



Hazel Hawkins
MEMORIAL HOSPITAL

**SPECIAL AND REGULAR MEETING OF THE BOARD OF DIRECTORS
SAN BENITO HEALTH CARE DISTRICT
911 SUNSET DRIVE, HOLLISTER, CALIFORNIA
WEDNESDAY, AUGUST 23, 2023 – 5:00 P.M.
SUPPORT SERVICES BUILDING - 2ND FLOOR GREAT ROOM**

Mission Statement - The San Benito Health Care District is a public agency that serves as a responsive, comprehensive health care resource for its patients, physicians, and the health care consumers of the community.

Vision Statement - San Benito Health Care District is committed to meeting community health care needs with quality care in a safe and compassionate environment.

San Benito Health Care District is a public agency that serves as a responsive, comprehensive health care resource for its patients, physicians and the community.

AGENDA

Presented By:

1. **Call to Order / Roll Call**

(Hernandez)

2. **Board Announcements**

(Hernandez)

3. **Public Comment**

(Hernandez)

This opportunity is provided for members of the public to make a brief statement, not to exceed three (3) minutes, on matters within the jurisdiction of this District Board, which are not otherwise covered under an item on this agenda. This is the appropriate place to comment on items on the Consent Agenda. Board Members may not deliberate or take action on an item not on the duly posted agenda. Written comments for the Board should be provided to the Board clerk for the official record. Whenever possible, written correspondence should be submitted to the Board in advance of the meeting to provide adequate time for its consideration. Speaker cards are available.

4. **Consent Agenda – General Business** (Pages 1 – 36)

(Hernandez)

The Consent Agenda deals with routine and non-controversial matters. The vote on the Consent Agenda shall apply to each item that has not been removed. A Board Member may pull an item from the Consent Agenda for discussion. One motion shall be made to adopt all non-removed items on the Consent Agenda.

A. Consider and Approve Minutes of the Regular Meeting of the Board of Directors – July 27, 2023

B. Consider and Approve Minutes of the Special Meeting of the Board of Directors – August 7, 2023

- C. Approve Crash Cart – Contents and Checks Policy
- D. Receive Officer/Director Written Reports - No action required.
 - Interim Chief Nursing Officer
 - Provider Services & Clinic Operations
 - Skilled Nursing Facilities Reports (Mabie Southside/Northside)
 - Laboratory and Radiology
 - Foundation Report
 - Marketing/Public Relations

Recommended Action: Approval of Consent Agenda Item (A) through (D).

- Report
- Board Questions
- Motion/Second
- Action/Board Vote-Roll Call

5. Medical Executive Committee (Page 37)

(Dr. Bogey)

- A. Consider and Approve Medical Staff Credentials: August 16, 2023

Recommended Action: Approval of Credentials.

- Report
- Board Questions
- Public Comment
- Motion/Second
- Action/Board Vote-Roll Call

6. Receive Informational Reports

- A. Interim Chief Executive Officer (Page 38)

(Casillas)

- Public Comment

- B. Finance Committee (Pages 39 – 52)

(Robinson)

- 1. Finance Committee Meeting Minutes – August 17, 2023
- 2. Review Financial Updates
 - Financial Statements – July 2023
 - Finance Dashboard – July 2023

- Public Comment

7. Action Items

(Robinson)

- A. Consider Recommendation for Board Approval of Christopher Verioti, D.O. Second Amendment to Orthopedic Surgery Coverage Agreement Effective 9/1/2023 for a One Year Term and an Estimated Annual Cost of \$462,000 and Reimbursement of Travel Expenses **(Pages 53 – 54)**

Recommended Action: Approval of Second Amendment to Orthopedic Surgery Coverage Agreement

- Report
- Board Questions
- Public Comment
- Motion/Second
- Action/Board Vote-Roll Call

- B. Consider Recommendation for Board Approval of Hue Nguyen-Ngo, D.O. Professional Services Agreement Effective 8/30/2023 for a One Year Term and an Estimated Annual Cost of \$113,100 **(Pages 55 – 62)**

Recommended Action: Approval of Professional Services Agreement

- Report
- Board Questions
- Public Comment
- Motion/Second
- Action/Board Vote-Roll Call

- C. Consider Recommendation for Board Approval of FY 2024 Operating and Capital Budgets **(Pages 63 – 74)**

Recommended Action: Approval of FY2024 Operating and Capital Budgets

- Report
- Board Questions
- Public Comment
- Motion/Second
- Action/Board Vote-Roll Call

8. Adjournment

(Hernandez)

The next Regular Meeting of the Board of Directors is scheduled for Thursday, September 28, 2023 at 5:00 p.m. (meeting room to be determined.)

The complete Board packet including subsequently distributed materials and presentations is available at the Board Meeting, in the Administrative Offices of the District, and posted on the District's website at <https://www.hazelhawkins.com/news/categories/meeting-agendas/>. All items appearing on the agenda are subject to action by the Board. Staff and Committee recommendations are subject to change by the Board.

Any public record distributed to the Board less than 72 hours prior to this meeting in connection with any agenda item shall be made available for public inspection at the District office. Public records distributed during the meeting, if prepared by the District, will be available for public inspection at the meeting. If the public record is prepared by a third party and distributed at the meeting, it will be made available for public inspection following the meeting at the District office.

Notes: Requests for a disability-related modification or accommodation, including auxiliary aids or services, to attend or participate in a meeting should be made to District Administration during regular business hours at 831-636-2673. Notification received 48 hours before the meeting will enable the District to make reasonable accommodations.

**REGULAR MEETING OF THE BOARD OF DIRECTORS
SAN BENITO HEALTH CARE DISTRICT
SUPPORT SERVICES BUILDING, 2ND-FLOOR, GREAT ROOM**

THURSDAY, JULY 27, 2023

5:00 P.M.

MINUTES

HAZEL HAWKINS MEMORIAL HOSPITAL

Directors Present

Jeri Hernandez, Board Member
Bill Johnson, Board Member
Devon Pack, Board Member
Josie Sanchez, Board Member
Rick Shelton, Board Member

Also Present

Mary Casillas, Interim Chief Executive Officer
Mark Robinson, Chief Financial Officer
Michael Bogey, MD, Chief of Staff
Heidi A. Quinn, District Legal Counsel
Michael Sweet, Special Counsel
Tiffany Rose, Executive Assistant
Suzie Mays, Midas System Administrator

1. Call to Order

Directors Hernandez, Johnson, Pack, Sanchez, and Shelton were present; attendance was taken by roll call. A quorum was present and President Jeri Hernandez called the meeting to order at 5:00 p.m.

2. Board Announcements

Director Hernandez encouraged everyone to listen to an episode of the podcast *After the Weather* with Spencer Christian. Mr. Christian interviewed Ms. Casillas on the June 29 episode regarding “Rural Hospitals on Life-Support.”

3. Public Comment

An opportunity was provided for public comment and individuals were given three minutes to address the Board Members and Administration.

4. Consent Agenda - General Business

A. Amended Minutes of the Special Meeting of the Board of Directors, October 14, 2022

B. Minutes of the Regular Meeting of the Board of Directors, June 22, 2023

C. Minutes of the Special Meeting of the Board of Directors, June 29, 2023

D. Chain of Command for Patient Safety Concerns Policy

- E. Receive Officer/Director Written Reports – Written reports were included in the packet and no action required.
1. Interim Chief Nursing Officer
 2. Provider Services & Clinic Operations
 3. Skilled Nursing Facilities Reports (Mabie Southside/Northside)
 4. Laboratory
 5. Foundation Report
 6. Marketing/Public Relations

Director Hernandez presented the consent agenda items before the Board for action. This information was included in the Board packet.

MOTION: By Director Hernandez to approve Consent Agenda – General Business, Items (A) through (E), as presented; Second by Director Sanchez.

Moved/Seconded/Unanimously Carried. Ayes: Directors Hernandez, Johnson, Pack, Sanchez, and Shelton. Approved 5-0 by roll call.

5. **Report from the Medical Executive Committee Meeting on July 19, 2023 and Recommendations for Board Approval of the following:**

- A. **Medical Staff Credentials Report:** Dr. Bogey, Chief of Staff, provided a review of the Credentials Report from July 19, 2023. The full written report can be found in the Board Packet.

Item: Proposed Approval of the Credentials Report; seven (7) New Appointments, six (6) Reappointments, one (1) Allied Health New Appointment, two (2) Allied Health Reappointments, and three (3) Resignations/Retirements.

No public comment.

MOTION: By Director Sanchez to approve the Credentials Report as presented; Second by Director Pack.

Moved/Seconded/and Unanimously Carried: Ayes: Directors Hernandez, Johnson, Pack, Sanchez, and Shelton. Approved 5-0 by roll call.

6. **Receive Informational Reports**

- A. **Update on Status of Bankruptcy Proceedings (Case No. 23-50544)**

Mr. Michael Sweet of Fox Rothschild, LLP, special bankruptcy counsel for the District, was present via Zoom to provide an update on the status of the bankruptcy proceedings. A hearing was held on July 21, 2023 to review the motion submitted by two bargaining units challenging the eligibility of the District's bankruptcy filing. There was discussion of scheduling an evidentiary hearing to review the District's eligibility to file bankruptcy. The Court provided guidance and it was determined to schedule the eligibility hearing in December 2023 and to postpone the argument on the rejection motion until after the eligibility trial. Discovery will take place in the coming weeks with depositions in September. Experts will be retained with reports by October 24, expert witness depositions by November 7, filing of trial dates by November 20, and starting of the trial on December 4, 2023.

An opportunity was provided for public comment and individuals were given three minutes to address the Board Members and Administration.

B. SBHCD Board of Directors Ad Hoc Committee – Potential Affiliation/Strategic Partnership

Director Hernandez reported on February 23, 2023, the Board received a report from Mr. Richard Peil of B. Riley Financial, on behalf of the District, regarding strategic partnership options, efforts to solicit interest in the hospital, and three scenarios that could maximize value of the District. At the May 23, 2023, Board of Directors meeting, the Board identified criteria regarding potential affiliation and strategic partnership, including:

- Longstanding history of experience of healthcare administration;
- Proven track record for maintaining quality of care;
- Ability to mitigate some of the risks and liabilities while developing assets and expansion of care;
- Able to secure financing and possesses significant capital;
- Proven record for turning around distressed rural hospitals;
- No track record of rapid asset liquidation; and
- Understands specific terms and conditions, as well as the general obligation bonds and payoffs.

The Board formed a Temporary Advisory Committee tasked with identifying potential affiliation / strategic partnership models and assigned Directors Hernandez and Pack to serve on the Committee. The Committee has been meeting since March 2023 to review various affiliation models that would be a best fit for the District and community. The Committee has also reviewed various potential partners who have expressed interest in the District facilities in an effort to determine who would be best positioned for the long-term provision of health care to the community. The Committee's last report to Board on June 22 indicated there were several interested parties and that an update would be provided once sufficient information had been developed.

At this time preliminary discussions are taking place with a potential qualified partner who meets the criteria laid out by the Board. The intent is to bring the proposal to the Board and public for discussion at a Special Meeting of the Board. Director Pack reiterated that the Board continues to perform due diligence with the goal of maintaining long-term operations, negotiating terms that avoid reductions in clinical staff, and continuing to seek a long-term partner whose goal is to continue to maintain services as well as expand services in San Benito County.

An opportunity was provided for public comment and individuals were given three minutes to address the Board Members and Administration.

C. Interim Chief Executive Officer (CEO)

Ms. Casillas provided highlights of the Interim CEO Report, which can be found in the Board packet.

- A Court-appointed ombudsman visited the hospital, clinics, and skilled nursing facilities between July 18 - 19. It is the responsibility of the ombudsman to ensure the District is providing safe patient care. The preliminary report indicated the ombudsman appreciated the level of care being provided to patients. A full report will be provided to the Court within 60 days of his appointment with quarterly reports thereafter.
- Laboratory Services had a very successful Joint Commission survey. Congratulations were extended to Bernadette Enderez and Team.
- MQSA Auditor conducted the annual audit of the Radiology Department to ensure the Mammography Department meets State and Federal regulations. Congratulations was extended to the Team for a successful survey.

- HR reported a turnover rate for the first six months of this calendar year at 7%, which is well below the national average of over 22%.
- ESC union voted unanimously to accept a new contract proposal.
- Discussions continue with the NUHW and CNA unions regarding proposed changes to contracts.
- The ICU began accepting admissions the week of July 17, 2023. Ms. Fernandez, Senior Director of Acute Care Services, has been working with Travelers to ensure the unit is fully staffed.

An opportunity was provided for public comment and individuals were given three minutes to address the Board Members and Administration.

D. Financial Report

1. Review Finance Updates - Mr. Robinson provided an overview of the financial report for July 27, 2023, as well as the Financial Statements and Finance Dashboard for June 2023, included in the Board packet.

Highlights include:

- The deadline to file for the AB112 Distressed Hospital Loan Program is July 31, 2023 at 5:00 p.m. The Program will provide approximately \$150M overall and the District has requested \$10M assistance. Close to twenty hospitals have applied.
- Department budgets have been completed. The operating and capital budgets will be brought to the Board for approval in August.
- Innova continues to work with the hospital on the Revenue Cycle audit and a public presentation will be provided once the audit is complete.

An opportunity was provided for public comment and no public comment was received.

7. Action Items

A. Contracts

1. Consider Approval of Resolution No. 2023-30 of the Board of Directors of San Benito Health Care District Approving and Adopting a Memorandum of Understanding with Engineers and Scientists of California, Local 20, IFPTE (AFL-CIO & CLC)

Staff reviewed the proposed changes in the benefits agreed to by the Engineers and Scientists of California (ESC). The proposal is attached to the Resolution and included in the Board packet.

There was no public comment.

MOTION: By Director Hernandez to Approve Resolution No. 2023-30 Adopting a Memorandum of Understanding with Engineers and Scientists of California, Local 20, IFPTE (AFL-CIO & CLC); Second by Director Sanchez.

Moved/Seconded/and Unanimously Carried: Ayes: Directors Hernandez, Johnson, Pack, Sanchez, and Shelton. Approved 5-0 by roll call vote.

2. Consider Approval of Resolution No. 2023-31 of the Board of Directors of San Benito Health Care District Authorizing Execution of an Agreement with the County of San Benito for Temporary Transfer of Funds Under Article XVI, Section 6 of the State Constitution

Staff reported the District was requesting an advance of its property tax revenue from the County of San Benito. The Resolution was included in the Board packet.

An opportunity was provided for public comment and individuals were given three minutes to address the Board Members and Administration.

MOTION: By Director Hernandez to approve Resolution No. 2023-31 Authorizing Execution of Agreement with the County of San Benito for Temporary Transfer of Funds under Article XVI, Section 6 of the State Constitution; Second by Director Pack.

Moved/Seconded/and Unanimously Carried: Ayes: Directors Hernandez, Johnson, Pack, Sanchez, and Shelton. Approved 5-0 by roll call vote.

8. Public Comment

An opportunity was provided for public comment and individuals were given three minutes to address the Board Members and Administration on closed session items.

9. Closed Session

President Hernandez announced the items to be discussed in Closed Session as listed on the posted Agenda are (1) Conference with Legal Counsel-Existing Litigation, Government Code §54956.9(d)(1); (2) Conference with Legal Counsel-Anticipated Litigation, Government Code §54956.9; (3) Conference with Labor Negotiator, Government Code §54957.6; and (4) Report Involving Trade Secret, Government Code §37606 & Health and Safety Code §32106.

The meeting was recessed into Closed Session at 6:39 p.m.

10. Reconvene Open Session/Closed Session Report

The Board of Directors reconvened Open Session at 7:18 p.m. District Counsel Quinn reported that in Closed Session the Board discussed: (1) Conference with Legal Counsel-Existing Litigation, Government Code §54956.9(d)(1); (2) Conference with Legal Counsel-Anticipated Litigation, Government Code §54956.9; (3) Conference with Labor Negotiator, Government Code §54957.6; and (4) Report Involving Trade Secret, Government Code §37606 & Health and Safety Code §32106.

As to all items listed in closed session, staff provided an update to the Board, the Board provided direction but there is no reportable action.

11. Adjournment:

There being no further regular business or actions, the meeting was adjourned at 7:18 p.m.

The next Regular Meeting of the Board of Directors is scheduled for Thursday, August 24, 2023 at 5:00 p.m., and will be conducted in person.

/tr



Hazel Hawkins
MEMORIAL HOSPITAL

**SPECIAL MEETING OF THE BOARD OF DIRECTORS
SAN BENITO HEALTH CARE DISTRICT
WOMEN'S CENTER, 2ND-FLOOR, HORIZON ROOM
MONDAY, AUGUST 7, 2023
5:00 P.M.
MINUTES**

Directors Present

Jeri Hernandez, Board Member
Bill Johnson, Board Member
Devon Pack, Board Member
Josie Sanchez, Board Member
Rick Shelton, Board Member

Also, Present

Mary Casillas, Interim Chief Executive Officer
Mark Robinson, Chief Financial Officer
Heidi Quinn, District Legal Counsel
Robert Miller, Special Counsel
Michael Sweet, Special Counsel
Tiffany Rose, Executive Assistant
Suzie Mays, Midas Systems Administrator

1. **Call to Order – Roll Call**

Directors Hernandez, Johnson, Pack, Sanchez, and Shelton were present; attendance was taken by roll call. A quorum was present and the Special Meeting was called to order at 5:00 p.m. by Director Hernandez.

Director Hernandez noted the Special Board meeting was moved to the Horizon Room to better accommodate public access. The Great Room is also available for those who would like to view and listen to the meeting.

2. **Recommendation for Board Action**

A. **Consider Temporary Advisory Committee's Recommendations Regarding American Advanced Management's Letter of Intent for a Proposed Business Transaction with the District and Provide Authority to Negotiate**

Ms. Casillas reported the District received a non-binding letter of intent from American Advanced Management, Inc. (AAM), which was included in the packet. This is the beginning of a process to explore and negotiate partnership with AAM. The SBHCD Board provided the following criteria when considering partnership:

- Company demonstrates longstanding history of experience of healthcare administration;
- Proven track record for maintaining quality of care;
- Ability to mitigate some of the risks and liabilities while developing assets and expansion of care;
- Provide proof of funds necessary to meet bidder's purchase price.
- Must provide evidence of adequate liquidity and financing to meet all post transaction obligations to the hospital;
- Proven record for turning around distressed rural hospitals;
- No track record of rapid asset liquidation;
- Understands specific terms and conditions, as well as the general obligation bonds and payoffs.

AAM is a privately-owned company with six care centers, twelve clinics, and three urgent care centers located mostly in northern California. AAM's mission is to preserve access to quality healthcare for rural and urban communities by revitalizing struggling hospitals with a focus on growth and fiscally responsible centralized services.

AAM originated in 2012 with the opening of a pilot hospital, Central Valley Specialty Hospital, a long-term acute care facility in Modesto, California. Three SBHCD District Board members visited the site and talked to AAM Administration and employees to learn more about the facility's operations. AAM is the first company in California to revive a rural hospital following bankruptcy and closure. AAM has developed service models for urban, rural, and critical access hospitals. They have a medical group with multiple specialties and over 60 physicians and offer options for employment or 1099 contracts.

In 2017, AAM reopened Colusa Regional Medical Center after acquisition through bankruptcy. In 2018, AAM saved Glenn Medical Center from closure. In 2019, AAM reopened Sonoma Specialty Hospital, a former public district hospital, and in 2023 expanded the facility to 54 beds. In 2020, AAM reopened Coalinga Regional Medical Center during the COVID surge. The Executive Team made a site visit to Coalinga Regional to learn more about the facility. Future site visits to additional facilities are being planned for the Executive Team and Board Members. Potential benefits with AAM include ability to recruit physicians for needed specialties, length of stay management, facility investments for expansion, cost-effective shared service model for revenue cycle, and leverage for purchase contracts.

The website for AAM is <https://americanam.org/>. AAM will be invited to attend a future SBHCD Board meeting, as well as an Employee Town Hall, and physician meeting in the next few weeks to provide additional information about their company and answer questions. They will also be invited to attend a public forum in the near future.

Mr. Robert Miller, Partner with Hooper, Lundy & Bookman, regulatory and transaction counsel for the District, was present via Zoom to provide an overview of the Letter of Intent (LOI) and Exhibit A – Proposed Transaction (both included in the packet materials.) Mr. Miller has been working with AAM and their legal counsel to develop a term sheet for consideration by the District. Next steps include feedback from the District pertaining to the term sheet, including what is important to the community and any items the District would like to see included in a transaction. There is no exclusivity for the LOI and when a transaction is presented to the Bankruptcy Court, the Court will expect the highest and best offer for the District.

The Letter of Intent outlines the Parties' obligations in a proposed transaction, which is subject to approval by the Bankruptcy Court. Other bidders will also have an opportunity to review the potential transaction and all parties to the transaction are obligated to be in compliance with Local Health Care District Law (California Health and Safety Code §32000 et seq.).

Exhibit A – Proposed Transaction outlines high-level parameters for a *potential* transaction and is an agreement between parties to continue negotiating, with the understanding due diligence still needs to be performed and exact details still need to be negotiated. As outlined in the Proposed Transaction, when a public entity with assets in the public trust enters into a transaction with a private party, the transaction must be commiserate with fair market value. Details of the transaction will be taken into consideration when determining the fair market value, which will be determined by an independent third party appraisal. Once the definitive agreements are in near final form, the agreement will go before a valuation consultant to review the agreements and all assets within the context of the transaction, who will then generate a fair market value range. Currently a lease for between five and ten years is proposed with a purchase option for AAM to buy the District assets under the lease at the conclusion of the lease. As noted in Exhibit A, the terms and conditions are not binding and are subject to due diligence and negotiation between parties.

Mr. Michael Sweet of Fox Rothschild, LLP, special bankruptcy counsel for the District, was present via Zoom to provide information and answer questions pertaining to AAM and how a partnership would affect the District's bankruptcy case. The chapter 9 bankruptcy case remains pending. Since two bargaining units have challenged the District's eligibility to file a bankruptcy action, an eligibility trial has been pushed to the first week of December. In the meantime, the District will continue with the bankruptcy process. It is likely the proposed transaction with AAM will be presented to the Bankruptcy Court for approval and will occur subject to the court finding the District eligible during the trial in December. However, the District will not wait until after the trial to seek court approval since the expectation is that the parties will want to see the negotiations move forward to provide more certainty to the District and a better understanding for the employees and community. There will also likely be an election component and the District will seek Bankruptcy Court approval of the transaction once there is an agreement on the specific terms and framework.

The District has been working with the San Benito County Elections Department to understand timelines for a special election and potential costs.

An opportunity was provided for the public to comment and individuals were given three minutes to address the Board Members and Administration.

MOTION: By Director Hernandez to Provide Authorization to Administration to Negotiate and Sign the Letter of Intent with American Advanced Management, Inc. for a Proposed Business Transaction with the District; Second by Director Sanchez.

Moved/Seconded/and Unanimously Carried: Ayes: Directors Hernandez, Johnson, Pack, Sanchez, and Shelton. Approved 5-0 by roll call.

B. Consider Dissolution of Temporary Advisory Committee – Potential Affiliation/Strategic Partnership, and Formation of a Temporary Advisory Committee to Negotiate Potential Terms

On March 23, 2023, the Board authorized the formation of a temporary advisory committee and appointed Directors Hernandez and Pack to serve for a three-month period to identify potential affiliation models and develop recommendations for full Board review.

The Committee was directed to exist until a full recommendation was made to the Board. Dissolution of the temporary advisory committee is recommended since the work of the committee has been completed, and a recommendation was brought. The Board has the option to form a new temporary advisory committee to work with Leadership on negotiations with AAM and perform due diligence. The new temporary advisory committee would then provide reports to the full Board for review.

An opportunity was provided for the public to comment and individuals were given three minutes to address the Board Members and Administration.

MOTION: By Director Johnson to Approve Dissolution of the Temporary Advisory Committee – Potential Affiliation / Strategic Partnership, and Formation of a Temporary Advisory Committee to Negotiate Potential Terms to Consist of Directors Hernandez and Pack; Second by Director Pack.

Moved/Seconded/and Unanimously Carried: Ayes: Directors Hernandez, Johnson, Pack, Sanchez, and Shelton. Approved 5-0 by roll call.

C. General Discussion of Additional Board Meeting Dates and Direction to Staff

The Regular Board meeting scheduled for August 24 will be rescheduled to August 23 due to scheduling conflicts for two Board members. There was also discussion regarding cadence for scheduling additional Special Board meetings and Director Availability, as noted below.

- Director Pack has a conflict on 8/14. Also, conflicts on Tuesdays from 11:00 a.m. – 7:00 p.m. and Thursdays from 7:00 p.m. – 10:30 p.m.
- Director Sanchez has a conflict on 8/17.
- Directors Hernandez, Johnson, and Shelton do not have conflicts.

Future meetings will likely be held in the Horizon Room to accommodate greater public attendance.

An opportunity was provided for the public to comment and individuals were given three minutes to address the Board Members and Administration.

D. Adjournment:

There being no further special business or actions, the meeting was adjourned at 6:51 p.m.

The next Regular Meeting of the Board of Directors is scheduled for Wednesday, August 23, 2023 at 5:00 p.m. in the Women’s Center, 2nd Floor – Horizon Room.

/tr

Crash Cart - Contents and Checks

Disclaimer

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Revision Insight

Document ID:	10379
Revision Number:	1
Owner:	Khiem Nguyen, Director of Pharmacy
Revision Official Date:	No revision official date

Revision Note:

New revision initiated by Pharmacy.[Department changed from Administration - Multidisciplinary to Pharmacy by Matsui, Toshi on 04-APR-2023]

Policy : Crash Cart - Contents and Checks

PURPOSE

- Crash cart equipment, solutions and medications are to be available 24 hours per day for emergency situations in the hospital's various treatment and patient care areas. The carts are to be kept accurate and up to date with schedules for review of content accuracy.
- To make individual department personnel responsible for maintaining and checking the crash cart in their respective areas daily in all locations.
- To ensure proper daily discharge of defibrillators.
- To provide a means of doing quality control.
- Crash carts are placed strategically in high use areas to provide optimum patient safety.

CRASH CART LOCATIONS

- ED – 2 carts: 4 Adult trays, 2 Pedi trays.
- ICU - 1 cart: 2 Adult, 1 Pedi trays.
- Med/Surg – 1 cart: 2 Adult and 1 Pedi trays.
- OB – 1 cart: 1 Adult, 1 Neonatal and 1 Pedi trays.
- Surgery – 1 cart: 1 Adult and 1 Pedi trays.
- ASC – 1 cart: 1 Adult and 1 Pedi trays
- Radiology – 1 cart: 1 Adult tray (Radiology CT 64 Slice Scan room)
- Stress Test Room / SDS – 1 cart: 2 Adult trays.
- Women's Diagnostic Imaging Center – 1 cart: 1 Adult tray (Women's Center Mammography Trident Room)

POLICY

1. The Medicine Committee will make all decisions regarding the adult crash cart contents.
2. All crash carts will be standardized.
3. Pharmacy obtains plastic numbered locks from Purchasing. Pharmacy is responsible for replacing broken red numbered locks on all crash carts. Pharmacy will be notified as soon as possible when a crash cart needs a new lock either for restocking or after cart checks by nursing personnel. When nursing personnel open a cart for a code or inspection they will lock the cart with a yellow lock, placing their initials and date on the yellow lock, use a permanent marker pen, as well as logged onto the Crash Cart inspection log. Yellow locks are kept in the first drawer of the crash cart. After pharmacy hours at the earliest time pharmacy will be notified of the need to reseal the cart.
4. The defibrillator must be visually inspected and charged/discharged daily at the manufacture's recommended test joules. The defibrillator is to be checked unplugged. Plug defibrillator back in to be charged. The unit must remain plugged in when not in use.
5. Signing or initialing the record sheet is verifying that all emergency supplies are present, no outdates on cart, cart sealed and the equipment checks have been performed.
6. The crash cart inspection record will remain in the department where the cart is located and will provide a means of doing quality control.
7. The earliest medication "date of expiration" is placed on the outside of the cellophane-sealed emergency medication container located in the crash cart.
8. The crash cart and medications are to be assured of completeness, content, and stability (no outdates). Monitoring reviews are monthly by the Pharmacy when doing floor checks.
9. After any cart is used, nursing will assure that the cart is complete and will apply yellow lock. Pharmacy must be notified of the need for new red lock and new drug modules.

DESIGNEES

RN
LVN
Respiratory Therapy
Radiology
Pharmacy

EQUIPMENT

1. Crash Cart
2. Checklists
3. Break away lock, yellow

PROCEDURE

1. DAILY INSPECTION

- The outside of the crash cart must be visually inspected for cleanliness and for the contents as described in the crash cart content checklist each calendar day.
- The oxygen tank is to be replaced if regulator reads less than 500 PSI.
- Charge the defibrillator at the manufacturer's recommended joules and discharge paddles. A check mark next to the signature or initials implies the defibrillator was checked and working. EKG paper is available.
 - If the defibrillator does not properly discharge, notify the Biomedical Engineering Department immediately.
 - OB Pedi cart does not have defibrillator
- Presence of lock and lock number or yellow lock
- Presence of CPR Board
- Ambu bags and masks available, as applicable to the cart type.
- Suction machine, complete and functioning.
- Sign crash cart inspection record and document seal number.

2. MONTHLY INSPECTION

- Performed first business day of the month.
- Pharmacy will check all medications and solutions for outdates. The expiration date of the first medication(s) to expire must be posted on the outside of the cart.
- Respiratory Therapy will do a mechanical check of the oxygen tank, verify Ambu bag and CO₂ detector
- Department designee will check all supplies and equipment. Check carts for correct contents, outdates and check the suction unit. Notify Biomedical Engineering immediately if equipment is not functioning properly.
- Pharmacy, Respiratory Therapy, and Nursing will sign the crash cart inspection record upon completion of the monthly inspection.
- The cart will be relocked at the completion of the check. Non-pharmacy personnel will replace the lock with a yellow lock, label and notify pharmacy of need to replace red numbered lock
- The pharmacy personnel replacing the red numbered lock will then date, time, record the lock number and sign the checklist ([Appendix B](#)) attached to the cart.

3. AFTER THE SEAL IS BROKEN

1. Department designee is responsible for checking for missing items. Department designee will then notify the appropriate personnel, Pharmacy, RT, Nursing Supervisor or Materials Management, for replacement of missing items.
2. Department designee will assure the cart contents are complete, note the reason why the cart was opened using the "Key" initials from the code key on the Crash Cart Inspection record. Notify Pharmacy to place red-numbered plastic lock on cart after replacement of all contents.
3. When a crash cart has been opened, a pharmacist will check the emergency medications in the crash cart before the cart is sealed with a red plastic pre-numbered crash cart lock.

4. If an emergency medication tray is used during a Code Blue, the nurse will write the patient's name and account number or place a sticker with the patient's name and account number on the medication module pharmacy sheet.
5. The pharmacy will provide emergency medication trays that are sealed in such a way to prevent tampering.
6. The red crash cart locks are controlled by the pharmacy.
7. When a color-coded module is opened, the following procedure shall be taken to replace that module(s): Respiratory Department shall have on hand at all times one (1) complete set of the Broselow Pediatric Resuscitation System. Upon completion of emergency RT or RN shall replace appropriate equipment and modules(s). Replacement Broselow modules are available from the Respiratory Therapy department.

DOCUMENTATION

1. When a new breakaway lock is applied the number of the red lock will be documented on the narcotic sheet and on the Crash Cart Checklist.
2. When a crash cart is removed from the unit where it usually stays, the person removing it will leave a note on the wall stating where it can be found, and notify the ward clerk or nurse.
3. Crash Cart Inspection Log
4. Resuscitation Record
5. Code evaluation worksheet

FREQUENCY OF REVIEW

Patient care policies to be reviewed annually to determine if it complies with current recommendations, guidelines, mandates, statutes, practices and San Benito Healthcare District operations. In the event that changes are required, the policy and procedure will be updated as needed.

DIRECTOR ACCOUNTABILITY

Implementation, training, and monitoring of practices regarding a policy and procedure are the responsibilities of the Department Director.

RESTRICTED USE OF EMERGENCY MEDICATIONS

Emergency medication supplies shall not be used as a routine or stat source, but shall be reserved for emergency use when immediate availability is necessary.

SELECTION OF MEDICATIONS

Emergency medications shall be appropriate to the needs of the patient-care area and shall include, but will not be limited to:

- Standard emergency medications (e.g., epinephrine and cardiopulmonary medications)
- Parenteral fluids
- Common poison antidotes, if appropriate
- Antivenins, if appropriate

The medical staff shall approve the kinds and quantities of medications. A list of the approved medications shall be maintained.

Emergency medications will be provided in unit-dose, age-specific, ready-to-administer forms whenever possible.

CONTAINERS

Emergency medication containers (e.g., trays, kits, boxes, and crash carts) shall be prepared in consultation with the medical staff.

MAINTENANCE OF CONTAINERS

The pharmacy shall maintain medications in the containers at predetermined (par) levels.

SYSTEMS TO ASSURE SECURITY AND INTEGRITY OF EMERGENCY MEDICATIONS

A breakable seal or other system designed to assure the continued security and integrity of the contents between periods of use may be used.

Medications are stored in sealed or locked containers, are stored in a locked room, or are under constant surveillance.

CONTROLLING EMERGENCY MEDICATION SUPPLIES – INSPECTION PROCEDURE

The pharmacy shall establish a monitoring and inspection system to ensure the integrity and ready availability of emergency medication supplies.

Pharmacy Inspections – The pharmacy or the pharmacy’s designee shall inspect emergency medication containers routinely monthly and after each use to remove deteriorated and outdated medications and assure completeness of content. The inspection shall assure that all items required for immediate availability are actually present and are in usable condition.

NOTIFYING THE PHARMACY WHEN MEDICATIONS ARE USED (OR CONTAINERS OPENED)

Departments, units, and users shall notify the pharmacy when:

- The container is opened or the seal is broken
- Emergency medications have been used
- Medications are missing
- Other irregularities are identified or suspected

REPLACEMENT OF MEDICATIONS

The pharmacy shall replace missing, expired, and unusable medications as soon as possible.

If an exchange cart/tray process is used, a complete container will be available in the patient care or procedural unit prior to taking the used cart/tray away to ensure availability of emergency medications at all times.

FINAL CHECK OF EMERGENCY MEDICATIONS

The pharmacy shall perform a final check of emergency medications and, if applicable, seal the container.

Dantrolene Medication guidance:

Medications and supplies for treating malignant hyperthermia shall be readily available. Dantrolene must be available for all anesthetizing locations within 10 minutes of the decision to treat for malignant hyperthermia. Dantrolene must be available for all locations where malignant hyperthermia trigger agents are used.

Malignant Hyperthermia supplies and medications are all located in the main hospital Operating Room area.

EMERGENCY SUPPLY OF DANTROLENE SODIUM

An emergency supply of dantrolene sodium shall be included with the medications used for treating malignant hyperthermia.

STERILE WATER FOR INJECTION

Sterile water for injection (without preservatives) for reconstituting dantrolene sodium shall be kept with the dantrolene sodium.

APPENDIX

APPENDIX A - ADULT CRASH CART

DRAWER 1	
1. 1 - 2 OZ catheter Syringe	10. 2-Rolls EKG Paper
2. 1-Salem Sump 16 Fr. NG tubes	11. #6 & #8 Shiley cuffed tracheotomy
3. 1-Bite Block	12. Saline Pads
4. Nasal Airway	13. Electrodes
• 1 each, Sizes: 24Fr, 26Fr, 28Fr, 30Fr, 32Fr	14. Face Shield
5. 1-Tongue Blades	15. Oral Airway
6. 1-Y Connectors	• 1 each, Sizes: 80mm (8), 90mm (9), 100mm (10), 110mm (11), 120mm (12)
7. 1-Oxygen Mask	16. 5 Yellow breakaway locks
8. 1-Nasal Cannula	17. Bougey intubation stylet
9. 2-ABG Kits	

DRAWER 2	DRAWER 3
1. 2-Laryngoscope Handles	1. 1-Yankauer Suction Catheter
• Miller 2 & 3 Laryngoscope Blade	2. 2-14 Fr. Suction Catheter
• Macintosh 3 & 4 Laryngoscope Blade	3. 4-Primary Tubing's
2. oral/nasal tracheal intubation tube.	4. 2-Dial-A-Flow
• 2 each, Sizes: 6.0, 6.5, 7.0, 7.5; 8.0, 8.5, 9.0	5. 2-4 Way stopcock with Luerlock Device
3. 1-Xylocaine Jelly	6. 2-Braun Pump Tubing's
4. 1-10ml Luer-lock Syringe	
5. 1-Adult Stylet	
6. 1-Adult Magill Forcep	
7. 2-Endotracheal Tube holders	
8. #3, #4, #5 LMA's	

DRAWER 4	
1. 1 IV Start kits	10. 5- 18 gauge IV Cath
2. 2- 4 x 4 Gauze Sponges	11. 5-20 gauge IV Cath
3. 3- 2 x 2 Gauze Sponges	12. 5-22 Gauge IV Cath
4. 15-Alcohol Wipes	13. Protected Needles: 5 each – 18G, 22G, 25G
5. 5-5ml syringes	14. 1 Razor
6. 10 -10ml syringes	15. 1-stethoscope
7. 1- inch Durapore Tape	16. 2-Veni-gard
8. 1-2 inch Transpore Tape	17. 1-Tourniquet
9. 1-2 inch Durapore Tape	18. 1-#14 Gauge IV Cath
	19. 3-way stop cock

DRAWER 5	
Refer to Pharmacy Supplied List on Cart	
TOP SHELF	SIDE OF CART
1. Life Pak 2. Electrode Cable 3. Suction machine 4. Box Gloves 5. Yankauer Suction 6. 1 – Quick Combo Redi-Pak	1. Adult Ambu Bag w/CO2 indicator 2. CPR Board 3. Code Sheets 4. Oxygen Tank with Nipple
BOTTOM SHELF	IV SOLUTIONS
1. 1-Multi-Med Catheter Tray 2. 1-8.5 FR. Percutaneous Sheath Introducer Kit 3. 1-Long Armboard 4. 1-Short Armboard	1. 2-500ml D5W 2. 1-250ml D5W 3. 2-500ml NS 4. 2-250ml NS 5. 1-Premix Dopamine 800mg in 500ml D5W 6. 1-Premix Lidocaine 2gm in 500ml D5W 7. 1 – Premix Dobutamine 250mg / 250ml

ADDENDUM B - PEDIATRIC EMERGENCY CART

TOP SHELF	ON SIDE AND BACK OF CART
1. O ² flowmeter with nipple for wall 2. Suction Machine 3. 2 packages of Pediatric Electrodes 4. Saline Pads 5. Pediatric Paddles for Defibrillation 6. Co ² detector 7. Broselow Tape 8. Yankuer suction 9. 2 packages PED QUICK Combo PADS 10. 1 roll of printer paper 11. 1 LifePak 20 12. O2 sat cable 13. Code Sheets 14. Inventory check list	1. O ² tank with nipple 2. CPR Board 3. Ambu Bag- pediatric and infant 4. Sharps container

PEDI DRAWER 1	
Medications	Refer to Pharmacy Supplied List on Cart
	5 Yellow Breakaway locks Code Role Lanyards
MODULES DRAWER 2-7 ARE NOT TO BE OPENED –	EXPIRATION DATE ON OUTSIDE OF PACKAGE

PEDI DRAWER 2 RED/PINK

Intubation Module

- Laryngoscope Blade, Size Miller #1
- 3.5 uncuffed ET tube
- 3.5 cuffed ET Tube (2)
- ET Stylet
- 8 French Suction Catheter (2)
- 8 French Nasogastric Tube
- 36 inch Adhesive Tape
- Lubricating Jelly Packet
- 3x3 gauze pad

Oxygen Delivery Module

- 5 cm Oral airway
- Pediatric NRB Mask

IV Delivery Module

- 22 gauge IV catheter
- 24 gauge IV catheter
- IV prep kit
- Extension Set

Introsseus Module

- 15 gauge Adjustable Length Sternal Iliac Aspiration Needle
- Extension Set

PEDI DRAWER 3 PURPLE

Intubation Module

- Laryngoscope Blade, Size Miller #1
- 4.0 uncuffed ET tube
- 4.0 cuffed ET Tube (2)
- ET Stylet
- 10 French Suction Catheter (2)
- 8 French Nasogastric Tube
- 36 inch Adhesive Tape
- Lubricating Jelly Packet
- 3x3 gauze pad

Oxygen Delivery Module

- 6 cm Oral airway
- Pediatric NRB Mask

IV Delivery Module

- 20 gauge IV catheter
- 24 gauge IV catheter
- IV prep kit
- Extension Set

Introsseus Module

- 15 gauge Adjustable Length Sternal Iliac Aspiration Needle
- Extension Set

PEDI DRAWER 4 YELLOW

Intubation Module

- Laryngoscope Blade, Size Miller #2
- 4.5 uncuffed ET tube
- 4.5 cuffed ET Tube (2)
- ET Stylet
- 10 French Suction Catheter (2)
- 10 French Nasogastric Tube
- 36 inch Adhesive Tape
- Lubricating Jelly Packet
- 3x3 gauze pad

Oxygen Delivery Module

- 6 cm Oral airway
- Pediatric NRB Mask

IV Delivery Module

- 18 gauge IV catheter
- 22 gauge IV catheter
- IV prep kit
- Extension Set

Introsseus Module

- 15 gauge Adjustable Length Sternal Iliac Aspiration Needle
- Extension Set

PEDI DRAWER 5 WHITE

Intubation Module

- Laryngoscope Blade, Size Miller #2
- 5.0 uncuffed ET tube
- 5.0 cuffed ET Tube (2)
- ET Stylet
- 10 French Suction Catheter (2)
- 10 French Nasogastric Tube
- 36 inch Adhesive Tape
- Lubricating Jelly Packet
- 3x3 gauze pad

Oxygen Delivery Module

- 7 cm Oral airway
- Pediatric NRB Mask

IV Delivery Module

- 20 gauge IV catheter
- 18 gauge IV catheter
- IV prep kit
- Extension Set

Introsseus Module

- 15 gauge Adjustable Length Sternal Iliac Aspiration Needle
- Extension Set

PEDI DRAWER 6 BLUE

Intubation Module

- Laryngoscope Blade, Size Miller #2
- Laryngoscope Blade, Size Mac #2
- 5.5 uncuffed ET tube
- 5.5 cuffed ET Tube (2)
- ET Stylet
- 10 French Suction Catheter (2)
- 10 French Nasogastric Tube
- 36 inch Adhesive Tape
- Lubricating Jelly Packet
- 3x3 gauze pad

Oxygen Delivery Module

- 7 cm Oral airway
- Pediatric NRB Mask

IV Delivery Module

- 20 gauge IV catheter
- 18 gauge IV catheter
- IV prep kit
- Extension Set

Introsseus Module

- 15 gauge Adjustable Length Sternal Iliac Aspiration Needle
- Extension Set

PEDI DRAWER 7 ORANGE

Intubation Module

- Laryngoscope Blade, Size Miller #2
- Laryngoscope Blade, Size Mac #2
- 6.0 mm cuffed ET tube
- ET Stylet
- 10 French Suction Catheter (2)
- 14 French Nasogastric Tube
- Syringe
- 36 inch Adhesive Tape
- Lubricating Jelly Packet
- 3x3 gauze pad

Oxygen Delivery Module

- 8 cm Oral airway
- Pediatric NRB Mask

IV Delivery Module

- 20 gauge IV catheter
- 18 gauge IV catheter
- IV prep kit
- Extension Set

Introsseus Module

- 15 gauge Adjustable Length Sternal Iliac Aspiration Needle
- Extension Set

PEDI DRAWER 8 GREEN

Intubation Module

- Laryngoscope Blade, Size Miller #3
- Laryngoscope Blade, Size Mac #3
- 6.5 cuffed ET tube
- ET Stylet
- 10 French Suction Catheter
- 12 French Suction Catheter
- 18 French Nasogastric Tube
- Syringe
- 36 inch Adhesive Tape
- Lubricating Jelly Packet
- 3x3 gauze pad

Oxygen Delivery Module

- 8 cm Oral airway
- Pediatric NRB Mask

IV Delivery Module

- 20 gauge IV catheter
- 18 gauge IV catheter
- IV prep kit
- Extension Set

Introsseus Module

- 15 gauge Adjustable Length Sternal Iliac Aspiration Needle
- Extension Set

PEDI BOTTOM SHELF

1-Pediatric Stethoscope	3-bp cuffs of varying sizes
2-Abg Kits	Bite Block
1 each-Pediatric Tracheostomy tubes size 3.0, 3.5, 4.0	Xylocaine Jelly
2- batteries for Laryngoscope handles	60 ml catheter syringe
1-Small Armboard and 1 infant armboard	10 Alcohol wipes
2- 500 ml D5W	10 Band-Aids
1-250 ml D5W	5 Safety Pins
2-500 ml NS	1-2 inch gauze roll
2-250 ml NS	1-4 inch gauze roll
1 - Dopamine 800mg/500ml D5W	5-5 ml syringes
1- 2gm Lidocaine/500 ml D5W (Premixed)	5-Tongue Blades
1- disposal laryngoscope handles/blade for Miller 1, 2, 3 and Macintosh 2 and 3	Tourniquet (inside IV start kit)
1-metriset add-on Burette Set	Extra sealed supplies:
1-10ml syringe	Magill forceps, small and large
ET tape	60ml syringe
5- 1ml syringes	5-5ml syringes
5 needless connectors	1 bite block
1-ng connector	5- locking blunt cannulas
2-IV pump tubing	5- IV plugs
	3-way stopcock

ADULT CRASH CART MEDICATIONS

MEDICATION NAME	PAR LEVEL	EXP. DATE
Adenosine injection 3mg/ml (2ml vial)	5	
Amiodarone injection 50mg/ml (3ml vial)	5	
Atropine injection 0.1mg/ml (10 ml syringe)	4	
Calcium Chloride 10% injection 100mg/ml (10ml syringe)	2	
Dextrose 50% injection 0.5gm/ml (50ml syringe)	1	
Diphenhydramine 50mg/ml vial	1	
Epinephrine injection 1:1000 (1mg/ml) (30ml vial)	1	
Epinephrine injection 1:10,000 (0.1mg/ml) (10ml syringe)	6	
Flumazenil injection 0.1mg/ml (5ml vial)	1	
Glucagon 1mg vial	1	
Lidocaine 20mg/ml (5ml syringe)	3	
Magnesium 40mg/ml (4gm per 100ml bag)	1	
Methylprednisolone 125mg/ml vial	2	
Naloxone 0.4mg/ml (1ml ampule)	4	
Nitroglycerine 5mg/ml vial (<i>dilute first in D5W 500ml</i>)	1	
Norepinephrine 1mg/ml 4ml vial (<i>dilute first in D5W 500ml</i>)	1	
Procainamide 100mg/ml (10ml vial)	2	
Sodium Bicarbonate 8.4% (50meq syringe)	2	
Sodium Chloride (10ml vial)	2	
Sterile Water (10ml vial)	2	
Vasopressin 20 units/ml (or 10 units/0.5ml)	2	
Verapamil 5mg/2ml vial	2	

IV SOLUTIONS: LOCATED IN BOTTOM DRAWER

D5W 500ML (2)	DOPAMINE 1.6MG/ML (800MG/500ML) BAG (1) (NEED LASA STICKER)
D5W 250ML (1)	LIDOCAINE 4MG/ML (2000MG/500ML) BAG (1)
NS 500ML (2)	DOBUTAMINE 1MG/ML (250MG/250ML) BAG (1) (NEED LASA STICKER)
NS 250ML (2)	

*Do not cover Drug name and expiration date with stickers***PEDIATRIC CRASH CART MEDICATIONS**

MEDICATION NAME	PAR LEVEL
Adenosine injection 3mg/ml (2ml vial)	2
Amiodarone injection 50mg/ml (3ml vial)	2
Atropine injection 0.1mg/ml (10ml syringe)	4
Calcium Chloride 10% injection 100mg/ml (10ml syringe)	2
Dextrose 25% injection (0.25gm/ml syringe)	2
Dextrose 50% injection (0.5gm/ml syringe)	2
Epinephrine injection 1:1000 (1mg/ml) (30ml vial)	1
Epinephrine injection 1:10,000 (0.1mg/ml) (10ml syringe)	4
Flumazenil injection 0.1mg/ml (5ml vial)	1
Glucagon 1mg vial	1
Lidocaine 20mg/ml (5ml syringe)	2
Magnesium 40mg/ml (4gm per 100ml bag)	1
Mannitol 25% injection (12.5gm/50ml) vial	2
Naloxone 0.4mg/ml (1ml amp)	4
Norepinephrine 1mg/ml (4ml vial)	2
Phenytoin 100mg/2ml vial	2
Sodium Chloride 0.9% (10ml vial)	2
Sterile water (10ml vial)	2
Sodium Bicarbonate 4.2% 0.5meq/ml (10ml syringe)	4

IV SOLUTIONS: LOCATED IN BOTTOM DRAWER

D5W 500ML (2)	DOPAMINE 1.6MG/ML (800MG/500ML) BAG (1)
D5W 250ML (1)	LIDOCAINE 4MG/ML (2000MG/500ML) BAG (1)
NS 500ML (2)	
NS 250ML (2)	

Do not cover Drug name and expiration date with stickers



Crash Cart Checking Record

Location: _____
 Month _____ Yr _____

**CART AND ACCESSORY EQUIPMENT MUST BE CHECKED
 ACCORDING TO THE FOLLOWING:**

DAILY:

- Integrity of the seal must be verified
- Check outside equipment
- A charge/discharge per manufacturer's recommended joules with defibrillator will be done (unplugged)

WEEKLY: Notify Biomedical Engineer of any problems with defibrillator performance
FIRST BUSINESS DAY OF MONTH

- Nursing will check entire contents of cart, including supplies, for expiration dates
- Respiratory Therapy will check content and functionality of respiratory equipment (O₂ tanks, tubing, ambu bag)

MONTHLY: Pharmacy will verify content and expiration of medications

**BY MY SIGNATURE ON THIS FORM,
 I CERTIFY THE FOLLOWING:**

- Emergency crash cart is sealed and all items are present
- Equipment checks have been performed per procedure (suction equipment, defibrillator)
- Missing, unusable (expired or broken) or malfunctioning items and equipment, have been replaced
- Oxygen tank is present and contains greater than 500 PSI
- Backboard is present

				SEAL CHANGE				
Date	DEFIB ✓	Seal #	Signature	DATE	Seal #	Seal Change Reason	Signature	
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
21						Monthly Check		
22						Pharmacist		
23						Respiratory		
24						Nursing		
25				KEY for Seal Change: CB = Code Blue MC = Monthly Check SE = Supply/Equipment Used or Replaced Med = Medications Used / Replaced CV = Cardioversion				
26								
27								
28								
29								
30								
31								

REFERENCES

Nurse Managers, Pharmacy Department, Respiratory Therapy

Document ID	10379	Document Status	In preparation
Department	Pharmacy	Department Director	Nguyen, Khiem
Document Owner	Nguyen, Khiem	Next Review Date	
Original Effective Date	04/26/2021		
Revised	[03/01/2008], [12/01/2009], [05/01/2010], [09/01/2012], [08/01/2013], [03/01/2014], [05/01/2014], [07/01/2014], [02/01/2015], [07/01/2018], [09/01/2018], [04/01/2019], [05/01/2019], [01/01/2020], [04/28/2021 Rev. 0]		
Reviewed	[07/01/2010], [12/01/2012], [06/01/2016]		
Attachments: (REFERENCED BY THIS DOCUMENT)			
Other Documents: (WHICH REFERENCE THIS DOCUMENT)			

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San Benito Health Care District
Board of Directors Meeting
July , 2023
Chief Clinical Officer Report

➤ **Emergency Department:**

- Visits 2,036 Admitted 103
- Stroke 5
- Left Without being seen

➤ **Med / Surg** ADC 10.4

➤ **ICU** ADC 0.9

➤ **OB** Deliveries 24 Outpatients Visits 26

- **OR** June Cases: inpatient 33 Outpatient 8 Total ASC cases: 149
- GI Total: 87



To: San Benito Health Care District Board of Directors
From: Amy Breen-Lema, Director, Provider Services & Clinic Operations
Date: August 14, 2023
Re: All Clinics – July 2023

2023 Rural Health and Specialty clinics' visit volumes

Total visits in all outpatient clinics = 4,279

Orthopedic Specialty	294
Multi-Specialty	613
Sunset Clinic	767
Surgery & Primary Care Clinic	32
San Juan Bautista	288
1st Street	613
4th Street	1081
Barragan	591

- The District's newly-licensed clinic, *Hazel Hawkins Primary Care & Surgical Specialty Center* opened July 5th. The clinic currently offers outpatient general surgery and gastroenterology consultations & follow-up services, and will soon offer primary care services as well. The clinic will undergo a full rural health clinic certification survey within a few months making it the 8th clinic in our outpatient network.
- We are pleased to welcome full-time family medicine physician assistant Mark Villegas to our team. Mark will start in early August and offer primary care & family medicine services to patients of all ages.



Hazel Hawkins
MEMORIAL HOSPITAL

Mabie Southside / Mabie Northside SNFs
Board Report – August 2023

To: San Benito Health Care District Board of Directors

From: Sherry Hua, RN, MSN, Director Of Nursing, Skilled Nursing Facility

Management Activities:

1. SNF’s have been working hard to keep up with high census.

1. Census Statistics: July 2023

Southside	2023	Northside	2023
Total Number of Admissions	18	Total Number of Admissions	11
Number of Transfers from HHH	15	Number of Transfers from HHH	11
Number of Transfers to HHH	9	Number of Transfers to HHH	1
Number of Deaths	1	Number of Deaths	3
Number of Discharges	16	Number of Discharges	3
Total Discharges	17	Total Discharges	6
Total Census Days	1,474	Total Census Days	1449

Note: Transfers are included in the number of admissions and discharges. Deaths are included in the number of discharges. Total census excludes bed hold days.

2. Total Admissions: July 2023

Southside	From	Payor	Northside	From	Payor
7	HMH	Medicare	7	HMH	Medicare
1	Re-Admit HMH	Medicare	1	HMH	Bridge
5	Re-Admit HMH	Medi-Cal	1	HMH	Blue Cross Blue Shield
1	Re-Admit SVM	Medi-Cal	2	HMH	Medi-Cal
1	Re-Admit Stanford	Medicare			
2	HMH	MC Medi-Cal			
1	Home	Medi-Cal			
18 Total			11 Total		

3. Total Discharges by Payor: July 2023

Southside	2023	Northside	2023
Medicare	7	Medicare	2

Medicare MC	0	Medicare MC	0
Medical	9	Medical	4 (3 Expired)
Medi-Cal MC	1	Medi-Cal MC	0
Private (self-pay)	0	Private (self-pay)	0
Commercial	0	Commercial	0
Total	17	Total	6

4. Total Patient Days by Payor: July 2023

Southside	2023	Northside	2023
Medicare	191	Medicare	126
Medicare MC	0	Medicare MC	0
Medical	1202	Medical	1236
Medi-Cal MC	19	Medi-Cal MC	0
Private (self-pay)	62	Private (self-pay)	62
Insurance	0	Commercial	23
Bed Hold / LOA	25	Bed Hold / LOA	2
Total	1499	Total	1449
Average Daily Census	48.35	Average Daily Census	46.74



To: San Benito Health Care District Board of Directors
From: Bernadette Enderez, Director of Diagnostic Services
Date: August 2023
Re: Laboratory and Diagnostic Imaging



Updates:

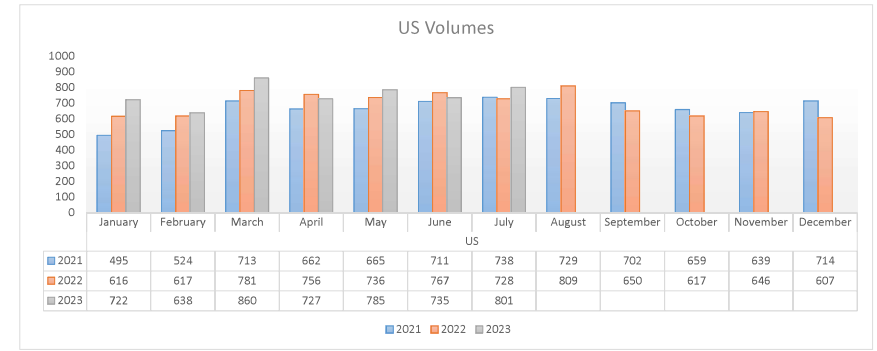
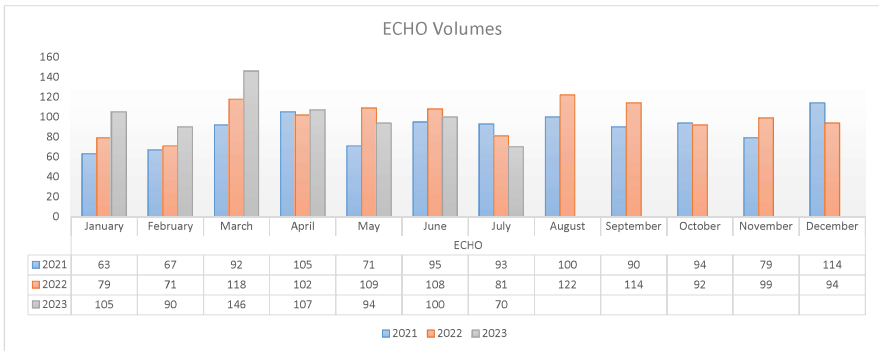
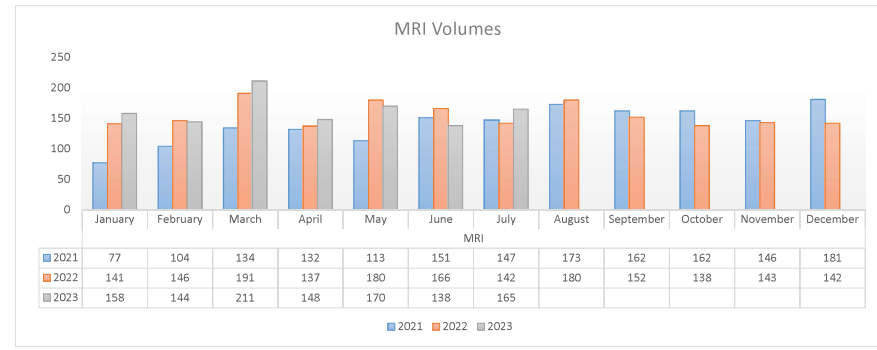
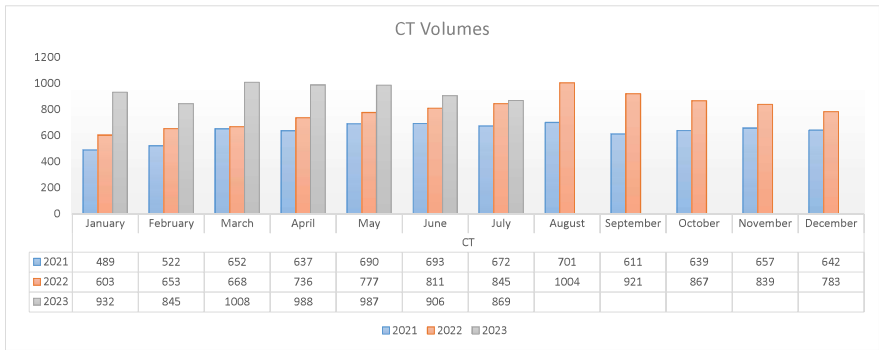
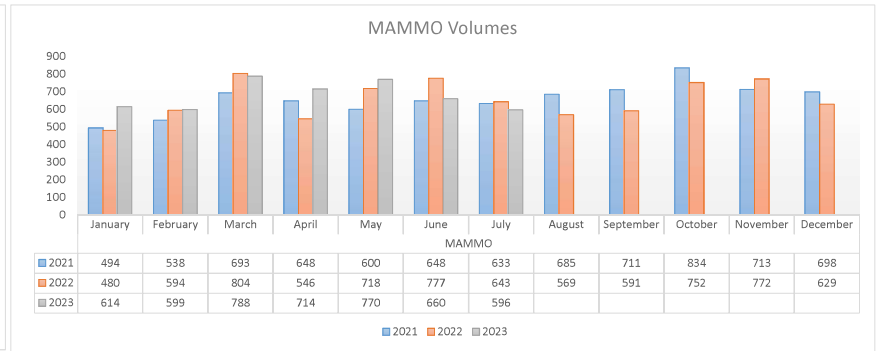
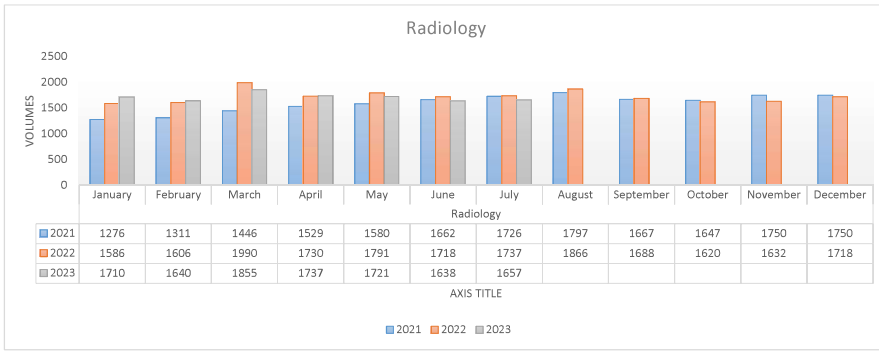
Laboratory

1. Service/Outreach
 - The following clinics started electronic laboratory test ordering:

Barragan clinic	Sunset clinic	SJB clinic
First Street	MSC	Ortho
2. Quality Assurance/Performance Improvement Activities
 - Currently working on action items related to the TJC laboratory survey
 - New Cepheid analyzer to start validation 8/22/23
 - New STAGO analyzer projected to be delivered 11/2023
3. Laboratory Statistics
 - See attached report

Diagnostic Imaging

1. Service/Outreach
 - Due to staffing shortage, the Diagnostic Center next to Ortho clinic is still closed.
2. Quality Assurance/Performance Improvement Activities
 - Policy and protocols review and revision
3. Diagnostic Imaging Statistics
 - See attached report



LABORATORY STATISTICS

MAIN LABORATORY													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
2021	891	739	1020	939	955	1058	1080	1272	1563	1504	1491	1584	14096
2022	2035	1336	1506	1323	1277	1165	1112	1252	1092	1257	1186	1209	15750
2023	1187	1236	1394	1125	1173	1112	1092						8319

HHH EMPLOYEE HEALTH WEEKLY COVID TEST (INCLUDING SNF_NEW SNF LOCATION ONLY)													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
2021	1888	1566	1443	1110	1031	1122	1045	1656	2143	1695	1842	2458	18999
2022	2987	2136	1915	1767	2219	2546	2244	2355	2066	1046	1144	1596	24021
2023	595	114	609	880	28	15	24						2265

MC CRAY LAB													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
2021	1263	1274	1394	1125	1119	1193	1165	1248	1192	1187	1100	1099	14359
2022	1230	1044	1206	1069	1033	1025	1061	1130	866	975	810	752	12201
2023	1038	931	1167	975	1054	930	1009						7104

SUNNYSLOPE LAB													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
2021	699	601	624	590	479	636	553	613	580	574	462	487	6898
2022	536	511	632	521	467	488	495	558	423	402	368	186	5587
2023	511	486	551	418	516	458	427						3367

SJB AND 4TH STREET													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
2021						41	64	55	29	45	27	37	353
2022	63	54	82	72	63	58	23	61	82	82	63	53	756
2023	74	44	83	67	63	81	77						489

ER AND ASC													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
2021	1628	1162	1126	1077	1083	1089	1174	1415	1272	1139	1059	1279	14503
2022	1434	839	1040	993	1328	1335	1111	1198	1231	1237	1614	1604	14964
2023	1268	1298	1453	1448	1482	1234	1256						9439

TOTAL OUTPATIENT													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
2021	6369	5342	5607	4841	4708	5162	5072	6233	6795	6126	5991	6962	69208
2022	8285	5920	6381	5745	6387	6617	6046	6554	5760	4999	5185	5400	73279
2023	4673	4109	5257	4913	4316	3830	3885						30983

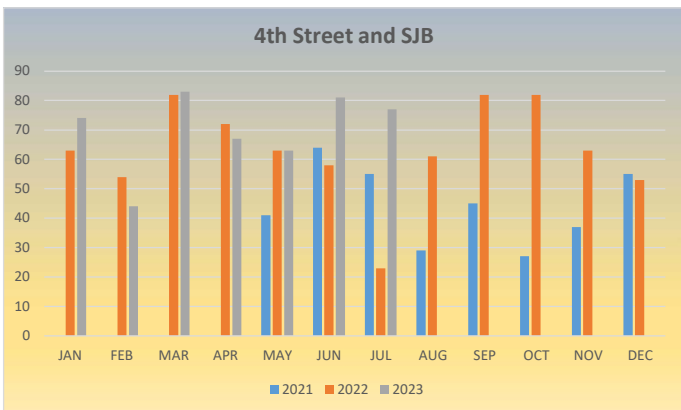
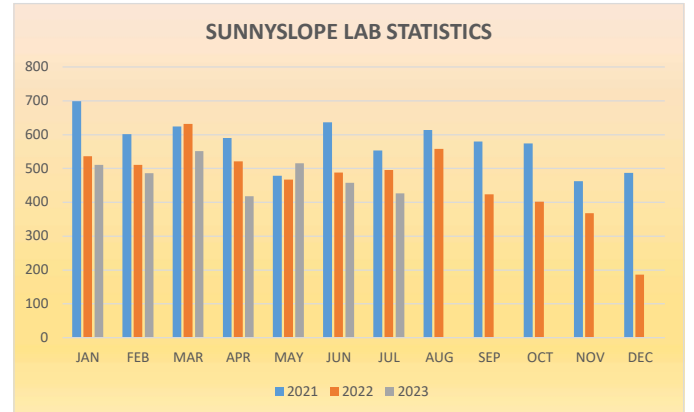
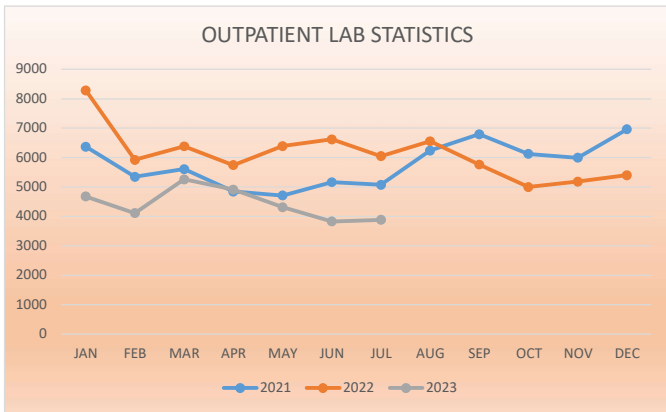
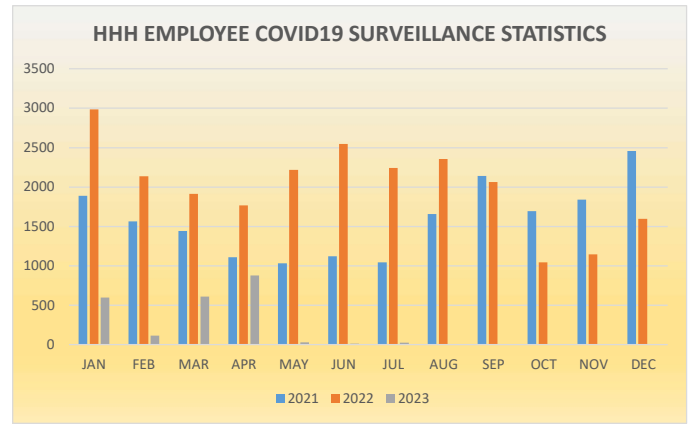
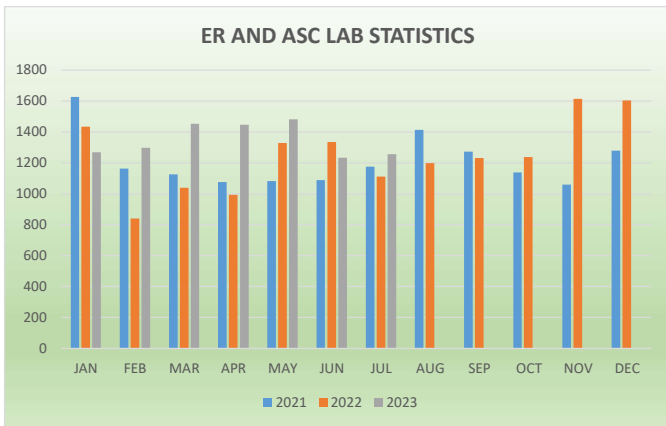
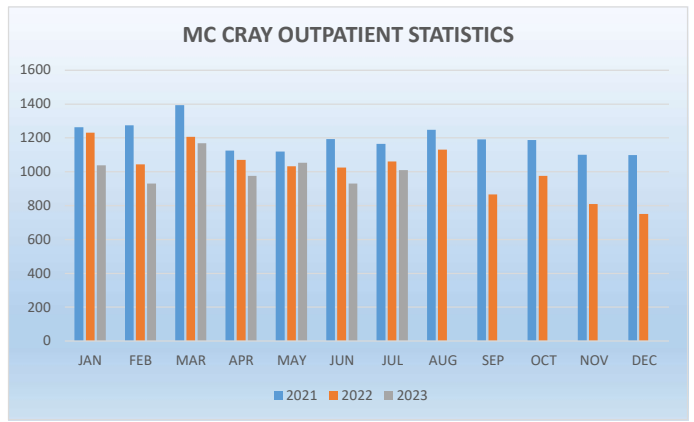
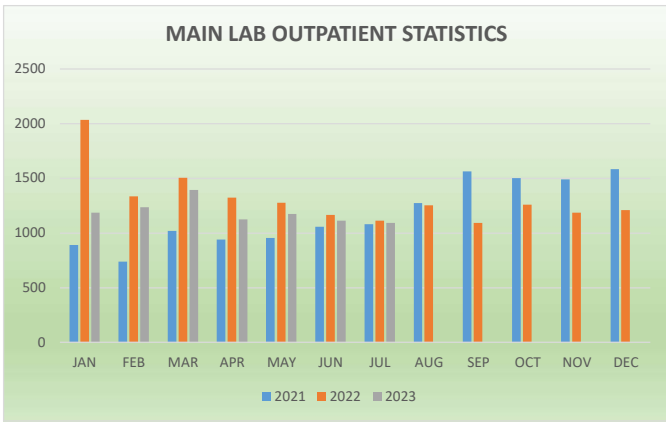
TOTAL INPATIENT (ICU,MEDSURG,OB,SNF)													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
2021	1116	1053	603	654	705	751	761	803	791	986	874	1301	10398
2022	1311	1102	945	678	963	1258	1321	1421	1145	973	1066	1205	13388
2023	816	603	950	710	591	347	214						4231



LABORATORY DEPARTMENT
REQUISITION STATISTICS

Bernadette Enderez
Director of Laboratory Services

Michael McGinnis, M.D.
Medical Director



LABORATORY DEPARTMENT

OUTPATIENT STATISTICS

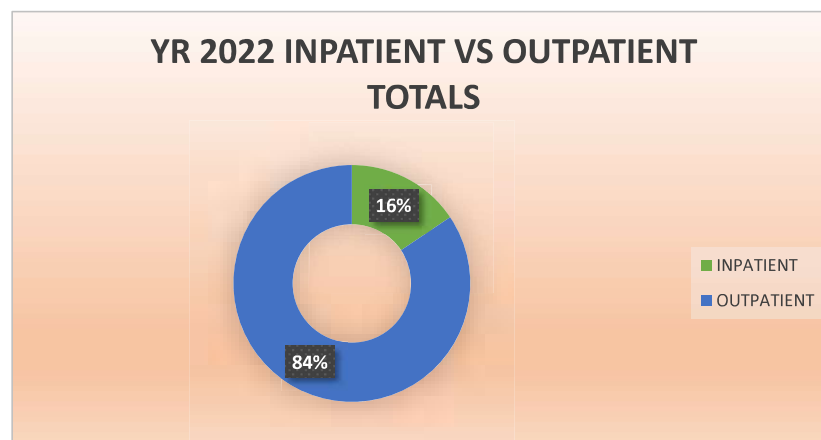
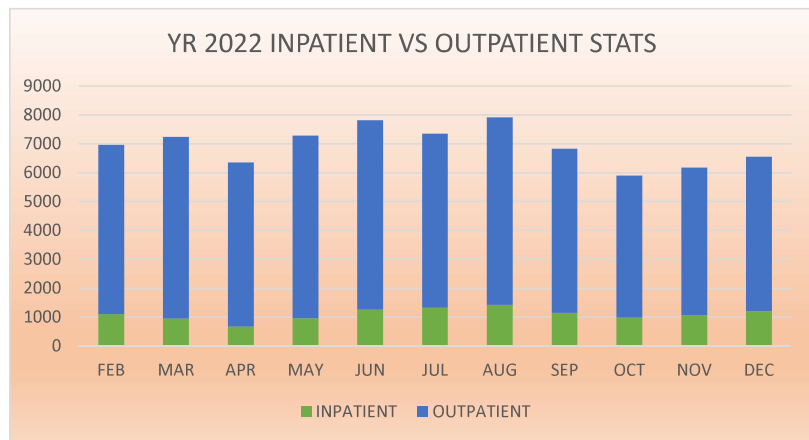
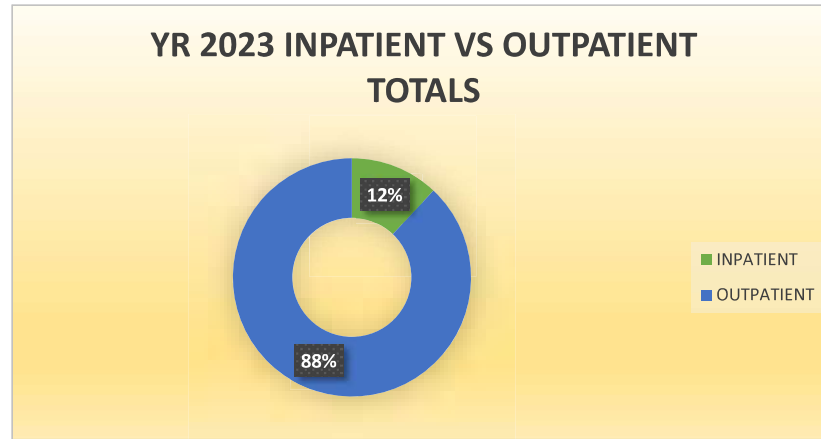
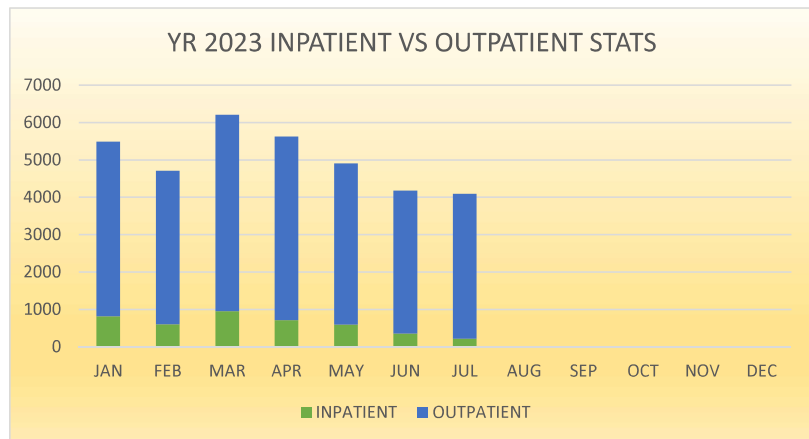
Bernadette Enderez
Director of Laboratory Services

Michael McGinnis, M.D.
Medical Director

INPATIENT VS OUTPATIENT LABORATORY STATISTICS

YR 2023														
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	
INPATIENT	816	603	950	710	591	347	214						4231	INPATIENT
OUTPATIENT	4673	4109	5257	4913	4316	3830	3885						30983	OUTPATIENT

YR 2022														
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	
INPATIENT	1311	1102	945	678	963	1258	1321	1421	1145	973	1066	1205	13388	INPATIENT
OUTPATIENT	8222	5866	6299	5673	6324	6559	6023	6493	5678	4917	5112	5347	72513	OUTPATIENT





TO: San Benito Health Care District Board of Directors
FROM: Liz Sparling, Foundation Director
DATE: August 2023
RE: Foundation Report

The Hazel Hawkins Hospital Foundation Board of Trustees met on August 10. Mindy Trites, LVN and the site nurse of Hazel Hawkins Primary Care & Surgical Specialty Center gave a presentation on a request for an EKG Machine at the new HHMH Clinic which is located across the street from the Hospital.

Financial Report for July

1. Income	\$	13,659.96
2. Expenses	\$	0.00
3. New Donors		1
4. Total Donations		134

Allocations



















1. \$4.71 for the balance of three Hi Low Beds for SNFs (balance over quote originally presented)
2. \$9,114.52 for an EKG Machine for the Hazel Hawkins Primary Care & Surgical Specialty Center
3. \$10,634.95 of Community Foundation Endowment Unrestricted Funds for 2023 Fundraising Campaign

Directors Report

- There was an additional cost to install our new sterilizer and I submitted a request for funds from California Hospital Association and received the install fee of \$2093.
- Hospice Giving Foundation final grant report has been submitted on July 31st.
- Working on gathering all the information for our audit.
- We have Board Members terming out at the end of the year and we need to start thinking of potential Board Members. Seth Muenzer, Jill Pagaran and Tisi Stewart are terming out and Nan will finish her first term. The nominating committee will meet before the next Foundation Board Meeting.
- The majority of our work has been working on our Fundraising Campaign- “Invest in the future of San Benito County Healthcare, We deserve it!” Our Committee has been working hard cultivating relationships in the community.
- The Dinner Dance date for this year’s fundraiser is November 4th. I have confirmed it with the Inn. Please mark your calendars.

MARKETING

• Social Media Posts

	We're Hiring! Join our team of nursing and clinical professionals. Fri, Aug 11	Post reach 539	Engagement 30
	Another compliment for our Barragan Family Healthcare & Diabetes Center. Thank you for the excellent care you provide to our patients! Thu, Aug 10	Post reach 889	Engagement 193
	Join us for our annual World Breastfeeding Celebration drive through event. Thursday, August 24 10:30 am - 12 noon HHH Women's Center Thu, Aug 10	Post reach 239	Engagement 7
	HHMH Physicians share letter of support for Hospital Administrative Team. Mon, Aug 7	Post reach 240	Engagement 39
	As part of our community outreach, our ER/Med-Surg/ICU Director, Shanell, spends time at the Jovenes de Antano Senior Center providing health information and safety tips to our seniors. Thank you Shanell for helping to keep our community healthy and safe. Fri, Aug 4	Post reach 1,133	Engagement 529
	Special Board Meeting Notice: (Regarding Letter of Intent) Monday, August 7, 5:00 pm The meeting will take place in the HHH Women's Center - 2nd Floor, Horizon Room Click link for Board agenda and packet: Thu, Aug 3	Post reach 854	Engagement 252
	SAN BENITO HEALTH CARE DISTRICT RECEIVES LETTER OF INTENT FOR HAZEL HAWKINS MEMORIAL HOSPITAL The San Benito Health Care District (District) and Hazel Hawkins Memorial Hospital (HHMH) announced today that they received a Letter of Intent (LOI) from American Advanced Management (AAM) paving the way for discussions... Thu, Aug 3	Post reach 252	Engagement 62
	Thank you Vicky! We are proud of the excellent care our team provides to the community. Tue, Aug 1	Post reach 817	Engagement 214
	Congratulations to Taurya Barrera and her daughters El and Zoey for their brilliant performances in the San Benito Stage Company's production of Footloose. Taurya is our IT Clinical Analyst by day and an accomplished actress after hours. See a clip here: https://www.facebook.com/SanBenitoStageCompany/videos/1227789347881811 Mon, Jul 31	Post reach 773	Engagement 196
	Ashley Wang, a volunteer at Mabie Southside, is a dedicated volunteer who enjoys helping our residents with activities including reading to them, walking with them, assisting with meals, helping with art projects, and is also incredibly helpful to the staff. Her love for the residents inspired her to create this beautiful artwork that will now... Fri, Jul 28	Post reach 3,488	Engagement 361
	This week we bid farewell to Kathi Hart our beloved Medical Staff Credentials Coordinator. She retired after 15 years of service to HHH not only as an employee but also as a volunteer. We wish you the very best in your retirement! Thu, Jul 27	Post reach 1,247	Engagement 644
	We're celebrating our commitment to excellence! Congratulations to our Lab staff for their completion of another successful Joint Commission Accreditation survey. Thu, Jul 27	Post reach 1,209	Engagement 492
	We're hiring CNA's! Join our amazing team of certified nursing assistants dedicated to the residents in our Skilled Nursing Facilities. Tue, Jul 25	Post reach 843	Engagement 58
	Hazel Hawkins Memorial Hospital was recently featured on Spencer Christian's After the Weather Podcast. Take a listen here: Fri, Jul 21	Post reach 1,554	Engagement 543
	https://sanbenito.com/letter-hospital-board-has-full-confidence-in-ceo/ Tue, Jul 18	Post reach 538	Engagement 182
	Engineers and scientists union, Hazel Hawkins reach new contract. Read more here: Tue, Jul 18	Post reach 612	Engagement 107
	We're hiring! Join our team of nursing professionals! Tue, Jul 18	Post reach 1,117	Engagement 89
	We're hiring! Join our team of nursing professionals! Tue, Jul 11	Post reach 1,462	Engagement 295

EMPLOYEE ENGAGEMENT

Employees:

- Hazel's Headlines
- Special Edition Hazel's Headlines with Town Hall synopsis

MEDIA

Public:

Working with Marcus Young from townKRYER PR agency on proactive PR:

- Answered media requests from KSBW, KION, Univision, Becker's Review, Free Lance & BenitoLink
- Press Releases
 - SBHCD Receives Letter of Intent from American Advanced Management, Inc.
 - ESC Local 20 Unanimously Endorses New Contract with HHMH
- Publicized our podcast hosted by Spencer Christian from ABC 7 "Rural Hospitals on Life Support"

COST SAVING MEASURES

- Working with departments to produce & print forms in-house



San Benito Health Care District

**MEDICAL EXECUTIVE COMMITTEE
CREDENTIALS REPORT
AUGUST 16, 2023**

NEW APPOINTMENTS

PRACTITIONER	DEPT/SERVICE	STATUS REQUEST	PROCTOR ASSIGNED
Binder, Kyle W, MD	Medicine/Teleneurology	Privs without membership	
Carey, Kathleen MD	Radiology/Teleradiology (statrad)	Privs without membership	
Eisinger, Philip DO	Radiology/Teleradiology (statrad)	Privs without membership	
Iranmanesh, Elhaam MD	Medicine/Teleneurology	Privs without membership	
Jeon, Sung MD	Medicine/Teleneurology	Privs without membership	
Owoyele, Adeyinka MD	Radiology/Teleradiology (statrad)	Privs without membership	

REAPPOINTMENTS - none

CHANGE OF STATUS

PRACTITIONER	DEPT/SERVICE	CHANGE
Nguyen-Ngo, Hue DO	Perinatal/Pediatrics	Affiliate to Active

ADDITIONAL PRIVILEGES

PRACTITIONER	FIELD	SERVICE
Nguyen-Ngo, Hue DO	Pediatrics	Clinic Pediatrics

ALLIED HEALTH – NEW APPOINTMENT - none

ALLIED HEALTH – REAPPOINTMENTS

PRACTITIONER	DEPT/SERVICE	STATUS	TERM
Reikowski, David PhD	Medicine/Psychology	AHP Membership only – no privileges	2 yr

RESIGNATIONS/RETIREMENTS

PRACTITIONER	DEPT/SERVICE	CURRENT STATUS	COMMENT
Bixler, Christopher MD	Medicine/Teleneuro	Privileges only	Resigned from TeleSpecialists
Frederickson, Ryan MD	Radiology/Telerad	Privileges only	Resigned from StatRad
Johnson, Joshua	Medicine/Teleneuro	Privileges only	Resigned from Telespecialists
Rondina, Joseph MD	Surgery/General Surgery	Active	No current malpractice, did not reapply

Interim CEO Report
August 2023

Financial Emergency Update

- Final submittal of our application for AB112.
- LOI from American Advanced Medical received.
- Site visits to AAM sites scheduled for August 21, 2023.

CEO Activities

- Attended HealthCare Ad Hoc Committee meeting August 11, 2023.
- Met with Congresswomen Lofgren to give update on hospital status.
- Met with ACHD and HCAI on seismic compliance. We will be working with HCAI on the minimum requirements needed to meet the mandate.
- Continued weekly meetings with physicians to keep them up to data on the status of the hospital.
- Employee forums to communicate LOI from AAM on August 4. Employee forums with AAM on August 16 and 17.
- Work with Board Ad Hoc committee July 31. More meetings will be set with the new scope.
- Continued work with professional team on due diligence for potential partners.

HR

- We continue to meet with NUHW and CNA unions to discuss changes to their contracts. NUHW meeting August 18, 2023.

Ambulatory Services

- GI services first quarter ROI attached for your review.

San Benito Health Care District
Finance Committee Minutes
August 17, 2023 - 4:30pm

Present: Jeri Hernandez, Board President
Rick Shelton, Board Treasurer
Mary Casillas, Interim Chief Executive Officer
Mark Robinson, Chief Financial Officer
Lindsey Parnell, Controller

1. CALL TO ORDER

The meeting of the Finance Committee was called to order at 4:30pm.

2. APPROVE MAY MEETING MINUTES

Upon motion by Director Hernandez, second by Director Shelton, the Finance Committee approved the minutes of the June 15, 2023 Finance Committee Meeting, as presented.

3. REVIEW FINANCIAL UPDATES

A. July 2023 Financial Statements

The Financial Statements for July 2023 were presented for review. For the month ending July 31, 2023, the District's Net Surplus (Loss) is \$334,716 compared to a budgeted Surplus (Loss) of \$485,338. The District is under budget for the month by \$150,622.

Acute discharges were 133 for the month, under budget by 91 discharges or 41%. The ADC was 12.55 compared to a budget of 18.18. The ALOS was 2.92. The acute I/P gross revenue was under budget by \$3.3 million while O/P services gross revenue was \$582,638 or 2% under budget. ER I/P visits were 103 and ER O/P visits were over budget by 71 visits or 4%. The Rural Health Clinics treated 3,372 patients (includes 591 visits at the Diabetes Clinic) while other clinics treated 907 outpatients.

Other Operating revenue exceeded budget by \$6,742. Other operating revenue includes a monthly \$250,000 accrual for the PY6 QIP.

Operating Expenses were under budget by \$1.365 million due mainly to variances in: Salary and Wages being under budget by \$313,258, Registry under budget by \$25,141. Employee Benefits are under budget due to the increase in employee healthcare premiums and the new PTO accrual plan.

Non-operating Revenue was under budget by \$20,622 due to the timing of the property tax accrual.

The SNFs ADC was 94.39 for the month. The Net Surplus (Loss) is \$487,577 compared to a budget of \$223,790. Effective May 10, 2023, the SNF Medi-Cal rate is \$704.86 per day.

B. July 2023 Finance Dashboard

The Finance Dashboard was reviewed by the Committee in detail.

4. CONSIDER RECOMMENDATION FOR BOARD APPROVAL OF CHRISTOPHER VERIOTI, D.O. SECOND AMENDMENT TO ORTHOPEDIC SURGERY COVERAGE AGREEMENT

The Second Amendment to the Orthopedic Surgery Agreement for Christopher Verioti, D.O. has a proposed effective date of September 1, 2023, a 1-year term, and a 30-day termination clause. The base monthly compensation will be set within the 70th percentile of fair market value at \$38,500 per month. The Finance Committee recommends this resolution for Board approval.

5. CONSIDER RECOMMENDATION FOR BOARD APPROVAL OF HUE NGUYEN-NGO, D.O. PROFESSIONAL SERVICES AGREEMENT

The Professional Services Agreement for part-time outpatient pediatric clinic coverage has a proposed effective date of August 30, 2023, a 1-year term, and a 60-day termination clause. The base monthly compensation will be set within the 65th percentile of fair market value at \$9,425 per month. The Finance Committee recommends this resolution for Board approval.

6. FYE 06/30/2024 OPERATING AND CAPITAL BUDGETS

The Operating and Capital Budgets for FYE 06/30/2024 are included in the board packet. Mark Robinson presented the Operating Budget.

Statistics-

- Acute Facility inpatient admissions and days are budgeted to increase by 1% for FY 2024.
- Acute facility outpatient services are budgeted to increase by 2%.
- The SNF average daily census is anticipated to increase in the next fiscal year to a combined average daily census of 90.

Revenue –

- Acute Inpatient Room Charges and Outpatient Charges are budgeted to increase by 5%.
- Medicare is reimbursed at only 101% of recognized cost.
- Medi-Cal is determined by the state government with no correlation to the charges for care, only the costs of care.
- The majority of commercial insurances will reimburse the District based on contracted rates with an annual allowance for price increases.
- The District is in the process of negotiating with Anthem Blue Cross and there is no expectation of an increase until an agreement is approved.
- Commercial payors who pay on a percentage of charge basis are only a small percentage of total reimbursement.
- Net operating revenue is expected to decrease by \$9.9 million.

Expenses –

- Productive FTEs are budgeted to increase by 25.71, to 494.64 in FY 2024.
- Combined Net Operating Expenses are budgeted to decrease by \$9.73 million (6.3%).
- Overall, acute expenses are budgeted to decrease by 6.9%, and SNF expenses are budgeted to decrease by 2.4% (due to ongoing identification and implementation of cost saving strategies).

The District's Net Surplus/(Loss) is budgeted to be \$2.12 million for the new fiscal year. The Finance Committee recommends the approval of the FYE 06/30/2024 Operating Budget.

The three-year Capital Budget ending 06/30/2026 includes \$4,882,285 of equipment/capital improvements. This budget is a guideline dependent upon what the departments need in conjunction with the District's financial position.

7. PUBLIC COMMENT

An opportunity was provided for public comment and individuals were given three minutes to address the Board Members and Administration.

8. ADJOURNMENT

There being no further business, the Committee was adjourned at 5:27pm.

Respectfully submitted,



Lindsey Parnell
Controller



August 17, 2023

CFO Financial Summary for the District Board:

For the month ending July 31, 2023, the District's Net Surplus (Loss) is \$334,716 compared to a budgeted Surplus (Loss) of \$485,338. The District is under budget for the month by \$150,622.

Acute discharges were 133 for the month, under budget by 91 discharges or 41%. The ADC was 12.55 compared to a budget of 18.18. The ALOS was 2.92. The acute I/P gross revenue was under budget by **\$3.3 million** while O/P services gross revenue was **\$582,638** or 2% under budget. ER I/P visits were 103 and ER O/P visits were over budget by 71 visits or 4%. The RHCs & Specialty Clinics treated 3,372 (includes 591 visits at the Diabetes Clinic) and 907 visits respectively.

Other Operating revenue exceeded budget by **\$6,742**. Other operating revenue includes a monthly \$250,000 accrual for the PY6 QIP.

Operating Expenses were under budget by **\$1.365 million** due mainly to variances in: Salary and Wages being under budget by \$313,258, Registry under budget by \$25,141. Employee Benefits are under budget due to the increase in employee healthcare premiums and the new PTO accrual plan.

Non-operating Revenue was under budget by **\$20,622** due to the timing of the property tax accrual.

The SNFs ADC was **94.39** for the month. The Net Surplus (Loss) is **\$487,577** compared to a budget of \$223,790. Effective May 10, 2023, the SNF Medi-Cal rate is **\$704.86** per day.

HAZEL HAWKINS MEMORIAL HOSPITAL - COMBINED
HOLLISTER, CA 95023
FOR PERIOD 07/31/23

	-----CURRENT MONTH-----					-----YEAR-TO-DATE-----				
	ACTUAL 07/31/23	BUDGET 07/31/23	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 07/31/22	ACTUAL 07/31/23	BUDGET 07/31/23	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 07/31/22
GROSS PATIENT REVENUE:										
ACUTE ROUTINE REVENUE	2,751,302	4,363,064	(1,611,762)	(37)	3,950,007	2,751,302	4,363,064	(1,611,762)	(37)	3,950,007
SNF ROUTINE REVENUE	2,318,973	2,092,500	226,473	11	1,982,350	2,318,973	2,092,500	226,473	11	1,982,350
ANCILLARY INPATIENT REVENUE	3,607,728	5,249,904	(1,642,176)	(31)	5,104,922	3,607,728	5,249,904	(1,642,176)	(31)	5,104,922
HOSPITALIST\PEDS I\P REVENUE	137,889	190,835	(52,946)	(28)	199,530	137,889	190,835	(52,946)	(28)	199,530
TOTAL GROSS INPATIENT REVENUE	8,815,892	11,896,303	(3,080,411)	(26)	11,236,808	8,815,892	11,896,303	(3,080,411)	(26)	11,236,808
ANCILLARY OUTPATIENT REVENUE	25,703,754	26,278,885	(575,131)	(2)	21,194,066	25,703,754	26,278,885	(575,131)	(2)	21,194,066
HOSPITALIST\PEDS O\P REVENUE	53,898	61,405	(7,507)	(12)	73,197	53,898	61,405	(7,507)	(12)	73,197
TOTAL GROSS OUTPATIENT REVENUE	25,757,652	26,340,290	(582,638)	(2)	21,267,263	25,757,652	26,340,290	(582,638)	(2)	21,267,263
TOTAL GROSS PATIENT REVENUE	34,573,544	38,236,593	(3,663,049)	(10)	32,504,072	34,573,544	38,236,593	(3,663,049)	(10)	32,504,072
DEDUCTIONS FROM REVENUE:										
MEDICARE CONTRACTUAL ALLOWANCES	9,815,875	10,956,516	(1,140,641)	(10)	9,215,367	9,815,875	10,956,516	(1,140,641)	(10)	9,215,367
MEDI-CAL CONTRACTUAL ALLOWANCES	9,725,889	10,506,725	(780,837)	(7)	7,337,713	9,725,889	10,506,725	(780,837)	(7)	7,337,713
BAD DEBT EXPENSE	712,509	429,889	282,620	66	233,530	712,509	429,889	282,620	66	233,530
CHARITY CARE	44,219	40,209	4,010	10	35,607	44,219	40,209	4,010	10	35,607
OTHER CONTRACTUALS AND ADJUSTMENTS	4,024,786	4,381,384	(356,598)	(8)	4,110,739	4,024,786	4,381,384	(356,598)	(8)	4,110,739
HOSPITALIST\PEDS CONTRACTUAL ALLOW	(4,361)	13,323	(17,684)	(133)	30,275	(4,361)	13,323	(17,684)	(133)	30,275
TOTAL DEDUCTIONS FROM REVENUE	24,318,916	26,328,046	(2,009,130)	(8)	20,963,230	24,318,916	26,328,046	(2,009,130)	(8)	20,963,230
NET PATIENT REVENUE	10,254,628	11,908,547	(1,653,919)	(14)	11,540,842	10,254,628	11,908,547	(1,653,919)	(14)	11,540,842
OTHER OPERATING REVENUE	589,241	582,499	6,742	1	535,130	589,241	582,499	6,742	1	535,130
NET OPERATING REVENUE	10,843,869	12,491,046	(1,647,177)	(13)	12,075,972	10,843,869	12,491,046	(1,647,177)	(13)	12,075,972
OPERATING EXPENSES:										
SALARIES & WAGES	4,390,111	4,727,951	(337,840)	(7)	4,662,374	4,390,111	4,727,951	(337,840)	(7)	4,662,374
REGISTRY	176,048	200,000	(23,952)	(12)	581,025	176,048	200,000	(23,952)	(12)	581,025
EMPLOYEE BENEFITS	1,857,189	2,521,876	(664,687)	(26)	2,627,938	1,857,189	2,521,876	(664,687)	(26)	2,627,938
PROFESSIONAL FEES	1,532,333	1,652,446	(120,113)	(7)	1,366,966	1,532,333	1,652,446	(120,113)	(7)	1,366,966
SUPPLIES	854,563	1,189,131	(334,568)	(28)	1,250,649	854,563	1,189,131	(334,568)	(28)	1,250,649
PURCHASED SERVICES	1,083,635	1,093,679	(10,044)	(1)	1,212,195	1,083,635	1,093,679	(10,044)	(1)	1,212,195
RENTAL	114,389	131,551	(17,162)	(13)	162,811	114,389	131,551	(17,162)	(13)	162,811
DEPRECIATION & AMORT	325,656	320,777	4,879	2	313,826	325,656	320,777	4,879	2	313,826
INTEREST	26,997	25,417	1,580	6	9,876	26,997	25,417	1,580	6	9,876
OTHER	421,132	436,401	(15,269)	(4)	457,814	421,132	436,401	(15,269)	(4)	457,814
TOTAL EXPENSES	10,782,052	12,299,229	(1,517,177)	(12)	12,645,473	10,782,052	12,299,229	(1,517,177)	(12)	12,645,473
NET OPERATING INCOME (LOSS)	61,818	191,817	(130,000)	(68)	(569,501)	61,818	191,817	(130,000)	(68)	(569,501)

HAZEL HAWKINS MEMORIAL HOSPITAL - COMBINED
 HOLLISTER, CA 95023
 FOR PERIOD 07/31/23

	-----CURRENT MONTH-----					-----YEAR-TO-DATE-----				
	ACTUAL 07/31/23	BUDGET 07/31/23	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 07/31/22	ACTUAL 07/31/23	BUDGET 07/31/23	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 07/31/22
NON-OPERATING REVENUE\EXPENSE:										
DONATIONS	(558)	5,000	(5,558)	(111)	39,583	(558)	5,000	(5,558)	(111)	39,583
PROPERTY TAX REVENUE	174,854	205,711	(30,857)	(15)	195,915	174,854	205,711	(30,857)	(15)	195,915
GO BOND PROP TAXES	170,388	170,388	0	0	164,964	170,388	170,388	0	0	164,964
GO BOND INT REVENUE\EXPENSE	(68,721)	(68,721)	0	0	(72,048)	(68,721)	(68,721)	0	0	(72,048)
OTHER NON-OPER REVENUE	28,585	13,843	14,742	107	19,124	28,585	13,843	14,742	107	19,124
OTHER NON-OPER EXPENSE	(32,700)	(32,700)	0	0	(38,785)	(32,700)	(32,700)	0	0	(38,785)
INVESTMENT INCOME	1,051	0	1,051		246	1,051	0	1,051		246
COLLABORATION CONTRIBUTIONS	0	0	0	0	0	0	0	0	0	0
TOTAL NON-OPERATING REVENUE/(EXPENSE)	272,899	293,521	(20,622)	(7)	309,001	272,899	293,521	(20,622)	(7)	309,001
NET SURPLUS (LOSS)	334,716	485,338	(150,622)	(31)	(260,501)	334,716	485,338	(150,622)	(31)	(260,501)
EBIDA	\$ 591,405	\$ 737,148	\$ (145,743)	(19.77)%	\$ (806)	\$ 591,405	\$ 737,148	\$ (145,743)	(19.77)%	\$ (806)
EBIDA MARGIN	5.45%	5.90%	(0.45)%	(7.58)%	(0.01)%	5.45%	5.90%	(0.45)%	(7.58)%	(0.01)%
OPERATING MARGIN	0.57%	1.54%	(0.97)%	(62.88)%	(4.72)%	0.57%	1.54%	(0.97)%	(62.88)%	(4.72)%
NET SURPLUS (LOSS) MARGIN	3.09%	3.89%	(0.80)%	(20.56)%	(2.16)%	3.09%	3.89%	(0.80)%	(20.56)%	(2.16)%

HAZEL HAWKINS MEMORIAL HOSPITAL - ACUTE FACILITY
 HOLLISTER, CA 95023
 FOR PERIOD 07/31/23

	CURRENT MONTH					YEAR-TO-DATE				
	ACTUAL 07/31/23	BUDGET 07/31/23	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 07/31/22	ACTUAL 07/31/23	BUDGET 07/31/23	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 07/31/22
GROSS PATIENT REVENUE:										
ROUTINE REVENUE	2,751,302	4,363,064	(1,611,762)	(37)	3,950,007	2,751,302	4,363,064	(1,611,762)	(37)	3,950,007
ANCILLARY INPATIENT REVENUE	3,230,270	4,878,179	(1,647,909)	(34)	4,838,660	3,230,270	4,878,179	(1,647,909)	(34)	4,838,660
HOSPITALIST I\ P REVENUE	137,889	190,835	(52,946)	(28)	199,530	137,889	190,835	(52,946)	(28)	199,530
TOTAL GROSS INPATIENT REVENUE	6,119,461	9,432,078	(3,312,617)	(35)	8,988,197	6,119,461	9,432,078	(3,312,617)	(35)	8,988,197
ANCILLARY OUTPATIENT REVENUE	25,703,754	26,278,885	(575,131)	(2)	21,194,066	25,703,754	26,278,885	(575,131)	(2)	21,194,066
HOSPITALIST O\ P REVENUE	53,898	61,405	(7,507)	(12)	73,197	53,898	61,405	(7,507)	(12)	73,197
TOTAL GROSS OUTPATIENT REVENUE	25,757,652	26,340,290	(582,638)	(2)	21,267,263	25,757,652	26,340,290	(582,638)	(2)	21,267,263
TOTAL GROSS ACUTE PATIENT REVENUE	31,877,113	35,772,368	(3,895,255)	(11)	30,255,461	31,877,113	35,772,368	(3,895,255)	(11)	30,255,461
DEDUCTIONS FROM REVENUE ACUTE:										
MEDICARE CONTRACTUAL ALLOWANCES	9,510,175	10,678,666	(1,168,492)	(11)	9,088,189	9,510,175	10,678,666	(1,168,492)	(11)	9,088,189
MEDI-CAL CONTRACTUAL ALLOWANCES	9,580,907	10,398,417	(817,510)	(8)	7,186,017	9,580,907	10,398,417	(817,510)	(8)	7,186,017
BAD DEBT EXPENSE	647,290	419,889	227,401	54	224,593	647,290	419,889	227,401	54	224,593
CHARITY CARE	44,219	40,209	4,010	10	35,607	44,219	40,209	4,010	10	35,607
OTHER CONTRACTUALS AND ADJUSTMENTS	3,947,991	4,314,424	(366,433)	(9)	4,040,745	3,947,991	4,314,424	(366,433)	(9)	4,040,745
HOSPITALIST\ PEDI CONTRACTUAL ALLOW	(4,361)	13,323	(17,684)	(133)	30,275	(4,361)	13,323	(17,684)	(133)	30,275
TOTAL ACUTE DEDUCTIONS FROM REVENUE	23,726,221	25,864,928	(2,138,707)	(8)	20,605,426	23,726,221	25,864,928	(2,138,707)	(8)	20,605,426
NET ACUTE PATIENT REVENUE	8,150,892	9,907,440	(1,756,548)	(18)	9,650,034	8,150,892	9,907,440	(1,756,548)	(18)	9,650,034
OTHER OPERATING REVENUE	589,241	582,499	6,742	1	535,130	589,241	582,499	6,742	1	535,130
NET ACUTE OPERATING REVENUE	8,740,133	10,489,939	(1,749,806)	(17)	10,185,164	8,740,133	10,489,939	(1,749,806)	(17)	10,185,164
OPERATING EXPENSES:										
SALARIES & WAGES	3,474,908	3,788,166	(313,258)	(8)	3,756,587	3,474,908	3,788,166	(313,258)	(8)	3,756,587
REGISTRY	141,859	167,000	(25,141)	(15)	553,425	141,859	167,000	(25,141)	(15)	553,425
EMPLOYEE BENEFITS	1,431,779	1,991,633	(559,854)	(28)	2,074,605	1,431,779	1,991,633	(559,854)	(28)	2,074,605
PROFESSIONAL FEES	1,530,123	1,650,109	(119,986)	(7)	1,364,246	1,530,123	1,650,109	(119,986)	(7)	1,364,246
SUPPLIES	758,208	1,099,773	(341,565)	(31)	1,152,176	758,208	1,099,773	(341,565)	(31)	1,152,176
PURCHASED SERVICES	990,787	986,216	4,571	1	1,104,742	990,787	986,216	4,571	1	1,104,742
RENTAL	113,398	130,507	(17,109)	(13)	161,815	113,398	130,507	(17,109)	(13)	161,815
DEPRECIATION & AMORT	286,263	281,320	4,943	2	274,648	286,263	281,320	4,943	2	274,648
INTEREST	26,997	25,417	1,580	6	9,876	26,997	25,417	1,580	6	9,876
OTHER	379,397	378,202	1,195	0	356,902	379,397	378,202	1,195	0	356,902
TOTAL EXPENSES	9,133,720	10,498,343	(1,364,623)	(13)	10,809,021	9,133,720	10,498,343	(1,364,623)	(13)	10,809,021
NET OPERATING INCOME (LOSS)	(393,587)	(8,404)	(385,183)	4,583	(623,856)	(393,587)	(8,404)	(385,183)	4,583	(623,856)

HAZEL HAWKINS MEMORIAL HOSPITAL - ACUTE FACILITY
 HOLLISTER, CA 95023
 FOR PERIOD 07/31/23

	CURRENT MONTH					YEAR-TO-DATE				
	ACTUAL 07/31/23	BUDGET 07/31/23	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 07/31/22	ACTUAL 07/31/23	BUDGET 07/31/23	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 07/31/22
NON-OPERATING REVENUE\EXPENSE:										
DONATIONS	(558)	5,000	(5,558)	(111)	39,583	(558)	5,000	(5,558)	(111)	39,583
PROPERTY TAX REVENUE	143,997	174,854	(30,857)	(18)	166,528	143,997	174,854	(30,857)	(18)	166,528
GO BOND PROP TAXES	170,388	170,388	0	0	164,964	170,388	170,388	0	0	164,964
GO BOND INT REVENUE\EXPENSE	(68,721)	(68,721)	0	0	(72,048)	(68,721)	(68,721)	0	0	(72,048)
OTHER NON-OPER REVENUE	28,585	13,843	14,742	107	19,124	28,585	13,843	14,742	107	19,124
OTHER NON-OPER EXPENSE	(25,412)	(25,412)	0	0	(30,442)	(25,412)	(25,412)	0	0	(30,442)
INVESTMENT INCOME	1,051	0	1,051		246	1,051	0	1,051		246
COLLABORATION CONTRIBUTIONS	0	0	0	0	0	0	0	0	0	0
TOTAL NON-OPERATING REVENUE/(EXPENSE)	249,330	269,952	(20,623)	(8)	287,956	249,330	269,952	(20,623)	(8)	287,956
NET SURPLUS (LOSS)	(144,258)	261,548	(405,806)	(155)	(335,900)	(144,258)	261,548	(405,806)	(155)	(335,900)

HAZEL HAWKINS SKILLED NURSING FACILITIES
 HOLLISTER, CA
 FOR PERIOD 07/31/23

	CURRENT MONTH					YEAR-TO-DATE				
	ACTUAL 07/31/23	BUDGET 07/31/23	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 07/31/22	ACTUAL 07/31/23	BUDGET 07/31/23	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 07/31/22
GROSS SNF PATIENT REVENUE:										
ROUTINE SNF REVENUE	2,318,973	2,092,500	226,473	11	1,982,350	2,318,973	2,092,500	226,473	11	1,982,350
ANCILLARY SNF REVENUE	377,459	371,725	5,734	2	266,261	377,459	371,725	5,734	2	266,261
TOTAL GROSS SNF PATIENT REVENUE	2,696,431	2,464,225	232,206	9	2,248,611	2,696,431	2,464,225	232,206	9	2,248,611
DEDUCTIONS FROM REVENUE SNF:										
MEDICARE CONTRACTUAL ALLOWANCES	305,700	277,850	27,850	10	127,177	305,700	277,850	27,850	10	127,177
MEDI-CAL CONTRACTUAL ALLOWANCES	144,981	108,308	36,673	34	151,696	144,981	108,308	36,673	34	151,696
BAD DEBT EXPENSE	65,219	10,000	55,219	552	8,937	65,219	10,000	55,219	552	8,937
CHARITY CARE	0	0	0	0	0	0	0	0	0	0
OTHER CONTRACTUALS AND ADJUSTMENTS	76,794	66,960	9,834	15	69,993	76,794	66,960	9,834	15	69,993
TOTAL SNF DEDUCTIONS FROM REVENUE	592,695	463,118	129,577	28	357,804	592,695	463,118	129,577	28	357,804
NET SNF PATIENT REVENUE	2,103,736	2,001,107	102,629	5	1,890,808	2,103,736	2,001,107	102,629	5	1,890,808
OTHER OPERATING REVENUE	0	0	0	0	0	0	0	0	0	0
NET SNF OPERATING REVENUE	2,103,736	2,001,107	102,629	5	1,890,808	2,103,736	2,001,107	102,629	5	1,890,808
OPERATING EXPENSES:										
SALARIES & WAGES	915,203	939,785	(24,583)	(3)	905,787	915,203	939,785	(24,583)	(3)	905,787
REGISTRY	34,189	33,000	1,189	4	27,600	34,189	33,000	1,189	4	27,600
EMPLOYEE BENEFITS	425,410	530,243	(104,833)	(20)	553,333	425,410	530,243	(104,833)	(20)	553,333
PROFESSIONAL FEES	2,210	2,337	(127)	(5)	2,720	2,210	2,337	(127)	(5)	2,720
SUPPLIES	96,355	89,358	6,997	8	98,473	96,355	89,358	6,997	8	98,473
PURCHASED SERVICES	84,244	107,463	(23,219)	(22)	107,453	84,244	107,463	(23,219)	(22)	107,453
RENTAL	991	1,044	(54)	(5)	997	991	1,044	(54)	(5)	997
DEPRECIATION	39,392	39,457	(65)	0	39,179	39,392	39,457	(65)	0	39,179
INTEREST	0	0	0	0	0	0	0	0	0	0
OTHER	41,735	58,199	(16,464)	(28)	100,912	41,735	58,199	(16,464)	(28)	100,912
TOTAL EXPENSES	1,639,728	1,800,886	(161,158)	(9)	1,836,453	1,639,728	1,800,886	(161,158)	(9)	1,836,453
NET OPERATING INCOME (LOSS)	464,008	200,221	263,787	132	54,355	464,008	200,221	263,787	132	54,355
NON-OPERATING REVENUE\EXPENSE:										
DONATIONS	0	0	0	0	0	0	0	0	0	0
PROPERTY TAX REVENUE	30,857	30,857	0	0	29,387	30,857	30,857	0	0	29,387
OTHER NON-OPER EXPENSE	(7,288)	(7,288)	0	0	(8,343)	(7,288)	(7,288)	0	0	(8,343)
TOTAL NON-OPERATING REVENUE/(EXPENSE)	23,569	23,569	0	0	21,044	23,569	23,569	0	0	21,044
NET SURPLUS (LOSS)	487,577	223,790	263,787	118	75,400	487,577	223,790	263,787	118	75,400

HAZEL HAWKINS MEMORIAL HOSPITAL
 HOLLISTER, CA
 For the month ended 07/31/23

	CURR MONTH 07/31/23	PRIOR MONTH 06/30/23	POS/NEG VARIANCE	PERCENTAGE VARIANCE	PRIOR YR 06/30/23
CURRENT ASSETS					
CASH & CASH EQUIVALENT	14,680,916	14,441,825	239,091	2	14,441,825
PATIENT ACCOUNTS RECEIVABLE	54,359,536	51,201,316	3,158,220	6	51,201,316
BAD DEBT ALLOWANCE	(5,738,098)	(5,227,791)	(510,307)	10	(5,227,791)
CONTRACTUAL RESERVES	(31,615,013)	(29,058,974)	(2,556,039)	9	(29,058,974)
OTHER RECEIVABLES	4,821,005	4,256,813	564,192	13	4,256,813
INVENTORIES	2,791,349	2,787,687	3,661	0	2,787,687
PREPAID EXPENSES	2,663,963	2,252,665	411,298	18	2,252,665
DUE TO\FROM THIRD PARTIES	1,888,442	1,888,442	0	0	1,888,442
TOTAL CURRENT ASSETS	<u>43,852,099</u>	<u>42,541,983</u>	<u>1,310,116</u>	<u>3</u>	<u>42,541,983</u>
ASSETS WHOSE USE IS LIMITED					
BOARD DESIGNATED FUNDS	<u>4,773,531</u>	<u>4,509,818</u>	<u>263,713</u>	<u>6</u>	<u>4,509,818</u>
TOTAL LIMITED USE ASSETS	<u>4,773,531</u>	<u>4,509,818</u>	<u>263,713</u>	<u>6</u>	<u>4,509,818</u>
PROPERTY, PLANT, AND EQUIPMENT					
LAND & LAND IMPROVEMENTS	3,370,474	3,370,474	0	0	3,370,474
BLDGS & BLDG IMPROVEMENTS	100,098,374	100,098,374	0	0	100,098,374
EQUIPMENT	43,484,575	43,302,208	182,367	0	43,302,208
CONSTRUCTION IN PROGRESS	889,255	880,124	9,131	1	880,124
CAPITALIZED INTEREST	5,924	0	5,924		0
GROSS PROPERTY, PLANT, AND EQUIPMENT	<u>147,848,602</u>	<u>147,651,180</u>	<u>197,423</u>	<u>0</u>	<u>147,651,180</u>
ACCUMULATED DEPRECIATION	<u>(90,702,745)</u>	<u>(90,362,507)</u>	<u>(340,238)</u>	<u>0</u>	<u>(90,362,507)</u>
NET PROPERTY, PLANT, AND EQUIPMENT	<u>57,145,857</u>	<u>57,288,673</u>	<u>(142,816)</u>	<u>0</u>	<u>57,288,673</u>
OTHER ASSETS					
UNAMORTIZED LOAN COSTS	464,928	470,999	(6,071)	(1)	470,999
PENSION DEFERRED OUTFLOWS NET	<u>3,797,637</u>	<u>3,797,637</u>	<u>0</u>	<u>0</u>	<u>3,797,637</u>
TOTAL OTHER ASSETS	<u>4,262,565</u>	<u>4,268,636</u>	<u>(6,071)</u>	<u>0</u>	<u>4,268,636</u>
TOTAL UNRESTRICTED ASSETS	<u>110,034,051</u>	<u>108,609,110</u>	<u>1,424,942</u>	<u>1</u>	<u>108,609,110</u>
RESTRICTED ASSETS	<u>125,518</u>	<u>125,193</u>	<u>325</u>	<u>0</u>	<u>125,193</u>
TOTAL ASSETS	<u>110,159,569</u>	<u>108,734,303</u>	<u>1,425,267</u>	<u>1</u>	<u>108,734,303</u>

HAZEL HAWKINS MEMORIAL HOSPITAL
 HOLLISTER, CA
 For the month ended 07/31/23

	CURR MONTH 07/31/23	PRIOR MONTH 06/30/23	POS/NEG VARIANCE	PERCENTAGE VARIANCE	PRIOR YR 06/30/23
CURRENT LIABILITIES					
ACCOUNTS PAYABLE	5,164,451	4,647,330	(517,121)	11	4,647,330
ACCRUED PAYROLL	2,810,873	2,324,681	(486,193)	21	2,324,681
ACCRUED PAYROLL TAXES	2,167,396	2,123,227	(44,170)	2	2,123,227
ACCRUED BENEFITS	5,592,474	6,051,228	458,755	(8)	6,051,228
ACCRUED PENSION (CURRENT)	4,976,625	5,061,807	85,182	(2)	5,061,807
OTHER ACCRUED EXPENSES	71,127	63,664	(7,463)	12	63,664
PATIENT REFUNDS PAYABLE	961	961	0	0	961
DUE TO\FROM THIRD PARTIES	4,486,589	4,272,080	(214,509)	5	4,272,080
OTHER CURRENT LIABILITIES	1,418,907	1,012,401	(406,506)	40	1,012,401
TOTAL CURRENT LIABILITIES	26,689,404	25,557,379	(1,132,025)	4	25,557,379
LONG-TERM DEBT					
LEASES PAYABLE	8,500,056	8,513,336	13,280	0	8,513,336
BONDS PAYABLE	34,755,841	34,784,361	28,520	0	34,784,361
TOTAL LONG TERM DEBT	43,255,898	43,297,698	41,800	0	43,297,698
OTHER LONG-TERM LIABILITIES					
DEFERRED REVENUE	0	0	0	0	0
LONG-TERM PENSION LIABILITY	14,706,676	14,706,676	0	0	14,706,676
TOTAL OTHER LONG-TERM LIABILITIES	14,706,676	14,706,676	0	0	14,706,676
TOTAL LIABILITIES	84,651,978	83,561,752	(1,090,226)	1	83,561,752
NET ASSETS:					
UNRESTRICTED FUND BALANCE	25,007,358	25,007,358	0	0	25,007,358
RESTRICTED FUND BALANCE	165,518	165,193	(325)	0	165,193
NET REVENUE/(EXPENSES)	334,716	0	(334,716)		0
TOTAL NET ASSETS	25,507,592	25,172,551	(335,041)	1	25,172,551
TOTAL LIABILITIES AND NET ASSETS	110,159,569	108,734,303	(1,425,267)	1	108,734,303

Statement of Cash Flows
Hazel Hawkins Memorial Hospital
Hollister, CA
One month ending July 31, 2023

	CASH FLOW		COMMENTS
	Current Month 7/31/2023	Current Year-To-Date 7/31/2023	
CASH FLOWS FROM OPERATING ACTIVITIES:			
Net Income (Loss)	\$334,716	\$334,716	
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities:			
Depreciation	340,240	340,240	
(Increase)/Decrease in Net Patient Accounts Receivable	(91,874)	(91,874)	
(Increase)/Decrease in Other Receivables	(564,192)	(564,192)	
(Increase)/Decrease in Inventories	(3,661)	(3,661)	
(Increase)/Decrease in Pre-Paid Expenses	(411,298)	(411,298)	
(Increase)/Decrease in Due From Third Parties	0	0	
Increase/(Decrease) in Accounts Payable	517,122	517,122	
Increase/(Decrease) in Notes and Loans Payable	0	0	
Increase/(Decrease) in Accrued Payroll and Benefits	(13,575)	(13,575)	
Increase/(Decrease) in Accrued Expenses	7,463	7,463	
Increase/(Decrease) in Patient Refunds Payable	0	0	
Increase/(Decrease) in Third Party Advances/Liabilities	214,509	214,509	
Increase/(Decrease) in Other Current Liabilities	406,506	406,506	Semi-Annual Interest - 2021 Insured Revenue Bonds
Net Cash Provided by Operating Activities:	401,240	401,240	
CASH FLOWS FROM INVESTING ACTIVITIES:			
Purchase of Property, Plant and Equipment	(197,423)	(197,423)	
(Increase)/Decrease in Limited Use Cash and Investments	0	0	
(Increase)/Decrease in Other Limited Use Assets	(263,713)	(263,713)	Bond Principal & Int Payment - 2014 & 2021 Bonds
(Increase)/Decrease in Other Assets	6,071	6,071	Amortization
Net Cash Used by Investing Activities	(455,065)	(455,065)	
CASH FLOWS FROM FINANCING ACTIVITIES:			
Increase/(Decrease) in Bond/Mortgage Debt	(13,280)	(13,280)	Refinancing of 2013 Bonds with 2021 Bonds
Increase/(Decrease) in Capital Lease Debt	(28,520)	(28,520)	
Increase/(Decrease) in Other Long Term Liabilities	0	0	
Net Cash Used for Financing Activities	(41,800)	(41,800)	
(INCREASE)/DECREASE IN RESTRICTED ASSETS	0	0	
Net Increase/(Decrease) in Cash	239,091	239,091	
Cash, Beginning of Period	14,441,825	14,441,825	
Cash, End of Period	\$14,680,916	\$14,680,916	\$0

Cost per day to run the District

\$338,358

Operational Days Cash on Hand

43.39

Description	Target	MTD Actual	YTD Actual	YTD Target
Average Daily Census - Acute	18.18	12.55	12.55	18.18
Average Daily Census - SNF	89.99	94.39	94.39	89.99
Acute Length of Stay	2.52	2.92	2.92	2.52
ER Visits:				
Inpatient	109	103	103	109
Outpatient	1,862	1,933	1,933	1,862
Total	1,971	2,036	2,036	1,971
Days in Accounts Receivable	45.0	50.0	50.0	45.0
Productive Full-Time Equivalents	494.64	449.89	449.89	494.64
Net Patient Revenue	11,908,547	10,254,628	10,254,628	11,908,547
Payment-to-Charge Ratio	31.1%	29.7%	29.7%	31.1%
Medicare Traditional Payor Mix	30.40%	26.48%	26.48%	30.40%
Commercial Payor Mix	21.87%	22.88%	22.88%	21.87%
Bad Debt % of Gross Revenue	1.12%	2.07%	2.07%	1.12%
EBIDA	737,148	591,405	591,405	737,148
EBIDA %	5.90%	5.45%	5.45%	5.90%
Operating Margin	1.54%	0.57%	0.57%	1.54%
Salaries, Wages, Registry & Benefits %:				
by Net Operating Revenue	59.64%	59.23%	59.23%	59.64%
by Total Operating Expense	60.57%	59.57%	59.57%	60.57%
Bond Covenants:				
Debt Service Ratio	1.25	3.79	3.79	1.25
Current Ratio	1.50	1.64	1.64	1.50
Days Cash on hand	30.00	43.39	43.39	30.00
Met or Exceeded Target				
Within 10% of Target				
Not Within 10%				

Hazel Hawkins Memorial Hospital
 Bad Debt Expense
 For the Year Ending June 30, 2024

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total		
Budgeted Gross Revenue	38,236,593	38,468,812	35,049,053	34,999,737	35,870,267	36,385,781	34,851,365	32,060,010	36,752,432	35,946,200	39,112,090	38,876,681	436,609,021		
Budgeted Bad Debt Expense	429,889	432,423	393,214	391,626	402,993	407,930	389,870	358,975	412,378	403,932	440,170	438,441	4,901,841		
BD Exp as a percent of Gross Revenue	1.12%	1.12%	1.12%	1.12%	1.12%	1.12%	1.12%	1.12%	1.12%	1.12%	1.13%	1.13%	1.12%		
Actual Gross Revenue	34,381,757	-	-	-	-	-	-	-	-	-	-	-	34,381,757		
Actual Bad Debt Expense	712,509	-	-	-	-	-	-	-	-	-	-	-	712,509		
BD Exp as a percent of Gross Revenue	2.07%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	2.07%		
Budgeted YTD BD Exp	429,889	1.12%													
Actual YTD BD Exp	712,509	2.07%													
													YTD Charity Exp Budget	32,180	
													YTD Charity Exp Actual	44,219	
Amount under (over) budget	(282,620)	-0.95%												Amt under (over) budget	(12,039)
														Charity Exp % of Gross Rev	0.13%
Prior Year percent of Gross Revenue	1.15%														
Percent of Decrease (Inc) from Prior Year	-80.2%														

Board of Directors Contract Review Worksheet

*Second Amendment to Orthopedic Surgery Coverage Agreement for **Christopher Verioti, D.O.***

Executive Summary: Dr. Verioti has been providing orthopedic clinic & emergency call coverage since September 2022 at an average of 14 days per month. He has been well-received by patients and is developing a steady referral stream resulting in added cases for the surgery center. In addition, one of the clinic's full-time orthopedist has resigned effective at the end of September, so continued coverage is needed.

Recommended Board Motion: It is recommended the hospital Board approve a Second Amendment to extend the term of the Orthopedic Surgery Coverage Agreement with Dr. Christopher Verioti by one (1) year with a minimum of 10 shifts per month at the rate of \$2,750.00 per shift.

Services Provided: Continued orthopedic clinic & emergency call coverage a minimum of 10 shifts per month.

Agreement Terms:

Contract Term	Effective Date	FMV %ile	Base Monthly Cost	Estimated Annual Cost	Term clause
1 year	9/1/2023	70th	\$38,500 + reimbursement of travel expenses	\$462,000 + reimbursement of travel expenses	30 days

Contract Rate: \$2,750 per shift + reimbursement of travel (*flight/rental car*) expenses.

**SECOND AMENDMENT
TO
ORTHOPEDIC SURGERY COVERAGE AGREEMENT**

This Second Amendment to Orthopedic Surgery Coverage Agreement (“**Amendment**”) is effective September 1, 2023 (“**Effective Date**”), by and between San Benito Health Care District (“**SBHCD**”), and Christopher A. Verioti, D.O. (“**Physician**”).

RECITALS

A. SBHCD and Physician entered into an Orthopedic Surgery Coverage Agreement effective September 1, 2022, as amended by that certain Amendment Number 1 to Orthopedic Surgery Coverage Agreement, (as amended, the “**Agreement**”); and

B. SBHCD and Physician desire to modify and extend the term of the Agreement as set forth below.

AGREEMENT

The Parties hereby agree and amend the Agreement as follows:

1. **Compensation.** Section B.1 of Exhibit B is hereby replaced in its entirety as follows: “As full compensation for each shift worked by Physician, SBHCD shall pay Physician the amount of Two Thousand Seven Hundred Fifty Dollars (\$2,750.00).”
2. **Extension of Term.** Section 4.1 of the Agreement is amended as follows: The term of the Agreement is extended through 11:59 p.m. PT on August 31, 2024, unless earlier terminated as set forth in the Agreement.
2. **Miscellaneous.** Except as specifically amended by this Amendment, all other terms of the Agreement shall remain effective. The preamble and recitals are incorporated into the terms of this Amendment. This Amendment may be executed in a number of counterparts, each of which shall be deemed an original and all of which shall constitute one and the same Agreement. Electronic signatures shall have the same force and effect as original signatures. Time is of the essence with respect to each provision of this Amendment.

The Parties have executed this Amendment to be effective as of the Effective Date.

SBHCD

San Benito Health Care District

By: _____
Mary T. Casillas, Interim Chief Executive Officer

Date: _____

Physician

Christopher A. Verioti, D.O.

By: _____
Christopher A. Verioti, D.O.

Date: _____

Board of Directors Contract Review Worksheet

*Professional Services Agreement for **Hue Nguyen-Ngo, D.O.***

Executive Summary: With a shortage in the number of clinic-based primary care & pediatric physicians available to offer critical outpatient newborn, well-child & sick visit services, recruitment of pediatricians continues to be a priority for the District's clinics. Local pediatrician Hue Nguyen-Ngo, D.O. is available to provide part-time coverage between 5-15 hours per week in the District's rural health clinics.

Recommended Board Motion: It is recommended the hospital Board approve a 1-year Professional Services Agreement with Dr. Nguyen-Ngo for 5-15 hours per week at a rate of \$145.00 per hour.

Services Provided: Part-time outpatient pediatric clinic coverage 5-15 hours per week.

Agreement Terms:

Contract Term	Effective Date	FMV %ile	Base Monthly Cost	Estimated Annual Cost	Term clause
1 year	8/30/2023	65th	\$9,425	\$113,100	60 days

Contract Rate: \$145 per hour for 5-15 hours per week.

PROFESSIONAL SERVICES AGREEMENT

This Professional Services Agreement (“Agreement”) is entered into and effective as of **August 30, 2023** (“Effective Date”), by and between **San Benito Health Care District**, a local health care district organized and operated pursuant to Division 23 of the California Health and Safety Code (“SBHCD”), and **Hue Nguyen-Ngo, D.O.** (“Physician”).

RECITALS

- A. SBHCD owns and operates Hazel Hawkins Memorial Hospital, a licensed general acute care facility located at 911 Sunset Drive, Hollister, California (“Hospital”). Hospital provides inpatient and outpatient services to residents of the San Benito Health Care District and surrounding communities which constitute the Hospital’s service area (“Hospital Service Area”).
- B. SBHCD owns and operates rural and specialty health clinics as defined in Title 22, California Code of Regulations section 51115.5 to provide services to patients in the Hospital Service Area (“Clinics”). Clinics operate under the name “Hazel Hawkins Community Health Clinics” and “Hollister Multi-Specialty Clinic”.
- C. Physician is licensed to practice medicine in the State of California, is a member in good standing of the medical staff of Hospital, and is experienced and qualified to provide pediatric services (“Services”).
- D. Section 32129 of the California Health and Safety Code provides that a health care district may contract with a physician to render professional health services in order to ensure that adequate health care is available to all residents within its service area.
- E. SBHCD has determined that entering into this Agreement with Physician is in the best interests of the Hospital and the public health of the residents of the Hospital Service Area, and is an appropriate way to assure availability of rural health clinic services to patients in the Hospital Service Area.
- F. The parties desire to enter into this Agreement to set forth their respective responsibilities in connection with the Services provided by Physician in the Hospital Service Area during the term of this Agreement.

The parties hereby agree as follows:

1. DUTIES AND OBLIGATIONS OF PHYSICIAN

- 1.1 **Professional Services.** Physician shall provide all Services reasonably required for coverage, patient care, and operation of the Clinics and will perform the duties as set forth in **Exhibits A and B**. Physician shall provide such services on a part-time basis between five (5) up to fifteen (15) hours per week and pursuant to a mutually agreed upon schedule. If Physician cannot agree on such a schedule, SBHCD shall determine the schedule.
- 1.2 **Qualifications of Physician.** Physician shall: (i) be duly licensed to practice medicine by the State of California; (ii) be an active member in good standing of the Hospital’s medical staff; (iii) have levels of competence, experience and skill comparable to those prevailing in the community; and (iv) not be excluded from any governmental healthcare program.
- 1.3 **Compliance.** In connection with the operation and conduct of the Clinics and rendition of Services, Physician shall, at all times, comply with the applicable terms of this Agreement and with all applicable federal, state and local laws, rules and regulations, including requirements for participation in the Medicare and Medi-Cal programs, and will at all times be aware of and participate in meeting the District Corporate Compliance program goals and objectives.
- 1.4 **Credentialing.** In order to be efficiently credentialed with payors contracted with SBHCD, Physician shall participate in the Council for Affordable Quality Healthcare (“CAQH”) credentialing program and shall timely comply with requests from CAQH or SBHCD personnel for (i) credentialing information regarding Physician, and (ii) documents necessary for the credentialing of Physician.

- 1.5 Use of Premises. No part of the Clinics premises shall be used at any time by Physician as an office for the general or private practice of medicine.
- 1.6 Medical Records/Chart Notes. Physician shall provide appropriate and necessary documentation for each patient's medical record for all patient encounters in the Clinics.
- 1.7 Coding. Physician shall properly code all professional services rendered to patients for all visits to the Clinics. Physician's coding shall be used for purposes of billing for Services provided by Physician. All such coding shall be subject to review and audit by an independent auditing company mutually agreed upon by the parties.

2. DUTIES AND OBLIGATIONS OF SBHCD

- 2.1 Duties. SBHCD agrees to furnish at its own cost and expense, for the operation of the Clinics, the following:
 - 2.1.1 Space and Equipment. Space and Equipment as may be reasonably required for the operation of the Clinics as approved by Hospital.
 - 2.1.2 Services and Supplies. Maintenance, repair and replacement of equipment as are reasonably required; all utilities, including telephone, power, light, gas and water; and all supplies that may be reasonably required for the operation of the Clinics.
 - 2.1.3 Non-physician Personnel. All non-physician personnel with appropriate education, training and experience required to operate the Clinics, including a qualified administrative manager. SBHCD shall have the sole right and responsibility for the hiring and termination of all its employees. SBHCD shall be responsible for the Clinics scheduling of non-physician Clinic personnel.
- 2.2 Eligibility. At all times during the term of this Agreement, Clinics shall remain eligible to participate in the Medicare and Medi-Cal programs.
- 2.3 Contracts. SBHCD shall be solely responsible for negotiating all contracts for the reimbursement of Services provided in the Clinics. SBHCD in its sole and absolute discretion shall determine the negotiation parameters for the terms, conditions and rates for such contracts.
- 2.4 Access to Records. Physician shall have access to the Clinics' patient medical and business records for quality of care and compliance purposes.

3. BILLING AND ASSIGNMENT OF REVENUE

- 3.1 Billing and Collection. SBHCD shall perform billing and collection services under this Agreement. Physician shall cooperate with SBHCD and shall use their best efforts to bill and collect for services in a diligent, timely, competent, effective, lawful, and commercially reasonable manner, maximizing the revenue to which Physician is legally and ethically entitled.
- 3.2 Assignment of Professional Service Revenues. Physician hereby assigns to SBHCD the right to all revenue from any and all patients, third-party payors, and governmental programs for all services rendered by Physician at the Hospital and the Clinics under this Agreement. The Parties intend that SBHCD may bill and collect directly from the Medicare carrier for Physician services to Medicare beneficiaries in compliance with Medicare Publication 100-04, Chapter 1, Sec. 30.2.7.

4. COMPENSATION FOR COVERAGE BY PHYSICIAN

- 4.1 Coverage Fee. As compensation for the provision of professional Services in the Clinics, Hospital and Skilled Nursing Facilities, SBHCD shall compensate Physician a rate of **One Hundred Forty-Five Dollars and No Cents (\$145.00)** per hour. SBHCD shall pay Physician on a monthly basis in accordance with the normal SBHCD contract payment process, for Services provided by Physician during the immediately preceding monthly period. Physician shall not bill for facility fees, administrative, supervisory, medical director, or similar services.

- 4.2 **Schedule of Charges.** SBHCD, in its sole and absolute discretion, shall decide upon the schedule of charges for the Clinics. Pursuant to California Health and Safety Code Section 32129, the SBHCD Board of Directors may review the fees and charges for Services provided at the Clinics to ensure such fees and charges are reasonable, fair, and consistent with the basic commitment of SBHCD to provide adequate health care to all residents within the Hospital Service Area.

5. TERM AND TERMINATION

- 5.1 **Term.** The term of this Agreement shall commence on the Effective Date and continue for a period of one (1) year from the Start Date, unless terminated earlier as provided in this Agreement, and shall automatically renew for successive one (1) year periods until terminated. Either party shall have the right to terminate this Agreement without stating a cause or reason and without cost or penalty upon sixty (60) days prior written notice to the other party. If this Agreement is terminated prior to expiration of the initial year of the term, the parties shall not enter into any new agreement or arrangement during the remainder of such year.
- 5.2 **Termination for Cause.** Either party shall have the right to terminate the Agreement for cause upon not less than thirty (30) days written notice (provided that in the case of (i) Sections 5.3.3, 5.3.4, and 5.3.5, no additional notice beyond that specified therein shall be required, (ii) Section 5.3.6, no notice shall be required and this Agreement will terminate effective as of the date of such exclusion, suspension, debarment from, or ineligibility for, any federal or state health care program, and/or of such conviction of a criminal offense related to conduct that would or could trigger an exclusion from any federal or state health care program, and (iii) insolvency or bankruptcy described in Section 5.3.2, as of the date of such insolvency or declaration of bankruptcy, as applicable).
- 5.3 **Definition of Cause.** For purposes of this Agreement, “cause” shall include, but not be limited to, the occurrence of any of the following events:
- 5.3.1 SBHCD or Physician is in breach of any material term or condition of this Agreement and such breach has not been cured within thirty (30) days following notice of such breach.
- 5.3.2 SBHCD or Physician becomes insolvent or declares bankruptcy.
- 5.3.3 The license to practice medicine or to prescribe controlled substances of Physician is revoked or suspended, or Physician is suspended or removed from the Medical Staff of the Hospital, or no longer maintains the required membership status on the Medical Staff of the Hospital.
- 5.3.4 SBHCD fails to carry or reinstate the insurance required in Article 8 of this Agreement or such coverage is cancelled or revoked within ten (10) days following notice of revocation from its insurance carrier.
- 5.3.5 Upon the determination that Physician has violated a material term of Article 9 of this Agreement.
- 5.3.6 The performance by either party of any term, condition, or provision of this Agreement which jeopardizes the licensure of Hospital, Hospital’s participation in Medicare, Medi-Cal or other reimbursement or payment program, or Hospital’s full accreditation by The Joint Commission or any other state or nationally recognized accreditation organization, or the tax-exempt status of Hospital’s bonds, or if for any other reason such performance violates any statute, ordinance, or is otherwise deemed illegal, or is deemed unethical by any recognized body, agency, or association in the healthcare fields, and the jeopardy or violation has not been or cannot be cured within sixty (60) days from the date notice of such jeopardy or violation has been received by the parties.
- 5.4 **Termination/Expiration Not Subject to Fair Hearing.** It is agreed between the parties that should either party exercise its right to terminate this Agreement such decision to terminate, and the actual termination or expiration of this Agreement, shall apply to rights under this Agreement only and not to Physician’s medical staff privileges or membership on the medical staff of Hospital. The termination or expiration of this Agreement shall not be subject to the Fair Hearing Plan of the Medical Staff Bylaws, the hearing procedures provided by Healthcare District Law, or any other fair hearing procedure regarding medical staff appointments or privileges.

6. INDEPENDENT CONTRACTOR

- 6.1 **Independent Contractor Status.** Physician is engaged in an independent contractor relationship with SBHCD in performing all work, services, duties and obligations pursuant to this Agreement. Neither SBHCD nor Hospital shall exercise any control or direction over the methods by which Physician performs Physician's work and functions, except that Physician shall perform at all times in strict accordance with then currently approved methods and practices of Physician's professional specialty. SBHCD's sole interest is to ensure that Physician performs and renders services in a competent, efficient and satisfactory manner in accordance with high medical standards.
- 6.2 **Independent Contractor Responsibilities.** The parties expressly agree that no work, act, commission or omission of Physician pursuant to the terms and conditions of this Agreement shall be construed to make or render Physician, the agent or employee of SBHCD or Hospital. Physician shall not be entitled to receive from SBHCD or Hospital vacation pay, sick leave, retirement benefits, Social Security, workers' compensation, disability or unemployment insurance benefits or any other employee benefit.

7. REPRESENTATIONS AND WARRANTIES OF PARTIES

- 7.1 SBHCD for itself, and its directors, officers, employees and agents (collectively, "Agents"), and Physician (for Physician and Physician's Agents) hereby warrants and represent as follows:
- 7.1.1 Neither it nor any of its Agents (i) is excluded, suspended or debarred from, or otherwise ineligible for, participation in any federal or state health care program including, without limitation, Medicare or Medi-Cal, or (ii) has been convicted of a criminal offense related to conduct that would or could trigger an exclusion from any federal or state health care program including, without limitation, Medicare or Medi-Cal; and
- 7.1.2 It shall, and it shall ensure that each of its Agents shall, notify the other parties thereto immediately in writing of (i) any threatened, proposed or actual exclusion, suspension or debarment, and/or (ii) any conviction of a criminal offense related to conduct that would or could trigger an exclusion, of it or any of its Agents from any federal or state health care program.

8. LIABILITY/MALPRACTICE INSURANCE COVERAGE

- 8.1 SBHCD and Hospital shall maintain general and professional liability insurance coverage commencing on the Start Date and continuing for the term of this Agreement in minimum amounts of \$1,000,000 per occurrence and \$3,000,000 annual aggregate. In the event the coverage that SBHCD and/or Hospital obtains to comply with this Section of this Agreement is a "claims made" policy, and SBHCD or Hospital, as applicable, changes insurance carriers or terminates coverage upon or after termination of this Agreement, SBHCD or Hospital, as applicable, shall immediately obtain and shall maintain "tail" coverage in the amounts otherwise required under this Section for at least seven (7) years following termination of this Agreement.

9. PROTECTED HEALTH INFORMATION

- 9.1 **Protected Health Information.** Physician shall maintain the confidentiality of all Protected Health Information ("PHI") in accordance with all applicable federal, state and local laws and regulations, including, but not limited to, the California Confidentiality of Medical Information Act and the Federal Health Insurance Portability and Accountability Act of 1996 and regulations promulgated thereunder ("HIPAA"). Without limiting the foregoing, Physician agrees to maintain PHI, as defined from time to time under HIPAA, which may be made available to or received by Physician pursuant to this Agreement, in accordance with the requirements of HIPAA. Physician agrees that Physician shall:
- 9.1.1 Not use or further disclose PHI in a manner that would violate HIPAA if done by Hospital or violate the requirements of applicable laws or this Agreement;

- 9.1.2 Use appropriate safeguards to prevent use or disclosure of PHI except as permitted by law and the terms of this Agreement, and report to Hospital any use or disclosure of PHI not permitted by law or by this Agreement of which Physician becomes aware;
 - 9.1.3 Comply with the elements of any compliance program established by Hospital that applies to the use or disclosure of PHI and ensure that any subcontractors or agents to whom Physician provides PHI agree to the same restrictions and conditions that apply to Physician with respect to such PHI;
 - 9.1.4 In accordance with HIPAA, (i) make available PHI to the subject Patient; (ii) make available PHI for amendment and incorporate any amendments to PHI; and (iii) make available the information required to provide an accounting of disclosures of PHI to the subject Patient;
 - 9.1.5 Make Physician's internal practices, books, and records relating to the use and disclosure of PHI available to the Secretary of the United States Department of Health and Human Services for purposes of determining Hospital's and Physician's compliance with HIPAA;
 - 9.1.6 At termination of this Agreement, return or destroy all PHI received from or created by SBHCD and retain no copies of such PHI or, if return or destruction is not permissible under law or the terms of this Agreement, continue to maintain all PHI in accordance with the provisions of this Section and limit further uses and disclosures to those purposes that make the return or destruction of the information infeasible.
- 9.2 **Electronic Protected Health Information ("EPHI")**. Physician agrees that Physician will: (i) implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of the EPHI that Physician creates, receives, maintains, or transmits on behalf of SBHCD; (ii) report to SBHCD any security incident with respect to EPHI of which Physician becomes aware; and (iii) ensure that any agent, including a subcontractor, to whom Physician provides EPHI agrees to implement reasonable and appropriate safeguards to protect such information.

10. GENERAL PROVISIONS

- 10.1 **Notices**. Any notice to be given to any party hereunder shall be deposited in the United States Mail, duly registered or certified, with return receipt requested, with postage paid, and addressed to the party for which intended, at the following addresses, or to such other address or addresses as the parties may hereafter designate in writing to each other.

SBHCD: San Benito Health Care District
Office of the Chief Executive Officer
911 Sunset Drive
Hollister, CA 95023

Physician: Hue Nguyen-Ngo, D.O.
4660 Meritage Court
Gilroy, CA 95020

- 10.2 **No Waiver**. No waiver of any of the provisions of this Agreement shall be deemed, or shall constitute, a waiver of any other provision, whether or not similar, nor shall any waiver constitute a continuing waiver. No waiver shall be binding unless executed in writing by the party making the waiver.
- 10.3 **Governing Law and Venue**. This Agreement shall be governed by, construed and enforced in accordance with the laws of the State of California. Venue shall be in the County of San Benito, California.
- 10.4 **Ownership of Patient Records**. All Hospital, Skilled Nursing Facilities' and Clinics' patient records shall be maintained by SBHCD and are the property of SBHCD. Physician shall have the right to access such records during normal business hours.
- 10.5 **Exclusive Property of SBHCD**. All data, files, records, documents, specifications, promotional materials and similar items relating to the business of SBHCD, whether prepared by or with the assistance of Physician or otherwise coming into Physician's possession shall remain the exclusive property of SBHCD and shall

not be removed from SBHCD's facilities under any circumstances without the prior written consent of SBHCD.

- 10.6 No Referrals. Nothing in this Agreement is intended to obligate or induce any party to this Agreement to refer patients to any other party.
- 10.7 Confidentiality. The parties acknowledge and agree that during the term of this Agreement and in the course of the discharge of Physician's duties hereunder, Physician shall have access to and become acquainted with information concerning the operation of District, and information which, pursuant to applicable law and regulation, is deemed to be confidential, including, but not limited to, trade secrets, medical records, patient medical and personal information, and personnel records. Physician agrees that such information shall not be disclosed either directly or indirectly to any other person or entity used by Physician in any way either during the term of this Agreement or at any other time thereafter, except as is required herein. Physician understands breach of this article will be an irremediable breach of this Agreement. Such breach will result in immediate termination of this Agreement.
- 10.8 Binding Agreement; No Assignment. This Agreement shall be binding upon and shall inure to the benefit of the parties to it and their respective legal representatives, successors and permitted assigns. No party may assign this Agreement or any rights hereunder, or may they delegate any of the duties to be performed hereunder without the prior written consent of the other party.
- 10.9 Dispute Resolution. If any dispute, controversy or claim arises out of this Agreement, for a period of thirty (30) days following written notice of the dispute, controversy or claim from one party to the other, the parties will use their good faith efforts to resolve the dispute, controversy or claim. If the matter cannot be resolved by the parties in this fashion, then such dispute, claim or controversy shall be heard in San Benito County, California, pursuant to the provisions of California Code of Civil Procedure Sections 638 through 645.1, inclusive. The hearing shall be final and binding to the greatest extent permitted by law, and the cost thereof, including reasonable attorneys' fees, shall be borne by the losing party in such proportions as the referee may decide. Judgment on the award may be entered in any court having jurisdiction thereof.
- 10.10 Section 952 of Omnibus Budget Reconciliation Act of 1980. In accordance with Section 952 of the Omnibus Reconciliation Act of 1980 (PL 96-499), Physician agrees that the books and records of Physician will be available to the Secretary of Department of Health and Human Services and the Comptroller General of the United States, or their duly authorized representatives, for four (4) years after termination of this Agreement. In the event that any of the services to be performed under this Agreement are performed by any subcontractor of Physician at a value or cost of \$10,000 or more over a twelve (12) month period, Physician shall comply and assure that such subcontractor complies with the provisions of Section 952 of the Omnibus Reconciliation Act of 1980. If regulations are issued at a later time which would determine that Section 952 of PL 96-499 is not applicable to this Agreement, this Section shall automatically be repealed.
- 10.11 Entire Agreement; Amendment. This Agreement, its exhibits, and all referenced documents constitute the entire agreement between the parties pertaining to the subject matter contained herein. This Agreement supersedes all prior and contemporaneous agreements, representations and understandings of the parties which relate to the subject matter of this Agreement. No supplement, amendment or modification of this Agreement shall be binding unless executed in writing by all of the parties.

The parties hereby executed this Agreement as of the Effective Date first set forth above.

SBHCD
San Benito Health Care District

Physician
Hue Nguyen-Ngo, D.O.

By: _____
Mary T. Casillas, Interim Chief Executive Officer

Hue Nguyen-Ngo, D.O.

Date: _____

Date: _____

EXHIBIT A

PHYSICIAN RESPONSIBILITIES

The duties of Physician shall include, but not be limited to, the following, as may be required by the SBHCD:

1. Rendering professional pediatric healthcare/medical services to patients of the Clinics.
2. Responsibility for the delivery of pediatric healthcare/medical services at the Clinics including:
 - a) Ensuring the quality, availability, and expertise of medical services rendered in the Clinics, and at Clinic-related activities;
 - b) The coordination of pediatric medical activities of the Clinics as a whole to be accomplished through continuous communication with appropriate District administrative personnel regarding matters relating to the medical administration of the Clinics;
 - c) Assisting with the development of a plan for pediatric quality assurance for the Clinics;
 - d) Complete all charting and billing within 24 hours of each encounter in compliance with established Clinic policy and procedures.

FYE June 30, 2024

San Benito Health Care District Operational Budget

Statistics:

The acute facility's inpatient admissions and days are budgeted to increase by **1%** for FY 2023. As of YTD March 31, 2023, the admissions decreased over last year's 1,708 to 1,685 (1.3%) resulting in ADCs of 21.14 and 18.16 respectively. The patient days decreased from 5,791 to 4,977 (14.1%). ICU admissions increased compared to last year with a shorter average length of stay (ALOS) due admissions from COVID-19 having decreased year to year. Med/Surg admissions decreased 2.8% and OB deliveries decreased by 4.4%. The acute ADC for the FYE June 30, 2023 is 17.32 compared to FYE June 30, 2022 ADC of 20.67. This is a decrease of 16.2%. In addition, there is a **2%** increase budgeted in outpatient services.

The Skilled Nursing Facilities are budgeted to have a combined average daily census of **90**. As of March 31, 2023, the MTD ADC was 92.00 and the YTD was 89.24.

Revenue:

The budgeted gross revenue is increasing by a combination of the increase in patient volume and the price increase. The I/P and O/P charges are being increased by 5%. However, the net patient revenue is effected by: 1) Medicare is reimbursed at a 101% of recognized cost. 2) Medi-Cal is determined by the State government with no correlation to the charge for care. 3) The majority of commercial insurances reimburse the District based on their contracted rates with an annual allowance for price increases. 4) Since the District is in the process of negotiating with Anthem Blue Cross, there is not an expectation of an increase until an agreement is approved. 5) The couple of commercial payers who pay on a percentage of charge basis are only a small percentage of total reimbursement.

The District is using an outside consultant (Innova Revenue Group) to review the charges in the ED including outpatient infusion.

Net Operating Revenue is budgeted to decrease by \$9.9 million. The decrease is mainly due to a \$8.9 million reduction in Other Operating Revenue from the American Rescue Plan, a onetime True-up for the Quality Incentive Program (QIP) and the reduction in physician revenue collections due to the closure of Primary Care Associate (PCA) on June 1, 2023.

Expenses:

The District's Productive FTEs are budgeted to decrease by 25.71 from 520.35 (annualized) in FY 2023 to 494.64 budgeted in FY 2024. However, the productive FTEs were budgeted for 529.11 in FY 2023.

The difference in the year to year budgets is a decrease of **34.47** FTEs. Annual average raises of 3% are included in the budget.

Overall, the acute expenses are budgeted to decrease by 6.9% and SNF expenses by 2.4% due the changes to the defined benefit pension plan, paid time off (PTO) plan and increase in the employees' health insurance premiums.

Combined Net Operating Expenses are budgeted to decrease by \$9.73 million, 6.3%.

In addition, the District management will work to identify and implement cost savings strategies on an ongoing basis.

Outstanding Issues:

- The District filed for Chapter 9 on May 23, 2023. The District is working toward exiting the Chapter 9 process.
- The District is actively working toward a partnership, lease or sale with another entity that can continue providing quality care to the residents of San Benito County.
- The District applied for a \$10 million loan from the Distressed Hospital Loan Program (DHLP) in July 2023. HCAI is scheduled to decide which facilities and the amount that are approved during August. Loan funds are expected to be released by CHFFA in September.
- The District is negotiating with 3 of the 4 bargaining units. These include C.N.A., N.U.H.W. and C.L.V.N.A. The E.S.C. have ratified a new agreement since May 23, 2023.
- The District's current commercial agreement with Anthem Blue Cross is ending on December 31, 2023. However, we are anticipating finishing negotiations on a new agreement before January 1, 2024.
- The Anthem Blue Cross managed care agreement for Medi-Cal ends on December 31, 2023. On January 1, 2024, the Medi-Cal population in San Benito County will be covered by the Central California Alliance for Health (CCAH). CCAH covers the Medi-Cal populations for the Counties of Santa Cruz, Monterey and Merced.

Conclusion:

The District's budget reflects the trend of a decreasing acute inpatient census due to the reduction in COVID-19 patients. The SNFs are on track to exceed their pre-COVID-19 ADC of 95.48 for FYE June 30, 2019. The SNF ADC for FYE June 30, 2023 was 90.11. The District's Net Surplus (Loss) is budgeted to be **\$2.12** million compared to a pre-audited earnings of **\$2.04** million for FYE June 30, 2023. The EBIDA for the budget for FY 2024 and FY 2023 are estimated to be **\$5.12** million (3.6%) and **\$5.36** million (3.5%) respectively. The District is budgeted to meet its Cal-Mortgage Bond requirements for the FYE June 30, 2024. The District should remain a Critical Access Hospital in order to remain financially viable until an alternative source of revenue can be secured.

HAZEL HAWKINS MEMORIAL HOSPITAL - ACUTE FACILITY
 BUDGET COMPARISON
 FOR PERIOD 06/30/24

	BUDGET 07/31/23	BUDGET 08/31/23	BUDGET 09/30/23	BUDGET 10/31/23	BUDGET 11/30/23	BUDGET 12/31/23	BUDGET 01/31/24	BUDGET 02/29/24	BUDGET 03/31/24	BUDGET 04/30/24	BUDGET 05/31/24	BUDGET 06/30/24	TWELVE MONTH TOTAL
GROSS PATIENT REVENUE:													
ROUTINE REVENUE	4,363,064	5,156,735	4,612,453	4,860,695	4,362,961	5,258,039	4,200,275	3,487,561	3,654,406	4,092,871	4,657,114	4,391,511	53,097,685
ANCILLARY INPATIENT REVENUE	4,878,179	5,471,312	4,773,514	4,572,450	4,499,654	5,736,077	4,702,187	4,124,570	4,505,408	4,511,596	5,115,531	4,796,213	57,686,691
HOSPITALISTS/PEDS INP REVENUE	190,835	190,826	184,678	190,834	184,676	190,834	190,834	178,521	190,834	184,678	190,834	184,678	2,253,062
TOTAL GROSS INPATIENT REVENUE	9,432,078	10,818,873	9,570,645	9,623,979	9,047,291	11,184,950	9,093,296	7,790,652	8,350,648	8,789,145	9,963,479	9,372,402	113,037,438
ANCILLARY OUTPATIENT REVENUE	26,278,885	25,106,491	23,031,676	22,850,160	24,382,329	22,668,398	23,232,279	21,908,991	25,878,989	24,719,822	26,617,234	27,055,849	293,731,103
HOSPITALISTS/PEDS OWP REVENUE	61,405	61,398	59,424	61,405	59,424	61,405	61,400	57,444	61,405	59,424	61,407	59,424	724,965
TOTAL GROSS OUTPATIENT REVENUE	26,340,290	25,167,889	23,091,100	22,911,565	24,441,753	22,729,803	23,293,679	21,966,435	25,940,394	24,779,246	26,678,641	27,115,273	294,456,068
TOTAL GROSS ACUTE PATIENT REVENUE	35,772,368	35,986,762	32,661,745	32,535,544	33,489,044	33,914,753	32,386,975	29,757,087	34,291,042	33,568,391	36,642,120	36,487,675	407,493,506
DEDUCTIONS FROM REVENUE ACUTE:													
MEDICARE CONTRACTUAL ALLOWANCES	10,678,666	10,840,639	9,814,649	9,779,652	10,009,718	10,282,950	9,698,906	8,868,327	10,181,656	10,013,211	10,962,902	10,879,374	122,010,650
MEDI-CAL CONTRACTUAL ALLOWANCES	10,398,417	10,310,040	9,380,899	9,331,530	9,707,489	9,599,446	9,343,870	8,647,919	10,043,028	9,762,448	10,618,845	10,638,716	117,782,647
BAD DEBT EXPENSE	419,889	422,423	383,714	381,626	392,993	397,930	379,870	348,975	402,378	393,932	430,170	428,441	4,781,841
CHARITY CARE	40,209	40,452	36,697	36,545	37,633	38,108	36,376	33,419	38,534	37,724	41,192	41,028	457,917
OTHER CONTRACTUALS AND ADJUSTMENTS	4,314,424	4,273,409	3,889,130	3,868,377	4,027,051	3,975,615	3,875,104	3,588,337	4,169,240	4,050,766	4,404,889	4,414,921	48,851,263
HOSPITALISTS/PEDS CONTRACTUAL ALLOW	13,323	13,403	12,165	12,118	12,473	12,631	12,062	11,083	12,771	12,502	13,647	13,589	151,767
TOTAL ACUTE DEDUCTIONS FROM REVENUE	25,864,928	25,900,366	23,516,754	23,409,848	24,187,357	24,306,680	23,346,188	21,498,060	24,847,607	24,270,583	26,471,645	26,416,069	294,036,085
NET ACUTE PATIENT REVENUE	9,907,440	10,086,396	9,144,991	9,125,696	9,301,687	9,608,073	9,040,787	8,259,027	9,443,435	9,297,808	10,170,475	10,071,606	113,457,421
OTHER OPERATING REVENUE	582,499	582,499	582,499	582,499	582,499	582,476	582,499	582,499	582,495	582,514	582,503	582,505	6,989,986
NET ACUTE OPERATING REVENUE	10,489,939	10,668,895	9,727,490	9,708,195	9,884,186	10,190,549	9,623,286	8,841,526	10,025,930	9,880,322	10,752,978	10,654,111	120,447,407
OPERATING EXPENSES:													
SALARIES & WAGES	3,788,166	3,814,227	3,695,948	3,818,921	3,700,653	3,823,109	3,829,550	3,465,874	3,832,575	3,712,407	3,835,564	3,724,841	45,041,835
REGISTRY	167,000	167,000	167,000	167,000	167,000	167,000	167,000	167,000	167,000	167,000	167,000	167,000	2,004,001
EMPLOYEE BENEFITS	1,991,633	1,984,917	1,899,607	1,923,655	1,815,213	1,847,226	2,013,012	1,821,797	2,010,004	1,946,732	2,010,619	1,947,409	23,211,824
PROFESSIONAL FEES	1,650,109	1,650,109	1,600,224	1,650,109	1,600,224	1,650,109	1,650,109	1,550,335	1,650,116	1,600,224	1,650,109	1,600,224	19,502,001
SUPPLIES	1,099,773	1,178,997	1,137,966	1,060,233	1,053,599	1,092,241	1,099,246	1,014,369	1,142,314	1,071,499	1,133,321	1,134,306	13,217,864
PURCHASED SERVICES	986,216	986,211	954,402	986,216	954,402	986,211	986,211	922,588	986,212	954,402	986,211	954,406	11,643,688
RENTAL	130,507	130,516	129,269	130,516	129,269	130,516	130,516	128,020	130,516	129,269	130,516	129,269	1,558,699
DEPRECIATION & AMORT	281,320	281,320	281,320	281,320	281,320	281,320	281,320	281,320	281,320	281,320	281,320	281,320	3,375,840
INTEREST	25,417	25,417	25,417	25,417	25,417	25,417	25,417	25,416	25,417	25,416	25,416	25,416	305,000
OTHER	378,202	378,206	366,744	378,202	366,744	378,203	378,202	355,281	378,202	366,744	378,202	366,744	4,469,676
TOTAL EXPENSES	10,498,343	10,596,920	10,257,897	10,421,589	10,093,841	10,381,352	10,560,583	9,732,000	10,603,677	10,255,013	10,598,278	10,330,935	124,330,428
NET OPERATING INCOME (LOSS)	(8,404)	71,975	(530,407)	(713,394)	(209,655)	(190,803)	(937,297)	(890,474)	(577,747)	(374,691)	154,700	323,176	(3,883,021)
NON-OPERATING REVENUE\EXPENSE:													
DONATIONS	5,000	5,000	5,000	5,000	5,000	105,000	5,000	5,000	10,000	5,000	5,000	10,000	170,000
PROPERTY TAX REVENUE	174,854	174,854	174,854	174,854	174,854	174,854	174,854	174,854	174,854	174,854	174,854	174,854	2,098,248
GO BOND PROP TAXES	170,388	170,388	170,388	170,388	170,388	170,388	170,388	170,388	170,388	170,388	170,388	170,388	2,044,656
GO BOND INT REVENUE\EXPENSE	(68,721)	(68,721)	(68,721)	(68,721)	(68,721)	(68,721)	(68,721)	(68,721)	(68,721)	(68,721)	(68,721)	(68,721)	(824,652)
OTHER NON-OPER REVENUE	13,843	13,843	13,843	13,843	13,843	13,843	13,843	13,843	13,843	13,843	13,843	13,843	166,116
OTHER NON-OPER EXPENSE	(25,412)	(25,412)	(25,412)	(25,412)	(25,412)	(25,412)	(25,412)	(25,412)	(21,578)	(21,578)	(21,578)	(21,578)	(289,608)
INVESTMENT INCOME	0	0	0	0	0	0	0	0	0	0	0	0	0
COLLABORATION CONTRIBUTIONS	0	0	0	0	0	0	0	0	0	0	0	0	0

HAZEL HAWKINS MEMORIAL HOSPITAL - ACUTE FACILITY
 BUDGET COMPARISON
 FOR PERIOD 06/30/24

	BUDGET 07/31/23	BUDGET 08/31/23	BUDGET 09/30/23	BUDGET 10/31/23	BUDGET 11/30/23	BUDGET 12/31/23	BUDGET 01/31/24	BUDGET 02/29/24	BUDGET 03/31/24	BUDGET 04/30/24	BUDGET 05/31/24	BUDGET 06/30/24	TWELVE MONTH TOTAL
TOTAL NON-OPERATING REVENUE/(EXPENSE)	269,952	269,952	269,952	269,952	269,952	369,952	269,952	269,952	278,786	273,786	273,786	278,786	3,364,760
NET SURPLUS (LOSS)	261,548	341,927	(260,455)	(443,442)	60,297	179,149	(667,345)	(620,522)	(298,961)	(100,905)	428,486	601,962	(518,261)

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HAZEL HAWKINS SKILLED NURSING FACILITIES
 BUDGET COMPARISON
 FOR PERIOD 06/30/24

	BUDGET 07/31/23	BUDGET 08/31/23	BUDGET 09/30/23	BUDGET 10/31/23	BUDGET 11/30/23	BUDGET 12/31/23	BUDGET 01/31/24	BUDGET 02/29/24	BUDGET 03/31/24	BUDGET 04/30/24	BUDGET 05/31/24	BUDGET 06/30/24	TWELVE MONTH TOTAL
GROSS SNF PATIENT REVENUE:													
ROUTINE SNF REVENUE	2,092,500	2,092,500	2,025,000	2,092,500	2,025,000	2,092,500	2,092,500	1,957,500	2,092,500	2,025,000	2,092,500	2,025,000	24,705,000
ANCILLARY SNF REVENUE	371,725	389,550	362,308	371,693	356,223	378,528	371,890	345,423	368,890	352,809	377,470	364,006	4,410,515
TOTAL GROSS SNF PATIENT REVENUE	2,464,225	2,482,050	2,387,308	2,464,193	2,381,223	2,471,028	2,464,390	2,302,923	2,461,390	2,377,809	2,469,970	2,389,006	29,115,515
DEDUCTIONS FROM REVENUE SNF:													
MEDICARE CONTRACTUAL ALLOWANCES	277,850	292,110	270,948	277,824	266,080	283,292	277,980	258,070	275,580	263,350	282,446	272,306	3,297,836
MEDI-CAL CONTRACTUAL ALLOWANCES	108,308	108,308	104,816	108,308	104,816	108,308	108,308	101,322	108,308	104,816	108,308	104,816	1,278,742
BAD DEBT EXPENSE	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	120,000
CHARITY	0	0	0	0	0	0	0	0	0	0	0	0	0
OTHER CONTRACTUALS AND ADJUSTMENTS	66,960	66,960	64,800	66,960	64,800	66,960	66,960	62,640	66,960	64,800	66,960	64,800	790,560
TOTAL SNF DEDUCTIONS FROM REVENUE	463,118	477,378	450,564	463,092	445,696	468,560	463,248	432,032	460,848	442,966	467,714	451,922	5,487,138
NET SNF PATIENT REVENUE	2,001,107	2,004,672	1,936,744	2,001,101	1,935,527	2,002,468	2,001,142	1,870,891	2,000,542	1,934,843	2,002,256	1,937,084	23,628,377
OPERATING EXPENSES:													
SALARIES & WAGES	939,785	939,787	911,305	939,788	911,304	939,788	939,788	880,923	939,785	911,307	939,787	911,307	11,104,654
REGISTRY	33,000	33,000	33,000	33,000	33,000	33,000	33,000	33,000	33,000	33,000	33,000	33,000	396,000
EMPLOYEE BENEFITS	530,243	529,994	512,655	529,432	506,967	517,199	533,315	482,299	533,531	516,637	533,788	517,573	6,243,633
PROFESSIONAL FEES	2,337	2,337	2,336	2,336	2,337	2,337	2,337	2,336	2,337	2,336	2,337	2,336	28,039
SUPPLIES	89,358	89,358	88,306	89,358	88,310	89,358	89,358	87,265	89,358	88,308	89,358	88,310	1,066,005
PURCHASED SERVICES	107,463	107,463	103,994	107,463	103,994	107,463	107,463	100,527	107,463	103,991	107,463	103,994	1,268,741
RENTAL	1,044	1,044	1,025	1,044	1,025	1,044	1,044	1,005	1,044	1,026	1,044	1,025	12,414
DEPRECIATION	39,457	39,457	39,453	39,453	39,453	39,457	39,461	39,464	39,453	39,453	39,453	39,453	473,467
INTEREST	0	0	0	0	0	0	0	0	0	0	0	0	0
OTHER	58,199	58,199	56,341	58,199	56,341	58,199	58,199	54,481	58,199	56,341	58,199	56,341	687,238
TOTAL EXPENSES	1,800,886	1,800,639	1,748,415	1,800,073	1,742,731	1,787,845	1,803,965	1,681,300	1,804,170	1,752,399	1,804,429	1,753,339	21,280,191
NET OPERATING INCOME (LOSS)	200,221	204,033	188,329	201,028	192,796	214,623	197,177	189,591	196,372	182,444	197,827	183,745	2,348,186
NON-OPERATING REVENUE/EXPENSE:													
DONATIONS	0	0	0	0	0	0	0	0	0	0	0	0	0
PROPERTY TAX REVENUE	30,857	30,857	30,857	30,855	30,856	30,857	30,857	30,857	30,857	30,857	30,855	30,857	370,279
OTHER NON-OPER EXPENSE	(7,288)	(7,288)	(7,288)	(7,288)	(7,288)	(7,288)	(7,288)	(7,288)	(6,188)	(6,188)	(6,188)	(6,188)	(83,056)
TOTAL NON-OPERATING REVENUE/(EXPENSE)	23,569	23,569	23,569	23,567	23,568	23,569	23,569	23,569	24,669	24,669	24,667	24,669	287,223
NET SURPLUS (LOSS)	223,790	227,602	211,898	224,595	216,364	238,192	220,746	213,160	221,041	207,113	222,494	208,414	2,635,409

HAZEL HAWKINS MEMORIAL HOSPITAL - COMBINED
BUDGET COMPARISON
FOR PERIOD 06/30/24

	BUDGET 07/31/23	BUDGET 08/31/23	BUDGET 09/30/23	BUDGET 10/31/23	BUDGET 11/30/23	BUDGET 12/31/23	BUDGET 01/31/24	BUDGET 02/29/24	BUDGET 03/31/24	BUDGET 04/30/24	BUDGET 05/31/24	BUDGET 06/30/24	TWELVE MONTH TOTAL
GROSS PATIENT REVENUE:													
ACUTE ROUTINE REVENUE	4,363,064	5,156,735	4,612,453	4,860,695	4,362,961	5,258,039	4,200,275	3,487,561	3,654,406	4,092,871	4,657,114	4,391,511	53,097,685
SNF ROUTINE REVENUE	2,092,500	2,092,500	2,025,000	2,092,500	2,025,000	2,092,500	2,092,500	1,957,500	2,092,500	2,025,000	2,092,500	2,025,000	24,705,000
ANCILLARY INPATIENT REVENUE	5,249,904	5,860,862	5,135,822	4,944,143	4,855,877	6,114,605	5,074,077	4,469,993	4,874,298	4,864,405	5,493,001	5,160,219	62,097,206
HOSPITALIST/PEDS I/P REVENUE	190,835	190,826	184,678	190,834	184,676	190,834	190,834	178,521	190,834	184,678	190,834	184,678	2,253,062
TOTAL GROSS INPATIENT REVENUE	<u>11,896,303</u>	<u>13,300,923</u>	<u>11,957,953</u>	<u>12,088,172</u>	<u>11,428,514</u>	<u>13,655,978</u>	<u>11,557,686</u>	<u>10,093,575</u>	<u>10,812,038</u>	<u>11,166,954</u>	<u>12,433,449</u>	<u>11,761,408</u>	<u>142,152,953</u>
ANCILLARY OUTPATIENT REVENUE	<u>26,278,885</u>	<u>25,106,491</u>	<u>23,031,676</u>	<u>22,850,160</u>	<u>24,382,329</u>	<u>22,668,398</u>	<u>23,232,279</u>	<u>21,908,991</u>	<u>25,878,989</u>	<u>24,719,822</u>	<u>26,617,234</u>	<u>27,055,849</u>	<u>293,731,103</u>
HOSPITALIST/PEDS O/P REVENUE	61,405	61,398	59,424	61,405	59,424	61,405	61,400	57,444	61,405	59,424	61,407	59,424	724,965
TOTAL GROSS OUTPATIENT REVENUE	<u>26,340,290</u>	<u>25,167,889</u>	<u>23,091,100</u>	<u>22,911,565</u>	<u>24,441,753</u>	<u>22,729,803</u>	<u>23,293,679</u>	<u>21,966,435</u>	<u>25,940,394</u>	<u>24,779,246</u>	<u>26,678,641</u>	<u>27,115,273</u>	<u>294,456,068</u>
TOTAL GROSS PATIENT REVENUE	<u>38,236,593</u>	<u>38,468,812</u>	<u>35,049,053</u>	<u>34,999,737</u>	<u>35,870,267</u>	<u>36,385,781</u>	<u>34,851,365</u>	<u>32,060,010</u>	<u>36,752,432</u>	<u>35,946,200</u>	<u>39,112,090</u>	<u>38,876,681</u>	<u>436,609,021</u>
DEDUCTIONS FROM REVENUE:													
MEDICARE CONTRACTUAL ALLOWANCES	10,956,516	11,132,749	10,085,597	10,057,476	10,275,798	10,566,242	9,976,886	9,126,397	10,457,236	10,276,561	11,245,348	11,151,680	125,308,496
MEDI-CAL CONTRACTUAL ALLOWANCES	10,506,725	10,418,348	9,485,715	9,439,838	9,812,305	9,707,754	9,452,178	8,749,241	10,151,336	9,867,264	10,727,153	10,743,532	119,061,389
BAD DEBT EXPENSE	429,889	432,423	393,214	391,626	402,993	407,930	389,870	358,975	412,378	403,932	440,170	438,441	4,901,841
CHARITY CARE	40,209	40,452	36,697	36,545	37,633	38,108	36,376	33,419	38,534	37,724	41,192	41,028	457,917
OTHER CONTRACTUALS AND ADJUSTMENTS	4,381,384	4,340,369	3,953,930	3,935,337	4,091,851	4,042,575	3,942,064	3,650,977	4,236,200	4,115,566	4,471,849	4,479,721	49,641,823
HOSPITALIST/PEDS CONTRACTUAL ALLOW	13,323	13,403	12,165	12,118	12,473	12,631	12,062	11,083	12,771	12,502	13,647	13,589	151,767
TOTAL DEDUCTIONS FROM REVENUE	<u>26,328,046</u>	<u>26,377,744</u>	<u>23,967,318</u>	<u>23,872,940</u>	<u>24,633,053</u>	<u>24,775,240</u>	<u>23,809,436</u>	<u>21,930,092</u>	<u>25,308,455</u>	<u>24,713,549</u>	<u>26,939,359</u>	<u>26,867,991</u>	<u>299,623,223</u>
NET PATIENT REVENUE	<u>11,908,547</u>	<u>12,091,068</u>	<u>11,081,735</u>	<u>11,126,797</u>	<u>11,237,214</u>	<u>11,610,541</u>	<u>11,041,929</u>	<u>10,129,918</u>	<u>11,443,977</u>	<u>11,232,651</u>	<u>12,172,731</u>	<u>12,008,690</u>	<u>137,085,798</u>
OTHER OPERATING REVENUE	582,499	582,499	582,499	582,499	582,499	582,476	582,499	582,499	582,495	582,514	582,503	582,505	6,989,986
NET OPERATING REVENUE	<u>12,491,046</u>	<u>12,673,567</u>	<u>11,664,234</u>	<u>11,709,296</u>	<u>11,819,713</u>	<u>12,193,017</u>	<u>11,624,428</u>	<u>10,712,417</u>	<u>12,026,472</u>	<u>11,815,165</u>	<u>12,755,234</u>	<u>12,591,195</u>	<u>144,075,784</u>
OPERATING EXPENSES:													
SALARIES & WAGES	4,727,951	4,754,014	4,607,253	4,758,709	4,611,957	4,762,897	4,769,338	4,346,797	4,772,360	4,623,714	4,775,351	4,636,148	56,146,489
REGISTRY	200,000	200,000	200,000	200,000	200,000	200,000	200,000	200,000	200,000	200,000	200,000	200,000	2,400,001
EMPLOYEE BENEFITS	2,521,876	2,514,911	2,412,262	2,453,087	2,322,180	2,364,425	2,546,327	2,304,096	2,543,535	2,463,369	2,544,407	2,464,982	29,455,457
PROFESSIONAL FEES	1,652,446	1,652,446	1,602,560	1,652,445	1,602,561	1,652,446	1,652,446	1,552,671	1,652,453	1,602,560	1,652,446	1,602,560	19,530,040
SUPPLIES	1,189,131	1,268,355	1,226,272	1,149,591	1,141,909	1,181,599	1,188,604	1,101,634	1,231,672	1,159,807	1,222,679	1,222,616	14,283,869
PURCHASED SERVICES	1,093,679	1,093,674	1,058,396	1,093,679	1,058,396	1,093,674	1,093,674	1,023,115	1,093,675	1,058,393	1,093,674	1,058,400	12,912,429
RENTAL	131,551	131,560	130,294	131,560	130,294	131,560	131,560	129,025	131,560	130,295	131,560	130,294	1,571,113
DEPRECIATION & AMORT	320,777	320,777	320,773	320,773	320,773	320,777	320,781	320,784	320,773	320,773	320,773	320,773	3,849,307
INTEREST	25,417	25,417	25,417	25,417	25,417	25,417	25,417	25,416	25,416	25,416	25,416	25,416	305,000
OTHER	436,401	436,405	423,085	436,401	423,085	436,402	436,401	409,762	436,401	423,085	436,401	423,085	5,156,914
TOTAL EXPENSES	<u>12,299,229</u>	<u>12,397,559</u>	<u>12,006,312</u>	<u>12,221,662</u>	<u>11,836,572</u>	<u>12,169,197</u>	<u>12,364,548</u>	<u>11,413,300</u>	<u>12,407,847</u>	<u>12,007,412</u>	<u>12,402,707</u>	<u>12,084,274</u>	<u>145,610,619</u>
NET OPERATING INCOME (LOSS)	<u>191,817</u>	<u>276,008</u>	<u>(342,078)</u>	<u>(512,366)</u>	<u>(16,859)</u>	<u>23,820</u>	<u>(740,120)</u>	<u>(700,883)</u>	<u>(381,375)</u>	<u>(192,247)</u>	<u>352,527</u>	<u>506,921</u>	<u>(1,534,835)</u>
NON-OPERATING REVENUE\EXPENSE:													
DONATIONS	5,000	5,000	5,000	5,000	5,000	105,000	5,000	5,000	10,000	5,000	5,000	10,000	170,000
PROPERTY TAX REVENUE	205,711	205,711	205,711	205,709	205,710	205,711	205,711	205,711	205,711	205,711	205,709	205,711	2,468,527
GO BOND PROP TAXES	170,388	170,388	170,388	170,388	170,388	170,388	170,388	170,388	170,388	170,388	170,388	170,388	2,044,656
GO BOND INT REVENUE\EXPENSE	(68,721)	(68,721)	(68,721)	(68,721)	(68,721)	(68,721)	(68,721)	(68,721)	(68,721)	(68,721)	(68,721)	(68,721)	(824,652)
OTHER NON-OPER REVENUE	13,843	13,843	13,843	13,843	13,843	13,843	13,843	13,843	13,843	13,843	13,843	13,843	166,116
OTHER NON-OPER EXPENSE	(32,700)	(32,700)	(32,700)	(32,700)	(32,700)	(32,700)	(32,700)	(32,700)	(27,766)	(27,766)	(27,766)	(27,766)	(372,664)
INVESTMENT INCOME	0	0	0	0	0	0	0	0	0	0	0	0	0
COLLABORATION CONTRIBUTIONS	0	0	0	0	0	0	0	0	0	0	0	0	0

HAZEL HAWKINS MEMORIAL HOSPITAL - COMBINED
 BUDGET COMPARISON
 FOR PERIOD 06/30/24

	BUDGET 07/31/23	BUDGET 08/31/23	BUDGET 09/30/23	BUDGET 10/31/23	BUDGET 11/30/23	BUDGET 12/31/23	BUDGET 01/31/24	BUDGET 02/29/24	BUDGET 03/31/24	BUDGET 04/30/24	BUDGET 05/31/24	BUDGET 06/30/24	TWELVE MONTH TOTAL
TOTAL NON-OPERATING REVENUE/(EXPENSE)	293,521	293,521	293,521	293,519	293,520	393,521	293,521	293,521	303,455	298,455	298,453	303,455	3,651,983
NET SURPLUS (LOSS)	485,338	569,529	(48,557)	(218,847)	276,661	417,341	(446,599)	(407,362)	(77,920)	106,208	650,980	810,376	2,117,148

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Productive FTE Comparison Worksheet

Hazel Hawkins Memorial Hospital

DEPT	Description	2023 Actual	2024 Budget	Variance From
		Prod* FTE's	Prod FTE's	2023 Actual
16010	HHH Intensive Care Unit	12.03	11.20	(0.83)
16170	HHH Med/Surg	28.41	24.80	(3.61)
16380	HHH Obstetrics	20.07	19.35	(0.72)
16580	HHH SNF Mabie	33.11	32.25	(0.86)
16587	HHH SNF Northside	34.48	33.10	(1.38)
17010	HHH Emergency Room	29.24	28.59	(0.65)
17076	HHH Orthopedic Specialty Clinic	4.89	4.94	0.05
17077	HHH Multi-Specialty Clinic	6.80	5.66	(1.14)
17078	HHH Primary Care Associates	0.03	0.00	(0.03)
17086	HHH Barragan Diabetes Clinic	9.55	9.32	(0.23)
17180	HHH Sunset Community Health Clinic	12.01	11.55	(0.46)
17181	HHH San Juan Bautista Clinic	4.44	5.14	0.70
17182	HHH Surgery Clinic	0.00	5.68	5.68
17187	HHH Fourth Street Clinic (4Th)San Juan	11.80	11.43	(0.37)
17189	HHH Mabie First (1st) Street	7.94	8.55	0.61
17290	HHH Home Health Care	8.54	0.00	(8.54)
17310	HHH Palliative Care	0.09	0.00	(0.09)
17317	HHH Palliative Care *Ns*	0.11	0.00	(0.11)
17318	HHH Palliative *Mabie*	0.25	0.00	(0.25)
17400	HHH Labor/Delivery	0.00	0.00	0.00
17420	HHH Surgery	15.02	15.52	0.50
17427	HHH Recovery-Pacu	5.44	5.53	0.09
17430	HHH Same Day Surgery	0.66	0.00	(0.66)
17500	HHH Laboratory	31.78	29.08	(2.70)
17510	HHH Lab Draw Stn-Mccray	2.12	2.31	0.19
17530	HHH Lab Draw Station-Sun	0.88	0.78	(0.10)
17560	HHH Echocardiology	0.84	0.90	0.06
17580	HHH 4Th St Draw Station	0.02	0.00	(0.02)
17590	HHH Sjb CI Draw Stat	0.05	0.11	0.06
17591	HHH Ekg	1.15	1.23	0.08
17630	HHH Radiology	12.28	11.57	(0.71)
17633	HHH Mammography	3.48	3.66	0.18
17660	HHH Mri	1.30	1.17	(0.13)

Productive FTE Comparison Worksheet

Hazel Hawkins Memorial Hospital

DEPT	Description	2023 Actual	2024 Budget	Variance From
		Prod* FTE's	Prod FTE's	2023 Actual
17670	HHH Ultrasound	5.44	5.05	(0.39)
17674	HHH Ultrasound-4Th St Cl	0.36	0.76	0.40
17680	HHH Ct Scan	5.46	6.96	1.50
17690	HHH Radiology Diag Clini	1.66	0.00	(1.66)
17720	HHH Respiratory Therapy	9.79	9.49	(0.30)
17770	HHH Physical Therapy	6.10	7.85	1.75
17778	HHH Phys Ther SNF Mabie	3.13	2.44	(0.69)
17780	HHH Speech Therapy	0.37	0.40	0.03
17788	HHH Speech Th SNF Mabie	0.28	0.34	0.06
17790	HHH Occupational Therapy	0.69	0.57	(0.12)
17798	HHH Occup Ther Mabie	0.49	0.44	(0.05)
17802	HHH Rec Therapy Mabie	3.39	3.43	0.04
17807	HHH Rec Therapy Northside	3.34	3.52	0.18
18320	HHH Nutrition Department	0.66	0.00	(0.66)
18327	HHH Nutrition Northside	0.24	0.00	(0.24)
18328	HHH Nutrition Mabie	0.36	0.00	(0.36)
18340	HHH Dietary	11.39	11.36	(0.03)
18347	HHH Dietary Northside	6.49	6.66	0.17
18348	HHH Dietary Mabie	6.96	7.00	0.04
18357	HHH Laundry Northside	0.87	0.88	0.01
18358	HHH Laundry Mabie	0.91	0.63	(0.28)
18380	HHH Central Supply	1.23	1.16	(0.07)
18388	HHH Cent Supp Mabie	0.27	0.25	(0.02)
18400	HHH Purchasing	3.79	3.80	0.01
18408	HHH Purchasing SNF	0.83	0.80	(0.03)
18420	HHH Security	0.42	0.00	(0.42)
18440	HHH Housekeeping	21.48	20.56	(0.92)
18447	HHH Housekeeping Northside	6.19	5.93	(0.26)
18448	HHH Housekeeping Mabie	6.95	6.86	(0.09)
18450	HHH Plant	0.75	0.36	(0.39)
18457	HHH Plant Northside	0.37	0.50	0.13
18458	HHH Plant Mabie	0.37	0.50	0.13
18460	HHH Maintenance	7.11	7.11	0.00

Productive FTE Comparison Worksheet

Hazel Hawkins Memorial Hospital

DEPT	Description	2023 Actual	2024 Budget	Variance From
		Prod* FTE's	Prod FTE's	2023 Actual
18467	HHH Maintenance Northside	1.02	1.04	0.02
18468	HHH Maintenance Mabie	0.98	1.04	0.06
18470	HHH Communications	2.59	2.54	(0.05)
18480	HHH Data Processing	7.28	6.31	(0.97)
18488	HHH Data Processing SNF	1.37	1.20	(0.17)
18490	HHH Disaster Management	0.43	0.45	0.02
18510	HHH Accounting	6.20	6.30	0.10
18518	HHH Accounting Mabie	1.17	1.19	0.02
18530	HHH Patient Accounting	8.20	12.41	4.21
18538	HHH Pat Accounting SNF	1.52	0.94	(0.58)
18550	HHH Credit/Collections	5.13	2.81	(2.32)
18570	HHH Admit/Registration	23.03	23.00	(0.03)
18610	HHH Administration	3.01	2.54	(0.47)
18618	HHH Administration SNF	0.41	0.40	(0.01)
18630	HHH Marketing & Develop	1.46	0.84	(0.63)
18650	HHH Personnel	2.31	2.07	(0.24)
18658	HHH Personnel SNF	0.56	0.56	(0.00)
18660	HHH Employee Health Serv	6.76	1.00	(5.76)
18670	HHH Auxiliary	0.00	0.00	0.00
18710	HHH Medical Staff	1.39	1.80	0.41
18720	HHH Nursing Admin	6.20	6.10	(0.10)
18727	HHH Nursing Admin Northside	3.49	4.00	0.51
18728	HHH Nursing Admin Mabie	4.47	5.10	0.63
18740	HHH In-Service Ed	0.05	0.05	(0.01)
18747	HHH In-Service Ed Northside	0.66	0.40	(0.26)
18748	HHH In-Service Ed Mabie	0.79	0.40	(0.39)
18750	HHH Prime\Qip Reporting	1.54	2.82	1.28
18751	HHH Utilization Review	3.02	2.98	(0.04)
18752	HHH Qual Assur & Resourc	5.57	3.00	(2.57)
18753	HHH Infection Control	0.86	0.45	(0.41)
18754	HHH Risk Management	0.00	0.00	0.00
18755	HHH Patient Experience	0.22	0.00	(0.22)
18770	HHH Community Education	0.57	0.54	(0.03)

Productive FTE Comparison Worksheet

Hazel Hawkins Memorial Hospital

DEPT	Description	2023 Actual Prod* FTE's	2024 Budget Prod FTE's	Variance From 2023 Actual
18790	HHH Foundation	1.14	1.34	0.20
Totals		520.35	494.64	(25.71)

SAN BENITO HEALTH CARE DISTRICT

CAPITAL EQUIPMENT FOR FISCAL YEAR ENDING JUNE 30, 2024

DEPARTMENT	FACILITY/DESCRIPTION	QTY	AMOUNT		QUARTER ENDING				TOTAL	TOTAL	TOTAL
			UNIT	EXTENDED	9/23	12/23	3/24	6/24	2024	2025	2026
HOSPITAL/ACUTE											
EKG	Philips ST80I Stress Testing System	1	24,750	24,750		24,750			24,750		
Lab	Pathology Interface	1	30,000	30,000						30,000	
Lab	Microscopes	1	15,000	15,000	15,000				15,000		
Lab	Matrix-Assisted Laser Desorption/Ionization Time-of-Flight Analyzer	1	200,000	200,000						200,000	
Lab	Infectious Disease Analyzer	1	100,000	100,000							100,000
Lab	Lab Middleware	1	100,000	100,000							100,000
Lab	Hematology Analyzer	2	200,000	400,000				400,000	400,000		
Lab	Refrigerators and Freezers	2	20,000	40,000			20,000	20,000	40,000		
Lab	BacT Alert Analyzer	1	150,000	150,000		150,000			150,000		
Lab	Platelet Rotator	1	20,000	20,000	20,000				20,000		
Lab	TOTAL	11		1,055,000	35,000	170,000	20,000	400,000	625,000	230,000	200,000
Information Technology	Darktrace Prevention Attack Surface Management System	1	241,500	241,500				80,500	80,500	80,500	80,500
Information Technology	KnowBe4 Security Awareness Training	1	37,548	37,548				37,548	37,548		
Information Technology	Servers for VMWare Hosting	1	90,000	90,000				90,000	90,000		
Information Technology	PureStorage for Virtual Environment	1	109,787	109,787				109,787	109,787		
Information Technology	TOTAL	4		478,835				317,835	317,835	80,500	80,500
Radiology	Ultrasound Machine	2	135,000	270,000				135,000	135,000	135,000	
Radiology	Mammogram Unit	1	450,000	450,000						450,000	
Radiology	Dexa Machine	1	90,000	90,000							90,000
Radiology	Fluoro Machine	1	600,000	600,000		600,000			600,000		
Radiology	X-Ray Machine	1	500,000	500,000						500,000	
Radiology	Portable X-Ray Machine	2	170,000	340,000						170,000	170,000
Radiology	C-Arm for Surgery	1	200,000	200,000			200,000		200,000		
Radiology	CT Machine	1	800,000	800,000	800,000				800,000		
Radiology	TOTAL	10		3,250,000	800,000	600,000	200,000	135,000	1,735,000	1,255,000	260,000
HOSPITAL ACUTE TOTAL		26		4,808,585	835,000	794,750	220,000	852,835	2,702,585	1,565,500	540,500
SNF											
Northside Nursing	Air Mattress Units	5	2,500	12,500	5,000	2,500	2,500	2,500	12,500		
Northside Nursing	Bed Mattress	12	5,100	61,200	15,300	15,300	15,300	15,300	61,200		
Northside Nursing	TOTAL	17		73,700	20,300	17,800	17,800	17,800	73,700		
SNF TOTAL		17		73,700	20,300	17,800	17,800	17,800	73,700		
DISTRICT TOTAL		43		4,882,285	855,300	812,550	237,800	870,635	2,776,285	1,565,500	540,500

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