MORONGO BASIN
COMMUNITY HEALTH CENTER
A SERVICE OF MORONGO BASIN HEALTHCARE DISTRICT

Morongo Basin Healthcare District

Morongo Basin Community Health Center

GOVERNING BOARD MEETING AGENDA

Thursday, August 6, 2026 at 4:45

Meeting will be held at 6530 La Contenta Road, Suite 400, Yucca Valley CA 92284
and may be attended by the remote platform, Microsoft Teams.

INSTRUCTIONS TO JOIN THIS MEETING FROM A REMOTE SITE: This public meeting may be accessed through the Microsoft Teams platform. Join the meeting by **(1)** visiting the District website at MorongoBasinHealth.org and **(2)** selecting at the top of the website page the purple tab "Board Meeting Agendas" **(3)** Click on the link presented under the agenda buttons. Access to the meeting will require the download of the Microsoft Teams application on the device used if not already done so.

CALL TO ORDER

ROLL CALL

OBSERVANCE

- READING OF 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, Equity
- PLEDGE OF ALLEGIANCE: *Please stand as able.*

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 that *are of interest to the public at large* and are within the subject matter jurisdiction of this Board. The 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 publicly because of California Brown Act and/or due to patient confidentiality obligations. In all cases, your concerns will be referred to the Chief Executive Officer for review and a timely response. Comments are limited to three minutes per speaker and shall not exceed a total of 20 minutes for all speaking. Comments should be made to the Board and should 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. Members of the public who wish to speak should notify the meeting chairperson; and for remote attendees through the application's "Chat" option.

APPROVAL OF MEETING AGENDA

- **Motion 26-174** Motion to approve the meeting agenda as published.

APPROVAL OF CONSENT AGENDA---------- Tab 1

- **Motion 26-175** Motion to approve the Governing Board meeting minutes dated July 2, 2026, as presented.

BOARD EDUCATION:

IEHP Quality Reimbursement Program – *Tricia Gehrlein, CAO*

BUSINESS ACTION ITEMS:

Quarterly Quality Report – *Tricia Gehrlein, CAO* ---------- Tab 2

- **Motion 26-176** Motion to accept and file the second quarter 2026 Quality report.

DISCUSSION:

- Staffing Update – *Cindy Schmall, CEO*
- Annual Board Attestation Form – *Cindy Schmall, CEO*

STAFF REPORTS

- MONTHLY FINANCIAL REPORT – *Debbie Anderson, CFO* ---------- Tab 3
  Motion 26-177 to accept the monthly financial report as presented.
- CEO STAFF REPORT – *Cindy Schmall, CEO*---------- Tab 4

CALENDAR REVIEW ---------- Tab 5

- Schedule of events for CHC Week (August 3-7)

BOARD MEMBER COMMENTS

MEETING ADJOURNED

I certify that a copy of this agenda was posted per the State of California's Government Code, Section 54954.2.

Karen Graley, Board Clerk

Posted August 3, 2026

This meeting facility is accessible to people 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 Board Clerk at least three (3) business days prior to the meeting. The Board Clerk's telephone number is 760.820-9229 extension 1901. The office is located at 6530 La Contenta Road #100, Yucca Valley, CA. 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 the Board 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 kgraley@MBHDistrict.org.

MORONGO BASIN
COMMUNITY HEALTH CENTER
A SERVICE OF MORONGO BASIN HEALTHCARE DISTRICT

TAB #1
CONSENT AGENDA

MINUTES FOR
LAST MONTH'S MEETINGS

MORONGO BASIN
COMMUNITY HEALTH CENTER
A SERVICE OF MORONGO BASIN HEALTHCARE DISTRICT

Morongo Basin Healthcare District

Morongo Basin Community Health Center
Minutes of the Governing Board Meeting

Thursday, July 2, 2026

Convened on the La Contenta campus; the public was invited to attend the meeting on campus or via Microsoft Teams, an electronic, remote platform.

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

BOARD MEMBERS PRESENT
- Cody Briggs *(not present onsite but attended by remote platform to observe meeting)*
- Gloria Cabrera *(present)*
- Pat Cooper *(present)*
- Marc Greenhouse *(present)*
- Sean Loomis *(present)*
- Lisa Ryan *(not present)*
- Jackie Todd *(present)*
- Esther Watson *(present)*

STAFF PRESENT
- Cindy Schmall, CEO *(remote)*
- Debbie Anderson CFO *(remote)*
- Karen Graley, Board Clerk *(remote)*
- Tela Thornett, Operations Manager
- Kelly Hedges-Wehner, Director Pt Care Services
- Dianna Anderson, Community Programs Mgr
- Tina Huff, Integrated Health Services Director
- JJ Greer, Site Supervisor, Split Rock
- Jill Goodwin, Clinical Services Manager
- Sherri Tincher, Patient Financial Services Manager

GUESTS:
- Dianne Markle-Greenhouse, District board member
- Jim Flint, community member
- Todd Brown, community member

CALL TO ORDER

Sean Loomis called the meeting to order at 4:45 p.m. Board Clerk Karen Graley took roll call and declared a quorum for the meeting. Sean Loomis led the Pledge of Allegiance and read the mission and vision statements. There were no public comments.

APPROVAL OF MEETING AGENDA
- Motion 26-170: Motion by Marc Greenhouse to approve the meeting agenda; second by Jackie Todd; motion carried by unanimous vote.

APPROVAL OF CONSENT AGENDA
- Motion 26-171: Motion by Gloria Cabrera to approve the Governing Board meeting minutes dated June 4, 2026; second by Jackie Todd; motion carried by unanimous vote.

ACTION ITEMS

Governing Board Appointment:
- Motion 26-172: Motion by Marc Greenhouse to appoint James Flint to the Morongo Basin Community Health Center Governing Board; second by Esther Watson; motion carried by unanimous vote.

CEO Cindy Schmall introduced Mr. Flint and asked him why he wants to join the board, and what he brings to the board. He shared that he worked at Hi-Desert Medical Center (HDMC) for 10 years in the

IT department. When the district sold the hospital operations to Tenet, they relocated IT services out of house. “I’m comfortable working again with Cindy Schmall, Karen Graley and others from the hospital days. My background from HDMC gives me a unique perspective about healthcare.” Jackie Todd stated she thought he was well qualified. CEO Cindy Schmall congratulated Jim Flint on being seated to the board.

REPORTS

Monthly Financial Report:

- Motion 26-173: Motion by Marc Greenhous to accept the May 2026 financial report as presented; second by Esther Watson; motion carried by unanimous vote.

Debbie Anderson, CFO, presented the financial report for May 2026. She referred the members to the agenda packet for the written report. Ms. Anderson presented the report in detail and asked for questions. No questions were offered but board members nodded approval and thanked her for the report. The written financial report for May is attached to these minutes.

CEO Staff Report:
Ms. Schmall referred the members to her written report in the agenda packet.

- The Split Rock Building has power; however, we are still awaiting the fire alarm system installation, waiting on their engineering drawings. We may move to another company as the original company has been unresponsive. The fencing around the property is still in progress but is expected to be done soon. Now operating under CUPCCAA rules which has slowed down operations. Repeated calls to the state regarding the permit for the removal of a single limb have been fruitless. We will continue to follow up with these items and hope to have the project up and running by the end of August or early September.
- Some board members recently toured clinic facilities. We are working toward making YV campus a comprehensive site, moving all patient related services into the clinic buildings. Some upgrades were done to the adult and behavioral health departments. We’re in the process of updating the spaces to make them more comfortable for patients and employees. It will provide better continuity for patients. We are still working on a plan to relocate Yucca Valley dental services into the Ancillary Services building which brings them much closer to the Yucca Valley campus. Additional work at the Yucca Valley campus includes the adjustment of fencing across the front of the buildings facing the highway. The Behavioral Health waiting room and reception area projects are complete, and staff are working to remove old carpet, replace lighting, paint, and provide more sound proofing of the offices for privacy. This will allow us to bring the referrals and case management teams onto the Yucca Valley campus creating a single site campus for all services except dental. Plans are still in process for moving dental services to our Ancillary Services building.
- We have hired a nurse practitioner part-time. He will be starting in July and is a strong addition to the team. Our search for a provider continues and we are currently in negotiation with a strong potential candidate, a military souse. She will visit the clinic on Monday. She’s family practice which allows her to see both adult and pediatric patients.
- IEHP Quality requirements have continued to change, and our quality reimbursement monies have decreased. Tricia Gehrlein, Chief Administrative Officer, will present a report to you next month on some of these changes. Our goal is to achieve quality recognition from HRSA in their quality badge program. Unfortunately, the quality scores do not impact reimbursement.

Marc Greenhouse asked for clarification on the hopeful new provider. Ms. Schmall stated we have been advertising for a provider for a year and a half without success. To now have someone considering joining our team is terrific. He will see adult patients.

CALENDAR REVIEW:
Cindy Schmall reviewed the upcoming events calendar. She highlighted National Community Health Center Week, saying, “We do several fun things for staff. On Friday we will serve lunch in suite 600. You are invited to join us for lunch at 11:30 a.m.”

MEETING ADJOURNED:
The meeting was adjourned at 5:18 p.m.

_____
Lisa Ryan, Secretary of the Board

ATTACHMENT TO MINUTES

MORONGO BASIN HEALTHCARE DISTRICT
6530 La Contenta Road, Suite 100, Yucca Valley California 92284 | 760.820.9229

June 25, 2026

To: CHC Board of Directors

From: Deborah Anderson, CFO

Re: CFO's Report for May 2026

OVERVIEW

The clinic financials for the month of May shows income of $13,067 and year to date shows income of $581,913. (See Table 1 & 2)

GASB 103, Financial Reporting Model Improvements issued in May 2024 modernizes the rules for state and local governments. It is effective for fiscal years beginning after June 15, 2025, which means it will be implemented this year. The definitions of operating revenues and expenses and of nonoperating revenues and expenses will replace accounting policies that vary from government to government, thereby improving comparability. Our most significant impact will be that grant revenue will be required to be reported as nonoperating revenue vs. operating revenue like it has been previously. This will have a negative impact on your operating indicator. However, the hospital lease revenue will continue to be reported as operating and the interest component of the lease will continue to be reported as nonoperating.

CLINIC CHANGE IN NET POSITION

Table 1 Clinics May 2026

Clinics	Actual Mth	Budget Mth	Over/(Under)	% of Budget
Patient services (net)	812,210	604,261	207,949	34.41%
Grant Revenue	231,827	127,742	104,084	81.48%
340B Revenue	42,673	27,163	15,510	57.10%
Capitation Fees	183,652	180,832	2,820	1.56%
Records & Interest	247	139	107	76.94%
Cost Report Adjustments	(137,361)	(137,360)	(0)	-0.00%
Quality & TRI/Prop 56, Misc	16,396	21,042	(4,645)	-22.08%
	1,149,644	**823,818**	**325,826**	**39.55%**
Salaries - Clinic	482,521	488,704	6,183	1.27%
Fringe - Clinic	148,978	118,687	(30,290)	-25.52%
Phys Fees - Clinic	81,970	66,443	(15,527)	-23.37%
Puchases Services - Clinic	59,344	60,942	1,597	2.62%
IT, Network & Phones - Clinic	24,989	24,459	(529)	-2.16%
Supplies - Clinic	42,000	30,019	(11,982)	-39.91%
Supplies - 340B	33,027	23,311	(9,716)	-41.68%
R&M - Clinic	6,636	6,301	(335)	-5.31%
Leases/Rentals - Clinic	-	142	142	100.00%

Table 5 (continued)

Clinics	Actual Mth	Budget Mth	Over/(Under)	% of Budget
Utilities - Clinic	7,342	5,677	(1,665)	-29.32%
Ins - Clinic	287	302	14	4.75%
Other - Clinic	24,717	7,423	(17,294)	-232.99%
Depreciation	17,015	18,792	1,776	9.45%
	928,825	**851,200**	**(77,625)**	**-9.12%**
Operating Income/(Loss) before Allocation	220,819	(27,382)	248,201	906.43%
Allocation of Overhead for Health Centers	(207,951)	(169,006)	(38,945)	-23.04%
Operating Income/(Loss) after Allocation	12,867	(196,388)	209,256	106.55%
Non-Operating	200	-	200	-100.00%
	200	-	200	-100.00%
Change in Net Position	**13,067**	**(196,388)**	209,456	106.65%

Table 6 Clinics Year to Date

Clinics	Actual YTD	Budget YTD	Over/(Under)	% of Budget
Patient services (net)	8,134,733	6,979,210	**1,155,522**	16.56%
Grant Revenue	2,172,092	1,430,692	**741,400**	51.82%
340B Revenue	467,698	313,732	**153,967**	49.08%
Capitation Fees	2,021,180	1,989,150	32,030	1.61%
Records & Interest	2,457	1,608	849	52.81%
Cost Report Adjustments	(1,510,550)	(1,510,966)	416	0.03%
Quality & TRI/Prop 56, Misc	759,572	231,458	**528,114**	228.17%
	12,047,183	**9,434,885**	**2,612,298**	**27.69%**
Salaries - Clinic	5,254,197	5,561,916	307,718	5.53%
Fringe - Clinic	1,279,823	1,279,138	(684)	-0.05%
Phys Fees - Clinic	949,325	767,413	(181,912)	-23.70%
Puchases Services - Clinic	671,147	677,065	5,917	0.87%
IT, Network & Phones - Clinic	248,853	269,054	20,201	7.51%
Supplies - Clinic	445,707	346,714	**(98,993)**	-28.55%
Supplies - 340B	336,992	265,704	(71,288)	-26.83%
R&M - Clinic	120,114	70,445	**(49,669)**	-70.51%
Leases/Rentals - Clinic	1,306	1,558	252	16.16%
Utilities - Clinic	82,584	75,657	(6,928)	-9.16%
Ins - Clinic	3,161	3,318	158	4.75%
Other - Clinic	109,441	84,195	(25,246)	-29.98%
Depreciation	191,547	206,706	15,159	7.33%
	9,694,198	**9,608,884**	**(85,315)**	**-0.89%**
Operating Income/(Loss) before Allocation	2,352,984	(173,999)	2,526,984	1452.30%
Allocation of Overhead for Health Centers	(1,771,840)	(1,952,022)	180,182	9.23%
Operating Income/(Loss) after Allocation	581,144	(2,126,021)	2,707,166	127.33%
Non-Operating	768	-	768	-100.00%
	768	-	768	-100.00%
Change in Net Position	**581,913**	**(2,126,021)**	2,707,934	127.37%

Patient services variance is due to higher patient visits. Grant revenue variance is due to spending for the ARP capital and HIV grant that was not budgeted (the supplies – clinic line is also higher because some of the expenses for this grant spending is in this line). Quality revenue is higher because we anticipated cuts to quality; however, the cuts will take another year before they are realized. Physician fees are higher due to increased services being done by all providers. 340B supplies expense is higher due to drug manufacturer restrictions. R&M is higher than budgeted due to clinics replacing some windows at the various buildings, which individually don't meet the criteria for capitalization. Other expenses are higher due to recruitment fees being expended for another physician. Since the District had savings on expenses, there is not as much movement of costs between the District and the Clinics, which shows as a positive variance above.

Chart A – Visits History Chart

Month	FY 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23	FY 23-24	FY 24-25	FY 25-26
Jul	2,942	3,283	3,091	2,877	2,670	2,758	3,030	3,467
Aug	3,766	3,587	3,015	3,425	3,315	3,195	2,975	3,099
Sep	3,043	3,501	3,065	3,134	3,256	2,593	3,041	3,346
Oct	3,551	3,892	3,264	3,282	3,071	3,027	3,697	3,296
Nov	3,229	3,353	2,627	3,116	2,936	2,928	2,952	2,595
Dec	2,858	3,304	2,976	2,705	2,881	2,556	3,027	3,000
Jan	3,698	4,010	2,921	2,925	3,001	3,226	3,316	3,210
Feb	3,198	3,763	3,190	3,068	2,882	2,980	3,303	2,903
Mar	3,515	2,927	3,516	3,332	3,331	3,032	3,338	3,415
Apr	3,660	2,066	3,460	3,094	2,896	3,016	3,648	3,430
May	3,662	2,200	3,043	3,239	3,247	3,143	3,564	3,241
Jun	3,344	2,786	3,082	3,218	2,939	2,652	3,275	-
Total	40,466	38,672	37,250	37,415	36,425	35,106	39,166	35,002
Total YTD	37,122	35,886	34,168	34,197	33,486	32,454	35,891	35,002

MORONGO BASIN
COMMUNITY HEALTH CENTER
A SERVICE OF MORONGO BASIN HEALTHCARE DISTRICT

TAB #2
BUSINESS ACTION ITEM

QUARTERLY QUALITY REPORT

MORONGO BASIN
HEALTHCARE DISTRICT
6530 La Contenta Road #100 | Yucca Valley CA 92284 | 760-820-9229 | MorongoBasinHealth.org

TO: CINDY SCHMALL, CEO

FROM: TRICIA GEHRLEIN, CAO

DATE: August 06, 2026

SUBJECT: MBCHC BOARD OF DIRECTORS QUALITY REPORT, Q2 2026

2026 UDS Measures Q2

UDS (Uniform Data Submission) Quality Measures are set by HRSA (Health Resources and Services Administration) based on best practice. Each measure targets a specific subset of our patient population, and outcomes in these measures are one indicator of the quality of care received.

Of note:

1. UDS is presented as a whole; providers receive their individual scores
2. Q2 scores:
    a. Scores are similar to Q2 2026
    b. Q2 scores are specifically impacted by:
        i. UDS scores are rated based upon a *qualifying visit*. The patient must have been seen in a department that qualifies for having a reason to evaluate a measure.
        ii. Scores increase over the course of the year as patients are seen in primary care.

UDS Measures for Q2 are summarized as follows:

- 3 of the 16 measures were *equal to or higher* than target goals: HIV Screening, Tobacco Use Screening, and Statin Therapy
- 3 of the measures were within 10% of achieving target goals: BMI Screening and Follow up (Adult), IVD Aspirin Use, and Controlling High Blood Pressure
- 10 of the measures did not meet target goals: Dental Sealants for Children, Breast Cancer Screening, Childhood Immunizations, Weight Assessment and Counseling for Nutrition/Physical Activity for Children and Adolescents (BMI), Colorectal Cancer Screening, Diabetes A1c, and Screening for Depression and Follow up plan/Depression Remission at 12 months.
- Note: Initiation/Engagement SUD Treatment and Percentage Engaged in Ongoing SUD Treatment are new measures for 2026. These measures do not yet have a benchmark.

2026 Patient Satisfaction Q2

MBCHC contracts with Press-Ganey to conduct patient satisfaction surveys. Press-Ganey is a known leader in patient satisfaction surveys and works with MBCHC to interpret the responses into actionable data. For example, based on data, they have identified that the number one way to improve our key question (Likelihood you recommend MBCHC to others) is in service recovery. If a patient has scored MBCHC low on their ability to contact us for an appointment, a positive experience upon arrival and throughout the appointment can negate the low score.

For Q2, overall satisfaction held steady and is similar to Q1. Overall scoring places Medical at 90.39% (was 93.09) satisfaction and Dental at 93.20% (was 95.11%) satisfaction. Behavioral Health did not receive a high enough response to rate this past quarter. We are meeting with Press-Ganey to discuss adding the Behavioral Health providers individually, rather than as a department as a whole.

Patient Satisfaction tracking for 2026 now includes:

- Primary Care Providers overall
    - Individual scores are shared with providers
    - Adult Primary Care Providers = 91.46%
    - Pediatric Providers – 97.12%
    - Dentists = 93.20%
- Medical Assistants = 94.20%
- Dental Team (not Dentists) – 94.63%
- Front Desk – 92.08%

Our key indicators (specific question scores) are within an acceptable change range (5%) for each factor with one exception. Of note:

- One decrease in Dental – Likelihood to Recommend decreased from 97.09 to 92.11. (2025 = 90.25, so Q2 remains higher than 2025). After investigation, it may be due to new staff who are acclimating to our practice and are concentrating on providing good service and not yet able to perform their duties quickly (which does not leave them as much time for patient interactions during treatment). We will continue to monitor this closely over the next two quarters.

NOTE: **Patient comments** are reviewed every two weeks to identify trends or specific concerns. *No trends or specific concerns identified. When negative comments are received, an investigation occurs to the extent possible.*

MORONGO BASIN
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TAB #3
REPORTS

MONTHLY FINANCIAL REPORT

MORONGO BASIN HEALTHCARE DISTRICT

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

July 31, 2026

To: CHC Board of Directors

From: Deborah Anderson, CFO

Re: CFO's Report for June 2026

OVERVIEW

The clinic financials for the month of June shows losses of $(40,752) and year to date shows income of $541,160. (See Table 1 & 2)

In reviewing the tentative year end close for clinics, we also did much better than budgeted, with the variance between budget and actual landing at about $2.8 million. This significant variance is 100% due to higher revenues than originally budgeted. It includes: $1.3 million more in patient services income (due to higher visit counts of 38,306 visits vs 36,440 budgeted visits), $.8 million more in grants (due to items bought being recognized as capital assets that land on the Statement of Net Position), .10 million more in 340B revenue, and .60 million more in quality monies.

Finally, please note that June is held open longer due to it being the last month of the fiscal year. This is so that subsequent activity for patient receivables can be captured allowing for a better estimate at June 30th. As such, the numbers for June are not final – they are interim numbers only.

CLINIC CHANGE IN NET POSITION

Table 1 Clinics June 2026

Clinics	Actual Mth	Budget Mth	Over/(Under)	% of Budget
Patient services (net)	792,733	664,687	128,046	19.26%
Grant Revenue	156,181	127,742	28,439	22.26%
340B Revenue	40,849	29,879	10,970	36.71%
Capitation Fees	182,764	180,832	1,932	1.07%
Records & Interest	218	153	65	42.56%
Cost Report Adjustments	(137,361)	(137,360)	(0)	-0.00%
Quality & TRI/Prop 56, Misc	60,692	21,042	39,651	188.44%
	1,096,077	**886,974**	**209,103**	**23.57%**
Salaries - Clinic	503,405	511,976	8,570	1.67%
Fringe - Clinic	124,581	112,479	(12,102)	-10.76%
Phys Fees - Clinic	80,505	73,087	(7,418)	-10.15%
Puchases Services - Clinic	54,600	61,708	7,108	11.52%
IT, Network & Phones - Clinic	20,156	24,459	4,303	17.59%
Supplies - Clinic	36,601	33,020	(3,580)	-10.84%
Supplies - 340B	46,457	24,999	(21,458)	-85.84%
R&M - Clinic	(34,693)	6,507	41,200	633.19%

Table 1 (continued)

Clinics	Actual Mth	Budget Mth	Over/(Under)	% of Budget
Leases/Rentals - Clinic	47	142	95	66.77%
Utilities - Clinic	8,605	7,952	(652)	-8.20%
Ins - Clinic	287	302	14	4.77%
Other - Clinic	6,746	7,886	1,139	14.45%
Depreciation	17,431	18,792	1,360	7.24%
	864,728	**883,307**	**18,580**	**2.10%**
Operating Income/(Loss) before Allocation	231,349	3,667	227,683	6209.49%
Allocation of Overhead for Health Centers	(272,102)	(185,907)	(86,195)	-46.36%
Change in Net Position	**(40,752)**	**(182,240)**	141,488	77.64%

Table 2 Clinics Year to Date

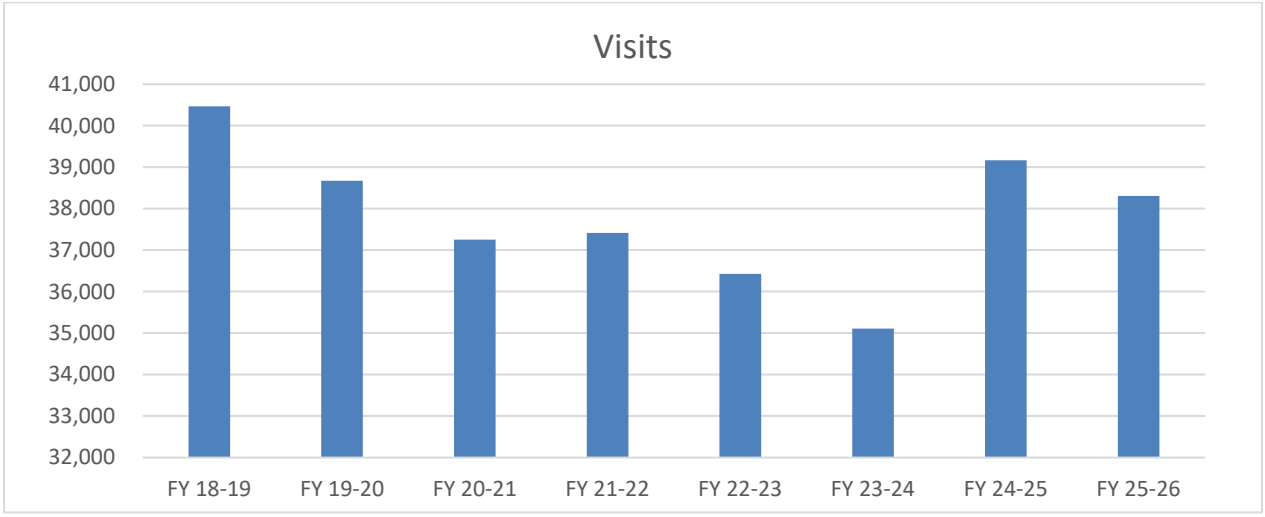
Clinics	Actual YTD	Budget YTD	Over/(Under)	% of Budget
Patient services (net)	8,927,466	7,643,897	**1,283,569**	16.79%
Grant Revenue	2,328,273	1,558,434	**769,839**	49.40%
340B Revenue	508,547	343,611	**164,936**	48.00%
Capitation Fees	2,203,944	2,169,982	33,962	1.57%
Records & Interest	2,675	1,761	914	51.92%
Cost Report Adjustments	(1,647,910)	(1,648,326)	416	0.03%
Quality & TRI/Prop 56, Misc	820,264	252,500	**567,764**	224.86%
	13,143,260	**10,321,859**	**2,821,401**	**27.33%**
Salaries - Clinic	5,757,602	6,073,891	316,289	5.21%
Fringe - Clinic	1,404,403	1,391,617	(12,786)	-0.92%
Phys Fees - Clinic	1,029,830	840,500	(189,330)	-22.53%
Puchases Services - Clinic	725,747	738,773	13,025	1.76%
IT, Network & Phones - Clinic	269,010	293,513	24,504	8.35%
Supplies - Clinic	482,308	379,735	**(102,573)**	-27.01%
Supplies - 340B	383,449	290,703	(92,746)	-31.90%
R&M - Clinic	85,421	76,952	**(8,469)**	-11.01%
Leases/Rentals - Clinic	1,354	1,700	346	20.38%
Utilities - Clinic	91,189	83,609	(7,580)	-9.07%
Ins - Clinic	3,448	3,620	172	4.75%
Other - Clinic	116,187	92,081	(24,106)	-26.18%
Depreciation	208,978	225,498	16,519	7.33%
	10,558,926	**10,492,191**	**(66,735)**	**-0.64%**
Operating Income/(Loss) before Allocation	2,584,334	(170,332)	2,754,666	1617.23%
Allocation of Overhead for Health Centers	(2,043,942)	(2,137,929)	93,987	4.40%
Operating Income/(Loss) after Allocation	540,392	(2,308,262)	2,848,654	123.41%
Non-Operating	768	-	768	-100.00%
	768	-	768	-100.00%
Change in Net Position	**541,160**	**(2,308,262)**	2,849,422	123.44%

Patient services – higher visit counts
Grants – amounts recognized on Statement of Net Position
Quality – cuts didn't take effect this fiscal year as anticipated
Physician fees – higher visit counts, so paid more physician time
Supplies – higher amounts in medical supplies
340B – drug costs going up due to 340B restrictions
Other – amounts spent not budgeted for doctor recruitment

Chart A – Visits History Chart

Month	FY 18-19	FY 19-20	FY 20-21	FY 21-22	FY 22-23	FY 23-24	FY 24-25	FY 25-26
Jul	2,942	3,283	3,091	2,877	2,670	2,758	3,030	3,467
Aug	3,766	3,587	3,015	3,425	3,315	3,195	2,975	3,099
Sep	3,043	3,501	3,065	3,134	3,256	2,593	3,041	3,346
Oct	3,551	3,892	3,264	3,282	3,071	3,027	3,697	3,296
Nov	3,229	3,353	2,627	3,116	2,936	2,928	2,952	2,595
Dec	2,858	3,304	2,976	2,705	2,881	2,556	3,027	3,000
Jan	3,698	4,010	2,921	2,925	3,001	3,226	3,316	3,210
Feb	3,198	3,763	3,190	3,068	2,882	2,980	3,303	2,903
Mar	3,515	2,927	3,516	3,332	3,331	3,032	3,338	3,415
Apr	3,660	2,066	3,460	3,094	2,896	3,016	3,648	3,430
May	3,662	2,200	3,043	3,239	3,247	3,143	3,564	3,241
Jun	3,344	2,786	3,082	3,218	2,939	2,652	3,275	3,304
Total	40,466	38,672	37,250	37,415	36,425	35,106	39,166	38,306
Total YTD	40,466	38,672	37,250	37,415	36,425	35,106	39,166	38,306

Chart B Visits FY Comparison



MORONGO BASIN
COMMUNITY HEALTH CENTER
A SERVICE OF MORONGO BASIN HEALTHCARE DISTRICT

TAB #4
REPORTS

CEO STAFF REPORT

MORONGO BASIN
HEALTHCARE DISTRICT
6530 La Contenta Road, Suite 100, Yucca Valley California 92284 | 760.820.9229

August 6, 2026

To: CHC Governing Board

From: Cindy Schmall, CEO

Re: CEO Board Report

HEALTH CENTER

- To date there has been no additional progress at Split Rock. We continue to be on hold for the approval of the fire alarm system and the removal of the limb from the Joshua Tree at the front of the property.
- I am pleased to report that we had some significant success this year with planning special immunization days for back-to-school kids. Alyssa Burton, PA and Tina Huff, FNP both offered up several days on their schedules to help facilitate the need for well child visits and immunizations. San Bernardino County has also stepped up and has provided on site immunizations to Medi-Cal eligible clients.
- The IEHP mobile mammogram program is headed our way again in September and we will be partnering with them to get patients access to screening mammogram services. Last year we only saw about 13 women but this year we have more notice and will be able to plan for more patients.
- We have hired a physician! Dr. Malekian will be starting in October and will supplement staff at 29 Palms and Yucca Valley. She will see both adult and pediatric patients.
- IEHP P4P Quality reimbursement for last year came in at approximately $648,000. This reimbursement is based on the clinic's compliance with IEHP mandated program for items that are part of our quality measures but also includes a component of how quickly we see patients and our follow-up on referrals etc. Congratulations to Tricia Gehrlein and the clinical team for all their hard work!
- HRSA has selected our team to participate in a special learning session regarding a new UDS measure on Substance Use Disorder. Tricia Gehrlein, Tina Huff, Angie Villaluz and Chantel Stanberry-Noel will be participating.

MORONGO BASIN
COMMUNITY HEALTH CENTER
A SERVICE OF MORONGO BASIN HEALTHCARE DISTRICT

TAB #5
CALENDARS

MORONGO BASIN HEALTHCARE DISTRICT

AUGUST 2026

SUN	MON	TUE	WED	THU	FRI	SAT
26	27	28	29	30	31	1
2	3	4	5	6 4:45p CHC board 6:15p District board	7 **11:30 LUNCH**	8
	NATIONAL COMMUNITY HEALTH CENTER WEEK!					
9	10	11	12 12:30-3:30p JT Resource Fair	13 12-1:30p Morongo Basin Community Coalition, @ ReachOut YV	14	15
16	17	18	19	20 10a East Desert Steering Comm 3-6p CMC Back-2-School event	21	22
23	24	25	26	27	28	29
30	31	1	2	3	4	5

July 2026

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

Notes:

Monthly Awareness Education (TBD)

- *B&G Club education*
- *29 Palms Rotary Club*
- *Desert Arc*
- *YV Chamber of Commerce*

September 2026

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

MORONGO BASIN HEALTHCARE DISTRICT

SEPTEMBER 2026

SUN	MON	TUE	WED	THU	FRI	SAT
30	31	1	2	3 **4:45 CHC board mtg** **6:15 District board mtg**	4	5
6	7 Labor Day	8	9 12:30-3:30 JT Comm Ctr Resource Fair	10 10:00-11:30a **29P Health Talk** 12p Morongo Basin Coalition	11	12
13	14 10:00-11:30a **JT Health Talk**	15	16 10:30-12:00a **YV Health Talk**	17	18	19
20	21	22	23	24	25	26
27	28	29	30	1	2	3

August 2026

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

Notes:

Monthly Awareness Education (TBD)

- *B&G Club education: Staying Healthy (childhood obesity)*
- *29 Palms Rotary Club*
- *Desert Arc*
- *YV Chamber of Commerce*

Health Talks

- Sep 10: 29P Senior Ctr 10:00-11:30a
- Sep 14: JT Senior Ctr 10:00-11:30a
- Sep 16: YV Senior Ctr 10:30-noon

October 2026

S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

DISTRICT HEALTH FAIR @ 29Palms
9a-1p Farmer's Market