



**San Joaquin County Clinics (SJCC)  
Minutes of March 26, 2019  
Board Meeting**

**San Joaquin General Hospital  
Conference Room 1**

Board Members Present

Alicia Yonemoto (Vice Chair)	Luz Maria Sandoval (Treasurer)	Ismael Cortez (Secretary)
Esgardo Medina	Beth Shelton	

Board Member(s) Excused Absent

Rod Place (Chair)	Mary Mills	Bradley Seng
Mike Baskett		

San Joaquin County Staff Present

Chuck Wiesen	Art Feagles	David Culberson
Vanessa Anderson	Matt Garber	Betty Jo Riendel
Adel� Gribble		

Guest(s) Present

John Bousquet	Larry Blitz (WIPFLI Consultant)
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**1. Call to Order**

The meeting was called to order at 5:07 p.m. by Vice Chair, Alicia Yonemoto.

**2. Public Comments**

There was no public comment.

**3. Approval of Minutes of February 26, 2019 Board Meeting**

Mr. Esgardo Medina made a motion to approve the minutes of the February 26, 2019 meeting. Mr. Ismael Cortez seconded the motion. The Board unanimously approved the minutes.

**4. Report on Finance Committee Meeting**

Mr. Art Feagles reported on the Finance Committee meeting that met at 4pm today. Patient service revenue for the month was about 3% below the monthly average for the prior six months. The expenses for the month were \$328,000 < the prior month but only half of 1% < the monthly average of the prior six months. The net income for the month – loss of 1.6 million dollars that was just 2.3% different from the monthly average for the recent six months. The variance analysis – only two items with > \$2,000 or 5% different from our history. Our YTD actual performance has been remarkably in line with the budget projections done about year ago for revenues, e.g. Gross Patient Service Revenue has a variance of just 1/10<sup>th</sup> of 1% to our YTD and total revenues exceed the budget expectations by about 2-½ %. Expenses are about 16% < budget and operating income is 30% better than predicted.

Department of Health Care Services audit for FY15 which is ongoing right now, is part of the process of determining what the final rates are retrospectively to the very beginning of the FQHC experience. This is an issue that has not been resolved to date. The audit was initiated a few months ago and they are working on getting this resolved as soon as possible. Our costs per visit exceeds the rates originally projected.

**5. Board Discussion & Action Items**

a. Credentialing Report (Betty Jo Riendel)

Ms. Betty Jo Riendel provided the Nurse Practitioner recently hired as well as a list of newly hired staff throughout the clinics (including specialty clinics) for the Board's information. Because we have many patients referred to specialty clinics, Betty Jo wanted to show that we have sufficiently staffed those clinics as well. Below is the breakdown of abbreviations for staff recently hired.

- LVN – Licensed Vocational Nurse
- OCA – Outpatient Clinic Assistant (Medical Assistant)
- OW – Office Worker
- SNIII – Staff Nurse III (Registered Nurse)
- SNV – Staff Nurse V (Registered Nurse)
- NPI – Nurse Practitioner I

Mr. Wiesen advised the FQHC Board must approve licensed staff as well as the certified staff. The board is not approving staff in the Specialty Clinics, only the FQHC. Ms. Luz Maria Sandoval made a motion to approve the lists provided (minus Specialty Clinic staff), Mr. Esgardo Medina seconded the motion and the board unanimously approved the motion.

b. UDS Annual Report (Chuck Wiesen)

Mr. Chuck Wiesen asked to defer this topic until next month. We must do a creative analysis of staffing that UDS wants to see on their report even though it is not on our financial budget. There has been a new determination by HRSA, i.e. any County staff works for the county organization so everyone is ours, but at the same time, they are not on our budget. We must report them as staff, figure out costs to associate with those staff and report it on UDS. This will not affect our financials because it will not touch our financials.

c. Sliding Fee Policy (Chuck Wiesen)

On the second page of the Director's Report, there is a Sliding Fee Policy Income Definition. We have submitted our site visit responses to HRSA. They are going to want to see a listing of what we consider income when doing Sliding Fee analysis of monthly income. Mr. Wiesen asked the Board to add this wording to our Sliding Fee Policy as a definition of what we consider income. Ms. Beth Sheldon made a motion to approve the addition to the Sliding Fee Policy, Mr. Esgardo Medina seconded the motion and the board unanimously approved the motion.

**6. Operational and Staff Reports**

a. Clinic Operational Report (Chuck Wiesen)

Mr. Chuck Wiesen provided his Director's Report for March 26, 2019.

Mr. Wiesen stated the patient visits have been steady over the last month. He also stated it was mentioned last month the Medi-Cal auditors were here and they are in the process of completing the permanent rate settings for five clinics, i.e. Healthy Beginnings on California Street, Family Medicine Clinic, Primary Medicine Clinic and Healthy Beginnings Clinic at French Camp and Children's Health Services on California Street. Those rates will be set once they complete the audit and they anticipate it will happen in April.

b. Training (Ron Some/Larry Blitz)

Mr. Wiesen introduced Mr. Larry Blitz from WIPFLI who will be providing the FQHC Board Training in April together with Mr. Ron Some.

Mr. Blitz advised he is a Hospital CEO and does a lot of FQHC turnarounds. This means if an organization is at a certain spot and they want to progress to another spot, he helps them get there, in terms of management,

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health care compliance and financial solvency. His joy is training and will be speaking about the responsibilities of an FQHC Board, how meetings should go, and what organizations like SJCC should be doing or not doing. An agenda for the training has not been mapped out yet. The training was initially scheduled for April 13<sup>th</sup> but after discussion, it was decided to move to a different date to be determined. Adelé Gribble will reach out to the Board to decide on a new date.

c. Productivity Report (Chuck Wiesen)

Last month, Ms. Alicia Yonemoto asked if the Board can start receiving the productivity report again that stopped when Cerner was implemented. Mr. Chuck Wiesen advised there is a long sheet handout labeled FYI which is the productivity report as requested. Mr. Wiesen advised the Quality Committee would review this information and report it to the board. They will be meeting in April for the first quarter.

**Next Meeting**

The next Board meeting will be held on Tuesday, April 30, 2019 at 5:00 p.m. at San Joaquin General Hospital in Conference Room 1.

**Adjournment**

The meeting was adjourned at 5:35 p.m. by Ms. Alicia Yonemoto.

Submitted by:



Secretary

Rod Place (Chairman) In lieu of Secretary

RESPECTFULLY SUBMITTED ON BEHALF OF BOARD SECRETARY BY:  
ADELÉ R. GRIBBLE, OFFICE TECHNICIAN COORDINATOR  
ACS ADMINISTRATION, SAN JOAQUIN COUNTY CLINICS