



July 21, 2023

NOTICE

The Board of Directors of the Kaweah Delta Health Care District will meet in the City of Visalia City Council Chambers {707 W. Acequia, Visalia, CA} on Wednesday June 28, 2023: 3:30PM Open Meeting; 3:31PM Closed meeting pursuant to Government Code 54956.9(d)(1), 54956.9(d)(2), Health and Safety Code 1461 and 32155; 4:00PM Open Meeting.

All Kaweah Delta Health Care District regular board meeting and committee meeting notices and agendas are posted 72 hours prior to meetings (special meetings are posted 24 hours prior to meetings) in the Kaweah Health Medical Center, Mineral King Wing near the Mineral King entrance.

The disclosable public records related to agendas can be obtained by contacting the Board Clerk at Kaweah Health Medical Center – Acequia Wing, Executive Offices (Administration Department/Executive Offices) {1st floor}, 400 West Mineral King Avenue, Visalia, CA via phone 559-624-2330 or email: cmoccio@kaweahhealth.org, or on the Kaweah Delta Health Care District web page <http://www.kaweahhealth.org>.

KAWEAH DELTA HEALTH CARE DISTRICT
Mike Olmos, Secretary/Treasurer

A handwritten signature in black ink that reads "Cindy Moccio". The signature is written in a cursive, flowing style.

Cindy Moccio
Board Clerk / Executive Assistant to CEO

DISTRIBUTION:
Governing Board
Legal Counsel
Executive Team
Chief of Staff
www.kaweahhealth.org

KAWEAH DELTA HEALTH CARE DISTRICT BOARD OF DIRECTORS MEETING

City of Visalia – City Council Chambers
707 W. Acequia, Visalia, CA

Wednesday July 26, 2023

OPEN MEETING AGENDA {3:30PM}

- 1. CALL TO ORDER**
- 2. APPROVAL OF AGENDA**
- 3. PUBLIC PARTICIPATION** – Members of the public may comment on agenda items before action is taken and after it is discussed by the Board. Each speaker will be allowed five minutes. Members of the public wishing to address the Board concerning items not on the agenda and within the jurisdictions of the Board are requested to identify themselves at this time. For those who are unable to attend the beginning of the Board meeting during the public participation segment but would like to address the Board, please contact the Board Clerk (Cindy Moccio 559-624-2330) or cmoccio@kaweahhealth.org to make arrangements to address the Board.
- 4. APPROVAL OF THE CLOSED AGENDA – 3:31PM**
 - 4.1. Conference with Legal Counsel** – Existing Litigation – Pursuant to Government Code 54956.9(d)(1) – *Rachele Berglund, Legal Counsel and Evelyn McEntire, Director of Risk Management*
 - A. Rice vs Kaweah Delta Health Care District, Kaweah Delta District Hospital, Tu-Hi Hong, M.D.-Case # VCU295620
 - B. Newport vs Kaweah Delta Health Care District, Kaweah Delta District Hospital - Case # VCU295708
 - C. L.Vasquez vs Westgate Gardens Care Center, Inc, a California corporation, Kaweah Delta Care District, Kaweah Health Medical Center - Case # VCU294513
 - D. Benton vs Kaweah Delta Health Care District dba Kaweah Health Medical Center - Case # VCU295014
 - E. M.Vasquez vs Kaweah Health Medical Center; Eva Hirwe, M.D., Shamika Banks M.D. - Case # VCU297964
 - F. Williams vs Kaweah Health Medical Center; Jun Kim, D.O.- Case # VCU298276
 - G. Olivares vs Kaweah Delta Health Care, Inc., dba Kaweah Delta Healthcare District, and dba Kaweah Health Medical Center, Jessi Hill, M.D., Curt Lee Decker, C.R.T, Cynthia Rodriguez-Mendez, Alfredo Guerrero, D.O. - Case # VCU298480
 - H. Vanni vs Kaweah Health Medical Center; Kaweah Delta Health Care District; Cara Weese-Cooper, R.N.; Talaksoon Khademi, D.O.; G. Blaine Lake, M.D.- Case # VCU299235

Wednesday, July 26, 2023

Page 1 of 5

*Mike Olmos – Zone 1
Secretary/Treasurer*

*Lynn Havard Mirviss – Zone 2I
Vice President*

*Garth Gipson – Zone 3
Board Member*

*David Francis – Zone 4
President*

*Ambar Rodriguez – Zone 5
Board Member*

- 4.2. **Conference with Legal Counsel – Anticipated Litigation** – Significant exposure to litigation pursuant to Government Code 54956.9(d)(2) – 2 Cases - *Rachele Berglund, Legal Counsel and Evelyn McEntire, Director of Risk Management*
- 4.3. **Quality Assurance** pursuant to Health and Safety Code 32155 and 1461, report of quality assurance committee —*Evelyn McEntire, Director of Risk Management*
- 4.4. **Conference with Legal Counsel – Anticipated Litigation** – Significant exposure to litigation pursuant to Government Code 54956.9(d)(2) – 1 Case – *Rachele Berglund, Legal Counsel*
- 4.5. **Credentialing** - Medical Executive Committee (MEC) requests that the appointment, reappointment and other credentialing activity regarding clinical privileges and staff membership recommended by the respective department chiefs, the credentials committee and the MEC be reviewed for approval pursuant to Health and Safety Code 1461 and 32155 – *Daniel Hightower, MD, Chief of Staff*
- 4.6. **Quality Assurance** pursuant to Health and Safety Code 32155 and 1461, report of quality assurance committee – *Daniel Hightower, MD, Chief of Staff*
- 4.7. **Approval of the closed meeting minutes** – June 28, 2023.

Public Participation – Members of the public may comment on agenda items before action is taken and after the item has been discussed by the Board.

Action Requested – Approval of the July 26, 2023 closed meeting agenda.

5. ADJOURN

CLOSED MEETING AGENDA {3:31PM}

1. **CALL TO ORDER**
2. **CONFERENCE WITH LEGAL COUNSEL – EXISTING LITIGATION** – Pursuant to Government Code 54956.9(d)(1)
Rachele Berglund, Legal Counsel and Evelyn McEntire, Director of Risk Management
 - A. Rice vs Kaweah Delta Health Care District, Kaweah Delta District Hospital, Tu-Hi Hong, M.D.-Case # VCU295620
 - B. Newport vs Kaweah Delta Health Care District, Kaweah Delta District Hospital - Case # VCU295708
 - C. L.Vasquez vs Westgate Gardens Care Center, Inc, a California corporation, Kaweah Delta Care District, Kaweah Health Medical Center - Case # VCU294513
 - D. Benton vs Kaweah Delta Health Care District dba Kaweah Health Medical Center - Case # VCU295014
 - E. M.Vasquez vs Kaweah Health Medical Center; Eva Hirwe, M.D., Shamika Banks M.D. - Case # VCU297964
 - F. Williams vs Kaweah Health Medical Center; Jun Kim, D.O.- Case # VCU298276

Wednesday, June 28, 2023

Page 2 of 5

*Lynn Havard Mirviss
– Zone II V*

*Mike Olmos – Zone I
Secretary/Treasurer*

*Garth Gipson – Zone III
Board Member*

*David Francis – Zone IV
President*

*Ambar Rodriguez – Zone V
Board Member*

- G. Olivares vs Kaweah Delta Health Care, Inc., dba Kaweah Delta Healthcare District, and dba Kaweah Health Medical Center, Jessi Hill, M.D., Curt Lee Decker, C.R.T, Cynthia Rodriguez-Mendez, Alfredo Guerrero, D.O. - Case # VCU298480
- H. Vanni vs Kaweah Health Medical Center; Kaweah Delta Health Care District; Cara Weese-Cooper, R.N.; Talaksoon Khademi, D.O.; G. Blaine Lake, M.D.- Case # VCU299235

- 3. **CONFERENCE WITH LEGAL COUNSEL – ANTICIPATED LITIGATION** – Significant exposure to litigation pursuant to Government Code 54956.9(d)(2) – 2 Cases.

Rachele Berglund, Legal Counsel and Evelyn McEntire, Director of Risk Management

- 4. **QUALITY ASSURANCE** pursuant to Health and Safety Code 32155 and 1461, report of quality assurance committee.

Evelyn McEntire, Director of Risk Management

- 5. **CONFERENCE WITH LEGAL COUNSEL – ANTICIPATED LITIGATION** – Significant exposure to litigation pursuant to Government Code 54956.9(d)(2) – 1 Case.

Rachele Berglund, Legal Counsel

- 6. **CREDENTIALING** - Medical Executive Committee (MEC) requests that the appointment, reappointment and other credentialing activity regarding clinical privileges and staff membership recommended by the respective department chiefs, the credentials committee and the MEC be reviewed for approval pursuant to Health and Safety Code 1461 and 32155.

Daniel Hightower, MD, Chief of Staff

- 7. **QUALITY ASSURANCE** pursuant to Health and Safety Code 32155 and 1461, report of quality assurance committee.

Daniel Hightower, MD, Chief of Staff

- 8. **APPROVAL OF THE CLOSED MEETING MINUTES – June 28, 2023.**

Public Participation – Members of the public may comment on agenda items before action is taken and after the item has been discussed by the Board.

Action Requested – Approval of the closed meeting minutes – June 28, 2023.

- 9. **ADJOURN**

OPEN MEETING AGENDA {4:00PM}

- 1. **CALL TO ORDER**
- 2. **APPROVAL OF AGENDA**
- 3. **PUBLIC PARTICIPATION** – Members of the public may comment on agenda items before action is taken and after it is discussed by the Board. Each speaker will be allowed five minutes. Members of the public wishing to address the Board concerning items not on the

agenda and within the jurisdictions of the Board are requested to identify themselves at this time. For those who are unable to attend the beginning of the Board meeting during the public participation segment but would like to address the Board, please contact the Board Clerk (Cindy Moccio 559-624-2330) or cmoccio@kaweahhealth.org to make arrangements to address the Board.

4. **CLOSED SESSION ACTION TAKEN** – Report on action(s) taken in closed session.

5. **OPEN MINUTES** – Request approval of the [June 28th open minutes](#).

Public Participation – Members of the public may comment on agenda items before action is taken and after the item has been discussed by the Board.

Action Requested – Approval of the open meeting minutes June 28th open board of directors meeting minutes.

6. **RECOGNITIONS** – Director

6.1. Presentation of [Resolution 2199](#) to [Martie Duyst](#), in recognition as the Kaweah Health World Class Employee of the month – July 2023.

7. **CREDENTIALS** - Medical Executive Committee requests that the appointment, reappointment and other credentialing activity regarding clinical privileges and staff membership recommended by the respective department chiefs, the credentials committee and the Medical Executive Committee be reviewed for approval.

Daniel Hightower, MD, Chief of Staff

8. **CHIEF OF STAFF REPORT** – Report relative to current Medical Staff events and issues.

Daniel Hightower, MD, Chief of Staff

9. **CONSENT CALENDAR** - All matters under the Consent Calendar will be approved by one motion, unless a Board member requests separate action on a specific item.

Public Participation – Members of the public may comment on agenda items before action is taken and after the item has been discussed by the Board.

Action Requested – Approval of the July 26th Consent Calendar.

9.1. REPORTS

- A. [Physician Recruitment](#)
- B. [Strategic Plan](#)
- C. [Throughput](#)
- D. [Risk Management](#)

9.2. [Approval of rejection of claims](#);

- A. Deanne Potts vs. Kaweah Delta Health Care District.
- B. Marty Potts vs. Kaweah Delta Health Care District.

9.3. Approval of rejection of claim Carolyn Zamudio vs. Kaweah Delta Health Care District.

9.4. [Approval of Resolution #2200](#) - a Resolution of the Board of Directors, Kaweah Delta Health Care District, directing Tulare County, California, to levy a tax to pay the principal of an interest on general obligation bonds for the fiscal year beginning July 1, 2023 and ending June 30, 2024.

10. [QUALITY – EMERGENCY MEDICINE](#) – A review of key measures and action associated with emergency medicine.

Dr. Khoa Tu, Department Chair and Medical Director

10. [FINANCIALS](#) – Review of the most current fiscal year financial results.

Malinda Tupper – Chief Financial Officer Chief Financial Officer

11. REPORTS

11.1. [Chief Executive Officer Report](#) - Report relative to current events and issues.

Jag Batth, Chief Operating Officer

11.2. [Board President](#) - Report relative to current events and issues.

David Francis, Board President

12. ADJOURN

In compliance with the Americans with Disabilities Act, if you need special assistance to participate at this meeting, please contact the Board Clerk (559) 624-2330. Notification 48 hours prior to the meeting will enable the District to make reasonable arrangements to ensure accessibility to the Kaweah Delta Health Care District Board of Directors meeting.

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KAWEAH DELTA HEALTH CARE DISTRICT

BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KAWEAH DELTA HEALTH CARE DISTRICT

BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KAWEAH DELTA HEALTH CARE DISTRICT

BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KAWEAH DELTA HEALTH CARE DISTRICT

BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KAWEAH DELTA HEALTH CARE DISTRICT

BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KAWEAH DELTA HEALTH CARE DISTRICT

BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KAWEAH DELTA HEALTH CARE DISTRICT

BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KAWEAH DELTA HEALTH CARE DISTRICT

BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KAWEAH DELTA HEALTH CARE DISTRICT

BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KAWEAH DELTA HEALTH CARE DISTRICT

BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KAWEAH DELTA HEALTH CARE DISTRICT

BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KAWEAH DELTA HEALTH CARE DISTRICT

BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KAWEAH DELTA HEALTH CARE DISTRICT

BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KAWEAH DELTA HEALTH CARE DISTRICT

BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KAWEAH DELTA HEALTH CARE DISTRICT

BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KAWEAH DELTA HEALTH CARE DISTRICT

BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

BOARD OF DIRECTORS MEETING – CLOSED SESSION

KDHCD - BOARD OF DIRECTORS MEETING

WEDNESDAY JULY 26, 2023

CLOSED MEETING SUPPORTING DOCUMENTS

PAGES 7-54

MINUTES OF THE OPEN MEETING OF THE KAWEAH DELTA HEALTH CARE DISTRICT BOARD OF DIRECTORS HELD WEDNESDAY JUNE 28, 2023 AT 3:30PM, IN THE CITY OF VISALIA CITY COUNCIL CHAMBERS – 707 W. ACEQUIA, VISALIA, CA.

PRESENT: Directors Francis, Havard Mirviss, Rodriguez & Olmos; G. Herbst, CEO; M. Manga, MD, Chief of Staff, K. Noeske, CNO; M. Tupper, CFO; M. Mertz, Chief Strategy Officer; D. Leeper, Chief Information and Cybersecurity Office; R. Gates, Chief Population Health Officer; J. Batth, Chief Operating Officer; B. Cripps, Chief Compliance Officer D. Cox, Chief Human Resources Officer, W. Brien, MD CMO/CQO; R. Berglund, Legal Counsel; E. McEntire, Director of Risk Management; R. Salinas, Legal Counsel; and C. Moccio recording

The meeting was called to order at 3:30PM by Director Francis.

Director Francis entertained a motion to approve the agenda.

MMSC (Havard Mirviss/Olmos) to approve the open agenda. This was supported unanimously by those present. Vote: Yes – Olmos, Havard Mirviss, and Francis Absent – Gipson, Rodriguez

PUBLIC PARTICIPATION – None

APPROVAL OF THE CLOSED AGENDA – 3:31PM

- **Conference with Legal Counsel – Anticipated Litigation** – Significant exposure to litigation pursuant to Government Code 54956.9(d)(2) – 2 Cases – *Rachele Berglund, Legal Counsel*
- **Conference with Legal Counsel** – Existing Litigation {Shipman v. KDHCD Case #VCU287291 – Pursuant to Government Code 54956.9(d)(1) – *Richard Salinas, Legal Counsel*
- **Conference with Legal Counsel – Anticipated Litigation** – Significant exposure to litigation pursuant to Government Code 54956.9(d)(2) – 2 Cases - *Rachele Berglund, Legal Counsel and Evelyn McEntire, Director of Risk Management*
- **Conference with Legal Counsel – Anticipated Litigation** – Significant exposure to litigation pursuant to Government Code 54956.9(d)(2) – 1 Case – *Rachele Berglund, Legal Counsel*
- **Credentialing** - Medical Executive Committee (MEC) requests that the appointment, reappointment and other credentialing activity regarding clinical privileges and staff membership recommended by the respective department chiefs, the credentials committee and the MEC be reviewed for approval pursuant to Health and Safety Code 1461 and 32155 – *Monica Manga, MD, Chief of Staff*
- **Quality Assurance** pursuant to Health and Safety Code 32155 and 1461, report of quality assurance committee – *Monica Manga, MD, Chief of Staff*
- **Report involving trade secrets {Health and Safety Code 32106}** – Discussion will concern a proposed new services/programs – estimated date of disclosure is December 2023 – *Ryan Gates, Chief Population Health Officer, Marc Mertz, Chief Strategy Officer, and Gary Herbst, Chief Executive Officer*
- **Approval of the closed meeting minutes** – May 24, 2023.

Public Participation – Members of the public may comment on agenda items before action is taken and after the item has been discussed by the Board – No public present.

MMSC (Olmos/Francis) to approve the June 28, 2023 closed agenda. This was supported unanimously by those present. Vote: Yes – Olmos, Havard Mirviss, Rodriguez, and Francis Absent - Gipson

ADJOURN - Meeting was adjourned at 3:31PM

David Francis, President
Kaweah Delta Health Care District and the Board of Directors

ATTEST:

Mike Olmos, Secretary/Treasurer
Kaweah Delta Health Care District Board of Directors

MINUTES OF THE OPEN MEETING OF THE KAWEAH DELTA HEALTH CARE DISTRICT BOARD OF DIRECTORS HELD WEDNESDAY JUNE 28, 2023 AT 4:30PM, IN THE CITY OF VISALIA CITY COUNCIL CHAMBERS – 707 W. ACEQUIA, VISALIA, CA.

PRESENT: Directors Francis, Havard Mirviss, Rodriguez & Olmos; G. Herbst, CEO; M. Manga, MD, Chief of Staff, K. Noeske, CNO; M. Tupper, CFO; M. Mertz, Chief Strategy Officer; D. Leeper, Chief Information and Cybersecurity Office; R. Gates, Chief Population Health Officer; J. Batth, Chief Operating Officer; B. Cripps, Chief Compliance Officer D. Cox, Chief Human Resources Officer, W. Brien, MD CMO/CQO; R. Berglund, Legal Counsel; E. McEntire, Director of Risk Management; R. Salinas, Legal Counsel; and C. Moccio recording

The meeting was called to order at 4:37PM by Director Francis.

Director Francis asked for approval of the agenda.

MMSC (Olmos/Rodriguez) to approve the open agenda. This was supported unanimously by those present. Vote: Yes – Olmos, Havard Mirviss, Rodriguez, and Francis Absent - Gipson

PUBLIC PARTICIPATION – No comments.

CLOSED SESSION ACTION TAKEN: Approval the closed minutes from May 24, 2023.

OPEN MINUTES – Request approval of the open meeting minutes from May 16, May 24, and June 14 2023.

Public Participation – Members of the public may comment on agenda items before action is taken and after the item has been discussed by the Board.

MMSC (Lynn/Rodriguez) to approve the open minutes from May 16, May 24, and June 14, 2023. This was supported unanimously by those present. Vote: Yes – Olmos, Havard Mirviss, Rodriguez, and Francis Absent - Gipson Abstain - Rodriguez Ambar {June 14th minutes}

RECOGNITIONS

Presentation of Resolution 2194 to Yvette Lopez, Laboratory Scientist, in recognition as the Kaweah Health World Class Employee of the month – June 2023.

Presentation of Resolution 2195 to Robbin Franich in recognition of her retirement from Kaweah Health with 39 years of service.

Presentation of Resolution 2196 to Janie Lopez in recognition of her retirement from Kaweah Health with 37 years of service.

Presentation of Resolution 2197 to Monica Manga, MD in recognition of her service as the Kaweah Health Medical Staff Chief of Staff 2021-2023.

INTRODUCTION – New Directors - Mara Lawson, Interim Director of Clinical Education.

CREDENTIALING – Medical Executive Committee requests that the appointment, reappointment and other credentialing activity regarding clinical privileges and staff membership recommended by the respective department chiefs, the credentials committee and the Medical Executive Committee be reviewed for approval.

Public Participation – Members of the public may comment on agenda items before action is taken and after the item has been discussed by the Board.

Director Francis requested a motion for the approval of the credentials report.

MMSC (Havard Mirviss/Rodriguez) Whereas a thorough review of all required information and supporting documentation necessary for the consideration of initial applications, reappointments, request for additional privileges, advance from provisional status and release from proctoring and resignations (pursuant to the Medical Staff bylaws) has been completed by the Directors of the clinical services, the Credentials Committee, and the Executive Committee of the Medical Staff, for all of the medical staff scheduled for reappointment, Whereas the basis for the recommendations now before the Board of Trustees regarding initial applications, reappointments, request for additional privileges, advance from provisional status and release from proctoring and resignations has been predicated upon the required reviews, including all supporting documentation, Be it therefore resolved that the following medical staff, excluding Emergency Medicine Providers as highlighted on Exhibit A (copy attached to the original of these minutes and considered a part thereof), be approved or reappointed (as applicable), to the organized medical staff of Kaweah Delta Health Care District for a two year period unless otherwise specified, with physician-specific privileges granted as recommended by the Chief of Service, the Credentials Committee, and the Executive Committee of the Medical Staff and as will be documented on each medical staff member's letter of initial application approval and reappointment from the Board of Trustees and within their individual credentials files . This was supported unanimously by those present. Vote: Yes – Olmos, Havard Mirviss, Rodriguez, and Francis Absent - Gipson

CHIEF OF STAFF REPORT – Report relative to current Medical Staff events and issues – *Monica Manga, MD, Chief of Staff*

- New elected department chairs (copy attached).
- MEC has approved the Medical Staff restructure plan and the next step is implementation.

CONSENT CALENDAR – Director Francis entertained a motion to approve the June 28, 2023 consent calendar with the removal of item 9.2 {Approval of rejection of claim Mayra Diaz vs. Kaweah Health}.

Public Participation – Members of the public may comment on agenda items before action is taken and after the item has been discussed by the Board.

MMSC (Olmos/Havard Mirviss) to approve the June 28, 2023 consent calendar with the removal of item 9.2 {Approval of rejection of claim Mayra Diaz vs. Kaweah Health}. This was supported unanimously by present. Vote: Yes – Olmos, Havard Mirviss, Rodriguez, and Francis Absent - Gipson

QUALITY REPORT – ANNUAL INFECTION PREVENTION - A review of key quality measures and improvement actions associated with care of the maternal child health population (copy attached to the original of these minutes and considered a part thereof) - *Shawn Elkin, MPA, BSN, RN, PHN, CIC, Kaweah Health Infection Prevention Manager*

STRATEGIC PLAN - STRATEGIC GROWTH AND INNOVATION – Review and requested approved of the Strategic Plan for fiscal year 2023/2024. (copy attached to the original of these minutes and considered a part thereof) - *Marc Mertz, Chief Strategy Officer*

- Marc noted in 2025 we will be developing a new plan and will be launching the process very soon to begin the development of the Strategic Plan for 2025.

MMSC (Havard Mirviss/Rodriguez) Approval of the Strategic Plan for fiscal year 2023/2024. This was supported unanimously by present. Vote: Yes – Olmos, Havard Mirviss, Rodriguez, and Francis Absent - Gipson

BEHAVIORAL HEALTH CONTINUUM INFRASTRUCTURE PROGRAM (BHCIP) GRANT FOR

BEHAVIORAL HEALTH – Request the approval of Resolution 2198, a resolution of the Board of Directors of Kaweah Delta Health Care District dba Kaweah Health, authorizing application to and participation in the BHCIP (copy attached to the original of these minutes and considered a part thereof) - *Marc Mertz, Chief Strategy Officer & Acting Chief Executive Officer*

Public Participation – Members of the public may comment on agenda items before action is taken and after the item has been discussed by the Board.

MMSC (Olmos/Rodriguez) Approval of Resolution 2198, a resolution of the Board of Directors of Kaweah Delta Health Care District dba Kaweah Health, authorizing application to and participation in the BHCIP and to authorize the officers and agents of Kaweah Delta Health Care District dba Kaweah Health to approve and execute any and all documents necessary to submit the Behavioral Health Continuum Infrastructure Program (BHCIP) grant application. This was supported unanimously by present. Vote: Yes – Olmos, Havard Mirviss, Rodriguez, and Francis Absent - Gipson

PATIENT THROUGHPUT PERFORMANCE - Review of patient throughput performance improvement progress report (copy attached to the original of these minutes and considered a part thereof) – *Jag Batth, Chief Operating Officer*

- Jag proposed to have the reporting schedule change from monthly to quarterly. Gary proposed that monthly is the report should be submitted on the consent calendar and quarterly be on the open agenda. The Board approved the change in the reporting structure: Written reports monthly, verbal report quarterly.

2023/2024 ANNUAL OPERATING AND CAPITAL BUDGET – Review of the annual operating and capital budget (copy attached to the original of these minutes and considered a part thereof) – *Malinda Tupper – Chief Financial Officer*

Public Participation – Members of the public may comment on agenda items before action is taken and after the item has been discussed by the Board.

MMSC (Olmos/Havard Mirviss) Approval of the 2023/2024 Annual Operating and Capital Budget. This was supported unanimously by present. Vote: Yes – Olmos, Havard Mirviss, Rodriguez, and Francis Absent - Gipson

REPORTS

Chief Executive Officer Report - Report relative to current events and issues – *Gary Herbst, CEO*

- Keri Noeske joined Jim Costa at a town hall meeting relative to a Bill that is focused on the nursing profession and how we respond to the nursing shortage.
- Distressed hospital loan program became a reality and signed by the Governor providing \$150K year. During the State budget process they added another \$150K so for this next budget year this fund will have \$300K. We are working on our application requesting \$70K

loan. If we receive these funds from the State, Kaweah is going to classify it as working capital used to fund the first few months of the fiscal year. There is a provision that allows the loan to be forgiven, we will have to wait and see if they will be forgiving the loans.

- Work Day transition started on Saturday June 25th with the focus on timekeeping, payroll, we believe that the implementation is going well. Next week we go live in Finance, materials management, human resources. Friday there will be a celebration lunch for the staff involved in the implementation.

Board President - Report relative to current events and issues - *David Francis, Board President*

- No Report.

APPROVAL OF CLOSED AGENDA AS FOLLOWS: Closed Meeting Agenda – Immediately following the 4:30PM open session.

- **CEO Evaluation** – Discussion with the Board and the Chief Executive Officer relative to the evaluation of the Chief Executive Officer pursuant to Government Code 54957(b)(1) – *Gary Herbst, CEO, Rachele Berglund, Legal Counsel & Board of Directors*

MMSC (Rodriguez/Havard Mirviss) Approval of the closed agenda immediately following the 4:30PM open session {CEO Evaluation}. This was supported unanimously by present. Vote: Yes – Olmos, Havard Mirviss, Rodriguez, and Francis Absent – Gipson

ADJOURN - Meeting was adjourned at 6:53PM.

Open meeting called back to order 7:27PM

CONSENT CALENDAR – Director Francis entertained a motion to approve item 9.2 {Approval of rejection of claim Mayra Diaz vs. Kaweah Health} on the June 28, 2023 consent calendar.

Public Participation – Members of the public may comment on agenda items before action is taken and after the item has been discussed by the Board.

MMSC (Havard Mirviss/Rodriguez) to approve item 9.2 {Approval of rejection of claim Mayra Diaz vs. Kaweah Health} from the June 28, 2023 consent calendar. This was supported unanimously by present. Vote: Yes – Olmos, Havard Mirviss, Rodriguez, and Francis Absent - Gipson

ADJOURN - Meeting was adjourned at 7:27PM.

David Francis, President
Kaweah Delta Health Care District and the Board of Directors

ATTEST:

Mike Olmos, Secretary/Treasurer
Kaweah Delta Health Care District Board of Directors



RESOLUTION 2199

WHEREAS, the Department Heads of the KAWEAH DELTA HEALTH CARE DISTRICT dba KAWEAH HEALTH are recognizing Martie Duyst, with the World Class Service Excellence Award for the Month of July 2023, for consistent outstanding performance, and,

WHEREAS, the Board of Directors of the KAWEAH DELTA HEALTH CARE DISTRICT is aware of her excellence in caring and service,

NOW, THEREFORE, BE IT RESOLVED that the Board of Directors of the KAWEAH DELTA HEALTH CARE DISTRICT on behalf of themselves, the hospital staff, and the community they represent, hereby extend their congratulations to Yvette for this honor and in recognition thereof, have caused this resolution to be spread upon the minutes of the meeting.

PASSED AND APPROVED this 26th day of July 2023 by a unanimous vote of those present.

President, Kaweah Delta Health Care District

ATTEST:

Secretary/Treasurer, Kaweah Delta Health Care District
and of the Board of Directors, thereof

Martie Duyst, just been recognized by, Robbin Franich

Comments: Martie goes above and beyond her job duties here at mental health case management. She has worked alone when staff has called in sick and is very flexible with her own schedule. She presents herself in a very professional manner. She is kind, honest and considerate. She is a true team player, always offering her assistance with anything that she can help with. She always arrives on time and is ready to take on any tasks that are given to her. She is extremely knowledgeable of her job as a Case Management UR Specialist as well as the mental health specialty. She has mastered "kepro " reviews that are new to case management here at mental health and has completed 19 reviews in 1 day which is amazing. She has a high work ethic and standard. She is always looking for ways to improve and decrease costs here at mental health and for the CM department. Martie has been my co-worker for over 20 years. I can always depend on her. She has been a joy to work with and I consider myself so blessed to have had the opportunity to work with her. We have never had a disagreement in over 20 + years. She deserves to be recognized and praised. I am getting ready to retire and I will miss her dearly. I highly recommend her for the employee of the month.

Physician Recruitment and Relations
Medical Staff Recruitment Report - July 2023

Prepared by: JC Palermo, Director Physician Recruitment - jpalermo@kaweahhealth.org - (559) 624-5456
 Date prepared: 7/19/2023

Central Valley Critical Care Medicine	
Intensivist	1
Step-Down Hospitalist	2

Delta Doctors Inc.	
Family Medicine	2
OB/GYN	1
Adult Psychiatry	1

Key Medical Associates	
Dermatology	1
Endocrinology	1
Family Medicine/Internal Medicine	4
Gastroenterology	1
Pediatrics	1
Pulmonology	1
Rheumatology	1
APP - Primary Care	3

Sequoia Oncology Medical Associates Inc.	
Hematology/Oncology	1

Orthopaedic Associates Medical Clinic, Inc.	
Orthopedic Surgery (General)	1
Orthopedic Surgery (Hand)	1
Orthopedic Surgery (Trauma)	1

Stanford Health Care	
Cardiothoracic Surgery	2

Sequoia Cardiology Medical Group	
EP Cardiology	1

Oak Creek Anesthesia	
Anesthesia - General/Medical Director	1
Anesthesia - Obstetrics	1
Anesthesia - Regional Pain	1

USC Urology	
Urology	3

Valley Hospitalist Medical Group	
GI Hospitalist	1

Other Recruitment/Group TBD	
Dermatology	2
Family Medicine	3
Gastroenterology	2
Hospice & Palliative Medicine	1
Neurology - Outpatient	1
Otolaryngology	2
Pediatrics	1
Pulmonology - Outpatient	1
Interventional Cardiology	2
General Cardiologist	2

Valley ENT	
Audiology	1
Otolaryngology	1

Valley Children's Health Care	
Maternal Fetal Medicine	2
Neonatology	1
Pediatric Cardiology	1
Pediatric Hospitalist	1

#	Specialty	Group	Date Added	Current Status	
1	Surgery	TBD	7/19/2023	2019 TY Grad - Outreach	
2	Pediatrics	TBD	7/19/2023	2019 TY Grad - Outreach	
3	Internal Medicine	TBD	7/19/2023	2022 TY Grad - Outreach	
4	Dermatology	TBD	7/19/2023	2022 TY Grad - Outreach	
5	Intensivist	Central Valley Critical Care Medicine	7/17/2023	Currently under review	
6	Hospitalist	Central Valley Critical Care Medicine	7/17/2023	Currently under review	
7	Hospitalist	Central Valley Critical Care Medicine	7/17/2023	Currently under review	
8	Cardiac Anesthesia	Oak Creek	7/11/2023	Currently under review	
9	CRNA	Oak Creek	7/11/2023	Currently under review	
10	Family Medicine	TBD	7/11/2023	Currently under review	
11	Family Medicine	TBD	7/11/2023	Currently under review	
12	Interventional Cardiology	Sequoia Cardiology	7/10/2023	Currently under review	
13	Cardiothoracic Surgery	Stanford	6/23/2023	Site Visit: 7/28/22	
14	Gastroenterology	TBD	6/21/2023	Currently under review	
15	Adult Psychiatry	Key Medical	6/21/2023	Currently under review	
16	Family Medicine	TBD	6/21/2023	Currently under review	
17	Family Medicine	TBD	6/21/2023	Currently under review	
18	Pediatric Hospitalist/Med	Valley Children's/Valley	5/24/2023	Currently under review	
19	Cardiothoracic Surgery	Stanford	5/22/2023	Site Visit: 8/7/23	
20	Endocrinology	Delta Doctors	5/15/2023	Pending phone call - Dr. Raj	
21	Pediatric Hospitalist	Valley Children's	5/12/2023	Site Visit: 5/18/23	
22	Cardiothoracic Surgery	Stanford	4/5/2023	Site Visit: 6/23/23	
23	Medical Oncology	Sequoia Oncology Medical Associates	9/27/2022	Site Visit: 10/21/22. Offer pending	
24	Orthopedic Trauma	Orthopaedic Associates Medical	8/18/2022	Currently under review	

#	Specialty	Group	Offer Sent	
1	Cardiothoracic Surgery	Stanford	3/23/2023	
2	Hospitalist	Valley Hospital	6/1/2023	
3	Hospice & Palliative Medicine	Independent	6/23/2023	
4	Internal Medicine	Delta Doctors	7/5/2023	
5	Family Medicine Faculty	Kaweah Health	7/6/2023	

#	Specialty	Group	Date Candidate Signed	Expected Start Date
1	Neonatology	Valley Children's	9/10/2022	Summer 2023
2	Neonatology	Valley Children's	12/1/2022	Summer 2023
3	Anesthesia - General	Oak Creek Anesthesia	2/1/2023	Summer 2023
6	Orthopedic Trauma	Orthopaedic Associates Medical Clinic	4/26/2023	Summer 2024
7	Psychiatry	Precision Psychiatry	6/6/2023	Summer 2023
4	Hospitalist	Valley Hospitalist	3/15/202	Summer 2023
5	CRNA	Oak Creek Anesthesia	Pending	Summer 2023
9	Anesthesia - General	Oak Creek Anesthesia	Pending	Summer 2023
8	Neurology	Kaweah Health Neurology Group		Summer 2023



FY 2023 Strategic Plan

FY23 Year-End Report
July 26, 2023



kawahhealth.org

Kaweah Health Strategic Plan: Fiscal Year 2023

Our Mission

Health is our passion.
 Excellence is our focus.
 Compassion is our promise.

Our Vision

To be your world-class healthcare choice, for life.

Our Pillars

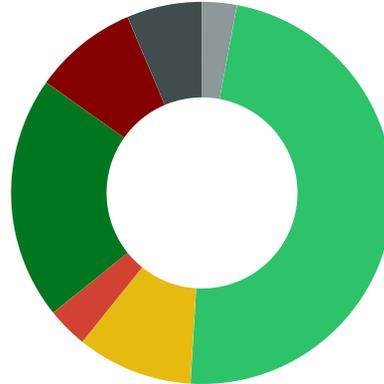
- Achieve outstanding community health.
- Deliver excellent service.
- Provide an ideal work environment.
- Empower through education.
- Maintain financial strength.

For a more detailed review of each individual Strategic Initiative use the hyperlinks below:

- [Empower Through Education](#)
- [Ideal Work Environment](#)
- [Strategic Growth and Innovation](#)
- [Organization Efficiency and Effectiveness](#)
- [Outstanding Health Outcomes](#)
- [Patient and Community Experience](#)

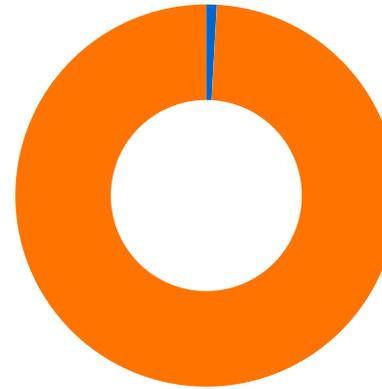
Kaweah Health Strategic Plan FY2023 Overview

Statuses



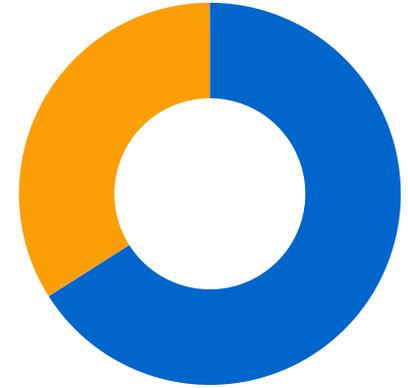
Not Started	6	(3%)
On Track	98	(48%)
Off Track	20	(10%)
At Risk	7	(3%)
Achieved	42	(21%)
Not Achieved	18	(9%)
Canceled	13	(6%)

Due Dates



Not Past Due	1	(1%)
Past Due	111	(99%)

Progress Updates



Up-to-Date	134	(66%)
Late	69	(34%)
Pending	0	(0%)

Empower Through Education

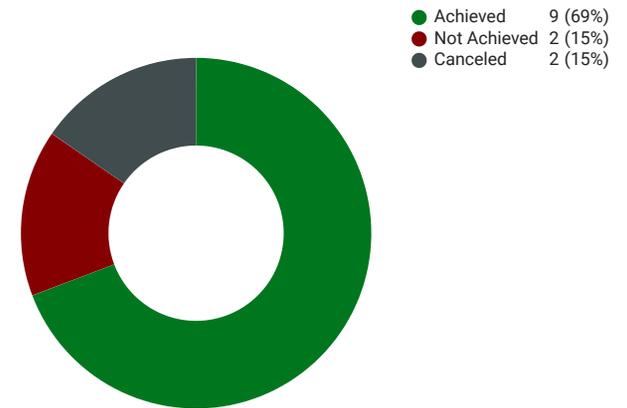
Champions: Lori Winston, MD and Lacey Jensen

*Objective: Implement initiatives to **develop the healthcare team** and **attract and retain** the very best talent in support of our mission.*

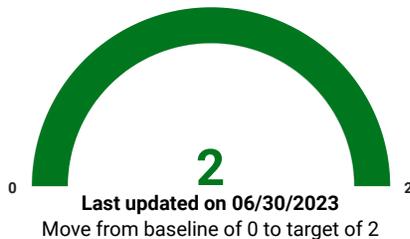
FY2023 Strategic Plan - Empower Through Education Strategies

#	Name	Description	Status	Assigned To
1.1	Expand Educational Offerings	Review and assess existing and new educational opportunities for employees and the medical staff to ensure that there are ongoing opportunities for growth and development.	On Track	
1.2	Improve Resiliency of the Kaweah Health Team	Increase emotional support and promote wellness.	On Track	Dianne Cox
1.3	Increase and Improve Leadership Education	Increase the volume and quality of educational opportunities for the Kaweah Health Leadership Team.	On Track	
1.4	Mentorship and Succession Planning	Develop and roll out a formal mentoring and succession planning program.	Canceled	Hannah Mitchell
1.5	Increase Nursing Cohort Seats	In an effort to increase the local pool of qualified RN candidates, partner with local schools to increase RN cohort seats.	On Track	Dianne Cox
1.6	Expand GME	Continue to explore opportunities to expand the existing Graduate Medical Education (GME) programs and resident spots. Consider opportunities to work with Sierra View to expand GME in Tulare County.	Off Track	Lori Winston

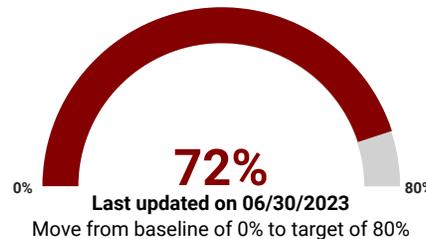
Objectives and Outcomes



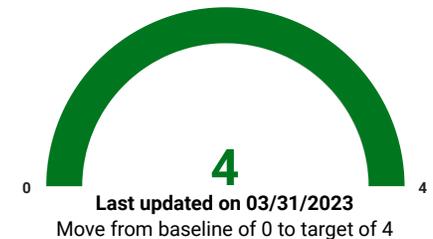
Launch interdisciplinary educational opportunitie...



ACGME Faculty Development



Maintain quarterly Schwartz rounds



Ideal Work Environment

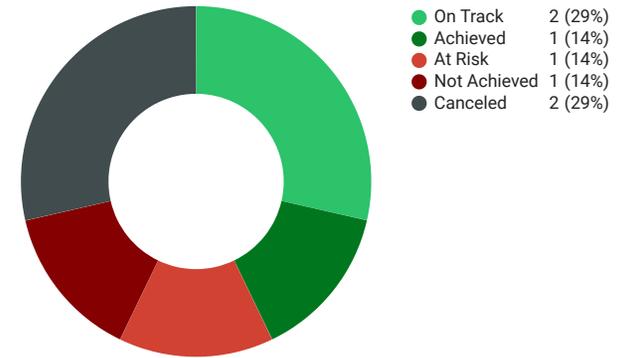
Champions: Dianne Cox and Raleen Larez

Objective: Foster and support healthy and desirable working environments for our Kaweah Health Teams

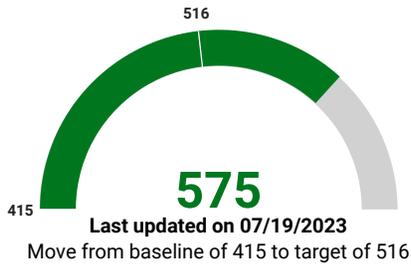
FY2023 Strategic Plan - Ideal Work Environment Strategies

#	Name	Description	Status	Assigned To
2.1	Employee Retention	Kaweah Health is facing the same challenges as many employers in the labor market and must make retention a top priority.	On Track	Dianne Cox
2.2	Kaweah Health Team Works Well Together	There is a need to continue to align the efforts of all Kaweah Health teams to ensure world class service.	On Track	Hannah Mitchell
2.3	Expand Volunteer Programs	Volunteer engagement has declined with the pandemic. Kaweah Health relies on a strong volunteer program to continue to spark career path engagement and to provide world class service.	On Track	Dianne Cox

Objectives and Outcomes



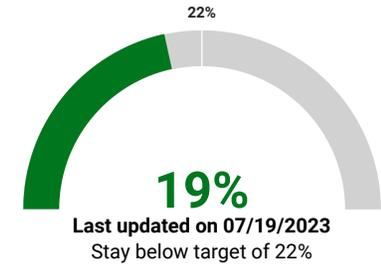
Expand Volunteer Programs



Decrease overall KH turnover rate



Decrease nursing turnover rate



Strategic Growth and Innovation

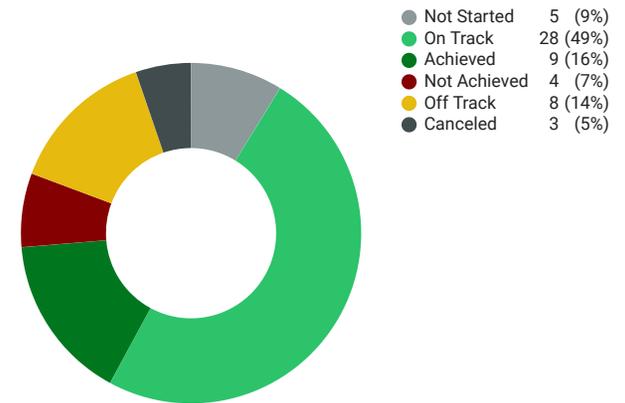
Champions: Marc Mertz and Ivan Jara

Objective: Grow intelligently by expanding existing services, adding new services, and serving new communities. Find new ways to do things to improve efficiency and effectiveness.

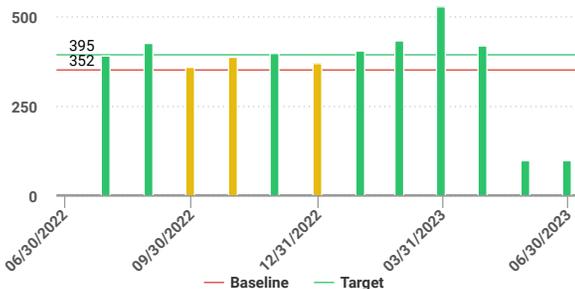
FY2023 Strategic Plan - Strategic Growth and Innovation Strategies

#	Name	Description	Status	Assigned To
3.1	Recruit and Retain Providers	Recruit and retain the best physicians and providers to address unmet community needs and to support Kaweah Health's growth.	On Track	JC Palermo
3.2	Grow Inpatient Volumes in our Primary Service Area	Grow our inpatient volumes, particularly the surgical cases, with an emphasis on key service lines and our expanded service area.	Off Track	Marc Mertz
3.3	Grow Outpatient Volumes	Increase access to outpatient care in locations that are convenient to our community.	Off Track	Ivan Jara
3.4	Modernize our Facilities	Update our facilities to create a better patient experience and to provide our employees and medical staff with a better work environment.	On Track	Marc Mertz
3.5	Improve Community Engagement	Continue and expand our efforts to engage our community so that we can better serve their health and wellness needs, and to gain the community's insights and support regarding our initiatives. Seek ways to expand our current reach and gain more widespread feedback and outreach	Not Achieved	Marc Mertz
3.6	Innovation	Create, develop, and implement new processes, systems, or services, with the aim of improving efficiency, effectiveness, or competitive advantage	On Track	Marc Mertz
3.7	Expand Health Plan & Community Partnerships	Improve and strengthen relationships with health plans, community partners, and participate in local/state/federal programs and funding opportunities to improve access, quality, and outcomes for the community	On Track	Ivan Jara

Objectives and Outcomes

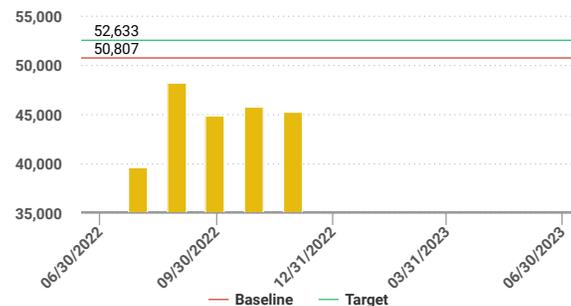


Perform 395 inpatient surgeries per month



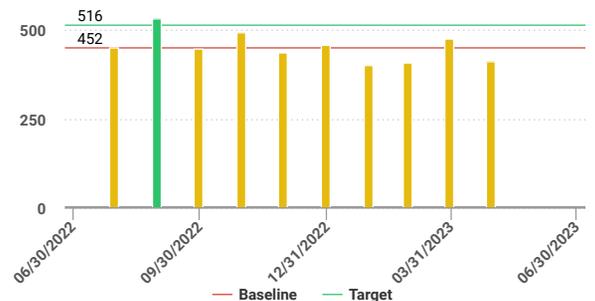
Showing data for: Jul 1, 2022 - Jun 30, 2023

See 52,633 ambulatory visits per month



Showing data for: Jul 1, 2022 - Jun 30, 2023

Perform 516 monthly outpatient surgeries



Showing data for: Jul 1, 2022 - Jun 30, 2023

Organizational Efficiency and Effectiveness

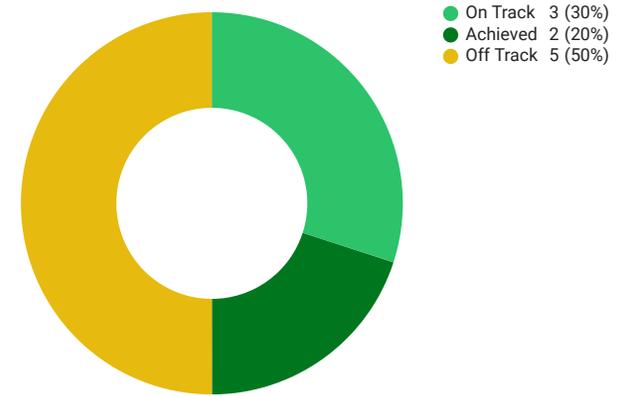
Champions: Jag Batth and Rebekah Foster

Objective: Increase the efficiency and effectiveness of the Organization to reduce costs, lower length of stay and improve processes.

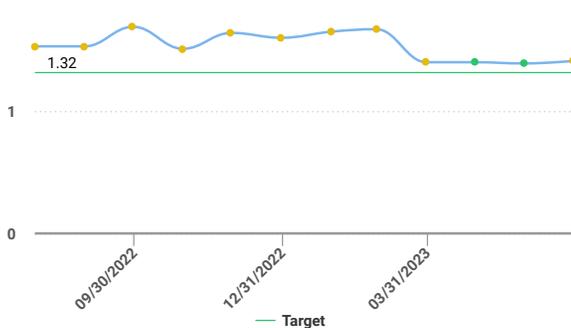
FY2023 Strategic Plan - Organization Efficiency and Effectiveness Strategies

#	Name	Description	Status	Assigned To
4.1	Patient Throughput and Length of Stay	Implement patient flow processes that are effective and efficient to improve patient throughput and lower the overall Length of Stay.	On Track	Rebekah Foster
4.2	Operating Room Efficiency/Capacity	Improve Operating Room Efficiency, Capacity and Utilization to meet surgery volume needs.	Off Track	Lori Mulliniks
4.3	Supply Management and Standardization	Establish a process to identify revenue and cost savings opportunities across Kaweah Health.	On Track	Steve Bajari

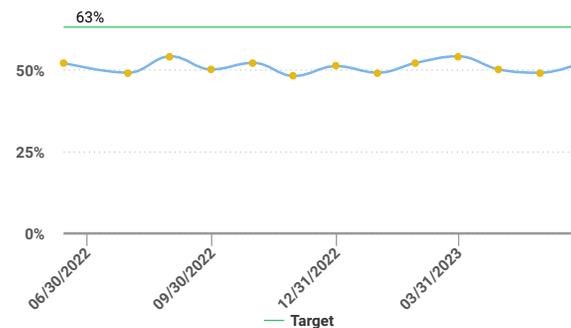
Objectives and Outcomes



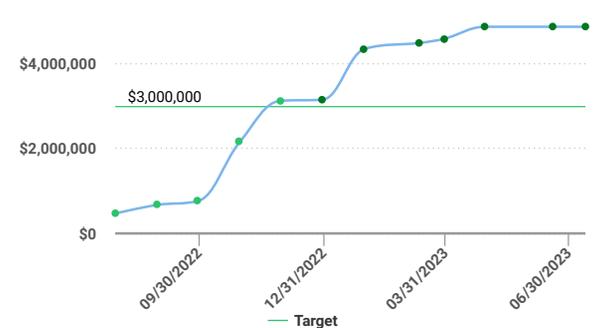
IP O:E Length of Stay in Days (lower better)



Overall OR Utilization (higher better)



Identified Cost Savings and Revenue Opportunities



Outstanding Health Outcomes

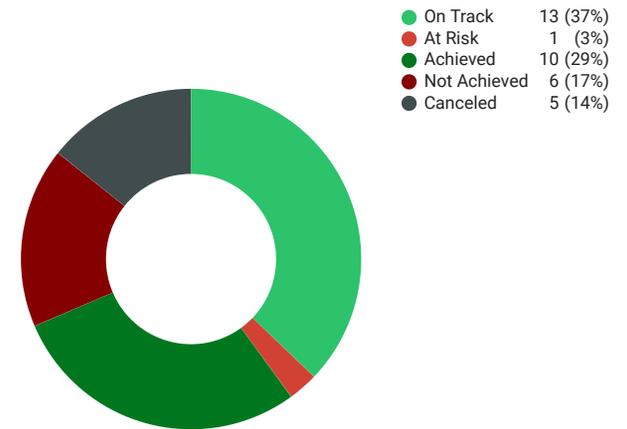
Champions: Dr. William Brien and Sonia Duran-Aguilar

Objective: To consistently deliver high quality care across the health care continuum.

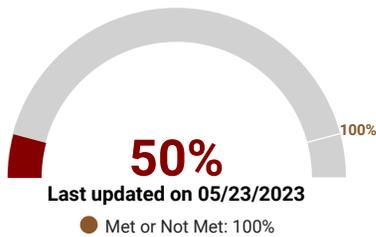
FY2023 Strategic Plan - Outstanding Health Outcomes Strategies

#	Name	Description	Status	Assigned To
5.1	Standardized Infection Ratio (SIR)	Over the next 3 years, achieve an "A" Leapfrog Safety Score and a CMS 5 Star Rating through the consistent application of best practices and innovative strategies.	On Track	Sandy Volchko
5.2	Sepsis Bundle Compliance (SEP-1)	Over the next 3 years, achieve an "A" Leapfrog Safety Score and a CMS 5 Star Rating through the consistent application of best practices and innovative strategies	On Track	Sandy Volchko
5.3	Mortality and Readmissions	Over the next 3 years, achieve an "A" Leapfrog Safety Score and a CMS 5 Star Rating through the consistent application of best practices and innovative strategies	On Track	Sandy Volchko
5.4	Team Round Implementation	Enhance coordination of care and culture among the health care team	On Track	Lori Winston
5.5	Quality Improvement Program (QIP) Reporting	Develop a comprehensive strategy to improve capture of quality data codes and improve QIP performance.	On Track	Sonia Duran-Aguilar
5.6	HUMANA Medicare Advantage (MA)	Maintain a 4 STAR Medicare Advantage Rating and > 80% HCC reassessment/PAF visit completion rate for HUMANA MA Lives assigned to Kaweah Health Rural Health Clinics, SHWC and KHMG	On Track	Sonia Duran-Aguilar
5.7	Diabetes Management	Optimize inpatient glycemic management	On Track	Sonia Duran-Aguilar

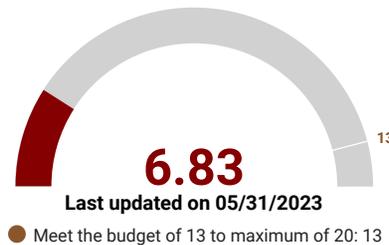
Objectives and Outcomes



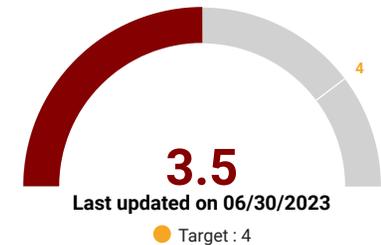
Team Rounds Rollout to Valley Hospitalist and ACTSS



Meet QIP measure performance



Medicare Advantage STAR Rating for RHC/SHWC



Patient and Community Experience

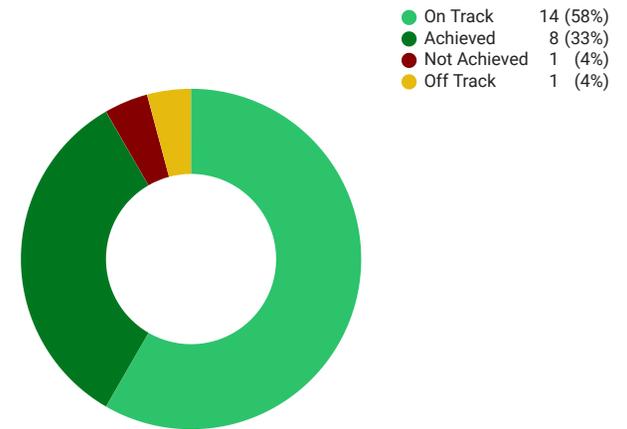
Champions: Keri Noeske and Deborah Volosin

Objective: Develop and implement strategies that provide our health care team the tools they need to deliver a world-class health care experience.

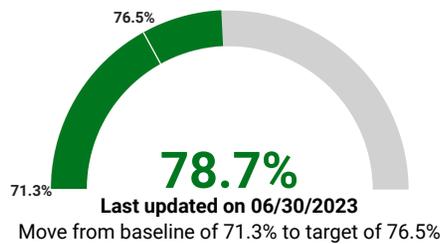
FY2023 Strategic Plan - Patient and Community Experience Strategies

#	Name	Description	Status	Assigned To
6.1	World-Class Service	Develop and implement strategies that provide our health care team the tools they need to deliver a world-class health care experience.	On Track	Keri Noeske
6.2	Physician Communication	Develop and implement strategies that provide our health care team the tools they need to deliver a world-class health care experience.	On Track	Keri Noeske
6.3	Nursing Communication	Develop and implement strategies that provide our health care team the tools they need to deliver a world-class health care experience.	Off Track	Keri Noeske
6.4	Enhancement of Systems and Environment	Develop and implement strategies that provide our health care team the tools they need to deliver a world-class health care experience.	On Track	Keri Noeske

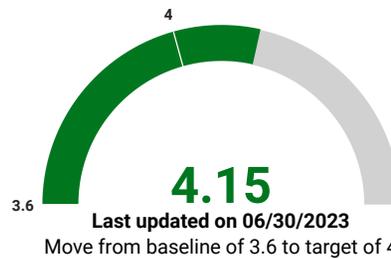
Objectives and Outcomes



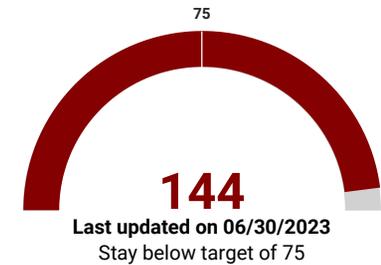
Achieve Overall Rating Goal on HCAHPS Survey



Achieve Patient Feedback Score Goal on ED Survey



Decrease lost belongings by 25%



Throughput Steering Committee



kaweahhealth.org



Performance Scorecard

Leading Performance Metrics – Inpatient & Observation

Metric	Patient Type	Definition	Goal	Baseline**	Discharge Date				
					2/1/2023				6/30/2023
Observation Average Length of Stay (Obs ALOS) <i>(Lower is better)*</i>	Overall	Average length of stay (hours) for observation patients	36	51.50	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023
					48.66	53.44	41.60	62.34	39.91
Inpatient Average Length of Stay (IP ALOS) <i>(Lower is better)*</i>	Overall	Average length of stay (days) for inpatient discharges	5.64	5.80	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023
					6.72	5.54	5.45	5.28	5.47
Inpatient Observed-to-Expected Length of Stay <i>(Lower is better)**</i>	Overall	Observed LOS / geometric mean length of stay for inpatient discharges	1.32	1.48	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023
					1.67	1.40	1.40	1.39	1.41
Discharges*	Inpatient	Count of inpatient discharges	N/A	1,241	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023
	Observation	Count of observation discharges	N/A	406	1,139	1,350	1,189	1,263	1,279
	Overall	Count of inpatient and observation discharges	N/A	1,647	320	422	392	467	453
					1,459	1,772	1,581	1,730	1,732

*All metrics above exclude Mother/Baby, Behavioral Health, and Pediatrics encounter data

*O/E LOS to be updated to include cases with missing DRG when available

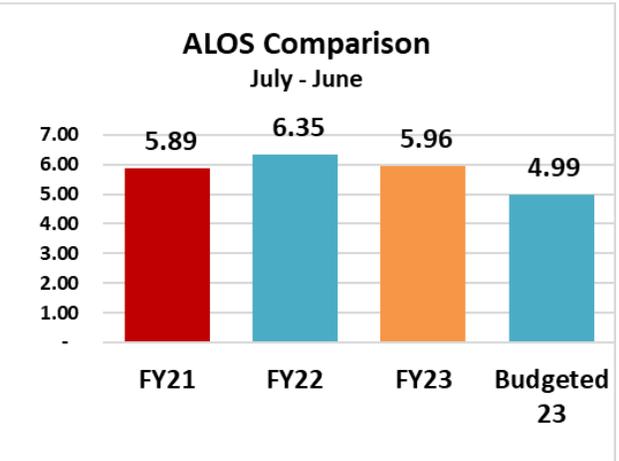
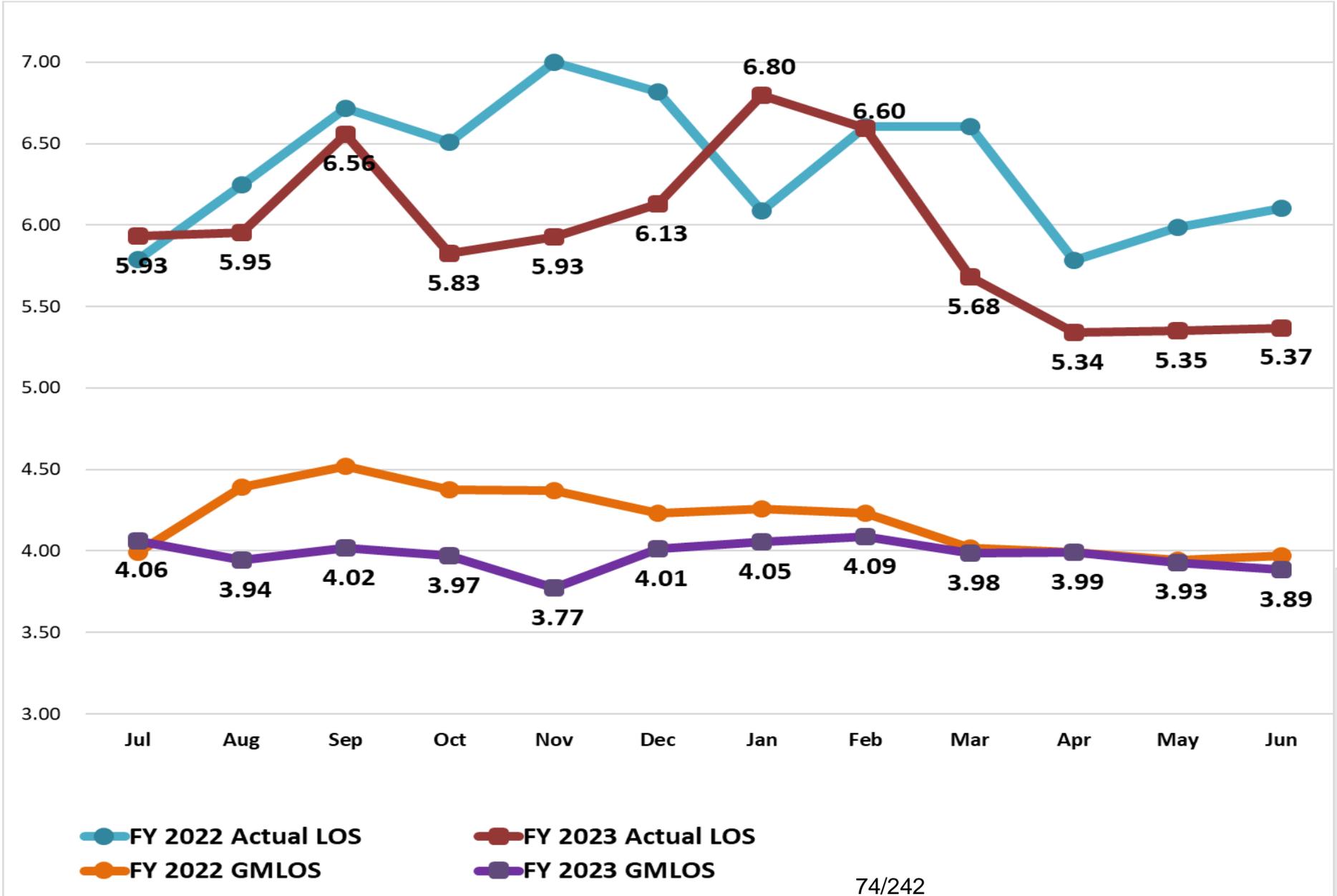
**Baseline calculation: Previous 6-month rolling median or average based on the metric's calculation

Performance Scorecard

Leading Performance Metrics – Emergency Department

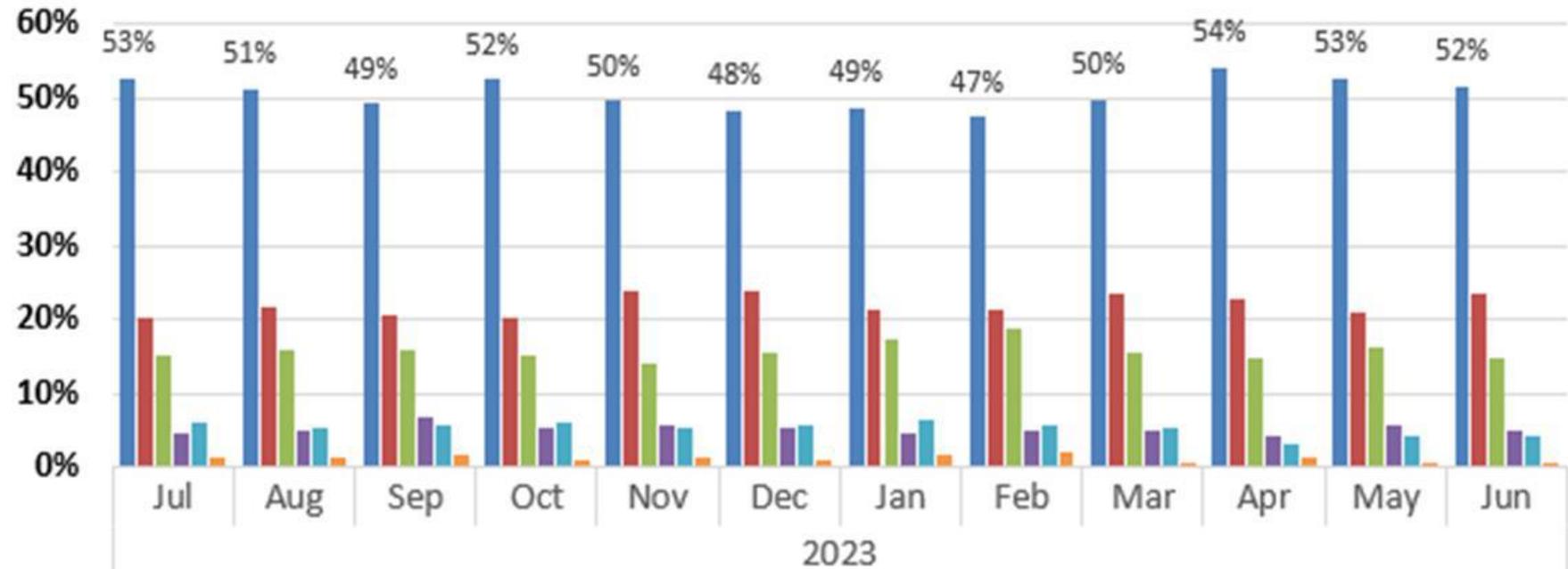
Metric	Patient Type	Definition	Goal	Baseline**	Check In Date and Time				
					2/1/2023 12:00:00 AM				6/30/2023 11:59:59 PM
ED Boarding Time <i>(Lower is better)*</i>	Inpatient	Median time (minutes) for admission order written to check out for admitted patients	259	169	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023
					294	224	124	138	125
	Observation	Median time (minutes) for admission order written to check out for observation patients	287	177					
					343	199	124	138	119
	Overall	Median time (minutes) for admission order written to check out for inpatient and observation patients	286	170					
					298	223	124	138	124
ED Admit Hold Volume <i>(Lower is better)*</i>	Overall >4 Hours	Count of patients (volume) with ED boarding time \geq 4 hours	N/A	380	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023
					590	532	136	234	160
ED Length of Stay (ED LOS) <i>(Lower is better)*</i>	Discharged	Median ED length of stay (minutes) for discharged patients	214	275	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023
					278	266	265	281	287
	Inpatient	Median ED length of stay (minutes) for admitted patients	612	575					
					711	628	492	491	499
	Observation	Median ED length of stay (minutes) for observation patients	577	567					
					743	625	488	479	477
	Overall	Median ED length of stay (minutes) for admitted and discharged patients	N/A	331					
					347	331	312	326	332
ED Visits*	Discharged	Count of ED visits for discharged patients	N/A	4,715	Feb 2023	Mar 2023	Apr 2023	May 2023	Jun 2023
					4,212	4,639	4,941	5,075	4,880
	Inpatient	Count of ED Visits for admitted patients	N/A	1,103					
					1,032	1,181	1,054	1,126	1,122
	Observation	Count of ED Visits for observation patients	N/A	409					
					316	399	420	448	472
	Overall	Count of ED visits	N/A	6,228					
					5,560	6,219	6,415	6,649	6,474

Average Length of Stay versus National Average (GMLOS)



Average Length of Stay Distribution

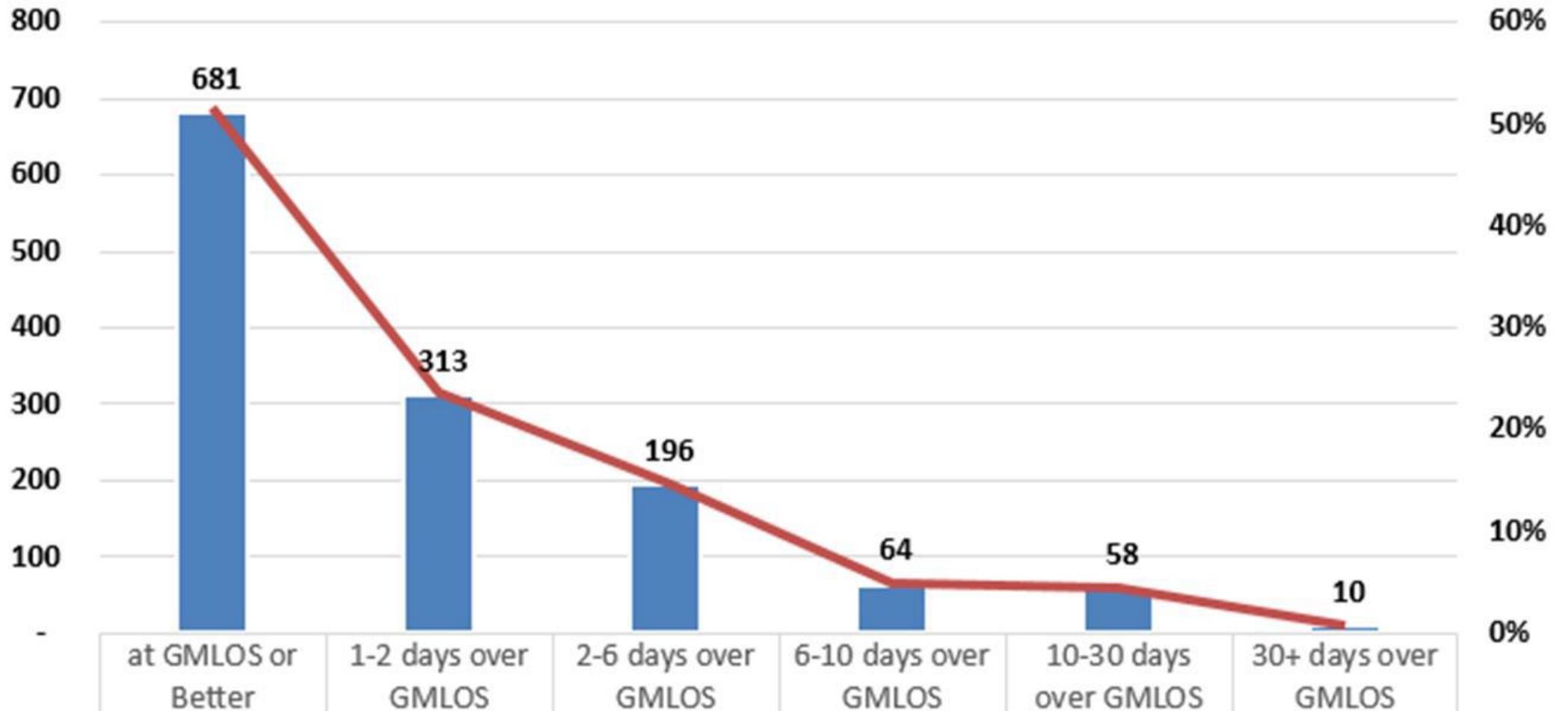
FY23 Overall LOS Distribution



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
at GMLOS or Better	53%	51%	49%	52%	50%	48%	49%	47%	50%	54%	53%	52%
1-2 days over GMLOS	20%	22%	21%	20%	24%	24%	21%	21%	24%	23%	21%	24%
2-6 days over GMLOS	15%	16%	16%	15%	14%	16%	17%	19%	16%	15%	16%	15%
6-10 days over GMLOS	5%	5%	7%	5%	6%	5%	5%	5%	5%	4%	6%	5%
10-30 days over GMLOS	6%	5%	6%	6%	5%	6%	7%	6%	5%	3%	4%	4%
30+ days over GMLOS	1%	1%	2%	1%	1%	1%	2%	2%	0%	1%	1%	1%

Average Length of Stay March Distribution

Jun FY 2023 Overall LOS Distribution



Count of Visits

681

313

196

64

58

10

% of Visits

52%

24%

15%

5%

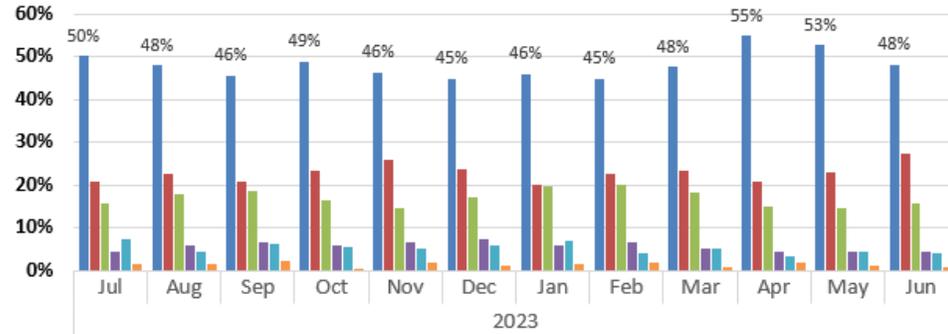
4%

1%

LOS Distribution

Hospitalist

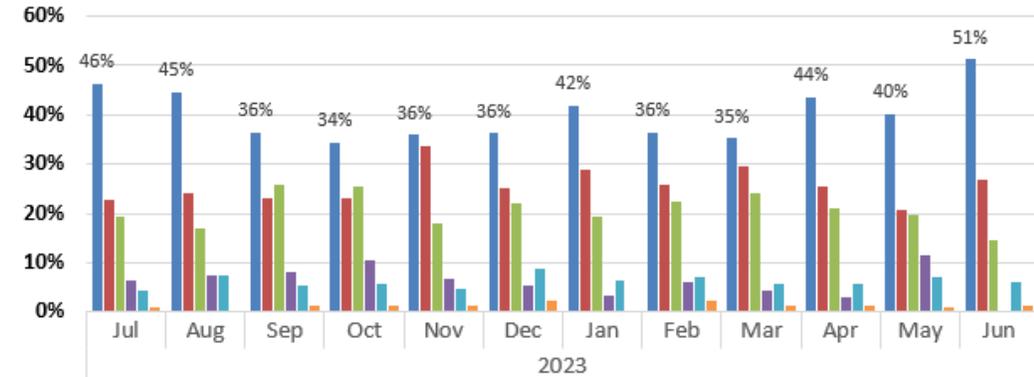
FY23 Hospitalist LOS Distribution



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
at GMLOS or Better	50%	48%	46%	49%	46%	45%	46%	45%	48%	55%	53%	48%
1-2 days over GMLOS	21%	23%	21%	23%	26%	24%	20%	23%	23%	21%	23%	27%
2-6 days over GMLOS	16%	18%	19%	16%	15%	17%	20%	20%	18%	15%	15%	16%
6-10 days over GMLOS	5%	6%	7%	6%	7%	7%	6%	7%	5%	4%	5%	4%
10-30 days over GMLOS	7%	4%	6%	5%	5%	6%	7%	4%	5%	3%	4%	4%
30+ days over GMLOS	1%	2%	2%	0%	2%	1%	2%	2%	1%	2%	1%	1%

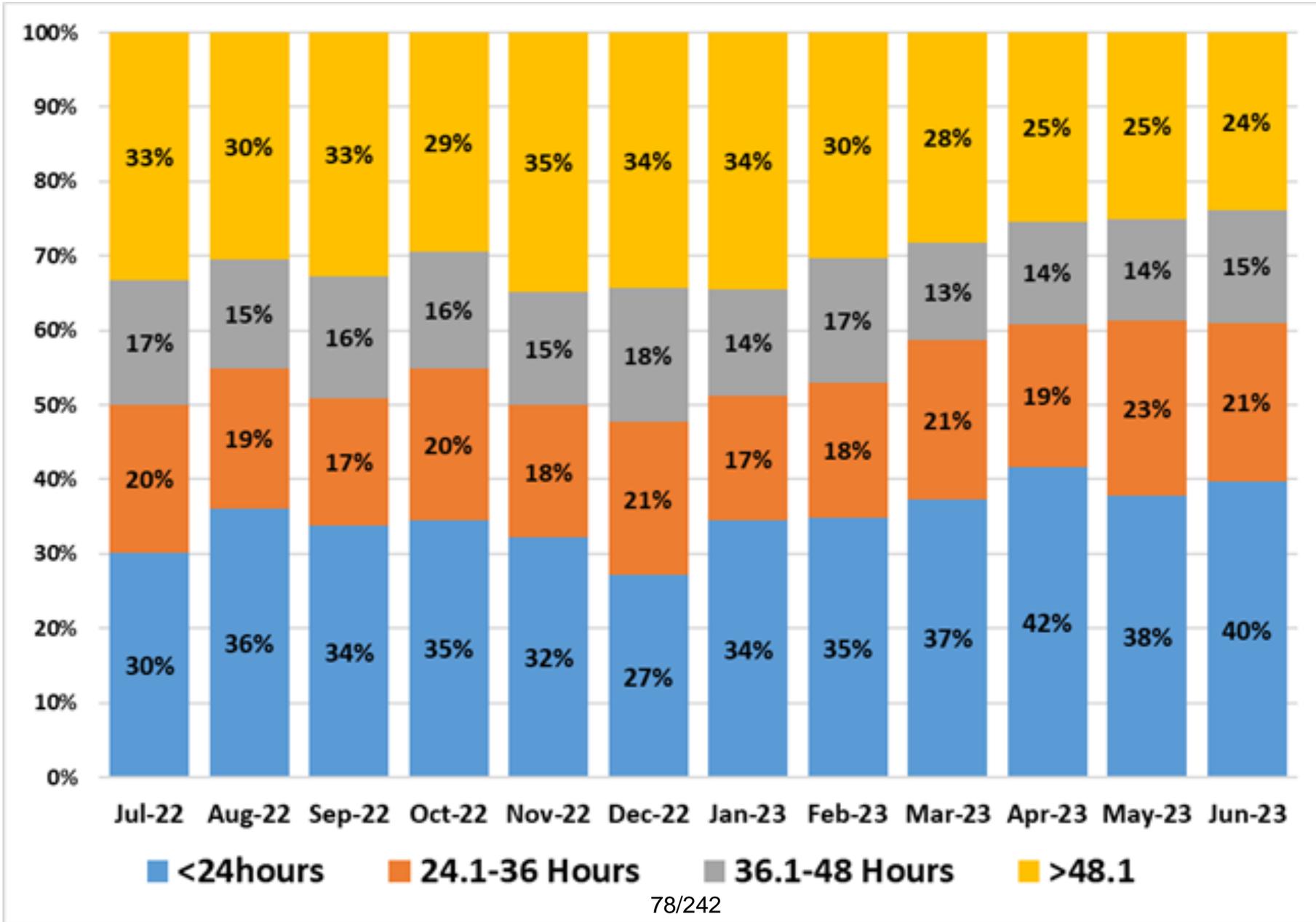
FHCN

FY23 FHCN LOS Distribution



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
at GMLOS or Better	46%	45%	36%	34%	36%	36%	42%	36%	35%	44%	40%	51%
1-2 days over GMLOS	23%	24%	23%	23%	34%	25%	29%	26%	30%	25%	21%	27%
2-6 days over GMLOS	19%	17%	26%	25%	18%	22%	19%	22%	24%	21%	20%	15%
6-10 days over GMLOS	6%	7%	8%	10%	7%	5%	3%	6%	4%	3%	11%	0%
10-30 days over GMLOS	4%	7%	5%	6%	4%	9%	6%	7%	6%	6%	7%	6%
30+ days over GMLOS	1%	0%	1%	1%	1%	2%	0%	2%	1%	1%	1%	1%

Obs update through June



Patient Throughput Updates – June 2023

Update	Next Steps
<p>Patient Progression:</p> <ul style="list-style-type: none"> The permanent location for discharge lounge is the old intake triage area. Interviews for the D/C lounge are scheduled this week, with opening target date of Sept 1st. Next SNF quarterly meeting September 2023 held at Visalia Post Acute Completed the list of ancillary services hours of operations for the house supervisors 	<p>Patient Progression:</p> <ul style="list-style-type: none"> Continue to focus on patients here 1-10 days over LOS and work with physicians on utilizing outpatient services for patients instead of keeping them here. Throughput Supervisors working on staff orientation education. Will roll out in ongoing orientation as well as in staff meetings routinely
<p>ED to Inpatient Admission Process:</p> <ul style="list-style-type: none"> Excellent results with ED performance metrics scorecard. Trend improving with boarding time and ED Average LOS. Strong ED volumes with 6,474 in the month of June Initiating RN:RN hand-off, mitigating delays (sent to Clin ED for essential info flier for implementation) 	<p>ED to Inpatient Admission Process:</p> <ul style="list-style-type: none"> Developing protocol to have ED CMs provide more immediate guidance for admissions, with attending providers being the only ones providing this level of care order. Meeting with ISS, providers, and case management leadership to determine who/timing of inpatient orders in Cerner Determining the timing of Work with ED and 1E teams to develop a workflow for transporting pts to floor in a timely manner instead of waiting for transport.
<p>Transfer Center Operations:</p> <ul style="list-style-type: none"> Updated transfers center policies and workflow for accepting incoming transfers. Better communication with physician advisor to escalate denials that could have resulted in a potential transfer. Cross-train ED CMs and TC RNs to handle both ED and inpt transfers for better coverage. 	<p>Transfer Center Operations:</p> <ul style="list-style-type: none"> ISS working to overcome challenges in CapMan. Continue to have issues with reports. Developing process for ED to inpatient direct admit transfers.
<p>Long Stay Committee:</p> <ul style="list-style-type: none"> Have gotten 174 long stay patients out in the month of June. Longest stay was 108 days. 13 patients in house over 30 days LOS. Holding throughput huddle on Wednesday on all patients over their GMLOS. 	<p>Long Stay Committee:</p> <ul style="list-style-type: none"> Continue to work through weekly meeting format Develop reporting tools to track progress
<p>Patient Placement:</p> <ul style="list-style-type: none"> Met with ISS to determine to determine how to provide the ongoing analytics for data review. Should have updated matrix by August committee meeting. Finalize patient placement matrix & communicated plan to all stakeholders. Will review again in 6 months to look at additional matrix for providers. 	<p>Patient Placement:</p> <ul style="list-style-type: none"> Finalize off-service metrics. Implement phase 2 of patient placement matrix (place patients by provider group/service line). Optimize outpatient service line. Finalize metric monitoring process and analysis.
<p>Observation Program:</p> <ul style="list-style-type: none"> Decrease in hours in June, with LOS decreasing to 39 hours Initial data dashboard created. PCP follow up process and resources finalized Meeting with VHM, FHCN, Humana to review order sets. 	<p>Observation Program:</p> <ul style="list-style-type: none"> Working with Tracy Salsa and Cheryl Clark on stress test and echo optimization for observation patient and outpatient scheduling. Finalize tool for observation discharge resources. Go live date established for CM and admitted provider entering status order. Finalize Power plan changes and submit for change to ISS.

BOD Risk Management Report – Open 2nd Quarter 2023

Evelyn McEntire, Director of Risk Management
559-624-5297/emcentir@kaweahhealth.org



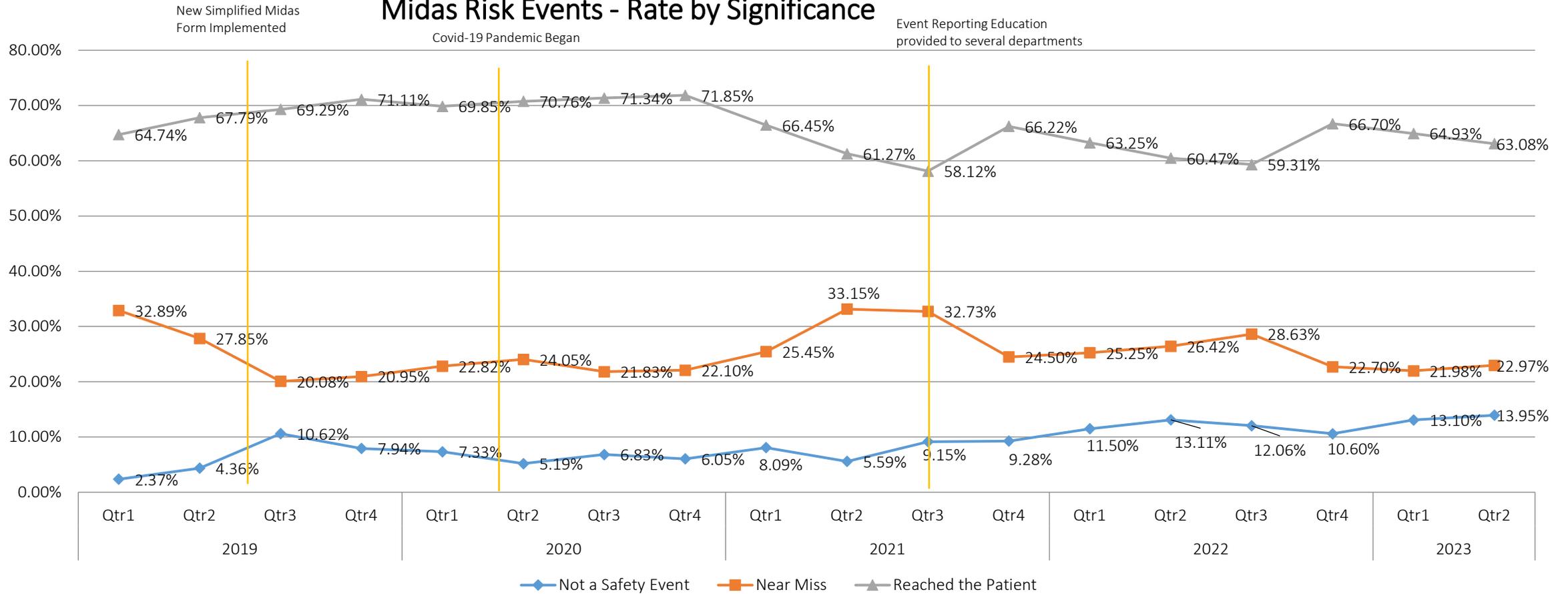
kaweahhealth.org



Risk Management Goals

1. Promote a safety culture as a proactive risk reduction strategy.
2. Reduce frequency and severity of harm (patient and non-patient).
 - Zero incidents of “never events”
3. Reduce frequency and severity of claims.

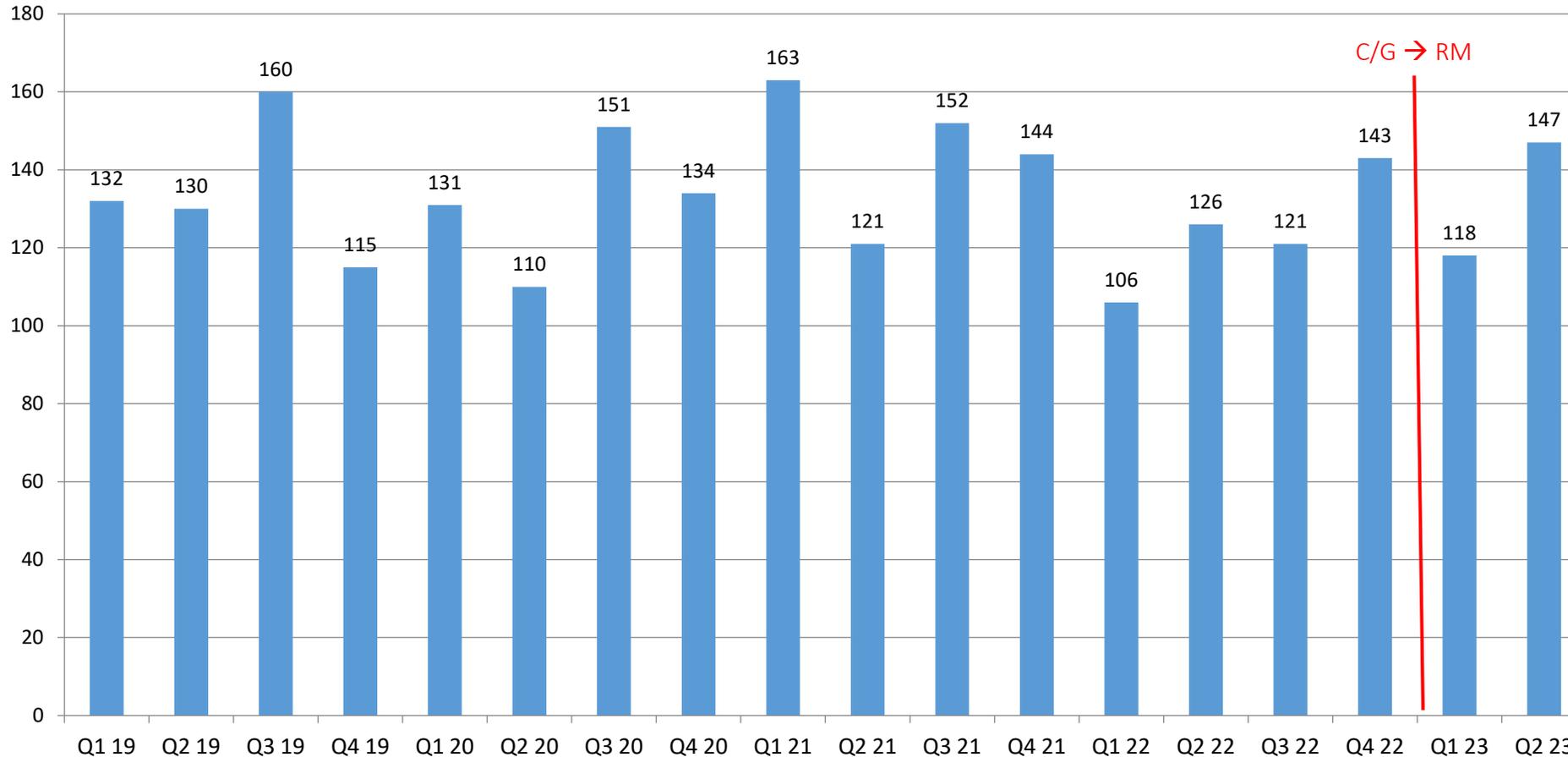
Midas Risk Events - Rate by Significance



This graph represents the total number of Midas event reports submitted per quarter. They are also categorized by “Not a safety event,” “Near miss,” or “Reached the patient.”

Goal: To increase the total number of event reports submitted by staff/providers while decreasing those events which reach the patient.

Complaints & Grievances 2019-2023



Trends:

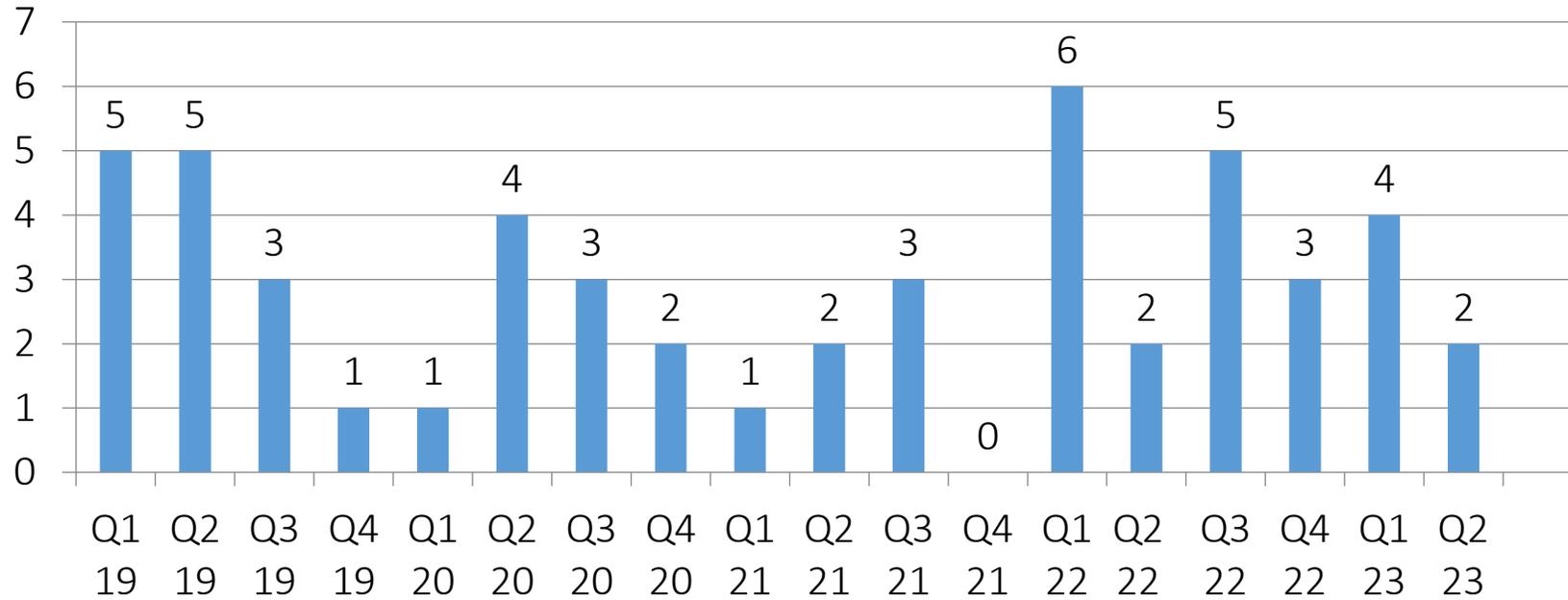
- Clinical Care- Provider
- Clinical Care – Staff
- Communication - Staff

Actions:

- Began tracking complaints originating from social media in Midas (6/1/2023).
- Revised Complaints & Grievances portion of Midas to improve data collection in coming quarters.
- Response letter template revised to improve satisfaction.

Claims

2019 - 2023



New Claims Received per Quarter

Total cases closed during 2nd Quarter 2023 – (5) Five

July 26, 2023

Sent via Certified Mail
No.70160340000002566820
Returned Receipt Requested

Deanna Potts
2275 N Kensington Way
Hanford, CA 93230

RE: Claim of Deanna Potts vs. Kaweah Delta Health Care District

NOTICE IS HEREBY GIVEN that the claim dated June 20, 2023, you presented to Kaweah Delta Health Care District is being returned because it was not presented within six (6) months after the event or occurrence as required by law. See 901 and 911.2 of the Government Code. Because the claim was not presented within the time allowed by law, no action was taken on the claim.

Your only recourse at this time is to apply, without delay, to Kaweah Delta Health Care District for leave to present a late claim. See Sections 911.4 to 912.2, inclusive, and Section 946.6 of the Government Code. Under some circumstances, leave to present a late claim will be granted. See Section 911.6 of the Government Code.

You may seek the advice of an attorney of your choice in connection with this matter. If you desire to consult an attorney, you should do so immediately.

Sincerely,

Mike Olmos
Secretary/Treasurer, Board of Directors

cc: Richard Salinas, Attorney at Law

July 26, 2023

Sent via Certified Mail
No.70201290000129797646
Returned Receipt Requested

Marty Potts
2275 N Kensington Way
Hanford, CA 93230

RE: Claim of Marty Potts vs. Kaweah Delta Health Care District

NOTICE IS HEREBY GIVEN that the claim dated June 20, 2023, you presented to Kaweah Delta Health Care District is being returned because it was not presented within six (6) months after the event or occurrence as required by law. See 901 and 911.2 of the Government Code. Because the claim was not presented within the time allowed by law, no action was taken on the claim.

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You may seek the advice of an attorney of your choice in connection with this matter. If you desire to consult an attorney, you should do so immediately.

Sincerely,

Mike Olmos
Secretary/Treasurer, Board of Directors

cc: Richard Salinas, Attorney at Law

***KAWEAH HEALTH
FINANCE DIVISION MEMORANDUM***

TO: Board of Directors, Chief Executive Officer and Executive Team

FROM: Malinda Tupper, Chief Financial Officer
Jennifer Stockton, Director of Finance

DATE: July 24, 2023

SUBJECT: General Obligation Tax Resolution

On July 26, 2023, the Kaweah Health Board of Directors (the “**Board**”) will be asked to approve Resolution No. 2200 directing the County of Tulare to levy and collect, for the fiscal year July 1, 2023 to June 30, 2024, a tax sufficient to pay the principal and interest of the 2014 bonds (debt service schedule attached to the resolution).

History of the Bonds: In November of 2003, the residents of the Kaweah Delta Health Care District voted to approve the issuance of \$51 million of general obligation bonds. General Obligation (“GO”) bonds can be issued by governmental entities and are secured by property taxes of the residents that live within the boundaries of the entity. These taxes are in addition to the normal operating taxes collected by the County. The related GO bonds were issued by Kaweah Health in 2004 and the funds were used to construct improvements to the Kaweah Health facility that are currently referred to as the “Acequia Wing”. In 2014, the 2004 bonds were advance refunded in order to take advantage of favorable interest rates. With an advance refunding we are allowed to issue new bonds with new lower rates, and then pay off the old bonds that had higher rates.

Each year in July, Kaweah Health Finance representatives work with representatives of the County of Tulare to calculate the amount of tax to levy. The tax rate per \$100 is determined by utilizing the annual debt service on the bonds, the internal bond reserve funds, unsecured tax revenues and unitary revenues estimated by the County, and the total Kaweah Delta Health Care District secured property values as determined by the County.

A trend of the values utilized to determine the annual tax rate is attached.

For any questions regarding the documents, please contact Malinda Tupper at 624-4065 or Jennifer Stockton at 624-5536.

Kaweah Delta Health Care District
 Tax Rate Resolution - for submission to County of Tulare
 Debt Service of 2004 (2014 refi) General Obligation Bonds

Fiscal Year	23-24	22-23	21-22	20-21	19-20
Internal Reserve	\$ 1,635,832	\$ 1,785,239	\$ 1,521,611	\$ 1,542,438	\$ 1,320,968
Balance to be raised	\$ 3,594,816	\$ 3,514,268	\$ 3,444,469	\$ 3,176,688	\$ 2,960,143
Unsecured Value	\$ 1,286,828,333	\$ 1,096,631,965	\$ 917,599,514	\$ 840,655,587	\$ 804,805,447
Delinquency Rate	92%	96%	96%	95%	93%
Unsecured Revenue	\$ 190,964	\$ 189,748	\$ 147,992	\$ 144,320	\$ 135,428
Unitary Revenue	\$ 725,151	\$ 782,522	\$ 648,059	\$ 692,907	\$ 449,808
Secured Value	\$ 17,054,838,914	\$ 16,016,117,073	\$ 14,881,908,926	\$ 14,090,585,891	\$ 13,331,804,005
Delinquency Rate	97%	98%	98%	98%	97%
Secured Amount to Raise	\$ 2,678,701	\$ 2,541,998	\$ 2,648,418	\$ 2,339,461	\$ 2,374,907
Tax Rate - per \$100 of value	\$ 0.016044	\$ 0.016057	\$ 0.018020	\$ 0.016874	\$ 0.018136
Increase in Secured Values	\$ 1,038,721,841 6.5%	\$ 1,134,208,147 7.6%	\$ 791,323,035 5.6%	\$ 758,781,886 5.7%	\$ 688,351,724 5.4%

**BOARD OF DIRECTORS
KAWEAH DELTA HEALTH CARE DISTRICT**

RESOLUTION 2200

**A RESOLUTION DIRECTING TULARE COUNTY, CALIFORNIA, TO
LEVY A TAX TO PAY THE PRINCIPAL OF AND INTEREST ON
GENERAL OBLIGATION BONDS OF THE DISTRICT.**

WHEREAS, by Resolution No. 1312 (the "*Ballot Resolution*") adopted by the Board of Directors of Kaweah Delta Health Care District (the "*Board*") on July 22, 2003, the Board determined and declared that public interest and necessity demanded the acquisition, construction and/or reconstruction, improvement and equipping of additional health care facilities to expand Kaweah Delta Hospital of Kaweah Delta Health Care District (the "*District*"); and

WHEREAS, by the Ballot Resolution, the Board duly called an election to be held on November 4, 2003, for the purpose of submitting to the electors of the District a proposition to incur bonded indebtedness to finance all works, property, parking and structures necessary or convenient for the acquisition, improvement, construction and/or reconstruction of an expansion to Kaweah Delta Hospital, as more fully defined herein (the "*Project*"); and

WHEREAS, an election was held in the District on November 4, 2003, for the purpose of submitting to the qualified voters of the District a proposition for incurring bonded indebtedness of the District in the aggregate principal amount not to exceed \$51,000,000 to finance the Project; and

WHEREAS, the Registrar of Voters of Tulare County, California, duly canvassed the return of said election and, as the result of such canvass, certified to the Board that more than two-thirds of the votes cast on said proposition favored the incurring of such bonded indebtedness; and

WHEREAS, in 2004, the District issued its General Obligation Bonds, Election of 2003, Series 2004 (the "*2004 Bonds*") in the aggregate principal amount of \$51,000,000 for the purposes authorized and on the conditions set forth in Ordinance No. 04-02 (the "*Ordinance*"); and

WHEREAS, on January 6, 2014, the Board adopted Resolution No. 1795 authorizing the issuance of its General Obligation Refunding Bonds, Series 2014 (the "*2014 Bonds*") in an amount sufficient to provide for the advance refunding and redemption, on August 1, 2014, of the 2004 Bonds maturing on or after August 1, 2015; and

WHEREAS, on January 30, 2014, the Board issued its 2014 Bonds in the aggregate principal amount of \$48,906,000 pursuant to Chapter 4, Division 23 (Sections

32300 *et seq.*) of the California Health & Safety Code (the “*Authorizing Law*”), Chapter 3, Part 1, Division 2, Title 5 of the California Government Code and Resolution No. 1795;

WHEREAS, pursuant to the Authorizing Law, the District is authorized to direct Tulare County, California, in which jurisdiction the District is located (the “*County*”), to levy an *ad valorem* tax on all property within the District for the purpose of paying the principal and interest coming due on the 2014 Bonds,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF DIRECTORS OF KAWEAH DELTA HEALTH CARE DISTRICT AS FOLLOWS:

Section 1. Recitals. All of the recitals herein are true and correct. To the extent that the Recitals relate to findings and determinations of the Board, the Board declares such findings or determinations to be made hereby.

Section 2. Tax Levy. For the purpose of paying the principal of and interest on the 2014 Bonds, and subject to the provisions below, the Board hereby directs the County to levy and collect, in each successive fiscal year, commencing with the District's fiscal year beginning July 1, 2023, and ending June 30, 2024 a tax sufficient to pay the annual interest on the 2014 Bonds as the same becomes due and also such part of the principal thereof as becomes due before the proceeds of a tax levied at the time for making the next general tax levy can be made available for the payment of such interest or principal. Attached to this Resolution as Exhibit A is the annual debt service schedule for the 2014 Bonds. Attached to this Resolution as Exhibit B is the property tax rate set by the Board for the fiscal year ending June 30, 2024.

The levy of taxes for the 2014 Bonds takes into account amounts on deposit in the General Obligation Refunding Bond Fund of the District established pursuant to Resolution No. 1795 of the District to pay debt service on the 2014 Bonds during such year as estimated by the Chief Financial Officer.

Said tax shall be in addition to all other taxes levied for District purposes, shall be levied and collected by the County at the same time and in the same manner as other taxes of the District are levied and collected, and shall be used only for the payment of the 2014 Bonds, and the interest thereon.

Pursuant to Sections 32127 and 32204 of the California Health & Safety Code, all taxes collected by the County pursuant to this Section 2 shall be paid into the treasury of the District and deposited forthwith in a special account of the District as set forth in Resolution No. 1795 of the District.

Section 3. Request for Necessary County Actions. The Board of Supervisors, the Treasurer, the Tax Collector, the Auditor and other officials of the County are hereby requested to take and authorize such actions as may be necessary pursuant to law to provide for the levy and collection of a property tax on all taxable property within the District sufficient to provide for the payment of all principal of, redemption premium (if any), and interest on the 2014 Bonds, as the same shall become due and payable, and

to transfer the tax receipts from such levy to the District for deposit into the District's General Obligation Refunding Bond Fund. The Chief Financial Officer is hereby authorized and directed to deliver certified copies of this Resolution to the clerk of the Board of Supervisors of the County, and the Treasurer, Tax Collector and Auditor of the County.

Section 4. Ratification. All actions heretofore taken by officials, employees and agents of the District with respect to the request and direction for the tax levy described herein are hereby approved, confirmed and ratified.

Section 5. General Authority. The President of the Board, the Secretary/Treasurer, the Chief Executive Officer and the Chief Financial Officer, and their respective designees, are each hereby authorized, empowered and directed in the name and on behalf of the District to take any and all steps, which they or any of them might deem necessary or appropriate in order to ensure that the County levies and collects the property taxes as described herein and otherwise to give effect to this Resolution.

Section 6. This Resolution shall take effect immediately upon enactment.

THE FOREGOING RESOLUTION WAS PASSED AND ADOPTED by the Board of Directors of Kaweah Delta Health Care District on July 26, 2023 by the following vote:

AYES: _____

NOES: _____

ABSENT: _____

David Francis
President, Board of Directors
Kaweah Delta Health Care District

Attest:

Mike Olmos
Secretary/Treasurer, Board of Directors
Kaweah Delta Health Care District

EXHIBIT A

BOND DEBT SERVICE

Kaweah Delta Health Care District of Tulare County, California
 General Obligation Refunding Bonds, Series 2014
 (Refunds Series 2004 G.O. Bonds)
 FINAL

Period Ending	Principal	Coupon	Interest	Debt Service	Annual Debt Service
08/01/2014			956,281.17	956,281.17	956,281.17
02/01/2015			950,997.85	950,997.85	
08/01/2015	1,089,000	** %	950,997.85	2,039,997.85	2,990,995.70
02/01/2016			930,734.35	930,734.35	
08/01/2016	1,193,000	** %	930,734.35	2,123,734.35	3,054,468.70
02/01/2017			908,535.15	908,535.15	
08/01/2017	1,301,000	** %	908,535.15	2,209,535.15	3,118,070.30
02/01/2018			884,325.80	884,325.80	
08/01/2018	1,412,000	** %	884,325.80	2,296,325.80	3,180,651.60
02/01/2019			858,044.95	858,044.95	
08/01/2019	1,530,000	** %	858,044.95	2,388,044.95	3,246,089.90
02/01/2020			829,571.50	829,571.50	
08/01/2020	1,651,000	** %	829,571.50	2,480,571.50	3,310,143.00
02/01/2021			798,844.10	798,844.10	
08/01/2021	1,779,000	** %	798,844.10	2,577,844.10	3,376,688.20
02/01/2022			765,734.30	765,734.30	
08/01/2022	1,913,000	** %	765,734.30	2,678,734.30	3,444,468.60
02/01/2023			730,134.10	730,134.10	
08/01/2023	2,054,000	** %	730,134.10	2,784,134.10	3,514,268.20
02/01/2024			691,907.70	691,907.70	
08/01/2024	2,211,000	** %	691,907.70	2,902,907.70	3,594,815.40
02/01/2025			650,759.75	650,759.75	
08/01/2025	2,380,000	** %	650,759.75	3,030,759.75	3,681,519.50
02/01/2026			606,469.35	606,469.35	
08/01/2026	2,550,000	** %	606,469.35	3,156,469.35	3,762,938.70
02/01/2027			559,011.15	559,011.15	
08/01/2027	2,725,000	** %	559,011.15	3,284,011.15	3,843,022.30
02/01/2028			508,297.60	508,297.60	
08/01/2028	2,917,000	** %	508,297.60	3,425,297.60	3,933,595.20
02/01/2029			454,010.45	454,010.45	
08/01/2029	3,113,000	4.090%	454,010.45	3,567,010.45	4,021,020.90
02/01/2030			390,349.60	390,349.60	
08/01/2030	3,328,000	4.090%	390,349.60	3,718,349.60	4,108,699.20
02/01/2031			322,292.00	322,292.00	
08/01/2031	3,547,000	4.090%	322,292.00	3,869,292.00	4,191,584.00
02/01/2032			249,755.85	249,755.85	
08/01/2032	3,803,000	4.090%	249,755.85	4,052,755.85	4,302,511.70
02/01/2033			171,984.50	171,984.50	
08/01/2033	4,066,000	4.090%	171,984.50	4,237,984.50	4,409,969.00
02/01/2034			88,834.80	88,834.80	
08/01/2034	4,344,000	4.090%	88,834.80	4,432,834.80	4,521,669.60
	48,906,000		25,657,470.87	74,563,470.87	74,563,470.87

EXHIBIT B

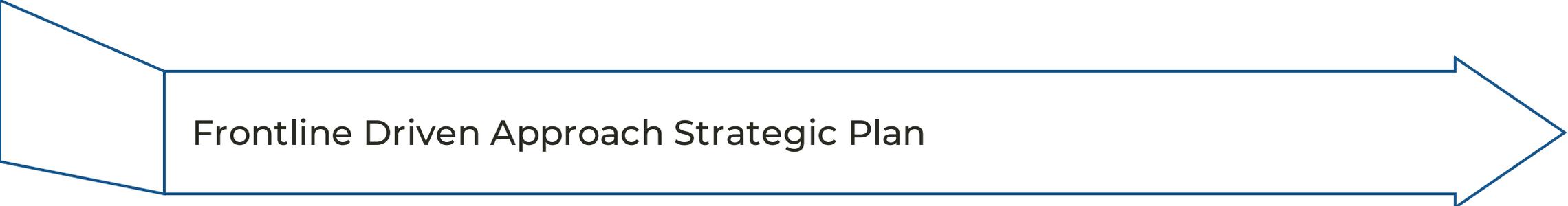
TAX RATE FOR FISCAL YEAR 2023-2024

\$.016044 per \$100 of assessed value



Report

Emergency Department Projects



Frontline Driven Approach Strategic Plan



60+ Projects (Including Quality and Operational)



Nearly 50% of Projects Completed

Objective	Goal	Initiatives/Tactics	Responsible	Estimated completion	Jan	Feb	Mar	Apr	May	Jun	Jul
ED Workflow Efficiency	Admission Criteria	Collaborate with dept. chairs	Tu	Q3 2023	In Progress	In Progress	In Progress	In Progress	In Progress	In Progress	DONE!
	ED Surge Plan (CEO satisfaction)	Develop guidelines, criteria, floor plan map, educate staff	Tu	Feb-23	In Progress	In Progress	In Progress	DONE!	DONE!	DONE!	DONE!
	ED clerk paging consults	Relying on ED clerk to page consults	Van Dyk	Q2 2023	In Progress	In Progress	In Progress	DONE!	DONE!	DONE!	DONE!
	Improve intradepartmental communication	Cerner Secure messaging - clinical educators help get nursing onboard, GME to get residents, add to provider onboarding	Phil, Stanley, Van Dyk, Tu	Q3 2023	In Progress	In Progress	In Progress	DONE!	DONE!	DONE!	DONE!
	CT Utilization	Developing guidelines and strategies to improve utilization of a limited resource	Guzman and Van Dyk	Q4 2023	Not yet started	Not yet started	Not yet started	Not yet started	Not yet started	In Progress	In Progress
	CEO Satisfaction - Quantify quality reporting from ED to KH	Quality dashboard tool for reporting ed centered metrics, to be sent to prostaff monthly	Tu, Renee, Michelle Peterson, OC	Jan-23	DONE!	DONE!	DONE!	DONE!	DONE!	DONE!	DONE!
Academics	Best practice primer for (clinical) faculty	Standardize guidelines and education. Collaborate with Dr. Stanley	Tu, Stanley	Jun-23	In Progress	DONE!	DONE!	DONE!	DONE!	DONE!	DONE!
	Quantify Quality projects for GME quality position	Show number of projects before and after position was created. Engage with residents from all programs	Van Dyk	ongoing	In Progress	In Progress	DONE!	DONE!	DONE!	DONE!	DONE!
	ACGME Survey Improvement in compliance goal is 85%	Increase participation by residents and providers	Oldroyd	Oct-23	Not yet started	In Progress	In Progress	In Progress	In Progress	In Progress	In Progress
	Achieve continued accreditation for EM residency after ACGME site visit	Engage with project management to improve staffing, workflows, supplies and workstations in the ED to improve resident scoring on survey re:nonphysician obligations	Winston	Sep-23	Not yet started	Not yet started	In Progress	In Progress	In Progress	In Progress	In Progress
Informatics	e-Rx for all resident by 1/1 deadline	Working with ISS	Alexeeva	Jan-23	DONE!	DONE!	DONE!	DONE!	DONE!	DONE!	DONE!
	DC paperwork process	Trial in zone 6 first, work with ISS to solve printer problem, clinical educators to push out	Alexeeva, Tu	Feb-23	On Hold	On Hold	In Progress	In Progress	In Progress	In Progress	DONE!
	Implement med rec	Working with clinical educators for nursing education, May need to bring med historians back (consider using registration)	Alexeeva, Tu	Mar-23	On Hold	On Hold	On Hold	Not Possible Now	Not Possible Now	Not Possible Now	Not Possible Now
	Progress notes in ED	Work with ISS to build progress note template. Guidelines (Q8 hours, include new PE, sign @ end of shift, last team finalizes original note). Add to orientation manual	Alexeeva, Tu	Feb-23	In Progress	In Progress	DONE!	DONE!	DONE!	DONE!	DONE!
	Procedure Note	separate procedure note	Alexeeva, Tu	May-23	Not yet started	In Progress	In Progress	In Progress	In Progress	In Progress	DONE!
	DMV and animal bites reporting	Standardized powerform for animal bites and automate report of LOC and bites to DMV and county public health	Alexeeva, Tu	May-23	Not yet started	Not yet started	Not yet started	Not yet started	Not yet started	In Progress	In Progress
	New note for Pharmacy Calls	Collaborate with ISS for dot phrase / building new note	Alexeeva	Feb-23	In Progress	In Progress	In Progress	In Progress	In Progress	In Progress	DONE!
Stroke	(Care pathway - CEO satisfaction) Transition to TNK from TPA	Use of TNK for Tier 1 Stroke Alerts	Oldroyd	Apr-23	In Progress	In Progress	DONE!	DONE!	DONE!	DONE!	DONE!
	Improve compliance with NIH scores	Simplifying how the score is inputted	Oldroyd	ongoing		In Progress	In Progress	In Progress	In Progress	In Progress	In Progress

Recruiting Full-time GME Quality Director



Dr. Dries Van Dyk

Developing/Connecting residents to quality projects

15 vs 7 total projects started

Admissions Criteria Guidelines



Dr. Khoa Tu

MEC Subcommittee

Last revision 2017

CMS core measures



**Kaweah Health Medical Center (EM)
Quality and Performance Dashboard
(1/1/2023 - 3/31/2023)**

Regular Measures

Measure	Number Measure Met	Number Measure Not Met	Performance Rate	Registry Performance Rate	CMS Benchmark*
ECPR 39: Avoid Head CT for Patients with Uncomplicated Syncope	222	0	100.0%	👉 97.6%	99.7%
ECPR 46**: Avoidance of Opiates for Low Back Pain or Migraines	250	0	100.0%	👉 96.9%	99.9%
ECPR 51: Naloxone Discharge Rx after Opioid Poisoning or Overdose	10	23	30.3%	👉 54.8%	
ECPR 52: Appropriate Treatment of Psychosis and Agitation in the ED	49	48	50.5%	👉 58.3%	
ECPR 56: Initiation of MAT and Referral to Outpatient Opioid Treatment	1	5	16.7%	👉 69.4%	
ECPR 58: Patient-Reported Understanding of Diagnosis and Care Plan After ED Visit	673	197	77.4%	👉 79.7%	
HCPR 24: Appropriate Utilization of Vancomycin for Cellulitis	58	74	43.9%	👉 82.1%	
MIPS 65**: Appropriate Treatment for Upper Respiratory Infection (URI)	289	0	100.0%	👉 98.9%	
MIPS 93**: Otitis Externa – Avoidance of Systemic Antibiotics	1	0	100.0%	👉 91.8%	99.0%
MIPS 116**: Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis	98	0	100.0%	👉 96.6%	
MIPS 187**: tPA for CVA	5	0	100.0%	👉 82.4%	99.4%
MIPS 254**: Ultrasound Obtained in Pregnant Abdominal Pain/Vaginal Bleeding P..	77	0	100.0%	👉 99.0%	98.9%

Dr. Will Pho

100% compliance for past 3 months

ED Operational Leadership Team



**Dr.
Alexeeva**

Informatics AMD
and EM Assistant
Program Director



**Dr.
Carstens**

Physician
Engagement



**Dr.
Hipskind**

ED US and
fellowship Director



Dr. Kahwaji

Vice Chair, Peer
Review,
EMS/Transfer
Center Dir, and
Finance AMD



Dr. Liu

Director of
Employee Health
and Advance
Practice Provider
AMD



Dr. Oldroyd

Stroke Program
Director and EM
Program Director



**Philip
Hehn**

Lead Advance
Practice Provider



Dr. Pho

Quality AMD -
Trauma, Sepsis and
CMS Quality

ED Operational Leadership Team



Dr. Seng

Regional Director and Former
Medical Director



Dr. Sukhija

Patient Experience AMD



Dr. Tu

Department Chair and Medical
Director



Dr. Van Dyk

Director of Quality projects and
Scribe AMD



Dr. Winston

Designated Institutional Officer



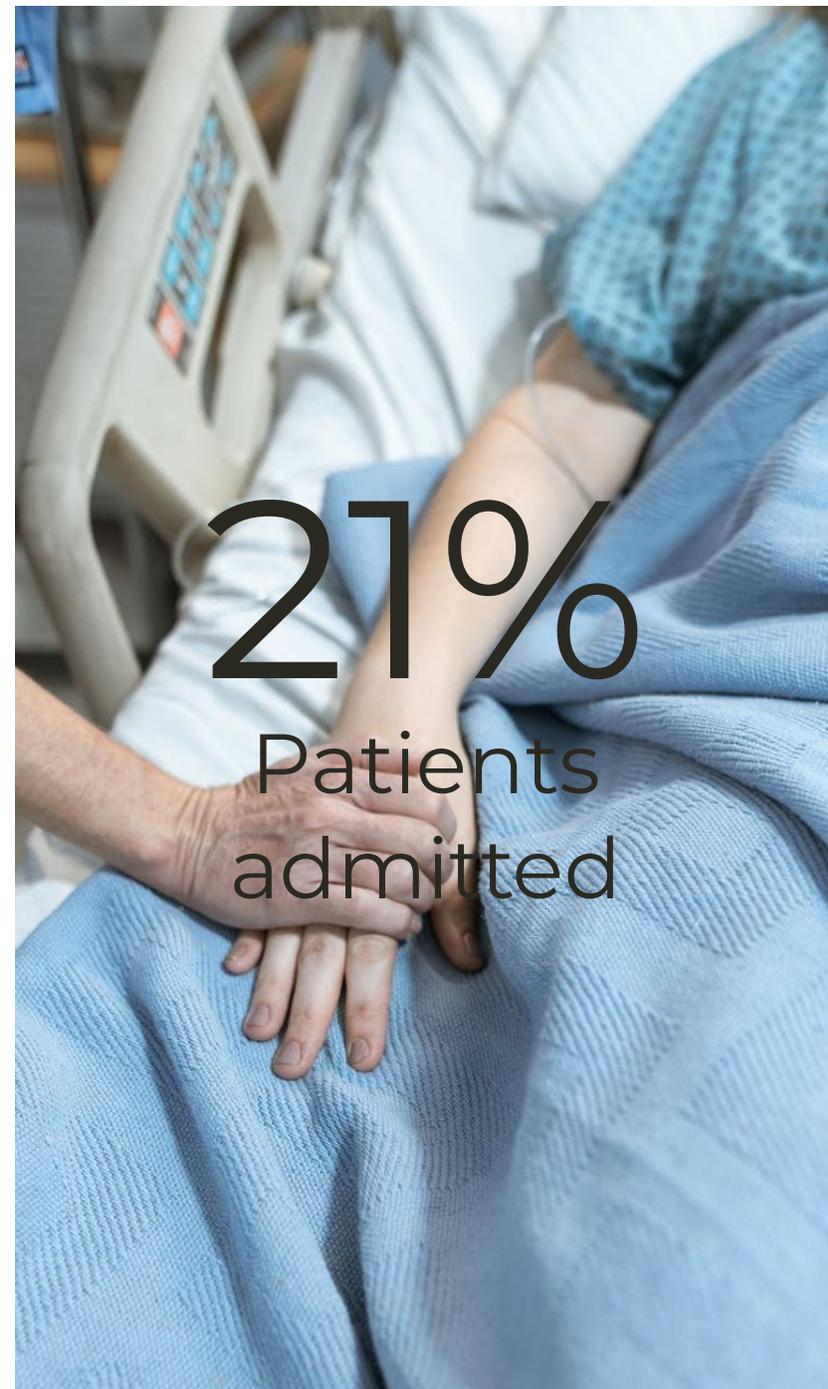
Dr. Guzman

Advocacy AMD, Director of Street
Medicine, Medical Student
Rotation Director

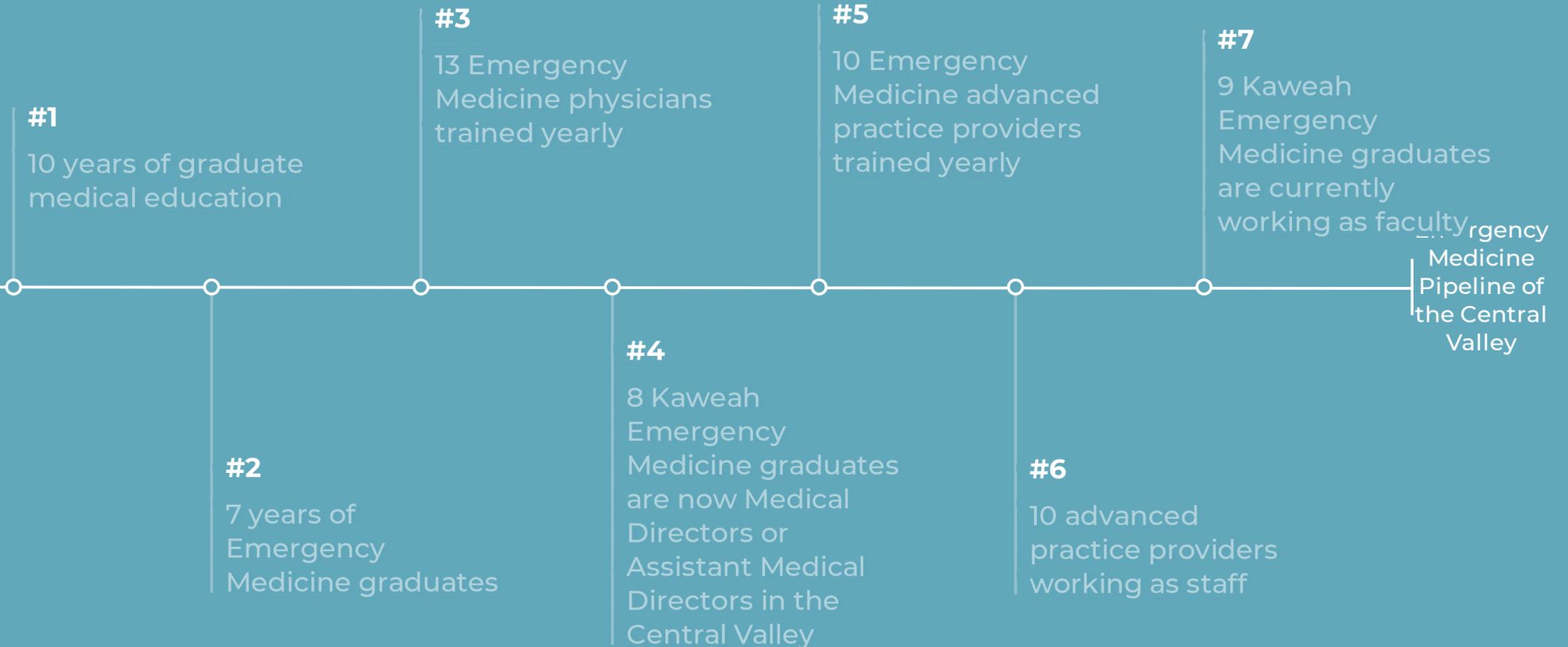
260
Patients per day

7800
Patients per
month

21%
Patients
admitted



Graduate Medical Education



CFO Financial Report

Preliminary Year End Financials

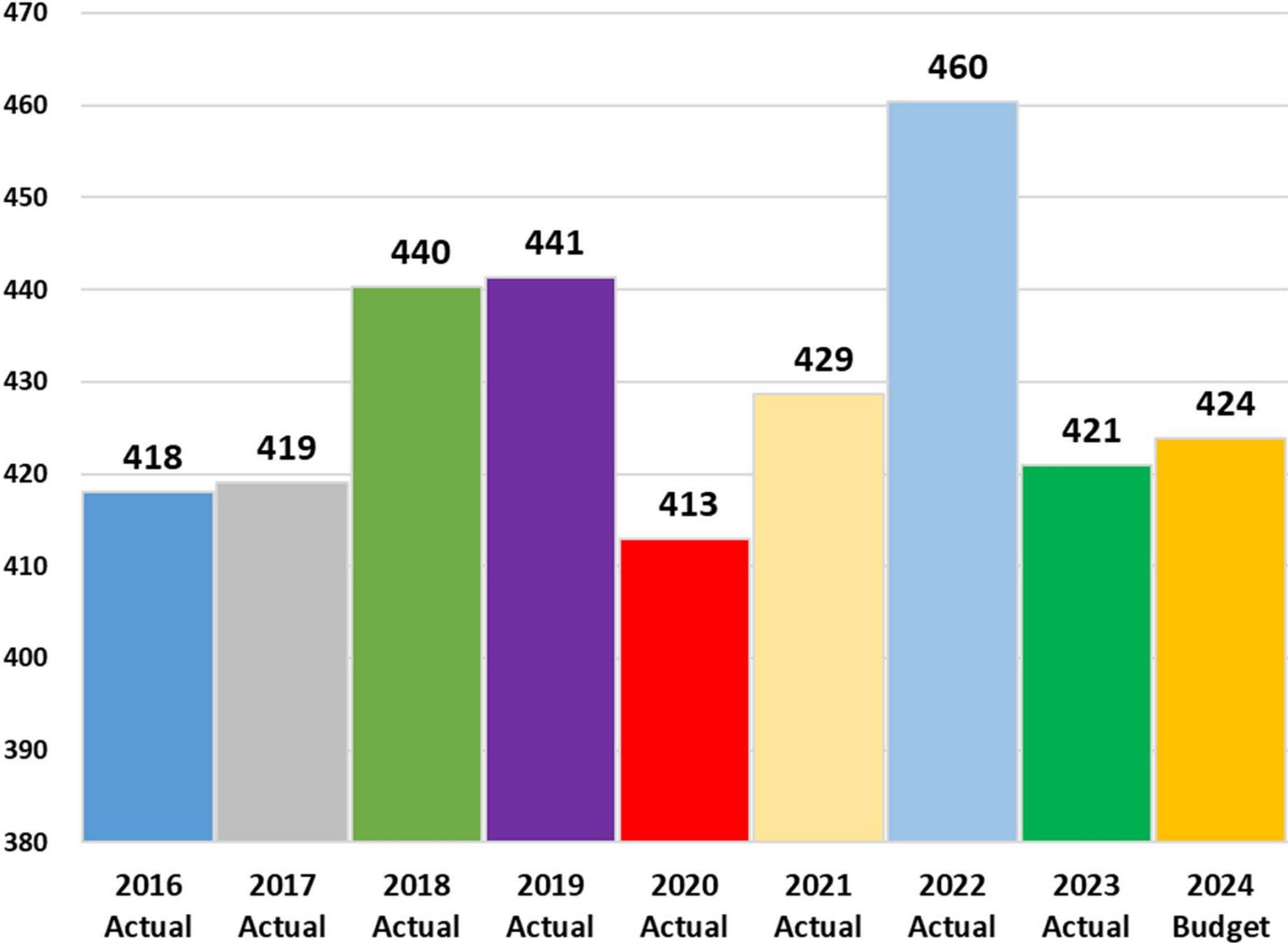
Month Ending June 2023



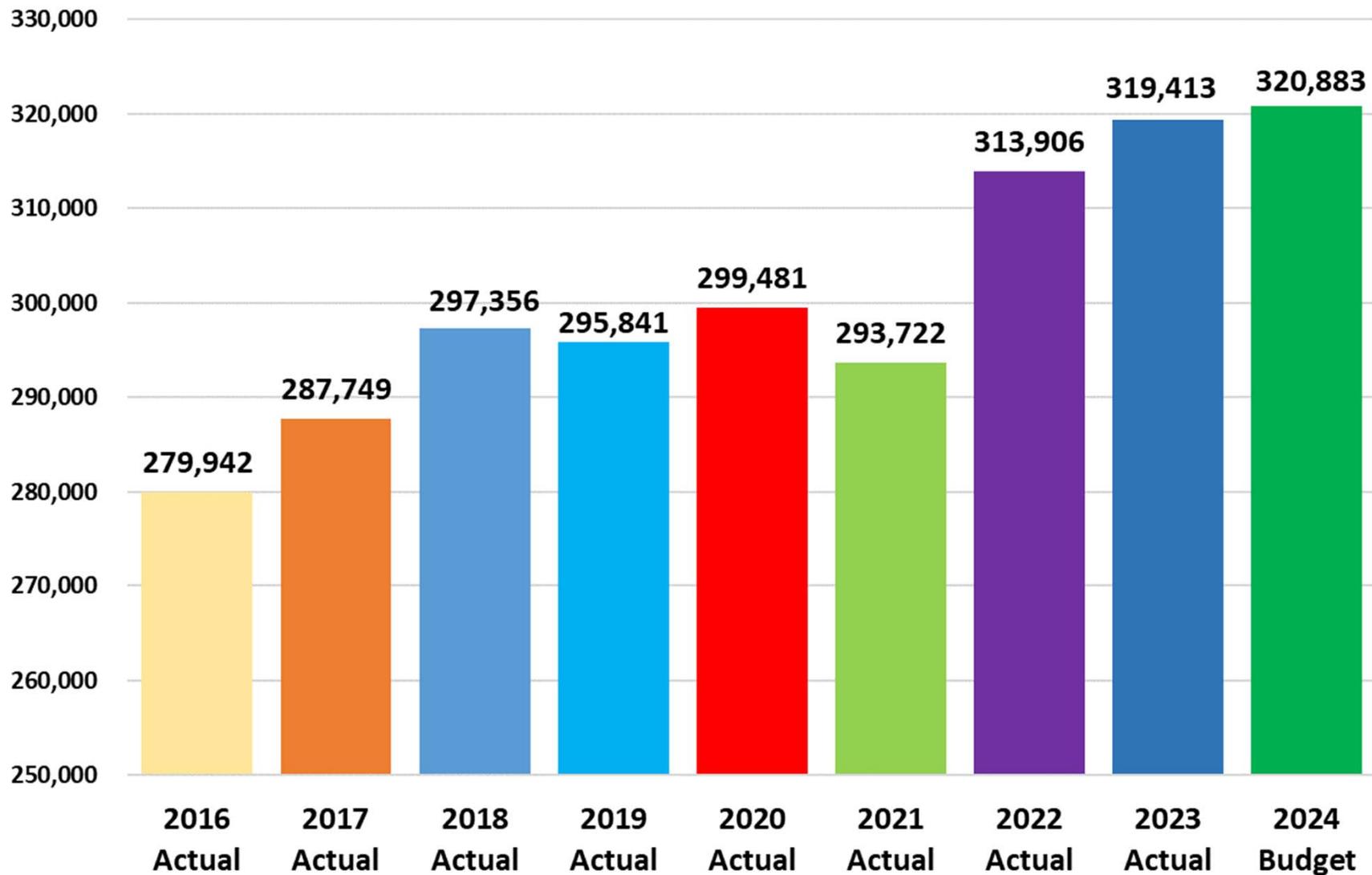
[kawahhealth.org](https://www.kawahhealth.org)



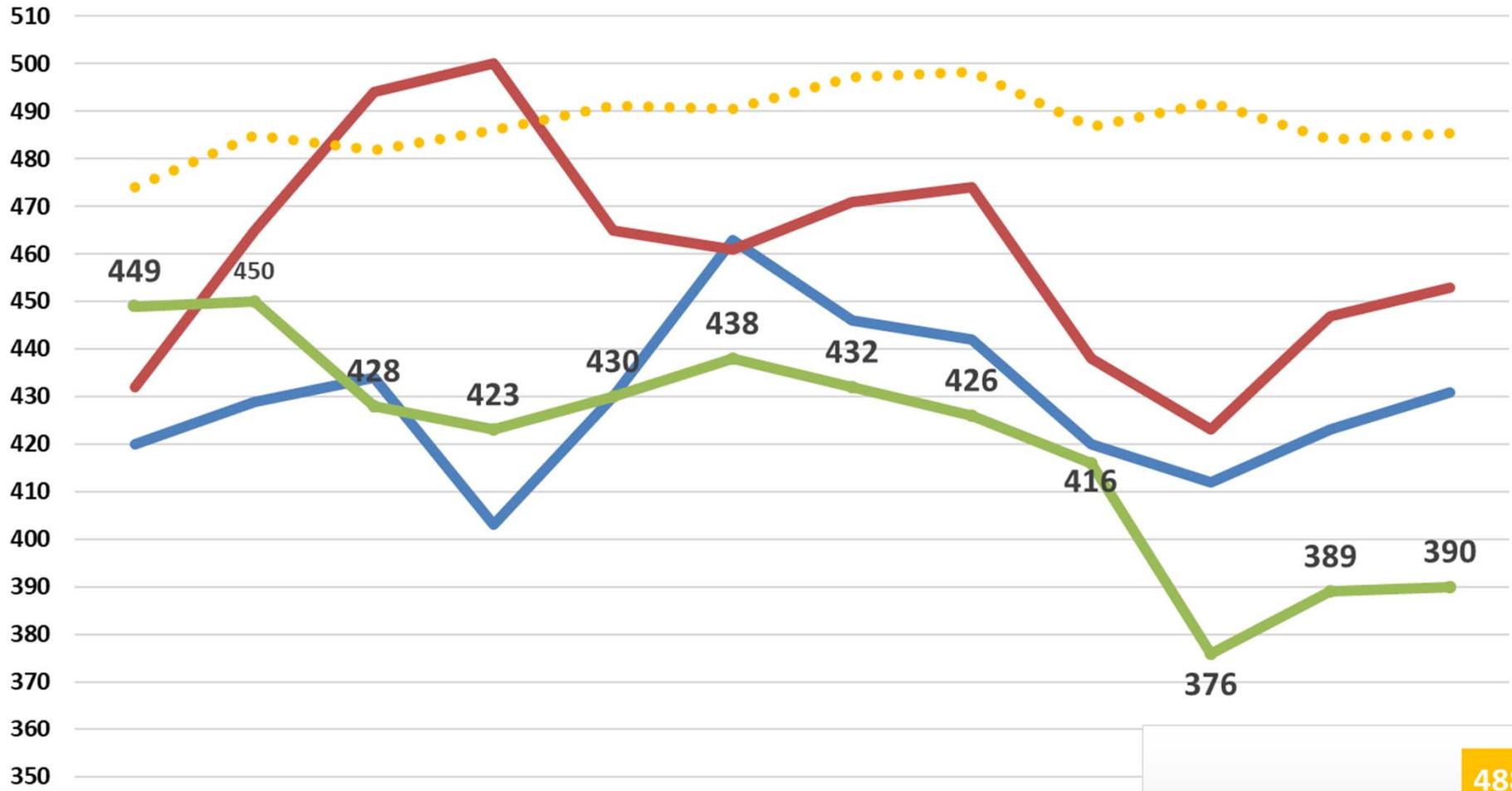
Year over Year Average Daily Census



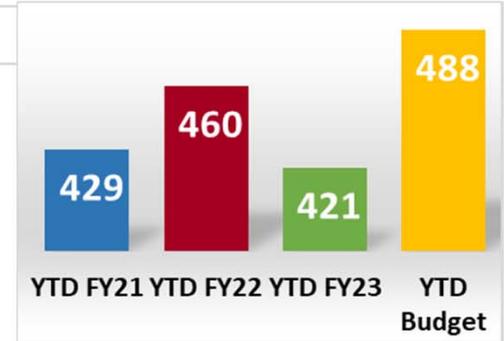
Year over Year Adjusted Patient Days



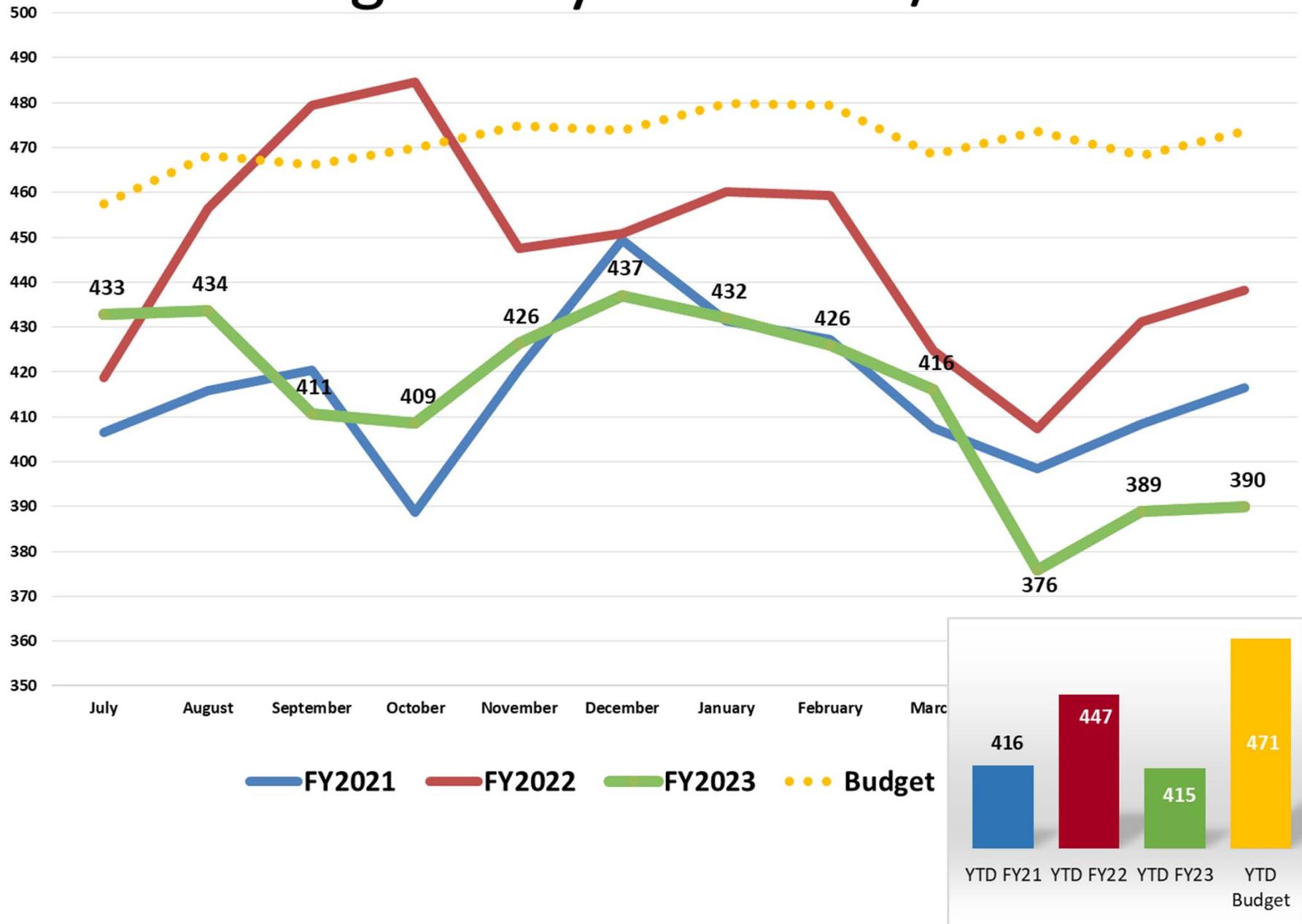
Average Daily Census



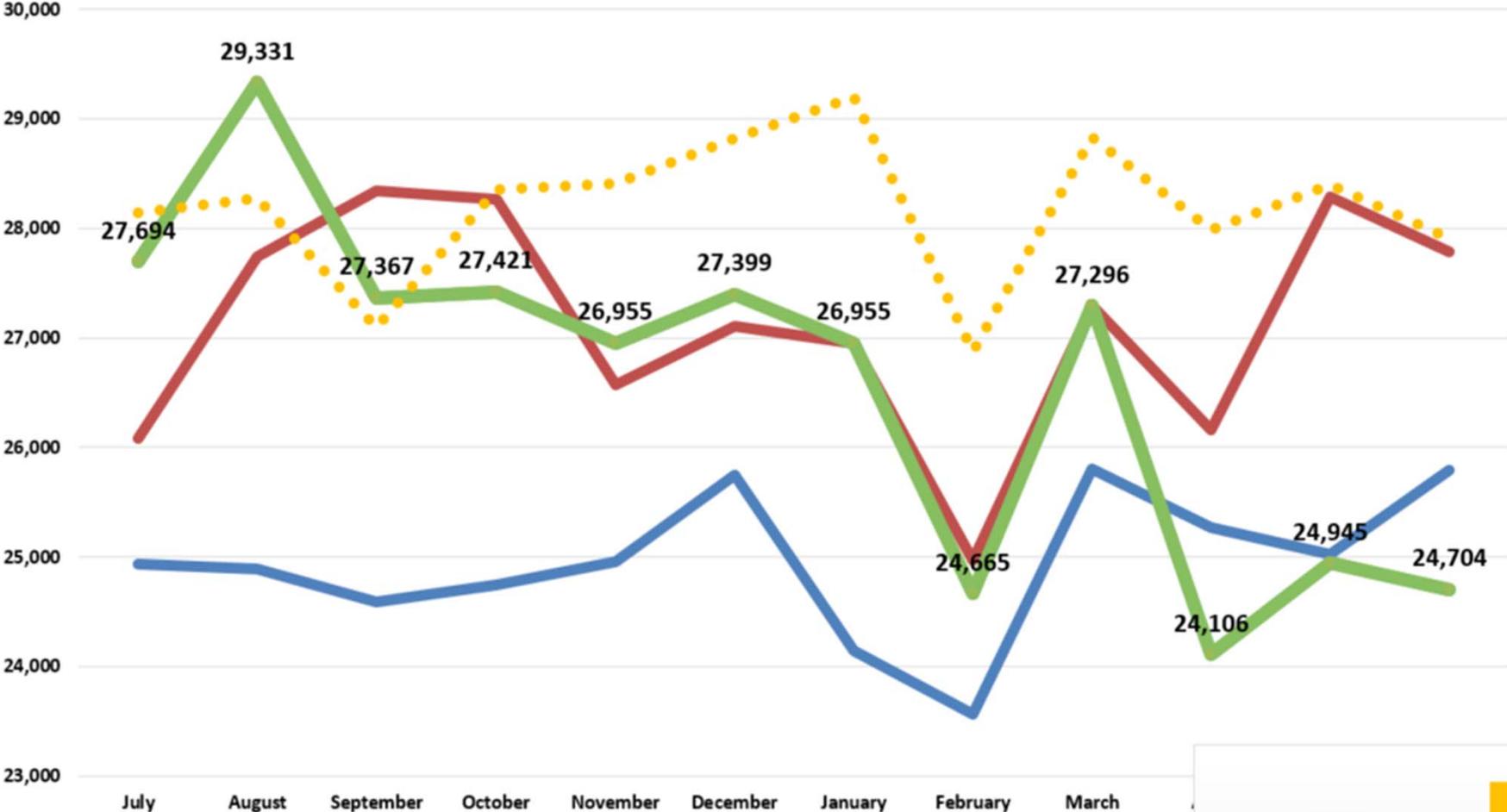
July August September October November December January February March
 — FY2021 — FY2022 — FY2023 ••• Budget



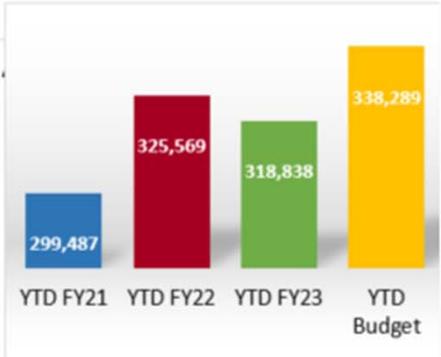
Average Daily Census w/o TCS



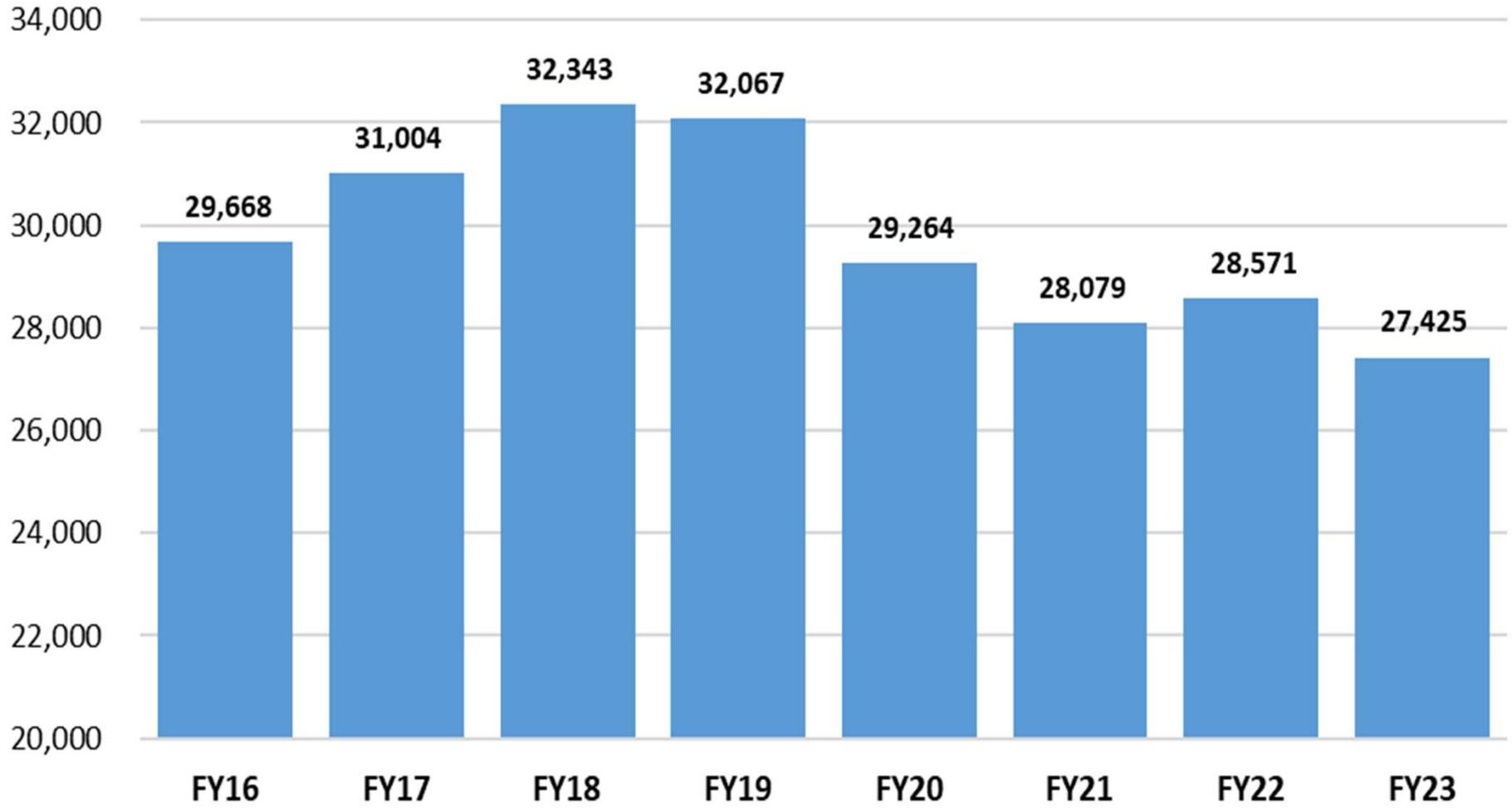
Adjusted Patient Days



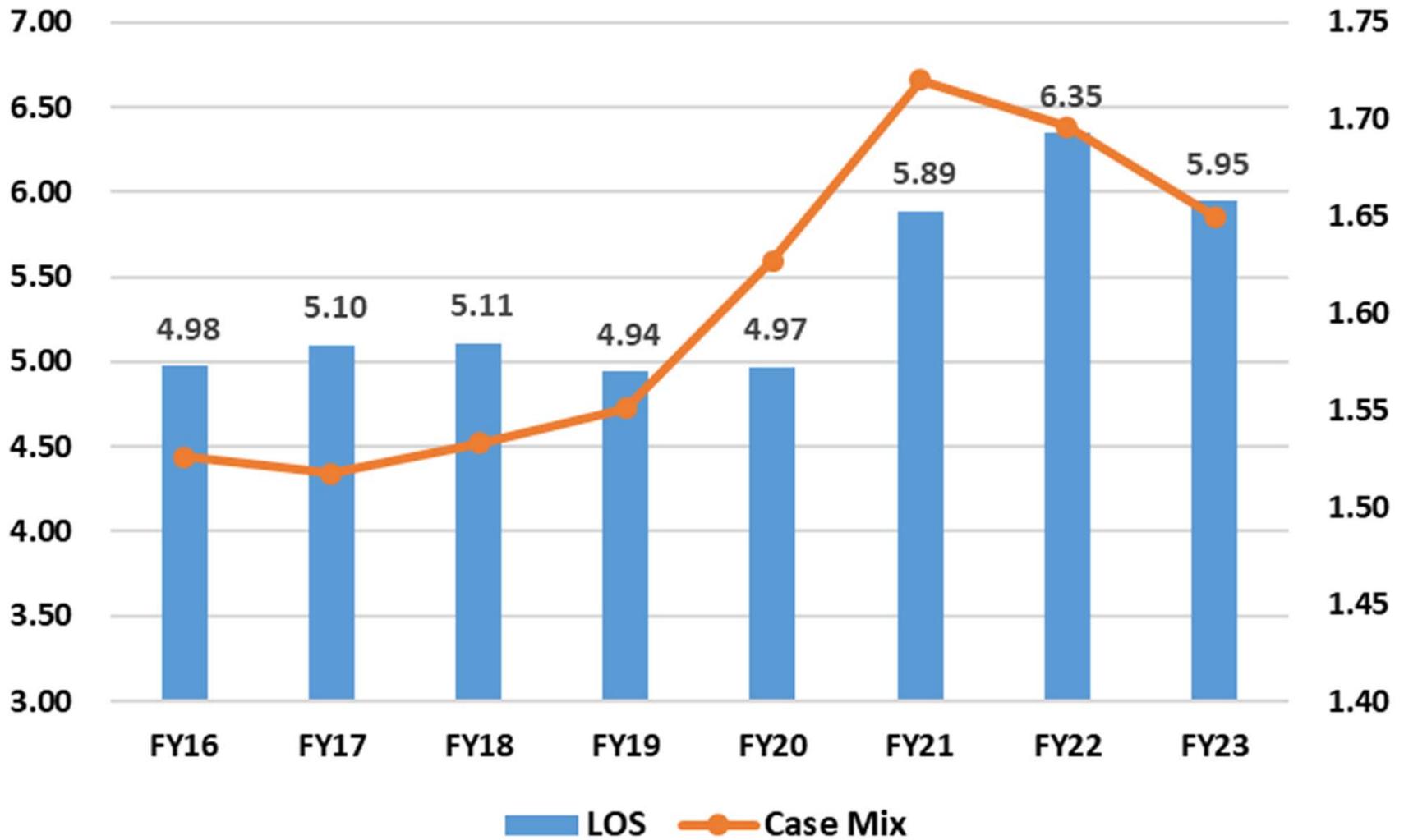
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



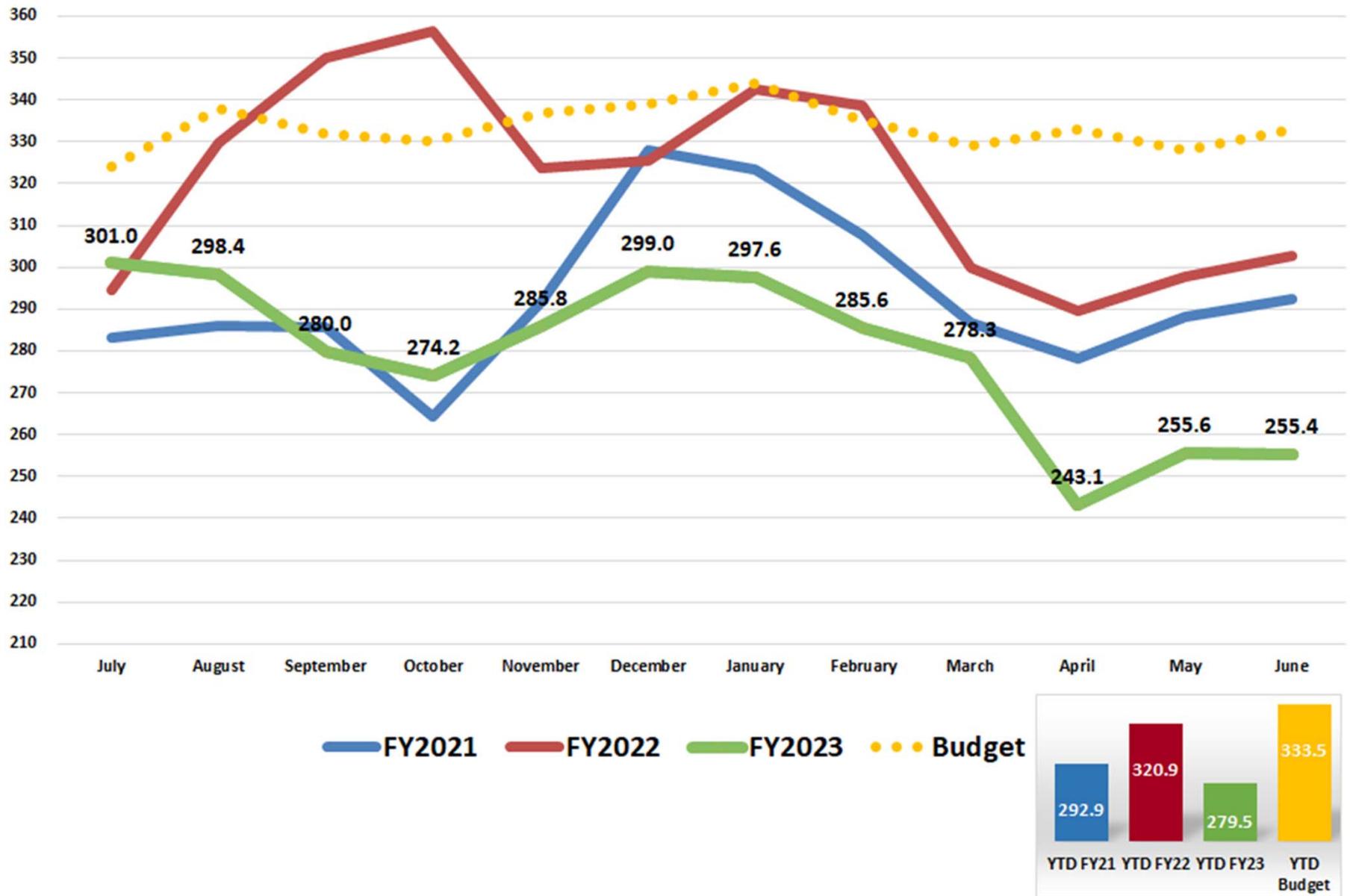
Admissions



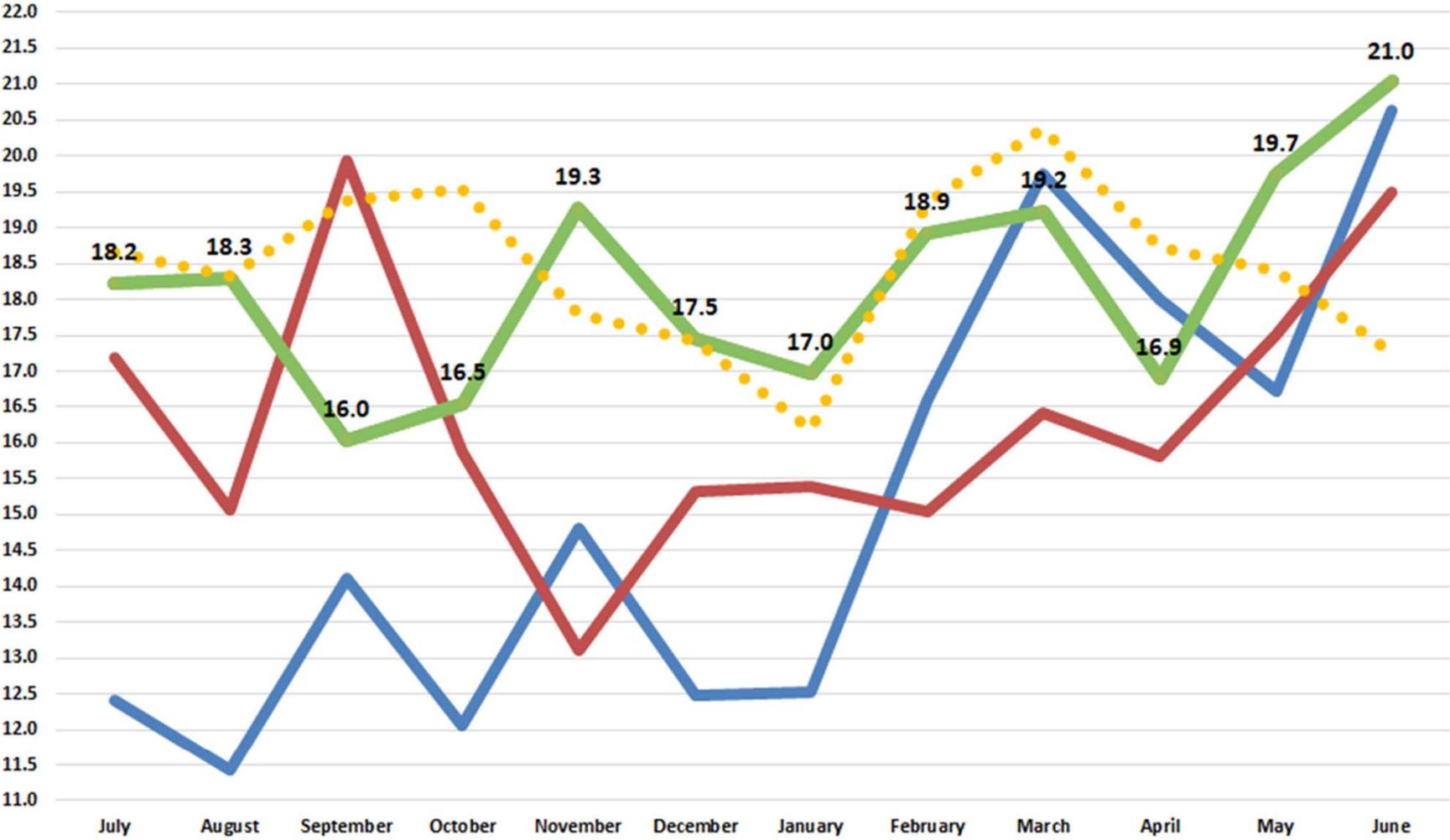
Trended Length of Stay and Case Mix Index



Medical Center (Avg Patients Per Day)



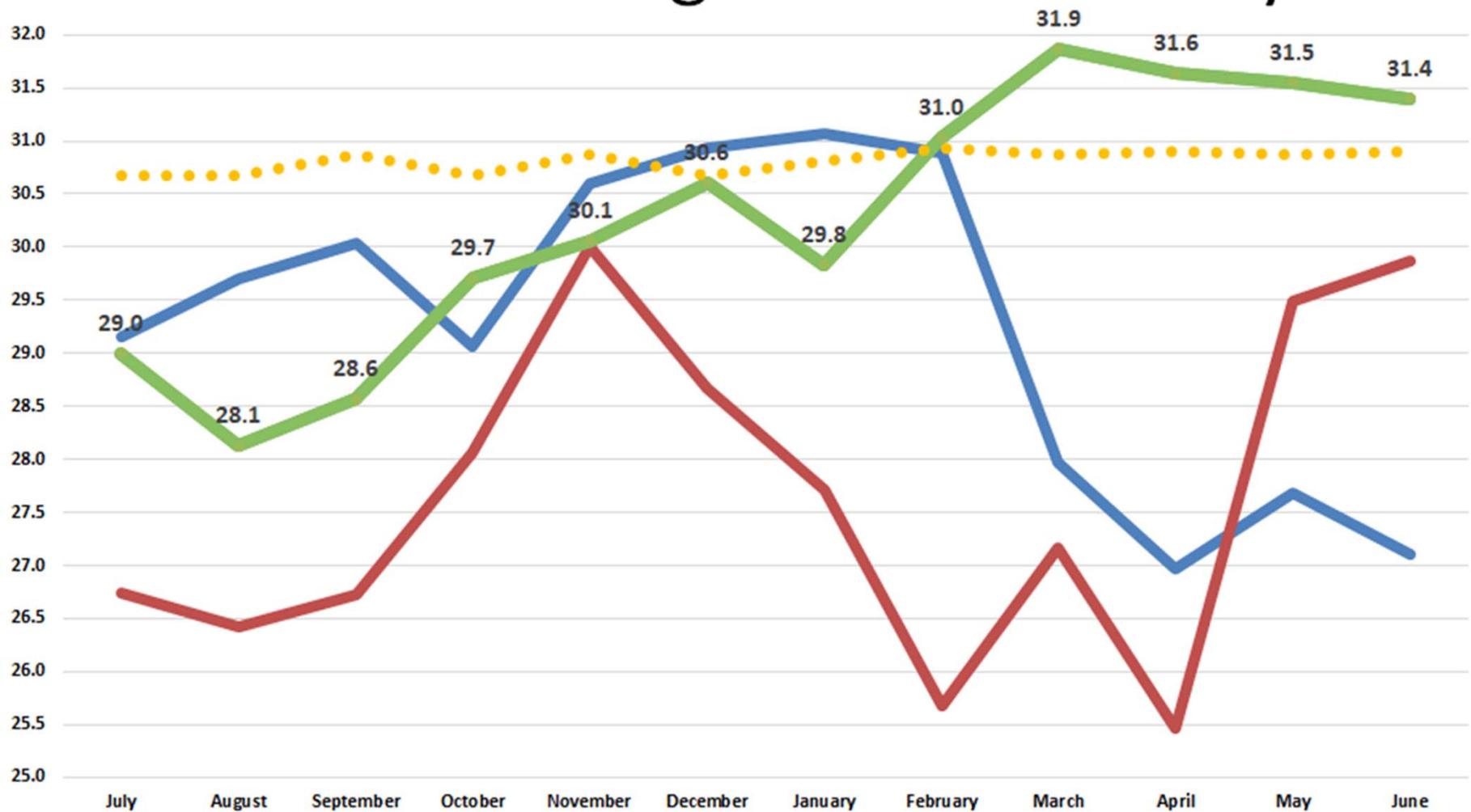
Rehabilitation Hospital - Avg Patients Per Day



— FY2021
 — FY2022
 — FY2023
 ●●● Budget



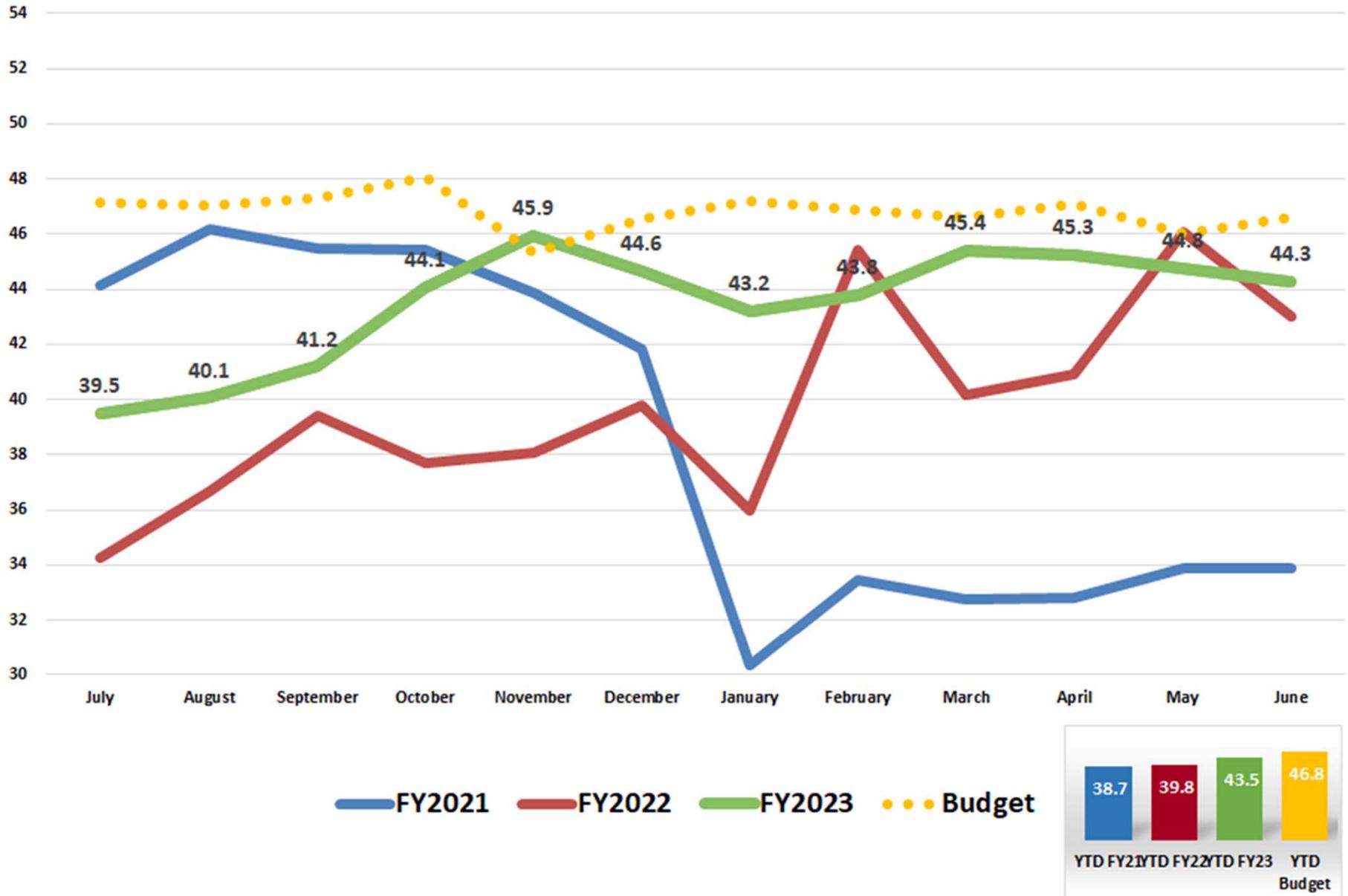
Sub-Acute - Avg Patients Per Day



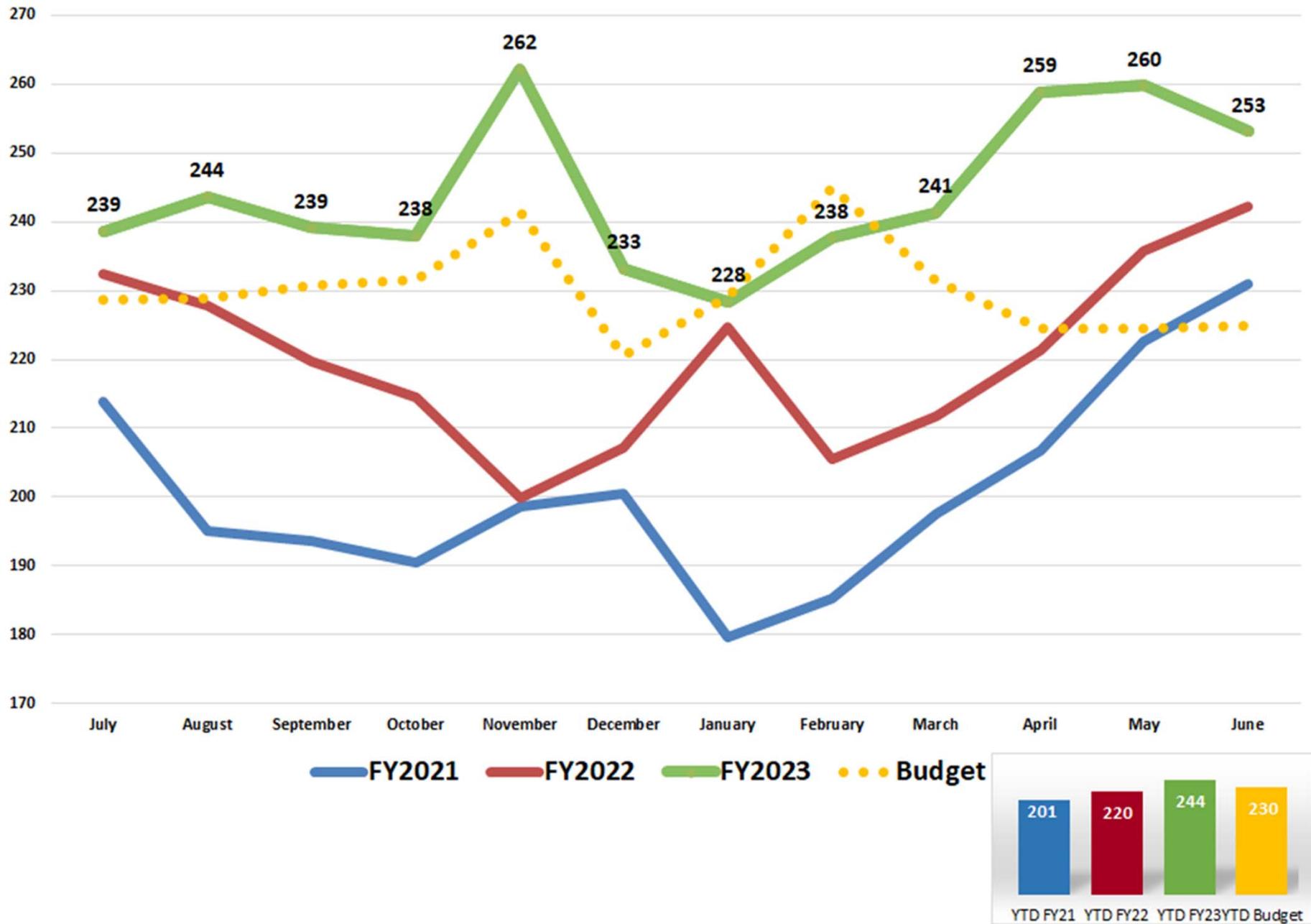
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



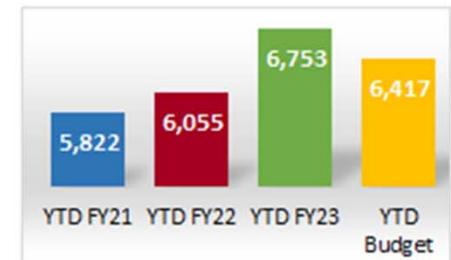
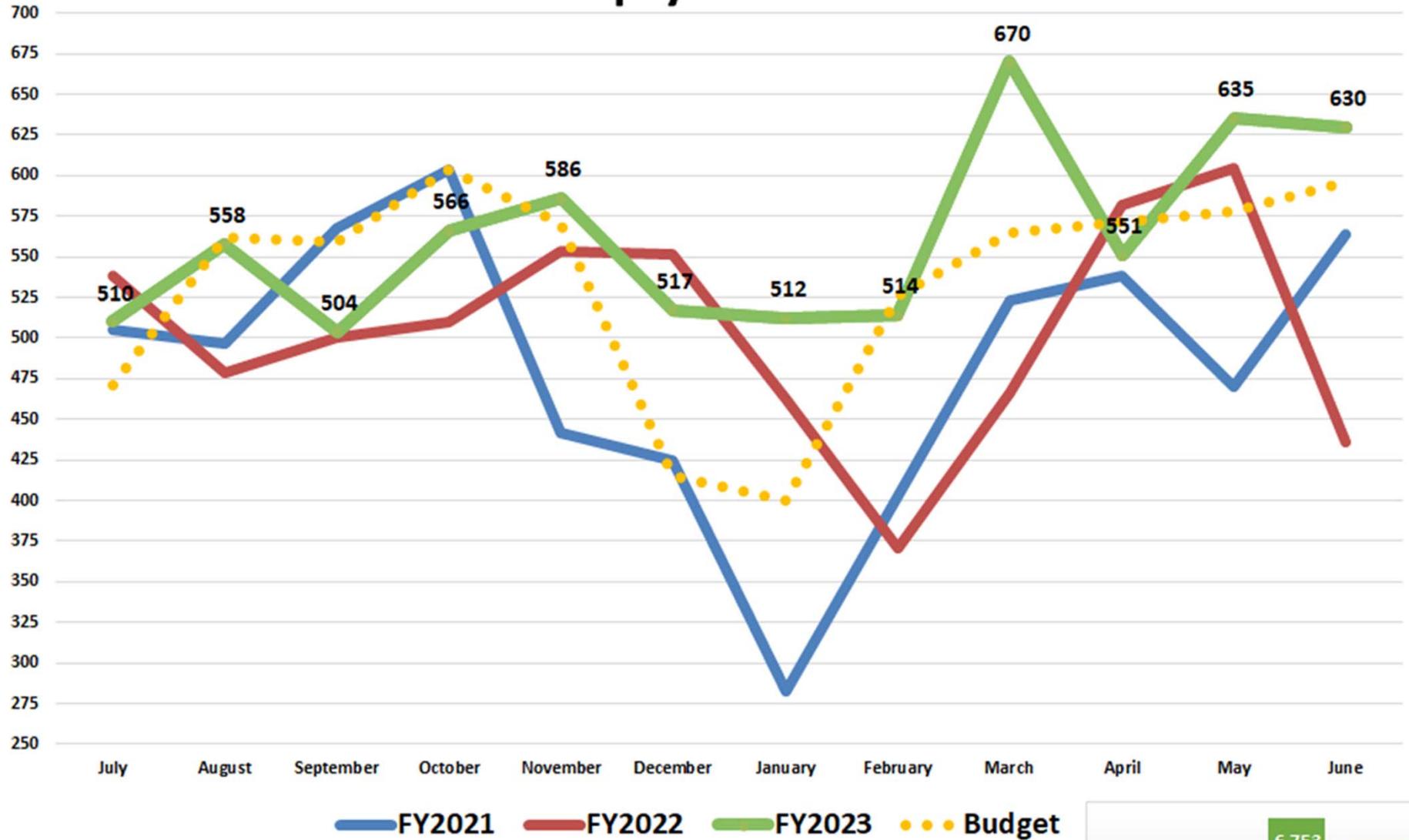
Acute I/P Psych (Avg Patients Per Day)



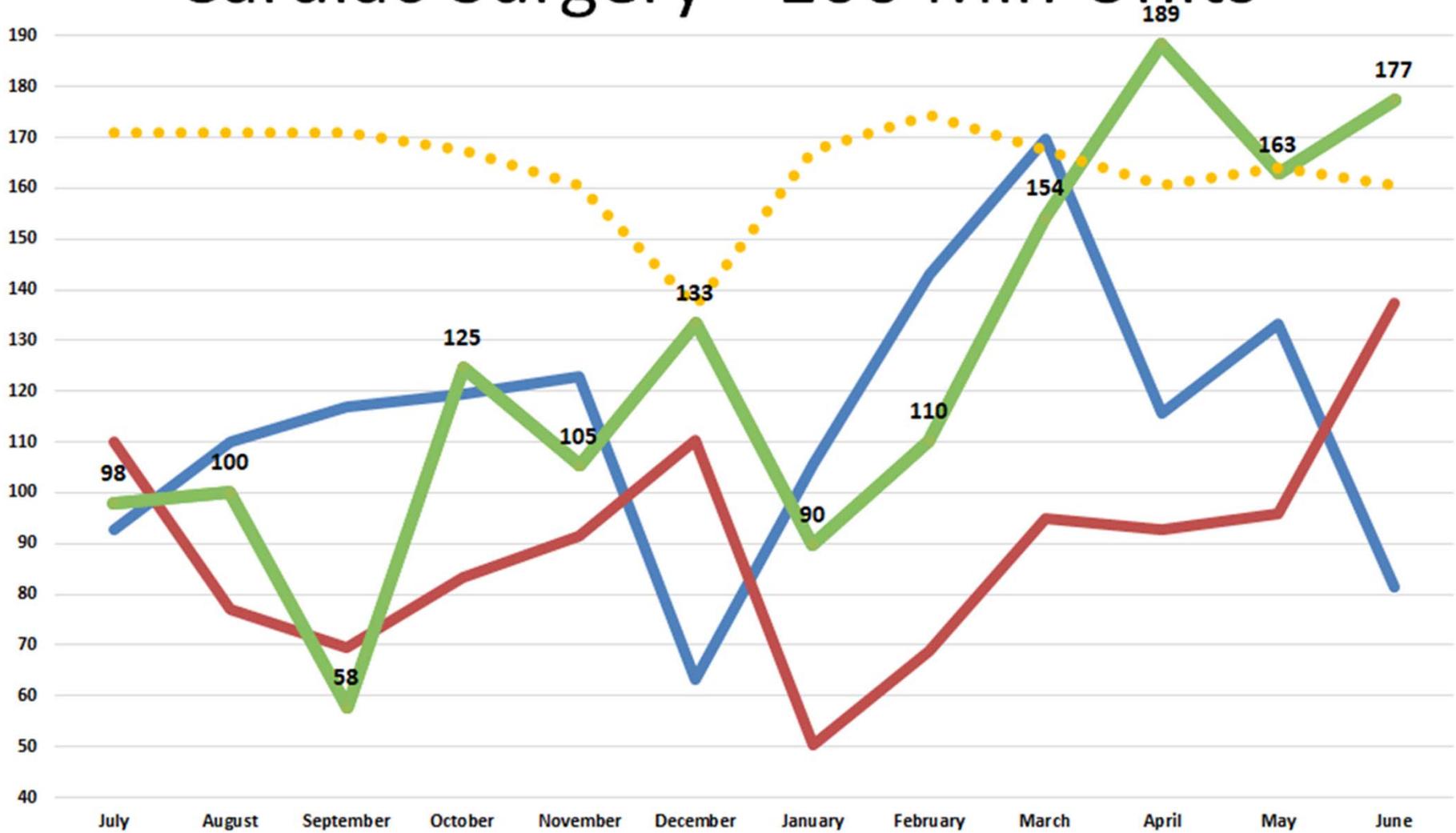
ED - Avg Treated Per Day



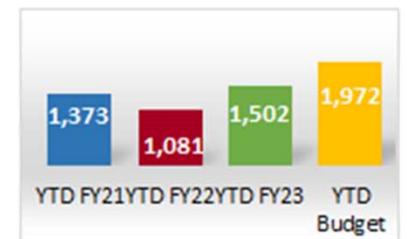
Endoscopy Procedures



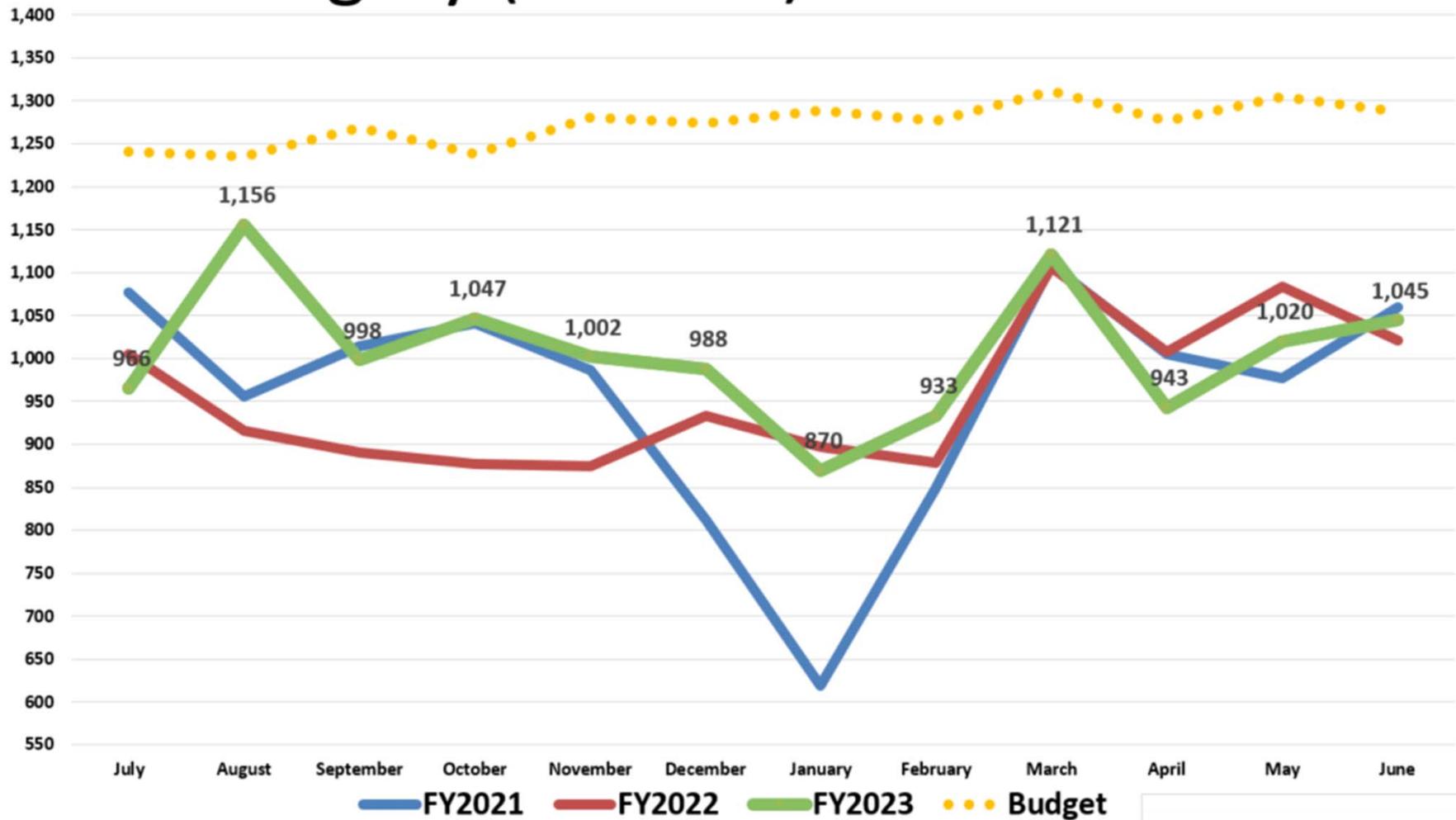
Cardiac Surgery - 100 Min Units



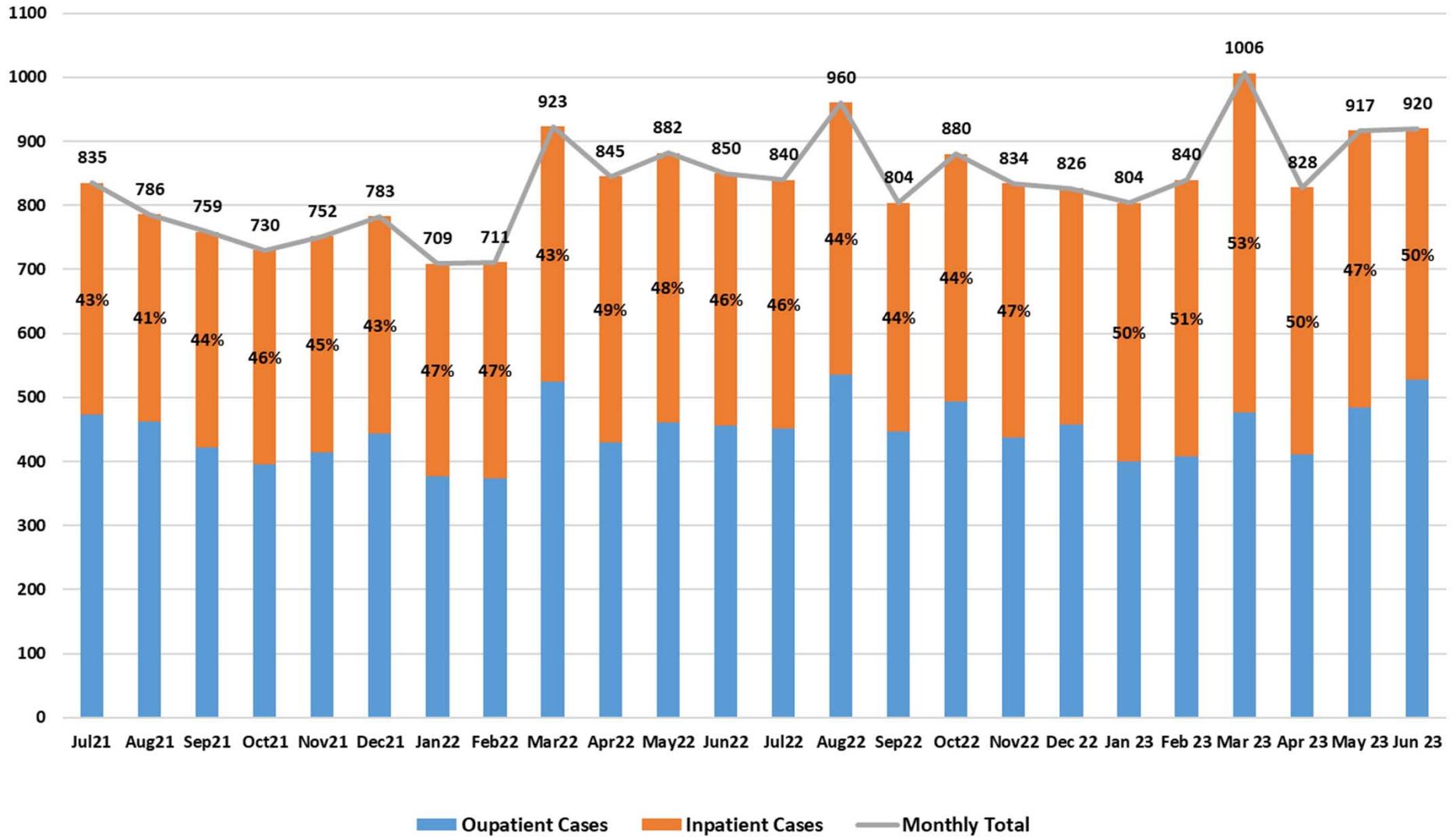
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



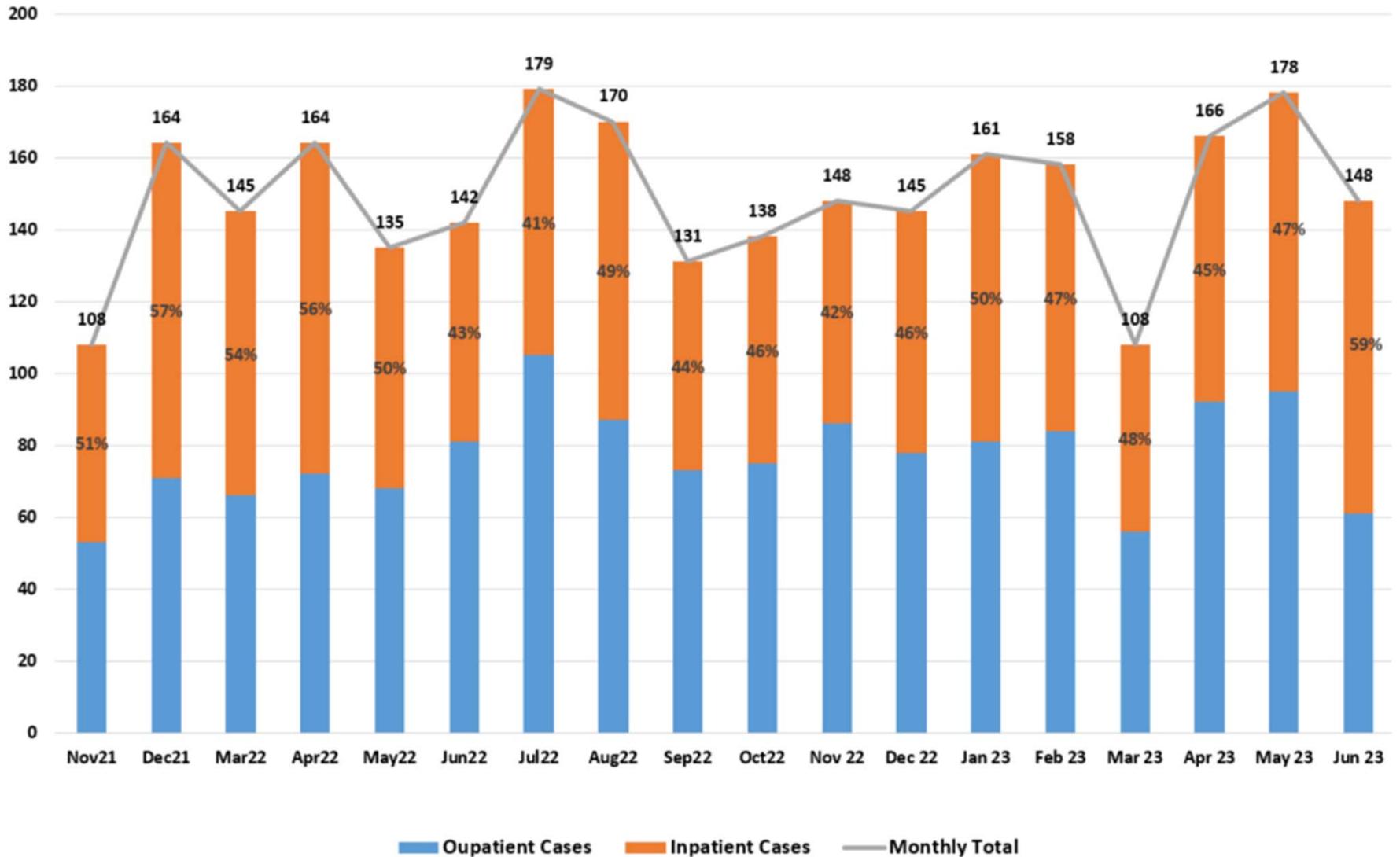
Surgery (IP & OP) – 100 Min Units



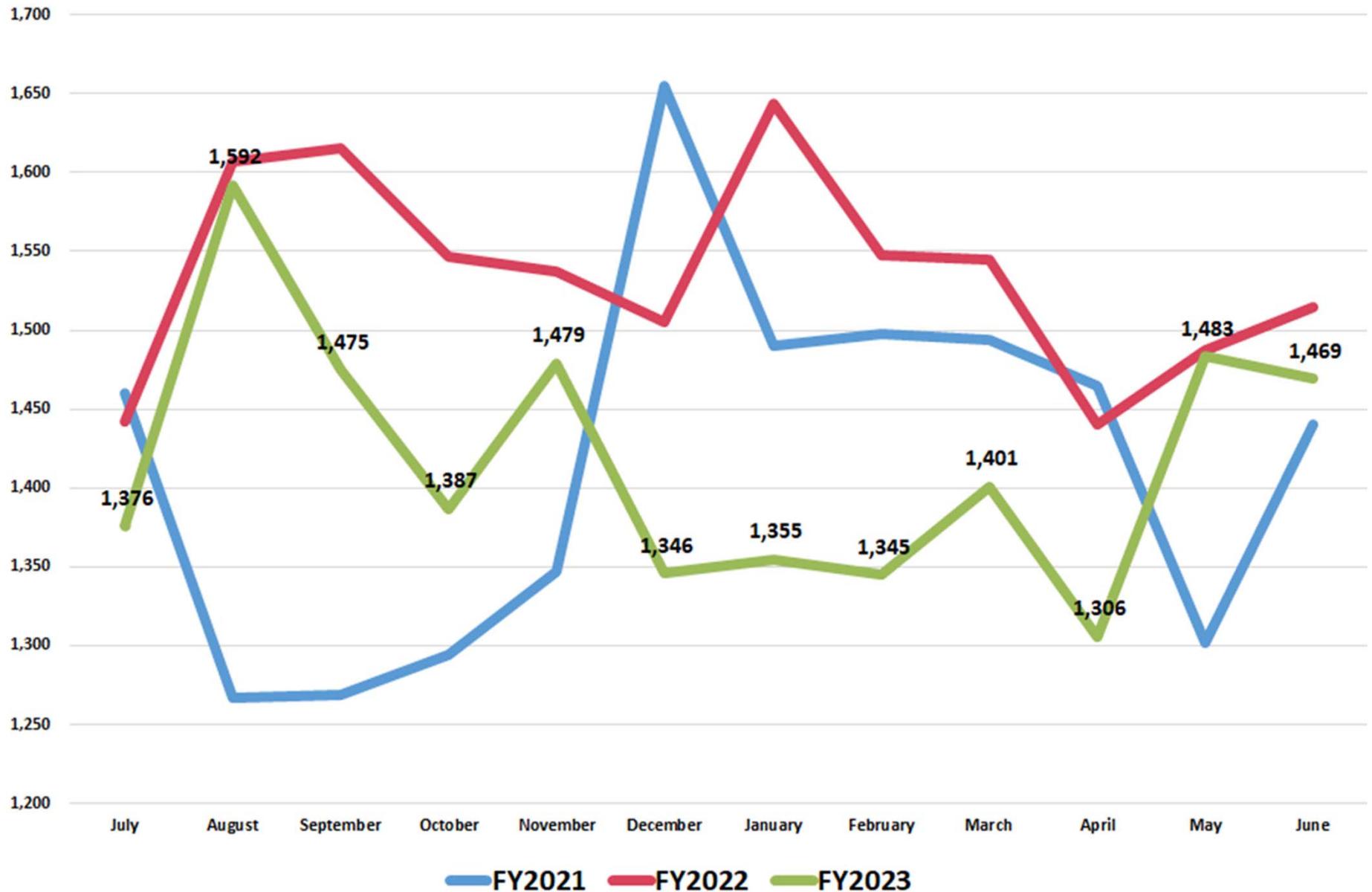
Surgery Cases (IP & OP)



Cath Lab Patients (IP & OP)



Outpatient Registrations Per Day



Statistical Results – Fiscal Year Comparison (June)

	Actual Results			Budget	Budget Variance	
	June 2022	June 2023	% Change	June 2023	Change	% Change
Average Daily Census	453	390	(13.9%)	482	(91)	(19.0%)
KDHCD Patient Days:						
Medical Center	9,085	7,662	(15.7%)	9,596	(1,934)	(20.2%)
Acute I/P Psych	1,290	1,328	2.9%	1,560	(232)	(14.9%)
Sub-Acute	896	942	5.1%	927	15	1.6%
Rehab	585	631	7.9%	518	113	21.8%
TCS-Ortho	338	370	9.5%	455	(85)	(18.7%)
TCS	446	0	(100.0%)	352	(352)	(100.0%)
NICU	419	294	(29.8%)	510	(216)	(42.4%)
Nursery	544	481	(11.6%)	533	(52)	(9.8%)
Total KDHCD Patient Days	13,603	11,708	(13.9%)	14,451	(2,743)	(19.0%)
Total Outpatient Volume	45,450	44,070	(3.0%)	46,593	(2,523)	(5.4%)

Statistical Results – Fiscal Year Comparison (Jul-June)

	Actual Results			Budget	Budget Variance	
	FYTD 2022	FYTD 2023	% Change	FYTD 2023	Change	% Change
Average Daily Census	460	420	(8.7%)	484	(64)	(13.2%)
KDHCD Patient Days:						
Medical Center	117,111	102,052	(12.9%)	117,240	(15,188)	(13.0%)
Acute I/P Psych	14,505	15,879	9.5%	18,680	(2,801)	(15.0%)
Sub-Acute	10,103	11,051	9.4%	10,882	169	1.6%
Rehab	5,967	6,647	11.4%	6,733	(86)	(1.3%)
TCS-Ortho	4,201	4,625	10.1%	5,110	(485)	(9.5%)
TCS	4,990	2,115	(57.6%)	6,031	(3,916)	(64.9%)
NICU	5,169	5,125	(0.9%)	5,500	(375)	(6.8%)
Nursery	5,994	5,908	(1.4%)	6,509	(601)	(9.2%)
Total KDHCD Patient Days	168,040	153,402	(8.7%)	176,685	(23,283)	(13.2%)
Total Outpatient Volume	560,641	517,670	(7.7%)	566,885	(49,215)	(8.7%)

Other Statistical Results – Fiscal Year Comparison (June)

	Actual Results				Budget	Budget Variance	
	Jun 2022	Jun 2023	Change	% Change	Jun 2023	Change	% Change
Adjusted Patient Days	27,788	24,803	(2,985)	(10.7%)	27,904	(3,101)	(11.1%)
Outpatient Visits	45,450	44,070	(1,380)	(3.0%)	46,593	(2,523)	(5.4%)
Endoscopy Procedures (I/P & O/P)	436	630	194	44.5%	645	(15)	(2.3%)
Infusion Center	300	418	118	39.3%	365	53	14.5%
O/P Rehab Units	18,223	20,055	1,832	10.1%	19,970	85	0.4%
Home Health Visits	2,645	2,830	185	7.0%	3,000	(170)	(5.7%)
RHC Registrations	8,793	9,268	475	5.4%	8,506	762	9.0%
ED Total Registered	7,362	7,709	347	4.7%	6,750	959	14.2%
Radiology/CT/US/MRI Proc (I/P & O/P)	16,617	17,384	767	4.6%	15,712	1,672	10.6%
Surgery Minutes –General & Robotic (I/P & O/P)	1,091	1,115	24	2.2%	1,156	(41)	(3.5%)
Physical & Other Therapy Units	18,365	18,700	335	1.8%	18,573	127	0.7%
Hospice Days	3,710	3,767	57	1.5%	4,283	(516)	(12.0%)
Radiation Oncology Treatments (I/P & O/P)	1,948	1,856	(92)	(4.7%)	2,365	(509)	(21.5%)
Cath Lab Minutes (IP & OP)	339	322	(17)	(5.0%)	401	(79)	(19.7%)
OB Deliveries	390	353	(37)	(9.5%)	395	(42)	(10.6%)
Dialysis Treatments	1,460	1,274	(186)	(12.7%)	1,541	(267)	(17.3%)
Urgent Care - Demaree	3,097	1,972	(1,125)	(36.3%)	2,000	(28)	(1.4%)
Urgent Care - Court	4,856	3,023	(1,833)	(37.7%)	3,520	(497)	(14.1%)
KHMG RVU	36,476	0	(36,476)	(100.0%)	41,385	(41,385)	(100.0%)
GME Clinic visits	1,065	0	(1,065)	(100.0%)	1,300	(1,300)	(100.0%)

Other Statistical Results – Fiscal Year Comparison (Jul-June)

	Actual Results				Budget	Budget Variance	
	FY 2022	FY 2023	Change	% Change	FY 2023	Change	% Change
Adjusted Patient Days	325,602	319,413	(6,189)	(1.9%)	338,246	(18,833)	(5.6%)
Outpatient Visits	560,641	517,670	(42,971)	(7.7%)	566,885	(49,215)	(8.7%)
Endoscopy Procedures (I/P & O/P)	6,055	6,753	698	11.5%	7,298	(545)	(7.5%)
ED Total Registered	81,540	90,287	8,747	10.7%	83,950	6,337	7.5%
Home Health Visits	33,371	36,586	3,215	9.6%	36,160	426	1.2%
Surgery Minutes-General & Robotic (I/P & O/P)	12,165	12,856	691	5.7%	13,750	(894)	(6.5%)
Radiology/CT/US/MRI Proc (I/P & O/P)	197,024	200,232	3,208	1.6%	195,226	5,006	2.6%
Physical & Other Therapy Units	211,480	214,692	3,212	1.5%	225,895	(11,203)	(5.0%)
OB Deliveries	4,527	4,548	21	0.5%	4,700	(152)	(3.2%)
Cath Lab Minutes (IP & OP)	3,845	3,793	(52)	(1.4%)	4,787	(994)	(20.8%)
O/P Rehab Units	231,694	228,498	(3,196)	(1.4%)	236,181	(7,683)	(3.3%)
Dialysis Treatments	18,665	17,639	(1,026)	(5.5%)	18,492	(853)	(4.6%)
RHC Registrations	124,114	117,101	(7,013)	(5.7%)	114,973	2,128	1.9%
Radiation Oncology Treatments (I/P & O/P)	24,042	22,537	(1,505)	(6.3%)	28,244	(5,707)	(20.2%)
Infusion Center	4,605	4,173	(432)	(9.4%)	4,841	(668)	(13.8%)
Hospice Days	50,259	43,805	(6,454)	(12.8%)	51,180	(7,375)	(14.4%)
KHMG RVU	418,116	325,251	(92,865)	(22.2%)	462,456	(137,205)	(29.7%)
Urgent Care - Demaree	43,251	31,572	(11,679)	(27.0%)	29,230	2,342	8.0%
Urgent Care - Court	68,778	46,868	(21,910)	(31.9%)	47,678	(810)	(1.7%)
GME Clinic visits	13,221	8,147	(5,074)	(38.4%)	14,467	(6,320)	(43.7%)

Preliminary Out of Period / Year End Adjustments (\$17.9M)

Annually in June, we have entries based on year end reports such as actuarial reports, supplemental state reports, market reports and state programs. This year most of these were negative to our bottom line. Listed below are the primary “out of month” entries totaling (\$17.9M) that significantly impacted the month of June’s financials.

Revenue Related – (\$9.8M)

- (\$3M): Preliminary adjustments were made on the patient accounts receivable reserve account. This area is still under additional review for year end close.
- (\$1.4M): In May and June, new information was received regarding our supplemental programs and QIP program. Unfortunately, the overall combined impact was negative. QIP decreased (\$4.7M) which was offset by increases to our FY22 DSH \$2.2M, Hospital Quality Assurance Fee Program \$913K, and Directed Hospital Payment Program \$225K.
- (\$5.3M): An accounting error in the accounts receivable balance in our Home Health Service line that had been accumulating over the last 5 years, was identified and corrected.

Expense / Non-Operating Income Related – (\$8.1M)

- (\$2.5M): A \$2.5M 401K match was approved in June 2023. This match was not accrued during FY23 so 100% of the impact was recognized in June in employee benefits.
- (\$3.6M): At the end of every quarter and year, we use a variety of independent actuarial and fair market value reports to ensure that our year end balances are correct. These reports impacted our pension liability (\$2.6M), medical malpractice liability (\$1.9M), Workman’s compensation liability \$205K, and interest income from market impacts on our investments (\$1.3M)
- (\$2M): Year end amortization adjustments were made, primarily to insurance related prepaid balances and Cerner adjustments (\$1.2M). In addition, we recorded additional contract labor costs (\$621K) due to old invoices from the State from September 2021 through March 2022.

June's Financial Comparison (000's) with/without out of period adjustments: **\$17.9M**

Preliminary

	June 2022 Includes KHMG	June 2023	Out of Period Adjustments	June 2023 without out of period adj.
Operating Revenue				
Net Patient Service Revenue	\$51,040	\$37,922	\$8,381	\$46,304
Supplemental Gov't Programs	9,365	8,745	(3,290)	5,455
Prime/QIP Program	3,282	(3,952)	4,694	743
Premium Revenue	5,943	7,936		7,936
Management Services Revenue	3,188	3,136		3,136
Other Revenue	1,727	3,609		3,609
Other Operating Revenue	23,505	19,474	1,405	20,879
Total Operating Revenue	74,545	57,396	9,786	67,182
Operating Expenses				
Salaries & Wages	28,536	26,186		26,186
Contract Labor	6,650	2,717	(621)	2,096
Employee Benefits	15,058	10,544	(5,583)	4,961
Total Employment Expenses	50,244	39,448	(6,204)	33,243
Medical & Other Supplies	8,179	9,644		9,644
Physician Fees	9,413	7,112		7,112
Purchased Services	2,122	1,820		1,820
Repairs & Maintenance	2,369	2,348	(194)	2,154
Utilities	1,012	731		731
Rents & Leases	(3,966)	159		159
Depreciation & Amortization	8,538	3,029		3,029
Interest Expense	953	587		587
Other Expense	2,686	4,541	(3,067)	1,474
Humana Cap Plan Expense	2,407	2,811		2,811
Management Services Expense	3,227	3,592		3,592
Total Other Expenses	36,942	36,375	(3,261)	33,113
Total Operating Expenses	87,186	75,822	(9,466)	66,357
Operating Margin	(\$12,641)	(\$18,426)	\$19,252	\$826
Stimulus Funds	2,625			
Operating Margin after Stimulus	(\$10,016)	(\$18,426)	\$19,252	\$826
Nonoperating Revenue (Loss)	(2,902)	1,894	(1,331)	563
Excess Margin	(\$12,919)	(\$16,533)	\$17,921	\$1,388

June Financial Comparison (000's)

Preliminary

	Actual Results			Budget	Budget Variance	
	June 2022	June 2023	% Change	June 2023	Change	% Change
Operating Revenue						
Net Patient Service Revenue	\$51,040	\$37,922	(25.7%)	\$55,281	(\$17,358)	(31.4%)
Supplemental Gov't Programs	9,365	8,745	(6.6%)	5,088	3,657	71.9%
Prime/QIP Program	3,282	(3,952)	(220.4%)	732	(4,684)	(639.6%)
Premium Revenue	5,943	7,936	33.5%	6,813	1,122	16.5%
Management Services Revenue	3,188	3,136	(1.6%)	3,366	(230)	(6.8%)
Other Revenue	1,727	3,609	109.0%	2,389	1,220	51.1%
Other Operating Revenue	23,505	19,474	(17.1%)	18,389	1,085	5.9%
Total Operating Revenue	74,545	57,396	(23.0%)	73,669	(16,273)	(22.1%)
Operating Expenses						
Salaries & Wages	28,536	26,186	(8.2%)	29,185	(2,999)	(10.3%)
Contract Labor	6,650	2,717	(59.1%)	2,343	374	16.0%
Employee Benefits	15,058	10,544	(30.0%)	5,988	4,556	76.1%
Total Employment Expenses	50,244	39,448	(21.5%)	37,516	1,932	5.1%
Medical & Other Supplies	8,179	9,644	17.9%	10,702	(1,058)	(9.9%)
Physician Fees	9,413	7,112	(24.4%)	9,316	(2,204)	(23.7%)
Purchased Services	2,122	1,820	(14.2%)	1,625	195	12.0%
Repairs & Maintenance	2,369	2,348	(0.9%)	2,548	(200)	(7.8%)
Utilities	1,012	731	(27.8%)	797	(66)	(8.2%)
Rents & Leases	(3,966)	159	(104.0%)	696	(537)	(77.2%)
Depreciation & Amortization	8,538	3,029	(64.5%)	2,834	195	6.9%
Interest Expense	953	587	(38.4%)	591	(4)	(0.7%)
Other Expense	2,686	4,541	69.1%	2,088	2,453	117.4%
Humana Cap Plan Expense	2,407	2,811	16.8%	3,432	(621)	(18.1%)
Management Services Expense	3,227	3,592	11.3%	3,325	267	8.0%
Total Other Expenses	36,942	36,375	(1.5%)	37,954	(1,579)	(4.2%)
Total Operating Expenses	87,186	75,822	(13.0%)	75,470	353	0.5%
Operating Margin	(\$12,641)	(\$18,426)		(\$1,801)	(\$16,626)	
Stimulus Funds	2,625	0		247	(247)	
Operating Margin after Stimulus	(\$10,016)	(\$18,426)		(\$1,554)	(\$16,873)	
Nonoperating Revenue (Loss)	(2,902)	1,894		384	1,510	
Excess Margin	(\$12,919)	(\$16,533)		(\$1,170)	(\$15,363)	

YTD Financial Comparison (000's)

Preliminary

	Actual Results FYTD Jul-Jun			Budget FYTD	Budget Variance	FYTD
	FYTD2022	FYTD2023	% Change	FYTD2023	Change	% Change
Operating Revenue						
Net Patient Service Revenue	\$635,520	\$613,297	(3.5%)	\$671,551	(\$58,254)	(8.7%)
Supplemental Gov't Programs	75,203	71,959	(4.3%)	61,903	10,057	16.2%
Prime/QIP Program	15,850	8,300	(47.6%)	8,911	(611)	(6.9%)
Premium Revenue	69,495	80,625	16.0%	79,636	989	1.2%
Management Services Revenue	36,060	38,652	7.2%	40,949	(2,297)	(5.6%)
Other Revenue	26,172	34,598	32.2%	29,044	5,554	19.1%
Other Operating Revenue	222,780	234,134	5.1%	220,442	13,692	6.2%
Total Operating Revenue	858,300	847,432	(1.3%)	891,993	(44,562)	(5.0%)
Operating Expenses						
Salaries & Wages	350,198	337,091	(3.7%)	354,621	(17,530)	(4.9%)
Contract Labor	41,435	49,160	18.6%	28,647	20,513	71.6%
Employee Benefits	64,505	74,533	15.5%	72,811	1,722	2.4%
Total Employment Expenses	456,137	460,784	1.0%	456,079	4,705	1.0%
Medical & Other Supplies	130,842	129,761	(0.8%)	126,656	3,105	2.5%
Physician Fees	108,238	105,007	(3.0%)	110,105	(5,098)	(4.6%)
Purchased Services	19,289	18,646	(3.3%)	19,770	(1,124)	(5.7%)
Repairs & Maintenance	28,402	29,065	2.3%	30,636	(1,571)	(5.1%)
Utilities	9,170	10,124	10.4%	8,695	1,429	16.4%
Rents & Leases	1,688	1,818	7.7%	7,187	(5,369)	(74.7%)
Depreciation & Amortization	37,433	36,447	(2.6%)	34,003	2,444	7.2%
Interest Expense	7,645	7,390	(3.3%)	7,190	199	2.8%
Other Expense	22,748	26,721	17.5%	25,436	1,286	5.1%
Humana Cap Plan Expense	38,442	43,180	12.3%	39,994	3,186	8.0%
Management Services Expense	34,977	39,037	11.6%	40,457	(1,420)	(3.5%)
Total Other Expenses	438,874	447,194	1.9%	450,127	(2,933)	(0.7%)
Total Operating Expenses	130,842	129,761	(0.8%)	126,656	3,105	2.5%
Operating Margin	(\$36,711)	(\$60,547)		(\$14,213)	(\$46,333)	
Stimulus Funds	19,180	609		3,000	(2,391)	
Operating Margin after Stimulus	(\$17,531)	(\$59,938)		(\$11,213)	(\$48,724)	
Nonoperating Income						
Nonoperating Revenue (Loss)	(8,037)	10,851		4,371	6,480	
Excess Margin	(\$25,568)	(\$49,087)		(\$6,842)	(\$42,245)	

Year over Year Financial Comparison (000's)

Preliminary

	Actual FY23 - Actual FY22 without KHMG			
	FY 2022	FY 2023	Change	% Change
Operating Revenue				
Net Patient Service Revenue	\$586,343	\$573,818	(\$12,526)	(2.1%)
Supplemental Gov't Programs	75,203	71,959	(3,244)	(4.3%)
Prime/QIP Program	15,850	8,300	(7,550)	(47.6%)
Premium Revenue	69,495	80,625	11,130	16.0%
Management Services Revenue	36,060	38,652	2,592	7.2%
Other Revenue	24,348	33,161	8,812	36.2%
Other Operating Revenue	220,956	232,696	11,741	5.3%
Total Operating Revenue	807,299	806,514	(785)	(0.1%)
Operating Expenses				
Salaries & Wages	338,237	327,180	(11,057)	(3.3%)
Contract Labor	41,435	49,160	7,725	18.6%
Employee Benefits	62,183	72,531	10,348	16.6%
Total Employment Expenses	441,855	448,871	7,016	1.6%
Medical & Other Supplies	124,317	123,935	(383)	(0.3%)
Physician Fees	78,612	80,986	2,375	3.0%
Purchased Services	18,267	17,804	(463)	(2.5%)
Repairs & Maintenance	26,127	27,253	1,126	4.3%
Utilities	8,717	9,615	898	10.3%
Rents & Leases	1,452	1,540	88	6.1%
Depreciation & Amortization	34,286	34,090	(196)	(0.6%)
Interest Expense	7,609	7,367	(241)	(3.2%)
Other Expense	21,437	25,747	4,309	20.1%
Humana Cap Plan Expense	33,184	43,180	9,996	30.1%
Management Services Expense	34,977	39,037	4,060	11.6%
Total Other Expenses	388,984	410,553	21,569	5.5%
Total Operating Expenses	830,839	859,424	28,585	3.4%
Operating Margin	(\$23,540)	(\$52,910)	(\$29,370)	
Stimulus Funds	19,180	609	(18,571)	
Operating Margin after Stimulus	(\$4,360)	(\$52,301)	(\$47,941)	
Nonoperating Revenue (Loss)	(8,037)	6,269	14,306	
Excess Margin	(\$12,397)	(\$46,032)	(\$33,635)	

Preliminary

Kaweah Health: Trended Cash Flow from Operations (000's)

	FY 19	FY 20	FY 21	FY 22	FY23	July 2019 -June 2023
Excess Margin	\$27,907	(\$7,651)	\$12,414	(\$25,467)	(\$49,087)	(\$41,883)
Additional Sources (Uses) of Cash						
Depreciation (Non-Cash)	\$30,851	\$30,678	\$31,646	\$32,882	\$36,447	\$162,504
Capitalized Employment Expense	(\$1,109)	(\$786)	(\$815)	(\$1,808)	(\$2,528)	(\$7,046)
DB Funding (in excess) less than pension exper	(\$4,425)	(\$2,962)	(\$17,915)	(\$7,558)	\$11,563	(\$21,297)
Capitalized Interest expense	(\$2,300)	(\$1,900)	(\$795)	\$0	\$0	(\$4,995)
Cash flow from Operations	\$50,924	\$17,380	\$24,535	(\$1,951)	(\$3,605)	\$87,282
NonOperational Cash flow Impacts						
Capital Expenditure less bond funds requisition	(\$24,039)	(\$12,871)	(\$22,892)	\$9,639	(\$14,803)	(\$64,966)
Medicare Advanced Payments funding		\$43,750	\$33,096	(\$50,350)	(\$26,496)	\$0
Debt proceeds	\$0	\$15,000	\$0	\$7,895	\$9,850	\$32,745
Debt Service Payments (Principal)	(\$8,992)	(\$9,442)	(\$10,643)	(\$9,691)	(\$13,508)	(\$52,276)
Total Additional Net Sources (Uses) of Cash	(\$33,031)	\$36,437	(\$439)	(\$42,507)	(\$44,957)	(\$84,497)
Surplus(Deficit) Cash Flow	\$17,893	\$53,817	\$24,096	(\$44,458)	(\$48,562)	\$2,785

Trended Financial Comparison (000's)

Preliminary

	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	YTD
Operating Revenue													
Net Patient Service Revenue	\$52,368	\$54,965	\$48,168	\$54,432	\$56,706	\$53,217	\$51,048	\$49,325	\$55,391	\$48,785	\$50,968	\$37,266	\$612,641
Supplemental Gov't Programs	5,042	5,042	4,943	5,410	5,494	5,060	6,065	6,064	7,967	6,065	6,063	8,745	\$71,959
Prime Program	743	743	743	743	743	743	743	743	3,935	1,633	743	(3,952)	\$8,300
Premium Revenue	5,901	5,927	5,972	5,943	5,784	6,780	6,336	7,251	6,985	8,685	7,125	7,936	\$80,625
Management Services Revenue	2,932	3,797	3,313	2,733	3,559	3,277	3,294	2,897	3,149	3,280	3,284	3,136	\$38,651
Other Revenue	3,495	2,160	2,334	2,462	2,161	2,594	3,315	2,302	3,509	2,683	3,971	3,609	\$34,595
Other Operating Revenue	18,113	17,668	17,304	17,291	17,741	18,452	19,753	19,257	25,545	22,346	21,186	19,474	\$234,131
Total Operating Revenue	70,480	72,633	65,472	71,723	74,447	71,670	70,801	68,582	80,937	71,131	72,154	57,396	\$847,427
Operating Expenses													
Salaries & Wages	29,176	29,435	28,455	29,473	26,929	28,727	28,050	26,583	29,016	27,572	27,487	26,186	\$337,091
Contract Labor	5,864	7,124	7,067	5,941	4,393	3,550	2,199	2,967	2,467	2,853	2,017	2,717	\$49,160
Employee Benefits	6,279	5,563	3,636	5,212	5,155	5,828	6,612	6,074	5,423	6,379	7,829	10,535	\$74,524
Total Employment Expenses	41,319	42,122	39,158	40,625	36,477	38,105	36,862	35,624	36,907	36,804	37,332	39,438	\$460,774
Medical & Other Supplies	9,593	11,666	11,642	11,523	11,358	10,632	10,396	10,376	11,548	9,779	11,604	9,644	\$129,761
Physician Fees	8,892	9,585	8,814	9,859	9,645	8,276	8,564	8,596	9,737	9,101	6,827	7,112	\$105,006
Purchased Services	2,937	1,120	1,556	1,349	1,328	1,576	1,540	1,184	1,445	1,380	1,411	1,820	\$18,646
Repairs & Maintenance	2,237	2,486	2,516	2,542	2,460	2,365	2,230	2,302	2,614	2,813	2,153	2,348	\$29,066
Utilities	715	999	1,061	942	881	806	841	703	878	711	857	731	\$10,124
Rents & Leases	510	157	153	169	183	170	228	22	165	133	152	159	\$2,201
Depreciation & Amortization	2,657	3,028	3,017	3,029	3,071	3,057	3,172	3,848	3,180	3,186	1,796	3,029	\$36,069
Interest Expense	589	595	594	595	664	706	610	620	609	609	607	587	\$7,384
Other Expense	1,631	1,986	1,825	1,510	1,759	1,834	1,945	1,980	1,945	1,873	3,865	4,541	\$26,694
Humana Cap Plan Expenses	4,404	3,831	3,777	2,680	3,454	3,372	3,674	3,596	4,798	3,190	3,593	2,811	\$43,179
Management Services Expense	2,921	3,660	3,370	2,707	3,371	3,317	3,058	3,257	3,284	3,150	3,350	3,592	\$39,037
Total Other Expenses	37,087	39,112	38,324	36,904	38,173	36,110	36,256	36,483	40,204	35,925	36,215	36,375	\$447,168
Total Operating Expenses	78,406	81,234	77,483	77,529	74,650	74,216	73,118	72,106	77,111	72,728	73,547	75,822	\$907,951
Operating Margin	(\$7,926)	(\$8,600)	(\$12,010)	(\$5,807)	(\$203)	(\$2,546)	(\$2,317)	(\$3,524)	\$3,826	(\$1,597)	(\$1,393)	(\$18,426)	(\$60,524)
Stimulus Funds	\$97	\$0	\$0	\$0	\$0	\$0	\$190	\$0	\$0	\$0	\$322	\$0	\$609
Operating Margin after Stimulus	(\$7,829)	(\$8,600)	(\$12,010)	(\$5,807)	(\$203)	(\$2,546)	(\$2,127)	(\$3,524)	\$3,826	(\$1,597)	(\$1,071)	(\$18,426)	(\$59,915)
Nonoperating Revenue (Loss)	455	303	(3,901)	452	150	2,901	1,350	834	538	515	5,336	1,894	\$10,828
Excess Margin	(\$7,374)	(\$8,297)	(\$15,911)	(\$5,355)	(\$53)	\$355	(\$777)	(\$2,690)	\$4,364	(\$1,082)	\$4,265	(\$16,533)	(\$49,087)

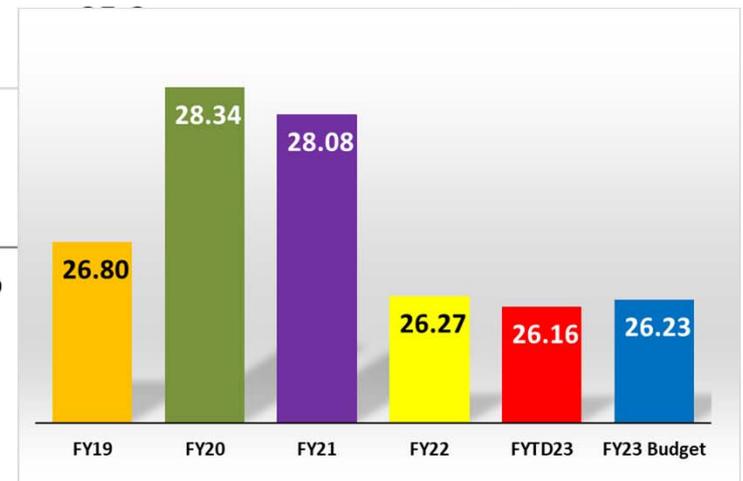
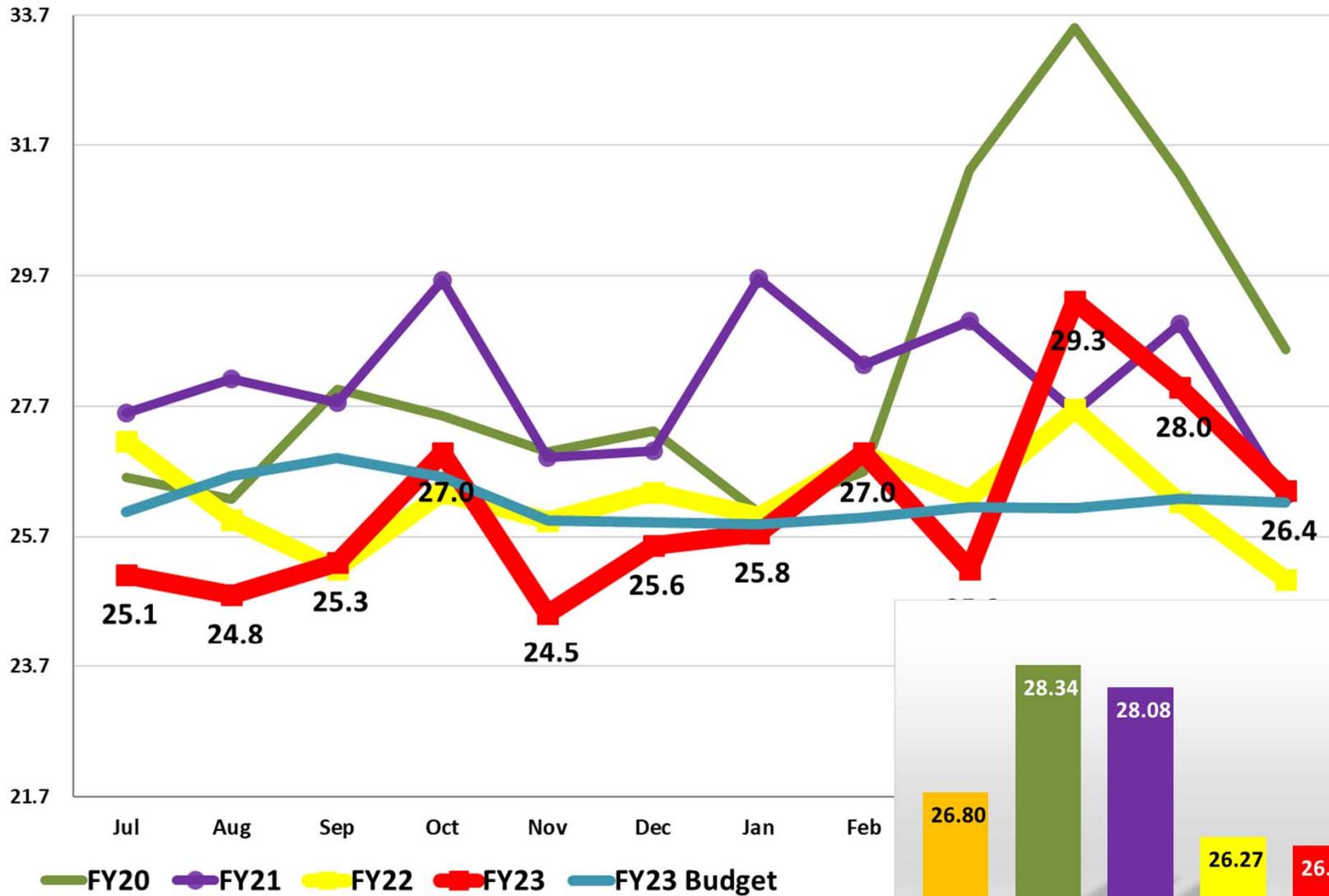
Kaweah Health Medical Group

Fiscal Year Financial Comparison (000's)

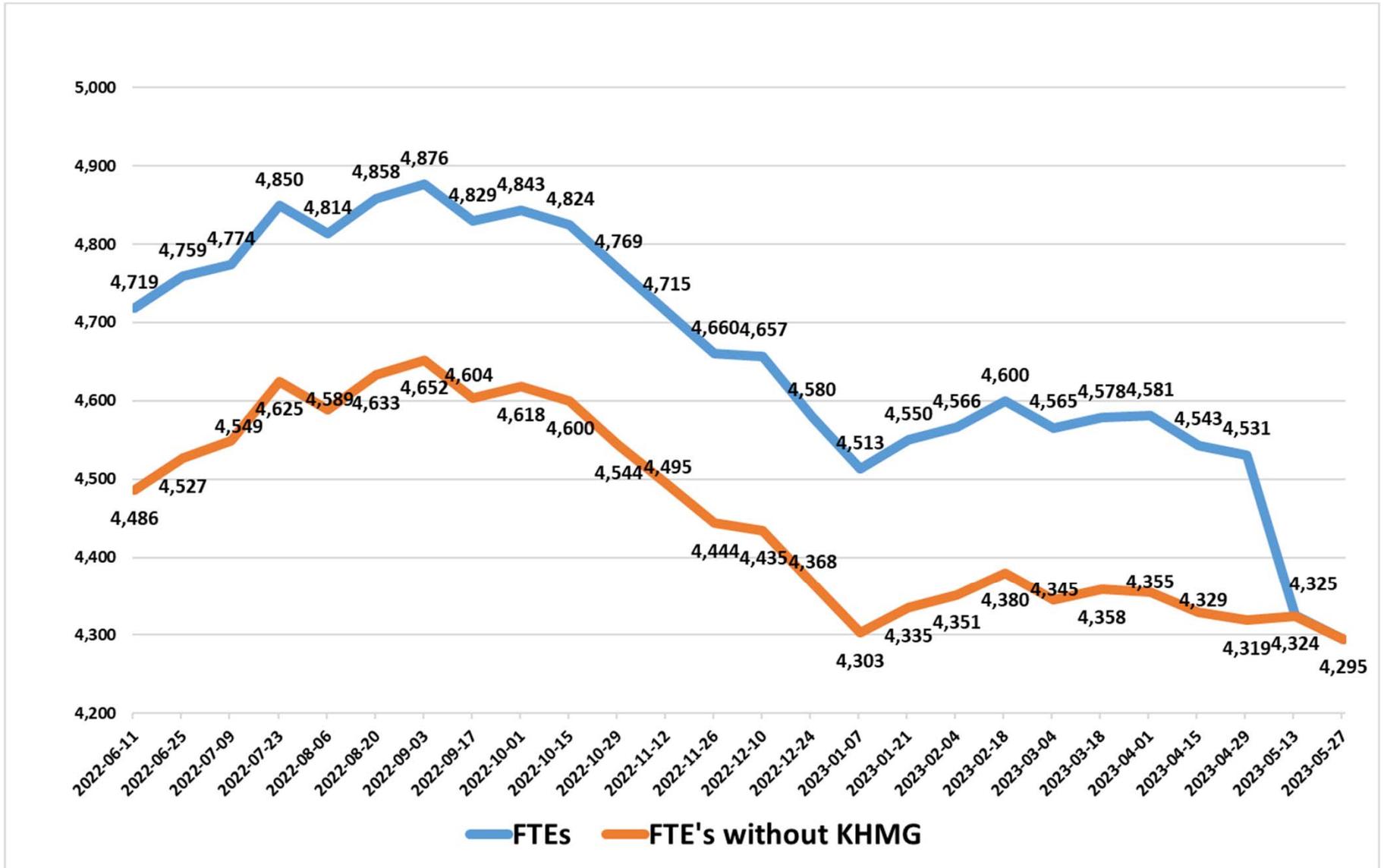
Preliminary

	Actual Results FYTD July - June			Budget FYTD	Budget Variance	FYTD
	June 2022	June 2023	% Change	June 2023	Change	% Change
Operating Revenue						
Net Patient Service Revenue	\$49,177	\$39,480	(19.7%)	\$52,950	(\$13,470)	(25.4%)
Other Revenue	1,824	1,438	(21.2%)	1,183	255	21.5%
Other Operating Revenue	1,824	1,438	(21.2%)	1,183	255	21.5%
Total Operating Revenue	51,001	40,917	(19.8%)	54,133	(13,215)	(24.4%)
Operating Expenses						
Salaries & Wages	11,960	9,911	(17.1%)	13,227	(3,316)	(25.1%)
Employee Benefits	2,322	2,002	(13.8%)	2,714	(712)	(26.2%)
Total Employment Expenses	14,282	11,913	(16.6%)	15,941	(4,028)	(25.3%)
Medical & Other Supplies	6,525	5,826	(10.7%)	7,139	(1,312)	(18.4%)
Physician Fees	29,626	24,020	(18.9%)	30,989	(6,969)	(22.5%)
Purchased Services	1,022	842	(17.6%)	1,104	(261)	(23.7%)
Repairs & Maintenance	2,276	1,812	(20.4%)	2,791	(978)	(35.1%)
Utilities	453	509	12.4%	516	(7)	(1.4%)
Rents & Leases	236	278	17.5%	2,660	(2,383)	(89.6%)
Depreciation & Amortization	3,147	2,357	(25.1%)	772	1,584	205.1%
Interest Expense	37	22	(39.1%)	0	22	0.0%
Other Expense	1,311	975	(25.6%)	1,821	(846)	(46.5%)
Total Other Expenses	44,632	36,641	(17.9%)	47,791	(11,150)	(23.3%)
Total Operating Expenses	58,914	48,554	(17.6%)	63,732	(15,178)	(23.8%)
Stimulus Funds	0	0	0.0%	0	0	0.0%
Operating Margin after Stimulus	(\$7,913)	(\$7,637)	(3.5%)	(\$9,599)	\$1,963	(20.4%)
Nonoperating Income						
Nonoperating Revenue (Loss)	0	4,582	0.0%	0	4,582	0.0%
Excess Margin	(\$7,913)	(\$3,055)	(61.4%)	(\$9,599)	\$6,544	(68.2%)
Excess Margin %	(15.5%)	(7.5%)		(17.7%)		

Productivity: Worked Hours/Adjusted Patient Days



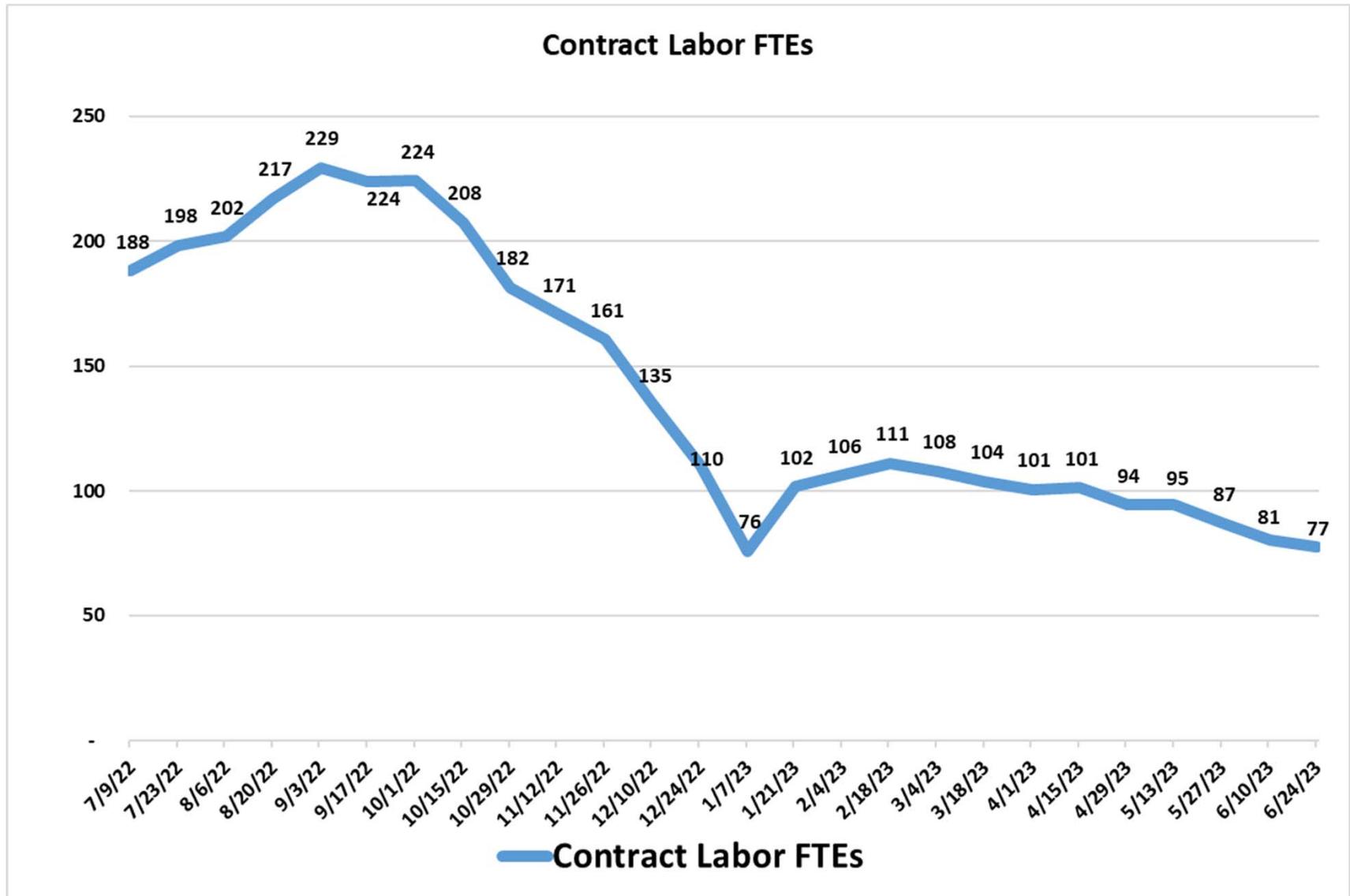
Trended FTEs: Productive & Nonproductive Hours



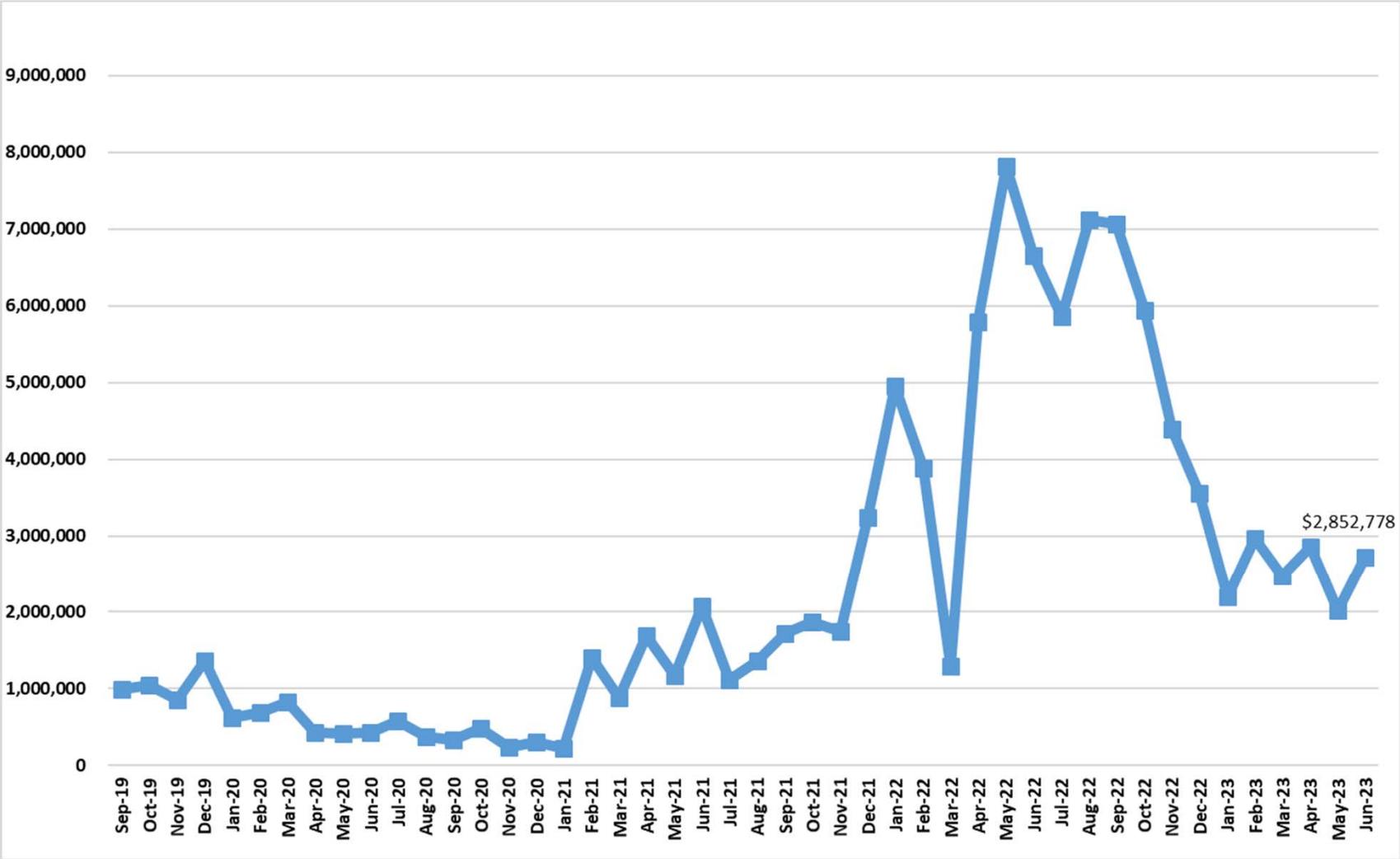
Productive Hours without KHMG



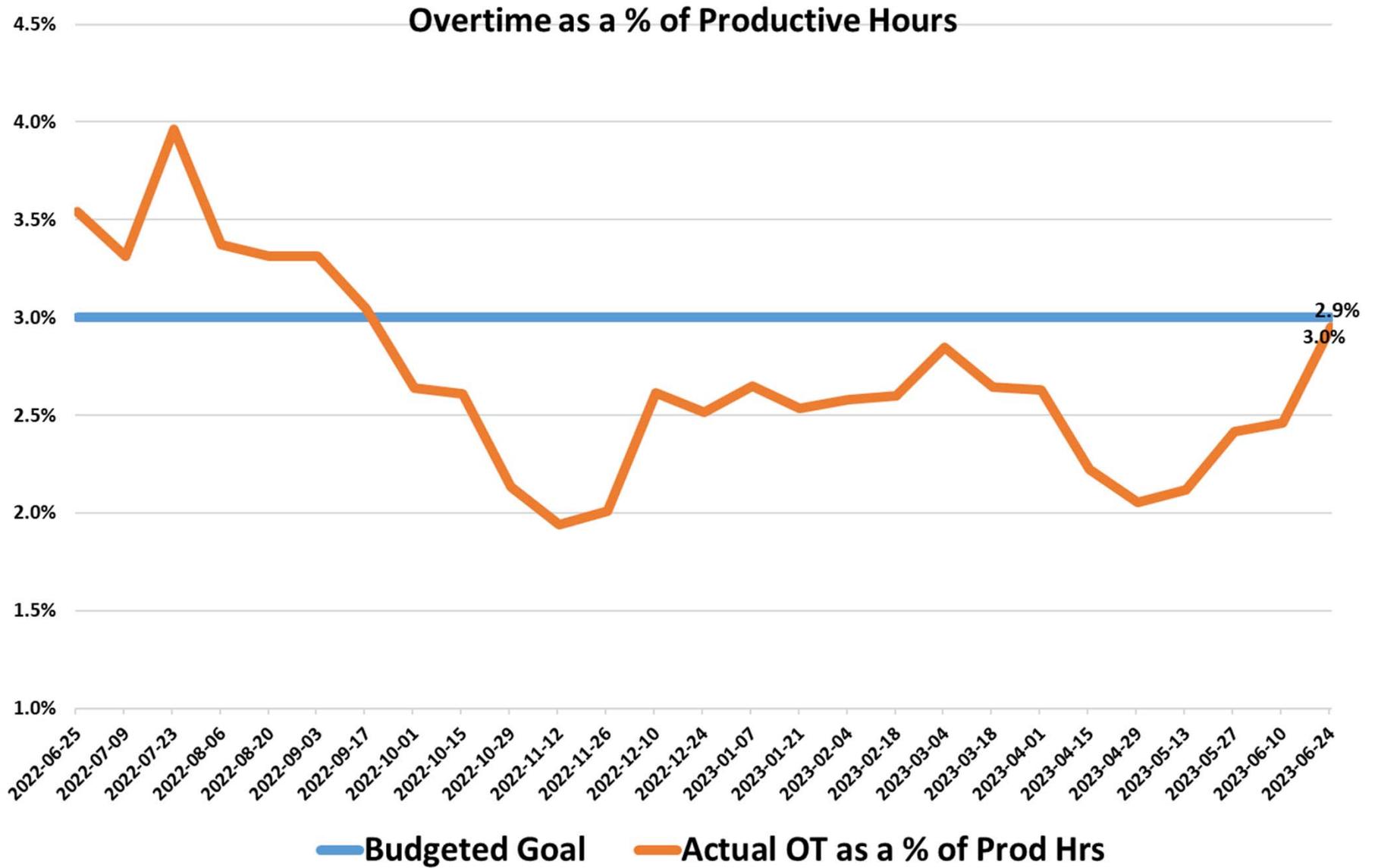
Contract Labor Full Time Equivalents (FTEs)



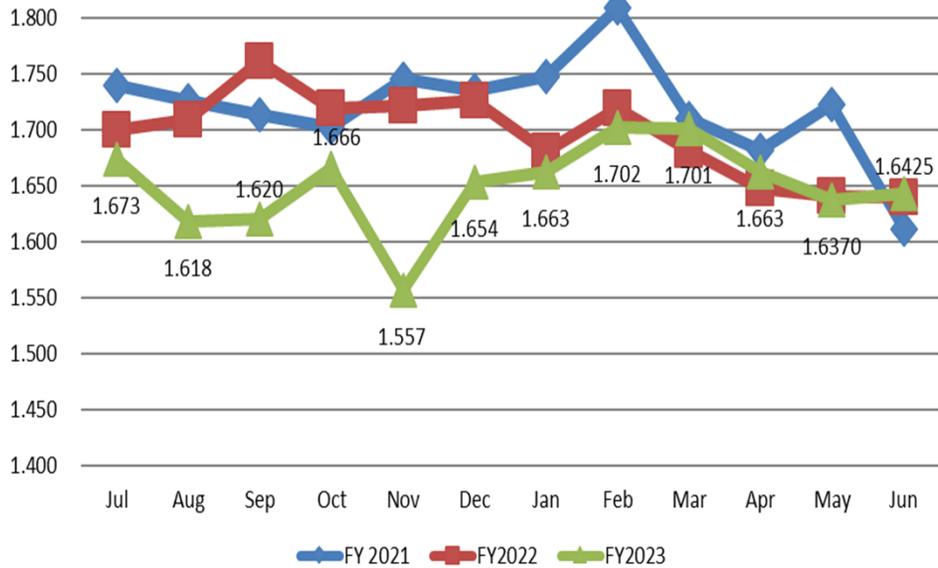
Contract Labor Expense



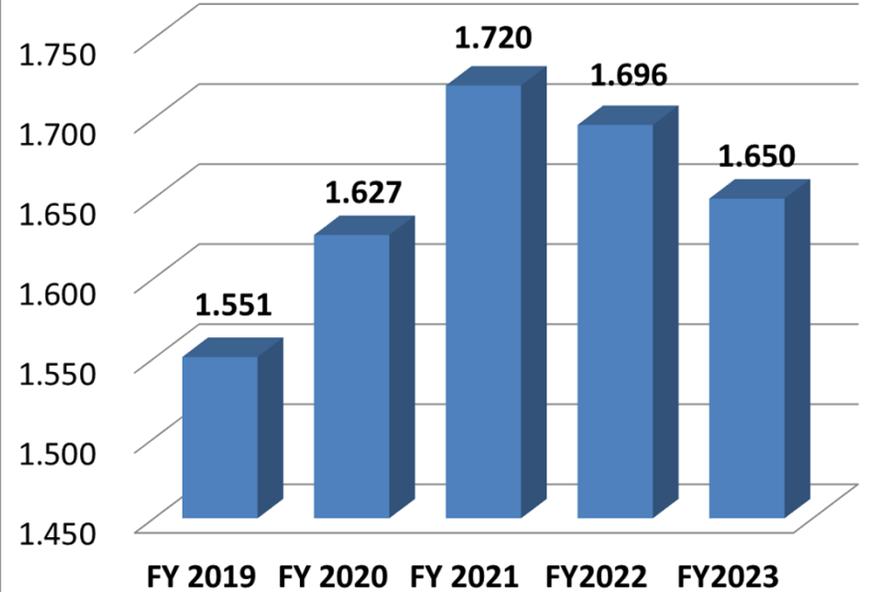
Overtime as a % of Productive Hours and \$



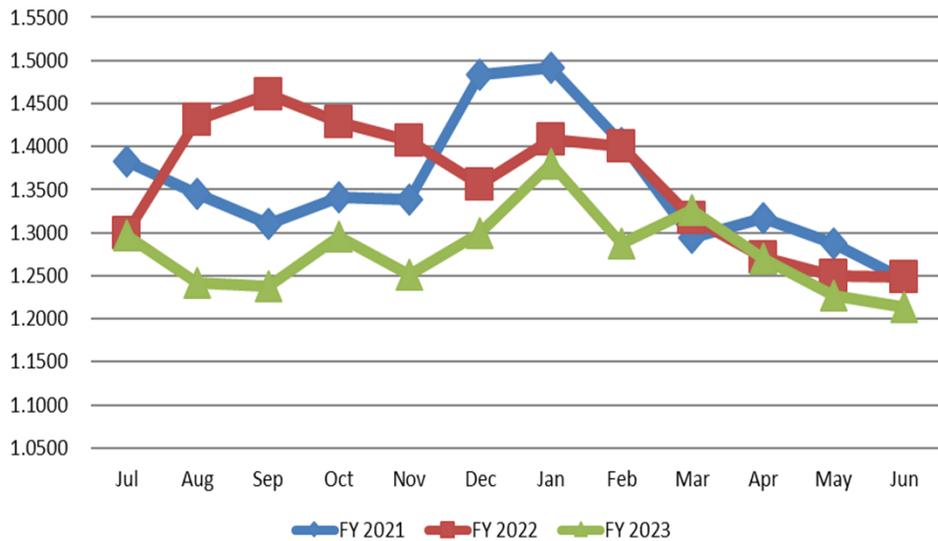
Case Mix Index w/o Normal Newborns



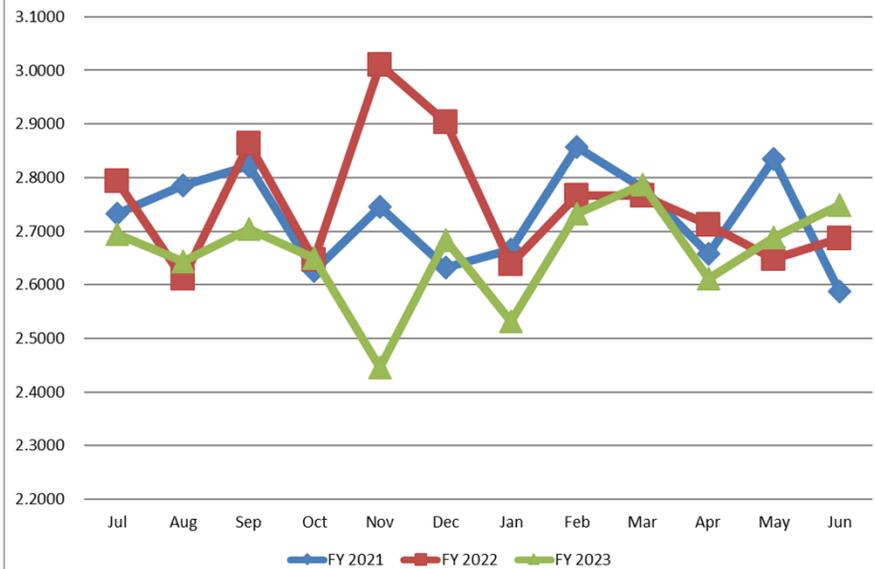
Case Mix Index w/o Normal Newborns - All



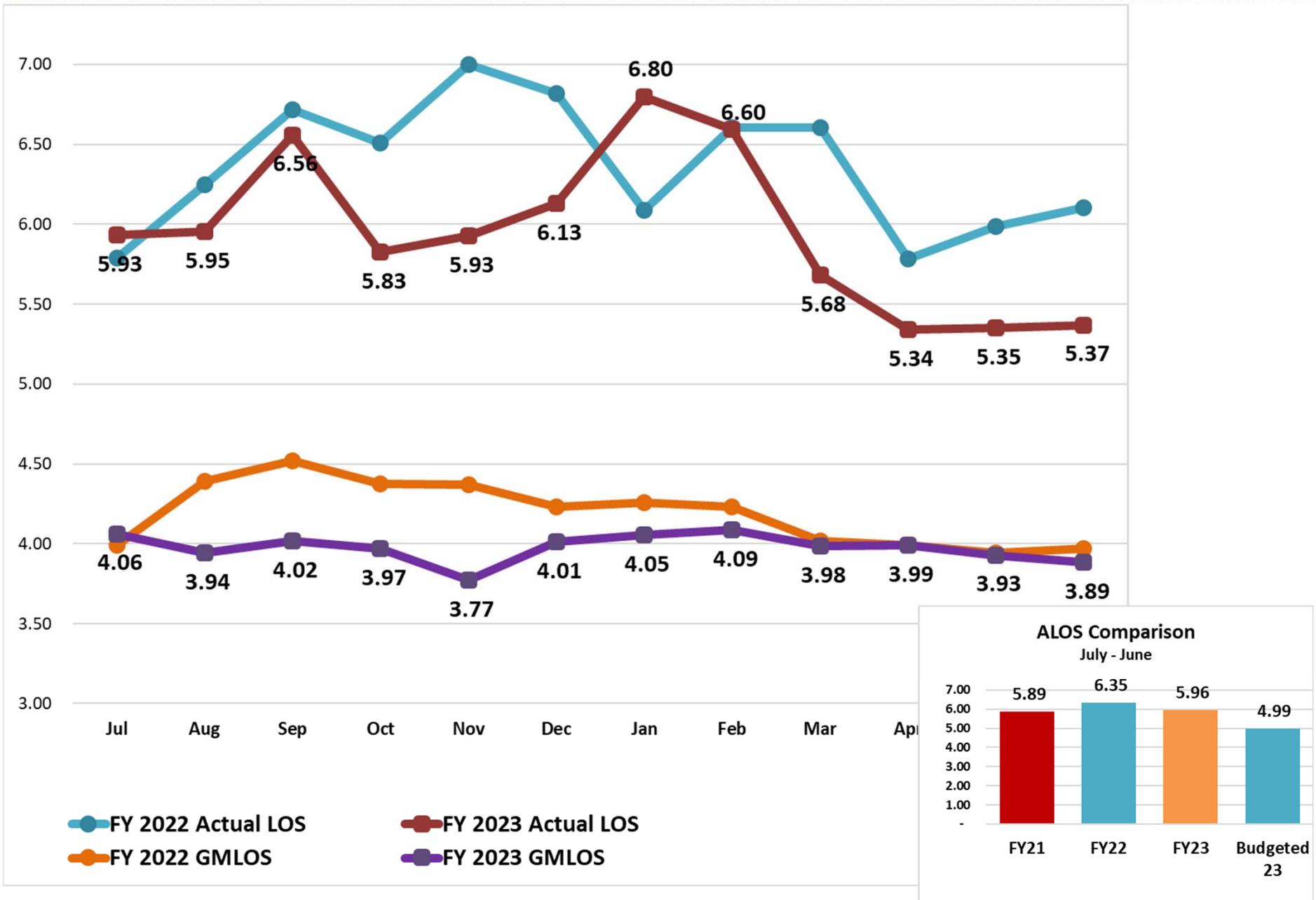
Case Mix Medical w/o Normal Newborns



Case Mix Index Surgical w/o Normal Newborns



Average Length of Stay versus National Average (GMLOS)

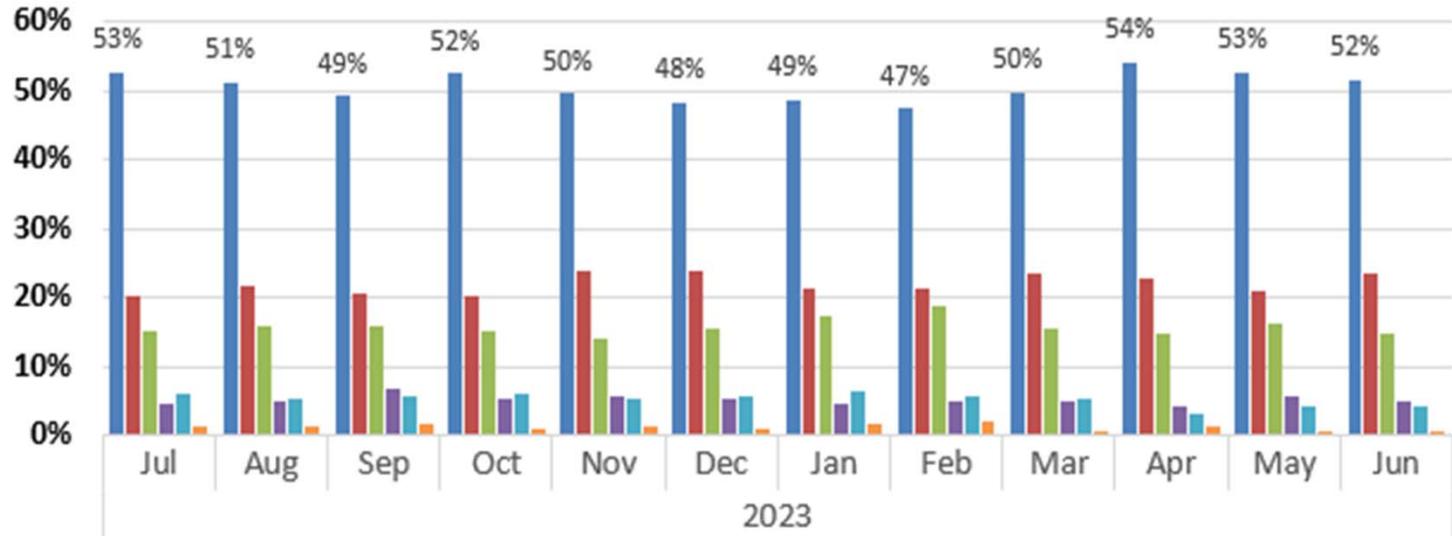


Average Length of Stay versus National Average (GMLOS)

	ALOS	GMLOS	GAP		ALOS	GMLOS	GAP
Apr-21	5.40	3.98	1.42		5.22	3.89	1.33
May-21	5.57	4.00	1.57		5.34	3.92	1.42
Jun-21	5.76	3.90	1.86		5.68	3.88	1.80
Jul-21	5.79	3.99	1.80		5.69	3.94	1.75
Aug-21	6.25	4.39	1.86		5.95	4.05	1.90
Sep-21	6.72	4.52	2.20		5.89	4.08	1.81
Oct-21	6.51	4.38	2.13		5.34	4.00	1.34
Nov-21	7.00	4.37	2.63		5.75	3.95	1.80
Dec-21	6.82	4.23	2.59		6.12	3.98	2.14
Jan-22	6.09	4.26	1.83		5.96	3.96	2.00
Feb-22	6.61	4.23	2.38		5.86	3.83	2.03
Mar-22	6.61	4.02	2.59		5.68	3.89	1.79
Apr-22	5.78	3.99	1.79		5.66	3.98	1.68
May-22	5.99	3.94	2.05		5.63	3.89	1.74
Jun-22	6.11	3.97	2.14		5.62	3.88	1.74
Jul-22	5.93	4.06	1.87		5.66	3.90	1.76
Aug-22	5.95	3.94	2.01		5.62	3.82	1.80
Sep-22	6.56	4.02	2.54		6.31	3.94	2.37
Oct-22	5.83	3.97	1.86		5.62	3.91	1.71
Nov-22	5.93	3.77	2.16		5.86	3.74	2.12
Dec-22	6.13	4.01	2.12		5.68	3.92	1.76
Jan-23	6.80	4.05	2.75		6.28	3.94	2.34
Feb-23	6.60	4.09	2.51		6.39	4.04	2.35
Mar-23	5.68	3.98	1.70		5.55	3.93	1.62
Apr-23	5.34	3.99	1.35		5.06	3.94	1.12
May-23	5.35	3.93	1.42		5.13	3.90	1.23
Jun-23	5.37	3.89	1.48		5.31	3.85	1.46
Average	6.00	4.13	1.87		5.53	3.96	1.57

Average Length of Stay Distribution

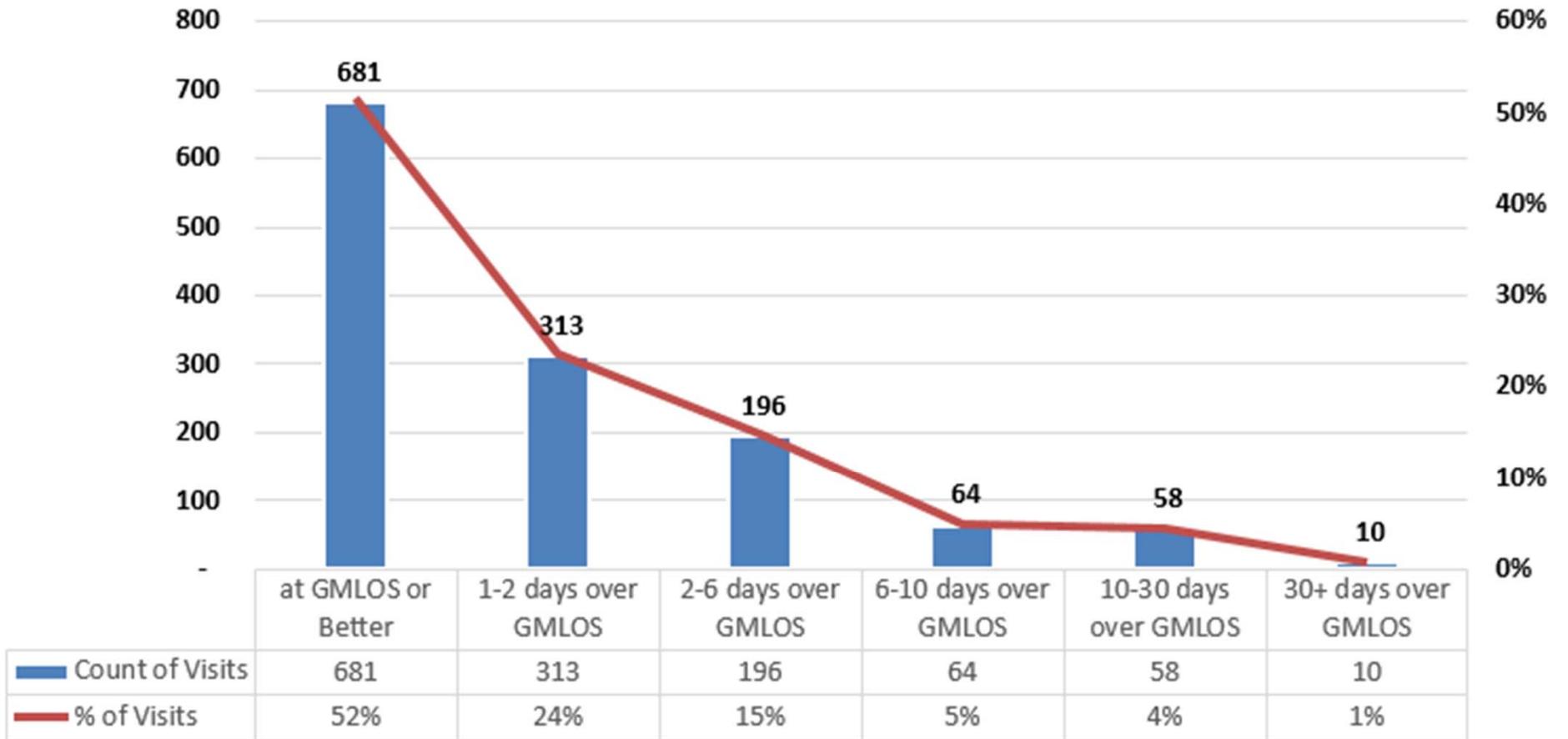
FY23 Overall LOS Distribution



	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
■ at GMLOS or Better	53%	51%	49%	52%	50%	48%	49%	47%	50%	54%	53%	52%
■ 1-2 days over GMLOS	20%	22%	21%	20%	24%	24%	21%	21%	24%	23%	21%	24%
■ 2-6 days over GMLOS	15%	16%	16%	15%	14%	16%	17%	19%	16%	15%	16%	15%
■ 6-10 days over GMLOS	5%	5%	7%	5%	6%	5%	5%	5%	5%	4%	6%	5%
■ 10-30 days over GMLOS	6%	5%	6%	6%	5%	6%	7%	6%	5%	3%	4%	4%
■ 30+ days over GMLOS	1%	1%	2%	1%	1%	1%	2%	2%	0%	1%	1%	1%

Average Length of Stay April Distribution

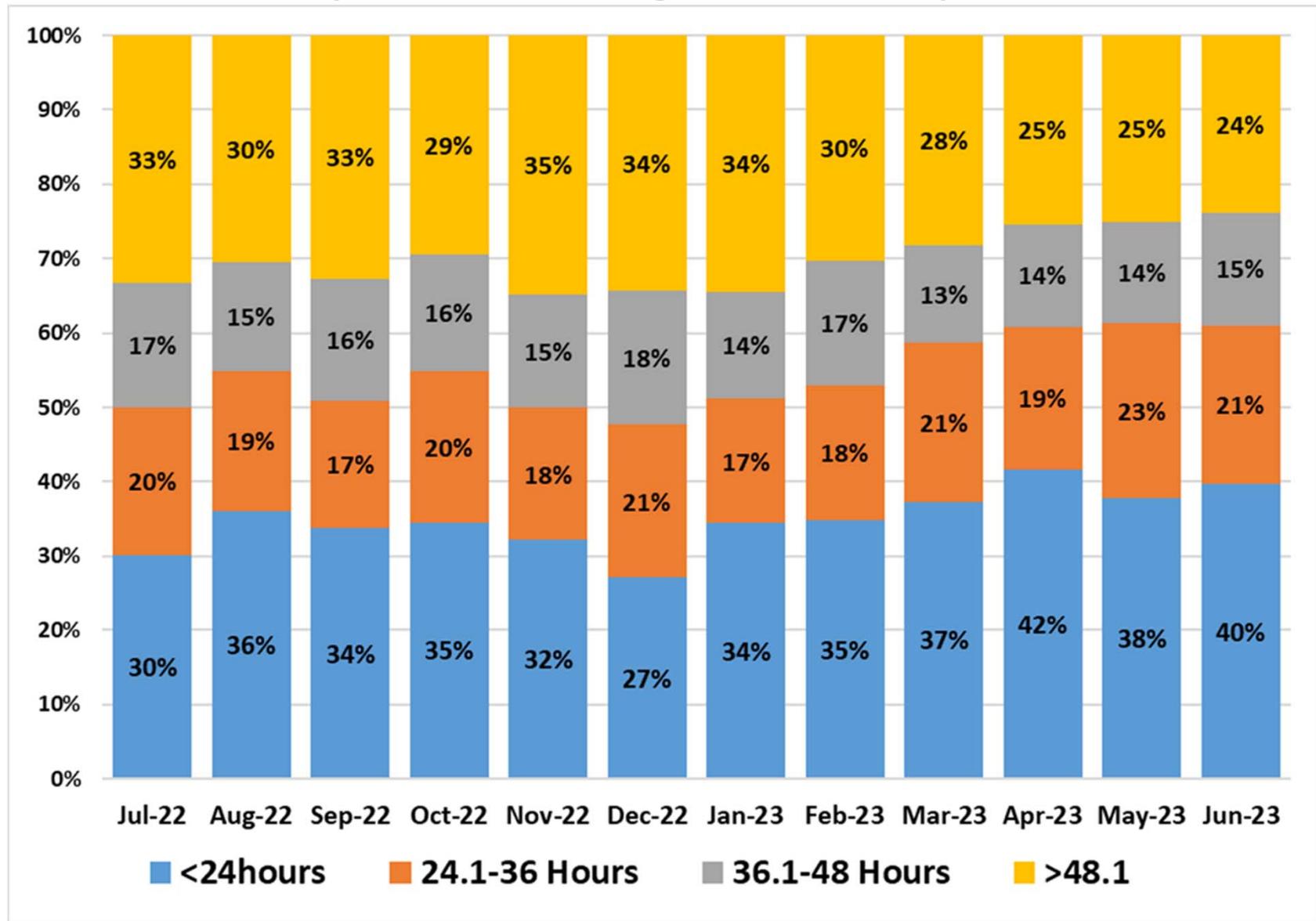
Jun FY 2023 Overall LOS Distribution



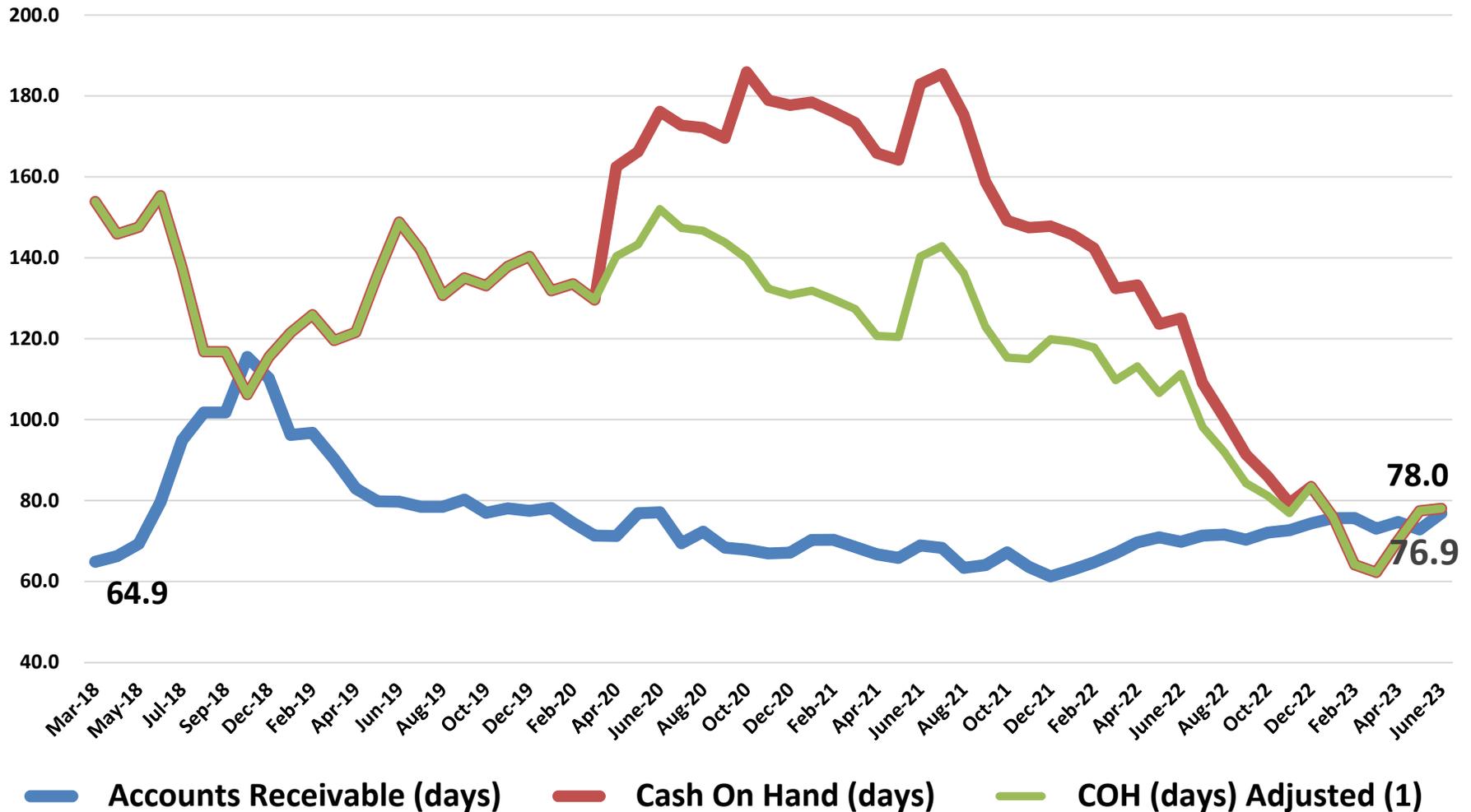
Opportunity Cost of Reducing LOS to National Average - \$82M FY22



Monthly Discharges of Observation Patients by their Length of Stay



Trended Liquidity Ratios



(1) Adjusted for Medicare accelerated payments and the deferral of employer portion of FICA as allowed by the CARES act.

KAWEAH DELTA HEALTH CARE DISTRICT

RATIO ANALYSIS REPORT

June 30, 2023

	June 30,			2021 Moody's		
	Current	Prior	2022	Median Benchmark		
	Month	Month	Audited	Aa	A	Baa
	Value	Value	Value			
LIQUIDITY RATIOS						
Current Ratio (x)	3.3	3.5	2.0	1.4	1.7	1.6
Accounts Receivable (days)	76.9	72.9	69.4	48.3	48.3	47.5
Cash On Hand (days)	78.0	77.4	117.3	341.3	268.4	206.5
Cushion Ratio (x)	10.3	10.2	17.4	52.4	31.5	19.9
Average Payment Period (days)	38.2	41.0	61.8	97.6	86.4	94.0
CAPITAL STRUCTURE RATIOS						
Cash-to-Debt	91.8%	86.9%	128.3%	323.4%	220.4%	170.1%
Debt-To-Capitalization	32.4%	32.9%	31.3%	20.6%	29.1%	36.3%
Debt-to-Cash Flow (x)	(27.9)	33.5	7.2	2.1	2.6	3.3
Debt Service Coverage	(0.4)	0.4	1.4	9.6	6.0	4.5
Maximum Annual Debt Service Coverage (x)	(0.4)	0.3	1.4	8.2	5.5	3.9
Age Of Plant (years)	13.3	13.3	12.3	10.8	12.4	13.5
PROFITABILITY RATIOS						
Operating Margin	(7.1%)	(5.3%)	(4.3%)	4.1%	3.1%	2.2%
Excess Margin	(5.7%)	(4.1%)	(2.9%)	8.1%	6.7%	4.8%
Operating Cash Flow Margin	(2.0%)	(.2%)	1.0%	9.6%	8.8%	7.5%
Return on Assets	(6.0%)	(4.2%)	(2.8%)	5.8%	4.9%	3.9%

KAWEAH DELTA HEALTH CARE DISTRICT
CONSOLIDATED INCOME STATEMENT (000's)
FISCAL YEAR 2022 & 2023

Fiscal Year	Operating Revenue			Operating Expenses				Operating Expenses Total	Operating Income	Non-Operating Income	Net Income	Operating Margin %	Excess Margin
	Net Patient Revenue	Other Operating Revenue	Operating Revenue Total	Personnel Expense	Physician Fees	Supplies Expense	Other Operating Expense						
2022													
Jul-21	51,502	15,035	66,537	32,678	7,922	9,596	15,217	65,413	1,124	582	1,706	1.7%	2.5%
Aug-21	49,714	16,024	65,737	33,434	8,527	13,004	15,414	70,379	(4,642)	990	(3,651)	(7.1%)	(5.5%)
Sep-21	57,879	15,513	73,391	38,332	7,736	11,942	17,438	75,448	(2,056)	(388)	(2,445)	(2.8%)	(3.3%)
Oct-21	55,674	15,592	71,266	36,627	9,674	11,714	17,386	75,402	(4,136)	732	(3,403)	(5.8%)	(4.7%)
Nov-21	54,846	22,162	77,008	33,634	10,261	10,623	15,629	70,146	6,862	7,129	13,991	8.9%	16.6%
Dec-21	51,115	21,796	72,911	37,366	9,479	10,687	15,532	73,064	(153)	2,057	1,904	(0.2%)	2.5%
Jan-22	56,862	17,469	74,331	38,931	9,210	10,913	15,143	74,197	134	568	702	0.2%	0.9%
Feb-22	47,933	17,525	65,458	36,102	8,812	10,406	15,848	71,168	(5,710)	787	(4,924)	(8.7%)	(7.4%)
Mar-22	52,555	16,609	69,164	37,920	9,045	11,180	18,266	76,412	(7,247)	(470)	(7,717)	(10.5%)	(11.2%)
Apr-22	49,729	23,436	73,165	40,828	8,829	10,685	17,410	77,752	(4,588)	(568)	(5,156)	(6.3%)	(7.1%)
May-22	56,673	18,552	75,225	40,040	9,329	11,914	17,162	78,445	(3,220)	(436)	(3,656)	(4.3%)	(4.9%)
Jun-22	51,040	23,102	74,142	50,244	9,413	8,179	19,349	87,186	(13,044)	126	(12,918)	(17.6%)	(17.4%)
2022 FY Total	\$ 635,520	\$ 222,815	\$ 858,335	\$ 456,137	\$ 108,238	\$ 130,842	\$ 199,795	\$ 895,011	\$ (36,676)	\$ 11,108	\$ (25,568)	(4.3%)	(2.9%)
2023													
Jul-22	52,368	18,113	70,480	41,319	8,892	9,593	18,601	78,406	(7,926)	552	(7,374)	(11.2%)	(10.4%)
Aug-22	54,965	17,672	72,637	42,122	9,585	11,666	17,888	81,261	(8,623)	326	(8,297)	(11.9%)	(11.4%)
Sep-22	48,168	17,304	65,472	39,158	8,814	11,642	17,869	77,483	(12,010)	(3,901)	(15,911)	(18.3%)	(25.8%)
Oct-22	54,432	17,291	71,723	40,625	9,859	11,523	15,522	77,529	(5,807)	452	(5,355)	(8.1%)	(7.4%)
Nov-22	56,706	17,741	74,447	36,477	9,645	11,358	17,171	74,650	(203)	150	(53)	(0.3%)	(0.1%)
Dec-22	53,217	18,452	71,670	38,105	8,276	10,632	17,203	74,216	(2,546)	2,901	355	(3.6%)	0.5%
Jan-23	51,048	19,753	70,801	36,862	8,564	10,396	17,296	73,118	(2,317)	1,540	(777)	(3.3%)	(1.1%)
Feb-23	49,325	19,257	68,582	35,624	8,596	10,376	17,510	72,106	(3,524)	834	(2,690)	(5.1%)	(3.9%)
Mar-23	55,391	25,545	80,937	36,907	9,737	11,548	18,919	77,111	3,826	538	4,364	4.7%	5.4%
Apr-23	48,785	22,346	71,131	36,804	9,101	9,779	17,045	72,728	(1,597)	515	(1,081)	(2.2%)	(1.5%)
May-23	50,968	21,508	72,476	37,332	6,827	11,604	17,784	73,547	(1,071)	5,336	4,265	(1.5%)	5.5%
Jun-23	37,922	19,474	57,396	39,448	7,112	9,644	19,618	75,822	(18,426)	1,894	(16,533)	(32.1%)	(27.9%)
2023 FY Total	\$ 613,297	\$ 234,456	\$ 847,754	\$ 460,784	\$ 105,007	\$ 129,761	\$ 212,427	\$ 907,978	\$ (60,225)	\$ 11,138	\$ (49,087)	(7.1%)	(5.7%)
FYTD Budget	671,551	223,442	894,993	456,079	110,105	126,656	213,367	906,207	(11,213)	4,371	(6,842)	(1.3%)	(0.8%)
Variance	\$ (58,254)	\$ 11,014	\$ (47,240)	\$ 4,705	\$ (5,098)	\$ 3,105	\$ (940)	\$ 1,772	\$ (49,011)	\$ 6,767	\$ (42,245)		
Current Month Analysis													
Jun-23	\$ 37,922	\$ 19,474	\$ 57,396	\$ 39,448	\$ 7,112	\$ 9,644	\$ 19,618	\$ 75,822	\$ (18,426)	\$ 1,894	\$ (16,533)	(32.1%)	(27.9%)
Budget	55,281	18,636	73,916	37,516	9,316	10,702	17,935	75,470	(1,554)	384	(1,170)	(2.1%)	(1.6%)
Variance	\$ (17,358)	\$ 838	\$ (16,520)	\$ 1,932	\$ (2,204)	\$ (1,058)	\$ 1,683	\$ 353	\$ (16,873)	\$ 1,510	(15,363)		

KAWEAH DELTA HEALTH CARE DISTRICT

FISCAL YEAR 2022 & 2023

Fiscal Year	Patient Days	ADC	Adjusted	I/P Revenue %	DFR &	Net Patient	Personnel	Physician	Supply	Total	Personnel Expense/ Net Patient Revenue	Physician Fees/ Net Patient Revenue	Supply	Total
			Patient Days		Bad Debt %	Revenue/ Ajusted Patient Day	Expense/ Ajusted Patient Day	Fees/ Ajusted Patient Day	Expense/ Ajusted Patient Day	Operating Expense/ Ajusted Patient Day			Expense/ Net Patient Revenue	Operating Expense/ Net Patient Revenue
2022														
Jul-21	13,388	432	26,085	51.3%	76.2%	1,974	1,253	304	368	2,508	63.4%	15.4%	18.6%	127.0%
Aug-21	14,421	465	27,742	52.0%	77.3%	1,792	1,205	307	469	2,537	67.3%	17.2%	26.2%	141.6%
Sep-21	14,836	495	28,344	52.3%	75.0%	2,042	1,352	273	421	2,662	66.2%	13.4%	20.6%	130.4%
Oct-21	15,518	501	28,267	54.9%	75.8%	1,970	1,296	342	414	2,667	65.8%	17.4%	21.0%	135.4%
Nov-21	13,969	466	26,571	52.6%	74.8%	2,064	1,266	386	400	2,640	61.3%	18.7%	19.4%	127.9%
Dec-21	14,305	461	27,106	52.8%	76.4%	1,886	1,378	350	394	2,695	73.1%	18.5%	20.9%	142.9%
Jan-22	14,611	471	26,955	54.2%	74.3%	2,109	1,444	342	405	2,753	68.5%	16.2%	19.2%	130.5%
Feb-22	13,263	474	24,973	53.1%	75.8%	1,919	1,446	353	417	2,850	75.3%	18.4%	21.7%	148.5%
Mar-22	13,570	438	27,296	49.7%	76.7%	1,925	1,389	331	410	2,799	72.2%	17.2%	21.3%	145.4%
Apr-22	12,698	423	26,159	48.5%	77.0%	1,901	1,561	338	408	2,972	82.1%	17.8%	21.5%	156.4%
May-22	13,858	447	28,283	49.0%	74.6%	2,004	1,416	330	421	2,774	70.7%	16.5%	21.0%	138.4%
Jun-22	13,603	453	27,788	49.0%	77.5%	1,837	1,808	339	294	3,137	98.4%	18.4%	16.0%	170.8%
2022 FY Total	168,040	460	325,602	51.6%	75.9%	1,952	1,401	332	402	2,749	71.8%	17.0%	20.6%	140.8%
2023														
Jul-22	13,910	449	27,688	50.2%	75.6%	1,891	1,492	321	346	2,832	78.9%	17.0%	18.3%	149.7%
Aug-22	13,865	447	29,148	47.6%	76.4%	1,886	1,445	329	400	2,788	76.6%	17.4%	21.2%	147.8%
Sep-22	12,768	426	27,367	46.7%	77.4%	1,760	1,431	322	425	2,831	81.3%	18.3%	24.2%	160.9%
Oct-22	13,119	423	27,421	47.8%	75.7%	1,985	1,482	360	420	2,827	74.6%	18.1%	21.2%	142.4%
Nov-22	12,904	430	26,955	47.9%	74.6%	2,104	1,353	358	421	2,769	64.3%	17.0%	20.0%	131.6%
Dec-22	13,587	438	27,686	49.1%	76.2%	1,922	1,376	299	384	2,681	71.6%	15.6%	20.0%	139.5%
Jan-23	13,396	432	27,042	49.5%	77.5%	1,888	1,363	317	384	2,704	72.2%	16.8%	20.4%	143.2%
Feb-23	11,916	426	24,665	48.3%	76.3%	2,000	1,444	349	421	2,923	72.2%	17.4%	21.0%	146.2%
Mar-23	12,905	416	27,485	47.0%	76.1%	2,015	1,343	354	420	2,806	66.6%	17.6%	20.8%	139.2%
Apr-23	11,268	376	24,106	46.7%	77.7%	2,024	1,527	378	406	3,017	75.4%	18.7%	20.0%	149.1%
May-23	12,056	389	24,945	48.3%	77.7%	2,043	1,497	274	465	2,948	73.2%	13.4%	22.8%	144.3%
Jun-23	11,708	390	24,803	47.2%	82.4%	1,529	1,590	287	389	3,057	104.0%	18.8%	25.4%	199.9%
2023 FY Total	153,402	420	319,413	48.0%	77.0%	1,920	1,443	329	406	2,843	75.1%	17.1%	21.2%	148.0%
FYTD Budget	176,685	484	338,246	52.2%	75.2%	1,985	1,348	326	374	2,837	67.9%	16.4%	18.9%	134.9%
Variance	(23,283)	(64)	(18,833)	(4.2%)	1.8%	(65)	94	3	32	6	7.2%	0.7%	2.3%	13.1%
Current Month Analysis														
Jun-23	11,708	390	24,803	47.2%	82.4%	1,529	1,590	287	389	3,057	104.0%	18.8%	25.4%	199.9%
Budget	14,451	482	27,904	51.8%	75.1%	1,981	1,344	334	384	3,043	67.9%	16.9%	19.4%	136.5%
Variance	(2,743)	(91)	(3,101)	(4.6%)	7.3%	(452)	246	(47)	5	14	36.2%	1.9%	6.1%	63.4%

**KAWEAH DELTA HEALTH CARE DISTRICT
CONSOLIDATED STATEMENTS OF NET POSITION (000's)**

	Jun-23	May-23	Change	% Change	Jun-22 (Audited)
ASSETS AND DEFERRED OUTFLOWS					
CURRENT ASSETS					
Cash and cash equivalents	\$ 3,628	\$ 10,983	\$ (7,355)	-66.97%	\$ 21,693
Current Portion of Board designated and trusted assets	33,784	43,903	(10,119)	-23.05%	14,121
Accounts receivable:					
Net patient accounts	133,932	138,779	(4,847)	-3.49%	135,946
Other receivables	31,196	41,119	(9,923)	-24.13%	27,575
	165,128	179,898	(14,770)	-8.21%	163,521
Inventories	13,581	13,209	371	2.81%	14,025
Medicare and Medi-Cal settlements	72,122	77,755	(5,633)	-7.24%	58,593
Prepaid expenses	10,327	11,328	(1,001)	-8.84%	13,050
Total current assets	298,570	337,076	(38,506)	-11.42%	285,004
NON-CURRENT CASH AND INVESTMENTS -					
less current portion					
Board designated cash and assets	174,916	165,893	9,023	5.44%	266,148
Revenue bond assets held in trust	(0)	0	(0)	-195.54%	8
Assets in self-insurance trust fund	956	969	(14)	-1.40%	1,040
Total non-current cash and investments	175,872	166,862	9,009	5.40%	267,197
INTANGIBLE RIGHT TO USE LEASE,	11,249	6,875	4,374	63.62%	14,376
net of accumulated amortization					
CAPITAL ASSETS					
Land	17,542	17,542	-	0.00%	17,542
Buildings and improvements	427,105	426,963	142	0.03%	425,542
Equipment	328,663	327,539	1,124	0.34%	325,209
Construction in progress	25,413	25,886	(473)	-1.83%	15,620
	798,723	797,930	793	0.10%	783,912
Less accumulated depreciation	485,406	482,649	2,756	0.57%	459,744
	313,318	315,281	(1,963)	-0.62%	324,168
Property under capital leases -					
less accumulated amortization	(691)	(634)	(58)	9.09%	0
Total capital assets	312,627	314,647	(2,021)	-0.64%	324,168
OTHER ASSETS					
Property not used in operations	1,533	1,537	(4)	-0.28%	1,584
Health-related investments	2,841	3,928	(1,087)	-27.68%	4,620
Other	13,350	13,509	(159)	-1.18%	12,511
Total other assets	17,724	18,974	(1,250)	-6.59%	18,715
Total assets	816,041	844,435	(28,394)	-3.36%	909,460
DEFERRED OUTFLOWS					
	33,835	33,868	(33)	-0.10%	34,410
Total assets and deferred outflows	\$ 849,876	\$ 878,303	\$ (28,427)	-3.24%	\$ 943,870

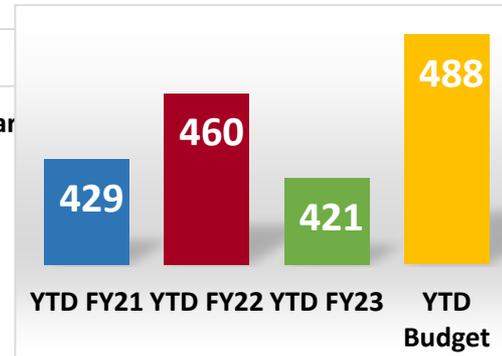
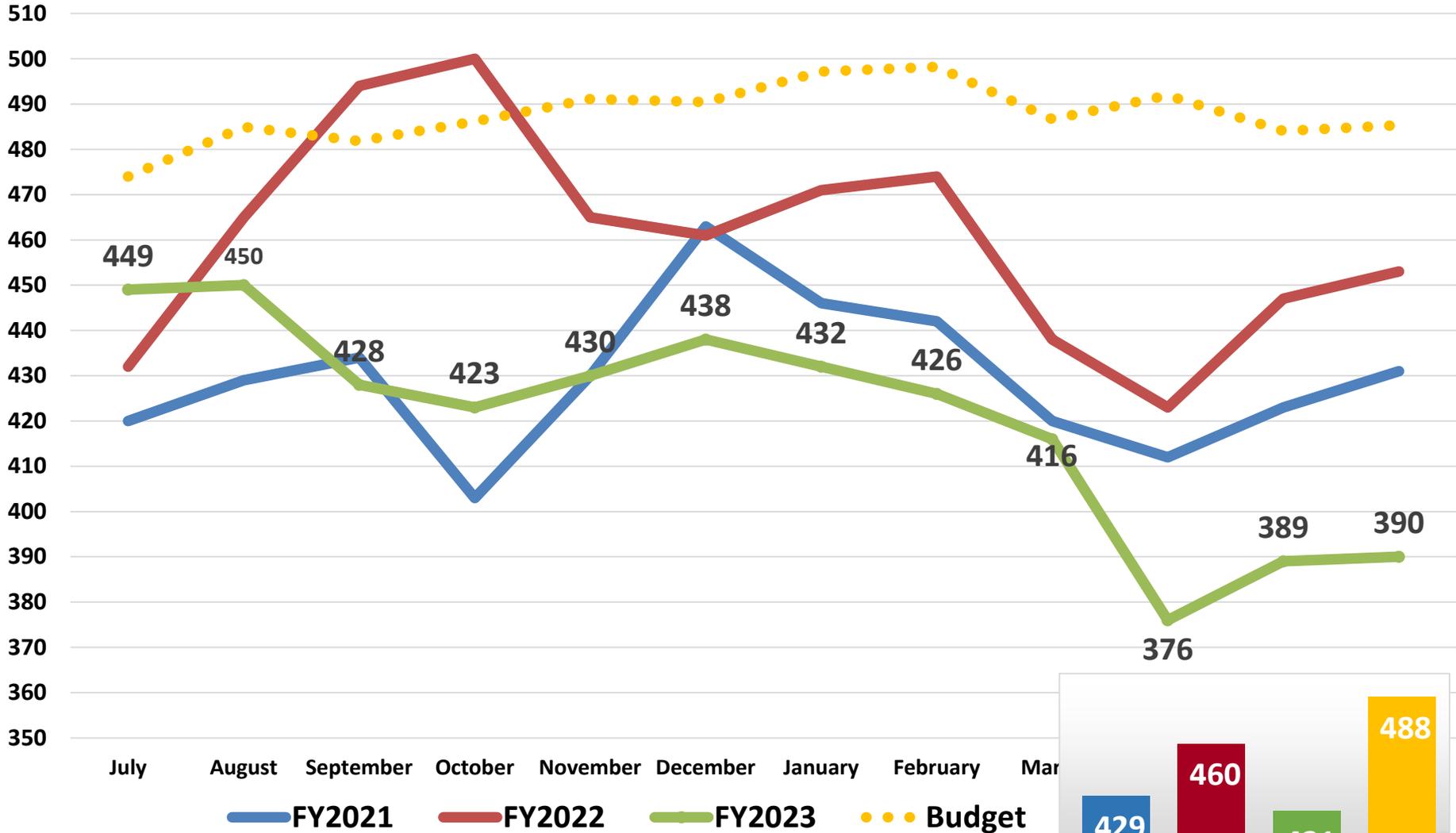
KAWEAH DELTA HEALTH CARE DISTRICT
CONSOLIDATED STATEMENTS OF NET POSITION (000's)

	Jun-23	May-23	Change	% Change	Jun-22 (Audited)
LIABILITIES AND NET ASSETS					
CURRENT LIABILITIES					
Accounts payable and accrued expenses	\$ 30,063	\$ 31,922	\$ (1,860)	-5.83%	\$ 62,542
Accrued payroll and related liabilities	51,024	56,183	(5,159)	-9.18%	70,913
Long-term debt, current portion	10,105	9,595	510	5.32%	11,759
Total current liabilities	91,192	97,700	(6,508)	-6.66%	145,214
LEASE LIABILITY, net of current portion	11,355	7,011	4,344	61.95%	14,677
LONG-TERM DEBT, less current portion					
Bonds payable	229,432	239,544	(10,112)	-4.22%	239,618
Capital leases	-	-	-	#DIV/0!	0
Notes payable	17,745	17,745	-	0.00%	7,895
Total long-term debt	247,177	257,289	(10,112)	-3.93%	247,512
NET PENSION LIABILITY	51,352	48,880	2,473	5.06%	39,789
OTHER LONG-TERM LIABILITIES	30,575	32,739	(2,165)	-6.61%	30,968
Total liabilities	431,651	443,619	(11,968)	-2.70%	463,484
NET ASSETS					
Invested in capital assets, net of related debt	58,471	50,924	7,548	14.82%	68,426
Restricted	31,148	37,285	(6,137)	-16.46%	31,905
Unrestricted	328,606	346,475	(17,869)	-5.16%	365,378
Total net position	418,225	434,684	(16,459)	-3.79%	465,709
Total liabilities and net position	\$ 849,876	\$ 878,303	\$ (28,427)	-3.24%	\$ 943,870

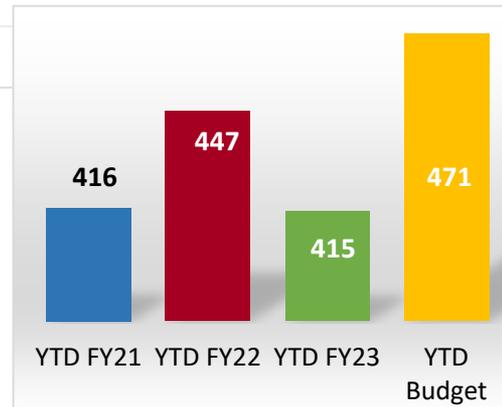
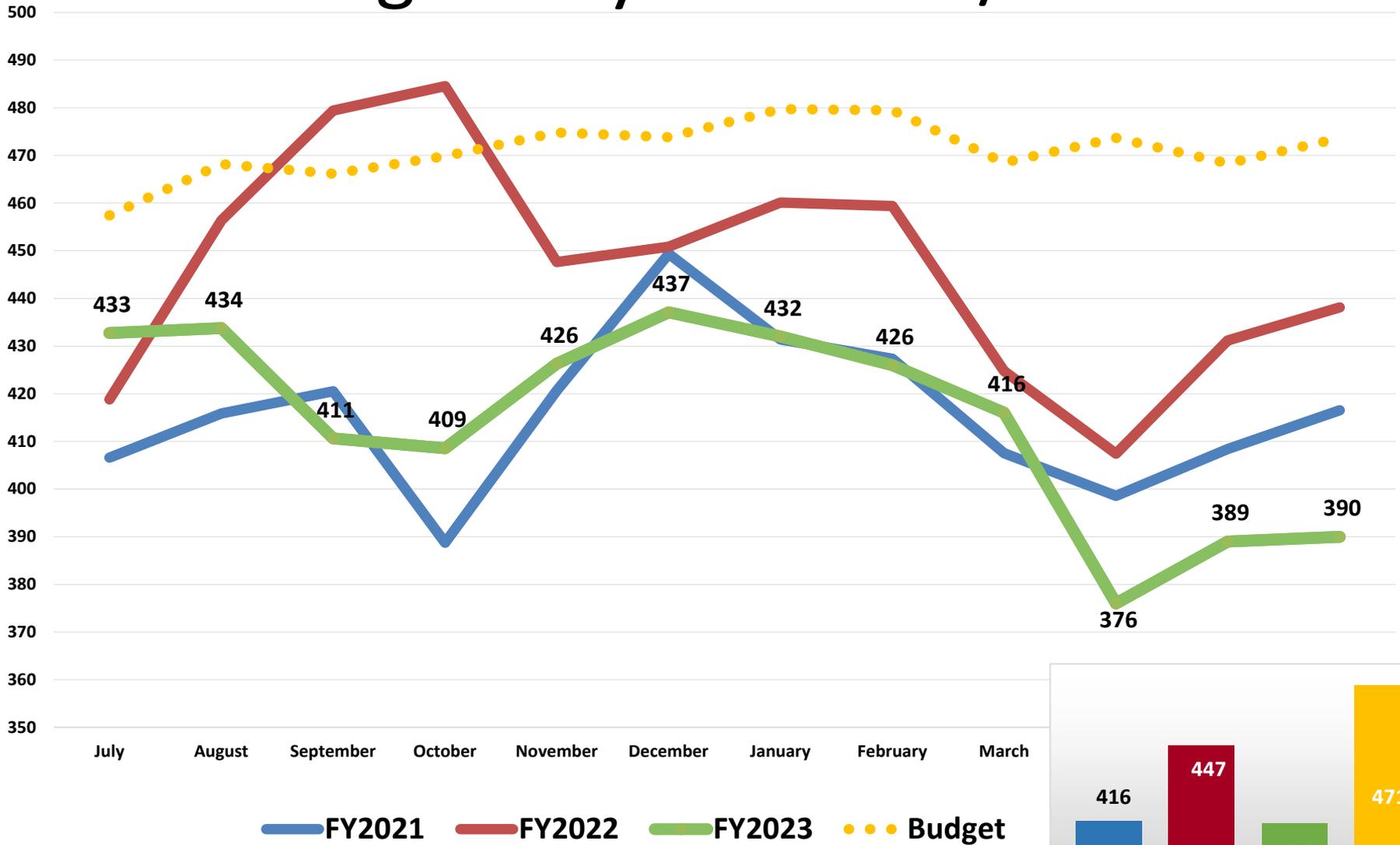
Statistical Report

June 2023

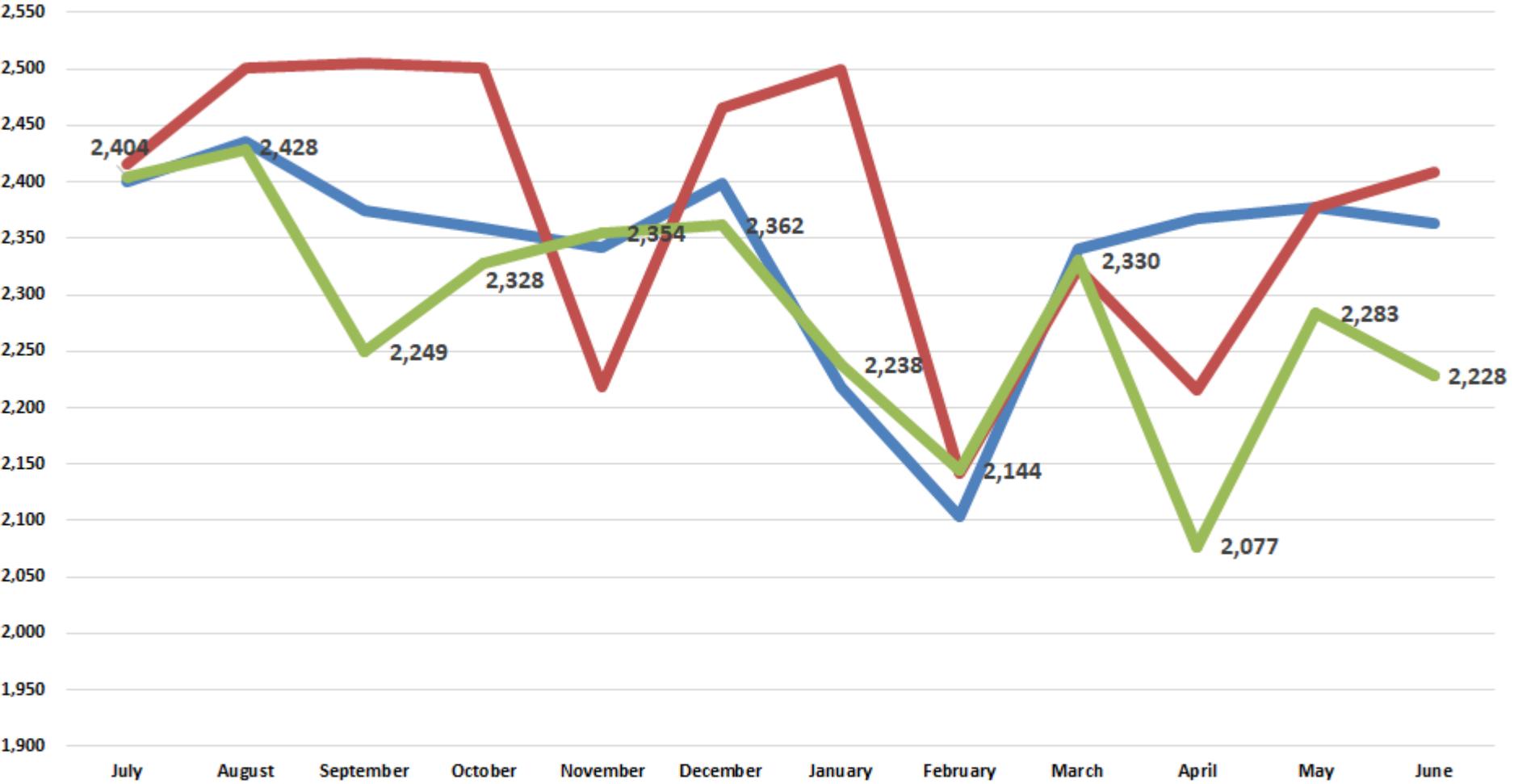
Average Daily Census



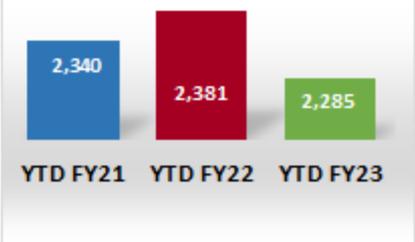
Average Daily Census w/o TCS



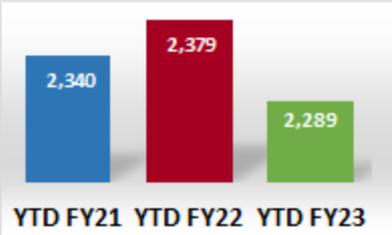
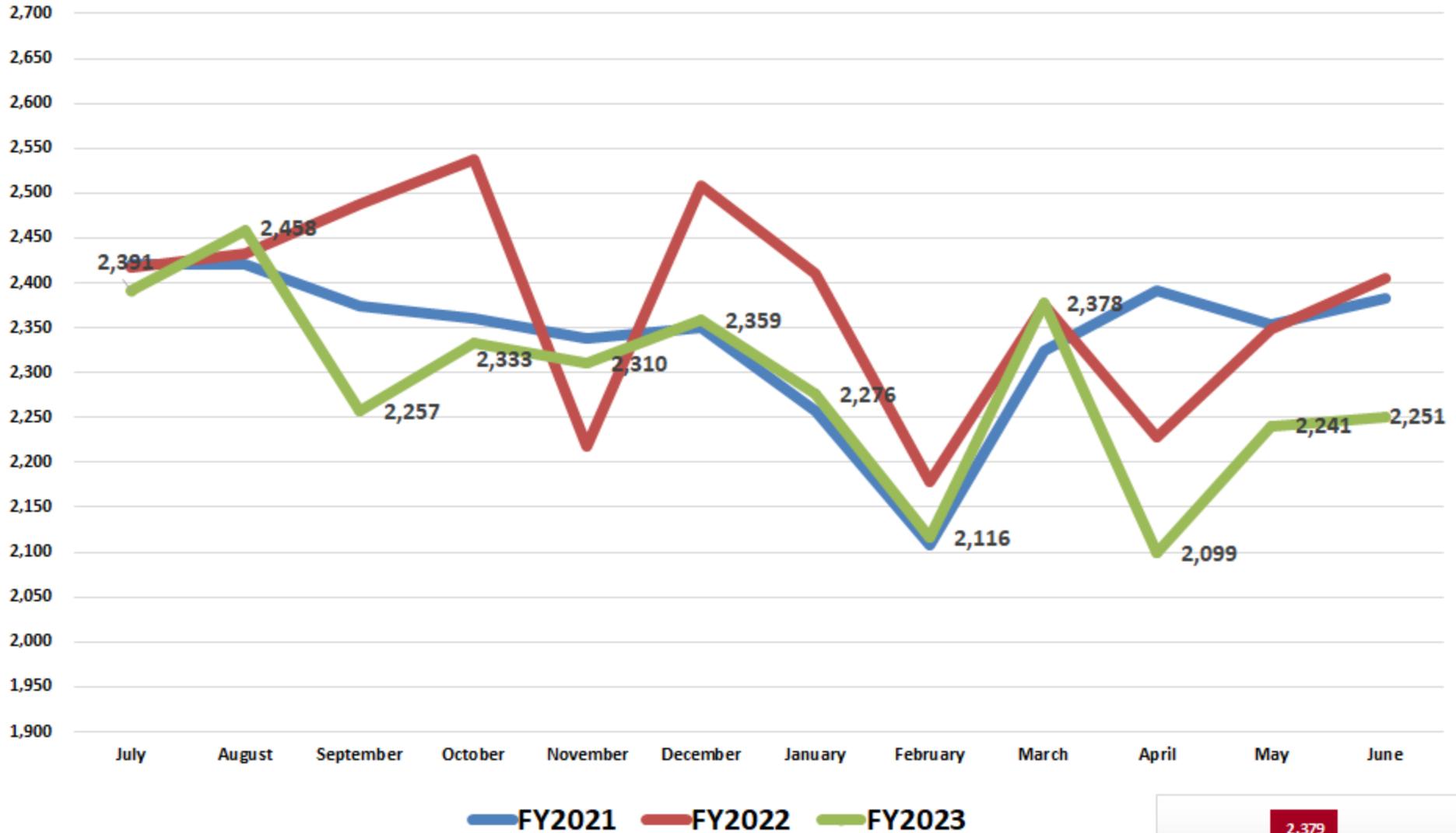
Admissions



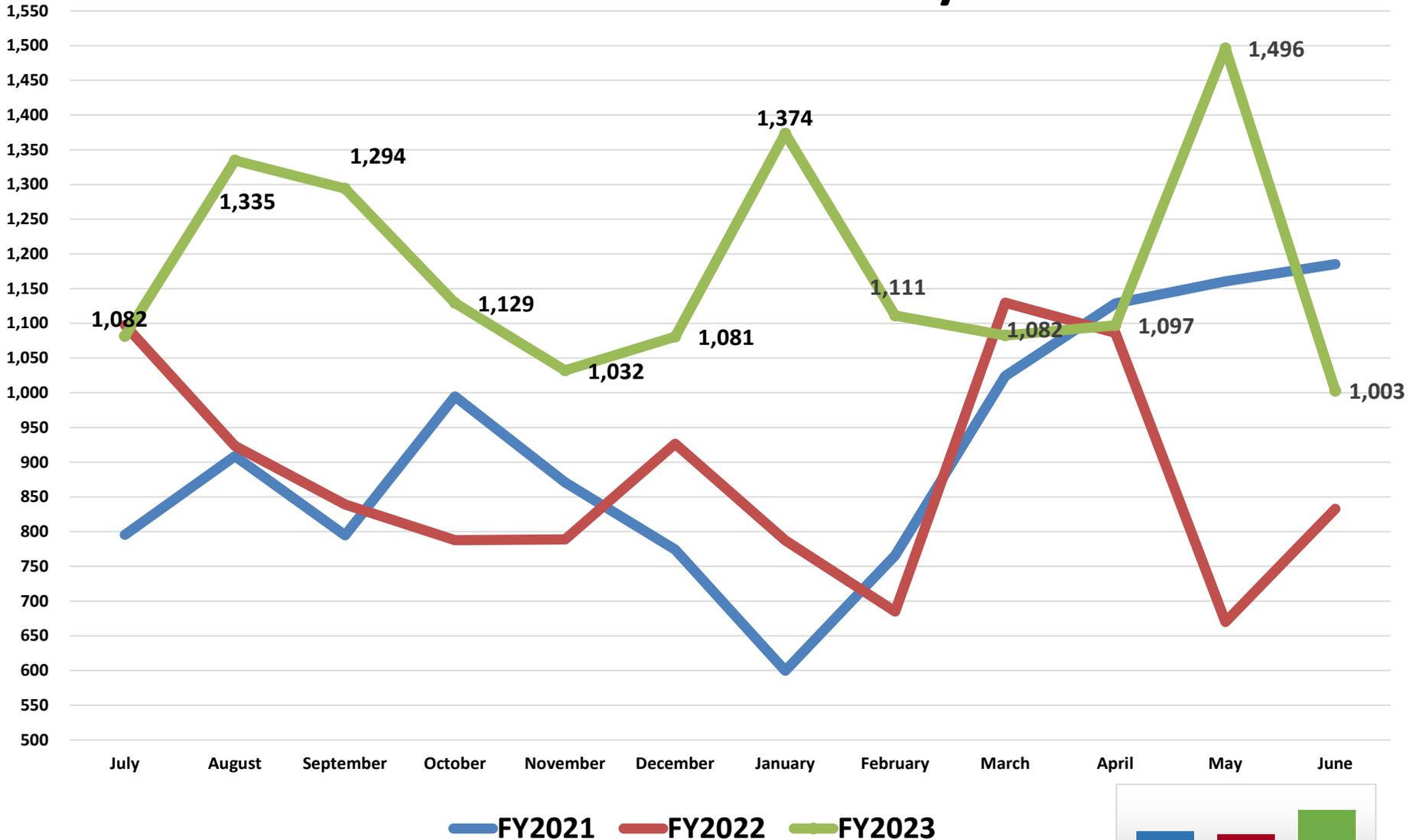
— **FY2021**
 — **FY2022**
 — **FY2023**



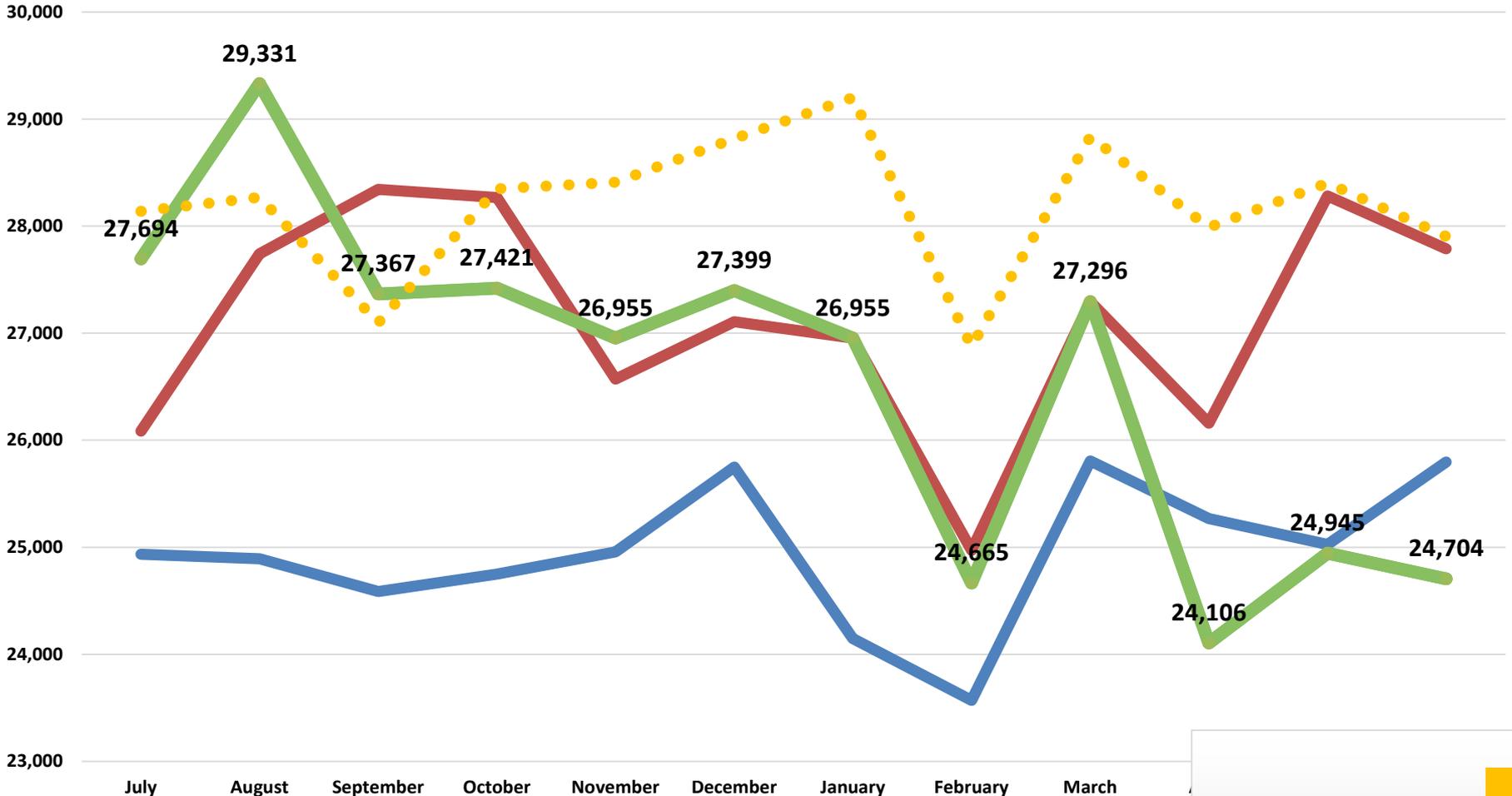
Discharges



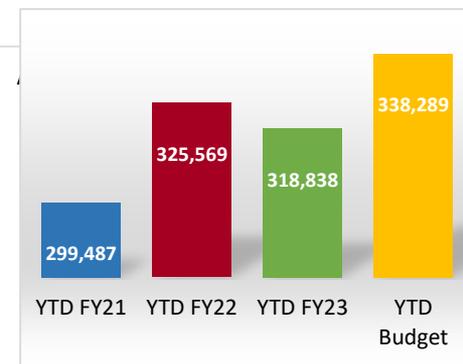
Observation Days



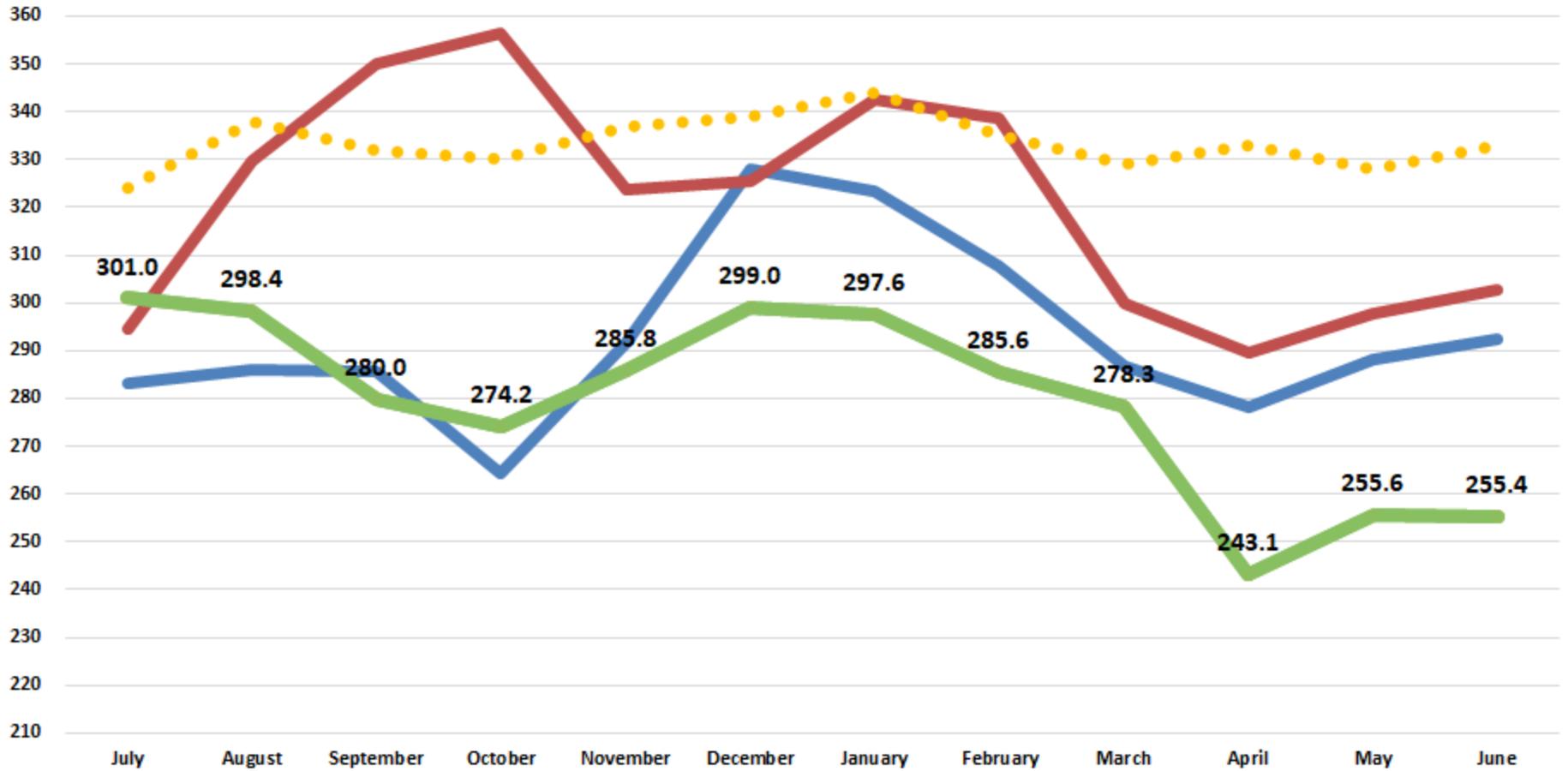
Adjusted Patient Days



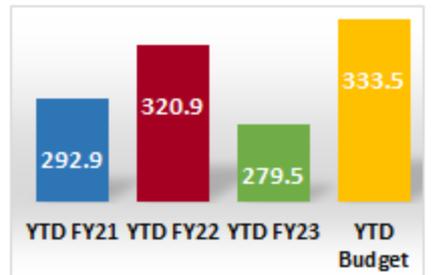
— **FY2021**
 — **FY2022**
 — **FY2023**
 ●●● **Budget**



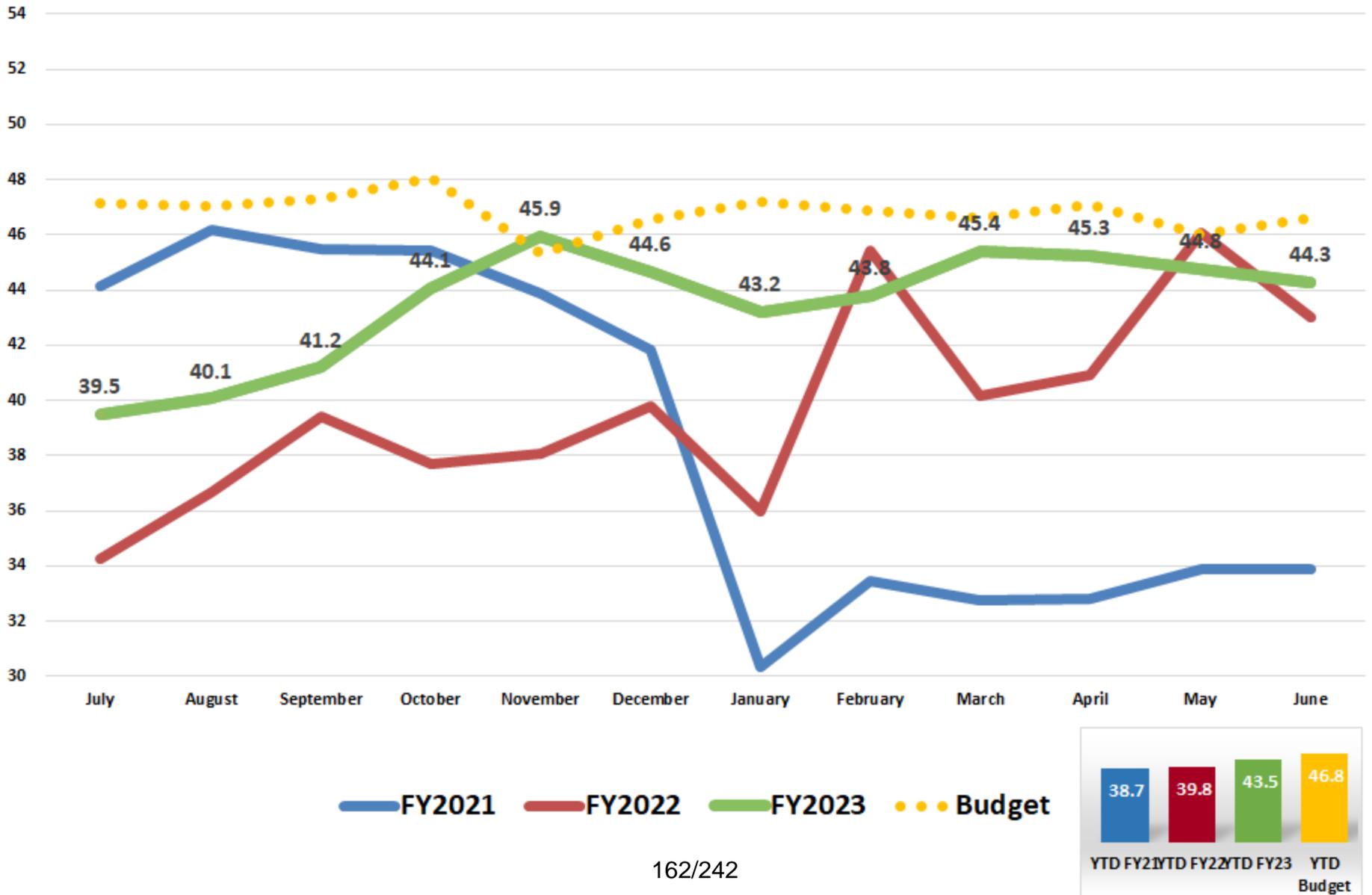
Medical Center (Avg Patients Per Day)



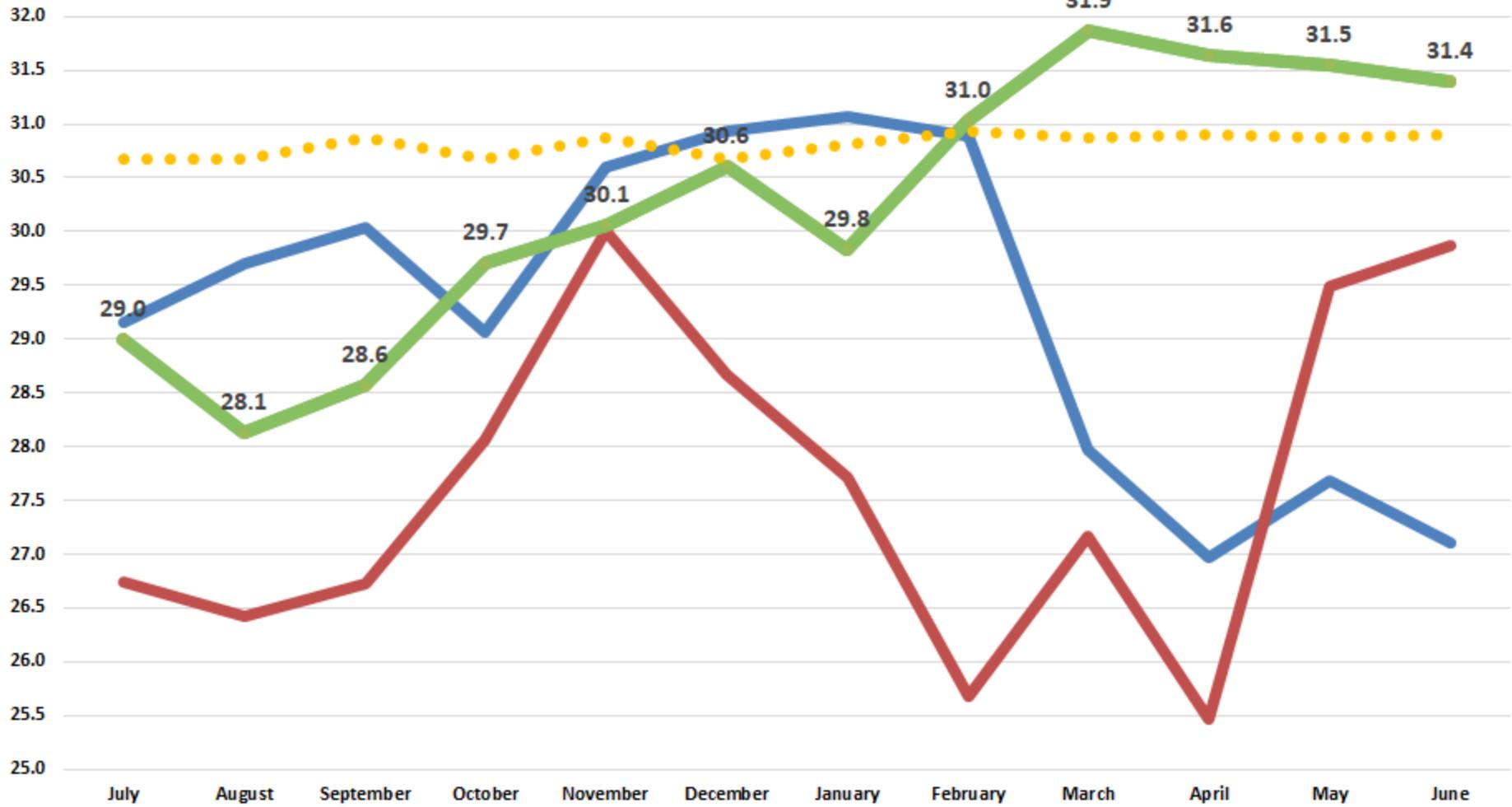
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



Acute I/P Psych (Avg Patients Per Day)



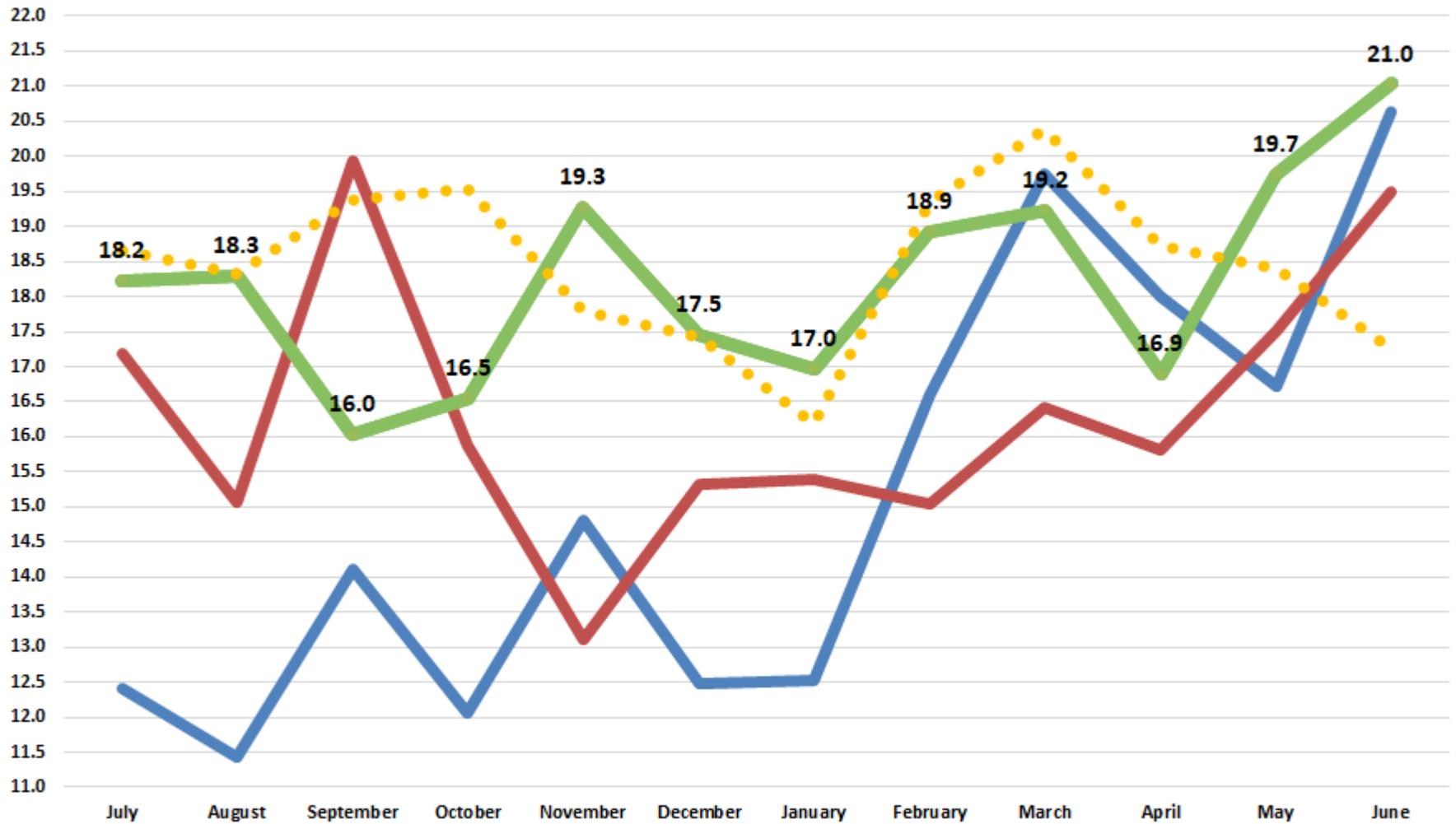
Sub-Acute - Avg Patients Per Day



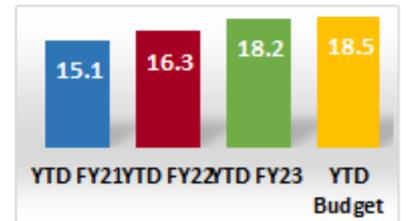
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



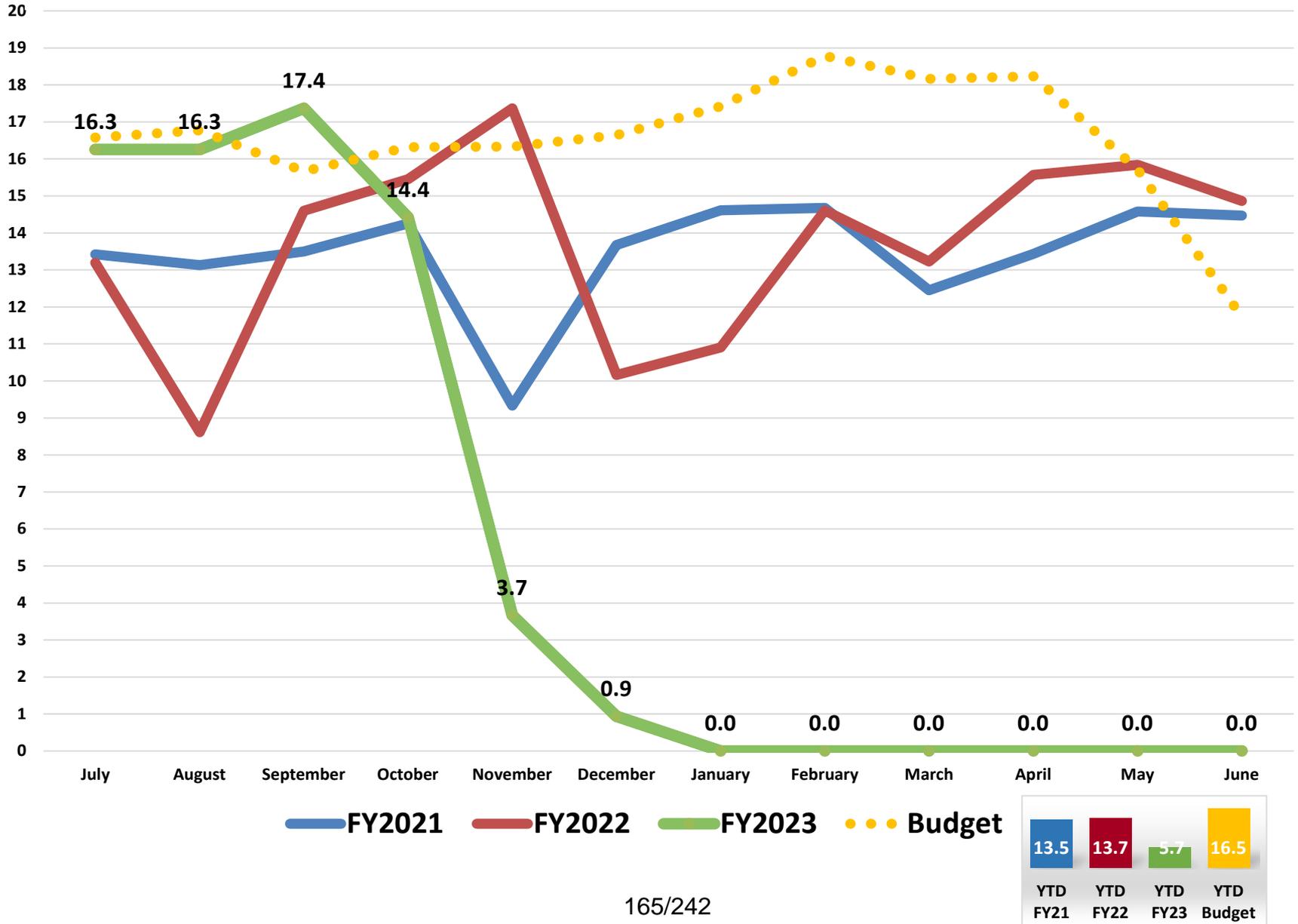
Rehabilitation Hospital - Avg Patients Per Day



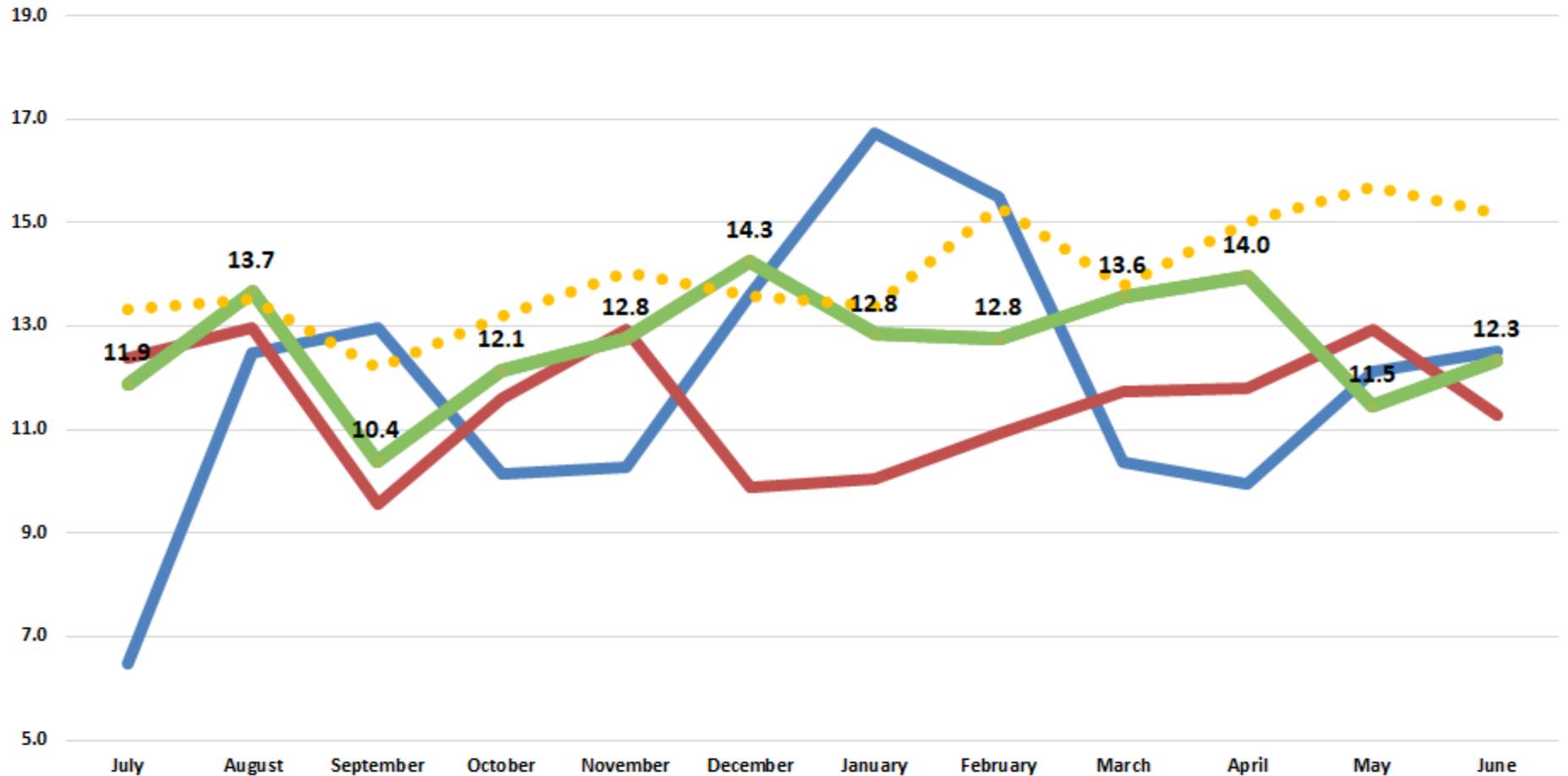
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



Transitional Care Services (TCS) - Avg Patients Per Day



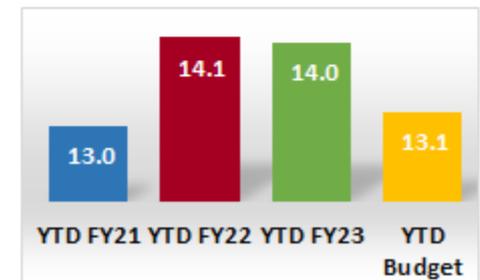
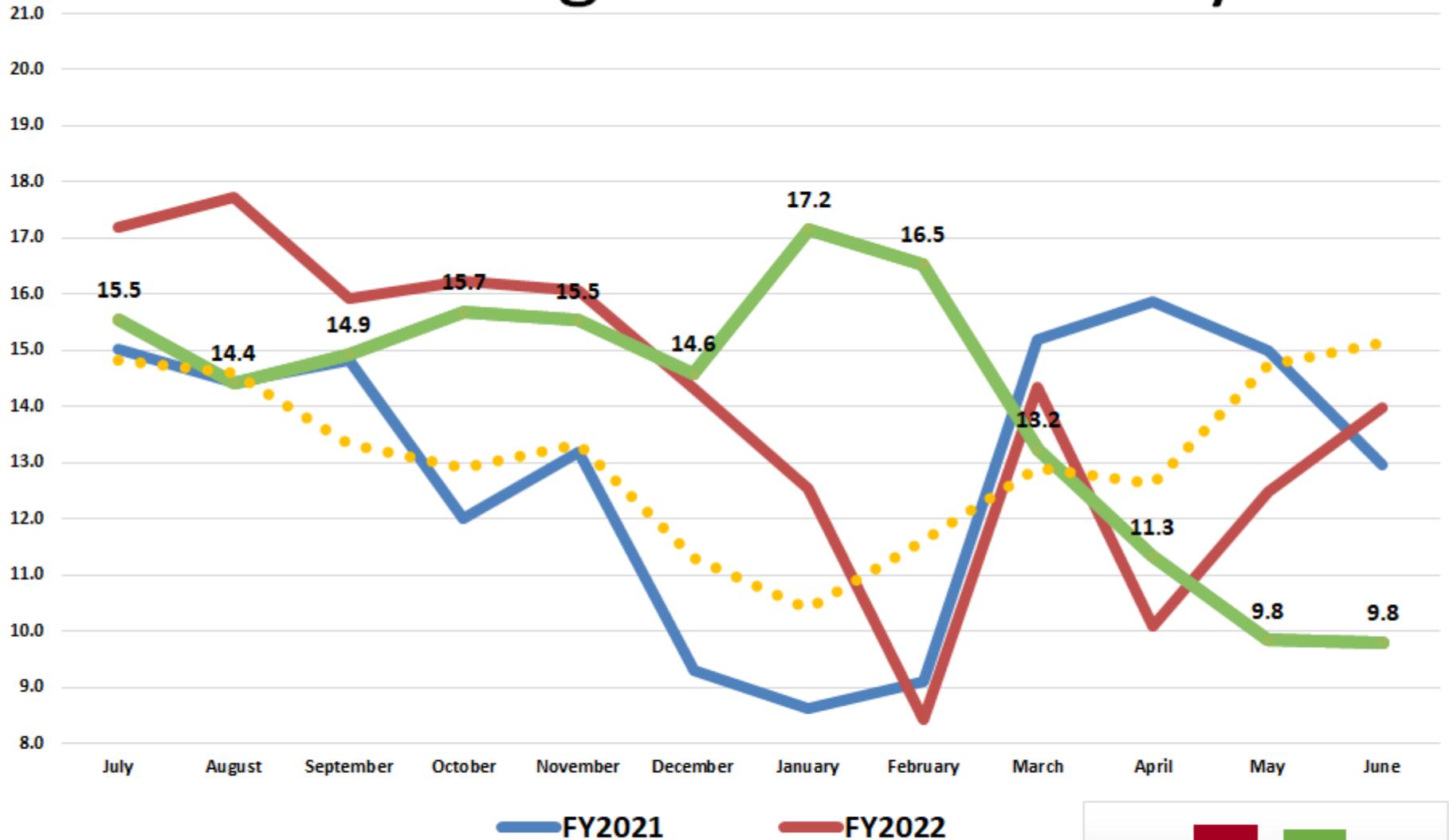
TCS Ortho - Avg Patients Per Day



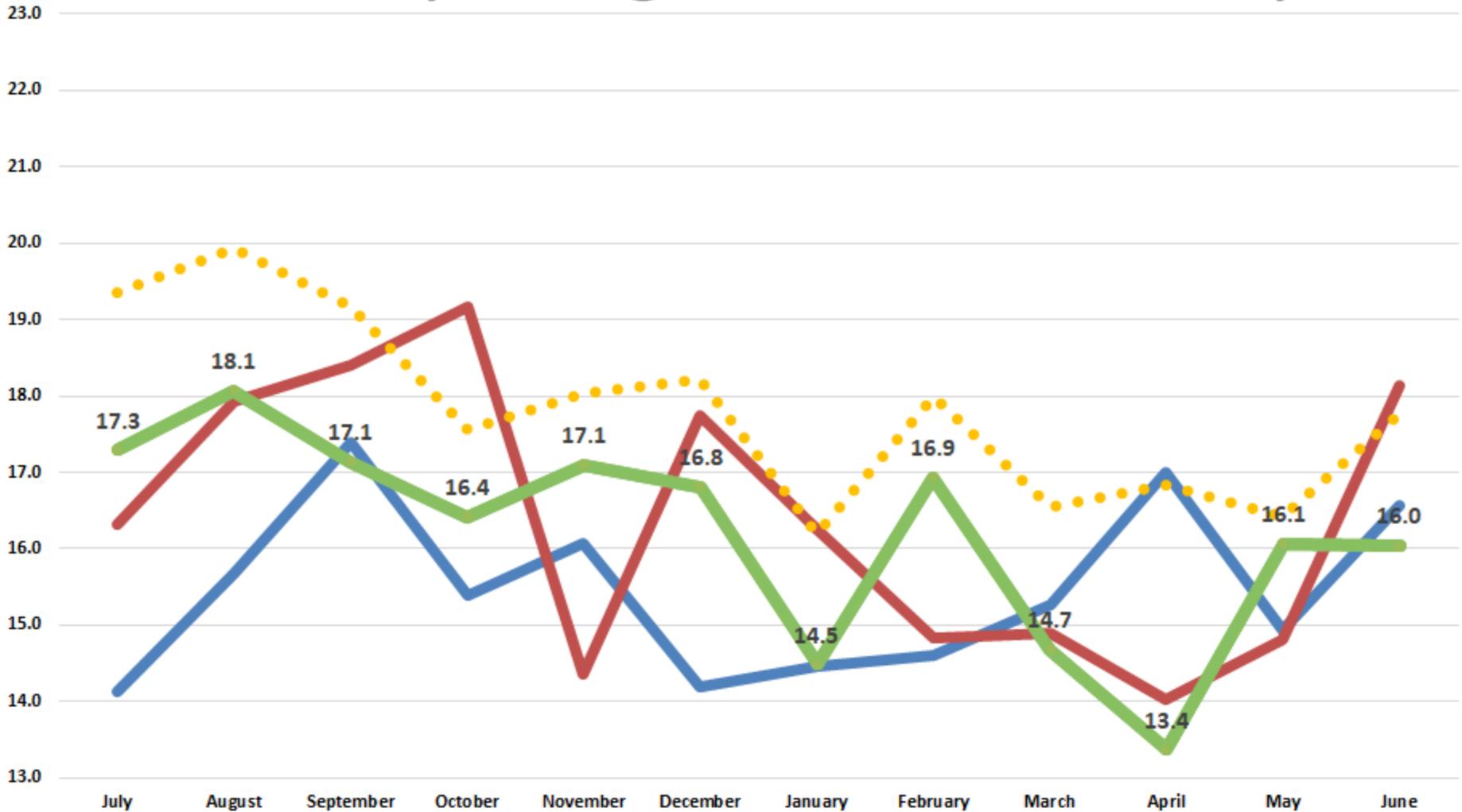
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



NICU - Avg Patients Per Day



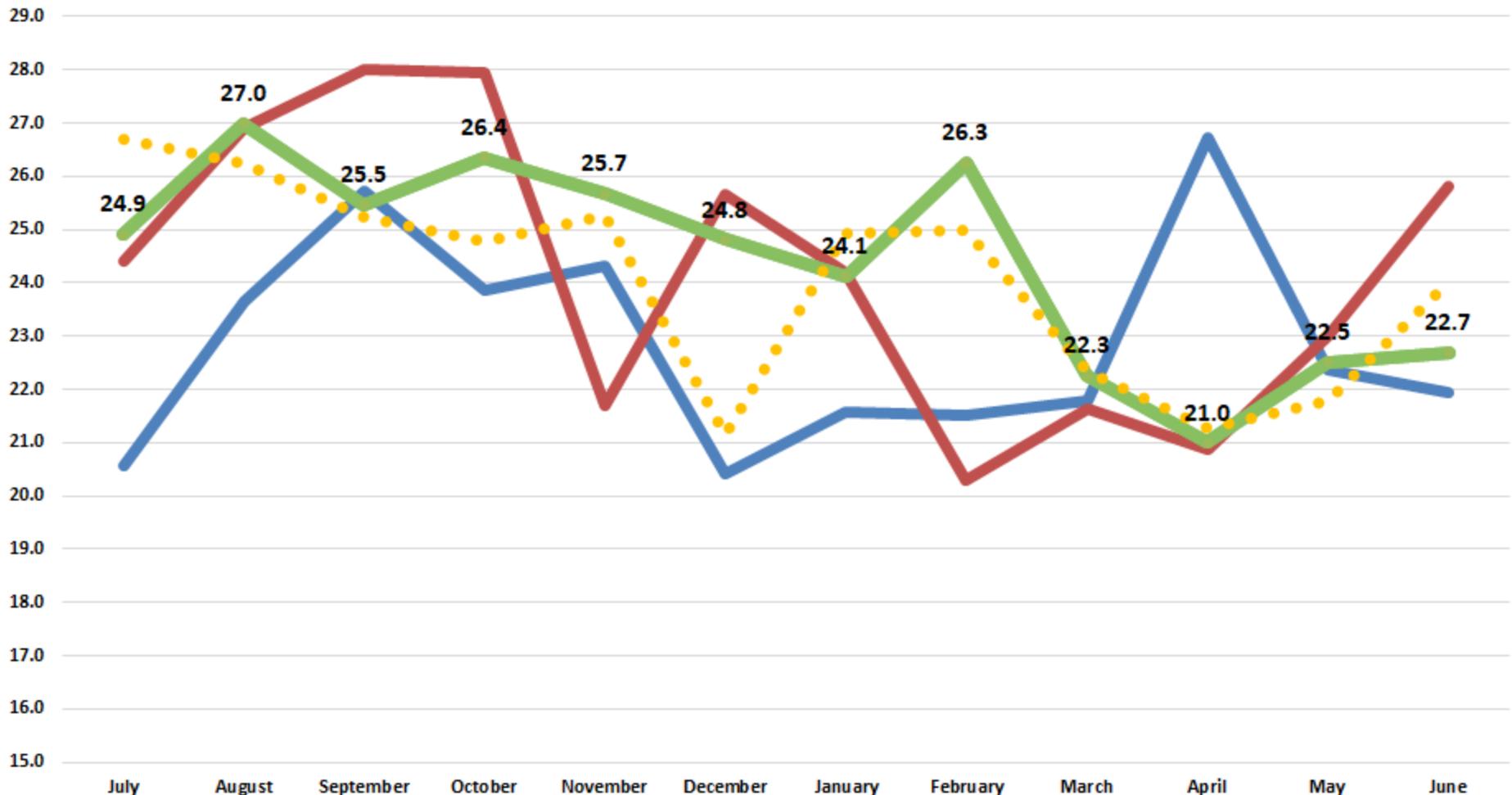
Nursery - Avg Patients Per Day



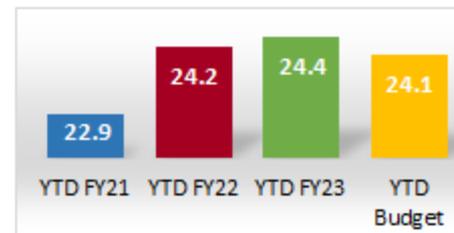
— FY2021
 — FY2022
 — FY2023
 ••• Budget



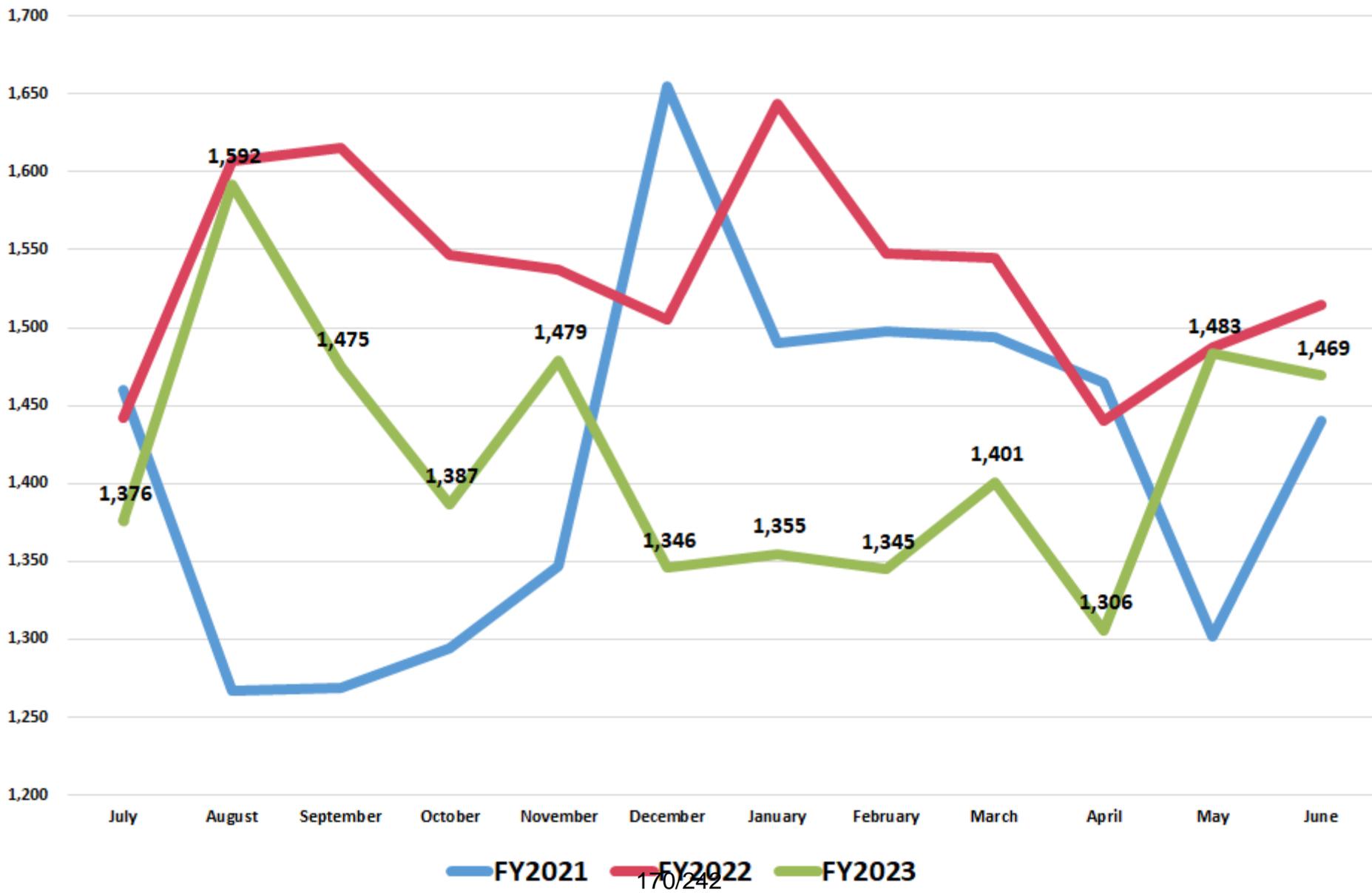
Obstetrics - Avg Patients Per Day



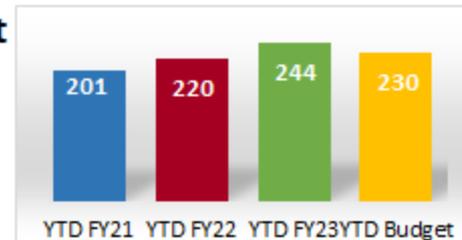
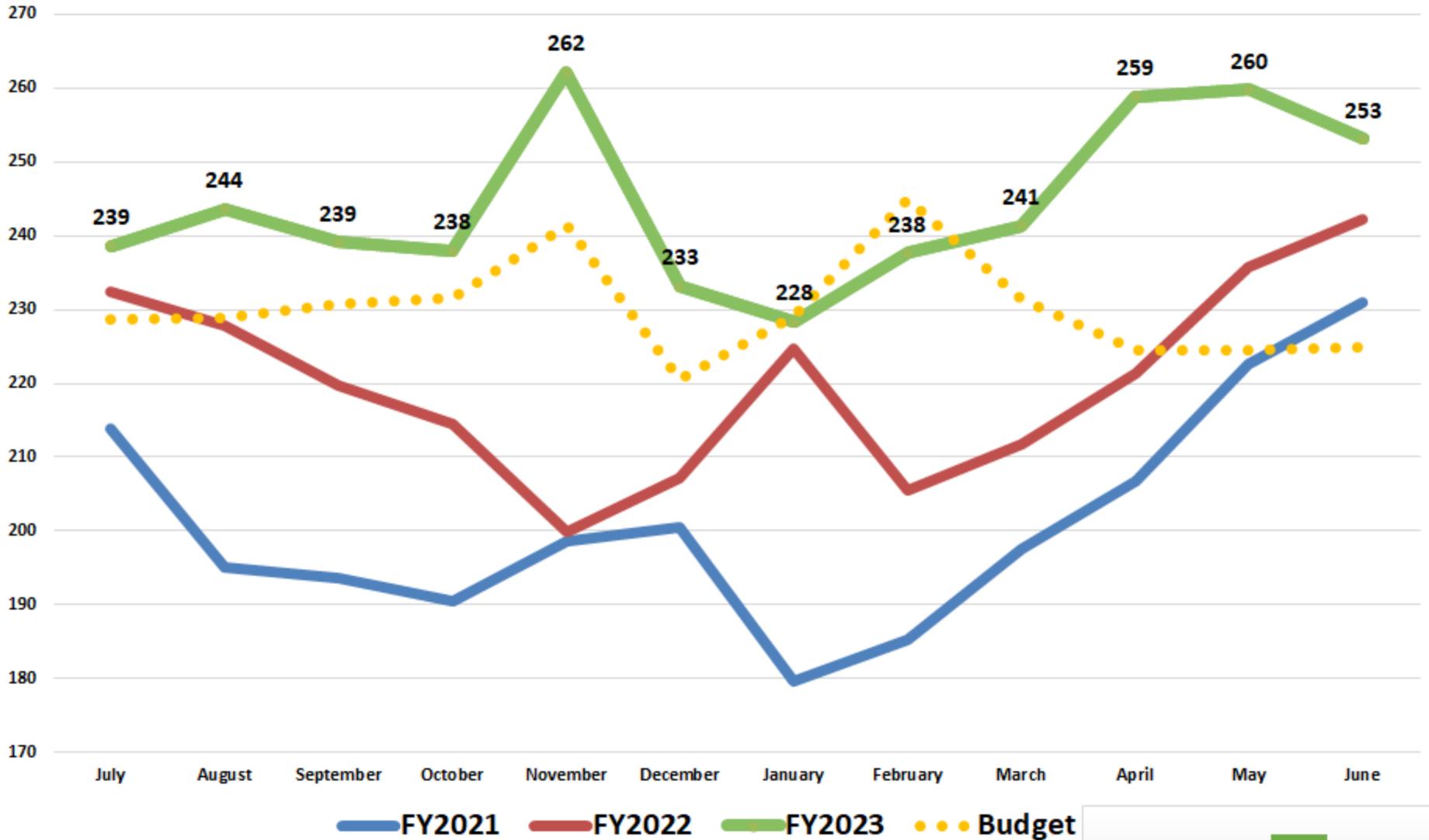
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



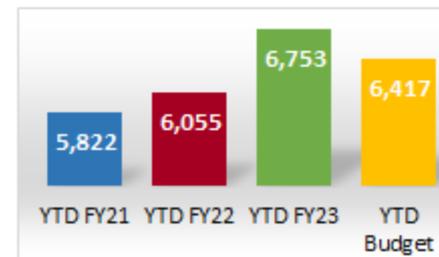
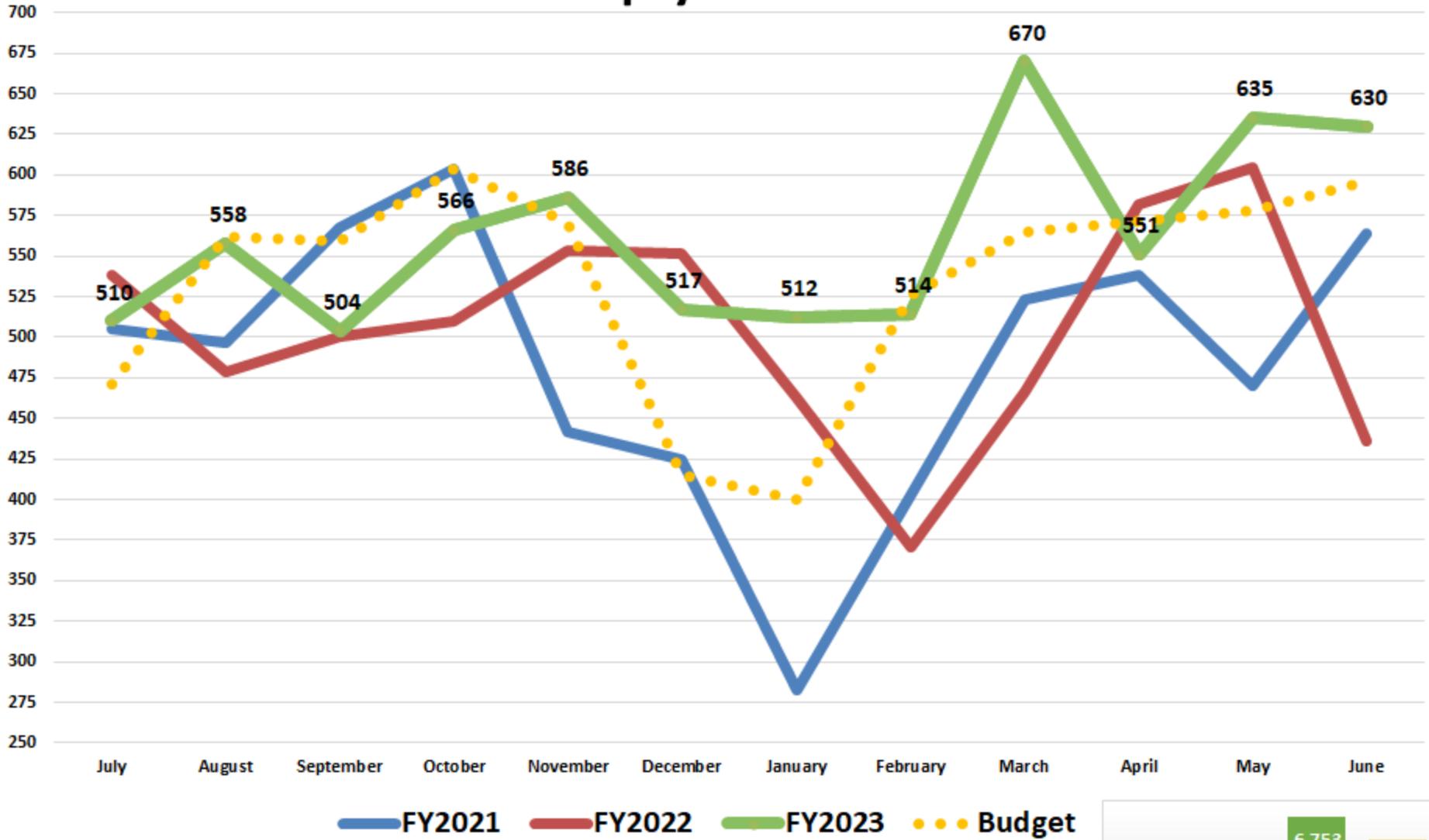
Outpatient Registrations Per Day



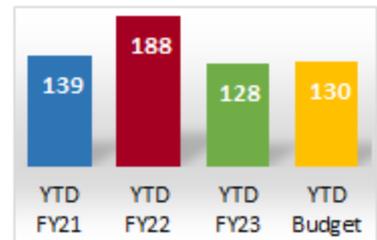
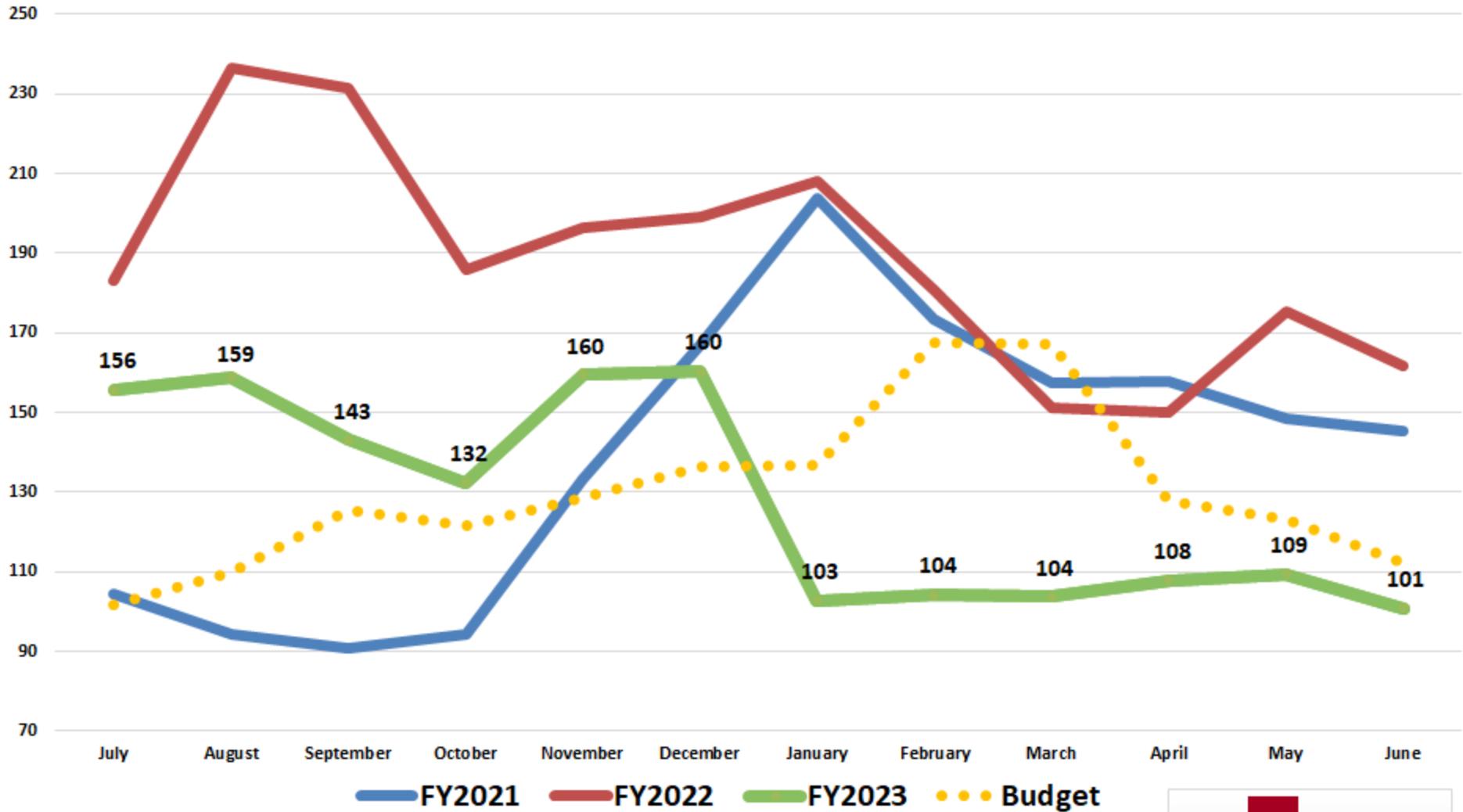
ED - Avg Treated Per Day



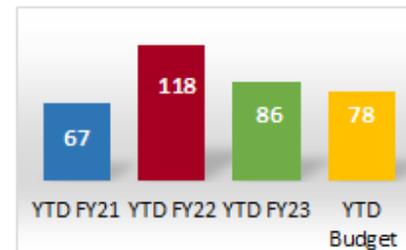
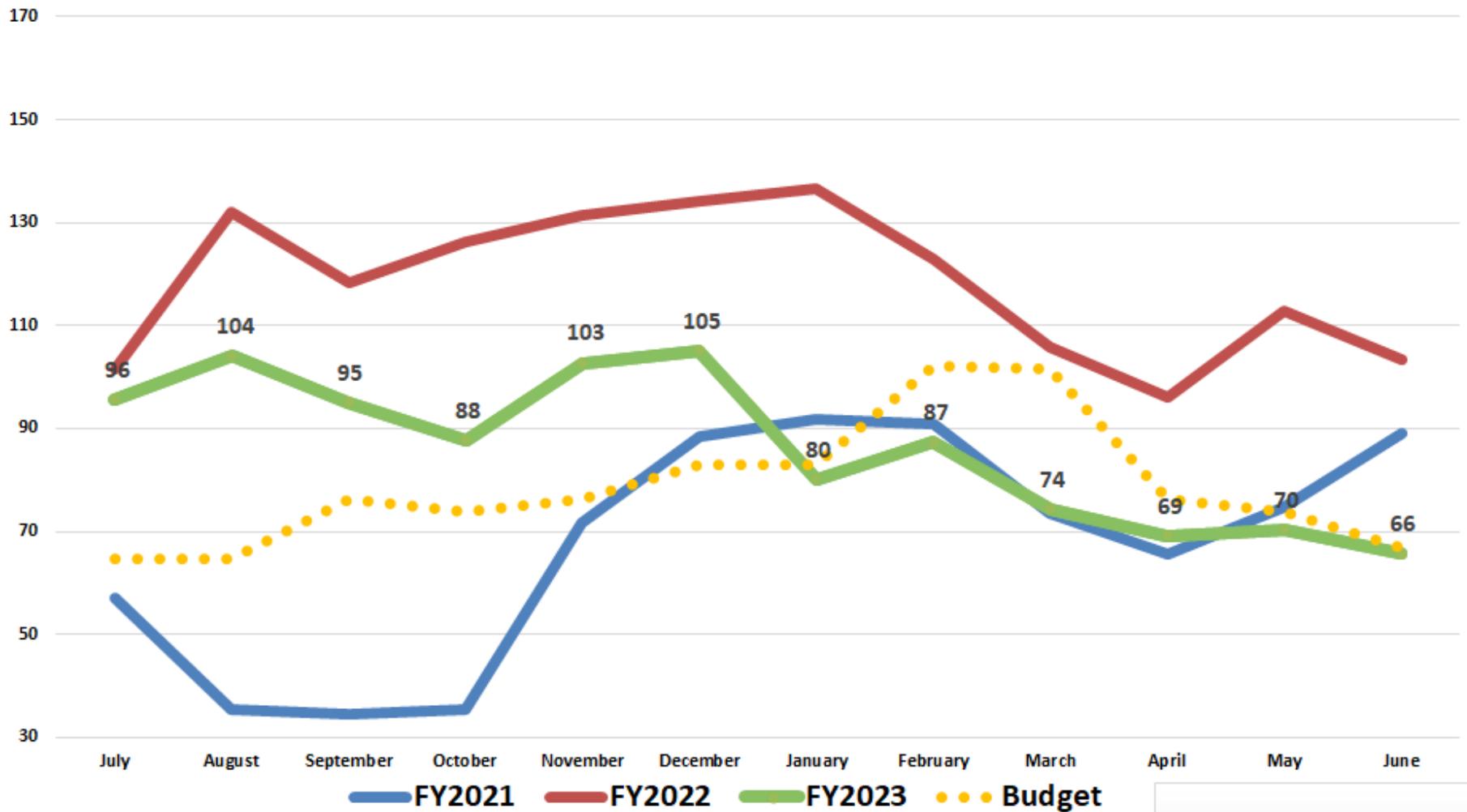
Endoscopy Procedures



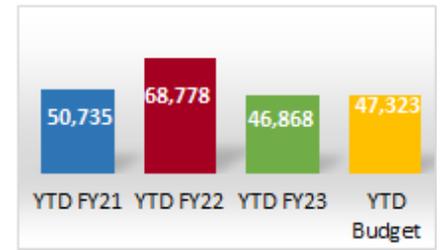
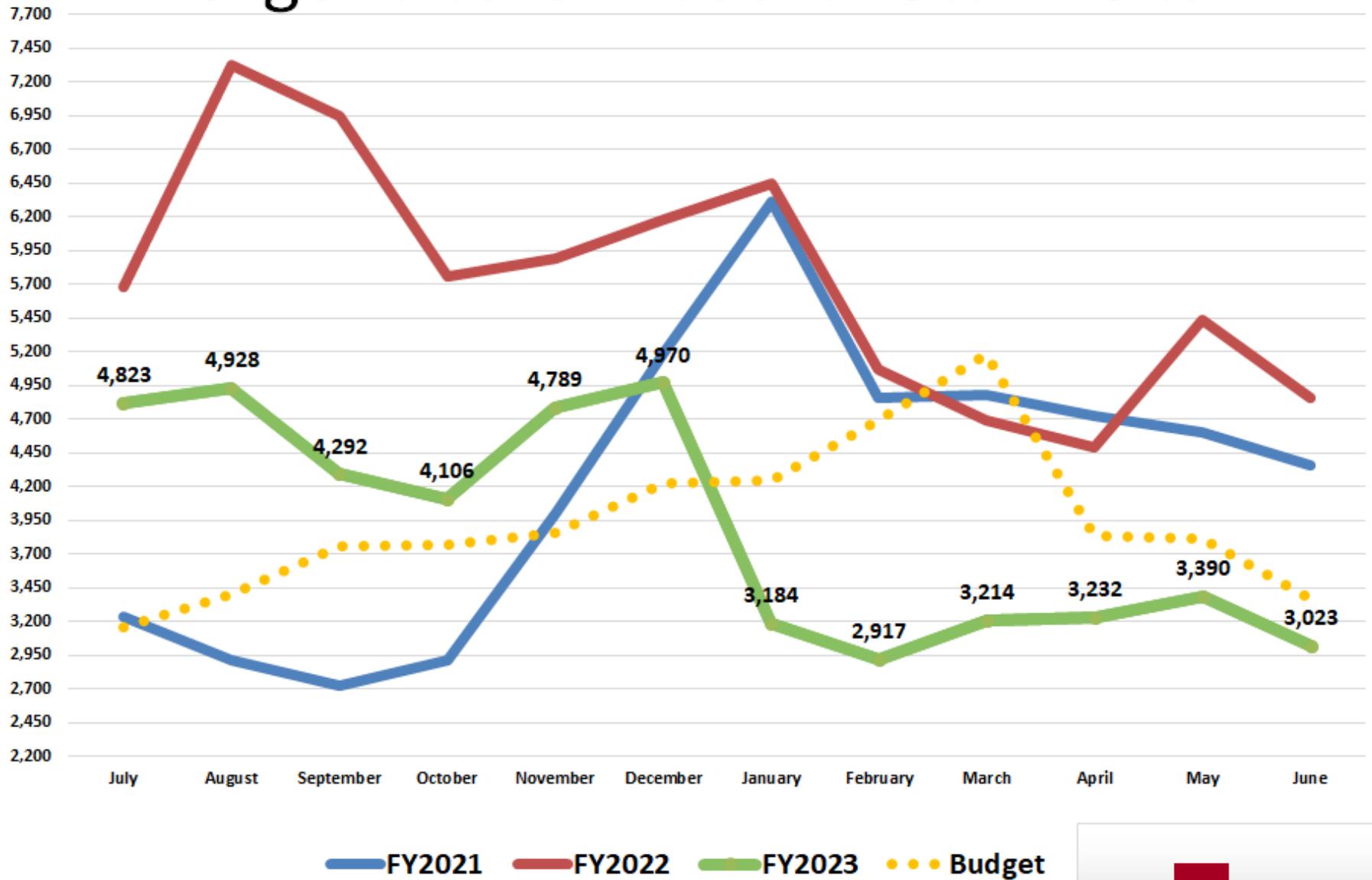
Urgent Care – Court Avg Visits Per Day



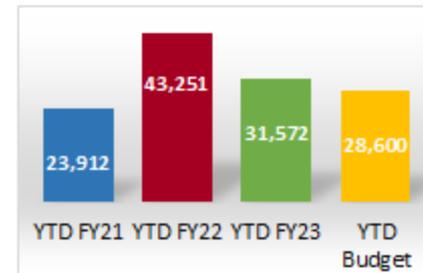
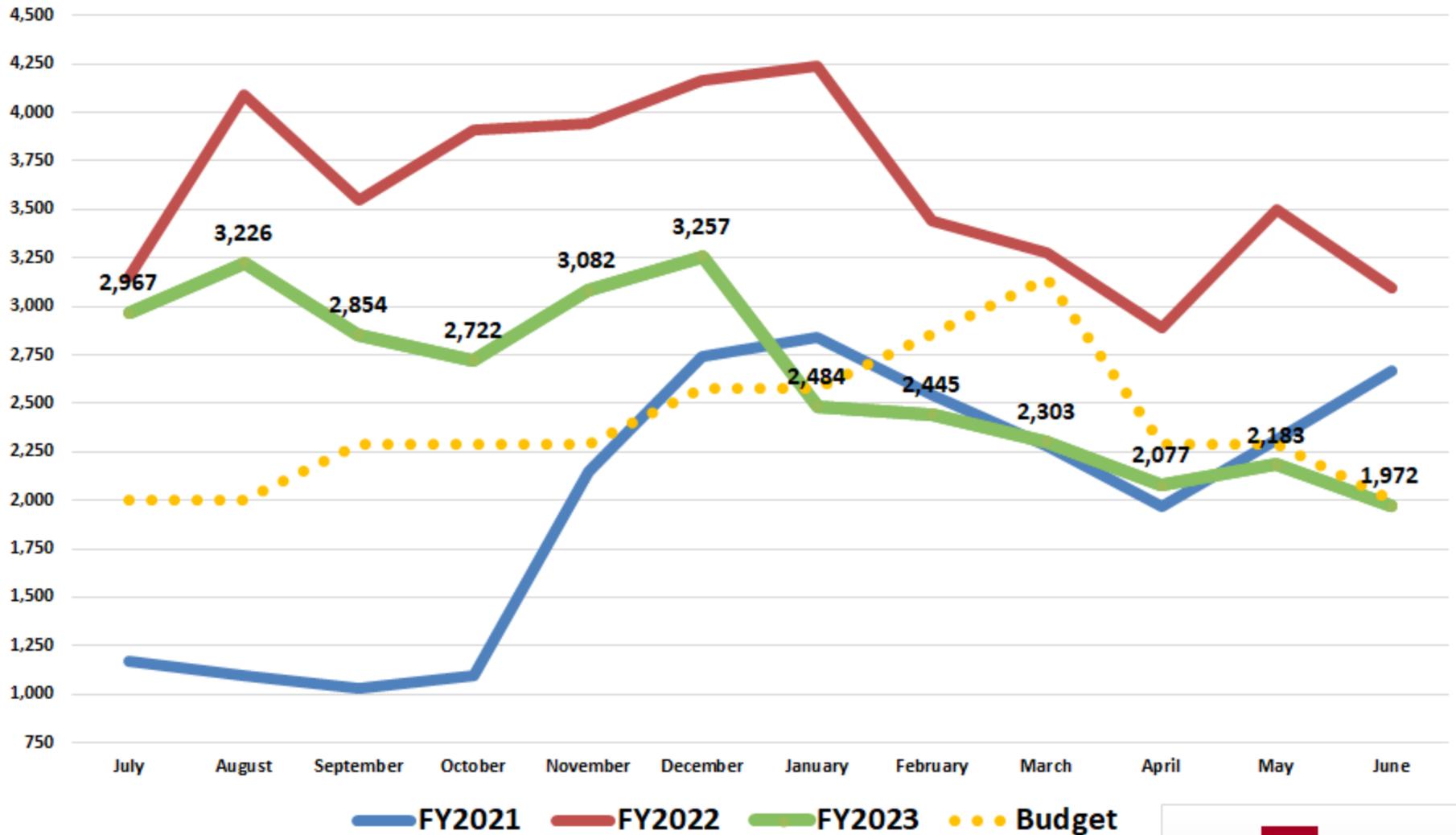
Urgent Care – Demaree Avg Visits Per Day



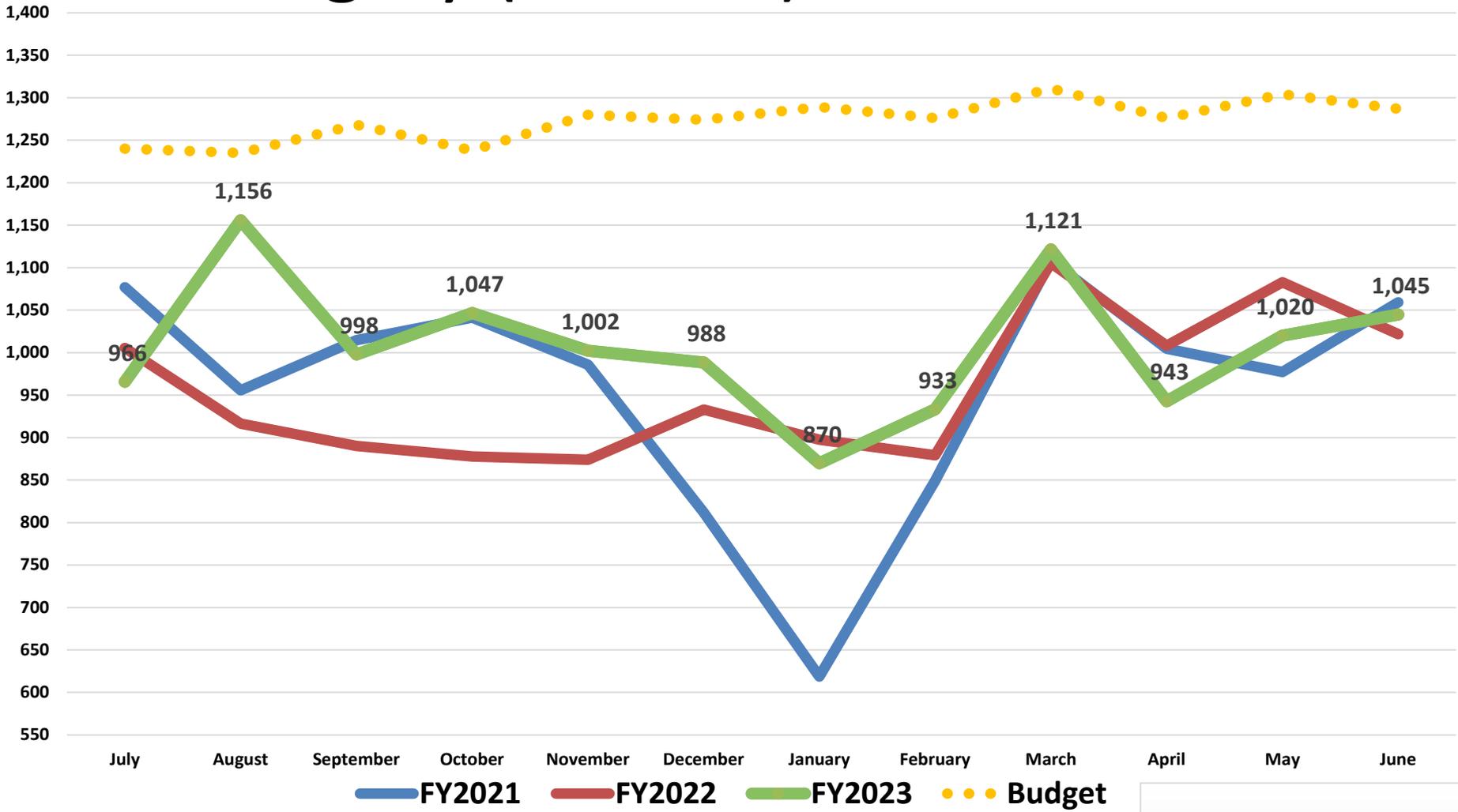
Urgent Care – Court Total Visits



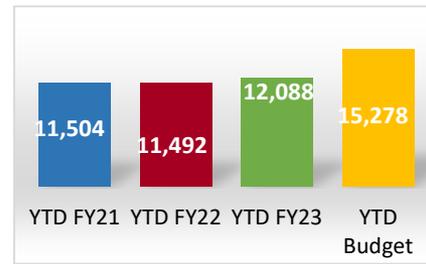
Urgent Care – Demaree Total Visits



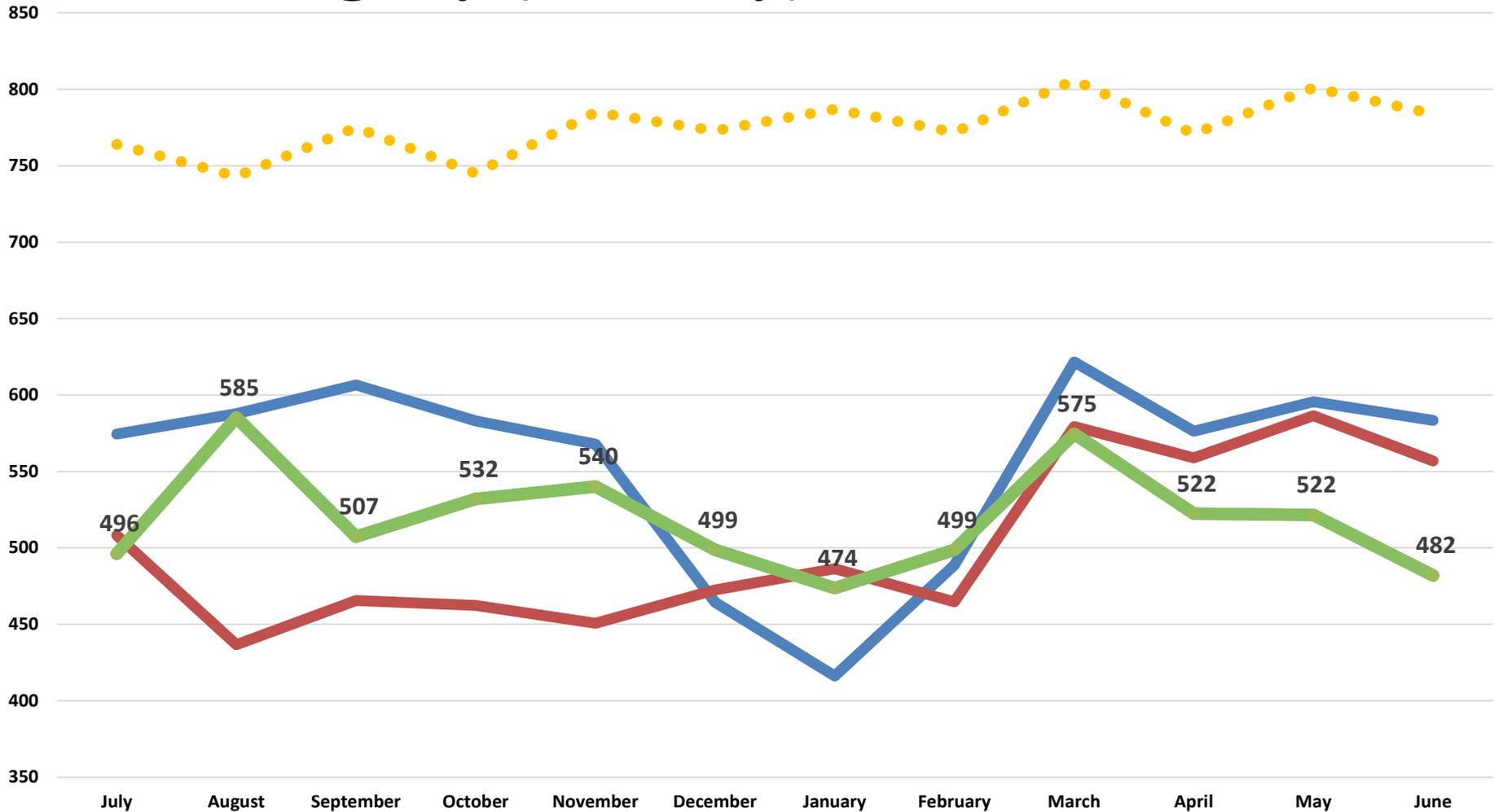
Surgery (IP & OP) – 100 Min Units



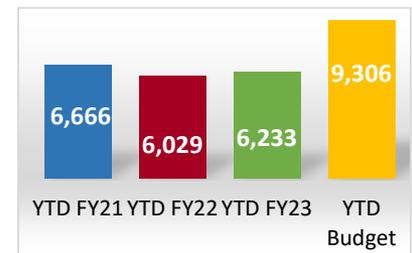
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



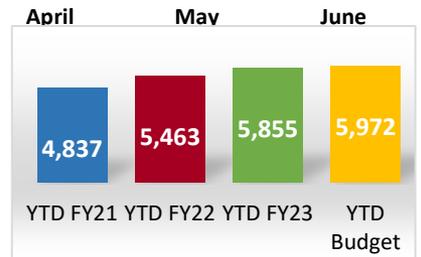
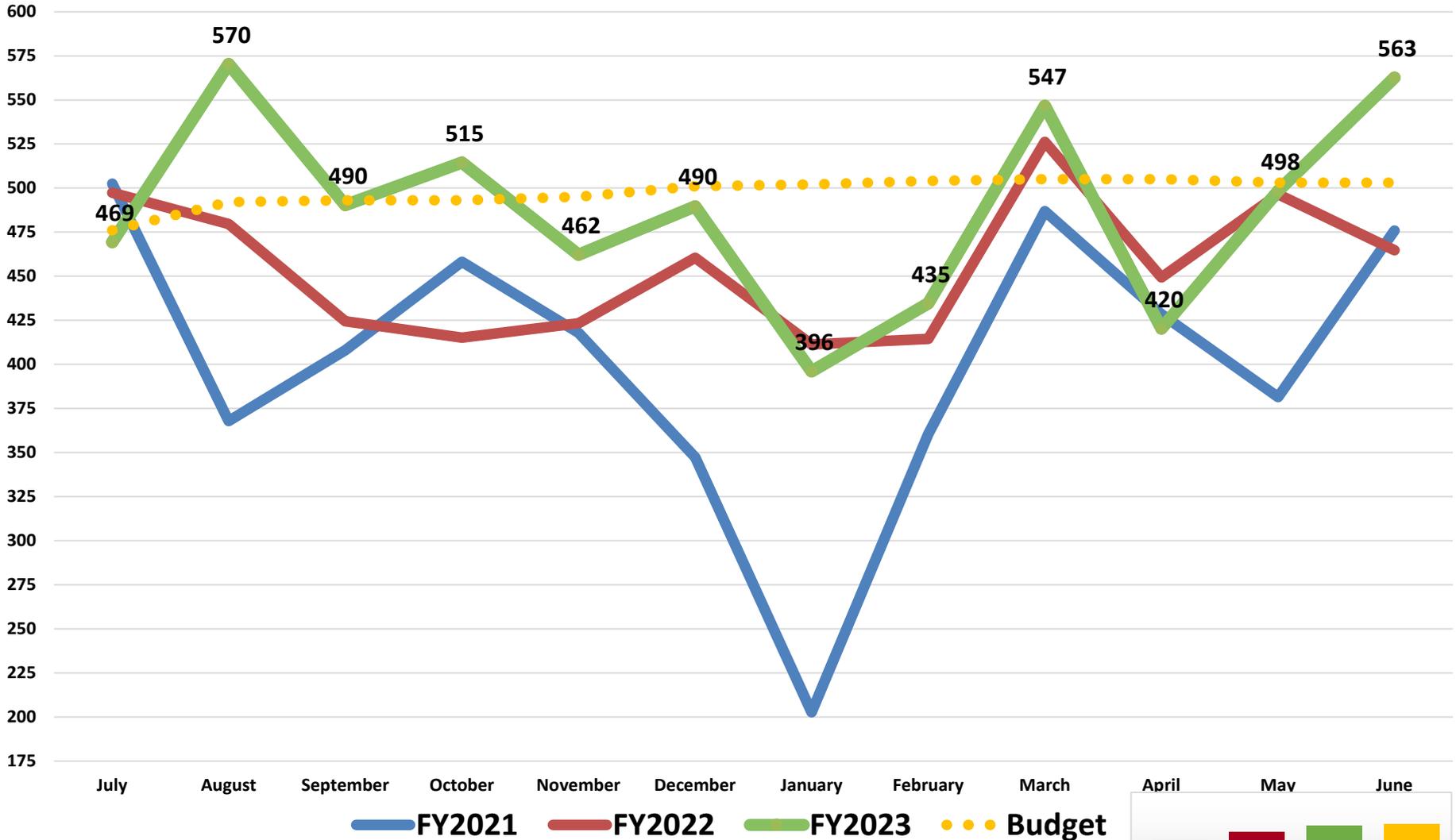
Surgery (IP Only) - 100 Min Unit



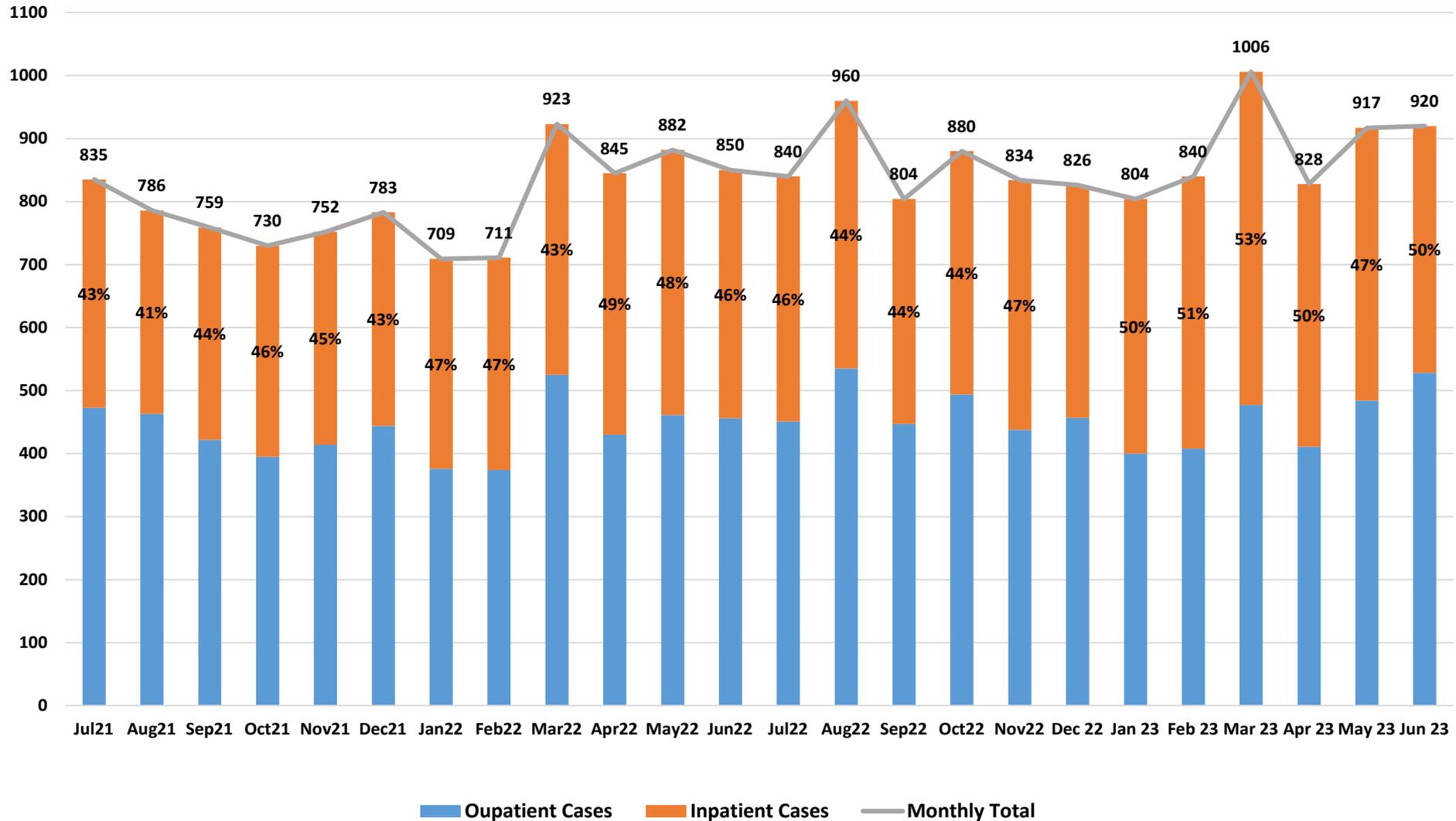
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



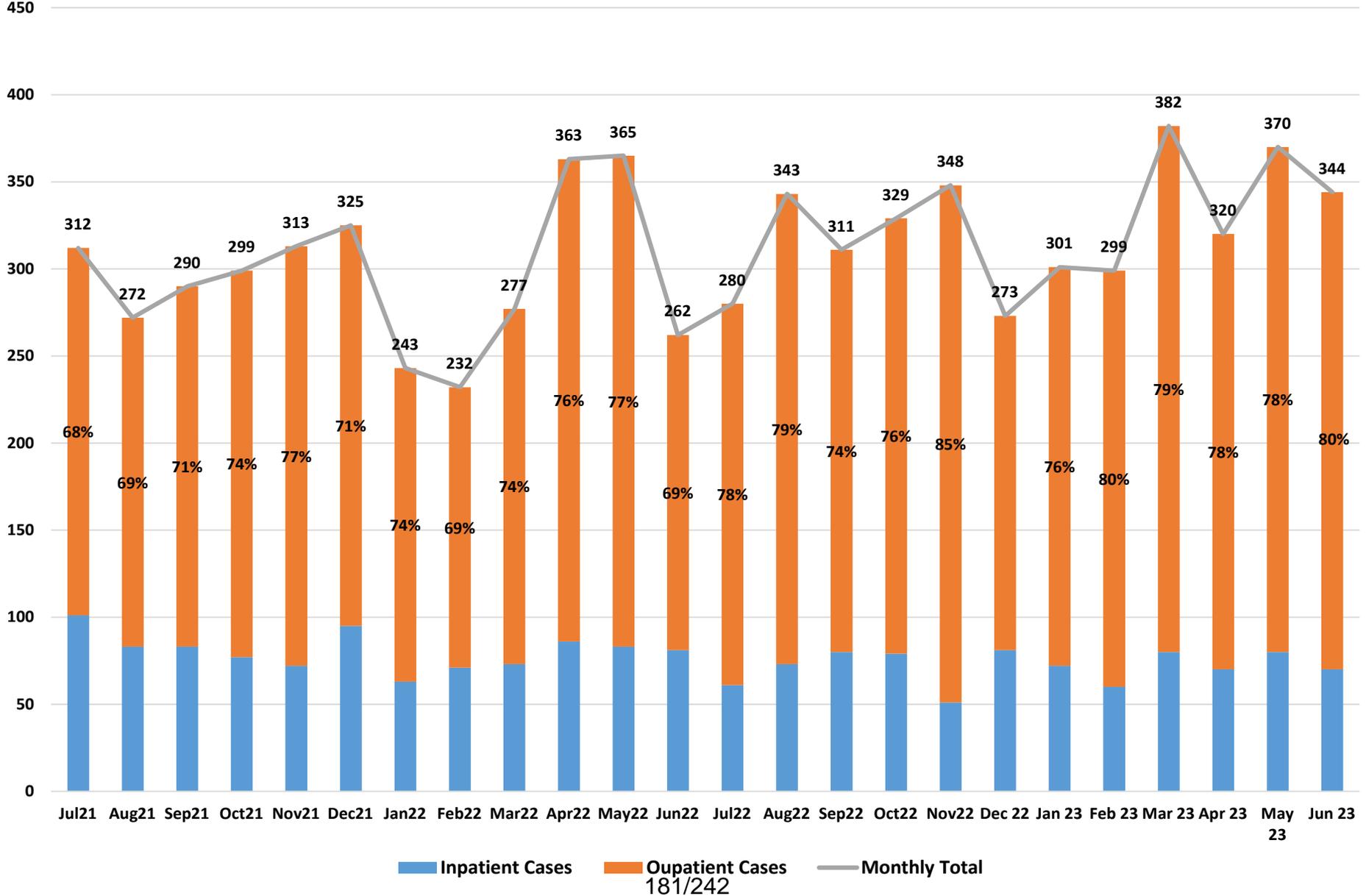
Surgery (OP Only) - 100 Min Units



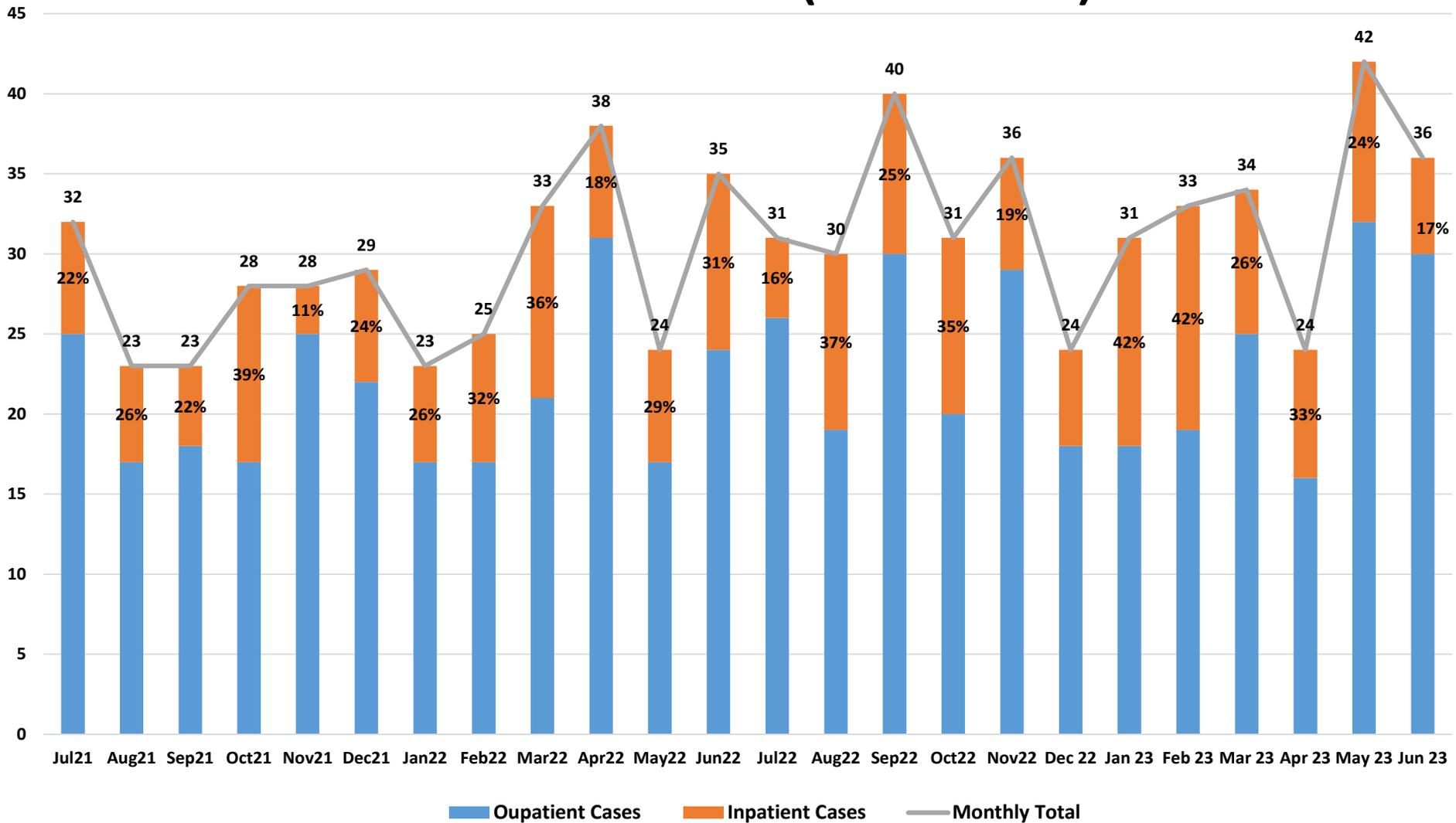
Surgery Cases (IP & OP)



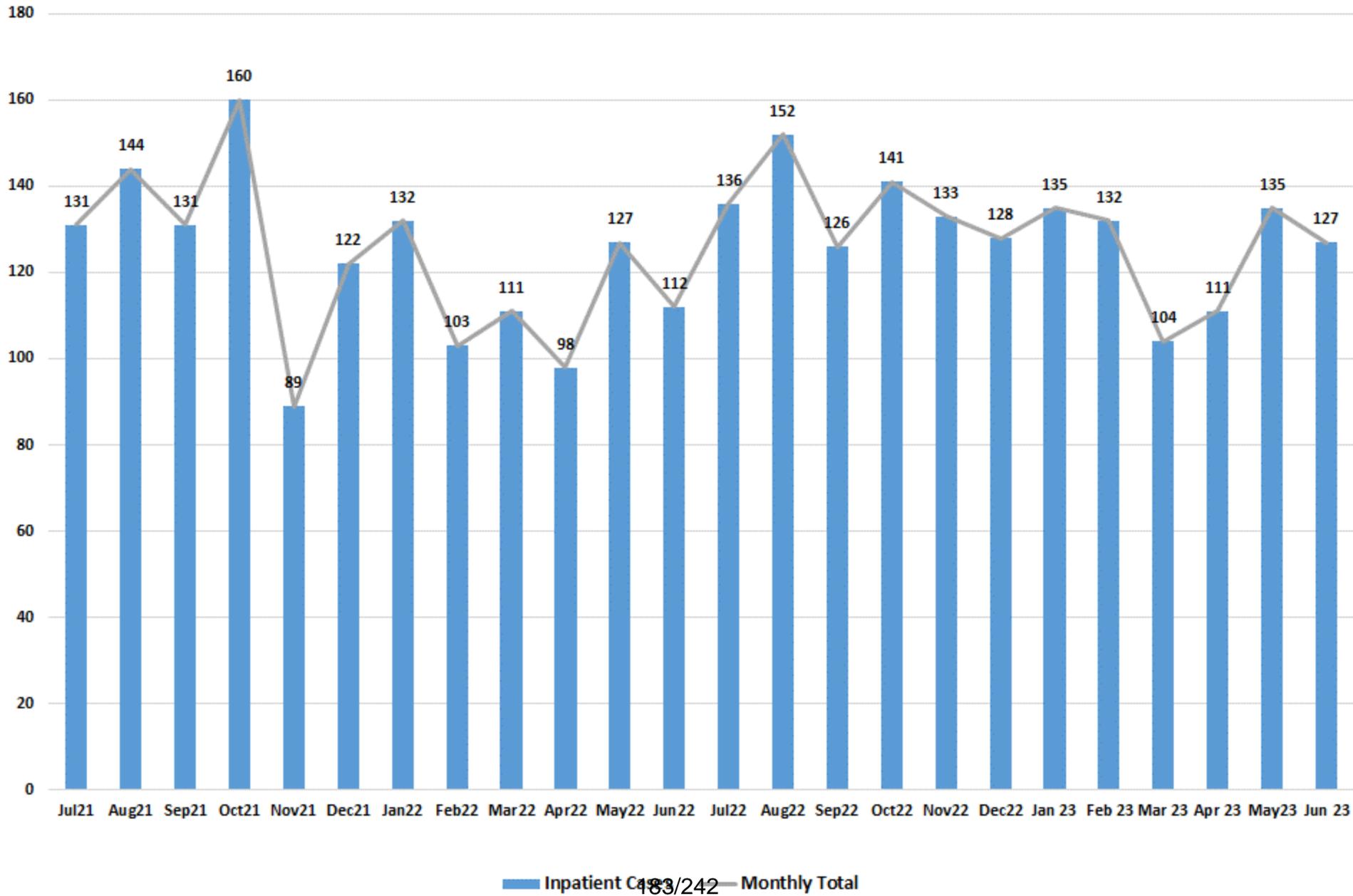
Endo Cases (Endo Suites)



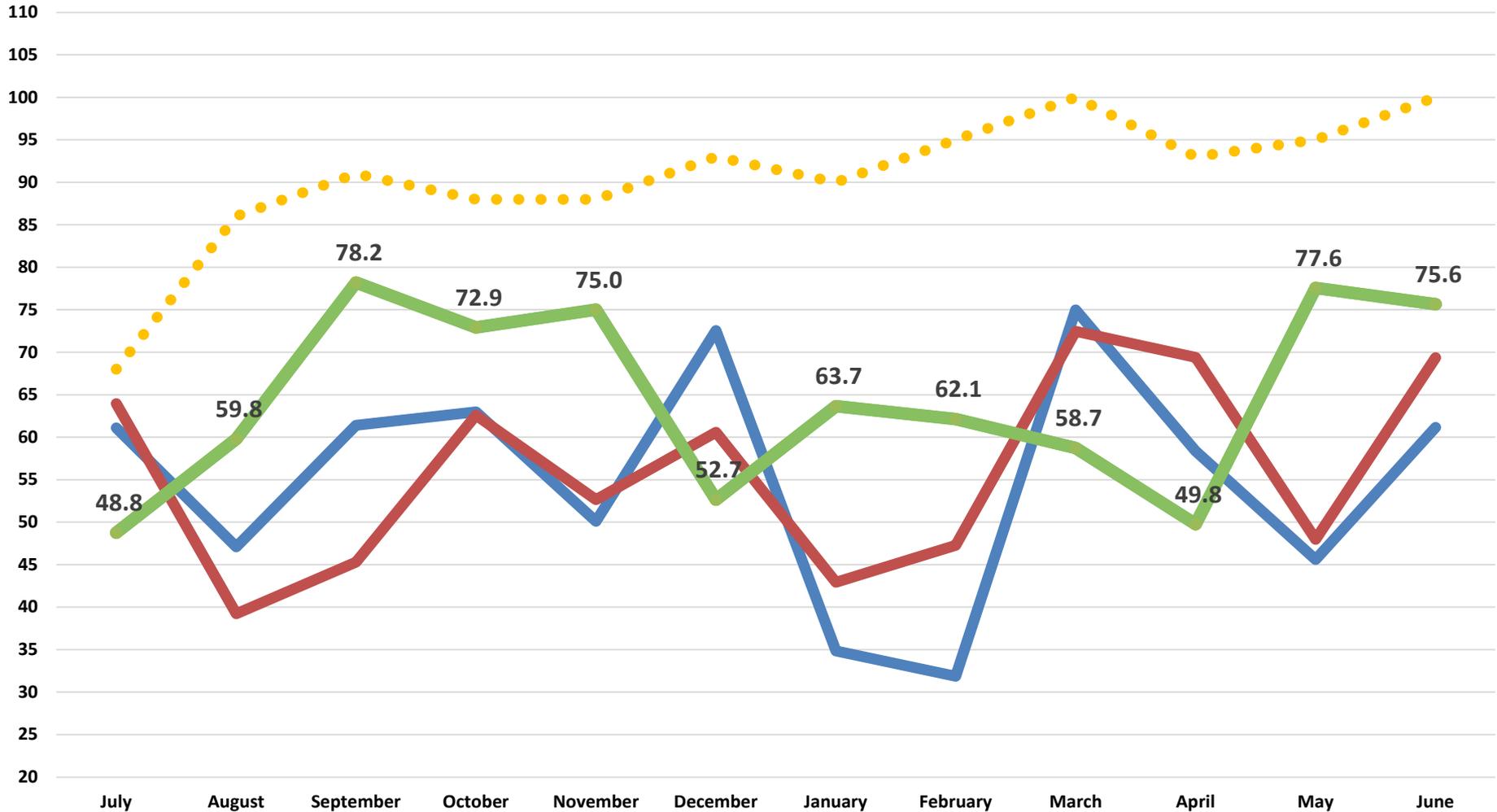
Robotic Cases (IP & OP)



OB Cases



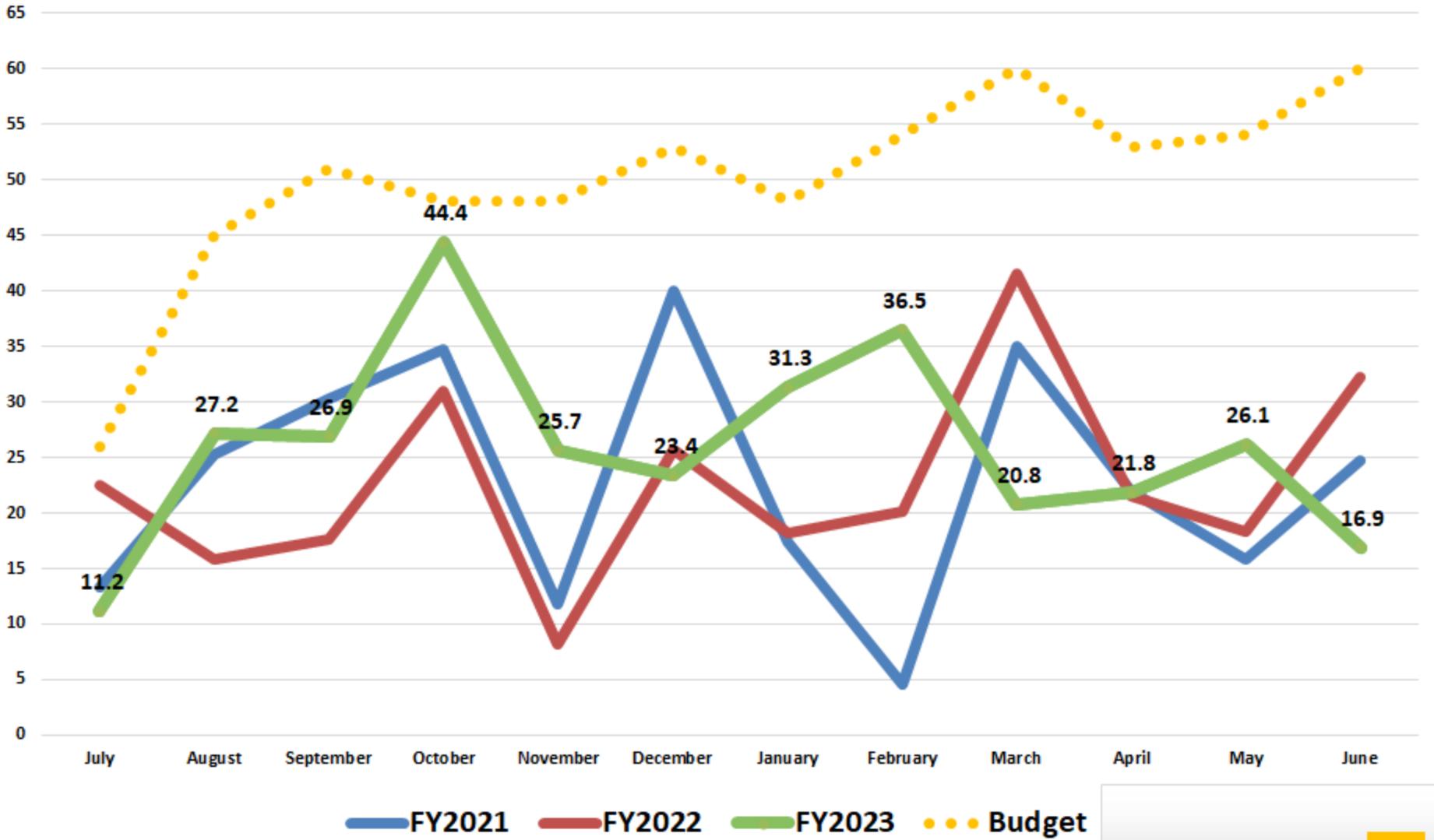
Robotic Surgery (IP & OP) - 100 Min Units



— **FY2021**
 — **FY2022**
 — **FY2023**
 ●●● **Budget**

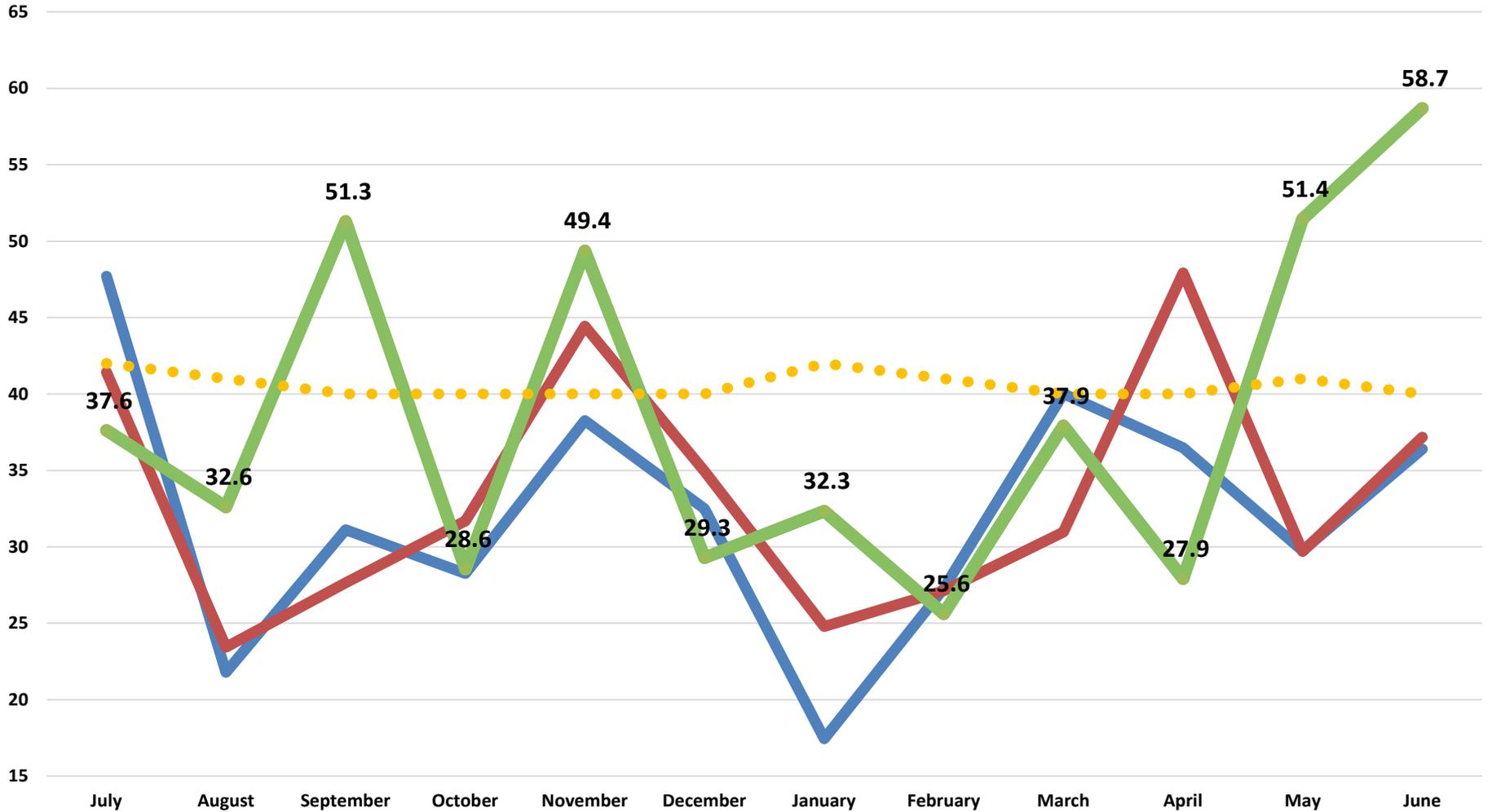


Robotic Surgery Minutes (IP Only)



275.0	272.5	312.2	600.0
YTD FY21	YTD FY22	YTD FY23	YTD Budget

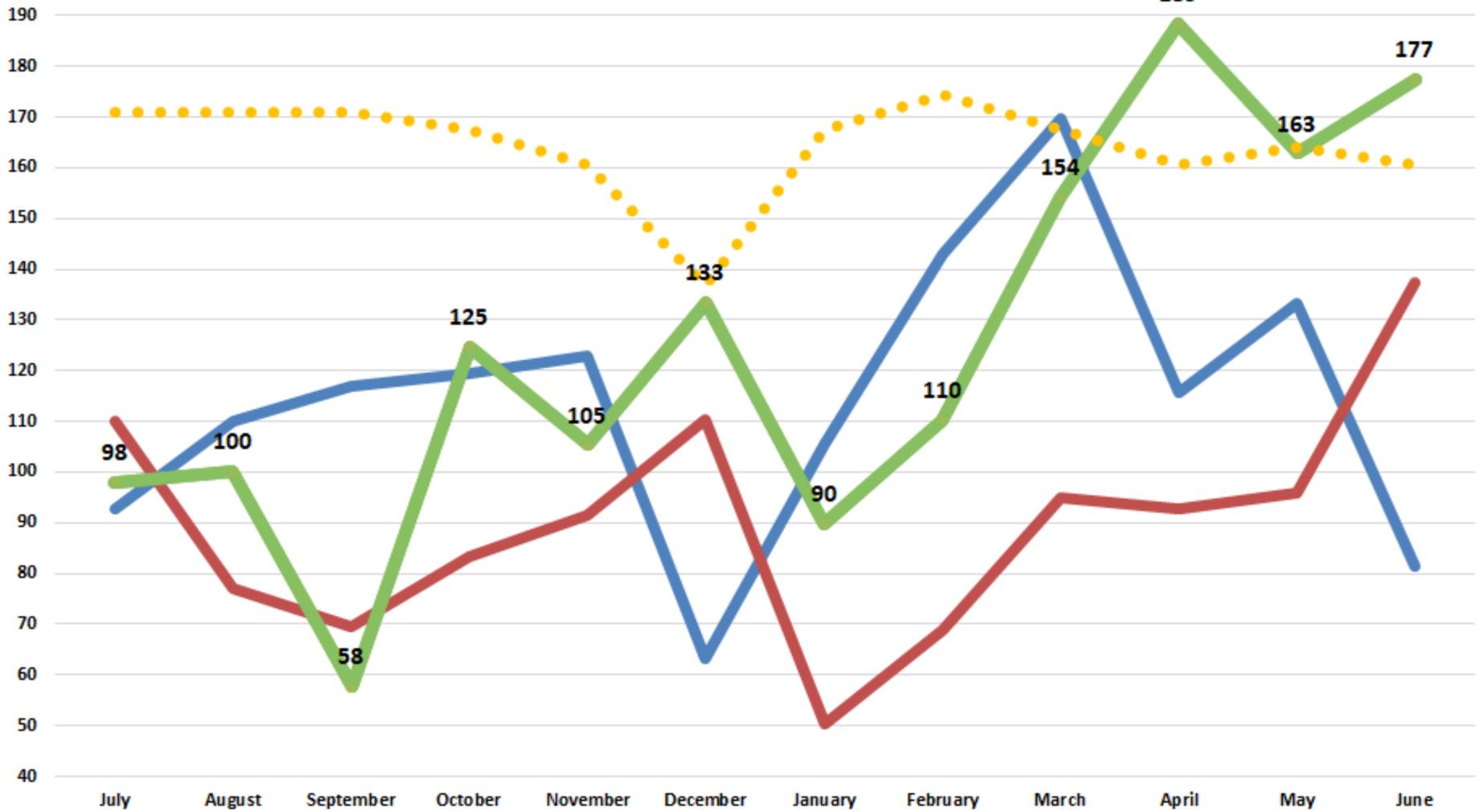
Robotic Surgery Minutes (OP Only)



— FY2021
 — FY2022
 — FY2023
 ●●● Budget



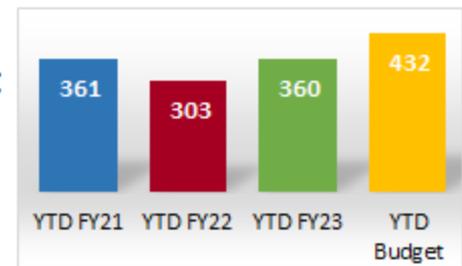
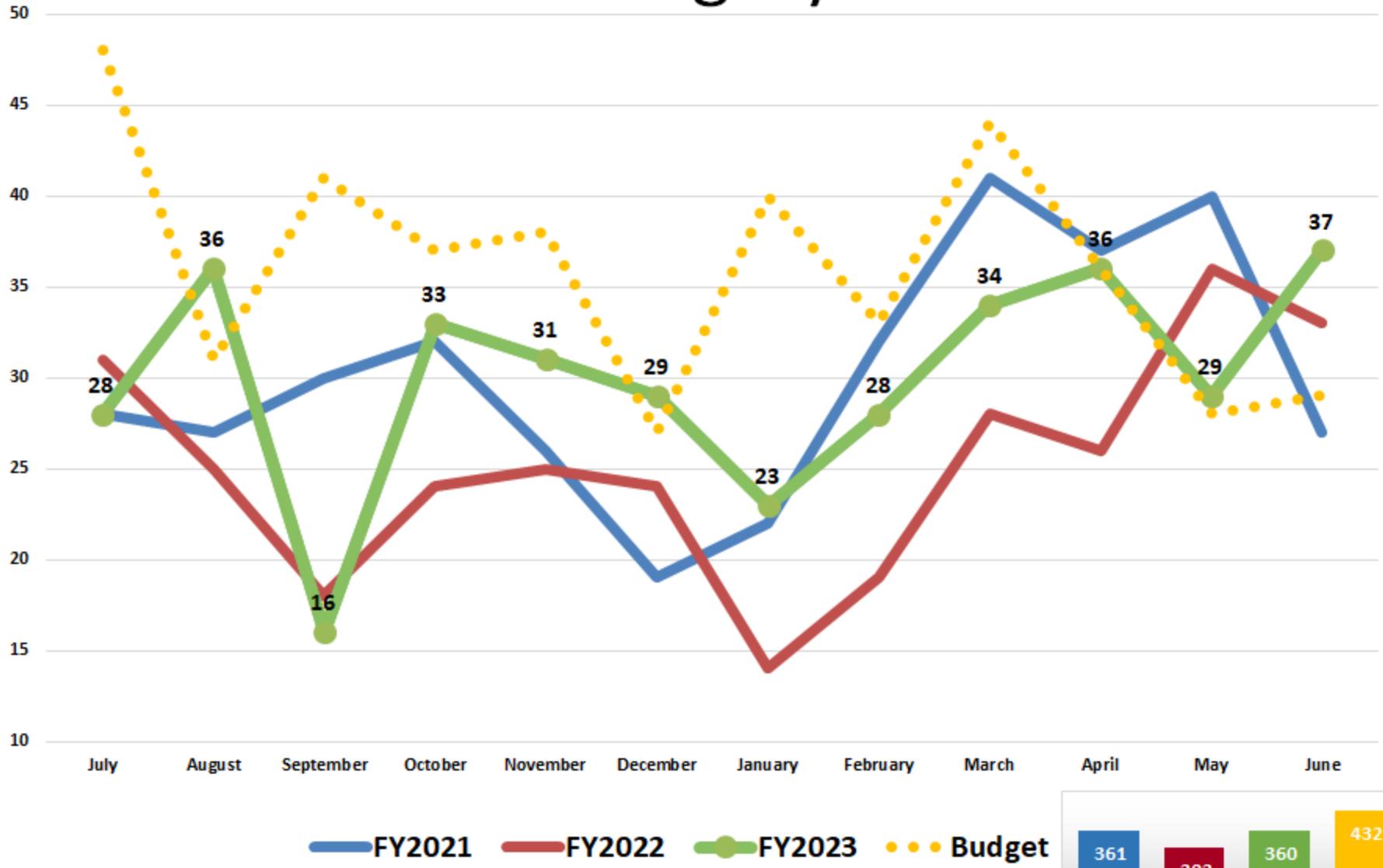
Cardiac Surgery - 100 Min Units



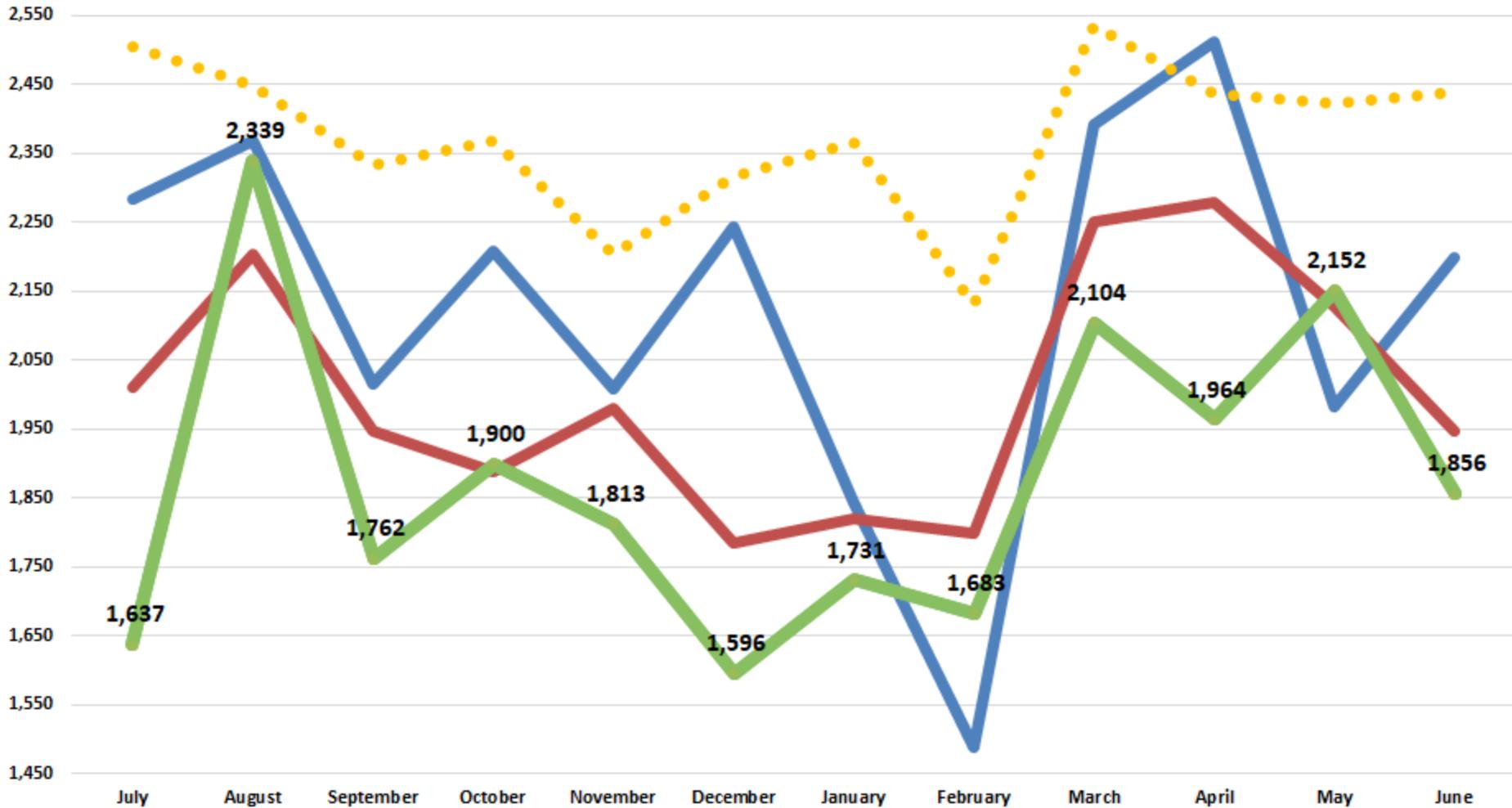
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



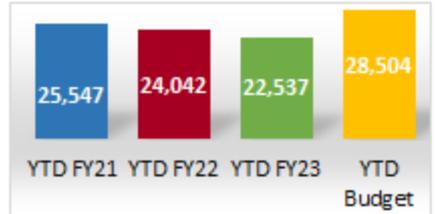
Cardiac Surgery Cases



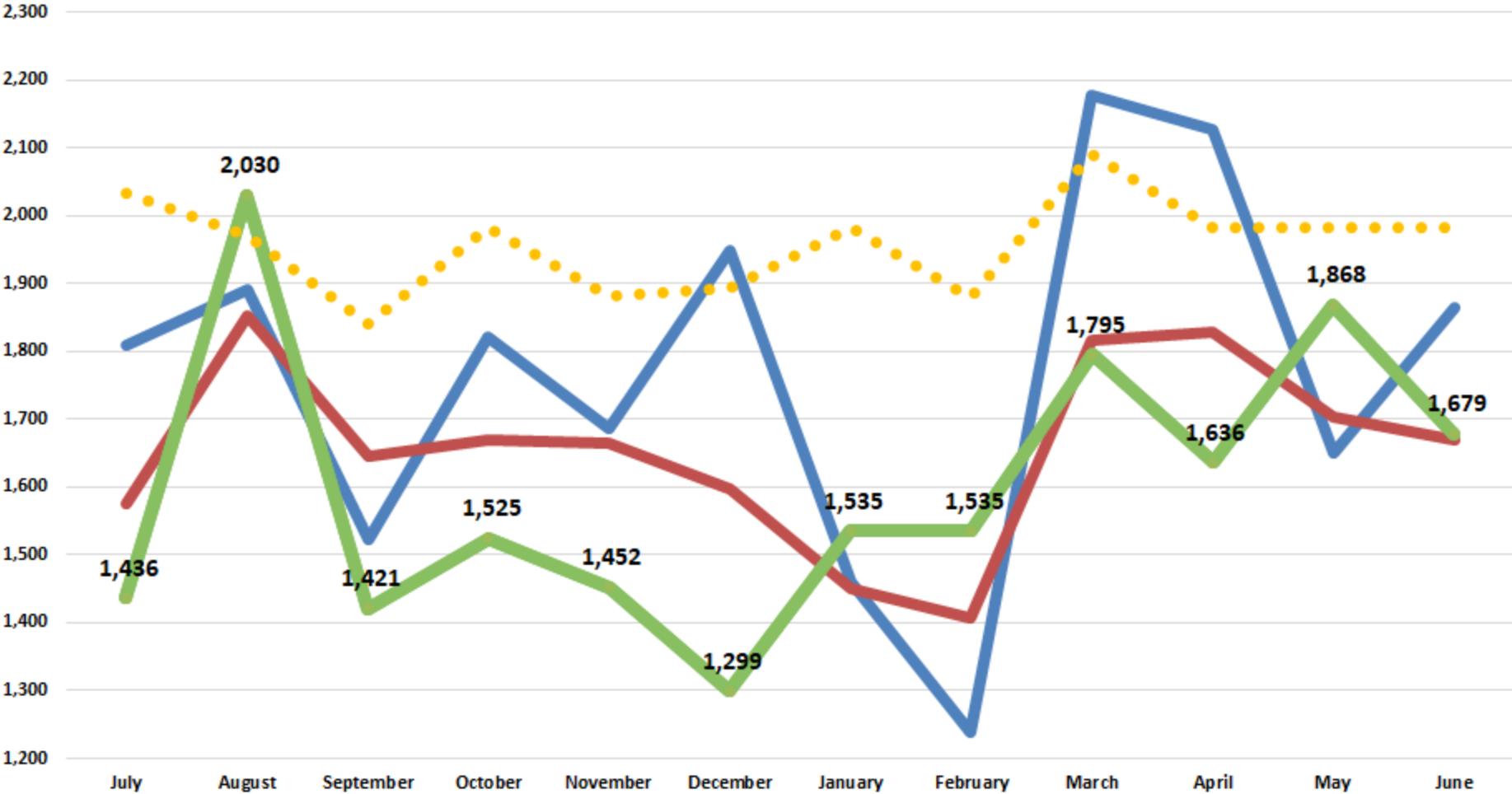
Rad Onc Treatments (Vis. & Hanf.)



— FY2021
 — FY2022
 — FY2023
 ●●● Budget



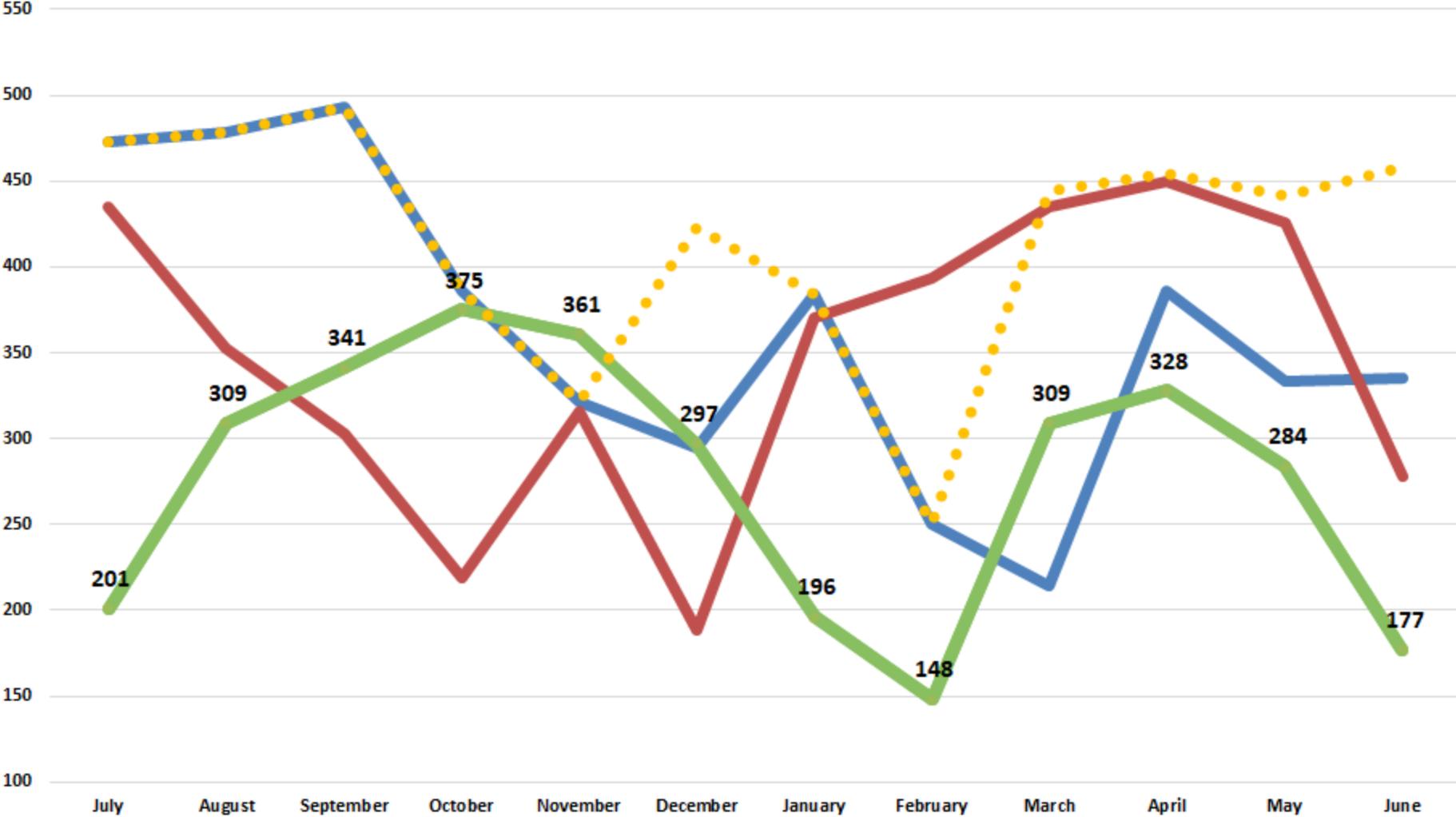
Rad Onc Visalia



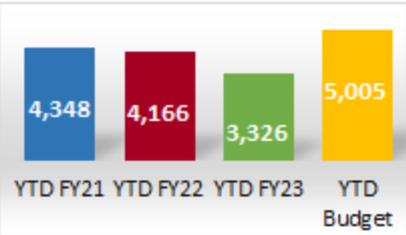
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



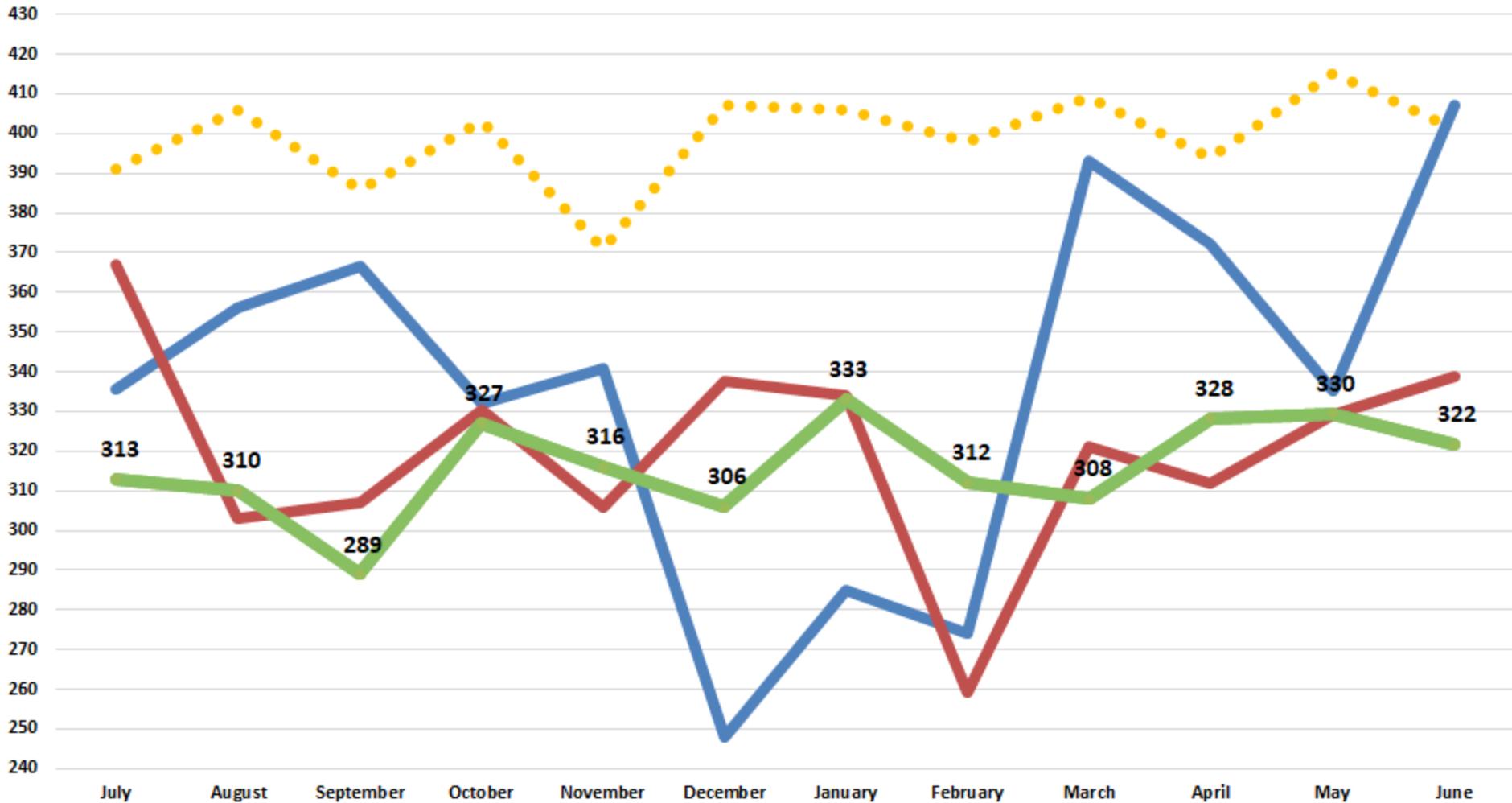
Rad Onc Hanford



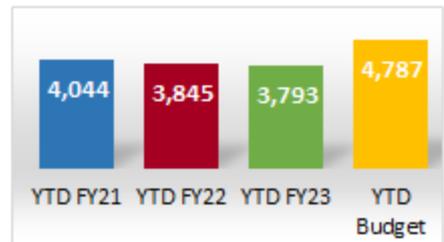
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



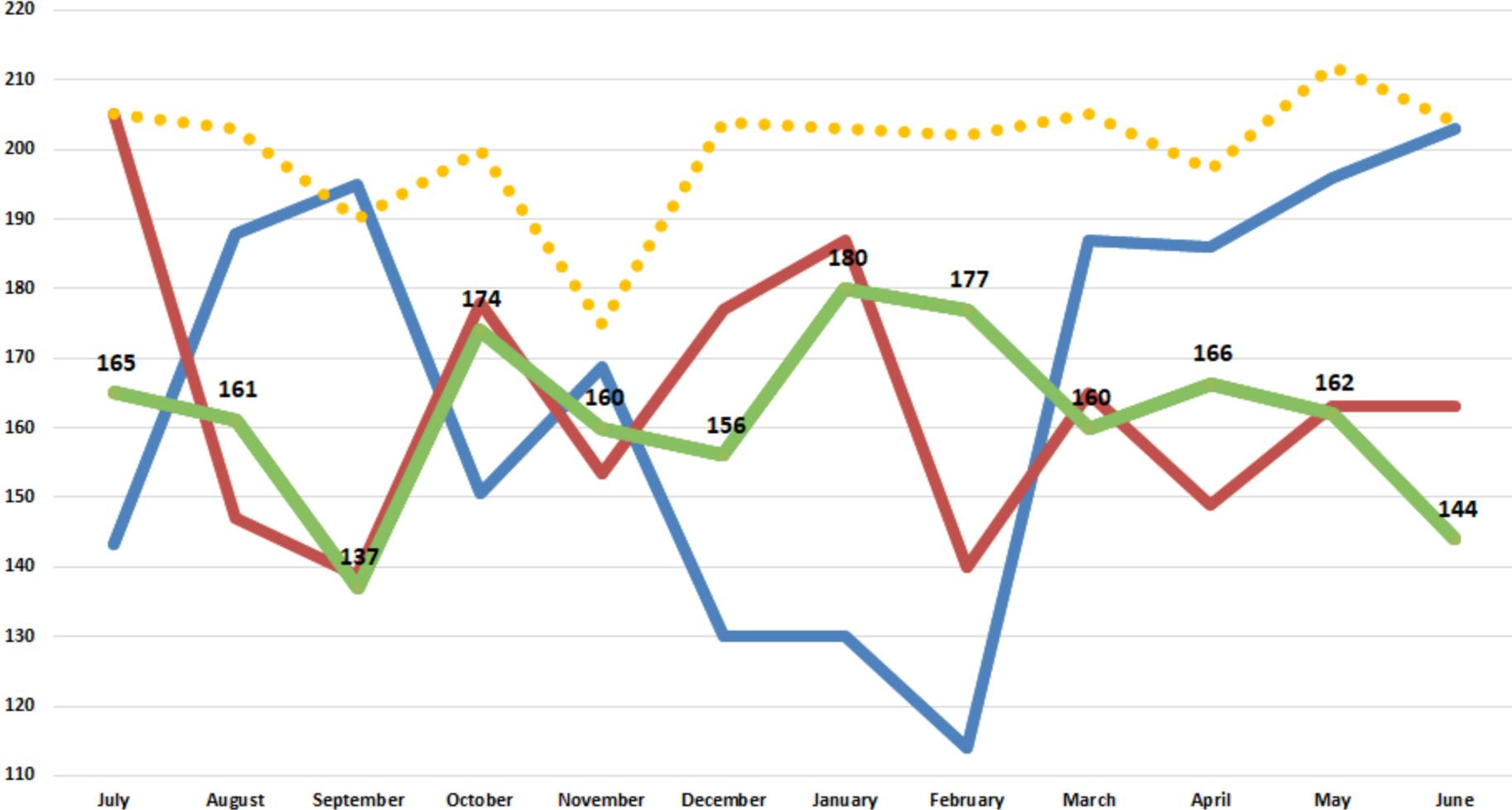
Cath Lab (IP & OP) – 100 Min Units



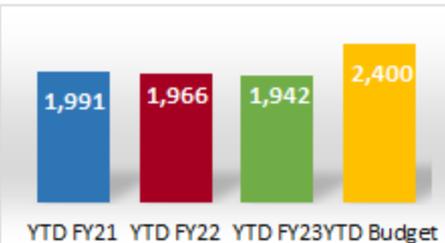
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



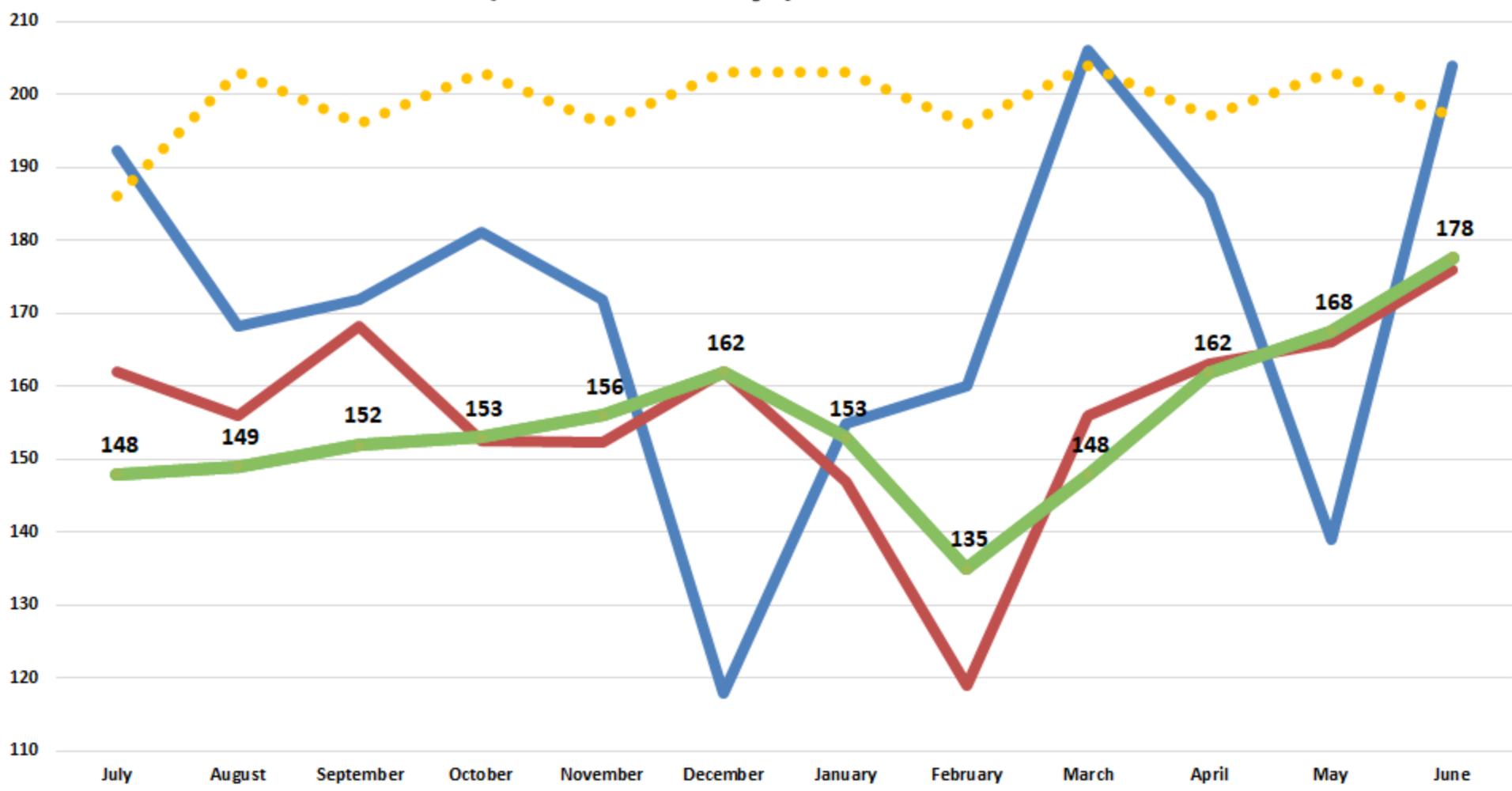
Cath Lab (IP Only) – 100 Min Units



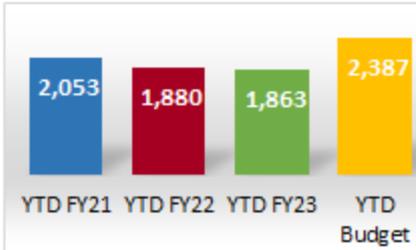
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



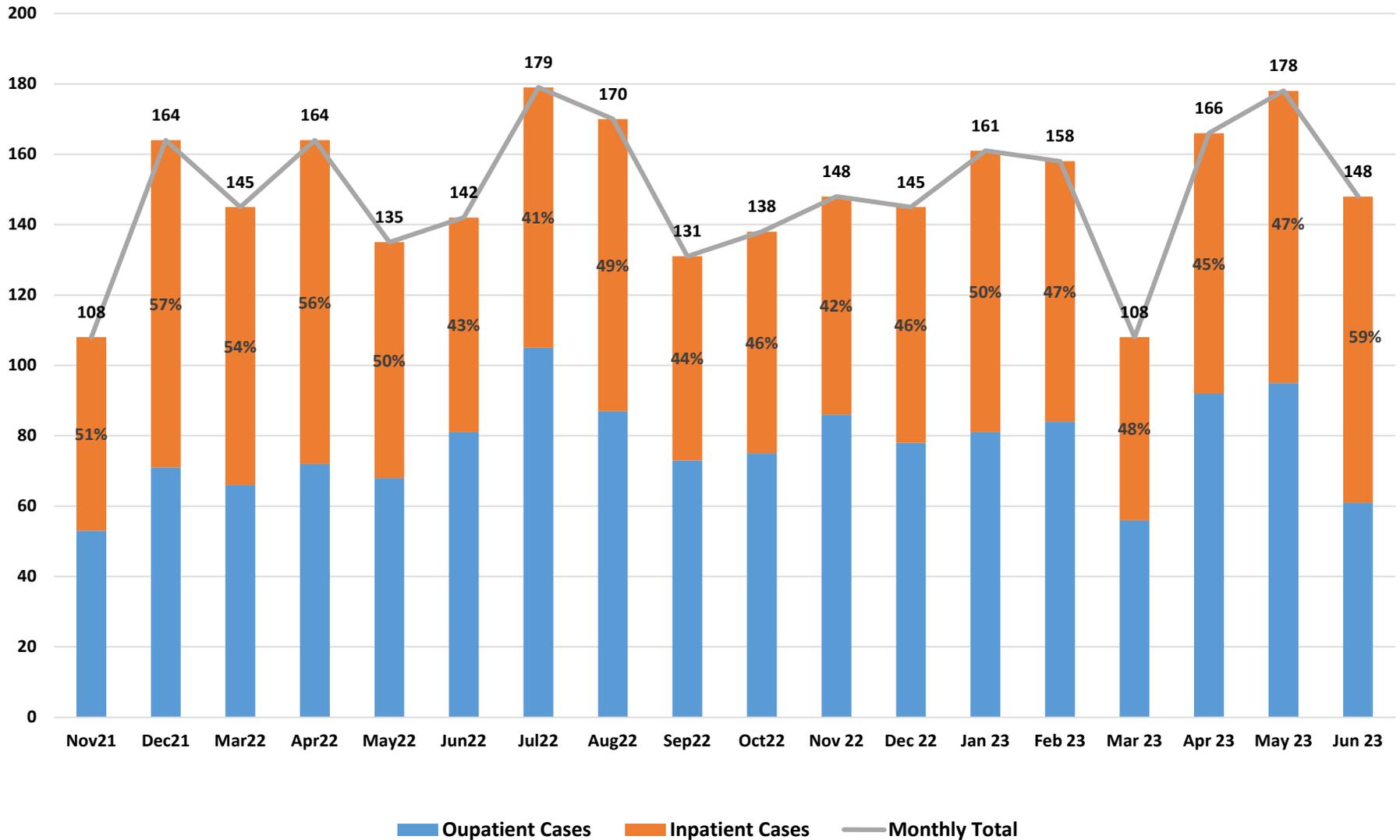
Cath Lab (OP Only) – 100 Min Units



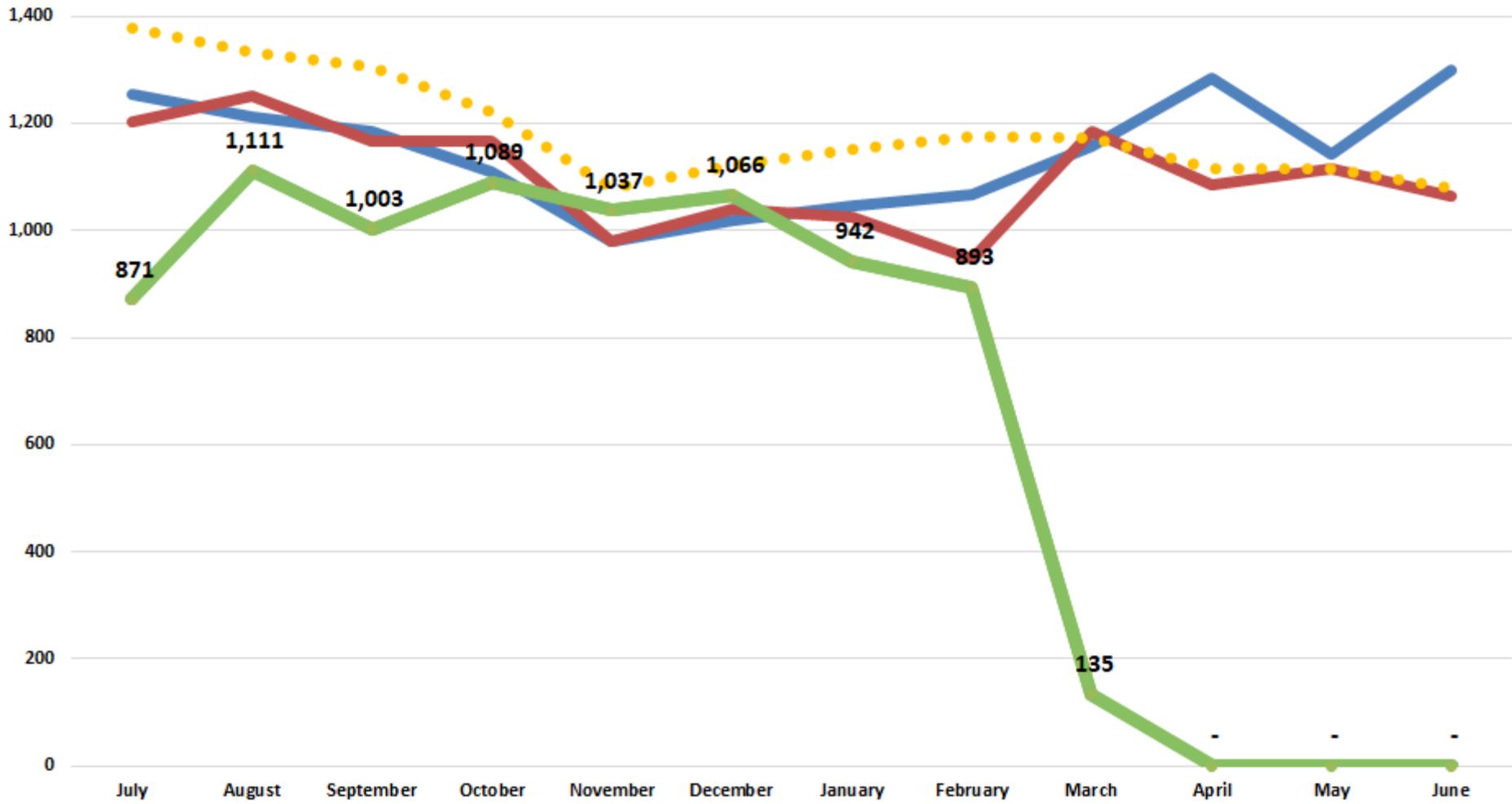
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



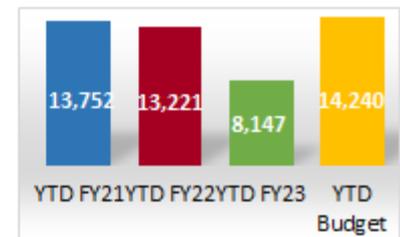
Cath Lab Patients (IP & OP)



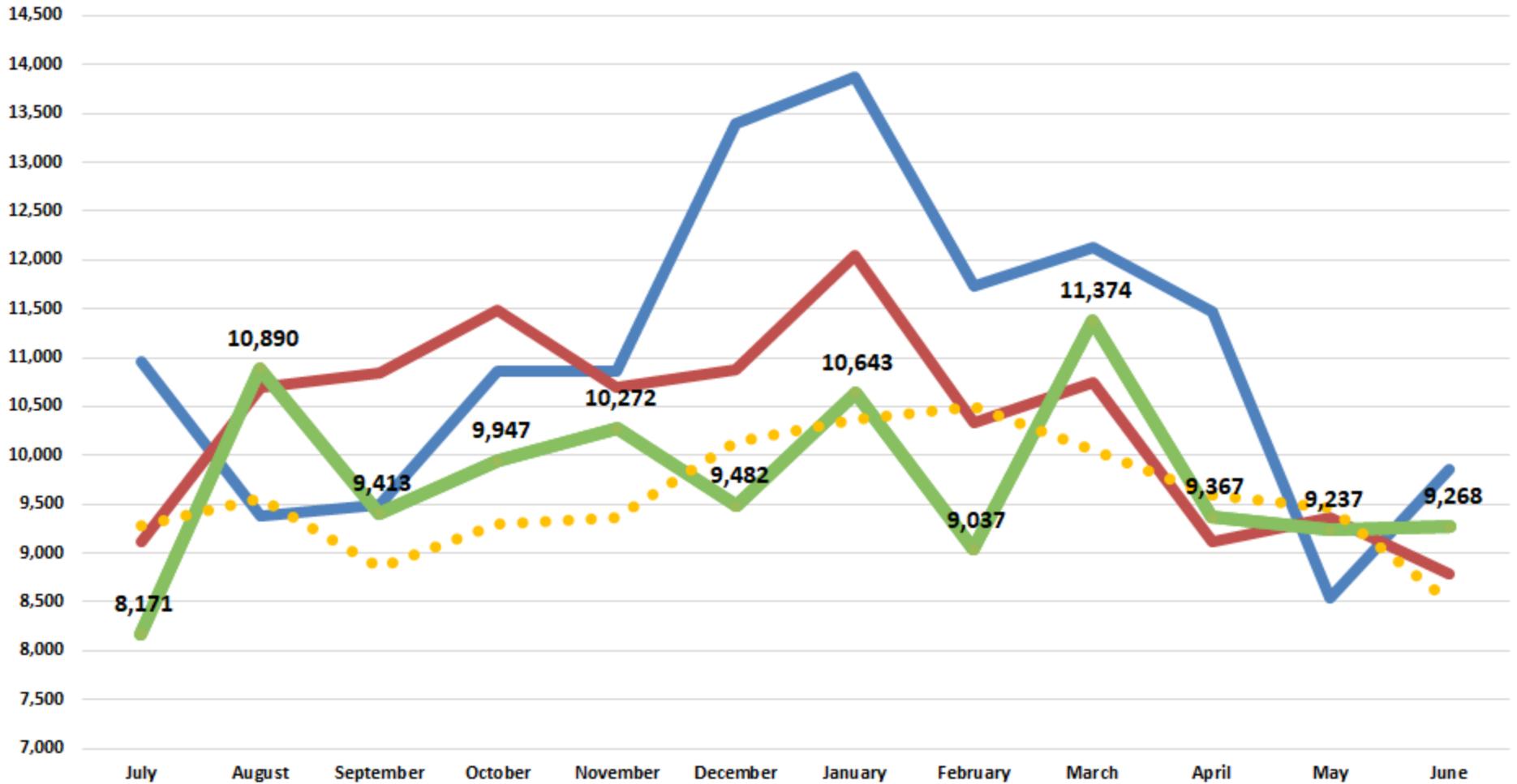
GME Family Medicine Clinic Visits



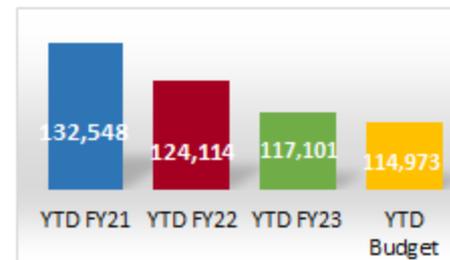
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



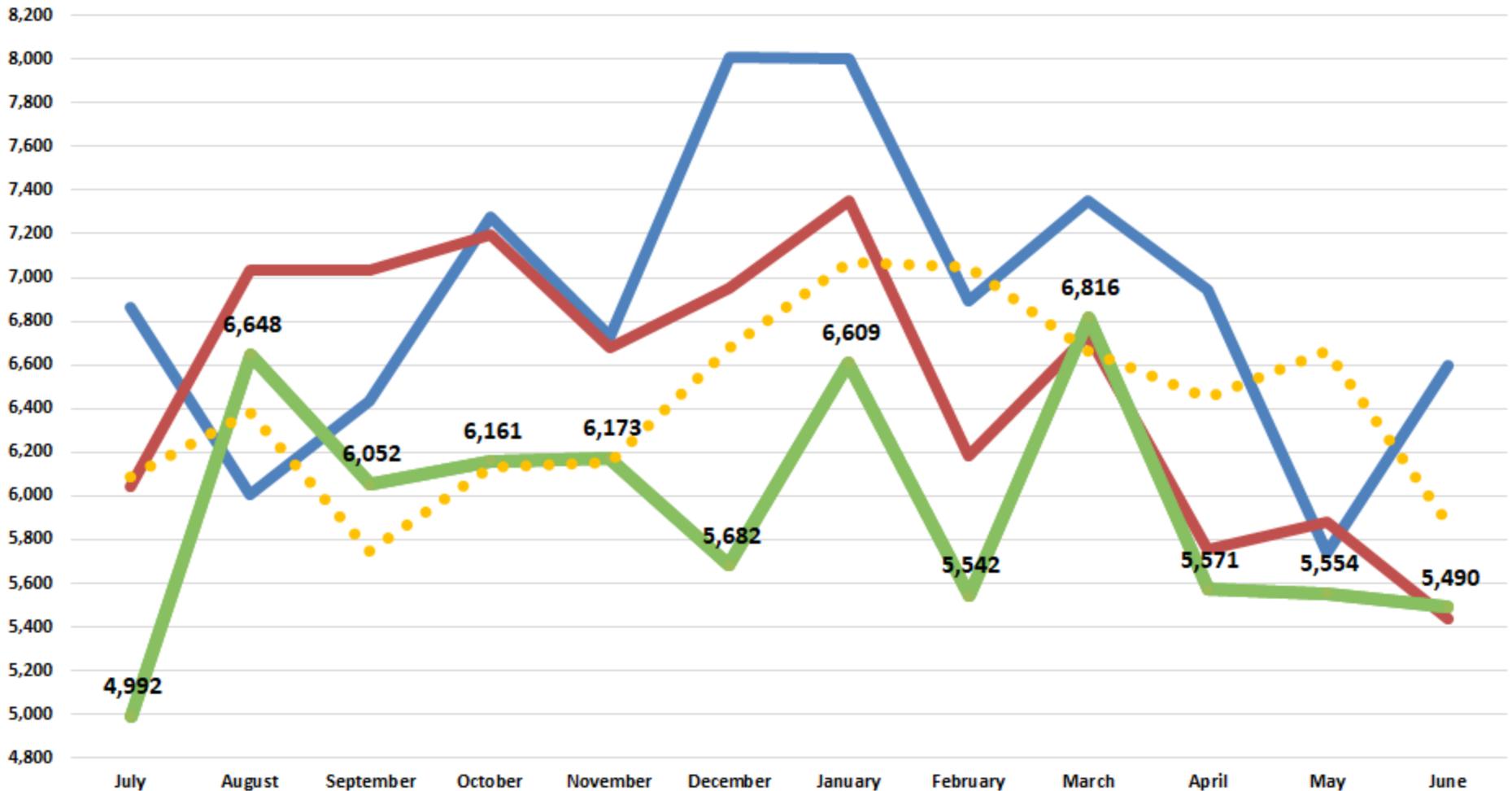
Rural Health Clinics Registrations



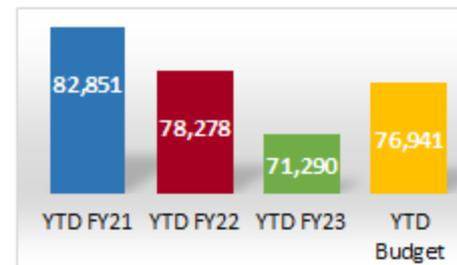
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



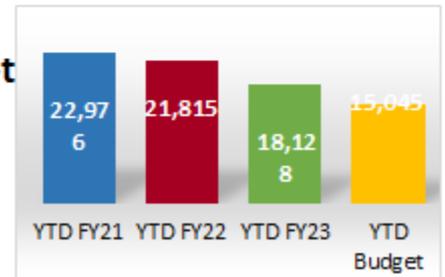
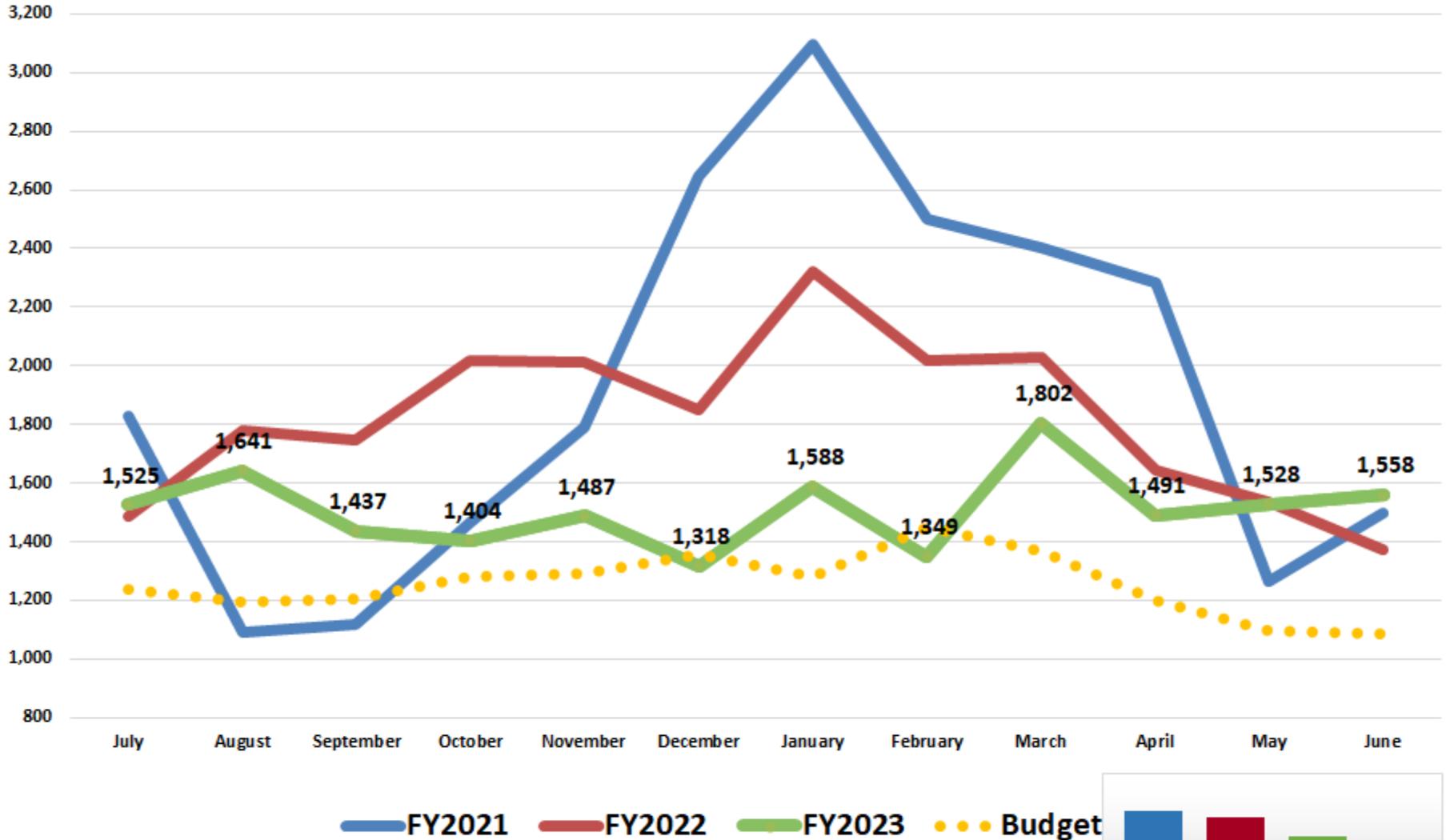
RHC Exeter - Registrations



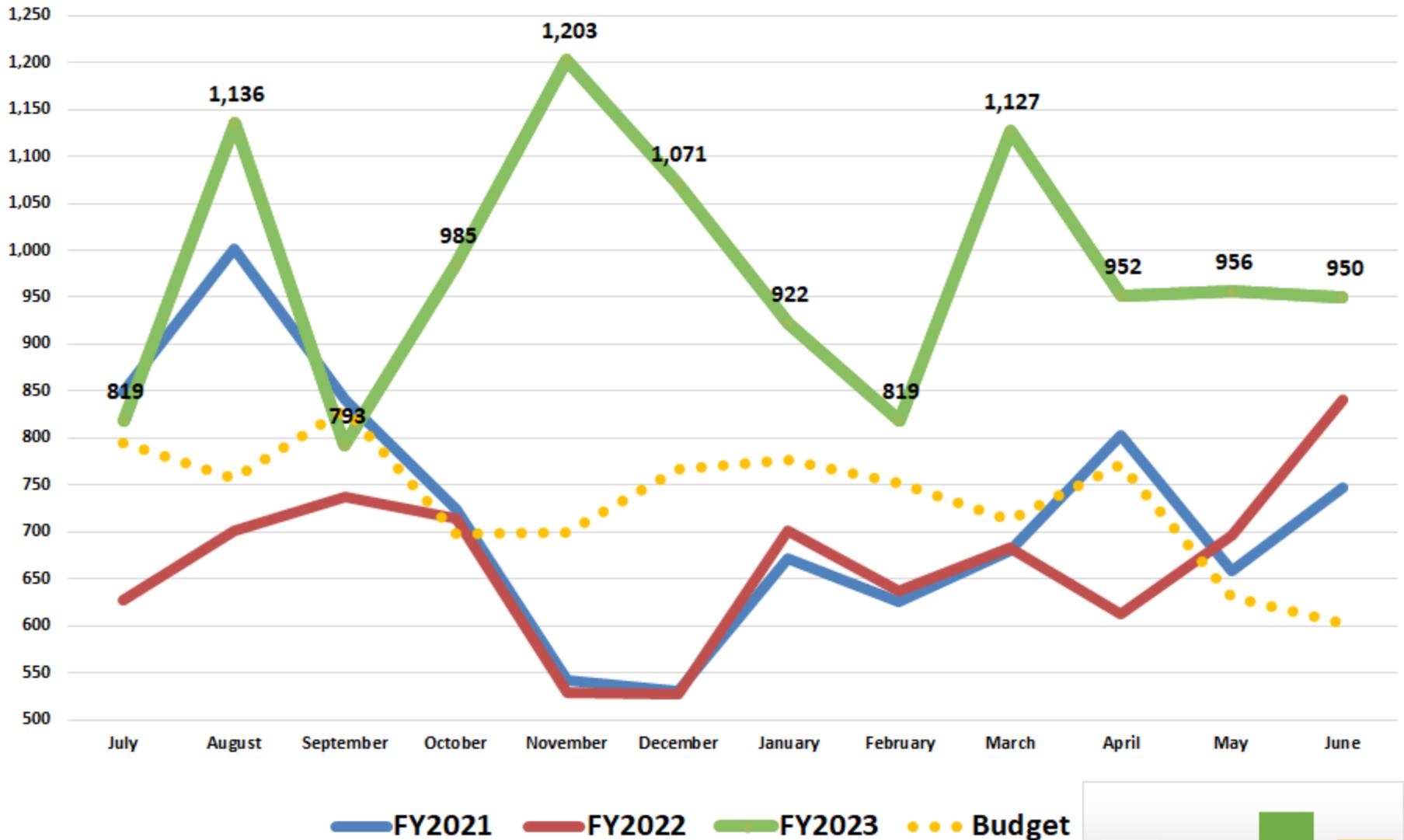
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



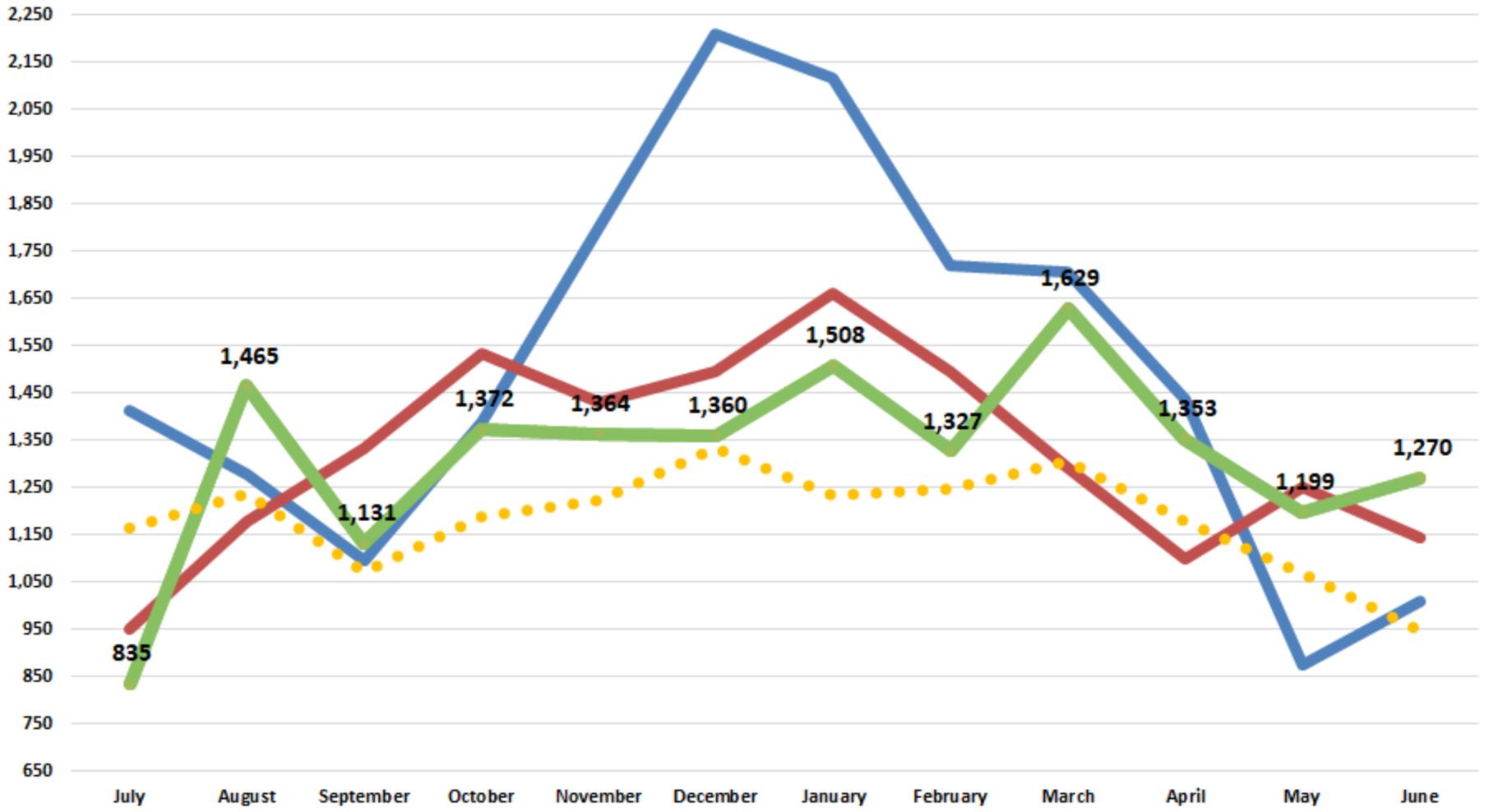
RHC Lindsay - Registrations



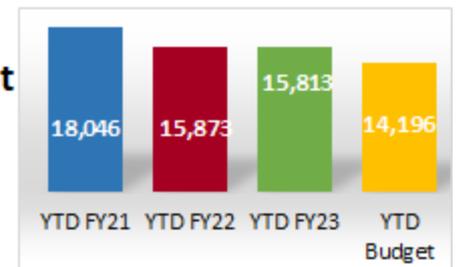
RHC Woodlake - Registrations



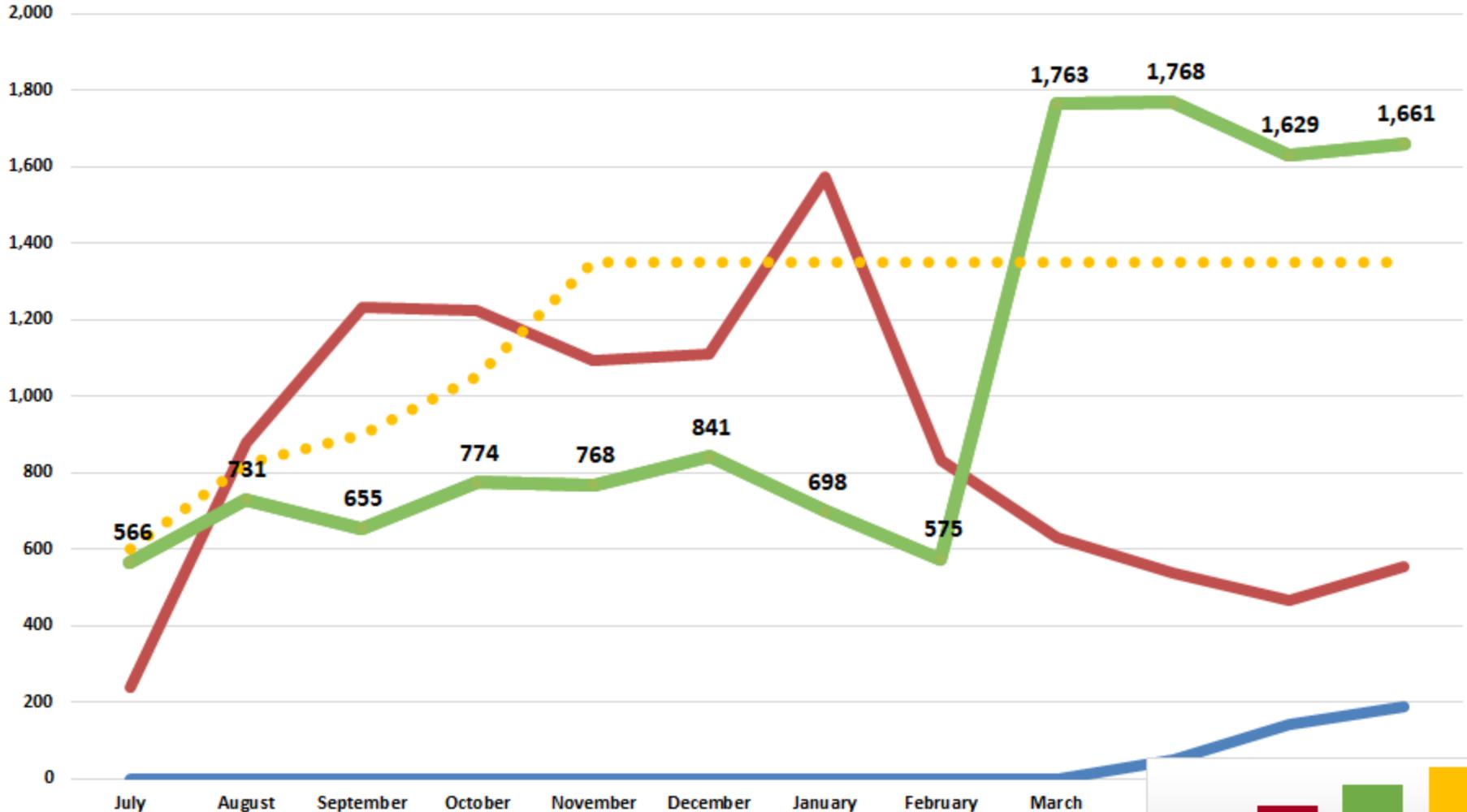
RHC Dinuba - Registrations



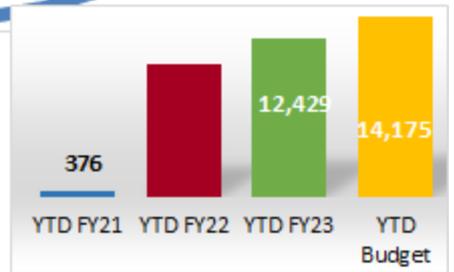
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



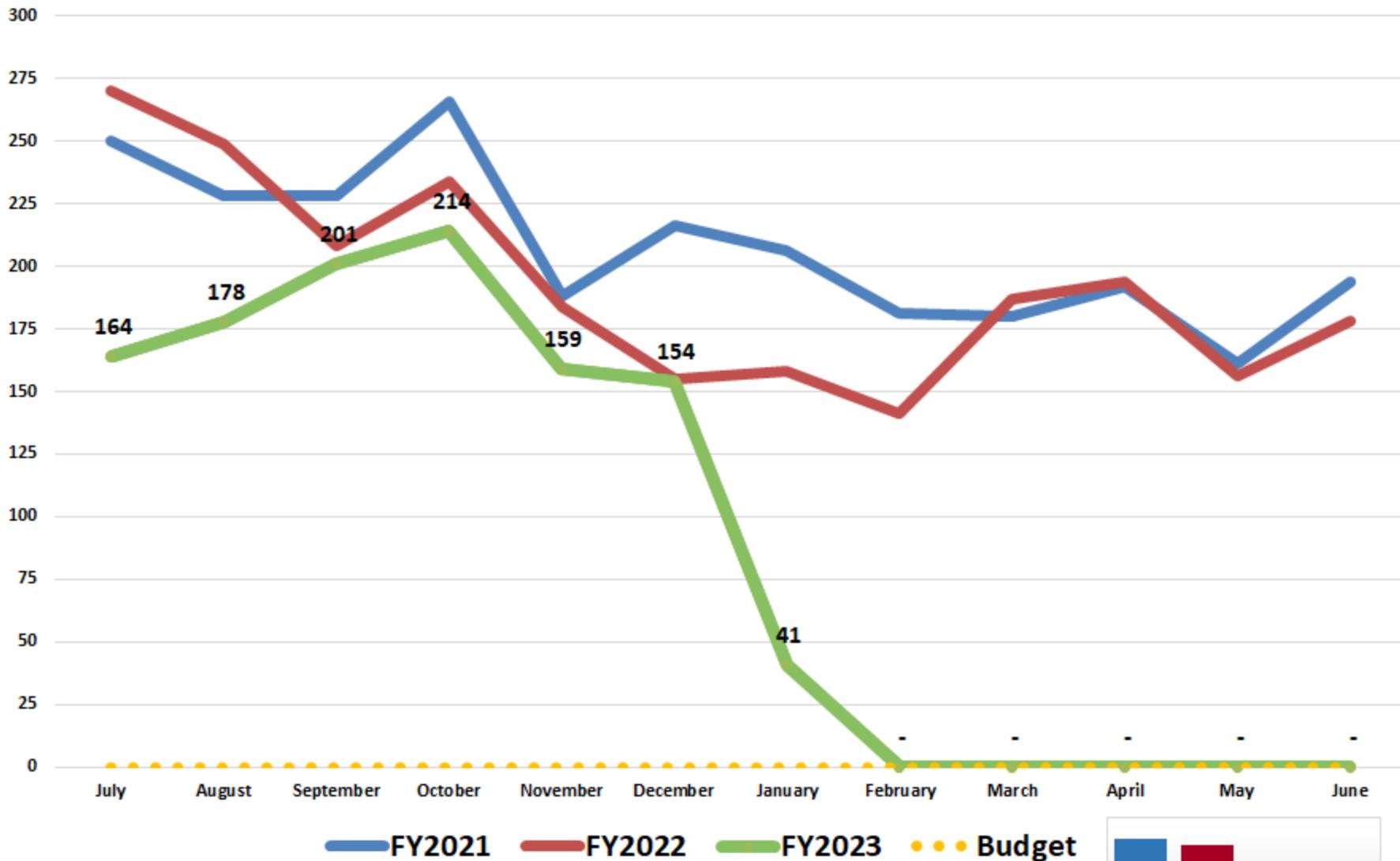
RHC Tulare - Registrations



— FY2021
 — FY2022
 — FY2023
 ●●● Budget

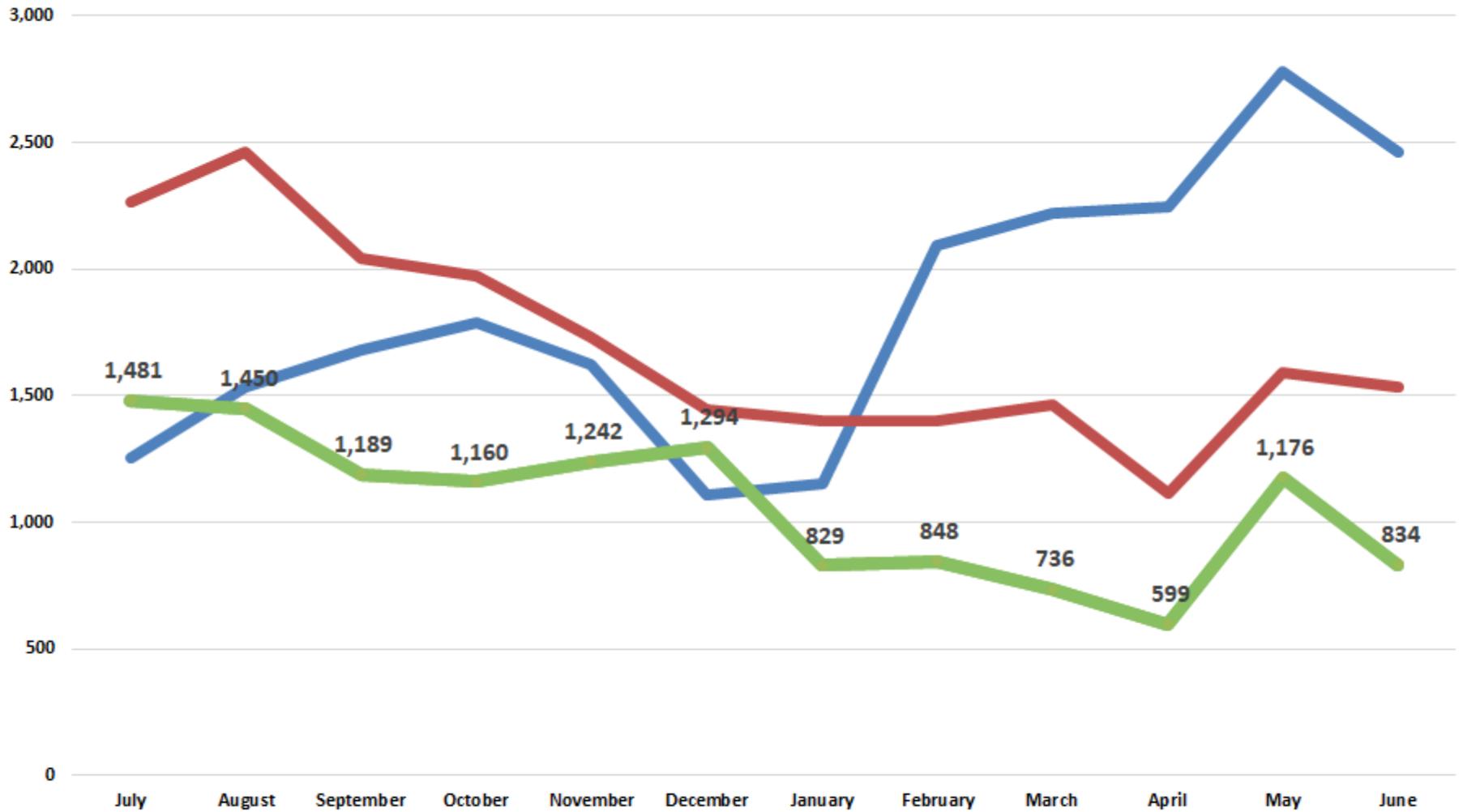


Neurosurgery Clinic Registrations

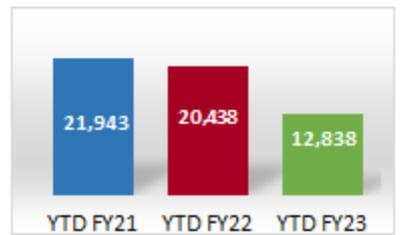


2,490	2,314	1,111	-
YTD FY21	YTD FY22	YTD FY23	YTD Budget

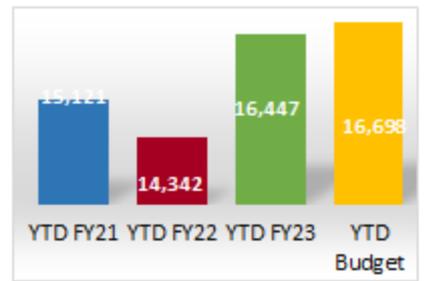
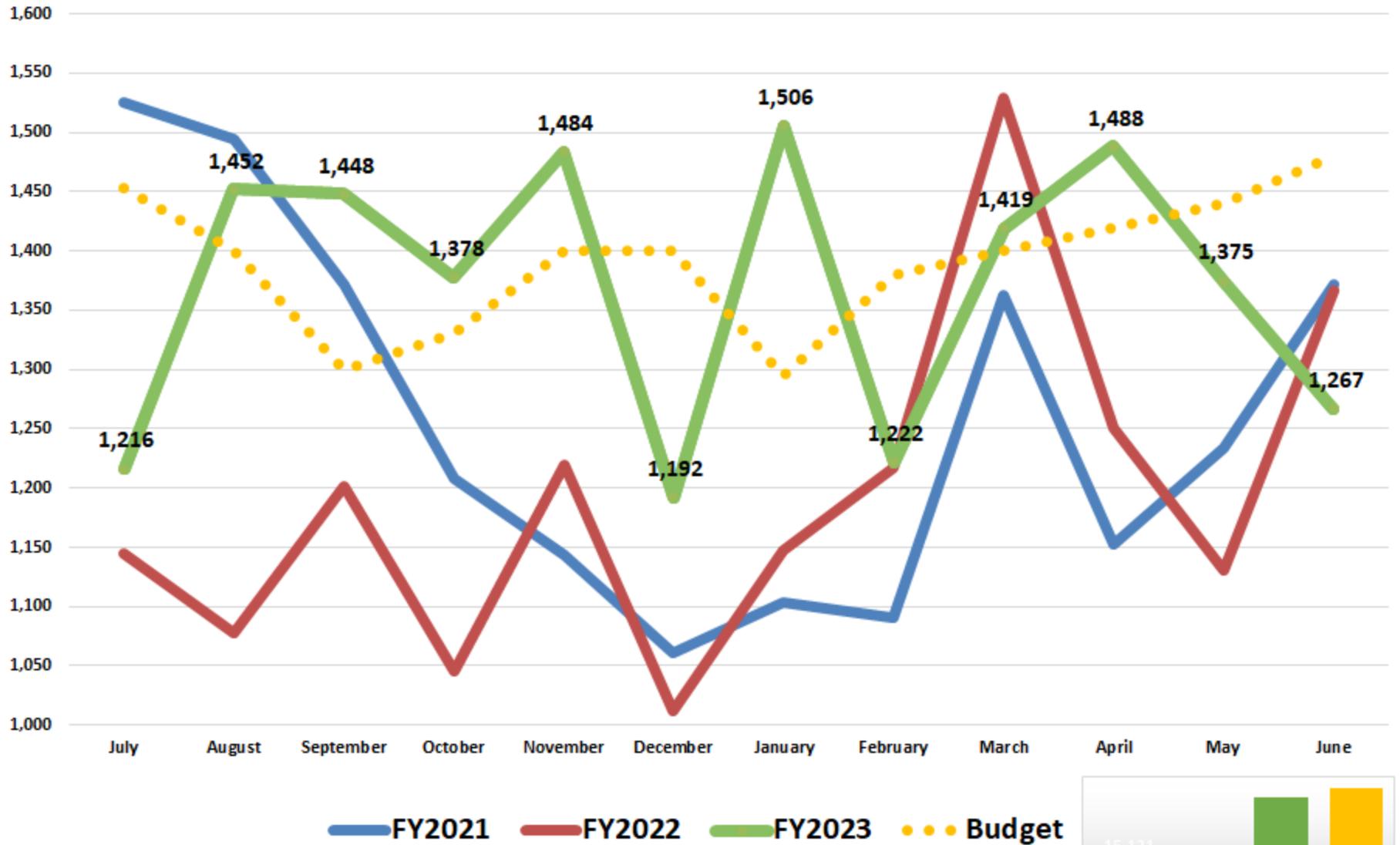
Neurosurgery Clinic - wRVU's



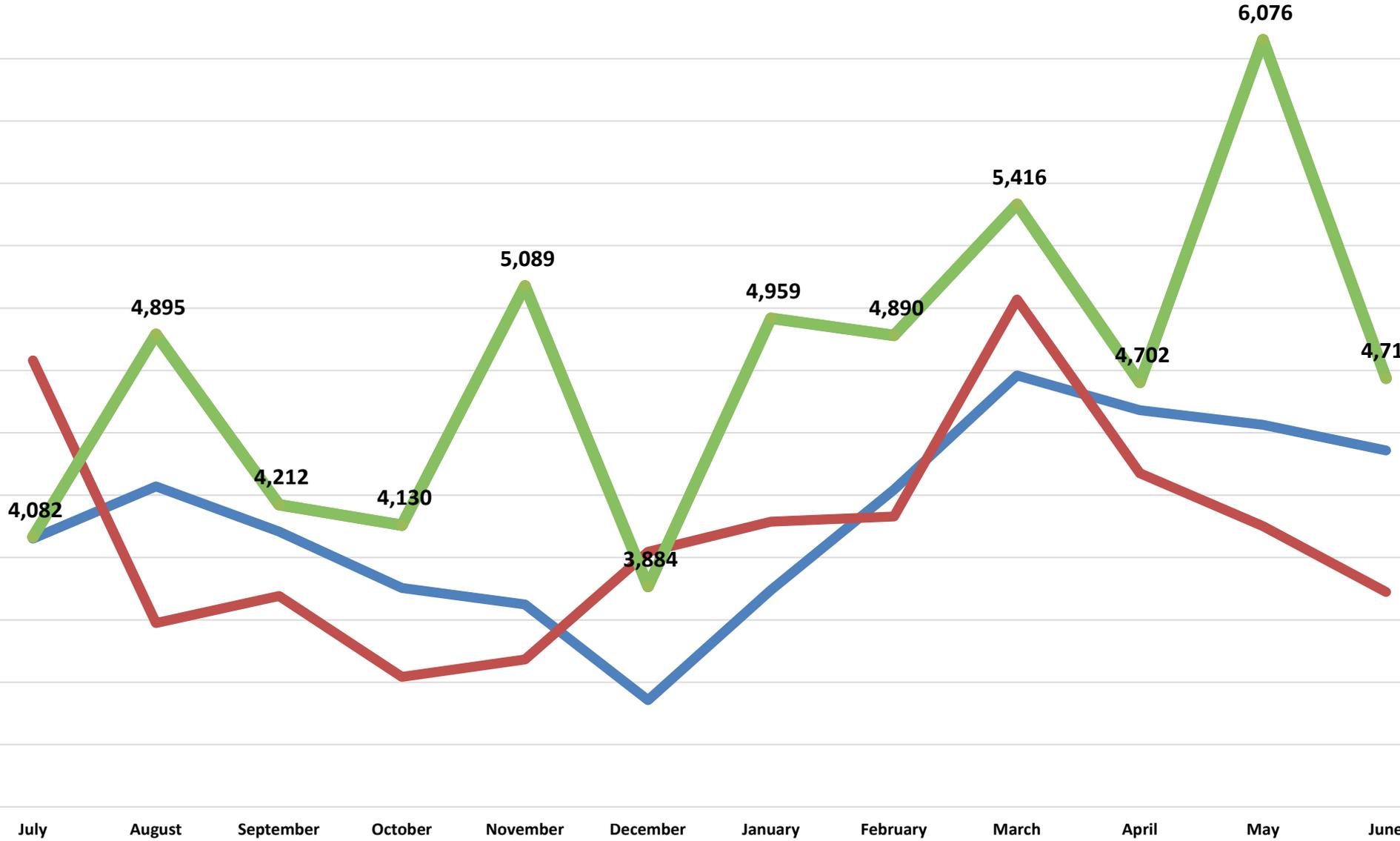
FY2021 FY2022 FY2023



Sequoia Cardiology Registrations



Sequoia Cardiology - wRVU's

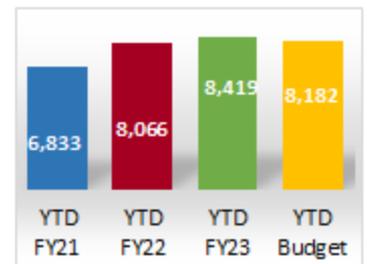
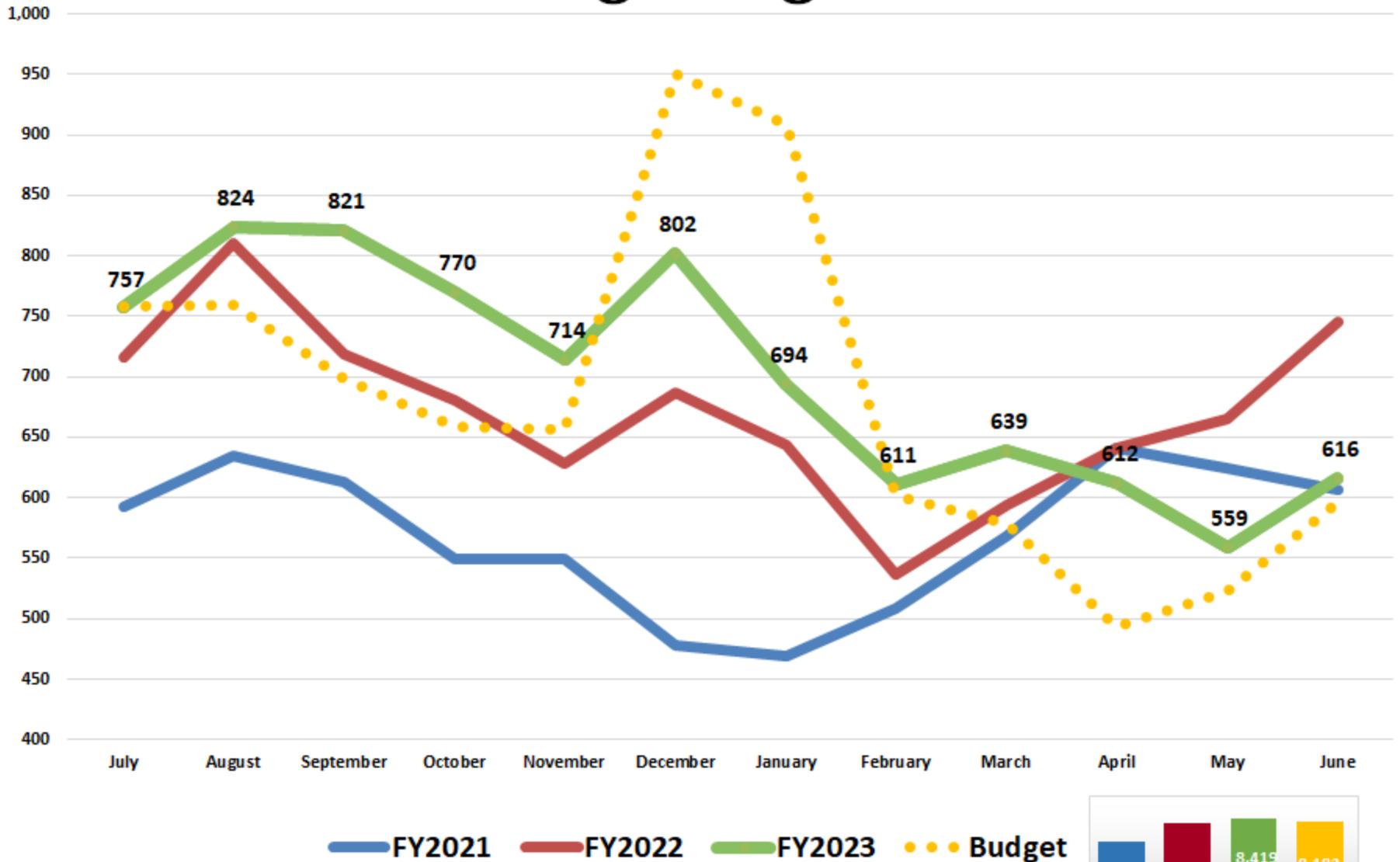


— **FY2021**
— **FY2022**
— **FY2023**

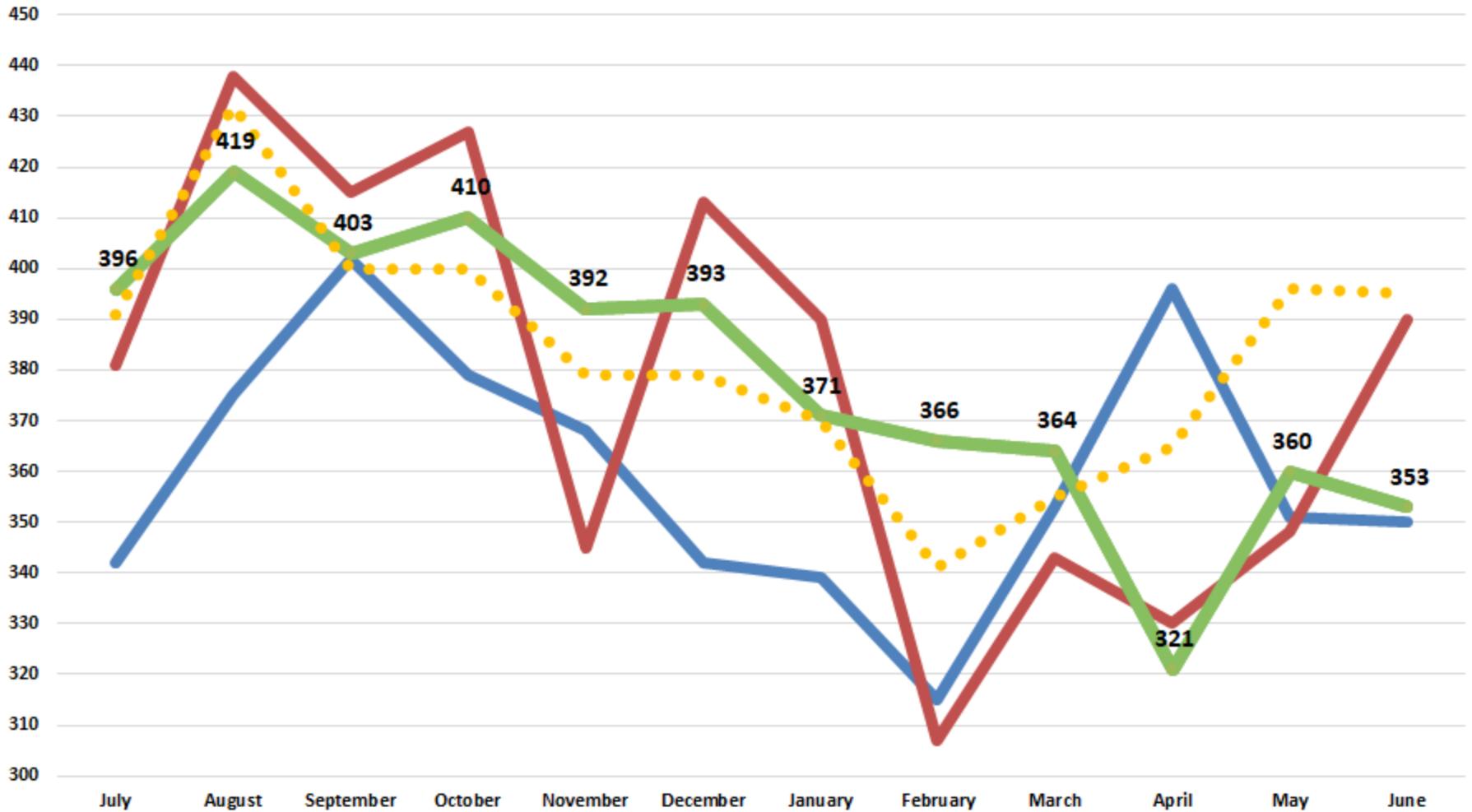
206/242



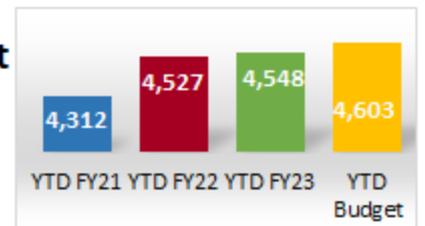
Labor Triage Registrations



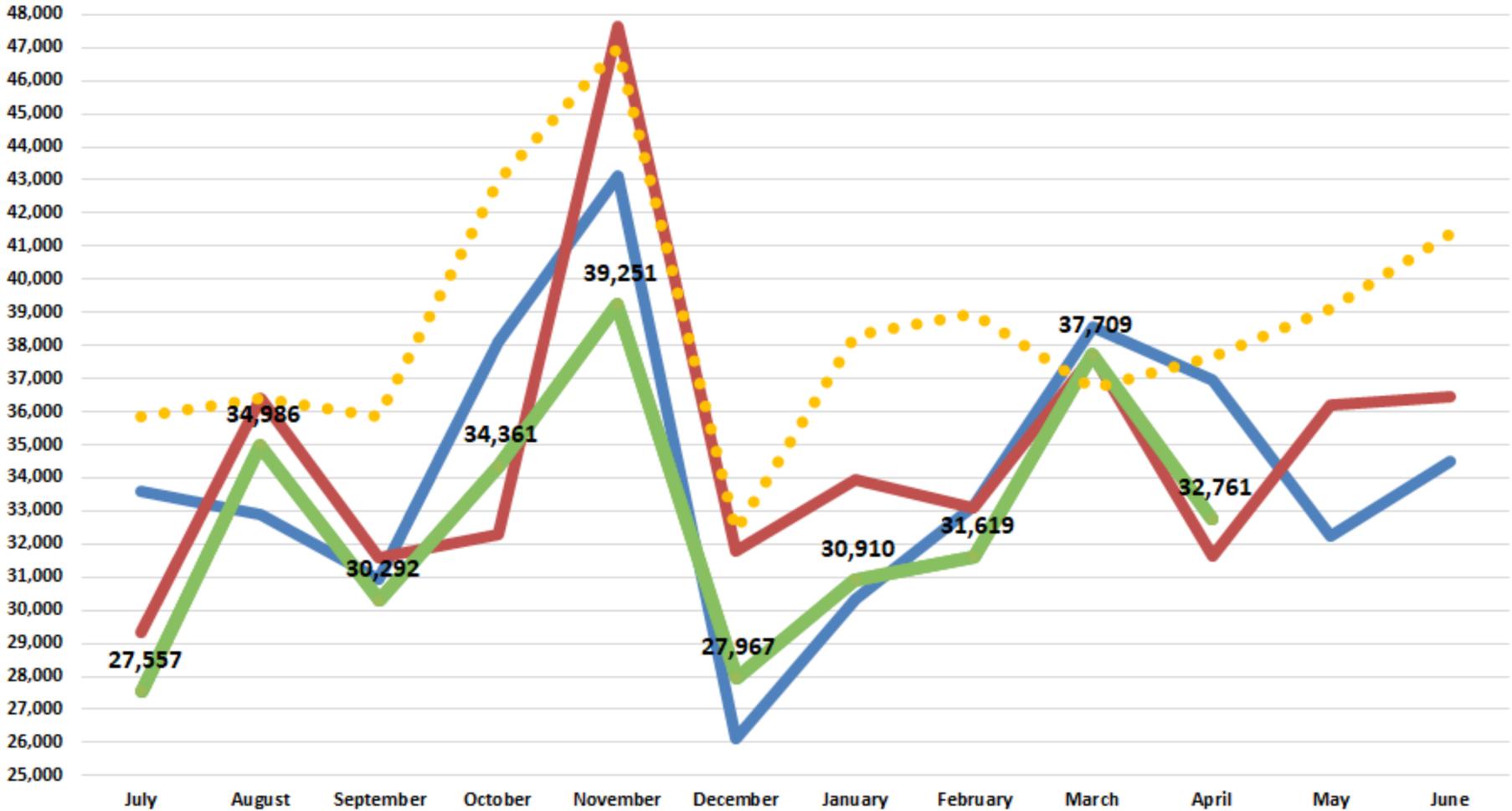
Deliveries



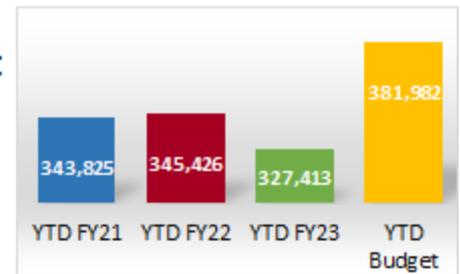
— FY2021
 — FY2022
 — FY2023
 ••• Budget



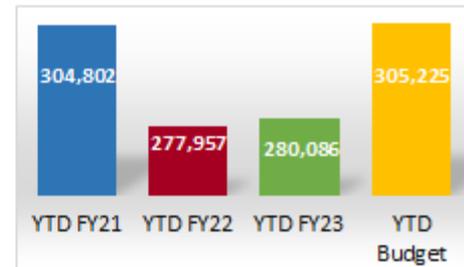
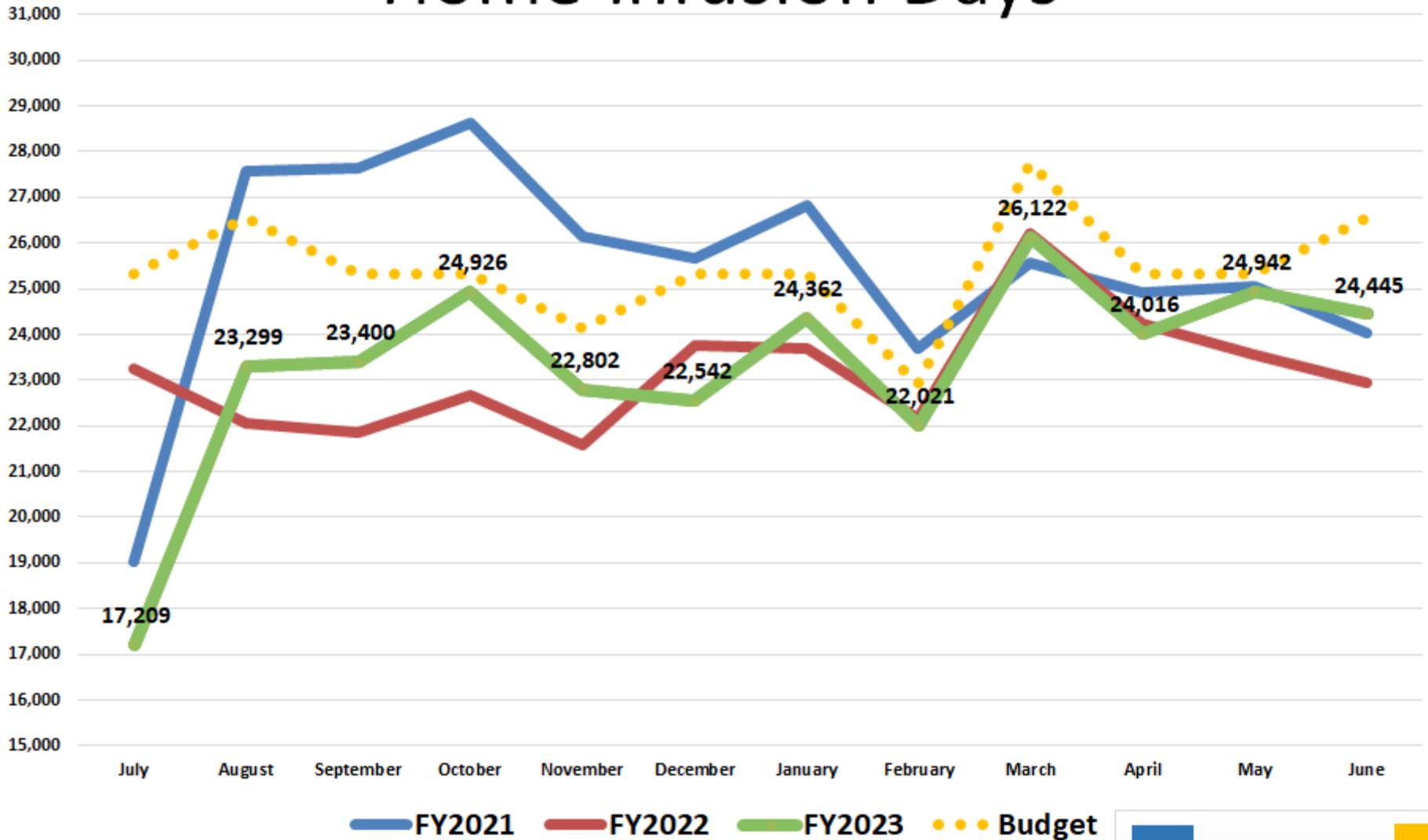
KHMG RVU's



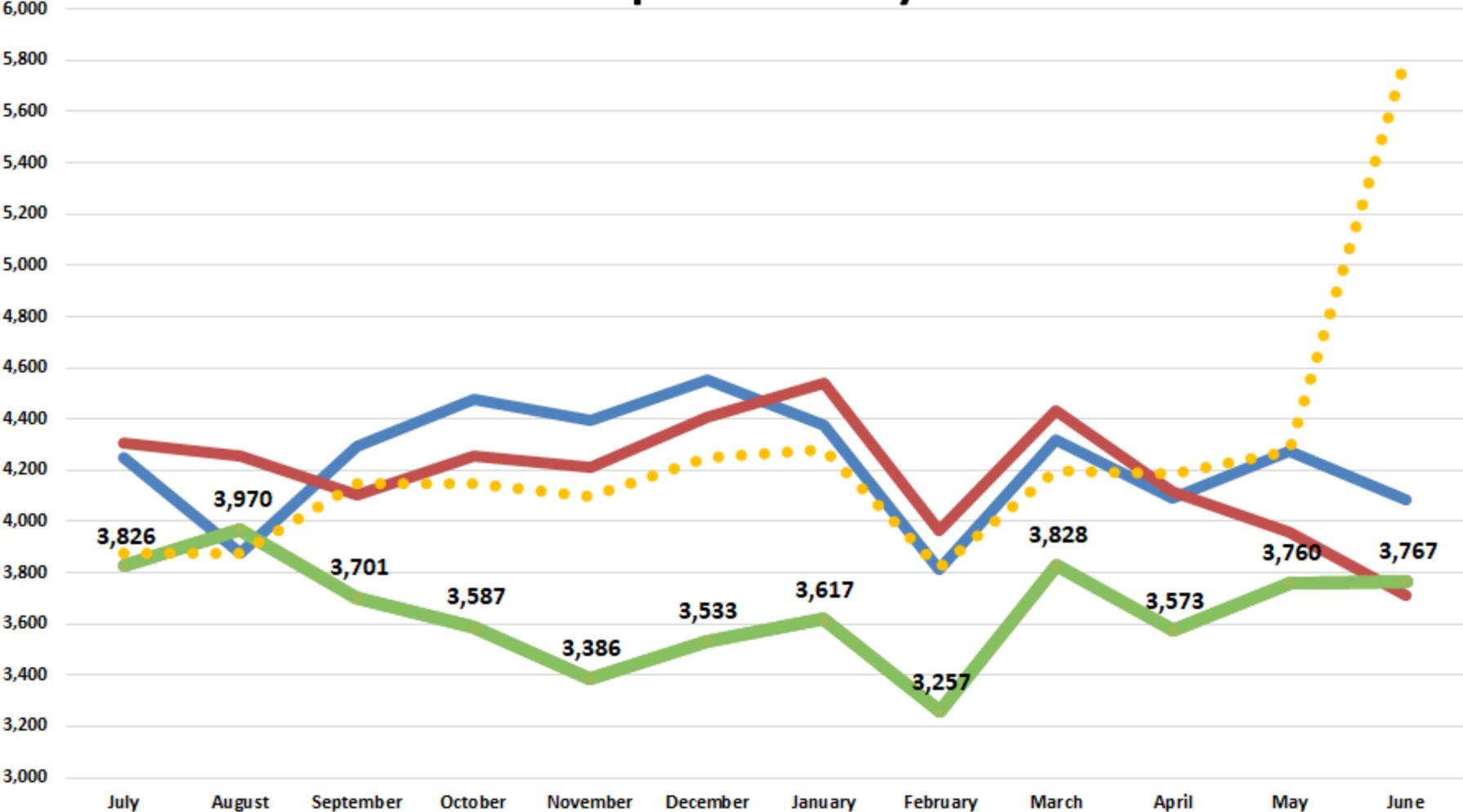
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



Home Infusion Days



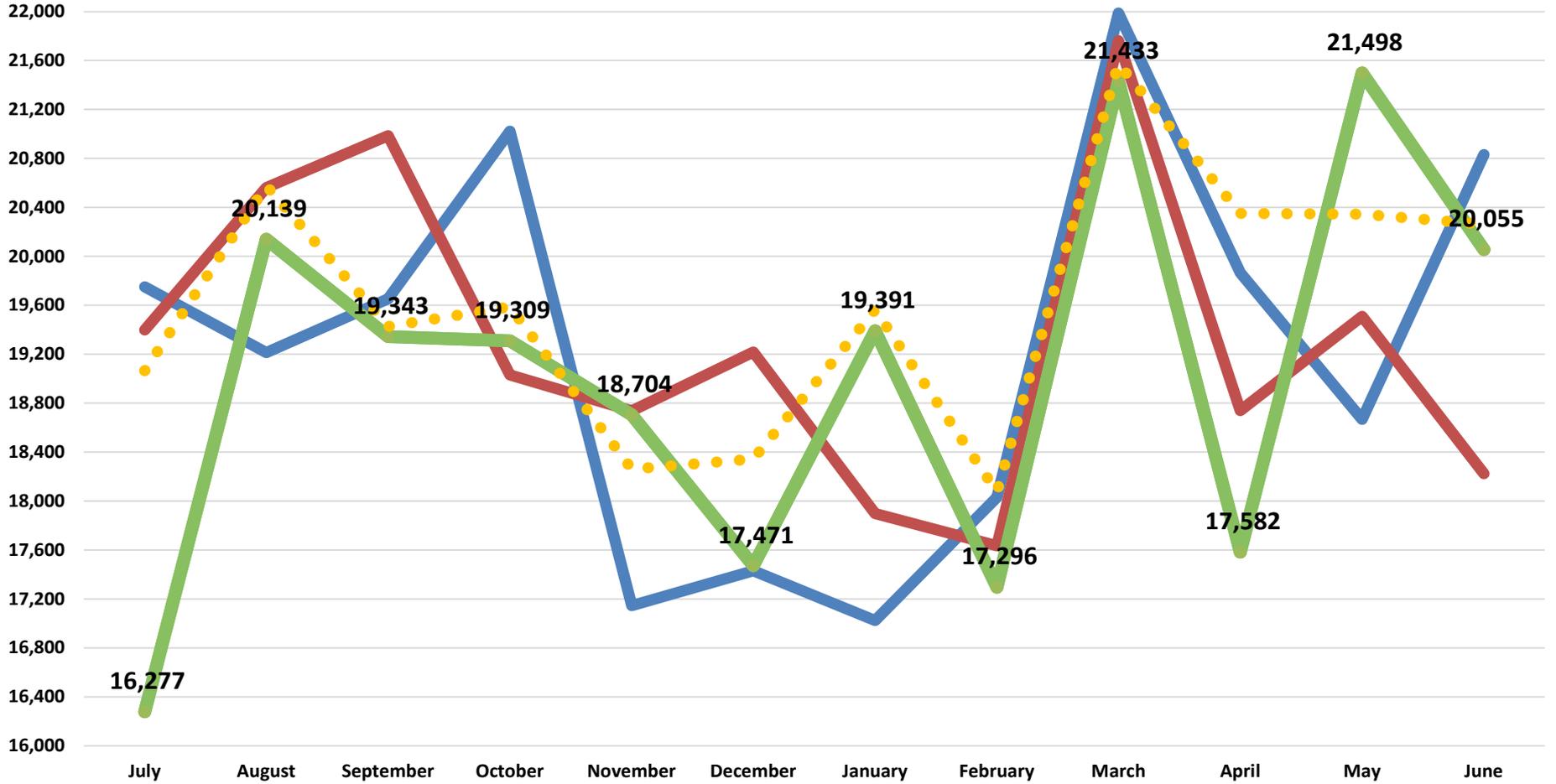
Hospice Days



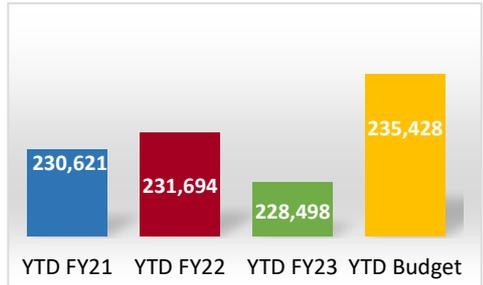
— FY2021
 — FY2022
 — FY2023
 ••• Budget



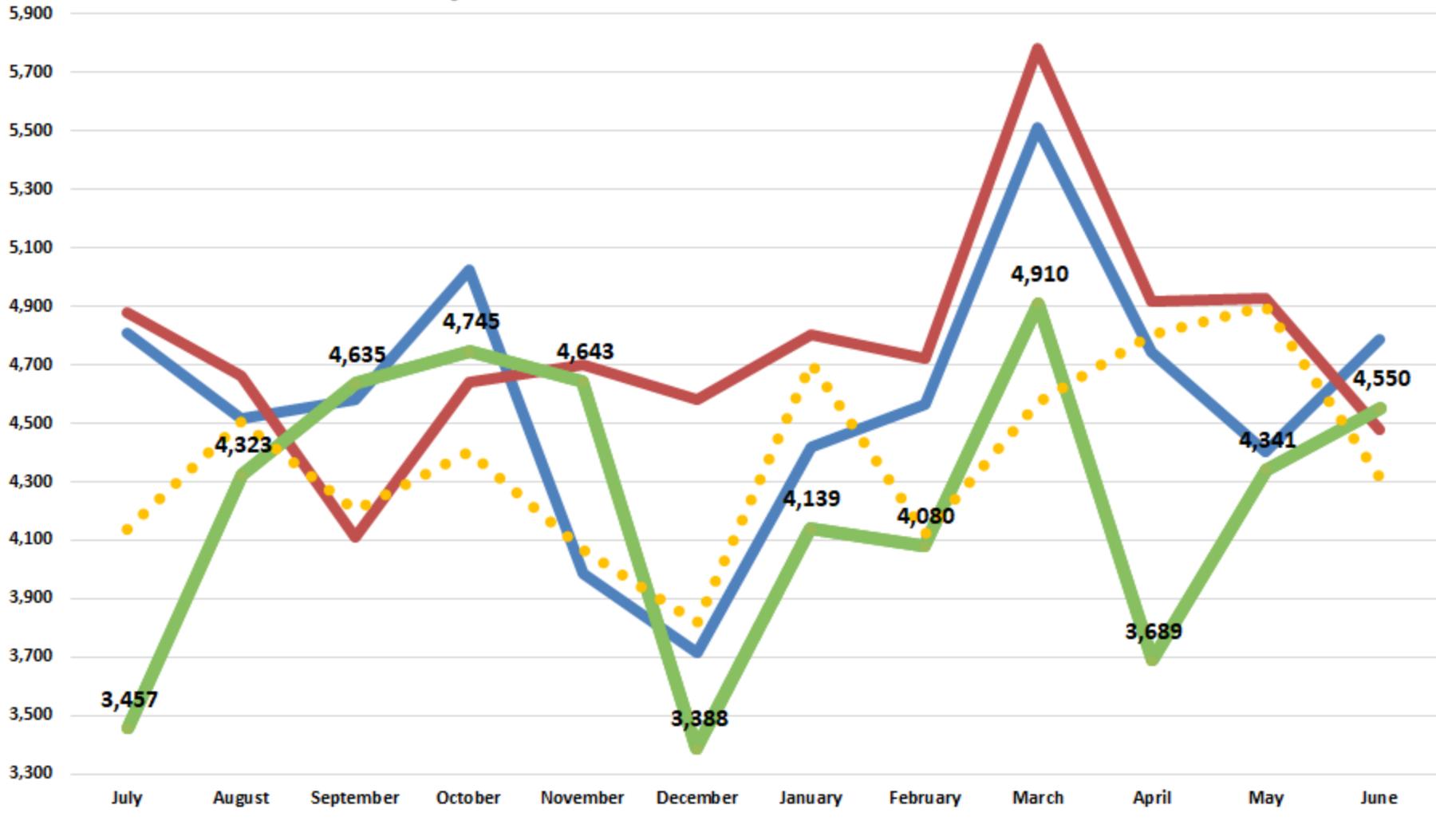
All O/P Rehab Svcs Across District



— FY2021
 — FY2022
 — FY2023
 ●●● Budget



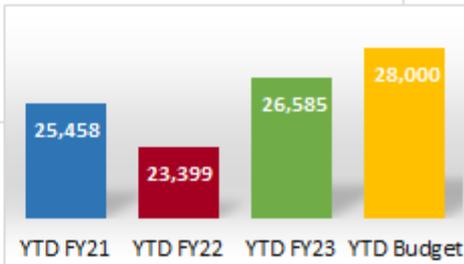
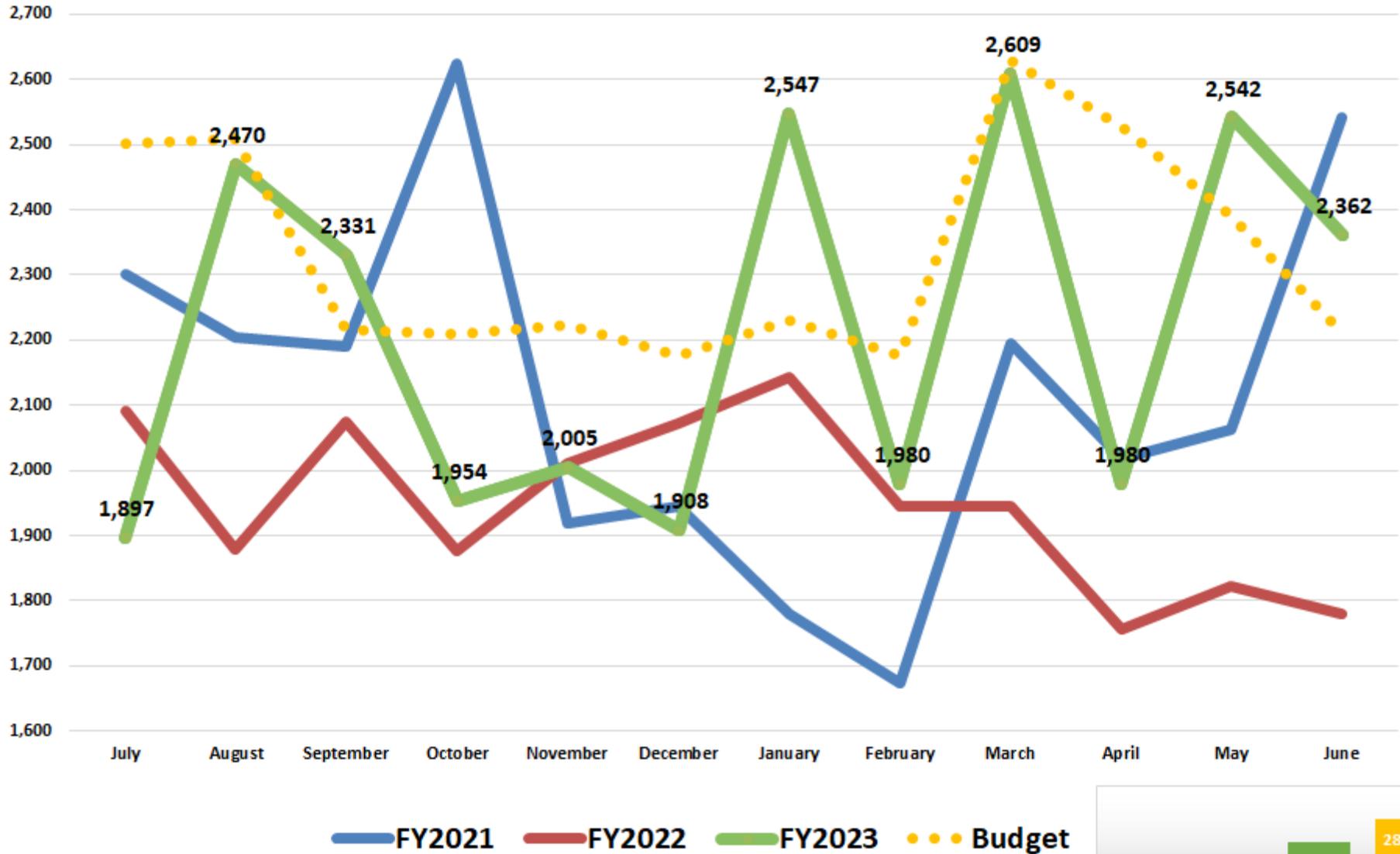
O/P Rehab Services



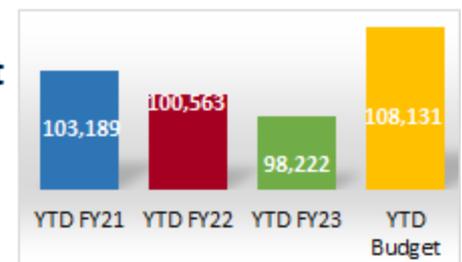
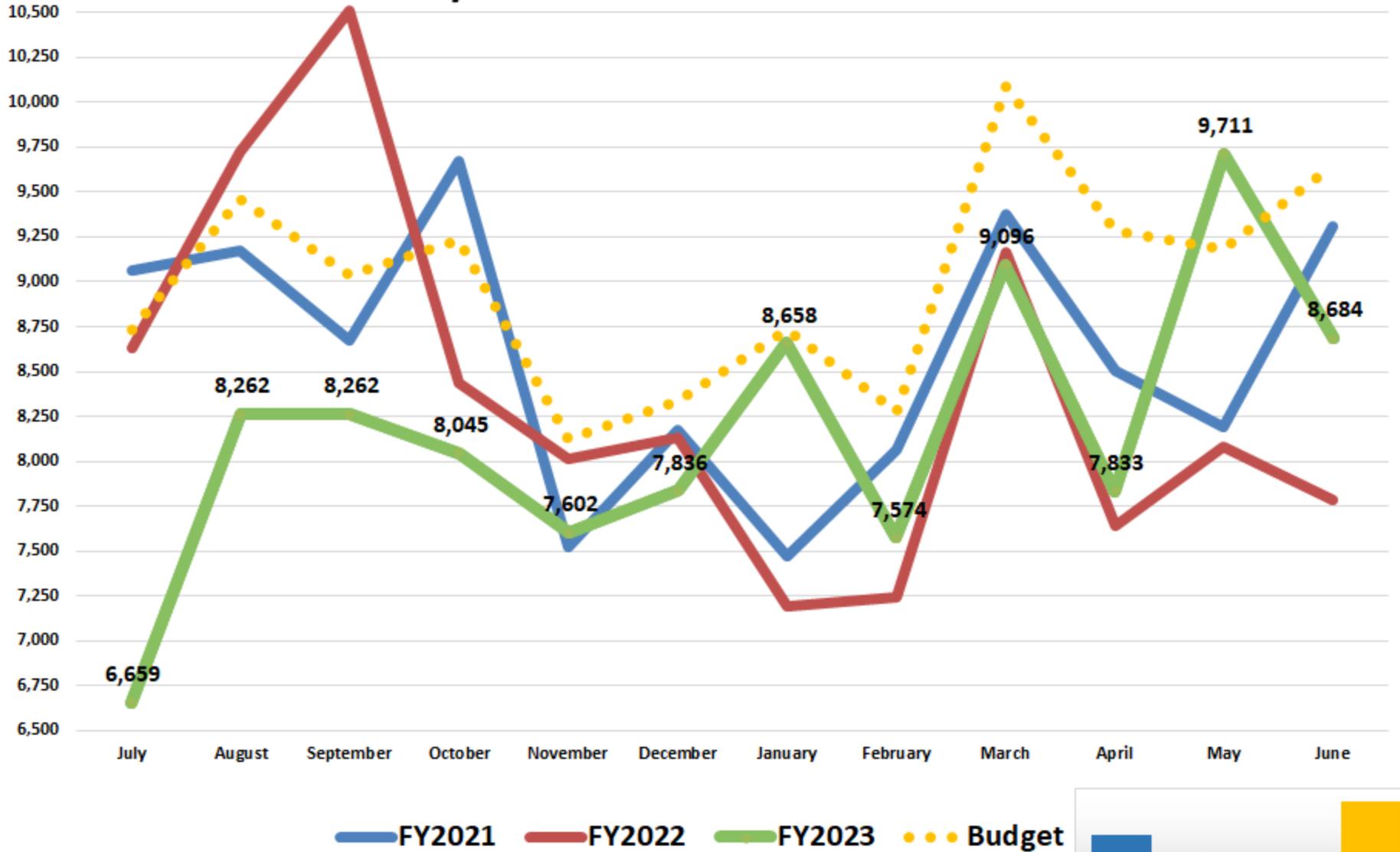
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



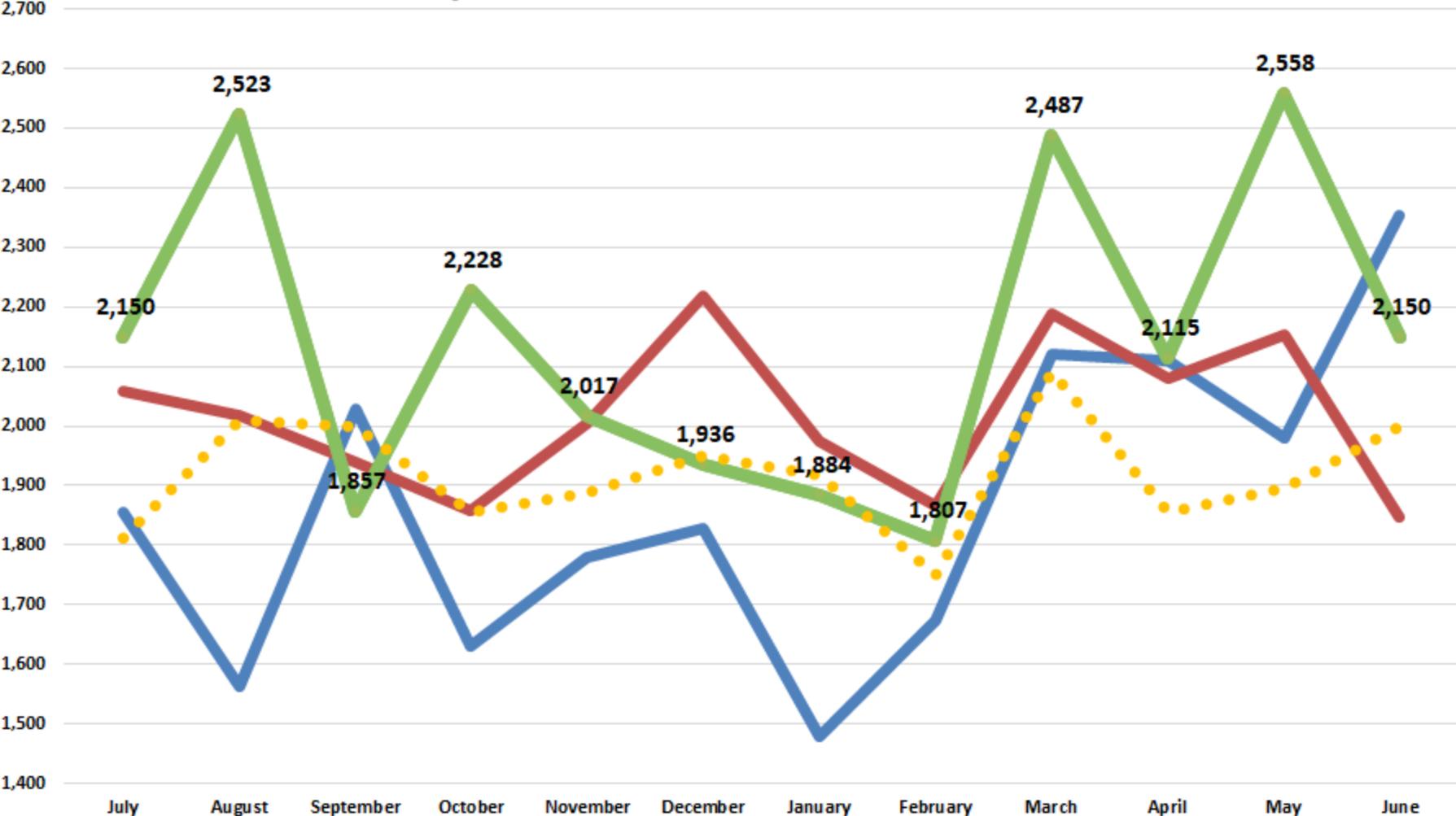
O/P Rehab - Exeter



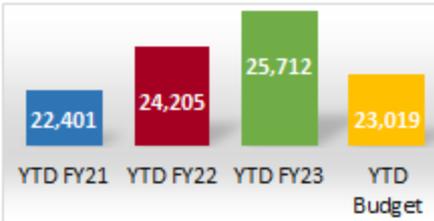
O/P Rehab - Akers



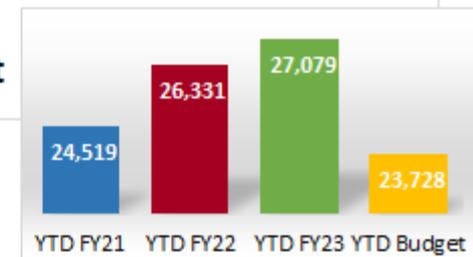
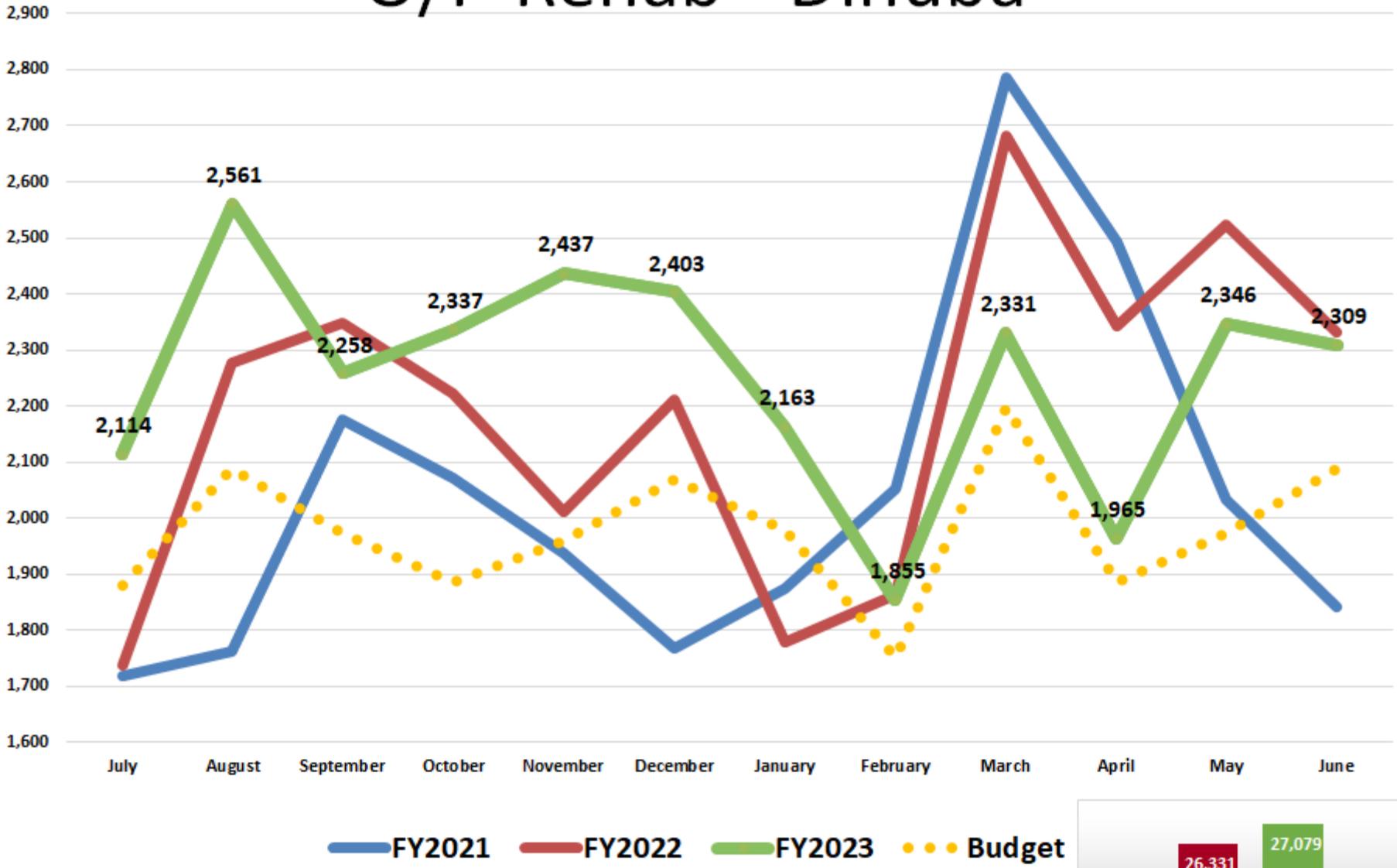
O/P Rehab - LLOPT



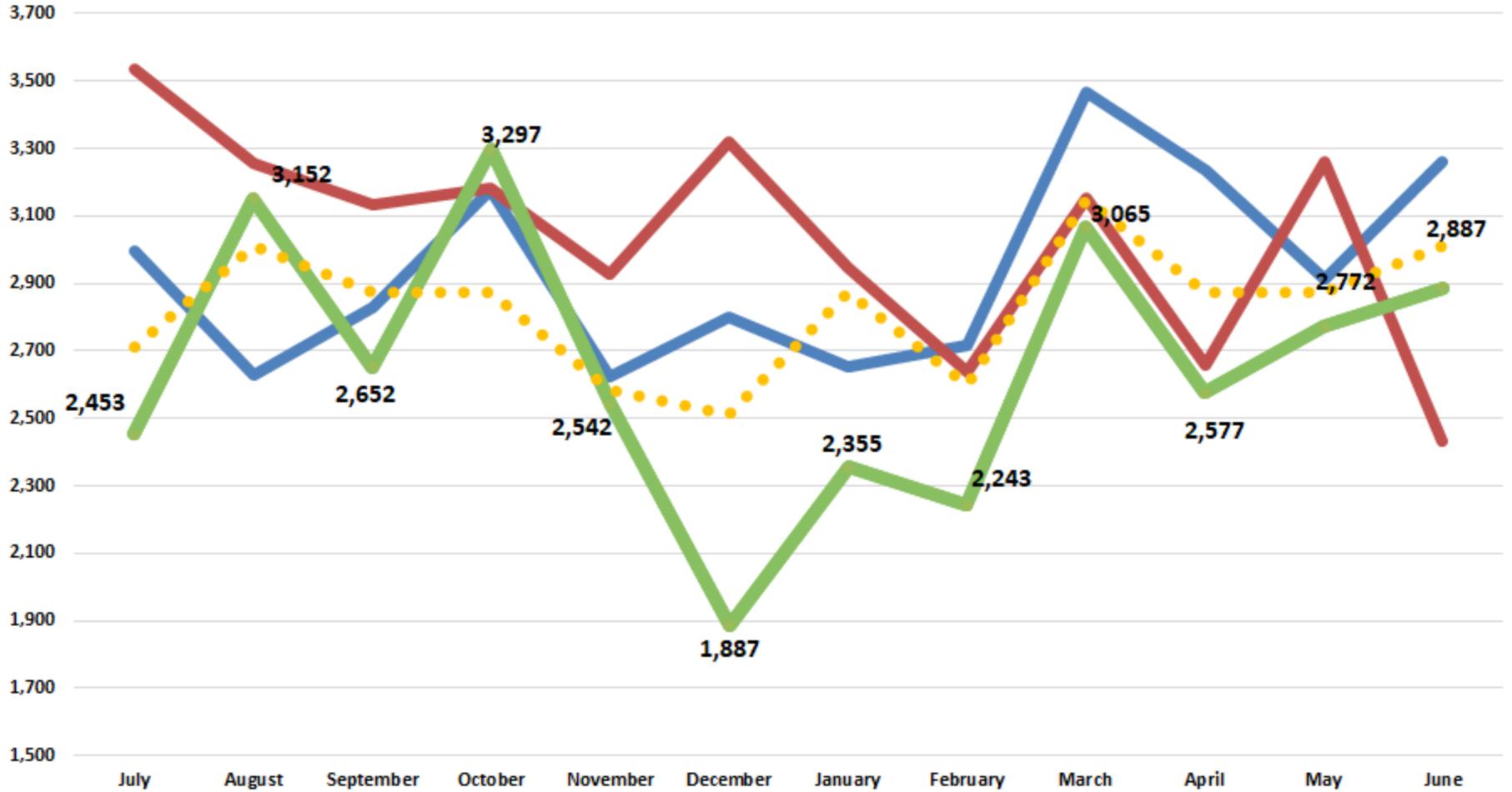
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



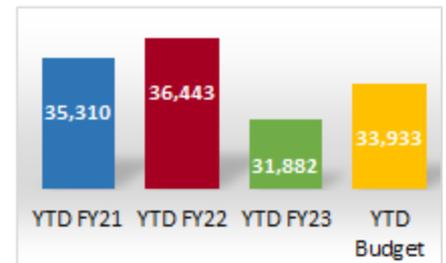
O/P Rehab - Dinuba



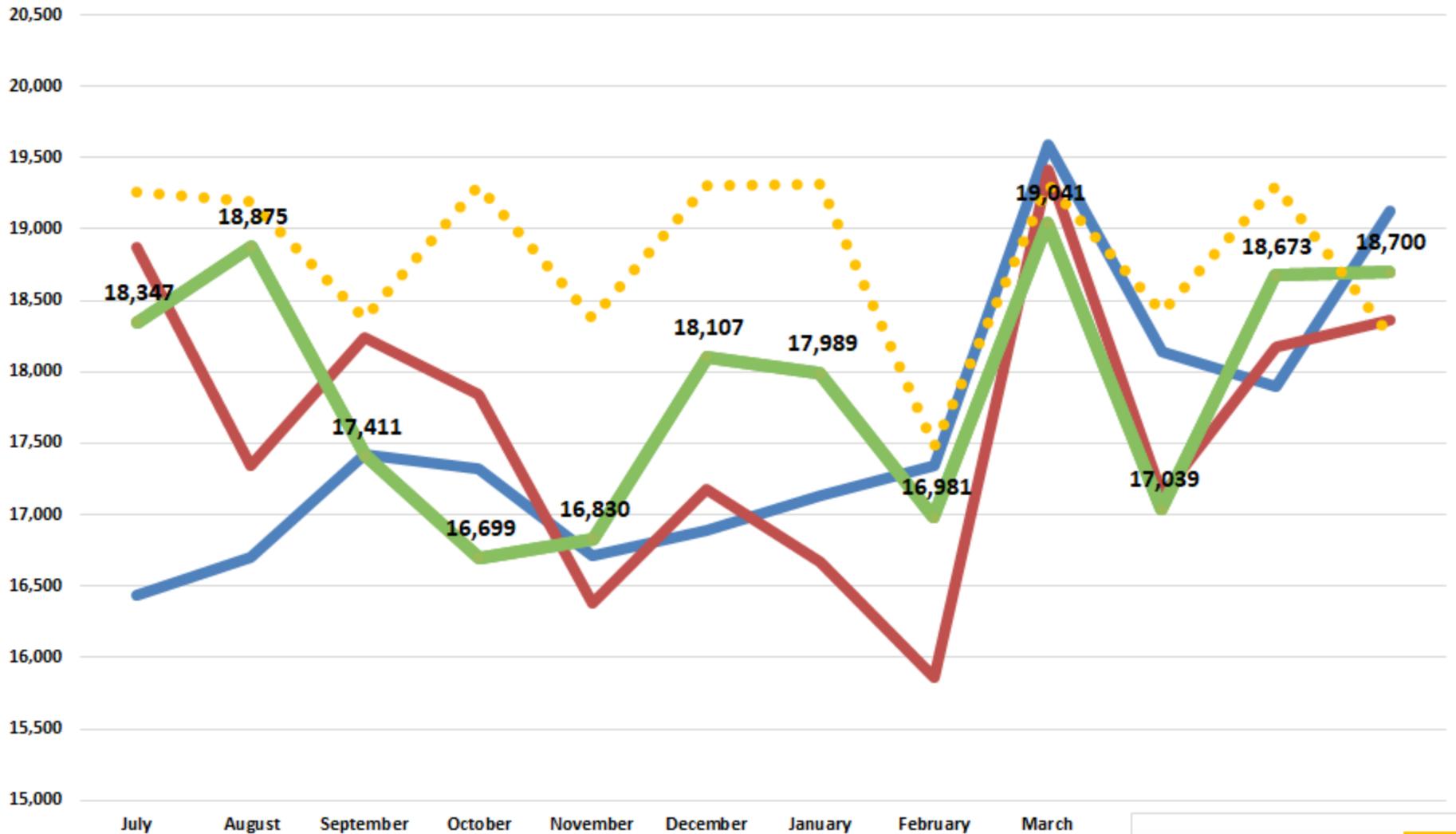
Therapy - Cypress Hand Center



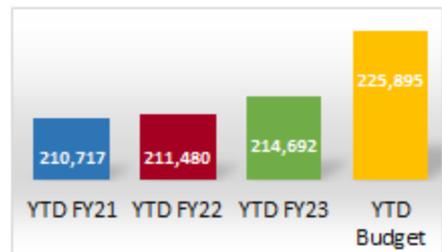
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



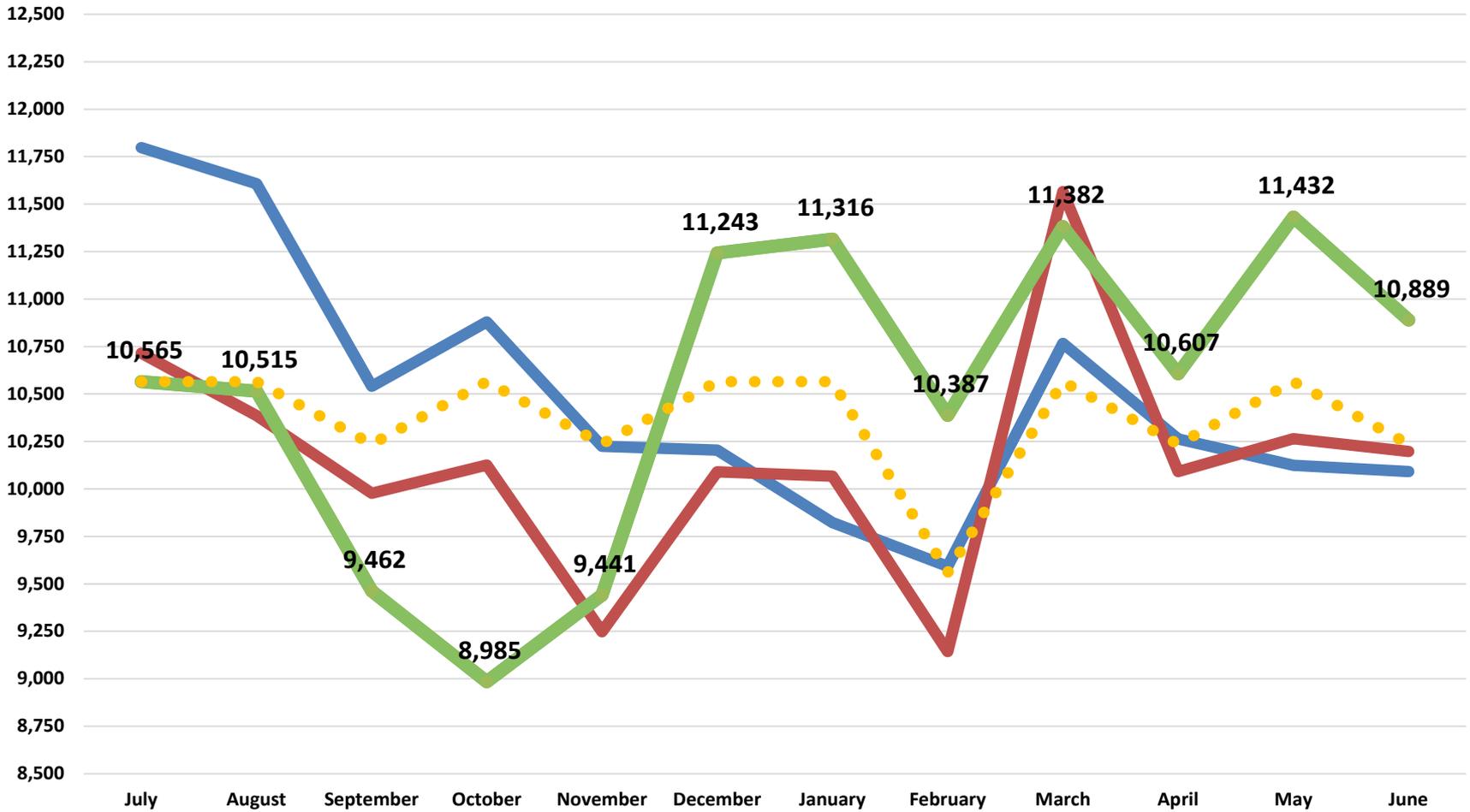
Physical & Other Therapy Units (I/P & O/P)



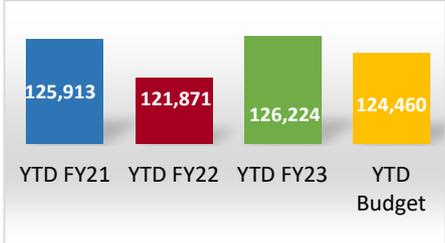
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



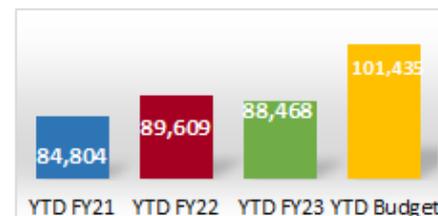
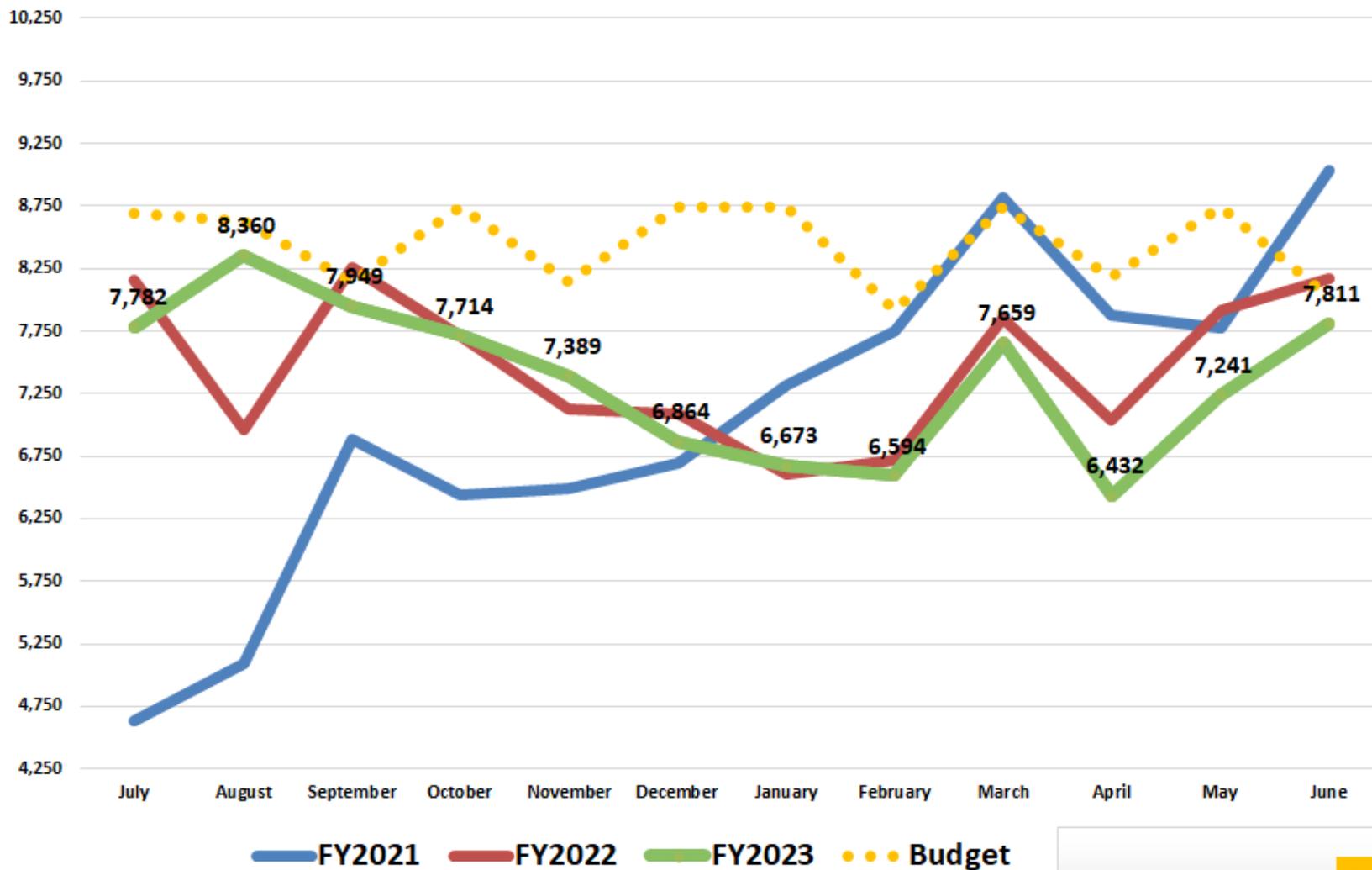
Physical & Other Therapy Units (I/P & O/P)-Main Campus



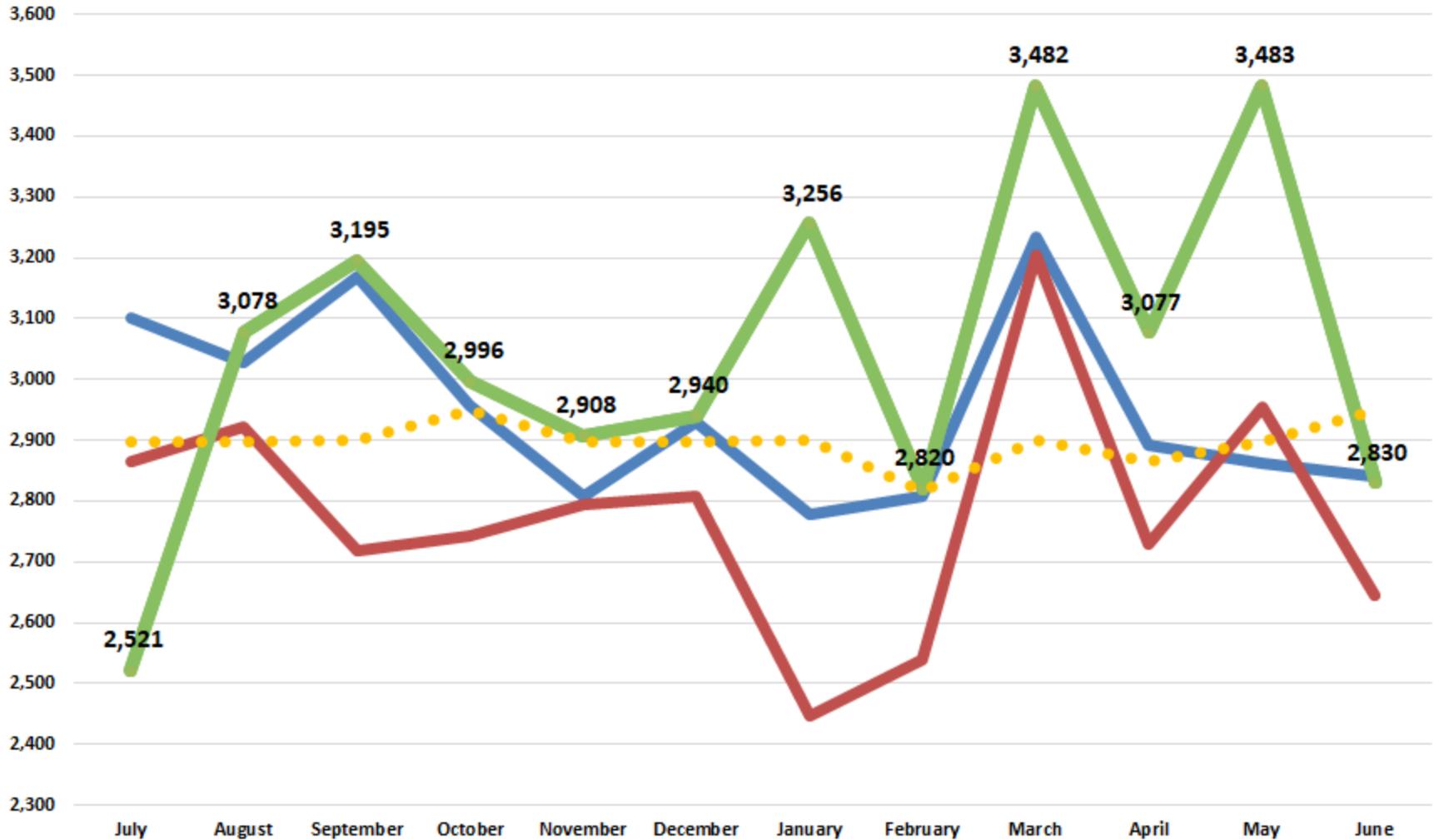
— **FY2021**
 — **FY2022**
 — **FY2023**
 ●●● **Budget**



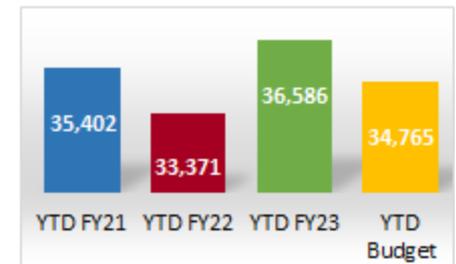
Physical & Other Therapy Units (I/P & O/P)- KDRH & South Campus



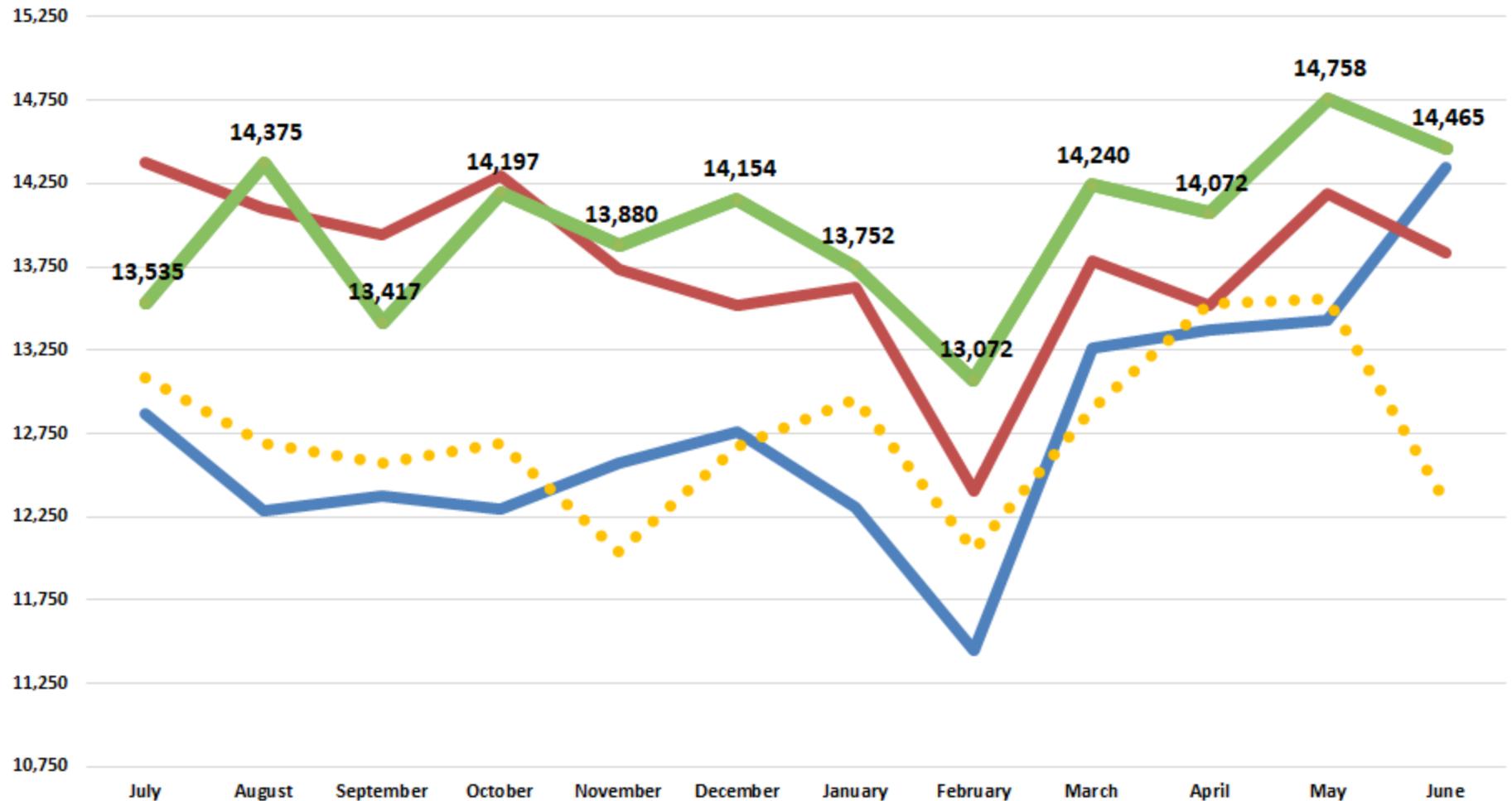
Home Health Visits



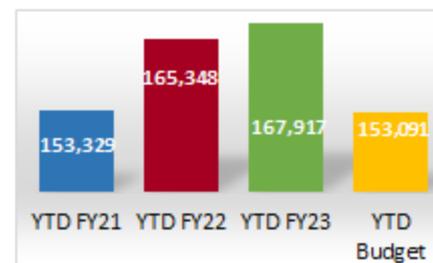
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



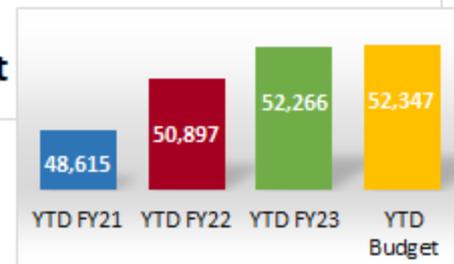
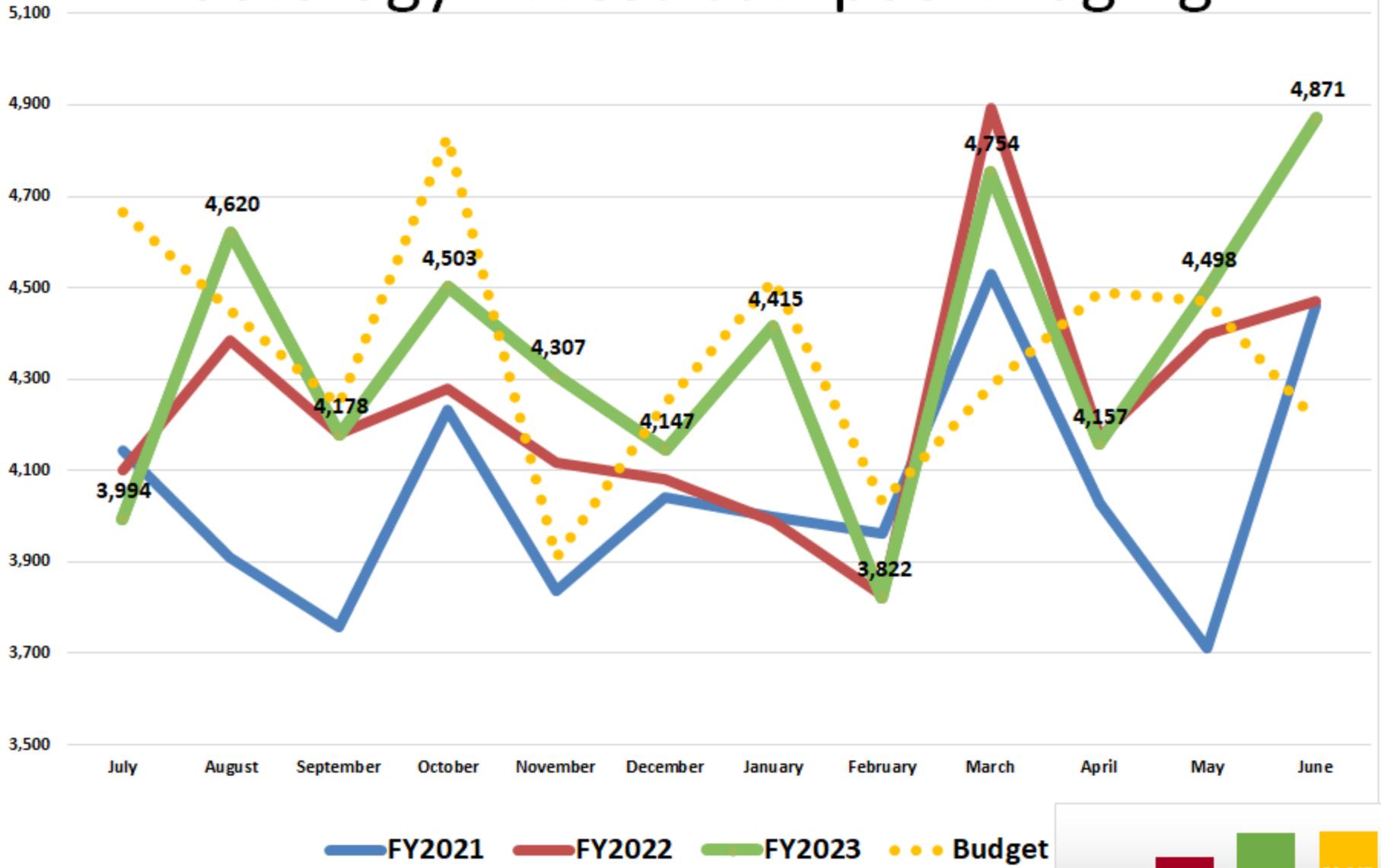
Radiology – Main Campus



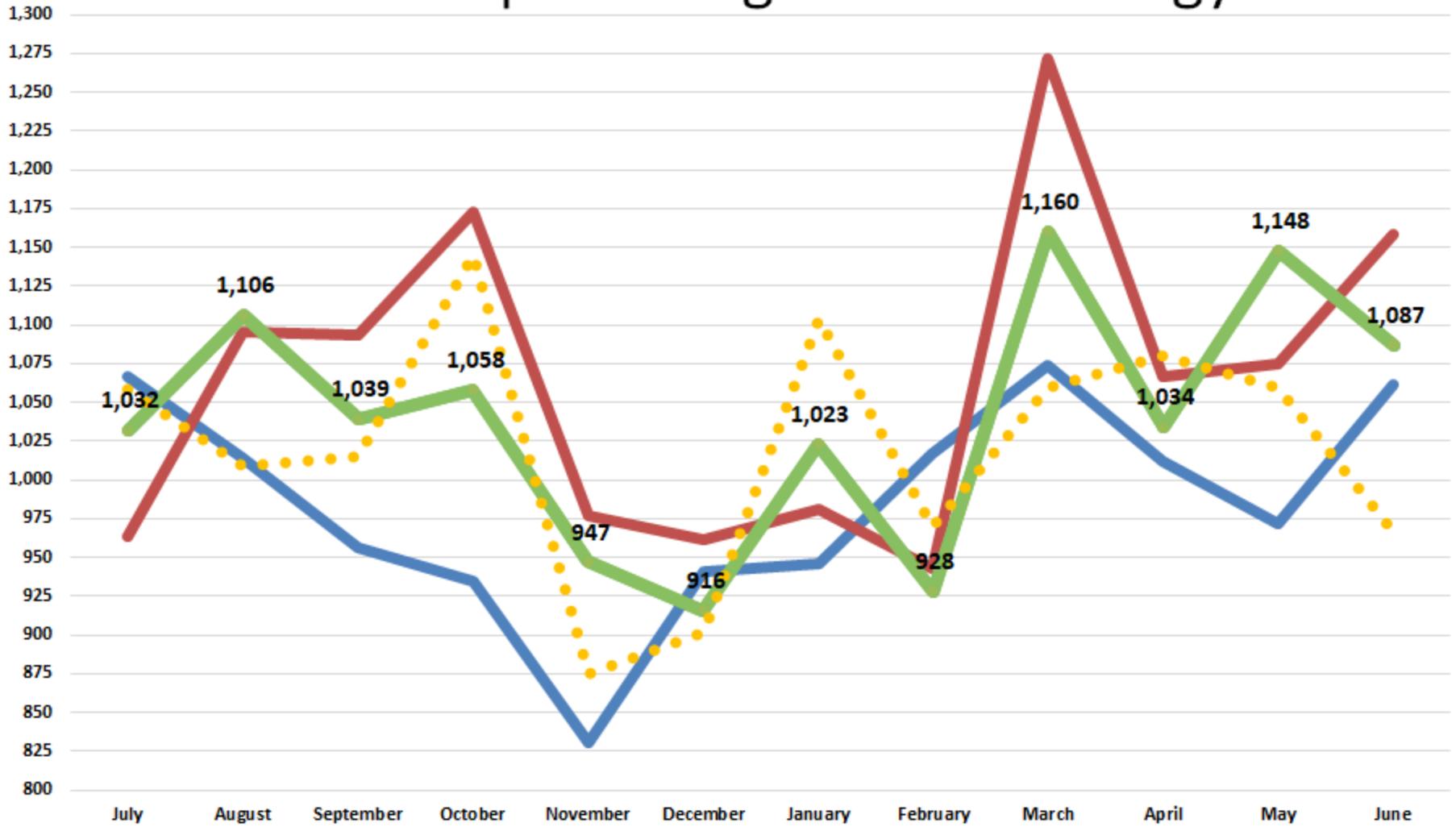
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



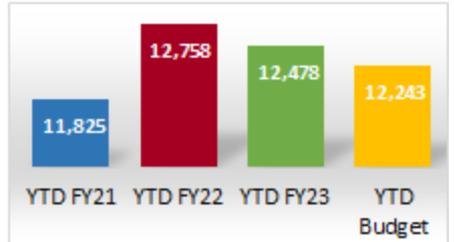
Radiology - West Campus Imaging



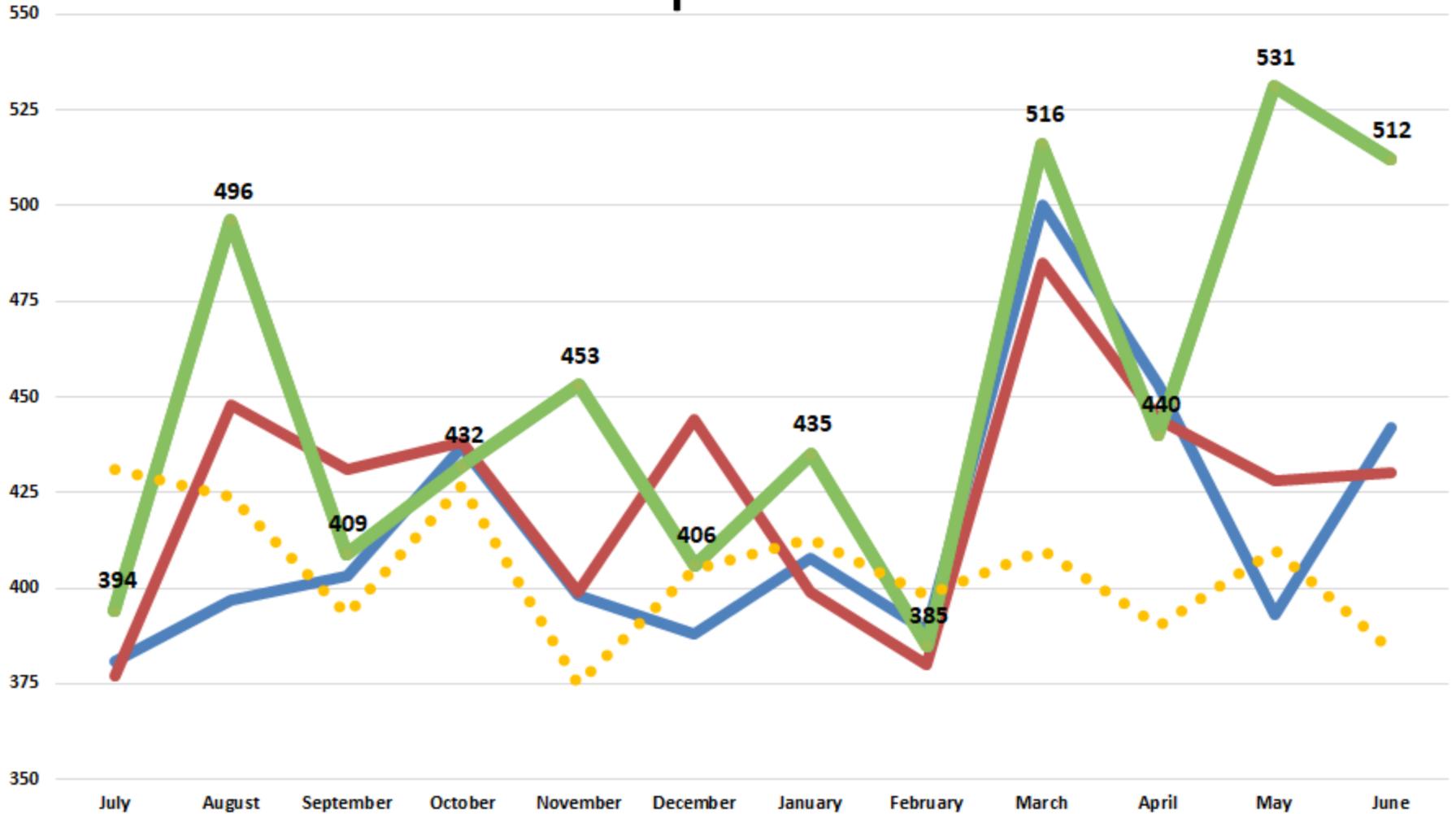
West Campus - Diagnostic Radiology



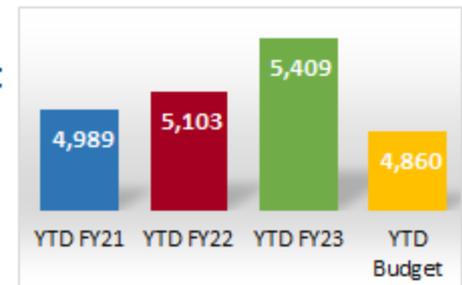
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



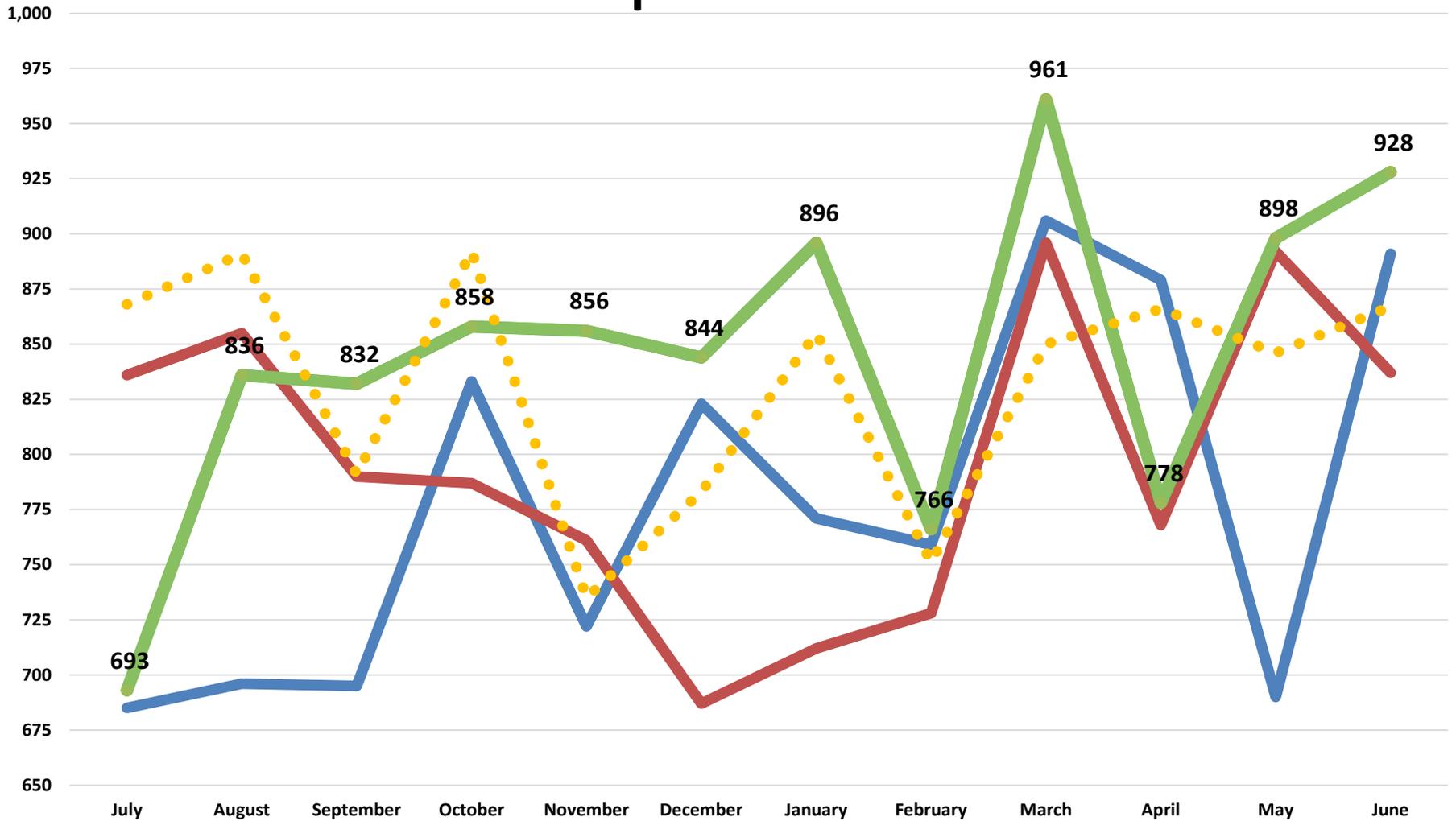
West Campus - CT Scan



— FY2021
 — FY2022
 — FY2023
 ●●● Budget



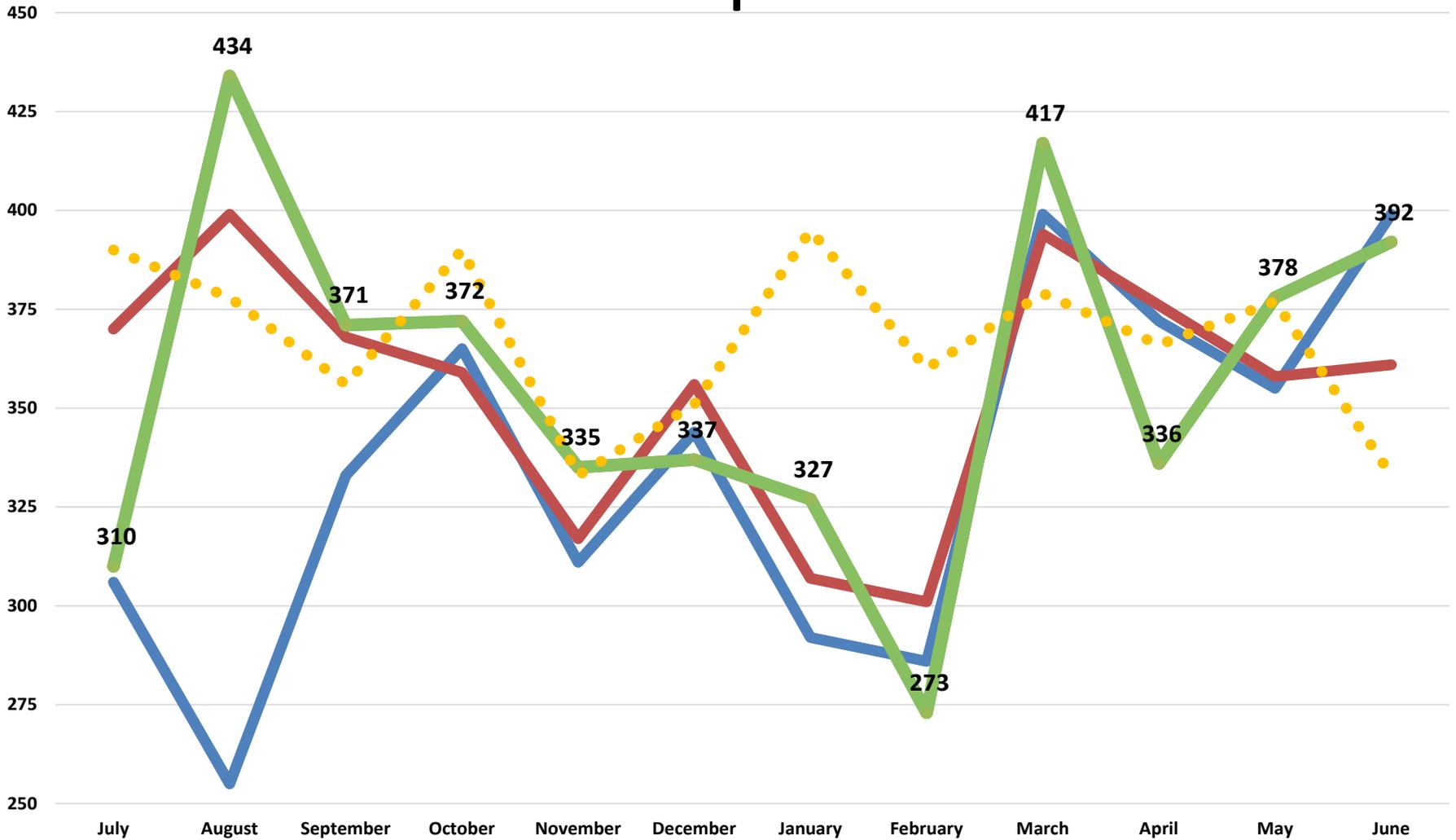
West Campus - Ultrasound



— **FY2021**
 — **FY2022**
 — **FY2023**
 ●● **Budget**

9,350	9,549	10,146	9,995
YTD FY21	YTD FY22	YTD FY23	YTD Budget

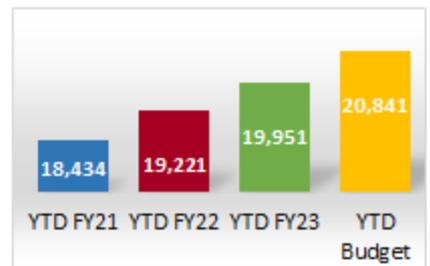
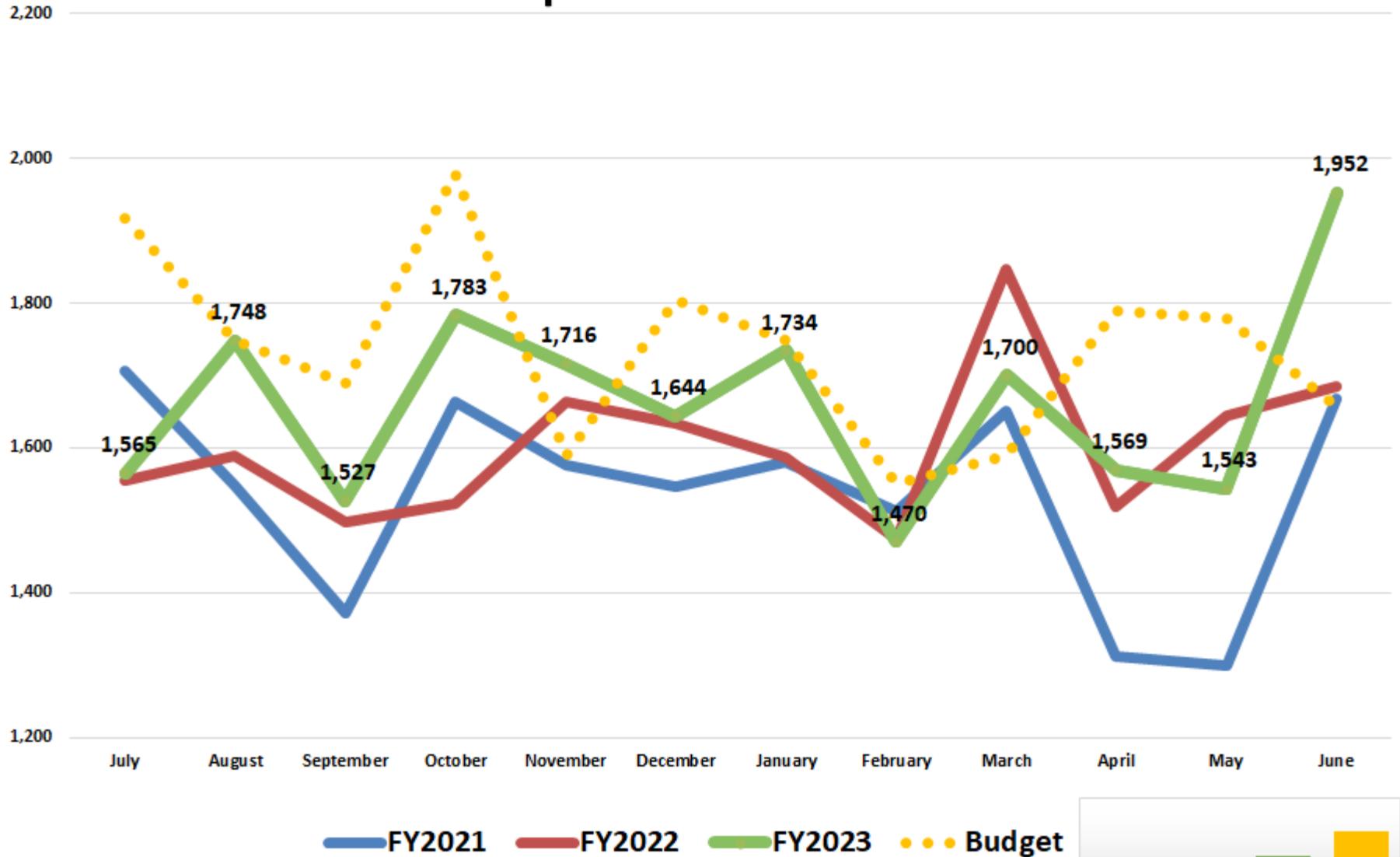
West Campus - MRI



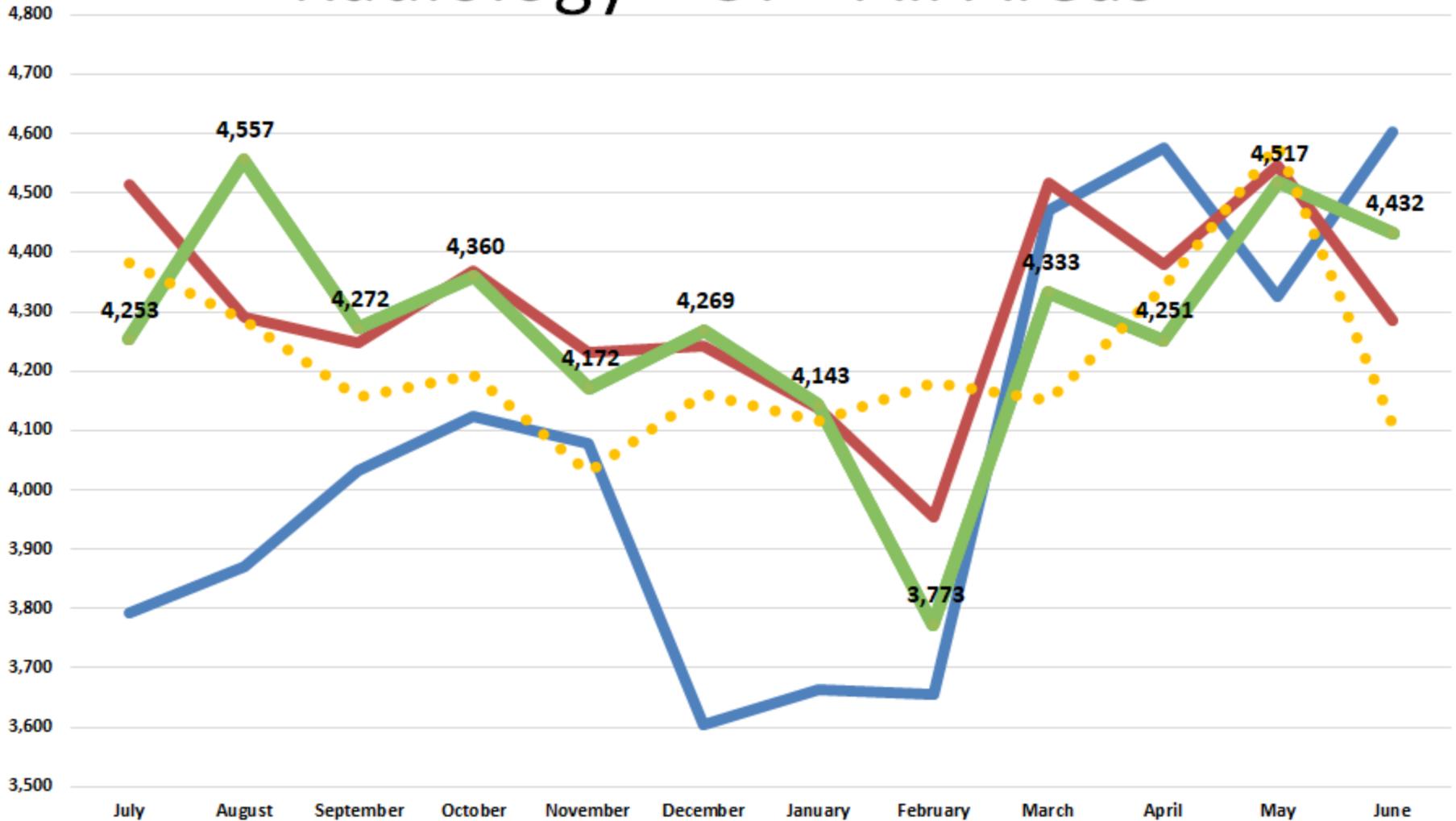
— **FY2021**
 — **FY2022**
 — **FY2023**
 ●●● **Budget**



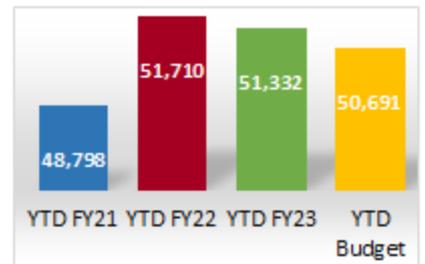
West Campus - Breast Center



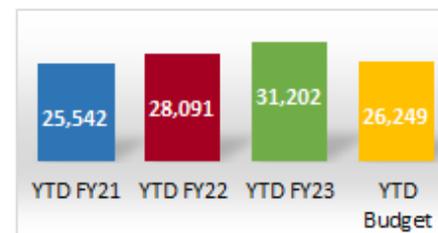
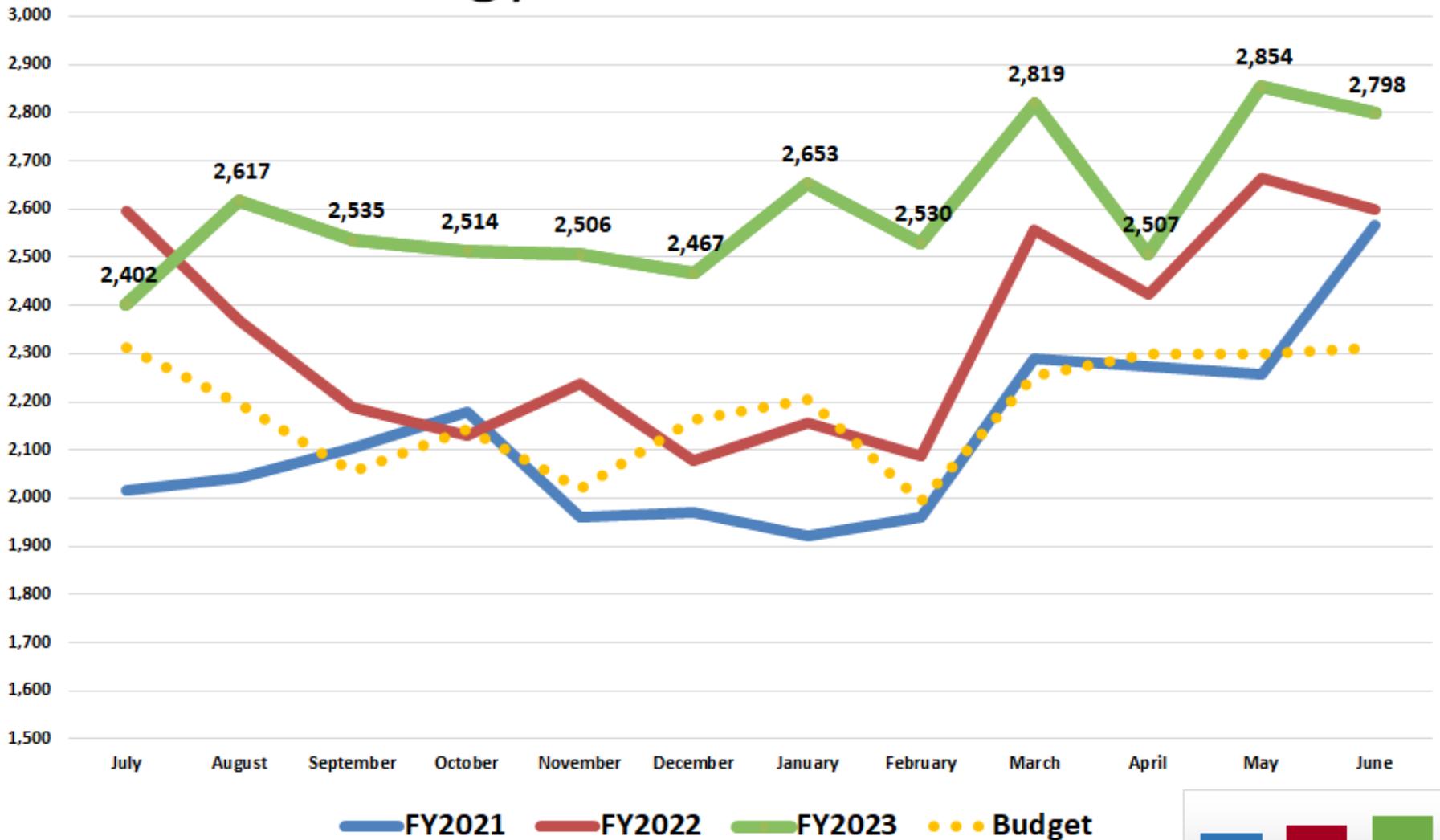
Radiology - CT - All Areas



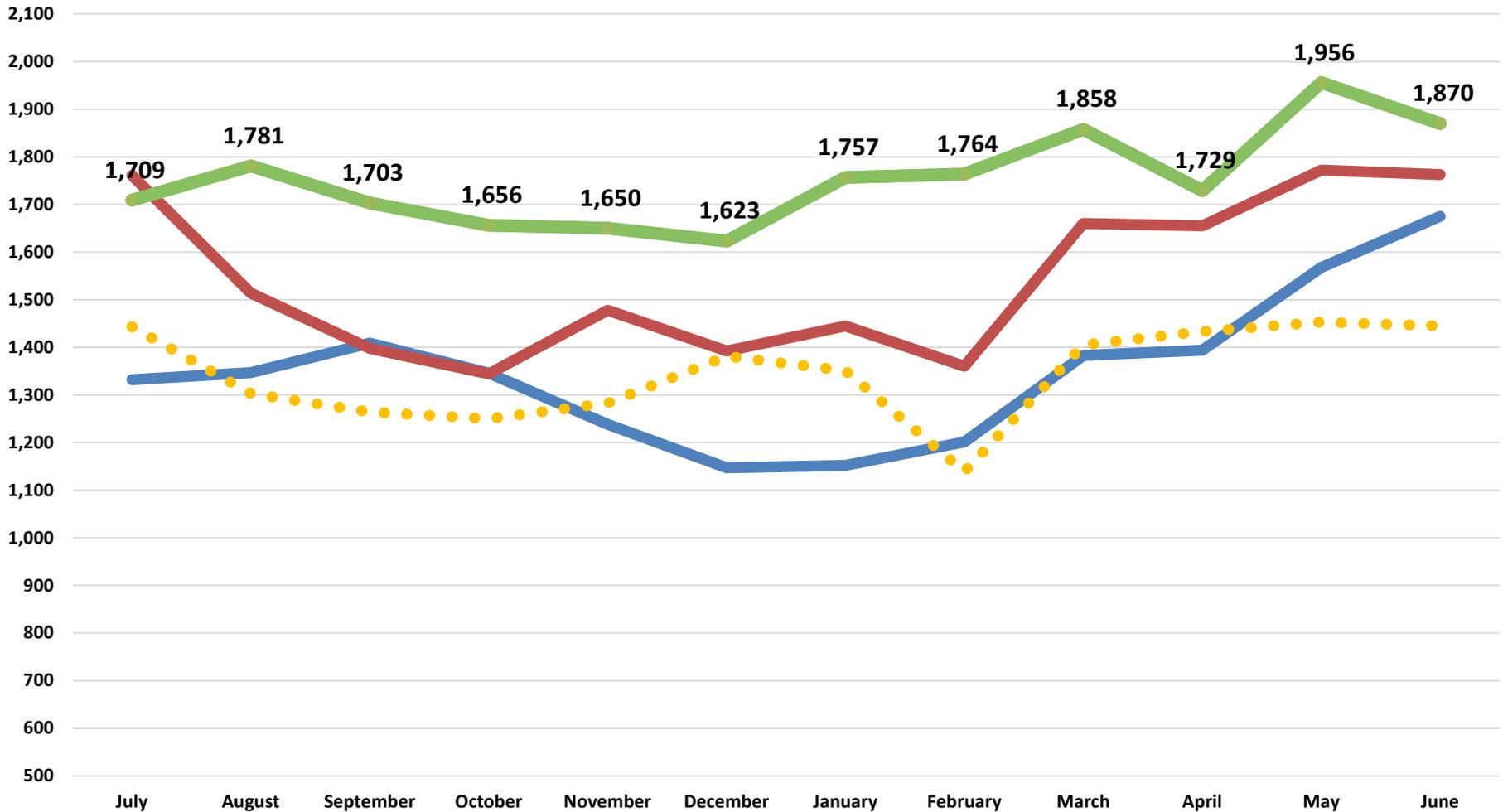
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



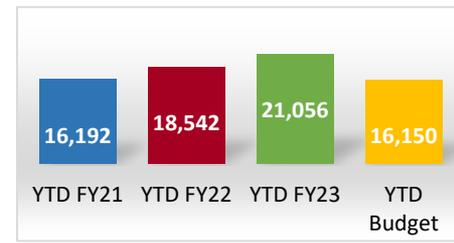
Radiology - Ultrasound - All Areas



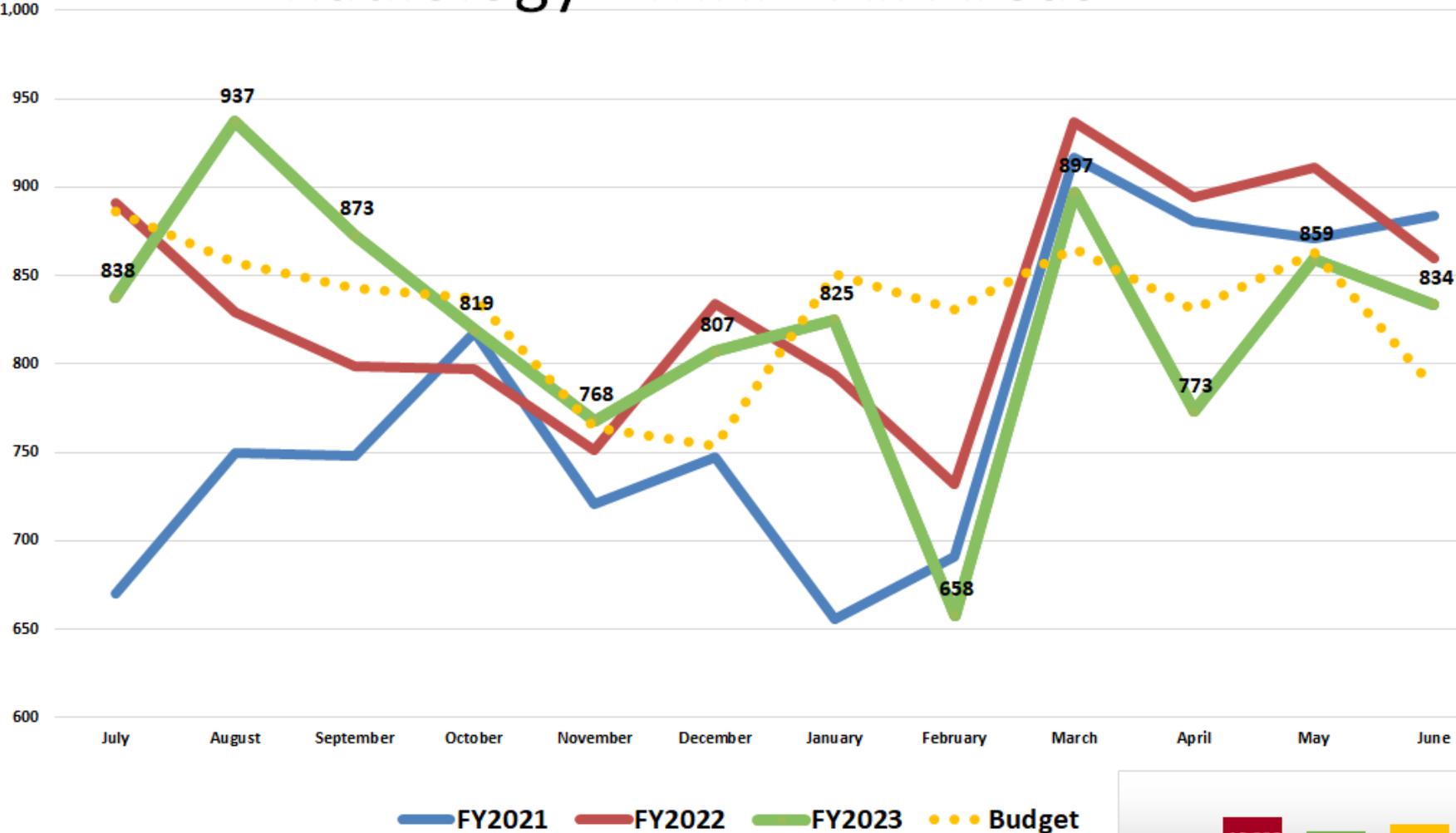
Radiology - Ultrasound - Main Campus



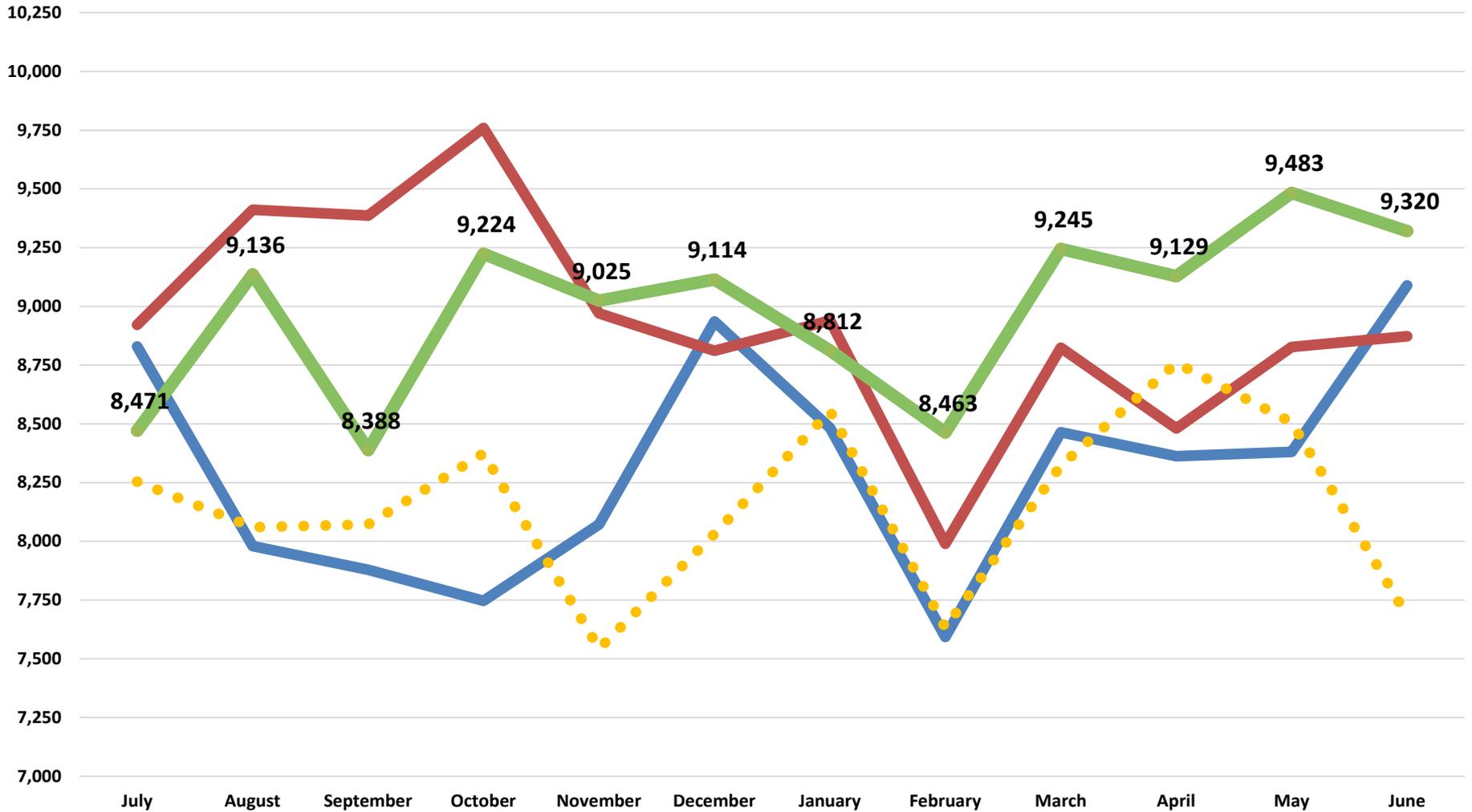
— **FY2021**
 — **FY2022**
 — **FY2023**
 ●●● **Budget**



Radiology - MRI - All Areas



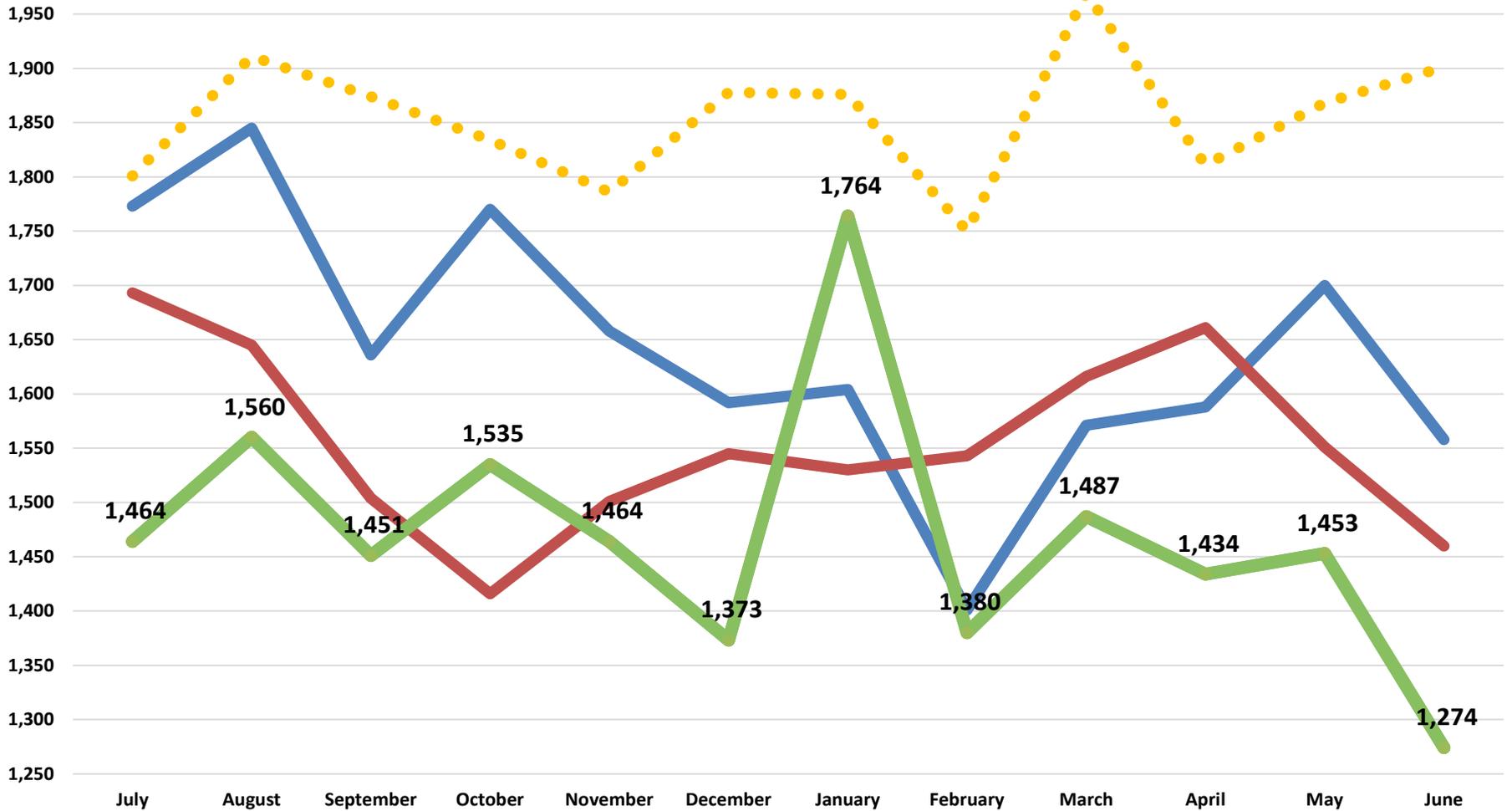
Radiology Modality - Diagnostic



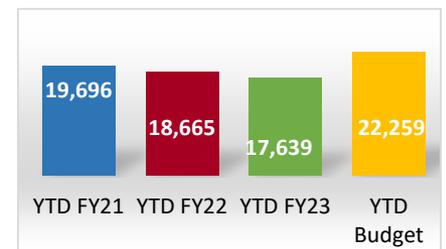
— **FY2021**
 — **FY2022**
 — **FY2023**
 ●●● **Budget**



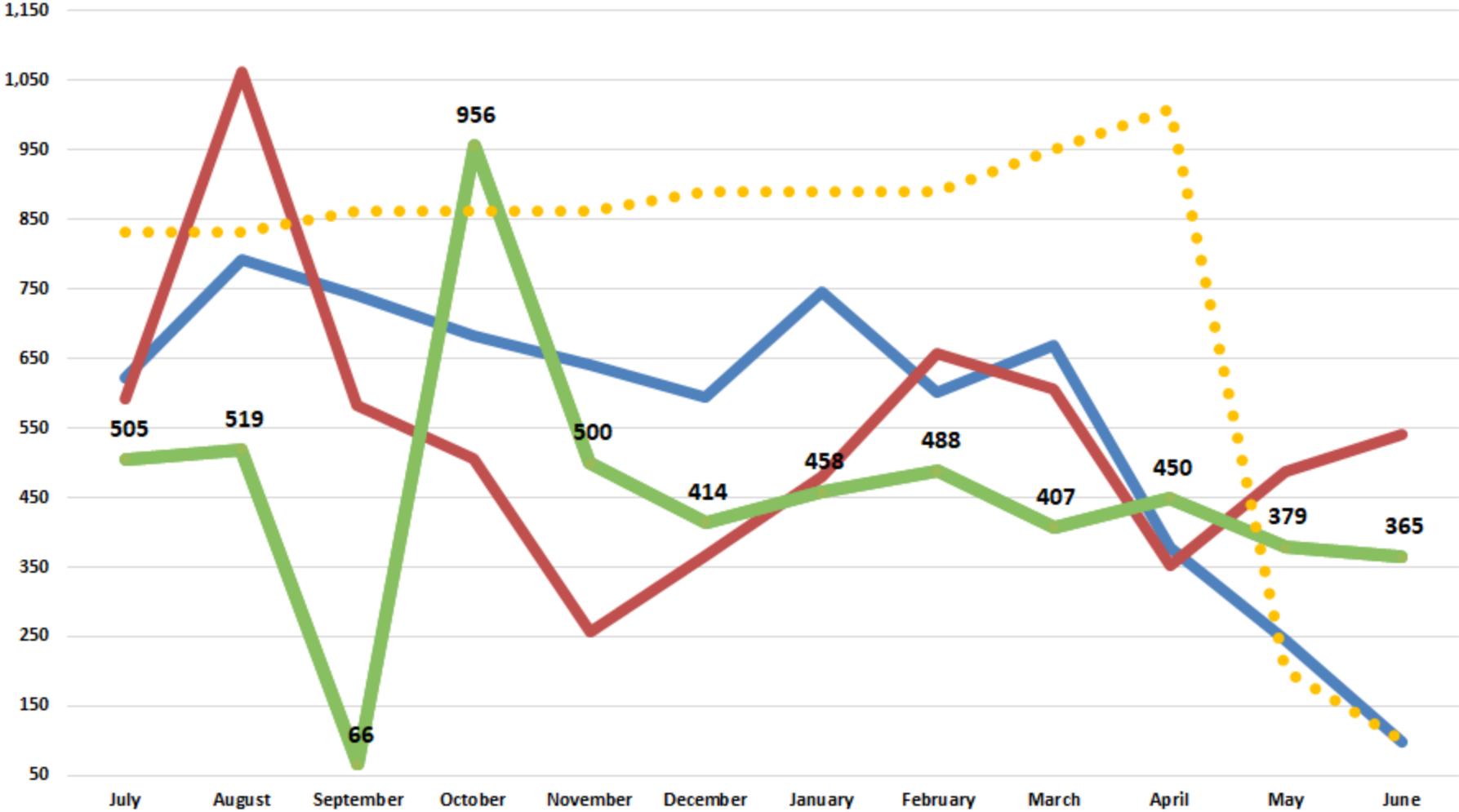
Chronic Dialysis - Visalia



— **FY2021**
 — **FY2022**
 — **FY2023**
 ●●● **Budget**



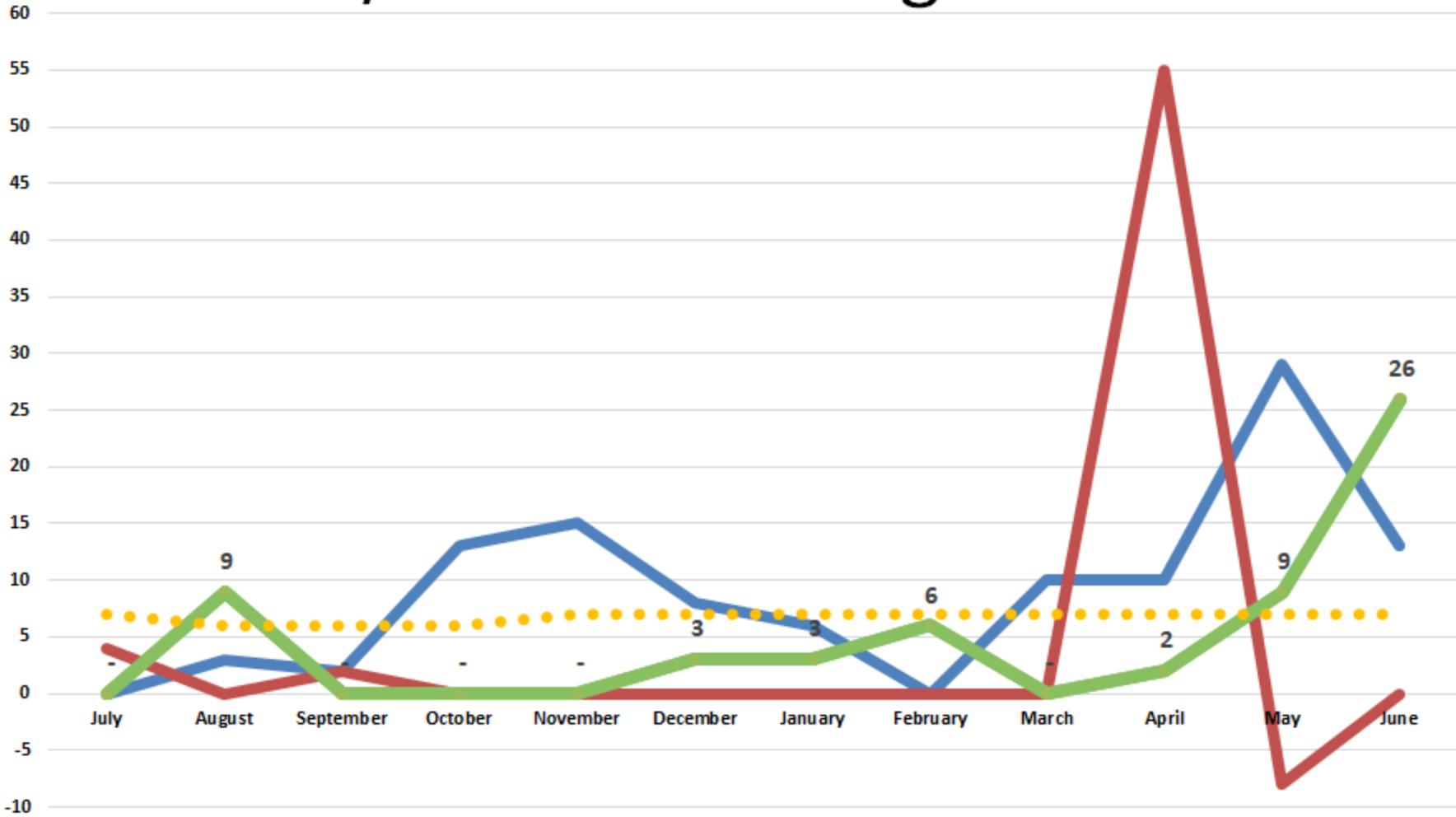
CAPD/CCPD - Maintenance Sessions



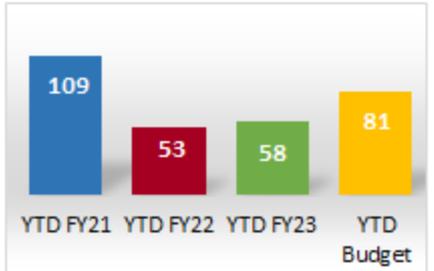
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



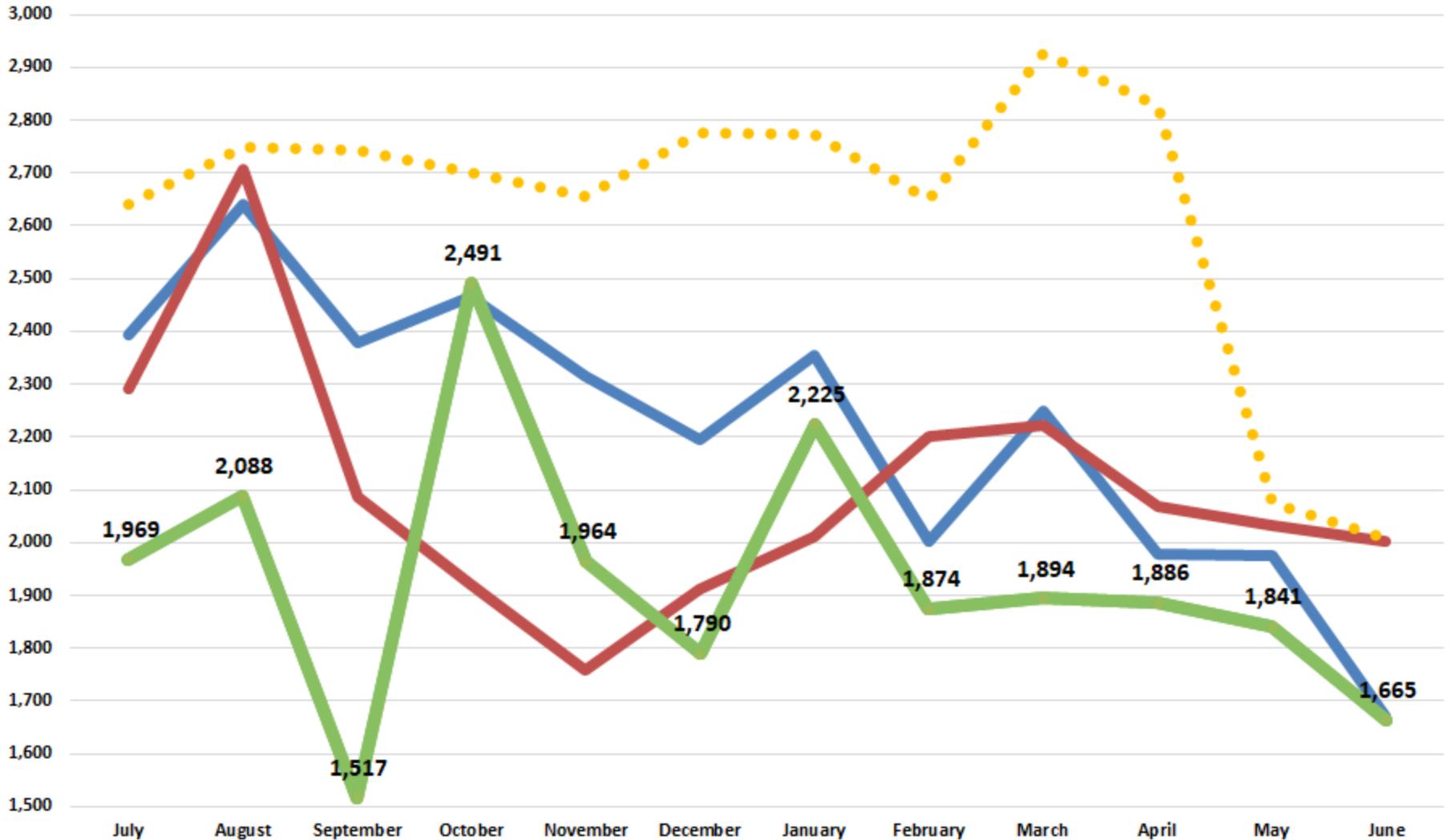
CAPD/CCPD - Training Sessions



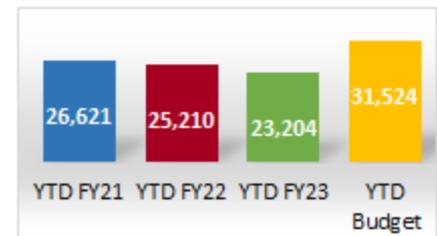
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



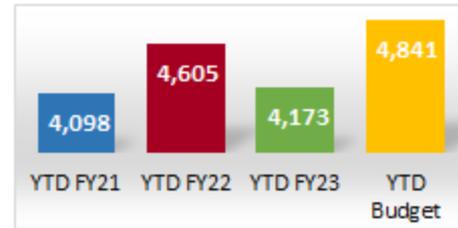
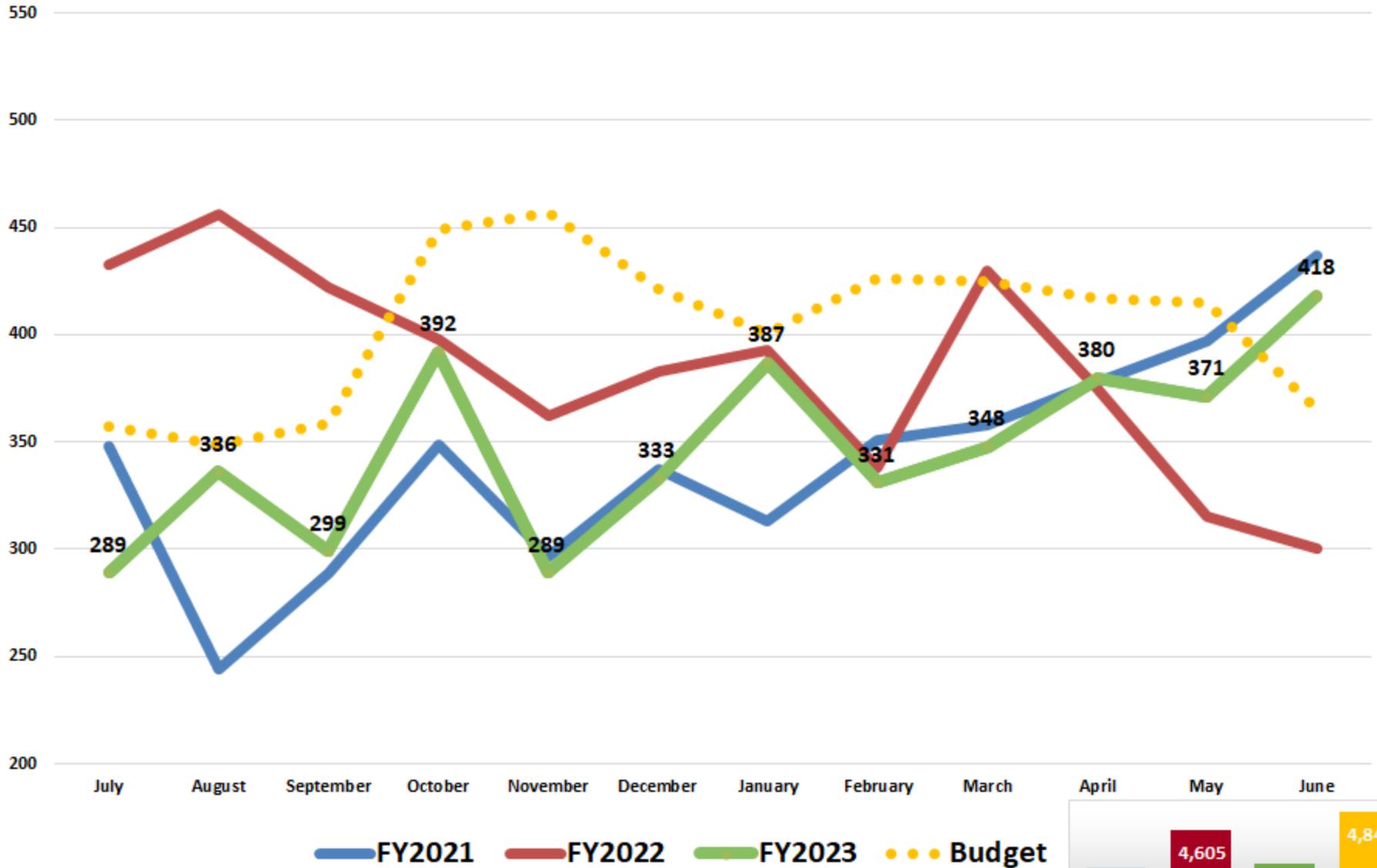
All CAPD & CCPD



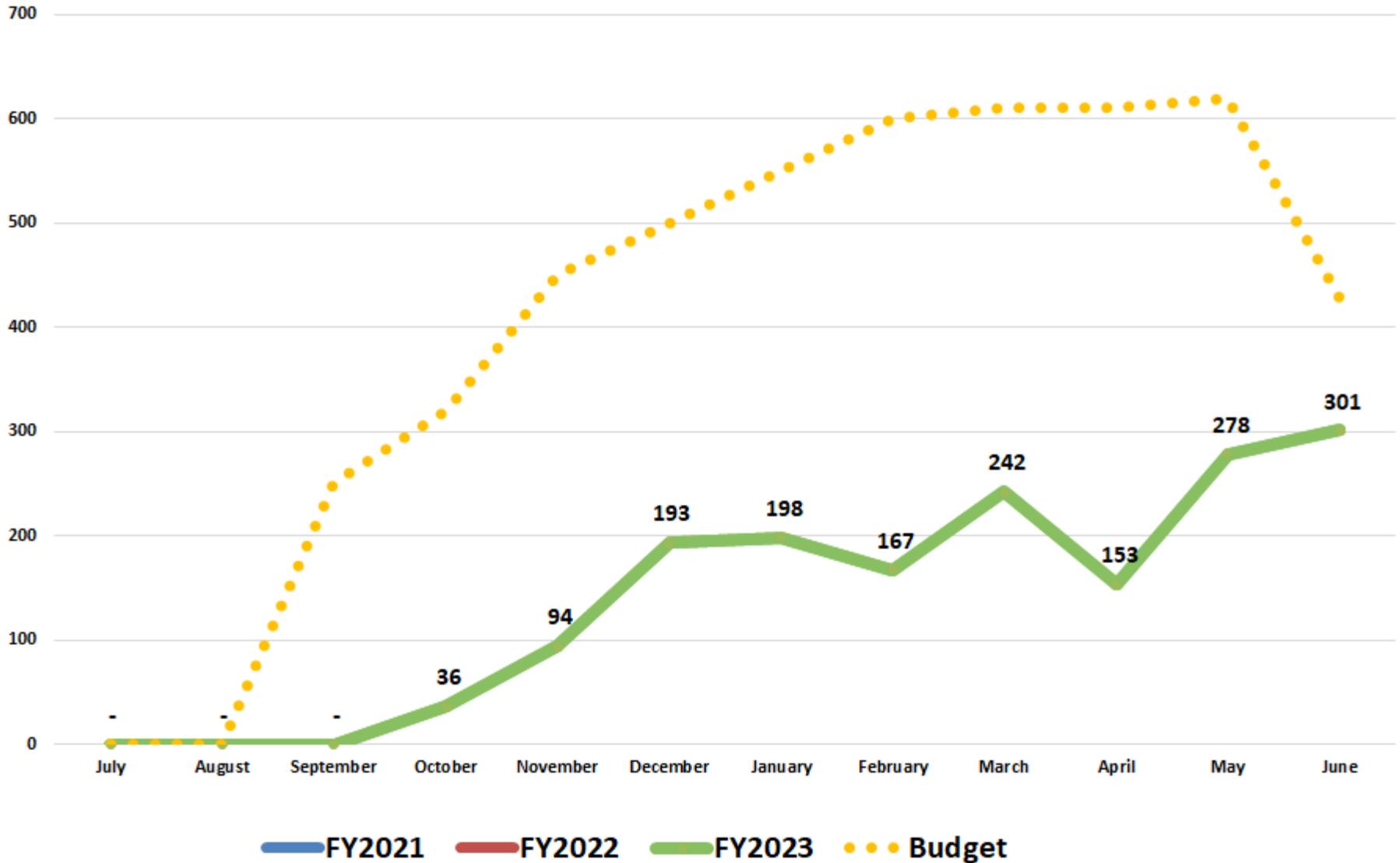
— FY2021
 — FY2022
 — FY2023
 ●●● Budget



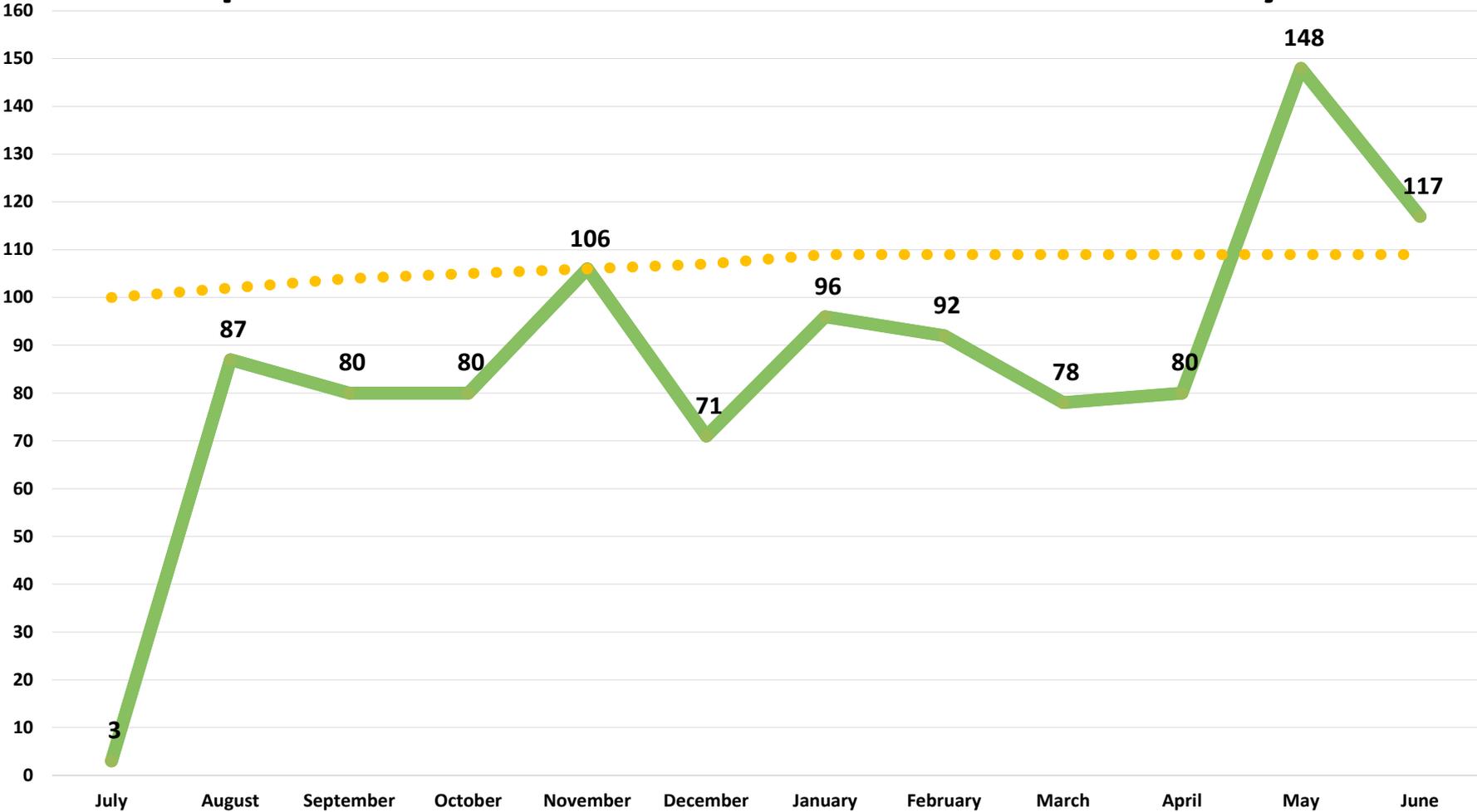
Infusion Center - Outpatient Visits



Urology Clinic Visits



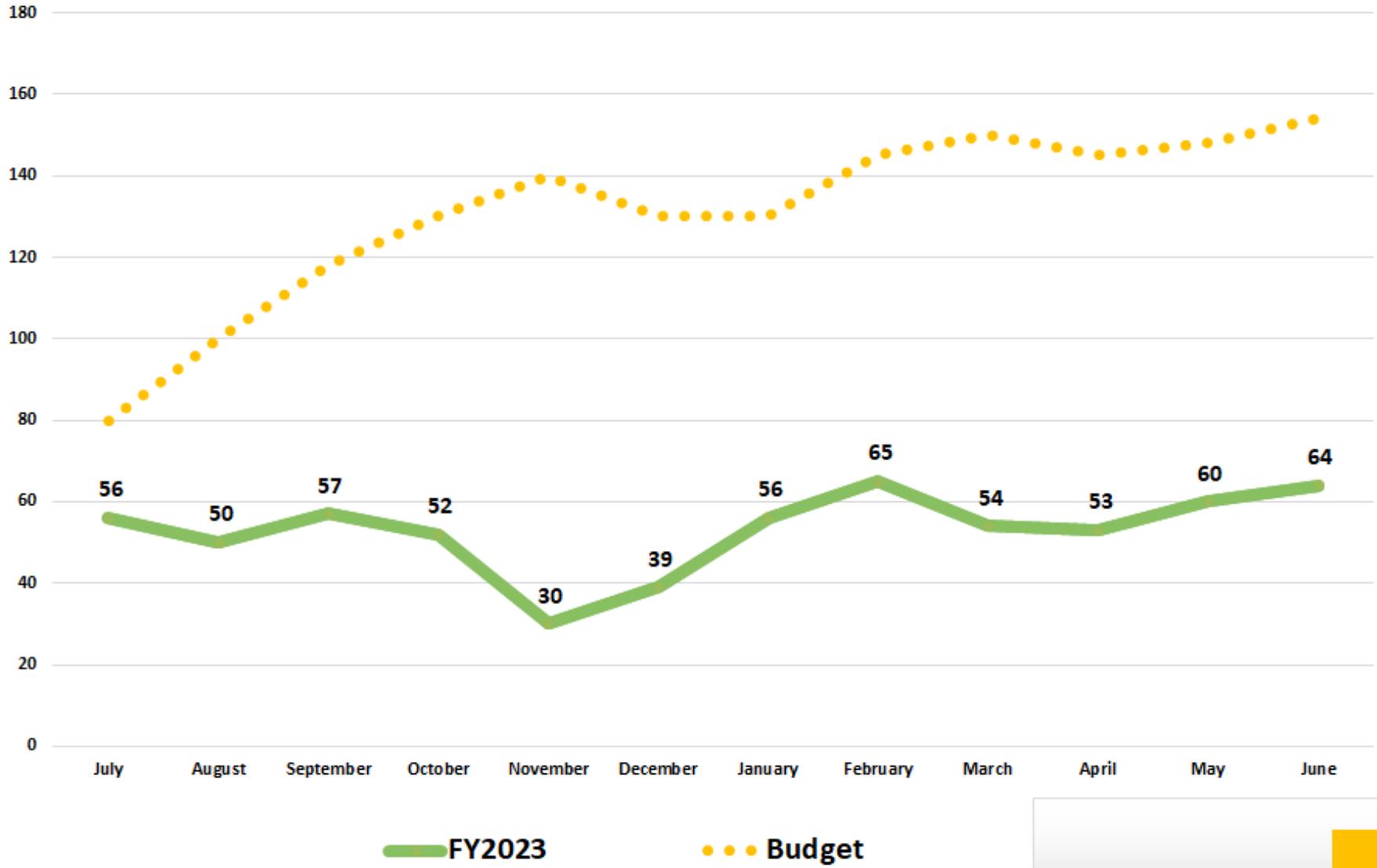
Open Arms House - Patient Days



FY2023 **Budget**

YTD FY21	YTD FY22	YTD FY23	YTD Budget
-	-	1,038	1,278

Cardiothoracic Surgery Clinic - Visits



		636	1,570
YTD FY21	YTD FY22	YTD FY23	YTD Budget