



SJCC BOARD OF DIRECTORS ATTENDANCE RECORD 2020

2020 Meeting Dates

Member Name	Patient? Yes / No	Joined Board	1/8/20 Board Training	1/28/20	2/25/20	3/31/20	4/28/20	5/26/20	6/30/20	7/28/20	8/25/20	9/29/20	10/27/20	11/24/20	12/29/20
Baskett, Mike	No	2018	AE	P	P	P	P	P	P	P	P	P	AE	P	
Cortez, Ismael	Yes	2011	P	AE	P	P	P	P	P	AE	P	AE	P	AE	
Heck, Brian	No	2019	P	P	P	P	P	P	P	P	P	P	P	P	
Maldonado, Alvin	Yes	2011	AE	AE	AE	P	P	AE	P	P	P	P	AE	P	
Medina, Esgardo	Yes	2018	P	P	P	AE	P	P	P	P	P	P	P	P	
Mills, Mary	No	2010	P	P	AE	P	P	AE	AE	P	AE	P	P	AE	
Place, Rod	No	2010	AE	P	P	P	P	P	P	P	P	P	P	AE	
Sandoval, Luz Maria	Yes	2013	P	P	P	P	P	AE	AE	AE	AE	AE	AE	P	
Scoz, Christopher*	Yes	2020	N/A	N/A	N/A	N/A	N/A	N/A	N/A	P*	P*	P*	P	P	
Toutai, Melanie	No	2019	P	P	P	AE	P	P	AE	AE	P	P	P	AE	
Yonemoto, Alicia	Yes	2014	AE	P	AE	P	P	P	P	P	P	P	P	P	

* Voted on to Board 10/27/2020, guest in July, August and September

CODE P = Present

Code AE = Absence Excused

CODE AU = Absence Unexcused

REAPPOINTMENTS
DECEMBER 2020

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	Sunita Verma, MD	Internal Medicine PMC	Requirements for Active Staff Met	None	02/2021 to 02/2023	CRED: 12/01/2020 MEC: 12/15/2020 Board: 01/05/2021
Reappointment	Joan Seacrist, CNM	Internal Medicine PMC	Requirements for Active Staff Met	None	02/2021 to 02/2023	CRED: 12/01/2020 MEC: 12/15/2020 Board: 01/05/2021

**ADVANCEMENTS
DECEMBER 2020**

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
Robert Assibey, MD	Family Medicine	Provisional	Provisional	6-Month Extension Requested Per: Dr. Rowe	CRED: 12/01/2020 MEC: 12/15/2020 Board: 01/05/2021

RESIGNATIONS
DECEMBER 2020

Name	Reason for Resignation:	Effective Date of Resignation
No Resignations for this month		



Finance Committee
December 28, 2020, 4:00 p.m.

[Join Microsoft Teams Meeting](#)

[+1 209-645-4071](#) United States, Stockton (Toll)

Conference ID: 398 986 650#

Agenda

1.	Call to order	Rod Place	1 min
2.	Approval of Minutes from 11/23/2020	* Rod Place	1 min
3.	Introductions	Rod Place	1 min
4.	Presentation of October Financials	Kris Zuniga	10 mins
5.	Accounts Receivables Status / KPI	Kris Zuniga	10 mins
6.	Adjournment	Rod Place	1 min

*** Action Item**

Next Meeting: January 25, 2021 at 4:00 p.m.

Note: If you need disability-related modification or accommodation to participate in this meeting, please contact Ambulatory Care Services at (209) 468-6757 or (209) 468-6372 at least 48 hours prior to the start of the meeting. Government Code Section 54954.2(a). Materials related to an item on this agenda submitted to the Board after distribution of the agenda packet are available for public inspection by contacting Ambulatory Care Services at 500 W. Hospital Road, French Camp, CA during normal business hours.



San Joaquin County Clinics (SJCC)

Minutes of November 23, 2020
FINANCE Committee Meeting Minutes

San Joaquin County Clinics
Web Conference Call

PRESENT:

Rod Place (SJCC Board Chair); Luz Maria Sandoval (SJCC Board Treasurer); Alicia Yonemoto (SJCC Board Vice-Chair); Esgardo Medina (SJCC Board Member); Dr. Farhan Fadoo (SJCC CEO); Alice Soulligne (SJCC COO); Kristopher Zuniga (SJCC CFO); Chris Roberts (SJGH CFO); Adelé R. Gribble (SJCC OTC)

EXCUSED:

NONE

ABSENT:

David Culberson (SJGH CEO); Greg Diederich (HCS Director); Monica Nino (SJ County Administrator)

AGENDA ITEM	ATTACHMENTS	ACTION
<p>1. <u>Call to Order (Rod Place, SJCC Board Chair)</u></p> <p>The meeting was called to order by Rod Place at 4:04 p.m. A quorum was established for today's meeting. Attendees were notified that this meeting is being recorded.</p>	No Attachments	No Action Required
<p>2. <u>Approval of Minutes of 10/26/2020 (Rod Place, SJCC Board Chair)</u></p> <p>The minutes were reviewed by present board members. Alicia Yonemoto made a motion to approve the minutes from October 26, 2020, Esgardo Medina seconded the motion and all present members unanimously approved the minutes.</p>	(Attachment 2) Finance Committee Meeting Minutes from October 26, 2020	Motion to approve minutes from 10/26/20 – Alicia Yonemoto; Second – Esgardo Medina Committee unanimously approved the minutes.
<p>3. <u>Introductions (Rod Place, SJCC Board Chair)</u></p> <p>There were no introductions for this meeting</p>	No Attachments	No Action Required
<p>4. <u>Presentation of September Financials (Kris Zuniga, SJCC CFO)</u></p> <p>Below are the results for period ending September 30, 2020. For the month of September, we had billable visits of 10,025 visits. Our YTD budget was 26,279 and on a YTD basis, we are at 31,275 with a favorable variance of 4,996 billable visits.</p>	(Attachments 4) SJCC Income Statement As Of 9/30/20	No Action Required

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<p>September yielded approximately \$1.5M in Net Patient Revenue. This is inclusive of an accrual of an annual PPS reconciliation liability. Three months of that accrual equate to \$150K estimated liability to the State.</p> <p>Capitation – \$451K. Total Net Revenue for the month is \$1.9M. On a YTD basis our total net revenue is \$5.7M against a budget of \$4.4M, yielding us a favorable budget variance of \$1.3M. All additional information regarding the income statement can be found in the attachment labeled San Joaquin County Clinics Income Statement As Of September 30, 2020. A separate attachment showing breakdown by clinic is also available for further detail.</p> <p>Total Direct Expenses – \$1,396,012 yielding Net Income before Supplemental Revenues and overhead of \$596,332. Incorporating Accrual for Supplemental revenues and estimated allocated expenses – \$749,401 for the month of September.</p> <p>On a YTD basis – \$1,542,320 against a budget of \$280,000 which yields a favorable budget variance of \$1.276M on the year for the first quarter.</p>	(Attachments 4 cont.) Income Statement For the YTD Ending 09/30/20 Financial Statement Comments Year to Date through September 2020																																																																																																																																																																																																																									
<p>5. <u>Accounts Receivables Status / KPI (Kris Zuniga, SJCC CFO)</u></p> <p>Kris Zuniga presented the PFS Accounts Receivable Aging Analysis for SJCC For the Month of September 2020 (attached and shown below).</p> <table><tr><th colspan="9">PFS Accounts Receivable Aging Analysis For SJCC For the Month of September 2020</th></tr><tr><th>Aging Category</th><th>MediCare</th><th>MediCal</th><th>Commercial</th><th>Self Pay</th><th>Total Aging This Month</th><th>Total Aging Last Month</th><th>\$ Increase (Decrease)</th><th>% Increase (Decrease)</th></tr><tr><td>Accrued Receivables</td><td></td><td></td><td></td><td></td><td>-</td><td>0</td><td>0</td><td>0.00%</td></tr><tr><td>1-30 Days</td><td>85,807</td><td>1,630,549</td><td>76,869</td><td>0</td><td>1,793,226</td><td>1,619,901</td><td>173,325</td><td>10.70%</td></tr><tr><td>31-60 Days</td><td>75,071</td><td>63,683</td><td>70,493</td><td>0</td><td>159,247</td><td>241,810</td><td>(82,562)</td><td>-34.14%</td></tr><tr><td>61-90 Days</td><td>25,034</td><td>53,653</td><td>95,479</td><td>0</td><td>174,166</td><td>352,897</td><td>(178,731)</td><td>-50.65%</td></tr><tr><td>91-120 Days</td><td>101,562</td><td>47,526</td><td>114,192</td><td>0</td><td>263,280</td><td>291,083</td><td>(27,803)</td><td>-9.55%</td></tr><tr><td>121-180 Days</td><td>120,926</td><td>72,617</td><td>189,745</td><td>0</td><td>383,288</td><td>404,207</td><td>(20,919)</td><td>-5.18%</td></tr><tr><td>181-240 Days</td><td>97,784</td><td>13,527</td><td>58,804</td><td>0</td><td>170,115</td><td>606,675</td><td>(436,560)</td><td>-71.96%</td></tr><tr><td>241-270 Days</td><td>76,551</td><td>7,172</td><td>39,255</td><td>(24,042)</td><td>98,936</td><td>320,306</td><td>(221,370)</td><td>-69.11%</td></tr><tr><td>271-365 Days</td><td>108,028</td><td>653,325</td><td>56,408</td><td>45,411</td><td>863,172</td><td>1,156,195</td><td>(293,023)</td><td>-25.34%</td></tr><tr><td>366 Days & Over</td><td>100,054</td><td>504,504</td><td>73,292</td><td>163,647</td><td>841,496</td><td>137,190</td><td>704,307</td><td>513.38%</td></tr><tr><td></td><td>26%</td><td>64%</td><td>8%</td><td>2%</td><td></td><td></td><td></td><td></td></tr><tr><td>Total FC This Month</td><td>740,818</td><td>3,046,556</td><td>774,536</td><td>185,016</td><td>4,746,926</td><td>5,130,262</td><td>(383,336)</td><td>-7.47%</td></tr><tr><td>Total FC Last Month</td><td>879,866</td><td>3,315,307</td><td>738,475</td><td>196,613</td><td>5,130,262</td><td></td><td></td><td></td></tr><tr><td>\$ Increase (Decrease)</td><td>(139,049)</td><td>(268,751)</td><td>36,060</td><td>(11,597)</td><td>(383,336)</td><td></td><td></td><td></td></tr><tr><td>% Increase (Decrease)</td><td>-15.80%</td><td>-8.11%</td><td>4.88%</td><td>-5.90%</td><td>-7.47%</td><td></td><td></td><td></td></tr><tr><td colspan="9">Monthly Management Summary</td></tr><tr><td>September Activity</td><td>Beginning 5,130,262</td><td>Charges 2,329,609</td><td>Payments (1,850,381)</td><td>Adjustments (862,565)</td><td>Ending Gross 4,746,926</td><td colspan="3"></td></tr><tr><td colspan="9">PFS Key Performance Indicators for SJCC</td></tr><tr><td></td><td>September</td><td>August</td><td>July</td><td>June</td><td>May</td><td>April</td><td>March</td><td>Increase (Decrease)</td></tr><tr><td>Gross A/R Days</td><td>66</td><td>72</td><td>79</td><td>101</td><td>104</td><td>130</td><td>92</td><td>(6)</td></tr><tr><td>Net A/R</td><td>1,842,401</td><td>1,979,634</td><td>2,220,764</td><td>2,502,157</td><td>2,297,224</td><td>2,773,469</td><td>2,418,439</td><td>(137,232)</td></tr><tr><td>Net A/R Days</td><td>50</td><td>55</td><td>66</td><td>77</td><td>74</td><td>92</td><td>63</td><td>(5)</td></tr></table>	PFS Accounts Receivable Aging Analysis For SJCC For the Month of September 2020									Aging Category	MediCare	MediCal	Commercial	Self Pay	Total Aging This Month	Total Aging Last Month	\$ Increase (Decrease)	% Increase (Decrease)	Accrued Receivables					-	0	0	0.00%	1-30 Days	85,807	1,630,549	76,869	0	1,793,226	1,619,901	173,325	10.70%	31-60 Days	75,071	63,683	70,493	0	159,247	241,810	(82,562)	-34.14%	61-90 Days	25,034	53,653	95,479	0	174,166	352,897	(178,731)	-50.65%	91-120 Days	101,562	47,526	114,192	0	263,280	291,083	(27,803)	-9.55%	121-180 Days	120,926	72,617	189,745	0	383,288	404,207	(20,919)	-5.18%	181-240 Days	97,784	13,527	58,804	0	170,115	606,675	(436,560)	-71.96%	241-270 Days	76,551	7,172	39,255	(24,042)	98,936	320,306	(221,370)	-69.11%	271-365 Days	108,028	653,325	56,408	45,411	863,172	1,156,195	(293,023)	-25.34%	366 Days & Over	100,054	504,504	73,292	163,647	841,496	137,190	704,307	513.38%		26%	64%	8%	2%					Total FC This Month	740,818	3,046,556	774,536	185,016	4,746,926	5,130,262	(383,336)	-7.47%	Total FC Last Month	879,866	3,315,307	738,475	196,613	5,130,262				\$ Increase (Decrease)	(139,049)	(268,751)	36,060	(11,597)	(383,336)				% Increase 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<p>6. <u>Adjournment (Rod Place, SJCC Board Chair)</u></p> <p>There being no further topics of discussion, Rod Place adjourned the meeting at 4:33 p.m.</p>	No Attachments	No Action Required																																																																																																																																																																																																																								



San Joaquin County Clinics
Financial Statement Comments
Year to Date through October 2020

Summary of Clinics Year to Date

Billable visits through October were favorable to budget by 4,184 visits, or 11.4% greater than budget. Net patient revenues are \$1.1MM greater than budget primarily associated with large Medi-Cal Code 18 increases effective July 15, 2020 and greater than expected visits. A liability associated with the annual PPS reconciliation is being accrued at \$50K per month. October financials include a year-to-date PPS reconciliation liability accrual of \$200,000.

Year-to-date capitation is in line with budget exhibiting a minimal unfavorable variance of \$39,187. In October, 340B Pharmacy Program revenue is recognized for \$69,298 and the program related expenses for \$20,394 are included in the Other Expenses category on the financials. Also, Other Revenue includes Grants Revenue for Essential Access Title X and First Responder program for \$137,822 and \$75,600 respectively. Thus, total net revenues are greater than budget by \$1,327,289.

Salaries and benefits expenses are greater than budget by \$266,293, or 5.8%. This unfavorable variance can be attributed to the greater than expected patient volumes and associated staffing adjustments.

Other operating expenses exhibit a year-to-date favorable variance of \$174,649 largely due to a professional fees unfavorable variance of \$61,805 mainly offset by favorable variances in supplies and purchased services of \$180,156 and \$30,011, respectively.

The Clinic financials include conservative, estimated FYTD supplemental revenues earned by the Clinics in the amount of \$2,456,331 for the Quality Incentive Program.

Unaudited net income inclusive of the estimated overhead allocation is \$1,931,569 on a year-to-date basis which is greater than budget by \$1,205,401.

Additional Factors Impacting Clinic Performance Presentation

- Estimated hospital overhead allocated to the clinics has been changed to 33% of direct expenses.

San Joaquin County Clinics
Income Statement
As of October 31, 2020

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Year to Date			
													YTD Actual	YTD Budget	Variance	% Var
Total Visits	13,515	11,195	11,861	11,509									48,080	38,296	9,784	25.5%
Billable Visits	11,569	9,681	10,025	9,469									40,744	36,560	4,184	11.4%
Patient Revenue																
Medicare	131,541	27,929	28,358	14,081									201,908	1,047,991	(846,083)	-80.7%
Medi-Cal Fee-for-Service	460,856	229,265	224,964	30,912									945,998	1,143,263	(197,265)	-17.3%
Medi-Cal Managed Care	2,062,848	1,356,553	1,133,058	1,026,908									5,579,366	6,954,849	(1,375,483)	-19.8%
Insurance	51,883	56,976	64,627	62,078									235,564	95,272	140,292	147.3%
Self Pay	(5,622)	63,105	29,973	72,068									159,524	285,816	(126,291)	-44.2%
Indigent	0	0	0	0									0	0	0	#DIV/0!
Gross Patient Revenue	2,701,507	1,733,829	1,480,979	1,206,047	0	0	0	0	0	0	0	0	7,122,360	9,527,190	(2,404,830)	-25.2%
Contractual Adjustments	(1,387,128)	(88,489)	115,869	(68,780)									(1,428,527)	(4,913,628)	3,485,101	70.9%
PPS Reconciliation	0	(100,000)	(50,000)	(50,000)									(200,000)	(200,000)	0	0.0%
Other Allowances	(4,083)	4,231	(4,528)	(124)									(4,504)	(7,988)	3,484	43.6%
Net Patient Revenue	1,310,296	1,549,571	1,542,320	1,087,142	0	0	0	0	0	0	0	0	5,489,329	4,405,575	1,083,755	24.6%
Other Revenue																
Incentives & Pay-For-Performance Revenues													0	0	0	#DIV/0!
Capitation Revenue	444,084	442,220	451,024	448,657									1,785,986	1,825,173	(39,187)	-2.1%
Grant Revenue				137,822									137,822	0	137,822	
First Responder Program				75,600									75,600	0	75,600	
CARES Funding													0	0	0	
Pharmacy Revenue				69,298									69,298	0	69,298	
Meaningful Use													0	0	0	
Total Other Revenue	444,084	442,220	451,024	731,378	0	0	0	0	0	0	0	0	2,068,706	1,825,173	243,533	13.3%
Total Net Revenue	1,754,381	1,991,791	1,993,344	1,818,520	0	0	0	0	0	0	0	0	7,558,035	6,230,747	1,327,288	21.3%
Operating Expense																
Salaries	707,163	914,327	677,400	854,126									3,153,016	2,551,919	(601,097)	-23.6%
Benefits	449,333	425,283	417,536	400,697									1,692,849	2,027,653	334,804	16.5%
Total Salaries & Benefits	1,156,496	1,339,609	1,094,936	1,254,824	0	0	0	0	0	0	0	0	4,845,865	4,579,572	(266,293)	-5.8%
Professional Fees/Registry	132,092	153,275	13,416	104,222									403,005	341,200	(61,805)	-18.1%
Supplies	23,268	35,037	48,371	18,177									124,852	305,009	180,156	59.1%
Purchased Services	65,997	134,024	190,644	133,116									523,780	553,791	30,011	5.4%
Depreciation	18,745	18,745	18,745	18,745									74,980	90,497	15,517	17.1%
Other Expense	35,155	20,421	30,900	18,333									104,809	115,578	10,769	9.3%
Total Direct Expense	1,431,752	1,701,111	1,397,012	1,547,416	0	0	0	0	0	0	0	0	6,077,291	5,985,647	(91,644)	-1.5%
Net Income (Loss)	322,628	290,680	596,332	271,104	0	0	0	0	0	0	0	0	1,480,744	245,101	1,235,644	-504.1%
Revenues from Supplemental Sources																
Public Hospital Redesign and Incentives in Medi-Cal (PRIME) Quality Incentive Program (QIP)	614,083	614,083	614,083	614,083									0	0	0	
													2,456,331	2,456,331	0	
Overhead Allocation	472,478	561,367	461,014	510,647	0	0	0	0	0	0	0	0	2,005,506	1,975,263	(30,243)	-1.5%
Net Income (Loss) w/ OH Allocation	464,233	343,396	749,401	374,540	0	0	0	0	0	0	0	0	1,931,569	726,168	1,205,401	-166.0%

Key Ratios																				
Gross Pt Revenue/Billable Visit	\$	233.51	\$	179.10	\$	147.73	\$	127.37					\$	174.81	\$	260.59	\$	(85.78)		-32.9%
Net Patient Service Revenue/Billable Visit	\$	151.64	\$	205.74	\$	198.84	\$	162.19					\$	178.56	\$	170.43	\$	8.14		4.8%
Direct Costs/Billable Visit	\$	123.76	\$	175.72	\$	139.35	\$	163.42					\$	149.16	\$	163.72	\$	14.56		8.9%
Indirect Costs/Billable Visit	\$	40.84	\$	57.99	\$	45.99	\$	53.93					\$	49.22	\$	54.03	\$	4.81		8.9%
Total Medical Cost/Billable Visit	\$	164.60	\$	233.70	\$	185.34	\$	217.35					\$	198.38	\$	217.75	\$	19.37		8.9%
Net Income(Loss)/Billable Visit	\$	40.13	\$	35.47	\$	74.75	\$	39.55					\$	47.41	\$	19.86	\$	(27.55)		-138.7%
Total Cost/Patient (1)	\$	411.49	\$	584.26	\$	463.35	\$	543.37					\$	495.95	\$	544.37	\$	48.42		8.9%
Net Pt Rev as % of Gross Rev		48.5%		89.4%		104.1%		90.1%						77.1%		46.2%		30.8%		66.7%
Total Net Rev as % of Gross Rev		64.9%		114.9%		134.6%		150.8%						106.1%		65.4%		40.7%		62.3%
Benefits as a % of Salaries		63.5%		46.5%		61.6%		46.9%						53.7%		79.5%		25.8%		32.4%
Overhead % of Direct Exp		33.0%		33.0%		33.0%		33.0%						33.0%		33.0%		0.0%		0.0%

San Joaquin General Hospital-FQHC LAL Clinics
Income Statement
For the YTD Ending
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	Children's Health Services (#7080)	Family Medicine (#7092)	Family Practice - Ca (#7093)	Primary Medicine (#7096)	Healthy Beginnings - Ca (#7182)	Healthy Beginnings French Camp (#7183)	Hazleton Clinic (#7184)	Manteca Clinic (#7185)	FQ Grants	FQ Admin (#7071)	Total	YTD Budget	YTD Variance - Fav (Unf)	% Var - Fav (Unf)
Total Visits	7,111	15,088	1,263	16,649	5,886	2,083	0	0	-	-	48,080	38,296	9,784	25.5%
Billable Visits	6,213	9,428	1,198	15,953	5,880	2,074	0	0	-	-	40,746	36,560	4,186	11.4%
Productive FTEs (Provider)	4.2	2.6	1.1	9.2	3.9	1.6	0.0	0.0	0.0	0.0	22.7	20.0	(2.7)	-13.5%
Productive FTEs (Non-Provider)	7.5	10.3	4.3	7.6	4.9	2.8	0.0	0.0	11.3	11.3	48.7	75.5	26.8	35.5%
Total FTEs	11.7	12.9	5.4	16.8	8.8	4.5	0.0	0.0	11.3	11.3	71.4	95.5	24.1	25.2%
Total Hours/Visit	2.19	5.36	1.56	2.58	2.23	1.92	-	-	0.00	0.00	2.67	2.72	0.05	1.8%
Patient Revenue														
Medicare	1,182	66,090	10,044	104,494	15,764	5,676	(819)	(521)	0	0	201,908	1,047,991	(846,082)	-80.7%
Medi-Cal	259,262	150,423	17,337	171,617	256,629	76,192	2,149	12,390	0	0	945,998	1,143,263	(197,265)	-17.3%
Medi-Cal Managed Care	1,709,589	1,026,502	185,036	1,632,439	777,778	240,637	814	6,573	0	0	5,579,366	6,954,849	(1,375,483)	-19.8%
Insurance	17,546	60,457	1,936	134,353	6,711	13,580	3,224	(2,244)	0	0	235,564	95,272	140,292	147.3%
Self Pay	21,193	37,501	7,746	64,470	31,170	13,759	(3,713)	(12,602)	0	0	159,524	285,816	(126,292)	-44.2%
Indigent	0	0	0	0	0	0	0	0	0	0	0	0	0	#DIV/0!
Gross Revenue	2,008,772	1,340,973	222,099	2,107,373	1,088,051	349,844	1,654	3,596	0	0	7,122,360	9,527,190	(2,404,831)	-25.2%
Contractual Adjustments	(659,382)	(89,711)	(92)	(574,839)	(182,381)	201,455	(31,146)	(92,438)	0	0	(1,428,533)	(2,407,749)	979,217	40.7%
PPS Reconciliation	(35,384)	(53,731)	(13,105)	(51,110)	(20,714)	(25,956)	0	0	0	0	(200,000)	(200,000)	0	0.0%
Other Allowances	151	(1,094)	(5,574)	529	(156)	(21)	0	1,667	0	0	(4,498)	(7,988)	3,490	43.7%
Net Patient Revenue	1,314,157	1,196,436	203,329	1,481,952	884,800	525,323	(29,492)	(87,175)	0	0	5,489,329	4,405,575	1,083,754	24.6%
Incentives & Pay-For-Performance Revenues											0	0	0	
Pharmacy Revenue									69,298	69,298	69,298	0	69,298	
Physician Capitation- PMPM	312,436	406,970	56,149	668,247	251,665	90,519	0	0			1,785,986	1,825,173	(39,187)	-2.1%
	1,626,593	1,603,407	259,477	2,150,199	1,136,465	615,842	(29,492)	(87,175)		69,298	7,344,613	6,230,747	1,113,865	17.9%
Other Revenue	0	0	0	0	0	0			213,422	0	213,422	0	213,422	100.0%
Total Operating Revenue	1,626,593	1,603,407	259,477	2,150,199	1,136,465	615,842	(29,492)	(87,175)	213,422	69,298	7,558,035	6,230,747	1,327,287	21.3%
Expenses														
Salaries	477,259	411,767	247,128	779,151	370,694	190,699	0	0	118,614	557,704	3,153,016	2,551,919	(601,097)	-23.6%
Benefits	276,731	229,164	166,126	301,801	195,498	124,231	0	0	46,034	353,265	1,692,849	2,027,653	334,804	16.5%
Total Salaries & Benefits	753,990	640,931	413,254	1,080,952	566,191	314,930	0	0	164,648	910,968	4,845,865	4,579,572	(266,293)	-5.8%
Professional Fees/Registration	17,475	82,923	0	66,744	0	0	0	0	0	235,863	403,005	341,200	(61,805)	-18.1%
Supplies	10,444	24,087	6,155	35,774	37,488	20,085	0	0	0	(9,181)	124,852	305,009	180,156	59.1%
Purchased Services	13,332	475	6,161	338	7,568	370	0	0	0	495,535	523,780	553,791	30,011	5.4%
Depreciation	2,457	7,436	598	543	4,553	9,620	0	0	0	49,773	74,980	90,497	15,517	17.1%
Other Expense	17,743	7,344	10,287	1,651	13,989	2,794	0	0	2,800	48,200	104,809	115,578	10,769	9.3%
Total Expenses	815,441	763,196	436,455	1,186,003	629,790	347,799	0	0	167,448	1,731,158	6,077,291	5,985,647	(91,644)	-1.5%
Allocation of Direct Admin Exp	488,611	326,177	54,023	512,595	264,656	85,096	0	0	0	(1,731,158)	0	0	0	0.0%
Total Expenses excl Hosp OH	1,304,053	1,089,373	490,478	1,698,598	894,447	432,894	0	0	167,448	-	6,077,291	5,985,647	(91,644)	-1.5%
Profit/(Loss) before Hosp OH	322,540	514,034	(231,001)	451,601	242,018	182,947	(29,492)	(87,175)	45,974	69,298	1,480,745	245,101	1,235,645	-504.1%
Revenues from Supplemental Sources														
Public Hospital Redesign and Incentives in Medi-Cal (PRIME)											0	0	0	
Quality Incentive Program (QIP)	429,705	559,721	77,223	919,064	346,124	124,494					2,456,331	2,456,331	0	0.0%
Overhead Allocation	430,337	359,493	161,858	560,537	295,167	142,855	0	0	55,258	0	2,005,506	1,975,263	(30,243)	-1.5%
Net Income (Loss)	321,908	714,262	(315,636)	810,128	292,975	164,586	(29,492)	(87,175)	(9,284)	69,298	1,931,569	726,168	1,205,402	166.0%

San Joaquin General Hospital-FQHC LAL Clinics
Income Statement
For the YTD Ending
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	<u>Children's</u> <u>Health Services</u> <u>(#7080)</u>	<u>Family</u> <u>Medicine</u> <u>(#7092)</u>	<u>Family Practice</u> <u>Calif St (#7093)</u>	<u>Primary</u> <u>Medicine</u> <u>(#7096)</u>	<u>Healthy</u> <u>Beginnings</u> <u>California</u> <u>Street (#7182)</u>	<u>Healthy</u> <u>Beginnings</u> <u>French Camp</u> <u>(#7183)</u>	<u>FQ Admin</u>	<u>Total</u>	<u>YTD Budget</u>	<u>YTD Variance</u>	<u>% Var - Fav</u> <u>(Unf)</u>
Key Ratios											
Net Pt Rev as % of Gross Rev	65.4%	89.2%	91.5%	70.3%	81.3%	150.2%	0.0%	77.1%	46.2%	30.8%	66.7%
Total Net Rev as % of Gross Rev	81.0%	119.6%	116.8%	102.0%	104.4%	176.0%	0.0%	103.1%	65.4%	37.7%	57.7%
Benefits as a % of Salaries	58.0%	55.7%	67.2%	38.7%	52.7%	65.1%	63.3%	53.7%	79.5%	25.8%	32.4%
Overhead % of Direct Expenses	52.8%	47.1%	37.1%	47.3%	46.9%	41.1%	0.0%	33.0%	33.0%	0.0%	0.0%
Gross Revenue per Billable Visit	323.32	142.23	185.39	132.10	185.04	168.68	0.00	174.80	260.59	(85.79)	-32.9%
Net Revenue per Billable Visit	261.80	170.07	216.59	134.78	193.28	296.93	0.00	185.49	170.43	15.07	8.8%
Direct Costs/Billable Visit	131.25	80.95	364.32	74.34	107.11	167.69	0.00	149.15	163.72	14.57	8.9%
Indirect Costs/Billable Visit	69.26	38.13	135.11	35.14	50.20	68.88	0.00	49.22	54.03	4.81	8.9%
Total Medical Cost/Billable Visit	200.51	119.08	499.43	109.48	157.31	236.57	0.00	198.37	217.75	19.38	8.9%
Total Cost/Patient (1)	501.28	297.70	1,248.57	273.70	393.26	591.43	0.00	495.93	544.37	48.45	8.9%
Net Income(Loss)/Billable Visit	51.81	75.76	(263.47)	50.78	49.83	79.36	0.00	47.41	19.86	27.54	-138.7%
Payer Mix											
Medicare	0.1%	4.9%	4.5%	5.0%	1.4%	1.6%	0.0%	2.8%	11.0%	-8.2%	-74.2%
Medi-Cal	12.9%	11.2%	7.8%	8.1%	23.6%	21.8%	0.0%	13.3%	12.0%	1.3%	10.7%
Medi-Cal Managed Care	85.1%	76.5%	83.3%	77.5%	71.5%	68.8%	0.0%	78.3%	73.0%	5.3%	7.3%
Insurance	0.9%	4.5%	0.9%	6.4%	0.6%	3.9%	0.0%	3.3%	1.0%	2.3%	230.7%
Self Pay / Indigent	1.1%	2.8%	3.5%	3.1%	2.9%	3.9%	0.0%	2.2%	3.0%	-0.8%	-25.3%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	0.0%	100.0%	100.0%	0.0%	0.0%

(1) Average Visits per Patient is 2.5; per a study conducted by the ACS Director

PFS Accounts Receivable Aging Analysis For SJCC For the Month of October 2020								
Aging Category	MediCare	MediCal	Commercial	Self Pay	Total Aging This Month	Total Aging Last Month	\$ Increase (Decrease)	% Increase (Decrease)
Accrued Receivables					-	0	0	0.00%
1-30 Days	112,519	1,615,287	93,636	369	1,821,811	1,793,226	28,585	1.59%
31-60 Days	51,643	157,825	77,469	0	286,936	159,247	127,689	80.18%
61-90 Days	17,380	46,418	67,585	256	131,639	174,166	(42,527)	-24.42%
91-120 Days	20,323	42,757	92,707	314	156,101	263,280	(107,179)	-40.71%
121-180 Days	95,310	100,670	222,198	422	418,599	383,288	35,312	9.21%
181-240 Days	32,265	15,470	91,710	0	139,445	170,115	(30,670)	-18.03%
241-270 Days	50,294	7,117	16,935	21	74,367	98,936	(24,569)	-24.83%
271-365 Days	87,923	158,900	32,221	24,081	303,124	863,172	(560,048)	-64.88%
366 Days & Over	84,637	279,987	50,946	121,127	536,696	841,496	(304,800)	-36.22%
Total FC This Month	26% 552,293	64% 2,424,429	8% 745,407	2% 146,590	3,868,720	4,746,926	(878,206)	-18.50%
Total FC Last Month	740,818	3,046,556	774,536	185,016	4,746,926			
\$ Increase (Decrease)	(188,524)	(622,127)	(29,129)	(38,426)	(878,206)			
% Increase (Decrease)	-25.45%	-20.42%	-3.76%	-20.77%	-18.50%			
Monthly Management Summary								
October Activity	Beginning 4,746,926	Charges 2,456,901	Payments (1,596,943)	Adjustments (1,738,164)	Ending Gross 3,868,720			
PFS Key Performance Indicators for SJCC								
	October	September	August	July	June	May	April	Increase (Decrease)
Gross A/R Days	51	66	72	79	101	104	130	(15)
Net A/R	1,858,543	1,842,401	1,979,634	2,220,764	2,502,157	2,297,224	2,773,469	16,142
Net A/R Days	39	50	55	66	77	74	92	(10)

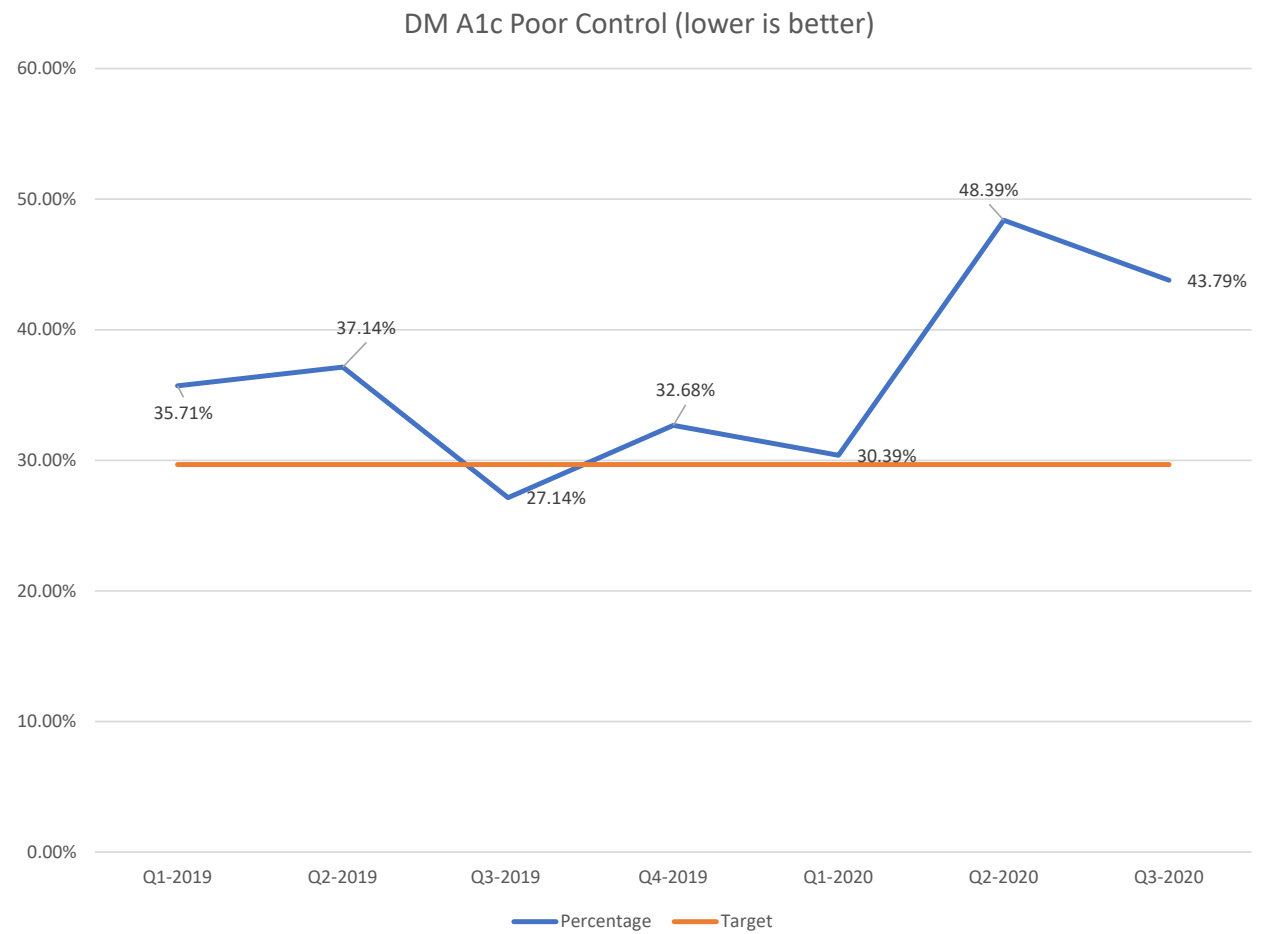
AVERAGE COLLECTION TIME ON PAID ACCOUNTS BY DATE OF SERVICE

Row Labels	Average of Service to Claim	Average of Claim to Payment	Average of Collection Time
2020-01	12.84	99.76	112.60
2020-02	7.28	89.87	97.15
2020-03	5.58	72.95	78.53
2020-04	12.00	56.14	68.13
2020-05	7.79	26.46	34.25
2020-06	8.10	32.40	40.49
2020-07	10.13	19.56	29.69
2020-08	8.71	25.24	33.95
2020-09	6.45	19.14	25.60
2020-10	5.86	16.46	22.32
Grand Total	8.96	60.50	69.46

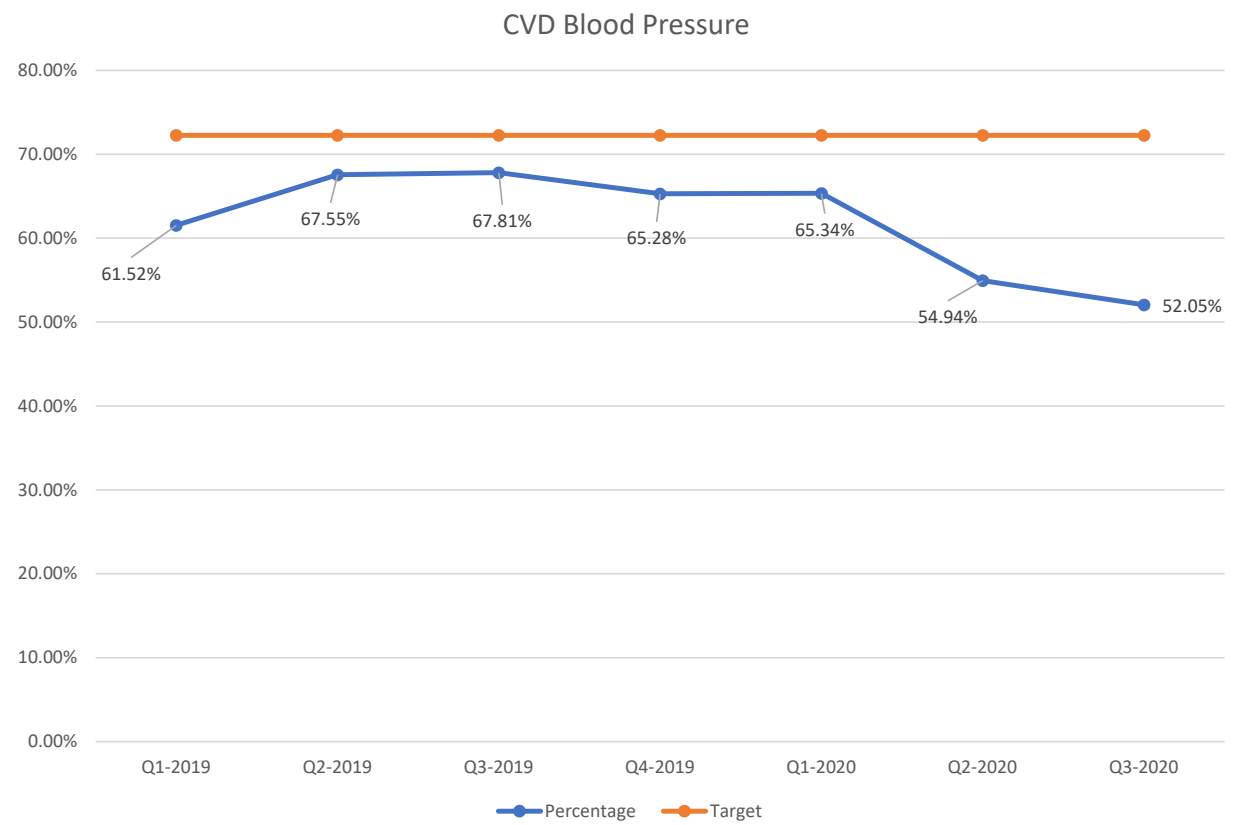
SJCC- Q3 Clinical Quality Report (Period ended 09/30/2020)

		Q3 2020	Q2 2020	Q1 2020	Target
DM A1c Control	Outcome	43.79%	48.39%	30.39%	29.68%
CVD BP Control	Outcome	52.05%	54.94%	65.34%	72.26%
Pap Screening	Process	55.71%¥	51.43%¥	54.29%¥	61.00%
Prenatal Care in 1st Trimester	Process	63.79%	64.98%	70.08%	84.80%
Birth Weight < 2500 gm	Outcome	10.98%	9.32%	8.64%	7.80%
Pediatric Immunizations	Process	54.29%¥	38.57%¥	25.71%¥	39.44%
Pediatric Dental Referrals (non-UDS)	Process	77.14%¥	85.71%¥	78.57%¥	33.20%
Pediatric BMI Screening and Intervention	Process	44.73%	36.71%	61.43%¥	54.70%
Adult BMI Screening and Intervention	Process	16.22%	17.02%	20.00%¥	53.60%
Tobacco Use Screening and Intervention	Process	68.57%¥	75.74%¥	84.29%¥	88.09%
CVD Lipid Therapy	Process	84.89%	84.89%	85.71%¥	85.00%
IVD Aspirin Therapy	Process	93.08%	90.91%	82.70%	80.86%
Colorectal Cancer Screening	Process	38.57%¥	70.00%¥	60.00%¥	62.86%
HIV Linkage to Care*	Process	66.67%	100.00%	50.00%	85.55%
Depression Screening and Follow-up	Process	37.14%¥	40%¥	61.43%¥	76.35%

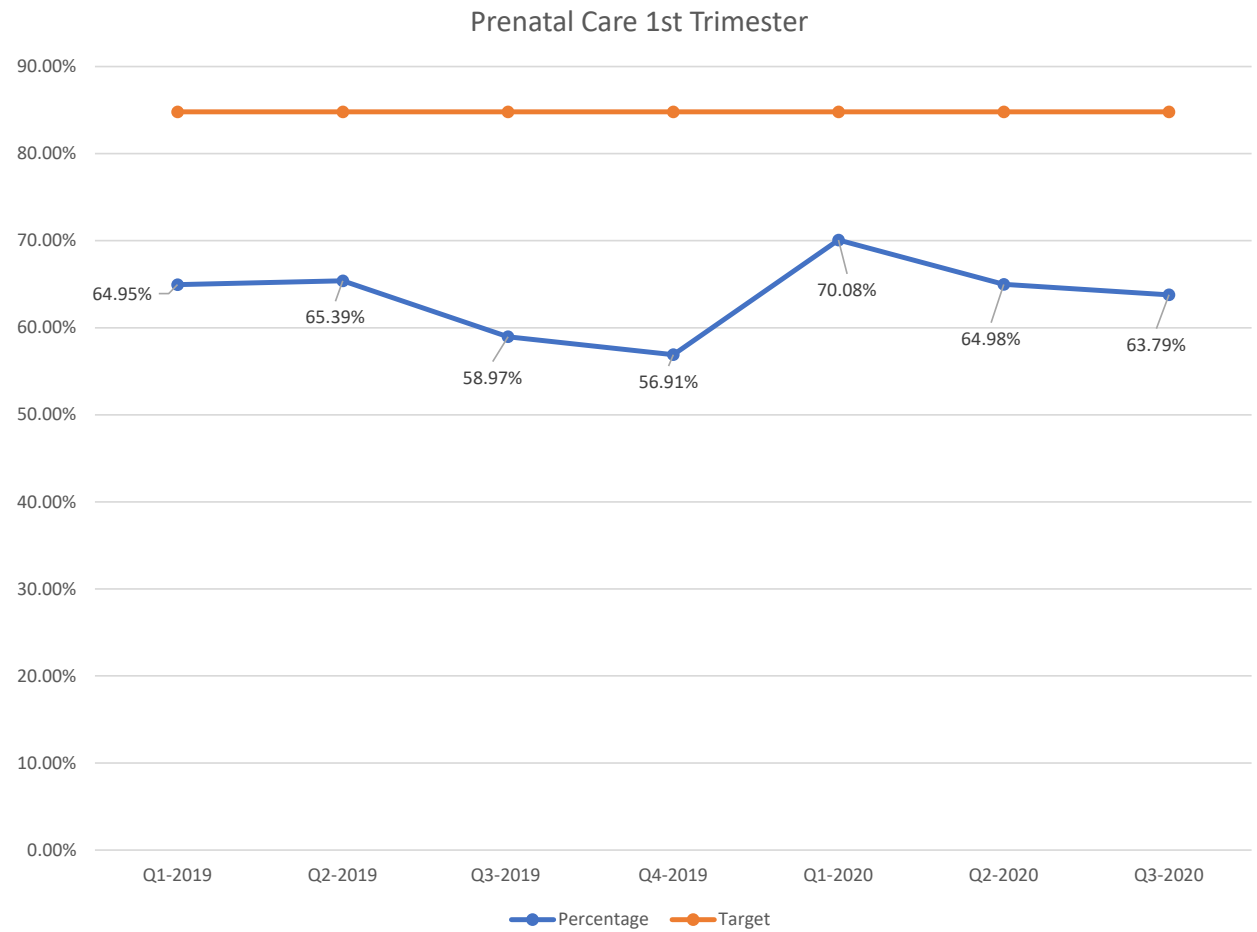
Comprehensive Diabetes Care (CDC)



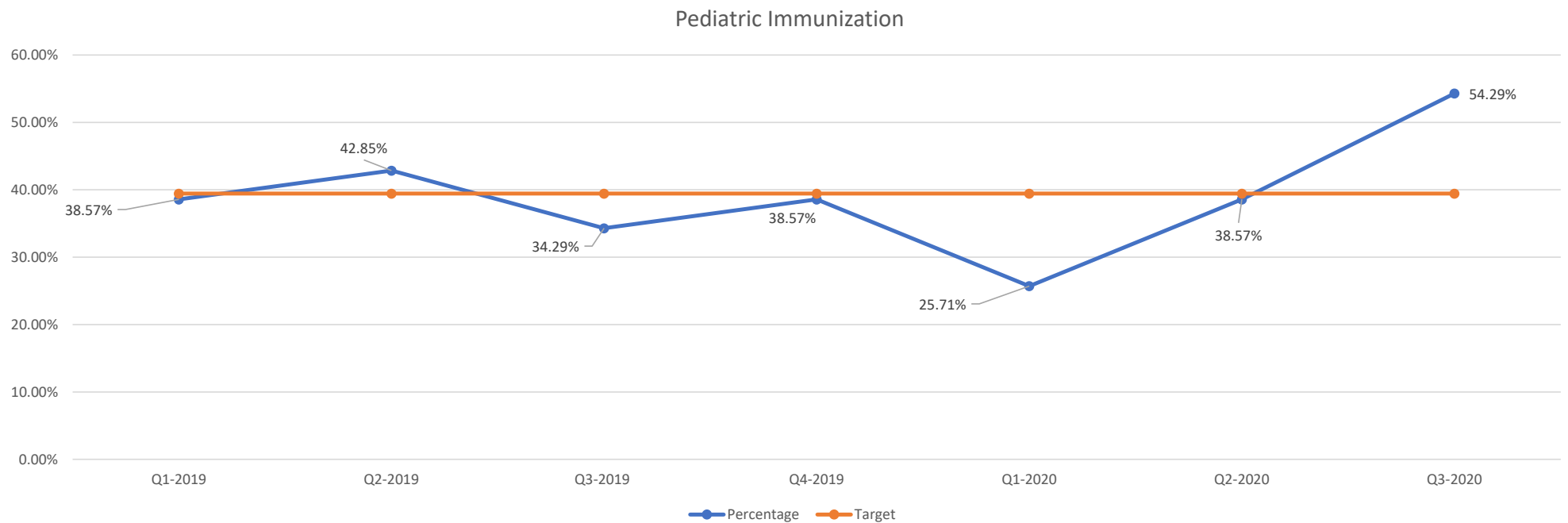
Cardiovascular disease (CVD)- BP



Prenatal Care

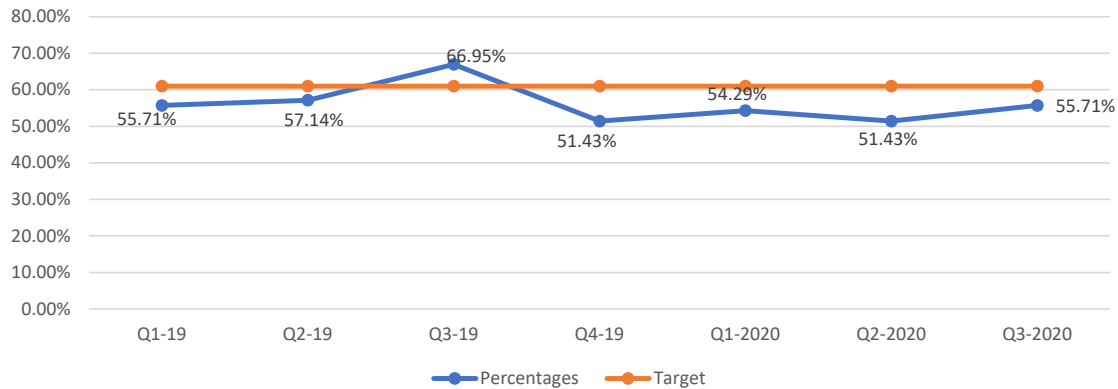


Pediatric Immunization

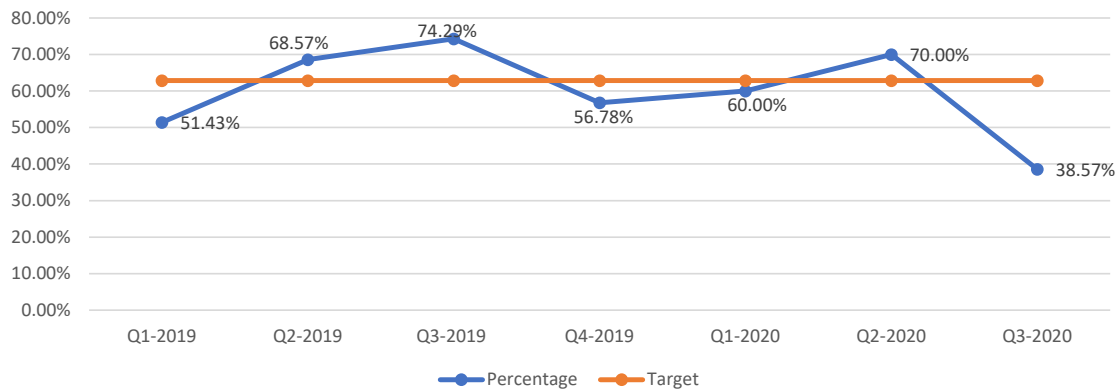


Preventive Cancer Screenings

Cervical Cancer Screening



Colorectal Cancer Screening



8

San Joaquin County Clinics Quality Improvement/Quality Assurance



FISCAL SOLUTIONS LLC

Susan Thorner, MHSA
December 29, 2020

Learning Objectives

- ▶ To understand BPHC's requirements re quality improvement/quality assurance
- ▶ To increase the board's understanding of/confidence with QI/QA &
- ▶ To understand the board role & responsibilities re QI/QA.

Interactive Exercise



Summary of BPHC Requirements re QI/QA

- ▶ The health center must have an ongoing QI/QA system that includes clinical services & [clinical] management.
- ▶ The health center must maintain the confidentiality of patient records, including all information as to personal facts & circumstances obtained by the health center staff about recipients of services. Specifically, the health center must not divulge such information without the individual's consent except as may be required by law or as may be necessary to provide service to the individual or to provide for medical audits by the Secretary of HHS or his/her designee with appropriate safeguards for confidentiality of patient records.

Summary of BPHC Requirements re QI/QA

The health center's ongoing QI/QA system must provide for all of the following:

- ▶ Organizational arrangements, including a focus of responsibility, to support the quality assurance program & the provision of high quality patient care; &
- ▶ Periodic assessment of the appropriateness of the utilization of services & the quality of services provided or proposed to be provided to individuals served by the center. Such assessments must:
 - Be conducted by physicians or by other licensed health professionals under the supervision of physicians;
 - Be based on the systematic collection & evaluation of patient records;
 - Assess patient satisfaction, achievement of project objectives & include a process for hearing & resolving patient grievances; and
 - Identify & document the necessity for change in the provision of services by the center & result in the institution of such change, where indicated.

Demonstrating Compliance

A health center would demonstrate compliance with these requirements by fulfilling the following: (See HRSA Compliance Manual for complete list)

- ▶ The health center has a board-approved policy(ies) that establishes a QI/QA program.¹ This QI/QA program addresses the following:
 - The quality & utilization of health center services;
 - Patient satisfaction & patient grievance processes; &
 - Patient safety, including adverse events.
- ▶ The health center designates an individual(s) to oversee the QI/QA program established by board-approved policy(ies). Responsibilities include, but are not limited to, ensuring the implementation & updating of QI/QA operating procedures & monitoring outcomes of key performance measures.

Demonstrating Compliance

The health center has operating procedures or processes that address all of the following:

- ▶ Adhering to current evidence-based clinical guidelines, standards of care & standards of practice in the provision of health center services, as applicable;
- ▶ Identifying, analyzing & addressing patient safety & adverse events & implementing follow-up actions, as necessary;
- ▶ Assessing patient satisfaction;
- ▶ Hearing & resolving patient grievances;
- ▶ Completing periodic QI/QA assessments on at least a quarterly basis to inform the modification of the provision of health center services, as appropriate; &
- ▶ Producing & sharing reports on QI/QA to support decision-making & oversight by key management staff & by the governing board regarding the provision of health center services.

Demonstrating Compliance

The health center's physicians or other licensed health care professionals conduct QI/QA assessments on at least a quarterly basis, using data systematically collected from patient records, to ensure:

- ▶ Provider adherence to current evidence-based clinical guidelines, standards of care & standards of practice in the provision of health center services, as applicable; &
- ▶ The identification of any patient safety and adverse events & the implementation of related follow-up actions, as necessary.

Demonstrating Compliance

- ▶ The health center maintains a retrievable health record, the format & content of which is consistent with both Federal & state & requirements.
- ▶ The health center has implemented systems (for example, certified EHRs & corresponding standard operating procedures) for protecting the confidentiality of patient information & safeguarding this information against loss, destruction, or unauthorized use, consistent with Federal & state requirements.

The Board Role & Responsibilities

- ▶ The Board is responsible for reviewing approving the QI/QA ***policy(ies)*** at least once every 3 years.
- ▶ The board periodically reviews a summary of patient grievances, patient satisfaction surveys, patient safety & adverse events & ensures follow-up actions are implemented.

Resources

- ▶ The Health Center Program Compliance Manual
<https://bphc.hrsa.gov/programrequirements/compliancemanual/>
- ▶ The Operational Site Visit Protocol
<https://bphc.hrsa.gov/programrequirements/svprotocol>
- ▶ The Quality Academy(free)
<https://targethiv.org/library/quality-academy>



► Questions?

Item 9.

**San Joaquin County Clinics
Legislative Update
December 29, 2020**

1. State legislature is out of session. Currently scheduled to reconvene January 11.
2. At the federal level, the 116th Congress remains in session through January 3, 2021 with the 117th Congress convening January 3, 2021.

FEDERAL ACTIVITY

New Government Funding and COVID-19 Relief Package Passes Congress

On December 21, Congress passed a \$1.4 trillion spending package to fund the government and other programs and a \$900 billion COVID-19 relief package. President Trump signed this \$2.3 trillion package into law this past Sunday night, averting a government shutdown that was set to begin today (Tuesday).

Government Funding Bill

The \$1.4 trillion government funding bill is full of many items including the following items of direct importance for community health centers:

- 3 years of Mandatory Funding from FY2021 to FY2023 at \$4 billion dollars per year
- \$1.7 billion in Discretionary Funding (appropriations) for FY2021

SJCC is working to determine if and how Look-Alikes might be eligible for any of this funding.

COVID-19 Relief Bill

The President's signature of the \$900 billion COVID Relief Bill extends unemployment benefits for millions of jobless gig-workers and independent contractors, as well as the long-term unemployed.

The estimated 12 million people in two key pandemic unemployment programs, who were facing their last payment this past weekend, will now receive benefits for another 11 weeks. Plus, all those collecting jobless payments will receive a \$300 weekly federal boost through mid-March.

The President signaled in a statement Sunday night that he signed the coronavirus relief bill only after securing a commitment for the Senate to consider legislation to increase stimulus checks from \$600 to \$2,000.

In addition to these much more highly publicized unemployment benefits and stimulus payments, the COVID Relief Bill includes several items of direct relevance to San Joaquin County Clinics, San Joaquin General Hospital, and their patients and staff including the following:

\$73 Billion to Department of Health and Human Services to support public health; research, development, manufacturing, procurement, and distribution of vaccines and therapeutics; diagnostic

testing and contact tracing; mental health and substance abuse prevention and treatment services; childcare support; and other activities related to coronavirus, including:

\$8.75 billion to Centers for Disease Control and Prevention –to support federal, state, local, territorial and tribal public health agencies to distribute, administer, monitor, and track coronavirus vaccination to ensure broad-based distribution, access, and vaccine coverage, including:

- \$4.5 billion for State, local, Territorial, and Tribal Public Health Departments; and
- \$300 million for a targeted effort to distribute and administer vaccines to high-risk and underserved populations, including racial and ethnic minority populations and rural communities.

\$25.4 billion to Public Health and Social Services Emergency Fund –to support testing and contact tracing to effectively monitor and suppress COVID-19, as well as to reimburse for health care related expenses or lost revenue attributable to the coronavirus, including:

- \$22.4 billion for testing, contact tracing, and other activities necessary to effectively monitor and suppress COVID-19, including \$2.5 billion for a targeted effort to improve testing capabilities and contact tracing in high-risk and underserved populations, including racial and ethnic minority populations and rural communities; and
- \$3 billion in additional grants for hospital and health care providers to be reimbursed for health care related expenses or lost revenue directly attributable to the public health emergency resulting from coronavirus, along with direction to allocate not less than 85 percent of unobligated funds in the Provider Relief Fund through an application-based portal to reimburse health care providers for financial losses incurred in 2020.

\$250 million to the Federal Communications Commission (FCC) – for additional support of its COVID-19 Telehealth Program authorized under the CARES Act. SJCC applied to the FCC for funding to support expansion of its telehealth capacity in the first application period, but was not selected for funding. If eligible to apply for any of these additional funds, SJCC will likely be doing so.

CEO Report – Previous 30 Days

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- COVID19 response
 - Drive-through testing
 - Cutover from Verily to OptumServe (12/28)
 - Homeless and ag worker testing 7 days/week
 - Twindemic prevention – drive-through flu shots 6 days/week
 - COVID vaccine began 12/16 (employees and first responders)
- SJCC/SJGH separation
 - Detailed updates provided to SJCC Board Audit Committee
 - SJC BOS to hear item on 1/5/21
 - SJCC to become a County affiliate, revisions to Co-Applicant Agreement will reflect this
- HRSA OSV
 - April 7-9, 2021
 - Fiscal Solutions will conduct OSV prep during Q1
- From SJCC Executive Team to SJCC Board, wishing you a Happy New Year and looking forward to a strong 2021!