



San Mateo Medical Center
A County System of Healthcare

BOARD OF DIRECTORS MEETING

Thursday, August 3, 2017

8:00 AM – 10:00 AM

SAN MATEO MEDICAL CENTER

EXECUTIVE BOARD ROOM

Second Floor, Administration Wing

BOARD MEMBER PACKET



San Mateo Medical Center
A County System of Healthcare

BOARD OF DIRECTORS MEETING

August 3, 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. Bryan Gescuk

Dr. Julie Hersk

Informational Items

3. Medical Executive Committee

Dr. Bryan Gescuk

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. July 6, 2017 Meeting Minutes
2. Burlingame Long Term Care

G. MEDICAL STAFF REPORT

Chief of Staff Update

Dr. Bryan Gescuk

H. ADMINISTRATION REPORTS

- 1. Rehabilitation Department
- 2. Culture of Safety
- 3. Financial Report
- 4. CEO Report

Dr. Alpa Sanghavi Verbal
John Thomas 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, July 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

John Nibbelin
Michelle Lee
David McGrew
Dr. Susan Fernyak
Liz Evans
Peggy Jensen
John Thomas

Priscilla Romero
Angela Gonzalez
Josefina Rubio
Gabriela Behn
Paul Rogerville
Srija Srinivasan

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 8:23 AM to Open Session. A quorum was present (see above).	
Report out of Closed Session	Medical Staff Credentialing Report for July 6, 2017. QIC Minutes from May 23, 2017. Medical Executive Committee Minutes from June 13, 2017.	John Nibbelin 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	The Foundation has fulfilled its financial obligation to SMMC for fiscal year 2014-2015 and 2015-2017 in the amount of \$274,000. The prenatal book which is given to every pregnant patient, "Prenatal Care Lasts a Life Time," was revised this year. The new redesigned website will go live on June 19.	FYI
Consent Agenda	Approval of: 1. Hospital Board Meeting Minutes from June 1, 2017.	It was MOVED, SECONDED and CARRIED

		unanimously to approve all items on the Consent Agenda.
Medical Staff Report Dr. Bryan Gescuk	Medical staff are looking forward to utilizing their new space which has been reconfigured.	FYI
Strategic Initiatives Update Dr. CJ Kunnappilly John Thomas Liz Evans, RN Dr. Susan Fernyak Brighton Ncube David McGrew	<p>2017-2018 Strategic Approach</p> <ul style="list-style-type: none"> • Continue most 2016-2017 initiatives • Core Focus on PCMH and Advancing Nursing Practice • All Strategic Efforts include focus on Patient Experience and Staff Engagement • PRIME as a metric not a driver <p>Initiatives</p> <ul style="list-style-type: none"> • Reducing Disparities • Improving Care Transitions • Improving Patient Experience Through the Use of Ancillary Resources • Advancing Nursing Practice • Building Patient Centered Medical Homes • Transforming the Revenue Cycle 	FYI
HPSM Children’s Services Demonstration Project Glenn Ibarrientos, RN Dr. Anand Chabra	<p>California Children’s Services Demonstration Project</p> <ul style="list-style-type: none"> • CCS DP is a partnership between Health Plan of San Mateo (HPSM) and San Mateo County Health System • The CCS DP began on April 1, 2013 • CCS DP was scheduled to run until March 31, 2016. HPSM has applied for two 1-year extensions until March 31, 2018. <p>Whole Child Model Goals</p> <ul style="list-style-type: none"> • Address the needs of the “whole child” • Reduce fragmentation of care • Preserve quality of care/access to providers who are specialized in children with complex medical needs • Explore strategies to Improve health outcomes, Improve access to and quality of care, Improve provider satisfaction and support, Decrease financial and operational inefficiencies <p>Key Components of the HPSM CCS DP:</p> <ul style="list-style-type: none"> • DP serves approximately 1,600 patients in San Mateo County (CCS only patients are excluded) – about one-quarter receive primary care at SMMC • Whole-child (CCS and non-CCS condition) care coordination and utilization review provided by 1 entity • HPSM assumes financial risk for the whole child (both the CCS and non-CCS conditions) 	FYI

	<ul style="list-style-type: none"> • Together, HPSM and SMC defined each entity's roles and responsibilities through a contract • Program oversight and operational leadership is provided by a leadership team from HPSM and SMC <p>Key Implementation Lessons Learned</p> <ul style="list-style-type: none"> • Implement strong change management practices • Communicate to everyone the "WHY" • Provide sufficient/new staffing for transition • Foster a culture of continuous improvement and ongoing learning • Hold regular and frequent meaningful meetings • Clearly document current and new policies and procedures • Have a clear policy on how conflicts are resolved • Develop and implement an evaluation plan 	
Financial Report David McGrew, CFO	The May 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	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	The crisis residential facility, Serenity House, will open in the Fall and the census will be 10.	FYI
County Manager John Maltbie	No report.	FYI
Board of Supervisors Supervisor Carole Groom	No report.	FYI

Supervisor Groom adjourned the meeting at 9:26 AM. The next Board meeting will be held on August 3, 2017.

Minutes recorded by:



Michelle Lee, Executive Secretary

Minutes approved by:



Dr. Chester Kunnappilly, Chief Executive Officer



San Mateo County HEALTH SYSTEM

Date: Thursday, August 3, 2017
To: SMMC Board Members
From: Nora De Leon-Flores, Shirley Faller, and Marcus Weenig
Re: Burlingame LTC Report to the Hospital Board

Agenda

- I. Achievements / Accomplishments
- II. Admissions and Discharges
- III. Quality Assurance and Performance Improvement
 - a. Use of Routine Anti-Psychotic Medications
 - b. Dementia Fall Prevention Program
 - c. Antibiotic Stewardship Program
 - d. INTERACT, SBAR, and STOP & WATCH
 - e. Current Activities
 - f. "A Heart to Serve"
 - g. Ambassador Program
- IV. Customer Satisfaction (Pinnacle)
- V. CDPH Activity



San Mateo County HEALTH SYSTEM

I. Achievements / Accomplishments

Burlingame Long Term Care continues to collaborate and coordinate with the Health Plan of San Mateo (HPSM), Aging and Adult Services, and the Institute on Aging (IOA) for appropriate alternate placement of residents to the community.

The facility also continues to focus on the Quality Assurance and Performance Improvement (QAPI) of quality measures in reducing their rates such as the use of anti-psychotic medications, the number of resident falls, and the number of acquired infections. The Antibiotic Stewardship Program was implemented by the Infection Control Committee. We also continue to utilize resources such as INTERACT, SBAR, and STOP & WATCH tools.

In addition, the facility introduced, implemented, and continued to use other programs in activities such as the “Alive Inside” music and memory program and the “Dementia Fall Prevention” program. “Alive Inside” provides identified residents with the diagnosis of dementia the ability to participate in activities through different approaches such as listening to music; the program also complements the “Dementia Fall Prevention” program. The “Dementia Fall Prevention” program promotes person-centered dementia-related activities for residents that are high risk for falls.

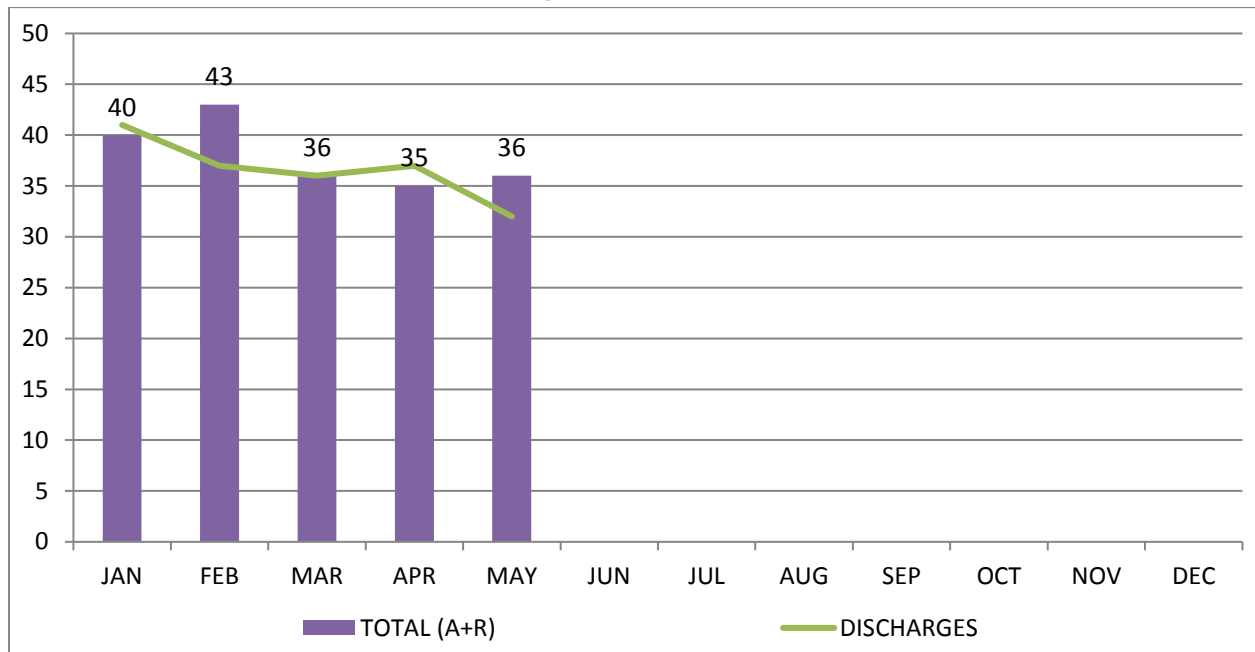
The facility continues to collaborate and coordinate with the North Peninsula Food Pantry as part of the “A Heart to Serve” program initiated by Rockport Healthcare. The program aims to serve food to the homeless population with assistance from the facility’s residents.

The facility also continues to implement the Ambassador Program which continues to track trends related to residents’ customer satisfaction. These trends include satisfaction rates between short term stay and long term care residents. Other rates include dining experience and overall cleanliness of the facility.



San Mateo County HEALTH SYSTEM

II. Admissions and Discharges



In the last six months, the facility discharged 67 residents to a lower level of care. Most of the residents discharged found placement with assistance from the Institute on Aging (IOA).

The facility continues to collaborate and coordinate with IOA and other community support services for appropriate placement of residents.

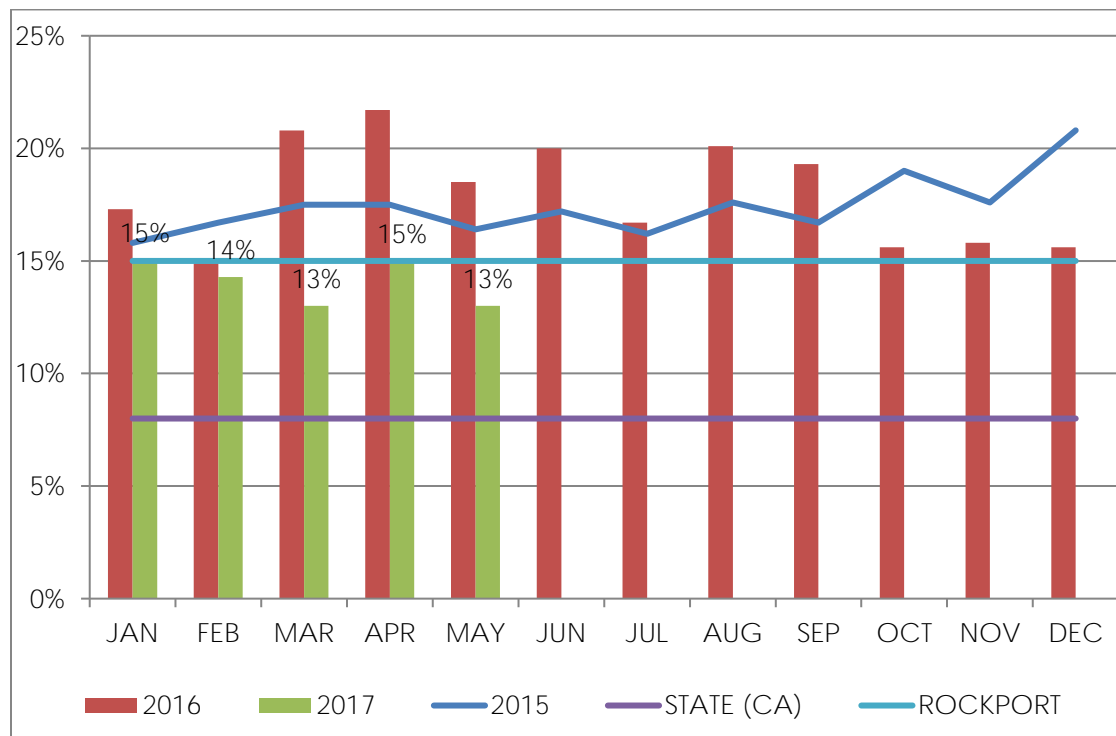


San Mateo County HEALTH SYSTEM

III. Quality Assurance and Performance Improvement

The facility tracks and trends the rates of quality measures through the Quality Assurance and Performance Improvement (QAPI) system, which focuses on the development and implementation of action plans to meet specific goals based on the identified quality measures. Two examples of these quality measures are the facility's use of anti-psychotic medications and the number of resident falls.

A. Use of Anti-Psychotic Medications

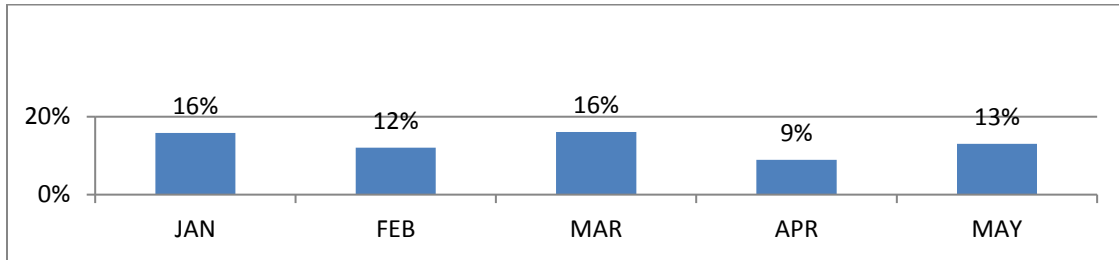


There is an expected higher rate than the state and company (Rockport) average rates in the use of anti-psychotic medications because many residents admitted to the facility have existing psychiatric diagnoses and/or has dementia with psychotic features.



San Mateo County HEALTH SYSTEM

B. Dementia Fall Prevention Program (Number of Residents with Falls)



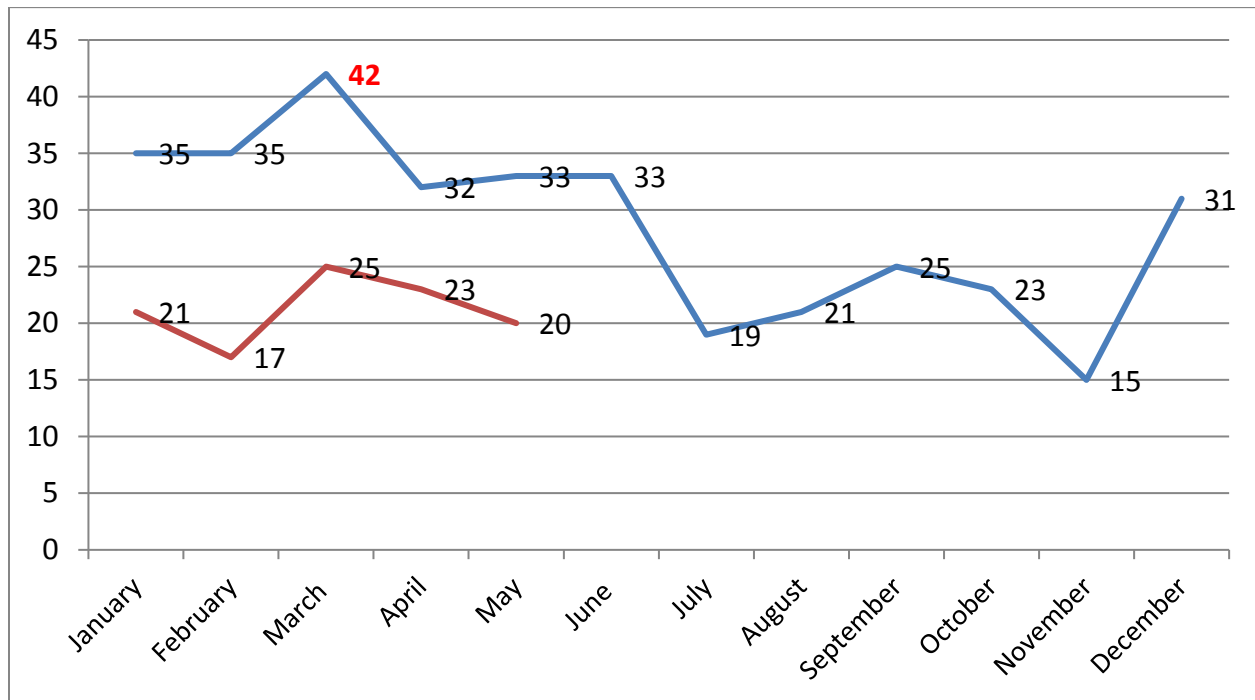
The facility continues to implement the Dementia Fall Prevention program. It aims to reduce falls and/or prevent injury by encouraging residents identified for high risk of falls to participate in specific activities. In addition, the facility continues to conduct timely utilization and assessment of a resident's risk for fall upon admission. In doing so, the facility is able to implement measures to prevent recurrences. The overall goal is not to have injuries.

The Interdisciplinary Team (IDT) committee will continue to oversee the program and discuss root-cause analysis (RCA) post-fall. The facility also continues to implement our post-fall rehabilitation screening and evaluation program to promote mobility and strength.



San Mateo County HEALTH SYSTEM

C. Antibiotic Stewardship Program



Burlingame Long Term Care continues to implement the Antibiotic Stewardship program since its introduction last year. The program aims to promote the appropriate use of antimicrobials, including antibiotics, improve patient outcomes, and decrease the spread of infections caused by multidrug-resistant organisms.

The facility saw a significant change in the use of antibiotics in recent months. However, we have yet to see a major improvement. Our current focus is to continue collaboration efforts with the San Mateo Medical Center's own antibiotic stewardship program to improve facility-specific goals.



San Mateo County HEALTH SYSTEM

D. INTERACT, SBAR, and STOP & WATCH

Interventions to Reduce Acute Care Transfers (INTERACT) is a quality improvement program that aims to improve early identification, evaluation, management, documentation, and communication of acute changes of condition of residents in the facility. The facility's goal is to improve care by reducing the frequency of potentially-preventable transfers to the acute hospital.

The SBAR system is a process utilized by the Nursing Services department to collect clinically-relevant information prior to contacting the resident's clinician or physician. It serves to structure and streamline the communication process.

The STOP and WATCH form enables and encourages staff to document a change of condition early on. By doing so, it helps identify a medical issue before it worsens to the point of requiring an acute transfer.



San Mateo County HEALTH SYSTEM

E. Current Activities





San Mateo County HEALTH SYSTEM

F. "A Heart to Serve"

"A HEART TO SERVE"





San Mateo County HEALTH SYSTEM

G. Ambassador Program

The facility has introduced a new program as part of our continuing efforts to improve and better serve the residents and community. The Ambassador Program is an on-going monthly rounding system which utilizes the organized efforts of staff. They conduct room visit rounds and ask the residents specific questions related to customer service such as response to call lights, pain management, cleanliness, and meals. Other topics will be introduced in the near future.

Since February 2017, we have seen continuous support from staff that has grown fond of the residents they spend time with. As a result, customer satisfaction has increased significantly.



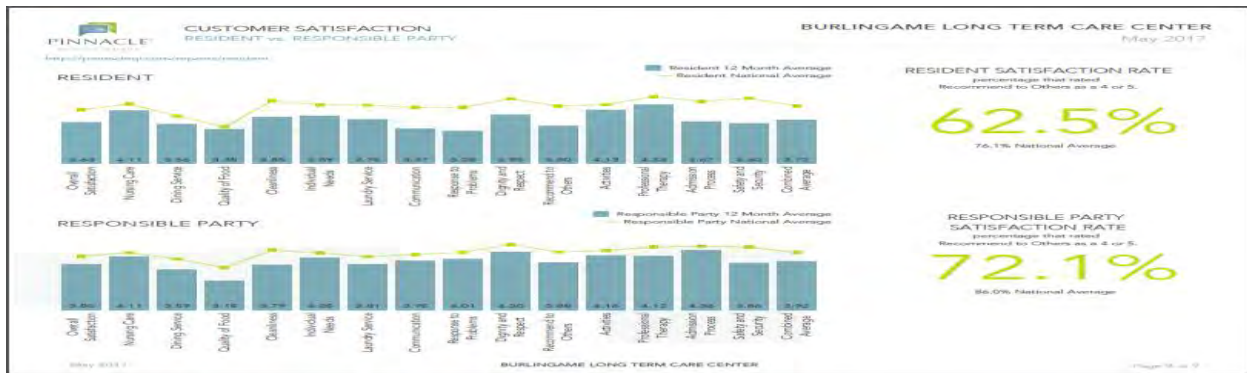
San Mateo County HEALTH SYSTEM

IV. Customer Satisfaction – Pinnacle Survey

Short Stay versus Long Term Satisfaction Rate



Residents versus Responsible Party Satisfaction Rate



Last month, the short term stay resident satisfaction rate was 69.6% compared to long-term residents at 77.8%. In addition, residents had a 76.9% satisfaction rate compared to 76.0% from responsible party. The facility continues to work on improving our customer satisfaction to achieve the target goal which is at or above the national average.



San Mateo County HEALTH SYSTEM

V. CDPH Activity

The facility's goal is to have self-reported event outcomes to be unsubstantiated without any deficiency.

So far this year, the facility has had nine self-reported entity events and six complaint visit events. We recently tracked trends in CDPH activity since 2012 and findings show that:

- The total number of reported cases related to resident to resident altercation has decreased significantly.
- The total number of reported cases related to alleged sexual abuse and cases identified as "alleged abuse" has also decreased significantly.

The facility continues its action plan as follows:

- Continue timely reporting of self-reported events
- Managing complaint visit events to appropriate agencies and ensure follow up with the plan of care for residents.



San Mateo Medical Center
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TAB 2

ADMINISTRATION REPORTS



San Mateo Medical Center
A County System of Healthcare

report

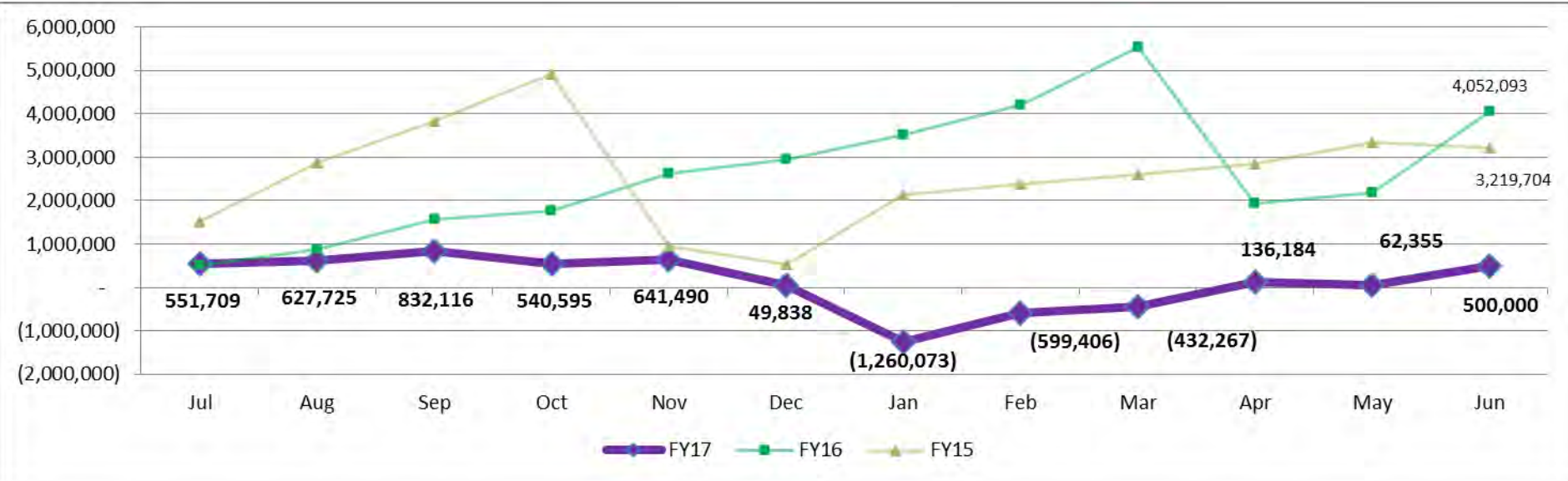
June FY 2016-17

Financial Report

Board of Directors Meeting

August 3, 2017

Financial Highlights – Preliminary

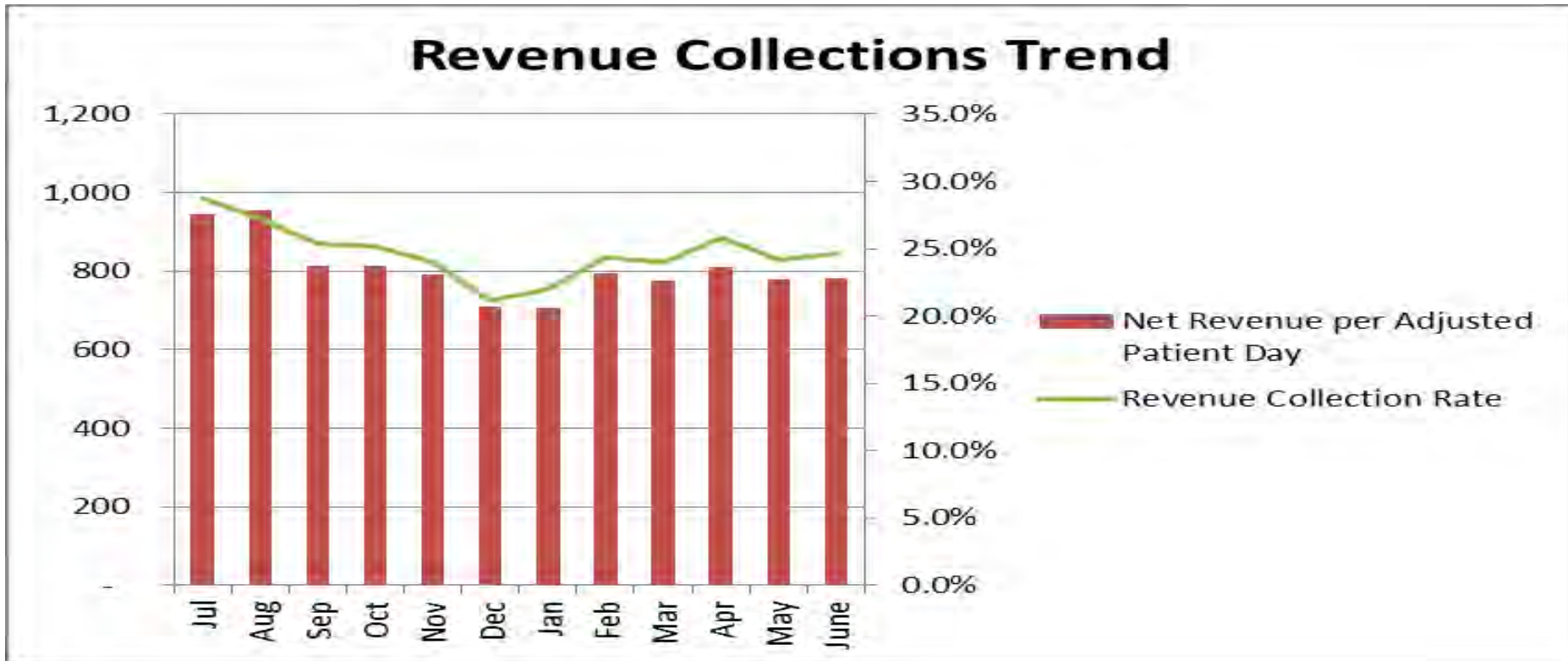


- Financial Drivers:**
- PRIME, GPP & Realignment
 - Prior year cost reports
 - Medical necessity
 - No MCE Capitation
 - Medi-Cal Acute & SNF rates

Full Year Preliminary Results: Preliminary year-end close completed on July 26th. Post close reconciliations and annual audit may result in higher or lower final results.

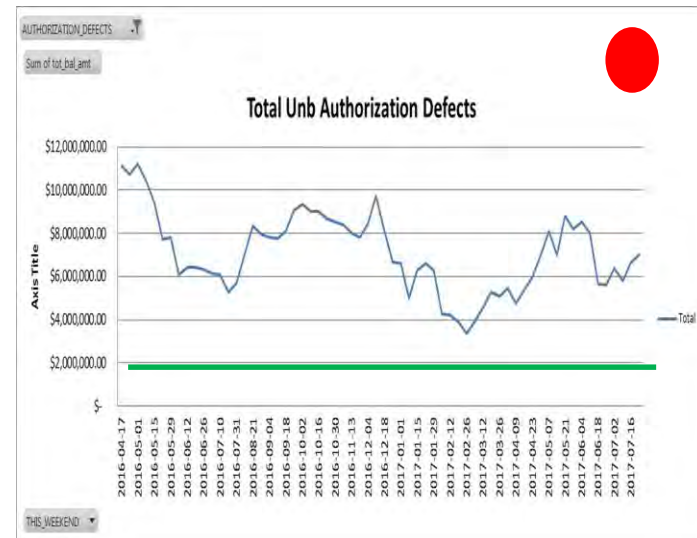
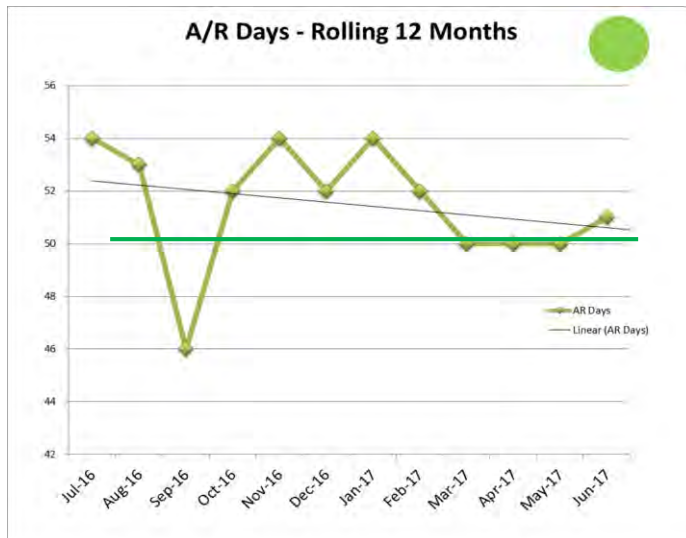
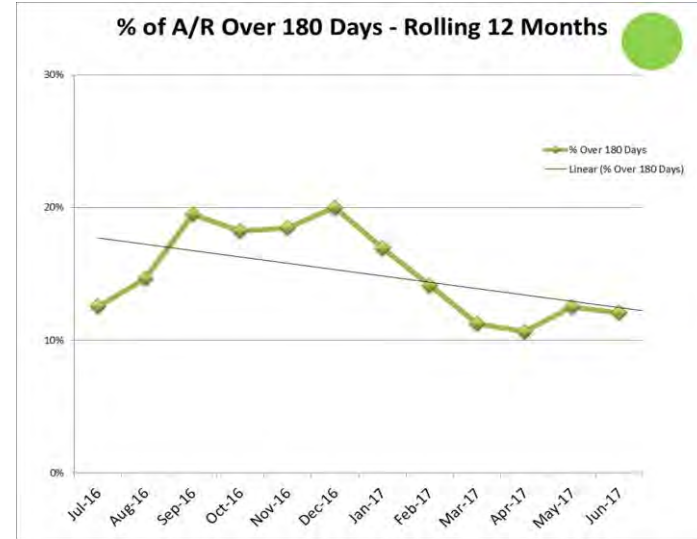
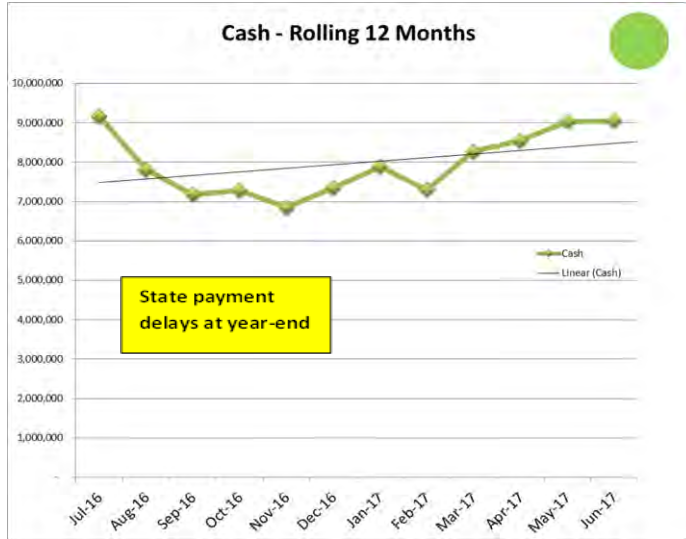
Key Performance Indicators

FFS Revenue Collection Trend



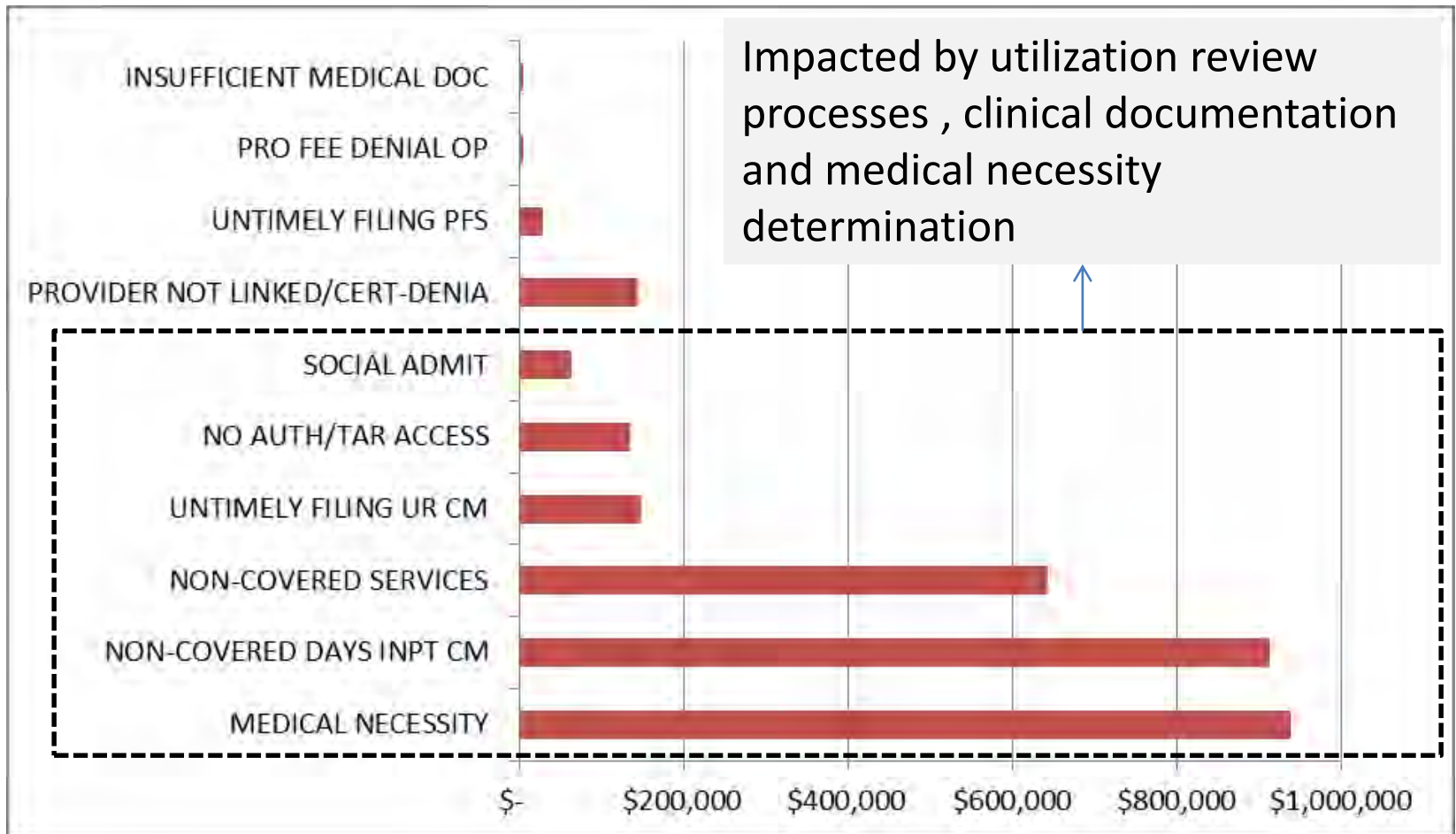
The revenue collection rate declined steadily through December due to high administrative days and lower Medi-Cal rates for acute medical-surgical patients and skilled nursing facility patients at SMMC and BLTC. Beginning January, the collection rate bounces back due to FFS revenue from MCE patients.

Key Performance Indicators



Key Performance Indicators

Inpatient Denials – Past 12 Months



Financial Improvement Plan

Executive Summary

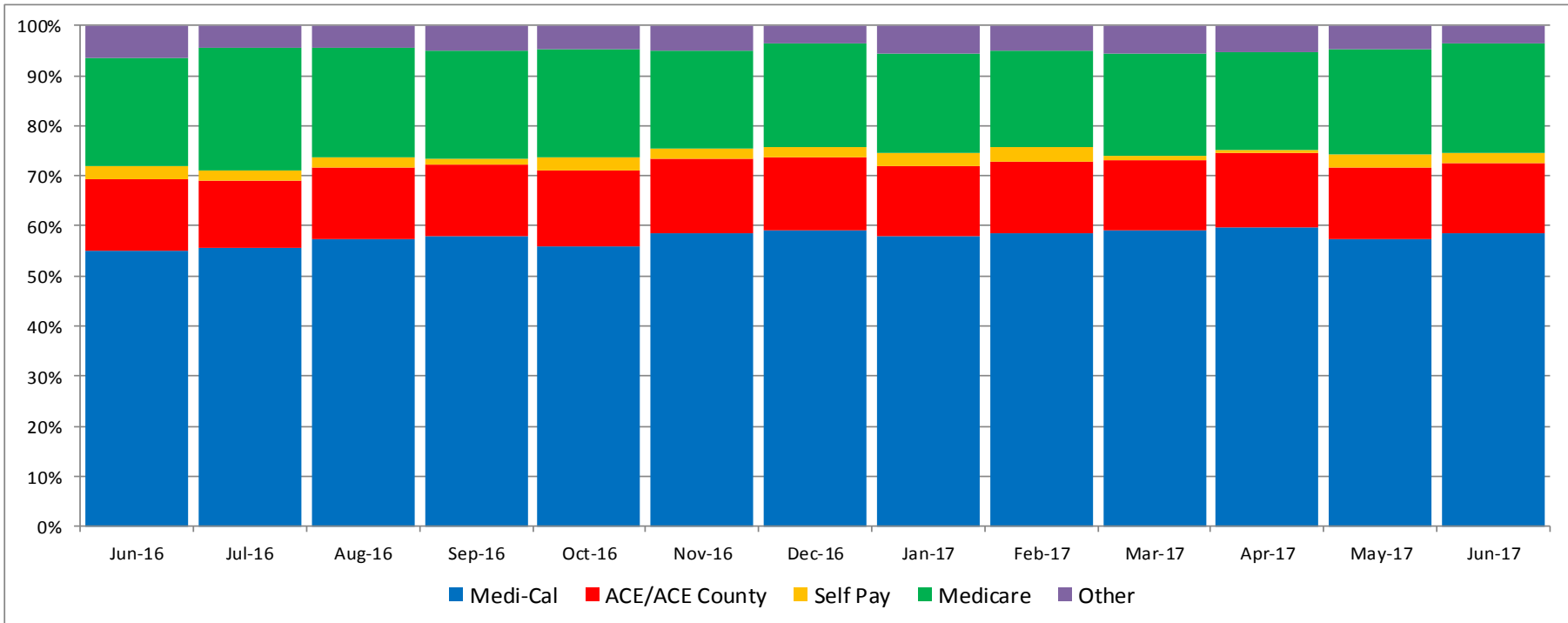
Initiative	Status
<i>Denial management</i>	<ul style="list-style-type: none"> External retro reviews started 3/1 (RRCS). <u>24% of reviewed cases were corrected</u> Medical necessity trainer started 7/25. InterQual + custom program Denials reporting tool in early implementation
<i>Clinical Documentation Improvement (CDI)</i>	<ul style="list-style-type: none"> 4 proposals received and being evaluated. Plan to Initiate project work by September
<i>Psych services billing project</i>	<ul style="list-style-type: none"> Draft report delivered May 25th. Feedback being incorporated into final report
<i>Increase Medi-Cal rates</i>	<ul style="list-style-type: none"> SNF cost report appeal in progress Medical-Surgical inpatient rates increased to \$2,280/day. Projected to yield \$6m annually.

Further details in the Appendix

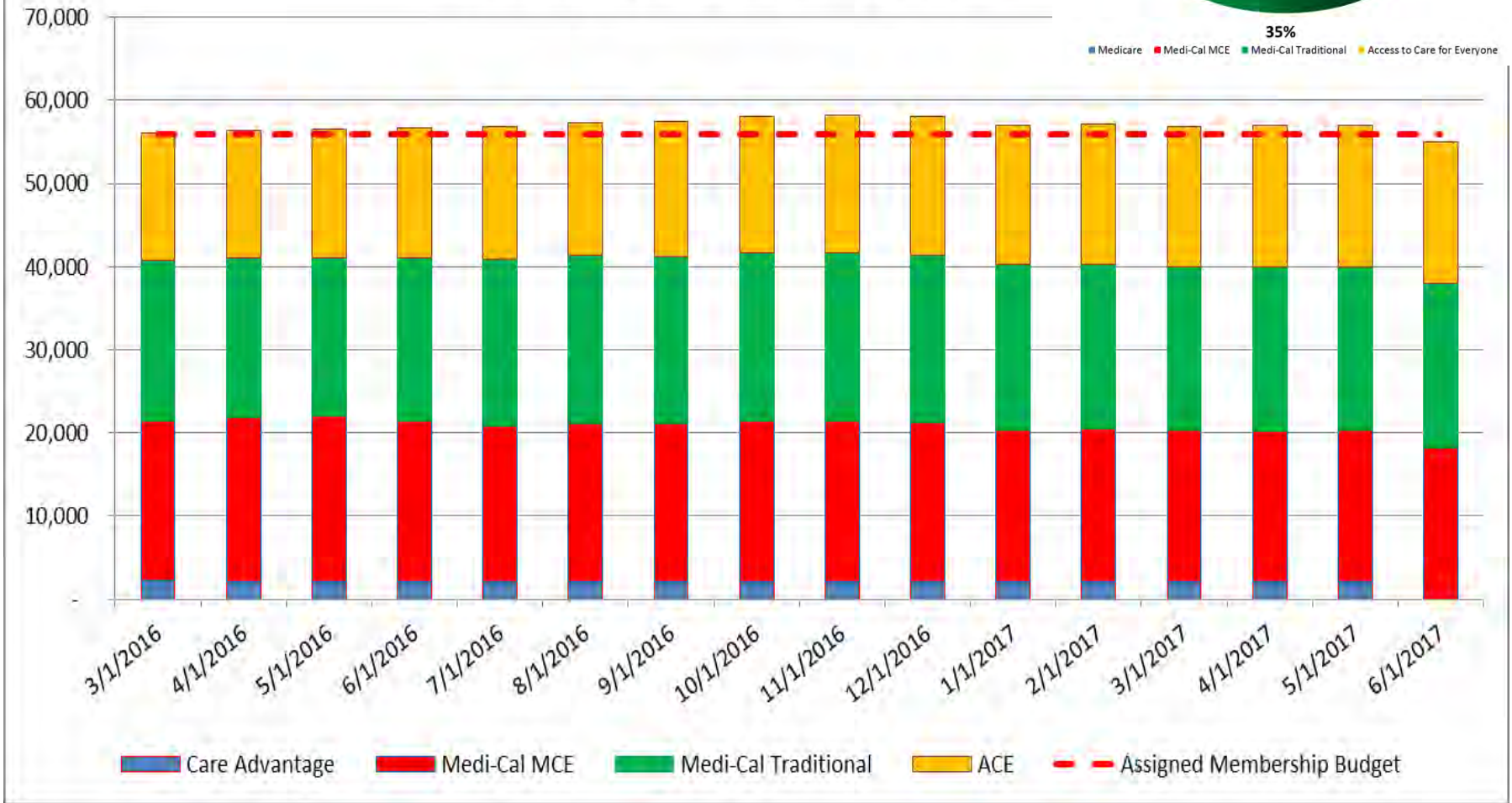
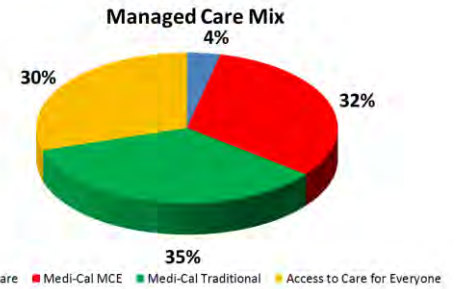
APPENIDIX

**San Mateo Medical Center
Payer Mix
June 30, 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	21.8%	16.6%	5.2%		21.0%	16.6%	4.4%	
16 Medi-Cal	58.7%	59.9%	-1.3%		58.0%	59.9%	-1.9%	
17 Self Pay	2.1%	3.5%	-1.3%		1.9%	3.5%	-1.5%	
18 Other	3.6%	5.9%	-2.4%		4.7%	5.9%	-1.2%	
19 ACE/ACE County	13.9%	14.1%	-0.2%		14.3%	14.1%	0.2%	
20 Total	100.0%	100.0%			100.0%	100.0%		



Managed Care Membership Trend

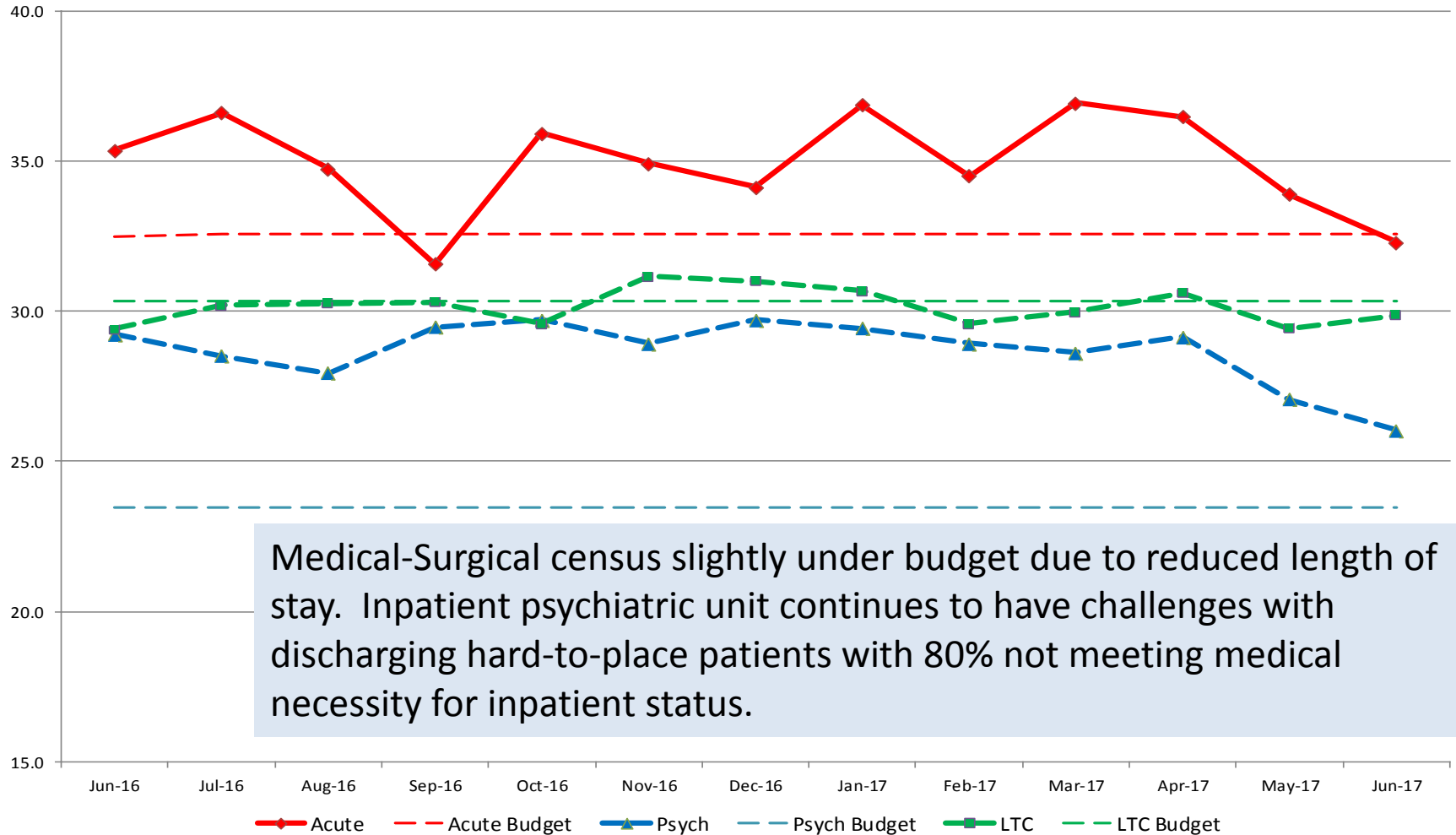


**San Mateo Medical Center
Inpatient Census
June 30, 2017**

MONTH			
Actual	Budget	Variance	Stoplight
2,646	2,614	32	1%

YEAR TO DATE			
Actual	Budget	Variance	Stoplight
34,224	31,801	2,423	8%

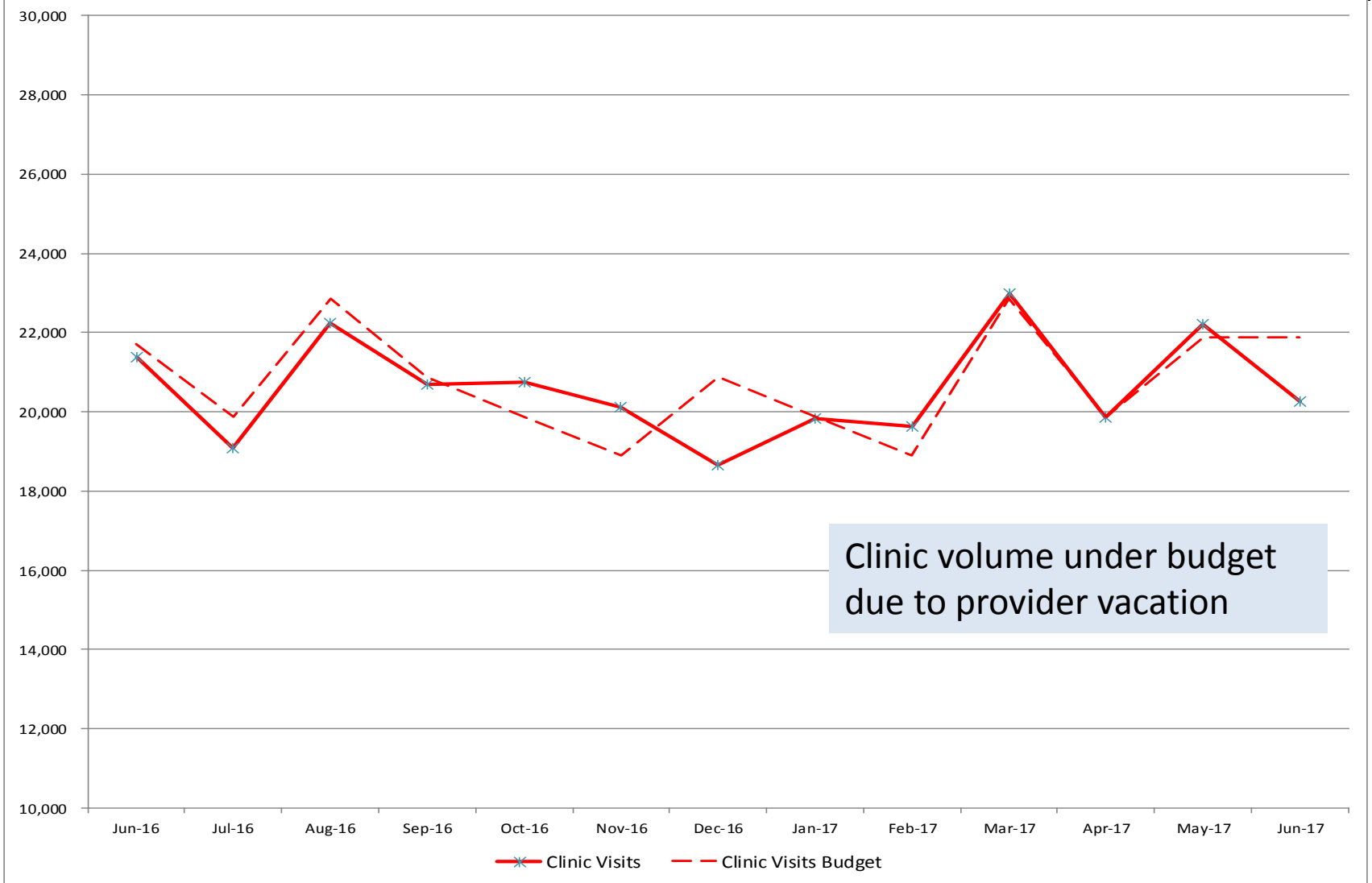
Patient Days



Medical-Surgical census slightly under budget due to reduced length of stay. Inpatient psychiatric unit continues to have challenges with discharging hard-to-place patients with 80% not meeting medical necessity for inpatient status.

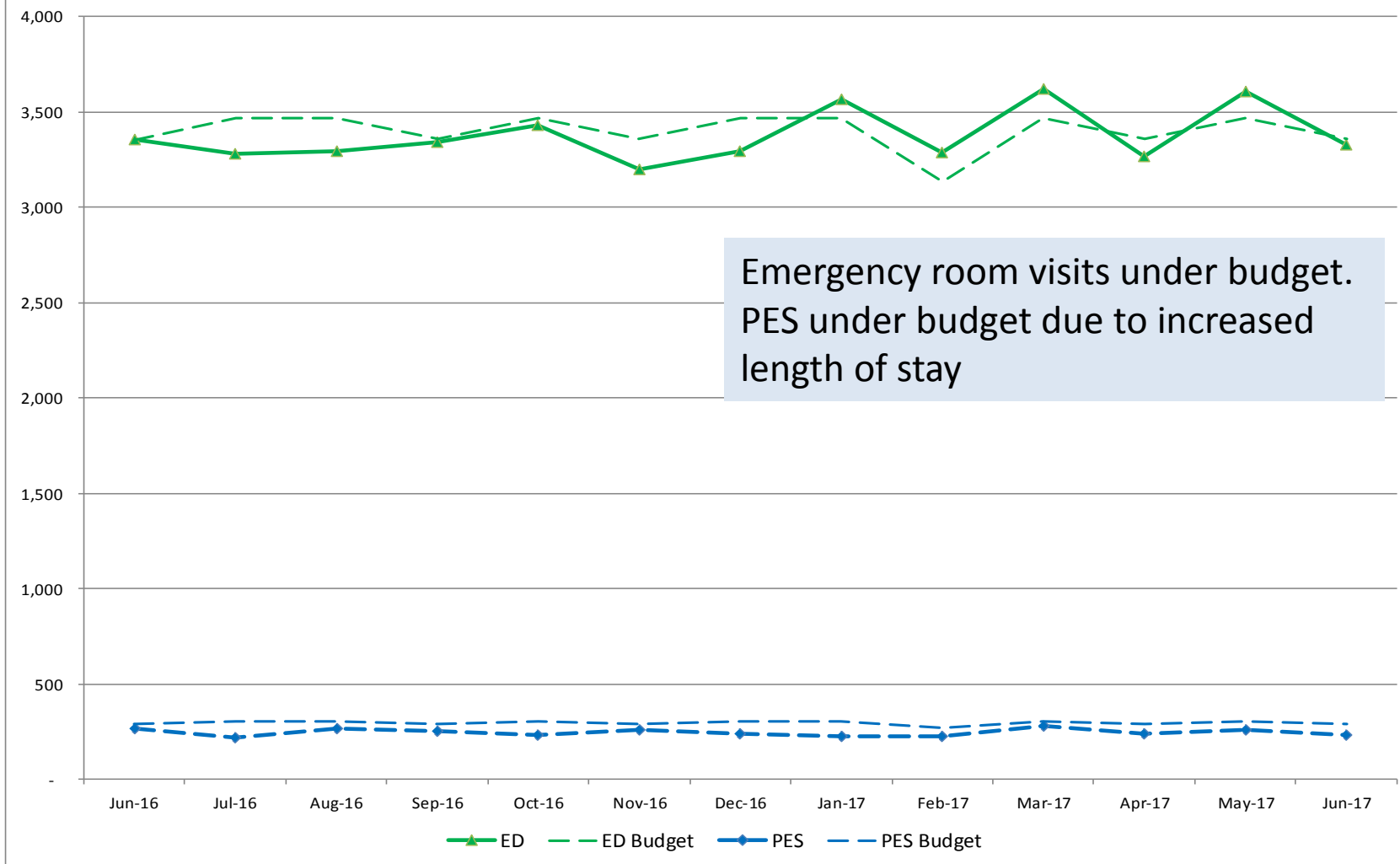
**San Mateo Medical Center
Clinic Visits
June 30, 2017**

	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
Clinic Visits	20,264	21,867	(1,603)	-7%	246,318	248,488	(2,170)	-1%



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

	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
ED Visits	3,565	3,651	(86)	-2%	43,466	44,420	(954)	-2%

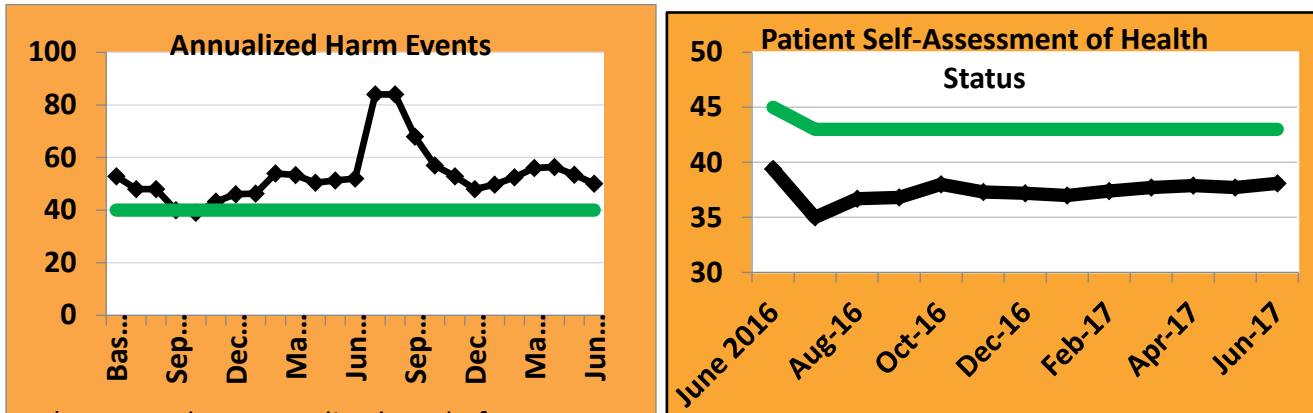


San Mateo Medical Center CEO REPORT



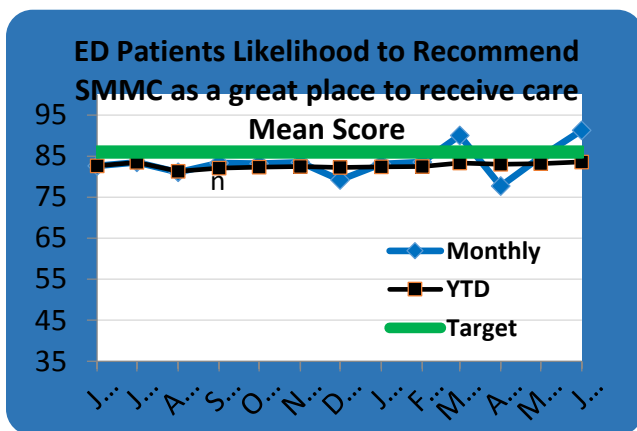
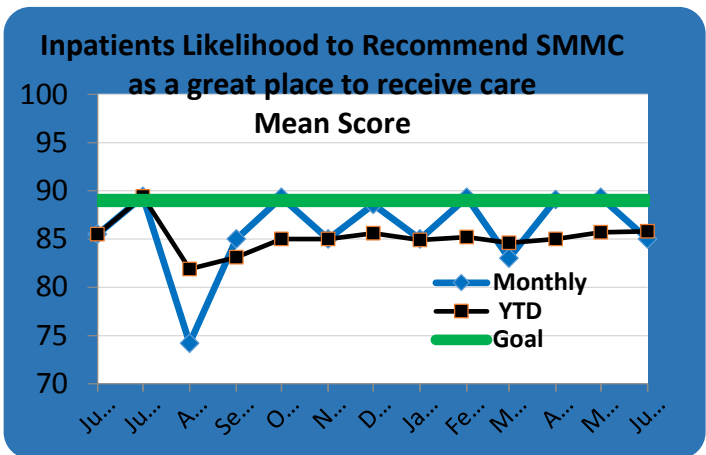
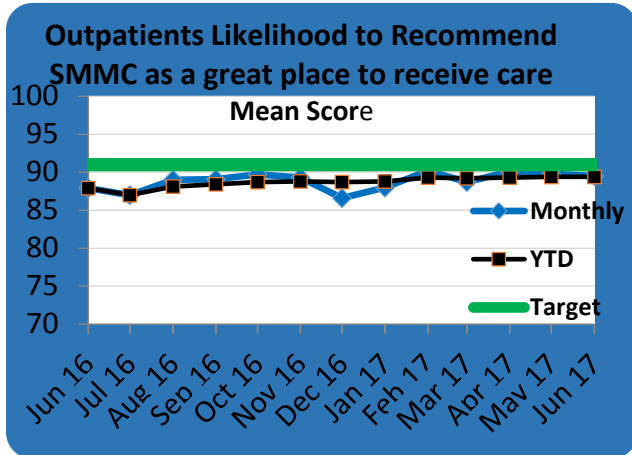
August, 2017

EXCELLENT CARE



- **IA Aces First Portion of Long Term Care Survey-** We are in the midst of our annual survey for Long Term Care. The first portion of the survey focused on clinical and support services. The IA portion of this survey concluded on July 20th with a single finding. This is a remarkable accomplishment and even prompted the surveyor (who was highly complementary of all staff) to note that had it not been for that finding, this would have been her first perfect survey ever. Congratulations to Malu Cruz, Dr. Haresh Ruparel and all the staff who made this possible. (The “Life Safety Survey” (facilities) portion of the survey is ongoing as this report goes to press.)
- **SMMC Recognized for Outstanding Work in Reducing Sepsis Mortality-** The California Health Report recently published an article highlighting work that California Public Hospitals have done to improve care after the implementation of the Affordable Care Act. The article quoted Chief Medical Officer Dr. Susan Fernyak and San Mateo Medical Center was recognized for cutting its sepsis mortality rate in half. The full article can be found at: <https://www.calhealthreport.org/2017/07/13/study-preparing-affordable-care-act-meant-better-care-patients-california/>

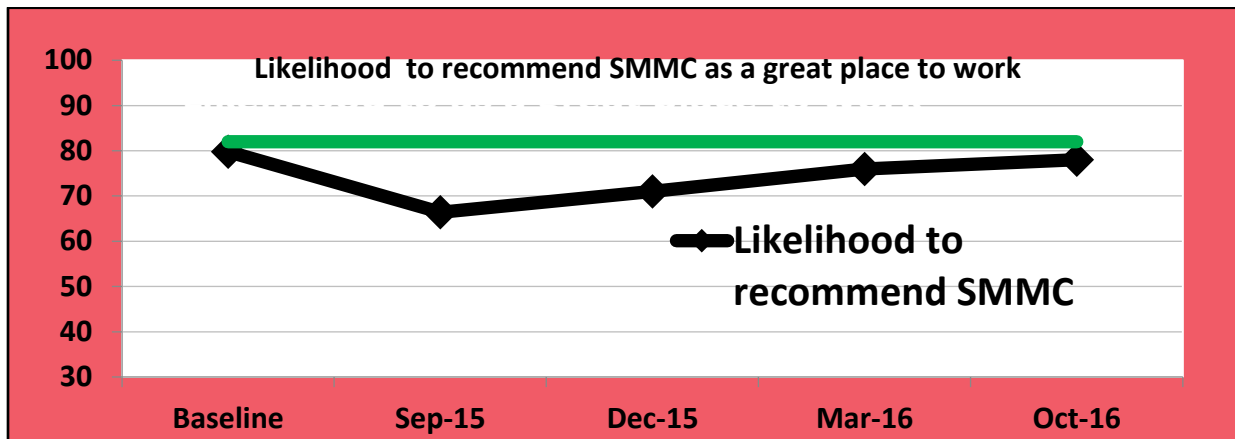
PATIENT CENTERED CARE



- **SMMC Hosts Annual HOGS School Supply Run:** On July 22nd, SMMC hosted the 8th Annual HOGS School Supply Run. The Golden Gate Harley-Davidson Owners Group (HOGs) riders donated over 120 backpacks filled with school supplies to be given to SMMC pediatric patients so they have a good start to their school year this fall. In addition the group donated several thousand dollars to further support the event. We are grateful for our long-standing relationship with the Golden Gate HOGs. Thank you to Glynis Carreira, Donna Lautenbach, Phuong Hathaway, Dianaliza Ponco and all the staff and volunteers who made this such a successful event.
- **Selected patient/family stories of gratitude:**
 - **From the Emergency Department:**
 - Very professional and firm kept the blankets on to keep you warm. Thank you.
 - All the personnel very good people they attend the sick one very good
 - **From 2A/B:**
 - Best care I've ever had. The nurses are the best. God bless them.
 - I am impressed that when I heal from my accident, I am going to write article about SMMC.
 - The personnel maintained my privacy, they controlled the pain, they attended my necessities, they behaved very kind & respectful.
 - **From Coastside Clinic:**
 - I like it how the doctor attends me and more that he speaks Spanish.

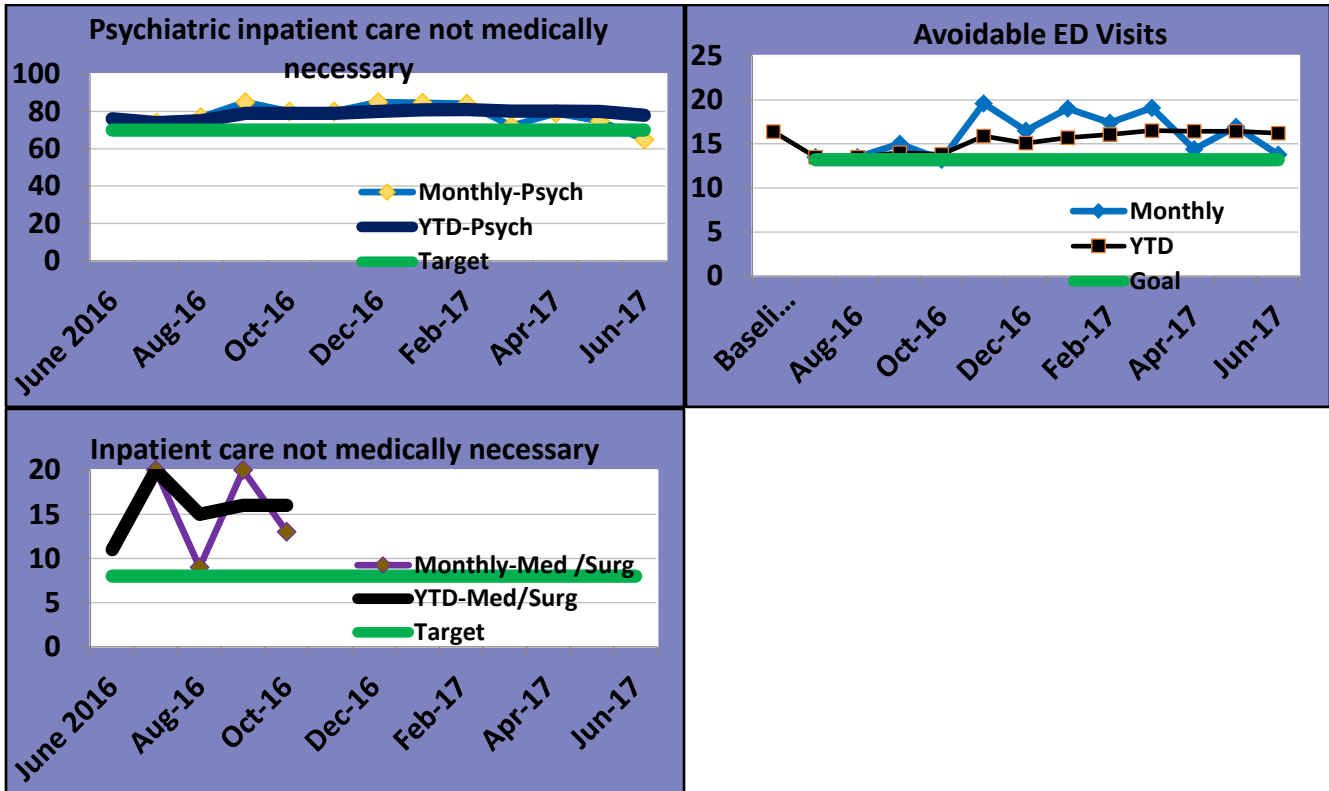
- **From Daly City Clinic:**
 - I always recommend my dr. to others.
 - I want to thanks a lot San Mateo Medical Center for everything - perfect!!!
- **From Fair Oaks Health Center:**
 - She's the best doctor that my son could ever had she's so nice and she cares about any concerns that we might have.
 - Each time I have an appointment I have received good attention in the clinic & of doctor
- **From the Innovative Care Clinic:**
 - Very professional and friendly PCP who listened to my concerns and made sure I had an opportunity to ask any questions I had.
 - I was seen ahead of my scheduled appointment. Everything was done with efficiency a courtesy. I couldn't have asked for a better experience.
- **From Pediatrics Clinic:**
 - Dr. Carol was amazing! She made it a great experience for my child and was very helpful in answering my questions. She also helped me schedule his first dental appointment as well as his next physical exam.
- **From the Ron Robinson Senior Care Center:**
 - Great doctor and staff all around. Very caring, helpful, patient and courteous.
 - I have never had a bad experience with the staff never.
 - Nurses infuse confidence, all very kind.
- **From South San Francisco Clinic:**
 - Always seen right away. I get the help I need
 - I am very happy that they assigned me a doctor like her, very professional.
 - The personnel is concerned about their patients, have excellent human quality.
- **From Dental Clinic:**
 - Everyone was very friendly
 - i was very impressed with the dental van and felt secure and at ease
- **From the Medical Specialty Clinic:**
 - I love this place for my health needs, it's convenient and ready accessible
 - this is a very busy office, however they are quick to help or accommodate needing to address getting you in if you need a sooner appt.
 - I cannot begin to express how happy I am with this clinic and all it's members. They saved my life!!!
- **From Surgical Specialty Clinic:**
 - All my appreciation, quality, human warmth & professional. Thank you very much!

STAFF ENGAGEMENT

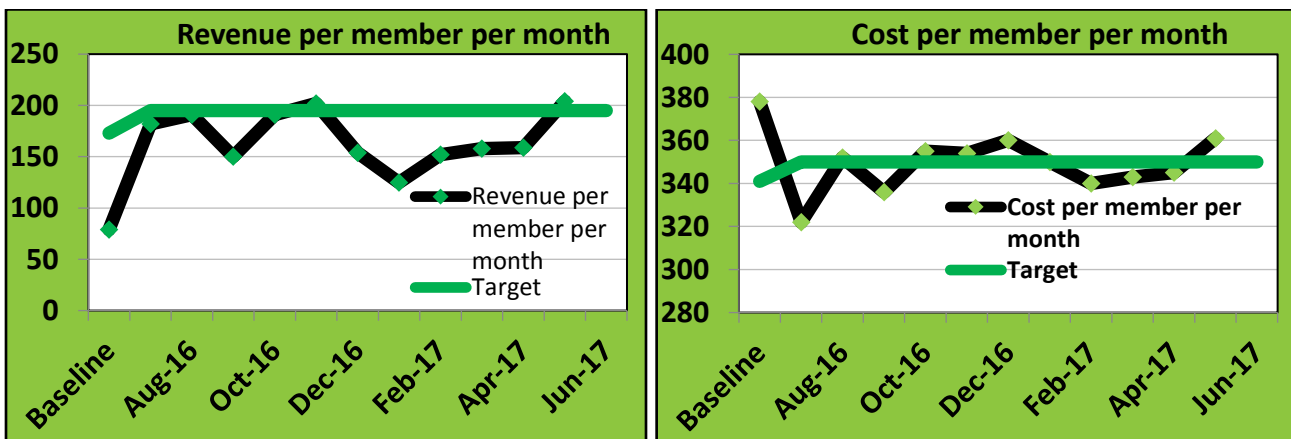


- **Julia McLaughlin Invited to Present at International Nursing Conference-** Julia McLaughlin, Nurse Manager for Psychiatric Emergency Services, has been invited to present at an upcoming conference of the Honor Society of Nursing, Sigma Theta Tau International. Her oral presentation: *Recovery-Oriented Care and Inpatient Psychiatric Nursing Care* will occur at the society's 2018 Nursing Education Research Conference. Congratulations Julia!
- **Staff with Multiple Recognitions by Colleagues and Patients Celebrated at Employee Forums-** SMMC's staff recognition programs continue to expand. The quarterly staff forums occurred the week of July 17th and I had the privilege of recognizing those staff members who had received five or more submissions in either of our recognition programs. The *Just Because* Program allows patients to identify staff members who they feel have provided exceptional service. This quarter we recognized Elvis Hernandez (Coastside Clinic), Ramila Jayant (Patient Access) and Alfredo Aldana (Rehabilitation Services) who all received five or more patient recognitions. The *Above and Beyond* Program allows staff members to recognize their colleagues' efforts. This quarter the following staff members received five or more submissions: Ponni Chandrasekaran (Psychiatric Services), Lupe Gutierrez (Fair Oaks), Leeann Barthell (Laboratory) and Elena Ricevuto (Accounting). Congratulations again to all of these individuals and to everyone who has been recognized in either program.

RIGHT CARE, TIME AND PLACE

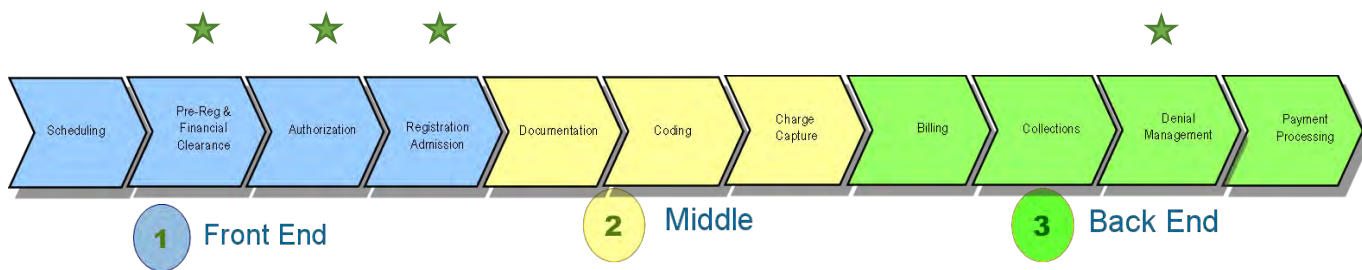


FINANCIAL STEWARDSHIP



- Revenue Cycle Transformation-FY18 Initiatives**

Our FY17-18 Financial Stewardship strategic initiative continues to focus on the revenue cycle, in that sweet spot of things that matter and things we can control. We are building on last year's front-end work on insurance verification accuracy and inpatient authorization approvals. In addition, we are adding a focus on ensuring our providers are enrolled with Medicare and Medi-Cal to eliminate payment denials.



In August we are launching an improvement effort to reduce the number of insurance plan codes to make the HDX insurance verification system usage more efficient and the code selection easier for our staff. Decreasing the number of insurance plan codes will streamline the registration process and decrease the number of claim denials due to billing the wrong insurance plan. The transformation of revenue cycle workflows is a critical foundational element of preparing for the replacement of our Invision patient accounting system.

- **Cash Collections Exceeds Annual Target**

Our Patient Access team is responsible for collecting co-pays, deductibles and other similar payments from our patients treated in the Emergency Room or admitted into the hospital. For FY16-17, the team set an ambitious goal of collecting \$100,000 per month, or \$1.2 million for the full year, which represented an 18% improvement over the prior year. Through staff-driven problem solving and coaching, along with daily, weekly and monthly monitoring of collection data, the team blew away their target and collected \$1.4 million for the year, which was a 35% improvement! Kudos to the Patient Access team for demonstrating the power of an engaged workforce and for utilizing our LEAP principles in their daily work.

- **Revenue Integrity Risk Assessment**

Our Finance team recently launched an assessment of compliance and operational risks and gaps in our revenue cycle processes. Also known as “revenue integrity”, the goal is to ensure we are billing and collecting for every dollar we are entitled to in a manner that is fully compliant with government laws and regulations. To assist us in the assessment we have engaged the CPA firm of Moss Adams, who will provide an independent assessment that will focus on crucial requirements that need to be added or strengthened in compliance program plans, activities, or policies and procedures. Specifically they will address the following:

- Current compliance and revenue integrity program strengths.
- Maturity scale result for each of the OIG’s Seven Essential Elements of an effective compliance program.
- Opportunities for compliance program improvement in accordance with the Seven Essential Elements, plus the proposed eighth and ninth elements related to risk assessment and data mining.
- Proposed recommendations to improve compliance effectiveness and corrective actions.

The Finance team is working closely with SMMC’s Compliance and Privacy Officer as well as collaborating with the County Controller and Internal Audit division to integrate the findings from this assessment into the County-wide risk assessment.

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



Indicator	Number	Change from previous month	Change from previous year
ACE Enrollees	21,506 (June, 2017)	-0.9%	9.8%
SMMC Emergency Department Visits	3,565 (June, 2017)	-7.9%	-1.5%
New Clients Awaiting Primary Care Appointment	933 (July, 2017)	-3%	300%

Environmental Health Services Begins Phase II of Groundwater Assessment

Environmental Health Services is entering the second phase (of three) of its comprehensive San Mateo County Plain Groundwater Assessment. Working with the Office of Sustainability and many stakeholders, the project has identified the issues affecting groundwater, including the lack of rainfall and excessive extraction, compiled data, and built conceptual models and management strategies. Phase I, which will be completed in August, involves further research and a series of stakeholder workshops. Phase II will solicit feedback on modeling scenarios for potential future conditions associated with climate change and additional groundwater extraction needs. The report will be completed in 2018 (Phase III).

Aging and Adult Services Advances System Efficiency with LEAP Support

The Public Administrator Program within Aging and Adult Services is making significant strides in improving work-flow of daily operations using LEAP to map out work-flows to identify inefficiencies and improve processes. To date, Aging and Adult Services supported by the LEAP Institute has conducted week-long “improvement events” on the program’s referral intake procedure, warehouse operations (pictured on right) and asset inventory. Currently, the team is focused on how to improve the program’s payment request protocol.



Photo: LEAP Institute

Whole Person Care Initiative Launches Bridges to Wellness

The Whole Person Care initiative has recently launched the Bridges to Wellness program to identify County residents who are in serious need of medical attention and to connect them to health care services. Whole Person Care offers a more comprehensive, unified approach to treating the most vulnerable patients, including the homeless and heavy users of emergency services. Bridges to Wellness maintains a single health record that is shared within the Health System. In addition to identifying gaps and engaging in real-time problem solving, the initiative gives a clearer picture of health disparities in the community, including a higher-than-expected average age of homeless residents, which was originally thought to be around 50-55. With the first group of patients having now been identified, that estimated average age has since increased.

Health System Leadership Explores Best Practices in State Correctional Health Facilities

As part of the Health System’s initiative to improve healthcare services provided to San Mateo County’s incarcerated population, members of the Health Executive Council (HEC), including Louise Rogers, Chief, and Carlos Morales, Acting Director of Correctional Health, visited San Quentin and Stockton prisons to explore medical and mental healthcare models in inmate settings. In the last year, the Sheriff’s Office and Correctional Health Services have installed behavioral health pods in the County jails. Planning has commenced for an RFP for acute psychiatric services to be released soon. These visits provided the opportunity to learn from the state’s experience serving similar populations with complex mental health, drug and alcohol and medical problems.