



San Mateo Medical Center

A County System of Healthcare

BOARD OF DIRECTORS MEETING

Thursday, May 4, 2017

8:00 AM – 10:00 AM

SAN MATEO MEDICAL CENTER

EXECUTIVE BOARD ROOM

Second Floor, Administration Wing



San Mateo Medical Center
A County System of Healthcare

BOARD OF DIRECTORS MEETING

May 4, 2017 8:00 – 10:00 AM

Executive Board Room – Second Floor, Administration Wing

AGENDA

A. CALL TO ORDER

B. CLOSED SESSION

Items Requiring Action

1. Medical Staff Credentialing Report
2. Quality Report

Dr. Janet Chaikind

Dr. Julie Hersk

Informational Items

3. Medical Executive Committee

Dr. Janet Chaikind

C. REPORT OUT OF CLOSED SESSION

D. PUBLIC COMMENT

Persons wishing to address items not on the agenda

E. FOUNDATION REPORT

Leslie Williams-Hurt

F. CONSENT AGENDA

TAB 1

Approval of:

1. April 6, 2017 Meeting Minutes

G. MEDICAL STAFF REPORT

Chief of Staff Update

Dr. Janet Chaikind

H. ADMINISTRATION REPORTS

- 1. Compliance
- 2. 1A and BLTC: Skilled Nursing
- 3. Skilled Nursing Facility Disaster Planning
- 4. Financial Report
- 5. CEO Report

Dr. CJ Kunnappilly..... Verbal
Joan Spicer Verbal
Louise Rogers Verbal
David McGrew..... TAB 2
Dr. CJ Kunnappilly..... TAB 2

I. HEALTH SYSTEM CHIEF REPORT

Health System Snapshot

Louise Rogers..... TAB 2

J. COUNTY MANAGER’S REPORT

John Maltbie

K. BOARD OF SUPERVISOR’S REPORT

Supervisor Carole Groom

L. ADJOURNMENT

Meetings are accessible to people with disabilities. Individuals who need special assistance or a disability-related modification or accommodation (including auxiliary aids or services) to participate in this meeting, or who have a disability and wish to request an alternative format for the agenda, meeting notice, agenda packet or other writings that may be distributed at the meeting, should contact Michelle Lee, Executive Secretary, at least 48 hours before the meeting at (650) 573-2222 and/or mlee@smcgov.org. Notification in advance of the meeting will enable the County to make reasonable arrangements to ensure accessibility to this meeting and the materials related to it. Attendees to this meeting are reminded that other attendees may be sensitive to various chemical based products.



San Mateo Medical Center
A County System of Healthcare

TAB 1

CONSENT AGENDA

HOSPITAL BOARD OF DIRECTORS
MEETING MINUTES
Thursday, April 6, 2017
Executive Board Room

Board Members Present

Supervisor Carole Groom
Supervisor David Canepa
John Maltbie
Louise Rogers
Dr. CJ Kunnappilly
Dr. Janet Chaikind
Dr. Julie Hersk
Deborah Torres

Staff Present

David McGrew
Joan Spicer
Dr. Susan Fernyak
Dr. Alpa Sanghavi
Dr. Serena Lee
Dr. Tricia Tamaya
Glenn Levy

Michelle Lee
Priscilla Romero
Karen Pugh
John Thomas
Angela Gonzalez
Julie Griffiths
Chris Rodriguez

Members of the Public

ITEM	DISCUSSION/RECOMMENDATION	ACTION
Call to Order	Supervisor Groom called the meeting to order at 8:00 AM, and the Board adjourned to Closed Session.	
Reconvene to Open Session	The meeting was reconvened at 8:25 AM to Open Session. A quorum was present (see above).	
Report out of Closed Session	Medical Staff Credentialing Report for April 6, 2017. Medical Executive Committee Minutes from March 14, 2017. QIC Minutes from February 28, 2017.	Glenn Levy reported that the Board unanimously approved the Credentialing Report and the QIC Minutes and accepted the MEC Minutes.
Public Comment	None.	
Foundation Report Leslie Williams-Hurt	No report.	FYI
Consent Agenda	Approval of: 1. Hospital Board Meeting Minutes from March 2, 2017.	It was MOVED, SECONDED and CARRIED unanimously to approve all items on the Consent Agenda.
Medical Staff Report Dr. Janet Chaikind	Dr. Chaikind reported that after discussions with medical staff, surgery for pediatric patients under six will not be performed except in emergency situations. The 2017 Annual Medical Staff meeting will be held on June 1.	FYI

<p>Emergency Department Dr. Serena Lee Medical Director</p>	<p>Dr. Serena Lee presented with Julie Griffiths, Nurse Manager.</p> <p>Provider Team consists of physicians, physician assistants and nurse practitioner, and scribes. Nursing Team consists of RN's, HUC's, and MSA's.</p> <p>ED Flow and Throughput</p> <ul style="list-style-type: none"> • Volume in the ED in 2016 was 40,987 and has decreased steadily from 2012 which saw 42,560 visits • The months with the highest numbers are generally January-March. • Median ED Greet to Discharge for the past three months was 133. The goal is less than 157. • Median ED Greet to Admission for the past three months was 352. The goal is less than 344. <p>Quality Measures:</p> <ul style="list-style-type: none"> • Sepsis screening accuracy rate at Triage for the past three quarters were 97%, 99%, and 99%. <p>Patient Experience</p> <ul style="list-style-type: none"> • Most recent Press Ganey scores (March 2017) were the highest since the ED started measuring at 89.8. • P.E. projects: Patient in the Middle Group, Charge Nurse Rounding, and Team-up Discharge. <p>On the horizon</p> <ul style="list-style-type: none"> • Successes: <ul style="list-style-type: none"> ○ Triage Process ○ Charge Nurse Leadership ○ Team Huddles ○ Stable provider and site management team • Challenges: <ul style="list-style-type: none"> ○ ED Boarding (2AB, ICU, PES) • Current Performance Improvement Efforts: <ul style="list-style-type: none"> ○ Pediatric Simulations ○ Callback Program ○ Journal Club ○ Care Transitions 	<p>FYI</p>
<p>Keller Center for Family Violence Intervention Dr. Tricia Tamaya Medical Director</p>	<p>2016 At-a-Glance</p> <ul style="list-style-type: none"> • Served over 600 children and adults • Provided over 50 expert consultations • Led numerous committees and boards in San Mateo County for violence and abuse • Trained medical providers, first responders, and many others <p>Keller Center Staffing</p>	<p>FYI</p>

	<ul style="list-style-type: none"> • 1 Medical Director • 2 Nurse Practitioners/ Forensic Interviewers • 1 Program Coordinator • 2 Forensic Interviewers • 1 ED Nurse Manager • 2 Physician Consultants • 13 on-call Sexual Assault Nurse Examiners • On-call Pediatricians <p>Partnerships in San Mateo County</p> <ul style="list-style-type: none"> • Child and Family Services • All 18 Law Enforcement jurisdictions • District Attorney’s Office • Rape Trauma Services • Aging and Adult Services • Victim’s Services • Human Trafficking taskforce • Behavioral Health and Recovery Services • Crime Lab • San Mateo County Health Foundation • Community Overcoming Relationship Abuse • Local schools • Local hospitals 	
<p>Elder and Dependent Adult Protection Team</p>	<p>Presented by Shannon Morgan, Aging and Adult Services</p> <p>Elder Population</p> <ul style="list-style-type: none"> • 65+ population was at 14%, compared to the rest of California, which was only at 11% • 85+ population grew 51% faster than California as a whole from 2000 to 2010 • Retirement-aged population grew 50% faster than the rest of California between 2000 and 2010 <p>EDAPT is a multidisciplinary team dedicated to three objectives:</p> <ul style="list-style-type: none"> • Streamlining the investigation of elder and dependent adult financial abuse cases, • Coordinating supportive services to victims, • Raising awareness through: targeted outreach to the community/training for potential responders <p>Since the establishment of EDAPT, financial investigations have risen from 276 in FY13-14 to 514 in FY15-16. The number is expected to grow to 559 in FY16-17.</p>	<p>FYI</p>

	<p>EDAPT Outreach</p> <ul style="list-style-type: none"> • Over 150 training and outreach events have been conducted in San Mateo County. • Staff developed elder abuse awareness public service announcements for television and radio, and appeared in the press, including <i>San Mateo Daily Journal</i>, <i>Peninsula Voice</i>, <i>Telemundo</i> (Spanish), and <i>Chinese Journal</i> (Mandarin). • Winner of prestigious grant from AARP's BankSafe Initiative. 	
Financial Report David McGrew, CFO	The February FY16/17 financial report was included in the Board packet and David McGrew answered questions from the Board.	FYI
CEO Report Dr. CJ Kunnappilly, CEO	<p>Dr. Kunnappilly presented the CEO report which is included in the Board packet and answered questions from the Board.</p> <p>The Laboratory passed the Joint Commission survey with no findings.</p>	FYI
Health System Report Louise Rogers	<p>The Prevention and Recovery in Early Psychosis is a comprehensive specialty care program serving people who are experiencing or at risk of psychosis. A new report shows BHRS clients who participated in the program saw a reduction in hospital visits by almost half (30 to 17) and with fewer hospital days (285 to 178) in just one year.</p> <p>San Mateo County is the healthiest in California. After being ranked No. 1 for seven consecutive years, Marin County slipped to No. 2 behind San Mateo County in a new report released Tuesday. The rankings, done by the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute, compare counties on more than 30 factors that influence health including length of life, quality of life, health behaviors, access to health care, socioeconomic factors and physical environment.</p>	FYI
County Manager John Maltbie	Mid budget preparation are under way and the study session will be completed in mid-April. Capital improvements over five years will be approximately \$500 million and does not include IT projects which will be significant.	FYI
Board of Supervisors Supervisor Carole Groom	No report.	FYI

Supervisor Groom adjourned the meeting at 9:39 AM. The next Board meeting will be held on May 4, 2017.

Minutes recorded by:



Michelle Lee, Executive Secretary

Minutes approved by:



Dr. Chester Kunnappilly, Chief Executive Officer



San Mateo Medical Center
A County System of Healthcare

TAB 2

ADMINISTRATION REPORTS

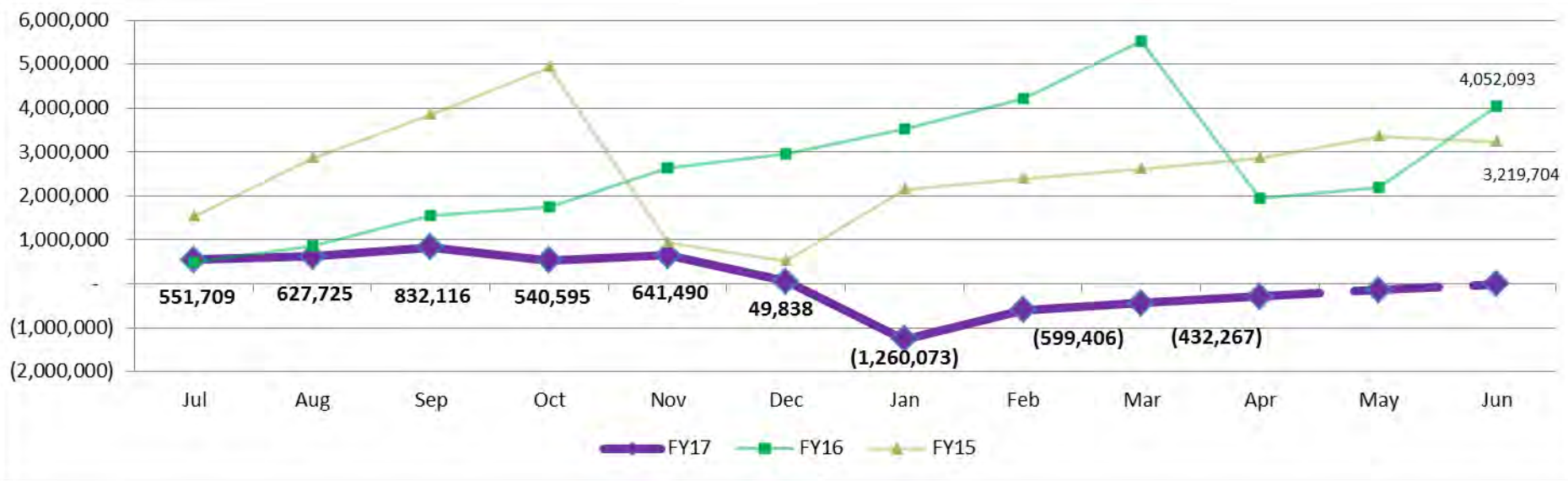


San Mateo Medical Center
A County System of Healthcare

March FY 2016-17 Financial Report

Board Meeting
May 4, 2017

Financial Highlights – Net Income Trend



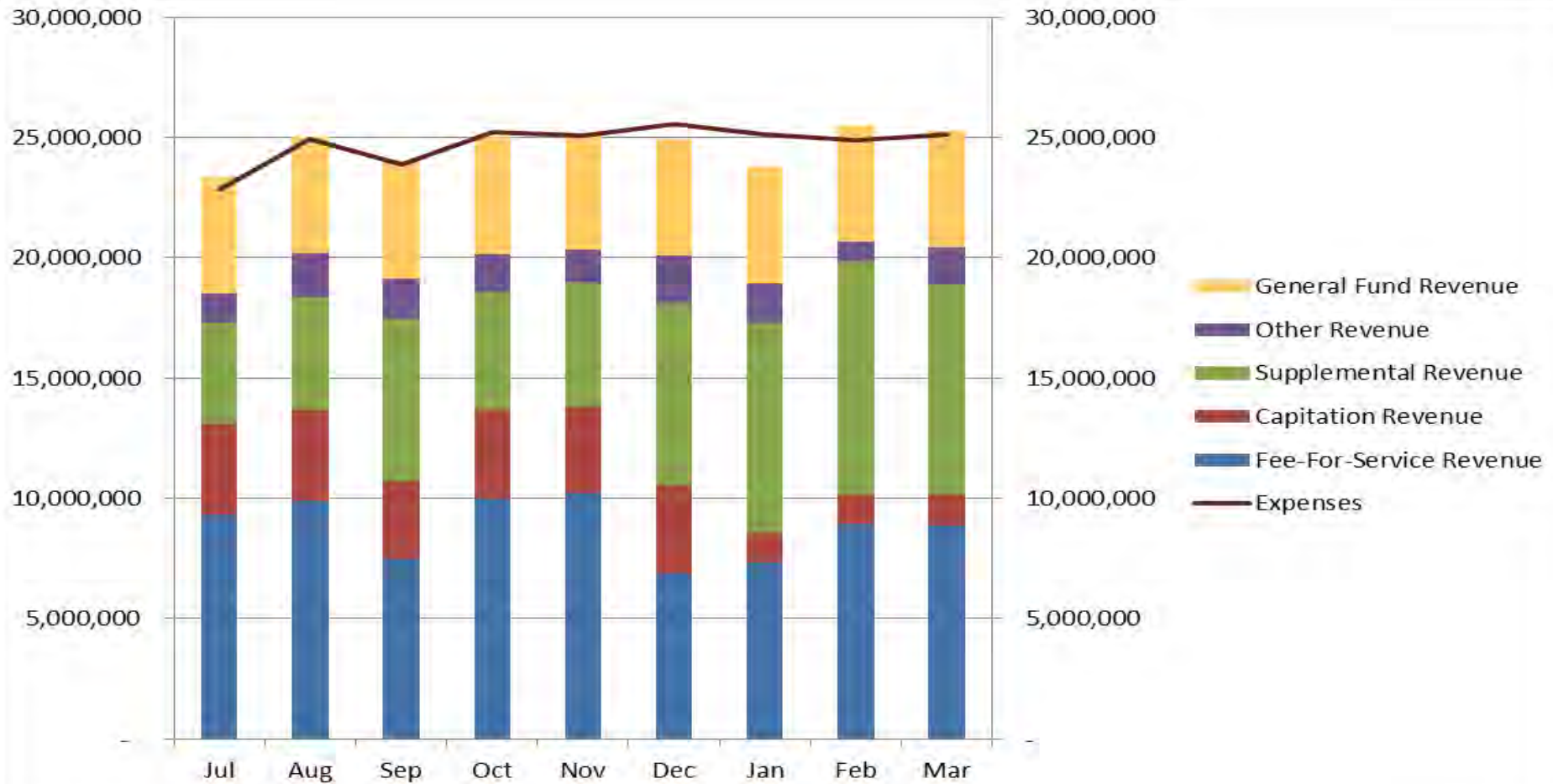
Financial Drivers:

- PRIME and GPP revenue
- Realignment

- Medical necessity
- Medi-Cal rates - Acute & SNF
- Drug prices and labor costs

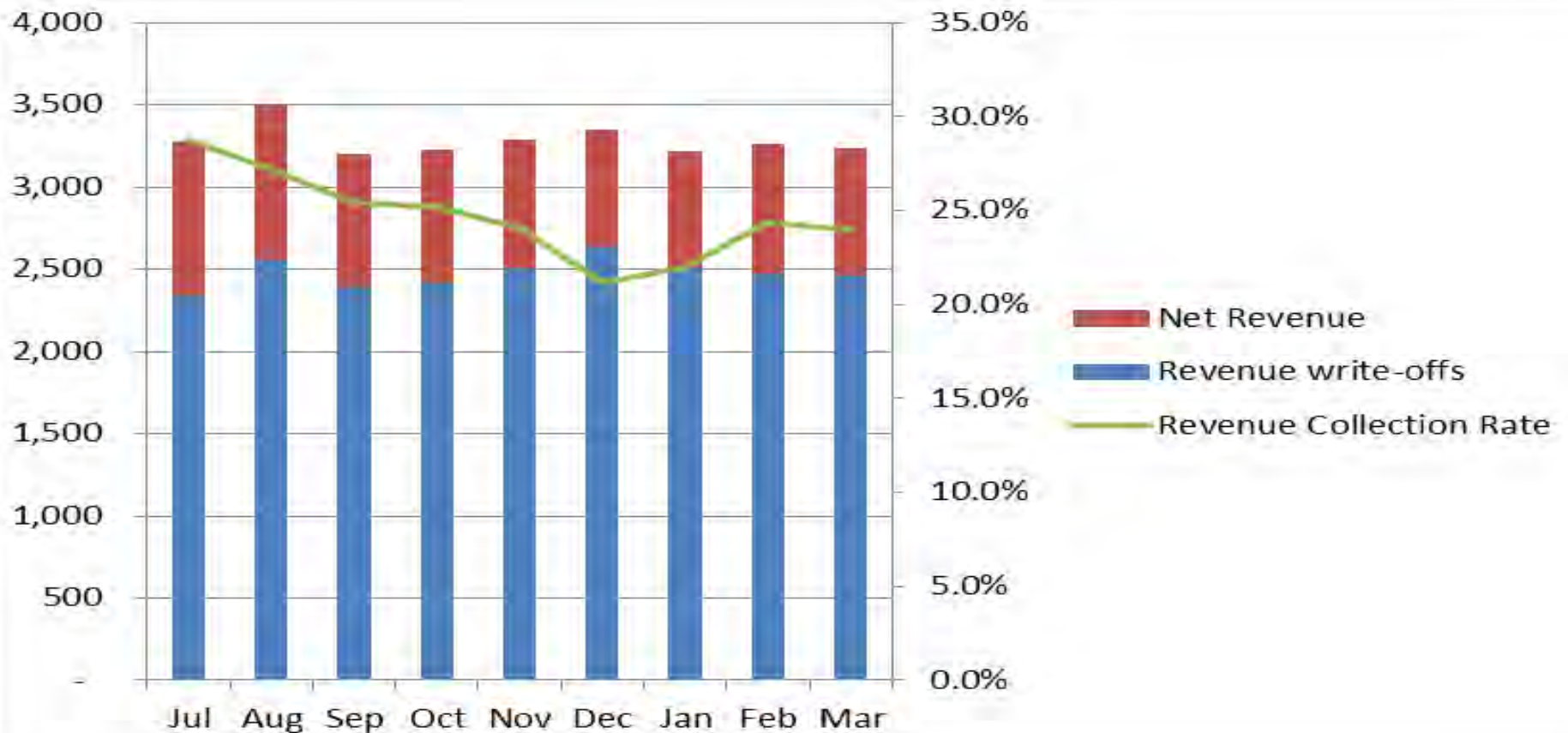
Full Year Forecast: Continued declines in Medi-Cal reimbursement, combined with high unreimbursable inpatient administrative days. This requires tapping into the financial reserves previously established for such risks and we expect to achieve a break-even bottom line at year-end.

Revenue & Expense Trend



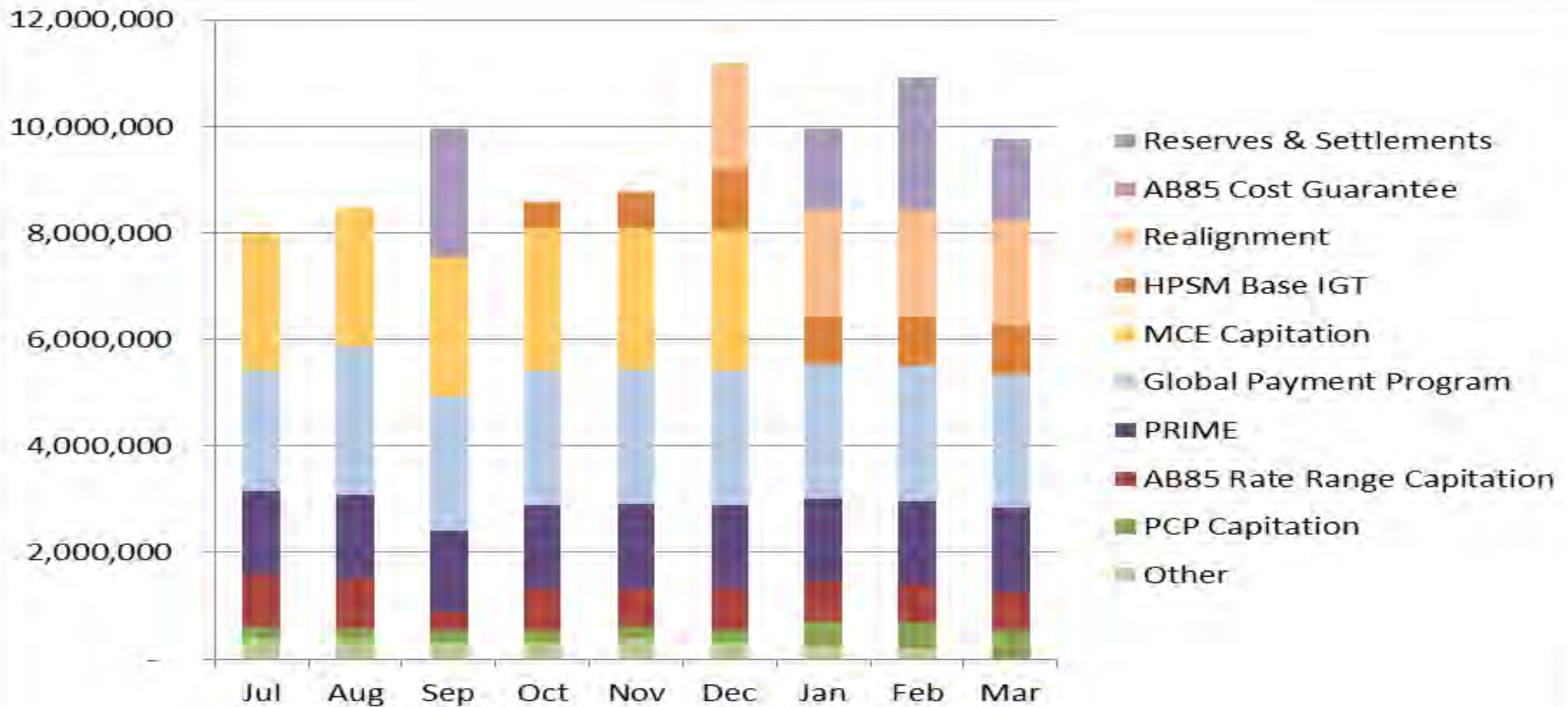
Financial performance has deteriorated due to decreasing fee-for-service revenue combined with increasing labor and medical costs. High census and high administrative days are the primary factor.

Revenue Collection Trend



The revenue collection rate has declined steadily due to high administrative days and lower Medi-Cal rates for acute medical-surgical patients and skilled nursing facility patients at SMMC and BLTC. February increased with HPSM FFS payments for MCE patients.

Supplemental & Capitation Revenue



The loss of MCE Capitation is being offset by projected increases in Realignment and HPSM Base IGT payments, which are designed to kick-in to partially cover uncompensated costs. The Cost Guarantee is pending State approval and is not yet included.

Financial Mitigation Plan

Immediate

- Position control - **Implemented**
- CareAdvantage rates – **May 1st**
- Medical necessity review – **In progress**
- Treatment auths – **RCT initiative**
- Insurance plan accuracy – **RCT initiative**

Mid-term

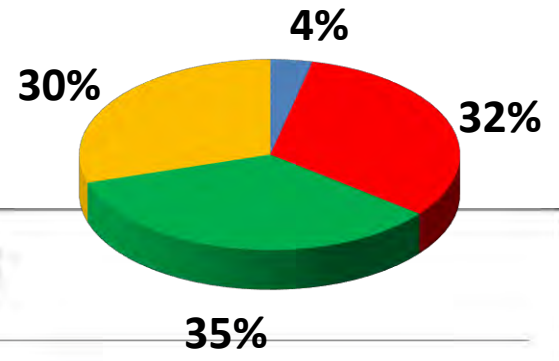
- Contract reviews – **Renewal reviews**
- MD enrollment denials – **In progress**
- Clinical denials – **Starting May 2017**
- Psych billing project - **In progress**
- Medi-Cal SNF rates – **Pending cost report**

Long-term

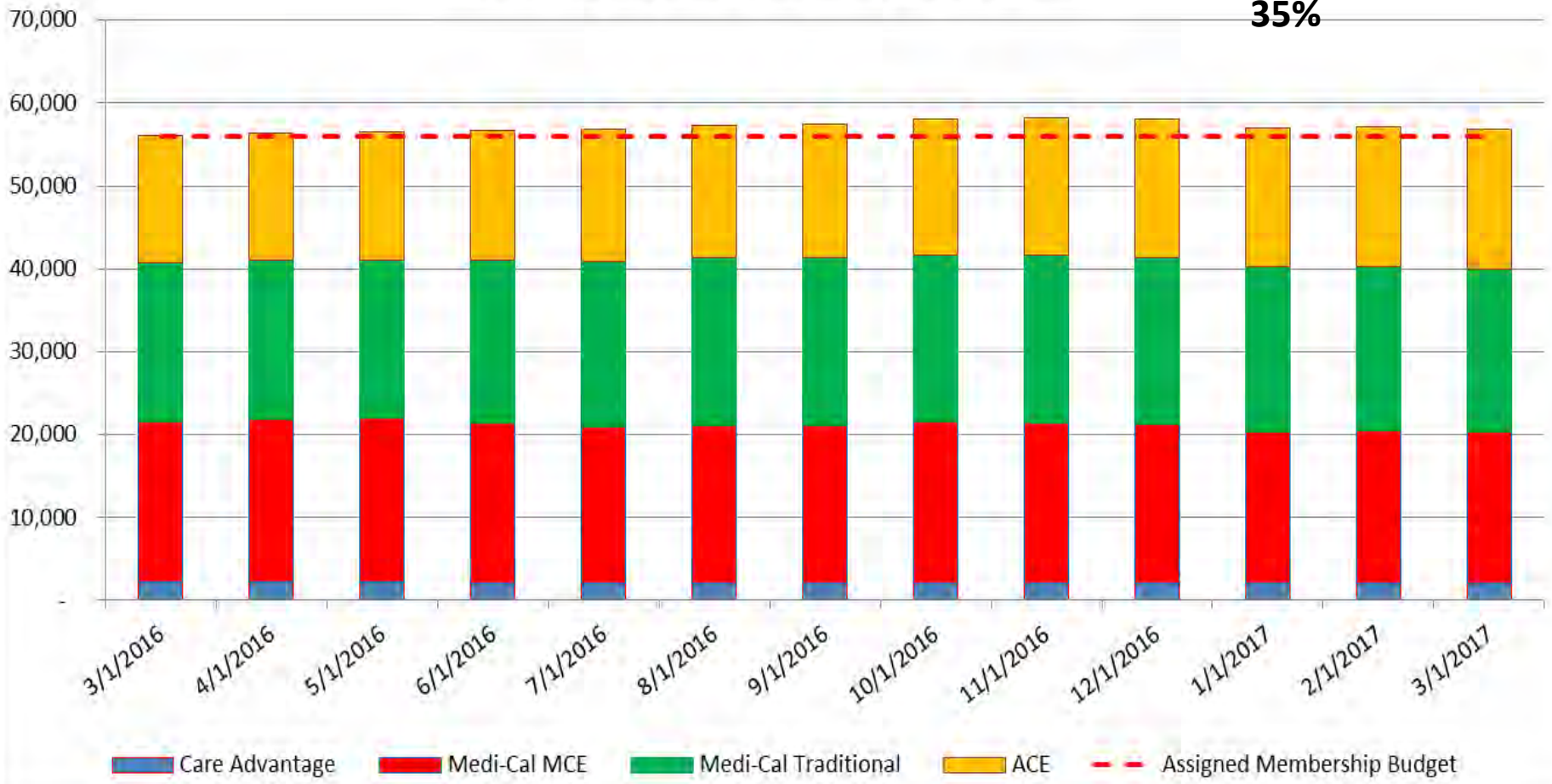
- CDI – **Starting June 2017**
- Invision system replacement – **FY17-19 budget. Planning in progress**

PATIENT VOLUME

57,000
Managed
Care Lives



Managed Care Membership Trend

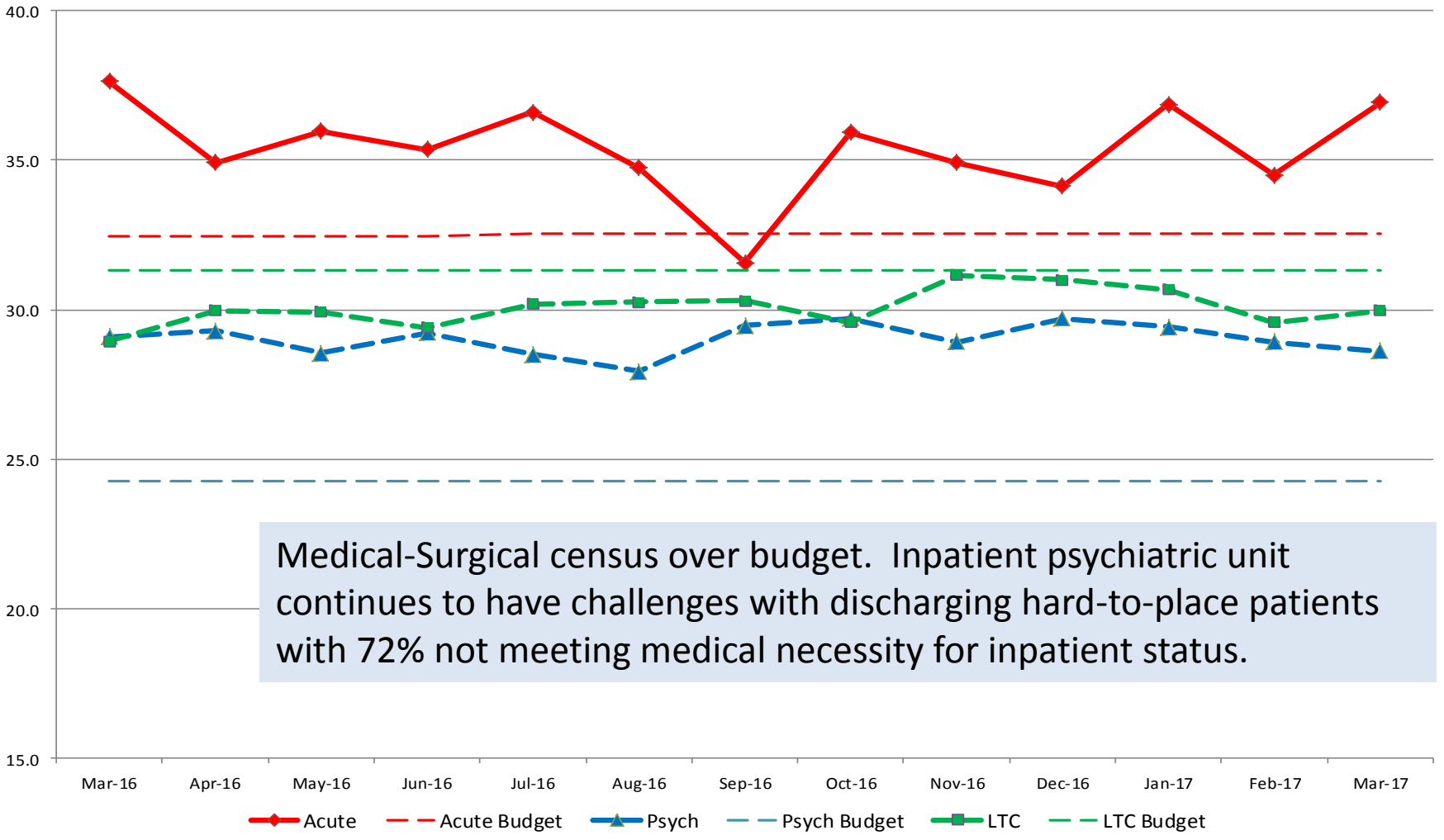


**San Mateo Medical Center
Inpatient Census
March 31, 2017**

MONTH			
Actual	Budget	Variance	Stoplight
2,961	2,701	260	10%

YEAR TO DATE			
Actual	Budget	Variance	Stoplight
25,890	23,873	2,017	8%

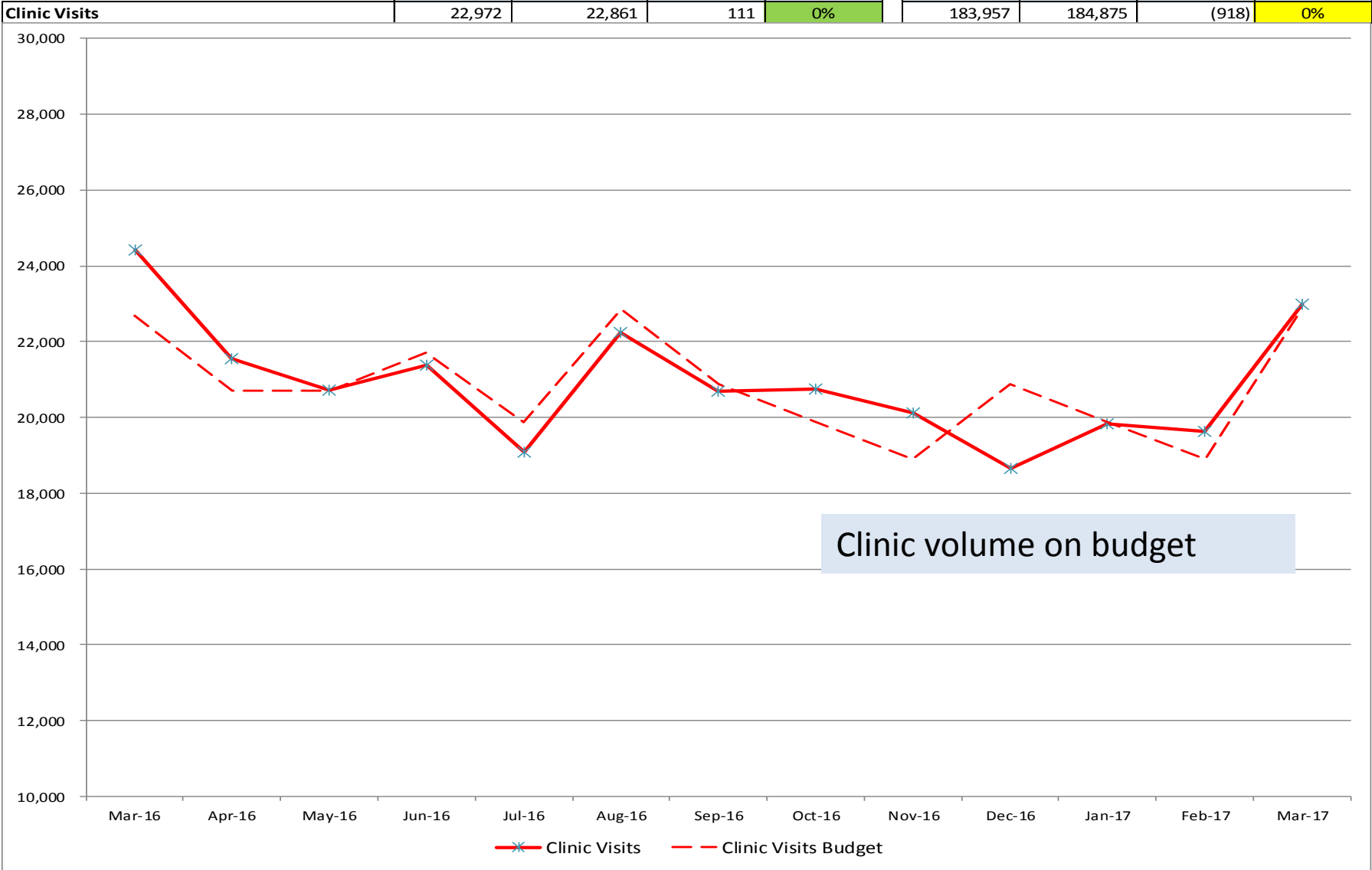
Patient Days



Medical-Surgical census over budget. Inpatient psychiatric unit continues to have challenges with discharging hard-to-place patients with 72% not meeting medical necessity for inpatient status.

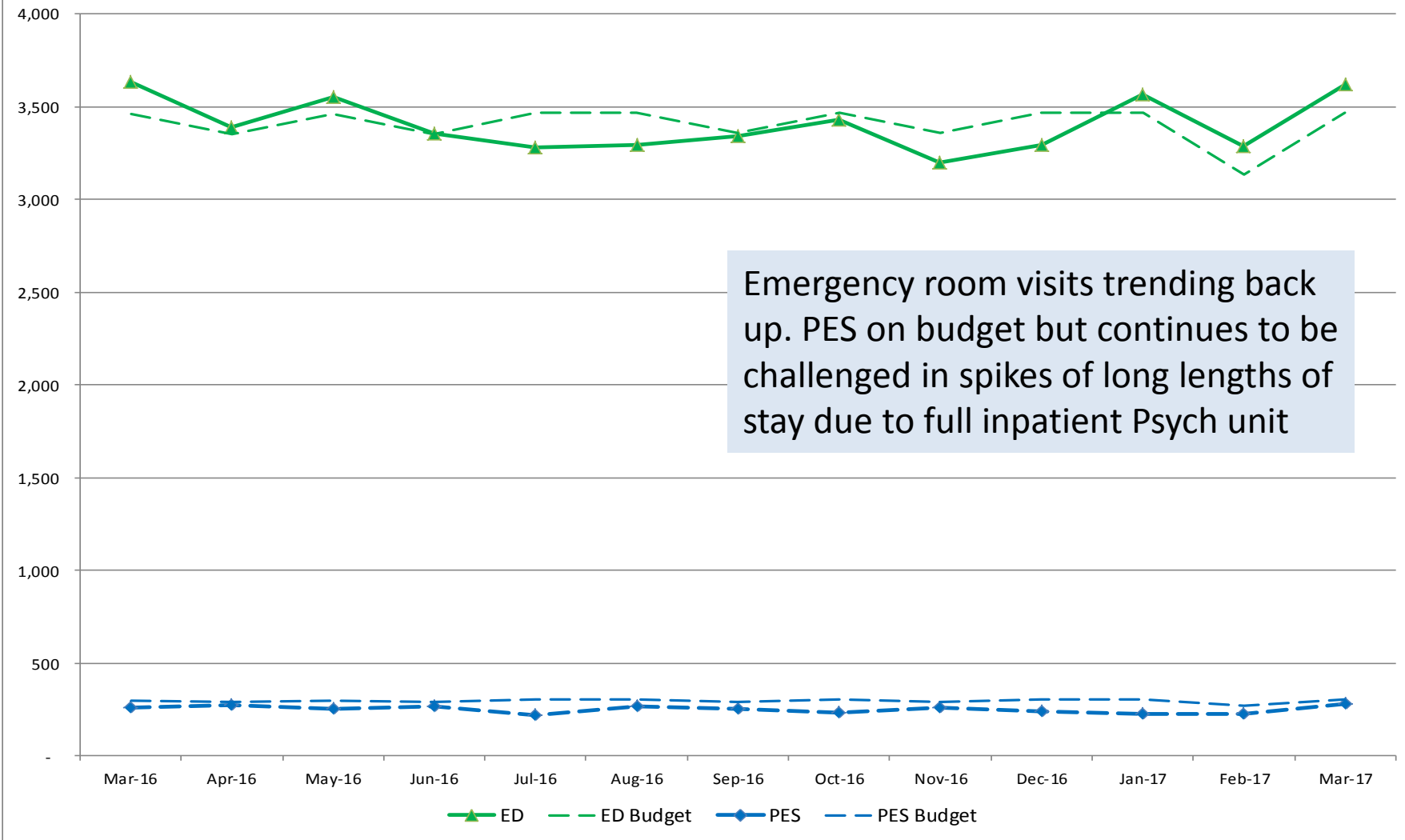
**San Mateo Medical Center
Clinic Visits
March 31, 2017**

MONTH				YEAR TO DATE			
Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
22,972	22,861	111	0%	183,957	184,875	(918)	0%



**San Mateo Medical Center
Emergency Visits
March 31, 2017**

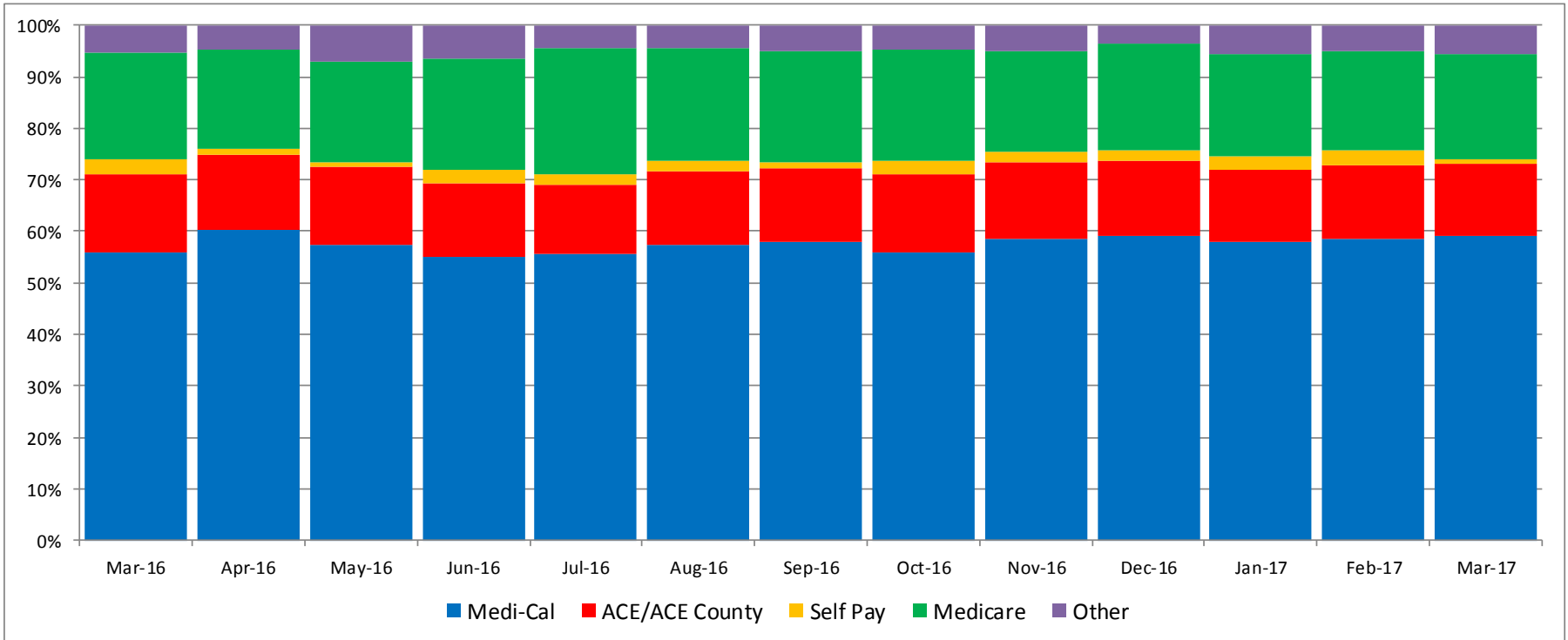
	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
ED Visits	3,899	3,773	126	3%	32,524	33,345	(821)	-2%



APPENDIX

**San Mateo Medical Center
Payer Mix
March 31, 2017**

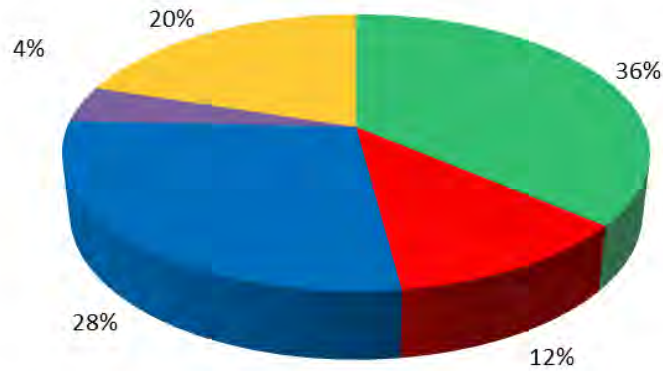
Payer Type by Gross Revenue	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
	A	B	C	D	E	F	G	H
15 Medicare	20.4%	16.6%	3.8%		21.1%	16.6%	4.5%	
16 Medi-Cal	59.2%	59.9%	-0.7%		57.8%	59.9%	-2.1%	
17 Self Pay	0.8%	3.5%	-2.7%		2.0%	3.5%	-1.5%	
18 Other	5.6%	5.9%	-0.3%		4.8%	5.9%	-1.1%	
19 ACE/ACE County	14.0%	14.1%	-0.1%		14.3%	14.1%	0.2%	
20 Total	100.0%	100.0%			100.0%	100.0%		



Revenue Mix

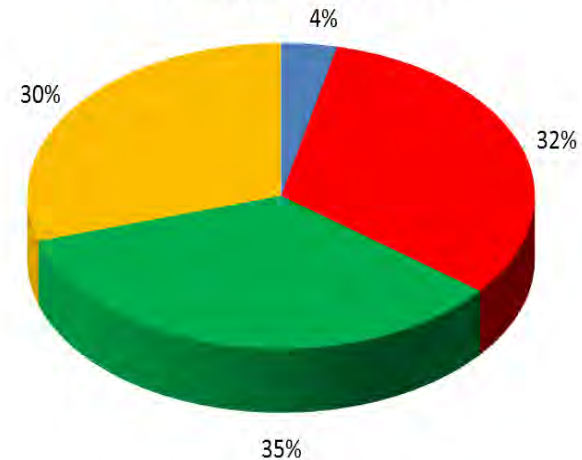
57,000
Managed
Care
Lives

Sources of Revenue



■ Fee For Service ■ Capitation ■ Supplemental ■ Other ■ County Contribution

Managed Care Mix



■ Medicare ■ Medi-Cal MCE ■ Medi-Cal Traditional ■ Access to Care for Everyone

- **Managed Care** programs represent 43% of our Operating Revenue
- **Capitation** is a pre-payment reimbursement model that pays providers a set amount for each enrolled person assigned to them, per period of time, whether or not that person seeks care.

San Mateo Medical Center
Income Statement
March 31, 2017

	MONTH				YEAR TO DATE				
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight	
	A	B	C	D	E	F	G	H	
1 Income/Loss (GAAP)	167,139	(0)	167,139		(432,267)	0	(432,267)		
2 HPSM Medi-Cal Members Assigned to SMMC	37,935	38,773	(838)	-2%	349,740	348,957	783	0%	
3 HPSM Newly Eligible Medi-Cal Members Assigned to SMMC	18,274	19,018	(744)	-4%	169,386	171,162	(1,776)	-1%	
4 Patient Days	2,961	2,701	260	10%	25,890	23,873	2,017	8%	
5 ED Visits	3,899	3,773	126	3%	32,524	33,345	(821)	-2%	
7 Surgery Cases	247	274	(27)	-10%	2,247	2,213	34	2%	
8 Clinic Visits	22,972	22,861	111	0%	183,957	184,875	(918)	0%	
9 Ancillary Procedures	75,739	67,163	8,576	13%	611,463	543,872	67,591	12%	
10 Acute Administrative Days as % of Patient Days	0.0%	9.0%	9.0%	100%	6.1%	9.0%	2.9%	32%	
11 Psych Administrative Days as % of Patient Days (Days that do not qualify for inpatient status)	72.3%	60.0%	-12.3%	-20%	80.2%	60.0%	-20.2%	-34%	
Pillar Goals									
12 Patient & Capitation Revenue PMPM	158	195	(38)	-19%	180	195	(16)	-8%	
13 Operating Expenses PMPM	343	356	13	4%	338	356	18	5%	
14 Full Time Equivalents (FTE) including Registry	1,175	1,206	31	3%	1,184	1,206	22	2%	

**San Mateo Medical Center
Income Statement
March 31, 2017**

	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
	A	B	C	D	E	F	G	H
21 Inpatient Gross Revenue	9,592,956	7,933,661	1,659,295	21%	85,090,795	71,402,948	13,687,847	19%
22 Outpatient Gross Revenue	27,478,912	24,786,360	2,692,552	11%	221,266,994	223,077,241	(1,810,248)	-1%
23 Total Gross Revenue	37,071,867	32,720,021	4,351,846	13%	306,357,789	294,480,190	11,877,599	4%
24 Patient Net Revenue	8,889,752	8,292,539	597,213	7%	78,961,193	74,632,855	4,328,339	6%
25 Net Patient Revenue as % of Gross Revenue	24.0%	25.3%	-1.4%	-5%	25.8%	25.3%	0.4%	2%
26 Capitation Revenue	1,262,427	5,985,516	(4,723,089)	-79%	25,329,710	53,869,646	(28,539,936)	-53%
27 Supplemental Patient Program Revenue	8,711,576	6,305,633	2,405,943	38%	60,480,399	56,750,694	3,729,705	7%
(Additional payments for patients)								
28 Total Patient Net and Program Revenue	18,863,756	20,583,688	(1,719,932)	-8%	164,771,303	185,253,195	(20,481,892)	-11%
29 Other Operating Revenue	1,238,151	1,182,749	55,402	5%	9,170,728	10,644,740	(1,474,013)	-14%
(Additional payment not related to patients)								
30 Total Operating Revenue	20,101,907	21,766,437	(1,664,531)	-8%	173,942,030	195,897,935	(21,955,905)	-11%

**San Mateo Medical Center
Income Statement
March 31, 2017**

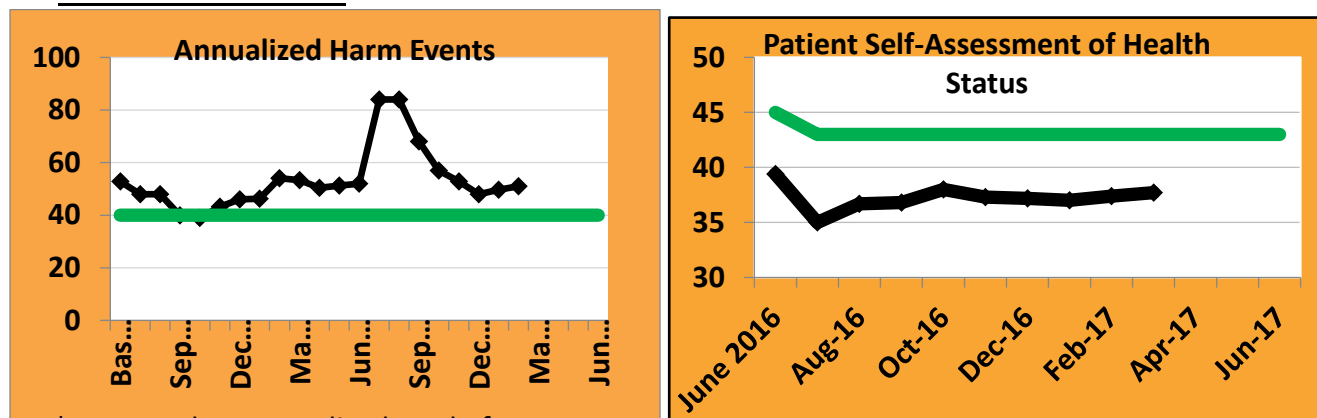
	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
	A	B	C	D	E	F	G	H
Operating Expenses								
31 Salaries & Benefits	14,852,118	14,824,609	(27,509)	0%	131,799,117	133,421,482	1,622,365	1%
32 Drugs	797,064	648,254	(148,810)	-23%	6,865,820	5,834,290	(1,031,529)	-18%
33 Supplies	889,122	908,129	19,007	2%	7,877,198	8,173,165	295,966	4%
34 Contract Provider Services	3,046,240	2,800,374	(245,866)	-9%	26,948,917	25,203,362	(1,745,555)	-7%
35 Other fees and purchased services	3,790,288	4,579,404	789,117	17%	33,906,339	41,214,639	7,308,300	18%
36 Other general expenses	412,188	487,116	74,928	15%	4,086,661	4,384,043	297,381	7%
37 Rental Expense	333,440	206,306	(127,133)	-62%	2,092,775	1,856,755	(236,020)	-13%
38 Lease Expense	745,153	745,153	-	0%	6,706,375	6,706,375	-	0%
39 Depreciation	244,664	241,114	(3,551)	-1%	2,221,097	2,170,024	(51,072)	-2%
40 Total Operating Expenses	25,110,276	25,440,459	330,183	1%	222,504,300	228,964,135	6,459,836	3%
41 Operating Income/Loss	(5,008,369)	(3,674,022)	(1,334,347)	-36%	(48,562,269)	(33,066,200)	(15,496,069)	-47%
42 Non-Operating Revenue/Expense	332,040	(1,169,446)	1,501,486	-128%	4,538,786	(10,525,015)	15,063,801	-143%
43 Contribution from County General Fund	4,843,468	4,843,468	0	0%	43,591,217	43,591,216	1	0%
44 Total Income/Loss (GAAP)	167,139	0	167,139		(432,267)	0	(432,267)	
(Change in Net Assets)								



May, 2017

EXCELLENT CARE

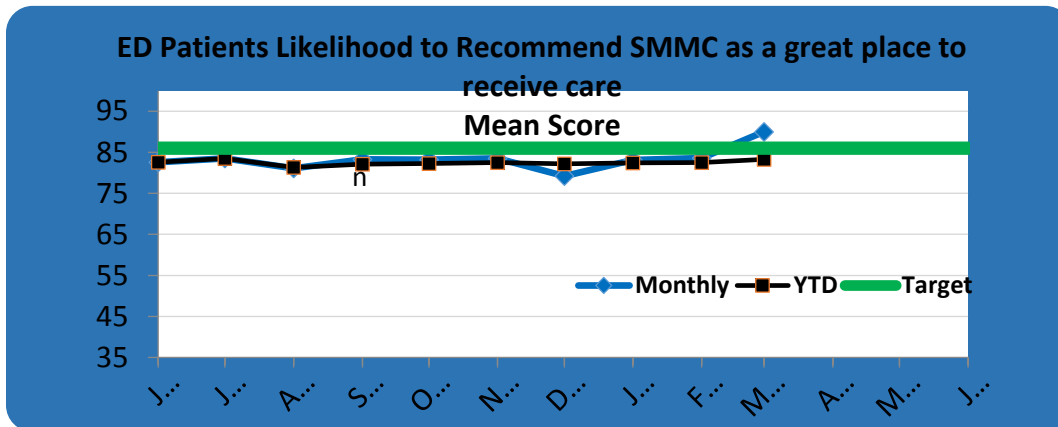
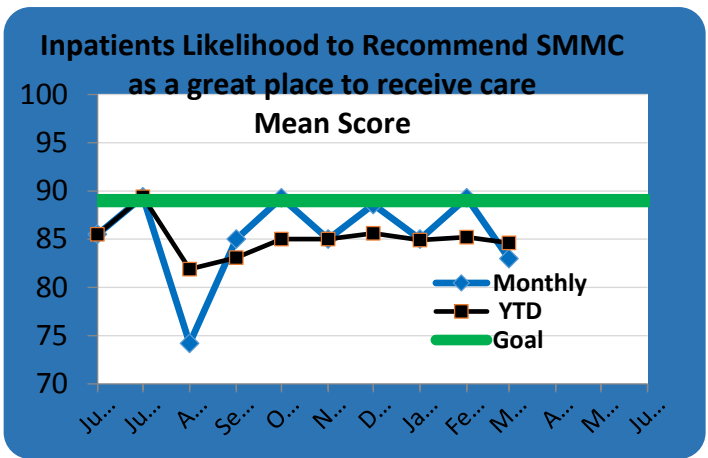
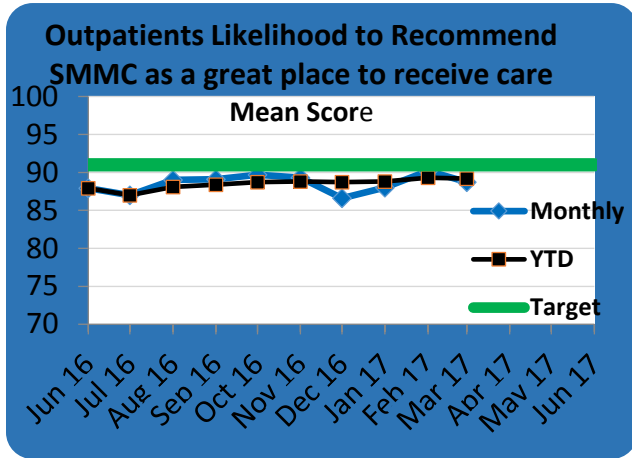
• **PILLAR METRICS**



- **SMMC Successfully Submits Mid-Year PRIME report-** On March 31st, SMMC submitted its mid-year report for PRIME, the pay for performance program within the current Medi-Cal waiver. In many of the areas, the medical center was already hitting year-end targets. Although this will require ongoing vigilance, the report was extremely encouraging and the organization was able to collect virtually all of the mid-year funding available to it. Thank you to Kristin Gurley and Melissa Rombaoa who helped to coordinate our report and to the Business Intelligence team who pulled together all the required data. Congratulations to all the project teams for their outstanding performance.
- **Psychiatry Nursing Poster Accepted by National Conference:** A poster submitted by Karin Buscher RN, MSN, Nurse Manager, and Jessica Frihart, MSN, CNS, RN, Nurse Educator has been accepted for presentation at the Annual Conference of the American Psychiatric Nurses Association. The poster entitled: *The Safety Plan- how to plan for safe in-patient stay prior to admission*, highlights innovations and advances from our acute inpatient psychiatry unit.

PATIENT CENTERED CARE

● PILLAR METRICS



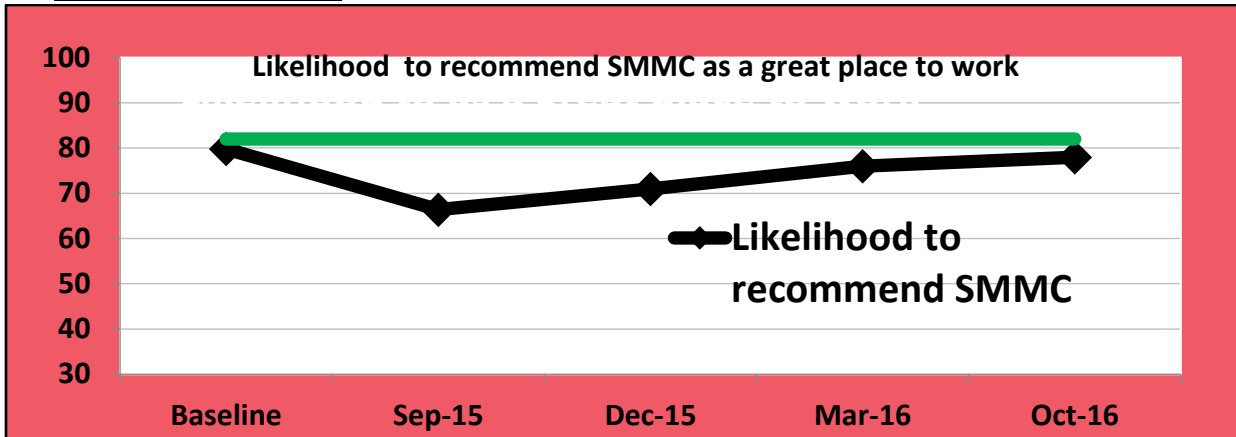
● Selected patient/family stories of gratitude:

- **From the Emergency Department:**
 - The nurses were amazing! They were helpful and always there when I needed them.
 - Personally I congratulate you for having dedicated people on the job.
 - Very good attention and good communication
- **From 2A/B:**
 - Staff was helpful and come when I called.
 - The nurses were very kind and made me feel very comfortable. They are all very nurturing.
 - Good Physicians
- **From Coastside Clinic:**
 - An excellent service, thanks.
 - All good, a nice treatment and with professional ethic
- **From Daly City Clinic:**
 - Everyone is always so nice & helpful. I am very happy with clinic.
 - The provider was an excellent one, very courteous, attentive, and very caring.

- **From Fair Oaks Health Center:**
 - Always fantastic with caring and lovely people
 - Great treatment from all the staff
- **From the Innovative Care Clinic:**
 - Everyone at the clinic has always been extremely friendly and courteous.
 - Everyone here seems honest, friendly and appear to love their jobs.
- **From Main Campus Pediatrics Clinic:**
 - Better than private practice as I remembered it.
- **From the Ron Robinson Senior Care Center:**
 - Very thankful for the good care at the Ron Robinson Senior Care Center.
 - The doctor and the nurse are professional and friendly and very fast in giving medical advice. I am more than willing to recommend them.
- **From South San Francisco Clinic:**
 - I personally would recommend this clinic, they are nice and attentive
 - Thank you very much, great service
- **From Dental Services:**
 - I am a veteran with PTSD, have problems with people standing over me amongst other things, I am always talked thru the procedure.
 - Good nature, caring and concern for my low pain level, gave me hand signals to communicate while in my mouth, wonderful.
- **From the Medical Specialty Clinic:**
 - The doctor showed joy cause he saw me getting better and they always treat me great.
 - They always listen and take care of problems, answer questions in a timely manner, let you know what meds you're taking are for.
- **From OB/GYN Clinic:**
 - This is one of the best clinics, thank you so much for all your help!!!
 - Everything is great!
- **From Surgical Specialty Clinic:**
 - Congratulations to all the personnel of the clinic & hospital for their professionalism & kindness with all the patients
 - The nurses are very kind, courteous & educated, they are very excellent

STAFF ENGAGEMENT

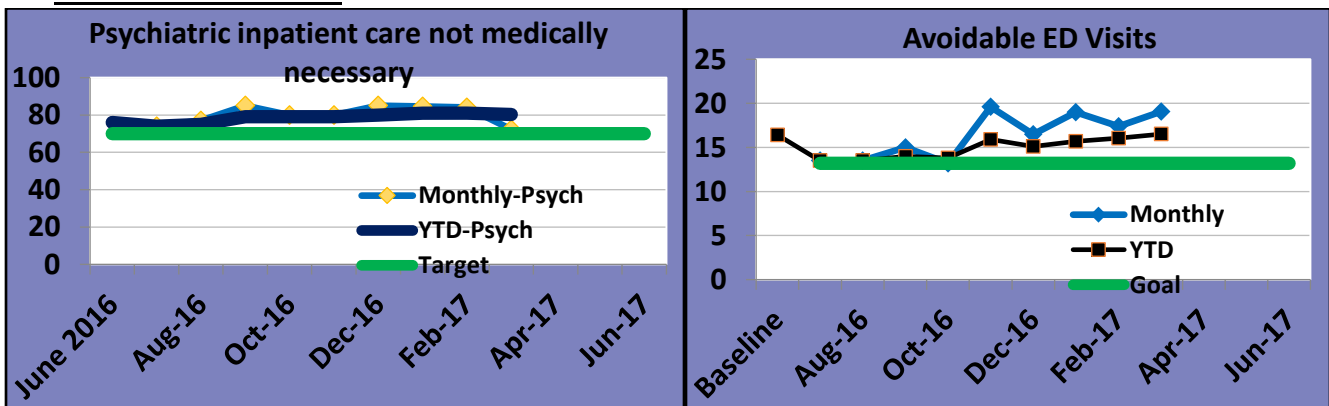
● PILLAR METRICS

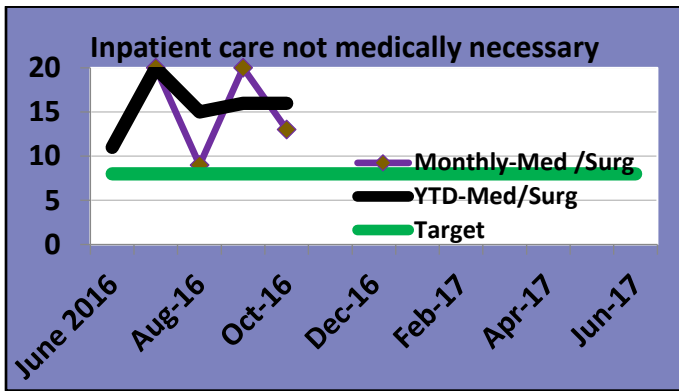


- SMMC Staff Recognized by Peers and Patients-** Awareness and adoption of SMMC’s staff recognition programs has been steadily rising and we are on pace for a 40% increase in recognitions in 2017. The *Just Because* Program facilitates recognition by patients whereas the *Above and Beyond* Program allows SMMC staff members to acknowledge the efforts of their colleagues. This quarter we would like to acknowledge the following employees who have received five or more recognitions from peers and patients: Maria Angel Garcia, Fair Oaks Health Center, Phuong Hathaway, Rehabilitation Services, Rachel Daly, Respiratory Services, and Alfredo Aldana, Rehabilitation Services.
- Ann Marie Silvestri Recognized by San Mateo County Dental Society-** The San Mateo County Dental Society presented Dr. Ann Marie Silvestri, SMMC’s Dental Program Manager, with the 2016 Distinguished Service Award at a reception on April 27th. The award was for “the selfless work you’ve done on behalf of organized dentistry, our community, and the society.” Congratulations to Ann Marie! We are lucky to have her as a part of our leadership team.

RIGHT CARE, TIME AND PLACE

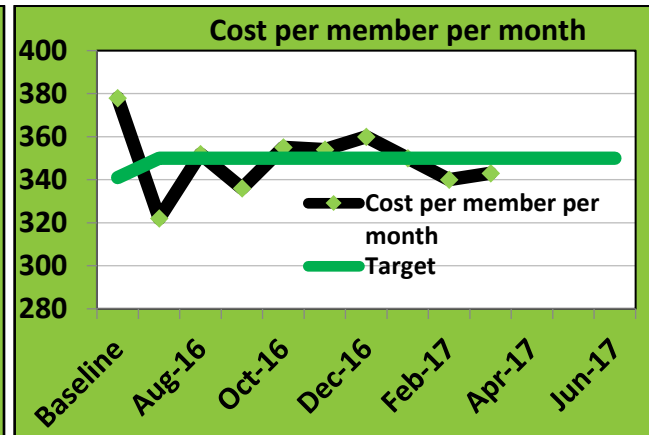
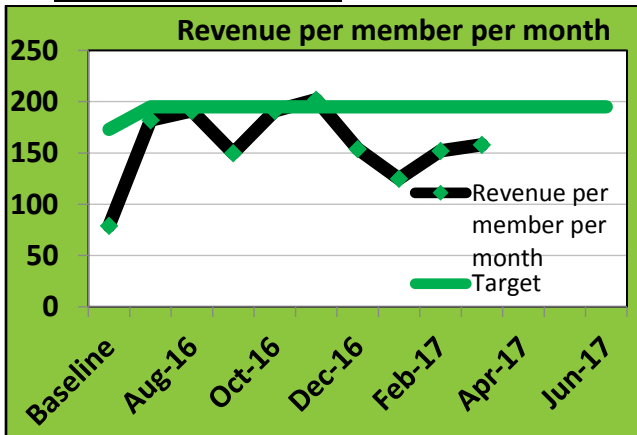
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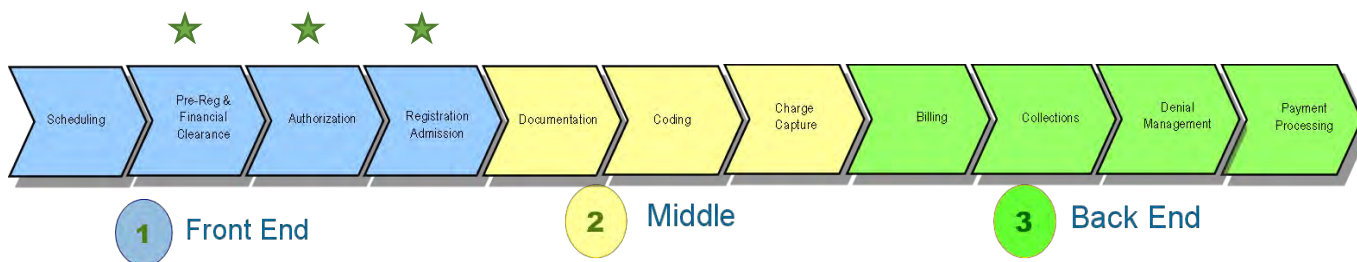


FINANCIAL STEWARDSHIP

• PILLAR METRICS



- SMMC Earns Full Global Payment Program Funding**-On March 31st, SMMC submitted its final report for the first year of the Global Payment Program (GPP). GPP is a five year pilot initiative within the current Medi-Cal waiver that reorganizes existing funding streams to support care for uninsured and underinsured populations in California. The program helps support a shift to more effective and innovative approaches to outpatient primary care and preventative services. Funding is earned through a points system based on the provision of designated services. In this first year, SMMC earned more than enough points to earn its full payment amount.
- Revenue Cycle Transformation**- Our FY16-17 Financial Stewardship strategic initiative is focused on the front-end of the revenue cycle, with an initial emphasis on insurance coverage accuracy and inpatient authorization approvals. Through interdisciplinary workgroups led by Portia Dixon, Manager of Patient Financial Services, and Geri Lara, Manager of Patient Access, we are tackling the following: 1) workflow redesign; 2) decreasing defects through standard work; 3) software as an enabler to workflow efficiencies; and 4) performance reporting. This work is being refined as the Revenue Cycle Transformation workgroups are planning the specific tasks, milestones and deliverables for these priorities. An important new planning consideration in designing our improvement work is to address patient experience and staff satisfaction.



In April we focused on drafting standard work for our patient registration processes. This involved several meetings with key stakeholders representing different registration areas across SMMC. The next step will be to introduce this draft standard work to all front line staff to get their feedback and make modifications prior to beginning training on the new standard work.

We previously reported on the experiments we conducted to test the accuracy of our insurance verification system, HDX. Results of those experiments showed an 82% accuracy rate across 5 locations and yielded valuable information on areas for improving the system. For example, we modified HDX to automatically return the correct insurance plan code for dental services, rather than having staff change codes manually. We are currently testing this change before we go live with the enhancement. If successful, we'll then start work on modifications for PACT/CDP services.

In May we will begin an improvement event to consolidate the number of insurance plan codes our staff have to choose from. We expect this will streamline the registration process and decrease the number of claim denials due to billing the wrong insurance plan.

For our authorizations improvement work, we previously reported a 38% reduction in the value of accounts pending an authorization and in March we hit an all-time low. Our authorizations team also achieved a 100% completion rate for obtaining authorization reference numbers from HPSM, which is the first time this rate has been achieved. With this success under our belts, in April our team began developing plans to move our initiative work to outpatient services, with an initial focus on Surgery and Infusion services.

We will continue running these types of experiments and improvement on different elements of registration and authorization tasks so that our design of standard work will have a greater chance at a successful roll-out. Additionally, we are developing a comprehensive change management and communication plan to help our teams to prepare for future changes in the way they do their work. All these efforts are critical to establishing a foundation of strong workflows in preparation for the replacement of the Invision patient accounting system with Soarian Financials.

We will provide updates to the Board at regular intervals.

To: SMMC Board Members
 From: Louise Rogers, Chief
 Subject: Health System Monthly Snapshot – April 2017

Indicator	Number	Change from previous month	Change from last year
ACE Enrollees	21,781 <i>(March, 2017)</i>	0.8%	12.3%
SMMC Emergency Department Visits	3,899 <i>(March, 2017)</i>	10.8%	0.2%
New Clients Awaiting Primary Care Appointment	743 <i>(April, 2017)</i>	14.1%	1,855%

San Mateo County Named #1 Healthiest County in California

The 2017 County Health Ranking Report, a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute, ranked San Mateo County number one in California for health outcomes. San Mateo County ranked high for having low rates of uninsured adults and children, a higher rate of physical activity and opportunities to access exercise, low smoking rates, and low violent crime. These factors contribute to San Mateo County having lower rates than most California Counties of premature death before the age of 75 years. In response, the Health System Communications team published a series of social media posts, which reached over 10,000 people on Twitter and Facebook. The report made headlines that mentioned San Mateo County's top ranking in at least 11 news outlets throughout California, including *Los Angeles Daily News* and *KNTV NBC Bay Area News*. The annual ranking is a great conversation starter, but we still have a lot of work to accomplish in San Mateo County for all residents to live longer, healthier lives. For example, San Mateo County still has a high rate of adult obesity, sexually transmitted infections are on the rise, and at least 10% of children are living in poverty.



Photo: Eric Forgaard, San Mateo County

Immigrant Health Forum

The Immigrant Health Forum, hosted by San Mateo County Health System and Legal Aid's LIBRE program, welcomed the City of San Mateo community with a resource fair at San Mateo's MLK Jr. Community Center. The Health System was represented by several informational resource tables Environmental Health Services, Family Health Services, Behavioral Health and Recovery Services, all of whom address attendees from the podium as well. Supervisor Carole Groom was in attendance and briefly welcomed attendees. In addition to engaging presentations on healthy eating habits, safer pest control and household cleaning habits, and public health coverage benefits available to immigrants there was also a basic health screening and a children's Easter egg hunt. The Health System will continue to put on similar events in order to better inform the public on resources and information available to them to better their health.

Silver Dragon Reaches over 16,000 Households

On April 20, cities and agencies in San Mateo County conducted an emergency preparedness drill known as *Silver Dragon*. This drill is designed to prepare local authorities within the county on how to deal with a health emergency, specifically mosquito-borne infectious disease. Emergency Medical Services along with the sheriff's office, local fire and police departments partnered with the American Red Cross and other partners. Community Emergency Response Teams (CERT) and Mosquito Vector Control simulated going door-to-door to check in on residents by visiting 8,607 homes in neighborhoods selected for the exercise. Dr. Shruti Dhapodkar (pictured on right), the Health Emergency Preparedness (HEP) Program Manager, greeted staff and volunteers along with Foster City Vice-Mayor, Sam Hindi, at one of the drill centers located at the Foster City Fire Department. The exercise also included the participation of the San Mateo Medical Center, which tested its mobile kitchen capabilities. This service would be used to feed and hydrate volunteers and first responders during a major emergency - a critical part of any response effort. San Mateo County Health System along with Mosquito Vector Control used the exercise as an opportunity to better inform the public on what goes on behind the scenes of this training by live-tweeting the event. Health System social media posts about Silver Dragon reached over 6,000 people in 24 hours.

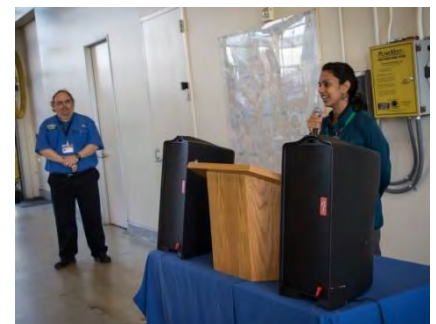


Photo: Preston Merchant, San Mateo County Health System