BOARD OF GOVERNORS
Executive Committee
Meeting Minutes – April 24, 2024
1055 West 7th Street, 1st Floor, Los Angeles, CA 90017

Members
Alvaro Ballesteros, MBA, *Chairperson*
Ilan Shapiro MD, MBA, FAAP, FACHE, *Vice Chairperson*
Stephanie Booth, MD, *Treasurer*
John G. Raffoul, *Secretary*

Management/Staff
John Baackes, *Chief Executive Officer**
Sameer Amin, MD, *Chief Medical Officer*
Terry Brown, *Chief of Human Resources*
Augustavia J. Haydel, Esq., *General Counsel*
Todd Gower, *Interim Chief Compliance Officer*
Linda Greenfeld, *Chief Products Officer*
Alex Li, MD, *Chief Health Equity Officer*
Tom MacDougall, *Chief Technology & Information Officer*
Noah Paley, *Chief of Staff*
Acacia Reed, *Chief Operating Officer*
Afzal Shah, *Chief Financial Officer*

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
CALL TO ORDER	Alvaro Ballesteros, *Chairperson,* called to order the regular meetings of the L.A. Care Executive Committee and the L.A. Care Joint Powers Authority Executive Committee regular meetings at 2:03 p.m. The meetings were held simultaneously. He welcomed everyone to the meetings. He provided information on how to submit comments in-person or electronically.	
APPROVE MEETING AGENDA	The Agenda for today's meeting was approved.	**Approved unanimously. 4 AYES (Ballesteros, Booth, Raffoul and Shapiro)**
PUBLIC COMMENT	There were no public comments.	
APPROVE MEETING MINUTES	The minutes of the March 27, 2024 meeting were approved as amended.	**Approved unanimously. 4 AYES**
CHAIRPERSON'S REPORT	Chairperson Ballesteros commented on the Provider Recognition event. He complimented John Baackes, *Chief Executive Officer*, and the whole staff on a wonderful event. He was honored to be there and speak to the participants. Participants feel this event really uplifts them and their work; makes them feel that their work is important. Some of the organizations conduct innovative programs in the community that probably would not be recognized if not for L.A. Care and this event.	

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	Mr. Baackes noted that the first Provider Recognition event took place in 2018. Providers told him then that the recognition was appreciated and that health plans usually communicated with them about needed improvements or asked them to provide more data. Providers felt it was refreshing to receive positive feedback about their work. This was also articulated in many of the comments during the event on May 23, 2024. The recognition is based on the provider quality scores for medical groups and individual physicians. Some of the medical groups are not big organizations, but are small practices that might only have one location with half a dozen doctors, but they are achieving measurable success in serving patients. L.A. Care recognized their achievements, and they really appreciated it. A pediatrician was awarded as an individual, and her daughter had won the prior year; a mother-daughter tag team. It was really great. Board Member Booth added that many of their accomplishments are because of L.A. Care's support. Chairperson Ballesteros commented on the whole community feel, with the Urban Voices choir performance, speaks to L.A. Care's deep understanding of the communities. L.A. Care pays attention to the groups that are dealing with the social determinants of health and thinking outside of the box to create a greater sense of health care and wellbeing. L.A. Care is different from other health plans in working with providers. That is quite significant and he appreciates being a part of this event.	
CHIEF EXECUTIVE OFFICER REPORT	Mr. Baackes thanked Chairperson Ballesteros for participating in the provider recognition event, and commented that it is another example about how much time he puts into his role as Chair. California Legislators are working on a horrible budget situation. L.A. Care is monitoring the potential impact on the Medi-Cal program. It was evident in the claw back of a portion of the 2023 rates, which was explained by actuarial analysis. A notice was issued about cancelling funding distribution for the housing supports in the California Advancing and Improving Medi-Cal (CalAIM) program. It is not known how much L.A. Care could have received. L.A. Care will continue to monitor developments related to the California Budget. Mr. Baackes noted that when the Managed Care Organization (MCO) tax was reestablished, it produced funding for 2024. Health plans have not received the funds nor any guidance about the distribution of that money. This is causing great concern	

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	among health care providers. Health plans are paying the tax on a quarterly basis. L.A. Care has paid. The distribution of the money in 2024 is tied to primary care, OBGYN and Behavioral Health, on specific Medicare billing codes at 87.5% of the Medicare fee schedule. The funding must be converted for health plans that pay capitated rates to the providers. It was recently agreed the funds will be paid in lump sums at the end of 2024. The release of funding was initially planned in stages during July, September and December. Health plans are urging distribution of the funds so the plans can then determine the process for distributing the funds among providers and under the contractual terms. Health plans have to attest that no money will go to anyone who is already being paid at 87.5% of the fee schedule. There is a lot of work to be done on this program. Plans agreed that in 2025, the funds will be paid in a more routine basis and not at the end of the year. Health plans are expecting guidance on the distribution by June. Providers are frequently asking about it. Mr. Baackes is meeting with a large provider group on Saturday to try to explain why the funds have not been distributed yet. It is a complicated situation, unfortunately, and L.A. Care and other plans will have to be in the position of explaining to hospitals and doctors about the delay and how funding will flow. It is creating a lot of frustration in the provider community. Board Member Booth commented that plans really do not know anything about how much will be distributed or the amount going to each provider. Mr. Baackes responded that for 2024, the funds will only be used for OBGYN, primary care or behavioral health, at 87.5%. A large portion of funds generated in the MCO tax in 2024 was put into California's General Fund. The MCO tax is estimated to produce $19 billion over three and a half years. Of that, $8 billion will go into the general fund, with $11 billion left for Medi-Cal. Most of the $8 billion will be placed in the general fund in the first year. Mr. Baackes noted that hospitals will start getting money in January for emergency room rates. Board Member Raffoul asked about the formula for that distribution. Mr. Baackes responded that plans have not been given the formula. Health plans have requested guidance for distributing the funds in December so it can be done correctly. Health plans also requested guidance by June 2024 for distributing the 2025 funds so plans can communicate with the providers. Board Member Raffoul commented that many providers receive capitated rates from health plans and may receive MCO tax funds in December. Mr. Baackes confirmed, and he noted that some providers may have received more than the 87.5% already.	

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	Health Plans must attest that no money is distributed to providers who already receive an amount at that threshold. Sameer Amin, MD, *Chief Medical Officer,* had an opportunity to meet with Hector Flores, MD and other providers a few weeks ago to discuss this exact issue. There were a number of providers participating who were relatively up in arms and very concerned about not having complete information. The major issue is how to align the distribution of funds for capitated providers. If plans do not have enough information, it will be very hard to do that on time and in an actuarially sound way. Plans are waiting for that guidance. Mr. Baackes reported health plans have been informed that the Hospital Quality Assurance Fee (HQAF) funds will be distributed to health plans at the end of May. Plans will coordinate a distribution plan with the California Hospital Association. L.A. Care has provided cash advances to hospitals upon request, and L.A. Care does not charge any interest on the advances. There will be up to $356 million in the HQAF distribution and L.A. Care will recoup the advance payments when the money is distributed. He expects calls from hospitals asking for advances on the next payment. As discussed in a previous meeting, about half the funding in Medi-Cal is distributed through directed payments and the remainder from health plan reimbursement. Hospitals request advances on the directed payments to keep cash flowing. He noted that Centers for Medicare and Medicaid Services (CMS) has issued rules signaling that directed payments are not preferred. The directed payments come through a taxation model where the providers tax themselves, the taxes draw federal money and then the providers receive directed payments. It is a way for the state to avoid adding funds from the state budget. A major overhaul of the funding for Medicaid and Medicare would be needed to change the distribution model. Board Member Raffoul asked about the equity payment included in the MCO tax. Mr. Baackes responded that the equity payment is a $200 million fund starting in 2025. L.A. Care collaborated with Health Net to suggest that the money is provided to the health plans in order to allow health plans to direct the funds to address position shortages or an equity issue. An example is the funding L.A. Care currently provides to clinics to recruit doctors and repay medical school student loans, with the goal of retaining providers in the safety net. Regulators responded that the money should not supplant current programs. Mr. Baackes noted that L.A. Care is paying for the program	

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	from unassigned reserve funds. There has not been an announcement about the use of the equity payment funds.	
• Government Affairs Update	Cherie Compartore, *Senior Director, Government Affairs*, reported that detail about the state budget will not be known until the May Revise. The reported tax revenue is lower, but there is time remaining. There have been many legislative hearings in Sacramento, and many bills have passed out of the respective legislative committees and will next be reviewed by the Appropriations Committee. She referenced the list of pending bills included in the meeting materials. She noted a bill not on the list. Senator Gonzalez reached out regarding SB 1253. The Senator had seen a digital billboard campaign emphasizing the importance of gun safety and gunlocks, which results from a public health collaboration between L.A. Care and Los Angeles County. The Senator invited support for SB 1253, which closes loopholes in gun safety laws, requires individuals that move into California from out of with guns to get a valid firearm safety certificate. SB 1253 also requires a firearms safety test for those who did not have to take the test under current law. In addition, SB 1253 will implement a requirement for periodic recertification for the firearm safety test. SB 1253 aligns with L.A. Care's legislative and policy principles approved by the Board of Governors. Ms. Compartore noted that Legislators are noticing the billboard campaign supported by L.A. Care and Los Angeles County. Board Member Shapiro thanked her. Gun safety touches every child and every community member that L.A. Care serves. He suggested reaching out to the American Academy of Pediatrics (AAP) at the state level, or at least the local chapters. Right now Senator Gonzalez, Los Angeles County Medical Association (LACMA), and L.A. Care are leading efforts and AAP could enhance these efforts to improve gun safety. Ms. Compartore will check with the author of SB 1253 about reaching out to AAP. Dr. Amin agreed with checking with the Senator and offer to assist with AAP.	
CHIEF FINANCIAL OFFICER REPORT	Jeffrey Ingram, *Deputy Chief Financial Officer,* reported on the February 2024 Financial Performance and the updated 4+8 Forecast. *(A copy of the report can be obtained by contacting Board Services.)*	

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• Financial Report – February 2024	<u>Membership</u> Actual membership is 2.6 million versus about 2.6 budgeted. Membership increased between January and February, driven by the expansion of eligibility for the undocumented ages 26 to 49 years. <u>Consolidated Financial Performance</u> The month of February resulted in a surplus of $23.5 million, $11 million favorable to the forecast with Housing and Homelessness Incentive Program (HHIP) and Incentive Payment Program (IPP) funds excluded. This is 2.7% of total income. The surplus would be 1.6% without interest income. Where 2023 Medi-Cal rates were favorable, in 2024 there is pressure, likely to continue in the overall rate development as California has a large budget deficit. Interest income has been helping to support administrative expense and surplus revenue. As long as interest rates are elevated, the investment portfolio will continue to generate higher interest income. The month to date variances are the same as the year-to-date variances. Year to date (YTD), through February (five months of the fiscal year), there is a surplus of $291 million, $11.3 million favorable to the forecast and 6.5% of net income, which is abnormally high. Much of the favorability is from prior period adjustments. Without the interest income, the net income percentage drops down to 4.7%, showing the material impact of interest income. Revenue is unfavorable to forecast by $10.6 million. The biggest driver is unfavorability in timing of the HHIP and IPP payments of $17 million, offset by adjustments on the risk corridors related to the Enhanced Case Management (ECM), and Major Organ transplants (MOT) programs. Throughout the year, adjustments are made to risk corridors, which can be favorable or unfavorable, and this month, the adjustments are favorable. Healthcare costs are favorable to forecast $24.5 million, driven primarily by favorability in capitation. This $20 million favorability is due to a "miss" in the forecast, which will be carried forward unless an adjustment is made to the forecast before the end of the fiscal year. This is offset by a liability booked in the shared-risk true up related to challenges with overall claims inventory and the Change Healthcare event. The reduction in actual paid claims has a perceived higher shared risk pool payout. In a conservative approach, a higher liability was forecast in the month of February. As the	

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	claims inventory levels come down, there will be some favorability in the shared-risk payouts. For administrative expense, there is favorability of $7.6 million, a result of the forecast. Last month, the forecast was revised for $74 million above the original budget. This does not mean that the results in February are $7.6 million over the new forecast, Instead, it is a reflection of the timing of the forecast allocations. As the year progresses, there will be favorability. The focus is on results at the end of the fiscal year. Financial results are pacing to forecast, but in the month of February, there is a blip in terms of favorability. Future planning cycles will provide opportunity to rectify this as the financial models are updated. Non-operating expense is unfavorable $4.2 million, primarily driven by unrealized losses. The fluctuation of interest rates will be reflected as unrealized gains and losses. <u>Operating Margin by Segment</u> The overall MCR is 89.6 versus the forecast in 90.1% (excluding HHIP and IPP) • Medi-Cal is just under 90%. • DSNP is 86.7% versus the forecast of 83.7%. The shared-risk adjustment affected DSNP and LACC. As the claims inventory comes down and the shared-risk liability is adjusted, the MCR's will true up to the forecast expectations. • LACC MCR is 81.85% versus a forecast of 78.4%. In addition to the shared-risk impact, the risk adjustment factor (RAF) was truedup in revenue, retroactive to calendar year rates in 2023. This resulted the RAF score moving from 0.70 to 0.66. The adjustment for CY 2023 and January and February 2024 were all booked in the month of February. At the start the fiscal year the dollar amounts are smaller for all the lines of business, and retroactive adjustments add variation to the MCR. On an adjusted basis, LACC is performing well for L.A. Care. • PASC MCR is 99.1% versus forecast of 99.7%. <u>Key Financial Ratios</u> • The administrative expense ratio reflects the timing of the 4+8 forecast.This is expected to become favorable as the year progresses. • Working Capital, Cash to Claims and Tangible Net Equity (TNE) are all favorable. In the month of February, there will often be a carryover of balance for pass-through funds. L.A. Care received Private Hospital Directed Payment (PHDP) funds of $373	

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	million that inflated the cash to claim ratio. Adjusting for that, the cash to claims would be 0.89, which is comparable to January at 0.87. Tangible Net Equity (TNE) is 864% of the required reserves, and represents 111 days of cash on hand. If the carryover balance referenced before is removed, the days of cash on hand would be closer to 99. **Motion EXE 100.0424** **To accept the Financial Reports for February 2024, as submitted.**	**Approved unanimously.** **4 AYES**
• Monthly Investment Transactions Reports – February 2024	Mr. Ingram referred Board Members to the investment transactions reports included in the meeting materials (*a copy of the report is available by contacting Board Services)*. This report is to comply with the California Government Code as an informational item. L.A. Care's total investment market value as of February 29, 2024. • $3.4 billion managed by Payden & Rygel and New England Asset Management (NEAM) • $35 million in Local Agency Investment Fund • $80 million in Los Angeles County Pooled Investment Fund • $125 million in BlackRock Liquidity T-Fund Mr. Ingram noted that there is a new investment vehicle with $125 Million in the BlackRock Liquidity T-Fund. Mr. Ingram complimented Jason Chen, *Senior Manager, Accounting Treasury*, for his work in locating this opportunity with elevated interest rates. This fund allows L.A. Care to sweep the daily operating account overnight into a black box liquidity fund, which is just investing in AAA treasuries. Throughout the year, if interest rates remain elevated, this may raise an extra $3 million. Every night, funds in the operating account are swept into the liquidity fund and swept back the next morning. L.A. Care receives a higher interest rate overnight. He complimented Mr. Chen and his team for their work.	
COMMITTEE ISSUES		
To authorize a Letter of Credit from a financial institution for tenant improvements according the existing lease for 1200 W. 7th Street, Los Angeles	Mr. Ingram noted that in March, a motion was presented (FIN 104.0324) requesting delegated authority to enter into a contract in the amount of $47 million for leasehold improvements at the 1200 W. 7th Street building. The lease requires L.A. Care to acquire a letter of credit and this motion will delegate authority to the CEO to acquire the letter of credit. Wells Fargo requires Board action for a letter of credit, which will	

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	unlock the $24 million leasehold improvements paid by the landlord. The motion language is longer than normal, and is required by Wells Fargo. **<u>Motion EXE 101.0524</u>** **To approve L.A. Care (a) obtaining a letter of credit from a financial institution (such as Wells Fargo Bank, N.A.) to be delivered to the landlord of the Garland building for tenant improvements, as required per L.A. Care's lease contract and (b) cash collateralizing the letter of credit by pledging $22,727,390 in unrestricted cash to said financial institution in exchange for the letter of credit and depositing said cash with said financial institution.** **The Board of Governors have determined that pursuant to California Welfare & Institutions Code § 14087.9605 (b)(2)(d) and (c), L.A. Care is permitted to "contract for services required to meet its obligations" and to "acquire, possess, and dispose of real or personal property" and obtaining and securing the letter of credit in order to facilitate the Tenant Improvements will allow L.A. Care to meet its obligations. Additionally the Board of Governors have determined that it may "dispose" of its personal property by cash collateralizing the letter of credit. Further, pursuant to California Welfare & Institutions Code § 14087.9665 (a) L.A. Care may borrow or receive funds from any person or entity as necessary to cover development costs and other actual or projected obligations of the local initiative and the Board of Governors have determined that obtaining and securing the letter of credit in order to facilitate the Tenant Improvements is necessary to cover actual or projected obligations of L.A. Care. The Board of Governors have identified $22,727,390 in unrestricted cash which may be used to cash collateralize the letter of credit by depositing said cash to a public funds interest bearing account with said financial institution providing such letter of credit.** **The Chief Financial Officer, the Deputy Chief Financial Officer, or person duly appointed in writing to act in the stead of such officer (collectively, the "Responsible Officers"), is hereby authorized and directed for and in the name of and on behalf of L.A. Care to further negotiate the terms of the letter of credit and fees and security relating thereto and execute and deliver documents and instruments relating to the letter of credit and cash collateralizing and pledging funds to secure the letter of credit with such changes therein, deletions therefrom and additions thereto as may be approved**	**Approved unanimously. 4 AYES**

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	(i) by any Responsible Officer, in such person's discretion, as being in the best interests of L.A. Care, and (ii) by L.A. Care's General Counsel, such approval to be conclusively evidenced by the execution and delivery thereof by the person executing the same on behalf of L.A. Care (the "LC Documents"). **Further Actions. The Responsible Officers are, and each of them acting alone is, hereby authorized and directed to take such actions and to execute such documents and certificates as may be necessary to effectuate the purposes of this resolution, including the execution and delivery of the LC Documents, and execution and delivery of any and all memorandums of agreement or understanding, assignments, certificates, requisitions, agreements, notices, consents, instruments of conveyance, warrants and other documents, which they, or any of them, deem necessary or advisable in order to consummate the transactions and requirements as described herein.** **All actions heretofore taken by any officer of L.A. Care with respect to the execution and delivery of LC Documents, and the cash collateralizing and pledging funds to secure the letter of credit described therein are hereby approved, confirmed and ratified.**	
Contract with the Department of Health Services Housing for Health in partnership with Brilliant Corners to provide support on accessibility improvements in Interim Housing facilities throughout Los Angeles County	Charlie Robinson, *Senior Director, Community Health,* summarized a motion to approve a contract with the Los Angeles County Department of Health Services (DHS) Housing for Health in partnership with Brilliant Corners, to provide support for accessibility improvements in interim housing facilities throughout Los Angeles County. He reported that the motion is for an investment to support activities of daily living and other supports in interim housing and other sheltered environments. L.A. Care provides community supports for similar services for plan members who are housed. This investment fills a gap for members experiencing homelessness who are in a sheltered environment, in tiny homes, in term housing sites, hotels, and motels, in many cases to help them stay in those locations when they need extra help. The funding has been approved by L.A. Care's internal finance team. Board Member Shapiro asked how many people are going to be reached with this, and what is the impact. Mr. Robinson responded that in many cases, people who are moving into interim housing locations or people who are in shelters, need a little bit of extra help. The help could be grab bars so people can safely use showers. It can be help with mobility and similar things. It brings services to people who are in interim housing	

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	sites, so they can stay in those sites, and ultimately move into permanent supportive housing when available. Dr. Amin responded that perhaps the larger question is about the number of folks that have been helped by some of L.A. Care's Community Supports programs, which provide housing navigation and housing deposits. The members served by the housing navigation and tenancy support services is about 15,000, and the housing deposits is probably around 300. **Motion EXE 102.0524** **To authorize staff to execute an Housing and Homelessness Incentive Program (HHIP) investment agreement in the amount of up to $3,500,000 with the Los Angeles County Department of Health Services in partnership with Brilliant Corners, to provide accessibility improvements in Interim Housing facilities throughout Los Angeles County to ensure residents with disabilities are able to be safely housed in the facilities from September 1, 2024 to September 30, 2027.**	**Approved unanimously.** **4 AYES**
Human Resources Policies • HR-108 (Holiday) • HR 202 (Anti-Discrimination and Anti-Harassment) • HR-228 (Non-Fraternization Policy) • HR-306 (Equal Employment Opportunity)	Terry Brown, *Chief Human Resources Officer,* introduced Darren Lee, *Deputy Chief Human Resources Officer.* Mr. Brown presented revised Human Resources Policies. The revised policies were written to comply with changes to regulatory, legislative and judicial changes, and reflect changes in L.A. Care's practices. Policy HR-108 was recently approved but a drafting error was discovered for employees on alternative work schedules. The revised policy is presented again for approval. There are revisions to four policies summarized in the chart below. He thanked Board Member Booth for her suggested edits to HR - 202. Those edits, which do not substantively change the nature of the policy, will be included in the final version.	

Policy Number	Policy	Section	Description of Modification
HR-108	Holidays	Benefits	Revision – Section 4.7 updated for Non-Exempt employees and added Make Up Time Request Form
HR-202	Anti-Discrimination	Employee Relations	Revision- Added section 3.6.2 and minor edits to sections 1.1 and 3.

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<tr><th>AGENDA ITEM/PRESENTER</th><th>MOTIONS / MAJOR DISCUSSIONS</th><th>ACTION TAKEN</th></tr>
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<tr><td>HR-228</td><td>Non-Fraternization</td><td>Employee Relations</td><td>Transfer policy to new template and edit Section 4.1 to include non-management employees</td></tr>
<tr><td>HR-306</td><td>Equal Employment Opportunity</td><td>Employment</td><td>Revision- added DEI Statement and Cannabis use protection</td></tr>
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<u>Motion EXE A.0424</u>
To approve the Human Resources Policies HR 108 (Holidays), HR-202 (Anti-Discrimination), HR-228 (Non-Fraternization), and HR 306 (Equal Employment Opportunity), as presented.</td><td>Approved unanimously.
4 AYES</td></tr>
<tr><td>Annual Disclosure of Broker Fees in compliance with AB 2589</td><td>Mr. Brown referred to an informational memorandum included in the meeting materials that outlines base commission rates for the various employee benefits that are procured on a commission basis (a copy of the report can be obtained by contacting Board Services). The rates are shown for 2023 and 2024. He reported that the rates have remained the same with one exception: the rate for health coverage through Kaiser was lowered from 1.5% to 1.25%.

A second memorandum in the meeting materials is from Pearl Meyer, the outside consultant that provides a comparison between the rates that L.A. Care pays against the rates in the marketplace. He noted that for organizations of similar size, the results show that L.A. Care's median total broker rate is 2.59%, and the median for the marketplace is at 3.53%. L.A. Care pays almost a full percentage point below that commission rate, paying 1.74% for employee health care coverage. The broker fee range in the marketplace is between 3% and 4%, L.A. Care is almost half of the lower end of that range. He commented that L.A. Care's brokers have served very well in helping to keep those brokerage fees as low as possible.

Board Member Booth complimented the staff for this report and for all who are working to keep these rates as low as possible.</td><td></td></tr>
<tr><td>Approve Consent Agenda</td><td>Approve the list of items that will be considered on a Consent Agenda for May 2, 2024 Board of Governors Meeting.
• April 4, 2024 meeting minutes</td><td></td></tr>
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	• Contract with the Department of Health Services Housing for Health in partnership with Brilliant Corners to provide support on accessibility improvements in Interim Housing facilities throughout Los Angeles County • To authorize a Letter of Credit from a financial institution for tenant improvements according the existing lease for 1200 W. 7th Street, Los Angeles • Technical Advisory Committee Revised Charter	**Approved unanimously.** **4 AYES**
PUBLIC COMMENTS	There were no public comments.	
ADJOURN TO CLOSED SESSION	The Joint Powers Authority Executive Committee meeting adjourned at 2:49 pm. Augustavia J. Haydel, Esq., *General Counsel* announced the items for discussion in closed session. She announced there is no report anticipated from the closed session. The meeting adjourned to closed session at 2:50 pm. 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: *April 2026* CONTRACT RATES Pursuant to Welfare and Institutions Code Section 14087.38(m) • Plan Partner Rates • Provider Rates • DHCS Rates THREAT TO PUBLIC SERVICES OR FACILITIES Government Code Section 54957 Consultation with: Tom MacDougall, *Chief Information & Technology Officer* 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 L.A. Care Health Plan's Notice of Contract Dispute under Contract No. 04-36069 Department of Health Care Services (Case No. Unavailable)	

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	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 PUBLIC EMPLOYEE PERFORMANCE EVALUATION, PUBLIC EMPLOYMENT and CONFERENCE WITH LABOR NEGOTIATOR Sections 54957 and 54957.6 of the Ralph M. Brown Act Title: Chief Executive Officer Agency Designated Representative: Alvaro Ballesteros, MBA Unrepresented Employee: John Baackes	
RECONVENE IN OPEN SESSION	The meeting reconvened in open session at 3:44 pm. No reportable actions were taken during the closed session.	
ADJOURNMENT	The meeting adjourned at 4:31 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:
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AA470E43B1BB4A1...
Alvaro Ballesteros, MBA, *Board Chairperson*
Date: 5/30/2024 | 11:42 AM PDT

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