

Minutes of November 28, 2023
San Joaquin Health Centers Board of Directors

Board Members Present: Greg Diederich (Interim CEO); Monica Fuentes; Brian Heck (Vice Chair); Cynthia King*; Karen Lee; Samantha Monks; Jodie Moreno; James Myers; Kristin Shinn; Tarsha Taylor-Godfrey

Excused Absent: Rod Place (Board Chair)

Unexcused Absent: None

SJHC Staff: Ahdel Ahmed; Michael Allen (Board Clerk); Kim Cuellar; Jonathon Diulio; Mary-Lou Milabu; Rajat Simhan; Jeff Slater; Susan Thorner; Kris Zuniga

Guests: Brandi Hopkins; Jonathon Hsieh; Craig; Ryan (Diede); Brett Diede (Diede); Steven Ding; Wayne

AGENDA ITEM	ATTACHMENTS	ACTION
<p>I. Commencement/Call to Order (Brian Heck)</p> <ol style="list-style-type: none"> The meeting was called to order at 5:33 p.m. A quorum was established for today's meeting. SJ Health Board of Directors' Attendance Record was made available. 	<p>2023 Board Member Attendance</p>	<p>No action required</p>
<p>II. Public Comment</p> <p>Supervisor Steven Ding discussed his support for opening a Lodi clinic.</p> <p>Lodi City Council Member Ramon Yopez spoke about his support for opening a Lodi clinic.</p> <p>Diede Construction representatives spoke briefly about the Lodi Clinic location process thus far.</p> <p>Wayne spoke to the importance of a Lodi clinic for keeping patients out of the ER and urgent care clinics.</p>	<p>No attachment</p>	<p>No action required</p>
<p>III. Closed Session (Brian Heck)</p> <ol style="list-style-type: none"> Brian commenced closed session to discuss real property development pursuant to government code section 54956.8. <p>A motion was put forth to move forward with the acquisition of 700 Pine Street to open a Lodi clinic at that site.</p> <ol style="list-style-type: none"> Update on significant exposure to litigation was discussed, pursuant to government code section §54956.9(b). Nothing to report out of this portion of the closed session. Discussion took place regarding the public employee appointment of a permanent Chief Executive Officer, pursuant to government code §54957. Nothing to report out of this portion of the closed session. 	<p>No attachment</p>	<ol style="list-style-type: none"> Brian motioned to move forward with the acquisition of 700 Pine St, but there was no second; motion died on the floor No action required No action required
<p>IV. Consent Calendar (Brian Heck)</p> <ol style="list-style-type: none"> The consent calendar for November 2023 was approved unanimously, including: <ol style="list-style-type: none"> Minutes of SJ Health Board Meeting 10/24/2023 Meeting Calendar for 2024 AED Quality Testing & Use Policy Culturally & Linguistically Appropriate Services Policy 	<p>Board Minutes 2023-10-24; Meeting Schedule – 2024; AED Quality Testing and Use; Culturally and Linguistically Appropriate</p>	<ol style="list-style-type: none"> Kristin motioned to approve the consent calendar and Jodie seconded; the motion

<p>e. Workplace Violence Reporting Policy</p> <p>Item b. "Meeting Calendar for 2024" was pulled from the Consent Calendar for further consideration and vote at future meeting.</p>	<p>Services; Workplace Violence Reporting</p>	<p>was approved unanimously</p>
<p>V. Regular Calendar (Rod Place)</p> <ol style="list-style-type: none"> 1. Credentialing & Privileging report was presented. Initial appointments are Zabihullah Wardak, MD; Kristie Carazo, NP. Reappointments are David Birdsall, MD; Shailaja Munagala, MD; Lindsay Allen, PA; Amarpreet Everest, MD. Resignation is Monish Sodhi, MD. 2. October financials were presented. Billable visits for October are unfavorable to budget by 992 visits. The decline in visits is mainly related to vacant positions and physician turnover in FY24. The recruitment efforts are ongoing to fill the vacant positions. Net Patient Service Revenues for October are unfavorable to budget by \$133,418. The decrease in Net Patient Service revenues is in line with the decline in visits. YTD financials reflect an estimated July through October PPS liability accrual of \$100,000. <p>The payment for \$2,911,137 pertaining to the outstanding Medi-Cal PPS liabilities due to DHCS for FY2020 and FY2021 has been made in full and is reflected on the YTD financials.</p> <p>YTD Supplemental Revenue includes the recognition of estimated Quality Incentive Program (QIP) revenue for \$3,953,316, which plays a significant role in the profitability of SJHC. Combined Grants Revenue includes revenues for CCAEC, Exact Sciences Focus Program, ARPA, ACE/Practice, Test To Treat Equity, HRSA Expanding Covid Vaccinations, SOR3, Path Cited, DCA, and HHIP Street Medicine grants for \$1,425,805. Also, YTD ARPA grant revenues are higher compared to budget due to the recognition of \$794,322 for activity related to July 2022 through September 2023 period. YTD financials include Capitation Revenue for \$2,126,090 with consistent monthly physician capitation payments. The 340B Pharmacy program revenue for \$560,433 has been reflected on the YTD financials and is in line with the budget. Other Revenue includes revenues accrued for \$211,305 related to Purchased Services provided to SJGH by SJHC per the MOU. YTD Interest income for \$329,920 has been reflected on the financials, which is favorable compared to budget by \$307,343 mainly due to higher cash balance. Total YTD Operating Revenue is unfavorable to budget by \$783,549 primarily due to the decline in billable visits and budgetary underperformance in the SJHC grant portfolio.</p> <p>Salaries and Benefits expenses exhibit a favorable variance to budget by \$409,182 which is mainly related to lower benefits expense. For purposes of annual budgeting, per SJ County direction, county employees purchased by SJHC were budgeted at 66% benefits cost to salaries. Year-to-date actual benefits cost as a percentage of salaries, as of October 2023 is 41%. Other operating expenses exhibit an unfavorable variance of \$217,396 largely due to an unfavorable variance for \$775,744</p>	<p>November 2023 SJHEALTH Provider Credentialing Worksheets; CFO Presentation 2023-10; Finance Narrative – 2023-10; Annual Survey Results 11-2022 to 10-2023; Absence & Tardy Procedure; SJC Work Rules; Provider Peer Review Policy</p>	<ol style="list-style-type: none"> 1. Kristin motioned to accept the C&P Report and Cynthia seconded; motion was approved unanimously 2. Samantha motioned to accept the October financials and Kristin seconded; motion was approved unanimously 3. 4. Kristin motioned to accept the Quality Committee Report and Tarsha seconded; motion was approved unanimously 5. No action required 6. No action required 7. Jodie motioned to approve the Absence & Tardy Procedure and Monica seconded; motion was approved unanimously 8. Kristin motioned to approve of the acknowledgement of the County Code of Conduct and Cynthia seconded; motion was approved unanimously 9. James motioned to approve the QA/QI Provider Peer Review Policy and Samantha seconded; motion was approved unanimously

<p>in Professional Fees, Purchased Services, Dues, Repairs, Depreciation, Telephone, and Advertising expenses offset by a favorable variance of 558,347 reflected in the Supplies, Interest, Office, Travel, Insurance, Utilities, Rent and other expense categories. An estimated expense for the Purchased Services is recorded for July through October based on the MOU. YTD total Operating Expenditures are favorable to budget by \$191,786.</p> <p>Unaudited, as presented, Net Loss of \$19,033 on a year-to-date basis is unfavorable compared to budgeted Net Income of \$572,730.</p> <p>Capital Link fiscal year benchmarks were reviewed, showing Operating Margin at -0.1% against a goal of >3%, Bottom Line Margin at -0.1% against a goal of >3%, Days Cash on Hand at 152 against a goal of >45 days, Days in Net Patient Receivables at 31 against a goal of <60 days, and Personnel-Related Expenses at 83% against a goal of <70%.</p> <p>3. The Quality Committee Report was presented. Clinic engagement includes monthly quality improvement meetings with adult & family medicine, pediatrics, and OB/GYN departments. Intermittent gap closure clinics continue and are supported by Dr. Jackline Grace. Reporting is an important part of the loop-closure process to ensure visibility into QI/QA efforts.</p> <p>We now have access to HPSJ's HEDIS/MCAS measure performance. There is a claims lag of 2-4 weeks, so the metrics run a little behind, however, we have currently met at least 4 of the 19 measures for 2023.</p> <p>QIP PY6 Bold Goal Priority Measures Performance metrics were reviewed. There have been a lot of reshuffling of data since the July – Sept measures were collected, so there may be changes coming.</p> <p>Efforts continue for colon cancer screening with Cologuard. 5,820 orders have been placed and 2,118 results have been returned.</p> <p>3rd Quarter peer review results were 88 charts for July with 5 charts needing follow-up action (all same provider, who is no longer with us), August had 80 charts with no follow-up needed, and September had 65 charts reviewed with 1 needing follow-up action regarding a pelvic exam not ordered for excessive bleeding.</p> <p>4. Patient satisfaction scores were presented for the previous 12 months. It was noted that our positive comments decreased by about 1% to 57.3% and negative comments increased about 1% to 20.6% since last quarter. Areas of greatest concern in negative comments remain timely appointment access and attitudes of registration staff.</p>		<p>10. No action required</p>
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<p>It was recommended by a few attendees that using the Aidet customer service program may be helpful in mitigating these patient concerns.</p> <ol style="list-style-type: none"> 5. Susan gave a brief explanation of our upcoming HRSA site visit and the mock OSV exercises we are doing. 6. The SJ Health Absence & Tardy Procedure was presented for approval. This policy was approved. 7. The County Code of Conduct was reviewed. The board acknowledged these rules are in place for all County employees. 8. The QA/QI Provider Peer Review Policy was presented to the board. This policy was approved. 9. Due to lack of time, the CEO report was not presented this month. 		
<p>VI. Adjournment (Brian Heck) There being no further topics of discussion, Brian Heck adjourned the meeting at 8:33 p.m.</p>	<p>No attachments</p>	<p>No action required</p>

***NOTE: Board Member joined remotely**