

# Pride Center honoring 4 at annual event

By Almendra Carpizo  
Record Staff Writer

STOCKTON — Nicholas Hatten receives a great reminder every year that he stands "on the shoulders of giants."

Hatten, San Joaquin Pride Center executive director, said the center is not the only group advocating or

contributing to the LGBT+ community. There are people who have or are doing wonderful work and the annual Pride Honors event is an opportunity to recognize and elevate those individuals' voices and efforts, he added.

Pride Honors, which started six years ago, is a positive and encouraging event, Hatten said. And in

this political climate, when there's so much division, it's nice to have this celebration.

"It's just an inspiring ceremony and a really beautiful way to say thanks to those people," he said. "This is food for the soul."

The Pride Honors Brunch is at 11 a.m. Jan. 6 at the San Joaquin Pride Center, 115 N. Sutter Street. The

honorees are:

- Legacy Award: Cathleen Gagliani
- Education Champion Award: Lisa Cooper-Wilkins
- Community Award: Dr. Elyas Parsa
- Special Recognition Honoree: Dennis Merrill

Hatten is in awe of state Sen. See **PRIDE, A4**

Gagliani, D-Stockton, and her continued rise in politics after coming out as a lesbian, he said. She had a unique journey of coming out late in life and doing so in a very public way that is not often heard.

In 2011, Gagliani told The Record that it was not until adulthood that

## PRIDE

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she knew she was gay and that by her coming out she hoped to send a positive message to young people.

"Cathleen helped create the very first LGBT+ political club," according to the Pride Center. "As a legislative aide, Gagliani advocated for LGBT+ issues that often resulted in political blowback from the public during a time when San Joaquin County was still divided over gay rights."

"Cathleen's personal story is a wonderful reminder that each of our coming out stories is unique and that her later-in-life discovery and coming out experience in the public eye can be a loving and welcoming experience."

Cooper-Wilkins, assistant superintendent and vice president for student services at San Joaquin Delta College, is

being recognized for her willingness to partner and work with the Pride Center and LGBT+ students to improve the school's environment.

Several years ago Hatten began hearing about issues at the campus, he said. When the Pride Center approached Cooper-Wilkins, she immediately agreed to meet and was open to working with the center and LGBT+ students to improve Delta College.

"She took our recommendations and ran with them," Hatten said. "There are still agencies that don't even respond when we reach out, let alone ask us to partner."

Cooper-Wilkins said she is overwhelmed and humbled by the recognition, and added that she works with many people at Delta College who are making the campus welcoming and inclusive to all students.

The honor is a testament to all the efforts the college has made, she said.

There were learning experience during the partnership

between Delta College and the Pride Center that highlighted how important collaboration is and Cooper-Wilkins said Hatten and the center were instrumental in showing those on campus how they're doing and how they can improve.

She said she hopes Delta College can continue to cultivate that partnership and support LGBT+ students.

Also being honored is Dr. Elyas Parsa of San Joaquin General Hospital's Gender Health Clinic, which opened in 2016, for advocating for local transgender services and the creation of the clinic, according to the Pride Center.

Parsa is an ally who saw the importance of serving transgender individuals, Hatten said. The Pride Center was asking for the county to add more resources for the transgender community when they learned the Gender Health Clinic was opening.

"This clinic fills the gap of services that our community needs," he said. "The clinic is

learning and improving day-to-day and that's a testament to Dr. Parsa and we're honoring the whole clinic, too."

The Pride Center also is honoring Dennis Merrill, who Hatten called one of the center's strongest supporters.

"He's one of those quiet giants that does a lot without saying a lot and doesn't get

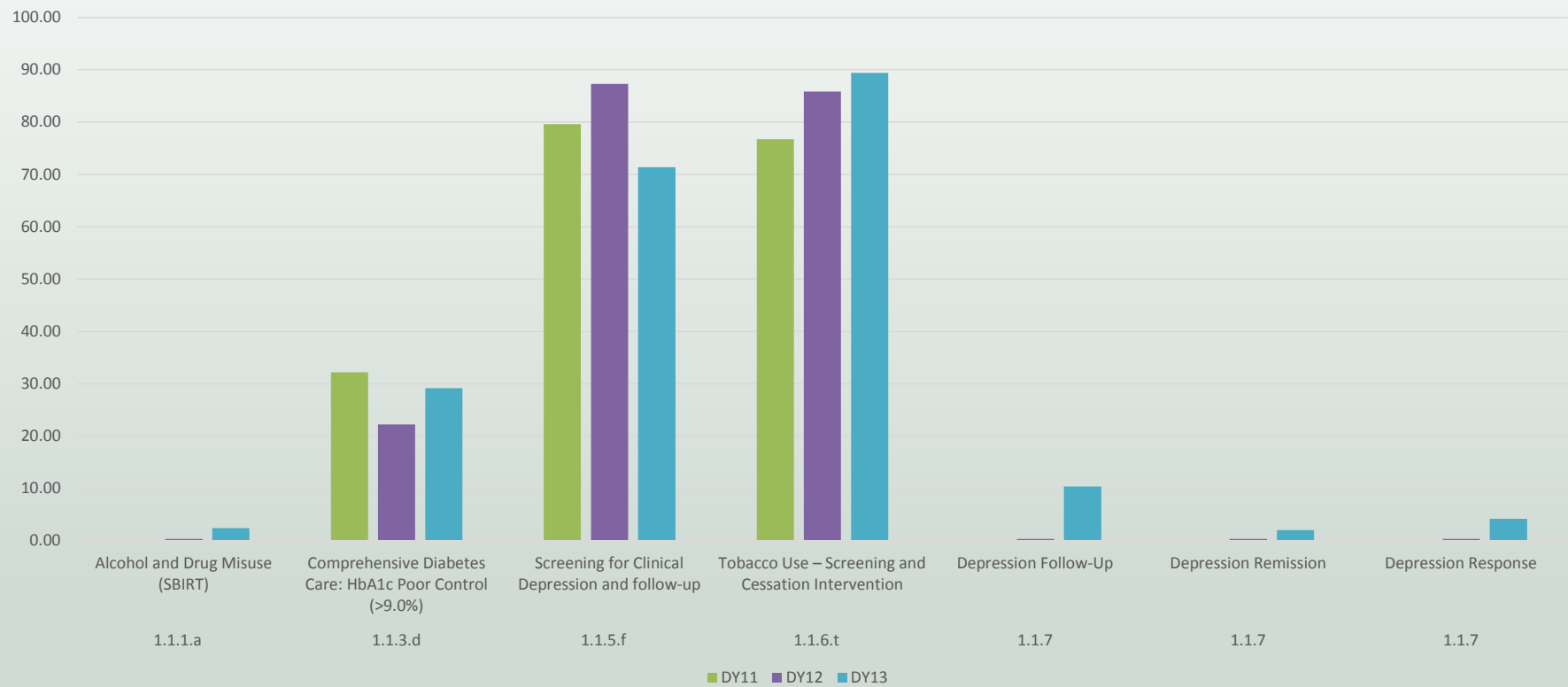
the recognition they deserve because they're not seeking the limelight," Hatten said. "Those individuals are the backbone (of the center) and finally we convinced him that it was time to honor him."

To purchase tickets to the event, visit <https://www.spridecenter.org> or contact

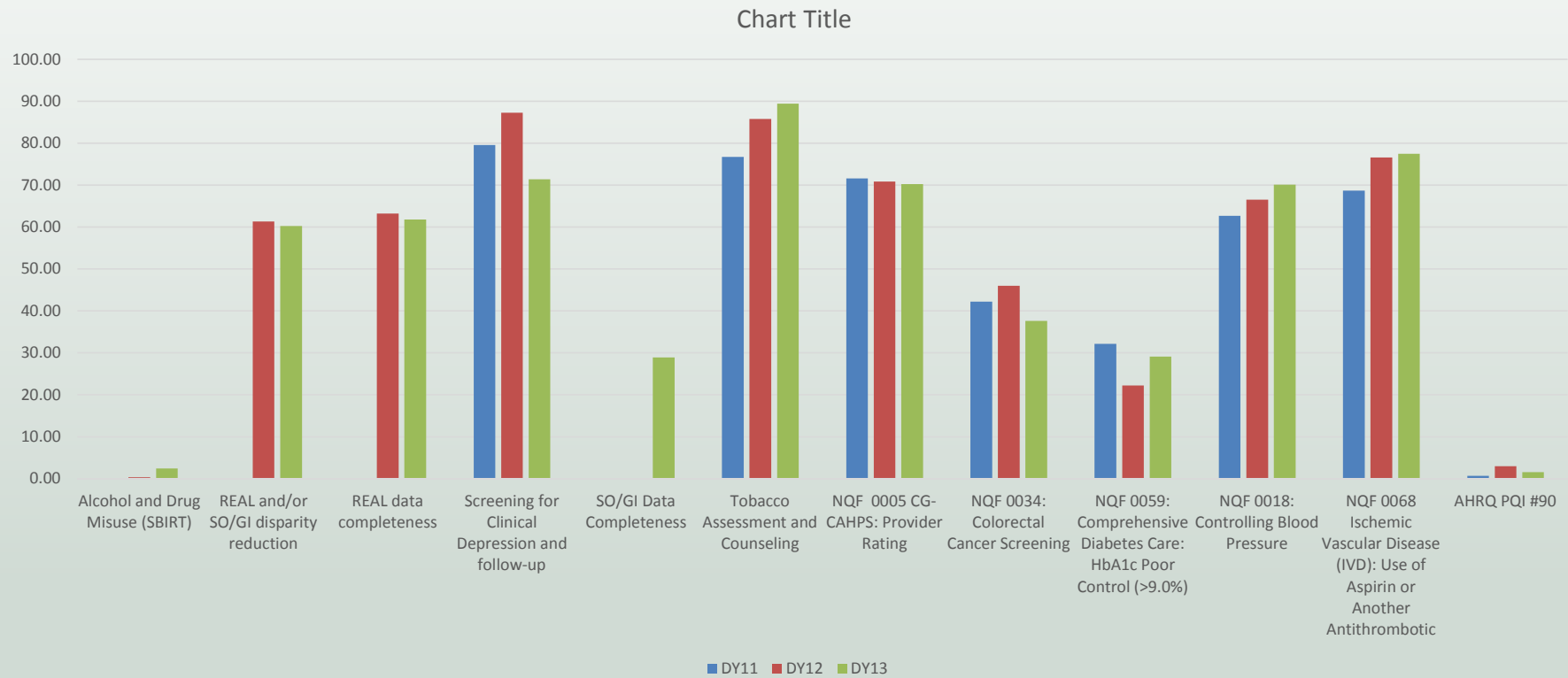
Hatten at (209) 466-7572 or [info@spridecenter.org](mailto:info@spridecenter.org). Individual tickets are \$40. Sponsorship opportunities are also available.

Contact reporter Almendra Carpizo at (209) 546-8264 or [acarpizo@recordnet.com](mailto:acarpizo@recordnet.com). Follow her on Twitter @AlmendraCarpizo.

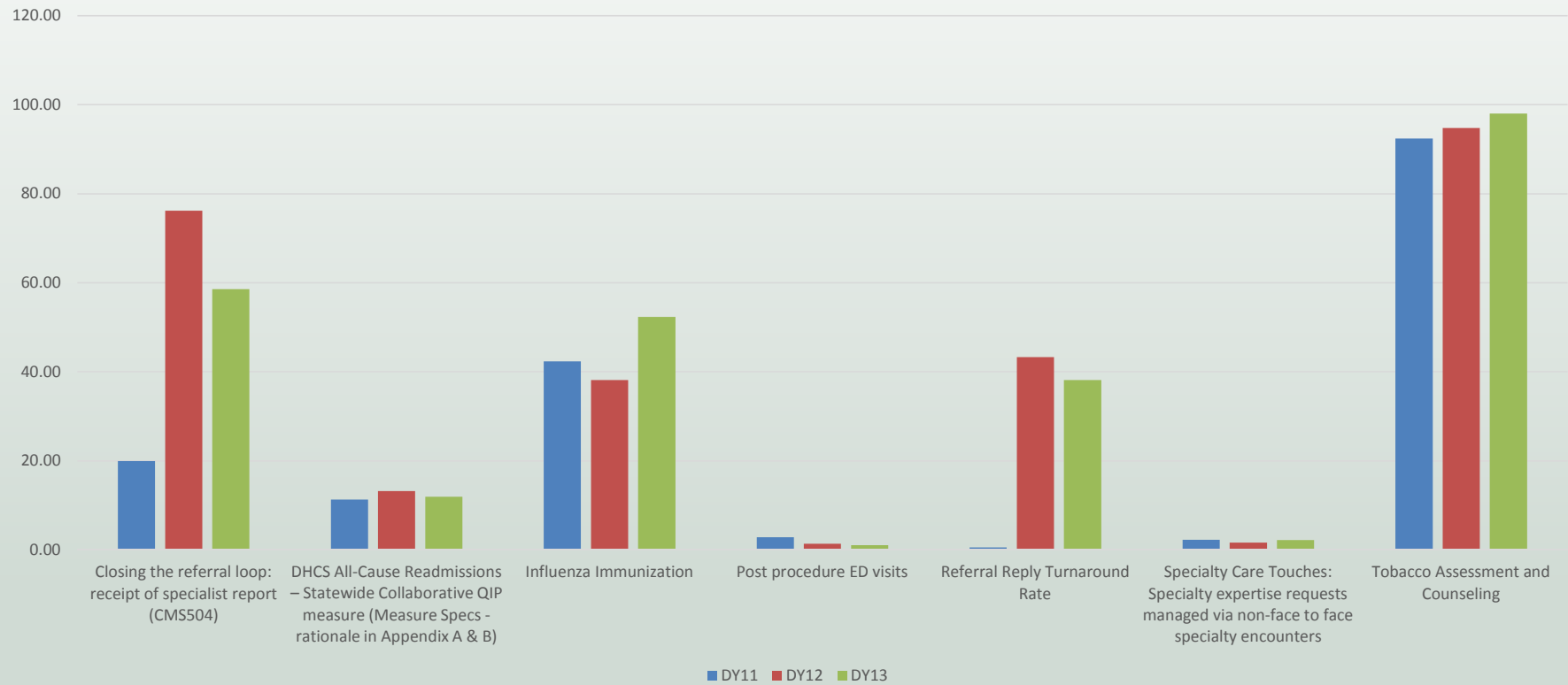
# PROJECT 1.1-Integration of Behavioral Health and Primary Care



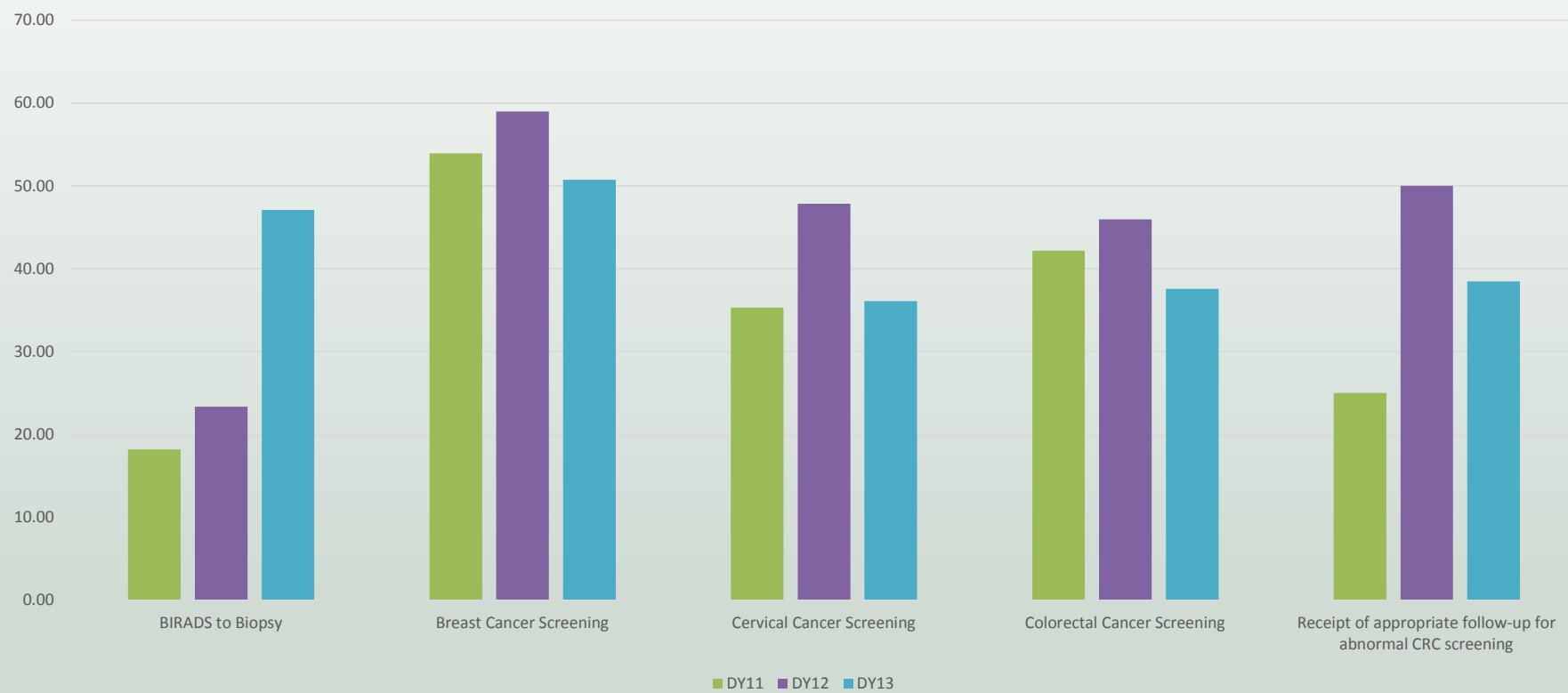
# Project 1.2-Ambulatory Care Redesign



## PROJECT 1.3-Specialty Care Redesign



## Project 1.6-Cancer Screening



COMMENT	RECEIVED DATE	VISIT DATE	PATIENT'S SEX/GENDER	PATIENT'S AGE	LANGUAGE	IT PROVIDER	IT CLINIC CD	MODE
*Doctor Alicar has attended my necessities perfectly.	12/20/2018	11/26/2018	Male	58	Spanish	Alicar, Agnes T NP	Prim Med Clinic	Paper
This nurse practitioner needs to be more respectful and be a better listener to the patients needs. She was rude and unreceptive to questions I asked. I will not continue to see this nurse practitioner.	12/26/2018	12/17/2018	Female	23	English	Alicar, Agnes T NP	Prim Med Clinic	Internet
they were all very professional & helpful	12/6/2018	11/28/2018	Female	64	English	Blau, Nathan MD	Prim Med Clinic	Internet
Dr could have taken more time to give pt opportunity to report their concerns regarding treatment especially when being referred to to outside facilities. I feel these appts should be arranged by hospital staff	12/12/2018	12/5/2018	Female	61	English	Blau, Nathan MD	Prim Med Clinic	Internet
appointments take a long time to get, but as a walk in I was immediately accommodated	12/17/2018	12/5/2018	Male	47	English	Blau, Nathan MD	Prim Med Clinic	Internet
I should have left with a referral rather than sent home with the promise of a call from the provider of the referral for an appointment. I still am waiting and question if follow thru was made or if "I got lost in cracks". This is the 2nd time I've been promised a referral and been disappointed.	12/21/2018	12/12/2018	Male	67	English	Burgos, Regina NP	FPCC	Internet
My language is Spanish and there is always people that speak the same language. I am very satisfied thank you very much for all their help.	12/26/2018	11/5/2018	Female	49	Spanish	Burgos, Regina NP	FPCC	Paper
don't take too long to call you in a room	12/14/2018	12/11/2018	Female	44	English	Burgos, Regina NP	FPCC	Internet
good enough for me	12/14/2018	12/5/2018	Male	69	English	Chander, Harish MD	Prim Med Clinic	Internet
more questions re past days or months re health issues/changes in body "feelings" ... this can open up discussions on health issues brewing in me!	12/20/2018	12/17/2018	Male	68	English	Chander, Harish MD	Prim Med Clinic	Internet
Thank God and you I am recovering from my illness and I am moving forward with your help. Thanks for everything may God bless you.	12/31/2018	11/30/2018	Female	43	Spanish	Chaudhry, Nidhi MD	Prim Med Clinic	Paper
this doctor has been the best of them all excellent care from Her and the Team	12/5/2018	11/29/2018	Male	68	English	Chaudhry, Nidhi MD	Prim Med Clinic	Internet
The nurses attended me professionally, then the doctor came in very kind he explained the results to me about the physical & oriented me how I should take the medicines. How much time I should apply the units of the insulin because I am diabetic thanks for your attention.	12/4/2018	9/19/2018	Female	54	Spanish	Del Valle Hernandez, Jonathan MD	Fam Med Clinic	Paper
It was the first time this doctor treated me; for the last 3 years *Dr. Johl Randeep has treated me, as well as primary doctor *Dr. Dharawat, *Dr. Lee and *Dr. Gregory Baumgarten	12/12/2018	11/21/2018	Male	69	Spanish	Del Valle Hernandez, Jonathan MD	Fam Med Clinic	Paper
Have been a patient of Dr Formoso for over 10 years. She and her staff are the best!!!	12/5/2018	12/4/2018	Female	67	English	Formoso, Victoria G MD	Employee Health	Internet
Nothing - they were very accommodating to get me in right away.	12/18/2018	11/20/2018	Female	58	English	Formoso, Victoria G MD	Employee Health	Paper
Not specific to this appt. - When a Dr. does not come in the day of appt. there should be a phone system that automatically contacts patients that cancellation has been made, contact to reschedule. (Similar to school districts system notifying parents of student absence.)	12/12/2018	11/2/2018	Female	63	English	Goyal, Megha MD	Prim Med Clinic	Paper
Doctor always seems rushed. When they get behind, I think this increases.	12/24/2018	12/12/2018	Female	62	English	Goyal, Megha MD	Prim Med Clinic	Internet
They have been great.	12/29/2018	12/4/2018	Male	54	English	Jafri, Asma B MD	Fam Med Clinic	Paper
*Dr. Johl and his MA are amazing. They both listen and you can tell they truly care about you and your well being. They are a blessing and are helping me get the medical attention I need.	12/26/2018	12/3/2018	Female	35	English	Johl, Randeep MD	Manteca Clinic	Paper
I am quite satisfactory in it.	12/1/2018	11/6/2018	Male	84	English	Mahajan, Arshian MD	Prim Med Clinic	Paper
Improve nothing they do a great job very helpful courteous and a professional office I love the great care and help and wonderful customer service.	12/21/2018	11/29/2018	Female	49	English	Munagala, Shailaja	Prim Med Clinic	Paper
*Dr. Helena she is a very good doctor. I trust her to treat my health problem.	12/4/2018	2/28/2018	Female	57	English	Okhotin, Helena	FMC	Paper
my visit is always fast and the best pcp doctor I ever had. all the doctors at this hospital are wonderful. I chose this hospital for all my health care needs and they have been the best. as long as I live here I will continue to go to SJ Co. Hospital. thank you for all your sevigny es and help	12/5/2018	11/26/2018	Female	51	English	Okhotin, Helena MD	Fam Med Clinic	Internet
She was very helpful.	12/11/2018	11/19/2018	Female	24	English	Okhotin, Helena MD	Fam Med Clinic	Paper
Dr. Michelle Rowe is a brilliant doctor. I believe, in my heart, she saved my life. I cannot see where any improvement could be used in this office. Everybody makes you feel quite special.	12/5/2018	12/4/2018	Male	64	English	Rowe, Michelle J DO	Fam Med Clinic	Internet
Everyone was professional and courteous. Thank you!	12/19/2018	12/15/2018	Male	52	English	Rowe, Michelle J DO	Fam Med Clinic	Internet
nothing ur doing great	12/20/2018	12/15/2018	Female	44	English	Rowe, Michelle J DO	Fam Med Clinic	Internet
Could do with improving the way we get our med. stickers.	12/8/2018	11/19/2018	Male	70	English	Sanghera, Maninder Singh MD	Employee Health	Paper
No, they are all great.	12/11/2018	11/7/2018	Male	70	English	Sanghera, Maninder Singh MD	Employee Health	Paper
Doctor and staff were helpful. I got a same day appointment. The medication was called in a timely manner.	12/7/2018	11/27/2018	Female	45	English	Sanghera, Maninder Singh MD	Employee Health	Internet
ALL clerks should have the same attitude with ALL visitors, seems like the clerks (some) think we owe them something. Same as physicians they need to try to help not judge you or not care what your asking, feeling, unless your their the race of physician? I would like a different doctor I asked for a new dr.	12/21/2018	11/29/2018	Female	57	English	Seifoddini, Mahnoosh MD	Prim Med Clinic	Paper
He could move (work) a little faster. Then maybe not he is up in age. God bless him.	12/20/2018	12/13/2018	Female	63	English	Slarve, Richard N MD	Prim Med Clinic	Internet
to start keep your appointment times... i had a 4 o'clock appointment and had to wait in the outer waitng room for an hour and a half... then had to wait in the exam room another 20 min before i saw the dr... told him my concerns... but didnt get the response or results i was hoping to get...	12/13/2018	12/11/2018	Male	49	English	Slarve, Richard N MD	Prim Med Clinic	Internet
to be mindful that I'm a person too not just someone on paper. take more time to go over things and explain not be rude or say mean things	12/19/2018	12/12/2018	Female	30	English	Slarve, Richard N MD	Prim Med Clinic	Internet
They where perfect	12/12/2018	12/11/2018	Female	50	English	Sodavarapu, Soujanya MD	Prim Med Clinic	Internet
They should give us copy of summary of check up done and result.	12/3/2018	11/21/2018	Female	65	English	Sodavarapu, Soujanya MD	Prim Med Clinic	Internet
To respect the time of the appointment and to not wait to be called	12/10/2018	11/29/2018	Female	67	English	Sodavarapu, Soujanya MD	Prim Med Clinic	Internet
Less wait time	12/12/2018	12/5/2018	Female	72	English	Sodavarapu, Soujanya MD	Prim Med Clinic	Internet
Very excellent, they treat me very well. I'm very pleased, they are very nice.	12/31/2018	12/4/2018	Female	78	Spanish	Sodhi, Monish MD	Fam Med Clinic	Paper
she is really good doctor. we are very satisfied with her.	12/17/2018	12/11/2018	Male	40	English	Verma, Sunita MD	Prim Med Clinic	Internet
The wait time is from 15-45 minutes BEFORE seeing the doctor. The receptionists also need to be on the same page as the healthcare providers inside the offices.	12/17/2018	12/10/2018	Female	23	English	Verma, Sunita MD	Prim Med Clinic	Internet
they gave me a medicine for my cough and flu and fever.	12/24/2018	12/14/2018	Male	46	English	Verma, Sunita MD	Prim Med Clinic	Internet
This office located in M_____ looks like a very simple start up office. The San Joaquin Hospital located in French Camp is well equipped and setting.	12/28/2018	12/4/2018	Female	72	English	Yep, Johnny DO	Manteca Clinic	Paper



COMMENT	RECEIVED DATE	VISIT DATE	PATIENT'S SEX/GENDER	PATIENT'S AGE	LANGUAGE	IT PROVIDER	IT CLINIC CD	MODE
Our appointment was set for 10:15 AM, yet we weren't brought into a room for over an hour later. And once we were in a room, we had to wait another 45 minutes for the provider to finally see us. Even with an appointment, and no more than 3 people in the waiting room during our arrival - the entire visit took us almost 3 hours. Also, the receptionists were extremely unprofessional. Loudly and openly talking about their weekend of drinking, yet seemed to have been "inconvenienced" whenever a new patient would come up.	11/14/2018	11/8/2018	Male	3	English	Apolinario, Patricia C MD	Children's HS	Internet
Visit was good. Parking was horrible... Last three visits no parking.	11/2/2018	10/8/2018	Male	2	English	Apolinario, Patricia C MD	Children's HS	Paper
All my doctor's and MD's all great. *Ramona Bahnam, MD. Their all plus #10.	11/20/2018	10/4/2018	Female	58	English	Bahnam, Ramona MD	Fam Med Clinic	Paper
They did a great job for me.	11/11/2018	10/19/2018	Female	39	English	Baumgarten, Gregory NP	Prim Med Clinic	Paper
My expectations were fully met during this visit	11/22/2018	11/14/2018	Female	47	English	Blau, Nathan MD	Prim Med Clinic	Internet
spent more time with me. he mostly just consulted my records	11/2/2018	10/30/2018	Male	62	English	Blau, Nathan MD	Prim Med Clinic	Internet
I'm glad that this provider office able to referral me to the right medical specialists such as oncology and surgeon.	11/27/2018	11/6/2018	Male	57	English	Blau, Nathan MD	Prim Med Clinic	Paper
I really admire *Dr. Brown-Berchtold. She is thorough and always follows up!	11/30/2018	11/6/2018	Female	50	English	Brown-Berchtold, Lauren K MD	Manteca Clinic	Paper
Regina and her staff are amazing very helpful and friendly. they do a great job. thank you	11/5/2018	10/30/2018	Male	50	English	Burgos, Regina NP	FPCC	Internet
as far as reception the young Asian woman is always sweet and super professional ,but the older heavy set Mexican lady who works to the left is rude,totally unprofessional I witnessed her talking to her mother at the front desk for 12 min ignored me the whole time I stood their . she needs retraining ASAP her attitude is beyond reproach	11/5/2018	10/30/2018	Female	38	English	Burgos, Regina NP	FPCC	Internet
Dr's., clerks and receptionists are very helpful. NOTE: - Please provide free transport facilities for me and my wife to attend the doctor's appointment. Because we have no car or other vehicle, no job, no bank balance etc. I am above 66 yrs. (5-7-1950) old and my wife above 68 yrs. old and poor people. Thank you. 11/20/2018.	11/28/2018	11/6/2018	Male	66	English	Chander, Harish MD	Prim Med Clinic	Paper
nothing..... Doctors and all staff are very good.	11/28/2018	11/21/2018	Male	56	English	Chander, Harish MD	Prim Med Clinic	Internet
I recently was in ER got called in right away. Had infection in my finger. The dr. and nurses were awesome.	11/1/2018	10/3/2018	Female	61	English	Chander, Harish MD	Prim Med Clinic	Paper
listen and try and help	11/12/2018	10/31/2018	Male	43	English	Chander, Harish MD	Prim Med Clinic	Internet
This provider listens my mental and physical problems very carefully and give me better treatment which has helped me to improve my health.	11/21/2018	11/5/2018	Female	67	English	Chaudhry, Nidhi MD	Prim Med Clinic	Paper
They couldn't possibly improve the care I received.	11/28/2018	11/6/2018	Male	56	English	Chaudhry, Nidhi MD	Prim Med Clinic	Paper
None, I received excellent care	11/15/2018	11/9/2018	Male	58	English	Chaudhry, Nidhi MD	Prim Med Clinic	Internet
I have been trying to get a referral for 3 WEEKS now bc staff still have not sent test results requested by specialist dr. Also, no one has ever picked up the referral phone when I call to check status of referral.	11/2/2018	10/8/2018	Male	31	English	Chaudhry, Nidhi MD	Prim Med Clinic	Paper
At this visit I was seen by a resident Dr. I'm sorry I don't remember her name. She seemed alright, but I had a very hard time understanding her. Dr. Chiriboga-Hurtado used to be friendly and engaging: he treated me like family (too much so), only to deny he did so. He has accepted gifts from me (two vintage 1977 Star Wars Steins), only to reject his role in creating the atmosphere from which they flowed: he engaged me emotionally and unprofessionally, being warm at first, and now has become distant and indifferent. I believe that his superiors, Drs. Kapre and Parsa may have censured him for these actions, which would explain the denials and the subsequent and sudden clinical detachment that is suddenly marring and stifling the doctor-patient relationship. I have done nothing more than give gifts and actions to express my heartfelt emotions within the contextual confines of a once warm and loving relationship, with the full understanding that the relationship, no matter how heady, existed solely as a professional one, and not at all beyond the confines of the HIPPA (professional) constraints of a medically-appropriate, albeit a very warm doctor-patient relationship. I am hurt and disappointed by the consequences of Dr. Chiriboga-Hurtado's own participation in a relationship that went too far. If Dr. Chiriboga-Hurtado believes that I am in any way compromised, then it only logically follows that he has exploited my vulnerabilities by accepting my property and emotionally reciprocating my emotional advances. I have suffered from greatly from gender dysphoria; I just began exploring anew, interpersonal trust and risking the subsequent emotional vulnerabilities, come what may, from my childlike ways of naive trust and love, only to once again forced back to the cynicism from whence I came, ruining my emotional progress and endangering my spiritual wellbeing: this is wrong, egregiously wrong and all remedial actions are being considered this time. I expect and wish to be contacted regarding this situation. I need to be assured that my medical treatment (maintenance) will not be harmed or otherwise interrupted the interim, while I seek an appropriate medical successor. Sincerely.	11/7/2018	11/5/2018	Female	45	English	Chaudhry, Nidhi MD	Prim Med Clinic	Internet
	11/2/2018	10/30/2018	Male	50	English	Chiriboga-Hurtado, Juan	Manteca Clinic	Internet
	11/28/2018	11/27/2018	Female	49	English	Chowdhury, Sukalpa MD	Prim Med Clinic	Internet
well satisfied....	11/21/2018	11/19/2018	Male	60	English	Diulio, Jonathon MD	Prim Med Clinic	Internet
Dr. Formoso and her staff are great.	11/12/2018	10/30/2018	Female	55	English	Formoso, Victoria G MD	Employee Health	Internet
Office excellent. Waiting area out front rather long.	11/29/2018	11/13/2018	Female	75	English	Formoso, Victoria G MD	Employee Health	Paper
No improvement needed for actual office. Registration to be seen is a hassle and time consuming.	11/21/2018	11/19/2018	Female	54	English	Formoso, Victoria G MD	Employee Health	Internet
I receive excellent care at the clinic I go to - getting in for an appt. is kind of hard with only a 2 week window. I wish they could expand this time frame.	11/9/2018	10/17/2018	Female	55	English	Garza, Crisoforo MD	Healthy Beg CS	Paper
No improvement needed.	11/7/2018	11/1/2018	Female	61	English	Goyal, Megha MD	Prim Med Clinic	Internet
*Dr. Goyal is very attentive, nice & excellent doctor in taking care of my health issues and am satisfied with the services of her overall team, including the receptionist.	11/1/2018	9/27/2018	Female	56	English	Goyal, Megha MD	Prim Med Clinic	Paper
Did not do basic check of ears ,eyes, or listen to heart and lungs. But, was very attentive to my medical problems that I wanted to discuss and ordered tests that she felt was needed for further diagnosis of possible medical problems.	11/12/2018	11/2/2018	Female	57	English	Goyal, Megha MD	Prim Med Clinic	Internet
be nice to any person's and keep the goodwoek	11/7/2018	10/24/2018	Female	42	English	Harris-Stansil, Tonja MD	Healthy Beg CS	Internet
I have a great experience each time I go to see my doctor he is very attentive and Ulysses quite well .. my doctors name is Dr Jolh .	11/1/2018	10/29/2018	Male	62	English	Johl, Randeep MD	Manteca Clinic	Internet
I don't think they could have anything better.	11/1/2018	10/30/2018	Male	59	English	Kafilmout, Imad T MD	Fam Med Clinic	Internet
The doctor went above and beyond what initially I went in for. To my surprise he found other conditions I had and helped treat them. For that I am grateful.	11/30/2018	11/5/2018	Male	62	English	Kafilmout, Imad T MD	Manteca Clinic	Paper
control my medical condition stop changing my medication that works to medication that doesn't work or makes me sicker	11/27/2018	11/16/2018	Female	50	English	Munagala, Shailaja	Prim Med Clinic	Internet
my care was excellent	11/28/2018	11/26/2018	Female	64	English	Okhotin, Helena MD	Fam Med Clinic	Internet
They attended me 1 hour of being in the Waiting Room, well I am very well with the schedule they give me, appointment in hours - of the morning, because the other time that they attended me the appointment - was at 2:40 p.m. & they didn't attend me until 4:30 p.m., I have board 3 buses.	11/2/2018	10/15/2018	Female	76	Spanish	Okhotin, Helena MD	Fam Med Clinic	Paper
Everything was fine.	11/21/2018	10/25/2018	Male	65	Spanish	Pandamouz, Ali MD	Fam Med Clinic	Paper
*Jun Paz suspected I may have fibromyalgia & said he'd consult my primary & call me. He did call the next day to say a prescription for gabapentin would be sent for me. Nothing further. Now I need to make an appointment for clarification of that prescription.	11/6/2018	10/15/2018	Female	34	English	Paz, Jun NP	Manteca Clinic	Paper
Nothing to change, all very attentive to their patients, kind.	11/27/2018	11/5/2018	Female	64	Spanish	Paz, Jun NP	Manteca Clinic	Paper
everyone was polite and respectful I couldn't ask for more	11/23/2018	11/10/2018	Male	55	English	Rowe, Michelle J DO	Fam Med Clinic	Internet

COMMENT	RECEIVED DATE	VISIT DATE	PATIENT'S SEX/GENDER	PATIENT'S AGE	LANGUAGE	IT PROVIDER	IT CLINIC CD	MODE
The provider's office was very accommodating. They sent my prescription to the pharmacy where I picked them up. They gave me my appointment for the next visit.	11/2/2018	10/4/2018	Male	70	English	Sanghera, Maninder Singh MD	Employee Health	Paper
*Sanghera, Maninder Singh MD. Had been a very good health provider. I cannot think of anything for his improvement, it is his position that needs an advancement.	11/2/2018	10/11/2018	Female	78	English	Sanghera, Maninder Singh MD	Employee Health	Paper
The attention was excellent I left very happy from my appointment thank you.	11/2/2018	10/16/2018	Female	66	Spanish	Sanghera, Maninder Singh MD	Employee Health	Paper
Always - Happy to see every one it was nice as always.	11/30/2018	11/8/2018	Female	76	English	Sanghera, Maninder Singh MD	Employee Health	Paper
take a little more time to listen. I felt very rushed and still didn't get my refill of my medicine that I had been trying for 3 months to get	11/1/2018	10/30/2018	Female	68	English	Seifoddini, Mahnoosh MD	Prim Med Clinic	Internet
Very good.	11/13/2018	10/10/2018	Male	53	English	Seifoddini, Mahnoosh MD	Prim Med Clinic	Paper
Dr Slarve is affable one of a kind everything is great	11/2/2018	10/24/2018	Female	37	English	Slarve, Richard N MD	Prim Med Clinic	Internet
I would like a little more information and other options if any.	11/1/2018	10/25/2018	Female	53	English	Slarve, Richard N MD	Prim Med Clinic	Internet
make reminder phone calls for appt	11/8/2018	10/29/2018	Male	54	English	Slarve, Richard N MD	Prim Med Clinic	Internet
I have no complaints..My Visits are always good	11/5/2018	10/24/2018	Female	65	English	Sodhi, Monish MD	Fam Med Clinic	Internet
put the referral threw for my neck to UC Davis. I won't be seen here ever again.	11/6/2018	10/29/2018	Female	38	English	Sodhi, Monish MD	Fam Med Clinic	Internet
I was treated respectfully. The human-kindness I experienced with this health care, (*Dr. Tha) provider and staff was amazing and with dignity.	11/21/2018	11/1/2018	Female	58	English	Tha, Khin Z MD	FPCC	Paper
they did great	11/14/2018	11/8/2018	Female	2	English	Troncales, Imeline H MD	Children's HS	Internet



# San Joaquin County Clinics

## Director's Report

January 29, 2018

### FQHC Status

The state has set our initial rates for Manteca and Hazelton at \$166.60. Our rate setting cost report will be completed based on the next fiscal year – July 1, 2019 to June 30, 2020 upon which our permanent rate will eventually be set.

### Monthly Statistical Report:

Our Monthly visits were:

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total/Avg
Visits	8,993	10,172	8,354	10,602	8,788	7,988							54,897
Work Days	21	23	19	22	20	20	22	20	21	22	22	20	
Visits/Day	428	442	440	482	439	399	0	0	0	0	0	0	438

Our visits have decreased in December which is likely related to the Holidays.

### Health Plan of San Joaquin (HPSJ)

HealthNet recently paid us \$18,290 in incentive funds based on accomplishing certain of their incentivized preventive measures. It should be noted that we have the potential of \$61,000 if we met all of the incentives.

### HRSA

The deadline for filing our UDS report (annual report of services and client characteristics) is February 15, 2019. It looks like we served a few less patients than the previous year.

HRSA surveyors said we need to revise the Co-Applicant agreement to define what role the county Board of Supervisors could act in the selection and removal of SJCC Board members. They also cited incompatible wording between the Co-Applicant agreement and the SJCC bylaws. So you have revisions to the co-applicant agreement which should bring them into conformance with each other.

There is an announcement of funds for New Access Point (NAP) 330 grant funds. It is a two-step process with a March 12 application which will open the Electronic Handbook to us to apply for the grant in full but limited to 175 pages. We fully intend to apply. It would mean a \$650,000 grant each year. That amount is usually increased by a cost of living factor each year. There are a series of other benefits we will get once we become a full FQHC 330 grantee. Some examples are: access to further grants such as expansion or adding services, grants or loan guarantees, FTCA substitute for professional Liability, and protection from some anti-kickback safe harbor provisions. We should be able to score an added 10 points because we are an FQHC Look-alike.

You have not reviewed our fee schedule. So we are bringing you a recommended fee schedule that will comply with HRSA requirements to consider costs and the marketplace. Once you have approved it, we will not bring the whole thing to you but only the revisions made each year.

The Billing & Collection and Financial Policies will be coming to you next month. This plan means we will complete these actions before the deadline of March 21 to complete the changes we need to make for the HRSA surveyors.

#### Sliding Fee Scale

The new Federal Poverty rates have been released but not published unless the shut-down is over by now. So you have before you the revised Federal Poverty levels and our fees inserted accordingly. However, you will notice that there is now a proposed Full Charge fee which Art Feagles suggested. That way a patient coming to the clinic and worried about what the cost would be, we can reliably tell them if they do not qualify for sliding fee.

#### Hazelton Staff

As you know, the staff at Hazelton have been on the Public Health Services staff and their costs transferred to our cost center. Each year we have created a couple of positions and hired directly in SJCC. We started with 13 positions to worry about. We are now down to seven. They will not be in the next year budget for PHS, so we have to plan the transition. One person has already been hired by SJCC, one is retiring and one is vacant. So we are requesting a transfer of the County positions from PHS to SJCC. The vacant positions we can hire and fill. The remaining staff would then transfer to SJCC. There is no difference in budget to SJCC since their costs were being transferred to us already. The plan is to meet with the staff and discuss the change and allow them time to think about the implications for them, but the changes would be completed by April 1, 2019.

#### New Interim CFO

Art Feagles is a new Interim CFO to the FQHC and will be here full time. Diana Surber is getting him up to speed on the systems here and the databases she has developed for reporting our finances. Art has many years of experience in FQHC's all around California and just happens to be Harvard trained. He also has held CIO roles simultaneously because of his knowledge and training in the field.

#### Phone Center Expansion

The phone center has been working to reduce the wait times on the phones and dropped calls. The dropped calls were down to 3.4% and that is a steady trend for a number of months now. The next move is to expand their hours to the same hours as the clinics are open so that patients can call to check on clinic hours or to get in the evenings or Saturdays. We want to also add Nurses to handle triaging calls and direct patients appropriately based on established protocols. Whenever staff are there, clinics will be open they can direct patients to. Emergencies will still need to go to the ER.

#### Medical Assistants

In part due to SEIU request, we are considering returning to the Medical Assistant title versus the Outpatient Clinical Assistant. It would have multiple levels, so there is a career path, so that we do not lose those we train. The highest level would have to be able to anticipate for the provider what is needed so that the provider can meet all of the patient's needs most efficiently.

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	Effective Date	Date Replaces NEW
Title of Policy/Procedure <b>After-Hours On-Call Services</b>		

### 1. **PURPOSE:**

The purpose of the On-Call Service is to provide an after-hours contact to remedy concerns from patients and ancillary health care agencies such as pharmacies, laboratory, or hospitals.

### 2. **POLICY**

SJCC will provide an after-hours on-call access system for SJCC patients to get assistance during days and hours the clinics are not open. It will be available 24/7 365 days per year. A medical provider will be available to respond to concerns of the clients, direct patient care issues appropriate to their situation, and record the patient interactions in the EHR.

### 3. **Procedure:**

- a. Call is phone-only and it is taken from a pool of SJGH licensed-providers on a rotating basis. Providers will take call as a team of two: Primary and back-up and will be on-call as a primary on average every 8-9 weeks based on the number of fulltime medical providers employed at SJGH at a given time. Schedule is adjusted to cover holidays as needed.
- b. Each on call period is a week-long obligation from Monday 5pm to Monday 8am.
- c. The on call provider is given a pager / phone that he/she must carry at all times while on call. If provider cannot answer the call at the time, he/she must return the call within sixty minutes.
- d. The Primary Provider on call is the first contact from the answering service. His/her back up - the Secondary Provider - who will be contacted when the Primary does not respond after three attempts every 30 minutes. The Chief Medical Officer will be contacted after another three attempts every 30 minutes without a response from either the Primary or Secondary Provider.
- e. Clinicians are responsible for answering phone calls for all clinics.
- f. Calls placed to the clinics after hour will be routed to the Answering Service – ( )
- g. (Answering service name) operators will screen callers for legitimate calls for SJGH Clinics. Operational calls will be routed to the operations department and clinical calls will be routed to the clinician on-call.
- h. Answering service will provide procedure to prevent barriers due to limited English proficiency or literacy levels.

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Title of Policy/Procedure <b>After-Hours On-Call Services</b>		

- i. Answering operators will page or call the provider on-call 's phone number based on a monthly schedule provided by the Chief Medical Officer's office.
- j. Provider will be given a brief description of issue. The provider must ensure to get the following: the patient's name; which clinic the patient belongs to; the description of the problem; and the disposition after the call.
- k. Provider will attempt to resolve clinical issue over the phone. Typical calls include prescription refills or clarifications from pharmacies, critical lab results, hospital admission requests, or patients with acute care concerns.
- l. There will be instances where provider may be compelled to direct the patient to the nearest Urgent Care or hospital due to the acuity of the situation. The on-call clinician should keep the list of resources as a guide for where to direct patients for higher level of care depending on which clinic the patient belongs to.
- m. To refer patients to contracted ER or Urgent Care facilities please see the "ER Urgent Care Referral List" to help delineate contracted facilities based on the patient's insurance.
- n. Provider must create a "after hours telephone encounter" on EMR by the next morning and forward to the lead physician at the patient's clinic.
- o. If EMR is not accessible, an Phone Call Record-ACS Form must be filled out and fax to the ACS office by the next morning.
- p. Provider may, in addition to filling out the form, also call the lead provider at the clinic to further discuss clinical aspects of case.
- q. Providers are expected to call the clinician on-call for any urgent or stat labs AND for directions as to how to handle information.
- r. If further assistance is needed the provider who treated the patient in question may be contacted through their personal contact number enclosed in the Provider Phone List.
- s. Internal audits and monitoring reports will be kept in a binder at the ACS office.

#### 4. STIPULATIONS

- A. The on Call schedule is released 2 months in advance. If there are any scheduling conflicts you are responsible to find a replacement. All substitutions must be approved by

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the Chief Medical Officer. Please copy the Chief Medical Officer's secretary on any issues regarding On-call schedule.

DRAFT

<b>SAN JOAQUIN GENERAL HOSPITAL</b>	Department of PHARMACY	Page 1 of 6
	Effective Date:	Date Replaces: new
<b>Title of Policy/Procedure: 340B Drug Pricing Program</b>		

**POLICY:**

San Joaquin General Hospital (SJGH) will purchase medications for eligible patients at 340B drug pricing and will maintain compliance with all program requirements.

**PURPOSE:**

To outline policies and procedures adopted at SJGH for participation in and compliance with the federal 340B Drug Pricing Program.

**DEFINITIONS:**

340B Drug Pricing Program: The 340B Drug Pricing program is the result of section 340B of the Public Health Service Act of 1992. This act places a limitation on prices of drugs purchased by certain covered entities for covered outpatient medications. The purpose of the 340B program is to enable covered entities to stretch scarce federal resources, reaching more eligible patients and providing more comprehensive services. Any manufacturer participating in the Medicaid Drug Rebate Program must sign a pricing agreement with the Secretary of Health and Human Services. The program is administered by the Office of Pharmacy Affairs (OPA), a division of the federal Health Resources and Services Administration (HRSA).

340B Eligible Patient: A patient of the covered entity that meets HRSA's definition of a patient. (see Procedure Section 3 for eligibility requirements)

Child Site: An outpatient clinic that is located outside of the 4 walls of the covered entity. An outpatient clinic is eligible to be registered as a child site if it is listed as reimbursable on the covered entity's Medicare Cost Report and has outpatient charges associated with it.

Covered Entity: A hospital or other facility enrolled in the 340B Drug Pricing Program and eligible to purchase covered outpatient drugs for 340B eligible patients.

Covered Outpatient Drug: A drug defined in Section 1927(k) of the Social Security Act that may be purchased, with certain possible exceptions, by covered entities under the 340B Drug Pricing Program.

Diversion Prohibition: The prohibition against the resale or transfer of covered outpatient drugs purchased under the 340B Pricing Program to anyone other than a 340B eligible patient of a covered entity.

Duplicate Discount Prohibition: The prohibition against subjecting a manufacturer to providing a discounted price on the purchase of a drug and providing a rebate for the drug under Title XIX of the Social Security Act.

GPO Prohibition: Covered entities that are enrolled as a Disproportionate Share Hospital (DSH), Children's Hospital (PED), or free-standing Cancer Hospital (CAN) cannot obtain covered outpatient drugs through a group purchasing organization (GPO) or other group purchasing arrangement. Covered entities subject to the GPO prohibition will purchase covered outpatient drugs under a wholesale acquisition cost (WAC) or other type of account that is not a GPO account or other group purchasing arrangement account.



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Healthcare Professional: A healthcare professional includes licensed independent practitioners (e.g. MD, DO, NP, PA), nurses, pharmacists, respiratory therapists and radiology technicians.

Medicaid Exclusion File: A list of covered entities who purchase 340B drug for Medicaid patients. This list is used by State Medicaid programs to exclude 340B drugs from Medicaid rebate requests.

Mixed Use Area: A location that serves both outpatients and inpatients in the same setting. These areas include, but are not limited to: Emergency Department, Radiology, Cardiac Imaging, Surgery Department.

#### **PROCEDURE:**

1. Program intent
  - a. SJGH will use 340B savings to provide charity care and continued access to medical care for uninsured and underinsured members of San Joaquin County.
2. 340B program eligibility requirements
  - a. SJGH will ensure that the covered entity (CE) information is complete, accurate and up to date on the OPA database.
  - b. SJGH is owned and operated by a local government.
  - c. For the most recently filed Medicare Cost Report, SJGH had a disproportionate share adjustment percentage greater than 11.75%.
  - d. SJGH will not obtain covered outpatient drugs through a group purchasing organization (GPO) or other group purchasing arrangement.
  - e. SJGH will comply with the prohibition against duplicate discounts under Medicaid.
    - i. SJGH will inform OPA immediately when any of its organization information needs to be changed on the OPA website or Medicaid Exclusion File.
  - f. SJGH clinic sites that utilize 340B drugs appear on the most recently filed Medicare Cost Report as reimbursable sites.
  - g. SJGH will not transfer 340B drugs to anyone other than an eligible patient of the entity.
3. 340B patient eligibility requirements
  - a. SJGH has established a relationship with the patient, such that SJGH maintains records of the patient's healthcare, **and**
  - b. Patient receives health care services from a health care professional who is either employed by SJGH or provides health care under contractual arrangement with SJGH.
  - c. Patient must have an outpatient status at the time the drug is charged.
4. 340B covered outpatient drug requirements
  - a. SJGH defines covered outpatient drugs as any medication that is administered and billed to an eligible patient in an outpatient setting.
  - b. Any medication that is provided incidental to an outpatient visit and billed directly to the clinic operation is not considered a covered outpatient drug.
  - c. Any medication that is specifically excluded by 340B program definitions is not considered a covered outpatient drug.

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- d. SJGH will maintain a current list of non-covered outpatient drugs (see Appendix A).
  - e. Only 340B eligible patients will receive 340B purchased drugs.
- 5. 340B facility eligibility
  - a. SJGH defines a 340B eligible location as any outpatient location that appears as reimbursable on the most recently filed Medicare cost report **and** has outpatient charges associated with it.
  - b. Any eligible outpatient location that appears as reimbursable on the most recently filed Medicare cost report and has the same physical address as SJGH will be included in the parent registration on the OPA database.
  - c. Any outpatient location that appears as reimbursable on the most recently filed Medicare cost report and does not have the same physical address as SJGH will be registered as a child-site on the OPA database.
  - d. Any new clinic site must be listed on the most recently filed Medicare Cost Report prior to 340B drug use in that area.
- 6. Responsible Staff
  - a. SJGH Chief Executive Officer will serve as the entity's authorizing official.
    - i. Responsible for attesting to the compliance of the program during recertification.
  - b. SJGH Ambulatory Care Services (ACS) Pharmacy Supervisor will serve as the entity's contact person.
    - i. Responsible for the day to day management of the program.
    - ii. Responsible for maintaining knowledge of policy changes regarding the 340B program.
    - iii. Responsible for maintaining the 340B policies and procedures.
    - iv. Responsible for maintaining and testing any 340B software.
    - v. Responsible for performing routine program audits.
    - vi. Responsible for ensuring staff receive appropriate education.
    - vii. Responsible for addressing any compliance lapses and preparing corrective action plans as required.
  - c. SJGH Pharmaceutical Inventory Technician will be responsible for the daily ordering of stock and maintaining purchase/inventory records.
- 7. Drug Procurement and Inventory Management
  - a. SJGH inventory is managed utilizing a 340B split-billing system.
  - b. 340B eligible medication dispenses will be accumulated in virtual 340B accumulators.
  - c. Non-340B eligible medication dispenses will be accumulated in virtual GPO accumulators.
  - d. All 340B drugs will be ordered through the ACS Pharmacy only.
    - i. All ACS Pharmacy staff receives specialized training in 340B regulations and procedures.
  - e. All medication purchases will be based on the available accumulations in the 340B and GPO accumulators.
  - f. Medications lacking sufficient 340B or GPO accumulations will be purchased at wholesale-acquisition-cost (WAC)
  - g. Any medication that is not 340B eligible will be purchased at WAC or sub-WAC prices if available.



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- h. SJGH will maintain a single inventory, based on a replenishment model, in the Hospital Inpatient Pharmacy.
    - i. Hospital Inpatient Pharmacy will service all mixed use areas.
  - i. Records for 340B related purchases and transactions will be retained for a period no less than five (5) years from the date of the transaction.
- 8. Medication Borrowing and Loaning
  - a. SJGH will minimize the need to borrow medications by maintaining an adequate supply of medication on hand.
  - b. In the event borrowing or loaning of medication must occur (emergency use only), a borrowing/loaning form will be filled out by the staff member borrowing or loaning the medication.
  - c. The transaction will be reconciled by an 11-digit NDC matching replacement of the affected product.
  - d. In the event that a product cannot be replaced, any payment for the product will be at the WAC or GPO price as appropriate.
- 9. Compliance with Duplicate Discount Prohibition
  - a. SJGH has placed itself on the Medicaid Exclusion File. Hospital administered drugs are purchased at 340B pricing and billed normally to Medicaid
  - b. Medicaid agencies are required to exclude claims for 340B purchased drugs from Medicaid rebate requests to prevent subjecting drug manufacturers to duplicate discounts (i.e., selling 340B purchased drugs to covered entities at the discounted ceiling prices and providing Medicaid rebates on the same drugs) when placed on the Medicaid Exclusion File.
  - c. SJGH has notified the Medicaid Pharmacy program Director of our Medicaid exclusion file status.
  - d. Out-of-state Medicaid billing is reviewed on an annual basis to ensure that any out-of-state Medicaid billing is also compliant with the duplicate discount prohibition requirement.
- 10. 340B Enrollment, Recertification and Change Requests
  - a. SJGH will complete annual recertification as required by HRSA.
  - b. SJGH will notify HRSA and OPA immediately of any changes that need to be made in the 340B database.
    - i. Changes will be made via an online change request form found on the OPA website.
  - c. Any new outpatient locations requiring registration with OPA will be registered during the open registration window (January 1-15, April 1-15, July 1-15, October 1-15) for an effective start date beginning the following quarter (April 1<sup>st</sup>, July 1<sup>st</sup>, October 1<sup>st</sup>, January 1<sup>st</sup>).
- 11. Monitoring and Auditing
  - a. SJGH will review all OPA database information and Medicare cost reports on an annual basis to ensure the accuracy of the information listed.
    - i. Responsible staff: Authorizing official and/or primary contact
  - b. SJGH will conduct 340B self-audits and review reports on a quarterly basis to ensure compliance with program requirements.
    - i. Responsible staff: Primary contact and/or pharmacy staff
  - c. SJGH will maintain knowledge of policy changes impacting the 340B program.
    - i. Responsible staff: Authorizing official and/or primary contact

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- d. SJGH will review and load pricing contracts on a quarterly basis.
  - i. Responsible staff: Pharmacy inventory technician and/or pharmacy supervisor

12. Self-Reporting of Non-Compliance

- a. SJGH will notify HRSA/OPA of any material breach by the hospital of any of the 340B requirements or policies.
  - i. Materiality is defined as a discrepancy that has a total dollar value of 5% or more of the total cost for all 340B purchased drugs for the given time period.
  - ii. Responsible staff: Authorizing official and primary contact
- b. SJGH will develop an appropriate plan for corrective action based on the type and severity of the breach.

13. Staff Development

- a. ACS Pharmacy supervisor will attend 340B University at least one time and every 2 years, as staffing allows.
- b. Pharmacy staff members will complete basic training on the 340B program.
- c. Pharmacy inventory technicians will be fully trained on the program requirements and the SJGH policy addressing the 340B program.
- d. ACS Pharmacy supervisor will be responsible for the training of new staff members, as necessary.




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#### **Appendix A: Non-covered Drug List**

1. Vaccines
  - a. Reason: Section 1927(k) of the Social Security Act defines covered outpatient drugs as "...a biological product, **other than a vaccine** which..."
2. Bundled drugs
  - a. Commonly bundled outpatient drugs at SJGH
    - i. Plain IV fluids
    - ii. Parenteral nutrition
    - iii. Flush syringes (saline and heparin)
    - iv. Inhaled anesthetics
    - v. Rhogam
    - vi. Radiopharmaceuticals
  - b. Reason: Section 1927(k)(3) of the Social Security Act limits the definition of covered outpatient drug. "The term "covered outpatient drug" does not include any drug, biological product, or insulin provided as part of, or as incident to and in the same setting as, any of the following (and for which payment may be made under this title as part of payment for the following and not as direct reimbursement for the drug):
    - i. Inpatient hospital services.
    - ii. Hospice services.
    - iii. Dental services, except that drugs for which the State plan authorizes direct reimbursement to the dispensing dentist are covered outpatient drugs.
    - iv. Physicians' services.
    - v. Outpatient hospital services.
    - vi. Nursing facility services and services provided by an intermediate care facility for the mentally retarded.
    - vii. Other laboratory and x-ray services.
    - viii. Renal Dialysis.

Author(s): Department of Pharmacy  
 Reference(s): Health Resources and Services Administration ([www.hrsa.gov](http://www.hrsa.gov)); Apexus  
 340B Prime Vendor Program ([www.340Bpvp.com](http://www.340Bpvp.com));  
 Approval(s):

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	<b>Ambulatory Care Services</b>		1 1
	Policy/Procedure	Effective Date	Date Replaces
Title of Policy/Procedure		01/21/19	New
<b>TRANSPORTATION: ISSUING BUS PASSES</b>			

**POLICY:** Provide assistance to San Joaquin County Clinic (SJCC) patients who require public transportation to access medical appointments or participate in ancillary care services at any SJCC locations or community sites.

**PURPOSE:** To provide outpatients with free bus passes for rides to and from clinic locations or designated community sites in San Joaquin County.

**PROCEDURE:** Any patient of San Joaquin County Clinics is eligible to receive bus passes. Children with a parent or a necessary attendant to assist the patient may be issued bus passes.

Ambulatory Care Services will manage the procurement, inventory and dissemination of bus passes to the clinics. Inventory control will be the responsibility of the ACS Administration Front Office Staff, who will distribute, monitor and replenish bus passes issued to each clinic's registration desk.

Each clinic's registration desk will be issued a definite number of bus passes which will be replenished monthly or as it is depleted. A log will be maintained at each clinic registration desk to monitor the issuance of bus passes to patients. The completed log will be submitted to ACS at the end of each month or when bus passes are depleted, whichever comes first. A template of the "*SJCC Bus Pass Log*" is attached. A designated Registration Clerk will be responsible for safekeeping and distribution of the bus passes. An alternate may take over in the absence of the Registration Clerk. The Registration Clerk issuing a bus pass will complete the log with the following information:

1. Date Issued
2. Bus Pass Number(s)
3. Patient's First and Last Name
4. Medical Record Number (MRN)
5. Date of Appointment for Which the Bus Passes are Issued

Clinic Registration Desks will be required to submit their completed *SJCC Bus Pass Log* in order to receive replenish their inventory of bus passes.

Bus passes will be also be maintained and issued at the Patient Navigation office for patients who may be participating in ancillary services and require public transportation to get to and from ancillary services.

**ATTACHMENTS:** SJCC Bus Pass Log template



<b>Fee Family Size</b>	<b>\$30 Nominal Fee 0-100%</b>	<b>\$40 101-133%</b>	<b>\$50 134-150%</b>	<b>\$60 151-200%</b>	<b>\$185.00 200% &amp; Over</b>
1	12,490	16,612	18,735	24,980	24,981
2	16,910	22,490	25,365	33,820	33,821
3	21,330	28,369	31,995	42,660	42,661
4	25,750	34,248	38,625	51,500	51,501
5	30,170	40,126	45,255	60,340	60,341
6	34,590	46,005	51,885	69,180	69,181
7	39,010	51,883	58,515	78,020	78,021
8	43,430	57,762	65,145	86,860	86,861
Each Additional	4,420	5,879	6,630	8,840	8,841

## Sliding Fee Scale for San Joaquin County Clinics

### 2019 Federal Poverty Level Based on Monthly Income by Family Size

	<b>\$30 Nominal Fee</b>	<b>\$40 Minimum Fee</b>	<b>\$50 Minimum Fee</b>	<b>\$60 Minimum Fee</b>
<b>Family Size</b>	<b>0-100%</b>	<b>101 - 133%</b>	<b>134 - 150%</b>	<b>151 - 200%</b>
<b>1</b>	\$1,040.83	\$1,384.30	\$1,561.25	\$2,081.66
<b>2</b>	\$1,409.17	\$1,874.20	\$2,113.76	\$2,818.34
<b>3</b>	\$1,777.50	\$2,364.08	\$2,666.25	\$3,555.00
<b>4</b>	\$2,145.83	\$2,853.95	\$3,218.75	\$4,291.66
<b>5</b>	\$2,514.17	\$3,343.85	\$3,771.26	\$5,028.34
<b>6</b>	\$2,882.50	\$3,833.73	\$4,323.75	\$5,765.00
<b>7</b>	\$3,250.83	\$4,323.60	\$4,876.25	\$6,501.66
<b>8</b>	\$3,619.17	\$4,813.50	\$5,428.76	\$7,238.34
<b>Each additional person +8</b>	\$368.33	\$489.88	\$552.50	\$736.66

For persons above 200% of poverty, full charges will be assessed unless patients apply and qualify for other charity discounts.

San Joaquin County Clinic

Potential Conflict of Interest Disclosure Form

Please check ONE of the following boxes:

- ☐ My interests and relationships have not changed since my last disclosure of interests. [Proceed to signature block below. Do not complete the tables.]

**OR**

- ☐ I hereby disclose or update my interests and relationships that could give rise to a conflict of interest: [Complete the table below. Use additional pages as needed.]

Family Relationships	Names of those presenting a potential conflict of interest
Include spouse/domestic partner, living ancestors, brothers and sisters (whether whole or half blood), children (whether natural or adopted), grandchildren, great grand-children, and spouses/ domestic partners of brothers, sisters, children, grandchildren, and great grandchildren	

Type of interest	Description of interest that could lead to a conflict of interest
Transactions or arrangements with the County	
Transactions or affiliations with a health plan (payor) for services at SJGH or SJCC	
Substantial business or investment holdings in health care business or companies doing business with SJ County	
Transactions or affiliations with businesses not listed above who may be vendors of the FQ or SJGH Hospital	

I am not aware of any financial interest involving me or a family member that could present a conflict of interest that I have not disclosed either above or in a previous disclosure statement.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Role at SJCC

<b>SAN JOAQUIN GENERAL HOSPITAL San Joaquin County Clinics</b>	<b>Department of Ambulatory Care Services</b>	<b>Page 1 of 1</b>
	Effective Date	Date Replaces NEW
Title of Policy/Procedure <b>New Board Member</b>		

**Policy:**

Anyone interested in becoming a Board member will complete an application ( ). The board governance committee will receive all applications. The prospective member will be invited to attend at least two board meetings, will then be interviewed by the Governance Committee. Prospective board members will be given a copy of the Governance Work Book to understand their role and the various activities of the Board. The recommendation of the Governance committee will be presented to the board for election to the board.

The Governance committee will arrange an orientation for the new member. IT may include training by staff, committee members and subsequently will be assigned a board member mentor. The mentor will be a contact who can prepare the board member prior to and during meetings. Governance Committee will solicit follow-up from board members post-election and annually thereafter.

New members will be required to complete a Form 700 on Conflict of Interest, a Conflict of Interest disclosure form, and a CMS855A Section 6 Ownership/Management Control Information form. The Conflict of Interest Disclosure will need to be repeated anytime there is a change or annually.

Discussion items for SJCC Board on Committees:

The bylaws specify an Executive Committee, Finance Committee, Audit Committee, and a Nominating Committee. The HRSA surveyor suggested that the Nominating committee be revised to a Governance Committee and absorb the Nominating function. We have also talked about a Quality committee and should add that committee. It should be noted that the audit committee cannot be the finance committee along with other requirements about membership on the audit committee distinct from Finance Committee.

Since you are an eleven member board, and that dictates against too many committees. Let me suggest the following functions & duties for each committee and you can choose how you want to structure it.

Finance Committee is very spelled out in the bylaws.

***Section 7. Finance Committee:*** *The Finance Committee shall be composed of not less than three (3) members, the majority of whom shall be members of the Board of Directors, one of whom shall be the Treasurer, and others appointed by the Board of Directors. All committee members shall have the right to vote. The duties and responsibilities of the Finance Committee shall be*

- (a) To develop and recommend financial policy to the Board of Directors;*
- (b) To review the corporation's annual budgets and to make recommendations thereon to the Board of Directors;*
- (c) To review the monthly financial statements of this corporation, evaluate the corporation's operating performance, and make recommendations to the Board of Directors on both current and long term fiscal affairs;*
- (d) To advise the Board of Directors on methods and procedures which will assure that the financial policies and budgets adopted by the Board of Directors are carried out;*
- (e) To review and advise the Board of Directors on financial feasibility of corporate projects, acts and undertakings referred to it by the Board of Directors; and*
- (f) To advise the Board of Directors on the fundraising activities of the corporation.*

Audit Committee is also.

***Section 8. Audit Committee:*** *The corporation shall have an Audit Committee consisting of at least three (3) directors and may include nonvoting advisors. Directors who are officers of the corporation or who receive, directly or indirectly, any consulting, advisory, or other compensatory fees from the corporation (other*

*than for service as director) may not serve on the audit committee. The Audit Committee shall perform the duties and adhere to the guidelines set forth in the corporation's audit policy guidelines as amended from time to time by the board. Such duties include, but are not limited to:*

- (a) Assisting the Board in choosing an independent auditor and recommending termination of the auditor, if necessary;*
- (b) Negotiating the independent auditor's compensation;*
- (c) Conferring with the independent auditor regarding the corporation's financial affairs; and*
- (d) Reviewing and accepting or rejecting the independent auditor's report.*

*Members of the Audit Committee may be compensated for their service on the Audit Committee in excess of that provided to directors for their service on the board. If the corporation has a Finance Committee, a majority of members of the Audit Committee may not concurrently serve as member of Finance Committee, and the chair of the Audit Committee may not serve on the Finance Committee.*

The Governance Committee is new and absorbs the functions of the Nominating Committee. The nominating function involves soliciting candidates for the Officer position of the board each year and could be broadened to include recruiting, interviewing and orienting new board members. Other functions to add to Governance are the evaluation of the board and how it operates at least annually, bylaws review.

*Governance Committee:* *The Governance Committee shall be composed of not less than three (3) members, the majority of whom shall be members of the Board of Directors. All committee members shall have the right to vote. The duties and responsibilities of the Finance Committee shall be*

- a) To recruit, orient, and train new board members;*
- b) To solicit and present candidates for Board Officers each year;*
- c) Review and make recommendations related to the Bylaws, Articles of Incorporation, and the Co-Applicant agreement; and*
- d) To perform an evaluation of the Board's operations each year.*

Quality Committee would be given responsibility for the quality plan, routine and annual evaluation of quality measures, credentialing & privileging of staff,

*Program & Quality Committee:* *The Program & Quality Committee shall be composed of not less than three (3) members, the majority of whom shall be members of*



*the Board of Directors. All committee members shall have the right to vote. The duties and responsibilities of the Finance Committee shall be*

- a) To Prepare an annual quality improvement program (QIP);*
- b) To evaluate the QIP, all programs and activities of the center;*
- c) To recommend new programs, changes to programs, or reductions in programs; and*
- d) To update on current standards of quality practice.*

REAPPOINTMENTS  
JANUARY 2019

The following practitioners have applied for reappointment to the Medical Staff of San Joaquin General Hospital. This summary includes factors that determine membership: licensure, DEA, professional liability insurance, hospital affiliations, etc. Qualitative/quantitative factors include ongoing performance evaluation which includes data from peer review, quality performance, clinical activity, privileges, competence, technical skill, behavior, health status, medical records, blood review, medication usage, litigation history, utilization and continuity of care. affiliations, physical and mental health status, peer references, and past or pending professional disciplinary action. All the applicants privilege request commensurate with training, experience and current competence unless noted below.

Membership Request	Name	Specialty/ Assigned Div/Dept	Quantitative/Qualitative Factors Request for Privileges and/or Privilege Change	Action Taken/Rec. Exceptions for Cause	Rec. Staff Category/Reappoint Period	Recommend
Reappointment	Harish Chander, MD	Internal Medicine Family Med/PMC	Requirements for Active Staff met.	None	Active 03/2019 to 03/2021	Dept: 01/8/2019 Cred: 01/8/2019 MEC: 01/15/2019
Reappointment	William Holmes, MD	Orthopedic Surgery	Requirements for Active Staff met.	None	Active 03/2019 to 03/2021	Dept: 01/8/2019 Cred: 01/8/2019 MEC: 01/15/2019
Reappointment	Mamta Jain, MD	Pediatric Pediatric	Requirements for Active Staff met.	None	Active 03/2019 to 03/2021	Dept: 01/8/2019 Cred: 01/8/2019 MEC: 01/15/2019
Reappointment	Wei Koh, MD	Surgery Surgery	Requirements for Courtesy Staff met.	None	Courtesy 03/2019 to 03/2021	Dept: 01/8/2019 Cred: 01/8/2019 MEC: 01/15/2019
Reappointment	Louis Lim, MD	OB/GYN OB/GYN	Requirements for Active Staff met.	None	Active 03/2019 to 03/2021	Dept: 01/8/2019 Cred: 01/8/2019 MEC: 01/15/2019
Reappointment	Subrahmanyam Nasika, MD	Nephrology Internal Medicine	Requirements for Courtesy Staff met.	None	Courtesy 03/2019 to 03/2021	Dept: 01/8/2019 Cred: 01/8/2019 MEC: 01/15/2019
Reappointment	Michelle Rowe, DO	Family Medicine Family Medicine	Requirements for Active Staff met.	None	Active 03/2019 to 03/2021	Dept: 01/8/2019 Cred: 01/8/2019 MEC: 01/15/2019

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REAPPOINTMENTS  
JANUARY 2019

Reappointment	Michael Wolterbeek, D.P.M.	Podiatry, Surgery Surgery	Requirements for Active Staff met.	None	Active 03/2019 to 03/2021	Dept: 01/8/2019 Cred: 01/08/2019 MEC: 01/15/2019

ADVANCEMENTS  
JANUARY 2019

The following practitioners are being advanced to their requested staff status to the Medical Staff of San Joaquin General Hospital. This summary includes factors that determine membership: licensure, DEA, professional liability insurance, hospital affiliations, etc. Qualitative/quantitative factors include ongoing performance evaluation which includes data from peer review, quality performance, clinical activity, privileges, competence, technical skill, behavior, health status, medical records, blood review, medication usage, litigation history, utilization and continuity of care.

Name	Specialty/Assigned Div/Dept	Current Category of Membership	Recommended Category	Reason	Recommend
Gordon Arakawa, MD	Radiology Public Health	Provisional	Affiliate	N/A	Dept: 01/8/2019 Cred: 01/08/2019 MEC: 01/15/2019
Thomas Bey, MD	Radiology Surgery	Provisional	Active	Proctoring Complete	Dept: 01/8/2019 Cred: 01/08/2019 MEC: 01/15/2019
Chun Chang, MD	Family Medicine Emergency Department	Provisional	Active	Proctoring Complete	Dept: 01/8/2019 Cred: 01/08/2019 MEC: 01/15/2019
Michael Karachalios, MD	Radiology StatRad Surgery	Provisional	Consulting	Proctoring Complete	Dept: 01/8/2019 Cred: 01/08/2019 MEC: 01/15/2019
Michael Khalili, MD	Radiology StatRad Surgery	Provisional	Consulting	Proctoring Complete	Dept: 01/8/2019 Cred: 01/08/2019 MEC: 01/15/2019
David Lee, MD	Radiology StatRad Surgery	Provisional	Consulting	Proctoring Complete	Dept: 01/8/2019 Cred: 01/08/2019 MEC: 01/15/2019
Kavin Malhotra, MD	Radiology StatRad Surgery	Provisional	Consulting	Proctoring Complete	Dept: 01/8/2019 Cred: 01/08/2019 MEC: 01/15/2019
Karamjit Singh, MD	Psychiatry Internal Medicine	Provisional	Affiliate	N/A	Dept: 01/8/2019 Cred: 01/08/2019 MEC: 01/15/2019





ADVANCEMENTS  
JANUARY 2019

Cynthia Resendez, MD	Psychiatry Internal Medicine	Provisional	Active	Proctoring Complete	Dept: 01/8/2019 Cred: 01/08/2019 MEC: 01/15/2019
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San Joaquin General Hospital Resignation List for 2019

NAME:	REASON FOR RESIGNATION:	EFFECTIVE DATE OF RESIGNATION:
Bonar, Kyle, MD	Resigned	Jan-19
Moore, Kenneth, MD	Resigned	Jan-19
Nguyen, Tan, MD	Resigned	Jan-19
Callow-Myers, Samantha, MD.	Resigned	Jan-19

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CIDP - INITIAL APPOINTMENTS  
JANUARY 2019

The following practitioners have applied for membership and privileges at San Joaquin General Hospital. The following summary includes factors that determine membership: licensure, DEA, professional liability insurance, required certifications (if applicable), etc. Factors that determine competency include medical/professional education, internship/residencies/fellowships, board certification (if applicable), current and previous hospital and other institutional affiliations, physical and mental health status, peer references, and past or pending professional disciplinary action. The applicants meet the requirements for membership unless noted below.

Membership Request	Name	Specialty/ Assigned Div/Dept	Competency / Privilege Review	Proctoring Required	Proctor	Rec Status/Term	Recommend
Initial	Katy Johnston, P.A.	Emergency	Education: Duke University, 2018	Yes	Dr. Kim	Provisional	Dept: 01/04/19 Cred: 01/08/19 MEC: 01/15/19

\*Temporary Privileges

CIDP - REAPPOINTMENTS  
JANUARY 2019

The following practitioners have applied for reappointment to the Medical Staff of San Joaquin General Hospital. This summary includes factors that determine membership: licensure, DEA, professional liability insurance, hospital affiliations, etc. Qualitative/quantitative factors include ongoing performance evaluation which includes data from peer review, quality performance, clinical activity, privileges, competence, technical skill, behavior, health status, medical records, blood review, medication usage, litigation history, utilization and continuity of care. affiliations, physical and mental health status, peer references, and past or pending professional disciplinary action. All the applicants privilege request commensurate with training, experience and current competence unless noted below.

Membership Request	Name	Specialty/ Assigned Div/Dept	Quantitative/Qualitative Factors Request for Privileges and/or Privilege Change	Action Taken/Rec. Exceptions for Cause	Rec. Staff Category/Reappoint Period	Recommend
Reappointment	Robert Boardman, CRNA	Nurse Anesthetists Anesthesia	Requirements for AHP staff met.	None	03/2019 to 03/2021	Dept: 01/04/19 CIDP: 01/04/19 MEC: 01/15/19



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January 17, 2019

San Joaquin General Hospital  
500 W Hospital Rd.  
French Camp, Ca. 95231-9693

Dear San Joaquin General Hospital,

Health Plan of San Joaquin (HPSJ) is happy to inform you that the following providers have completed the HPSJ credentialing process, including peer review and commission approval. The following providers will be active in the HPSJ system effective February 1, 2019.

<b><u>Provider Name</u></b>	<b><u>Effective Date</u></b>
Julienne A. Angeles, MD	February 1, 2019
Marcy C. Goldberg, NP	February 1, 2019
Rachel Ruskin, MD	February 1, 2019
Silvia Pellecer, MPA	February 1, 2019

Please do not provide services to HPSJ members until after your effective date. Claims for services provided prior to the effective date will be denied. If you have any questions, please do not hesitate to contact HPSJ Customer Service at (209) 942-6320.

Sincerely,

Melissa Surgick  
Provider Contracting Department  
Health Plan of San Joaquin

