

AGENDA

REGULAR MEETING OF THE BOARD OF DIRECTORS Tuesday, April 4, 2023 – 4:00 PM

Modular C Classroom 600 N. Highland Springs Avenue, Banning, CA 92220

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

A five-minute limitation shall apply to each member of the public who wishes to address the Hospital Board of Directors on any matter under the subject jurisdiction of the Board. A thirty-minute time limit is placed on this section. No member of the public shall be permitted to "share" his/her five minutes with any other member of the public. (Usually, any items received under this heading are referred to staff for future study, research, completion and/or future Board Action.) (PLEASE STATE YOUR NAME AND ADDRESS FOR THE RECORD.)

On behalf of the Hospital Board of Directors, we want you to know that the Board acknowledges the comments or concerns that you direct to this Board. While the Board may wish to occasionally respond immediately to questions or comments if appropriate, they often will instruct the Hospital CEO, or other Hospital Executive personnel, to do further research and report back to the Board prior to responding to any issues raised. If you have specific questions, you will receive a response either at the meeting or shortly thereafter. The Board wants to ensure that it is fully informed before responding, and so if your questions are not addressed during the meeting, this does not indicate a lack of interest on the Board's part; a response will be forthcoming.

GENERAL TOPIC

III.	Antibiotic Stewardship Presentation	J. Lopez	verbal
OLD B	USINESS		
IV.	*Proposed Action - Approve Minutes • March 7, 2023, Regular Meeting	S. DiBiasi	A

NEW BUSINESS

V.	Hospital Board Chair Monthly Report	S. DiBiasi	verbal
VI.	CEO Monthly Report	S. Barron	verbal
VII.	April, May, & June Board/Committee Meeting Calendars	S. DiBiasi	В
VIII.	 * Proposed Action – Approve First Amendment to the Management Services Agreement between San Gorgonio Memorial Hospital and the San Gorgonio Memorial Healthcare District ROLL CALL 	S. Barron	С
IX.	Foundation Monthly Report	V. Hunter	verbal
X.	Committee Reports:		
	 Finance Committee March 28, 2023, regular meeting minutes * Proposed Action – Approve February 2023 Financial States (Approval recommended by Finance Committee 03/28/2023) • ROLL CALL 	· · · · · · · · · · · · · · · · · · ·	D
XI.	 * Proposed Action – Recommend approval to the Healthcare District Board for authorization to declare the existing Siemens Somatom Sensation 64 CT Scanner Model #8377520, Serial Number #55296 as surplus property and authorize the hospital to dispos of the unit as appropriate at fair market value. ROLL CALL 	J. Peleuses se	Е
XII.	 * Proposed Action – Recommend approval to the Healthcare District Board Presentation of Women's Clinic Midwifery Program Forecast and Authorization to Commence Project ROLL CALL 	D. Heckathorne	F
XIII.	 * Proposed Action – Approve Information Technology Network Service And Consulting Agreement with Helix Storm, Inc. And MDR Solution with Arctic Wolf ROLL CALL 	D. Heckathorne	handout
XIV.	 * Proposed Action – Approve Pharmacy 340b Program with the Craneware Group re: Outpatient Split Billing Rebate Program, Outpatient Retail Contract Pharma Rebates, and Inpatient Medications Rebate Program ROLL CALL 	D. Heckathorne cy	G

XV.	Chief of Staff Report * Proposed Action - Approve Recommendations of the Medical Executive Committee • ROLL CALL	S. Khalil, MD Chief of Staff	Η
XVI.	 * Proposed Action - Approve Policies and Procedures • ROLL CALL 	Staff	Ι
XVII.	Community Benefit events/Announcements/ and newspaper articles	S. DiBiasi	J
XVIII.	Future Agenda Items		
***	ITEMS FOR DISCUSSION/APPROVAL IN CLOSED SESSION	S. DiBiasi	
	Proposed Action - Recommend approval to Healthcare District Board - Medical (Health & Safety Code §32155; and Evidence Code §1157)	Staff Credentialin	ng
\blacktriangleright	Receive Quarterly Environment of Care/Life Safety/Utility Management Report (Health & Safety Code §32155)	t	
XIX.	ADJOURN TO CLOSED SESSION		
	coard will convene to the Open Session portion of the meeting approximately ion of Closed Session.	2 minutes after	the
	RECONVENE TO OPEN SESSION		
***	REPORT ON ACTIONS TAKEN DURING CLOSED SESSION	S. DiBiasi	
XX. *Actio	ADJOURN n Required	S. DiBiasi	

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.

I certify that on March 31, 2023, 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 March 31, 2023

ariel Whitley

Ariel Whitley, Executive Assistant

TAB A

REGULAR MEETING OF THE SAN GORGONIO MEMORIAL HOSPITAL BOARD OF DIRECTORS

March 7, 2023

The regular meeting of the San Gorgonio Memorial Hospital Board of Directors was held on Tuesday, March 7, 2023, in Modular C meeting room, 600 N. Highland Springs Avenue, Banning, California.

- <u>Members Present</u>: Susan DiBiasi (Chair), Shannon McDougall, Darrell Petersen, Ron Rader, Steve Rutledge (Vice Chair), Randal Stevens, Lanny Swerdlow, Dennis Tankersley
- Members Absent: None

Required Staff: Steve Barron (CEO), Pat Brown (CNO/COO), Daniel Heckathorne (CFO), Sherif Khalil, MD (Chief of Staff), Annah Karam (CHRO), Ariel Whitley (Executive Assistant), Angie Brady (CNE), John Peleuses (VP Ancillary and Support Services), Karan P. Singh, MD (CMO), Valerie Hunter (Foundation Director), Sal Sanchez (Director of Plant Operations), Joey Hunter (Direct of Security)

AGENDA ITEM		ACTION /
		FOLLOW-UP
Call To Order	Chair, Susan DiBiasi, called the meeting to order at 4:00 pm.	
Public Comment	No public comment.	
	1	
GENERAL TOPIC		
Highland Springs	Tripointe Homes and The City of Banning gave a brief presentation about	
Avenue Preliminary	their plan to expand and improve the bus bay that is located outside of the	
Bus Bay Improvement	hospital entrance.	
Exhibit		
OLD BUSINESS		
Proposed Action -	Chair, Susan DiBiasi, asked for any changes or corrections to the minutes	The minutes of the
Approve Minutes	of the February 7, 2023, regular meeting.	February 7, 2023,
F.I. 5 2022		regular meeting will
February 7, 2023,	There we none.	stand correct as
regular meeting.		presented.
NEW BUSINESS		
Hospital Board Chair	Board Chair, Susan DiBiasi briefly reported that she sat in on an	
Monthly Report	informative discussion with IT and Altera.	
month in the second		
CEO Monthly Report	Steve Barron, CEO, mentioned that he will be working on the	
	Community Benefit Plan that is set to be approved and published in May.	
	The Community Health Needs Assessment was previously approved and	
	uploaded to SGMH website. The plan needs to be approved at the May	
1	produce to 2 chill websiter the plan heeds to be approved at the fully	

				ACTION / FOLLOW-UP		
the Women's Clinic						
Calendars for March						
	Foundation Director, Valerie Hunter, gave the Foundation Monthly Report as included on the board tablets.					
	•	-Monthly Patient Car	e Services Report			
TS:				L		
coposed Action -2023 Financial report which was included on the board tablet. A copy of the Finance Committee's February 28, 2023, meeting minutes were also						
DiBiasi	Yes	McDougall	Yes	Statement as		
				presented.		
Swerdlow	Yes	Tankersley	Yes			
related taxes and tra It was noted that a Board.	vel costs relate	ed to installation. commended to the H		M.S.C. (McDougall/Rader) , the SGMH Board of Directors voted to recommend approval of the 5-year software lease with Premier, Inc., for a budgeting, financial reporting, and forecasting system to		
	the Women's Clinic approval later. Final Calendars for March Foundation Direct Report as included Angela Brady, CNE as included on the bo TS: Dan Heckathorne, C 2023 Financial report the Finance Commi included on the boar recommends approv BOARD MEMBEI DiBiasi Petersen Rutledge Swerdlow Motion carried. The contract calls for related taxes and tra It was noted that a Board. BOARD MEMBEI	the Women's Clinic is being wor approval later. Final decisions abo Calendars for March, April, and M Foundation Director, Valerie H Report as included on the board Angela Brady, CNE, gave the Bi as included on the board tablets. TS: Dan Heckathorne, CFO, reviewed 2023 Financial report which was the Finance Committee's Februar included on the board tablet. It recommends approval of the Janua BOARD MEMBER ROLL CAI DiBiasi Yes Petersen Yes Rutledge Yes Swerdlow Yes Motion carried. The contract calls for a 5-year ag related taxes and travel costs related It was noted that approval is re Board. BOARD MEMBER ROLL CAI DiBiasi Yes Petersen Yes	the Women's Clinic is being worked on and will com approval later. Final decisions about pay raises will take Calendars for March, April, and May were included on Foundation Director, Valerie Hunter, gave the Fou Report as included on the board tablets. Angela Brady, CNE, gave the Bi-Monthly Patient Car as included on the board tablets. TS: Dan Heckathorne, CFO, reviewed the Executive Summ 2023 Financial report which was included on the board the Finance Committee's February 28, 2023, meeting included on the board tablet. It was noted that the F recommends approval of the January 2023 Financial rep BOARD MEMBER ROLL CALL: DiBiasi Yes Rader Rutledge Yes Stevens Swerdlow Yes Tankersley Motion carried. The contract calls for a 5-year agreement at a total cos related taxes and travel costs related to installation. It was noted that approval is recommended to the F Board. BOARD MEMBER ROLL CALL: DiBiasi Yes McDougall Petersen Yes Rader It was noted that approval is recommended to the F Board.	Angela Brady, CNE, gave the Bi-Monthly Patient Care Services Report as included on the board tablets. TS: Dan Heckathorne, CFO, reviewed the Executive Summary of the January 2023 Financial report which was included on the board tablet. A copy of the Finance Committee's February 28, 2023, meeting minutes were also included on the board tablet. It was noted that the Finance Committee recommends approval of the January 2023 Financial report as presented. BOARD MEMBER ROLL CALL: DiBiasi Yes Petersen Yes Rutledge Yes Motion carried. The contract calls for a 5-year agreement at a total cost of \$313,880 plus related taxes and travel costs related to installation. It was noted that approval is recommended to the Healthcare District Board. BOARD MEMBER ROLL CALL: DiBiasi Yes Motion carried.		

AGENDA ITEM					ACTION / FOLLOW-UP			
Chief of Staff Report Proposed Action – Approve Recommendations of the Medical Executive Committee	M.S.C., (Stevens/Rutledge), the SGMH Board of Directors approved the Medical Executive Committee recommended approval items as							
	DiBiasi Petersen	Yes Yes	McDougall Rader	Yes Yes	submitted.			
	Rutledge	Yes	Stevens	Yes				
	Swerdlow	Yes	Tankersley	Absent				
	Motion carried.	105	TallKetSley	Absent				
Proposed Action – Approve Policies and Procedures	There were twenty board tablets preser	nted for approv	al by the Board.	res included on the	M.S.C., (Swerdlow/Rutledge) , the SGMH Board of Directors approved the policies and			
	DiBiasi	Yes	McDougall	Yes	procedures as			
	Petersen	Yes	Rader	Yes	submitted.			
	Rutledge	Yes	Stevens	Yes				
	Swerdlow	Yes	Tankersley	Absent				
	Motion carried.							
Community Benefit events/Announcement s/and newspaper articles	Miscellaneous info	rmation was in	cluded on the board	tablets.				
Future Agenda Items	Leapfrog S	cores						
Adjourn to Closed Session	Chair, DiBiasi rep acted upon during			nd discussed and/or				
	 Recommer Staff Crede Receive Quint 							
	The meeting adjour	rned to Closed	Session at 5:17 pm.					
Reconvene to Open Session	The meeting adjourned of the request of	The meeting adjourned to Closed Session at 5:17 pm. The meeting adjourned from closed session at 5:42 pm. At the request of Chair DiBiasi, Ariel Whitley reported on the actions aken/information received during the Closed Session as follows:						
	> Recommer	-	to the Healthcare	District Board –				

AGENDA ITEM		ACTION / FOLLOW-UP
	 Received Quarterly Corporate Compliance Committee Report 	
Adjourn	The meeting was adjourned at 5:43 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 Ariel Whitley, Executive Assistant

TAB B



April 2023

Board of Directors Calendar

Sun	Mon	Tue	Wed	Thu	Fri	Sat
						1
2	3	<i>4</i> 4:00 pm Hospital Board Meeting 6:00 pm Healthcare District Board Meeting	5	6	7	8
9 9	10	11	12	13	14	15
16	17	18	<i>19</i> 9:00 am HR Commit- tee Meeting 10:00 am Community Planning Meeting	20	21	22
23	24	25 9:00 am Finance Committee	26 ADMIN. Professionals Day!	27	28	29
30						



May 2023

Board of Directors Calendar

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2 4:00 pm Hospital Board Meeting 6:00 pm Healthcare District Board Meeting	3	4	5	6 National Nurses Week 5/6-5/12
7 National Hospital Week 5/7-5/13.	8	9	10	11	12	13
14 Motheq ² DAY	15	16	17 5:00 pm Measure D Mtg. 5:15 pm Measure A Mtg.	18	19	20
21	22	23	24	25	26	27
28	29	30 9:00 am Finance Committee	31			



June 2023

Board of Directors Calendar

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
			7	0		10
4	5	<i>6</i> 4:00 pm Hospital Board Meeting	7	8	9	10
		6:00 pm Healthcare District Board Meeting				
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27 9:00 am Finance Committee	28	29	30	
		10:00 Executive Committee				

TAB C

FIRST AMENDMENT

TO THE

MANAGEMENT SERVICES AGREEMENT

SAN GORGONIO MEMORIAL HOSPITAL

This First Amendment to the Management Services Agreement (this "Amendment ") is entered into as of April 4, 2023 (the "Amendment Date"), by and between San Gorgonio Memorial Hospital, a California nonprofit public benefit corporation ("Manager") and San Gorgonio Memorial Healthcare District, a California public agency (the "District"). Manager and the District are sometimes hereinafter referred to collectively as "Parties" and individually as "Party".

RECITALS

A. The District and Manager entered into Management Services Agreement (the "**Agreement**") effective as of July 1, 2020 (the "**Effective Date**"), pursuant to which the District retained Manager to provide pharmacy services and turn-key management services in the day-to-day operation of San Gorgonio Memorial Hospital, a 79-bed general acute care hospital owned by the District and located at 600 North Highland Springs Avenue, Banning, California, 92220 (the "Hospital").

B. The Parties acknowledge and agree that Article III. (Financial Management) of the Agreement does not accurately reflect how revenue from governmental and non-governmental payors has been collected and deposited by Manager since the Effective Date, and the Parties wish to amend the Agreement to accurately reflect how Manager has been collecting and depositing such revenue, and to make certain other revisions.

C. Accordingly, as of the Effective Date, Article III. (Financial Management) of the Agreement is hereby amended and restated in its entirety to provide for the collection and deposit of funds received as payment for health care services into a bank account or accounts and to provide for the payment expenses and expenditures as provided in the Agreement from the same account or accounts.

NOW, THEREFORE, the Parties agree as follows:

AGREEMENT

1. <u>Incorporation of Recitals</u>. The Recitals set forth above are true and correct and are incorporated into this Amendment by this reference.

2. **Incorporation of Defined Terms.** All terms, phrases and words indicated to be defined terms by initial capitalization in this Amendment that are not specifically defined in this Amendment shall have the meaning set forth in the Agreement.

3. <u>Article III</u>. The Parties agree to amend and restate Article III (Financial Management) of the Agreement as follows:

3.1. Assignment of Claims. To the extent permitted by law, the District hereby assigns, exclusively to Manager, on the District's behalf, all claims, demands and rights of the District to charge, bill, collect and receive all revenue from patients, insurance companies, Medicare, Medicaid, and other payors. The District agrees to execute any and all documents necessary to secure and perfect Manager's interest in such claims, revenue and accounts receivable.

3.2. **Operating Account.** Except for taxes and assessments collected by the District, all revenue received, whether collected in the name of the District or Manager, shall be directly deposited in a bank account or accounts (collectively, the "Operating Account") established by Manager for the exclusive benefit of the District at such bank as Manager may from time to time designate in its sole and absolute discretion (the "Bank"). The District agrees to do all things necessary or desirable by Manager to authorize the deposit of such payments into the Operating Account. If either of the Parties receives any such payments in the form of checks, it will use its best efforts to promptly deposit such checks into the Operating Account. Manager shall designate such persons who shall have authority to write checks upon or otherwise authorize the disbursement of funds from such Operating Account ("Authorized Signer"). Manager shall have the sole and exclusive right to designate an Authorized Signer, and to write checks upon and authorize disbursements from such Operating Account, to pay the Hospital Expenses (as defined in Section 4.1 below) and the Management Fee (as defined in Section 4.2 below). Manager agrees that neither Manager nor its agents will encumber, remove, withdraw or authorize the removal or withdrawal of any funds from the Operating Account for any purpose except for Hospital Expenses or the Management Fee unless approved by the District Board.

4. **Transfer of Operating Account Upon Termination.** The Parties agree to add a new Section 5.3 to the Agreement as follows:

5.3 Transfer of Operating Account Upon Termination. Upon any termination or expiration of this Agreement, Manager shall promptly transfer control and ownership of the Operating Account to District. Manager agrees to do all things necessary or desirable by District to authorize and provide for the transfer of the Operating Account.

5. <u>**Renumbering**</u>. The Parties agree to renumber Section 5.6 (Payments Upon Termination) to Section 5.4 and to renumber Section 5.7 (Transition of Management Upon Termination) to Section 5.5.

6. <u>Governing Law.</u> This Amendment shall be construed and governed in accordance with the laws of the State of California.

7. <u>Entire Agreement.</u> Except as otherwise indicated in this Amendment, there are no other agreements or understandings, written or oral, between the parties, regarding this

Amendment other than as set forth herein. This Amendment shall not be modified or amended except by a written document executed by both parties to this Amendment.

8. <u>**Counterparts.**</u> This Amendment may be executed in counterparts, each of which shall be deemed to be an original, and all of such counterparts shall together constitute one agreement.

9. <u>Conflicting Provisions.</u> If there is any conflict or inconsistency between this Amendment and the Agreement, the provisions of this Amendment shall control and govern.

10. <u>No Other Changes.</u> Except as set forth in this Amendment, no other modifications are being made to the Agreement, and the Agreement shall remain in full force and effect.

11. **Effective Date.** This Amendment is effective as of the Effective Date, even though the Parties may have executed it after such date.

[Signature page to follow]

IN WITNESS WHEREOF, the parties have executed this Amendment on the dates set forth below, to be effective as of the Effective Date.

MANAGER:

SAN GORGONIO MEMORIAL HOSPITAL

By:_____ Its: _____

Date: _____

DISTRICT:

SAN GORGONIO MEMORIAL HEALTHCARE DISTRICT

By:_____ Its: _____

Date: _____

TAB D

REGULAR MEETING OF THE SAN GORGONIO MEMORIAL HOSPITAL BOARD OF DIRECTORS

FINANCE COMMITTEE Tuesday, March 28, 2023

The regular meeting of the San Gorgonio Memorial Hospital Board of Directors Finance Committee was held on Tuesday, March 28, 2023, in Classroom B, 600 N. Highland Springs Avenue, Banning, California.

Members Present: Susan DiBiasi, Ron Rader, Steve Rutledge

Members Absent: Dennis Tankersley

<u>Required Staff</u>: Steve Barron (CEO), Angela Brady (CNO/COO), Daniel Heckathorne (CFO), Annah Karam (CHRO) Ariel Whitley (Executive Assistant), Karan P. Singh, MD (CMO), John Peleuses (VP Support & Ancillary Svs.)

AGENDA ITEM		DISC	USSION		ACTION / FOLLOW-UP		
Call To Order	Susan DiBiasi cal	FOLLOW-OF					
Public Comment	No public present						
OLD BUSINESS	<u> </u>						
Proposed Action - Approve Minutes February 28, 2023, regular meeting	Approve Minutesthe February 28, 2023, regular meeting. There were none.February 28, 2023,						
NEW BUSINESS							
Proposed Action – Recommend Approval to Hospital Board of Directors - Monthly Financial Report (Unaudited) – February 2023	Daniel Heckatho finance report as The month of Jan budgeted EBIDA It was noted that ROLL CALL:	M.S.C. (Rutledge/Rader), the SGMH Finance Committee voted to recommend approval of the Unaudited January 2023 Financial report to the Hospital Board of Directors.					
	DiBiasi Rutledge	Yes Yes	Rader Tankersley	Yes Absent			

AGENDA ITEM		DISC	CUSSION		ACTION / FOLLOW-UP				
	Motion carried.								
Proposed Action – Recommend Approval to Hospital Board and Healthcare District Board for authorization to declare existing Siemens Somatom Sensation 64 CT Scanner Model #8377520, Serial Number #55296 as	As the hospital w Primary Stroke Ce Siemens Somator Therefore, it is equipment as surp as appropriate. It was noted that the Healthcare Dis ROLL CALL:	M.S.C. (Rader/DiBiasi), the SGMH Finance Committee voted to recommend authorization to declare existing Siemens Somatom Sensation 64 CT Scanner Model #8377520, Serial Number #55296 as surplus property and							
surplus property and	DiBiasi Rutledge	Yes Yes	Rader Tankersley	Yes Absent	authorize the hospital				
authorize the hospital to dispose of the unit as appropriate at fair market value.	Motion carried.			Ausent	to dispose of the unit as appropriate at fair market value to the Hospital Board of Directors and the Healthcare District Board of Directors.				
Proposed Action - Recommend approval to Hospital Board and the Healthcare District Board • Presentation of	1206d clinic to Gorgonio Memori A presentation wa	better serve th ial Healthcare I as given by Dar	ne needs of wome District n Heckathorne and	nity to establish a en within the San Rhonda Gunther to	M.S.C. (Rader/DiBiasi), the SGMH Finance Committee voted to recommend approval				
Women's Clinic Midwifery Program Forecast and Authorization to Commence Project	request authorizat It was noted that the Healthcare Dis ROLL CALL:	to commence the Women's Clinic Midwifery Program project to the Hospital Board of Directors and the Healthcare District							
	DiBiasi	Yes	Rader	Yes	Board of Directors.				
	Rutledge Motion carried.	Yes	Tankersley	Absent					
Proposed Action – Recommend approval to Hospital Board • Information Technology Network Service and Consulting Agreement with Helix Storm, Inc.	Dan Heckathorne and infrastructure an agreement with It was noted that a ROLL CALL:	M.S.C. (DiBiasi/Rutledge), the SGMH Finance Committee voted to recommend approval to enter into an IT Network Service and Consulting							

AGENDA ITEM		DIS	CUSSION		ACTION / FOLLOW-UP
and MDR Solution with Arctic Wolf Proposed Action – Recommend approval	program. CMS ma	ikes available	Rader Tankersley presentation about t a drug rebate pro	gram for hospitals	Agreement with Helix Storm, Inc., and MDR Solution with Artic Wolf to the Hospital Board of Directors.M.S.C. (Rutledge/Rader), the
to Hospital Board Pharmacy 340b Program with the Craneware Group re: Outpatient Split Billing Rebate Program, Outpatient Retail Contract Pharmacy Rebates, and	Medicaid (Medi-Ca access this progra nationally recogniz obtain these rebates	al) patients. m via the s ed vendor wh s.	erve a disproporti San Gorgonio Mem services of the Cra hich helps hospitals a commended to the Ho	norial Hospital can aneware Group, a and other providers	SGMH Finance Committee voted to recommend approval to participate in the Pharmacy 340b program with the Craneware Group re: Outpatient Split Billing Rebate Program, Outpatient
Inpatient Medications Rebate Program	DiBiasi Rutledge Motion carried.	Retail Contract Pharmacy Rebates, and Inpatient Medications Rebate Program to the Hospital Board of Directors.			
Future Agenda Items	None				
Next Meeting	The next regular Fi 2023 @ 9:00 am.	nance Comm	ittee meeting will b	e held on April 25,	
Adjournment	The meeting was a	djourned at 1	1:01 am.		

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.

Minutes respectfully submitted by Ariel Whitley, Executive Assistant



SAN GORGONIO MEMORIAL HOSPITAL BANNING, CALIFORNIA

Unaudited Financial Statements

for

EIGHT MONTHS ENDING FEBRUARY 28, 2023

FY 2023

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.

Note: Because these reports are prepared for internal users only, they do not purport to conform to the principles contained in U.S. GAAP.

Certified by: Daniel R. Heckathorne Daniel R. Heckathorne

CFO

San Gorgonio Memorial Hospital

Financial Report - Executive Summary

For the Month of February, 2023 and Eight Months Ended February 28, 2023 (Unaudited)

Profit/Loss (EBIDA) Summary (MTD) Positive and (YTD) Negative

The month of February resulted in positive \$319K Earnings before Interest, Depreciation and Amortization (EBIDA) compared to budgeted EBIDA loss of \$931K.

YTD – The YTD February results were a negative \$6.85M Earnings before Interest, Depreciation and Amortization (EBIDA) compared to budgeted EBIDA loss of \$9.75M.

Month – Adjustments and Items of Note:

- The February Average Daily Census was 21.3 compared to January's 21.1 (Budget = 34.7)
- Emergency visits and Surgery cases were also below projections.
- Labor Costs were under budget by \$378K, mostly reflecting the low patient volumes.
- There was a \$364K reversal of Health Insurance expense that was over accrued as Purchased Services in September, which favorably impacts the current month's EBIDA by this amount.
- There was a \$161K reversal of Drug expense that was over accrued in January which favorably impact's the current month's EBIDA by this amount.
- The Hospital received an additional \$185K from the IEHP quality award and \$172K from a 2018/19 DSH re-distribution.
- \$426K of HQAF Supplemental funding (received in January) was booked in February.
- The Medicare "Low Volume Adjustment" payment was reinstated by federal legislation. This had a favorable impact to Net Revenues in January of \$88K and will avoid the future loss of approximately \$712K on a yearly basis.
- The favorable EBIDA impact (excluding the labor variance) of the "Adjustments and Items of Note" was \$1.40M.

Month - February's inpatient average daily census was 21.3. Adjusted Patient Days were 15% under budget (1,644 vs. 1,935) which includes the Patient Days which were 38% below budget (597 vs. 972). Emergency Visits were 7.9% under budget (2,956 vs. 3,209), and Surgeries were under budget by 10.8 % (107 vs. 120).

YTD - Inpatient average daily census was 22.3. Adjusted Patient Days were 9% under budget (14,513 vs. 15,955) and Patient Days were 32% below budget (5,431 vs. 8,015). Emergency Visits were 6% over budget (28,115 vs. 26,467), and overall Surgeries were 4.4% under budget (946 vs. 990).

Patient Revenues (MTD) Negative (YTD) Negative

Month - Net Patient Revenues in February were \$554K (11%) below budget. This continues to be impacted by the Deductions from Revenues consisting of the higher-than-expected mix of Outpatient Revenues (compared to Inpatient Revenues), which generally pay about 10% of charges compared to Inpatient Revenues which generally pay about 18% of charges. This also directly relates to the much lower-than-expected count of Inpatient Days. The Residency Program recovery was \$41K and is included in the Deductions from Revenues.

YTD – Net Patient Revenues were \$4.9M (12%) below budget. This is markedly impacted by the Deductions from Revenues consisting of the higher-than-expected mix of Outpatient Revenues (compared to Inpatient Revenues), which generally pay about 10% of charges compared to Inpatient Revenues which generally pay about 18% of charges. This also directly relates to the lower- than-expected Inpatient Days. The Deductions are favorably offset by \$369K Residency Program recovery.

Total Operating Revenues (MTD) Negative & (YTD) Negative

Month - Operating Revenue in February was \$94K under budget. This is mostly impacted by the Net

Patient Revenues being \$554K under budget and the Non-Patient Revenues being \$460K over budget. **YTD** - Operating Revenue was \$3.41M below budget. This was impacted by the \$4.90M negative variance in Net Patient Revenues for the eight months and a \$1.49M positive variance in Other Income.

Operating Expenses (MTD) Positive & (YTD) Positive

Month - Operating Expenses in February were \$6.09M and were under budget by \$1.34M. Key items that impacted overall Expenses were as follows: 1) Salaries and Wages, Benefits, and Contract Labor were collectively \$378K under budget, however, this included an unfavorable Contract Labor variance of \$69K primarily from OB and Med-Surg; 2) Purchased Services were \$540K below budget which included a) the reversal of the \$364K amount that had been over accrued in September, b) favorable variances in Altera (Allscripts) fees (\$69K), along with favorable variances in I/T, Legal fees, and Plant Operations; 3) Supplies were under budget by \$383K, which can be attributed to a) reversal of January's over accrual for drug expense of \$161K, b) lower than expected Inpatient Admissions, and c) no covid surges. Key variances include general Medical Supplies (\$26K) and Non-Medical Supplies (\$40K); 4) Utilities and Repairs were over budget \$24K and \$26K respectively due to seasonal variances; 5) Other Expense had a positive variance of \$51K, impacted by no licensing fees or dues in February. YTD – Operating Expenses were \$55.2M and were under budget by \$6.3M. Key items that impacted overall Expenses were as follows: 1) Salaries, Benefits, and Contract Labor were a combined \$1,82M under budget which was impacted by the PTO Flex-Down variance during the summer months along with the much lower than expected Patient Days workloads; 2) Physician fees were \$377K under budget and a significant portion of the variance relates to the Residency Program (\$247K) and Anesthesia fees (\$75K); 3) Purchased Services showed a favorable variance of \$1,79M due to Allscripts/Navigant (\$724K), I/T (\$296K), Dialysis (\$131K), along with various other Service Agreements being lower than expected; 4) Supplies were under budget by \$2.43M, which included Drugs (\$1.17M) and General Medical Supplies (\$758K) and can be attributable to a) much lower than expected Inpatient Admissions, b) no covid surges thus far, and c) not experiencing the full impact of inflation which is expected to accelerate over the remainder of the year. Note: Although there has been success in controlling expenses and there are some significant favorable variances, there may be some expenses which have not fully materialized in the first 8 months of the year, and this could have some impact on future months' expenses.

Balance Sheet/Cash Flow

Patient cash collections in February totaled \$5.64M compared to January (\$6.03M) and December (\$4.11M). The Gross A/R Days decreased to 69, down from 74.1 in January and 76.2 in December. A/R collections in January and February have started to recover from the I/T system down-time in November, the Christmas holiday time, and complications from the Altera 22.1 E.H.R. upgrade in early January.

Cash balances were \$6.26M compared to \$7.98M in December. Due to improved cash collections and receipt of the \$1.085M Quality performance payment, the Accounts Payable dropped from \$11.3M in January to \$8.6M in February; the Line of Credit balance remained at \$6M. Other items of note include a liability reflecting \$1.24M payable to Medicare for outliers and sequestration. Also, the semi-annual bond interest payments made in February caused a \$1.84M drop in Current Bond Interest Payable.

Concluding Summary

Positive takeaways:

1) EBIDA was positive due to the one-time adjustments/income totaling \$1.40M.

2) Assuming the prorated expected Supplemental Pay had been accrued through February, the YTD EBIDA (including allowance for payment of operating/software leases) would be \$2.85M. This positive performance is essential as we head into the next fiscal year, as the 2024 QIP revenues are projected to be reduced by over \$2M from the current year amount.

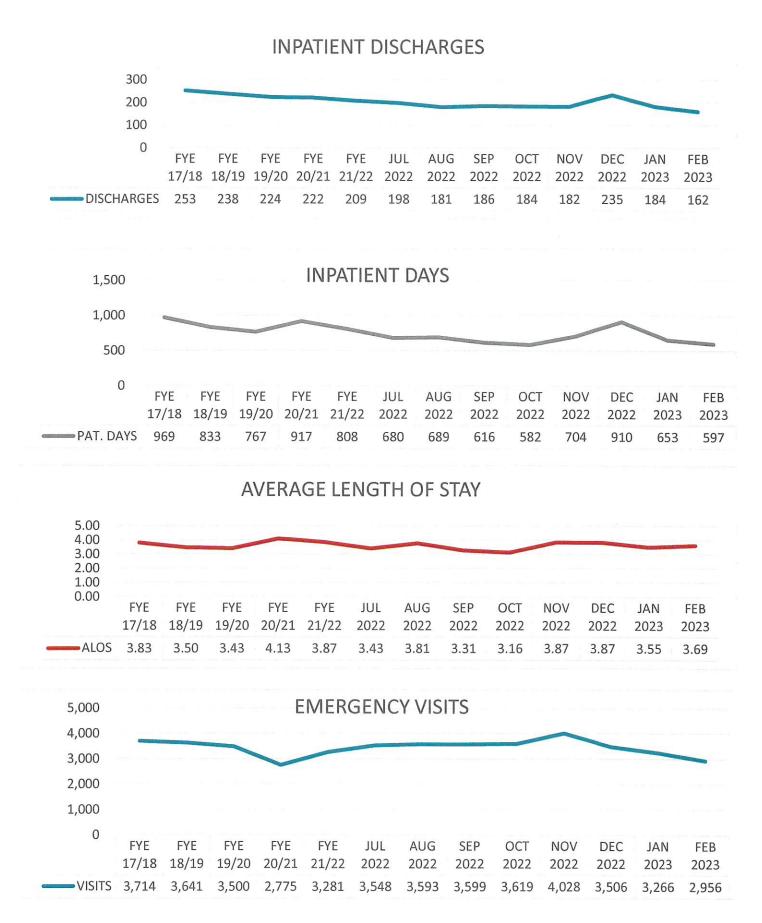
Negative takeaways: Inpatient Days were again below expectations for a "normal" February.

	Ĩ
Inpatient Admissions/Discharges (Monthly Average)	Represents number of patients admitted/discharged into and out of the hospital.
Patient Days (Monthly Average)	Each day a patient stays in the hospital is counted as a patient day. This count is normally done at midnight.
Average Daily Census (Inpatient)	Equals the average number of inpatients in the hospital on any given day or month.
Average Length of Stay (Inpatient)	Represents that average number of days that inpatients stay in the hospital.
Emergency Visits (Monthly Average)	Represents the number of patients who sought services at the emergency room.
Surgery Cases - Excluding G.I. (Monthly Average)	Equals the number of patients who had a surgical procedure(s) performed.
G.I. Cases (Monthly)	Number of patients who had a gastrointestinal exam performed.
Newborn Deliveries (Monthly)	Number of babies delivered.
PRODUCTIVITY	
Worked FTEs (includes Registry FTEs)	Represents an equivalancy of full-time staff worked. One FTE is equivalent of working 40 hours per week, 80 hours per pay period, 173.3 hours per 30 day month, or 2,080 hours in a 52 week year. This calculation divides the number of hours worked by the number of hours work period (40, 80, etc.) Example: 340 hours worked in an 80 hour pay period = 4.25 FTE's
Worked FTES per APD	Divides the Total Worked FTE's by the daily average of the Adjusted Patient Days.
Paid FTEs (includes Registry FTEs)	Represents an equivalancy of full-time staff paid. One FTE is equivalent of working 40 hours per week, 80 hours per pay period, 173.3 hours per 30 day month, or 2,080 hours in a 52 week year. This calculation divides the number of hours paid (includes all hours paid consisting of worked hours, PTO hours, sick pay, etc.) by the number of hours in the respective work period (40, 80, etc.) Example: 500 hours paid in an 80 hour pay period = 6.25 FTE's.
Paid FTES per APD	Divides the Total Paid FTE's by the daily average of the Adjusted Patient Days.
ADJUSTED PATIENT DAYS	This is a blend of total patient days stayed in the hospital for a month, plus an equivalency factor (based on average inpatient revenues in order to account for outpatient workloads.

3-A

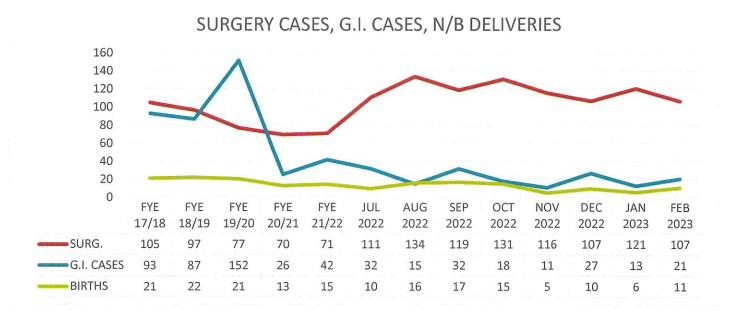
STATISTICS

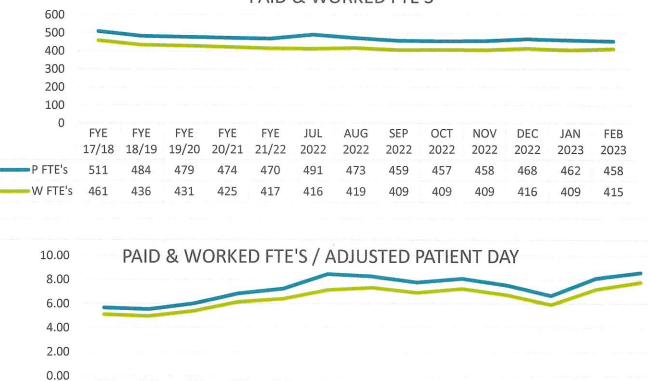
SAN GORGONIO MEMORIAL HOSPITAL



3-B

SAN GORGONIO MEMORIAL HOSPITAL





FYE

17/18

5.69

5.13

PFTES/APD

-WFTES/APD

FYE

18/19

5.55

5.00

FYE

19/20

6.01

5.41

FYE

20/21

6.89

6.18

FYE

21/22

7.27

6.45

PAID & WORKED FTE'S

3-1

JUL

2022

8.49

7.18

AUG

2022

8.31

7.37

SEP

2022

7.80

6.94

OCT

2022

8.11

7.27

NOV

2022

7.56

6.76

DEC

2022

6.70

5.96

JAN

2023

8.15

7.22

FEB

2023

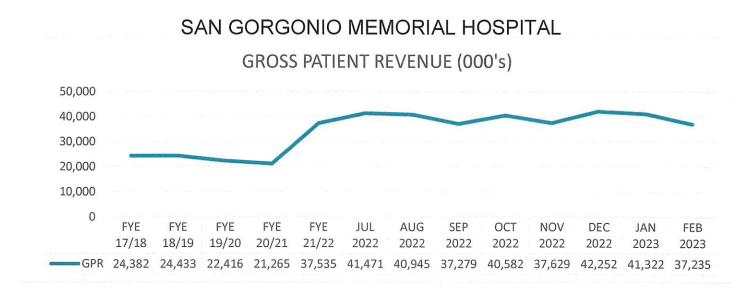
8.63

7.82

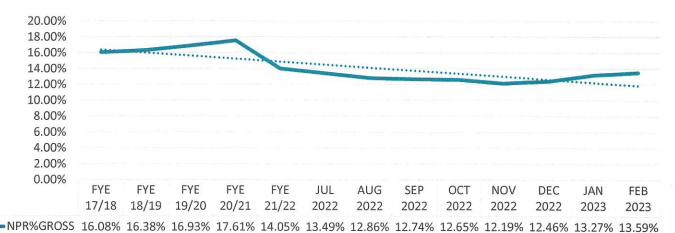
Gross Patient Revenue (000's) (Monthly Ave.)	Represents total charges (before discounts and allowances) made for all patient services provided.
Net Patient Revenue (NPR) (000's) (Monthly Ave.)	Equals the sum of all (patient) charges for services provided that are due to the hospital, less estimated adjustments for discounts and other contractual disallowances for which the patients may be entitled.
NPR as % of Gross	Reflects the percentage of Gross Patient Revenues (charges) that are expected to be collected. Calculated by dividing Net Patient Revenue by the Gross Patient Revenue.
Total Operating Revenue (000's) (Monthly Ave.)	This reflects all Revenues available for payment of Operating Expenses. This includes Net Patient Revenue plus all other forms of miscellaneous Revenues.
Salaries, Wages, Benefits & Contract Labor (000's) (Monthly Ave.)	Represents the total staffing expenses of the Hospital
SWB + Contract Labor as % of Total Operating Revenue	SWB + Contract Labor as % of Total Operating Revenue Identifies what portion the Operating Revenues are spent on staffing costs.
Total Operating Expense (TOE) (000's)(Monthly Ave.)	Operating Expense reflects all costs needed to fund the Hospital's business operations.
 TOE as % of Total Operating Revenue 	Identifies the relationship that Operating Expenses have to the Total Operating Revenues.
EBIDA (000's)(Monthly Average)	Earnings Before Interest, Depreciation, and Amortization. This reflects the difference between Net Operating Revenues and Total Operating Expense. This is a quick measurment of the Hospital's ability to meet its financial obligations and have additional funds for equipment replacement and future growth of the organization.
EBIDA as % of NPR	This measurement is a guage of the surplus (or deficit) of funds available for operations and future growth.
Net Patient Revenue vs. Total Labor Expense	This measurement illustrates that Net Patient Revenues basically only cover Total Labor Expense, and that all of the Other Revenues and Supplemental Incomes are necessary to cover the remaining operational Expenses and EBIDA required to operate the Hospital.
Operating Revenues (Normalized), Expenses, Staffing Expenses, and EBIDA (Normalized)	This graph illustrates the "normalization" of Operating Revenues and EBIDA, by reallocating proportionate Supplemental Revenues and related Expenses into the current month and YTD results.

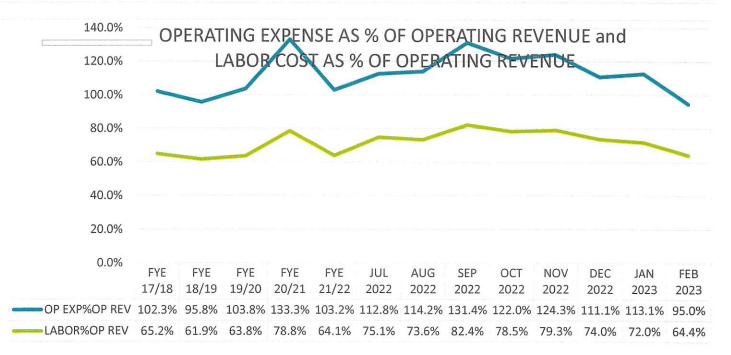
3-7

INCOME STATEMENT

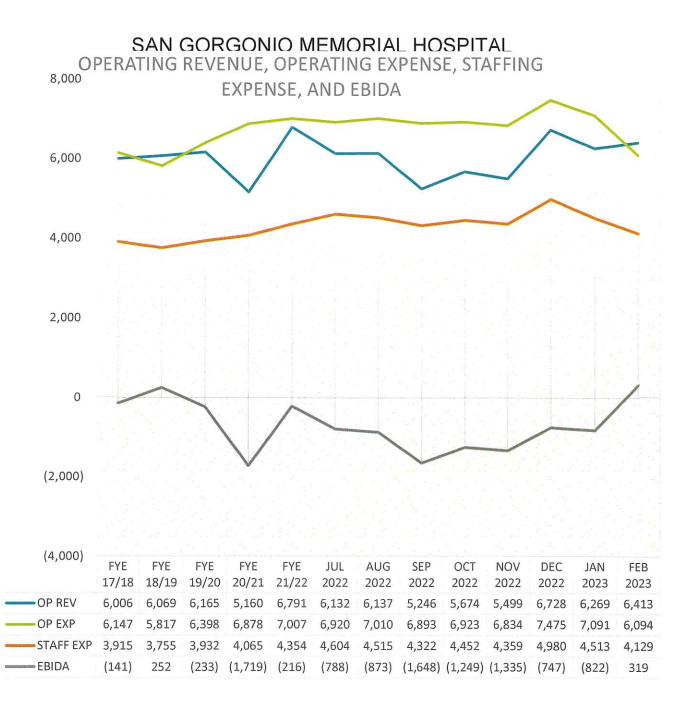


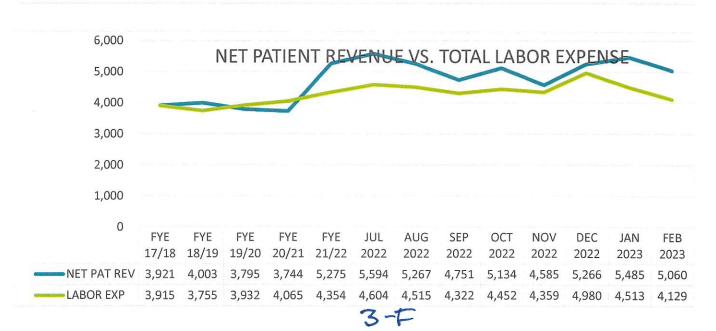
NET PATIENT REVENUE AS % OF GROSS





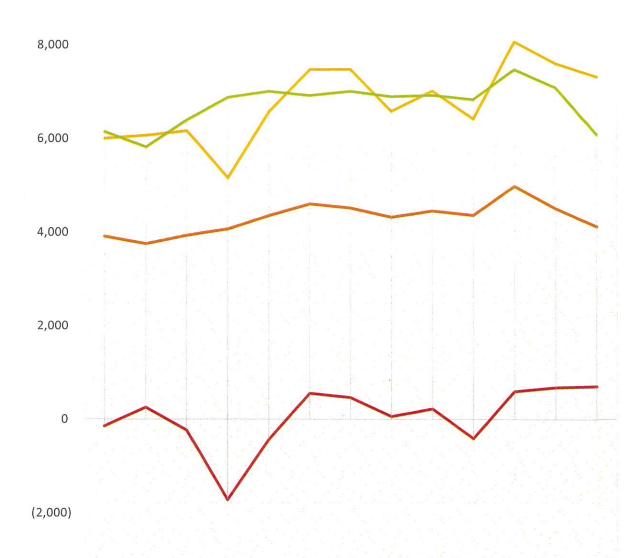
3-E





SAN GORGONIO MEMORIAL HOSPITAL

OPERATING REVENUE (NORMALIZED), OPERATING EXPENSE, ^{10,00}9TAFFING EXPENSE, AND EBIDA (NORMALIZED) (000's)



(4,000)	FYE 17/18	FYE 18/19		FYE 20/21	FYE 21/22					NOV 2022	DEC 2022	JAN 2023	FEB 2023
REV NORMAL	6,006	6,069	6,165	5,160	6,569	7,472	7,477	6,586	7,014	6,418	8,067	7,609	7,326
OP EXP	6,147	5,817	6,398	6,878	7,007	6,920	7,010	6,893	6,923	6,834	7,475	7,091	6,094
LABOR EXP	3,915	3,755	3,932	4,065	4,354	4,604	4,515	4,322	4,452	4,359	4,980	4,513	4,129
	(141)	252	(233)	(1,719)	(438)	552	467	56	215	(416)	593	679	708

3-G

SAN GORGONIO HEALTHCARE DISTRICT & HOSPITAL - BANNING, CA Month-to Month FYE June 30, 2023

$ \begin{array}{c c c c c c c c c c c c c c c c c c c $	FYE 22/23 FY 8/3/12022 6 13,463,161 5 - 27,481,674 - 27,484,635 40,944,835	22/23 2022 Reclass/Adjust		FYE 22/23	FYE 22/23	FYE 22/23	FYE 22/23	FYE 22/23
Simple Revenue Determit view Determit view <thdetermit th="" view<=""> Determit</thdetermit>	8/3/12022 5 13,463,161 \$ 13,463,161 \$ 27,481,1574 27,481,1574 40,944,835							
International problem (accord) International problem (accord) <thinternational (accord)<="" problem="" th=""> <thinternati< td=""><td>13,463,161 \$ - 27,481,574 - 40,944,835</td><td></td><td>st. 10/31/2022</td><td>11/30/2022</td><td>12/31/2022</td><td>1/31/2023</td><td>2/28/2023</td><td>6/30/2023</td></thinternati<></thinternational>	13,463,161 \$ - 27,481,574 - 40,944,835		st. 10/31/2022	11/30/2022	12/31/2022	1/31/2023	2/28/2023	6/30/2023
$ \begin{array}{c c c c c c c c c c c c c c c c c c c $	13,463,161 \$ - 27,481,674 - 40,944,835							
		13,156,157	\$ 13,207,417	\$ 14,560,451 \$	\$ 17,505,552 \$	\$ 15,327,216 \$	13,691,246 \$	116,697,544
$ \begin{array}{c} \matrix matrix $			-	-				
Hole for the formation of the form		700'77	100,416,12	23,008,308	24,/40,141 \$	698,488,62 ¢	23,543,943	561,110,202
Total Cross Partient Revenue to the standard								10000
Outcher Fran Revene		37,279,018 0	0 40,581,924	37,629,419	42,251,693	41,322,085	37,235,189 \$	318,715,337
Bit Charles (193,513) (133,513) (133,513) (133,513) (133,513) (133,113)								
Click Expense (motor)		(30.986.845) 124.810	0 (34.683.286)	(32.035.399) \$	\$ (35.904.405) \$	\$ (35.468.343) \$	(30.914.713)	(269.631.375)
Offentionality (C) 0					(1.015.237)	(353,998)		(7.132.317)
Total Deriv Cires (B0.01) (B0.617) (B1.617) (B1.617) (B1.617) (B1.612) (B1.617) (B1.612) (B1.617) (B1.617) (B1.612) (B1.617) (B1.612) (B1.617) (B1.612)		•	0	0				
Total Deductions From Revonse (322,203) (322,203) (322,203) (322,203) (322,203) (322,113) (322,113) (323,113) (323,		(427,789)	(29.952)	(36.715) \$	\$ (65.555) \$	\$ (14.815) \$	(14.782)	(684.321)
Primate France 3426, 3427, 3426, 3427, 342, 36 342, 342, 352, 36 342, 342, 352, 36 342, 342, 352, 352, 352, 352, 352, 352, 352, 35		(32,528,120) 124,810	(35,4	(33,044,076)	(36,985,198)	(35,837,156)	(32,175,562)	(277,448,013)
Patient Revenue JB0.343 JB0.340 JB2.369 JJ73,550 G.03,739 G.134,453 G.537,145 G.373,145 G.357,145 G.373,145 G.333,145 G.334,145 G.334,145 <thg.334,175< th=""> G.344,175 G</thg.334,175<>				-87.8%	-87.5%	-86.7%	-86.4%	-87.1%
Patient Revenues 1,30,01 1,45,31 1,45,31 1,45,31 1,45,31 1,45,31 1,45,31 1,45,31 1,45,31 1,45,31 1,45,31 1,45,31 1,45,31 1,45,31 1,45,31 1,45,31 1,45,31 1,45,31 1,45,32 1,45,32 1,45,32 44,722 1,45,32 44,722 1,45,32 44,722 1,45,32 44,722 44,722 44,722 44,722 44,722 44,722 44,722 44,722 44,722 44,722 44,722 44,722 44,722 44,722 44,722 44,723 44,723 44,723 44,723 44,723 44,723 44,733 44,732 44,732 44,737 <	4,7	4,750,899 124,810	5,1	4,585,343	5,266,495	5,484,928	5,059,628 \$	41,267,324
Circle Transmission 150,371 148,371 1157,338 689,707 501,407 0 </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>								
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Turner Line memory Turner		93,358	138,568	512,304	1,059,520	383,032	951,722	3,743,396
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$ \begin{array}{c} \mbox{Ti Control Bornels} \\ Ti Control Borne$		240,334 164 600	154 EDD	164 500	154 500	240,334 154 500	246,334	106,076,1
Non-Patient Revenues 2.441,573 2.441,313 1.473,355 1.677,341 6.077,334 6.132,210 6.136,668 and Derroting Revenues 5.001,418 5.972,339 6.136,456 5.066,519 6.713,441 6.077,334 6.132,210 6.136,668 Retring Expenses 5.001,418 5.972,339 6.132,456 5.066,519 5.713,441 6.077,334 6.132,210 6.136,668 Stating Expenses 5.001,418 5.972,339 5.13,617 3.141,258 3.420,974 3.441,477 3.516,70 6.136,668 6.443,477 Contract And Maintenance 74,335 5.93,513 3.430,973 3.441,477<		0000'+0	000,401	000,401	000,461	000,401	0,461	1,236,000
$ \label{eq:relation} \mbox{all operating Revenue} \\ \mbox{all operating Revenue} \\ \mbox{all operating Revenue} \\ \mbox{all operating Exponses} \\ all $		494.852 0	0 540.062	913 798	1 461 014	784 526	1 353 246 6	6 965 347
$ \matrix Determine Revenue 590.2016 5.972.2016 5.972.2016 5.973 5.60.519 5.713.341 6.077,341 6.077,341 5.6132 3.615,666 erriting Expenses 700.445 2.41.25 3.104.25 3.1515,159 3.420.944 6.1.32,710 5.136,665 7.353,150 7.243,151 7.323,203 4.341,172 7.323,203 9.361,127 7.356,523 3.6447 7.264 7.323,203 4.341,172 7.323,203 9.361,127 7.355,20 9.64,12$				neticie	+10'10+'1	070'401		1+0'000'0
enting Expenses 3,410,27 3,410,27 3,66,637 3,66,137		5,245,751 124,810	0 5,674,284	5,499,141	6,727,509	6,269,454	6,412,844 \$	48,222,671
Stations and Wages 300 445 2441.26 31.41,21 3.566.57 3.666.57 3.567.5 664.44 Profestende 53.57 66.537 35.567 10.106.60 11.11.122 10.56.07 127.473								
Tring Benefits 74.2404 72.376 85.638 89.937 96.913 89.552 68.443 Chinge Benefits 716,00 106.627 73.5716 856.538 39.375 858.553 858.457 77.377 Physicians Fees 211,630 26,631 331,858 360,783 330,533 959.74 89.327 73.821 277.877 Supply Expense 68,137 63,137 63,0383 99.57 111,122 06.601 273.821 277.877 Supply Expense 68,537 63,135 100,277 110,663 112,745 83.909 74.908 274.61 77.545 95.746 95.736 97.00 0	e	3,344,149	3,505,628	3,406,624	3,976,933	3,389,453	3,077,122	27,848,215
Contract Lebor Tay and the second secon		904,958	895,221	926,984	921,667	923,548	909,630	7,249,028
Purplecians 21,530 24,631 33,135 33,033 33,14,16 27,3521 27,3471 Purplecians 89,17 77,335 893,273 71,349 83,630 97,135 Supply Expense 893,518 751,025 903,833 995,446 823,849 88,390 74,035 Supply Expense 86,517 751,025 903,833 995,446 83,303 97,102 97,103 Supply Expense 86,537 10,277 110,683 112,745 123,733 137,478 127,547 All Ohner Operating Expenses 86,371 10,3277 110,683 112,745 123,733 137,478 127,547 All Ohner Operating Expenses 86,371 36,301 137,478 127,547 101,241 70,0560 55,001 70,0560 0,012 Cield Operating Expenses 85,371 81,372,365 47,331 (237,353 101,241 107,341 173,453 173,453 173,453 173,056 97,012 Cield Operating Expenses 85,371,156 54,132,731				25,244	81,713	199,814	141,964	775,303
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$				291,979	352,767	359,584	329,986	2,545,325
Option Constrained SS-371 Total 20 SS-370 Total 20 SS-371 Total 20 Total 20 <thtotal 20<="" th=""> Total 20 Total 20</thtotal>	-	(c/c,/c) 2cu,cuu,	5) 802,504	151,068	/46,115	910,787	4/6,515	6,335,926
Repairs and Maintenance 53,74 53,75 56,000 77,24 86,999 74,098 74,058 76,060 0		112 607	030,120	120,002	115 511	301,320	1 405 967	054 450
All Other Operating Expenses 66,57 103,277 110,633 111,145 113,148 127,463 55,610 All Other Operating Expenses 66,153 70,327 100,142 100,332 97,102 55,610 All Other Operating Expenses 66,153 73,243 55,517 103,277 110,565 101,142 100,332 97,102 55,610 Leares and Rentals 57,610 34,830 34,096 0 <td></td> <td>51 558</td> <td>111 348</td> <td>100,021</td> <td>98 149</td> <td>83 712</td> <td>101,001</td> <td>711 995</td>		51 558	111 348	100,021	98 149	83 712	101,001	711 995
Other Operating Expenses 66,153 70,22 160,745 143,752 101,142 100,332 97,102 53,00 Expense 5,720 5,130 76,150 79,233 109,444 172,365 0 </td <td></td> <td>133.709</td> <td>119.141</td> <td>122.505</td> <td>118.248</td> <td>114.116</td> <td>117.116</td> <td>989.860</td>		133.709	119.141	122.505	118.248	114.116	117.116	989.860
Expense 217,249 58,743 109,484 17,236 0		47,279	84,177	189,078	143,484	139,122	48,806	802,657
ass and Rentals 57,50 76,150 79,233 79,424 37,352 67,043 101,241 76,060 16 (b) CLINIC 60927 94,523 5,710,055 5,700,55 7,010,605 6,904,395 5,320,657 7,009,680 16 (b) CLINIC 6045,502 5,720,623 6,377,306 6,901,255 7,010,605 6,904,995 5,920,667 7,009,680 17, bepreciation and Amortization 512,465 497,808 5,64,497 444,794 477,154 (787,856) (873,012) 14, bepreciation, and Amortization 512,465 497,808 566,497 434,731 297,254 (877,154) (787,856) (873,012) 14, bepreciation, and Amortization 512,465 414,193 472,317 297,353 550,044 406,450 areating Revenue: 413,167 863,923 996,625 977,356 971,326 971,326 areating Revenue: 14,354 7,145 7,121 25,068 507,448 101,377 537,933 25,999 areating Revenue: 14,354 <t< td=""><td></td><td></td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td></td></t<>			0	0	0	0	0	
16 (b) CLINIC 80.927 98.810 94.628 34.096 0		106,555	51,072	58,251	80,559	765	61,844	536,347
Independing Exponses 6.445.502 6.377,306 6.901,255 7.010,605 6.904,908 6.320,067 7.009,680 r, Depreciation, and Amoritation 1(43,485) 232,266 (248,351) (1,34,337) (297,264) (877,154) (787,685) (873,012) recelation and Amoritation 512.466 428,351 (1,34,337) (297,264) (877,154) (787,685) (873,012) recelation and Amoritation 512.466 430,551 943,721 472,337 526,827 550,044 406,450 recelation and Amoritation 512.466 415,93 422,041 417,237 526,827 550,044 406,450 recelation and Amoritation 512.466 416,193 427,194 377,365 571,363 571,363 all Interest, Depr, & Amort. 942,475 942,715 863,923 96,625 571,363 573,333 573,333 all Interest, Depr, & Amort. 14,346 7,745 27,759 7,121 2,5068 57,333 573,333 573,333 573,333 573,333 573,333 573,				•	0	•	1	1
(143,485) 252,266 (248,351) (1,394,337) (297,264) (877,154) (787,656) (873,012) 4. Depreciation, and Amortization 512,466 497,808 566,497 494,721 472,337 255,827 550,044 406,450 recelation and Amortization 512,466 418,193 422,094 434,721 472,337 256,044 406,450 recelation and Amortization 512,466 418,193 422,094 434,721 525,827 550,044 406,450 recelation and Amortization 422,496 916,000 924,591 942,715 853,923 996,625 977,726 978,233 at Interest, Depr, & Amort. 943,775 942,775 853,923 996,625 977,726 978,233 at Interest, Depr, & Amort. 14,344 7,745 27,755 978,333 677,353 677,353 677,353 677,353 677,353 677,353 677,353 677,353 677,353 677,353 677,353 677,353 677,353 677,353 677,353 677,343 678,957		6,893,407 0	0 6,923,449	6,833,839	7,474,599	7,091,173	6,093,690 \$	55,239,904
512,466 437,808 506,497 494,721 472,317 525,627 550,044 406,450 432,490 418,193 422,094 447,994 391,606 470,799 427,682 571,834 944,956 916,000 928,591 942,715 863,923 996,625 977,726 978,833 14,354 7,745 27,759 7,121 25,068 207,459 1387,913 2,599 652,487 666,906 598,410 616,099 627,333 627,353 627,3		(1,647,656) 124,810	0 (1,249,165)	(1,334,698)	(747,090)	(821,719)	319,154 \$	(7,017,234)
512,465 497,706 606,497 494,721 472,317 525,027 560,044 406,450 432,400 418,183 422,094 447,994 391,606 470,799 427,682 571,834 94,4565 916,000 928,591 942,715 863,923 996,625 571,832 571,832 652,487 666,966 598,410 616,059 627,353								
432,400 418,133 422,034 447,956 470,795 427,652 577,833 94,956 916,000 928,591 942,715 863,923 996,6255 977,756 977,736 977,736 977,333 14,354 7,745 27,759 7,121 25,068 207,469 1,387,913 2,599 652,487 666,966 598,410 616,059 627,353 <t< td=""><td></td><td>406,450</td><td>446,580</td><td>426,319</td><td>648,669 \$</td><td>661,981</td><td>660,120</td><td>4,206,613</td></t<>		406,450	446,580	426,319	648,669 \$	661,981	660,120	4,206,613
14,354 7,745 27,759 7,121 25,068 207,469 1,387,913 2,599 682,487 666,966 598,410 616,059 627,353 629,652 629,652 629,652 629,533 641,127 834,023 2,015,266 629,952 629,552 629,553 627,353 627,353 627,353 627,353 627,353 627,353 627,353 627,353 627,353 627,353 629,552 629,553 629,553 629,553 629,553 629,553 629,553 629,553 610,603 71,031,571 710,504 629,574 711,271,341 711,574 610,703,657 713,741,56 713,741,564 713,741,566 629,552 629,552 629,552 629,552 629,552 629,552 629,552 629,552 629,552		409,794 816.243 0	394,794 0 841.374	419,794 846.112	625,830 \$	1.153.577	425,067	3,766,390
14.354 7.745 27.759 7.121 25.068 207,469 1.367/913 2.599 652.467 666.966 598,410 616,059 627,353 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>								
652,487 692,457 666,966 598,410 616,059 627,353 <t< td=""><td></td><td>3,065</td><td>2,068</td><td>3,065 \$</td><td>\$ 307,953</td><td>(48,783)</td><td>1,875</td><td>1,659,755</td></t<>		3,065	2,068	3,065 \$	\$ 307,953	(48,783)	1,875	1,659,755
066.841 700,202 694,725 605,531 641,127 834,823 2,015,266 629,952 (421,599) 36,467 (482,217) (1,731,521) (520,660) (1,038,957) 249,662 (1,231,343) 0		627,353	627,353		\$ 627,353	627,353	627,353	5,018,825
(421,599) 36,467 (482,217) (1,731,521) (520,060) (1,038,967) 249,662 (1,221,343) 0		630,418 0	0 629,421	630,418	935,307	578,570	629,228	6,678,580
0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(1,833,481) 124,810	0 (1,461,118)	(1,550,393)	(1,086,283)	(1,396,726)	(136,805) \$	(8,311,656)
0 0 0 (689,574) (650) (284,792) 0 0 0 0 0 1 0 1.121 660) 5.1171,792 5.1172,7171 5.1814,852) 5.11721,7431 5	0	0	0	0	0	0	0	•
	•	•	•	0		0	0	10 244 0101
A familianti & manine & functionali & familianti & functionali & functionali & functionali & familianti		(1,833,481) \$ 124,810	0 \$ (1,461,118)	\$ (1,550,393) \$	6 (1,086,283) \$	6 (1,396,726) \$	(136,805) \$	(8,311,656)
0.6% -7.9% -31.4% -7.7% -1.7% 4.1% -1.9% A 2% A 4% 25.2% A 4% -1.2% 4.1% -1.9%		-35.0%	-25.7%	-28.2%	-16.1%	-22.3%	-2.1%	-17.2%
-2.4% 4.2% -4.1% -2.3% -4.2% -19.0% -12.0% -14.2%		-31.4%	%.n.77-	0/. C. +7-		-13.1%	%/n.c	-14.0%

Note: The calculations below are adjusted to account for the cash-flow impact of re-classifying Operating Leases and Software Leases from "EBIDA related Operating Expenses" to Interest and Depreciation Expenses. Estimated Value of Supplemental Accruals (Updated 03 22 23) 1,339,982 1,339,982 1,339,982 0 0 552,124 466,970 (307,674) 124,810 YTD Monthly Average Estimated EBIDA if Supplementals were Accrued Monthly (Updated 03 22 23) YTD Monthly Average Estimated EBIDA if Supplementals were Accrued Monthly (Updated 03 22 23) YTD Monthly Average Estimated EBIDA if Supplementals were Accrued Monthly (Updated 03 22 23)

1,339,982 518,263 1,339,982 592,892 918,252 (416,447) 1,339,982 90,817

9,871,550 2,854,316 407,759

913,408 1,232,562

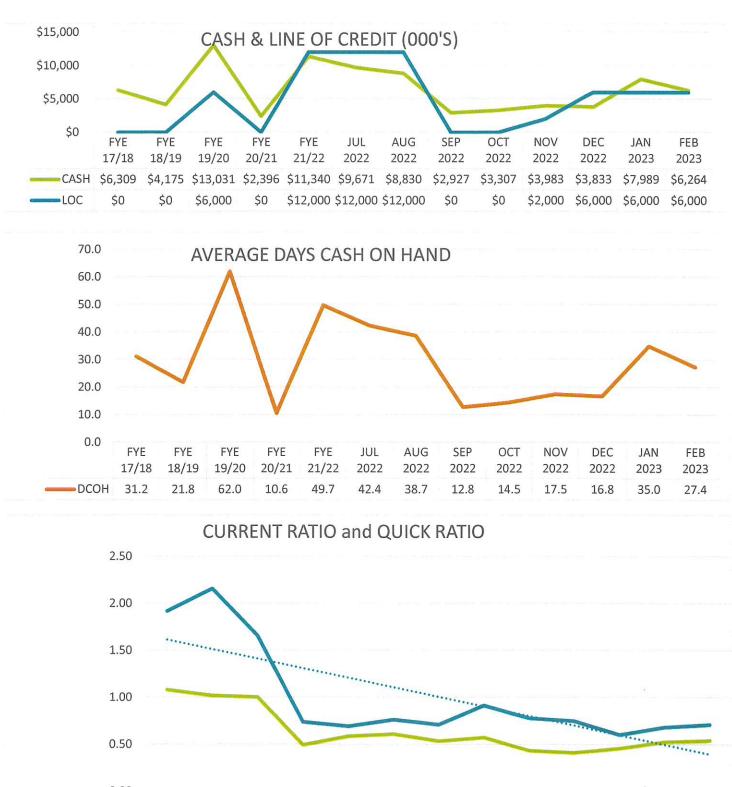
SAN GORGONIO HEALTHCARE DISTRICT & HOSPITAL - BANNING, CA 5 Year Monthly Averages and 12 Rolling Months Ended 02/28/2023

$ \begin{array}{c c c c c c c c c c c c c c c c c c c $		FYE17/18	FYE18/19	FYE19/20	FYE 20/21	FYE 21/22	FYE 21/22	FYE 21/22	FYE 21/22	FYE 21/22	FYE 22/23	FYE 22/23	FYE 22/23		FYE 22/23	FYE 22/23	FYE 22/23	FYE 22/23	FYE 22/23
Mathematic 1 Addition 1 Addition 2 Addition 1 Addition 2<			MONTHLY AVE.	MONTHLY AVE.		MONTHLY AVE.	3/31/2022	4/30/2022	5/31/2022	6/30/2022	7/31/2022	8/31/2022	9/30/2022	Adjust.	10/31/2022	11/30/2022	12/31/2022	1/31/2023	2/28/2023
$ \begin{array}{c c c c c c c c c c c c c c c c c c c $	Gross Patient Revenue	9 669 396		¢ 7 404 787				10 006 400	10 000 000	112 010 01	46 705 544	10 141 400	- 42 450 457			11 500 114			
$ \begin{array}{c c c c c c c c c c c c c c c c c c c $	Inpatient Psych/Rehab Revenue	0		0				-	-				/cl'ocl'cl ¢	n	< /14'/07'01	\$ 104,000,41 \$ -		\$ 912,126,61 \$ \$ - \$	\$ 13,691,246 S -
$ \begin{array}{c c c c c c c c c c c c c c c c c c c $	Outpatient Revenue	15,730,069	16,765,365	15,067,104	11,933,682	20,932,075	22,781,003	22,348,929	21,153,874	23,646,523	25,672,092	24,753,736	24,122,862		27,374,507	23,068,968	24,746,141 \$	\$ 25,994,869 \$	\$ 23,543,943
$ \begin{array}{c} \matrix transmissions the function of $	Long Term Care Revenue	0 0	0 0	0 0	0 0	•		ĸ	r	r	T	r	¢.		r	ı	ı		
And Columbic Form (Prevents) Columbic Form (Prevents) <thcolu< td=""><td>Total Gross Patient Revenue</td><td>24,382,394</td><td>24,433,247</td><td>22,468,386</td><td>21,265,053</td><td>37,535,465</td><td>36,790,578</td><td>35,334,409</td><td>33,853,172</td><td>36,866,167</td><td>41,465,303</td><td>40,994,836</td><td>37,279,019</td><td>٥</td><td>40,581,924</td><td>37,629,419</td><td>42,251,693</td><td>41,322,085</td><td>37,235,189</td></thcolu<>	Total Gross Patient Revenue	24,382,394	24,433,247	22,468,386	21,265,053	37,535,465	36,790,578	35,334,409	33,853,172	36,866,167	41,465,303	40,994,836	37,279,019	٥	40,581,924	37,629,419	42,251,693	41,322,085	37,235,189
$ \begin{array}{c c c c c c c c c c c c c c c c c c c $																			
International (International) (Internation) (International) <	Discounts and Allowances	(19.635.639)	(19.588.148)	(17.845.730)	(16.635.734)	(31.267.149)	(29.655.536)	(27.674.758)	(26.569.751)	(36.229.684)	(34 966 058)	(34 797 135)	(30 986 845)	124 810	134 683 2861	(32 035 399) 6	135 904 4051	135 468 3431	130 014 7131
$ \begin{array}{c c c c c c c c c c c c c c c c c c c $	Bad Debt Expense	(806,002)	(858,023)	(653,280)	(824,395)	(1,045,570)	(1,207,381)	(1,432,016)	(1,104,585)	2,536,474	(883,157)	(813,947)	(1,113,485)		(734,463)				
$ \begin{array}{c} \mbox forme \ \mbox former \$	GI HMO Discounts	•	0	0	•	0	0	•		•	•	•	•		•	s	·		•
$ \begin{array}{c} \mbox{def} \mb$	Charity Care	(80,410)	(56,168)	(86,517)	(41,362)	(136,947)	(22,283)	(25,690)	(887,352)	(59,144)	(28,117)	(66,596)	(427,789)	0.020	(29,952)	(36,715)	(65,555)	(14,815)	(14,782)
International constraints 380,313 330,301 340,301 340,301 340,301 340,301 340,301 340,301 340,301 340,301 340,301 340,301 340,311 340,31 341,31 341,31 341,31 <th< td=""><td>I otal Deductions From Revenue</td><td>11 CD (77C'D7)</td><td>10 CB</td><td>170'000'0I)</td><td>(net, i ne, i i)</td><td>000,449,000</td><td>(002,000,05)</td><td>(23,132,404)</td><td>(000,100,02)</td><td>(005,201,55)</td><td>(155,1/8,05)</td><td>(8/9///9/02)</td><td>(071,826,28)</td><td>124,810</td><td>(35,447,702)</td><td>(33,044,076)</td><td>(36,985,198)</td><td>(35,837,156)</td><td>(32,175,562)</td></th<>	I otal Deductions From Revenue	11 CD (77C'D7)	10 CB	170'000'0I)	(net, i ne, i i)	000,449,000	(002,000,05)	(23,132,404)	(000,100,02)	(005,201,55)	(155,1/8,05)	(8/9///9/02)	(071,826,28)	124,810	(35,447,702)	(33,044,076)	(36,985,198)	(35,837,156)	(32,175,562)
Officier Reserves Statistic Reserves Statisti	Vet Patient Revenue	3,860,343	3,930,908	-82.1% 3,882,859	-82.3% 3,763,563	-86.5% 5,085,799	-83.9% 5,905,378	- ^{42.4%} 6,201,945	-84.4% 5,291,484	-91.6% 3,113,812	- ^{46.5%} 5,587,972	-87.0% 5,317,157	-87.3% 4,750,899	124,810	-87.3% 5,134,222	-87.8% 4,585,343	-87.5% 5,266,495	-86.7% 5,484,928	-86.4% 5,059,627
$ \begin{array}{c} \mbox{CDFR} (TCF) (TFF) (TFF$	Von- Patient Revenues																		
$ \begin{array}{c c c c c c c c c c c c c c c c c c c $	IGT/DSH Revenues	1,530,975	1,485,337	1,157,326	869,707	501,407	0	0		•						,		s ,	
$ \begin{array}{c} \matrix Substant for the function of the form of the function of the f$	Grants & Other Op Revenues Clinic Net Revenues	20.106	225,382	15.743	505,190 0	725,065	1,404,234 0	404,979 0	1,221,031	2,657,264	136,873	468,018	93,358		138,568	512,304	1,059,520	383,032 \$	951,722
$ \begin{array}{c c c c c c c c c c c c c c c c c c c $	Tax Subsidies Measure D	174,852	196,524	199,469	209,744	229,405	233,333	233,333	233,333	186,194	246,994	246,994	246,994		246,994	246,994	246,994	246,994 \$	246,994
$ \begin{array}{c c c c c c c c c c c c c c c c c c c $	Tax Subsidies Prop 13		115,388	114,061	142,552	146,104	150,000	150,000	150,000	103,245	154,500	154,500	154,500		154,500	154,500	154,500	154,500 \$	154,500
$ \begin{array}{c c c c c c c c c c c c c c c c c c c $	Tax Subsidies County SuplmtI Funds		16,159	9,064	16,163	25,561	0	0		306,727	-		-					-	
Order line $5,97,239$ $5,72,239$ $5,72,239$ $5,73,239$ $5,73,239$ $5,72,239$ $5,72,239$ $5,72,239$ $5,72,239$ $5,72,239$ $5,72,239$ $5,72,239$ $5,72,239$ $5,72,239$ $5,72,739$ $7,72,839$ $5,72,739$ $7,72,839$ $7,72,739$ $7,72,739$ $7,72,739$ $7,72,739$ $7,72,739$ $7,72,739$ $7,72,739$ $7,72,739$ $7,72,739$ $7,72,739$ $7,72,739$ $7,72,739$ $7,72,739$ $7,72,739$ $7,72,739$ $7,72,739$ $7,72,739$ $7,72,$	Non-Patient Kevenues	2,041,675	2,041,381	2,245,037	1, / 43, 355	1,62/,542	1,181,561	188,312	1,604,364	3,253,430	538,367	869,512	494,852	0	540,062	913,798	1,461,014	784,526	1,353,216
Portering Expenses 3,00,46 7,12,1 3,12,1,16 3,12,1,16 3,12,1,16 3,12,1,16 3,14,2,10 3,44,2,00 3,46,6,6,7 3,44,2,00 3,46,6,6,7 3,44,2,00 3,46,6,6,7 3,44,2,00 3,46,6,6,7 3,44,2,00 3,46,6,6,7 3,44,2,00 3,46,6,6,7 3,44,2,00 3,46,6,6,7 3,44,2,00 3,46,6,7 3,44,2,00 3,46,6,7 3,44,2,00 3,46,6,7 3,44,2,00 3,46,6,7 3,44,2,00 3,46,6,7 3,44,2,00 3,46,5,7 3,44,2,7 2,43,00 3,44,5,7 2,43,00 3,44,5,7 2,44,17 2,43,00 3,46,5,7 3,44,17 2,43,00 3,44,5,7 3,44,5,7 3,44,5,7 3,44,5,7 3,44,5,7 3,44,5,7 3,44,5,7 3,44,5,7 3,44,5,7 3,44,5,7 3,44,6,7 3,44,6,7 3,44,6,7 3,44,6,7 3,44,6,7 3,44,6,7 3,44,7 3,44,7 3,44,7 3,44,7 3,44,7 3,44,7 3,44,7 3,44,7 3,44,7 3,44,7 3,44,7 3,44,7 3,44,7 3,44,7 3,44,7 3,44,7 3,44,7 3,44,7 <t< td=""><td>fotal Operating Revenue</td><td>5,902,018</td><td>5,972,289</td><td>6,128,956</td><td>5,506,919</td><td>6,713,341</td><td>7,692,944</td><td>6,990,257</td><td>6,895,848</td><td>6,367,242</td><td>6,126,339</td><td>6,186,669</td><td>5,245,751</td><td>124,810</td><td>5,674,284</td><td>5,499,141</td><td>6,727,509</td><td>6,269,454</td><td>6,412,844</td></t<>	fotal Operating Revenue	5,902,018	5,972,289	6,128,956	5,506,919	6,713,341	7,692,944	6,990,257	6,895,848	6,367,242	6,126,339	6,186,669	5,245,751	124,810	5,674,284	5,499,141	6,727,509	6,269,454	6,412,844
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	Derating Expenses	101 000 0	200 110 0			120 001 0	101 001 0	000 011 0	011 001 0		100 001 0	010 101 0							
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	Salaties and wages	3,000,465 78A 20A	712 472	3,104,224	851,021,5	3,420,974 830,500	3,500,/34	3,443,050	267,226,6 755 019	3,245,230	3,300,03/	0/0/100%	3,344,149 004 058		879,606,5	3,405,524 \$	024 CC7 C	4 549,453 5 4 532,453 5	3,0//,122
diate Feet 21150 24631 331683 330,333 437,958 96,271 232,301 732,321 232,421 371,425 371,425 371,425 371,425 371,425 371,425 371,425 371,425 371,425 371,425 371,425 371,425 371,425	0 - 1990 	130,625	106.628	59,516	114.886	550'000 226'66	145,598	244,817	39,673	110.598	138.575	64,443	72.561		50.991	25.244 S	81.713 S	5 199.814 S	141.964
Ferencies 631,25 61,357 72,358 692,251 72,356 692,251 72,257 72,257 72,257 72,257 72,257 72,257 72,257 72,257 72,257 72,257 72,257 72,354 693,274 1022,256 693,274 1022,256 693,274 1022,256 693,274 1022,257 74,305	Physicians Fees	211,630	246,631	331,858	350,783	330,533	437,958	497,575	195,777	243,800	273,621	277,977	350,634	57,575	308,777	291,979 \$	352,767 \$	359,584 \$	329,986
V Expense 995,45 77,02 99,85,46 71,23,48 14,55,50 83,724 11,165,56 698,714 11,265,56 83,724 11,265,56 83,724 11,265,56 83,724 11,265,56 73,246 91,275 11,365,56 73,477 11,365,56 73,246 91,375 11,365,56 73,374 88,373 10,327 11,13,45 11,345 11,365,56 73,946 113,455 10,32,44 11,345 10,344 10,12,45 10,344 10,12,45 10,344 10,12,45 10,13,45 10,12,45 10,12,45 10,13,45 10,12,45 10,13,45 10,12,55 10,13,45 10,12,45 1	Purchased Services	581,239	513,857	691,337	772,336	892,521	1,036,315	966,521	912,287	792,287	829,624	848,417	945,477	(57,575)	802,604	890,157 \$	5 746,115 S	5 797,016 \$	476,515
is and Maintenance 5,57.4 5,3.4.1 (0.0.2.77) (10,632 (13,7.12 (12,2.40 (15,96 (20,02.4 (13,145 (12,2.40 (15,96 (20,02.4 (13,145 (12,2.40 (15,96 (20,02.4 (13,145 (12,2.4 (13,145 (12,2.4 (13,145 (12,14 (13,145 (13,145 (12,14 (13,145 (13,145 (12,14 (13,145 (13,141 (13,145 (13,141 (13,145 (13,141 (13,145 (13,141 (13,145 (13,141 (13,145 (13,141 (13,145 (13,141 (13,145 (13,141 (13,145 (13,141 (13,145 (13,141 (13,145 (13,141 (13,145 (13,141 (13,145 (13,141 (13,145 (13,141 (13,145 (13,141 (13,145 (13,141	Supply Expense	699,167	685,518	751,025	903,883	995,446	1,024,948	1,455,590	683,784	1,026,266	698,214	888,903	823,019		895,128	735,602 \$	839,353 \$	987,328 \$	723,243
Instrumentation 0.927 0.927 0.927 0.927 0.927 0.9270 1.7406 0.121 0.9260 1.7406 1.74	Donaire and Maintenance	74,205 E2 E74	15,471 E0 27E	80,680	132,287	77 694	102,218	114,367	512,88 510,07	114,902 62 460	104,925	97,819	113,507		99,363 444 740	120,651 \$	5 115,611 5	96,716 \$	105,867
Inv Coperating Expenses 68,153 70,322 160,744 147,752 75,734 143,557 75,734 143,557 75,734 97,102 Strents 57,507 76,130 79,345 77,77 75,734 143,557 75,734 97,102 Strents 57,507 76,140 74,355 74,016 74,357 75,744 143,455 101,241 (b) CLINIC 8,097 5,700 94,551 5,717,366 5,901,615 7,322,712 8,097,143 6,513,753 6,901,241 (b) CLINIC 8,092 5,912,066 7,101,6166 7,332,712 8,097,143 6,513,753 101,241 (c) CLINIC 8,027 9,437 232,564 (248,554) 7,010,6167 7,322,712 8,097,143 6,513,753 59,056 7,327,103 101,241 Cobracting on and Amortization 512,466 514,713 222,064 434,751 437,323 214,455 59,056 74,355 59,656 77,303 91,555 74,455 51,456 51,306 51,41,75		86.537	85 267	103 277	110 683	112 745	122 460	115 996	24 026	120.427	137 478	124,101	133 709		119,440	122 505 5	00,143 3	00,114 3	117 116
Copense 217,249 51,31 109,444 172,366 5,90 1	All Other Operating Expenses	68,153	70,922	160,745	148,752	101,142	67,757	75,734	194,597	208,464	97,102	53,610	47,279		84,177	189,078	143,484	139,122	48,806
s and Rendis 57,507 75,150 79,233 79,424 37,952 69,694 114,459 112,255 (408,604) 101,241 O; OLINIC 0; OLINIC 0; OLINIC 0; 0	IGT Expense	217,249	58,743	109,484	172,366	0	0		. •	. •					. •	. •		. 1	•
(1) CUINU 0.221 3.0 CUINU $0.4,502$ $5.720,023$ $6.377,306$ $6.901,255$ $7.00,605$ $7.382,712$ $8.097,148$ $6.518,753$ $6.307,516$ $6.920,067$ 7.0 Depreciation, and Amortization 12.466 $437,305$ $6.377,306$ $6.901,225$ $7.010,605$ $7.382,712$ $8.097,916$ $6.920,067$ 7.0 Depreciation, and Amortization $512,466$ $437,303$ $6.50,497$ $494,721$ $472,317$ $604,865$ $504,865$ $594,865$ $590,604$ 4 Teleptees $943,956$ $916,000$ $228,991$ $942,715$ $883,923$ $897,921$ $877,920$ $956,957$ $274,016$ $977,726$ 9 Interest, Depr, & Amort. $943,956$ $7,121$ $853,923$ $897,921$ $877,425$ $650,044$ 4 Interest, Depr, & Amort. $943,755$ $606,495$ $7,121$ $837,921$ $877,425$ $850,044$ 4 Interest, Depr, & Amort. $413,375$ $22,743$ $94,37$ $1837,920$	Leases and Rentals	57,507	76,150	79,233	79,424	37,952	69,694	113,459	112,625	(408,504)	101,241	76,060	106,555		51,072	58,251	80,559	765	61,844
$ \begin{array}{c c c c c c c c c c c c c c c c c c c $		6,045,502	5,720,023	6,377,306	6,901,255	7,010,605	7,382,712	8,097,148	6,618,763	6,307,616	6,920,067	7,009,680	6,893,407	•	6,923,449	6,833,839	7,474,599	7,091,173	6,093,690
Depreciation, and Amortization 512,466 437,808 506,497 437,211 472,317 504,865 504,865 514,285 550,044 4 ciation and Amortization 512,466 437,808 506,497 437,213 717,315 595,957 714,286 550,044 4 ciation and Amortization 512,466 437,808 506,151 863,3923 887,9216 873,230 955,957 274,016 977,756 9 interest, Barnot. 344,956 916,000 928,511 616,059 613,966 613,965 613,965 613,965 617,5971 1,387,913 6 rating Revenue: 14,354 7,745 27,759 666,381 611,127 653,403 611,127 653,403 653,431 2015,266 6 666,335 453,713 213,565 666,335 453,713 1(117 656,335 243,713 214,752 656,335 453,713 2015,565 6 666,335 666,335 453,713 214,761 1(117 666,635 666,335 633,611 </td <td>BIDA</td> <td>(143,485)</td> <td>252,266</td> <td>(248,351)</td> <td>(1,394,337)</td> <td>(297,264)</td> <td>310,232</td> <td>(1,106,891)</td> <td>277,085</td> <td>59,626</td> <td>(793,729)</td> <td>(823,011)</td> <td>(1,647,656)</td> <td>124,810</td> <td>(1,249,165)</td> <td>(1,334,698)</td> <td>(747,090)</td> <td>(821,719)</td> <td>319,154</td>	BIDA	(143,485)	252,266	(248,351)	(1,394,337)	(297,264)	310,232	(1,106,891)	277,085	59,626	(793,729)	(823,011)	(1,647,656)	124,810	(1,249,165)	(1,334,698)	(747,090)	(821,719)	319,154
st Expense st Expense interest, Depr, & Amort. 344,356 344,356 344,356 344,356 344,356 344,356 344,356 344,356 344,356 344,356 344,356 344,356 344,356 344,356 344,356 344,356 344,356 344,357 354,456 354,467 413,351 354,467 413,217 350,660 35,714 (1,138,921) (1,138,921) 344,7500 0 0 0 0 0 0 0 0 0 0 0 0	nterest, Depreciation, and Amortization		497 808	506 497	494 721	472 317	504.865	504 865	504 865	114 286	550 044	406 450	406 450		446 580	476.319	648 669	661 981	660.120
Interest, Depr, & Amort. 944,956 916,000 928,551 942,715 863,923 897,921 879,290 956,957 274,016 977,726 9 rating Revenue: ating Revenue: 14,354 7,745 27,791 52,568 9,437 183,295 52,869 (175,971) 1,387,913 ubsidies for GO Bonds - M-A ubsidies for GO Bonds - M-A Surplise for GO Bonds - M-A (421,599) 35,467 (482,217) (1,731,521) (520,680) 35,714 (1,188,921) (13,037) 248,723 243,811 (1,1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Interest Expense	432,490	418,193	422,094	447,994	391,606	393,056	374,425	452,092	159,730	427,682	571,834	409,794		394,794	419,794	625,830	491,596	425,067
rating Revenue: Ibutions & Other Ibutions & Ot	Total Interest, Depr, & Amort.	944,956	916,000	928,591	942,715	863,923	897,921	879,290	956,957	274,016	977,726	978,283	816,243	0	841,374	846,112	1,274,500	1,153,577	1,085,187
Ibutions & Other 1,354 7,745 27,759 7,745 27,759 7,354 7,745 7,375,911 1,387,913 1,387,913 1,387,913 1,387,913 1,387,913 1,387,913 1,387,913 1,387,913 1,387,913 1,387,913 1,387,913 1,387,913 1,387,913 1,387,913 1,387,913 1,387,913 1,387,913 1,387,913 1,387,913 1,367,913 1,367,913 1,367,913 1,367,913 2,135.66 6 6 6 6,130 6,13,665 6,31,13 2,015,266 6 6 3,714 (1,138,921) (1,13,27) 2,43,713 2,43,713 2,43,713 2,43,713 2,43,713 2,143 1,11 1,11 2,11 2,11 1,11 2,13 2,13 2,13 1,11 1,11 2,13 2,143 <th< td=""><td>on-Operating Revenue:</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></th<>	on-Operating Revenue:																		
utostates for your control Dontals - Inv. 02,400 00,501 01,102 015,000 01,200 01 00 00 00 00 00 00 00 00 00 00 00 0	Contributions & Other	14,354	7,745	27,759	7,121	25,068	9,437	183,295	52,869	(175,971)	1,387,913	2,599	3,065		2,068	3,065	307,953	(48,783)	1,875
Surplus(Loss) (421,599) 35,457 (482,217) (1,731,521) (520,690) 35,714 (1,188,921) (13,037) 248,723 243,811 (1,198,921) pe in Interest in Foundation 0	Total Non Operating Revenue/(Expe		700,202	694,725	605,531	641,127	623,403	797,260	666,835	463,113	2,015,266	629,952	630,418	0	629,421	630,418	935,307	578,570	629,228
ge in interest in Foundation 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	otal Net Surplus/(Loss)	(421,599)	36,467	(482.217)	(1.731.521)	(520,060)	35,714	(1,188,921)	(13,037)	248,723	243,811	(1,171,342)	(1,833,481)	124,810	(1,461,118)	(1,550,393)	(1,086,283)	(1,396,726)	(136,804)
ordinary Loss on Financing 0 0 (885,574) (660) (284,782) 0 0 0 (3.417,600) 0 0 (3.417,600) 0 0 (3.417,600) 0 0 (2.421,599) 5 35,714 5 (1,168,921) 5 (1,3,037) 5 (3,168,177) 5 243,811 5 (1,1 0) 0 (1	Change in Interest in Foundation	0	0	•	•	•	0	0	•	0	•	0	•		0	0	0	0	0
itt Margin - 7,1% 0.6% - 7,9% - 31,4% - 7,7% 0.5% - 17,0% - 0.2% 3,9% 4,0%	Extra-ordinary Loss on Financing ncrease/(Decrease in Unrestricted Net /	(421,599)	36,467	(1,171,791)	5	(284,792) (804,852)	35,714	0 (1,188,921)	(13,037)			(1,171,342)	5 (1,833,481) s	\$ 124,810 \$	0 (1,461,118) \$	0 (1,550,393) \$	0 (1,086,283) \$	0 (1,396,726) \$	0 (136,804)
	otal Profit Marcin	-7 1%	0.6%	7 9%		122						-18 9%	-35 0%	H		-28.2%	i	-22.3%	
-2.4% 4.2% -4.1% -25.3% -4.4% 4.0% -15.8% 4.0% -13.0%	LOCAL PTOTIC IMALGITI EBIDA %	-2.4%	4.2%	4.1%	-21.4%	-4.4%	4.0%	-11.0%	4.0%	0.9%	-13.0%	-13.3%	-31.4%		-22.0%	-24.3%	-11.1%	-13.1%	5.0%

3-5	Cash (000's) Days Cash on Hand Accounts Receivable - Net (000's) AR Days - Net AR Days - Net Current Ratio (Current Assets/Current Liabilities) Quick Ratio Accounts Payable (000's)	Represents all unrestricted cash in the bank at each month-end. Calculated by dividing amount of Cash on Hand by the historical average daily amount of cash requirmements to cover operating expenses. Equals the sum of all (patient) accounts that are due to the hospital, less estimated adjustments for discounts and other contractual disallowances for which the patients may be entitled. This measures the average number of days it takes to collect payment of the Net Accounts Receivable. Lower values are desired. A measure that illustrates the ability for the hospital to pay its obligations that come due over the course of the next year. The greater the Current Assets as compared to the Current Liabilities, the stronger position the organization is in to pay its upcoming obligations. Desired position is greater than 1:00 to 1:00, preferably at least 1:25 to 1:00 or greater. This measures the Cash + Net Accounts Receivable compared to the Current Liabilities. Desired ratio is greater than 1:00 : 1:00.
	Accounts Payable Days	Reflects the average number of days that it takes to pay routine bills. Lower numbers are desired. Calculated by dividing the Accounts Payable amount by the historical average daily cost of routine expenses.
	Line of Credit Balance (000's)	The amount that is currently borrowed from a lending institution as of a given point in time.

BALANCE SHEET (Period End)

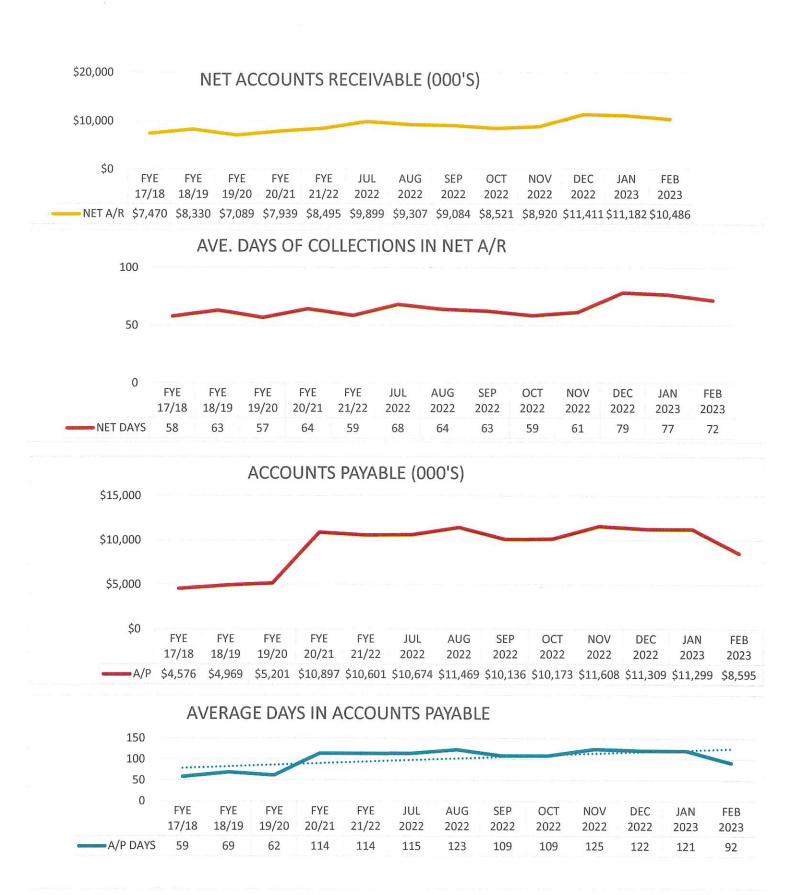
SAN GORGONIO MEMORIAL HOSPITAL



0.00	FYE 17/18	FYE 18/19		FYE 20/21	FYE 21/22		AUG 2022							
CURRENT	1.92	2.16	1.66	0.74	0.70	0.76	0.71	0.92	0.78	0.75	0.61	0.69	0.72	
QUICK	1.08	1.02	1.00	0.50	0.59	0.61	0.54	0.58	0.44	0.42	0.46	0.53	0.55	

3-K

SAN GORGONIO MEMORIAL HOSPITAL



3-L

SAN GORGONIO MEMORIAL HOSPITAL EXECUTIVE FINANCIAL SUMMARY EIGHT MONTHS ENDING FEBRUARY 28, 2023

	S	STATEMENT OF REV	ENT OF REVENUE AND EXPENSES - MONTH & YTD	SES -	MONTH & YTD		
REF I INF#		02/28/23 ACTIIAI	02/28/23 BUDGET		YTD ACTUAL	YTD BUDGET	YTD
			20001	+		ECCOL I	DILLEVENCE
	Revenue:						
Ξ	Gross Patient Revenues	\$ 37,235,189	\$ 43,010,236	Ф	318,653,788	\$ 354,981,064	\$ (36,327,276)
[2]	Deductions From Revenue	(32,175,562)	(37,396,444)		(277,226,253)	(308,648,143)	31,421,890
[3]	Net Patient Revenues	5,059,628	5,613,792		41,427,534	46,332,921	(4,905,386)
[4]	IGT Revenue	1	ı		1	1	1
[5]	Other Operating Revenue	1,353,216	893,094		6,955,347	5,464,431	1,490,916
[9]	Total Operating Revenues	6,412,844	6,506,886		48,382,881	51,797,351	(3,414,470)
	Expenses:						
[2]	Salaries, Benefits	3,986,752	4,433,522		35,097,242	37,082,274	1,985,032
	Contract Labor	141,964	72,873		775,303	607,107	(168,196)
	Physicians Fees	329,986	365,231		2,545,325	2,921,848	376,523
	Other Purchase Services	476,515	1,016,002		6,335,926	8,125,478	1,789,553
[8]	Purchased Serv. & Physician Fees	948,464	1,454,106		9,656,554	11,654,434	1,997,880
[6]	Supply Expenses	723,243	1,106,725		6,590,790	9,023,931	2,433,141
[10]	Other Operating Expenses & Clinic Loss	435,230	443,045		3,883,563	3,788,806	(94,756)
[11]	Supplimental and Grant Expense	7	1		1	1	
[12]	Total Expenses	\$ 6,093,690	\$ 7,437,398	\$	55,228,149	\$ 61,549,446	\$ 6,321,297
				•		÷	
[13]	EBIDA	\$ 319,154	\$ (330,512)	A	(0,845,267)	\$ (8,752,095)	\$ 2,906,827 0
[14]	Depreciation & Interest Expense	1,085,187	1,117,119		7,984,758	8,491,989	507,231
[15]	Non-Operating Revenue/(Exp.)	629,228	1,092,982		6,678,580	8,743,853	(2,065,273)
[16]	TOTAL NET SURPLUS (LOSS)	\$ (136,805)	\$ (954,649)	\$	(8,151,446)	\$ (9,500,231)	\$ 1,348,785
	_			_			

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SAN GORGONIO MEMORIAL HOSPITAL **EIGHT MONTHS ENDING FEBRUARY 28, 2023 EXECUTIVE FINANCIAL SUMMARY**

	BALANCE SHEET	SHEE			
			YTD		Prior FYE
			2/28/2023		6/30/2022
	ASSETS				
Ξ	Current Assets	ŝ	21,977,288	в	23,401,085
[2]	Assets Whose Use is Limited		11,212,210		12,704,494
[3]	Property, Plant & Equipment (Net)		74,895,679		73,514,801
[4]	Other Assets		(3,533,588)		503,000
[5]	Total Unrestricted Assets		104,551,590		110,123,380
[9]	Restricted Assets		0		0
[2]	Total Assets	ŝ	104,551,590	ម	110,123,380
	LIABILITIES AND NET ASSETS				
[8]	Current Liabilities		\$30,718,361		\$33,649,575
[6]	Long-Term Debt		111,282,503		105,323,946
[10]	Other Long-Term Liabilities		4,852,624		2,231,626
[11]	Total Liabilities	⇔	146,853,488	\$	141,205,147
[12]	Net Assets	φ	(42,301,898)	Ь	(31,081,767)
[13]	Total Liabilities and Net Assets	Ś	104.551.590	\$	110,123,380
-					

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			KEY STATISTICS AND RATIOS	AND RATIOS		
		01/31/23 ACTUAL	02/28/23 ACTUAL	02/28/23 BUDGET	2023 YTD	2022 YR END TOTAL
		FY 23	FY 23	FY 23	FY 23	FY 22
Ξ	Total Acute Patient Days	653	597	972	5,431	9,689
[2]	Average Daily Census	21.1	21.3	34.7	22.3	26.5
[3]	Average Acute Length of Stay	3.5	3.7	4.1	3.6	3.9
[4]	Patient Discharges	184	162	240	1,512	2,502
[2]	Observation Days	252	264	235	2,084	2,775
[9]	Total Emergency Room Visits	3,266	2,956	3,209	28,115	39,374
[2]	Average ED Visits Per Day	105	106	115	116	108
[6]	Total Surgeries (Excluding G.I.'s)	121	107	120	946	855
[10]	Deliveries/Births	9	11	10	90	175

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Statement of Revenue and Expense

SAN GORGONIO MEMORIAL HOSPITAL BANNING, CALIFORNIA EIGHT MONTHS ENDING FEBRUARY 28, 2023

							CURREN		ітн	
			ACTUAL		FY 23 ACTUAL 02/28/23	С	FY 23 UR MO BUD 02/28/23		Positive Negative) Variance	Percentage Variance
Gross P	atient Revenue							36		
[1]	Inpatient Revenue	\$	-	\$	13,691,246	\$	21,095,135	\$	(7,403,889)	-54.1%
[2]	Inpatient Psych/Rehab Revenue		-		-					
[3]	Outpatient Revenue		-		23,543,943	\$	21,915,100		1,628,842	6.9%
[4]	Long Term Care Revenue Home Health Revenue		5							
[5] [6]	Total Gross Patient Revenue	\$		\$	37,235,189	\$	43,010,236	\$	(5,775,047)	-15.5%
[0]		Ψ		Ψ	07,200,100	Ψ	40,010,200	<u> </u>	(0,110,041)	-10.070
Deductio	ons From Revenue									
[7]	Discounts and Allowances		-		(30,914,713)	\$	(35,803,910)	\$	4,889,197	-15.8%
[8]	Bad Debt Expense		-		(1,246,067)		(1,514,610)		268,543	-21.6%
[9]	Prior Year Settlements		-		-	\$	-		-	
[10]	Charity Care				(14,782)	\$	(77,924)	¢	63,142	-427.2%
[11]	Total Deductions From Revenue		-		(32,175,562)		(37,396,444)	\$	5,220,882	-16.2%
[12] [13]	Net Patient Revenue	\$	-	\$	86.4% 5,059,628	\$	-86.9% 5,613,792	\$	(554,164)	-11.0%
	nt Operating Revenues	Ŷ		Ŷ	0,000,020	Ŷ	0,010,102	÷	(001,104)	11.070
[14]	IGT/DSH Revenues		-		-	\$	-	\$	-	0.0%
[15]	Grants & Other Op Revenues		-		951,722	\$	480,350		471,372	49.5%
[16]	Clinic Net Revenues		-		-	\$	-		-	
[17]	Tax Subsidies Measure D		246,994		246,994	\$	246,994		(0)	0.0%
[18]	Tax Subsidies Prop 13		154,500		154,500	\$	154,500		-	0.0%
[19]	Tax Subsidies County Supplemental Funds	•	-	•	-	\$	11,250	-	(11,250)	0.0%
	Non- Patient Revenue	\$	401,494	\$	1,353,216	\$	893,094	\$	460,122	34.0%
	Total Operating Revenue	\$	401,494	\$	6,412,844	\$	6,506,886	\$	(94,042)	-1.5%
	ng Expenses									
[20]	Salaries and Wages		5		3,077,122		3,528,499	\$	451,376	14.7%
[21]	Fringe Benefits		-		909,630		905,024		(4,607)	-0.5%
[22] [23]	Contract Labor Physicians Fees		-		141,964 329,986		72,873 365,231		(69,090) 35,245	-48.7% 10.7%
[23]	Purchased Services		-		476,515		1,016,002		539,487	113.2%
[24]	Supply Expense		-		723,243		1,106,725		383,482	53.0%
[26]	Utilities		_		105,867		82,231		(23,636)	-22.3%
[27]	Repairs and Maintenance		8,200		101,598		75,564		(26,034)	-25.6%
[28]	Insurance Expense		-		117,116		122,979		5,862	5.0%
[29]	All Other Operating Expenses		-		48,806		99,325		50,519	103.5%
[30]	Supplimental and Grant Expense		-		-		0		-	0.0%
[31]	Leases and Rentals		-		61,844		62,946		1,103	1.8%
[32]	Clinic Expense				-		0		-	0.0%
[33]	Total Operating Expenses	\$	8,200	\$	6,093,690	\$	7,437,398	\$	1,343,708	22.1%
[34]	EBIDA	\$	393,294	\$	319,154	\$	(930,512)	\$	1,249,666	391.6%
	xpense and Depreciation		406,450		660,120		625 247	\$	(34 774)	E 20/
[35] [36]	Depreciation Interest Expense and Amortization		406,450 375,367		425,067		625,347 491,772	φ	(34,774) 66,706	-5.3% 15.7%
[30]	Total Interest & depreciation		781,817		1,085,187		1,117,119		31,932	2.9%
	erating Revenue:		101,011		1,000,101		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		01,002	2.070
[38]	Contributions & Other		1,523		1,875		466,744		(464,869)	-24788.5%
[39]	Tax Subsidies for GO Bonds - M-A		627,353		627,353		626,237	- <u> </u>	1,116	0.2%
[40]	Total Non Operating Revenue/(Expense)		628,876		629,228		1,092,982	\$	(463,753)	-73.7%
[41]	Total Net Surplus/(Loss)	\$	240,353	\$	(136,805)	\$	(954,649)	\$	817,845	-597.8%
[42]	Extra-ordinary loss on Financing		-				-		and the second	
[43]	Increase/(Decrease in Unrestricted Net Assets	\$	240,353	¢	(136,805)	¢	(954,649)	\$	817,845	-597.8%
[43] [44]	Total Profit Margin	Ψ	59.86%	φ	-2.13%	-	-14.67%	-	017,040	-091.070
[44]	EBIDA %		97.96%		4.98%		-14.30%			
Aller Control										

Statement of Revenue and Expense

SAN GORGONIO MEMORIAL HOSPITAL BANNING, CALIFORNIA EIGHT MONTHS ENDING FEBRUARY 28, 2023

							YEAR-TO	-DATE		
			STRICT ONLY Actual 02/28/23		Actual 02/28/23		Budget 02/28/23		Positive (Negative) Variance	Percentage Variance
Gross F	Patient Revenue		02/20/23		02/20/25		02/20/23		variance	variance
[1]	Inpatient Revenue	\$	-	\$	119,602,764	\$	174,270,207	\$	(54,667,443)	-45.7%
[2]	Inpatient Psych/Rehab Revenue		-		-				-	
[3]	Outpatient Revenue		-		199,051,024	\$	180,710,857		18,340,167	9.2%
[4]	Long Term Care Revenue				070					
[5]	Home Health Revenue		-							
[6]	Total Gross Patient Revenue	\$	-	\$	318,653,788	\$	354,981,064	\$	(36,327,276)	-11.4%
Deducti	ons From Revenue									
[7]	Discounts and Allowances				(269,409,615)	\$	(295,504,309)	\$	26,094,694	9.7%
[8]	Bad Debt Expense		-		(7,132,317)		(12,500,696)		5,368,379	75.3%
[9]	Prior Year Settlements		-		-	\$	-			
[10]	Charity Care		8 -		(684,321)	\$	(643,138)		(41,183)	-6.0%
[11]	Total Deductions From Revenue		-		(277,226,253)		(308,648,143)	\$	31,421,890	11.3%
[12]		•		•	87.0%	•	-86.9%	•		
[13]	Net Patient Revenue	\$	-	\$	41,427,534	\$	46,332,921	\$	(4,905,386)	-11.8%
Non Pa [14]	tient Operating Revenues IGT/DSH Revenues					\$	12	\$		0.0%
[14]	Grants & Other Op Revenues		-		3,743,396	\$	2,162,480	Ψ	1,580,916	42.2%
[16]	Clinic Net Revenues		-		-	\$	-		-	42.270
[17]	Tax Subsidies Measure D		1,728,957		1,975,951	\$	1,975,951		(0)	0.0%
[18]	Tax Subsidies Prop 13		1,081,500		1,236,000	\$	1,236,000		-	0.0%
[19]	Tax Subsidies County Supplemental Funds		-		-	\$	90,000		(90,000)	0.0%
	Non- Patient Revenue	\$	2,810,457	\$	6,955,347	\$	5,464,431	\$	1,490,916	21.4%
	Total Operating Revenue	\$	2,810,457	\$	48,382,881	\$	51,797,351	\$	(3,414,470)	-7.1%
	ng Expenses									
[20]	Salaries and Wages		~		27,848,215		29,733,848	\$	1,885,633	6.8%
[21]	Fringe Benefits		-		7,249,028	\$	7,348,427		99,399	1.4%
[22]	Contract Labor		-		775,303		607,107		(168,196)	-21.7%
[23] [24]	Physicians Fees Purchased Services		- 149,032		2,545,325 6,335,926		2,921,848 8,125,478		376,523 1,789,553	14.8% 28.2%
[25]	Supply Expense		-		6,590,790	\$	9,023,931		2,433,141	36.9%
[26]	Utilities		14,150		854,459	s	902,297		47,838	5.6%
[27]	Repairs and Maintenance		69,854		711,995	\$	604,509		(107,485)	-15.1%
[28]	Insurance Expense		1		984,360	\$	983,831		(529)	-0.1%
[29]	All Other Operating Expenses		159,379		802,657	\$	794,597		(8,060)	-1.0%
[30]	Supplimental and Grant Expense		1.5		-	\$	1. 		=	0.0%
[31]	Leases and Rentals		8 .		530,092	\$	503,572		(26,520)	-5.0%
[32] [33]	Clinic Expense Total Operating Expenses	\$	- 392,415	\$	55,228,149	\$ \$	61,549,446	\$	6,321,297	0.0%
[55]	Total Operating Expenses	Ψ	552,415	φ	55,226,145	φ	01,545,440		0,321,297	11.4%
[34]	EBIDA	\$	2,418,042	\$	(6,845,267)	\$	(9,752,095)	\$	2,906,827	-42.5%
	Expense and Depreciation		0 000 7 10		1 0 1 0 0 0 0			~	0.17.075	15 101
[35] [36]	Depreciation Interest Expense and Amortization		2,988,742 2,647,307		4,218,368 3,766,390		4,866,344 3,625,645	\$	647,975	15.4%
[37]	Total Interest & depreciation	-	5,636,049		7,984,758	φ	8,491,989	-	(140,745) 507,231	<u>-3.7%</u> 6.4%
	erating Revenue:	-	0,000,040		1,004,100		0,401,000		007,201	0.470
[38]	Contributions & Other		1,400,232		1,659,755	\$	3,733,954		(2,074,199)	-125.0%
[39]	Tax Subsidies for GO Bonds - M-A		5,018,825		5,018,825	\$	5,009,899		8,926	0.2%
[40]	Total Non Operating Revenue/(Expense)		6,419,057		6,678,580		8,743,853	_	(2,065,273)	-30.9%
[41]	Total Net Surplus/(Loss)	\$	3,201,050	\$	(8,151,446)	\$	(9,500,231)	\$	1,348,785	-16.5%
[42]	Extra-ordinary loss on FInancing		-		-		-			
[43]	Increase/(Decrease in Unrestricted Net Assets	\$	3,201,050	\$	(8,578,020)	\$	(9,501,403)	\$	923,383	-10.8%
[44]	Total Profit Margin		113.90%		-17.89%		-18.34%			
[45]	EBIDA %		86.04%	-31 <u>2</u> -	-15.16%		-18.83%	10.15 10.51		
and the second to be										the second second second second

Balance Sheet - Assets SAN GORGONIO MEMORIAL HOSPITAL BANNING, CALIFORNIA EIGHT MONTHS ENDING FEBRUARY 28, 2023

ets	DISTRICT ONLY Current Month 2/28/2023 1,781,587 \$0 \$0 \$4,385,518 660,465 \$0 126,169 \$0 126,169 \$0 \$0 \$0 6,953,738	Current Month 2/28/2023 \$6,264,498 \$91,444,230 (\$80,958,024) \$10,486,206 \$4,385,518 (\$266,694) \$2,438,089 \$975,816 (\$2,306,145) \$0 \$0 21,977,288	Prior Month 1/31/2023 \$7,988,678 \$97,807,725 (\$86,625,874) \$11,181,852 \$3,403,511 \$738,402 \$2,440,789 \$1,069,933 (\$2,051,479) \$0 \$0 \$24,769,685	\$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$	Positive/ (Negative) Variance (1,724,180) (6,363,495) 5,667,850 (695,645) 982,007 (1,005,096) (2,700) (94,116) (254,666) - - -	\$	Prior Year End 6/30/2022 11,340,002 77,594,807 (69,099,845) 8,494,961 1,178,859 738,141 2,297,204 1,197,395 (1,845,477)
sh and Cash Equivalents pass Patient Accounts Receivable pass: Bad Debt and Allowance Reserves t Patient Accounts Receivable kes Receivable ler Receivables (includes advances) entories apaid Expenses a From Third Party Payers-DSH lpractice Receivable poplimental Receivables Total Current Assets se Use is Limited sh estments	\$0 \$0 \$4,385,518 660,465 \$0 126,169 \$0 \$0 \$0	\$91,444,230 (\$80,958,024) \$10,486,206 \$4,385,518 (\$266,694) \$2,438,089 \$975,816 (\$2,306,145) \$0 \$0	\$97,807,725 (\$86,625,874) \$11,181,852 \$3,403,511 \$738,402 \$2,440,789 \$1,069,933 (\$2,051,479) \$0 \$0 \$0	* * * * * * * * *	(6,363,495) 5,667,850 (695,645) 982,007 (1,005,096) (2,700) (94,116) (254,666) -		77,594,807 (69,099,845) 8,494,961 1,178,859 738,141 2,297,204 1,197,395
ass Patient Accounts Receivable ass: Bad Debt and Allowance Reserves t Patient Accounts Receivable kes Receivable ler Receivables (includes advances) entories apaid Expenses a From Third Party Payers-DSH lpractice Receivable poplimental Receivables Total Current Assets se Use is Limited sh estments	\$0 \$0 \$4,385,518 660,465 \$0 126,169 \$0 \$0 \$0	\$91,444,230 (\$80,958,024) \$10,486,206 \$4,385,518 (\$266,694) \$2,438,089 \$975,816 (\$2,306,145) \$0 \$0	\$97,807,725 (\$86,625,874) \$11,181,852 \$3,403,511 \$738,402 \$2,440,789 \$1,069,933 (\$2,051,479) \$0 \$0 \$0	* * * * * * * * *	(6,363,495) 5,667,850 (695,645) 982,007 (1,005,096) (2,700) (94,116) (254,666) -		77,594,807 (69,099,845) 8,494,961 1,178,859 738,141 2,297,204 1,197,395
ess: Bad Debt and Allowance Reserves t Patient Accounts Receivable kes Receivable ier Receivables (includes advances) entories ipaid Expenses e From Third Party Payers-DSH lpractice Receivable oplimental Receivables Total Current Assets se Use is Limited sh estments	\$0 \$0 \$4,385,518 660,465 \$0 126,169 \$0 \$0 \$0 \$0	(\$80,958,024) \$10,486,206 \$4,385,518 (\$266,694) \$2,438,089 \$975,816 (\$2,306,145) \$0 \$0	(\$86,625,874) \$11,181,852 \$3,403,511 \$738,402 \$2,440,789 \$1,069,933 (\$2,051,479) \$0 \$0	****	5,667,850 (695,645) 982,007 (1,005,096) (2,700) (94,116) (254,666) -	_	(69,099,845) 8,494,961 1,178,859 738,141 2,297,204 1,197,395
t Patient Accounts Receivable kes Receivables (includes advances) entories spaid Expenses a From Third Party Payers-DSH lpractice Receivable oplimental Receivables Total Current Assets se Use is Limited sh estments	\$0 \$4,385,518 660,465 \$0 126,169 \$0 \$0 \$0	\$10,486,206 \$4,385,518 (\$266,694) \$2,438,089 \$975,816 (\$2,306,145) \$0 \$0	\$11,181,852 \$3,403,511 \$738,402 \$2,440,789 \$1,069,933 (\$2,051,479) \$0 \$0	\$ \$ \$ \$ \$ \$ \$ \$	(695,645) 982,007 (1,005,096) (2,700) (94,116) (254,666) - -	_	8,494,961 1,178,859 738,141 2,297,204 1,197,395
xes Receivable ner Receivables (includes advances) entories paid Expenses a From Third Party Payers-DSH Ipractice Receivable oplimental Receivables Total Current Assets se Use is Limited sh estments	\$4,385,518 660,465 \$0 126,169 \$0 \$0 \$0	\$4,385,518 (\$266,694) \$2,438,089 \$975,816 (\$2,306,145) \$0 \$0	\$3,403,511 \$738,402 \$2,440,789 \$1,069,933 (\$2,051,479) \$0 \$0	\$ \$ \$ \$ \$ \$ \$ \$ \$	982,007 (1,005,096) (2,700) (94,116) (254,666) -	_	1,178,859 738,141 2,297,204 1,197,395
ner Receivables (includes advances) entories paid Expenses e From Third Party Payers-DSH lpractice Receivable oplimental Receivables Total Current Assets se Use is Limited sh estments	660,465 \$0 126,169 \$0 \$0 \$0	(\$266,694) \$2,438,089 \$975,816 (\$2,306,145) \$0 \$0	\$738,402 \$2,440,789 \$1,069,933 (\$2,051,479) \$0 \$0	\$ \$ \$ \$ \$	(1,005,096) (2,700) (94,116) (254,666) - -	_	738,141 2,297,204 1,197,395
entories paid Expenses e From Third Party Payers-DSH practice Receivable oplimental Receivables Total Current Assets se Use is Limited sh estments	\$0 126,169 \$0 \$0 \$0	\$2,438,089 \$975,816 (\$2,306,145) \$0 \$0	\$2,440,789 \$1,069,933 (\$2,051,479) \$0 \$0	\$ \$ \$ \$ \$ \$ \$ \$ \$	(2,700) (94,116) (254,666) -	_	2,297,204 1,197,395
paid Expenses e From Third Party Payers-DSH Ipractice Receivable oplimental Receivables Total Current Assets se Use is Limited sh estments	126,169 \$0 \$0 \$0	\$975,816 (\$2,306,145) \$0 \$0	\$1,069,933 (\$2,051,479) \$0 \$0	\$ \$ \$ \$	(94,116) (254,666) - -	_	1,197,395
e From Third Party Payers-DSH Ipractice Receivable oplimental Receivables Total Current Assets se Use is Limited sh estments	\$0 \$0 \$0	(\$2,306,145) \$0 \$0	(\$2,051,479) \$0 \$0	\$ \$ \$	(254,666)	_	
Ipractice Receivable oplimental Receivables Total Current Assets se Use is Limited sh estments	\$0 \$0	\$0 \$0	\$0 \$0	\$ \$	-	_	(1,845,477) - -
pplimental Receivables Total Current Assets se Use is Limited sh estments	\$0	\$0	\$0	\$	(736,481)		-
Total Current Assets se Use is Limited sh estments					(736.481)	-	-
e Use is Limited sh estments	6,953,738	21,977,288	24,769,685	\$	(736.481)		
sh estments					(100)101)	\$	23,401,085
estments							
nd Reserve/Debt Retirement Fund							
id heselve/best hethenen i dha	\$11,212,210	\$11,212,210	\$11,763,103	\$	(550,893)		12,704,494
stee Held Funds							
nded Depreciation							
ard Designated Funds							
er Limited Use Assets							0
Total Limited Use Assets	11,212,210	11,212,210	11,763,103	\$	(223,324)	\$	12,704,494
int, and Equipment							
	4 828 182	4 828 182	4 828 182	\$		\$	4,828,182
						Ψ	129,281,491
					(0)		26,856,789
the second s							1,694,007
bitalized Interest					00,000		1,004,007
Gross Property, Plant, and Equipment	163,634,721	166,509,389	166,458,626	\$	50,763	÷	162,660,469
s: Accumulated Depreciation	(\$91,613,709)	(\$91,613,709)	(\$91,207,260)	\$	(406,450)		(89,145,667)
Net Property, Plant, and Equipment	72,021,012	74,895,679	75,251,366	\$	(475,050)	\$	73,514,801
	PC07 295	<i>¢EQ4 EQE</i>	<i><u><u></u></u></i> <u></u>	•	(0.500)	•	
	φ027,305				(2,589)	\$	614,440
	CO1 040 000				-		485
e na se	\$21,343,036	\$U	ъ 0	\$	1.5		(111,925)
Total Other Assets	21,970,421	584,505	587,094	\$	(2,589)	\$	503,000
	112 157 381	108 669 687	112 271 240	¢	(2 704 502)	¢	440 400 004
	112,107,001	100,003,007	112,371,249	- -	(3,701,302)	Þ	110,123,381
ssets	0	0	0		0		0
TOTAL ASSETS	\$112,157,381	\$108,669,687	\$112,371,249	\$	(3,701,562)	\$	110,123,381
	ad Reserve/Debt Retirement Fund stee Held Funds ided Depreciation ird Designated Funds er Limited Use Assets Total Limited Use Assets 	ad Reserve/Debt Retirement Fund \$11,212,210 stee Held Funds \$11,212,210 ided Depreciation ided Depreciation ind Designated Funds 11,212,210 int, and Equipment 4,828,182 ding and Building Improvements 129,281,491 inpment 27,119,506 struction In Progress 2,405,542 sitalized Interest 163,634,721 Sross Property, Plant, and Equipment 163,634,721 s: Accumulated Depreciation \$91,613,709) Net Property, Plant, and Equipment 5627,385 ets Held for Future Use \$21,343,036 er Total Other Assets 21,970,421 TOTAL UNRESTRICTED ASSETS 112,157,381 esets 0	ad Reserve/Debt Retirement Fund stee Held Funds\$11,212,210\$11,212,210stee Held Funds ided Depreciation ard Designated Funds er Limited Use Assets11,212,21011,212,210nt, and Equipment d and Land Improvements4,828,1824,828,182ding and Building Improvements tipment istruction In Progress129,281,491129,281,49127,119,50629,994,17427,119,50629,994,17428,405,5422,405,5422,405,5422,405,542Bross Property, Plant, and Equipment163,634,721166,509,389s: Accumulated Depreciation Net Property, Plant, and Equipment(\$91,613,709)(\$91,613,709)Net Property, Plant, and Equipment\$627,385\$584,505er\$627,385\$584,505\$0erTotal Other Assets\$21,343,036\$0erTotal Other Assets21,970,421584,505TOTAL UNRESTRICTED ASSETS112,157,381108,669,687ersets000	ad Reserve/Debt Retirement Fund \$11,212,210 \$11,212,210 \$11,763,103 stee Held Funds ided Depreciation stee Held Funds \$11,212,210 \$11,763,103 ind Designated Funds rotal Limited Use Assets 11,212,210 11,212,210 11,763,103 nt, and Equipment 4,828,182 4,828,182 4,828,182 4,828,182 4,828,182 ding and Building Improvements 129,281,491 129,281,491 129,281,491 129,281,491 ipment 27,119,506 29,994,174 29,994,174 29,994,174 istruction In Progress 2,405,542 2,405,542 2,354,778 italized Interest 163,634,721 166,509,389 166,458,626 S: Accumulated Depreciation (\$91,613,709) (\$91,207,260) Net Property, Plant, and Equipment 72,021,012 74,895,679 75,251,366 immortized Loan Costs \$627,385 \$584,505 \$587,094 ets Held for Future Use \$0 \$0 \$0 \$0 er Total Other Assets 21,970,421 584,505 587,094 ets 112,157,381 108,669,687 112,371,249	ad Reserve/Debt Retirement Fund \$11,212,210 \$11,212,210 \$11,763,103 \$ stee Held Funds ided Depreciation ird Designated Funds \$ \$ \$ ind Designated Funds ird Designated Funds \$ \$ \$ \$ \$ ind Designated Funds ird Designated Funds \$ <td>ad Reserve/Debt Retirement Fund \$11,212,210 \$11,212,210 \$11,763,103 \$ (550,893) stee Held Funds idd Depreciation ird Designated Funds \$ (223,324) ind Designated Funds 11,212,210 11,763,103 \$ (223,324) int and Equipment 4,828,182 4,828,182 4,828,182 \$ - ing and Building Improvements 129,281,491 129,281,491 \$ - (0) struction In Progress 2,405,542 2,405,542 2,354,778 \$ 50,763 intalized Interest 163,634,721 166,509,389 166,458,626 \$ 50,763 Struction In Progress 2,2021,012 74,895,679 75,251,366 \$ (406,450) Structual de Depreciation (\$91,613,709) (\$91,613,709) \$ (\$91,207,260) \$ (406,450) Net Property, Plant, and Equipment 72,021,012 74,895,679 75,251,366 \$ (2,589) isstments in Subsidiary/Affiliated Org. \$ 21,970,421 584,505 \$ 587,094 \$ (2,589) er Total Other Assets 21,970,421 584,505 \$ 587,094 \$ (3,701,562) sets 0 0 0 0 0</td> <td>ad Reserve/Debt Retirement Fund \$11,212,210 \$11,212,210 \$11,763,103 \$ (550,893) stee Held Funds idd Depreciation idd Depreciation \$ (223,324) \$ ind Designated Funds 11,212,210 11,212,210 11,763,103 \$ (223,324) \$ nt, and Equipment 4,828,182 4,828,182 4,828,182 \$ - \$ ding and Building Improvements 129,281,491 129,281,491 129,981,474 \$ (0) istruction in Progress 2,405,542 2,405,542 2,34778 \$ 50,763 italized Interest 163,634,721 166,509,389 166,458,626 \$ 50,763 S: Accumulated Depreciation (\$91,613,709) (\$91,613,709) (\$91,207,260) \$ (406,450) Net Property, Plant, and Equipment 172,021,012 74,895,679 75,251,366 \$ (2,589) \$ introtized Loan Costs \$ 627,385 \$584,505 \$587,094 \$ (2,589) \$. er Total Other Assets \$ 21,970,421 \$584,505 \$87,094 \$ (2,589) \$ TOTAL UNRESTRICTED ASSETS 112,157,381 108,669,687 112,371,249 \$</td>	ad Reserve/Debt Retirement Fund \$11,212,210 \$11,212,210 \$11,763,103 \$ (550,893) stee Held Funds idd Depreciation ird Designated Funds \$ (223,324) ind Designated Funds 11,212,210 11,763,103 \$ (223,324) int and Equipment 4,828,182 4,828,182 4,828,182 \$ - ing and Building Improvements 129,281,491 129,281,491 \$ - (0) struction In Progress 2,405,542 2,405,542 2,354,778 \$ 50,763 intalized Interest 163,634,721 166,509,389 166,458,626 \$ 50,763 Struction In Progress 2,2021,012 74,895,679 75,251,366 \$ (406,450) Structual de Depreciation (\$91,613,709) (\$91,613,709) \$ (\$91,207,260) \$ (406,450) Net Property, Plant, and Equipment 72,021,012 74,895,679 75,251,366 \$ (2,589) isstments in Subsidiary/Affiliated Org. \$ 21,970,421 584,505 \$ 587,094 \$ (2,589) er Total Other Assets 21,970,421 584,505 \$ 587,094 \$ (3,701,562) sets 0 0 0 0 0	ad Reserve/Debt Retirement Fund \$11,212,210 \$11,212,210 \$11,763,103 \$ (550,893) stee Held Funds idd Depreciation idd Depreciation \$ (223,324) \$ ind Designated Funds 11,212,210 11,212,210 11,763,103 \$ (223,324) \$ nt, and Equipment 4,828,182 4,828,182 4,828,182 \$ - \$ ding and Building Improvements 129,281,491 129,281,491 129,981,474 \$ (0) istruction in Progress 2,405,542 2,405,542 2,34778 \$ 50,763 italized Interest 163,634,721 166,509,389 166,458,626 \$ 50,763 S: Accumulated Depreciation (\$91,613,709) (\$91,613,709) (\$91,207,260) \$ (406,450) Net Property, Plant, and Equipment 172,021,012 74,895,679 75,251,366 \$ (2,589) \$ introtized Loan Costs \$ 627,385 \$584,505 \$587,094 \$ (2,589) \$. er Total Other Assets \$ 21,970,421 \$584,505 \$87,094 \$ (2,589) \$ TOTAL UNRESTRICTED ASSETS 112,157,381 108,669,687 112,371,249 \$

SAN GORGONIO MEMORIAL HOSPITAL BANNING, CALIFORNIA EIGHT MONTHS ENDING FEBRUARY 28, 2023

			DISTRICT ONLY			LIA	BILITIES AND	FU	ND BALANCE		
			Current Month 2/28/2023		Current Month 2/28/2023		Prior Month 1/31/2023		Positive/ (Negative) Variance		Prior Year End 6/30/2022
Current	Liabilities										
[1] [2]	Accounts Payable Notes and Loans Payable (Line of Credit)	\$	506,662	\$	8,594,770 6,000,000	\$	11,298,723 6,000,000	\$ \$	(2,703,954)	\$	10,600,622 12,000,000
[3] [4]	Accounts Payable- Tax advance Accrued Payroll Taxes		-		- 6,412,510		- 6,146,096	\$ \$	- 266,415		- 5,597,527
[5] [6]	Accrued Benefits Accrued Benefits Current Portion		-		-		-	\$	-		-
[7]	Other Accrued Expenses		-					\$	-		-
[8] [9]	Accrued GO Bond Interest Payable Lease Liabilities		712,502		712,502 3,551,621		2,550,184 3,738,924	\$ \$	(1,837,682) (187,304)		2,526,756 4,259
[10] [11]	Due to Third Party Payers (Settlements) Advances From Third Party Payers		-		3,417,500		3,417,500	\$ \$	-		-
[12] [13]	Current Portion of LTD (Bonds/Mortgages) Current Portion of LTD (Leases)		2,335,000		2,335,000		2,335,000	\$\$	-		2,335,000
[14]	Other Current Liabilities		-		585,931		585,931	\$	-		585,411
	Total Current Liabilities		3,554,164		31,609,834		36,072,359	\$	(4,462,525)		33,649,575
Long Te [15] [16]	rm Debt Bonds/Mortgages Payable (net of Cur Portion) Leases Payable (net of current portion)		99,543,964 \$8,952,115		\$102,330,387 \$11,752,165	\$	101,432,619 \$11,752,165	\$ \$	897,768	\$	103,030,598 \$2,293,348
[17]	Total Long Term Debt (Net of Current)		108,496,079		114,082,552		113,184,784	\$	897,768		105,323,946
Other Lo [18] [19]	ong Term Liabilities Deferred Revenue Accrued Pension Expense (Net of Current)										
[20]	Other-Bridge Loan		0	_	4,852,624		4,852,624	\$	2		2,231,628
[21]	Total Other Long Term Liabilities		0		4,852,624		4,852,624	\$	-		2,231,628
	TOTAL LIABILITIES	\$	112,050,243	\$	150,545,010	\$	154,109,768	\$	(3,564,757)	\$	141,205,148
		_									
Net Ass [22] [23]	ets: Unrestricted Fund Balance Temporarily Restricted Fund Balance		(3,093,912)		(33,723,878)	\$	(33,723,878)	\$ \$	-	\$	(25,347,940)
[24]	Restricted Fund Balance		0 		-		-	≎ \$	-		-
[25]	Net Revenue/(Expenses)		3,201,050		(8,151,446)		(8,014,641)	\$	(136,805)	-	(5,733,827)
[26]	TOTAL NET ASSETS		107,137		(41,875,323)	\$	(41,738,519)	\$	(136,805)	\$	(31,081,767)
[27]	TOTAL LIABILITIES AND NET ASSETS	\$	112,157,380	\$	108,669,687	\$	112,371,249	\$	(3,701,562)	\$	110,123,381
		\$	(0)		0	\$	(0)		\$0 (_	-

Statement of Cash Flows SAN GORGONIO MEMORIAL HOSPITAL BANNING, CALIFORNIA EIGHT MONTHS ENDING FEBRUARY 28, 2023

CASH FLOW

HEAL	THCARE SYSTEM CASH FLOW	:	Current Month 2/28/2023
	BEGINNING CASH BALANCES		
[1]	Cash: Beginning Balances- HOSPITAL	\$	4,531,273
[2]	Cash: Beginning Balances- DISTRICT		3,457,405
[3]	Cash: Beginning Balances TOTALS	\$	7,988,678
	Receipts		
[4]	Pt Collections	\$	5,640,936
[5]	Tax Subsidies Measure D/Prop 13		46,840
[6]	Misc Tax Subsidies		- -
[7]	Donations/Grants		-
[8]	IGT & other Supplemental (Net)		1,310,905
[9]	Draws/(Paydown) of LOC Balances		<u>+</u> .
[10]	Other Misc Receipts/Transfers		299,243
	TOTAL RECEIPTS	\$	6,212,924
	Disbursements		
[11]	Payroll/ Benefits	\$	3,986,752
[12]	Other Operating Costs		2,331,397
[13]	Capital Spending		0
[14]	Debt serv payments (Hosp onlyw/ LOC interest)		
[15]	Other (increase) in AP /other bal sheet		2,703,954
[16]	TOTAL DISBURSEMENTS	\$	7,937,103
[17]	TOTAL CHANGE in CASH	\$	(1,724,180)
	ENDING CASH BALANCES		
[18]	Ending Balances- HOSPITAL	\$	4,482,911
[19]	Ending Balances- DISTRICT	Ŷ	1,781,587
[20]	Ending Balances- TOTALS	\$	6,264,498
			-,,-20
	ONAL INFO		
[21]	LOC CURRENT BALANCES	\$	6,000,000

TAB E

San Gorgonio Memorial Hospital and San Gorgonio Memorial Health Care District

To: Finance Committee, Board of Directors, and District Board

Agenda Item for March 28, 2023 Finance Committee and April 4, 2023 Board Meetings

Subject:

Authorization to declare the existing Siemens Somatom Sensation 64 CT Scanner Model #8377520, Serial Number #55296 as surplus property.

Background:

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As the hospital will be acquiring two new Canon CT Scanners for the Primary Stroke Center Project, we will not have a need for the existing Siemens Somatom Sensation 64 CT Scanner, serial number #55296.

We request the district declare the above equipment as surplus and authorize the hospital to dispose of the unit as appropriate.

<u>Recommended Action</u>: We request the district declare the above equipment as surplus and authorize the hospital to dispose of the unit as appropriate at fair market value.

TAB F

San Gorgonio Memorial Hospital and San Gorgonio Memorial Health Care District

To: Finance Committee, Board of Directors, and District Board

Agenda Item for March 28, 2023 Finance Committee and April 4, 2023 Board Meetings

Subject:

Presentation of Women's Clinic Midwifery Program Forecast and Authorization to Commence Project

Opportunity:

San Gorgonio Memorial Hospital has an opportunity to establish a Hospital-based Clinic department (1206d clinic) to better serve the needs of women within the San Gorgonio Memorial Healthcare District.

Program Specifics:

The Certified Nurse Midwives Clinic program will allow many women in the District to receive the following care from the Midwives: prenatal, newborn delivery (in the Hospital's OB Department), and post-partum services, along with basic Gyn services. Establishment of a program such as this will be consistent with the Hospital's Community Needs assessment by expanding and improving its services to members of the District.

Development of this program requires several months of planning, recruiting, and preparation prior to opening the Clinic. The Hospital leadership team is excited about this opportunity and recommends that this program be initiated as soon as feasible. It is anticipated that it could take up to six months to get the program operational.

Prior to the services being opened, many steps will need to be accomplished, including recruitment of two Certified Nurse Midwives, development of Departmental policies and procedures, credentialing by the Medical Staff, approval by the Boards, and individual credentialing of the Midwives by all payers, including Medi-Cal, Medicare, and numerous Health Plans. Additionally, prior to opening, DHCS needs to inspect the entire service and review and approve all these matters along with physical inspection and approval of the clinic site.

Finally, an extensive and targeted marketing program will be developed emphasizing the "availability of Certified Nurse Midwives who can provide all your prenatal and postpartum treatments and who are expected to be available for the delivery of your baby here at SGMH", in addition to "less travel time required to receive your care" will be seen as necessary and strong selling points for the success of this program.

Recommended Action:

To approve the requisite steps outlined above and in the Exhibit for the establishment of a Hospitalbased Midwifery Clinic service program.

A packet of program specifics is included as an Exhibit.

Women's Clinic & Midwifery Services

Background & Need

There are approximately 1,300 births per year (2020 & 2021) from the SGMHD zip code areas

SGMH capture was an average of 157 (2020 & 2021) or 12% of the total; (there were 175 births in 2022)

SGMH has an excellent, seismically compliant L&D, OB, and Nursery department.

Community Needs - More patients could avail themselves of SGMH (closer to home)

SGMH medical staff numbers are not positioned to capture significant additional volumes

Certified Nurse Midwives are qualified to work independently and deliver babies in the Hospital

The Hospital has the opportunity to establish a Certified Nurse Midwifery Program and Clinic

Patient studies report that women increasingly desire the care provided via the Certified Nurse Midwifery model

Assumptions - Operational:

SGMH opportunity for annual growth consists of 1,293 births less 267 Kaiser patients, or 1,026.

The forecast model projects 350 additional births (45 from OB physicians), thus capturing 34% more of the 1,026

After the full "ramp-up" year, these 350 births plus the current 175 totals 525 births

The 525 births equals 51% of the 1,026 births available

The 525 births equate to an average of 47 births per month, or 1.44 births per day.

After the "ramp-up" year, the Clinic visits are projected at 6,720, or 560/month, or 32 visits/day

It is anticipated that the Certified Nurse Midwives will also provide certain GYN services

The model includes 2 full-time Certified Nurse Midwives, 2 Medical Assistants, and an Office Manager starting the second year.

The Hospital will rent office space at Dr. Yu's office to house the Women's Clinic

The Hospital's OB services staffing are currently being underutilized, and as such, there is currently capacity to serve a greater number of inpatients before increasing staffing levels

Assumptions – Financial

The Hospital will bill the Midwifery Professional Fees to cover the Clinic operations

GYN services billings (potential additional revenue) are difficult to project and are not included in the model

The patient Payor Mix is projected as follows: Medi-Cal – 35%; Medi-Cal Managed Care – 42%; Insurance – 19%; and Self Pay/Other – 4%.

Clinic and Hospital Combined EBIDA will be \$624K after the first 24 months of operations

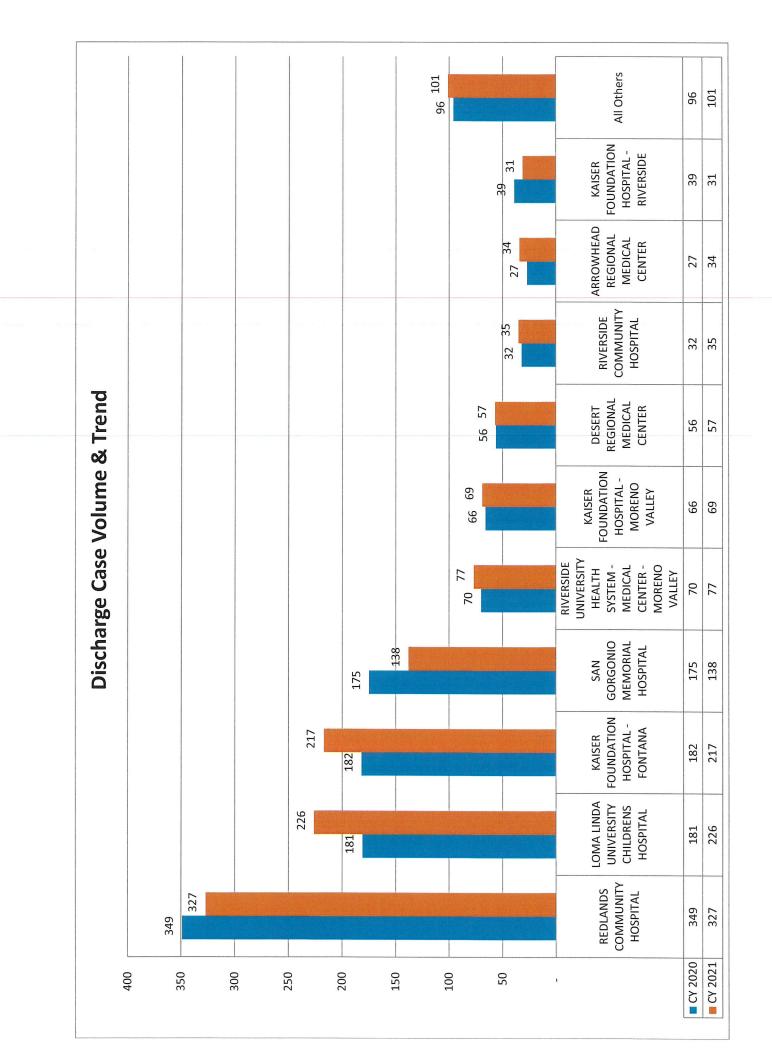
Supplemental Fundings are projected to increase by 622K and are included in the first 2 year's EBIDA, however, the cash will not be completely received until years 3 - 6 of operations.

The peak Cash Flow needs are projected to be \$418K within the first 8 months of operation and will turn positive in the 3rd year of operation.

Prepared March 16, 2023

(Summary)
Share
Market

	2020 & 2021	Combined - Average	33.0%	19.8%	0.0%	15.3%	7.2%	0.0%	5.5%	3.3%	3.0%	3.4%	9.6%	100.0%
(Excluding Kalser) Patient Discharges	2020 & 2021	Combined - Average	338	204	1	157	74	•	57	34	31	35	66	1,026
% of Market Share	2020 & 2021	Combined - Average	26.2%	15.7%	15.4%	12.1%	5.7%	5.2%	4.4%	2.6%	2.4%	2.7%	7.6%	100.0%
Patient Discharges	2020 & 2021	Combined - Average	338	204	200	157	V 74	68	57	34	31	35	66	1,293
		Facility Name	REDLANDS COMMUNITY HOSPITAL	LOMA LINDA UNIVERSITY CHILDRENS HOSPITAL	KAISER FOUNDATION HOSPITAL - FONTANA	SAN GORGONIO MEMORIAL HOSPITAL	RIVERSIDE UNIVERSITY HEALTH SYSTEM - MEDICAL CENTER - MOREN	KAISER FOUNDATION HOSPITAL - MORENO VALLEY	DESERT REGIONAL MEDICAL CENTER	RIVERSIDE COMMUNITY HOSPITAL	ARROWHEAD REGIONAL MEDICAL CENTER	KAISER FOUNDATION HOSPITAL - RIVERSIDE	All Others	Grand Total



					7.54%70%			All Others	7.54%	7.70%
							3.06%2.36%	KAISER FOUNDATION HOSPITAL - RIVERSIDE	3.06%	2.36%
ses							2.12% ^{59%}	ARROWHEAD REGIONAL MEDICAL CENTER	2.12%	2.59%
ket Share based upon Discharge Cases						-	2.51%67%	RIVERSIDE COMMUNITY HOSPITAL	2.51%	2.67%
pon Disc						4.40%.34%		DESERT REGIONAL MEDICAL CENTER	4.40%	4.34%
based u						5.18%.26%		KAISER FOUNDATION HOSPITAL - MORENO VALLEY	5.18%	5.26%
ket Share						5.50%.87%		RIVERSIDE UNIVERSITY HEALTH SYSTEM - MEDICAL CENTER - MORENO VALLEY	5.50%	5.87%
e of Mark				13.75% 10.52%				SAN GORGONIO MEMORIAL HOSPITAL	13.75%	10.52%
Percentage of Marl			16.54%	e 0. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.				KAISER FOUNDATION HOSPITAL - FONTANA	14.30%	16.54%
Pe			17.23%	0,77.14				LOMA LINDA UNIVERSITY CHILDRENS HOSPITAL	14.22%	17.23%
	27.42%							REDLANDS COMMUNITY HOSPITAL	27.42%	24.92%
	%) 00.00	25.00%		15.000%	10.00%	5.00%			CY 2020	C Y 2021

	A	s v	AK	AN	AO	AP	AQ	AR	AS	AT	AU
2				1 AL	ADDT'L O/B						
m 4		FY 24 TOTAL 2024	FY 25 TOTAI 2025		FY 24 & 25 COMBINED						
	ADJUSTMENTS TO BUDGET - 0/B										
9	Inpatient Revenue Outpatient Revenue	9,969,203 61,455	18,564,623 114,441		28,533,826 175,896						
α 6	Total Gross Patient Revenue New Deliveries	10,030,658 188	18,679,064 350		28,709,722 538						
	Discounts and Allowances Bad Debt Expense	(ann'nsc'a) 0	(10,664,004) 0		(24,414,56U) 0						
	Charity Care Total Deductions From Revenue	0 (8,530,006)	0 (15,884,554)		0 (24,414,560)						
15	Net Patient Revenue	-85.04% 1,500,652	-85.04% 2,794,510		4,295,162						
	Other Operating Revenue	218,159	403,800		621,959						
20	Grant Income	0	0		0 0						
21	Total Non- Patient Revenue Total Operating Revenue	218,159 1,718,811	403,800 3,198,310		621,959 4,917,121						
23	Salaries and Wades	430 665	1 330 950		1 761 614						
	Market Adjustments (for All Staff)	134,829	134,829		269,658						
	Contract Labor	0	0		400,000						
28	Physicians Fees Purchased Services	0 58 514	0 110.618		0 169 132						
	Supply Expense	121,895	226,992		348,886						
32	Utilities Repairs and Maintenance	0 6,256	66 11,651		66 17,907						
33	Insurance Expense	93,889 078	174,840		268,730						
	Leases and Rentals	10,796	20,103		30,899						
37		TOTAL 2024	2,379,319 TOTAL, 2025 819.994		1.584.040						
40	CLINIC BUDGET			a state	CLINIC						
		FY 24	FY 25		FY 24 & 25						
	Inpatient Revenue		101AL, 2025		COMBINED 0						
T T	Outpatient Revenue Total Gross Patient Revenue	398,082 398,082	743,151 743,151		1,141,233						
47 48	New Deliveries	259	480		739						
49	Clinic Visits	3,629	6,720		10,349						
_	Discounts and Allowances	0	0		00						
	Bad Debt Expense Charity Care	0 7,531	0 13,944		0 21,476						
55	Total Deductions From Revenue	7,531	13,944		21,476						
	Net Patient Revenue	390,550	729,206		1,119,757						
	Other Operating Revenue Grant Income	0 150 000	00		150 000						
	Total Non- Patient Revenue Total Operating Revenue	150,000 540,550	0 729,206		150,000 1,269,757						
63 63	62 63 Salaries and Wages	540,790	555,017		1,095,806						

	ι		$\left \right $				÷	
2 ************************************	FY 24 TOTAL 2024 135,197 135,197 18,000 18,000 249,166 58,426 13,000 66,334 91,000 66,334 91,000 66,334 91,000 647,362 3IDA 116,684	FY 25 TOTAL, 2025 138,754 66 18,000 137,505 86,277 12,000 1,041,619 1,041,619 1,041,619 1,041,619 (312,412) (312,412)	ADDTL OIB FY 24 & 25 COMBINED 273,952 66 36,671 144,703 25,000 66,334 169,000 2,229,531 (959,775) (959,775)		YX T	8	a a a a a a a a a a a a a a a a a a a	DA
81 82 CASH EI OW HOSPITAI			FY 24 & 25 COMBINED	FY 26	V CASH ELOW	FY 28	FY 29	TOTALS
	1,230,342	2,785,369	4,015,711	279,451	-	-		279,451
	0	0	0	155,588			116,520	621,959
	1,230,342 0	2,785,369 0 0	4,015,711	435,039	287,28	62,571	116,520	901,410
88 LABOR 89 PHYSICIANS	662,437 0	1,832,224 0	2,494,661 0	/	0 0	00	0 0	0 0
	239,06	524,617	763,683	43,			0	43,838
91 LEASE AND RENTS	9,135 D	20,089 0	29,224 0	4	1,675	00	0	1,675
93 TOTAL EXPENDITURES	910,638	2,376,930	3,287,568	45,	45,513	-	0	45,513
94 CASH SURPLUS (DEFICIT)	319,704	408,439	728,143	389,526	526 287,280	0 62,571	116,520	855,897
95 96 CUMULATIVE CASH POSITION	z			1,117,669	669 1,404,949	9 1,467,520	1,584,040	
97 98 CASH FLOW CLINICS 100 PATIENT REVENUES	319,626	727,211	FY 24 & 25 COMBINED 1,046,836	72,		0	0	72,921
101 GRANT REVENUES	150,000	0 797 211	1 196 836	- 62	0	0 0		72.921
	00					/		0 0
105 LABOR	675,987	693,837	1,369,824			0 0	0	0
106 PHYSICIANS	16,500	18,000 251 738	34,500 635 050	- ¹	1,500		0 0	1,500
		78,000	169,000	5		/	0	0
	1 166 808	1.041.575	2.208.383	21.	21.149	0	0	21.149
	(697,183)	(314,364)	(1,011,547)	51;			0	51,772
112 113 CUMULATIVE CASH POSITION	z			(959,775)	775) (959,775)	(959,775)	(959,775)	
CLINIC & HOSPITAL CASH	ASH	ACCUM. X-FOOT						
115 COMBINED		(283,404)	(283,404)	157,894	94 445,174	507,746	624,266	

TAB G

San Gorgonio Memorial Hospital and San Gorgonio Memorial Health Care District

To: Finance Committee, Board of Directors, and District Board

Agenda Item for March 28, 2023 Finance Committee and April 4, 2023 Board Meetings

Subject:

Approve Pharmacy 340B Program with The Craneware Group re: Outpatient Split Billing Rebate Program, Outpatient Retail Contract Pharmacy Rebates, and Inpatient Medications Rebate Program

Background:

CMS makes available a drug rebate program for Hospitals and other providers which serve a disproportionate number of Medicaid (Medi-Cal) patients. San Gorgonio Memorial Hospital has the opportunity to access this program via the services of The Craneware Group (TCG), a nationally recognized vendor which helps Hospitals and other providers obtain these rebates.

Program Structure: There are 3 program components for which SGMH will qualify:

- Outpatient "split billing" rebate program. This is administered by a Craneware software product which "virtually" identifies rebates for drugs that are administered to SGMH outpatients;
- 2) Outpatient Retail Pharmacy Rebates. This program provides rebates via pharmacies which are contracted with SGMH for drugs disbursed from those pharmacies to SGMH outpatients;
- 3) Inpatient Medications Rebate Program. This program provides rebates for qualifying inpatients for qualifying drugs administered.

Additionally, within the terms of this agreement, TCG will continue to provide SGMH with price transparency information which is required per federal and state mandates. This information is continuously updated and loaded to the SGMH website.

Details: The projected financial contribution to SGMH, after estimated fees and costs of the program ranges from \$171K to \$578K for the first year, and the net contribution for the second year of the program ranges from \$203K to \$610K. A copy of the financial projections are included on Page 8 of the attached Exhibit.

The fees for TCG included in the equations above are as follows: One-time fees of \$31,675, and Annual Fees of \$56,600. Note: The net contribution forecasts allow for up to \$130K per year if additional Pharmacy staff is needed.

<u>Recommended Action</u>: That the CEO be authorized to enter an agreement with The Craneware Group for the provision of the listed services as outlined.

Exhibit: The Craneware Group 340B program and financial forecasting package.



Transforming the Business of Healthcare



craneware

A federally-mandated drug discount program established in 1992

- drugs at a greatly reduced price to eligible covered > Requires manufacturers to sell certain outpatient entities if they participate in Medicaid
- Administration (HRSA) Office of Pharmacy Affairs, > Administered by Health Resources and Services which is an agency of the Department of Health and Human Services.

What is 340B?

strictly-outpatient settings

Hospital-owned clinics or specialty services within four walls

mixed-use settings

where patients can be both inpatient and outpatient Departments such as ED,

Discharge prescriptions Hospital-owned or to **OP** pharmacies

contract pharmacies

craneware group

the intent of 340B

340B was created "to stretch scarce federal resources as far as possible, reaching more comprehensive services"* by reducing the amount they spend on outpatient drugs. eligible patients and providing more

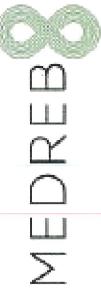
* H.R. Rep. No. 102-384(II), at 12 (1992)

a S O O
CCO

3 Programs that will drive reduced costs and rebates







craneware group



Savings

- Annual Estimated Savings for 40 bed DSH Hospital •
 - *Based on \$2M-\$5M drug spend

\$ 544,165	\$ 361,662	\$ 179,159
High	Average	Low (Current Savings for Top 8 Drugs)



craneware group

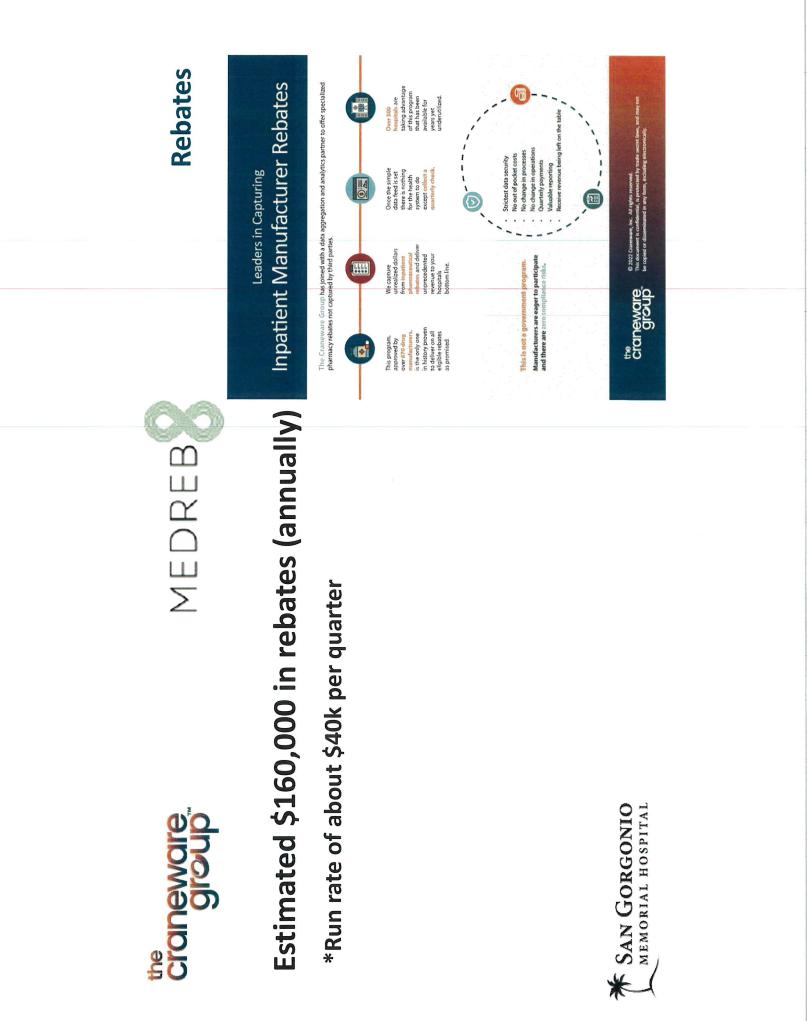


Estimated Annual Benefit

\$92,000	\$71,000	\$50,000
High	Average	Low



Benefit





Summary of Estimated Savings/Benefit/Rebates



	HIGH
Product	Gross Value
Sentinel	\$544,165
Sentrex	\$92,000
Rebate Program	\$160,000
Gross Value	\$796,165
	Net Value (1st year)
TCG Fees	\$88,275
San G. FTE	\$130,000
Net Value	\$577,890
	Net Value (2nd year)
TCG Fees	\$56,600
San G. FTE	\$130,000
Net Value	\$609,565

AI	AVERAGE
Product	Gross Value
Sentinel	\$361,661
Sentrex	\$71,000
Rebate Program	\$160,000
Gross Value	\$592,661
	Net Value (1st year)
TCG Fees	\$88,275
San G. FTE	\$130,000
Net Value	\$374,386
	Net Value (2nd year)
TCG Fees	\$56,600
San G. FTE	\$130,000
Net Value	\$406,061

	LOW
Product	Gross Value
Sentinel	\$179,159
Sentrex	\$50,000
Rebate Program	\$160,000
Gross Value	\$389,159
	Net Value (1st year)
TCG Fees	\$88,275
San G. FTE	\$130,000
Net Value	\$170,884
	Net Value (2nd year)
TCG Fees	\$56,600
San G. FTE	\$130,000
Net Value	\$202,559

craneware group	* SAN GORGONIO MEMORIAL HOSPITAL	Pricing proposal
Products & Services	Description	
Sentinel Split Billing Solution	Hospital pharmacy procurement and 340B compliance solution to drive savings	on to drive savings
Sentrex TM /eRx Pharmacy Solution	340B solution for managing contract pharmacy relationships	
Trisus Medication Claim (TMC)	A pharmacy-focused claims solution to help reduce denials and improve processing	nd improve processing
Senturion Services	Seasoned 340B experts to help review overall 340B program guidance/optimization	guidance/optimization
SM-Referral Verification Service	Service to capture 340B scripts for eligible patients referred to outside providers	o outside providers
Inpatient Drug Rebate Program	Solution and process for obtaining uncaptured Inpatient Pharmacy Rebates	macy Rebates
Implementation & Training	Assigned resources to execute the deployment and training of your products	f your products
Trisus Pricing Transparency Solution	Provides hospital wide comparative pricing data and publication to ensure compliance with Federal and State laws	ion to ensure
Total one-time fees	\$31,675	
Total annual recurring fees	\$56,600	



Transforming the Business of Healthcare

Thank you!

TAB H

<u>SAN GORGONIO MEMORIAL HOSPITAL</u> <u>Medical Staff Services Department</u> <u>M E M O R A N D U M</u>

DATE:	March 15, 2023
TO:	Susan DiBiasi, Chair Governing Board
FROM:	Sherif Khalil, M.D., Chairman Medical Executive Committee

SUBJECT: MEDICAL EXECUTIVE COMMITTEE REPORT

At the Medical Executive Committee held this date, the following items were approved, with recommendations for approval by the Governing Board:

Approval Item(s):

2023 Annual Approval of Policies & Procedures

The attached list of policies & procedures is recommended for approval (See attached)

Pharmacy & Therapeutics Committee Reports

Drug Formulary Additions (See attached):

- **1. Entresto:** (Sacubatril/ Valsartan) Pharmacology: Angiotensin blocker (ARB) plus Neprilysin inhibitor : induces vasodilation and sodium excretion through urine.
- **2. Nalmephene:** to be used in conjunction with patent airway access, same as naloxone. Pharmacology: naltrexone based opioid antagonist indicated for the complete or partial reversal of opioid effects including resp depression of natural and synthetic opioid overdose

SAN GORGONIO MEMORIAL HOSPITAL 2023 APPROVAL OF POLICIES & PROCEDURES

Title	Policy Area	Revised?
Adult Mechanical Ventilation Protocols	Respiratory Therapy	Revised
Bronchodilator Frequency Guidelines	Respiratory Therapy	New
Clinical Duties of the General Supervisor	Clinical Laboratory	Unchanged
CT Chest With and Without Intravenous Contrast	Diagnostic Imaging	Revised
CT Daily Quality Control Standard Operating Procedure	Diagnostic Imaging	Revised
Diagnostic Imaging Department Cleaning	Diagnostic Imaging	Revised
Diagnostic Imaging Department Safety	Diagnostic Imaging	Revised
Identification of Syringe Contents	Diagnostic Imaging	Revised
Lead Shielding Maintenance	Diagnostic Imaging	Revised
Monitored Interventional Radiology Procedures	Diagnostic Imaging	Revised
MRI ABD (LIVER)	Diagnostic Imaging	Revised
MRI Code Blue	Diagnostic Imaging	Revised
MRI Code Red	Diagnostic Imaging	Revised
MRI Daily Quality Control	Diagnostic Imaging	Revised
MRI Medrad Power Injector	Diagnostic Imaging	Revised
Provider Orders: Transcribing, Acknowledging and Processing	Nursing	Revised
Transfer of Hospitalized Patients For Higher Level of Care	Case Management	Revised

San Gorgonio Memorial Hospital Pharmacy and Therapeutics February 21, 2023

Entresto (Sacubatril/ Valsartan)

Pharmacology: Angiotensin blocker (ARB) plus Neprilysin inhibitor : induces vasodilation and sodium excretion through urine.

Data: PARADIGM-HF Trial showed greater benefit in reducing mortality and morbidity compared to ACE inhibitor therapy. AHA guidelines prefer.

FDA Indication: For the treatment of CHF and expanded FDA indication to reduce the risk of cardiovascular deaths and hospitalization for heart failure.

SGMH: QIP reporting on discharging CHF w/ DM and CHF with LEF less than 40% on ACE / ARB or Entresto. From the QIP data, there was about 40 patients in calendar year that could have benefited for ARNI

Budget: About \$21 per day Entresto 24mg/26mg; 49mg/51mg; 97mg/103mg

Restrictions: Cardio consult on new patients, and continue home dose, carry all 3?

Nalmephene: to be used in conjunction with patent airway access, same as naloxone.

Pharmacology: naltrexone based opioid antagonist indicated for the complete or partial reversal of opioid effects including resp depression of natural and synthetic opiod overdose

Pharmacokinetics: Onset 5-15 minutes, half life of 11 hours, less need for redosing; higher binding affinity to opioid receptors (naloxone 30-120min duration)

SGMH Use: Upon recommendation of Dr Rhee, for use in ED as an alternative to Narcan Drip, opioid crisis, multiple options are crucial

Monitoring: same as naloxone use, observation that overdose symptoms have resolved

Costs: \$30 for a 2mg/2ml vial. Naloxone 0.4mg vial is about \$5, naloxone 1mg syringe \$15-20.

Education: Dr Singh and Jose will provide education to ED medical staff

Entresto (Sacubitril/Valsartan)

Indications and Criteria for Use in Adults

- Heart Failure, chronic
- Symptomatic congestive heart failure, in patients with systemic left ventricular dysfunction

Dosage and Administration

Indication	Initial Dose	Maintenance Dose
Heart Failure w/ patient on low dose ACE/ARB or no previous therapy	Sacubitril 24 mg/valsartan 26 mg orally twice daily; titration, increase the dose every 2 to 4 weeks to the target maintenance dose, as tolerated	Sacubitril 97 mg/valsartan 103 mg orally twice daily, as tolerated
Heart Failure w/ patient on moderate to high dose ACE/ARB	Sacubitril 49 mg/valsartan 51 mg orally twice daily; titration, double the dose after 2 to 4 weeks to the target maintenance dose, as tolerated	Sacubitril 97 mg/valsartan 103 mg orally twice daily, as tolerated
Renal Impairment	eGFR < 30 mL/min: sacubitril 24 mg/valsartan 26 mg twice daily; double dose every 2 to 4 weeks to target maintenance dose. eGFR > 30mL/min: no adjustment needed	Sacubitril 97 mg/valsartan 103 mg orally twice daily, as tolerated
Hepatic Impairment	Mild (Child-Pugh class A): No adjustment necessary Moderate (Child-Pugh class B): Initial, sacubitril 24 mg/valsartan 26 mg twice daily; double dose every 2 to 4 weeks to target maintenance dose. Should be used with caution in patients with ascites due to cirrhosis Severe (Child-Pugh class C): Use not recommended	Sacubitril 97 mg/valsartan 103 mg orally twice daily, as tolerated

Administration: For IV Compatibility.

No results

Warnings and Monitoring Parameters

Black Box Warning: Drugs that act directly on the renin-angiotensin system may cause fetal injury or death; Discontinue immediately if pregnancy is detected

Contraindications:

- Angioedema to prior ACE inhibitor or angiotensin II receptor blocker therapy
- Concomitant aliskiren use in diabetic patients
- Concomitant use of ACE inhibitors; do not administer within 36 hours of each other
- Hypersensitivity to sacubitril, valsartan, or any component of the product

Adverse reactions:

- Acute Kidney Injury: Increased Serum Creatinine
- Angioedema: similar risk as ACE inhibitors
- Hyperkalemia: monitor serum potassium
- Hypotension: high dose risk

Monitoring:

- Improvement in signs or symptoms of chronic heart failure is indicative of efficacy
- Serum creatinine
- Renal function, in patients with renal artery stenosis
- Serum potassium; periodically; especially in patients with risk factors for hyperkalemia (diabetes, severe renal impairment, hypoaldosteronism, or high potassium diet)
- Signs and symptoms of angioedema or hypotension

Major Drug Interactions

- Cilazapril (Inhibace)- established
- Furosemide (Lasix)- theoretical
- Lithium (Lithobid)- theoretical
- Potassium Citrate (Urocit-K)- theoretical
- Potassium Phosphate (K-Phos)- theoretical
- Simeprevir- theoretical
- Spirapril (Renormax)- established
- Tacrolimus (Prograf)- theoretical
- Trimethoprim (Primsol)- theoretical

Pricing

- Entresto 24-26 mg (per each): \$13.36
- Entresto 49-51 mg (per each): \$13.36
- Entresto 97-103 mg (per each): \$13.36

Retrospective Review

Cardiovascular event risk, coronary artery disease-related events:

• In a follow-up analysis of PARADIGM-HF (N=8399), the risk of composite CV death, HF hospitalization, myocardial infarction (MI), stroke, and resuscitated sudden death (a pre-specified broader endpoint) was significantly reduced by 17% with sacubitril/valsartan compared with enalapril (event rate, 24.3% vs 28.4%). Risk of composite CV death, non-fatal MI, unstable angina pectoris, other hospitalized angina, or coronary revascularization (a post-hoc defined coronary endpoint) was also reduced a significant 17% in the sacubitril/valsartan group

compared with the enalapril group (event rate, 17.1% vs 20.3%). Overall, coronary event rates were low and thus effects of treatment on individual endpoints could not be reliably determined.

The effects of sacubitril/valsartan on coronary outcomes in PARADIGM-HF - PubMed (nih.gov)

Congestive heart failure

A randomized trial (PARADIGM-HF; N=8399) of adult patients with NYHA class II, III, or IV symptoms and an ejection fraction of 40% or less demonstrated that the combination of sacubitril and valsartan (LCZ696) 200 mg (equivalent to 160 mg of valsartan) twice daily was superior to enalapril 10 mg twice daily in reducing the risks of the primary outcome (defined as death from cardiovascular (CV) causes or hospitalization for heart failure (HF)). The primary outcome occurred significantly less in the LCZ696 group than enalapril group (21.8% vs 26.5%). A total of 17% receiving LCZ696 and 19.8% receiving enalapril died from any cause; this result was significant. Overall, significantly fewer patients in the LCZ696 group than in the enalapril group stopped their study medication because of an adverse event (10.7% vs 12.3%) or because of renal impairment (0.7% vs 1.4%)

Angiotensin-neprilysin inhibition versus enalapril in heart failure - PubMed (nih.gov)

TAB I

	Title	Policy Area	Owner	Workflow Approval
1			Peleuses, John: Interim VP of	Ariel Whitley for Hospital
	Arterial Line Blood Draw	Respiratory Therapy	Ancillary Services	Board of Directors
2			Cox, Mayda: Director Financial	Ariel Whitley for Hospital
-	Bad Debt	Patient Financial Services	Services	Board of Directors
3			Cox, Mayda: Director Financial	Ariel Whitley for Hospital
5	Cash Reconciliation, Cash Receipts - Audit Trail	Patient Financial Services	Services	Board of Directors
4			Whitley, Ariel: Executive	Ariel Whitley for Hospital
4	CEO Designee	Administration	Assistant	Board of Directors
5			Hazley, Byron: Director	Ariel Whitley for Hospital
5	Clinical Laboratory Quality Management Plan	Clinical Laboratory	Laboratory	Board of Directors
6			Karam, Annah: Chief Human	Ariel Whitley for Hospital
0	Compliance Program Board Responsibilities	Compliance	Resources Officer	Board of Directors
7	Garbage Disposal and Green Waste		Hawthorne, Lakeisha: Director	Ariel Whitley for Hospital
/	Management	Dietary	Food and Nutrition	Board of Directors
8			Hudson, Tracie: Director of	Ariel Whitley for Hospital
0	Hand Held Nebulizers (HHN)	Respiratory Therapy	Infection Control	Board of Directors
9			Karam, Annah: Chief Human	Ariel Whitley for Hospital
9	Medicare Credit Balance Quarterly Reports	Compliance	Resources Officer	Board of Directors
10			Karam, Annah: Chief Human	Ariel Whitley for Hospital
10	Provider Incentive Plans	Compliance	Resources Officer	Board of Directors
11	Recommended Documentation Parameters for		Peleuses, John: Interim VP of	Ariel Whitley for Hospital
11	Respiratory Care	Respiratory Therapy	Ancillary Services	Board of Directors
10			Hudson, Tracie: Director of	Ariel Whitley for Hospital
12	T-Piece Ventilation	Respiratory Therapy	Infection Control	Board of Directors
10			Peleuses, John: Interim VP of	Ariel Whitley for Hospital
13	Tracheostomy Care	Respiratory Therapy	Ancillary Services	Board of Directors

TAB J

Record Grazette 03/10/23



We Are Ready For You

- Robotic Surgery
- Less time for recuperation
- Less re-infection
- Fewer complications
- Most effective minimally invasive surgery with a successful track record



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Healthcare district board to fill vacant seat on April 4

San Gorgonio Memorial Healthcare District is seeking applicants for a seat on its board of directors, which will be vacant March 8, following the resignation of Director Darrell Peterson.

The Healthcare District Board intends to fill the vacancy at its regular meeting on April 4.

The appointee must be a registered voter residing within the boundaries of the healthcare district and be prepared to hold office until the next scheduled election (November 2024).

Interested applicants should submit their letter of interest to:

San Gorgonio Memorial Healthcare District Board of Directors, Attention: Ariel Whitley, executive assistant, 600 N. Highland Springs Ave. Banning, CA 92220; or by email to AWhitley@sgmh.org.

Letters of interest must be received not later than March 21, 2023. The appointee must file a Fair Political Practices Act Disclosure Statement Form 700 in accordance with the provisions of the Political Reform Act, and implementing regulations of the Fair Political Practices Commission.

The board may select any duly qualified person within its discretion.

Record Gazette 3/23/2023

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