



Hazel Hawkins
MEMORIAL HOSPITAL

**SPECIAL AND REGULAR MEETING OF THE BOARD OF DIRECTORS
SAN BENITO HEALTH CARE DISTRICT
911 SUNSET DRIVE, HOLLISTER, CALIFORNIA
THURSDAY, JUNE 23, 2022 – 5:00 P.M.
SUPPORT SERVICES BUILDING, 2ND-FLOOR, GREAT ROOM
IN-PERSON AND BY VIDEO CONFERENCE**

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.

This meeting will be held in-person and by video conference in order to reduce the risk of spreading COVID-19 and pursuant to the Governor’s Executive Orders and the County of San Benito Public Health Officer’s Orders. All votes taken during this meeting will be by roll call vote, and the vote will be publicly reported.

There is limited capacity for the public to attend at the physical location of the meeting. Members of the public may also participate in the public meeting using the Zoom application by using the information set forth below. Members of the public may submit email correspondence to lgarcia@hazelhawkins.com up to two (2) hours before the meeting begins. Members of the public may also speak during the meeting through the Zoom application during the public comment time period. Comments are limited to three (3) minutes.

**Phone Number: 1+ (669) 900-6833
Meeting ID: 931 6668 9955
Passcode: 564382**

AGENDA - AMENDED

	<u>Presented By</u>
1. <u>Call to Order/Roll Call</u>	Hernandez
2. <u>Approval of the Agenda</u>	Hernandez
> Motion/Second	
> Action/Board Vote-Roll Call	
3. <u>Board Announcements</u>	Hernandez
4. <u>Public Comment:</u> This opportunity is provided for members to comment on the closed session items, not to exceed three (3) minutes.	Hernandez
5. <u>Closed Session</u> (pgs. 1-3) (See Attached Closed Session Sheet Information)	Hernandez
6. <u>Reconvene Open Session/Closed Session Report</u> (estimated time 5:45 P.M.)	Hernandez

7. **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. 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. Board Members may not deliberate or take action on an item not on the duly posted agenda.

8. **Board Resolution** (pgs. 4-5)

Hernandez

Consider Approval of RESOLUTION NO. 2022-10 PROCLAIMING A LOCAL EMERGENCY, RATIFYING THE PROCLAMATION OF A STATE OF EMERGENCY BY GOVERNOR'S STATE OF EMERGENCY DECLARATION ON MARCH 4, 2020, AND AUTHORIZING REMOTE TELECONFERENCE MEETINGS FOR THE PERIOD June 23, 2022, THROUGH July 31, 2022.

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

9. **Consent Agenda—General Business** (pgs. 6-11)

Hernandez

(A Board Member may pull an item from the Consent Agenda for discussion.)

A. Minutes of the Regular Meeting of the Board of Directors May 26, 2022.

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

10. **Report from the Medical Executive Committee** (pgs. 12-15)

Dr. Bogey

A. Medical Staff Credentials: June 15, 2022

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

B. Proposed Approval for recommended changes to the Clinical Privileges Delineation Form for Certified Registered Nurse Anesthetist (CRNA).

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

C. Medical Staff Synopsis: May/June 2022

11. **President/Chief Executive Officer (CEO)** (pgs. 16-45)Hannah
Brady
Hannah

A. Mission Statement

B. Board Education – Pharmacy

C. Comments on Officer/Director Reports

- Chief Clinical Officer/Patient Care Services (Acute Facility)
- Provider Services & Clinic Operations
- Skilled Nursing Facilities Reports (Mabie Southside/Northside)
- Home Health Care Agency – No Report
- Laboratory

- Marketing
- Hazel Hawkins Memorial Hospital Auxiliary/Volunteer Services
- Foundation Report
- District Quality Practice & Patient Satisfaction Committee

D. CEO Written Report and Verbal Updates

- Administrative Dashboard
- Organization Chart

12. **Report from the Finance Committee** (pgs. 46-71)

Robinson

A. **Finance Committee Minutes**

Minutes of the Meeting of the Finance Committee, June 16, 2022.

B. **Finance Report/Financial Statement Review**

1. Review of Financial Report for May 2022.

C. **Financial Updates**

1. Finance Dashboard
2. 401 (a) Plan

13. **Recommendations for Board Action**

Robinson

A. **Capital:**

No capital items discuss.

B. **Contracts:**

No contracts to review.

C. **Physician Agreements:**

Casillas

1. Proposed Approval of M. Aslam Barra, M.D., OB/GYN - Amendment 1 to Professional Services Agreement, Multi-Specialty Clinic Coverage (pgs.)

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

2. Proposed Approval of Russel Dedini, M.D. – Addendum 6 to Orthopedic Services Coverage Agreement.

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

Robinson

D. FYE 06/30/2023 Operating and Capital Budgets.

14. **Report from the Facilities Committee** (pgs. 72-73)

Robinson

- A. Minutes of the Meeting of the Facilities Committee, June 16, 2022.

Hernandez

15. **New Business:** (pg. 74)

1. Proposed approval of Officer slate for Board of Directors for term ending December, 2022.

- A. Vice President – Bill Johnson
- B. Secretary – Don winn
- C. Treasurer – Rick Shelton
- D. Assistant Secretary – Josie Sanchez

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

16. **Adjournment**

The next Regular Meeting of the Board of Directors is scheduled for **Thursday, July 28, 2022**, at 5:00 p.m., and will be held in person, and by video conference in order to reduce the risk of spreading COVID-19.

The complete Board packet including subsequently distributed materials and presentations is available at the Board Meeting and in the Administrative Offices of the District. All items appearing on the agenda are subject to action by the Board. Staff and Committee recommendations are subject to change by the Board.

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.

***** To be distributed at or before the Board meeting**

**SAN BENITO HEALTH CARE DISTRICT BOARD OF DIRECTORS
JUNE 23, 2022**

AGENDA FOR CLOSED SESSION

Pursuant to California Government Code Section 54954.2 and 54954.5, the board agenda may describe closed session agenda items as provided below. No legislative body or elected official shall be in violation of Section 54954.2 or 54956 if the closed session items are described in substantial compliance with Section 54954.5 of the Government Code.

CLOSED SESSION AGENDA ITEMS

[] **LICENSE/PERMIT DETERMINATION**
(Government Code §54956.7)

Applicant(s): (Specify number of applicants) _____

[] **CONFERENCE WITH REAL PROPERTY NEGOTIATORS**
(Government Code §54956.8)

Property: (Specify street address, or if no street address, the parcel number, or other unique reference, of the real property under negotiation): _____

Agency negotiator: (Specify names of negotiators attending the closed session): _____

Negotiating parties: (Specify name of party (not agent): _____

Under negotiation: (Specify whether instruction to negotiator will concern price, terms of payment, or both):

[] **CONFERENCE WITH LEGAL COUNSEL-EXISTING LITIGATION**
(Government Code §54956.9(d)(1))

Name of case: (Specify by reference to claimant's name, names of parties, case or claim numbers):
_____, or

Case name unspecified: (Specify whether disclosure would jeopardize service of process or existing settlement negotiations): _____

[] **CONFERENCE WITH LEGAL COUNSEL-ANTICIPATED LITIGATION**
(Government Code §54956.9)

Significant exposure to litigation pursuant to Section 54956.9(d)(2) or (3) (Number of potential cases): _____

Additional information required pursuant to Section 54956.9(e): _____

Initiation of litigation pursuant to Section 54956.9(d)(4) (Number of potential cases): _____

[] **LIABILITY CLAIMS**
(Government Code §54956.95)

Claimant: (Specify name unless unspecified pursuant to Section 54961): _____

Agency claimed against: (Specify name): _____

1.

- THREAT TO PUBLIC SERVICES OR FACILITIES**
(Government Code §54957)

Consultation with: (Specify the name of law enforcement agency and title of officer): _____

- PUBLIC EMPLOYEE APPOINTMENT**
(Government Code §54957)

Title: (Specify description of the position to be filled):

- PUBLIC EMPLOYMENT**
(Government Code §54957)

Title: (Specify description of the position to be filled): _____

- PUBLIC EMPLOYEE PERFORMANCE EVALUATION**
(Government Code §54957)

Title: (Specify position title of the employee being reviewed): ____

- PUBLIC EMPLOYEE DISCIPLINE/DISMISSAL/RELEASE**
(Government Code §54957)

(No additional information is required in connection with a closed session to consider discipline, dismissal, or release of a public employee. Discipline includes potential reduction of compensation.)

- CONFERENCE WITH LABOR NEGOTIATOR**
(Government Code §54957.6)

Agency designated representative: Barbara Vogelsang, Chief Clinical Officer

Employee organization: California Nurses Association (CNA)

Unrepresented employee: (Specify position title of unrepresented employee who is the subject of the negotiations):

- CASE REVIEW/PLANNING**
(Government Code §54957.8)

(No additional information is required to consider case review or planning.)

- REPORT INVOLVING TRADE SECRET**
(Government Code §37606 & Health and Safety Code § 32106)

Discussion will concern: (Specify whether discussion will concern proposed new service, program, or facility):

1. Trade Secrets, Strategic Planning, Proposed New Programs, and Services.

Estimated date of public disclosure: (Specify month and year): unknown

HEARINGS/REPORTS
(Government Code §37624.3 & Health and Safety Code §§1461, 32155)

Subject matter: (Specify whether testimony/deliberation will concern staff privileges, report of medical audit committee, or report of quality assurance committee):

1. Report from Quality, Risk, and Compliance.

CHARGE OR COMPLAINT INVOLVING INFORMATION PROTECTED BY FEDERAL LAW (Government Code §54956.86)

(No additional information is required to discuss a charge or complaint pursuant to Section 54956.86.)

ADJOURN TO OPEN SESSION

**RESOLUTION NO. 2022-10
OF THE BOARD OF DIRECTORS OF
SAN BENITO HEALTH CARE DISTRICT**

**PROCLAIMING A LOCAL EMERGENCY, RATIFYING THE PROCLAMATION OF A
STATE OF EMERGENCY BY GOVERNOR'S STATE OF EMERGENCY DECLARATION
ON MARCH 4, 2020, AND AUTHORIZING REMOTE TELECONFERENCE MEETINGS
FOR THE PERIOD JUNE 23, 2022 THROUGH JULY 31, 2022**

WHEREAS, San Benito Health Care District ("District") is a public entity and local health care district organized and operated pursuant to Division 23 of the California Health and Safety Code;

WHEREAS, the District Board of Directors is committed to preserving and nurturing public access and participation in its meetings;

WHEREAS, all meetings of the District's governing body are open and public, as required by The Ralph M. Brown Act, so that members of the public may attend, participate, and observe the District's public meetings;

WHEREAS, The Brown Act, Government Code section 54953(e), makes provisions for remote teleconferencing participation in meetings by members of a legislative body, without compliance with the requirements of Government Code section 54953(b)(3), subject to the existence of certain conditions;

WHEREAS, a required condition is that a state of emergency is declared by the Governor pursuant to Government Code section 8625, proclaiming the existence of conditions of disaster or of extreme peril to the safety of persons and property within the state caused by conditions as described in Government Code section 8558;

WHEREAS, a proclamation is made when there is an actual incident, threat of disaster, or extreme peril to the safety of persons and property within the boundaries of the District, caused by natural, technological, or human-caused disasters;

WHEREAS, it is further required that (i) state or local officials have imposed or recommended measures to promote social distancing, or (ii) the legislative body meeting in person would present imminent risks to the health and safety of attendees;

WHEREAS, such conditions now exist within the District Boundaries of San Benito Health Care District;

WHEREAS, the District Board of Directors does hereby acknowledge the current state of emergency and is following the September 30, 2021 Recommendations on Social Distancing and Hybrid Meetings issued by San Benito County Health and Human Services Agency recommending that public agencies continue to utilize remote meetings for the purpose of preventing the transmission of COVID-19;

WHEREAS, as a consequence of the local emergency, the District Board of Directors may conduct meetings without compliance with Government Code Section 54953(b)(3), as authorized by Section 54953(e), and that the District shall comply with the requirements to provide the public with access to the meetings pursuant to Section 54953(e) (2);

WHEREAS, meetings of the District Board of Directors will be available to the public via the zoom application listed on the agenda;

NOW THEREFORE IT IS HEREBY ORDERED AND DIRECTED THAT:

1. Recitals. The Recitals set forth above are true and correct and are incorporated into this Resolution by this reference.
2. Proclamation of Local Emergency. The District hereby proclaims that a local emergency continues to exist throughout San Benito County, and as of September 30, 2021, the San Benito County Health Department continues to recommend that physical and social distancing strategies be practiced in San Benito County, which includes remote meetings of legislative bodies, to the extent possible.
3. Ratification of Governor's Proclamation of a State of Emergency. The District hereby ratifies the Governor of the State of California's Proclamation of State of Emergency, effective as of its issuance date of March 4, 2020.
4. Remote Teleconference Meetings. The District Board of Directors is hereby authorized and directed to take all actions necessary to carry out the intent and purpose of this Resolution including conducting open and public meetings in accordance with Government Code section 54953(e) and other applicable provisions of The Brown Act.
5. Effective Date of Resolution. This Resolution shall take effect immediately upon its adoption and shall be effective until the earlier of (i) July 31, 2022, or such time the District adopts a subsequent resolution in accordance with Government Code section 54953(e)(3) to extend the time during which the District may continue to meet via teleconference meeting all the requirements of Section (3)(b).

This Resolution was adopted at a duly noticed Regular Meeting of the Board of Directors of the District on June 23, 2022, by the following vote.

AYES:
NOES:
ABSTENTIONS:
ABSENT:

Board Member
San Benito Health Care District

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

**THURSDAY, MAY 26, 2022
MINUTES**

HAZEL HAWKINS MEMORIAL HOSPITAL

Directors Present

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

Also, Present In-person/Video Conference

Steven Hannah, Chief Executive Officer
Mark Robinson, Chief Financial Officer
Barbara Vogelsang, Chief Clinical Officer
Mary Casillas, Chief Operating Office/VP of Ambulatory Services
Laura Garcia, Executive Assistant
Dr. Bogey, Chief of Staff
Heidi A. Quinn, District Legal Counsel
Sherrie Bakke, Patient & Community Engagement/Business Development

Pursuant to Executive Order N-25-20 issued by the Governor of the State of California in response to concerns regarding COVID-19, Board Members of San Benito Health Care District, a local health care district, are permitted to participate in this duly noticed public meeting via teleconference and certain requirements of The Brown Act are suspended.

1. Call to Order

The meeting was conducted in-person and via video conferencing and attendance was taken by roll call. Directors Hernandez, Johnson, Shelton, and Sanchez were present. A quorum was present and the meeting was called to order at 5:00 p.m. by Board President, Jeri Hernandez. Director Hernandez requested a moment of silence - Robb Elementary School shooting in Uvalde.

2. Approval of Agenda

MOTION: Director Hernandez moved to approve the Agenda and was seconded by Director Johnson. Moved/Seconded/and Unanimously Carried. Ayes: Hernandez, Johnson, Sanchez, Shelton. (Roll Call)

3. Board Announcements

Director Sanchez and Hernandez attended the Auxiliary spring luncheon.

4. Closed Session

Before going into a closed session, Director Hernandez asked if there was any public comment in regards to the closed session agenda items. There being no public comment, the Board of Directors went into a closed session at 5:04 pm to discuss Labor Negotiations, a Report Involving Trade Secrets, and Hearing Reports from Quality, Risk, and Compliance.

5. Reconvene Open Session/Closed Session Report

The Board of Directors reconvened into Open Session at 5:36 pm. Board President, Jeri Hernandez reported that in Closed Session the Board discussed Labor Negotiations, Report Involving Trade Secret, and Hearing Reports from Quality, Risk, and Compliance. No action was taken.

6. **Public Comment**

Public comment was received.

7. **Board Resolution No. 2022-09**

Item: **Proposed Approval for RESOLUTION NO. 2022-09 OF THE BOARD OF DIRECTORS OF SAN BENITO HEALTH CARE DISTRICT PROCLAIMING A LOCAL EMERGENCY, RATIFYING THE PROCLAMATION OF A STATE OF EMERGENCY BY GOVERNOR'S STATE OF EMERGENCY DECLARATION ON MARCH 4, 2020, AND AUTHORIZING REMOTE TELECONFERENCE MEETINGS FOR THE PERIOD, MAY 31, 2022 THROUGH JUNE 30, 2022.**

No public comment.

MOTION: The Board of Directors moved to approve RESOLUTION NO. 2022-09 OF THE BOARD OF DIRECTORS OF SAN BENITO HEALTH CARE DISTRICT PROCLAIMING A LOCAL EMERGENCY, RATIFYING THE PROCLAMATION OF A STATE OF EMERGENCY BY GOVERNOR'S STATE OF EMERGENCY DECLARATION ON APRIL 30, 2020, AND AUTHORIZING REMOTE TELECONFERENCE MEETINGS FOR THE PERIOD MAY 31, 2022 THROUGH JUNE 30, 2022 and was seconded. Moved/Seconded/and Unanimously Carried. Ayes: Sanchez, Shelton, Hernandez, Johnson. (Roll Call)

8. **Consent Agenda-General Business**

Director Hernandez presented the Consent Agenda and requested a motion to approve the Consent Agenda.

- A. Minutes of the Regular Meeting of the Board of Directors, April 28, 2022.
- B. Quality Assessment and Performance Improvement Program.

No public comment.

MOTION: The Board of Directors moved to approve the Consent Agenda, and was seconded. Moved/Seconded/and Unanimously Carried. Ayes: Johnson, Hernandez, Sanchez, Shelton. (Roll Call)

9. **Report from the Medical Executive Committee**

A full written report can be found in the Board packet.

- A. Credentials Report: Chief of Staff, Dr. Bogey presented the Credentials Report from May 18, 2022.

Item: **Proposed Approval of the Credentials Report; Four (0) New Appointments, Three (3) Reappointments, One (1) AHP-Reappointment, and One (1) Resignations/Retirements.**

No public comment.

MOTION: The Board of Directors moved to approve the Credentials Report as presented and was seconded. Moved/Seconded/and Unanimously Carried. Ayes: Sanchez, Johnson, Hernandez, Shelton. (Roll Call)

- B. Medical Staff Synopsis: Dr. Bogey, Chief of Staff, provided a summary of the Medical Executive Committee Report.

10. President/Chief Executive Officer

A full written report can be found in the Board packet for Board Education, and CEO Report.

Mr. Hannah did a review of the Mission and Vision Statements. He read it allowed so that it can be reflected upon. He stated he is humbled daily and highly honored to work with highly confident nurses, support staff, physicians, and all the individuals who provide care to fulfill this mission statement.

Mr. Hannah presented Melissa Schilling, Infection Preventionist who is providing Board Education.

Board Education: Infection Preventionist, Melissa Schilling

Melissa is a Board Certified Infection Preventionist who started working at with the District in September 2021. She has lived in Hollister since 1999. She started her nursing career at Valley Medical Center, went to Public Health in San Benito, then went to Santa Clara County Public Health and worked with them during COVID-19, she learned about infection control and become Board Certified.

She discussed Surgical Site Infections (SSI) and the probability of infection. She indicated there are methods used to assess the different types of surgical procedures. The American Society of Anesthesiologists created the ASA Score and the scores range from 1 to 6 with number 1 being the lowest risk. Melissa also provided a summary of surgery classes which are numbered from 1 to 4 with Class I being the lowest risk. A summary of superficial SSI and examples were provided. National Health Safety Network (NHSN) Surveillance requires a 30-day or 90-day surveillance. She reports monthly to NHSN after reviewing the report that IT build for her. Melissa also provided a summary of how to reduce bacteria near the surgical site, and she also reviewed hand hygiene, indicating the removal of rings, watches, and bracelets before beginning the surgical scrub.

CEO Report

Mr. Hannah asked Ms. Vogelsang to report on the activities provided during hospital week and for nurses day. She indicated there was a recognition for nurses and breakfast was catered by Paine's and approximately 80 nurses attended. Hospital week was then celebrated the following Monday with a DJ, 3 food trucks, and a game called corn hole. The theme was superheroes. Tuesday Calavera was set up on the inner patio and the next day donut holes were passed out to the staff, and the following day ice cream was given to staff. A gift was also provided to staff, a sling bag. Mr. Hannah thanked Sherrie and Barbara, he enjoyed participating in the nurses' breakfast.

Mr. Hannah commented on the SNFs report and indicated the census reached 90 and on May 26th they reached a census of 93. Their census is growing and it is nice to see the service can be provided to the community.

In late April there was an appreciation reception for the Auxiliary during the National recognition week and in May the Auxiliary had their annual Spring luncheon.

Mr. Hannah stated that the Administrative Dashboard is included on the final page of the CEO report. He indicated that he and other team members will discuss the various metrics along with MTD and YTD results. Mr. Hannah provided a summary of the organizational leadership and indicated Michael Brink was selected as the Business Office Director for Hazel Hawkins Memorial Hospital (HHMH) to replace the current Director who is retiring. Michael's first day was Monday, May 23rd. Mr. Hannah stated that Michael's role as a leader is a key foundational block to the organization. He is the director over stream activities and he comes from the Central Valley.

Mr. Hannah provided updates on the Master Plan and indicated education has been provided to employees, physicians, volunteers, and foundation members. Most recently, he and Sherrie presented at the San Benito Business Council, and he spoke with the Board about pursuing a second campus. The Board has given

direction to plan a second campus that will be a location where a new modern inpatient hospital can be built ensuring that HHMH meets the State seismic mandates within SB 1953 for inpatient hospital structures by 2030 and the healthcare needs of the growing community served by the District.

Mr. Hannah indicated that Assemblymember Eduardo Garcia of District 56 has authored a one-time budget request on behalf of all District Hospitals across California for funding to help meet the 2030 seismic requirements of \$1B. He indicated he shared the letter with Assemblymember Rivas and Senator Caballero, Rivas already signed the letter and Caballero was willing to sign showing her support. He thanked Director Hernandez for also calling Assemblymember Rivas for the support.

Mr. Hannah stated the Board has delegated the CEO and Executive team to be able to move forward with the administration of the hospital as final agreements are prepared to go to the Board of Directors for review and approval. The Executive Team has the tools to work on incentives including legal counsel. He also indicated that letters of intent come first before the Professional Services Agreement. The letter of intent is a legal document but non-binding and leads to a PSA which comes to the Board.

Dr. Nguyen, Thomas has accepted his letter of intent, and the PSA was on the Finance agenda and Board agenda for review and consideration for approval. The start date for the new surgeon will be in late June.

An administrative decision was made to transition to Central California Anesthesiology Solutions (CCAS) for anesthesia coverage. Mr. Hannah signed a letter of intent with CCAS, previously, when it was determined the last and final proposal from the current provider of anesthesia was not acceptable due to the large increase in subsidy. He stated CCAS is an MD and CRNA model. Other provider-related agreements were discussed at the Finance Committee and are also on the agenda for Board review and consideration of approval.

Mr. Hannah stated that CHA was on-site and had an intriguing conversation about many topics including funding and things that are happening across the state. Sherrie Bakke and Mr. Hannah toured the Epicenter and he indicated that it would be a great location for the Strategic Planning Retreat.

Mr. Hannah stated that as of this morning census was 19, there are 16 employees off due to covid and this makes staffing a challenge, and HHMH is at 99 percent booster compliant.

CHA is working on an extension for a bed waiver to go through September 30th, the current bed waiver expires June 30th. The waiver allows flexibility for additional beds beyond the licensed capacity if there is an influx of covid patients. The hospital was at zero covid patients as of today.

Sherrie Bakke provided an update on the administrative dashboard. She stated the team is working together on coming up with a conclusion to become better. Sherrie is proud of the people she is working with.

Barbara indicated there is an increase of readmission rates and a physician group will be reviewing the readmissions for an opportunity to improve and see what can be done differently. Mark also provided an update of the average daily census, the average daily census for SNF, surgery cases, EBIDA, and the operating margin.

Mr. Hannah noted Administration is using the same Strategic plan strategies until the offsite strategic planning occurs.

9.

11. **Report from the Finance Committee**

A full report can be found in the Board packet.

A. Finance Committee Minutes

Minutes of the meeting of the Finance Committee, from May 19, 2022, have been provided to the Board of Directors.

B. Financial Report/Financial Statement Review

1. Finance Statements – April 2022
2. Finance Dashboard
3. Salinas Valley Radiologist – Radiologist Recruitment Agreement

12. **Recommendation for Board Action**

A. Capital:

No capital items to discuss.

B. Contracts:

Item: **Proposed Approval for Steve Clark & Associates, Inc.-Consulting Services for the QIP – Amendment No. 1.**

Mr. Robinson indicated the amendment to the agreement of services is effective July 1, 2022, and extends the term of the original agreement through June 30, 2023. The total cost for the one-year extension is \$114,000.

No public comment.

MOTION: The Board of Directors moved to approve 13/B. 1 as reflected on the agenda and was seconded. Moved/Seconded/and Unanimously Carried. Ayes: Johnson, Sanchez, Shelton, Hernandez. (Roll Call)

C. Physician Agreements

Item: **Proposed Approval for Thomas X. Nguyen – Professional Service Agreement and Physician Recruitment Agreement for Orthopedics.**

Dr. Nguyen is a board-eligible orthopedic surgeon fellowship-trained in Sports Medicine. He will provide full-time professional orthopedic surgery and sports medicine and call coverage in the hospital and Orthopedic Specialty clinic.

No public comment.

MOTION: The Board of Directors moved to approve the Professional Services Agreement for a 3-year term, and the Physician Recruitment Agreement for Dr. Nguyen Moved/Seconded/and Unanimously Carried. Ayes: Shelton, Johnson, Sanchez, Hernandez, (Roll Call)

Item: **Proposed Approval for Central California Anesthesiology Solutions Professional Services Agreement for anesthesia coverage effective July 1, 2022.**

Central California Anesthesiology Solutions (CCAS) is a Central California-based, a general partnership of Board-certified CRNA and Physician Anesthesiologists. The contract term is for 3 years with an expected annual cost of \$2,017,120.

Public comment was received.

10.

MOTION: The Board of Directors moved to approve the proposed agreement for item 2. C and was seconded. Moved/Seconded/and Unanimously Carried. Ayes: Johnson, Shelton, Sanchez, Hernandez. (Roll Call)

Item: Proposed Approval of Amendment No. 4 with Pinehurst Hospitalists Medical Group for hospitalist coverage with an effective date of June 1, 2022, for 3 years as described in the contract review worksheet.

No public comment.

MOTION: The Board of Directors moved to approve the fourth Amendment with Pinehurst Hospitalists as outlined in the review worksheet and was seconded. Moved/Seconded/and Unanimously Carried. Ayes: Sanchez, Hernandez, Shelton, Johnson. (Roll Call)

Item: Proposed Approval of Professional Services Agreement with Cytodiagnosics for pathology and clinical laboratory services with an effective date of July 1, 2022, for 3 years as described in the contract review worksheet.

No public comment.

MOTION: The Board of Directors moved to approve the Cytodiagnostice for pathology and clinical laboratory services with an effective date of July 1, 2022, for 3 years and was seconded. Moved/Seconded/and Unanimously Carried. Ayes: Sanchez, Hernandez, Shelton, Johnson. (Roll Call)

12. Report from District Facilities & Service Development Committee

A full report can be found in the Board packet.

- A. Minutes of the meeting of the Facilities Committee, from May 19, 2022, have been provided to the Board of Directors.

14. New Business:

Item: Consider appointment and conduct a swearing-in ceremony of a new Board member to fill the vacancy on the Board of Directors.

No public comment.

MOTION: The Board of Directors moved to approve the appointment and the swearing-in of Don Winn and was seconded. Moved/Seconded/and Unanimously Carried. Ayes: Shelton, Sanchez, Johnson, Hernandez. (Roll Call)

After the action was taken, Director Hernandez conducted the swearing-in of Don Winn appointing him as a new Board Member for the San Benito Health Care District, and he will hold office until the completion of the term.

15. 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, June 23, 2022**, at 5:00 p.m., and will be conducted in person and via teleconference to reduce the risk of spreading COVID-19, and pursuant to SBHCD Board Resolution No. 2022-05.



MEMORIAL HOSPITAL
SKILLED NURSING FACILITIES
HOME HEALTH AGENCY

San Benito Health Care District

**MEDICAL EXECUTIVE COMMITTEE
CREDENTIALS REPORT
JUNE 15, 2022**

NEW APPOINTMENTS

PRACTITIONER	DEPT/SERVICE	STATUS	PROCTOR ASSIGNED
Nguyen, Hoang DO	Medicine/Interventional Cardiology	Provisional	
Nguyen, Jullian MD	Medicine/Family Medicine	Provisional	
Nguyen, Thomas MD	Surgery/Orthopedics	Provisional	

REAPPOINTMENTS

PRACTITIONER	DEPT/SERVICE	STATUS	TERM
May, Megan MD	Medicine/Nephrology	Affiliate	2 yr

ADDITIONAL PRIVILEGES

PRACTITIONER	FIELD	SERVICE

ALLIED HEALTH – NEW APPOINTMENT

PRACTITIONER	FIELD	STATUS
Twichell, Matthew CRNA	Anesthesiology	Provisional

AHP – REAPPOINTMENTS

PRACTITIONER	DEPT/SERVICE	STATUS	TERM

RESIGNATIONS/RETIREMENTS

PRACTITIONER	DEPT/SERVICE	CURRENT STATUS/DEPT	COMMENT
Tremblay, Robert FNP	Clinics/NP	Current	Retirement 6/10/22

Rev: 6/14/22



HAZEL HAWKINS MEMORIAL HOSPITAL CLINICAL PRIVILEGES DELINEATION FORM

CERTIFIED *REGISTERED* NURSE ANESTHETIST (CRNA)

Name of Applicant: _____

In order to be eligible to request clinical privileges for both initial appointment and reappointment, the applicant must meet the following qualifications:

- **Minimum formal training:** Applicants must be able to demonstrate successful completion of a Nurse Anesthesia educational program accredited by the American Association of Nurse Anesthetist (AANA) Council on Accreditation of Nurse Anesthetist Educational Programs (*CANAEP*), or a predecessor or successor agency.
- Current Certification by the ~~Council on Certification of Nurse Anesthetist~~ *National Board on Certification and Recertification of Nurse Anesthetists (NBCRNA)*.
- In addition, the CRNA applicant must meet the following requirements:
 - Possession of a current unrestricted California RN license
 - Possession of a current unrestricted California CRNA license
 - Possession of current *BLS ACLS* certification
 - ~~Ability to obtain professional liability coverage through the District's insurance carrier~~ *Evidence of current professional liability insurance coverage with limits required by the Medical Staff Bylaws.*
 - *Evidence of forty (40) hours of continuing education in the past two (2) years.*
 - *The Certified Registered Nurse Anesthetist will be responsible to the Medical Director of Anesthesia, and to the Medical Executive Committee.*
- **Required previous experience:** Documentation of training and experience of requested practice prerogatives and 200 patient care activities for the CRNA providing services for patients for the preceding two (2) years.

New applicants will be required to provide documentation of the number and types of cases they were involved with during the past 24 months. Applicants have the burden of producing information deemed adequate by the Medical Staff for a proper evaluation of current competence, and other qualifications.

If the applicant meets the above criteria, he/she may request privileges as specified below.

REQUESTED (CRNA)	GRANTED (Dept Chair)	
<input type="checkbox"/>	<input type="checkbox"/>	Obtain a complete History & Physical exam
<input type="checkbox"/>	<input type="checkbox"/>	Perform pre-anesthetic assessment of patient including assignment of an ASA status and development of an anesthetic plan

REQUESTED (CRNA)	GRANTED (Dept Chair)	
<input type="checkbox"/>	<input type="checkbox"/>	Render informed consent pertinent to the proposed anesthetic plan
<input type="checkbox"/>	<input type="checkbox"/>	Management of the normal pre, intra, and postoperative patient including post-op acute pain management.
<input type="checkbox"/>	<input type="checkbox"/>	Order, conduct and interpret labs and other diagnostic studies.
<input type="checkbox"/>	<input type="checkbox"/>	Performance of tasks and functions which fall within the usual and customary scope of nursing practice the CRNA
<input type="checkbox"/>	<input type="checkbox"/>	<i>Consults with Anesthesiologists, Surgeons, or other Specialists when needed to facilitate patient care</i>
<input type="checkbox"/>	<input type="checkbox"/>	Establish and maintain patient airway
<input type="checkbox"/>	<input type="checkbox"/>	Establish peripheral arterial and venous access lines
<input type="checkbox"/>	<input type="checkbox"/>	Central Venous Catheter Placement (in the care of surgical patients as deemed necessary & under direct MD supervision in the Perioperative Setting)
<input type="checkbox"/>	<input type="checkbox"/>	Recognize and treat routine complications of anesthesia
		<i>Initiate resuscitation measures using ACLS protocols</i>
<input type="checkbox"/>	<input type="checkbox"/>	Monitor the need for Ordering, administration, and monitoring of blood and blood products <i>for resuscitation and physiologic stability and administer when directed by a surgeon or attending physician</i>
<input type="checkbox"/>	<input type="checkbox"/>	Evaluate the post anesthetic course, release patients from post-anesthesia recovery care following department <i>and hospital</i> protocols or under the supervision of the anesthesiologist on call
<input type="checkbox"/>	<input type="checkbox"/>	Write or give <i>Provide</i> orders regarding peri-operative drugs to be administered by other nurses
<input type="checkbox"/>	<input type="checkbox"/>	Provide intravenous sedation or monitored anesthesia care
		General Anesthesia:
<input type="checkbox"/>	<input type="checkbox"/>	• Inhalation Anesthesia
<input type="checkbox"/>	<input type="checkbox"/>	• Intravenous Anesthesia
		Regional Anesthesia:
<input type="checkbox"/>	<input type="checkbox"/>	• Epidural Anesthesia
<input type="checkbox"/>	<input type="checkbox"/>	• Topical and Infiltration as in Field Blocks
<input type="checkbox"/>	<input type="checkbox"/>	• Interscalene <i>Subarachnoid</i> Blocks
<input type="checkbox"/>	<input type="checkbox"/>	• Spinal Blocks <i>Upper extremity peripheral nerve blocks</i>
<input type="checkbox"/>	<input type="checkbox"/>	• <i>Lower extremity peripheral nerve blocks</i>
<input type="checkbox"/>	<input type="checkbox"/>	• <i>Thoracic peripheral nerve blocks</i>
<input type="checkbox"/>	<input type="checkbox"/>	• <i>Truncal peripheral nerve blocks</i>

CRNA Applicant: _____ Date _____

Medical Director, Anesthesia ~~Chair, Anesthesia Division~~ _____ Date _____

Chair, Surgery Department: _____ Date _____

Approved Medical Executive Committee: 06/15/2022
 Approved Board of Directors:



Hazel Hawkins
MEMORIAL HOSPITAL

San Benito Health Care District
Board of Directors Meeting
23 June 2022
Chief Clinical Officer Report

- Emergency Department: 2,169 Visits; 182 Admitted; 19 Codes Trauma; 17 Codes Stroke;
- Med / Surg: ADC 13.74 (426 patients); Significant work being done on Fall Prevention and Post-Fall follow up
- ICU: ADC 3.23 (100 patients)
- OB: 33 deliveries; 108 Outpatient Visits
- The American Heart Association has awarded our Stroke Program the Stroke GOLD PLUS with Target: Stroke Honor Roll Award. This comes for the management of stroke patients with the most up-to-date evidence-based treatment guidelines.
- The Quality Department is developing a plan to meet The Joint Commission's new Standards regarding Emergency Management.
- San Benito Home Health recently employed a full time Physical Therapist who remains busy enough to require an additional therapist.

16.



Hazel Hawkins
MEMORIAL HOSPITAL

To: San Benito Health Care District Board of Directors
 From: Amy Breen-Lema, Director, Provider Services & Clinic Operations
 Date: June 13, 2022
 Re: All Clinics – May 2022

2022 Rural Health and Specialty Clinics' visit volumes

Total visits for May 2022 in all outpatient clinics = 6,647

	Jan 2022	Feb 2022	Mar 2022	Apr 2022	May 2022	June 2022
Sunset/Annex	1234	994	1102	1055	1108	
San Juan Bautista	394	283	397	381	321	
1st Street	915	752	1040	661	563	
4th Street	1458	1318	1544	1336	1275	
Barragan	698	656	768	705	732	
Totals	4699	4003	4851	4138	3999	
Specialty Clinics						
Orthopedic Specialty	374	334	517	454	483	
Multi-Specialty	730	377	807	726	735	
Primary Care Associates	1711	1418	1658	1444	1430	
Totals	2815	2429	2982	2624	2648	

- The community demand for COVID vaccine has dwindled down to just a few per week. Vaccine appointments continue to be offered through the clinics, as needed.
- Rural Health clinics will be welcoming full-time Primary Care Physician Assistant Lawrence Ham in mid-August. Lawrence completed his clinical rotations in the clinics as part of their California State University Monterey Program (CSUMB) program affiliation with the hospital.



WILLIAM & INEZ MABIE SKILLED NURSING FACILITY

JUNE 2022

BOARD REPORT

JUNE 16, 2022

**To:
San Benito Health Care District
Board of Directors**

**From:
Sherry Hua, RN, MSN, DON for William & Inez Mabie SNF**

I. Management Activities:

1. CMS 5 Star Rating for our SNF. One of the significant improvement on this report is that we bumped up the category of Quality Measure from 4 stars to 5 Stars. Hazel Hawkins SNF has been 5 Stars Overall Quality for years and it has been a huge reward for all SNF staff from the hard working and hospital administration and district's other departments' continued support.

II. In-services for the month of June:

- | | |
|-------------|---|
| 6/21 | Dementia, Fall Prevention and Root Cause
Mandatory L.N. & C.N.A. |
| 6/28 | Stress Reduction of Family, Resident and Staff
Mandatory L.N. & C.N.A. |

III. Census Statistics for May:

Statistics:	2022	2021
Total Number of Admissions:	6	6
Number of Transfers from HHH:	5	6
Number of Transfers to HHH:	0	3
Number of Deaths:	1	0
Number of Discharges:	4	7
Total Discharges:	5	7
Total Census Days:	1427	1318

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

Total Discharged by Payer Status Category:	
Medicare:	5
Medicare MC:	0
Medical:	0
Medical MC:	0
Private (self pay):	0
Insurance:	0
Total:	5

Total Patient Days by Payer Status Category:	
Medicare:	130
Medicare MC:	1
Medi-Cal:	1234
Medi-Cal MC:	0
Private:	62
Insurance:	0
Bed Hold/LOA	5
TOTAL:	1427
Average Daily Census	46.03

IV. Palliative Care Referral Statistics for May:

Referral Sources:	
New Referrals	6
Acute Referrals	5
Southside Referrals	1
Northside Referrals	0

Patients Served	33
Patients Discharged	4
Patients Deceased	8
Grief Support	22
Total Patient Visits	111



**Care Compare Five-Star Ratings of Nursing Homes
Provider Rating Report for May 2022**

**Ratings for Hazel Hawkins Memorial Hospital D/P SNF (055462)
Hollister, California**

Overall Quality	Health Inspection	Quality Measures	Staffing	RN Staffing
★★★★★	★★★★	★★★★★	★★★★★	★★★★★

The Five-Star ratings provided above will be displayed for your nursing home on the Care Compare website on or around May 25, 2022. The health inspection rating incorporates data reported through April 30, 2022. The time periods for each of the quality measures that contribute to the Quality Measure (QM) rating can be found in the QM tables located later in this report. The staffing and RN staffing ratings are based on payroll-based journal (PBJ) staffing data reported for the fourth calendar quarter of 2021.

Helpline

The Five-Star Helpline will operate Monday - Friday **May 23-27, 2022**. Hours of operation will be from 9 am - 5 pm ET, 8 am - 4 pm CT, 7 am - 3 pm MT, and 6 am - 2 pm PT. The Helpline number is 1-800-839-9290. The Helpline will be available again **June 20-24, 2022**. During other times, direct inquiries to BetterCare@cms.hhs.gov as Helpline staff help respond to e-mail inquiries when the telephone Helpline is not operational.

Important News

Quality Measure Threshold Changes with the April 2022 Refresh

CMS implemented Quality Measure (QM) rating threshold changes with the April 2022 refresh and a new Five-Star Quality Rating System Technical Users' Guide has been released with the updated QM rating thresholds. Changes were made to Table 6, Point Ranges for the QM Ratings. The point thresholds for individual QMs did not change.

20.

Health Inspections

The Five-Star health inspection rating listed on the first page of this report is based on three cycles of survey data and three years of complaint and focused infection control inspections and incorporates data reported through April 30, 2022.

Your Health Inspection Rating

Provided below are the survey dates included in the calculation of the health inspection rating for your facility. The dates listed include standard survey dates as well as dates of complaint inspections and focused infection control inspections that resulted in deficiencies. For more detailed information about the deficiencies cited on each survey, please visit: <https://data.cms.gov/provider-data/>. This website updates on the same day as the Care Compare website. Any additional revisit points can be found in the 'Provider Information' table at the link provided above.

Health Inspection Rating Cycle 1 Survey Dates:

April 18, 2019

Health Inspection Rating Cycle 2 Survey Dates:

March 15, 2018

Health Inspection Rating Cycle 3 Survey Dates:

March 23, 2017

August 1, 2019

Total weighted health inspection score for your facility: 40.0

State-level Health Inspection Cut Points for California

1 Star	2 Stars	3 Stars	4 Stars	5 Stars
>137.33	85.34-137.33	57.34-85.33	29.34-57.33	0.00-29.33

Please note that the state cut points are recalculated each month, but the total weighted health inspection score for your facility is compared to the cut points only if there is a change in your score.

Important News (continued)

Weekend staffing and staff turnover

Weekend staffing and staff turnover data were added to the Nursing Home Care Compare website with the January 2022 refresh.

Weekend Staffing: the level of total nurse and registered nurse (RN) staffing on weekends provided by each nursing home over a quarter. This is reported in terms of the average number of RN and total nurse hours worked per resident per day on weekends (Saturdays and Sundays).

Staff Turnover: the following staff turnover measures are reported on Care Compare:

- The percent of RN staff that left the facility over the last year.
- The percent of total nurse staff that have left the facility over the last year.
- The number of administrators that have left the facility over the last year.

These measures will be incorporated into the Five-Star staffing rating with the July 2022 Care Compare refresh.

The facility-level measures for turnover and weekend staffing were added to the Provider Information file posted in the Provider Data Catalog (PDC) in the section for "Nursing homes including rehab services".

Reminder for Nursing Homes to Link Employee Identifiers when they are changed due to changes in the facility's staffing data systems. Facilities **must** link employee identifiers to ensure their turnover measures are accurate. To view the instructions and templates for linking employee identifiers, please see the PBJ Provider Users' Guide (link in the References section of this report). Find the technical submission file template to submit linked identifiers titled "PBJ XSD Admin file V1.00.0 (ZIP)" in the downloads section of the CMS PBJ webpage (link provided on the References page).

Please see the Five-Star Quality Rating Technical Users' Guide or the CMS Memorandum QSO-22-08-NH for additional information about the items listed above. Links to these resources are on the References page.

Skilled Nursing Facility Quality Reporting Program (SNF QRP) Measures

As of the April 2022 refresh, the MDS-based SNF QRP measures are being calculated using a full year of MDS assessment data (7/1/2020 – 6/30/2021). It is anticipated that the SNF QRP claims-based measures will be updated with the July 2022 refresh to Care Compare.



Mabie Northside SNF

June 2022

BOARD REPORT

June 16, 2022

To:
San Benito Health Care District
Board of Directors

From:
Sherry Hua, RN, MSN, DON for Mabie Northside SNFs

I. Management Activities:

1. CMS 5 Star Rating for our SNF. One of the significant improvement on this report is that we bumped up the category of Quality Measure from 4 stars to 5 stars. Hazel Hawkins SNF has been 5 stars Overall Quality for years and it has been a huge reward for all SNF from the hard working and hospital administration and district's other department's continued support.

II. In-services for the month of June 2022:

1. 6/09 **ADL Coding & Documentation, Covid - 19 Mitigation Plan
Infection Control and Prevention**
Mandatory – All Staff
2. 6/23 **Disaster Preparedness & Emergency Responce, Disaster Drill**
Mandatory – All Staff

MAY STATISTICS:	2022
Total Number of Admissions:	15

Number of Transfers from HHH:	14
Number of Transfers to HHH:	4
Number of Deaths:	0
Number of Discharges:	14
Total Census Days:	1,341

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.

Total Discharged by Payer Status Category:	
Medicare:	10
Medicare MC:	1
Medical:	3
Medical MC:	0
Private (self pay):	0
Insurance:	0
Total:	14

Total Patient Days by Payer Status Category:	
Medicare:	249
Medicare MC:	6
Medi-Cal:	1,055
Medi-Cal MC:	0
Private:	31
Insurance:	0
Bed Hold/LOA	0
TOTAL:	1,341
Average Daily Census	43.26



Hazel Hawkins

MEMORIAL HOSPITAL

To: San Benito Health Care District Board of Directors

From: Anita Frederick, Administrator, San Benito Home Health Care

Date: April 2022

HOME HEALTH STATS

	January 2022	February 2022	March 2022	April 2022
Total Admissions	39	46	40	45
Total Home Visits	513	581	622	556
Census / Total Patients	78	84	76	77

REFERRAL SOURCES

Hazel Hawkins	57%	47%	35%	33%
Other Hospitals	10%	15%	7%	6.5%
Southside SNF	10%	2%	18%	6.5%
Northside SNF	0%	2%	8%	18%
Other SNFs	0%	4%	5%	0%
M.D. / Clinics	23%	30%	27%	36%

PAYOR REFERRAL SOURCE

Medicare	75%	72%	72%	83%
PVT	12%	4%	8%	2%
Medicare Managed	11%	15%	13%	13%
Medi-Cal	2%	13%	5%	2%
Workers Comp	0%	0%	0%	2%

*PAYOR SOURCE OF VISITS MADE

Medicare	77%	77%	71%	73%
Medi-Cal	5%	5%	6%	4%
Private	5%	7%	9%	7%
Managed Medicare	13%	11%	14%	16%
Workers Comp	0%	0%	0%	0%



Hazel Hawkins

MEMORIAL HOSPITAL

QAPI PROJECTS

	January 2021	February 2022	March 2022	April 2022
Management of Complaints			Developed	100%
Medication Reconciliation			Developed	20%
Expired Supplies			Developed	100%
Decrease Hospitalization			Developed	10
Reduction of Falls	14 Falls	9 Falls	15 Falls	14 Falls



Hazel Hawkins

MEMORIAL HOSPITAL

To: San Benito Health Care District Board of Directors

From: Anita Frederick, Administrator, San Benito Home Health Care

Date: May 2022

HOME HEALTH STATS

	February 2022	March 2022	April 2022	May 2022
Total Admissions	46	40	45	45
Total Home Visits	581	622	556	476
Census / Total Patients	84	76	77	75

REFERRAL SOURCES

Hazel Hawkins	47%	35%	33%	39%
Other Hospitals	15%	7%	6.5%	11%
Southside SNF	2%	18%	6.5%	2%
Northside SNF	2%	8%	18%	18%
Other SNFs	4%	5%	0%	2%
M.D. / Clinics	30%	27%	36%	28%

PAYOR REFERRAL SOURCE

Medicare	72%	72%	83%	62%
PVT	4%	8%	2%	7%
Medicare Managed	15%	13%	13%	18%
Medi-Cal	13%	5%	2%	11%
Workers Comp	0%	0%	2%	2%

*PAYOR SOURCE OF VISITS MADE

Medicare	77%	71%	73%	77%
Medi-Cal	5%	6%	4%	5%
Private	7%	9%	7%	7%
Managed Medicare	11%	14%	16%	11%
Workers Comp	0%	0%	0%	0%



Hazel Hawkins

MEMORIAL HOSPITAL

QAPI PROJECTS

	February 2021	March 2022	April 2022	May 2022
Management of Complaints		Developed	100%	100%
Medication Reconciliation		Developed	20%	20%
Expired Supplies		Developed	100%	100%
Decrease Hospitalization		Developed	10	18
Reduction of Falls	9 Falls	15 Falls	14 Falls	14 Falls

28.



Hazel Hawkins
MEMORIAL HOSPITAL

To: San Benito Health Care District Board of Directors
From: Bernadette Enderez, Director of Laboratory Services
Date: June 2022
Re: Laboratory

=====

Updates:

1. Service/Outreach
 - Start of main lab outpatient modification scheduled with Engineering

2. Covid Testing
 - Period: May 2022
 - Total Samples tested: 3686
 - Positivity Rate: 4.69%

3. New Tests/Analyzers
 - Continued planning by looking at the reimbursement potential for BCID test.
 - New MYLA interface for microbiology analyzers was implemented.
 - Build for pathology TC charge codes completed. Billing to start 7/1/22.

4. Quality Assurance/Performance Improvement Activities
 - Sunquest project kick-off meeting scheduled.
 - Competency assessment on all waived testing personnel for clinics, skilled nursing facility, and acute hospital ongoing. Target completion date is end of July.
 - Medical Necessity meeting with Skilled Nursing scheduled.

5. Laboratory Statistics
 - See attached report

MAIN LABORATORY													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
2020	1019	840	799	602	801	875	1138	925	903	1080	942	1059	10983
2021	891	739	1020	939	955	1058	1080	1272	1563	1504	1491	1584	14096
2022	2035	1336	1506	1323	1277								

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
2020							89	478	725	560	565	2599	5016
2021	1888	1566	1443	1110	1031	1122	1045	1656	2143	1695	1842	2458	18999
2022	2987	2136	1915	1767	2219								

MC CRAY LAB													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
2020	1074	1019	941	921	1143	1125	1111	1028	1061	1260	999	1073	12755
2021	1263	1274	1394	1125	1119	1193	1165	1248	1192	1187	1100	1099	14359
2022	1230	1044	1206	1069	1033								

SUNNYSLOPE LAB													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
2020	671	652	424	2	135	472	437	426	463	498	377	470	5027
2021	699	601	624	590	479	636	553	613	580	574	462	487	6898
2022	536	511	632	521	467								

ER AND ASC													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
2020	1199	1034	943	931	909	1163	1909	1490	1145	1114	1186	1186	14209
2021	1628	1162	1126	1077	1083	1089	1174	1415	1272	1139	1059	1279	14503
2022	1434	839	1040	993	1328								

TOTAL OUTPATIENT													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
2020	3963	3545	3107	2456	2988	3635	4684	4347	4297	4512	4069	6387	47990
2021	6369	5342	5607	4841	4667	5098	5778	6204	6750	6750	5945	6907	70258
2022	8222	5866	6299	5673	6324								

TOTAL INPATIENT (ICU, MEDSURG, OB, SNF)													
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
2020	443	409	412	353	473	508	814	700	494	442	653	1146	6847
2021	1116	1053	603	654	705	751	761	803	791	986	874	1301	10398
2022	1311	1102	945	678	963								

LABORATORY DEPARTMENT

REQUISITION STATISTICS

Bernadette Enderez
Director of Laboratory Services *b/e/bw*

Michael McGinnis, M.D.
Medical Director *McGinnis 6/6/22*



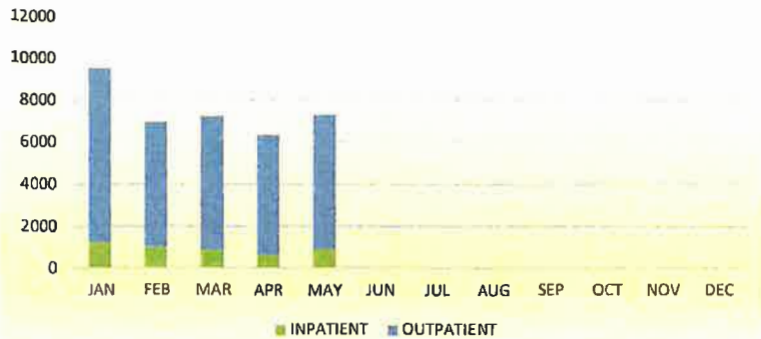
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INPATIENT VS OUTPATIENT LABORATORY STATISTICS

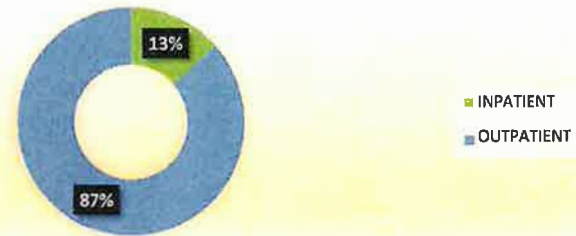
YR 2022														
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	
INPATIENT	1311	1102	945	678	963								4999	INPATIENT
OUTPATIENT	8222	5866	6299	5673	6324								32384	OUTPATIENT

YR 2021														
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	
INPATIENT	1116	1053	603	654	705	751	946	803	791	986	874	1301	10583	INPATIENT
OUTPATIENT	6369	5342	5607	4841	4667	5098	5778	6204	6750	6750	5954	6907	70267	OUTPATIENT

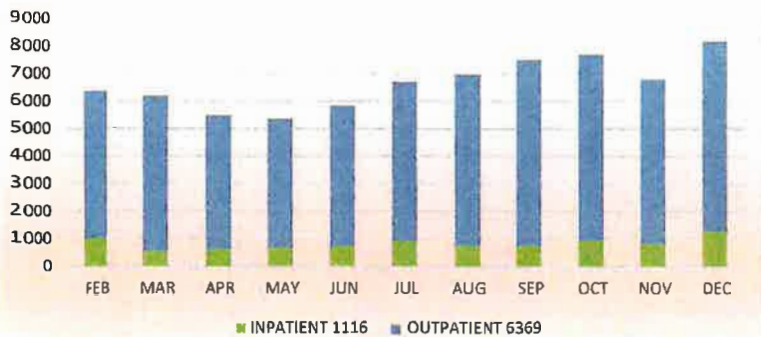
YR 2022 INPATIENT VS OUTPATIENT STATS



YR 2022 INPATIENT VS OUTPATIENT TOTALS



YR 2021 INPATIENT VS OUTPATIENT STATS



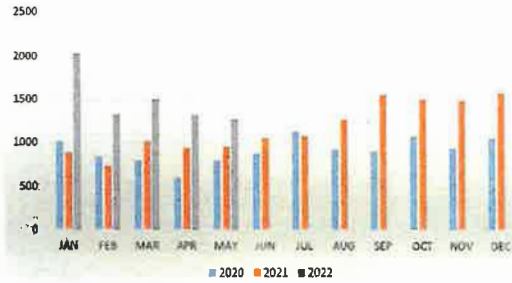
YR 2021 INPATIENT VS OUTPATIENT TOTALS



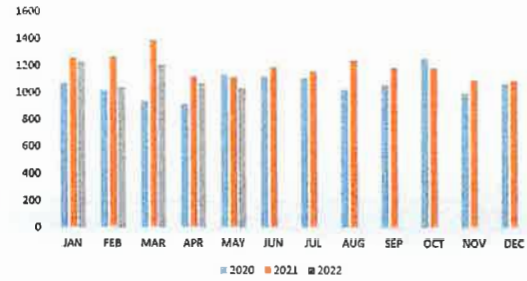
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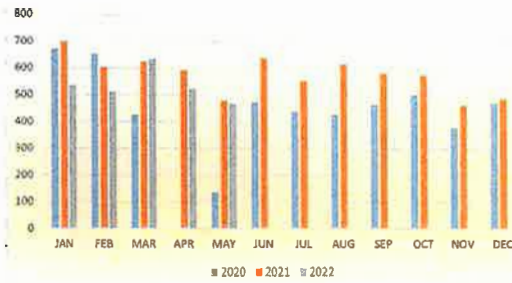
MAIN LAB OUTPATIENT STATISTICS



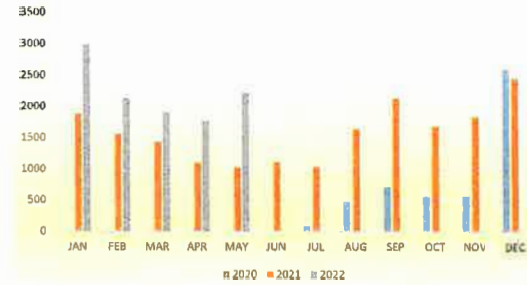
MC CRAY OUTPATIENT STATISTICS



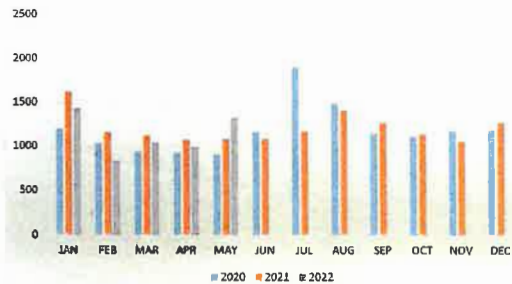
SUNNYSLOPE LAB STATISTICS



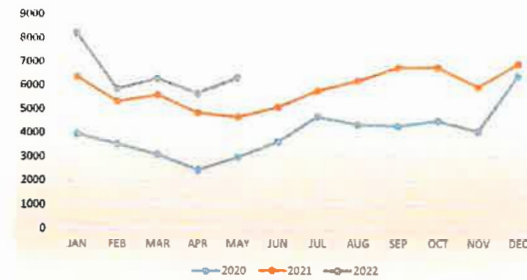
HHH EMPLOYEE COVID19 SURVEILLANCE STATISTICS



ER AND ASC LAB STATISTICS



OUTPATIENT LAB STATISTICS



LABORATORY DEPARTMENT
OUTPATIENT STATISTICS

Bernadette Enderez
Director of Laboratory Services

Michael McGinnis, M.D.
Medical Director

PATIENT ENGAGEMENT | SATISFACTION

- Rounding & Facilitating Care • Communication • Dietary • Medication • Visitation • Wait Time Concerns • Transition of Care Concerns
- Press Ganey Comments and Results Distribution to Directors
- Press Ganey Contract Revision—Change to mail and email.
- Collaboration with Quality to resolve grievances.
- Reputation.Com Launch
- Pregnancy to Postpartum Taskforce (Branding & Materials) App Launch



COMMUNITY ENGAGEMENT

Employees:

- Hawkins Happenings
- Employee of the Month Posting
- Patient Satisfaction Recognition
- Wear Orange: National Gun Violence Awareness Day



Physicians / Providers

- Support recruitment efforts—New Recruitment Video
- Physician Advisory Council & Follow Up Items

Public:

- Business Council Update
- Tuesday Evening Qigong/Yoga Classes
- Kids in the Park Participation
- Follow-up with Twin Oaks Residences, from presentation. Hospital Tour and provider introduction.
- Bridge Program Exploration—Behavioral Health
- Donated 80 first aid kits to Boy Scouts for Fort Benito Day Camp
- Donated 300 first aid kits to San Juan School Fun Run
- Sponsoring City of Hollister's 150 Year Anniversary events.



Volunteers

- Review Orientation & Training for Hospital Compliance
- Transition Grant Funded Grief Yoga to Volunteer Program of Qigong/Yoga;
- Meetings with Auxiliary President
- Working with volunteers to facilitate transition upon resignation of Volunteer Coordinator.

MARKETING

- Social Media Postings:
 - Paid: Dr. Dedini & Yoga
 - Community Report Magazine
 - Media Release:
 - Seismic Funding
 - Don Winn
 - Drafting FY '23 Marketing Plan
 - Production of Branding Videos:
 - Russel Dedini, MD
 - Ryan Gerry, MD
 - Nick Gabriel, DO
 - Armenda Tolentino, MD
 - New Portfolio and Greeting Card Design
 - Support Home Health Care Business Development Initiatives.
 - Forms Committee Member - Tracking Sheet Creation, e-signature template



Social last 28 days



Scan QR code to view
Dr. Tolentino's video



BUSINESS DEVELOPMENT

- Pinnacle Health, Relationship Building
- Endocrinology and Surgeon Meet and Greet
- Exploring Bariatric Program with Barragan Center
- New Recruitment Video featuring: Dr. Bogey Dr. Dedini, Dr. Gabriel, Dr. Gerry, Dr. Koteles, Dr. Tolentino, Dr. Wang, & Dr. Wang
- Live, Work, Play Video for Recruitment
- Continued engagement with Primary Care and Surgeons
- Interventional Cardiology Exploration
- Contract Negotiations and Execution for New Website Development
- Physician/Provider On-boarding Check list Taskforce



Scan QR code to view
recruitment video

District Board Report

5.19.22

To: SBHCD Hospital Board

Auxiliary Membership:

- 82 Active
- 123 Associates

The Auxiliary's Spring Luncheon was held at Paine's restaurant on May 18. Seventy Auxiliary members attended. The speakers were Leanne Oliveira representing San Benito County's Aging & Disability Resource Connection (ADRC) and Britt Bassoni speaking on behalf of the Central Coast Center for Independent Living (CCCIL). Both speakers were informative and entertaining.

SBHCD President Jeri Hernandez and CEO Steve Hannah spoke as well. New HHMH Auxiliary officers were installed on that day. Mark Lema is now the President of the Auxiliary.

The Auxiliary Scholarship Committee has awarded \$20,000 in scholarships this year. Recipients must be enrolled in a health care field. An award presentation was held on June 9 in the McCullough Resource Center.

My last day here at HHMH will be Tuesday, June 21. It has been a great run. I've enjoyed working with the volunteers in order to help make this hospital a better one for our community. I plan to move on and work for another non-profit later this summer. Currently there is no replacement for me. However, you can reach out to Frankie Gallagher (ext. 5701) or Sherrie Bakke, (ext. 5702) if you have any questions regarding Volunteer Services.

Thank you,

Alice Silva Oliveira
HHMH Coordinator of Volunteer Services
636-2681

If you want to touch the past, touch a rock. If you want to touch the present, touch a flower. If you want to touch the future, touch a life. ~Author Unknown



TO: San Benito Health Care District Board of Directors
 FROM: Liz Sparling, Foundation Director
 DATE: June 2022
 RE: Foundation Report

The Hazel Hawkins Hospital Foundation Board of Trustees met on Thursday, June 9 for their monthly meeting. The meeting was available by hybrid too. Mary Casillas, Chief Operating Officer, VP Ambulatory Services, Corporate Compliance, was a guest at our meeting to inform us about her new position here at HHMH. Barbara A. Vogelsang, MBA, MSN, RN, NEA-BC, Chief Clinical Officer also joined us to present the Administration report.

Financial Report	May
1. Income	\$ 10,187.46
2. Expenses	\$ 75.00
3. New Donors	2
4. Total Donations	82

Approved Allocations

1. \$4100 for Landscaping around front ER Entrance & \$538.19 for flagpole area in front of Hospital to finish the project

Directors Report

- Mary McCullough and I are meeting after this to discuss the ceremony for the flagpole area in honor of Gerald.
- I gave a tour of the Hospital and presented an orientation to our new Board Members on May 26th.
- The Northside Nurses station will be completed soon. This is the final component of our Mabie Makeover Campaign at Northside.
- We received an extension for our grant report for the Monterey Peninsula Foundation Grant until June as the team no collecting data for our report. Mike Egbert, the Department Director is thrilled with the new EKG equipment and streamlining of paperwork.
- Our FLEX grant report for the Diabetes Education Program report has been extended to July in order to collect more data and have more in person classes in the kitchen.
- We submitted our new application for the Hospice Giving Foundation Grant that funds the Palliative Care Program. We had a Zoom call on May 18th that had Steve, Dr. Bogey, Sunny, Jill. It went really well and the Hospice Giving Foundation was really complimentary of our Hospital and Foundation.
- I attended Lanetta’s service and the Foundation was mentioned by her son during his speech about her life and donation are directed towards our Foundation. It was really nice.

Scholarship Committee

- We will be having our Scholarship Awards Presentation via zoom on June 14th at Noon. All Board Members are welcome to attend. Please let me know if you would like me to send you the link. 16 Scholarships totaling \$12,500 and 7 awards were to HHMH employees.

Dinner Dance Committee

We will be sending out a save the date postcard in late June that explains that we will be having a Gourmet Dinner Pick-Up again this year but with a social hour at the Inn’s private guest house that will have music, wine and beer tasting, no host bar and an awards presentation. Sponsor letters will go out in mid-July. Our Committee met and we selected: Max & Cilly Sweet – Donors of the Year, Teknova – Business Donor of the Year & Pat Slatten – Heart for Hazel Award.



Hazel Hawkins

MEMORIAL HOSPITAL

SAN BENITO HEALTH CARE DISTRICT

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.

CEO's Administrative Report – June 23rd, 2022

To: San Benito Health Care District Board of Directors

COVID-19 Pandemic Surge

I will provide a verbal update on the infection rate, hospitalizations, and the vaccine initiative at the Board meeting ([COVID – 19 online data](#)).

- CDC data and San Benito County data

Administrative General Updates

Administration Dashboard:

Please find the newly developed Administrative Dashboard included on the final page of the CEO report.

I and other members of our team will discuss the various metrics along with MTD and YTD results at the Board meeting.

Strategic Plan Update:

A facilitated strategic planning retreat is being planned to occur in September at an offsite location.

Organizational Leadership:

The organizational chart has been revised with the filling of the COO VP Ambulatory Services position. I will review the changes at the Board meeting.

The stability of the entire organization depends on having a solid, well-functioning governing Board supporting a solid and well-functioning administrative team and broader leadership team across the organization. I believe we have the correct structure in place to provide support for this



Hazel Hawkins

MEMORIAL HOSPITAL

complex healthcare organization and proactively leading the District in further fulfillment of the mission to provide comprehensive and responsive healthcare services. The strategic direction that has been set by the District Board is to rightsize the organization's cost structure and to ensure a plan is in place for appropriately capitalizing on the current and future infrastructure needs. As HHMH continues to expand with the growing population of the District, this strategic direction will guide the administration's activities for the next several years.

Legislative Update:

While not included in the Governor's proposed budget, there is still focus being put on the letter Assemblymember Eduardo Garcia of District 56 recently authored for a one-time budget request on behalf of all District Hospitals across California for funding to help meet the 2030 seismic requirements.

In addition, Assemblymember Wood of District 2 is putting the focus on smaller hospitals and their ability to meet the upcoming seismic requirements. An additional program is being considered for proposal to help hospitals meeting certain size requirements to potentially receive funding assistance.

Dominic Dursa, of Assemblymember Rivas' office, made a site visit to HHMH on June 16th. The administrative team spent about an hour discussing the overall organizational challenges including meeting upcoming seismic requirements and expanding our infrastructure for meeting the current and future healthcare needs of the District.

Medical Staff updates

Provider Agreements/Updates:

This section has been transitioned to the COO VP of Ambulatory Services written report.

Community and Regional Activities

CEO HHMH/Community Activities:

Hospital Rounding – Daily
Public health – Monthly
HHH Auxiliary Board Meeting – June 13th

CEO Regional/National Activities:

Assembly Member Rivas Staff Visit – June 16th



Hazel Hawkins

MEMORIAL HOSPITAL

Sincerely,

Steven Hannah

Steven M. Hannah, MHA
Chief Executive Officer

Acronyms

ACHD	Association of California Hospital Districts
ACO	Accountable Care Organization
APP	Advanced Practice Practitioners (FNP and PA)
AFE	*Acronym Free Environment
ASC	Ambulatory Surgery Center
BBK	Best, Best and Krieger Law Firm
CAH	Critical Access Hospital
CAAHN	California Critical Access Hospital Network (CHA)
CDC	Center for Disease Control
CDPH	California Department of Public Health
CEO	Chief Executive Officer
CFO	Chief Finance Officer
CHA	California Hospital Association
CHNA	Community Health Needs Assessment (Not applicable to Districts)
CIN	Clinically Integrated Network
CMI	Case Mix Index (CMS acuity measure)
CMMI	Centers for Medicare and Medicaid Innovation CMO Chief Medical Officer
CMS	Centers for Medicare and Medicaid (HCFA from the old days)
CNE	Chief Nurse Executive
COO VP AS	Chief Operating Officer, Vice President of Ambulatory Services
COS	Chief of Staff (Medical)
COVID – 19	Coronavirus SARS-CoV-2
CY	Calendar Year
DHLF	District Hospital Leadership Forum
DPM	Doctor of Podiatry Medicine
ED	Emergency Department
FMV	Fair Market Value
FNP	Family Nurse Practitioner
FQHC	Federally Qualified Health Center
FY	Fiscal Year
HCA	Hospital Corporation of America
HCP	Healthcare personnel
HHMH	Hazel Hawkins Memorial Hospital
HIPPA	Health Information Privacy and Portability Act
HIT	Health Information Technology
HOPD	Hospital Outpatient Department
HPF	Hospital Provider Fee Program
HR	Human Resources
ICU	Intensive Care Unit
IPA	Independent Physician Association
LLP	Limited Liability Partnership



Hazel Hawkins

MEMORIAL HOSPITAL

Locum Tenens	Temporary physician – “in place of another”
LOI	Letter of Intent
MACRA	CMS-Medicare Access & CHIP Reauthorization Act of 2015 MAP
MAP	Management Action Plan
MD	Medical Doctor
MGMA	Medical Group Management Association
MS & Med Surg	Medical Surgical Unit
MIPs	CMS-Merit Based Incentive Payment System
MOB	Medical Office Building
MOR	Management Operating Review
MOU	Memorandum of Understanding
OR	Operating Room
OSHPD	Office of Statewide Health Planning and Development
P&L	Profit and Loss
PA	Physician Assistant
PC	Professional Corporation
PCP	Primary Care Provider
PHO	Physician Hospital Organization
PPS	Prospective Payment System
PR	Public Relations
PSA	Professional Services Agreement
Q1, Q2, etc.	Quarter 1, quarter 2, etc.
QIP	Quality Incentive Program
RA	Recruitment Agreement
RFI	Request for Information
RFP	Request for Proposal
RHC	Rural Health Clinic
SNF	Skilled Nursing Facility
SPC	Structural Performance Category
TBD	To be Determined
TJC	The Joint Commission (formerly JACHO)
TPA	Third Party Administrator
USACS	US Acute Care Solutions
VEP	Pinehurst Hospitalist Medical Group d/b/a VEP Healthcare
VP	Vice President



San Benito Health Care District
 Hazel Hawkins Memorial Hospital
 June 23, 2022

Description	Target	Rolling 12 month May
Overall Rating of the Hospital	77%	70.79 ↓
Likelihood to Recommend the Hospital	75%	64.88 ↓
CMS 30-Day All Cause Readmission Rate	11%	11.80 ↑
Surgical Site Infections (SIR)	1.00	< 1.00

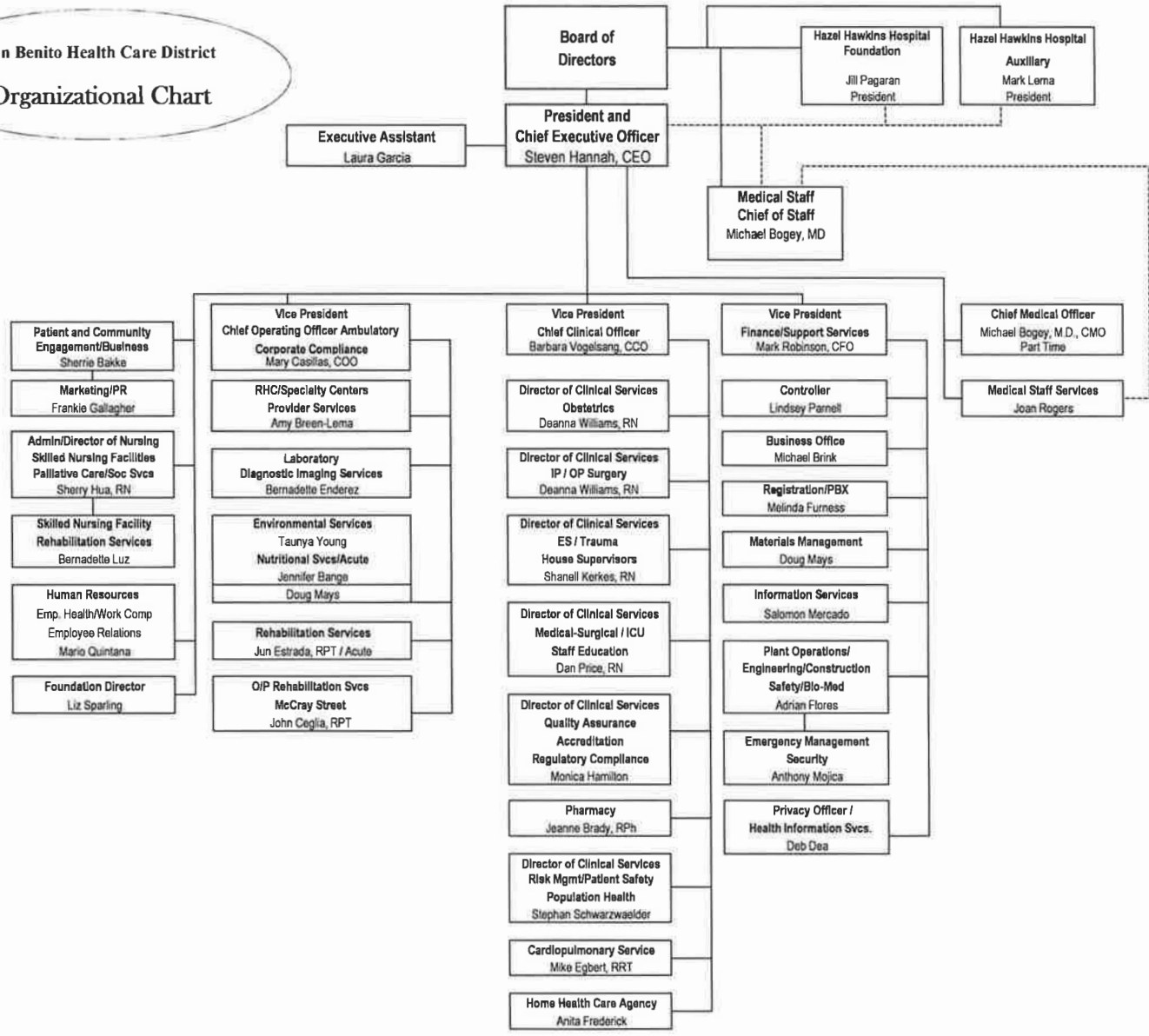
Description	Target	MTD Actual	YTD Actual	YTD Target
Average Daily Census - Acute	14.81	19.58	20.74	14.33
Average Daily Census - SNF	86.00	89.29	82.00	82.72
# of Surgery Cases	233	143	1721	2,544
EBIDA %	0.99%	2.56%	5.93%	3.00%
Operating Margin	-3.51%	-1.93%	1.69%	-1.65%
Met or Exceeded Target				
Within 10% of Target				
Not Within 10%				

Note: Proposed targets for "Overall Rating of the Hospital" and "Likelihood to Recommend the Hospital" are based on the 50th percentile of Small Hospitals < 50 Beds in the Press Ganey Database.

SIR = The Standardized Infection Ratio compares the actual number of Hospital Acquired Infections to the predicted number of infections. A SIR of 1 means that the actual number is equal to the predicted number.

SIR = July - Dec 2021 rate. SSI SIR is calculated by NHSN every 6 months.

**San Benito Health Care District
Organizational Chart**



During the absence of the President/CEO, one of other Officers as assigned by the CEO, shall assume all duties.

45-

Jeri Hernandez, Board President

Steven Hannah, President & Chief Executive Officer

Phone: 831-636-2673
Revised 6.1.22

San Benito Health Care District
Finance Committee Minutes
June 16, 2022 - 5:00pm

Present: Jeri Hernandez, Board President
Don Winn, Board Interim
Steven Hannah, Chief Executive Officer
Mark Robinson, Vice President-Finance\Support Services
Barbara Vogelsang, Chief Clinical Officer
Mary Casillas, Chief Operations Officer
Lindsey Parnell, Controller

CALL TO ORDER

The meeting of the Finance Committee was called to order at 5:01pm

I. FINANCIAL STATEMENTS

A. May 2022

The Financial Statements for May 2022 were presented for review. For the month ending May 31, 2022, the District's Net Surplus (**Loss**) is \$56,772 compared to a budgeted Surplus (**Loss**) of (**\$161,511**). The District exceeded its budget for the month by \$218,283.

Acute discharges were over budget for the month by 66 discharges or 44%. The Average Daily Census was 19.58 compared to a budget of 14.81. The average length of stay was 2.81. The Acute I/P gross revenue was over budget by \$2,129,753 while O/P services gross revenue exceeded budget by \$2,560,244 or 14%. Inpatient ER visits were over budget by 47 visits while ER O/P visits were over budget by 67 visits or 3%. The Rural Health Clinics treated 3,999 patients (includes 732 visits at the Diabetes Clinic) while the other clinics treated 2,648 outpatients. Other Operating revenue was over budget by \$8,721 due primarily to physician collections exceeding budget. Operating expenses were over budget by \$811,045 due mainly to variances in: Registry by \$385,500 due to medical leaves for employees and purchased services by \$276,301 due to recruiting fees. Non-operating Revenue was over budget by \$59,159 due to other non-operating revenue for a videoscope in the OR being traded for a new one.

The Skilled Nursing Facilities had an average daily census of 89.29 with a budgeted ADC of 86. The SNFs Net Surplus (**Loss**) is \$15,908 compared to a budget of (**\$28,106**).

Fiscal year ending June 30, 2022 is budgeted to meet or exceed all of the Cal- Mortgage 2021 bond covenant targets. They are a **1.25** DSR, **30** days cash-on-hand and a **1.5** current ratio.

II. FINANCIAL UPDATES

- A. **Finance Dashboard** – The Finance Dashboard was reviewed by the Committee in detail.
- B. **401(a) Plan** – Creation of a 401(a) plan for executives was discussed in detail. The plan would be funded by the District, up to a federally mandated maximum, and will not result in additional liability on the District's balance sheet. The plan is intended to be a tool for competitively recruiting and retaining quality individuals at the executive level. Future

discussion may be warranted, particularly if it is determined that board action is required prior to creation of the plan.

III. **CONTRACTS**

IV. **PHYSICIAN CONTRACTS**

- A. **M. Aslam Barra, M.D., OB/Gyn-Amendment to Professional Services Agreement** – The amendment has a proposed effective date of 07/1/2022 with a 2-year term and 90-day termination clause. The amendment allows for an additional 5 hours of coverage at the Multi-Specialty Clinic location, for a total of up to 20 hours per week for 4th Street and Multi-Specialty clinic coverage. The base monthly compensation will be set below the 75th percentile of Fair Market Value at \$13,000 per month. The Finance Committee recommends this amendment for Board approval.
- B. **Russell Dedini, M.D.-Addendum to Orthopedic Services Coverage Agreement** – The addendum has a proposed effective date of 07/01/2022 with a 2-year term and 90-day termination clause. The addendum allows for a 3% rate increase in per shift compensation. The base monthly compensation will remain below the 75th percentile of Fair Market Value. The Finance Committee recommends this agreement for Board approval.

V. **FYE 06/30/2023 OPERATING AND CAPITAL BUDGETS**

The Operating and Capital Budgets for FYE 06/30/2023 are included in the board packet. Mark Robinson presented the Operating Budget noting that the transition to the new budgeting software, Axiom, is not yet complete and the budget for FYE 06/30/2023 was completed in Microsoft Excel.

Statistics-

- Acute Facility inpatient admissions and days are budgeted to increase by 2% for FY 2023.
- Acute facility outpatient services are budgeted to increase by 2% and outpatient surgeries are budgeted to increase by 5%
- The SNF average daily census is anticipated to increase in the next fiscal year to a combined average daily census of 88.

Gross Patient Revenue –

- Acute Inpatient Room Charges and Outpatient Charges will increase by 5% effective July 1, 2022.
- SNF room rates increased from \$626.60/day to \$682.38/day effective 8/1/2021.
- The District is raising ED Level charges in the Emergency Department by 5% effective July 1, 2022.

Contractual Allowances –

- 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.
- Net Operating Revenue is budgeted to increase by a total of \$13.2 million.

Expenses –

- Productive FTEs are budgeted to increase by 17, to 529.11 in FY 2023.
- Net Operating Expenses are budgeted to increase by \$12.4 million.

- Overall, acute expenses are budgeted to increase by 9%, while SNF expenses are budgeted to increase by 8% (due to the budgeted increase in ADC)

The EBIDA margin is budgeted to be 6.1% for the new fiscal year with the Debt Service Coverage Ratio at 5.24. The Finance Committee recommends the approval of the FYE 06/30/2023 Operating Budget.

The three-year Capital Budget ending 06/30/2025 includes \$7,107,586 worth of equipment/capital improvements. This budget is a guideline dependent upon what the departments need in conjunction with the District's financial position.

ADJOURNMENT

There being no further business, the Committee was adjourned at 5:59pm.

Respectfully submitted,



Lindsey Parnell
Controller



Hazel Hawkins
MEMORIAL HOSPITAL

FINANCE COMMITTEE
Thursday, June 16, 2022, 5:00 p.m
Meeting Agenda

Call to Order

I. Financial Reports:

A. Financial Statements – May 2022

II. Financial Updates

A. Finance Dashboard

B. 401(a) Plan

III. Contracts

IV. Physician Contracts

A. M. Aslam Barra, M.D., OB/Gyn – Amendment 1 to Professional Service Agreement, Multi-Specialty Clinic Coverage (**Action item**)

B. Russell Dedini, M.D. – Addendum 6 to Orthopedic Services Coverage Agreement (**Action item**)

V. FYE 06/30/2023 Operating and Capital Budgets

Adjournment

49.

1



Hazel Hawkins
MEMORIAL HOSPITAL

June 16, 2022

CFO Financial Summary for the Finance Committee:

For the month ending May 31, 2022, the District's Net Surplus (**Loss**) is \$56,772 compared to a budgeted Surplus (**Loss**) of **(\$116,511)**. The District exceeded its budget for the month by \$218,283.

For the YTD ending May 31, 2022, the District's Net Surplus (**Loss**) is \$5.12 million compared to a budgeted Surplus (**Loss**) of \$679,901. The District is exceeding its budget YTD by \$4.44 million.

Acute discharges were 1216 for the month, exceeding budget by 66 discharges or 44%. The ADC was 19.58 compared to a budget of 14.81. The ALOS was 2.81. The acute I/P gross revenue exceeded budget by **\$2.1 million** while O/P services gross revenue was **\$2.56** or 14% over budget. ER I/P visits were 159 and ER O/P visits were 2,004 compared to the budget of 1,937 visits. The RHCs & Specialty Clinics treated 3,999 (includes 732 visits at the Diabetes Clinic) and 2,648 visits respectively.

Other Operating revenue exceeded budget by **\$8,721** due primarily to physician collections exceeding budget.

Operating Expenses were over budget by **\$811,045** due mainly to variances in: Registry by \$385,500 due to medical leaves for employees and Purchase Services of \$276,301 due to recruiting fees.

Non-operating Revenue was over budget by **\$59,159** due to other non-operating revenue for a video scope in the OR being traded for a new one.

The SNFs ADC was **89.29** for the month. The Net Surplus (**Loss**) is \$15,908 compared to a budget of **(\$28,106)**. The ADC is budgeted to be 86 residents for the month. YTD, the SNFs Net Surplus (**Loss**) is \$184,666. The State has increased its per diem rate to \$682.38 from \$626.60 effective 08/01/2021. The State should reprocess all the RAs using the new rate before year-end.

The debt service ratio for the fiscal year ending June 30, 2021 is budgeted to exceed **1.25**, the days-cash-on-hand is projected to exceed **30.00** and the current ratio is projected to be more than **1.5**. The Cal- Mortgage 2021 bond covenant targets are a **1.25** DSR, **30** days-cash-on-hand and a **1.5** current ratio.

HAZEL HAWKINS MEMORIAL HOSPITAL - COMBINED
 HOLLISTER, CA 95023
 FOR PERIOD 05/31/22

	-----CURRENT MONTH-----					-----YEAR-TO-DATE-----				
	ACTUAL 05/31/22	BUDGET 05/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 05/31/21	ACTUAL 05/31/22	BUDGET 05/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 05/31/21
GROSS PATIENT REVENUE:										
ACUTE ROUTINE REVENUE	4,160,682	3,129,040	1,031,642	33	3,259,202	45,450,016	32,715,173	12,734,843	39	37,125,379
SNF ROUTINE REVENUE	2,082,100	1,737,449	344,651	20	1,577,210	19,193,860	18,060,952	1,132,908	6	15,782,950
ANCILLARY INPATIENT REVENUE	5,211,663	4,445,512	766,151	17	4,637,005	57,803,319	46,458,258	11,345,061	24	51,831,223
HOSPITALIST\PEDS I\P REVENUE	196,081	0	196,081		159,505	2,285,894	971,096	1,314,798	135	1,816,366
TOTAL GROSS INPATIENT REVENUE	11,650,526	9,312,001	2,338,525	25	9,632,922	124,733,089	98,205,479	26,527,610	27	106,555,918
ANCILLARY OUTPATIENT REVENUE	20,650,031	18,138,016	2,512,015	14	18,529,211	220,696,912	212,028,948	8,667,964	4	197,370,005
HOSPITALIST\PEDS O\P REVENUE	48,230	0	48,230		40,272	612,331	83,398	528,933	634	255,150
TOTAL GROSS OUTPATIENT REVENUE	20,698,260	18,138,016	2,560,244	14	18,569,483	221,309,243	212,112,346	9,196,897	4	197,625,155
TOTAL GROSS PATIENT REVENUE	32,348,786	27,450,017	4,898,769	18	28,202,405	346,042,332	310,317,825	35,724,507	12	304,181,072
DEDUCTIONS FROM REVENUE:										
MEDICARE CONTRACTUAL ALLOWANCES	8,274,482	6,582,679	1,691,803	26	6,787,017	86,242,750	80,243,190	5,999,560	8	79,864,294
MEDI-CAL CONTRACTUAL ALLOWANCES	7,590,344	5,766,002	1,824,342	32	7,663,084	84,331,767	64,612,980	19,718,787	31	63,334,903
BAD DEBT EXPENSE	367,283	250,864	116,419	46	256,769	3,482,553	2,844,274	638,279	22	2,967,210
CHARITY CARE	80,505	66,211	14,294	22	39,782	833,140	750,706	82,434	11	755,165
OTHER CONTRACTUALS AND ADJUSTMENTS	3,744,866	3,709,777	35,089	1	3,253,165	41,656,279	41,966,283	(310,004)	(1)	42,644,281
HOSPITALIST\PEDS CONTRACTUAL ALLOW	(2,322)	0	(2,322)		20,478	80,658	31,634	49,024	155	82,174
TOTAL DEDUCTIONS FROM REVENUE	20,055,158	16,375,533	3,679,625	23	18,020,293	216,627,148	190,449,067	26,178,081	14	189,648,026
NET PATIENT REVENUE	12,293,628	11,074,484	1,219,144	11	10,182,112	129,415,184	119,868,758	9,546,426	8	114,533,046
OTHER OPERATING REVENUE	531,966	523,245	8,721	2	941,631	6,993,718	6,021,582	972,136	16	11,120,198
NET OPERATING REVENUE	12,825,594	11,597,729	1,227,865	11	11,123,743	136,408,902	125,890,340	10,518,562	8	125,653,245
OPERATING EXPENSES:										
SALARIES & WAGES	4,925,882	4,846,465	79,417	2	4,608,563	51,936,280	51,432,574	503,706	1	47,300,830
REGISTRY	587,825	189,643	398,182	210	394,325	4,948,217	1,936,224	3,011,993	156	8,537,243
EMPLOYEE BENEFITS	2,834,274	2,668,849	165,425	6	3,260,133	28,280,992	28,411,195	(130,203)	(1)	26,772,881
PROFESSIONAL FEES	1,448,995	1,495,480	(46,485)	(3)	1,409,854	15,828,394	15,800,208	28,186	0	15,147,101
SUPPLIES	1,111,556	1,059,638	51,918	5	890,712	12,751,750	11,321,467	1,430,283	13	11,220,181
PURCHASED SERVICES	1,301,108	982,643	318,465	32	971,793	11,426,031	10,718,638	707,393	7	10,960,674
RENTAL	155,871	139,633	16,238	12	150,703	1,626,964	1,535,960	91,004	6	1,767,435
DEPRECIATION & AMORT	316,742	323,397	(6,655)	(2)	323,116	3,433,471	3,557,345	(123,874)	(4)	3,670,043
INTEREST	17,272	5,720	11,552	202	2,109	44,470	63,542	(19,072)	(30)	33,361
OTHER	373,484	292,800	80,684	28	251,732	3,826,310	3,194,960	631,350	20	3,013,198
TOTAL EXPENSES	13,073,010	12,004,268	1,068,742	9	12,263,037	134,102,879	127,972,113	6,130,766	5	128,422,947
NET OPERATING INCOME (LOSS)	(247,416)	(406,539)	159,124	(39)	(1,139,294)	2,306,023	(2,081,773)	4,387,796	(211)	(2,769,703)

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HAZEL HAWKINS MEMORIAL HOSPITAL - COMBINED
 HOLLISTER, CA 95023
 FOR PERIOD 05/31/22

	-----CURRENT MONTH-----					-----YEAR-TO-DATE-----				
	ACTUAL 05/31/22	BUDGET 05/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 05/31/21	ACTUAL 05/31/22	BUDGET 05/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 05/31/21
NON-OPERATING REVENUE\EXPENSE:										
DONATIONS	6,959	5,000	1,959	39	0	153,939	170,000	(16,061)	(9)	136,601
PROPERTY TAX REVENUE	185,249	185,249	0	0	171,868	2,037,739	2,037,732	7	0	1,890,551
GO BOND PROP TAXES	160,091	160,091	(1)	0	155,365	1,760,996	1,760,996	(1)	0	1,709,015
GO BOND INT REVENUE\EXPENSE	(75,091)	(75,091)	1	0	(77,865)	(825,996)	(825,996)	1	0	(856,515)
OTHER NON-OPER REVENUE	66,640	7,867	58,773	747	7,881	163,191	86,530	76,661	89	25,234
OTHER NON-OPER EXPENSE	(39,661)	(38,163)	(1,498)	4	(89,558)	(467,733)	(468,413)	680	0	(948,922)
INVESTMENT INCOME	0	75	(75)	(100)	889	(11,313)	825	(12,138)	(1,471)	(4,502)
COLLABORATION CONTRIBUTIONS	0	0	0	0	0	0	0	0	0	0
TOTAL NON-OPERATING REVENUE/(EXPENSE)	304,188	245,028	59,160	24	168,581	2,810,823	2,761,674	49,149	2	1,951,462
NET SURPLUS (LOSS)	56,772	(161,511)	218,283	(135)	(970,713)	5,116,846	679,901	4,436,945	653	(818,241)
EBIDA	\$ 328,175	\$ 115,049	\$ 213,126	185.24%	\$ (635,540)	\$ 8,083,050	\$ 3,770,659	\$ 4,312,391	114.36%	\$ 2,948,224
EBIDA MARGIN	2.56%	0.99%	1.57%	157.93%	(5.71)%	5.93%	3.00%	2.93%	97.83%	2.35%
OPERATING MARGIN	(1.93)%	(3.51)%	1.58%	(44.96)%	(10.24)%	1.69%	(1.65)%	3.34%	(202.23)%	(2.20)%
NET SURPLUS (LOSS) MARGIN	0.44%	(1.39)%	1.84%	(131.78)%	(8.73)%	3.75%	0.54%	3.21%	594.51%	(0.65)%

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HAZEL HAWKINS MEMORIAL HOSPITAL - ACUTE FACILITY
 HOLLISTER, CA 95023
 FOR PERIOD 05/31/22

	-----CURRENT MONTH-----					-----YEAR-TO-DATE-----				
	ACTUAL 05/31/22	BUDGET 05/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 05/31/21	ACTUAL 05/31/22	BUDGET 05/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 05/31/21
GROSS PATIENT REVENUE:										
ROUTINE REVENUE	4,160,682	3,129,040	1,031,642	33	3,259,202	45,450,016	32,715,173	12,734,843	39	37,125,379
ANCILLARY INPATIENT REVENUE	5,004,939	4,102,909	902,030	22	4,432,915	55,245,132	42,897,297	12,347,835	29	49,508,507
HOSPITALIST I\ P REVENUE	196,081	0	196,081		159,505	2,285,894	971,096	1,314,798	135	1,816,366
TOTAL GROSS INPATIENT REVENUE	9,361,702	7,231,949	2,129,753	29	7,851,623	102,981,042	76,583,566	26,397,476	35	88,450,252
ANCILLARY OUTPATIENT REVENUE	20,650,031	18,138,016	2,512,015	14	18,529,211	220,696,912	212,028,948	8,667,964	4	197,370,005
HOSPITALIST O\ P REVENUE	48,230	0	48,230		40,272	612,331	83,398	528,933	634	255,150
TOTAL GROSS OUTPATIENT REVENUE	20,698,260	18,138,016	2,560,244	14	18,569,483	221,309,243	212,112,346	9,196,897	4	197,625,155
TOTAL GROSS ACUTE PATIENT REVENUE	30,059,963	25,369,965	4,689,998	19	26,421,106	324,290,284	288,695,912	35,594,372	12	286,075,406
DEDUCTIONS FROM REVENUE ACUTE:										
MEDICARE CONTRACTUAL ALLOWANCES	8,084,351	6,342,519	1,741,832	28	6,688,950	84,535,127	77,780,076	6,755,051	9	78,765,390
MEDI-CAL CONTRACTUAL ALLOWANCES	7,428,353	5,586,594	1,841,759	33	7,506,230	83,438,491	63,442,558	19,995,933	32	64,277,633
BAD DEBT EXPENSE	315,120	250,864	64,256	26	313,863	3,350,348	2,844,274	506,074	18	3,004,877
CHARITY CARE	59,543	66,211	(6,668)	(10)	39,782	704,432	750,706	(46,274)	(6)	755,165
OTHER CONTRACTUALS AND ADJUSTMENTS	3,736,108	3,675,041	61,067	2	3,211,082	41,294,489	41,607,224	(312,735)	(1)	42,294,563
HOSPITALIST\ PEDS CONTRACTUAL ALLOW	(2,322)	0	(2,322)		20,478	80,658	31,634	49,024	155	82,174
TOTAL ACUTE DEDUCTIONS FROM REVENUE	19,621,152	15,921,229	3,699,923	23	17,780,385	213,403,545	186,456,472	26,947,073	15	189,179,801
NET ACUTE PATIENT REVENUE	10,438,810	9,448,736	990,074	11	8,640,721	110,886,739	102,239,440	8,647,299	9	96,895,605
OTHER OPERATING REVENUE	531,966	523,245	8,721	2	941,631	6,993,718	6,021,582	972,136	16	11,120,198
NET ACUTE OPERATING REVENUE	10,970,777	9,971,981	998,796	10	9,582,352	117,880,457	108,261,022	9,619,435	9	108,015,804
OPERATING EXPENSES:										
SALARIES & WAGES	3,999,768	3,956,373	43,395	1	3,722,127	42,219,635	42,022,331	197,304	1	38,123,802
REGISTRY	570,158	184,658	385,500	209	375,120	4,826,449	1,882,347	2,944,102	156	8,302,329
EMPLOYEE BENEFITS	2,209,702	2,115,311	94,391	5	2,480,729	22,232,235	22,551,027	(318,793)	(1)	20,759,173
PROFESSIONAL FEES	1,446,865	1,485,546	(38,681)	(3)	1,407,814	15,805,536	15,693,819	111,717	1	15,123,632
SUPPLIES	1,014,392	981,750	32,642	3	807,931	11,784,521	10,473,432	1,311,089	13	10,419,523
PURCHASED SERVICES	1,198,507	922,206	276,301	30	908,883	10,670,770	10,059,682	611,088	6	10,068,895
RENTAL	155,668	138,637	17,031	12	149,732	1,614,532	1,525,000	89,532	6	1,752,406
DEPRECIATION & AMORT	274,754	282,501	(7,747)	(3)	283,050	2,992,071	3,107,483	(115,412)	(4)	3,222,215
INTEREST	17,272	5,720	11,552	202	2,109	44,470	63,542	(19,072)	(30)	33,361
OTHER	329,290	252,345	76,945	31	214,991	3,383,951	2,755,495	628,456	23	2,592,142
TOTAL EXPENSES	11,216,377	10,325,047	891,330	9	10,352,487	115,574,168	110,134,158	5,440,010	5	110,397,477
NET OPERATING INCOME (LOSS)	(245,601)	(353,066)	107,466	(30)	(770,135)	2,306,289	(1,873,136)	4,179,425	(223)	(2,381,674)

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HAZEL HAWKINS MEMORIAL HOSPITAL - ACUTE FACILITY
 HOLLISTER, CA 95023
 FOR PERIOD 05/31/22

	-----CURRENT MONTH-----					-----YEAR-TO-DATE-----				
	ACTUAL 05/31/22	BUDGET 05/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 05/31/21	ACTUAL 05/31/22	BUDGET 05/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 05/31/21
NON-OPERATING REVENUE\EXPENSE:										
DONATIONS	6,959	5,000	1,959	39	0	153,939	170,000	(16,061)	(9)	136,601
PROPERTY TAX REVENUE	159,183	159,183	0	0	147,685	1,751,013	1,751,008	5	0	1,624,536
GO BOND PROP TAXES	160,091	160,091	(1)	0	155,365	1,760,996	1,760,996	(1)	0	1,709,015
GO BOND INT REVENUE\EXPENSE	(75,091)	(75,091)	1	0	(77,865)	(825,996)	(825,996)	1	0	(856,515)
OTHER NON-OPER REVENUE	66,640	7,867	58,773	747	7,881	163,191	86,530	76,661	89	25,234
OTHER NON-OPER EXPENSE	(31,318)	(29,820)	(1,498)	5	(79,182)	(365,925)	(366,604)	679	0	(805,709)
INVESTMENT INCOME	0	75	(75)	(100)	889	(11,313)	825	(12,138)	(1,471)	(4,502)
COLLABORATION CONTRIBUTIONS	0	0	0	0	0	0	0	0	0	0
TOTAL NON-OPERATING REVENUE/(EXPENSE)	286,464	227,305	59,159	26	154,774	2,625,905	2,576,759	49,146	2	1,828,660
NET SURPLUS (LOSS)	40,864	(125,761)	166,625	(133)	(615,361)	4,932,193	703,623	4,228,570	601	(553,014)

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HAZEL HAWKINS SKILLED NURSING FACILITIES
 HOLLISTER, CA
 FOR PERIOD 05/31/22

	-----CURRENT MONTH-----					-----YEAR-TO-DATE-----				
	ACTUAL 05/31/22	BUDGET 05/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 05/31/21	ACTUAL 05/31/22	BUDGET 05/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 05/31/21
GROSS SNF PATIENT REVENUE:										
ROUTINE SNF REVENUE	2,082,100	1,737,449	344,651	20	1,577,210	19,193,860	18,060,952	1,132,908	6	15,782,950
ANCILLARY SNF REVENUE	206,724	342,603	(135,880)	(40)	204,090	2,558,188	3,560,961	(1,002,773)	(28)	2,322,716
TOTAL GROSS SNF PATIENT REVENUE	2,288,824	2,080,052	208,772	10	1,781,300	21,752,048	21,621,913	130,135	1	18,105,666
DEDUCTIONS FROM REVENUE SNF:										
MEDICARE CONTRACTUAL ALLOWANCES	190,132	240,160	(50,029)	(21)	98,066	1,707,623	2,463,114	(755,491)	(31)	1,098,904
MEDI-CAL CONTRACTUAL ALLOWANCES	161,991	179,408	(17,417)	(10)	156,854	893,277	1,170,422	(277,146)	(24)	(942,730)
BAD DEBT EXPENSE	52,163	0	52,163	(57,094)	132,205	0	132,205	0		(37,667)
CHARITY CARE	20,963	0	20,963	0	128,708	0	128,708	0		0
OTHER CONTRACTUALS AND ADJUSTMENTS	8,758	34,736	(25,978)	(75)	42,083	361,789	359,059	2,730	1	349,718
TOTAL SNF DEDUCTIONS FROM REVENUE	434,006	454,304	(20,298)	(5)	239,909	3,223,602	3,992,595	(768,993)	(19)	468,225
NET SNF PATIENT REVENUE	1,854,818	1,625,748	229,070	14	1,541,391	18,528,445	17,629,318	899,127	5	17,637,441
OTHER OPERATING REVENUE	0	0	0	0	0	0	0	0	0	0
NET SNF OPERATING REVENUE	1,854,818	1,625,748	229,070	14	1,541,391	18,528,445	17,629,318	899,127	5	17,637,441
OPERATING EXPENSES:										
SALARIES & WAGES	926,114	890,092	36,022	4	886,436	9,716,646	9,410,243	306,403	3	9,177,028
REGISTRY	17,667	4,985	12,682	254	19,205	121,768	53,877	67,891	126	234,914
EMPLOYEE BENEFITS	624,572	553,538	71,034	13	779,404	6,048,758	5,860,168	188,590	3	6,013,708
PROFESSIONAL FEES	2,130	2,290	(160)	(7)	2,040	22,858	23,786	(928)	(4)	23,469
SUPPLIES	97,164	77,888	19,276	25	82,780	967,229	848,035	119,194	14	800,658
PURCHASED SERVICES	102,601	60,437	42,164	70	62,910	755,258	658,956	96,302	15	891,779
RENTAL	204	996	(793)	(80)	970	12,421	10,960	1,461	13	15,030
DEPRECIATION	41,988	40,896	1,092	3	40,065	441,400	449,862	(8,462)	(2)	447,828
INTEREST	0	0	0	0	0	0	0	0	0	0
OTHER	44,194	40,455	3,739	9	36,741	442,359	439,465	2,894	1	421,056
TOTAL EXPENSES	1,856,633	1,671,577	185,056	11	1,910,551	18,528,697	17,755,352	773,345	4	18,025,470
NET OPERATING INCOME (LOSS)	(1,815)	(45,829)	44,014	(96)	(369,160)	(252)	(126,034)	125,782	(100)	(388,029)
NON-OPERATING REVENUE\EXPENSE:										
DONATIONS	0	0	0	0	0	0	0	0	0	0
PROPERTY TAX REVENUE	26,066	26,066	0	0	24,183	286,726	286,724	2	0	266,015
OTHER NON-OPER EXPENSE	(8,343)	(8,343)	0	0	(10,376)	(101,808)	(101,809)	1	0	(143,212)
TOTAL NON-OPERATING REVENUE/(EXPENSE)	17,723	17,723	0	0	13,808	184,918	184,915	3	0	122,802
NET SURPLUS (LOSS)	15,908	(28,106)	44,014	(157)	(355,352)	184,666	58,881	125,785	214	(265,227)

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Description	Target	MTD Actual	YTD Actual	YTD Target
Average Daily Census - Acute	14.81	19.58	20.74	14.33
Average Daily Census - SNF	86.00	89.29	82.00	82.72
Acute Length of Stay	3.06	2.81	3.30	3.03
ER Visits:				
Inpatient	112	159	1,635	1,113
Outpatient	1,937	2,004	19,794	19,343
Total	2,049	2,163	21,429	20,456
Days in Accounts Receivable	45.0	41.0	41.0	45.0
Productive Full-Time Equivalents	495.86	529.75	502.83	495.86
Net Patient Revenue	11,074,484	12,293,628	129,415,184	119,868,758
Medicare Traditional Payor Mix	25.07%	28.32%	30.69%	26.80%
Commercial Payor Mix	29.93%	22.88%	23.60%	31.03%
Bad Debt % of Gross Revenue	0.92%	1.10%	1.01%	0.92%
EBIDA	115,049	328,175	8,083,050	3,770,659
EBIDA %	0.99%	2.56%	5.93%	3.00%
Operating Margin	-3.51%	-1.93%	1.69%	-1.65%
Salaries, Wages, Registry & Benefits %:				
by Net Operating Revenue	66.44%	65.09%	62.43%	64.96%
by Total Operating Expense	64.19%	63.86%	63.51%	63.90%
Bond Covenants:				
Debt Service Ratio	1.25	4.72	4.72	1.25
Current Ratio	1.50	1.79	1.79	1.50
Days Cash on hand	30.00	46.6	46.6	30.00
Met or Exceeded Target				
Within 10% of Target				
Not Within 10%				

Statement of Cash Flows

Hazel Hawkins Memorial Hospital

Hollister, CA

Eleven months ending May 31, 2022

	CASH FLOW		COMMENTS
	Current Month 5/31/2022	Current Year-To-Date 5/31/2022	
CASH FLOWS FROM OPERATING ACTIVITIES:			
Net Income (Loss)	\$56,776	\$5,116,849	
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities:			
Depreciation	331,708	3,598,090	
(Increase)/Decrease in Net Patient Accounts Receivable	321,631	(1,219,766)	
(Increase)/Decrease in Other Receivables	828,894	8,832,021	
(Increase)/Decrease in Inventories	(80,326)	(317,274)	
(Increase)/Decrease in Pre-Paid Expenses	113,020	(387,931)	
(Increase)/Decrease in Due From Third Parties	0	490,502	
Increase/(Decrease) in Accounts Payable	(486,399)	(3,700)	
Increase/(Decrease) in Notes and Loans Payable	0	0	
Increase/(Decrease) in Accrued Payroll and Benefits	370,436	(1,448,318)	
Increase/(Decrease) in Accrued Expenses	6,833	10,081	
Increase/(Decrease) in Patient Refunds Payable	8,906	8,906	
Increase/(Decrease) in Third Party Advances/Liabilities	(698,679)	(10,813,229)	
Increase/(Decrease) in Other Current Liabilities	107,941	314,325	Semi-Annual Interest - 2021 Insured Revenue Bonds
Net Cash Provided by Operating Activities:	823,965	(936,293)	
CASH FLOWS FROM INVESTING ACTIVITIES:			
Purchase of Property, Plant and Equipment	(886,684)	(5,338,914)	
(Increase)/Decrease in Limited Use Cash and Investments	0	0	
(Increase)/Decrease in Other Limited Use Assets	(240,820)	(1,534,750)	Bond Principal & Int Payment - 2014 & 2021 Bonds
(Increase)/Decrease in Other Assets	6,416	70,576	Amortization
Net Cash Used by Investing Activities	(1,121,088)	(6,803,088)	
CASH FLOWS FROM FINANCING ACTIVITIES:			
Increase/(Decrease) in Bond/Mortgage Debt	2,410,022	813,150	Refinancing of 2013 Bonds with 2021 Bonds
Increase/(Decrease) in Capital Lease Debt	(28,520)	1,195,196	
Increase/(Decrease) in Other Long Term Liabilities	0	56,145	
Net Cash Used for Financing Activities	2,381,502	2,064,491	
(INCREASE)/DECREASE IN RESTRICTED ASSETS	0	25,000	
Net Increase/(Decrease) in Cash	2,141,155	(533,041)	
Cash, Beginning of Period	16,101,862	18,776,056	
Cash, End of Period	\$18,243,015	\$18,243,015	\$0

Cost per day to run the District

\$391,310

Operational Days Cash on Hand

46.62

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**HAZEL HAWKINS HOSPITAL
BAD DEBT WRITE OFF**

**June
2022**

<u>CCS BAD DEBT RECOVERY %:</u>		15.80%
<u>BAD DEBT RECOVERY \$: May 2022</u>	\$	<u>58,096.20</u>

COLLECTION CONSULTING SERVICES:

399 Accounts Ready for Collections	\$	389,212.52
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TOTAL BAD DEBT	\$	389,212.52
WRITE-OFF COUNT	#	399

CHARITY CARE May 2022

37 Accounts W/O to Charity	\$	59,654.73
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SLIDING FEE SCALE CLINICS May 2022

52 Accounts W/O to Sliding Fee Scale	\$	25,874.75
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TOTAL CHARITY CARE May 2022	\$	<u>85,529.48</u>
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***NOTE**

TOTAL WRITE-OFF	\$	<u>474,742.00</u>
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Hazel Hawkins Memorial Hospital
 Bad Debt Expense
 For the Year Ending June 30, 2022

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total	
Budgeted Gross Revenue	28,077,628	28,267,165	27,507,614	30,000,374	27,367,008	27,461,364	29,584,020	27,738,115	28,163,207	28,701,313	27,450,017	26,750,954	337,068,779	
Budgeted Bad Debt Expense	256,791	258,639	251,859	275,200	249,843	250,205	272,444	256,135	258,393	263,901	250,864	244,615	3,088,889	
BD Exp as a percent of Gross Revenue	0.91%	0.91%	0.92%	0.92%	0.91%	0.91%	0.92%	0.92%	0.92%	0.92%	0.91%	0.91%	0.92%	
Actual Gross Revenue	30,573,916	32,794,947	31,149,360	30,941,189	29,743,202	32,375,338	32,845,938	27,616,502	33,348,273	29,650,966	32,104,475	-	343,144,106	
Actual Bad Debt Expense	253,140	298,645	409,735	369,191	292,840	311,132	261,710	317,672	325,621	275,585	367,283	-	3,482,554	
BD Exp as a percent of Gross Revenue	0.83%	0.91%	1.32%	1.19%	0.98%	0.96%	0.80%	1.2%	1.0%	0.9%	1.1%	#DIV/0!	1.01%	
Budgeted YTD BD Exp	2,844,274	0.92%												
Actual YTD BD Exp	3,482,554	1.01%												
Amount under (over) budget	(638,280)	-0.10%												
Prior Year percent of Gross Revenue	0.95%													
Percent of Decrease (Inc) from Prior Year	-6.8%													
													YTD Charity Exp Budget	750,706
													YTD Charity Exp Actual	833,140
													Amt under (over) budget	(82,434)
													Charity Exp % of Gross Rev	0.24%

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Board of Directors Contract Review Worksheet

*Amendment 1 to Professional Services Agreement with **M. Aslam Barra, M.D., OB/Gyn***

Executive Summary: The hospital requires 24/7/365 Obstetrics/Gynecology emergency call and weekday outpatient clinic coverage. Dr. Barra has provided hospital call coverage for 37 years and part-time clinic coverage at the 4th Street location since 2010. He is closing his private practice effective June 30, 2022. For continuity of care for his patients, additional clinic time is being requested.

Recommended Board Motion: It is recommended the hospital Board approve Amendment 1 adding up to 5 hours of coverage at the Multi-Specialty clinic location at a rate of \$250 per hour or up to an additional \$5,000 per month.

Services Provided: 24-hour Emergency Call, surgical assisting, and up to 20 hours per week of 4th Street and Multi-Specialty clinic coverage.

Amendment Terms:

Contract Term	Effective Date	FMV %ile	Base Monthly Increase	Estimated Annual Cost Increase	Term clause
2 years	7/1/2022	<75th	\$5,000	\$60,000	90 days

Contract Rates: Agreement includes provisions for 24-hour call, surgical & C-section assisting, and other hospital-based inpatient services per the previously approved Professional Services Agreement dated September 1, 2019.

AMENDMENT NUMBER 1 TO
PROFESSIONAL SERVICES AGREEMENT

This First Amendment, effective July 1, 2022, is to that certain Professional Services Agreement effective September 1, 2019, by and between **San Benito Health Care District**, a public health care district organized and maintained pursuant to Division 23 of the California Health and Safety Code (“SBHCD”), and **M. Aslam Barra, M.D.** (“Physician”).

SBHCD and Physician hereby agree that the following changes are made to the Agreement:

1. Clinic Coverage: Physician shall provide professional services in the SBHCD Clinics (Mabie San Juan Road Healthcare Center and Hollister Multi-Specialty Clinic) up to maximum of twenty (20) hours per week during regular business hours upon mutual agreement. Clinic coverage in excess of twenty (20) per week must be approved in advanced by SBHCD.
2. Term and Termination: Unless terminated earlier in accordance with Section 5 Term and Termination of this Amendment, this Agreement is hereby extended commencing July 1, 2022 for a two (2) year term through June 30, 2024, and will renew annually per mutual agreement. Either party may terminate this Agreement with or without cause, by giving the other party ninety (90) days advanced written notice of their intent to terminate the Agreement.
3. Compensation for Clinic Coverage: SBHCD shall pay Physician for Clinic Coverage at the rate of Two Hundred Fifty Dollars (\$250.00) per hour not to exceed twenty (20) hours per week.

All other sections and provisions of the Agreement will remain unchanged.

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

SBHCD

San Benito Health Care District

By: _____
Steven M. Hannah, Chief Executive Officer

Date: _____

Physician

M. Aslam Barra, M.D.

By: _____
M. Aslam Barra, M.D.

Date: _____

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Board of Directors Contract Review Worksheet

Addendum 6 to Orthopedic Services Coverage Agreement with **Russell Dedini, M.D.**

Executive Summary: The hospital maintains 24/7/365 orthopedic emergency call and weekday outpatient orthopedic specialty clinic coverage. Dr. Dedini has provided this coverage since 2015 in coordination with other orthopedic surgeons. Before the end of the current term in February 2024, the parties will negotiate in good faith to restructure a longer term productivity-based professional service agreement.

Recommended Board Motion: In the interest of provider retention and fair market value compensation for this hard-to-recruit specialty, it is recommended the hospital Board approve Addendum 6 for a 3% rate increase in per shift compensation.

Services Provided: 24-hour Emergency Call and orthopedic specialty clinic coverage.

Addendum Terms:

Contract Term	Effective Date	FMV %ile	Base Monthly Increase	Estimated Annual Cost Increase	Term clause
2 years	7/1/2022	<75th	\$1,474	\$17,688	90 days

Contract Rate: 3% rate increase of \$98.26 per shift for a minimum of 15 shifts per month. The last rate increase was in 2020.

**ADDENDUM NUMBER 6 TO
ORTHOPEDIC SERVICES COVERAGE AGREEMENT**

This Addendum Number 6 to ORTHOPEDIC SERVICES COVERAGE SERVICES AGREEMENT (“Addendum 5”) is entered into and effective on **July 1, 2022** (“Addendum 6 Effective Date”), by and between **San Benito Health Care District**, a local health care district (“SBHCD”), **Russell Dedini, M.D.** (“Physician”), collectively referred to as Parties.

RECITALS

- A. SBHCD and Physician are parties to that certain ORTHOPEDIC SERVICES COVERAGE AGREEMENT dated February 1, 2015 and modified by Addendum 1 dated May 21, 2015, Addendum 2 dated February 1, 2018, Addendum 3 dated March 1, 2019, Addendum 4 dated December 1, 2019, Addendum Number 5 dated February 1, 2022, and Addendum Number 6 dated July 1, 2022 (collectively, the “Agreement”), for the provision of professional medical services to hospital patients at Hazel Hawkins Memorial Hospital (“Hospital”).
- B. Pursuant to Addendum 6 the parties agree to adjust the Coverage Fee as outlined below and as mutually agreed upon.
- C. During the Term, SBHCD and Physician agree to continue to comply with all terms and conditions of the existing Agreement, and to negotiate in good faith to restructure a longer term professional services agreement.

SBHCD and PHYSICIAN hereby agree to the following modification to the Agreement:

- 1. Coverage Fee For the provision of Specialty Services in the Clinic and Hospital, SBHCD shall pay Physician Three Thousand Three Hundred Seventy-Three Dollars and Forty-Four Cents (\$3,373.44) per shift worked during the month, which shall include emergency department (operating room) call coverage during the shift and/or coverage of the Clinic. Physician’s shifts for providing Specialty Services may consist of: (1) a 24-hour shift during which Physician is on-call for the operating room, (2) a shift at the Clinic during the Clinic’s business hours, during which Physician is not on-call for the operating room, or (3) a shift at the Clinic during Clinic’s business hours, and at the same time Physician is also on-call for the operating room. If Physician shall provide Specialty Services on a day that was not originally scheduled per the Coverage Schedule, SBHCD shall pay the Coverage Fee PRO-RATED for each shift provided by Physician outside of the Coverage Schedule.
- 2. No further changes to the Agreement are made by this Addendum 6 and all other terms and provisions of the Agreement remain in full force and effect. Should there be any conflict between the terms and provisions of this Addendum 6 and those of the Agreement, the terms and provisions of this Addendum 6 shall govern.

The parties have executed this Addendum 6 as of the Addendum 6 Effective Date first set forth above.

SBHCD
San Benito Health Care District

PHYSICIAN
Russell Dedini, M.D.

By: _____
Steven M. Hannah, CEO

By: _____
Russell Dedini, M.D.

Date: _____

Date: _____

FYE June 30, 2023

San Benito Health Care District Operational Budget

Statistics:

The acute facility's inpatient admissions and days are budgeted to increase by **2%** for FY 2023. As of YTD April 30, 2022, the admissions increased over last year's 1,454 to 1,892 (30.1%) resulting in ADCs of 17.01 and 20.86 respectively. This is the highest ADC since FY 2015 when it was 19.93. The patient days increased from 5,170 to 6,341 (22.6%). ICU admissions were flat compared to last year with Med/Surg increasing 42.2% and OB increasing by 13.2%. This is the third consecutive year of an average daily census under 16.5 ADC. In addition, there is a **2%** increase budgeted in outpatient services and **5%** for outpatient surgeries.

The Skilled Nursing Facilities are budgeted to have a combined average daily census of **88**. As of April 30, 2022, the MTD ADC was 87.80 and the YTD was 81.26.

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, only the cost of 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 raising the ED Level charges in the Emergency Department by 5% effective July 1, 2022.

Net Operating Revenue is budgeted to increase by \$13.2 million.

Expenses:

The District's Productive FTEs are budgeted to increase by 17 from 512.19 (annualized) in FY 2022 to 529.11 in FY 2023. However, the productive FTEs were 527.73 for the month of April 2022. In addition, an annual raise of 3% in included effective 07/01/2022.

Overall, the acute expenses increased 9% while the SNF expenses increased by 8% due to the budgeted increase in the ADC.

Net Operating Expenses are increasing by \$12.4 million.

The District management will work to identify and implement cost savings strategies on an ongoing basis.

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Outstanding Issues:

- By year-ending June 30, 2022, the District will be negotiating with 3 of the 4 bargaining units. These include C.N.A., N.U.H.W. and E.S.C.
- The District's current commercial agreement with Anthem Blue Cross is ending on August 10, 2022. However, we are anticipating finishing negotiations on a new agreement.
- The buildout of the Maple Street building is not expected to be completed during the first half of the new fiscal year.
- The decision for selecting **Option #3** of the Master Plan is expected to be decided by the District Board during the fiscal year.

Conclusion:

The District's budget reflects the trend of an increasing acute inpatient census of non-COVID-19 patients. The SNFs have regained part of their pre-COVID-19 ADC of 95.48 for FYE June 30, 2019. The SNF ADC for FYE June 2021 was 75.16. The District's Net Surplus (**Loss**) is budgeted to be **\$6.58** million compared to a projected earnings of **\$5.48** million for FYE June 30, 2022. The EBIDA for FY 2022 and the budget for FY 2023 are estimated to be **\$8.7** million (5.9%) and **\$9.8** million (6.1%) respectively. The District is budgeted to meet its Cal-Mortgage Bond requirements for the FYE June 30, 2023. 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 Budget Projection (Non-COVID)
 For the Year Ending June 30, 2023

	FY 2022 Projected	FY 2023 Budgeted	Change	% of Variance	Comments
Patient Days	7,440	7,588	149	2%	
Outpatient Visits	171,388	174,816	3,428	2%	
Gross Patient Revenue:					
Acute Routine Revenue	48,448,562	51,881,600	3,433,038	7%	
SNF Routine Revenue	-	-			
Ancillary I/P Revenue	59,167,671	63,128,688	3,961,018	7%	
Hospitalist\Peds I/P Revenue	2,474,648	2,625,928	151,281		
Total Gross I/P Revenue	110,090,880	117,636,217	7,545,337		
Ancillary Outpatient Revenue	238,813,730	254,314,174	15,500,444		
Hospitalist\Peds O/P Revenue	684,743	717,128	32,384		
Total Gross Patient Revenue	349,589,353	372,667,518	23,078,165	7%	
Deductions from Revenue:					
Medicare Contractual Allowances	91,193,937	95,407,209	4,213,272		
Medi-Cal Contractual Allowances	89,236,898	93,696,176	4,459,278		
Bad Debt Expenses	3,654,969	3,844,563	189,594		
Charity Care	820,129	877,146	57,016		
Other Contractuals and Adjustments	44,461,319	46,782,097	2,320,778		
Hospitalist\Peds Contractual Allowance	82,981	105,108	22,127		
Total Deductions from Revenue	229,450,234	240,712,298	11,262,064	5%	
Net Patient Revenue	120,139,119	131,955,220	11,816,101	10%	
Other Operating Revenue	7,591,752	6,962,550	(629,202)	-8%	One-time PRIME payment in 2022.
Net Operating Revenue	127,730,871	138,917,770	11,186,899	9%	
Operating Expenses:					
Salaries & Wages	45,685,107	51,118,574	5,433,467	12%	Per Axiom
Registry	5,356,291	3,600,000	(1,756,291)	-33%	
Employee Benefits	23,933,404	26,416,847	2,483,443	10%	Includes Stop Loss
Professional Fees	17,308,670	19,420,206	2,111,536	12%	Inc. for Hospitalist and Anesthesia
Supplies	12,894,518	14,162,739	1,268,221	10%	Gas Prices
Purchased Services	11,522,263	12,300,000	777,737	7%	UKG and Cardinal
Rental	1,748,863	1,792,500	43,637	2%	
Depreciation & Amort.	3,267,318	3,420,000	152,682	5%	Per Equip. & Bldg schedule
Interest	29,699	45,000	15,301	52%	CHFFA loan for Acute Roof
Other	3,684,663	3,900,000	215,337	6%	PG&E, Phone, & Malpractice
Budget Adjustments					
Total Expenses	125,430,797	136,175,866	10,745,069	9%	
Net Operating Income (Loss)	2,300,075	2,741,905	441,830		
Non-Operating Revenue/Expense:					
Donations	146,982	170,000	23,018		
Property Tax Revenue	1,910,196	2,005,024	94,828		
GO 2014 Bond Prop Taxes	1,921,092	1,979,570	58,478		Difference pays principal of
GO 2014 Bond Int Revenue/Expense	(901,092)	(864,570)	36,522		1,115,000
Other Non-Operating Revenue	112,293	94,396	(17,897)		
Other Non-Operating Expense	(394,609)	(336,416)	58,193		2023 Bond Interest Expense
Investment Income	(11,313)	-	11,313		
Total Non-Operating Revenue/(Expense)	2,783,549	3,048,004	264,455		
Net Surplus (Loss)	5,083,624	5,789,908	706,285	14%	

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Hazel Hawkins Memorial Hospital
 SNF Budget Projection
 For the Year Ending June 30, 2023

	FY 2022 Projected	FY 2023 Budgeted	Change	% of Variance	Comments
Patient Days	30,076	32,120	2,044	7%	ADC of 88
Gross Patient Revenue:					
Acute Routine Revenue	-	-			
SNF Routine Revenue	21,137,760	24,090,000	2,952,240		
Ancillary I/P Revenue	2,801,974	2,830,455	28,480		
Total Gross I/P Revenue	23,939,734	26,920,455	2,980,720		
Deductions from Revenue:					
Medicare Contractual Allowances	1,821,440	2,018,850	197,410		Increase in patient care. Per diem increased from \$626.60 to \$682.38 effective 08/01/2021.
Medi-Cal Contractual Allowances	1,028,933	1,867,881	838,948		
Bad Debt Expenses	109,139	-	(109,139)		
Charity Care	107,745	-	(107,745)		
Other Contractuals and Adjustments	429,132	538,409	109,277		
Total Deductions from Revenue	3,496,389	4,425,140	928,751		
Net Patient Revenue	20,443,345	22,495,315	2,051,970	10%	
Other Operating Revenue	-	0	0		
Net Operating Revenue	20,443,345	22,495,315	2,051,970		
Operating Expenses:					
Salaries & Wages	10,690,533	11,565,448	874,915	8%	
Registry	129,103	105,000	(24,103)		
Employee Benefits	6,601,262	6,967,057	365,795	6%	
Professional Fees	25,278	27,300	2,022	8%	
Supplies	1,062,456	1,405,957	343,501	32%	ADC of 88
Purchased Services	782,657	765,000	(17,657)	-2%	
Rental	13,818	9,600	(4,218)		
Depreciation & Amort.	480,214	522,000	41,786	9%	
Interest	-	-	-		
Other	467,167	570,000	102,833		PG&E, Phones, State license.
Total Expenses	20,252,488	21,937,362	1,684,874		
Net Operating Income (Loss)	190,857	557,953	367,096		
Non-Operating Revenue/Expense:					
Donations	-	-			
Property Tax Revenue	312,792	329,113	16,321		
GO Bond Prop Taxes	-	-			
GO Bond Int Revenue/Expense	-	-			
Other Non-Operating Revenue	-	-			
Other Non-Operating Expense	(110,152)	(95,892)	14,260		2023 Bond Interest Expense.
Investment Income	-	-			
Total Non-Operating Revenue/(Expense)	202,640	233,221	30,581		
Net Surplus (Loss)	393,497	791,174	397,677	101%	

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Hazel Hawkins Memorial Hospital
 Combined Budget Projection
 For the Year Ending June 30, 2023

	FY 2022 Projected	FY 2023 Budgeted	Change
Patient Days	37,516	39,708	2,193
Outpatient Visits	171,388	174,816	3,428
Gross Patient Revenue:			
Acute Routine Revenue	48,448,562	51,881,600	3,433,038
SNF Routine Revenue	21,137,760	24,090,000	2,952,240
Ancillary I/P Revenue	61,969,645	65,959,143	3,989,498
Hospitalist\Peds I/P Revenue	2,474,648	2,625,928	151,281
Total Gross I/P Revenue	134,030,615	144,556,672	10,526,057
Ancillary Outpatient Revenue	238,813,730	254,314,174	15,500,444
Hospitalist\Peds O/P Revenue	684,743	717,128	32,384
Total Gross Patient Revenue	373,529,088	399,587,973	26,058,885
Deductions from Revenue:			
Medicare Contractual Allowances	93,015,377	97,426,059	4,410,682
Medi-Cal Contractual Allowances	90,265,831	95,564,056	5,298,225
Bad Debt Expenses	3,764,109	3,844,563	80,455
Charity Care	927,874	877,146	(50,729)
Other Contractuals and Adjustments	44,890,451	47,320,506	2,430,055
Other Adjustments	82,981	105,108	22,127
Total Deductions from Revenue	232,946,623	245,137,438	12,190,815
Payment to Claims Ratio	37.6%	38.7%	
Net Patient Revenue	140,582,465	154,450,535	13,868,071
Other Operating Revenue	7,591,752	6,962,550	(629,202)
Net Operating Revenue	148,174,217	161,413,085	13,238,869
Operating Expenses:			
Salaries & Wages	56,375,640	62,684,022	6,308,382
Registry	5,485,394	3,705,000	(1,780,394)
Employee Benefits	30,534,666	33,383,904	2,849,237
Professional Fees	17,333,948	19,447,506	2,113,558
Supplies	13,956,974	15,568,696	1,611,722
Purchased Services	12,304,920	13,065,000	760,080
Rental	1,762,681	1,802,100	39,419
Depreciation & Amort.	3,747,532	3,942,000	194,468
Interest	29,699	45,000	15,301
Other	4,151,830	4,470,000	318,170
Total Expenses	145,683,285	158,113,228	12,429,943
Net Operating Income (Loss)	2,490,932	3,299,857	808,925
Non-Operating Revenue/Expense:			
Donations	146,982	170,000	23,018
Property Tax Revenue	2,222,988	2,334,137	111,149
GO Bond Prop Taxes	1,921,092	1,979,570	58,478
GO Bond Int Revenue/Expense	(901,092)	(864,570)	36,522
Other Non-Operating Revenue	112,293	94,396	(17,897)
Other Non-Operating Expense	(504,761)	(432,309)	72,452
Investment Income	(11,313)	-	11,313
Total Non-Operating Revenue/(Expense)	2,986,189	3,281,225	295,036
Net Surplus (Loss)	5,477,121	6,581,082	1,103,961

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Hazel Hawkins Memorial Hospital
 Five Year Annual Comparison
 Five Year Ending June 30, 2023

	Actual FY2020	Actual FY2021	Projected FY2022	Budget FY2023	
Acute Net Surplus (Loss)	(5,701,614)	1,839,923	5,083,624	5,789,908	
SNF Net Surplus (Loss)	1,049,019	(1,539,871)	393,497	791,174	
District Net Surplus (Loss)	(4,652,595)	300,052	5,477,121	6,581,082	
Business Collaboration & Exp Reductions	-	-	-	-	
Restated Net Surplus (Loss)	(4,652,595)	300,052	5,477,121	6,581,082	20%
Depreciation, Amortization, & Int.	4,109,434	3,763,771	3,232,293	3,259,309	
EBIDA	(543,161)	4,063,823	8,709,414	9,840,391	
EBIDA Margin	-0.4%	2.9%	5.9%	6.1%	
Annual Debt	2,251,988	2,254,388	1,870,733	1,869,200	
Debt Service Ratio	-0.24	1.80	4.66	5.26	
Depreciation	4,152,450	4,004,533	3,747,532	3,942,000	
Int Exp other than GO Bond Interest	801,984	689,238	504,761	432,309	Includes 2013/2021 Revenue Bonds
2014 (2005 Measure L) GO Bond Interest	964,631	917,733	901,092	864,570	Bond retires July 1, 2035
Capitalized Interest	-	-	-	-	
Property Tax for 2014 GO Bonds *	(1,809,631)	(1,847,733)	(1,921,092)	(1,979,570)	Net is the principal payment of: 1,115,000
Depreciation, Amortization, & Interest	4,109,434	3,763,771	3,232,293	3,259,309	
2013/2021 Cal Mortgage Revenue Bond B of A Capital Lease	2,251,988	2,254,388	1,870,733	1,869,200	Final payments: March 2029
Annual Debt Payments	2,251,988	2,254,388	1,870,733	1,869,200	

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SAN BENITO HEALTH CARE DISTRICT
CAPITAL EQUIPMENT FOR FISCAL YEAR ENDING JUNE 30, 2023

DEPARTMENT	FACILITY/DESCRIPTION	QTY	AMOUNT		QUARTER ENDING				TOTAL	TOTAL	TOTAL
			UNIT	EXTENDED	9/22	12/22	3/23	6/23	2023	2024	2025
HOSPITAL/ACUTE											
Intensive Care Unit	Carescape B450 V3.1 Monitoring System w/Modules, Trainings and Network	1	165,000	165,000		165,000			165,000		
Med/Surg	Carescape Apex Pro CH Telemetry Subsystems w/Server, Licenses and Trainings	1	117,030	117,030		117,030			117,030		
Med/Surg	Carescape Gateway Service and Router	1	53,800	53,800		53,800			53,800		
Med/Surg	TOTAL	2		170,830		170,830			170,830		
Operating Room	Novasure V5 Combo Kit	1	24,900	24,900	24,900				24,900		
Operating Room	Sterrad Sterilization System	3	42,000	126,000				126,000	126,000		
Operating Room	Autoclave Refurbished Machine	1	24,890	24,890		24,890			24,890		
Operating Room	TOTAL	5		175,790	24,900	24,890		126,000	175,790		
Emergency Room	Carescape B450 V3.1 Monitoring System w/Modules, Trainings, Network and Router	1	533,600	533,600				533,600	533,600		
Emergency Room	Stryker Prime Big Wheel Bariatric Gurney/Stretcher	2	10,702	21,404		10,702	10,702		21,404		
Emergency Room	TOTAL	3		555,004		10,702	10,702	533,600	555,004		
EKG	Philips ST80I Stress Testing System	1	24,750	24,750		24,750			24,750		
Respiratory Therapy	MGC Diagnostics Platinum Elite DL Plethsmograph w/RTD	1	78,417	78,417		78,417			78,417		
Plant Operations	Main Hospital Boiler	1	450,000	450,000						450,000	
Plant Operations	Radiology Air Conditioning	1	100,000	100,000					100,000		
Plant Operations	Upgrade A/C System in IT Server Room	1	250,000	250,000		250,000			250,000		
Plant Operations	Hospital Parking Lot Resurfaced	1	200,000	200,000	200,000				200,000		
Plant Operations	TOTAL	4		1,000,000	200,000	250,000			450,000	550,000	
Lab	Pathology Interface	1	30,000	30,000		30,000			30,000		
Lab	Microscopes	2	10,000	20,000	10,000	10,000			20,000		
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		100,000		
Lab	Lab Middleware	1	100,000	100,000						100,000	
Lab	Hematology Analyzer	2	200,000	400,000						400,000	
Lab	Refrigerators and Freezers	2	20,000	40,000			40,000		40,000		
Lab	BacT Alert Analyzer	1	150,000	150,000						150,000	
Lab	Coagulation Analyzer	1	70,000	70,000				70,000	70,000		
Lab	TOTAL	12		1,110,000	10,000	40,000	40,000	170,000	260,000	400,000	450,000
Information Technology	Lepide DSP Software-Active Directory & Group Auditing for Mitigating Privileges and Compliance	1	44,095	44,095		44,095			44,095		
Radiology	Ultrasound Machine	4	120,000	480,000	360,000				360,000	120,000	
Radiology	Mammogram Unit	1	450,000	450,000				450,000	450,000		
Radiology	Dexa Machine	1	90,000	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	
Radiology	TOTAL	12		3,460,000	360,000	600,000	290,000	450,000	1,700,000	1,590,000	170,000
HOSPITAL ACUTE TOTAL											
		42		6,783,886	594,900	1,408,684	340,702	1,279,600	3,623,886	2,540,000	620,000

SAN BENITO HEALTH CARE DISTRICT
 CAPITAL EQUIPMENT FOR FISCAL YEAR ENDING JUNE 30, 2023

DEPARTMENT	FACILITY/DESCRIPTION	QTY	AMOUNT		QUARTER ENDING				TOTAL	TOTAL	TOTAL
			UNIT	EXTENDED	9/22	12/22	3/23	6/23	2023	2024	2025
SNF											
Plant Operations	Northside Generator	1	250,000	250,000		250,000			250,000		
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	18		323,700	20,300	267,800	17,800	17,800	323,700		
	DISTRICT TOTAL	60		7,107,586	615,200	1,676,484	358,502	1,297,400	3,947,586	2,540,000	620,000

71.
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**BOARD OF DIRECTORS
DISTRICT FACILITIES & SERVICE DEVELOPMENT COMMITTEE
VIA TELECONFERENCE**

**Thursday, June 16, 2022
4:00 P.M. – Hybrid Zoom Meeting**

MINUTES

PRESENT: Jeri Hernandez, Board President
Don Winn, Board Secretary
Steven Hannah, Chief Executive Officer
Mark Robinson, VP/Chief Financial Officer
Barbara Vogelsang, VP/Chief Clinical Officer
Mary Casillas, VP/Clinical Operations Officer
Adrian Flores, Plant Operations Director
Tina Pulido, Plant Operations/Construction Coordinator

I. CALL TO ORDER:

The meeting of the District's Facilities & Service Development Committee was called to order by Jeri Hernandez at 4:00p.m. via Hybrid Zoom.

II. REVIEW OF MINUTES:

The minutes of the District's Facilities & Service Development Committee of May 19, 2022, were reviewed.

III. MASTER PLAN:

- SPC-4d:
Adrian F. reported that the first deadline is 1/2024 however, the contingency should be decided by 12/2022.
- Maple Street Building:
Mary C. reported that they are reassessing the project and will report back later.
- Current Campus Bed Optimization Plan:
Barbara V. reported that they met with CDPH and HCAI. They will respond back regarding what will be needed to re-license some of the unlicensed rooms.
- Women's Center 3rd Floor Buildout:
Steve H. reported that they will be building out the 3rd floor.
 - 1) Financing Plan – \$10,000,000 for possible Clinic Space
 - 2) Design and Buildout Timeline – Steve H. reported that it should be up and running within 2 years. The Committee agreed. Mark R. reported that it would need at least six months to finance. A separate Committee will be created.

IV. UPDATE ON CURRENT PROJECTS:

- Acute Roof Replacement:
Adrian F. reported that the project is 65% completed with an extended completion date of 7/2022.
- Northside SNF Chiller Replacement:
Adrian F. reported that the chiller is scheduled to arrive next week with a two to three week replacement timeline.

- Northside SNF Generator:
Jeri H. reported that the current generator doesn't support the entire building. Adrian F. reported that it supports patient areas. Steve H. requested a full report by next meeting.

V. CURRENT PROJECTS ON HOLD:

- CAT Scanner:
Mark R. reported that this project is currently being reassessed in conjunction with the Maple Street Project.

VI. OTHER PROJECTS:

- Grounds Maintenance:
Adrian F. reported that he walked the area on Airline Hwy., with two landscapers and they are not able to take on the project at this time. After reviewing it, there is already ice plant in that area. Adrian F. will confirm current water restrictions and if possible, add a drip line on a timer.
- Northside Nurses Station Refresh:
Adrian F. reported that this project has been completed.
- Parking:
 - a. Reseal Parking Lot;
Adrian F. reported that based on the specifications for this project it will be going out to bid.
 - b. Parking Lot Stop Sign
Adrian F. reported that the sign was installed last week and is now completed.
- Acute Patient Room Refresh:
Adrian F. reported that there is one patient room left to complete.
- Front Hospital Spruce Up Projects:
 - a. Landscape Rock;
Adrian F. reported that the ED courtyard has been completed.
- Office Refresh for General Surgeons:
Adrian F. reported that they are currently getting bids. Mary C. requested a timeline for completion be submitted by the next meeting.

VII. OPEN DISCUSSION:

- Front Lobby Registration Doors:
Steve H. suggested replacing the two doors that lead from the main lobby Registration area to the Lab and Radiology. They are currently wood and can be changed to something more modern, the Committee agreed. Adrian F. will get a quote to replace them.
- Main Lobby Cafeteria Area:
Steve H. reported that the main Hospital cafeteria is very small for the amount of people that use it. He suggested removing the wall or putting up a sliding door going from the Café to the current East Lobby waiting room. The Committee agreed and Adrian F. will start looking into quotes.

VIII. ADJOURNMENT:

There being no further business, the meeting was adjourned at 4:37PM.



Hazel Hawkins
MEMORIAL HOSPITAL

To: San Benito Health Care District Board of Directors
From: Laura Garcia, Executive Assistant
Date: June 2022
Re: Officer Slate for Board of Directors – Action Item

A vacancy for the seat of Zone 4 on the Board of Directors occurred when Director Mary Casillas resigned effective April 18, 2022. When her resignation was received, the District went through process of posting a public Notice of Vacancy.

At the Regular Meeting of the Board of Directors on May 26, 2022, Don Winn was appointed to fill the Zone 4 vacancy. Filling this vacancy also left a vacancy for the role of Vice President .

The Board President is proposing approval of Bill Johnson into the role of Vice President and Don Winn into the role of Secretary for the Officer Slate of the Board of Directors.