

Minutes of March 29, 2022
San Joaquin County Clinics Board of Directors

Board Members Present: Paul Antigua (Board Treasurer); Charson Chang; Dr. Farhan Fadoo (CEO); Monica Fuentes; Brian Heck (Vice Chair); Jessica Hernandez; Karen Lee; Esgardo Medina; Rod Place (Board Chair)

Excused Absent: Cynthia King

Unexcused Absent: Bernadette Pua

SJCC Staff: Michael Allen (Board Clerk); Angela Ayala; Dena Galindo; Rajat Simhan (Consultant); Jeff Slater (Consultant); Alice Soulligne (COO); Susan Thorner (Consultant); Kris Zuniga (CFO)

Guests: none

AGENDA ITEM	ATTACHMENTS	ACTION
<p>1. Call to Order (Rod Place) The meeting was called to order at 5:09 p.m. A quorum was established for today's meeting.</p>	No attachment	No action required
<p>2. Approval of Minutes from February 22, 2022 (Rod Place) Meeting minutes from 2/22/22 were approved unanimously.</p>	Board Minutes 2022-02-22	Jessica motioned to approve the minutes and Monica seconded; motion was approved unanimously
<p>3. Public Comment none</p>	No attachment	
<p>4. Conflict of Interest Code (Farhan Fadoo) Dr. Fadoo explained the need for and requirements of our Conflict of Interest Code, to whom it applies, and how to maintain compliance. The Board voted to accept the Conflict of Interest Code.</p>	Conflict of Interest Code	Karen motioned to accept the Conflict of Interest Code and Charson seconded; the motion was approved unanimously
<p>5. Conflict of Interest Policy (Farhan Fadoo) Dr. Fadoo reviewed the Conflict of Interest Policy and explained that this covers all health center staff. The Board voted to accept the Conflict of Interest Policy.</p>	Conflict of Interest Policy	Charson motioned to accept the Conflict of Interest Policy and Brian seconded; the motion was approved unanimously
<p>6. Governance Committee (Rod Place/Susan Thorner) Board membership was discussed regarding Jodie Moreno.</p> <p>Susan reminded the Board that the second orientation, with a focus on finance, quality and compliance, will be held on 4/5/22.</p>	No attachment	Brian motioned to accept Jodie Moreno as a Board member and Monica seconded; motion was approved unanimously
<p>7. Credentialing & Privileging Report (Angela Ayala) Reappointments are Gerardo Hernandez and Vanessa Kennedy. Resignations are Jerry Fessler and Christopher Lindeken. Initial Appointment is Estefania Macias (provisional). Reappointment was Margie Aquino. Advancement is Kristen Pierce (proctoring complete).</p>	Credentialing & Privileging Report – March 2022	<p>Paul motioned to approve the Credentialing & Privileging Report and Charson seconded; motion was approved unanimously</p> <p>Charson motioned to approve Estefania Macias to provisional status and Jessica seconded; motion was approved unanimously</p>
<p>8. Quality Committee Report (Angela Ayala) Charson introduced Angela and noted that Padma Magadala resigned this month. Angela discussed some Quality department changes and the reassignment of the remaining Quality team into the clinics.</p> <p>Current work plan focuses on education on the following aspects: measure requirements, coding needs, scoring guidelines, and testing frequency. Some changes are the</p>	Quality Committee Report – March 2022	Brian motioned to approve the Quality Committee Report and Monica seconded; motion was approved unanimously

<p>increased focus on the frequency of diabetic retinal and pediatric lead screenings.</p> <p>Educational refreshers are being conducted for annual screenings & immunizations, comprehensive diabetes care, older patient care, transitions of care, lead screenings, and well-care child visits.</p> <p>Support efforts are underway to aid clinical staff with at-the-elbow support, coding (including badge inserts listing diagnosis codes), and seeking user feedback to improve reporting availability.</p> <p>Sexual Orientation & Gender Identity (SOGI) demographic reporting has decreased, so efforts are underway to increase the related data collection.</p> <p>Pediatric BMI screening is very low in the Family Medicine Clinic, so efforts are underway to increase these measures to come in line with CHS standards.</p> <p>Data was reviewed regarding PDSA and related measures in the Titration clinic. Most measures saw an increase, with the exception of retinal screening; this was determined to be a misunderstanding by the provider that these screenings were not covered by insurance, but this has since been corrected through further education.</p> <p>Charson briefly reminded the committee about QIP (Quality Incentive Program) and that, although .</p>		
<p>9. Finance Committee Report (Kris Zuniga, SJCC CFO) Billable visits for February are favorable to budget by 166 visits. YTD visits have been updated on the December financials due to an updated report received for the additional visits (1,602 visits) that were not captured in the previous months. Additional Patient Revenues have been recorded accordingly. This new methodology has no impact on patient collections. Net Patient Revenues for February are \$150,591 greater than budget. YTD financials reflect a PPS reconciliation liability accrual of \$200,000. YTD Medi-Cal payments for \$2,519,165 have been reflected on the Balance Sheet for FY2015, FY2016, and FY2017 according to the payment plan with DHCS. YTD Income Statement includes interest expense of \$143,626 for PPS liability payments made to DHCS for FY2015, FY2016, and FY2017. YTD financials includes \$8.1M payment from SJGH related to the finalization of FY2020 financial statement audit and according to the separation agreement between SJGH and SJ Health. Also, YTD financials include \$4.1 payment from SJGH related to unaudited FY2021 financial statement and according to the separation agreement between SJGH and SJ Health. YTD financials include funds transferred for \$9,575,840 to San Joaquin County as a payment for payroll and benefits paid by San Joaquin County on behalf of SJ Health from July 2021 through January 2022.</p> <p>YTD Supplemental Revenue includes the recognition of estimated Quality Incentive Program revenue for \$7,977,319. Combined Grants Revenue includes revenues for Essential Access Title X, SOR2, Whole Person Care, Behavioral Health Integration, Health Net, American Rescue Plan (ARP) and other grants for \$1,553,024. Capitation and Managed Care Incentives include the YTD Capitation Revenue with an</p>	<p>Finance Committee Report – March 2022</p>	<p>Charson motioned to accept the Finance Committee Report and Jessica seconded; motion was approved unanimously</p>

<p>unfavorable variance to budget by \$512,070 mainly due to non-recognition of HEDIS revenue during the year. Also, Other Income includes the 340B Pharmacy Program revenue for \$911,797 and the program related expenses for \$659,941 are included in Supplies & Other Expenses categories on the financials. YTD financials reflect First Responder Program revenue for \$10,000. YTD Other Revenue includes revenues accrued for \$459,103 related to Purchased Services provided to SJGH by SJCC per the MOU and Interest Income of \$14,698. Total Net Operating Revenues are favorable to budget by \$1,385,415.</p> <p>YTD Salaries and benefits expenses exhibit an unfavorable variance to budget of \$570,648. Other operating expenses exhibit an unfavorable variance of \$673,946 largely due to Purchased Services with favorable variance of \$917,300 mainly offset by unfavorable variance in Professional Fees, Supplies, Interest and Miscellaneous Expenses \$1,591,246. An estimated expense for the Purchased Services is recorded from July through February based on the MOU.</p> <p>Unaudited, as presented, Net Income of \$1,315,514 on a year-to-date basis is favorable compared to budget by \$140,821.</p> <p>Metrics compared to Capital Link benchmarks: Operating Margin is 2% (goal >3%), Bottom Line Margin is 5% (goal >3%), Days Cash on Hand is 94 (goal is >30-45 days), Days in Net Patient Receivables is 25 (goal is <60 days), and Personnel-Related Expense is 73% (goal is <70%).</p>		
<p>10. <u>Legislative Updates & Grants (Jeff Slater)</u> Jeff reviewed the legislative updates, including proposed protection of the 340b drug purchasing program (SB 939), continued billing for social workers post-COVID (SB 966). No movement on the Build Back Better Act.</p> <p>Retroactive Approval of Changes in Scope to HRSA Form 5A was presented to the Board including the following:</p> <ul style="list-style-type: none"> • <u>CIS00127374 – Update an Additional or Specialty Service</u> - 1) Deleting occupational therapy as an additional or specialty service delivered by SJCC through formal written referral arrangement – SJCC does not have a formal written referral arrangement for occupational therapy services; and 2) Deleting physical therapy as an additional or specialty service delivered by SJCC through formal written referral arrangement – SJCC does not have a formal written referral arrangement for physical therapy services. • <u>CIS00128294 – Update and Additional or Specialty Service</u> - Adjusting the scope to reflect that SJCC delivers Podiatry services through a formal written contract with Dr. Rajdeep Sahota, DPM, that SJCC pays for and not directly through an SJCC employed podiatrist or through formal written referral arrangement with another organization. • <u>CIS00127838 – Update a Required Service</u> - Adjusting the scope to reflect that in addition to SJCC staff directly providing required translation services, SJCC has begun providing required translation services through a formal written contract with AMN Language Services • <u>CIS00128855 - Update a Required Service</u> - Adjusting the scope to reflect that in addition to SJCC physicians directly providing required general primary care, SJCC provides general primary care through a formal written contract with Singh Medical Associates LLC that SJCC pays for. 	<p>Legislative Update & Grants Approvals – March 2022; Retroactive Approval of Changes in Scope to HRSA; Retroactive Approval for CCI Connected Care Accelerator Grant</p>	<p>Paul motioned to retroactively approve the Changes in Scope to Form 5A and Charson seconded; motion was approved unanimously</p> <p>Paul motioned to retroactively approve the Change in Scope to Form 5B and Charson seconded; motion was approved unanimously</p> <p>Charson motioned to retroactively approve the CCI Connected Care Accelerator Grant and Paul seconded; motion was approved unanimously</p>

<p>Retroactive Approval of Change in Scope to HRSA Form 5B was presented to the Board including the following:</p> <ul style="list-style-type: none"> • CIS00122440 – Adding a New Service Site - Adding the recently purchased mobile clinic as a service site. <p>Retroactive Approval for CCI Connected Care Accelerator Grant was presented to the Board.</p>		
<p>11. UDS Report (Rajat Simhan) 2021 UDS Report was reviewed for the Board. Visits continue to increase over the last two years, with over 25% as telehealth visits. ZIP codes serviced were shown. Unique patient encounters have decreased by nearly 3,000 over the last two year. Patient income levels were reviewed and compared to the last two years. Staffing and utilization summary was reviewed. Patient age demographics were shown, as were clinical performance indicators for CY 2020 & CY 2021 (including Q1 – Q3).</p>	<p>UDS Report 2021</p>	
<p>12. CEO Report (Dr. Farhan Fadoo) COVID case rates and hospitalizations have sharply decreased, so testing & vaccination efforts have diminished. Telehealth continues to be a significant service line.</p> <p>FY23 preliminary budget has been submitted to CAO, with a draft copy for Board review in April. Administrative building will begin being occupied by staff in April with an SJ Health brand launch by end of May. New paint and flooring will be installed in the clinics within the next few weeks.</p> <p>2021 UDS reporting was submitted to HRSA and all revisions were accepted.</p> <p>Strategic plan efforts were briefly reviewed, with 6 of 67 projects now complete.</p>	<p>CEO Report – March 2022</p>	
<p>13. Adjournment There being no further topics of discussion, Rod Place adjourned the meeting at 6:49 p.m.</p>	<p>No attachments</p>	<p>No action required</p>