

**Ventura County Medi-Cal Managed Care Commission (VCOMMCC)  
dba Gold Coast Health Plan (GCHP)**

**Executive/Finance Committee Special Meeting**

**Special Meeting**

**Tuesday, July 9, 2019 – 1:00 p.m.**

**Community Room at Gold Coast Health Plan**

**711 E. Daily Drive, Suite 106, Camarillo, CA 93010**

**AGENDA**

**CALL TO ORDER**

**ROLL CALL**

**PUBLIC COMMENT**

The public has the opportunity to address Ventura County Medi-Cal Managed Care Executive Finance Committee on the agenda. Persons wishing to address the Committee should complete and submit a Speaker Card.

Persons wishing to address the Executive Finance Committee are limited to three (3) minutes unless the Chair of the Committee extends time for good cause shown. Comments regarding items not on the agenda must be within the subject matter jurisdiction of the Committee.

**CONSENT**

**1. Approval of Executive Finance Committee Regular Minutes of June 6, 2019.**

Staff: Maddie Gutierrez, Clerk of the Commission.

**RECOMMENDATION:** Approve the minutes.

## **FORMAL ACTION ITEMS**

### **2. Review of Gold Coast Health Plan Budget – Fiscal Year 2019 -2020**

Staff: Kashina Bishop, Chief Financial Officer

**RECOMMENDATION:** Discuss the questions and responses for the Gold Coast Health Plan Budget for Fiscal Year 2019 – 2020 and forward to the Ventura County Medi-Cal Managed Care Commission for final approval.

## **DISCUSSION**

### **3. Exec. Finance Meeting Dates**

Staff: Kashina Bishop, Chief Financial Officer

## **COMMENTS FROM COMMITTEE MEMBERS**

## **ADJOURNMENT**

---

Administrative Reports relating to this agenda are available at 711 East Daily Drive, Suite #106, Camarillo, California, during normal business hours and on <http://goldcoasthealthplan.org>. Materials related to an agenda item submitted to the Committee after distribution of the agenda packet are available for public review during normal business hours at the office of the Clerk of the Board.

In compliance with the Americans with Disabilities Act, if you need assistance to participate in this meeting, please contact (805) 437-5512. Notification for accommodation must be made by the Tuesday prior to the meeting by 3 p.m. will enable the Clerk of the Board to make reasonable arrangements for accessibility to this meeting.

## **AGENDA ITEM NO. 1**

**TO:** Executive Finance Committee  
**FROM:** Maddie Gutierrez, Clerk to the Commission  
**DATE:** July 9, 2019  
**SUBJECT:** Meeting Minutes of June 6, 2019 Regular Executive Finance Committee Meeting

### **RECOMMENDATION:**

Approve the minutes.

### **ATTACHMENTS:**

Copy of the June 6, 2019 Regular Executive Finance Meeting minutes.

**Ventura County Medi-Cal Managed Care Commission (VCMMCC)  
Executive/Finance Committee**

**June 6, 2019**

**CALL TO ORDER**

Committee member Antonio Alatorre called the meeting to order at 3:03p.m.  
In the Community Room located at Gold Coast Health Plan, 711 East Daily Drive,  
Camarillo, California.

**ROLL CALL**

Present: Committee members Antonio Alatorre, Fred Ashworth, and Dee Pupa.  
Committee member Laura Espinosa was not present at time of roll call,  
arrived at 3:11 p.m.

Absent: Committee member Jennifer Swenson.

**PUBLIC COMMENT**

None.

**PRESENTATION**

**1. Fiscal Year 2018-2019 Audit Plan**

**RECOMMENDATION:** Receive and file the presentation.

Moss Adams representatives, Stelian Damu and Kimberly Sokoloff reviewed a PowerPoint presentation which was provided to the Committee. The audit plan was discussed. Mr. Damu stated if there are certain areas of focus, the Committee should give their input and make requests in order to satisfy needs. Responsibilities were reviewed. The results of the audit will be presented in October. Moss Adams will present results and financial statements. There will be no opinion of internal controls, but they will evaluate internal controls. All significant matters will be presented to the Commission and staff immediately.

**Commissioner Laura Espinosa arrived at 3:11 p.m.**

Ms. Kimberly Sokoloff reviewed the audit control process. The timeline for the audit was presented and draft results will be presented to the Commission in October. Commissioner Alatorre asked how the \$12 million overpayment to a provider will appear in the audit. Mr. Damu stated they are evaluating and will work with management. CFO Bishop stated it would not be a receivable unless it is 100%

recoverable. Commissioner Alatorre asked about the pending OIG investigation, and how will the liability appear. There is feedback from legal counsel on such matters. There is specific guidance on accounting standards that needs to be followed. General Counsel, Scott Campbell stated it was in last year's footnotes. Commissioner Ashworth inquired about the number of years Moss Adams had performed the Plan's audit. Mr. Damu responded that it was the third year. Mr. Damu stated all audit information will be presented in October to the Commission.

## 2. April 2019 Financials

**RECOMMENDATION:** Accept the April 2019 Financials and forward to the Ventura County Medi-Cal Managed Care Commission for approval.

CFO Bishop stated there was a significant increase in expenses for April. In drilling down to the cause of the increase, it is due to a spike in high dollar cases. Michele Casey, Senior DSS Analyst, reviewed a PowerPoint presentation on the expense increase analysis. Ms. Casey explained the MARA risk profile findings with a 2017 and 2018 comparison, and clarified that there was currently not enough data for 2019 to definitively state whether our population was getting sicker. Data will be re-evaluated in a couple of months. She noted there was a small increase in risk score for Aged, Disabled and Long Term Care categories but that the overall risk scores for the population did not increase substantially in 2018. A prospective high risk model will help in the prediction for future. The root cause for the April increase is the High Cost Utilization which increased almost 20% between the last quarter of 2018 and the first quarter of 2019. It was noted there was an admission spike in both St. John's Regional Medical Center and the Ventura County Medical Center. Many admissions were for sepsis. Chief Operating Officer, Ruth Watson stated there has been a change in population. There is an increase in homelessness and drug use which also correlates with the sepsis diagnosis. COO Watson noted other plans are going through the same issue. CEO Villani stated there is a decrease in the healthy member population, but more analysis needs to be done to determine if the data supports that theory. Commissioner Ashworth asked if a portion of the increase was due to the fires; there was an increase in respiratory diagnoses. COO Watson stated that in January there were many high dollar claims. She also stated the County is going to the river bottom to offer care for the homeless which might drive increased utilization where they were receiving no treatment prior.

CEO Villani stated we cannot tell who is falling off the system, as they are listed as "family". COO Watson stated there is an underlying fear in the community due to undocumented status. Commissioner Alatorre asked if GCHP could educate the public to stay on Medi-Cal. Would there be an option to do outreach in Spanish in the community. CEO Villani stated there are limitations on what the Plan can do but there is a focus on community relations and staff has been added for community outreach. CEO Villani stated most Medi-Cal plans have taken a loss

this year, the difference is that other plans have more reserves. GCHP is still fairly new compared to other plans. We need to get to a balanced budget.

Commissioner Ashworth asked if there was also a drop in birth rates. CFO Bishop stated the rate went up in April.

CFO Bishop stated there was a budgeted \$12 million loss, and the fiscal year to date loss is currently \$35.8 million. TNE dropped more than expected and is at 292% of the required amount by the State. The Plan did receive some unexpected revenue of approximately \$3 million which helped offset some of the loss. Claims dropped in May and CFO Bishop is monitoring June.

CEO Villani stated there is also a dermatology issue, adding that the formulary is being reviewed and OptumRx is also looking at pharmacies and providers. CEO Villani stated that there is a dermatologist who has figured out how to get everything approved and that OptumRx has more insight on this issue and changes are being made. Commissioner Alatorre stated some independent pharmacies get more money for brand medications than generic. Commissioner Pupa stated this is a trend and that we need to look at contracts and rates. Commissioner Alatorre stated that more procedures are being done in-house and this is also becoming a trend.

Commissioner Pupa asked whether the MCO Tax is based on membership. CFO Bishop confirmed it is a flat amount paid on a quarterly basis and does not impact the Plan. Commissioner Pupa stated that Adult Expansion is another issue. CFO Bishop stated there is an 11% increase in Adult Expansion rates for FY 19-20. Commissioner Pupa asked about the decrease in cash for April. CFO Bishop stated the decrease was due to receipt of the Hospital Quality Assurance Fee in March, which was then distributed in April.

Commissioner Alatorre mentioned the cost analysis was very good but some of the comments on dermatology and pharmaceuticals seem to stay the same monthly, almost like a cut and paste, and suggested that more information is needed. CFO Bishop responded that the explanations do not change if there is consistency in the cause for the variance. Medical expense trends are reviewed in detail on a monthly basis, and the overall per member per month costs have been consistent, with the exception of those areas noted.

Commissioner Ashworth motioned to accept the April 2019 Financials and forward to the Ventura County Medi-Cal Managed Care Commission for approval. Commissioner Espinosa seconded. The vote was as follows:

AYES:           Committee members Antonio Alatorre, Fred Ashworth, Laura Espinosa, and Dee Pupa.

NOES: None.

ABSENT: Committee member Jennifer Swenson.

Committee Chair Antonio Alatorre declared the motion carried.

### **3. Gold Coast Health Plan Budget – Fiscal Year 2019-2020**

RECOMMENDATION: Accept the Gold Coast Health Plan Budget for Fiscal Year 2019-2020, and forward to the Ventura County Medi-Cal Managed Care Commission for approval.

Chief Financial Officer, Kashina Bishop stated the budget was a challenging process. The main goal was to be as accurate as possible. She noted there was not much cushion being added. CFO Bishop apologized for the delay in providing the budget report, adding that she worked on the budget until the last minute to provide as much detail and accuracy as possible.

The main driver of the budget is membership. Membership is projected to decrease by 2%. Base capitation rates were reviewed, noting a 12% increase. Commissioner Ashworth noted data labels on the charts would be helpful. CFO Bishop reviewed the medical expenses and underlying assumptions. She explained that the medical expenses were based on CY 2018 data, trending forward based on contract changes, changes to fee schedules, and assumed increases to drug unit costs. CFO Bishop highlighted that there is an assumed \$5 million savings in the medical budget which will be achieved through contract changes, enhanced audit and recovery services, and preferred networks. Staff will have to monitor progress in achieving these savings.

Commissioner Ashworth noted the budget has an MLR, he asked how much risk to exposure. CEO Villani stated there is a lot of variability. Commissioner Pupa stated pharmacy concerned her with only a 3% increase. CFO Bishop stated there is a savings from dermatology. CFO Bishop acknowledged her concerns, noting that more would have been assumed, but it was offset with recent savings in dermatologicals.

CEO Villani noted the approach to the budget was conservative. CFO Bishop clarified that she would not consider it conservative because there is not a lot of cushion, but reasonable based on recent trends.

General administrative expenses were reviewed. CFO Bishop reviewed the salary expense and corresponding changes to the budgeted positions. She noted that a 3% merit pool was included along with a 6% vacancy factor. There was a discussion on the potential for staff reduction, and CFO Bishop stated staff is very taxed right now. New positions were limited and some positions were repurposed. CFO Bishop highlighted other significant assumptions in the administrative budget.

Chief Administrative Officer, Melissa Scrymgeour, reviewed the proposed enterprise project portfolio budget, estimated at \$7.8M. CAO Scrymgeour noted that roughly 60% of the project portfolio budget is for the ETP and PCCM projects, which the Commission has already approved. CAO Scrymgeour added that most of the projects included in the portfolio are carryover projects from last fiscal year and have already been initiated. Newly added projects include Knox Keene licensing, and upgrades to Inovolan (Plan's HEDIS vendor system) to help meet new regulatory requirements and Multiview (Plan's financial system) for new functional enhancements. CAO Scrymgeour stated that the Enterprise Data Warehouse is another key initiative for the Plan. She also highlighted that the enterprise portfolio budget includes \$867k for staff augmentation resources to support the projects.

CFO Bishop reviewed the overall projected budget, which is an estimated \$1.5 million gain. Commissioner Alatorre stated the County is doing approximately 79 layoffs and huge freezes. CFO Bishop stated staff cannot be cut, but can be repurposed. There was a \$3 million cut in the first go-round of the budget. CEO Villani stated the approach to the budget was cautious, with limitations on staff and a review of any vacant positions. Commissioner Pupa noted there is a \$40 million loss this year, but asked how it will turn to a \$1.5 million surplus by next year. CFO Bishop stated it will be due to the 12% increase from the State, which is not a small increase. Commissioner Pupa asked if cash projections are included in the budget when it is prepared. CFO Bishop stated she does not as she does not see a lot of variability. Commissioner Pupa stated the 12% increase is going to medical expenses and therefore cash will be flat. CFO Bishop stated revenue will be flat for approximately 18 months so the Plan has a lot of work to do. In FY20/21 major projects will be completed, and the Plan will be in a good place by then. We still have reserves, but this upcoming year is not without risk.

Commissioner Pupa asked when the budget would be presented to the Commission. CFO Bishop replied it would be done at the June Commission meeting.

Commissioner Pupa motioned to accept the 2019-2020 Budget and forward to the Ventura County Medi-Cal Managed Care Commission for approval. Commissioner Ashworth seconded. The vote was as follows:

AYES: Committee members Antonio Alatorre, Fred Ashworth, Laura Espinosa, and Dee Pupa.

NOES: None.

ABSENT: Committee member Jennifer Swenson.

Committee Chair Antonio Alatorre declared the motion carried.



## **COMMENTS FROM COMMISSIONERS**

Commissioner Espinosa stated she would have appreciated more time to review the budget in order to be more prepared. CFO Bishop stated next year it will be an easier process.

Commissioner Alatorre stated the Committee needs to meet more often. He would like to meet every other month. Commissioner Espinosa agreed. General Counsel, Scott Campbell, stated this item was not on the agenda but the possibility of scheduling more meetings could be done if necessary. The Committee agreed to try and schedule a special meeting in August pending schedules and availability.

## **ADJOURNMENT**

The meeting was adjourned at 5:28 p.m.

Approved:

---

Maddie Gutierrez, Clerk of the Commission



**AGENDA ITEM NO. 2**

**TO:** Gold Coast Health Plan Executive / Finance Committee  
**FROM:** Kashina Bishop, Chief Financial Officer  
**DATE:** July 9, 2019  
**SUBJECT:** FY 2019-20 Operating and Capital Budgets

**SUMMARY:**

Staff is reviewing the FY 2019-20 Operating and Capital Budgets of Gold Coast Health Plan with the Executive / Finance Committee. Submitted questions will be reviewed.

**RECOMMENDATION:**

Gold Coast Health Plan requests that the Executive / Finance Committee recommend approval of the Fiscal Year 2019-2020 Operating and Capital Budgets to the Commission.

**ATTACHMENTS:**

Fiscal Year 2019-2020 Operating and Capital Budgets



# Gold Coast Health Plan<sup>SM</sup>

A Public Entity

## FY 2019-20 OPERATING AND CAPITAL BUDGETS

## **Executive Budget Summary**

### **Overview**

In looking forward to fiscal year 2019-20, Gold Coast Health Plan projects to operate at a slight surplus, but will need to continually monitor and assess the financial condition and forecasted medical expenses.

In any budget year a number of variables can impact the actual plan's performance including:

- Changes in State policy which impacts forecasted revenue.
- Membership trends.
- Medical expenses can fluctuate based on the medical needs of the membership and unknown environmental factors such as fires or disease outbreaks.

GCHP continues to be in a challenging position in which the tangible net equity has declined to level below that of the Commission approved policy, but is at a critical point in which investing in significant projects will hedge against future risks and allow the plan to meet evolving demands and requirements.

GCHP staff continues to explore ways to reduce medical expenses while minimizing the impact to the provider community which cares for our members. GCHP was notified by the State that capitation rates will remain level for an 18 month period through December 31, 2020 so this will be an important and ongoing focus.

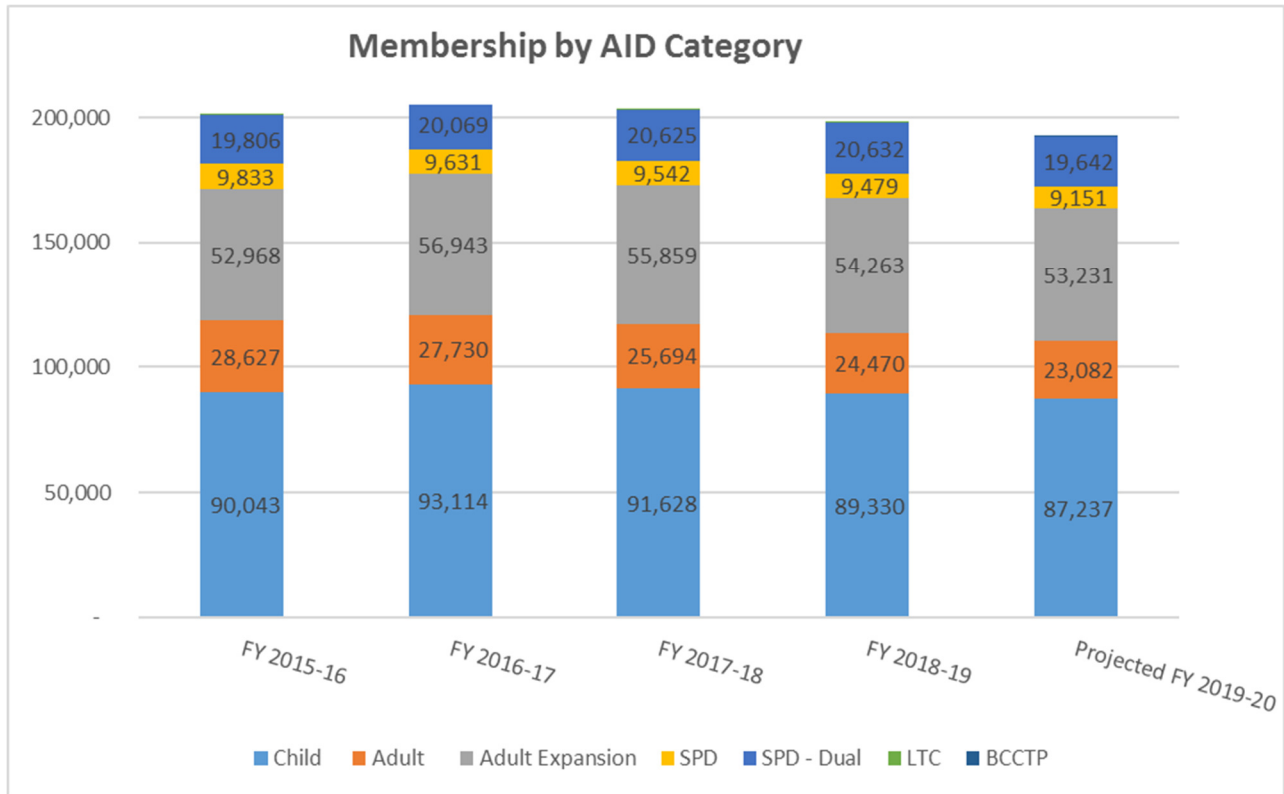
This document outlines the fiscal year 2019-20 operating and capital budgets and major associated assumptions.

### **Key Budget Highlights**

- 12% increase in revenue
- 2% increase in medical expenses
- 92.5% medical loss ratio
- 7.4% administrative cost ratio (6.5% without projects)
- 204 FTEs
- Net surplus \$1.5 million
- Year end TNE 280% of required

## Membership

Membership is projected at an average of 193,409, which represents a 2% decrease. This is consistent with the decline experienced in FY 18/19 and the Governor’s budget which estimates continued decreases due to lower unemployment rates and the impact of the minimum wage increase.

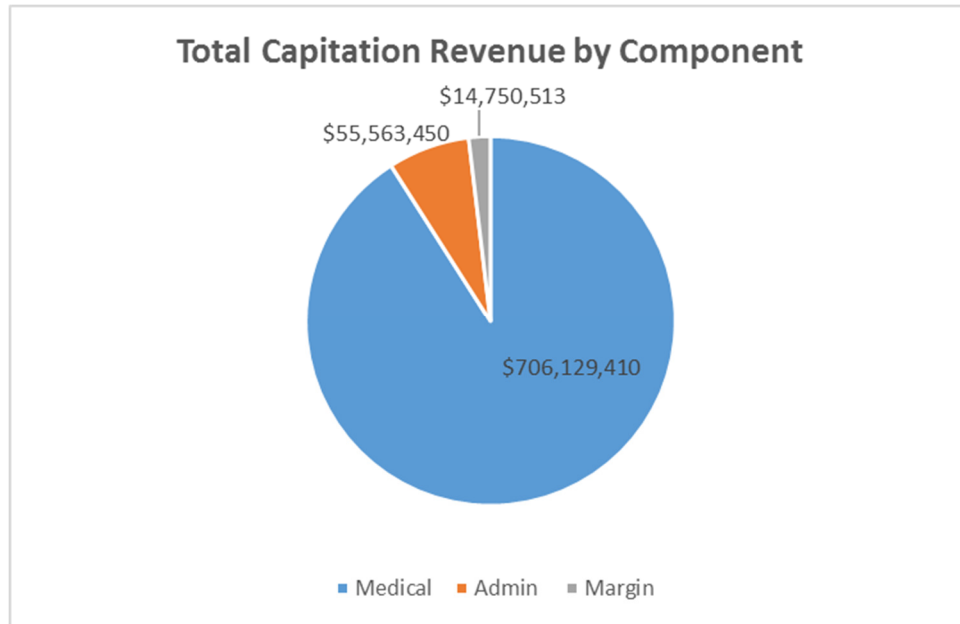


## Revenue

Total revenue in the budget is projected at \$776.4 million (\$334.54 pmpm) based on draft capitation rates received from the State. On a pmpm basis, this is an approximate 12% increase in the base capitation rates from FY 2018-19.

Base Capitation	\$ 742,950,139
Hep C Supplemental	\$ 3,815,898
BHT Supplemental	\$ 11,713,322
Proposition 56	\$ 17,964,014
	<u>\$ 776,443,373</u>

The capitation rates from the State were established based on medical expenditures in calendar year 2017, with applied trend factors, credibility adjustments and program changes. Components were then applied for administrative expenses and an operating margin.



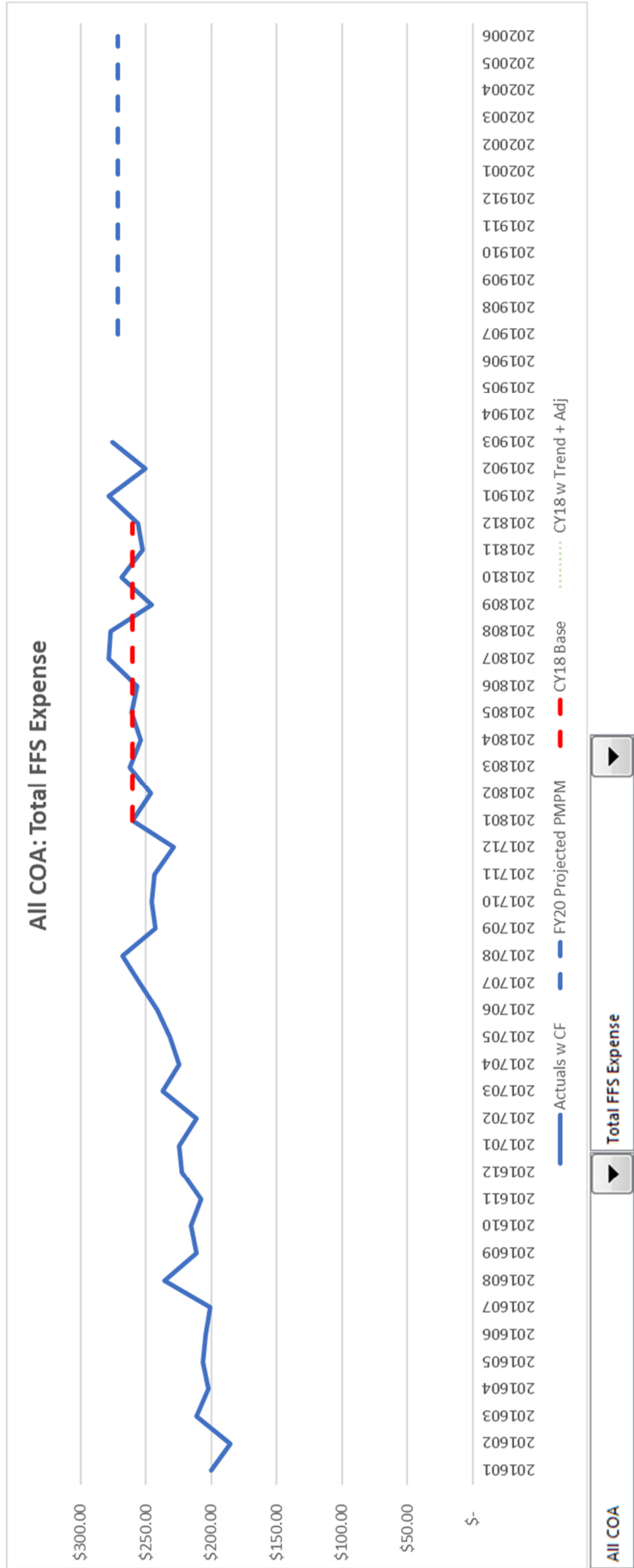
### Medical Expenses

The medical expense budget is \$718,275,941 and is developed by calculating pmpm costs for CY 2018 by aid category and provider type, and then incorporating anticipated changes as a result of utilization patterns, market trends and changes in provider reimbursement rates forecasted to occur during the budget year. Total medical expense are projected to remain stable through the year as is reflected in the chart (see page 4).

The major assumptions impacting the projected medical expenses are as follows:

- Change to the transportation capitation arrangement which increased costs and carved in services previously paid on a fee for service basis.
- Contracting changes effective during fiscal year 2018-19 increasing the estimated inpatient and outpatient costs.
- Contracting changes effective during fiscal year 2018-19 increasing the estimated emergency room costs.
- An assumed increase of 3% for LTC/SNF expenses associated with annual increases based on State established facility rates.
- A projected increase of 3% in pharmacy expenses associated with drug unit cost trends and utilization factors.
- An annual increase of 1% for Specialty Physician costs which are based on the Medi-Cal fee schedule.
- Trended the Mental and Behavioral Health and the Home and Community Based Services costs based on more recent data due to increased utilization.

**Note:** Care management expenses are outlined in the General and Administrative budget.



<b>FY 2019-20 MEDICAL EXPENSE BUDGET</b>				
	<b>FY 2018-19</b>	<b>Projected</b>	<b>Percent</b>	<b>Projected</b>
	<b>as of March 2019</b>	<b>FY 2019-20</b>	<b>Change</b>	<b>FY 2019-20</b>
	<b>PMPM</b>	<b>PMPM</b>		<b>Total Dollar</b>
Capitation - PCP Expense	\$ 25.66	\$ 26.52	3%	\$ 61,553,973
<b><u>Fee For Service</u></b>				
Inpatient FFS Expense	\$ 60.81	\$ 61.60	1%	\$ 142,961,687
Outpatient FFS Expense	24.76	25.68	4%	59,595,780
LTC/SNF Expense	55.02	57.35	4%	133,103,111
ER Facility Services FFS	11.59	11.91	3%	27,634,235
Physician Specialty Services FFS	25.82	25.49	-1%	59,161,691
Transportation FFS	1.05	0.73	-31%	1,684,686
Other Fee For Service Expense	3.82	4.01	5%	9,295,340
Primary Care Physician FFS	7.16	5.85	-18%	13,567,643
Mental and Behavioral Health	8.25	8.16	-1%	18,938,042
Pharmacy Expense FFS	55.90	57.07	2%	132,446,524
Other Medical Professional	1.70	1.63	-4%	3,790,614
Home & Community Based Svcs	8.10	8.08	0%	18,742,123
Laboratory and Radiology Expense	1.77	1.71	-4%	3,960,487
Other Medical Care Expenses	0.01	-	-100%	-
Directed Payments	5.45	7.74	42%	17,964,014
Provider Reserve	1.00	0.77	-23%	1,797,236
Budget Reduction	-	(2.15)		(5,000,000) *
Sub-total	\$ 272.21	\$ 275.60	1%	\$ 639,643,212
Reinsurance-Net	\$ (1.21)	\$ 0.84	-169%	\$ 1,949,564
Refunds & Recoveries	\$ (0.55)	\$ (0.43)	-22%	\$ (1,000,000)
Care Management	\$ 5.99	\$ 6.95	16%	\$ 16,129,193
<b>Total Medical Expenses</b>	<b>\$ 302.10</b>	<b>\$ 309.48</b>	<b>2%</b>	<b>\$ 718,275,941</b>
<b>MLR</b>	<b>99.8%</b>	<b>92.5%</b>		<b>92.5%</b>

\* In order to protect the Plan from further losses, staff has developed several strategies to reduce medical expenditures in FY 2019-20. These include, but are not limited to:

- Contract rate changes
- Enhanced services for claims audit and recoveries
- Preferred Provider/Vendor Networks



### **General and Administrative Expenses**

The 2019-20 general and administrative budget is \$50,623,480, excluding those expenses associated with major projects. This is 6.5% of estimated revenue and within the amount allocated in the capitation rates for administrative expenses which is a total of \$55,563,450. Including the Enterprise Project Portfolio, the total general and administrative budget is \$57,701,709 and 7.4% of revenue.

The budget was developed at a department level and is based on a review of FY 2018-19 actual expenditures with changes based on certain assumptions and expectations for FY 2019-20.

The major assumptions and changes in the general and administrative budget are as follows:

#### Salary Expense

Salary expense includes a merit pool equal to 3% of total salaries, and a 6% vacancy factor. Also impacting the salary expense are the addition of new positions, promotions, and re-purposing of positions at a higher salary. The table on the following page represents budgeted positions by department in comparison with the FY 2018-19 budget.

Budgeted Positions				
Department	FY 2018-19	FY 2019-20	Change	
Diversity	1.0	-	(1.0)	
Executive	9.0	11.0	2.0	*
Human Resources	6.0	6.0	-	
Compliance	11.0	10.0	(1.0)	*
Operations	2.0	2.0	-	
Appeals & Grievance	5.0	5.0	-	
Operations Support Services	5.0	5.0	-	
Member Services	7.0	7.0	-	
Claims	7.0	6.0	(1.0)	*
Facilities	3.0	3.0	-	
Network Operations	10.0	11.0	1.0	*
Communications	2.0	2.0	-	
Accounting and Finance	8.0	6.0	(2.0)	*
Procurement	3.0	3.0	-	
Decision Support Services	6.0	7.0	1.0	*
Project Management Office	4.0	2.0	(2.0)	*
Information Technology	2.0	3.0	1.0	*
Infrastructure	5.0	5.0	-	
Solution Services	9.0	10.0	1.0	
Government and Community Relations	1.0	3.0	2.0	*
Quality	10.0	10.0	-	
Pharmacy	2.0	2.5	0.5	
Health Services/Health Education	84.0	85.0	1.0	
	<u>202.0</u>	<u>204.5</u>	<u>2.5</u>	

\* Indicates there was not a net change to FTE's but the change is due to a department transfer or re-purposing of a position.

The new positions, net of transfers and re-purposing, are as follows:

**Senior IT Business Analyst (Solution Services)** – this is a contractor that is converting to a FTE with cost offset in consulting expense.

**PT Pharmacy Tech (Pharmacy)** – this position was added during fiscal year 2018-19 to allow staff more time to perform provider outreach.

**RN, Utilization Management (Health Services)** – this is a contractor that is converting to a FTE with cost offset in temp labor expense.

**Community Relations Specialist (Government and Community Relations)** – this position is needed to fulfill the strategic objective to be a collaborative community partner by increasing community participation and engagement through outreach activities and other initiatives.

**Note:** Although the budget reflects new positions, management is continuing to operate with a soft hiring freeze, and assessing the functional needs of the organization as positions are vacated.

#### Temp Labor

The reduction is related to the hiring of staff positions where the work has been deemed to be ongoing and a net savings for the work can be achieved.

#### Taxes and Benefits

The costs are primarily driven by salary expense which increased due to the items noted above. In addition, there was an assumed increase to employee related insurances of 5%.

#### Training, Conference, and Travel

The total budget is consistent with the prior year, but significantly higher than the FY 2018-19 projected actual expenditures. The budget was increased to enhance participation in community events and hold additional meetings within the community.

#### Outside Services – PBM fees

The budget is consistent with the prior year but significantly more than the FY 2018-19 projected actual expenses. The administrative fees were lower this fiscal year due to receipt of a credit that is not anticipated in FY 2019-20.

#### Outside Services – Other

Increase in cost due to engagement with a vendor to assist GCHP with the HEDIS Gap closure which will improve member health outcomes and HEDIS scores.

#### Consulting

Diversity officer role was budgeted at a full year in consulting, and had previously been budgeted as a staff position for a portion of the year.

#### Software Licenses

The most significant change is the increase in software subscription fees for Inovalon which is budgeted for \$1.0 million, an increase from the prior year budget of over \$500,000. Inovalon, a certified HEDIS software vendor, provides critical requirements of the annual HEDIS data collection project, including measure calculation and reporting, as well as medical record pursuit and abstraction.

The following table outlines general and administrative budget and includes a comparison to the initial budget (adopted in June 2018) for 2018-19, as well as a projection on the actual expenditures to be incurred during the current fiscal year 2018-19.

<b>FY 2019-20 GENERAL AND ADMINISTRATIVE EXPENSES</b>					
	<b>FY 2018-19 Projected Actual</b>	<b>FY 2018-19 Budget</b>	<b>FY 2019-20 Budget</b>	<b>Change Budget to Budget</b>	<b>Percent Change</b>
Salary Expense	\$ 18,011,194	\$ 18,310,154	\$ 19,683,560	\$ 1,373,406	8%
Temp Labor	1,065,125	745,788	561,579	(184,209)	-25%
Taxes and Benefits	5,565,735	5,832,110	6,815,660	983,550	17%
Training, Conference, and Travel	266,562	585,341	614,926	29,585	5%
Outside Services - Conduent	19,948,562	19,728,000	19,217,127	(510,873)	-3%
Outside Services - PBM Admin	1,392,136	2,950,044	3,052,936	102,892	3%
Outside Services - Other	3,556,980	4,111,519	4,468,112	356,593	9%
Accounting & Actuarial Services	206,969	204,072	166,000	(38,072)	-19%
Legal	1,398,336	1,500,000	1,500,000	-	0%
Consulting Services	980,581	1,101,846	1,238,045	136,199	12%
Translation Services	162,656	163,456	220,000	56,544	35%
Committee/Advisory	7,333	21,450	18,800	(2,650)	-12%
Employee Recruitment	94,531	218,422	100,000	(118,422)	-54%
Lease	1,459,901	1,440,136	1,475,532	35,396	2%
Depreciation & Amortization	543,275	495,691	560,403	64,712	13%
Non-Capital - Furniture & Equipment	67,720	181,451	156,006	(25,445)	-14%
Office & Operating Supplies	131,014	166,828	150,166	(16,662)	-10%
Shipping & Postage	174,165	218,363	176,990	(41,373)	-19%
Printing	245,386	275,828	342,300	66,472	24%
Software Licenses	2,697,617	3,518,361	4,193,023	674,662	19%
Repairs & Maintenance	104,205	94,841	150,823	55,982	59%
Telephone/Internet	146,380	174,672	247,914	73,242	42%
Advertising and promotion	119,300	296,357	206,550	(89,807)	-30%
Insurance	502,333	600,000	525,000	(75,000)	-13%
Interest	723,426	540,000	540,000	-	0%
Professional dues, fees, and licenses	280,089	311,984	315,111	3,127	1%
Subscriptions and publications	32,883	26,397	32,221	5,824	22%
Bank Service Fees	12,067	23,891	23,891	-	0%
Care Management	(14,241,921)	(15,010,927)	(16,129,192)	(1,118,265)	7%
<b>Total General and Administrative</b>	<b>\$ 45,654,541</b>	<b>\$ 48,826,075</b>	<b>\$ 50,623,480</b>	<b>\$ 1,797,405</b>	<b>4%</b>
<b>% Admin to Revenue</b>	<b>6.3%</b>	<b>7.0%</b>	<b>6.5%</b>		
<b>Enterprise Project Portfolio</b>	<b>\$ 1,092,091</b>	<b>\$ 5,045,262</b>	<b>\$ 7,078,229</b>	<b>\$ 2,032,967</b>	<b>40%</b>
<b>Total G&amp;A (including Projects)</b>	<b>\$ 46,746,631</b>	<b>\$ 53,871,337</b>	<b>\$ 57,701,709</b>	<b>\$ 3,830,372</b>	<b>7%</b>
<b>% to Revenue</b>	<b>6.5%</b>	<b>7.7%</b>	<b>7.4%</b>		

## **FY 2019-20 Enterprise Project Portfolio (EPP)**

The FY2019-20 Enterprise Project Portfolio comprises the projects identified through our project steering committee process as the highest priorities for GCHP in supporting our strategic objectives around ensuring access to and availability of quality care, investing in quality data, streamlining the experience of our business partners, building a culture of compliance, ensuring fiscal discipline and long-term fiscal solvency, enhancing our work environment, and positioning the organization to meet the future demands of providing health care to our members.

The FY2019-20 EPP includes nine (9) carryover projects from the previous fiscal year, eight of which are currently in planning or active status. Staff identified and prioritized five (5) additional EPP initiatives for FY2019-20 based on the following business drivers:

- KTLO & Information Security - Initiatives to maintain current and ongoing business operations, optimize the organization's information and cybersecurity posture, and ensure business continuity in case of an emergency or disaster.
- Strategic Technology Investments - Initiatives and technology investments critical to improving business efficiencies and the organization's ability to address expanded State and Federal regulatory requirements around access and quality, as well as data exchange. These initiatives also mitigate the risk of a financial penalty that could be assessed for non-compliance.
- Regulatory – New and/or modified regulatory requirements, including unplanned mandates.

The total enterprise portfolio budget is valued at \$7.8 million. The total budgeted amount in the income statement is \$7.1 million as that excludes capital amounts and those related to care management. Individual project budgets include estimates for technology investments (software subscriptions, licensing fees, hardware, cloud storage, etc.), professional implementation services, temporary labor for staff augmentation, print and communication costs (if applicable), and contingency. The Enterprise Transformation Project (ETP) and Provider Credentialing, Contracting and Data Management (PCCM) project comprise 64% of the total FY19-20 enterprise project budget.

GCHP FY19/20 Enterprise Project Portfolio					
FY18-19 Carryover					
Project	Description	FY19/20 Budget	Capital	Expense	
MedHOK 3.5 Upgrade	Lights-on initiative to ensure GCHP is current on vendor supported MedHOK application version. MedHOK is the organization's medical management system, used for mission critical utilization management, case management, health education and grievance and appeals functions.	\$ 49,613	\$ -	\$ -	*
AHP Plan-to-Plan Pilot	Implement a Plan-to-Plan pilot program with AmericasHealth Plan.	\$ -	\$ -	\$ -	
Enterprise Transformation Project (ETP)	Initiative to convert to a new core administrative platform - Health Solutions Plus (HSP) for claims processing, eligibility, membership, and benefits maintenance, along with implementation of new customer service system solution to optimize call center efficiencies services.	\$ 4,138,508	\$ 50,000	\$ 4,088,508	
IT Infrastructure Business Continuity (BC) Implementation	Additional infrastructure hardware investments and installations to add business continuity capabilities.	\$ 187,000	\$ 156,000	\$ 31,000	
Windows 10 Migration	Lights-on initiative to migrate all GCHP workstations, laptops and servers to Windows 10 operating system to ensure ongoing Microsoft support and enhance end point information security.	\$ 372,600	\$ -	\$ 372,600	
Internet Access Security Enhancements	Implementation of tools and software to enhance GCHP's management of internet based applications; part of cybersecurity risk mitigation strategies.	\$ 80,000	\$ -	\$ 80,000	
Provider Credentialing, Contracting & Data Mgmt	Implementation of an integrated system for the management of provider credentialing, contracting and data. Mission critical initiative to ensure GCHP continues to meet ongoing and increasing regulatory requirements around provider data accuracy, support contracting efforts, and optimize business processes.	\$ 853,650	\$ 219,450	\$ 634,200	
GCHP Website Refresh	Initiative to ensure GCHP's external website continues to function and meets current website design and accessibility standards.	\$ 54,792	\$ -	\$ 54,792	
RDT Re-design & Optimization	Business process improvement initiative to optimize and improve our DHCS rate development template submission process.	\$ 175,000	\$ -	\$ 175,000	
FY19-20 New Initiatives					
AB 1114 - Pharmacists as Medi-Cal Providers	Implementation of legislation to reimburse Medi-Cal certified pharmacists for a defined set of medical services to Medi-Cal patients.	\$ -	\$ -	\$ -	
Knox-Keene Licensing	Initiative to obtain Knox-Keene license as part of organization's strategic objectives of ensuring long-term fiscal solvency and positioning the Plan to meet the future demands of providing health care to our members.	\$ -	\$ -	\$ -	
Enterprise Data Warehouse (Phase I)	Strategic technology investment in data warehouse architecture, tools and resources to effectively support the provision, management, proliferation, and use of data for improved decision making, business process improvement, and faster response to changing regulatory conditions. Phase I Scope: Select and procure EDW tool(s) and implementation services to stand up platform and implement one data dimension.	\$ 650,000	\$ -	\$ 650,000	
MultiView Cloud Implementation	Leveraging GCHP's technology investment in Multi-View financial application. Moving from on-premise to cloud based software as a service platform for improved functionality.	\$ 73,500	\$ -	\$ 73,500	
Inovalon Upgrade and New Modules	Leveraging GCHP's technology investment in Inovalon quality platform. Initiative includes upgrade of existing platform and the purchase and implementation of additional Inovalon modules to improve our ability to analyze, monitor, inform, and take action on HEDIS quality performance.	\$ 279,418		\$ -	*
Staff Augmentation	Temporary staffing to support Enterprise Project Portfolio (except for ETP and EDW).	\$ 867,600		\$ 867,600	
<b>TOTAL</b>		<b>\$ 7,781,681</b>	<b>\$ 425,450</b>	<b>\$ 7,027,200</b>	

\* included in care management credit.

**Interest Income**

Total interest income is budgeted at \$1,035,258. This amount is significantly less than the FY 2018-19 actual amount which is \$3.1 million through March 2019. In November 2018, cash and investments were reduced due to the payment of amounts due to the State for the adult expansion 85% MLR requirement. In addition, the tangible net equity has declined throughout the fiscal year impacting available cash and investments. Of the remaining cash and investments, it was assumed that more amounts would be in cash and money markets with lower yields.

**Capital Budget**

The total budget for capital expenditures, including those included in the project portfolio, are \$1.3 million. Of that amount, \$425,450 is related to the Enterprise Project Portfolio.

<b>GOLD COAST HEALTH PLAN FY 2019-20 OPERATING BUDGET</b>		
<b>Program Revenue</b>	<b>\$</b>	<b>776,443,373</b>
<b>Medical Expenses</b>	<b>\$</b>	<b>718,275,941</b>
	MLR	92.5%
<b>Gross Margin</b>	<b>\$</b>	<b>58,167,432</b>
<b>General &amp; Administrative Expenses</b>	<b>\$</b>	<b>50,623,480</b>
	Admin %	6.5%
<b>Project Portfolio</b>	<b>\$</b>	<b>7,078,229</b>
<b>Interest Income</b>	<b>\$</b>	<b>1,035,258</b>
<b>Net Surplus</b>	<b>\$</b>	<b>1,500,981</b>

<b>GOLD COAST HEALTH PLAN FY 2019-20 CAPITAL BUDGET</b>		
<b><u>Asset Category</u></b>	<b><u>Description</u></b>	<b><u>Amount (\$)</u></b>
Leasehold Improvements	Office, cubicle and conference room repairs	\$ 103,000
Leasehold Improvements	Granicas Video - Community Room	55,000
Leasehold Improvements	Data and fiber	24,575
Leasehold Improvements	Security equipment	40,999
Computer Systems & Software	Firewalls	135,550
Computer Systems & Software	Fiber and switches	155,525
Computer Systems & Software	Electrical engineer	15,000
Computer Systems & Software	Computer and monitor refresh	240,375
Computer Systems & Software	UPS refresh	62,500
Computer Systems & Software	ETP - Project	50,000
Computer Systems & Software	IT infrastructure and business continuity - Project	156,000
Computer Systems & Software	PCCM - Project	219,450
		<u>\$ 1,257,974</u>

**Projected Tangible Net Equity (TNE)**

The TNE is projected to be at \$93.7 million or 280% of the State required amount.



**APPENDIX – CONTRACT RENEWALS IN FY 2019-20**

Vendor	Description	Contract Type	Contract Term Start Date	Contract Expiration Date	Estimated Actual Cost 3/31/19	Estimated Remaining Cost Until Expiration	Estimated Annual Cost	Expiration Strategy	Renewal Projected Cost	Projected Cumulative Cost (As of 3/31/19)	Renewal End Date
3M Health A2A26th Information Systems	Groupware Software & Pricer Tables	Software License	11/1/2018	10/31/2019	\$57,391.00	\$0.00	\$60,000.00	Renew with current vendor for 1 year	\$60,000.00	\$117,391.00	10/31/2020
CIO Solutions	Subscription Infrastructure Maintenance and support	PSA/Service Order	8/6/2013	10/31/2019	\$192,266.00	\$44,660.00	\$76,560.00	Renew with current vendor for 1 year	\$76,560.00	\$319,486.00	10/31/2020
CIO Solutions	Enterprise ShoreTel Annual Support	PSA/Service Order	3/5/2016	3/5/2020	\$149,220.00	\$44,000.00	\$44,000.00	Renew with current vendor for 1 year	\$44,000.00	\$237,220.00	3/5/2021
CIO Solutions	Firmware Updates	PSA/Service Order	8/6/2013	10/31/2019	\$85,904.00	\$7,011.67	\$12,020.00	Renew with current vendor for 1 year	\$12,020.00	\$104,935.67	10/31/2020
Colley Communications - Fulfillment	SO11 - Print Member Fulfillment Direct-Mailing Services	PSA/Service Order	1/1/2017	12/31/2019	\$83,943.00	\$73,500.00	\$98,000.00	Renew with current vendor for 1 year	\$98,000.00	\$255,443.00	12/31/2020
Colley Communications - Newsletters	SO8 - Member Newsletter Services	PSA/Service Order	1/1/2017	12/31/2019	\$277,023.00	\$119,500.50	\$159,334.00	Renew with current vendor for 1 year	\$159,334.00	\$555,857.50	12/31/2020
Colley Communications - Website Hosting	SO10 - net Returns Modules	PSA/Service Order	1/1/2018	12/31/2019	\$30,135.00	\$28,200.00	\$37,600.00	Renew with current vendor for 3 years	\$112,800.00	\$171,135.00	12/31/2022
Emagined	SO7 - Security Operations Center	PSA/Service Order	12/5/2018	12/4/2019	\$86,140.00	\$87,537.00	\$116,716.00	Renew with current vendor for 1 year	\$116,716.00	\$290,393.00	12/4/2020
Emagined	SO6 - T&M Security Risk Assessment's	PSA/Service Order	10/18/2018	6/30/2019	\$65,000.00	\$58,333.33	\$100,000.00	Renew for 6 months (Annual estimate is \$200,000)	\$100,000.00	\$223,333.33	12/31/2019
EverBank and DocuSystems	Lease Zea Upgraded Ricoh copiers	Lease Agreement	7/1/2018	6/30/2020	\$58,000.00	\$90,000.00	\$72,000.00	Refresh with new 24 month lease. (US Communities GPA)	\$150,000.00	\$298,000.00	6/30/2022
Gartner	Executive Programs Leadership - Website research access	Subscription Agreement	12/1/2018	4/30/2020	\$165,500.00	\$0.00	\$179,000.00	Renew with current vendor for 2 years	\$358,000.00	\$523,500.00	4/30/2022
Jason Kim	Supports - IT data base administration work.	CSA	8/19/2013	12/31/2019	\$368,380.00	\$48,750.00	\$65,000.00	Renew with current vendor for up to 6 months	\$32,500.00	\$449,830.00	6/30/2020
Lisa & Associates	Promotional Services	PSA/Service Order	11/17/2016	10/31/2019	\$58,132.00	\$7,000.00	\$12,000.00	Renew with current vendor for 3 years	\$36,000.00	\$101,132.00	10/31/2022
Quest Analytics	Data Verification and Attestation Accuracy Services	Software License Agreement	12/17/2018	12/16/2019	\$80,000.00	\$0.00	\$80,000.00	Renew with current vendor for 1 year	\$80,000.00	\$160,000.00	12/16/2020
The JVP Group	Website design and content management	PSA/Service Order	12/2/2014	9/30/2019	\$208,038.00	\$25,000.00	\$50,000.00	Renew with current vendor for 3 years	\$150,000.00	\$383,038.00	9/30/2022

Vendor	Description	Contract Type	Contract Start Date	Contract Term	Contract Expiration Date	Estimated Actual Cost 3/31/19	Estimated Remaining Cost Until Expiration	Estimated Annual Cost	Expiration Strategy	Renewal Projected Cost	Projected Cumulative Cost (As of 3/31/19)	Renewal End Date
Xpedite Systems (EasyLink)	Fax-Messaging services/solutions	Customer Service Agreement	6/1/2015		5/31/2019	\$113,818.00	\$6,500.00	\$39,000.00	Renew with current vendor for 1 year	\$39,000.00	\$159,318.00	5/31/2020
Karen Escalante	SO 2-Grantmaking Services-activities and initiatives	PSA/Service Order	7/1/2018		6/30/2019	\$89,025.00	\$15,000.00	\$60,000.00	Renew with current vendor for 1 year	\$60,000.00	\$164,025.00	6/30/2020
LinkedIn [formally Lynda.com] Company	Training Resources	Subscription Agreement	12/1/2017		11/30/2019	\$43,401.00	\$19,333.33	\$29,000.00	Renew with current vendor for 3 years	\$87,000.00	\$149,734.33	11/30/2022
Moss Adams	SO 5 Financial Audit Services Fiscal 2017-2019	PSA/Service Order	4/7/2017		10/31/2019	\$277,640.00	\$87,500.00	\$150,000.00	Renew with current vendor for 2 years	\$300,000.00	\$665,140.00	10/31/2021
Adaptive Insights	Budgeting Software.	SaaS Agreement	10/1/2016		9/30/2019	\$89,680.00	\$0.00	\$32,000.00	Renew with current vendor for 2 years	\$64,000.00	\$153,680.00	9/30/2021
Inovalon	HEDIS Hybrid Medical Record Abstraction-Medical Data Processing	MSA/SOW	4/1/2016		6/30/2019	\$1,209,795.00	\$250,000.00	\$1,000,000.00	Renew with current vendor for 3 years	\$3,000,000.00	\$4,459,795.00	6/30/2022
Mahdavi Gupta, MD	Medical Reviews	CSA	10/1/2015		9/30/2019	\$169,260.00	\$35,000.00	\$70,000.00	Renew with current vendor for 5 years	\$350,000.00	\$554,260.00	9/30/2024
Carol Hsu	SOW 1 - 3rd Party Medical Reviews	CSA	6/1/2015		10/31/2019	\$180,649.00	\$37,916.67	\$65,000.00	Renew with current vendor for 5 years	\$325,000.00	\$543,565.67	10/31/2024
Clarence Albert Reeves Jr. M.D.	Medical Reviews	CSA	10/1/2017		9/30/2019	\$78,469.00	\$50,000.00	\$100,000.00	Renew with current vendor for 5 years	\$500,000.00	\$628,469.00	9/30/2025
Gemini Diversified Services	Credentialing Verification Services	Credentialing Services Delegation Agreement	7/1/2015		9/30/2019	\$128,912.00	\$30,000.00	\$60,000.00	Renew with current vendor for 3 years	\$180,000.00	\$338,912.00	9/30/2022
DME Consulting Group, Inc.	Credentialing Services	PSA/Service Order	2/1/2015		12/31/2019	\$132,200.00	\$45,000.00	\$60,000.00	Renew with current vendor for 3 years	\$180,000.00	\$357,200.00	12/31/2022
Solera Health, Inc.	Diabetes Prevention Program (DPP), includes Weight Loss	MSA/SOW	1/1/2019		12/31/2019	\$40,000.00	\$75,000.00	\$100,000.00	Renew with current vendor for 1 year	\$100,000.00	\$215,000.00	12/31/2020
Shred-It	Document Storage, Collection, Mass Destruction Service	Customer Service Agreement	12/1/2017		11/30/2019	\$72,667.00	\$20,000.00	\$30,000.00	Renew with current vendor for 3 years (US Communities GPA)	\$90,000.00	\$182,667.00	11/30/2021
Thousand Oaks Industrial Development	Lease-Warehouse Storage	Multi-Tenant Lease Agreement	1/1/2017		12/31/2019	\$39,926.00	\$15,489.00	\$20,652.00	Renew with current vendor for 3 years	\$61,956.00	\$117,371.00	12/31/2022



**AGENDA ITEM NO. 3**

**TO:** Gold Coast Health Plan Executive / Finance Committee  
**FROM:** Kashina Bishop, Chief Financial Officer  
**DATE:** July 9, 2019  
**SUBJECT:** Executive Finance Meeting Dates - Discussion

**SUMMARY:**

Staff requests to review meeting dates with the Executive / Finance Committee.

**ATTACHMENTS:**

2019 Meeting calendar.

# 2019 (Revised) Ventura County Medi-Cal Managed Care Commission & Committee Meetings

Commission Meeting  
Executive/Finance Meeti  
Strategic Planning  
Holiday



January						
S	M	T	W	T	F	S
		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>
<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>	<b>17</b>	<b>18</b>	<b>19</b>
<b>20</b>	<b>21</b>	<b>22</b>	<b>23</b>	<b>24</b>	<b>25</b>	<b>26</b>
<b>27</b>	<b>28</b>	<b>29</b>	<b>30</b>	<b>31</b>		

February						
S	M	T	W	T	F	S
					<b>1</b>	<b>2</b>
<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>
<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>
<b>17</b>	<b>18</b>	<b>19</b>	<b>20</b>	<b>21</b>	<b>22</b>	<b>23</b>
<b>24</b>	<b>25</b>	<b>26</b>	<b>27</b>	<b>28</b>		

March						
S	M	T	W	T	F	S
					<b>1</b>	<b>2</b>
<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>
<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>
<b>17</b>	<b>18</b>	<b>19</b>	<b>20</b>	<b>21</b>	<b>22</b>	<b>23</b>
<b>24</b>	<b>25</b>	<b>26</b>	<b>27</b>	<b>28</b>	<b>29</b>	<b>30</b>
			<b>31</b>			

April						
S	M	T	W	T	F	S
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>
<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>
<b>14</b>	<b>15</b>	<b>16</b>	<b>17</b>	<b>18</b>	<b>19</b>	<b>20</b>
<b>21</b>	<b>22</b>	<b>23</b>	<b>24</b>	<b>25</b>	<b>26</b>	<b>27</b>
<b>28</b>	<b>29</b>	<b>30</b>				

May						
S	M	T	W	T	F	S
		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	
<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>
<b>12</b>	<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>	<b>17</b>	<b>18</b>
<b>19</b>	<b>20</b>	<b>21</b>	<b>22</b>	<b>23</b>	<b>24</b>	<b>25</b>
<b>26</b>	<b>27</b>	<b>28</b>	<b>29</b>	<b>30</b>	<b>31</b>	

June						
S	M	T	W	T	F	S
						<b>1</b>
<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>
<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>	<b>14</b>	<b>15</b>
<b>16</b>	<b>17</b>	<b>18</b>	<b>19</b>	<b>20</b>	<b>21</b>	<b>22</b>
<b>23</b>	<b>24</b>	<b>25</b>	<b>26</b>	<b>27</b>	<b>28</b>	<b>29</b>
						<b>30</b>

July						
S	M	T	W	T	F	S
		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>
<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>	<b>17</b>	<b>18</b>	<b>19</b>
<b>20</b>	<b>21</b>	<b>22</b>	<b>23</b>	<b>24</b>	<b>25</b>	<b>26</b>
<b>27</b>	<b>28</b>	<b>29</b>	<b>30</b>	<b>31</b>		

August						
S	M	T	W	T	F	S
					<b>1</b>	<b>2</b>
<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>
<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>
<b>17</b>	<b>18</b>	<b>19</b>	<b>20</b>	<b>21</b>	<b>22</b>	<b>23</b>
<b>24</b>	<b>25</b>	<b>26</b>	<b>27</b>	<b>28</b>	<b>29</b>	<b>30</b>
						<b>31</b>

September						
S	M	T	W	T	F	S
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>
<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>	<b>14</b>
<b>15</b>	<b>16</b>	<b>17</b>	<b>18</b>	<b>19</b>	<b>20</b>	<b>21</b>
<b>22</b>	<b>23</b>	<b>24</b>	<b>25</b>	<b>26</b>	<b>27</b>	<b>28</b>
<b>29</b>	<b>30</b>					

October						
S	M	T	W	T	F	S
		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>
<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>	<b>17</b>	<b>18</b>	<b>19</b>
<b>20</b>	<b>21</b>	<b>22</b>	<b>23</b>	<b>24</b>	<b>25</b>	<b>26</b>
<b>27</b>	<b>28</b>	<b>29</b>	<b>30</b>	<b>31</b>		

November						
S	M	T	W	T	F	S
					<b>1</b>	<b>2</b>
<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>
<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>
<b>17</b>	<b>18</b>	<b>19</b>	<b>20</b>	<b>21</b>	<b>22</b>	<b>23</b>
<b>24</b>	<b>25</b>	<b>26</b>	<b>27</b>	<b>28</b>	<b>29</b>	<b>30</b>

December						
S	M	T	W	T	F	S
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>
<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>	<b>14</b>
<b>15</b>	<b>16</b>	<b>17</b>	<b>18</b>	<b>19</b>	<b>20</b>	<b>21</b>
<b>22</b>	<b>23</b>	<b>24</b>	<b>25</b>	<b>26</b>	<b>27</b>	<b>28</b>
<b>29</b>	<b>30</b>	<b>31</b>				

★ This meeting will be held at Ventura County Admin. Building/Lower Plaza Assembly Room at 6PM