

COMMUNITY HEALTH CENTER (CHC) GOVERNING BOARD MEETING

SPECIAL MEETING AGENDA

Thursday, January 23, 2025, at 5:00 p.m.

District Administrative Offices: 6530 La Contenta Road, Suite 400, Yucca Valley CA 92284

Eric Menendez remote from 220 N. Palm Springs Canyon Dr., Palm Springs, CA 92262

. The public may also attend the meeting via the electronic link provided below:

INSTRUCTIONS FOR JOINING THIS MEETING BY REMOTE LINK

This public meeting may be accessed through the Microsoft Teams platform. Join the meeting by (1) visiting the District website at <u>MBHDistrict.org</u> and (2) selecting the purple tab "Board Meeting Agendas" at the top of the home page. (3) Click on the URL link presented under the agenda buttons and (4) enter the meeting using the ID and Passcode listed below. Access to the meeting may require the download of the Microsoft Teams application on the device being used.

Meeting ID: 248 586 983 906

□ Passcode: hs3hf336

CALL TO ORDER

ROLL CALL

PLEDGE OF ALLEGIANCE – Please stand as able.

READING OF MISSION AND VISION STATEMENTS

Mission Statement: To improve the health and wellness of the communities we serve. *Vision Statement:* A healthy Morongo Basin. *Core Values:* Commitment, Collaboration, Accountability, Dignity, Integrity, and Equity

PUBLIC COMMENTS

The public comment portion of this agenda provides an opportunity for the public to address the Governing Board on items not listed on the agenda and that are of interest to the public at large and are within the subject matter jurisdiction of this Board. The Governing Board is prohibited by law from taking action on matters discussed that are not on the agenda, and no adverse conclusions should be drawn if the Board does not respond to public comments at this time. Comments that concern individual incidences of patient care are welcome, however, we encourage doing so only after other administrative avenues for redress have been fully exhausted. In all such instances we will be unable to ever respond publicly due to patient confidentiality obligations. In all cases, your concerns will be referred to the Administrator for review and a timely response. Comments are limited to three (3) minutes per speaker. All comments are to be directed to the Governing Board and shall not consist of any personal attacks. Members of the public are expected to maintain a professional, courteous decorum during their comments. Public input may be offered on an agenda item when the item comes up for discussion and/or action and will be limited to 90 seconds per speaker. Members of the public who wish to speak shall proceed when called by the Chairperson of the Board. Please state your name and community of residence for the record.

APPROVAL OF MEETING AGENDA

• *Motion 25-65: Motion to approve the meeting Agenda as published.*

APPROVAL OF CHC CONSENT AGENDA

• Motion 25-66: Motion to approve the December 5, 2024, minutes.

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ACTION ITEMS

RE-ASSESS TIME FOR CHC BOARD MEETING – Cindy Schmall, CEO

• Motion 25-67: Motion to approve the new CHC Board meeting time.

FINANCIAL REPORT – Debbie Anderson, CFO

• Motion 25-68: Motion to accept and file the November 2024 Financial Report.

HRSA VISIT REVIEW EDUCATION – Tricia Gehrlein, CPE/CO

REPORTING

CEO REPORT – Cindy Schmall, CEO

CALENDAR REVIEW – Cindy Schmall, CEO

BOARD MEMBERS COMMENTS

ADJOURN MEETING

I CERTIFY THAT A COPY OF THIS AGENDA WAS POSTED PER SECTION 54954.2 OF THE CALIFORNIA GOVERNMENT CODE.

Beverly Krushat

_____Posted January 20, 2025, at 10:00 a.m.

Beverly Krushat, CHC Board Clerk

The Morongo Basin Healthcare District Board of Directors' meeting facility is accessible to persons with disabilities. If assistive listening devices or other auxiliary aids or services are needed to participate in the public meeting, requests should be made through the Executive Assistant at least three (3) business days prior to the meeting. The Executive Assistant's telephone number is 760.820-9229 and the office is located at 6530 La Contenta Rd, #100, Yucca Valley, CA. The California Relay Service is 711. In conformity with Government Code Section 54957.5, any writing that is a public record, that relates to an item listed on this agenda, and that will be distributed to all or a majority of Morongo Basin Healthcare District Board of Directors less than twenty-four (24) hours prior to the meeting for which this agenda relates, will be available for public inspection at the time the writing is distributed. This inspection may be made during the meeting at the address/meeting room(s) listed above or an electronic copy may be requested in advance of the meeting via email message to bkrushat@mbhdistrict.org.

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Morongo Basin Health Care District Community Health Center GOVERNING BOARD MEETING MINUTES of Thursday, December 5, 2024, at 4:45 p.m.

This meeting convened on the District's campus at 6530 La Contenta Road, Suite 400, Yucca Valley, CA 92284. The meeting was also accessible by Microsoft Teams remote platform.

Mission Statement: To improve the health and wellness of the communities we serve. Vision Statement: A healthy Morongo Basin. Core Values: Commitment, Collaboration, Accountability, Dignity, Integrity, and Equity

PRESENT:

- Cody Briggs (present)
- Pat Cooper (present)
- Mary Dunn (present)
- Marc Greenhouse (present)

- Bryan Goldfarb (remote)
- Nicola Keller (present)
- Eric Menendez (present)
- Jackie Todd (present)
- Lisa Ryan (present)

STAFF:

- Cindy Schmall, CEO (present)
- Jill Goodwin, Clinical Svcs. Manager (present)
- Beverly Krushat, CHC Board Clerk (present)
- Janeen Duff, Program Dev. Liaison (present)
- Tricia Gehrling, Chief Patient Experience/ Compliance Officer (present)

CALL TO ORDER - Board meeting was called to order by Nicola Keller at 4:45 p.m.

ROLL CALL - Beverly Krushat conducted roll call and confirmed there is a quorum.

OBSERVANCES –

Cody Briggs led the pledge of allegiance. Mary Dunn read the Mission and Vision statements.

PUBLIC COMMENTS - None

APPROVAL OF MEETING AGENDA -

Motion 24-54: MSC (Briggs/Greenhouse) 9/0/0 motion carried to approve the Agenda as published.

APPROVAL OF CHC CONSENT AGENDA -

• November 7, 2024, Meeting Minutes

Motion 24-55: MSC (Menendez/Todd) 9/0/0 motion carried to approve the Consent Agenda.

RATIFY DISTRICT BOARD APPOINTMENTS TO GOVERNING BOARD - Cindy Schmall, CEO

This item was tabled until the next Board meeting on January 9, 2024.

ELECTION OF BOARD OFFICERS- Karen Graley, MBHD Board Clerk

Ms. Graley explained the term of office effective with the January 2025 regular CHC meeting.

Chairperson Nicola Keller opened nominations for Chairperson 2025 of the Board; Cindy Schmall, CEO nominated Jackie Todd for Chairperson; Ms. Todd did not accept the nomination. CEO Schmall then nominated Marc Greenhouse for Chairperson; Cody Briggs seconded; there were no further nominations for Chairperson.

Motion 24-57: CEO Schmall motioned to appoint Marc Greenhouse as Chairperson; Cody Briggs seconded; motion was passed by unanimous vote.

Ms. Graley then opened the floor to nominations for Vice Chairperson.

CEO Schmall nominated Nicola Kellar as Vice Chairperson; Ms. Keller accepted the nomination; there were no further nominations for Vice Chairperson.

Motion 24-58: CEO Schmall motioned to appoint Nicola Keller as Vice Chairperson; motion passed by a unanimous vote.

Ms. Graley opened the floor to nominations for Secretary.

CEO Schmall nominated Jackie Todd for Secretary; Ms. Todd did not accept the nomination; Cody Briggs stated that he would be able to fulfill the role; there were no further nominations for Secretary.

Motion 24-59: By a unanimous vote Cody Briggs was appointed as Secretary.

Ms. Graley opened the floor for nominations for Treasurer.

CEO Schmall explained what the Treasurer's job is and asked Eric Menendez if he was interested; Eric Menedez accepted the role; there were no further nominations.

24-60: By a unanimous vote Eric Menedez was appointed as Treasurer.

APPROVE ANNUAL BUSINESS CALENDAR – Cindy Schmall, CEO

CEO Schmall explained that the annual business calendar identifies all the items we need to achieve in the next year and when we need to achieve them.

24-61: MSC (Menendez/Briggs) 9/0/0 to approve the annual business calendar.

RE-APPOINTMENT OF BOARD MEMBER – Cindy Schmall, CEO

CEO Schmall informed everyone that the discussion centers around the re-appointment of Bryan Goldfarb to the CHC Board of Directors. A Board member must attend at least 75% of the Board meetings, which means you may not miss more than three (3) meetings all year. Unfortunately, Mr. Goldfarb has missed many more that just three (3) meetings. The Brown Act stipulates that a board member must attend, in person, at least 10 of the 12 meetings, and only miss two (2) while being remote. However, our by-laws state you can miss three (3). Mr. Goldfarb has made us aware that he is currently working out of area and cannot attend in person. CEO Schmall stated that her recommendation at this time, even though he has been a valuable member of this Board and we very much value his participation, that we not re-appoint Mr. Goldfarb. However, when Mr. Goldfarb is able and more local to attend the meetings (per HRSA and the Brown Act) we would be happy to have him back.

CEO Schmall asked Mr. Goldfarb his thoughts and if he would be able to commit. Mr. Goldfarb stated that his schedule is in flux right now and wouldn't be able to let the board know until a month or two down the road. He also stated that had he not had so many technical and communication issues he would have made more meetings remotely.

COMMENTS:

Pat Cooper stated that Mr. Goldfarb doesn't have specific dates right now and in order to comply with HRSA and the Brown Act rules, we would need this information. She recommended to not re-appoint at this time but when he has his schedule sorted out, we would be happy to have him back.

Nicola Kellar informed the members that HRSA and our By-Laws are very strict as far as what we can and can't do. Unfortunately, there is documentation that Mr. Goldfarb has not been able to attend the majority of the meetings this year and is therefore ineligible to be reappointed.

Eric Menendez and Jackie Todd stipulated that the board should wait until Mr. Goldfarb is able to attend meetings.

Motion 24-62: MSC (Menendez/Todd) 8/0/0 to deny the re-appointment of Mr. Goldfarb until his location and circumstances change.

POLICY NUMBER: CHC-FS-216 REFUSAL TO PAY – Debbie Anderson, CFO

CFO Anderson explained that the substance of this policy is not changing, we are attempting to explain it more in layman's terms. She then proceeded to explain the changes within the policy w/changes to update the years.

Motion 24-63: MSC (Briggs/Todd) 8/0/0 to approve Policy Number: CHC-FS-216 Refusal to Pay.

FINANCIAL REPORT – Debbie Anderson, CFO

OVERVIEW

The <u>clinic fmancials</u> for the month of October show a loss of \$(19.990) and year to date shows a loss of \$(366.811). (See Table 1 & 2)

The ARP capital income was booked and so clinics shows a small loss of \$(19.990). This brings the year to date loss to \$(366.811). In comparison, the year to date budget is \$(893.358), so clinic also are doing better than budgeted.

Visits year to date are coming in at 12.843. Chart A shows this is the best year to date we've had since FY 19-20.

CLINIC CHANGE IN NET POSITION

Table 1 Clinics October 2024

Clinics	Actual Mth	Budget Mth	Over/(Under)	% of Budget
Patient services (net)	699,772	692,507	7,265	1 05%
Grant Revenue	279,452	127,742	151,7 10	118 76%
340B Revenue	15,515	33,375	(17,860)	-53.51%
Capitation Fees	173,674	166,695	6.979	4.19%
Records & Interest	100	146	(46)	-31.21%
Cost Report Adjustments	(141,667)	(141,667)	(0)	-0.00%
Quality	38.105	43,217	(5, 112)	-11.83%
	1,064,951	922,015	142,936	15.50%
Salaries - Clinic	481,327	576,212	94,885	16.47%
Fringe - Clinic	110,028	119,340	9,312	7.80%
Phys Fees - Clinic	135,030	114,894	(20,136)	-17.53%
Puchases Services - Clinic	70,711	65,201	(5.510)	-8.45%
T, Network & Phones - Clinic	4,020	17.393	13,373	76.89%
Supplies - Clinic	82,695	32,856	(49,839)	-151.69%
Supplies - 340B	17,581	21,832	4.250	19.47%
R&M - Clinic	12,837	4,786	(8,051)	-168.22%
Leases/Rentals - Clinic	149	377	229	60 60%
Utilities - Clínic	4,788	5,128	340	6.62%
Ins - Clinic	144	152	9	5,66%
Other - Clinic	12.219	7,508	(4.711)	-62.75%
Depreciation	16.658	14.590	(2,068)	-14.18%
	948.188	980,268	32.081	3,27%
Operating Income/(Loss) before Allocation	116,764	(58,253)	175,017	300.44%
Abocation of Overhead for Health Centers	(136,753)	(207,339)	70 585	34 04%
Change in Net Position	(19,990)	(265,591)	245,601	92.47%

Grant revenue variance due to bookings for the ARP equipment grant. The 340B revenue variance is due to pharmaceutical drug restrictions placed on FQHC's by the drug companies. Salaries & fringe variances are due positions budgeted not filled. so savings took place. The physician fees are over due to increases in visits being done by BH. Peds. and Chiro. Supplies for the clinic is over due to equipment being bought for the ARP capital grant. This was not budgeted since we were unsure if HRSA was going to approve the change from the modular building to equipment. Since there was less expenses than budgeted in administration. the allocation of overhead expenses is not as much as budgeted.

<u>Clinics</u>	Actual YTD	Budget YTD	Over/(Under)	% of Budget
Patient services (net)	2,595,130	2,619,483	(24,353)	-0.93%
Grant Revenue	702,230	567,400	134,831	23.76%
3408 Revenue	96,563	126,244	(29,6 81)	-23.51%
Capitation Fees	689,267	666,780	22,488	3 37%
Records & Interest	551	553	(2)	-0.43%
Cost Report Adjustments	(566,667)	(566,667)	0	0.00%
Quality	136,990	172,867	(35,876)	-20.75%
	3,654,065	3,586,660	67,405	1.88%
Salaries - Clinic	1,759,094	2,136,786	377,692	1 7 .68%
Fringe - Clinic	369,725	448,505	78,780	17.57%
Phys Fees - Clinic	507,300	434,598	(72,702)	-16.73%
Puchases Services - Clinic	246,227	259,923	13,696	5.27%
IT, Network & Phones - Clinic	85,716	69,570	(16,145)	-23.21%
Supplies - Clinic	197,305	124,283	(73,022)	-58.76%
Supplies - 340B	65,502	64,068	18,566	22.08%
R&M - Clinic	29,481	18,703	(10,777)	-57 62%
Leases/Rentals - Clinic	981	1,509	528	34.99%
Utilities - Clinic	34,709	29,691	(5,018)	-16. 9 0%
Ins - Clinic	575	609	34	5.66%
Other - Clinic	84,364	29,135	(55,229)	-189.56%
Depreciation	66,073	58,359	(7.715)	-13.22%
	3.447.052	3,695,739	248,687	6,73%
Operating Income/(Loss) before Allocation	207,013	(109,079)	316,092	289.78%
Allocation of Overhead for Health Centers	(573.824)	(784,279)	210,455	26.83%
Change in Net Position	(366,811)	(893,358)	526,547	58.94%

Table 2 Clinics Year to Date

Quality payments are not as high due to complexities of timing. bundled scores, improvement from the previous year, and other factors. IT for the clinic is over due to equipment being bought for the ARP capital grant. The other variance is due to recruitment fees paid for the new Split Rock doctor.

Chart A - Visits History Chart

Month	FV 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23	FY 23-24	FY 24-25
Jul	3,055	3,283	3,091	2,877	350	2,758	3,054
Aug	3,886	3,587	3,016	1,425	3,315	3,195	2,992
Sep	3,140	3,501	3,069	3,134	3,256	2,593	3,049
Oct	3,562	3,892	3,267	3,282	3,071	3,026	3,748
Nov	3,249	3,353	2,532	3.116	2,936	2,974	
Dec	2,865	3,304	2,984	2,705	2,881	2,613	
Jan	3,698	4,011	2,926	2,925	3,001	1,258	
Feb	3,198	3,763	3,192	3,068	2,882	2,998	
Mar	3,515	2,927	3,521	3,332 📒	3,331	3,057	
Apr	3,660	\$2005F	3,461	3,094	2,896	3,026	
May	3,662	2,200	3,043	3,239	3,247	3,160	
lun	3,344	2.786	3,086	3.218	2.939	2,679	
Total	40,867	38,673	37,288	37,415	36,425	35,337	12,843
Total July - Oct	13,643	14,263	12,443	12,718	12,312	11,572	12,843

Motion 24-64: MSC (Menendez/Todd) 8/0/0 motion carried to accept and file the October 2024 financial report.

REPORTING

QUALITY REPORT – Tricia Gehrlein, CPE/CO

2024 UDS Measures Q3

eClinicalWorks has updated the UDS Reports and the attached numbers are an accurate reflection of performance by quarter. One report, Ischemic Vascular Disease (tracking patients with a diagnosis who are prescribed aspirin or another anti-platelet) is not accurately reflecting the patient population who were prescribed aspirin. Angie Villaluz continues to adjust the settings for this report, and it will be accurate for Q4.

The only significant change from the outcomes previously reported is for Tobacco Screening. Prior to 2024, the HRSA requirement was that all medical patients 18 years of age and older be screened for tobacco use and, when necessary, appropriate intervention be given. For 2024, this measure changed from 18 years of age and older to 12 years of age and older.

The reporting for previous quarters did not reflect patients 12 years of age and older, it was only reporting 18 years of age and older; the report has been updated to reflect the correct patient age. The correction, combined with the need for increased adult provider documentation, caused a decrease in our compliance rate by approximately 10% per quarter. As we were unaware the report was not appropriately capturing age range, we were unaware that the pediatricians were not capturing this data. This oversight has been rectified and we anticipate an improvement for quarter 4 reporting. Further, the adult providers will be reminded of the need to document both the screening and intervention for those that are positive for tobacco use.

UDS Reporting to HRSA

HRSA is now requiring that specific annual reporting data be sent electronically, directly from our electronic health record to their reporting system. This is a change from previous years, where we would manually enter data in their system.

For 2024 (which is reported by February 15, 2025) patient demographic data and two UDS Measures must be sent directly from our electronic health record. Angie Villaluz has been working diligently with our electronic health record provider, eClinicalWorks, to ensure that we have data integrity. Preliminary testing of the required patient demographic data currently shows no inconsistencies or errors. We continue to ensure that all of the UDS measures are accurate and testing is ongoing.

CEO REPORT – Cindy Schmall, CEO

- Health Management and Education Clinic is going live on December 9th.
- Best of Morongo Basin we were voted #1 Best Dr's. Office
- Chiro has moved into their new space
- Integration of blended services has begun within the clinics
- We hired three (3) new MA's in November

OPERATIONS

- Adults 2.0 remodel is complete and the area is available for use.
- 300 remodel has restarted and expect completion by end of year.
- Split Rock clogged toilet has been fixed in Peds along with the exterior lights on the dental building.
- MMU is set and functioning well.
- Split Rock Modular flooring choices have been turned in and requoted. Septic is due to start on December 16th and electrical work is ongoing.

TRANSPORTATION

- Our two (2) mini vans are wrapped and back in service.
- MDU remodel will be completed this week and will be in service on Tuesday, December 10th.
- We are exploring the purchase of two (2) new vehicles.

HRSA VISIT REVIEW EDUCATION – Tricia Gehrlein, CPE/CO

CPE/CO Gehrlein educated the Board members on the HRSA visit that will be coming up in March.

CALENDAR REVIEW – Cindy Schmall, CEO

CEO Schmall reviewed the December 2024 and January 2025 calendars with the Board members. Noting the change for the Employee Holiday Luncheon from December 13th to December 19th. An additional note that the CHC Board meeting for January will be on January 9th due to the New Years holiday.

BOARD MEMBER COMMENTS -

Lisa Ryan – Apologized for being late as she is coming from Palm Springs. Eric Menendez – Informed the members that he was working with 29 Palms and Yucca Valley on the homeless issue.

ADJOURNMENT

Meeting adjourned at 5:58 p.m.

Cody Briggs, Secretary of the Board

Minutes recorded by Beverly Krushat, CHC Board Clerk



6530 La Contenta Road, Suite 100, Yucca Valley California 92284 | 760.820.9229

December 31, 2024

- To: CHC Board of Directors
- From: Deborah Anderson, CFO
- Re: CFO's Report for November 2024

OVERVIEW

The <u>clinic financials</u> for the month of November show a loss of (119,323) and year to date shows a loss of (486,134). (See Table 5 & 6)

Visits for November landed at 3,015 in comparison to budgeted visits of 2,902, so for the second month in a row we exceeded budgeted visits. Due to this improvement, the clinics year to date change in net position is quite a bit less than budgeted. Year to date we were expecting to have a loss of over \$1.1 million; instead we have losses of \$(486,000). This may not seem significant, but as we look back on the budget, there were some challenges surrounding it such as:

- HRSA FQHC base grant dollars stay the same at \$1,532,907. Been this amount since 2/1/2019
- Salaries need to be increased to meet SB-525 requirements
- Health benefits have increases year over year much higher than the nominal 3-5%
- IT needs have increased substantially in last few years

So even though the clinics have losses, there is some respite in that losses haven't been as large as expected, despite the challenges above.

CLINIC CHANGE IN NET POSITION

Table 1 Clinics November 2024

Clinics	Actual Mth	Budget Mth	Over/(Under)	% of Budget
Patient services (net)	563,534	572,071	(8,537)	-1.49%
Grant Revenue	166,266	127,742	38,524	30.16%
340B Revenue	39,171	27,571	11,601	42.08%
Capitation Fees	187,025	166,695	20,330	12.20%
Records & Interest	160	121	39	31. <mark>87</mark> %
Cost Report Adjustments	(1 41 ,667)	(141,667)	(0)	-0.00%
Quality	38,154	43,217	<u>(</u> 5.062)	-11.71%
	852,644	795,750	56,894	7.15%
Salaries - Clinic	443,479	504,186	60,706	12.04%
Fringe - Clinic	116,538	111,751	(4,787)	-4.28%
Phys Fees - Clinic	108,115	94,912	(13,203)	-13.91%
Puchases Services - Clinic	63,210	63,620	410	0.64%
IT, Network & Phones - Clinic	25,874	17,393	(8,481)	-48.76%

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Table 1 (continued)

Clinics	Actual Mth	Budget Mth	Over/(Under)	% of Budget
Supplies - Clinic	33,619	27,142	(6,477)	-23 86%
Supplies - 340B	21,397	19,225	(2,172)	-11.30%
R&M - Clinic	8,503	4,433	(4,070)	-91.81%
Leases/Rentals - Clinic	100	377	277	73.49%
Utilities - Clinic	4,486	5,365	879	16.38%
Ins - Clinic	486	152	(334)	-219.14%
Other - Clinic	9,694	6,791	(2,903)	-42.75%
Depreciation	16,641	14,590	(2,052)	-14.06%
	852,142	869,935	17,7 94	2.05%
Operating Income/(Loss) before Allocation	502	(74, 185)	74,687	100.68%
Allocation of Overhead for Health Centers	<u>(1</u> 45,826 <u>)</u>	<u>(1</u> 71,279)	25.453	14.86%
Operating Income/(Loss) after Allocation	(145,323)	(245,464)	100,141	40.80%
Non-Operating	26,000		26.000	-100.00%
	26,000		26,000	-100.00%
Change in Net Position	(119,323)	(245,464)	126,141	51.39%

Grant revenue variance due to bookings for the ARP equipment grant. The 340B revenue variance is due to pharmaceutical drug restrictions placed on FQHC's by the drug companies. Salaries variance is due to positions budgeted not filled, so savings took place. The physician fees are over due to increases in visits being done by BH, Peds, and Chiro. Due to the ARP grant, supplies & IT continue to be over budget as we purchase items for that grant that was not accounted for in the budget. Since there were less expenses than budgeted in district (non-clinics P&L) for the month, the allocation of overhead expenses is not as much as budgeted.

Table 2 Clinics Year to Date

Clinics	Actual YTD	Budget YTD	Over/(Under)	% of Budget
Patient services (net)	3,158,664	3,191,554	(32,890)	-1.03%
Grant Revenue	868,497	695,142	173,355	24.94%
340B Revenue	135,734	153,815	(18,081)	-11.75%
Capitation Fees	876,292	833,475	42,818	5.14%
Records & Interest	711	674	36	5.38%
Cost Report Adjustments	(708,333)	(708,333)	0	0.00%
Quality	175 <u>,</u> 144	216,083	(40.939)	-18.95%
	4,506,709	4,382,410	124,299	2.84%
Salaries - Clinic	2,202,574	2,640,972	438,398	16.60%
Fringe - Clinic	486,263	560,256	73,993	13 21%
Phys Fees - Clinic	615,415	529,510	(85,905)	-16.22%
Puchases Services - Clinic	309,437	323,543	14,106	4.36%
IT, Network & Phones - Clinic	111,590	86,963	(24,627)	-28.32%
Supplies - Clinic	230,924	151,425	(79,499)	-52.50%
Supplies - 340B	86,898	103,292	16,394	15.87%
R&M - Clinic	37,984	23,137	(14,847)	-64.17%
Leases/Rentals - Clinic	1,081	1,886	805	42.69%
Utilities - Clinic	39,195	35,055	(4,140)	-11.81%
Ins - Clinic	1,060	761	(299)	-39.30%
Other - Clinic	94,058	35,926	(58,132)	-161.81%
Depreciation	82,715	72, 94 8	<u>(</u> 9,767)	-13.39%
	4,299,193	4,565,674	266,481	5.84%

Table 2 (continued)

Clinics	Actual YTD BL	udget YTD Ove	r/(Under)	% of Budget
Operating Income/(Loss) before Allocation	207,515	(183,264)	390,779	213.23%
Allocation of Overhead for Health Centers	(719.649)	(955,558)	235.908	24.69%
Operating Income/(Loss) after Allocation	(512,134)	(1,138,822)	626,688	55.03%
Non-Operating	26,000		26.000	-100.00%
	26,000	19 1	26,000	<mark>-100</mark> .00%
Change in Net Position	(486,134)	(1,138,822)	652,688	<mark>57.31%</mark>

Quality payments are not as high due to complexities of timing, bundled scores, improvement from the previous year, and other factors. The R&M variance is due to higher supply costs for the peds & adult renovations. The other variance is due to recruitment fees paid for the new Split Rock doctor.

Month		FY 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23	FY 23-24	FY 24-25
Jul		3,055	3,283	3,091	2,877		2,758	3,055
Aug		3,88	3,587	3,016	3.425	3,315	3,195	2,992
Sep		3,140	3,501	3,069	3,134	3,256 🛴		3,047
Oct		3,562	3,892	3,267	3,282	3,071	3,026	3,748
Nav		3,249	3,353	2,632	3,116	2,936	2,974	3,015
Dec		7死 起き	3,304	2,984	2,705	2,881	2,613	
Jan		3,698	4,011	2,926	2,925	3,001	3,258	
Feb		3,198	3,763	3,192	3,068	2,882	2,998	
Mar		3,515	2,927	3,521	3,332		3,057	
Apr		3,660	<u>_</u>	3,461	3,094	2,896	3,026	
May		3,662	2,200	3,043	3,239	3,247	3,160	
Jun		3,344	2,786	3,086	3,218	2,939	2,679	
Total		40,867	38,673	37,288	37,415	36,425	35,337	15,857
Total July - Nov	•	16,892 🖡	17,616 🖡	15,075	15,834	15,248	14,546	15,857

Chart A – Visits History Chart



January 5, 2024

To:Board of DirectorsFrom:Cindy Schmall, CEORe:CEO Board Report

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District

- Tina Huff, Director of Integrated Services, Fredi Levitt, Manager of BH and I met with Diana Fox from Reach Out to discuss collaboration on a substance use disorder grant they have in the Morongo Basin. We will meet again in a few weeks with a plan on how we may participate.
- The District is in process of converting our phone system to a new system that will have better clarity and less degradation.
- Management is continuing to prepare for the HRSA On-site visit. We are revising all policies and ensuring that we are in compliance.
- Split Rock is still progressing, we have the septic and electrical in process. Flooring that was chosen two years ago is no longer available so new flooring options have been made.
- We have expanded into the old pediatric space to give adults more room now that we have more providers there.
- ➢ We have conducted three physician interviews and have at least one viable candidate that we will be bringing out to do an on-site tour.
- CHC needs at least two more board members. Please talk to your friends and community members to see if we can get some members.

BOARD CALENDAR

	February 2025								
Sun	Mön	Tue	Wed	Thu	Fri	Sat			
2	3	4	5	6 4:45p CHC Board 6:00p MBHD Board	7	8			
9	10	11	12	13	14	15			
16	17	18	[·] 19	: 20	21	22			
23	24	25	26	: 27	28				

BOARD CALENDAR

