team will begin two new projects in 2023 with the goal of increasing member and provider satisfaction. We will assist individual members with obtaining needed medications at point of sale and transition fills for members taking drugs with negative changes beginning CY2023.

L.A. Care Provider Continuing Education (PCE) Program

L.A. Care Health Plan Provider Continuing Education (PCE) Program will continue to offer virtual distance learning / webinars via Cisco WebEx in year 2022. The L.A. Care PCE Program will gradually bring back In-Person CME/CE events in 2023.

Recently Held Directly Provided CME / CE Activities:

In the first quarter of FY 2021-2022, PCE Program monthly webinars had an average of 166 attendees (49% of them were L.A. Care Providers). In the second quarter, we had an average of 136 webinar participants (44% L.A. Care Providers). The third quarter had the highest participation with an average of 215 webinar participants (54% of the total audience were L.A. Care Providers). In the fourth quarter, there were an average of 156 participants (47% of them were L.A. Care Providers).

Upcoming Directly Provided CME / CE Activities Year 2023:

- **January 25, 2023 CME/CE Dinner Event, Psychotherapy for Substance Use Disorder (SUD) and Behavioral Addictions,** Presenter Dr. Katherine Bailey, West LA VA Healthcare Center, 6:00 pm - 8:30 pm, 2 CME/CE Credits, Hilton LA/San Gabriel.

- **February 23, 2023 Webinar, Well Child Visits,** 12:00 pm - 1:30 pm PST, 1.50 CME/CE Credits, Presenter Dr. Ilan Shapiro, AltaMed.

- **March 25, 2023 L.A. Care Children's Health Conference In Collaboration with First 5 LA and Los Angeles County Department of Public Health (DPH),** 8:00 am - 4:30 pm, 6 CME/CE Credits, Almansor Court in Alhambra, 5 Presenters + 1 Hour Q & A/Panel Discussion.

- **April 27, 2023 Webinar, Hypertension and Stroke Prevention,** 12:00 pm - 1:30 pm PST, 1.50 CME/CE Credits, Presenter Dr. Florian Rader, Cedars-Sinai Smidt Heart Institute.

- **May 18, 2023 Webinar, Diabetes Type 2 and Telehealth,** 12:00 pm - 1:30 pm PST, 1.50 CME/CE Credits, Presenter Dr. Matthew Lomeli, AltaMed.

- **June 10, 2023 L.A. Care Geriatric Care Conference In Collaboration with Alzheimer's Los Angeles,** 8:00 am - 4:30 pm, 6 CME/CE Credits, Hilton Los Angeles / San Gabriel, 5 Presenters + 1 Hour Q & A / Panel Discussion.

Board of Governors

Executive Community Advisory Committee

Meeting Minutes – December 14, 2022

1055 W. 7th Street, Los Angeles, CA 90017

ECAC Members	RCAC Members/Public	L.A. Care Board of Governors/Senior Staff
Russell Mahler, *RCAC 1 Chair ****	Pablo De La Puente, *Interpreter ****	Hilda Pérez, *Member, Board of Governors ****
Estela Lara, *RCAC 2 Chair ****	Isaac Ibarlucea, *Interpreter ****	Layla Gonzalez, *Advocate, Board of Governors ****
Cynthia Conteas-Wood, *RCAC 3 Chair, ECAC Vice-Chair ****	Eduardo Kogan, *Interpreter ****	John Baackes, *Chief Executive Office, L.A. Care ****
	Alex Mendez, *Interpreter ****	Sameer Amin, *MD, Chief Medical Officer, L.A. Care ****
Silvia Poz, *RCAC 4 Chair ****	Estefanie Mendez, *Interpreter ****	Miriam Admasu, *Department Assistant, CO&E ****
Maria Sanchez, *RCAC 5 Chair ****	Katelynn Mory, *Closed Captioner ****	Malou Balones, *Board Specialist, Board Services ****
Andria McFerson, *RCAC 6 Chair ****	Ruth Nuno, *Interpreter ****	Kristina Chung, *Community Outreach Field Specialist, CO&E ****
Fátima Vázquez, *RCAC 7 Chair, ECAC Chair ****		Idalia De La Torre, *Field Specialist Supervisor, CO&E ****
		Auleria Eakins, *Manager, CO&E ****
Ana Romo, *RCAC 8 Chair ****	Carries Brodus, *Public ****	Hilda Herrera, *Community Outreach Field Specialist, CO&E ****
Tonya Byrd, *RCAC 9 Chair ****	Carmencita Fernández, *Public ****	Rachel Martinez, *Quality Management Nurse Specialist, Quality Improvement Department ****
Damares O Hernández de Cordero, *RCAC 10 Chair **	Nereyda Ibarra, *Public ****	
	Hoda Mansour, *Public ****	Joshua Mendoza, *Community Outreach Field Specialist, CO&E ****
Maria Angel Refugio, *RCAC 11 Chair ****	Maria Mayoral, *Public ****	Frank Meza, *Community Outreach Field Specialist, CO&E ****
	Maria Teresa Rabaja, *Public ****	Nicole Moussa, *Manager, Technical Information, Pharmacy & Formulary ****
Lluvia Salazar, *At-Large Member ****	Michael Shelton, *Public ****	
Deaka McClain, *At Large Member ****		Cindy Pozos, *Community Outreach Field Specialist, CO&E ****
		Victor Rodriquez, *Board Specialist, Board Services ****
		Martin Vicente, *Community Outreach Field Specialist, CO&E ****
** Excused Absent ** Absent* **** Via teleconference* ***** Via teleconference (with technical issues)*		

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
CALL TO ORDER	Chairperson Fatima Vazquez advised the public to please recheck the directions for updates prior to the start of the meeting. She announced that this meeting would be conducted in accordance with the provisions of the Ralph M. Brown Act, allowing members of the Executive Community Advisory	

Committee, members of the public and staff to participate via teleconference, because State and Local officials are recommending measures to promote social distancing. Accordingly, members of the public should join this meeting via teleconference as follows: https://us06web.zoom.us/j/86483166206

Teleconference Call –In information/Site
Call-in number: 1-415-655-0002 Participants Access Code: 2491 441 1996 (English)
Call-in number: 1-415-655-0002 Participants Access Code: 2498 180 1908 (Spanish)

Members of the Executive Community Advisory Committee or staff may also participate in this meeting via teleconference. The public is encouraged to submit public comments or comments on Agenda items in writing by email to COEpubliccomments@lacare.org or by sending a text or voicemail to (323) 541-7900.

Attendees who log on using the URL above will be able to use "chat" during the meeting for public comment. Attendees must be logged into Zoom to use the "chat" feature. The log in information is at the top of the meeting Agenda. This is a new function during the meeting so public comments can be made live and direct.

1. The "chat" will be available during the public comment periods before each item.
2. To use the "chat" during public comment periods, look at the bottom of the screen for the icon that has the word, "chat" on it.
3. Click on the chat icon. It will open a window.
4. Select "Everyone" in the To: window.
5. Type the public comment in the box.
6. After hitting the enter key, the message is sent and everyone can see it.
7. The chat message, text, voicemail, or email must indicate if the submitter wishes to be identified or remain anonymous, and must also include the name of the item to which the comment relates.
8. L.A. Care staff will read the chat messages for up to three minutes during public comment so people who are on the phone can hear the comment.

Your comments can also be sent by text, voicemail, or email. If we receive your comments by 10:00 a.m. on December 14, 2022, it will be provided to the members of the Executive Community Advisory Committee at the beginning of the meeting. The chat message, text, voicemail, or email must indicate if you wish to be identified or remain anonymous, and must also include the name of the item to which your comment relates. If you do not indicate an Agenda item for your comment, your comment(s) will be read for up to 3 minutes at item VIII Public Comments on the Agenda.

Once the meeting has started, public comments should be submitted prior to the time the Chair announces public comments for each agenda item and staff will read those comments

	for up to three minutes. Chat messages submitted during the public comment period for each agenda item will be read for up to three minutes. If your public comment agenda is not related to any of the agenda item topics, your public comment will be read for up to 3 minutes at item VIII Public Comments on the agenda. These are extraordinary circumstances, and the process for public comment is evolving and may change at future meetings. We thank you for your patience. Please note that there may be delay in the digital transmittal of emails, texts and voicemail. The Chair will announce when public comment period is over for each item. If your public comments are not received on time for the specific agenda item you want to address, your public comments will be read at the public comment section of the agenda. The purpose of public comment is that it is an opportunity for members of the public to inform the governing body about their views. The Executive Community Advisory Committee appreciates hearing the input as it considers the business on the Agenda. All votes in a teleconferenced meeting shall be conducted by roll call. If you are an individual with a disability and need a reasonable modification or accommodation pursuant to the Americans with Disabilities Act please contact the Community Outreach & Engagement staff prior to the meeting for assistance by text (323) 541-7900 or by email to COEpubliccomments@lacare.org. Goals for today's meeting: 1. Receive an update from L.A. Care's Chief Medical Officer. 2. Receive an update from L.A. Care's Chief Executive Officer. 3. Receive an update from Government Affairs Department. 4. Receive recommendations from the ECAC ad-hoc committee – Disability Awareness Month. 5. Receive recommendations from the ECAC ad-hoc committee – African American Health Disparities. 6. Receive a presentation on the County of Los Angeles Delete the Divide. Idalia De La Torre, *Field Specialist Supervisor, CO&E*, confirmed attendance by roll call. Chairperson Vazquez read the ECAC Meeting Ground Rules and Meeting Guidelines. Meeting Ground Rules • We treat each other with respect • We raise our virtual hand icon and wait to be called on • We lower our virtual hand icon when done speaking • Only one member speaks at a time	

	• We speak up when something is wrong or not working: we confront issues not people • We do not personally attack each other Meeting Guidelines • ECAC Members will have three (3) minutes to speak on each agenda item • The ECAC Chair can reduce the time to two (2) minutes if time is limited • The three (3) or two (2) minutes allotment will be consecutive and may include questions, comments, and/or anecdotes as long as they fall within the time limit • If time is limited and ECAC members are unable to make a comment or ask a question, the member/s will be asked to forward their comment or question to CO&E staff for follow-up • The response will be recorded in the ECAC meeting minutes for that meeting • The L.A. Care staff schedule to provide an update or present during the ECAC meeting will be timed to ensure they stay within their allotted time. Chairperson Vazquez called the meeting to order at 10:14 a.m.	
APPROVE MEETING AGENDA	**The Agenda for today's meeting was approved.**	**Approved unanimously by roll call. 12 AYES (Byrd, Conteas-Wood, Lara, Mahler, McClain, McFerson, Poz, Romo, Salazar, Sanchez, Refugio, Vazquez)**
APPROVE MEETING MINUTES	Andria McFerson, *RCAC 6 Chair*, said that the meeting minutes were well written. She thanked Ms. Merkens for the Board seat election update. She noted that on page 12 of 16, where it reads "…she can nominate herself", it should read "…any member can nominate themselves." **The November 9, 2022 meeting minutes were approved with the changes noted above.**	**Approved unanimously by roll call. 12 AYES**
OLD BUSINESS		

L.A. CARE DIABETES PROGRAM	Rachel Martinez, *RN, Quality Management Nurse Specialist, Quality Improvement Department,* gave a presentation about L.A. Care's Diabetes Program *(a copy of the presentation can be obtained from CO&E).* Layla Gonzalez, *Member Advocate, Board of Governors*, thanked Ms. Martinez for her presentation. She asked about the different languages the postcards will be offered in. She also would like to know if L.A. Care has the current mailing address for members. She noted that not all members have completed their eligibility redetermination. Ms. Martinez responded that those are great questions. She said that the postcards are in English and Spanish, but members can reach out to L.A. Care and request their language of preference. She stated that having correct information for members can sometimes be a challenge. L.A. Care works with providers to ensure that it has the correct address. Hilda Perez, *Member Representative, Board of Governors*, thanked Ms. Martinez for the information presented. She appreciates that her presentation was short and concise. She noted that the last slide has more information about asthma and hopes she presents information about that subject at a later meeting. She asked for clarification about the number of texts are sent out and asked if these messages are sent to all L.A. Care members or just to adults. Ms. Perez would also like to know what is included in the test kit and said that she likes the concept of returning it via mail. Ms. Martinez responded that she is glad Ms. Perez brought up the issue of texting. She noted that members have to approve L.A. Care's text messaging service. Text messages are sent only to members that have agreed to receive messages from L.A. Care and have been identified as being diabetic. She said she will provide more information about the test kits a later meeting, after she has done some research. Member McFerson said that she has friends that passed away because they were reluctant to go see a doctor. She said at home test kits are a great idea, because they can take the tests at their home where they are more comfortable. Ms. Martinez thanked Member McFerson for her comments. Silvia Poz, *RCAC 4 Chair*, asked how members can access this program and can people that don't have insurance participate in this program. Ms. Martinez responded that members should call L.A. Care so it has the member's correct information and then inquire on these programs. She said that these programs are specifically for L.A. Care members. Estela Lara, *RCAC 2 Chair*, thanked Ms. Martinez for her presentation and asked her if L.A. Care also sends out emails in regards to these programs, because sometimes people get charged for texts messages. Member Lara asked if members must first call their provider to participate in the program. She thanked Ms. Martinez for everything that she is doing for L.A. Care members. Ms. Martinez encouraged members to call L.A. Care and make sure it	

	has their correct information on file. L.A. Care will use a list of members that have been identified with these conditions. Sometimes members switch to L.A. Care from a different health plan and L.A. Care is not aware that they have these conditions. Incoming members must reach out to L.A. Care to update their information and make L.A. Care aware of their condition.	
STANDING ITEMS		
BOARD MEMBERS REPORT	Ms. Gonzalez and Ms. Perez reported (a copy of the report can be obtained from CO&E): Ms. Perez welcomed all the ECAC and RCAC members that are present at the meeting today. The Board of Governors met on December 1. Meeting information and packets are available on L.A. Care's website. • The list of motions approved at that board meeting is available from CO&E or Board Services. • John Baackes, *Chief Executive Officer*, introduced Dr. Sameer Amin, the new Chief Medical Officer. • Alex Li, *MD*, *Deputy Chief Medical Officer*, presented the December 2022 Chief Medical Officer report and gave a COVID-19 update. – L.A. Care scored well in its Managed Care Accountability Set scores with regards to HEDIS scores and Quality Improvement performance. L.A. Care shared its findings with the state. Two measures were not met, mostly due to the Public Health Emergency. L.A. Care did relatively well and reached the 50th percentile in its Medi-Cal measures. The Quality Improvement department will implement a number of interventions in the upcoming year. – L.A. Care continues to work with community partners such as First5LA and Health Net to improve patient care, access for members and other activities for health information exchange. • Cherie Compartore, *Senior Director, Government Affairs,* reported: – Governor Newsom called the legislature back for a special session starting December 5, the same day members of the new legislature take the oath of office. The purpose of the special session is to apply windfall profits that are owed by the oil and gas industry over the past year. The oil and gas industry is blaming a surge in gas prices on an increase in oil prices, while the industry is reporting record high profits. Governor Newsom has not reported how the taxes will work or what the revenue will be. Special sessions are intended to be a one subject issue, but sometimes other subjects get loosely attached to these meetings. Government Affairs will continue to monitor.	

	– The Legislative Analyst Office reported that state revenues are likely to be far less than the Governor had anticipated when making the 2022-2023 Budget. They are projecting a $25 billion loss for the 2023-2024 Budget. If the state goes into recession the deficit could be higher going from $30-$50 billion. There is no discussion yet as to what the Governor's January draft budget plan will have in it. PUBLIC COMMENT **Public Comment via phone message on December 14, 2022 at 10:21am from Elizabeth Cooper, RCAC 2 Member:** *Hilda Perez, and Layla Gonzalez, Thank you for your leadership and I hope during your time that you are still on the board, that you continue to listen to the members concerns so that you can bring them before the Board of Governors and those who you serve. Again, thank you for your leadership and I hope that you continue to listen to member's issues and concerns to the Board of Governors.* Member McFerson asked if the Ralph M. Brown act motion approved at every Board meeting also related to ECAC and the RCACs. She asked if this means that meeting will no longer be virtual. She asked if they can build more public involvement they used to in order to make sure that they publicize proper healthcare, preventive healthcare, and make it so that people can more routinely go to their doctors and just different things like that. She said that many people don't like doing those things so that would be great for members to have an opportunity. She would like to create a plan for more member involvement in 2023. Ms. Perez responded that staff is more prepared to provide an answer to her questions, because her questions have more to do with the operations of the organization. She said that as a board member she reads this information and meets in subcommittees prior to the meeting to discuss all of this. At the end of the day, it's not only her vote, it's a democratic process. Ms. Gonzalez stated that the Ralph M Brown Act is voted on by the Board so that L.A. Care can hold hybrid public meetings, both virtually and in person simultaneously. Chairperson Vazquez advised members that they are over the allotted time for this agenda items and asked members to submit their questions to staff by email.	
UPDATE FROM CHIEF EXECUTIVE OFFICER	Mr. Baackes gave the following update: He reported that there is a lot going on at L.A. Care right now. L.A. Care is wrapping up what has been a very challenging year as COVID-19 continues to be present in communities and has impacted all kinds of things such as people that were reluctant to go out to receive healthcare services and L.A. Care grapples with those things every day. He reported that	

	last Friday L.A. Care held a gun violence prevention session, which was hosted in conjunction with the L.A. Department of Public Health Office of Violence Prevention. ECAC members were invited and he saw many of them and spoke to some. He thinks the takeaways from that conference will continue to involve the ECAC and RCAC members as L.A. Care begins to look for ways the community can come together to address gun violence. It is more than just advocating for more than mental health services, it is the beginning step to identify interventions before somebody resorts to using a gun in a particular situation. He was delighted that L.A. Care was able to organize the event. Medi-Cal Redeterminations As L.A. Care looks ahead to next year, it continues to track the Medi-Cal eligibility redetermination effort. It will probably begin mid-year 2023. It is important to get the word out to L.A. Care's 2.5 million Medi-Cal members that they are going to have to go through the eligibility redetermination process when it starts. It is critical to making sure that there is continuity of care for all members and the delivery of health care services is not interrupted. Mr. Baackes introduced Sameer Amin, *MD, Chief Medical Officer*, to the committee. Dr. Amin thanked Mr. Baackes for the introduction. He stated that it is an absolute honor to be able to speak at ECAC today and to be in this audience, because they are the individuals that are giving input that the organization needs to run effectively and tie itself to the community. He is an Interventional Cardiologist by training. He came out of his fellowship and residency understanding that he wanted to practice value-based care. This meant that he wanted to make sure that he wasn't just doing more things to the patient, but doing more things for the patient. He practices medicine in a way that will actually bring some value to their lives, improve their health, not just do procedures and tests. When he first started, he joined an organization called Healthcare Partners which has now turned into Optimum. When he joined, he had the intention of being an Intervention Cardiologist and waking up in the middle of the night and opening arteries when someone has a heart attack. He took on clinical leader positions. From then on he has been doing clinical leadership positions at various organizations. He joined Oscar Health as Chief Medical Officer. He met Mr. Baackes and heard the siren call of L.A. Care. He is excited to be the Chief Medical Officer. The one thing that ties all of that history together is his love of the community and treating vulnerable populations and those that most need access to high-quality care. Whether that was at Health Care Partners trying to provide that high value care or at CareMore where they have a very high population of special needs, elderly patients with multiple medical problems. He is very honored to be in this company and intends on leading with humility and passion. He hopes to develop a closer relationship with this group in the years to come.	

PUBLIC COMMENT

Public Comment from Elizabeth Cooper, *RCAC 2 Member,* via phone message on December 14, 2022 at 10:25am:

Mr. John Baackes, on behalf of myself and so many members I'm sure, I wish you good seasons for the members and your staff and I hope that there will still be so much concern and interest from the members and that is so very important and to please consider new issues to be brought to the Board and before L.A. Care.

Dr. Amin responded that masks work to reduce the infection rate, from COVID-19, the flu, or Respiratory Syndrome Virus. He has children at home, while they wore masks they didn't get sick and now they're in school and no longer wear masks. Now one of them is sick every day and he has been sick multiple times as well, so he knows that masks work.

Member McFerson said that they welcome all people that come out to represent members and make positive decisions about health care. She noted that Dr. Amin commented about masks. She asked if the RCACs can meet virtually due to many members having chronic illnesses. Some members do not want to get vaccinated, because they have had bad experiences. She asked if this is possible. Mr. Baackes responded that L.A. Care follows the guidance given by the L.A. County Department of Public Health, which has not issued mandatory mask guidance. L.A. Care plans to restart the RCAC meetings and the ECAC meetings both in-person and virtually. He noted that L.A. Care resumed its Board of Governors meetings as hybrid meetings where people can be in-person or they can participate virtually. He thinks that is going to be the new normal for quite a while, but will continue to follow the guidance from the Los Angeles County Department of Public Health.

Ms. Perez thanked Dr. Amin and Mr. Baackes for attending ECAC and speaking to members. She asked Mr. Baackes if staff will continue to work from home or will L.A. Care be implementing a hybrid method. Mr. Baackes responded that L.A. Care is officially operating remotely. No employees are required to come into the office except the Executives. Staff has been working remotely since March 14, 2020. L.A. Care had issues hiring nurses, because it announced it was going to go into a hybrid model while they preferred to work remotely. L.A. Care determined to meet the nursing requirements that it would all remain remote. It was driven by the fact that the lease at the 1055 West 7th Street building will expire September 2024. Prior to the public health emergency, it made the decision to vacate the building when the lease expires, because it's expensive and people spend too much time in elevators going to and from various meetings. L.A. Care notified staff that they will continue to work remotely until September 2024, when the company will relocate to its new office building.

	Member Lara welcomed Dr. Amin and Mr. Baackes to the meeting. She noted that ECAC members represent 2.3 million members spread out in 11 different regions. She said that L.A. Care including member participation is very unusual for most health plans, she thinks it gives them a certain responsibility toward members. She asked Dr. Amin how a heartbreak can affect a person's physical heart. Dr. Amin responded that as he is steps into this new role he is getting know the organization and services it offers, and he will be leaning on members and staff for as much support as possible. He appreciates how involved the community it with the organization. In response to Member Lara's question about heartbreak, he said that when hears about patient's social situation at home, it's oftentimes heartbreaking even for him to hear. Those who do better with their heart health tend to be those who have the support and home that they need, whether that's from family or friends. He visually sees it after someone has had a heart attack or a major heart event, if they have a good social network support, whether that is from their providers or friends or family, they tend to do better and recover faster. Russel Mahler, *RCAC 1 Chair*, welcomed Dr. Amin to the L.A. Care family. He asked Dr. Amin why some patients' providers are not being paid. This is an ongoing issue in the Antelope Valley. He said Demetria Saffore's therapist has not been paid in the last two years. Mr. Baackes asked that he provide more details to CO&E staff so this issue can be addressed. Deaka McClain, *Member At-Large*, pointed out that Dr. Amin's reason for wanting to take on a clinical leadership role was very powerful. She said that she a member representative for seniors and people with disabilities. She noted that they must be in a good mental place when visiting their doctors. They want to feel supported and feel like they're heard and oftentimes they come to the meetings and they are told they are not being heard or rushed through their appointment. She asked Mr. Baackes if the new office building will be accessible to people with disabilities. Mr. Baackes responded that the new building is totally accessible.	
COMMUNICATION AND COMMUNITY RELATIONS DEPARTMENT UPDATE	Auleria Eakins, *Ed. D, Manager, CO&E*, gave a Communications and Community Relations Department Update *(A copy of the full report can be obtained from CO&E.)*. Member McFerson thanked Dr. Eakins for her update and is happy to hear that there is a survey conducted every year by L.A. Care that covers things like that. She said that they definitely need to touch more on things that are affecting the L.A. County community. The suicide rate and all the different kinds of things having to do with that. They would do well in contributing to L.A. Care's information on what is affecting the community as far as the social determinants of health, because that does impact member's health care conditions such as high blood pressure and mental health as well. She looks forward to having some	

	sort of survey that touches base on more things that are affecting their own communities with their input. Member Poz stated that if cases continued to go up will CO&E think about doing something different aside from meeting in person. She is concerned, because her health is not good. She is scared to meet in person even with a mask on. Ms. De La Torre stated that she is noting members concerns and they will be addressed later by staff. Member Mahler pointed out that L.A. Care has turned a blind eye to patient dumping. He knows of neighbor that was taken to a hospital to Las Vegas from the Antelope Valley. He would like L.A. Care to launch an investigation into this case. This happened under L.A. Care's watch. Dr. Eakins stated that ECAC will have a presentation on suicide prevention and the new county suicide prevention line 311 as this continues to be an important topic. She noted that a DJ that appeared on The Ellen Show committed suicide. Disability Awareness Month will be in March 2023. She advised the committee that they were able to hire two new employees that will be joining CO&E in January. The committee has been asking to return to in person meetings. CO&E is closely following data from the County in regards to COVID-19 and RSV, at this time it will be difficult to assess if meetings can be conducted using a hybrid model, as the technology necessary for multiple languages is challenging. She also advised Member Mahler that she will have a Field Specialist reach out to him.	
MEMBER ISSUES	Member Lara asked if there are heaters available for members due to the frigid weather. Dr. Eakins responded that L.A. Care can't provide heaters to members and recommended that they reach out to utility department in their city, they may have funding to assist with heating in people's homes. Member Poz asked if members will be getting a $25 stipend for the November and December meetings. Ms. De La Torre responded that staff will provide an answer at a later meeting. Member McFerson said she has spoken to a whole lot of people from many different perspectives. Member issues having to do with the LGBTQ+ community and how they're programmed but they're not spread throughout L.A. county and actually have a doctor that wants to have some sort of program available. She has a member that she knows that goes to the doctor at this point, and everything is so dismissive. If they don't have COVID-19 they question why they are even there. Before they are able to speak, the doctor is being rude and it's not healthy. Almost like you have to self-diagnose yourself and do what I'm doing right now, trying to fit everything in two minutes, that is rough, especially when you	

	have a whole lot of different health issues going on. She suggested empathy training for providers.	
NEW BUSINESS		
COMMUNITY OUTREACH & ENGAGEMENT (CO&E) TOLL FREE LINE	Martin Vicente, *Field Specialist, CO&E*, presented information about the CO&E Toll Free Line *(A copy of the presentation can be obtained from Board Services.).* PUBLIC COMMENT **Submitted by Carrie Broadus on December 14, 2022 via Chat Box:** *What's the Awareness Campaign for the Toll Free Line. Also, can the Toll Free Number be used for Voting? Real-time engagement with members with ECAC and RCACs convenings.* *Can the Toll Free # be utilized during your meetings?* Mr. Vicente responded that CO&E just finished setting up this toll free line. The next step is to campaign and get this number out to its members and the public.	
MOTION TO ECAC	Member McFerson presented a motion to ECAC. ***Motion: I, Andria McFerson, Chair of RCAC 6 file a motion for an ad-hoc team to work on a potential, feasible questionnaire or survey for relative participants of our community needing proper effective healthcare. This questionnaire can also give L.A. Care instructive information about our members.*** PUBLIC COMMENT **Public Comment from Elizabeth Cooper, *RCAC 2 Member*, via phone message on December 14, 2022 at 10:26am:** *Hello regarding the motion for ECAC by Ms. Andria McFerson. I was wondering if she would add a friendly addendum to her motion, and inclusion of other issues, healthcare and housing etc. Many consumers of L.A Care are facing issues and does impact health, mental health, physical health and social health and is part of the definition of health. I just want to wish that Andria add a friendly addendum to her motion from the public and also members of the RCAC.* Cynthia Conteas-Wood, *RCAC 3 Chair*, stated that she is concerned that this is a huge concept. She is not sure how participants of their community need proper effective care. She believes it applies to everyone. She said the committee needs to figure out what the goal is and it should be considered in the motion. She said thinks this can be overwhelming. Member McFerson stated that there is discrimination in all aspects. There is discrimination with healthcare, with the Black community, with the low-income community and they need	

	to address those issues by having input through an ad hoc to know what is affecting their community the most. Member McClain thanked Member McFerson for bringing this up to the committee. She understands where she is going with this, but also understands Member Conteas-Woods concerns. She asked Member McFerson for clarification about her motion. Member McFerson responded that effective healthcare has everything to do with social determinants of health. That means that the ad hoc committee would definitely touch on just different things. The first survey would adhere to different things, but first the ad hoc would have to discuss it. Member McClain asked how will this reach L.A. Care members. Member McFerson responded that they have Family Resource Centers, outreach, and they work with different places like the YMCA and the American Heart Association. They can work with Venice family clinic. Dr. Eakins stated that based on the information and the feedback that she provided in her presentation in terms of the investigation that she did with internal departments, this particular motion was written improperly, the process of creating this survey is under the administrative jurisdiction of L.A. Care. Member McFerson said she understands what she is saying, but they've been doing this for a long time, giving back to the community and they've been having ad hocs for a long time. Nothing changes that and the ad hoc would basically come up with feasible solutions to different outreach that they need to have. They are limited with their COVID-19 interactions and just different things like that. Member McClain asked if there is something similar to the survey that can be done. Dr. Eakins responded that the only thing she can say is that they can work with the Quality Improvement department to express the concerns that are raised in terms of the areas that they believe that more information can be gathered to assist L.A. Care and its understanding of its members. She said that the motion is really not clear. And if we sent it as written, they wouldn't get any feedback or traction because it's not really clear exactly what they want to do. Member McFerson said the motion is on the table and they must call for a vote. Chairperson Vazquez called for a roll call vote.	**Approved by roll call. 6 AYES (Byrd, Mahler, McFerson, Romo, Salazar, Sanchez)** **3 NAYS (Conteas-Wood, Refugio, Vazquez)** **2 ABSTENTIONS (Lara, McClain)** *(Member Hernandez and Member Poz were not present and did not cast a vote)*
FUTURE AGENDA ITEMS		

	Ms. Perez stated that she would like to revisit the relationship that the RCACs and ECAC have with the community resource centers. She noted that in the past members have expressed the lack of communication from the community resource centers and L.A. Care members. She would like a Regional Manager to present at an ECAC meeting.	
PUBLIC COMMENTS		
	Submitted by Diana Leff on December 13, 2022 at 6:10 pm via email: *What are they doing to make sure that there are many small children with lung problems and having difficulty breathing* **Public Comment from Jonathan Cooper via phone message on December 14, 2022 at 10:19am:** *Good morning from Johnathan Cooper, I would like to bring this issue before the members, good morning members of the ECAC and the Chair, staff and Mr. John Baackes, Chief Executive Officer of L.A. Care. First, I would like to say to everyone, Merry Christmas, Happy Hanukah, Happy Holidays, Feliz Navidad, and Happy Kwanza.* *My name is Johnathan of L.A. Care I would like to thank you all to the service provided to the members of L.A. Care for the year 2022. I look forward to gaining more support for issues being addressed and concerns for all the members including the disabled for this year.* *Happy Holidays once again an as a consumer of L.A. Care, I look forward to the supports that are given to all the member including those with a disability and L.A. Care Members.* **Public Comment from Elizabeth Cooper, *RCAC 2 Member*, via phone message on December 14, 2022 at 10:21am:** *Good morning, My name is Elizabeth Cooper and the wishes that Johnathan Cooper shared, I would like to wish it to all the members of L.A. Care but first I would like to speak regarding the agenda. The telephone number that you give on the agenda is kind of confusing because you speak about call in numbers and then voice mail and that should be clear that's public comment but that wasn't the reason why I was calling. One thing I would like to speak about the agenda items on the L.A. Care agenda for today's approval on old business. I do think that is a very important issue for old business for the Diabetes Program.* *I appreciate speaking by on the Diabetes program and services but I would like to inquire to the R.N, Nurse Rachel Martinez from Quality Management, regarding the new machines that take your blood sugar level, is it possible that*	

	Medicare or L.A. Care would approve that for diabetics to help them monitor the blood sugar, I was just curious to ask that and if not why not. **Public Comment from Demetria Saffore on December 14, 2022 at 10:32am:** *This a public comment on behalf of the Mom who's son was dumped out of the hospital here in Palmdale her name is Toni Clark. I'm making a public comment on my behalf, I want to know why are my providers not being paid? My therapist from Becon Health has not been paid in Two Years!* **Public Comment from Elizabeth Cooper, *RCAC 2 Member*, via phone message on December 14, 2022 at 12:10pm:** *Its was kind of confusing how you call in I do feel that the public and the RCACs are allowed more input in matters for the ECAC. And I think all the ECAC members including the chair and staff fr all of their hard work that they have done for the year 2022 and hopefully it would be even more so for the members and inclusion of the RCACs. Thank you very much,*	
ADJOURNMENT	Chairperson Vazquez thanked the interpreters, L.A. Care staff, and the public for attending. The meeting was adjourned at 1:20 p.m.	

RESPECTFULLY SUBMITTED BY:
Victor Rodriguez, *Board Specialist II, Board Services*
Malou Balones, *Board Specialist III, Board Services*
Linda Merkens, *Senior Manager, Board Services*

APPROVED BY
Fatima Vasquez (due to public health orders the document will be signed when it is possible)
Fatima Vasquez, *ECAC Chair* _____
Date 1/11/2023

L.A. Care HEALTH PLAN

Board of Governors
MOTION SUMMARY

Date: February 2, 2023 **Motion No. EXE 101.0223**

Committee: Executive **Chairperson:** Al Ballesteros, MBA

Issue: Approval of L.A. Care's 2023 State and Federal Policy Agenda.

☐ **New Contract** ☐ **Amendment** ☐ **Sole Source** ☐ **RFP/RFQ was conducted**

Background: In accordance with the process approved by the L.A. Care Governing Board, below is L.A. Care's proposed 2023 State and Federal Policy Agenda (Policy Agenda) for consideration.

This Policy Agenda contains principles and policies that serve as the framework for the development and advocacy of positions on federal and state legislative, administrative, and budget issues. This Policy Agenda provides guidance for L.A. Care's Government Affairs Department to respond effectively to proposals that could significantly impact L.A. Care's strategic and operational interests. **For each proposal considered by L.A. Care, due consideration will be given to the financial and work burdens placed on healthcare providers and efforts will be taken to minimize those burdens whenever possible.**

2023 State and Federal Policy Principles

Federal Funding and Coverage

1. Retain coverage expansions and subsidies accomplished by the Affordable Care Act (ACA), including proposals that codify ACA provisions in state statute.
2. Support proposals that stabilize the marketplace (Covered California individual market).
3. **Support proposals that provide federal stimulus funds for government-sponsored programs in public health emergency relief legislation**
4. Oppose efforts by the federal government to recoup Medicaid matching funds.

Public Plan Protection

5. Support proposals that strengthen L.A. Care as the Local Initiative plan in Los Angeles County.
6. Support proposals that build upon California's public Medi-Cal managed care plans to create a local, regional, or statewide Public Option and to continue efforts to ensure L.A. Care is recognized as a Public Option in L.A. County.
7. **Support proposals that advocate for required transparency by state government entities, such as DHCS, DMHC when awarding health plan contracts in the Medi-Cal program.**

Eligibility, Benefits, and Enrollment

8. **Support proposals to expand full-scope Medi-Cal and healthcare subsidies (Cov. CA) to all residents, regardless of age or immigrant status.**
9. **Support proposals that limit unwarranted coverage loss due to Medi-Cal redetermination process and ensure coverage transitions to Covered California, Medicare or employer-sponsored insurance are successful.**
10. **Support proposals that allows close collaboration between states, counties and managed care plans in the Medi-Cal redetermination process (e.g., sharing renewal files with plans to conduct outreach; allow plans to obtain and update beneficiary info; and allow plans to outreach to beneficiaries who lose coverage for procedural reasons).**

11. Support proposals that simplify and coordinate the Medi-Cal enrollment and redetermination processes with existing programs (e.g., CalFresh, universal consent for communications, enrollment into Medi-Cal due to loss of Covered California eligibility, etc.)
12. Support proposals that strengthen government-sponsored programs and increase no or low-cost health insurance coverage to the uninsured and low-income populations, without eroding existing coverage or access.
13. Support proposals that would eliminate barriers to eligible populations receiving health and social services benefits for which they qualify.
14. Support proposals that improve enrollment processes and policies impacting duals specific Medicare products, in order to enable membership growth in the duals product line.
15. Support value-based purchasing strategies that are geared towards achieving value through high-quality, cost-efficient member-centric care and that do not result in diminished coverage or benefits.
16. Support proposals that strengthen and improve existing government-sponsored programs in ways that support the safety net, including expanding program eligibility and increasing reimbursement.
17. Support proposals that promote home and community-based care for persons who would otherwise require institutionalization and that do not financially harm the health plan.
18. Support proposals that expand, simplify, or streamline access to behavioral health and substance use disorder services.

Quality

19. Support measures that result in improved quality and equity outcomes in government-sponsored programs, including integrated delivery and whole person care models.
20. Support proposals that improve quality outcomes, reduce racial disparities, and drive delivery system transformation through value-based initiatives, modernization of systems, and payment reform.

Rates/Reimbursement

21. Support proposals that increase transparency, accuracy, and appropriateness in the rate-setting process conducted by regulatory agencies (e.g., DMHC, DHCS, CMS, and Covered California).
22. **Support proposals that result in increased Medi-Cal base rate funding for the purposes of increasing provider rates in the Medi-Cal managed care program.**
23. Oppose efforts that continue the countywide averaging of Medi-Cal rates in its current form.
24. Support proposals that align financial incentives among providers, patients, health plans, and payers.
25. Support efforts that result in payment equity among government-sponsored programs (e.g., Medi-Cal payment levels being increased to Medicare payment levels).
26. Oppose proposals that shift the cost burden of pandemic testing primarily to health plans, with no consideration of additional reimbursement from the federal or state governments.

Access to Care

27. **Support proposals to expand the safety net for comprehensive family planning services, including for Medi-Cal eligible and undocumented people**
28. Support proposals that increase California's health care workforce and address the shortage of appropriate health care providers in underserved communities in order to enhance provider access for Medi-Cal enrollees.
29. Support proposals that encourage rigorous evaluations comparing clinical, risk-adjusted patient outcomes for licensed health care professionals. The results of these evaluations will inform the discussions and deliberations surrounding the scope of practice for licensed practitioners; including their initial and ongoing education, training and supervision, in order to assure they work within their entire scope of practice to deliver safe, culturally competent, high-quality health care.
30. Support proposals that encourage team-based training of groups of medical professionals with different licensure and for these groups to practice team-based medical care. Consideration should also be given to having value-based performance rewards for teams as a whole.

31. Support proposals allowing scope of practice expansion under a particular type of license, only if the public interest is clearly protected by commensurate changes in: education and training standards; testing for knowledge and clinical proficiency; and expectations for life-long learning.
32. Support proposals that establish a Graduate Medical Education Governance Council that would expand graduate medical education to match the needs of California's growing and diverse population, especially in geographically underserved areas.
33. Support proposals to expand the capacity for physician (M.D. and D.O.) residency positions and creating residency positions for Nurse Practitioners who desire additional training. Proposals to expand the number of residency positions that focus on educating individuals to provide medical care to vulnerable and underserved patient populations are considered high priority; especially if they expand primary care positions.
34. Support proposals that improve and expand access to telehealth/virtual care health services and create long-term policy to utilize technology that improves access to care (including community clinics) and include appropriate compensation.
35. Support proposals that expand access to technology to access telehealth services (e.g., broadband expansion devices, and affordable internet services).
36. Support policies that would establish mental health hotlines and expand mental health services and community workforce to meet increased need.

Social Determinants of Health/Equity

37. Support policies that improve social conditions and quality of life for low-income populations, including policies that support economic stability, education, food security, housing and healthy physical environments.
38. **Support proposals that provide ongoing funding for housing and services for those experiencing homelessness with options for individuals with higher levels of care needs, such as Adult Residential Facilities (ARFs) and Residential Facilities for the Elderly (RCFEs).**
39. **Support proposals which provide funding to meet the housing and related supportive service needs of vulnerable populations, including people experiencing homelessness, veterans, elderly, populations with disproportionate housing challenges, people with disabilities, justice-involved individuals and those with serious mental illness and/or substance use disorder. Furthermore, support proposals for these populations that expand the access and availability of housing.**
40. **Support proposals that provide funding and expand eligibility to food assistance programs to Californians of all ages, regardless of immigration status**
41. Support proposals that would change policies, behaviors, and beliefs that perpetuate racism by identifying and addressing those policies and practices in areas where L.A. Care has control or influence, such as employment, contracting, and the provision of medical services.
42. Support programs to address implicit bias in policing and the development of funding mechanisms that support mental health rapid response units that can de-escalate a mental health emergency.

Health Information Technology

43. Support the use of health information technology and interoperability that would result in cost-savings, patient care improvement, and greater health equity.
44. Support sustainability of regional Health Information Exchanges or Organizations when they demonstrate clear benefit.
45. Support proposals that improve health and social services information sharing to address needs and gaps, especially in vulnerable and minority communities.
46. Support policy that improves collection and reporting of REAL (Race, Ethnicity, and Language) and Sexual Orientation and Gender Identity (SOGI) data for members and providers.

Fraud

47. Support the strengthening of anti-fraud measures and programs, and provide the ability of health plans and payers to recover lost funds.

Member Impact: L.A. Care supports public policies that increase resources for the safety net, and/or leads to improved access and quality of health care services for its members.

Budget Impact: Sufficient funds are budgeted in the Government Affairs Department budget for this fiscal year. We will budget the balance in future fiscal years.

Motion: To approve L.A. Care's 2023 State and Federal Policy Agenda, as submitted.

Board of Governors
MOTION SUMMARY

Date: February 2, 2022 **Motion No. EXE 101.0223**

Committee: Executive **Chairperson:** Al Ballesteros, MBA

Issue: Request to increase delegated authority from $70 to $110 million to implement investments for the Housing and Homelessness Incentive Program (HHIP), and to make investments to support the program, including to the Los Angeles County CEO Homeless Initiative for Strategic Housing Investments.

☐ **New Contract** ☐ **Amendment** ☐ **Sole Source** ☐ **RFP/RFQ was conducted in** <<year>>

Background:

HHIP Overview

The Housing and Homelessness Incentive Program (HHIP) is a Department Health Care Services (DHCS) incentive program for Medi-Cal Managed Care Plans (MCPs). There are two goals for HHIP: to help MCPs develop the capacity and partnerships to connect members to needed housing services, and to reduce and prevent homelessness. L.A. Care is eligible to receive up to $290 million for completing 17 metrics related to improving infrastructure, services, and access to housing for members experiencing homelessness. HHIP funds are one-time and must be earned by March 2024, but they can be spent over a longer timeframe (e.g. 5-10 years or more). All funds are considered earned when L.A. Care receives them (i.e. there is no claw back provision).

HHIP Program and Financing Current State

L.A. Care has been working diligently over the past year to achieve HHIP metrics and further the program goals. L.A. Care completed the first two HHIP submissions to DHCS, our Local Homelessness Plan (LHP) and Investment Plan (IP) and received payment in full for both.

Staff recently reassessed L.A. Care's ability to meet the HHIP measures and developed the following revised estimates:

Program Stage	Measurement Period	Report Due to DHCS	Expected Payment Timing	% of funds	Potential Earnings	Actual / Expected Earnings
Local Homelessness Plan (LHP)	Jan-Apr 2022	6/30/2022 & 8/12/2022	Sep-22	5	$ 14,504,809	$ 14,508,802
Investment Plan	N/A	9/30/22	Dec-22	10	$ 29,009,617	$ 29,017,605
Measurement Period 1	May-Dec 2022	2/28/23	May-23	35	$ 101,533,660	$ 78,347,532
Measurement Period 2	Jan-Oct 2023	12/31/23	Mar-24	50	$ 145,048,085	$ 102,221,107
HHIP Program (Total)	Jan 2022 – Oct 2023	N/A	Mar-24	100	$ 290,096,170	$ 224,095,045.92

Please note the following considerations:

- L.A. Care's expected earned funding from HHIP increased from an estimated $211 million in September 2022 to an estimated $224 million at this time, and may further increase modestly due to recent guidance changes.
- Estimated earnings for Measurement Period 1 are pending performance data for quantitative measures. More information will be available after the Measurement Period 1 report to DHCS on March 10, 2023.

Board Request 1: Approve HHIP Investments of Up to $110 million
In October 2022, the L.A. Care Board of Governors approved the HHIP Investment Priorities, which align with Health Net's local HHIP priorities and with the Los Angeles County CEO Homeless Initiative framework. The Board also authorized L.A. Care to allocate funds to implement an Investment Plan (IP) of up to $70 million.

At this time, L.A. Care is requesting approval of an additional $40 million for the HHIP Investment Plan in this fiscal year, up to a new threshold of up to $110 million. Investments are being made quickly to enable L.A. Care to meet HHIP metrics by the end of Measurement Period 2 on October 31, 2023, so that L.A. Care can earn the remainder of the available incentive funds. Going forward, HHIP revenue and expenditures will be included in budget forecasts for the Board.

Board Request 2: Approve Strategic Housing Investments to L.A. County CEO Homeless Initiative
L.A. Care is partnering with Health Net to implement HHIP Strategic Housing Investments to meet HHIP metrics and address urgent unmet needs for people experiencing homelessness. L.A. Care will implement these strategies via agreements with the Los Angeles County Chief Executive Office Homeless Initiative (CEO HI), which is the central coordinating body of Los Angeles County's ongoing efforts to expand and enhance services for people experiencing or at risk of homelessness.

L.A. Care is requesting authority to negotiate and execute a $50 million initial investment to CEO HI, as well as delegated authority to commit up to $30 million more in April 2023, contingent upon L.A. Care's internal assessment of expected earnings of at least $40 million for Measurement Period 1.

Planning for the two investments in quick succession will allow the CEO HI team to move swiftly to achieve as much as possible before HHIP Measurement Period 2 ends on October 31, 2023, and will also fund continued activities. These investments will be one-time funding for six years. Depending on CEO HI performance and on future HHIP earnings, L.A. Care also intends to make additional substantial investments for this purpose in 2024.

The two strategies for this effort are:

- Unit Acquisition Strategy: This strategy will increase utilization and decrease time to lease for people experiencing homelessness with tenant-based housing vouchers. The investment will create a backfill fund to pay non-rent costs of "master leasing" between 1,700 to 1,900 expected additional units so that they can be available for voucher holders, and will also support program staff and evaluation. The table below shows the estimated breakdown of units by partner and time period:

Deliverables	L.A. Care: Initial Commitment	L.A. Care: Additional Commitment	Health Net Commitment	Expected Units for Project	Expected Completion Date
Units secured using HHIP funding paired with tenant-based housing subsidies.	482	287	341	1,100	October 31, 2023
	264	157	179	600	December 31, 2024

The number of units for each funding commitment and expected completion date are estimates. The actual number of units could vary but the total of 1,700 minimum expected units is not impacted.

- Activities of Daily Living (ADL) Expansion Strategy: This strategy will create a faster pathway into service-enriched housing for people experiencing homelessness who need help with their ADLs. There are three sub strategies: 1) The implementation of four Enhanced Care Assessment (ECA) teams who can assess the ADL needs of people experiencing homelessness and refer them to appropriate services; 2) A program to provide 100 slots of personal caregiving services in interim housing so that participants have a chance to stabilize while being referred to In Home Supportive Services and/or Community Supports, and; 3) Enriched Residential Care, a program that places people experiencing homelessness who need ongoing care and supervision in licensed residential care settings such as Adult Residential Facilities (ARF) and Residential Care Facilities for the Elderly (RCFE). Investment funds will support program costs, program staff, and evaluation.

Board Request 3: Approval of Additional Grant or Incentive Agreements to Achieve HHIP Metrics
L.A. Care plans to implement some additional HHIP investment activities through grant, incentive, or other investment initiatives. Consistent with L.A. Care Policy, individual grant requests over $500,000 for HHIP require Board approval. At this time, L.A. Care requests approval to make grants, incentives, or funding agreements of over $500,000 with the partners below for the purposes below:

HHIP Investment Activity	Description	Partner	Grant, Incentive, or Investment Amount of up to:	HHIP Measures Impacted
Data Infrastructure Support for CoCs	Funding to support monthly data exchange with L.A. Care and for to integrate the LAHSA Homeless Management Information System (HMIS) with the City of Long Beach's HMIS.	LAHSA	$3,200,000	1.1, 1.4, 2.2
Data Infrastructure Support for County Partners	Funding for DMH to integrate housing related data and support data exchange with L.A. Care.	City of Long Beach	$1,225,000	1.5

Actual amounts may be less. Additional partners may be identified for future investments.

Upcoming Activities
L.A. Care will continue to share information with the Board regarding HHIP achievements, earning, and investments over the months and years to come. Additional investments and grants will also come to the board for review and approval if needed.

There will also be opportunities to increase spending in planned investment categories and to add new activities based on estimated and actual earnings for Measurement Periods 1 and 2.

Member Impact: L.A. Care members will benefit from this motion through improved infrastructure to identify, assess, intervene, and evaluate outcomes for members experiencing and at risk of homelessness, as well as expansion of housing-related services and improved access to housing. While some HHIP investments will target infrastructure or improve housing access for all people experiencing homelessness in Los Angeles County, homeless members and members at risk of homelessness will also benefit both directly and indirectly.

Budget Impact: The costs are anticipated to be covered entirely via HHIP funding received from DHCS in Fiscal Years 2022, 2023, and 2024.

Motion:

1. **To increase approval of investments for Housing and Homelessness Incentive Program (HHIP) from $70 million by $40 million, for a new total of up to $110 million.**
2. **To authorize the CEO or his designee to negotiate, finalize, make any necessary changes, and execute an agreement and any other documents necessary to implement an investment to the Los Angeles County Chief Executive Office Homeless Initiative (CEO HI) of $50 million for HHIP Strategic Housing Investments.**
3. **To authorize the CEO or his designee to negotiate, finalize, make any necessary changes, and execute an agreement and any other documents necessary to implement an investment to CEO HI of an additional $30 million for HHIP Strategic Housing Investments, contingent upon L.A. Care's internal assessment of expected earnings for HHIP Measurement Period 1 of $40 million.**
4. **To authorize the CEO or his designee to negotiate, finalize, make any necessary changes, and execute an agreement and any other documents necessary to implement grants, incentives, or other funding agreements of up to the amounts listed for the below:**
    a. **The Los Angeles Homeless Services Authority: Up to $3.2 million**
    b. **The L.A. County Department of Mental Health: Up to $1.225 million**
5. **Delegate authority to the CEO to adjust HHIP Investment Plan amounts, priorities, and recipients above to align with evolving implementation needs. All other policies and procedures related to grant making and expenditures will remain in place.**

January 24, 2023

TO: Executive Committee, Board of Governor

FROM: Sameer Amin, *Chief Medical Officer*

Karl Calhoun, *Director of Safety Net Programs and Partnerships*

SUBJECT: Housing and Homelessness Incentive Program (HHIP) Request to Increase Delegated Authority from $70 to $110 million for investment implementation, and to make investments to support the program, including to the Los Angeles County CEO Homeless Initiative for Strategic Housing Investments

HHIP Overview

The Housing and Homelessness Incentive Program (HHIP) is a Deparrtment of Health Care Services (DHCS) incentive program for Medi-Cal Managed Care Plans (MCPs). There are two goals for HHIP: to help MCPs develop the capacity and partnerships to connect members to needed housing services, and to reduce and prevent homelessness.

HHIP funds were authorized through the American Rescue Plan Act and approved by Centers for Medicaid and Medicare Services (CMS) as part of the DHCS Home and Community Based Services Spending Plan. L.A. Care is eligible to receive up to $290 million for completing 17 metrics related to improving infrastructure, services, and access to housing for members experiencing homelessness. HHIP funds are one-time and must be earned by March 2024, but they can be spent over a longer time frame (e.g. 5-10 years or more). All funds are considered earned when L.A. Care receives them (i.e. there is no claw back provision).

HHIP Program and Financing Current State

L.A. Care has been working diligently over the past year to achieve HHIP metrics and further the program goals. One recent achievement was executing a data sharing agreement and conducting a member match with the Los Angeles Homeless Services Authority (LAHSA) to allow bidirectional information sharing, to meet HHIP metric 2.2. This match will provide L.A. Care with important information about which members are experiencing homelessness, which homeless services providers are serving them, and if they have been placed in interim or permanent housing, and will provide LAHSA (and in the future, other local homeless services Continuums of Care (CoCs)) with information on members' Medi-Cal plan, provider, and Enhanced Care Management (ECM) and Community Supports (CS) relationships.

L.A. Care has also included key partners in the design and development of our HHIP strategy. L.A. Care and Health Net jointly convene a monthly workgroup of local agency partners, including Plan Partners, SCAN Health Plan, the four CoCs (LAHSA, as well as the Cities of Glendale, Long Beach, and Pasadena), the L.A. County CEO Homeless Initiative (CEO HI), and the Los Angeles County Departments of Health, Mental Health, and Public Health. L.A. Care has also sought feedback on HHIP investment priorities from local health and homeless services provider and community stakeholders through quarterly community forums and presentations to LAHSA's Lived Experience Advisory Board.

L.A. Care completed the first two HHIP submissions to DHCS, our Local Homelessness Plan (LHP) and Investment Plan (IP) and received payment in full for both.

Staff recently reassessed L.A. Care's ability to meet the HHIP measures and developed the following revised estimates:

Program Stage	Measurement Period	Report Due to DHCS	Expected Payment Timing	% of funds	Potential Earnings	Actual / Expected Earnings
Local Homelessness Plan (LHP)	Jan-Apr 2022	6/30/2022 & 8/12/2022	Sep-22	5	$ 14,504,809	$ 14,508,802
Investment Plan	N/A	9/30/22	Dec-22	10	$ 29,009,617	$ 29,017,605
Measurement Period 1	May-Dec 2022	2/28/23	May-23	35	$ 101,533,660	$ 78,347,532
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HHIP Program (Total)	Jan 2022 – Oct 2023	N/A	Mar-24	100	$ 290,096,170	$ 224,095,045.92

Please note the following considerations:

- L.A. Care's expected earned funding from HHIP increased from an estimated $211 million in September 2022 to an estimated $224 million at this time.
- Due to recent DHCS guidance changes received in early January, L.A. Care's expected earnings may further increase, due to reduced thresholds and the ability to earn partial points for some measures.
- Estimated earnings for Measurement Period 1 are still pending performance data for quantitative measures. More information will be available when L.A. Care completes the Measurement Period 1 report to DHCS on March 10, 2023.

Board Request 1: Approve HHIP Investments of Up to $110M

In October 2022, the L.A. Care Board of Governors approved the HHIP Investment Priorities, which align with Health Net's local HHIP priorities and with the Los Angeles County CEO New Homeless Initiative framework. The Board also authorized L.A. Care to allocate funds for an Investment Plan (IP) of up to $70 million.

L.A. Care is collaborating closely with Health Net and other partners to implement planned investment activities. HHIP funds will be allocated through a mix of: investment agreements; grants; provider incentives; provider contracts; vendor contracts; internal and Plan Partner health care and administrative spending on new HHIP-related activities and staff; and other agreements.

In the past few months, L.A. Care has clarified needed spending for planned HHIP investments, added projects in existing categories, and has added one new activity: Medi-Cal application and renewal assistance for people experiencing homelessness. With input from our partners, we added this activity to support continued access to coverage in light of the impending end of Medi-Cal continuous enrollment.

At this time, L.A. Care is requesting approval of an additional $40 million for the HHIP Investment Plan in this fiscal year, up to a new threshold of up to $110 million. Investments are being made quickly to enable L.A. Care to meet HHIP metrics by the end of Measurement Period 2 on October 31, 2023, so that L.A. Care can earn the remainder of the available incentive funds. Going forward, HHIP revenue and expenditures will be included in budget forecasts for the Board.

Board Request 2: Approve Strategic Housing Investments to L.A. County CEO Homeless Initiative

L.A. Care is partnering with Health Net to implement HHIP Strategic Housing Investments to meet HHIP metrics and address urgent unmet needs for people experiencing homelessness in Los Angeles County. The two strategies for this effort are the Unit Acquisition Strategy and the Activities of Daily Living (ADL) Expansion Strategy, described in more detail below. L.A. Care will implement these strategies via agreements with the Los Angeles County Chief Executive Office Homeless Initiative (CEO HI), which is the central coordinating body of Los Angeles County's ongoing efforts to expand and enhance services for people experiencing or at risk of homelessness.

L.A. Care is requesting authority to negotiate and execute a $50 million initial investment to CEO HI, as well as delegated authority to commit up to $30 million more in April 2023, contingent upon L.A. Care's internal assessment of expected earnings of at least $40 million for Measurement Period 1. The two investments represent 70% of the total project funds (to align with L.A. Care's 70% Medi-Cal market share), with a $34 million grant from Health Net comprising the remaining 30%. Planning for the two investments in quick succession will allow the CEO HI team to move swiftly to achieve as much as possible before HHIP Measurement Period 2 ends on October 31, 2023, as well as funding continued activities. These investments will also support L.A. Care's ability to meet HHIP Metrics around housing placement, retention, equity, and investment plan implementation. These investments will be one-time funding for a total duration of six years, in order to allow for development and evaluation of new infrastructure and programs that may be sustained through future public and private investments.

Depending on CEO HI performance and on future HHIP earnings, L.A. Care also intends to make additional substantial investments for this purpose in 2024.

Unit Acquisition Strategy

Every year, a combination of local, state and federal funding supports various time-limited and permanent tenant-based housing vouchers that are used to house people experiencing homelessness in Los Angeles County. These rental vouchers are primarily used in the private housing market, as they are issued to the tenant (rather than being tied to a specific unit of housing). However, a recent study by ABT Associates found that only 65% of people in Los Angeles who are issued a voucher are actually able to lease a unit and that it takes them an average of 122 days from voucher approval

to do so (not including time spent beforehand to apply for the voucher). This is due to many challenges, including Los Angeles's tight rental market and illegal landlord discrimination against voucher holders and people of color.

The Unit Acquisition Strategy will aim to address these challenges in order to 1) increase utilization of these tenant-based housing vouchers and 2) reduce the length of time it takes for a voucher holder to find a unit, ultimately increasing the number of individuals permanently housed annually in LA County. The strategy will use a variety of models generally referred to as "master leasing" to provide the non-profit and public sector with the tools to complete in the private rental market. According to a recent report by the Urban Institute, Los Angeles' community stakeholders identified four primary advantages of "master leasing" programs: expedited access to buildings and units; access to units for people excluded from the private rental market; maximizing resources (including federal housing vouchers); and expanding relationships with new landlords and developers.

This grant will facilitate "master leasing" by creating a backfill fund to cover non-rent costs. Depending on the agreement with the landlord, backfill costs may include vacancy coverage (i.e. rent paid for time in between tenants), pest control, damage mitigation funds, landscaping, repairs and maintenance, insurance, utilities, and/or trash. When paired with rental funds from vouchers, these backfill funds will bring new units into the local housing portfolio for three to ten years (duration will vary by agreement). Leveraging HHIP funding to implement this strategy would make Los Angeles the first community to launch an effort at this scale and would align with efforts through the recent declarations of states of emergency on homelessness by local Los Angeles Cities and the County.

The CEO HI will administer the strategy by expanding two existing programs: 1) the Master Rent Subsidy Agreement (MRSA) program through the Los Angeles County Department of Health Services and its intermediary partner Brilliant Corners, and 2) the LAHSA Resident and Property Support Services (RPSS) leasing program, implemented through third party intermediary PATH. There is also intent to expand to include partnerships with additional housing providers who can directly lease and administer units. In addition to backfill funds, the investments will support staff to administer the programs (including unit location, landlord negotiation, and ongoing oversight and operations) and a third-party evaluation.

L.A. Care and Health Net's combined funding will support the addition of an estimated 1,700 to 1,900 units over the next two years, each of which could house multiple tenants (based on family size and turnover during the lease). Given that Los Angeles County's homeless response system collectively housed 21,213 people experiencing homelessness in 2021, an investment of this scale is significant. The table below shows the breakdown of units by partner and time period:

Deliverables	L.A. Care: Initial Commitment	L.A. Care: Additional Commitment	Health Net	Expected Units for Project	Expected Completion Date
Units secured using HHIP funding paired	**482**	**287**	**341**	**1,100**	10/31/2023

with tenant-based housing subsidies.	**264**	**157**	**179**	**600**	12/31/2024

The number of units for each funding commitment and expected completion date are estimates. The actual number of units could vary based on the terms of the unit acquisition agreements that are executed using each funding commitment during each time period. The total of 1,700 minimum expected units is not impacted by this potential variation.

Since L.A. Care and Health Net's funds will be paired with housing vouchers issued through the Coordinated Entry System, both members and non-members will be served, but we estimate that at least 70% of people housed through this strategy will be MCP members.

ADL Expansion Strategy

The population of seniors experiencing homelessness in Los Angeles has grown significantly over the past decade, with the 2022 Homeless Count estimating a 6.5% increase since 2020. In addition, many people experiencing homelessness show accelerated aging and worse chronic conditions as compared with their stably housed peers, especially people with long histories of homelessness.

Local health and homeless services providers report challenges serving this population, especially for individuals who may need assistance with activities of daily living (ADLs). Most shelters and interim housing settings are designed for people who can take care of themselves independently. This can create the perverse effect that people experiencing homelessness who need help with their ADLs are deemed too needy for placement and remain unsheltered for longer periods. There is also very little funding for ADL supports and the coordination of that care for people experiencing homelessness until they are housed. Without ADL support, people have longer episodes of homelessness, overuse emergency rooms, stay in hospitals longer, use higher cost services such as skilled nursing unnecessarily, or may end up falling back into homelessness because their permanent home is no longer appropriate and/or available.

The ADL expansion strategy aims to address the needs of this population by creating a service-enriched pathway to stable housing. The CEO HI will administer the strategy through an agreement with the Department of Health Services Housing for Health Division and partnerships with the County Departments of Mental Health and Public Health. There are three sub strategies:

1. **Enhanced Care Assessment (ECA) Teams:** The implementation of four teams of skilled assessors, including licensed clinicians, who can assess the ADL needs of people experiencing homelessness and refer them to appropriate services including health plan benefits such as Enhanced Care Management, Community Supports, and Managed Long Term Services and Supports. Many people experiencing homelessness are not currently identified as having special needs when unsheltered or in interim housing. By clearly understanding their needs, ECA teams can connect people with the type of housing match and supportive services they require to live safer and healthier lives with more independence and purpose. Each team will assess a minimum of 425 clients per year and teams will serve all people experiencing homelessness, with an estimated 70% being MCP members.

2. **Caregiving Services in Interim Housing:** A program to provide short- to medium-term personal caregiving services to people experiencing homelessness in interim housing settings, as

well as to assist with transitions to ongoing personal caregiving services through In Home Supportive Services and/or Health Plan Community Supports when applicable. When combined with the ECA teams, the anticipated outcome is that there will be faster entry into the interim housing system for people who otherwise would not be eligible for the majority of facilities due to their ADL needs. Participants would also have the chance to stabilize sooner and be considered for permanent housing options more readily because of the presence of a care giver, improving throughput in the interim housing system. The program will have approximately 100 slots at any given time and will serve all people experiencing homelessness, with an estimated 70% being MCP members.

3. **Enriched Residential Care:** This program places people experiencing homelessness who need ongoing care and supervision in licensed residential care settings such as Adult Residential Facilities (ARF) and Residential Care Facilities for the Elderly (RCFE). Residents receive case management and other enhanced services to support the transition, and opportunities to move to other settings as needs change. The model is similar to the Medi-Cal Assisted Living Waiver and is designed to provide a safe and less restrictive housing option for people who do not require nursing level care. This intervention will be restricted to individuals who are health plan members at program entry, with L.A. Care receiving approximately 56 slots and Health Net receiving 24; slots will not refill at attrition.

In addition to program funds, the investments will support staff to administer the programs and a third-party evaluation.

Board Request 3: Approval of Additional Grant or Incentive Agreements to Achieve HHIP Metrics

L.A. Care plans to implement some planned HHIP investment activities through grant, incentive, or other investment initiatives that will support the achievement of HHIP program metrics and goals. Consistent with L.A. Care Policy, individual grant requests over $500,000 for HHIP require Board approval. Upon approval, a contractual grant agreement will be executed with the applicant to outline the scope of work, deliverables, and terms of funding. Staff will report approved grants to the Board monthly, and provide an annual HHIP grant summary.

At this time, L.A. Care requests approval to make grants, incentives, or funding agreements of over $500,000 to implement the HHIP investment plan with the partners below for the purposes below:

HHIP Investment Activity	Description	Partner	Grant, Incentive, or Investment Amount of up to:	HHIP Measures Impacted
Data Infrastructure Support for CoCs	Funding to support monthly data exchange with L.A. Care and to integrate the LAHSA Homeless Management Information System (HMIS) with the City of Long Beach's HMIS.	LAHSA	$3,200,000	1.1, 1.4, 2.2

Data Infrastructure Support for County Partners	Funding for DMH to integrate housing related data and to support data exchange with L.A. Care.	City of Long Beach	$1,225,000	1.5

Actual amounts may be less. L.A. Care is collaborating closely with Health Net to jointly fund these investments, with L.A. Care paying 70% of expected costs. Additional partners may be identified for future investments.

Upcoming Activities

L.A. Care will continue to share information with the Board regarding HHIP achievements, earnings, and investments over the months and years to come, including via budget forecast updates. Additional investments and grants will also come to the board for review and approval if needed.

There will also be opportunities for L.A. Care to increase spending in planned investment categories and to add new activities based on estimated and actual earnings for Measurement Periods 1 and 2.

Attachments

- HHIP Investment Priorities
- Slide deck

Housing & Homelessness Incentive Program (HHIP): Investment Plan & Investment Requests

L.A. Care HEALTH PLAN
For All of L.A.

ELEVATING HEALTHCARE IN LOS ANGELES COUNTY SINCE 1997

L.A. Care Board of Governors Executive Committee
Dr. Sameer Amin, CMO & Karl Calhoun, Director of Safety Net Programs & Partnerships
January 24, 2023

Housing & Homelessness Incentive Program (HHIP) Overview

Goals: 1) Ensure managed care plans (MCPs) have the necessary capacity and partnerships to connect their members to needed housing services; 2) Reduce and prevent homelessness.

Total Funding Available: $1.288 Billion statewide; **L.A. Care:** up to **$290 million**; Health Net (Los Angeles): up to $128 million; one-time funding; must be earned by 3/2024; may be spent over a longer timeframe

Local Homelessness Plan (LHP): Submitted June 30, 2022; updated measures submitted August 12, 2022; L.A. Care received the full 5% payment (~$14.5M)

Investment Plan (IP): Submitted September 30, 2022; L.A. Care received the full 10% payment (~$29M)

Measurement Period 1 Submission (S1): Due to DHCS 3/10/2023; worth up to 35% of available funds

https://www.dhcs.ca.gov/services/Pages/Housing-and-Homelessness-Incentive-Program.aspx

Previous Board Action on HHIP (Oct 2022)

- Approval of HHIP Investment Priorities
- Approval of HHIP Investment Plan of up to $70M

HHIP Top Priorities for Investment – January 2023

Infrastructure: HIE, Data Exchange, Workforce	Street Medicine	Programs to Get & Keep People Housed	Unit Acquisition Strategy	ADL Expansion Strategy
• Data exchange and connectivity between HMIS and health plans. • Data exchange w/other housing & homeless services partners (DMH, DPH, Community Supports providers) • Workforce development and support, especially for housing navigation and tenancy services • NEW: Medi-Cal application and renewal assistance for people experiencing Homelessness	• Street Medicine extends beyond Primary Care Services; the goal can also be to stabilize and connect to PCP services (example: wound care). • Potential inclusion of behavioral health and public health partners • Potential Health Information Exchange (HIE) project • Technical Assistance and Capacity Building	• Expanding utilization of housing-related Community Supports • Increasing enrollment in Enhanced Care Management (ECM) for people experiencing homelessness	• Make it possible to "master lease" buildings by covering non-rent costs • Partner with COCs and County to increase utilization of tenant-based vouchers • Cover long term costs of "slots" in order to unlock funding for master leasing and new development	• Field-based team to assess individual ADL needs • Caregiving in interim housing for people w/ADL needs • Enhanced services funding to get members placed in Adult Residential Facilities (ARFs) and/or Residential Care Facilities for the Elderly (RCFEs)

Sources:	Stakeholder meetings with counties, COCs, Enhanced Care Management and Community Supports providers, CBOs, Clinics, MCP Collaborations, Lived Experience Advisory Board Feedback

HHIP Potential vs. Estimated Earnings

Program Stage	Measurement Period	Report Due to DHCS	Expected Payment Timing (when are funds received from DHCS?)	% of funds	Potential Earnings	Actual / Estimated Earnings
Local Homelessness Plan (LHP)	Jan-Apr 2022	6/30/22 & 8/12/22	Nov-22	5	$ 14,504,809	$ 14,508,802
Investment Plan (IP)	N/A	9/30/22	Dec-22	10	$ 29,009,617	$ 29,017,605
Measurement Period 1	May-Dec 2022	3/10/23	May-23	35	$ 101,533,660	$ 78,347,532
Measurement Period 2	Jan-Oct 2023	12/31/23	Mar-24	50	$ 145,048,085	$ 102,221,107
HHIP Program (Total)	Jan 2022 - Oct 2023	N/A	Mar-24	100	$ 290,096,170	$ 224,095,045.92

- L.A. Care's estimated earnings increased from $211M in September 2022 to $224M at this time.
- Due to recent DHCS guidance changes received in early January, L.A. Care's expected earnings may further increase, due to reduced thresholds and the ability to earn partial points for some measures.
- Estimated earnings for Measurement Period 1 are still pending performance data for quantitative measures. More information will be available when L.A. Care completes the Measurement Period 1 report to DHCS on March 10, 2023.

HHIP Motion Summary

1. To increase approval of investments for HHIP from $70M by $40M, for a new total of up to $110M.

1. To authorize an investment to CEO HI of $50M for HHIP Strategic Housing Investments.

1. To authorize an investment to CEO HI of an additional $30M, contingent upon L.A. Care's internal assessment of expected earnings for HHIP Measurement Period 1 of at least $40M.

1. To authorize grants, incentives, or other funding agreements of up to the amounts listed for the below:
    a. The Los Angeles Homeless Services Authority: Up to $3.2M
    b. The L.A. County Department of Mental Health: Up to $1.225M

2. Delegate authority to the CEO to adjust HHIP Investment Plan amounts, priorities, and recipients above to align with evolving implementation needs.

HHIP Strategic Housing Investments: CEO HI Investment Requests

- L.A. Care is partnering with Health Net to implement HHIP Strategic Housing Investments to meet HHIP metrics and address urgent unmet needs for people experiencing homelessness.

- L.A. Care will implement these strategies via investments to the L.A. County Chief Executive Office Homeless Initiative (CEO HI), which is the central coordinating body for L.A. County's efforts.

- L.A. Care is requesting:
  - **$50M** initial investment to CEO HI
  - Delegated authority to commit **up to $30M** more in April 2023, contingent upon L.A. Care's internal assessment of at least $40M expected earnings for HHIP Measurement Period 1.
  - Both investments will be one-time funding for a duration of six-years

- Why two investments in quick succession? To achieve as much as possible before HHIP Measurement Period 2 ends on October 31, 2023.

- Depending on CEO HI performance and on future HHIP earnings, L.A. Care also intends to make additional substantial investments for this purpose in 2024.

CEO HI Strategic Housing Investments: Unit Acquisition Strategy

- Goals:
  - Increase utilization of tenant-based housing vouchers
  - Decrease time to lease-up
  - Decrease effects of discrimination against voucher holders and people experiencing homelessness
- Investment funds will support:
  - Backfill funds that cover non-rent costs of master leasing buildings (e.g. vacancy payments, trash, pest control, damage mitigation)
  - Program staff
  - Evaluation

Deliverables	L.A. Care: Initial Investment	L.A. Care: Additional Investment	Health Net Grant	Expected Units for Project	Expected Completion Date
Units secured using HHIP funding paired with tenant-based housing subsidies.	482	287	341	1,100	10/31/2023
	264	157	179	600	12/31/2024

The number of units for each funding commitment and expected completion date are estimates. The actual number of units could vary but the total of 1,700 minimum expected units is not impacted by this potential variation.

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CEO HI Strategic Housing Investments: ADL Expansion Strategy

- Goals:
  - Identify and assess people experiencing homelessness w/ADL assistance needs earlier
  - Speed appropriate placements into interim and permanent housing
  - Help people experiencing homelessness w/ADL assistance needs live in less restrictive settings with appropriate supportive services
- Investment funds will support program, staff, and evaluation for:

Enhanced Care Assessment Teams	•Field-based teams to assess the ADL needs of people experiencing homelessness & refer them to appropriate services • 4 teams; primarily field-based; multidisciplinary
Caregiving in Interim Housing	•Personal caregiving services in interim housing •Help participants stabilize; transition to In Home Supportive Services &/or Community Supports •Approximately 100 slots
Enriched Residential Care	•Places people experiencing homelessness who need ongoing care and supervision in licensed residential care settings such as Adult Residential Facilities (ARF) and Residential Care Facilities for the Elderly (RCFE). •80 total slots; 56 for L.A. Care & 24 for Health Net.

HHIP Investments: Additional Requests

- L.A. Care requests approval to make grants, incentives, or funding agreements of over $500,000 with the partners below for the purposes below:

HHIP Investment Activity	Description	Partner	Grant, Incentive, or Investment Amount of up to:	HHIP Measures Impacted
Data Infrastructure Support for CoCs	Funding to support monthly data exchange with L.A. Care and for to integrate the LAHSA Homeless Management Information System (HMIS) with the City of Long Beach's HMIS.	LAHSA	$3,200,000	1.1, 1.4, 2.2
Data Infrastructure Support for County Partners	Funding for DMH to integrate housing related data and support data exchange with L.A. Care.	City of Long Beach	$1,225,000	1.5

- L.A. Care will fund jointly with Health Net proportional to our market share (70%).

HHIP Next Steps

- HHIP will be included in future budget forecasts.
- Updates to the Board regarding HHIP achievements, earning, and investments.
- Additional investments and grants for Board review and approval as needed.
- Opportunities to increase spending in planned investment categories and to add new activities based on estimated and actual earnings.

HHIP Top Priorities for Investment – January 2023

Infrastructure: HIE, Data Exchange, Workforce	Street Medicine	Programs to Get & Keep People Housed	Unit Acquisition Strategy	ADL Expansion Strategy
• Data exchange and connectivity between HMIS and health plans. • Data exchange w/other housing & homeless services partners (DMH, DPH, Community Supports providers) • Workforce development and support, especially for housing navigation and tenancy services • NEW: Medi-Cal application and renewal assistance for people experiencing Homelessness	• Street Medicine extends beyond Primary Care Services; the goal can also be to stabilize and connect to PCP services (example: wound care). • Potential inclusion of behavioral health and public health partners • Potential Health Information Exchange (HIE) project • Technical Assistance and Capacity Building	• Expanding utilization of housing-related Community Supports • Increasing enrollment in Enhanced Care Management (ECM) for people experiencing homelessness	• Make it possible to "master lease" buildings by covering non-rent costs • Partner with COCs and County to increase utilization of tenant-based vouchers • Cover long term costs of "slots" in order to unlock funding for master leasing and new development	• Field-based team to assess individual ADL needs • Caregiving in interim housing for people w/ADL needs • Enhanced services funding to get members placed in Adult Residential Facilities (ARFs) and/or Residential Care Facilities for the Elderly (RCFEs)

Sources:	Stakeholder meetings with counties, COCs, Enhanced Care Management and Community Supports providers, CBOs, Clinics, MCP Collaborations, Lived Experience Advisory Board Feedback

Aligning HHIP with County Homeless Initiative Framework – January 2023

County Framework

1	2	3	4	5
COORDINATE Create a coordinated system that links critical infrastructure and drives best practices.	**PREVENT** Target prevention services to avoid entry or a return to homelessness.	**CONNECT** Link and navigate everyone to an exit pathway.	**HOUSE** Rapidly rehouse using temporary and permanent housing subsidies and services.	**STABILIZE** Scale services critical to rehousing and stabilization success.

Proposed HHIP Investments & Activities

1	2	3	4	5
• Data Exchange & Connectivity between HMIS & Plans, and other partners • Member homeless status screening & tracking by Plans • Workforce development • Maybe street medicine HIE • Plan Engagement with COCs • Plan Support for CES (Access Points, etc.) • Plan data sharing agreements with DMH, DPH, and/or CS providers • New: Medi-Cal Application Assistance for PEH	• Scaling Enhanced Care Management for PEH	• Street Medicine investments (including BH, PH) • Scaling Housing Navigation, Recuperative Care, &/or Short-Term Post Hospitalization Housing Community Supports	• Scaling Housing Deposit Community Supports • Backfill fund to help w/non rent costs of master leasing buildings • Housing settings w/ADL support (interim & permanent)	• Scaling Tenancy Services Community Supports • Scaling Enhanced Care Management for PEH • Ongoing services funding for ARFs & RCFEs, when needed

BOARD OF GOVERNORS
Executive Committee
Meeting Minutes – November 15, 2022
1055 West 7th Street, 10th Floor, Los Angeles, CA 90017

Members
Hector De La Torre, *Chairperson*
Al Ballesteros, *Vice Chairperson*
Ilan Shapiro MD, MBA, FAAP, FACHE, *Treasurer*
Stephanie Booth, MD, *Secretary*
Hilda Perez

Management/Staff
John Baackes, *Chief Executive Officer*
Terry Brown, *Chief of Human Resources*
Augustavia Haydel, *General Counsel*
Linda Greenfeld, *Chief Products Officer*
Alex Li, *Deputy Chief Medical Officer*
Tom MacDougall, *Chief Technology & Information Officer*
Thomas Mapp, *Chief Compliance Officer*
Marie Montgomery, *Chief Financial Officer*
Noah Paley, *Chief of Staff*
Acacia Reed, *Chief Operating Officer*
Afzal Shah, *Deputy Chief Financial 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 in person, and the Board will review that decision on an on-going basis as provided in the Brown Act. Members of the public had the opportunity to attend and share comments in person, or 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	Stephanie Booth, MD*, Board Secretary,* called to order the L.A. Care Executive Committee and the L.A. Care Joint Powers Authority Executive Committee meetings at 2:06 p.m. The meetings were held simultaneously. She welcomed everyone to the meetings. • For those who provided public comment for this meeting by voice message or in writing, L.A. Care is glad that they provided input today. The Committee will hear their comments and the Committee also needs to finish the business on the Agenda today. • For people who have access to the internet, the meeting materials are available at the lacare.org website. If anyone needs information about how to locate the meeting materials, they can reach out to L.A. Care staff.	

APPROVED

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	• 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. • Public comment will be made before the Committee starts to discuss an item. If the comment is not on a specific agenda item, it will be read at the general Public Comment. She provided information on how to submit a comment live and directly using the "chat" feature.	
APPROVE MEETING AGENDA	The Agenda for today's meeting was approved.	**Approved unanimously by roll call. 4 AYES (Ballesteros, Booth, Perez, and Shapiro)**
PUBLIC COMMENT	There were no public comments.	
APPROVE MEETING MINUTES	The minutes of the October 25, 2022 meeting were approved as submitted.	**Approved unanimously by roll call. 4 AYES (Ballesteros, Booth, Perez, and Shapiro)**
CHAIRPERSON'S REPORT • Nomination of Charitable Organization for Board Stipend	Secretary Booth reported on behalf of Chairperson De La Torre that Board members could nominate charitable organizations to receive the Board Member stipend donations. The names of two charities will be randomly selected from the nominees, and a motion will be presented at the December 1, 2022 Board meeting.	
CHIEF EXECUTIVE OFFICER REPORT	There was no report from the CEO. Mr. Baackes will provide a report at the December 1 Board meeting.	
COMMITTEE ISSUES		
Government Affairs Update	Cherie Compartore, *Senior Director, Government Affairs,* reported: The results of the U.S. Congressional elections:	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	• In the U.S. Senate, leadership will remain the same. • In the U.S. Congress, Republicans gained a majority of just four seats. One third of the members are new, which has not happened in a very long time. • Government Affairs staff will go to Washington D.C. and will visit district offices to speak with newly-elected members and their staff. • It is not yet known what Minority Leader Pelosi will do. • It is also not yet known who will become Speaker. It will be a very difficult position, regardless of who becomes Speaker. • Heading into the lame-duck session, the continuing budget resolution has been extended to December 16. This is expected to be addressed soon, along with a variety of Medicare payment extensions and other health related issues. Alternate payment methodology, hospital funding, physician rate cuts, and telehealth are all a priority. It is unknown if all of these issues can be addressed before the end of year legislative recess. • Government Affairs staff is monitoring the issue of separating the Federal Medical Assistance Percentage (FMAP) from Public Health Emergency (PHE) policies and moving those funds back into Medicaid funding. The current FMAP funding increase has been authorized through the PHE. • The PHE will likely be extended through April 2023, because the deadline for the 60-day advance notice recently passed without any announcement. Government Affairs staff will continue to monitor this issue. • In California, there will be about 25% new members in the state legislature as a result of the elections. Government Affairs will reach out to all new members. Board Member Booth noted that she participated in a live chat during which Assembly member Ash Kalra discussed the single-payer bill in California, AB 1400, and why it was removed from consideration. Assembly member Kalra determined that it will be far less expensive for California and if it is brought forward again, he will carry this proposal through the legislature. Ms. Compartore opined that this legislation would not be successful with so many of the state legislature being newly-elected. She explained that it does not have support from legislative leadership, and California's Governor likely does not have the will to support it, considering an expected budget deficit, due to a probable recession. This does not discount Assembly member Kalra's statements and discussions are always important, but it will not gain momentum at this time. Ms. Compartore does not think single-payer will be passed in the near term.	

APPROVED

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
Revisions to Legal Services Policy LS 006 (Gifts and Donations) **(EXE 100)**	Augustavia Haydel, Esq., *General Counsel*, introduced the motion to revise an existing policy concerning gifts and donations. The major issue is to correct an incongruity in the policy language for people who are not required to file a Form 700 Statement of Economic Interests required by the Fair Political Practices Commission. Board Member Booth asked about the difference in the annual restrictions, one is $520 and another is $600. Ms. Haydel explained that "restricted" source category is separate from "reportable" sources, and those are treated differently in the reporting requirements. *(Chairperson De La Torre joined the meeting.)* **<u>Motion EXE 100.1222</u>** **To approve Legal Services Policy LS-006 (Gifts and Donations) as amended to create consistent gift polices for L.A Care employees consistent with law and general policy updates and authorize General Counsel and her designees to make edits to the policy as needed to effectuate the amendments.**	**Approved unanimously by roll call. 5 AYES (Ballesteros, Booth, De La Torre, Perez, and Shapiro)** **The Committee approved including EXE 100 to the Consent Agenda for the December 1, 2022 Board of Governors' meeting.**
Biennial Review of L.A. Care Health Plan's Conflict of Interest Code	Ms. Haydel noted that this document defines the people who must file a Form 700 Statement of Economic Interests required by the Fair Political Practices Commission. California state law requires local public agencies, such as L.A. Care, to review and update their Conflict of Interest Codes biennially. Pursuant to the notice received from Los Angeles County – L.A. Care's Conflict of Interest Code (Code) Reviewing Body – staff conducted a review of the Code and recommends updating the list of Designated Positions that are required to file a Form 700, as shown in the attached Exhibit B. The list of Designated Positions was updated to reflect three added positions, one title change, and four deleted positions. Specifically, the following positions were added to the Code: (i) Chief Health Equity Officer (Disclosure Category 2); (ii) Chief of Enterprise Performance (Disclosure Category 2); and (iii) Deputy Chief Financial Officer (Disclosure Categories 1 and 2). The title of "Senior Director, Contracting and Procurement" was changed to "Director, Contracting and Procurement." Finally, the following positions were deleted from the Code: (i) Director, Health Information Technology Outreach and Education; (ii) Director, Health Information Technology Marketing and Strategic Initiatives; (iii) Senior Director, Health Information Exchange Initiatives; and (iv) Senior Director, HITEC-LA.	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	Pursuant to instructions from Los Angeles County, L.A. Care timely submitted its 2022 Biennial Review Certification Form to the Board of Supervisors Executive Office. The next step in the process is to submit the proposed revisions and supporting documentation to the County by January 3, 2023. **Motion EXE 101.1222** **To approve revisions to the Conflict of Interest Code of the L.A. Care Health Plan, as attached, for submission to the Los Angeles County Board of Supervisors and delegate authority to the CEO and General Counsel (including their respective designees) to make any non-substantive changes or changes that may be required by the County upon their review.** Ms. Haydel and the members of the Executive Committee expressed appreciation for the work on these documents by Legal Services staff members Jessica Mejorado and Rebecca Villalobos.	**Approved unanimously by roll call. 5 AYES (Ballesteros, Booth, De La Torre, Perez, and Shapiro)** **The Committee approved including EXE 101 to the Consent Agenda for the December 1, 2022 Board of Governors' meeting.**
Employee Annual Incentive Program FY 2021-22 **(EXE 102)**	Terry Brown, *Chief Human Resources Officer,* described the written motion to approve the annual incentive payment to employees. The amount requested is below the total approved in the fiscal year budget. **Motion EXE 102.1222** **To authorize the disbursement of funds not to exceed $7.7 million for the Individual Annual Incentive Program, based on the completion of pre-determined individual goals and targets in support of L.A. Care's FY 2021-2022 Organizational Goals. Distribution of the annual incentive payout shall be guided by Human Resource Policy No. 602, (Annual Organizational Incentive Program).**	**Approved unanimously by roll call. 5 AYES (Ballesteros, Booth, De La Torre, Perez, and Shapiro)**
Approve Consent Agenda	Approve the list of items that will be considered on a Consent Agenda for the December 1, 2022 Board of Governors Meeting. • November 3, 2022 Board of Governors Meeting Minutes • Approve Charitable Organizations to Receive Board Stipend Donations • Revisions to Legal Services Policy LS-006 (Gifts and Donations) • Biennial Review of L.A. Care Health Plan's Conflict of Interest Code • Quarterly Investment Reports • Global Processor, Inc. Contract for SAP Ariba Software Implementation • Salesforce, Inc. Customer Relationship Management (CRM) Subscription Renewal	

APPROVED

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	• Cognizant Technology Solutions, HCL America, Inc., Infosys Limited, and Solugenix Corporation Contracts Amendments for Information Technology Staff Augmentation • Amended motion for Cognizant Technology Solutions (Cognizant) Contract Amendment for Continued Hosting Services for the QNXT and CCA Core Systems	**Approved unanimously by roll call. 5 AYES (Ballesteros, Booth, De La Torre Perez, and Shapiro)**
PUBLIC COMMENTS	There were no public comments.	
ADJOURN TO CLOSED SESSION	The Joint Powers Authority Executive Committee meeting adjourned at 2:35 p.m. Augustavia J. Haydel, Esq., *General Counsel,* 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. CONTRACT RATES Pursuant to Welfare and Institutions Code Section 14087.38(m) • Plan Partner Rates • Provider Rates • DHCS Rates 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: *November 2024* CONFERENCE WITH LEGAL COUNSEL—EXISTING LITIGATION Pursuant to Section 54956.9(d)(1) of the Ralph M. Brown Act • L.A. Care Health Plan's Notice of Contract Dispute under Contract No. 04-36069 Department of Health Care Services (Case No. Unavailable) CONFERENCE WITH LEGAL COUNSEL—EXISTING LITIGATION Pursuant to Section 54956.9(d)(1) of the Ralph M. Brown Act HRRP Garland, LLC v. Local Initiative Health Authority for Los Angeles County L.A.S.C. Case No. 21STCV47250 CONFERENCE WITH LEGAL COUNSEL—ANTICIPATED LITIGATION Significant exposure to litigation pursuant to Section 54956.9(d)(2) of Ralph M. Brown Act: Three Potential Cases	

APPROVED

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	CONFERENCE WITH LEGAL COUNSEL—EXISTING LITIGATION Pursuant to Section 54956.9(d)(1) of the Ralph M. Brown Act • Department of Managed Health Care Enforcement Matter Numbers: 18-799, 20-063, 21-428, 21-509, 21-680 • Department of Health Care Services, Office of Administrative Hearings and Appeals, In the matter of: L.A. Care Health Care Plan Appeal No. MCP22-0322-559-MF	
RECONVENE IN OPEN SESSION	The meeting reconvened in open session at 3:03 p.m. No reportable actions were taken during the closed session.	
ADJOURNMENT	The meeting adjourned at 3:03 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:

_____
Hector De La Torre, *Chair*
Date: _____

APPROVED

Financial Update

Board of Governors Meeting

February 2, 2023

Agenda

Financial Performance – November 2022 YTD

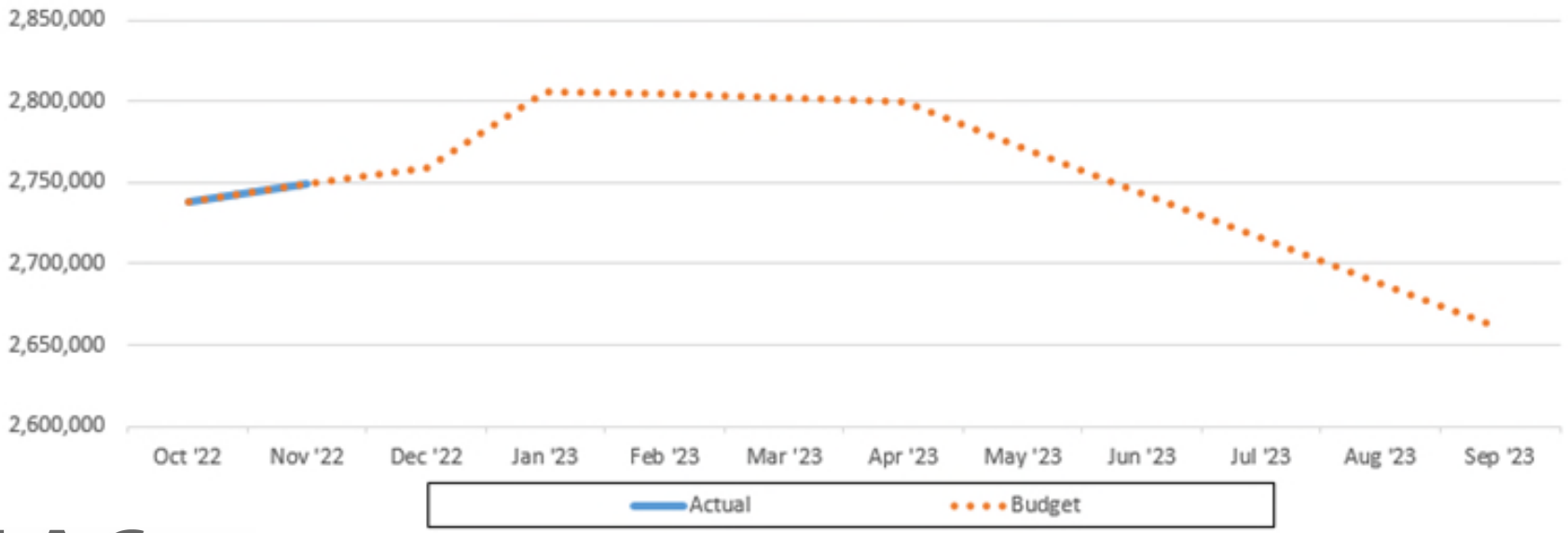
- Membership
- Consolidated Financial Performance
- Operating Margins by Segment
- Paid vs. Reported Claims trend
- Key Financial Ratios
- Tangible Net Equity & Days of Cash On-Hand Comparison

Financial Informational Updates

- Investment Transactions

Membership
for the 2 months ended November 2022

	November 2022			Year-to-Date		
Sub-Segment	**Actual**	**Budget**	**Variance**	**Actual**	**Budget**	**Variance**
Plan Partners	1,104,344	1,117,658	(13,314)	2,207,997	2,232,195	(24,198)
SPD/CCI	263,750	259,879	3,871	526,261	519,255	7,006
TANF/MCE	1,201,617	1,189,652	11,965	2,393,981	2,372,566	21,415
CMC	17,069	16,387	682	34,176	32,984	1,192
Commercial	161,915	165,006	(3,091)	323,882	330,053	(6,171)
Consolidated	**2,748,695**	**2,748,582**	**113**	**5,486,297**	**5,487,053**	**(756)**



L.A. Care HEALTH PLAN®

Consolidated Financial Performance

for the month of November 2022

($ in Thousands)	Actual	Budget	Variance
Member Months	2,748,695	2,748,582	113
Total Revenues	$821,928	$827,133	($5,205)
Total Healthcare Expenses	$796,916	$779,253	($17,664)
Operating Margin	$25,012	$47,881	($22,869)
Total Admin Expenses	$43,067	$43,264	$197
Income/(Loss) from Operations	($18,055)	$4,617	($22,672)
Non-Operating Income (Expense)	$4,339	($84)	$4,423
Net Surplus (Deficit)	**($13,716)**	**$4,533**	**($18,249)**

Consolidated Financial Performance

for the 2 months ended November 2022

($ in Thousands)	Actual	Budget	Variance
Member Months	5,486,297	5,487,053	(756)
Total Revenues	$1,644,387	$1,646,784	($2,397)
Total Healthcare Expenses	$1,565,602	$1,551,424	($14,178)
Operating Margin	$78,785	$95,360	($16,575)
Total Admin Expenses	$81,987	$90,846	$8,860
Income/(Loss) from Operations	($3,202)	$4,513	($7,715)
Non-Operating Income (Expense)	$8,508	$6,064	$2,444
Net Surplus (Deficit)	**$5,306**	**$10,578**	**($5,271)**

Operating Margin by Segment

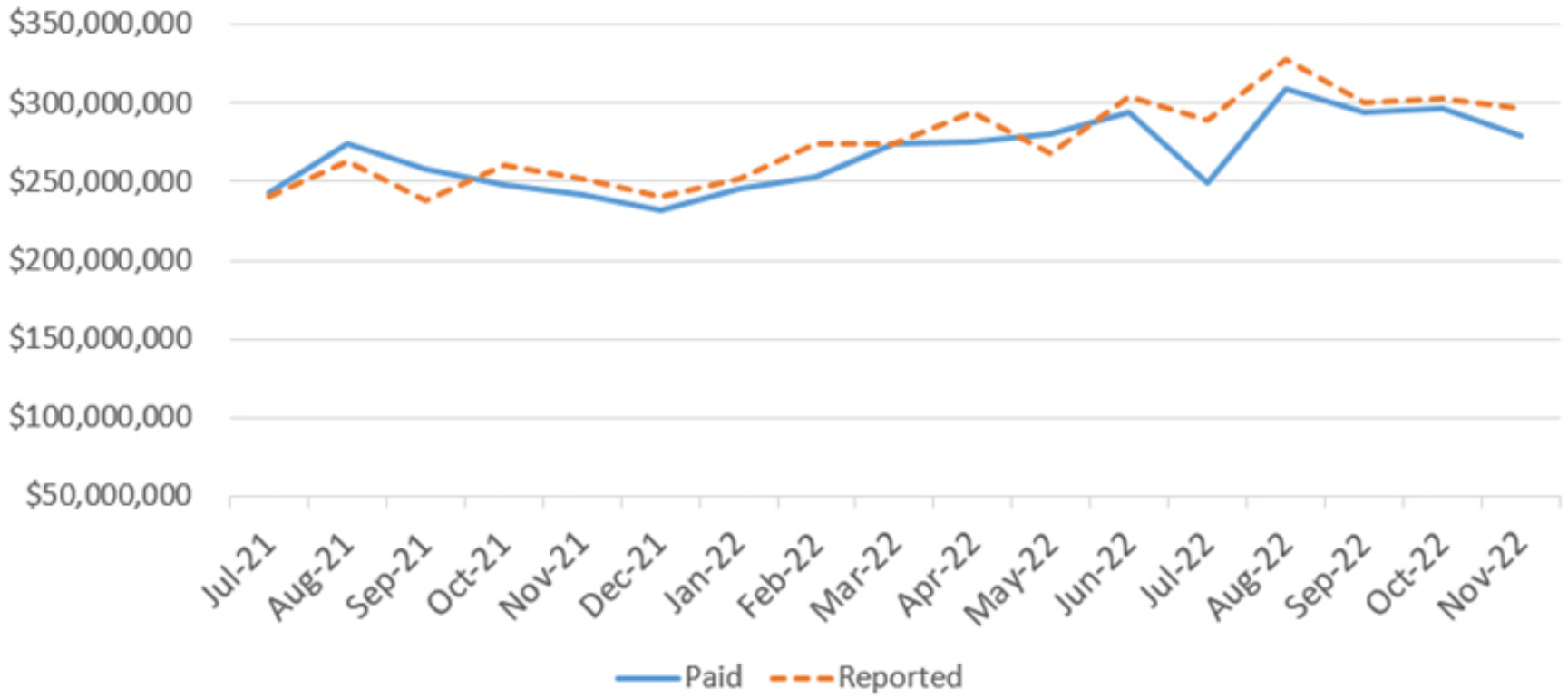
for the 2 months ended November 2022

($ in Thousands)

	Medi-Cal Plan Partners	Medi-Cal SPD/CCI	Medi-Cal TANF/MCE	CMC	Commercial	Total
Revenue	$552,393	$403,622	$544,212	$50,967	$93,192	$1,644,387
Healthcare Exp.	$520,818	$379,712	$536,285	$49,373	$79,414	$1,565,604
Operating Margin	$31,575	$23,910	$7,927	$1,594	$13,778	$78,784
MCR %	94.3%	94.1%	98.5%	96.9%	85.2%	95.2%
Budget MCR%	96.2%	93.9%	95.9%	77.7%	85.4%	94.2%

Reported vs Paid Claims Trend

Paid Claims through November 2022



Key Financial Ratios

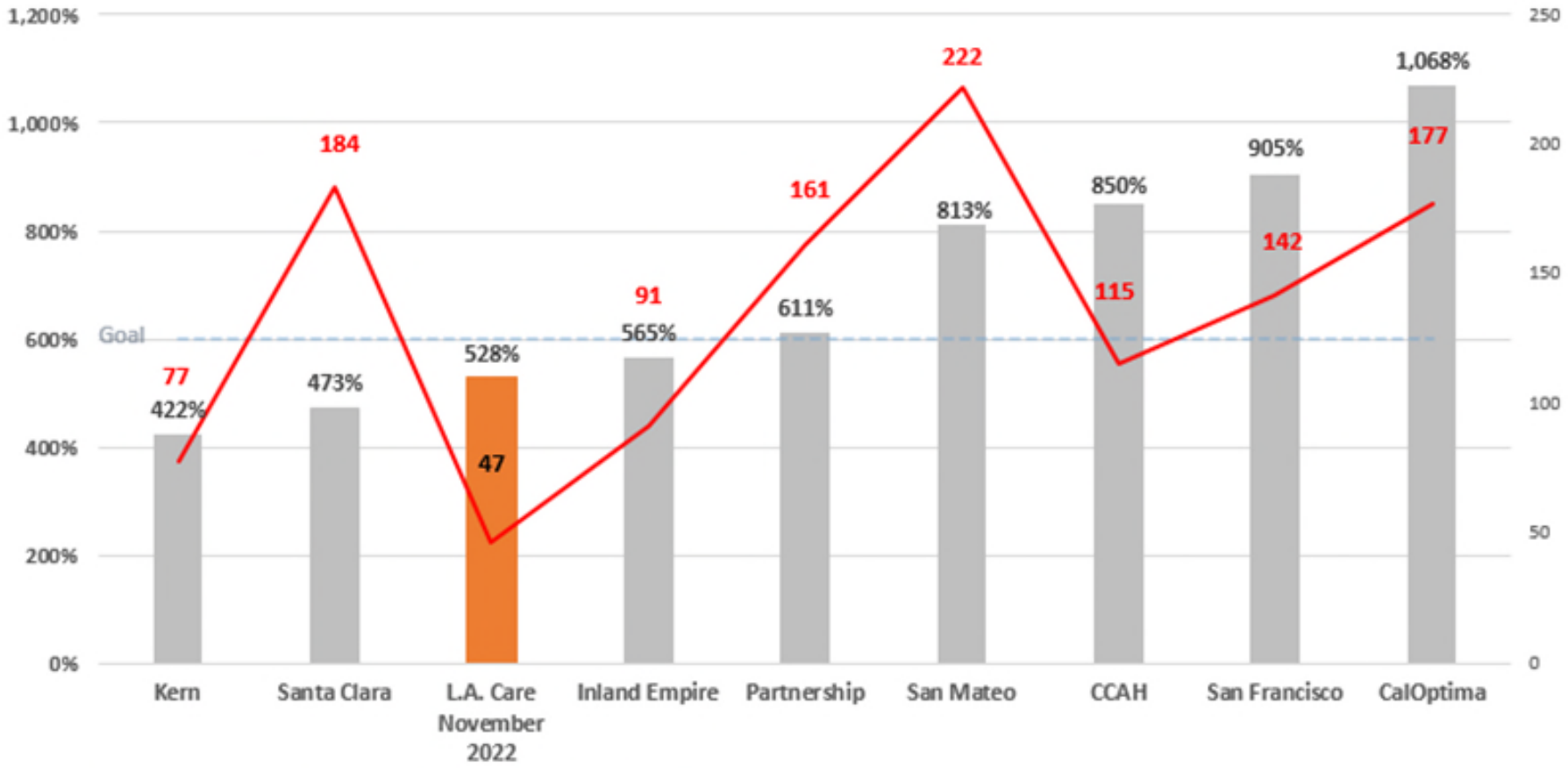
for the 2 months ended November 2022

	Actual		Budget	
MCR	95.2%	vs.	94.2%	✗
Admin Ratio	5.0%	vs.	5.5%	✓

	Actual		Benchmark	
Working Capital	1.21	vs.	1.00+	✓
Cash to Claims	0.48	vs.	0.75+	✗
Tangible Net Equity	5.28	vs.	1.30+	✓

Tangible Net Equity & Days of Cash On-Hand

for the 2 months ended November 2022



• As of September 2022 Quarterly filings, unless noted otherwise.

Questions & Consideration

Motion FIN 102

- To accept the Financial Reports for the two months ended November 30, 2022, as submitted.

Informational Items

Investment Transactions

- As of November 30, 2022, L.A. Care's total investment market value was $1.6B
  - $1.39B managed by Payden & Rygel and New England Asset Management (NEAM)
  - $73M in Local Agency Investment Fund
  - $156M in Los Angeles County Pooled Investment Fund

L.A. Care
HEALTH PLAN

Board of Governors
MOTION SUMMARY

Date: February 2, 2023 **Motion No. FIN 102.0223**

Committee: Finance & Budget **Chairperson:** Stephanie Booth, MD

☐ **New Contract** ☐ **Amendment** ☐ **Sole Source** ☐ **RFP/RFQ was conducted**

Issue: Acceptance of the Financial Reports for October and November 2022.

Background: N/A

Member Impact: N/A

Budget Impact: N/A

Motion: To accept the Financial Reports for October and November 2022, as submitted.

Financial Performance
October 2022
(Unaudited)

Overall

The combined member months are 2.7 million year-to-date, which is 869 member months unfavorable to the budget. The performance is a surplus of $19.0 million or 2.3% of revenue and is $13.0 million favorable to the budget. The favorability is driven by lower pharmacy costs due to timing in pharmacy rebates, lower skilled nursing facility costs and lower capitation expenses due to higher cap deduct. Partially offsetting these favorabilities are higher inpatient and outpatient claims. Lower operating expenses due to timing in advertisement spending also contributed to favorable variance in surplus as compared to the budget.

MediCal Plan Partners

The member months are 1.1 million, which is 10,884 member months unfavorable to the budget. The performance is a surplus of $10.7 million and is $5.7 million favorable to the budget. The favorability in net surplus is driven primarily by a Prop 56 expense allocation between Plan Partners and TANF-MCE.

MediCal SPD-CCI

The member months are 262,511, which is 3,135 member months favorable to the budget. The performance is a surplus of $1.1 million and is $1.3 million favorable to the budget. The favorability is due to lower skilled nursing facility costs and higher revenue driven by higher actual institutional members as compared to the budget. These favorabilities are offset by higher inpatient claims. Lower operating expenses driven by the timing in advertisement spending also contributed to higher surplus.

MediCal TANF-MCE

The member months are 1.2 million, which is 9,450 member months favorable to the budget. The performance is a deficit of $5.3 million and is $2.4 million unfavorable to the budget. The unfavorability is driven by higher outpatient claims and the reallocation of Prop 56 expenses between Plan Partners and TANF-MCE. These unfavorabilities are partially offset by lower capitation expenses due to higher cap deduct and lower operating expenses.

Cal MediConnect (CMC)

The member months are 17,107, which is 510 member months favorable to the budget. The performance is a surplus of $2.7 million and is $0.2 million unfavorable to the budget. The unfavorability is driven by higher inpatient claims and skilled nursing facility costs and the timing in Part D reconciliation. These unfavorabilities are offset by the timing in pharmacy rebates and lower operating expenses.

Commercial

L.A. Care Commercial consists of LACC and PASC-SEIU. The member months are 161,967, which is 3,080 member months unfavorable to the budget. The performance is a surplus of $8.8 million and is $9.3 million favorable to the budget driven by the timing in pharmacy rebates, lower inpatient claims, lower capitation expenses due to higher cap deduct, and lower operating expenses. Partially offsetting these favorabilities is an update to the LACC RAF score for calendar year 2022 which reduces revenue and healthcare expenses by $3.4 million and $1.1 million, respectively.

L.A. Care HEALTH PLAN

Consolidated Operations Income Statement ($ in thousands)

October 2022

Current Actual $	Current Actual PMPM	Current Budget $	Current Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM		YTD Actual $	YTD Actual PMPM	YTD Budget $	YTD Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM
						Membership						
2,737,602		2,738,471		(869)		Member Months	2,737,602		2,738,471		(869)	
						Revenue						
$ 822,459	$ 300.43	$ 819,651	$ 299.31	$ 2,808	$ 1.12	Capitation	$ 822,459	$ 300.43	$ 819,651	$ 299.31	$ 2,808	$ 1.12
$ 822,459	**$ 300.43**	**$ 819,651**	**$ 299.31**	**$ 2,808**	**$ 1.12**	**Total Revenues**	**$ 822,459**	**$ 300.43**	**$ 819,651**	**$ 299.31**	**$ 2,808**	**$ 1.12**
						Healthcare Expenses						
$ 449,602	$ 164.23	$ 454,220	$ 165.87	$ 4,618	$ 1.63	Capitation	$ 449,602	$ 164.23	$ 454,220	$ 165.87	$ 4,618	$ 1.63
$ 122,581	$ 44.78	$ 109,287	$ 39.91	$ (13,294)	$ (4.87)	Inpatient Claims	$ 122,581	$ 44.78	$ 109,287	$ 39.91	$ (13,294)	$ (4.87)
$ 100,997	$ 36.89	$ 91,778	$ 33.51	$ (9,220)	$ (3.38)	Outpatient Claims	$ 100,997	$ 36.89	$ 91,778	$ 33.51	$ (9,220)	$ (3.38)
$ 82,317	$ 30.07	$ 89,510	$ 32.69	$ 7,193	$ 2.62	Skilled Nursing Facility	$ 82,317	$ 30.07	$ 89,510	$ 32.69	$ 7,193	$ 2.62
$ (459)	$ (0.17)	$ 10,780	$ 3.94	$ 11,239	$ 4.10	Pharmacy	$ (459)	$ (0.17)	$ 10,780	$ 3.94	$ 11,239	$ 4.10
$ 7,229	$ 2.64	$ 7,652	$ 2.79	$ 423	$ 0.15	Provider Incentives and Shared Risk	$ 7,229	$ 2.64	$ 7,652	$ 2.79	$ 423	$ 0.15
$ 6,419	$ 2.34	$ 8,946	$ 3.27	$ 2,527	$ 0.92	Medical Administrative Expenses	$ 6,419	$ 2.34	$ 8,946	$ 3.27	$ 2,527	$ 0.92
$ 768,686	**$ 280.79**	**$ 772,171**	**$ 281.97**	**$ 3,486**	**$ 1.18**	**Total Healthcare Expenses**	**$ 768,686**	**$ 280.79**	**$ 772,171**	**$ 281.97**	**$ 3,486**	**$ 1.18**
93.5%		*94.2%*		*0.7%*		*MCR(%)*	*93.5%*		*94.2%*		*0.7%*	
$ 53,773	**$ 19.64**	**$ 47,479**	**$ 17.34**	**$ 6,294**	**$ 2.30**	**Operating Margin**	**$ 53,773**	**$ 19.64**	**$ 47,479**	**$ 17.34**	**$ 6,294**	**$ 2.30**
$ 38,920	$ 14.22	$ 47,583	$ 17.38	$ 8,663	$ 3.16	**Total Operating Expenses**	$ 38,920	$ 14.22	$ 47,583	$ 17.38	$ 8,663	$ 3.16
4.7%		*5.8%*		*1.1%*		*Admin Ratio(%)*	*4.7%*		*5.8%*		*1.1%*	
$ 14,853	**$ 5.43**	**$ (103)**	**$ (0.04)**	**$ 14,957**	**$ 5.46**	**Income (Loss) from Operations**	**$ 14,853**	**$ 5.43**	**$ (103)**	**$ (0.04)**	**$ 14,957**	**$ 5.46**
$ 1,942	$ 0.71	$ 3,463	$ 1.26	$ (1,521)	$ (0.56)	Other Income/(Expense), net	$ 1,942	$ 0.71	$ 3,463	$ 1.26	$ (1,521)	$ (0.56)
$ 4,293	$ 1.57	$ 2,686	$ 0.98	$ 1,607	$ 0.59	Interest Income, net	$ 4,293	$ 1.57	$ 2,686	$ 0.98	$ 1,607	$ 0.59
$ (704)	$ (0.26)	$ -	$ -	$ (704)	$ (0.26)	Realized Gain / Loss	$ (704)	$ (0.26)	$ -	$ -	$ (704)	$ (0.26)
$ (1,361)	$ (0.50)	$ -	$ -	$ (1,361)	$ (0.50)	Unrealized Gain / Loss	$ (1,361)	$ (0.50)	$ -	$ -	$ (1,361)	$ (0.50)
$ 4,169	**$ 1.52**	**$ 6,149**	**$ 2.25**	**$ (1,979)**	**$ (0.72)**	**Total Non-Operating Income (Expense)**	**$ 4,169**	**$ 1.52**	**$ 6,149**	**$ 2.25**	**$ (1,979)**	**$ (0.72)**
$ 19,023	**$ 6.95**	**$ 6,045**	**$ 2.21**	**$ 12,977**	**$ 4.74**	**Net Surplus (Deficit)**	**$ 19,023**	**$ 6.95**	**$ 6,045**	**$ 2.21**	**$ 12,977**	**$ 4.74**
2.3%		*0.7%*		*1.6%*		*Margin(%)*	*2.3%*		*0.7%*		*1.6%*	

L.A. Care HEALTH PLAN®

MediCal Plan Partners Income Statement ($ in thousands)

October 2022

Current Actual $	Current Actual PMPM	Current Budget $	Current Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM		YTD Actual $	YTD Actual PMPM	YTD Budget $	YTD Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM
						Membership						
1,103,653		1,114,537		(10,884)		Member Months	1,103,653		1,114,537		(10,884)	
						Revenue						
$ 274,131	$ 248.39	$ 269,218	$ 241.55	$ 4,914	$ 6.83	Capitation	$ 274,131	$ 248.39	$ 269,218	$ 241.55	$ 4,914	$ 6.83
$ 274,131	**$ 248.39**	**$ 269,218**	**$ 241.55**	**$ 4,914**	**$ 6.83**	**Total Revenues**	**$ 274,131**	**$ 248.39**	**$ 269,218**	**$ 241.55**	**$ 4,914**	**$ 6.83**
						Healthcare Expenses						
$ 254,277	$ 230.40	$ 254,552	$ 228.39	$ 275	$ (2.00)	Capitation	$ 254,277	$ 230.40	$ 254,552	$ 228.39	$ 275	$ (2.00)
$ 0	$ 0.00	$ -	$ -	$ (0)	$ (0.00)	Inpatient Claims	$ 0	$ 0.00	$ -	$ -	$ (0)	$ (0.00)
$ -	$ -	$ -	$ -	$ -	$ -	Outpatient Claims	$ -	$ -	$ -	$ -	$ -	$ -
$ 2,617	$ 2.37	$ 2,644	$ 2.37	$ 27	$ 0.00	Provider Incentives and Shared Risk	$ 2,617	$ 2.37	$ 2,644	$ 2.37	$ 27	$ 0.00
$ 1,206	$ 1.09	$ 1,617	$ 1.45	$ 411	$ 0.36	Medical Administrative Expenses	$ 1,206	$ 1.09	$ 1,617	$ 1.45	$ 411	$ 0.36
$ 258,100	**$ 233.86**	**$ 258,813**	**$ 232.22**	**$ 713**	**$ (1.64)**	**Total Healthcare Expenses**	**$ 258,100**	**$ 233.86**	**$ 258,813**	**$ 232.22**	**$ 713**	**$ (1.64)**
94.2%		*96.1%*		*2.0%*		*MCR(%)*	*94.2%*		*96.1%*		*2.0%*	
$ 16,031	**$ 14.53**	**$ 10,404**	**$ 9.34**	**$ 5,627**	**$ 5.19**	**Operating Margin**	**$ 16,031**	**$ 14.53**	**$ 10,404**	**$ 9.34**	**$ 5,627**	**$ 5.19**
$ 6,449	$ 5.84	$ 6,914	$ 6.20	$ 465	$ 0.36	**Total Operating Expenses**	$ 6,449	$ 5.84	$ 6,914	$ 6.20	$ 465	$ 0.36
2.4%		*2.6%*		*0.2%*		*Admin Ratio(%)*	*2.4%*		*2.6%*		*0.2%*	
$ 9,583	**$ 8.68**	**$ 3,490**	**$ 3.13**	**$ 6,092**	**$ 5.55**	**Income (Loss) from Operations**	**$ 9,583**	**$ 8.68**	**$ 3,490**	**$ 3.13**	**$ 6,092**	**$ 5.55**
$ 1,097	**$ 0.99**	**$ 1,464**	**$ 1.31**	**$ (367)**	**$ (0.32)**	**Total Non-Operating Income (Expense)**	**$ 1,097**	**$ 0.99**	**$ 1,464**	**$ 1.31**	**$ (367)**	**$ (0.32)**
$ 10,680	**$ 9.68**	**$ 4,954**	**$ 4.45**	**$ 5,725**	**$ 5.23**	**Net Surplus (Deficit)**	**$ 10,680**	**$ 9.68**	**$ 4,954**	**$ 4.45**	**$ 5,725**	**$ 5.23**
3.9%		*1.8%*		*2.1%*		*Margin(%)*	*3.9%*		*1.8%*		*2.1%*	

L.A. Care HEALTH PLAN

SPD-CCI Income Statement ($ in thousands)

October 2022

Current Actual $	Current Actual PMPM	Current Budget $	Current Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM		YTD Actual $	YTD Actual PMPM	YTD Budget $	YTD Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM
						Membership						
262,511		259,376		3,135		Member Months	262,511		259,376		3,135	
						Revenue						
$ 204,003	$ 777.12	$ 199,045	$ 767.40	$ 4,957	$ 9.72	Capitation	$ 204,003	$ 777.12	$ 199,045	$ 767.40	$ 4,957	$ 9.72
$ 204,003	**$ 777.12**	**$ 199,045**	**$ 767.40**	**$ 4,957**	**$ 9.72**	**Total Revenues**	**$ 204,003**	**$ 777.12**	**$ 199,045**	**$ 767.40**	**$ 4,957**	**$ 9.72**
						Healthcare Expenses						
$ 28,414	$ 108.24	$ 29,127	$ 112.30	$ 714	$ 4.06	Capitation	$ 28,414	$ 108.24	$ 29,127	$ 112.30	$ 714	$ 4.06
$ 51,311	$ 195.46	$ 38,162	$ 147.13	$ (13,149)	$ (48.33)	Inpatient Claims	$ 51,311	$ 195.46	$ 38,162	$ 147.13	$ (13,149)	$ (48.33)
$ 44,244	$ 168.54	$ 45,170	$ 174.15	$ 926	$ 5.61	Outpatient Claims	$ 44,244	$ 168.54	$ 45,170	$ 174.15	$ 926	$ 5.61
$ 64,315	$ 245.00	$ 71,848	$ 277.00	$ 7,533	$ 32.00	Skilled Nursing Facility	$ 64,315	$ 245.00	$ 71,848	$ 277.00	$ 7,533	$ 32.00
$ 2	$ 0.01	$ -	$ -	$ (2)	$ (0.01)	Pharmacy	$ 2	$ 0.01	$ -	$ -	$ (2)	$ (0.01)
$ 596	$ 2.27	$ 245	$ 0.94	$ (351)	$ (1.33)	Provider Incentives and Shared Risk	$ 596	$ 2.27	$ 245	$ 0.94	$ (351)	$ (1.33)
$ 2,132	$ 8.12	$ 2,489	$ 9.60	$ 358	$ 1.48	Medical Administrative Expenses	$ 2,132	$ 8.12	$ 2,489	$ 9.60	$ 358	$ 1.48
$ 191,014	**$ 727.64**	**$ 187,041**	**$ 721.12**	**$ (3,973)**	**$ (6.52)**	**Total Healthcare Expenses**	**$ 191,014**	**$ 727.64**	**$ 187,041**	**$ 721.12**	**$ (3,973)**	**$ (6.52)**
93.6%		*94.0%*		*0.3%*		*MCR(%)*	*93.6%*		*94.0%*		*0.3%*	
$ 12,988	**$ 49.48**	**$ 12,004**	**$ 46.28**	**$ 984**	**$ 3.20**	**Operating Margin**	**$ 12,988**	**$ 49.48**	**$ 12,004**	**$ 46.28**	**$ 984**	**$ 3.20**
$ 12,024	$ 45.80	$ 13,025	$ 50.22	$ 1,001	$ 4.41	**Total Operating Expenses**	$ 12,024	$ 45.80	$ 13,025	$ 50.22	$ 1,001	$ 4.41
5.9%		*6.5%*		*0.6%*		*Admin Ratio(%)*	*5.9%*		*6.5%*		*0.6%*	
$ 964	**$ 3.67**	**$ (1,021)**	**$ (3.94)**	**$ 1,985**	**$ 7.61**	**Income (Loss) from Operations**	**$ 964**	**$ 3.67**	**$ (1,021)**	**$ (3.94)**	**$ 1,985**	**$ 7.61**
$ 115	**$ 0.44**	**$ 765**	**$ 2.95**	**$ (650)**	**$ (2.51)**	**Total Non-Operating Income (Expense)**	**$ 115**	**$ 0.44**	**$ 765**	**$ 2.95**	**$ (650)**	**$ (2.51)**
$ 1,079	**$ 4.11**	**$ (257)**	**$ (0.99)**	**$ 1,335**	**$ 5.10**	**Net Surplus (Deficit)**	**$ 1,079**	**$ 4.11**	**$ (257)**	**$ (0.99)**	**$ 1,335**	**$ 5.10**
0.5%		*-0.1%*		*0.7%*		*Margin(%)*	*0.5%*		*-0.1%*		*0.7%*	

L.A. Care HEALTH PLAN®

TANF-MCE Income Statement ($ in thousands)

October 2022

Current Actual $	Current Actual PMPM	Current Budget $	Current Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM		YTD Actual $	YTD Actual PMPM	YTD Budget $	YTD Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM
						Membership						
1,192,364		1,182,914		9,450		Member Months	1,192,364		1,182,914		9,450	
						Revenue						
$ 271,137	$ 227.39	$ 270,122	$ 228.35	$ 1,015	$ (0.96)	Capitation	$ 271,137	$ 227.39	$ 270,122	$ 228.35	$ 1,015	$ (0.96)
$ 271,137	**$ 227.39**	**$ 270,122**	**$ 228.35**	**$ 1,015**	**$ (0.96)**	**Total Revenues**	**$ 271,137**	**$ 227.39**	**$ 270,122**	**$ 228.35**	**$ 1,015**	**$ (0.96)**
						Healthcare Expenses						
$ 139,020	$ 116.59	$ 140,224	$ 118.54	$ 1,204	$ 1.95	Capitation	$ 139,020	$ 116.59	$ 140,224	$ 118.54	$ 1,204	$ 1.95
$ 58,943	$ 49.43	$ 57,401	$ 48.52	$ (1,543)	$ (0.91)	Inpatient Claims	$ 58,943	$ 49.43	$ 57,401	$ 48.52	$ (1,543)	$ (0.91)
$ 47,393	$ 39.75	$ 38,148	$ 32.25	$ (9,244)	$ (7.50)	Outpatient Claims	$ 47,393	$ 39.75	$ 38,148	$ 32.25	$ (9,244)	$ (7.50)
$ 15,590	$ 13.08	$ 16,376	$ 13.84	$ 786	$ 0.77	Skilled Nursing Facility	$ 15,590	$ 13.08	$ 16,376	$ 13.84	$ 786	$ 0.77
$ (89)	$ (0.07)	$ -	$ -	$ 89	$ 0.07	Pharmacy	$ (89)	$ (0.07)	$ -	$ -	$ 89	$ 0.07
$ 1,785	$ 1.50	$ 2,673	$ 2.26	$ 888	$ 0.76	Provider Incentives and Shared Risk	$ 1,785	$ 1.50	$ 2,673	$ 2.26	$ 888	$ 0.76
$ 2,733	$ 2.29	$ 4,212	$ 3.56	$ 1,479	$ 1.27	Medical Administrative Expenses	$ 2,733	$ 2.29	$ 4,212	$ 3.56	$ 1,479	$ 1.27
$ 265,376	**$ 222.56**	**$ 259,034**	**$ 218.98**	**$ (6,342)**	**$ (3.58)**	**Total Healthcare Expenses**	**$ 265,376**	**$ 222.56**	**$ 259,034**	**$ 218.98**	**$ (6,342)**	**$ (3.58)**
97.9%		*95.9%*		*-2.0%*		*MCR(%)*	*97.9%*		*95.9%*		*-2.0%*	
$ 5,761	**$ 4.83**	**$ 11,087**	**$ 9.37**	**$ (5,326)**	**$ (4.54)**	**Operating Margin**	**$ 5,761**	**$ 4.83**	**$ 11,087**	**$ 9.37**	**$ (5,326)**	**$ (4.54)**
$ 12,713	$ 10.66	$ 15,421	$ 13.04	$ 2,708	$ 2.37	**Total Operating Expenses**	$ 12,713	$ 10.66	$ 15,421	$ 13.04	$ 2,708	$ 2.37
4.7%		*5.7%*		*1.0%*		*Admin Ratio(%)*	*4.7%*		*5.7%*		*1.0%*	
$ (6,951)	**$ (5.83)**	**$ (4,333)**	**$ (3.66)**	**$ (2,618)**	**$ (2.17)**	**Income (Loss) from Operations**	**$ (6,951)**	**$ (5.83)**	**$ (4,333)**	**$ (3.66)**	**$ (2,618)**	**$ (2.17)**
$ 1,700	**$ 1.43**	**$ 1,506**	**$ 1.27**	**$ 194**	**$ 0.15**	**Total Non-Operating Income (Expense)**	**$ 1,700**	**$ 1.43**	**$ 1,506**	**$ 1.27**	**$ 194**	**$ 0.15**
$ (5,251)	**$ (4.40)**	**$ (2,827)**	**$ (2.39)**	**$ (2,424)**	**$ (2.01)**	**Net Surplus (Deficit)**	**$ (5,251)**	**$ (4.40)**	**$ (2,827)**	**$ (2.39)**	**$ (2,424)**	**$ (2.01)**
-1.9%		*-1.0%*		*-0.9%*		*Margin(%)*	*-1.9%*		*-1.0%*		*-0.9%*	

L.A. Care HEALTH PLAN

CMC Income Statement ($ in thousands)

October 2022

Current Actual $	Current Actual PMPM	Current Budget $	Current Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM		YTD Actual $	YTD Actual PMPM	YTD Budget $	YTD Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM
						Membership						
17,107		16,597		510		Member Months	17,107		16,597		510	
						Revenue						
$ 25,091	$ 1,466.72	$ 27,708	$ 1,669.43	$ (2,617)	$ (202.71)	Capitation	$ 25,091	$ 1,466.72	$ 27,708	$ 1,669.43	$ (2,617)	$ (202.71)
$ 25,091	**$ 1,466.72**	**$ 27,708**	**$ 1,669.43**	**$ (2,617)**	**$ (202.71)**	**Total Revenues**	**$ 25,091**	**$ 1,466.72**	**$ 27,708**	**$ 1,669.43**	**$ (2,617)**	**$ (202.71)**
						Healthcare Expenses						
$ 10,030	$ 586.30	$ 9,523	$ 573.75	$ (507)	$ (12.54)	Capitation	$ 10,030	$ 586.30	$ 9,523	$ 573.75	$ (507)	$ (12.54)
$ 7,540	$ 440.78	$ 5,346	$ 322.11	$ (2,194)	$ (118.68)	Inpatient Claims	$ 7,540	$ 440.78	$ 5,346	$ 322.11	$ (2,194)	$ (118.68)
$ 3,134	$ 183.19	$ 2,682	$ 161.61	$ (451)	$ (21.58)	Outpatient Claims	$ 3,134	$ 183.19	$ 2,682	$ 161.61	$ (451)	$ (21.58)
$ 2,292	$ 133.96	$ 1,286	$ 77.49	$ (1,006)	$ (56.47)	Skilled Nursing Facility	$ 2,292	$ 133.96	$ 1,286	$ 77.49	$ (1,006)	$ (56.47)
$ (3,338)	$ (195.11)	$ 1,395	$ 84.05	$ 4,733	$ 279.16	Pharmacy	$ (3,338)	$ (195.11)	$ 1,395	$ 84.05	$ 4,733	$ 279.16
$ 822	$ 48.03	$ 955	$ 57.57	$ 134	$ 9.54	Provider Incentives and Shared Risk	$ 822	$ 48.03	$ 955	$ 57.57	$ 134	$ 9.54
$ 222	$ 12.95	$ 338	$ 20.38	$ 117	$ 7.43	Medical Administrative Expenses	$ 222	$ 12.95	$ 338	$ 20.38	$ 117	$ 7.43
$ 20,701	**$ 1,210.11**	**$ 21,526**	**$ 1,296.96**	**$ 825**	**$ 86.86**	**Total Healthcare Expenses**	**$ 20,701**	**$ 1,210.11**	**$ 21,526**	**$ 1,296.96**	**$ 825**	**$ 86.86**
82.5%		*77.7%*		*-4.8%*		*MCR(%)*	*82.5%*		*77.7%*		*-4.8%*	
$ 4,390	**$ 256.61**	**$ 6,182**	**$ 372.47**	**$ (1,792)**	**$ (115.86)**	**Operating Margin**	**$ 4,390**	**$ 256.61**	**$ 6,182**	**$ 372.47**	**$ (1,792)**	**$ (115.86)**
$ 1,705	$ 99.66	$ 3,332	$ 200.75	$ 1,627	$ 101.09	**Total Operating Expenses**	$ 1,705	$ 99.66	$ 3,332	$ 200.75	$ 1,627	$ 101.09
6.8%		*12.0%*		*5.2%*		*Admin Ratio(%)*	*6.8%*		*12.0%*		*5.2%*	
$ 2,685	**$ 156.95**	**$ 2,850**	**$ 171.72**	**$ (165)**	**$ (14.77)**	**Income (Loss) from Operations**	**$ 2,685**	**$ 156.95**	**$ 2,850**	**$ 171.72**	**$ (165)**	**$ (14.77)**
$ (20)	**$ (1.19)**	**$ 21**	**$ 1.24**	**$ (41)**	**$ (2.43)**	**Total Non-Operating Income (Expense)**	**$ (20)**	**$ (1.19)**	**$ 21**	**$ 1.24**	**$ (41)**	**$ (2.43)**
$ 2,665	**$ 155.77**	**$ 2,871**	**$ 172.96**	**$ (206)**	**$ (17.20)**	**Net Surplus (Deficit)**	**$ 2,665**	**$ 155.77**	**$ 2,871**	**$ 172.96**	**$ (206)**	**$ (17.20)**
10.6%		*10.4%*		*0.3%*		*Margin(%)*	*10.6%*		*10.4%*		*0.3%*	

L.A. Care HEALTH PLAN

Commercial Income Statement ($ in thousands)

October 2022

Current Actual $	Current Actual PMPM	Current Budget $	Current Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM		YTD Actual $	YTD Actual PMPM	YTD Budget $	YTD Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM
						Membership						
161,967		165,047		(3,080)		Member Months	161,967		165,047		(3,080)	
						Revenue						
$ 48,097	$ 296.95	$ 53,558	$ 324.51	$ (5,462)	$ (27.55)	Capitation	$ 48,097	$ 296.95	$ 53,558	$ 324.51	$ (5,462)	$ (27.55)
$ 48,097	**$ 296.95**	**$ 53,558**	**$ 324.51**	**$ (5,462)**	**$ (27.55)**	**Total Revenues**	**$ 48,097**	**$ 296.95**	**$ 53,558**	**$ 324.51**	**$ (5,462)**	**$ (27.55)**
						Healthcare Expenses						
$ 17,862	$ 110.28	$ 20,793	$ 125.99	$ 2,932	$ 15.70	Capitation	$ 17,862	$ 110.28	$ 20,793	$ 125.99	$ 2,932	$ 15.70
$ 4,786	$ 29.55	$ 8,378	$ 50.76	$ 3,592	$ 21.21	Inpatient Claims	$ 4,786	$ 29.55	$ 8,378	$ 50.76	$ 3,592	$ 21.21
$ 6,226	$ 38.44	$ 5,777	$ 35.00	$ (449)	$ (3.44)	Outpatient Claims	$ 6,226	$ 38.44	$ 5,777	$ 35.00	$ (449)	$ (3.44)
$ 120	$ 0.74	$ -	$ -	$ (120)	$ (0.74)	Skilled Nursing Facility	$ 120	$ 0.74	$ -	$ -	$ (120)	$ (0.74)
$ 2,966	$ 18.31	$ 9,385	$ 56.86	$ 6,420	$ 38.55	Pharmacy	$ 2,966	$ 18.31	$ 9,385	$ 56.86	$ 6,420	$ 38.55
$ 1,409	$ 8.70	$ 1,135	$ 6.87	$ (274)	$ (1.82)	Provider Incentives and Shared Risk	$ 1,409	$ 8.70	$ 1,135	$ 6.87	$ (274)	$ (1.82)
$ 126	$ 0.78	$ 289	$ 1.75	$ 162	$ 0.97	Medical Administrative Expenses	$ 126	$ 0.78	$ 289	$ 1.75	$ 162	$ 0.97
$ 33,494	**$ 206.80**	**$ 45,757**	**$ 277.24**	**$ 12,263**	**$ 70.44**	**Total Healthcare Expenses**	**$ 33,494**	**$ 206.80**	**$ 45,757**	**$ 277.24**	**$ 12,263**	**$ 70.44**
69.6%		*85.4%*		*15.8%*		*MCR(%)*	*69.6%*		*85.4%*		*15.8%*	
$ 14,602	**$ 90.16**	**$ 7,802**	**$ 47.27**	**$ 6,801**	**$ 42.89**	**Operating Margin**	**$ 14,602**	**$ 90.16**	**$ 7,802**	**$ 47.27**	**$ 6,801**	**$ 42.89**
$ 5,810	$ 35.87	$ 8,138	$ 49.31	$ 2,328	$ 13.44	**Total Operating Expenses**	$ 5,810	$ 35.87	$ 8,138	$ 49.31	$ 2,328	$ 13.44
12.1%		*15.2%*		*3.1%*		*Admin Ratio(%)*	*12.1%*		*15.2%*		*3.1%*	
$ 8,793	**$ 54.29**	**$ (337)**	**$ (2.04)**	**$ 9,129**	**$ 56.33**	**Income (Loss) from Operations**	**$ 8,793**	**$ 54.29**	**$ (337)**	**$ (2.04)**	**$ 9,129**	**$ 56.33**
$ 44	**$ 0.27**	**$ (91)**	**$ (0.55)**	**$ 135**	**$ 0.82**	**Total Non-Operating Income (Expense)**	**$ 44**	**$ 0.27**	**$ (91)**	**$ (0.55)**	**$ 135**	**$ 0.82**
$ 8,836	**$ 54.56**	**$ (428)**	**$ (2.59)**	**$ 9,264**	**$ 57.15**	**Net Surplus (Deficit)**	**$ 8,836**	**$ 54.56**	**$ (428)**	**$ (2.59)**	**$ 9,264**	**$ 57.15**
18.4%		*-0.8%*		*19.2%*		*Margin(%)*	*18.4%*		*-0.8%*		*19.2%*	

L.A. Care HEALTH PLAN

Comparative Balance Sheet

(Dollars in thousands)	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22
ASSETS												
CURRENT ASSETS												
Total Current Assets	$4,781,058	$4,475,327	$5,037,258	$4,719,524	$5,474,251	$4,849,447	$4,871,908	$4,873,636	$4,936,270	$4,820,099	$5,663,469	$5,084,708
Capitalized Assets - net	$105,477	$105,456	$105,465	$105,437	$106,054	$106,171	$105,872	$105,275	$102,369	$104,591	$98,723	$98,849
NONCURRENT ASSETS	$3,393	$3,251	$3,170	$3,023	$2,878	$2,739	$2,635	$2,496	$2,363	$2,230	$2,129	$2,006
TOTAL ASSETS	**$4,889,928**	**$4,584,034**	**$5,145,893**	**$4,827,984**	**$5,583,182**	**$4,958,357**	**$4,980,415**	**$4,981,408**	**$5,046,815**	**$4,926,919**	**$5,833,900**	**$5,255,144**
LIABILITIES AND FUND EQUITY												
CURRENT LIABILITIES												
Total Current Liability	$3,810,650	$3,498,864	$4,025,400	$3,756,304	$4,494,782	$3,883,690	$3,872,966	$3,886,281	$3,964,303	$3,857,575	$4,746,546	$4,148,776
Long Term Liability	$3,417	$2,174	$2,231	$2,194	$3,058	$2,240	$2,362	$2,326	$2,429	$2,476	$0	($9)
Total Liabilities	**$3,814,067**	**$3,501,038**	**$4,027,631**	**$3,758,498**	**$4,497,840**	**$3,885,929**	**$3,875,327**	**$3,888,607**	**$3,966,733**	**$3,860,051**	**$4,746,546**	**$4,148,767**
FUND EQUITY												
Invested in Capital Assets, net of related debt	$105,477	$105,456	$105,465	$105,437	$106,054	$106,171	$105,872	$105,275	$102,369	$104,591	$98,723	$98,849
Restricted Equity	$600	$600	$600	$600	$600	$600	$600	$600	$600	$600	$600	$600
Minimum Tangible Net Equity	$202,065	$203,167	$203,167	$205,043	$204,666	$205,980	$203,622	$203,266	$204,167	$204,247	$207,029	$206,981
Board Designated Funds	$100,133	$89,697	$88,702	$86,298	$125,441	$124,260	$113,244	$110,644	$108,737	$106,837	$104,822	$113,719
Unrestricted Net Assets	$667,585	$684,076	$720,328	$672,107	$648,581	$635,417	$681,750	$673,016	$664,209	$650,594	$676,180	$686,228
Total Fund Equity	**$1,075,861**	**$1,082,996**	**$1,118,262**	**$1,069,486**	**$1,085,342**	**$1,072,427**	**$1,105,088**	**$1,092,801**	**$1,080,082**	**$1,066,868**	**$1,087,354**	**$1,106,377**
TOTAL LIABILITIES AND FUND EQUITY	**$4,889,928**	**$4,584,034**	**$5,145,893**	**$4,827,984**	**$5,583,182**	**$4,958,357**	**$4,980,415**	**$4,981,408**	**$5,046,815**	**$4,926,919**	**$5,833,900**	**$5,255,144**
Solvency Ratios												
Working Capital Ratio	1.25	1.28	1.25	1.26	1.22	1.25	1.26	1.25	1.25	1.25	1.19	1.23
Cash to Claims Ratio	0.66	0.59	0.66	0.54	0.76	0.53	0.53	0.52	0.52	0.49	0.63	0.46
Tangible Net Equity Ratio	5.32	5.33	5.50	5.22	5.30	5.21	5.43	5.38	5.29	5.22	5.25	5.35

L.A. Care HEALTH PLAN®

Cash Flows Statement ($ in thousands) — October 2022

	Oct-22	YTD
Cash Flows from Operating Activities:		
Capitation Revenue	$ 763,710	$ 763,710
Other Income (Expense), net	$ 6,284	$ 6,284
Healthcare Expenses	$ (737,336)	$ (737,336)
Operating Expenses	$ (29,792)	$ (29,792)
Net Cash Provided By Operating Activities	**$ 2,866**	**$ 2,866**
Cash Flows from Investing Activities		
Purchase of investments - Net	$ (65,406)	$ (65,406)
Purchase of Capital Assets	$ (2,036)	$ (2,036)
Net Cash Provided By Investing Activities	**$ (67,442)**	**$ (67,442)**
Cash Flows from Financing Activities:		
Gross Premium Tax (MCO Sales Tax) - Net	$ (39,300)	$ (39,300)
Pass through transactions (AB 85, IGT, etc.)	$ (575,356)	$ (575,356)
Net Cash Provided By Financing Activities	**$ (614,656)**	**$ (614,656)**
Net Increase in Cash and Cash Equivalents	**$ (679,232)**	**$ (679,232)**
Cash and Cash Equivalents, Beginning	$ 1,239,407	$ 1,239,407
Cash and Cash Equivalents, Ending	**$ 560,175**	**$ 560,175**
Reconciliation of Income from Operations to Net Cash Provided By (Used In) Operating Activities:		
Excess of Revenues over Expenses	**$ 19,023**	**$ 19,023**
Adjustments to Excess of Revenues Over Expenses:		
Depreciation	$ 1,910	$ 1,910
Realized and Unrealized (Gain)/Loss on Investments	$ 2,065	$ 2,065
Deferred Rent	$ (9)	$ (9)
Gross Premium Tax provision	$ (708)	$ (708)
Loss on Disposal of Capital Assets	$ -	$ -
Total Adjustments to Excess of Revenues over Expenses	**$ 3,258**	**$ 3,258**
Changes in Operating Assets and Liabilities:		
Capitation Receivable	$ (32,935)	$ (32,935)
Interest and Non-Operating Receivables	$ 277	$ 277
Prepaid and Other Current Assets	$ 5,448	$ 5,448
Accounts Payable and Accrued Liabilities	$ 2,713	$ 2,713
Subcapitation Payable	$ 28,522	$ 28,522
MediCal Adult Expansion Payable	$ 3	$ 3
Deferred Capitation Revenue	$ (25,814)	$ (25,814)
Accrued Medical Expenses	$ (6,449)	$ (6,449)
Reserve for Claims	$ 7,512	$ 7,512
Reserve for Provider Incentives	$ 421	$ 421
Grants Payable	$ 887	$ 887
Net Changes in Operating Assets and Liabilities	**$ (19,415)**	**$ (19,415)**
Net Cash Provided By Operating Activities	**$ 2,866**	**$ 2,866**

Financial Performance
November 2022
(Unaudited)

Overall

The combined member months are 5.5 million year-to-date, which is 756 member months unfavorable to the budget. The performance is a surplus of $5.3 million or 0.3% of revenue and is $5.3 million unfavorable to the budget. The unfavorability is due higher inpatient and outpatient claims but partially offset by lower skilled nursing facility costs, lower pharmacy expenses and lower capitation expenses due to higher cap deduct. Operating expenses are favorable to the budget due to timing in advertisement & other vendor spending.

MediCal Plan Partners

The member months are 2.2 million, which is 24,198 member months unfavorable to the budget. The performance is a surplus of $22.6 million and is $12.5 million favorable to the budget. The favorability in net surplus is driven primarily by a Prop 56 expense allocation between Plan Partners and TANF-MCE.

MediCal SPD-CCI

The member months are 526,261 which is 7,006 member months favorable to the budget. The performance is a deficit of $0.8 million and is $0.6 million unfavorable to the budget. The unfavorability is due to higher inpatient claims but offset by lower skilled nursing facility costs and outpatient claims. Lower operating expenses also contributed to higher surplus.

MediCal TANF-MCE

The member months are 2.4 million, which is 21,415 member months favorable to the budget. The performance is a deficit of $9.7 million and is $4.3 million unfavorable to the budget. The unfavorability is driven by higher outpatient claims and the reallocation of Prop 56 expenses between Plan Partners and TANF-MCE. Partially offsetting these unfavorabilities are lower skilled nursing facility costs and operating expenses.

Cal MediConnect (CMC)

The member months are 34,176, which is 1,192 member months favorable to the budget. The performance is a deficit of $1.3 million and is $8.5 million unfavorable to the budget. The unfavorability is driven by higher inpatient and outpatient claims, skilled nursing facility costs, and the timing in Part D reconciliation. These unfavorabilities are offset by lower pharmacy costs and operating expenses.

Commercial

L.A. Care Commercial consists of LACC and PASC-SEIU. The member months are 323,882, which is 6,171 member months unfavorable to the budget. The performance is a surplus of $2.8 million and is $1.3 million favorable to the budget due to lower inpatient claims, lower capitation expenses due to higher cap deduct, lower pharmacy costs, and lower operating expenses. Partially offsetting these favorabilities are an update to the LACC RAF score for calendar year 2022 and an adjustment for RADV for calendar year 2020. The impact of these adjustments is a reduction in revenue and healthcare expenses of $10.2 million and $2.1 million, respectively.

L.A. Care HEALTH PLAN

Consolidated Operations Income Statement ($ in thousands)

November 2022

Current Actual $	Current Actual PMPM	Current Budget $	Current Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM		YTD Actual $	YTD Actual PMPM	YTD Budget $	YTD Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM
						Membership						
2,748,695		2,748,582		113		Member Months	5,486,297		5,487,053		(756)	
						Revenue						
$ 821,928	$ 299.02	$ 827,133	$ 300.93	$ (5,205)	$ (1.91)	Capitation	$ 1,644,387	$ 299.73	$ 1,646,784	$ 300.12	$ (2,397)	$ (0.40)
$ 821,928	**$ 299.02**	**$ 827,133**	**$ 300.93**	**$ (5,205)**	**$ (1.91)**	**Total Revenues**	**$ 1,644,387**	**$ 299.73**	**$ 1,646,784**	**$ 300.12**	**$ (2,397)**	**$ (0.40)**
						Healthcare Expenses						
$ 464,980	$ 169.16	$ 455,524	$ 165.73	$ (9,456)	$ (3.43)	Capitation	$ 914,582	$ 166.70	$ 909,744	$ 165.80	$ (4,839)	$ (0.90)
$ 113,193	$ 41.18	$ 109,487	$ 39.83	$ (3,706)	$ (1.35)	Inpatient Claims	$ 235,774	$ 42.98	$ 218,773	$ 39.87	$ (17,000)	$ (3.10)
$ 99,265	$ 36.11	$ 92,036	$ 33.48	$ (7,230)	$ (2.63)	Outpatient Claims	$ 200,263	$ 36.50	$ 183,813	$ 33.50	$ (16,449)	$ (3.00)
$ 85,012	$ 30.93	$ 89,815	$ 32.68	$ 4,803	$ 1.75	Skilled Nursing Facility	$ 167,329	$ 30.50	$ 179,325	$ 32.68	$ 11,996	$ 2.18
$ 16,928	$ 6.16	$ 10,761	$ 3.92	$ (6,167)	$ (2.24)	Pharmacy	$ 16,469	$ 3.00	$ 21,541	$ 3.93	$ 5,073	$ 0.92
$ 9,110	$ 3.31	$ 13,045	$ 4.75	$ 3,935	$ 1.43	Provider Incentives and Shared Risk	$ 16,339	$ 2.98	$ 20,696	$ 3.77	$ 4,358	$ 0.79
$ 8,428	$ 3.07	$ 8,586	$ 3.12	$ 157	$ 0.06	Medical Administrative Expenses	$ 14,848	$ 2.71	$ 17,532	$ 3.20	$ 2,684	$ 0.49
$ 796,916	**$ 289.93**	**$ 779,253**	**$ 283.51**	**$ (17,664)**	**$ (6.41)**	**Total Healthcare Expenses**	**$ 1,565,602**	**$ 285.37**	**$ 1,551,424**	**$ 282.74**	**$ (14,178)**	**$ (2.62)**
97.0%		*94.2%*		*-2.7%*		*MCR(%)*	*95.2%*		*94.2%*		*-1.0%*	
$ 25,012	**$ 9.10**	**$ 47,881**	**$ 17.42**	**$ (22,869)**	**$ (8.32)**	**Operating Margin**	**$ 78,785**	**$ 14.36**	**$ 95,360**	**$ 17.38**	**$ (16,575)**	**$ (3.02)**
$ 43,067	$ 15.67	$ 43,264	$ 15.74	$ 197	$ 0.07	**Total Operating Expenses**	$ 81,987	$ 14.94	$ 90,846	$ 16.56	$ 8,860	$ 1.61
5.2%		*5.2%*		*0.0%*		*Admin Ratio(%)*	*5.0%*		*5.5%*		*0.5%*	
$ (18,055)	**$ (6.57)**	**$ 4,617**	**$ 1.68**	**$ (22,672)**	**$ (8.25)**	**Income (Loss) from Operations**	**$ (3,202)**	**$ (0.58)**	**$ 4,513**	**$ 0.82**	**$ (7,715)**	**$ (1.41)**
$ (6,040)	$ (2.20)	$ (2,762)	$ (1.00)	$ (3,277)	$ (1.19)	Other Income/(Expense), net	$ (4,098)	$ (0.75)	$ 700	$ 0.13	$ (4,798)	$ (0.87)
$ 4,833	$ 1.76	$ 2,678	$ 0.97	$ 2,155	$ 0.78	Interest Income, net	$ 9,126	$ 1.66	$ 5,364	$ 0.98	$ 3,762	$ 0.69
$ (99)	$ (0.04)	$ -	$ -	$ (99)	$ (0.04)	Realized Gain / Loss	$ (803)	$ (0.15)	$ -	$ -	$ (803)	$ (0.15)
$ 5,644	$ 2.05	$ -	$ -	$ 5,644	$ 2.05	Unrealized Gain / Loss	$ 4,283	$ 0.78	$ -	$ -	$ 4,283	$ 0.78
$ 4,339	**$ 1.58**	**$ (84)**	**$ (0.03)**	**$ 4,423**	**$ 1.61**	**Total Non-Operating Income (Expense)**	**$ 8,508**	**$ 1.55**	**$ 6,064**	**$ 1.11**	**$ 2,444**	**$ 0.45**
$ (13,716)	**$ (4.99)**	**$ 4,533**	**$ 1.65**	**$ (18,249)**	**$ (6.64)**	**Net Surplus (Deficit)**	**$ 5,306**	**$ 0.97**	**$ 10,578**	**$ 1.93**	**$ (5,271)**	**$ (0.96)**
-1.7%		*0.5%*		*-2.2%*		*Margin(%)*	*0.3%*		*0.6%*		*-0.3%*	

L.A. Care HEALTH PLAN

MediCal Plan Partners Income Statement ($ in thousands)

November 2022

Current Actual $	Current Actual PMPM	Current Budget $	Current Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM		YTD Actual $	YTD Actual PMPM	YTD Budget $	YTD Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM
						Membership						
1,104,344		1,117,658		(13,314)		Member Months	2,207,997		2,232,195		(24,198)	
						Revenue						
$ 278,262	$ 251.97	$ 275,308	$ 246.33	$ 2,954	$ 5.64	Capitation	$ 552,393	$ 250.18	$ 544,525	$ 243.94	$ 7,868	$ 6.24
$ 278,262	**$ 251.97**	**$ 275,308**	**$ 246.33**	**$ 2,954**	**$ 5.64**	**Total Revenues**	**$ 552,393**	**$ 250.18**	**$ 544,525**	**$ 243.94**	**$ 7,868**	**$ 6.24**
						Healthcare Expenses						
$ 258,854	$ 234.40	$ 255,221	$ 228.35	$ (3,633)	$ (6.04)	Capitation	$ 513,131	$ 232.40	$ 509,774	$ 228.37	$ (3,358)	$ (4.02)
$ 1	$ 0.00	$ -	$ -	$ (1)	$ (0.00)	Inpatient Claims	$ 1	$ 0.00	$ -	$ -	$ (1)	$ (0.00)
$ (0)	$ (0.00)	$ -	$ -	$ 0	$ 0.00	Outpatient Claims	$ (0)	$ (0.00)	$ -	$ -	$ 0	$ 0.00
$ 2,461	$ 2.23	$ 8,034	$ 7.19	$ 5,574	$ 4.96	Provider Incentives and Shared Risk	$ 5,077	$ 2.30	$ 10,678	$ 4.78	$ 5,601	$ 2.48
$ 1,402	$ 1.27	$ 1,545	$ 1.38	$ 143	$ 0.11	Medical Administrative Expenses	$ 2,608	$ 1.18	$ 3,162	$ 1.42	$ 554	$ 0.24
$ 262,718	**$ 237.90**	**$ 264,800**	**$ 236.92**	**$ 2,082**	**$ (0.97)**	**Total Healthcare Expenses**	**$ 520,818**	**$ 235.88**	**$ 523,614**	**$ 234.57**	**$ 2,795**	**$ (1.30)**
94.4%		*96.2%*		*1.8%*		*MCR(%)*	*94.3%*		*96.2%*		*1.9%*	
$ 15,544	**$ 14.08**	**$ 10,507**	**$ 9.40**	**$ 5,037**	**$ 4.67**	**Operating Margin**	**$ 31,575**	**$ 14.30**	**$ 20,912**	**$ 9.37**	**$ 10,663**	**$ 4.93**
$ 7,298	$ 6.61	$ 6,816	$ 6.10	$ (482)	$ (0.51)	**Total Operating Expenses**	$ 13,747	$ 6.23	$ 13,730	$ 6.15	$ (17)	$ (0.07)
2.6%		*2.5%*		*-0.1%*		*Admin Ratio(%)*	*2.5%*		*2.5%*		*0.0%*	
$ 8,246	**$ 7.47**	**$ 3,691**	**$ 3.30**	**$ 4,555**	**$ 4.16**	**Income (Loss) from Operations**	**$ 17,829**	**$ 8.07**	**$ 7,182**	**$ 3.22**	**$ 10,647**	**$ 4.86**
$ 3,690	**$ 3.34**	**$ 1,462**	**$ 1.31**	**$ 2,227**	**$ 2.03**	**Total Non-Operating Income (Expense)**	**$ 4,787**	**$ 2.17**	**$ 2,926**	**$ 1.31**	**$ 1,861**	**$ 0.86**
$ 11,936	**$ 10.81**	**$ 5,154**	**$ 4.61**	**$ 6,782**	**$ 6.20**	**Net Surplus (Deficit)**	**$ 22,616**	**$ 10.24**	**$ 10,108**	**$ 4.53**	**$ 12,508**	**$ 5.71**
4.3%		*1.9%*		*2.4%*		*Margin(%)*	*4.1%*		*1.9%*		*2.2%*	

L.A. Care HEALTH PLAN

SPD-CCI Income Statement ($ in thousands)

November 2022

Current Actual $	Current Actual PMPM	Current Budget $	Current Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM		YTD Actual $	YTD Actual PMPM	YTD Budget $	YTD Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM
						Membership						
263,750		259,879		3,871		Member Months	526,261		519,255		7,006	
						Revenue						
$ 199,620	$ 756.85	$ 199,186	$ 766.46	$ 433	$ (9.61)	Capitation	$ 403,622	$ 766.96	$ 398,231	$ 766.93	$ 5,391	$ 0.03
$ 199,620	**$ 756.85**	**$ 199,186**	**$ 766.46**	**$ 433**	**$ (9.61)**	**Total Revenues**	**$ 403,622**	**$ 766.96**	**$ 398,231**	**$ 766.93**	**$ 5,391**	**$ 0.03**
						Healthcare Expenses						
$ 29,659	$ 112.45	$ 29,044	$ 111.76	$ (615)	$ (0.69)	Capitation	$ 58,073	$ 110.35	$ 58,171	$ 112.03	$ 98	$ 1.68
$ 41,206	$ 156.23	$ 38,069	$ 146.49	$ (3,136)	$ (9.74)	Inpatient Claims	$ 92,517	$ 175.80	$ 76,231	$ 146.81	$ (16,286)	$ (28.99)
$ 43,209	$ 163.82	$ 45,230	$ 174.04	$ 2,022	$ 10.22	Outpatient Claims	$ 87,453	$ 166.18	$ 90,400	$ 174.10	$ 2,947	$ 7.92
$ 68,157	$ 258.41	$ 72,057	$ 277.27	$ 3,900	$ 18.86	Skilled Nursing Facility	$ 132,472	$ 251.72	$ 143,905	$ 277.14	$ 11,433	$ 25.41
$ 8	$ 0.03	$ -	$ -	$ (8)	$ (0.03)	Pharmacy	$ 10	$ 0.02	$ -	$ -	$ (10)	$ (0.02)
$ 3,488	$ 13.22	$ 244	$ 0.94	$ (3,244)	$ (12.28)	Provider Incentives and Shared Risk	$ 4,084	$ 7.76	$ 489	$ 0.94	$ (3,595)	$ (6.82)
$ 2,972	$ 11.27	$ 2,390	$ 9.20	$ (582)	$ (2.07)	Medical Administrative Expenses	$ 5,104	$ 9.70	$ 4,880	$ 9.40	$ (224)	$ (0.30)
$ 188,698	**$ 715.44**	**$ 187,035**	**$ 719.70**	**$ (1,663)**	**$ 4.26**	**Total Healthcare Expenses**	**$ 379,712**	**$ 721.53**	**$ 374,076**	**$ 720.41**	**$ (5,636)**	**$ (1.12)**
94.5%		*93.9%*		*-0.6%*		*MCR(%)*	*94.1%*		*93.9%*		*-0.1%*	
$ 10,922	**$ 41.41**	**$ 12,151**	**$ 46.76**	**$ (1,229)**	**$ (5.35)**	**Operating Margin**	**$ 23,910**	**$ 45.43**	**$ 24,155**	**$ 46.52**	**$ (245)**	**$ (1.09)**
$ 12,947	$ 49.09	$ 12,857	$ 49.47	$ (90)	$ 0.39	**Total Operating Expenses**	$ 24,971	$ 47.45	$ 25,882	$ 49.85	$ 911	$ 2.40
6.5%		*6.5%*		*0.0%*		*Admin Ratio(%)*	*6.2%*		*6.5%*		*0.3%*	
$ (2,025)	**$ (7.68)**	**$ (706)**	**$ (2.72)**	**$ (1,319)**	**$ (4.96)**	**Income (Loss) from Operations**	**$ (1,061)**	**$ (2.02)**	**$ (1,727)**	**$ (3.33)**	**$ 666**	**$ 1.31**
$ 104	**$ 0.39**	**$ 763**	**$ 2.94**	**$ (659)**	**$ (2.54)**	**Total Non-Operating Income (Expense)**	**$ 219**	**$ 0.42**	**$ 1,528**	**$ 2.94**	**$ (1,309)**	**$ (2.53)**
$ (1,921)	**$ (7.28)**	**$ 57**	**$ 0.22**	**$ (1,978)**	**$ (7.50)**	**Net Surplus (Deficit)**	**$ (842)**	**$ (1.60)**	**$ (199)**	**$ (0.38)**	**$ (643)**	**$ (1.22)**
-1.0%		*0.0%*		*-1.0%*		*Margin(%)*	*-0.2%*		*-0.1%*		*-0.2%*	

L.A. Care HEALTH PLAN

TANF-MCE Income Statement ($ in thousands)

November 2022

Current Actual $	Current Actual PMPM	Current Budget $	Current Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM		YTD Actual $	YTD Actual PMPM	YTD Budget $	YTD Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM
						Membership						
1,201,617		1,189,652		11,965		Member Months	2,393,981		2,372,566		21,415	
						Revenue						
$ 273,075	$ 227.26	$ 271,737	$ 228.42	$ 1,338	$ (1.16)	Capitation	$ 544,212	$ 227.33	$ 541,859	$ 228.38	$ 2,354	$ (1.06)
$ 273,075	**$ 227.26**	**$ 271,737**	**$ 228.42**	**$ 1,338**	**$ (1.16)**	**Total Revenues**	**$ 544,212**	**$ 227.33**	**$ 541,859**	**$ 228.38**	**$ 2,354**	**$ (1.06)**
						Healthcare Expenses						
$ 150,067	$ 124.89	$ 141,072	$ 118.58	$ (8,995)	$ (6.30)	Capitation	$ 289,086	$ 120.76	$ 281,296	$ 118.56	$ (7,790)	$ (2.19)
$ 55,221	$ 45.96	$ 57,763	$ 48.55	$ 2,542	$ 2.60	Inpatient Claims	$ 114,164	$ 47.69	$ 115,164	$ 48.54	$ 999	$ 0.85
$ 45,910	$ 38.21	$ 38,378	$ 32.26	$ (7,532)	$ (5.95)	Outpatient Claims	$ 93,302	$ 38.97	$ 76,526	$ 32.25	$ (16,776)	$ (6.72)
$ 14,172	$ 11.79	$ 16,488	$ 13.86	$ 2,316	$ 2.07	Skilled Nursing Facility	$ 29,763	$ 12.43	$ 32,864	$ 13.85	$ 3,101	$ 1.42
$ (18)	$ (0.02)	$ -	$ -	$ 18	$ 0.02	Pharmacy	$ (107)	$ (0.04)	$ -	$ -	$ 107	$ 0.04
$ 2,006	$ 1.67	$ 2,688	$ 2.26	$ 682	$ 0.59	Provider Incentives and Shared Risk	$ 3,791	$ 1.58	$ 5,361	$ 2.26	$ 1,570	$ 0.68
$ 3,551	$ 2.96	$ 4,045	$ 3.40	$ 494	$ 0.44	Medical Administrative Expenses	$ 6,284	$ 2.63	$ 8,257	$ 3.48	$ 1,973	$ 0.86
$ 270,908	**$ 225.45**	**$ 260,434**	**$ 218.92**	**$ (10,474)**	**$ (6.54)**	**Total Healthcare Expenses**	**$ 536,284**	**$ 224.01**	**$ 519,468**	**$ 218.95**	**$ (16,816)**	**$ (5.07)**
99.2%		*95.8%*		*-3.4%*		*MCR(%)*	*98.5%*		*95.9%*		*-2.7%*	
$ 2,167	**$ 1.80**	**$ 11,303**	**$ 9.50**	**$ (9,136)**	**$ (7.70)**	**Operating Margin**	**$ 7,928**	**$ 3.31**	**$ 22,391**	**$ 9.44**	**$ (14,462)**	**$ (6.13)**
$ 12,920	$ 10.75	$ 15,377	$ 12.93	$ 2,457	$ 2.17	**Total Operating Expenses**	$ 25,633	$ 10.71	$ 30,798	$ 12.98	$ 5,165	$ 2.27
4.7%		*5.7%*		*0.9%*		*Admin Ratio(%)*	*4.7%*		*5.7%*		*1.0%*	
$ (10,753)	**$ (8.95)**	**$ (4,074)**	**$ (3.42)**	**$ (6,679)**	**$ (5.52)**	**Income (Loss) from Operations**	**$ (17,704)**	**$ (7.40)**	**$ (8,407)**	**$ (3.54)**	**$ (9,297)**	**$ (3.85)**
$ 6,323	**$ 5.26**	**$ 1,506**	**$ 1.27**	**$ 4,817**	**$ 4.00**	**Total Non-Operating Income (Expense)**	**$ 8,022**	**$ 3.35**	**$ 3,012**	**$ 1.27**	**$ 5,011**	**$ 2.08**
$ (4,430)	**$ (3.69)**	**$ (2,568)**	**$ (2.16)**	**$ (1,862)**	**$ (1.53)**	**Net Surplus (Deficit)**	**$ (9,682)**	**$ (4.04)**	**$ (5,395)**	**$ (2.27)**	**$ (4,287)**	**$ (1.77)**
-1.6%		*-0.9%*		*-0.7%*		*Margin(%)*	*-1.8%*		*-1.0%*		*-0.8%*	

L.A. Care HEALTH PLAN

CMC Income Statement ($ in thousands)

November 2022

Current Actual $	Current Actual PMPM	Current Budget $	Current Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM		YTD Actual $	YTD Actual PMPM	YTD Budget $	YTD Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM
						Membership						
17,069		16,387		682		Member Months	34,176		32,984		1,192	
						Revenue						
$ 25,876	$ 1,515.96	$ 27,357	$ 1,669.43	$ (1,481)	$ (153.48)	Capitation	$ 50,967	$ 1,491.31	$ 55,065	$ 1,669.43	$ (4,097)	$ (178.12)
$ 25,876	**$ 1,515.96**	**$ 27,357**	**$ 1,669.43**	**$ (1,481)**	**$ (153.48)**	**Total Revenues**	**$ 50,967**	**$ 1,491.31**	**$ 55,065**	**$ 1,669.43**	**$ (4,097)**	**$ (178.12)**
						Healthcare Expenses						
$ 10,159	$ 595.15	$ 9,402	$ 573.75	$ (757)	$ (21.40)	Capitation	$ 20,188	$ 590.72	$ 18,925	$ 573.75	$ (1,264)	$ (16.97)
$ 9,056	$ 530.53	$ 5,278	$ 322.11	$ (3,777)	$ (208.43)	Inpatient Claims	$ 16,596	$ 485.61	$ 10,624	$ 322.11	$ (5,972)	$ (163.50)
$ 3,593	$ 210.48	$ 2,651	$ 161.80	$ (941)	$ (48.68)	Outpatient Claims	$ 6,727	$ 196.82	$ 5,334	$ 161.71	$ (1,393)	$ (35.11)
$ 2,534	$ 148.43	$ 1,270	$ 77.49	$ (1,264)	$ (70.94)	Skilled Nursing Facility	$ 4,825	$ 141.19	$ 2,556	$ 77.49	$ (2,269)	$ (63.70)
$ 2,565	$ 150.24	$ 1,377	$ 84.05	$ (1,187)	$ (66.19)	Pharmacy	$ (773)	$ (22.62)	$ 2,772	$ 84.05	$ 3,546	$ 106.67
$ 428	$ 25.05	$ 943	$ 57.57	$ 516	$ 32.52	Provider Incentives and Shared Risk	$ 1,249	$ 36.55	$ 1,899	$ 57.57	$ 650	$ 21.02
$ 339	$ 19.88	$ 326	$ 19.90	$ (13)	$ 0.02	Medical Administrative Expenses	$ 561	$ 16.41	$ 664	$ 20.14	$ 103	$ 3.73
$ 28,672	**$ 1,679.77**	**$ 21,248**	**$ 1,296.68**	**$ (7,424)**	**$ (383.09)**	**Total Healthcare Expenses**	**$ 49,373**	**$ 1,444.68**	**$ 42,774**	**$ 1,296.82**	**$ (6,599)**	**$ (147.85)**
110.8%		*77.7%*		*-33.1%*		*MCR(%)*	*96.9%*		*77.7%*		*-19.2%*	
$ (2,796)	**$ (163.81)**	**$ 6,108**	**$ 372.76**	**$ (8,904)**	**$ (536.56)**	**Operating Margin**	**$ 1,594**	**$ 46.64**	**$ 12,290**	**$ 372.61**	**$ (10,696)**	**$ (325.98)**
$ 1,700	$ 99.58	$ 1,816	$ 110.85	$ 117	$ 11.26	**Total Operating Expenses**	$ 3,405	$ 99.62	$ 5,148	$ 156.08	$ 1,744	$ 56.46
6.6%		*6.6%*		*0.1%*		*Admin Ratio(%)*	*6.7%*		*9.3%*		*2.7%*	
$ (4,496)	**$ (263.39)**	**$ 4,292**	**$ 261.91**	**$ (8,788)**	**$ (525.30)**	**Income (Loss) from Operations**	**$ (1,811)**	**$ (52.99)**	**$ 7,142**	**$ 216.53**	**$ (8,953)**	**$ (269.51)**
$ 490	**$ 28.71**	**$ 20**	**$ 1.25**	**$ 470**	**$ 27.46**	**Total Non-Operating Income (Expense)**	**$ 470**	**$ 13.75**	**$ 41**	**$ 1.25**	**$ 429**	**$ 12.50**
$ (4,006)	**$ (234.68)**	**$ 4,312**	**$ 263.16**	**$ (8,318)**	**$ (497.84)**	**Net Surplus (Deficit)**	**$ (1,341)**	**$ (39.24)**	**$ 7,183**	**$ 217.77**	**$ (8,524)**	**$ (257.01)**
-15.5%		*15.8%*		*-31.2%*		*Margin(%)*	*-2.6%*		*13.0%*		*-15.7%*	

L.A. Care HEALTH PLAN

Commercial Income Statement ($ in thousands)

November 2022

Current Actual $	Current Actual PMPM	Current Budget $	Current Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM		YTD Actual $	YTD Actual PMPM	YTD Budget $	YTD Budget PMPM	Fav(Unfav) Budget $	Fav(Unfav) Budget PMPM
						Membership						
161,915		165,006		(3,091)		Member Months	323,882		330,053		(6,171)	
						Revenue						
$ 45,096	$ 278.51	$ 53,546	$ 324.51	$ (8,450)	$ (45.99)	Capitation	$ 93,192	$ 287.74	$ 107,104	$ 324.51	$ (13,912)	$ (36.77)
$ 45,096	**$ 278.51**	**$ 53,546**	**$ 324.51**	**$ (8,450)**	**$ (45.99)**	**Total Revenues**	**$ 93,192**	**$ 287.74**	**$ 107,104**	**$ 324.51**	**$ (13,912)**	**$ (36.77)**
						Healthcare Expenses						
$ 16,242	$ 100.31	$ 20,785	$ 125.96	$ 4,543	$ 25.65	Capitation	$ 34,103	$ 105.30	$ 41,578	$ 125.97	$ 7,475	$ 20.68
$ 7,708	$ 47.61	$ 8,376	$ 50.76	$ 668	$ 3.16	Inpatient Claims	$ 12,494	$ 38.58	$ 16,754	$ 50.76	$ 4,260	$ 12.19
$ 6,554	$ 40.48	$ 5,776	$ 35.00	$ (779)	$ (5.48)	Outpatient Claims	$ 12,781	$ 39.46	$ 11,553	$ 35.00	$ (1,228)	$ (4.46)
$ 149	$ 0.92	$ -	$ -	$ (149)	$ (0.92)	Skilled Nursing Facility	$ 269	$ 0.83	$ -	$ -	$ (269)	$ (0.83)
$ 14,374	$ 88.77	$ 9,383	$ 56.87	$ (4,990)	$ (31.91)	Pharmacy	$ 17,339	$ 53.54	$ 18,769	$ 56.87	$ 1,429	$ 3.33
$ 728	$ 4.49	$ 1,135	$ 6.88	$ 407	$ 2.38	Provider Incentives and Shared Risk	$ 2,136	$ 6.60	$ 2,269	$ 6.88	$ 133	$ 0.28
$ 164	$ 1.02	$ 280	$ 1.70	$ 116	$ 0.68	Medical Administrative Expenses	$ 291	$ 0.90	$ 569	$ 1.72	$ 278	$ 0.83
$ 45,920	**$ 283.60**	**$ 45,735**	**$ 277.17**	**$ (184)**	**$ (6.43)**	**Total Healthcare Expenses**	**$ 79,414**	**$ 245.19**	**$ 91,492**	**$ 277.20**	**$ 12,078**	**$ 32.01**
101.8%		*85.4%*		*-16.4%*		*MCR(%)*	*85.2%*		*85.4%*		*0.2%*	
$ (824)	**$ (5.09)**	**$ 7,810**	**$ 47.33**	**$ (8,635)**	**$ (52.42)**	**Operating Margin**	**$ 13,778**	**$ 42.54**	**$ 15,612**	**$ 47.30**	**$ (1,834)**	**$ (4.76)**
$ 5,751	$ 35.52	$ 5,808	$ 35.20	$ 57	$ (0.32)	**Total Operating Expenses**	$ 11,560	$ 35.69	$ 13,946	$ 42.25	$ 2,385	$ 6.56
12.8%		*10.8%*		*-1.9%*		*Admin Ratio(%)*	*12.4%*		*13.0%*		*0.6%*	
$ (6,575)	**$ (40.61)**	**$ 2,003**	**$ 12.14**	**$ (8,578)**	**$ (52.75)**	**Income (Loss) from Operations**	**$ 2,218**	**$ 6.85**	**$ 1,666**	**$ 5.05**	**$ 551**	**$ 1.80**
$ 550	**$ 3.40**	**$ (91)**	**$ (0.55)**	**$ 641**	**$ 3.95**	**Total Non-Operating Income (Expense)**	**$ 594**	**$ 1.83**	**$ (182)**	**$ (0.55)**	**$ 776**	**$ 2.38**
$ (6,025)	**$ (37.21)**	**$ 1,912**	**$ 11.59**	**$ (7,937)**	**$ (48.80)**	**Net Surplus (Deficit)**	**$ 2,811**	**$ 8.68**	**$ 1,484**	**$ 4.50**	**$ 1,327**	**$ 4.18**
-13.4%		*3.6%*		*-16.9%*		*Margin(%)*	*3.0%*		*1.4%*		*1.6%*	

L.A. Care HEALTH PLAN

Comparative Balance Sheet

(Dollars in thousands)	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22
ASSETS												
CURRENT ASSETS												
Total Current Assets	$4,475,327	$5,037,258	$4,719,524	$5,474,251	$4,849,447	$4,871,908	$4,873,636	$4,936,270	$4,820,099	$5,663,469	$5,084,708	$5,172,416
Capitalized Assets - net	$105,456	$105,465	$105,437	$106,054	$106,171	$105,872	$105,275	$102,369	$104,591	$98,723	$98,849	$98,849
NONCURRENT ASSETS	$3,251	$3,170	$3,023	$2,878	$2,739	$2,635	$2,496	$2,363	$2,230	$2,129	$2,006	$1,946
TOTAL ASSETS	**$4,584,034**	**$5,145,893**	**$4,827,984**	**$5,583,182**	**$4,958,357**	**$4,980,415**	**$4,981,408**	**$5,046,815**	**$4,926,919**	**$5,833,900**	**$5,255,144**	**$5,342,529**
LIABILITIES AND FUND EQUITY												
CURRENT LIABILITIES												
Total Current Liability	$3,498,864	$4,025,400	$3,756,304	$4,494,782	$3,883,690	$3,872,966	$3,886,281	$3,964,303	$3,857,575	$4,746,546	$4,148,776	$4,249,831
Long Term Liability	$2,174	$2,231	$2,194	$3,058	$2,240	$2,362	$2,326	$2,429	$2,476	$0	($9)	$38
Total Liabilities	**$3,501,038**	**$4,027,631**	**$3,758,498**	**$4,497,840**	**$3,885,929**	**$3,875,327**	**$3,888,607**	**$3,966,733**	**$3,860,051**	**$4,746,546**	**$4,148,767**	**$4,249,869**
FUND EQUITY												
Invested in Capital Assets, net of related debt	$105,456	$105,465	$105,437	$106,054	$106,171	$105,872	$105,275	$102,369	$104,591	$98,723	$98,849	$98,849
Restricted Equity	$600	$600	$600	$600	$600	$600	$600	$600	$600	$600	$600	$600
Minimum Tangible Net Equity	$203,167	$203,167	$205,043	$204,666	$205,980	$203,622	$203,266	$204,167	$204,247	$207,029	$206,981	$206,981
Board Designated Funds	$89,697	$88,702	$86,298	$125,441	$124,260	$113,244	$110,644	$108,737	$106,837	$104,822	$113,719	$107,669
Unrestricted Net Assets	$684,076	$720,328	$672,107	$648,581	$635,417	$681,750	$673,016	$664,209	$650,594	$676,180	$686,228	$678,561
Total Fund Equity	**$1,082,996**	**$1,118,262**	**$1,069,486**	**$1,085,342**	**$1,072,427**	**$1,105,088**	**$1,092,801**	**$1,080,082**	**$1,066,868**	**$1,087,354**	**$1,106,377**	**$1,092,660**
TOTAL LIABILITIES AND FUND EQUITY	**$4,584,034**	**$5,145,893**	**$4,827,984**	**$5,583,182**	**$4,958,357**	**$4,980,415**	**$4,981,408**	**$5,046,815**	**$4,926,919**	**$5,833,900**	**$5,255,144**	**$5,342,529**
Solvency Ratios												
Working Capital Ratio	1.28	1.25	1.26	1.22	1.25	1.26	1.25	1.25	1.25	1.19	1.23	1.22
Cash to Claims Ratio	0.59	0.66	0.54	0.76	0.53	0.53	0.52	0.52	0.49	0.63	0.46	0.48
Tangible Net Equity Ratio	5.33	5.50	5.22	5.30	5.21	5.43	5.38	5.29	5.22	5.25	5.35	5.28

L.A. Care HEALTH PLAN®

Cash Flows Statement ($ in thousands) — November 2022

	Oct-22	Nov-22	YTD
Cash Flows from Operating Activities:			
Capitation Revenue	$ 763,710	$ 817,194	$ 1,580,904
Other Income (Expense), net	$ 6,284	$ (1,516)	$ 4,768
Healthcare Expenses	$ (737,336)	$ (716,891)	$ (1,454,227)
Operating Expenses	$ (29,792)	$ (36,802)	$ (66,594)
Net Cash Provided By Operating Activities	**$ 2,866**	**$ 61,985**	**$ 64,851**
Cash Flows from Investing Activities			
Purchase of investments - Net	$ (65,406)	$ (114,037)	$ (179,443)
Purchase of Capital Assets	$ (2,036)	$ (1,650)	$ (3,686)
Net Cash Provided By Investing Activities	**$ (67,442)**	**$ (115,687)**	**$ (183,129)**
Cash Flows from Financing Activities:			
Gross Premium Tax (MCO Sales Tax) - Net	$ (39,300)	$ 25,277	$ (14,023)
Pass through transactions (AB 85, IGT, etc.)	$ (575,356)	$ 12	$ (575,344)
Net Cash Provided By Financing Activities	**$ (614,656)**	**$ 25,289**	**$ (589,367)**
Net Increase in Cash and Cash Equivalents	**$ (679,232)**	**$ (28,413)**	**$ (707,645)**
Cash and Cash Equivalents, Beginning	$ 1,239,407	$ 560,175	$ 1,239,407
Cash and Cash Equivalents, Ending	**$ 560,175**	**$ 531,762**	**$ 531,762**
Reconciliation of Income from Operations to Net Cash Provided By (Used In) Operating Activities:			
Excess of Revenues over Expenses	**$ 19,023**	**$ (13,716)**	**$ 5,307**
Adjustments to Excess of Revenues Over Expenses:			
Depreciation	$ 1,910	$ 1,912	$ 3,822
Realized and Unrealized (Gain)/Loss on Investments	$ 2,065	$ (5,545)	$ (3,480)
Deferred Rent	$ (9)	$ 47	$ 38
Gross Premium Tax provision	$ (708)	$ (778)	$ (1,486)
Loss on Disposal of Capital Assets	$ -		$ -
Total Adjustments to Excess of Revenues over Expenses	**$ 3,258**	**$ (4,364)**	**$ (1,106)**
Changes in Operating Assets and Liabilities:			
Capitation Receivable	$ (32,935)	$ (3,386)	$ (36,321)
Interest and Non-Operating Receivables	$ 277	$ (941)	$ (664)
Prepaid and Other Current Assets	$ 5,448	$ (1,775)	$ 3,673
Accounts Payable and Accrued Liabilities	$ 2,713	$ 2,806	$ 5,519
Subcapitation Payable	$ 28,522	$ 57,608	$ 86,130
MediCal Adult Expansion Payable	$ 3	$ (649)	$ (646)
Deferred Capitation Revenue	$ (25,814)	$ (1,348)	$ (27,162)
Accrued Medical Expenses	$ (6,449)	$ 4,176	$ (2,273)
Reserve for Claims	$ 7,512	$ 16,195	$ 23,707
Reserve for Provider Incentives	$ 421	$ 5,561	$ 5,982
Grants Payable	$ 887	$ 1,818	$ 2,705
Net Changes in Operating Assets and Liabilities	**$ (19,415)**	**$ 80,065**	**$ 60,650**
Net Cash Provided By Operating Activities	**$ 2,866**	**$ 61,985**	**$ 64,851**

DATE: January 24, 2023

TO: Finance & Budget Committee

FROM: Marie Montgomery, *Chief Financial Officer*

SUBJECT: Monthly Investment Portfolio Securities Transaction Report for October, 2022

To keep the Committee apprised of L.A. Care's investment portfolios and to comply with California Government Code Section 53607, attached are the monthly investment transaction details from October 1 to October 31, 2022.

L.A. Care's investment market value as of October 31, 2022, was $1.7 billion. This includes our funds invested with the government pooled funds. L.A. Care has approximately $73 million invested with the statewide Local Agency Investment Fund (LAIF), and approximately $155 million invested with the Los Angeles County Pooled Investment Fund (LACPIF).

The remainder as of October 31, 2022, of $1.45 billion is managed by two independent asset managers, 1) Payden & Rygel and 2) New England Asset Management (NEAM) and is divided into three portfolios based on investment style,

1. Payden & Rygel - Short-term portfolio
2. Payden & Rygel - Extended term portfolio
3. New England Asset Management - Corporate notes extended term portfolio

The transactions within these three portfolios are included in the attached reports.

LA Care, as a California government entity, only makes investments in bonds/fixed income, as per the California Government Code. The entries on the Investment Securities Portfolio Transaction Report reflect transactions undertaken by financial management companies on L.A. Care's behalf. L.A. Care does not direct these individual transactions. The firms, managing investments on behalf of L.A. Care, conduct the transactions based on L.A. Care's investment guidelines.

Account Name: L.A. CARE HEALTH PLAN

10/01/2022 through 10/31/2022

Tr Date	St Date	Transaction Type	Units	Description		Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
10/05/22	10/06/22	Buy	11,000,000.000	U.S. TREASURY BILL MAT 10/18/22 Cpn	912796YE3	(10,989,982.67)		0.00	0.00	(10,989,982.67)
10/06/22	10/06/22	Buy	40,000,000.000	FHLB DISCOUNT NOTE MAT 10/12/22 Cpn	313385K39	(39,981,000.00)		0.00	0.00	(39,981,000.00)
10/06/22	10/06/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 10/12/22 Cpn	313385K39	(49,976,250.00)		0.00	0.00	(49,976,250.00)
10/06/22	10/06/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 10/12/22 Cpn	313385K39	(49,976,250.00)		0.00	0.00	(49,976,250.00)
10/06/22	10/06/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 10/12/22 Cpn	313385K39	(49,976,250.00)		0.00	0.00	(49,976,250.00)
10/06/22	10/06/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 10/12/22 Cpn	313385K39	(49,976,250.00)		0.00	0.00	(49,976,250.00)
10/06/22	10/06/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 10/12/22 Cpn	313385K39	(49,976,250.00)		0.00	0.00	(49,976,250.00)
10/06/22	10/06/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 10/12/22 Cpn	313385K39	(49,976,250.00)		0.00	0.00	(49,976,250.00)
10/04/22	10/06/22	Buy	2,500,000.000	TLOT 2021-B A3 LEASE 144A MAT 10/21/24 Cpn 0.42	89239CAC3	(2,409,472.66)	(466.67)	0.00	0.00	(2,409,939.33)
10/07/22	10/11/22	Buy	32,000,000.000	U.S. TREASURY BILL MAT 10/18/22 Cpn	912796YE3	(31,982,571.56)		0.00	0.00	(31,982,571.56)
10/07/22	10/11/22	Buy	32,000,000.000	U.S. TREASURY BILL MAT 10/20/22 Cpn	912796V63	(31,977,992.00)		0.00	0.00	(31,977,992.00)
10/07/22	10/11/22	Buy	36,000,000.000	U.S. TREASURY BILL MAT 10/27/22 Cpn	912796V71	(35,955,520.00)		0.00	0.00	(35,955,520.00)
10/06/22	10/11/22	Buy	7,600,209.540	GMALT 2021-1 A3 LEASE MAT 02/20/24 Cpn 0.26	36261RAC2	(7,536,082.77)	(1,152.70)	0.00	0.00	(7,537,235.47)

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10/06/22	10/11/22	Buy	257,634.220	GMALT 2021-1 A3 LEASE MAT 02/20/24 Cpn 0.26 36261RAC2	(255,460.43)	(39.07)	0.00	0.00	(255,499.50)
10/04/22	10/12/22	Buy	3,700,000.000	ALLYA 2022-2 A2 CAR MAT 10/15/25 Cpn 4.62 02008MAB5	(3,699,705.85)		0.00	0.00	(3,699,705.85)
10/11/22	10/12/22	Buy	7,000,000.000	U.S. TREASURY BILL MAT 10/18/22 Cpn 912796YE3	(6,996,775.33)		0.00	0.00	(6,996,775.33)
10/11/22	10/12/22	Buy	20,000,000.000	U.S. TREASURY BILL MAT 10/20/22 Cpn 912796V63	(19,987,733.33)		0.00	0.00	(19,987,733.33)
10/11/22	10/12/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 10/25/22 Cpn 912796YF0	(49,950,482.64)		0.00	0.00	(49,950,482.64)
10/11/22	10/12/22	Buy	14,000,000.000	U.S. TREASURY BILL MAT 10/27/22 Cpn 912796V71	(13,983,873.75)		0.00	0.00	(13,983,873.75)
10/04/22	10/12/22	Buy	5,300,000.000	GALC 2022-1 A1 EQP 144A MAT 10/16/23 Cpn 4.34 39154TBU1	(5,300,000.00)		0.00	0.00	(5,300,000.00)
10/04/22	10/12/22	Buy	7,500,000.000	GMCAR 2022-4 A1 CAR MAT 10/16/23 Cpn 3.62 36265QAA4	(7,500,000.00)		0.00	0.00	(7,500,000.00)
10/11/22	10/12/22	Buy	7,500,000.000	SKANDINAV ENSKILDA BK YCD FR MAT 04/12/23 Cpn 3.56 83050PP60	(7,500,000.00)		0.00	0.00	(7,500,000.00)
10/11/22	10/12/22	Buy	38,000,000.000	TVA DISCOUNT NOTE MAT 11/02/22 Cpn 880590M84	(37,934,608.33)		0.00	0.00	(37,934,608.33)
10/13/22	10/13/22	Buy	22,000,000.000	U.S. TREASURY BILL MAT 11/01/22 Cpn 912796YG8	(21,968,925.18)		0.00	0.00	(21,968,925.18)
10/13/22	10/13/22	Buy	10,000,000.000	U.S. TREASURY BILL MAT 11/08/22 Cpn 912796YP8	(9,979,286.67)		0.00	0.00	(9,979,286.67)
10/13/22	10/13/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 11/08/22 Cpn 912796YP8	(49,896,433.33)		0.00	0.00	(49,896,433.33)

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10/13/22	10/14/22	Buy	19,000,000.000	FHLMC DISCOUNT NOTE MAT 10/17/22 Cpn	313397K83	(18,995,804.17)		0.00	0.00	(18,995,804.17)
10/17/22	10/17/22	Buy	21,000,000.000	FHLB DISCOUNT NOTE MAT 10/18/22 Cpn	313385K96	(20,998,279.17)		0.00	0.00	(20,998,279.17)
10/17/22	10/17/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 10/18/22 Cpn	313385K96	(49,995,902.78)		0.00	0.00	(49,995,902.78)
10/18/22	10/18/22	Buy	7,500,000.000	CA STATE GO/ULT CP TXB MAT 12/20/22 Cpn 3.90	13068PEP7	(7,500,000.00)		0.00	0.00	(7,500,000.00)
10/18/22	10/19/22	Buy	40,000,000.000	U.S. TREASURY BILL MAT 10/25/22 Cpn	912796YF0	(39,982,600.00)		0.00	0.00	(39,982,600.00)
10/18/22	10/19/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 10/25/22 Cpn	912796YF0	(49,978,250.00)		0.00	0.00	(49,978,250.00)
10/18/22	10/19/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 10/25/22 Cpn	912796YF0	(49,978,250.00)		0.00	0.00	(49,978,250.00)
10/18/22	10/19/22	Buy	20,000,000.000	U.S. TREASURY BILL MAT 11/15/22 Cpn	912796YQ6	(19,953,762.50)		0.00	0.00	(19,953,762.50)
10/18/22	10/19/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 11/15/22 Cpn	912796YQ6	(49,884,406.25)		0.00	0.00	(49,884,406.25)
10/18/22	10/19/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 11/10/22 Cpn	912796W54	(49,915,666.67)		0.00	0.00	(49,915,666.67)
10/18/22	10/19/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 11/22/22 Cpn	912796YR4	(49,854,036.11)		0.00	0.00	(49,854,036.11)
10/18/22	10/19/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 04/20/23 Cpn	912796V48	(48,930,720.83)		0.00	0.00	(48,930,720.83)
10/18/22	10/19/22	Buy	50,000,000.000	CASH MGMT BILL MAT 02/14/23 Cpn	912796ZU6	(49,340,347.22)		0.00	0.00	(49,340,347.22)

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10/18/22	10/19/22	Buy	25,000,000.000	FAMC DISCOUNT NOTE MAT 10/21/22 Cpn 31315LL48	(24,995,916.67)		0.00	0.00	(24,995,916.67)
10/18/22	10/19/22	Buy	50,000,000.000	FAMC DISCOUNT NOTE MAT 10/21/22 Cpn 31315LL48	(49,991,833.33)		0.00	0.00	(49,991,833.33)
10/18/22	10/19/22	Buy	25,000,000.000	FHLB DISCOUNT NOTE MAT 10/21/22 Cpn 313385L46	(24,996,036.11)		0.00	0.00	(24,996,036.11)
10/18/22	10/19/22	Buy	25,000,000.000	FHLB DISCOUNT NOTE MAT 11/14/22 Cpn 313385P42	(24,944,388.89)		0.00	0.00	(24,944,388.89)
10/18/22	10/19/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/14/22 Cpn 313385P42	(49,888,777.78)		0.00	0.00	(49,888,777.78)
10/18/22	10/19/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/14/22 Cpn 313385P42	(49,888,777.78)		0.00	0.00	(49,888,777.78)
10/12/22	10/19/22	Buy	2,300,000.000	HPEFS 2022-3A A1 EQP 144A MAT 10/20/23 Cpn 4.33 403951AA4	(2,300,000.00)		0.00	0.00	(2,300,000.00)
10/19/22	10/20/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 10/27/22 Cpn 912796V71	(49,975,252.08)		0.00	0.00	(49,975,252.08)
10/19/22	10/20/22	Buy	35,000,000.000	U.S. TREASURY BILL MAT 12/01/22 Cpn 912796P94	(34,865,005.00)		0.00	0.00	(34,865,005.00)
10/19/22	10/20/22	Buy	25,000,000.000	FHLB DISCOUNT NOTE MAT 11/28/22 Cpn 313385R24	(24,909,270.83)		0.00	0.00	(24,909,270.83)
10/19/22	10/20/22	Buy	7,500,000.000	JOHN DEERE CANADA CP 144A MAT 11/18/22 Cpn 24423JLJ4	(7,479,277.08)		0.00	0.00	(7,479,277.08)
10/19/22	10/20/22	Buy	7,500,000.000	NORDEA BANK NY YCD FRN MAT 04/20/23 Cpn 3.64 65558UXX5	(7,500,000.00)		0.00	0.00	(7,500,000.00)
10/20/22	10/21/22	Buy	2,500,000.000	BANK OF NOVA SCOTIA YCD FRN MAT 02/21/23 Cpn 3.54 06417MH40	(2,500,000.00)		0.00	0.00	(2,500,000.00)

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10/21/22	10/21/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 10/24/22 Cpn 313385L79	(49,987,916.67)		0.00	0.00	(49,987,916.67)
10/20/22	10/21/22	Buy	7,500,000.000	SVENSKA HANDELSBANKEN NY Y MAT 04/21/23 Cpn 3.65 86959RM31	(7,500,000.00)		0.00	0.00	(7,500,000.00)
10/21/22	10/24/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 10/25/22 Cpn 912796YF0	(49,996,571.53)		0.00	0.00	(49,996,571.53)
10/21/22	10/24/22	Buy	7,500,000.000	BRIGHTHOUSE FINANCIAL CP 144A MAT 01/23/23 Cpn 10924JNP1	(7,414,497.92)		0.00	0.00	(7,414,497.92)
10/25/22	10/25/22	Buy	7,000,000.000	CENTURY HSG TXB CP MAT 11/22/22 Cpn 4.20 15654WAA4	(7,000,000.00)		0.00	0.00	(7,000,000.00)
10/25/22	10/26/22	Buy	7,500,000.000	CUMMINS INC CP 144A MAT 12/05/22 Cpn 23102VM56	(7,469,416.67)		0.00	0.00	(7,469,416.67)
10/21/22	10/27/22	Buy	35,000,000.000	U.S. TREASURY BILL MAT 01/26/23 Cpn 912796S34	(34,646,111.11)		0.00	0.00	(34,646,111.11)
10/21/22	10/27/22	Buy	25,000,000.000	U.S. TREASURY BILL MAT 01/26/23 Cpn 912796S34	(24,747,222.22)		0.00	0.00	(24,747,222.22)
10/27/22	10/27/22	Buy	7,500,000.000	ID HSG AGY CP TXB MAT 12/22/22 Cpn 3.95 45130HEW6	(7,500,000.00)		0.00	0.00	(7,500,000.00)
10/27/22	10/27/22	Buy	7,500,000.000	VA SENTARA HEALTHCARE CP TX MAT 11/30/22 Cpn 3.70 81727NKD2	(7,500,000.00)		0.00	0.00	(7,500,000.00)
10/27/22	10/27/22	Buy	3,500,000.000	TX A&M UNIV TXB CP MAT 01/26/23 Cpn 4.20 88211LEY5	(3,500,000.00)		0.00	0.00	(3,500,000.00)
			1,766,657,843.760		(1,762,447,703.87)	(1,658.44)	0.00	0.00	(1,762,449,362.31)

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10/03/22	10/03/22	Coupon		INTL FINANCE CORP FRN SOFRRA MAT 04/03/24 Cpn 3.12 45950VQM1		30,414.38	0.00	0.00	30,414.38
10/10/22	10/10/22	Coupon		CRVNA 2021-P2 A2 CAR MAT 07/10/24 Cpn 0.30 14687TAB3		110.57	0.00	0.00	110.57
10/10/22	10/10/22	Coupon		CRVNA 2021-P4 A2 CAR MAT 04/10/25 Cpn 0.82 14687KAB2		3,029.21	0.00	0.00	3,029.21
10/13/22	10/13/22	Coupon		INTL BANK RECON & DEVELOP FR MAT 01/13/23 Cpn 3.17 459058JQ7		10,589.02	0.00	0.00	10,589.02
10/13/22	10/13/22	Coupon		MMAF 2022-A A1 EQP 144A MAT 05/03/23 Cpn 1.48 55317RAA0		4,210.25	0.00	0.00	4,210.25
10/14/22	10/14/22	Coupon		CCG 2022-1 A1 EQP 144A MAT 06/14/23 Cpn 1.84 12511JAA3		938.90	0.00	0.00	938.90
10/15/22	10/15/22	Coupon		CARMX 2019-2 A3 CAR MAT 03/15/24 Cpn 2.68 14316LAC7		559.79	0.00	0.00	559.79
10/15/22	10/15/22	Coupon		CARMAX 2019-3 A3 CAR MAT 08/15/24 Cpn 2.18 14315PAD7		3,368.41	0.00	0.00	3,368.41
10/15/22	10/15/22	Coupon		CARMX 2021-4 A2A CAR MAT 11/15/24 Cpn 0.24 14317JAB3		351.06	0.00	0.00	351.06
10/15/22	10/15/22	Coupon		CNH 2021-C A2 EQP MAT 01/15/25 Cpn 0.33 12598LAB2		1,223.24	0.00	0.00	1,223.24
10/15/22	10/15/22	Coupon		HALST 2020-B A3 CAR LEASE 144A MAT 09/15/23 Cpn 0.51 44891PAC8		868.93	0.00	0.00	868.93
10/15/22	10/15/22	Coupon		HALST 2021-C A2 CAR LEASE 144A MAT 01/16/24 Cpn 0.24 44933MAB7		551.28	0.00	0.00	551.28
10/15/22	10/15/22	Coupon		HALST 2021-C A2 CAR LEASE 144A MAT 01/16/24 Cpn 0.24 44933MAB7		133.18	0.00	0.00	133.18

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10/15/22	10/15/22	Coupon		HONDA 2021-2 A2 CAR MAT 11/15/23 Cpn 0.17 43811JAB3		134.44	0.00	0.00	134.44
10/15/22	10/15/22	Coupon		HAROT 2022-1 A2 CAR MAT 10/15/24 Cpn 1.44 43815BAB6		6,000.00	0.00	0.00	6,000.00
10/15/22	10/15/22	Coupon		HYUNDAI 2021-A A2 CAR MAT 02/15/24 Cpn 0.23 44933LAB9		49.80	0.00	0.00	49.80
10/15/22	10/15/22	Coupon		KUBOTA 2020-1A A3 EQP 144A MAT 03/15/24 Cpn 1.96 50117WAC8		3,149.84	0.00	0.00	3,149.84
10/15/22	10/15/22	Coupon		KUBOTA 2020-1A A3 EQP 144A MAT 03/15/24 Cpn 1.96 50117WAC8		755.68	0.00	0.00	755.68
10/15/22	10/15/22	Coupon		MERCEDES 2021-B A2 LEASE MAT 01/16/24 Cpn 0.22 58769KAC8		444.81	0.00	0.00	444.81
10/15/22	10/15/22	Coupon		TOYOTA 2019-C A3 CAR MAT 09/15/23 Cpn 1.91 89238UAD2		322.28	0.00	0.00	322.28
10/15/22	10/15/22	Coupon		TOYOTA 2019-C A3 CAR MAT 09/15/23 Cpn 1.91 89238UAD2		32.32	0.00	0.00	32.32
10/15/22	10/15/22	Coupon		TAOT 2022-C A2A CAR MAT 08/15/25 Cpn 4.19 89231CAB3		18,156.67	0.00	0.00	18,156.67
10/15/22	10/15/22	Coupon		WORLD OMNI 2021-B A2 CAR MAT 07/15/24 Cpn 0.20 98163LAB6		150.50	0.00	0.00	150.50
10/15/22	10/15/22	Coupon		WOART 2022-B A2A CAR MAT 10/15/25 Cpn 2.77 98163QAB5		10,156.67	0.00	0.00	10,156.67
10/15/22	10/15/22	Coupon		WOLS 2022-A A2 LEASE MAT 10/15/24 Cpn 2.63 98163NAB2		3,458.23	0.00	0.00	3,458.23
10/16/22	10/16/22	Coupon		GMCAR 2021-A A2 CAR MAT 06/17/24 Cpn 0.27 380149AB0		122.24	0.00	0.00	122.24

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10/17/22	10/17/22	Coupon		ALLYA 2022-1 A1 CAR MAT 05/15/23 Cpn 1.36 02008JAA4		1,454.87	0.00	0.00	1,454.87
10/17/22	10/17/22	Coupon		ARIFL 2022-A A1 FLEET 144A MAT 04/17/23 Cpn 1.49 00217QAA9		1,715.27	0.00	0.00	1,715.27
10/17/22	10/17/22	Coupon		CARMX 2022-3 A1 CAR MAT 07/17/23 Cpn 2.66 14318MAA7		8,943.21	0.00	0.00	8,943.21
10/17/22	10/17/22	Coupon		COPAR 2022-2 A1 CAR MAT 08/15/23 Cpn 2.87 14043GAA2		11,089.79	0.00	0.00	11,089.79
10/17/22	10/17/22	Coupon		FORDO 2022-C A1 CAR MAT 10/15/23 Cpn 3.63 34535AAA8		21,071.40	0.00	0.00	21,071.40
10/17/22	10/17/22	Coupon		GMCAR 2022-2 A1 CAR MAT 04/17/23 Cpn 1.21 362585AA9		305.48	0.00	0.00	305.48
10/17/22	10/17/22	Coupon		KCOT 2022-2A A1 EQP 144A MAT 07/17/23 Cpn 2.60 50117JAA1		6,528.87	0.00	0.00	6,528.87
10/17/22	10/17/22	Coupon		NAROT 2022-B A1 CAR MAT 10/16/23 Cpn 3.69 65480JAA8		15,376.91	0.00	0.00	15,376.91
10/18/22	10/18/22	Coupon		HONDA 2021-3 A2 CAR MAT 02/20/24 Cpn 0.20 43815EAB0		211.48	0.00	0.00	211.48
10/20/22	10/20/22	Coupon		EFF 2022-1 A1 FLEET 144A MAT 04/20/23 Cpn 1.49 29375JAA2		820.69	0.00	0.00	820.69
10/20/22	10/20/22	Coupon		EFF 2022-2 A1 FLEET 144A MAT 06/20/23 Cpn 2.76 29374JAA3		9,678.89	0.00	0.00	9,678.89
10/20/22	10/20/22	Coupon		EFF 2022-3 A1 FLEET 144A MAT 08/20/23 Cpn 3.61 29374FAA1		17,271.07	0.00	0.00	17,271.07
10/20/22	10/20/22	Coupon		GMALT 2021-1 A3 LEASE MAT 02/20/24 Cpn 0.26 36261RAC2		1,646.71	0.00	0.00	1,646.71

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Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
10/20/22	10/20/22	Coupon		GMALT 2021-1 A3 LEASE MAT 02/20/24 Cpn 0.26 36261RAC2		55.82	0.00	0.00	55.82
10/20/22	10/20/22	Coupon		GMALT 2022-2 A1 LEASE MAT 05/22/23 Cpn 1.53 36266FAA7		583.59	0.00	0.00	583.59
10/20/22	10/20/22	Coupon		GMALT 2022-3 A1 LEASE MAT 08/21/23 Cpn 3.07 380130AA2		10,948.22	0.00	0.00	10,948.22
10/20/22	10/20/22	Coupon		HPEFS 2022-2A A1 EQP 144A MAT 05/22/23 Cpn 1.91 40441TAA7		3,171.50	0.00	0.00	3,171.50
10/20/22	10/20/22	Coupon		SRT 2021-C A2 LEASE 144A MAT 04/22/24 Cpn 0.29 80286CAB6		305.04	0.00	0.00	305.04
10/20/22	10/20/22	Coupon		SUMITOMO MITSUI BANKING YCD MAT 03/20/23 Cpn 3.44 86565FTC6		16,070.83	0.00	0.00	16,070.83
10/20/22	10/20/22	Coupon		TESLA 2021-B A2 LEASE 144A MAT 09/22/25 Cpn 0.36 88161KAB1		685.73	0.00	0.00	685.73
10/20/22	10/20/22	Coupon		TLOT 2021-B A3 LEASE 144A MAT 10/21/24 Cpn 0.42 89239CAC3		875.00	0.00	0.00	875.00
10/20/22	10/20/22	Coupon		VALET 2021-1 A2 CAR MAT 10/21/24 Cpn 0.49 92868KAB9		1,736.29	0.00	0.00	1,736.29
10/20/22	10/20/22	Coupon		VWALT 2022-A A1 LEASE MAT 06/20/23 Cpn 1.72 92868AAA3		1,727.69	0.00	0.00	1,727.69
10/20/22	10/20/22	Coupon		VERIZON 2019-B 1A1 PHONE MAT 12/20/23 Cpn 2.33 92349GAA9		33.30	0.00	0.00	33.30
10/20/22	10/20/22	Coupon		VERIZON 2019-B 1A1 PHONE MAT 12/20/23 Cpn 2.33 92349GAA9		8.36	0.00	0.00	8.36
10/20/22	10/20/22	Coupon		VERIZON 2019-B 1A1 PHONE MAT 12/20/23 Cpn 2.33 92349GAA9		84.46	0.00	0.00	84.46

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Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
10/20/22	10/20/22	Coupon		VERIZON 2019-C A1A PHONE MAT 04/22/24 Cpn 1.94 92348AAA3		1,367.83	0.00	0.00	1,367.83
10/20/22	10/20/22	Coupon		VERIZON 2019-C A1A PHONE MAT 04/22/24 Cpn 1.94 92348AAA3		670.24	0.00	0.00	670.24
10/24/22	10/24/22	Coupon		DEFT 2022-2 A1 EQP 144A MAT 07/24/23 Cpn 3.06 24702CAA2		10,117.30	0.00	0.00	10,117.30
10/25/22	10/25/22	Coupon		BMW 2021-2 A2 LEASE MAT 11/27/23 Cpn 0.19 09690AAB9		199.81	0.00	0.00	199.81
10/25/22	10/25/22	Coupon		BMW 2019-A A3 CAR MAT 01/25/24 Cpn 1.92 05588CAC6		195.62	0.00	0.00	195.62
10/25/22	10/25/22	Coupon		BMWOT 2022-A A1 CAR MAT 05/25/23 Cpn 1.35 05602RAA9		1,475.88	0.00	0.00	1,475.88
10/25/22	10/25/22	Coupon		CITIBANK CD FRN SOFRRATE MAT 05/25/23 Cpn 3.48 17330QAG2		20,066.67	0.00	0.00	20,066.67
10/25/22	10/25/22	Coupon		FHMS KF36 A MAT 08/25/24 Cpn 3.48 3137FBAR7		3,719.37	0.00	0.00	3,719.37
10/25/22	10/25/22	Coupon		FHMS KF38 A MAT 09/25/24 Cpn 3.47 3137FBUC8		883.34	0.00	0.00	883.34
10/25/22	10/25/22	Coupon		FHMS KI04 A 1MOFRN CMBS MAT 07/25/24 Cpn 3.50 3137FNAV2		207.73	0.00	0.00	207.73
10/25/22	10/25/22	Coupon		FHMS KI05 A MAT 07/25/24 Cpn 2.89 3137FQXG3		1,202.18	0.00	0.00	1,202.18
10/25/22	10/25/22	Coupon		FHMS KI06 A 1MOFRN CMBS MAT 03/25/25 Cpn 3.36 3137FVNA6		1,259.26	0.00	0.00	1,259.26
10/25/22	10/25/22	Coupon		FHMS KI07 A SOFRFRN MAT 09/25/26 Cpn 2.64 3137H3KA9		14,214.89	0.00	0.00	14,214.89

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Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
10/25/22	10/25/22	Coupon		FHMS KI08 A 1MOFRN CMBS MAT 10/25/26 Cpn 2.67 3137H4RC6		7,258.33	0.00	0.00	7,258.33
10/01/22	10/25/22	Coupon		FHMS KS01 A2 CMBS MAT 01/25/23 Cpn 2.52 3137B1U75		3,100.03	0.00	0.00	3,100.03
10/25/22	10/25/22	Coupon		FHMS Q015 A 1MOFRN CMBS MAT 08/25/24 Cpn 2.81 3137FYUR5		3,035.91	0.00	0.00	3,035.91
10/27/22	10/27/22	Coupon		BANK OF NOVA SCOTIA FRN YCD MAT 10/27/22 Cpn 06417MVM4		34,672.22	0.00	0.00	34,672.22
						335,328.78	0.00	0.00	335,328.78
10/01/22	10/01/22	Income	19,694.950	ADJ NET INT MAT Cpn USD		19,694.95	0.00	0.00	19,694.95
10/01/22	10/01/22	Income	196,062.680	STIF INT MAT Cpn USD		196,062.68	0.00	0.00	196,062.68
			215,757.630			215,757.63	0.00	0.00	215,757.63
10/07/22	10/07/22	Contributn	100,000,000.000	NM MAT Cpn USD	100,000,000.00		0.00	0.00	100,000,000.00
10/18/22	10/18/22	Contributn	660,000,000.000	NM MAT Cpn USD	660,000,000.00		0.00	0.00	660,000,000.00
			760,000,000.000		760,000,000.00		0.00	0.00	760,000,000.00

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Tr Date	St Date	Transaction Type	Units	Description		Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
10/03/22	10/03/22	Sell Long	10,000,000.000	U.S. TREASURY BILL MAT 10/04/22 Cpn	912796YC7	9,988,677.50	10,572.50	(162.64)	0.00	9,999,250.00
10/03/22	10/03/22	Sell Long	7,000,000.000	U.S. TREASURY BILL MAT 10/04/22 Cpn	912796YC7	6,992,074.25	7,400.75	(113.85)	0.00	6,999,475.00
10/03/22	10/03/22	Sell Long	43,000,000.000	U.S. TREASURY BILL MAT 10/04/22 Cpn	912796YC7	42,951,313.25	45,461.75	(699.34)	0.00	42,996,775.00
10/03/22	10/03/22	Sell Long	7,000,000.000	U.S. TREASURY BILL MAT 10/04/22 Cpn	912796YC7	6,993,595.00	5,880.00	(105.00)	0.00	6,999,475.00
10/14/22	10/17/22	Sell Long	4,000,000.000	U.S. TREASURY BILL MAT 10/18/22 Cpn	912796YE3	3,991,827.55	7,872.67	(18.61)	0.00	3,999,700.22
10/14/22	10/17/22	Sell Long	26,000,000.000	U.S. TREASURY BILL MAT 10/18/22 Cpn	912796YE3	25,946,879.12	51,172.33	(120.97)	0.00	25,998,051.45
10/14/22	10/17/22	Sell Long	24,000,000.000	U.S. TREASURY BILL MAT 10/18/22 Cpn	912796YE3	23,950,965.33	47,236.00	(111.67)	0.00	23,998,201.33
10/14/22	10/17/22	Sell Long	26,000,000.000	U.S. TREASURY BILL MAT 10/18/22 Cpn	912796YE3	25,946,879.12	51,172.33	(120.97)	0.00	25,998,051.45
10/14/22	10/17/22	Sell Long	11,000,000.000	U.S. TREASURY BILL MAT 10/18/22 Cpn	912796YE3	10,989,993.06	9,182.55	10.39	0.00	10,999,175.61
10/14/22	10/17/22	Sell Long	13,000,000.000	U.S. TREASURY BILL MAT 10/18/22 Cpn	912796YE3	12,992,956.89	6,068.83	37.19	0.00	12,999,025.72
10/17/22	10/18/22	Sell Long	18,000,000.000	U.S. TREASURY BILL MAT 10/20/22 Cpn	912796V63	17,961,572.00	35,815.00	(143.00)	0.00	17,997,387.00
10/17/22	10/18/22	Sell Long	2,000,000.000	U.S. TREASURY BILL MAT 10/20/22 Cpn	912796V63	1,998,639.84	1,069.83	15.34	0.00	1,999,709.67
10/17/22	10/18/22	Sell Long	30,000,000.000	U.S. TREASURY BILL MAT 10/20/22 Cpn	912796V63	29,979,597.50	16,047.50	230.00	0.00	29,995,645.00

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10/17/22	10/18/22	Sell Long	20,000,000.000	U.S. TREASURY BILL MAT 10/20/22 Cpn 912796V63	19,987,896.67	9,200.00	163.34	0.00	19,997,096.67
10/21/22	10/24/22	Sell Long	25,000,000.000	FHLB DISCOUNT NOTE MAT 11/28/22 Cpn 313385R24	24,907,083.34	9,305.56	(2,187.50)	0.00	24,916,388.89
10/21/22	10/27/22	Sell Long	35,000,000.000	U.S. TREASURY BILL MAT 12/01/22 Cpn 912796P94	34,862,486.94	22,499.17	(2,518.06)	0.00	34,884,986.11
			301,000,000.000		300,442,437.35	335,956.77	(5,845.34)	0.00	300,778,394.12
10/10/22	10/10/22	Pay Princpl	435,754.566	CRVNA 2021-P2 A2 CAR MAT 07/10/24 Cpn 0.30 14687TAB3	435,754.57		0.00	26.54	435,754.57
10/10/22	10/10/22	Pay Princpl	539,498.337	CRVNA 2021-P4 A2 CAR MAT 04/10/25 Cpn 0.82 14687KAB2	539,498.34		31.14	0.00	539,498.34
10/13/22	10/13/22	Pay Princpl	622,639.693	MMAF 2022-A A1 EQP 144A MAT 05/03/23 Cpn 1.48 55317RAA0	622,639.69		(0.00)	0.00	622,639.69
10/14/22	10/14/22	Pay Princpl	125,608.311	CCG 2022-1 A1 EQP 144A MAT 06/14/23 Cpn 1.84 12511JAA3	125,608.31		(0.00)	0.00	125,608.31
10/15/22	10/15/22	Pay Princpl	107,338.966	CARMX 2019-2 A3 CAR MAT 03/15/24 Cpn 2.68 14316LAC7	107,338.97		0.00	(348.38)	107,338.97
10/15/22	10/15/22	Pay Princpl	265,163.717	CARMAX 2019-3 A3 CAR MAT 08/15/24 Cpn 2.18 14315PAD7	265,163.72		0.00	(1,332.52)	265,163.72
10/15/22	10/15/22	Pay Princpl	249,929.794	CARMX 2021-4 A2A CAR MAT 11/15/24 Cpn 0.24 14317JAB3	249,929.79		0.00	1.20	249,929.79
10/15/22	10/15/22	Pay Princpl	551,105.209	CNH 2021-C A2 EQP MAT 01/15/25 Cpn 0.33 12598LAB2	551,105.21		20.76	0.00	551,105.21
10/15/22	10/15/22	Pay Princpl	686,412.538	HALST 2020-B A3 CAR LEASE 144A MAT 09/15/23 Cpn 0.51 44891PAC8	686,412.54		(20.59)	0.00	686,412.54

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10/15/22	10/15/22	Pay Princpl	364,451.268	HALST 2021-C A2 CAR LEASE 144A MAT 01/16/24 Cpn 0.24 44933MAB7	364,451.27		0.00	4.89	364,451.27
10/15/22	10/15/22	Pay Princpl	88,045.653	HALST 2021-C A2 CAR LEASE 144A MAT 01/16/24 Cpn 0.24 44933MAB7	88,045.65		503.91	0.00	88,045.65
10/15/22	10/15/22	Pay Princpl	407,296.697	HONDA 2021-2 A2 CAR MAT 11/15/23 Cpn 0.17 43811JAB3	407,296.70		0.00	0.74	407,296.70
10/15/22	10/15/22	Pay Princpl	98,111.841	HAROT 2022-1 A2 CAR MAT 10/15/24 Cpn 1.44 43815BAB6	98,111.84		5.42	0.00	98,111.84
10/15/22	10/15/22	Pay Princpl	141,160.091	HYUNDAI 2021-A A2 CAR MAT 02/15/24 Cpn 0.23 44933LAB9	141,160.09		0.00	2.59	141,160.09
10/15/22	10/15/22	Pay Princpl	249,516.303	KUBOTA 2020-1A A3 EQP 144A MAT 03/15/24 Cpn 1.96 50117WAC8	249,516.30		0.00	(2,269.10)	249,516.30
10/15/22	10/15/22	Pay Princpl	59,861.535	KUBOTA 2020-1A A3 EQP 144A MAT 03/15/24 Cpn 1.96 50117WAC8	59,861.54		0.00	(503.72)	59,861.54
10/15/22	10/15/22	Pay Princpl	496,001.844	MERCEDES 2021-B A2 LEASE MAT 01/16/24 Cpn 0.22 58769KAC8	496,001.84		0.00	11.55	496,001.84
10/15/22	10/15/22	Pay Princpl	159,631.008	TOYOTA 2019-C A3 CAR MAT 09/15/23 Cpn 1.91 89238UAD2	159,631.01		0.00	0.00	159,631.01
10/15/22	10/15/22	Pay Princpl	16,006.756	TOYOTA 2019-C A3 CAR MAT 09/15/23 Cpn 1.91 89238UAD2	16,006.76		0.00	0.00	16,006.76
10/15/22	10/15/22	Pay Princpl	275,379.008	WORLD OMNI 2021-B A2 CAR MAT 07/15/24 Cpn 0.20 98163LAB6	275,379.01		0.00	2.59	275,379.01
10/15/22	10/15/22	Pay Princpl	100,763.149	WOLS 2022-A A2 LEASE MAT 10/15/24 Cpn 2.63 98163NAB2	100,763.15		2.03	0.00	100,763.15
10/16/22	10/16/22	Pay Princpl	255,775.680	GMCAR 2021-A A2 CAR MAT 06/17/24 Cpn 0.27 380149AB0	255,775.68		0.00	3.41	255,775.68

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Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
10/17/22	10/17/22	Pay Princpl	849,995.680	ALLYA 2022-1 A1 CAR MAT 05/15/23 Cpn 1.36 02008JAA4	849,995.68		0.00	0.00	849,995.68
10/17/22	10/17/22	Pay Princpl	343,683.656	ARIFL 2022-A A1 FLEET 144A MAT 04/17/23 Cpn 1.49 00217QAA9	343,683.66		0.00	0.00	343,683.66
10/17/22	10/17/22	Pay Princpl	1,063,860.323	CARMX 2022-3 A1 CAR MAT 07/17/23 Cpn 2.66 14318MAA7	1,063,860.32		(0.00)	0.00	1,063,860.32
10/17/22	10/17/22	Pay Princpl	1,045,656.211	COPAR 2022-2 A1 CAR MAT 08/15/23 Cpn 2.87 14043GAA2	1,045,656.21		(0.00)	0.00	1,045,656.21
10/17/22	10/17/22	Pay Princpl	1,672,377.460	FORDO 2022-C A1 CAR MAT 10/15/23 Cpn 3.63 34535AAA8	1,672,377.46		(0.00)	0.00	1,672,377.46
10/17/22	10/17/22	Pay Princpl	293,424.267	GMCAR 2022-2 A1 CAR MAT 04/17/23 Cpn 1.21 362585AA9	293,424.27		0.00	0.00	293,424.27
10/17/22	10/17/22	Pay Princpl	476,657.070	KCOT 2022-2A A1 EQP 144A MAT 07/17/23 Cpn 2.60 50117JAA1	476,657.07		0.00	0.00	476,657.07
10/17/22	10/17/22	Pay Princpl	1,125,480.563	NAROT 2022-B A1 CAR MAT 10/16/23 Cpn 3.69 65480JAA8	1,125,480.56		(0.00)	0.00	1,125,480.56
10/18/22	10/18/22	Pay Princpl	221,714.015	HONDA 2021-3 A2 CAR MAT 02/20/24 Cpn 0.20 43815EAB0	221,714.02		0.00	8.11	221,714.02
10/20/22	10/20/22	Pay Princpl	253,221.497	EFF 2022-1 A1 FLEET 144A MAT 04/20/23 Cpn 1.49 29375JAA2	253,221.50		0.00	0.00	253,221.50
10/20/22	10/20/22	Pay Princpl	749,731.005	EFF 2022-2 A1 FLEET 144A MAT 06/20/23 Cpn 2.76 29374JAA3	749,731.01		0.00	0.00	749,731.01
10/20/22	10/20/22	Pay Princpl	618,522.979	EFF 2022-3 A1 FLEET 144A MAT 08/20/23 Cpn 3.61 29374FAA1	618,522.98		0.00	0.00	618,522.98
10/20/22	10/20/22	Pay Princpl	1,193,009.517	GMALT 2021-1 A3 LEASE MAT 02/20/24 Cpn 0.26 36261RAC2	1,193,009.52		9,744.77	0.00	1,193,009.52

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10/20/22	10/20/22	Pay Princpl	40,441.001	GMALT 2021-1 A3 LEASE MAT 02/20/24 Cpn 0.26 36261RAC2	40,441.00		330.33	0.00	40,441.00
10/20/22	10/20/22	Pay Princpl	458,619.532	GMALT 2022-2 A1 LEASE MAT 05/22/23 Cpn 1.53 36266FAA7	458,619.53		(0.00)	0.00	458,619.53
10/20/22	10/20/22	Pay Princpl	1,298,916.784	GMALT 2022-3 A1 LEASE MAT 08/21/23 Cpn 3.07 380130AA2	1,298,916.78		(0.00)	0.00	1,298,916.78
10/20/22	10/20/22	Pay Princpl	372,607.254	HPEFS 2022-2A A1 EQP 144A MAT 05/22/23 Cpn 1.91 40441TAA7	372,607.25		(0.00)	0.00	372,607.25
10/20/22	10/20/22	Pay Princpl	356,839.166	SRT 2021-C A2 LEASE 144A MAT 04/22/24 Cpn 0.29 80286CAB6	356,839.17		0.00	7.36	356,839.17
10/20/22	10/20/22	Pay Princpl	144,259.641	TESLA 2021-B A2 LEASE 144A MAT 09/22/25 Cpn 0.36 88161KAB1	144,259.64		0.00	7.85	144,259.64
10/20/22	10/20/22	Pay Princpl	535,440.383	VALET 2021-1 A2 CAR MAT 10/21/24 Cpn 0.49 92868KAB9	535,440.38		21.83	0.00	535,440.38
10/20/22	10/20/22	Pay Princpl	765,109.477	VWALT 2022-A A1 LEASE MAT 06/20/23 Cpn 1.72 92868AAA3	765,109.48		0.00	0.00	765,109.48
10/20/22	10/20/22	Pay Princpl	17,149.815	VERIZON 2019-B 1A1 PHONE MAT 12/20/23 Cpn 2.33 92349GAA9	17,149.82		0.00	0.00	17,149.82
10/20/22	10/20/22	Pay Princpl	4,304.954	VERIZON 2019-B 1A1 PHONE MAT 12/20/23 Cpn 2.33 92349GAA9	4,304.95		0.00	(0.00)	4,304.95
10/20/22	10/20/22	Pay Princpl	43,497.525	VERIZON 2019-B 1A1 PHONE MAT 12/20/23 Cpn 2.33 92349GAA9	43,497.53		0.01	0.00	43,497.53
10/20/22	10/20/22	Pay Princpl	246,920.900	VERIZON 2019-C A1A PHONE MAT 04/22/24 Cpn 1.94 92348AAA3	246,920.90		0.00	(227.03)	246,920.90
10/20/22	10/20/22	Pay Princpl	120,991.241	VERIZON 2019-C A1A PHONE MAT 04/22/24 Cpn 1.94 92348AAA3	120,991.24		0.00	(107.56)	120,991.24

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10/24/22	10/24/22	Pay Princpl	452,229.533	DEFT 2022-2 A1 EQP 144A MAT 07/24/23 Cpn 3.06 24702CAA2	452,229.53		(0.00)	0.00	452,229.53
10/25/22	10/25/22	Pay Princpl	492,275.913	BMW 2021-2 A2 LEASE MAT 11/27/23 Cpn 0.19 09690AAB9	492,275.91		0.00	9.33	492,275.91
10/25/22	10/25/22	Pay Princpl	72,861.821	BMW 2019-A A3 CAR MAT 01/25/24 Cpn 1.92 05588CAC6	72,861.82		0.00	(85.80)	72,861.82
10/25/22	10/25/22	Pay Princpl	986,299.700	BMWOT 2022-A A1 CAR MAT 05/25/23 Cpn 1.35 05602RAA9	986,299.70		(0.00)	0.00	986,299.70
10/25/22	10/25/22	Pay Princpl	727.671	FHMS KF36 A MAT 08/25/24 Cpn 3.48 3137FBAR7	727.67		0.00	0.23	727.67
10/25/22	10/25/22	Pay Princpl	268.877	FHMS KF38 A MAT 09/25/24 Cpn 3.47 3137FBUC8	268.88		0.00	0.15	268.88
10/25/22	10/25/22	Pay Princpl	498,581.458	FHMS KI05 A MAT 07/25/24 Cpn 2.89 3137FQXG3	498,581.46		0.00	0.00	498,581.46
10/01/22	10/25/22	Pay Princpl	863,129.141	FHMS KS01 A2 CMBS MAT 01/25/23 Cpn 2.52 3137B1U75	863,129.14		0.00	(3,734.13)	863,129.14
			23,974,257.990		23,974,258.02		10,639.59	(8,521.69)	23,974,258.02
10/04/22	10/04/22	Mature Long	13,000,000.000	U.S. TREASURY BILL MAT 10/04/22 Cpn 912796YC7	12,988,300.00	11,700.00	0.00	0.00	13,000,000.00
10/06/22	10/06/22	Mature Long	10,000,000.000	U.S. TREASURY BILL MAT 10/06/22 Cpn 912796M89	9,987,750.00	12,250.00	0.00	0.00	10,000,000.00
10/06/22	10/06/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/06/22 Cpn 912796M89	49,938,750.00	61,250.00	0.00	0.00	50,000,000.00
10/06/22	10/06/22	Mature Long	20,000,000.000	U.S. TREASURY BILL MAT 10/06/22 Cpn 912796M89	19,980,516.11	19,483.89	0.00	0.00	20,000,000.00

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Tr Date	St Date	Transaction Type	Units	Description		Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
10/06/22	10/06/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/06/22 Cpn	912796M89	49,951,290.28	48,709.72	0.00	0.00	50,000,000.00
10/06/22	10/06/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/06/22 Cpn	912796M89	49,951,290.28	48,709.72	0.00	0.00	50,000,000.00
10/06/22	10/06/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/06/22 Cpn	912796M89	49,951,290.28	48,709.72	0.00	0.00	50,000,000.00
10/06/22	10/06/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/06/22 Cpn	912796M89	49,951,290.28	48,709.72	0.00	0.00	50,000,000.00
10/06/22	10/06/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/06/22 Cpn	912796M89	49,951,290.28	48,709.72	0.00	0.00	50,000,000.00
10/06/22	10/06/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/06/22 Cpn	912796M89	49,951,290.28	48,709.72	0.00	0.00	50,000,000.00
10/11/22	10/11/22	Mature Long	20,000,000.000	U.S. TREASURY BILL MAT 10/11/22 Cpn	912796YD5	19,893,891.67	106,108.33	0.00	0.00	20,000,000.00
10/11/22	10/11/22	Mature Long	20,000,000.000	U.S. TREASURY BILL MAT 10/11/22 Cpn	912796YD5	19,956,168.67	43,831.33	0.00	0.00	20,000,000.00
10/11/22	10/11/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/11/22 Cpn	912796YD5	49,932,533.33	67,466.67	0.00	0.00	50,000,000.00
10/11/22	10/11/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/11/22 Cpn	912796YD5	49,932,533.33	67,466.67	0.00	0.00	50,000,000.00
10/11/22	10/11/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/11/22 Cpn	912796YD5	49,932,533.33	67,466.67	0.00	0.00	50,000,000.00
10/11/22	10/11/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/11/22 Cpn	912796YD5	49,932,533.33	67,466.67	0.00	0.00	50,000,000.00
10/11/22	10/11/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/11/22 Cpn	912796YD5	49,932,533.33	67,466.67	0.00	0.00	50,000,000.00

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Tr Date	St Date	Transaction Type	Units	Description		Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
10/11/22	10/11/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/11/22 Cpn	912796YD5	49,932,533.33	67,466.67	0.00	0.00	50,000,000.00
10/11/22	10/11/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/11/22 Cpn	912796YD5	49,932,533.33	67,466.67	0.00	0.00	50,000,000.00
10/11/22	10/11/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/11/22 Cpn	912796YD5	49,932,533.33	67,466.67	0.00	0.00	50,000,000.00
10/12/22	10/12/22	Mature Long	40,000,000.000	FHLB DISCOUNT NOTE MAT 10/12/22 Cpn	313385K39	39,981,000.00	19,000.00	0.00	0.00	40,000,000.00
10/12/22	10/12/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 10/12/22 Cpn	313385K39	49,976,250.00	23,750.00	0.00	0.00	50,000,000.00
10/12/22	10/12/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 10/12/22 Cpn	313385K39	49,976,250.00	23,750.00	0.00	0.00	50,000,000.00
10/12/22	10/12/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 10/12/22 Cpn	313385K39	49,976,250.00	23,750.00	0.00	0.00	50,000,000.00
10/12/22	10/12/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 10/12/22 Cpn	313385K39	49,976,250.00	23,750.00	0.00	0.00	50,000,000.00
10/12/22	10/12/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 10/12/22 Cpn	313385K39	49,976,250.00	23,750.00	0.00	0.00	50,000,000.00
10/12/22	10/12/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 10/12/22 Cpn	313385K39	49,976,250.00	23,750.00	0.00	0.00	50,000,000.00
10/13/22	10/13/22	Mature Long	49,500,000.000	U.S. TREASURY BILL MAT 10/13/22 Cpn	912796V55	49,427,037.00	72,963.00	0.00	0.00	49,500,000.00
10/13/22	10/13/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/13/22 Cpn	912796V55	49,926,300.00	73,700.00	0.00	0.00	50,000,000.00
10/14/22	10/14/22	Mature Long	27,000,000.000	FHLB DISCOUNT NOTE MAT 10/14/22 Cpn	313385K54	26,951,250.00	48,750.00	0.00	0.00	27,000,000.00

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10/14/22	10/14/22	Mature Long	3,500,000.000	FHLB DISCOUNT NOTE MAT 10/14/22 Cpn 313385K54	3,493,364.58	6,635.42	0.00	0.00	3,500,000.00
10/17/22	10/17/22	Mature Long	19,000,000.000	FHLMC DISCOUNT NOTE MAT 10/17/22 Cpn 313397K83	18,995,804.17	4,195.83	0.00	0.00	19,000,000.00
10/17/22	10/17/22	Mature Long	7,500,000.000	MIZUNY BANK LTD CP 144A MAT 10/17/22 Cpn 60689GKH8	7,449,381.25	50,618.75	0.00	0.00	7,500,000.00
10/18/22	10/18/22	Mature Long	19,000,000.000	U.S. TREASURY BILL MAT 10/18/22 Cpn 912796YE3	18,989,651.86	10,348.14	(0.00)	0.00	19,000,000.00
10/18/22	10/18/22	Mature Long	7,000,000.000	U.S. TREASURY BILL MAT 10/18/22 Cpn 912796YE3	6,996,775.33	3,224.67	0.00	0.00	7,000,000.00
10/18/22	10/18/22	Mature Long	21,000,000.000	FHLB DISCOUNT NOTE MAT 10/18/22 Cpn 313385K96	20,998,279.17	1,720.83	0.00	0.00	21,000,000.00
10/18/22	10/18/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 10/18/22 Cpn 313385K96	49,995,902.78	4,097.22	0.00	0.00	50,000,000.00
10/21/22	10/21/22	Mature Long	25,000,000.000	FAMC DISCOUNT NOTE MAT 10/21/22 Cpn 31315LL48	24,995,916.67	4,083.33	0.00	0.00	25,000,000.00
10/21/22	10/21/22	Mature Long	50,000,000.000	FAMC DISCOUNT NOTE MAT 10/21/22 Cpn 31315LL48	49,991,833.33	8,166.67	0.00	0.00	50,000,000.00
10/21/22	10/21/22	Mature Long	25,000,000.000	FHLB DISCOUNT NOTE MAT 10/21/22 Cpn 313385L46	24,996,036.11	3,963.89	0.00	0.00	25,000,000.00
10/24/22	10/24/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 10/24/22 Cpn 313385L79	49,987,916.67	12,083.33	0.00	0.00	50,000,000.00
10/24/22	10/24/22	Mature Long	7,500,000.000	MACQUARIE BANK CP 144A MAT 10/24/22 Cpn 55607LKQ6	7,447,500.00	52,500.00	0.00	0.00	7,500,000.00
10/25/22	10/25/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/25/22 Cpn 912796YF0	49,950,482.64	49,517.36	0.00	0.00	50,000,000.00

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10/25/22	10/25/22	Mature Long	40,000,000.000	U.S. TREASURY BILL MAT 10/25/22 Cpn 912796YF0	39,982,600.00	17,400.00	0.00	0.00	40,000,000.00
10/25/22	10/25/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/25/22 Cpn 912796YF0	49,978,250.00	21,750.00	0.00	0.00	50,000,000.00
10/25/22	10/25/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/25/22 Cpn 912796YF0	49,978,250.00	21,750.00	0.00	0.00	50,000,000.00
10/25/22	10/25/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/25/22 Cpn 912796YF0	49,996,571.53	3,428.47	0.00	0.00	50,000,000.00
10/26/22	10/26/22	Mature Long	7,500,000.000	NATL SEC CLEARING CP 144A MAT 10/26/22 Cpn 63763QKS5	7,454,843.75	45,156.25	0.00	0.00	7,500,000.00
10/27/22	10/27/22	Mature Long	36,000,000.000	U.S. TREASURY BILL MAT 10/27/22 Cpn 912796V71	35,955,520.00	44,480.00	0.00	0.00	36,000,000.00
10/27/22	10/27/22	Mature Long	14,000,000.000	U.S. TREASURY BILL MAT 10/27/22 Cpn 912796V71	13,983,873.75	16,126.25	0.00	0.00	14,000,000.00
10/27/22	10/27/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 10/27/22 Cpn 912796V71	49,975,252.08	24,747.92	0.00	0.00	50,000,000.00
10/27/22	10/27/22	Mature Long	5,000,000.000	BANK OF NOVA SCOTIA FRN YCD MAT 10/27/22 Cpn 06417MVM4	5,000,000.00		0.00	0.00	5,000,000.00
			1,936,500,000.000		1,934,650,477.44	1,849,522.56	(0.00)	0.00	1,936,500,000.00
10/01/22	10/01/22	Withdrawal	(3,119.730)	CUSTODY FEE MAT Cpn USD	(3,119.73)		(3,119.73)	0.00	(3,119.73)
10/03/22	10/03/22	Withdrawal	(60,000,000.000)	WD MAT Cpn USD	(60,000,000.00)		(60,000,000.00)	0.00	(60,000,000.00)
10/06/22	10/06/22	Withdrawal	(40,000,000.000)	WD MAT Cpn USD	(40,000,000.00)		(40,000,000.00)	0.00	(40,000,000.00)

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10/11/22	10/11/22	Withdrawal	(380,000,000.000)	WD MAT	Cpn	USD	(380,000,000.00)		(380,000,000.00)	0.00	(380,000,000.00)
10/12/22	10/12/22	Withdrawal	(230,000,000.000)	WD MAT	Cpn	USD	(230,000,000.00)		(230,000,000.00)	0.00	(230,000,000.00)
10/14/22	10/14/22	Withdrawal	(70,000,000.000)	WD MAT	Cpn	USD	(70,000,000.00)		(70,000,000.00)	0.00	(70,000,000.00)
10/17/22	10/17/22	Withdrawal	(60,000,000.000)	WD MAT	Cpn	USD	(60,000,000.00)		(60,000,000.00)	0.00	(60,000,000.00)
10/19/22	10/19/22	Withdrawal	(60,000,000.000)	WD MAT	Cpn	USD	(60,000,000.00)		(60,000,000.00)	0.00	(60,000,000.00)
10/24/22	10/24/22	Withdrawal	(50,000,000.000)	WD MAT	Cpn	USD	(50,000,000.00)		(50,000,000.00)	0.00	(50,000,000.00)
10/25/22	10/25/22	Withdrawal	(240,000,000.000)	WD MAT	Cpn	USD	(240,000,000.00)		(240,000,000.00)	0.00	(240,000,000.00)
10/26/22	10/26/22	Withdrawal	(50,000,000.000)	WD MAT	Cpn	USD	(50,000,000.00)		(50,000,000.00)	0.00	(50,000,000.00)
10/31/22	10/31/22	Withdrawal	(30,000,000.000)	WD MAT	Cpn	USD	(30,000,000.00)		(30,000,000.00)	0.00	(30,000,000.00)
			(1,270,003,119.730)				(1,270,003,119.73)		(1,270,003,119.73)	0.00	(1,270,003,119.73)

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10/07/22	10/13/22	Buy	440,000.000	CA ST EARTHQUAKE AUTH TXB MAT 07/01/23 Cpn 5.39 13017HAM8	(440,000.00)		0.00	0.00	(440,000.00)
10/27/22	10/28/22	Buy	920,000.000	FHLB MAT 10/03/24 Cpn 4.50 3130ATT31	(918,997.20)		0.00	0.00	(918,997.20)
10/27/22	10/28/22	Buy	190,000.000	FHLB MAT 10/03/24 Cpn 4.50 3130ATT31	(189,792.90)		0.00	0.00	(189,792.90)
10/27/22	10/28/22	Buy	160,000.000	FHLB MAT 10/03/24 Cpn 4.50 3130ATT31	(159,825.60)		0.00	0.00	(159,825.60)
10/27/22	10/28/22	Buy	50,000.000	FHLB MAT 10/03/24 Cpn 4.50 3130ATT31	(49,945.50)		0.00	0.00	(49,945.50)
10/20/22	11/01/22	Buy	460,000.000	FHLB C 12/01/2022 M MAT 11/01/24 Cpn 5.40 3130ATRH2	(460,000.00)		0.00	0.00	(460,000.00)
			2,220,000.000		(2,218,561.20)		0.00	0.00	(2,218,561.20)
10/01/22	10/01/22	Coupon		CA BAY AREA TOLL AUTH TOLL BR MAT 04/01/24 Cpn 2.25 072024WP3		13,749.40	0.00	0.00	13,749.40
10/01/22	10/01/22	Coupon		CA LOS ALTOS SCH DIST GO BANS MAT 10/01/24 Cpn 1.00 544290JH3		4,000.00	0.00	0.00	4,000.00
10/01/22	10/01/22	Coupon		CA MANTECA REDEV AGY TAB TX MAT 10/01/23 Cpn 1.74 56453RAX2		4,345.00	0.00	0.00	4,345.00
10/01/22	10/01/22	Coupon		CA SAN MARCOS REDEV AGY TAB MAT 10/01/22 Cpn 2.25 79876CBS6		5,793.75	0.00	0.00	5,793.75
10/01/22	10/01/22	Coupon		CA STOCKTON PFA WTR REV-GRE MAT 10/01/24 Cpn 2.37 861398CH6		3,561.00	0.00	0.00	3,561.00
10/03/22	10/03/22	Coupon		INTL FINANCE CORP FRN SOFRRA MAT 04/03/24 Cpn 3.12 45950VQM1		3,771.38	0.00	0.00	3,771.38

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10/15/22	10/15/22	Coupon		CARMX 2020-1 A3 CAR MAT 12/16/24 Cpn 1.89 14315XAC2		357.76	0.00	0.00	357.76
10/15/22	10/15/22	Coupon		CARMX 2021-2 A3 AUTO MAT 02/17/26 Cpn 0.52 14314QAC8		411.67	0.00	0.00	411.67
10/15/22	10/15/22	Coupon		CARMX 2021-3 A3 CAR MAT 06/15/26 Cpn 0.55 14317DAC4		435.42	0.00	0.00	435.42
10/15/22	10/15/22	Coupon		CAPITAL ONE 2020-1 A3 CAR MAT 11/15/24 Cpn 1.60 14043MAC5		240.15	0.00	0.00	240.15
10/15/22	10/15/22	Coupon		FORDL 2021-B A3 LEASE MAT 10/15/24 Cpn 0.37 345329AC0		277.50	0.00	0.00	277.50
10/15/22	10/15/22	Coupon		HONDA 2019-3 A3 CAR MAT 08/15/23 Cpn 1.78 43815NAC8		42.32	0.00	0.00	42.32
10/15/22	10/15/22	Coupon		JOHN DEERE 2020-A A3 EQP MAT 08/15/24 Cpn 1.10 47789KAC7		237.73	0.00	0.00	237.73
10/15/22	10/15/22	Coupon		JOHN DEERE 2021-A A3 EQP MAT 09/15/25 Cpn 0.36 47788UAC6		165.00	0.00	0.00	165.00
10/15/22	10/15/22	Coupon		KUBOTA 2021-2A A3 EQP 144A MAT 11/17/25 Cpn 0.56 50117XAE2		443.33	0.00	0.00	443.33
10/15/22	10/15/22	Coupon		MERCEDES 2021-B A3 LEASE MAT 11/15/24 Cpn 0.40 58769KAD6		200.00	0.00	0.00	200.00
10/15/22	10/15/22	Coupon		CA SAN DIEGO CITY PUB FACS LE MAT 10/15/22 Cpn 3.23 797299LU6		13,731.75	0.00	0.00	13,731.75
10/15/22	10/15/22	Coupon		TOYOTA 2019-C A3 CAR MAT 09/15/23 Cpn 1.91 89238UAD2		30.85	0.00	0.00	30.85
10/15/22	10/15/22	Coupon		WORLD OMNI 2021-A A3 LEASE MAT 08/15/24 Cpn 0.42 98163JAC9		245.00	0.00	0.00	245.00

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10/16/22	10/16/22	Coupon		GMCAR 2021-2 A3 CAR MAT 04/16/26 Cpn 0.51 380149AC8		93.50	0.00	0.00	93.50
10/20/22	10/20/22	Coupon		GMALT 2021-2 A LEASE MAT 05/20/25 Cpn 0.41 380144AD7		256.25	0.00	0.00	256.25
10/20/22	10/20/22	Coupon		INTL BANK RECON & DEVELOP MAT 04/20/23 Cpn 0.13 459058JV6		212.50	0.00	0.00	212.50
10/20/22	10/20/22	Coupon		SRT 2021-C A3 LEASE 144A MAT 03/20/25 Cpn 0.50 80286CAC4		208.33	0.00	0.00	208.33
10/20/22	10/20/22	Coupon		TESLA 2021-B A2 LEASE 144A MAT 09/22/25 Cpn 0.36 88161KAB1		89.93	0.00	0.00	89.93
10/20/22	10/20/22	Coupon		VERIZON 2020-B A PHONE MAT 02/20/25 Cpn 0.47 92290BAA9		327.41	0.00	0.00	327.41
10/22/22	10/22/22	Coupon		FNMA MAT 04/22/25 Cpn 0.63 3135G03U5		3,000.00	0.00	0.00	3,000.00
10/25/22	10/25/22	Coupon		BMW 2021-1 A4 LEASE MAT 07/25/24 Cpn 0.37 05591RAD6		92.50	0.00	0.00	92.50
10/25/22	10/25/22	Coupon		BMW 2019-A A3 CAR MAT 01/25/24 Cpn 1.92 05588CAC6		46.58	0.00	0.00	46.58
10/01/22	10/25/22	Coupon		FHMS K029 A2 CMBS MAT 02/25/23 Cpn 3.32 3137B36J2		618.23	0.00	0.00	618.23
10/01/22	10/25/22	Coupon		FHMS K029 A2 CMBS MAT 02/25/23 Cpn 3.32 3137B36J2		978.86	0.00	0.00	978.86
10/01/22	10/25/22	Coupon		FHMS K029 A2 CMBS MAT 02/25/23 Cpn 3.32 3137B36J2		463.67	0.00	0.00	463.67
10/01/22	10/25/22	Coupon		FHMS K031 A2 MAT 04/25/23 Cpn 3.30 3137B3NX2		2,120.72	0.00	0.00	2,120.72

Account Name: L.A. CARE HEALTH PLAN-LOW DURATION PORT

10/01/2022 through 10/31/2022

Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
10/01/22	10/25/22	Coupon		FHMS K033 A2 MAT 07/25/23 Cpn 3.06 3137B4WB8		2,091.00	0.00	0.00	2,091.00
10/01/22	10/25/22	Coupon		FHMS K034 A2 MAT 07/25/23 Cpn 3.53 3137B5JM6		1,412.40	0.00	0.00	1,412.40
10/01/22	10/25/22	Coupon		FHMS K725 AM CMBS MAT 02/25/24 Cpn 3.10 3137BWWE		2,095.20	0.00	0.00	2,095.20
10/01/22	10/25/22	Coupon		FHMS K726 AM CMBS MAT 04/25/24 Cpn 2.99 3137BYPR5		1,417.88	0.00	0.00	1,417.88
10/25/22	10/25/22	Coupon		FHMS KI05 A MAT 07/25/24 Cpn 2.89 3137FQXG3		81.50	0.00	0.00	81.50
10/01/22	10/25/22	Coupon		FHMS KJ28 A1 MAT 02/25/25 Cpn 1.77 3137FREB3		203.02	0.00	0.00	203.02
10/01/22	10/25/22	Coupon		FHMS KJ30 A1 CMBS MAT 01/25/25 Cpn 0.53 3137FUZN7		30.07	0.00	0.00	30.07
10/01/22	10/25/22	Coupon		FHMS KS01 A2 CMBS MAT 01/25/23 Cpn 2.52 3137B1U75		157.07	0.00	0.00	157.07
10/01/22	10/25/22	Coupon		FHMS KSMC A2 CMBS MAT 01/25/23 Cpn 2.62 3137B04Y7		1,939.46	0.00	0.00	1,939.46
10/31/22	10/31/22	Coupon		U.S. TREASURY NOTE MAT 04/30/25 Cpn 0.38 912828ZL7		1,753.13	0.00	0.00	1,753.13
10/31/22	10/31/22	Coupon		U.S. TREASURY NOTE MAT 04/30/26 Cpn 0.75 91282CBW0		2,456.25	0.00	0.00	2,456.25
10/31/22	10/31/22	Coupon		U.S. TREASURY NOTE MAT 04/30/26 Cpn 0.75 91282CBW0		3,525.00	0.00	0.00	3,525.00
10/31/22	10/31/22	Coupon		U.S. TREASURY NOTE MAT 10/31/24 Cpn 1.50 912828YM6		300.00	0.00	0.00	300.00

Account Name: L.A. CARE HEALTH PLAN-LOW DURATION PORT

10/01/2022 through 10/31/2022

Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
10/31/22	10/31/22	Coupon		U.S. TREASURY NOTE MAT 04/30/27 Cpn 2.75 91282CEN7		12,375.00	0.00	0.00	12,375.00
						90,384.47	0.00	0.00	90,384.47
10/01/22	10/01/22	Income	49,197.100	STIF INT MAT Cpn USD		49,197.10	0.00	0.00	49,197.10
10/15/22	10/15/22	Pay Princpl	21,793.482	CARMX 2020-1 A3 CAR MAT 12/16/24 Cpn 1.89 14315XAC2	21,793.48		0.00	(206.97)	21,793.48
10/15/22	10/15/22	Pay Princpl	19,872.462	CAPITAL ONE 2020-1 A3 CAR MAT 11/15/24 Cpn 1.60 14043MAC5	19,872.46		0.00	1.22	19,872.46
10/15/22	10/15/22	Pay Princpl	17,444.332	HONDA 2019-3 A3 CAR MAT 08/15/23 Cpn 1.78 43815NAC8	17,444.33		0.00	(0.00)	17,444.33
10/15/22	10/15/22	Pay Princpl	31,619.612	JOHN DEERE 2020-A A3 EQP MAT 08/15/24 Cpn 1.10 47789KAC7	31,619.61		0.00	0.57	31,619.61
10/15/22	10/15/22	Pay Princpl	15,279.176	TOYOTA 2019-C A3 CAR MAT 09/15/23 Cpn 1.91 89238UAD2	15,279.18		0.00	0.00	15,279.18
10/20/22	10/20/22	Pay Princpl	18,919.297	TESLA 2021-B A2 LEASE 144A MAT 09/22/25 Cpn 0.36 88161KAB1	18,919.30		0.00	1.03	18,919.30
10/20/22	10/20/22	Pay Princpl	112,368.119	VERIZON 2020-B A PHONE MAT 02/20/25 Cpn 0.47 92290BAA9	112,368.12		0.00	(83.89)	112,368.12
10/25/22	10/25/22	Pay Princpl	17,348.053	BMW 2019-A A3 CAR MAT 01/25/24 Cpn 1.92 05588CAC6	17,348.05		0.00	0.10	17,348.05
10/01/22	10/25/22	Pay Princpl	15,066.810	FHMS K029 A2 CMBS MAT 02/25/23 Cpn 3.32 3137B36J2	15,066.81		0.00	(80.39)	15,066.81

Account Name: L.A. CARE HEALTH PLAN-LOW DURATION PORT

10/01/2022 through 10/31/2022

Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
10/01/22	10/25/22	Pay Princpl	23,855.783	FHMS K029 A2 CMBS MAT 02/25/23 Cpn 3.32 3137B36J2	23,855.78		0.00	(127.08)	23,855.78
10/01/22	10/25/22	Pay Princpl	11,300.108	FHMS K029 A2 CMBS MAT 02/25/23 Cpn 3.32 3137B36J2	11,300.11		0.00	(52.45)	11,300.11
10/01/22	10/25/22	Pay Princpl	2,410.220	FHMS K031 A2 MAT 04/25/23 Cpn 3.30 3137B3NX2	2,410.22		0.00	(28.45)	2,410.22
10/01/22	10/25/22	Pay Princpl	187.368	FHMS K034 A2 MAT 07/25/23 Cpn 3.53 3137B5JM6	187.37		0.00	(3.39)	187.37
10/25/22	10/25/22	Pay Princpl	33,802.138	FHMS KI05 A MAT 07/25/24 Cpn 2.89 3137FQXG3	33,802.14		0.00	0.00	33,802.14
10/01/22	10/25/22	Pay Princpl	50,935.905	FHMS KJ28 A1 MAT 02/25/25 Cpn 1.77 3137FREB3	50,935.91		0.00	0.10	50,935.91
10/01/22	10/25/22	Pay Princpl	12,850.550	FHMS KJ30 A1 CMBS MAT 01/25/25 Cpn 0.53 3137FUZN7	12,850.55		0.00	0.13	12,850.55
10/01/22	10/25/22	Pay Princpl	43,731.876	FHMS KS01 A2 CMBS MAT 01/25/23 Cpn 2.52 3137B1U75	43,731.88		0.00	(52.50)	43,731.88
			448,785.292		448,785.30		0.00	(631.97)	448,785.30
10/01/22	10/01/22	Mature Long	515,000.000	CA SAN MARCOS REDEV AGY TAB MAT 10/01/22 Cpn 2.25 79876CBS6	515,000.00		0.00	0.00	515,000.00
10/15/22	10/15/22	Mature Long	850,000.000	CA SAN DIEGO CITY PUB FACS LE MAT 10/15/22 Cpn 3.23 797299LU6	850,000.00		0.00	0.00	850,000.00
			1,365,000.000		1,365,000.00		0.00	0.00	1,365,000.00

LA CARE

Cash Activity by Transaction Type GAAP Basis

Accounting Period From 10/01/2022 To 10/31/2022

Cash Date	Trade/Ex-Date	Settle/Pay Date	Custodian	Cusip	Description	Quantity	Income Amount	Principal Amount	Contributions/ Withdrawals	Total Amount
BUY										
10/07/22	10/05/22	10/07/22	BKAMER19	89236TKJ3	TOYOTA MOTOR CREDIT CORP	3,000,000.00	(6,445.83)	(2,953,350.00)	0.00	(2,959,795.83)
10/11/22	10/06/22	10/11/22	BKAMER19	010392FY9	ALABAMA POWER CO	2,000,000.00	(12,291.67)	(1,898,180.00)	0.00	(1,910,471.67)
10/13/22	10/11/22	10/13/22	BKAMER19	06051GJS9	BANK OF AMERICA CORP	5,000,000.00	(19,507.50)	(4,296,700.00)	0.00	(4,316,207.50)
10/14/22	10/12/22	10/14/22	BKAMER19	907818EP9	UNION PACIFIC CORP	1,000,000.00	(14,916.66)	(917,330.00)	0.00	(932,246.66)
10/18/22	10/14/22	10/18/22	BKAMER19	29736RAJ9	ESTEE LAUDER CO INC	1,500,000.00	(4,331.25)	(1,394,295.00)	0.00	(1,398,626.25)
10/19/22	10/19/22	10/19/22	BKAMER19	09248U718	BLACKROCK TREASURY TRUST	2,203,879.36	0.00	(2,203,879.36)	0.00	(2,203,879.36)
10/24/22	10/20/22	10/24/22	BKAMER19	904764AY3	UNILEVER CAPITAL CORP	7,500,000.00	(102,104.17)	(6,819,450.00)	0.00	(6,921,554.17)
10/25/22	10/21/22	10/25/22	BKAMER19	91159HHR4	US BANCORP	7,000,000.00	(109,025.00)	(6,405,560.00)	0.00	(6,514,585.00)
10/26/22	10/24/22	10/26/22	BKAMER19	10373QAZ3	BP CAP MARKETS AMERICA	5,000,000.00	(5,980.00)	(4,624,900.00)	0.00	(4,630,880.00)
TOTAL BUY						34,203,879.36	(274,602.08)	(31,513,644.36)	0.00	(31,788,246.44)
DIVIDEND										
10/01/22	10/01/22	10/01/22	BKAMER19	09248U718	BLACKROCK TREASURY TRUST	81,600.19	6,629.09	0.00	0.00	6,629.09
TOTAL DIVIDEND						81,600.19	6,629.09	0.00	0.00	6,629.09
INTEREST										
10/01/22	10/01/22	10/01/22	BKAMER19	20030NDK4	COMCAST CORP	0.00	41,250.00	0.00	0.00	41,250.00
10/01/22	10/01/22	10/01/22	BKAMER19	341081FZ5	FLORIDA POWER & LIGHT CO	0.00	106,875.00	0.00	0.00	106,875.00
10/01/22	10/01/22	10/01/22	BKAMER19	369550BK3	GENERAL DYNAMICS CORP	0.00	81,250.00	0.00	0.00	81,250.00
10/01/22	10/01/22	10/01/22	BKAMER19	375558AW3	GILEAD SCIENCES INC	0.00	111,000.00	0.00	0.00	111,000.00
10/01/22	10/01/22	10/01/22	BKAMER19	46625HRV4	JPMORGAN CHASE & CO	0.00	51,625.00	0.00	0.00	51,625.00
10/01/22	10/01/22	10/01/22	BKAMER19	68233JBZ6	ONCOR ELECTRIC DELIVERY	0.00	8,250.00	0.00	0.00	8,250.00
10/01/22	10/01/22	10/01/22	BKAMER19	743756AB4	PROV ST JOSEPH HLTH OBL	0.00	20,595.00	0.00	0.00	20,595.00
10/01/22	10/01/22	10/01/22	BKAMER19	828807CS4	SIMON PROPERTY GROUP LP	0.00	42,187.50	0.00	0.00	42,187.50
10/01/22	10/01/22	10/01/22	BKAMER19	911312BX3	UNITED PARCEL SERVICE	0.00	97,500.00	0.00	0.00	97,500.00
10/15/22	10/15/22	10/15/22	BKAMER19	437076CN0	HOME DEPOT INC	0.00	74,730.03	0.00	0.00	74,730.03
10/15/22	10/15/22	10/15/22	BKAMER19	90320WAF0	UPMC	0.00	9,015.00	0.00	0.00	9,015.00
10/15/22	10/15/22	10/15/22	BKAMER19	907818EP9	UNION PACIFIC CORP	0.00	15,000.00	0.00	0.00	15,000.00
10/18/22	10/18/22	10/18/22	BKAMER19	05565EBH7	BMW US CAPITAL LLC	0.00	94,500.00	0.00	0.00	94,500.00
10/20/22	10/20/22	10/20/22	BKAMER19	459058JV6	INTL BK RECON & DEVELOP	3,000,000.00	1,890.00	0.00	0.00	1,890.00
10/22/22	10/22/22	10/22/22	BKAMER19	46647PCB0	JPMORGAN CHASE & CO	0.00	19,725.00	0.00	0.00	19,725.00
10/23/22	10/23/22	10/23/22	BKAMER19	61761JVL0	MORGAN STANLEY	0.00	55,500.00	0.00	0.00	55,500.00

LA CARE

Cash Activity by Transaction Type GAAP Basis

Accounting Period From 10/01/2022 To 10/31/2022

Cash Date	Trade/Ex-Date	Settle/Pay Date	Custodian	Cusip	Description	Quantity	Income Amount	Principal Amount	Contributions/ Withdrawals	Total Amount
10/27/22	10/27/22	10/27/22	BKAMER19	91159HHR4	US BANCORP	0.00	110,250.00	0.00	0.00	110,250.00
10/30/22	10/30/22	10/30/22	BKAMER19	95000U2N2	WELLS FARGO & COMPANY	0.00	109,400.00	0.00	0.00	109,400.00
TOTAL INTEREST						3,000,000.00	1,050,542.53	0.00	0.00	1,050,542.53
SELL										
10/07/22	10/06/22	10/07/22	BKAMER19	741531FA0	PRICOA GLOBAL FUNDING 1	4,500,000.00	15,525.00	4,446,090.00	0.00	4,461,615.00
10/11/22	10/06/22	10/11/22	BKAMER19	06051GHF9	BANK OF AMERICA CORP	7,000,000.00	24,850.00	6,949,600.00	0.00	6,974,450.00
10/19/22	10/19/22	10/19/22	BKAMER19	09248U718	BLACKROCK TREASURY TRUST	81,600.19	0.00	81,600.19	0.00	81,600.19
10/24/22	10/21/22	10/24/22	BKAMER19	010392FK9	ALABAMA POWER CO	4,500,000.00	63,456.25	4,428,990.00	0.00	4,492,446.25
10/24/22	10/21/22	10/24/22	BKAMER19	025816BW8	AMERICAN EXPRESS CO	4,000,000.00	33,300.00	3,959,560.00	0.00	3,992,860.00
10/24/22	10/21/22	10/24/22	BKAMER19	02665WCT6	AMERICAN HONDA FINANCE	6,500,000.00	65,379.17	6,382,545.00	0.00	6,447,924.17
10/26/22	10/24/22	10/26/22	BKAMER19	68235PAE8	ONE GAS INC	4,330,000.00	36,907.24	4,244,006.20	0.00	4,280,913.44
TOTAL SELL						30,911,600.19	239,417.66	30,492,391.39	0.00	30,731,809.05
WITHDRAW										
10/07/22	10/07/22	10/07/22	BKAMER19	CASHCASH6	C-04 BANK FEE	0.00	0.00	0.00	(734.23)	(734.23)
TOTAL WITHDRAW						0.00	0.00	0.00	(734.23)	(734.23)
GRAND TOTAL						68,197,079.74	1,021,987.20	(1,021,252.97)	(734.23)	0.00

Avg Date 19

DATE: January 24, 2023

TO: Finance & Budget Committee

FROM: Marie Montgomery, *Chief Financial Officer*

SUBJECT: Monthly Investment Portfolio Securities Transaction Report for November, 2022

To keep the Committee apprised of L.A. Care's investment portfolios and to comply with California Government Code Section 53607, attached are the monthly investment transaction details from November 1 to November 30, 2022.

L.A. Care's investment market value as of November 30, 2022, was $1.6 billion. This includes our funds invested with the government pooled funds. L.A. Care has approximately $73 million invested with the statewide Local Agency Investment Fund (LAIF), and approximately $156 million invested with the Los Angeles County Pooled Investment Fund (LACPIF).

The remainder as of November 30, 2022, of $1.39 billion is managed by two independent asset managers, 1) Payden & Rygel and 2) New England Asset Management (NEAM) and is divided into three portfolios based on investment style,

1. Payden & Rygel - Short-term portfolio
2. Payden & Rygel - Extended term portfolio
3. New England Asset Management - Corporate notes extended term portfolio

The transactions within these three portfolios are included in the attached reports.

LA Care, as a California government entity, only makes investments in bonds/fixed income, as per the California Government Code. The entries on the Investment Securities Portfolio Transaction Report reflect transactions undertaken by financial management companies on L.A. Care's behalf. L.A. Care does not direct these individual transactions. The firms, managing investments on behalf of L.A. Care, conduct the transactions based on L.A. Care's investment guidelines.

Account Name: L.A. CARE HEALTH PLAN

11/01/2022 through 11/30/2022

Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
11/07/22	11/08/22	Buy	7,500,000.000	SWEDBANK NY YCD MAT 03/08/23 Cpn 4.74 87019WFR1	(7,500,000.00)		0.00	0.00	(7,500,000.00)
11/01/22	11/09/22	Buy	5,200,000.000	MMAF 2022-B A1 EQP 144A MAT 12/01/23 Cpn 4.92 606940AA2	(5,200,000.00)		0.00	0.00	(5,200,000.00)
11/09/22	11/09/22	Buy	4,200,000.000	CA SAN JOSE FIN AUTH LEASE CP MAT 01/11/23 Cpn 4.30 79815WDF2	(4,200,000.00)		0.00	0.00	(4,200,000.00)
11/09/22	11/10/22	Buy	15,000,000.000	U.S. TREASURY BILL MAT 11/15/22 Cpn 912796YQ6	(14,993,316.67)		0.00	0.00	(14,993,316.67)
11/09/22	11/10/22	Buy	19,000,000.000	U.S. TREASURY BILL MAT 11/29/22 Cpn 912796YS2	(18,966,406.94)		0.00	0.00	(18,966,406.94)
11/09/22	11/10/22	Buy	15,000,000.000	TVA DISCOUNT NOTE MAT 11/16/22 Cpn 880590P65	(14,991,875.00)		0.00	0.00	(14,991,875.00)
11/10/22	11/14/22	Buy	7,500,000.000	APPLE CP 144A MAT 12/01/22 Cpn 03785EM19	(7,486,647.92)		0.00	0.00	(7,486,647.92)
11/10/22	11/14/22	Buy	41,000,000.000	U.S. TREASURY BILL MAT 11/29/22 Cpn 912796YS2	(40,941,216.25)		0.00	0.00	(40,941,216.25)
11/14/22	11/14/22	Buy	30,000,000.000	U.S. TREASURY BILL MAT 11/17/22 Cpn 912796W62	(29,991,622.50)		0.00	0.00	(29,991,622.50)
11/14/22	11/14/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 11/17/22 Cpn 912796W62	(49,986,037.50)		0.00	0.00	(49,986,037.50)
11/14/22	11/14/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 11/17/22 Cpn 912796W62	(49,986,037.50)		0.00	0.00	(49,986,037.50)
11/14/22	11/14/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 11/17/22 Cpn 912796W62	(49,986,037.50)		0.00	0.00	(49,986,037.50)
11/14/22	11/14/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 11/17/22 Cpn 912796W62	(49,986,037.50)		0.00	0.00	(49,986,037.50)

Account Name: L.A. CARE HEALTH PLAN

11/01/2022 through 11/30/2022

Tr Date	St Date	Transaction Type	Units	Description		Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
11/10/22	11/14/22	Buy	20,000,000.000	U.S. TREASURY BILL MAT 12/08/22 Cpn	912796X61	(19,955,333.33)		0.00	0.00	(19,955,333.33)
11/14/22	11/14/22	Buy	10,000,000.000	FHLB DISCOUNT NOTE MAT 11/15/22 Cpn	313385P59	(9,999,000.00)		0.00	0.00	(9,999,000.00)
11/14/22	11/14/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/15/22 Cpn	313385P59	(49,995,000.00)		0.00	0.00	(49,995,000.00)
11/14/22	11/14/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/15/22 Cpn	313385P59	(49,995,000.00)		0.00	0.00	(49,995,000.00)
11/14/22	11/14/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/15/22 Cpn	313385P59	(49,995,000.00)		0.00	0.00	(49,995,000.00)
11/14/22	11/14/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/15/22 Cpn	313385P59	(49,995,000.00)		0.00	0.00	(49,995,000.00)
11/14/22	11/14/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/15/22 Cpn	313385P59	(49,995,000.00)		0.00	0.00	(49,995,000.00)
11/14/22	11/14/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/15/22 Cpn	313385P59	(49,995,000.00)		0.00	0.00	(49,995,000.00)
11/14/22	11/14/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/15/22 Cpn	313385P59	(49,995,000.00)		0.00	0.00	(49,995,000.00)
11/10/22	11/14/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 12/01/22 Cpn	313385R57	(49,915,000.00)		0.00	0.00	(49,915,000.00)
11/10/22	11/14/22	Buy	30,000,000.000	TVA DISCOUNT NOTE MAT 11/30/22 Cpn	880590R48	(29,952,666.67)		0.00	0.00	(29,952,666.67)
11/10/22	11/14/22	Buy	50,000,000.000	TVA DISCOUNT NOTE MAT 11/30/22 Cpn	880590R48	(49,921,111.11)		0.00	0.00	(49,921,111.11)
11/14/22	11/14/22	Buy	800,000.000	CA UNIVERSITY OF CALIFORNIA C MAT 01/17/23 Cpn	91411UNH4	(794,268.45)		0.00	0.00	(794,268.45)

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Tr Date	St Date	Transaction Type	Units	Description		Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
11/15/22	11/15/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/16/22 Cpn	313385P67	(49,994,888.89)		0.00	0.00	(49,994,888.89)
11/15/22	11/15/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/16/22 Cpn	313385P67	(49,994,888.89)		0.00	0.00	(49,994,888.89)
11/15/22	11/15/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/16/22 Cpn	313385P67	(49,994,888.89)		0.00	0.00	(49,994,888.89)
11/15/22	11/15/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/16/22 Cpn	313385P67	(49,994,888.89)		0.00	0.00	(49,994,888.89)
11/15/22	11/15/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/16/22 Cpn	313385P67	(49,994,888.89)		0.00	0.00	(49,994,888.89)
11/15/22	11/15/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/16/22 Cpn	313385P67	(49,994,888.89)		0.00	0.00	(49,994,888.89)
11/15/22	11/15/22	Buy	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/16/22 Cpn	313385P67	(49,994,888.89)		0.00	0.00	(49,994,888.89)
11/15/22	11/16/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 03/14/23 Cpn	912796Z69	(49,301,013.89)		0.00	0.00	(49,301,013.89)
11/15/22	11/16/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 12/06/22 Cpn	912796YX1	(49,902,194.44)		0.00	0.00	(49,902,194.44)
11/15/22	11/16/22	Buy	20,000,000.000	U.S. TREASURY BILL MAT 12/13/22 Cpn	912796YY9	(19,946,150.00)		0.00	0.00	(19,946,150.00)
11/15/22	11/16/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 12/13/22 Cpn	912796YY9	(49,865,375.00)		0.00	0.00	(49,865,375.00)
11/15/22	11/16/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 12/13/22 Cpn	912796YY9	(49,865,375.00)		0.00	0.00	(49,865,375.00)
11/15/22	11/16/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 12/13/22 Cpn	912796YY9	(49,865,375.00)		0.00	0.00	(49,865,375.00)

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Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
11/15/22	11/16/22	Buy	50,000,000.000	U.S. TREASURY BILL MAT 05/18/23 Cpn 912796W47	(48,896,916.67)		0.00	0.00	(48,896,916.67)
11/16/22	11/16/22	Buy	7,500,000.000	CA SAN FRAN PUB CP TXB MAT 01/18/23 Cpn 4.20 79770TRB6	(7,500,000.00)		0.00	0.00	(7,500,000.00)
11/16/22	11/17/22	Buy	35,000,000.000	U.S. TREASURY BILL MAT 02/16/23 Cpn 912796YA1	(34,635,273.26)		0.00	0.00	(34,635,273.26)
11/17/22	11/18/22	Buy	7,500,000.000	CREDIT AGRICOLE NY YCD MAT 02/21/23 Cpn 4.60 22536A3S1	(7,500,000.00)		0.00	0.00	(7,500,000.00)
11/17/22	11/18/22	Buy	7,500,000.000	JOHN DEERE CANADA CP 144A MAT 02/03/23 Cpn 24423JP35	(7,431,341.67)		0.00	0.00	(7,431,341.67)
11/16/22	11/21/22	Buy	6,500,000.000	EFF 2022-4 A1 FLEET 144A MAT 11/20/23 Cpn 5.15 29374GAA9	(6,500,000.00)		0.00	0.00	(6,500,000.00)
11/22/22	11/22/22	Buy	7,500,000.000	CENTURY HSG CP TXB MAT 12/20/22 Cpn 4.58 15654WAC0	(7,500,000.00)		0.00	0.00	(7,500,000.00)
			1,596,700,000.000		(1,593,390,852.00)		0.00	0.00	(1,593,390,852.00)
11/01/22	11/01/22	Coupon		CA LOS ANGELES MUNI IMPT COR MAT 11/01/22 Cpn 0.32 5445872Q0		1,993.75	0.00	0.00	1,993.75
11/01/22	11/01/22	Coupon		CA REDONDO BEACH FIN AUTH LE MAT 05/01/23 Cpn 0.42 757696AP4		2,396.63	0.00	0.00	2,396.63
11/07/22	11/07/22	Coupon		SWEDBANK NY YCD MAT 11/07/22 Cpn 2.50 87019WCW		65,104.17	0.00	0.00	65,104.17
11/09/22	11/09/22	Coupon		CA SAN JOSE FIN AUTH LEASE RE MAT 11/09/22 Cpn 2.85 79815WDD7		22,175.34	0.00	0.00	22,175.34
11/10/22	11/10/22	Coupon		CRVNA 2021-P2 A2 CAR MAT 07/10/24 Cpn 0.30 14687TAB3		1.63	0.00	0.00	1.63

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11/10/22	11/10/22	Coupon		CRVNA 2021-P4 A2 CAR MAT 04/10/25 Cpn 0.82 14687KAB2		2,660.55	0.00	0.00	2,660.55
11/14/22	11/14/22	Coupon		BAYERISCHE LANDESBANK YCD MAT 11/14/22 Cpn 2.84 0727MCXH5		55,616.67	0.00	0.00	55,616.67
11/14/22	11/14/22	Coupon		CCG 2022-1 A1 EQP 144A MAT 06/14/23 Cpn 1.84 12511JAA3		770.96	0.00	0.00	770.96
11/14/22	11/14/22	Coupon		MMAF 2022-A A1 EQP 144A MAT 05/03/23 Cpn 1.48 55317RAA0		3,670.55	0.00	0.00	3,670.55
11/14/22	11/14/22	Coupon		SKANDINAV ENSKILDA BK YCD FR MAT 04/12/23 Cpn 4.29 83050PP60		24,475.00	0.00	0.00	24,475.00
11/15/22	11/15/22	Coupon		ALLYA 2022-1 A1 CAR MAT 05/15/23 Cpn 1.36 02008JAA4		390.68	0.00	0.00	390.68
11/15/22	11/15/22	Coupon		ALLYA 2022-2 A2 CAR MAT 10/15/25 Cpn 4.62 02008MAB5		15,669.50	0.00	0.00	15,669.50
11/15/22	11/15/22	Coupon		ARIFL 2022-A A1 FLEET 144A MAT 04/17/23 Cpn 1.49 00217QAA9		1,140.59	0.00	0.00	1,140.59
11/15/22	11/15/22	Coupon		CARMX 2019-2 A3 CAR MAT 03/15/24 Cpn 2.68 14316LAC7		320.07	0.00	0.00	320.07
11/15/22	11/15/22	Coupon		CARMAX 2019-3 A3 CAR MAT 08/15/24 Cpn 2.18 14315PAD7		2,886.70	0.00	0.00	2,886.70
11/15/22	11/15/22	Coupon		CARMX 2021-4 A2A CAR MAT 11/15/24 Cpn 0.24 14317JAB3		301.08	0.00	0.00	301.08
11/15/22	11/15/22	Coupon		CARMX 2022-3 A1 CAR MAT 07/17/23 Cpn 2.66 14318MAA7		5,822.60	0.00	0.00	5,822.60
11/15/22	11/15/22	Coupon		CNH 2021-C A2 EQP MAT 01/15/25 Cpn 0.33 12598LAB2		1,071.69	0.00	0.00	1,071.69

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11/15/22	11/15/22	Coupon		COPAR 2022-2 A1 CAR MAT 08/15/23 Cpn 2.87 14043GAA2		7,630.94	0.00	0.00	7,630.94
11/15/22	11/15/22	Coupon		FORDO 2022-C A1 CAR MAT 10/15/23 Cpn 3.63 34535AAA8		20,566.92	0.00	0.00	20,566.92
11/15/22	11/15/22	Coupon		GALC 2022-1 A1 EQP 144A MAT 10/16/23 Cpn 4.34 39154TBU1		21,699.08	0.00	0.00	21,699.08
11/15/22	11/15/22	Coupon		HALST 2020-B A3 CAR LEASE 144A MAT 09/15/23 Cpn 0.51 44891PAC8		577.21	0.00	0.00	577.21
11/15/22	11/15/22	Coupon		HALST 2021-C A2 CAR LEASE 144A MAT 01/16/24 Cpn 0.24 44933MAB7		478.39	0.00	0.00	478.39
11/15/22	11/15/22	Coupon		HALST 2021-C A2 CAR LEASE 144A MAT 01/16/24 Cpn 0.24 44933MAB7		115.57	0.00	0.00	115.57
11/15/22	11/15/22	Coupon		HONDA 2021-2 A2 CAR MAT 11/15/23 Cpn 0.17 43811JAB3		76.74	0.00	0.00	76.74
11/15/22	11/15/22	Coupon		HAROT 2022-1 A2 CAR MAT 10/15/24 Cpn 1.44 43815BAB6		5,882.27	0.00	0.00	5,882.27
11/15/22	11/15/22	Coupon		HYUNDAI 2021-A A2 CAR MAT 02/15/24 Cpn 0.23 44933LAB9		22.75	0.00	0.00	22.75
11/15/22	11/15/22	Coupon		KUBOTA 2020-1A A3 EQP 144A MAT 03/15/24 Cpn 1.96 50117WAC8		2,742.30	0.00	0.00	2,742.30
11/15/22	11/15/22	Coupon		KUBOTA 2020-1A A3 EQP 144A MAT 03/15/24 Cpn 1.96 50117WAC8		657.91	0.00	0.00	657.91
11/15/22	11/15/22	Coupon		KCOT 2022-2A A1 EQP 144A MAT 07/17/23 Cpn 2.60 50117JAA1		4,917.69	0.00	0.00	4,917.69
11/15/22	11/15/22	Coupon		MERCEDES 2021-B A2 LEASE MAT 01/16/24 Cpn 0.22 58769KAC8		353.88	0.00	0.00	353.88

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11/15/22	11/15/22	Coupon		NAROT 2022-B A1 CAR MAT 10/16/23 Cpn 3.69 65480JAA8		20,126.34	0.00	0.00	20,126.34
11/15/22	11/15/22	Coupon		TOYOTA 2019-C A3 CAR MAT 09/15/23 Cpn 1.91 89238UAD2		68.20	0.00	0.00	68.20
11/15/22	11/15/22	Coupon		TOYOTA 2019-C A3 CAR MAT 09/15/23 Cpn 1.91 89238UAD2		6.84	0.00	0.00	6.84
11/15/22	11/15/22	Coupon		TAOT 2022-C A2A CAR MAT 08/15/25 Cpn 4.19 89231CAB3		18,156.67	0.00	0.00	18,156.67
11/15/22	11/15/22	Coupon		WORLD OMNI 2021-B A2 CAR MAT 07/15/24 Cpn 0.20 98163LAB6		104.60	0.00	0.00	104.60
11/15/22	11/15/22	Coupon		WOART 2022-B A2A CAR MAT 10/15/25 Cpn 2.77 98163QAB5		10,156.67	0.00	0.00	10,156.67
11/15/22	11/15/22	Coupon		WOLS 2022-A A2 LEASE MAT 10/15/24 Cpn 2.63 98163NAB2		3,237.39	0.00	0.00	3,237.39
11/16/22	11/16/22	Coupon		GMCAR 2021-A A2 CAR MAT 06/17/24 Cpn 0.27 380149AB0		64.69	0.00	0.00	64.69
11/16/22	11/16/22	Coupon		GMCAR 2022-4 A1 CAR MAT 10/16/23 Cpn 3.62 36265QAA4		26,366.67	0.00	0.00	26,366.67
11/18/22	11/18/22	Coupon		CREDIT AGRICOLE NY YCD MAT 11/18/22 Cpn 2.09 22536APW8		80,116.67	0.00	0.00	80,116.67
11/18/22	11/18/22	Coupon		HONDA 2021-3 A2 CAR MAT 02/20/24 Cpn 0.20 43815EAB0		174.53	0.00	0.00	174.53
11/20/22	11/20/22	Coupon		GMALT 2021-1 A3 LEASE MAT 02/20/24 Cpn 0.26 36261RAC2		1,388.23	0.00	0.00	1,388.23
11/20/22	11/20/22	Coupon		GMALT 2021-1 A3 LEASE MAT 02/20/24 Cpn 0.26 36261RAC2		47.06	0.00	0.00	47.06

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11/20/22	11/20/22	Coupon		HPEFS 2022-3A A1 EQP 144A MAT 10/20/23 Cpn 4.33 403951AA4		8,854.49	0.00	0.00	8,854.49
11/20/22	11/20/22	Coupon		SRT 2021-C A2 LEASE 144A MAT 04/22/24 Cpn 0.29 80286CAB6		218.80	0.00	0.00	218.80
11/20/22	11/20/22	Coupon		TESLA 2021-B A2 LEASE 144A MAT 09/22/25 Cpn 0.36 88161KAB1		642.45	0.00	0.00	642.45
11/20/22	11/20/22	Coupon		TLOT 2021-B A3 LEASE 144A MAT 10/21/24 Cpn 0.42 89239CAC3		875.00	0.00	0.00	875.00
11/20/22	11/20/22	Coupon		VALET 2021-1 A2 CAR MAT 10/21/24 Cpn 0.49 92868KAB9		1,517.65	0.00	0.00	1,517.65
11/20/22	11/20/22	Coupon		VERIZON 2019-C A1A PHONE MAT 04/22/24 Cpn 1.94 92348AAA3		968.64	0.00	0.00	968.64
11/20/22	11/20/22	Coupon		VERIZON 2019-C A1A PHONE MAT 04/22/24 Cpn 1.94 92348AAA3		474.63	0.00	0.00	474.63
11/21/22	11/21/22	Coupon		BANK OF NOVA SCOTIA YCD FRN MAT 02/21/23 Cpn 4.30 06417MH40		7,620.83	0.00	0.00	7,620.83
11/21/22	11/21/22	Coupon		EFF 2022-1 A1 FLEET 144A MAT 04/20/23 Cpn 1.49 29375JAA2		541.08	0.00	0.00	541.08
11/21/22	11/21/22	Coupon		EFF 2022-2 A1 FLEET 144A MAT 06/20/23 Cpn 2.76 29374JAA3		8,482.14	0.00	0.00	8,482.14
11/21/22	11/21/22	Coupon		EFF 2022-3 A1 FLEET 144A MAT 08/20/23 Cpn 3.61 29374FAA1		16,435.50	0.00	0.00	16,435.50
11/21/22	11/21/22	Coupon		GMALT 2022-3 A1 LEASE MAT 08/21/23 Cpn 3.07 380130AA2		8,131.19	0.00	0.00	8,131.19
11/21/22	11/21/22	Coupon		HPEFS 2022-2A A1 EQP 144A MAT 05/22/23 Cpn 1.91 40441TAA7		2,665.99	0.00	0.00	2,665.99

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11/21/22	11/21/22	Coupon		HPEFS 2022-3A A1 EQP 144A MAT 10/20/23 Cpn 4.33 403951AA4		195.80	0.00	0.00	195.80
11/21/22	11/21/22	Coupon		NORDEA BANK NY YCD FRN MAT 04/20/23 Cpn 4.41 65558UXX5		24,268.75	0.00	0.00	24,268.75
11/21/22	11/21/22	Coupon		SVENSKA HANDELSBANKEN NY Y MAT 04/21/23 Cpn 4.41 86959RM31		23,572.92	0.00	0.00	23,572.92
11/21/22	11/21/22	Coupon		SUMITOMO MITSUI BANKING YCD MAT 03/20/23 Cpn 4.20 86565FTC6		22,933.33	0.00	0.00	22,933.33
11/21/22	11/21/22	Coupon		VWALT 2022-A A1 LEASE MAT 06/20/23 Cpn 1.72 92868AAA3		672.42	0.00	0.00	672.42
11/22/22	11/22/22	Coupon		CENTURY HSG TXB CP MAT 11/22/22 Cpn 4.20 15654WAA4		22,866.67	0.00	0.00	22,866.67
11/22/22	11/22/22	Coupon		DEFT 2022-2 A1 EQP 144A MAT 07/24/23 Cpn 3.06 24702CAA2		8,053.33	0.00	0.00	8,053.33
11/25/22	11/25/22	Coupon		BMW 2021-2 A2 LEASE MAT 11/27/23 Cpn 0.19 09690AAB9		121.87	0.00	0.00	121.87
11/25/22	11/25/22	Coupon		BMW 2019-A A3 CAR MAT 01/25/24 Cpn 1.92 05588CAC6		79.04	0.00	0.00	79.04
11/25/22	11/25/22	Coupon		BMWOT 2022-A A1 CAR MAT 05/25/23 Cpn 1.35 05602RAA9		430.25	0.00	0.00	430.25
11/25/22	11/25/22	Coupon		CITIBANK CD FRN SOFRRATE MAT 05/25/23 Cpn 4.25 17330QAG2		22,475.00	0.00	0.00	22,475.00
11/25/22	11/25/22	Coupon		FHMS KF36 A MAT 08/25/24 Cpn 4.14 3137FBAR7		4,623.90	0.00	0.00	4,623.90
11/25/22	11/25/22	Coupon		FHMS KF38 A MAT 09/25/24 Cpn 4.13 3137FBUC8		1,136.43	0.00	0.00	1,136.43

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11/25/22	11/25/22	Coupon		FHMS KI04 A 1MOFRN CMBS MAT 07/25/24 Cpn 4.16 3137FNAV2		258.07	0.00	0.00	258.07
11/25/22	11/25/22	Coupon		FHMS KI06 A 1MOFRN CMBS MAT 03/25/25 Cpn 4.02 3137FVNA6		1,577.71	0.00	0.00	1,577.71
11/25/22	11/25/22	Coupon		FHMS KI07 A SOFRFRN MAT 09/25/26 Cpn 3.21 3137H3KA9		15,793.86	0.00	0.00	15,793.86
11/25/22	11/25/22	Coupon		FHMS KI08 A 1MOFRN CMBS MAT 10/25/26 Cpn 3.24 3137H4RC6		8,057.76	0.00	0.00	8,057.76
11/01/22	11/25/22	Coupon		FHMS KS01 A2 CMBS MAT 01/25/23 Cpn 2.52 3137B1U75		1,286.02	0.00	0.00	1,286.02
11/25/22	11/25/22	Coupon		FHMS Q015 A 1MOFRN CMBS MAT 08/25/24 Cpn 3.34 3137FYUR5		3,521.96	0.00	0.00	3,521.96
11/30/22	11/30/22	Coupon		VA SENTARA HEALTHCARE CP TX MAT 11/30/22 Cpn 3.70 81727NKD2		25,849.32	0.00	0.00	25,849.32
						677,407.17	0.00	0.00	677,407.17
11/01/22	11/01/22	Income	32,622.060	ADJ NET INT MAT Cpn USD		32,622.06	0.00	0.00	32,622.06
11/01/22	11/01/22	Income	389,869.450	STIF INT MAT Cpn USD		389,869.45	0.00	0.00	389,869.45
11/30/22	11/30/22	Income	11,899.660	ADJ NET INT MAT Cpn USD		11,899.66	0.00	0.00	11,899.66

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Tr Date	St Date	Transaction Type	Units	Description			Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
Cash - cont.											
11/30/22	11/30/22	Income	283,100.830	STIF INT MAT	Cpn	USD		283,100.83	0.00	0.00	283,100.83
			717,492.000					717,492.00	0.00	0.00	717,492.00
11/10/22	11/10/22	Contributn	300,000,000.000	NM MAT	Cpn	USD	300,000,000.00		0.00	0.00	300,000,000.00
11/14/22	11/14/22	Contributn	405,000,000.000	NM MAT	Cpn	USD	405,000,000.00		0.00	0.00	405,000,000.00
			705,000,000.000				705,000,000.00		0.00	0.00	705,000,000.00
11/04/22	11/07/22	Sell Long	10,000,000.000	U.S. TREASURY BILL MAT 11/08/22	Cpn	912796YP8	9,979,194.45	19,916.66	(92.22)	0.00	9,999,111.11
11/04/22	11/07/22	Sell Long	50,000,000.000	U.S. TREASURY BILL MAT 11/08/22	Cpn	912796YP8	49,895,972.23	99,583.33	(461.10)	0.00	49,995,555.56
11/14/22	11/14/22	Sell Long	16,000,000.000	U.S. TREASURY BILL MAT 11/29/22	Cpn	912796YS2	15,970,741.11	5,955.56	(969.99)	0.00	15,976,696.67
11/18/22	11/21/22	Sell Long	50,000,000.000	U.S. TREASURY BILL MAT 11/22/22	Cpn	912796YR4	49,853,456.25	141,670.83	(579.86)	0.00	49,995,127.08
11/25/22	11/28/22	Sell Long	3,000,000.000	U.S. TREASURY BILL MAT 11/29/22	Cpn	912796YS2	2,994,691.67	5,025.00	(4.16)	0.00	2,999,716.67
11/25/22	11/28/22	Sell Long	41,000,000.000	U.S. TREASURY BILL MAT 11/29/22	Cpn	912796YS2	40,941,262.94	54,864.83	46.69	0.00	40,996,127.77
11/28/22	11/28/22	Sell Long	9,000,000.000	FHLB DISCOUNT NOTE MAT 12/01/22	Cpn	313385R57	8,984,737.50	12,600.00	37.50	0.00	8,997,337.50

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Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
11/25/22	11/28/22	Sell Long	30,000,000.000	TVA DISCOUNT NOTE MAT 11/30/22 Cpn 880590R48	29,952,333.34	41,416.66	(333.33)	0.00	29,993,750.00
11/25/22	11/28/22	Sell Long	50,000,000.000	TVA DISCOUNT NOTE MAT 11/30/22 Cpn 880590R48	49,920,555.56	69,027.78	(555.56)	0.00	49,989,583.33
			259,000,000.000		258,492,945.04	450,060.65	(2,912.04)	0.00	258,943,005.69
11/10/22	11/10/22	Pay Princpl	6,523.119	CRVNA 2021-P2 A2 CAR MAT 07/10/24 Cpn 0.30 14687TAB3	6,523.12		0.00	0.34	6,523.12
11/10/22	11/10/22	Pay Princpl	482,489.910	CRVNA 2021-P4 A2 CAR MAT 04/10/25 Cpn 0.82 14687KAB2	482,489.91		25.96	0.00	482,489.91
11/14/22	11/14/22	Pay Princpl	196,760.432	CCG 2022-1 A1 EQP 144A MAT 06/14/23 Cpn 1.84 12511JAA3	196,760.43		(0.00)	0.00	196,760.43
11/14/22	11/14/22	Pay Princpl	820,661.404	MMAF 2022-A A1 EQP 144A MAT 05/03/23 Cpn 1.48 55317RAA0	820,661.40		(0.00)	0.00	820,661.40
11/15/22	11/15/22	Pay Princpl	357,919.251	ALLYA 2022-1 A1 CAR MAT 05/15/23 Cpn 1.36 02008JAA4	357,919.25		(0.00)	0.00	357,919.25
11/15/22	11/15/22	Pay Princpl	392,027.430	ARIFL 2022-A A1 FLEET 144A MAT 04/17/23 Cpn 1.49 00217QAA9	392,027.43		0.00	0.00	392,027.43
11/15/22	11/15/22	Pay Princpl	103,946.082	CARMX 2019-2 A3 CAR MAT 03/15/24 Cpn 2.68 14316LAC7	103,946.08		0.00	(252.35)	103,946.08
11/15/22	11/15/22	Pay Princpl	247,847.084	CARMAX 2019-3 A3 CAR MAT 08/15/24 Cpn 2.18 14315PAD7	247,847.08		0.00	(1,086.61)	247,847.08
11/15/22	11/15/22	Pay Princpl	235,419.843	CARMX 2021-4 A2A CAR MAT 11/15/24 Cpn 0.24 14317JAB3	235,419.84		0.00	1.03	235,419.84
11/15/22	11/15/22	Pay Princpl	1,066,177.201	CARMX 2022-3 A1 CAR MAT 07/17/23 Cpn 2.66 14318MAA7	1,066,177.20		(0.00)	0.00	1,066,177.20

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Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
11/15/22	11/15/22	Pay Princpl	297,071.848	CNH 2021-C A2 EQP MAT 01/15/25 Cpn 0.33 12598LAB2	297,071.85		0.00	10.24	297,071.85
11/15/22	11/15/22	Pay Princpl	994,748.404	COPAR 2022-2 A1 CAR MAT 08/15/23 Cpn 2.87 14043GAA2	994,748.40		(0.00)	0.00	994,748.40
11/15/22	11/15/22	Pay Princpl	1,564,647.411	FORDO 2022-C A1 CAR MAT 10/15/23 Cpn 3.63 34535AAA8	1,564,647.41		(0.00)	0.00	1,564,647.41
11/15/22	11/15/22	Pay Princpl	610,232.808	GALC 2022-1 A1 EQP 144A MAT 10/16/23 Cpn 4.34 39154TBU1	610,232.81		0.00	0.00	610,232.81
11/15/22	11/15/22	Pay Princpl	651,760.585	HALST 2020-B A3 CAR LEASE 144A MAT 09/15/23 Cpn 0.51 44891PAC8	651,760.59		(16.22)	0.00	651,760.59
11/15/22	11/15/22	Pay Princpl	401,580.901	HALST 2021-C A2 CAR LEASE 144A MAT 01/16/24 Cpn 0.24 44933MAB7	401,580.90		0.00	4.78	401,580.90
11/15/22	11/15/22	Pay Princpl	97,015.584	HALST 2021-C A2 CAR LEASE 144A MAT 01/16/24 Cpn 0.24 44933MAB7	97,015.58		492.19	0.00	97,015.58
11/15/22	11/15/22	Pay Princpl	391,597.681	HONDA 2021-2 A2 CAR MAT 11/15/23 Cpn 0.17 43811JAB3	391,597.68		0.00	0.53	391,597.68
11/15/22	11/15/22	Pay Princpl	401,035.744	HAROT 2022-1 A2 CAR MAT 10/15/24 Cpn 1.44 43815BAB6	401,035.74		20.66	0.00	401,035.74
11/15/22	11/15/22	Pay Princpl	118,681.224	HYUNDAI 2021-A A2 CAR MAT 02/15/24 Cpn 0.23 44933LAB9	118,681.22		0.00	1.61	118,681.22
11/15/22	11/15/22	Pay Princpl	244,074.015	KUBOTA 2020-1A A3 EQP 144A MAT 03/15/24 Cpn 1.96 50117WAC8	244,074.02		0.00	(2,045.84)	244,074.02
11/15/22	11/15/22	Pay Princpl	58,555.874	KUBOTA 2020-1A A3 EQP 144A MAT 03/15/24 Cpn 1.96 50117WAC8	58,555.87		0.00	(454.17)	58,555.87
11/15/22	11/15/22	Pay Princpl	475,819.157	KCOT 2022-2A A1 EQP 144A MAT 07/17/23 Cpn 2.60 50117JAA1	475,819.16		0.00	0.00	475,819.16

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Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
11/15/22	11/15/22	Pay Princpl	493,942.025	MERCEDES 2021-B A2 LEASE MAT 01/16/24 Cpn 0.22 58769KAC8	493,942.03		0.00	9.55	493,942.03
11/15/22	11/15/22	Pay Princpl	1,065,137.428	NAROT 2022-B A1 CAR MAT 10/16/23 Cpn 3.69 65480JAA8	1,065,137.43		0.00	0.00	1,065,137.43
11/15/22	11/15/22	Pay Princpl	42,846.119	TOYOTA 2019-C A3 CAR MAT 09/15/23 Cpn 1.91 89238UAD2	42,846.12		0.00	0.00	42,846.12
11/15/22	11/15/22	Pay Princpl	4,296.329	TOYOTA 2019-C A3 CAR MAT 09/15/23 Cpn 1.91 89238UAD2	4,296.33		0.00	0.00	4,296.33
11/15/22	11/15/22	Pay Princpl	269,724.229	WORLD OMNI 2021-B A2 CAR MAT 07/15/24 Cpn 0.20 98163LAB6	269,724.23		0.00	2.17	269,724.23
11/15/22	11/15/22	Pay Princpl	87,208.263	WOLS 2022-A A2 LEASE MAT 10/15/24 Cpn 2.63 98163NAB2	87,208.26		1.65	0.00	87,208.26
11/16/22	11/16/22	Pay Princpl	240,905.106	GMCAR 2021-A A2 CAR MAT 06/17/24 Cpn 0.27 380149AB0	240,905.11		0.00	2.67	240,905.11
11/16/22	11/16/22	Pay Princpl	2,354,402.084	GMCAR 2022-4 A1 CAR MAT 10/16/23 Cpn 3.62 36265QAA4	2,354,402.08		(0.00)	0.00	2,354,402.08
11/18/22	11/18/22	Pay Princpl	210,575.771	HONDA 2021-3 A2 CAR MAT 02/20/24 Cpn 0.20 43815EAB0	210,575.77		0.00	6.72	210,575.77
11/20/22	11/20/22	Pay Princpl	1,134,937.895	GMALT 2021-1 A3 LEASE MAT 02/20/24 Cpn 0.26 36261RAC2	1,134,937.90		8,217.74	0.00	1,134,937.90
11/20/22	11/20/22	Pay Princpl	38,472.471	GMALT 2021-1 A3 LEASE MAT 02/20/24 Cpn 0.26 36261RAC2	38,472.47		278.57	0.00	38,472.47
11/20/22	11/20/22	Pay Princpl	672,515.319	HPEFS 2022-3A A1 EQP 144A MAT 10/20/23 Cpn 4.33 403951AA4	672,515.32		0.00	0.00	672,515.32
11/20/22	11/20/22	Pay Princpl	357,642.241	SRT 2021-C A2 LEASE 144A MAT 04/22/24 Cpn 0.29 80286CAB6	357,642.24		0.00	6.54	357,642.24

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Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
11/20/22	11/20/22	Pay Princpl	130,173.759	TESLA 2021-B A2 LEASE 144A MAT 09/22/25 Cpn 0.36 88161KAB1	130,173.76		0.00	6.64	130,173.76
11/20/22	11/20/22	Pay Princpl	494,150.643	VALET 2021-1 A2 CAR MAT 10/21/24 Cpn 0.49 92868KAB9	494,150.64		18.06	0.00	494,150.64
11/20/22	11/20/22	Pay Princpl	229,459.303	VERIZON 2019-C A1A PHONE MAT 04/22/24 Cpn 1.94 92348AAA3	229,459.30		0.00	(6.60)	229,459.30
11/20/22	11/20/22	Pay Princpl	112,435.058	VERIZON 2019-C A1A PHONE MAT 04/22/24 Cpn 1.94 92348AAA3	112,435.06		0.00	(3.12)	112,435.06
11/21/22	11/21/22	Pay Princpl	264,270.381	EFF 2022-1 A1 FLEET 144A MAT 04/20/23 Cpn 1.49 29375JAA2	264,270.38		(0.00)	0.00	264,270.38
11/21/22	11/21/22	Pay Princpl	803,346.263	EFF 2022-2 A1 FLEET 144A MAT 06/20/23 Cpn 2.76 29374JAA3	803,346.26		(0.00)	0.00	803,346.26
11/21/22	11/21/22	Pay Princpl	644,868.134	EFF 2022-3 A1 FLEET 144A MAT 08/20/23 Cpn 3.61 29374FAA1	644,868.13		(0.00)	0.00	644,868.13
11/21/22	11/21/22	Pay Princpl	1,299,834.431	GMALT 2022-3 A1 LEASE MAT 08/21/23 Cpn 3.07 380130AA2	1,299,834.43		(0.00)	0.00	1,299,834.43
11/21/22	11/21/22	Pay Princpl	522,199.425	HPEFS 2022-2A A1 EQP 144A MAT 05/22/23 Cpn 1.91 40441TAA7	522,199.43		0.01	0.00	522,199.43
11/21/22	11/21/22	Pay Princpl	439,554.862	VWALT 2022-A A1 LEASE MAT 06/20/23 Cpn 1.72 92868AAA3	439,554.86		(0.00)	0.00	439,554.86
11/22/22	11/22/22	Pay Princpl	622,672.798	DEFT 2022-2 A1 EQP 144A MAT 07/24/23 Cpn 3.06 24702CAA2	622,672.80		0.00	0.00	622,672.80
11/25/22	11/25/22	Pay Princpl	467,363.911	BMW 2021-2 A2 LEASE MAT 11/27/23 Cpn 0.19 09690AAB9	467,363.91		0.00	7.26	467,363.91
11/25/22	11/25/22	Pay Princpl	49,397.929	BMW 2019-A A3 CAR MAT 01/25/24 Cpn 1.92 05588CAC6	49,397.93		0.00	(22.81)	49,397.93

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Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
11/25/22	11/25/22	Pay Princpl	369,830.981	BMWOT 2022-A A1 CAR MAT 05/25/23 Cpn 1.35 05602RAA9	369,830.98		(0.00)	0.00	369,830.98
11/25/22	11/25/22	Pay Princpl	580.890	FHMS KF36 A MAT 08/25/24 Cpn 4.14 3137FBAR7	580.89		0.00	0.18	580.89
11/25/22	11/25/22	Pay Princpl	30,729.820	FHMS KF38 A MAT 09/25/24 Cpn 4.13 3137FBUC8	30,729.82		0.00	15.50	30,729.82
11/01/22	11/25/22	Pay Princpl	611,902.708	FHMS KS01 A2 CMBS MAT 01/25/23 Cpn 2.52 3137B1U75	611,902.71		0.00	(1,939.80)	611,902.71
			24,281,969.566		24,281,969.55		9,038.59	(5,735.54)	24,281,969.55
11/01/22	11/01/22	Mature Long	22,000,000.000	U.S. TREASURY BILL MAT 11/01/22 Cpn 912796YG8	21,968,925.18	31,074.82	0.00	0.00	22,000,000.00
11/01/22	11/01/22	Mature Long	1,250,000.000	CA LOS ANGELES MUNI IMPT COR MAT 11/01/22 Cpn 0.32 5445872Q0	1,250,000.00		0.00	0.00	1,250,000.00
11/02/22	11/02/22	Mature Long	38,000,000.000	TVA DISCOUNT NOTE MAT 11/02/22 Cpn 880590M84	37,934,608.33	65,391.67	0.00	0.00	38,000,000.00
11/07/22	11/07/22	Mature Long	7,500,000.000	SWEDBANK NY YCD MAT 11/07/22 Cpn 2.50 87019WCW	7,500,000.00		0.00	0.00	7,500,000.00
11/09/22	11/09/22	Mature Long	4,000,000.000	CA SAN JOSE FIN AUTH LEASE RE MAT 11/09/22 Cpn 2.85 79815WDD7	4,000,000.00		0.00	0.00	4,000,000.00
11/10/22	11/10/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 11/10/22 Cpn 912796W54	49,915,666.67	84,333.33	0.00	0.00	50,000,000.00
11/14/22	11/14/22	Mature Long	7,500,000.000	BAYERISCHE LANDESBANK YCD MAT 11/14/22 Cpn 2.84 0727MCXH5	7,500,000.00		0.00	0.00	7,500,000.00
11/14/22	11/14/22	Mature Long	25,000,000.000	FHLB DISCOUNT NOTE MAT 11/14/22 Cpn 313385P42	24,944,388.89	55,611.11	0.00	0.00	25,000,000.00

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Tr Date	St Date	Transaction Type	Units	Description		Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
11/14/22	11/14/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/14/22 Cpn	313385P42	49,888,777.78	111,222.22	0.00	0.00	50,000,000.00
11/14/22	11/14/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/14/22 Cpn	313385P42	49,888,777.78	111,222.22	0.00	0.00	50,000,000.00
11/15/22	11/15/22	Mature Long	20,000,000.000	U.S. TREASURY BILL MAT 11/15/22 Cpn	912796YQ6	19,953,762.50	46,237.50	0.00	0.00	20,000,000.00
11/15/22	11/15/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 11/15/22 Cpn	912796YQ6	49,884,406.25	115,593.75	0.00	0.00	50,000,000.00
11/15/22	11/15/22	Mature Long	15,000,000.000	U.S. TREASURY BILL MAT 11/15/22 Cpn	912796YQ6	14,993,316.67	6,683.33	0.00	0.00	15,000,000.00
11/15/22	11/15/22	Mature Long	10,000,000.000	FHLB DISCOUNT NOTE MAT 11/15/22 Cpn	313385P59	9,999,000.00	1,000.00	0.00	0.00	10,000,000.00
11/15/22	11/15/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/15/22 Cpn	313385P59	49,995,000.00	5,000.00	0.00	0.00	50,000,000.00
11/15/22	11/15/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/15/22 Cpn	313385P59	49,995,000.00	5,000.00	0.00	0.00	50,000,000.00
11/15/22	11/15/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/15/22 Cpn	313385P59	49,995,000.00	5,000.00	0.00	0.00	50,000,000.00
11/15/22	11/15/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/15/22 Cpn	313385P59	49,995,000.00	5,000.00	0.00	0.00	50,000,000.00
11/15/22	11/15/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/15/22 Cpn	313385P59	49,995,000.00	5,000.00	0.00	0.00	50,000,000.00
11/15/22	11/15/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/15/22 Cpn	313385P59	49,995,000.00	5,000.00	0.00	0.00	50,000,000.00
11/15/22	11/15/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/15/22 Cpn	313385P59	49,995,000.00	5,000.00	0.00	0.00	50,000,000.00

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11/16/22	11/16/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/16/22 Cpn	313385P67	49,994,888.89	5,111.11	0.00	0.00	50,000,000.00
11/16/22	11/16/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/16/22 Cpn	313385P67	49,994,888.89	5,111.11	0.00	0.00	50,000,000.00
11/16/22	11/16/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/16/22 Cpn	313385P67	49,994,888.89	5,111.11	0.00	0.00	50,000,000.00
11/16/22	11/16/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/16/22 Cpn	313385P67	49,994,888.89	5,111.11	0.00	0.00	50,000,000.00
11/16/22	11/16/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/16/22 Cpn	313385P67	49,994,888.89	5,111.11	0.00	0.00	50,000,000.00
11/16/22	11/16/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/16/22 Cpn	313385P67	49,994,888.89	5,111.11	0.00	0.00	50,000,000.00
11/16/22	11/16/22	Mature Long	50,000,000.000	FHLB DISCOUNT NOTE MAT 11/16/22 Cpn	313385P67	49,994,888.89	5,111.11	0.00	0.00	50,000,000.00
11/16/22	11/16/22	Mature Long	15,000,000.000	TVA DISCOUNT NOTE MAT 11/16/22 Cpn	880590P65	14,991,875.00	8,125.00	0.00	0.00	15,000,000.00
11/17/22	11/17/22	Mature Long	30,000,000.000	U.S. TREASURY BILL MAT 11/17/22 Cpn	912796W62	29,991,622.50	8,377.50	0.00	0.00	30,000,000.00
11/17/22	11/17/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 11/17/22 Cpn	912796W62	49,986,037.50	13,962.50	0.00	0.00	50,000,000.00
11/17/22	11/17/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 11/17/22 Cpn	912796W62	49,986,037.50	13,962.50	0.00	0.00	50,000,000.00
11/17/22	11/17/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 11/17/22 Cpn	912796W62	49,986,037.50	13,962.50	0.00	0.00	50,000,000.00
11/17/22	11/17/22	Mature Long	50,000,000.000	U.S. TREASURY BILL MAT 11/17/22 Cpn	912796W62	49,986,037.50	13,962.50	0.00	0.00	50,000,000.00

Account Name: L.A. CARE HEALTH PLAN

11/01/2022 through 11/30/2022

Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
11/18/22	11/18/22	Mature Long	7,500,000.000	CREDIT AGRICOLE NY YCD MAT 11/18/22 Cpn 2.09 22536APW8	7,500,000.00		0.00	0.00	7,500,000.00
11/18/22	11/18/22	Mature Long	7,500,000.000	JOHN DEERE CANADA CP 144A MAT 11/18/22 Cpn 24423JLJ4	7,479,277.08	20,722.92	0.00	0.00	7,500,000.00
11/22/22	11/22/22	Mature Long	7,000,000.000	CENTURY HSG TXB CP MAT 11/22/22 Cpn 4.20 15654WAA4	7,000,000.00		0.00	0.00	7,000,000.00
11/30/22	11/30/22	Mature Long	7,500,000.000	VA SENTARA HEALTHCARE CP TX MAT 11/30/22 Cpn 3.70 81727NKD2	7,500,000.00		0.00	0.00	7,500,000.00
			1,324,750,000.000		1,323,957,776.86	792,223.15	0.00	0.00	1,324,750,000.00
11/01/22	11/01/22	Withdrawal	(50,000,000.000)	WD MAT Cpn USD	(50,000,000.00)		(50,000,000.00)	0.00	(50,000,000.00)
11/01/22	11/01/22	Withdrawal	(4,226.440)	CUSTODY FEE MAT Cpn USD	(4,226.44)		(4,226.44)	0.00	(4,226.44)
11/07/22	11/07/22	Withdrawal	(40,000,000.000)	WD MAT Cpn USD	(40,000,000.00)		(40,000,000.00)	0.00	(40,000,000.00)
11/10/22	11/10/22	Withdrawal	(35,000,000.000)	WD MAT Cpn USD	(35,000,000.00)		(35,000,000.00)	0.00	(35,000,000.00)
11/15/22	11/15/22	Withdrawal	(30,000,000.000)	WD MAT Cpn USD	(30,000,000.00)		(30,000,000.00)	0.00	(30,000,000.00)
11/16/22	11/16/22	Withdrawal	(75,000,000.000)	WD MAT Cpn USD	(75,000,000.00)		(75,000,000.00)	0.00	(75,000,000.00)
11/17/22	11/17/22	Withdrawal	(265,000,000.000)	WD MAT Cpn USD	(265,000,000.00)		(265,000,000.00)	0.00	(265,000,000.00)
11/17/22	11/17/22	Withdrawal	(30,000,000.000)	WD MAT Cpn USD	(30,000,000.00)		(30,000,000.00)	0.00	(30,000,000.00)

Account Name: L.A. CARE HEALTH PLAN

11/01/2022 through 11/30/2022

Tr Date	St Date	Transaction Type	Units	Description			Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
11/21/22	11/21/22	Withdrawal	(50,000,000.000)	WD MAT	Cpn	USD	(50,000,000.00)		(50,000,000.00)	0.00	(50,000,000.00)
11/23/22	11/23/22	Withdrawal	(30,000,000.000)	WD MAT	Cpn	USD	(30,000,000.00)		(30,000,000.00)	0.00	(30,000,000.00)
11/28/22	11/28/22	Withdrawal	(170,000,000.000)	WD MAT	Cpn	USD	(170,000,000.00)		(170,000,000.00)	0.00	(170,000,000.00)
			(775,004,226.440)				(775,004,226.44)		(775,004,226.44)	0.00	(775,004,226.44)

Account Name: L.A. CARE HEALTH PLAN-LOW DURATION PORT

11/01/2022 through 11/30/2022

Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
11/01/22	11/02/22	Buy	20,000.000	U.S. TREASURY NOTE MAT 10/31/27 Cpn 4.13 91282CFU0	(20,007.81)	(4.56)	0.00	0.00	(20,012.37)
11/04/22	11/07/22	Buy	110,000.000	U.S. TREASURY NOTE MAT 10/31/27 Cpn 4.13 91282CFU0	(108,925.78)	(87.74)	0.00	0.00	(109,013.52)
			130,000.000		(128,933.59)	(92.30)	0.00	0.00	(129,025.89)
11/01/22	11/01/22	Coupon		CA STATE UNIVERSITY SYSTEM WI MAT 11/01/22 Cpn 3.05 13077DFD9		5,344.50	0.00	0.00	5,344.50
11/01/22	11/01/22	Coupon		CA LOS ANGELES MUNI IMPT COR MAT 11/01/24 Cpn 0.89 544587Y44		2,225.00	0.00	0.00	2,225.00
11/01/22	11/01/22	Coupon		CA LOS ANGELES MUNI IMPT COR MAT 11/01/25 Cpn 0.95 5445872T4		1,704.60	0.00	0.00	1,704.60
11/07/22	11/07/22	Coupon		FNMA MAT 11/07/25 Cpn 0.50 3135G06G3		1,025.00	0.00	0.00	1,025.00
11/15/22	11/15/22	Coupon		CARMX 2020-1 A3 CAR MAT 12/16/24 Cpn 1.89 14315XAC2		323.44	0.00	0.00	323.44
11/15/22	11/15/22	Coupon		CARMX 2021-2 A3 AUTO MAT 02/17/26 Cpn 0.52 14314QAC8		411.67	0.00	0.00	411.67
11/15/22	11/15/22	Coupon		CARMX 2021-3 A3 CAR MAT 06/15/26 Cpn 0.55 14317DAC4		435.42	0.00	0.00	435.42
11/15/22	11/15/22	Coupon		CAPITAL ONE 2020-1 A3 CAR MAT 11/15/24 Cpn 1.60 14043MAC5		213.65	0.00	0.00	213.65
11/15/22	11/15/22	Coupon		FORDL 2021-B A3 LEASE MAT 10/15/24 Cpn 0.37 345329AC0		277.50	0.00	0.00	277.50
11/15/22	11/15/22	Coupon		HONDA 2019-3 A3 CAR MAT 08/15/23 Cpn 1.78 43815NAC8		16.44	0.00	0.00	16.44

Account Name: L.A. CARE HEALTH PLAN-LOW DURATION PORT

11/01/2022 through 11/30/2022

Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
11/15/22	11/15/22	Coupon		INTER-AMERICAN DEVELOPMENT MAT 11/15/23 Cpn 0.25 4581X0DP0		700.00	0.00	0.00	700.00
11/15/22	11/15/22	Coupon		JOHN DEERE 2020-A A3 EQP MAT 08/15/24 Cpn 1.10 47789KAC7		208.74	0.00	0.00	208.74
11/15/22	11/15/22	Coupon		JOHN DEERE 2021-A A3 EQP MAT 09/15/25 Cpn 0.36 47788UAC6		165.00	0.00	0.00	165.00
11/15/22	11/15/22	Coupon		KUBOTA 2021-2A A3 EQP 144A MAT 11/17/25 Cpn 0.56 50117XAE2		443.33	0.00	0.00	443.33
11/15/22	11/15/22	Coupon		CA LOS ANGELES DEPT AIRPORTS MAT 05/15/23 Cpn 2.79 544445BC2		5,518.15	0.00	0.00	5,518.15
11/15/22	11/15/22	Coupon		CA LOS ANGELES DEPT AIRPORTS MAT 05/15/23 Cpn 2.79 544445BC2		6,565.90	0.00	0.00	6,565.90
11/15/22	11/15/22	Coupon		MERCEDES 2021-B A3 LEASE MAT 11/15/24 Cpn 0.40 58769KAD6		200.00	0.00	0.00	200.00
11/15/22	11/15/22	Coupon		TOYOTA 2019-C A3 CAR MAT 09/15/23 Cpn 1.91 89238UAD2		6.53	0.00	0.00	6.53
11/15/22	11/15/22	Coupon		CA UNIVERSITY OF CALIFORNIA T MAT 05/15/25 Cpn 0.93 91412HFM0		3,498.75	0.00	0.00	3,498.75
11/15/22	11/15/22	Coupon		WORLD OMNI 2021-A A3 LEASE MAT 08/15/24 Cpn 0.42 98163JAC9		245.00	0.00	0.00	245.00
11/16/22	11/16/22	Coupon		GMCAR 2021-2 A3 CAR MAT 04/16/26 Cpn 0.51 380149AC8		93.50	0.00	0.00	93.50
11/20/22	11/20/22	Coupon		GMALT 2021-2 A LEASE MAT 05/20/25 Cpn 0.41 380144AD7		256.25	0.00	0.00	256.25
11/20/22	11/20/22	Coupon		SRT 2021-C A3 LEASE 144A MAT 03/20/25 Cpn 0.50 80286CAC4		208.33	0.00	0.00	208.33

Account Name: L.A. CARE HEALTH PLAN-LOW DURATION PORT

11/01/2022 through 11/30/2022

Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
11/20/22	11/20/22	Coupon		TESLA 2021-B A2 LEASE 144A MAT 09/22/25 Cpn 0.36 88161KAB1		84.26	0.00	0.00	84.26
11/20/22	11/20/22	Coupon		VERIZON 2020-B A PHONE MAT 02/20/25 Cpn 0.47 92290BAA9		283.40	0.00	0.00	283.40
11/24/22	11/24/22	Coupon		INTER-AMERICAN DEVELOPMENT MAT 05/24/23 Cpn 0.50 4581X0DM7		750.00	0.00	0.00	750.00
11/24/22	11/24/22	Coupon		INTL BANK RECON & DEVELOP MAT 11/24/23 Cpn 0.25 459058JM6		725.00	0.00	0.00	725.00
11/25/22	11/25/22	Coupon		BMW 2021-1 A4 LEASE MAT 07/25/24 Cpn 0.37 05591RAD6		92.50	0.00	0.00	92.50
11/25/22	11/25/22	Coupon		BMW 2019-A A3 CAR MAT 01/25/24 Cpn 1.92 05588CAC6		18.82	0.00	0.00	18.82
11/25/22	11/25/22	Coupon		FHLMC C 11/25/22 Q MAT 11/25/24 Cpn 0.45 3134GXDZ4		1,147.50	0.00	0.00	1,147.50
11/01/22	11/25/22	Coupon		FHMS K029 A2 CMBS MAT 02/25/23 Cpn 3.32 3137B36J2		576.54	0.00	0.00	576.54
11/01/22	11/25/22	Coupon		FHMS K029 A2 CMBS MAT 02/25/23 Cpn 3.32 3137B36J2		912.86	0.00	0.00	912.86
11/01/22	11/25/22	Coupon		FHMS K029 A2 CMBS MAT 02/25/23 Cpn 3.32 3137B36J2		432.41	0.00	0.00	432.41
11/01/22	11/25/22	Coupon		FHMS K031 A2 MAT 04/25/23 Cpn 3.30 3137B3NX2		2,114.09	0.00	0.00	2,114.09
11/01/22	11/25/22	Coupon		FHMS K033 A2 MAT 07/25/23 Cpn 3.06 3137B4WB8		2,091.00	0.00	0.00	2,091.00
11/01/22	11/25/22	Coupon		FHMS K034 A2 MAT 07/25/23 Cpn 3.53 3137B5JM6		1,411.85	0.00	0.00	1,411.85

Account Name: L.A. CARE HEALTH PLAN-LOW DURATION PORT

11/01/2022 through 11/30/2022

Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
11/01/22	11/25/22	Coupon		FHMS K725 AM CMBS MAT 02/25/24 Cpn 3.10 3137BWWE		2,095.20	0.00	0.00	2,095.20
11/01/22	11/25/22	Coupon		FHMS K726 AM CMBS MAT 04/25/24 Cpn 2.99 3137BYPR5		1,417.88	0.00	0.00	1,417.88
11/01/22	11/25/22	Coupon		FHMS KJ28 A1 MAT 02/25/25 Cpn 1.77 3137FREB3		128.06	0.00	0.00	128.06
11/01/22	11/25/22	Coupon		FHMS KJ30 A1 CMBS MAT 01/25/25 Cpn 0.53 3137FUZN7		24.44	0.00	0.00	24.44
11/01/22	11/25/22	Coupon		FHMS KS01 A2 CMBS MAT 01/25/23 Cpn 2.52 3137B1U75		65.16	0.00	0.00	65.16
11/01/22	11/25/22	Coupon		FHMS KSMC A2 CMBS MAT 01/25/23 Cpn 2.62 3137B04Y7		1,939.46	0.00	0.00	1,939.46
11/30/22	11/30/22	Coupon		U.S. TREASURY NOTE MAT 05/31/25 Cpn 0.25 912828ZT0		456.25	0.00	0.00	456.25
11/30/22	11/30/22	Coupon		U.S. TREASURY NOTE MAT 05/31/26 Cpn 0.75 91282CCF6		1,762.50	0.00	0.00	1,762.50
11/30/22	11/30/22	Coupon		U.S. TREASURY NOTE MAT 11/30/25 Cpn 0.38 91282CAZ4		1,143.75	0.00	0.00	1,143.75
11/30/22	11/30/22	Coupon		U.S. TREASURY NOTE MAT 11/30/25 Cpn 0.38 91282CAZ4		7,040.63	0.00	0.00	7,040.63
11/30/22	11/30/22	Coupon		U.S. TREASURY NOTE MAT 11/30/24 Cpn 1.50 912828YV6		2,287.50	0.00	0.00	2,287.50
11/30/22	11/30/22	Coupon		U.S. TREASURY NOTE MAT 05/31/27 Cpn 2.63 91282CET4		4,515.00	0.00	0.00	4,515.00
11/30/22	11/30/22	Coupon		U.S. TREASURY NOTE MAT 05/31/27 Cpn 2.63 91282CET4		5,066.25	0.00	0.00	5,066.25

Account Name: L.A. CARE HEALTH PLAN-LOW DURATION PORT

11/01/2022 through 11/30/2022

Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
11/30/22	11/30/22	Coupon		U.S. TREASURY NOTE MAT 05/31/24 Cpn 2.00 912828XT2		31,100.00	0.00	0.00	31,100.00
11/30/22	11/30/22	Coupon		U.S. TREASURY NOTE MAT 05/31/24 Cpn 2.00 912828XT2		9,000.00	0.00	0.00	9,000.00
						108,769.01	0.00	0.00	108,769.01
11/01/22	11/01/22	Income	2,119.210	STIF INT MAT Cpn USD		2,119.21	0.00	0.00	2,119.21
11/30/22	11/30/22	Income	25,300.870	STIF INT MAT Cpn USD		25,300.87	0.00	0.00	25,300.87
			27,420.080			27,420.08	0.00	0.00	27,420.08
11/01/22	11/01/22	Call	105,000.000	CA ST HSG FIN AGY REV-TXBL MAT 08/01/23 Cpn 2.93 13034PZM2	105,000.00	768.60	0.00	338.20	105,768.60
11/15/22	11/15/22	Pay Princpl	20,122.759	CARMX 2020-1 A3 CAR MAT 12/16/24 Cpn 1.89 14315XAC2	20,122.76		0.00	(177.20)	20,122.76
11/15/22	11/15/22	Pay Princpl	18,653.434	CAPITAL ONE 2020-1 A3 CAR MAT 11/15/24 Cpn 1.60 14043MAC5	18,653.43		0.00	1.06	18,653.43
11/15/22	11/15/22	Pay Princpl	11,085.745	HONDA 2019-3 A3 CAR MAT 08/15/23 Cpn 1.78 43815NAC8	11,085.75		0.00	0.00	11,085.75
11/15/22	11/15/22	Pay Princpl	48,420.560	JOHN DEERE 2020-A A3 EQP MAT 08/15/24 Cpn 1.10 47789KAC7	48,420.56		0.00	0.80	48,420.56
11/15/22	11/15/22	Pay Princpl	38,002.970	JOHN DEERE 2021-A A3 EQP MAT 09/15/25 Cpn 0.36 47788UAC6	38,002.97		0.00	4.11	38,002.97

Account Name: L.A. CARE HEALTH PLAN-LOW DURATION PORT

11/01/2022 through 11/30/2022

Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
11/15/22	11/15/22	Pay Princpl	4,101.042	TOYOTA 2019-C A3 CAR MAT 09/15/23 Cpn 1.91 89238UAD2	4,101.04		0.00	(0.00)	4,101.04
11/20/22	11/20/22	Pay Princpl	17,071.968	TESLA 2021-B A2 LEASE 144A MAT 09/22/25 Cpn 0.36 88161KAB1	17,071.97		0.00	0.87	17,071.97
11/20/22	11/20/22	Pay Princpl	104,848.352	VERIZON 2020-B A PHONE MAT 02/20/25 Cpn 0.47 92290BAA9	104,848.35		0.00	(72.58)	104,848.35
11/25/22	11/25/22	Pay Princpl	11,761.410	BMW 2019-A A3 CAR MAT 01/25/24 Cpn 1.92 05588CAC6	11,761.41		0.00	0.03	11,761.41
11/01/22	11/25/22	Pay Princpl	20,338.579	FHMS K029 A2 CMBS MAT 02/25/23 Cpn 3.32 3137B36J2	20,338.58		0.00	(85.64)	20,338.58
11/01/22	11/25/22	Pay Princpl	32,202.751	FHMS K029 A2 CMBS MAT 02/25/23 Cpn 3.32 3137B36J2	32,202.75		0.00	(135.37)	32,202.75
11/01/22	11/25/22	Pay Princpl	15,253.935	FHMS K029 A2 CMBS MAT 02/25/23 Cpn 3.32 3137B36J2	15,253.93		0.00	(55.88)	15,253.93
11/01/22	11/25/22	Pay Princpl	12,918.120	FHMS K031 A2 MAT 04/25/23 Cpn 3.30 3137B3NX2	12,918.12		0.00	(129.56)	12,918.12
11/01/22	11/25/22	Pay Princpl	1,007.011	FHMS K034 A2 MAT 07/25/23 Cpn 3.53 3137B5JM6	1,007.01		0.00	(16.32)	1,007.01
11/01/22	11/25/22	Pay Princpl	77,512.601	FHMS KJ28 A1 MAT 02/25/25 Cpn 1.77 3137FREB3	77,512.60		0.00	0.14	77,512.60
11/01/22	11/25/22	Pay Princpl	817.870	FHMS KJ30 A1 CMBS MAT 01/25/25 Cpn 0.53 3137FUZN7	817.87		0.00	0.01	817.87

Account Name: L.A. CARE HEALTH PLAN-LOW DURATION PORT

11/01/2022 through 11/30/2022

Tr Date	St Date	Transaction Type	Units	Description	Proceeds / (Cost)	Accrued Interest (Purch) or Sold	G/L < 1 Yr Amort Cost	G/L > 1 Yr Amort Cost	Total Amount
Fixed Income - cont.									
11/01/22	11/25/22	Pay Princpl	31,003.075	FHMS KS01 A2 CMBS MAT 01/25/23 Cpn 2.52 3137B1U75	31,003.08		0.00	(27.27)	31,003.08
			465,122.182		465,122.18		0.00	(692.78)	465,122.18
11/01/22	11/01/22	Mature Long	350,000.000	CA STATE UNIVERSITY SYSTEM WI MAT 11/01/22 Cpn 3.05 13077DFD9	350,000.00		0.00	0.00	350,000.00

LA CARE

Cash Activity by Transaction Type GAAP Basis

Accounting Period From 11/01/2022 To 11/30/2022

Cash Date	Trade/Ex-Date	Settle/Pay Date	Custodian	Cusip	Description	Quantity	Income Amount	Principal Amount	Contributions/ Withdrawals	Total Amount
BUY										
11/07/22	11/03/22	11/07/22	BKAMER19	31677QBR9	FIFTH THIRD BANK	5,000,000.00	(30,000.00)	(4,383,800.00)	0.00	(4,413,800.00)
11/15/22	11/15/22	11/15/22	BKAMER19	09248U718	BLACKROCK TREASURY TRUST	353,484.71	0.00	(353,484.71)	0.00	(353,484.71)
11/21/22	11/17/22	11/21/22	BKAMER19	539830BV0	LOCKHEED MARTIN CORP	5,000,000.00	(19,125.00)	(5,105,300.00)	0.00	(5,124,425.00)
TOTAL BUY						10,353,484.71	(49,125.00)	(9,842,584.71)	0.00	(9,891,709.71)
DIVIDEND										
11/01/22	11/01/22	11/01/22	BKAMER19	09248U718	BLACKROCK TREASURY TRUST	2,203,879.36	5,121.02	0.00	0.00	5,121.02
TOTAL DIVIDEND						2,203,879.36	5,121.02	0.00	0.00	5,121.02
INTEREST										
11/01/22	11/01/22	11/01/22	BKAMER19	26884ABF9	ERP OPERATING LP	0.00	17,841.00	0.00	0.00	17,841.00
11/01/22	11/01/22	11/01/22	BKAMER19	68609TN61	OREGON ST	0.00	2,170.00	0.00	0.00	2,170.00
11/04/22	11/04/22	11/04/22	BKAMER19	025816CM9	AMERICAN EXPRESS CO	0.00	41,250.00	0.00	0.00	41,250.00
11/05/22	11/05/22	11/05/22	BKAMER19	904764AX5	UNILEVER CAPITAL CORP	0.00	16,250.00	0.00	0.00	16,250.00
11/05/22	11/05/22	11/05/22	BKAMER19	904764AY3	UNILEVER CAPITAL CORP	0.00	108,750.00	0.00	0.00	108,750.00
11/06/22	11/06/22	11/06/22	BKAMER19	66989HAG3	NOVARTIS CAPITAL CORP	0.00	85,000.00	0.00	0.00	85,000.00
11/13/22	11/13/22	11/13/22	BKAMER19	46625HJX9	JPMORGAN CHASE & CO	0.00	18,125.00	0.00	0.00	18,125.00
11/15/22	11/15/22	11/15/22	BKAMER19	05348EAU3	AVALONBAY COMMUNITIES	0.00	87,500.00	0.00	0.00	87,500.00
11/15/22	11/15/22	11/15/22	BKAMER19	06406HCV9	BANK OF NEW YORK MELLON	0.00	63,750.00	0.00	0.00	63,750.00
11/15/22	11/15/22	11/15/22	BKAMER19	459200JY8	IBM CORP	0.00	45,000.00	0.00	0.00	45,000.00
11/15/22	11/15/22	11/15/22	BKAMER19	459200JZ5	IBM CORP	0.00	20,625.00	0.00	0.00	20,625.00
11/15/22	11/15/22	11/15/22	BKAMER19	67021CAM9	NSTAR ELECTRIC CO	0.00	56,000.00	0.00	0.00	56,000.00
11/15/22	11/15/22	11/15/22	BKAMER19	74456QBS4	PUBLIC SERVICE ELECTRIC	0.00	22,500.00	0.00	0.00	22,500.00
11/15/22	11/15/22	11/15/22	BKAMER19	927804GH1	VIRGINIA ELEC & POWER CO	0.00	53,281.25	0.00	0.00	53,281.25
11/17/22	11/17/22	11/17/22	BKAMER19	14913Q2V0	CATERPILLAR FINL SERVICE	0.00	35,625.00	0.00	0.00	35,625.00
11/20/22	11/20/22	11/20/22	BKAMER19	747525AT0	QUALCOMM INC	0.00	72,500.00	0.00	0.00	72,500.00
TOTAL INTEREST						0.00	746,167.25	0.00	0.00	746,167.25
SELL										
11/07/22	11/04/22	11/07/22	BKAMER19	459058JV6	INTL BK RECON & DEVELOP	3,000,000.00	177.08	2,939,760.00	0.00	2,939,937.08
11/15/22	11/15/22	11/15/22	BKAMER19	09248U718	BLACKROCK TREASURY TRUST	2,203,879.36	0.00	2,203,879.36	0.00	2,203,879.36

LA CARE

Cash Activity by Transaction Type GAAP Basis

Accounting Period From 11/01/2022 To 11/30/2022

Cash Date	Trade/Ex-Date	Settle/Pay Date	Custodian	Cusip	Description	Quantity	Income Amount	Principal Amount	Contributions/ Withdrawals	Total Amount
11/21/22	11/18/22	11/21/22	BKAMER19	26442CAV6	DUKE ENERGY CAROLINAS	3,000,000.00	16,775.00	2,984,610.00	0.00	3,001,385.00
11/21/22	11/18/22	11/21/22	BKAMER19	59217GCT4	MET LIFE GLOB FUNDING I	1,000,000.00	13,000.00	982,220.00	0.00	995,220.00
TOTAL SELL						9,203,879.36	29,952.08	9,110,469.36	0.00	9,140,421.44
GRAND TOTAL						21,761,243.43	732,115.35	(732,115.35)	0.00	0.00

Avg Date 15

BOARD OF GOVERNORS

Finance & Budget Committee

Meeting Minutes – November 15, 2022

1055 W. 7th Street, Los Angeles, CA 90017

Members

Ilan Shapiro MD, MBA, FAAP, FACHE, *Chairperson*
Stephanie Booth, MD
Hector De La Torre *
Hilda Perez
G. Michael Roybal, MD

Management/Staff

John Baackes, *Chief Executive Officer*
Terry Brown, *Chief of Human Resources*
Augustavia Haydel, *General Counsel*
Linda Greenfeld, *Chief Products Officer*
Tom MacDougall, *Chief Technology & Information Officer*
Marie Montgomery, *Chief Financial Officer*
Noah Paley, *Chief of Staff*
Acacia Reed, *Chief Operating Officer*
Richard Seidman, MD, MPH, *Chief Medical Officer*

**Absent ** Via Teleconference*

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 in person, and the Board will review that decision on an on-going basis as provided in the Brown Act. Members of the public had the opportunity to attend and share comments in person, or 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	Ilan Shapiro MD*, Committee Chairperson*, called the L.A. Care and JPA Finance & Budget Committee meetings to order at 1:00 p.m. He welcomed everyone and summarized the process for public comment during this meeting. The meetings were held simultaneously. He welcomed everyone to the meetings. • For those who provided public comment for this meeting by voice message or in writing, L.A. Care is glad that they provided input today. The Committee will hear their comments and they also have to finish the business on the Agenda today. • For people who have access to the internet, the meeting materials are available at the lacare.org website. If anyone needs information about how to locate the meeting materials, they can reach out to L.A. Care staff. • 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
	• The Chairperson will invite public comment before the Committee starts to discuss an item. If the comment is not on a specific agenda item, it will be read at the general Public Comment. • He provided information on how to submit a comment live and directly using the "chat" feature.	
APPROVE MEETING AGENDA	The Agenda for today's meeting was approved.	**Approved unanimously by roll call. 4 AYES (Booth, Perez, Roybal and Shapiro)**
PUBLIC COMMENTS	There were no public comments.	
APPROVE CONSENT AGENDA	• October 25, 2022 meeting minutes • Quarterly Investment Reports **Motion FIN 100.1222** **To accept the Quarterly Investment Report for the quarter ending September 30, 2022, as submitted.** • Global Processor, Inc. Contract for SAP Ariba Software Implementation **Motion FIN 101.1222** **To authorize staff to execute a contract in the amount $2,300,000 with Global Processor, Inc. to provide SAP Ariba software implementation services for the period of January 1, 2023 to December 31, 2023.** • Salesforce, Inc. Customer Relationship Management (CRM) Subscription Renewal **Motion FIN 102.1222** **To authorize staff to execute a contract with Salesforce in an amount up to $2,160,000 for the renewal of subscription services through October 31, 2023.** • Resources Connection, LLC dba Resources Global Professionals contract amendment **Motion FIN A.1122** **To authorize staff to amend a contract in the amount of $400,000 with Resources Connection, LLC dba Resources Global Professionals to provide Internal Audit services for the period November 1, 2022 through April 30, 2023.**	**Approved unanimously by roll call. 4 AYES** **The Committee approved including FIN 100, FIN 101 and FIN 102 to the Consent Agenda for the December 1, 2022 Board of Governors' meeting.** **FIN A does not require full Board approval.**

APPROVED

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
CHAIRPERSON'S REPORT	There was no report from the Chairperson.	
CHIEF EXECUTIVE OFFICER'S REPORT	There was no CEO Report.	
• Grants and Sponsorship Report	Legal Services Policy 603 (Grants & Sponsorships) was revised to improve the efficiency of the Community Health Investment Fund (CHIF) grant approval for the Board of Governors. As required by the revised policy, a monthly report on entities that have received more than $300,000 in grant funding, or more than $450,000 combined in grants and sponsorships within the fiscal year should be submitted to this Committee. The written report included in the meeting materials *(a copy of the report can be obtained from Board Services).*	
COMMITTEE ITEMS		
Chief Financial Officer's Report	Marie Montgomery, *Chief Financial Officer,* presented Financial Reports for September 2022 *(a copy of the report is available by contacting Board Services).* <u>Membership</u> The September membership was 2,719,197, which is 9,349 unfavorable to the forecast, and 30,500 member months unfavorable year-to-date (YTD). The forecast assumed that the public health emergency will extend through the end of the fiscal year, postponing the resumption of the redetermination process. The forecast also included an additional 65,000 members due to the expansion of coverage for undocumented adults over 50. The unfavorability is mainly due to two reasons, 1) a Plan Partner that terminated 2 provider group contracts that resulted in approximately 41,000 members moved from Plan Partner to MCLA for continuity of care and 2), a lower than forecasted member transfer of 5K members. L.A. Care Covered (LACC) membership dropped to just over 112,000, unfavorable to the forecast by 2,600 members. In August, Covered California disenrolled members who did not meet the eligibility requirements during the Reasonable Opportunity Period. The estimated impact to L.A. Care is approximately 2,500 members. The Commercial team is working to contact those members to get them re-enrolled. <u>Consolidated Financial Performance</u> The net surplus for September was $20 million; $20 million favorable to the forecast, which was expected to be at break-even. The operating margin was favorable to the forecast by $18	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	million, driven by a true-up to the capitation deduct of $54 million, retroactive to October 2019. Mitigating this favorability is the impact of $23 million for a Risk Adjustment Factor (RAF) adjustment for LACC. Based on the update received from Wakely, L.A. Care's RAF score was projected to decrease from 0.75 to 0.67. Staff is looking at ways to improve the RAF with the time left in the calendar year. There was also an adjustment to the Prop 56 risk corridor for CY 2021 and 2022 of -$14 million, which resulted in a decrease in revenue of $251 million and a decrease in healthcare costs of $237 million. With the latest estimate, the payable to the providers for Prop 56 payments will be an estimated risk corridor payable back to the Department of Health Care Services (DHCS). Community Based Adult Services (CBAS) continues its favorable trend at $5 million. . Administrative expense was favorable $1.6 million to the forecast due to lower spending in salaries and benefits driven by open positions. Non-operating expense was $854,000 favorable vs the forecast due to timing of grant spending, lower Community Resource Center (CRC) expenses, and higher interest income; offset by unrealized losses. YTD net surplus was $38 million, which is $13 million favorable to the forecast. The YTD variances were very similar to the variances for the month. The large variances in both revenue and healthcare costs were due to the Prop 56 adjustments. The operating margin was unfavorable to the forecast by $14 million driven primarily by the incurred claims, which are unfavorable to the forecast by $44 million due to higher institutional claims driven by higher institutional members (which means higher revenue), higher transportation expense and higher COVID 19 testing expense due to SB 510. These were mitigated by the favorable items in September including CBAS favorability of $14 million YTD. Administrative expense for YTD was favorable $9.2 million to the forecast due to lower spending in salaries and benefits, which was driven by open positions. Non-operating is favorable $18M vs the forecast driven by timing of grant spending, lower CRC expenses, higher interest income; but offset by our unrealized losses. <u>Variances: Budget vs Actuals</u> Ms. Montgomery summarized the variances from the projected net surplus of $91 million to the final net surplus of $38 million. The largest unfavorable variance is the incurred claims net of corrected claims recovery, higher number of institutional members also means higher revenue and claims, and COVID-19 testing costs driven by SB 510. .	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	The adjustments made to the Prop 56 risk corridor for Bridge Period 2019-20, CY 2021 and 2022 with a negative net impact of $29 million. There were also adjustments to the RAF score for LACC, moving from 0.80 to 0.75, and from 0.75 to 0.67. The net impact of those adjustments was -$49 million. The CBAS claims were unfavorable to the budget by $56 million. The budget had assumed those services would move back in center earlier in the year. The administrative expenses were $57 million unfavorable to the budget, which includes the $55 million regulatory fine and higher than budgeted spending in staff augmentation for the appeals and grievances remediation efforts. The $20.5 million reversal of the PCORI fee accrual partially offset these unfavorable variances. Non-Operating expense was $5 million favorable. There was $38 million in unrealized losses for the fiscal year due to the rising interest rate environment and not credit quality deterioration. <u>Operating Margin</u> • Overall Medical Cost Ratio (MCR) is equal to the forecast of 93.4% • Commercial MCR is lower than the forecast due to the PASC Pharmacy cap deduct true-up but partially offset by LACC RAF risk score adjustment from 0.76 to 0.67. <u>Reported vs Paid Claims Trend</u> • In the previous fiscal year, the monthly claims payments stabilized that influenced the level of reserves that L.A. Care is holding. After the record month in August, September fell back in line with previous months. • As part of the audit, Deloitte & Touche will be reviewing L.A. Care's reserve position. The higher paid claims, a much lower claims inventory level and the corrected claims process introduces more uncertainty for the reserve position. • As in the prior years, the goal is to issue the financial statements before the end of the year. <u>Key Financial Ratios</u> • The Medical Care Ratio is 93.4%. • The administrative ratio was 5.7%, higher than the forecast of 5.6%. Although the administrative expenses are favorable to the forecast, the administrative ratio is slightly higher due to the reduction in revenue for the Prop 56 adjustment. • Working Capital and Tangible Net Equity are ahead of benchmarks.	

APPROVED

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	• Cash to claims is below the benchmark and will not fully recover until the IHSS balances are settled with DHCS. <u>Tangible Net Equity and Days of Cash on-Hand</u> The September 2022 Fund Balance was $1.09 billion, which represents 525% of Tangible Net Equity. The target of 600% was based on the average of eight Local Initiatives and County Organized Health Systems. **<u>Motion FIN 103.1222</u>** **To accept the Financial Reports for September 2022, as submitted.**	**Approved unanimously by roll call. 4 AYES**
• Monthly Investment Transactions Reports	Ms. Montgomery referred to the investment transactions reports included in the meeting materials (*a copy of the report is available by contacting Board Services).* This report is provided to the Committee to comply with the California Government Code and is presented as an informational item. L.A. Care's total investment market value as of September 30, 2022 was $2.3 billion. • $1.96 billion managed by Payden & Rygel and New England Asset Management (NEAM) • $73 million in Local Agency Investment Fund • $255 million in Los Angeles County Pooled Investment Fund	
• Quarterly & Annual Internal Policy Reports	Ms. Montgomery referred to the 4th Quarter and Annual Expenditure Reports required by L.A. Care Internal Policies for FY 2021-22 included in the meeting materials (*a copy of the report is available by contacting Board Services).* L.A. Care internal policies require reports on expenditures for business related travel expenses incurred by employees, members of the Board of Governors, Stakeholder Committees, and members of the Public Advisory Committees. The Authorization and Approval Limits policy requires reports for executed vendor contracts for all expenditures and the Procurement Policy requires reports for all sole source purchases over $250,000. These are informational items, and do not require approval. • Policy AFS-004 (Non-Travel Expense Report) • Policy AFS-027 (Travel Expense Report) • Policy AFS-006 (Authorization and Approval Limits) • Policy AFS-007 (Procurement)	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
Information Technology Motions • Cognizant Technology Solutions, HCL America, Inc., Infosys Limited, Solugenix Corporation, MetaSoftTech Solutions, LLC. Contracts Amendments for Information Technology Staff Augmentation	Tom MacDougall, *Chief Information & Technology Officer*, summarized the motion requesting approval to amend the contracts with Cognizant Technology Solutions, HCL America, Inc., Infosys Limited, and Solugenix Corporation, not to exceed a total of $14,296,629. In June 2015, the Board of Governors authored staff to negotiate contracts with Cognizant, HCL, and Infosys, following a competitive bidding process. In September 2018, L.A. Care conducted a Request for Proposal (RFP) process that evaluated more than twenty vendors. Cognizant, HCL, Infosys, and Solugenix were selected during that RFP. All of these vendors provided competitive rates and supply resources with the specialized expertise required to support initiatives at L.A. Care. The primary strategic programs these resources will support are CalAIM, DSNP, VOICE, Provider Network (PNOR), and Enterprise Performance Optimization Program (compliance), along with several smaller projects to improve L.A. Care's value delivery to our members and internal customers. **<u>Motion FIN 104.1222</u>** **To authorize staff to amend contracts with Cognizant Technology Solutions, HCL America, Inc., Infosys Limited, and Solugenix Corporation, not to exceed a total of $14,296,629 (total contracts not to exceed $38,760,978), for Information Technology staff augmentation services through June 30, 2023.**	**Motions FIN 104 and FIN 105 were considered simultaneously.** **Approved unanimously by roll call. 4 AYES** **The Committee approved including FIN 104 and FIN 105 to the Consent Agenda for the December 1, 2022 Board of Governors' meeting.**
• Cognizant Technology Solutions Contract Amendment for Continued Hosting Services for the QNXT and CCA Core Systems	In March 2012, the Board authorized staff to enter into a contract with TriZetto Group, Inc. (TriZetto) for the purposes of implementing a new core information system. Since that time, TriZetto was acquired by Cognizant Technology Solutions (Cognizant). The software was implemented at L.A. Care for all lines of business and supports core processing functions. In October of 2017, L.A. Care purchased perpetual licenses from Cognizant in the amount of $6.5 million, obtaining annual operating savings of at least $1.3 million by paying only annual maintenance fees instead of both rental and maintenance fees. For continued use of the core software products, L.A. Care staff requests approval to amend the purchase order with Cognizant in the amount of $6,200,000 for Cognizant hosting services. <u>Motion FIN 105.1222</u> To amend the existing contract with Cognizant in the amount of $6,200,000 (total contract not to exceed $106,084,459), for continued hosting services for L.A. Care's Core Systems through June 30, 2023. Board Member Booth suggested that the motion be amended to read "for services through December 31, 2023". Mr. MacDougall confirmed that was the intent.	

APPROVED

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<u>Amended Motion FIN 105.1222</u> **To amend the existing contract with Cognizant in the amount of $6,200,000 (total contract not to exceed $106,084,459), for continued hosting services for L.A. Care's Core Systems through December 31, 2023.**	
Public Comments on the Closed Session agenda items.	There were no public comments.	
ADJOURN TO CLOSED SESSION	The Joint Powers Authority Finance & Budget Committee meeting adjourned at 1:45 p.m. Augustavia J. Haydel, Esq., *General Counsel*, announced the items that the Committee will discuss in closed session. There was no public comment on the Closed Session items, and the meeting adjourned to closed session at 1:45 pm. CONTRACT RATES Pursuant to Welfare and Institutions Code Section 14087.38(m) • Plan Partner Rates • Provider Rates • DHCS Rates REPORT INVOLVING TRADE SECRET Pursuant to Welfare and Institutions Code Section 14087.38(n) Discussion Concerning New Service, Program, Technology, Business Plan Estimated date of public disclosure: *November 2024*	
RECONVENE IN OPEN SESSION	The meeting reconvened in open session at 1:55 pm. Ms. Haydel advised the public that no reportable action from the closed session.	
ADJOURNMENT	The meeting adjourned at 1:55 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:

_____
Ilan Shapiro MD, MBA, FAAP, FACHE, *Chairperson*
Date Signed _____

APPROVED

BOARD OF GOVERNORS
Compliance & Quality Committee Meeting
Meeting Minutes – November 17, 2022

L.A. Care Health Plan CR 100, 1055 W. Seventh Street, Los Angeles, CA 90017

Members
Stephanie Booth, *MD, Chairperson*
Al Ballesteros, *MBA*
Hilda Perez
John Raffoul*
G. Michael Roybal, *MD*
Nina Vaccaro
** Absent*

Senior Management
Augustavia J. Haydel, *General Counsel*
Thomas Mapp, *Chief Compliance Officer*
Richard Seidman, *MD, MPH, Chief Medical Officer*
Katrina Miller Parrish, *MD, FAAFP, Chief Quality and Information Executive*
Michael Sobetzko, *Senior Director, Risk Management and Operations Support, Compliance*
Elysse Tarabola, *Senior Director, Regulatory Compliance, Compliance*

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 in person, and the Board will review that decision on an on-going basis as provided in the Brown Act. Members of the public had the opportunity to attend and share comments in person, or 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	Chairperson Stephanie Booth, MD, called the L.A. Care Compliance & Quality Committee and the L.A. Care Health Plan Joint Powers Authority Compliance & Quality Committee meetings to order at 2:05 p.m. She announced that members of the public may address the Committee on each matter listed on the agenda before the Committee's consideration of the item by submitting their comments via text, voicemail, or email. There were no members of the public present either in person attending virtually by WebEx or telephone.	
APPROVAL OF MEETING AGENDA		**Approved unanimously by roll call. 6 AYES (Ballesteros, Booth, Perez, Raffoul,**

AGENDA ITEM/ PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	The Meeting Agenda was approved as submitted.	**Roybal and Vaccaro)**
PUBLIC COMMENT	There was no public comment.	
APPROVAL OF MEETING MINUTES	Chairperson Booth noted that the October 20, 2022 meeting minutes were revised and redistributed. **The October 20, 2022 meeting minutes were approved as submitted.**	**Approved unanimously by roll call. 6 AYES**
CHAIRPERSON REPORT	Chairperson Booth wished everyone Happy Holidays. She noted that this is the last Compliance and Quality committee meeting before the New Year. She hopes that everyone takes care of themselves and use their masks as desired. She cautioned that the flu season is also in effect and normally causes more deaths than COVID-19. She said that the weather is colder and people are gathered closer indoor together, especially in other states. She asked that everyone be safe and have a great Holiday Season.	
CHIEF COMPLIANCE OFFICER REPORT	Thomas Mapp, *Chief Compliance Officer*, and the Compliance Department staff presented the Chief Compliance Officer Report *(a copy of the written report can be obtained from Board Services).* Mr. Mapp stated that the Health Risk Assessment Back Log report will be postponed until January 2023. He asked Todd Gower, *Consultant*, to provide an Internal Audit update *(A copy of the presentation can be obtained from Board Services.).* Mr. Gower stated that the report shows the current list of internal audit projects to be completed. Those are still open and are related to management feedback and completing the Annual Risk Assessment. For closed items, a final report has been defined and provided along with corrective action plans, which they make sure they follow up on as part of Follow-up Internal Audit process. Chairperson Booth said that even though the report says an item is closed she would not like it removed from the report. Mr. Gower responded that is according to the risk level of the corrective action plan, which becomes part of ongoing Compliance monitoring activity for Compliance in Internal Audit or delegation oversight when the item is no longer a high risk for the organization. Once and Internal Audit project shows complete they will conduct either a follow-up audit or full Internal Audit. Chairperson Booth stated that that is a good example of Compliance demonstrating changes that need to be made and conducting follow through. Mr. Gower and Mr. Sobetzko reported that the 2022 Issue Inventory is being updated and going through a clean-up process *(a copy of the presentation can be obtained from Board Services).* Compliance will be updating the Issues	

APPROVED

AGENDA ITEM/ PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	log related to outcomes from Corrective Action Plan reviews from Internal Audit and will give an update at the next Compliance & Quality committee meeting, following a risk assessment survey and interviews. Mr. Sobetzko reported that work has been done on the previously reported risk assessment items *(a copy of the written report can be obtained from Board Services)*. Staff members have brought forth better tools and reporting in this cycle. The majority of the mitigation activities have been about improving controls and lowering the potential impact of the risk and lowering the likelihood of the risk. Compliance has seen that in the provider data risks. Compliance is finalizing reviews and completions of the controls and mediation activities that have been offered in business areas. They are on target to be completed by the end of 2022.	
CHIEF MEDICAL OFFICER REPORT	Richard Seidman, *MD, MPH*, *Chief Medical Officer*, gave the November 2022 Chief Medical Officer Report *(a copy of the written report can be obtained from Board Services.)*. The Department of Health Care Services (DHCS) released their Quality Improvement Activities and Submission requirements for 2022-2023. L.A. Care met the minimum performance level (MPL) set at the 50th percentile of the national Medicaid average on 12 of the 15 Managed Care Accountability Set measures (MCAS). L.A. Care did not meet the MPL on the well care visits for children under 30 months of age and Immunization measures (CIS-10). Based on our performance, L.A. Care will be required to conduct two Performance Improvement Projects, two Plan Do Study Act or one Strengths Weaknesses Opportunities and Threats analysis. Despite meeting the MPLs for the majority of the measures, DHCS policy enables the Department to issue monetary sanctions for Plans not meeting the MPL for all measures. To date, L.A. Care has not been informed whether the Department intends to impose any sanctions upon L.A. Care. Dr. Parrish stated that L.A. Care is focusing on MCAS measures with incredible amounts of interventions and also through L.A. Care's Children's Health Consultants Advisory Committee (CHCAC). CHCAC is an L.A. Care advisory committee. She is really happy to have the collaboration with the community organizations and leaders. L.A. Care is really looking forward to improving its scores. Dr. Parrish stated that it is difficult to catch up with its measures if one measure is missed. When L.A. Care loses the opportunity to get children their immunizations in the right scheduled timing, it loses the opportunity for the entire period. This adds up to 10 different immunization levels that L.A. Care needs to get into them. It is a very challenging set of measures to work with, but L.A. Care is doing the best it can. Dr. Parrish noted that it is terrific to have the collaboration on grants and multiple incentive programs to be able to help with those measures and other efforts. Chairperson Booth noted that Dr. Parrish mentioned a way that this new work that L.A. Care will help L.A. Care's past scores improve. She asked if Dr. Parrish can think of a way that the new work they've added will be able to supplement some of the other items that L.A. Care will have trouble with or make it easier to achieve certain scores. Dr. Parrish responded that would be folding in different efforts for different focuses. The grant opportunity focuses more on adult measures and certain office locations. That is different from social media, texts, robocalls that are trying to address measures for trying to get children their well child visits. They are not all related.	

AGENDA ITEM/ PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	The DHCS Population Health Management Program guide that contains more detail on operational guidance was released on September 2, 2022. Ingesting Admissions, Discharge, and Transfer data for Transitional Care Services and assigning a Care Manager to members for all transitions represent significant challenges internally and for our network providers and Participating Physicians Groups (PPG). Notably, DHCS announced a phased implementation of the Transitional Care Services requirements beginning January 1, 2023 requiring that care managers be assigned to all high-risk members as defined by DHCS, allowing an additional year until January 1, 2024 to fully implement the requirement for all members transitioning from one level of care to another. The Enhanced Care Management (ECM) and Community Supports (CS) programs continue to evolve with over 16,000 members currently enrolled and receiving services by our contracted ECM provider network, and over 12,000 members receiving Housing and Homeless Support Services. Other Community Support Services currently offered by L.A. Care include Recuperative Care and Medically Tailored Meals. In January 2023, we will be adding Environmental Accessibility Adaptations to our CS offerings and two new populations of focus will be added to the ECM program – Adults Living in the Community and At Risk for Long Term Care, and Adult Nursing Facility Residents Transitioning to the Community. Over the past 18 months, we developed a pilot to provide an integrated approach to providing specialty consultation remotely and with face-to-face visits. The program offers eConsult, telehealth visits with specialty providers and face-to-face visits as appropriate. We know that other delivery systems, like Kaiser and LA County Department of Health Services, have successfully implemented eConsult and telehealth services. However, the availability of virtual care services varied greatly from practice to practice in the private setting and for many private practices, there was no peer to peer eConsult-like service readily available for private providers who perhaps only needed a quick question addressed. In July 2022, we launched this pilot with 18 adult and 5 pediatric specialties with four of our high volume Direct Network providers. Although this pilot is still in its infancy and we are still in the midst of recruiting more primary care practices, the Children's Hospital of Los Angeles (CHLA) team nominated L.A. Care to present at an upcoming National Academies of Science, Engineering and Medicine (NASEM) pediatric specialty committee. The CHLA team believes that L.A. Care's program is unique in that we worked collaboratively with providers, offered to reimburse for the services provided by the primary care and specialist in a fair way and offer a mechanism for private providers to access specialty input to inform the care of their patients in a timely and efficient manner. The NASEM pediatric specialty committee has invited Alex Li, *MD, Deputy Chief Medical Officer*, to their November 11 meeting. In this meeting, members of the NASEM pediatric specialty committee will learn more about our pilot program, ask questions and determine whether our efforts should be highlighted as a best practice for a health plan with regard to helping members and providers get access to specialty care services.	
POPULATION HEALTH MANAGEMENT &	Elaine Sadocchi-Smith, *Director, Population Health Management, Director, Facility Site Review* reported on Population Health Management (PHM) & Transitional Care Services (TCS) *(A copy of the report can be obtained from Board Services.).* • ECM TCS: Admission, Discharge, and Transfer (ADT) data is shared to all ECM contracted providers.	

AGENDA ITEM/ PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
TRANSITIONAL CARE SERVICES	ECM Care Managers currently manage TCS. • Collective Medical Technology's Emergency Department Information Exchange ADT data is available to those ECM contracted providers who participate. • Internally, L.A. Care also uses Syntranet clinical claims for validation in support of eligibility questions. ADT is shared with all ECM contracted providers through e-Connect. Chairperson Booth asked if these services are free for the provider. Ms. Sadocchi-Smith responded that all this information is available to the ECM providers, those groups that are providing the ECM services. Dr. Seidman stated that L.A. Care has contracts that cover its participation in these information exchanges and makes that data available to L.A. Care network provider. As far as he knows, there is no cost to them. The Board will be notified if there are any changes to that. Physicians and practice should not be paying for information that is accessed on data exchanges. • If a member is being followed by the PPG from the hospital to the community (eg. Skilled Nursing Facility, Long Term Care, home) the PPG is responsible for transition of care services that currently L.A. Care does not have oversight of these activities. Chairperson Booth asked if L.A. Care foresees having oversight over vendors. Ms. Sadocchi-Smith responded that L.A. Care would need to have oversight, because according to the CalAIM PHM program, even though L.A. Care is delegating, it needs to make sure all is being done properly. Next steps • While L.A. Care has some TCS activities in place, over the coming year it will need to: ➢ Develop and execute a plan to ramp up TCS for high risk and complex care members by January 1, 2023 ➢ Develop a plan to ensure transitional care services are completed for all members by January 1, 2024 o A plan for either providing TCS to lower risk members o A plan to ensure TCS occurring at the Provider/PPG level is monitored and includes delegation oversight at the provider/PPG level ➢ A comprehensive and real-time ADT data feed must be in place by January 1, 2023 for all members across the network to ensure timely identification of members needing TCS and ability to assign a care manager and notification o L.A. Care is planning to contractually require hospitals to participate in a Health Information Exchanges to improve ADT feeds ➢ Ability for the single point of contact care manager to be able to document TCS, discharge risk assessment, discharge planning services, medication reconciliation and closed-loop referrals in a system of record that can be coordinated with all service providers.	

AGENDA ITEM/ PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	Chairperson Booth asked if there would be additional funding to pay for this. Ms. Sadocchi-Smith responded that it is a great concern that L.A. Care has brought up to DHCS. At this moment, there is no additional funding for this. She believes these resources could be used for members that really need it, but L.A. Care must do this for all members. Dr. Seidman said that it is clear that DHCS is not going to pay L.A. Care on the front end. Perhaps at another meeting staff could provide more detail to the Board. DHCS does have a rate setting mechanism that in future years, as L.A. Care demonstrates cost, the additional expenses that are incurred to meet new requirements, those new costs may or may not get included in future rates. Dr. Parrish stated that there are incentive programs that will help L.A. Care get the ADT feeds. L.A. Care is trying to optimize those dollars as well and think creatively about the assignment of care managers per transition which will have a very strong foundation in digital data exchange. L.A. Care will have to be very careful about the members' needs during the transition of care. Member Roybal thanked staff for the presentation. He looks forward to seeing how it turns out for the state in general. He asked if DHCS believes it will eventually save on costs, because there are fewer re-admissions and people not necessarily needing higher level of care due to them being taken care of on the front end. Dr. Seidman responded that cost saving is the basis. L.A. Care held robust discussions with DHCS representatives. He thinks there is very good documentation that if an entity focuses on transition of care for members that are at high risk of needing emergency room visits after a transition, there is a clear financial return on investment when those types of services are focused on the right cohort of members.	
MEMBER EXPERIENCE	Linda Carberry, *Manager, Quality Data, Quality Performance Management,* gave a presentation about Member Experience *(A copy of the presentation can be obtained from Board Services.).* Medi-Cal Rates 2022 vs 2021- Improved Reportable Rates	

CHILD - Reportable Measures		
Measure	**2022 Rate**	**2021 Rate**
Getting Needed Care	82%	81%
Getting Care Quickly	80%	79%
Rating of Specialist Seen Most Often (9 or 10)	76%	74%

AGENDA ITEM/ PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN

ADULT - Reportable Measures		
Measure	**2022 Rate**	**2021 Rate**
Getting Needed Care	78%	74%
Getting Care Quickly	73%	72%
Rating of Personal Doctor (9 or 10)	62%	60%
Rating of Specialist Seen Most Often (9 or 10)	68%	63%
Rating of All Health Care (9 or 10)	55%	52%
Coordination of Care	78%	77%
Rating of Health Plan (9 or 10)	56%	52%

Chairperson Booth asked if a member responds that they received a vaccine, but they are unsure if it was the flu vaccine, how would it be recorded. Ms. Carberry responded that the survey is specific to the vaccine received however the member might not remember the exact vaccine received and answer "yes" incorrectly.

Member Royal stated that one of the issues is that the survey return rate is low. Those who respond are very happy or unhappy with their experience. He asked what L.A. Care is doing to help educate patients about the importance of completing the surveys to increase the return rate? Ms. Carberry responded that this report showed that the there were fewer completed surveys and scores went up. She said that it would be best to have surveys completed at the time of care, because that is when their experience is fresh in their minds.

Member Nina Vacarro noted that given the last three years with patient care and access, workforce is still a tremendous challenge. She is curious if Ms. Carberry saw any trends pre-pandemic, and asked if scores were different or if the trend line was stable. Ms. Carberry responded that the trend line was stable. Even on provider surveys. She was happy to see high scores this year due to the lower number of returns. Funding should be moved into other places other than getting more samples.

Member Perez congratulated Ms. Carberry on her report. There is much information that they must dig into. It

AGENDA ITEM/ PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	is very gratifying to see the effort put into the presentation.	
ADJOURN TO CLOSED SESSION	The Joint Powers Authority Compliance & Quality Committee meeting was adjourned at 3:45 pm. Augustavia J. Haydel, Esq., *General Counsel*, announced the following items to be discussed in closed session. The JPA Compliance and Quality Committee meeting adjourned and the Compliance and Quality Committee adjourned to closed session at 3:42 P.M. CONFERENCE WITH LEGAL COUNSEL—ANTICIPATED LITIGATION Significant exposure to litigation pursuant to Section 54956.9(d)(2) of Ralph M. Brown Act: Three potential cases CONFERENCE WITH LEGAL COUNSEL—EXISTING LITIGATION Pursuant to Section 54956.9(d)(1) of the Ralph M. Brown Act • Department of Managed Health Care Enforcement Matter Numbers: 18-799, 20-063, 21-428, 21-509, 21-680 • Department of Health Care Services, Office of Administrative Hearings and Appeals, In the matter of: L.A. Care Health Care Plan Appeal No. MCP22-0322-559-MF • L.A. Care Health Plan's Notice of Contract Dispute under Contract No. 04-36069, Department of Health Care Services (Case No. Unavailable) CONFERENCE WITH LEGAL COUNSEL—ANTICIPATED LITIGATION Significant exposure to litigation pursuant to Section 54956.9(d)(2) of Ralph M. Brown Act: Three potential cases THREAT TO PUBLIC SERVICES OR FACILITIES Pursuant to Government Code Section 54957 Consultation with: Thomas Mapp, Chief Compliance Officer	
RECONVENE IN OPEN SESSION	The Committee reconvened in open session at 4:05 p.m. There was no report from closed session.	
ADJOURNMENT	The meeting was adjourned at 4:05 p.m.	

Respectfully submitted by:
Victor Rodriguez, *Board Specialist II, Board Services*
Malou Balones*, Board Specialist III, Board Services*
Linda Merkens*, Senior Manager, Board Services*

APPROVED BY:

_____
Stephanie Booth, MD, *Chairperson*
Date Signed: _____

APPROVED

BOARD OF GOVERNORS

Audit Committee Meeting Minutes – August 4, 2022

1055 W. 7th Street, Los Angeles, CA 90017

Members
Alvaro Ballesteros, MBA, *Chairperson*
Layla Gonzalez
Stephanie Booth, MD

Management/Staff
John Baackes, *Chief Executive Officer**
Augustavia J. Haydel, Esq., *General Counsel*
Marie Montgomery, *Chief Financial Officer*

Guests
Rosie Procopio, *Audit & Assurance Managing Director*, *Deloitte & Touche*

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 Alvaro Ballesteros	On behalf of Alvaro Ballesteros, MBA, *Committee Chairperson*, who experience technical difficulty, Board Member Booth called to order the L.A. Care Audit Committee and the L.A. Care Joint Powers Authority Audit Committee meetings at 4:11 p.m. The meetings were held simultaneously. She welcomed everyone to the meetings. 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
	The Chairperson will invite public comment before the Committee starts to discuss an 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. Board Member Booth provided information on how to submit a public comment live and directly using the "chat" feature.	
APPROVE MEETING AGENDA Alvaro Ballesteros	Today's Agenda was approved as submitted.	**Approved unanimously by roll call. 3 AYES (Ballesteros, Booth and Gonzalez)**
PUBLIC COMMENT	There was no public comment.	
APPROVE MEETING MINUTES Alvaro Ballesteros	The December 13, 2021 meeting minutes were approved as submitted.	**Approved unanimously by roll call. 3 AYES**
CHAIRPERSON'S REPORT	There was no report from the Chairperson.	
CHIEF EXECUTIVE OFFICER/CHIEF FINANCIAL OFFICER REPORT	There was no CEO Report. Marie Montgomery, *Chief Financial Officer*, introduced Afzal Shah, *Deputy Chief Financial Officer,* and welcomed him to his first Audit Committee meeting. She also introduced Angela Bergman, *Controller*, and Doris Lai, *Senior Director, Accounting and Financial Services.*	
COMMITTEE ISSUES		
Presentation of Audit Plan for Fiscal Year 2021-22	Rosie Procopio, *Lead Client Service and Audit & Assurance Partner, Deloitte & Touche (D&T)*, provided a summary of the Audit Plan for FY 2021-22. • Deloitte & Touche presented the Audit Plan for FY 2021-22. *(Contact Board Services to obtain a copy of the plan.)*	

APPROVED

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN

	• The audit for FY 2020-21 went smoothly, as reported at the last meeting. Deloitte was able to accelerate the audit timeline through expanded interim procedures, implementation of new procedures in claims and other medical expenses and increased use of data analytics and other audit technology.
	• The proposed FY 2021-22 Audit process is adapted to changes within L.A. Care and macroeconomic environment to consider the impact of the evolving COVID-19 pandemic during preliminary risk assessment.
	• Annual debrief and assessment sessions were held with L.A. Care management and staff.
	• Discussed with management team the preliminary risk assessments. The level of claims incurred but not reported (IBNR) is still a significant risk.
	• D&T issued a diversity and inclusion report. D&T will continue to focus on quality, innovation and technology.
	• D&T has the tools and a team that is analytic and technology driven, which increases the quality of work they do.
	• Other planned procedures will include:
	  o Virtual control walkthroughs.
	  o Ongoing evaluation of nature and timing of procedures and use of audit technology.
	  o Continued evaluation of new accounting standards.
	  o Continue to communicate with management on a regular basis throughout the year for timely identification and resolution of accounting and other matters.
	
	Board Member Booth asked about D&T testing. Ms. Procopio responded that D&T will test for risk and areas of adjustments.
	
	Ms. Procopio noted that the industry is experiencing high inflation rate (30-50%). The proposed Audit Fee for FY 2021-22 is $404,895, excluding expenses.	

APPROVED

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
• Accept Audit Plan for Fiscal Year 2021-22 **(AUD A)**	**Motion AUD A.0822** **To accept the Audit Plans of Deloitte & Touche's of L.A. Care's financial statements for the fiscal year 2021-22, as presented, and authorize execution of the engagement letter.**	**Approved unanimously by roll call. 3 AYES**
ADJOURNMENT	The Chair adjourned the meeting at 4:31 pm.	

Respectfully submitted by:
Malou Balones, *Board Specialist III*
Victor Rodriguez, *Board Specialist II*
Linda Merkens, *Senior Manager, Board Services*

APPROVED BY:

DocuSigned by:
AA470E48B1BB4A1...
Al Ballesteros, MBA, *Chairperson*
Date Signed: 1/6/2023 | 3:18 PM PST

APPROVED

Board of Governors
MOTION SUMMARY

Date: February 2, 2023

Motion No. EXE 103.0223

Committee: Executive

Chairperson: Al Ballesteros, MBA

Issue: Staff requests the Committee's approval of the Amendments to Anthem Blue Cross' and Blue Shield Promise Health Plan's Plan Partner Services Agreements (PPSA) which extend the term of the PPSA through September 30, 2035.

☐ **New Contract** ☒ **Amendment** ☐ **Sole Source** ☐ **RFP/RFQ was conducted**

Background: The PPSAs are being amended to extend the term of each agreement through September 30, 2035.

Member Impact: This action will not affect L.A. Care members.

Budget Impact: None.

Motion: **To approve the attached amended terms and conditions to the Anthem Blue Cross Plan Partner Services Agreement and the Blue Shield Promise Health Plan Plan Partner Services Agreement which extend the term of each agreement through September 30, 2035, and to authorize the Chief Executive Officer, or his designate, to execute such amendments and to authorize staff to make non-substantive revisions to the amendments.**

Amendment No. ~~34~~50
to
Services Agreement
between
Local Initiative Health Authority for Los Angeles County
and
Anthem Blue Cross

This Amendment No. ~~34~~ 50 (this "Amendment") is effective as of March 1, 2023~~19~~, as indicated herein by and between the Local Initiative Health Authority for Los Angeles County operating as L.A. Care Health Plan, an independent public entity ("Local Initiative") and ***Blue Cross of California dba Anthem Blue Cross***, a California health care services plan ("Plan").

Recitals

WHEREAS, the State of California ("State") has, through statute, regulation, and policies, adopted a plan ("State Plan") for certain categories of Medi-Cal recipients to be enrolled in managed care plans for the provision of specified Medi-Cal benefits. Pursuant to this State Plan, the State has contracted with two health care service plans in Los Angeles County. One of these health care service plans is an existing HMO which is selected by the State ("Commercial Plan"). The other health care service plan is the Local Initiative, a health care service plan locally created and designated by the County's Board of Supervisors for, among other purposes, the preservation of traditional and safety net providers in the Medi-Cal managed care environment;

WHEREAS, the Local initiative is licensed by the Department of Managed Health Care ("DMHC") as a health care service plan under the California Knox-Keene Act (Health and Safety Code Sections 1340 *et seq*.) (the "Knox-Keene Act");

WHEREAS, Plan is duly licensed as a health care service plan under the Knox-Keene Act and is qualified and experienced in providing and arranging for health care services for Medi-Cal beneficiaries; and

WHEREAS, Local Initiative and Plan entered into the prior agreement dated October 1, 2009, as amended ("Agreement"), for Plan to provide and arrange for the provision of health care services for Local Initiative enrollees as part of a coordinated, culturally, and linguistically sensitive health care delivery program in accordance with Local Initiative's Medi-Cal contract with the California Department of Health Care Services ("DHCS") and in accordance with all applicable federal and state laws.

NOW, THEREFORE, in consideration of the foregoing and the terms and conditions set forth herein, the parties agree to amend the Agreement as follows:

I. ARTICLE VII, TERM AND TERMINATION, SECTION 7.01 (TERM) IS AMENDED AS FOLLOWS:

7.01 Term. The term of this Agreement shall be from October 1, 2009 through September 30, 2032~~2~~5, unless terminated sooner as provided in this Agreement. The parties shall endeavor to enter into negotiations regarding the extension of this Agreement not less than one hundred eighty (180) calendar days prior to the end of the term of this Agreement and in the event Plan does not intend to extend the term of this Agreement, Plan shall give notice to Local Initiative, as provided herein, at least ninety (90) calendar days prior to the end of the term of this Agreement. Nothing herein shall limit Local Initiative's authority to enter into contracts with any other health care service plan, provider or health care organization as determined by Local Initiative in its sole discretion. Local Initiative and Plan shall notify DHCS of any termination under this Section 7.01. Notwithstanding the foregoing, this Agreement may be terminated at any time upon mutual written consent of Local Initiative and Plan.

All other non-conflicting rights and duties, obligations and liabilities of the parties to the Agreement shall remain unchanged.

IN WITNESS WHEREOF, the parties have entered into this Amendment No. ~~34~~50 as of the date set forth below.

Local Initiative Health Authority for Los Angeles County operating as
L.A. Care Health Plan (Local Initiative)
A local public agency

By: _____
John Baackes
Chief Executive Officer

Date: _____, 202~~3~~3~~19~~

Blue Cross of California dba Anthem Blue Cross
A California health care services plan

By: _____
~~Barsam Kasravi, M.D.~~Les Ybarra
~~Interim~~ President
Medicaid Health Plan for California

Date: _____, 202~~3~~3~~19~~

By: _____
~~Hector De La Torre~~Alvaro Ballesteros
Chairperson
L.A. Care Board of Governors

Date: _____, 202~~3~~3~~19~~

Amendment No. ~~33~~ 50
to
Services Agreement
between
Local Initiative Health Authority for Los Angeles County
and
Blue Shield of California Promise Health Plan

This Amendment No. ~~33~~ 50 is effective as of March 1, 2023~~19~~, as indicated herein by and between the Local Initiative Health Authority for Los Angeles County operating as L.A. Care Health Plan, an independent public entity ("Local Initiative") and ***Blue Shield of California Promise Health Plan***, a California health care service plan ("Plan").

Recitals

WHEREAS, the State of California ("State") has, through statute, regulation, and policies, adopted a plan ("State Plan") for certain categories of Medi-Cal recipients to be enrolled in managed care plans for the provision of specified Medi-Cal benefits. Pursuant to this State Plan, the State has contracted with two health care service plans in Los Angeles County. One of these health care service plans is an existing HMO which is selected by the State ("Commercial Plan"). The other health care service plan is the Local Initiative, a health care service plan locally created and designated by the County's Board of Supervisors for, among other purposes, the preservation of traditional and safety net providers in the Medi-Cal managed care environment;

WHEREAS, the Local Initiative is licensed by the Department of Managed Health Care ("DMHC") as a health care service plan under the California Knox-Keene Act (Health and Safety Code Sections 1340 *et seq*.) (the "Knox-Keene Act");

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All other non-conflicting rights and duties, obligations and liabilities of the parties to the Agreement shall remain unchanged.

IN WITNESS WHEREOF, the parties hereto have entered into this Amendment as of the date first set forth above.

Local Initiative Health Authority for Los Angeles County operating as L.A. Care Health Plan (Local Initiative)
A local public agency

By: _____
John Baackes
Chief Executive Officer

Date: _____, 2023~~19~~

Blue Shield of California Promise Health Plan,
A California health care services plan

By: _____
~~Greg Buchert, M.D., MPH~~Kristen Cerf
President and Chief Executive Officer

Date: _____, 2023~~19~~

By: _____
~~Hector De La Torre~~Alvaro Ballesteros
Chairperson
L.A. Care Board of Governors

Date: _____, 2023~~19~~