

Board of Governors
Regular Meeting Minutes #285
February 6, 2020

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



Members

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

Antonia Jimenez*
 Hilda Perez
 Honorable Mark Ridley-Thomas
 G. Michael Roybal, MD, MPH
 Ilan Shapiro, MD
 Nina Vaccaro, MPH*

*Absent **Via teleconference

Management/Staff

John Baackes, *Chief Executive Officer*
 Terry Brown, *Chief of Human Resources*
 Augustavia Haydel, *General Counsel*
 Dino Kasdagly, *Chief Operating Officer*
 Alex Li, MD, *Deputy Chief Medical Officer*
 Thomas Mapp, *Chief Compliance Officer*
 Marie Montgomery, *Chief Financial Officer*

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
WELCOME	<p>Hector De La Torre, <i>Chairperson</i>, called the meeting to order under a regular and Special Supplemental Agendas for L.A. Care and Joint Powers Authority at 2:16 p.m. The meetings were conducted simultaneously. Board Members introduced themselves.</p> <p>He announced that members of the public may address the Board on matters listed on the agenda before or during the Board’s consideration of the item, and on any other topic in the public comment section on the agenda.</p>	
MEETING HELD IN MEMORY OF MS. MAGGIE BELTON	<p>Margaret Belton was a member of L.A. Care volunteer family since 2015, and will be remembered and honored for her deeds, her character, and her strength.</p> <p>She was a member and Vice Chair of L.A. Care Regional Community Advisory Committee (RCAC) 3. Ms. Belton never sought recognition but was eagerly involved in improving the health of her community. Ms. Belton was a force to be reckoned with and made friends easily with everyone. Her wise counsel, bright smile and happy fellowship will be greatly missed by the members of RCAC 3 and the communities she served.</p> <p>Ms. Belton retired early and began her journey and life’s work of volunteering and advocating for the senior and disabled community of Los Angeles County.</p> <ul style="list-style-type: none"> • Ms. Belton completed her Bachelor of Arts degree in Political Science and Sociology at Howard University in Washington DC, • She held a Bachelor of Science, Registered Nurse degree from Arizona State University, 	

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	<ul style="list-style-type: none"> • She also held a Masters in Health Administration from Indiana University-Purdue in Indianapolis, • She served in the United States Air Force. <p>Ms. Belton also served and represented the 5th District for Kathryn Barger, Supervisor, Los Angeles County Board of Supervisors, and former 5th District Supervisor, Michael D. Antonovich. She served on a multitude of other community organizations.</p> <p>Ms. Maggie will be remembered for her tremendous contributions, her commitment to everything she put her heart and soul into, and leaves in passing many friends. The lives of the deceased live on in the memories of the living. She was a great advocate.</p> <p>Ms. Perez noted that on behalf of the L.A. Care community advisory committee members she attended Ms. Belton’s memorial. Ms. Perez also noted that Ms. Maggie was a fashionista who loved to dress stylishly. She will be missed.</p>	
APPROVAL OF MEETING AGENDA	<p>The agenda was approved as submitted.</p>	<p>Unanimously approved. 9 AYES (Ballesteros, Booth, De La Torre, Ghaly, Gonzalez, Greene, Perez, Roybal, and Shapiro)</p>
PUBLIC COMMENT <i>Comments are summarized, not verbatim.</i>	<p>Carolyn Navarro stated that last time she was interrupted when she participated by telephone and it agitated her. The reason she is here is that her daughter, Vanessa Navarro, received poor care through Synermed. She has noticed that L.A. Care has not mentioned much about this case. In March of 2018 it was noted that L.A. Care was trying to assist doctors affected by Synermed. Synermed was caught obstructing access to patients who needed access to care. She has studied this carefully as the mother of a victim of one these patients. Her daughter became very ill in 2013. Because of Synermed she was transferred back and forth between hospitals, causing her to bleed in the brain and went 10 days undetected. When they finally diagnosed that she had a brain clot, she had so much blood on her brain that she was in an induced coma for 9 days. This was because of Synermed bouncing their daughter back and forth between hospitals when she was gravely ill and wasn’t ready to be transferred to another hospital. In spite of their protests she was forced to be transferred back and forth between these hospitals. During this time, she lost a severe amount of weight. Her deadly brain clot was in her cerebellum which caused more weight loss. (Ms. Navarro showed a pair of small pants that her daughter wore as</p>	

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	<p>she described how much weight she had lost.) Ms. Navarro stated she wore to this meeting a t-shirt that she wore in the hospital when her daughter was ill. She said the t-shirt had food stains because she was feeding her daughter when they were doing a very poor job of feeding her. Ms. Navarro turned in 12 grievances that they ignored. She told them they wanted her daughter seen by a specialist. They told them to take their daughter's records, drive 15 miles away while their daughter was hospitalized to get a second opinion for their daughter. She announced that their daughter died and she showed a photo. She looked into this. She went out of her way in 2014 to alert this agency about what happened to her daughter at Pacific Alliance Medical Center, who happened to own Synermed. They got caught in conflict of interest where they actually had an improper relationship with the doctors and were cited \$33 million by the Office of Inspector General. She said she may have that wrong. In December 2019, L.A. Care was fined \$350,000 for failure of oversight over Synermed. She came to a Board meeting in 2015 trying to tell this Board everything that happened. When she complained about Care 1st, which was the agency overseeing the care of her daughter, her complaints were forwarded by L.A. Care to Care 1st. She complained to L.A. Care about Care 1st. Pacific Alliance Medical Center owned them.</p> <p>April Stom discussed L.A. Care's denial for care and delays in processing appeals. She believes there are other patients that don't receive care. She stated that L.A. Care doesn't care. L.A. Care's lack of communication is keeping her ill. Last night L.A. Care backtracked on what is typed in the denial letter, and said L.A. Care never said it wasn't medically necessary. She has it in writing and on an audio recording from last week when she was forced to come to L.A. Care's offices. She stated that L.A. Care is reviewing for medical necessity. L.A. Care's right and left hands are not communicating with its brain at all. L.A. Care employee reviews prove that. Today is the 31st day since she filed her expedited appeal and zero acknowledgement letters have been received by her, no matter how many times she demands one. By way of refusal to let her speak to anyone about her appeal she was forced to come to L.A. Care offices twice. In February 2019 she fought for the right to upper level care through the State ombudsman and Department of Managed Health Care. L.A. Care blamed Synermed back then for impeding her health care on a recorded line when L.A. Care's employee called her and was fully aware of being recorded. She demanded upper level care because L.A. Care's choices of neurologists were refusing to do anything or help her with a rare serious diagnosis she was dealing with at the time. It turns out it was L.A. Care that was refusing according to recent court losses. Her doctor at the time, Dr. Chang, while already having assigned a neurosurgeon, at some point decided he wasn't taking Medi-Cal patients any longer. He never notified her. She only found out when she needed help the most and she had to wait 24 hours for him to tell her he wasn't her doctor from the time she called needing help with new symptoms. Instead of</p>	

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	<p>receiving the help she needed she was rudely spoken to like she does not matter. Right after Christmas L.A. Care took away the doctor that has been helping her for two years that she fought for, and the monthly IV therapy that they have been giving her consecutively for two years. And L.A. Care sent her back to Dr. Chang. She said, "Thank you, very thoughtful". L.A. Care might as well have typed Synermed at the top of the denial. She left Mr. Baackes a voice mail on February 26, 2018, asking for help as well. She did not get a call back. She has an audio recording of her voice mail if he would like to hear it. She keeps extremely good records of things related to the problems with Synermed and it is still on top of the referrals and denials, covered in her tears. Synermed has had its claws in her since she lived in Orange County in about 2014. She knew then, as she knows now, that L.A. Care is impeding her health care. It doesn't matter who L.A. Care wants to place blame on, L.A. Care was found guilty in court. Now, in retaliation and in the very month L.A. Care was found guilty, L.A. Care impeded on her health care again. L.A. Care continues to make mistakes, back track and lie. She asked that L.A. Care fix its mistakes now, please. Her health is at stake. She is spiraling into pain while L.A. Care continually lies and makes mistakes. Literally lives depend on L.A. Care's ability to do its job correctly.</p> <p>Chairperson De La Torre thanked both speakers and asked that they let Board Services know if they want to speak with Member Services while they are here today.</p> <p>Albert Navarro, wanted to say that L.A. Care was supposed to oversee Care 1st. Care 1st sent his daughter to a hospital that was 15 miles away from where she lived and his daughter's doctors did not have privileges at that hospital. He protested and Care 1st turned a blind eye. The hospital was Pacific Alliance Medical Center. He is thankful that the hospital was fined \$42 million and shut down.</p> <p>Rachel Rose Luckey, advocated for Demetria Saffore, a member of RCAC 1. A couple of years ago Ms. Saffore reported to L.A. Care an incident where a Taser was fired at her. There was an investigation. A letter was written by Mr. Oaxaca based on a report about that investigation. In the letter, Mr. Oaxaca accused Ms. Saffore of lying about the incident. In the letter he admonished her for a violation of the Code of Conduct because of her perceived dishonesty. In November or the first part of December, Ms. Luckey made a Freedom of Information Act (FOIA) request on behalf of Ms. Saffore, requesting that report. Last month she received notification from L.A. Care's legal department that they would not honor the FOIA request as they considered it a personnel matter. As a RCAC member and Vice Chair, Ms. Luckey is not one of L.A. Care's personnel and neither is Ms. Saffore. Ms. Luckey thinks it is completely outrageous for Mr. Oaxaca to be able to issue a letter calling Ms. Saffore a liar and admonishing her for a perceived violation of the Code of Conduct when she was not interviewed by the</p>	

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	<p>investigator who made the report, and she is unable to have a copy of the report that generated the letter from Mr. Oaxaca. She asked the Board to mandate that the legal department release that report to Ms. Saffore so she can see the allegations brought against her that caused the generation of the despicable letter. She would really appreciate if the Board would heed her request.</p> <p>Chairperson De La Torre thanked Ms. Luckey for her comments and responded that Augustavia Haydel, <i>General Counsel</i>, would look into the matter.</p>	
<p>CONSENT AGENDA ITEMS APPROVED BY A COMMITTEE</p>	<p>The items on the Consent Agenda approved by a Committee were considered by the Board:</p> <ul style="list-style-type: none"> • Approve December 5, 2019 meeting minutes as amended • Legal Services Policy LS-010 (Delegation of Authority to Approve, Compromise, and/or Settle Certain Pre-Litigation Claims and Pending Litigation) <u>Motion EXE 100.0220</u> To approve revisions to LS-010 – Delegation of Authority to Approve, Compromise and/or Settle Certain Pre-Litigation Claims and Pending Litigation as attached and authorize General Counsel (or designee) to make any non-substantive changes that may be required to implement the approved changes. <ul style="list-style-type: none"> • RCAC Members <u>Motion ECA 100.0220</u> To approve the following as members to the Regional Community Advisory Committee (RCAC), as reviewed by Executive Community Advisory Committee (ECAC) at its December 11, 2019 and January 8, 2020 meetings: <ul style="list-style-type: none"> ○ Joyce M. Sales, Consumer, RCAC 6 ○ Martha Pedroza, Consumer, RCAC 7, ○ Martha Gasca-Landin, Consumer, RCAC 8 ○ Hong Sok Pham, Consumer, RCAC 9 • Ratify Election of RCAC 11 Vice Chair <u>Motion ECA 101.0220</u> To ratify the election of Gladis Álvarez as Vice Chair of Regional Community Advisory Committee (RCAC) Region 11 for the remaining term vacated by Maria Angel Refugio. 	<p>The Consent Agenda and Recommended Consent Agenda items were unanimously approved. 11 AYES (Ballesteros, Boots, De La Torre, Gonzalez, Greene, Jimenez, Perez, Ridley-Thomas, Roybal, Shapiro and Vaccaro)</p>

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	<ul style="list-style-type: none"> • Ratify Election of ECAC Chair and Vice Chair <u>Motion ECA 102.0220</u> To ratify the election of Fatima Vasquez as Chairperson and Cynthia Contreas-Wood as Vice Chairperson of the Executive Community Advisory Committee (ECAC) for the calendar year 2020. • Revised 2020 Board and Committee Meeting Schedule <u>Motion BOG 100.0220</u> To approve the revised 2020 Board of Governors meeting schedule as submitted. • Verizon Business <u>Motion BOG 101.0220</u> To authorize staff to execute a contract in an amount not to exceed \$2.9 million with Verizon Business to provide telecommunication services for three years. • Quarterly Investment Report <u>Motion FIN 100.0220</u> To accept the Quarterly Investment Report for the quarter ending December 30, 2019, as submitted. • Staff Augmentation Vendors <u>Motion FIN 101.0220</u> To authorize additional spending with the following vendors: Cognizant, Infosys, HCL, Solugenix Corp, Insight Global and Synaptix in an amount not to exceed \$9,600,000 (not to exceed \$59,622,178) for capital and operating consulting expenditures through September 30, 2020. 	
CHAIRPERSON'S REPORT	There was no report from the Chairperson.	
CHIEF EXECUTIVE OFFICER REPORT	<p>John Baackes, <i>Chief Executive Officer</i>, referred to his written report in the meeting materials (<i>a copy of his report is available by contacting Board Services</i>).</p> <ul style="list-style-type: none"> • Elevating the Safety Net program has awarded 29 grants since September 2018 to primary care practices and clinics that will bring new primary care physicians into Los Angeles County. As of January 2020, 69 physicians have been hired by safety net providers. Of those, 28 have applied for medical school loan repayment relief. L.A. Care has also awarded 16 medical school scholarships to Charles Drew University and UCLA medical schools. • L.A. Care's housing for health program has housed 254 households. 	

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	<ul style="list-style-type: none"> • IHSS home care training has graduated 2,469 caregivers who are serving L.A. Care patients. L.A. Care is delighted with the progress these programs are making and the feedback received is quite encouraging that these programs are making a difference. • A significant lawsuit was filed against L.A. Care by Dignity Hospitals in 2016 claiming that hospitals that do not have a contract with L.A. Care can bill L.A. Care for full charges to care for L.A. Care Medi-Cal members admitted to the hospital through the emergency room. California state law requires that non-contracted hospitals are entitled to receive Medi-Cal rates. The court found that L.A. Care was correct and Dignity appealed the ruling. Recently the Court of Appeals handed down a unanimous decision in favor of L.A. Care. This win is important for Medi-Cal health plans in California to preserve fiscal stability. There were a number of amicus briefs filed with the Court in favor of L.A. Care. L.A. Care continues to negotiate contracts with Dignity Hospitals. • L.A. Care changed its transportation vendor to Call the Car as previously reported. L.A. Care continues to receive positive feedback from members. Statistics on Call the Car operations have indicated improvement in getting members to appointments on time. <p><i>(Member Ridley-Thomas joined the meeting.)</i></p> <p>Dino Kasdagly, <i>Chief Operating Officer</i>, noted that L.A. Care monitors transportation data daily. The performance of Call the Car is outstanding. He reminded members to cancel unneeded transportation arrangements or L.A. Care pays a fee to the vendor. The number of rides has increased to 165,000 rides monthly (from previous rate of about 110,000). The transportation benefit is making a difference because people are getting to their appointments. Transportation costs are up and it is the right cost to bear.</p> <p>Mr. Baackes noted that L.A. Care is looking at ways to improve and help people access care, receive better care and have better health care outcomes. L.A. Care is working to integrate social safety net services with health care services to improve health outcomes and ultimately reduce the cost of healthcare.</p> <ul style="list-style-type: none"> • Mr. Baackes reported that federal regulatory changes are proposed pursuant to the Medicaid Fiscal Accountability Regulation. Changes are proposed to the rule in how states fund the Medicaid program. Today there are funds paid to Medi-Cal plans as capitation, and those funds are used to reimburse the doctors and hospitals for their services. On top of that, hospitals and organizations like Los Angeles County Department of Health Services (DHS), receive additional supplemental payments. The way those supplemental payments are organized and disbursed is being challenged. A substantial decrease in funds could result 	

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	<p>unless an alternative mechanism is created. This is important for these providers and L.A. Care is following it very closely. This is an area where letters from the public wouldn't hurt. He offered that L.A. Care would provide members with suggested language objecting to this proposal.</p> <p>A second proposal for Medicaid block grants has received a lot of exposure but would not affect L.A. Care members.</p> <ul style="list-style-type: none"> • The public charge rule changes have cleared court challenges but other challenges remain. This has had a chilling effect on enrollment in programs for which people are eligible but are afraid to enroll because it could affect citizenship applications. • L.A. Care has outstanding providers and a provider recognition dinner was held to acknowledge the groups that work hard to provide access to quality services for L.A. Care members. <p>Member Perez asked about L.A. Care's position on the changes to the public charge and how potentially affected members could be advised. Mr. Baackes responded that the rule change is now in effect. People can follow the work of groups such as the ACLU for information on this rule. People can also write letters to the editor of the newspaper or other public venues about the effect of the rule change. This rule can be changed legislatively.</p> <p>Chairperson De La Torre noted that the regulation can still be challenged. The attempt to block the changes was denied by the courts. The substance of the regulation can still be litigated, which will take longer. In the meantime, those who may be affected will need to decide for themselves whether to apply for benefits for which they may be eligible, but may affect their application for citizenship. Statistics show that over 800,000 of the uninsured would qualify for Medicaid but have not enrolled. There is a negative impact for public health when people are afraid to enroll.</p>	
GRANTS AND SPONSORSHIP REPORTS FOR OCTOBER, NOVEMBER and DECEMBER, 2019	<p>Mr. Baackes noted that the written report is included in the meeting materials.</p>	
VISION 2021	<p>Member Booth noted the meeting materials included the Vision 2021 document without a Progress Report. The Executive Committee reviewed the December 2019 Progress Report which she has since reviewed with Wendy Schiffer, <i>Senior Director, Strategic Planning, Strategy,</i></p>	

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	<p><i>Regulatory and External Affairs</i>, hoping to revise the report to more clearly indicate the positive impact of L.A. Care’s support for physicians and other providers.</p> <p>Chairperson De La Torre welcomed Member Ridley-Thomas. He thanked Susan Ma for the Lunar New Year treats.</p>	
<p>CHIEF MEDICAL OFFICER REPORT</p>	<p>Mr. Baackes reported on behalf of Richard Seidman, MD, <i>Chief Medical Officer</i>. Attended RCAC 8, recognize the staff supporting the A State Auditor’s Report on statewide lead screening for children was released January 7, 2020 From 2009 to 2018, 1.4 million of the 2.9 million 1 and 2-year-old children on Medi-Cal were not appropriately screened for lead. The average screening rate in the U.S. is 45%, 36% in CA, and 65% for L.A. Care, twice the statewide average.</p> <p>Current and past interventions include:</p> <ul style="list-style-type: none"> • educational brochures sent to members. • provider reminders of recommended lead screening guidelines. <p>Additional planned interventions include:</p> <ul style="list-style-type: none"> • Offer a webinar for providers to increase screening rates. • Offer educational materials to our network providers that can be distributed in their practices. • Analyze our internal data to determine regional and provider level screening rates to identify opportunities to improve. • Collaborate with the Department of Public Health to increase screening rates and facilitate referrals consistent with recommended guidelines. <p>He reminded parents to ask pediatricians to screen for lead for 1 and 2 year olds. Member Booth asked about new data that may show the necessity for screening and Mr. Baackes responded that about 5% of children screened show elevated levels of lead exposure.</p> <p>Alex Li, MD, <i>Deputy Chief Medical Officer</i>, noted that from a practice guideline perspective there has been a de-emphasis on the national level for lead screening in general, but certain populations may have a higher risk for having mild to moderate lead levels.</p> <p>Novel Corona Virus Update as of February 4, 2020</p> <ul style="list-style-type: none"> • Chance of being exposed is limited outside of China. • More than 20,000 cases and over 400 deaths, predominantly in China. • Cases now found in more than 20 countries. 	

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	<ul style="list-style-type: none"> About a dozen cases in the U.S. with half of them in California, with one in L.A. County. <p>Here are some tips on how to avoid the flu and coronavirus:</p> <ul style="list-style-type: none"> Hand washing and the flu vaccine remain the most effective prevention to avoid the flu and other respiratory illnesses during the cold and flu season. Masks are not recommended for the general public. There is no reason to suspect anyone of having the virus solely on the basis of actual or perceived national origin. <p>While the outbreak is a cause for concern nationally and internationally, of greater concern is that influenza is far greater risk in US and it is strongly recommended that everyone get a flu vaccine.</p>	
<p>Presentation by Deborah Prothrow Stith, MD, Dean, College of Medicine, Charles Drew University</p>	<p>Chairperson De La Torre wished a Happy Birthday to Dr. Prothrow Stith.</p> <p>Mr. Baackes introduced Dr. Prothrow Stith and thanked her for coming. Members requested a presentation from one of the medical schools at which the L.A. Care Scholars are studying.</p> <p>Dr. Prothrow Stith presented information on diversity among American medical school students. <i>(a copy of her presentation is available by contacting Board Services.)</i></p> <p>The data shows that scholarships are important to encourage participation in medical schools. Applicants and students accepted to medical schools in the U.S. are mostly of the white or Asian races. For the underrepresented racial groups, the question is what can be done to improve the representation of those groups in medical schools.</p> <p>Providing scholarships for students who already have undergraduate school debt will improve their chances of being able to attend medical school and remain in the safety net community. Raising the number of students in medical school from certain racial backgrounds who are committed to helping the safety net community, could help to improve health outcomes in those communities.</p> <p>Racial and ethnic minorities have higher rates of chronic disease, obesity and premature death than white people. Black patients in particular have among the worst health outcomes, experiencing higher rates of hypertension and stroke. Black men have the lowest life expectancy of any demographic group, living an average 4.5 fewer years than white men. African Americans make up 13% of the US population but only 4% of U.S. doctors and less than 7% of U.S. medical students. There is data that health outcomes improve for black males if their doctor is also a black male. The decades long decline in the number of black male</p>	

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	<p>applicants to medical schools has plateaued in 2019 but the number is still much lower than what is needed or expected.</p> <p>Charles Drew University (CDU) graduates are twice as likely to practice in underserved areas than other medical school graduates. Each year nearly 70% of CDU graduates choose primary care residency programs, 40% in family medicine. CDU graduates are mostly from California (91%), 70% are from Los Angeles County.</p> <p>Member Perez thanked Dr. Prothrow Stith for coming to the meeting and presenting the information. Members want to know that the scholarship recipients will serve the safety net in Los Angeles County. One of her goals has been to shorten the wait time that members experience in getting care, which is one reason she is supportive of the Elevating the Safety Net program. It is important to get the information to L.A. Care’s advisory committee members. She thanked Dr. Prothrow Stith on behalf of the members for describing how the scholarship recipients are selected. She suggested including information about LGBTQ community participation. Dr. Prothrow Stith noted that the data includes the LGBTQ community as well as a lot more data. This presentation is an overview and that data is not shown in detail.</p> <p>Ms. Gonzalez noted that an L.A. Care advisory committee member frequently asks about sensitivity training, so she asked on that member’s behalf if sensitivity training is provided to the students.</p> <p>Dr. Prothrow Stith responded there is a set of institutional learning objectives for CDU that includes social justice, community engagement, research expertise, health policy work and global health. Every student at CDU is exposed to those five areas of work. A challenge is to incorporate those in the curriculum. The orientation month for new Residents includes sensitivity training and it is included in the student experience along the way. CDU accepts students to medical education based on history of service and commitment so all come with robust volunteer activities and commitment to serving in underserved communities. The goal of the program is to supplement that base of service and experience.</p> <p>Member Ballesteros asked about outreach earlier in a young person’s education to encourage an interest in medicine, dental or mental health.</p> <p>Dr. Prothrow Stith discussed CDU’s valued high school programs to encourage medical school participation. Two graduates of CDU medical school have come up through that program. The King Drew Magnet High School is on the CDU campus and there are a series of connections to CDU for those students.</p>	

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	<p>Mr. Baackes again thanked Dr. Prothrow Stith for her presentation and noted that L.A. Care views its relationship with CDU and with Martin Luther King JR Community Hospital (MLK) as partnerships. Dr. Prothrow Stith noted that in March CDU will conduct the first continuing medical education event at MLK.</p>	
COMMITTEE REPORTS		
<p>Executive Community Advisory Committee (ECAC)</p>	<p>Attended RCAC 8, recognize the staff supporting the</p> <p>PUBLIC COMMENT:</p> <p>Rachael Rose Luckey commented that at the December ECAC meeting she questioned Mr. Oaxaca about the issue she raised earlier today. Because of a new rule voted in by ECAC but really pushed by staff in a committee meeting, there are new changes to public comment. The new rule is one question or one comment and once you make that comment you can sit down. Ms. Luckey feels she has demonstrated that she can give three comments in one minute. So the spirit of The Ralph M. Brown Act, where we are supposed to give people opportunity to speak to the deliberative bodies that oversee us, she believes that we must allow people their three minutes to say whatever they want to say. For the people that are being addressed to not comment back is fine. But she was shut down mid-sentence because, in her mind, it was an uncomfortable discussion that she was trying to have with a staff member. She will push RCAC and ECAC to change the rule to a time limit, and so people are not shut down. She wanted to bring it to the Board's attention and she hopes it can be solved.</p> <p>Chairperson De La Torre noted that this will be reviewed. Time is the common mechanism for public comment and L.A. Care will look into this.</p> <p>Member Gonzalez acknowledged the RCAC members attending today's meeting. ECAC met on December 11 and January 8 (minutes are available by contacting Board Services). At the December 11 meeting:</p> <ul style="list-style-type: none"> • Francisco Oaxaca, <i>Senior Director of Communications and Community Relations</i>, reported on the success of Care Harbor. Over 2500 people received services from over 300 providers and other volunteers. He also notified the Committee that the Pomona Community Resource Center is open for business. • Fatima Vazquez, <i>RCAC 7 Chair</i>, was voted as the ECAC Chair and Cynthia Contreas-Wood, <i>RCAC 3 Chair</i>, as the ECAC Vice Chair. • Karen Mahgerefteh, <i>Quality Improvement Project Manager</i>, reported on the benefit of Fluoride Varnish for Children aged 6 and under. <p>At the January 8 meeting:</p> <ul style="list-style-type: none"> • The Committee took time to honor the late Margaret Belton, <i>RCAC 3 Vice Chair</i>. 	

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	<ul style="list-style-type: none"> • Prity Thanki, <i>Local Government Advisor II, Government Affairs</i>, provided a legislative update and briefly spoke about work requirements for CalFresh recipients and applicants. The Trump Administration has changed the rules for the program effective April 1, 2020. • Mr. Oaxaca reported on the length of time it should take for members to receive approved Durable Medical Equipment. He also spoke briefly about SB 104. Starting on January 1, 2020 SB 104 will expand full scope coverage to eligible young adults between the ages of 19 through 25, regardless of immigration status. Changes to the public charge rule may affect the enrollment for this program. • Martin Vicente, <i>Field Specialist</i>, reviewed the Regional Community Advisory Committee work plan outcomes for 2019. • Rudy Martinez, <i>Safety and Security Specialist II, Facilities Services</i>, reviewed the annual emergency evacuation drill procedure and led the Committee, staff and the public in attendance on an evacuation drill. <p>Member Perez clarified her comment earlier that there is a lack of physicians in Los Angeles County and through the Elevating the Safety Net Program, L.A. Care is trying to address this. Mr. Vicente prepared a report for the ECAC meeting in a power point presentation and she wanted to give that presentation to the Board today. She understands that Mr. Oaxaca needs to approve a presentation to the Board, so she made a formal request to have this presentation given at a future Board meeting so everyone can see all the work that the Community Outreach & Engagement (CO&E) does to engage RCAC members and do awesome things in the community to benefit everyone's health.</p> <p>During the presentation it was mentioned that RCACs have three main goals and objectives.</p> <ul style="list-style-type: none"> • Train RCAC leaders in advocacy and leadership. The I Speak program trains members who would like to participate in legislative visits locally and in Sacramento to address issues affecting L.A. Care members. <ul style="list-style-type: none"> ○ Members Gonzalez and Perez are invited to participate in leadership training for Chairs and Vice Chairs, which includes discussion of topics such as Roles of Leadership, Effective Meeting Strategies, and Managing Difficult Conversations ○ Twenty-two members participated in the I Speak program. CO&E took those members on a bus tour of Los Angeles County holding a discussion of Social Determinants of Health. • Train RCAC members in specific areas: <ul style="list-style-type: none"> • Health Equity and Equality • Outreach and Education 	

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	<ul style="list-style-type: none"> • Complete RCAC work plans: <ul style="list-style-type: none"> ○ Sponsorships – \$55,000 in funding for food security sponsorships was granted to 11 community organizations to support <ul style="list-style-type: none"> ✓ Breakfast baskets for low wage workers ✓ Feed approximately 1700 individuals by initiating a community food hub ○ Colorectal cancer screening outreach – health promoters worked with RCAC members to reach 5,704 community members who received colorectal cancer information <p>Member Perez will meet with staff to determine ways to engage members in supporting these community organizations. She invited members to call her to provide input on how members can be more productive and “hands on” with the work plans. She encouraged members to provide input.</p>	
Children’s Health Consultant Advisory Committee	<p>Member Shapiro reported that the members of the Children’s Health Consultant Advisory Committee met on January 21.</p> <ul style="list-style-type: none"> ○ Rosina Franco, MD, Senior Physician with LAUSD, presented information about LAUSD School-Based Health Clinics. There are currently 14 clinics located inside 14 different LAUSD schools that provide free services to students including vision and reproductive health services. In addition to free services for students, free services are also provided to younger siblings living in L.A. County. ○ Author Karen Gross discussed Trauma Informed Care and the need for early intervention for childhood trauma. ○ Member Shapiro was approved as a member of the Committee. 	
Technical Advisory Committee	<p>Mr. Baackes reported that the Technical Advisory Committee (TAC) was recently reactivated and held a second meeting on January 22:</p> <ul style="list-style-type: none"> ○ Phinney Ahn, <i>Executive Director, Medi-Cal</i>, presented information about the Medi-Cal Healthier California for All Waiver (Formerly CalAIM) which will start in January 2021. A primary goal is to identify and manage member risk and need through Whole Person Care approaches and by addressing Social Determinants of Health as part of providing health care services for members. ○ Marina Acosta, <i>Health Equities Program Director</i>, presented on Social Determinants of Health and L.A. Care’s work in addressing the impacts on members and improving member experiences. L.A. Care is working on aligning social safety net services with members because of the significant impact on health outcomes and cost. 	
Executive Committee	<p>The Executive Committee met on January 27 (<i>a copy of the minutes can be obtained by contacting Board Services</i>). The Executive Committee reviewed and approved a motion to revise Legal Services</p>	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>Policy LS-010 (Delegation of Authority to Approve, Compromise and or Settle Certain Pre-Litigation) which was approved earlier in the Consent Agenda.</p>	
<p>California Governor's Budget Proposal January 2020</p>	<p>PUBLIC COMMENT: Ms. Luckey commented that on January 15, 2020, RCAC 4 unanimously passed a resolution to have L.A. Care support both the House and Senate Bills in the US Congress for Medicare for All. The resolution is to ask L.A. Care to add this to its legislative agenda and to advocate on Capitol Hill for the passage of the Medicare for All Act. L.A. Care definitely needs to make sure that every citizen and non-citizen has access to health care without any out of pocket cost, without any obstacles, barriers or prohibitions, to be able to get satisfactory high quality health care. Every other industrialized country in the world is able to provide this. All L.A. Care has to do is look at neighbors of the world and emulate how they are doing it.</p> <p>Mr. Baackes reported: The Governor has appointed a new director for California's Department of Health Care Service's (DHCS), Dr. Bradley Gilbert, who is the former CEO of Inland Empire Health Plan and a primary care physician. L.A. Care is delighted at the appointment of two physicians to lead Health and Human Services and DHCS and hoping this heralds an era that considers the patient first in planning regulations and oversight of health care in California.</p> <p>It was reported last week that California's Managed Care Organization (MCO) tax was rejected as had been expected. The MCO tax was not included in the current state budget so no immediate impact. The MCO tax expired last July and represented about \$1 billion in revenue for the Medi-Cal program. Loss of the tax will lead to a slight shortfall in revenue statewide. The total statewide funding commitment for Medi-Cal is \$110 billion. There is concern that this appears to signal continued animosity between federal and state administrations which may affect future decisions and could compromise the ability of California to serve Medi-Cal beneficiaries. He noted that in the recent State of the Union address, President Trump remarked that California provides coverage for undocumented residents. California does provide, at State expense, full coverage for the children of undocumented parents, through age 18. Legislation passed last year will extend Medi-Cal coverage to undocumented young adults 19-26 years old. The Governor has proposed in this year's budget to provide Medi-Cal coverage to undocumented people over 65. All of these programs are provided through state funding, not federal funding. L.A. Care watches for trends and precedent, and any activity which may compromise access to quality care for L.A. Care members.</p>	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
Finance & Budget Committee	<p>PUBLIC COMMENT:</p> <p>Ismael Maldonado, RCAC 2, commented that he had a stroke last December, was taken to Northridge Hospital through emergency services. Northridge Hospital told him they did not have a contract with L.A. Care and was transferred to Lakeside Hospital. He will report to member services and to Health and Human Services.</p> <p>Mr. Baackes noted that Dignity Health Systems has 4 hospitals in Los Angeles County. Anyone arriving at an emergency room cannot be turned away. The transfer was contrary to policy. He asked Mr. Maldonado to speak with an L.A. Care representative. L.A. Care is negotiating now for a sustainable price in a contract for all Dignity Health System hospitals.</p> <p>Ms. Luckey commented that RCACs don't receive the \$5,000 sponsorship money for the work plan. RCAC Members advise and staff makes a final decision on which community organization to support. She understands, having taken ethics training herself, that RCAC members cannot make those decisions. One idea is to have a budget that RCAC members can plan and take ownership.</p> <p>Chairperson De La Torre reported that the Finance & Budget Committee met on January 27 (<i>Minutes are available by contacting Board Services</i>).</p> <ul style="list-style-type: none"> • The Committee reviewed and approved a contract extension with Quest Analytics that does not require Board approval. 	
Chief Financial Officer Report Financial Reports for October, November, December 2019 Monthly Investments Transactions Report	<p>Marie Montgomery, <i>Chief Financial Officer</i>, presented highlights of the October, November and December 2019 financial reports included in the meeting materials. (<i>A copy of the report can be obtained by contacting Board Services</i>):</p> <ul style="list-style-type: none"> • Membership for December was unfavorable by 21,000 members, and about 35,000 member months year to date. • Expectations are that new enrollment in January will be lower than budget and L.A. Care will have continued monthly decreases in enrollment. • Strong open enrollment for LACC product, close to 90,000 members. • There were large retroactive rate adjustments received in December. • Revenue is favorable by \$138 million. • Retroactive rate increase of \$32 million for Coordinated Care Initiative (CCI) members for the full year were received in December. 	

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	<ul style="list-style-type: none"> • Update to rates effective July 1 for Seniors and People with Disabilities (SPD), Medi-Cal Expansion (MCE) and Temporary Assistance to Needy Families (TANF) was \$16 million. • Proposition 56 updated rates retroactive to July 1 were received (new family planning, trauma and developmental screening and value based payments). L.A. Care is working on internal systems for these new payments. • Higher fee for service (FFS) claims than budgeted will be investigated. • Operating margin for December reflected the retroactive payments noted above. • Results of the deceased member audit from the state resulted in net impact \$8.3 million. • Administrative expense is favorable year to date. • Non-operating income is slightly unfavorable due to timing of grant spending. <p>Operating Margin by segment</p> <ul style="list-style-type: none"> • Medical Cost Ratio (MCR) for plan partners increased due to Proposition 56 payments. • MCR for SPD/CCI is higher due to higher FFS claims. • Temporary Assistance for Needy Families (TANF) and Medi-Cal Expansion (MCE) have lower MCR due to retroactive acuity adjustments. • Cal MediConnect (CMC) rate decrease impacts the MCR ratio significantly because of the small revenue base. • Commercial plans have a little higher MCR due to timing of expenses. • MCR overall is unfavorable to budget. • Admin ratio is positive. • Tangible Net Equity and days cash on hand ratios are consistent with prior months. <p><u>Motion FIN 102.1219</u> To accept the Financial Report as submitted, for the period ended September 2019, as submitted.</p> <p>Ms. Montgomery referred to the report on investment transactions included in the meeting materials for Committee member review. <i>(A copy of the report can be obtained by contacting Board Services).</i></p> <p>L.A. Care's investment market value as of October 31, 2019, November 30, 2019, and December 31, 2019, was \$1.8 billion, \$1.7 billion, and \$1.8 billion, respectively. This includes our funds invested with the government pooled funds. L.A. Care has an investment balance of \$62 million for all three months with the statewide Local Agency Investment Fund (LAIF), and</p>	<p>Unanimously approved. 10 AYES (Ballesteros, Booth, De La Torre, Ghaly, Gonzalez, Greene, Perez, Ridley-Thomas, Roybal, and Shapiro)</p>

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>an investment balance of \$105 million for all three months with the Los Angeles County Pooled Investment Fund (LACPIF).</p> <p>The remainder, \$1.6 billion, \$1.5 billion, and \$1.6 billion, as of October 31, 2019, November 30, 2019, and December 31, 2019, respectively, 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,</p> <ol style="list-style-type: none"> 1. Payden & Rygel - Short-term portfolio 2. Payden & Rygel - Extended term portfolio 3. New England Asset Management - Corporate notes extended term portfolio 	
Cognizant Technology Solutions	<p>Mr. Kasdagly summarized the motion included in the meeting materials. The motion pertains to a contract from 2012. Fundamentally, it funds major programs for the QNXT platform for the claims system. The second platform is the care management system. The funds are included in the budget. Staff is working on solutions that will lower the cost for these systems in the future.</p> <p><u>Motion FIN 103.0220</u> To authorize staff to amend a purchase order/contract with Cognizant Technology Solutions in the amount of \$13,500,000 (total contract not to exceed \$88,734,459) for software maintenance, hosting, and other support services for L.A. Care’s core systems: QNXT and CCA.</p>	Unanimously approved. 10 AYES
Compliance & Quality Committee	<p>PUBLIC COMMENT:</p> <p>Carolyn Navarro stated she started complaining in 2014 about her daughter not getting proper medical care due to Synermed blocking her care. She was even lied to about her medical diagnosis. She was part of the Department of Managed Care investigation regarding Synermed. She was interviewed in depth, even asked if she would be willing to go to court and testify regarding this matter. After everything she has studied about this; she has gone to the court house and looked up lawsuits, as stated she started complaining in 2014. She believes that the Department of Managed Health Care and L.A. Care would rather see Synermed executives and lawyers walk free when they belong in prison. They would rather see these people walk free than admit that they were not practicing proper oversight. Because it wasn’t just L.A. Care that wasn’t practicing proper oversight over Synermed, it was also the Department of Managed Health Care. She sent a 10-page report to the Department of Managed Health Care in 2014, telling them in detail what Synermed was doing. She figured out exactly what Synermed was doing then, and sent them this report. They are well aware of her. Their lawyer responded to</p>	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>her. One of their executive secretaries acknowledged her letter and said it was passed on to their quality control. So for years, she believes L.A. Care and the Department of Managed Health Care were more than aware of what was going on with Synermed. She blames her daughter's death on Synermed. She thinks her daughter would have had a much better outcome, even when she reached out for help from this agency starting in the Spring of 2014. L.A. Care failed her and kept passing her complaint on to Care 1st, who the complaint was about. Pacific Alliance Medical Center owned Care 1st and owned Synermed, she has proof of that. So L.A. Care was telling her to go back to the same people that she was complaining about. She believes that L.A. Care aided and abetted and she would say, are possibly accomplices in Synermed's fraud. She knows of about 20 victims, including about 5 deaths. Her daughter was special needs – she was autistic. She was helpless; she was an adult and she couldn't defend herself. She did everything in her power to get help for her daughter. They forced them to disenroll their daughter. She told L.A. Care all of this in 2014. She begged for help and told L.A. Care all of this. L.A. Care failed them miserably. L.A. Care didn't even help her daughter re-enroll. She was a Medi-Cal beneficiary and she was not getting proper medical care. She was not getting proper follow up after they forced her to disenroll her. She had no choice, she was going to die then if she didn't get help. She asked, how dare you people? What kind of phony operation is this? Synermed's building is now AchievaMed. She asked how AchievaMed is affecting your patients? She would like to know that because they are the same people as Synermed.</p> <p>April Stom commented that she conducted city meetings for the City of La Habra. She is disappointed in the level of disrespect with staff sleeping, talking and rolling their eyes while others are talking. She is not surprised as it is how things are run at L.A. Care. A few minutes ago John Baackes said you try your hardest to make sure people are doing things right from point A to B and that's not true. Two years ago she applied for upper level care and actually asked to see a doctor at UCLA. L.A. Care refused and denied it, blaming it on Synermed. She was told she had to go to USC because they were willing to contract with you. Now L.A. Care is contracted with UCLA. Awesome you are back scratching each other but it did not help her. Luckily USC was good and has helped her. On January 7, over the phone, she filed an appeal on a denial of care. She had received the denial letter on December 28. Merry Christmas and Happy New Year. It was so rude. She received it when she was in the middle of leaving to go on a New Year's trip. When she came back from the trip she filed the appeal. Adrian, who took her appeal, did not offer to schedule an expedited appeal, when he knew her appointment was scheduled for January 21. She had to call 8 or 9 different times, getting yelled at and screamed at and spoken to disrespectfully by Cesar, who she filed a grievance against. She thinks she will probably never hear anything about the grievance but she filed it just the same.</p>	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>Everyone in your department bold-faced stonewalled her and refused to talk to her on the phone. She had to come to the offices and literally make L.A. Care employees do their job. She wondered if L.A. Care is hiring. She offered to give her resume as it seems that L.A. Care needs good employees instead of the schmoes it has been hiring. The employee reviews she talked about are being posted while the employees are currently employed which says a lot. She thinks it says that they are sick of this s--- too. She doesn't know what else to say anymore. Mr. Baackes came up to her and said she can talk to this gentleman. She has already filed with the DMHC. She is happy to rectify things and get things back in order because her health depends on it. Things need to be worked on harder.</p> <p>Member Booth stated that hearing these stories makes her feel sad and helpless. She assured people that they are being heard. The Board knows it has work to do. She feels it is important that people are here to tell the Board of their experiences.</p> <p>April Stom said she wishes she had known about the Board meetings sooner. She was writing on social media platforms about her complaints.</p> <p>Member Booth reported that the Committee met on January 16. <i>(Minutes are available through Board Services).</i></p> <ul style="list-style-type: none"> • Dr. Seidman provided his report. He briefly spoke about the influenza and noted that the rate of infection is trending downward, but he encouraged everyone to get a flu shot. • Dr. Katrina Miller-Parrish provided an update on L.A. Care's Pay-4-Performance (P4P) program. L.A. Care worked hard with providers to help them improve their performance. <ul style="list-style-type: none"> ○ 972 physicians received a total of \$10.5 million and 66 clinics received a total of \$10.5 million. This works out to about \$11,000 per provider. ○ L.A. Care paid out nearly \$40 million to primary care providers, clinics, medical groups, and plan partners in December 2019. ○ On January 29, L.A. Care held its second annual Provider Recognition Dinner to honor the providers for their work to improve member care. • Thomas Mapp provided a Chief Compliance Officer report. He spoke about the activities that L.A. Care is doing to prevent, detect, and correct compliance issues before they become a problem. He and Elyse Palomo, Director of Regulatory Audits, described the Performance Monitoring activities that will be reported to the Committee throughout 2020. • Member Booth was re-elected as the Committee Chair. 	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
Audit Committee	<p>Member Ballesteros reported that the Audit Committee met on January 21 to discuss the draft audited financial report for fiscal year 2018-19 prepared by outside independent auditors from Deloitte & Touche.</p> <ul style="list-style-type: none"> • Khurram Siddiqui, Partner, and Angelica Kocharova, Audit Manager, for Deloitte & Touche discussed with the committee the results of L.A. Care’s onsite audit. • There were no material weaknesses or deficiencies found in L.A. Care’s financial operations or internal controls. Mr. Siddiqui reported that the audit went smoothly, and there were no material adjustments to the financial statements. <p>Mr. Baackes commented that it was a remarkably dull meeting as there were no adverse findings. Under its authority delegated to the Audit Committee by this Board, the Audit Committee approved Motion AUD A.0120 to accept the audit findings. The Board does not approve the audit report. A copy of the audit report can be obtained by contacting Board Services.</p>	
<p>PUBLIC COMMENT <i>Comments are summarized, not verbatim.</i></p>	<p>Wilma Ballew, RCAC 2 Member, thanked Ms. Luckey for her comments. She understands the reason for timing remarks. At ECAC she wanted to comment about the memorial for Ms. Belton and was given one minute. She tries to say what needs to be said, but she was cut off. She thought that was beyond acceptable as far as rudeness. She was discussing memorial arrangements for someone that had meant a lot to her. It is something she hopes can be addressed. It may not sound like a big thing when you are given a few minutes. Her Access transportation is waiting for her now and she was hoping to get through this. She also would like Dr. Prothrow Stith to provide the information she presented to the advisory committee member who requested the information as she wasn’t able to be here today, and it would help her feel more comfortable that the information was presented. She is concerned about transportation. She comes to Board Meetings on her own as she has Access. But there is a schedule with that and she hopes that they don’t leave her. She would like to work something out for those who are not assigned to be here. She feels it is important to be here and it is not easy and people shouldn’t be sitting here all stressed out about having to leave.</p> <p>Scott Clapson, RCAC 4 Member, is a community organizer and a podcast host. He is also recovering from homelessness, thanks to Exodus housing. This is his first Board of Governors meeting. Those that come from the RCACs are asked to go back to the RCACs and report on what they have learned. But today he was very disappointed. With all due respect, he noted that some people at this meeting were not paying attention, and were having side conversations repeatedly. He stated that all are getting paid to be here, and he asked all to please be aware. One lady got up and spoke about her daughter dying. Another lady said that she has reported L.A. Care to whoever she needs to report you to. He sat back in the corner and wondered why</p>	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>he has to go back to RCAC 4 and talk about the meeting when some of the people who are paid to be in this room aren't even paying attention to what people are saying. He stated that people need to listen because advisory committee members are volunteering their time and are valuable members of the community and they are just as important. He stated that they may not make the kind of money that others make and they may be low income for a lot of reasons. When there are side conversations during public comment or agenda items, he sees the Chair and the CEO repeatedly talking to each other. He is sure there are other people, and it kind of hurt his feelings because he gave up his time today to be here. It is not worth a \$50 stipend when a lot of people are making a lot more money this afternoon to be in this room. He asked that people be respectful to people making public comment. It is very disrespectful. If someone wants to be on their phone, like he saw staff members playing word games on their phones, when they are working for L.A. Care in this meeting. They are not paying attention when people are talking. All of these people who are members of the public are giving their time to be here to inform you. He thanked Member Booth for what she said to the woman who commented. Member Booth was willing to express that she heard what she said. It is very disheartening because he has been coming to these meetings regularly. He is an L.A. Care client and he just saw his doctor yesterday, Dr. Gomez at the Wesley Clinic at Santa Monica and Vermont. He is a great doctor; Dr. Gomez is amazing. He asked that people keep his comments in mind. He asked that they be mindful while people are talking its very disrespectful, and people are watching. He is watching, not in a disrespectful way but in a way to hold LA Care accountable. The Board members are in positions of authority and he asked that they please remember that. People are watching in a very respectful way and L.A. Care should be listening in a very respectful way while people are talking.</p>	
<p>ADJOURN TO CLOSED SESSION</p>	<p>Ms. Haydel announced the following items to be discussed in closed session. The Board adjourned to closed session at 4:42 p.m.</p> <p>CONTRACT RATES Pursuant to Welfare and Institutions Code Section 14087.38(m)</p> <ul style="list-style-type: none"> • Plan Partner Rates • Provider Rates • DHCS Rates <p>REPORT INVOLVING TRADE SECRET Pursuant to Welfare and Institutions Code Section 14087.38(n) Discussion Concerning New Service, Program, Business Plan Estimated date of public disclosure: <i>February 2022</i></p>	

AGENDA ITEM/PRESENTER	MOTIONS / MAJOR DISCUSSIONS	ACTION TAKEN
	<p>CONFERENCE WITH REAL PROPERTY NEGOTIATORS Pursuant to Section 54956.8 of the Ralph M. Brown Act Property: 3570 Santa Anita Ave., El Monte, CA 91731 Agency Negotiator: John Baackes Negotiating Parties: Positive Investment, Inc., Managing Agent for El Monte Santa Fe Plaza, LP Under Negotiation: Price and Terms of Payment</p> <p>PEER REVIEW Welfare & Institutions Code Section 14087.38(n)</p> <p>CONFERENCE WITH LEGAL COUNSEL –EXISTING LITIGATION Section 54956.9(d)(1) of Ralph M. Brown Act: Names of cases:</p> <ul style="list-style-type: none"> • Dignity Health and Northridge Hospital Medical Center v. L.A. Care Health Plan et al. (BC583522); Appeal No. B288886 • Dignity Health and Northridge Hospital Medical Center v. L.A. Care Health Plan et al. (BS172353) • California Hospital Medical Center et al (Dignity) v. L.A. Care (JAMS. 1220056913) <p>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</p> <p>CONFERENCE WITH LABOR NEGOTIATOR Section 54957.6 of the Ralph M. Brown Act Agency Negotiator: Hector De La Torre Unrepresented Employee: Chief Executive Officer</p>	
RECONVENE IN OPEN SESSION	<p>The Board reconvened in open session at 5:36 p.m. There was no report about the closed session.</p>	
ADJOURNMENT	<p>The meeting was adjourned at 5:36 p.m.</p>	

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

APPROVED BY:

Layla Gonzalez, *Board Secretary*
Date Signed _____

APPROVED