

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

Compliance Oversight Committee

Regular Meeting

Monday, January 26, 2026, 1:00 P.M.

711 E Daily Drive #110, Camarillo, CA 93010

Members of the public can participate using the Conference Call Number below.

Conference Call Number: 1-805-324-7279

Conference ID Number: 517 118 659#

AGENDA

CALL TO ORDER

ROLL CALL

PUBLIC COMMENT

The public has the opportunity to address the Compliance Oversight Committee (COC) on the agenda.

Persons wishing to address the COC are limited to three (3) minutes. Comments regarding items not on the agenda must be within the subject jurisdiction of the Committee.

Members of the public may call in, using the numbers above, or can submit public comments to the Committee via email by sending an email to ask@goldchp.org. If members of the public want to speak on a particular agenda item, please identify the agenda item number. Public comments submitted by email should be under 300 words.

CONSENT

- Approval of Compliance Oversight Committee meeting minutes of September 22, 2025.**

Staff: Maddie Guterrez, MMC Clerk to the Commission

RECOMMENDATION: Approve the minutes of September 22, 2025

2. Corporate Integrity Agreement Year 4 Verbal Update

Staff: Robert Franco, Chief Compliance Officer

RECOMMENDATION: Receive and File

3. Annual Compliance Training – Corporate Integrity Agreement

Staff: Leeann Habte, Partner Best, Best & Krieger LLP

RECOMMENDATION: Receive and File

COMMENTS/QUESTIONS 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 Secretary of the Committee.

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 Monday prior to the meeting by 1:00 p.m. to enable GCHP to make reasonable arrangements for accessibility to this meeting.

AGENDA ITEM NO. 1

TO: Compliance Oversight Committee

FROM: Maddie Gutierrez, MMC, Sr. Clerk for the Commission

DATE: January 26, 2026

SUBJECT: Regular Meeting Minutes of September 22, 2025

RECOMMENDATION:

Approve the minutes.

ATTACHMENT:

Copy of Compliance Oversight Committee meeting minutes of September 22, 2025

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

**Compliance Oversight Committee
Meeting Minutes
September 22, 2025**

CALL TO ORDER

The Commission Chair, Laura Espinosa called the meeting to order at 1:05 p.m.

ROLL CALL

Present: Commissioners James Corwin, Laura Espinosa, Supervisor Vianey Lopez, and Dee Pupa

Absent: None.

Attending the meeting for GCHP: CCO Robert Franco, CEO Felix L. Nunez, M.D., CPPO Erik Cho, CFO Sara Dersch, Paul Aguilar Chief of HR, James Cruz, M.D., CMO, CIO Eve Gelb, General Counsel Scott Campbell, and Leeann Habte of BBK.

Also attending were Victoria Warner, Bianca Naron, and Jeff Yarges.

PUBLIC COMMENT

None.

CONSENT

1. Approval of Compliance Oversight Committee meeting minutes of July 14, 2025.

Staff: Maddie Guitierrez, MMC Clerk to the Commission

RECOMMENDATION: Approve the minutes as presented.

Commissioner Pupa motioned to approve the minutes. Supervisor Lopez seconded the motion.

Roll Call Vote as follows:

AYES: Commissioners Laura Espinosa, James Corwin, Supervisor Vianey Lopez, and Dee Pupa.

NOES: None.

The clerk declared the motion carried.

PRESENTATIONS

2. Review of Second Annual Report to the Office of the Inspector General for the August 11, 2024 – August 10, 2025, Reporting Period

Staff: Robert Franco, Chief Compliance Officer
Sara Dersch, Chief Financial Officer

RECOMMENDATION: Receive and file the presentation

Chief Compliance Officer, Robert Franco reviewed the second annual report. He will review highlights of changes, as we are now heading toward the end of the third-year reporting period. CCO Franco stated that every quarter staff has been reporting to the committee, and this will be an update. We are going into year four.

Commissioner Espinosa asked if the committee's obligation was through five years. CCO Franco stated that in year four there will be two reports, and information will be presented in the wrap-up report on how we are going to continue with the requirements of the CIA.

The CIA reporting period is August 11 through August 10. This is our third requirement with the same twenty-three requirements that we have been reviewing every quarter. He reviewed all the members of the compliance committee and the updates = which were Dr. Nunez going from Chief Medical Officer to Chief Executive Officer, and Dr. Cruz going from Medical Director to Chief Medical Officer. There have been no changes to the oversight committee and certifying employees have remained the same. The only change is that Mr. Liguori is no longer with GCHP. There is a board resolution required by CIA will be done at this meeting. Meeting dates held were listed as well as material reviews and action taken and all trainings done during this quarter. We are getting ready for next year's training as we are heading into year four. We will have more updates which will be presented to the committee before implementing.

CCO Franco review the new revised policies and procedures and any changes that have been made to the training plan. The training will be conducted with the utilization

of Litmos, which is a computer-based training so that we can track the start and the completion. He noted that we have had 100% of all trainings completed.

Commissioner Corwin asked about the changes within executive staff; Mr. Liguori is no longer at GCHP and Dr. Nunez was CMO and transferred to CEO, so would Dr. Cruz be new to the group or is he added to the group as CMO. CCO Franco stated there was an official notification of all changes made. Leeann Habte of BBK Law stated Dr. Cruz were on the Compliance Committee, and Dr. Cruz is now a certifying employee because he was not on the list last year. Dr. Nunez' position was changed/switched. Commissioner Corwin stated he just wanted to make sure the information as listed was enough for the OIG report. Dr. Nunez and CCO Franco stated it was enough information for the report.

Chief Financial Officer, Sara Dersch, stated that for calendar year 2023 the MLR report that was filed. The element that was audited was the HCQI Healthcare Quality Improvement element. Those are the administrative expenses that administrative expenses that we should reclassify to medical spend because they met very strict CMS criteria by either being tied directly to improving patient outcomes, reducing hospital readmission rates, technology investments to improve health outcomes, member incentives provided to members so they get certain screenings or vaccines. The auditor found that quote "GCHP process used to calculate and report HCQI expenditures for calendar year 2023 was generally consistent with applicable MLR reporting standards and requirements." Which means we passed. The auditor had some recommendations around enhancing some of our documentation which we will implement over the next few months and will use for our calendar year 2024 MLR report which is due in December. The auditors noted that documentation had improved over prior years, and that accounting staff was knowledgeable of all entries in the supporting documentation.

CCO Franco stated that based off those findings we have also created a corrective action plan which we will be monitoring as we head towards this implementation. He also noted that we have implemented and made significant changes around our risk assessment and internal review that we have expanded. CCO Franco stated that one of the other processes that we have implemented this year, with the addition of our internal audit team is that we have completed two internal audits for the third-year reporting period. We have done the anti-kickback statute requirements and the ineligible screening requirements. We are moving toward an automated process which will eliminate some of the deficiencies that continue due to manual processes and eliminate future errors.

CCO Franco reviewed the timeline. He stated that we will be submitting to the Commission for the review and approval. We will submit to the OIG on October 9, 2025.

Supervisor Lopez motioned to approve the report. Commissioner Pupa seconded the motion.

Roll Call Vote as follows:

AYES: Commissioners Laura Espinosa, James Corwin, Supervisor Vianey Lopez, and Dee Pupa.

NOES: None.

The clerk declared the motion carried.

3. Presentation of Resolution to the Office of the Inspector General on Effectiveness of GCHP Compliance Program

Staff: Robert Franco, Chief Compliance Officer

RECOMMENDATION: Adopt Resolution 2025 -001

CCO Franco stated there is Resolution 2025-001 for signature. We have a resolution which is required to be signed every year. CCO Franco read the resolution.

Commissioner Pupa motioned to approve Resolution 2025-001. Supervisor Lopez seconded the motion.

Roll Call Vote as follows:

AYES: Commissioners Laura Espinosa, James Corwin, Supervisor Vianey Lopez, and Dee Pupa.

NOES: None.

The clerk declared the motion carried.

ADJOURNMENT

With no further business to discuss the meeting was adjourned at 1:27 p.m.

Approved:

Maddie Gutierrez, MMC Clerk to the Commission



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AGENDA ITEM NO. 2

TO: Compliance Oversight Committee

FROM: Robert Franco, Chief Compliance Officer

DATE: January 26, 2026

SUBJECT: **Corporate Integrity Agreement Year 4 Verbal Update**

VERBAL PRESENTATION



AGENDA ITEM NO. 3

TO: Compliance Oversight Committee

FROM: Leeann Habte, BBK Law

DATE: January 26, 2026

SUBJECT: Annual Compliance Training – Corporate Integrity Agreement

VERBAL PRESENTATION