CALL TO ORDER

Chair Greenia called the meeting to order at 3:30 p.m. in Suite 200 at the Ventura County Public Health Building located at 2240 E. Gonzales Road, Oxnard, CA 93036.

COMMITTEE MEMBERS PRESENT
Lanyard Dial, MD, Ventura County Medical Association
Robert Gonzalez, MD, Ventura County Health Care Agency
Rick Jarvis, Private Hospitals / Healthcare System
Roberto S. Juarez, Clinicas del Camino Real, Inc.
Catherine Rodriguez, Ventura County Medical Health System

STAFF EX OFFICIO COMMITTEE MEMBERS
Earl Greenia, Chair, CEO
Darlane Johnsen, Vice-Chair, CFO

ADDITIONAL STAFF IN ATTENDANCE
Traci R. McGinley, Clerk of the Board
Audra Lucas, Administrative Assistant
Candice Limousin, Human Resources Director
Brandy Armenta, Quality Improvement Specialist
Guillermo Gonzalez, Government Affairs Director

PUBLIC COMMENT

None.

1. APPROVAL OF MINUTES

Committee Member Juarez moved to approve the minutes, Member Dial seconded and the motion carried, Committee Member Jarvis abstained. Approved 4-0.

2. ACCEPT AND FILE CEO UPDATE

CEO Greenia highlighted the progress of backlog and pending claims for the following items:

- **Price List Issues:** There were approximately 8,800 claims in a pend status because there is no formal price established for one or more items on the claim. About 25% have been resolved, bringing the current count to about 6,000.
- **Recognition of Contract Issues**: Approximately 26,000 claims were in pend status due to the system not recognizing or matching the provider’s identification number with contract information. Working through the issues has reduced the count to about 23,000. GCHP continues to work with ACS to resolve problems.

As the Commission previously noted, it is taking too long to pay providers and that ACS must be held accountable. CEO Greenia, staff and ACS recently met and developed an action plan. He further stated that progress is being made and issues such as electronic claims, claims payments etc. can be resolved and he will continue to hold ACS accountable.

CEO Greenia noted that GCHP received the revised capitation rates from the State and it is not as drastic as originally forecasted. The rate reduction is 2.19%; he reviewed the Total Net Equity (TNE) and services affected. CEO Greenia added that he hopes that GCHP can absorb most of the cut; however, this does not account for co-pays, which have not yet been approved.

CEO Greenia announced that there will be an article in the newspaper discussing the Plan’s inability to secure contracts with anesthesiologists at St. Johns and Los Robles. He noted that services for emergency care are covered; however elective services are not.

### 3. ACCEPT AND FILE FINANCIAL REPORT

#### a. Re-forecasted Fiscal Year 2011-12 Budget

CFO Johnsen noted the reserve for the rate decrease does not reflect a retro-active as the timing has not yet been decided. The Commission will be provided with updated calculations as these become available. The reforecasted Profit & Losses (P&L’s) include revised salaries and benefits.

The Committee requested additional information regarding staffing. CEO Greenia informed the Committee that over time, GCHP would transition away from RGS as a vendor, thus having and including Human Resources in-house. Questions were raised regarding salary increases to which CEO Greenia responded that the current levels are not competitive with other COHS models and health plans. He added that this budget is very lean.

#### b. September Financials

CFO Johnsen explained that the data are estimates with the exception of the prescriptions (ScriptCare), which is actual. After discussion, CFO Johnsen added that the reserve is calculated using historical data and trended forward.

Further discussion regarding the Financials was held. Member Rodriguez requested that the Statement of Cash Flow be corrected.
c. October Preliminary Profits and Losses
After discussion was held there was Committee consensus that this item be presented to the Commission with explanations.

4. MANAGEMENT RECOMMENDATIONS & REPORTS

a. CEO Authority
CEO Greenia explained the need to define what is delegated to the CEO and what is under the purview of the Commission. He added that the items were derived from other COHS and past Commission notes.

There was Committee discussion of not wanting to micromanage CEO.

Discussion was held regarding the CEO’s authority to hire individuals to work for and with him. The CEO would make the decision, and keep the Commission informed of changes in senior leadership positions.

Committee Member Juarez moved to delegate selection and termination of Chief Medical Officer (CMO) and Chief Financial Officer (CFO) to the CEO. Member Dial seconded and the motion carried. Approved 5-0.

Committee Member Dial moved to require the CEO to inform the Commission of changes in senior leadership positions. Member Juarez seconded and the motion carried. Approved 5-0.

Discussion was held regarding raises. Noting that GCHP is funded with tax-payer dollars; GCHP must balance the need to ensure that the pay is reasonably competitive, and salary ranges should still be within specific parameters. There was a suggestion that there be flexibility with Full Time Equivalent (FTE) count rather than a fiscal level.

Committee Member Juarez moved to allow the CEO to adjust staffing within 10% of established FTE count within the constraints of the total budget. Member Dial seconded and the motion carried, with Committee Members Rodriguez and Jarvis voting no. Approved 3-2.

Discussion of developing a salary range schedule that would allow the CEO ability to stay competitive with other COHS. Further salary and budget discussion was held.

Committee Member Rodriguez moved that management create a salary range for each position based on market study. Member Gonzalez seconded and the motion carried, with Committee Member Juarez voting no. Approved 4-1.

Member Juarez moved to re-affirm past Policies by the Commission with two changes as noted below and that the item be forwarded to the Commission:

The first two bullets are to read as follows:

- Negotiation, execution and termination of provider contracts. As new model contracts are developed, Management will present such models to the Executive-Finance Committee as an information item.
• Negotiation and execution of vendor contracts, subject to thresholds established by the Commission (See Attached: VCMCC CEO Signing Authority for Contractual Agreements for Administrative Goods and Services, approved on June 28, 2010).

Member Dial seconded and the motion carried. Approved 5-0.”

Committee Member Juarez moved to approve the minutes as amended, Member Jarvis seconded and the motion carried. Approved 4-0.

b. Multi-Specialty Capitation Contracts
After discussion the Committee requested the CEO develop a full risk model contract. There was Committee consensus that all new and existing model contracts be presented to the Committee as an information item.

Committee Member Gonzalez moved to approve the Multi-Specialty Capitation Model Contract, Member Dial seconded and the motion carried. Approved 5-0.

COMMENTS FROM COMMITTEE MEMBERS

Members noted that it needs to review evaluation tools for CEO performance evaluation.

ADJOURN TO CLOSED SESSION - GC § 54957 - CEO Performance Evaluation

The Committee adjourned to Closed Session at 6:00 p.m.

RETURN TO OPEN SESSION

The Committee returned to open Session at 6:07 p.m. It was announced that Committee had no action at this time and this remains an open item.

ADJOURNMENT

Chair Greenia adjourned the meeting at 6:10 p.m.

APPROVED:

Traci R. McGinley, MMC, Clerk of the Board