



**San Mateo Medical Center**  
*A County System of Healthcare*

## **BOARD OF DIRECTORS MEETING**

Thursday, June 1, 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

June 1, 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. May 4, 2017 Meeting Minutes

**G. MEDICAL STAFF REPORT**

Chief of Staff Update

*Dr. Janet Chaikind*

**H. ADMINISTRATION REPORTS**

1. Staff Engagement

*Liz Evans..... Verbal*

2. Provider Engagement

*Dr. Susan Fernyak ..... Verbal*

3. Public Health Lab

*Louise Rogers ..... Verbal*

4. Financial Report

*David McGrew..... **TAB 2***

5. CEO Report

*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, May 4, 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  
Dr. David Lin

**Staff Present**

David McGrew	Michelle Lee
Joan Spicer	Priscilla Romero
Dr. Susan Fernyak	Karen Pugh
Glenn Levy	John Thomas
Dr. Haresh Ruparel	Angela Gonzalez
Malu Cruz	Gabriela Behn
Marcus Weenig	Brighton Ncube
Sara Furrer	Dr. Shruth Dhapodkar

**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 8:16 AM to Open Session. A quorum was present (see above).	
Report out of Closed Session	Medical Staff Credentialing Report for May 4, 2017. QIC Minutes from March 28, 2017. SMMC Medical Staff Bylaws. SMMC Medical Staff General Rules and Regulations. Medical Executive Committee Minutes from April 11, 2017.	Glenn Levy reported that the Board unanimously approved the Credentialing Report and the QIC Minutes and accepted the MEC Minutes. The Medical Staff Bylaws and the Medical Staff Rules and Regulations were also approved. Supervisor Canepa did not participate in the Closed Session.
Public Comment	None.	
Foundation Report Sara Furrer	On August 28, the Foundation will host the 14th Annual Golf Tournament at the Sharon Heights Golf and Country Club.	FYI

Consent Agenda	Approval of: 1. Hospital Board Meeting Minutes from April 6, 2017.	It was MOVED, SECONDED and CARRIED unanimously to approve all items on the Consent Agenda.
Medical Staff Report Dr. Janet Chaikind	The 2017 Annual Medical Staff meeting will be held on June 1. The Chief of Staff and the Vice Chief of Staff positions along with the Treasurer are open for elections. Nurse Practitioners and Physician Assistants are invited and will have a voice in Medical Staff elections but are not eligible to vote.	FYI
Compliance Update Gabriela Behn	2017-2018 Compliance Work Plan <ul style="list-style-type: none"> <li>• Update Code of Conduct and Privacy Policies</li> <li>• Define scope of Compliance Program administration</li> <li>• Update the Compliance Committee Charter with goals and functions</li> <li>• Annual SMMC Compliance 101 training</li> <li>• Develop an annual compliance audit plan</li> </ul>	FYI
SMMC 1A and Burlingame Long Term Care Malu Cruz Marcus Weenig	SMMC 1A: 243 patient discharges, 11,049 resident days, 48 employees BLTC: 423 patient discharges, 98,543 resident days, 360 employees  Regulatory Updates <ul style="list-style-type: none"> <li>• Payroll based journal effective July 1, 2016</li> <li>• Functional and quality measure data in the form of patient assessments effective October 1, 2016</li> <li>• New emergency preparedness rules effective November 16, 2016</li> <li>• Effective January 1, 2017, CA Senate Bill 361 requires improved usage of antibiotics to protect patients and reduce the threat of antibiotic resistance</li> </ul>	FYI
SNF Disaster Planning Dr. Shruti Dhapodkar	Identification of future state <ul style="list-style-type: none"> <li>• Improved communication among the (skilled nursing facilities) SNFs and the County</li> <li>• Need for SNFs/hospitals/ County to be on the same emergency communication channels</li> <li>• Building partnerships with organizations (MOU)</li> <li>• Actionable Disaster Plans</li> <li>• Participation in SWMHE and Proficient in NHICS</li> </ul> Bridging the Gap by building a coalition <ul style="list-style-type: none"> <li>• Create Situational Awareness among the SNFs</li> <li>• Facilitate meaningful interaction among SNFs and stakeholders</li> <li>• Provide a platform for members to come together to create mutual agreements for disaster response</li> <li>• Fortify healthcare preparedness in the County of San Mateo by preparing skilled nursing facilities (SNFs)</li> </ul> Response to SNF Ready Kickoff, 13 SNF participants at the last meeting <ul style="list-style-type: none"> <li>• Realization that SNFs were vulnerable and new interest in emergency planning</li> </ul>	FYI

	<ul style="list-style-type: none"> <li>• SNFs inquired regarding future exercises and training</li> <li>• Fascinated by the abundance of resources, which they did not know about</li> <li>• Wanted to review their EOP with the County and stakeholders</li> <li>• Interested in creating county wide agreements</li> <li>• Understood the value of COOP</li> </ul>	
Financial Report David McGrew, CFO	The March 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	Brighton Ncube, the new Deputy Director of Ambulatory Services, was introduced and welcomed. Dr. Kunnappilly presented the CEO report which is included in the Board packet and answered questions from the Board.	FYI
Health System Report Louise Rogers	<p>San Mateo County is the healthiest county 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> <p>Louise Rogers expressed her appreciation for the County's purchase of the space the SMMC and BHRS clinics occupy in Half Moon Bay. While this does not offer any additional space, it is a prudent and cost-effective move to try to own versus lease space in Half Moon Bay where there are few locations that would be appropriate for our services.</p>	FYI
County Manager John Maltbie	On May 5, San Mateo County will host its first ever Stand Down at San Mateo County Fairgrounds, aimed at reaching our county's homeless Veterans. A Stand Down is modeled after the Stand Down concept used during the Vietnam War to provide a safe retreat for units returning from combat operations. At secure base camp areas, troops were able to take care of personal hygiene, get clean uniforms, enjoy warm meals, receive medical and dental care, mail and receive letters, and enjoy the camaraderie of friends in a safe environment. Stand Down afforded battle-weary soldiers the opportunity to renew their spirit, health and overall sense of well-being. San Mateo County will bring these services and other resources to one location, making them more accessible to homeless Veterans.	FYI
Board of Supervisors Supervisor Carole Groom	No report.	FYI

Supervisor Groom adjourned the meeting at 9:30 AM. The next Board meeting will be held on June 1, 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



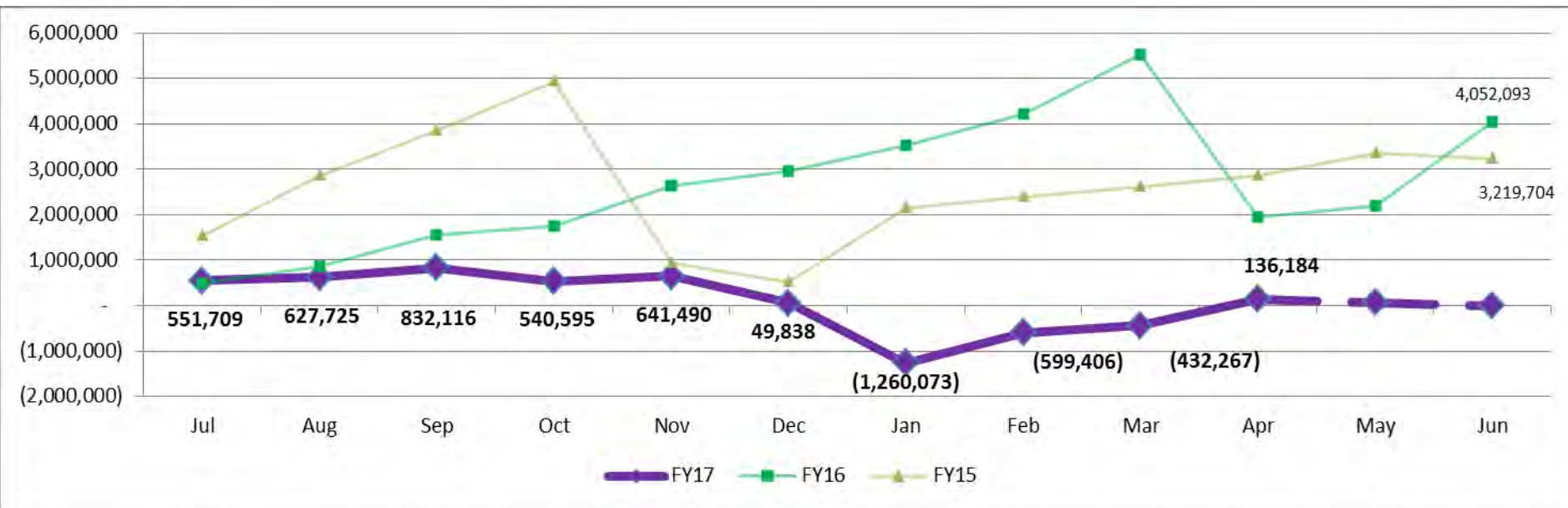


**San Mateo Medical Center**  
*A County System of Healthcare*

**April FY 2016-17  
Financial Report**

**Board of Directors Meeting  
June 1, 2017**

# Financial Highlights – Net Income Trend



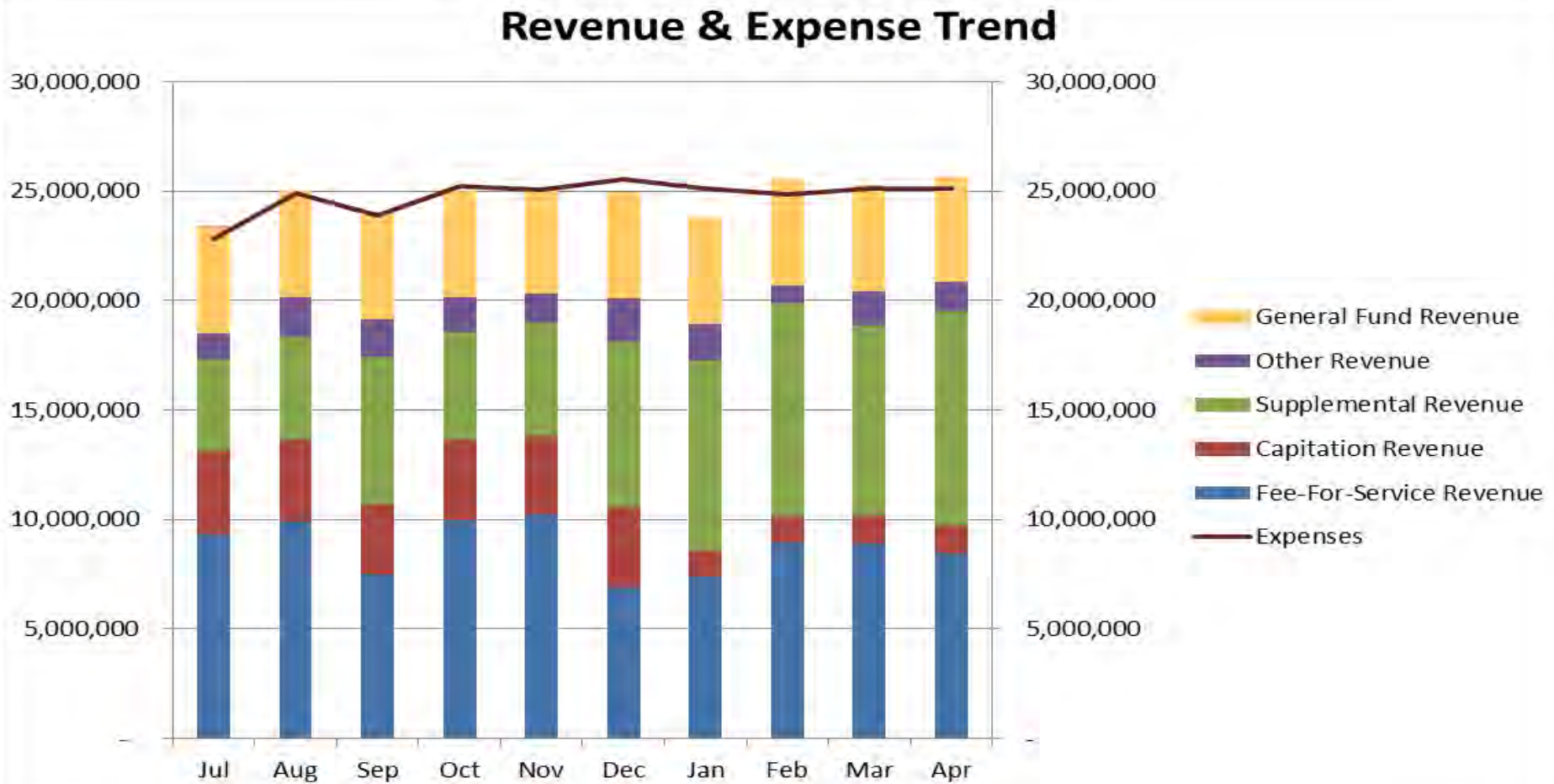
## Financial Drivers:

- PRIME and GPP revenue
- Realignment

- Financial reserves - \$2.5 million
- Medical necessity & Capitation
- Medi-Cal Acute & SNF rates

**Full Year Forecast:** Continued declines in Medi-Cal reimbursement, combined with high unreimbursable inpatient administrative days, require tapping into the financial reserves previously established for such risks in order to be on budget at the end of the year.

# Revenue & Expense Trend



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

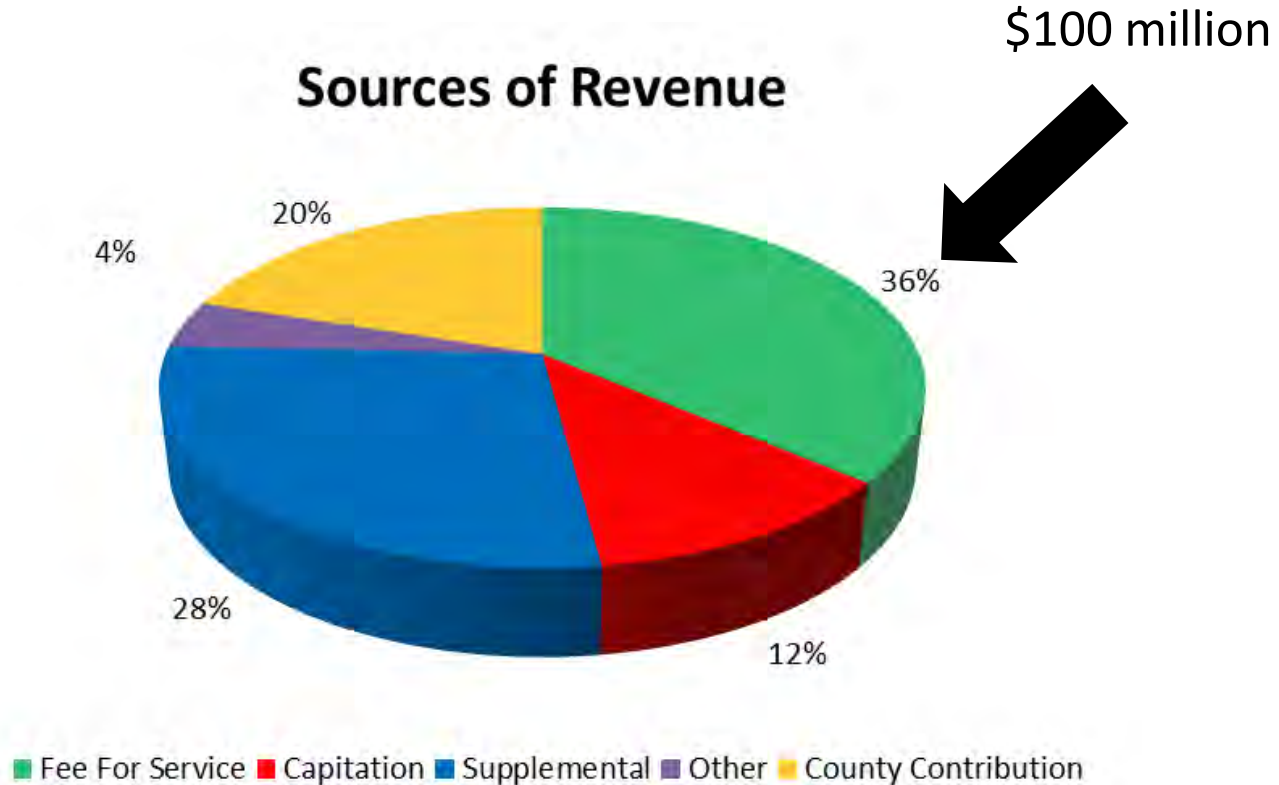
# Financial Mitigation Plan Status Update

Board of Directors Meeting  
June 1, 2017

# Agenda

- Brief update current status
  - Scope: Fee For Service Revenue
- Key Performance Indicators
- Initiatives with largest opportunities
  - Denial management
    - Medical necessity
    - Clinical denials (non-covered services)
    - Provider enrollment
  - Clinical Documentation Improvement (CDI)
  - Psych billing project
  - Medi-Cal SNF rates

# Scope



The financial mitigation strategies are targeted towards fee-for-service revenue, which is 36% of our total revenue, or \$100 million. Optimizing revenue cycle operations typically generate revenue opportunities of 3%-5%.

# 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

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

# Key Performance Indicators

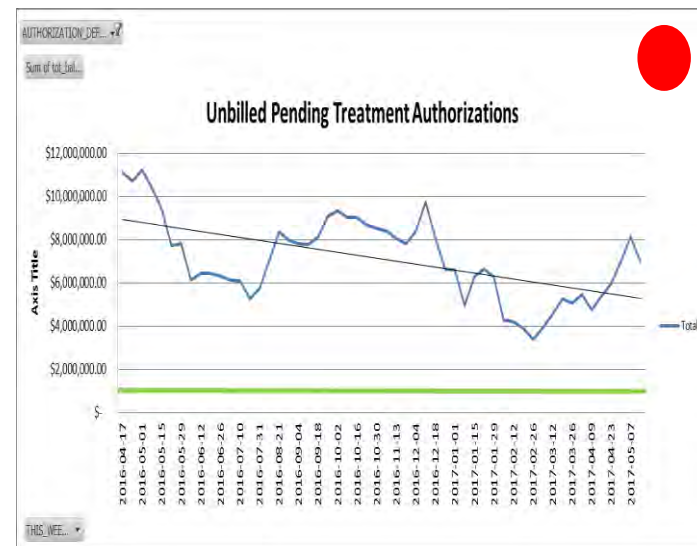
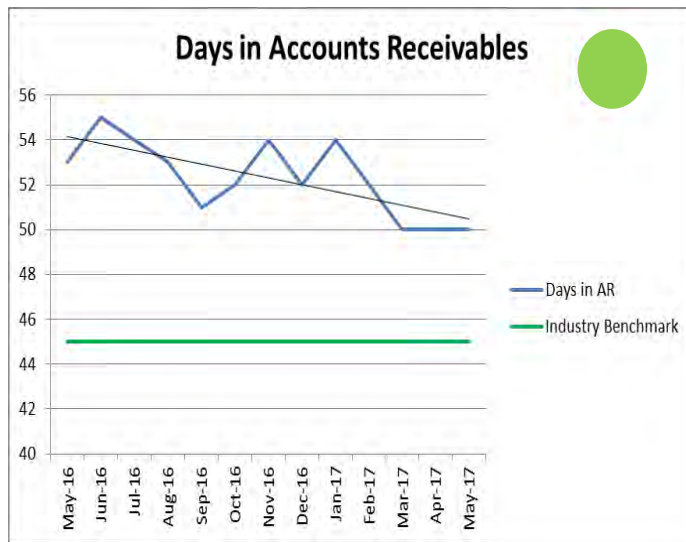
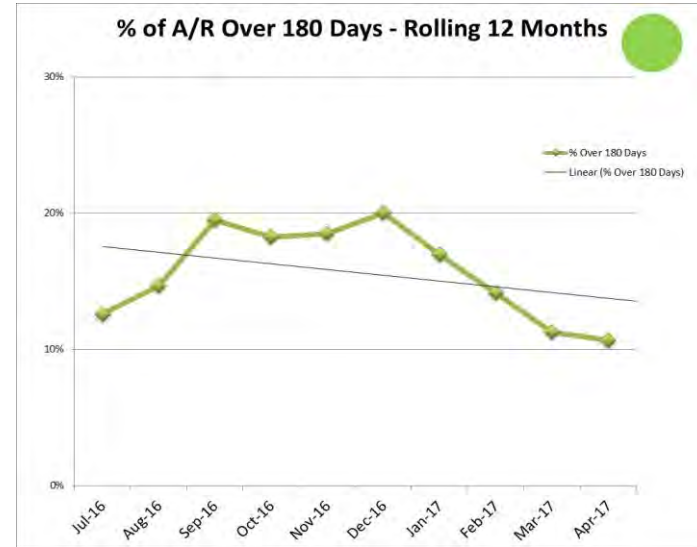
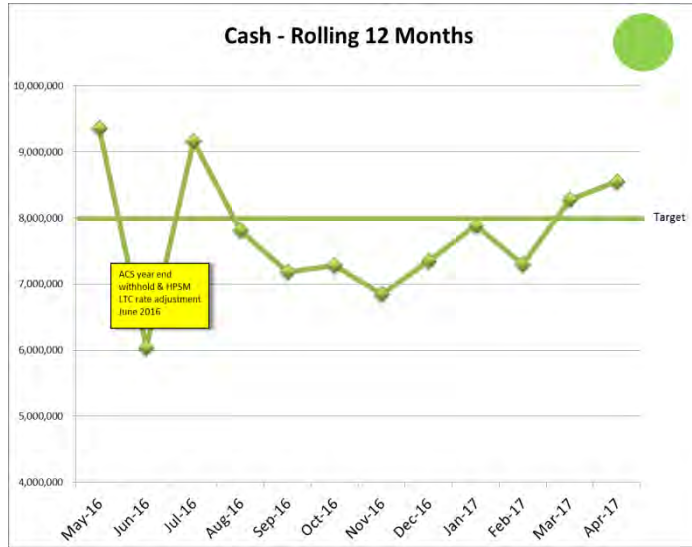
## FFS Revenue Collection Trend



The revenue collection rate declined steadily through December due to high administrative days and lower Medi-Cal rates for acute medical-surgical patients and skilled nursing facility patients at SMMC and BLTC. Beginning January, the collection rate bounces back due to FFS revenue from MCE patients.

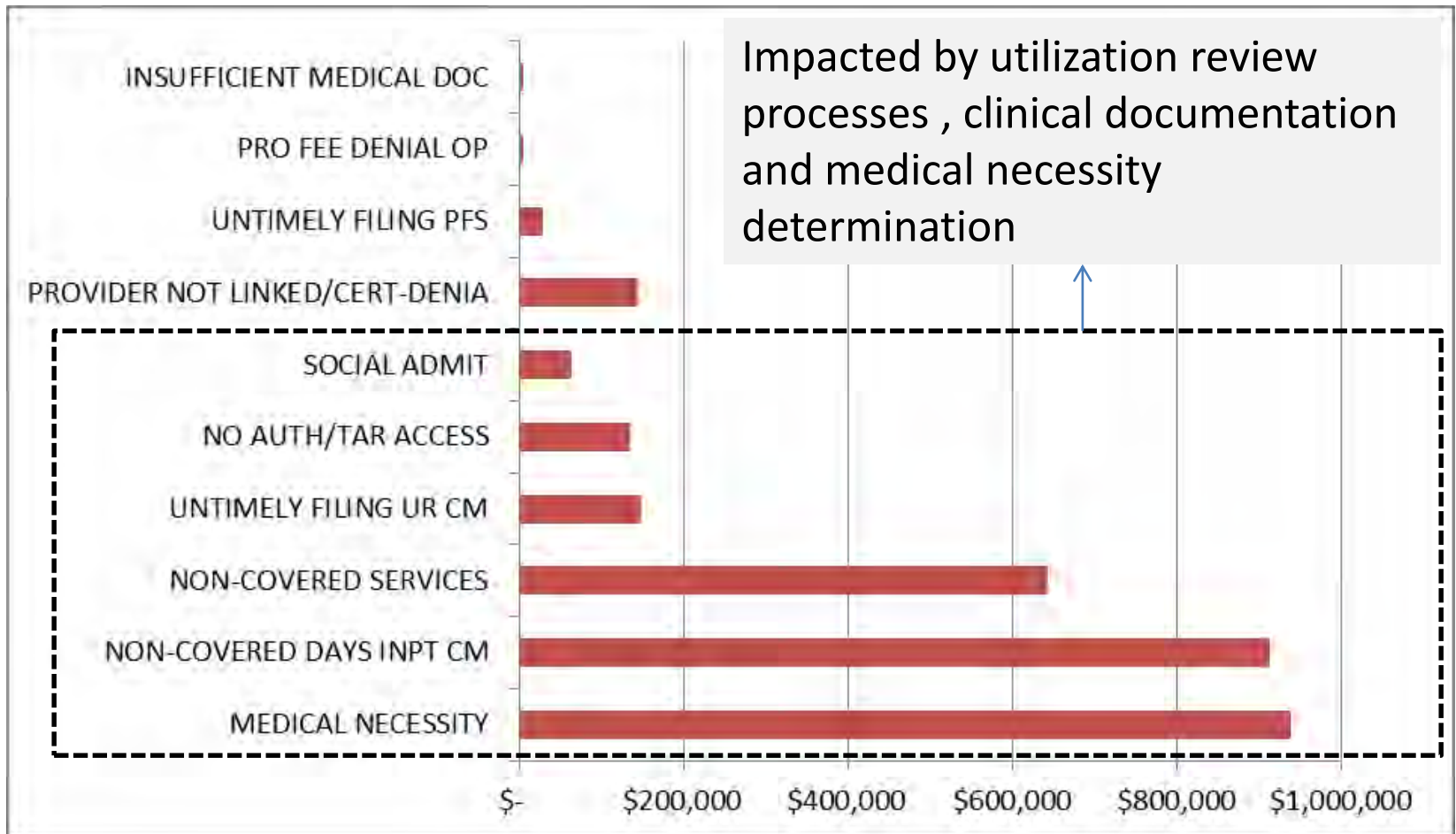


# Key Performance Indicators

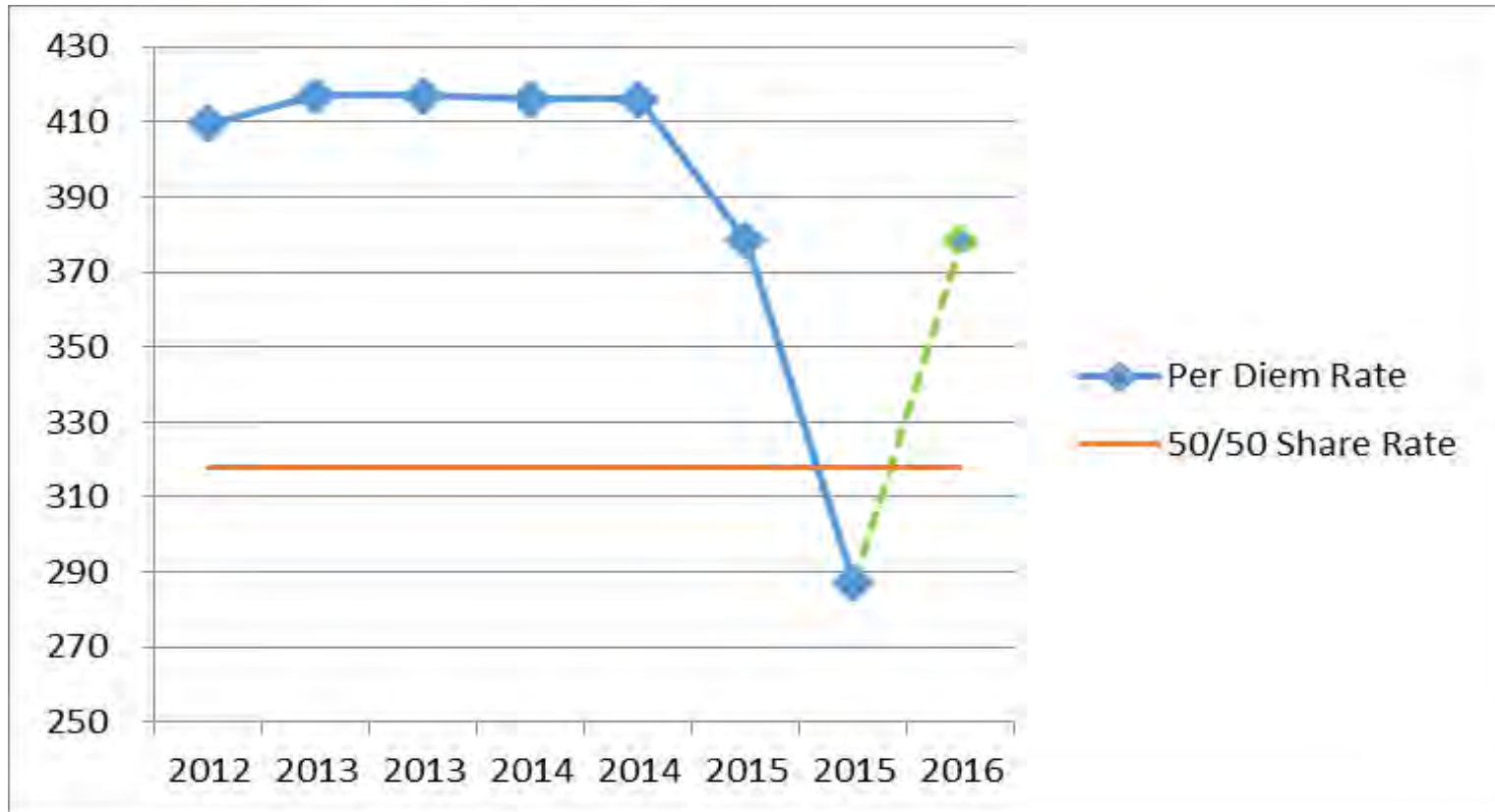


# Key Performance Indicators

## Inpatient Denials – Past 12 Months



# Medi-Cal SNF Per Diem Rate



Note: 2016 rate is based on recently submitted cost report and is not yet the official payment rate. Expected date is August 1, 2017. Impact is approximately \$3 million annually

# Financial Mitigation Plan

## Initiatives with Largest Opportunities

Initiative	Actions	Timeline
<p><i>Denial management</i></p> <ol style="list-style-type: none"> <li>1. Medical necessity</li> <li>2. Clinical denials</li> <li>3. Provider enrollment</li> </ol>	<ol style="list-style-type: none"> <li>1) Engaged RRCS to provide retroactive reviews, concurrent coaching and feedback, staffing assessment, and on-going Provider education. <u>59% of reviewed cases were corrected.</u></li> <li>2) Implement CDI program (see below)</li> </ol>	<p>Started March 1st</p>
<p><i>Clinical Documentation Improvement (CDI)</i></p> <p>Focus on education and monitoring activities for compliance, medical necessity, quality &amp; appropriate revenue</p>	<ol style="list-style-type: none"> <li>1) Identify external resource to conduct a gap assessment, develop a model program and implement a pilot program focused initially on inpatient medical-surgical unit.</li> <li>2) Recruit and hire 1 FTE as outpatient CDI specialist to support Ambulatory Clinic providers</li> </ol>	<p>Project scope development is underway.</p> <p>Initiate project work by July 1st</p>
<p><i>Psych services billing project</i></p> <p>Focus on workflows and monitoring activities for compliance, medical necessity, quality &amp; appropriate revenue</p>	<p>In-depth assessment and documentation of end-to-end billing workflows for inpatient psych, psych emergency, med-psych clinic services. Implement improved workflows based on findings from assessment</p>	<p>Draft report delivered to CEO, CFO and Compliance Officer on May 25th</p>
<p><i>Increase Medi-Cal SNF rates</i></p>	<p>Working with Brius to identify shared administrative functions to appropriately allocate administrative overhead to SNF services to enhance per diem rate</p>	<p>August 1, 2017</p>

# Financial Mitigation Plan

## Initiative Oversight

- LEAP Improvement Center - Revenue Cycle Transformation
- Revenue Cycle Governance Council
- Compliance Committee
- Weekly Revenue Cycle Huddles
- Daily Admission Huddles
- Executive Oversight of Medical Necessity Concurrent and Retro Reviews
- Psych Billing Project Workgroup

**QUESTIONS?**

# **APPENDIX**

**San Mateo Medical Center**  
**Income Statement**  
**April 30, 2017**

	MONTH				YEAR TO DATE				
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight	
	A	B	C	D	E	F	G	H	
1 <b>Income/Loss (GAAP)</b>	568,451	(0)	568,451		136,184	0	136,184		
2 <b>HPSM Medi-Cal Members Assigned to SMMC</b>	37,923	38,773	(850)	-2%	387,663	387,730	(67)	0%	
3 <b>HPSM Newly Eligible Medi-Cal Members Assigned to SMMC</b>	18,240	19,018	(778)	-4%	187,626	190,180	(2,554)	-1%	
4 <b>Patient Days</b>	2,860	2,614	246	9%	28,750	26,486	2,264	9%	
5 <b>ED Visits</b>	3,503	3,651	(148)	-4%	36,028	36,996	(968)	-3%	
7 <b>Surgery Cases</b>	241	238	3	1%	2,488	2,451	37	2%	
8 <b>Clinic Visits</b>	19,348	19,879	(531)	-3%	203,324	204,754	(1,430)	-1%	
9 <b>Ancillary Procedures</b>	65,713	58,498	7,215	12%	677,176	602,370	74,806	12%	
10 <b>Acute Administrative Days as % of Patient Days</b>	0.0%	9.0%	9.0%	100%	5.5%	9.0%	3.5%	39%	
11 <b>Psych Administrative Days as % of Patient Days</b> (Days that do not qualify for inpatient status)	78.9%	60.0%	-18.9%	-32%	80.1%	60.0%	-20.1%	-33%	
<b>Pillar Goals</b>									
12 <b>Patient &amp; Capitation Revenue PMPM</b>	159	195	(37)	-19%	186	195	(9)	-5%	
13 <b>Operating Expenses PMPM</b>	345	361	16	4%	341	361	21	6%	
14 <b>Full Time Equivalentents (FTE) including Registry</b>	1,162	1,206	44	4%	1,162	1,206	44	4%	



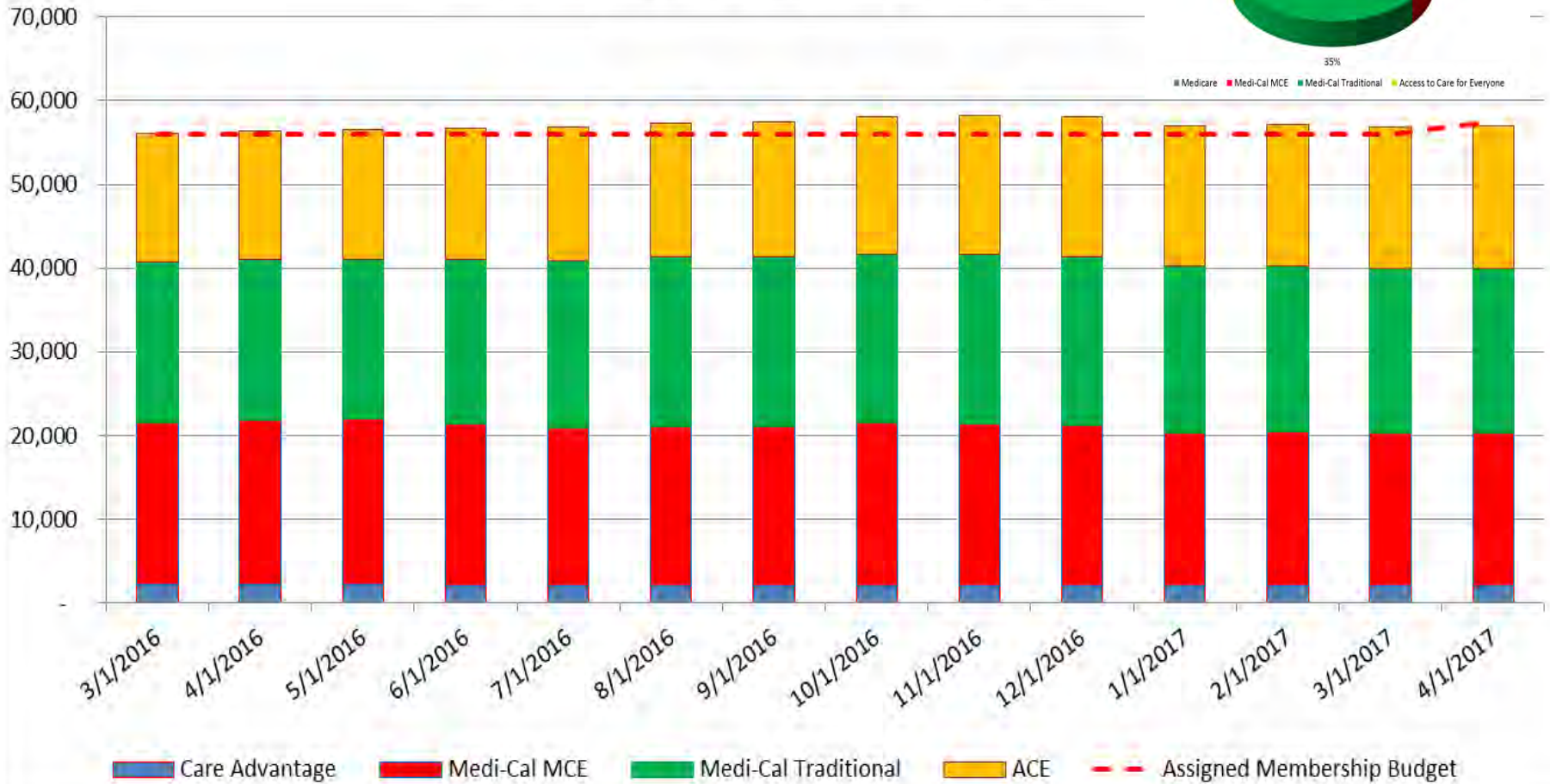
**San Mateo Medical Center**  
**Income Statement**  
**April 30, 2017**

	MONTH				YEAR TO DATE				
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight	
	A	B	C	D	E	F	G	H	
21	<b>Inpatient Gross Revenue</b>	8,941,570	7,933,661	1,007,909	13%	94,032,365	79,336,609	14,695,756	19%
22	<b>Outpatient Gross Revenue</b>	23,718,527	24,786,360	(1,067,833)	-4%	244,985,521	247,863,602	(2,878,081)	-1%
23	<b>Total Gross Revenue</b>	32,660,097	32,720,021	(59,924)	0%	339,017,886	327,200,211	11,817,675	4%
24	<b>Patient Net Revenue</b>	8,447,867	8,292,539	155,327	2%	87,409,060	82,925,394	4,483,666	5%
25	Net Patient Revenue as % of Gross Revenue	25.9%	25.3%	0.5%	2%	25.8%	25.3%	0.4%	2%
26	<b>Capitation Revenue</b>	1,283,274	5,985,516	(4,702,242)	-79%	26,612,984	59,855,163	(33,242,178)	-56%
27	<b>Supplemental Patient Program Revenue</b>	9,788,859	6,305,633	3,483,226	55%	70,269,258	63,056,327	7,212,931	11%
	(Additional payments for patients)								
28	<b>Total Patient Net and Program Revenue</b>	19,520,000	20,583,688	(1,063,688)	-5%	184,291,303	205,836,883	(21,545,581)	-10%
29	<b>Other Operating Revenue</b>	1,250,079	1,182,749	67,330	6%	10,420,807	11,827,489	(1,406,682)	-12%
	(Additional payment not related to patients)								
30	<b>Total Operating Revenue</b>	20,770,079	21,766,437	(996,358)	-5%	194,712,110	217,664,372	(22,952,263)	-11%

**San Mateo Medical Center**  
**Income Statement**  
**April 30, 2017**

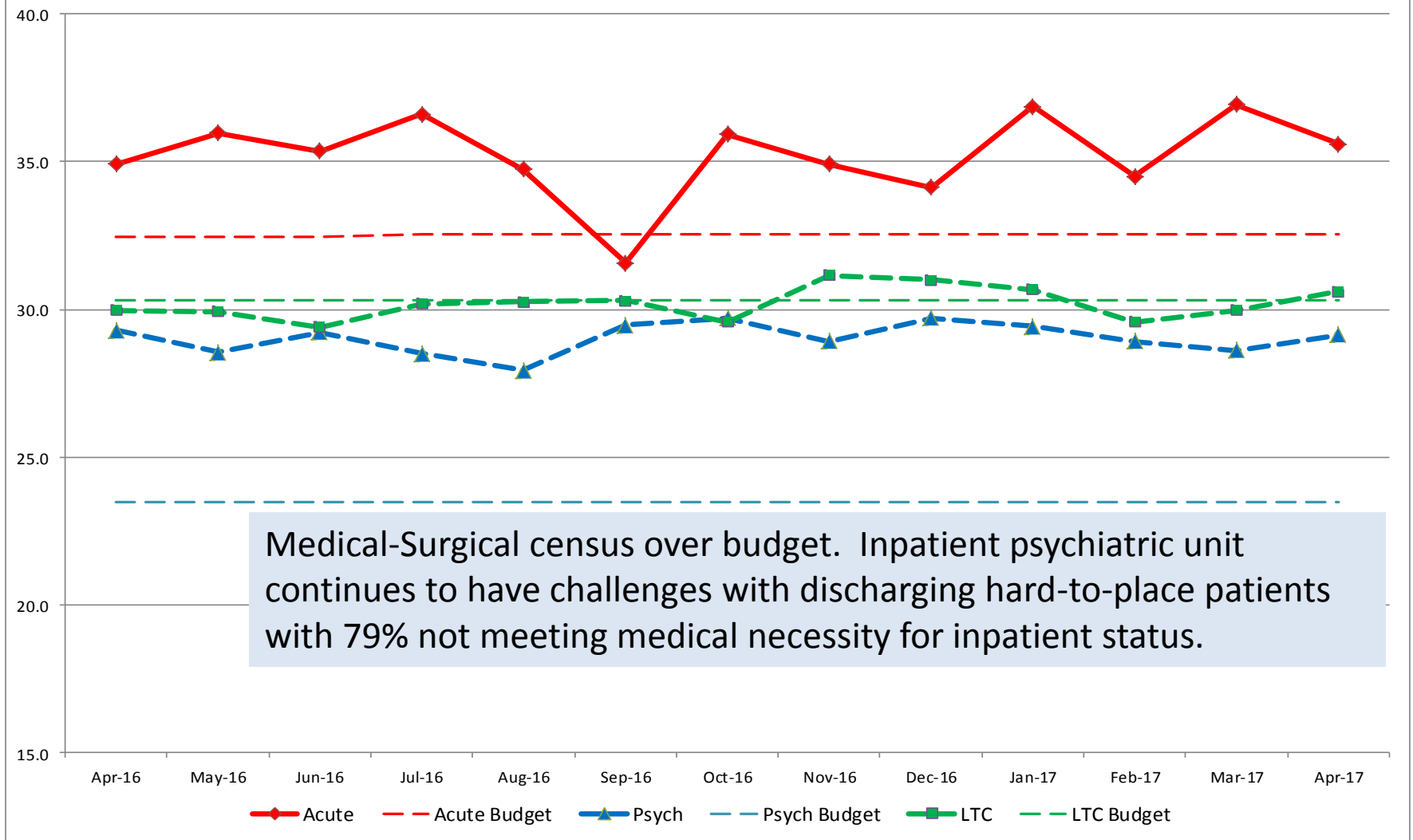
	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
	A	B	C	D	E	F	G	H
<b>Operating Expenses</b>								
31 Salaries & Benefits	14,868,507	14,824,609	(43,898)	0%	146,667,624	148,246,092	1,578,468	1%
32 Drugs	796,122	826,105	29,983	4%	7,661,941	8,261,051	599,109	7%
33 Supplies	880,551	908,129	27,578	3%	8,757,750	9,081,294	323,544	4%
34 Contract Provider Services	3,170,766	3,015,068	(155,698)	-5%	30,119,684	30,150,685	31,001	0%
35 Other fees and purchased services	3,814,694	4,579,404	764,710	17%	37,721,033	45,794,043	8,073,010	18%
36 Other general expenses	454,701	487,116	32,415	7%	4,541,362	4,871,158	329,796	7%
37 Rental Expense	133,535	206,306	72,771	35%	2,226,310	2,063,061	(163,250)	-8%
38 Lease Expense	745,153	745,153	-	0%	7,451,528	7,451,528	-	0%
39 Depreciation	244,664	241,114	(3,551)	-1%	2,465,761	2,411,138	(54,623)	-2%
40 <b>Total Operating Expenses</b>	25,108,693	25,833,005	724,312	3%	247,612,993	258,330,050	10,717,057	4%
41 <b>Operating Income/Loss</b>	(4,338,614)	(4,066,568)	(272,046)	-7%	(52,900,883)	(40,665,678)	(12,235,205)	-30%
42 <b>Non-Operating Revenue/Expense</b>	63,597	(776,901)	840,497	-108%	4,602,383	(7,769,007)	12,371,389	-159%
43 <b>Contribution from County General Fund</b>	4,843,468	4,843,468	0	0%	48,434,685	48,434,684	1	0%
44 <b>Total Income/Loss (GAAP)</b>	568,451	0	568,451		136,184	0	136,184	
(Change in Net Assets)								

# Managed Care Membership Trend



San Mateo Medical Center  
 Inpatient Census  
 April 30, 2017

	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
Patient Days	2,860	2,614	246	9%	28,750	26,486	2,264	9%

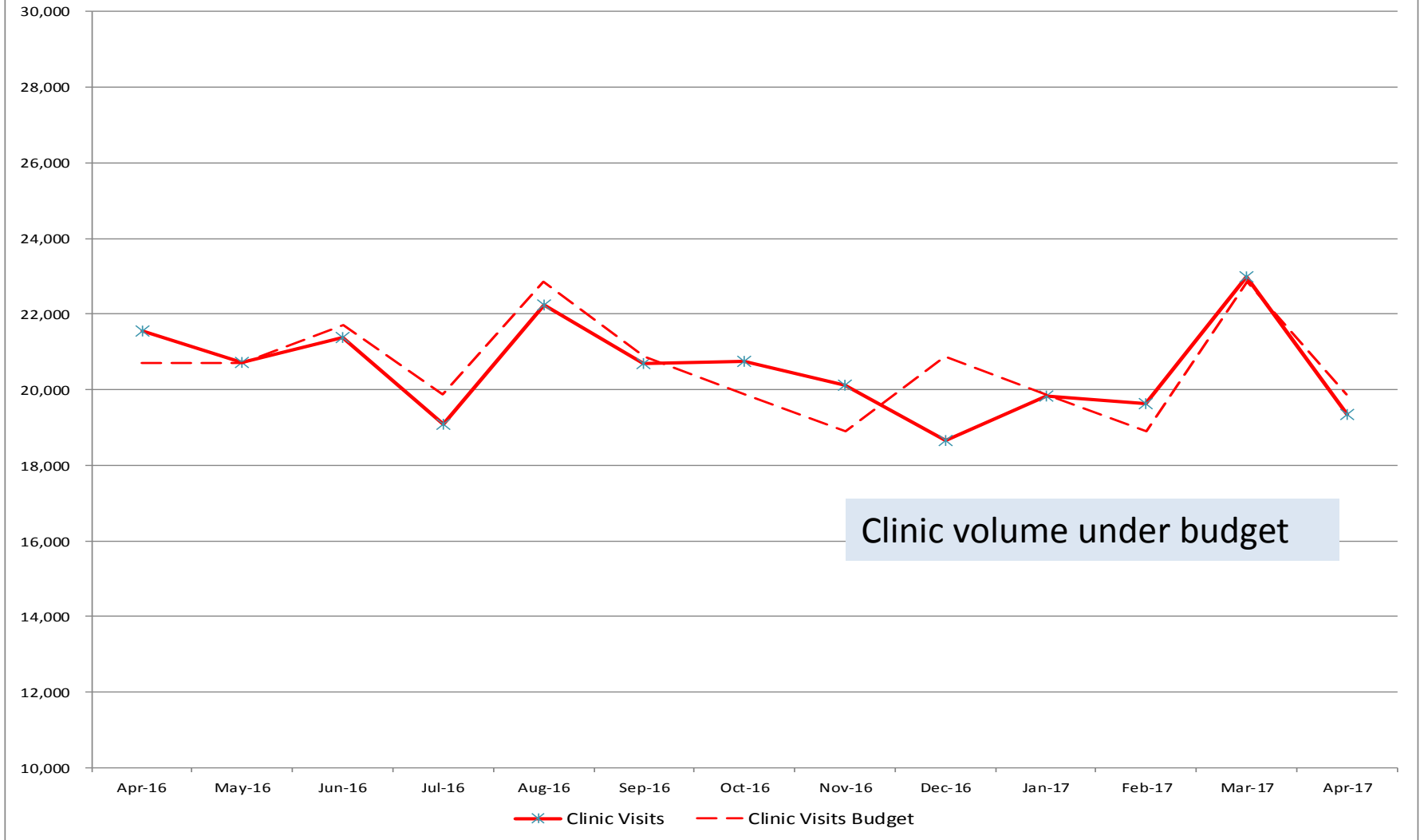


**San Mateo Medical Center  
Clinic Visits  
April 30, 2017**

MONTH			
Actual	Budget	Variance	Stoplight
19,348	19,879	(531)	-3%

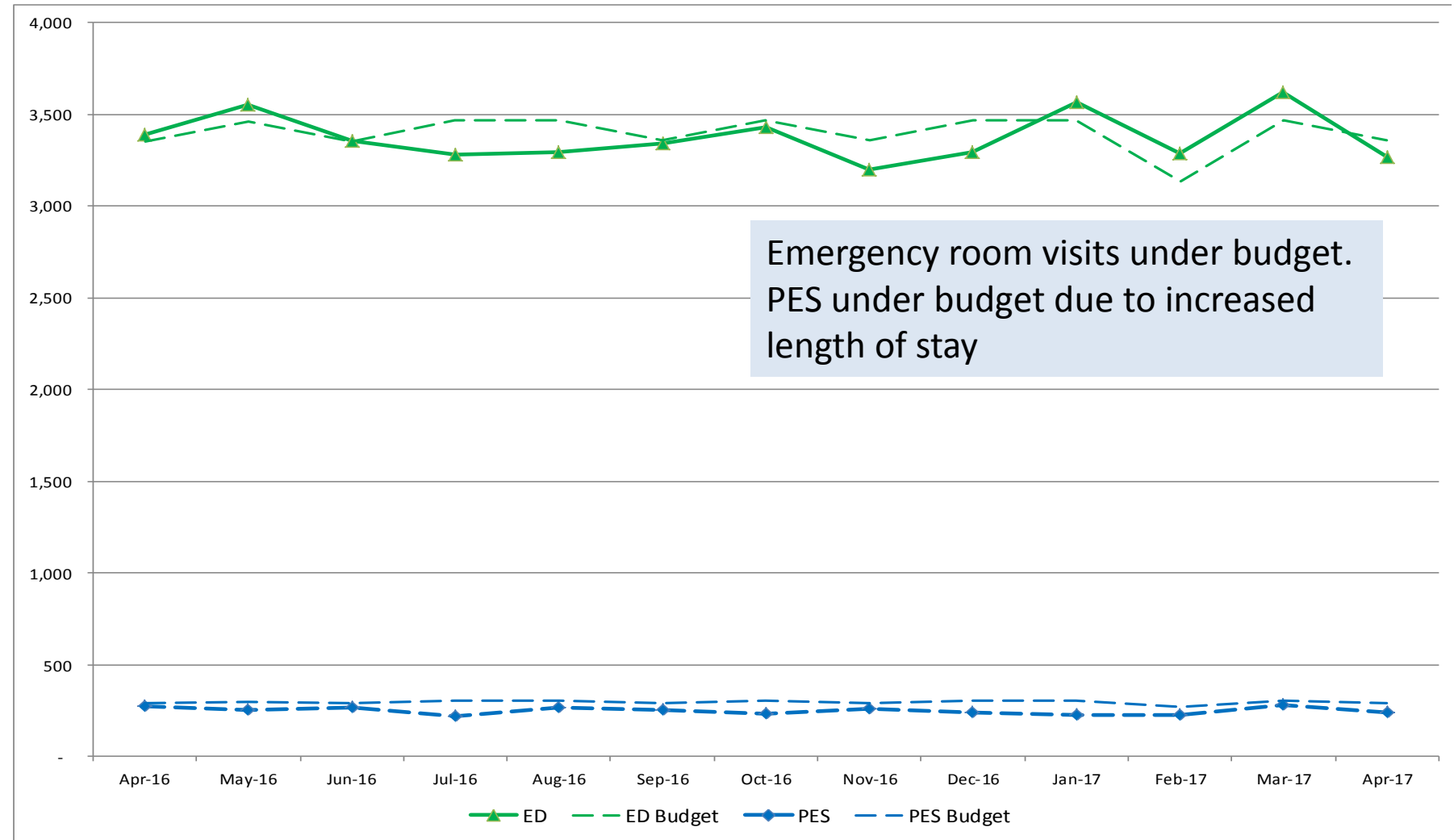
YEAR TO DATE			
Actual	Budget	Variance	Stoplight
203,324	204,754	(1,430)	-1%

**Clinic Visits**



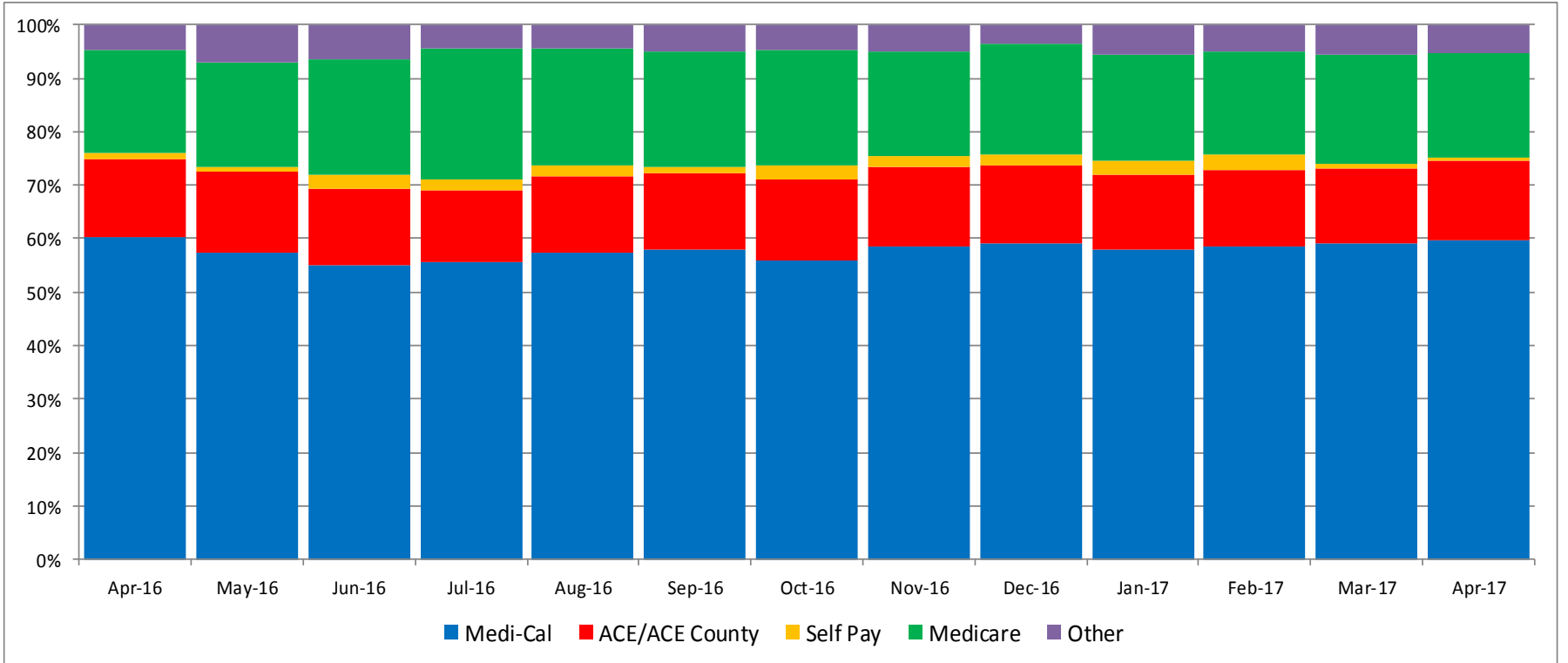
**San Mateo Medical Center  
Emergency Visits  
April 30, 2017**

ED Visits	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
	3,503	3,651	(148)	-4%	36,028	36,996	(968)	-3%



**San Mateo Medical Center  
Payer Mix  
April 30, 2017**

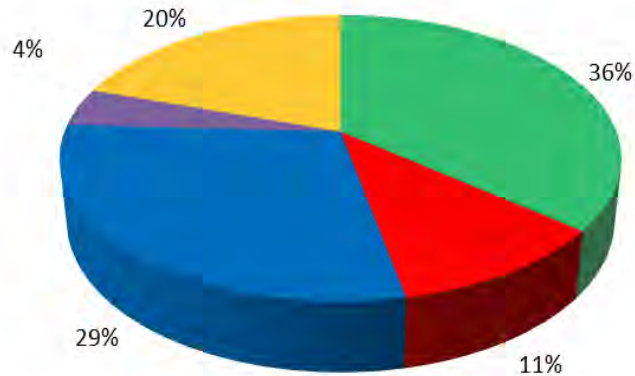
	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
<b>Payer Type by Gross Revenue</b>	A	B	C	D	E	F	G	H
15 Medicare	19.7%	16.6%	3.2%		20.9%	16.6%	4.4%	
16 Medi-Cal	59.8%	59.9%	-0.2%		58.0%	59.9%	-1.9%	
17 Self Pay	0.6%	3.5%	-2.9%		1.8%	3.5%	-1.6%	
18 Other	5.2%	5.9%	-0.7%		4.9%	5.9%	-1.1%	
19 ACE/ACE County	14.7%	14.1%	0.6%		14.4%	14.1%	0.2%	
20 <b>Total</b>	100.0%	100.0%			100.0%	100.0%		



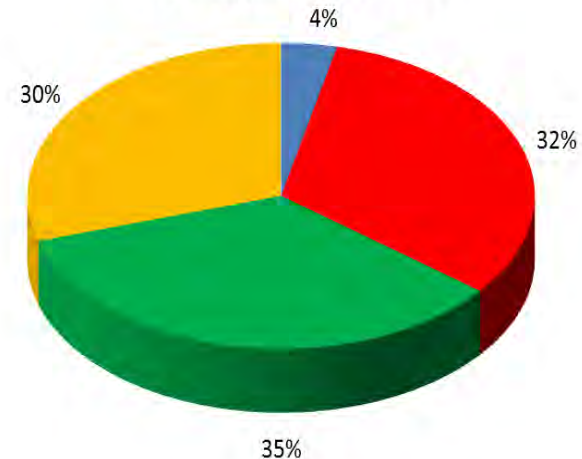
# Revenue Mix

57,000  
Managed  
Care  
Lives

## Sources of Revenue



## Managed Care Mix



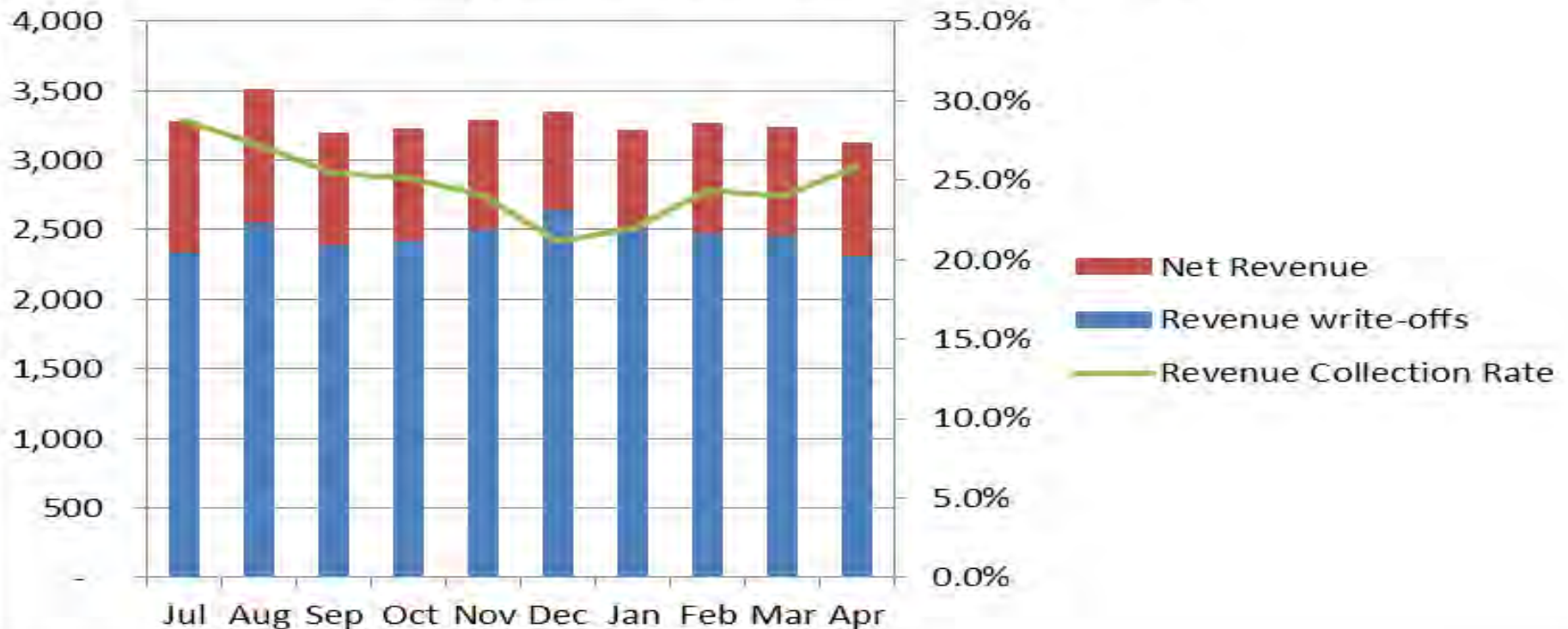
■ Fee For Service ■ Capitation ■ Supplemental ■ Other ■ County Contribution ■ Medicare ■ Medi-Cal MCE ■ Medi-Cal Traditional ■ Access to Care for Everyone

- **Managed Care** programs represent 38% 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.



# Revenue Collection Trend

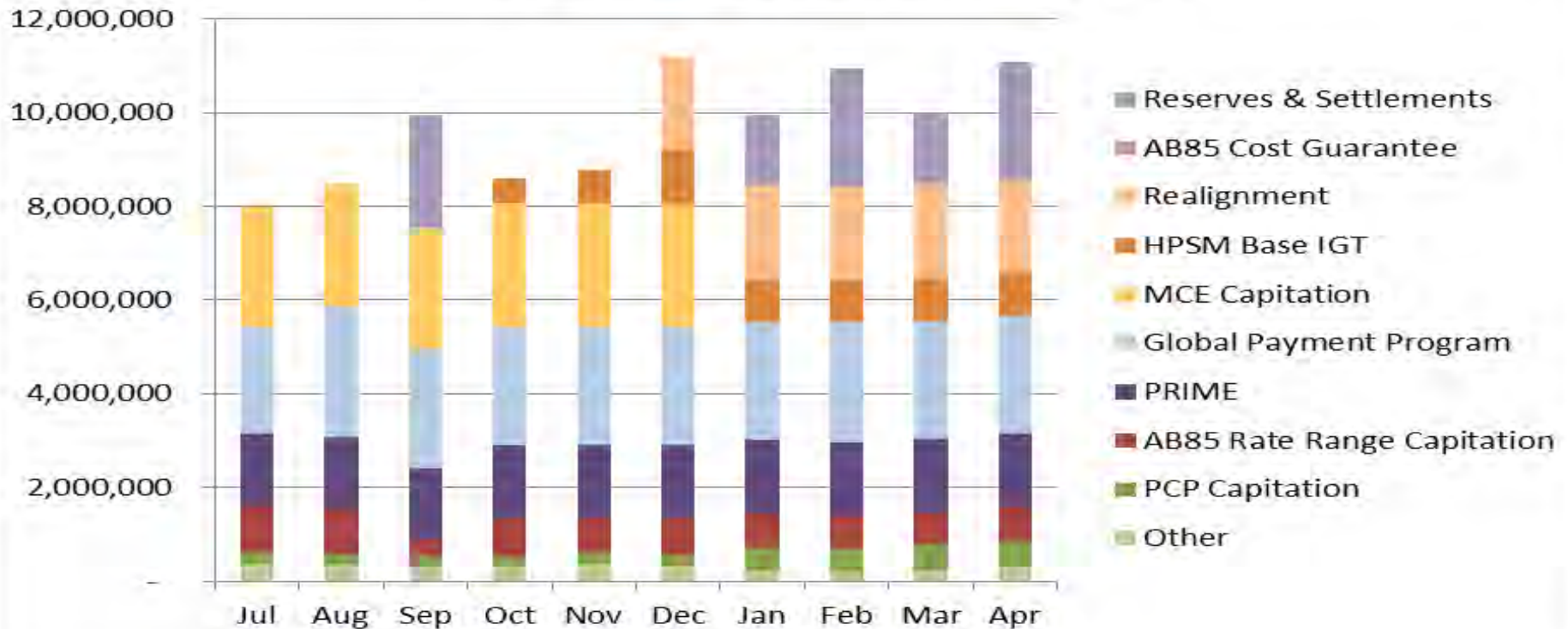
## Revenue Collections Trend



The revenue collection rate declined steadily through December due to high administrative days and lower Medi-Cal rates for acute medical-surgical patients and skilled nursing facility patients at SMMC and BLTC. Beginning January, the collection rate bounces back due to FFS revenue from MCE patients that were mostly written off before January.

# Supplemental Revenue Trend

## Supplemental Revenue Trend

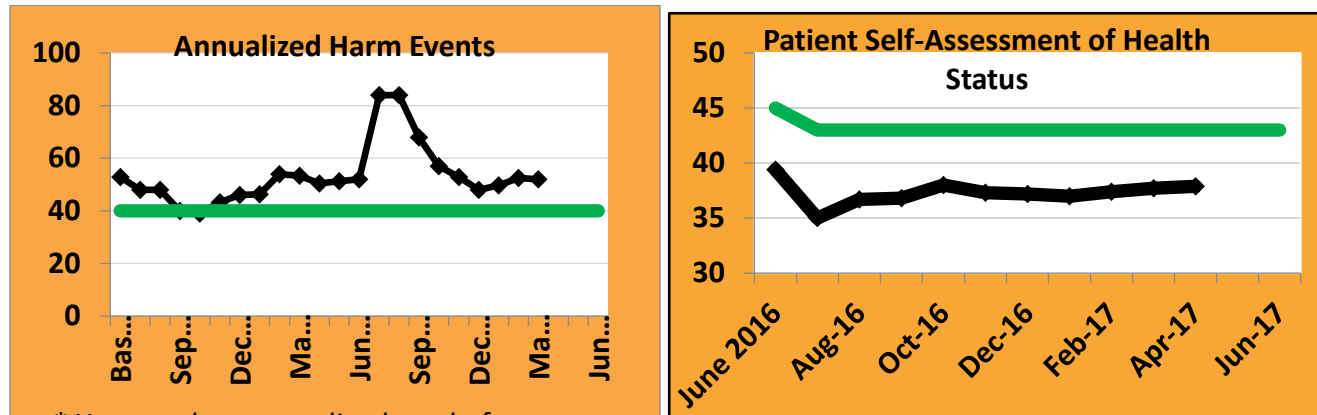


The loss of MCE Capitation is being offset by projected increases in Realignment and HPSM Base IGT payments, which are designed to kick-in to partially cover uncompensated costs. The Cost Guarantee is pending State approval and is not yet included.



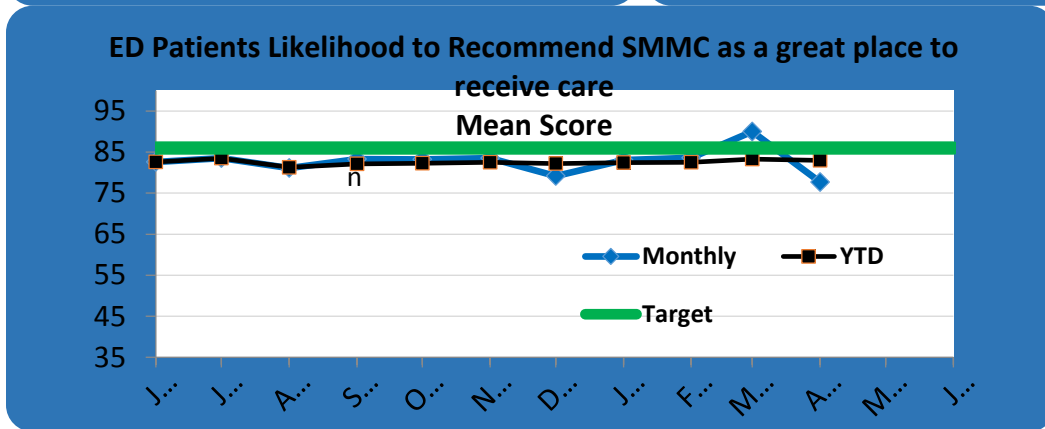
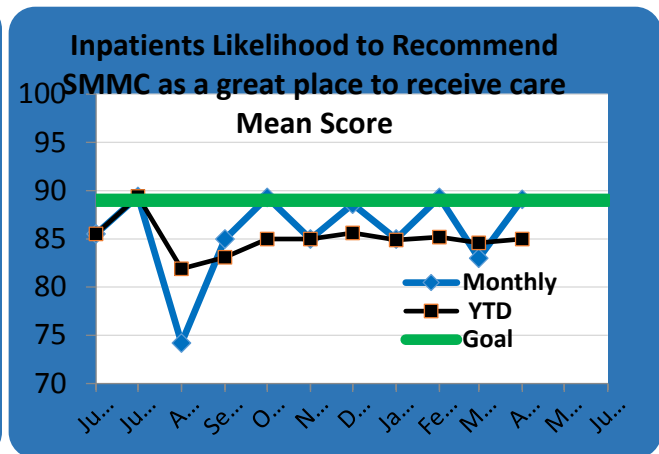
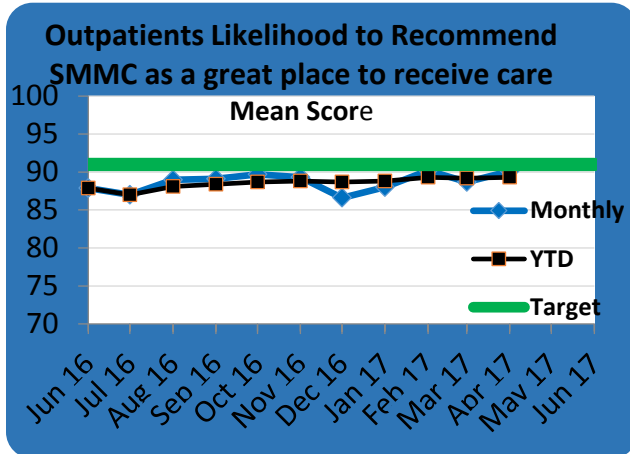
June, 2017

**EXCELLENT CARE**



- Sequoia Teen Wellness Center Aces CHDP Audit-** Sequoia Teen Wellness Center scored 100% on the site review portion of the CHDP (Child Health and Disability Prevention) Program audit conducted April 20, 2017. The Medical Record Review was completed on April 28, 2017 and also resulted in a compliance score of 100%. The clinic meets full approval as a CHDP provider. The clinic’s next CHDP facility and record review is due April 2020. Congratulations to the entire team for this impressive result.
- Coastside Dental Holds Successful 5S Event-** Coastside Dental Services began 6 years ago with four donated/refurbished dental chairs. Supplies were purchased and stored in the dental clinic based on “what we thought would be needed”. As time went on, different supplies were purchased and used. But, nothing really had a “home.” Raul Ramirez and Ann Marie Silvestri organized a 5S to address the situation. 5S (Sort, Set in Order, Shine, Standardize, Sustain) is a foundational element of LEAP and represents a disciplined approach to organizing the workplace. Every item in the clinic was removed, checked for expiration, checked for use and given a “home”. The final product was 4 new operatory chairs, the creation of 4 identical carts, one for each chair, a cart for oral surgery and a cart for endodontics (root canals). A shelf was built in the lab to allow for more work space. A divider was placed to separate the “clean” and “dirty” work areas. Everything was labeled to allow for someone new there to know where things are. This was a lot of work with a rewarding outcome. In addition to Raul and Dr. Silvestri; Liz Lopez, Elvis Hernandez and Lily Sandoval, SMMC Dental assistants worked on this from Tuesday through Friday. Drs. Escobar, Chang and Fung, each came for one day to help. The plan is to revisit the clinic in 1 – 2 months to see what needs to be “tweaked” for increased efficiency. A 5-minute, 5 S protocol also needs to be put in place. Congratulations to the entire team for this successful event.

## PATIENT CENTERED CARE



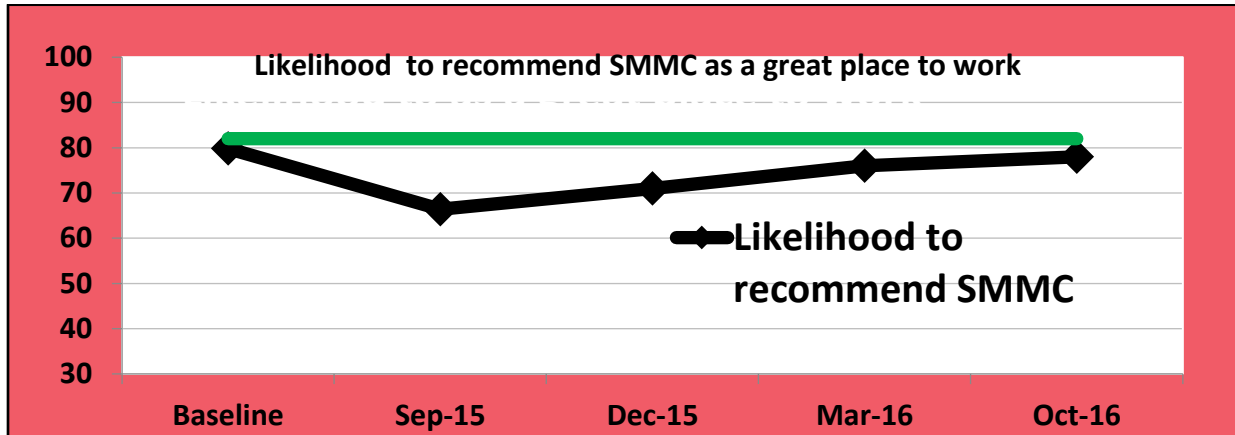
- **Another Successful Patient Experience Fair:** SMMC hosted the third annual Patient Experience Fair on May 5<sup>th</sup>. More than 200 people attended or sponsored a booth designed to inform patients, family members and staff about all the patient-centered services we offer. Our Patient and Family Advisory Council (PFAC) also promoted their role in improvement and recruited four potential new members, including one Spanish-speaking patient. Thanks to our PFAC, Patient Experience team, and staff for planning this year's event.

### Selected patient/family stories of gratitude:

- **Emergency Department:**
  - Very good, they attended me immediately the doc didn't speak Spanish but he got an interpreter, thanks.
  - Fast, efficient & courteous from checking in & out, with concerns about my problems & comfort.
  - I am very grateful with all the people that attended me they helped me a lot and I already feel very well thank you very much, I feel alive.
- **1A:**
  - I think the staff is very friendly.
    - I like that the staff is very good
- **2A/B:**
  - When I would ask them for something they always answered me nicely, thanks.

- I liked that they allowed my visitors to be with me for a long time.
- **Coastside Clinic:**
  - Always help you & treat you very good
  - All the time they are available to help you
- **Daly City Clinic:**
  - I will definitely recommend to my friends and family.
  - Always had a good experience with my provider. She's very professional
- **Fair Oaks Health Center:**
  - From reception, nurses & doctor especially all excellent.
  - Very good, they are kind & they have respect for me.
- **Innovative Care Clinic:**
  - Everything and everyone were top notch and smooth sailing.
  - The office is very clean and all the people are very nice.
- **Ron Robinson Senior Care Center:**
  - Our care provider is one of the best we ever had, she is very gentle caring very knowledgeable on my brother's condition; one of the best ever.
  - They are friendliness, courtesy and warmly also work seriously, carefully and attentively
- **South San Francisco Clinic:**
  - Immediate attention.
  - Team work and good relationship between Medical staff and patient.
- **Medical Specialty Clinic:**
  - Great job in helping people who need medical help
  - The dr. is very friendly and gentle. My mom feels comfortable with him.
- **OB/GYN Clinic:**
  - They are accommodating and friendly
- **Surgical Specialty Clinic:**
  - They went out of their way many times for me.
  - To perfection I am very happy for your attention

## STAFF ENGAGEMENT

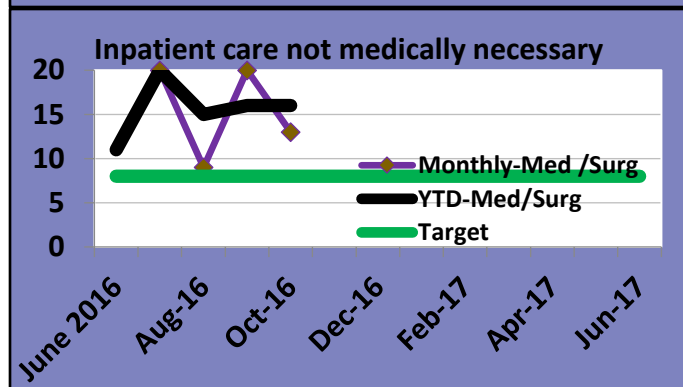
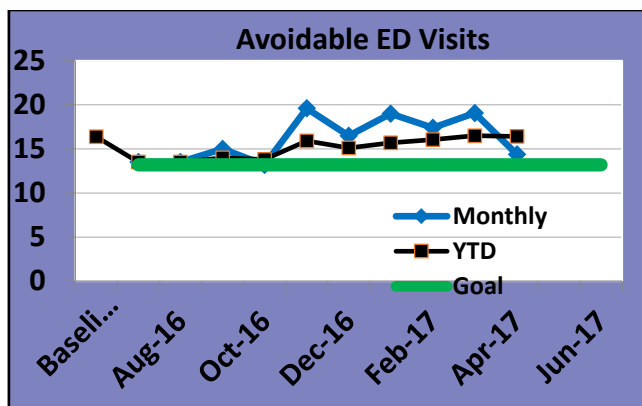
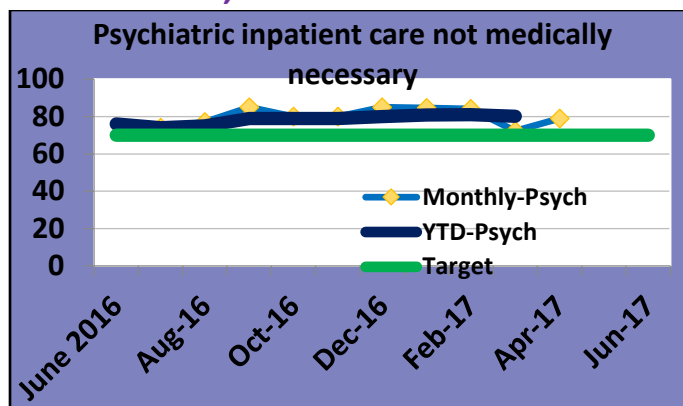


- **Hospital Week Celebrations** SMMC celebrated the hard work and dedication of all our staff and providers during Hospital Week (May 8 – 12). An appreciation lunch was served at all locations and dinner was served to after-hours hospital staff. Thanks to the planning committee for creating a fun celebration and to the executive team for serving food at several locations. I especially want to thank the Food & Nutrition Services team for their tireless work to make sure everyone enjoyed a healthy, fun meal. We couldn't have done it without them
- **Successful Nursing Skills Review Event** The Annual Skills Review for Nurses was held the week of May 8th. Hands-on skills review for all disciplines in the patient care areas is an accreditation requirement. There were 50 skills stations available 12 hours a day during 4 days. Three hundred and fifty-eight nurses participated in completing the skills stations specific for their clinical areas. Both Medical Surgical In-patient and Ambulatory Nurses participated. Our Nurse Leaders from Correctional Health also attended to identify skills stations that may be helpful for their staff to complete in the future. In the fall the Psychiatric Nurses will also have a skills review. Thank you to everyone who made this a successful event.
- **Nurse's Day Celebration** On May 12<sup>th</sup>, SMMC held its annual Nurse's Day celebration. Nurse's Day is a time in which nurses around the world recognize the work of Florence Nightingale, the first Nurse Scholar and Researcher. Post the Civil War, the first Schools of Nursing in the United States were opened based on the Principles of Nursing as developed by Florence Nightingale during the Crimean War. There was much laughter and fun during a cupcake break in the afternoon centered on a national theme: "I am a Nurse. What is your super power?" It was a great opportunity for the medical center to recognize its nursing superheroes.
- **Tina Ling Recognized as County Employee of the Month** Congratulations to Dr. Tina Ling for being awarded County Employee of the Month at the May 16th Board of Supervisor's meeting. Dr. Ling, pharmacist at Fair Oaks Health Center, was recognized for her unwavering advocacy for patient safety and education. Dr. Ling's vigilance led to an improved medication prescribing process and other patient-centered outcomes. We're proud to have Tina on our team and we appreciate the Board of Supervisors for recognizing her achievements.
- **Michelle Merola Recognized with EMS Award** Michelle Merola, RN, Charge Nurse in Surgical Specialty Clinic was recognized with a 2017 Universal Service Award from Emergency Medical



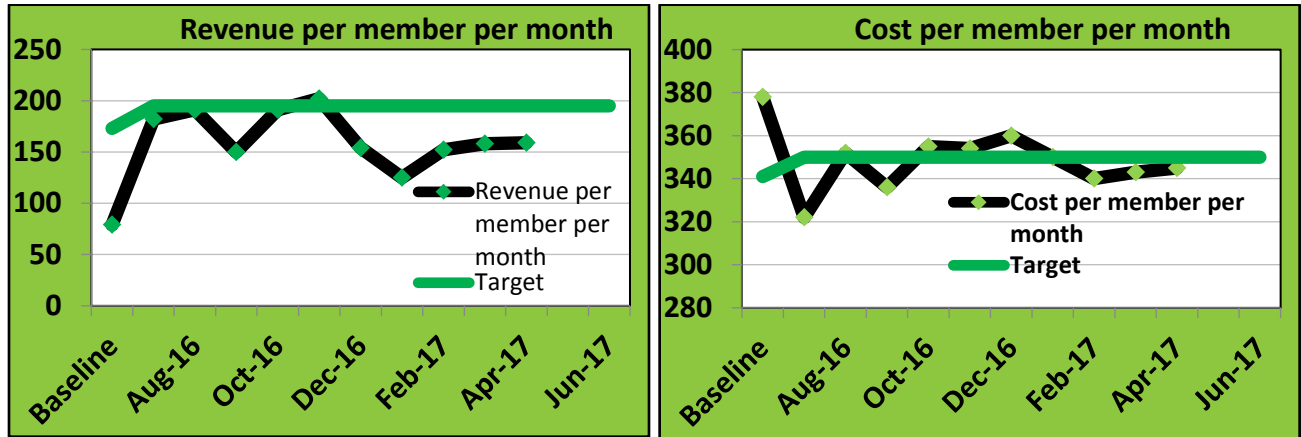
Services. Michelle was recognized at the San Mateo County EMS Peer Recognition Awards Ceremony on May 23<sup>rd</sup> for her response to a patient with a cardiac arrest in the community. Congratulations Michelle!

## RIGHT CARE, TIME AND PLACE



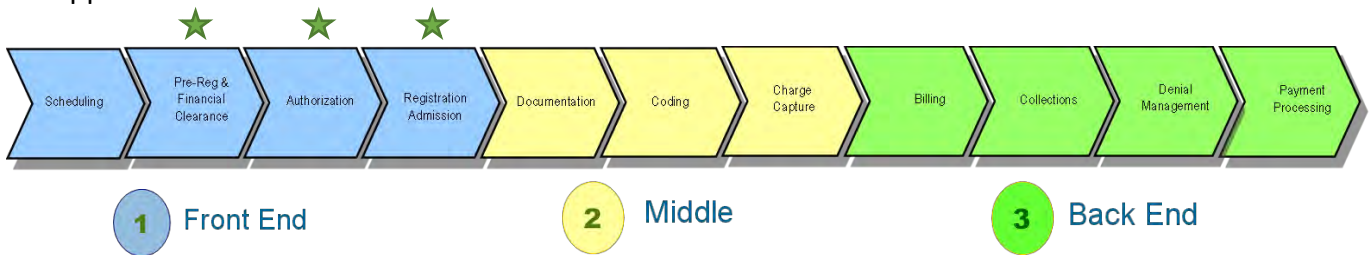
- Daly City Clinic Receives Grant to Support Express Care Services** The Daly City Clinic was recently awarded a \$200,000 grant from Mills Peninsula Medical Center. This grant is a successor to a prior grant that enabled the establishment of Express Care Services at the clinic. Express Care allows the clinic to better meet the urgent care needs of its patients so that they don't need to seek care in other inappropriate settings such as the Emergency Room.
- Coastside Clinic Completes Renovations** SMMC completed renovating the second floor at the Coastside clinic. The plan is to use the floor for specialty care. OB/GYN will be moved to the top floor and other specialties will be introduced in due course. This will go a long way in providing excellent care to our patients in this part of the county. Additionally, patients won't need to come to the main campus for certain specialty treatments which will save them travel costs and ensure they receive the right care in the right place at the right time.

## FINANCIAL STEWARDSHIP



- **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 verification accuracy and inpatient authorization approvals.



We previously reported on the workflow experiments we conducted to test the accuracy of our insurance verification system, HDX. The experiment at our Coastside Clinic showed only a 68% accuracy rate, with the primary problem being that HDX was not configured to handle the right insurance plan for patients receiving dental, PACT or CDP services. We subsequently modified HDX to automatically return the correct insurance plan code for dental services, rather than having staff change codes manually, and it increased the HDX accuracy to 80%. In June we'll roll out this modification to the other clinic locations and start work on modifications for PACT/CDP services.

Also in June we will begin an improvement event to simplify the number of insurance plan codes our staff has to choose from. We currently have over 200 plans to choose from, but we actively use 50. Decreasing the number further will streamline the registration process and decrease the number of claim denials due to billing the wrong insurance plan.

We will continue running these types of experiments to improve 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 future replacement of the Invision patient accounting system.



- **Medi-Cal 2020 Waiver: Alternative Payment Models**

The PRIME program of Medi-Cal 2020 supports sustainable delivery system reform through a requirement that California's public health care systems use alternative payment models (APMs) in which providers assume some risk for the cost and quality of services provided to the Medi-Cal managed care enrollees who are assigned to these health care systems. APMs aim to further align payments with the goal of value-based care, rather than volume-based care.

PRIME requires that by January 2018, 50% of the state's Medi-Cal managed care beneficiaries who are assigned to a public health care system will receive all or a portion of their care under a contracted APM, or funding will be at risk.

We currently have the framework for the APM requirement through contracts with HPSM for Primary Care capitation and a Pay for Performance program. Over the next several months we will work with HPSM to amend these contracts to fully address the new PRIME APM requirements

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

Indicator	Number	Change from previous month	Change from last year
ACE Enrollees	<b>21,886</b> <i>(April, 2017)</i>	0.4%	11.3%
SMMC Emergency Department Visits	<b>3,503</b> <i>(April, 2017)</i>	-10.1%	-4.3%
New Clients Awaiting Primary Care Appointment	<b>882</b> <i>(May, 2017)</i>	18.7%	578%

### Over 50 Participants and 7 Agencies Take Part in Community Shield II

On May 4, the Emergency Medical Services Division participated in “Community Shield”, a full-scale emergency preparedness exercise designed to demonstrate interagency collaboration between law enforcement, Office of Emergency Services, fire and hazmat teams in the event of an emergency. A guided tour by subject matter experts was made available immediately following the demonstration. Over 50 people and 7 agencies participated in the event. This exercise validated how critical it is to practice this scenario and the importance of collaboration when deescalating a situation, protecting the public from further harm and treating patients in a hot zone.



Photo: Preston Merchant, Health System Communications

### Health System Co-Sponsors Free Dental Clinic

On April 22-23, the California Dental Association Foundation sponsored a two-day volunteer dental clinic at the San Mateo Event Center called CDA Cares that reached 1,937 people seeking free dental care. Health System leaders and staff were proud to be a part of this massive volunteer-run effort in alignment with the work we are doing in partnership with many entities to address the oral health needs of San Mateo County residents, guided by a recently completed Oral Health strategic plan. Over 2,300 volunteer dentists and dental professionals at the clinic provided more than 12,000 procedures, totaling the equivalent of \$1.6 million in services. San Mateo Medical Center’s Dental Program Manager, Dr. Ann Marie Silvestri played a vital role in this effort, and has since been awarded the San Mateo County Dental Society’s Distinguished Service Award for “the selfless work done on behalf of organized dentistry, our community, and the society.”



Photo: CDA Cares

### Over 40 Residents Participate in Hands-Only CPR Training

On Saturday May 6, Emergency Medical Services, in partnership with American Medical Response of San Mateo County, held a public hands-only CPR training targeted to central County residents. The event, which took place at the Health System Campus in San Mateo, trained over 40 residents who learned critical life-saving skills in the event that someone goes into cardiac arrest.

### Stand Down Event Provides Homeless Vets Health Services

Health System staff participated in the SMC Human Services Agency’s first Stand Down event for homeless Veterans. The Stand Down, a military term for an opportunity to achieve a brief respite from combat, brought health system staff together with partners from local businesses, government agencies, tribal governments, community, and faith-based service providers to hold events for homeless and at-risk for homeless veterans and their families. Approximately 150 veterans benefitted from over 50 organizations providing direct services on-site, including medical, dental and mental health services, including the PHPP Mobile Clinic, employment and housing assistance, animal licensing and spay/neuter, criminal record expungement, U.S. Department of Veterans Affairs services, and distribution of toiletry kits and military surplus items. At the event, HSA was recognized by Congresswoman Jackie Speier. County Supervisor (and Vietnam veteran) Warren Slocum presented a Board Resolution, and veteran and County Manager John Maltbie expressed gratitude to the attendees for their military service.



Photo: Preston Merchant, Health System Communications

### Inaugural Partnership with College of San Mateo for Mental Health Awareness Month

BHRS is sponsoring more than 20 events as part of May’s Mental Health Awareness Month, which began with a kickoff art and resource fair at the College of San Mateo (the first time BHRS had partnered with the College). Focusing on building community and reducing the stigma associated with mental health issues, the events include forums for mental health clinicians, a film festival, and opportunities to share personal stories.

### Groundbreaking on 15-Unit Waverly House

San Mateo County officials joined in the groundbreaking on May 10 for a 15-unit apartment complex that will allow individuals with a mental illness to live in a supportive environment and contribute to their community. The ceremony featured stories from those impacted by a mental illness as well as remarks by San Mateo County Supervisor Warren Slocum and Stephen Kaplan, Director of the Health System’s Behavioral Health and Recovery Services.

