# INITIAL APPOINTMENTS MAY 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		Specialty/ Assigned		Proctoring		Rec	
Request	Name	Div/Dept	Competency / Privilege Review	Required	Proctor	Status/Term	Recommend
Initial	Anuja Oza, M.D.	Family Medicine	Graduated: Boston University School of Medicine: 2016	Yes	Dr. Lim	Provisional	Dept: 5/7/2019
		OB Fellow	Residency: St. Margaret Memorial Hospital: 2019		Dr. Jafri		Cred: 5/7/2019
			Not Board Certified				MEC: 5/21/2019
				•		•	
Initial	Janani Sankaran, M.D.	Family Medicine	Graduated: P.S.G. Institute of Medicine: 2012	Yes	Dr. Fadoo	Provisional	Dept: 5/7/2019
		OB Fellow	Residency: Eastern Virginia Medical School: 2019				Cred: 5/7/2019
			Not Board Certified				MEC: 5/21/2019

<sup>\*</sup>Temporary Privileges

# REAPPOINTMENTS MAY 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	Juan Chiriboga Hurtado, M.D.	Family Medicine	Requirements for Active Staff met	None	Active 7/2019 to 7/2021	Dept: 5/7/2019 Cred: 5/7/2019 MEC: 5/21/2019
Reappointment	Megha Goyal, M.D.	Internal Medicine PMC	Requirements for Active Staff met	None	Active 7/2019 to 7/2021	Dept: 5/7/2019 Cred: 5/7/2019 MEC: 5/21/2019
Reappointment	Senzan Hsu, M.D.	OB/GYN	Requirements for Active Staff met	None	Active 7/2019 to 7/2021	Dept: 5/7/2019 Cred: 5/7/2019 MEC: 5/21/2019
Reappointment	Walter Li, M.D.	Pediatric Cardiology UCSF	Requirements for Consulting Staff met	None	Consulting 7/2019 to 7/2021	Dept: 5/7/2019 Cred: 5/7/2019 MEC: 5/21/2019
Reappointment	Richard Slarve, M.D.	Family Medicine PMC	Requirements for Active Staff met	None	Active 7/2019 to 7/2021	Dept: 5/7/2019 Cred: 5/7/2019 MEC: 5/21/2019

# CIDP - ADVANCEMENTS MAY 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
Patricia Manuse, LCSW	Family Medicine	Provisional	Allied Health Professional	6-month Extension	Dept: 5/3/2019
				Proctoring Not	Cred: 5/7/2019
				Complete	MEC: 5/21/2019

## **Director's Report**

May 28, 2019

## **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	10,529	9,240	10,105	11,683			96,454
Work Days	21	23	19	22	20	20	22	20	21	22			210
Vsts/Day	428	442	440	482	439	399	479	462	481	531			459

Our visits continue to grow and are consistently above 450/day this calendar year. Note that our visits during July to December 2018 averaged 438 per day. In January to April 2019, our visits are averaging 488 per day.

## **Sunlight Giving Foundation**

Sunlight Giving Foundation has funded us again for another year at \$75,000. During the past year we have used it to purchase larger exam tables for mothers who have to turn while on the tables, and ultra-sound equipment in Manteca for baby development observation. This coming year, the plan is to hire staff to build the enabling services we need in the FQHC. Anitra Smith – the foundation representative has been impressed with the enabling services here.

# Strategic Plan

It should be noted that we do not have a strategic plan within the last three years which HRSA noted in the site visit. So this is this is the initial efforts to create a Strategic Plan for SJCC. We will expand on the last month's presentation to outline a strategic plan that will be address the HRSA requirement.

In the effort to trigger a new rate during the current fiscal year, we had suggested Podiatry, Chiropractic and acupuncture. However there is a new not well defined evaluation that the State Medi-Cal has begun imposing that means the service really has to have been in place six months or more and there has to be payroll proof of the new service staff. So triggering Podiatry, Chiropractic and/or acupuncture will not work.

So we need to evaluate if the change in Mental Health and Substance use staffing and services this past year will work for the trigger. In any case, we have a couple of months to work out the plan. We have until November of 2019 to submit a Change in Scope to Medi-Cal for PPS rate change to cover 2018-2019 fiscal year.

For fiscal year 2019-2020, we can make any number of changes to trigger a rate change, but we should do it quickly so that we can actually plan and implement the costs and services to support the best rate.

We will present some of the options available to us for you to evaluate and decide. Some of the options include: New site(s), adding services – Podiatry, Chiropractic, Acupuncture, Dentistry and/or Dental Hygienist, Endocrinology, Cardiology, Physical Therapy, Occupational Therapy, Nutrition, Optometry, etc. We are also pursuing a 340 B Program contract with a local pharmacy (Chain). The consolidation of clinics at French Camp and California Street can be isolated and made separately. We also need to build an appropriate level of enabling services required by HRSA and include the costs in the FQHC.

## **Podiatrist**

Dr. Sahota is a Podiatrist who will be starting about July 1, 2019. She will focus entirely on FQHC patients particularly the diabetic patients. However, she will also work with patients with the whole variety of foot issues that occur but will refer to Orthopedics for Podiatric surgery.

We need to submit a Change in Scope to HRSA to move Podiatry from Contracted service to direct service.

# Ob-Gyn Department

Dr. Lee has resigned and now Dr. Louis Lim is the interim Chair. While we are down two Ob-Gyn's, we are trying to maintain our regular schedules at all sites.

#### MAT

The Aegis contract has been extended and now will run until December 2019. Apparently funding has been established for that length of time.

	<u>Jan</u>	<u>Feb</u>	<u>Mar</u>	<u>Apr</u>	<u>Total</u>
Intake's with Nurse & Counselor	0	0	5	9	14
MAT patient visits	7	18	17	17	59
Non Aegis Patient visits	9	8	7	5	29
Total Visits	16	26	24	22	88
Patient's enrolled into MAT	4	1	3	5	
Aegis	7		3	3	
<b>Cumulative Enrollment</b>	4	5	8	13	

#### Fee Schedules

The enabling services have not all been set up and billed for. So the following are the beginning of the codes for Enabling services:

<u>Service</u>	Charge	CPT Code			
Bus Transportation	\$5	A0110			
Sign Language/Interpreter					
Per 15 Minutes	23.00	T1013			
Case Management	50.00	T1016			
Self-Management Educ & training					
/patient – 30 Minutes	129.00	98960			
We submit these to you for your approval.					

### **PWPM Access**

As a follow up to last month's comments about charges dropping out, we have a Data Integrity meeting going with Health Plan San Joaquin (HPSJ) to make sure what we put out comes over to HPSJ.

### **UDS Report**

The UDS report will be available at the Board meeting. We will give you the data for 2017 compared to 2018. You will see that the number of patients is slightly less 30,360 (2018) vs 31, 224 (2017). The number of services however, is up to 116,938 in 2018 compared to 105,208 the previous year. We have to remember that in 2018, we implemented Cerner and actually reduced schedules in March through June and continued a slow recovery of productivity through the rest of the year.

UDS is changing for next year. They are dropping the tenure or length of employment of FQHC employees, and replacing the coronary artery – lipid therapy indicator with a statin therapy indicator. However they are adding more mental health and Substance use disorder tables, virtual visits (telemedicine), and re-aligning wording of some of the current measures.