



# Hazel Hawkins

MEMORIAL HOSPITAL

**SPECIAL AND REGULAR MEETING OF THE BOARD OF DIRECTORS  
SAN BENITO HEALTH CARE DISTRICT  
911 SUNSET DRIVE, HOLLISTER, CALIFORNIA  
THURSDAY, SEPTEMBER 22, 2022 – 5:00 P.M.  
SUPPORT SERVICES BUILDING, 2<sup>ND</sup>-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](mailto: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

	<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> None.	(Hernandez)
4. <u>Public Comment:</u> This opportunity is provided for members to comment on the closed session topics, 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)

A. Consider Approval of RESOLUTION NO. 2022-16 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 September 30, 2022, THROUGH October 31, 2022.

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

B. Consider Approval of RESOLUTION no. 2022-17 CHFFA BRIDGE LOAN PROGRAM PROMISSORY NOTE. \*\*\*

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

9. **Consent Agenda—General Business** (pgs. 6-16)

(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 August 25, 2022.

B. Non-Clinical Policies:

- Policy Development and Approval
- Acceptance of Summons, Complaints, Subpoenas and other Legal Documents
- District Board Approval
- Requirements for Vendors

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

(Dr. Bogey)

10. **Report from the Medical Executive Committee** \*\*\*

A. Medical Staff Credentials: September 21, 2022

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

B. Medical Staff Synopsis: September 21, 2022.

11. **President/Chief Executive Officer (CEO)** (pgs. 17-35)

A. Mission Statement

B. Board Education – Radiology

C. Comments on Officer/Director Reports (Board Members may comment on the reports listed)

- Chief Clinical Officer/Patient Care Services (Acute Facility)
- Chief Operating Officer/VP Ambulatory Services
- Provider Services & Clinic Operations
- Skilled Nursing Facilities Reports (Mabie Southside/Northside)
- Home Health Care Agency – No Report
- Laboratory
- Patient & Community Engagement/Business Development
- Foundation Report
- Quality & Patient Satisfaction Committee \*\*\*

D. CEO Written Report and Verbal Updates

- Administrative Dashboard
- Anthem Blue Cross “Out of Network”
- Strategic Plan Tracking Documents

(Hannah)  
(Bernadette)

12. **Report from the Finance Committee** (pgs. 36-45)

A. Finance Committee Minutes

Minutes of the Meeting of the Finance Committee, September 19, 2022.

B. Finance Report/Financial Statement Review

1. Review of Financial Report for August 2022.

C. Financial Updates

1. Finance Dashboard

(Robinson)

13. **Recommendations for Board Action**

A. Contracts:

1. None.

B. Physician Agreements:

1. None.

C. Capital Leases

1. None.

14. **Report from the Facilities Committee** \*\*\*

A. Minutes of the Meeting of the Facilities Committee, September 19, 2022.

(Robinson)

15. **New Business:**

No new business to discuss.

16. **Upcoming Events:**

17. **Adjournment**

(Hernandez)

The next Regular Meeting of the Board of Directors is scheduled for **Thursday, October 27, 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  
SEPTEMBER 22, 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):   1  

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): \_\_\_\_\_



**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:**

**Employee organization:**

**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. 2022-16  
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 SEPTEMBER 30, 2022 THROUGH OCTOBER 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) October 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 September 22, 2022, by the following vote.

AYES:

NOES:

ABSTENTIONS:

ABSENT:

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Board Member  
San Benito Health Care District

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

**THURSDAY, AUGUST 25, 2022  
MINUTES**

**HAZEL HAWKINS MEMORIAL HOSPITAL**

**Directors Present**

Jeri Hernandez, Board Member  
Bill Johnson, Board Member  
Don Winn, 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 (Absent)  
Barbara Vogelsang, Chief Clinical Officer (Absent)  
Mary Casillas, Chief Operating Officer/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**

Attendance was taken by roll call, all Directors present, and the meeting was called to order at 5:00 p.m. by Board President, Jeri Hernandez.

2. **Approval of Agenda**

**MOTION:** By Director Sanchez to approve the agenda; Second by Director Hernandez. Moved/Seconded/and Unanimously Carried. Ayes: Sanchez, Hernandez, Johnson, Winn, Shelton. Approved, 5-0 by roll call.

3. **Board Announcements**

Drs. Carota and Martinez were recognized for their service to the community and patients since appointed to Medical Staff in 1982. They were also presented with a gift.

4. **Public Comment**

No public comment.

5. **Closed Session**

The Board of Directors went into a closed session at 5:10 pm to discuss four items: Conference with Legal Counsel-Anticipated Litigation, Government Code §54956.9, Public Employee Performance Evaluation, Government Code §54957, Conference with Labor Negotiator, Government Code §54957.6, Report Involving Trade Secret, Government Code §37606 Health & Safety Code §32106, and Hearing Reports, Government Code §37264.3 & Health and Safety Code §1461,32155.

6. **Reconvene Open Session/Closed Session Report**

The Board of Directors reconvened into Open Session at 6:49 pm. District Counsel, Quinn reported that in Closed Session the Board discussed four items: Conference with Legal Counsel-Anticipated Litigation, Public Employee Performance Evaluation, Conference with Labor Negotiator, Report Involving Trade Secret, and Hearing Reports. As for labor negotiations, the Board appointed members Josie Sanchez and Rick Shelton as an Ad-Hoc Board Committee to review CEO compensation benefits. As to all items, a status report was provided, the direction was given and no more reportable action was taken.

7. **Public Comment**

No public comment was received.

8. **Board Resolution No. 2022-15**

**Item: Proposed Approval for RESOLUTION NO. 2022-15 OF THE BOARD OF DIRECTORS OF SAN BENITO HEALTH CARE DISTRICT PROCLAIMING A LOCAL EMERGENCY, RATIFYING THE PROCLAMATION OF A STATE OF EMERGENCY BY THE GOVERNOR'S STATE OF EMERGENCY DECLARATION ON MARCH 4, 2020, AND AUTHORIZING REMOTE TELECONFERENCE MEETINGS FOR THE PERIOD, AUGUST 31, 2022 THROUGH SEPTEMBER 30, 2022.**

**MOTION:** By Director Hernandez to approve Resolution No. 2022-15 Proclaiming a local emergency; Second by Director Johnson.

No public comment.

**Moved/Seconded/and Unanimously Carried:** Ayes: Hernandez, Johnson, Shelton, Sanchez, Winn. Approved, 5-0 by (Roll Call).

9. **Consent Agenda-General Business**

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

A. Minutes of the Regular Meeting of the Board of Directors, July 28, 2022.

B. Policies Reviewed, Revised, and Adopted.

- Care of the OB Hypertensive/Preeclampsia/Eclampsia Patient
- Screening for HIE in the Neonate
- Antepartum Testing Post Trauma
- Medical Screening Exam Process
- Surgical Attire in the OR/Semi-Restricted Area
- Pre-Anesthesia Testing Standardized Procedure
- Use of Portable Fans
- BOD-Development of Agenda
- BOD-Board Member Code of Conduct
- BOD-Strategic Planning
- BOD-Compensation
- BOD-Yearly Calendar Events
- BOD-Board Member Expenditure Reimbursement
- BOD-Records Retention

**MOTION:** By Director Sanchez to approve items A and B of the Consent Agenda; Second by Director Hernandez.

No public comment.

7.

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

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

A. **Credentials Report:** Chief of Staff, Dr. Bogey presented the Credentials Report from August 17, 2022.

Item: **Proposed Approval of the Credentials Report; Three (3) New Appointments, seven (7) Reappointments, two (2) Allied Health – New Appointments, and one (1) Resignation.**

**MOTION:** By Director Winn to approve the Credentials as presented; Second by Director Sanchez.

No public comment.

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

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

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

11. **President/Chief Executive Officer**

A. **Board Education:** This item was deferred for a future meeting.

B. **Comments on Officer/Directors Reports:** Mr. Hannah provided highlights on the following reports.

- Chief Clinical Officer
- Chief Operating Officer
- Provider Services & Clinic Operations
- SNF
- Laboratory
- Patient & Community Engagement/Business Development
- Foundation

C. **CEO Report:**

Mr. Hannah stated he participated in the CHA, DHLF, and ACHD Seismic discussions throughout this past month. An update of the Administrative Dashboard was provided by Ms. Bakke and Mr. Robinson. Mr. Hannah also provided an update on the census and staff out due to COVID-19.

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

12. **Report from the Finance Committee**

A. **Finance Committee Minutes**

Minutes of the meeting of the Finance Committee, from August 18, 2022, have been provided to the Board of Directors.

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

1. Finance Statements – July 2022
2. Finance Dashboard
3. Noridian/Medicare Adjustment
4. 401 (a) Plan

13. **Recommendation for Board Action**

A. **Contracts:**

Item: **Proposed Approval for 591 McCray Street Lease Agreement and Meridian Professional Properties, LLC.**

**MOTION:** By Director Shelton to approve 591 McCray Street Lease Agreement for 60 months; Second by Director Sanchez.

No public comment.

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

B. **Physician Agreements**

Item: **Proposed Approval for Christopher Verioti, D.O., Orthopedic Surgery Coverage Agreement.**

**MOTION:** By Director Winn to approve Dr. Verioti's agreement for a 1-year contract; Second by Director Shelton.

No public comment.

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

C. **Capital Leases**

Item: **Proposed Approval for Ultrasound Machines (2).**

**MOTION:** By Director Shelton to approve two Siemens ultrasound units at \$6,272.86 per month with a 5-year lease term; Second by Director Sanchez.

No public comment.

**Moved/Seconded/and Unanimously Carried:** Aye: Shelton, Sanchez, Winn, Johnson, Hernandez. Approved 5-0 by roll call.

Item: **Proposed Approval for Service Agreement for Ultrasound Machines.**

**MOTION:** By Director Hernandez to approve the Service Agreement for \$112,760 over the 5-year term; Second by Director Johnson.

No public comment.

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

Item: **Proposed Approval for 4K Video Upgrade for Surgery Center OR.**

**MOTION:** By Director Hernandez to approve the lease of a 4K Video Upgrade at the cost of \$7,015.69 for payments 1-48 and \$5,788.33 for payments 1-60 per month for 5 years; Second by Director Sanchez.

9.

No public comment.

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

Item: **Propose Approval for Service Contract.**

**MOTION:** By Director Shelton to approve the service contract for \$1,983.33 per month for 4 years;  
Second by Johnson.

No public comment.

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

A full report can be found in the Board packet.

14. **Report from District Facilities & Service Development Committee**

- A. Minutes of the meeting of the Facilities Committee, from August 18, 2022, have been provided to the Board of Directors.

Mr. Robinson stated the roof was completed in July as scheduled, and the chiller was replaced at Northside SNF.

A full report can be found in the Board packet.

15. **New Business:**

No new business to report.

16. **Upcoming Events:**

- A. ACHD Annual Conference – September 14, 2022.

17. **Adjournment:**

There being no further regular business or actions, the meeting was adjourned at 7:28 p.m.

The next Regular Meeting of the Board of Directors is scheduled for **Thursday, September 22, 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.

10.



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## Policy : Policy Development and Approval

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### PURPOSE

To ensure:

- an efficient and consistent procedure for writing, reviewing, revising, approving and publishing policies, and
- that policies are readily accessible, available, and provide clear direction to staff.

### POLICY

Policies will be consistent with the Mission, Vision, Values, and Goals of Hazel Hawkins Memorial Hospital.

It is the policy of Hazel Hawkins Memorial Hospital to establish and maintain an effective system for the development and review of all policies. Written policies shall be developed in collaboration with Medical Staff, Administration and the Board of Directors as appropriate. All policies shall reflect current standards, regulations, and evidence based practices. Revised policies are subject to the same approval process as newly developed policies. Policies with editorial revisions only can receive final approval by the Department Director and are not subject to the approval process outlined below.

Non-clinical policies will be reviewed by the department director and any pertinent stakeholders at a minimum of every three (3) years. Clinical policies are reviewed every two (2) years. More frequent review may be necessary to meet regulatory requirements.

Policies will have Board of Directors or urgent approval prior to implementation.

Department Directors are responsible for departmental policy management. Responsibilities include ensuring that department policies are complete, current, compliant with regulatory requirements, and reviewed by key stakeholders.

### DEFINITIONS

**Policy:** Formalized documents that outline practices, procedures, and rules that are considered to be mandatory.

**Guideline:** Recommendations that provide flexibility in application but are not compulsory.

**Revised Policies:** A policy that changes the provision of care or service and/or has content changes.

**Editorial Revision:** Editorial revisions, such as grammatical corrections, that do not change the provision of care or services.

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### PROCEDURE

A standardized format will be utilized when creating policies. Major content components include Purpose, Policy, Definitions, Procedure, References and Stakeholders as appropriate.

Policies may include current references, including but not limited to, The Joint Commission, Title 22, and California Department of Health standards.

Tracked changes will be applied throughout the review and/or revision process.

Policies will have initial approval by department directors, stakeholders, senior leaders, medical directors and committees as appropriate. See outlined process in the attached Flow Chart.

Policy and/or Procedure review and approval process.

- P&P reviewed, revised, developed by Department Director in collaboration with stakeholders.
- P&P reviewed and approved by Medical Director of clinical department, Medical Staff Committee and Hospital Committees as appropriate.
- Director Reviews the Policy with the Executive Leader.
- Clinical P&P submitted to Policy & Procedure Committee for review and approval.
- Clinical P&P submitted to the Medical Executive Committee (MEC) for review and approval.

- Non-Clinical P&P sent to CEO for review and approval.
- P&P submitted to the Board of Directors (BOD) for review and approval.

When a policy requires urgent approvals, such as for an urgent patient safety or compliance issue, the Department Director will involve appropriate hospital and medical staff leadership in the policy development or revision. The hospital CEO, CCO or their designees are delegated to give policy approval. The policy will then be forwarded to MEC and the BOD for final approval.

Upon final approval, the policy dates are updated and final edits completed in the electronic policy system. The document is then published and appropriate leaders are notified.

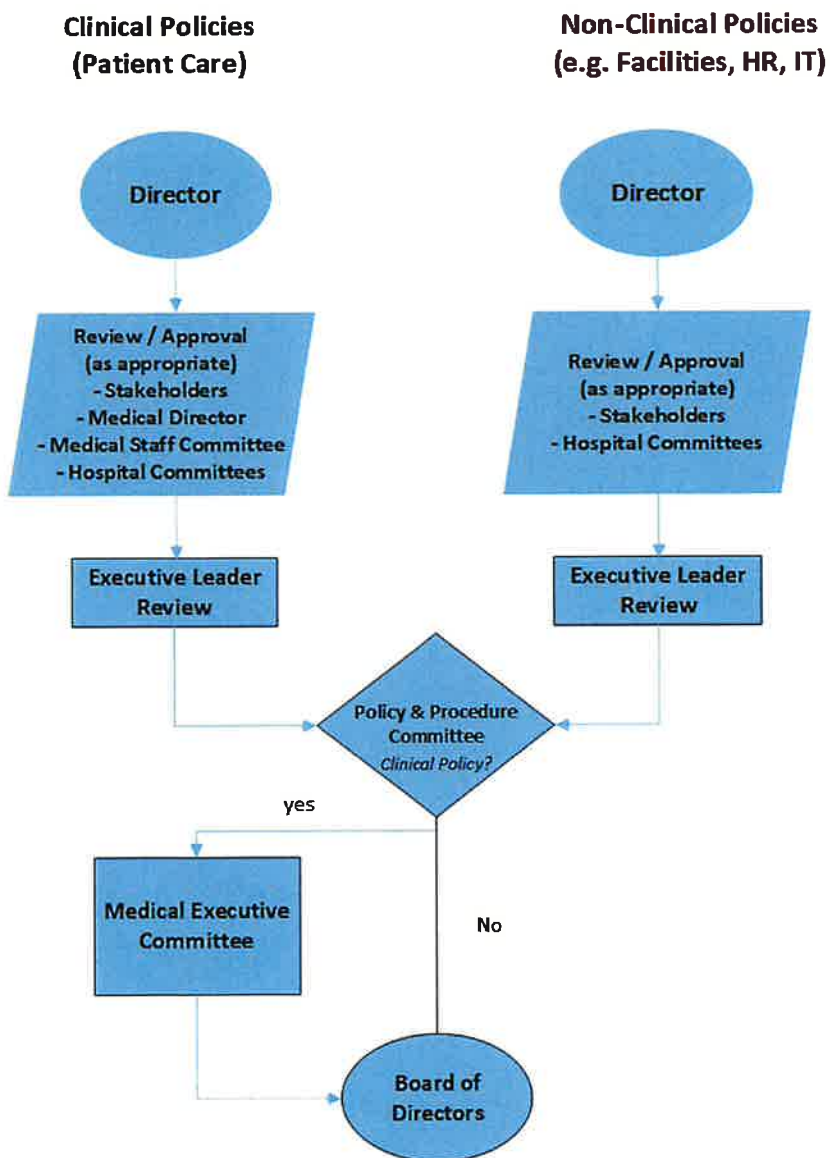
Department Directors are responsible for ensuring that staff is educated on policies that are pertinent to their job function.

Prior versions of revised or retired policies are archived in the electronic policy system.

## REFERENCES

1. California Code of Regulations Title 22
2. The Joint Commission

## Review & Approval Process





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## Policy : Acceptance of Summons, Complaints, Subpoenas and other Legal Documents

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### PURPOSE

Employees must exercise care when presented with any documents concerning legal actions in which the San Benito Healthcare District (the District) or its employees are involved. Only the Director Clinical Services, Quality/Risk the Director Clinical Services Quality Assurance or an Executive Leader may accept service of summons and complaints on behalf of the District.

Subpoenas for medical records must be directed to the Medical Records Department. Subpoenas for personnel records must be directed to the Human Resources Department. Subpoenas for physicians must be directed to the physician.

Failure to appropriately handle summons, complaints or subpoenas could place the District and the employee at risk or disadvantage in legal proceedings. Failure to follow required procedures may be cause for discipline, up to and including termination.

### DEFINITIONS

Summons - a legal document that notifies an individual or entity that a lawsuit has commenced and that the individual or entity served must respond to the complaint.

Complaint - a legal document that sets forth the claim(s) in a lawsuit and the relief being sought by the plaintiff.

Subpoena - an order issued by a court or attorney for the production of records or for a person to appear at a deposition (oral testimony under oath) or in court.

### SUMMONS AND COMPLAINTS

If a process server or attorney attempts to serve a Summons or Complaint on the District to an employee, the process server must be referred to the Director Clinical Services, Quality/Risk, the Director Clinical Services Quality Assurance or an Executive Leader.

### SUBPOENAS

Subpoenas must be properly served:

- It must be personally served on someone authorized to accept a subpoena (civil case).
- A subpoena log should be kept in Risk Management, HIM and HR including: Date served, method of service, person accepting service, case name, purpose of subpoena, name of person for whom the subpoena is directed, MRN of patient whose records are being sought, due date and date for production of records in response to subpoena.
- Inform Risk Management and send a copy of the subpoena to the liability carrier on an urgent basis.

A subpoena does not eliminate the physician's or hospital's duty of confidentiality to the patient. It does not allow the hospital/physician to speak directly with the attorney or entity issuing the subpoena about confidential patient information without the patient's consent.

### SUBPOENAS FOR MEDICAL RECORDS

Subpoenas for medical records - direct process server to Medical Records Department.

Determine the exact scope of the medical record sought to provide. If the subpoena is for a patient's entire medical record, release the record with the exception for specifically protected records. See below for specifically protected records. Do not produce:

- Mental Health Records without written consent of patient
- Alcohol or drug records without a court order
- Records of HIV status without written consent of patient

- Social worker notes which reference Mental Health, alcohol, drugs or HIV status

The recipient should confirm that the subpoena is valid. The subpoena:

1. Must be properly served (e.g. in person for civil cases)
2. Must be issued by a clerk of the court or attorney handling the lawsuit
3. Must be addressed to you, your custodian of records or other person who is qualified to certify the requested medical records
4. Must include the date specified for production of records. At least 20 days after the subpoena was issued, at least 15 days after it was served and at least 20 days after notice of the subpoena was received by the patient
5. The subpoena was issued by a valid authority (State or federal court, administrative agency (e.g. Medical Board, Board of Nursing) or the attorney to the action)
6. The designation of records requested must identify or specify with "reasonable particularity" each item or category of items to be produced.
7. Documentation must be attached to the subpoena (written authorization or proof of service) demonstrating that the patient has been informed of the subpoena for medical records (Code of Civil Procedure §2020.4109d).

If there are any questions about the validity of the subpoena or which documents can be produced, contact Risk Management.

## **PERSONNEL SUMMONS, SUBPOENAS, OR OTHER LEGAL DOCUMENTS BEING SERVED ON EMPLOYEES**

Summons, subpoenas, or other legal documents being served on Employees - direct the process server to the Human Resource Department. Process servers are not permitted to serve these directly to the employee on the work unit.

## **SUBPOENAS FOR PHYSICIANS**

Subpoenas for physicians - direct process server to the physician.

Do not produce Medical Staff, peer review or credentialing records - Evidence Code section 1157 (civil cases).

The Medical Board has authority to issue investigative subpoenas. Evidence Code 1157 may not apply to prevent production of Medical Staff or credentialing files to the Medical Board.

## **STAKEHOLDERS**

Quality Department / Risk Management

Medical Records Department

Human Resources

Medical Staff Office

## **REFERENCES**

California Code of Civil Procedure

California Evidence Code

California Medical Association Health Law Library, Physician's Legal Handbook, Document #4208 Subpoenas: Guide for Responding, January 2021

## Policy : District Board Approval

### PURPOSE

To provide guidelines for the San Benito Health Care District (District) Board Members for when their approval is required in addition to the CEO, COO, or CFO of the organization for contracting with the entities needed in order to operate the District.

The policy covers clinical and non-clinical service agreements including direct patient care and support service agreements.

### CONTRACTS

1. Purchase Service Agreements are for services that the District does not provide with its own employees. Examples of these agreements would include the Pharmacy, HIM, and Security departments.
2. Operational Leases are for equipment that the District does not own. Examples of these agreements would be the E.H.R. systems such as MediTech and eCW and copier machines.
3. Maintenance Service Agreements are for service coverage for equipment whether it is owned or leased by the District. Examples would include but are not limited to the MRI, CT Scanners, and other machines used in the Radiology department.
4. Property Rental Leases are for property the District does not own. Examples include the Lab Draw station on McCray and the 4th Street, San Juan Bautista, and Barragan Rural Healthcare Clinics.

For all agreements and leases listed under Section A. Contracts, only those that have a term of greater than one year and a cost in excess of \$100,000 annually are required to be presented to the Finance Committee and recommended to the District Board for approval. The CEO, COO, and CFO are authorized to approve the agreements that do not meet the aforementioned criteria.

### CAPITAL EXPENDITURES

1. Budgeted capital expenditures that are included in the annual Capital Budget presented to the District Board with the annual Operational Budget for approval will be considered approved throughout the fiscal year. The CEO, COO, and CFO will be authorized to execute the expenditures when the timing is deemed appropriate and the cost is within 15% in excess of the approved budgeted cost.
2. Non-budgeted capital expenditures will be brought to the Finance Committee and District Board for approval if the cost exceeds \$100,000. This includes equipment that is required for new services and functions, to replace obsolete units, and add additional units.

### PHYSICIAN / PROVIDER AGREEMENTS

1. Group Contracts include physician groups that provide medical coverage for the Emergency Department, Hospitalists program, and Pediatric on-call for the OB department.
2. Individual Agreements include the physicians contracted as primary care, surgeons, orthopedist, and the various specialists who are based in the District's clinics and have privileges to perform services in the hospital.
3. Extension of agreements without any increases in the compensation or a decrease in the compensation may be approved by the CEO, COO, or CFO with only notification to the District Board. The extension should not exceed one year.
4. New agreements without any financial compensation or impact to the facility may be approved by the CEO, COO, or CFO with only notification to the District Board. This type of agreement would include a physician having privileges to provide medical services to the Skilled Nursing facility residents.
5. Office Leases refer to the agreements where the District is the landlord and the physician is the tenant or the District is the tenant and the physician is the landlord. A fair market assessment for comparable rental units in the area will be completed prior to the agreement being presented to the District Board.

Prior to being presented to the Finance Committee for a recommendation, all physician agreements will comply with the **Fair Market Value Policy** and **Physician Services Contract Policy and Procedure** policies included in the Administrative Policy Manual.

## Policy : Requirements For Vendors

### PURPOSE

To provide a safe and secure environment for workforce members, patients, visitors and to protect the District's assets. For safety and security purposes, this policy will control access to and from areas owned and operated by the San Benito Health Care District.

### POLICY

It is the policy of San Benito Health Care District (SBHCD) to effectively verify the credentials of a visiting vendor or representative and manage the volume of visitations. All vendors shall conduct business according to an established policy and procedure. A member of SBHCD workforce must accompany vendor representatives coming into patient care areas.

### PROCEDURE

Vendors:

- A. Check in will be located at the Material Management, and Engineering Departments Monday to Friday from 7:30AM to 4:00PM; and with the Shift Coordinator Monday to Friday from 4:00PM to 7:30AM, weekends and holidays.
- B. All vendors will report to the Materials Management or Engineering Departments prior to going to any other department(s) or areas owned/operated by the San Benito Health Care District. All vendors will follow the following procedures before proceeding to other departments:

1. At the located computer, sign into the Vendormate Program, enter the 6-digit pin and print the necessary badge for entry.
2. After acquiring a Vendor Pass Badge from Material Management, Engineering or the Shift Coordinator the badge must be worn where District staff can visibly see it. You may not keep this badge in your pocket, briefcase, etc.
3. You must wear an approved N95 mask when entering the hospital. If needed, you may request one at check in.
4. Staff will call the person with whom you have an appointment, giving all pertinent information regarding your visit.

**NOTE:** Under no circumstances are vendors allowed to see any member of the District's staff without an appointment. Additionally, the PBX staff is not allowed to call any member of the District staff to set up meetings or appointments for vendors.

- C. It is the responsibility of the Department Manager to refer all vendors to Materials Management, Engineering or the PBX desk should vendors arrive in their departments/areas without a vendor pass badge.
- D. It is the responsibility of the Department Manager or designee to come to the Materials Management or Engineering Department and escort the vendor to their department.
- E. This stated policy will be posted conspicuously in the Materials Management and Engineering Department and in other areas deemed appropriate.



# Hazel Hawkins

MEMORIAL HOSPITAL

San Benito Health Care District  
Board of Directors Meeting  
22 September 2022  
Chief Clinical Officer Report

- Emergency Department:
  - Visits 21147 Admitted 207
  - Codes Trauma 23
  - Codes Stroke 16
  - LWBS 6
- Med / Surg: ADC 13.9
- ICU: ADC 3.5
- OB: 42 deliveries; 137 Outpatient Visits
- OR Cases: (60 inpatient / 106 Outpatient)
- Director of Clinical Dietetics, Jennifer Bange, RD, donated in-kind hours to the County of San Benito Nutritional Services departments with Inspections at the County Jail and Juvenile Hall.



COO Report  
September 2022

**Ambulatory Services**

- General Surgery Clinic – Construction continues and we are on track to complete the renovation at the end of October.
- Rural Health Clinics – One new mid-level provider started last month. He will go between the Sunset Clinic and Barragan Clinic.
- Recruitment – Recruitment has been active with GI and ENT service lines.
- Maple Street – We will be making the decision on architect firms next week. The next step will be to go to bid for construction.
- Through the Sunlight Giving grant, the clinics were able to purchase 13 exam tables and 3 audiometers.

**Environmental Services**

- We are recruiting for the manager position due to a resignation.

**Food and Nutritional Services**

- We will be implementing our new Point of Sales machine this month. This will make the checkout more efficient for staff and help with tracking meals.



Hazel Hawkins  
MEMORIAL HOSPITAL

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

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**2022 Rural Health and Specialty clinics' visit volumes**

Total visits for July 2022 in all outpatient clinics =7,426

Orthopedic Specialty	533
Multi-Specialty	674
Primary Care Associates	1575
Sunset Clinic	1184
Annex Surgeons (General Sx)	173
San Juan Bautista	319
1st Street	731
4th Street	1474
Barragan	763

- On August 8, 2022, we welcomed new Physician Assistant Brandon Guinvarch. Brandon comes to us from *California State University Monterey Bay* as a 2022 graduate. Brandon is specializing in Family Medicine and is already proving to be a great addition to our Rural Health clinic provider team. Brandon did some of his training during his program at the Barragan Center before accepting a full-time position with the District.
- With the support of a generous \$75,000 grant from Sunlight Giving, the clinics purchased 13 exam tables and 3 new audiometers to replace units that were nearing the end of their service life.





# Hazel Hawkins MEMORIAL HOSPITAL

## WILLIAM & INEZ MABIE SKILLED NURSING FACILITY

SEPTEMBER 2022

### BOARD REPORT

SEPTEMBER 20, 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. Working with our Hospital Case Management and IT to improve the referral process to be more efficient.
2. Northside facility has been dealing with a very difficult family. CDPH has been conducting many investigation visits without substantiating any deficiencies. The last visit from CDPH for this family from CDPH complaint was 8/22/22, with No deficiency issued. We involved Hospital District Risk Management and other departments.
3. SNF is working on Podiatry Services Contract with potential service provider and Hospital Administration.

#### **II. In-Services for the month of September:**

- |      |  |
|------|--|
| 9/15 | <b>Dementia: Oral Health<br/>Mandatory L.N. &amp; C.N.A.</b>                     |
| 9/20 | <b>Pressure Ulcer Prevention &amp; Management<br/>Mandatory L.N. &amp; C.N.A</b> |
| 9/27 | <b>Dementia: Psychoactive Medication Regimen<br/>Mandatory L.N. &amp; C.N.A</b>  |



### III. Census Statistics for August:

<b>Statistics:</b>	<b>2022</b>	<b>2021</b>
Total Number of Admissions:	15	4
Number of Transfers from HHH:	14	4
Number of Transfers to HHH:	3	1
Number of Deaths:	2	0
Number of Discharges:	8	7
Total Discharges:	10	7
<b>Total Census Days:</b>	<b>1411</b>	<b>1353</b>

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.

<b>Total Discharged by Payer Status Category:</b>	
Medicare:	6
Medicare MC:	2
Medical:	2
Medical MC:	0
Private (self pay):	0
Insurance:	0
<b>Total:</b>	<b>10</b>

<b>Total Patient Days by Payer Status Category:</b>	
Medicare:	259
Medicare MC:	40
Medi-Cal:	1080
Medi-Cal MC:	0
Private:	31
Insurance:	1
Bed Hold/LOA	5
<b>TOTAL:</b>	<b>1416</b>
<b>Average Daily Census</b>	<b>45.68</b>

### IV. Palliative Care Referral Statistics for August:

<b>Referral Sources:</b>	
New Referrals	14
Acute Referrals	7
Southside Referrals	3
Northside Referrals	4

Patients Served	33
Patients Discharged	6
Patients Deceased	6
Grief Support	30
<b>Total Patient Visits</b>	<b>92</b>



# Hazel Hawkins

MEMORIAL HOSPITAL

To: San Benito Health Care District Board of Directors

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

Date: AUGUST 2022

## HOME HEALTH STATS

	MAY 2022	JUNE 2022	JULY 2022	AUGUST 2022
Total Admissions	45	44	37	32
Total Home Visits	476	422	519	523
Census / Total Patients	75	84	88	63

## REFERRAL SOURCES

	MAY 2022	JUNE 2022	JULY 2022	AUGUST 2022
Hazel Hawkins	39%	32%	52%	26%
Other Hospitals	11%	14%	16%	13%
Southside SNF	2%	7%	5%	13%
Northside SNF	18%	11%	3%	3%
Other SNFs	2%	2%	5%	6%
M.D. / Clinics	38%	34%	19%	39%

## PAYOR REFERRAL SOURCE

	MAY 2022	JUNE 2022	JULY 2022	AUGUST 2022
Medicare	62%	89%	68%	62%
PVT	7%	2%	2.5%	0%
Medicare Managed	18%	5%	19%	32%
Medical	11%	2%	8%	3%
Workers Comp	2%	2%	2.5%	3%

## \*PAYOR SOURCE OF VISITS MADE

	MAY 2022	JUNE 2022	JULY 2022	AUGUST 2022
Medicare	77%	81%	78%	75%
Medi-Cal	5%	5%	4%	2%
Private	7%	4%	3%	3%
Managed Medicare	11%	8%	12%	19%
Workers Comp	0%	2%	3%	1%

22-



# Hazel Hawkins MEMORIAL HOSPITAL

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

=====

**Updates:**

**Laboratory**

1. Service/Outreach
  - Updated cash pay prices for laboratory tests
  
2. Covid Testing
  - Period: August 2022
  - Total Samples tested: 4318
  - Positivity Rate: 5.76%
  
3. New Tests/Analyzers
  - Site visit to Natividad Medical Center with Facilities Director to look at set-up of planned chemistry analyzer replacement.
  - Evaluation of new molecular biology test- vaginal beta strep-B test
  - Timeline discussion of new Biofire blood culture identification panel test.
  
4. Quality Assurance/Performance Improvement Activities
  - Configuration and implementation meetings on electronic lab ordering through Sunquest Atlas
  - Review and Revision of policy and procedures
  
5. Laboratory Statistics
  - See attached report

**Diagnostic Imaging**

1. New Analyzers
  - Two ultrasound equipment approved by Board



# Hazel Hawkins

MEMORIAL HOSPITAL

## 2. Quality Assurance/Performance Improvement Activities

- Policy review and revision ongoing with Rad Tech Leads
- Powerscribe One 2022 upgrade had issues; planned rollback to Powerscribe One 2019 version
- SVR to replace STATRAD with TRG
- Cross training of staff for modalities below is ongoing to ensure operational continuity
  - a. Dexa
  - b. CT
  - c. Mammo special procedures
- Draft Set schedule for Rad Tech presented to Team by using workload balance template

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	1165	1112	1252					

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	2546	2244	2355					

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	1025	1061	1130					

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	488	495	558					

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	1335	1111	1198					

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	6559	6023	6493					

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	1258	1321	1421					

LABORATORY DEPARTMENT

REQUISITION STATISTICS

Bernadette Enderez  
Director of Laboratory Services

Michael McGinnis, M.D.  
Medical Director



Hazel Hawkins  
MEMORIAL HOSPITAL

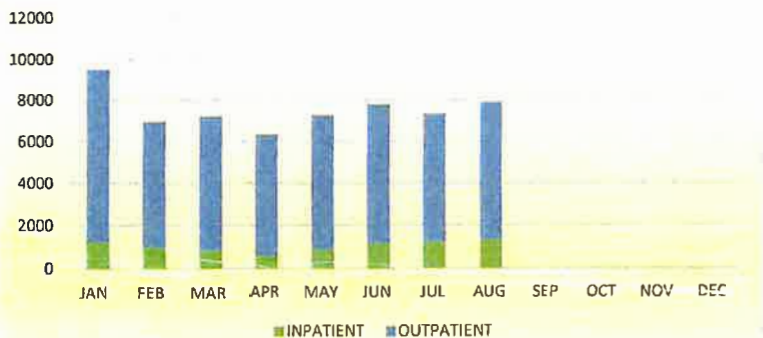


### INPATIENT VS OUTPATIENT LABORATORY STATISTICS

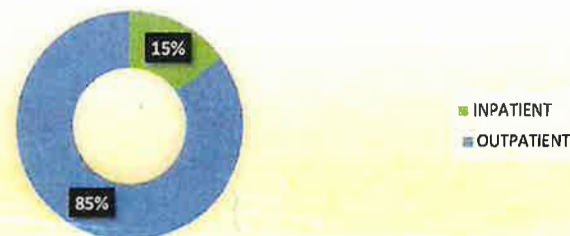
YR 2022														
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	
INPATIENT	1311	1102	945	678	963	1258	1321	1421					8999	INPATIENT
OUTPATIENT	8222	5866	6299	5673	6324	6559	6023	6493					51459	OUTPATIENT

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

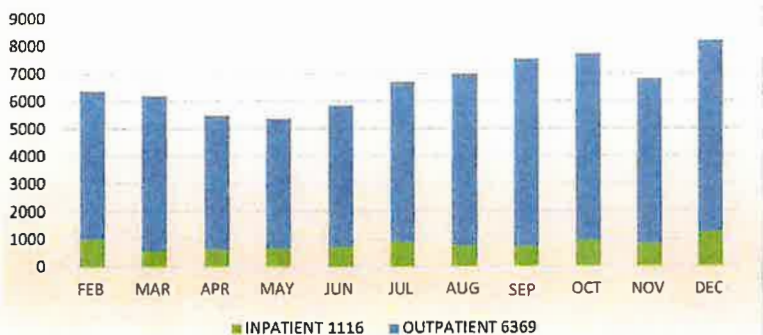
YR 2022 INPATIENT VS OUTPATIENT STATS



YR 2022 INPATIENT VS OUTPATIENT TOTALS



YR 2021 INPATIENT VS OUTPATIENT STATS



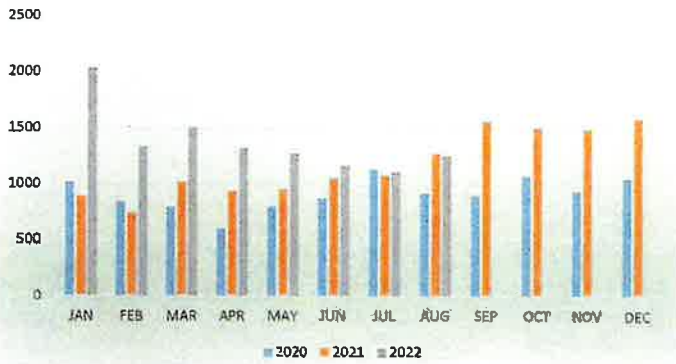
YR 2021 INPATIENT VS OUTPATIENT TOTALS



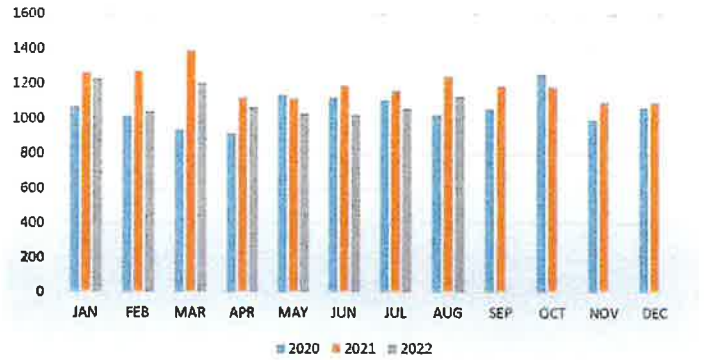
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**MAIN LAB OUTPATIENT STATISTICS**



**MC CRAY OUTPATIENT STATISTICS**



**SUNNYSLOPE LAB STATISTICS**



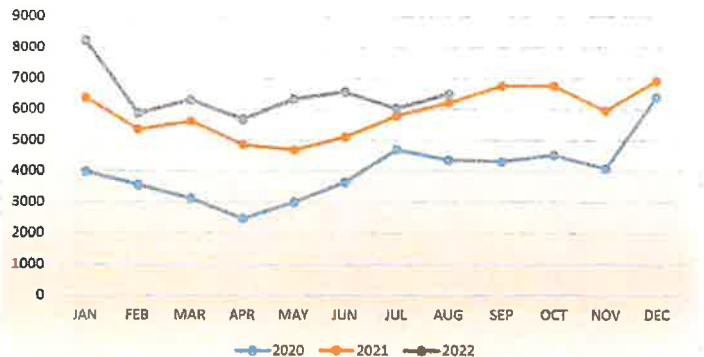
**HHH EMPLOYEE COVID19 SURVEILLANCE STATISTICS**



**ER AND ASC LAB STATISTICS**



**OUTPATIENT LAB STATISTICS**



**LABORATORY DEPARTMENT**

**OUTPATIENT STATISTICS**

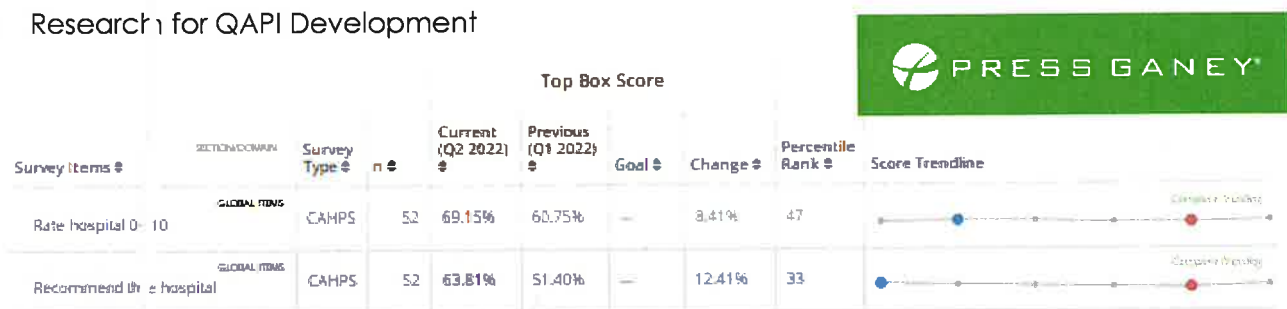
**Bernadette Enderez**  
Director of Laboratory Services

**Michael McGinnis, M.D.**  
Medical Director

27.

**PATIENT ENGAGEMENT | SATISFACTION**

- Rounding
- Press Ganey Comments and Results Distribution
- Collaboration with Quality to resolve grievances.
- Reputation.Com survey management
- Development of Outpatient Lab and Rad plus Birth Center to the Reputation.Com platform.
- Research for QAPI Development



**COMMUNITY ENGAGEMENT**

**Employees:**

- Hawkins Happenings
- Employee Forums
- Continuing Department Recognition Week banners and Social Media posts

**Physicians / Providers**

- Open House, Thomas Nguyen, MD
- Nick Gabriel, DO, Kinship meet and greet
- Hoang Nguyen, DO, Interventional Cardiologist, San Jose Clinic Visit
- Dr. Carota and Dr. Martinez Retirement Video
- Hoang Nguyen, DO discussion with Michael Bogey, MD — ED consultations

**Public:**

- Anthem Blue Cross Communications
- Anthem Advocacy Education
  - San Benito County Office of Education Superintendent of Schools
  - San Benito County • City of Hollister
- Stanford Blood Drive
- Qigong and Yoga reboot
- Jullian Nguyen & Thomas Nguyen, MD introduction to Focus Sports & Hollister Haybalers
- Youth Mental Health discussion with Youth Recovery Connection
- Chamber of Commerce Roundtable with Senator Anna Caballero
- Grief Support Group reinstated

**Volunteers**

- On Boarding Lissa Gaffney, Administrative Coordinator
- Auxiliary Board Meeting





**MARKETING**

- Social Media Postings:
- Anthem PPO Termination Media Release
- Anthem Termination OpEd
- Implement Thomas Nguyen, MD— Orthopedic Marketing Campaign
- Birth Center Experience: Onesie Development and Celebration Meal Refresh
- Jackets & Long Sleeve Shirts for HHH Team Doctors at Baler Football games

**Page Overview**

Last 28 days

Followers: 2,315

 Post reach ⓘ	5,894
 Post Engagement ⓘ	3,891
 New followers ⓘ	12

**Top Performer**



HHMH CEO, Steve Hannah, explains the situation with Anthem Blue Cross.

August 25 at 9:33 PM · 🌐

Post Impressions ⓘ	Post reach ⓘ	Post Engagement ⓘ
<b>409</b>	<b>359</b>	<b>170</b>

**BUSINESS DEVELOPMENT**

- Anthem Blue Cross Weekday Huddles, Education and Advocacy Efforts
- Website Development
- Breast Program Taskforce
- On Boarding Thomas Nguyen, MD, Orthopedic Surgeon
- Strategic Plan Fulfillment Workshop Preparation

*29*



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

The Hazel Hawkins Hospital Foundation Board of Trustees met on September 8th the Horizon Room. Kristi Matthews - Registered Dietitian, Certified Diabetes Care and Education Specialist at the Barragan Diabetes Center presented our Diabetes Education Program that the Foundation funded with the CARE/Flex Grant Program.

**Financial Report for August**

1. Income	\$ 109,856.13
2. Expenses	\$ 36,753.53
3. New Donors	0
4. Total Donations	431

**Approved Allocations**

1. \$4,516.56 for Antimicrobial Vinyl Chairs for the Ortho Clinic from the Clinics Fund
2. \$700 for Baby Friendly Program from Women’s Center Fund (originally \$3100 was allocated but the cost of certification went up to \$3800)
3. \$60,000 to HHMH for Palliative Care Program from funds received from the Hospice Giving Foundation dedicated to HHMH Palliative Care.

**Directors Report**

- Liz introduced Lissa Gaffney, the new Administrative Coordinator. The new position was created to help with the Foundation, Marketing and Volunteers. She has a lot of non-profit work experience as she has worked with the Monterey Bay Aquarium, Gilroy Foundation and St. Louise Hospital. Welcome to Lissa!
- The grant report for the Monterey Peninsula Foundation Grant was submitted and we have now fulfilled all our reporting requirements for this grant. I set up a meeting with Mary and Barbara to discuss future grant applications. We would like to apply for the grant cycle that is due on Dec. 1st.
- The Hospice Giving Foundation awarded us \$60,000 for our Palliative Care Program.
- Our marketing department is revamping the hospital website and our site is included in the project. We are hopeful it can launch in the next couple months.
- Meeting with Sunlight Giving this afternoon to discuss the \$75,000 grant they gave to us last December and future funding.
- The Nominating Committee will need to meet soon. We have 5 termed out Board Members at the end of this year: Lynda, Luciano, Kathy, Bob and Abraham.

**Dinner Dance Committee**

Our “Save the Date” postcard was mailed 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 went out in at the end of July and we have over \$43,000 in sponsorships already. We are looking forward to a very successful event. We are working with the Community Foundation to use their online auction platform. Invitations will go out in a couple weeks. We were ahead of sponsorships last year to date and then the Anthem situation happened. Have noticed it has slowed down but I am hopeful after our next mailing we will be back on track.



# 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 – September 22nd, 2022**

To: San Benito Health Care District Board of Directors

#### **COVID-19 Pandemic Surge**

Verbal update at the Board meeting during the CEO update

#### **Administrative General Updates**

##### **Administration Dashboard:**

Verbal report at the meeting during CEO update

##### **Anthem Blue Cross Negotiation:**

Significant communication with State legislators, local government entities, physicians, patients, and others has occurred over the past month. We are hopeful that enough communication and complaints are being filed with Anthem Blue Cross and the State DMHC to move the negotiations forward with Anthem offering a competitive rate in order for HHMH to be back “in network.”

##### **Strategic Plan Update:**

As reported last month, the Strategic Planning Board Retreat scheduled for October 13<sup>th</sup> has been delayed by Board leadership.

I am using the effort and work project that was initiated by administration for the Board retreat for an onsite administrative planning day in support of the current strategic plan which includes a focus on growing revenue, increasing market share, positioning HHMH in a better public light, and growing the medical staff. Medical Staff leadership is included to ensure we have their counsel and buy-in to the various administrative initiatives that are being pursued. I will update the Board through the quarterly strategic plan tracking document and other communications.

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# Hazel Hawkins

MEMORIAL HOSPITAL

**Legislative Update:**

Several meetings have occurred with local legislator’s offices regarding the Anthem Blue Cross situation and ongoing financial considerations.

**CEO HHMH/Community Activities:**

- Hospital Rounding – Daily
- Hollister City Manager – Sep 1st
- Foundation Board Meeting – Sep 8th
- Benito Link Interview – Sep 9th
- Auxiliary Board Meeting – Sep 12<sup>th</sup>
- Public Health – Monthly
- Anthem Blue Cross PPO Situation Meetings – Daily

**CEO Regional/National Activities:**

- One Time Emergency Funding Request – AM Rivas – Sep 2<sup>nd</sup>
- AM Rivas and SS Callero Meeting – Sep 6th
- ACHD Board Retreat – Sept 14<sup>th</sup> – 16th

Sincerely,

*Steven Hannah*

Steven M. Hannah, MHA  
*Chief Executive Officer*

**Acronyms**

ACHD	Association of California Hospital Districts
ACO	Accountable Care Organization
AFE	*Acronym Free Environment
AM	Assembly Member
APP	Advanced Practice Practitioners (FNP and PA)
ASC	Ambulatory Surgery Center
BBK	Best, Best and Krieger Law Firm
CAH	Critical Access Hospital
CCAHN	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)

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# Hazel Hawkins

## MEMORIAL HOSPITAL

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
CPI	Consumer Price Index
CY	Calendar Year
CYTD	Calendar Year to Date
DHLF	District Hospital Leadership Forum
DMHC	CA Department of Managed Healthcare
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
HMO	Health Maintenance Organization
HOPD	Hospital Outpatient Department
HPF	Hospital Provider Fee Program
HR	Human Resources
ICU	Intensive Care Unit
IPA	Independent Physician Association
LLP	Limited Liability Partnership
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
PPO	Preferred Provider Organization



# Hazel Hawkins

MEMORIAL HOSPITAL

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
YTD	Year to Date



San Benito Health Care District  
 Hazel Hawkins Memorial Hospital  
 September 22, 2022

Description	Target	Rolling 12 month August
Overall Rating of the Hospital	77%	71.29 ↑
Likelihood to Recommend the Hospital	75%	63.60 ↓
CMS 30-Day All Cause Readmission Rate	11%	12.21 ↓
Surgical Site Infections (SIR)	1.00	1.65 ↓

Description	Target	MTD Actual	YTD Actual	YTD Target
Average Daily Census - Acute	17.87	18.26	18.26	17.52
Average Daily Census - SNF	88.00	89.65	87.37	88.00
# of Surgery Cases	149	163	283	307
EBIDA %	6.09%	2.44%	1.29%	5.07%
Operating Margin	2.16%	-2.09%	-3.32%	0.98%
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.



**FINANCE COMMITTEE**  
**Monday, September 19, 2022, 5:00 p.m**  
**Meeting Agenda**

Call to Order

- I. Financial Reports:
  - A. Financial Statements – August 2022
  
- II. Financial Updates
  - A. Finance Dashboard
  
- III. Board Resolution #2022-17
  - A. CHFFA Bridge Loan Program Promissory Note (**Action item**)

Adjournment

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September 19, 2022

**CFO Financial Summary for the Finance Committee:**

For the month ending August 31, 2022, the District's Net Surplus (**Loss**) is \$65,858 compared to a budgeted Surplus (**Loss**) of \$557,378. The District is under budget for the month by \$491,520.

YTD as of August 31, 2022, the District's Net Surplus (**Loss**) is **(\$194,643)** compared to a budgeted Surplus (**Loss**) of \$783,822. The District is under budget YTD by \$978,465.

Acute discharges were 221 for the month, over budget by 31 discharges or 16%. The ADC was 20.00 compared to a budget of 20.39. The ALOS was 2.81. The acute I/P gross revenue was over budget by **\$725,295** while O/P services gross revenue was **\$1.86 million** or 9% over budget. ER I/P visits were 177 and ER O/P visits were under budget by 114 visits or 6%. The RHCs & Specialty Clinics treated 4,644 (includes 763 visits at the Diabetes Clinic) and 2,782 visits respectively.

On June 30, 2022, Noridian Healthcare Solutions (Medicare Intermediary) informed the District that it estimated the District was over reimbursed by **\$5.158 million** for the FYE June 30, 2022. The Medicare Cost report is scheduled to be filed by October 31, 2022. It will provide the District with a more accurate due to from settlement.

This has a negative impact on the cash flow for FYE June 30, 2023 in two ways: 1) The District made a \$491,174.26 payment towards the settlement and will pay \$441,036.22 per month for the next 11 months. 2) Noridian has reduced the reimbursement I/P and O/P rates by approximately 20% and 13% respectively. The rates should increase in January 2023.

**Other Operating** revenue exceeded budget by **\$863,214** due to a \$600,000 accrual for the QIP for the period Jan. –Jun. 2021 and a Small Rural Hospital Improvement SHIP grant of \$258,376.

**Operating Expenses** exceeded budget by **\$521,172** due mainly to variances in: Salary and Wages being over by \$155,919 and Registry by of \$262,406.

**Non-operating Revenue** exceeded budget by **\$86,217** due to receiving a Sunlight Giving grant of \$75,000. The grant was used to purchase new exam tables for the RHCs.

The SNFs ADC was **89.65** for the month. The Net Surplus (**Loss**) is **\$118,392** compared to a budget of \$73,662. YTD, the SNFs are exceeding their budget by \$46,492. The ADC is budgeted to be 88 residents each month for the year.

The debt service ratio for the fiscal year ending June 30, 2023 is budgeted to exceed **1.25**, the days-cash-on-hand is budgeted to exceed **30.00** and the current ratio is budgeted to be less 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.

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HAZEL HAWKINS MEMORIAL HOSPITAL - COMBINED  
ROLLISTER, CA 95023  
FOR PERIOD 08/31/22

	CURRENT MONTH					YEAR-TO-DATE				
	ACTUAL 08/31/22	BUDGET 08/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/21	ACTUAL 08/31/22	BUDGET 08/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/21
<b>GROSS PATIENT REVENUE:</b>										
ACUTE ROUTINE REVENUE	4,645,914	4,315,902	332,012	8	3,879,755	8,595,921	8,101,805	494,116	6	7,311,792
SNF ROUTINE REVENUE	2,098,150	2,045,999	42,151	2	1,672,350	4,070,500	4,091,998	(21,498)	(1)	3,394,470
ANCILLARY INPATIENT REVENUE	5,856,332	5,496,022	360,310	7	5,194,845	10,961,254	10,342,948	618,306	6	9,942,758
HOSPITALIST/PEDS I/P REVENUE	209,559	218,338	(8,779)	(4)	208,437	408,669	410,031	(1,362)	(0)	376,939
<b>TOTAL GROSS INPATIENT REVENUE</b>	<b>12,799,556</b>	<b>12,078,261</b>	<b>725,295</b>	<b>6</b>	<b>10,955,387</b>	<b>24,036,364</b>	<b>22,946,792</b>	<b>1,089,572</b>	<b>5</b>	<b>21,015,958</b>
ANCILLARY OUTPATIENT REVENUE	23,435,712	21,578,147	1,857,565	9	22,047,996	44,629,779	41,386,059	3,243,719	8	42,729,842
HOSPITALIST/PEDS O/P REVENUE	59,145	60,855	(1,711)	(3)	63,194	132,342	116,718	15,624	13	108,832
<b>TOTAL GROSS OUTPATIENT REVENUE</b>	<b>23,494,856</b>	<b>21,639,002</b>	<b>1,855,854</b>	<b>9</b>	<b>22,111,190</b>	<b>44,762,120</b>	<b>41,502,777</b>	<b>3,259,343</b>	<b>8</b>	<b>42,838,674</b>
<b>TOTAL GROSS PATIENT REVENUE</b>	<b>36,294,412</b>	<b>33,717,263</b>	<b>2,581,149</b>	<b>8</b>	<b>33,066,578</b>	<b>68,798,483</b>	<b>64,449,569</b>	<b>4,348,914</b>	<b>7</b>	<b>63,854,632</b>
<b>DEDUCTIONS FROM REVENUE:</b>										
MEDICARE CONTRACTUAL ALLOWANCES	10,911,465	8,216,376	2,695,089	33	7,693,274	20,126,832	15,669,166	4,457,666	28	15,449,949
MEDI-CAL CONTRACTUAL ALLOWANCES	9,796,634	8,062,634	1,734,000	22	8,468,121	17,134,346	15,362,026	1,752,320	11	16,839,102
BAD DEBT EXPENSE	316,245	324,237	(7,992)	(3)	298,645	549,775	617,816	(68,041)	(11)	551,785
CHARITY CARE	35,989	73,974	(37,985)	(51)	61,932	71,596	140,953	(69,357)	(49)	155,955
OTHER CONTRACTUALS AND ADJUSTMENTS	3,023,796	3,994,176	(970,380)	(24)	4,701,741	7,134,535	7,621,251	(486,716)	(6)	7,860,093
HOSPITALIST/PEDS CONTRACTUAL ALLOW	25,569	8,865	16,704	188	(28,552)	55,844	16,894	38,950	231	(7,831)
<b>TOTAL DEDUCTIONS FROM REVENUE</b>	<b>24,109,699</b>	<b>20,680,262</b>	<b>3,429,437</b>	<b>17</b>	<b>21,195,161</b>	<b>45,072,928</b>	<b>39,448,106</b>	<b>5,624,822</b>	<b>14</b>	<b>40,949,053</b>
<b>NET PATIENT REVENUE</b>	<b>12,184,713</b>	<b>13,037,001</b>	<b>(848,288)</b>	<b>(7)</b>	<b>11,871,416</b>	<b>23,725,555</b>	<b>25,001,453</b>	<b>(1,275,898)</b>	<b>(5)</b>	<b>23,005,580</b>
OTHER OPERATING REVENUE	1,418,428	555,214	863,214	156	558,756	1,953,558	1,110,428	843,130	76	1,030,233
<b>NET OPERATING REVENUE</b>	<b>13,603,141</b>	<b>13,592,215</b>	<b>14,926</b>	<b>0</b>	<b>12,430,172</b>	<b>25,679,113</b>	<b>26,111,891</b>	<b>(432,778)</b>	<b>(2)</b>	<b>24,035,813</b>
<b>OPERATING EXPENSES:</b>										
SALARIES & WAGES	5,457,035	5,293,074	163,961	3	4,893,741	10,119,409	10,177,804	(58,395)	(1)	9,422,725
REGISTRY	609,686	310,000	299,686	97	297,641	1,190,710	620,000	570,710	92	624,378
EMPLOYEE BENEFITS	2,767,915	2,819,451	(51,536)	(2)	2,731,265	5,393,853	5,427,886	(32,033)	(1)	5,276,269
PROFESSIONAL FEES	1,574,223	1,651,706	(77,484)	(5)	1,482,358	2,941,189	3,303,412	(362,224)	(11)	2,879,571
SUPPLIES	1,269,836	1,240,469	29,367	2	1,149,361	2,520,485	2,343,417	177,068	6	2,209,496
PURCHASED SERVICES	1,287,362	1,109,631	177,731	16	993,700	2,499,557	2,219,262	280,295	13	1,944,663
RENTAL	165,255	150,188	15,067	10	137,026	328,066	300,376	27,690	9	274,551
DEPRECIATION & AMORT	320,887	327,001	(6,114)	(2)	336,876	634,714	654,000	(19,286)	(3)	662,654
INTEREST	2,780	3,750	(970)	(26)	280	12,656	7,500	5,156	69	1,555
OTHER	432,437	389,482	42,955	11	339,646	890,251	802,232	88,019	11	683,565
<b>TOTAL EXPENSES</b>	<b>13,867,415</b>	<b>13,294,752</b>	<b>592,663</b>	<b>5</b>	<b>12,357,093</b>	<b>26,532,989</b>	<b>25,855,869</b>	<b>677,000</b>	<b>3</b>	<b>23,979,427</b>
<b>NET OPERATING INCOME (LOSS)</b>	<b>(264,274)</b>	<b>293,463</b>	<b>(577,737)</b>	<b>(197)</b>	<b>73,079</b>	<b>(853,776)</b>	<b>255,992</b>	<b>(1,109,766)</b>	<b>(434)</b>	<b>56,385</b>

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HAZEL HAWKINS MEMORIAL HOSPITAL - COMBINED  
 HOLLISTER, CA 95023  
 FOR PERIOD 08/31/22

	-----CURRENT MONTH-----					-----YEAR-TO-DATE-----				
	ACTUAL 08/31/22	BUDGET 08/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/21	ACTUAL 08/31/22	BUDGET 08/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/21
NON-OPERATING REVENUE\EXPENSE:										
DONATIONS	89,759	5,000	84,759	1,695	2,893	129,342	10,000	119,342	1,193	6,570
PROPERTY TAX REVENUE	195,915	194,511	1,404	1	185,249	391,830	389,022	2,808	1	370,498
GO BOND PROP TAXES	164,964	164,964	0	0	160,091	329,928	329,928	0	0	320,181
GO BOND INT REVENUE\EXPENSE	(72,048)	(72,048)	1	0	(75,091)	(144,095)	(144,096)	1	0	(150,181)
OTHER NON-OPER REVENUE	9,241	7,866	1,375	18	7,875	28,365	15,732	12,633	80	15,750
OTHER NON-OPER EXPENSE	(37,700)	(36,378)	(1,322)	4	(47,283)	(76,485)	(72,756)	(3,729)	5	(94,566)
INVESTMENT INCOME	0	0	0	0	(517)	246	0	246		2,427
COLLABORATION CONTRIBUTIONS	0	0	0	0	0	0	0	0	0	0
TOTAL NON-OPERATING REVENUE/(EXPENSE)	350,132	263,915	86,217	33	233,217	659,133	527,830	131,303	25	470,678
NET SURPLUS (LOSS)	65,858	557,378	(491,520)	(88)	306,296	(194,643)	783,822	(978,465)	(125)	527,063
EBIDA	\$ 331,529	\$ 827,841	\$ (496,313)	(59.95)%	\$ 605,455	\$ 330,722	\$ 1,324,746	\$ (994,024)	(75.03)%	\$ 1,114,283
EBIDA MARGIN	2.44%	6.09%	(3.66)%	(59.99)%	4.87%	1.29%	5.07%	(3.79)%	(74.61)%	4.64%
OPERATING MARGIN	(2.09)%	2.16%	(4.25)%	(196.75)%	0.59%	(3.32)%	0.98%	(4.31)%	(439.11)%	0.23%
NET SURPLUS (LOSS) MARGIN	0.48%	4.10%	(3.62)%	(88.19)%	2.46%	(0.76)%	3.00%	(3.76)%	(125.24)%	2.19%

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HAZEL HAWKINS MEMORIAL HOSPITAL - ACUTE FACILITY  
 HOLLISTER, CA 95023  
 FOR PERIOD 08/31/22

	CURRENT MONTH					YEAR-TO-DATE				
	ACTUAL 08/31/22	BUDGET 08/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/21	ACTUAL 08/31/22	BUDGET 08/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/21
GROSS PATIENT REVENUE:										
ROUTINE REVENUE	4,645,914	4,313,902	332,012	8	3,879,755	8,595,921	8,101,805	494,116	6	7,311,722
ANCILLARY INPATIENT REVENUE	5,322,855	5,255,624	67,231	1	4,865,210	10,161,516	9,862,152	299,364	3	9,316,336
HOSPITALIST O/P REVENUE	209,159	218,338	(9,179)	(4)	208,437	409,689	410,032	(2,342)	0	376,939
TOTAL GROSS INPATIENT REVENUE	10,177,929	9,787,864	390,065	4	8,953,402	19,166,126	18,373,988	792,138	4	17,007,066
ANCILLARY OUTPATIENT REVENUE	23,435,712	21,578,147	1,857,565	9	22,047,996	44,629,778	41,366,059	3,263,719	8	42,729,842
HOSPITALIST O/P REVENUE	59,145	60,855	(1,710)	(3)	65,194	132,342	116,718	15,624	13	108,832
TOTAL GROSS OUTPATIENT REVENUE	23,494,857	21,639,002	1,855,855	9	22,113,190	44,762,120	41,502,777	3,259,343	8	42,838,674
TOTAL GROSS ACUTE PATIENT REVENUE	33,672,785	31,426,866	2,245,919	7	31,066,592	63,928,245	59,876,765	4,051,480	7	59,845,740
DEDUCTIONS FROM REVENUE ACUTE:										
MEDICARE CONTRACTUAL ALLOWANCES	10,599,398	8,044,912	2,554,476	22	7,498,927	19,657,578	15,326,238	4,331,340	29	15,056,799
MEDI-CAL CONTRACTUAL ALLOWANCES	9,638,423	7,903,992	1,734,431	22	8,480,033	16,824,440	15,069,742	1,754,698	12	16,909,625
BAD DEBT EXPENSE	268,223	324,237	(56,015)	(11)	288,797	512,815	617,616	(105,001)	(17)	542,156
CHARITY CARE	35,989	73,974	(37,985)	(51)	61,336	71,596	140,953	(69,357)	(49)	155,359
OTHER CONTRACTUALS AND ADJUSTMENTS	2,925,303	3,948,448	(1,023,145)	(26)	4,668,710	6,966,049	7,529,795	(563,746)	(8)	7,819,310
HOSPITALIST/PEDS CONTRACTUAL ALLOW	25,569	8,865	16,704	188	(28,552)	55,844	16,894	38,950	231	(7,831)
TOTAL ACUTE DEDUCTIONS FROM REVENUE	23,512,895	20,304,429	3,208,467	16	20,969,250	44,118,321	38,696,438	5,421,883	14	40,374,420
NET ACUTE PATIENT REVENUE	10,159,890	11,122,438	(962,548)	(9)	10,097,342	19,809,924	21,180,327	(1,370,403)	(7)	19,471,320
OTHER OPERATING REVENUE	1,418,428	555,214	863,214	156	558,756	1,953,558	1,110,428	843,130	76	1,030,233
NET ACUTE OPERATING REVENUE	11,578,318	11,677,652	(99,334)	(1)	10,656,098	21,763,482	22,290,755	(527,273)	(2)	20,501,554
OPERATING EXPENSES:										
SALARIES & WAGES	4,466,719	4,310,600	156,119	4	3,975,355	8,223,306	8,213,257	10,049	0	7,586,285
REGISTRY	562,406	300,000	262,406	88	275,416	1,115,830	600,000	515,830	86	590,563
EMPLOYEE BENEFITS	2,183,059	2,227,726	(44,667)	(2)	2,168,641	4,257,664	4,244,409	13,255	0	4,194,088
PROFESSIONAL FEES	1,572,013	1,649,388	(77,375)	(5)	1,480,318	2,936,259	3,298,776	(362,518)	(11)	2,875,491
SUPPLIES	1,164,499	1,126,994	37,505	3	1,059,697	2,316,675	2,116,466	200,209	10	2,028,155
PURCHASED SERVICES	1,181,462	1,044,660	136,802	13	927,851	2,286,204	2,089,320	196,884	9	1,819,482
RENTAL	164,236	149,373	14,863	10	133,750	326,051	298,746	27,305	9	270,366
DEPRECIATION & AMORT	280,333	284,998	(4,665)	(2)	296,801	554,981	569,996	(15,015)	(3)	582,388
INTEREST	2,780	3,750	(970)	(26)	280	12,658	7,500	5,158	69	1,555
OTHER	382,434	341,079	41,356	12	298,753	739,316	705,424	33,892	5	598,465
TOTAL EXPENSES	11,959,939	11,438,767	521,172	5	10,616,862	22,768,960	22,143,894	625,066	3	20,546,778
NET OPERATING INCOME (LOSS)	(381,622)	238,985	(620,607)	(260)	37,236	(1,005,479)	146,861	(1,152,339)	(78)	(45,224)

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HAZEL HAWKINS MEMORIAL HOSPITAL - ACUTE FACILITY  
 HOLLISTER, CA 95023  
 FOR PERIOD 08/31/22

	-----CURRENT MONTH-----					-----YEAR-TO-DATE-----				
	ACTUAL 08/31/22	BUDGET 08/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/21	ACTUAL 08/31/22	BUDGET 08/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/21
NON-OPERATING REVENUE\EXPENSE:										
DONATIONS	89,759	5,000	84,759	1,695	2,893	129,342	10,000	119,342	1,193	6,570
PROPERTY TAX REVENUE	166,528	167,085	(557)	0	159,183	333,056	334,170	(1,114)	0	318,366
GO BOND PROP TAXES	164,964	164,964	0	0	160,091	329,928	329,928	0	0	320,181
GO BOND INT REVENUE\EXPENSE	(72,048)	(72,048)	1	0	(75,091)	(144,095)	(144,096)	1	0	(150,181)
OTHER NON-OPER REVENUE	9,241	7,866	1,375	18	7,875	28,365	15,732	12,633	80	15,750
OTHER NON-OPER EXPENSE	(29,357)	(28,035)	(1,322)	5	(36,907)	(59,799)	(56,070)	(3,729)	7	(73,815)
INVESTMENT INCOME	0	0	0	0	(517)	246	0	246		2,427
COLLABORATION CONTRIBUTIONS	0	0	0	0	0	0	0	0	0	0
TOTAL NON-OPERATING REVENUE/(EXPENSE)	329,088	244,832	84,256	34	217,527	617,044	489,664	127,380	26	439,297
NET SURPLUS (LOSS)	(52,534)	483,717	(536,251)	(111)	254,762	(388,434)	636,525	(1,024,959)	(161)	394,073

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HAZEL HAWKINS SKILLED NURSING FACILITIES  
 HOLLISTER, CA  
 FOR PERIOD 08/31/22

	CURRENT MONTH					YEAR-TO-DATE				
	ACTUAL 08/31/22	BUDGET 08/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/21	ACTUAL 08/31/22	BUDGET 08/31/22	POS/NEG VARIANCE	PERCENT VARIANCE	PRIOR YR 08/31/21
GROSS SNF PATIENT REVENUE:										
ROUTINE SNF REVENUE	2,088,150	2,045,999	42,151	2	1,672,350	4,070,500	4,091,999	(21,499)	(1)	3,384,470
ANCILLARY SNF REVENUE	533,477	240,398	293,079	122	329,635	799,738	480,796	318,942	66	624,422
TOTAL GROSS SNF PATIENT REVENUE	<u>2,621,627</u>	<u>2,286,397</u>	<u>335,230</u>	<u>15</u>	<u>2,001,985</u>	<u>4,870,238</u>	<u>4,572,794</u>	<u>297,444</u>	<u>7</u>	<u>4,008,892</u>
DEDUCTIONS FROM REVENUE SNF:										
MEDICARE CONTRACTUAL ALLOWANCES	312,077	171,464	140,613	82	124,347	439,254	342,928	96,326	29	393,150
MEDI-CAL CONTRACTUAL ALLOWANCES	158,211	158,642	(431)	0	(11,912)	309,907	317,284	(7,377)	(2)	30,477
BAD DEBT EXPENSE	28,023	0	28,023		9,848	36,960	0	36,960		9,627
CHARITY CARE	0	0	0	0	596	0	0	0	0	596
OTHER CONTRACTUALS AND ADJUSTMENTS	98,493	45,728	52,765	115	33,032	168,496	91,456	77,030	84	40,783
TOTAL SNF DEDUCTIONS FROM REVENUE	<u>596,803</u>	<u>375,834</u>	<u>220,969</u>	<u>59</u>	<u>225,911</u>	<u>954,607</u>	<u>751,668</u>	<u>202,939</u>	<u>27</u>	<u>474,633</u>
NET SNF PATIENT REVENUE	<u>2,024,823</u>	<u>1,910,563</u>	<u>114,260</u>	<u>6</u>	<u>1,776,074</u>	<u>3,915,631</u>	<u>3,821,126</u>	<u>94,505</u>	<u>3</u>	<u>3,534,259</u>
OTHER OPERATING REVENUE	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
NET SNF OPERATING REVENUE	<u>2,024,823</u>	<u>1,910,563</u>	<u>114,260</u>	<u>6</u>	<u>1,776,074</u>	<u>3,915,631</u>	<u>3,821,126</u>	<u>94,505</u>	<u>3</u>	<u>3,534,259</u>
OPERATING EXPENSES:										
SALARIES & WAGES	990,316	982,274	8,042	1	918,367	1,896,104	1,964,547	(68,444)	(4)	1,836,400
REGISTRY	47,280	10,000	37,280	373	22,425	74,880	29,000	54,880	274	33,815
EMPLOYEE BENEFITS	564,857	591,725	(26,868)	(1)	562,624	1,138,189	1,193,477	(55,288)	(4)	1,062,181
PROFESSIONAL FEES	2,210	2,318	(108)	(5)	2,040	4,930	4,636	294	6	4,080
SUPPLIES	105,337	113,475	(8,138)	(7)	89,663	203,810	226,951	(23,141)	(10)	161,341
PURCHASED SERVICES	105,900	64,971	40,929	63	60,849	213,253	129,942	83,311	64	125,181
RENTAL	1,018	814	204	25	3,276	2,015	1,628	387	24	4,246
DEPRECIATION	40,555	42,003	(1,449)	(3)	40,376	79,733	84,004	(4,271)	(5)	80,266
INTEREST	0	0	0	0	0	0	0	0	0	0
OTHER	50,003	48,404	1,599	3	40,893	150,915	46,808	54,107	56	65,100
TOTAL EXPENSES	<u>1,927,476</u>	<u>1,855,984</u>	<u>71,492</u>	<u>4</u>	<u>1,740,231</u>	<u>3,763,929</u>	<u>3,711,993</u>	<u>51,936</u>	<u>1</u>	<u>3,432,649</u>
NET OPERATING INCOME (LOSS)	<u>97,347</u>	<u>54,579</u>	<u>42,768</u>	<u>78</u>	<u>35,843</u>	<u>151,703</u>	<u>109,133</u>	<u>42,570</u>	<u>39</u>	<u>101,610</u>
NON-OPERATING REVENUE/(EXPENSE):										
DONATIONS	0	0	0	0	0	0	0	0	0	0
PROPERTY TAX REVENUE	29,387	27,426	1,961	7	26,066	58,774	54,852	3,922	7	52,132
OTHER NON-OPER EXPENSE	(8,343)	(8,343)	0	0	(10,376)	(16,685)	(16,686)	1	0	(20,751)
TOTAL NON-OPERATING REVENUE/(EXPENSE)	<u>21,044</u>	<u>19,083</u>	<u>1,961</u>	<u>10</u>	<u>15,690</u>	<u>42,089</u>	<u>38,166</u>	<u>3,923</u>	<u>10</u>	<u>31,381</u>
NET SURPLUS (LOSS)	<u>118,392</u>	<u>73,662</u>	<u>44,730</u>	<u>61</u>	<u>51,533</u>	<u>193,791</u>	<u>147,299</u>	<u>46,492</u>	<u>32</u>	<u>132,990</u>

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Description	Target	MTD Actual	YTD Actual	YTD Target
Average Daily Census - Acute	20.39	20.00	19.13	19.13
Average Daily Census - SNF	88.00	89.65	87.37	88.00
Acute Length of Stay	3.33	2.81	2.67	3.06
<b>ER Visits:</b>				
Inpatient	145	177	363	296
Outpatient	2,051	1,937	3,689	3,919
Total	2,196	2,114	4,052	4,215
Days in Accounts Receivable	45.0	44.1	44.1	45.0
Productive Full-Time Equivalents	529.11	527.75	521.60	529.11
Net Patient Revenue	13,033,001	12,184,713	23,725,555	25,001,453
Payment-to-Charge Ratio	38.9%	33.6%	34.9%	38.9%
Medicare Traditional Payor Mix	30.02%	33.44%	32.13%	29.97%
Commercial Payor Mix	24.39%	18.27%	21.24%	24.33%
Bad Debt % of Gross Revenue	0.96%	0.88%	0.81%	0.96%
EBIDA	827,841	331,529	330,722	1,324,746
EBIDA %	6.09%	2.44%	1.29%	5.07%
Operating Margin	2.16%	2.09%	3.32%	0.98%
Salaries, Wages, Registry & Benefits %: by Net Operating Revenue	61.98%	64.95%	65.06%	62.14%
by Total Operating Expense	63.35%	63.62%	62.96%	62.75%
<b>Bond Covenants:</b>				
Debt Service Ratio	1.25	1.89	1.89	1.25
Current Ratio	1.50	1.83	1.83	1.50
Days Cash on hand	30.00	30.5	30.5	30.00
Met or Exceeded Target				
Within 10% of Target				
Not Within 10%				

**Statement of Cash Flows**

**Hazel Hawkins Memorial Hospital  
Hollister, CA  
Two months ending August 31, 2022**

	CASH FLOW		COMMENTS
	Current Month 8/31/2022	Current Year-To-Date 8/31/2022	
<b>CASH FLOWS FROM OPERATING ACTIVITIES:</b>			
Net Income (Loss)	\$65,858	(\$194,643)	
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities:			
Depreciation	335,488	662,608	
(Increase)/Decrease in Net Patient Accounts Receivable	(502,079)	(180,719)	
(Increase)/Decrease in Other Receivables	(1,360,955)	(1,473,974)	
(Increase)/Decrease in Inventories	1,092	(33,624)	
(Increase)/Decrease in Pre-Paid Expenses	(3,693)	(269,655)	
(Increase)/Decrease in Due From Third Parties	11,855	11,855	
Increase/(Decrease) in Accounts Payable	232,539	(813,838)	
Increase/(Decrease) in Notes and Loans Payable	0	0	
Increase/(Decrease) in Accrued Payroll and Benefits	957,900	992,246	
Increase/(Decrease) in Accrued Expenses	7,038	426	
Increase/(Decrease) in Patient Refunds Payable	1,360	(7,197)	
Increase/(Decrease) in Third Party Advances/Liabilities	(559,004)	(1,536,903)	
Increase/(Decrease) in Other Current Liabilities	110,550	179,756	Semi-Annual Interest - 2021 Insured Revenue Bonds
<b>Net Cash Provided by Operating Activities:</b>	<b>(767,909)</b>	<b>(2,469,019)</b>	
<b>CASH FLOWS FROM INVESTING ACTIVITIES:</b>			
Purchase of Property, Plant and Equipment	(218,155)	(577,681)	
(Increase)/Decrease in Limited Use Cash and Investments	0	0	
(Increase)/Decrease in Other Limited Use Assets	(250,052)	(499,387)	Bond Principal & Int Payment - 2014 & 2021 Bonds
(Increase)/Decrease in Other Assets	6,223	12,446	Amortization
<b>Net Cash Used by Investing Activities</b>	<b>(461,984)</b>	<b>(1,064,622)</b>	
<b>CASH FLOWS FROM FINANCING ACTIVITIES:</b>			
Increase/(Decrease) in Bond/Mortgage Debt	(6,525)	(10,922)	Refinancing of 2013 Bonds with 2021 Bonds
Increase/(Decrease) in Capital Lease Debt	(28,520)	(56,770)	
Increase/(Decrease) in Other Long Term Liabilities	0	0	
<b>Net Cash Used for Financing Activities</b>	<b>(35,045)</b>	<b>(67,692)</b>	
(INCREASE)/DECREASE IN RESTRICTED ASSETS	0	0	
<b>Net Increase/(Decrease) in Cash</b>	<b>(1,199,080)</b>	<b>(3,795,976)</b>	
Cash, Beginning of Period	13,956,785	16,553,681	
<b>Cash, End of Period</b>	<b>\$12,757,705</b>	<b>\$12,757,705</b>	\$0

Cost per day to run the District	\$417,713
Operational Days Cash on Hand	30.54

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Hazel Hawkins Memorial Hospital  
 Bad Debt Expense  
 For the Year Ending June 30, 2023

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total	
Budgeted Gross Revenue	30,736,294	33,713,261	33,688,496	34,057,045	33,125,250	36,331,595	36,576,317	31,661,878	36,697,195	30,954,767	31,443,265	30,602,610	399,587,973	
Budgeted Bad Debt Expense	293,579	324,237	324,633	327,729	318,825	351,198	353,536	305,275	355,128	296,590	300,820	293,015	3,844,565	
BD Exp as a percent of Gross Revenue	0.96%	0.96%	0.96%	0.96%	0.96%	0.97%	0.97%	0.96%	0.97%	0.96%	0.96%	0.96%	0.96%	
Actual Gross Revenue	32,232,911	36,024,541	-	-	-	-	-	-	-	-	-	-	68,257,452	
Actual Bad Debt Expense	233,530	316,245	-	-	-	-	-	-	-	-	-	-	549,775	
BD Exp as a percent of Gross Revenue	0.72%	0.88%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0.81%	
Budgeted YTD BD Exp	617,816	0.96%												
Actual YTD BD Exp	549,775	0.81%												
Amount under (over) budget	68,041	0.15%												
Prior Year percent of Gross Revenue	0.92%													
Percent of Decrease (Inc) from Prior Year	12.5%													
													YTD Charity Exp Budget	140,953
													YTD Charity Exp Actual	71,596
													Amt under (over) budget	69,357
													Charity Exp % of Gross Rev	0.10%

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