



AGENDA

REGULAR MEETING OF THE BOARD OF DIRECTORS

Tuesday, April 7, 2020 – 4:30 pm

IN AN EFFORT TO PREVENT THE SPREAD OF COVID-19 (CORONAVIRUS), AND IN ACCORDANCE WITH THE GOVERNOR'S EXECUTIVE ORDER N-29-20, THERE WILL BE NO PUBLIC LOCATION FOR ATTENDING THIS BOARD MEETING IN PERSON. MEMBERS OF THE PUBLIC MAY LISTEN TELEPHONICALLY BY CALLING THE FOLLOWING NUMBER:

Call in number: 1-510-338-9438
Access Code: 625 698 624

THE TELEPHONES OF ALL MEMBERS OF THE PUBLIC LISTENING IN ON THIS MEETING MUST BE "MUTED".

In compliance with the Americans with Disabilities Act, if you need special assistance to participate in this meeting, please contact the Administration Office at (951) 769-2160. Notification 48 hours prior to the meeting will enable the Hospital to make reasonable arrangement to ensure accessibility to this meeting. [28 CFR 35.02-35.104 ADA Title II].

TAB

- I. Call to Order S. DiBiasi, Chair
- II. Public Comment

Members of the public who wish to comment on any item on the agenda may submit comments by emailing publiccomment@sgmh.org on or before 1:00 PM on Tuesday, April 7, 2020, which will become part of the board meeting record.

OLD BUSINESS

- III. *Proposed Action - Approve Minutes S. DiBiasi A
- March 3, 2020 regular meeting

NEW BUSINESS

- IV. Healthcare District Board meeting report - informational D. Tankersley verbal
- V. Hospital Board Chair monthly report S. DiBiasi B

San Geronio Memorial Hospital
Board of Directors Regular Meeting
April 7, 2020

- VI. April, May, and June Board/Committee meeting calendars S. DiBiasi C
- VII. CEO monthly report S. Barron verbal
• COVID-19 pandemic
- VIII. * **Proposed Action – Approve Resolution #2020-01** S. DiBiasi D
Resolution of the Board of Directors of the San Geronio Memorial Hospital Declaring a Local Emergency
▪ **ROLL CALL**
- IX. * **Proposed Action – Approve Resolution #2020-02** S. Barron E
Resolution of the Board of Directors of the San Geronio Memorial Hospital authorizing Mr. Joey Hunter or Mr. Frank Ussery to execute For and on behalf of the Hospital for the purpose of obtaining state Financial assistance provided by the State of California for the Grant Award: FY2019 California State Nonprofit Security Grant Program
▪ **ROLL CALL**
- X. Bi-monthly Business Development/Information Technology report F
- XI. Foundation monthly report G
- XII. Committee Reports:
• Finance Committee O. Hershey H
* **Proposed Action – Approve February 2020 Financial Statement**
▪ **ROLL CALL**
- XIII. Community Benefit events/Announcements/
and newspaper articles S. DiBiasi I

***** ITEMS FOR DISCUSSION/APPROVAL IN CLOSED SESSION** S. DiBiasi

- Proposed Action - Approve Medical Staff Credentialing
(Health & Safety Code §32155; and Evidence Code §1157)

ALL BOARD MEMBERS CALL IN TO SEPARATE CLOSED SESSION CONFERENCE LINE

XIV. ADJOURN TO CLOSED SESSION

*** The Board will convene to the Open Session portion of the meeting approximately 2 minutes after the conclusion of Closed Session.**

RECONVENE TO OPEN SESSION

***** REPORT ON ACTIONS TAKEN DURING CLOSED SESSION**

S. DiBiasi

XV. Future Agenda Items

XVI. **ADJOURN**

S. DiBiasi

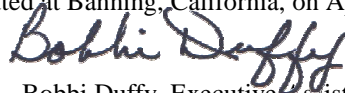
***Action Required**

In accordance with The Brown Act, *Section 54957.5*, all public records relating to an agenda item on this agenda are available for public inspection at the time the document is distributed to all, or a majority of all, members of the Board. Such records shall be available at the Hospital Administration office located at 600 N. Highland Springs Avenue, Banning, CA 92220 during regular business hours, Monday through Friday, 8:00 am - 4:30 pm.

Certification of Posting

I certify that on April 3, 2020, I posted a copy of the foregoing agenda near the regular meeting place of the Board of Directors of San Gorgonio Memorial Hospital, and on the San Gorgonio Memorial Hospital website, said time being at least 72 hours in advance of the regular meeting of the Board of Directors
(*Government Code Section 54954.2*).

Executed at Banning, California, on April 3, 2020



Bobbi Duffy, Executive Assistant

TAB A

REGULAR MEETING OF THE
 SAN GORGONIO MEMORIAL HOSPITAL
 BOARD OF DIRECTORS

March 3, 2020

The regular meeting of the San Gorgonio Memorial Hospital Board of Directors was held on Tuesday, March 3, 2020 in Modular C meeting room, 600 N. Highland Springs Avenue, Banning, California.

Members Present: Lynn Baldi, Phillip Capobianco III, Steve Cooley, Susan DiBiasi (Chair), Andrew Gardner, Ehren Ngo, Ron Rader, Steve Rutledge, Georgia Sobiech, Lanny Swerdlow, Dennis Tankersley

Absent: Olivia Hershey, Estelle Lewis

Required Staff: Steve Barron (CEO), Pat Brown (CNO), Annah Karam (CHRO/Corporate Compliance), Dave Recupero (CFO), Holly Yonemoto (CBDO), Steven Hildebrand, MD (Chief of Staff), Valerie Hunter (Director, Foundation), Pat Ziegler (Director, Performance Improvement), Bobbi Duffy (Executive Assistant)

AGENDA ITEM		ACTION / FOLLOW-UP
Call To Order	Chair Susan DiBiasi called the meeting to order at 5:01 pm.	
Public Comment	None.	
Presentation to outgoing Board member	Chair DiBiasi noted that this would be the last meeting for Board member Georgia Sobiech as she will be moving out of the country. Chair DiBiasi presented a plaque of appreciation to Georgia thanking her for her service to the Board. Georgia stated that she has thoroughly enjoyed her time serving on the board.	
OLD BUSINESS		
Proposed Action - Approve Minutes February 4, 2020 regular meeting and the February 22, 2020 special Strategic Planning session	<p>Chair DiBiasi asked for any changes or corrections to the minutes of the February 4, 2020 regular meeting and the February 22, 2020 special Strategic Planning session as included on the board tablets.</p> <p>There were none.</p>	The minutes of the February 4, 2020 regular meeting and the February 22, 2020 special Strategic Planning Session will

AGENDA ITEM		ACTION / FOLLOW-UP
		stand correct as presented.
NEW BUSINESS		
Healthcare District Board report - informational	Healthcare District Board Chair Dennis Tankersley, reported that a copy of the Healthcare District’s meeting agenda and enclosures were included on the board tablets. He reviewed the actions taken at that meeting.	
Hospital Board Chair report	Chair DiBiasi noted that her written monthly report was included on the board tablets.	
Calendars	Calendars for March, April, and May were included on the board tablets and “take home” copies were at each board member’s seat.	
CEO Monthly report	<p>Steve Barron reported that February was a busy month with ED visits and that all hospitals were very busy. He said that we had twice as many ED visits as 10 years ago.</p> <p>Steve reported that we are starting the budget process for next year. In addition, there has been lots of IT training going on and we still plan on going live July 8th.</p> <p>Steve reported that we are working on finishing the community needs action plan and updating the Vision and Value statement as discussed at the Board retreat. He will make a presentation at the next board meeting.</p> <p>Steve reported that we are working on the grant that was discussed at the Board retreat and will submit the paperwork in April and hope to hear back by mid-summer.</p>	
Bi-Monthly Patient Care Services report	Chief Nursing Officer Pat Brown briefly reviewed her written report as included on the Board tablets.	
Foundation monthly report	<p>Foundation Director, Valerie Hunter briefly reviewed her written report as included on the Board tablets.</p> <p>Steve Barron asked all board members to attend and support the Foundation’s Gala.</p>	

AGENDA ITEM		ACTION / FOLLOW-UP												
	There was a discussion regarding the current health issues in the news.													
Proposed Action – Discussion/ Approval of anesthesia agreement	Steve Barron reported that this item is not yet ready for the Board to review and/or approve.													
COMMITTEE REPORTS:														
Ad Hoc Affiliation Committee	<p>Chair DiBiasi reported that she, Lynn Baldi, Estelle Lewis and Steve Barron recently met with representatives from Redlands Community Hospital (RCH). It was discussed that we are not in a position to further discuss any affiliation, but that there are opportunities that may become available to work on jointly. Steve Barron reported that there are several potential areas of collaboration that would be of interest between SGMH and RCH.</p> <p>In response to a question regarding the telehealth neurology, Pat Brown reported that doctors are currently being credentialed and trained. We hope to have the program up and running April 15th.</p>													
Human Resources Committee	At the request of Hospital Board Chair Susan DiBiasi, Annah Karam noted that a copy of the February 19, 2020 meeting minutes and the reports reviewed at that meeting were included on the Board tablets.													
Finance Committee Proposed Action – Approve January 2020 Financial Statement	<p>At the request of Hospital Board Chair Susan DiBiasi, Dave Recupero, Chief Financial Officer, briefly reviewed a handout Executive Summary along with the January 2020 Financial report which was included on the board tablet. A copy of the Finance Committee’s February 25, 2020 meeting minutes were also included on the board tablet. It was noted that the Finance Committee recommends approval of the January 2020 Financial report as presented.</p> <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="467 1780 1268 1890"> <tbody> <tr> <td>Baldi</td> <td>Yes</td> <td>Capobianco</td> <td>Yes</td> </tr> <tr> <td>Cooley</td> <td>Yes</td> <td>DiBiasi</td> <td>Yes</td> </tr> <tr> <td>Gardner</td> <td>Yes</td> <td>Hershey</td> <td>Absent</td> </tr> </tbody> </table>	Baldi	Yes	Capobianco	Yes	Cooley	Yes	DiBiasi	Yes	Gardner	Yes	Hershey	Absent	M.S.C., (Rader/ Ngo), the SGMH Board of Directors approved the January 2020 Financial report as presented.
Baldi	Yes	Capobianco	Yes											
Cooley	Yes	DiBiasi	Yes											
Gardner	Yes	Hershey	Absent											

AGENDA ITEM					ACTION / FOLLOW-UP																												
	Lewis	Absent	Ngo	Yes																													
	Rader	Yes	Rutledge	Yes																													
	Sobiech	Yes	Swerdlow	Yes																													
	Tankersley	Yes	Motion carried.																														
<p>Proposed Action – Approve WIPFLI, LLP as new audit firm</p>	<p>Chair DiBiasi noted that the Ad Hoc Audit Selection Committee sent out RFPs to a number of potential organizations.</p> <p>Chair DiBiasi noted that the Ad Hoc Audit Selection Committee and the Finance Committee recommends approval of WIPFLI, LLP as the new audit firm.</p> <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="467 909 1271 1171"> <tbody> <tr> <td>Baldi</td> <td>Yes</td> <td>Capobianco</td> <td>Yes</td> </tr> <tr> <td>Cooley</td> <td>Yes</td> <td>DiBiasi</td> <td>Yes</td> </tr> <tr> <td>Gardner</td> <td>Yes</td> <td>Hershey</td> <td>Absent</td> </tr> <tr> <td>Lewis</td> <td>Absent</td> <td>Ngo</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Sobiech</td> <td>Yes</td> <td>Swerdlow</td> <td>Yes</td> </tr> <tr> <td>Tankersley</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </tbody> </table>				Baldi	Yes	Capobianco	Yes	Cooley	Yes	DiBiasi	Yes	Gardner	Yes	Hershey	Absent	Lewis	Absent	Ngo	Yes	Rader	Yes	Rutledge	Yes	Sobiech	Yes	Swerdlow	Yes	Tankersley	Yes	Motion carried.		<p>M.S.C., (Sobiech/Rader), the SGMH Board of Directors approved WIPFLI, LLP as the new audit firm.</p>
Baldi	Yes	Capobianco	Yes																														
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Tankersley	Yes	Motion carried.																															
<p>Proposed Action – Approve Recommendations of the Medical Executive Committee</p>	<p>Steven Hildebrand, MD, Chief of Staff briefly reviewed the Medical Executive Committee report as included on the Board tablets.</p> <p>Approval Items:</p> <p>Policies & Procedures:</p> <ul style="list-style-type: none"> • Sepsis Identification & Management • Infection Control Plan 2020 • Preparedness Plan for Influenza Pandemic 2019 – 2020 <p>Pharmacy & Therapeutics – MERP Plan 2020</p> <p>Antibiotic Stewardship Program</p> <p>Peripheral Saline Lock in the Emergency Department Waiting Room</p>				<p>M.S.C., (Baldi/Gardner), the SGMH Board of Directors approved the Medical Executive Committee recommended approval items as submitted.</p>																												

AGENDA ITEM		ACTION / FOLLOW-UP																												
	<p>Sodium Zirconium Cyclosilicate (Lokelma)</p> <p>2020 Annual Approval of Departmental Policies & Procedures</p> <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="467 569 1269 835"> <tr> <td>Baldi</td> <td>Yes</td> <td>Capobianco</td> <td>Yes</td> </tr> <tr> <td>Cooley</td> <td>Yes</td> <td>DiBiasi</td> <td>Yes</td> </tr> <tr> <td>Gardner</td> <td>Yes</td> <td>Hershey</td> <td>Absent</td> </tr> <tr> <td>Lewis</td> <td>Absent</td> <td>Ngo</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Sobiech</td> <td>Yes</td> <td>Swerdlow</td> <td>Yes</td> </tr> <tr> <td>Tankersley</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table>	Baldi	Yes	Capobianco	Yes	Cooley	Yes	DiBiasi	Yes	Gardner	Yes	Hershey	Absent	Lewis	Absent	Ngo	Yes	Rader	Yes	Rutledge	Yes	Sobiech	Yes	Swerdlow	Yes	Tankersley	Yes	Motion carried.		
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<p>Proposed Action – Approve Policies and Procedures</p>	<p>There were one hundred (100) Policies and Procedures included on the board tablets presented for approval by the Board.</p> <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="467 1094 1269 1360"> <tr> <td>Baldi</td> <td>Yes</td> <td>Capobianco</td> <td>No</td> </tr> <tr> <td>Cooley</td> <td>Yes</td> <td>DiBiasi</td> <td>Yes</td> </tr> <tr> <td>Gardner</td> <td>Yes</td> <td>Hershey</td> <td>Absent</td> </tr> <tr> <td>Lewis</td> <td>Absent</td> <td>Ngo</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Sobiech</td> <td>Yes</td> <td>Swerdlow</td> <td>Yes</td> </tr> <tr> <td>Tankersley</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table>	Baldi	Yes	Capobianco	No	Cooley	Yes	DiBiasi	Yes	Gardner	Yes	Hershey	Absent	Lewis	Absent	Ngo	Yes	Rader	Yes	Rutledge	Yes	Sobiech	Yes	Swerdlow	Yes	Tankersley	Yes	Motion carried.		<p>M.S.C., (Cooley/ Sobiech), the SGMH Board of Directors approved the policies and procedures as submitted.</p>
Baldi	Yes	Capobianco	No																											
Cooley	Yes	DiBiasi	Yes																											
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Tankersley	Yes	Motion carried.																												
<p>Community Benefit events/Announcements and newspaper articles</p>	<p>Miscellaneous information was included on the board tablets and handouts were at seats.</p>																													
<p>Adjourn to Closed Session</p>	<p>At the request of Chair DiBiasi, Bobbi Duffy, Executive Assistant, reported the items to be reviewed and discussed and/or acted upon during Closed Session will be:</p> <ul style="list-style-type: none"> ➤ Proposed Action - Approve Medical Staff Credentialing 																													

AGENDA ITEM		ACTION / FOLLOW-UP
	<ul style="list-style-type: none"> ➤ Receive Quarterly Infection Control/Risk Management report – deferred to April Board meeting ➤ Receive Quarterly Performance Improvement Committee report ➤ Telephone conference with legal counsel regarding potential litigation (1 potential case) <p>The meeting adjourned to Closed Session at 6:12 pm.</p> <p>The public, and staff members Dave Recupero, Annah Karam, and Holly Yonemoto left the meeting prior to the closed session.</p>	
Reconvene to Open Session	<p>The meeting reconvened to Open Session at 7:38 pm.</p> <p>No public was waiting to return to the meeting</p> <p>At the request of Chair DiBiasi, Bobbi Duffy reported on the actions taken/information received during the Closed Session as follows:</p> <ul style="list-style-type: none"> ➤ Approved Medical Staff Credentialing ➤ Received Quarterly Performance Improvement Committee ➤ Participated in a conference call with legal counsel regarding potential litigation (1 potential case) 	
Future Agenda Items	None	
Adjourn	The meeting was adjourned at 7:39 pm.	

In accordance with The Brown Act, *Section 54957.5*, all reports and handouts discussed during this Open Session meeting are public records and are available for public inspection. These reports and/or handouts are available for review at the Hospital Administration office located at 600 N. Highland Springs Avenue, Banning, CA 92220 during regular business hours, Monday through Friday, 8:00 am - 4:30 pm.

Respectfully submitted by Bobbi Duffy, Executive Assistant

TAB B



Report from Chair Susan DiBiasi
April 7, 2020

During the month of March:

The past month has been one of learning, planning, changing and redoing - almost on an hourly basis. I applaud the flexibility, knowledge and ability to think about how to meet these new challenges that we have yet to identify or those that we know are coming and need to be managed. Each soul at SGMH has committed their hands, heart and health to helping our community survive this pandemic and its far reaching consequences.

Other health care activities continue - we are working on the District and Hospital lease arrangements, getting ready to implement a significant IT solution and investment, a budget for the next year and all the other routine and non-routine items we manage every day.

Thank you for your considerable dedication, work and loyalty to the Hospital and our community. Be safe.

TAB C



April 2020

Board of Directors Calendar

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
5	6	7 4:00 pm Healthcare District Board mtg. 4:30 pm Hospital Board mtg.	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28 9:00 am Finance Committee mtg.	29	30		

As of April 1, 2020

Items in **bold** = Board/Committee meetings

Items with * = Associate functions that Board members are invited to attend



May 2020

Board of Directors Calendar

Sun	Mon	Tue	Wed	Thu	Fri	Sat
					1	2
3	4	5 4:00 pm Healthcare District Board mtg 5:00 pm Hospital Board mtg	6	7 3:00 pm—Cafeteria General Staff mtg and Associate of the Month	8	9
10	11	12	13 9:00 am HR Committee mtg. <hr/> 5:00 Measure D Comm. Oversight <hr/> 5:15 Measure A Comm. Oversight	14	15	16
17	18	19 9:00 am Community Planning Committee mtg.	20	21	22	23
24	25 Memorial Day Holiday Admin. Closed	26 9:00 am Finance Committee mtg.	27	28	29	30
31						

As of April 1, 2020

Items in **bold** = Board/Committee meetings

Items with * = Associate functions that Board members are invited to attend



SAN GORGONIO
MEMORIAL HOSPITAL

Board of Directors Calendar

June 2020

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2 4:00 pm Healthcare District Board 5:00 pm Hospital Board	3	4 3:00 pm—Cafeteria General Staff mtg and Associate of the Month	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30 9:00 am Finance Committee 10:00 am Executive Committee				

As of April 1, 2020

Items in **bold** = Board/Committee meetings

Items with * = Associate functions that Board members are invited to attend

TAB D

RESOLUTION NO. 2020-01

**RESOLUTION OF THE BOARD OF DIRECTORS OF THE
SAN GORGONIO MEMORIAL HOSPITAL
DECLARING A LOCAL EMERGENCY**

WHEREAS, the San Gorgonio Memorial Hospital (“Hospital”) is a Hospital managed by a healthcare district duly formed and operating under the Local Health Care District Law set forth in Health & Safety Code section 32000 et. seq.; and

WHEREAS, Government Code section 8634 allows special district boards, or designated officials to enact rules and regulations to protect life and property during an emergency; and

WHEREAS, conditions of disaster or of extreme peril to the health and safety of persons and property have arisen both internationally and within the United States as a result of the introduction of the novel coronavirus (“COVID-19”), a novel communicable disease which led to California Governor Gavin Newsom, to proclaim a State of Emergency for California on March 4, 2020; and

WHEREAS, currently COVID-19 has spread globally to more than 70 countries, infecting hundreds of thousands of persons and causing fatalities worldwide. Due to the expanding list of countries with widespread transmission of COVID-19, and increasing travel alerts and warnings for countries experiencing sustained or uncontrolled community transmission issued by the Centers for Disease Control and Prevention (“CDC”), COVID-19 has created conditions that are likely to be beyond the control of local resources and require the combined forces of other political subdivisions to combat this virus; and

WHEREAS, a local health emergency was proclaimed by the County of Riverside Public Health Officer on March 8, 2020, and ratified by the Board of Supervisors on March 10, 2020; and

WHEREAS, a local emergency was proclaimed by the County of Riverside Board of Supervisors on March 10, 2020; and

WHEREAS, the CDC confirmed person-to-person transmission of COVID-19 in the United States, raising the possibility of community transmission occurring in the general public. This has resulted in a Federal Declaration of National Emergency as declared by President Donald Trump on March 13, 2020; and

WHEREAS, the Hospital’s ability to mobilize local resources, accelerate procurement of vital supplies, use mutual aid, and seek future reimbursement by state and federal governments will be critical to successfully responding to COVID-19; and

WHEREAS, these conditions warrant and necessitate that the Hospital declare the existence of a local emergency; and

WHEREAS, Government Code section 8685 et seq. allows special districts/hospitals to receive an allocation of funds under the California Disaster Assistance Act;

WHEREAS, Health & Safety Code section 32136 allows healthcare districts to let contracts for work to be done or for materials and supplies to be furnished, sold or leased to the District without following the lowest bid policy, if it first determines that an emergency exists that warrants such an expenditure due to fire, flood, storm, epidemic or other disaster and is necessary to protect public health, safety, welfare or property;

NOW, THEREFORE, BE IT RESOLVED by the Board of Directors of the San Geronio Memorial Hospital as follows:

1. That the Board of Directors of the Hospital hereby declares the existence of a local emergency as a result of COVID-19 and directs the Hospital staff to take the necessary steps for the protection of life, health and safety.
2. During the existence of said local emergency, the powers, functions, and duties of the Hospital shall be those prescribed by state law and by policies and procedures of the Hospital. The Hospital's Chair, or his/her designee, (the "Authorized Officer") is hereby authorized to implement the Hospitals's existing policies and procedures for emergency operations.
3. To the extent permitted by applicable law, normal goods and service procurement requests and purchase practices consistent with Health & Safety Code section 32136 are stayed during this period of emergency. To the extent that there are federal or state government work or procurement policies and procedures that must be complied with to receive reimbursement for emergency expenditures, and the Hospital seeks such reimbursement, the Hospital shall comply with such procedures.
4. The Hospital's Authorized Officer may commit or expend up to Two Hundred-Fifty Thousand (\$250,000.00) of the Hospital's non-budgeted funds for emergency purposes during this state of emergency and the Hospital's Authorized Officer shall take all reasonable steps to recover such costs from aid or reimbursement available from all sources, including state and federal agencies.
5. The Hospital's Authorized Officer may suspend the performance of any Hospital contracts as required to comply with public health orders during this period of emergency.
6. The Hospital's Authorized Officer is hereby authorized to enact on behalf of the Hospital and the Hospital Board any necessary rules and regulations to protect life and property during the state declared emergency as authorized by Government Code section 8634.
7. The Hospital's Authorized Officer is hereby authorized to implement on behalf of the Hospital and the Hospital Board any suspension of any existing law or regulation ordered by federal, state or local governments that are ordinarily applicable to Hospital operations or governance.
8. The Hospital shall track costs for staffing, supplies, and equipment related to COVID-19 preparation and prevention and forward that information to the Hospital's Authorized Officer.

9. The Hospitals's Authorized Officer is authorized and directed to take all measures to seek and recover disaster relief funding from all sources, including state and federal agencies.
10. The Hospital shall coordinate Hospital-wide planning, preparedness and response efforts regarding COVID-19 with the Riverside County Office of Emergency Services.
11. Actions taken by the Hospital's Authorized Officer prior to the effective date of this Resolution in response to threats posed by COVID-19 are hereby ratified.
12. The recitals set forth above are incorporated herein and made an operative part of this Resolution.
13. This Resolution shall take effect immediately.

**SIGNATURE PAGE
TO
RESOLUTION NO. 2020-01**

ADOPTED this 7th day of April 2020.

Susan DiBiasi, Chair

ATTEST:

Estelle Lewis, Secretary

TAB E



Resolution No. 2020-02

BE IT RESOLVED BY THE San Gorgonio Memorial Hospital Board of Directors
(GOVERNING BODY)

OF THE San Gorgonio Memorial Hospital THAT
(Name of Applicant)

Mr. Joey Hunter, OR
(NAME OR TITLE OF AUTHORIZED AGENT)

Mr. Frank Ussery
(NAME OR TITLE OF AUTHORIZED AGENT)

Is hereby authorized to execute for and on behalf of the named Applicant, a public entity established under the laws of the State of California, any actions necessary for the purpose of obtaining state financial assistance provided by the State of California for the following Grant Award:

FY 2019 California State Nonprofit Security Grant Program

Passed and approved this 7th day of April, 2020

Certification

I, Susan DiBiasi, duly appointed and
(Name)

Chair Of the Hospital Governing Board
(Title) (Governing Body)

Do hereby certify that the above is a true and correct copy of a resolution Passed and approved by the

7th day of April, 2020

Chair
(Official Position)

(Signature) 4/7/2020
(Date)



State Grant Program Standard Assurances

As the duly authorized representative of the Applicant, I hereby certify that the Applicant has the legal authority to apply for State assistance and the institutional, managerial and financial capability to ensure proper planning, management, and completion of the project described in this application, within prescribed timelines.

I further acknowledge that the Applicant is responsible for reviewing and adhering to all requirements within the State programmatic and financial guidelines stipulated by Cal OES, and available in the Fiscal Year 2019 State Program Guidance, at www.caloes.ca.gov.

State award requirements are set forth below. The Applicant hereby agrees to comply with the following:

1. Proof of Authority

The Applicant will obtain proof of authority from the city council, governing board, or authorized body in support of this project. This written authorization must specify that the Applicant and the city council, governing board, or authorized body agree:

- a) Any liability arising out of the performance of this agreement shall be the responsibility of the Applicant and the city council, governing board, or authorized body;
- b) Grant funds shall not be used to supplant expenditures controlled by the city council, governing board, or authorized body; and
- c) Applicant is authorized by the city council, governing board, or authorized body to apply for State assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-State share of project cost, if any) to ensure proper planning, management and completion of the project described in this application.
- d) Official executing this agreement is authorized by the Applicant.

This Proof of Authority must be maintained on file and readily available upon request.

2. Period of Performance

The period of performance is specified in the Award. The Applicant is only authorized to perform allowable activities approved under the award, within the period of performance.



State Grant Program Standard Assurances

3. Lobbying and Political Activities

Cal OES grant funds, grant property, or grant funded positions shall not be used for any lobbying activities. Lobbying activities include, but are not limited to, paying, either directly by the undersigned or by another party on behalf of the undersigned, any person to influence or to attempt to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification.

4. Compliance with local, state, and federal laws

The Applicant must comply with all applicable local, state, and federal statutes, regulations, program plans, and application requirements.

5. Non-Discrimination and Equal Employment Opportunity

The Applicant must comply with all laws that prohibit excluding, denying or discriminating against any person based on actual or perceived race, color, national origin, disability, religion, age, sex, gender identity, and sexual orientation in both the delivery of services and employment practices. These include, but are not limited to, the following:

- a) Americans with Disabilities Act (ADA) of 1990 (42 U.S.C. §§ 12101-12213), which prohibits discrimination on the basis of disability and requires buildings and structures be accessible to those with disabilities and access and functional needs;
- b) Public Health Service Act of 1912 (42 U.S.C. §§ 290 dd-2), relating to confidentiality of patient records regarding substance abuse treatment;
- c) The Applicant will comply with California's Fair Employment and Housing Act (FEHA) (California Government Code §§ 12940, 12945, 12945.2). FEHA prohibits harassment and discrimination in employment because of ancestry, familial status, race, color, religious creed (including religious dress and grooming practices), sex (which includes pregnancy, childbirth, breastfeeding and medical conditions related to pregnancy, childbirth or breastfeeding), gender, gender identity, gender expression, sexual orientation, marital status, national origin, ancestry, mental and physical disability, genetic information, medical condition, age, pregnancy, denial of medical and family care leave, or pregnancy disability leave, military and veteran status, and/or retaliation for protesting illegal discrimination related to one of these categories, or for reporting patient abuse in tax supported institutions; and



State Grant Program Standard Assurances

d) The requirements of any other nondiscrimination statute(s) that may apply to this application.

6. Drug-Free Workplace

As required by the Drug-Free Workplace Act of 1990 (Government Code §§ 8350, et seq.), the Applicant certifies that it will maintain a drug-free workplace.

7. Environmental Standards

The Applicant will comply with state environmental standards, including,

- a) California Environmental Quality Act (CEQA) (California Public Resources Code §§ 21000 - 21177), to include coordination with the city or county planning agency;
- b) CEQA Guidelines (California Code of Regulations, Title 14, Division 6, Chapter 3, §§ 15000 - 15387);

The Applicant shall not be: 1) in violation of any order or resolution promulgated by the State Air Resources Board or an air pollution district; 2) subject to a cease and desist order pursuant to § 13301 of the California Water Code for violation of waste discharge requirements or discharge prohibitions; or 3) determined to be in violation of federal law relating to air or water pollution.

8. Access to Records

The Applicant will maintain such records, and give the State of California, through any authorized representative, access to and the right to examine those records, as the State of California deems necessary. Such records will include all paper or electronic records, books, papers, or documents related to the award, and such other records as will facilitate an effective audit. The Applicant will also establish a proper accounting system in accordance with generally accepted accounting standards.

9. Conflict of Interest

The Applicant will establish safeguards to prohibit the Applicant's employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.

10. Financial Management

Applicants will comply with false claims requirements as stipulated in the California False Claims Act (Government Code §§ 12650 – 126561), which prohibits the submission of false or fraudulent claims for payment.



State Grant Program Standard Assurances

11. Human Trafficking

The Applicant will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. § 7104).

12. Labor Standards

The Applicant will comply with the following labor standards:

- a) The California Labor Code, which provides labor law requirements for the State of California; and
- b) The Federal Fair Labor Standards Act (29 U.S.C. § 201 et al.), as they apply to Federal, State, and local governments.

13. Worker's Compensation

The Applicant must comply with provisions which require every employer to be insured to protect workers who may be injured on the job at all times during the performance of the work of this Agreement, as per the workers compensation laws set forth in California Labor Code §§ 3700 et seq.



COPY

State Grant Program Standard Assurances

IMPORTANT

The purpose of the assurance is to obtain state financial assistance, including any and all state grants, loans, reimbursement, contracts, etc. The Applicant recognizes and agrees that state financial assistance will be extended based on the representations made in this assurance. This assurance is binding on the Applicant, its successors, transferees, assignees, etc. Failure to comply with any of the above assurances may result in suspension, termination, or reduction of grant funds.

All appropriate documentation, as outlined above, must be maintained on file by the Applicant and available for Cal OES or public scrutiny upon request. Failure to comply with these requirements may result in suspension of payments under the grant or termination of the grant or both and the recipient may be ineligible for award of any future grants if Cal OES determines that any of the following has occurred: (1) the recipient has made false certification, or (2) violates the certification by failing to carry out the requirements as noted above.

All of the language contained within this document **must** be included in the award documents for all subawards at all tiers.

The undersigned represents that he/she is authorized to enter into this agreement for and on behalf of the Applicant.

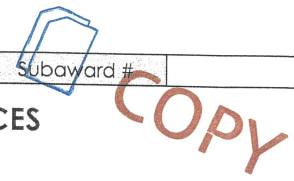
Recipient: SAN Geronimo MEMORIAL Hospital

Signature of Authorized Agent: Joey E. Hunter

Printed Name of Authorized Agent: JOEY E. HUNTER

Title: DIRECTOR OF SECURITY & EMERGENCY Date: 3/31/2020
MANAGEMENT

(Cal OES Use Only)



Cal OES #	FIPS #	VS#	Subaward #
-----------	--------	-----	------------

**CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES
GRANT SUBAWARD FACE SHEET**

The California Governor's Office of Emergency Services (Cal OES) hereby makes a Grant Subaward of funds to the following:

- 1. **Subrecipient:** San Geronio Memorial Hospital 1a. DUNS#: 073607145
- 2. **Implementing Agency:** San Geronio Memorial Hospital 2a. DUNS#: 073607145
- 3. **Implementing Agency Address:** 600 N. Highlands Springs Ave. Riverside 92220-0000
(Street) (City) (Zip+4)
- 4. **Location of Project:** 600 N. Highlands Springs Ave. Riverside 92220-0000
(City) (County) (Zip+4)
- 5. **Disaster/Program Title:** California State Nonprofit Security Grant Program
- 6. **Performance Period:** 01/01/2020 to 12/31/2021
(Start Date) (End Date)
- 7. **Indirect Cost Rate:** N/A Federally Approved ICR (if applicable): N/A %

Item Number	Grant Year	Fund Source	A. State	B. Federal	C. Total	D. Cash Match	E. In-Kind Match	F. Total Match	G. Total Cost
8.	2019	CSNSGP	\$99,606					\$0	\$99,606
9.	Select	Select						\$0	\$0
10.	Select	Select						\$0	\$0
11.	Select	Select						\$0	\$0
12.	Select	Select						\$0	\$0
Total Project Cost			\$99,606	\$0	\$99,606	\$0	\$0	\$0	\$99,606

13. Certification - This Grant Subaward consists of this title page, the application for the grant, which is attached and made a part hereof, and the Assurances/Certifications. I hereby certify I am vested with the authority to enter into this Grant Subaward, and have the approval of the City/County Financial Officer, City Manager, County Administrator, Governing Board Chair, or other Approving Body. The Subrecipient certifies that all funds received pursuant to this agreement will be spent exclusively on the purposes specified in the Grant Subaward. The Subrecipient accepts this Grant Subaward and agrees to administer the grant project in accordance with the Grant Subaward as well as all applicable state and federal laws, audit requirements, federal program guidelines, and Cal OES policy and program guidance. The Subrecipient further agrees that the allocation of funds may be contingent on the enactment of the State Budget.

14. CA Public Records Act - Grant applications are subject to the California Public Records Act, Government Code section 6250 et seq. Do not put any personally identifiable information or private information on this application. If you believe that any of the information you are putting on this application is exempt from the Public Records Act, please attach a statement that indicates what portions of the application and the basis for the exemption. Your statement that the information is not subject to the Public Records Act will not guarantee that the information will not be disclosed.

15. Official Authorized to Sign for Subrecipient:

Name: Joey Hunter Title: Director of Security, Safety, and Emergency Preparedness
 Payment Mailing Address: 600 N. Highland Springs Ave City: Banning Zip Code+4: 92220-0000
 Signature: *Joey E. Hunter* Date: 05/31/2020

16. Federal Employer ID Number: 33-0420041


(FOR Cal OES USE ONLY)

I hereby certify upon my personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.

(Cal OES Fiscal Officer) (Date)

(Cal OES Director or Designee) (Date)



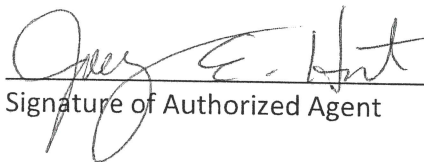
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501 (c)(3) Certification

- I certify that my organization is required to apply for and receive recognition of exemption under 501(c)(3) as required by the Internal Revenue Service. Attached is a copy of my organization's 501(c)(3) Determination Letter
- I certify that my organization is not required to apply for and receive recognition of exemption under 501(c)(3) as required by the Internal Revenue Service


San Gorgonio Memorial Hospital
Subrecipient

Joey Hunter, Director of Security, safety, and Emergency Management
Print Name and Title of Authorized Agent


Signature of Authorized Agent

03/31/2020
Date



 COPY

California Governor's Office of Emergency Services
Scott Sano
California State Nonprofit Security Grant Program (CSNSGP)
3650 Schriever Ave.
Mather, CA 95655

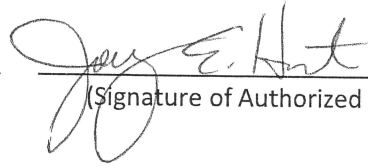
RE: California Environmental Quality Act (CEQA) Declaration

The Closed-Circuit Security Camera project that San Gorgonio Memorial Hospital will complete utilizing the FY 2019 CSNSGP will not involve any of the following:

- New Construction projects
- The renovation or modification that will lead to an increased occupancy of more than 25 persons
- The implementation of programs involving the use of pesticides and other harmful chemicals
- The implementation of programs involving microwaves or radiation
- Research and technology, the anticipated or intended future application of which could be expected to have a potential effect on the environment

Joey Hunter Sr.

(Print Name of Authorized Agent)



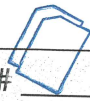
(Signature of Authorized Agent)

Director of Security, Safety, and Emergency Services

(Title of Authorized Agent)

03/31/2020
(Date)

**CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES
SUBRECIPIENT GRANTS MANAGEMENT ASSESSMENT**



COPY

Subrecipient San Gorgonio Memorial Hospital **Duns#** 073607145 **FIPS#** _____
Disaster/Program Title: California State Nonprofit Security Grant Program
Performance Period: 01/01/20 to 12/31/21 **Subaward Amount Requested:** \$99,606
Type of Non-Federal Entity (Check Box): State Gov. Local Gov. JPA Non-Profit Tribe

Per Title 2 CFR § 200.331, Cal OES is required to evaluate the risk of noncompliance with federal statutes, regulations and grant terms and conditions posed by each subrecipient of pass-through funding. This assessment is made in order to determine and provide an appropriate level of technical assistance, training, and grant oversight to subrecipients for the award referenced above.

The following are questions related to your organization's experience in the management of federal grant awards. This questionnaire must be completed and returned with your grant application materials.

For purposes of completing this questionnaire, grant manager is the individual who has primary responsibility for day-to-day administration of the grant, bookkeeper/accounting staff means the individual who has responsibility for reviewing and determining expenditures to be charged to the grant award, and organization refers to the subrecipient applying for the award, and/or the governmental implementing agency, as applicable.

Assessment Factors	Response
1. How many years of experience does your current grant manager have managing grants?	>5 years
2. How many years of experience does your current bookkeeper/accounting staff have managing grants?	<3 years
3. How many grants does your organization currently receive?	1-3 grants
4. What is the approximate total dollar amount of all grants your organization receives?	\$ 300,000
5. Are individual staff members assigned to work on multiple grants?	No
6. Do you use timesheets to track the time staff spend working on specific activities/projects?	Yes
7. How often does your organization have a financial audit?	Annually
8. Has your organization received any audit findings in the last three years?	No
9. Do you have a written plan to charge costs to grants?	Yes
10. Do you have written procurement policies?	Yes
11. Do you get multiple quotes or bids when buying items or services?	Always
12. How many years do you maintain receipts, deposits, cancelled checks, invoices, etc.?	3-5 years
13. Do you have procedures to monitor grant funds passed through to other entities?	N/A

Certification: *This is to certify that, to the best of our knowledge and belief, the data furnished above is accurate, complete and current.*


Signature: (Authorized Agent) 	Date: <u>03/31/2020</u>
Print Name and Title: <small>Joey Hunter Sr. Director of Security, Safety, and Emergency Preparedness</small>	Phone Number: (951) 845-1122
Cal OES Staff Only: SUBAWARD #	



P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248230137
Feb. 06, 2014 LTR 4168C 0
33-0420041 000000 00
00026051
BODC: TE

SAN GORGONIO MEMORIAL HOSPITAL
600 N HIGHLAND SPRINGS AVE
BANNING CA 92220

 COPY



026451

Employer Identification Number: 33-0420041
Person to Contact: Ms. Edwards
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Jan. 28, 2014, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in February 1991.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(iii).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

0248230137
Feb. 06, 2014 LTR 4168C 0
33-0420041 000000 00
00026052

SAN GORGONIO MEMORIAL HOSPITAL
600 N HIGHLAND SPRINGS AVE
BANNING CA 92220

 COPY

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

Susan M. O'Neill


Susan M. O'Neill, Department Mgr.
Accounts Management Operations

INTERNAL REVENUE SERVICE
District Director

c/o McCaslin Industrial Park
2 Cupania Circle
Monterey Park, CA 91754
Attn:EOG-2

SAN GORGONIO MEMORIAL HOSPITAL
C/O JOHN MCCAULEY ESQ
GRESHAM VARNER SAVAGE
600 N ARROWHEAD AVE 300
SAN BERNARDINO, CA 92401

Department of the Treasury


RECEIVED
MAR 14 1991

Date: MAR 08 1991

GRESHAM, VARNER,
SAVAGE, NOLAN & TILDEN

Employer Identification Number:
33-0420041
Case Number:
951010073
Contact Person:
EARL KNIGHT
Contact Telephone Number:
(213)725-6619

Accounting Period Ends:
JUNE 30
Form 990 Required:
YES
Addendum Applies:
NO

Dear Applicant:

Based on information supplied and assuming your operations will be as stated in your application for recognition of exemption, we have determined that you are exempt from Federal income tax under section 501(c)(a) of the Internal Revenue Code as an organization described in section 501(c)(3).

We have further determined that you are not a private foundation within the meaning of section 509(a) of the Code, because you are an organization described in section 509(a)(1) and 170(b)(1)(A)(iii).

If your sources of support or your purposes, character or method of operation change, please let us know so we can consider the effect of the change on your exempt status and foundation status. In the case of an amendment to your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, you should inform us of all changes in your name or address.

As of January 1, 1984, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more you pay to each of your employees during a calendar year. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Since you are not a private foundation, you are not subject to the excise taxes under Chapter 42 of the Code, however, you are not automatically exempt from other Federal excise taxes. If you have any questions about excise, employment or other Federal taxes, please let us know.

TAB F



San Gorgonio Memorial Hospital Board Report
Information Technology & Business Development Report
Holly Yonemoto, CIO & CBDO
APRIL 2020

INFORMATION TECHNOLOGY

ALLSCRIPTS/SUNCOM UPDATE

For the last few weeks we have had Allscripts training sessions which were initially lead by Allscripts trainers onsite and remote and then we went 100% remote for trainers due to the rapid change in the COVID-19 (C19) situation and related travel concerns. The trainings we had were for training our trainers/superusers who will then train the staff in their areas. Similar to the workflow meetings we had a few weeks prior to these sessions - there was a lot of good information exchanged and the review with the superusers was very good for both Allscripts and the SGMH team. We continue to move forward with the necessary tasks and Allscripts is completing some build items for us to be able to go to the next step – validation of the system. We are meeting regularly to monitor progress and expect them to be on schedule soon.

TELE-HEALTH

In March the Information Technology team was very busy with the team attending the required Allscripts train the trainer sessions and in addition they have been setting up individuals that have the ability to be offsite (some selected Navigant staff). Additionally, since we were working with InTouch on the tele-health robot upgrade we were able to negotiate to get 2 more robots for the COVID-19 situation. It was an amazing opportunity in the midst of this crisis that provides the physicians the option to see potentially infectious patients from outside of the patient rooms – which also helps in reducing the amount of personal protective equipment that we are trying to conserve during the C19 situation. We are in the process of having all physicians registered with InTouch so that all physicians have access to all 3 robots in which they can talk to the patient from a laptop outside the patient room and/or from another remote or onsite location. We believe all physicians will have access this week.

BUSINESS DEVELOPMENT

ORTHOPEDIC SURGERY

In February, we started the full orthopedic Emergency Department coverage with Dr. Reis and Arrowhead Orthopedic physicians to provide the community the assurance that their orthopedic needs are addressed 24/7 in our emergency department. I am pleased to report the coverage has been great and we are meeting the community's needs daily since February 1. The coverage has been and continues to be a great service to the community - having additional high-quality, highly-respected orthopedic surgeon coverage.

BUSINESS DEVELOPMENT CONTINUED PG2

TELE-NEUROLOGY

We are pleased to announce we are going live with tele-neurology on April 15. We have been working on this initiative for many months and are now ready to initiate the tele-neurology coverage for Stroke and other neurology assessment needs. The coverage is being performed by a group of 4 neurologists that is a related entity of Envision – the current group that provides our Emergency Department physician coverage. We have had standing meetings for the past 2 months to prepare for the go-live and we are ready and so pleased we are going to be able to provide additional care for our community at SGMH.

MARKETING

We continue to run all of our existing ads as well as we have our billboard and radio commercials on KFROG. In addition to our regular marketing we have been busy with posts related to those that have given items as well as resources and thanking the community for doing their part by social-distancing. We also ran a full page ad in the Record Gazette that was from Steve Barron our CEO as well as George Moyer our Foundation Board Chair that asked for assistance by giving so we can purchase medical equipment and supplies during the COVID – 19 crisis.

On an additional note, we had a very high rate of Facebook exposure on the posts related to giving. The post related to John Weeks a local entrepreneur and the owner of the Museum of Pinball here in Banning giving 1,500 N95 masks the result was over 8,000 views in addition to many gracious comments. We are thankful for all the generous and thoughtful individuals and organizations that are showing their support for SGMH as we support the community's healthcare needs during the COVID-19 crisis.

TAB G



April 1, 2020

Foundation Finances as of 3/31/2020–

Bank of Hemet:

- \$225,971.09 (business checking account) as of 03/31/2020
- \$127,565.12 (money market account) as of 03/31/2020
- Community Foundation: \$318,662.51 as of 02/26/2020 (updates to the amt is unavailable at this time)
- Total Funds approx: \$672,198.72

Foundation News –

- SGMH Foundation Gala scheduled for March 14, 2020 was canceled as of Thursday 3/12/2020. Currently there are no plans to reschedule it. The Foundation is going to ride out the COVID19 virus wave and see where we are in a few months.
- All but (4) donations were refunded.

These amounts are approx.

	Gala 2019	Gala 2020
Total Expenses	\$61,933.00	\$6,972.00
Net dollars	\$55,587.00	\$53,028.00

Community Outreach –

- The Foundation office has created the “COVID19 Response Fund”. The marketing of the fund will start Thursday April 3, 2020 in the Record Gazette and Sun Lake Life publication. All monetary donations and/or in-kind donations of goods will be processed through the Foundation office.
- Harbor Freight made a very large donation of 50,000 gloves and 120 face shields. This totals in value of over \$10,000.
- The Foundation office is getting calls daily from the community wishing to donate food and other medical supplies.

TAB H

San Geronio Memorial Hospital

Financial Report – Executive Summary

For the month of February 2020 (Eight months in FY 20)

Concluding Summary

Earnings before interest, depreciation and amortization (EBIDA) VARIANCES:

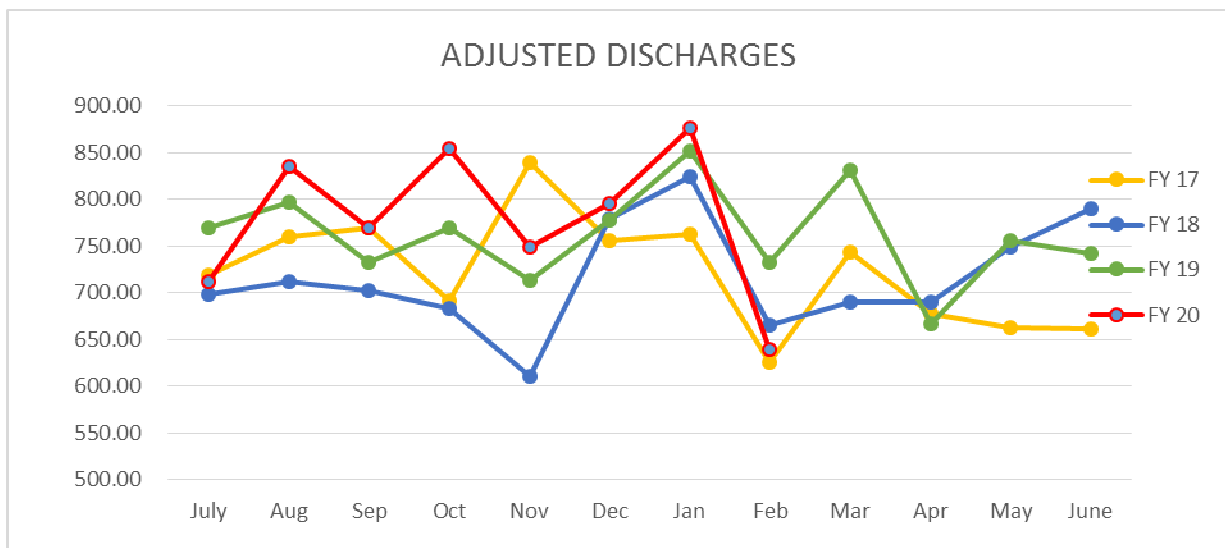
<u>For the Month:</u>	Actual below Budget by	< <u>\$246,000</u> >
<u>Year-to- Date (8 mo.):</u>	Actual exceeded Budget by	<u>\$1,685,000</u>
<u>Versus PRIOR YTD</u>	FY 20 exceeded FY 19 by	<u>\$1,315,000</u>

Positive takeaways for the month:

- 1) Continue progress toward a new anesthesia agreement.
- 2) Improved (higher) cash flexibility with a new line of credit now in place for the next 2 years.
- 3) Vastly Improved IGT projections due to several miscellaneous adjustments (updated 18-19 rate range; 19-20 rate range IGT; and HQAF6 Direct Grant IGT)

Negative takeaways for the month:

- 1) Cash flow challenges as anticipated mostly due timing issues with IGTs and slower processing of new LOC.
- 2) Higher than expected physician fees especially related to anesthesia costs.



Prepared 3/25/2020
Dave Recupero, CFO



**SAN GORGONIO MEMORIAL HOSPITAL
BANNING, CALIFORNIA**

Unaudited Financial Statements

for

EIGHT MONTHS ENDING FEB 29, 2020

Certification Statement:

To the best of my knowledge, I certify for the hospital that the attached financial statements, except for the uncertainty of IGT revenue accruals, do not contain any untrue statement of a material fact or omit to state a material fact that would make the financial statements misleading. I further certify that the financial statements present in all material respects the financial condition and results of operation of the hospital and all related organizations reported herein.

Certified by:

David D. Recupero

CFO

San Gorgonio Memorial Hospital

Financial Report – Executive Summary

For the month of February 2020 (Eight months in FY 20)

Profit/Loss (EBIDA) Summary

In the current month, there was a \$246K unfavorable budget variance in Earnings before Interest, Depreciation and Amortization (EBIDA). February EBIDA actual was \$195K, or a +2.96% EBIDA margin. The resulting Year-to-Date (YTD) EBIDA budget variance for this fiscal year is now \$1.685M. YTD Actual FY 20 EBIDA compared to FY19 is now \$1.315M improved. Year-to-Date increase/decrease in unrestricted net assets (net profit) was \$947K loss compared to the budgeted YTD loss of \$2.42M and last year's YTD loss of \$2.39M.

Analysis

Referring to Patient Statistics page 9 of attached report, we see line 3“Adjusted Acute Discharges” which is a good proxy over-all patient statistic posted unfavorable (lower figures) compared to last year February (639 vs 733) however, YTD February was a favorable variance (6,228 vs. 6,138). Volumes as measured by gross charges for the year is now 2.1% below budget. The unfavorable \$177K EBIDA monthly Budget variance was caused by the lower patient activity and higher operating expenses (+\$483K) more than offsetting favorable IGT variances (+\$361K). For the year. Net Patient revenues of \$33.3M was \$329K better than budget and \$2.71 million improved over the FY 19 Year-to-Date figure.

Patient Revenues (unfavorable \$83K) Contributing to this variance was the unfavorable reported adjusted discharges statistic, partially offset by write-off percentage improvements in February from 84.67% to 82.9% and compared to the budget of 83.4% (lower is better) resulting in slightly unfavorable variance in Net Patient Revenues. Acute patient days (689) were significantly less than the budget of 848 and last year's 733.

Total Operating Revenues (favorable \$237K) . The good news on the IGTs helped turn around the patient revenue \$82K unfavorable budget variance. Total Operating revenue which includes IGTs shows a \$320K favorable variance. Over the past few days we received some more good (IGT) news. The HQAF6 Direct Grant IGT which has been delayed 8 months in payments this year has now cleared all state and federal approvals, and is slated for payment in the next month or so. The 8 month backlog in payments is around \$1.8 million that will result in added amounts to cash balances by the end of this fiscal year.

Key patient statistics variances included:

Average Daily Census (ADC) in January (23.8 actual vs 29.3 budget and 27.7 last year). YTD ADC actual= 25.4 vs budget 27.4 and last year first 8 months ADC was 25.8. YTD ED visits were 1.5% ahead of budget. Outpatient GI lab procedures had 116 procedures compared to 64 last February. Areas of declined patient activity include observation bed days (down 9.4% YTD) and outpatient surgeries (down 35.2% YTD). The over-all measurement of patient activity YTD adjusted acute discharges were down 5.75% compared to budget but up 1.46% compared to last year.

In summary, the favorable supplemental revenues adjustments partially offset the higher expenses and declining and inpatient revenues (down 13.6% versus budget).

Expenses (unfavorable \$483K) Most of the expense categories posted unfavorable February expenses variances. The 8.2% budget variance was mostly due to physician fees (+\$224K). Year-to Date overall actual expenses are now 3.48% over budget. We continue to be hopeful that anesthesia expenses should be reduced with a new contract being finalized for anesthesia.

BALANCE SHEET/CASH FLOW

Cash Balances continued lower (as expected) due to low supplemental funding. The 4 week delay in processing our new line of credit also affected our accounts payable going to over \$7.5 million. As of March 1, however, the new higher (\$12.0 MM) line of credit is now in place and we are in the process of quickly bringing down the high A/P balances.

The FY 20 fiscal year-end projected cash and debt picture continues to track fairly close to the ending balances proposed in the original budgeted estimates.

Concluding Summary

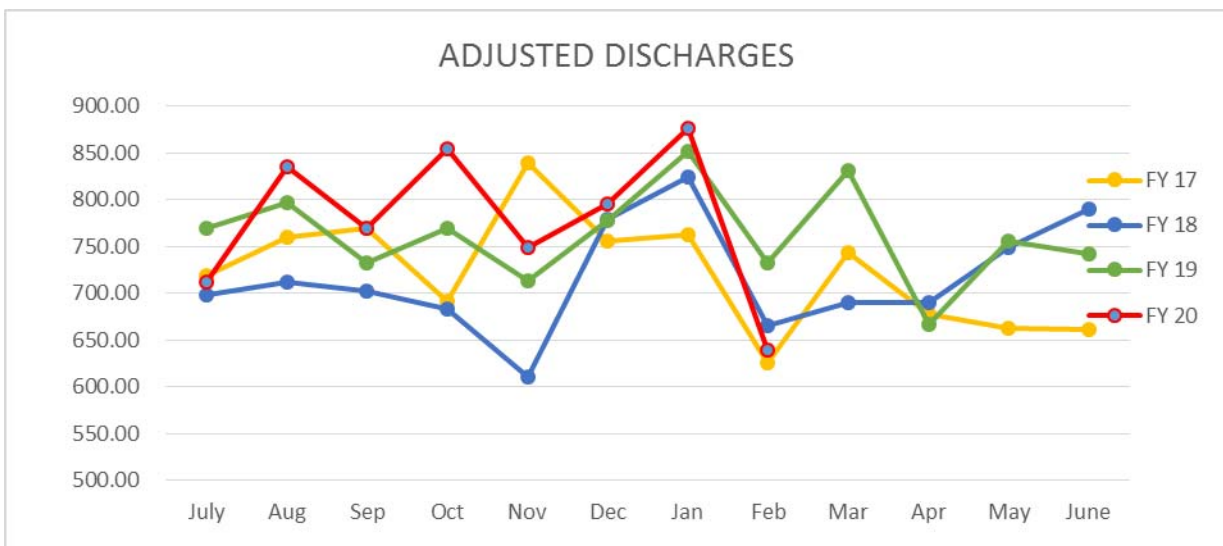
Positive takeaways for the month:

- 1) Continue progress toward a new anesthesia agreement.
- 2) Improved (higher) cash flexibility with a new line of credit now in place for the next 2 years.
- 3) Vastly Improved IGT projections due to several miscellaneous adjustments (updated 18-19 rate range; 19-20 rate range IGT; and HQAF6 Direct Grant IGT)

Negative takeaways for the month:

- 1) Cash flow challenges as anticipated mostly due timing issues with IGTs and slower processing of new LOC.
- 2) Higher than expected physician fees especially related to anesthesia costs.

Prepared 03/13/2020
 Dave Recupero, CFO



Statement of Revenue and Expense
SAN GORGONIO MEMORIAL HOSPITAL
BANNING, CALIFORNIA
EIGHT MONTHS ENDING FEB 29, 2020

	CURRENT MONTH					Prior Year 02/28/19
	DISTRICT ONLY	COMBINED		Positive	Percentage Variance	
	Actual 02/29/20	Actual 02/29/20	Budget 02/29/20	(Negative) Variance		
Gross Patient Revenue						
[1] Inpatient Revenue	\$0	\$6,664,103	\$7,713,236	(\$1,049,133)	-13.60%	\$6,992,075
[2] Inpatient Psych/Rehab Revenue	0	0	0	0	0.00%	0
[3] Outpatient Revenue	0	15,164,056	16,938,857	(1,774,801)	-10.48%	15,975,511
[4] Long Term Care Revenue	0	0	0	0	0.00%	0
[5] Home Health Revenue	0	0	0	0	0.00%	0
[6] Total Gross Patient Revenue	0	21,828,159	24,652,093	(2,823,934)	-11.46%	22,967,586
Deductions From Revenue						
[7] Discounts and Allowances	0	(17,409,256)	(19,572,417)	2,163,161	11.05%	(18,034,039)
[8] Bad Debt Expense	0	(318,983)	(826,218)	507,235	61.39%	(966,979)
[9] Prior Year Settlements	0	0	(56,520)	56,520	100.00%	0
[10] Charity Care	0	(34,202)	(48,473)	14,271	29.44%	(47,841)
[11] Total Deductions From Revenue	0	(17,762,440)	(20,503,628)	2,741,188	13.37%	(19,048,858)
[12]		81.37%	83.17%			82.94%
[13] Net Patient Revenue	0	4,065,719	4,148,465	(82,746)	-1.99%	3,918,728
Non Patient Operating Revenues						
[14] IGT/DSH Revenues	0	1,960,549	1,600,000	360,549	22.53%	3,301,890
[15] Tax Subsidies Measure D	188,750	188,750	197,471	(8,721)	-4.42%	175,000
[16] Tax Subsidies Prop 13	112,500	112,500	118,661	(6,161)	-5.19%	105,000
[17] Tax Subsidies County Supplemental Funds	0	0	0	0	0.00%	0
[18] Other Operating Revenue	1,838	220,252	248,916	(28,664)	-11.52%	190,565
[19] Clinic Net Revenues	30,605	30,605	27,753	2,852	10.28%	34,207
Non- Patient Revenue	333,694	2,512,657	2,192,801	319,856	14.59%	3,806,662
Total Operating Revenue	333,694	6,578,375	6,341,266	237,109	3.74%	7,725,390
Operating Expenses						
[20] Salaries and Wages	0	2,976,829	2,886,844	(89,984)	-3.12%	2,668,206
[21] Fringe Benefits	0	777,106	729,688	(47,417)	-6.50%	738,114
[22] Contract Labor	0	68,701	55,579	(13,122)	-23.61%	112,303
[23] Physicians Fees	0	419,392	195,484	(223,908)	-114.54%	256,638
[24] Purchased Services	46,919	767,266	753,084	(14,182)	-1.88%	466,078
[25] Supply Expense	53	774,080	719,465	(54,615)	-7.59%	636,901
[26] Utilities	0	56,448	71,386	14,938	20.93%	90,111
[27] Repairs and Maintenance	0	29,367	45,038	15,671	34.80%	27,175
[28] Insurance Expense	0	104,502	101,452	(3,050)	-3.01%	79,083
[29] All Other Operating Expenses	7,822	247,385	174,257	(73,128)	-41.97%	102,073
[30] IGT Expense	0	46	0	(46)	0.00%	0
[31] Leases and Rentals	0	109,155	68,143	(41,012)	-60.19%	93,990
[32] Clinic Expense	32,500	53,450	99,817	46,367	46.45%	87,395
[33] Total Operating Expenses	87,293	6,383,728	5,900,238	(483,491)	-8.19%	5,358,066
[34] EBIDA	246,400	194,647	441,028	(246,381)	-55.87%	2,367,325
Interest Expense and Depreciation						
[35] Depreciation	502,454	502,454	500,000	(2,454)	-0.49%	494,513
[36] Interest Expense and Amortization	388,638	388,638	399,474	10,836	2.71%	421,295
[37] Total Interest & depreciation	891,093	891,093	899,474	8,381	0.93%	915,808
Non-Operating Revenue:						
[38] Contributions & Other	0	0	16,667	(16,667)	-100.00%	0
[39] Tax Subsidies for GO Bonds - M-A	598,629	598,629	605,781	(7,152)	-1.18%	585,613
[40] Total Non Operating Revenue/(Expense)	598,629	598,629	622,448	(23,819)	-3.83%	585,613
[41] Total Net Surplus/(Loss)	(\$46,063)	(\$97,816)	\$164,002	(\$261,819)	-159.64%	\$2,037,129
[42] Extra-ordinary loss on Financing						
[43] Increase/(Decrease in Unrestricted Net Assets	(\$46,063)	(\$97,816)	\$164,002	(\$261,819)	-159.64%	\$2,037,129
[44] Total Profit Margin	-13.80%	-1.49%	2.59%			26.37%
[45] EBIDA %	73.84%	2.96%	6.95%			30.64%

Statement of Revenue and Expense
SAN GORGONIO MEMORIAL HOSPITAL
BANNING, CALIFORNIA
EIGHT MONTHS ENDING FEB 29, 2020

	DISTRICT ONLY		YEAR-TO-DATE			Prior Year 02/28/19
	Actual 02/29/20	Actual 02/29/20	Budget 02/29/20	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue						
[1] Inpatient Revenue	\$0	\$58,112,136	\$60,542,172	(\$2,430,036)	-4.01%	\$57,628,262
[2] Inpatient Psych/Rehab Revenue	0	0	0	0	0.00%	0
[3] Outpatient Revenue	0	136,046,061	137,779,192	(1,733,131)	-1.26%	131,637,143
[4] Long Term Care Revenue	0	0	0	0	0.00%	0
[5] Home Health Revenue	0	0	0	0	0.00%	0
[6] Total Gross Patient Revenue	0	194,158,197	198,321,364	(4,163,167)	-2.10%	189,265,405
Deductions From Revenue						
[7] Discounts and Allowances	0	(154,606,218)	(157,865,304)	3,259,086	2.06%	(152,099,841)
[8] Bad Debt Expense	0	(5,656,578)	(6,646,766)	990,188	14.90%	(6,218,680)
[9] Prior Year Settlements	0	0	(454,690)	454,690	100.00%	0
[10] Charity Care	0	(601,200)	(389,953)	(211,247)	-54.17%	(363,090)
[11] Total Deductions From Revenue	0	(160,863,995)	(165,356,713)	4,492,718	2.72%	(158,681,611)
[12]		82.9%	83.4%	-0.5%		83.8%
[13] Net Patient Revenue	0	33,294,202	32,964,651	329,551	1.00%	30,583,795
Non Patient Operating Revenues						
[14] IGT/DSH Revenues	0	13,090,324	10,000,000	3,090,324	30.90%	9,636,357
[15] Tax Subsidies Measure D	1,638,627	1,638,627	1,549,979	88,648	5.72%	1,500,000
[16] Tax Subsidies Prop 13	918,731	918,731	931,384	(12,653)	-1.36%	840,000
[17] Tax Subsidies County Supplemental Funds	104,181	104,181	97,500	6,681	6.85%	96,957
[18] Other Operating Revenue	32,881	1,896,168	1,975,840	(79,672)	-4.03%	1,734,937
[19] Clinic Net Revenues	169,224	169,224	222,024	(52,800)	-23.78%	196,206
Non- Patient Revenue	2,863,644	17,817,254	14,776,727	3,040,527	20.58%	14,004,457
Total Operating Revenue	2,863,644	51,111,456	47,741,378	3,370,078	7.06%	44,588,251
Operating Expenses						
[20] Salaries and Wages	0	25,104,984	24,367,055	(737,929)	-3.03%	22,683,051
[21] Fringe Benefits	0	5,805,805	5,882,150	76,345	1.30%	5,846,326
[22] Contract Labor	0	557,381	444,632	(112,749)	-25.36%	727,036
[23] Physicians Fees	8,800	2,547,895	1,563,872	(984,023)	-62.92%	1,857,088
[24] Purchased Services	361,707	5,334,172	5,487,842	153,670	2.80%	3,267,698
[25] Supply Expense	509	5,830,666	5,692,273	(138,393)	-2.43%	5,199,312
[26] Utilities	3,000	631,891	571,088	(60,803)	-10.65%	620,320
[27] Repairs and Maintenance	6,475	444,690	360,304	(84,386)	-23.42%	406,033
[28] Insurance Expense	0	726,062	811,616	85,554	10.54%	762,416
[29] All Other Operating Expenses	60,786	1,265,976	1,394,056	128,080	9.19%	1,087,193
[30] IGT Expense	0	(155)	0	155	0.00%	0
[31] Leases and Rentals	0	602,029	545,144	(56,885)	-10.43%	1,110,280
[32] Clinic Expense	542,147	752,116	798,536	46,420	5.81%	828,513
[33] Total Operating Expenses	983,424	49,603,512	47,918,568	(1,684,944)	-3.52%	44,395,266
[34] EBIDA	1,880,220	1,507,944	(177,190)	1,685,134	-951.03%	192,985
Interest Expense and Depreciation						
[35] Depreciation	4,011,692	4,011,692	4,026,000	14,308	0.36%	4,029,179
[36] Interest Expense and Amortization	3,119,939	3,278,515	3,195,792	(82,723)	-2.59%	3,290,757
[37] Total Interest & depreciation	7,131,631	7,290,206	7,221,792	(68,414)	-0.95%	7,319,936
Non-Operating Revenue:						
[38] Contributions & Other	163,194	163,194	133,336	29,858	22.39%	50,524
[39] Tax Subsidies for GO Bonds - M-A	4,671,836	4,671,836	4,846,248	(174,412)	-3.60%	4,684,900
[40] Total Non Operating Revenue/(Expenses)	4,835,029	4,835,029	4,979,584	(144,555)	-2.90%	4,735,424
[41] Total Net Surplus/(Loss)	(\$416,381)	(\$947,233)	(\$2,419,398)	\$1,472,165	-60.85%	(\$2,391,526)
[42] Extra-ordinary loss on Financing						
[43] Increase/(Decrease in Unrestricted Net Assets)	(\$416,381)	(\$947,233)	(\$2,419,398)	\$1,472,165	-60.85%	(\$2,391,526)
[44] Total Profit Margin	-14.54%	-1.85%	-5.07%			-5.36%
[45] EBIDA %	65.66%	2.95%	-0.37%			0.43%

Balance Sheet - Assets

SAN GORGONIO MEMORIAL HOSPITAL BANNING, CALIFORNIA EIGHT MONTHS ENDING FEB 29, 2020

Percent of Net AR to Gross AR>	DISTRICT ONLY		ASSETS			
	Current Month 02/29/2020	Current Month 02/29/2020	Prior Month 01/31/2020	Curr vs Prior Mo. Positive/ (Negative) Variance	Prior Year End 06/30/2019	Curr vs Prior YE Positive/ (Negative) Variance
		18.26%	17.62%		17.33%	
Current Assets						
[1] Cash and Cash Equivalents	\$1,879,797	\$2,034,657	\$2,712,171	(\$677,514)	\$4,175,227	(\$2,140,570)
[2] Gross Patient Accounts Receivable	0	51,832,850	51,314,490	518,360	49,210,703	2,622,147
[3] Less: Bad Debt and Allowance Reserves	0	(42,369,443)	(42,273,802)	(95,642)	(40,680,940)	(1,688,503)
[4] Net Patient Accounts Receivable	0	9,463,407	9,040,688	422,718	8,529,763	933,644
[5] Taxes Receivable	2,422,094	2,422,094	1,372,413	1,049,682	566,680	1,855,414
[6] Other Receivables	0	501,394	868,818	(367,424)	436,869	64,525
[7] Inventories	0	1,709,861	1,677,816	32,045	1,632,865	76,995
[8] Prepaid Expenses	72,875	400,206	408,455	(8,249)	1,326,928	(926,721)
[9] Due From Third Party Payers	0	1,138,607	895,218	243,389	554,344	584,263
[10] Malpractice Receivable	0	0	0	0	0	0
[11] IGT Receivables	0	22,311,121	20,384,193	1,926,927	10,058,792	12,252,328
Total Current Assets	4,374,767	39,981,346	37,359,772	2,621,574	27,281,468	12,699,878
Assets Whose Use is Limited						
[12] Cash	0	0	0	0	0	0
[13] Investments	0	0	0	0	0	0
[14] Bond Reserve/Debt Retirement Fund	6,599,974	6,608,925	6,722,985	(114,060)	8,867,208	(2,258,283)
[15] Trustee Held Funds	0	0	0	0	0	0
[16] Funded Depreciation	0	0	0	0	0	0
[17] Board Designated Funds	0	0	0	0	0	0
[18] Other Limited Use Assets	0	0	0	0	0	0
Total Limited Use Assets	6,599,974	6,608,925	6,722,985	(114,060)	8,867,208	(2,258,283)
Property, Plant, and Equipment						
[19] Land and Land Improvements	6,686,845	6,686,845	6,686,845	0	4,820,671	1,866,174
[20] Building and Building Improvements	127,399,218	127,399,218	127,399,218	0	129,283,884	(1,884,666)
[21] Equipment	26,098,248	26,098,248	26,004,552	93,696	25,586,875	511,372
[22] Construction In Progress	8,391,329	8,391,329	8,391,329	0	8,390,249	1,080
[23] Capitalized Interest	0	0	0	0	0	0
[24] Gross Property, Plant, and Equipment	168,575,639	168,575,639	168,481,944	93,696	168,081,679	493,960
[25] Less: Accumulated Depreciation	(75,092,906)	(75,092,906)	(74,590,452)	(502,454)	(71,114,751)	(3,978,155)
[26] Net Property, Plant, and Equipment	93,482,734	93,482,734	93,891,492	(408,758)	96,966,928	(3,484,194)
Other Assets						
[27] Unamortized Loan Costs	1,456,314	1,456,314	1,457,974	(1,660)	1,522,444	(66,130)
[28] Assets Held for Future Use	0	0	0	0	0	0
[29] Investments in Subsidiary/Affiliated Org.	12,136,645	0	0	0	0	0
[30] Other	0	0	0	0	0	0
[31] Total Other Assets	13,592,959	1,456,314	1,457,974	(1,660)	1,522,444	(66,130)
[32] TOTAL UNRESTRICTED ASSETS	118,050,434	141,529,319	\$139,432,223	\$2,097,096	134,638,048	\$6,891,271
Restricted Assets						
[33] TOTAL ASSETS	\$118,050,434	\$141,529,319	\$139,432,223	\$2,097,096	\$134,638,048	\$6,891,271

Balance Sheet - Liabilities and Net Assets
SAN GORGONIO MEMORIAL HOSPITAL
BANNING, CALIFORNIA
EIGHT MONTHS ENDING FEB 29, 2020

	District Only		LIABILITIES AND FUND BALANCE			Curr vs Prior YE
	Current Month 02/29/2020	Current Month 02/29/2020	Prior Month 01/31/2020	Positive/ (Negative) Variance	Prior Year End 06/30/2019	Positive/ (Negative) Variance
Current Liabilities						
[1] Accounts Payable	\$153,350	\$7,558,127	\$5,861,902	\$1,696,225	\$4,436,438	\$3,121,689
[2] Notes and Loans Payable (Line of Credit)	0	10,000,000	\$10,000,000	0	\$0	10,000,000
[3] Accounts Payable- Construction	0	0	\$0	0	\$0	0
[4] Accrued Payroll Taxes	0	2,970,853	\$2,831,634	139,219	\$3,844,094	(873,241)
[5] Accrued Benefits	0	81,509	\$80,541	968	\$76,513	4,997
[6] Accrued Benefits Current Portion	0	0	\$0	0	\$0	0
[7] Other Accrued Expenses	0	0	\$0	0	\$0	0
[8] Accrued GO Bond Interest Payable	404,046	404,046	(\$0)	404,046	\$2,049,304	(1,645,258)
[9] Malpractice Payable	0	0	\$0	0	\$0	0
[10] Due to Third Party Payers (Settlements)	0	0	\$0	0	\$0	0
[11] Advances From Third Party Payers	0	0	\$0	0	\$0	0
[12] Current Portion of LTD (Bonds/Mortgages)	2,335,000	2,335,000	\$2,335,000	0	\$0	2,335,000
[13] Current Portion of LTD (Leases)	0	0	\$0	0	\$0	0
[14] Other Current Liabilities	0	6,041	35,579	(29,537)	15,758	(9,717)
Total Current Liabilities	2,892,396	23,355,576	21,144,656	2,210,920	10,422,106	12,933,470
Long Term Debt						
[15] Bonds/Mortgages Payable (net of Cur Portic	108,276,833	108,276,833	108,292,586	(15,753)	112,856,547	(4,579,714)
[16] Leases Payable (net of current portion)	0	0	0	0	0	0
[17] Total Long Term Debt (Net of Current)	108,276,833	108,276,833	108,292,586	(15,753)	112,856,547	(4,579,714)
Other Long Term Liabilities						
[18] Deferred Revenue	0	0	0	0	0	0
[19] Accrued Pension Expense (Net of Current)	0	0	0	0	0	0
[20] Other	0	0	0	0	0	0
[21] Total Other Long Term Liabilities	0	0	0	0	0	0
TOTAL LIABILITIES	111,169,229	131,632,409	129,437,242	2,195,168	123,278,653	8,353,756
Net Assets:						
[22] Unrestricted Fund Balance	7,297,586	10,844,398	\$10,844,398	0	10,416,645	427,754
[23] Temporarily Restricted Fund Balance	0	0	0	0	0	0
[24] Restricted Fund Balance	0	0	0	0	0	0
[25] Net Revenue/(Expenses)	(416,381)	(947,488)	(849,417)	(98,071)	942,750	(1,890,238)
[26] TOTAL NET ASSETS	6,881,205	9,896,910	9,994,981	(98,071)	11,359,394	(1,462,485)
[27] TOTAL LIABILITIES AND NET ASSETS	\$118,050,434	\$141,529,319	\$139,432,223	\$2,097,096	\$134,638,048	\$6,891,271
	\$0	\$0	\$0.00		\$0	

BANNING, CALIFORNIA
EIGHT MONTHS ENDING FEB 29, 2020

		CASH FLOW	
HEALTHCARE SYSTEM MINI CASH FLOW		Current	Year-To-Date
		Month	Year-To-Date
		02/29/2020	02/29/2020
BEGINNING CASH BALANCES			
[1]	Cash: Beginning Balances- HOSPITAL	12/31 \$604,026	06/30- 1,049,179.00
[2]	Cash: Beginning Balances- DISTRICT	12/31 2,108,145	06/30- 3,126,083
[3]	Cash: Beginning Balances TOTALS	12/31 \$2,712,171	06/30- \$4,175,262
Receipts			
[4]	Pt Collections	3,400,568	31,992,824
[5]	Tax Subsidies Measure D	50,174	1,505,581
[6]	Tax Subsidies Prop 13	0	738,858
[7]	Tax Subsidies County Supplemental Funds	0	104,181
[8]	IGT & other Supplemental (see detail below)	623,520	1,289,612
[9]	Draws/(Paydown) of LOC Balances	0	10,000,000
[10]	Other Misc Receipts/Transfers	150,541	1,965,075
TOTAL RECEIPTS		4,224,803	47,596,132
Disbursements			
[11]	Payroll/ Benefits	3,624,488	31,903,623
[12]	Other Operating Costs	2,611,702	18,674,831
[13]	Capital Spending	134,324	438,198
[14]	Debt serv payments (Hosp onlyw/ LOC interest)	(888,983)	(456,364)
[15]	Other (increase) in AP /other bal sheet	0	(394,889)
[16]	TOTAL DISBURSEMENTS	5,481,531	50,165,399
[17]	TOTAL CHANGE in CASH	(1,256,728)	(2,569,267)
ENDING CASH BALANCES			
[18]	Ending Balances- HOSPITAL	1/31 \$154,860	1/31 \$154,860
[19]	Ending Balances- DISTRICT	1/31 1,879,797	1/31 1,879,797
[20]	Ending Balances- TOTALS	1/31 \$2,034,657	1/31 \$2,034,657

ADDITIONAL INFO

[21]	LOC CURRENT BALANCES	10,000,000	10,000,000
[22]	LOC Interest Expense Incurred	46,712	219,473

SUPPLEMENTAL CASH FLOW SUMMARY

(By Program)		Current	Current
		Month	Year-To-Date
		02/29/2020	02/29/2020
IGT/SUPPLEMENTAL CASH INFLOWS			
[24]	HQAF Managed Care Funds	0	25,357
[25]	Prime IGT	0	525,000
[26]	Rate Range Managed Care IGTs	0	0
[27]	AB 113	0	0
[28]	HQAF FFS Direct Grants	0	503,027
[29]	IEHP MCE Bed Funds	33,622	82,414
[30]	MediCal Outpatient SRH Program	0	50,977
[31]	Foundation Contributions	111,000	163,112
[32]	AB 915 newly Eligible	0	0
[33]	Cost Report Settlements	0	35,514
[34]	Medi-CAL DSH	478,898	(95,789)
[35]	TOTALS (see line 8 above)	623,520	1,289,612

Patient Statistics

SAN GORGONIO MEMORIAL HOSPITAL
BANNING, CALIFORNIA
EIGHT MONTHS ENDING FEB 29, 2020

Line Ref #	Actual 02/29/20	Budget 02/29/20	Prior Year 02/28/19	STATISTICS	Year-To-Date			YTD % VAR Vs Bud	YTD % VAR Vs Prior Yr
					Actual 02/29/20	Budget 02/29/20	Prior Year 02/28/19		
Discharges									
[1]	195	265	223	Acute	1,864	2,017	1,869	-7.59%	-0.27%
[2]	3.28	3.20	3.28	O/P Adjustment Factor	3.34	3.28	3.28	1.99%	1.73%
[3]	639	848	733	Adjusted Acute Discharges	6,228	6,608	6,138	-5.75%	1.46%
[4]	19	23	18	Newborn	181	180	192	0.56%	-5.73%
[5]	214	288	241	Total Discharges	2,045	2,197	2,061	-6.92%	-0.78%
Patient Days:									
[6]	689	851	802	Acute	6,203	6,686	6,295	-7.22%	-1.46%
[7]	38	46	0	Newborn	362	360	328	0.56%	10.37%
[8]	727	897	802	Total Patient Days	6,565	7,046	6,623	-6.83%	-0.88%
Average Length of Stay (ALOS)									
[9]	3.53	3.21	3.60	Acute	3.33	3.31	3.37	0.40%	-1.20%
[10]	2.0	2.0	0.0	Newborn ALOS	2.0	2.0	1.7	0.00%	17.07%
Average Daily Census (ADC)									
[11]	23.8	29.3	27.7	Acute	25.4	27.4	25.8	-7.22%	-1.46%
[12]	1.3	1.6	0.0	Newborn	1.5	1.5	1.3	0.56%	10.37%
Emergency Dept. Statistics									
[13]	186	236	196	ED Visits - Admitted	1,701	1,793	1,636	-5.15%	3.97%
[14]	1,417	1,521	1,453	ED Visits - Higher Acuity Ops	12,365	12,502	12,578	-1.09%	-1.69%
[15]	1,851	1,805	1,888	ED - Rapid Care Visits Ops	15,343	14,679	14,547	4.52%	5.47%
[16]	3,454	3,562	3,537	Total ED Visits	29,409	28,974	28,761	1.50%	2.25%
[17]	5.39%	6.62%	5.54%	% of ER Visits Admitted	5.78%	6.19%	5.69%	-6.56%	1.68%
[18]	95.38%	88.91%	87.89%	ER Admissions as a % of Total	91.26%	88.91%	87.53%	2.64%	4.25%
Other Key Statistics:									
[19]	4,022	4,317	4,148	Total Outpatients Visits	34,341	35,062	34,021	-2.06%	0.94%
[20]	170	175	171	Observation Bed Days	1,243	1,372	1,355	-9.40%	-8.27%
[21]	19.8%	17.1%	17.6%	Obs. Bed Days as a % of Total	16.7%	17.0%	17.7%	-1.96%	-5.75%
[22]	426	524	499	Behavioral Health Visits	3,646	4,263	4,393	-14.47%	-17.00%
[23]	44	35	37	IP Surgeries	331	275	266	20.36%	24.44%
[24]	42	65	73	OP Surgeries	340	525	530	-35.24%	-35.85%
[25]	116	207	64	Outpatient Scopes	1,404	1,682	680	-16.53%	106.47%
Productivity Statistics:									
[26]	458.21	455.70	456.82	FTE's - Worked	438.44	455.70	426.30	-3.79%	2.85%
[27]	486.32	489.60	482.18	FTE's - Paid	474.64	489.60	464.13	-3.06%	2.26%
[28]	5.89	4.78	5.03	Worked FTE's per AOB	5.16	4.78	5.03	7.99%	2.60%
[29]	6.25	5.13	5.31	Paid FTE's per AOB	5.59	5.13	5.48	8.93%	2.01%
[30]	1.2434	1.2621	1.2621	Case Mix Index -Medicare	1.2943	1.2621	1.2621	2.55%	2.55%
[31]	1.0172	1.0419	1.0419	Case Mix Index - All payers	1.0588	1.0419	1.0419	1.62%	1.62%

A/R & CASH FLOW TRENDS

GROSS ACCTS RECEIVABLE BY PAYOR		FY 20	Prior Year	Monthly Trends			
		29-Feb-20	FY 19	FY 20	FY 20	FY 20	FY 20
		ACTUAL	JUNE	NOV	DEC	JAN	FEB
1	Blue Shield	235,129	233,330	197,194	260,000	296,045	235,129
2	Blue Cross	2,160,182	1,946,555	2,362,250	2,042,815	1,929,945	2,160,182
3	MediCal	2,931,618	1,701,380	2,620,067	2,960,419	2,663,483	2,931,618
4	IEHP /Other MediCal HMO	7,168,857	6,301,624	10,725,297	7,816,990	8,381,821	7,168,857
5	Champus /Other Govt	3,255,431	2,835,303	3,336,047	3,446,635	3,475,736	3,255,431
6	HMO/PPO/Commercial	8,546,604	7,323,981	7,428,094	7,351,542	7,778,951	8,546,604
7	Medicare	7,745,560	8,498,471	5,404,188	6,097,723	6,474,602	7,745,560
8	Self Pay/Credit Bals	5,709,143	6,670,232	6,353,626	6,599,688	6,279,471	5,709,143
9	Senior HMO	13,845,577	13,054,309	14,295,098	14,385,596	13,719,027	13,845,577
10	Workers Comp	235,196	645,516	590,275	657,837	315,858	235,196
11	TOT GROSS AR	51,833,299	49,210,701	53,312,136	51,619,247	51,314,939	51,833,299

PATIENT CASH COLLECTIONS		FY 20	FY 19	FY 20	FY 20	FY 20	FY 20
		Year-To Date	Year-To Date	NOV	DEC	JAN	FEB
		12	Blue Shield	320,544	301,203	41,747	31,126
13	Blue Cross	1,425,828	1,456,002	158,720	235,167	159,365	134,597
14	Medi-Cal	1,651,108	1,811,806	147,499	207,989	249,807	144,273
15	IEHP /Other MediCal HMO	5,311,712	5,289,448	623,078	896,604	695,028	625,514
16	Champus /Other Govt	793,378	590,243	108,046	84,421	84,804	68,860
17	HMO/PPO/Commercial	5,759,147	5,541,189	627,155	694,023	622,792	603,853
18	Medicare	5,981,689	5,452,465	547,789	815,339	707,683	519,453
19	Self Pay/Credit Bals	1,021,077	1,004,441	132,685	86,896	154,365	99,816
20	Senior HMO	9,106,519	7,921,610	977,299	1,077,650	1,314,028	1,148,032
21	Workers Comp	121,803	135,641	11,220	12,446	16,660	19,205
22	TOT CASH COLLECTIONS	31,172,260	29,504,048	3,375,239	4,141,663	4,039,564	3,400,568
23	Percent Change vs. Prior>						
23	% change vs. Prior yr.>		5.7%	116.0%	115.7%	115.4%	115.6%

GROSS DAYS IN AR BY PAYOR		FY 20	FY 19	TARGET	FY 20	FY 20	FY 20	FY 20
		Year-To Date	06/30/2019	10/31/2016	NOV	DEC	JAN	FEB
		24	Blue Shield	43.3	30.7	60.4	30.4	39.8
25	Blue Cross	58.4	55.6	44.6	62.4	55.6	58.4	64.4
26	MediCal	76.1	57.0	66.3	81.5	94.5	76.1	79.3
27	IEHP /Other MediCal HMO	36.6	27.3	27.5	46.6	33.7	36.6	33.1
28	Champus /Other Govt	173.6	147.6	132.2	167.1	159.7	173.6	142.0
29	HMO/PPO/Commercial	93.2	96.0	86.4	86.2	88.1	93.2	98.4
30	Medicare	54.7	58.0	36.3	47.1	51.8	54.7	63.9
31	Self Pay/Credit Bals	105.9	82.5	80.5	111.8	113.9	105.9	96.7
32	Senior HMO	66.0	64.5	59.5	67.1	69.8	66.0	67.8
33	Workers Comp	42.5	111.6	136.2	93.3	82.7	42.5	41.5
34	TOT GROSS DAYS IN AR	64.10	59.00	53.9	66.31	64.44	64.10	65.25

TAB I



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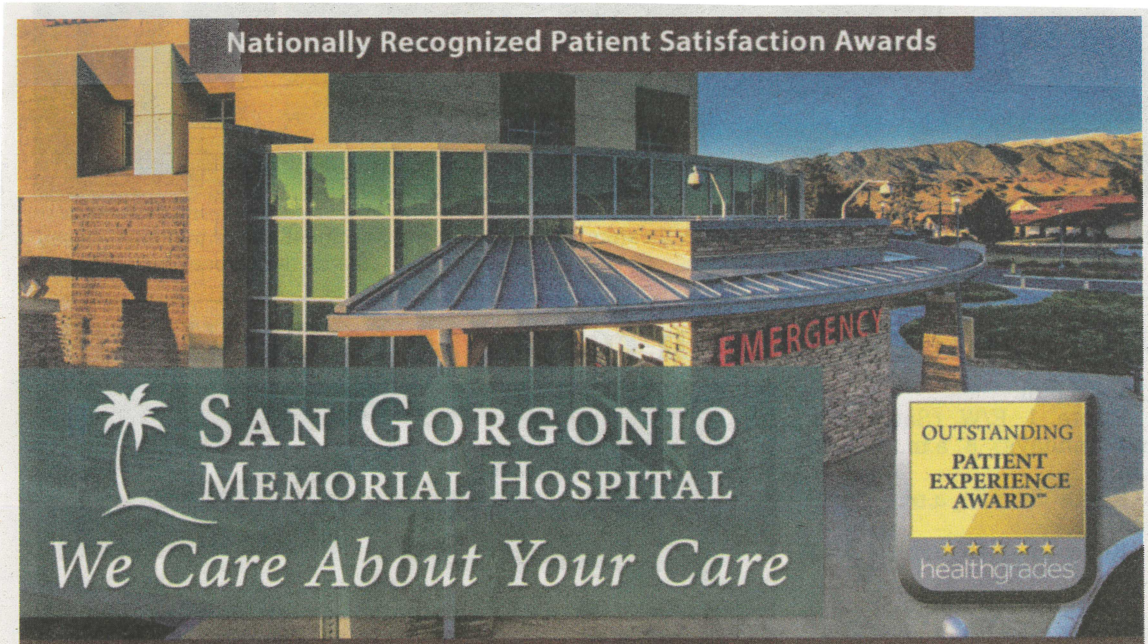


Safety first: hospital receives respirator masks donation

John Weeks, known for being the owner of the non-profit Museum of Pinball in Banning, also owns online tool distribution company Jabetc (a company of three employees) based out of the same property near Banning Municipal Airport.

Among things they sell are masks — from sandblasting head mask hood helmets and Mardi Gras carnival face masks, to these 1,500 N95 respirator masks that normally retail for \$29.99, which he donated Tuesday to San Gorgonio Memorial Hospital.

Among things they sell are



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Photo by David James Heiss

Retired nurse Georgia Sobiech was honored Tuesday evening during the San Geronimo Memorial Hospital Healthcare District's board meeting for her service to the board. She was appointed to the healthcare district's board in April 2018 and appointed to the San Geronimo Memorial Hospital Board in March 2019. She is moving to Canada to be closer to her family. In photo Sobiech (left) receives a plaque from hospital board Chairwoman Susan DiBiasi.

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