



10100 Trinity Parkway, Suite 100, Stockton, CA 95219
SJ Health Board of Directors Agenda
Tuesday September 27, 2022, 5:00 p.m.

- | | | |
|---|---|--------------------------|
| 1. Call to Order & Establish Quorum | | Rod Place |
| a. Call to Order & Establish Quorum | | |
| b. SJCC Board of Director’s Attendance Record (Aug 2022) | | |
| 2. Approval of Minutes SJ Health Board Meeting from 8/30/2022 | * | Rod Place |
| 3. Public Comment (3 minutes/speaker) | | General Public |
| 4. Credentialing & Privileging Report – Sept 2022 | * | Angela Ayala |
| 5. Finance Committee Report – Sept 2022 | * | Kris Zuniga |
| 6. 2021 Audit Presentation | * | Scott Gold |
| 7. Grant Proposal Approvals – Sept 2022 | | Jeff Slater |
| a. KidsVax2 Grant | * | |
| b. Test to Treat Grant | * | |
| c. CalBridge Grant | * | |
| 8. Renewal of Designation Application Approval | * | Jeff Slater/Rajat Simhan |
| 9. Board Training (Consent Agenda Discussion) | | Susan Thorner |
| 10. Vote to Adopt Consent Agendas | * | Rod Place |
| 11. CEO Annual Report | | Farhan Fadoo |
| 12. Adjournment of Board Meeting | | Rod Place |

***Action Item**

Next Meeting Date: October 25, 2022 @ 5:00 P.M.
Microsoft Teams Meeting

Note: If you need disability-related modification or accommodation to participate in this meeting, please contact San Joaquin Health Centers at (209) 953-3711 at least 48 hours prior to the start of the meeting. Government Code Section 54954.2(a) - materials related to an item on this agenda submitted to the Board after distribution of the agenda packet are available for public inspection by contacting SJ Health Clinic Administration at 10100 Trinity Parkway, Suite 100, Stockton, CA 95219 during normal business hours.



SJ HEALTH BOARD OF DIRECTORS ATTENDANCE RECORD 2022

2022 Full Board Meeting Dates

Member Name	Patient? Yes / No	Joined Board	1/25/22	2/23/22	3/29/22	4/26/22	5/31/22	6/28/22	7/26/22	8/30/22	9/27/22	10/25/22	11/29/22	12/28/22
Antigua, Paul	Yes	2021	AE	P	P	P	AU	AE						
Chang, Charson MD	Yes	2021	P	P	P	P	P	P						
Fuentes, Monica	No	2021	AU	P	P	P	P	P	AU	AU				
Heck, Brian	Yes	2019	P	P	P	P	P	P	P	P				
Hernandez, Jessica	Yes	2021	P	P	P	P	P	P	AU	AE				
King, Cynthia	No	2021	P	P	AE	P	P	P	AE	P				
Lee, Karen	No	2021	P	P	P	P	P	P	P	P				
Medina, Esgardo	Yes	2020	P	P	P	AU	AU	AE	AU	AU				
Monks, Samantha	No	2022												
Moreno, Jodie	No	2022				P	P	P	AE	P				
Place, Rod	Yes	2010	P	P	P	P	P	P	P	P				
Pua, Bernadette	No	2021	AU	P	AU	P	P	AE	P	AE				
Shinn, Kristin	No	2022						P	P	P				
Taylor-Godfrey, Tarsha	No	2022					P	P	P	P				

CODE P = Present

Code AE = Absence Excused

CODE AU = Absence Unexcused

Minutes of August 30, 2022 San Joaquin Health Centers Board of Directors

Board Members Present: Dr. Farhan Fadoo (CEO); Brian Heck (Vice Chair); Cynthia King; Karen Lee; Jodie Moreno; Rod Place (Board Chair); Kristin Shinn; Tarsha Taylor-Godfrey

Excused Absent: Jessica Hernandez; Bernadette Pua

Unexcused Absent: Monica Fuentes; Esgardo Medina

SJCC Staff: Michael Allen (Board Clerk); Angela Ayala; Dr. Jonathon Diulio; Rajat Simhan (Consultant); Jeff Slater (Consultant); Alice Souligne (COO); Kris Zuniga (CFO)

Guests: Samantha Monks

AGENDA ITEM	ATTACHMENTS	ACTION
<p>1. <u>Call to Order (Rod Place)</u> The meeting was called to order at 5: p.m. A quorum was established for today's meeting.</p>	2022 Board Member Attendance	No action required
<p>2. <u>Approval of Minutes from July 26, 2022 (Rod Place)</u> Meeting minutes from 7/26/22 were approved unanimously.</p>	Board Minutes 2022-07-26	Brian motioned to approve the minutes and Kristin seconded; motion was approved unanimously
<p>3. <u>Public Comment</u> none</p>	No attachment	No action required
<p>4. <u>Credentialing & Privileging Report (Angela Ayala)</u> Reappointments for July were Dr. Apolinario, Dr. I. Troncales and Dr. Bhanu Wunnava. Dr. Shani Truong was a provisional advancement. Resignations were Dr. Ofelia Ortiz and Dr. Soujanya Sodavarapu.</p> <p>Initial appointments for August are Dr. Hina Farooq & Dr. Richa Handa, which were approved by Board vote. Reappointment is Dr. Benjamin Morrison. Advancement is Dr. Shani Truong, Dr. Deborah Jamison, and Dr. James Simmons.</p>	2022-July SJHEALTH Provider Credentialing Packet; 2022-August SJHEALTH Provider Credentialing Packet	Kristin motioned to accept the initial appointments and Cynthia seconded; motion was approved unanimously
<p>5. <u>Quality Report (Angela Ayala)</u> August updates include gap closure efforts, although Saturday clinics have been suspended until more resources are available. Pediatric backpack distribution occurring at French Camp clinic. Clinic team engagement is focusing on well care visits, streamlining information regarding payer partner benefits to our patients, and ensuring adequate use of reporting codes. 2-week sprints continue with focus on clinical workflows. Draft dashboard presented to leadership with focuses on: cervical cancer screening, breast cancer screening, an well care visits.</p> <p>August quality metrics were reviewed. Several metrics have seen a downward trend, which we attribute to staffing challenges.</p> <p>Children's health measures were reviewed and there was a noted improvement since June. Measures that declined only</p>	August 2022 Quality Report	Cynthia motioned to accept the Quality report and Jodie seconded; motion was approved unanimously

<p>did so very minimally. Women's health measures were also reviewed and 3 improved slightly, while 2 declined slightly.</p>		
<p>6. Finance Committee Report (Kris Zuniga) June financials were presented as a year-end summary. Due to state policy at the end of each fiscal year, payments to health care systems are paused to all recipients. This is an expected gap and payments resume in July.</p> <p>Billable visits for July are unfavorable to budget by 151 visits. Net Patient Service Revenues for July are \$172,039 less than budget. July financials reflect a PPS reconciliation liability accrual of \$25,000.</p> <p>Medi-Cal cost settlement payments for \$667,770 related to PPS reconciliations for FY2020 are reflected on the July financials.</p> <p>Supplemental Revenue includes the recognition of estimated Quality Incentive Program revenue for \$1,280,629. Combined Grants Revenue includes revenues for Behavioral Health Integration and American Rescue Plan (ARP) grants for \$1,119,609. Also, July grant revenues are higher than budget due to the recognition of American Rescue Plan (ARP) grant revenue for \$765,299 for activity related to January 2021 through June 2021 period. Capitation and Managed Care Incentives include the Capitation Revenue with a favorable variance to budget by \$13,999. Also, Other Income includes the 340B Pharmacy Program revenue for \$189,106 and the program related expenses for \$72,112 are included in Supplies & Other Expenses categories on the financials. Other Revenue includes revenues accrued for \$59,192 related to Purchased Services provided to SJGH by SJCC per the MOU and Interest Income of \$10,234. Total Net Operating Revenues are favorable to budget by \$1,010,141.</p> <p>Salaries and benefits expenses exhibit an unfavorable variance to budget by \$150,629. Other operating expenses exhibit an unfavorable variance of \$540,739 largely due to Purchased Services and Interest Expense with favorable variance of \$175,088 mainly offset by unfavorable variance in Professional Fees, Supplies, Depreciation, and Other Expenses for \$715,827. An estimated expense for the Purchased Services is recorded for July based on the MOU.</p> <p>Unaudited, as presented, Net Income of \$153,732 for July is favorable compared to budget by \$318,772.</p> <p>Capital Link benchmarks were reviewed, showing Operating Margin at 3% against a goal of >3%, Bottom Line Margin at 3% against a goal of >3%, Days Cash on Hand at 60 against a goal of >45 days, Days in Net Patient Receivables at 43 against a goal of <60 days, and Personnel-Related Expenses at 70% against a goal of <70%.</p>	<p>CFO Presentation – 2022-07; Finance Narrative – 2022-07</p>	<p>Cynthia motioned to approve the Finance committee reports and Brian seconded; motion was approved unanimously</p>

<p>7. Legislative Update & Grant Proposal Approvals (Jeff Slater) AB 32 to allow more flexible rules for telehealth billing has passed its committee votes and is under consideration by the Senate.</p> <p>SB 939 to protect 340 B pharmacy program pricing. May not be taken up during the current session.</p> <p>SB 966 to expand billing for behavioral health services. This is currently at the Assembly for review.</p>	<p>Legislative Update 8-30-2022</p>	<p>No action required</p>
<p>8. Retroactive Approval of Changes in Scope to Include Manteca Health Center (Jeff Slater) Retroactive approval is being requested to include the reopening of the Manteca clinic in our HRSA scope of project. Site was closed in June 2020 due to cost-cutting measures, but the landscape is now favorable for reopening to serve this part of the County with expected financial viability for this clinic. Conservative estimates show we will be serving at least 2,000 existing patients and 100 new patients per year.</p>	<p>Item 8 August 30</p>	<p>Cynthia motioned to retroactively approve this request and Kristin seconded; motion was approved unanimously</p>
<p>9. Approval of 9 HIPAA Policies (Farhan Fadoo) Updated suite of HIPAA policies were presented to the Board and voted upon.</p>	<p>HIPAA Breach Notification; HIPAA Minimum Necessary Rule; HIPAA Right to Amend; HIPAA Uses & Disclosures After Patient Death; HIPAA Uses & Disclosures for Marketing; HIPAA Uses & Disclosures of PHI – Authorizations; HIPAA Uses & Disclosures of PHI; HIPAA Uses & Disclosures Requiring Authorization; HIPAA Verification of Authority to Access PHI</p>	<p>Brian motioned to approve the updated suite of HIPAA policies and Karen seconded; motion was approved unanimously</p>
<p>10. Board Membership Vote (Rod Place) Leadership met with Samantha Monks and their results were presented to the Governance Committee, who approved of presenting her to the full Board for a membership vote.</p>	<p>Samantha Monks Application; Monks, Samantha Resume</p>	<p>Jodie motioned to approve the membership of Samantha Monk and Brian seconded; motion was approved unanimously</p>
<p>11. Board Training Board training canceled for this month, as Susan is not in attendance.</p>	<p>No attachments</p>	<p>No action required</p>
<p>12. CEO Report (Farhan Fadoo) Due to improvement in COVID data, focus on this will be reduced, going forward.</p> <p>SJ Health is serving on a NACHC LAL task force to address disparities between FQHCs and Look-A-Likes with legislators and hopefully bring more funding to LALs.</p>	<p>CEO Report 08302022 SJ Health Board meeting</p>	<p>No action required</p>

<p>SJ Health is in the planning stages for offering after-hours doc-on-demand virtual care services.</p> <p>Agreement now signed to work with UOP as a “feeder” program for students in its various programs.</p> <p>Good working relationship being built with new Dignity Health leadership at SJGH.</p> <p>Reopening of Manteca clinic may allow inclusion of dental and vision care in-clinic. Search for a site to build a new clinic in Lodi is underway.</p> <p>Efforts underway to hire more administrative staff for HR, revenue cycle management and community/public relations.</p> <p>Strategic plan was reviewed, with 28 projects now complete, 41 in process, and 5 not yet started.</p>		
<p>13. Adjournment There being no further topics of discussion, Rod Place adjourned the meeting at 6:13 p.m.</p>	<p>No attachments</p>	<p>No action required</p>



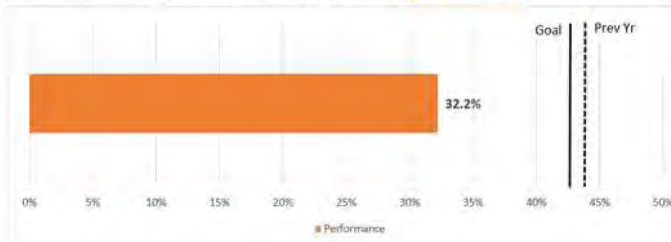
SAN JOAQUIN HEALTH CENTERS

CFO PRESENTATION

Kris Zuniga
Chief Financial Officer
Presentation Date: 9/27/2022

HEALTH PLAN OF SAN JOAQUIN MEMBERSHIP ASSIGNMENTS CALENDAR YTD AS OF AUGUST 2022

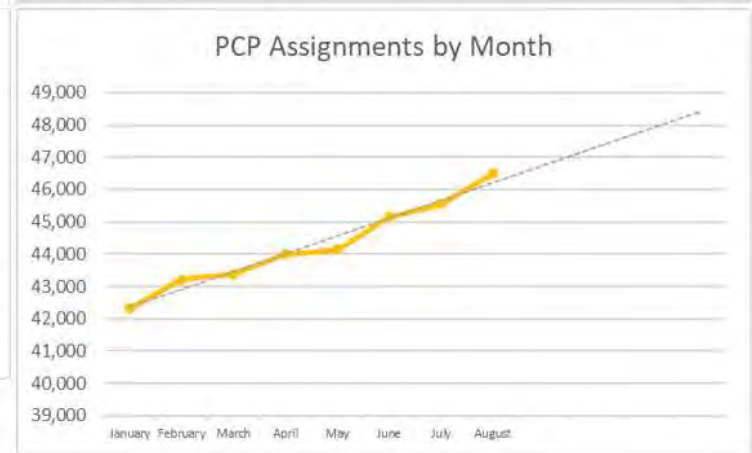
San Joaquin Health Centers					
Year	Panel Size	Panel Seen	Goal	% Goal	Performance
2021	40,852	18,141	19,227	47.07%	44.41%
2022	44,279	14,269	19,040	43.00%	32.2%



Panel Metrics for San Joaquin Health Centers	
Average Panel Size	44,279
Current Month Panel Size	46,492
Calendar YTD Panel Seen Count	14,269
Calendar YTD % Panel Seen	32.2%
Goal to Panel Seen Count	19,040
PCP Claim Count	43,113

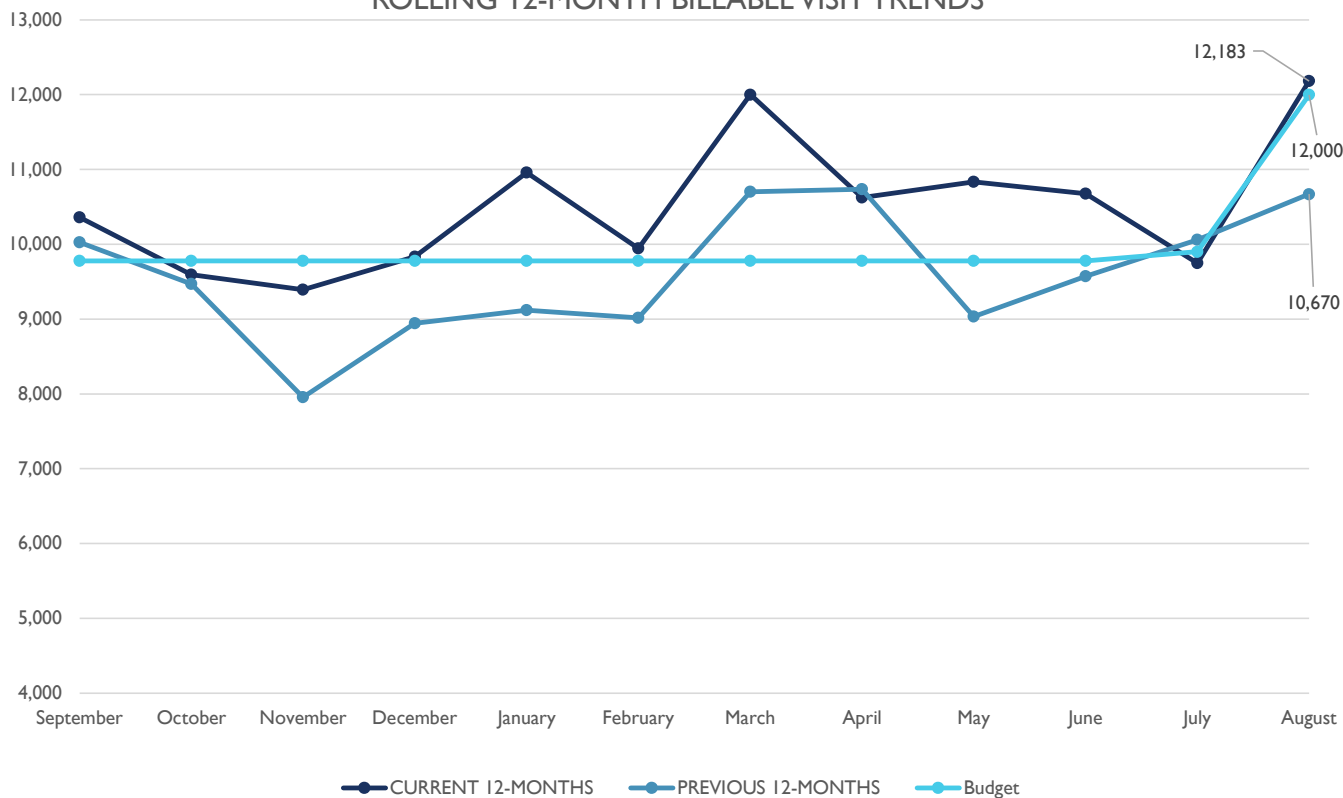


Average Submission Lag: 7.4 Days



AUGUST 2022 BILLABLE VISITS – 12,183

ROLLING 12-MONTH BILLABLE VISIT TRENDS



Visits By Financial Class	%
Medi-Cal Managed Care	76.26%
Medicare	11.51%
Medi-Cal	9.56%
Self-Pay	1.57%
Commerical	1.10%
Total	100.00%

FY23 Month	Actual	Budget	Variance
Jul-22	9,749	9,900	(151)
Aug-22	12,183	12,000	183
Total	21,932	21,900	32

SJ HEALTH INCOME STATEMENT – AUGUST 2022

	Current Period Actual	Current Period Budget - Original	Current Period Budget Variance - Original	Current Year Actual	YTD Budget - Original	YTD Budget Variance - Original
Operating Revenue						
Net Patient Service Revenue	1,781,230	1,753,170	28,060	3,230,024	3,374,003	(143,979)
Supplemental Revenue	1,280,629	1,214,301	66,328	2,561,257	2,217,125	344,132
Capitation & Managed Care Incentives	532,846	511,311	21,535	1,058,157	1,022,622	35,535
Grant Revenue	244,417	305,165	(60,748)	1,364,026	610,331	753,695
340B Pharmacy Program	114,608	117,731	(3,122)	303,715	235,461	68,253
MOU & Other Income	57,495	64,869	(7,374)	126,921	129,738	(2,817)
Total Operating Revenue	<u>4,011,225</u>	<u>3,966,546</u>	<u>44,679</u>	<u>8,644,099</u>	<u>7,589,280</u>	<u>1,054,819</u>
Expenditures						
Salaries & Wages	1,516,937	1,765,010	248,074	3,410,892	3,530,021	119,129
Employee Benefits	640,570	867,737	227,167	1,529,991	1,735,473	205,482
Professional Fees	281,443	212,464	(68,979)	733,274	424,928	(308,346)
Purchased Services	548,782	556,741	7,959	948,168	1,113,481	165,314
Supplies	98,602	81,165	(17,436)	238,872	162,331	(76,541)
Depreciation	31,598	23,268	(8,330)	57,569	46,536	(11,033)
Interest	48,770	21,074	(27,696)	52,110	42,147	(9,963)
Other Expenses	555,222	260,314	(294,907)	1,230,189	520,628	(709,561)
Total Expenditures	<u>3,721,923</u>	<u>3,787,773</u>	<u>65,850</u>	<u>8,201,064</u>	<u>7,575,546</u>	<u>(625,518)</u>
Net Income(Loss)	<u>289,303</u>	<u>178,773</u>	<u>110,529</u>	<u>443,035</u>	<u>13,734</u>	<u>429,301</u>

	<u>PERIOD 0</u>	<u>JULY 2022</u>	<u>AUGUST 2022</u>
Assets			
Cash & Cash Equivalents	5,978,796	8,650,878	9,079,794
Accounts Receivable	2,239,956	2,085,467	2,284,006
Inventory	12,881	12,881	12,881
Property & Equipment	2,101,833	2,083,066	2,147,191
Other Assets	<u>15,694,917</u>	<u>16,337,439</u>	<u>15,731,011</u>
Total Assets	<u>26,028,381</u>	<u>29,169,731</u>	<u>29,254,883</u>
Liabilities			
Accounts Payable	504,607	659,141	491,578
Other Liabilities	10,403,680	12,736,764	12,260,175
Deferred Revenue	<u>2,265,668</u>	<u>2,765,668</u>	<u>3,205,668</u>
Total Liabilities	<u>13,173,954</u>	<u>16,161,572</u>	<u>15,957,421</u>
Net Assets			
Beginning Net Assets	9,819,912	12,854,427	12,854,427
Current YTD Net Income	<u>3,034,515</u>	<u>153,732</u>	<u>443,035</u>
Total Net Assets	<u>12,854,427</u>	<u>13,008,159</u>	<u>13,297,462</u>
Total Liabilities and Net Assets	<u>26,028,381</u>	<u>29,169,731</u>	<u>29,254,883</u>

SJ HEALTH BALANCE SHEET AUGUST 2022

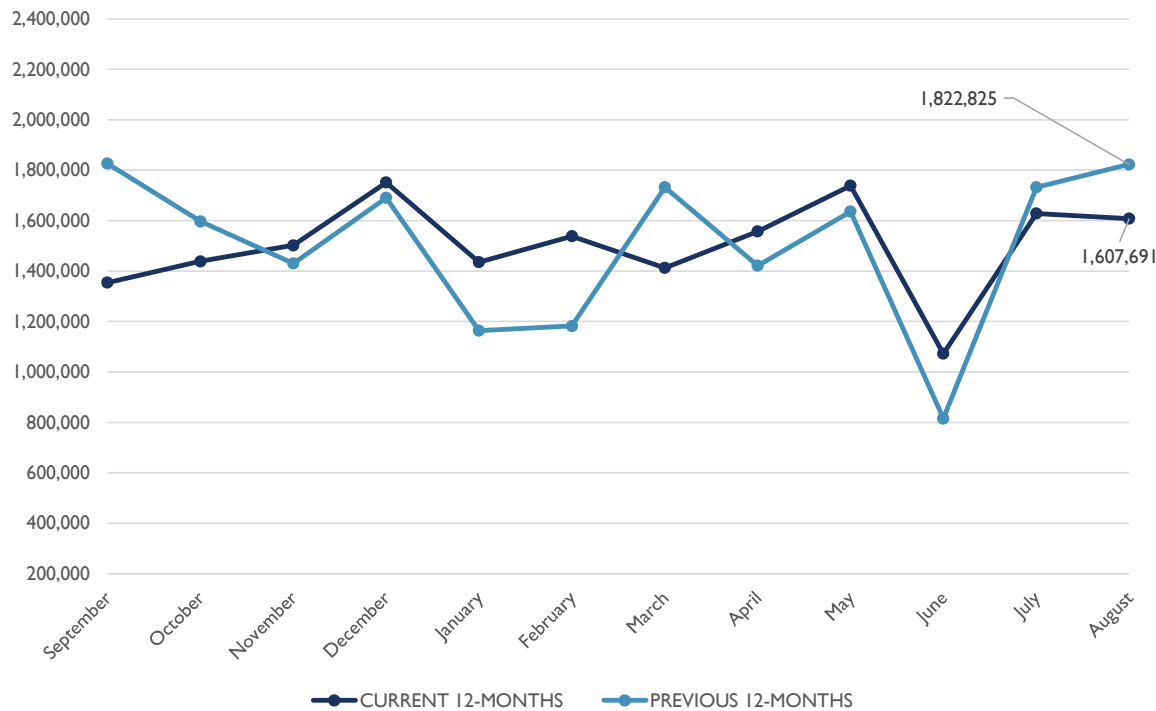
SJ HEALTH BILLING & COLLECTIONS

A/R AGING AUGUST 2022

SJ Health Centers Accounts Receivable Aging Analysis For the Month of August 2022								
Aging Category	MediCare	MediCal	Commercial	Self Pay	Total Aging This Month	Total Aging Last Month	\$ Increase (Decrease)	% Increase (Decrease)
1-30 Days	418,267	1,644,365	36,786	60,138	2,159,556	1,823,633	335,923	18.42%
31-60 Days	115,360	349,737	31,923	32,305	529,325	726,372	(197,047)	-27.13%
61-90 Days	128,545	139,338	34,682	40,955	343,521	354,362	(10,841)	-3.06%
91-120 Days	90,711	153,397	33,815	22,875	300,798	364,178	(63,379)	-17.40%
121-180 Days	185,052	287,498	39,256	55,348	567,154	384,363	182,792	47.56%
181-240 Days	106,503	53,375	11,823	27,533	199,234	171,560	27,674	16.13%
241-270 Days	40,380	11,280	6,773	11,440	69,873	33,032	36,841	111.53%
271-365 Days	18,685	9,875	14,809	8,881	52,250	36,354	15,896	43.73%
366 Days & Over	16,078	43,697	50,293	3,914	113,982	103,079	10,903	10.58%
	26%	62%	6%	6%				
Total FC This Month	1,119,580	2,692,562	260,162	263,389	4,335,693	3,996,932	338,761	8.48%
Total FC Last Month	801,808	2,904,413	170,822	119,889	3,996,932			
\$ Increase (Decrease)	317,772	(211,850)	89,339	143,500	338,761			
% Increase (Decrease)	39.63%	-7.29%	52.30%	119.69%	8.48%			
Monthly Management Summary								
	Beginning	Charges	Payments	Adjustments	Ending Gross			
August Activity	3,996,932	2,905,946	(1,607,691)	(959,493)	4,335,693			
A/R Days Analysis								
	August	July	June	May	April	March	February	Increase (Decrease)
Gross A/R Days	50	48	46	34	36	37	31	3
Net A/R	2,284,006	2,085,467	2,239,955	1,725,999	1,803,835	1,703,360	1,334,255	198,539
Net A/R Days	49	43	47	33	36	35	25	6

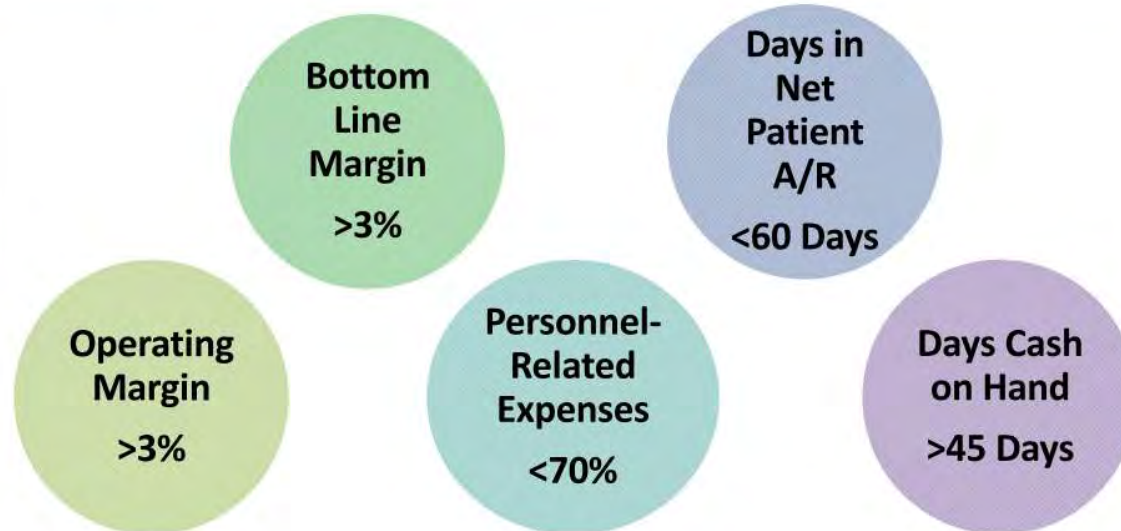
AUGUST 2022 EMMI PAYMENTS POSTED - \$1,607,691

ROLLING 12-MONTH TRENDS - CASH COLLECTED



FY23 Collections by Financial Class	%
Medi-Cal Managed Care	79.81%
Medi-Cal	14.72%
Medicare	4.77%
Self-Pay	0.42%
Commercial	0.28%
Total	100.00%

Key Financial Metrics: Capital Link Industry Guidelines



CAPITAL LINK FQHC FINANCIAL BENCHMARKS VS SJ HEALTH

DATA SUMMARY	Capital Link Target	SJ HEALTH FYTD FY23
FINANCIAL HEALTH		
1 Operating Margin As a % of Operating Revenue	>3%	4%
2 Bottom Line Margin As a % of Operating Revenue	>3%	5%
3 Days Cash on Hand	>45 Days	69
4 Days in Net Patient Receivables	<60 Days	49
5 Personnel-Related Expense (PRE) As a % of Operating Revenue	<70	68%

QUESTIONS & ANSWERS





San Joaquin Health Centers
Financial Statement Comments
August 2022

Summary of Clinics Year to Date

Billable visits for August are favorable to budget by 183 visits. Net Patient Service Revenues for August are favorable to budget by \$28,060. YTD financials reflect a PPS reconciliation liability accrual of \$50,000. YTD Medi-Cal payments for \$774,165 have been reflected on the Balance Sheet for FY2018 and FY2019 according to the payment plan with DHCS. YTD Income Statement includes interest expense of \$45,476 for PPS liability payments made to DHCS for FY2018 and FY2019. YTD financials include funds transferred for \$1,459,315 to San Joaquin County as a payment for payroll and benefits paid by San Joaquin County on behalf of SJ Health for July 2022.

Medi-Cal cost settlement payments for \$667,770 related to PPS reconciliations for FY2020 are reflected on the YTD financials.

YTD Supplemental Revenue includes the recognition of estimated Quality Incentive Program revenue for \$2,561,257. Combined Grants Revenue includes revenues for Behavioral Health Integration and American Rescue Plan (ARP) grants for \$1,363,826. Also, YTD grant revenues are higher than budget due to the recognition of American Rescue Plan (ARP) grant revenue for \$765,299 for activity related to January 2021 through June 2021 period in July. Capitation and Managed Care Incentives include the Capitation Revenue with a favorable variance to budget by \$35,535. Also, Other Income includes the 340B Pharmacy Program revenue for \$303,715 and the program related expenses for \$76,087 are included in Supplies & Other Expenses categories on the financials. YTD financials reflect First Responder Program revenue for \$200. YTD Other Revenue includes revenues accrued for \$116,687 related to Purchased Services provided to SJGH by SJCC per the MOU and Interest Income of \$10,234. Total Net Operating Revenues are favorable to budget by \$1,054,819.

YTD Salaries and benefits expenses exhibit a favorable variance to budget by \$324,611. Other operating expenses exhibit an unfavorable variance of \$950,129 largely due to Purchased Services with a favorable variance of \$165,314 mainly offset by unfavorable variance in Professional Fees, Purchased Services, Supplies, Interest, Depreciation, and Other Expenses for \$1,115,443. An estimated expense for the Purchased Services is recorded for July and August based on the MOU.

Unaudited, as presented, Net Income of \$443,035 on a year-to-date basis is favorable compared to budget by \$429,301.

Additional Factors Impacting Clinic Performance Presentation

- Supplemental revenues are estimates based on historic performance and statewide pool amounts for the California Department of Public Health Quality Incentive Pool Program.



FORVIS

SAN JOAQUIN HEALTH CENTERS

A Presentation for the Audit Committee

Your Trusted Advisors



Scott Gold
Partner

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Director

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Financial Statement Audit

Year Ended June 30, 2021

FORV/S

FORVIS is a trademark of FORVIS, LLP, registration of which is pending with the U.S. Patent and Trademark Office

AGENDA

- Audit Overview & Highlights
- Balance Sheet
- Statement of Operations
- Statement of Cash Flows
- Data Trends
- Peer Averages
- Industry Update

Audit Overview

- Single year presentation of fiscal 2021 and discussion on transition from hospital departmental financial statements
- Audit staffing challenges/ Hospital Accounting Dynamic
- Unmodified opinion on the financial statements & the compliance audit
- Internal Control Finding – Audit Journal Entries
- Compliance finding – Sliding Fee Discounts



Audit Highlights

- Beginning Equity negotiation
- Cash and cash equivalents
\$2.3M
- Due from hospital 18M
- Due from third parties (Medi-Cal)
2.3M
- Due to third parties (Medi-Cal)
13.6M (5.5M current)

Audit Highlights

- Operating revenues \$46M
 - Patient service revenue \$28M
 - + Includes prior year change in estimates 3.2M
 - + Volume of encounters 115,000
 - Grant revenue \$2.1M
 - Quality Incentive Pool revenue \$15.1M
- Operating expenses \$34.0M
 - Driven by MOU with Hospital
- Operating income \$12M
 - 3.2M change in estimates from PYs

Balance Sheet

	<u>30-Jun-21</u>
Cash and Reserves	2,267,000
Receivable, Net of Allowances	3,084,000
Property and Equipment, Net	1,414,000
Due from affiliates and other related parties - current	9,974,000
Due from affiliate	8,093,000
Other Assets	<u>2,377,000</u>
Total Assets	<u><u>27,209,000</u></u>
Current & L/T Debt	775,000
A/P & Accrued Liabilities	748,000
Other Liabilities	<u>13,626,000</u>
Total Liabilities	<u>15,149,000</u>
Net Assets	<u>12,060,000</u>
Total Liabilities & Net Assets	<u><u>27,209,000</u></u>

Statement of Operations

	<u>FY 2022</u>
Patient Service Revenue	28,098,000
Grant Revenue	2,122,000
Quality improvement revenue	15,062,000
Other Revenue	<u>749,000</u>
Total Operating Revenue	<u><u>46,031,000</u></u>
Wage Related Expenses	23,133,000
Other Expenses	<u>10,838,000</u>
Total Expense	<u><u>33,971,000</u></u>
Operating Income (Loss)	<u>12,060,000</u>
Excess of Revenues over Expenses and In Net Assets Without Donor Restrictions	<u><u>12,060,000</u></u>

Statement of Cash Flows

	<u>FY 2021</u>
Net Cash Provided by Operating Activities	2,677,000
Net Cash Used in Investing Activities	(309,000)
Net Cash Used in Financing Activities	<u>(101,000)</u>
Net Increase in Cash	<u>2,267,000</u>

Ratios

FORV/S

FORVIS is a trademark of FORVIS, LLP, registration of which is pending with the U.S. Patent and Trademark Office

Common KPIs

- Current Ratio: 2.40
- Days Cash on Hand: 24.5 Days Cash
- Days in Net A/R: 17.0 Days
- Days Expense in A/P: 8.3 Days
- Patient Service Revenue Per Visit: \$243.91 (includes \$27.78 change in estimate)
- Expense Per Visit: \$293.70

Peer Averages via **CHC***pulse*

FORV/S

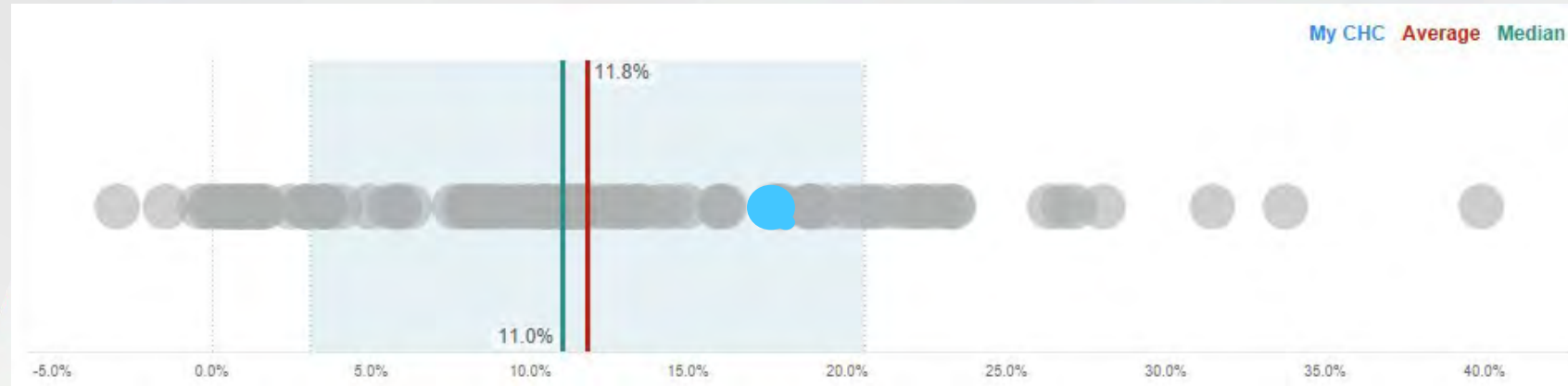
FORVIS is a trademark of FORVIS, LLP, registration of which is pending with the U.S. Patent and Trademark Office

How Do I Compare Financially?

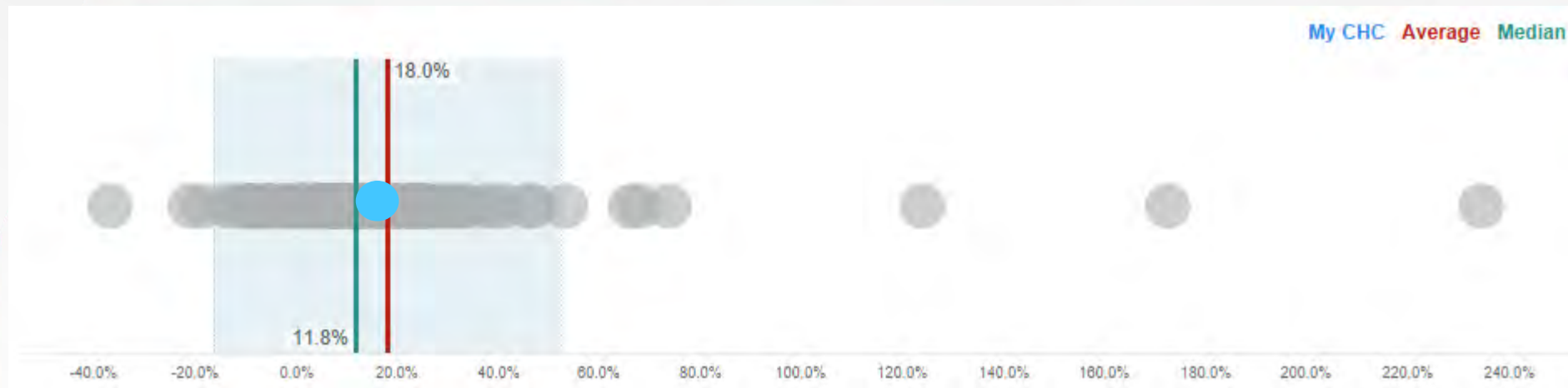
2021 Audit data for 100 California CHCs (NON-LAL)

FORVIS

Operating Margin



Growth in Net Patient Revenue

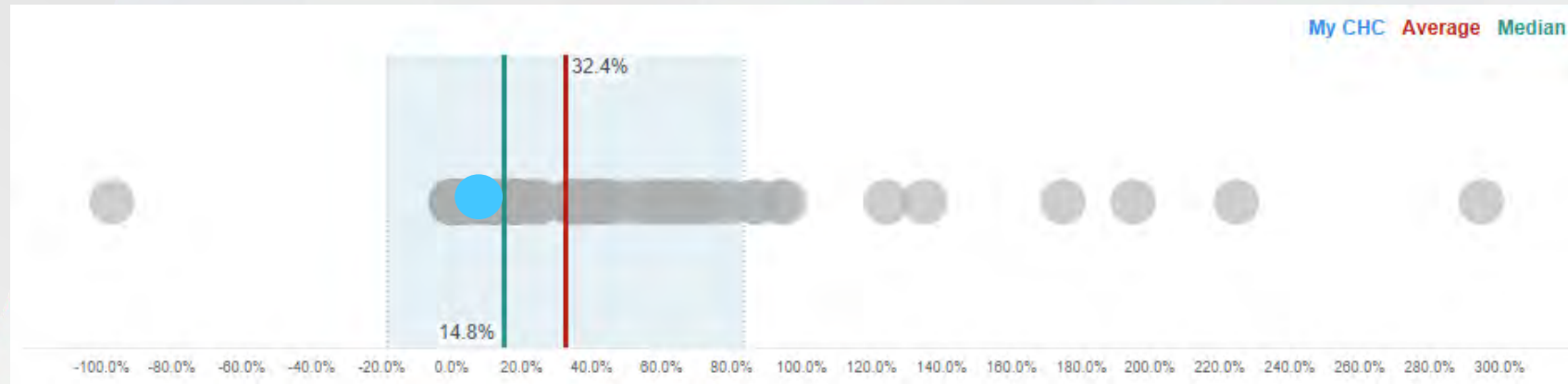


How Do I Compare Financially?

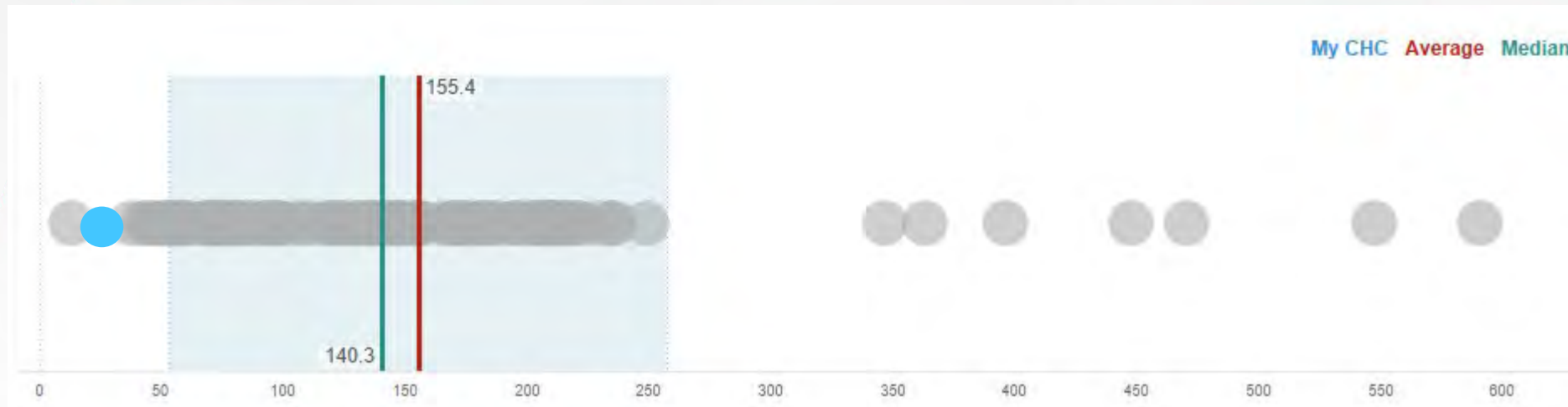
2021 Audit data for 100 California CHCs (NON-LAL)

FORVIS

Debt to Equity



Days Cash on Hand



Industry Update

FORV/S

FORVIS is a trademark of FORVIS, LLP, registration of which is pending with the U.S. Patent and Trademark Office

Ongoing impacts of COVID-19

- Impact on delivery mechanism of care
- Impact on dental services
- Telehealth flexibility
- Workforce challenges
- Increasing cost per visit
 - Salaries and benefits
 - Inflation
- Impact on cash flow

Let's Talk...

Q&A

Thank you!

forvis.com

The information set forth in this presentation contains the analysis and conclusions of the author(s) based upon his/her/their research and analysis of industry information and legal authorities. Such analysis and conclusions should not be deemed opinions or conclusions by FORVIS or the author(s) as to any individual situation as situations are fact specific. The reader should perform its own analysis and form its own conclusions regarding any specific situation. Further, the author(s) conclusions may be revised without notice with or without changes in industry information and legal authorities. FORVIS has been registered in the U.S. Patent and Trademark Office, which registration is pending.

FORVIS

Assurance / Tax / Advisory

September 27, 2022

Board of Directors
San Joaquin Health Centers

Dear Board Members:

Approval to Submit a Grant Application to the KidsVaxGrant 2.0 Program by October 14 for Support Vaccinating infants and toddlers against COVID19

RECOMMENDATION

It is recommended that the Board of Directors:

Approve the submission of grant application to Physicians for a Healthy California (PHC) by October 14, 2022 for funding through the KidsVaxGrant 2.0 Program.

BACKGROUND/REASON FOR RECOMMENDATION

Funded by the California Department of Public Health (CDPH) and administered by Physicians for a Healthy California (PHC), the KidsVaxGrant 2.0 program supports eligible providers serving pediatric providers for becoming community COVID-19 vaccinators and for expanding operational hours at their vaccination locations.

Eligible organizations, such as SJ Health, that serve pediatric populations and have at least one approved COVID-19 vaccine order for the infant and toddler (6 months to 5 years) population may be eligible for up to two grant opportunities. Grants of \$10,000 will be awarded to pediatric providers newly enrolled in myCAVax. Organizations must have enrolled their sites in myCAVax between December 17, 2021, and October 14, 2022, to qualify. These pediatric providers newly enrolled in myCAVax may be eligible for an additional \$15,000 if they temporarily expand their hours of operations by 25 hours at the enrolled sites.

Eligible organizations already enrolled in myCAVax that serve pediatric populations and have at least one approved COVID-19 vaccine order for the infant and toddler population, may apply for a grant of \$25,000 per site by temporarily expanding operations by 25 hours at the participating sites. Expanded hours must be outside of normal or existing clinic hours. Expanded hours must be completed within 120 days of the application's approval and are not retroactive.

FISCAL IMPACT

SJ Health is eligible to apply for KldsVax2.0 grant funding for its two eligible sites. The combined application amount for these sites will be up to \$50,000. The funding may be used for staffing, training, technology, infrastructure, supplies, and equipment, and administrative overhead.

If funded, SJ Health can expect to receive funds within 45-60 business days by check. There are no matching requirements and SJ Health will be expected to submit a final report/survey documenting the number of vaccines provided, numbers of hours extended, and how funds were used.

ACTIONS TO BE TAKEN FOLLOWING APPROVAL

If approved, SJ Health will submit the grant application by the October 14 deadline. If selected for funding, SJ Health's CEO will execute the contract with Physicians for a Healthy California and SJ Health will implement the grant in accordance with all federal and state requirements.

Sincerely,



Farhan Fadoo, MD
Chief Executive Officer
San Joaquin Health Centers

September 27, 2022

Board of Directors
San Joaquin Health Centers

Dear Board Members:

Approval to Submit a Grant Application of up to \$1,000,000 to Physicians for a Healthy California (PHC) by September 30, 2022 for Consideration Through the COVID 19 Test to Treat Equity Grant Program

RECOMMENDATION

It is recommended that the Board of Directors:

Approve the submission of grant application of up to \$1 million to PHC by September 30, 2022 for consideration through the COVID-19 Test to Treat Equity Grant Program.

BACKGROUND/REASON FOR RECOMMENDATION

The California Department of Public Health (CDPH) has established the COVID-19 Therapeutics Equity Grant Program to expeditiously connect patients who test positive for COVID-19 with therapeutic treatment to decrease related morbidity and mortality. CDPH has contracted with PHC to manage the grant program.

CDPH has allocated up to \$59 million to this “Test to Treat” grant program, which over the next 10 months will support safety-net providers to operationalize access to clinically appropriate COVID-19 therapeutics in a timely manner with a focus on three key expedited elements of COVID-19 assessment and treatment (testing, prescribing and therapeutics).

CDPH’s objectives for the grant program are to:

- Increase the number of safety net providers that provide access to COVID-19 therapeutics for eligible patients within 48 hours of patient presenting to care.
- Increase utilization of COVID-19 therapeutics by communities disproportionately impacted by COVID-19.
- Strengthen multi-sector partnerships between safety-net health care providers and community-based partners that test for COVID-19 (e.g., CBOs, FBOs, shelters, assisted living, etc.) to increase access points to treatment.

- Create a “Test to Treat Learning Community” where best practices are shared, challenges are jointly worked on, and partnerships and coordination are strengthened across programs.
- Leverage solutions to strengthen the safety-net systems beyond COVID-19 care such as offering other timely assessments or chronic care interventions at points of care.
- Reduce morbidity and mortality from COVID-19 especially among communities disproportionately impacted by COVID-19.

The grant funds and accompanying technical assistance will support safety net providers to develop workflows, processes, and communications to expedite each step of COVID-19 care delivery regardless of where the care occurs – in the home, at a clinic/pharmacy, or in the community.

Areas of focus for grant applicants may include and are not limited to:

- Developing workflows and processes to ensure patients who are eligible for outpatient COVID-19 therapeutics will receive pre-exposure prophylaxis or treatment in accordance with evidence-based guidelines.[4] This includes but is not limited to:
 - Expanded ability to dispense medications on site or via outreach teams
 - Expanded telehealth capabilities including advice call line triage
 - Developed surge capacity
 - Support of mobile clinics and home visits, including street medicine providers.
 - Developed infusion capabilities
 - Expanded urgent care and/or same day appointment capacity
- Coordination of care and services, including ensuring prescription receipt by patient (at preferred pharmacy where medications are available, mail order or courier)
- Enhancing health information technology and data tools in order to better serve and understand the needs of vulnerable populations
- Care coordination, outreach, and member education that facilitates access to pre-exposure prophylaxis medication (Evusheld)
- Providing non-emergency transportation as needed
- Maintaining and tracking utilization data reporting that includes race/ethnicity, zip code, age, primary language, and gender to look for and address disparities in access.
- Reviewing and updating of educational content and materials for providers, patients, and community members, such as clinical advice phone lines, online content, and mailed content and internal policies. This content might encourage testing of those with COVID-19 symptoms, share methods to access COVID testing kits, and outline treatment eligibility with appropriate connection to applicable resources
- Facilitating provider education on indications and availability of testing and outpatient pre-exposure prophylaxis and treatment for COVID-19 and how to access it, including information on the NIH COVID Treatment Guidelines

- Supporting registration of Test to Treat providers and sharing of information about incentives, communications, awareness campaigns, and COVID-19 therapeutics directly from respective local health jurisdictions

There are two funding categories in this grant program. SJ Health is eligible to apply for a grant in an amount from \$250,000 to \$1,000,000. The grant period will be from September 2022 through June 30, 2023.

SJ Health is currently planning its project and preparing its grant application. Current plans are to use the grant funds to underwrite the development of workflows, processes, and communications to expedite testing and treatment in the health centers, at patients' homes, and in the community through mobile health services. Personnel costs will be a major use of the funds.

If funded, SJ Health will be required to:

- Participate in informational webinars with Center for Care Innovations
- Engage with technical assistance programming from Center for Care Innovations
- Create a project plan to increase access to COVID-19 therapeutics
- Develop an approach to track utilization of therapeutics to include patient demographics and equity impact, including but not limited to: Number of patients treated with COVID-19 therapeutics, stratified by race/ethnicity, age group, HPI quartile; average length of time from patients testing positive to: meeting with a physician and starting treatment; Average completion rate of patients getting from testing positive to starting medication
- Submit an Interim and Final Report, within the time allocation identified in the Grant Agreement

ACTIONS TO BE TAKEN FOLLOWING APPROVAL

If approved, SJ Health will submit the grant application by the September 30 deadline. If selected for funding, SJ Health's CEO will execute the contract with Physicians for a Healthy California and SJ Health will implement the grant in accordance with grant requirements.

Sincerely,



Farhan Fadoo, MD
Chief Executive Officer
San Joaquin Health Centers

September 27, 2022

Board of Directors
San Joaquin Health Centers

Dear Board Members:

Approval of the Submission of SJ Health's FY 2023 Look-Alike Renewal of Designation Application to Health Resources and Services Administration (HRSA) by October 3, 2022

RECOMMENDATION

It is recommended that the Board of Directors:

1. Approve submission of the Look-Alike (LAL) Renewal of Designation application to HRSA via the Electronic Handbook by October 3, 2022

REASON FOR RECOMMENDATION

HRSA requires every LAL to complete and submit a renewal of designation application to maintain their designation. The designation period can be for up to three years. The due date for the application is determined by the end of the designation period.

The Renewal of Designation Application is composed of a detailed narrative as well as a significant number of attachments. It must document an understanding of the need for primary health care services in the service area and propose a comprehensive plan that demonstrates compliance with the Health Center Program requirements.

The plan must ensure the availability and accessibility of primary health care services to all individuals in the service area and target population, regardless of ability to pay. The plan must include collaborative and coordinated delivery systems for the provision of health care to the underserved.

The application is a large document submitted via the HRSA Electronic Handbook. The project and budget narratives, attachments and collaboration documentation are limited to 160 pages, but there are a significant number of required tables that are not included in the page limit.

Sections of the application focus on a variety of issues including:

- SJ Health's service area (all zip codes in San Joaquin County) and its need for services
- SJ Health's organizational capacity including staffing and finances
- SJ Health's collaboration with others, including local 330 grantees
- SJ Health's quality improvement/quality assurance efforts and how they are measured
- SJ Health's governance

A summary of key components of SJ Health's application is attached for the Board's consideration.

ACTIONS TO BE TAKEN FOLLOWING APPROVAL

Upon approval of the LAL Renewal of Designation application by the Board of Directors, SJ Health will complete entry of the application on the Electronic Handbook and submit it to HRSA prior to the October 3 deadline.

HRSA will grant designation for a period of up to three years. SJ Health anticipates that it will once again receive a three-year designation.

Continued designation will be contingent upon SJ Health making satisfactory LAL progress, including the timely submission of all required LAL submissions. Required submissions include, but are not limited to, the Renewal of Designation (ROD) and Annual Certification (AC) applications, as well as annual Uniform Data System (UDS) submissions.

Sincerely,



Farhan Fadoo, MD
Chief Executive Officer
San Joaquin County Clinics

SJ Health Centers Look-Alike Renewal of Designation FY23 Application Summary

Overview: SJ Health, through a co-applicant agreement with the County of San Joaquin, is submitting its Fiscal Year (FY) 23 Renewal of Designation to the Health Resources and Services Administration (HRSA) Bureau of Primary Health Care (BPHC) Federally Qualified Health Center (FQHC) Look-Alike designation for a three-year period (January 1, 2023 – December 31, 2025). Through this application, SJ Health responds to the continued need for access to comprehensive, culturally competent, high-quality primary health care and specialty health care services for low-income residents in San Joaquin County, California, with a focus on residents at or below 200% of the annually updated Federal Poverty Guidelines (FPG).

Organizational Capacity: SJ Health proposes to serve 31,098 patients in 146,822 visits in Calendar Year (CY) 2024 (reporting period). To meet the needs of its patients, SJ Health’s clinical staff includes 40.8 Full-Time Equivalent (FTE) medical providers, 4.0 FTE nurse practitioners, 4.0 FTE certified nurse midwives, 6.4 FTE nurses, 47.4 FTE medical assistants, 3.0 FTE behavioral health staff, 1.6 FTE pharmacy staff, and 9.1 FTE enabling staff (e.g., case managers, outreach and eligibility assistance staff).

SJ Health observed a 3.35% decrease in total unduplicated patients between the calendar years 2020 (31,222) and 2021 (30,192), which attributed to the COVID-19 pandemic. Thus, SJ Health proposes to serve 31,098 unique patients by December 31, 2024, which is a 2.9% increase from 2021, and is based on trend analysis pertaining to increased utilization with the pandemic subsiding.

Health Care Services: Similar to the decrease in overall patients served, SJ Health experienced a 3.35% decrease in medical service patients between the calendar years 2020 (31,222) and 2021 (30,192). In 2021, of patients served by SJ Health, less than one percent (0.33%; 100) received mental health services, and 0.86% (260) received enabling services. For the upcoming reporting period, SJ Health proposes to increase the number of patients receiving mental health services to 161 (61% increase) and enabling services to 265 (5% increase).

Health Center Program Budget: SJ Health has developed a Health Center Program budget with a narrative for each requested 12-month period of the three-year designation period. A summary of the proposed budget is below:

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Budget Summary

Revenue	Year 1	Year 2	Year 3
State Funds (includes QIP)	\$10,021,000	\$14,022,172	\$15,282,131
Local Funds	\$104,720	\$200,000	\$250,000
Other Support (Federal Grants)	\$3,479,280	\$1,550,000	\$1,750,000
Program Income	27,676,163	\$28,499,097	\$29,343,147
Total Revenue	\$41,281,163	\$44,271,269	\$46,625,278
Expenses	Year 1	Year 2	Year 3
Personnel	\$22,024,566	\$23,235,917	\$24,513,893
Fringe	\$12,551,344	\$14,057,730	\$14,830,905
Travel	\$82,500	\$87,000	\$92,000
Equipment	\$0	\$0	\$0
Supplies	\$219,215	\$225,791	\$232,565
Contractual	\$4,487,000	\$ 4,686,850	\$4,904,625
Other	\$1,916,538	\$1,977,980	\$2,051,290
Total Expenditures	\$41,281,163	\$44,271,269	\$46,625,278

SJ Health

What the Heck is a Consent Agenda & How Do You Use It???

Susan Thorner, MHSA
Training Resources Network, Inc.
September 2022

TA Objective

- ▶ Enhance Board members' understanding of consent agendas
- ▶ Decide whether SJ Health wants to adopt the use of consent agendas for their Board/Committee meetings

What is a Consent Agenda & How Will It Make Our Meetings Go Faster?

- ▶ A consent agenda or consent calendar is generally used for routine, self-explanatory, non-controversial items that do not require discussion or already have unanimous consent.
- ▶ A consent agenda allows the Board to approve all of these items as a group without discussion or individual motions.
- ▶ Depending on the organization, this can free up a few minutes up to a half hour.

What Typically Goes on a Consent Agenda?

- ▶ Approval of previous Board minutes;
- ▶ Approval of Committee minutes;
- ▶ Routine matters such as appointments to Committees;
- ▶ Reports provided for information only;
- ▶ Correspondence requiring no action &
- ▶ Dates of future meetings.

What Shouldn't Go on a Consent Agenda?

- ▶ Anything that documents Board Authority as specifically listed in Chapter 19 of the Health Center Compliance Manual/site visit protocol, such as:
 - ▶ Board receipt of the annual audit;
 - ▶ Board approval of SFDP, billing & collections, QA/QI, financial management & accounting* or personnel policies*;
 - ▶ Approval of the health center budget, annual operating budget or capital expenditures budgets;
 - ▶ Approval of the annual certification for your LAL designation or HRSA applications related to the health center project;
 - ▶ Annual reconciliation of service area/zip code analysis;
 - ▶ Changes in scope (CIS) (Forms 5A & 5B), etc.

How Do We Handle Items on the Consent Agenda?

- ▶ During the staff agenda review process, the CEO decides whether or not an item belongs on the consent agenda in consultation with the Board Chair.
- ▶ The Clerk of the Board will itemize the list of consent agenda items on the meeting agenda.
- ▶ The list & supporting materials are included in the Board packet & distributed in sufficient time to be reviewed by all Board members prior to the Board meeting.

How Do We Handle Items on the Consent Agenda?

- ▶ Before voting on the consent agenda, the Board Chair asks members what items, if any, they want to remove from the consent agenda for individual discussion.
- ▶ If any member requests that an item be removed from the consent agenda, it must be pulled from the consent agenda vote, discussed, and voted on separately. Members may request that item be removed for any reason such as discussion, a vote against, etc.
- ▶ Any items pulled from the consent agenda are still heard and voted upon in the same meeting.

How Do We Handle Items on the Consent Agenda?

- ▶ Once there are no more items to be removed, the Chair reads out the numbers of the remaining consent agenda items and asks for a motion and a second to approve the consent agenda items.
- ▶ When preparing the minutes, the Clerk of the Board includes the full text of the resolutions, reports or recommendations that were adopted as part of the consent agenda.

How to Start Using a Consent Agenda

- ▶ In order to start using a consent agenda, the Board must adopt a rule of order allowing the use of a consent agenda.
- ▶ It's important that everyone understand what items belong on a consent agenda, which don't as well as how to move items on & off the consent agenda.

Resources

- ▶ Health Center Program Requirements
 - ▶ Compliance Manual (August 2018)
<https://bphc.hrsa.gov/programrequirements/pdf/healthcentercompliancemanual.pdf>
 - ▶ Health Center Program Site Visit Protocol (May 26, 2022)
<https://bphc.hrsa.gov/compliance/site-visits/site-visit-protocol>

QUESTIONS



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SJ Health Board of Directors Annual Report - 2022

Farhan Fadoo, MD, MS
CEO, San Joaquin Health Centers
September 27, 2022



Table of Contents

- SJ Health - At A Glance
- Encounter Volume
- Telehealth
- FY21/22 Highlights
- FY22/23 Plans
- Org Chart
- Q&A



SJ Health – At A Glance

- SJ Health – French Camp
 - Primary Medicine Clinic
 - Family Medicine Clinic
 - Healthy Beginnings Clinic
- SJ Health - Stockton
 - Family Practice California Clinic
 - Children’s Health Services
 - Healthy Beginnings Clinic
- SJ Health - Mobile
- SJ Health – Manteca (OPENING Q4-CY22)

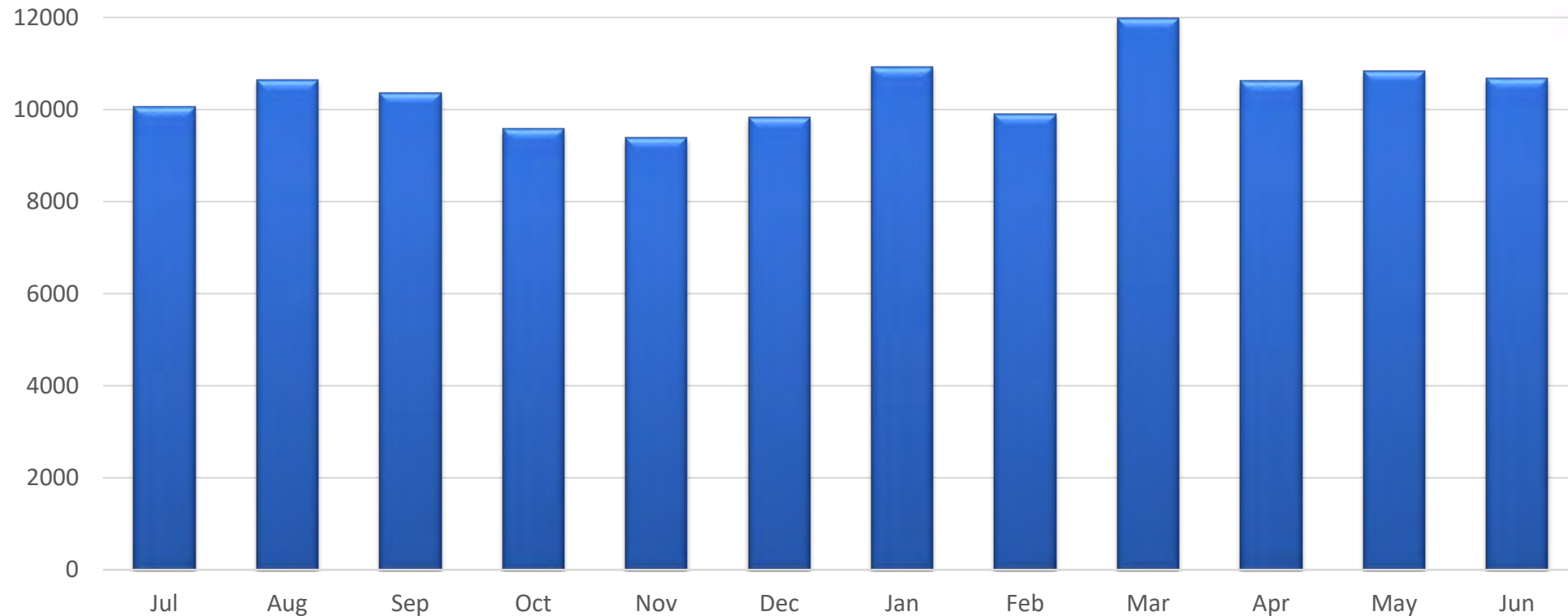


Services provided: adult primary care, pediatrics, prenatal care and women’s health, integrated behavioral health and substance use counseling, chronic disease management, MAT, community health



Encounter Volume – 8% YoY Growth

Billable Visits - FY 21/22



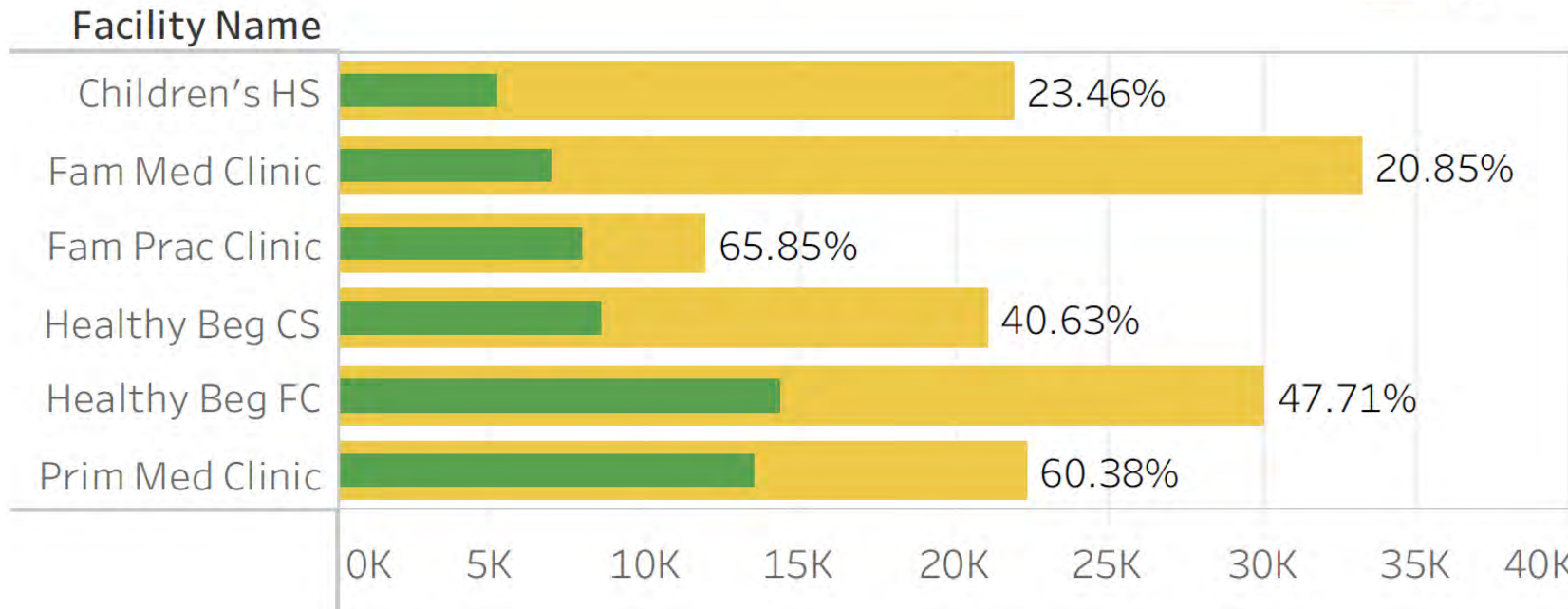
FY21/22 Total: 124,813 (FY20/21 Total: 115,560)



Telehealth

Televisits by Facility (FY22)

■ Televisit
■ Total



	Audio	Non-Audio	In Person
SJ Health Overall Care Modality Breakdown	36.68%	3.39%	59.93%



FY21/22 Highlights

- Thriving First Full Year as Standalone Entity
- “County Affiliate” governed by two key documents
 - Co-Applicant Agreement (rev 1/21)
 - MOU with SJ County (rev 7/20)
- Transition to Administrative HQ – May 2022
 - Administrative capacity building (HR, IT, RCM, finance, legal/compliance)
 - High trust culture
 - Flexible working arrangements



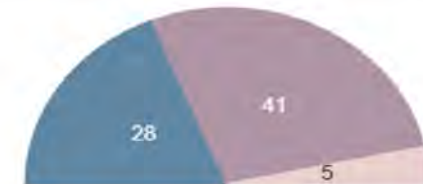


FY21/22 Highlights

Aggressive Strategic Plan Implementation

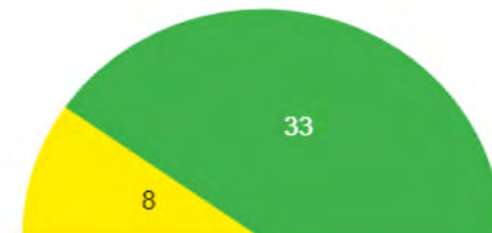
- Project Management Acumen
- 14 Project Owners
- 74 Projects

STATUS



- Completed
- In Process
- Not Started

PROJECT HEALTH (Projects in Flight)



- Yellow
- Green



San Joaquin County Clinics Community Health Needs Assessment 2021

Coverage of Low-Income Population by FQHCs, the SJCC Service Area



Strategic Pillars Define Our Priorities



The Health of our
Community



Our Identity as an
Organization



Our Financial
Strength



SJ Health: Our Identity and Brand Transformation



SJ HEALTH
San Joaquin Health Centers

Evolving an established name into a fresh and more trusted brand that makes new promises.

Why We Do What We Do



VISION

Our vision is our "North Star."
It guides where we are going, together.



We envision healthier futures for those we serve, enabled by **nimble, adaptive, and progressive** care delivery.

MISSION

Our mission defines *how we will pursue our vision.*



To **drive sustained health improvement** for San Joaquin County's diverse community through individual engagement, community partnerships and high quality, equitable healthcare delivery.

Core Values: How We Engage



Patient-Centered Care

We let our patient's individual health needs and desired health outcomes guide treatment decisions. We engage with compassion to understand and consider patient and family preferences.



Integrity

We do the right things for the right reasons. We take pride in our daily actions.



Excellence

We deliver, measure, and improve quality in our work. Our patients, partners and community deserve it.



Diversity

We respect the uniqueness of those we serve: their traditions, experiences, values, socioeconomic status, sexual orientation, identity, and culture.



Collaboration

We partner with patients, coworkers, and community stakeholders toward change. Together we accomplish more.



Community Focus

We go beyond our walls to advance community health. We act toward social determinants and systemic inequities that undermine health improvements.

SJ Health: Core Differentiators



Our **core differentiators** distill **what sets us apart from competition**. They're a clear view of the main reasons our patients and partners think about when they choose us.

We Are Connected to Healthcare Specialization

SJ Health connects its patients to resources and expertise not readily available through other primary care clinics.

We Offer Access to Care

SJ Health is staffed and structured to offer near-term (even same day) appointments, and to bring services into the community.

We Are A Trusted Partner

SJ Health continues to nurture longstanding relationships with community-based organizations, public agencies and healthcare payers.

SJ Health: Communication Pillars



Communication pillars are the **key themes** that will always be emphasized as we speak about SJ Health.



HEALTH

How SJ Health is *improving the health* of the individuals being served.



COMMUNITY

How SJ Health is *engaging in and with the diverse communities* we serve.



FORWARD THINKING

How SJ Health is *building resources to meet the future needs* for patients and for the community.



SIMPLICITY

How SJ Health is *making it easier for patients* to access care, navigate the system, and engage in personal health.

SJ Health's Refreshed Patient Experience

- Integrated service lines at both French Camp and Stockton reduces confusion and operational challenges.
 - Also, easier to select SJ Health as a primary care provider among Medi-Cal plan members vs. the previous specific distinctions of Family Medicine, Primary Medicine, etc. which created inconsistencies in directories.
- Updated paint and flooring creates a new atmosphere for returning patients and a clean first impression for new patients.
- Improved wayfinding signage internally and externally.





MESSAGE FROM THE CEO



Farhan Fadoo, MD

Welcome to the August edition of the Pulse.

While August is a busy time for folks to get in some end-of-summer fun, here at SJ Health we have some excitement too!

August 7-13 is [National Health Center Awareness Week](#). SJ Health proudly participates in this annual celebration to raise awareness about our mission as a nonprofit health center and to highlight our accomplishments. This year, we're especially appreciative that SJ Health will be accepting a proclamation at the San Joaquin County Board of Supervisors meeting on August 9 in recognition of the health access, quality care and services we bring to vulnerable populations and the underserved in our community.



Also, our internal team is actively planning recognition activities for National Health Centers Week for our patients on August 10, and for you, our dedicated team, on August 12. Enjoy a special treat on Friday and be part of this week of recognition for SJ Health and other health centers like us nationally. We're able to make a difference for thousands of patients annually because of your work and contributions!....[READ MORE -->](#)

SJ Health Employee Newsletter

- Communication tool to inform and engage
- Opportunities for staff contributions and suggestions
- Reinforces new culture with heavy employee engagement



SJ HEALTH

San Joaquin Health Centers

MOBILE UNIT

SJ HEALTH APPOINTMENTS:
(209) 953-6400

www.sjhealth.org

Mobile Health

- Extends our reach into the community (and associated branding)
- Expanded and targeted community outreach and engagement
- Complements expanded website and social media presence



FY21/22 Highlights

- Special Programs

- Chronic Disease Management - CHF Clinic, DM Titration Clinic
- Multiple FMC Carve-Outs (prenatal, gender health, geriatrics, sexual health, small procedures, sports medicine, diabetes group)
- MAT Clinic for patients with OUD
- Access Center – centralized scheduling and referrals processing
- Digital health technologies: Nuance DAX, Notable RPA, Livongo/Teladoc RPM

- COVID19 response

- MOUs with municipalities, first responder orgs, and private employers for occupational testing
- Partnered with OptumServe for drive-through testing
- Field Testing: homeless shelters and encampments / ag workers / schools
- Mass vax efforts – mobile teams deployed
- SJ Health widely lauded for its fieldwork efforts and outreach



FY21/22 Highlights

- Financial Performance
 - Grant funding in excess of \$6MM secured during FY21/22 (federal, state, private foundation sources)
 - telehealth
 - COVID response and recovery
 - disease management
 - community engagement
 - disparities reduction
 - access to care
 - Supplemental funding – captured 100% of available dollars (QIP)
 - RCM cost to collect – reduced by 40%
 - Positive FY21/22 bottom line: Unaudited net income of \$3,035,515 (which is greater than budget by \$1,272,471)
 - FY21 Audit completed (from ZERO net equity at time of split to \$12MM in year 1)
- Reconstituted SJ Health Board of Directors



FY22/23 Plans

- PPS rate re-basing, scope changes
- FQHC APM
- Expanded focus on clinical quality and patient experience
- Expand chronic disease management programs
 - 2 dedicated clinical pharmacist FTEs
 - expand RPM
 - metabolic clinic / limb salvage clinic
- Expand IBH program
- Expand CaAIM initiatives
 - ECM
 - Community Supports (housing assistance with PATH funds)
 - HPSJ a strong partner; HealthNet as well



FY22/23 Plans

- Advocate for new federal funding streams for CHCs and alternative pathways for LAL transitions to 330 funding
 - LAL Advocacy Group, NACHC, CPCA
 - Direct legislative advocacy through elected officials
 - Recruitment of Director of Legislative Affairs for advocacy and PR work
- Fundraising and community engagement
- Mobile clinics – COVID response transition to core primary care delivery and disparities reduction/health equity work
 - Focus on special populations
 - School-based care delivery



FY22/23 Plans

- Reopen SJ Health – Manteca access point
 - Dental, Vision, Pharmacy services being considered
- Site selection and buildout of SJ Health – Lodi (plans to open in Q2-FY23/24)
- Older adults – expand Medicare lives and ensure Medi-Cal patients have continuity with SJ Health once they reach 65
- Home visits
- Launch Community Health Workers program
- “Farmacy” food support program
- IT domain separation from SJGH

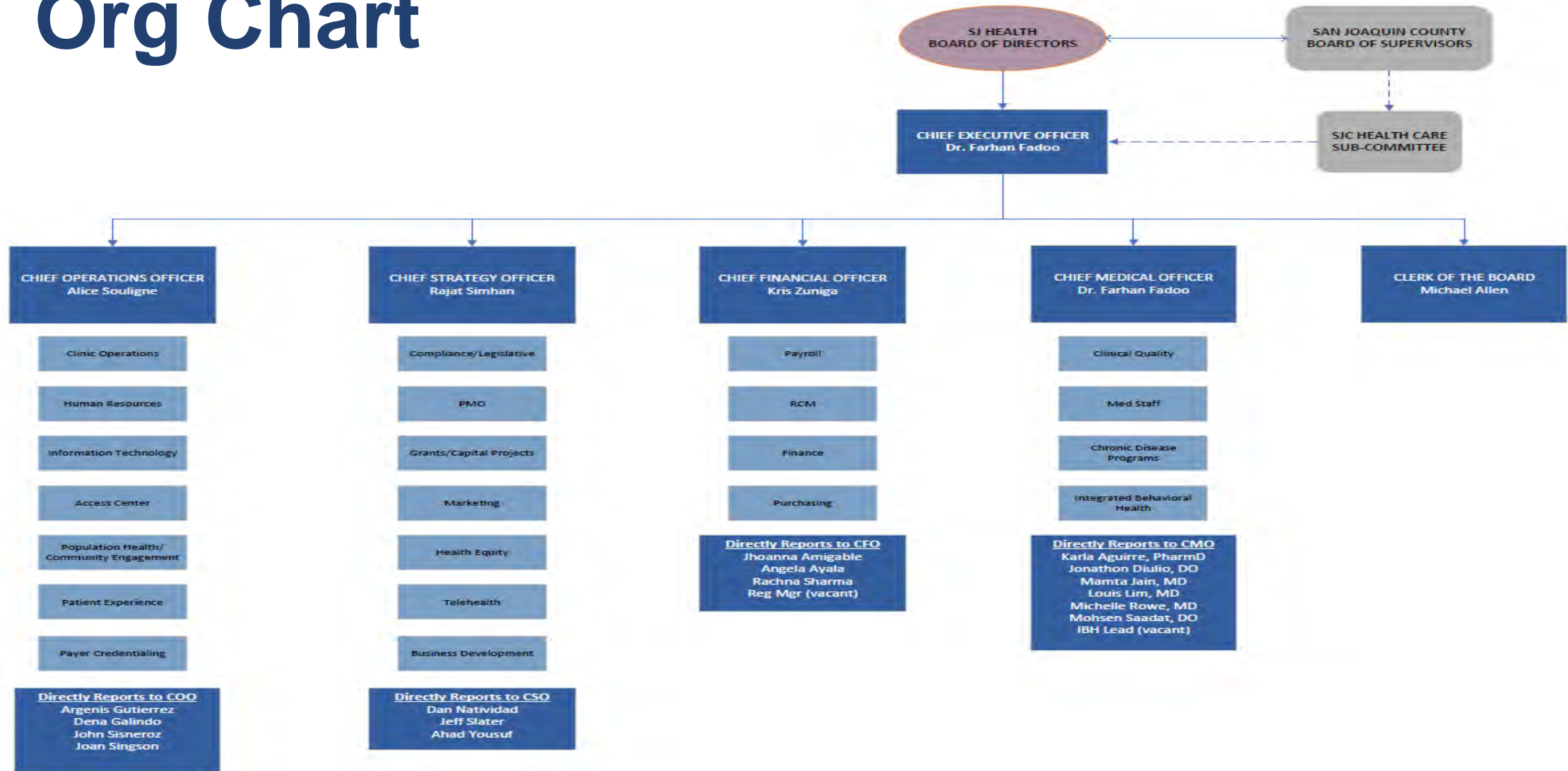


FY22/23 Plans



- Feeder pipelines from local educational institutions
 - RN
 - SW
 - MA
 - NP
 - Others
- “Express Care”
 - On-demand clinical care via telehealth
 - Will reduce inappropriate ED utilization
 - Will drive additional encounter volume from existing SJ Health patients
 - Represents potential revenue channel from net new market (patients from other health systems that lack access or those who are not receiving primary care at all)

Org Chart





SJ HEALTH

San Joaquin Health Centers

QUESTIONS?

