



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

## **BOARD OF DIRECTORS MEETING**

Thursday, March 1, 2018

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

March 1, 2018 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. Janet Chaikind*

##### *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. February 1, 2018 Meeting Minutes

**G. MEDICAL STAFF REPORT**

Chief of Staff Update

*Dr. Bryan Gescuk*

**H. ADMINISTRATION REPORTS**

- 1. Behavioral Health Integration in Primary Care
- 2. Board Self-Assessment
- 3. California Clubhouse
- 4. Financial Report
- 5. CEO Report

*Dr. Susan Fernyak ..... Verbal*  
*Dr. CJ Kunnappilly..... Verbal*  
*Louise Rogers ..... Verbal*  
*David McGrew..... TAB 2*  
*Dr. CJ Kunnappilly..... TAB 2*

**I. HEALTH SYSTEM CHIEF REPORT**

Health System Snapshot

*Louise Rogers..... TAB 2*

**J. COUNTY MANAGER’S REPORT**

*John Maltbie*

**K. BOARD OF SUPERVISOR’S REPORT**

*Supervisor Carole Groom*

**L. ADJOURNMENT**

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*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](mailto: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, February 1, 2018  
Executive Board Room

**Board Members Present**

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

**Staff Present**

Michelle Lee  
David McGrew  
Dr. Susan Fernyak  
Peggy Jensen  
Dr. Elzbieta Jurka  
Cassius Lockett  
DeAndre James  
Priscilla Romero  
Gabriela Behn  
Aimee Armsby  
Julia McLaughlin  
Michele Medrano  
Robbi Larcina

**Members of the Public**

Leslie Williams-Hurt  
Cecilia Diaz  
Angela Gonzalez  
Karen Pugh

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 8:07 AM to Open Session. A quorum was present (see above).	
Report out of Closed Session	Medical Staff Credentialing Report for February 1, 2018. Medical Executive Committee Minutes from January 9, 2018.	Aimee Armsby reported that the Board unanimously approved the Credentialing Report and accepted the MEC Minutes.
Public Comment	None.	
Foundation Report Leslie Williams-Hurt	A small team of Harvard Business School alumni will be assisting the Foundation in strategic planning and operational effectiveness.	FYI
Consent Agenda	Approval of: 1. Hospital Board Meeting Minutes from January 4, 2018.	It was MOVED, SECONDED and CARRIED unanimously to approve all items on the Consent Agenda.
Medical Staff Report Dr. Bryan Gescuk	The Fair Oaks Health Center's new supervising Pediatrician is Dr. Yousef Turshani.  Medical Staff is participating in the Model Cell P2 work that is currently underway.	FYI

	Dr. Janet Chaikind has graciously agreed to be the Vice Chief of Staff while Dr. Herk is on extended leave.	
Laboratory Services at SMMC Dr. Elzbieta Jurka	<p>In 2017, the SMMC Lab performed 411, 800 tests and generated \$33,117,076 in revenue. There are 9 departments within the Lab and are staffed by 60 employees. They serve 32 separate sites, 24 hours per day every day with a test result time of less than 60 minutes for most tests.</p> <p>2017 Accomplishments:</p> <ul style="list-style-type: none"> <li>• New STAGO instrument for Coag testing removing issues we Faced when testing lipemic or hemolyzed samples.</li> <li>• Removed HCLL and replaced with Safetrace for blood bank mgmt. system. Ease of use, more reporting modules, safer</li> <li>• MDRO definitions applied to our Anti-Biogram to proactively evaluate and respond as a route to Anti-Microbial Stewardship</li> <li>• Added PCT testing to our test menu to aid the ER in differential DX of viral versus bacterial symptoms</li> <li>• Added CHS and Vibrant America as a client for testing increasing revenue by 14,000 a month</li> <li>• Implemented a document control system to maintain version history, increase ease of access and help with monitoring competency and review.</li> <li>• Passed our JACHO Lab Survey with negligible issues. Missed 5 out of 3500 possible citations</li> <li>• Phlebotomy area received a facelift and redesign in Feb of 2017 to aid in patient satisfaction and employee satisfaction</li> </ul>	FYI
Compliance Update Gabriela Behn	<p>2017 Achievements:</p> <ul style="list-style-type: none"> <li>• Completed formal Compliance Program Plan and the Compliance Committee Charter</li> <li>• Finalized 2017-2018 Compliance Work Plan</li> <li>• Updated Compliance Code of Conduct Policy/Form, the Coding Compliance Policy, and the Billing Audit Protocol</li> <li>• Completed audit inventory</li> <li>• Completed annual Compliance Program gap assessment (by Moss Adams)</li> </ul> <p>2018 Compliance Work Plan Goal: Monitoring, Auditing, and Internal Reporting Systems</p> <ul style="list-style-type: none"> <li>• Finalize 2018 Audit Plan</li> <li>• Utilize centralized tracking log – post on SharePoint</li> <li>• Finalize Compliance Program metrics to track</li> </ul>	FYI
Flu Update Joan Spicer Cassius Lockett	<p>The surge period started on December 24, 2017 and ended on January 9, 2018. Contributing factor: ED patients were sicker in 2017 than in 2016.</p> <ul style="list-style-type: none"> <li>• 11% more visits</li> <li>• 17% more (or 153) patients at level 4 and level 5</li> <li>• 13% more admissions</li> </ul>	FYI

	<ul style="list-style-type: none"> <li>• 2.6 x more patients admitted to ICU; 2.0 x more patients transferred to higher level care</li> <li>• 5 patients/day on average waiting for beds (range 1-12)</li> </ul> <p>Inpatient units experienced a higher census:</p> <ul style="list-style-type: none"> <li>• 39 (+/-11) 2AB average daily census; 5 (+/-2) ICU average daily census</li> <li>• 10 long term patients waiting placement versus 3 the prior year</li> <li>• No rooms available x2 because of isolation requirements (range 3-15)</li> <li>• Elective surgeries were canceled</li> </ul> <p>Flu:</p> <ul style="list-style-type: none"> <li>• Three outbreaks of flu in acute psych, skilled nursing, and medical-surgical units</li> <li>• 524 flu tests ordered <ul style="list-style-type: none"> <li>– 108 flu A +</li> <li>– 41 flu B +</li> </ul> </li> <li>• Nurse sick calls about 4%</li> <li>• Critical crisis in staffing New Year's Day</li> </ul>	
Financial Report David McGrew, CFO	The December FY17/18 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 was included in the Board packet and answered questions from the Board.	FYI
Health System Report Louise Rogers	The Health System will continue to provide Mutual Aid support for both Sonoma and Santa Barbara Counties in the aftermath of the wildfires and mudslides.	FYI
County Manager John Maltbie	The mid year budget review is scheduled for February 13 and no unforeseen issues are expected.	FYI
Board of Supervisors Supervisor Groom	No update.	FYI

Supervisor Groom adjourned the meeting at 9:20 AM. The next Board meeting will be held on March 1, 2018.

Minutes recorded by:



Michelle Lee, Executive Secretary

Minutes approved by:



Dr. Chester Kunnappilly, Chief Executive Officer



San Mateo Medical Center  
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# TAB 2

# ADMINISTRATION REPORTS



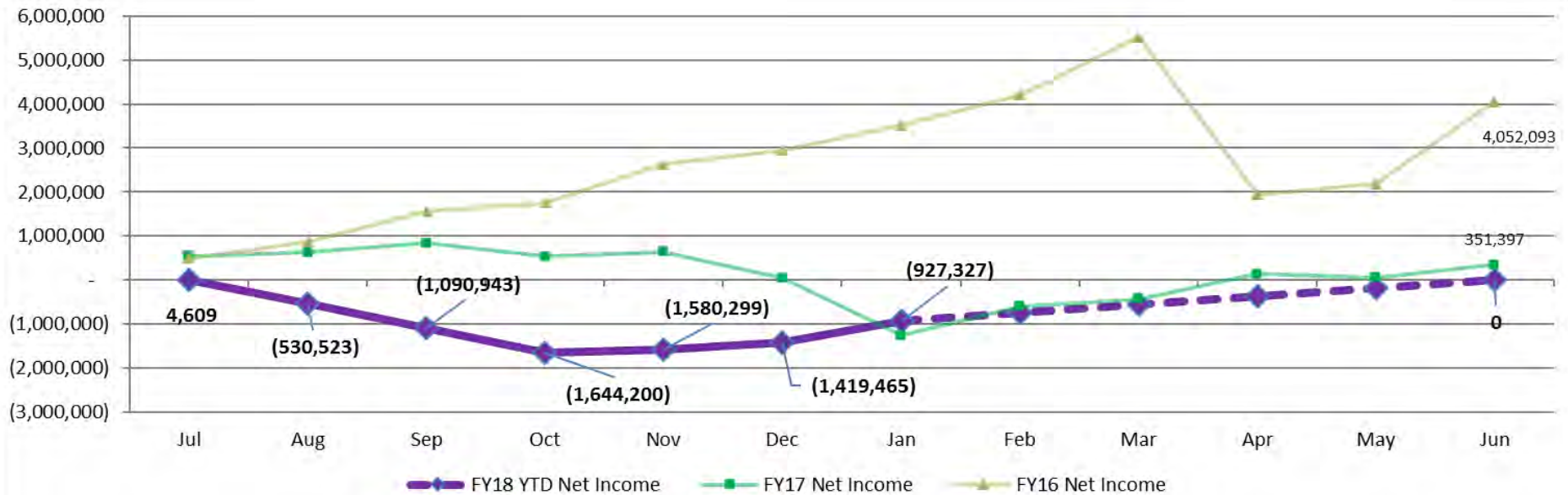


**San Mateo Medical Center**  
*A County System of Healthcare*

**January FY 2017-2018  
Financial Report**

**Board of Directors Meeting  
March 1, 2018**

# Financial Highlights



## December - Positive \$492k:

- FTEs below budget
- Timing of WPC, capital and IGT expenditures

- Voluntary Rate Range
- AB915 Reserves
- Patient service revenue
- Claim denials

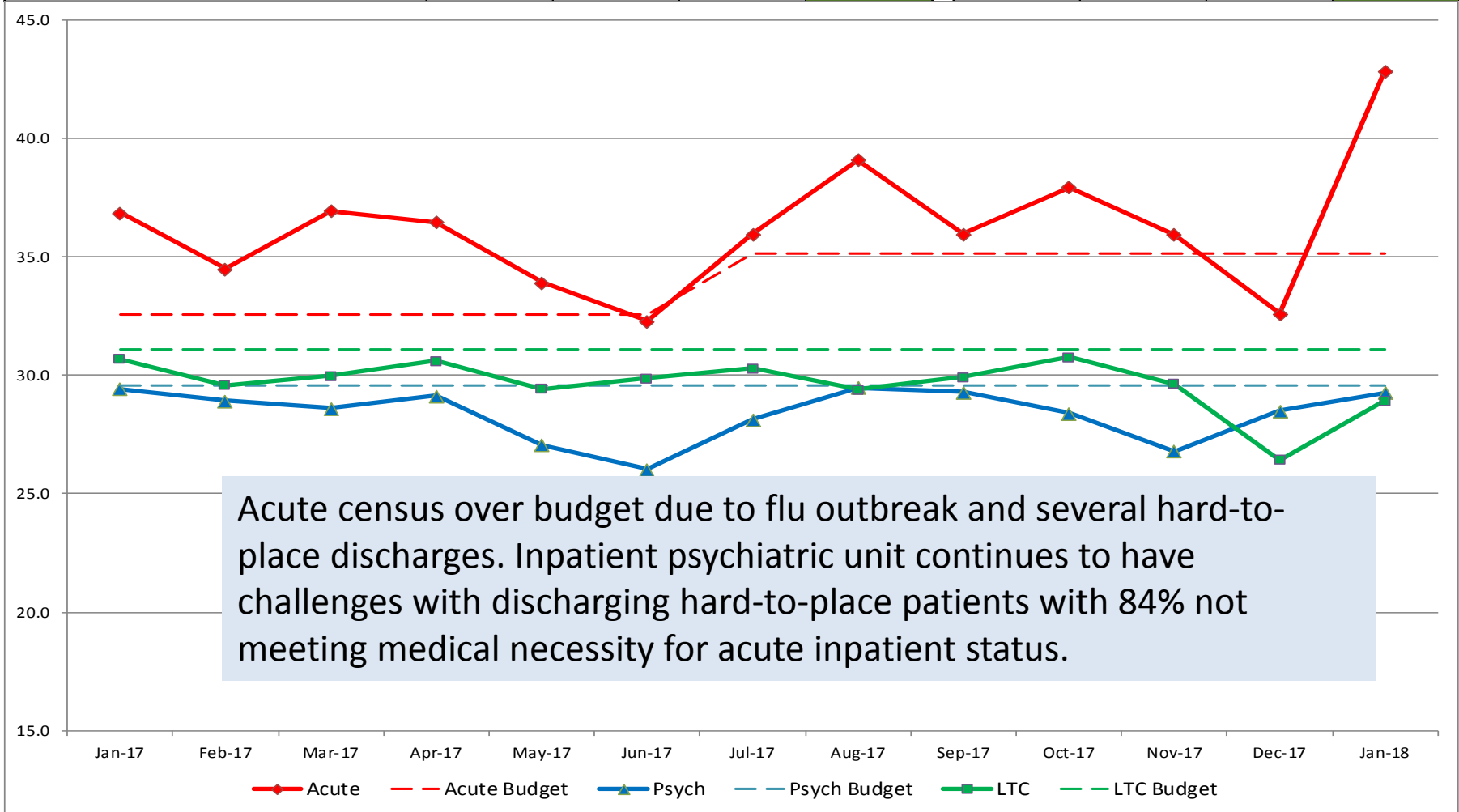
**Forecast FY18:** The new Managed Care Rule enacted by CMS eliminates several supplemental revenue streams. CAPH and DHCS are working on two replacement programs - EPP/QIP and Voluntary Rate Range, which, after CMS approval, is expected to bring us back to budget by year-end.

**San Mateo Medical Center  
Inpatient Census  
January 31, 2018**

MONTH			
Actual	Budget	Variance	Stoplight
3,132	2,934	198	7%

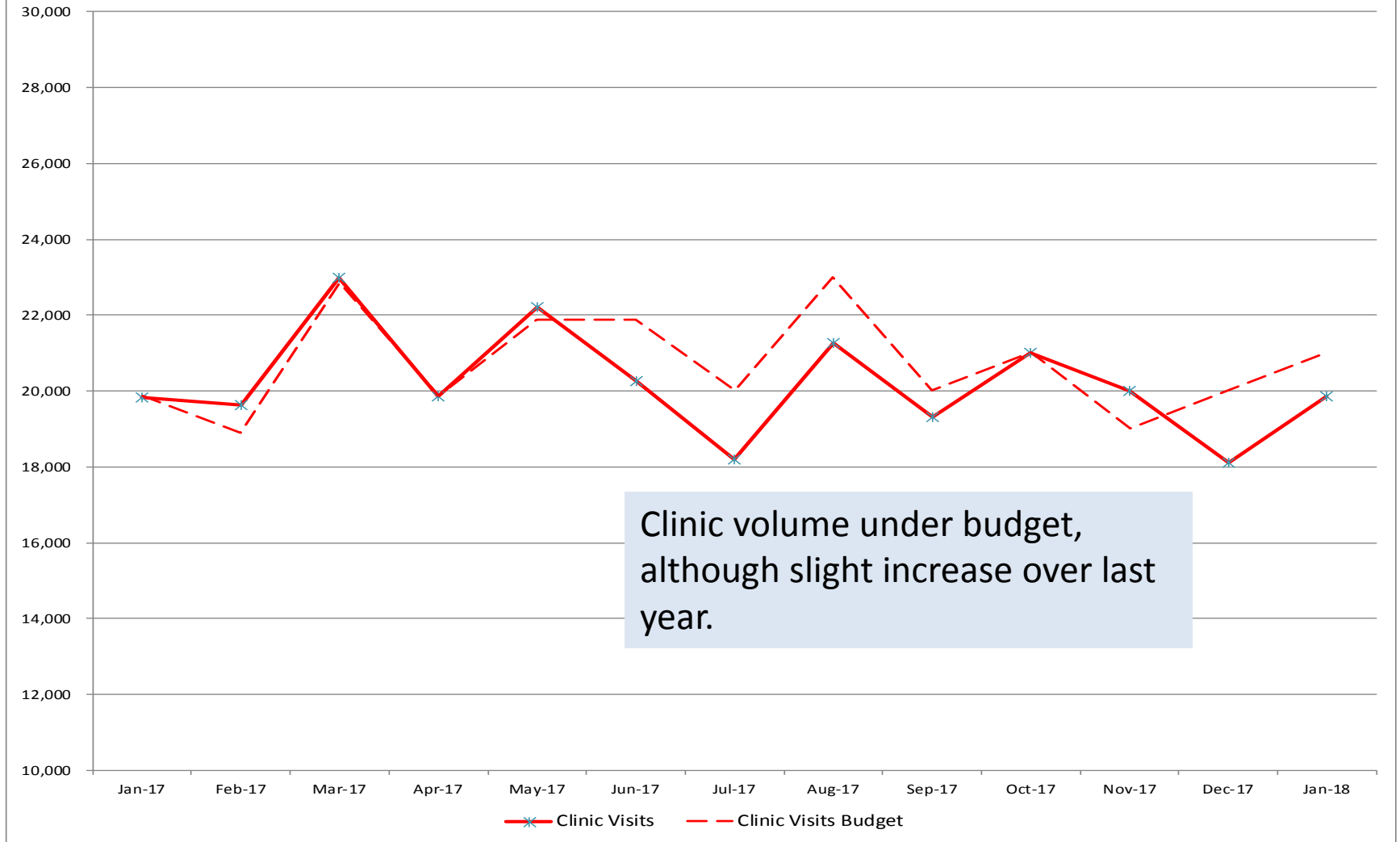
YEAR TO DATE			
Actual	Budget	Variance	Stoplight
20,446	20,348	98	0%

<b>Patient Days</b>	3,132	2,934	198	7%	20,446	20,348	98	0%
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**San Mateo Medical Center  
Clinic Visits  
January 31, 2018**

	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
<b>Clinic Visits</b>	19,851	21,009	(1,158)	-6%	137,725	144,060	(6,335)	-4%

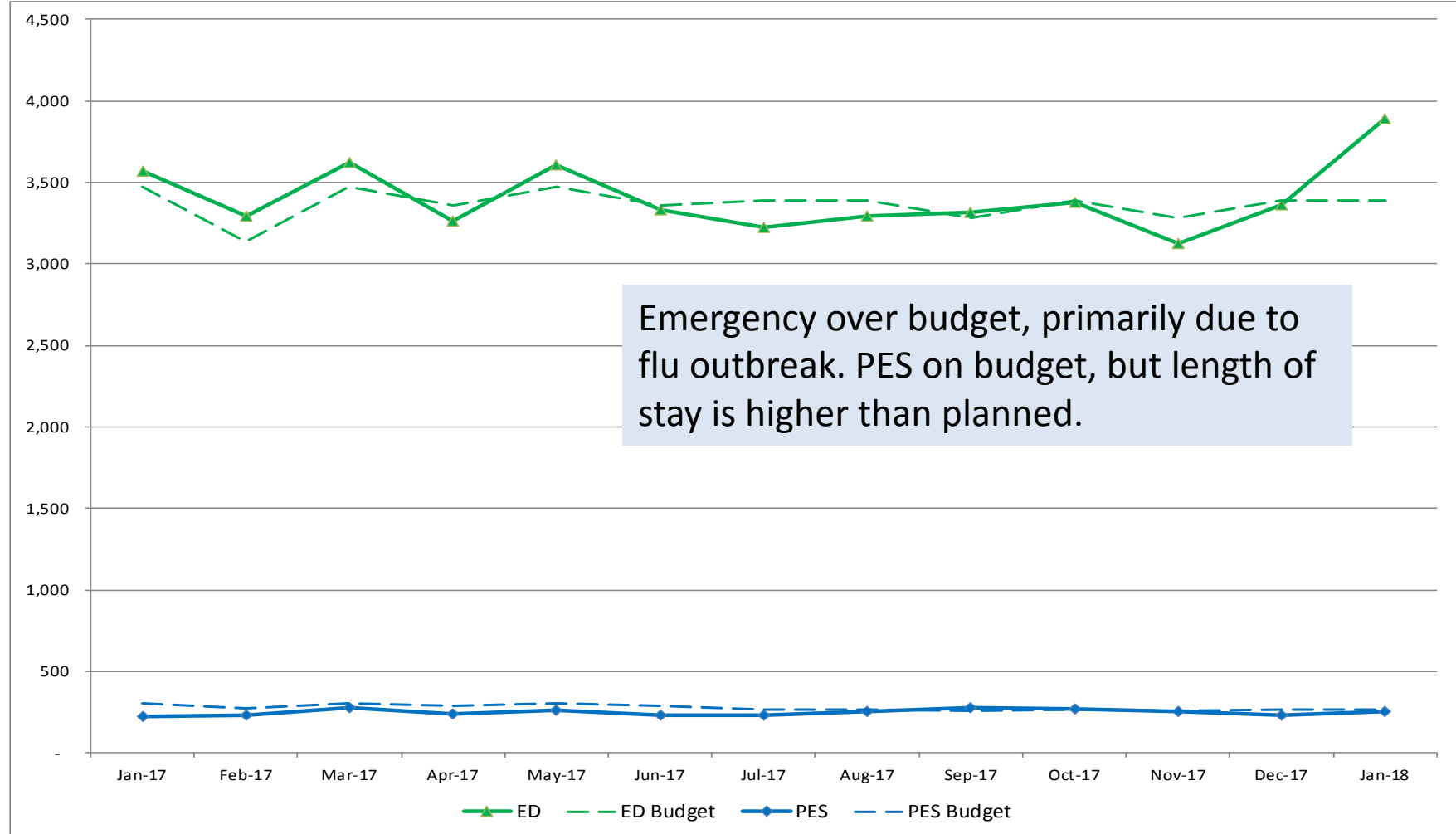


**San Mateo Medical Center  
Emergency Visits  
January 31, 2018**

MONTH			
Actual	Budget	Variance	Stoplight
4,142	3,659	483	13%

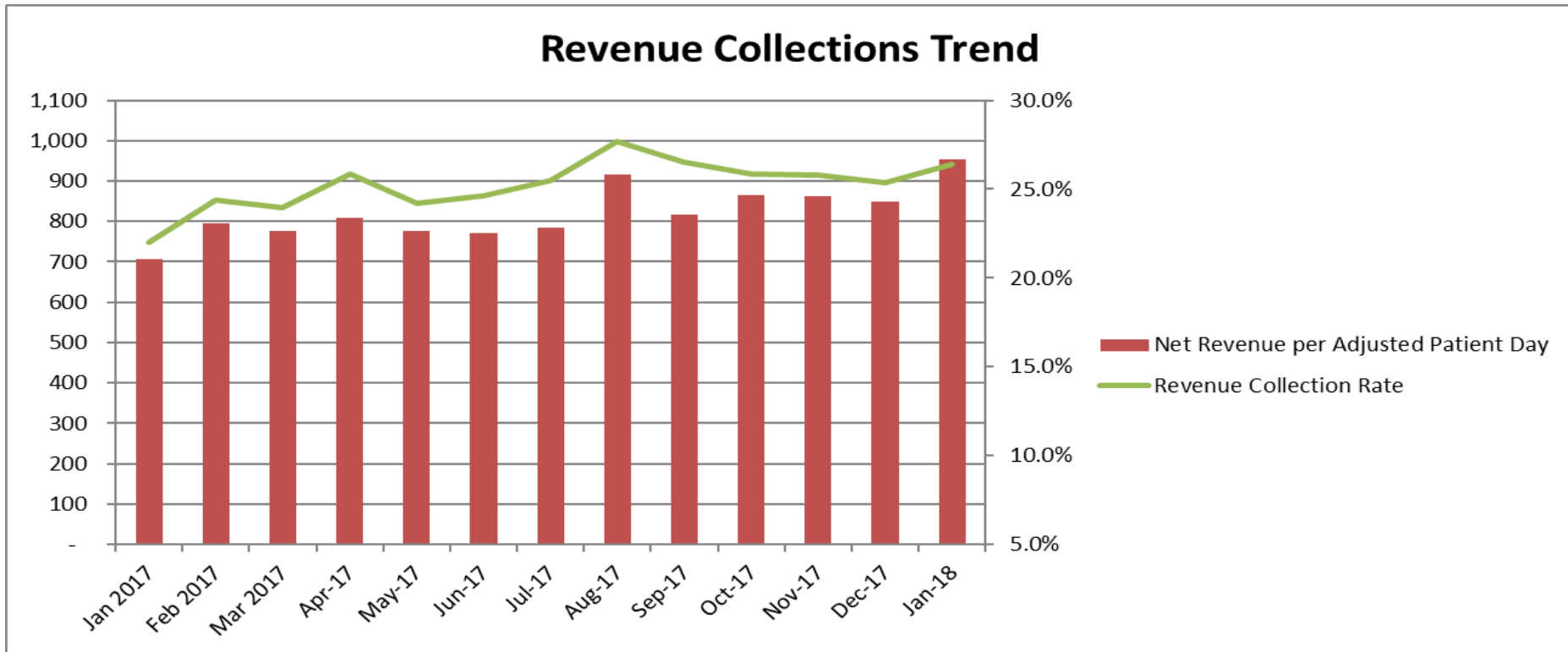
YEAR TO DATE			
Actual	Budget	Variance	Stoplight
25,348	25,379	(31)	0%

**ED Visits**



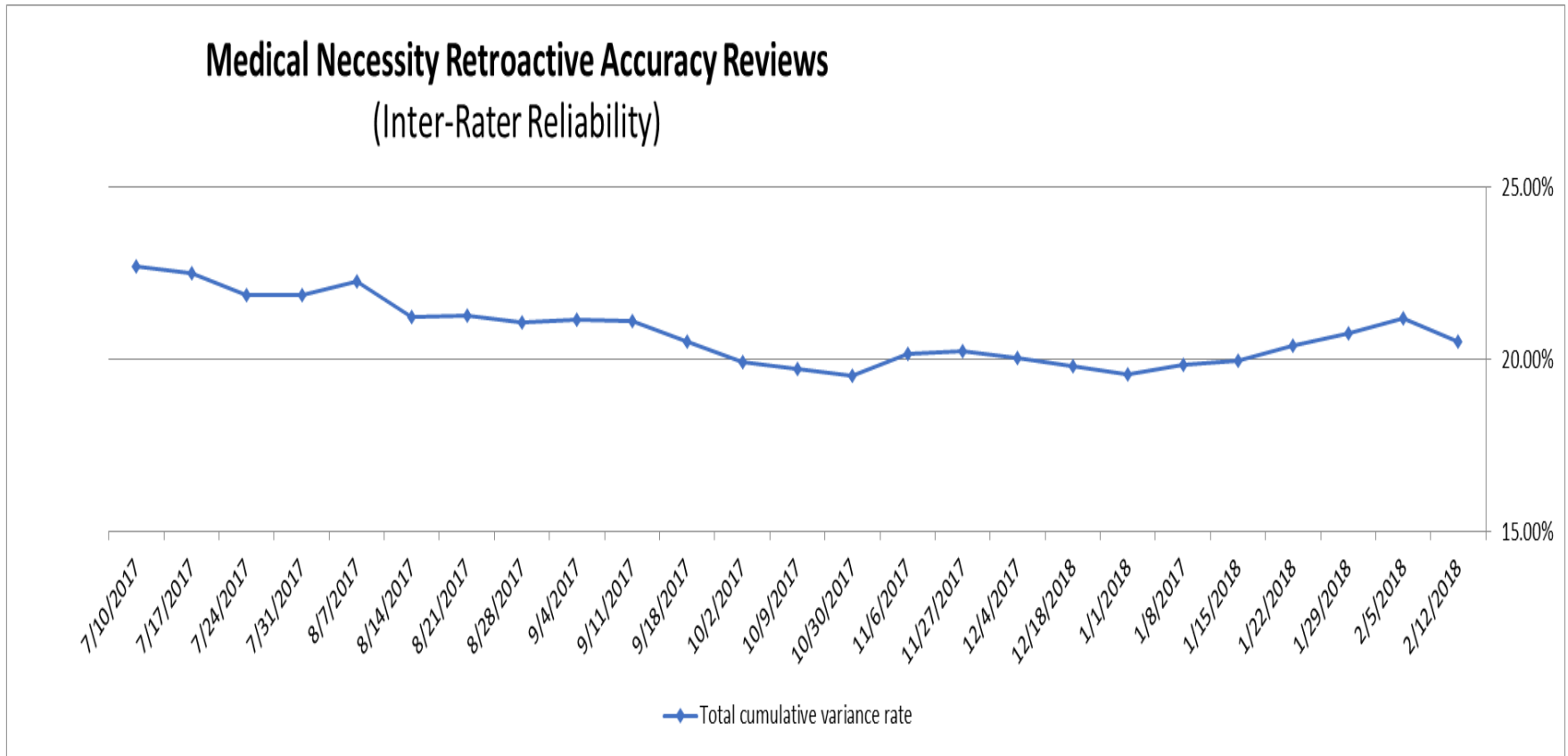
# Key Performance Indicators

## FFS Revenue Collection Trend



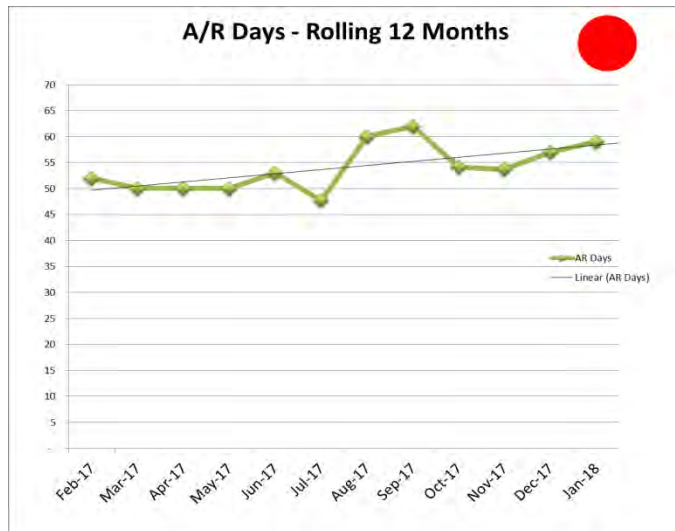
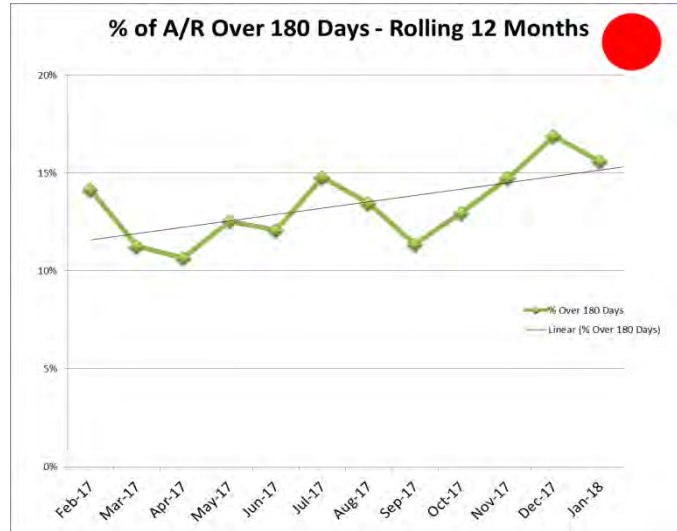
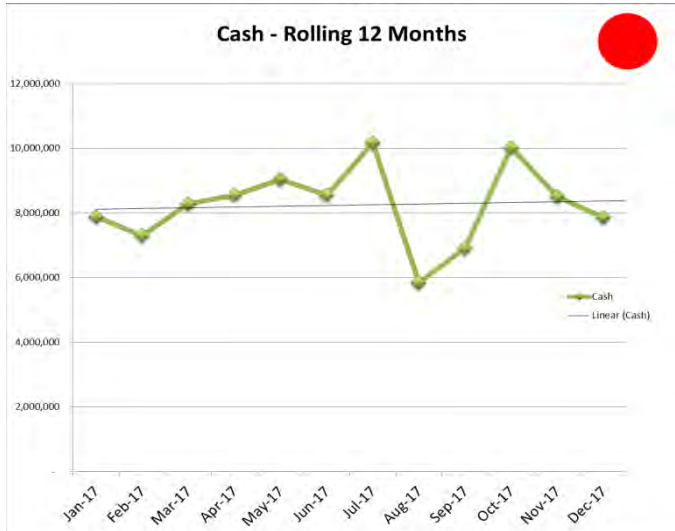
The revenue collection rate declined steadily through 2016 due to high administrative days and lower Medi-Cal rates for acute medical-surgical patients and skilled nursing facility patients at SMMC and BLTC. Beginning 2017, the collection rate bounced back due to FFS revenue from MCE patients. Effective July 2017, revenue includes the updated Medi-Cal rates for acute medical-surgical patients

# Key Performance Indicators



Claims are held pending a review of medical necessity for compliance with acute inpatient billing rules. The retro review process has identified a cumulative error rate of 20%, which is being addressed with weekly variance reviews, focused training/monitoring and LEAP Improvement Charter work. Implementation of a CDI program will further support these efforts.

# Key Performance Indicators





# Financial Improvement Plan

## Executive Summary

Initiative	Status
<i>Denial management</i>	<ul style="list-style-type: none"> <li>External retro reviews in progress. <u>20% of reviewed cases were corrected</u></li> <li>Medical necessity training &amp; monitoring in progress.</li> <li>Denials reporting tool go-live in March</li> </ul>
<i>Clinical Documentation Improvement (CDI)</i>	<ul style="list-style-type: none"> <li>RFP closed January 2nd</li> <li>Vendor selected</li> <li>BOS contract in March</li> <li>Initiate project work in April</li> </ul>
<i>Registration Accuracy</i>	<ul style="list-style-type: none"> <li>Developed A3 Improvement Charter to focus on registration workflows</li> <li>Submitted a BRD for a registration quality workflow and dashboard reporting tool. Demo in January</li> </ul>
<i>Increase Medi-Cal rates</i>	<ul style="list-style-type: none"> <li>SNF cost report appeals in progress</li> <li>Medical-Surgical inpatient rates increased to \$2,280/day. Projected to yield \$6m annually.</li> </ul>
<i>Psych services billing project</i>	<ul style="list-style-type: none"> <li>Draft report delivered. Feedback being incorporated into final report, which is expected January.</li> </ul>

# APPENDIX

**San Mateo Medical Center**  
**Income Statement**  
**January 31, 2018**

MONTH			
Actual	Budget	Variance	Stoplight
A	B	C	D

YEAR TO DATE			
Actual	Budget	Variance	Stoplight
E	F	G	H

1	<b>Income/Loss (GAAP)</b>	492,134	31,850	460,284		(927,327)	222,949	(1,150,277)	
2	<b>HPSM Medi-Cal Members Assigned to SMMC</b>	38,242	38,019	223	1%	266,700	266,133	567	0%
3	<b>Unduplicated Patient Count</b>	69,463	70,114	(651)	-1%	69,463	70,114	(651)	-1%
4	<b>Patient Days</b>	3,132	2,934	198	7%	20,446	20,348	98	0%
5	<b>ED Visits</b>	4,142	3,659	483	13%	25,348	25,379	(31)	0%
7	<b>Surgery Cases</b>	224	265	(41)	-16%	1,642	1,818	(176)	-10%
8	<b>Clinic Visits</b>	19,851	21,009	(1,158)	-6%	137,725	144,060	(6,335)	-4%
9	<b>Ancillary Procedures</b>	75,229	69,402	5,827	8%	475,913	476,070	(157)	0%

10	<b>Acute Administrative Days as % of Patient Days</b>	0.0%	16.0%	16.0%	100%	0.0%	16.0%	16.0%	100%
11	<b>Psych Administrative Days as % of Patient Days</b>	84.1%	80.0%	-4.1%	-5%	81.4%	80.0%	-1.4%	-2%

(Days that do not qualify for inpatient status)

**Pillar Goals**

12	<b>Revenue PMPM</b>	141	150	(9)	-6%	132	150	(18)	-12%
13	<b>Operating Expenses PMPM</b>	388	387	(1)	0%	371	387	16	4%

14	<b>Full Time Equivalentents (FTE) including Registry</b>	1,176	1,252	76	6%	1,166	1,252	86	7%
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**San Mateo Medical Center  
Income Statement  
January 31, 2018**

	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>	11,324,156	9,577,810	1,746,346	18%	67,496,247	67,044,669	451,578	1%
22 <b>Outpatient Gross Revenue</b>	25,852,758	25,324,704	528,055	2%	170,957,241	177,272,927	(6,315,687)	-4%
23 <b>Total Gross Revenue</b>	37,176,914	34,902,514	2,274,401	7%	238,453,488	244,317,597	(5,864,109)	-2%
24 <b>Patient Net Revenue</b>	9,804,790	10,512,930	(708,140)	-7%	63,997,822	73,590,509	(9,592,687)	-13%
25 <b>Net Patient Revenue as % of Gross Revenue</b>	26.4%	30.1%	-3.7%	-12%	26.8%	30.1%	-3.3%	-11%
26 <b>Capitation Revenue</b>	1,341,726	1,291,667	50,060	4%	4,620,200	9,041,667	(4,421,467)	-49%
27 <b>Supplemental Patient Program Revenue</b> (Additional payments for patients)	10,152,341	10,030,626	121,715	1%	69,341,502	70,214,383	(872,881)	-1%
28 <b>Total Patient Net and Program Revenue</b>	21,298,857	21,835,223	(536,366)	-2%	137,959,524	152,846,559	(14,887,034)	-10%
29 <b>Other Operating Revenue</b> (Additional payment not related to patients)	1,085,523	1,236,192	(150,669)	-12%	8,193,783	8,653,343	(459,560)	-5%
30 <b>Total Operating Revenue</b>	22,384,379	23,071,414	(687,035)	-3%	146,153,307	161,499,901	(15,346,594)	-10%

**San Mateo Medical Center**  
**Income Statement**  
**January 31, 2018**

	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	16,318,976	15,814,559	(504,417)	-3%	108,397,538	110,701,912	2,304,374	2%
32 Drugs	915,580	806,645	(108,935)	-14%	5,551,909	5,646,518	94,609	2%
33 Supplies	875,208	916,646	41,437	5%	5,857,474	6,416,519	559,045	9%
34 Contract Provider Services	3,360,153	3,290,227	(69,926)	-2%	22,305,962	23,031,588	725,626	3%
35 Other fees and purchased services	3,890,957	4,517,084	626,127	14%	26,389,814	31,619,588	5,229,774	17%
36 Other general expenses	337,573	504,203	166,630	33%	3,027,249	3,529,423	502,175	14%
37 Rental Expense	171,573	189,615	18,042	10%	1,216,571	1,327,306	110,735	8%
38 Lease Expense	822,975	822,975	(0)	0%	5,760,828	5,760,828	(0)	0%
39 Depreciation	250,574	260,089	9,515	4%	1,760,755	1,820,622	59,867	3%
40 <b>Total Operating Expenses</b>	26,943,570	27,122,043	178,474	1%	180,268,100	189,854,304	9,586,204	5%
41 <b>Operating Income/Loss</b>	(4,559,190)	(4,050,629)	(508,561)	-13%	(34,114,793)	(28,354,402)	(5,760,391)	-20%
42 <b>Non-Operating Revenue/Expense</b>	207,856	(760,990)	968,846	127%	(716,813)	(5,326,927)	4,610,114	87%
43 <b>Contribution from County General Fund</b>	4,843,468	4,843,468	0	0%	33,904,279	33,904,279	0	0%
44 <b>Total Income/Loss (GAAP)</b>	492,134	31,850	460,284		(927,327)	222,949	(1,150,277)	

**San Mateo Medical Center  
Payer Mix  
January 31, 2018**

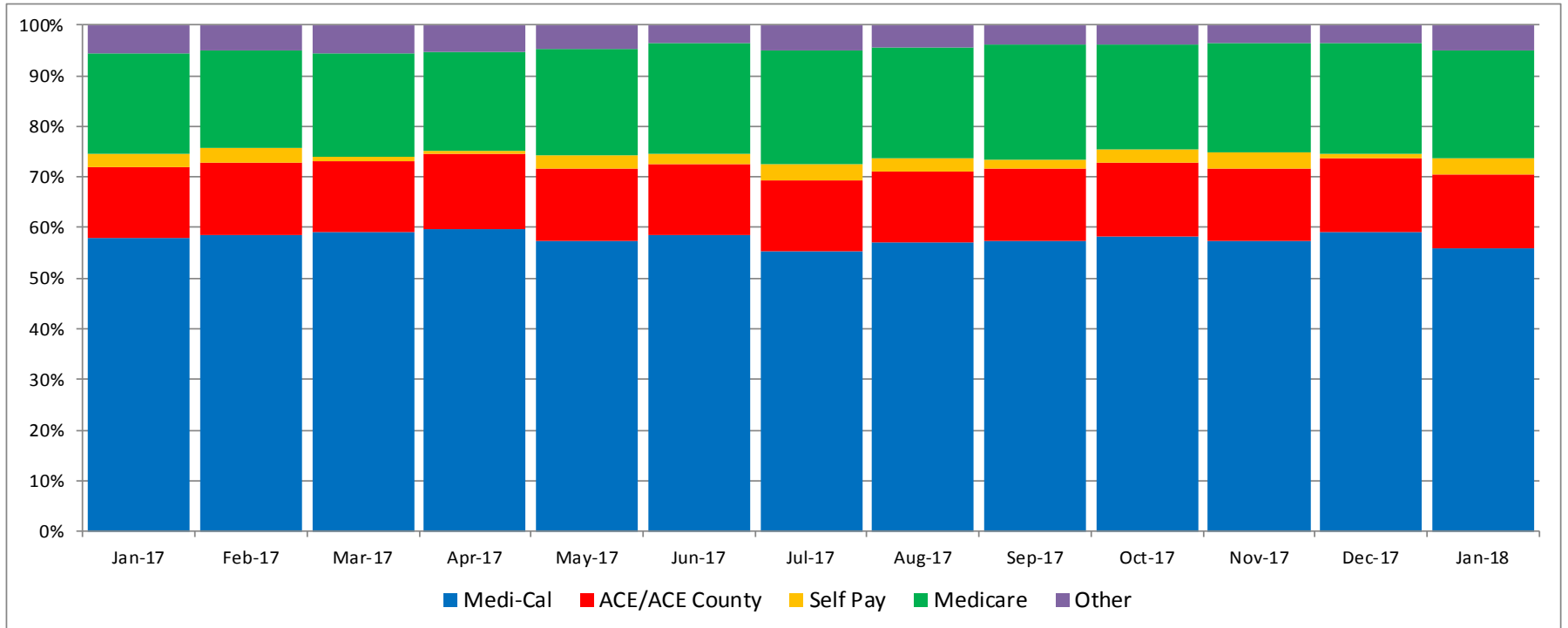
MONTH			
Actual	Budget	Variance	Stoplight

YEAR TO DATE			
Actual	Budget	Variance	Stoplight

**Payer Type by Gross Revenue**

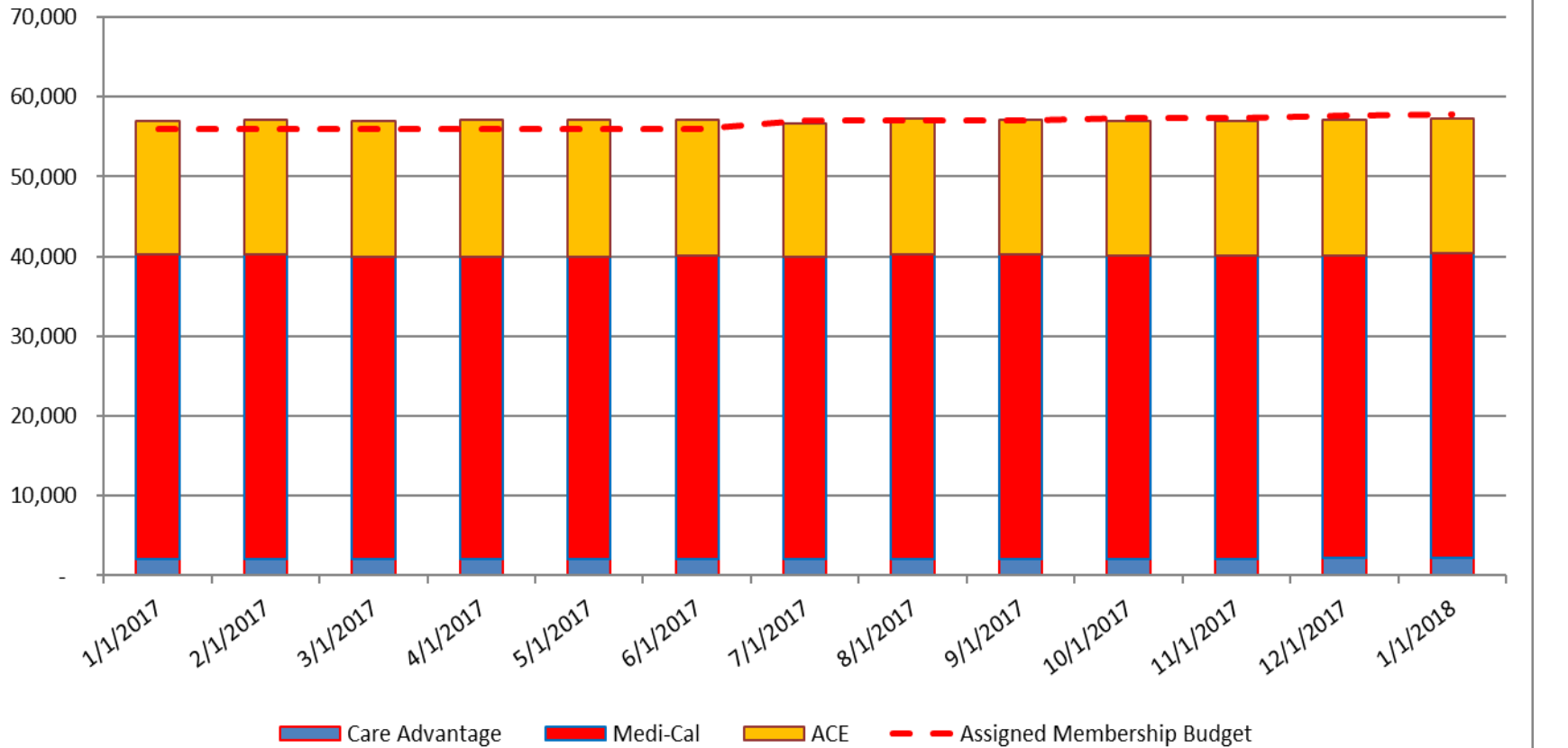
	A	B	C	D
Medicare	21.3%	21.0%	0.3%	
Medi-Cal	55.8%	58.0%	-2.2%	
Self Pay	3.2%	2.0%	1.2%	
Other	5.0%	5.0%	0.0%	
ACE/ACE County	14.7%	14.0%	0.7%	
<b>Total</b>	100.0%	100.0%		

E	F	G	H
21.8%	21.0%	0.8%	
57.2%	58.0%	-0.8%	
2.5%	2.0%	0.5%	
4.2%	5.0%	-0.8%	
14.4%	14.0%	0.4%	
100.0%	100.0%		





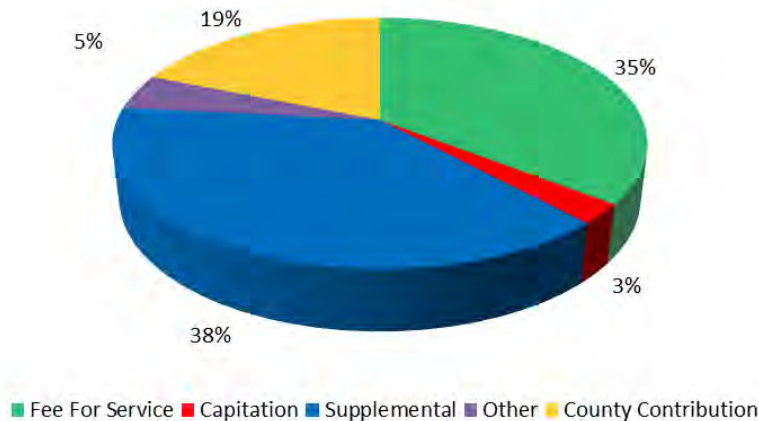
## Managed Care Membership Trend



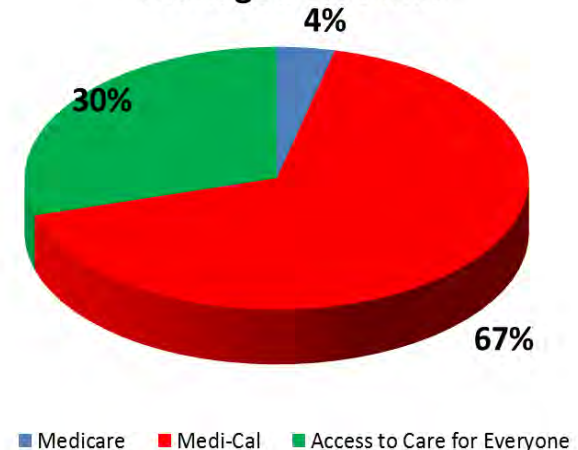
# Revenue Mix

57,000  
Managed  
Care  
Lives

### Sources of Revenue



### Managed Care Mix



- **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.



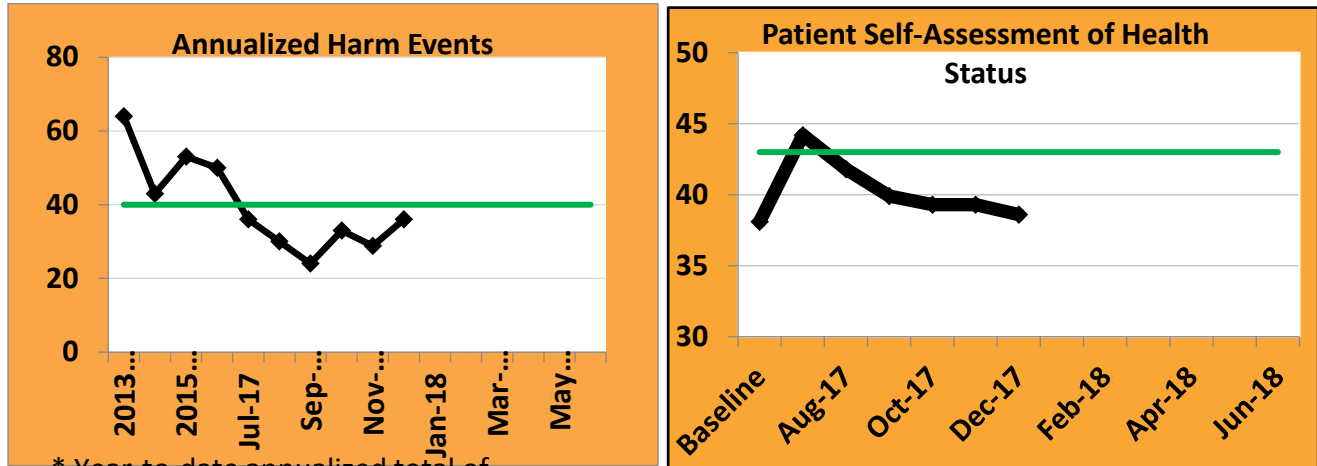
# San Mateo Medical Center CEO REPORT



March, 2018

## EXCELLENT CARE

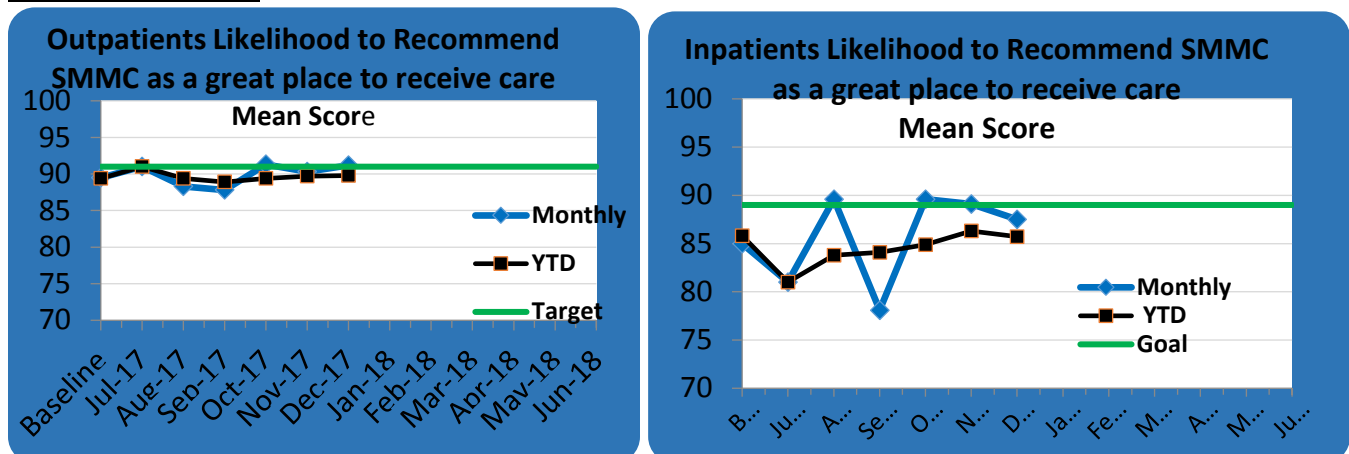
### PILLAR METRICS

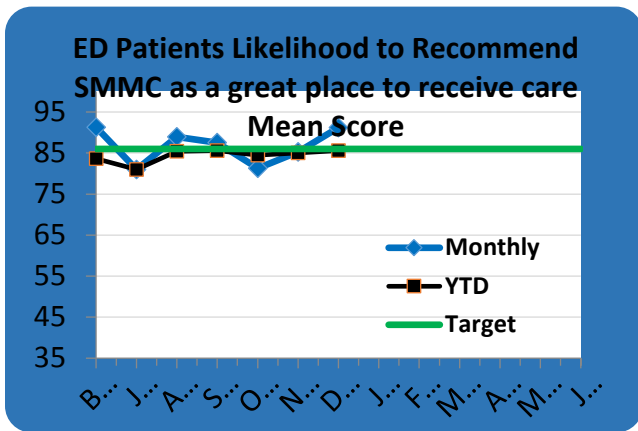


- Congresswoman Jackie Speier visits SMMC to recognize Dr. Steve Hassid** - SMMC wishes to congratulate Dr. Steve Hassid of Cardiology, who was recognized by the Board of Supervisors and Congresswoman Jackie Speier for his extraordinary efforts in patient care. The Congresswoman visited the hospital on February 1 to present Dr. Hassid with a commendation which read: *"Throughout nearly 27 years of public service you have saved countless lives, offered crucial support to those perplexed by their condition, taught tens of thousands how to better their health, supported your colleagues and staff of San Mateo Medical Center in their mission to improve patient care, and demonstrated an enormous love of the human condition."* Dr. Hassid, who was joined by many members of his family, gave a moving speech where he again demonstrated his passion for patient care and his gratitude to countless colleagues who have supported his efforts through the years. Congratulations Dr. Hassid! Thank you also to the medical staff and the medical staff office for coordinating the Congresswoman's visit and Dr. Hassid's reception.

## PATIENT CENTERED CARE

### PILLAR METRICS

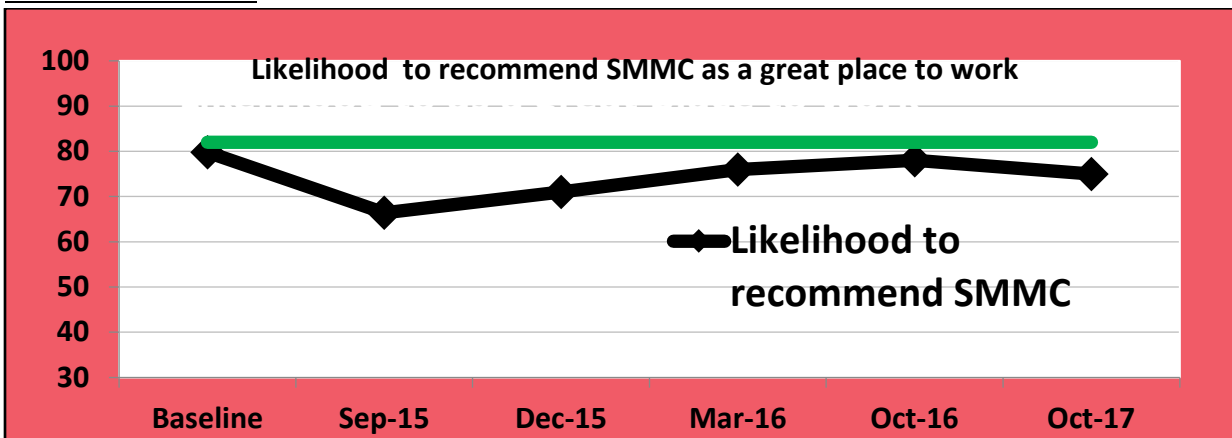




- Infusion Center Renovations Approach Completion-** After almost two years of planning and construction, and thanks to generous support from the San Mateo County Health Foundation, the new infusion center is almost ready to begin serving patients. The new center will offer a much more comfortable and welcoming environment to our Oncology and other patients who require their services. We look forward to a grand reopening in the coming weeks.

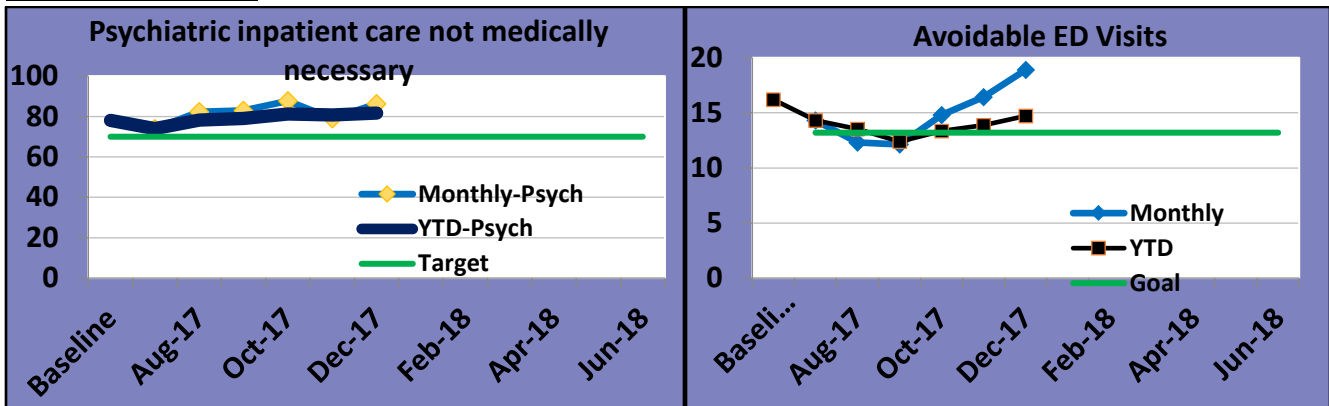
## STAFF ENGAGEMENT

### PILLAR METRICS



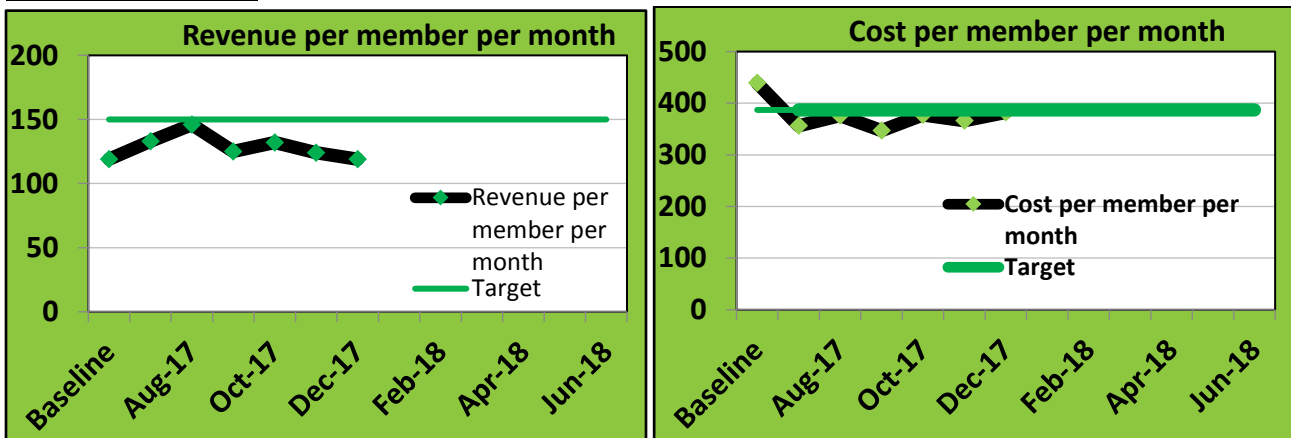
- Employee Engagement Survey Results-** We have received the results of the latest County employee engagement survey completed this past October. As always, we are excited to see the overwhelming commitment of our staff to the mission and clients of the medical center. The survey does, however, reveal significant opportunities for improvement as we continue our journey toward becoming “a great place to work where we are passionate about serving our community.” We will shortly be moving forward with a campaign to communicate the survey results, celebrate our strengths, and most importantly address the opportunities to better meet the needs of our staff. Thank you again to all our staff for everything they do every day to serve our patients
- SMMC Welcomes New Staff Engagement Coordinator-** Martha Elias, has joined SMMC as its new Staff Engagement Coordinator. Martha is a Bay Area native and holds a Master in Social Work from the University of Illinois. Martha’s key responsibilities will be facilitating New Employee Orientation, coordinating our Staff Engagement Survey activities including supporting managers and tracking improvement data, managing SMMC’s formal recognition programs, and chairing our special events. Welcome Martha!

## RIGHT CARE, TIME AND PLACE PILLAR METRICS

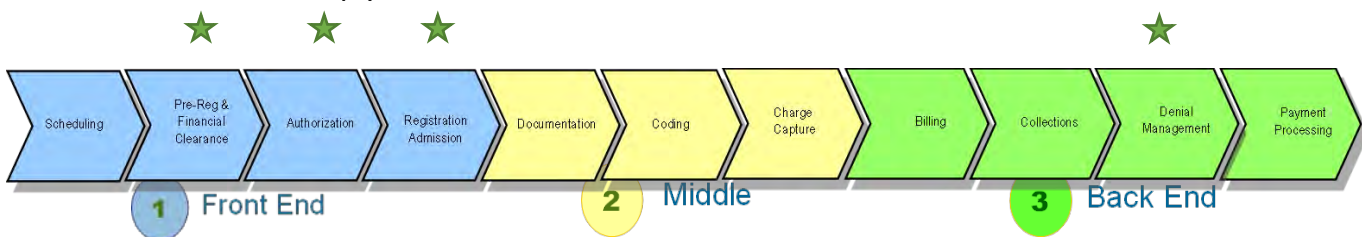


- Flu Season Continues to impact SMMC**- We continue to see high volumes in both the ED and the inpatient wards as this difficult flu season continues to hit the entire nation including the bay area. We appreciate everything that all staff are doing to maintain a safe, high quality environment for all our patients during this difficult time. In addition to working to ensure the care of our more acute patients, we are also continuing to work to move non-acute patients (those who no longer require inpatient hospitalization but do not have a safe lower level of care to go to) to the appropriate settings. Thank you to all our staff and partners for their commitment to our patients during this challenging season.

## FINANCIAL STEWARDSHIP PILLAR METRICS



- Revenue Cycle Transformation – FY18 Initiatives**  
 Our FY17-18 Financial Stewardship strategic initiative continues to focus on the revenue cycle, building on last year’s front-end work with insurance verification accuracy and inpatient authorization approvals. In addition we added a focus on ensuring our providers are enrolled with Medicare and Medi-Cal in a timely manner to eliminate payment denials.

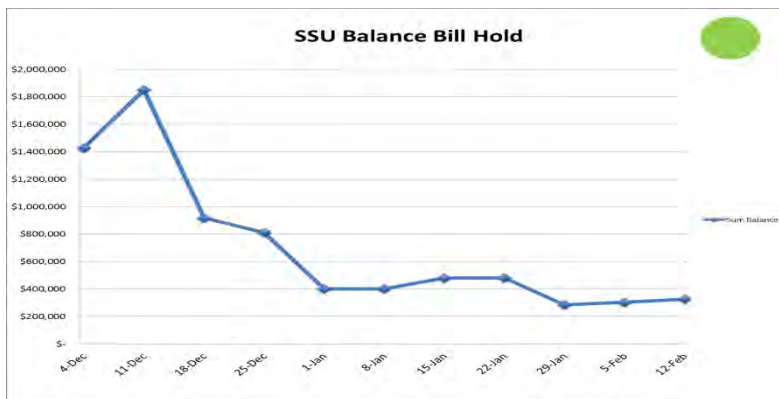


The following measures are tracked in conjunction with our Improvement Charter work:

Measures:	Baseline value (6/30/17)	Current Value (1/31/18)	Budget Value (FY17-18)	Ideal Value
Revenue per member per month (pmpm)	\$119	\$132	\$150	\$398
Claim denials (< 4% NPR)	\$4.4 million	TBD	\$4.0 million	No Denials
Unbilled accounts (5 day bill hold)	\$8.6 million	\$13.4 million	\$5.5 million	No Unbilled

The Registration Accuracy nested charter encompasses the activities to ensure all the required registration data elements for accurate billing will be collected as early in the patient contact cycle as possible, typically before the patient arrives for services. The most significant gaps identified in the current state assessment are the lack of adequate reporting tools for quality assurance, lack of work queue tools to manage workflow prioritization, and inefficient structure of insurance plan codes. Two of these gaps can be addressed through technology to automate work that is done manually today and this will be a focus area for the next several months as we evaluate front-end automated tools in advance of the Invision system replacement.

The Authorizations nested charter workgroup designed several experiments to improve the timeliness of obtaining treatment authorizations for scheduled outpatient surgery (SSU) cases. Prior to this work, many of the authorizations were attempted to be obtained after the surgery occurred, leading to claims being held or, in some cases, denied. As a result of this work, authorizations are now obtained 100% prior to surgery, which resulted in an 83% reduction of bill holds from the high in December, as shown below:



- **Congress Passes DSH Cut Delay**

On February 8th, Congress passed a bill that includes additional funding for several vital health programs, most significant of which for SMMC is a two-year delay of Medicaid Disproportionate Share Hospital (DSH) payment cuts. DSH payments are the funding source the Medi-Cal Waiver 2020's Global Payment Program, which is designated to transform the care delivery model for our uninsured patients. As a result of the delay in cuts, we are currently projecting an increase of approximately \$3 million per year for the next 2 years. While our FY18-19 budget included the expected DSH cuts, we will use the projected funding from the delay to help offset other supplemental funding reductions that resulted from CMS' Medicaid Managed Care rule.

To: SMMC Board Members  
 From: Louise Rogers, Chief  
 Subject: Health System Monthly Snapshot – February 2018



Indicator	Number	Change from previous month	Change from previous year
ACE Enrollees	21,677 (January, 2018)	-0.3%	1.3%
SMMC Emergency Department Visits	4,142 (January, 2018)	15.3%	9.3%
New Clients Awaiting Primary Care Appointment	730 (February, 2018)	8.6%	4.4%

### Congresswoman Jackie Speier and Supervisor Carole Groom Present Honorary Recognition to SMMC’s Chief of Cardiology

After 27 years of working for at the San Mateo Medical Center, Chief of Cardiology Dr. Steve Hassid was honored in a ceremony for his service and his commitment to patient care. This recognition came just weeks after Dr. Hassid assisted in the transfer of a critically ill patient upon being called into the emergency department from home at 1:00 in the morning on New Year’s Eve. Congresswoman Jackie Speier presented Dr. Hassid with a certificate of recognition (on far right), followed by Supervisor Carole Groom who honored Dr. Hassid with a Board of Supervisors’ Commendation for his service (on right). The ceremony was attended by dozens of Health System staff as well as San Mateo County Manager John Maltbie.



Photos: Preston Merchant, Health System Communications

### Health System Promotes Health Equity for Black History Month

For Black History month, the Health System led efforts to raise awareness about health equity in the African American community, starting with a Black History Month Kick-Off: “Empowerment Begins With You”. The event focused on behavioral health issues that are prominent in the African American community due to various socioeconomic factors and challenges associated with seeking or accessing care. Next came a Health System co-sponsored event entitled “An Evening with HeLa,” which featured a panel presentation with relatives of the famous Henrietta Lacks, an African-American woman who in 1951 unknowingly had her cancer cells extracted and used to advance medical research. The event also featured a seminar with community members, health professionals, patient advocates and researchers to learn about clinical trials and their importance among populations of color. The seminar also included a presentation by the Family Health Services Medical Director, Dr. Anand Chabra. Finally, the Office of Diversity’s (ODE) Senior Community Health Planner, Briana Evans (on right), was featured on Peninsula TV’s *Pen Voice* series to talk about the decade-long effort behind the Health Equity Initiatives, with an emphasis on the African-American Community Initiative.



Briana Evans (left) prepares for her interview on PenTV’s *Pen Voice* series

Photo: Alex Eisenhart, Health System Communications

### Health System’s Partnership Supports County’s First Anti-Sugary Beverage Legislation

Daly City recently enacted the Kids’ Healthy Meals Ordinance, which passed after years of advocacy and support from the Health System’s Health Policy & Planning (HPP) office in partnership with the Youth Leadership Institute (YLI) and internal stakeholders. The new law aims to reduce consumption of sugary drinks among youth. YLI received funding support from HPP’s Get Healthy program. San Mateo Medical Center pediatricians Dr. Sharon DiPierro and Dr. Rachel Borovina also championed this important policy change through the Nutrition Education and Obesity Prevention team’s effort to connect healthcare providers to support early child nutrition and decrease the consumption of sugary beverages. This work has been especially critical in North County, which has a diabetes rate 13.9% higher than the County average. This ordinance is the first to be passed in San Mateo County, and the 7th such law to be passed by a city in California.



Photo courtesy: Public Health Advocates