

**Sliding Fee Scale for
San Joaquin General Hospital
San Joaquin County Clinics**

2018 Federal Poverty Level Based on Monthly Income by Family Size

	\$30 Nominal Fee	\$40 Minimum Fee	\$50 Minimum Fee	\$60 Minimum Fee
Family Size	0-100%	101 - 133%	134 - 150%	151 - 200%
1	\$1,011.67	\$1,345.52	\$1,517.51	\$2,023.34
2	\$1,371.67	\$1,824.32	\$2,057.51	\$2,743.34
3	\$1,731.67	\$2,303.12	\$2,597.51	\$3,463.34
4	\$2,091.67	\$2,781.92	\$3,137.51	\$4,183.34
5	\$2,451.67	\$3,260.72	\$3,677.51	\$4,903.34
6	\$2,811.67	\$3,739.52	\$4,217.51	\$5,623.34
7	\$3,171.67	\$4,218.32	\$4,757.51	\$6,343.34
8	\$3,531.67	\$4,697.12	\$5,297.51	\$7,063.34
Each additional person +8	\$360.00	\$478.80	\$540.00	\$720.00

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

Source: <https://www.federalregister.gov/documents/2018/01/18/2018-00814/annual-update-of-the-hhs-poverty-guidelines>

SICC Clinical Performance Indicators -- Summary Dashboard

Measure	CY 2017	CY 2016	Target	Benchmark Source	Reference
DM A1c Control	58.57% ¥	68.57% ¥	49.08%	HEDIS CIS - 2015 DHCS MCMC Average	NOF 0059
CVD BP Control	59.14%	50.79%	63.42%	PRIME DY 12 Target	NOF 0018
Pap Screening	54.29% ¥	52.86% ¥	56.00%	UDS National Data 2015	NOF 0032
Prenatal Care in 1st Trimester	60.97%	57.23%	77.90%	HP2020	UDS 6B
Birth Weight < 2500 gm	8.51%	10.49%	7.80%	HP2020	UDS 7
Pediatric Immunizations	44.29% ¥	60.00% ¥	73.72%	HEDIS -2015 DHCS MCMC Average	NOF 0038
Pediatric Dental Referrals (non-UDS)	98.57% ¥	93.77% ¥	33.20%	HP2020	NOF 1334
Pediatric BMI Screening and Intervention	72.97%	80.91%	54.70%	HP2020	NOF 0024
Adult BMI Screening and Intervention	61.30%	60.65%	53.60%	HP2020	NOF 0421
Tobacco Use Screening and Intervention	87.40%	90.99%	82.80%	UDS National Data 2015	NOF 0027
Asthma Pharmacological Therapy	93.91%	90.57%	49.08%	HEDIS - 2015 DHCS MCMC Average	NOF 0047
CAD Lipid Therapy	84.85%	86.55%	77.90%	UDS National Data 2015	NOF 0074
IVD Aspirin Therapy	85.88%	86.63%	78.00%	UDS National Data 2015	NOF 0068
Colorectal Cancer Screening	33.83%	42.86% ¥	59.85%	PRIME DY 12 Target	NOF 0034
HIV Linkage to Care	63.64%	60.00%	74.70%	UDS National Data 2015	UDS 6B
Depression Screening and Follow-up	70.67%	54.80%	78.86%	PRIME DY 12 Target	NOF 0418

Abbreviations

- A1c: Glycosylated Hemoglobin
- BP: Blood Pressure
- DM: Diabetes Mellitus
- CVD: Cardiovascular Disease
- BMI: Body Mass Index
- CAD: Coronary Artery Disease
- IVD: Ischemic Vascular Disease
- UDS: Uniform Data System
- HP2020: Healthy People 20/20
- HEDIS CIS: Healthcare Effectiveness Data Information Set Childhood Immunization Status
- DHCS: Department of Health Care Services
- MCMC: Managed Care Medi-Cal
- TBD: To Be Determined
- PCMH: Patient-Centered Medical Home
- PRIME: Medicaid Waiver 2020 (Public Hospital Redesign & Incentives in Medi-Cal)
- NOF: National Quality Forum

Specifications

- DM A1c Control: Patients age 18-75 (1 visit) with DM whose most recent HbA1c level during the measurement year is <8 %
- CVD BP Control: Patients age 18-85 (1-2 visits) with HTN whose most recent blood pressure level during the measurement year is systolic < 140 mmHg AND diastolic < 90 mmHg
- Pap Screening: Female patients age 23-64 (1 visit) seen during the measurement year that have had a Pap test within the measurement year or two years prior
- Birth Weight < 2500 gm: Obstetrical patients with initial prenatal exam completed in the first trimester (includes all neonates that received prenatal care during the measurement year)
- Pediatric Immunizations: Number of deliveries where child weighed < 2,500 grams (includes all neonates that received prenatal care at SJCC regardless of where delivered)
- Pediatric Dental Referrals (non-UDS): Children who have received age appropriate vaccines prior to their 2nd birthday during the measurement year(4 DTaP, 3 IPV, 3 Hib, 3 Hep B, 1 MMR, 1 VZV, 4 PCV, 1 Hep A, 2 RV, 2 Flu)
- Pediatric BMI Screening and Intervention: Number of children that received a well child exam (CHDP) during the measurement year that were referred to the dentist for oral health care
- Adult BMI Screening and Intervention: Patients age 3-17 (1 visit) with BMI %ile, counseling for nutrition, and counseling for physical activity documented in the measurement year
- Tobacco Use Screening and Intervention: Patients age 18 and older (1 visit) with BMI documented during the measurement year AND if under age of 65 18.5<BMI<=25 /over age 65 23<BMI<=30 counseling for nutrition, physical activity, and have follow-up plan documented
- Asthma Pharmacological Therapy: Patients age 18 and older (1 visit) seen in the measurement year who have been screened for tobacco use AND if screen + have documentation on tobacco cessation
- CAD Lipid Therapy: Patients age 5-64 (2 visits) with asthma with 1 visit in the measurement year that have been prescribed long term controller medication during the current year
- IVD Aspirin Therapy: Patients age 18 and older with CAD (1 visit) and been prescribed a lipid-lowering medication during the measurement year
- Colorectal Cancer Screening: Patients age 18 and older with IVD (1 visit) and been prescribed an antithrombotic medication during the measurement year
- HIV Linkage to Care: Patients age 50-75 (1 visit) seen in the measurement year who had appropriate screening for colorectal cancer (colonoscopy <=10 yrs, flex sig <= 5 yrs, or annual FOB/FIT testing)
- Depression Screening and Follow-up: Newly-diagnosed HIV patients in the measurement year with documentation of referral and treatment initiation within the first 90 days of diagnosis
- Random Sample (not whole universe): Patients 12 yrs and older (1 visit) screened for depression with a standardized tool (PHQ-2/9) during the measurement year AND if screen + have follow-up plan documented

San Joaquin County Clinics

Director's Report

March 27, 2018

VFC/VFA

We get our children's vaccines at no cost for most of the vaccines children need through the VFC (Vaccines for Children) program. VFC is applied to each individual site and so we have it at California Street (CHS) and Hazelton Clinic. The enrollment window opened the beginning of March and so we are now applying for VFC at Manteca and Family Practice at French Camp. Our staff at Hazelton alerted us to the VFA (Vaccines for Adults) program and we are applying for it for all of our sites. When San Joaquin County Public Health receives vaccines such as flu vaccine to distribute, we will also be given a share of the free vaccines to administer. Based on the past year's pharmaceutical expenses, the savings will be 100's of thousands of dollars per year.

CHDP

We are enrolled in CHDP at most sites, but we are completing enrollments for Manteca and Family Practice on California Street. CHDP (Children's Health & Development Program) is a payor source for children's health care during their developing years.

WIC

WIC (Women, Infants and Children) program will be on site at French Camp near Clinic 1 or 3 in the Navigator Office. They will be starting the last week of March.

Monthly Statistical Report:

Our February visits are very close for January:

	<u>Visits</u>		<u>Work Days</u>		<u>Visits/Day</u>	
	Jan	Feb	Jan	Feb	Jan	Feb
Total	9,857	8,900	22	20	448	445
FQHC Visits	6,848	5,903	22	20	311	295

It should be noted that training for Cerner implementation was going on but much more impactful in February.

Children Health Services Extended Hours:

A sampling of February visits shows the providers are seeing four out of six scheduled. There usually two no shows and/or cancel. When there are two providers they see 8 or 9 patients per evening session.

Physician Additions:

We have added new Physicians in March – Dr. Ramesh Pundi, Dr. Lauren Brown-Berthold and Dr. Juan Chiraboga-Hurtado in Family Medicine, Dr. Nidhi Chaudhry in Internal Medicine and Dr. Helen Oteno in OB-GYN. Manteca will be the next growth with Family Practice Physicians – Dr. Chiraraboga and Brown part time. Other Family Practice Doctors and the residents will be added there. There are more physicians expected over the summer.

Manteca/Hazelton Ad campaign:

The Manteca clinic needs some lighting at night so people are aware we are open. They also need to know that the clinic is facing Norman Avenue even though the address is Spreckles Ave. We will be doing a mailer to the immediate community starting with SJCC clients who may find the location closer for them. This will happen over the next couple of months. We are also working on the Open House David Jomaoas had spoken of. It will be with the local Chamber of Commerce and will host some local dignitaries and business people to make a splash.

Dr. Bersheid in Hazelton is a locums whose engagement ends in May. We expect to have a permanent physician there shortly and we want to build a practice around him/her. Nancy Heffernan – Nurse Practitioner at Hazelton already has a steady following. So we want to do some publicity around the addition of a physician to build a full patient load. It is ideally located in a neighborhood appropriate for and needing our services. So we getting out the previous postcard and preparing a mailing to the immediate zip codes in the area.

Transportation Changes:

Joan Singson of Population Management has worked to get the local bus Freddy Hopper (schedule attached) which comes directly to the Hospital and clinic entrance at French Camp. We are not renewing the transportation portion of our agreement with El Concilio. HPSJ has initiated Transportation services for members through Uber and Lyft. So we are encouraging members to use it by calling HPSJ customer service phone number. HealthNet is similarly providing transportation. That will account for over 80% of our clients.

Cerner Implementation:

Within the first week of Cerner go-live, staff began to improve each day and their confidence is growing. There have been the expected problems cropping up. For example, there was a problem that the authorized authorities of some of the Doctors was limited so they could not prescribe medications. That took a day or two to correct and get all of the physicians set up. Multiple requests for the same prescription came in from different places in different forms – faxes, electronic, paper. So it was like looking through six versions of the same prescription for the same patient and sorting them out for the real one to fill. But staff have been re-writing workflows to fix each difficulty. There has been an amazing cooperation among staff in getting through the first weeks of implementation.

Each day we are meeting to work out any issues discovered that day. That has been a good experience in getting people to understand the problems they can cause someone else if they do not fully do the planned workflows. I think it makes us a better team in the end. People are still smiling. I know that we are getting more patient complaints as these bottle necks occur but hopefully this is the worst point and it will get better.

SJCC Board of Directors

Board Expense Stipend

Because various Consumer Board members are paying for transportation, child care providers, or adult attendants, and other expenses in order to do the work of the Board, such consumer members will be paid a standard stipend of \$55 per month based on attendance at the previous month's Board meetings. This amount may be adjusted by motion of the Board as is needed. This policy becomes effective the first month after approval.

**San Joaquin County Clinics Board
Minutes of March 15, 2018
Executive Committee Meeting
Via Conference Call
San Joaquin General Hospital
Stockton, CA 95202**

Members Present

Rod Place, Chair
Luz Maria Sandoval, Vice Chair

SJCC Staff Present

Chuck Wiesen, Interim SJCC Executive Director

Health Care Services Staff Present

4ynthia King, Administrative Secretary, HCS

Call to Order

The meeting was called to order at 10:02a.m.

Public Comment

None

Accept 2018 Sliding Fee Scale

Luz Maria Sandoval made a motion to accept the 2018 Sliding Fee Scale. Rod Place seconded the motion and the motion was approved.

Authorize Staff to Submit Annual Certification to HRSA

The certification is due on April 2. Luz Maria Sandoval made a motion to authorize staff to submit the annual certification to HRSA. Rod Place seconded the motion and the motion was approved.

Adjournment

The meeting was adjourned at 10:12 a.m.

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San Joaquin Community Clinics
Financial Statement Comments
January 31, 2018

Summary

The Total visits for the month of January were 9,848. January's billable visits of 9,188 were less than budgeted visits of 9,594 by 406 or 4.2%. Year-to-date billable visits are ahead of budget by 2,889 or 5.2%. At the time the budget was prepared, the scheduled date to go live on the new Cerner system was 7/10/17. The go live date is now 3/5/2018. The year-to-date budget includes reductions originally anticipated in July and August 2017. Once we go live on the Cerner system, we expect to see a reduction in actual visits for March and April 2018 due to user training and a closer alignment with budgeted visits on a year-to-date basis.

Gross Patient Revenue of \$1.7 million was less than budget by \$10,000 or 0.6%. Net Patient Revenue of \$1.2M was less than budget by \$397,000 or 24.2%. Contributing factors to the deductions from revenue were locum tenens write-offs of \$129,000 for the month of January, the monthly adjustment for the Due To the State for Medi-Cal Managed Care was \$334,000 for accounts in FY 2017 and FY 2018, and Sliding Fee Scale of \$40,000. These were partially offset by a reduction in the C/A Reserve of \$98,000.

It should be noted, however, that the manual adjustments continue to be high. In January manual adjustments amounted to \$746,000 million compared to an average of \$509,000 per month through December. We determined that the Medi-Cal adjustments were previously high in December due to the change in the way eCW generates wrap charges. Instead of a claim with the exact wrap charge, the wrap charges are now equal to the patient service charges. When the wrap payment is received, there is now an adjustment to write off the difference between the payment and the charges. These adjustments should not be booked to the general ledger since the wrap accounts receivable is not recorded there. These adjustments were excluded from the general ledger in January and will be excluded going forward. Finance is still reviewing the prior months to determine the amount of the wrap adjustments that should be reversed.

Capitation Revenue of \$490,000 was less than budget by \$68,000 or 12.2%. Capitation revenue is generally consistent from month to month; however, the budgeted capitation revenue was allocated based on monthly visit volume, which will create greater variances to budget from month to month. Year-to-date capitation revenue is 3.8% ahead of budget.

Total Expenses of \$2.5 million were minimally greater than budget by \$1,000 (0.0%). The resulting Net Loss of \$1.2 million was greater than budget by \$398,000.

Explanations of major variances are explained below.

Revenue

As mentioned above, Gross Patient Revenue was less than budget \$10,000 or 0.6%. Gross Patient Revenue per visit was \$188.01, which exceeded budget by 3.8%. Managed Care Medi-Cal was \$44,000, or 3.6%, less than budget and Medicare of \$24,000, or 9.6%, was less than budget. However, Medi-Cal Fee-For-Service of \$49,000,

**San Joaquin Community Clinics
Financial Statement Comments
January 31, 2018**

or 23.1%, was greater than budget. Net Patient Revenue of \$1.2M was below budget by \$397,000. Deductions from revenue were unfavorable to budget by \$319,000 (48.7%).

Capitation revenue of \$490,000 was less than budget by \$68,000 (12.2%).

Expenses

Salaries & Benefits of \$1.1M were less than budget by \$297,000 (21.1%). Salaries of \$585,000 were better than budget by \$293,000 or 33.3%. This favorable variance is due to Physician salaries of \$255,000 while non-providers were favorable by \$38,000. The Physician salaries positive variance is due to nine provider vacancies, in which three of these vacancies are currently being filled by Locums. The Locums are working in the following Clinics: Primary Medicine = 1.0 FTE, Healthy Beginnings-French Camp = 1.0 FTE, and SJCC-Hazelton = 1.0 FTE.

Benefits of \$525,000 were also favorable to budget by \$5,000 or 0.9%. While the variance is positive, benefits as a percentage of salaries is higher in January than they have been year-to-date (89.6% vs. 53.7%). The reason for the high benefit % is because of the FICA Portion for the Physicians. In approximately August / September, they reach the ceiling for the annual dollar threshold and the employer portion of the expense stops accruing. In January, a new tax year begins and the FICA expense starts accruing again.

Professional Fees/Registry of \$245,000 exceeded budget by \$166,000 (210.0%) primarily due to provider vacancies in clinics identified above in salaries and benefits. The 3.0 FTE locums used in the month of January accounted for \$108,000 of the unfavorable variance. In addition, an Independent Contract Physician in Primary Medicine exceeded budget by \$5,000. The FQ Administration accounted for \$53,000 unfavorable variance for consulting fees for the Interim CFO, Interim FQ Director and The Billing Project.

Supplies of \$156,000 were greater than budget by \$58,000 (59.1%). Pharmaceuticals exceeded budget by \$28,000, \$22,000 over in Family Medicine and \$15,000 in SJCC-Manteca. These were offset by favorable variances in Primary Medicine (\$4,000) and SJCC-Hazelton (\$5,000). Family Medicine YTD visits are up 31.8% from same period last year. SJCC-Manteca is due to new clinic opening. Minor Medical Instruments exceeded budget by \$14,000 (\$14,000 in SJCC-Manteca for 12 Floor Stands, 13 Wall Mounted Measuring Rod, 13 stands with trays). These were not capitalized per County policy. Capital is defined as 'an item with a unit cost of at least \$5,000 and a minimum useful life of two years'. Supplies are expensed when issued to the using department and are not included in general ledger inventory balances, which is consistent with Hospital Policy.

Due to supplies expense consistently exceeding budget, Finance staff is reviewing the FY2018-2019 budget currently in development to determine if adjustments need to be made going forward.

Purchased Services of \$284,000 were greater than budget by \$65,000 (29.6%). Predominantly due to unfavorable variance for eClinical Works in FQ Admin (\$70,000). When the current budget was developed, it was anticipated that eClinical Works costs would terminate in December; therefore, there is no budget in January through June for the monthly support costs. Due to the delay in converting to the Cerner System, additional expenses will be

**San Joaquin Community Clinics
Financial Statement Comments
January 31, 2018**

incurred to keep eClinical Works on line through March 2019. This expense has been included in the FY2018-2019 budget.

Purchased Labor from Behavioral Health Services was favorable by \$5,000.

Depreciation of \$21,000 was greater than budget by \$9,000 (77.5%) due to the new Lease Agreement for SJCC-Manteca Leasehold Improvements, not in budget.

Other Expense of \$50,000 was greater than budget by \$32,000 (175.7%). This is predominantly due to monthly rent for the SJCC Manteca facility (\$8,500), Electricity expense for California Street Clinics (\$10,000) not in budget, and Training expense for FQ Admin \$13,000).

Accounts Receivable

January's Gross Accounts Receivables (AR) of \$1.9 million was \$68,000 less than December and \$608,000 less than November. Average days of revenue in AR is at 35.4, which is down from 36.6 in December and down from 46.7 in November. WRAP accounts receivable is \$2.6 million, which is \$196,000 higher than December. The increase in WRAP AR is due to the continued hold on claims for the Hazelton and Manteca sites pending Medi-Cal enrollment and an increase in wrap accounts receivable for prior months for Primary Medicine Clinic (currently being researched), partially offset by a decrease in wrap accounts receivable in Children's Health Services as the retroactive claims from the billing project are collected.

Cash collections (excluding capitation) were \$1,083,000 in January, which represents an increase from December collections of \$996,000 and an increase over the FY 2018 average year-to-date of \$992,000. Cash collections averaged \$843,000 per month in 2017.

**San Joaquin Community Clinics
Income Statement
January 31, 2018**

Current Month			
Actual	Budget	Variance	% Var

9,848	9,594	254	2.6%	Total Visits
9,188	9,594	(406)	-4.2%	Billable Visits
113.5	132.1	18.5	14.0%	Total FTEs
1,727,412	1,737,206	(9,794)	-0.6%	Gross Patient Revenue
(975,803)	(656,352)	(319,451)	-48.7%	Contractual Adjustments
490,397	558,346	(67,949)	-12.2%	Capitation Rev
1,242,005	1,639,200	(397,194)	-24.2%	Net Patient Revenue
0	0	0		Other Revenue
1,242,005	1,639,200	(397,194)	-24.2%	Total Revenue

Year to Date			
Actual	Budget	Variance	% Var

62,621	55,161	7,460	13.5%
58,049	55,161	2,888	5.2%
110.0	132.1	22.0	16.7%
10,995,198	10,142,728	852,470	8.4%
(7,202,949)	(3,868,149)	(3,334,800)	86.2%
3,352,168	3,229,550	122,618	3.8%
7,144,416	9,504,129	(2,359,712)	-24.8%
0	0	0	100.0%
7,144,416	9,504,129	(2,359,712)	-24.8%

Operating Expense

585,251	877,913	292,662	33.3%	Salaries
524,511	529,343	4,832	0.9%	Benefits
1,109,761	1,407,256	297,495	21.1%	Total Salaries & Benefits
245,208	79,033	(166,175)	-210.3%	Professional Fees/Registry
156,206	98,188	(58,018)	-59.1%	Supplies
283,931	219,079	(64,852)	-29.6%	Purchased Services
21,202	11,947	(9,255)	-77.5%	Depreciation
50,218	18,218	(32,000)	-175.7%	Other Expense
1,866,526	1,833,721	(32,805)	-1.8%	Total Direct Expense
604,810	636,568	31,758	5.0%	Overhead Allocation
2,471,336	2,470,289	(1,047)	0.0%	Total Expenses
(1,229,330)	(831,089)	(398,241)	-47.9%	Net Income (Loss)

4,612,380	6,240,046	1,627,666	26.1%
2,478,640	2,925,094	446,454	15.3%
7,091,019	9,165,140	2,074,121	22.6%
1,163,846	553,233	(610,613)	-110.4%
950,410	671,868	(278,542)	-41.5%
1,922,149	2,024,875	102,726	5.1%
125,411	84,212	(41,199)	-48.9%
151,104	126,875	(24,229)	-19.1%
11,403,938	12,625,203	1,222,265	9.7%
3,706,029	4,205,831	499,802	11.9%
15,109,967	16,832,034	1,722,067	10.2%
(7,965,551)	(7,327,905)	(637,646)	8.7%

Key Ratios

\$ 188.01	\$ 181.07	\$ 6.94	3.8%	Gross Pt Revenue/Billable Visit
\$ 135.18	\$ 170.86	\$ (35.68)	-20.9%	Total Revenue/Billable Visit (excl Oth Rev)
\$ 203.15	\$ 191.13	\$ (12.02)	-6.3%	Direct Costs/Billable Visit
\$ 65.83	\$ 66.35	\$ 0.52	0.8%	Indirect Costs/Billable Visit
\$ 268.97	\$ 257.48	\$ (11.49)	-4.5%	Total Medical Cost/Billable Visit
\$ (133.80)	\$ (86.63)	\$ (47.17)	54.5%	Net Income(Loss)/Billable Visit
\$ 672.44	\$ 643.71	\$ (28.73)	-4.5%	Total Cost/Patient (1)
71.9%	94.4%	-22.5%	-23.8%	Net Pt Rev as % of Gross Rev
89.6%	60.3%	-29.3%	-48.6%	Benefits as a % of Salaries
32.4%	34.7%	2.3%	6.7%	Overhead % of Direct Exp
\$ 1,860				Gross Patient AR (in 000s)
\$ (555)				Less Reserves (in 000s)
\$ 1,305				Net AR (in 000s)
\$ 2,621				Wrap AR (in 000s)
\$ 35.4				Gross AR Days
\$ 1,573				Cash Receipts (in 000s)

\$ 189.41	\$ 183.88	\$ 5.54	3.0%
\$ 123.08	\$ 172.30	\$ (49.22)	-28.6%
\$ 196.45	\$ 228.90	\$ 32.44	14.2%
\$ 63.84	\$ 76.25	\$ 12.40	16.3%
\$ 260.30	\$ 305.15	\$ 44.85	14.7%
\$ (137.22)	\$ (132.85)	\$ 4.37	-3.3%
\$ 650.74	\$ 762.86	\$ 112.12	14.7%
65.0%	93.7%	-28.7%	-30.7%
53.7%	46.9%	-6.9%	-14.6%
32.5%	33.3%	0.8%	2.4%

Payer Mix

13.2%	14.5%	-1.3%	-9.0%	Medicare
15.2%	12.3%	2.9%	23.8%	Medi-Cal
67.6%	69.8%	-2.2%	-3.1%	Medi-Cal Managed Care
1.3%	1.0%	0.2%	20.4%	Insurance
2.7%	2.4%	0.3%	12.2%	Self Pay / Indigent
100.0%	100.0%	0.0%	0.0%	

12.9%	13.4%	-0.5%	-3.9%
14.2%	13.2%	1.0%	7.8%
69.1%	70.1%	-1.1%	-1.5%
1.4%	1.0%	0.3%	33.3%
2.5%	2.3%	0.2%	9.2%
100.0%	100.0%	0.0%	0.0%

**Children's Health Services
Income Statement
January 31, 2018**

Current Month			
Actual	Budget	Variance	% Var

1,940	1,700	240	14.1% Total Visits
1,723	1,700	23	1.4% Billable Visits
16.9	21.0	4.1	19.3% Total FTEs
391,195	413,414	(22,219)	-5.4% Gross Patient Revenue
(208,311)	(224,177)	15,866	7.1% Contractual Adjustments
96,605	116,225	(19,620)	-16.9% Capitation Rev
279,489	305,462	(25,973)	-8.5% Net Patient Revenue
0	0	0	Other Revenue
279,489	305,462	(25,973)	-8.5% Total Revenue

Year to Date			
Actual	Budget	Variance	% Var

11,545	10,748	797	7.4%
10,440	10,748	(308)	-2.9%
18.6	21.0	2.4	11.4%
2,597,769	2,613,723	(15,954)	-0.6%
(1,969,264)	(1,417,312)	(551,952)	38.9%
617,566	734,811	(117,245)	-16.0%
1,246,071	1,931,222	(685,151)	-35.5%
0	0	0	
1,246,071	1,931,222	(685,151)	-35.5%

Operating Expense

94,896	111,133	16,237	14.6% Salaries
86,192	85,844	(348)	-0.4% Benefits
181,087	196,977	15,890	8.1% Total Salaries & Benefits
0	5,000	5,000	100.0% Professional Fees/Registry
21,303	8,182	(13,121)	-160.4% Supplies
2,522	6,613	4,091	61.9% Purchased Services
661	760	99	13.0% Depreciation
2,361	2,632	271	10.3% Other Expense
207,935	220,164	12,229	5.6% Total Direct Expense
71,974	43,062	(28,912)	-67.1% Allocation of Direct Admin Exp
62,817	66,512	3,694	5.6% Overhead Allocation
342,726	329,738	(12,989)	-3.9% Total Expenses
(63,237)	(24,276)	(38,962)	-160.5% Net Income (Loss)

816,850	928,130	111,280	12.0%
444,472	485,840	41,368	8.5%
1,261,322	1,413,970	152,648	10.8%
8,245	35,000	26,755	76.4%
63,725	54,391	(9,334)	-17.2%
23,136	45,909	22,773	49.6%
4,628	5,320	692	13.0%
18,388	18,306	(82)	-0.4%
1,379,444	1,572,896	193,452	12.3%
409,983	453,467	43,485	9.6%
413,905	475,172	61,267	12.9%
2,203,332	2,501,535	298,203	11.9%
(957,261)	(570,313)	(386,948)	67.8%

Key Ratios

\$ 227.04	\$ 243.18	\$ (16.14)	-6.6% Gross Pt Revenue/Billable Visit
\$ 162.21	\$ 179.68	\$ (17.47)	-9.7% Total Revenue/Billable Visit (excl Oth Rev)
\$ 120.68	\$ 129.51	\$ 8.83	6.8% Direct Costs/Billable Visit
\$ 78.23	\$ 64.46	\$ (13.78)	-21.4% Indirect Costs/Billable Visit
\$ 198.91	\$ 193.96	\$ (4.95)	-2.6% Total Medical Cost/Billable Visit
\$ (36.70)	\$ (14.28)	\$ (22.42)	157.0% Net Income(Loss)/Billable Visit
90.8%	77.2%	-13.6%	-17.6% Benefits as a % of Salaries
30.2%	30.2%	0.0%	0.0% Overhead % of Direct Exp
\$ 337			Gross Patient AR (in 000s)
\$ (78)			Less Reserves (in 000s)
\$ 259			Net AR (in 000s)
\$ 406			Wrap AR (in 000s)
\$ 29.6			Gross AR Days
\$ 430			Cash Receipts (in 000s)

\$ 248.83	\$ 243.18	\$ 5.65	2.3%
\$ 119.36	\$ 179.68	\$ (60.33)	-33.6%
\$ 132.13	\$ 146.34	\$ 14.21	9.7%
\$ 78.92	\$ 86.40	\$ 7.48	8.7%
\$ 211.05	\$ 232.74	\$ 21.70	9.3%
\$ (91.69)	\$ (53.06)	\$ (38.63)	72.8%
54.4%	52.3%	-2.1%	-3.9%
30.0%	30.2%	0.2%	0.7%

Payer Mix

0.0%	0.0%	0.0%	Medicare
15.8%	17.2%	-1.4%	-8.1% Medi-Cal
83.2%	82.2%	1.0%	1.2% Medi-Cal Managed Care
0.5%	0.5%	-0.1%	-9.8% Insurance
0.6%	0.1%	0.5%	428.1% Self Pay / Indigent
100.0%	100.0%	0.0%	0.0%

0.0%	0.0%	0.0%	0.0%
14.0%	17.2%	-3.2%	-18.5%
85.2%	82.2%	3.0%	3.6%
0.5%	0.5%	0.0%	-7.9%
0.3%	0.1%	0.2%	222.9%
100.0%	100.0%	0.0%	0.0%

**Family Medicine Clinic
Income Statement
January 31, 2018**

Current Month			
Actual	Budget	Variance	% Var

1,738	1,382	356	25.8%	Total Visits
1,670	1,382	288	20.8%	Billable Visits
16.3	19.8	3.5	17.7%	Total FTEs
300,114	237,007	63,107	26.6%	Gross Patient Revenue
(159,477)	(126,712)	(32,765)	-25.9%	Contractual Adjustments
86,547	74,282	12,265	16.5%	Capitation Rev
227,184	184,577	42,607	23.1%	Net Patient Revenue
0	0	0		Other Revenue
227,184	184,577	42,607	23.1%	Total Revenue
Operating Expense				
72,220	122,487	50,267	41.0%	Salaries
77,603	58,450	(19,153)	-32.8%	Benefits
149,822	180,937	31,115	17.2%	Total Salaries & Benefits
0	0	0		Professional Fees/registry
55,772	33,744	(22,028)	-65.3%	Supplies
292	5,272	4,980	94.5%	Purchased Services
3,922	4,127	205	5.0%	Depreciation
1,713	2,862	1,149	40.2%	Other Expense
211,522	226,942	15,420	6.8%	Total Direct Expense
55,217	24,687	(30,530)	-123.7%	Allocation of Direct Admin Exp
94,614	101,511	6,898	6.8%	Overhead Allocation
361,352	353,140	(8,212)	-2.3%	Total Expenses
(134,168)	(168,564)	34,396	20.4%	Net Income (Loss)

Year to Date			
Actual	Budget	Variance	% Var

11,366	8,039	3,327	41.4%
10,901	8,039	2,862	35.6%
13.6	19.8	6.2	31.3%
1,853,571	1,378,843	474,728	34.4%
(1,311,383)	(737,175)	(574,208)	77.9%
610,136	432,151	177,985	41.2%
1,152,323	1,073,819	78,505	7.3%
0	0	0	
1,152,323	1,073,819	78,505	7.3%
Operating Expense			
580,455	776,747	196,292	25.3%
302,863	343,329	40,466	11.8%
883,318	1,120,076	236,758	21.1%
(2,131)	0	2,131	
307,251	223,792	(83,459)	-37.3%
20,814	36,904	16,090	43.6%
28,074	29,467	1,393	4.7%
15,747	19,894	4,147	20.8%
1,253,073	1,430,133	177,060	12.4%
292,532	239,042	(53,490)	-22.4%
558,932	639,698	80,766	12.6%
2,104,538	2,308,873	204,335	8.9%
(952,215)	(1,235,055)	282,840	-22.9%

Key Ratios

\$ 179.71	\$ 171.50	\$ 8.21	4.8%	Gross Pt Revenue/Billable Visit
\$ 136.04	\$ 133.56	\$ 2.48	1.9%	Total Revenue/Billable Visit (excl Oth Rev)
\$ 126.66	\$ 164.21	\$ 37.55	22.9%	Direct Costs/Billable Visit
\$ 89.72	\$ 91.32	\$ 1.60	1.7%	Indirect Costs/Billable Visit
\$ 216.38	\$ 255.53	\$ 39.15	15.3%	Total Medical Cost/Billable Visit
\$ (80.34)	\$ (121.97)	\$ 41.63	-34.1%	Net Income(Loss)/Billable Visit
107.5%	47.7%	-59.7%	-125.2%	Benefits as a % of Salaries
44.7%	44.7%	0.0%	0.0%	Overhead % of Direct Exp
\$ 332				Gross Patient AR (in 000s)
\$ (110)				Less Reserves (in 000s)
\$ 222				Net AR (in 000s)
\$ 270				Wrap AR (in 000s)
\$ 36.3				Gross AR Days
\$ 293				Cash Receipts (in 000s)

\$ 170.04	\$ 171.52	\$ (1.48)	-0.9%
\$ 105.71	\$ 133.58	\$ (27.87)	-20.9%
\$ 114.95	\$ 177.90	\$ 62.95	35.4%
\$ 78.11	\$ 109.31	\$ 31.20	28.5%
\$ 193.06	\$ 287.21	\$ 94.15	32.8%
\$ (87.35)	\$ (153.63)	\$ 66.28	-43.1%
52.2%	44.2%	-8.0%	-18.0%
44.6%	44.7%	0.1%	0.3%

Payer Mix

15.5%	16.5%	-1.0%	-6.1%	Medicare
17.9%	9.0%	8.9%	98.0%	Medi-Cal
59.6%	64.6%	-5.0%	-7.8%	Medi-Cal Managed Care
1.7%	1.5%	0.1%	8.8%	Insurance
5.3%	8.3%	-2.9%	-35.7%	Self Pay / Indigent
100.0%	100.0%	0.0%	0.0%	

17.0%	16.5%	0.5%	3.0%
11.4%	9.0%	2.4%	26.7%
64.6%	64.6%	-0.1%	-0.1%
1.5%	1.5%	0.0%	-2.8%
5.4%	8.3%	-2.8%	-34.1%
100.0%	100.0%	0.0%	0.0%

**Family Practice Clinic
Income Statement
January 31, 2018**

Current Month			
Actual	Budget	Variance	% Var

438	548	(110)	-20.1%	Total Visits
421	548	(127)	-23.2%	Billable Visits
8.6	10.0	1.4	14.1%	Total FTEs
87,963	99,116	(11,153)	-11.3%	Gross Patient Revenue
(71,082)	(13,912)	(57,170)	-410.9%	Contractual Adjustments
21,811	30,021	(8,211)	-27.3%	Capitation Rev
38,692	115,225	(76,534)	-66.4%	Net Patient Revenue
0	0	0		Other Revenue
38,692	115,225	(76,534)	-66.4%	Total Revenue

Operating Expense

31,688	41,596	9,908	23.8%	Salaries
37,652	36,889	(763)	-2.1%	Benefits
69,340	78,485	9,145	11.7%	Total Salaries & Benefits
900	5,000	4,100	82.0%	Professional Fees/Registry
8,889	5,373	(3,516)	-65.4%	Supplies
2,432	6,125	3,693	60.3%	Purchased Services
226	346	120	34.7%	Depreciation
4,032	714	(3,318)	-464.7%	Other Expense
85,819	96,043	10,224	10.6%	Total Direct Expense
16,184	10,324	(5,860)	-56.8%	Allocation of Direct Admin Exp
39,391	44,084	4,693	10.6%	Overhead Allocation
141,394	150,451	9,056	6.0%	Total Expenses
(102,703)	(35,225)	(67,477)	-191.6%	Net Income (Loss)

Year to Date			
Actual	Budget	Variance	% Var

2,769	3,161	(392)	-12.4%	Total Visits
2,607	3,161	(554)	-17.5%	Billable Visits
7.6	10.0	2.4	24.3%	Total FTEs
531,491	571,865	(40,374)	-7.1%	Gross Patient Revenue
(414,682)	(80,264)	(334,418)	416.6%	Contractual Adjustments
149,065	173,215	(24,149)	-13.9%	Capitation Rev
265,874	664,816	(398,942)	-60.0%	Net Patient Revenue
0	0	0		Other Revenue
265,874	664,816	(398,942)	-60.0%	Total Revenue
221,197	307,557	86,360	28.1%	Salaries
184,455	154,842	(29,613)	-19.1%	Benefits
405,652	462,399	56,747	12.3%	Total Salaries & Benefits
50,971	35,000	(15,971)	-45.6%	Professional Fees/Registry
28,858	34,046	5,188	15.2%	Supplies
40,126	42,873	2,747	6.4%	Purchased Services
1,583	2,425	842	34.7%	Depreciation
9,646	4,978	(4,668)	-93.8%	Other Expense
536,837	581,721	44,884	7.7%	Total Direct Expense
83,880	99,597	15,717	15.8%	Allocation of Direct Admin Exp
238,078	267,818	29,740	11.1%	Overhead Allocation
858,795	949,136	90,341	9.5%	Total Expenses
(592,921)	(284,320)	(308,601)	108.5%	Net Income (Loss)

Key Ratios

\$ 208.94	\$ 180.87	\$ 28.07	15.5%	Gross Pt Revenue/Billable Visit
\$ 91.90	\$ 210.27	\$ (118.36)	-56.3%	Total Revenue/Billable Visit (excl Oth Rev)
\$ 203.85	\$ 175.26	\$ (28.59)	-16.3%	Direct Costs/Billable Visit
\$ 132.01	\$ 99.28	\$ (32.72)	-33.0%	Indirect Costs/Billable Visit
\$ 335.85	\$ 274.55	\$ (61.31)	-22.3%	Total Medical Cost/Billable Visit
\$ (243.95)	\$ (64.28)	\$ (179.67)	279.5%	Net Income(Loss)/Billable Visit
118.8%	88.7%	-30.1%	-34.0%	Benefits as a % of Salaries
45.9%	45.9%	0.0%	0.0%	Overhead % of Direct Exp
\$ 66				Gross Patient AR (In 000s)
\$ (26)				Less Reserves (In 000s)
\$ 40				Net AR (In 000s)
\$ 546				Wrap AR (In 000s)
\$ 25.8				Gross AR Days
\$ 77				Cash Receipts (In 000s)

\$ 203.87	\$ 180.91	\$ 22.96	12.7%	Gross Pt Revenue/Billable Visit
\$ 101.98	\$ 210.32	\$ (108.33)	-51.5%	Total Revenue/Billable Visit (excl Oth Rev)
\$ 205.92	\$ 184.03	\$ (21.89)	-11.9%	Direct Costs/Billable Visit
\$ 123.50	\$ 116.23	\$ (7.26)	-6.2%	Indirect Costs/Billable Visit
\$ 329.42	\$ 300.26	\$ (29.15)	-9.7%	Total Medical Cost/Billable Visit
\$ (227.43)	\$ (89.95)	\$ (137.49)	152.9%	Net Income(Loss)/Billable Visit
83.4%	50.3%	-33.0%	-65.6%	Benefits as a % of Salaries
44.3%	46.0%	1.7%	3.7%	Overhead % of Direct Exp

Payer Mix

26.4%	28.8%	-2.3%	-8.1%	Medicare
5.0%	2.7%	2.4%	88.3%	Medi-Cal
65.3%	65.9%	-0.6%	-0.9%	Medi-Cal Managed Care
0.0%	1.0%	-1.0%	-100.0%	Insurance
3.3%	1.7%	1.5%	88.1%	Self Pay / Indigent
100.0%	100.0%	0.0%	0.0%	

27.1%	28.8%	-1.7%	-5.9%	Medicare
3.9%	2.7%	1.2%	45.9%	Medi-Cal
65.5%	65.9%	-0.3%	-0.5%	Medi-Cal Managed Care
0.5%	1.0%	-0.5%	-50.3%	Insurance
3.0%	1.7%	1.3%	74.4%	Self Pay / Indigent
100.0%	100.0%	0.0%	0.0%	

**Primary Medicine Clinic
Income Statement
January 31, 2018**

Current Month			
Actual	Budget	Variance	% Var

Year to Date			
Actual	Budget	Variance	% Var

3,032	3,385	(353)	-10.4%	Total Visits	18,929	17,347	1,582	9.1%
2,958	3,385	(427)	-12.6%	Billable Visits	18,134	17,347	787	4.5%
31.4	31.3	(0.1)	-0.3%	Total FTEs	31.6	31.3	(0.3)	-0.8%
437,243	513,893	(76,650)	-14.9%	Gross Patient Revenue	2,833,445	2,633,421	200,024	7.6%
(316,935)	(244,290)	(72,645)	-29.7%	Contractual Adjustments	(1,939,341)	(1,251,853)	(687,488)	54.9%
150,983	182,380	(31,396)	-17.2%	Capitation Rev	1,012,567	934,597	77,970	8.3%
271,291	451,983	(180,691)	-40.0%	Net Patient Revenue	1,906,672	2,316,165	(409,493)	-17.7%
0	0	0		Other Revenue	0	0	0	
271,291	451,983	(180,691)	-40.0%	Total Revenue	1,906,672	2,316,165	(409,493)	-17.7%
Operating Expense								
168,807	322,125	153,318	47.6%	Salaries	1,372,379	2,000,440	628,061	31.4%
138,701	164,060	25,359	15.5%	Benefits	643,628	705,796	62,168	8.8%
307,508	486,185	178,677	36.8%	Total Salaries & Benefits	2,016,008	2,706,236	690,228	25.5%
34,433	10,000	(24,433)	-244.3%	Professional Fees/Registry	277,860	70,000	(207,860)	-296.9%
4,161	9,974	5,813	58.3%	Supplies	80,806	69,618	(11,188)	-16.1%
120	4,126	4,006	97.1%	Purchased Services	78,635	28,880	(49,755)	-172.3%
302	302	0	0.0%	Depreciation	2,113	2,113	(0)	0.0%
1,223	1,484	261	17.6%	Other Expense	7,768	10,334	2,566	24.8%
347,746	512,071	164,325	32.1%	Total Direct Expense	2,463,190	2,887,181	423,991	14.7%
80,446	53,528	(26,918)	-50.3%	Allocation of Direct Admin Exp	447,177	450,803	3,626	0.8%
118,721	174,821	56,100	32.1%	Overhead Allocation	829,075	985,684	156,608	15.9%
546,913	740,420	193,507	26.1%	Total Expenses	3,739,443	4,323,668	584,225	13.5%
(275,622)	(288,437)	12,816	4.4%	Net Income (Loss)	(1,832,771)	(2,007,503)	174,732	-8.7%

Key Ratios

\$ 147.82	\$ 151.81	\$ (4.00)	-2.6%	Gross Pt Revenue/Billable Visit	\$ 156.25	\$ 151.81	\$ 4.44	2.9%
\$ 91.71	\$ 133.53	\$ (41.81)	-31.3%	Total Revenue/Billable Visit (excl Oth Rev)	\$ 105.14	\$ 133.52	\$ (28.38)	-21.3%
\$ 117.56	\$ 151.28	\$ 33.72	22.3%	Direct Costs/Billable Visit	\$ 135.83	\$ 166.44	\$ 30.60	18.4%
\$ 67.33	\$ 67.46	\$ 0.13	0.2%	Indirect Costs/Billable Visit	\$ 70.38	\$ 82.81	\$ 12.43	15.0%
\$ 184.89	\$ 218.74	\$ 33.84	15.5%	Total Medical Cost/Billable Visit	\$ 206.21	\$ 249.25	\$ 43.03	17.3%
\$ (93.18)	\$ (85.21)	\$ (7.97)	9.4%	Net Income(Loss)/Billable Visit	\$ (101.07)	\$ (115.73)	\$ 14.66	-12.7%
82.2%	50.9%	-31.2%	-61.3%	Benefits as a % of Salaries	46.9%	35.3%	-11.6%	-32.9%
34.1%	34.1%	0.0%	0.0%	Overhead % of Direct Exp	33.7%	34.1%	0.5%	1.4%
\$ 431				Gross Patient AR (in 000s)				
\$ (162)				Less Reserves (in 000s)				
\$ 269				Net AR (in 000s)				
\$ 824				Wrap AR (in 000s)				
\$ 32.6				Gross AR Days				
\$ 430				Cash Receipts (in 000s)				

Payer Mix

26.9%	26.6%	0.3%	1.3%	Medicare	28.7%	26.6%	2.1%	8.0%
4.8%	4.4%	0.4%	8.5%	Medi-Cal	3.9%	4.4%	-0.5%	-11.2%
64.1%	64.8%	-0.7%	-1.0%	Medi-Cal Managed Care	63.7%	64.8%	-1.1%	-1.7%
1.2%	1.2%	0.0%	-2.7%	Insurance	1.3%	1.2%	0.1%	7.3%
3.0%	3.0%	0.0%	-0.7%	Self Pay / Indigent	2.4%	3.0%	-0.6%	-21.5%
100.0%	100.0%	0.0%	0.0%		100.0%	100.0%	0.0%	0.0%

**Healthy Beginnings - California St.
Income Statement
January 31, 2018**

Current Month			
Actual	Budget	Variance	% Var

Year to Date			
Actual	Budget	Variance	% Var

708	663	45	6.8%	Total Visits
398	663	(265)	-40.0%	Billable Visits
10.6	14.0	3.4	24.4%	Total FTEs
156,943	138,022	18,921	13.7%	Gross Patient Revenue
(98,852)	(59,226)	(39,626)	-66.9%	Contractual Adjustments
35,256	38,986	(3,730)	-9.6%	Capitation Rev
93,347	117,782	(24,435)	-20.7%	Net Patient Revenue
0	0	0		Other Revenue
93,347	117,782	(24,435)	-20.7%	Total Revenue

5,223	4,941	282	5.7%
5,223	4,941	282	5.7%
12.4	14.0	1.6	11.7%
1,139,044	1,029,184	109,860	10.7%
(557,179)	(441,622)	(115,557)	26.2%
280,242	290,703	(10,461)	-3.6%
862,107	878,265	(16,158)	-1.8%
0	0	0	
862,107	878,265	(16,158)	-1.8%

Operating Expense

59,126	70,927	11,801	16.6%	Salaries
49,966	33,119	(16,847)	-50.9%	Benefits
109,092	104,046	(5,046)	-4.8%	Total Salaries & Benefits
0	5,000	5,000	100.0%	Professional Fees/Registry
6,928	8,084	1,156	14.3%	Supplies
9,786	16,284	6,498	39.9%	Purchased Services
1,342	455	(887)	-195.0%	Depreciation
3,688	1,445	(2,243)	-155.2%	Other Expense
130,836	135,314	4,478	3.3%	Total Direct Expense
28,875	14,377	(14,499)	-100.8%	Allocation of Direct Admin Exp
54,624	56,494	1,870	3.3%	Overhead Allocation
214,336	206,184	(8,151)	-4.0%	Total Expenses
(120,988)	(88,403)	(32,586)	-36.9%	Net Income (Loss)

538,602	664,539	125,937	19.0%
290,826	240,037	(50,789)	-21.2%
829,428	904,576	75,148	8.3%
0	35,000	35,000	100.0%
48,523	56,998	8,475	14.9%
89,831	113,788	23,957	21.1%
3,503	3,185	(318)	-10.0%
14,085	10,048	(4,037)	-40.2%
985,369	1,123,595	138,226	12.3%
179,765	182,260	2,495	1.4%
409,979	469,101	59,122	12.6%
1,575,113	1,774,956	199,843	11.3%
(713,006)	(896,691)	183,685	-20.5%

Key Ratios

\$ 394.33	\$ 208.18	\$ 186.15	89.4%	Gross Pt Revenue/Billable Visit
\$ 234.54	\$ 177.65	\$ 56.89	32.0%	Total Revenue/Billable Visit (excl Oth Rev)
\$ 328.73	\$ 204.09	\$ (124.64)	-61.1%	Direct Costs/Billable Visit
\$ 209.80	\$ 106.89	\$ (102.90)	-96.3%	Indirect Costs/Billable Visit
\$ 538.53	\$ 310.99	\$ (227.54)	-73.2%	Total Medical Cost/Billable Visit
\$ (303.99)	\$ (133.34)	\$ (170.65)	128.0%	Net Income(Loss)/Billable Visit
84.5%	46.7%	-37.8%	-81.0%	Benefits as a % of Salaries
41.8%	41.8%	0.0%	0.0%	Overhead % of Direct Exp
\$ 155				Gross Patient AR (in 000s)
\$ (42)				Less Reserves (in 000s)
\$ 113				Net AR (in 000s)
\$ 101				Wrap AR (in 000s)
31.5				Gross AR Days
\$ 131				Cash Receipts (in 000s)

\$ 218.08	\$ 208.29	\$ 9.79	4.7%
\$ 165.06	\$ 177.75	\$ (12.69)	-7.1%
\$ 188.66	\$ 227.40	\$ 38.74	17.0%
\$ 112.91	\$ 131.83	\$ 18.91	14.3%
\$ 301.57	\$ 359.23	\$ 57.66	16.1%
\$ (136.51)	\$ (181.48)	\$ 44.97	-24.8%
54.0%	36.1%	-17.9%	-49.5%
41.6%	41.8%	0.1%	0.3%

Payer Mix

2.4%	0.9%	1.5%	168.8%	Medicare
32.1%	33.1%	-0.9%	-2.8%	Medi-Cal
64.2%	65.0%	-0.7%	-1.1%	Medi-Cal Managed Care
0.6%	0.7%	-0.1%	-11.3%	Insurance
0.6%	0.4%	0.2%	47.3%	Self Pay / Indigent
100.0%	100.0%	0.0%	0.0%	

2.5%	0.9%	1.6%	176.2%
31.5%	33.1%	-1.5%	-4.6%
64.1%	65.0%	-0.8%	-1.3%
0.9%	0.7%	0.2%	32.1%
0.9%	0.4%	0.5%	133.5%
100.0%	100.0%	0.0%	0.0%

**Healthy Beginnings - French Camp
Income Statement
January 31, 2018**

Current Month			
Actual	Budget	Variance	% Var

791	896	(105)	-11.7%	Total Visits
398	896	(498)	-55.6%	Billable Visits
13.1	13.8	0.7	5.0%	Total FTEs
148,280	151,103	(2,823)	-1.9%	Gross Patient Revenue
(30,985)	2,034	(33,019)	-1623.3%	Contractual Adjustments
39,389	54,282	(14,892)	-27.4%	Capitation Rev
156,684	207,419	(50,734)	-24.5%	Net Patient Revenue
0	0	0		Other Revenue
156,684	207,419	(50,734)	-24.5%	Total Revenue
Operating Expense				
67,851	81,054	13,203	16.3%	Salaries
61,194	47,308	(13,886)	-29.4%	Benefits
129,045	128,362	(683)	-0.5%	Total Salaries & Benefits
40,024	8,533	(31,491)	-369.1%	Professional Fees/Registry
11,814	12,796	982	7.7%	Supplies
7,414	16,297	8,883	54.5%	Purchased Services
2,701	2,700	(1)	0.0%	Depreciation
727	1,120	393	35.1%	Other Expense
191,726	169,808	(21,918)	-12.9%	Total Direct Expense
27,281	15,739	(11,542)	-73.3%	Allocation of Direct Admin Exp
80,045	70,895	(9,151)	-12.9%	Overhead Allocation
299,052	256,442	(42,610)	-16.6%	Total Expenses
(142,368)	(49,023)	(93,345)	-190.4%	Net Income (Loss)

Year to Date			
Actual	Budget	Variance	% Var

5,622	5,099	523	10.3%	Total Visits
5,622	5,099	523	10.3%	Billable Visits
12.2	13.8	1.5	11.1%	Total FTEs
996,036	860,038	135,999	15.8%	Gross Patient Revenue
(303,868)	11,573	(315,441)	-2725.7%	Contractual Adjustments
300,584	308,956	(8,372)	-2.7%	Capitation Rev
992,753	1,180,567	(187,814)	-15.9%	Net Patient Revenue
0	0	0		Other Revenue
992,753	1,180,567	(187,814)	-15.9%	Total Revenue
Operating Expense				
476,775	668,193	191,418	28.6%	Salaries
284,016	330,281	46,265	14.0%	Benefits
760,791	998,474	237,683	23.8%	Total Salaries & Benefits
117,556	59,733	(57,823)	-96.8%	Professional Fees/Registry
82,206	93,544	11,338	12.1%	Supplies
65,868	113,831	47,963	42.1%	Purchased Services
18,906	18,903	(3)	0.0%	Depreciation
5,060	7,800	2,740	35.1%	Other Expense
1,050,386	1,292,285	241,899	18.7%	Total Direct Expense
157,195	147,531	(9,665)	-6.6%	Allocation of Direct Admin Exp
432,543	539,529	106,986	19.8%	Overhead Allocation
1,640,125	1,979,345	339,220	17.1%	Total Expenses
(647,372)	(798,778)	151,406	-19.0%	Net Income (Loss)

Key Ratios

\$ 372.56	\$ 168.64	\$ 203.92	120.9%	Gross Pt Revenue/Billable Visit
\$ 393.68	\$ 231.49	\$ 162.19	70.1%	Total Revenue/Billable Visit (excl Oth Rev)
\$ 481.72	\$ 189.52	\$ (292.20)	-154.2%	Direct Costs/Billable Visit
\$ 269.67	\$ 96.69	\$ (172.98)	-178.9%	Indirect Costs/Billable Visit
\$ 751.39	\$ 286.21	\$ (465.18)	-162.5%	Total Medical Cost/Billable Visit
\$ (357.71)	\$ (54.71)	\$ (302.99)	553.8%	Net Income(Loss)/Billable Visit
90.2%	58.4%	-31.8%	-54.5%	Benefits as a % of Salaries
41.8%	41.8%	0.0%	0.0%	Overhead % of Direct Exp
\$ 147				Gross Patient AR (in 000s)
\$ (42)				Less Reserves (in 000s)
\$ 105				Net AR (in 000s)
\$ 90				Wrap AR (in 000s)
35.6				Gross AR Days
\$ 127				Cash Receipts (in 000s)

\$ 177.17	\$ 168.67	\$ 8.50	5.0%	Gross Pt Revenue/Billable Visit
\$ 176.58	\$ 231.53	\$ (54.95)	-23.7%	Total Revenue/Billable Visit (excl Oth Rev)
\$ 186.83	\$ 253.44	\$ 66.60	26.3%	Direct Costs/Billable Visit
\$ 104.90	\$ 134.74	\$ 29.85	22.1%	Indirect Costs/Billable Visit
\$ 291.73	\$ 388.18	\$ 96.45	24.8%	Total Medical Cost/Billable Visit
\$ (115.15)	\$ (156.65)	\$ 41.50	-26.5%	Net Income(Loss)/Billable Visit
59.6%	49.4%	-10.1%	-20.5%	Benefits as a % of Salaries
41.2%	41.8%	0.6%	1.4%	Overhead % of Direct Exp

Payer Mix

17.3%	3.4%	13.9%	405.1%	Medicare	5.4%	3.4%	2.0%	58.1%
16.3%	26.0%	-9.7%	-37.2%	Medi-Cal	23.7%	26.0%	-2.3%	-8.8%
62.3%	68.9%	-6.6%	-9.6%	Medi-Cal Managed Care	67.0%	68.9%	-1.8%	-2.7%
1.5%	1.4%	0.2%	11.0%	Insurance	2.2%	1.4%	0.8%	58.5%
2.6%	0.4%	2.2%	618.9%	Self Pay / Indigent	1.7%	0.4%	1.3%	370.6%
100.0%	100.0%	0.0%	0.0%		100.0%	100.0%	0.0%	0.0%

**SJCC Hazelton Clinic
Income Statement
January 31, 2018**

Current Month				Year to Date			
Actual	Budget	Variance	% Var	Actual	Budget	Variance	% Var
661	600	61	10.2%	4,609	3,276	1,333	40.7%
398	600	(202)	-33.7%	2,695	3,276	(581)	-17.7%
2.3	5.0	2.7	54.4%	3.2	5.0	1.8	36.2%
84,826	107,371	(22,545)	-21.0%	525,867	586,455	(60,588)	-10.3%
(63,451)	19,343	(82,794)	-428.0%	(380,197)	105,648	(485,845)	-459.9%
32,916	36,668	(3,752)	-10.2%	246,380	200,275	46,105	23.0%
54,291	163,382	(109,091)	-66.8%	392,050	892,378	(500,328)	-56.1%
0	0	0		0	0	0	
54,291	163,382	(109,091)	-66.8%	392,050	892,378	(500,328)	-56.1%
Operating Expense							
3,536	21,554	18,018	83.6%	32,135	150,376	118,241	78.6%
3,647	19,916	16,269	81.7%	15,030	115,934	100,904	87.0%
7,184	41,470	34,286	82.7%	47,165	266,310	219,145	82.3%
31,470	0	(31,470)		162,169	0	(162,169)	
3,879	12,301	8,422	68.5%	19,731	85,339	65,608	76.9%
120,225	123,225	3,000	2.4%	821,064	854,735	33,672	3.9%
0	0	0		0	0	0	
(113)	3,570	3,683	103.2%	778	24,776	23,998	96.9%
162,645	180,566	17,921	9.9%	1,050,907	1,231,160	180,253	14.6%
15,607	11,184	(4,423)	-39.5%	82,993	101,439	18,446	18.2%
69,270	76,903	7,633	9.9%	438,606	524,351	85,745	16.4%
247,522	268,653	21,131	7.9%	1,572,506	1,856,950	284,444	15.3%
(193,231)	(105,272)	(87,959)	-83.6%	(1,180,456)	(964,572)	(215,884)	22.4%
Key Ratios							
\$ 213.13	\$ 178.95	\$ 34.18	19.1%	\$ 195.13	\$ 179.02	\$ 16.11	9.0%
\$ 136.41	\$ 272.30	\$ (135.89)	-49.9%	\$ 145.47	\$ 272.40	\$ (126.93)	-46.6%
\$ 408.65	\$ 300.94	\$ (107.71)	-35.8%	\$ 389.95	\$ 375.81	\$ (14.14)	-3.8%
\$ 213.26	\$ 146.81	\$ (66.45)	-45.3%	\$ 193.54	\$ 191.02	\$ (2.52)	-1.3%
\$ 621.91	\$ 447.76	\$ (174.16)	-38.9%	\$ 583.49	\$ 566.83	\$ (16.66)	-2.9%
\$ (485.50)	\$ (175.45)	\$ (310.05)	176.7%	\$ (438.02)	\$ (294.44)	\$ (143.58)	48.8%
103.1%	92.4%	-10.7%	-11.6%	46.8%	77.1%	30.3%	39.3%
42.6%	42.6%	0.0%	0.0%	41.7%	42.6%	0.9%	2.0%
\$ 247							
\$ (59)							
\$ 188							
\$ 127							
\$ 81.6							
\$ 38							
Payer Mix							
4.6%	28.8%	-24.1%	-83.9%	5.0%	28.8%	-23.7%	-82.5%
32.6%	2.7%	29.9%	1115.1%	33.5%	2.7%	30.8%	1148.6%
49.8%	65.9%	-16.1%	-24.4%	49.1%	65.9%	-16.8%	-25.4%
8.1%	1.0%	7.1%	740.4%	6.4%	1.0%	5.4%	563.9%
4.9%	1.7%	3.2%	183.7%	6.0%	1.7%	4.3%	244.4%
100.0%	100.0%	0.0%	0.0%	100.0%	100.0%	0.0%	0.0%

**SJCC Manteca Clinic
Income Statement
January 31, 2018**

Current Month			
Actual	Budget	Variance	% Var
540	420	120	28.6%
519	420	99	23.6%
10.3	11.0	0.7	6.3%
120,847	77,280	43,567	56.4%
(26,710)	(9,412)	(17,298)	-183.8%
26,890	25,503	1,387	5.4%
121,027	93,371	27,656	29.6%
0	0	0	
121,027	93,371	27,656	29.6%
Operating Expense			
52,069	57,750	5,681	9.8%
46,000	43,263	(2,737)	-6.3%
98,069	101,013	2,944	2.9%
40,408	0	(40,408)	
43,335	7,417	(35,918)	-484.3%
5,378	1,666	(3,712)	-222.8%
8,790	0	(8,790)	
14,498	1,766	(12,732)	-721.0%
210,478	111,862	(98,616)	-88.2%
22,234	8,050	(14,184)	-176.2%
85,328	45,349	(39,979)	-88.2%
318,040	165,261	(152,780)	-92.4%
(197,013)	(71,889)	(125,124)	-174.1%

Year to Date			
Actual	Budget	Variance	% Var
2,558	2,550	8	0.3%
2,427	2,550	(123)	-4.8%
6.4	11.0	4.6	41.5%
517,975	469,200	48,775	10.4%
(327,035)	(57,144)	(269,891)	472.3%
135,627	154,841	(19,214)	-12.4%
326,567	566,897	(240,330)	-42.4%
0	0	0	
326,567	566,897	(240,330)	-42.4%
Operating Expense			
200,148	402,310	202,162	50.3%
138,179	272,795	134,616	49.3%
338,327	675,105	336,778	49.9%
118,792	0	(118,792)	
307,209	51,921	(255,288)	-491.7%
85,249	11,666	(73,583)	-630.7%
43,805	0	(43,805)	
56,076	12,364	(43,712)	-353.5%
949,458	751,056	(198,402)	-26.4%
81,747	82,037	289	0.4%
384,910	304,478	(80,432)	-26.4%
1,416,115	1,137,571	(278,544)	-24.5%
(1,089,548)	(570,673)	(518,875)	90.9%

Key Ratios

\$ 232.85	\$ 184.00	\$ 48.85	26.5%	Gross Pt Revenue/Billable Visit
\$ 233.19	\$ 222.31	\$ 10.88	4.9%	Total Revenue/Billable Visit (excl Osh Rev)
\$ 405.55	\$ 266.34	\$ (139.21)	-52.3%	Direct Costs/Billable Visit
\$ 207.25	\$ 127.14	\$ (80.11)	-63.0%	Indirect Costs/Billable Visit
\$ 612.79	\$ 393.48	\$ (219.32)	-55.7%	Total Medical Cost/Billable Visit
\$ (379.60)	\$ (171.16)	\$ (208.44)	121.8%	Net Income(Loss)/Billable Visit
88.3%	74.9%	-13.4%	-17.9%	Benefits as a % of Salaries
40.5%	40.5%	0.0%	0.0%	Overhead % of Direct Exp
\$ 144				Gross Patient AR (in 000s)
\$ (35)				Less Reserves (in 000s)
\$ 110				Net AR (in 000s)
\$ 256				Wrap AR (in 000s)
\$ 47.7				Gross AR Days
\$ 48				Cash Receipts (in 000s)

\$ 213.42	\$ 184.00	\$ 29.42	16.0%
\$ 134.56	\$ 222.31	\$ (87.76)	-39.5%
\$ 391.21	\$ 294.53	\$ (96.67)	-32.8%
\$ 192.28	\$ 151.57	\$ (40.70)	-26.9%
\$ 583.48	\$ 446.11	\$ (137.38)	-30.8%
\$ (448.93)	\$ (223.79)	\$ (225.13)	100.6%
69.0%	67.8%	-1.2%	-1.8%
40.5%	40.5%	0.0%	0.0%

Payer Mix

5.5%	13.1%	-7.6%	-57.8%	Medicare
16.8%	10.9%	5.8%	53.5%	Medi-Cal
74.9%	73.0%	1.9%	2.6%	Medi-Cal Managed Care
-0.1%	1.7%	-1.8%	-107.9%	Insurance
2.9%	1.3%	1.6%	129.6%	Self Pay / Indigent
100.0%	100.0%	0.0%	0.0%	

7.0%	13.1%	-6.1%	-46.8%
15.8%	10.9%	4.9%	44.6%
72.3%	73.0%	-0.7%	-0.9%
1.2%	1.7%	-0.5%	-31.4%
3.7%	1.3%	2.5%	194.0%
100.0%	100.0%	0.0%	0.0%

**FQ Administration
Income Statement
January 31, 2018**

Current Month			
Actual	Budget	Variance	% Var

4.1	6.2	2.1	33.9%	Total FTEs
0	0	0		Total Patient Revenue
0	0	0		(Deductions) from Revenue
0	0	0		Other Allowances
0	0	0		Net Revenue
0	0	0		Other Revenue
0	0	0		Total Revenue

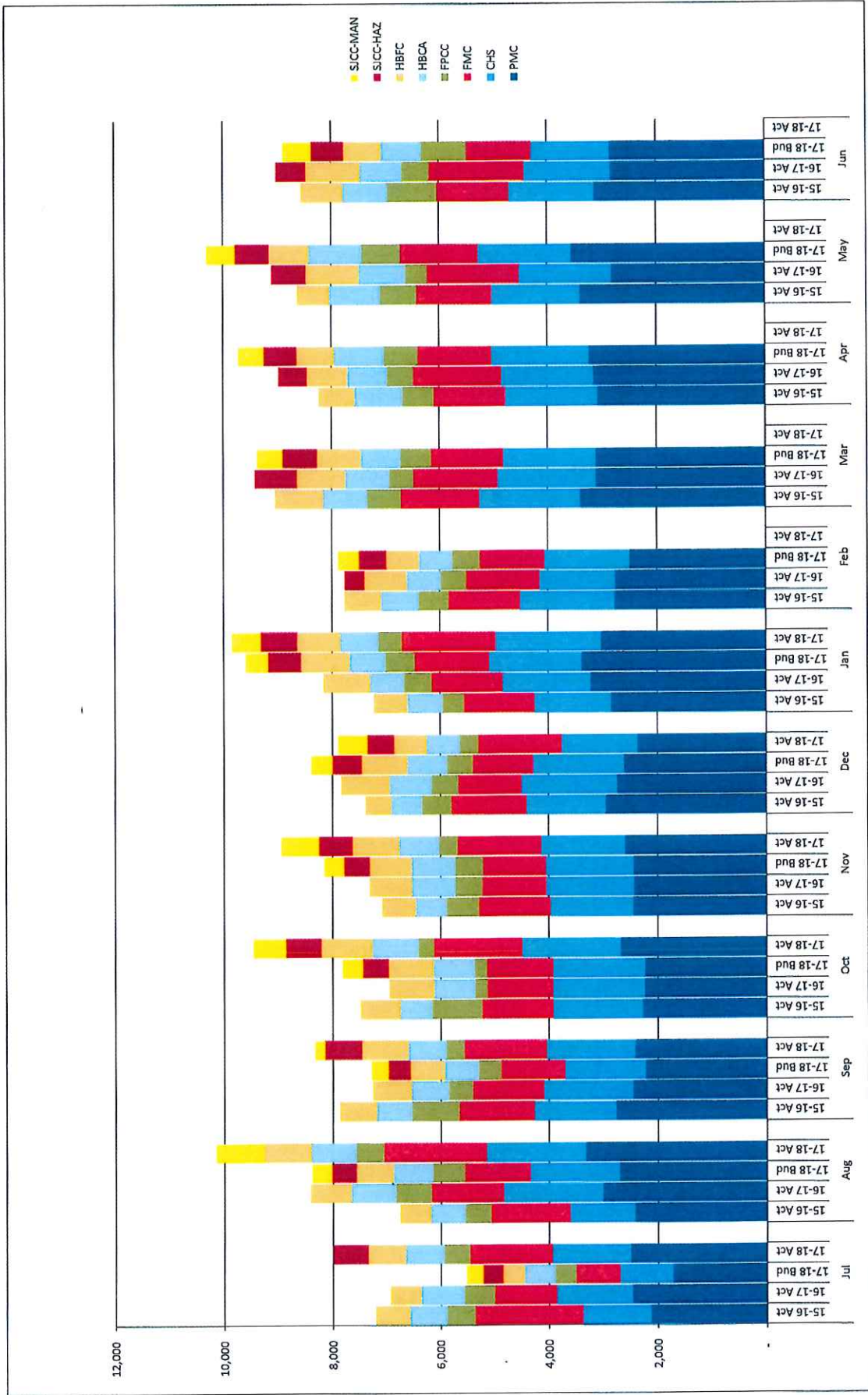
Operating Expense				
35,057	49,287	14,230	28.9%	Salaries
23,556	40,494	16,938	41.8%	Benefits
58,614	89,781	31,167	34.7%	Total Salaries & Benefits
97,973	45,500	(52,473)	-115.3%	Professional Fees/Registry
125	317	192	60.7%	Supplies
135,761	39,471	(96,290)	-244.0%	Purchased Services
3,257	3,257	0	0.0%	Depreciation
22,090	2,625	(19,465)	-741.5%	Other Expense
317,819	180,951	(136,868)	-75.6%	Total Direct Expense
0	0	0		Overhead Allocation
317,819	180,951	(136,868)	-75.6%	Total Expenses
(317,819)	(180,951)	(136,868)	75.6%	Net Income (Loss)

Year to Date			
Actual	Budget	Variance	% Var

4.5	6.2	2	27.3%
0	0	0	
0	0	0	
0	0	0	
0	0	0	
0	0	0	
0	0	0	

373,838	341,754	(32,084)	-9.4%
175,170	276,240	101,070	36.6%
549,008	617,994	68,986	11.2%
430,385	318,500	(111,885)	-35.1%
12,100	2,219	(9,881)	-445.3%
697,425	776,289	78,864	10.2%
22,799	22,799	0	0.0%
23,556	18,375	(5,181)	-28.2%
1,735,273	1,756,176	20,903	1.2%
0	0	0	
1,735,273	1,756,176	20,903	1.2%
(1,735,273)	(1,756,176)	20,903	-1.2%

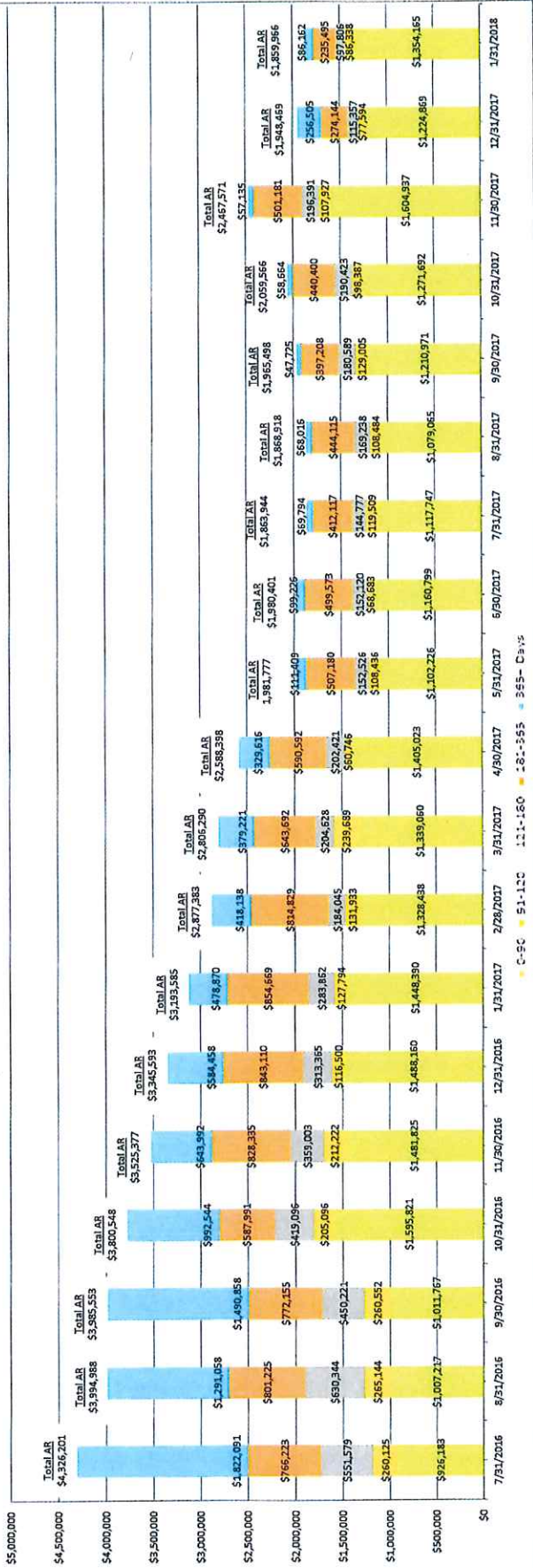
FQHC Visits January 2018



FQHC Visits January 2018

Clinic	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total Year
15-16 Act CHS	1,248	1,198	1,496	1,644	1,513	1,458	1,405	1,735	1,861	1,700	1,626	1,569	18,453
FMC	1,979	1,444	1,381	1,304	1,317	1,380	1,282	1,314	1,456	1,311	1,390	1,321	16,879
FPCC	528	479	891	932	598	560	411	569	633	594	684	931	7,810
PMC	2,132	2,421	2,768	2,276	2,454	2,947	2,852	2,780	3,401	3,083	3,399	3,136	33,649
HBCA	691	645	662	603	580	570	660	701	808	884	933	825	8,562
HBFC	646	577	675	736	630	481	624	671	877	657	597	775	7,946
Total	7,224	6,764	7,873	7,495	7,092	7,396	7,234	7,770	9,036	8,229	8,629	8,557	93,299
16-17 Act CHS	1,383	1,827	1,631	1,686	1,605	1,752	1,618	1,380	1,815	1,693	1,691	1,584	19,665
FMC	1,143	1,333	1,308	1,199	1,170	1,160	1,312	1,348	1,552	1,630	1,707	1,763	16,625
FPCC	562	669	451	228	503	503	523	471	456	489	405	508	5,768
PMC	2,470	3,015	2,458	2,241	2,438	2,747	3,224	2,771	3,112	3,156	2,822	2,834	33,288
HBCA	813	821	702	766	823	783	632	651	813	733	865	778	9,180
HBFC	572	753	721	836	785	893	853	782	888	751	977	997	9,808
SJCC-Haz	-	-	-	-	-	-	-	364	780	523	631	553	2,851
Total	6,943	8,418	7,271	6,956	7,324	7,838	8,162	7,767	9,416	8,975	9,098	9,017	97,185
17-18 Bud CHS	968	1,645	1,475	1,686	1,605	1,669	1,700	1,562	1,703	1,786	1,703	1,434	18,936
FMC	800	1,199	1,183	1,212	1,159	1,104	1,382	1,183	1,332	1,377	1,460	1,193	14,584
FPCC	393	599	404	229	509	479	548	512	579	624	717	845	6,438
PMC	1,729	2,706	2,227	2,239	2,445	2,616	3,385	2,502	3,113	3,237	3,561	2,850	32,610
HBCA	569	739	635	766	823	746	663	631	737	928	977	748	8,962
HBFC	400	680	649	838	786	850	896	604	803	690	730	694	8,620
SJCC-Haz	360	447	399	476	465	529	600	514	628	600	628	600	6,246
SJCC-Man	300	368	323	378	361	400	420	378	484	483	528	525	4,948
Total	5,519	8,383	7,295	7,824	8,153	8,393	9,594	7,886	9,379	9,725	10,304	8,889	101,344
17-18 Act CHS	1,432	1,818	1,622	1,814	1,538	1,381	1,940						11,545
FMC	1,516	1,910	1,513	1,627	1,526	1,536	1,738						11,366
FPCC	479	518	337	292	360	345	438						2,769
PMC	2,506	3,325	2,418	2,680	2,600	2,368	3,032						18,929
HBCA	731	828	716	866	749	625	708						5,223
HBFC	695	874	866	933	859	604	791						5,622
SJCC-Haz	630	885	674	643	614	502	661						4,609
SJCC-Man	-	-	179	612	696	531	540						2,558
Total	7,989	10,158	8,325	9,467	8,942	7,892	9,848	-	-	-	-	-	62,621

San Joaquin County Clinics
Accounts Receivable Aging
7/31/16 - 1/31/18



	7/31/2016	8/31/2016	9/30/2016	10/31/2016	11/30/2016	12/31/2016	1/31/2017	2/28/2017	3/31/2017	4/30/2017	5/31/2017	6/30/2017	7/31/2017	8/31/2017	9/30/2017	10/31/2017	11/30/2017	12/31/2017	1/31/2018	
0-90	\$926,183	\$1,007,217	\$1,011,767	\$1,481,825	\$1,488,160	\$1,448,390	\$1,328,438	\$1,339,060	\$1,405,023	\$1,102,226	\$1,160,799	\$1,117,747	\$1,079,065	\$1,271,692	\$1,604,937	\$1,224,869	\$1,604,937	\$1,224,869	\$1,354,165	
91-120	\$260,125	\$285,144	\$260,552	\$212,222	\$116,500	\$127,794	\$131,933	\$239,689	\$60,746	\$108,436	\$68,683	\$119,509	\$108,484	\$98,387	\$107,927	\$77,594	\$107,927	\$77,594	\$6,338	
121-180	\$551,579	\$630,344	\$450,221	\$359,003	\$313,365	\$283,862	\$184,045	\$204,628	\$202,421	\$152,526	\$152,120	\$144,777	\$169,238	\$190,423	\$180,589	\$115,357	\$196,391	\$115,357	\$7,806	
181-365	\$766,223	\$801,225	\$772,155	\$828,335	\$843,110	\$854,669	\$814,829	\$643,692	\$590,592	\$587,180	\$499,573	\$412,117	\$444,115	\$440,400	\$501,181	\$274,144	\$57,135	\$274,144	\$25,495	
365+ Days	\$1,822,091	\$1,291,058	\$1,490,858	\$643,992	\$584,458	\$478,870	\$418,138	\$379,221	\$329,616	\$111,409	\$99,226	\$69,794	\$68,016	\$58,664	\$57,725	\$2,059,566	\$2,467,571	\$2,059,566	\$1,859,966	
	\$4,326,201	\$3,994,988	\$3,985,559	\$3,525,377	\$3,345,593	\$3,193,585	\$2,877,383	\$2,806,290	\$2,588,398	\$1,981,777	\$1,980,401	\$1,863,944	\$1,863,944	\$1,868,918	\$1,965,498	\$2,059,566	\$2,467,571	\$1,948,469	\$1,859,966	
Change over the prev. mo.				\$-275,171	\$-179,794	\$-152,008	\$-316,202	\$-71,093	\$-217,892	\$-606,621	\$-1,376	\$-116,457	\$4,974	\$94,068	\$408,005	\$-519,102	\$408,005	\$-519,102	\$-88,503	
Change over 7/31/2016				\$-800,824	\$-980,608	\$-1,132,616	\$-1,448,818	\$-1,519,911	\$-1,737,803	\$-2,344,424	\$-3,345,800	\$-3,457,883	\$-3,462,257	\$-3,457,283	\$-3,240,703	\$-3,266,635	\$-1,858,630	\$-1,858,630	\$-2,046,519	\$-2,125,587

Revenue Cycle KPI
 SJCC only
 January 2018 end of month

KEY PERFORMANCE INDICATORS										
	Target	07/31/17	08/31/17	09/30/17	10/31/17	11/30/17	12/31/17	01/31/18		
SJCC Business Office										
Cash Collections	Actual	\$1,118,566	\$971,169	\$880,576	\$851,591	\$1,035,727	\$996,698	\$1,083,923		
Gross AR		\$1,863,944	\$1,868,918	\$1,965,498	\$2,059,556	\$2,467,571	\$1,928,231	\$1,859,966		
Gross AR Days (90 day average)	66.5	39.7	37.9	40.9	39.3	46.7	36.6	35.4		
Average Daily Revenue (90 day average)		\$46,892	\$49,259	\$48,042	\$52,449	\$52,786	\$52,695	\$52,471		
Wrap AR		\$1,699,236	\$1,750,791	\$1,826,283	\$2,143,772	\$2,322,127	\$2,424,512	\$2,821,101		
AR over 90 Days		\$746,197	\$789,853	\$754,527	\$787,874	\$862,634	\$703,361	\$505,901		
% of AR over 90 Days		40%	42%	38%	38%	35%	36%	27%		
AR over 120 Days		\$628,688	\$681,359	\$625,322	\$689,487	\$754,707	\$625,767	\$419,463		
% of AR over 120 Days		34%	36%	32%	33%	31%	32%	23%		
AR over 180 Days		\$481,911	\$512,131	\$444,933	\$440,400	\$558,315	\$510,410	\$321,857		
% of AR over 180 Days		26%	27%	23%	21%	23%	26%	17%		
AR over 365 Days		\$69,794	\$68,016	\$47,725	\$58,664	\$57,135	\$20,238	\$86,162		
% of AR over 365 Days		4%	4%	2%	3%	2%	1%	5%		
New Bad Debt Assignments		\$21,351	\$3,234	\$3,035	\$3,155	\$0	\$0	\$0		
Bad Debt Amount as a % of Gross Revenue		1%	0%	0%	0%	0%	0%	0%		
Bad Debt Cash Receipts		\$0	\$5,960	\$5,989	\$2,176	\$2,093	\$638	\$1,076		
Credit Balance Total		\$18,564	\$17,932	\$19,931	\$21,700	\$47,802	\$25,897	\$24,848		
Credit Balances over 60 days		\$17,091	\$15,398	\$17,191	\$19,378	\$21,478	\$24,929	\$24,974		
Credit Balances over 180 days		\$12,302	\$12,534	\$13,063	\$13,459	\$14,659	\$15,906	\$17,431		
Unlocked Visits Report for All Doctors at all Locations as of e.o.m., eff. 10/1/2015		547	786	299	493	509	556	917		
Total Number of claims for month		11,456	14,202	13,814	14,032	17,258	13,330	15,456		
Total Number of clean claims for month		11,122	13,959	13,493	13,605	16,932	13,159	14,981		
Total number of error claims for month		334	243	321	427	326	171	475		
Clean Claims from ClaimRemedi	>85%	97%	98%	96%	97%	98%	99%	97%		

Revenue Cycle KPI
 SJCC only
 January 2018 end of month

KEY PERFORMANCE INDICATORS		07/31/17	08/31/17	09/30/17	10/31/17	11/30/17	12/31/17	01/31/18
	Target							

We saw a decrease in our AR for the month of January by \$68K which resulted in dropping our AR days by 1.2. Cash collections were good coming in at a little over \$1M in which we received \$514K in Wrap payments as well as \$191K in PACT. We submitted an additional 2156 claims for the month of January (85% clean). We continue to reconcile claims that are received in the claim scrubber and work the claims on a daily basis that are rejected/removed. The claims holding for Manteca and PHS are continuing to impact our AR until our EDI claim submission has been approved by the State. In order to prevent timely denials, once the application has been approved, we have gotten the authorization to submit each claim-now, via paper, with our acknowledgement letter from the State, to hold our filing status (date received) for each claim. At the end of January there were 1216 claims valued at \$285,066 holding for Manteca and 967 claims valued at \$119,409 holding for PHS.

SJCC

Summary of Unlocked and Unclaimed Accounts

As of 01/31/18

Clinic	Total	Jan	Dec	Nov	Oct	Sep	Aug	Jul
Children's Health Services	224	224	-	-	-	-	-	-
Family Medicine Clinic	440	318	68	32	20	1	1	-
Family Practice Clinic	-	-	-	-	-	-	-	-
Primary Medicine Clinic	110	103	4	3	-	-	-	-
Healthy Beginnings - CA	19	19	-	-	-	-	-	-
Healthy Beginnings - FC	77	62	14	1	-	-	-	-
Hazelton	34	25	1	1	2	2	2	1
Manteca	7	5	-	1	1	-	-	-
Clinic Totals by Month	911	756	87	38	23	3	3	1

FQ Clinic Audit by HIM
2/13/2018
Service Dates: 1/1/18 - 1/31/18

CLINIC	PHYSICIAN	RENDERING PHYSICIAN	ACCT. #	DOS	CODE REVISION	Successfully Coded First Sample	After 2nd Audit- Needs Further Education *
PMC	Soujanya Sodavarapu		642551	1/2/2018	99214 - 99213	N	N
PMC	Jane Sonneland	Megha Goyal	640545	1/2/2018	99214 - 99213	N	N
PMC	Arshian Mahajan		644328	1/2/2018	99214 - 99213	N	N
PMC	Gary Baumgarten	Satinder Singh	640407	1/2/2018	99212 - 99213	N	N
PMC	Richard Starve		641197	1/3/2018		Y	
FMC	Lorna Nisperos	Farhan Fadoo	641132	1/2/2018		Y	
FMC	Amina Moheyuddin	Johnny Yep	651998	1/2/2018	99213 - 99214	N	N
FMC	Jeff Chiu		645640	1/2/2018	99213 - 99214	N	Y
FMC	Monish Sodhi	Eric Chapa	641917	1/4/2018	99213 - 99214	N	N
FMC	Ramona Bahnam	Bhanu Wunnava	644204	1/5/2018	99213 - 99214	N	N
CHS	Neha Vashishtha		664165	1/4/2018		Y	
CHS	Ashish Loomba		659738	1/5/2018		Y	
CHS	Imeline Troncales		648382	1/5/2018		Y	
CHS	Mamta Jain		652615	1/8/2018		Y	
CHS	Toni Moody		652636	1/22/2018		Y	
HB CA ST	Jason Bass		657211	1/4/2018	99202 - 99201	N	N
HB CA ST	Anh Le		645015	1/5/2018	99214 - 99212	N	N
HB CA ST	Tonja Harris Stansil		658828	1/9/2018		Y	
HB CA ST	Mandana Motameni	Lloyd Lee	645011	1/9/2018		Y	
HB CA ST	Rebecca Morris	Jason Bass	657212	1/10/2018		Y	
HB FC	Mary Jane Bovo		641038	1/2/2018		Y	
HB FC	Tonya Harris Stansil		658909	1/4/2018	99213 - 99211	N	N
HB FC	Bennye Rodgers		659867	1/8/2018		Y	
HB FC	Lloyd Lee		659941	1/9/2018		Y	
HB FC	Cathryn Davis	Lloyd Lee	646402	1/9/2018	99214 - 99211	N	N
FP CA ST	Regina Burgos	Farhan Fadoo	642212	1/4/2018	99213 - 99214	N	N
FP CA ST	Roy Blanco		644776	1/9/2018		Y	
HAZELTON	Russell Berscheid	Richard Starve	641366	1/2/2018	99212 - 99214	N	N
HAZELTON	Nancy Heffernan	Farhan Fadoo	641411	1/3/2018		Y	
MANTECA	Colby Morton	Farhan Fadoo	640507	1/2/2018	99214 - 99213	N	N
MANTECA	Patara Rojanavongse		640632	1/2/2018		Y	
1st Review Successful						17	
After 1st Review & addtl tests, no further Educ Required						15	
Further Education Required						1	
Total						33	

Footnotes:

*If there were any code changes required base on the initial Providers coding, 3 more accounts were selected for this