

San Joaquin County Clinics (SJCC)

Minutes of March 31, 2020 Board of Directors Meeting

San Joaquin General Hospital Web Conference Call

ATTENDEES: Rod Place (Chairman); Alicia Yonemoto (Vice-Chair); Ismael Cortez (Secretary); Luz Maria Sandoval (Treasurer); Mike Baskett (Board Member); Brian Heck

(Board Member); Alvin Maldonado (Board Member); Mary Mills (Board Member); Dr. Farhan Fadoo (SJCC Executive Director); Greg Diederich (HCS Director); Betty Jo Riendel (SJCC Nursing Dept Manager); Alice Souligne (SJCC COO); Kristopher Zuniga (SJCC Interim CFO); Carlos Jimenez (Wipfli Consultant);

Jeff Slater (SJCC Grant Writer); Adelé Gribble (ACS OTC)

EXCUSED: Esgardo Medina (Board Member); Melanie Toutai (Board Member)

	AGENDA ITEM	ATTACHMENTS	ACTION
1.	 Introduction & Establish Quorum (Rod Place, Board Chair) a. Call to Order & Establish Quorum Rod Place called the meeting to order at 5:03 p.m. b. SJCC Board of Director's Attendance Record (Jan 2020 through Feb 2020) Board Members were accounted for by roll call and a quorum was established for today's meeting. c. Introductions Due to this being a web conference, each attendee identified themselves over the phone. 	SJCC Board of Directors Attendance Record Feb 2020	
2.	Approval of Minutes of January 28, 2020 meeting (Rod Place, Board Chair) Brian Heck made a motion to approve the minutes from February 25, 2020. Luz Maria Sandoval seconded the motion and the board unanimously approved the minutes.	BOD Meeting Minutes – 02/25/20	Brian Heck motioned to approve minutes, Luz Maria Sandoval seconded & the board unanimously approved
3.	Public Comment (General Public) There was no public comment.	No Attachments	No Action Required
4.	Credentialing Report (Betty Jo Riendel) Betty Jo Riendel advised there is one reappointment for March 2020: Catherine Davis, NP (Nurse Practitioner) in the OB/GYN clinic. All requirements have been met.	Attachment 4 (Credentialing Report)	Motion to approve the credentialing report – Alicia Yonemoto, seconded by Brian

	AGENDA ITEM	ATTACHMENTS	ACTION
	There are no initial appointments, no advancements and no resignations on this report. Alicia Yonemoto made a motion to approve the credentials and privileges as provided, Brian Heck seconded the motion and the board unanimously approved the motion.		Heck & unanimously approved by the board.
5.	Finance Committee Report (Kris Zuniga)		
	Kris Zuniga stated we have worked in collaboration with the accounting team in the hospital, to identify our billable visits and to count our visits and also to develop an accrual system for our revenue. In preceding months (before October 2019), those revenues came straight from the PWPM system, there was no need or necessity to accrue additional revenues because the revenues were registering straight to the general ledger. In November and December, we did have accruals each month so the revenues for each month were a hybrid of what was getting registered int eh system and what we were accruing. However, in the month of January 2020, associated with our transition of having EMMI function as our billing and collections arm, we knew beginning this month we would have to have our revenues be completely opposed to accrued revenues.	Attachment 5 (Finance Committee Agenda and Minutes with attachments)	No action required
	The month of January is up significantly from a gross patient and net patient revenue perspective. Below are the attachments provided to and approved by the Finance Subcommittee in the preceding meeting.		
	Summary of Clinics Year to Date		
	Billable visits through January were favorable to budget by 12,122. Gross patient revenue is favorable to budget by \$6,534,124. However, net patient revenue is unfavorable to budget by <\$379,079> due to higher than anticipated contractual and other allowances.		
	Capitation revenue is unfavorable to budget. Assigned lives have been reduced by about 4,000 since July 2018. The FY20 budget assumed an increase in assigned lives, which explains the FYTD variance of <\$685,410>. Total net revenue is unfavorable to budget by <\$1,064,489>.		
	On a year-to-date basis, total Direct Operating Expense is unfavorable to budget by <\$1,123,022>. This is primarily driven by Salaries & Benefits Expense which is unfavorable by <\$1,049,444>. The Manteca Clinic and Primary Medicine Clinic's Salary Expense exceeded budget by <\$489,507> and <\$489,448>, respectively. Similarly, Benefits Expense exceeded budget by <157,108> at Manteca and by <\$66,206> at Primary Medicine. Additionally, Benefits Expense at Hazelton exceeded budget by <222,288>.		
	Professional Fees Expense is unfavorable to budget by <\$173,826> driven by Locums Physician Expense at Healthy Beginnings Clinic on California Street of <\$143,504>. Purchased Service Expense is favorable to budget by \$284,102 due to a favorable variance in Health Beginnings – French Camp of \$81,778, Primary Medicine of \$76,355, Children's Health of \$45,714, and Family Medicine of \$32,691.		
	The total FYTD Net Income <loss> before hospital overhead of <\$2,164,203> is <\$2,187,511> unfavorable to the budgeted net income of \$23,309. Total FQHC loss was primarily due to the losses generated by the Healthy Beginnings — California Clinic of <\$659,328>, Manteca Clinic of <\$892,361>, and Hazelton of <\$361,107>.</loss>		

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dditional Factors Impa	cting Cl	inic Pei	formar	ice Pre	sentati	on									
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Hospital overhead re appropriate overhead					iled rev	iew by (CFO and	I FQHC	Finance	Director	to ident	ity a more			
appropriate everrious	anooun	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0 0												
Supplemental funding	a derived	bv the	hospita	l (PRIM	E. DSH	/GPP. (OIP) as a	a result o	f work d	one bv tl	ne FQH0	C clinics is			
not included in this re				(_,	, .	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,					
Currently, revenue fi	om the	olinios i	s not r	ofloctive	of the	actual	vicite in	any aiv	en mon	th The	Hospita	l Einance			
department is workin															
with developing the a	ccrual m	ethodol	ogy for	revenue	es.										
	Jul						Jan	YTD Actual	Year to		% Var				
Total Visits	9,995	Aug 11,085	Sep 10,018	Oct 11,580	Nov 9,453	Dec 9,396	13,424	74,951	YTD Budget 62,505	Variance 12,446	19.9%				
Billable Visits Patient Revenue	9,436	10,386	9,516	10,788	8,938	8,923	12,849	70,836	58,714	12,122	20.6%				
Medicare Medi-Cal Fee-for-Service	236,056 205,608	297,379 219,088	380,364 282,602	292,588 390,358	318,258 226,521	318,833 233,111	533,369 592,998	2,376,847 2,150,286	1,087,886 1,606,518	1,288,961 543,768	118.5% 33.8%				
Medi-Cal Managed Care Insurance	933,051 13,134	2,219,472 22,250	2,303,051 25,360	2,250,224 26,099	1,792,024 25,649	1,771,824 23,734	3,486,176 69,409	14,755,823 205,636	10,319,395 214,551	4,436,428 (8,915)	43.0% -4.2%				
Self Pay Indigent	68,636 106	68,201 (16)	96,780 63	94,384 154	68,490 193	79,545 16	178,791 250	654,827 766	379,792 1,919	275,035 (1,153)	72.4% -60.1%				
Gross Patient Revenue Contractual Adjustments	1,456,592 (498,718)	2,826,374 (1,493,673)	3,088,220 (2,292,309)	3,053,807 (2,022,995)	2,431,136 (1,696,396)	2,427,063 (1,698,124)	4,860,993 (3,403,011)	20,144,185 (13,105,226)	13,610,061 (6,343,542)	6,534,124 (6,761,684)	48.0% -106.6%				
Other Allowances Net Patient Revenue	(120,492) 837,382	(40,742) 1,291,960	(1,258) 794,653	(612) 1,030,200	901 735,641	3,442 732,381	(0) 1,457,982	(158,761) 6,880,198	(7,242) 7,259,277	(151,518) (379,079)	-2092.1% -5.2%				
Capitation Revenue	446,785	451,203	438,369	455,595	443,730	439,413	429,808	3,104,904	3,790,314	(685,410)	-18.1%				
Total Net Revenue	1,284,167	1,743,163	1,233,023	1,485,795	1,179,371	1,171,794	1,887,790	9,985,102	11,049,591	(1,064,489)	-9.6%				
Operating Expense	909.780	1.042.139	917.997	1.103.634	849.551	855.631	850.294	6.529.026	5.759.522	(769.504)	-13.4%				
Benefits	455,187	447,909	438,518	436,607	449,805	455,351	822,811	3,506,188	3,226,248	(279,940)	-8.7%				
Total Salaries & Benefits Professional Fees/Registry	1,364,967 69,022	1,490,048 185,386	1,356,515 62,720	1,540,241 108,129	1,299,356 66,503	1,310,982 89,211	1,673,105 34,674	10,035,214 615,645	8,985,769 441,819	(1,049,445) (173,826)	-11.7% -39.3%				
Supplies Purchased Services	69,094 39,160	128,143 56,359	77,216 42,011	125,775 92,288	68,804 41,656	108,849 35,859	73,391 126,587	651,273 433,921	604,401 718,024	(46,872) 284,102	-7.8% 39.6%				
Depreciation Other Expense	22,696 33,477	22,687 45,971	22,686 35,515	22,427 29,393	22,426 40,215	22,426 22,364	22,426 48,541	157,774 255,477	71,038 205,231	(86,736) (50,246)	-122.1% -24.5%				
Total Direct Expense Net Income (Loss)	1,598,416 (314,249)	1,928,594 (185,431)	1,596,664 (363,641)	1,918,252 (432,457)	1,538,962 (359,591)	1,589,691 (417,897)	1,978,725 (90,935)	12,149,304 (2,164,203)	11,026,282 23,309	(1,123,022) (2,187,511)	-10.2% 9384.7%				
Overhead Allocation	674,532	813,867	673,792	809,502	649,442	670,850	835,022	5,127,006	4,653,091	(473,915)	-10.2%				
Net Income (Loss) w/ OH Allocation	(988,781)	(999,297)	(1,037,433)	(1,241,959)	(1,009,033)	(1,088,747)	(925,957)	(7,291,209)	(4,629,781)	(2,661,426)	-57.5%				
<u>Key Ratios</u> Gross Pt Revenue/Billable Visit Net Revenue/Billable Visit (excl Oth Rev)	\$ 154.37 \$ 136.09										22.7% -25.1%				
Direct Costs/Billable Visit	\$ 169.40 \$ 71.48	\$ 185.69	\$ 167.79	\$ 177.81	\$ 172.18	\$ 178.16	\$ 154.00	\$ 171.51	\$ 187.80	\$ 16.28	8.7% 8.7%				
Total Medical Cost/Billable Visit Net Income(Loss)/Billable Visit	\$ 240.88 \$ (104.79)	\$ 264.05	\$ 238.59	\$ 252.85	\$ 244.84	\$ 253.34	\$ 218.99	\$ 243.89	\$ 267.05	\$ 23.15	8.7% -30.5%				
Total Cost/Patient (1) Net Pt Rev as % of Gross Rev	\$ 602.20 57.5%	\$ 660.13				\$ 633.35		\$ 609.73	\$ 667.61		8.7%				
Total Net Rev as % of Gross Rev	88.2%	61.7%	39.9%	48.7%	48.5%	48.3%	38.8%	49.6%	81.2%	-31.6%	-38.9%				
Benefits as a % of Salaries Overhead % of Direct Exp	50.0% 42.2%	43.0% 42.2%	47.8% 42.2%	39.6% 42.2%	52.9% 42.2%	53.2% 42.2%	96.8% 42.2%	53.7% 42.2%	56.0% 42.2%	2.3% 0.0%					
Gross Patient AR (in 000s) Less Reserves (in 000s)															
Net AR (in 000s) Wrap AR (in 000s)															
Gross AR Days															
Cash Receipts (in 000s)															

				Α	GENDA	ITEM							ATTAC	CHMENTS	3	AC	10IT
Total Visits Billable Visits Productive FTEs (Provider) Productive FTEs (Non-Provider) Total FTEs Total Hours/Visit	14.8 1 18.2 1	<u>Ca</u> (#7093) 57 3,292	Medicine (#7096) 24,598 23,792 10.5 27.5 38.1	Beginnings - Ca [#7182] 6,607 6,607 2.0 13.7 15.7	Healthy Beginnings rench Camp [#7183] [#7] 3,151 3,022 1.2 5.9 7.1 2.09	on Clinic Mantec 1841 (#71 3,408 2,446 1.3 6.8 8.1 1.63	a Clinic FQ Admir 185] 8,072 - 7,830 - 4.6 13.4 10 17.9 10 1.48	74,951 70,836 27.0 2114.2	5 58,714 28.3 2 105.3 2 133.6	1.2 (8.9)	% Var - Fav (Unf) 19.9% 20.6% 4.3% -8.4% -5.7% -26.0%						
Patient Revenue Medicare Medic Cal Medic Cal Managed Care Insurance Self Pay Indigent Gross Revenue Gross Revenue Gross Allowances Well Patient Revenue Physician Capitalion-PhAPM Total Oper aling Revenue	0 487, 541,144 341, 3,333,888 2,594, 16,077 58, 23,218 187, 0,394,276 3,670, (3,041,449) (2,144, (3,047) 66, 869,881 15,560, 1,440,658 2,075, 1,440,658 2,075,	83 27,062 02 603,726 78 17,810 87 31,830 66 0 84 833,780 96) (494,657 17) (1,409 71 337,714 54 144,494	246,783 4,146,928 55,696 187,392 0 6,083,725) (3,669,641) (9,280 2,404,804	15,963 69,796 0 2,038,348 (1,518,666) (1,569) 518,114 235,802	152,742 653,391 17,783 21,600 0 877,100 (525,960) (1,699) 349,442 126,251	161,885 1 1413,371 1,6 11,349 40,514 0 0 672,164 2,0 271,271 (1,4 (96,165) (1,9,10) 82,950 3	169,409 167,284 112,841 12,581 92,490 0 054,606 138,588 (30,476) 776,543 776,056	0 2,376,846 0 2,150,286 0 14,755,822 0 205,631 0 654,822 0 756 0 20,144,184 0 (13,105,226 (158,761 6,880,131) 0 3,104,904 0 9,985,102	5 1,606,518 2 10,319,395 7 214,551 5 1,919 6 1,919 4 13,610,061 6,343,542 1 (7,242) 7 7,259,277 4 3,790,314	(8,914) 275,034 (1,153) 6,534,122 (6,761,684) (151,518) (379,080) (685,410)	118.5% 33.8% 43.0% -4.2% 72.4% -60.1% -106.6% -209.2.1% -18.1% -9.6%						
Expenses Salaries Benefits Total Salaries & Benefits Total Salaries & Benefits Total Salaries & Benefits Professional Feey/Registration Supplies Purchased Services Depreciation Other Expenses Total Expenses Allocation of Direct Admin Exp Total Expenses excl. Hosp OH Profit/(Los) before Hosp OH Profit/(Los) before Hosp OH	766,784 706, 423,234 386; 1,190,019 1,093, 25,405 78, 49,695 143, 21,718 144, 4,523 15, 3,5044 16, 1,327,393 1,362, 282,907 265, 1,610,210 1,627, (109,553) 447,	69 207,601 23 537,445 80 0 49 27,583 39 13,162 19 1,134 85 22,445 95 601,769 65 60,262 60 662,031	888,350 2,847,213 86,580 187,823 719 1,040 13,370 3,136,743 439,705	146,504 62,513 47,478 7,968 26,738 1,265,921 147,323	181,127 488,209 9,800 51,159 32,051 16,836 4,818 602,873 63,393 666,266	278,752	\$96,457 573,9 \$142,81 253,6 \$10,738 827,5 \$0 268,8 \$67,162 29,7 \$1,470 301,3 \$86,791 23,7 \$30,299 4,6 \$1,455,9 \$44,959 992,361]	3,506,188 39 10,035,214 77 615,645 39 651,273 31 433,921 33 157,774 33 255,477 35 12,149,300 - 12,149,300 - (2,164,200	3 3,226,248 4 8,985,769 441,819 6 604,401 718,024 71,038 11,026,282 11,026,282 11,026,282 23,309	(279,940) (1,049,444) (173,826) (46,871) 284,102 (86,736) (50,246) (1,123,022) 0 (1,123,022) (2,187,511)	-13.4% -8.7% -11.7% -39.3% -7.8% -39.6% -122.1% -10.2% -10.2% -10.29 -384.7%						
Overhead Allocation Total Expenses Net Income (Loss)	679,509 686, 2,289,719 2,314, (849,061) (238,	46 279,377	1,509,261	596,389	281,164 947,430 1,		778,573 523,531 570,933)	0 5,127,000 0 17,276,311 (0) (7,291,208		(473,915) (1,596,937) (2,661,426)	-10.2% -10.2% -57.5%						
Overhead Allocation Total Expenses	679,509 686,	46 279,377	1,509,261 5,085,711) (1,668,485)	596,389 2,009,632 (1,255,717)	281,164 947,430 1, (471,738) (064,773 2,6 677,094) (1,6 sis For SJCC	523,531 670,933)	0 17,276,311 (0) (7,291,208	1 15,679,372 (4,629,781)		-10.2%						
Overhead Allocation Total Expenses	679,509 686,	46 279,377 06 941,408 80) (459,201	1,509,261 5,085,711) (1,668,485)	596,389 2,009,632 (1,255,717)	281,164 947,430 1, (471,738) (064,773 2,6 677,094) (1,6	523,531 670,933	0 17,276,311 (0) (7,291,208	1 15,679,372 (4,629,781) (4,629,781) % Increase		-10.2%						
Overhead Allocation Total Expenses	Aging Category DNFB 1-30 Days 31-60 Days 61-90 Days 121-180 Days 181-240 Days 241-270 Days 221-236 Days	MediCare 345,907 340,855 204,956 153,277 176,781 225,593 101,954 400,678	1509,561 5,085,711 1 (1,668,485) PFS Ac MediCal 2,565,423 1,491,534 744,243 461,598 507,276 611,455 248,669 110,288 201,335	506,389 2,009,632 2,009,632 (1,255,717) counts Receival For the Mon Commercial 49,397 158,991 64,307 37,482 46,872 40,633 20,317 39,789	281,164 947,430 1, (471,738) (ble Aging Analy the of January 2(Self Pay 78,782 (30,891) 8,382 7,045 13,146 29,294 24,041 11,668 42,664	064,773 2,06 677,094 (1,6 077,094)	g Total Aging h Last Month 9 1.465,355 9 680,473 8 789,420 2 895,039 5 668,779 8 804,578 8 629,931 8 248,757 8 810,572	S Increase (Decrease) 1,574,244 1,279,746 232,468 (235,637) 7187,407 (90,996) (4,539) (126,106)	% Increase (Decrease) 107.43% 188.07% 29.45% -26.33% 11.26% -14.45% -1.85%		-10.2%						
Overhead Allocation Total Expenses	Aging Category DNFB 1-30 Days 31-60 Days 91-120 Days 121-180 Days 121-180 Days 121-180 Days 121-20 Days 271-365 Days 366 Days & Over Total FC This Month Total FC Last Month S Increase (Decrease)	MediCare 345,997 340,585 204,956 153,277 176,781 274,319 225,593 101,945 400,678 354,308 2,578,384 479,154	1509.561 1,5085,711 1,668,485 PFS Ac MediCal 2,565,423 1,491,534 744,243 461,598 507,276 611,455 248,669 110,288 201,335 176,902 7,118,902 4,754,036 2,364,689	506,389 2,009,632 2,009,632 2,009,632 2,009,632 2,009,632 40,255,717) Counts Receival For the Mon Commercial 49,397 158,991 64,307 37,482 46,872 76,917 40,633 20,317 39,789 33,702 568,408 411,863 156,545	281,164 947,430 11 (471,738) (1	964,773 2.6 \$\frac{677,094}{1.6}\$ [1.6] Sis For SJCC 120 Total Agin This Mont 2 3,039,999 1 1,960,219 1 1,021,888 6 659,400 6 744,076 9 91,988 5 38,933 2 44,218 684,466 606,573 1 0,491,363 1 0,491,363 1 0,491,363 3 0,24,123	g Total Aging h Last Month 9 1.465.355 9 680.473 8 789.420 2 895.039 6 668.779 5 804.578 8 248.757 8 10.572 3 474.336	0 17,276,311 (0) (7,291,208 S Increase (Decrease) 1,574,244 1,279,746 232,468 (235,637) 75,297 187,407 (90,996) (4,539)	% Increase (Decrease) 107.43% 188.07% 29.45% -26.33% -11.26% 23.29% -14.45% -1.82%		-10.2%						
Overhead Allocation Total Expenses	Aging Category DNFB 1-30 Days 31-60 Days 61-90 Days 121-180 Days 121-180 Days 121-180 Days 241-270 Days 241-270 Days 366 Days & Over Total FC This Month Total FC Last Month	MediCare 345,997 340,585 204,956 153,277 176,781 274,319 225,593 101,945 400,678 354,308	1509.561 1,5085,711 1,668,485 PFS Ac MediCal 2,565,423 1,491,534 744,243 461,598 507,276 611,455 248,669 110,288 201,335 176,902 7,118,902 4,754,036 2,364,689	506,389 2,009,632 2,009,632 (1,255,717) counts Receival For the Mon Commercial 49,397 158,991 64,307 37,482 46,872 76,917 40,633 20,317 40,633 20,317 39,789 33,702 568,408 411,863 156,545 38,01%	281,164 947,430 11 (471,738) (1	964,773 2,6 967,094) [1,6 967,094] [1,6 967,094] [1,6 97,097] [1,960,219]	g Total Aging h Last Month 9 1.465.355 9 680.473 8 789.420 2 895.039 6 668.779 5 804.578 8 248.757 8 10.572 3 474.336	S Increase (Decrease) 1,279,246 232,468 (235,637) 75,297 187,407 (90,905) (4,539) (126,106) 132,238	% Increase (Decrease) 107.43% 29.45% 29.45% 21.25% 23.29% -14.45% -18.20% -15.56% 27.88%		-10.2%						
Overhead Allocation Total Expenses	Aging Category Aging Category DNFB 1-30 Days 31-60 Days 61-90 Days 121-180 Days 121-180 Days 121-180 Days 121-180 Days 121-365 Days 366 Days & Over Total FC This Month Total FC Last Month S Increase (Decrease) % Increase (Decrease)	MediCare MediCare 345,997 340,585 204,956 153,277 176,781 274,319 225,593 101,945 400,678 354,308 2,578,439 2,099,284 479,154 22,82%	1509.561 5.085,711 1 (1,668,485) PFS Ac MediCal 2,565,423 1,491,534 401,598 507,276 611,455 248,669 110,288 201,335 176,904 7,118,725 4,754,036 2,364,689 49,74% DNFB	506,389 2,009,632 2,009,632 (1,255,717) counts Receival For the Mon Commercial 49,397 158,917 40,633 20,317 49,789 33,702 568,408 411,863 156,545 38,01% Monthly Man Gross Services Billed	281,164 947,430 1, (471,738) (471,738) (6 471,738) (7 5elf Pay 78,782 (30,891 8,382 7,045 13,144 29,294 24,041 11,666 42,664 41,660 225,790 202,056 202,056 23,734 11,759	064,773 2,6 677,094) [1,6 677,094] [1,6 677,	g Total Aging Last Month	S Increase (Decrease) 1,574,244 232,468 (235,637) 75,297 187,407 (90,996) (4,539) (126,106) 132,238 3,024,123	% Increase (Decrease) 107.43% 29.45% 29.45% 21.25% 23.29% -14.45% -18.20% -15.56% 27.88%		-10.2%						
Overhead Allocation Total Expenses	Aging Category DNFB 1-30 Days 31-60 Days 91-120 Days 121-180 Days 121-180 Days 121-180 Days 121-20 Days 271-365 Days 366 Days & Over Total FC This Month Total FC Last Month S Increase (Decrease)	MediCare MediCare 345,997 340,585 204,956 153,277 176,781 274,319 225,593 101,945 400,678 354,308 2,578,439 2,099,284 479,154 22,82%	1509.561 5.085,711 1 (1,668,485) PFS Ac MediCal 2.565,423 1,491,534 401,598 507,276 611,455 248,669 110,288 201,335 176,904 7,118,725 4,754,036 2,364,689 49,74%	506,389 2,009,632 2,009,632 (1,255,717) counts Receival For the Mon Commercial 49,397 158,991 64,307 37,482 46,872 40,633 20,317 76,917 40,633 20,317 39,789 33,702 568,408 411,863 156,545 38,01% Monthly Man Gross Services	281,164 947,430 1, (471,738) (6 471,738) (6 471,738) (6 471,738) (7 5 64 67 67 67 67 67 67 67 67 67 67 67 67 67	964,773 2,6 677,094) [1,6 977,094]	g Total Aging Last Month	S Increase (Decrease) 1,574,244 232,468 (235,637) 75,297 187,407 (90,996) (4,539) (126,106) 132,238 3,024,123	% Increase (Decrease) 107.43% 29.45% 29.45% 21.25% 23.29% -14.45% -18.20% -15.56% 27.88%		-10.2%						
Overhead Allocation Total Expenses	Aging Category Aging Category DNFB 1-30 Days 31-60 Days 61-90 Days 121-180 Days 121-180 Days 121-180 Days 121-180 Days 121-365 Days 366 Days & Over Total FC This Month Total FC Last Month S Increase (Decrease) % Increase (Decrease)	MediCare MediCare 345,997 340,585 204,956 153,277 176,781 274,319 225,593 101,945 400,678 354,308 2,578,439 2,099,284 479,154 22,82%	1509,561 5,085,711 1 (1,668,485) PFS Ac MediCal 2,565,423 1,491,534 744,243 461,598 507,276 611,455 248,669 110,288 201,335 176,904 7,118,725 4,754,036 2,364,689 49,74% DNFB 3,039,599	506,389 2,009,632 2,009,632 (1,255,717) counts Receival For the Mon Commercial 49,397 158,991 40,633 20,317 76,917 40,633 20,317 39,789 33,702 568,408 411,863 156,545 38,01% Monthly Man Gross Services Billed 1,928,728	281,164 947,430 1, (471,738) (471,738) (6 471,738) (7 5elf Pay 78,782 (30,891 8,382 7,045 13,144 29,294 24,041 11,666 42,664 41,660 225,790 202,056 202,056 23,734 11,759	964,773 2.6 \$\frac{6}{27,094}\$ [1.6] \$\frac{1}{200}\$ Total Agos 2.6 \$\frac{1}{2}\$ 1.960,215 1.021,888 6.59,402 6.744,076 991,983 538,933 104,913,62	g Total Aging Last Month	s Increase (Decrease) 1,574,244 1,279,746 232,468 (235,637) 75,297 187,407 (4,539) (126,106) 132,238 3,024,123 Ending A/R Balance 10,491,362	% Increase (Decrease) 107.43% 29.45% 29.45% 21.25% 23.29% -14.45% -18.20% -15.56% 27.88%		-10.2%						
Overhead Allocation Total Expenses	Aging Category Aging Category DNFB 1-30 Days 31-60 Days 61-90 Days 121-180 Days 121-180 Days 121-180 Days 121-180 Days 121-365 Days 366 Days & Over Total FC This Month Total FC Last Month S Increase (Decrease) % Increase (Decrease)	MediCare MediCare 345,997 340,585 204,956 153,277 176,781 274,319 225,593 101,945 400,678 354,308 2,578,439 2,099,284 479,154 22,82%	1509.561 1,509.571 1,669.485 PFS Ac MediCal 2,565,423 1,491,534 744,243 461,598 507,276 611,455 248,669 110,288 201,335 176,904 7,118,749 DNFB 3,039,599 PF: December 121	506,389 2,009,632 2,009,632 (1,255,717) counts Receival For the Mon Commercial 49,397 158,991 40,633 20,317 76,917 40,633 20,317 39,789 33,702 568,408 411,863 156,545 38,01% Monthly Man Gross Services Billed 1,928,728	281,164 947,430 1, (471,738) (471,738) (6 471,738) (6 471,738) (7 5 6471,738) (7 64	964,773 2.6 \$\frac{6}{27,094}\$ [1.6] \$\frac{1}{200}\$ Total Agos 2.6 \$\frac{1}{2}\$ 1.960,215 1.021,888 6.59,402 6.744,076 991,983 538,933 104,913,62	g Total Aging h Last Month 9 1.465.355 9 680.473 8 789.420 2 895.039 5 668.779 8 04.578 8 248.757 8 10.572 3 474.336 7 ,467,240 6 3 3 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	S Increase (Decrease) 1,574,244 232,468 (235,637) 75,297 187,407 (90,996) (4,539) (126,106) 132,238 3,024,123	% Increase (Decrease) 107.43% 29.45% 29.45% 21.25% 23.29% -14.45% -18.20% -15.56% 27.88%		-10.2%						

	AGENDA ITEM	ATTACHMENTS	ACTION
6.	Walgreens Agreement (Kris Zuniga)		
	Kris Zuniga advised one of the advantageous that FQHCs have is the ability to buy drugs at a reduced rate. SJCC has had this ability since the inception of the look-alike. We are now taking that ability and extending it the sale of those drugs to our patient population at a market rate, it is called a 340B Pharmacy program. We are just now taking advantage of that discount pricing program available to all FQHCs. This whole time our patient population has been purchasing drugs as a part of their healthcare enrollment, we can take advantage of those sales and it does not mean our patient population will see any increase. This needs to be implemented within an FQHC setting for that FQHC to see the benefits of. It is invisible to the patient. Our patients purchase in the normal way, those contracted pharmacies pay us the difference between what we bought them and what we sold them for. The take a dispensing fee but those are new revenues being introduced to the FQHC model. We do have a proposed contract from Walgreens. It is being vetted through the county, so we have to push the approval of this agreement for another meeting.	No Attachments	No action required
	Greg Diederich stated this is only applicable to the managed care plan and the pharmacy benefits gets the card back out of managed care to fee for service at the state level as of January 1 st , 2021. You will at best have this available for nine months because this might be going away.		
	Carlos Jimenez stated what they have heard, with the COVID-19 situation, they are not sure if this transition set for January 1 st , 2021 is still going to happen. However, whatever benefit we can derive until then is worth the effort.		
	This agenda item will be brought back to the board as soon as possible at a later date for approval.		
7.	Quarterly QI/QA Report (Alicia Yonemoto)		
	Alicia Yonemoto advised she was out ill last month and is unable to present on this agenda topic. Dr. Fadoo stated we went over our clinical performance 2019 for UDS. There will be a full briefing at the April meeting. The UDS report was accepted by reviewer and by HRSA and we will bring it back to the April Board meeting and the board will be able to see all the clinical indicators at that time.	No Attachments	No Action Required
8.	CEO Report (Dr. Farhan Fadoo)		
	 a) Applicant/Co-Applicant Agreement b) Clinic Closures c) San Joaquin Emergency Response Fund Grant (Jeff Slater – requires approval from SJCC Board) 	Attachment 8 – CEO Report	
	Dr. Fadoo stated the hospital and clinics are fully mobilized with this pandemic, the COVID-19 response for both the hospital is consuming approximately three to four hours a day of meetings with dozens of staff trying to meet this challenge, seven days a week.		
	When all this first started picking up steam, our organization was fairly quick to respond. On March 16 th we moved into an appointment cancellation mode, trying to eliminate the amount of traffic through the clinics and the amount of unnecessary exposure. By March 25 th we had cancelled all the appointments on our books for face-to-face encounters, trying to keep the		

AGE	NDA ITEM	ATTACHMENTS	ACTION
healthy patients to remain that way and to eliminate exposur that period of time for those who needed care urgently.	e. We did continue to provide some care via telephone during		
Because this was a significant hit to our revenues, cancelling expense side to mitigate some of that loss. All of our part-tim physicians were flexed off and they continue to be off as we	that many days of appointments, we did what we could on the e staff, all the medical assistants and other support staff for our move into this next phase.		
standing up a drive-through testing model for our patients are the course of caring for patients in our organization. There are testing the right people. Initially there were about thirty paties up those protocols to preserve the supplies. We wanted to	e county. Our Family Medicine department took the lead on a for our health care workers who may have had exposure in the a number of protocols that were stood up to ensure we were not a day that were receiving testing, we have since tightened be sure we were testing only those patients that warrant the aday to single digits, approximately five to ten patients a day		
Below is the presentation as provided to the committee:			
CEO Report – Previous 30 Days			
COVID19 response — 3-4 hours of standing daily meetings, 7 days/week Active appointment cancellations 3/16 through 3/25 using telephonic visits as needed Flexed off PT staff for expense reduction to mitigate revenue hit 3/26 began active transition to virtual care as CMS approved DHCS 1135 waiver for PPS reimbursement for telehealth and easing of 4-wall restrictions Drive-through testing following telephone RN and MD triage (began 3/16) Testing protocols are sensitive to limited supplies of testing swabs and PPE There are a number of COVID-positive patients and PUIs	Grants activities DHCS Behavioral Health Integration (submitted to HPSJ on 1/21) – funding awards were TBA in March, delayed to June 1 due to pandemic United Way of San Joaquin/Community Foundation of San Joaquin – Emergency Response Fund (submitted 3/27) CalAIM HPSJ steering committee met 3/4, further meetings delayed due to pandemic FY20/21 budget submitted 3/13		
Permanent SJCC CFO hiring continues, 2 promising candidates	UDS report accepted by HRSA; will be presented to SJCC Board in April		
Multithreaded set of activities with Wipfli and DHCS related to PPS rates	PRIME DY15-MY and GPP PY4 submissions were due 3/31 – 60 days extension on PRIME and 30 day extension on GPP due to pandemic		
EMMI RCM outsource relationship beginning to stabilize SJCC Bylaws and Co-Applicant agreement discussed with CAO on 3/4 Additionally decided to draft a formal MOU between SJCC and SJGH Fiscal Solutions is drafting documents	Sweeping SJCC changes authorized by SJC BOS 3/10: 59 positions deleted (\$5.84MM in savings) Additional SJCC changes (clinic closures) to be heard by SJC BOS 4/7 Next slides will be presented by David Culberson at 4/7 Beilenson hearing		
Jeff Slater advised the DHCS issued a Request For Propost Joaquin (HPSJ) to integrate Behavioral Health Services with couple of million dollars. HPSJ is reviewing in conjunction whave delayed the response date to June or July. Our propost focusing on basic integration of mental health services and a (pregnant women). The SJCC Board already approved this some of the United Way and the Community Foundation of the English of the United Way and the Community Foundation of the English of the United Way are trying to fund non-profit of the Community in the Indiana are quest for applications. They are trying to fund non-profit of the United By COVID-19. We submitted an application brief telephone or video-based psychology consultation with	sals (RFP), an incentive program through Health Plan of San hin Primary Care. We submitted an application to HPSJ for a with DHCS. With everything going on around COVID-19, they had is to bring in Behavioral Health staff in Primary Care Clinics nother focus on substance abuse disorder in maternal patients		Ismael Cortez made a motion to retroactively approve the submittal of the Grant for the San Joaquin Emergency Response Fund. Brian Heck seconded the motion of the board unanimously approved

		ATTACHMENTS	ACTION			
meeting or presented	March 10 th . by David Cull	This was revi person at nex	ewed by this board	ed by the County Board of Supervisors earlier this month at their last month during the closed session. The slides below will be Hearing with the Board of Supervisors.		
SJCC Manteca	and Hazelton Clinic	cs		SJCC Manteca and Hazelton Clinics		
■ Total SJCC ► Manteca: 3 ► Hazelton: 2 ■ Operating lo ► Manteca: \$ ► Hazelton: \$ ► Trend simil ■ Results of e disappointin	,760 ,500 esses for first 6 m 1,412,391 ,712,646 ar to that seen in pr	in CY2019: ~33,0 nonths of FY19/20 rior fiscal years utilization of thes	se two sites have been	■ Current staffing across both sites: ▶ 9 physicians (FM, OB, Peds) ▶ 4 nurses ▶ 22 other staff (Outpatient Clinic Assistant, Office Worker, Senior Office Assistant) ■ Some of these positions can be reassigned to the remaining 6 SJCC sites, however some positions will be deleted ▶ All non-physician deletions are part-time except for one CS position which is currently vacant ▶ Total deletions: 17 (10 OCA, 3 OW, 1 SOA, 1 RN, 2 MD)		
- Expedied in	at 103363 WIII COII	itiliae	Clin	Clinics		
SJCC Manteca a	and Hazelton Clinics			SJCC Manteca and Hazelton Clinics		
Manteca Hazelton	20/21 operating of vings from propos Labor	Non-Labor \$272,039 \$59,832 \$331,672	TOTAL \$781.187 \$720.198 \$1.501.385	■ Patient Access for ~6000 affected patients ▶ Plan to absorb majority of these at 6 remaining SJCC sites □ Many of these Manteca and Hazelton patients received care at other SJCC sites before Manteca and Hazelton opened in 2017 ▶ Working with health plans to reassign members □ Health Plan of San Joaquin □ HealthNet ▶ Dialogue initiated with other community clinic systems in Stockton and Manteca regarding capacity to absorb displaced patients		
► 2017-2027 I	se savings not rea ease term with no fu g with General Servi	inding out clause	nsel to explore sub-lease	Community Medical Centers Golden Valley Health Centers		
SJCC Manteca	and Hazelton Clinics					
 ▶ Reduction ir savings) ▶ Set Beilense ▼ Today's Propile Conduct Be ▶ Authorize cl ▶ Authorize 1 ■ Upon BOS a 	on Hearing required cosed Action: ilenson Hearing coure of SJCC Mant 7 staffing deletions p	per California Health teca and Hazelton si previously described anagement will init	equating to \$5.84MM in and Safety Code for 4/7/20 tes			
			BAN JOAQUIN COUNT			

	AGENDA ITEM	ATTACHMENTS	ACTION
	Rod Place asked what the monthly lease amount is for the Manteca Clinic. Dr. Fadoo advised it is approximately \$24,000 montly for 5,800 sq. ft.		
	Rod Place asked if the Beilensen Hearing will be conducted virtually given the COVID-19 circumstances. Greg Deiderich advised during normal times, it is generally a public forum. During the Board Meeting it is carved out at a dedicated time, getting public comment, providing a report of the number of people impacted and a lot of other statistics. Given where we are at with virtual meetings, it is tougher. The Board of Supervisors' meeting today was virtual. Public comment wasn't live, you could not phone in, you had to send your comments by email and a clerk of the board read them. It will be less of an ability for people to comment or protest by showing a force of individuals actually in the chambers.		
	Dr. Fadoo added we had to post notices at the entrance to every county healthcare facility throughout the County. Folks are aware, we have heard from the Unions, both C.N.A. and SEIU so there is an awareness on this. The will be some public comment, it just will not be in real time sychronous.		
	Alicia Yonemoto asked what will happen to the equipment at the two locations. Alice Souligne advised Hazelton Clinic equipment will be moved to the California Street location and most of the Manteca Clinic equipment will be absorbed either at French Camp and some to California Street, so they can continue the services they are providing. All equipment was purchased, they are not leased. We do have equipment at these locations that do need to be replaced so this will be a savings for us.		
9.	ADJOURNMENT		
	Rod Place advised with everything that is going on with the new ordinances, we will be doing the same type of conferences for the next meeting. Rod will send the information to Adelé Gribble closer to the meeting date. There being no further topics of discussion, Rod adjourned the meeting at 6:08 p.m		No Action Required
Sign	ed by:		
	Date PECTFULLY SUBMITTED ON BEHALF OF SJCC BOARD BY: É R. GRIBBLE, OFFICE TECHNICIAN COORDINATOR		