



San Joaquin County Clinics (SJCC)

**Minutes of January 28, 2020
Board of Directors Meeting**

**San Joaquin General Hospital
Conference Room 1**

ATTENDEES: Rod Place (Chairman); Alicia Yonemoto (Vice-Chair); Luz Maria Sandoval (Treasurer); Mike Baskett (Board Member); Brian Heck (Board Member); Esgardo Medina (Board Member); Mary Mills (Board Member); Melanie Toutai (Board Member); David Culberson (SJGH CEO); Greg Diederich (HCS Director); Dr. Farhan Fadoo (SJCC Executive Director); Betty Jo Riendel (SJCC Nursing Dept Manager); Alice Soulligne (SJCC COO); Katie Poole (ACS OS); Adelé Gribble (ACS OTC)

EXCUSED: Ismael Cortez (Secretary); Alvin Maldonado (Board Member)

AGENDA ITEM	ATTACHMENTS	ACTION
<p>1. <u>Introduction & Establish Quorum (Rod Place, Board Chair)</u></p> <p>a. Call to Order & Establish Quorum Rod Place called the meeting to order at 5:05 p.m.</p> <p>b. SJCC Board of Director's Attendance Record (Jan 2019 thru Dec 2019) Board Members were accounted for by roll call and a quorum was established for today's meeting.</p> <p>c. Introductions Introductions were done later during the meeting for Mr. Kris Zuniga, interim SJCC CFO</p>	<p>SJCC Board of Directors Attendance Record 2019</p>	
<p>2. <u>Approval of Minutes of December 17, 2019 meeting (Rod Place, Board Chair)</u></p> <p>Mary Mills made a motion to approve the minutes from December 17, 2019. Luz Maria Sandoval seconded the motion and the board unanimously approved the minutes.</p>	<p>BOD Meeting Minutes – 12/17/19</p>	<p>Mary Mills motioned to approve minutes, Luz Maria Sandoval seconded & the board unanimously approved</p>
<p>3. <u>Public Comment (General Public)</u></p> <p>There was no public comment.</p>	<p>No Attachments</p>	<p>No Action Required</p>
<p>4. <u>Credentialing Report (Betty Jo Riendel)</u></p> <p>Betty Jo Riendel advised there are three initial appointments: Wilhemina Parson, LMFT (Licensed Marriage & Family Therapist); Melissa Santillana, CNM (Certified Nurse Midwife) and Robert Assibey, MD (Current 3rd Year Resident who will</p>	<p>Attachment 4 (Credentialing Report)</p>	<p>Motion to approve the credentialing report – Esgardo Medina, seconded by Mike</p>

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<p>be moonlighting in our Family Medicine Saturday Pediatric Clinic), one reappointment: Anh Le, MD in OB/GYN, no advancements and no resignations/retirements for this month. Esgardo Medina made a motion to approve the credentials and privileges as provided, Mike Baskett seconded the motion and the board unanimously approved the motion.</p>		<p>Baskett and unanimously approved by the board.</p>
<p>5. <u>EMMI Agreement Update (Rod Place)</u></p> <p>Rod Place advised the EMMI agreement went before the Board of Supervisors, was voted on and passed. The service is currently active and in place.</p>	<p>No Attachments</p>	<p>No action required</p>
<p>6. <u>700 Forms/Conflict of Interest (Rod Place)</u></p> <p>Rod Place advised it is that time of year for all Board Members to fill out the annual Conflict of Interest Forms and the California Form 700 and return to Adèle Gribble by the end of the meeting. A question arose as to what Form 700 is since some members were not familiar with this form. Staff will research and get back to everyone during the next month with clarification.</p>	<p>Attachments 6 (California Form 700 and Conflict of Interest Forms)</p>	<p>All attending board members turned in the Conflict of Interest Forms. Adèle Gribble will research California Form 700</p>
<p>7. <u>Authority to Submit UDS Report (Rod Place)</u></p> <p>Dr. Fadoo advised the UDS report will be submitted by the February 15th submission date which would predate our next meeting of this Board. We need pro-active approval from the Board to go ahead and submit the report on behalf of the clinic. He advised they will bring the report back to the board. The final reports are usually not completed until very close to the date of submission which makes it difficult to have it ready for the January meeting.</p> <p>Kris Zuniga explained the UDS is a reporting requirement that all FQHC clinics do. It is like a report card that we report to HRSA about ourselves: speaking about the patient utilization; demographics of patient; how many we have seen; what we have paid; the make-up of our labor force etc. Kris is working with the team in place to file the UDS report. He advised there are some financial implications of this self-reporting, particularly on the quality side. For the most part, there are no other implications until we become a full FQHC (not a look-alike), it is more of a required reporting.</p> <p>Melanie Toutai asked what the reporting period is. Kris responded it is a calendar year, January through December.</p> <p>Mary Mills made a motion to submit the report, Melanie Toutai seconded the motion and the board unanimously approved the motion.</p>	<p>No Attachment</p>	<p>Mary Mills motioned to submit the report, Melanie Toutai seconded & the board unanimously approved</p>
<p>8. <u>Finance Committee Report (Kris Zuniga)</u></p> <p>Rod Place introduced Kris Zuniga to the board. Kris works for Wipfli and is serving as Interim Chief Financial Officer of the Clinics. He has been in health care accounting over fifteen years, seven of which was in a for-profit hospital setting. He was a financial analyst and was promoted to Controller of the Hospital. The other six years were spent in the FQHC world. He has spent time in FQHCs as large as 3,600 employees and \$600,000 in net collectible revenues all the way down to \$200,000 in revenues and twenty employees. Kris' experience also includes various degrees of financial stability.</p>	<p>Attachment 8 (Finance Committee Agenda and Minutes with attachments)</p>	<p>No action required</p>

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<p>Kris advised he is here to help us fix the financial situation. He stated there is a critical role on the finance structure on the org chart and there is a hole there, someone with the financial expertise to evaluate our operation, make changes and make sure financially we are on the right track, he is that person. Kris advised one of the fundamental issues that we all need to understand is that the way we are paid has not been finalized yet. We are in a multi-year process negotiation with the State of California and that is going to take time. We have the unique position of managing an organization under uncertain reimbursement terms and making the best decisions under that until those rates are finalized.</p> <p>Kris stated the financials have not been great, but they are working in a partnership relationship with the hospital to improve these numbers. Below is the income statement as presented to the Finance Committee.</p> <p style="text-align: center;">San Joaquin County Clinics Income Statement As of November 30, 2019</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2"></th> <th colspan="5"></th> <th colspan="4" style="text-align: center;">Year to Date</th> </tr> <tr> <th>Jul</th> <th>Aug</th> <th>Sep</th> <th>Oct</th> <th>Nov</th> <th>YTD Actual</th> <th>YTD Budget</th> <th>Variance</th> <th>% Var</th> </tr> </thead> <tbody> <tr> <td>Total Visits</td> <td>9,995</td> <td>11,085</td> <td>10,018</td> <td>11,580</td> <td>9,453</td> <td>52,131</td> <td>44,072</td> <td>8,059</td> <td>18.3%</td> </tr> <tr> <td>Billable Visits</td> <td>9,436</td> <td>10,386</td> <td>9,516</td> <td>10,788</td> <td>8,938</td> <td>49,064</td> <td>41,479</td> <td>7,585</td> <td>18.3%</td> </tr> <tr> <td>Medicare</td> <td>236,056</td> <td>297,379</td> <td>380,364</td> <td>292,588</td> <td>318,258</td> <td>1,524,645</td> <td>761,569</td> <td>763,076</td> <td>100.2%</td> </tr> <tr> <td>Medi-Cal Fee-for-Service</td> <td>205,608</td> <td>219,088</td> <td>282,602</td> <td>390,358</td> <td>226,521</td> <td>1,324,177</td> <td>1,161,380</td> <td>162,797</td> <td>14.0%</td> </tr> <tr> <td>Medi-Cal Managed Care</td> <td>933,051</td> <td>2,219,472</td> <td>2,303,051</td> <td>2,250,224</td> <td>1,792,024</td> <td>9,497,823</td> <td>7,372,510</td> <td>2,125,312</td> <td>28.8%</td> </tr> <tr> <td>Insurance</td> <td>13,134</td> <td>22,250</td> <td>25,360</td> <td>26,099</td> <td>25,649</td> <td>112,492</td> <td>153,279</td> <td>(40,787)</td> <td>-26.6%</td> </tr> <tr> <td>Self Pay</td> <td>68,636</td> <td>68,201</td> <td>96,780</td> <td>94,384</td> <td>68,490</td> <td>396,491</td> <td>269,571</td> <td>126,920</td> <td>47.1%</td> </tr> <tr> <td>Indigent</td> <td>106</td> <td>(16)</td> <td>63</td> <td>154</td> <td>193</td> <td>500</td> <td>1,355</td> <td>(855)</td> <td>-63.1%</td> </tr> <tr> <td>Gross Patient Revenue</td> <td>1,456,592</td> <td>2,826,374</td> <td>3,088,220</td> <td>3,053,807</td> <td>2,431,136</td> <td>12,856,129</td> <td>9,719,665</td> <td>3,136,464</td> <td>32.3%</td> </tr> <tr> <td>Contractual Adjustments</td> <td>(498,718)</td> <td>(1,494,730)</td> <td>(2,292,625)</td> <td>(2,022,995)</td> <td>(1,696,396)</td> <td>(8,005,464)</td> <td>(4,534,101)</td> <td>(3,471,363)</td> <td>-76.6%</td> </tr> <tr> <td>Other Allowances</td> <td>(120,492)</td> <td>(38,627)</td> <td>(1,258)</td> <td>(612)</td> <td>901</td> <td>(160,088)</td> <td>(5,279)</td> <td>(154,809)</td> <td>-2932.5%</td> </tr> <tr> <td>Net Patient Revenue</td> <td>837,382</td> <td>1,293,017</td> <td>794,337</td> <td>1,030,200</td> <td>735,641</td> <td>4,690,576</td> <td>5,180,285</td> <td>(489,709)</td> <td>-9.5%</td> </tr> <tr> <td>Capitation Revenue</td> <td>446,785</td> <td>451,203</td> <td>438,369</td> <td>455,595</td> <td>443,730</td> <td>2,235,683</td> <td>2,694,832</td> <td>(459,149)</td> <td>-17.0%</td> </tr> <tr> <td></td> <td>1,284,167</td> <td>1,744,220</td> <td>1,232,706</td> <td>1,485,795</td> <td>1,179,371</td> <td>6,926,259</td> <td>7,875,117</td> <td>(948,858)</td> <td>-12.0%</td> </tr> <tr> <td>Other Revenue</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>100.0%</td> </tr> <tr> <td>Total Net Revenue</td> <td>1,284,167</td> <td>1,744,220</td> <td>1,232,706</td> <td>1,485,795</td> <td>1,179,371</td> <td>6,926,259</td> <td>7,875,117</td> <td>(948,858)</td> <td>-12.0%</td> </tr> <tr> <td>Operating Expense</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Salaries</td> <td>909,780</td> <td>1,042,139</td> <td>917,997</td> <td>1,103,634</td> <td>849,551</td> <td>4,823,101</td> <td>4,269,658</td> <td>(553,442)</td> <td>-13.0%</td> </tr> <tr> <td>Benefits</td> <td>455,187</td> <td>447,909</td> <td>438,518</td> <td>436,607</td> <td>449,805</td> <td>2,228,026</td> <td>2,280,620</td> <td>52,594</td> <td>2.3%</td> </tr> <tr> <td>Total Salaries & Benefits</td> <td>1,364,967</td> <td>1,490,048</td> <td>1,356,515</td> <td>1,540,241</td> <td>1,299,356</td> <td>7,051,127</td> <td>6,550,278</td> <td>(500,849)</td> <td>-7.6%</td> </tr> <tr> <td>Professional Fees/Registry</td> <td>69,022</td> <td>185,386</td> <td>62,720</td> <td>108,129</td> <td>66,503</td> <td>491,760</td> <td>315,585</td> <td>(176,175)</td> <td>-55.8%</td> </tr> <tr> <td>Supplies</td> <td>69,094</td> <td>128,143</td> <td>77,216</td> <td>125,775</td> <td>68,804</td> <td>469,032</td> <td>429,452</td> <td>(39,580)</td> <td>-9.2%</td> </tr> <tr> <td>Purchased Services</td> <td>39,160</td> <td>56,359</td> <td>42,011</td> <td>92,288</td> <td>41,656</td> <td>271,475</td> <td>512,860</td> <td>241,385</td> <td>47.1%</td> </tr> <tr> <td>Depreciation</td> <td>22,696</td> <td>22,687</td> <td>22,686</td> <td>22,427</td> <td>22,426</td> <td>112,921</td> <td>50,964</td> <td>(61,957)</td> <td>-121.6%</td> </tr> <tr> <td>Other Expense</td> <td>33,477</td> <td>45,971</td> <td>35,515</td> <td>29,393</td> <td>40,215</td> <td>184,571</td> <td>146,558</td> <td>(38,012)</td> <td>-25.9%</td> </tr> <tr> <td>Total Direct Expense</td> <td>1,598,416</td> <td>1,928,594</td> <td>1,596,664</td> <td>1,918,253</td> <td>1,538,962</td> <td>8,580,887</td> <td>8,005,698</td> <td>(575,189)</td> <td>-7.2%</td> </tr> <tr> <td>Net Income (Loss)</td> <td>(314,249)</td> <td>(184,374)</td> <td>(363,958)</td> <td>(432,458)</td> <td>(359,591)</td> <td>(1,654,628)</td> <td>(130,581)</td> <td>(1,524,047)</td> <td>1167.1%</td> </tr> <tr> <td>Overhead Allocation</td> <td>674,532</td> <td>813,867</td> <td>673,792</td> <td>809,502</td> <td>649,442</td> <td>3,621,134</td> <td>3,378,404</td> <td>(242,730)</td> <td>-7.2%</td> </tr> <tr> <td>Net Income (Loss) w/ OH Allocation</td> <td>(988,781)</td> <td>(998,240)</td> <td>(1,037,750)</td> <td>(1,241,960)</td> <td>(1,009,033)</td> <td>(5,275,763)</td> 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Adjustments	(498,718)	(1,494,730)	(2,292,625)	(2,022,995)	(1,696,396)	(8,005,464)	(4,534,101)	(3,471,363)	-76.6%	Other Allowances	(120,492)	(38,627)	(1,258)	(612)	901	(160,088)	(5,279)	(154,809)	-2932.5%	Net Patient Revenue	837,382	1,293,017	794,337	1,030,200	735,641	4,690,576	5,180,285	(489,709)	-9.5%	Capitation Revenue	446,785	451,203	438,369	455,595	443,730	2,235,683	2,694,832	(459,149)	-17.0%		1,284,167	1,744,220	1,232,706	1,485,795	1,179,371	6,926,259	7,875,117	(948,858)	-12.0%	Other Revenue	0	0	0	0	0	0	0	0	100.0%	Total Net Revenue	1,284,167	1,744,220	1,232,706	1,485,795	1,179,371	6,926,259	7,875,117	(948,858)	-12.0%	Operating Expense										Salaries	909,780	1,042,139	917,997	1,103,634	849,551	4,823,101	4,269,658	(553,442)	-13.0%	Benefits	455,187	447,909	438,518	436,607	449,805	2,228,026	2,280,620	52,594	2.3%	Total Salaries & Benefits	1,364,967	1,490,048	1,356,515	1,540,241	1,299,356	7,051,127	6,550,278	(500,849)	-7.6%	Professional Fees/Registry	69,022	185,386	62,720	108,129	66,503	491,760	315,585	(176,175)	-55.8%	Supplies	69,094	128,143	77,216	125,775	68,804	469,032	429,452	(39,580)	-9.2%	Purchased Services	39,160	56,359	42,011	92,288	41,656	271,475	512,860	241,385	47.1%	Depreciation	22,696	22,687	22,686	22,427	22,426	112,921	50,964	(61,957)	-121.6%	Other Expense	33,477	45,971	35,515	29,393	40,215	184,571	146,558	(38,012)	-25.9%	Total Direct Expense	1,598,416	1,928,594	1,596,664	1,918,253	1,538,962	8,580,887	8,005,698	(575,189)	-7.2%	Net Income (Loss)	(314,249)	(184,374)	(363,958)	(432,458)	(359,591)	(1,654,628)	(130,581)	(1,524,047)	1167.1%	Overhead Allocation	674,532	813,867	673,792	809,502	649,442	3,621,134	3,378,404	(242,730)	-7.2%	Net Income (Loss) w/ OH Allocation	(988,781)	(998,240)	(1,037,750)	(1,241,960)	(1,009,033)	(5,275,763)	(3,508,985)	(1,766,778)	50.4%		
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Salaries	909,780	1,042,139	917,997	1,103,634	849,551	4,823,101	4,269,658	(553,442)	-13.0%																																																																																																																																																																																																																																																																																																														
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Total Salaries & Benefits	1,364,967	1,490,048	1,356,515	1,540,241	1,299,356	7,051,127	6,550,278	(500,849)	-7.6%																																																																																																																																																																																																																																																																																																														
Professional Fees/Registry	69,022	185,386	62,720	108,129	66,503	491,760	315,585	(176,175)	-55.8%																																																																																																																																																																																																																																																																																																														
Supplies	69,094	128,143	77,216	125,775	68,804	469,032	429,452	(39,580)	-9.2%																																																																																																																																																																																																																																																																																																														
Purchased Services	39,160	56,359	42,011	92,288	41,656	271,475	512,860	241,385	47.1%																																																																																																																																																																																																																																																																																																														
Depreciation	22,696	22,687	22,686	22,427	22,426	112,921	50,964	(61,957)	-121.6%																																																																																																																																																																																																																																																																																																														
Other Expense	33,477	45,971	35,515	29,393	40,215	184,571	146,558	(38,012)	-25.9%																																																																																																																																																																																																																																																																																																														
Total Direct Expense	1,598,416	1,928,594	1,596,664	1,918,253	1,538,962	8,580,887	8,005,698	(575,189)	-7.2%																																																																																																																																																																																																																																																																																																														
Net Income (Loss)	(314,249)	(184,374)	(363,958)	(432,458)	(359,591)	(1,654,628)	(130,581)	(1,524,047)	1167.1%																																																																																																																																																																																																																																																																																																														
Overhead Allocation	674,532	813,867	673,792	809,502	649,442	3,621,134	3,378,404	(242,730)	-7.2%																																																																																																																																																																																																																																																																																																														
Net Income (Loss) w/ OH Allocation	(988,781)	(998,240)	(1,037,750)	(1,241,960)	(1,009,033)	(5,275,763)	(3,508,985)	(1,766,778)	50.4%																																																																																																																																																																																																																																																																																																														

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<p>Kris explained it is important that everyone understands the financial condition of the organization (what drives revenue, expenses) so we can evaluate the operational results. He advised he has not done any altering of the presentation the board has been accustomed to receiving. The board will probably see some changes going forward.</p>																																																																																																																		
<p>For the month of November, we had billable visits of approximately 90,000. When we examine financial results, it is important to look at individual statistics for the individual month but what is also important is to look at the trend from previous months.</p>																																																																																																																		
<p>Kris went over the Net Patient Revenue above and stated the trends of visits are in line with expectations. On the expense side, the largest part of any P&L statement would be the labor associated expenses (employees plus contracted staff). We have roughly 1.3 million dollars in total salaries and benefits. How we best control those expenses is a direct determining on the profitability of these operations. Most FQHCs operate at about 65%-70% labor associated expenses, so we want to see where we are based on that statistic. We have seen a net loss consistently over the months and Kris' goal is to turn this around while he is here.</p>																																																																																																																		
<p>Below are the three points in the Financial Narrative which have a part of the package for several months. These could be considered as disclaimers to our financial statements. Until we figure these out, they have huge impact on the financials and the results will not be very robust.</p>																																																																																																																		
<p><u>Additional Factors Impacting Clinic Performance Presentation</u></p> <ul style="list-style-type: none"> Hospital overhead remains at 42.2% pending a detailed review by CFO and FQHC Finance Director to identify a more appropriate overhead allocation for the clinics. Supplemental funding derived by the hospital (PRIME, DSH/GPP, QIP) as a result of work done by the FQHC clinics is not included in this reporting at this time. Currently, revenue from the clinics is not reflective of the actual visits in any given month. The Hospital Finance department is working with clinic staff to reconcile reports to actual visits checked out from each clinic. This will assist with developing the accrual methodology for revenues. 																																																																																																																		

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<p>Two of the above are revenue and one is expense. The expense item has to do with the overhead allocation applied on this income statement. Hospital and FQHC accounting need to formulate a better way of calculating this. It is about 42% of our expenses so they need to test the validity and come up with the most appropriate methodology. Supplemental funding – how much should be on the income statement for the FQHC. Kris stated we are in partnership with San Joaquin General Hospital to determine where things belong. The third bullet point speaks to the methodology for booking patient revenues in general.</p> <p>The aging schedule included in the financial packet needs to be revised and until it is, he will provide to the board. Rod Place stated he recognizes there are much to be done and looks forward to the updated report next month.</p>																																																																				
<p>8a. 2020 Sliding Fee Scale (Kris Zuniga)</p> <p>Rod Place advised the Sliding Fee Scale is not on our agenda but needs approval from the board. Kris Zuniga advised the schedule below is a discount program unique to our business that we have for our patients. We are not permitted to turn anyone away based on their ability to pay.</p> <p>As an FQHC, we need to examine this annually, make sure they are updated (poverty levels) and examine the nominal fees that we are charging our patients. We never want our nominal fees to be a barrier to care. As long as this is updated annually, we have met our requirements.</p> <div data-bbox="415 894 1192 1484" style="border: 1px solid black; padding: 10px; margin: 10px auto; width: fit-content;"> <p style="text-align: center;">Sliding Fee Scale for San Joaquin County Clinics</p> <p style="text-align: center;">2020 Federal Poverty Level Based on Monthly Income by Family Size</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="background-color: #92d050;">Office Visit</th> <th style="background-color: #92d050;">\$30 Nominal Fee</th> <th style="background-color: #92d050;">\$40 Minimum Fee</th> <th style="background-color: #92d050;">\$50 Minimum Fee</th> <th style="background-color: #92d050;">\$60 Minimum Fee</th> <th style="background-color: #92d050;">\$185 FULL FEE</th> </tr> <tr> <th style="background-color: #ffff00;">Family Size</th> <th style="background-color: #ffff00;">0-100%</th> <th style="background-color: #ffff00;">101 - 133%</th> <th style="background-color: #ffff00;">134 - 150%</th> <th style="background-color: #ffff00;">151 - 200%</th> <th style="background-color: #ffff00;">Over 200%</th> </tr> </thead> <tbody> <tr><td>1</td><td>\$1,063.33</td><td>\$1,414.23</td><td>\$1,595.00</td><td>\$2,126.66</td><td>\$2,126.67 and over</td></tr> <tr><td>2</td><td>\$1,436.67</td><td>\$1,910.77</td><td>\$2,155.01</td><td>\$2,873.34</td><td>\$2,873.35 and over</td></tr> <tr><td>3</td><td>\$1,810.00</td><td>\$2,407.30</td><td>\$2,715.00</td><td>\$3,620.00</td><td>\$2,620.01 and over</td></tr> <tr><td>4</td><td>\$2,183.33</td><td>\$2,903.83</td><td>\$3,275.00</td><td>\$4,366.66</td><td>\$4,366.67 and over</td></tr> <tr><td>5</td><td>\$2,556.67</td><td>\$3,400.37</td><td>\$3,835.01</td><td>\$5,113.34</td><td>\$5,113.35 and over</td></tr> <tr><td>6</td><td>\$2,930.00</td><td>\$3,896.90</td><td>\$4,395.00</td><td>\$5,860.00</td><td>\$5,860.01 and over</td></tr> <tr><td>7</td><td>\$3,303.33</td><td>\$4,393.43</td><td>\$4,955.00</td><td>\$6,606.66</td><td>\$6,606.67 and over</td></tr> <tr><td>8</td><td>\$3,676.67</td><td>\$4,889.97</td><td>\$5,515.01</td><td>\$7,353.34</td><td>\$7,353.35 and over</td></tr> <tr><td>Each additional person +8</td><td>\$373.33</td><td>\$496.53</td><td>\$560.00</td><td>\$746.66</td><td>\$746.66</td></tr> </tbody> </table> <div style="background-color: #92d050; padding: 5px; text-align: center; margin: 5px auto; width: fit-content;"> FULL FEE \$185 per visit </div> <div style="background-color: #ffff00; padding: 5px; text-align: center; margin: 5px auto; width: fit-content;"> All above Services- Income Above 200% of Federal Poverty Guidelines or No Proof of Income </div> <p style="font-size: small; margin-top: 10px;">Source: https://www.federalregister.gov/documents/2020/01/17/2020-00858/annual-update-of-the-hhs-poverty-guidelines</p> </div>	Office Visit	\$30 Nominal Fee	\$40 Minimum Fee	\$50 Minimum Fee	\$60 Minimum Fee	\$185 FULL FEE	Family Size	0-100%	101 - 133%	134 - 150%	151 - 200%	Over 200%	1	\$1,063.33	\$1,414.23	\$1,595.00	\$2,126.66	\$2,126.67 and over	2	\$1,436.67	\$1,910.77	\$2,155.01	\$2,873.34	\$2,873.35 and over	3	\$1,810.00	\$2,407.30	\$2,715.00	\$3,620.00	\$2,620.01 and over	4	\$2,183.33	\$2,903.83	\$3,275.00	\$4,366.66	\$4,366.67 and over	5	\$2,556.67	\$3,400.37	\$3,835.01	\$5,113.34	\$5,113.35 and over	6	\$2,930.00	\$3,896.90	\$4,395.00	\$5,860.00	\$5,860.01 and over	7	\$3,303.33	\$4,393.43	\$4,955.00	\$6,606.66	\$6,606.67 and over	8	\$3,676.67	\$4,889.97	\$5,515.01	\$7,353.34	\$7,353.35 and over	Each additional person +8	\$373.33	\$496.53	\$560.00	\$746.66	\$746.66	<p>Sliding Fee Scale</p>	<p>Brian Heck motioned to accept the 2020 Sliding Fee Scale for SJCC, Mary Mills seconded the motion and the board unanimously approved</p>
Office Visit	\$30 Nominal Fee	\$40 Minimum Fee	\$50 Minimum Fee	\$60 Minimum Fee	\$185 FULL FEE																																																															
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<p>Melanie Toutai asked if the rates changed from last year. Dr. Fadoo advised there have been no changes since last year. The Sliding Fee Scale is on our perpetual calendar for April but since the guidance just came out today from HRSA (it went into effect on January 15th) we wanted to make sure we operationalize this immediately.</p> <p>Brian Heck made a motion to approve 2020 Federal Poverty Level discount rate as listed above, Mary Mills seconded the motion and the board unanimously approved.</p>		
<p>9. <u>Quality Committee Report (Alicia Yonemoto)</u></p> <p>Dr. Fadoo stated this report was from the meeting held in November. At that meeting we shared with the Quality Subcommittee the clinical performance indicators, the grievances and complaints etc. Adelé Gribble will forward the materials from that meeting to the rest of the FQHC Board for their information.</p>	No Attachments	Quality Subcommittee material to be forwarded to board for their records.
<p>10. <u>CEO Report (Dr. Farhan Fadoo)</u></p> <p>Dr. Fadoo presented and elaborated on the CEO Report below.</p> <p style="text-align: center;">CEO Report – Previous 30 Days</p> <ul style="list-style-type: none"> • Interim SJCC CFO, Kris Zuniga, began 1/7; perm recruitment underway • Multithreaded set of activities with Wipfli and DHCS related to PPS rates • RCM outsource to EMMI live as of 1/1 • Changes to SJCC Bylaws and Co-Applicant agreement being proposed by HRSA consultants (Fiscal Solutions) and reviewed at inaugural Governance Committee • Cerner HealtheEDW/HealtheAnalytics go-live planned for week of 2/10 • Grants activities: submitted DHCS Behavioral Health Integration (prop 56 funds) application to HPSJ on 1/21 – funding awards TBA in March • CalAIM renamed to Medi-Cal Healthier CA for All; kickoff meeting convened by HPSJ on 1/13 (significant work ahead on implementation of ECM/PHM/ILOS) • Financial modeling for altered SJCC footprint to be reviewed with CAO on 1/30; involves potential consolidation of services • FY20/21 budget prep underway • UDS datasets being finalized and validated; submission due 2/15 • PRIME DY15-MY and GPP PY4 submission due 3/31 • QIP 3.0 (PY4 = CY21) planning; directed payments from MCPs <div style="text-align: right;">  </div> <p>ECM = Enhanced Case Management PHM = Population Health Management ILOS = In Lieu Of Services GPP = Global Payment Program QIP = Quality Incentive Program</p>	No Attachments	No action required

AGENDA ITEM	ATTACHMENTS	ACTION
<p>The table below explains what QIP is and what it will become going forward as PRIME ends.</p> <h2 style="color: #0056b3;">QIP Evolution</h2> <p>The diagram illustrates the QIP evolution timeline from 2018 to 2025. It shows the transition from PRIME and QIP 1.0 to QIP 2.0, and then to QIP 3.0. Key milestones include PRIME DY14 and DY15, QIP PY2, PY3, PY3.5, and PY4. Reports are listed for each year: DY14YE, DY15MY, and DY15YE for 2019-2020; PY3.5 for 2021; and PY4 through PY8 for 2022-2025. The SNIC logo (California Health Care Safety Net Institute) is present in the bottom left corner of the diagram.</p>		
<p>11. ADJOURNMENT</p> <p>There being no further topics of discussion, Rod Place adjourned the meeting at 5:53 p.m.</p>		<p>No Action Required</p>

Signed by:

RESPECTFULLY SUBMITTED ON BEHALF OF SJCC BOARD BY:
 ADELÉ R. GRIBBLE, OFFICE TECHNICIAN COORDINATOR
 ACS ADMINISTRATION, SAN JOAQUIN COUNTY CLINICS

Date