



SAN MATEO COUNTY HEALTH

**SAN MATEO
MEDICAL CENTER**

BOARD OF DIRECTORS MEETING

Monday, August 3, 2020

8:00 AM – 10:00 AM



AGENDA

Board of Directors

Wednesday, Aug. 3, 2020

8:00 AM

*****BY VIDEOCONFERENCE ONLY*****

On March 17, 2020, the Governor issued Executive Order N-29-20 suspending certain provisions of the Ralph M. Brown Act in order to allow for local legislative bodies to conduct their meetings telephonically or by other electronic means. Thus, pursuant to Executive Order N-29-20, local and statewide health orders, and the CDC's social distancing guidelines which discourage large public gatherings, the San Mateo Medical Center Board meeting will be conducted by videoconference.

Public Participation

The meeting may be accessed through Zoom at <https://smcgov.zoom.us/j/95376888706>. Written public comments may be emailed to mlee@smcgov.org and should include the specific agenda item on which you are commenting. Spoken public comments will also be accepted during the meeting through Zoom.

A. CALL TO ORDER AND PUBLIC COMMENT

B. CLOSED SESSION

Items Requiring Action

1. Medical Staff Credentialing Report
2. Quality Report

*Dr. Steve Hassid
Dr. Brita Almog*

Informational Items

3. Medical Executive Committee

Dr. Steve Hassid

C. REPORT OUT OF CLOSED SESSION

D. PUBLIC COMMENT

Persons wishing to address items not on the agenda

E. FOUNDATION REPORT

John Jurow

F. CONSENT AGENDA

Approval of:

1. July 6, 2020 Minutes

G. MEDICAL STAFF REPORT

Chief of Staff Update

Dr. Steve Hassid

H. ADMINISTRATION REPORTS

1. Department of Diagnostic Imaging
2. Remobilizing SMMC
3. Financial Report
4. CEO Report

*Robert Blake
Jacqueline Pelka*

*Dr. CJ Kunnappilly
Robert Blake*

David McGrew

Dr. CJ Kunnappilly

I. COUNTY HEALTH CHIEF REPORT

County Health Snapshot

Louise Rogers

J. COUNTY MANAGER'S REPORT

Mike Callagy

K. BOARD OF SUPERVISOR'S REPORT

Supervisor Carole Groom

L. ADJOURNMENT

TAB 1

**CONSENT
AGENDA**

HOSPITAL BOARD OF DIRECTORS
MEETING MINUTES
Monday, July 6, 2020
Videoconference

Board Members Present

Supervisor Carole Groom
Supervisor David Canepa
Louise Rogers
Dr. CJ Kunnappilly
Dr. Steve Hassid
Dr. Brita Almog
Dr. Gordon Mak
Deborah Torres

Staff Present

Michelle Lee
David McGrew
Dr. Alpa Sanghavi
Brighton Ncube
Aimee Armsby
Peggy Jensen

Karen Pugh
Gabriela Behn
John Jurow
Paul Rogerville
Naomi Yunker
Luci Latu

Members of the Public

ITEM	DISCUSSION/RECOMMENDATION	ACTION
Call to Order	Supervisor Groom called the meeting to order at 8:00 AM, and the Board adjourned to Closed Session.	
Reconvene to Open Session	The meeting was reconvened at 8:15 AM to Open Session. A quorum was present (see above).	
Report out of Closed Session	Medical Staff Credentialing Report for July 6, 2020. QIC Minutes from May 26, 2020. Medical Executive Committee Minutes from June 9, 2020.	Aimee Armsby reported that the Board unanimously approved the Credentialing Report and the QIC Minutes and accepted the MEC Minutes.
Public Comment	None.	
Foundation Report John Jurow	John Jurow reported that donations of PPE continue to come in and they are distributed to SMMC as needed. As of today, the Foundation has spent \$175,000 on SMMC staff, programs, and equipment. The remaining \$325,000 payment to SMMC will be made this month.	FYI
Consent Agenda	Approval of: 1. Hospital Board Meeting Minutes from June 1, 2020.	It was MOVED, SECONDED and CARRIED unanimously to approve all items on the Consent Agenda.

<p>Medical Staff Report Dr. Steve Hassid</p>	<p>Dr. Hassid reported on the solidarity event held on June 19. Many of us expressed a collective need to demonstrate solidarity with the fight for racial justice and the elimination of disparities. Staff and providers came together to organize an opportunity to recognize structural racism as a public health problem and to demonstrate support for the Black Lives Matter movement. The event was held simultaneously at the hospital and clinics and was attended by staff and community members.</p>	<p>FYI</p>
<p>Primary Care Dept. Dr. Sumita Kalra</p>	<p>Telehealth - As Shelter In Place Order went into effect, SMMC introduced and Supported staff and providers to begin Telework. SMMC also initiated a massive transition into Telehealth -- Healthcare services provided by phone, video, or other technology</p> <ul style="list-style-type: none"> • Convenience • Access • Personal Connection • Currently reimbursed at same level as in-person visits <p>Reimagine our work in light of COVID-19</p> <ul style="list-style-type: none"> • Screening continues in order to allow patients to be seen as safely as possible • Social distancing to avoid disease spread • Managing schedule to reduce patient congregation in department waiting rooms – patients should come in and be seen as immediately as possible • Identify physical space barriers to avoid transmission of infectious process • Create options for drive-through car services as an alternative • Continue to use video and telephone visits • Communication and outreach to patients and to share our safety practices <p>Remobilization-Alternative Care</p> <ul style="list-style-type: none"> • COVID-19 Testing for Surgical Patients • In early May, SMMC piloted curbside COVID-19 testing. The original pilot was presented by Dr. Evelyn Haddad test patients who were screened through the clinics and met the testing criteria. • The pilot was successful, and the work has expanded to include pre-op testing for surgery patients, immunizations for pediatric patients, and other services like blood pressure checks. The services have also moved from curbside to a tent located in the front lot at the hospital. <p>Outreach to Patients</p> <ul style="list-style-type: none"> • While clinics are focused on ensuring established patients get the care they need, the New Patient Connection Center (NPCC) is focused on connecting new patients to care. The NPCC initiated an outreach project on June 1st. The goal is to connect with the 4,532 patients who are assigned to SMMC but have not yet been seen, and do not have a medical record number (MRN) in our system, to see if they have an immediate health need we can meet. • Of the 4,532 patients: 	<p>FYI</p>

	<ul style="list-style-type: none"> • 1022 patients were reached by phone. • 70 patients were assigned an MRN with complete profiles and a new patient appointment was made. 	
<p>Compliance and Privacy Report Gabriela Behn</p>	<p>COVID-19 Compliance Topics</p> <ul style="list-style-type: none"> • 1135 Waivers (Public Health Emergency) and the CARES Act • Suspension of the 3-day qualifying inpatient stay for Medicare discharge to Skilled Nursing Facility • Waive sanctions related to physician self-referrals • Streamlining provider enrollment (including out-of-state providers) and delay of reporting deadlines • Various waivers as it relates to Medi-Cal eligibility and access to COVID testing and treatment • Relaxation of HIPAA and Patient Privacy regulations <ul style="list-style-type: none"> ○ Can use technology without HIPAA-compliant contract (Zoom, FaceTime) ○ Can sign documents over the phone, without use of specific platforms • Expansion of Telehealth Regulations <ul style="list-style-type: none"> ○ Overlay of many different regulations and billing guidance ○ Can now bill for telehealth visits for FQHCs, including if providers are conducting visits from home ○ Medi-Cal allows for full reimbursement for audio-only visits; Medicare requires video to get full reimbursement, but partial reimbursement for audio only <p>2020 Privacy Incidents and Breaches: total of 24.</p>	FYI
<p>Financial Report David McGrew, CFO</p>	<p>The May FY19/20 financial report was included in the Board packet and David McGrew answered questions from the Board.</p>	FYI
<p>CEO Report Dr. CJ Kunnappilly</p>	<p>Dr. Kunnappilly presented the CEO report which was included in the Board packet and answered questions from the Board.</p>	FYI
<p>County Health Chief Report Louise Rogers</p>	<p>We are closely following the hospitalization rate in the county. The rate has been impacted by patients who have come from San Quentin prison and are patients at a local hospital.</p> <p>So far, 74,000 COVID-19 tests have been done and the cumulative positive rate is 4.9%. About half of results are from Latinos. The high rate in this community highlights the drastic disparity we have in the county and really brings it to light. Almost 69% of COVID-19 deaths have been from persons living in congregate living environments.</p> <p>Contact tracers are a crucial element in keeping the COVID-19 numbers under control. We started with 30 contact tracers and will ramp up to 115 by August 1. At that time, 230 new cases per day can be traced.</p>	FYI

County Manager	No report.	FYI
Board of Supervisors Supervisor Groom	Supervisor Groom reported that the Board of Supervisors is continuing to look for additional revenue sources and is working on the budget. Thank you to everyone who has been and continue to work through these difficult times.	FYI

Supervisor Groom adjourned the meeting at 9:30 AM. The next Board meeting will be held on August 3, 2020.

Minutes recorded by:



Michelle Lee, Executive Secretary

Minutes approved by:



Dr. Chester Kunnappilly, Chief Executive Officer

TAB 2

**ADMINISTRATION
REPORTS**

BOARD OF DIRECTORS SAN MATEO MEDICAL CENTER

Financial Report: June FY19-20

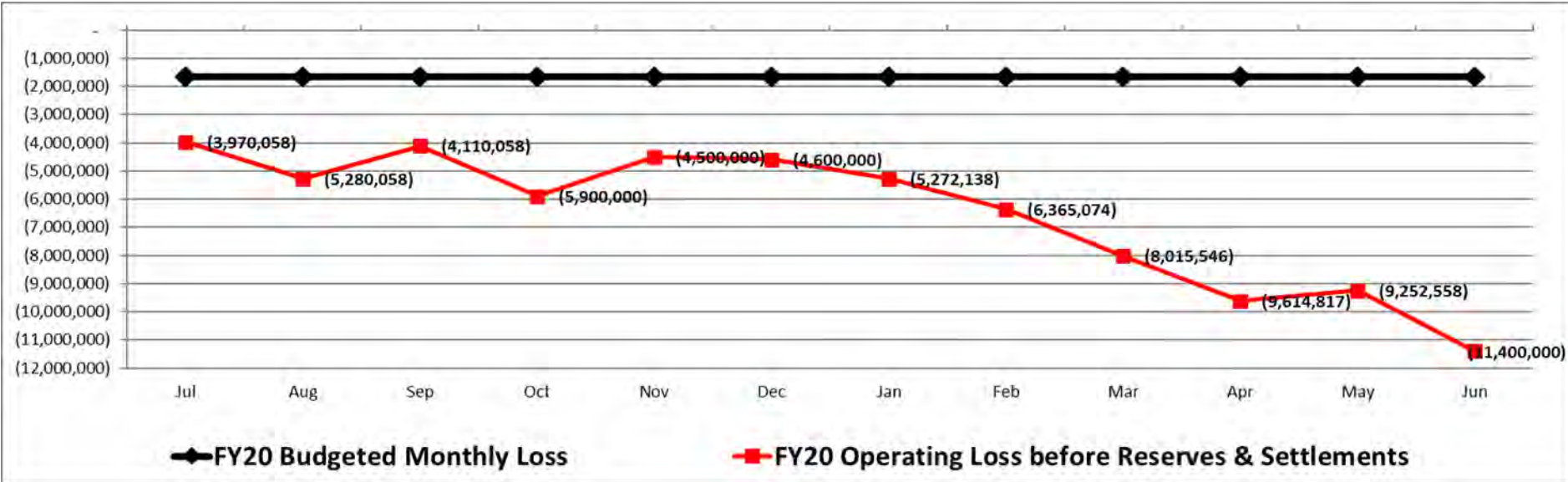
August 3, 2020

Presenter: David McGrew, CFO



SAN MATEO COUNTY HEALTH
**SAN MATEO
MEDICAL CENTER**

Financial Highlights



June Net Income of \$2.0M (Preliminary)

FY19-20 YTD Net Loss of \$19.5M:

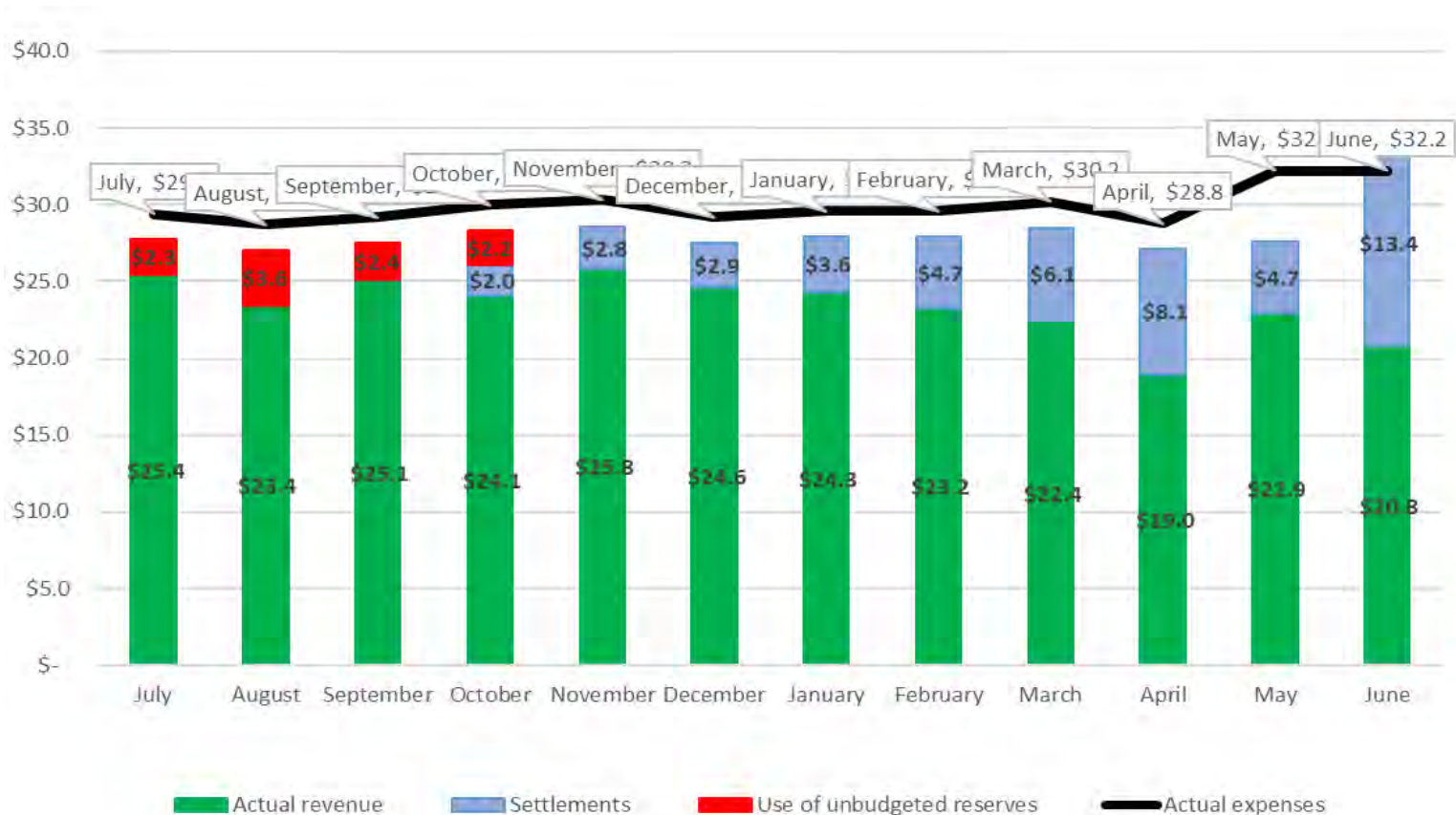
- FTEs below budget
- SNF Appeals Settlement
- Global Payment Program

- ACE outside medical costs
- FY2020 Enhanced Payment Program (EPP) pending CMS approval
- FY17 Realignment
- COVID pandemic

Preliminary Full Year FY20: Although operating losses continued due to the declines in patient volumes and increasing costs resulting from the COVID-19 crisis, several significant one-time settlements pushed the June results to a positive \$2 million and dropped the YTD net loss to \$19.5 million, which is approximately \$1 million better than the budgeted loss. These are preliminary results, pending final County entries and the financial statement audit.

FY 19-20 Structural Deficit

SMMC's structural deficit continues as revenue sources from on-going operations and supplemental programs cannot keep pace with the cost structure. Cost report and supplemental program settlements have partially mitigated these factors for the past 9 months. The COVID-19 crisis is adding to the structural deficit.



Note: Volume %s are Current Month/YTD actuals vs budget

COVID Financial Impact Summary

	March	April	May	June
Revenue loss	\$ 2,376,000	\$ 4,347,000	\$ 4,766,310	\$ 3,545,000
Expenses:				
Staffing	1,622,000	3,758,000	3,840,000	3,061,000
Supplies	114,000	79,000	79,000	280,000
IT	404,000	-	-	-
Total expenses	2,140,000	3,837,000	3,919,000	3,341,000
Total Losses due to COVID	4,516,000	8,184,000	8,685,310	6,886,000

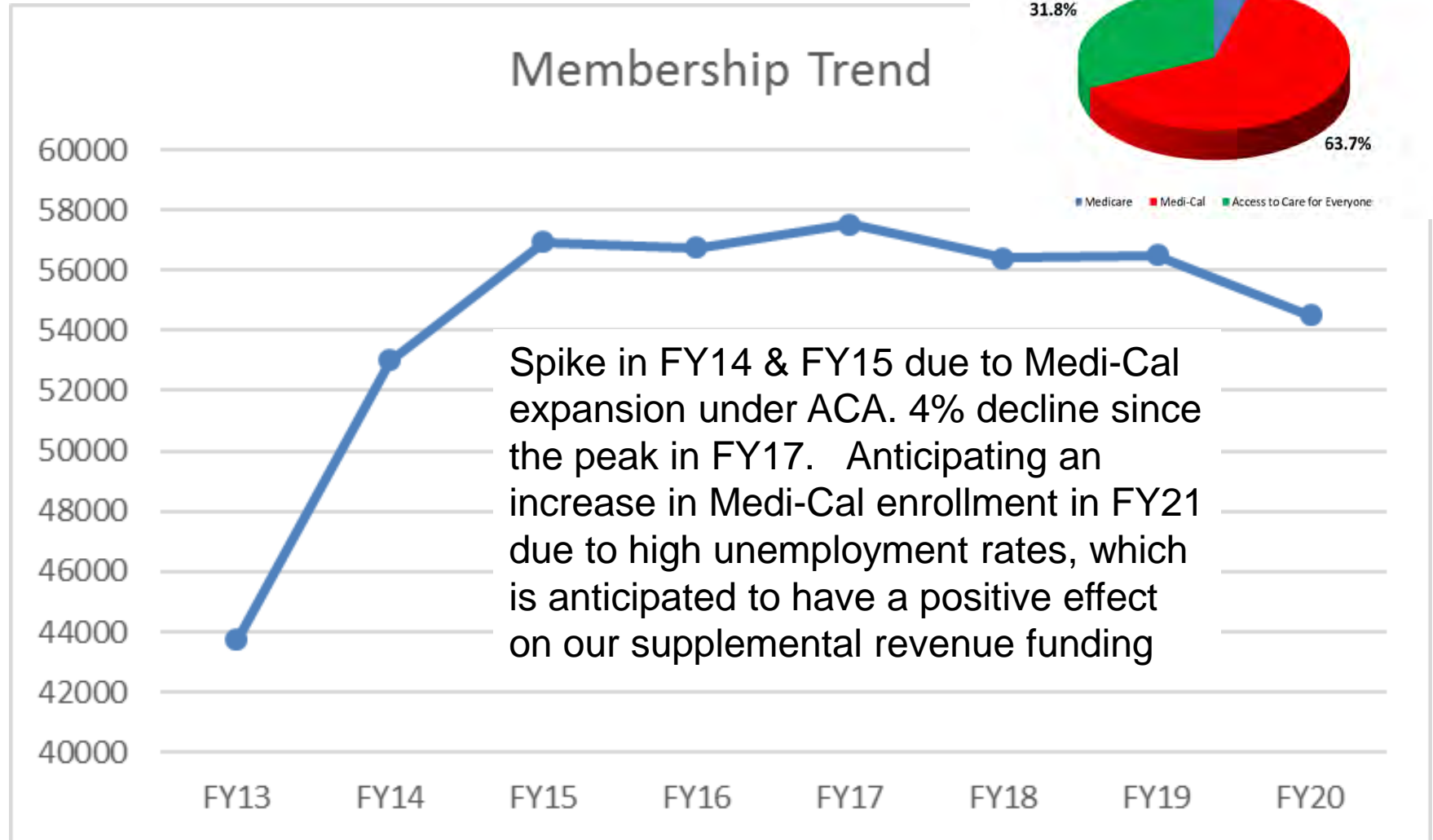
Note: DPW costs for COVID related construction costs are not yet included

Total losses to date
= \$28.3M

COVID-19 Federal Funds - \$13.7M to SMMC

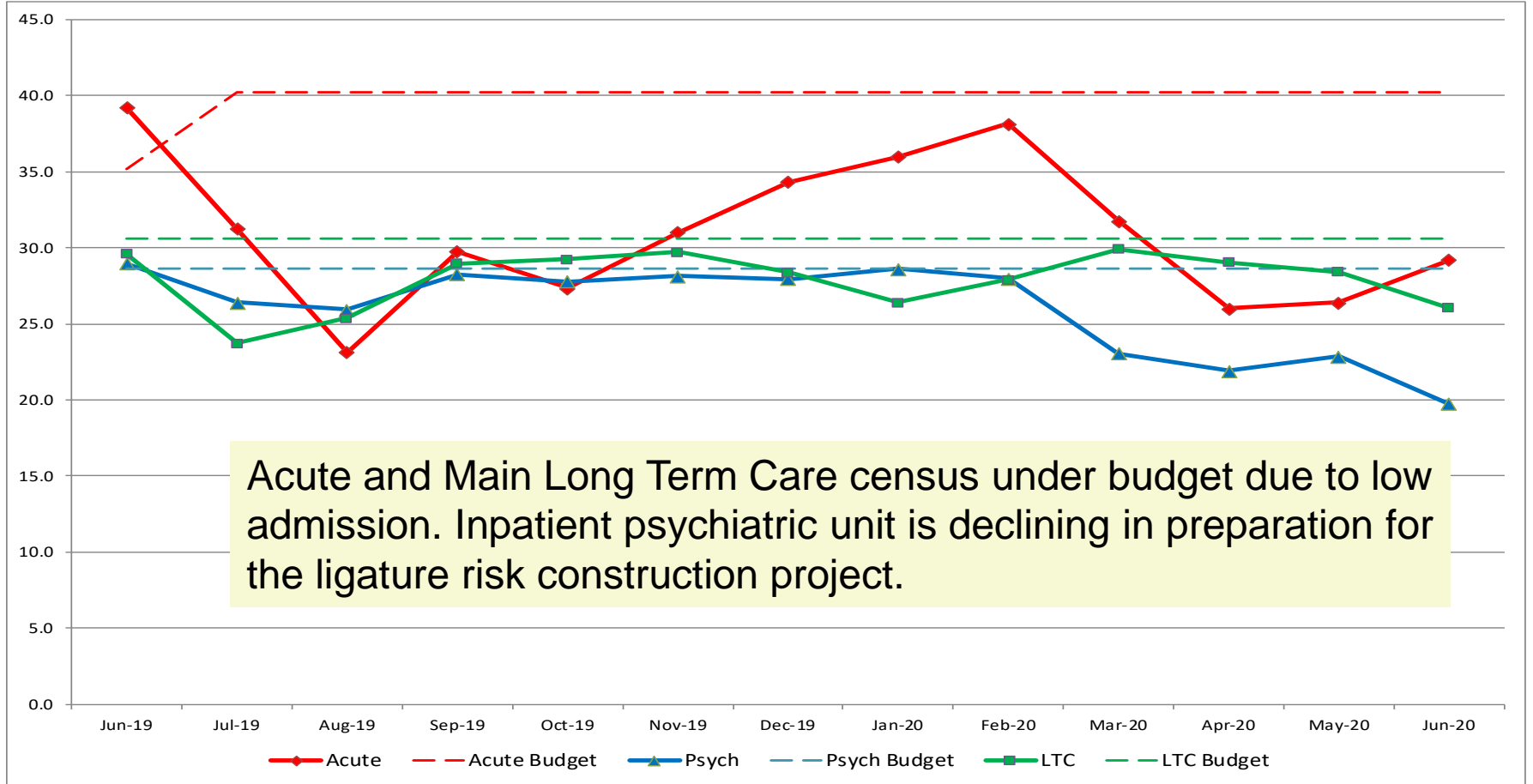
Description	Total Amount Allocated	SMMC \$
<p style="text-align: center;">Provider Relief Fund</p> <p>CARES/HCE Act - \$175 billion</p>	\$50B General Allocations	\$3.5M Received
	\$22B High Impact Providers	\$4.95M Received (July)
	\$11.1B Rural Providers	\$207K Received
	\$4.9B SNFs	\$913K Received
<p>Accelerated Medicare Payments</p> <p>Advance payment for Medicare claims authorized by the CARES Act</p>	Advance Payments	<p>\$3.1M Received</p> <p style="color: red;">Repayment Required</p>
<p>FY2020 CARES Supplemental Fund</p> <p>Funding for supplemental awards to Health Centers with HRSA grants</p>	\$1.32B	\$881K Awarded to Health Care for the Homeless/Farmworkers
<p>FY2020 Coronavirus Supplemental Fund</p> <p>Funding for supplemental awards to Health Centers with HRSA grants</p>	\$100M	\$58K Awarded to Health Care for the Homeless/Farmworkers
<p>State Hospital Association Grants</p> <p>\$50 million</p>	\$4.2M to California Hospitals	\$7.3K Received

Managed Care Membership Trend



San Mateo Medical Center Inpatient Days June 30, 2020

	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
Patient Days	2,249	3,008	(759)	-25%	30,673	36,693	(6,020)	-16%

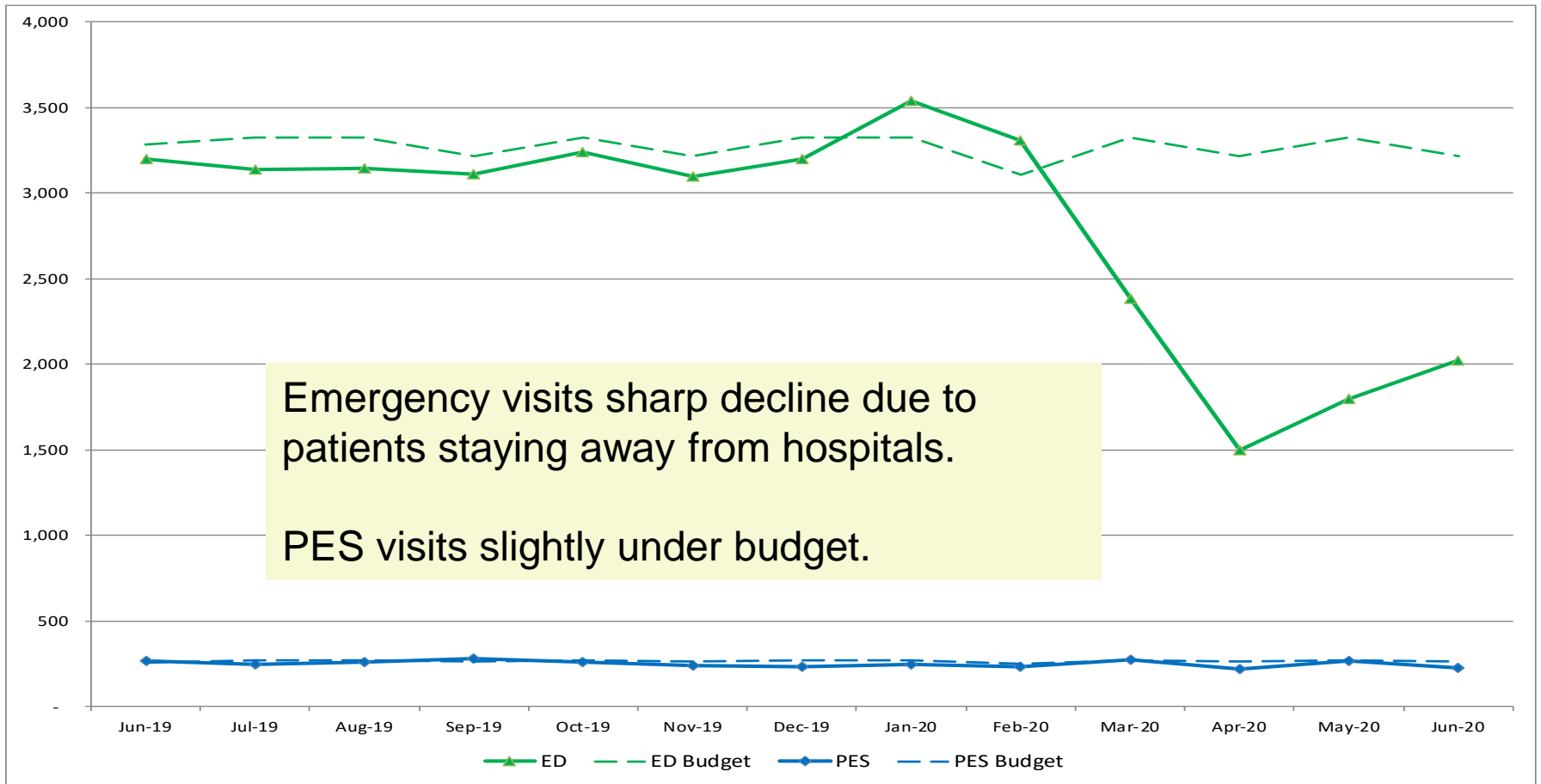


San Mateo Medical Center Emergency Visits June 30, 2020

MONTH			
Actual	Budget	Variance	Stoplight
2,253	3,478	(1,225)	-35%

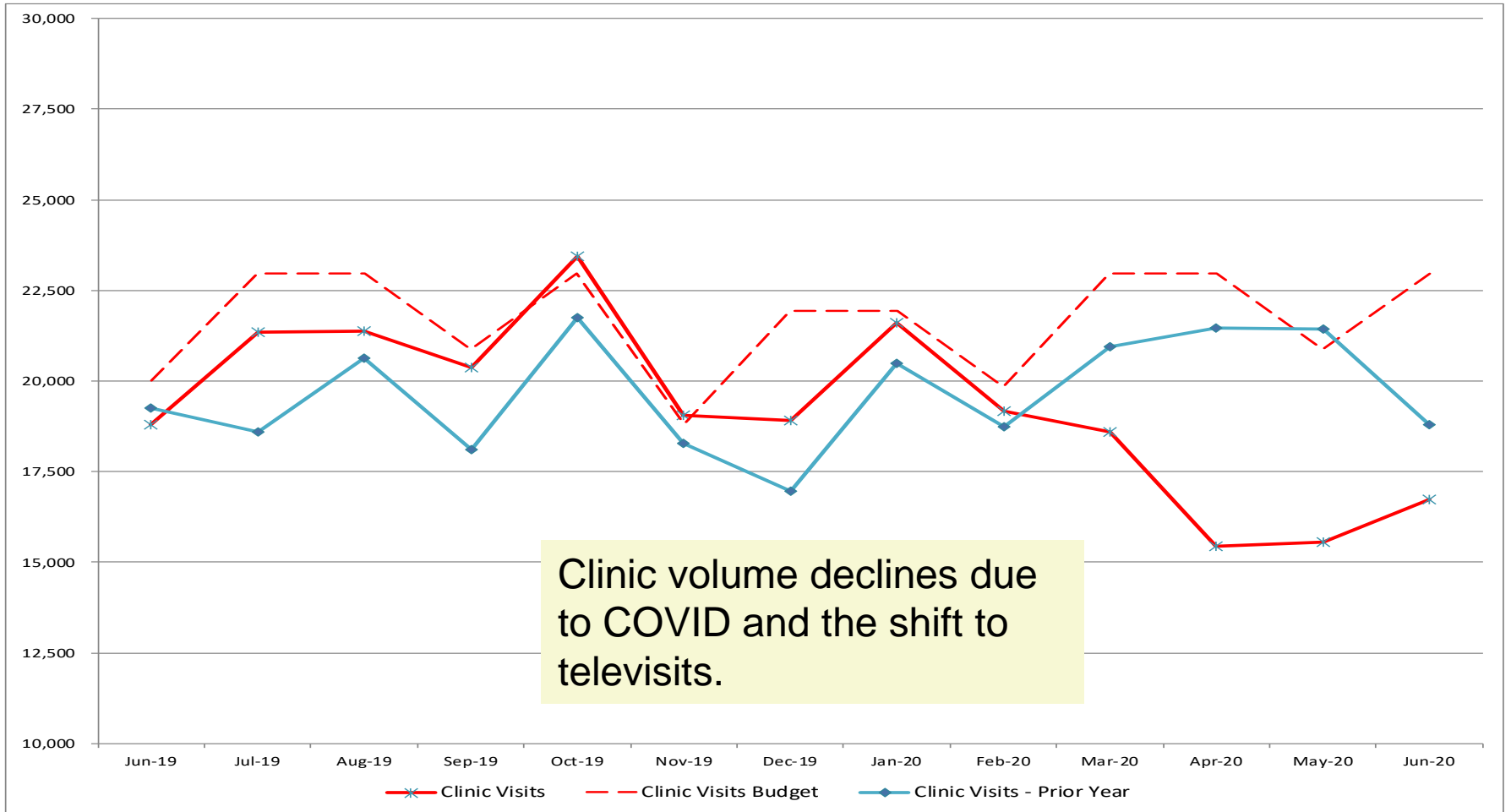
YEAR TO DATE			
Actual	Budget	Variance	Stoplight
36,467	42,432	(5,965)	-14%

ED Visits							
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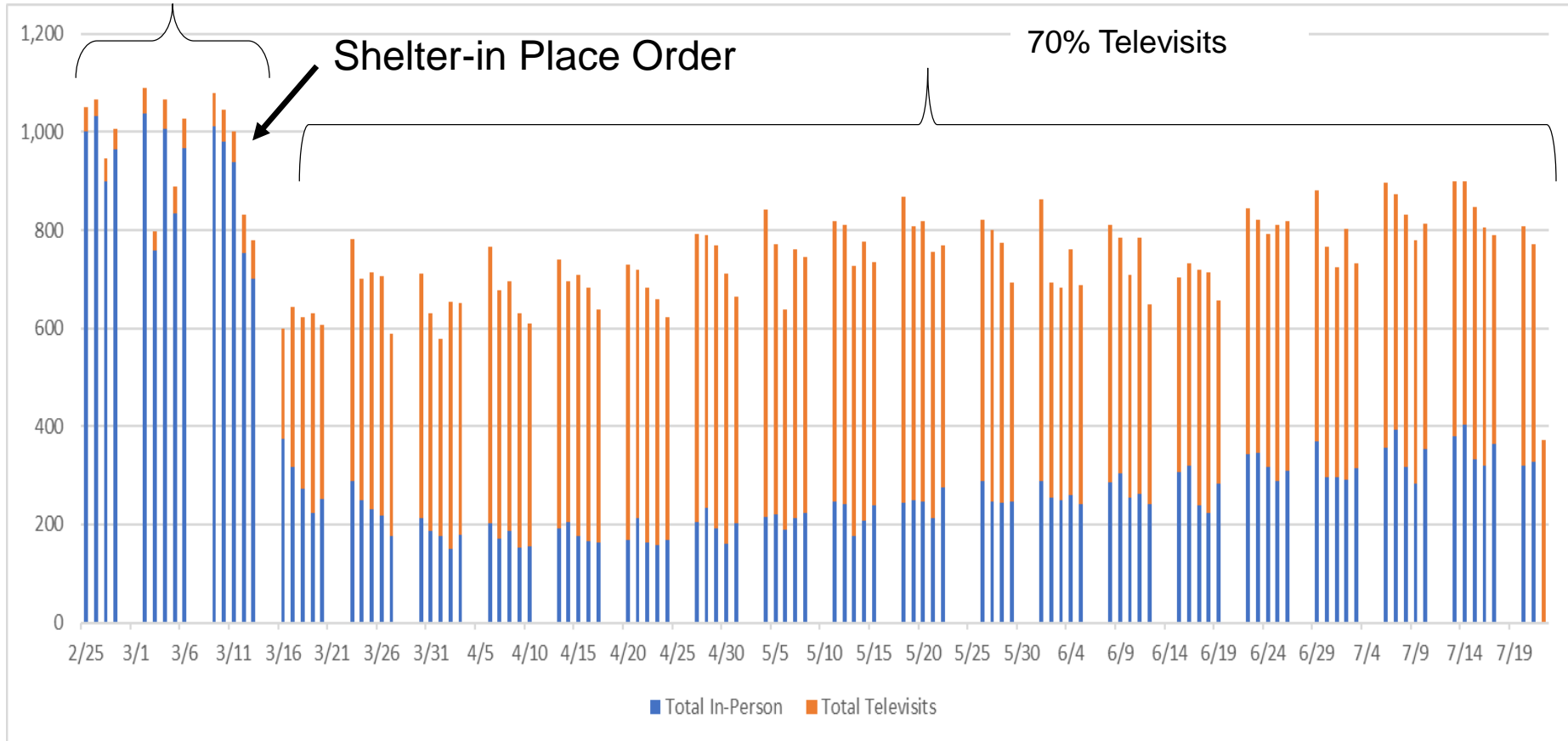
San Mateo Medical Center Clinic Visits June 30, 2020

	MONTH				YEAR TO DATE			
	Actual	Budget	Variance	Stoplight	Actual	Budget	Variance	Stoplight
Clinic Visits	16,718	22,976	(6,258)	-27%	231,603	262,130	(30,527)	-12%



San Mateo Medical Center Clinic Telehealth Visits June 30, 2020

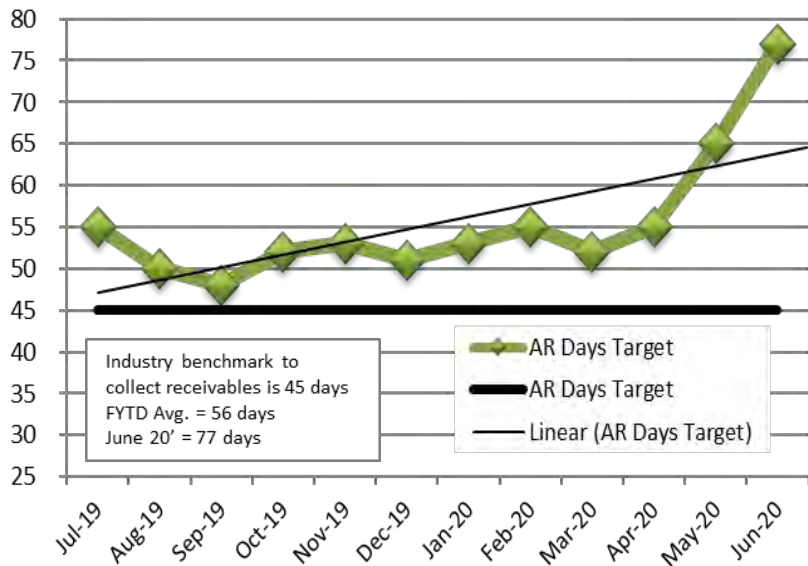
6% Televisits



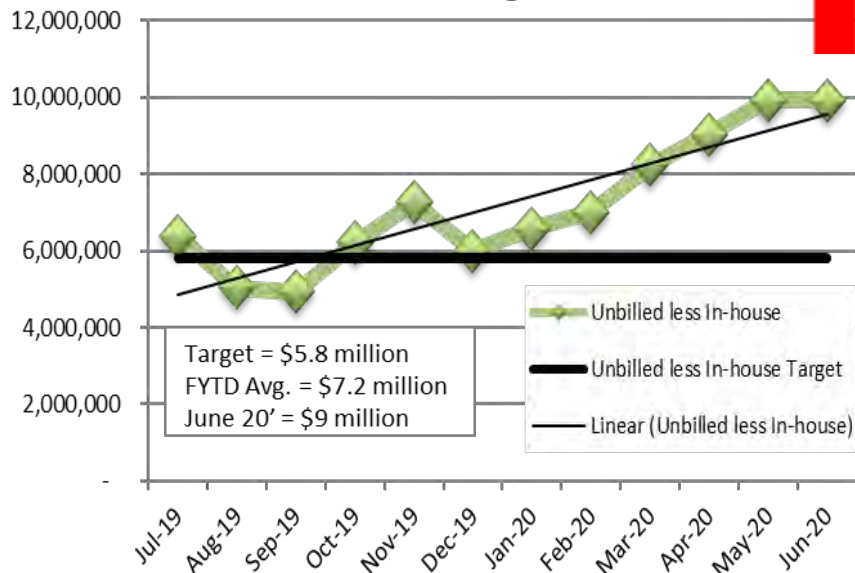
Clinic telehealth visits have increased from an average of 6% of total visits pre-COVID to an average of 70% since March 16th, with a high of 78%

Key Performance Indicators

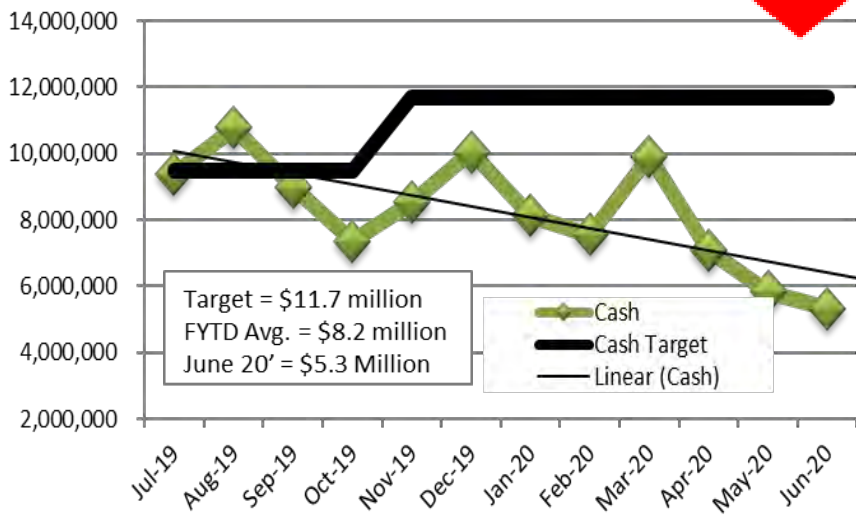
A/R Days - Rolling 12 Months



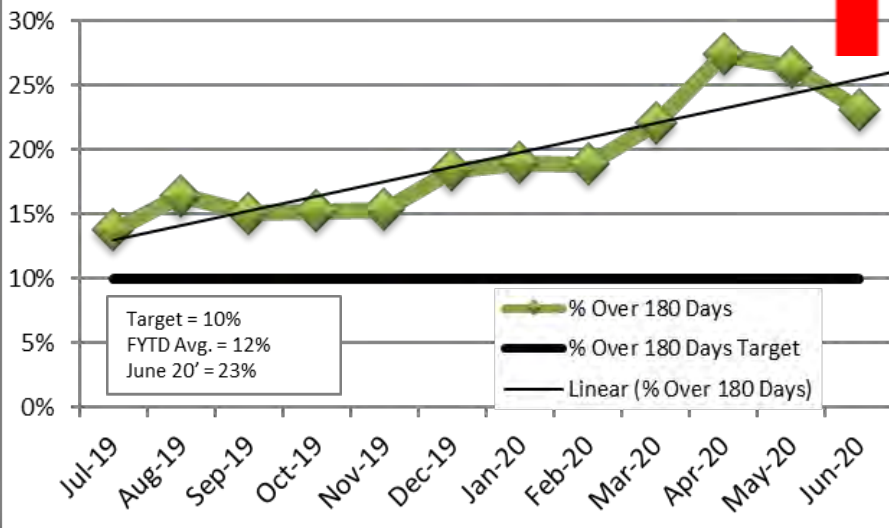
A/R Unbilled - Rolling 12 Months



Cash - Rolling 12 Months

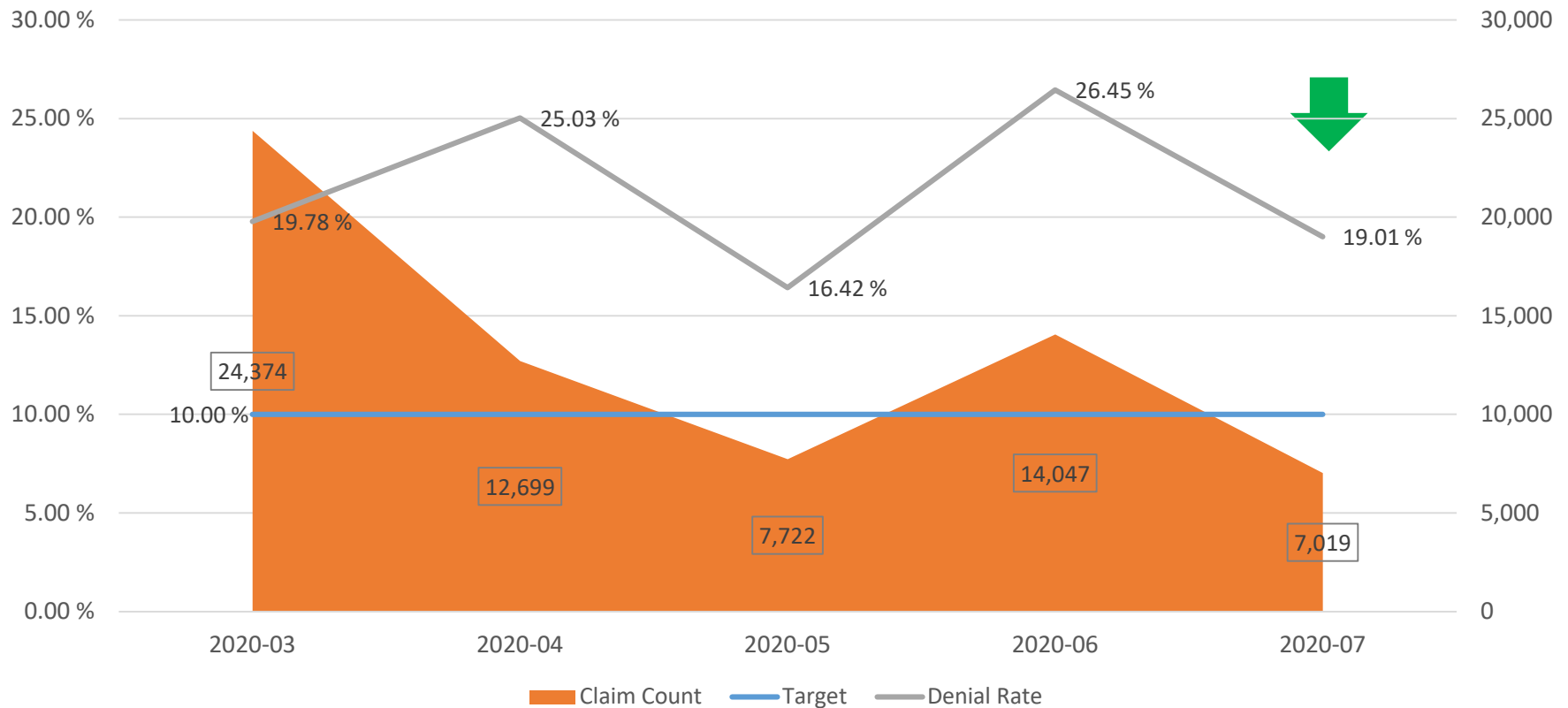


% of A/R Over 180 Days - Rolling 12 Months



Key Performance Indicators

Initial Denial Rate

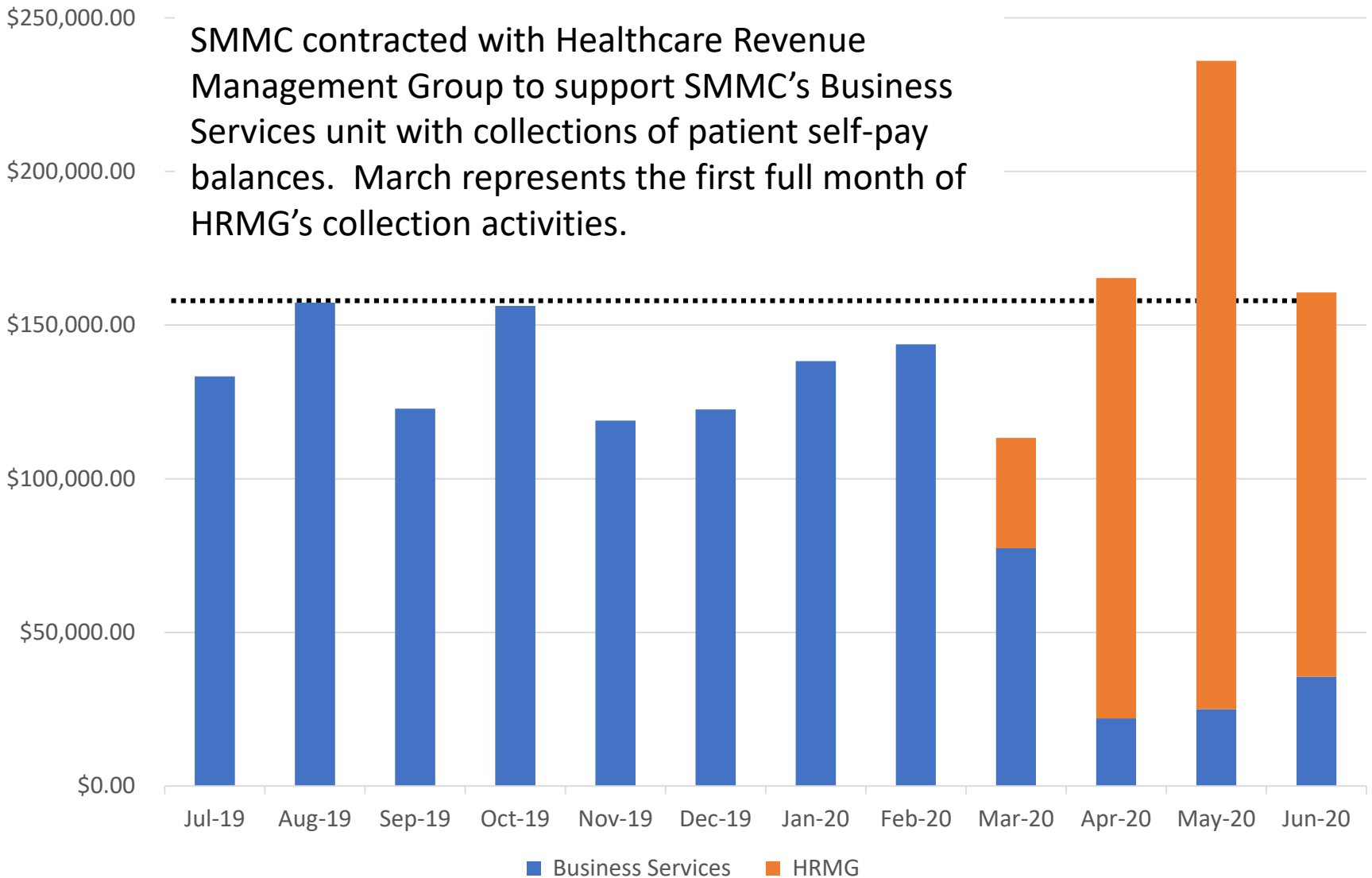


Denials Note:

April Spike: *Attributed to increase in Telehealth related visits as providers adjusted to regulations for patients to “Shelter-in-Place”. Denials discovered through the Denials Management Committee mitigation efforts. To address, the SMMC has implemented bill holds to allow for adequate training and necessary bill correction before submission to the Payer.*

May Dip: *Related to decreased Claim Count seen for May 2020*

June Spike: *Related to the increased claim count in June, with Non-covered services claim category*



..... Target = \$158k/mo



SAN MATEO COUNTY HEALTH

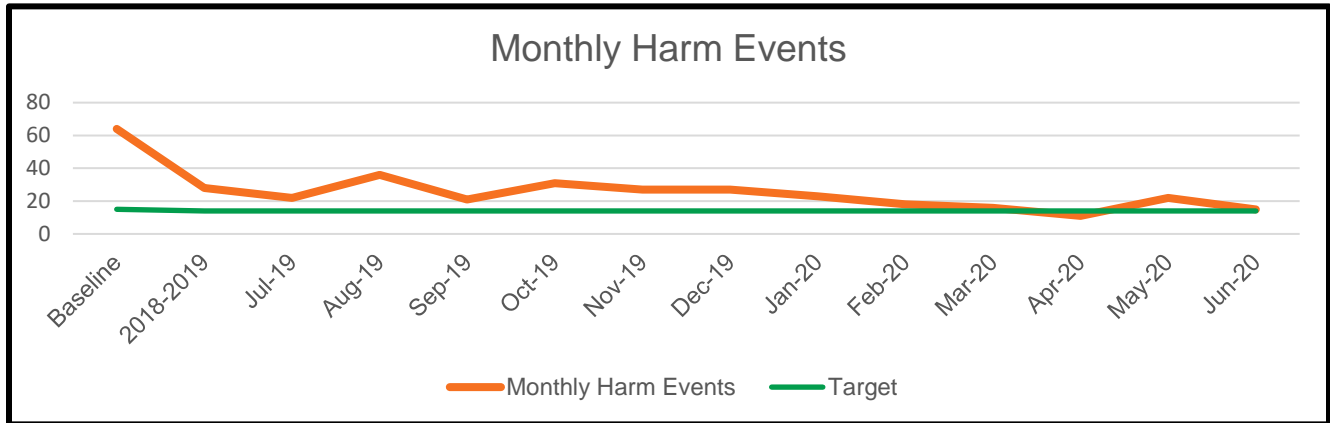
**SAN MATEO
MEDICAL CENTER**

QUESTIONS?

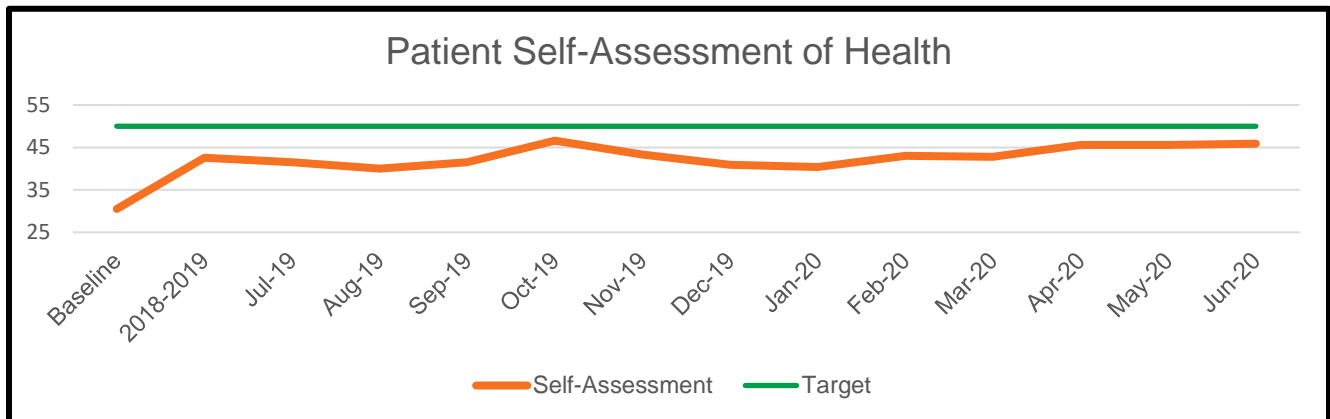
CEO REPORT

August 2020

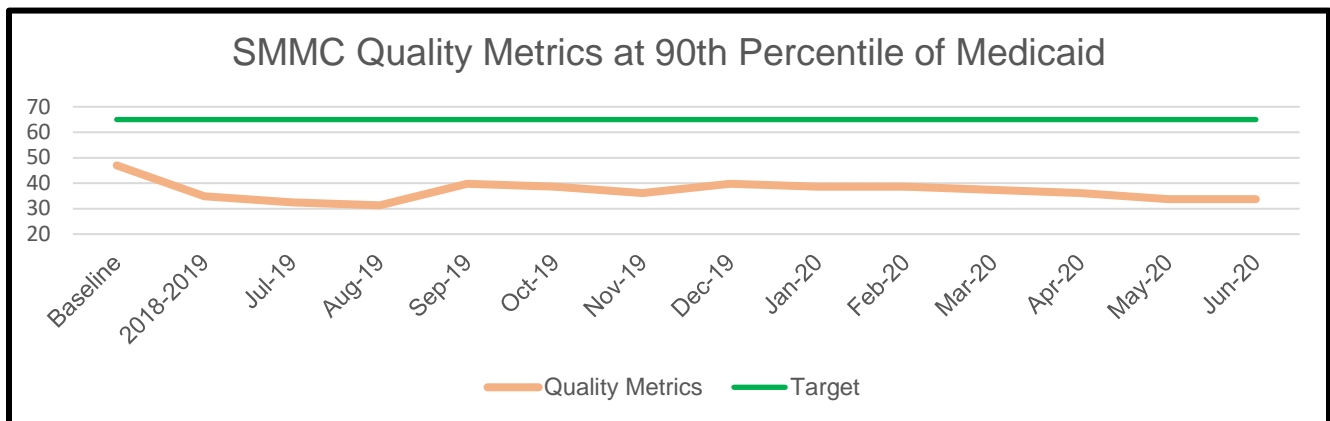
EXCELLENT CARE METRICS



Monthly Harm Events: Measures all instances of patient harm or staff harm including delays in care, falls, medication errors, surgical infections, catheter associated urinary infections, central line associated blood stream infections, other preventable staff and patient injuries. **Lower is better.**

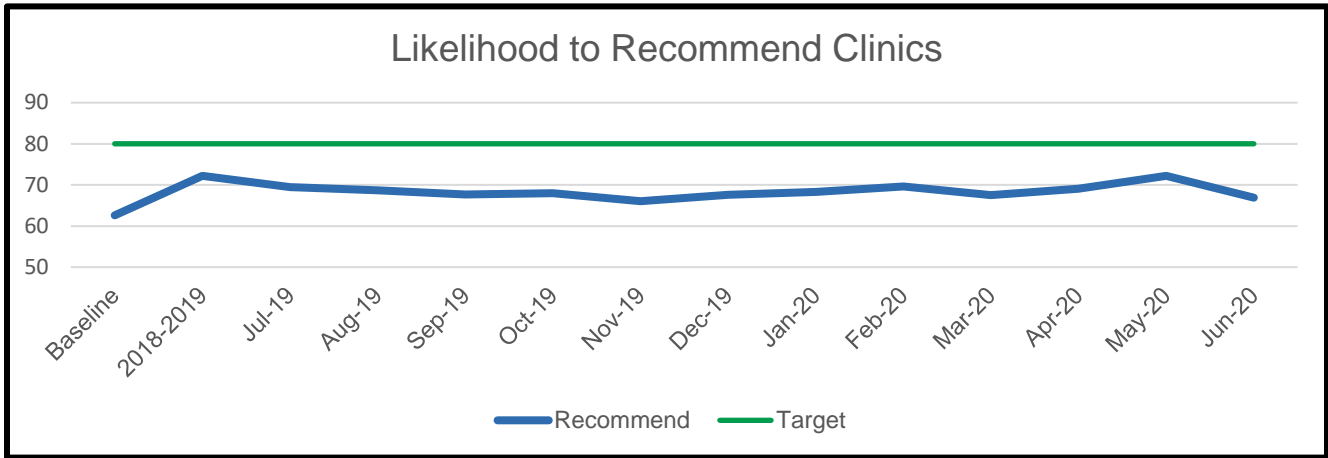


Patient Self-Assessment of Health: All Primary Care patients receive an experience survey. One question asks them to rate their health from poor to excellent. This is the percentage that rate their health as very good or excellent. **Higher is better.**

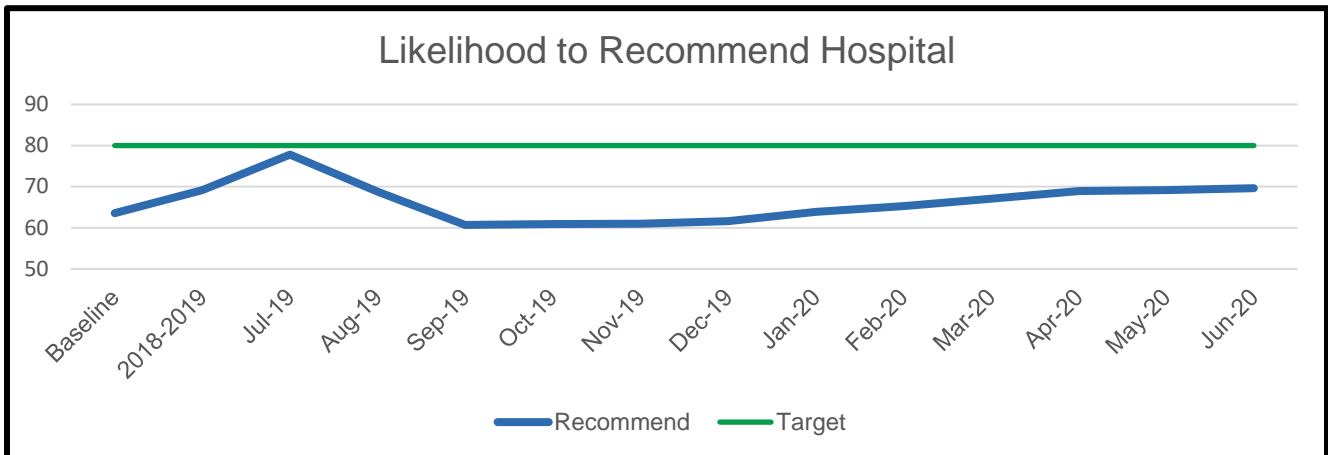


Quality Metrics at 90th Percentile: SMMC seeks excellence in all that it does. The organization currently participates in a number of pay for performance programs including PRIME, QIP and the Health Plan of San Mateo Pay for Performance Program. This metric measures the percentage of quality metrics in which the SMMC performance is equal to or better than the 90th percentile of Medicaid nationally. **Higher is better.**

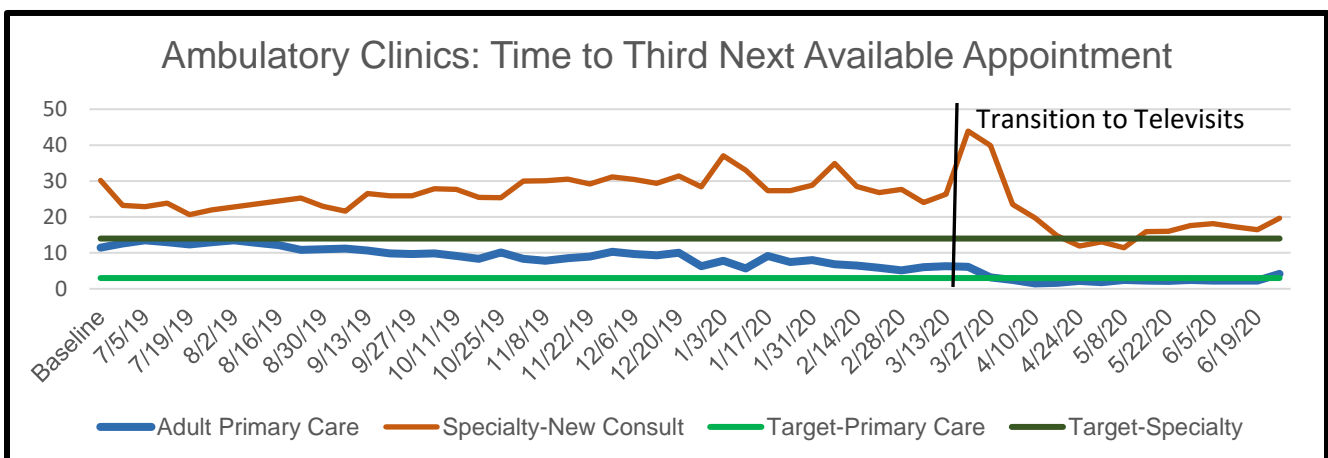
PATIENT CENTERED CARE METRICS



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.**

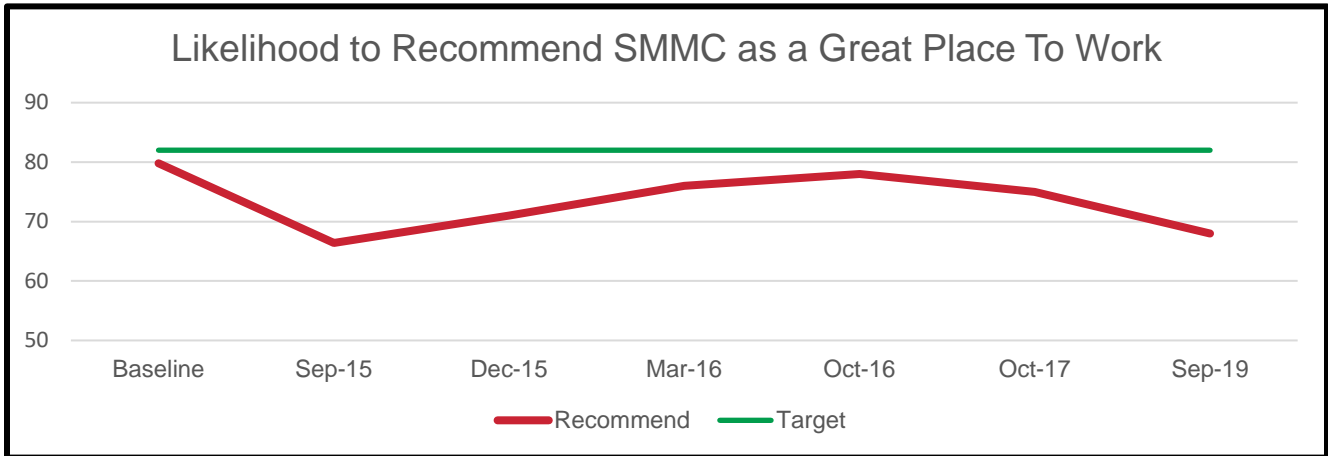


Likelihood to Recommend Hospital: Percentage of patients who gave SMMC the highest score (9 or 10) on the patient experience survey question, “How likely are you to recommend this hospital to friends and family?” **Higher is better.**



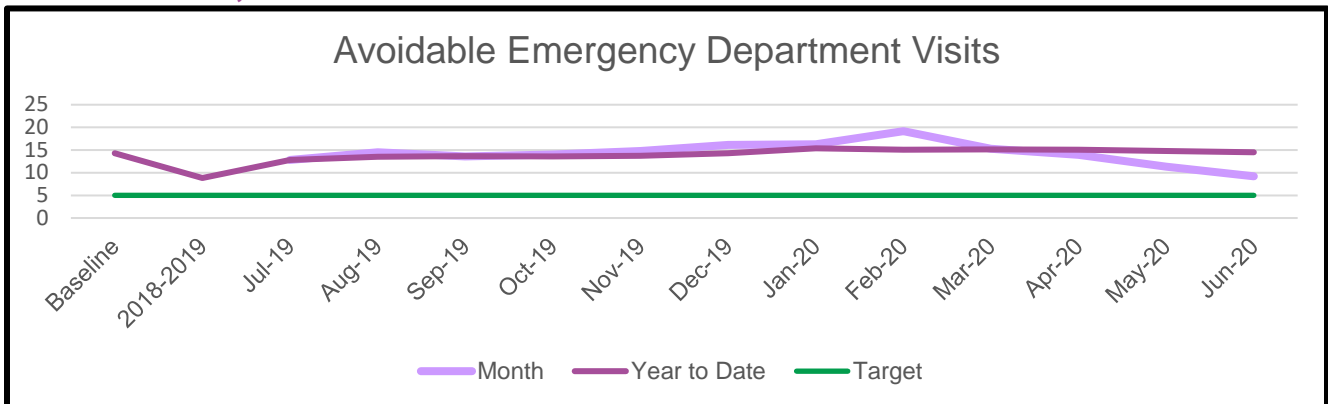
Ambulatory Access: Number of days until the third available appointment for established patients in Primary Care and for new consults in Specialty Services. The third next available appointment is a validated measure of patient access. **Lower is better.**

STAFF ENGAGEMENT METRICS



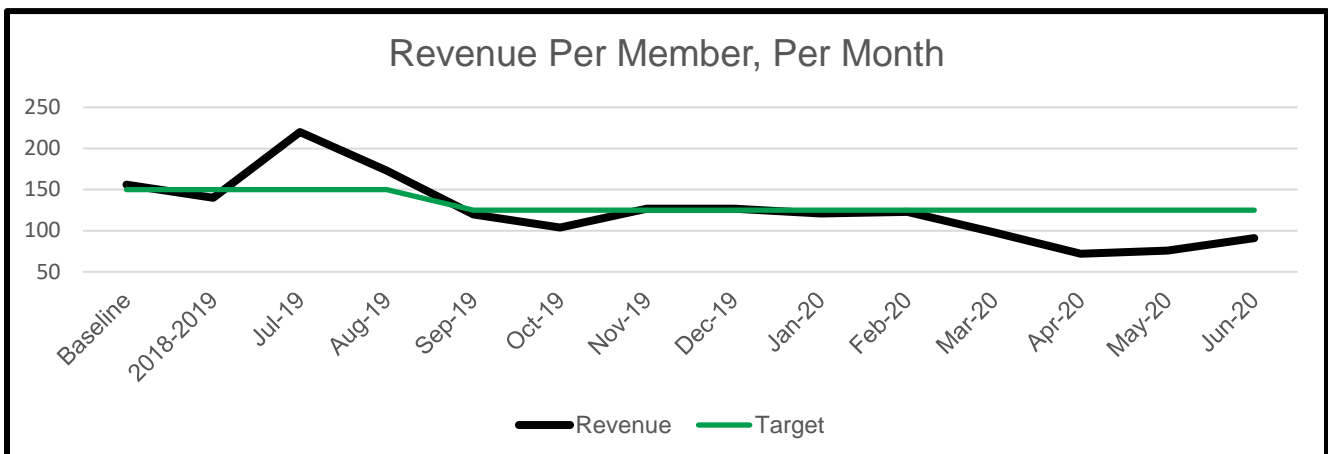
Likelihood to Recommend SMMC: Percentage of staff who agree or strongly agree that they would recommend SMMC as a great place to work. Measured using the annual Blessing White staff engagement survey. **Higher is better.**

RIGHT CARE, TIME AND PLACE METRICS

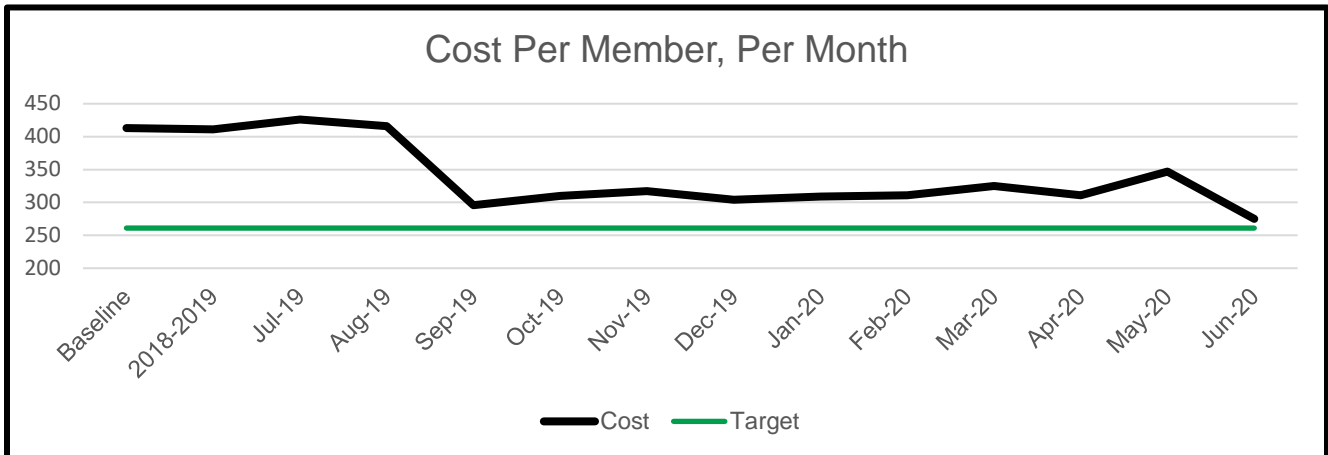


Potentially Avoidable ED Visits: Percentage of emergency department visits by established SMMC primary care patients where the discharge diagnosis is one that traditionally could have been treated in an outpatient setting rather than the emergency department. **Lower is better.**

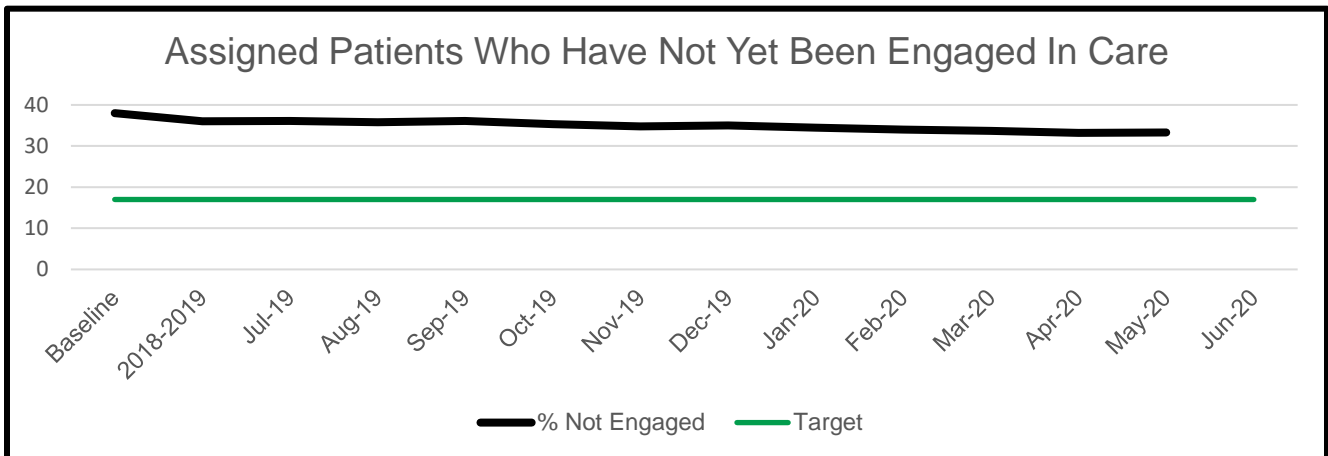
FINANCIAL STEWARDSHIP METRICS



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

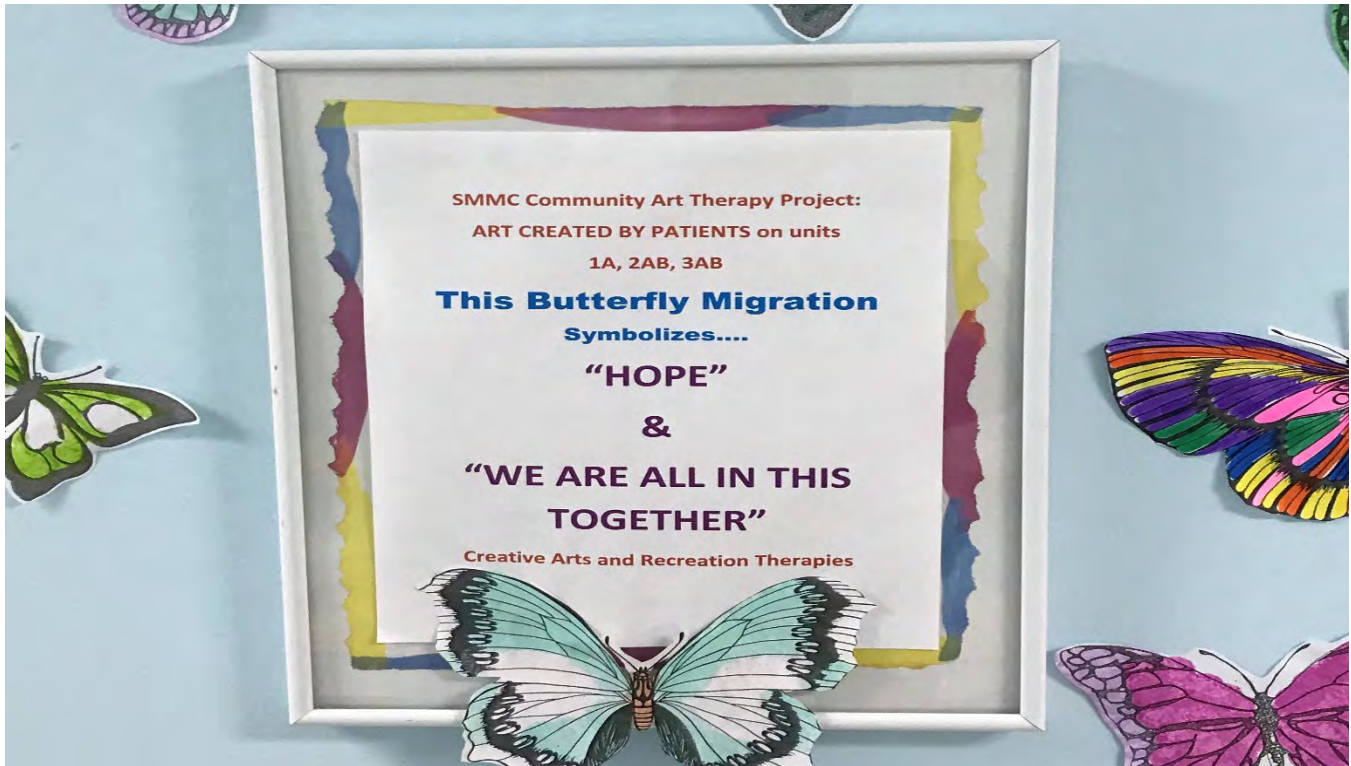


Cost Per Member, Per Month: Total cost divided by total number of assigned members. **Lower is better.**



Assigned But Not Engaged: SMMC has approximately 49,000 patients assigned to it through the Health Plan of San Mateo. This metric measures the percentage of those assigned patients who have not yet engaged in care. **Lower is better.**

STRATEGIC UPDATES, RECOGNITIONS & AWARDS



(Pictured above: The Butterfly Migration greets staff and patients as they enter the 39th Avenue campus through the West Entrance)

SMMC Continues COVID-19 Pandemic Response- SMMC continues to be on the front lines of the COVID 19 Pandemic. Emergency Department volumes are increasing overall and we have also seen an incremental increase in the percentage of ED visits potentially related to COVID-19 (10-12% of all ED visits). We are also seeing an increase in the daily census of patients on our medical surgical ward with about 1/3rd of all admitted patients being tested for or having confirmed COVID-19. We are grateful that as of this writing, our ICU, while busy, has not seen a significant increase in COVID related admissions.

We are also grateful to all the SMMC providers and staff who have kept us on the forefront of COVID-19 treatment. SMMC was an early participant in studies that provided our patients with access to Remdesivir long before many other California Hospitals. In July, we provided convalescent plasma therapy (treating an acutely infected patient with blood products/antibodies from someone who has already recovered from COVID-19) to a COVID-19 patient for the first time. As new approaches and treatments are identified and found to be effective, we will look forward to ensuring that our patients have access to them.

Even as we deal with the current challenges, we continue our preparation for the fall when the onset of the flu season will likely complicate things further. SMMC is preparing to participate, with its partners, in an aggressive flu vaccination campaign this year. This will be critical to keeping our community healthy and minimizing potential surges.

SMMC Continues Remobilization Efforts -SMMC continues to move forward with its remobilization efforts in order to meet the needs of its clients. Our number one priority during this work is ensuring the safety of patients and staff as we remobilize. In July we saw an overall 10% increase in Ambulatory volumes compared to June 2020. The majority of those visits were provided by telehealth modalities, but we are doing more in-person visits when indicated by patient need. Between July 1st and July 24th, we were able to provide 87 outpatient surgeries. Endoscopy services have also begun to slowly start back up.

Much of our remobilization effort has required a rethinking of our workflows: from telehealth to pre-procedure COVID testing to patient flow through our facilities to schedule changes to avoid congestion. I appreciate that we are learning more every day about how we can do this really well and everyone is extremely invested in the continuous improvement necessary to get there.

In addition to the workflow changes, we are also implementing physical changes to promote social distancing and provide barriers such as Plexiglas that promote safety. We will look forward to continuing to update the board as our remobilization efforts move forward.

Dr. James Meier Retires After Fifty Years at San Mateo Medical Center- On July 1, 2020, Dr. James Meier of OB/GYN retired from his practice. Dr. Meier started at SMMC exactly **50** years prior on July 1, 1970. He has served the medical center and medical staff in a variety of ways over the years. He has served, at various times, as the Chair of OB/GYN, Vice President of the Medical Staff and President of the Medical Staff. He has been a member of the Hospital Board and the San Mateo County Health Foundation Board. He has also been a Clinical Professor at Stanford during his time with SMMC. We are deeply grateful to Dr. Meier for all his years of service at SMMC. There have been some private celebrations, but we will look forward to publicly celebrating him when the Pandemic allows.

SNAPSHOT: San Mateo County Health

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

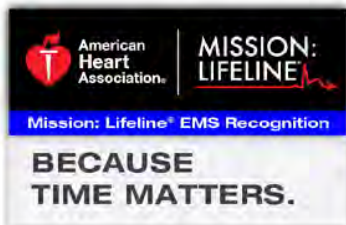
INDICATOR	NUMBER	CHANGE FROM PREVIOUS MONTH	CHANGE FROM PREVIOUS YEAR
ACE Enrollees	22,339 (June 2020)	2.03%	0%
SMMC Emergency Department Visits	2,253 (June 2020)	9.3%	-35%
New Clients Awaiting Primary Care Appt.	1 (June 2020)	-825%	-9.9%

Implementing Racial Equity in County Health



On July 15th County Health held a web forum on *Implementing Racial Equity in County Health*, with over 250 participants that included County Health staff and contracted partners. Participants had a chance to learn about what County Health was currently doing to advance racial equity from Srijia Srinivasan, Deputy Chief; learned from racial equity work through Dr. Jei Africa, Director of Behavioral Health and Recovery Services in Marin, and; shared ideas for additional efforts County Health should advance. The recording, power point and pre-work can be accessed at: <http://www.gethealthysmc.org/post/implementing-racial-equity-county-health>.

San Mateo County EMS Received First Gold Award Recognition



The American Heart Association Mission: Lifeline EMS recognition is a program designed to showcase Emergency Medical Service (EMS) organizations across the nation for excellent STEMI care (emergency cardiac care). Prehospital personnel are the first providers of care to patients suffering from cardiac emergencies. The role of EMS in the system-of-care for these patients is crucial and often sets the course for the patient's outcome. The recognition is on behalf of the entire local EMS system, including American Medical Response, the Joint Powers Agencies and South San Francisco Fire. This is San Mateo County's first Gold award recognition. We have performed at the Silver award level for the past several years.

Great Plates Delivered Program Continues with Great Success



Currently there are 57 restaurants providing meals to about 1,680 participants enrolled in the Great Plates Delivered (GPD) program. The program has been extended to August 9th. The following quotes are from local participating restaurants that illustrate the positive impact of the program with our senior residents and our local economy:

- **It's Italia (Half Moon Bay)** - *“Thanks GPD so much. It's been better than we expected. An additional income stream that help us keep about 7-8 employees. It has also been such a joy to do this for seniors. Every single one of my drivers have discovered a new light in their life and joy in serving seniors. We are dedicated to keeping people safe, staff and guests.”*
- **Alice's Restaurant (Woodside)** - *“I have been able to get all participants' blood sugar down. One client has reduced blood sugar from 200+ to 108.”*