



San Mateo Medical Center
A County System of Healthcare

BOARD OF DIRECTORS MEETING

Thursday, September 6, 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

September 6, 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. 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. August 2, 2018 Meeting Minutes

G. MEDICAL STAFF REPORT

Chief of Staff Update

Dr. Bryan Gescuk

H. ADMINISTRATION REPORTS

- 1. Pharmacy Department
- 2. Serenity House Update
- 3. Financial Report
- 4. CEO Report

Dr. Alpa Sanghavi 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

Meetings are accessible to people with disabilities. Individuals who need special assistance or a disability-related modification or accommodation (including auxiliary aids or services) to participate in this meeting, or who have a disability and wish to request an alternative format for the agenda, meeting notice, agenda packet or other writings that may be distributed at the meeting, should contact Michelle Lee, Executive Secretary, at least 48 hours before the meeting at (650) 573-2222 and/or mlee@smcgov.org. Notification in advance of the meeting will enable the County to make reasonable arrangements to ensure accessibility to this meeting and the materials related to it. Attendees to this meeting are reminded that other attendees may be sensitive to various chemical based products.



San Mateo Medical Center
A County System of Healthcare

TAB 1

CONSENT AGENDA

HOSPITAL BOARD OF DIRECTORS
MEETING MINUTES
Thursday, August 2, 2018
Executive Board Room

Board Members Present

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

Staff Present

Michelle Lee
David McGrew
Dr. Susan Fernyak
Dr. Alpa Sanghavi
DeAndre James
Joan Spicer
Brighton Ncube
Peggy Jensen

Priscilla Romero
Gabriela Behn
John Nibbelin
Julie Griffith
Cecilia Diaz
Angela Gonzalez
Karen Pugh

Dr. Alex Ding
Paul Rogerville
Leslie Williams-Hurt
Michele Medrano
Evelyn Anorico
Dr. Grace Hassid
Patrick Grisham
Ava Carter

Members of the Public

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 8:14 AM to Open Session. A quorum was present (see above).	
Report out of Closed Session	Medical Staff Credentialing Report for August 2, 2018. QIC Minutes from June 26, 2018. Medical Executive Committee Minutes from July 10, 2018.	John Nibbelin reported that the Board unanimously approved the Credentialing Report as amended and the QIC Minutes and accepted the MEC Minutes.
Public Comment	None.	
Foundation Report	Leslie introduced the new Chair of the Foundation, Paul Rogerville. Sara Furrer will lead the Capital Campaign.	FYI
Consent Agenda	Approval of: 1. Hospital Board Meeting Minutes from July 5, 2018.	It was MOVED, SECONDED and CARRIED unanimously to approve all items on the Consent Agenda.
Medical Staff Report Dr. Bryan Gescuk	Dr. Gescuk informed the Board that Express Care is a service that will be offered soon to patients. The following Department Chairs and Vice Chairs were elected and their terms begin on July 1, 2018. Primary Care Dept.: Sumita Kalra, DO – Chair. Allen Tong, MD – Vice Chair	FYI

	<p>Medicine Dept.: Frank Trinh, MD – Chair. Suja Georgie, MD – Vice Chair Surgery Dept.: Scott Lock, MD – Chair. Kenton Fong, MD – Vice Chair</p>	
<p>Infection Control and Employee Health Michele Medrano Dr. Grace Hassid</p>	<p>Infection Control Department’s Scope of Responsibility</p> <ul style="list-style-type: none"> • Medical Center: Emergency; Acute Care Units; Psychiatric Units; Dietary Services; Ancillary Departments; Environmental Services; Primary Care Clinics • Community Partners: SMC Hospitals; Correctional Health; Cordilleras • Other Locations: SMMC & BHRS Primary Care Clinics; BLTC <p>Regulations and Partnerships: SMC Dept. Of Public Health; CA Dept. of Public Health; CAL OSHA; The Centers for Disease Control; Centers for Medicare & Medicaid; The Joint Commission; National Hospital Safety Network</p>	<p>FYI</p>
<p>Compliance and HIPAA Gabriela Behn</p>	<p>Standards, Policies, Procedures</p> <ul style="list-style-type: none"> • Finalize Breach Response Policy • Stark/Anti-Kickback Policy – Provider Committee Review • Update Informed Consent and Patient Capacity Policy • Finalized Compliance Investigation and Corrective Action Policy <p>Monitoring, Auditing, and Internal Reporting Systems</p> <ul style="list-style-type: none"> • Approved FY18-19 Audit Plan • Approved Compliance Program metrics to track <ul style="list-style-type: none"> – Recovery Audit Contractor (RAC) Audits – Noridian Audit Letters and Appeals – Additional Documentation Requests (ADRs) – DHCS Tar Free Audit Results (medical necessity) – Training Completion numbers – Timely Completion of Corrective Action Plans (CAPs) – MOON Letter (Observation Patients) <p>Focused Compliance Topics</p> <ul style="list-style-type: none"> • Medical Necessity <ul style="list-style-type: none"> – Working with operations on new staffing models; hired ED case manager during the week for first line of entry – Working with leadership on Physician Advisor role • Inpatient and Observation Orders <ul style="list-style-type: none"> – Updated orderset to include Surgery Outpatient in Bed – Continued provider education. • Physician Assistant and Nurse Practitioner Roles and Documentation <ul style="list-style-type: none"> – EHR Access and Roles 	<p>FYI</p>

	<p>– Documentation and Billing/Coding</p> <p>Current Audits</p> <ul style="list-style-type: none"> • Medical Necessity Determinations: Consultants review Medicare FFS and Medi-Cal (non-HPSM) • Outpatient Coding Audits: Coding Manager is increasing # of coding audits by outpatient providers. • Level 5 E/M Codes: Ensuring accurate documentation to support Level 5 • Opioid Audit: Reviewing prescriptions written and prescriptions dispensed • Home Health Visits: Follow-up Audit to last year's audit re: medical necessity 	
Financial Forecast and Strategic Planning	David McGrew briefed the Hospital Board on current financial projections for the next two-year budget cycle including significant potential risks and opportunities. These projections are being incorporated in current year strategic planning.	FYI
CEO Report Dr. CJ Kunnappilly, CEO	Dr. Kunnappilly presented the August CEO report which was included in the Board packet and answered questions from the Board.	FYI
Health System Report Louise Rogers	<p>The county's sixth annual Pride event drew 800 people and featured the largest number of information and resource booths to date.</p> <p>The Health System's new visual identity will kick off on September 12, 2018.</p>	FYI
County Manager John Maltbie	No report.	FYI
Board of Supervisors Supervisor Canepa	No report.	FYI

Supervisor Canepa adjourned the meeting at 9:23 AM. The next Board meeting will be held on September 6, 2018.

Minutes recorded by:



Michelle Lee, Executive Secretary

Minutes approved by:



Dr. Chester Kunnappilly, Chief Executive Officer



San Mateo Medical Center
A County System of Healthcare

TAB 2

ADMINISTRATION REPORTS

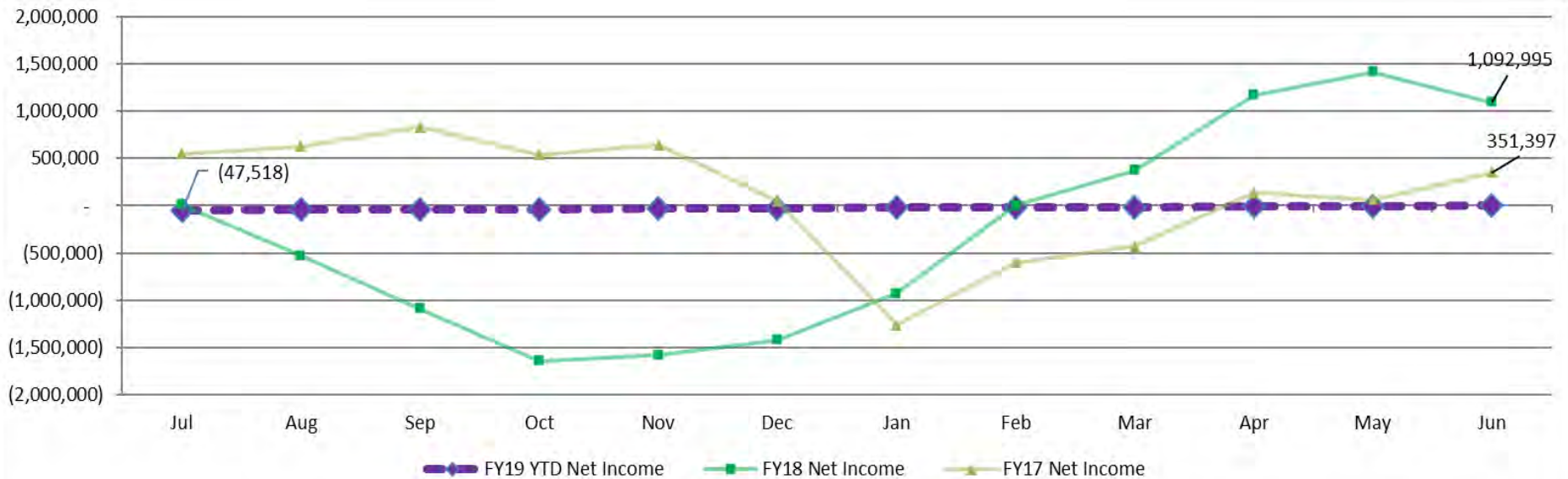


San Mateo Medical Center
A County System of Healthcare

**July FY 2018-2019
Financial Report**

**Board of Directors Meeting
September 6, 2018**

Financial Highlights



July - Negative \$47K:

- Patient Service Revenue
FQHC & release of reserves
- Timing of AP payments

- Contract Provider payments
- Reserves for PRIME/QIP

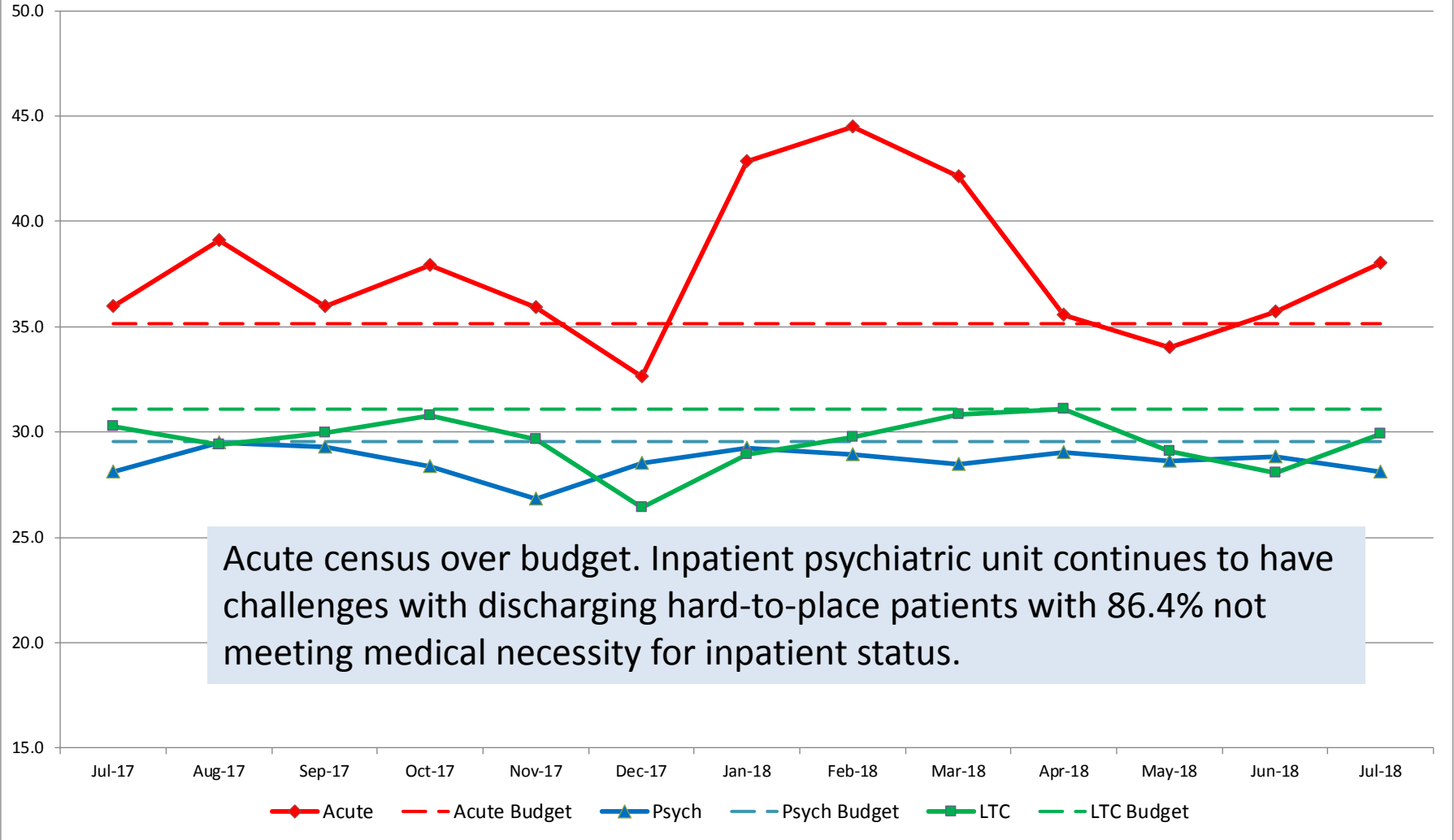
Forecast FY19: Starting the year at basically break-even. Only identified risks to the full year budget at this time are the pending CMS approval for EPP and the ability to fully achieve the PRIME/QIP performance measures

**San Mateo Medical Center
Patient Days
July 31, 2018**

MONTH			
Actual	Budget	Variance	Stoplight
2,977	2,934	43	1%

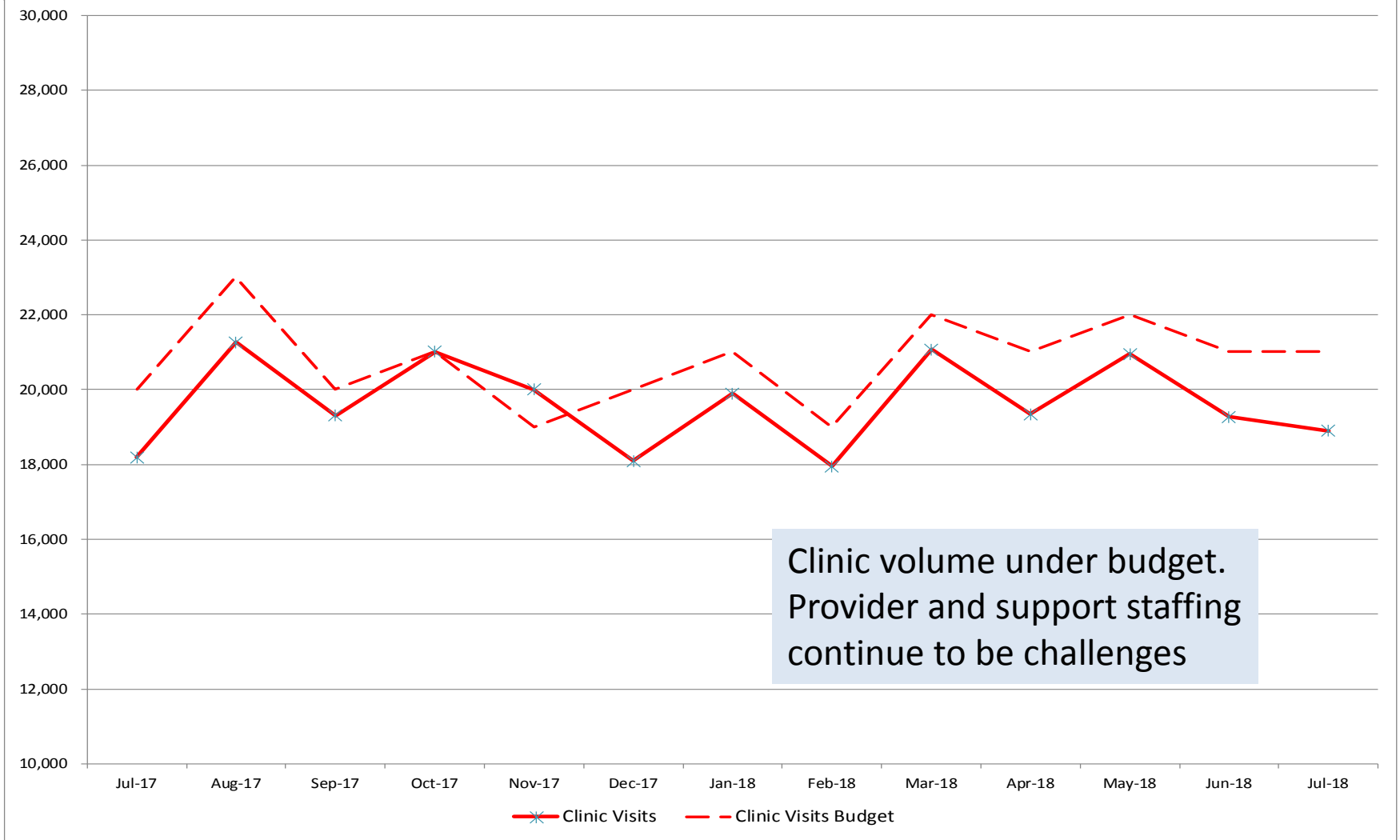
YEAR TO DATE			
Actual	Budget	Variance	Stoplight
2,977	2,934	43	1%

Patient Days



**San Mateo Medical Center
Clinic Visits
July 31, 2018**

	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
Clinic Visits	18,901	21,009	(2,108)	-10%	18,901	21,009	(2,108)	-10%

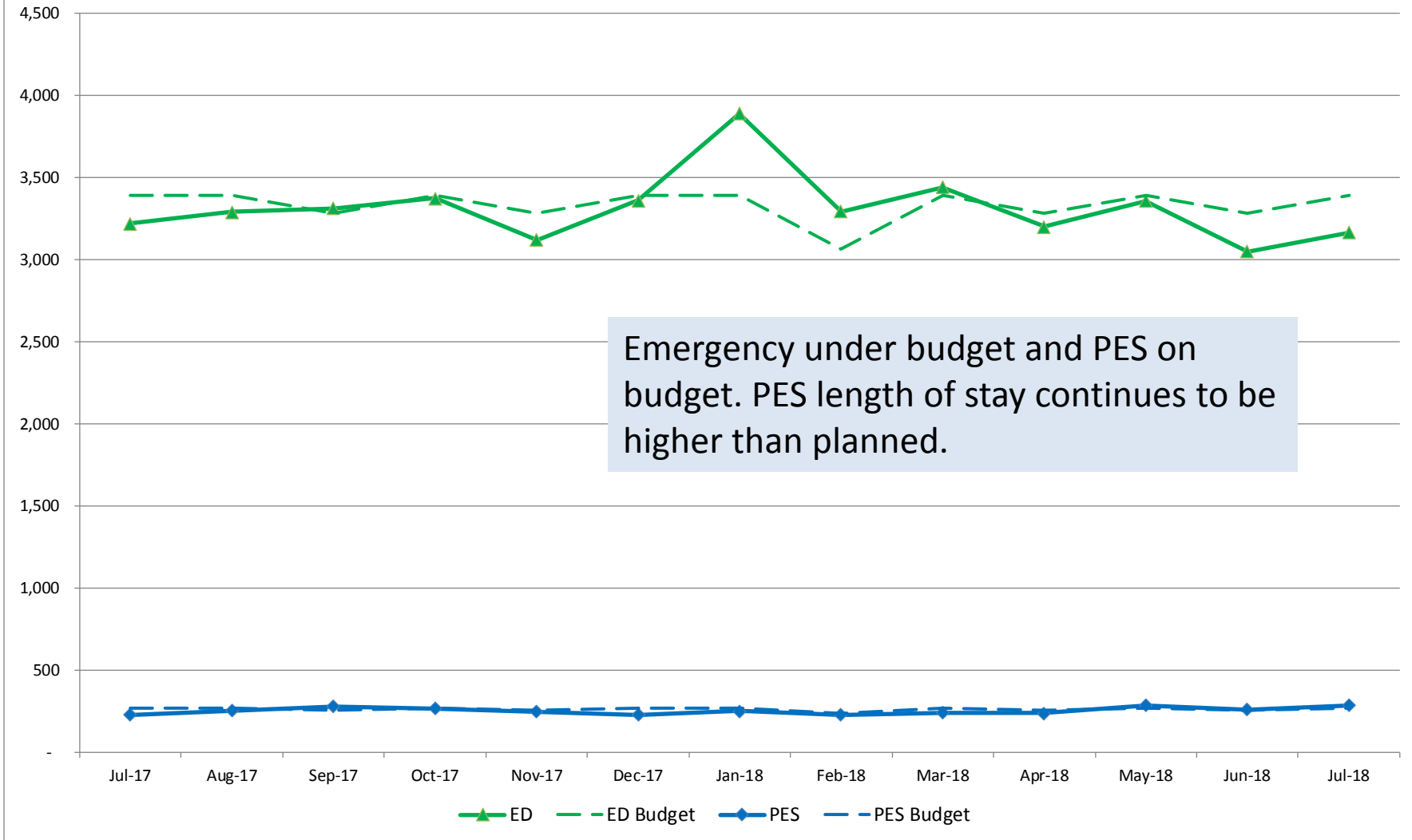


San Mateo Medical Center
Emergency Visits
July 31, 2018

MONTH			
Actual	Budget	Variance	Stoplight
3,455	3,659	(204)	-6%

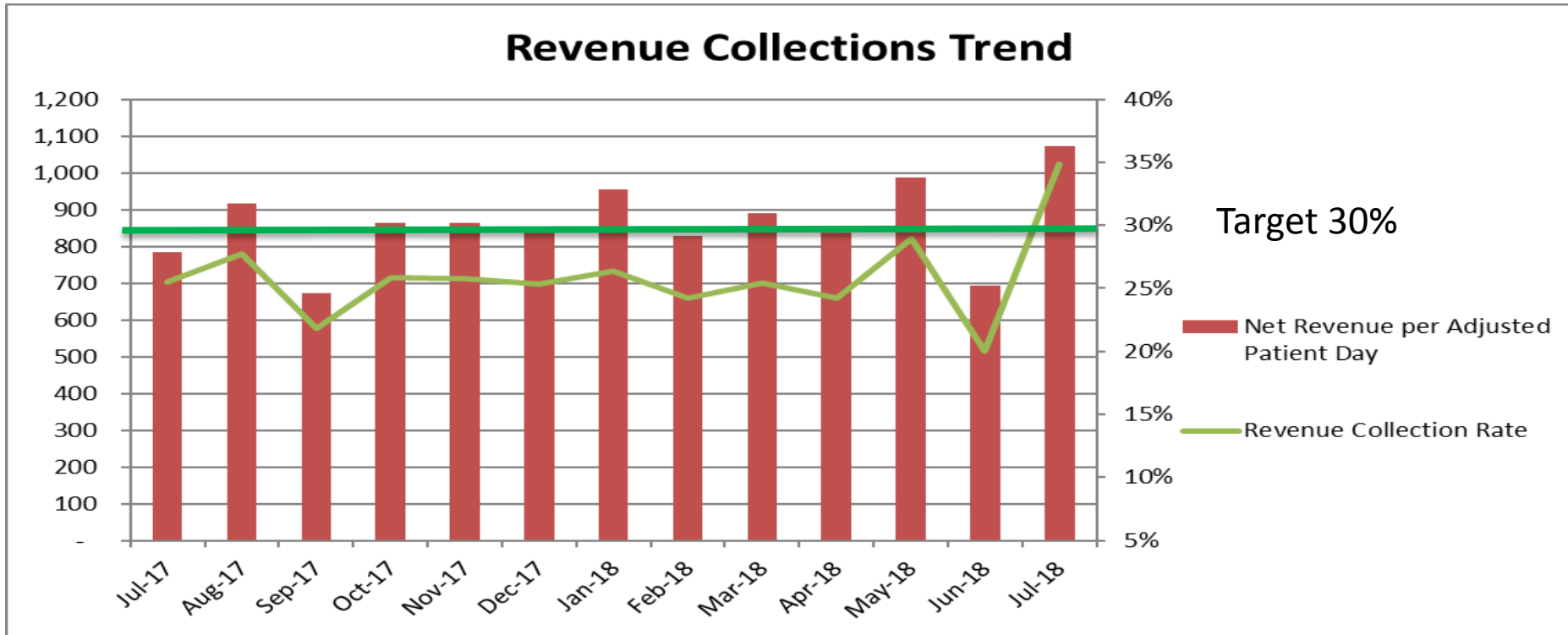
YEAR TO DATE			
Actual	Budget	Variance	Stoplight
3,455	3,659	(204)	-6%

ED Visits



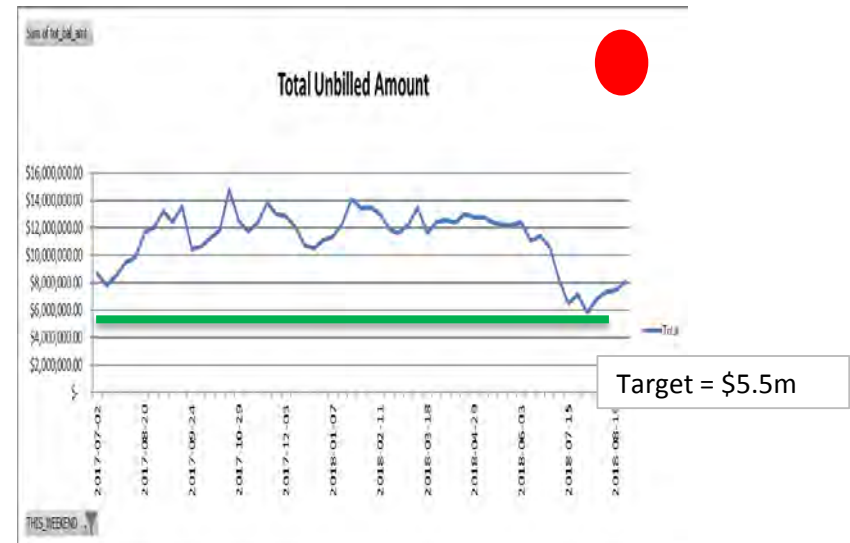
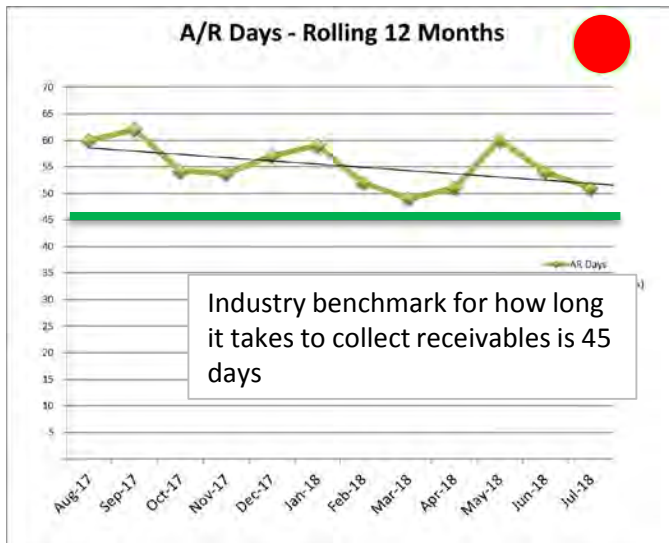
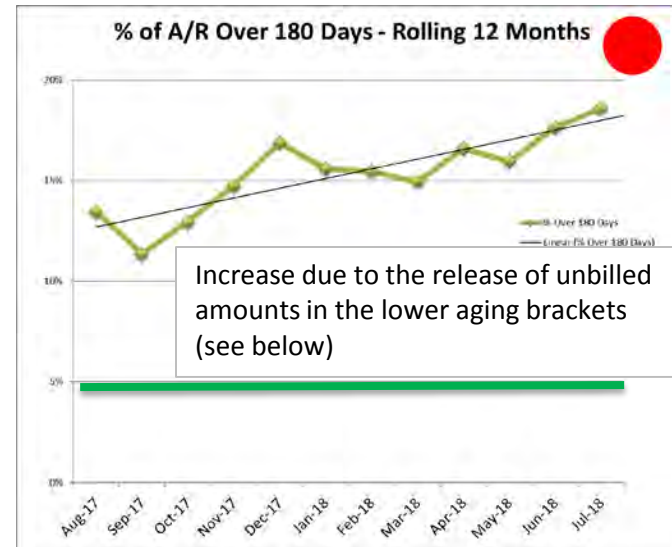
Key Performance Indicators

FFS Revenue Collection Trend



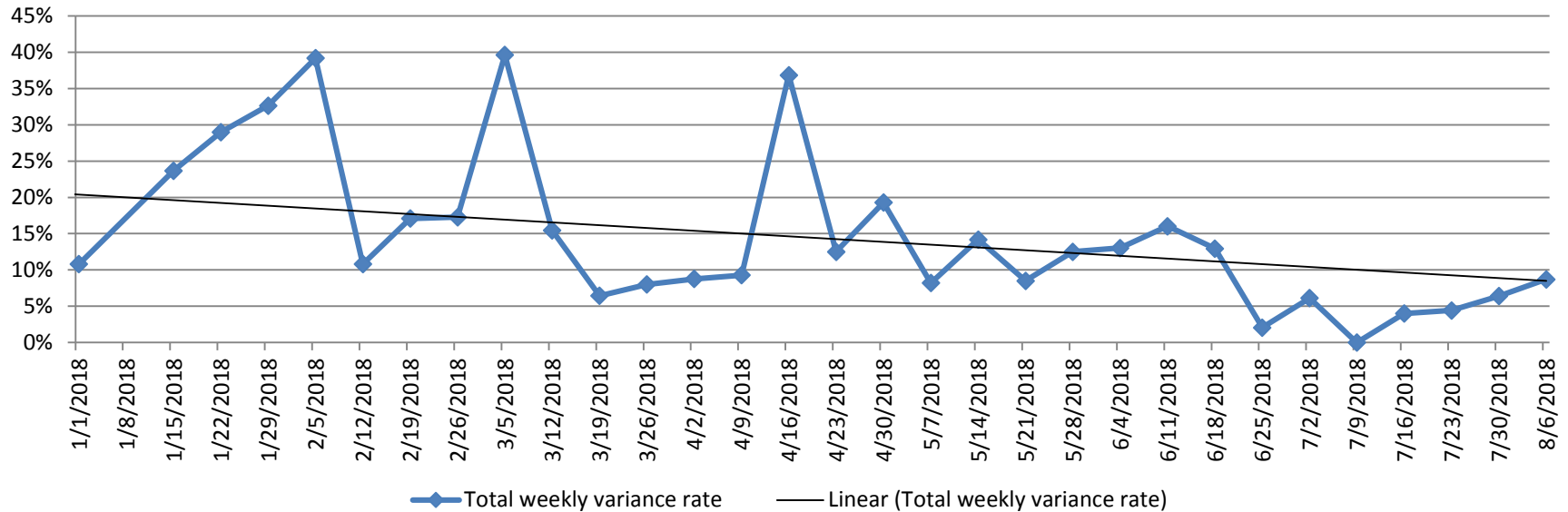
The July collection rate was 25% after adjusting for the timing of FQHC payment and the reversal of provider supplemental revenue reserves. The revenue collection rate continues to hover around 25%, as we continue to delay the release of claims pending compliance reviews for accuracy and completeness. Claim denials continue to be high due to insurance verification errors and inpatients not meeting medical necessity.

Key Performance Indicators



Key Performance Indicators

Medical Necessity Retroactive Accuracy Reviews (Inter-Rater Reliability)



The error rate continues to trend downward as a result of weekly variance reviews and focused training/monitoring. The variance rate for the week ending 7/9 was zero.

Current area of focus is to complete medical necessity reviews within 24 hours.

Revenue Improvement Plan

Executive Summary

Initiative

Status

<i>Registration Accuracy</i>	<ul style="list-style-type: none">• Developed A3 Improvement Charter to focus on registration workflows• eCareNEXT - registration quality work queues and dashboard reporting tool pending Cerner amendment (BOS date TBD)
<i>Clinical Documentation Improvement (CDI)</i>	<ul style="list-style-type: none">• Project work started in June – 2 Phases<ul style="list-style-type: none">• Consulting project for CDI program development• Chartwise software implementation
<i>Accounts Receivable management</i>	<ul style="list-style-type: none">• Implement automated account follow-up software to replace manually intensive and inefficient excel spreadsheet process
<i>Denial management & Unbilled Accounts</i>	<ul style="list-style-type: none">• External retro reviews in progress.• Medical necessity training & monitoring in progress.• Denials workflow & reporting software live in April• Authorization improvement work – IP, SSU, Infusion
<i>Increase Medi-Cal rates</i>	<ul style="list-style-type: none">• Medi-Cal cost report appeals in progress. Settled FY14 SNF issues; yield approx. \$2.3m annually• Medical-Surgical inpatient rates increased to \$2,360/day. Projected to yield \$3m annually.

APPENDIX

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

MONTH			
Actual	Budget	Variance	Stoplight
A	B	C	D

YEAR TO DATE			
Actual	Budget	Variance	Stoplight
E	F	G	H

1	Income/Loss (GAAP)	(47,518)	0	(47,518)		(47,518)	0	(47,518)	
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2	HPSM Medi-Cal Members Assigned to SMMC	37,465	38,019	(554)	-1%	37,465	38,019	(554)	-1%
3	Unduplicated Patient Count	71,350	70,114	1,236	2%	71,350	70,114	1,236	2%
4	Patient Days	2,977	2,934	43	1%	2,977	2,934	43	1%
5	ED Visits	3,455	3,659	(204)	-6%	3,455	3,659	(204)	-6%
7	Surgery Cases	233	265	(32)	-12%	233	265	(32)	-12%
8	Clinic Visits	18,901	21,009	(2,108)	-10%	18,901	21,009	(2,108)	-10%
9	Ancillary Procedures	69,906	69,402	504	1%	69,906	69,402	504	1%

10	Acute Administrative Days as % of Patient Days	0.0%	16.0%	16.0%	100%	0.0%	16.0%	16.0%	100%
11	Psych Administrative Days as % of Patient Days	86.4%	80.0%	-6.4%	-8%	86.4%	80.0%	-6.4%	-8%

(Days that do not qualify for inpatient status)

Pillar Goals

12	Revenue PMPM	161	150	11	7%	161	150	11	7%
13	Operating Expenses PMPM	371	398	27	7%	371	398	27	7%
14	Full Time Equivalents (FTE) including Registry	1,206	1,256	51	4%	1,206	1,256	51	4%

San Mateo Medical Center
Income Statement
July 31, 2018

	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
	A	B	C	D	E	F	G	H
21 Inpatient Gross Revenue	9,156,577	9,577,810	(421,233)	-4%	9,156,577	9,577,810	(421,233)	-4%
22 Outpatient Gross Revenue	23,792,193	25,324,704	(1,532,511)	-6%	23,792,193	25,324,704	(1,532,511)	-6%
23 Total Gross Revenue	32,948,770	34,902,514	(1,953,743)	-6%	32,948,770	34,902,514	(1,953,743)	-6%
24 Patient Net Revenue	11,477,545	10,512,930	964,616	9%	11,477,545	10,512,930	964,616	9%
25 Net Patient Revenue as % of Gross Revenue	34.8%	30.1%	4.7%	16%	34.8%	30.1%	4.7%	16%
26 Capitation Revenue	433,170	500,000	(66,830)	-13%	433,170	500,000	(66,830)	-13%
27 Supplemental Patient Program Revenue (Additional payments for patients)	8,258,202	12,398,049	(4,139,847)	-33%	8,258,202	12,398,049	(4,139,847)	-33%
28 Total Patient Net and Program Revenue	20,168,917	23,410,979	(3,242,062)	-14%	20,168,917	23,410,979	(3,242,062)	-14%
29 Other Operating Revenue (Additional payment not related to patients)	1,044,495	1,229,820	(185,325)	-15%	1,044,495	1,229,820	(185,325)	-15%
30 Total Operating Revenue	21,213,412	24,640,799	(3,427,387)	-14%	21,213,412	24,640,799	(3,427,387)	-14%

San Mateo Medical Center
Income Statement
July 31, 2018

MONTH			
Actual	Budget	Variance	Stoplight
A	B	C	D

YEAR TO DATE			
Actual	Budget	Variance	Stoplight
E	F	G	H

Operating Expenses

31	Salaries & Benefits	16,344,158	16,432,845	88,687	1%	16,344,158	16,432,845	88,687	1%
32	Drugs	605,272	806,645	201,373	25%	605,272	806,645	201,373	25%
33	Supplies	580,847	931,599	350,751	38%	580,847	931,599	350,751	38%
34	Contract Provider Services	3,753,158	3,346,496	(406,662)	-12%	3,753,158	3,346,496	(406,662)	-12%
35	Other fees and purchased services	3,648,147	4,572,074	923,927	20%	3,648,147	4,572,074	923,927	20%
36	Other general expenses	360,917	532,070	171,153	32%	360,917	532,070	171,153	32%
37	Rental Expense	180,385	196,247	15,862	8%	180,385	196,247	15,862	8%
38	Lease Expense	825,358	825,358	-	0%	825,358	825,358	-	0%
39	Depreciation	187,773	273,093	85,320	31%	187,773	273,093	85,320	31%
40	Total Operating Expenses	26,486,016	27,916,427	1,430,411	5%	26,486,016	27,916,427	1,430,411	5%
41	Operating Income/Loss	(5,272,605)	(3,275,629)	(1,996,976)	-61%	(5,272,605)	(3,275,629)	(1,996,976)	-61%
42	Non-Operating Revenue/Expense	381,618	(1,567,840)	1,949,458	124%	381,618	(1,567,840)	1,949,458	124%
43	Contribution from County General Fund	4,843,468	4,843,468	0	0%	4,843,468	4,843,468	0	0%
44	Total Income/Loss (GAAP)	(47,518)	0	(47,518)		(47,518)	0	(47,518)	

(Change in Net Assets)

San Mateo Medical Center
Payer Mix
July 31, 2018

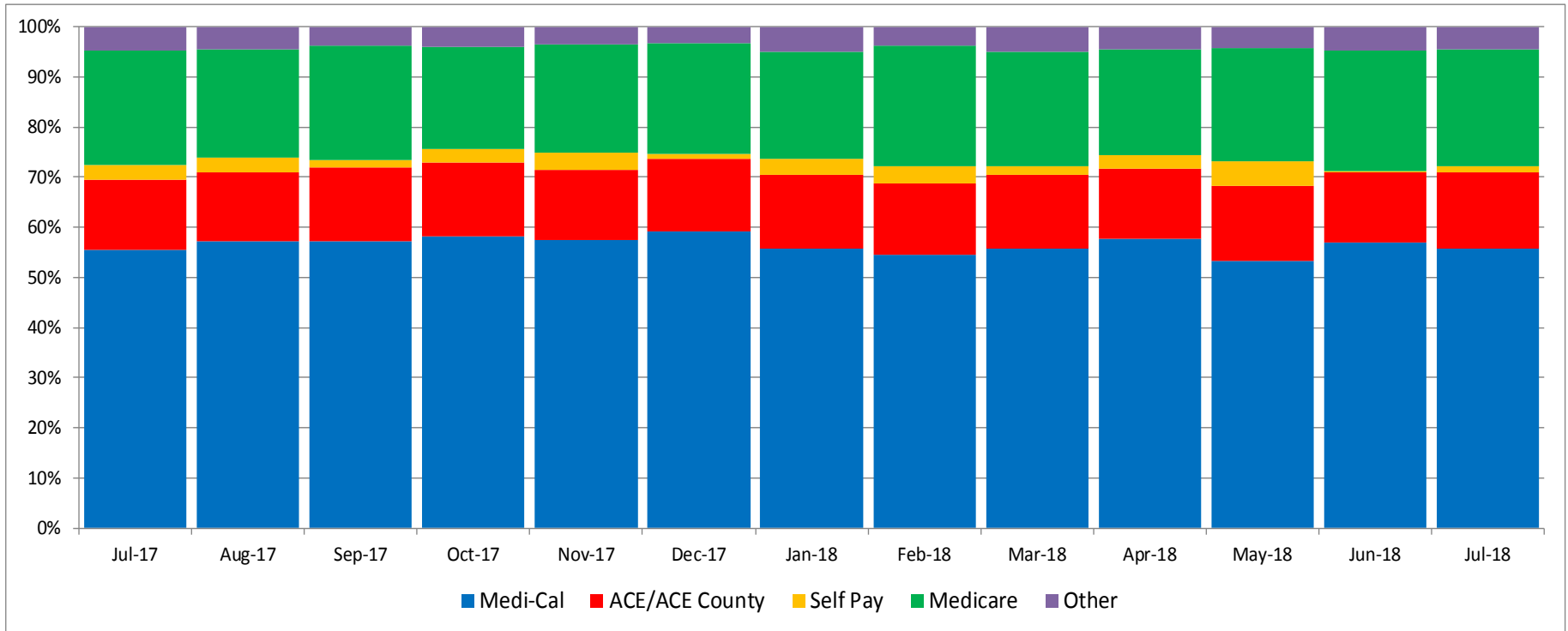
MONTH			
Actual	Budget	Variance	Stoplight

YEAR TO DATE			
Actual	Budget	Variance	Stoplight

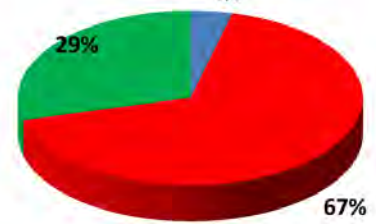
Payer Type by Gross Revenue

	A	B	C	D
Medicare	23.5%	21.0%	2.5%	
Medi-Cal	55.8%	58.0%	-2.2%	
Self Pay	1.1%	2.0%	-0.9%	
Other	4.5%	5.0%	-0.5%	
ACE/ACE County	15.1%	14.0%	1.1%	
Total	100.0%	100.0%		

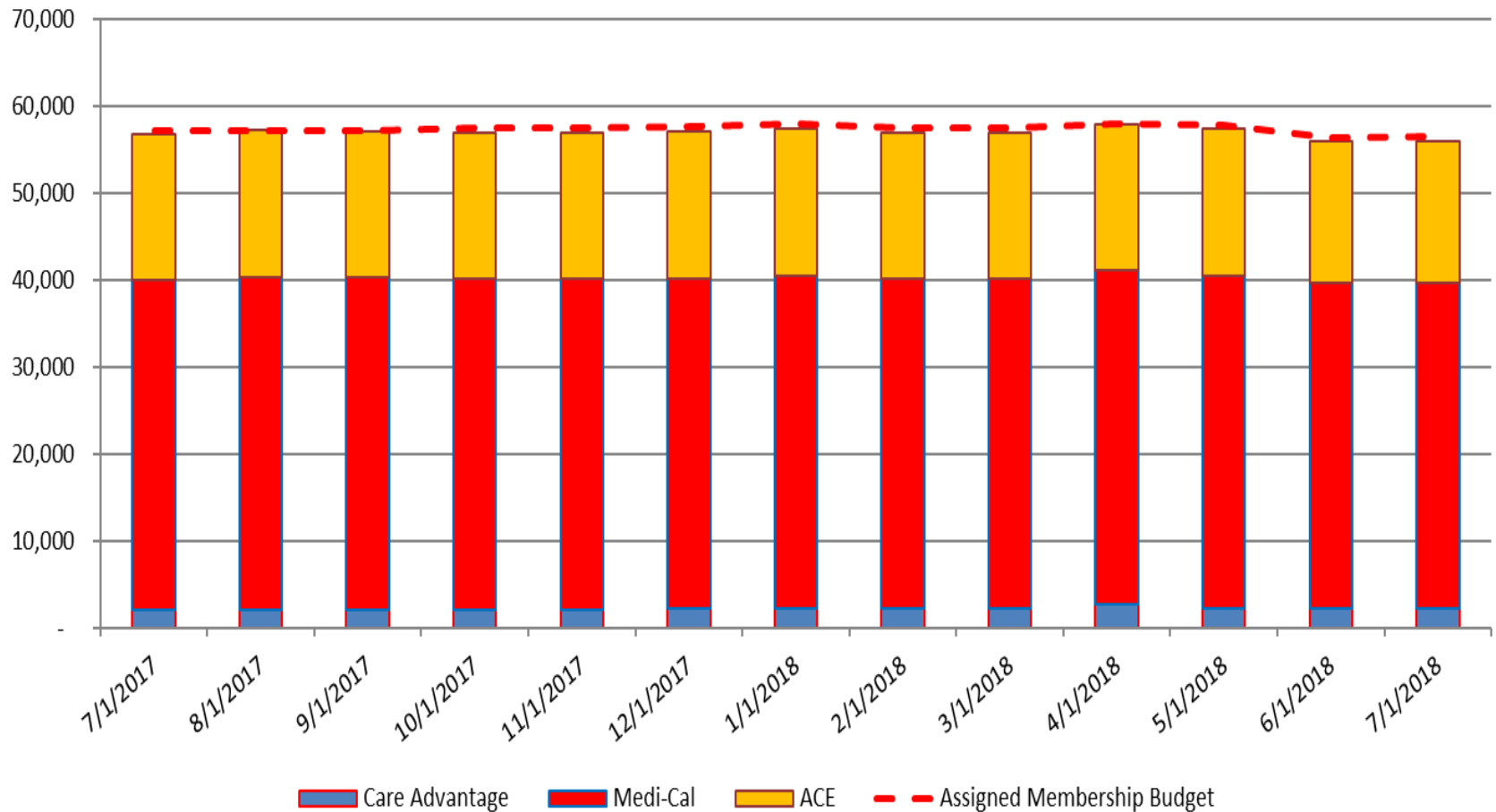
E	F	G	H
23.5%	21.0%	2.5%	
55.8%	58.0%	-2.2%	
1.1%	2.0%	-0.9%	
4.5%	5.0%	-0.5%	
15.1%	14.0%	1.1%	
100.0%	100.0%		



Managed Care Mix
4%



Managed Care Membership Trend

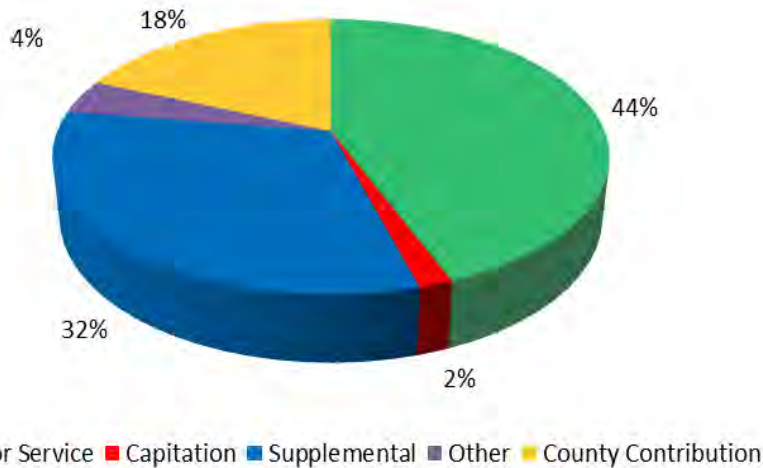


■ Care Advantage
 ■ Medi-Cal
 ■ ACE
 - - - Assigned Membership Budget

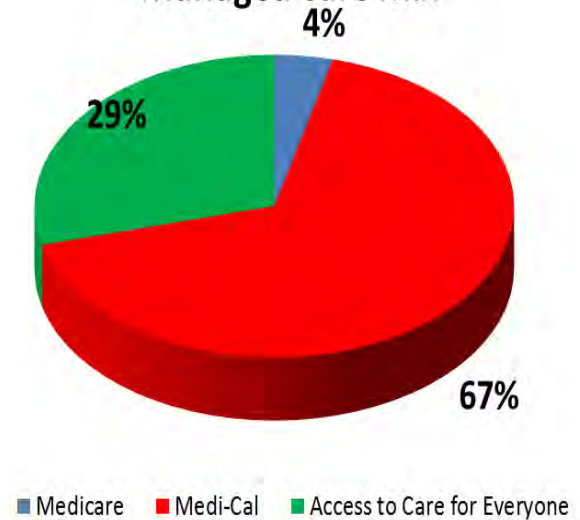
Revenue Mix

57,000
Managed
Care
Lives

Sources of Revenue

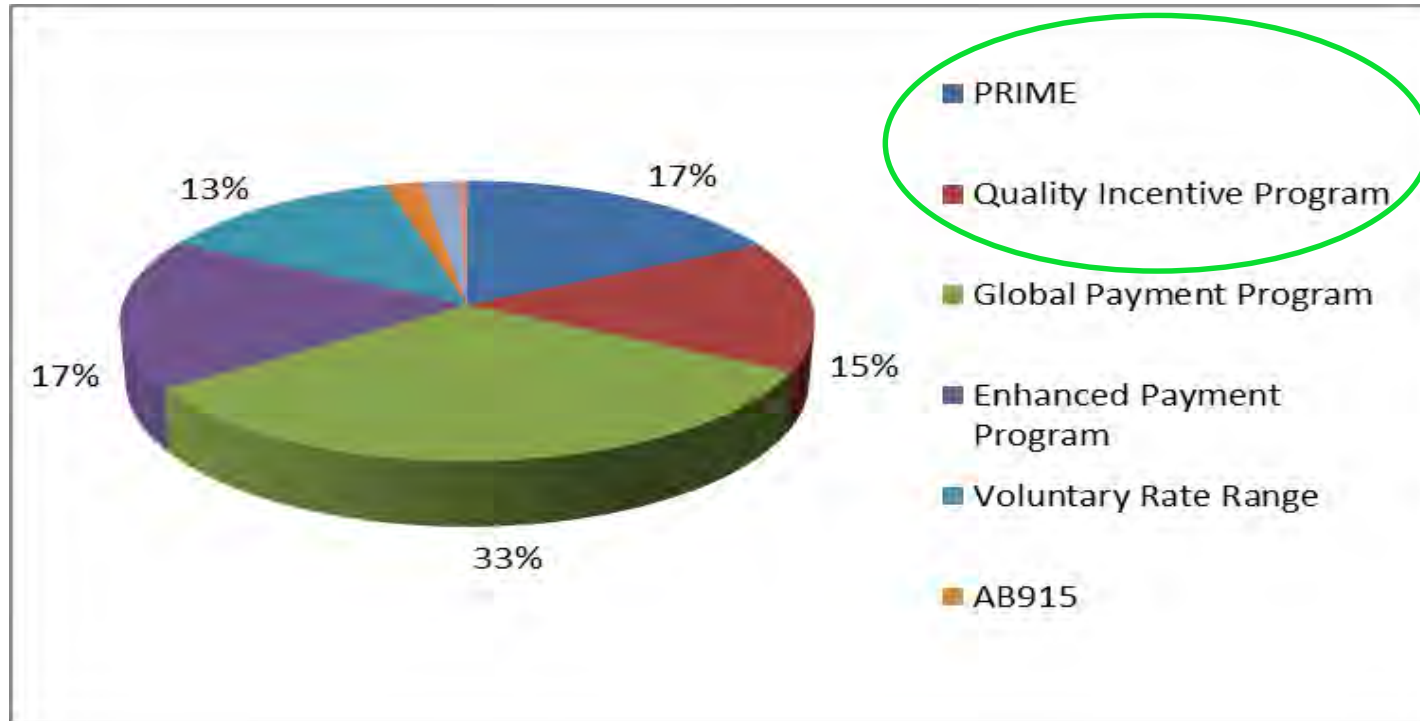


Managed Care Mix



- **Managed Care** programs represent 35% 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.

Supplemental Revenue Mix



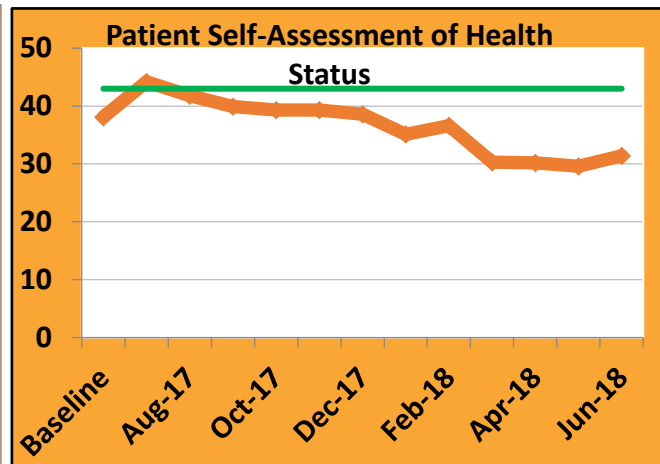
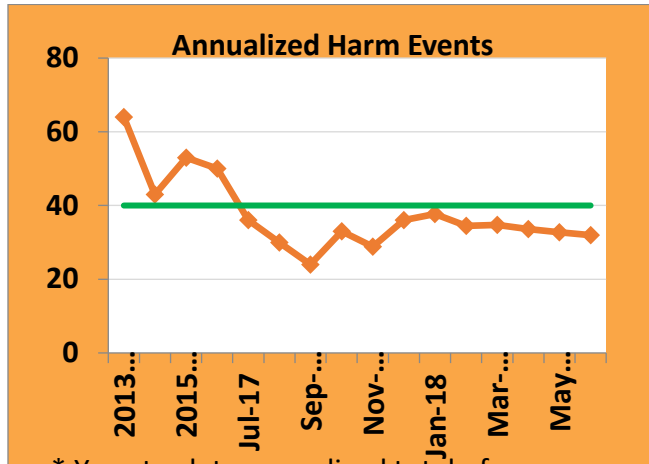
- **Value-Based** programs represent 32% of our Supplemental Revenue
 - New HPSM P4P and Shared Savings programs could boost it to 35%
- **Volume-Based** programs represent 68% of our Supplemental Revenue



September, 2018

EXCELLENT CARE

• **PILLAR METRICS**



Harm Events= Avoidable Patient Harm= Central Line Infections, Catheter Associated Urinary Infections, Hospital Acquired Pressure Ulcers, Surgical Site Infections, Medication errors with harm, Blood clots, Falls with Injury and other avoidable patient harm events. 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 of the questions 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.**

Survey vendor and methodology change in January 2018 resets baseline.

- **Innovative Care Clinic has successful HPSM Audit-** The Health Plan of San Mateo conducts regulatory audits that are required to retain our status with the State of California as a Medi-Cal provider. The audit is an intensive review of clinic medical records, processes, compliance with State and federal regulations, and a review of the physical site to ascertain that we are in compliance with laws such as the ADA (Americans with Disabilities Act). In recent years the State and HPSM have intensified reviews of processes such as for no shows and referrals. The audit also evaluates whether operational equipment has routine maintenance as per manufacturer guidelines; they check for expired meds, appropriate supplies, appropriate signage, and that exam rooms meet both ADA and state regulatory guidelines. The clinic also must meet the language benchmark of having services available in the patient's language of choice.

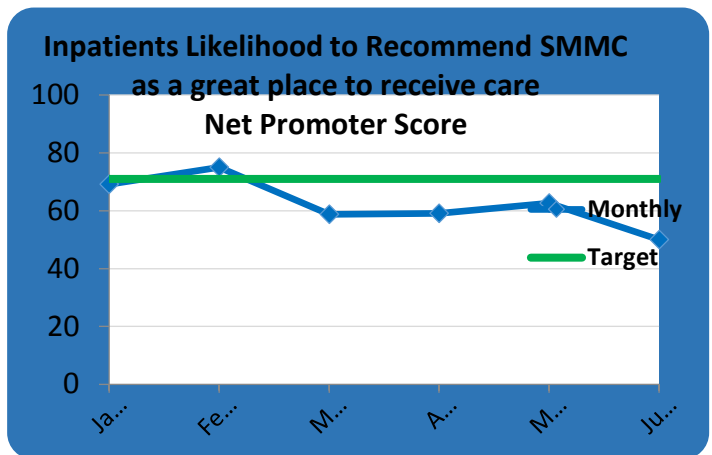
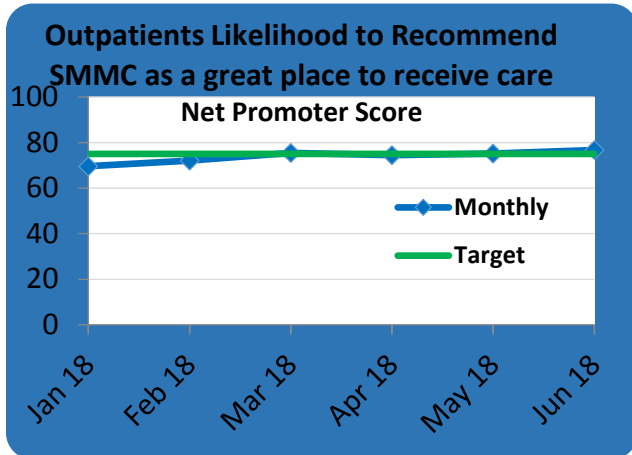
The clinic underwent the survey on Thursday, August 16, 2018 and achieved 100% on the survey. There were zero deficiencies and the clinic received compliments from the survey team on their operations. One of the surveyors (who has been a surveyor for over 40 years, many of them with San Francisco Health Plan) commented that the clinics she has reviewed at SMMC are among the best she has ever visited in her career. Congratulations to the entire ICC Team!

- **Nursing continues to advance quality-** At the close of the 2017-2018 Fiscal Year, our Chief Nursing Officer, Joan Spicer, RN, MBA, PhD, produced the Annual Nursing Report. Quality highlights from that report include a 10% improvement in nurse sensitive outcome measures. This includes pressure injuries

where the prevalence of all pressure injuries was 2.5% (the national benchmark is 9.0%-lower is better) and the prevalence of hospital-acquired pressure injuries was 1.2% (national benchmark is 3.1%-lower is better). Thank you to all of our nurses for their daily efforts to improve the organization.

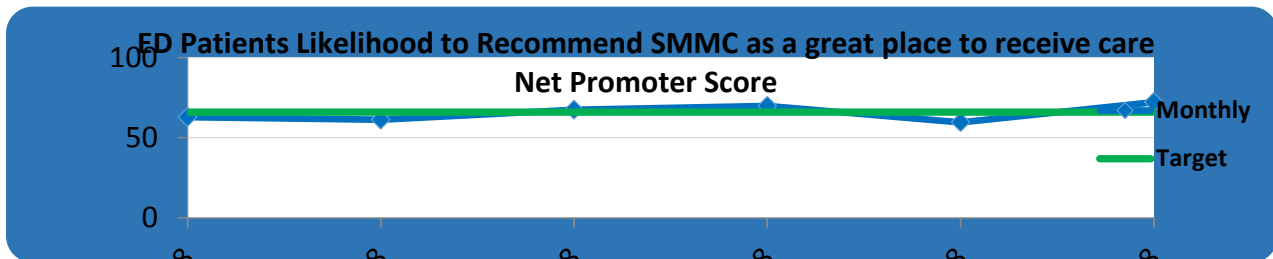
PATIENT CENTERED CARE

- PILLAR METRICS**



NRC Net Promoter: Score on the question of “How likely are you to recommend this clinic to friends and family?”-Percentage of patients who gave SMMC the highest score (9 or 10) **Higher is better**

NRC Net Promoter Score: Score on the question of “How likely are you to recommend this Hospital to friends and family?”-Percentage of patients who gave SMMC the highest score (9 or 10) **-Higher is better**

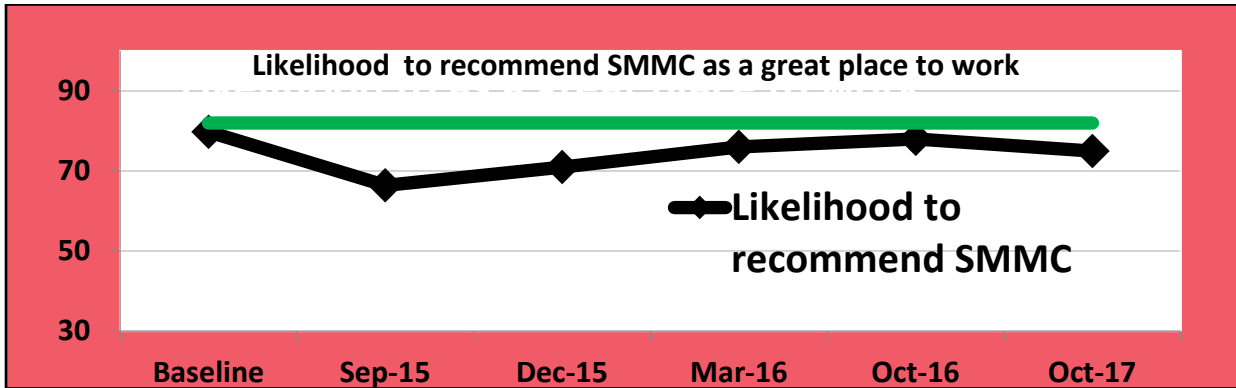


NRC Net Promoter Score: Score on the question of “How likely are you to recommend this Emergency Department to friends and family?” Percentage of patients who gave SMMC the highest score (9 or 10) **--Higher is better**

- SMMC hires its first Manager for Diversity and Health Equity** –We are excited to introduce Lalitha Sankaran as the new Manager of the Office of Diversity and Health Equity. This new limited term position was created to continue the work that we have begun in our Disparities Reduction Strategic Initiative. Lalitha comes to us with a wealth of experience in equitable care, language services and cultural competence. Please join me in welcoming her to SMMC.

STAFF ENGAGEMENT

• PILLAR METRICS

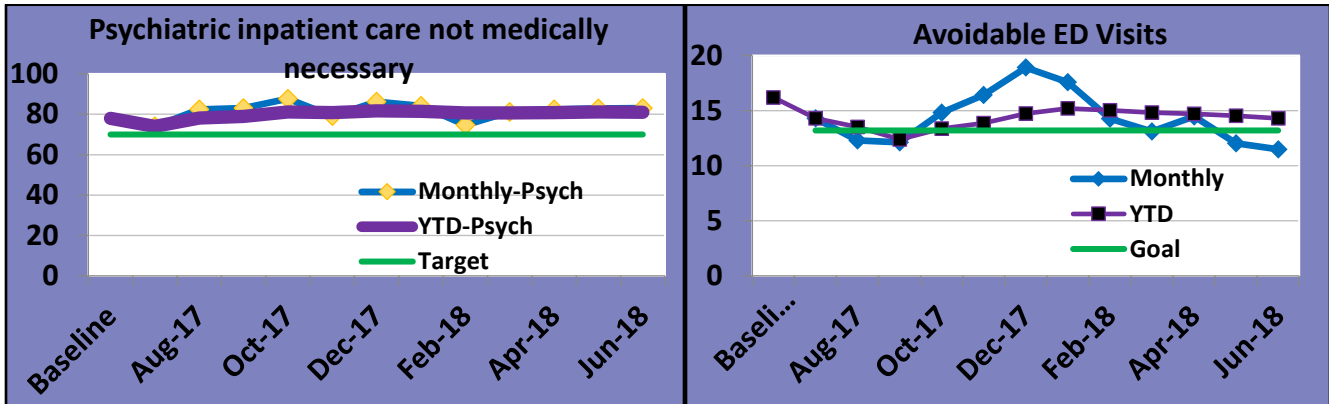


County Staff Engagement Survey: Percentage of staff members who Agree or Strongly Agree that they would recommend SMMC as a great place to work-**Higher is better**

- Leadership transition in Rehabilitation Services:** We recently bid a fond farewell to Paul Carlisle, our longtime manager of Rehabilitation Services. Paul is taking on new challenges with UC Davis Medical Center. Although we will miss Paul, he has built an incredible team within the service and we are excited that Emily Weaver, PT, DPT has accepted the work out of class position as the unit manager. A permanent recruitment is underway.

RIGHT CARE, TIME AND PLACE

• PILLAR METRICS



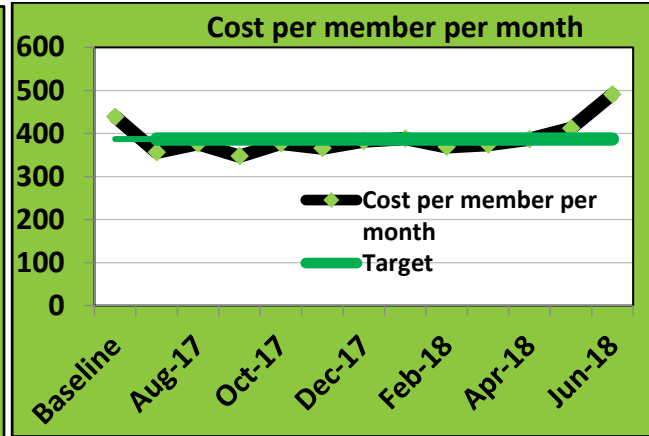
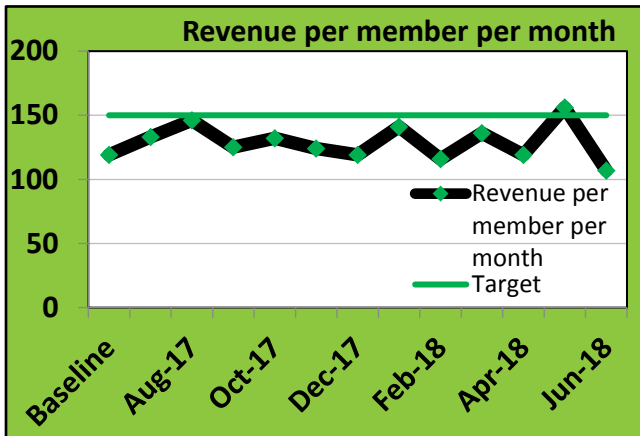
Psychiatric Non-medically necessary Inpatient Days: Percentage of Acute Inpatient psychiatry days where a patient may have been able to be discharged if there was a safe environment for them to go to-**Lower is better**

Potentially Avoidable ED Visits: Percentage of ED visits by Established Primary Care Patients where the discharge diagnosis is one that traditionally could have been treated in an outpatient setting rather than ED-**Lower is better**

- Medical-Surgical nursing works to improve discharge process-** Medical-Surgical nurses have initiated several efforts to improve safety, effectiveness and patient experience during discharge. These efforts include implementing a “Quick 5” check-off process used on the day of discharge and tracking the causes of all post-discharge Emergency Department Visits. We look forward to sharing the ongoing impact of these important care transition interventions.

FINANCIAL STEWARDSHIP

• PILLAR METRICS

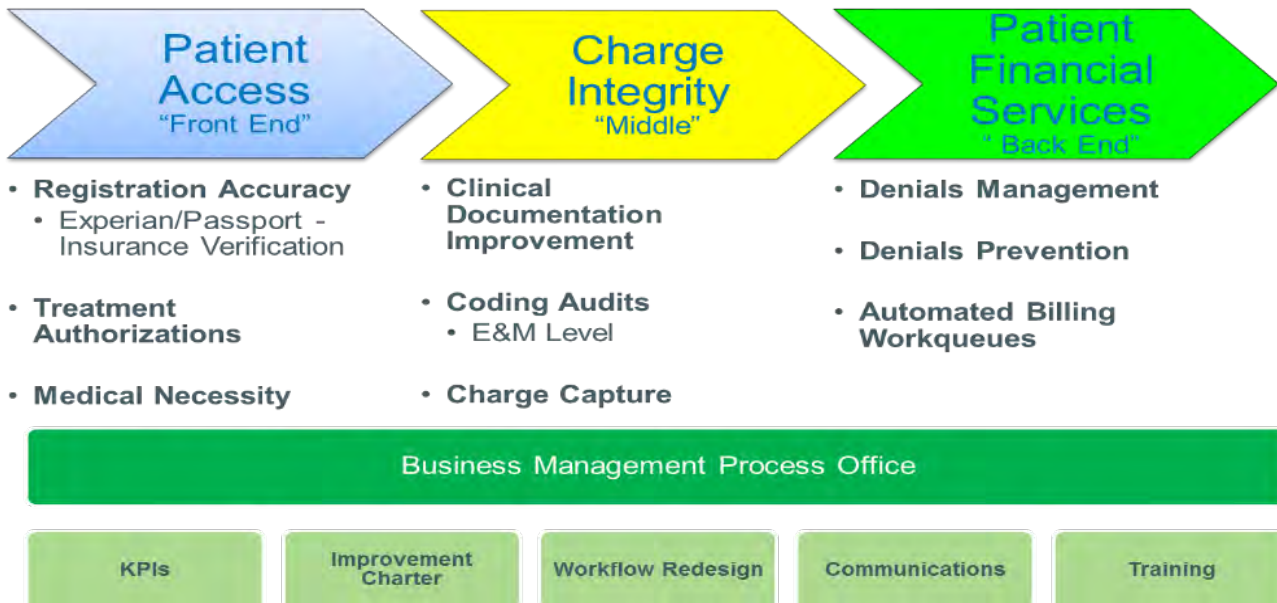


Revenue Per Member Per Month: Total Patient Revenue divided by total assigned members- **Higher is better**

Cost Per Member Per Month: Total Cost divided by total assigned members- **Lower is better**

• Revenue Cycle Transformation – FY19 Initiatives

The Revenue Cycle teams are looking to build on last year's successes as they launch into FY18-19. Specifically, the teams will continue to work these focus areas:



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

Measures:	Baseline value (6/30/17)	Current Value (7/31/18)	Budget Value (FY17-18)	Ideal Value
Revenue per member per month (pmpm)	\$119	\$161	\$150	\$398
Claim denials (< 5% NPR)	\$4.4 million	\$5.3 million	\$4.1 million	No Denials
Unbilled accounts (5 day bill hold)	\$8.6 million	\$5.8 million	\$5.5 million	No Unbilled

SNAPSHOT: San Mateo County Health

TO: SMMC Board Members | FROM: Louise Rogers, Chief

INDICATOR	NUMBER	CHANGE FROM PREVIOUS MONTH	CHANGE FROM PREVIOUS YEAR
ACE Enrollees	21,086 (July 2018)	0.1%	-2.2%
SMMC Emergency Department Visits	3,455 (July 2018)	4.3%	-1.3%
New Clients Awaiting Primary Care Appt.	395 (August 2018)	4.7%	-60%

Drug Medi-Cal Pilot Program’s First Annual Review Receives High Marks

More than a year after San Mateo County Health launched its expanded Drug Medi-Cal Program to treat clients for substance use disorders, the Behavioral Health & Recovery Services pilot underwent its first routine external quality review. This involved an extensive data review and focus groups with clients and staff. The report that followed found that the County has excelled in several ways, most notably the Medication Assisted Treatment program for strong interagency coordination, along with the continuum of services added onto the traditional Drug Medi-Cal benefit. The report also showed a positive perception of client treatment along with an overall high quality, culturally sensitive level of care. Another achievement that stood out was the system-wide support for LGBTQ+ clients through measures like the implementation of sexual orientation and gender identity data collection in our electronic health record and partnering with the San Mateo County Pride Center. This pilot is the result of California’s recent 1115 Waiver known as *Medi-Cal 2020*, which shifts more funding toward outpatient, primary and preventative care through the year 2020.

State Honors Emergency Medical Services for Disaster Preparedness Efforts

The California Department of Public Health’s Emergency Preparedness Office has recognized two of County Health’s Emergency Medical Services (EMS) staff for their achievements in medical and health emergency preparedness. EMS Director Nancy Lapolla (right) received the Regional Collaboration Award for her work in publicizing and socializing the Medical and Health Operational Area Coordination manual throughout the state. This is the second award Nancy has received for the manual she authored with support from EMS staff. Health Emergency Preparedness Manager Shruti Dhapodkar (left) was given the Promising Practices Award for her successful expansion of the San Mateo County Healthcare Coalition from 9 to 53 healthcare facilities in under 1.5 years. Her team’s efforts involved hands-on educational outreach teaching stakeholders about incident command and emergency preparedness. This recognition comes after the division’s tireless efforts to strengthen the County’s emergency preparedness infrastructure and ensure that our community is ready to respond in the event of a disaster.



Photo: Preston Merchant, County Health Communications

Transportation Equity Report Awarded Project of the Year

A study published in the spring by the Health Policy & Planning team recently received the Silicon Valley Bicycle Coalition’s 2018 *Project of the Year Award*. The report delved into pedestrian/biker/vehicle collision data in San Mateo County and found that a disproportionate number of incidents occurred near schools in higher poverty neighborhoods. While these institutions account for less than 10% of San Mateo County’s public elementary schools, nearly 30% of all such collisions occurred in close proximity to these schools. This equity analysis will provide schools with a valuable tool to advocate for active transportation funds. The report has already helped garner grant funding from the California Office of Traffic Safety to support education and encouragement programs at high need schools informing children about safe practices for biking and walking to school. The collaborative effort behind this study with the San Mateo County Office of Education has also helped to build relationships with local cities and schools that advances this important work.



Photo: Rosa Torpis, Health Policy & Planning

