



SJCC BOARD OF DIRECTORS ATTENDANCE RECORD 2021

2021 Meeting Dates

Member Name	Patient? Yes / No	Joined Board	1/26/21	2/23/21	3/30/21	4/27/21	5/25/21	6/29/21	7/27/21	8/31/21	9/28/21	10/26/21	11/30/21	12/28/21
Baskett, Mike	No	2018	AU											
Cortez, Ismael	Yes	2011	AE											
Heck, Brian	No	2019	P											
Maldonado, Alvin	Yes	2011	P											
Medina, Esgardo *	Yes	2020	P											
Mills, Mary	No	2010	P											
Place, Rod	No	2010	P											
Sandoval, Luz Maria	Yes	2013	AU											
Scoz, Christopher **	Yes	2020	P											
Yonemoto, Alicia	Yes	2014	P											

CODE P = Present

Code AE = Absence Excused

CODE AU = Absence Unexcused

* Voted on to Board 5/26/2020

** Voted on to Board 10/27/2020

**INITIAL APPOINTMENTS
FEBRUARY 2021**

The following practitioners have applied for membership and privileges at San Joaquin General Hospital. The following summary includes factors that determine membership: licensure, DEA, professional liability insurance, required certifications (if applicable), etc. Factors that determine competency include medical/professional education, internship/residencies/fellowships, board certification (if applicable), current and previous hospital and other institutional affiliations, physical and mental health status, peer references, and past or pending professional disciplinary action. The applicants meet the requirements for membership unless noted below.

Membership Request	Name	Specialty/ Assigned Div/Dept	Competency / Privilege Review	Proctoring Required	Proctor	Rec Status/Term	Recommend
No initial appointments for this month							

**REAPPOINTMENTS
FEBRUARY 2021**

The following practitioners have applied for reappointment to the Medical Staff of San Joaquin General Hospital. This summary includes factors that determine membership: licensure, DEA, professional liability insurance, hospital affiliations, etc. Qualitative/quantitative factors include ongoing performance evaluation which includes data from peer review, quality performance, clinical activity, privileges, competence, technical skill, behavior, health status, medical records, blood review, medication usage, litigation history, utilization and continuity of care. affiliations, physical and mental health status, peer references, and past or pending professional disciplinary action. All the applicants privilege request commensurate with training, experience and current competence unless noted below.

Membership Request	Name	Specialty/ Assigned Div/Dept	Quantitative/Qualitative Factors Request for Privileges and/or Privilege Change	Action Taken/Rec. Exceptions for Cause	Rec. Staff Category/ Reappoint Period	Recommend
There are no reappointments for this month						

ADVANCEMENTS
FEBRUARY 2021

The following practitioners are being advanced to their requested staff status to the Medical Staff of San Joaquin General Hospital. This summary includes factors that determine membership: licensure, DEA, professional liability insurance, hospital affiliations, etc. Qualitative/quantitative factors include ongoing performance evaluation which includes data from peer review, quality performance, clinical activity, privileges, competence, technical skill, behavior, health status, medical records, blood review, medication usage, litigation history, utilization and continuity of care.

Name	Specialty/Assigned Div/Dept	Current Category of Membership	Recommended Category	Reason	Recommend
Nasrin Sanei, CNM	Nurse Midwife OB/GYN	Provisional	Allied Health Professional	Proctoring Completed	CRED: 02/02/2021 MEC: 02/16/2021 Board: 03/09/2021

**RESIGNATIONS
FEBRUARY 2021**

Name	Reason for Resignation:	Effective Date of Resignation
Svetlana Yagudayeva, NP	Resigned	Jan-21



Finance Committee
February 22, 2021, 4:00 p.m.

[Join Microsoft Teams Meeting](#)

[+1 209-645-4071](#) United States, Stockton (Toll)

Conference ID: 741 270 936#

Agenda

1.	Call to order	Rod Place	1 min
2.	Approval of Minutes from 01/25/2021	* Rod Place	1 min
3.	Introductions	Rod Place	1 min
4.	Presentation of December & January Financials	Kris Zuniga	10 mins
5.	Accounts Receivables Status / KPI	Kris Zuniga	10 mins
6.	Adjournment	Rod Place	1 min

*** Action Item**

Next Meeting: March 29, 2021 at 4:00 p.m.



San Joaquin County Clinics (SJCC)

Minutes of January 25, 2021
FINANCE Committee Meeting Minutes

San Joaquin County Clinics
Web Conference Call

PRESENT:

Rod Place (SJCC Board Chair); Alicia Yonemoto (SJCC Board Vice-Chair); Esgardo Medina (SJCC Co-Treasurer); David Culberson (SJGH CEO); Dr. Farhan Fadoo (SJCC CEO); Alice Souligne (SJCC COO); Kristopher Zuniga (SJCC CFO); Chris Roberts (SJGH CFO); Adelé R. Gribble (SJCC OTC)

EXCUSED:

Brian Heck (SJCC Board Member);

ABSENT:

Luz Maria Sandoval (SJCC Co-Treasurer); Greg Diederich (HCS Director)

AGENDA ITEM	ATTACHMENTS	ACTION
<p>1. <u>Call to Order (Rod Place, SJCC Board Chair)</u></p> <p>The meeting was called to order by Rod Place at 4:04 p.m. A quorum was established for today’s meeting.</p>	No Attachments	No Action Required
<p>2. <u>Approval of Minutes of 12/28/2020 (Rod Place, SJCC Board Chair)</u></p> <p>The minutes were reviewed by present board members. Esgardo Medina made a motion to approve the minutes from December 28, 2020, Alicia Yonemoto seconded the motion and all present members unanimously approved the minutes.</p>	(Attachment 2) Finance Committee Meeting Minutes from December 28, 2020	Motion to approve minutes from 12/28/20 – Esgardo Medina; Second – Alicia Yonemoto. Committee unanimously approved the minutes.
<p>3. <u>Introductions (Rod Place, SJCC Board Chair)</u></p> <p>There were no introductions for this meeting</p>	No Attachments	No Action Required
<p>4. <u>Presentation of November Financials (Kris Zuniga, SJCC CFO)</u></p> <p>Below are the results for period ending November 30, 2020. For the month of November, we had billable visits of 7,937 visits. On a YTD basis, that represented 48,681 against a budget of 36,560, giving us a positive variance of 12,121 (33%) visits.</p> <p>Net Patient Revenue – we have \$981,427 for the month. YTD basis we are at \$6.5M against a budget of \$5.4 for about \$1M favorable variance to budget.</p>	(Attachments 4) Finance Narrative 2020-11 Income Statement 2020-11	No Action Required

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<p>Total Net Revenues were \$1,488,140. On a YTD basis we are at \$9M in Net Revenues for the year against a budget of \$7.6M so we are ahead of budget by \$1.4M which is a favorable variance of 17.8%.</p> <p>Total Salaries and Benefits – we are at \$974,286 for the month of November. On a YTD basis, this is in line with the budget at \$5.8M against a budgeted amount of \$5.7M for an unfavorable variance of \$142,063.</p> <p>Total Direct Expenses - \$1.4M. Net income for the month before Overhead and Supplemental is \$71,240. After Supplemental Revenues and Overhead Allocation, we have a Net Income of \$217,746. On a YTD basis this equates to a Net Income of \$2.1M against a budget of \$857K for a favorable variance of \$1.3M.</p> <p>All additional information regarding the income statement can be found in the attachment labeled San Joaquin County Clinics Income Statement As Of November 30, 2020. A separate attachment showing breakdown by clinic is also available for further detail.</p>	(Attachments 4 cont.) Income Statement by Cost Center 2020-11																																																																																																																																																																																																																																		
<p>5. <u>Accounts Receivables Status / KPI (Kris Zuniga, SJCC CFO)</u></p> <p>Kris Zuniga presented the PFS Accounts Receivable Aging Analysis for SJCC For the Month of November 2020 (attached and shown below).</p> <table border="1" data-bbox="180 824 1115 1455"> <thead> <tr> <th colspan="9">PFS Accounts Receivable Aging Analysis For SJCC For the Month of November 2020</th> </tr> <tr> <th>Aging Category</th> <th>MediCare</th> <th>MediCal</th> <th>Commercial</th> <th>Self Pay</th> <th>Total Aging This Month</th> <th>Total Aging Last Month</th> <th>\$ Increase (Decrease)</th> <th>% Increase (Decrease)</th> </tr> </thead> <tbody> <tr> <td>Accrued Receivables</td> <td></td> <td></td> <td></td> <td></td> <td>-</td> <td>0</td> <td>0</td> <td>0.00%</td> </tr> <tr> <td>1-30 Days</td> <td>125,108</td> <td>1,356,215</td> <td>44,039</td> <td>29,479</td> <td>1,554,841</td> <td>1,821,811</td> <td>(266,970)</td> <td>-14.65%</td> </tr> <tr> <td>31-60 Days</td> <td>55,868</td> <td>197,419</td> <td>57,785</td> <td>36,580</td> <td>347,652</td> <td>286,936</td> <td>60,715</td> <td>21.16%</td> </tr> <tr> <td>61-90 Days</td> <td>46,558</td> <td>150,302</td> <td>45,708</td> <td>31,984</td> <td>274,551</td> <td>131,639</td> <td>142,912</td> <td>108.56%</td> </tr> <tr> <td>91-120 Days</td> <td>14,135</td> <td>47,282</td> <td>43,242</td> <td>26,543</td> <td>131,203</td> <td>156,101</td> <td>(24,898)</td> <td>-15.95%</td> </tr> <tr> <td>121-180 Days</td> <td>65,702</td> <td>83,335</td> <td>143,398</td> <td>16,168</td> <td>308,602</td> <td>418,599</td> <td>(109,997)</td> <td>-26.28%</td> </tr> <tr> <td>181-240 Days</td> <td>37,427</td> <td>65,497</td> <td>112,933</td> <td>21,973</td> <td>237,830</td> <td>139,445</td> <td>98,384</td> <td>70.55%</td> </tr> <tr> <td>241-270 Days</td> <td>13,751</td> <td>(388)</td> <td>7,453</td> <td>5,112</td> <td>25,928</td> <td>74,367</td> <td>(48,439)</td> <td>-65.14%</td> </tr> <tr> <td>271-365 Days</td> <td>66,556</td> <td>53,971</td> <td>55,456</td> 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<p>EMMI Average Collection Time on Paid Accounts by Date of Service is shown below:</p> <table border="1"> <thead> <tr> <th>Row Labels</th> <th>Average of Service to Claim</th> <th>Average of Claim to Payment</th> <th>Average of Collection Time</th> </tr> </thead> <tbody> <tr><td>2020-01</td><td>12.92</td><td>102.58</td><td>115.50</td></tr> <tr><td>2020-02</td><td>7.34</td><td>91.48</td><td>98.82</td></tr> <tr><td>2020-03</td><td>5.74</td><td>74.41</td><td>80.14</td></tr> <tr><td>2020-04</td><td>12.11</td><td>57.65</td><td>69.76</td></tr> <tr><td>2020-05</td><td>7.89</td><td>30.32</td><td>38.21</td></tr> <tr><td>2020-06</td><td>8.17</td><td>34.80</td><td>42.97</td></tr> <tr><td>2020-07</td><td>10.16</td><td>21.58</td><td>31.74</td></tr> <tr><td>2020-08</td><td>8.85</td><td>26.54</td><td>35.39</td></tr> <tr><td>2020-09</td><td>6.76</td><td>21.25</td><td>28.01</td></tr> <tr><td>2020-10</td><td>6.76</td><td>18.72</td><td>25.48</td></tr> <tr><td>2020-11</td><td>5.90</td><td>13.30</td><td>19.20</td></tr> <tr> <td>Grand Total</td> <td>8.92</td> <td>59.61</td> <td>68.53</td> </tr> </tbody> </table> <p>If we are getting our claims out within fourteen days, we are compliant with HRSA. Our goal is to have less than 60 days from claim to payment.</p>	Row Labels	Average of Service to Claim	Average of Claim to Payment	Average of Collection Time	2020-01	12.92	102.58	115.50	2020-02	7.34	91.48	98.82	2020-03	5.74	74.41	80.14	2020-04	12.11	57.65	69.76	2020-05	7.89	30.32	38.21	2020-06	8.17	34.80	42.97	2020-07	10.16	21.58	31.74	2020-08	8.85	26.54	35.39	2020-09	6.76	21.25	28.01	2020-10	6.76	18.72	25.48	2020-11	5.90	13.30	19.20	Grand Total	8.92	59.61	68.53		
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<p>6. <u>Adjournment (Rod Place, SJCC Board Chair)</u></p> <p>There being no further topics of discussion, Rod Place adjourned the meeting at 4:24 p.m.</p>	No Attachments	No Action Required																																																				



San Joaquin County Clinics
Financial Statement Comments
Year to Date through December 2020

Summary of Clinics Year to Date

Billable visits through December were favorable to budget by 5,220 visits, or 10% greater than budget. Net patient revenues are \$2MM greater than budget primarily associated with large Medi-Cal Code 18 increases effective July 15, 2020 and greater than expected visits. A liability associated with the annual PPS reconciliation is being accrued at \$50K per month. December financials include a year-to-date PPS reconciliation liability accrual of \$300,000.

Year-to-date capitation is in line with budget exhibiting a minimal favorable variance of \$18,560. Year-to-date 340B Pharmacy Program revenue is recognized for \$403,838 and the program related expenses for \$114,578 are included in the Other Expenses category on the financials. Also, Other Revenue includes combined Grants Revenue for Essential Access Title X, First5 SJ Teeth, and Sunlight Giving grants and the First Responder program for \$285,365 and \$115,400 respectively. Thus, total net revenues are greater than budget by \$2,850,043.

Salaries and benefits expenses are greater than budget by \$196,424, or 2.9%. This unfavorable variance can be attributed to the greater than expected patient volumes and to meet the staffing needs.

Other operating expenses exhibit a year-to-date unfavorable variance of \$266,391 largely due to a professional fees unfavorable variance of \$192,724 mainly offset by favorable variance in supplies \$215,022.

The Clinic financials include conservative, estimated FYTD supplemental revenues earned by the Clinics in the amount of \$3,684,496 for the Quality Incentive Program.

Unaudited net income inclusive of the estimated overhead allocation is \$3,154,413 on a year-to-date basis which is greater than budget by \$2,495,743.

Additional Factors Impacting Clinic Performance Presentation

- Estimated hospital overhead allocated to the clinics has been changed to 33% of direct expenses.

San Joaquin County Clinics
Income Statement
As of December 31, 2020

													Year to Date			
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	YTD Actual	YTD Budget	Variance	% Var
Total Visits	13,515	11,195	11,861	11,509	10,344	12,805							71,229	54,856	16,373	29.8%
Billable Visits	11,569	9,681	10,025	9,469	7,937	8,932							57,613	52,393	5,220	10.0%
Patient Revenue																
Medicare	131,541	27,929	28,358	14,081	48,425	172,719							423,052	1,501,883	(1,078,831)	-71.8%
Medi-Cal Fee-for-Service	460,856	229,265	224,964	30,912	185,628	266,020							1,397,646	1,638,418	(240,772)	-14.7%
Medi-Cal Managed Care	2,062,848	1,356,553	1,133,058	1,026,908	1,200,378	1,649,349							8,429,093	9,967,044	(1,537,950)	-15.4%
Insurance	51,883	56,976	64,627	62,078	44,802	56,688							337,053	136,535	200,519	146.9%
Self Pay	(5,622)	63,105	29,973	72,068	49,564	(5,446)							203,642	409,605	(205,962)	-50.3%
Indigent	-	-	-	-	-	-							-	-	-	-
Gross Patient Revenue	2,701,507	1,733,829	1,480,979	1,206,047	1,528,797	2,139,330	-	-	-	-	-	-	10,790,487	13,653,484	(2,862,997)	-21.0%
Contractual Adjustments	(1,387,128)	(88,489)	115,869	(86,608)	(496,172)	(318,042)							(2,260,568)	(7,190,997)	4,930,429	68.6%
PPS Reconciliation	-	(100,000)	(50,000)	(50,000)	(50,000)	(50,000)							(300,000)	(300,000)	-	-
Other Allowances	(4,083)	4,231	(4,528)	(124)	(1,199)	(46,550)							(52,252)	(11,702)	(40,551)	-346.5%
Net Patient Revenue	1,310,296	1,549,571	1,542,320	1,069,315	981,427	1,724,738	-	-	-	-	-	-	8,177,667	6,150,786	2,026,881	33.0%
Other Revenue																
Incentives & Pay-For-Performance Revenues	-	-	-	-	-	-							-	-	-	-
Capitation Revenue	444,084	442,220	451,024	448,657	452,201	454,084							2,692,270	2,673,711	18,560	0.7%
Grant Revenue	-	-	-	137,822	7,833	139,710							285,365	-	285,365	-
First Responder Program	-	-	-	75,600	12,000	27,800							115,400	-	115,400	-
CARES Funding	-	-	-	69,298	34,680	299,860							403,838	-	403,838	-
Pharmacy Revenue	-	-	-	-	-	-							-	-	-	-
Meaningful Use	-	-	-	-	-	-							-	-	-	-
Total Other Revenue	444,084	442,220	451,024	731,377	506,713	921,454	-	-	-	-	-	-	3,496,873	2,673,711	823,162	30.8%
Total Net Revenue	1,754,381	1,991,791	1,993,344	1,800,692	1,488,140	2,646,193	-	-	-	-	-	-	11,674,540	8,824,497	2,850,043	32.3%
Operating Expense																
Salaries	707,163	914,327	677,400	833,716	637,754	771,625							4,541,984	3,811,848	(730,135)	-19.2%
Benefits	449,333	425,283	417,536	391,482	336,532	453,813							2,473,979	3,007,690	533,711	17.7%
Total Salaries & Benefits	1,156,496	1,339,609	1,094,936	1,225,197	974,286	1,225,438	-	-	-	-	-	-	7,015,963	6,819,538	(196,424)	-2.9%
Professional Fees/Registry	132,092	153,275	13,416	104,222	176,028	124,497							703,530	510,806	(192,724)	-37.7%
Supplies	23,268	35,037	48,371	18,177	44,973	57,580							227,405	442,427	215,022	48.6%
Purchased Services	65,997	134,024	190,644	133,116	172,468	192,635							888,884	830,686	(58,198)	-7.0%
Depreciation	18,745	18,745	18,745	18,745	18,745	18,745							112,470	135,351	22,881	16.9%
Other Expense	35,155	20,421	30,900	18,333	30,400	92,947							228,156	171,208	(56,947)	-33.3%
Total Direct Expense	1,431,752	1,701,111	1,397,012	1,517,789	1,416,900	1,711,843	-	-	-	-	-	-	9,176,408	8,910,017	(266,391)	-3.0%
Net Income (Loss)	322,628	290,680	596,332	282,902	71,240	934,349	-	-	-	-	-	-	2,498,132	(85,520)	2,583,652	3021.1%
Revenues from Supplemental Sources																
Public Hospital Redesign and Incentives in Medi-Cal (PRIME)	-	-	-	-	-	-							-	-	-	-
Quality Incentive Program (QIP)	614,083	614,083	614,083	614,083	614,083	614,083							3,684,496	3,684,496	-	-
Overhead Allocation	472,478	561,367	461,014	500,871	467,577	564,908							3,028,215	2,940,306	(87,909)	-3.0%
Net Income (Loss) w/ OH Allocation	464,233	343,396	749,401	396,115	217,746	983,524	-	-	-	-	-	-	3,154,413	658,670	2,495,743	378.9%

Key Ratios

Gross Pt Revenue/Billable Visit	\$ 233.51	\$ 179.10	\$ 147.73	\$ 127.37	\$ 192.62	\$ 239.51							\$ 187.29	\$ 260.60	\$ (73.30)	-28.1%
Net Patient Service Revenue/Billable Visit	\$ 151.64	\$ 205.74	\$ 198.84	\$ 160.31	\$ 180.63	\$ 243.93							\$ 188.67	\$ 168.43	\$ 20.24	12.0%
Direct Costs/Billable Visit	\$ 123.76	\$ 175.72	\$ 139.35	\$ 160.29	\$ 178.52	\$ 191.65							\$ 159.28	\$ 170.06	\$ 10.78	6.3%
Indirect Costs/Billable Visit	\$ 40.84	\$ 57.99	\$ 45.99	\$ 52.90	\$ 58.91	\$ 63.25							\$ 52.56	\$ 56.12	\$ 3.56	6.3%
Total Medical Cost/Billable Visit	\$ 164.60	\$ 233.70	\$ 185.34	\$ 213.19	\$ 237.43	\$ 254.90							\$ 211.84	\$ 226.18	\$ 14.34	6.3%
Net Income(Loss)/Billable Visit	\$ 40.13	\$ 35.47	\$ 74.75	\$ 41.83	\$ 27.43	\$ 110.11							\$ 54.75	\$ 12.57	\$ (42.18)	-335.5%
Total Cost/Patient (1)	\$ 411.49	\$ 584.26	\$ 463.35	\$ 532.97	\$ 593.57	\$ 637.25							\$ 529.59	\$ 565.45	\$ 35.86	6.3%
Net Pt Rev as % of Gross Rev	48.5%	89.4%	104.1%	88.7%	64.2%	80.6%							75.8%	45.0%	30.7%	68.2%
Total Net Rev as % of Gross Rev	64.9%	114.9%	134.6%	149.3%	97.3%	123.7%							108.2%	64.6%	43.6%	67.4%
Benefits as a % of Salaries	63.5%	46.5%	61.6%	47.0%	52.8%	58.8%							54.5%	78.9%	24.4%	31.0%
Overhead % of Direct Exp	33.0%	33.0%	33.0%	33.0%	33.0%	33.0%							33.0%	33.0%	0.0%	0.0%
Gross Patient AR (in 000s)																
Less Reserves (in 000s)																
Net AR (in 000s)																
Wrap AR (in 000s)																
Gross AR Days																
Cash Receipts (in 000s)																

San Joaquin General Hospital-FQHC LAL Clinics
Income Statement
For the YTD Ending
December 31, 2020

	Children's Health Services (#7080)	Family Medicine (#7092)	Family Practice - Ca (#7093)	Primary Medicine (#7096)	Healthy Beginnings - Ca (#7182)	Healthy Beginnings French Camp (#7183)	Hazleton Clinic (#7184)	Manteca Clinic (#7185)	FQ Grants	FQ Admin (#7071)	Total	YTD Budget	YTD Variance - Fav (Unf)	% Var - Fav (Unf)	
Total Visits	10,316	23,317	2,276	21,818	8,841	4,661	-	-	-	-	71,229	54,856	16,373	29.8%	
Billable Visits	9,104	12,996	2,179	20,155	8,808	4,373	-	-	-	-	57,613	52,393	5,220	10.0%	
Productive FTEs (Provider)	4.0	2.4	1.2	8.5	3.7	1.6	-	-	-	-	21.3	20.0	(1.3)	-6.7%	
Productive FTEs (Non-Provider)	12.9	16.6	7.4	12.2	7.9	4.7	-	-	18.5	-	80.2	75.5	(4.7)	-6.3%	
Total FTEs	16.9	19.0	8.6	20.7	11.6	6.2	-	-	18.5	-	101.6	95.5	(6.1)	-6.3%	
Total Hours/Visit	2.28	5.56	1.78	2.40	2.40	2.81	-	-	-	-	2.72	2.64	(0.08)	-3.1%	
Patient Revenue															
Medicare	5,022	145,528	36,553	175,026	36,240	28,452	(1,067)	(2,702)	-	-	423,052	1,501,883	(1,078,830)	-71.8%	
Medi-Cal	381,398	261,211	31,944	243,784	336,898	125,358	3,332	13,722	-	-	1,397,646	1,638,418	(240,772)	-14.7%	
Medi-Cal Managed Care	2,628,827	1,622,102	296,300	2,235,645	1,133,855	501,376	1,638	9,350	-	-	8,429,093	9,967,044	(1,537,950)	-15.4%	
Insurance	22,310	78,474	4,103	165,469	14,851	52,929	2,928	(4,011)	-	-	337,053	136,535	200,519	146.9%	
Self Pay	24,529	59,041	10,920	69,243	40,320	19,210	(5,248)	(14,373)	-	-	203,642	409,605	(205,963)	-50.3%	
Indigent	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Gross Revenue	3,062,086	2,166,356	379,820	2,889,167	1,562,164	727,326	1,583	1,986	-	-	10,790,487	13,653,484	(2,862,998)	-21.0%	
Contractual Adjustments	(1,142,135)	(318,834)	(44,427)	(727,972)	(166,022)	261,069	(27,843)	(94,407)	-	-	(2,260,570)	(3,152,575)	892,005	28.3%	
PPS Reconciliation	(53,075)	(80,597)	(19,658)	(76,666)	(31,071)	(38,934)	-	-	-	-	(300,000)	(300,000)	-	0.0%	
Other Allowances	(10,549)	(8,773)	(14,194)	(7,781)	(4,716)	(1,053)	(2,448)	(2,739)	-	-	(52,251)	(11,702)	(40,550)	-346.5%	
Net Patient Revenue	1,856,326	1,758,153	301,541	2,076,748	1,360,355	948,409	(28,708)	(95,159)	-	-	8,177,666	6,150,786	2,026,879	33.0%	
Incentives & Pay-For-Performance Revenues	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Pharmacy Revenue	-	-	-	-	-	-	-	-	403,838	-	403,838	-	403,838	-	
Physician Capitation- PMPM	483,396	600,603	101,172	920,988	400,487	185,625	-	-	-	-	2,692,270	2,673,711	18,560	0.7%	
	2,339,722	2,358,755	402,713	2,997,736	1,760,842	1,134,034	(28,708)	(95,159)	-	-	403,838	11,273,774	8,824,497	2,449,277	27.8%
Other Revenue	-	-	-	-	-	-	-	-	400,764.70	-	400,765	-	400,765	100.0%	
Total Operating Revenue	2,339,722	2,358,755	402,713	2,997,736	1,760,842	1,134,034	(28,708)	(95,159)	400,765	403,838	11,674,539	8,824,497	2,850,041	32.3%	
	(1.00)	-	-	-	-	-	-	-	-	-	-	-	-	-	
Expenses															
Salaries	698,398	624,641	309,876	1,014,306	641,254	308,644	-	-	160,279	784,586	4,541,984	3,811,848	(730,135)	-19.2%	
Benefits	400,810	337,965	233,328	441,328	285,739	170,738	-	-	55,802	548,268	2,473,979	3,007,690	533,711	17.7%	
Total Salaries & Benefits	1,099,208	962,606	543,204	1,455,635	926,994	479,382	-	-	216,081	1,332,853	7,015,963	6,819,538	(196,424)	-2.9%	
Professional Fees/Registration	30,305	140,220	0	59,334	0	74,600	-	-	-	399,071	703,530	510,806	(192,724)	-37.7%	
Supplies	18,369	52,486	7,315	64,546	49,617	32,761	-	-	-	2,311	227,405	442,427	215,022	48.6%	
Purchased Services	23,112	595	11,021	533	12,428	490	-	-	-	840,704	888,884	830,686	(58,198)	-7.0%	
Depreciation	3,685	11,154	896	815	6,830	14,431	-	-	-	74,659	112,470	135,351	22,881	16.9%	
Other Expense	29,790	12,260	16,118	3,073	20,918	2,728	-	-	4,400	138,868	228,156	171,208	(56,947)	-33.3%	
Total Expenses	1,204,469	1,179,322	578,554	1,583,936	1,016,787	604,391	-	-	220,481	2,788,468	9,176,408	8,910,017	(266,391)	-3.0%	
Allocation of Direct Admin Exp	791,563	560,013	98,185	746,863	403,827	188,017	-	-	-	(2,788,468)	-	-	-	-	
Total Expenses excl Hosp OH	1,996,032	1,739,335	676,739	2,330,798	1,420,613	792,408	-	-	220,481	-	9,176,408	8,910,017	(266,391)	-3.0%	
Profit/(Loss) before Hosp OH	343,690	619,420	(274,026)	666,937	340,228	341,625	(28,708)	(95,159)	180,283	403,838	2,498,132	(85,520)	2,583,653	3021.1%	
Revenues from Supplemental Sources															
Public Hospital Redesign and Incentives in Medi-Cal (PRIME)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Quality Incentive Program (QIP)	661,550	821,952	138,459	1,260,414	548,085	254,036	-	-	-	-	3,684,496	3,684,496	-	-	
Overhead Allocation	658,691	573,981	223,324	769,163	468,802	261,495	-	-	72,759	-	3,028,215	2,940,306	(87,909)	-3.0%	
Net Income (Loss)	346,549	867,392	(358,891)	1,158,188	419,511	334,167	(28,708)	(95,159)	107,525	403,838	3,154,414	658,670	2,495,744	378.9%	

San Joaquin General Hospital-FQHC LAL Clinics
 Income Statement
 For the YTD Ending
 December 31, 2020

	<u>Children's Health Services</u> (#7080)	<u>Family Medicine</u> (#7092)	<u>Family Practice</u> Calif St (#7093)	<u>Primary Medicine</u> (#7096)	<u>Healthy Beginnings California Street (#7182)</u>	<u>Healthy Beginnings French Camp</u> (#7183)	<u>FQ Admin</u>	<u>Total</u>	<u>YTD Budget</u>	<u>YTD Variance</u>	<u>% Var - Fav (Unf)</u>
Key Ratios											
Net Pt Rev as % of Gross Rev	60.6%	81.2%	79.4%	71.9%	87.1%	130.4%	0.0%	75.8%	45.0%	30.7%	68.2%
Total Net Rev as % of Gross Rev	76.4%	108.9%	106.0%	103.8%	112.7%	155.9%	0.0%	104.5%	64.6%	39.8%	61.7%
Benefits as a % of Salaries	57.4%	54.1%	75.3%	43.5%	44.6%	55.3%	69.9%	54.5%	78.9%	24.4%	31.0%
Overhead % of Direct Expenses	54.7%	48.7%	38.6%	48.6%	46.1%	43.3%	0.0%	33.0%	33.0%	0.0%	0.0%
Gross Revenue per Billable Visit	336.35	166.69	174.31	143.35	177.36	166.32	0.00	187.29	260.60	(73.30)	-28.1%
Net Revenue per Billable Visit	257.00	181.50	184.82	148.73	199.91	259.33	0.00	202.64	168.43	34.21	20.3%
Direct Costs/Billable Visit	132.30	90.74	265.51	78.59	115.44	138.21	0.00	159.28	170.06	10.78	6.3%
Indirect Costs/Billable Visit	72.35	44.17	102.49	38.16	53.22	59.80	0.00	52.56	56.12	3.56	6.3%
Total Medical Cost/Billable Visit	204.65	134.91	368.00	116.75	168.66	198.01	0.00	211.84	226.18	14.34	6.3%
Total Cost/Patient (1)	511.63	337.28	920.01	291.88	421.66	495.02	0.00	529.59	565.45	35.86	6.3%
Net Income(Loss)/Billable Visit	38.07	66.74	(164.70)	57.46	47.63	76.42	0.00	54.75	12.57	42.18	335.5%
Payer Mix											
Medicare	0.2%	6.7%	9.6%	6.1%	2.3%	3.9%	0.0%	3.9%	11.0%	-7.1%	-64.4%
Medi-Cal	12.5%	12.1%	8.4%	8.4%	21.6%	17.2%	0.0%	13.0%	12.0%	1.0%	7.9%
Medi-Cal Managed Care	85.9%	74.9%	78.0%	77.4%	72.6%	68.9%	0.0%	78.1%	73.0%	5.1%	7.0%
Insurance	0.7%	3.6%	1.1%	5.7%	1.0%	7.3%	0.0%	3.1%	1.0%	2.1%	212.4%
Self Pay / Indigent	0.8%	2.7%	2.9%	2.4%	2.6%	2.6%	0.0%	1.9%	3.0%	-1.1%	-37.1%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	0.0%	100.0%	100.0%	0.0%	0.0%

(1) Average Visits per Patient is 2.5; per a study conducted by the ACS Director

**PFS Accounts Receivable Aging Analysis For SJCC
For the Month of December 2020**

Aging Category	MediCare	MediCal	Commercial	Self Pay	Total Aging This Month	Total Aging Last Month	\$ Increase (Decrease)	% Increase (Decrease)
Accrued Receivables					-	0	0	0.00%
1-30 Days	124,215	1,226,230	36,970	27,664	1,415,079	1,554,841	(139,762)	-8.99%
31-60 Days	51,252	115,421	53,484	29,246	249,403	347,652	(98,249)	-28.26%
61-90 Days	43,511	127,975	58,070	33,342	262,898	274,551	(11,654)	-4.24%
91-120 Days	41,701	134,323	45,455	28,019	249,499	131,203	118,296	90.16%
121-180 Days	26,522	87,958	98,937	36,956	250,373	308,602	(58,229)	-18.87%
181-240 Days	65,001	98,940	158,606	17,465	340,012	237,830	102,182	42.96%
241-270 Days	7,400	11,073	39,866	18,127	76,466	25,928	50,538	194.92%
271-365 Days	52,658	(557)	33,158	(15,483)	69,777	160,465	(90,689)	-56.52%
366 Days & Over	(40)	(116)	0	(79)	(234)	242,358	(242,592)	-100.10%
Total FC This Month	14%	62%	18%	6%	412,221	3,283,430	(370,159)	-11.27%
Total FC Last Month					435,801	3,283,430		
\$ Increase (Decrease)	(23,581)	(261,694)	(45,354)	(39,530)	(370,159)			
% Increase (Decrease)	-5.41%	-12.69%	-7.96%	-18.40%	-11.27%			

Monthly Management Summary

	Beginning	Charges	Payments	Adjustments	Ending Gross
December Activity	3,283,430	2,138,720	(1,690,049)	(818,830)	2,913,271

PFS Key Performance Indicators for SJCC

	December	November	October	September	August	July	June	Increase (Decrease)
Gross A/R Days	40	43	51	66	72	79	101	(3)
Net A/R	1,748,103	1,774,423	1,858,543	1,842,401	1,979,634	2,220,764	2,502,157	(26,320)
Net A/R Days	34	35	39	50	55	66	77	(1)

AVERAGE COLLECTION TIME ON PAID ACCOUNTS BY DATE OF SERVICE

Row Labels	Average of Service to Claim	Average of Claim to Payment	Average of Collection Time
2020-01	13.02	102.95	115.97
2020-02	7.45	91.99	99.43
2020-03	5.87	74.62	80.49
2020-04	12.27	58.17	70.44
2020-05	8.09	31.05	39.14
2020-06	8.33	35.12	43.46
2020-07	10.45	21.93	32.38
2020-08	9.28	26.67	35.95
2020-09	7.76	21.64	29.40
2020-10	7.85	19.07	26.92
2020-11	7.18	17.68	24.86
2020-12	7.75	16.48	24.23
Grand Total	9.09	57.26	66.35



San Joaquin County Clinics
Financial Statement Comments
Year to Date through January 2021

Summary of Clinics Year to Date

Billable visits through January were favorable to budget by 4,196 visits, or 7% greater than budget. Net Patient Revenues are \$6.2M greater than budget mainly due to a favorable Medi-Cal PPS adjustment of \$5.6M for fiscal years 2015, 2016, and 2017 recorded in the month of January. Additionally, Net Patient Revenues are greater than budget partially associated with large Medi-Cal Code 18 increases effective July 15, 2020 and greater than expected visits. A liability associated with the annual PPS reconciliation is being accrued at \$50K per month. January financials reflect a year-to-date PPS reconciliation liability accrual of \$1,550,000, which includes a true-up adjustment of \$1.2M in the month of January.

Year-to-date capitation is in line with budget exhibiting a minimal favorable variance of \$24,965. Year-to-date 340B Pharmacy Program revenue is recognized for \$822,790 and the program related expenses for \$239,211 are included in Supplies & Other Expenses categories on the financials. Also, Other Revenue includes combined Grants Revenue for Essential Access Title X, First5 SJ Teeth, and Sunlight Giving grants and the First Responder program for \$285,365 and \$111,400 respectively. Thus, Total Net Revenues are greater than budget by \$7,444,306.

Salaries and benefits expenses are greater than budget by \$355,213, or 4.4%. This unfavorable variance can be attributed to the greater than expected patient volumes and to meet the staffing needs.

Other operating expenses exhibit a year-to-date unfavorable variance of \$134,916 largely due to Professional Fees and Other Expenses unfavorable variance of \$308,476 mainly offset by favorable variance in Supplies \$222,853.

The Clinic financials include conservative, estimated FYTD supplemental revenues earned by the Clinics in the amount of \$4,298,579 for the Quality Incentive Program.

Unaudited net income inclusive of the estimated overhead allocation is \$7,852,323 on a year-to-date basis which is greater than budget by \$6,792,434.

Additional Factors Impacting Clinic Performance Presentation

- Estimated hospital overhead allocated to the clinics has been changed to 33% of direct expenses.

**San Joaquin County Clinics
Income Statement
As of January 31, 2021**

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Year to Date			
													YTD Actual	YTD Budget	Variance	% Var
Total Visits	13,515	11,195	11,861	11,509	10,344	12,805	14,029						85,258	65,591	19,667	30.0%
Billable Visits	11,569	9,681	10,025	9,469	7,937	8,932	9,078						66,691	62,495	4,196	6.7%
Patient Revenue																
Medicare	131,541	27,929	28,358	14,081	48,425	172,719	262,930						685,982	1,791,503	(1,105,522)	-61.7%
Medi-Cal Fee-for-Service	460,856	229,265	224,964	30,912	185,628	266,020	754,470						2,152,116	1,954,367	197,749	10.1%
Medi-Cal Managed Care	2,062,848	1,356,553	1,133,058	1,026,908	1,200,378	1,649,349	1,138,182						9,567,275	11,889,067	(2,321,792)	-19.5%
Insurance	51,883	56,976	64,627	62,078	44,802	56,688	151,839						488,892	162,864	326,029	200.2%
Self Pay	(5,622)	63,105	29,973	72,068	49,564	(5,446)	(7,968)						195,675	488,592	(292,917)	-60.0%
Indigent	-	-	-	-	-	-	-						-	-	-	-
Gross Patient Revenue	2,701,507	1,733,829	1,480,979	1,206,047	1,528,797	2,139,330	2,299,453						13,089,940	16,286,393	(3,196,453)	-19.6%
Contractual Adjustments	(1,387,128)	(88,489)	115,869	(86,608)	(496,172)	(318,042)	4,487,661						2,227,093	(8,407,718)	10,634,811	126.5%
PPS Reconciliation	-	(100,000)	(50,000)	(50,000)	(50,000)	(50,000)	(1,250,000)						(1,550,000)	(350,000)	(1,200,000)	(3.4%)
Other Allowances	(4,083)	4,231	(4,528)	(124)	(1,199)	(46,550)	-						(52,252)	(13,680)	(38,572)	-282.0%
Net Patient Revenue	1,310,296	1,549,571	1,542,320	1,069,315	981,427	1,724,738	5,537,114						13,714,781	7,514,995	6,199,786	82.5%
Other Revenue																
Incentives & Pay-For-Performance Revenues																
Capitation Revenue	444,084	442,220	451,024	448,657	452,201	454,084	458,527						3,150,798	3,125,833	24,965	0.8%
Grant Revenue	-	-	-	137,822	7,833	139,710	-						285,365	-	285,365	
First Responder Program	-	-	-	75,600	12,000	27,800	(4,000)						111,400	-	111,400	
CARES Funding	-	-	-	-	-	-	-						-	-	-	
Pharmacy Revenue	-	-	-	69,298	34,680	299,860	418,952						822,790	-	822,790	
Meaningful Use	-	-	-	-	-	-	-						-	-	-	
Total Other Revenue	444,084	442,220	451,024	731,377	506,713	921,454	873,480						4,370,353	3,125,833	1,244,520	39.8%
Total Net Revenue	1,754,381	1,991,791	1,993,344	1,800,692	1,488,140	2,646,193	6,410,594						18,085,134	10,640,828	7,444,306	70.0%
Operating Expense																
Salaries	707,163	914,327	677,400	833,716	637,754	771,625	675,280						5,217,264	4,457,027	(760,237)	-17.1%
Benefits	449,333	425,283	417,536	391,482	336,532	453,813	650,857						3,124,836	3,529,860	405,024	11.5%
Total Salaries & Benefits	1,156,496	1,339,609	1,094,936	1,225,197	974,286	1,225,438	1,326,137						8,342,100	7,986,887	(355,213)	-4.4%
Professional Fees/Registry	132,092	153,275	13,416	104,222	176,028	124,497	71,682						775,213	596,603	(178,609)	-29.9%
Supplies	23,268	35,037	48,371	18,177	44,973	57,580	74,391						301,797	524,649	222,853	42.5%
Purchased Services	65,997	134,024	190,644	133,116	172,468	192,635	155,701						1,044,585	969,134	(75,451)	-7.8%
Depreciation	18,745	18,745	18,745	18,745	18,745	18,745	18,745						131,215	157,374	26,159	16.6%
Other Expense	35,155	20,421	30,900	18,333	30,400	92,947	102,792						330,948	201,080	(129,867)	-64.6%
Total Direct Expense	1,431,752	1,701,111	1,397,012	1,517,789	1,416,900	1,711,843	1,749,449						10,925,857	10,435,728	(490,129)	-4.7%
Net Income (Loss)	322,628	290,680	596,332	282,902	71,240	934,349	4,661,145						7,159,277	205,100	6,954,177	3390.6%
Revenues from Supplemental Sources																
Public Hospital Redesign and Incentives in Medi-Cal (PRIME)																
Quality Incentive Program (QIP)	614,083	614,083	614,083	614,083	614,083	614,083	614,083						4,298,579	4,298,579	-	
Overhead Allocation	472,478	561,367	461,014	500,871	467,577	564,908	577,318						3,605,533	3,443,790	(161,743)	-4.7%
Net Income (Loss) w/ OH Allocation	464,233	343,396	749,401	396,115	217,746	983,524	4,697,909						7,852,323	1,059,889	6,792,434	640.9%

Key Ratios

Gross Pt Revenue/Billable Visit	\$ 233.51	\$ 179.10	\$ 147.73	\$ 127.37	\$ 192.62	\$ 239.51	\$ 253.30						\$ 196.28	\$ 260.60	\$ (64.33)	-24.7%
Net Patient Service Revenue/Billable Visit	\$ 151.64	\$ 205.74	\$ 198.84	\$ 160.31	\$ 180.63	\$ 243.93	\$ 660.46						\$ 252.89	\$ 170.27	\$ 82.62	48.5%
Direct Costs/Billable Visit	\$ 123.76	\$ 175.72	\$ 139.35	\$ 160.29	\$ 178.52	\$ 191.65	\$ 192.71						\$ 163.83	\$ 166.99	\$ 3.16	1.9%
Indirect Costs/Billable Visit	\$ 40.84	\$ 57.99	\$ 45.99	\$ 52.90	\$ 58.91	\$ 63.25	\$ 63.60						\$ 54.06	\$ 55.11	\$ 1.04	1.9%
Total Medical Cost/Billable Visit	\$ 164.60	\$ 233.70	\$ 185.34	\$ 213.19	\$ 237.43	\$ 254.90	\$ 256.31						\$ 217.89	\$ 222.09	\$ 4.20	1.9%
Net Income(Loss)/Billable Visit	\$ 40.13	\$ 35.47	\$ 74.75	\$ 41.83	\$ 27.43	\$ 110.11	\$ 517.50						\$ 117.74	\$ 16.96	\$ 100.78	594.3%
Total Cost/Patient (1)	\$ 411.49	\$ 584.26	\$ 463.35	\$ 532.97	\$ 593.57	\$ 637.25	\$ 640.77						\$ 544.73	\$ 555.23	\$ 10.50	1.9%
Net Pt Rev as % of Gross Rev	48.5%	89.4%	104.1%	88.7%	64.2%	80.6%	240.8%						104.8%	46.1%	58.6%	127.1%
Total Net Rev as % of Gross Rev	64.9%	114.9%	134.6%	149.3%	97.3%	123.7%	278.8%						138.2%	65.3%	72.8%	111.5%
Benefits as a % of Salaries	63.5%	46.5%	61.6%	47.0%	52.8%	58.8%	96.4%						59.9%	79.2%	19.3%	24.4%
Overhead % of Direct Exp	33.0%	33.0%	33.0%	33.0%	33.0%	33.0%	33.0%						33.0%	33.0%	0.0%	0.0%
Gross Patient AR (in 000s)																
Less Reserves (in 000s)																
Net AR (in 000s)																
Wrap AR (in 000s)																
Gross AR Days																
Cash Receipts (in 000s)																

Payer Mix

San Joaquin General Hospital-FQHC LAL Clinics
Income Statement
For the YTD Ending
January 31, 2021

	Children's Health Services (#7080)	Family Medicine (#7092)	Family Practice - Ca (#7093)	Primary Medicine (#7096)	Healthy Beginnings - Ca (#7182)	Healthy French Camp (#7183)	Hazeltan Clinic (#7184)	Manteca Clinic (#7185)	FQ Grants	FQ Admin (#7071)	Total	YTD Budget	YTD Variance - Fav (Unf)	% Var - Fav (Unf)
Total Visits	11,896	27,261	3,067	23,969	10,411	8,654	-	-	-	-	85,258	65,591	19,667	30.0%
Billable Visits	10,594	15,011	2,950	21,870	10,336	5,932	-	-	-	-	66,691	62,495	4,196	6.7%
Productive FTEs (Provider)	4.1	2.4	1.3	8.2	3.4	1.6	-	-	-	-	21.0	20.0	(1.0)	-5.2%
Productive FTEs (Non-Provider)	12.9	16.6	7.4	12.2	7.9	4.7	-	-	18.5	-	80.2	75.5	(4.7)	-6.3%
Total FTEs	17.0	19.0	8.7	20.4	11.4	6.2	-	-	18.5	-	101.3	95.5	(5.8)	-6.0%
Total Hours/Visit	2.29	5.40	1.99	2.35	2.65	3.31	-	-	-	-	3.19	3.15	(0.04)	-1.4%
Patient Revenue														
Medicare	94,653	211,992	48,174	140,316	76,420	74,582	929	38,916	-	-	685,982	1,791,503	(1,105,521)	-61.7%
Medi-Cal	595,927	380,321	65,572	414,318	405,632	162,656	18,229	109,462	-	-	2,152,116	1,954,367	197,749	10.1%
Medi-Cal Managed Care	2,900,834	1,897,575	376,786	2,426,349	1,368,143	719,824	(339)	(121,898)	-	-	9,567,275	11,889,067	(2,321,792)	-19.5%
Insurance	25,963	85,567	8,794	177,649	16,319	176,188	808	(2,396)	-	-	488,892	162,864	326,029	200.2%
Self Pay	26,561	66,443	12,193	55,731	48,702	24,738	(17,662)	(21,032)	-	-	195,675	488,592	(292,918)	-60.0%
Indigent	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Gross Revenue	3,643,938	2,641,898	511,519	3,214,363	1,915,216	1,157,989	1,965	3,052	-	-	13,089,940	16,286,393	(3,196,454)	-19.6%
Contractual Adjustments	(936,898)	232,360	119,063	1,315,581	(26,387)	447,890	(28,203)	(96,315)	-	-	1,027,091	(3,552,718)	4,579,810	128.9%
PPS Reconciliation	(61,921)	(94,030)	(22,934)	(89,443)	(36,249)	(45,422)	0	0	-	-	(350,000)	(350,000)	-	-
Other Allowances	(10,549)	(8,773)	(14,194)	(7,781)	(4,716)	(1,053)	(2,448)	(2,739)	-	-	(52,251)	(13,680)	(38,571)	-281.9%
Net Patient Revenue	2,634,570	2,771,455	593,454	4,432,719	1,847,864	1,559,404	(28,686)	(96,001)	-	-	13,714,780	7,514,995	6,199,785	82.5%
Incentives & Pay-For-Performance Revenues	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pharmacy Revenue	-	-	-	-	-	-	-	-	822,790	-	822,790	-	822,790	-
Physician Capitation- PMPM	566,925	700,840	134,068	1,017,269	477,040	254,656	-	-	-	-	3,150,798	3,125,833	24,965	0.8%
	3,201,495	3,472,295	727,521	5,449,988	2,324,904	1,814,060	(28,686)	(96,001)	-	822,790	17,688,368	10,640,828	7,047,540	66.2%
Other Revenue	-	-	-	-	-	-	-	-	396,765	-	396,765	-	396,765	100.0%
Total Operating Revenue	3,201,495	3,472,295	727,521	5,449,988	2,324,904	1,814,060	(28,686)	(96,001)	396,765	822,790	18,085,133	10,640,828	7,444,304	70.0%
	(1.00)	-	-	-	-	-	-	-	-	-	-	-	-	-
Expenses														
Salaries	814,887	704,704	371,819	1,126,380	721,489	390,414	-	-	190,645	896,927	5,217,264	4,457,027	(760,237)	-17.1%
Benefits	515,055	427,796	295,549	559,230	354,968	247,267	-	-	69,513	655,457	3,124,836	3,529,860	405,024	11.5%
Total Salaries & Benefits	1,329,942	1,132,500	667,368	1,685,611	1,076,457	637,680	-	-	260,158	1,552,384	8,342,100	7,986,887	(355,213)	-4.4%
Professional Fees/Registration	30,135	156,308	0	59,334	0	74,600	-	-	-	454,836	775,213	596,603	(178,609)	-29.9%
Supplies	23,596	55,304	8,038	69,088	53,772	41,999	-	-	-	50,000	301,797	524,649	222,853	42.5%
Purchased Services	25,302	655	11,849	518	13,256	520	-	-	-	992,484	1,044,585	969,134	(75,451)	-7.8%
Depreciation	4,299	13,013	1,046	7,968	951	16,836	-	-	-	87,102	131,215	157,374	26,159	16.6%
Other Expense	34,812	10,668	18,091	3,766	29,461	2,784	-	-	4,400	226,966	330,948	201,080	(129,867)	-64.6%
Total Expenses	1,448,087	1,368,448	706,391	1,819,267	1,180,915	774,418	-	-	264,558	3,363,772	10,925,857	10,435,728	(490,129)	-4.7%
Allocation of Direct Admin Exp	936,756	679,159	131,497	826,324	492,349	297,687	-	-	-	(3,363,772)	-	-	-	-
Total Expenses excl Hosp OH	2,384,843	2,047,607	837,889	2,645,591	1,673,264	1,072,105	-	-	264,558	-	10,925,857	10,435,728	(490,129)	-4.7%
Profit/(Loss) before Hosp OH	816,652	1,424,689	(110,367)	2,804,397	651,640	741,955	(28,686)	(96,001)	132,206	822,790	7,159,277	205,100	6,954,177	3390.6%
Revenues from Supplemental Sources														
Public Hospital Redesign and Incentives in Medi-Cal (PRIME)	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Quality Incentive Program (QIP)	773,446	956,144	182,906	1,387,842	650,817	347,423	-	-	-	-	4,298,579	4,298,579	-	-
Overhead Allocation	786,998	675,710	276,503	873,045	552,177	353,795	-	-	87,304	-	3,605,533	3,443,790	(161,743)	-4.7%
Net Income (Loss)	803,100	1,705,123	(203,965)	3,319,194	750,281	735,583	(28,686)	(96,001)	44,902	822,790	7,852,323	1,059,889	6,792,434	640.9%

San Joaquin General Hospital-FQHC LAL Clinics
Income Statement
For the YTD Ending
January 31, 2021

	<u>Children's</u>	<u>Family</u>	<u>Family Practice</u>	<u>Primary</u>	<u>Healthy</u>	<u>Healthy</u>	<u>FQ Admin</u>	<u>Total</u>	<u>YTD Budget</u>	<u>YTD Variance</u>	<u>% Var - Fav</u>
	<u>Health Services</u>	<u>Medicine</u>		<u>Medicine</u>	<u>Beginnings</u>	<u>Beginnings</u>					
	<u>(#7080)</u>	<u>(#7092)</u>	<u>Calif St (#7093)</u>	<u>(#7096)</u>	<u>Street (#7182)</u>	<u>French Camp</u>					
Key Ratios											
Net Pt Rev as % of Gross Rev	72.3%	104.9%	116.0%	137.9%	96.5%	134.7%	0.0%	104.8%	46.1%	58.6%	127.1%
Total Net Rev as % of Gross Rev	87.9%	131.4%	142.2%	169.6%	121.4%	156.7%	0.0%	135.1%	65.3%	69.8%	106.8%
Benefits as a % of Salaries	63.2%	60.7%	79.5%	49.6%	49.2%	63.3%	73.1%	59.9%	79.2%	19.3%	24.4%
Overhead % of Direct Expenses	54.3%	49.4%	39.1%	48.0%	46.8%	45.7%	0.0%	33.0%	33.0%	0.0%	0.0%
Gross Revenue per Billable Visit	343.96	176.00	173.40	146.98	185.30	195.21	0.00	196.28	260.60	(64.33)	-24.7%
Net Revenue per Billable Visit	302.20	231.32	246.62	249.20	224.93	305.81	0.00	271.18	170.27	100.91	59.3%
Direct Costs/Billable Visit	136.69	91.16	239.45	83.19	114.25	130.55	0.00	163.83	166.99	3.16	1.9%
Indirect Costs/Billable Visit	74.29	45.01	93.73	39.92	53.42	59.64	0.00	54.06	55.11	1.04	1.9%
Total Medical Cost/Billable Visit	210.98	136.18	333.18	123.11	167.68	190.19	0.00	217.89	222.09	4.20	1.9%
Total Cost/Patient (1)	527.44	340.44	832.96	307.76	419.19	475.48	0.00	544.73	555.23	10.50	1.9%
Net Income(Loss)/Billable Visit	75.81	113.59	(69.14)	151.77	72.59	124.00	0.00	117.74	16.96	100.78	594.3%
Payer Mix											
Medicare	2.6%	8.0%	9.4%	4.4%	4.0%	6.4%	0.0%	5.2%	11.0%	-5.8%	-52.4%
Medi-Cal	16.4%	14.4%	12.8%	12.9%	21.2%	14.0%	0.0%	16.4%	12.0%	4.4%	37.0%
Medi-Cal Managed Care	79.6%	71.8%	73.7%	75.5%	71.4%	62.2%	0.0%	73.1%	73.0%	0.1%	0.1%
Insurance	0.7%	3.2%	1.7%	5.5%	0.9%	15.2%	0.0%	3.7%	1.0%	2.7%	273.5%
Self Pay / Indigent	0.7%	2.5%	2.4%	1.7%	2.5%	2.1%	0.0%	1.5%	3.0%	-1.5%	-50.2%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	0.0%	100.0%	100.0%	0.0%	0.0%

(1) Average Visits per Patient is 2.5; per a study conducted by the ACS Director

**PFS Accounts Receivable Aging Analysis For SJCC
For the Month of January 2021**

Aging Category	MediCare	MediCal	Commercial	Self Pay	Total Aging This Month	Total Aging Last Month	\$ Increase (Decrease)	% Increase (Decrease)
1-30 Days	145,699	1,178,829	31,754	31,183	1,387,465	1,415,079	(27,614)	-1.95%
31-60 Days	42,210	114,639	34,211	25,279	216,339	249,403	(33,064)	-13.26%
61-90 Days	36,389	117,051	49,607	26,517	229,564	262,898	(33,334)	-12.68%
91-120 Days	38,423	129,588	56,004	30,270	254,285	249,499	4,786	1.92%
121-180 Days	45,831	162,579	85,815	13,886	308,111	250,373	57,738	23.06%
181-240 Days	45,642	78,994	140,724	18,234	283,594	340,012	(56,417)	-16.59%
241-270 Days	23,028	55,119	76,798	14,161	169,106	76,466	92,641	121.15%
271-365 Days	29,010	11,701	54,116	23,126	117,953	69,777	48,176	69.04%
366 Days & Over	13,441	5,396	11,802	(26,042)	4,598	(234)	4,832	-2061.92%
Total FC This Month	14%	62%	18%	5%	2,971,015	2,913,271	57,744	1.98%
Total FC Last Month	419,673	1,853,897	540,830	156,614	2,913,271			
\$ Increase (Decrease)	412,221	1,801,247	524,546	175,257	2,913,271			
% Increase (Decrease)	7,453	52,650	16,284	(18,643)	57,744			
	1.81%	2.92%	3.10%	-10.64%	1.98%			

Monthly Management Summary

	Beginning	Charges	Payments	Adjustments	Ending Gross
January Activity	2,913,271	2,184,403	(1,163,930)	(962,728)	2,971,015

PFS Key Performance Indicators for SJCC

	January	December	November	October	September	August	July	Increase (Decrease)
Gross A/R Days	43	40	43	51	66	72	79	3
Net A/R	1,782,679	1,748,103	1,774,423	1,858,543	1,842,401	1,979,634	2,220,764	34,576
Net A/R Days	38	34	35	39	50	55	66	4

AVERAGE COLLECTION TIME ON PAID ACCOUNTS BY DATE OF SERVICE

Row Labels	Average of Service to Claim	Average of Claim to Payment	Average of Collection Time
2020-01	13.07	103.47	116.55
2020-02	7.48	92.34	99.82
2020-03	5.89	74.91	80.80
2020-04	12.34	58.74	71.09
2020-05	8.22	31.54	39.76
2020-06	8.53	35.85	44.38
2020-07	10.62	22.61	33.24
2020-08	9.44	27.12	36.56
2020-09	8.21	22.26	30.47
2020-10	8.07	19.72	27.79
2020-11	7.41	18.22	25.64
2020-12	10.07	18.54	28.61
2021-01	5.43	11.10	16.53
Grand Total	9.23	55.46	64.69



**Audit Committee Meeting Agenda
February 23, 2021 at 4:00 p.m.**

[Join Microsoft Teams Meeting](#)

[+1 209-645-4071](#) United States, Stockton (Toll)

Conference ID: 710 946 401#

Agenda

- | | | | |
|----|---|-------------|-------------------------|
| 1. | Call to order | Brian Heck | 1 min |
| 2. | Approval of Minutes from January 26, 2020 | * | Brian Heck 1 min |
| 3. | SJCC Separation Update | Kris Zuniga | 20 mins |
| 4. | Adjournment | Brian Heck | 1 min |

*** Action Item**

Next Meeting: March 30, 2021 at 4:00 p.m.

Note: If you need disability-related modification or accommodation to participate in this meeting, please contact San Joaquin County Clinics at (209) 468-6757 or (209) 468-6372 at least 48 hours prior to the start of the meeting. Government Code Section 54954.2(a). Materials related to an item on this agenda submitted to the Board after distribution of the agenda packet are available for public inspection by contacting Ambulatory Care Services at 500 W. Hospital Road, French Camp, CA during normal business hours.



San Joaquin County Clinics (SJCC)

Minutes of January 26, 2021 at 4:00 PM
Audit Committee Meeting Minutes


San Joaquin County Clinics
Web Conference Call

BOARD MEMBERS PRESENT: Brian Heck (SJCC Audit Committee Chair); Rod Place (SJCC Board Chair); Alicia Yonemoto (SJCC Board Vice-Chair); Christopher Scoz (SJCC Board Member)
BOARD MEMBERS EXCUSED: NONE
BOARD MEMBERS ABSENT: NONE
SJCC STAFF PRESENT: Dr. Farhan Fadoo (SJCC Executive Director); Alice Souligne (SJCC COO); Kristopher Zuniga (SJCC CFO); Adelé Gribble (SJCC ACS OTC)
GUESTS: NONE

AGENDA ITEM	ATTACHMENTS	ACTION
<p>1. <u>Call to Order & Establish Quorum (Brian Heck, Audit Committee Chair)</u></p> <p>Attendees were notified this meeting is being recorded. The meeting was called to order by Brian Heck at 4:03 p.m. A quorum was established for today's meeting.</p>	No Attachments	No Action Required
<p>2. <u>Approval of Minutes of October 27, 2020 and December 29, 2020 (Brian Heck, Audit Committee Chair)</u></p> <p>Christopher Scoz made a motion to approve the minutes from October 27, 2020 and December 29, 2020. Rod Place seconded the motion and present members unanimously approved the minutes.</p>	Attachment 2 (Audit Committee Meeting Minutes from October 27, 2020 and December 29, 2020)	Motion to approve minutes from 10/27/20 & 12/29/20 – Christopher Scoz, Seconded – Rod Place, unanimously approved by attending members
<p>3. <u>SJCC Separation Update (Kris Zuniga, SJCC CFO)</u></p> <p>Kris Zuniga advised on January 5th, San Joaquin County Clinics (SJCC) was approved by the San Joaquin County Board of Supervisors (BOS) as an affiliate of San Joaquin County. Our FQHC has established an official partnership with the County of San Joaquin.</p> <p>SJGH – San Joaquin General Hospital ISD – Information Services Department MSO – Medical Service Organization CAO – County Administration Office CFO – Chief Financial Officer</p> <p>SJCC – San Joaquin County Clinics HR – Human Resources EVS – Environmental Services BOS – Board of Supervisors</p> <p>IT – Information Technology MOU – Memorandum of Understanding BHS – Behavioral Health Services CEO – Chief Executive Officer</p>	No Attachments	No Action Required

AGENDA ITEM			ATTACHMENTS	ACTION																																													
<table border="1"> <thead> <tr> <th>Infrastructure Item</th> <th>Current State</th> <th>Future State</th> </tr> </thead> <tbody> <tr> <td>Payroll</td> <td>SJGH Payroll</td> <td>SJCC Payroll</td> </tr> <tr> <td>Accounts Payable</td> <td>SJGH A/P</td> <td>SJCC A/P</td> </tr> <tr> <td>Purchasing*</td> <td>SJGH & County Purchasing</td> <td>SJCC Purchasing</td> </tr> <tr> <td>Legal</td> <td>County Counsel</td> <td>County Counsel</td> </tr> <tr> <td>IT</td> <td>SJGH IT</td> <td>County ISD</td> </tr> <tr> <td>HR</td> <td>SJGH & County HR</td> <td>County HR</td> </tr> <tr> <td>Budget</td> <td>SJGH Budget</td> <td>SJCC Budget</td> </tr> <tr> <td>Medical Staff</td> <td>SJGH Medical Staff</td> <td>SJCC & SJGH Medical Staff (MOU)</td> </tr> <tr> <td>Credentialing & Privileging</td> <td>SJGH Medical Staff Office</td> <td>SJCC Credentialing & SJGH MSO (MOU)</td> </tr> <tr> <td>Payer Contracting</td> <td>SJGH Contracting</td> <td>SJCC & SJGH Contracting (MOU)</td> </tr> <tr> <td>French Camp Facility Services</td> <td>SJGH Engineering/Security/EVS</td> <td>SJGH Engineering/Security/EVS (MOU)</td> </tr> <tr> <td>California St. Facility Services</td> <td>BHS Engineering/Security/EVS (MOU)</td> <td>BHS Engineering/Security/EVS (MOU)</td> </tr> <tr> <td>Coding, Billing, and Collections</td> <td>EMMI</td> <td>EMMI</td> </tr> <tr> <td>CAO / BOS Interaction</td> <td>SJGH CEO/CFO</td> <td>SJCC CEO/CFO</td> </tr> </tbody> </table> <p>* All SJCC Vendors & Contractors currently contracted with SJGH will require new agreements with SJCC</p> <p>SJGH's audit is anticipated to be completed by February 2021. We have a dependency on SJGH's audit and as a result, SJCC's audit is expected to be completed by April 2021. FQHC management will be meeting with the various sections of the County to construct our business within the County, including meeting with HR in two weeks to discuss labor. More information will be provided as it becomes available.</p>			Infrastructure Item	Current State	Future State	Payroll	SJGH Payroll	SJCC Payroll	Accounts Payable	SJGH A/P	SJCC A/P	Purchasing*	SJGH & County Purchasing	SJCC Purchasing	Legal	County Counsel	County Counsel	IT	SJGH IT	County ISD	HR	SJGH & County HR	County HR	Budget	SJGH Budget	SJCC Budget	Medical Staff	SJGH Medical Staff	SJCC & SJGH Medical Staff (MOU)	Credentialing & Privileging	SJGH Medical Staff Office	SJCC Credentialing & SJGH MSO (MOU)	Payer Contracting	SJGH Contracting	SJCC & SJGH Contracting (MOU)	French Camp Facility Services	SJGH Engineering/Security/EVS	SJGH Engineering/Security/EVS (MOU)	California St. Facility Services	BHS Engineering/Security/EVS (MOU)	BHS Engineering/Security/EVS (MOU)	Coding, Billing, and Collections	EMMI	EMMI	CAO / BOS Interaction	SJGH CEO/CFO	SJCC CEO/CFO		
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<p>4. <u>Adjournment (Brian Heck)</u></p> <p>There being no further topics of discussion, Brian Heck adjourned the meeting at 4:41 p.m.</p>			No Attachments	No Action Required																																													

San Joaquin County Clinics
Budget Requirement & Board Authority
re Financial Management



FISCAL SOLUTIONS LLC

Renee Filson
February 23, 2020

1

Learning Objectives

- ▶ To review FQHC's budget requirement;
and
- ▶ To identify the Board's financial
responsibilities.

2

FQHC Budget Requirements

The health center develops an annual operating budget that is reflective of the expenses and revenues necessary to support the health center's HRSA-approved scope of project.

- ▶ Reflects revenue and expenses for all sites, services and activities within the scope of project. (Forms 5A , 5B and 5C)

If the health center engages in any other lines of business that are not within the HRSA-approved scope of project:

- ▶ The health center documents these other lines of business are fully supported by non-health center project revenue
- ▶ The health center documents that all expenses from such other lines of business are excluded from the annual operating budget for the health center project

3

FQHC Budget Requirements

HRSA assesses:

- ▶ In addition to the Health Center Program award, the health center's annual budget includes all other projected revenue sources that will support the Health Center Program project.
 - ▶ Fees, premiums, and third-party reimbursements and payments that are generated from services
 - ▶ Revenues from state, local, or other federal grants or contracts
 - ▶ Private support or income generated from contributions, and
 - ▶ Any other form of funding expected to be received for purposes of supporting the Health Center Program project.
- ▶ The annual budget identifies the portion of projected costs to be supported by the federal award. Any proposed costs supported by the federal award are consistent with the federal cost principles and the terms and conditions of the award.

4

Board Financial Responsibilities

The health center board is responsible for the following:

- ▶ Adopting policies for financial management practices in conjunction with the public entity and a system to ensure accountability for center resources, including periodically reviewing the financial status of the health center and the results of the annual audit to ensure appropriate follow-up actions are taken.
- ▶ Adopting policy for eligibility for services including criteria for partial payment schedules.
- ▶ The health center governing board must review and approve the annual Health Center Program project budget.

5

Board Financial Responsibilities

- ▶ The health center governing board must provide direction for long-range planning, including but not limited to identifying health center priorities and adopting a three-year plan for financial management and capital expenditures.
- ▶ Approving applications related to the Health Center Program project, including approving the annual budget, which outlines the proposed uses of both Health Center Program award and non-Federal resources and revenue.
- ▶ Adopt, evaluate at least once every three years, and, as needed, approve updates to the following policies : Sliding Fee Discount Program (SFDP), Billing and Collections and Financial Management and Accounting.

6



7



**Item 8
San Joaquin County Clinics
Board of Directors Meeting
February 23, 2021**

Legislative and Grants Update

Federal:

Coronavirus Relief Package (American Rescue Plan Act of 2021)

The full text of the 591-page bill was released by the House of Representatives this past Friday, February 19. The House Budget Committee approved the \$1.9 trillion coronavirus relief package yesterday (Monday), setting up a vote in the full House later this week.

The \$1.9 trillion package includes the following support for Community Health Centers and workforce programs:

- \$7.6 billion for health centers, as defined by Section 330 and the Social Security Administration, including Look-Alikes.
- \$800 million for the National Health Service Corps
- \$200 million for Nurse Corps Loan Repayment Program
- \$330 million for the Teaching Health Center program to increase the per Resident Amount and expand the number of sites.

Assuming the legislation passes in the House, the bill will go to the Senate.

**Federally Qualified Health Center Program for COVID-19 Vaccination
(example of program that demonstrates the significance of becoming a 330 grantee)**

On February 9, the Biden Administration announced the first stage of its Federally Qualified Health Center Program for COVID-19 Vaccination. Starting the week of February 15, Federally Qualified Community Health Centers (FQHCs) were to begin directly receiving vaccine supply.

The program is beginning incrementally at select HRSA-funded health centers that specialize in caring for particularly hard-to-reach and disproportionately affected populations such as the homeless and migrant/seasonal agricultural workers and eventually growing to support 250 HRSA-funded health centers.

As a Look-Alike, SJCC is currently **not eligible** to participate in this program.

State of California:

SB 56 – Medi Cal Eligibility: Full-Scope Medi-Cal for Undocumented Seniors (Durazo, 24th District)

Introduced December 7, 2020, this bill would, subject to an appropriation by the Legislature, and effective July 1, 2022, extend eligibility for full-scope Medi-Cal benefits to individuals who are 65 years of age or older, and who are otherwise eligible for those benefits but for their immigration status.

Set for hearing by the Senate Health Committee on March 10, 2021

SB 365 – Medi-Cal E-Consult Coverage (Caballero, 12th District)

Introduced February 10, 2021, this bill would require Medi-Cal to reimburse all participating primary care providers, including those who operate out of a federally qualified health center (FQHC) or rural health clinic (RHC), for e-consult services.

Electronic consults (or e- consults) are one method of telehealth used to provide patient-centered care and improve health care providers' ability to better manage their patients' care. An e-consult service ordinarily involves a treating provider, usually a primary care physician, sending information regarding a patient and a consultation request to a consultative provider, usually a specialist provider. The specialist can respond in any number of ways, including providing requested feedback, asking for additional information, recommending certain studies or examinations, or initiating the scheduling of an appointment. When the patient's condition is not too severe, the patient can generally continue to be seen by their local primary care provider, while the primary care provider e-consults with the specialist when necessary.

Through a Blue Shield of California Foundation grant-funded initiative, SJCC primary care providers have been using e-consults for the past three years. However, existing Department of Health Care Services policy only allows for the reimbursement of e-consults delivered by consultant providers, usually specialists, in its current telehealth policy.

Reimbursement is not allowed for any requesting or treating providers, who are usually the primary care providers. Existing law also prohibits FQHCs or RHCs from being compensated for the e-consults that their requesting providers render.

If passed, SB 365 will ensure coverage and utilization of e-consults under Medi-Cal for primary care providers, including those who operate at an FQHC or RHC.

AB 4 – Medi-Cal Eligibility: Full-Scope Medi-Cal for Undocumented Adults (Arambula, 31st District, et. al)

Introduced December 7, 2021, this bill would, subject to an appropriation by the Legislature, and effective July 1, 2022, extend eligibility for full scope Medi-Cal benefits to anyone regardless of age, and who is otherwise eligible for those benefits but for their immigration status.

Referred to Assembly Committee on Health on January 11, 2021

AB 1400 - Guaranteed Health Care for All (Kalra, 27th District)

Introduced February 19, 2021 this bill would create the California Guaranteed Health Care for All program, or CalCare, to provide comprehensive universal single-payer health care coverage and a health care cost control system for the benefit of all residents of the state.

CalCare would cover a wide range of medical benefits and other services and would incorporate the health care benefits and standards of other existing federal and state provisions, including the federal Children's Health Insurance Program, Medi-Cal, ancillary health care or social services covered by regional centers for persons with developmental disabilities, Knox-Keene, and the federal Medicare program.

Other Items of Note:

National Association of Community Health Centers (NACHC) Look-Alike Learning Collaborative

SJCC recently received notice that it is one of 20 Look-Alikes selected nationally through a competitive process to participate in a learning collaborative led by the National Association of Community Health Centers. The purpose of the learning collaborative is to build the operational capacity of Look-Alikes while helping prepare them to become 330 grantees.

SJCC leadership and other personnel will be participating in the learning collaborative along with personnel from the other 19 participating Look-Alikes from throughout the US.

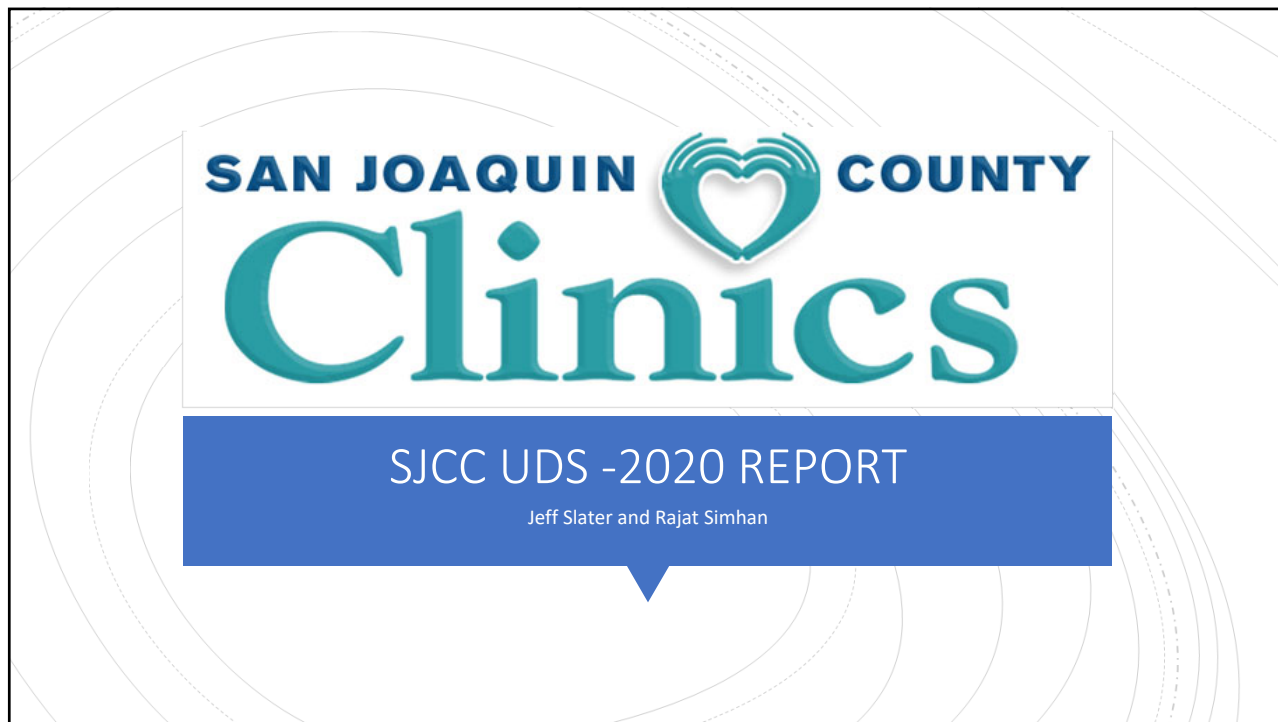
Based on feedback from the Look-Alikes applying to participate in the learning collaborative, the initial focus will be on building a grants management infrastructure and creating financial sustainability. Additional topics will be identified over time.

Federal Communications Commission (FCC) – COVID 19 Telehealth Program:

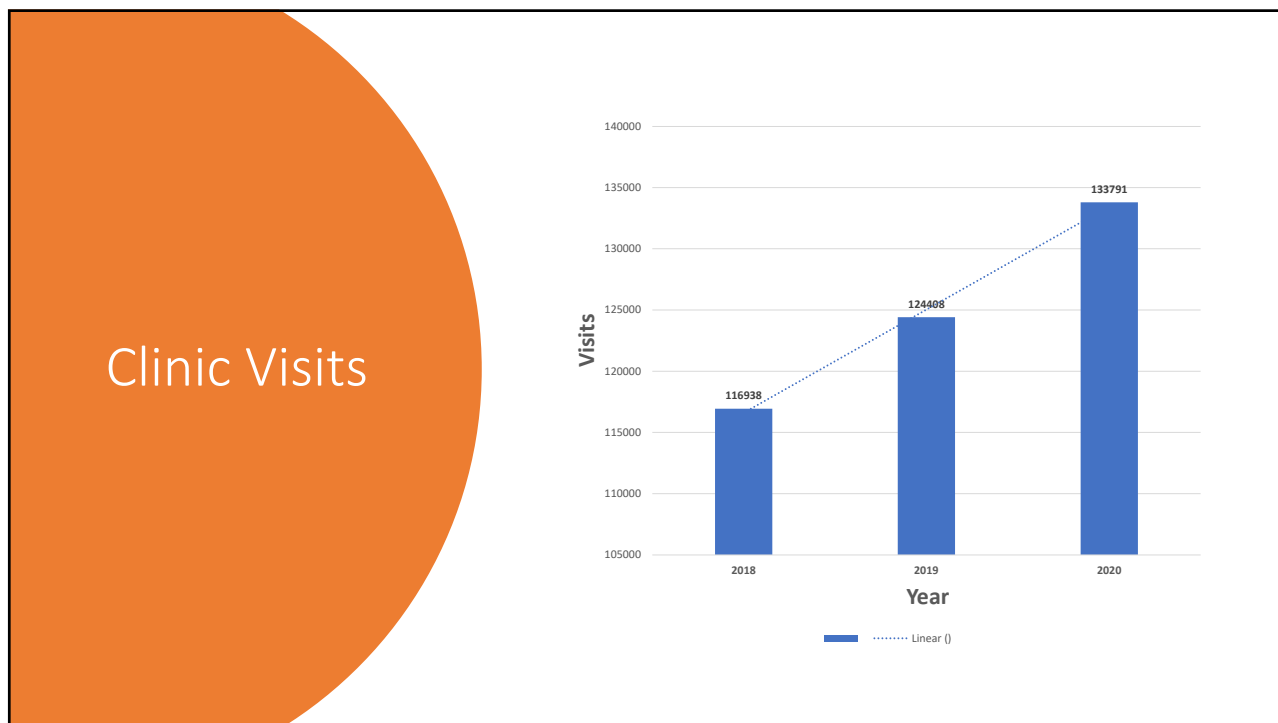
On February 2, 2021, the FCC released notice that it has directed the Universal Service Administrative Company (USAC) to rapidly move forward with administering the approximately \$250 million round 2 grant funding for the FCC COVID 19 Telehealth Program. This includes updating the portal that will be used by applicants, reviewing applications consistent with the metrics to be established by the Commission, providing outreach and guidance to stakeholders about the application and invoicing processes, and administering any required audit and reporting requirements.

The purpose of the FCC COVID 19 Telehealth Program is to help health care providers offer telehealth and connected care services and connected devices to patients at their homes or mobile locations in response to the COVID-19 pandemic. Look-Alikes were eligible to apply in the first round.

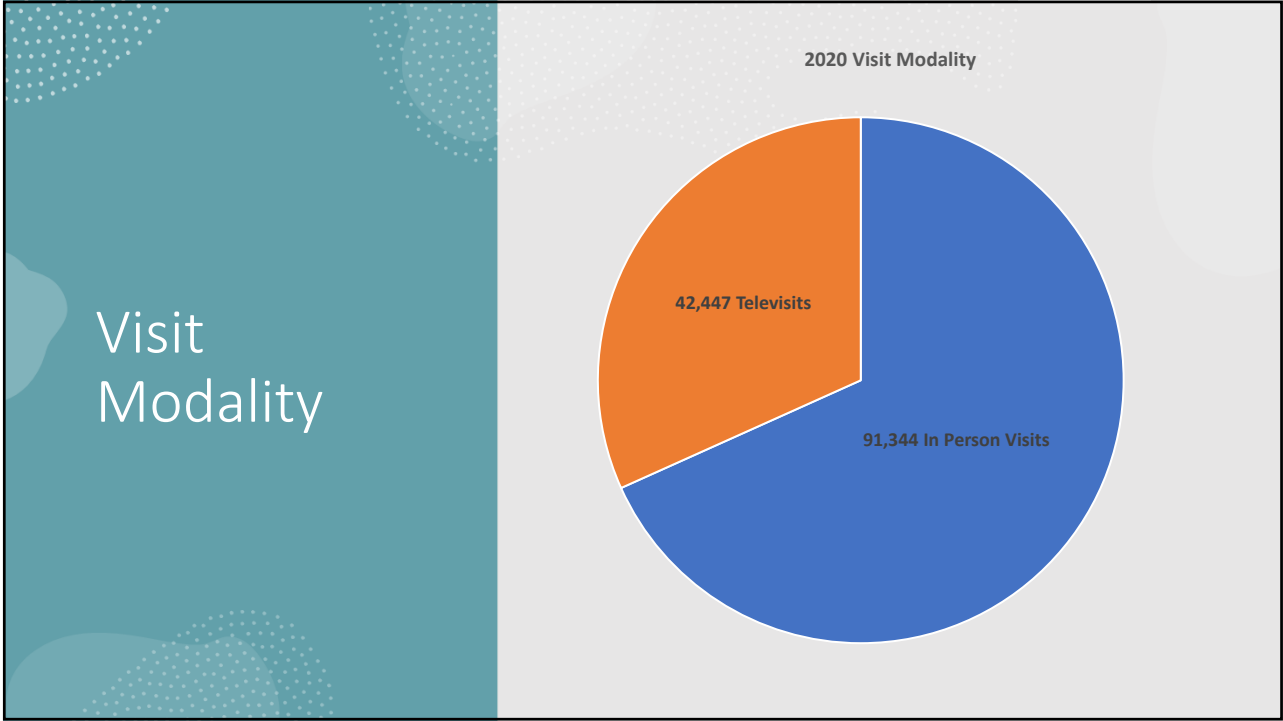
The FCC is currently working on finalizing the guidelines and metrics for the program. No date has yet been announced for release of the grant program application and/or outreach and guidance for it, but it seems likely that this will be happening relatively soon. SJCC will be carefully reviewing the application when details are released and determining whether it makes sense to apply for the second round.



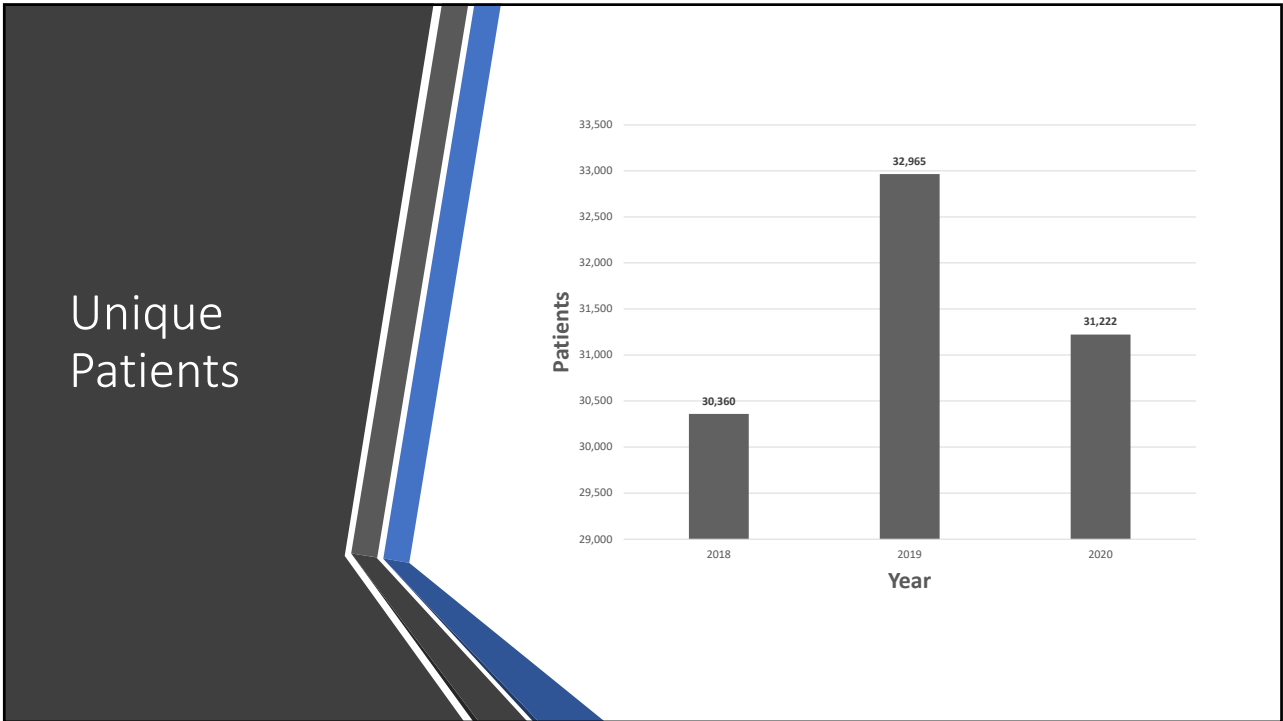
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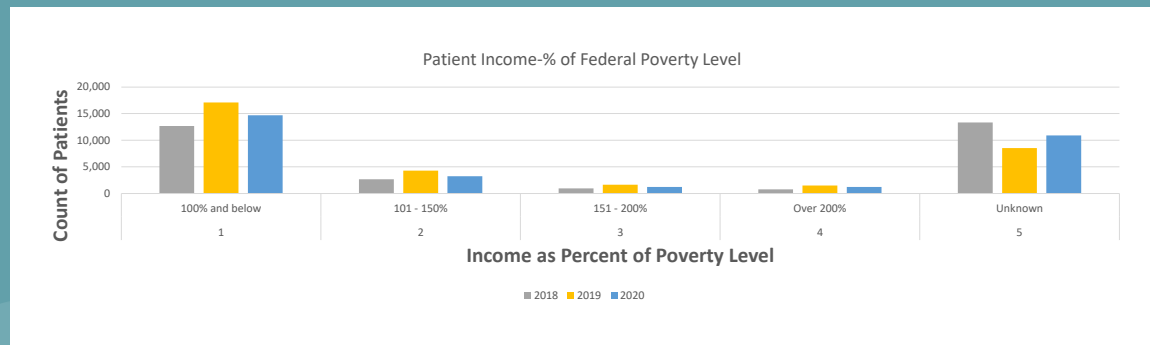


3



4

Selected Patient Characteristics-Income



5

CONTINUITY OF CARE- HAZELTON & MANTECA

- Prior to closure on June 30th 2020, a total of 9,170 patients were seeking care at Hazelton and Manteca clinics
- Post closure, at least 4,672 (51%) had sought care at remaining SJCC locations
- COVID-19 impact - Patients delayed care overall making it difficult for SJCC to accurately report the exact percentage of patients retained by SJCC
- HPSJ assigned lives continue to see an increase suggesting the clinic closures did not impact patient retention negatively

6

Patient Demographic

PATIENTS BY RACE	HISPANIC OR LATINO	NIN HISPANIC OR LATINO	UNREPORTED OR REFUSED TO REPORT ETHNICITY	TOTAL
Asian	83	3643		3726
Native Hawaiian	5	99		104
Other Pacific Islander	0	0		0
Black/African American	204	4312		4516
American Indian/Alaska Native	35	134		169
White	1250	5418		6668
More than one race	137	260		397
Unreported or Refused to report race	10061	4187	1394	15642
Total	11,175	18,053	1394	31,222

7

Staffing and Utilization

Category	2018	2019	2020
Medical	125.21	136.75	87.85
Mental Health	2.80	2.05	3.35
Enabling Services	13.40	12.00	7.85
Admin and Facility Staff	46.75	24.50	22.75
Total (FTE)	188.16	175.30	121.80

8

CLINICAL QUALITY MEASURES

		CY 2020	CY 2019	2020 Target
DM A1c Uncontrolled	Outcome	42.05%	32.68%	29.68%
CVD BP Control	Outcome	51.13%	65.28%	72.26%
Pap Screening	Process	51.32%	51.43%	61.00%
Prenatal Care in 1st Trimester	Process	63.32%	56.91%	84.80%
Birth Weight < 2500 gm	Outcome	7.21%	10.59%	7.80%
Pediatric Immunizations	Process	42.86%	38.57%	39.44%
Pediatric BMI Screening and Intervention	Process	56.63%	61.31%	54.70%
Adult BMI Screening and Intervention	Process	20.84%	19.76%	53.60%
Tobacco Use Screening and Intervention	Process	76.37%	84.08%	88.09%
CVD Lipid Therapy	Process	86.04%	75.53%	85.00%
IVD Aspirin Therapy	Process	92.83%	83.60%	80.86%
Colorectal Cancer Screening	Process	34.60%	56.78%	62.86%
HIV Linkage to Care	Process	60.00%	83.33%	85.55%
Depression Screening and Follow-up	Process	35.79%	61.96%	76.35%

9

Financial Performance

Total Revenues: \$45,730,195
 Total Expenses: \$25,106,888
 Total Net Income: \$20,623,307

Total Visits: 133,791

Total Cost/Visit: \$187.66

Total Medical Care Cost/Visit:
 \$176.43

10

Sliding Fee Scale for San Joaquin County Clinics

10

2021 Federal Poverty Level Based on Monthly Income by Family Size

Office Visit	\$30 Nominal Fee	\$40 Minimum Fee	\$50 Minimum Fee	\$60 Minimum Fee	\$185 FULL FEE
Nurse Visit	\$5 Nominal Fee	\$10 Minimum Fee	\$15 Minimum Fee	\$20 Minimum Fee	\$40 Full Fee
Family Size	0-100%	101 - 133%	134 - 150%	151 - 200%	Over 200%
1	\$1,073.33	\$1,427.53	\$1,610.00	\$2,146.67	\$2,146.68 and over
2	\$1,451.67	\$1,930.72	\$2,177.50	\$2,903.33	\$2,903.34 and over
3	\$1,830.00	\$2,433.90	\$2,745.00	\$3,660.00	\$3,660.01 and over
4	\$2,208.33	\$2,937.08	\$3,312.50	\$4,416.67	\$4,416.68 and over
5	\$2,586.67	\$3,440.27	\$3,880.00	\$5,173.33	\$5,173.34 and over
6	\$2,965.00	\$3,943.45	\$4,447.50	\$5,930.00	\$5,930.01 and over
7	\$3,343.33	\$4,446.63	\$5,015.00	\$6,686.67	\$6,686.68 and over
8	\$3,721.67	\$4,949.82	\$5,582.50	\$7,443.33	\$7,443.34 and over
Each additional person +8	\$383.33	\$509.83	\$575.00	\$766.66	\$766.66

**FULL FEE \$185 per visit
(\$40 for Nurse Visit)**

**All above Services- Income Above 200% of Federal
Poverty Guidelines or No Proof of Income**

<https://www.federalregister.gov/documents/2021/02/01/2021-01969/annual-update-of-the-hhs-poverty-guidelines>

Effective 02/01/2021

CEO Report – Previous 30 Days

- **COVID19 response**
 - Testing continues but heaviest focus is on vaccination
 - SJCC has performed roughly 12k vaccinations to date; largest vaccinator?
 - Mass vax events have been optimized
 - TBD how Blue Shield TPA will impact future vax efforts
- **SJCC/SJGH separation**
 - Detailed updates provided to SJCC Board Audit Committee
 - SJC BOS approved item on 1/5/21; SJCC is a County “affiliate”
 - Active issues: HR treatment, supplemental funding split, MOU development, SJCC budget development
- **HRSA vOSV**
 - Mock vOSV performed by Fiscal Solutions week of 1/4
 - Revisions to P&Ps are in various stages of completion
 - After hours-call, privileging/credentialing: looking at third-party vendors
- **Quality Update – QIP PY4 began 1/1; 40 metrics, all P4P, equity**
 - QI team will be pursuing drive-through operation for screenings, A1c, BP, IZ, FIT