AUDIT & COMPLIANCE COMMITTEE MEETING
Wednesday, June 4th, 2025
50 Water Street, 12th Floor Conference Room
New York, N.Y. 10004

AGENDA

Call To Order	**Kathleen Shure**
Old Business	
Adoption of Minutes | March 26th, 2025	**Kathleen Shure**
New Business	
Compliance Executive Summary	**Raven Ryan Solon**
Federal & New York State Update	**Lauren Leverich Castaldo**
Internal Audit Executive Summary	**Joseph Sorbello**
Quarterly Cybersecurity Update	**Robert Micillo**
Executive Session	**Kathleen Shure**
Adjournment	**Kathleen Shure**

Minutes
of
March 26th, 2025
Audit & Compliance Committee
Meeting

MetroPlus Health Plan, Inc.
Aduit & Compliance Committee
Wednesday, March 26th, 2025

Audit & Compliance Committee Minutes

The meeting of the Audit & Compliance Committee of the MetroPlus Health Plan, Inc. (hereafter "MetroPlus or the Plan") was held in the 7th Floor Boardroom at 50 Water Street, New York, NY 10004 on the 26th day of March 2025 at 2:30 P.M.

The following Committee Members were present via video conference or in-person:

Sally Hernandez-Piñero
Vallencia Lloyd
Kathleen Shure

Kathleen Shure, Interim Chair of the Audit & Compliance Committee, called the meeting to order at 2:30 P.M.

Kathleen Shure chaired the meeting and Angela Minerva kept the minutes thereof.

ADOPTION OF THE MINUTES

The minutes of the Audit & Compliance meeting held on December 11th, 2024, were presented to the Committee. On a motion by Kathleen Shure and duly seconded, the Committee adopted the minutes.

KPMG PRESENTATION | 2024 Calendar Year Audit Report
Eric Crossett, Senior Audit Manager and Jocelyn Denalsky, Audit Partner at KPMG discussed MetroPlusHealth's 2024 Calendar Year Audit Report. They presented A Better Audit Experience, an Overview of the Audit Results, Audit Results Required Communications & Other Matters, Outstanding Matters, Auditor's Report, Significant Accounting Estimates, Required Inquiries, 2025 Board Agenda, Financial Balance Sheet and Cash Flow.

Dr. Talya Schwartz, President & CEO made a comment regarding KPMG's central estimate, recoverables, and asked a question regarding AI capabilities.

Jocelyn Denalsky responded.

NEW BUSINESS

INTERNAL AUDIT EXECUTIVE SUMMARY

Kathleen Shure asked that we move on to the Internal Audit Executive Summary. Joseph Sorbello, Director of Internal Audits presented the Agenda, 2025 Audit Plan Status, Nursing Home Financing Audit, Provider Directory Audit, Provider Payment Records Audit, Corrective Action Plan Status, 2024 Model Audit Rule (MAR) Status and MAR Improvements in 2024.

Committee Members asked a question regarding sample size as it pertains to the Nursing Home Financing Audit.

Both Joseph Sorbello, Raven Ryan Solon, Chief Compliance & Regulatory Officer and Dr. Talya Schwartz responded.

QUARTERLY CYBERSECURITY UPDATE

Kathleen Shure asked that we move on to the Quarterly Cybersecurity Update. Robert Micillo, Chief Information Security Officer presented Training & Awareness, System Health, Security Investigation Updates, Business Continuity and Disaster Recovery, Coalfire Opportunities for Improvement, Application Development Lifecycle & Security, New NYS/DFS Cybersecurity Regulation & Timeline, Program Measurements – Delegated Vendor Security Tracking and Security Posture for Local Competition.

Committee Members asked questions regarding the Cybersecurity Regulation & Timeline and MetroPlusHealth security score.

Both Ganesh Ramratan, Chief Information Officer and Rober Micillo responded.

Compliance Executive Summary

Kathleen Shure asked that we move on to the Compliance Executive Summary. Raven Ryan Solon presented the 2024 Work Plan Summary.

Committee Members asked a question regarding PCP Auto Assignment; Raven Ryan Solon responded.

Committee Members approved the modification of the 2024 Work Plan.

Raven Ryan Solon went on to discuss Compliance Activity Categories, the 2025 Compliance Work Plan Summary, First Tier Vendors – Annual Risk Assessment and Department Activities.

Committee Members approved the 2025 Compliance Work Plan Summary.

Raven Ryan Solon went on to discuss 2025 SIU Work Plan Summary.

Dr. Schwartz commented on the SIU Plan moving forward; Raven Ryan Solon responded.

Committee Members approved the 2025 SIU Work Plan Summary.

Raven Ryan Solon then went on to present the Statement of Deficiencies, External OMIG Audits, External OMIG Simultaneously Enrollment Audits, External OMIG MLTC Care Management Audit, External OSC & SDOH Audits, External SDOH Focus Survey Audits, 2023 Program Integrity Review Results, 2023 Delegation Oversight Program Summary Review, Business Process Monitoring Q3 2024 Internal Dashboard (excluding Medicare), Business

Process Monitoring Q3 2024 Internal Dashboard (Medicare), Business Process Monitoring Q3 2024 Delegated Vendor Dashboard (excluding Medicare), Business Process Monitoring Q3 2024 Delegated Vendor Dashboard (Medicare), BH Rate Monitoring and BH Monitoring Divisionary Programs Underpayments.

Committee Members asked questions regarding Provider Directory, Access & Availability, and Statement of Deficiencies; Raven Ryan Solon responded.

Steven Stein Cushman, Chief Counsel, briefed the Committee on the status of the Simultaneously Enrollment External Audit.

Committee Members responded, Dr. Talya Schwartz provided further background.

Committee Members asked additional questions regarding the MLTC Care Management Audit; Raven Ryan Solon responded.

Dr. Talya Schwartz spoke to the Business Process Monitoring Q3 Delegated Vendor Dashboard (Medicare); Committee Members asked a question and Dr. Talya Schwartz responded.

There being no further business, Kathleen Shure adjourned the meeting at 4:33 P.M.

New Business

MetroPlus**Health**

Audit & Compliance Committee

Wednesday, June 4th, 2025

MetroPlus Health

For People. Not Profit.

Compliance Executive Summary

Raven Ryan Solon
Chief Regulatory & Compliance Officer

Wednesday, June 4th, 2025

AGENDA

01 2025 Work Plan

02 Compliance Highlights

03 Regulatory Highlights

2025 Work Plan

2025 WORK PLAN STATUS | CORPORATE COMPLIANCE

Category	Work Plan Item	Initiated	Percentage Complete
Annual Activity	Service Verifications	Q1 2025	15%
Audit	Provider Directory	Q1 2025	90%
Annual Activity	OMIG Managed Care Plan Annual Report	Q1 2025	100%
Annual Activity	SDOH Annual Fraud and Abuse Report: Part 1	Q1 2025	100%
Annual Activity	SDOH Annual Fraud and Abuse Report: Part 2	Q1 2025	90%
Ongoing Monitoring	Exclusion Screenings	Q1 2025	25%
Annual Activity	MAP Quarterly Report	Q1 2025	25%
Annual Activity	MLTC Quarterly Report	Q1 2025	25%
Implementation Oversight	Encounter Data Audit Corrective Actions	Q1 2025	45%
Annual Activity	External CHP Audit	Q1 2025	80%

2025 WORK PLAN STATUS | PRIVACY

Category	Work Plan Item	Initiated	Percentage Complete
Annual Activity	Privacy Walk-throughs	Q1 2025	25%
Annual Activity	HIPAA Security, Privacy and Breach Compliance Assessment	Q1 2025	25%

2025 WORK PLAN STATUS | VENDOR COMPLIANCE

Category	Work Plan Item	Initiated	Percentage Complete
Ongoing Monitoring	Vendor Exclusion Screening	Q1 2025	25%
Annual Activity	Annual Compliance Program Vendor Attestations	Q1 2025	100%
Annual Activity	Annual TPMO Compliance Attestation	Q1 2025	100%
Annual Activity	Vendor Delegation Oversight Program Assessment	Q1 2025	30%
Audit	Vendor Classification	Carry-over	90%
Implementation Oversight	Medicare Scorecards	Carry-over	100%
Audit	2024 SS&C Operational Audit	Q4 2024	80%
Audit	2024 Ritter Operational Audit	Q4 2024	80%
Audit	2024 CVS Compliance Oversight Audit	Q4 2024	90%
Audit	2024 DentaQuest Operational Audit	Q3 2024	90%
Audit	2024 Modivcare Operational Audit	Q4 2024	70%

2025 WORK PLAN STATUS | SPECIAL INVESTIGATIONS UNIT

Category	Work Plan Item	Initiated	Percentage Complete
Training	Specialized FWA training	Q1 2025	10%
Ongoing Monitoring	Underutilization review	Q1 2025	25%
Ongoing Monitoring	Outlier notification letter	Q1 2025	10%
Audit	E&M Codes - Reviewed reimbursement for high-level E&M services	Q1 2025	25%
Audit	Opioid Prescribers	Q1 2025	50%
Audit	Labs – Genetic Testing	Q1 2025	25%
Audit	Durable Medical Equipment	Q1 2025	25%
Audit	PCS Services	Q1 2025	25%
Audit	BH – Psychotherapy Services	Q1 2025	25%

2025 WORK PLAN STATUS | PRODUCT COMPLIANCE

Category	Work Plan Item	Initiated	Percentage Complete
Implementation Oversight	RRP Enhancements	Q4 2024	75%
Implementation Oversight	CHP Audit Corrective Actions	Q4 2024	65%
Audit	Article 44 Readiness	Q1 2025	10%

2025 WORK PLAN STATUS | BUSINESS PROCESS MONITORING

Category	Work Plan Item	Initiated	Percentage Complete
Ongoing Monitoring	Complaints and Grievances	Q1 2025	25%
Ongoing Monitoring	BH Utilization Review	Q1 2025	25%
Ongoing Monitoring	MLTC Utilization Review	Q1 2025	25%
Ongoing Monitoring	Integra Utilization Review	Q1 2025	25%
Ongoing Monitoring	DentaQuest Complaints and Grievances	Q1 2025	25%
Ongoing Monitoring	DentaQuest Utilization Review	Q1 2025	25%
Ongoing Monitoring	CVS Utilization Review	Q1 2025	25%
Ongoing Monitoring	BH Claims Monitoring - Denials	Q1 2025	25%
Ongoing Monitoring	BH Claims Monitoring - Underpayments	Q1 2025	25%

2025 WORK PLAN STATUS | BUSINESS PROCESS MONITORING

LOB: Medicare

Category	Work Plan Item	Initiated	Percentage Complete
Ongoing Monitoring	Medicare Utilization Review	Q1 2025	25%
Ongoing Monitoring	MAP Utilization Review	Q1 2025	25%
Ongoing Monitoring	Complaints and Grievances	Q1 2025	25%
Ongoing Monitoring	DentaQuest Complaints and Grievances	Q1 2025	25%
Ongoing Monitoring	DentaQuest Utilization Review	Q1 2025	25%
Ongoing Monitoring	Integra Utilization Review	Q1 2025	25%
Ongoing Monitoring	CVS Utilization Review	Q1 2025	25%

Compliance Highlights

ACTIVITIES | CORPORATE COMPLIANCE

Exclusion Screenings

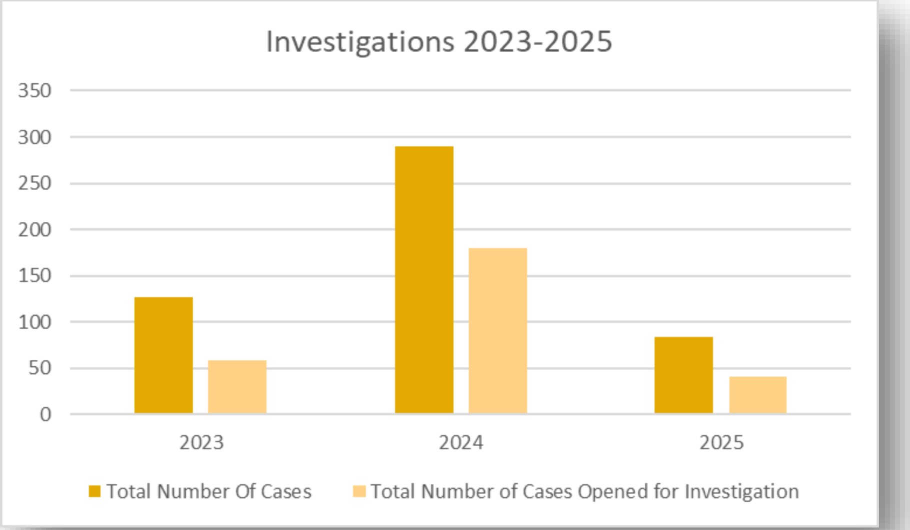
Monthly, Compliance reviews the results of exclusion screenings performed by Human Resource, Non-Provider Contracting, Provider Maintenance, and Credentialing. Any positive matches are investigated by Compliance to ensure proper termination of relationship.

Q1: Completed

Case Investigations Overview

Reports submitted through all reporting mechanisms, including the Compliance Hotline.

Total Reports Received: 64
Triaged: 35
Total Compliance Investigations Opened: 29
Total Investigations Closed: 8



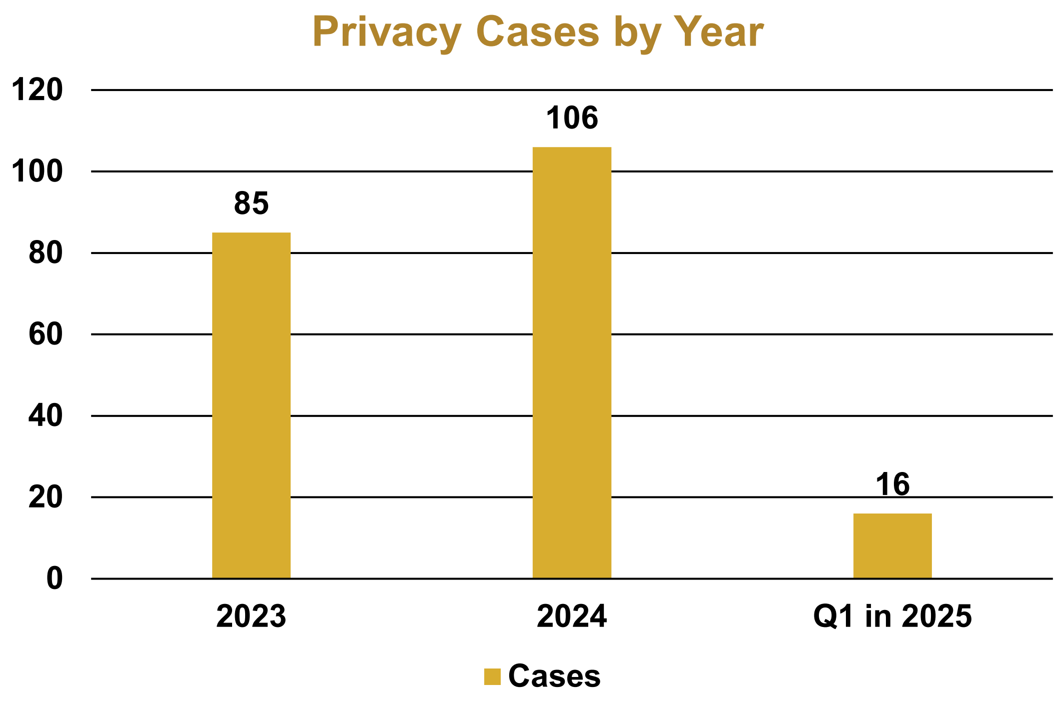
ACTIVITIES | PRIVACY

Case Investigations Overview

Reports submitted through all reporting mechanisms, including the Compliance Hotline.

Total Reports Received: 16
Triaged: 0
Total Privacy Investigations Opened: 16
Total Investigations Closed: 30

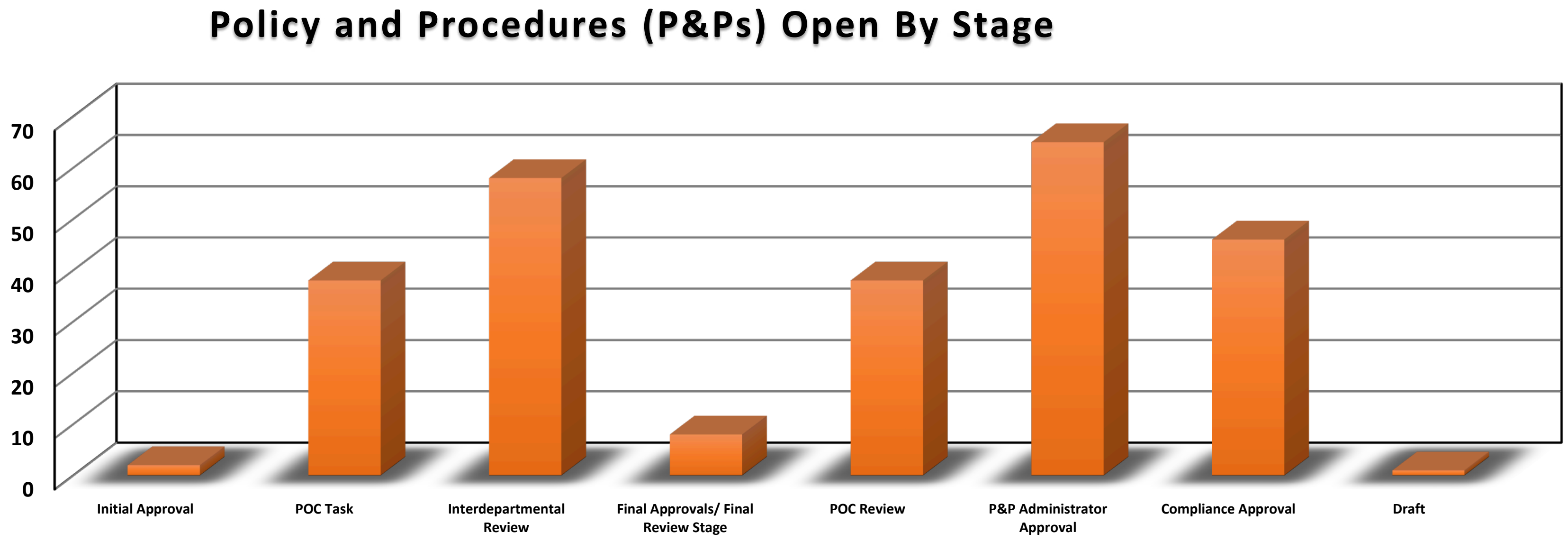
- **2024:** 19
- **2025:** 11



ACTIVITIES | REGULATORY OPERATIONS | P&PS

There are currently 256 P&Ps open.

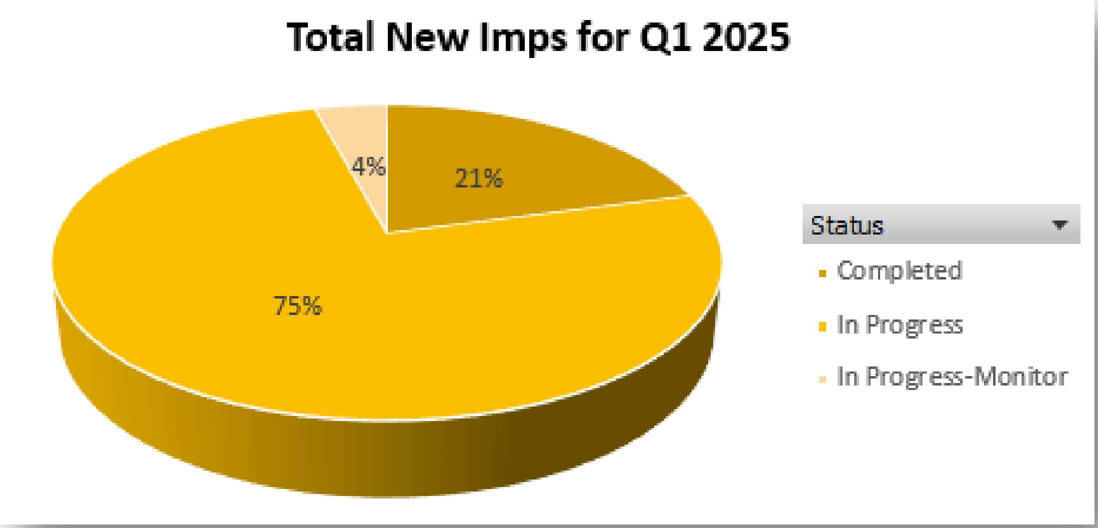
- **P&Ps Initiated for Annual and Regulatory Review in Q1**: 40
- **Total P&Ps finalized and published in Q1:** 5

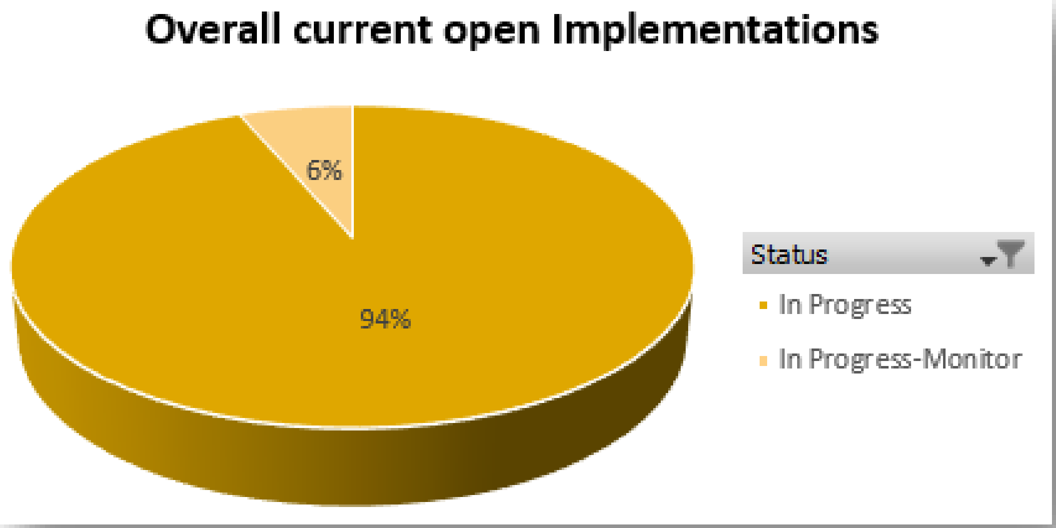


ACTIVITIES | STATE IMPLEMENTATIONS SUMMARY

Status	# of IMPs
Completed	5
In Progress	18
In Progress-Monitor	1
Grand Total	24

Status	# of IMPs
In Progress	44
In Progress-Monitor	3
Grand Total	47

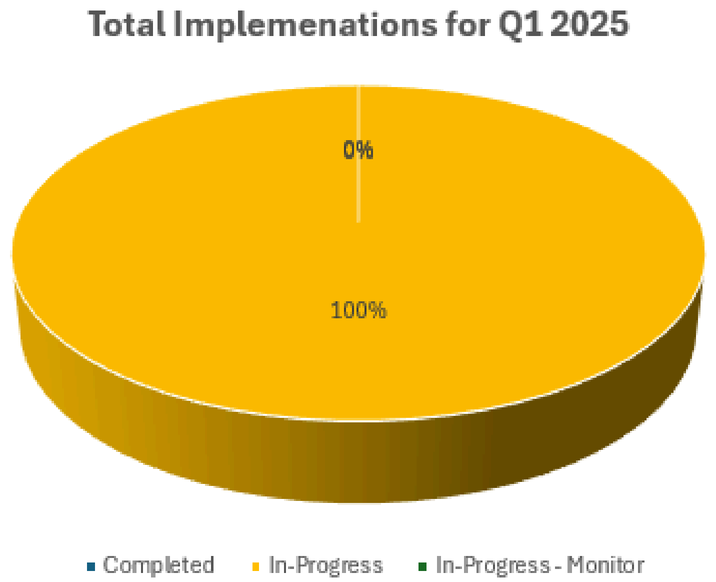


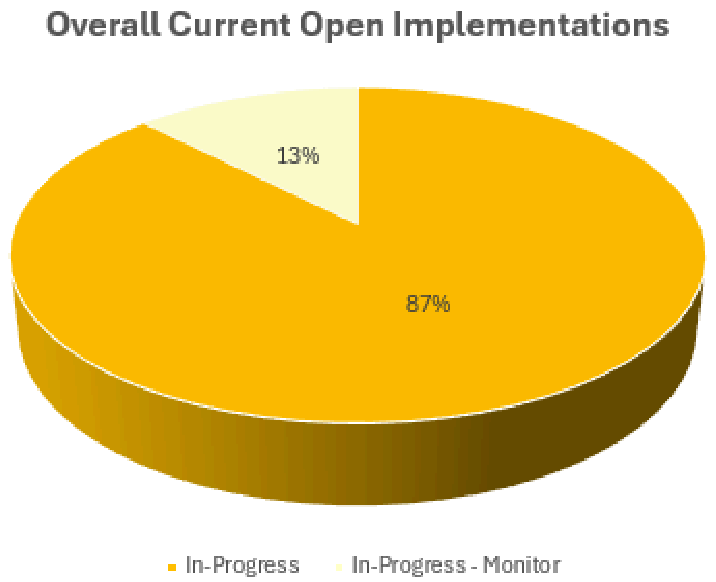


ACTIVITIES | FEDERAL & IP IMPLEMENTATIONS SUMMARY

Status	# of IMP's
Completed	0
In-Progress	2
In-Progress - Monitor	0
Grand Total	2

Status	# of IMP's
In-Progress	14
In-Progress - Monitor	2
Grand Total	16





ACTIVITIES | REGULATORY OPERATIONS | SURVEYS

Number of Surveys (Data/Information Requests)					
Q3 - 2024		Q4 -2024		Q1 - 2025	
July	26	October	18	January	20
August	20	November	24	February	10
September	12	December	25	March	15
Total: 58		Total: 67		Total: 48	
YTD: 170		YTD: 237		YTD: 48	
During Q3, the Plan received 45 requests from the State (NYSOH,OMH, DFS, etc)		During Q4, the Plan received 46 requests from the State (NYSOH,OMH, DFS, etc)		During Q1, the Plan received 36 requests from the State (NYSOH,OMH, DFS, etc)	
During Q3, the Plan received 13 requests from CMS.		During Q4, the Plan received 7 requests from CMS.		During Q1, the Plan received 6 requests from CMS.	

Regulatory Highlights

REGULATORY HIGHLIGHTS | MEDICARE

Memo Title	Effective Date	Summary
Release of CY 2026 Medicare Applications & Deadlines	2/12/2025	CMS announced the release of materials for CY 2026 Medicare applications. An application is required if MetroPlus plans to offer any service area expansion (SAE) of or in addition to our existing contract.
FAQs on Enrollment and Disenrollment Guidance	1/1/2025	The CY 2025 Final rule included several provisions to simplify options for dually eligible individuals and promote greater alignment of Medicare Advantage (MA) Dual-Eligible Special Needs Plans (D-SNPs) and Medicaid managed care organizations (MCOs).
Revised Low-Income Subsidy (LIS) Model Documents	1/1/2025	On June 12, 2024, CMS released one of the model notices that was included in Chapter 13 of the Prescription Drug Benefit Manual MetroPlus as a Part D sponsor can now access the remaining model documents – "Determination of LIS Ineligibility," "Notice of Error in Premiums and Cost Sharing," and "Notice of Removal of LIS Period(s)" – on the Part D Model Materials website.
Participation in 2025 HOS/HOS-M for MA FIDE SNPs in 2026	2/28/2025 Due Date	CMS is permitted to pay a frailty adjustment to a Dual Eligible SNP that is both "fully integrated with capitated contracts with States for Medicaid benefits, including long-term care" and has a "similar average level of frailty…as the PACE program." Frailty scores are calculated using the limitation on activities of daily living (ADL) reported by a plan's enrollees, based on the Medicare Health Outcomes Survey (HOS) from the year prior to the payment year (PY).
2025 Medicare Part D Low-Income Subsidy (LIS) Income and Resource Standards	1/1/2025	CMS is providing the updated income and resource standards for members applying for low-income subsidy (LIS) for Medicare Part D as required yearly. The new income and resource standards will be applied to all LIS applications filed on or after January 1, 2025.
Preliminary CY 2026 Standards for Part C Benefits, Bid Review and Evaluation	1/1/2025	This memo includes operational instructions for Medicare plans regarding Part C benefits, bid review and evaluation, and provides interested parties with an opportunity to comment on this memo before final guidance is released.
OEC Removal of Sexual Orientation and Gender Identity (SOGI) Questions from the Medicare Enrollment Forms	N/A	Per Executive Order 14168 ("Defending Women From Gender Ideology Extremism and Restoring Biological Truth to the Federal Government") CMS will remove the voluntary Sexual Orientation and Gender Identification (SOGI) questions from the Model C/D and LINET enrollment forms.

REGULATORY HIGHLIGHTS | MEDICARE

Memo Title	Effective Date	Summary
Extension of Oral Antiviral Drugs with Emergency Use Authorization (EUA) as Part D Drugs	N/A	The CMS memo titled “Introduction of Prescription Oral Antivirals for COVID-19 to the Commercial Market,” and dated December 26, 2024, relating to commercial EUA-labeled Lagevrio, will continue to apply through September 30, 2025. Prescription oral antivirals for COVID-19 with emergency use authorization (EUA) are included in the definition of a Part D drug through September 30, 2025.
Withdrawal of Memo Announcing Change to Beneficiary Use of the SEP for Individuals Affected by a Government Entity-Declared Disaster or Other Emergency	N/A	CMS is withdrawing the 12/3/2024 memo which announced a change to how Medicare beneficiaries can make an election using the Special Election Period for Individuals Affected by a Government Entity-Declared Disaster or Other Emergency (Disaster/Emergency SEP). The proposed change will no longer go into effect on April 1, 2025.

REGULATORY HIGHLIGHTS | COMMERCIAL/EP/QHP

Memo Title	Effective Date	Summary
Expanding Coverage for Supplemental Breast Cancer Screenings	1/1/26	The Governor signed A.1696C/S.2465C into law expanding coverage for breast cancer screening and imaging. Beginning 1/1/26 this law requires insurers to include diagnostic mammograms, breast ultrasounds, or breast magnetic resonance imaging (MRI) as part of their supplemental screenings.
Coverage for Prenatal Vitamins	1/1/25	The Governor signed A.3865-A/S.1965A into law requiring health insurers to cover prenatal vitamins. The law stipulates that vitamins will be covered only when prescribed by a licensed and/or certified practitioner. This law only applies to plans that provide prescription drug coverage. For Gold and GoldCare, this only applies to members that select the pharmacy rider.
Executive Budget 24-25: No Cost Sharing for Insulin	1/1/25	The recently approved FY25 Executive Budget includes a provision that eliminates co-pays for insulin for state regulated plans which improves access to care and adherence to this life saving treatment. This applies to all commercial LOBS (Gold, GoldCare, QHP, & EP).
Expanding Coverage Requirements for Human Donor Milk	1/1/25	The Governor signed S.6674-A/A.7790-A into law expanding coverage for human donor milk to the outpatient setting. This amendment removes the inpatient use only requirement. The amendment stipulates that a licensed medical practitioner must order the milk. Specific clinical criteria for the mother or infant must be met for coverage including: • Infants weighing < 1500 g, those with a high risk for developing necrotizing enterocolitis, or have a congenital or acquire condition necessitating donor milk. • Mothers unable to produce any or inadequate amounts or milk, those lacking lactation support, among others.

REGULATORY HIGHLIGHTS | STATE

Memo Title	Effective Date	Summary
29-I Health Facility Billing Manual Update	01/01/2025	OMH released an update to the 29-I Health Facility Billing Manual, to support the recent AMA coding update.
PROS Redesign Approval Effective 4/1/2025	04/01/2025	OMH notified plans that the PROS redesign has been promulgated. Changes will now go into effect on **April 1, 2025.**
School-Based Health Center Services (Billing Guidance & Transition of SBHC to MMC)	**TBD**	The State has put **on hold** the SBHC and SBHC-Dental (SBHC-D) implementation. DOH released two School-Based Health Center (SBHC) policy documents, "NYS Mainstream Medicaid Managed Care and School-Based Health Center Billing Guidance" along with the "Transition of School-Based Health Center Benefit and Population into Medicaid Managed Care."
MPH: Child Health Plus Premium Rates effective January 1, 2025	1/1/25	DOH released the 2025 CHP premium rates effective 1/1/25. These rates will be updated by the State in both NYSoH and Knowledge, Information and Data System (KIDS). Plans will be paid these rates for subsidized members in the January voucher. Members must be notified of this change 30 days prior to the change. The model template notice is to be sent to unsubsidized members.

Federal & New York State Updates

Lauren Leverich Castaldo
Chief Financial Officer

Wednesday, June 4th, 2025

FEDERAL RISK | NYS

- **Restricting Immigrant Coverage**
    - 10% Penalty on Expansion FMAP for Covering Undocumented Immigrants with State funds.
- **Restrict Premium tax Credit and Medicare Eligibility to Lawful Permanent Residents, Certain Cubans, & People from CFAs**
    - Eligible aliens' definition shrunken, does not include the "Aliessa" population despite their lawful presence.
- **Implementing Mandatory Work Requirements as a Condition for Medicaid Eligibility**
    - Beginning as early as 2026
- **Adding Red Tape to Medicaid Enrollment Eligibility**
    - Eligibility Checks every 6 months.
    - Reducing retroactive Medicaid from 3 months to 1.
    - Cost Sharing for income above 100% FPL.
- **Revoking New York's MCO Tax and Banning New Provider Tax**
    - Medicaid Quality Awards funded NYS budget via MCO tax revenue.

STATE BUDGET SFY 2025 HIGHLIGHTS

Included

- Eliminate Quality Funding in Managed Long-Term Care.
- Managed Care Contracting and Performance Penalties.
  - Violations to range from $25 to $25,000.
- **MCO Tax:** Medicaid, Essential Plan, and commercial plans.
- Carve out of Medicaid Nursing home.

Did Not Include

- Independent Dispute Resolution (IDR) Medicaid Exclusion.
  - IDR results in higher payments to out-of-network providers.

40 MetroPlus Health

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Internal Audit Summary

Joseph T. Sorbello
Director of Internal Audits

Wednesday, June 4th, 2025

2025 Audit Plan Status

2025 AUDIT PLAN

Audit	Scheduled	Status
Model Audit Rule	Q1	Complete
Nursing Home Financing	Q3-24	Complete
Provider Directory	Q4-24	In Progress
Provider Payment Records	Q1	In Progress
Member Applications	Q2	Not Started
ESRD - Population Management	Q3	Not Started
Review ID Card Generation	Q4	Not Started
Direct Provider Payments	Q4	Not Started
Vendor Management	Q2	Deferred
PCP Auto Assignment	Q3	Deferred

Internal Audit Follow-Up

INTERNAL AUDIT FOLLOW-UP

Internal Audit currently has four open items across two audits.

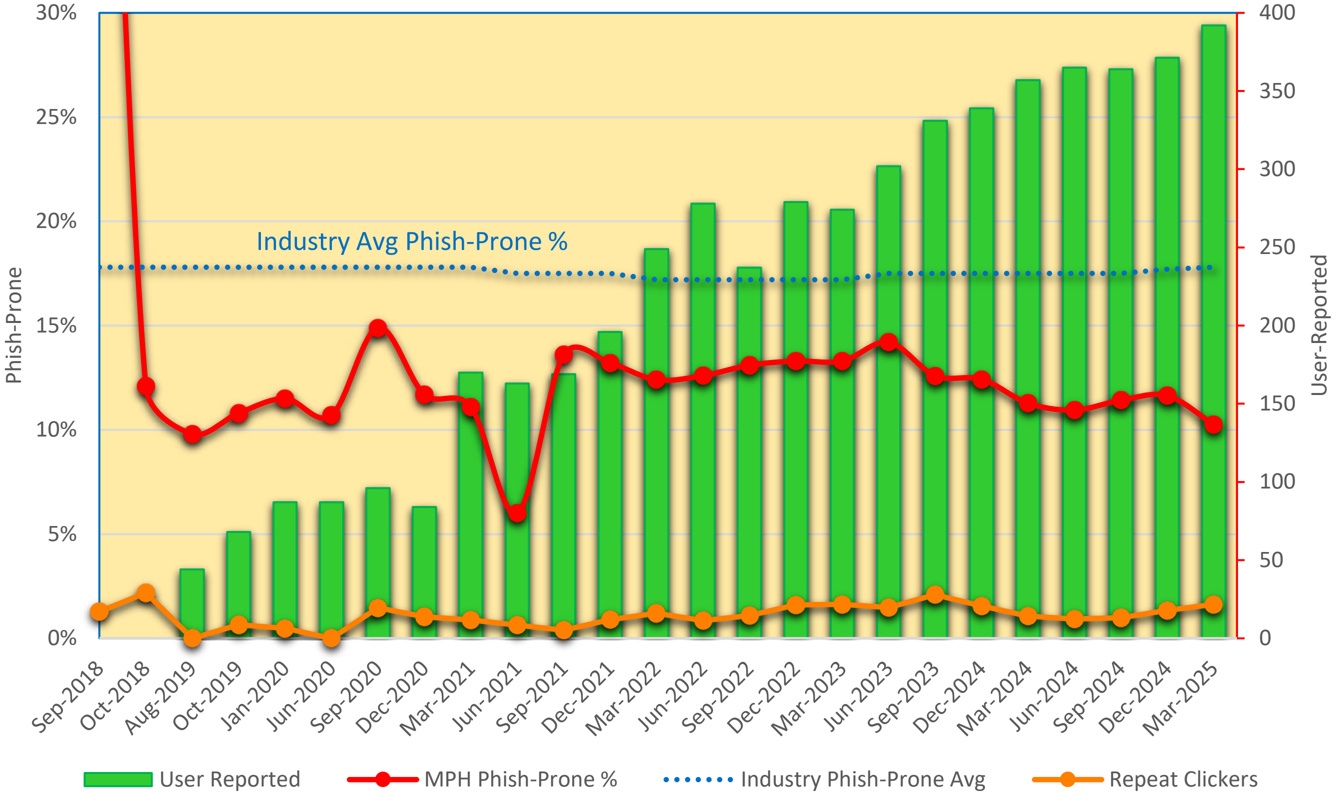
Quarterly Cybersecurity Update

Robert Micillo
Chief Information Officer

Wednesday, June 4th, 2025

TRAINING & AWARENESS

Orchestrated Phishing Simulations and Testing



Healthcare and Pharmaceuticals Space

Last Campaign Phish-Prone %	10.3%
Industry Avg Phish-Prone %	17.8%
Repeat Clickers %	1.63%

- **Phish Reported %:** 392 Q1 vs. 371 Q4
- **Phish-Prone %:** 10.3% Q1 vs. 11.6% Q4
- **Repeat Clickers %:** 1.63% Q1 vs. 1.34% Q4

SYSTEM HEALTH

Mail Defense

1q25 Email Delivery: 45%
4q24 Email Delivery: 46%

Antivirus Signature Updates

1q25 AV Sigs: 99%
4q24 AV Sigs: 99%

Security Patching Cadence

1q25 Patching: 98%
4q24 Patching: 93%

Security Operations (Q1)

Security Incident Management SLAs

- Mean Time to Detect (SLA=30mins): **24**
- Mean Time to Triage (SLA 60 mins): **46**
- Mean Time to Notify (SLA=90 mins): **53**

SECURITY INVESTIGATION UPDATES

Behavioral Analytics	• **User Behavior:** 654 ⬆ from 479 – **Examples:** Emails sent to personal domains, first time executable of application(s) like New TEAMS, etc. • **Assets:** 154 ⬇ down from 466 – First time discovery of new asset on the network. (New Infrastructure being introduced in perparation for Network Segmentation).
Unreturned Equipment *(Separated Staff)*	• **Laptops not returned:** 3
Lost/Stolen Equipment	• **Laptops:** 3 Lost*, 0 Stolen • **iPads:** 0 lost, 0 Stolen • **Smartphones:** 2 Lost, 1 Stolen ***Note**: 1 laptop lost in house fire.*
Staff Investigations	• **HR Investigation Requests** ▪ Across 19 Custodian accounts ▪ 20 total file extracts (19 ActivTrak, 1 Azure log) • **Search Repositories** ▪ ActivTrak – Workstation Raw Activity data based on date ▪ Azure log ▪ Office365 Location verification ▪ Call Center & Screen Recording Activity ▪ Cellular Data

BUSINESS CONTINUITY AND DISASTER RECOVERY

✓ **Conduct Disaster Recovery Tests in preparation for QTS Data Center Move; include failing over to Secondary Data Center and failing back to QTS.**

✓	**1st Disaster Recovery Test (May 3 - May 4)**	• Failed over all SQL servers, Isilon file shares, and VMs. • Tested and validated over 70 applications each for failover and restore.
✓	**2nd Disaster Recovery Test**	• Perform identical failover. • Exercise resolved issues incurred *during* 1st test (i.e., IP address changes).

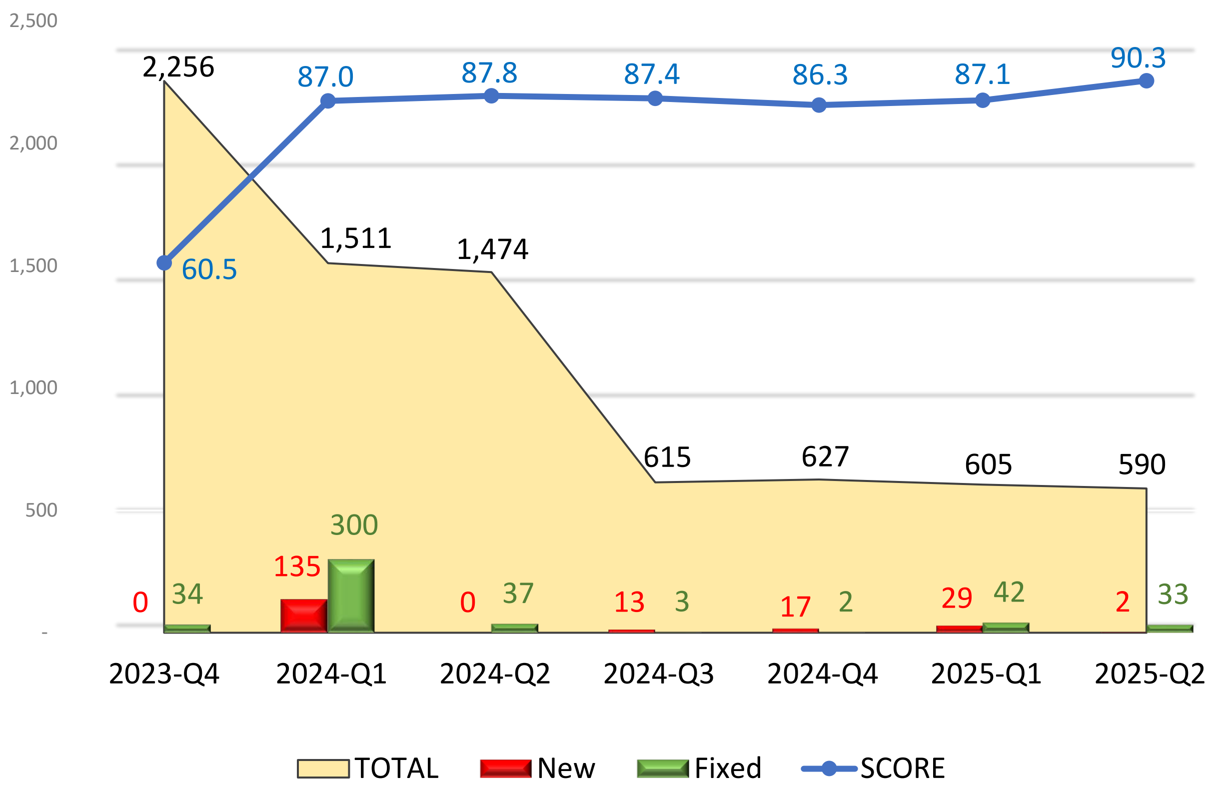
✓ **Working through evacuation drill vs. building fire drill with the Crisis Emergency Management Team (CEMT)**

- Building-sponsored fire drill is scheduled for late June; will discuss if a full/partial evacuation drill is practical.
- Working through logistics regarding meeting and check-in points.

APPLICATION DEVELOPMENT LIFECYCLE AND SECURITY

- **Quarterly Progress**
  - 2 new flaws identified, 33 resolved, and 65 mitigated.
  - Achieved a **15-net decrease** of vulnerability flaws.
  - Increased MHP **Security Scan Score** to **90.3** by 3.2.
- ***Veracode Scanning & Remediation Priority***
  - ***Priority-based tracking***
    - *Very High, High and Medium flaws*
  - ***Flaw detection** – Greenlight local scans*
  - ***Comprehensive coverage** –Full application scans*
- ***AI-Powered Security***
  - ***Microsoft Copilot** enhances security by detecting and mitigating risks earlier in the SDLC.*
  - *Accelerates risk discovery and remediation with **AI-driven** insights at scale.*
  - ***Boosts developers' efficiency**, saving **~30%** of research time with guided mitigation suggestions during development.*

Historical Progression



Note: Staring 2024-Q3 we scaled down to 8 Applications.

NEW NYS/DFS CYBERSECURITY REGULATION & TIMELINE

December 1, 2023	April 15, 2024 **Annually**	April 29, 2024	November 1, 2024	April 15, 2025 **Annually**	May 1, 2025	November 1, 2025
500.17 – *Notify DFS of Cyber events that have a reasonable likelihood of materially harming any material part of normal ops continues to be required.* *Cyber events that involve ransomware deployment and any ransom payments made must now be reported.*	***Section 500.17(b)*** *Submit either Certification of Material Compliance* ***or Acknowledgment of Noncompliance*** *for the prior calendar year.* *Both annual submissions must be signed by the highest-ranking executive* ***and the CISO.***	**500.9 Risk assessments –** Updated at least annually, ***and whenever a change in the business or technology causes a material change to the business' cyber risk.*** **Section 500.5(a)(1), (b), and (c)** *Annual penetration testing* ***from inside*** *and outside system boundaries. Section* **500.14(a)(3)** *– Cyber awareness training must now include social engineering and must be provided at least annually.* **Section 500.3** Policies must be annually reviewed and approved by senior governing body or senior officer(s) ➢ *Seven additional policies are required.*	**500.4:** *Cybersecurity governance* **500.15:** *Encryption* **500.16: Incident response and business continuity** ***CISO Report: Confirm that the covered entity's management has allocated sufficient resources to implement and maintain an effective Cyber program.***	***Section 500.17(b)*** *Submit either Certification of Material Compliance* ***or Acknowledgment of Noncompliance*** *for the prior calendar year.* *Both annual submissions must be signed by the highest-ranking executive* ***and the CISO.***	**500.5(a)(2):** ***Automated information systems scan requirements*** **500.7:** ***Access privileges & management; Class A requirements to monitor privileged access, and commonly-used password blocking*** **500.14(a)(2):** *protect against malicious code 500.14(b): Class A requirements for EDR and SIEM*	**500.12:** *MFA Implement multi-factor authentication (MFA) requirements as outlined in this section of the regulation* ***to the extent they are not already in place.*** *Exceptions must be in writing* ***and must meet or exceed requirements.*** **500.13(a):** Asset inventory – ***written policies and procedures designed to produce and maintain a complete, accurate and documented asset inventory of information systems***

Monitoring for commonly used PWD terms while we deploy blocking.

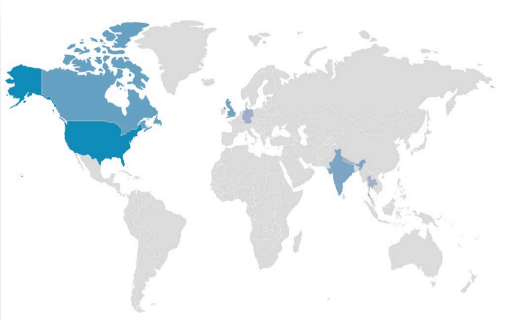
Legend:
Green: Compliant
Yellow: To be addressed

PROGRAM MEASUREMENTS | DELEGATED VENDOR SECURITY TRACKING

Median Security Rating
760

Security Rating Range
660 – 790

Network Footprint



Notes

- Portfolio Increased by 10 points since last quarter.
- HealthEdge dropped 10 pts.
  - Group → Patching Cadence
  - Software → SSL Config

HealthEdge Monitoring
Organization = Intermediate
Software = Advanced

HealthEdge Software Group	-10	700
HealthEdge Software, Inc.	-10	780

Security Rating Legend: Advanced (900–740) Intermediate (730–640) Basic (630–250)

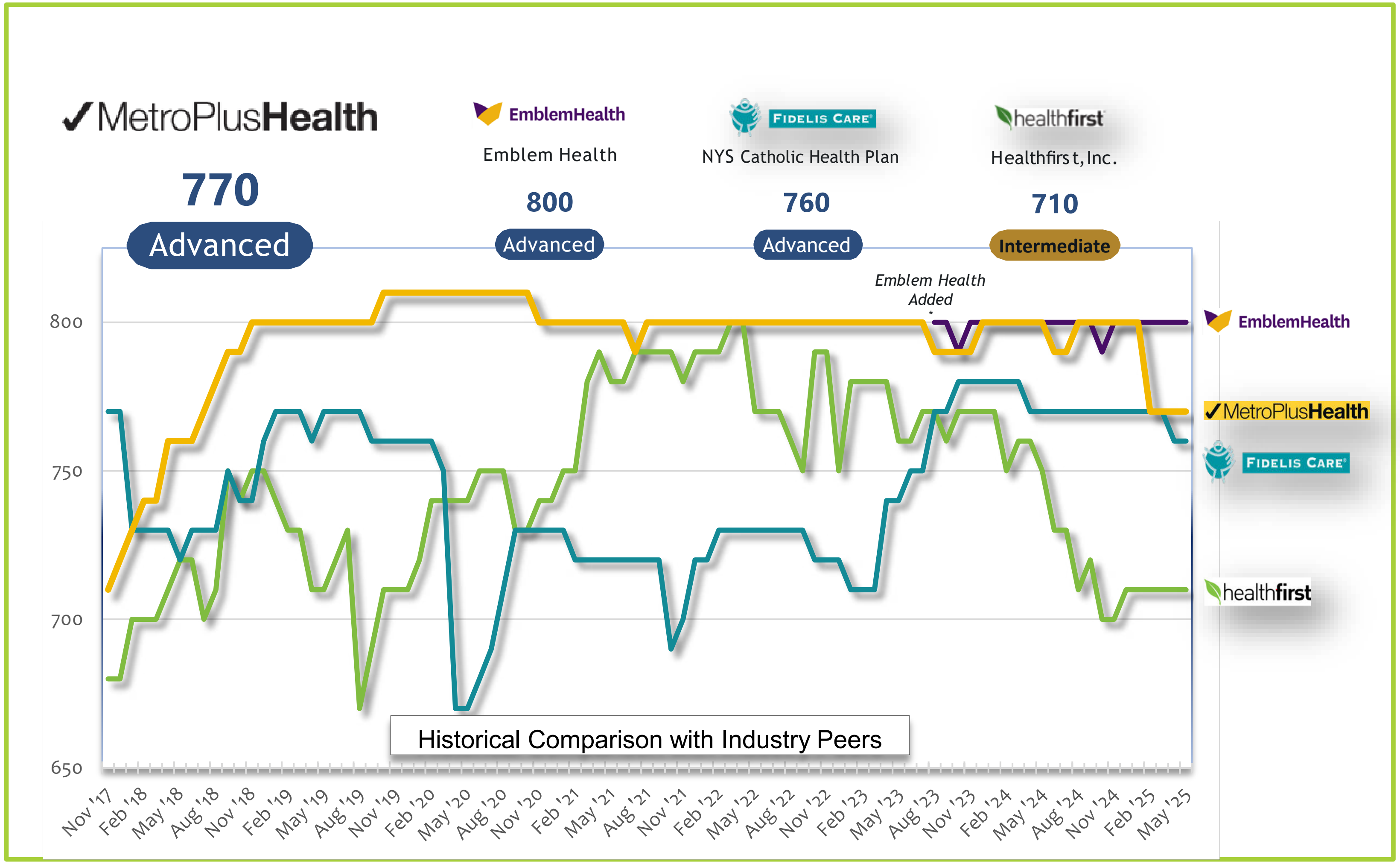
Company		Security Rating	Trend
Argo Contact Centers		720	
Benefits Concierge Group		770	
Caremark, LLC		700	
Clarity Software Solutions, Inc.		760	
ComplianceLine, LLC		790	
Cotiviti Group	-10	760	
DentaQuest Ventures, Inc		760	
Integra Partners Holdings, LLC		720	
ModivCare Inc.	+10	760	
NationsBenefits, LLC		740	
Ritter Insurance Marketing		740	
SS&C Health		760	
Vibrant Emotional Health	-10	660	

CYBERSECURITY | SECURITY POSTURE FOR LOCAL COMPETITION

BitSight security ratings are based on analysis of externally observable data reflects a company's cybersecurity performance.

MetroPlusHealth dropped 30 points in February, attributable to the Network Segmentation preparation.

- New findings will remain in the scoring model for a 60-day period from the most recent discovery.
- The most recent discovery was on 4/26, while testing.
- InfoSec will continue to track latest discovery to assure these are controlled exposures (false positives) vs. real threats.



40 MetroPlus Health

For People. Not Profit.

Since 1985.