

San Joaquin Community Clinics
Financial Statement Comments
February 28, 2018

Summary

The Total visits for the month of February were 8,887. February's billable visits of 8,252 were greater than budgeted visits of 7,886 by 366 or 4.6%. Year-to-date billable visits are ahead of budget by 3,254 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 \$1.5 million was greater than budget by \$65,000 or 4.5%. Net Patient Revenue of \$1.4M was greater than budget by \$44,000 or 3.2%. Capitation Revenue of \$475,000 was greater than budget by \$13,000 or 2.9%. 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 3.7% ahead of budget.

Total Expenses of \$2.1 million were less than budget by \$174,000 (7.8%). The resulting Net Loss of \$664,000 was less than Budgeted Net Loss by \$217,000.

Explanations of major variances are explained below.

Revenue

As mentioned above, Gross Patient Revenue was greater than budget by \$65,000 or 4.5%. Gross Patient Revenue per visit was \$183.60, which minimally less than budget by 0.2%. Managed Care Medi-Cal was \$38,000, or 3.8%, greater than budget; Medicare was \$10,000, or 4.8%, greater than budget; Medi-Cal Fee-For-Service was \$9,000, or 4.7%, greater than budget; and Self Pay was \$9,000, or 26.4%, greater than budget. Net Patient Revenue of \$1.4M was greater than budget by \$44,000. Deductions from revenue were unfavorable to budget by \$35,000 (6.2%).

Capitation revenue of \$475,000 was greater than budget by \$13,000 (2.9%).

Expenses

Salaries & Benefits of \$1.0 million were less than budget by \$262,000 (20.9%). Salaries of \$687,000 were better than budget by \$144,000 or 17.4%. This favorable variance is due to favorable Physician salaries of \$242,000 offset by unfavorable variances for Mid-level Provides of \$54,000 and Non-Providers of \$44,000. The Physician salaries positive variance was due to twelve provider vacancies, in which two of these vacancies are currently being filled by Locums. The Locums are working in the following Clinics: Healthy Beginnings-French Camp = 1.0 FTE, and SJCC-Hazelton = 1.0 FTE.

**San Joaquin Community Clinics
Financial Statement Comments
February 28, 2018**

Benefits of \$305,000 were also favorable to budget by \$117,000 or 27.8%, predominantly due to favorable variances in Vacation/Holiday/Sick Leave (\$65,000), Group Health (\$10,000), and Pension & Retirement (\$32,000) as a result of the provider vacancies. Benefits as a percentage of salaries was 44.3%, below budget of 50.7% and also below year-to-date of 52.5%

Professional Fees/Registry of \$148,000 exceeded budget by \$69,000 (87.7%) primarily due to provider vacancies in clinics identified above in salaries and benefits. The 2.0 FTE locums used in the month of February accounted for \$55,000 of the unfavorable variance. In addition, an Independent Contract Physician in Primary Medicine exceeded budget by \$3,000. The FQ Administration accounted for \$11,000 unfavorable variance for consulting fees for the Interim CFO and Interim FQ Director.

Supplies of \$111,000 were greater than budget by \$16,000 (17.0%). Unfavorable variances in Office Supplies (\$6,000) and Other Minor Equipment (\$28,000) were offset by favorable variance in Minor Medical Equipment (\$16,000). SJCC-Manteca exceeded budget for Office Supplies (\$6,000) and Other Minor Equipment (\$26,000). These were offset by a favorable variance in SJCC-Manteca for Minor Medical Equipment (\$16,000) due to a credit and re-bill of an invoice charged against incorrect P.O.

Purchased Services of \$276,000 were greater than budget by \$70,000 (34.0%), predominantly due to unfavorable variance for eClinical Works in FQ Admin (\$78,000). When the current budget was developed, it was anticipated that eClinical Works costs would terminate in December; therefore, there is no budget for January through June for the monthly support costs. Due to the delay in converting to the Cerner System, additional expenses will be incurred to keep eClinical Works on line through March 2019. This expense has been included in the FY2018-2019 budget.

Depreciation of \$30,000 was greater than budget by \$18,000 (156.6%) due to the new Lease Agreement for SJCC-Manteca Leasehold Improvements, not in budget due to the timing of the lease approval by the County. This expense has been included in the FY2018-19 budget.

Other Expense of \$29,000 was greater than budget by \$12,000 (68.1%). This is predominantly due to monthly rent for the SJCC Manteca facility (\$8,000) and electricity expense for California Street Clinics (\$4,000) not in budget. These expenses have been included in the FY2018-19 budget.

Accounts Receivable

February's Gross Accounts Receivables (AR) of \$1.8 million was \$107,000 less than January and \$175,000 less than December. Average days of revenue in AR is at 33.5, which is down from 35.4 in January and down from 36.6 in December. WRAP accounts receivable is \$1.4 million, which is \$1.2 million lower than January. The decrease in WRAP AR was due a decrease in wrap accounts receivable for prior months for Primary Medicine Clinic (currently being researched) as well as the write-off of uncollectible accounts from prior years due to the delay in Medi-Cal

**San Joaquin Community Clinics
Financial Statement Comments
February 28, 2018**

electronic billing enrollment for Family Practice clinic. These accounts were fully reserved in the Due To / Due From Settlement accounts and there was no impact to net revenues from the write-offs.

Cash collections (excluding capitation) were \$1,136,000 in February, which represents an Increase from January collections of \$1,082,000 and an increase over the FY 2018 average year-to-date of \$1.0 million. Cash collections averaged \$843,000 per month in 2017.

**San Joaquin Community Clinics
Income Statement
February 28, 2018**

Current Month			
Actual	Budget	Variance	% Var

8,887	7,886	1,001	12.7%	Total Visits
8,252	7,886	366	4.6%	Billable Visits
116.9	132.1	15.2	11.5%	Total FTEs
1,515,080	1,450,113	64,966	4.5%	Gross Patient Revenue
(589,589)	(554,944)	(34,645)	-6.2%	Contractual Adjustments
474,671	461,347	13,324	2.9%	Capitation Rev
1,400,162	1,356,516	43,646	3.2%	Net Patient Revenue
0	0	0		Other Revenue
1,400,162	1,356,516	43,646	3.2%	Total Revenue

Year to Date			
Actual	Budget	Variance	% Var

71,508	63,047	8,461	13.4%
66,301	63,047	3,254	5.2%
110.7	132.1	21.4	16.2%
12,510,277	11,592,846	917,431	7.9%
(7,792,539)	(4,423,093)	(3,369,446)	76.2%
3,826,839	3,690,897	135,942	3.7%
8,544,578	10,860,650	(2,316,072)	-21.3%
0	0	0	100.0%
8,544,578	10,860,650	(2,316,072)	-21.3%

Operating Expense

687,003	831,347	144,344	17.4%	Salaries
304,651	421,872	117,221	27.8%	Benefits
991,654	1,253,219	261,565	20.9%	Total Salaries & Benefits
148,315	79,033	(69,282)	-87.7%	Professional Fees/Registry
110,629	94,550	(16,079)	-17.0%	Supplies
276,056	205,935	(70,121)	-34.0%	Purchased Services
29,956	11,673	(18,283)	-156.6%	Depreciation
28,915	17,202	(11,713)	-68.1%	Other Expense
1,585,525	1,661,612	76,087	4.6%	Total Direct Expense
478,619	576,046	97,427	16.9%	Overhead Allocation
2,064,145	2,237,658	173,513	7.8%	Total Expenses
(663,983)	(881,142)	217,159	24.6%	Net Income (Loss)

5,299,678	7,071,393	1,771,715	25.1%
2,783,291	3,346,966	563,675	16.8%
8,082,969	10,418,359	2,335,390	22.4%
1,318,795	632,266	(686,529)	-108.6%
1,054,440	766,418	(288,022)	-37.6%
2,182,149	2,230,810	48,661	2.2%
146,650	95,885	(50,765)	-52.9%
180,020	144,077	(35,943)	-24.9%
12,965,023	14,287,815	1,322,792	9.3%
4,174,677	4,781,877	607,199	12.7%
17,139,701	19,069,692	1,929,991	10.1%
(8,595,123)	(8,209,042)	(386,081)	4.7%

Key Ratios

\$ 183.60	\$ 183.88	\$ (0.28)	-0.2%	Gross Pt Revenue/Billable Visit
\$ 169.68	\$ 172.02	\$ (2.34)	-1.4%	Total Revenue/Billable Visit (excl Oth Rev)
\$ 192.14	\$ 210.70	\$ 18.57	8.8%	Direct Costs/Billable Visit
\$ 58.00	\$ 73.05	\$ 15.05	20.6%	Indirect Costs/Billable Visit
\$ 250.14	\$ 283.75	\$ 33.61	11.8%	Total Medical Cost/Billable Visit
\$ (80.46)	\$ (111.73)	\$ 31.27	-28.0%	Net Income(Loss)/Billable Visit
\$ 625.35	\$ 709.38	\$ 84.03	11.8%	Total Cost/Patient (1)
92.4%	93.5%	-1.1%	-1.2%	Net Pt Rev as % of Gross Rev
44.3%	50.7%	6.4%	12.6%	Benefits as a % of Salaries
30.2%	34.7%	4.5%	12.9%	Overhead % of Direct Exp
\$ 1,753				Gross Patient AR (in 000s)
\$ (518)				Less Reserves (in 000s)
\$ 1,235				Net AR (in 000s)
\$ 1,418				Wrap AR (in 000s)
33.5				Gross AR Days
\$ 1,611				Cash Receipts (in 000s)

\$ 188.69	\$ 183.88	\$ 4.81	2.6%
\$ 128.88	\$ 172.26	\$ (43.39)	-25.2%
\$ 195.55	\$ 226.62	\$ 31.07	13.7%
\$ 62.97	\$ 75.85	\$ 12.88	17.0%
\$ 258.51	\$ 302.47	\$ 43.96	14.5%
\$ (129.64)	\$ (130.21)	\$ (0.57)	0.4%
\$ 646.28	\$ 756.17	\$ 109.89	14.5%
68.3%	93.7%	-25.4%	-27.1%
52.5%	47.3%	-5.2%	-11.0%
32.2%	33.5%	1.3%	3.8%

Payer Mix

13.9%	13.9%	0.0%	0.3%	Medicare
12.6%	12.6%	0.0%	0.2%	Medi-Cal
69.7%	70.2%	-0.5%	-0.7%	Medi-Cal Managed Care
1.0%	1.0%	0.0%	-0.3%	Insurance
2.7%	2.4%	0.4%	15.9%	Self Pay / Indigent
100.0%	100.0%	0.0%	0.0%	

13.0%	13.5%	-0.5%	-3.4%
14.0%	13.1%	0.9%	6.9%
69.1%	70.1%	-1.0%	-1.4%
1.3%	1.0%	0.3%	29.3%
2.5%	2.3%	0.2%	10.2%
100.0%	100.0%	0.0%	0.0%

**Children's Health Services
Income Statement
February 28, 2018**

Current Month			
Actual	Budget	Variance	% Var

Year to Date			
Actual	Budget	Variance	% Var

1,676	1,562	114	7.3%	Total Visits	13,221	12,310	911	7.4%	
1,486	1,562	(76)	-4.9%	Billable Visits	11,926	12,310	(384)	-3.1%	
19.4	21.0	1.6	7.8%	Total FTEs	18.6	21.0	2.4	11.3%	
368,560	379,865	(11,305)	-3.0%	Gross Patient Revenue	2,966,329	2,993,588	(27,259)	-0.9%	
(120,232)	(205,985)	85,753	41.6%	Contractual Adjustments	(2,089,496)	(1,623,297)	(466,199)	28.7%	
89,518	106,794	(17,276)	-16.2%	Capitation Rev	707,085	841,605	(134,520)	-16.0%	
337,846	280,674	57,172	20.4%	Net Patient Revenue	1,583,917	2,211,896	(627,979)	-28.4%	
0	0	0		Other Revenue	0	0	0		
337,846	280,674	57,172	20.4%	Total Revenue	1,583,917	2,211,896	(627,979)	-28.4%	
Operating Expense									
120,362	110,926	(9,436)	-8.5%	Salaries	937,508	1,039,056	101,548	9.8%	
49,741	63,258	13,517	21.4%	Benefits	494,213	549,098	54,885	10.0%	
170,103	174,184	4,081	2.3%	Total Salaries & Benefits	1,431,721	1,588,154	156,433	9.8%	
476	5,000	4,524	90.5%	Professional Fees/Registry	8,721	40,000	31,279	78.2%	
5,353	7,687	2,334	30.4%	Supplies	69,078	62,078	(7,000)	-11.3%	
2,030	6,032	4,002	66.3%	Purchased Services	25,166	51,941	26,775	51.5%	
661	760	99	13.0%	Depreciation	5,289	6,080	791	13.0%	
4,107	2,457	(1,650)	-67.1%	Other Expense	22,494	20,763	(1,731)	-8.3%	
182,730	196,120	13,390	6.8%	Total Direct Expense	1,562,470	1,769,016	206,546	11.7%	
53,473	44,170	(9,303)	-21.1%	Allocation of Direct Admin Exp	463,574	497,637	34,063	6.8%	
0	59,248	59,248	100.0%	Overhead Allocation	413,994	534,420	120,425	22.5%	
236,203	299,537	63,335	21.1%	Total Expenses	2,440,038	2,801,073	361,034	12.9%	
101,643	(18,863)	120,507	638.8%	Net Income (Loss)	(856,122)	(589,177)	(266,945)	45.3%	

Key Ratios

\$ 248.02	\$ 243.19	\$ 4.83	2.0%	Gross Pt Revenue/Billable Visit	\$ 248.73	\$ 243.18	\$ 5.54	2.3%
\$ 122.35	\$ 179.69	\$ 47.66	26.5%	Total Revenue/Billable Visit (excl Cth Rev)	\$ 132.81	\$ 179.68	\$ (46.87)	-26.1%
\$ 122.97	\$ 125.56	\$ 2.59	2.1%	Direct Costs/Billable Visit	\$ 131.01	\$ 143.71	\$ 12.69	8.8%
\$ 35.98	\$ 66.21	\$ 30.22	45.7%	Indirect Costs/Billable Visit	\$ 73.58	\$ 83.84	\$ 10.25	12.2%
\$ 158.95	\$ 191.77	\$ 32.81	17.1%	Total Medical Cost/Billable Visit	\$ 204.60	\$ 227.54	\$ 22.95	10.1%
\$ 68.40	\$ (12.08)	\$ 80.48	-666.4%	Net Income(Loss)/Billable Visit	\$ (71.79)	\$ (47.86)	\$ (23.92)	50.0%
41.3%	57.0%	15.7%	27.5%	Benefits as a % of Salaries	52.7%	52.8%	0.1%	0.2%
0.0%	30.2%	30.2%	100.0%	Overhead % of Direct Exp	26.5%	30.2%	3.7%	12.3%
\$ 283				Gross Patient AR (in 000s)				
\$ (67)				Less Reserves (in 000s)				
\$ 216				Net AR (in 000s)				
\$ 365				Wrap AR (in 000s)				
23.5				Gross AR Days				
\$ 336				Cash Receipts (in 000s)				

Payer Mix

0.0%	0.0%	0.0%		Medicare	0.0%	0.0%	0.0%	
10.4%	17.2%	-6.8%	-39.6%	Medi-Cal	13.5%	17.2%	-3.6%	-21.1%
88.8%	82.2%	6.6%	8.0%	Medi-Cal Managed Care	85.6%	82.2%	3.4%	4.2%
0.3%	0.5%	-0.2%	-36.8%	Insurance	0.5%	0.5%	-0.1%	-11.5%
0.5%	0.1%	0.4%	393.9%	Self Pay / Indigent	0.4%	0.1%	0.3%	244.1%
100.0%	100.0%	0.0%	0.0%		100.0%	100.0%	0.0%	0.0%

**Family Medicine Clinic
Income Statement
February 28, 2018**

Current Month				Year to Date			
Actual	Budget	Variance	% Var	Actual	Budget	Variance	% Var
1,624	1,183	441	37.3%	12,990	9,222	3,768	40.9%
1,548	1,183	365	30.9%	12,449	9,222	3,227	35.0%
15.5	19.8	4.3	21.8%	13.8	19.8	6.0	30.2%
259,912	202,909	57,003	28.1%	2,113,483	1,581,752	531,731	33.6%
(112,787)	(108,482)	(4,305)	-4.0%	(1,424,170)	(845,657)	(578,513)	68.4%
86,741	63,595	23,146	36.4%	696,877	495,746	201,131	40.6%
233,866	158,022	75,844	48.0%	1,386,189	1,231,841	154,349	12.5%
0	0	0		0	0	0	
233,866	158,022	75,844	48.0%	1,386,189	1,231,841	154,349	12.5%
Operating Expense							
81,463	115,300	33,837	29.3%	661,918	892,047	230,129	25.8%
35,690	58,072	22,382	38.5%	338,553	401,401	62,848	15.7%
117,153	173,372	56,219	32.4%	1,000,471	1,293,448	292,977	22.7%
3,260	0	(3,260)		1,129	0	(1,129)	
15,402	32,574	17,172	52.7%	322,654	256,366	(66,288)	-25.9%
120	5,272	5,152	97.7%	20,934	42,176	21,242	50.4%
3,922	3,852	(70)	-1.8%	31,997	33,319	1,322	4.0%
4,624	2,646	(1,978)	-74.8%	20,371	22,540	2,169	9.6%
144,482	217,716	73,234	33.6%	1,397,556	1,647,849	250,294	15.2%
37,709	23,594	(14,116)	-59.8%	330,292	262,636	(67,656)	-25.8%
64,627	97,384	32,757	33.6%	623,559	737,083	113,524	15.4%
246,818	338,694	91,876	27.1%	2,351,407	2,647,568	296,161	11.2%
(12,953)	(180,672)	167,720	92.8%	(965,217)	(1,415,727)	450,509	-31.8%
Key Ratios							
\$ 167.90	\$ 171.52	\$ (3.62)	-2.1%	\$ 169.77	\$ 171.52	\$ (1.75)	-1.0%
\$ 151.08	\$ 133.58	\$ 17.50	13.1%	\$ 111.35	\$ 133.58	\$ (22.23)	-16.6%
\$ 93.33	\$ 184.04	\$ 90.70	49.3%	\$ 112.26	\$ 178.69	\$ 66.43	37.2%
\$ 66.11	\$ 102.26	\$ 36.16	35.4%	\$ 76.62	\$ 108.41	\$ 31.79	29.3%
\$ 159.44	\$ 286.30	\$ 126.86	44.3%	\$ 188.88	\$ 287.09	\$ 98.21	34.2%
\$ (8.37)	\$ (152.72)	\$ 144.36	-94.5%	\$ (77.53)	\$ (153.52)	\$ 75.98	-49.5%
43.8%	50.4%	6.6%	13.0%	51.1%	45.0%	-6.1%	-13.7%
44.7%	44.7%	0.0%	0.0%	44.6%	44.7%	0.1%	0.3%
\$ 297							
\$ (100)							
\$ 197							
\$ 161							
\$ 31.7							
\$ 290							
Payer Mix							
18.0%	16.5%	1.5%	9.0%	17.2%	16.5%	0.6%	3.8%
8.3%	9.0%	-0.7%	-7.6%	11.1%	9.0%	2.0%	22.5%
67.5%	64.6%	2.8%	4.4%	64.9%	64.6%	0.3%	0.5%
0.9%	1.5%	-0.7%	-43.3%	1.4%	1.5%	-0.1%	-7.8%
5.3%	8.3%	-3.0%	-36.1%	5.4%	8.3%	-2.8%	-34.4%
100.0%	100.0%	0.0%	0.0%	100.0%	100.0%	0.0%	0.0%

**Family Practice Clinic
Income Statement
February 28, 2018**

Current Month			
Actual	Budget	Variance	% Var

388	512	(124)	-24.2%	Total Visits
368	512	(144)	-28.1%	Billable Visits
8.7	10.0	1.3	13.2%	Total FTEs
71,507	92,587	(21,080)	-22.8%	Gross Patient Revenue
(45,614)	(12,995)	(32,619)	-251.0%	Contractual Adjustments
20,724	28,044	(7,320)	-26.1%	Capitation Rev
46,616	107,636	(61,020)	-56.7%	Net Patient Revenue
0	0	0		Other Revenue
46,616	107,636	(61,020)	-56.7%	Total Revenue
Operating Expense				
47,488	39,985	(7,503)	-18.8%	Salaries
19,156	24,308	5,152	21.2%	Benefits
66,644	64,293	(2,351)	-3.7%	Total Salaries & Benefits
0	5,000	5,000	100.0%	Professional Fees/Registry
2,693	5,307	2,614	49.2%	Supplies
0	6,125	6,125	100.0%	Purchased Services
226	347	121	34.9%	Depreciation
2,234	684	(1,550)	-226.7%	Other Expense
71,798	81,756	9,958	12.2%	Total Direct Expense
10,375	10,766	391	3.6%	Allocation of Direct Admin Exp
32,955	37,526	4,571	12.2%	Overhead Allocation
115,128	130,048	14,920	11.5%	Total Expenses
(68,511)	(22,412)	(46,100)	-205.7%	Net Income (Loss)

Year to Date			
Actual	Budget	Variance	% Var

3,157	3,673	(516)	-14.0%	Total Visits
2,975	3,673	(698)	-19.0%	Billable Visits
7.7	10.0	2.3	22.7%	Total FTEs
602,998	664,452	(61,454)	-9.2%	Gross Patient Revenue
(460,296)	(93,259)	(367,037)	393.6%	Contractual Adjustments
169,789	201,259	(31,470)	-15.6%	Capitation Rev
312,491	772,452	(459,961)	-59.5%	Net Patient Revenue
0	0	0		Other Revenue
312,491	772,452	(459,961)	-59.5%	Total Revenue
Operating Expense				
268,685	347,542	78,857	22.7%	Salaries
203,611	179,150	(24,461)	-13.7%	Benefits
472,297	526,692	54,395	10.3%	Total Salaries & Benefits
50,971	40,000	(10,971)	-27.4%	Professional Fees/Registry
25,459	39,353	13,894	35.3%	Supplies
40,126	48,998	8,872	18.1%	Purchased Services
1,809	2,772	963	34.8%	Depreciation
11,881	5,662	(6,219)	-109.8%	Other Expense
602,542	663,477	60,935	9.2%	Total Direct Expense
94,236	110,363	16,127	14.6%	Allocation of Direct Admin Exp
268,237	305,344	37,107	12.2%	Overhead Allocation
965,014	1,079,184	114,169	10.6%	Total Expenses
(652,523)	(306,732)	(345,792)	112.7%	Net Income (Loss)

Key Ratios

\$ 194.31	\$ 180.83	\$ 13.48	7.5%	Gross Pt Revenue/Billable Visit
\$ 126.68	\$ 210.23	\$ (83.55)	-39.7%	Total Revenue/Billable Visit (excl Oth Rev)
\$ 195.10	\$ 159.68	\$ (35.42)	-22.2%	Direct Costs/Billable Visit
\$ 117.74	\$ 94.32	\$ (23.42)	-24.8%	Indirect Costs/Billable Visit
\$ 312.85	\$ 254.00	\$ (58.85)	-23.2%	Total Medical Cost/Billable Visit
\$ (186.17)	\$ (43.77)	\$ (142.40)	325.3%	Net Income(Loss)/Billable Visit
40.3%	60.8%	20.5%	33.6%	Benefits as a % of Salaries
45.9%	45.9%	0.0%	0.0%	Overhead % of Direct Exp
\$ 61				Gross Patient AR (in 000s)
\$ (25)				Less Reserves (in 000s)
\$ 35				Net AR (in 000s)
\$ 32				Wrap AR (in 000s)
\$ 24.0				Gross AR Days
\$ 62				Cash Receipts (in 000s)

\$ 202.69	\$ 180.90	\$ 21.79	12.0%	Gross Pt Revenue/Billable Visit
\$ 105.04	\$ 210.31	\$ (105.27)	-50.1%	Total Revenue/Billable Visit (excl Oth Rev)
\$ 202.54	\$ 180.64	\$ (21.90)	-12.1%	Direct Costs/Billable Visit
\$ 121.84	\$ 113.18	\$ (8.66)	-7.7%	Indirect Costs/Billable Visit
\$ 324.37	\$ 293.82	\$ (30.56)	-10.4%	Total Medical Cost/Billable Visit
\$ (219.34)	\$ (83.51)	\$ (135.83)	162.6%	Net Income(Loss)/Billable Visit
75.8%	51.5%	-24.2%	-47.0%	Benefits as a % of Salaries
44.5%	46.0%	1.5%	3.3%	Overhead % of Direct Exp

Payer Mix

26.2%	28.8%	-2.5%	-8.8%	Medicare
5.2%	2.7%	2.6%	95.8%	Medi-Cal
64.7%	65.9%	-1.2%	-1.7%	Medi-Cal Managed Care
0.0%	1.0%	-1.0%	-100.0%	Insurance
3.8%	1.7%	2.1%	118.4%	Self Pay / Indigent
100.0%	100.0%	0.0%	0.0%	

27.0%	28.8%	-1.8%	-6.3%	Medicare
4.1%	2.7%	1.4%	51.8%	Medi-Cal
65.4%	65.9%	-0.4%	-0.7%	Medi-Cal Managed Care
0.4%	1.0%	-0.5%	-56.2%	Insurance
3.1%	1.7%	1.4%	79.7%	Self Pay / Indigent
100.0%	100.0%	0.0%	0.0%	

**Primary Medicine Clinic
Income Statement
February 28, 2018**

Current Month			
Actual	Budget	Variance	% Var

Year to Date			
Actual	Budget	Variance	% Var

2,832	2,502	330	13.2%	Total Visits
2,731	2,502	229	9.2%	Billable Visits
30.8	31.3	0.5	1.7%	Total FTEs
419,914	379,818	40,096	10.6%	Gross Patient Revenue
(251,215)	(180,555)	(70,660)	-39.1%	Contractual Adjustments
151,262	134,797	16,466	12.2%	Capitation Rev
319,961	334,060	(14,099)	-4.2%	Net Patient Revenue
0	0	0		Other Revenue
319,961	334,060	(14,099)	-4.2%	Total Revenue
Operating Expense				
191,320	303,199	111,879	36.9%	Salaries
75,523	126,787	51,264	40.4%	Benefits
266,843	429,986	163,143	37.9%	Total Salaries & Benefits
3,260	10,000	6,740	67.4%	Professional Fees/Registry
20,508	9,838	(10,670)	-108.5%	Supplies
580	4,126	3,546	85.9%	Purchased Services
302	301	(1)	-0.3%	Depreciation
1,231	1,381	150	10.8%	Other Expense
292,725	455,632	162,908	35.8%	Total Direct Expense
60,923	44,164	(16,759)	-37.9%	Allocation of Direct Admin Exp
99,936	155,553	55,617	35.8%	Overhead Allocation
453,584	655,349	201,765	30.8%	Total Expenses
(133,623)	(321,289)	187,666	58.4%	Net Income (Loss)

21,761	19,849	1,912	9.6%	
20,865	19,849	1,016	5.1%	
31.4	31.3	(0.1)	-0.4%	
3,253,359	3,013,240	240,119	8.0%	
(2,190,556)	(1,432,408)	(758,148)	52.9%	
1,163,830	1,069,394	94,436	8.8%	
2,226,633	2,650,226	(423,593)	-16.0%	
0	0	0		
2,226,633	2,650,226	(423,593)	-16.0%	
1,563,699	2,303,639	739,940	32.1%	
719,151	832,583	113,432	13.6%	
2,282,851	3,136,222	853,371	27.2%	
281,120	80,000	(201,120)	-251.4%	
107,407	79,456	(27,951)	-35.2%	
67,299	33,006	(34,293)	-103.9%	
2,415	2,414	(1)	-0.1%	
9,000	11,715	2,715	23.2%	
2,750,092	3,342,813	592,721	17.7%	
508,430	494,967	(13,463)	-2.7%	
927,023	1,141,236	214,213	18.8%	
4,185,545	4,979,017	793,472	15.9%	
(1,958,912)	(2,328,791)	369,878	-15.9%	

Key Ratios

\$ 153.76	\$ 151.81	\$ 1.95	1.3%	Gross Pt Revenue/Billable Visit
\$ 117.16	\$ 133.52	\$ (16.36)	-12.3%	Total Revenue/Billable Visit (excl Oth Rev)
\$ 107.19	\$ 182.11	\$ 74.92	41.1%	Direct Costs/Billable Visit
\$ 58.90	\$ 79.82	\$ 20.92	26.2%	Indirect Costs/Billable Visit
\$ 166.09	\$ 261.93	\$ 95.84	36.6%	Total Medical Cost/Billable Visit
\$ (48.93)	\$ (128.41)	\$ 79.48	-61.9%	Net Income(Loss)/Billable Visit
39.5%	41.8%	2.3%	5.6%	Benefits as a % of Salaries
34.1%	34.1%	0.0%	0.0%	Overhead % of Direct Exp
\$ 401				Gross Patient AR (in 000s)
\$ (151)				Less Reserves (in 000s)
\$ 250				Net AR (in 000s)
\$ 256				Wrap AR (in 000s)
29.6				Gross AR Days
\$ 584				Cash Receipts (in 000s)

\$ 155.92	\$ 151.81	\$ 4.12	2.7%	
\$ 106.72	\$ 133.52	\$ (26.80)	-20.1%	
\$ 131.80	\$ 168.41	\$ 36.61	21.7%	
\$ 68.80	\$ 82.43	\$ 13.64	16.5%	
\$ 200.60	\$ 250.84	\$ 50.24	20.0%	
\$ (93.89)	\$ (117.33)	\$ 23.44	-20.0%	
46.0%	36.1%	-9.8%	-27.2%	
33.7%	34.1%	0.4%	1.3%	

Payer Mix

34.4%	26.6%	7.8%	29.2%	Medicare
2.7%	4.4%	-1.7%	-39.0%	Medi-Cal
57.9%	64.8%	-6.9%	-10.6%	Medi-Cal Managed Care
1.4%	1.2%	0.2%	19.6%	Insurance
3.6%	3.0%	0.6%	19.6%	Self Pay / Indigent
100.0%	100.0%	0.0%	0.0%	

29.4%	26.6%	2.9%	10.8%	
3.8%	4.4%	-0.7%	-14.7%	
63.0%	64.8%	-1.8%	-2.8%	
1.3%	1.2%	0.1%	8.9%	
2.5%	3.0%	-0.5%	-16.2%	
100.0%	100.0%	0.0%	0.0%	

**Healthy Beginnings - California St.
Income Statement
February 28, 2018**

Current Month			
Actual	Budget	Variance	% Var

586	631	(45)	-7.1%	Total Visits
586	631	(45)	-7.1%	Billable Visits
11.9	14.0	2.1	15.3%	Total FTEs
133,460	131,450	2,010	1.5%	Gross Patient Revenue
(40,637)	(56,406)	15,769	28.0%	Contractual Adjustments
31,299	37,129	(5,830)	-15.7%	Capitation Rev
124,122	112,173	11,949	10.7%	Net Patient Revenue
0	0	0		Other Revenue
124,122	112,173	11,949	10.7%	Total Revenue

Year to Date			
Actual	Budget	Variance	% Var

5,809	5,572	237	4.3%
5,809	5,572	237	4.3%
12.3	14.0	1.7	11.9%
1,272,504	1,160,634	111,870	9.6%
(597,816)	(498,028)	(99,788)	20.0%
311,541	327,832	(16,291)	-5.0%
986,229	990,438	(4,209)	-0.4%
0	0	0	
986,229	990,438	(4,209)	-0.4%

Operating Expense

83,043	68,722	(14,321)	-20.8%	Salaries
37,229	26,497	(10,732)	-40.5%	Benefits
120,271	95,219	(25,052)	-26.3%	Total Salaries & Benefits
0	5,000	5,000	100.0%	Professional Fees/Registry
6,160	7,460	1,300	17.4%	Supplies
9,626	15,995	6,369	39.8%	Purchased Services
1,342	455	(887)	-195.0%	Depreciation
3,618	1,332	(2,286)	-171.6%	Other Expense
141,017	125,461	(15,556)	-12.4%	Total Direct Expense
19,363	15,285	(4,078)	-26.7%	Allocation of Direct Admin Exp
58,875	52,380	(6,495)	-12.4%	Overhead Allocation
219,255	193,126	(26,129)	-13.5%	Total Expenses
(95,132)	(80,952)	(14,180)	-17.5%	Net Income (Loss)

621,645	733,261	111,616	15.2%
328,055	266,534	(61,521)	-23.1%
949,699	999,795	50,096	5.0%
0	40,000	40,000	100.0%
54,682	64,458	9,776	15.2%
92,977	129,783	36,806	28.4%
4,845	3,640	(1,205)	-33.1%
17,703	11,380	(6,323)	-55.6%
1,119,907	1,249,056	129,149	10.3%
198,865	197,545	(1,321)	-0.7%
466,148	521,481	55,333	10.6%
1,784,920	1,968,081	183,162	9.3%
(798,690)	(977,643)	178,953	-18.3%

Key Ratios

\$ 227.75	\$ 208.32	\$ 19.43	9.3%	Gross Pt Revenue/Billable Visit
\$ 211.81	\$ 177.77	\$ 34.04	19.1%	Total Revenue/Billable Visit (excl Oth Rev)
\$ 240.64	\$ 198.83	\$ (41.81)	-21.0%	Direct Costs/Billable Visit
\$ 133.51	\$ 107.23	\$ (26.28)	-24.5%	Indirect Costs/Billable Visit
\$ 374.15	\$ 306.06	\$ (68.09)	-22.2%	Total Medical Cost/Billable Visit
\$ (162.34)	\$ (128.29)	\$ (34.05)	26.5%	Net Income(Loss)/Billable Visit
44.8%	38.6%	-6.3%	-16.3%	Benefits as a % of Salaries
41.8%	41.8%	0.0%	0.0%	Overhead % of Direct Exp
\$ 125				Gross Patient AR (in 000s)
\$ (33)				Less Reserves (in 000s)
\$ 92				Net AR (in 000s)
\$ 64				Wrap AR (in 000s)
26.8				Gross AR Days
\$ 132				Cash Receipts (in 000s)

\$ 219.06	\$ 208.30	\$ 10.76	5.2%
\$ 169.78	\$ 177.75	\$ (7.98)	-4.5%
\$ 192.79	\$ 224.17	\$ 31.38	14.0%
\$ 114.48	\$ 129.04	\$ 14.56	11.3%
\$ 307.27	\$ 353.21	\$ 45.94	13.0%
\$ (137.49)	\$ (175.46)	\$ 37.96	-21.6%
52.8%	36.3%	-16.4%	-45.2%
41.6%	41.8%	0.1%	0.3%

Payer Mix

1.2%	0.9%	0.3%	36.1%	Medicare
28.6%	33.1%	-4.5%	-13.6%	Medi-Cal
70.2%	65.0%	5.2%	8.0%	Medi-Cal Managed Care
-0.1%	0.7%	-0.8%	-114.4%	Insurance
0.1%	0.4%	-0.3%	-65.3%	Self Pay / Indigent
100.0%	100.0%	0.0%	0.0%	

2.4%	0.9%	1.5%	161.5%
31.2%	33.1%	-1.8%	-5.6%
64.8%	65.0%	-0.2%	-0.3%
0.8%	0.7%	0.1%	16.8%
0.9%	0.4%	0.5%	112.5%
100.0%	100.0%	0.0%	0.0%

**Healthy Beginnings - French Camp
Income Statement
February 28, 2018**

Current Month			
Actual	Budget	Variance	% Var

730	604	126	20.9%	Total Visits
730	604	126	20.9%	Billable Visits
13.2	13.8	0.5	3.8%	Total FTEs
94,477	101,900	(7,423)	-7.3%	Gross Patient Revenue
4,460	1,371	3,089	225.3%	Contractual Adjustments
38,991	36,606	2,385	6.5%	Capitation Rev
137,927	139,877	(1,950)	-1.4%	Net Patient Revenue
0	0	0		Other Revenue
137,927	139,877	(1,950)	-1.4%	Total Revenue
Operating Expense				
73,352	73,060	(292)	-0.4%	Salaries
34,296	37,086	2,790	7.5%	Benefits
107,649	110,146	2,497	2.3%	Total Salaries & Benefits
49,087	8,533	(40,554)	-475.3%	Professional Fees/Registry
12,814	12,800	(14)	-0.1%	Supplies
10,049	15,925	5,876	36.9%	Purchased Services
2,701	2,701	0	0.0%	Depreciation
1,374	1,055	(319)	-30.2%	Other Expense
183,675	151,160	(32,515)	-21.5%	Total Direct Expense
13,707	11,849	(1,859)	-15.7%	Allocation of Direct Admin Exp
76,684	63,109	(13,575)	-21.5%	Overhead Allocation
274,066	226,118	(47,948)	-21.2%	Total Expenses
(136,139)	(86,241)	(49,898)	-57.9%	Net Income (Loss)

Year to Date			
Actual	Budget	Variance	% Var

6,352	5,703	649	11.4%
6,352	5,703	649	11.4%
12.3	13.8	1.5	10.6%
1,090,513	961,937	128,576	13.4%
(299,408)	12,944	(312,352)	-2413.1%
339,575	345,562	(5,987)	-1.7%
1,130,680	1,320,443	(189,763)	-14.4%
0	0	0	
1,130,680	1,320,443	(189,763)	-14.4%
550,128	741,253	191,125	25.8%
318,312	367,367	49,055	13.4%
868,440	1,108,620	240,180	21.7%
166,643	68,266	(98,377)	-144.1%
95,020	106,344	11,324	10.6%
75,918	129,756	53,838	41.5%
21,607	21,604	(3)	0.0%
6,434	8,855	2,421	27.3%
1,234,061	1,443,445	209,384	14.5%
170,424	159,379	(11,045)	-6.9%
509,228	602,638	93,411	15.5%
1,913,713	2,205,463	291,750	13.2%
(783,033)	(885,020)	101,987	-11.5%

Key Ratios

\$ 129.42	\$ 168.71	\$ (39.29)	-23.3%	Gross Pt Revenue/Billable Visit
\$ 188.94	\$ 231.58	\$ (42.64)	-18.4%	Total Revenue/Billable Visit (excl Oth Rev)
\$ 251.61	\$ 250.26	\$ (1.34)	-0.5%	Direct Costs/Billable Visit
\$ 123.82	\$ 124.10	\$ 0.28	0.2%	Indirect Costs/Billable Visit
\$ 375.43	\$ 374.37	\$ (1.07)	-0.3%	Total Medical Cost/Billable Visit
\$ (186.49)	\$ (142.78)	\$ (43.71)	30.6%	Net Income(Loss)/Billable Visit
46.8%	50.8%	4.0%	7.9%	Benefits as a % of Salaries
41.8%	41.8%	0.0%	0.0%	Overhead % of Direct Exp
\$ 171				Gross Patient AR (in 000s)
\$ (42)				Less Reserves (in 000s)
\$ 129				Net AR (in 000s)
\$ 82				Wrap AR (in 000s)
45.3				Gross AR Days
\$ 128				Cash Receipts (in 000s)

\$ 171.68	\$ 168.67	\$ 3.01	1.8%
\$ 178.00	\$ 231.53	\$ (53.53)	-23.1%
\$ 194.28	\$ 253.10	\$ 58.82	23.2%
\$ 107.00	\$ 133.62	\$ 26.62	19.9%
\$ 301.28	\$ 386.72	\$ 85.44	22.1%
\$ (123.27)	\$ (155.18)	\$ 31.91	-20.6%
57.9%	49.6%	-8.3%	-16.7%
41.3%	41.8%	0.5%	1.2%

Payer Mix

-12.0%	3.4%	-15.5%	-451.2%	Medicare
38.7%	26.0%	12.8%	49.2%	Medi-Cal
72.3%	68.9%	3.4%	5.0%	Medi-Cal Managed Care
0.6%	1.4%	-0.8%	-58.8%	Insurance
0.4%	0.4%	0.1%	23.0%	Self Pay / Indigent
100.0%	100.0%	0.0%	0.0%	

3.9%	3.4%	0.5%	14.0%
25.0%	26.0%	-1.0%	-3.8%
67.5%	68.9%	-1.4%	-2.0%
2.0%	1.4%	0.7%	48.4%
1.6%	0.4%	1.2%	340.5%
100.0%	100.0%	0.0%	0.0%

**SJCC Hazelton Clinic
Income Statement
February 28, 2018**

Current Month			
Actual	Budget	Variance	% Var

631	514	117	22.8%	Total Visits
411	514	(103)	-20.0%	Billable
3.4	5.0	1.6	32.0%	Total FTEs
80,336	92,032	(11,697)	-12.7%	Patient Revenue
(16,696)	16,579	(33,275)	-200.7%	Contractual Adjustments
33,703	31,429	2,274	7.2%	Physician Capitation
97,342	140,040	(42,698)	-30.5%	Net Patient Revenue
0	0	0		Other Revenue
97,342	140,040	(42,698)	-30.5%	Total Revenue

Operating Expense

4,124	20,800	16,676	80.2%	Salaries
2,976	17,027	14,051	82.5%	Benefits
7,099	37,827	30,728	81.2%	Total Salaries & Benefits
35,578	0	(35,578)		Professional Fees/Registry
1,933	11,150	9,217	82.7%	Supplies
147,556	111,323	(36,233)	-32.5%	Purchased Services
0	0	0		Depreciation
160	3,256	3,096	95.1%	Other Expense
192,326	163,556	(28,770)	-17.6%	Total Direct Expense
11,655	10,701	(954)	-8.9%	Allocation of Direct Admin Exp
81,912	69,659	(12,253)	-17.6%	Overhead Allocation
285,893	243,916	(41,978)	-17.2%	Total Expenses
(188,551)	(103,875)	(84,676)	-81.5%	Net Income (Loss)

Year to Date			
Actual	Budget	Variance	% Var

5,240	3,790	1,450	38.3%
3,106	3,790	(684)	-18.0%
3.2	5.0	1.8	36.4%
606,202	678,487	(72,285)	-10.7%
(396,893)	122,227	(519,120)	-424.7%
280,083	231,705	48,378	20.9%
489,392	1,032,419	(543,027)	-52.6%
0	0	0	
489,392	1,032,419	(543,027)	-52.6%

36,259	171,176	134,917	78.8%
18,006	132,961	114,955	86.5%
54,265	304,137	249,872	82.2%
197,747	0	(197,747)	
21,664	96,489	74,825	77.5%
968,620	966,058	(2,562)	-0.3%
0	0	0	
938	28,032	27,094	96.7%
1,243,233	1,394,716	151,483	10.9%
94,736	112,141	17,404	15.5%
520,518	594,010	73,492	12.4%
1,858,488	2,100,866	242,378	11.5%
(1,369,096)	(1,068,447)	(300,648)	28.1%

Key Ratios

\$ 195.46	\$ 179.05	\$ 16.41	9.2%	Gross Pt Revenue/Billable Visit
\$ 236.84	\$ 272.45	\$ (35.61)	-13.1%	Total Revenue/Billable Visit (excl Oth Rev)
\$ 467.95	\$ 318.20	\$ (149.74)	-47.1%	Direct Costs/Billable Visit
\$ 227.66	\$ 156.34	\$ (71.32)	-45.6%	Indirect Costs/Billable Visit
\$ 695.60	\$ 474.54	\$ (221.06)	-46.6%	Total Medical Cost/Billable Visit
\$ (458.76)	\$ (202.09)	\$ (256.67)	127.0%	Net Income(Loss)/Billable Visit
72.2%	81.9%	9.7%	11.8%	Benefits as a % of Salaries
42.6%	42.6%	0.0%	0.0%	Overhead % of Direct Exp
\$ 282				Gross Patient AR (in 000s)
\$ (68)				Less Reserves (in 000s)
\$ 214				Net AR (in 000s)
\$ 153				Wrap AR (in 000s)
\$ 104.6				Gross AR Days
\$ 40				Cash Receipts (in 000s)

\$ 195.17	\$ 179.02	\$ 16.15	9.0%
\$ 157.56	\$ 272.41	\$ (114.84)	-42.2%
\$ 400.27	\$ 368.00	\$ (32.27)	-8.8%
\$ 198.09	\$ 186.32	\$ (11.77)	-6.3%
\$ 598.35	\$ 554.32	\$ (44.04)	-7.9%
\$ (440.79)	\$ (281.91)	\$ (158.88)	56.4%
49.7%	77.7%	28.0%	36.1%
41.9%	42.6%	0.7%	1.7%

Payer Mix

8.9%	28.8%	-19.8%	-68.9%	Medicare
32.6%	2.7%	30.0%	1118.4%	Medi-Cal
43.5%	65.9%	-22.3%	-33.9%	Medi-Cal Managed Care
6.5%	1.0%	5.5%	576.6%	Insurance
8.4%	1.7%	6.6%	379.0%	Self Pay / Indigent
100.0%	100.0%	0.0%	0.0%	

5.6%	28.8%	-23.2%	-80.7%
33.3%	2.7%	30.7%	1144.6%
48.4%	65.9%	-17.5%	-26.6%
6.4%	1.0%	5.4%	565.6%
6.3%	1.7%	4.6%	262.2%
100.0%	100.0%	0.0%	0.0%

**SJCC Manteca Clinic
Income Statement
February 28, 2018**

Current Month			
Actual	Budget	Variance	% Var

420	378	42	11.1%	Total Visits
392	378	14	3.7%	Billable Visits
10.4	11.0	0.6	5.8%	Total FTEs
86,914	69,552	17,362	25.0%	Patient Revenue
(6,866)	(8,471)	1,605	18.9%	Contractual Adjustments
22,433	22,953	(520)	-2.3%	Physician Capitation
102,481	84,034	18,447	22.0%	Net Patient Revenue
0	0	0		Other Revenue
102,481	84,034	18,447	22.0%	Total Revenue

Operating Expense

45,827	54,838	9,011	16.4%	Salaries
33,353	35,909	2,556	7.1%	Benefits
79,180	90,747	11,567	12.7%	Total Salaries & Benefits
390	0	(390)		Professional Fees/Registry
45,634	7,417	(38,217)	-515.3%	Supplies
2,641	1,666	(975)	-58.5%	Purchased Services
17,544	0	(17,544)		Depreciation
11,567	1,766	(9,801)	-555.0%	Other Expense
156,957	101,596	(55,361)	-54.5%	Total Direct Expense
12,610	8,087	(4,523)	-55.9%	Allocation of Direct Admin Exp
63,630	41,187	(22,443)	-54.5%	Overhead Allocation
233,198	150,870	(82,327)	-54.6%	Total Expenses
(130,716)	(66,836)	(63,880)	-95.6%	Net Income (Loss)

Year to Date			
Actual	Budget	Variance	% Var

2,978	2,928	50	1.7%	Total Visits
2,819	2,928	(109)	-3.7%	Billable Visits
6.8	11.0	4.2	37.8%	Total FTEs
604,889	538,752	66,137	12.3%	Patient Revenue
(333,901)	(65,615)	(268,286)	408.9%	Contractual Adjustments
158,060	177,794	(19,734)	-11.1%	Physician Capitation
429,048	650,931	(221,883)	-34.1%	Net Patient Revenue
0	0	0		Other Revenue
429,048	650,931	(221,883)	-34.1%	Total Revenue

245,975	457,148	211,173	46.2%	Salaries
171,532	308,704	137,172	44.4%	Benefits
417,507	765,852	348,345	45.5%	Total Salaries & Benefits
125,816	0	(125,816)		Professional Fees/Registry
346,245	59,338	(286,907)	-483.5%	Supplies
90,231	13,332	(76,899)	-576.8%	Purchased Services
52,632	0	(52,632)		Depreciation
67,643	14,130	(53,513)	-378.7%	Other Expense
1,100,075	852,652	(247,423)	-29.0%	Total Direct Expense
94,531	90,124	(4,407)	-4.9%	Allocation of Direct Admin Exp
445,970	345,665	(100,305)	-29.0%	Overhead Allocation
1,640,576	1,288,441	(352,135)	-27.3%	Total Expenses
(1,211,528)	(637,510)	(574,018)	90.0%	Net Income (Loss)

Key Ratios

\$ 221.72	\$ 184.00	\$ 37.72	20.5%	Gross Pt Revenue/Billable Visit
\$ 261.43	\$ 222.31	\$ 39.12	17.6%	Total Revenue/Billable Visit (excl Osh Rev)
\$ 400.40	\$ 268.77	\$ (131.63)	-49.0%	Direct Costs/Billable Visit
\$ 194.49	\$ 130.36	\$ (64.14)	-49.2%	Indirect Costs/Billable Visit
\$ 594.89	\$ 399.13	\$ (195.76)	-49.0%	Total Medical Cost/Billable Visit
\$ (333.46)	\$ (176.82)	\$ (156.64)	88.6%	Net Income(Loss)/Billable Visit
72.8%	65.5%	-7.3%	-11.1%	Benefits as a % of Salaries
40.5%	40.5%	0.0%	0.0%	Overhead % of Direct Exp
\$ 134				Gross Patient AR (in 000s)
\$ (33)				Less Reserves (in 000s)
\$ 101				Net AR (in 000s)
\$ 306				Wrap AR (In 000s)
\$ 49.8				Gross AR Days
\$ 39				Cash Receipts (in 000s)

\$ 214.58	\$ 184.00	\$ 30.58	16.6%	Gross Pt Revenue/Billable Visit
\$ 152.20	\$ 222.31	\$ (70.11)	-31.5%	Total Revenue/Billable Visit (excl Osh Rev)
\$ 390.24	\$ 291.21	\$ (99.03)	-34.0%	Direct Costs/Billable Visit
\$ 191.74	\$ 148.84	\$ (42.90)	-28.8%	Indirect Costs/Billable Visit
\$ 581.97	\$ 440.04	\$ (141.93)	-32.3%	Total Medical Cost/Billable Visit
\$ (429.77)	\$ (217.73)	\$ (212.04)	97.4%	Net Income(Loss)/Billable Visit
69.7%	67.5%	-2.2%	-3.3%	Benefits as a % of Salaries
40.5%	40.5%	0.0%	0.0%	Overhead % of Direct Exp

Payer Mix

4.2%	13.1%	-8.9%	-67.9%	Medicare
17.8%	10.9%	6.9%	63.2%	Medi-Cal
77.0%	73.0%	4.0%	5.4%	Medi-Cal Managed Care
0.4%	1.7%	-1.3%	-74.8%	Insurance
0.6%	1.3%	-0.7%	-54.9%	Self Pay / Indigent
100.0%	100.0%	0.0%	0.0%	

6.6%	13.1%	-6.5%	-49.8%	Medicare
16.1%	10.9%	5.2%	47.3%	Medi-Cal
73.0%	73.0%	0.0%	0.0%	Medi-Cal Managed Care
1.1%	1.7%	-0.6%	-37.7%	Insurance
3.3%	1.3%	2.0%	158.2%	Self Pay / Indigent
100.0%	100.0%	0.0%	0.0%	

**FQ Administration
Income Statement
February 28, 2018**

Current Month			
Actual	Budget	Variance	% Var

3.7	6.2	2.5	40.5%	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

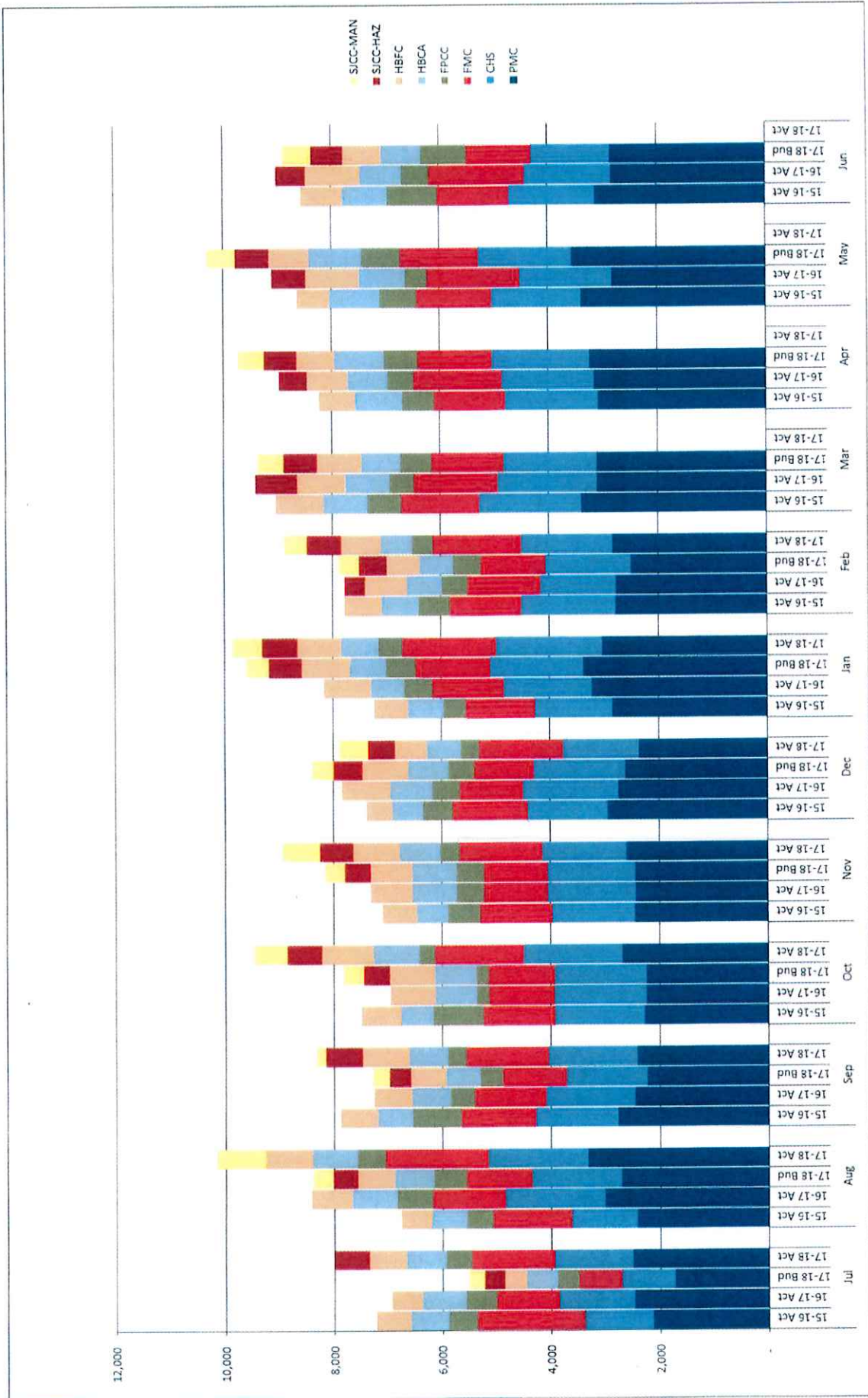
Year to Date			
Actual	Budget	Variance	% Var

4.4	6.2	2	29.0%	
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				
40,023	44,517	4,494	10.1%	Salaries
16,687	32,928	16,241	49.3%	Benefits
56,710	77,445	20,735	26.8%	Total Salaries & Benefits
56,264	45,500	(10,764)	-23.7%	Professional Fees/Registry
131	317	186	58.6%	Supplies
103,453	39,471	(63,982)	-162.1%	Purchased Services
3,257	3,257	0	0.0%	Depreciation
0	2,625	2,625	100.0%	Other Expense
219,815	168,615	(51,200)	-30.4%	Total Direct Expense
0	0	0		Overhead Allocation
219,815	168,615	(51,200)	-30.4%	Total Expenses
(219,815)	(168,615)	(51,200)	30.4%	Net Income (Loss)

413,862	386,271	(27,591)	-7.1%	
191,857	309,168	117,311	37.9%	
605,719	695,439	89,720	12.9%	
486,648	364,000	(122,648)	-33.7%	
12,231	2,536	(9,695)	-382.3%	
800,879	815,760	14,881	1.8%	
26,056	26,056	0	0.0%	
23,556	21,000	(2,556)	-12.2%	
1,955,089	1,924,791	(30,298)	-1.6%	
0	0	0		
1,955,089	1,924,791	(30,298)	-1.6%	
(1,955,089)	(1,924,791)	(30,298)	1.6%	

FQHC Visits February 2018

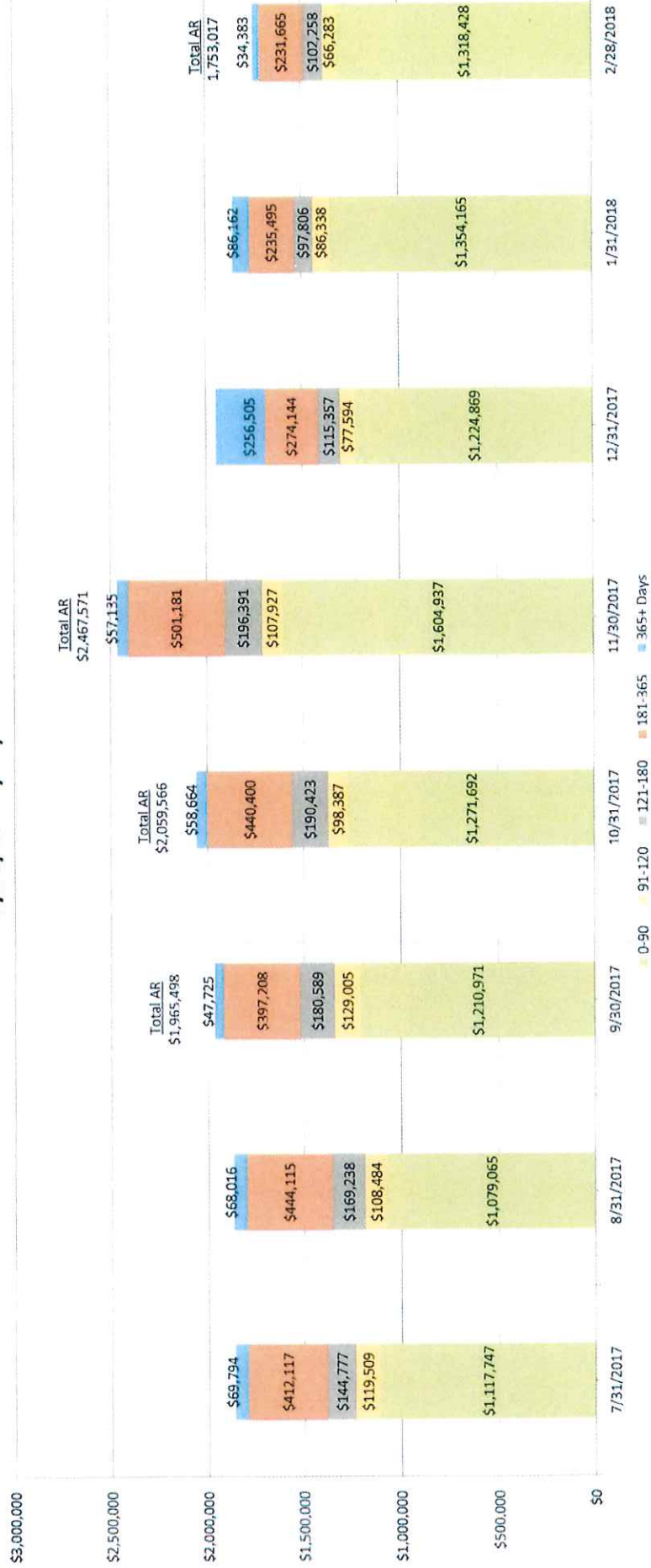


FQHC Visits

February 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
SICC-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
SICC-Haz	360	447	399	476	465	529	600	514	628	600	628	600	6,246
SICC-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	1,676	-	-	-	-	13,221
FMC	1,516	1,910	1,513	1,627	1,526	1,536	1,738	1,624	-	-	-	-	12,990
FPCC	479	518	337	292	360	345	438	388	-	-	-	-	3,157
PMC	2,506	3,325	2,418	2,680	2,600	2,368	3,032	2,832	-	-	-	-	21,761
HBCA	731	828	716	866	749	625	708	586	-	-	-	-	5,809
HBFC	695	874	866	933	859	604	791	730	-	-	-	-	6,352
SICC-Haz	630	885	674	643	614	502	661	631	-	-	-	-	5,240
SICC-Man	-	-	179	612	696	531	540	420	-	-	-	-	2,978
Total	7,989	10,158	8,325	9,467	8,942	7,892	9,848	8,887	-	-	-	-	71,508

San Joaquin County Clinics Accounts Receivable Aging 7/31/17 - 2/28/18



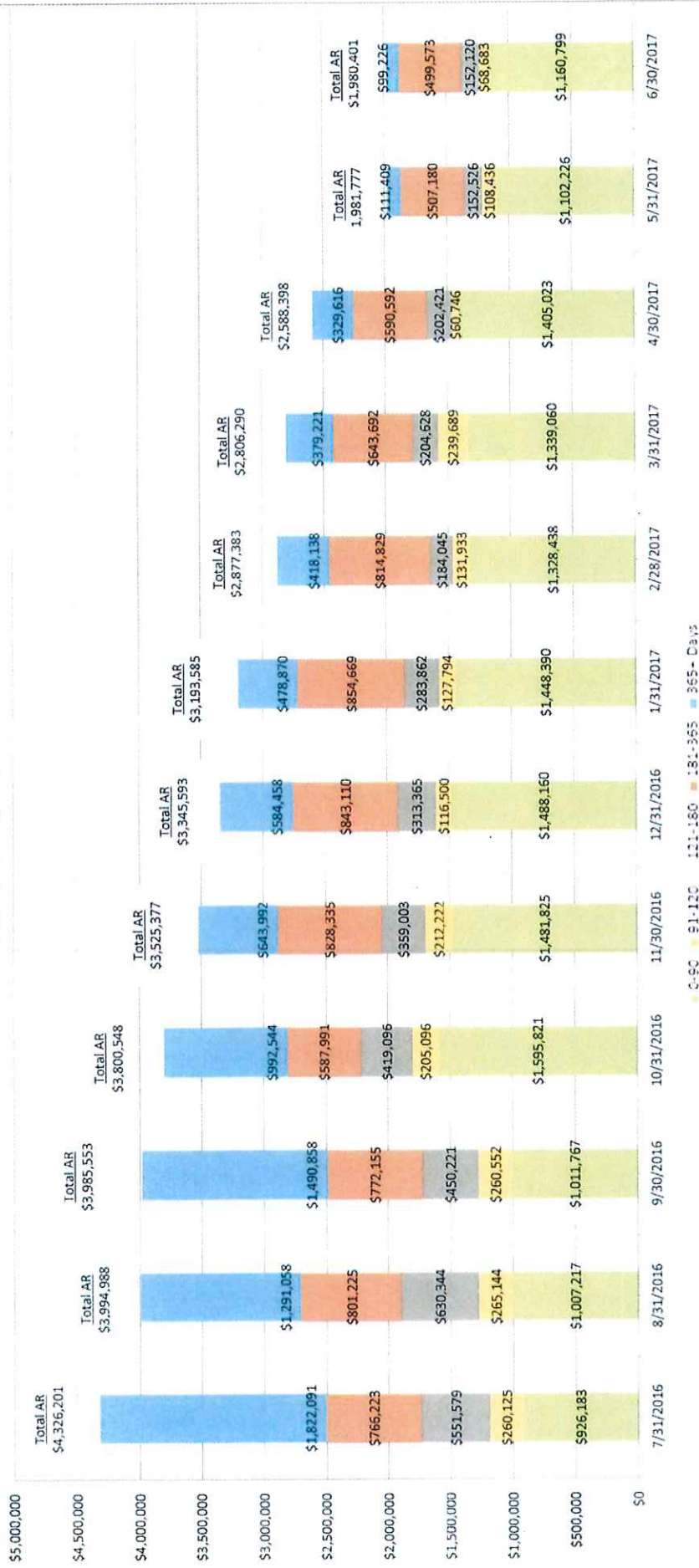
	7/31/2017	8/31/2017	9/30/2017	10/31/2017	11/30/2017	12/31/2017	1/31/2018	2/28/2018
0-90	\$1,117,747	\$1,079,065	\$1,210,971	\$1,271,692	\$1,604,937	\$1,224,869	\$ 1,354,165	\$1,318,428
91-120	\$119,509	\$108,484	\$129,005	\$98,387	\$107,927	\$77,594	\$ 86,338	\$66,283
121-180	\$144,777	\$169,238	\$180,589	\$190,423	\$196,391	\$115,357	\$ 97,806	\$102,258
181-365	\$412,117	\$444,115	\$397,208	\$440,400	\$501,181	\$274,144	\$ 235,495	\$231,665
365+ Days	\$69,794	\$68,016	\$47,725	\$58,664	\$57,135	\$256,505	\$ 86,162	\$34,383
	\$1,863,944	\$1,868,918	\$1,965,498	\$2,059,566	\$2,467,571	\$1,948,469	\$1,859,966	\$1,753,017

Change over the
prev. mo.

Change over
7/31/2017

	-\$116,457	\$4,974	\$96,580	\$94,068	\$408,005	-\$519,102	-\$88,503	-\$106,949
	\$0	\$4,974	\$101,554	\$195,622	\$603,627	\$84,525	-\$3,978	-\$110,927

San Joaquin County Clinics Accounts Receivable Aging 7/31/16 - 6/30/17



	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
0-90	\$926,183	\$1,007,217	\$1,011,767	\$1,595,821	\$1,481,825	\$1,488,160	\$1,448,390	\$1,328,438	\$1,339,060	\$1,405,023	\$1,102,226	\$1,160,799
91-120	\$260,125	\$265,144	\$260,552	\$205,096	\$212,222	\$116,500	\$127,794	\$131,933	\$239,689	\$60,746	\$108,436	\$68,683
121-180	\$551,579	\$630,344	\$450,221	\$419,096	\$359,003	\$313,365	\$283,862	\$184,045	\$204,628	\$202,421	\$152,526	\$152,120
181-365	\$766,223	\$801,225	\$772,155	\$587,991	\$828,335	\$843,110	\$854,669	\$814,829	\$643,692	\$590,592	\$507,180	\$499,573
365+ Days	\$1,822,091	\$1,291,058	\$1,490,858	\$992,544	\$643,992	\$584,458	\$478,870	\$418,138	\$379,221	\$329,616	\$111,409	\$99,226
	\$4,326,201	\$3,994,988	\$3,985,553	\$3,800,548	\$3,525,377	\$3,345,593	\$3,193,585	\$2,877,383	\$2,806,290	\$2,588,398	\$1,981,777	\$1,980,401
Change over the prev. mo.			-\$9,435	-\$185,005	-\$275,171	-\$179,784	-\$152,008	-\$316,202	-\$71,093	-\$217,892	-\$606,621	-\$1,376
Change over 7/31/2016			-\$340,648	-\$525,653	-\$800,824	-\$980,608	-\$1,132,616	-\$1,448,818	-\$1,519,911	-\$1,737,803	-\$2,344,424	-\$2,345,800

Revenue Cycle KPI
SJCC only

February, 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	02/28/18
SJCC Business Office									
Cash Collections	Actual	\$1,118,566	\$971,169	\$880,576	\$851,691	\$1,035,727	\$996,698	\$1,083,023	\$1,136,283
Gross AR		\$1,863,944	\$1,868,918	\$1,965,498	\$2,059,556	\$2,467,571	\$1,928,231	\$1,859,966	\$1,753,017
Gross AR Days (90 day average)	66.5	39.7	37.9	40.9	39.3	46.7	36.6	35.4	33.5
Average Daily Revenue (90 day average)		\$46,892	\$49,259	\$48,042	\$52,449	\$52,796	\$52,695	\$52,471	\$52,337
Wrap AR		\$1,699,236	\$1,750,791	\$1,826,283	\$2,143,772	\$2,322,127	\$2,424,512	\$2,621,101	\$1,418,129
AR over 90 Days		\$746,197	\$789,853	\$754,527	\$787,874	\$862,634	\$703,361	\$505,801	\$434,589
% of AR over 90 Days		40%	42%	38%	38%	35%	36%	27%	25%
AR over 120 Days		\$628,688	\$681,369	\$625,522	\$689,487	\$754,707	\$625,767	\$419,463	\$368,306
% of AR over 120 Days		34%	36%	32%	33%	31%	32%	23%	21%
AR over 180 Days		\$481,911	\$512,131	\$444,933	\$440,400	\$558,315	\$510,410	\$321,657	\$266,048
% of AR over 180 Days		26%	27%	23%	21%	23%	26%	17%	15%
AR over 365 Days		\$69,794	\$68,016	\$47,725	\$58,664	\$57,135	\$20,238	\$86,162	\$34,383
% of AR over 365 Days		4%	4%	2%	3%	2%	1%	5%	2%
New Bad Debt Assignments		\$21,351	\$3,234	\$3,035	\$3,155	\$0	\$0	\$0	\$0
Bad Debt Amount as a % of Gross Revenue		1%	0%	0%	0%	0%	0%	0%	0%
Bad Debt Cash Receipts		\$0	\$5,960	\$5,989	\$2,176	\$2,093	\$638	\$1,076	\$2,166,535
Credit Balance Total		\$18,564	\$17,932	\$19,931	\$21,700	\$47,802	\$25,897	\$24,848	\$22,158
Credit Balances over 60 days		\$17,091	\$15,398	\$17,181	\$19,378	\$21,478	\$24,929	\$24,974	\$21,939
Credit Balances over 180 days		\$12,302	\$12,534	\$13,063	\$13,459	\$14,659	\$15,906	\$17,431	\$15,978
Unlocked Visits Report for All Doctors at all Locations as of e.o.m., eff. 10/1/2015		547	786	299	493	509	566	917	1295
Total Number of claims for month		11,456	14,202	13,814	14,032	17,258	13,330	15,456	14,673
Total Number of clean claims for month		11,122	13,959	13,493	13,605	16,932	13,159	14,981	13,924
Total number of error claims for month		334	243	321	427	326	171	475	749
Clean Claims from ClaimRemedi	>85%	97%	98%	98%	97%	98%	99%	97%	95%

Revenue Cycle KPI

SJCC only

February 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	02/28/18
--------	----------	----------	----------	----------	----------	----------	----------	----------

We saw a decrease in our AR for the month of February by \$107K which resulted in dropping 2 AR days. We submitted less claims than the previous month but was still able to achieve good cash collections coming in at \$1.1M. Payments consisted of \$516K in Wrap payments and \$325K in PACT payments. We were finally approved for electronic submission of our PHS (Hazelton) clinic claims on 2/23 and have submitted all claims that were on hold which was approximately 1400 claims at \$330K. We are still holding claims for Manteca which will continue to impact our AR until our EDI claim submission has been approved by the State for this clinic. 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 February we were holding 1,564 Manteca claims valued at \$365K.

SJCC

Summary of Unlocked and Unclaimed Accounts

As of 02/28/18

Clinic	Total	Feb	Jan	Dec	Nov	Oct	Sep	Aug	Jul	Jun
Children's Health Services	278	278								
Family Medicine Clinic	740	545	116	43	19	15	1	1		
Family Practice Clinic	2	1					1			
Primary Medicine Clinic	71	60	4	4	3					1
Healthy Beginnings - CA	88	88								
Healthy Beginnings - FC	54	24	18	12						
Hazelton	43	31	3	1	1	2	2	2	1	
Manteca	10	7	1		1	1				
Clinic Totals by Month	1,287	1,034	142	60	24	18	4	3	1	1



SJCC PCMH Recognition Project Plan

Author: Tabriz Asghar
Angela Ayala

Creation Date: 10/18/2017

Last Revised: 3/15/2018

Version: 3.0

INTRODUCTION

Purpose of Plan

The SJCC PCMH Recognition Project Plan will provide a definition of the project, including the project's scope and deliverables. Additionally, the Plan will serve as an agreement between the following parties: Project Sponsor, Steering Committee, Project Managers, Project Team, and other personnel associated with and/or affected by the project.

The Project Plan defines the following:

- Scope and expectations
- Roles and responsibilities
- Assumptions and constraints
- Project management approach
- Project budget
- Project timeline

Project Plain Point of Contacts

Project Sponsor		
Farhan Fadoo	ffadoo@sjgh.org	

Project Managers		
Tabriz Asghar	tasghar@sjgh.org	209-468-7677
Angela Ayala	aayala@sjgh.org	209-468-7836

Project Plan Revisions

Revision History		
Date	Document Version	Document Revision Description
10/18/17	1.0	Initial Creation of Document for Review, Approval and Acceptance
10/18/17	1.1	Typo corrections on Page 9; Updated Steering Committee Participants List and changed "Projects" to "Competing Projects" on Page 11.
11/16/2017	2	Modified timeline
3/15/2018	3	Modified timeline

Project Lifecycle;

Project Life Cycle presents the major outputs and deliverables for each of the Optimization phases



- Project Charter
- Crosswalk

- Scope
- Communication Plan
- Risk Management
- Schedule

- Kick-off
- Development
- Roll-Out
- Application

- Monthly meeting
- Bi-weekly workgroup Meetings (if needed)
- Tracking
- Change Management

- Post Implementation Meeting
- Project Closure Report

Schedule Allocation

Date	Major Milestone/Deliverables	Status
7/5/2017	Project Start	Complete
7/25/2017	Training	Complete
8/1/2017	Identify risks	Complete
8/1/2017	Gap Analysis	Complete
9/15/2017	Findings and action plan	Complete
10/18/2017	Project Plan	Complete
10/19/2017	Kickoff Meeting	Complete
10/19/2017	Develop standardization and workflows	In-progress
4/23/2018	Initial Screening	Not Started
5/21/2018	Application Submission Initiation	Not Started
6/04/2018	Upload existing evidence	Not Started
7/09/2018	First virtual review	Not Started
8/13/2018	Upload existing evidence	Not Started
8/20/2018	Schedule second virtual review	Not Started
9/10/2018	Second Virtual Review	Not Started
10/15/2018	Remedy and implement	Not Started
11/05/2018	Monitor	Not Started
11/12/2018	Upload existing evidence	Not Started
11/19/2018	Schedule third virtual review	Not Started
12/17/2018	Third Virtual Review	Not Started
12/31/2018	Project completion	Not Started

SCOPE

Scope Definition

- Transforming SJCC Primary Care Practices into patient-centered medical homes

Deliverables

- Satisfy documentation requirements to meet 40 core criteria and 25 elective criteria to receive NCQA PCMH recognition by end of Q2.

Locations

- Primary Medicine Clinic
- Family Medicine Clinic
- Family Practice California Clinic
- Children's Health Services
- SJCC-Hazelton Street
- SJCC-Manteca Clinic
- ~~Employee Health Services~~

Risk Assessment

The initial **Risk Assessment** (following page) attempts to identify, characterize, prioritize and document a mitigation approach relative to those risks which can be identified prior to the start of the project.

The **Risk Assessment** will be continuously monitored and updated throughout the life of the project, with monthly assessments included in the status report (see **Communications Plan**) and open to amendment by the Project Managers.

Because mitigation approaches must be agreed upon by project leadership (based on the assessed impact of the risk, the project's ability to accept the risk, and the feasibility of mitigating the risk), it is necessary to allocate time into each Steering Committee meeting, dedicated to identifying new risks and discussing mitigation strategies.

The Project Managers will convey amendments and recommended contingencies to the Steering Committee monthly, or more frequently, as conditions may warrant.

Initial Project Risk Assessment

Risk	Likelihood of Event	Mitigation Strategy
Adequate Resources both Staffing and Financial	Certainty	Develop comprehensive project management approach and communications plan
Project Scope Creep	Unlikely	Scope initially defined in project plan, reviewed monthly by two groups (Project Managers and Steering Committee) to prevent undetected scope creep
Timeline Estimates Unrealistic	Likely	Timeline reviewed monthly by two groups (Project Managers and Steering Committee) to prevent undetected timeline departures
Staff Resistance	Likely	Frequently seek feedback to ensure continued support
Project Team Availability	Somewhat Likely	Continuous review of project momentum by all levels. Project Managers to identify any impacts caused by unavailability. If necessary, request for additional resource hours
Change overload	Likely	Continues communication and Frequently seek feedback to ensure continued support
Stakeholders become disengaged	Likely	Frequently seek feedback to ensure continued support
Impacted individuals are kept informed	Likely	Utilize Communication Plan and see feedback to ensure support

ASSUMPTIONS

Project Assumptions

The following assumptions were made in preparing the Project Plan:

- Leadership will consistently and visibly support the project
- Management will ensure that project team members are available as needed
- Adequate and appropriate resources will be available and assigned to the project to ensure successful outcomes.
- All project participants will abide by the guidelines identified within this plan.
- The Project Plan may change as new information and issues are revealed.
- Routine meetings will be scheduled with stakeholders for their respective deliverables.

CONSTRAINTS

Project Constraints

With most projects there are some limitations that can affect the outcome of the project. In order to complete this project under the requirements that have been established by this plan, the following list of constraints has been established. This list does not include any yet unforeseen circumstances that could have a negative impact on the project. Project team members will constantly monitor the project to make certain that any possible constraints not yet identified are handled immediately so as not to delay the Process of Recognition.

- Project funding sources are limited
- Staff Resistance
- Organizational Readiness

Competing Projects

- * Cerner
- * PRIME
- * SJGH Urgent Care
- * E-Consult
- * Next-Gen ACO

Critical Project Barriers

Unlike risks, critical project barriers are insurmountable issues that can be destructive to a project's initiative. In this project, the following are possible critical barriers:

- * Removal of project funding and resources

Should any of these events occur, the Project Plan would become invalid.

PROJECT MANAGEMENT APPROACH

Project Roles and Responsibilities

Role	Responsibilities	Participant(s)
Project Sponsor	<ul style="list-style-type: none"> ▪ Ultimate decision-maker and tie-breaker ▪ Provide project oversight and guidance ▪ Review/approve some project elements 	Farhan Fadoo
Steering Committee	<ul style="list-style-type: none"> ▪ Commits department resources ▪ Resolves conflicts and issues ▪ Provides direction to the Project Managers ▪ Reviews and approve project deliverables 	David B. Jomaoas Farhan Fadoo Sheela S. Kapre Betty J. Riendel Alice A. Soulligne Michele M. Perez Lindzi E. Behnke Charlotte Hunter-Brown Mamta Jain Asma B. Jafri Kur Song Joan Singson Adele M. Campos Rajat Simhan Angela R. Ayala Mohsen S. Saadat Jeff A. Slater Rhiannon L. Viramontes Maria Morales Tabriz Asghar
Project Managers	<ul style="list-style-type: none"> ▪ Manages project in accordance to the project plan (utilizing PMBOK Processes) ▪ Serves as liaison to the Steering Committee ▪ Receive guidance from Steering Committee ▪ Provide overall project direction ▪ Direct/lead team members toward project objectives ▪ Handle problem resolution ▪ Manages the project budget 	Angela Ayala Tabriz Asghar
Project Participants	<ul style="list-style-type: none"> ▪ Creates or help create workflows ▪ Participation in work groups and individual meetings ▪ Provide knowledge and recommendations ▪ Helps identify and remove project barriers ▪ Identify risks and issues and help in resolutions 	To be identified by Steering Committee
Subject Matter Experts	<ul style="list-style-type: none"> ▪ Lend expertise and guidance as needed 	To be identified by Steering Committee

Issue Management

The information contained within the Project Plan will likely change as the project progresses. While change is both certain and required, it is important to note that any changes to the Project Plan will impact at least one of three critical success factors: Available Time, Available Resources (Personnel), or Project Quality. The decision by which to make modifications to the Project Plan (including project scope and resources) should be coordinated using the following process:

- Step 1:** As soon as a change which impacts project scope, schedule, staffing or spending is identified, the Project Managers will document the issue.

- Step 2:** The Project Managers will review the change and determine the associated impact to the project and will forward the issue, along with a recommendation to the Steering Committee for review and decision.

- Step 3:** Upon receipt, the Steering Committee should reach a consensus opinion on whether to approve, reject or modify the requested change. Should the Steering Committee be unable to reach consensus on the approval or denial of a change, the issue will be forwarded to the Project Sponsor, with a written summation of the issue, for ultimate resolution.

- Step 4:** The Project Sponsor shall review the issue(s) and render a final decision on the approval or denial of a change.

- Step 5:** Following an approval or denial (by the Steering Committee or Project Sponsor), the Project Managers will notify the original requestor of the action taken. There is no appeal process.

Communications Plan

Disseminating knowledge about the project is essential to the project's success. Project participants desire knowledge of what the status of the project is and how they are affected. Furthermore, they are anxious to participate. The more that people are educated about the progress of the project and how it will help them in the future, the more they are likely to participate and benefit.

This plan provides a framework for informing and involving all participants throughout the duration of the project.

Audience This communication plan is for the following audiences:

- * Project Sponsor
- * Steering Committee
- * Project Managers
- * User Group Participants
- * Subject Matter Experts

Communications Outreach The following is a list of communication events that are established for this project:

Monthly Status Reports The Project Managers shall provide monthly written status reports to the Steering Committee. The reports shall include the following information tracked against the Project Plan:

- Summary of tasks completed in previous month
- Summary of tasks scheduled for completion in the next month
- Summary of issue status and resolutions

Monthly Steering Committee Meeting These status meetings are held at least once per month and are coordinated by the Project Managers. Every member of the Steering Committee participates in the meeting. The Project Managers sends the status report to each member of the team prior to the meeting time so everyone can review it in advance.

Bi-Weekly Project Team Status Meeting These status meetings are held every other week. Every member of the Project Team will be invited to participate in the meeting. Project Managers sends the status report to each member of the team prior to the meeting so everyone can review it in advance.

Email Use email for routine messages, information and questions related to project. CC Project Managers in all Project related communication.

ATTACHMENTS/APPENDICES

Appendices/Attachments may be included in a hardcopy form

- 1. Project Charter**
- 2. Project Timeline**
- 3. QA Workbook**
- 4. PCMH Status Report**
- 5. Kick-off Meeting PPT**

APPROVALS

Sign-off Sheet

I have read the above Project Plan and will abide by its terms and conditions and pledge my full commitment and support for the Project Plan.

Project Sponsor: _____ Date

Project Manager: _____ Date

Project Manager: _____ Date

SICC Clinical Performance Indicators -- Summary Dashboard

Measure	CY 2017	CY 2016	Target	Benchmark Source	Reference
DM A1c Control	58.57% \yen	68.57% \yen	49.08%	HEDIS CIS - 2015 DHCS MCMC Average	NQF 0059
CVD BP Control	59.14%	50.79%	63.42%	PRIME DY 12 Target	NQF 0018
Pap Screening	54.29% \yen	52.86% \yen	56.00%	UDS National Data 2015	NQF 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% \yen	60.00% \yen	73.72%	HEDIS -2015 DHCS MCMC Average	NQF 0038
Pediatric Dental Referrals (non-UDS)	98.57% \yen	93.77% \yen	33.20%	HP2020	NQF 1334
Pediatric BMI Screening and Intervention	72.97%	80.91%	54.70%	HP2020	NQF 0024
Adult BMI Screening and Intervention	61.30%	60.65%	53.60%	HP2020	NQF 0421
Tobacco Use Screening and Intervention	87.40%	90.99%	82.80%	UDS National Data 2015	NQF 0027
Asthma Pharmacological Therapy	93.91%	90.57%	49.08%	HEDIS - 2015 DHCS MCMC Average	NQF 0047
CAD Lipid Therapy	84.85%	86.55%	77.90%	UDS National Data 2015	NQF 0074
IVD Aspirin Therapy	85.88%	86.63%	78.00%	UDS National Data 2015	NQF 0068
Colorectal Cancer Screening	33.83%	42.86% \yen	59.85%	PRIME DY 12 Target	NQF 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	NQF 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)
- NQF: 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 \leq 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
- Prenatal Care in 1st Trimester: Obstetrical patients with initial prenatal exam completed in the first trimester (includes all patients who receive prenatal care during the measurement year)
- Birth Weight < 2500 gm: Number of deliveries where child weighed < 2,500 grams (includes all neonates that received prenatal care at SICC regardless of where delivered)
- Pediatric Immunizations: Children who have received age appropriate vaccines prior to their 2nd birthday during the measurement year(4 DTaP, 3 IPV, 3 Hep B, 1 MMR, 1 VZV, 4 PCV, 1 Hep A, 2 RV, 2 Flu)
- Pediatric Dental Referrals (non-UDS): Number of children that received a well child exam (CHDP) during the measurement year that were referred to the dentist for oral health care
- Pediatric 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
- Adult BMI 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)
- Tobacco Use Screening and Intervention: 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
- Asthma Pharmacological 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 measurement year
- CAD Lipid Therapy: Patients age 18 and older with CAD (1 visit) and been prescribed a lipid-lowering medication during the measurement year
- IVD Aspirin Therapy: Patients age 18 and older with IVD (1 visit) and been prescribed an antithrombotic medication during the measurement year
- Colorectal Cancer Screening: Patients age 50-75 (1 visit) seen in the measurement year who had appropriate screening for colorectal cancer (colonoscopy \leq 10 yrs, flex sig \leq 5 yrs, or annual FOB/FIT testing)
- HIV Linkage to Care: Newly-diagnosed HIV patients in the measurement year with documentation of referral and treatment initiation within the first 90 days of diagnosis
- Depression Screening and Follow-up: 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

\yen Random Sample (not whole universe)

5a

SJCC Clinical Performance Indicators 01/01/2017 - 12/31/2017
Clinic Breakdown

DM A1c Control

Facility	Under	Between	Over	Total	Compliance
Family Medicine Clinic	11	3	3	17	64.71%
Family Practice California Clinic	3	1	3	7	42.86%
Primary Medicine Clinic	26	4	15	45	57.78%
SJ County Clinics - Hazelton	1	0	0	1	100.00%
Total	41	8	21	70	58.57%

CVD BP Control

Facility	Compliant	Not Compliant	Total	Compliance
Childrens Health Services	3	1	4	75.00%
Family Medicine Clinic	590	423	1013	58.24%
Family Practice California Clinic	321	157	478	67.15%
Healthy Beginnings California	29	23	52	55.77%
Healthy Beginnings French Camp	61	37	98	62.24%
Primary Medicine Clinic	2067	1425	3492	59.19%
SJ County Clinics - Hazelton	100	98	198	50.51%
SJ County Clinics - Manteca	38	53	91	41.76%
Total	3209	2217	5426	59.14%

Pap Screening

Row Labels	Compliant	Not Compliant	Total	Compliance
Family Medicine Clinic	7	6	13	53.85%
Family Practice California Clinic	2	0	2	100.00%
Healthy Beginnings California	8	4	12	66.67%
Healthy Beginnings French Camp	9	3	12	75.00%
Primary Medicine Clinic	12	16	28	42.86%
SJ County Clinics - Hazelton	0	1	1	0.00%
SJ County Clinics - Manteca	0	2	2	0.00%
Total	38	32	70	54.29%

Immunizations

Facility	Compliant	Not Compliant	Total	Compliance
Children's Health Services	27	26	53	50.94%
Family Medicine Clinic	3	13	16	18.75%
SJ County Clinics - Manteca	1	0	1	100.00%
Total	31	39	70	44.29%

Dental Referrals

Facility	Compliant	Not Compliant	Total	Compliance
Children's Health Services	62	1	63	98.41%
Family Medicine Clinic	5	0	5	100.00%
SJ County Clinics - Manteca	2	0	2	100.00%
Total	69	1	70	98.57%

SJCC Clinical Performance Indicators 01/01/2017 - 12/31/2017

Clinic Breakdown

PEDS BMI

Facility	Compliant	Not Compliant	Total	Compliance
Children's Health Services	3923	962	4885	80.31%
Family Medicine Clinic	774	414	1188	65.15%
Healthy Beginnings California	6	24	30	20.00%
Healthy Beginnings French Camp	1	16	17	5.88%
Primary Medicine Clinic	0	2	2	0.00%
SJ County Clinics - Hazelton	100	391	491	20.37%
SJ County Clinics - Manteca	103	9	112	91.96%
Total	4907	1818	6725	72.97%

Adult BMI

Facility	Compliant	Not Compliant	Total	Compliance
Children's Health Services	12	5	17	70.59%
Family Medicine Clinic	2009	1550	3559	56.45%
Family Practice California Clinic	634	1088	1722	36.82%
Healthy Beginnings California	243	500	743	32.71%
Healthy Beginnings French Camp	363	556	919	39.50%
Primary Medicine Clinic	6979	2151	9130	76.44%
SJ County Clinics - Hazelton	589	814	1403	41.98%
SJ County Clinics - Manteca	116	246	362	32.04%
Total	10945	6910	17855	61.30%

Tobacco Use Screening and Intervention

Facility	Compliant	Not Compliant	Total	Compliance
Children's Health Services	18	0	18	100.00%
Family Medicine Clinic	3377	495	3872	87.22%
Family Practice California Clinic	1553	275	1828	84.96%
Healthy Beginnings California	1305	133	1438	90.75%
Healthy Beginnings French Camp	1486	80	1566	94.89%
Primary Medicine Clinic	9009	1111	10120	89.02%
SJ County Clinics - Hazelton	1127	454	1581	71.28%
SJ County Clinics - Manteca	305	73	378	80.69%
Total	18180	2621	20801	87.40%

Asthma

Facility	Compliant	Not Compliant	Total	Compliance
Children's Health Services	126	7	133	94.74%
Family Medicine Clinic	13	3	16	81.25%
Family Practice California Clinic	9	0	9	100.00%
Healthy Beginnings California	1	0	1	100.00%
Healthy Beginnings French Camp	4	0	4	100.00%
Primary Medicine Clinic	29	2	31	93.55%
SJ County Clinics - Manteca	3	0	3	100.00%
Total	185	12	197	93.91%

SJCC Clinical Performance Indicators 01/01/2017 - 12/31/2017

Clinic Breakdown

CAD

Facility	Compliant	Not Compliant	Total	Compliance
Family Medicine Clinic	56	6	62	90.32%
Family Practice California Clinic	18	4	22	81.82%
Healthy Beginnings California	1	2	3	33.33%
Healthy Beginnings French Camp	6	0	6	100.00%
Primary Medicine Clinic	219	42	261	83.91%
SJ County Clinics - Hazelton	2	1	3	66.67%
SJ County Clinics - Manteca	6	0	6	100.00%
Total	308	55	363	84.85%

IVD

Facility	Compliant	Not Compliant	Total	Compliance
Family Medicine Clinic	104	19	123	84.55%
Family Practice California Clinic	35	9	44	79.55%
Healthy Beginnings California	2	1	3	66.67%
Healthy Beginnings French Camp	5	1	6	83.33%
Primary Medicine Clinic	443	64	507	87.38%
SJ County Clinics - Hazelton	2	3	5	40.00%
SJ County Clinics - Manteca	5	1	6	83.33%
Total	596	98	694	85.88%

Colorectal Cancer Screening

Facility	Compliant	Not Compliant	Total	Compliance
Family Medicine Clinic	593	791	1384	42.85%
Family Practice California Clinic	131	514	645	20.31%
Healthy Beginnings California	22	102	124	17.74%
Healthy Beginnings French Camp	70	204	274	25.55%
Primary Medicine Clinic	1705	2926	4631	36.82%
SJ County Clinics - Hazelton	15	375	390	3.85%
SJ County Clinics - Manteca	49	144	193	25.39%
Total	2585	5056	7641	33.83%

HIV

Facility	Compliant	Not Compliant	Total	Compliance
Family Medicine Clinic	1	0	1	100.00%
Primary Medicine Clinic	4	4	8	50.00%
SJ County Clinics - Hazelton	1	0	1	100.00%
SJ County Clinics - Manteca	1	0	1	100.00%
Total	7	4	11	63.64%

SJCC Clinical Performance Indicators 01/01/2017 - 12/31/2017
Clinic Breakdown

Depression Screening and Follow-up

Facility	Compliant	Not Compliant	Total	Compliance
Children's Health Services	1114	236	1350	82.52%
Family Medicine Clinic	2824	697	3521	80.20%
Family Practice California Clinic	1247	145	1392	89.58%
Healthy Beginnings California	722	772	1494	48.33%
Healthy Beginnings French Camp	782	937	1719	45.49%
Primary Medicine Clinic	5888	2322	8210	71.72%
SJ County Clinics - Hazelton	1138	670	1808	62.94%
SJ County Clinics - Manteca	491	118	609	80.62%
Total	14206	5897	20103	70.67%

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

2018 Federal Poverty Level Based on Monthly Income by Family Size

Family Size	\$30 Nominal Fee 0-100%	\$40 Minimum Fee 101 - 133%	\$50 Minimum Fee 134 - 150%	\$60 Minimum Fee 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>

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 General Hospital
Fiscal Year Ended 6/30/2015

(in 000's)

Summary of PPS Reimbursement and Payments for Managed Medi-Cal

Line	Month	1	2	3	4	5	6	7	8	9	10	11	12	Total
1	Billable Visits	4,528	4,751	5,464	6,017	4,969	5,042	6,495	6,192	6,675	6,657	6,079	6,252	69,121
2	Potential PPS Reimbursement	768	799	901	999	806	831	1,067	1,029	1,110	1,085	994	1,016	11,405
3	Sum of Code 18 Pmts	294	380	479	474	421	463	583	532	558	564	500	518	5,767
4	Sum of Health Plan Pmts	54	63	77	85	68	77	107	95	90	83	73	79	950
5	Sum of HPSJ Allocated Cap Payment	322	338	390	430	351	362	461	443	475	470	430	445	4,917
6	Total Cash Collections	670	782	945	988	840	902	1,151	1,070	1,123	1,117	1,004	1,042	11,634
7	Due to / (from) SJGH	98	17	(44)	11	(34)	(71)	(84)	(41)	(13)	(32)	(10)	(26)	(229)
8	Billable Visits	4,528	4,751	5,464	6,017	4,969	5,042	6,495	6,192	6,675	6,657	6,079	6,252	69,121
9	Actual PPS Reimbursement	397	494	623	624	550	614	773	701	748	746	664	682	7,615
10	Sum of Code 18 Pmts	294	380	479	474	421	463	583	532	558	564	500	518	5,767
11	Sum of Health Plan Pmts	54	63	77	85	68	77	107	95	90	83	73	79	950
12	Sum of HPSJ Allocated Cap Payment	322	338	390	430	351	362	461	443	475	470	430	445	4,917
12	Due to / (from) SJGH	(273)	(288)	(322)	(364)	(290)	(288)	(378)	(369)	(375)	(371)	(340)	(360)	(4,019)
14	Difference between potential and actual	(371)	(305)	(278)	(375)	(256)	(217)	(294)	(328)	(362)	(339)	(330)	(335)	(3,790)