



San Mateo Medical Center
A County System of Healthcare

BOARD OF DIRECTORS MEETING

Thursday, May 5, 2016

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 5, 2016 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. Alex Ding

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

Bernadette Mellott

F. CONSENT AGENDA

TAB 1

Approval of:

1. April 7, 2016 Meeting Minutes
2. Compliance Report

G. MEDICAL STAFF REPORT

Chief of Staff Update

Dr. Janet Chaikind

H. ADMINISTRATION REPORTS

- 1. Palliative Care *Dr. CJ Kunnappilly*..... Verbal
- 2. New Patient Connection Center *John Thomas* Verbal
- 3. Psychiatric Emergency Response Team *Louise Rogers* Verbal
- 4. Financial Report *David McGrew*..... **TAB 2**
- 5. CEO Report *Dr. CJ Kunnappilly*..... **TAB 2**
- 6. Pillar Goals Update *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

MEDIA ARTICLES

TAB 3

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 7, 2016
Executive Board Room

Board Members Present

Supervisor Adrienne Tissier
John Maltbie
Louise Rogers
Dr. CJ Kunnappilly
Dr. Janet Chaikind
Dr. David Lin
Dr. Alex Ding
Deborah Torres

Staff Present

Dr. Serena Lee
Julie Griffiths
John Thomas
Dr. Alpa Sanghavi
Glenn Levy
Liz Evans
David McGrew
Michelle Lee
Karen Pugh
Kimberlee Kimura
Gary Horne
Tosan Boyo
Bernie Mellon
Joan Spicer

Members of the Public

SMC Resident (by phone)

ITEM	DISCUSSION/RECOMMENDATION	ACTION
Call to Order	Supervisor Tissier 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 8:11 AM to Open Session. A quorum was present (see above).	
Report out of Closed Session	Medical Staff Credentialing Report for April 7, 2016. Medical Executive Committee Minutes from March 8, 2016. QIC Minutes from February 23, 2016.	Glenn Levy reported that the Board approved the Credentialing Report and the QIC Minutes. And it accepted the MEC Minutes.
Public Comment	San Mateo County Resident (by telephone) voiced concerns about accessibility to the building especially for those persons with mobility restrictions. Resident believes there may have been violations of patient privacy and was concerned about the quality of care provided by the physicians.	
Foundation Report Bernadette Mellott	Four new Directors have joined the Foundation Board. They are Dr. Anupam Agarwal, Dr. Grace Hassid, Burke Malin, and Robin Suzuki. Donations to the Foundation through Silicon Valley Gives on May 3, will support the Bundle of Joy program. The program helps new mothers get off to a good start before and after the arrival of their newborns. The Annual Foundation Golf Tournament will be on August 29, 2016 at the Stanford Golf Course.	FYI

Consent Agenda	<p>Approval of:</p> <ol style="list-style-type: none"> 1. Hospital Board Meeting Minutes from March 3, 2016. 2. Report from Burlingame Long Term Care. 	It was MOVED, SECONDED and CARRIED unanimously to approve all items on the Consent Agenda.
Medical Staff Report Dr. Janet Chaikind	The Medical Staff met with the physician surveyor during the Joint Commission Survey. They had good interactions and were pleased with the results.	FYI
Quality Report Dr. Alpa Sanghavi Chief Quality Officer	<p>SMMC Emergency Dept presentation by Dr. Serena Lee, Medical Director, and Julie Griffiths, Nurse Manager.</p> <p>ED Flow and Throughput</p> <ul style="list-style-type: none"> • Since January 2015, monthly volume was between 4100 to 3100 visits. For March 2016, it was 3600. <p>Quality Measures</p> <ul style="list-style-type: none"> • Since January 2014, the Sepsis Screening Accuracy Rate was between 94% to 98%. For the period October to December 2015, the accuracy rate was 98%. <p>Patient Experience</p> <ul style="list-style-type: none"> • The Press Ganey results for the ED overall was 83.8 in January 2016. <p>Successes:</p> <ul style="list-style-type: none"> • Triage Process • Charge Nurse Leadership • Team Huddles • Stable provider and site management team <p>Challenges:</p> <ul style="list-style-type: none"> • ED Boarding (2AB, ICU, PES) <p>Projects:</p> <ul style="list-style-type: none"> • TAT-D Initiatives • Scribe Program • Communication Training for Providers • WE CARE Training for Nursing 	FYI
Health System Louise Rogers Health System Chief	<p>Medical Education for the Health System presentation by Megan Becker, Manager of Medical Education.</p> <p>ME is important because CME requires it for licensing. It also ensures that we are providing the highest level of care. SMMC's CME program is off probation and in full compliance with all standards. During the period July 2015 – March 2016, there have been 27 CME events, 255 MD's/OD's attended, and 343 other provider attendees. CME Accreditation will be system-wide: SMMC and BHRS currently and FHS, CHS, and PHPP will be added soon.</p>	FYI

	ME is readily accessed through the HS intranet and as a result, website and email notifications have increased attendance at CME events and increase use of online resources. Planned for April – December 2016, at least three CME events per month. Live streaming and archiving of events and technology solution for improved access to the library.	
Financial Report David McGrew, CFO	The February FY15/16 financial report was included in the Board packet and David McGrew answered questions from the Board.	FYI
CEO Report Dr. Chester Kunnappilly, interim CEO	Dr. Kunnappilly presented the CEO report which is included in the Board packet and answered questions from the Board. He also updated the Board on the Strategic Goals which were included. The Joint Commission survey this time was more detailed and intense, similar to a CMS survey. We are currently addressing the identified issues and do not foresee any delays. Joint Commission will be back within the next 45 days. Dr. Kunnappilly recognized staff for their speedy response and action.	FYI
Health System Report Louise Rogers Health System Chief	Louise Rogers referred to the March 2016 snapshot which was included in the Board packet. The county has two confirmed Zika virus cases and they were both associated to travel. There are now a total of 30 cases in California.	FYI
County Manager John Maltbie	No report.	FYI
Board of Supervisors Supervisor Tissier	No report.	FYI

Supervisor Tissier adjourned the meeting at 9:15 AM. The next Board meeting will be held on April 7, 2016.

Minutes recorded by:



Michelle Lee, Executive Secretary

Minutes approved by:

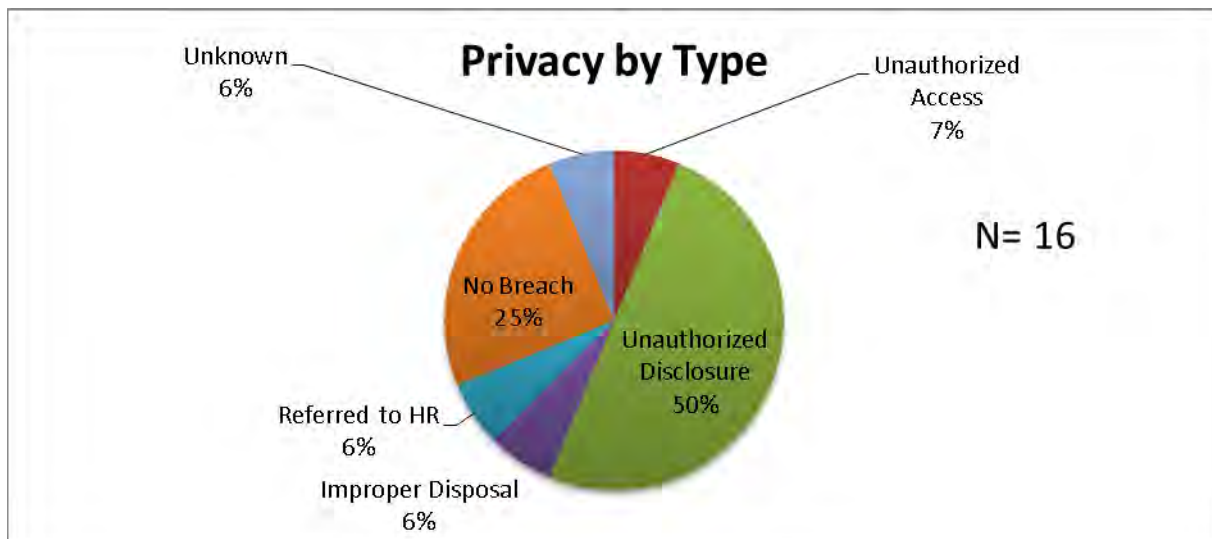
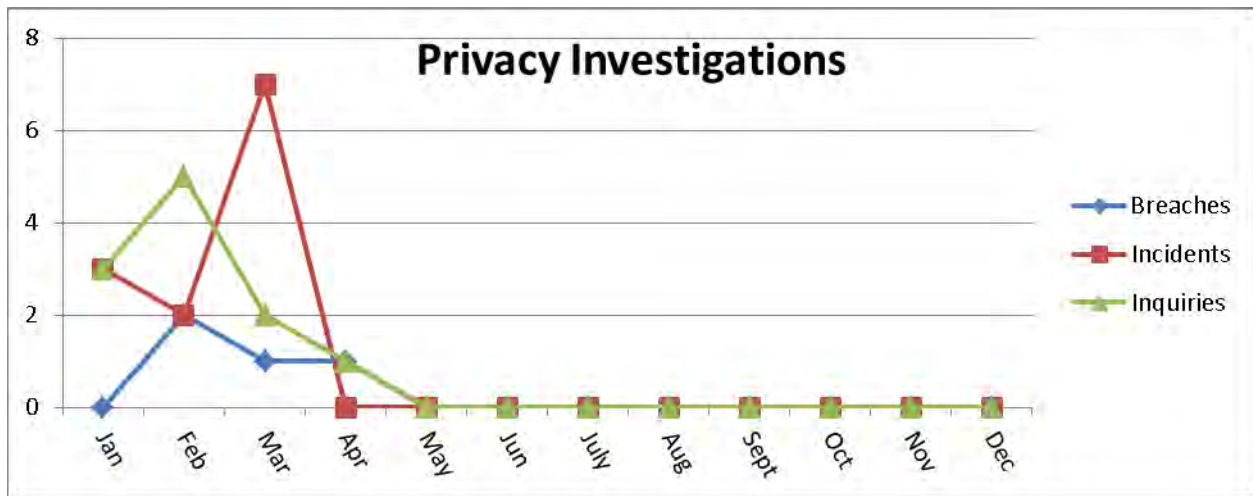


Dr. Chester Kunnappilly, Chief Executive Officer (interim)

DATE: April 29, 2016
TO: San Mateo Medical Center Board of Directors
FROM: Teasha Fleming, CHC, Manager, Corporate Compliance and HIPAA
RE: Compliance/Privacy Report to the Hospital Board

HIPAA

In the 1st Quarter of the calendar year, there were 3 breaches, 12 incidents and 10 inquiries.



The annual Breach report to Health & Human Service was due to the Secretary within 60 days of the end of the calendar year. All required reports were submitted prior to the due date. As of today, there has been no response from HHS but a response not is expected.

Compliance

Billing - Coding	COI/Vendor Relationships	Stark Law / Anti-kickback	Other Compliance*	Total
1	0	0	2	6

* Other compliance includes general inquiries but no true regulatory issue.

Exploding CDM Codes:

Edison Clinic

A facility charge was automatically included for services provided at the Edison Clinic. The classification for Edison Clinic does not allow for billing a facility charge. The Revenue Integrity Team was tasked with removing these charges daily but some charges remained on accounts and were billed erroneously.

Revised claims have been submitted to appropriate parties, removing the erroneous charge and refunding any payment made. A script was created to automatically remove these charges until new CDMs could be built that did not include the facility charge. The new CDMs were approved on 3/9/16.



San Mateo Medical Center
A County System of Healthcare

TAB 2

ADMINISTRATION REPORTS

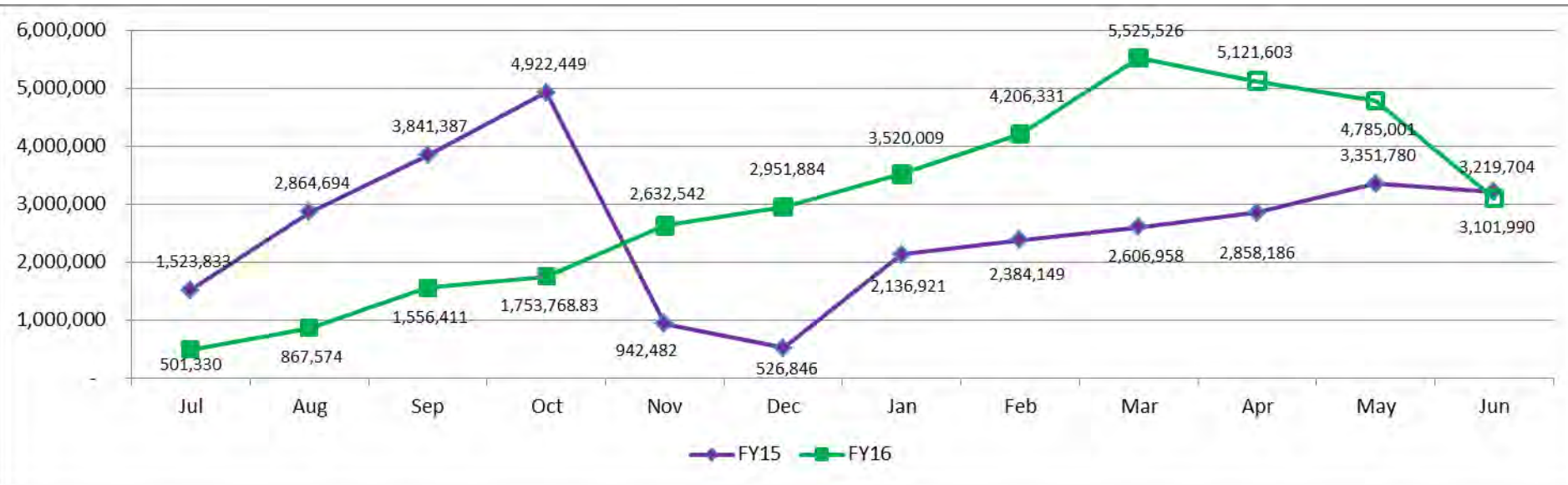


San Mateo Medical Center
A County System of Healthcare

March FY 2015-16 Financial Report

Board Meeting
May 5, 2016

Financial Highlights – Net Income Trend



Financial Drivers:

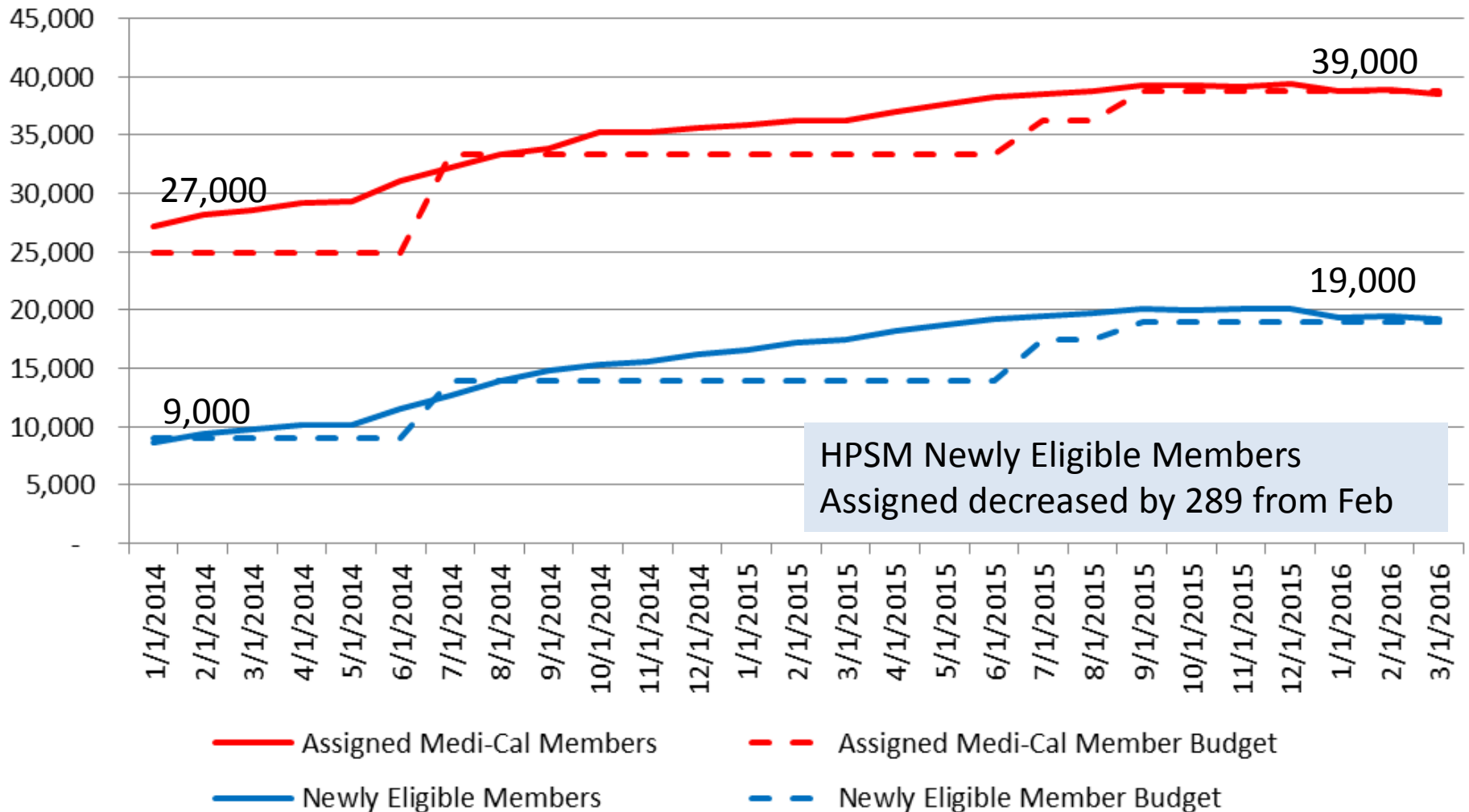
- Inpatient Revenue - Volume
- Supplemental Program Revenue
- Drug Expenses
- Other Fees and Purchased Services – ISD charges

Full Year Forecast:

- Uncertainty around FQHC claiming and Medi-Cal audits may drive negative results in the last quarter

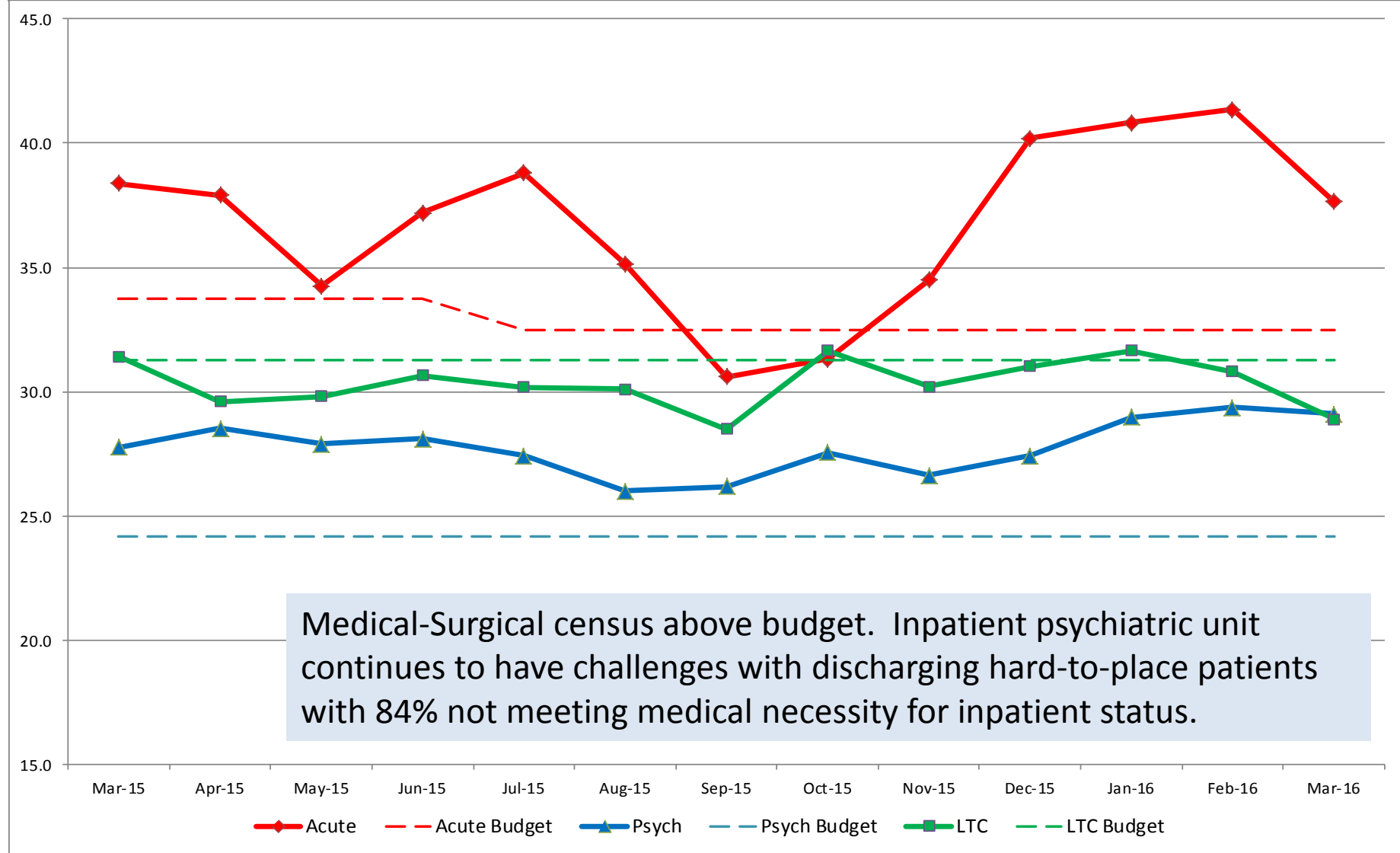
SMMC Medi-Cal Members

HPSM Newly Eligible and Assigned Members



**San Mateo Medical Center
Inpatient Census
March 31, 2016**

	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
Patient Days	2,965	2,694	271	10%	26,036	23,894	2,142	9%

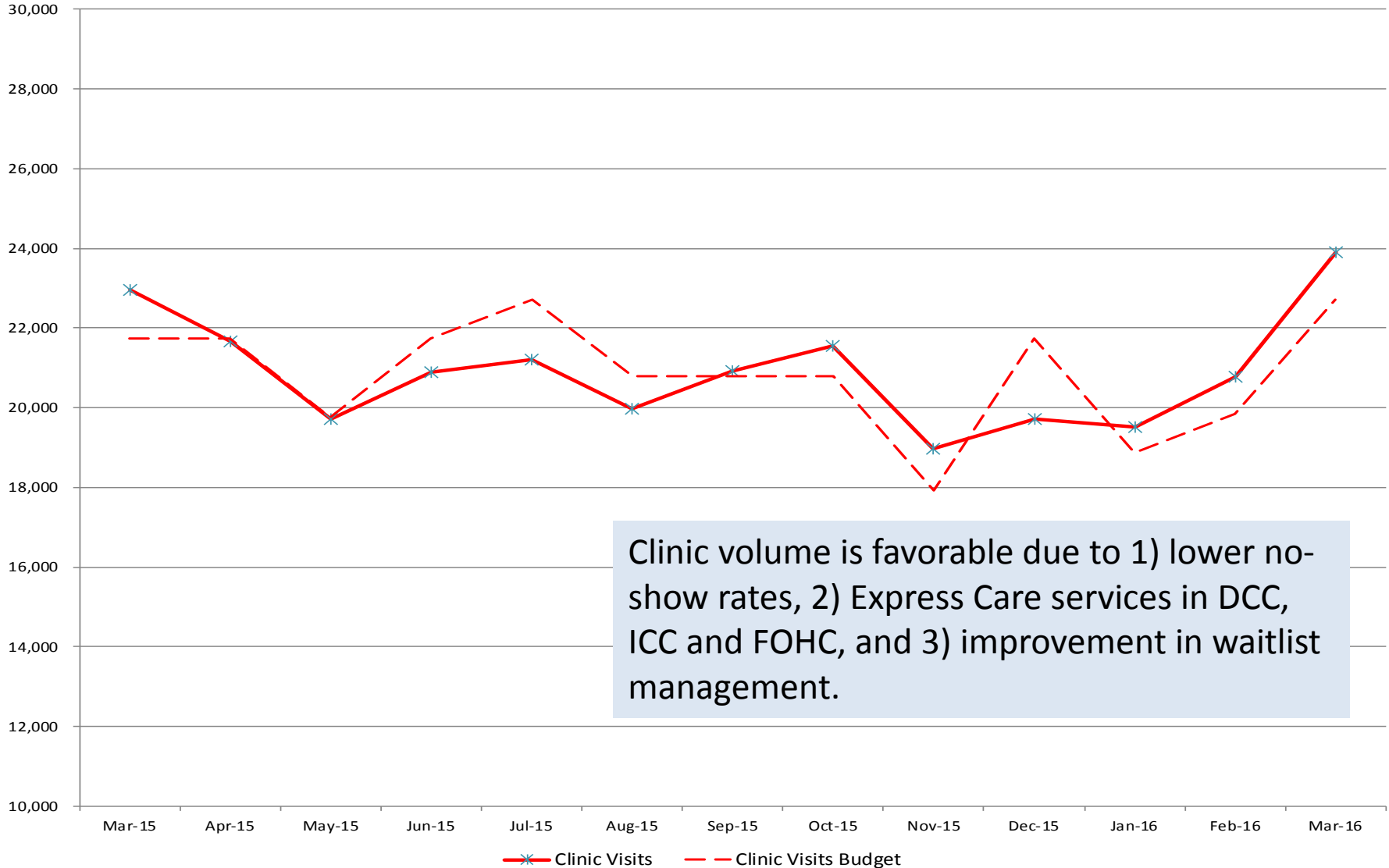


**San Mateo Medical Center
Clinic Visits
March 31, 2016**

MONTH			
Actual	Budget	Variance	Stoplight
23,908	22,679	1,229	5%

YEAR TO DATE			
Actual	Budget	Variance	Stoplight
186,514	185,380	1,134	1%

Clinic Visits

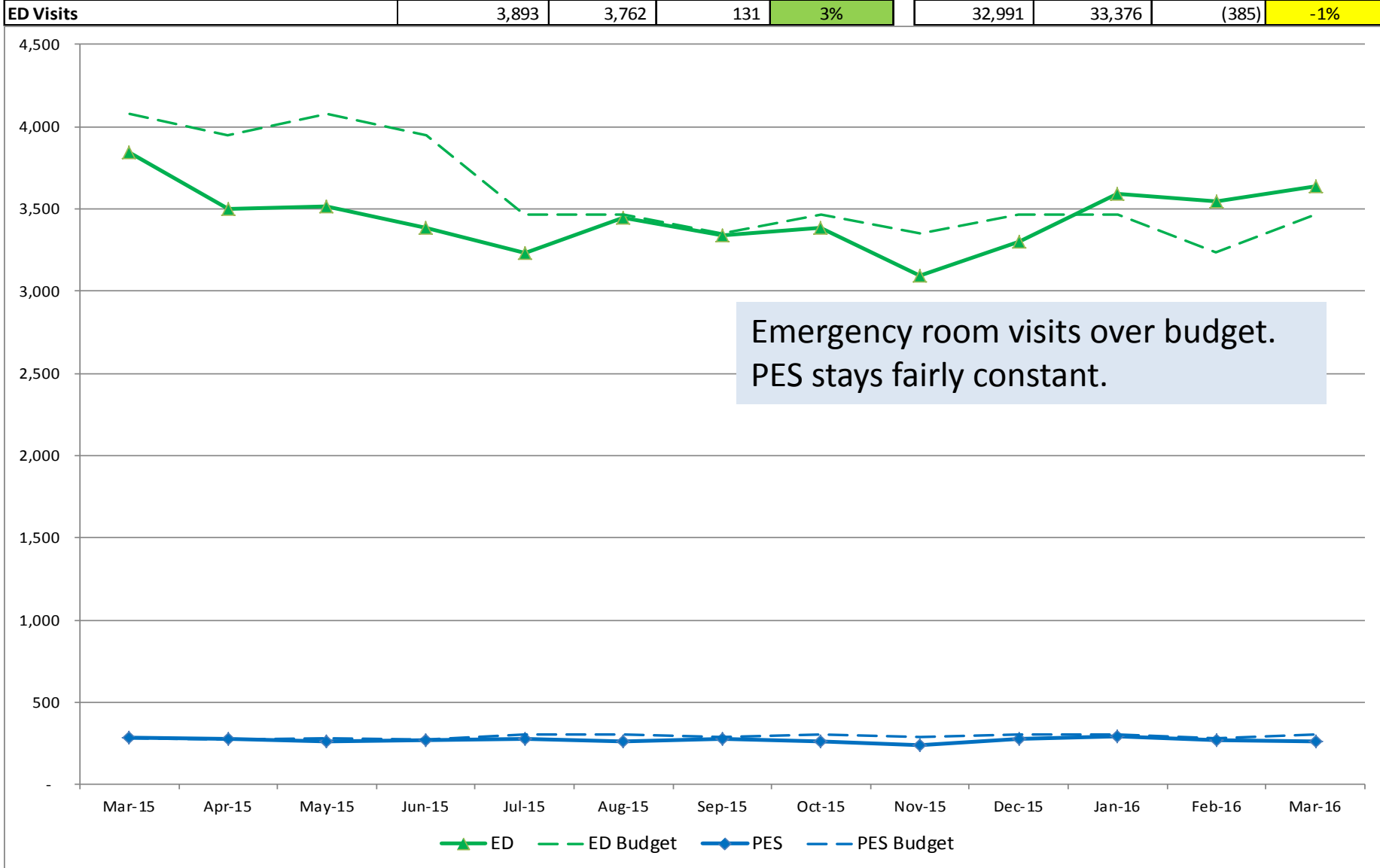


Clinic volume is favorable due to 1) lower no-show rates, 2) Express Care services in DCC, ICC and FOHC, and 3) improvement in waitlist management.

**San Mateo Medical Center
Emergency Visits
March 31, 2016**

MONTH			
Actual	Budget	Variance	Stoplight
3,893	3,762	131	3%

YEAR TO DATE			
Actual	Budget	Variance	Stoplight
32,991	33,376	(385)	-1%

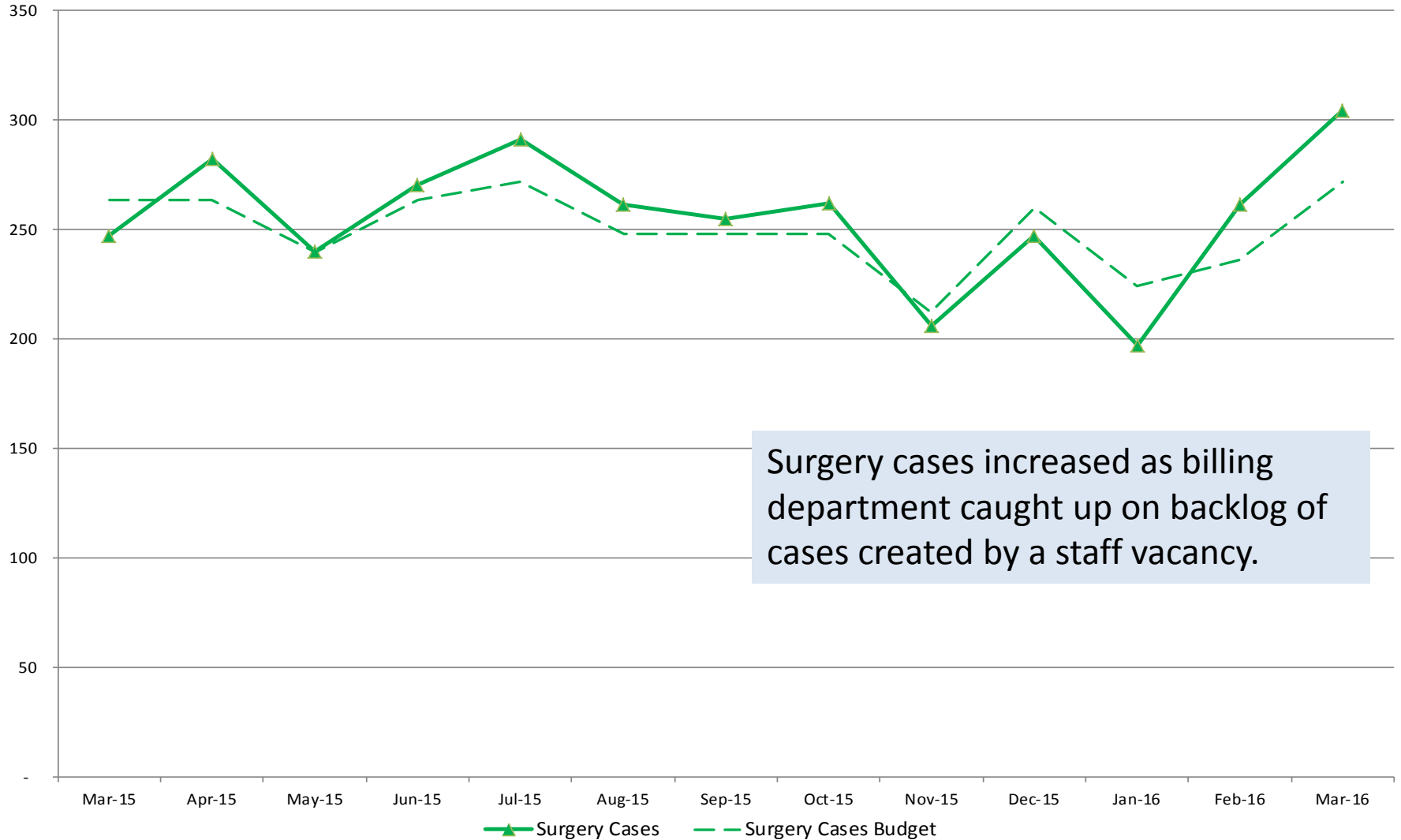


**San Mateo Medical Center
Surgery Cases
March 31, 2016**

MONTH			
Actual	Budget	Variance	Stoplight
304	271	33	12%

YEAR TO DATE			
Actual	Budget	Variance	Stoplight
2,284	2,219	65	3%

Surgery Cases



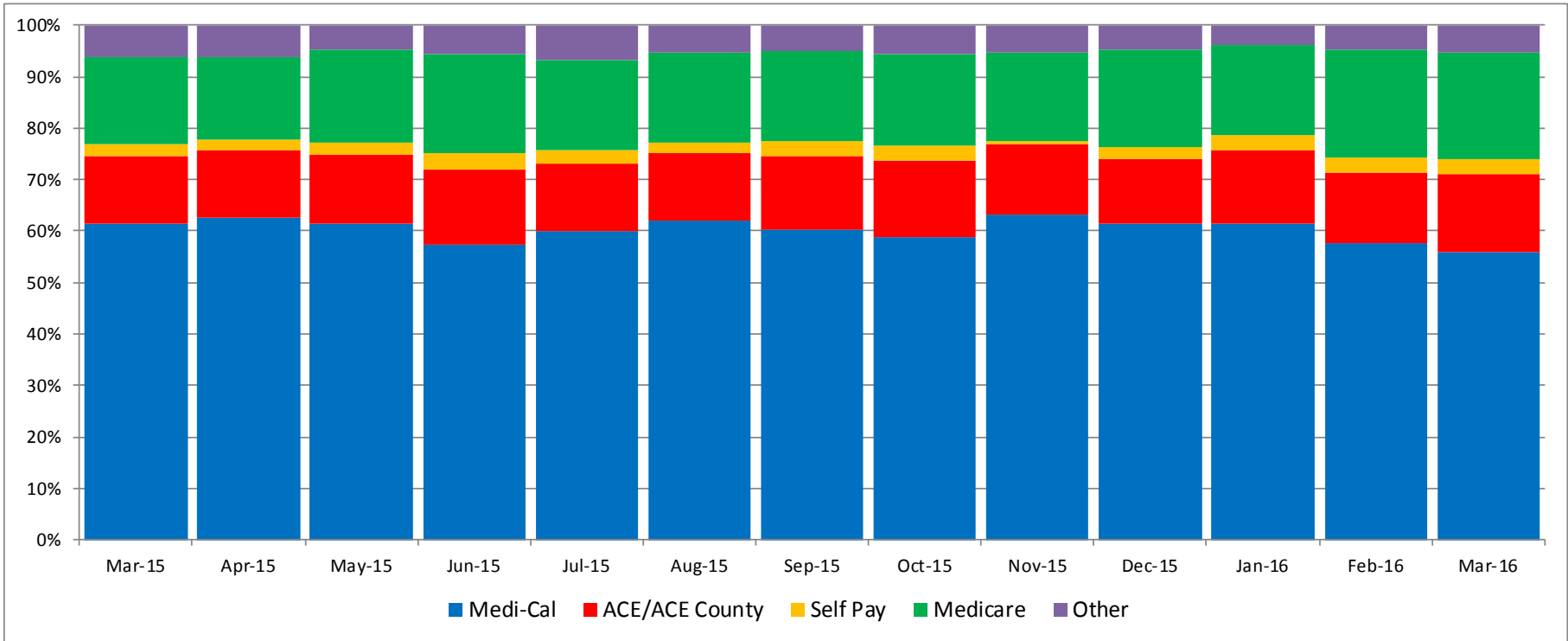
APPENDIX

San Mateo Medical Center

Payer Mix

March 31, 2016

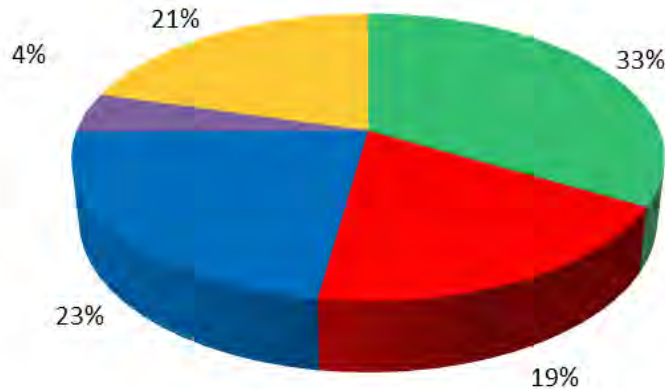
	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
Payer Type by Gross Revenue	A	B	C	D	E	F	G	H
15 Medicare	20.6%	16.6%	4.0%		18.4%	16.6%	1.8%	
16 Medi-Cal	55.8%	59.9%	-4.1%		60.0%	59.9%	0.1%	
17 Self Pay	3.0%	3.5%	-0.4%		2.5%	3.5%	-1.0%	
18 Other	5.3%	5.9%	-0.7%		5.2%	5.9%	-0.7%	
19 ACE/ACE County	15.3%	14.1%	1.2%		13.9%	14.1%	-0.2%	
20 Total	100.0%	100.0%			100.0%	100.0%		



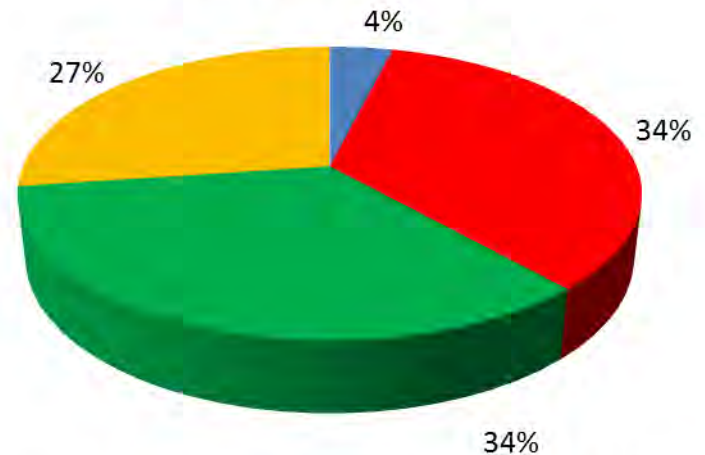
Revenue Mix

60,000
Managed
Care
Lives

Sources of Revenue



Managed Care Mix



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

■ Medicare ■ Capitation ■ Traditional ■ ACE County

- **Managed Care** programs represent 65% 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.

Income Statement
March 31, 2016

	MONTH				YEAR TO DATE				
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight	
	A	B	C	D	E	F	G	H	
1 Income/Loss (GAAP)	1,319,195	(0)	1,319,195		5,525,526	-3	5,525,529		
2 HPSM Medi-Cal Members Assigned to SMMC	38,570	38,773	(203)	-1%	350,518	348,957	1,561	0%	
3 HPSM Newly Eligible Medi-Cal Members Assigned to SMMC	19,665	19,018	647	3%	178,145	171,162	6,983	4%	
4 Patient Days	2,965	2,694	271	10%	26,036	23,894	2,142	9%	
5 ED Visits	3,893	3,762	131	3%	32,991	33,376	(385)	-1%	
6 ED Admissions %	10.2%	-	-		6.2%	-	-		
7 Surgery Cases	304	271	33	12%	2,284	2,219	65	3%	
8 Clinic Visits	23,908	22,679	1,229	5%	186,514	185,380	1,134	1%	
9 Ancillary Procedures	73,268	66,635	6,633	10%	603,244	545,342	57,902	11%	
10 Acute Administrative Days as % of Patient Days	8.7%	9.0%	0.3%	4%	9.1%	9.0%	-0.1%	-1%	
11 Psych Administrative Days as % of Patient Days (Days that do not qualify for inpatient status)	84.0%	58.0%	-26.0%	-45%	75.8%	58.0%	-17.8%	-31%	
Pillar Goals									
12 Patient & Capitation Revenue PMPM	179	174	5	3%	164	174	(10)	-6%	
13 Operating Expenses PMPM	342	342	0	0%	334	342	8	2%	
14 Full Time Equivalentents (FTE)	1,133	1,164	31	3%	1,094	1,164	70	6%	

San Mateo Medical Center
Income Statement
March 31, 2016

	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
	A	B	C	D	E	F	G	H
21 Inpatient Gross Revenue	9,960,143	7,848,949	2,111,194	27%	82,139,240	70,640,545	11,498,696	16%
22 Outpatient Gross Revenue	27,664,847	24,719,016	2,945,831	12%	218,783,169	222,471,148	(3,687,980)	-2%
23 Total Gross Revenue	37,624,991	32,567,966	5,057,025	16%	300,922,409	293,111,693	7,810,716	3%
24 Patient Net Revenue	9,123,921	8,270,730	853,191	10%	71,368,073	74,436,570	(3,068,497)	-4%
25 Net Patient Revenue as % of Gross Revenue	24.2%	25.4%	-1.1%	-5%	23.7%	25.4%	-1.7%	-7%
26 Capitation Revenue	4,404,965	4,439,557	(34,592)	-1%	40,533,470	39,956,011	577,459	1%
27 Supplemental Patient Program Revenue (Additional payments for patients)	5,560,098	5,264,148	295,950	6%	48,396,363	47,377,335	1,019,028	2%
28 Total Patient Net and Program Revenue	19,088,984	17,974,435	1,114,549	6%	160,297,906	161,769,916	(1,472,010)	-1%
29 Other Operating Revenue (Additional payment not related to patients)	1,354,507	1,097,157	257,350	23%	9,665,567	9,874,412	(208,845)	-2%
30 Total Operating Revenue	20,443,490	19,071,592	1,371,898	7%	169,963,473	171,644,328	(1,680,855)	-1%

San Mateo Medical Center
Income Statement
March 31, 2016

	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	14,831,016	14,268,186	(562,830)	-4%	125,230,657	128,413,675	3,183,017	2%
32 Drugs	785,812	648,254	(137,558)	-21%	6,514,135	5,834,290	(679,844)	-12%
33 Supplies	974,696	906,478	(68,217)	-8%	8,092,300	8,158,306	66,006	1%
34 Contract Provider Services	2,653,986	2,800,013	146,026	5%	25,251,555	25,200,115	(51,439)	0%
35 Other fees and purchased services	3,625,883	4,147,418	521,535	13%	34,945,501	37,326,764	2,381,263	6%
36 Other general expenses	408,781	455,369	46,588	10%	4,099,242	4,098,319	(922)	0%
37 Rental Expense	147,159	173,805	26,646	15%	1,568,907	1,564,243	(4,664)	0%
38 Lease Expense	817,106	817,105	(1)	0%	7,353,944	7,353,944	0	0%
39 Depreciation	225,658	241,114	15,455	6%	2,030,926	2,170,024	139,098	6%
40 Total Operating Expenses	24,470,097	24,457,742	(12,354)	0%	215,087,167	220,119,682	5,032,515	2%
41 Operating Income/Loss	(4,026,606)	(5,386,150)	1,359,544	25%	(45,123,694)	(48,475,354)	3,351,660	7%
42 Non-Operating Revenue/Expense	440,128	480,477	(40,349)	-8%	6,498,158	4,324,289	2,173,869	50%
43 Contribution from County General Fund	4,905,674	4,905,674	-	0%	44,151,062	44,151,062	-	0%
44 Total Income/Loss (GAAP)	1,319,195	0	1,319,195		5,525,526	-3	5,525,529	
(Change in Net Assets)								



MAY 2016

LEAP UPDATES & EXCELLENT CARE

LEAP Updates

- **Care Team Transformation:** During the week of April 25th, a large team of ambulatory staff held their second care team transformation event. This event focused on “outreach”: identifying patients who have fallen out of care and using the entire care team including our newly trained health coaches to ensure they are getting appropriate treatment and follow-up. We are very thankful to the team for their extraordinary efforts and we look forward to testing out their designs in the coming weeks.
- **New Employee Orientation:** On April 25th, as part of our Staff Engagement LEAP strategic initiative, the organization piloted a new format for employee orientation. The new structure aims to shift from pure information sharing to more of an introduction to the culture of service and improvement at SMMC. It was a highly engaging and fun day where new staff got to know some members of SMMC leadership and we had a chance to learn about these new members of the SMMC team. We will certainly adjust and revise the agenda over the coming months, but we are off to a great start. My thanks to Akram Cader, Karen Pugh and everyone who worked to make this a great day.

Excellent Care

- **Joint Commission Follow Up Survey:** On the morning of April 28th at a little before 8 am, a Joint Commission surveyor arrived for an expected (but unannounced) repeat site visit. He was here to follow up on a few items from our original survey. The surveyor was able to quickly validate that we had successfully addressed all of the items he was looking at. He commented on how impressed he was with the appearance of the hospital, congratulated us on an overall highly successful survey, and then left. This successfully completes the onsite portion of our triennial survey. We must still submit our written responses to the original survey but this is an important milestone towards completion. Our overall success with this survey is a testament to the excellent preparation and hard work of all SMMC staff.
- **SMMC Radiology Department Passes Mammography Inspection:** On April 27th, a state inspector arrived to do a routine assessment of SMMC’s mammography program. The survey was thorough and we are proud to say the department passed without difficulty. Thank you to the entire radiology department for all of their efforts that contributed to this great result.

PATIENT CENTERED CARE & STAFF ENGAGEMENT

- **Employee Forums-A Great Opportunity to Talk with Staff:** The week of April 18th, I was able to conduct my first employee forums. We used a “town hall” format with staff questions submitted both in advance and during the actual forums. All of the forums were lively and attendees were very engaged. I truly enjoyed starting to get to know more of our staff in all of our locations. I was impressed by their energy and humbled by their clear commitment to our patients and the organization’s mission. I look forward to the next forums in July.
- **Conrad Fernandes selected for County Executive Leadership Academy:** Congratulations to Conrad Fernandes for his selection as a member of the incoming class of the Executive Leadership Academy. We look forward to supporting Conrad during his participation in this program designed to “prepare high-performing employees” to compete for high level leadership positions in the future.

- **2ND Annual Patient Experience Fair is a Great Success:** On April 19th, SMMC held its second annual Patient Experience Fair. This was a fun and informative event where staff and patients were introduced to the patient experience tools and efforts that are currently being developed and used at the medical center. In addition to all of the staff who attended, we were excited to have 35 patients and 7 Patient Improvement Partners participate. Thank you to everyone who made this event so successful!
- **Selected patient/family stories of gratitude:**
 - **From the Emergency Department:**
 - Juan was my ER nurse. He was **excellent!**
 - I was blown away at how nice everyone was
 - Thank you for having good, caring doctors!! Nurses are excellent!!!
 - Everything went well and I hope everybody will go to San Mateo Medical Center like I did and get the best HELP EVER!
 - **From 2A/B and the Intensive Care Unit:**
 - Always smiling.
 - All who attended to me were courtesy, respectful kind and respectful
 - Physicians were professional & friendly
 - Very good. All doctors & nurse especially the nurse Josefina, very good person
 - Please give my thanks to everyone for their excellence
 - **From 3A/B:**
 - Danni, Kai and Maria are great MSAs, they have a good amount of skills that provide security in the unit along with the security staff Sam & Margie, Richard and Dani
 - Doctor Miller MD was great at answering all of my questions. Excellent
 - **From Coastside Clinic:**
 - All the behind the desk people are absolutely wonderful. Glad they are there! They are the best!
 - **From Dental Clinic:**
 - Very good provider, excellent care and concern for my issues. Great communicator
 - This unit has been my best dental experience to date & I thank everyone
 - **From Daly City Clinic:**
 - I love how Dr Grace Moore very attentive when I speak to her she listens and I also love the receptionist they have compassion for people that's amazing you don't see that in very many doctors office. The world needs a lot of Dr Grace Moore
 - I would definitely recommend all my family and friends to this care provider after the wonderful visit with you.
 - **From Edison Clinic:**
 - I have had other experiences with my primary medical care service (including Stanford University) and I have the very best care with the Edison Clinic. Chris King, PA, nurses and staff that is better than any other in my experience.
 - **From South San Francisco Clinic:**
 - Dr. Shorr gave me a lot of information regarding my concerns. She is very thorough. The Staff in the registration area, a male, was respectful and attentive. The attention given to me in this clinic was very professional.

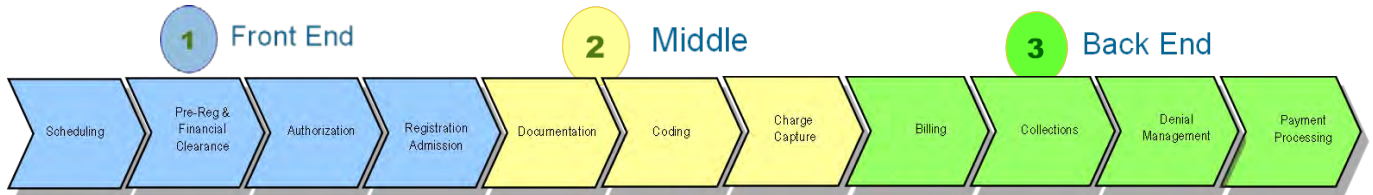
- **From the Innovative Care Center:**
 - Dr. Medina and his nurse staff are the best. I am healed very well and feel they care about me.
- **From Main Campus Clinic:**
 - Dr. Chaikind is a professional as they come, understanding, smart, listens, and shows she cares. A++++
 - Dr. Kassis is fantastic. I wish she was my doctor a long time ago. She really listens and understands. She goes above and beyond to make sure her patients are well cared for
- **From the Ron Robinson Senior Care Center:**
 - Dr. Joisha apart from being a very good health care provider, she is a nice human being, keeps concern about her patients.
- **From the Surgical Specialty Clinic:**
 - I feel that is a very good hospital considering, how many patient they treat. It's very busy all times, I have been there. But overall, I am happy with my care. *Dr. Trindade, is a great doctor and, I am very thankful to have him as my doctor.
- **From the Medical Specialty Clinic:**
 - Very happy with *Dr. Bedi - good results w/med for leukemia CML, brilliant.
 - The pain management program is AMAZING. The comprehensive total body approach is what pain management should be and this facility is on the cutting edge. I believe it will take others many years to emulate what you have developed
 - Arturo is awesome. He is an integral part of this clinic. He knows all of the patients by name even when he sees them elsewhere in the hospital. He is definitely an asset to the program and the facility
- **From Fair Oaks Health Center:**
 - I am 64 and Dr Hadadd is the best doctor I have ever had Very **friendly & caring**.
 - Excellent - Excellent - Excellent! *Dr. Singh is amazing - Smart - Gifted & compassionate
- **Excerpt From a Patient Email Regarding Radiology Manager, John Jurow:**
 - As an SMMC patient, I'm often impressed with the courtesy and care provided by all levels of your staff. Yet even in the culture of excellence you maintain, there are those who still stand out for providing a level of patient care that goes beyond expectations. John Jurow is one of them. . . For me, it's a rarity to encounter an individual who actively seeks out opportunities to help others. I only wish John's commitment to patient care could be bottled and marketed. I'm sure it would become a bestseller! Thank you for having John on your staff. He is a great SMMC asset!

FINANCIAL STEWARDSHIP

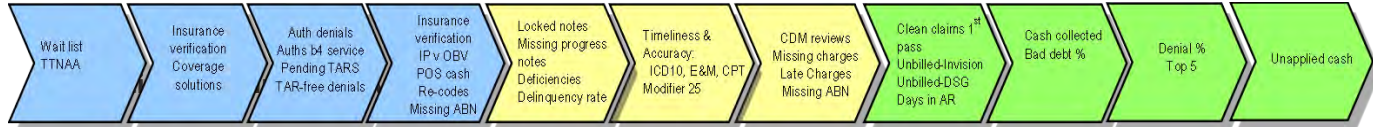
● Revenue Cycle Transformation

A major component of the Financial Stewardship initiative is focused on improving our patient billing and collection processes – otherwise known as the Revenue Cycle. This transformation is critical in ensuring we are effectively billing and collecting for every dollar to which we are entitled. Our efforts are grouped by the 3 major revenue cycle phases: Front End – patient registration completeness and accuracy; Middle – documentation, coding and charge capture; Back End – submission of clean claims and management of claim denials. Our efforts are directed by a cross-disciplinary Revenue Cycle Governance Council and supported through our LEAP initiatives. Performance is monitored through the use of key performance indicators such as cash collected, insurance verification rates, unbilled claim levels, coding timeliness, incomplete service authorizations, and claim denial rates. Updates on this transformation will be provided to the Board at regular intervals.

Three phases of the full Revenue Cycle

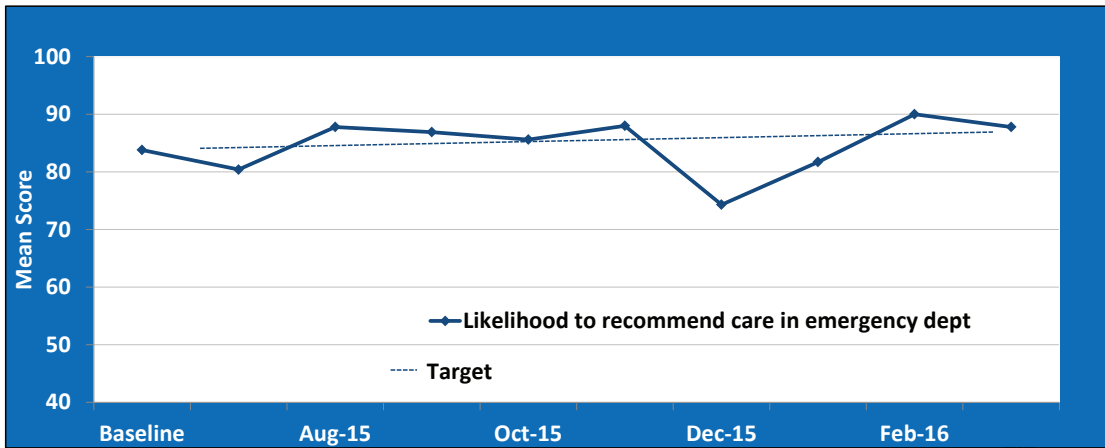


An effective Revenue Cycle model requires active monitoring and management of process defects throughout the three phases. These process defects are monitored through Key Performance Indicators (KPI's)



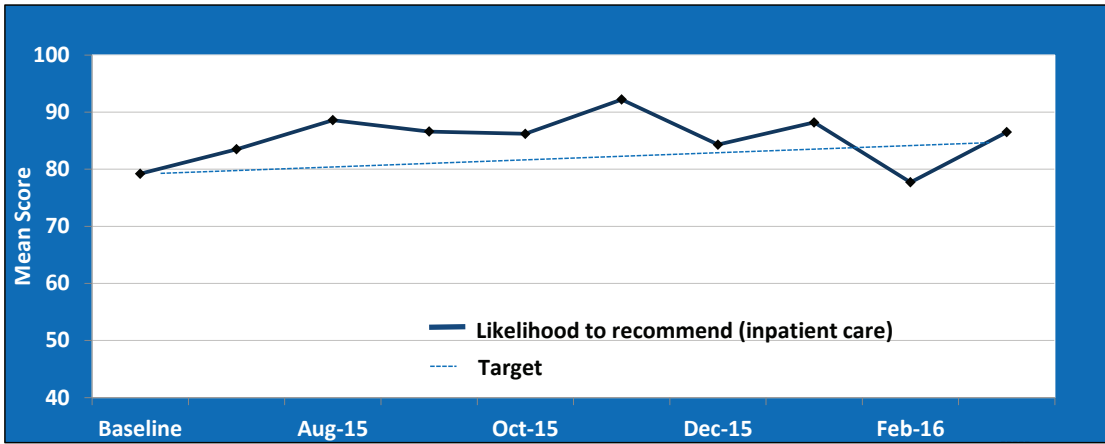
Our clinical and operational managers are supported in their financial stewardship roles by SMMC's Financial Planning and Analysis (FP&A) team, consisting of 3 analysts and a manager. In collaboration with SMMC managers, the FP&A team coordinates budgeting, financial reporting, variance analysis, forecasting, and business planning activities. To improve the effectiveness and accuracy of our financial processes, the FP&A team partners closely with SMMC managers to gain an in-depth understanding of operational drivers that impact financial results. It's through this partnership that we strive to improve the business and financial literacy across our organization.

We focus on what matters most to our patients and their families, and partner with them to provide compassionate care in a culturally competent way.



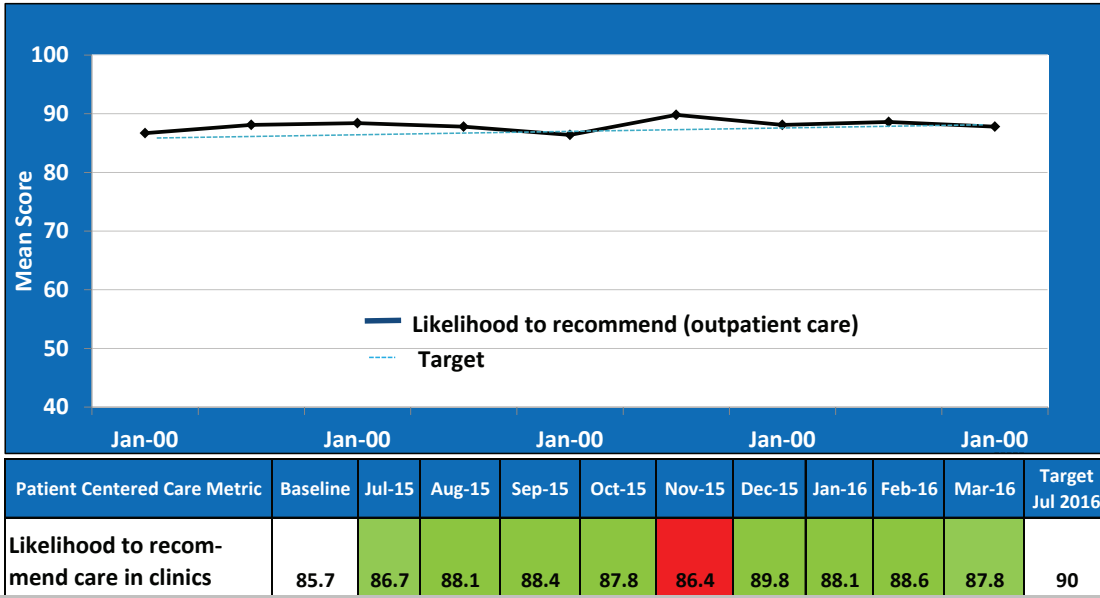
Patient Centered Care Metric	Baseline	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Target Jul 2016
Likelihood to recommend care in emergency dept	83.8	80.4	87.8	86.9	85.6	88.0	74.3	81.7	90.0	87.8	90

We focus on what matters most to our patients and their families, and partner with them to provide compassionate care in a culturally competent way.

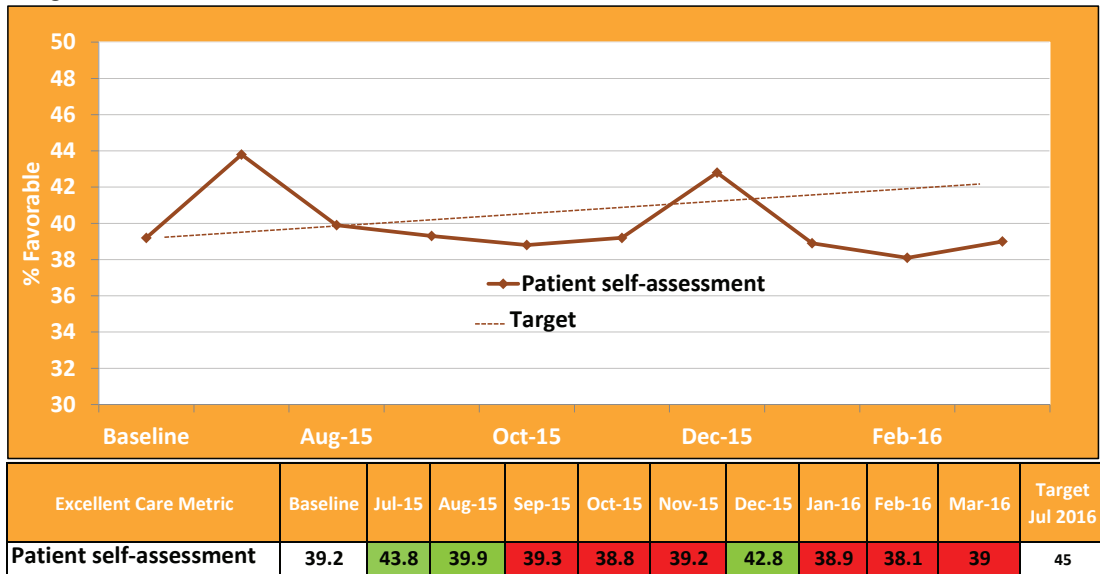


Patient Centered Care Metric	Baseline	Jul-16	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Target Jul 2016
Likelihood to recommend care in inpatient	79.2	83.5	88.6	86.6	86.2	92.2	84.3	88.2	77.7	86.5	90

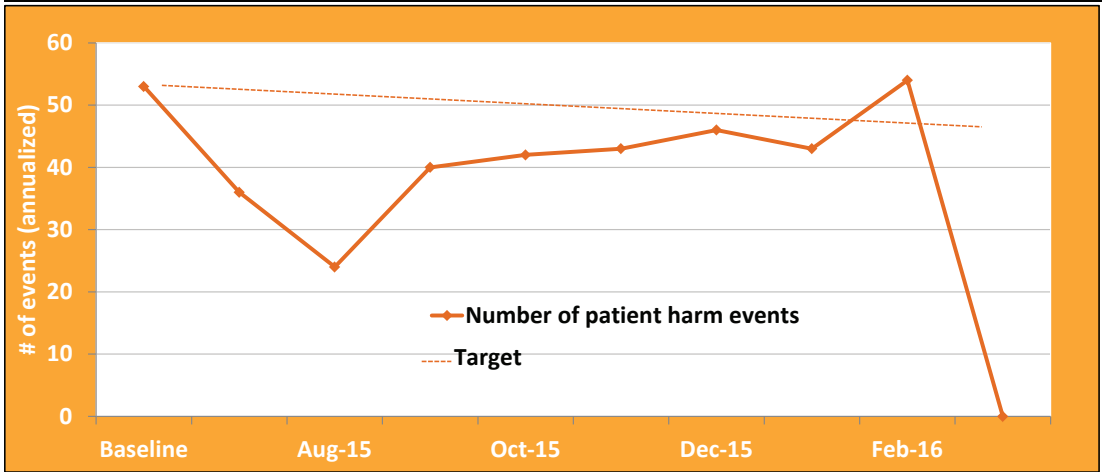
We focus on what matters most to our patients and their families, and partner with them to provide compassionate care in a culturally competent way.



We partner with our patients to achieve their health goals by providing a safe environment and integrated, evidence-based care.

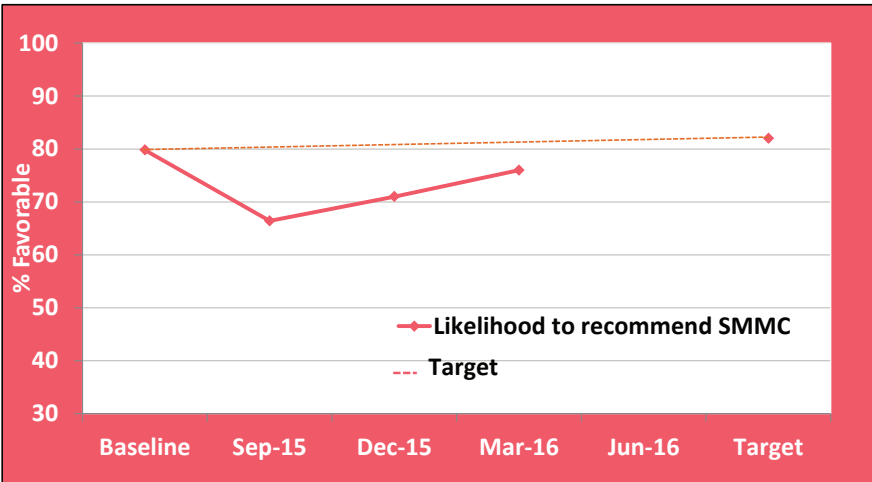


We partner with our patients to achieve their health goals by providing a safe environment and integrated, evidence-based care.



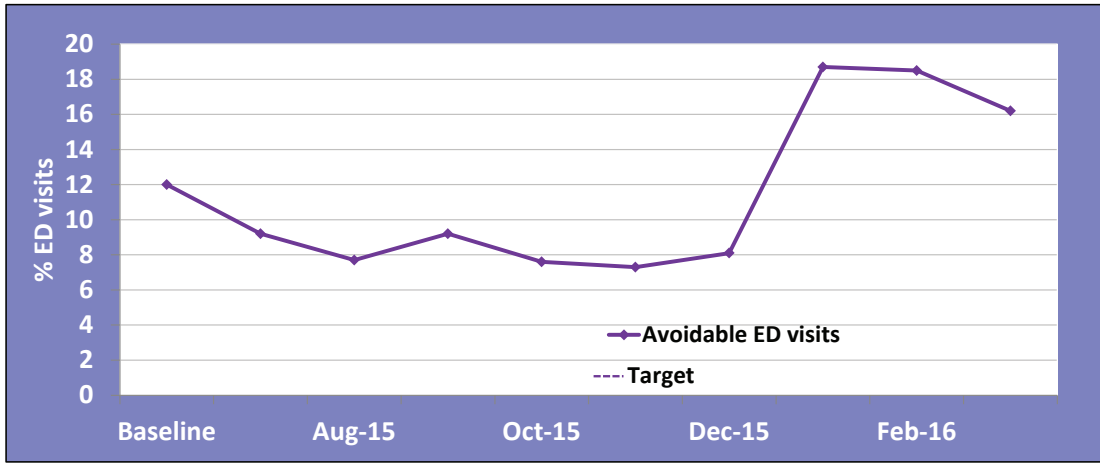
Excellent Care Metric	Baseline	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Target Jul 2016
Number of patient harm events	53	36	24	40	42	43	46	43	54	no data	40

We are a great place to work and we are passionate about serving our community.



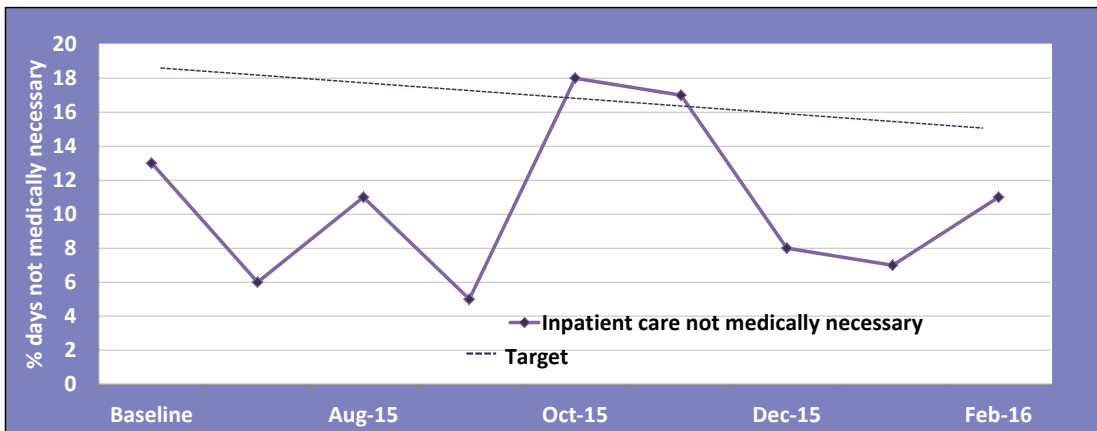
Staff Engagement Metric	Baseline	Sep-15	Dec-15	Mar-16	Jun-16	Target
Likelihood to recommend SMMC	79.8	66.4	71	76		82

We ensure our patients get the right care at the right time and place.



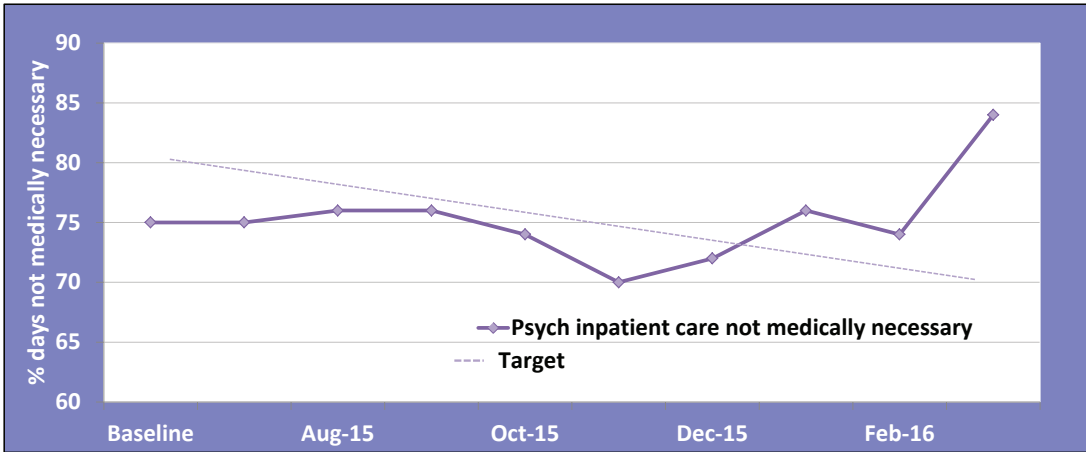
Right Care, Time, Place Metric	Baseline	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Target Jul 2016
Avoidable ED visits	12.0	9.2	7.7	9.2	7.6	7.3	8.1	18.7	18.5	16.2	?

We ensure our patients get the right care at the right time and place.



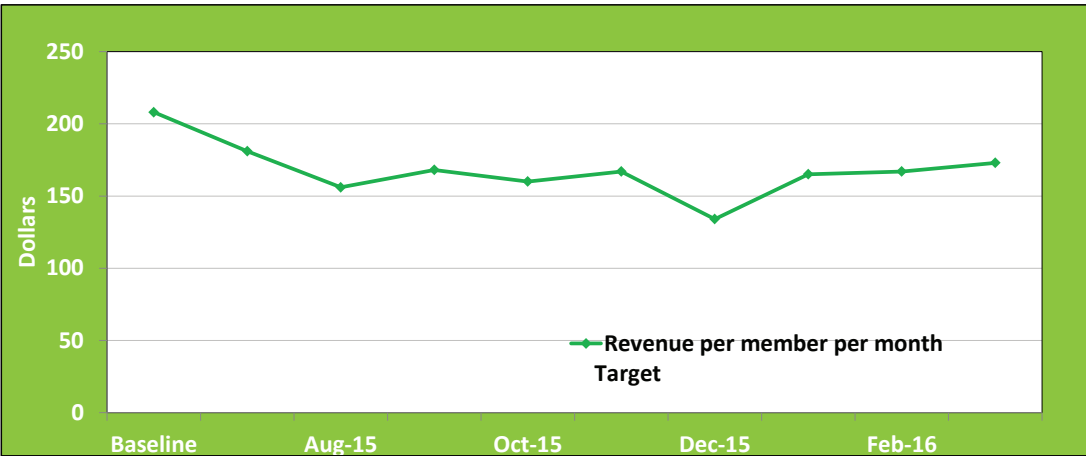
Right Care, Time, Place Metric	Baseline	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Target Jul 2016
Inpatient care not medically necessary	13.0	6	11	5	18	17	8	7	11	10	8

We ensure our patients get the right care at the right time and place.



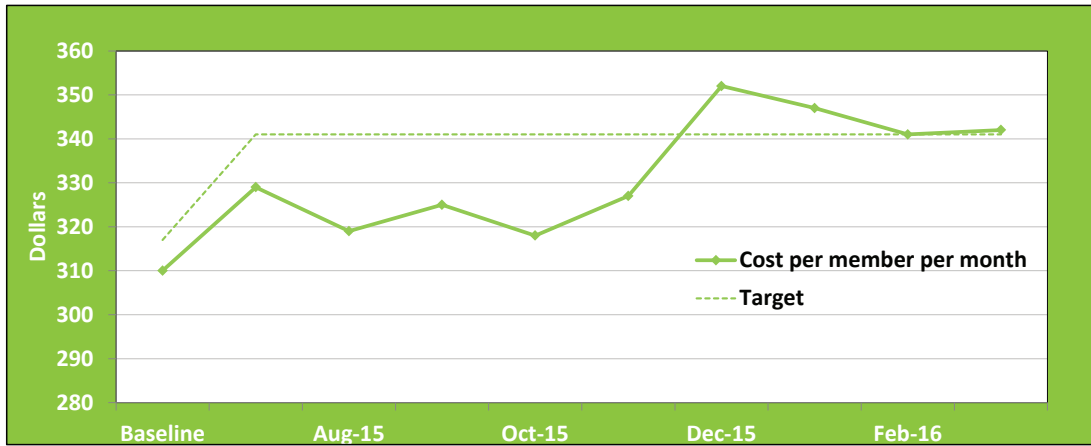
Right Care, Time, Place Metric	Baseline	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Target Jul 2016
Psych inpatient care not medically necessary	75.0	75.0	76	76	74	70	72	76	74	84	60

We partner with our patients to deliver high value care in a financially responsible manner.



Financial Stewardship Metric	Baseline	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Target Jul 2016
Revenue per member per month	208	181	156	168	160	167	134	165	167	173	173

We partner with our patients to deliver high value care in a financially responsible manner.



Financial Stewardship Metric	Baseline	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Target Jul 2016
Cost per member per month	310	329	319	325	318	327	352	347	341	342	341



COUNTY OF SAN MATEO HEALTH SYSTEM

To: SMMC Board Members
 From: Louise Rogers, Chief
 Subject: Health System Monthly Snapshot – April 2016

Indicator	Number	Change from previous month	Change from last year
ACE Enrollees	19,236 <i>(March 2016)</i>	-0.3%	1.1%
SMMC Emergency Department Visits	3,893 <i>(March 2016)</i>	3%	-5.6%
New Clients Awaiting Primary Care Appointment	38 <i>(April 2016)</i>	217%	-91%

Health System and community partners celebrate Mental Health Awareness Month

The Health System’s Behavioral Health and Recovery Services division is partnering with local organizations throughout May to raise awareness about mental health and substance use issues and the importance of getting help. On May 4, National Mental Health Awareness Month will kick off with the “Be the One” event at the Health System, where the public can hear directly from **community members about what it’s** like to live with a mental health and substance use condition and their journey to recovery. Members of the public will be invited to learn about local resources and [take the pledge](#) to help end the stigma surrounding mental health and substance use disorders by starting the conversation and encouraging those who need help to seek it. For more information on local Mental Health Awareness Month events, visit smchealth.org/mentalhealthmonth.

New app helps residents save lives

In late February, the County launched PulsePoint—a free mobile app that alerts registered CPR-trained users of a heart attack victim in a public place in their immediate vicinity. Users can then start CPR in the critical minutes before emergency teams arrive. The PulsePoint app also includes information on the closest automated external defibrillator (AED), an easy-to-use **machine that shocks a victim’s** heart if needed. PulsePoint is connected to local emergency response systems, so by the time the app notifies nearby bystanders, an ambulance is already on the way.



Sudden heart attacks can happen to anyone at any time. Every minute a person having a sudden cardiac arrest waits for CPR, his or her chance of survival drops by up to 10 percent. According to the American Heart Association, 920,000 people have heart attacks every year, and about 25% of them have no symptoms before the attack. Since the launch, over 430 residents have signed up to be alerted via the app of a heart attack victim in a public place.



Tenth Silver Dragon exercise helps County prep for fight against mosquitos

On April 14, San Mateo County Health System staff joined local response teams in a large preparedness exercise designed to practice how each group would respond during a major emergency. The drill, known as the Silver Dragon Emergency Exercise, helps ensure the safety of San Mateo County residents in the event of a major disaster. This is the tenth year San Mateo County has led this type of exercise, and **this year’s exercise** tested the **County’s ability** to effectively control mosquitos.



San Mateo Medical Center
A County System of Healthcare

TAB 3

**MEDIA
ARTICLES**

Printed from THE DAILY JOURNAL, dtd. 04/02/2016

County has first confirmed case of Zika virus

April 02, 2016, 05:00 AM

A San Mateo County resident has tested positive for Zika virus, the Health System announced Friday after receiving confirmation from the California Department of Public Health.

The Zika virus infection occurred when the person was traveling abroad and is now fully recovered. No transmission of the disease took place in the United States, and there was no risk of the virus spreading to the local community from this case, according to the Health System.

"There is no reason for the general public to be concerned that they are at risk for getting Zika in San Mateo County at this time," said Dr. Scott Morrow, San Mateo County health officer. "Zika virus is not circulating in our county and the few cases in California to date resulted from contracting the virus while traveling abroad. Taking precautions when traveling, based on CDC guidelines, is the best means of protection from Zika."

The Zika virus is transmitted primarily by two species of mosquitoes, *Aedes aegypti* and *Aedes albopictus*. Zika virus is spread when a mosquito bites a person who has an active Zika virus infection and then bites another person. At this time, there is no record of such a transmission occurring in the United States. The *Aedes* mosquito is mostly found in tropical countries, which currently include American Samoa, Brazil, Colombia, Costa Rica, Curacao, El Salvador, French Guiana, Guatemala, Haiti, Honduras, Martinique, Mexico, Nicaragua, Panama, Paraguay, Suriname, Venezuela and Puerto Rico, according to the Health System.

While not native to San Mateo County, *Aedes* mosquito larvae were identified in Menlo Park in May 2015 by the San Mateo County Mosquito and Vector Control District. The district has been working to eradicate these mosquitos since first detecting them, and has been successful in their efforts, according to the Health System.

For more Zika information and the latest guidance from the Centers for Disease Control and Prevention visit cdc.gov/zika. For more San Mateo County Health System Zika information visit smchealth.org/zika.

‘Silver Dragon’ takes aim at mosquitoes

On the morning of April 14, San Mateo County Health System staff will join local response teams from across the Bay Area in an exercise designed to practice how each group would respond during a major emergency.

Organizers hope the drill will help San Mateo County residents — especially those who are vulnerable due to a medical condition — stay safe in the event of a major disaster such as an earthquake, pandemic flu, catastrophic flood or prolonged power outage.

The exercise, known as “Silver Dragon,” will test the Health System’s ability to partner with local cities, law enforcement, fire departments, American Red Cross and Community Emergency Response Teams. Team members will simulate going door-to-door to check in on residents in neighborhoods selected for this exercise. This is the 10th year San Mateo County has led this type of exercise.

This year’s exercise will test the county’s ability to effectively control mosquitoes. The concept takes on greater urgency in light of the Zika virus, which is a mosquito-borne health concern that has been affecting other parts of the world.

To make the exercise as realistic as possible, CERT teams will distribute educational information and resources in reusable shopping bags to 16,000 homes, simulating how CERT members will operate in a real event. Results from the exercise will be shared with other health agencies to promote further learning and planning.

As part of the exercise, San Mateo Medical Center will also test its mobile kitchen capabilities, which would be used to feed and hydrate volunteers and first responders during a major emergency. Providing appropriate nourishment for these participants is a critical part of any response effort.

First-responders hope the exercise reminds everyone to protect themselves during an emergency. All county residents should have an updated emergency supply kit and a plan for meeting with loved ones.

And to help control mosquitoes, residents should drain standing water around their homes, use insect repellent with DEET, wear long sleeves and pants, ensure door and window screens are in good condition, and report daytime mosquito bites to San Mateo County Mosquito and Vector Control District.

Many Bay Area and Coastside agencies are participating in the exercise. San Francisco Bay Area American Red Cross, Cal Fire, California Highway Patrol, Coastside CERT, Salvation Army and the San Mateo Medical Center are among a long list of participants.