BOARD OF DIRECTORS MEETING

Thursday, January 3, 2019
8:00 AM – 10:00 AM

SAN MATEO MEDICAL CENTER

EXECUTIVE BOARD ROOM

Second Floor, Administration Wing
BOARD OF DIRECTORS MEETING
January 3, 2019        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  Dr. Bryan Gescuk
   2. Quality Report  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. November 1, 2018 Meeting Minutes
G. MEDICAL STAFF REPORT
   Chief of Staff Update
   Dr. Bryan Gescuk

H. ADMINISTRATION REPORTS
   1. Reducing Patient Falls
      Dr. Alpa Sanghavi..............Verbal
   2. Budget Update
      Dr. CJ Kunnappilly..............Verbal
   3. Financial Report
      David McGrew...................TAB 2
   4. CEO Report
      Dr. CJ Kunnappilly..............TAB 2

I. HEALTH SYSTEM CHIEF REPORT
   Health System Snapshot
   Louise Rogers.............TAB 2

J. COUNTY MANAGER’S REPORT
   Mike Callagy

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@smcogov.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.
TAB 1

CONSENT

AGENDA
**HOSPITAL BOARD OF DIRECTORS**  
**MEETING MINUTES**  
**Thursday, November 1, 2018**  
**Executive Board Room**

<table>
<thead>
<tr>
<th>Board Members Present</th>
<th>Staff Present</th>
<th>Members of the Public</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supervisor David Canepa</td>
<td>Michelle Lee</td>
<td>DeAndre James</td>
</tr>
<tr>
<td>John Maltbie</td>
<td>David McGrew</td>
<td>Priscilla Romero</td>
</tr>
<tr>
<td>Louise Rogers</td>
<td>Dr. Susan Fernyak</td>
<td>Glynis Carreira</td>
</tr>
<tr>
<td>Dr. CJ Kunnappilly</td>
<td>Dr. Alpa Sanghavi</td>
<td>Martha Palacios</td>
</tr>
<tr>
<td>Dr. Bryan Gescuk</td>
<td>Joan Spicer</td>
<td></td>
</tr>
<tr>
<td>Dr. Julie Hersk</td>
<td>Peggy Jensen</td>
<td>Scott Diem</td>
</tr>
<tr>
<td>Dr. Janet Chaikind</td>
<td>Aimee Armsby</td>
<td>Annie Louie</td>
</tr>
<tr>
<td>Deborah Torres</td>
<td>Michael Callagy</td>
<td></td>
</tr>
</tbody>
</table>

**ITEM** | **DISCUSSION/RECOMMENDATION** | **ACTION** |
---|---|---|
Call to Order | Supervisor Canepa called the meeting to order at 8:00 AM, and the Board adjourned to Closed Session. | |
Reconvene to Open Session | The meeting was reconvened at 8:25 AM to Open Session. A quorum was present (see above). | Aimee Armsby reported that the Board unanimously approved the Credentialing Report as amended and the QIC Minutes and accepted the MEC Minutes. |
Public Comment | SEIU members made comments about their work history with the county. | |
Foundation Report | The Golf Tournament will take place on Monday, July 29, 2019 at Sharon Heights Golf and Country Club. Proceeds from the tournament will benefit the Rehabilitation Expansion. | FYI |
Consent Agenda | Approval of:  
1. Hospital Board Meeting Minutes from October 4, 2018.  
2. Compliance/Privacy Report | It was MOVED, SECONDED and CARRIED unanimously to approve all items on the Consent Agenda. |
| Medical Staff Report Dr. Bryan Gescuk | The Medical Staff Code of Conduct is currently being updated and will be completed in early 2019. CURES should be used for all opiates. Congratulations to Dr. Janet Chaikind who has been appointed as the new assistant medical director for ambulatory care. Today will be her last meeting as a hospital board member. We thank her for her years serving the hospital board! | FYI |
| Food and Nutrition Department Ron Senior | Services provided:  - Nutrition education and support for in-patient and out-patient  - Inpatient meal services  - Café 39 for staff and visitors, catered events  - Horizon Recovery Program  FY18 Revenue Report:  - Café 39 = $689,334  - Catering = $58,498  - Horizon = $22,379  Opportunities  - CBORD Implementation (Diet Software) in October 2018  - Construction – the main kitchen will close and move to its new location under the nursing wing in November 2019. | FYI |
| Independent Financial Audit Report MSO Certified Public Accountants | MSO is an independent accounting firm that has been conducting audits for the past several years. During the audit, MSO did not identify any deficiencies in internal control over financial reporting that they considered to be material weaknesses. And there are no current year recommendations. | FYI |
| Financial Report David McGrew, CFO | The September FY18/19 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. The next Board meeting will be held on January 3. Dr. Kunnappilly extended his appreciation to John Maltbie for his years of public service and congratulations on his retirement. | FYI |
| Health System Report Louise Rogers | In order to lesson to impact on the neighborhood, the Health System campus has implemented a parking plan to deal with reduced parking lot space. Shuttle service, public transport incentives, and stacked parking are some of the methods. | FYI |
Serenity House is open and the first admissions came through the PES, referrals from family members, and police direct referral.

<table>
<thead>
<tr>
<th>County Manager</th>
<th>John Maltbie</th>
<th>We have completed the process of setting up the capital related bonds and will begin selling them in about a week.</th>
<th>FYI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Supervisors</td>
<td>Supervisor Canepa</td>
<td>Supervisor Canepa recognized John Maltbie’s long time contribution to the county and promised to work with Mike Callagy and the Board of Supervisors to look at housing and other issues.</td>
<td>FYI</td>
</tr>
</tbody>
</table>

Supervisor Canepa adjourned the meeting at 9:16 AM. The next Board meeting will be held on January 3, 2019.

Minutes recorded by: Michelle Lee, Executive Secretary

Minutes approved by: Dr. Chester Kunnappilly, Chief Executive Officer
TAB 2

ADMINISTRATION REPORTS
Financial Highlights

November - Positive $77k:
- FTEs below budget
- New HPSM Medi-Cal per diem rate
- Patient Service Revenue
  Reduced claim denials, new HPSM per diem rate

- EPP pending CMS approval
- Reserves for PRIME/QIP, GPP
- Timing of expense payments

Forecast FY19: We’ve used $5.1m of the YTD budgeted $8.4m reserves. Identified risks to the full year budget at this time are the pending CMS approval for EPP, full achievement of the PRIME/QIP performance measures, increasing payroll costs, non-acute days and fee-for-service revenue denials.
The November collection rate was 31%. The revenue collection rate has improved recently due to lower claim denials and new HPSM inpatient per diem rate.
Key Performance Indicators

Cash - Rolling 12 Months

Target = $9.5 million per month to meet 30% collection rate
YTD = $9.0 million per month

% of A/R Over 180 Days - Rolling 12 Months

Increase due to the release of unbilled amounts in the lower aging brackets (see below)

A/R Days - Rolling 12 Months

Industry benchmark for how long it takes to collect receivables is 45 days

Total Unbilled Amount

Target = $5.8m
Key Performance Indicators

Insurance eligibility denials make up approximately 8% of all patient registrations and represents 25% of all claim denials. The new Experian eCareNEXT software will drive these denials lower.
# Revenue Improvement Plan

## Executive Summary

### Initiative Status

| Registration Accuracy | • Developed A3 Improvement Charter to focus on registration workflows  
| | • Implementing eCareNEXT - registration quality work queues and dashboard reporting tool- Kickoff 1/16/19 |
| Clinical Documentation Improvement (CDI) | • Project work started in June – 2 Phases  
| | • CDI program assessment – Exec briefing 1/3/19  
| | • Chartwise software – live 1/8/18  
| | • CDI staff begin mid January |
| Accounts Receivable management | • Implement automated account follow-up software to replace manually intensive and inefficient excel spreadsheet process. RFP completed and contract to BOS 1/8/19 |
| Denial management & Unbilled Accounts | • Medical necessity compliance reviews in progress.  
| | • Denials workflow & reporting software in production  
| | • Authorization improvement work – IP, SSU, Infusion |
| Increase Medi-Cal rates | • Medi-Cal cost report appeals in progress. FY14 settlement pending; yield approx. $2.3m annually  
| | • Medical-Surgical inpatient rates increased to $2,360/day. Projected to yield $3m annually. |
## San Mateo Medical Center
### Income Statement
#### November 30, 2018

<table>
<thead>
<tr>
<th>MONTH</th>
<th>Actual</th>
<th>Budget</th>
<th>Variance</th>
<th>Stoplight</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
</tr>
<tr>
<td>1 Income/Loss (GAAP)</td>
<td>77,987</td>
<td>0</td>
<td>77,987</td>
<td></td>
</tr>
<tr>
<td>2 HPSM Medi-Cal Members Assigned to SMMC</td>
<td>36,410</td>
<td>38,019</td>
<td>(1,609)</td>
<td>-4%</td>
</tr>
<tr>
<td>3 Unduplicated Patient Count</td>
<td>68,620</td>
<td>70,114</td>
<td>(1,494)</td>
<td>-2%</td>
</tr>
<tr>
<td>4 Patient Days</td>
<td>3,040</td>
<td>2,839</td>
<td>201</td>
<td>7%</td>
</tr>
<tr>
<td>5 ED Visits</td>
<td>3,527</td>
<td>3,541</td>
<td>(14)</td>
<td>0%</td>
</tr>
<tr>
<td>6 Surgery Cases</td>
<td>262</td>
<td>240</td>
<td>22</td>
<td>9%</td>
</tr>
<tr>
<td>7 Clinic Visits</td>
<td>18,191</td>
<td>19,008</td>
<td>(817)</td>
<td>-4%</td>
</tr>
<tr>
<td>8 Ancillary Procedures</td>
<td>66,830</td>
<td>62,931</td>
<td>3,899</td>
<td>6%</td>
</tr>
<tr>
<td>9 Acute Administrative Days as % of Patient Days</td>
<td>0.0%</td>
<td>16.0%</td>
<td>16.0%</td>
<td>100%</td>
</tr>
<tr>
<td>10 Psych Administrative Days as % of Patient Days</td>
<td>78.8%</td>
<td>80.0%</td>
<td>1.2%</td>
<td>2%</td>
</tr>
</tbody>
</table>

(Days that do not qualify for inpatient status)

### Pillar Goals

<table>
<thead>
<tr>
<th></th>
<th>Actual</th>
<th>Budget</th>
<th>Variance</th>
<th>Stoplight</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 Revenue PMPM</td>
<td>158</td>
<td>150</td>
<td>8</td>
<td>5%</td>
</tr>
<tr>
<td>13 Operating Expenses PMPM</td>
<td>409</td>
<td>399</td>
<td>(10)</td>
<td>-2%</td>
</tr>
<tr>
<td>14 Full Time Equivalents (FTE) including Registry</td>
<td>1,232</td>
<td>1,256</td>
<td>25</td>
<td>2%</td>
</tr>
</tbody>
</table>

(SAN MATEO COUNTY HEALTH)

(SAN MATEO MEDICAL CENTER)
# San Mateo Medical Center
## Income Statement
November 30, 2018

<table>
<thead>
<tr>
<th>MONTH</th>
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<tr>
<td></td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
</tr>
<tr>
<td>Inpatient Gross Revenue</td>
<td>9,776,834</td>
<td>9,577,810</td>
<td>199,024</td>
<td>2%</td>
</tr>
<tr>
<td>Outpatient Gross Revenue</td>
<td>24,779,376</td>
<td>25,324,704</td>
<td>(545,328)</td>
<td>-2%</td>
</tr>
<tr>
<td>Total Gross Revenue</td>
<td>34,556,210</td>
<td>34,902,514</td>
<td>(346,304)</td>
<td>-1%</td>
</tr>
<tr>
<td>Patient Net Revenue</td>
<td>10,832,414</td>
<td>10,512,930</td>
<td>319,484</td>
<td>3%</td>
</tr>
<tr>
<td>Net Patient Revenue as % of Gross Revenue</td>
<td>31.3%</td>
<td>30.1%</td>
<td>1.2%</td>
<td>4%</td>
</tr>
<tr>
<td>Capitation Revenue</td>
<td>(14,819)</td>
<td>500,000</td>
<td>(514,819)</td>
<td>-103%</td>
</tr>
<tr>
<td>Supplemental Patient Program Revenue</td>
<td>11,161,716</td>
<td>12,436,356</td>
<td>(1,274,640)</td>
<td>-10%</td>
</tr>
<tr>
<td>Total Patient Net and Program Revenue</td>
<td>21,979,312</td>
<td>23,449,286</td>
<td>(1,469,975)</td>
<td>-6%</td>
</tr>
<tr>
<td>Other Operating Revenue</td>
<td>907,059</td>
<td>1,229,820</td>
<td>(322,761)</td>
<td>-26%</td>
</tr>
<tr>
<td>Total Operating Revenue</td>
<td>22,886,371</td>
<td>24,679,106</td>
<td>(1,792,735)</td>
<td>-7%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>YEAR TO DATE</th>
<th>Actual</th>
<th>Budget</th>
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<th>Stoplight</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>E</td>
<td>F</td>
<td>G</td>
<td>H</td>
</tr>
<tr>
<td>Inpatient Gross Revenue</td>
<td>50,291,188</td>
<td>47,889,050</td>
<td>2,402,139</td>
<td>5%</td>
</tr>
<tr>
<td>Outpatient Gross Revenue</td>
<td>127,325,590</td>
<td>126,623,520</td>
<td>702,070</td>
<td>1%</td>
</tr>
<tr>
<td>Total Gross Revenue</td>
<td>177,616,778</td>
<td>174,512,569</td>
<td>3,104,209</td>
<td>2%</td>
</tr>
<tr>
<td>Patient Net Revenue</td>
<td>55,635,603</td>
<td>52,564,650</td>
<td>3,070,954</td>
<td>6%</td>
</tr>
<tr>
<td>Net Patient Revenue as % of Gross Revenue</td>
<td>31.3%</td>
<td>30.1%</td>
<td>1.2%</td>
<td>4%</td>
</tr>
<tr>
<td>Capitation Revenue</td>
<td>1,703,371</td>
<td>2,500,000</td>
<td>(796,629)</td>
<td>-32%</td>
</tr>
<tr>
<td>Supplemental Patient Program Revenue</td>
<td>55,645,234</td>
<td>62,181,782</td>
<td>(6,536,548)</td>
<td>-11%</td>
</tr>
<tr>
<td>Total Patient Net and Program Revenue</td>
<td>112,984,208</td>
<td>117,246,431</td>
<td>(4,262,223)</td>
<td>-4%</td>
</tr>
<tr>
<td>Other Operating Revenue</td>
<td>5,100,598</td>
<td>6,149,099</td>
<td>(1,048,501)</td>
<td>-17%</td>
</tr>
<tr>
<td>Total Operating Revenue</td>
<td>118,084,806</td>
<td>123,395,530</td>
<td>(5,310,725)</td>
<td>-4%</td>
</tr>
<tr>
<td></td>
<td>MONTH</td>
<td>YEAR TO DATE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------------</td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Actual</td>
<td>Budget</td>
<td>Variance</td>
<td>Stoplight</td>
</tr>
<tr>
<td><strong>Operating Expenses</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>31 Salaries &amp; Benefits</td>
<td>15,841,281</td>
<td>16,448,653</td>
<td>607,372</td>
<td>4%</td>
</tr>
<tr>
<td>32 Drugs</td>
<td>818,846</td>
<td>806,645</td>
<td>(12,201)</td>
<td>-2%</td>
</tr>
<tr>
<td>33 Supplies</td>
<td>901,071</td>
<td>954,099</td>
<td>53,027</td>
<td>6%</td>
</tr>
<tr>
<td>34 Contract Provider Services</td>
<td>3,557,212</td>
<td>3,346,496</td>
<td>(210,716)</td>
<td>-6%</td>
</tr>
<tr>
<td>35 Other fees and purchased services</td>
<td>4,773,740</td>
<td>4,572,074</td>
<td>(201,666)</td>
<td>-4%</td>
</tr>
<tr>
<td>36 Other general expenses</td>
<td>939,238</td>
<td>532,070</td>
<td>(407,168)</td>
<td>-77%</td>
</tr>
<tr>
<td>37 Rental Expense</td>
<td>187,681</td>
<td>196,247</td>
<td>8,566</td>
<td>4%</td>
</tr>
<tr>
<td>38 Lease Expense</td>
<td>825,358</td>
<td>825,358</td>
<td>-</td>
<td>0%</td>
</tr>
<tr>
<td>39 Depreciation</td>
<td>189,558</td>
<td>273,093</td>
<td>83,535</td>
<td>31%</td>
</tr>
<tr>
<td><strong>Total Operating Expenses</strong></td>
<td>28,033,984</td>
<td>27,954,735</td>
<td>(79,249)</td>
<td>0%</td>
</tr>
<tr>
<td><strong>Operating Income/Loss</strong></td>
<td>(5,147,614)</td>
<td>(3,275,629)</td>
<td>(1,871,985)</td>
<td>-57%</td>
</tr>
<tr>
<td><strong>Non-Operating Revenue/Expense</strong></td>
<td>382,132</td>
<td>(1,567,840)</td>
<td>1,949,972</td>
<td>124%</td>
</tr>
<tr>
<td><strong>Contribution from County General Fund</strong></td>
<td>4,843,468</td>
<td>4,843,468</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td><strong>Total Income/Loss (GAAP)</strong></td>
<td>77,987</td>
<td>0</td>
<td>77,987</td>
<td></td>
</tr>
</tbody>
</table>
Revenue & Expense Trend

- General Fund Revenue
- Other Revenue
- Supplemental Revenue
- Value Based Reimbursement
- Capitation Revenue
- Fee-For-Service Revenue
- Expenses
Acute census over budget. Inpatient psychiatric unit continues to have challenges with discharging hard-to-place patients with 78.8% not meeting medical necessity for inpatient status.
San Mateo Medical Center  
Clinic Visits  
November 30, 2018

### Monthly Budget Variance

<table>
<thead>
<tr>
<th>MONTH</th>
<th>Actual</th>
<th>Budget</th>
<th>Variance</th>
<th>Stoplight</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinic Visits</td>
<td>18,191</td>
<td>19,008</td>
<td>(817)</td>
<td>-4%</td>
</tr>
</tbody>
</table>

### Year-to-Date Budget Variance

<table>
<thead>
<tr>
<th>YEAR TO DATE</th>
<th>Actual</th>
<th>Budget</th>
<th>Variance</th>
<th>Stoplight</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinic Visits</td>
<td>97,637</td>
<td>104,043</td>
<td>(6,406)</td>
<td>-6%</td>
</tr>
</tbody>
</table>

**Clinic volume under budget.**
San Mateo Medical Center
Emergency Visits
November 30, 2018

<table>
<thead>
<tr>
<th>MONTH</th>
<th>Actual</th>
<th>Budget</th>
<th>Variance</th>
<th>Stoplight</th>
</tr>
</thead>
<tbody>
<tr>
<td>ED Visits</td>
<td>3,527</td>
<td>3,541</td>
<td>(14)</td>
<td>0%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>YEAR TO DATE</th>
<th>Actual</th>
<th>Budget</th>
<th>Variance</th>
<th>Stoplight</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>17,240</td>
<td>18,060</td>
<td>(820)</td>
<td>-5%</td>
</tr>
</tbody>
</table>

Emergency visits and PES remains on budget. PES length of stay continues to be higher than planned.
San Mateo Medical Center
Payer Mix
November 30, 2018

Payer Type by Gross Revenue

<table>
<thead>
<tr>
<th>Payer Type by Gross Revenue</th>
<th>Actual</th>
<th>Budget</th>
<th>Variance</th>
<th>Stoplight</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicare</td>
<td>25.3%</td>
<td>21.0%</td>
<td>4.3%</td>
<td></td>
</tr>
<tr>
<td>Medi-Cal</td>
<td>52.2%</td>
<td>58.0%</td>
<td>-5.8%</td>
<td></td>
</tr>
<tr>
<td>Self Pay</td>
<td>4.5%</td>
<td>2.0%</td>
<td>2.5%</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>4.3%</td>
<td>5.0%</td>
<td>-0.7%</td>
<td></td>
</tr>
<tr>
<td>ACE/ACE County</td>
<td>13.7%</td>
<td>14.0%</td>
<td>-0.3%</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>100.0%</td>
<td>100.0%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

MONTH

YEAR TO DATE

<table>
<thead>
<tr>
<th>Payer Type by Gross Revenue</th>
<th>Actual</th>
<th>Budget</th>
<th>Variance</th>
<th>Stoplight</th>
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<tr>
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<td>21.0%</td>
<td>2.3%</td>
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<tr>
<td>Medi-Cal</td>
<td>54.9%</td>
<td>58.0%</td>
<td>-3.1%</td>
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<td>Self Pay</td>
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<tr>
<td>Other</td>
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<td>ACE/ACE County</td>
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<td>0.4%</td>
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<tr>
<td>Total</td>
<td>100.0%</td>
<td>100.0%</td>
<td></td>
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</tbody>
</table>
Managed Care Membership Trend

- Medicare
- Medi-Cal
- Access to Care for Everyone

SAN MATEO COUNTY HEALTH
SAN MATEO MEDICAL CENTER
• **Managed Care** programs represent 29% 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.
• **Value-Based** programs represent 24% of our Supplemental Revenue
  ➢ New HPSM P4P and Shared Savings programs could boost it to 27%
• **Volume-Based** programs represent 76% of our Supplemental Revenue
EXCELLENT CARE METRICS

**Annualized Harm Events**: Measures avoidable patient harm events including central line infections, catheter associated urinary infections, hospital acquired pressure ulcers, surgical site infections, medication errors with harm, blood clots, falls with injury and others. The number is annualized (i.e. the number after 2 months is multiplied by 6, the number after 4 months is multiplied by 3, etc.) **Lower is better.**

**Patient Self-Assessment of Health**: All Primary Care patients receive an experience survey. One question asks them to rate their health from poor to excellent. This is the percentage that rate their health as very good or excellent. **Higher is better.**
PATIENT CENTERED CARE METRICS

Likelihood to Recommend Clinics: Percentage of patients who gave SMMC the highest score (9 or 10) on the patient experience survey question, “How likely are you to recommend this clinic to friends and family?” Higher is better.

Likelihood to Recommend Hospital: Percentage of patients who gave SMMC the highest score (9 or 10) on the patient experience survey question, “How likely are you to recommend this hospital to friends and family?” Higher is better.
Likelihood to Recommend Emergency Department: Percentage of patients who gave SMMC the highest score (9 or 10) on the patient experience survey question, “How likely are you to recommend this emergency department to friends and family?” Higher is better.

STAFF ENGAGEMENT METRICS

Likelihood to Recommend SMMC as a Great Place To Work

Likelihood to Recommend SMMC: Percentage of staff who agree or strongly agree that they would recommend SMMC as a great place to work. Measured using the annual Blessing White staff engagement survey. Higher is better.
RIGHT CARE, TIME AND PLACE METRICS

Psychiatric Inpatient Days – Not Medically Necessary: Percentage of acute inpatient psychiatry days where a patient may have been able to be discharged if there was a safe environment for them to go to. **Lower is better.**

![Psychiatric Inpatient Days - Not Medically Necessary](chart)

Potentially Avoidable ED Visits: Percentage of emergency department visits by established SMMC primary care patients where the discharge diagnosis is one that traditionally could have been treated in an outpatient setting rather than the emergency department. **Lower is better.**

![Avoidable Emergency Department Visits](chart)
FINANCIAL STEWARDSHIP METRICS

Revenue Per Member, Per Month: Total patient revenue divided by total number of assigned members. Higher is better.

Cost Per Member, Per Month: Total cost divided by total number of assigned members. Lower is better.
STRATEGIC UPDATES, RECOGNITIONS & AWARDS

Daly City Clinic Mobilizes to Feed the Needy – On November 18th, SMMC staff led by the Daly City Clinic prepared brown bag meals for the needy in our community. Staff were joined by family, friends, and County Supervisor David Canepa in the effort. Together they distributed over 450 bags. Thank you to everyone who participated, especially to Judy Manuel, who helped organize the annual effort. (Pictured above left: Staff, friends and family prepare bags for distribution; Above right: from L to R: Donna Nuno, Marlene Mitchell, Celia Gonzales, Eladia Castellanos, David Canepa, and Judy Manuel)

Dr. Janet Chaikind Recognized by Women in County Government– On December 6th, Dr. Janet Chaikind was one of the honorees at the Women in County Government 28th Annual Recognition and Charity Luncheon: Celebrating Women in HerStory. Dr. Chaikind was recognized as a Development Champion, a title that many that she has mentored over the years would attest to. Congratulations Dr. Chaikind!

SMMC Completes Triennial Joint Commission Survey: From December 19-21, five surveyors from the Joint Commission were onsite to conduct the organization’s triennial survey. They visited every part of the operation including several offsite clinics. The surveyors were highly complementary of the staff and the organization. There were several findings that the organization will need to respond to, and as is the case with 67% of all hospitals currently being surveyed, a smaller group of surveyors will need to return in 30-45 days to document our progress. The surveyors, however, went out of their way to compliment the enthusiasm of the staff and the quality of the programs. Congratulations to everyone on a successful survey.

SMMC Announces Excellence Awards Recipients: Every year, staff and providers nominate their peers for the SMMC Excellence Awards which recognize those who exemplify excellence in their profession. This year a total of 58 staff and medical providers were nominated. I would like to congratulate the following 2018 recipients and thank them for their outstanding dedication to our patients and community.
Change Champion
Yesenia Garcia, Fair Oaks Health Center

Leader Excellence
Michele Medrano, Infection Control
Dr. Daniele Levy, Integrated Behavioral Health

Nursing Excellence
Marlene Mitchell, Daly City Clinic

Patient-Centered Excellence
Erika Grimble, Fair Oaks Health Center

Provider Excellence
Dr. Sumita Kalra, Innovative Care Clinic
Dr. Esther Kim, Daly City Clinic

Service Excellence
Josefina Rubio, Administration
Chris Montenegro, Innovative Care Clinic

Team Player
Garrick Chew, Rehabilitative Services
Elena Ricevuto, Financial Planning and Analysis

HOG Toy Run: On December 8th, SMMC hosted the 29th Annual HOG Toy Run with the Golden Gate Harley Owners Group (HOGs). The event resulted in hundreds of gifts being distributed to children receiving care in our pediatrics clinics. Our thanks to the HOGs and all the staff and volunteers who made this a successful event. Special thanks to Glynis Carreira who once again organized the event.
2018 ACCOMPLISHMENTS

As we close out 2018, it is an opportunity to celebrate the many achievements seen in the organization over the course of the last year.

EXCELLENT CARE

- The SMMC Pain Clinic was recognized with a County STARS Award for outstanding program performance.
- In 2018, SMMC had a number of successful regulatory surveys including: the State Mammography Survey, the State Relicensing Survey, and clinic HPSM audits
- SMMC was highlighted in several publications this year:
  - SMMC was featured in a California HealthCare Foundation issue brief on the use of Lean principles in public hospitals
  - A manuscript regarding school readiness assessments written by Dr. Jaime Peterson of Fair Oaks Health Center was published in the International Journal of Environmental Research and Public Health
  - Christian Washburn, PSYD, and Melissa Fledderjohn, PSYD, of the Pain Management Clinic wrote an article about the relationship of childhood trauma and chronic pain, which was published in the PainWeek Journal
  - Joan Spicer, RN PhD, and Noris Larkin, BSN, had their article on developing a nursing practice framework to align with strategy published in The Journal of Nursing Administration (JONA)
- The Health Care for the Homeless Program was recognized by the Health Resources and Services Administration (HRSA) with a certificate of achievement for placing in the top 30 percent of all HRSA-funded-funded health center on quality metrics
- SMMC claimed over 99% of the funds available to it through the PRIME program. PRIME is the pay for performance portion of the current Medi-Cal waiver
- Led by the Integrated Behavioral Health Team, SMMC expanded depression screening in its outpatient clinics resulting in approximately 9,700 patients receiving screening
- Implemented CBORD diet software in Food and Nutrition Services. This implementation is expected to improve efficiency and patient satisfaction while reducing food waste and the risk for diet errors
- Through Pathway 3 of the Specialty Model Cell, the improvement team designed a model that would double capacity in the Endoscopy unit and reduce wait time for patients from the current 9 months to 6 days!
- A clinical nurse project improved adherence to Hepatitis C regimens from 33% to 100%
- Coumadin clinic rolled out a pictorial medication labeling system to better serve the approximately 70% of Coumadin patients who reported they couldn’t read the medication labels
- Real Time Problem Solving was applied to multiple staff and patient safety events resulting in a “Level 4” meaning that a root cause was identified, and countermeasures were put in place
• SMMC conducted a successful unified drill with the San Mateo Police Department around an Active Shooter scenario with the goal of improving campus safety
• The Keller Center assisted a multidisciplinary San Mateo County team in the creation of a policy for schools in San Mateo County to initiate appropriate care for children and investigative steps when allegations of child sexual abuse arise in the school setting.
• SSF is serving as the clinical site for a pilot program for patients who have experienced trauma. The program is the result of an $80,000 grant awarded to San Mateo County Health by the Center for Care and Innovations of the Tides Foundation in partnership with Genentech Charitable Giving.

PATIENT CENTERED CARE
• The SMMC Provider Communication Program was recognized with an Honorable Mention in the County STARS Awards
• The Health Transgender Health Care Program was recognized with an Honorable Mention in the County STARS Awards
• SMMC opened its new Infusion Center providing a much more welcoming and comforting environment to patients receiving care there
• SMMC had a successful 4th Annual Patient Experience Fair
• SMMC continued to partner with the Golden Gate Harley Owners Group (HOGs) for the annual School Supply Run in July and the annual Toy Run in December
• Daly City Youth Health Center reopened at its new, expanded and updated site
• SMMC staff members Phuong Hathaway and Sara Okabayashi-Williams joined Patient Improvement Partner, Jeri Hill in hosting a webinar on diversity and disparities entitled Solving Cross-Race Disparities in the Medical Setting
• Rehabilitative Services established satellite services at Coastside Clinic to better meet the needs of that community
• Integrated Behavioral Health revamped their group psychotherapy classes to include interventions for insomnia, diabetes, grief, ADHD, anxiety, mindfulness and depression
• Integrated Behavioral Health also launched a new wellness workgroup series for all adult patients with weekly classes on managing stress, depression, chronic pain and insomnia; as well as mindfulness and Tai Chi practice
• With support from the San Mateo County Health Foundation, Integrated Behavioral Health began to use Virtual Reality-based treatment for anxiety disorders
• A new community pharmacy was opened at Fair Oaks Health Center
• A clinical nurse improvement project focused on getting new mothers who bring their infants to the emergency room into family support classes. Because of this effort, attendance in the class rose from 35% to 48%.
• The New Patient Connection Center centralized and standardized the process for patients being discharged from the inpatient units to be referred to primary care
STAFF ENGAGEMENT

- **New Staff/New Roles** - This year SMMC had a number of new leaders join the organization and a number of staff members moved into new leadership roles:
  - Noris Larkin was named Assistant Chief Nursing Officer for Ambulatory Nursing
  - Julie Griffiths was named interim Deputy Director of Inpatient Services
  - Cynthia Grivas was named interim Nurse Manager for the Emergency Department
  - Violeta Evangelista was named Lead Nursing Supervisor
  - Eva Torres was named Nurse Manager for Psychiatric Emergency Services
  - Melissa Rombaoa was named manager for the Patient Centered Medical Home office
  - Ron Keating was named Director of Materials Management
  - Wilfredo Cerrato joined SMMC as the new manager for Coastside Clinic
  - Dr. Patrick Meehan joined SMMC as the new Supervising Physician for the Innovative Care Clinic
  - Dr. Yousef Turshani joined SMMC as the new Supervising Physician for Fair Oaks Pediatrics
  - Lalitha Sankaran joined SMMC as its first Manager of the Office of Diversity and Health Equity
  - Bradley Jacobson was named Population Health Analytics Manager
  - Marleni Moyer joined SMMC as the new Charge Nurse in Surgical Specialty Clinic
  - Emily Weaver was named Manager of Rehabilitative Services
  - Phuong Hathaway was named Staff Engagement Manager
  - Dr. Janet Chaikind was named Assistant Medical Director of Primary Care
  - Brenda Macedo was named Manager of Performance Based Delivery System Strategy
  - Jennifer Papa joined SMMC as the Manager of Population Health Finance Strategy

- Congressman Jackie Speier came to SMMC to recognize Dr. Steve Hassid
- Dr. Richard Ehling was recognized by the Stanford Department of Medicine with the *Chief Resident's Award for Outstanding Contribution to Resident Education*
- A number of staff from Finance and Compliance were recognized as Certified Revenue Cycle Representatives:
  - David McGrew
  - Ilhwan Park
  - Josefina Rubio
  - Geri Lara
  - Gabriela Behn
  - Portia Dixon
  - Stefani Stockstill
  - Valissa Mathewson
  - Maica Bailon
- Richard Marshall-Mariano became certified as a Registered Health Information Technician
- Bhupinder Kaur completed the “340 B University” providing the organization with critical expertise on this important drug discount program
- SMMC raised over $11,000 for the *American Heart Association Heart Walk*
- Yvonne Sylten-Specialty Clinics Manager and John Jurow-Manager of Radiology Services were recognized as County Wellness Leaders
- Successful Hospital Week and Nurses’ Day celebrations
- Over 200 staff participated in the Wellness Fair
• Over 40 staff members participated in an SMMC based blood drive
• Rolled out new Health and SMMC visual management program
• **362** nurses participated in the annual skills week
• Nursing continued to promote advanced education with 20 nurses in school and an additional 147 contemplating a return. Forty-eight nurses hold national certification in their specialty and an additional 80 are pursuing certification
• SMMC continued to partner with Project Search allowing five young adults with disabilities to learn new skills and gain work experience
• Multiple SMMC leaders graduated from the County’s Management Development Program:
  ✓ Brighton Ncube
  ✓ Valissa Mathewson
  ✓ Michele Medrano
  ✓ Lillian Lillies
  ✓ Priscilla Padilla-Romero
  ✓ Valerie Trudeau

**RIGHT CARE, TIME AND PLACE**

• Both Fair Oaks Health Center and the Ron Robinson Senior Care clinics were able to reduce their lists of patients awaiting services to zero
• The Team-Based Care Strategic Initiative held a Value Stream Mapping Event at Daly City Clinic. This is the first step in an improvement effort that will improve access and quality by allowing all staff to work at the top of their license
• Medical Specialty Clinic was able to expand by two rooms to improve access to specialty care
• A clinical nurse project implemented a standardized screening tool to identify patients who could benefit from palliative care consultation
• A clinical nurse project reduced the number of patients returning to the ED for medication refills by 30%
• SMMC partnered with Health to launch SMC Connected Care, our new Health Information Exchange

**FINANCIAL STEWARDSHIP**

• Outpatient facility diagnosis coding accuracy improved from 91.8% to 97.7%
• Outpatient facility procedure coding accuracy improved from 93.0% to 96.1%
• Reduced average days waiting for coding from 7.68 to 4.99 for outpatients and from 5.1 to 2.17 for inpatients
• SMMC has kicked off its Clinical Documentation Improvement efforts
• Patient Financial Services implemented a new denials management tool
• Time for provider enrollment into Medi-cal and Medicare was reduced from 6 months to 30 days
• Accounting celebrated its **fifth straight year** with a clean audit
• Materials Management worked with a consultant to complete a successful supply chain assessment
• The Clinical Quality & Value Analysis team rolled out a new fleet of wound vacs and IV pumps and executed a new contract that included $80,000 in savings while upgrading the organization’s orthopedic power tools and technology
• SMMC held its first annual Compliance Week Celebration
• Inventory Variance for distribution was reduced to 0.05% from an already low 0.19% in 2017
• SMMC enrolled in several Vizient standardization programs that resulted in an annual savings of $75,000
• The organization established the Business Process Management Office to support new projects and initiatives
• Patient Access exceeded the cash collection goal of $1.5 M for the second year in a row
• SMMC successfully implemented and managed the SSU Treatment Authorization unit, resulting in a 100% TAR completion rate and no denials.
SMC Connected Care, which launched earlier this year and includes health data for 300,000 patients and clients, recently joined a network of national and statewide health information systems. Through the California Trusted Exchange Network (CTEN), County Health providers and partners can now share medical, behavioral, and social information with other systems of care, including public and private health care providers. The expansion of our network improves data quality, promotes comprehensive understanding of patients’ backgrounds and needs, and allows more timely and targeted delivery of services.

**SNAPSHOT:**

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<th>INDICATOR</th>
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<th>CHANGE FROM PREVIOUS YEAR</th>
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<tr>
<td>ACE Enrollees</td>
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<td>(November 2018)</td>
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<td>SMMC Emergency Department Visits</td>
<td>3,482</td>
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<td>New Clients Awaiting Primary Care Appt.</td>
<td>213</td>
<td>-12.3%</td>
<td>-74.2%</td>
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<td>(December 2018)</td>
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**Health Information Exchange data links with regional and state networks**

SMC Connected Care, which launched earlier this year and includes health data for 300,000 patients and clients, recently joined a network of national and statewide health information systems. Through the California Trusted Exchange Network (CTEN), County Health providers and partners can now share medical, behavioral, and social information with other systems of care, including public and private health care providers. The expansion of our network improves data quality, promotes comprehensive understanding of patients’ backgrounds and needs, and allows more timely and targeted delivery of services.

**Congresswoman Jackie Speier visits mobile health facilities**

Congresswoman Jackie Speier recently visited three mobile health care facilities, which are implementing innovative approaches to service delivery in the county. She toured the Mobile Stroke Unit, a pilot program overseen by Emergency Medical Services and operated by Mills Peninsula Hospital, that provides an ambulance equipped with a CT scanner for immediate stroke diagnosis. Congresswoman Speier also spent time with staff at San Mateo Medical Center’s mobile Dental Clinic and the Mobile Clinic that supports Street and Field Medicine. As an advocate for health care at the national level, Congresswoman Speier requested the tour to observe firsthand the ways in which services are delivered to community members, like the homeless or under-insured, who face barriers to accessing health care.

**BHRS pioneers trauma-informed care for seriously mentally ill adults**

In July, twelve Behavioral Health and Recovery Services clinicians completed training in the use of the Neurosequential Model of Therapeutics (NMT), a developmentally-sensitive approach that considers physical and emotional trauma in treatment. For the past seven years, clinical staff have utilized these trauma-informed strategies with children. Now, with the training, BHRS staff will extend NMT to seriously mentally ill adults. Through this expanded capacity, BHRS will continue to offer a variety of trauma-informed trainings for staff and partners working with adult clients as well as children and youth. This expansion was noted in a pre-eminent national network publication aiming to inform the field about innovative approaches to address exposure to trauma.

**San Mateo County Health employees embrace commute alternatives**

With the loss of nearly 300 parking spaces on the SMC Health Campus due to demolition and construction activities, staff are taking advantage of alternative commuting options. While off-site parking with shuttle service is available at the nearby San Mateo County Event Center, the Office of Sustainability’s Commute Alternatives Program reports 51 new bicyclists, carpoolers, walkers, transit users, and Chariot riders. Since employee parking will be impacted throughout the life of the project, these efforts help mitigate the loss of parking spaces and contribute to a more sustainable San Mateo County.