

**AGENDA
FINANCE COMMITTEE MEETING
OF THE EL CAMINO HOSPITAL BOARD**

Monday, March 28, 2022 – 5:30 pm

El Camino Hospital | 2500 Grant Road, Mountain View, CA 94040

PURSUANT TO GOVERNMENT CODE SECTION 54953(e)(1), EL CAMINO HEALTH **WILL NOT BE PROVIDING A PHYSICAL LOCATION TO THE PUBLIC FOR THIS MEETING**. INSTEAD, THE PUBLIC IS INVITED TO JOIN THE OPEN SESSION MEETING VIA TELECONFERENCE AT:

Dial-In: 1-669-900-9128. Meeting Code: 991 2987 5136. No participant code. Just press #.

MISSION: To provide oversight, information sharing and financial reviews related to budgeting, capital budgeting, long-range financial planning and forecasting, and monthly financial reporting for the El Camino Hospital Board of Directors. In carrying out its review, advisory and oversight responsibilities, the Committee shall remain flexible in order to best define financial strategies that react to changing conditions.

AGENDA ITEM	PRESENTED BY		ESTIMATED TIMES
1. CALL TO ORDER / ROLL CALL	John Zoglin, Chair		5:30 – 5:31pm
2. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	John Zoglin, Chair		information 5:31– 5:32
3. PUBLIC COMMUNICATION a. Oral Comments <i>This opportunity is provided for persons in the audience to make a brief statement, not to exceed three (3) minutes on issues or concerns not covered by the agenda.</i> b. Written Correspondence	John Zoglin, Chair		information 5:32 – 5:35
4. CONSENT CALENDAR <i>Any Committee Member may remove an item for discussion before a motion is made.</i> Approval a. OPEN Session Finance Committee Minutes (1/31/2022) b. OPEN Session Joint Finance / Investment Committees Minutes (1/31/2022) c. Period 7 FY2022 Financials Information d. FY2022 Progress Against Committee Goals e. FY2022 Pacing Plan Update f. Article of Interest	John Zoglin, Chair	<i>public comment</i>	motion required 5:35 – 5:40
5. REPORT ON BOARD ACTIONS	John Zoglin, Chair		information 5:40 – 5:45
6. FY2023 COMMITTEE PLANNING a. Proposed FY2023 Committee Goals b. Proposed FY2023 Pacing Plan c. Proposed FY2023 Committee Meeting Dates	John Zoglin, Chair	<i>public comment</i>	motion required 5:45 – 5:50
7. PERIOD 8 FINANCIAL REPORT	Carlos Bohorquez, CFO	<i>public comment</i>	motion required 5:50 - 6:05
8. FY2023 COMMUNITY BENEFIT GRANT PROGRAM OVERVIEW	Jon Cowan, Senior Director of Relations and Community Partnerships	<i>public comment</i>	motion required 6:05 - 6:25

A copy of the agenda for the Regular Meeting will be posted and distributed at least seventy-two (72) hours prior to the meeting. In observance of the Americans with Disabilities Act, please notify us at 650-988-8483 prior to the meeting so that we may provide the agenda in alternative formats or make disability-related modifications and accommodations.

AGENDA ITEM	PRESENTED BY		ESTIMATED TIMES
9. ADJOURN TO CLOSED SESSION	John Zoglin, Chair		motion required 6:25 – 6:26
10. POTENTIAL CONFLICT OF INTEREST DISCLOSURES	John Zoglin, Chair		information 6:26 – 6:27
11. CONSENT CALENDAR <i>Any Committee Member may remove an item for discussion before a motion is made.</i> Approval <i>Gov't Code Section 54957.2:</i> a. CLOSED Session Finance Committee Minutes (1/31/2022) b. CLOSED Session Joint Finance Investment Committees Minutes (1/31/2022) Information <i>Health and Safety Code Section 32106(b):</i> Physician Contracts c. Radiology Professional Services Renewal Agreement d. Annual Report on Physician Financial Arrangement Expenses (FY21)	John Zoglin, Chair		motion required 6:27 – 6:28
12. FY2023 BUDGET REVIEW SESSION #1- KEY OPERATING ASSUMPTIONS	Carlos Bohorquez, CFO Vic Cabrera, Director of Decision Supply & Business Analytics		information 6:28 – 6:58
13. SUMMARY OF PHYSICIAN FINANCIAL AGREEMENTS (YEAR-END)	Diane Wigglesworth, Director of Corporate Compliance Mark Adams MD, CMO		discussion 6:58 - 7:18
14. EXECUTIVE SESSION	John Zoglin, Chair		discussion 7:18-7:23
15. ADJOURN TO OPEN SESSION	John Zoglin, Chair		motion required 7:23 – 7:24
16. RECONVENE OPEN SESSION / REPORT OUT	John Zoglin, Chair		information 7:24-7:25
To report any required disclosures regarding permissible actions taken during Closed Session.			
17. CLOSING COMMENTS	John Zoglin, Chair		information 7:25 - 7:26
18. ADJOURNMENT	John Zoglin, Chair	<i>public comment</i>	motion required 7:26 - 7:27pm

Upcoming Meetings:

Regular Meetings: April 25, 2022, May 23, 2022 (Joint ECHB-FC)



**Minutes of the Open Session of the
Finance Committee of the
El Camino Hospital Board of Directors
Monday, January 31, 2022**

El Camino Hospital | 2500 Grant Road, Mountain View, CA 94040

Members Present

John Zoglin, Chair**
Joseph Chow**
Wayne Doiguchi**
Bill Hooper**
Cynthia Stewart**
Don Watters**

Members Absent

Peter Fung, MD

**via teleconference

Agenda Item	Comments/Discussion	Approvals/ Action
1. CALL TO ORDER/ ROLL CALL	The open session meeting of the Finance Committee of El Camino Hospital (the “Committee”) was called to order at 6:00 pm by Chair John Zoglin. A verbal roll call was taken. All other members were present in telephonically and one member was absent Peter Fung, MD. A quorum was present pursuant to State of California Executive Orders N-25-20 dated March 12, 2020, and N-29-20 dated March 18, 2020.	
2. POTENTIAL CONFLICT OF INTEREST	Chair Zoglin asked if any Committee members had a conflict of interest with any of the items on the agenda. No conflicts were reported.	
3. PUBLIC COMMUNICATION	There were no comments from the public.	
4. CONSENT CALENDAR	<p>Motion: To approve the consent calendar: (a) Minutes of the Open Session of the Finance Committee meeting (11/22/2021) (b) FY2022 Period 5 Financials and for information: (c) FY2022 Pacing Plan (e) Article of Interest.</p> <p>Mr. Zoglin pulled the Agenda Item (e) pacing plan, Mr. Zoglin stated to review the March meeting regarding the Community Benefit Plan to include the generated cash flow in the presentation. Mr. Bohorquez to work with Jon Cowan to review this request.</p> <p>Movant: Watters Second: Doiguchi Ayes: Chow, Doiguchi, Hooper, Stewart, Watters, Zoglin Noes: None Abstentions: None Absent: Fung Recused: None</p>	<i>Consent Calendar was approved.</i>
5. REPORT ON BOARD ACTIONS	Chair Zoglin asked the Committee for any questions or feedback on the Report on Board Actions as further detailed in the packet.	
6. FY2022 PERIOD 6 FINANCIALS	<p>Carlos Bohorquez, Chief Financial Officer presented the FY2022 Period 6 Financials and highlighted the following:</p> <ul style="list-style-type: none"> • Mr. Bohorquez stated that despite the challenges tied to the Omicron wave, Period 6 (December) results were strong and consistent with the first five months of FY2022. • Omicron yielded a significant increase in ED volumes. Year-over year ED volumes were 47.5% higher than same period last calendar year and 34% favorable to budget. 	

- Mr. Bohorquez stated that the organization's ability to maintain all services during the latest wave was the result of proactive planning by operations, HR and other departments to ensure we had sufficient staff during the peak of the wave.
- Overall activity for all service lines in December was favorable to budget (with the exception of Rehab.) and significantly better than prior fiscal year.
- Operational KPIs demonstrate the steady increase in FTEs over the prior fiscal year, these increases are consistent with volume trends and needed to ensure we have sufficient staffing to manage the volumes while continuing to focus on quality and patient experience.
- As discussed in prior meetings, net days in A/R increased to 58.8 days through the end of November. While this was of concern, Mr. Bohorquez had shared that the root cause had been identified and in the process of correction. Corrective actions resulted in net days in A/R decrease to 50.1 days through the end of December.
- From an overall financial performance strong revenue associated with volume and careful expense management yielded Operating EBIDA of 15.4% favorable to budget by 8.1% and 8.2% better than prior fiscal year.

Operational/ Financial Results: YTD FY2022 (as of 12/31/2021)

- Mr. Bohorquez shared that overall inpatient and outpatient activity for the first six months of FY2022 indicates a full recovery from the impact of Covid.
- ADC is favorable to budget by 6.9% budget and 10.5% higher year-over-year.
- Adjusted discharges are 12.1% favorable to budget and 18.0% better than same period last fiscal year.
- From an operational standpoint, Mr. Bohorquez stated we are continuously monitoring FTEs to ensure expenses don't increase at a higher rate than revenue / volume.
- Through the first six months of the fiscal year, total operating revenue is \$660.0 million which is 11.4% favorable to budget and a 18.6% year-over-year increase.
- Operating EBIDA represents strong performance for the first two quarters of FY2022. However, Mr. Bohorquez noted that staffing shortages, inflation pressures, supply challenges and on-going Covid expenses will have an impact on financial performance for the second half of FY2022.
- Mr. Bohorquez noted that YTD net income is lower by \$76.6 million compared to the same period last fiscal year. This is mainly attributed to instability in the capital markets which has resulted in lower than expected investment income.

Motion: To approve the FY2022 Period 6 Financials

Movant: Watters

Second: Doiguchi

Ayes: Chow, Doiguchi, Hooper, Stewart, Watters, Zoglin

Noes: None

Abstentions: None

	<p>Absent: Fung Recused: None</p>	
<p>7. ECHMN QUARTERLY FINANCIAL REPORT</p>	<p>Vince Manoogian, Interim President of ECHMN presented a review of the financial performance of El Camino Health Medical Network and discussed the following metrics as further detailed in the materials:</p> <ul style="list-style-type: none"> • Patient Active Lives • New Patient Visits vs. Established Patient Visits • Productivity Metrics (total visits by month, total visits per Business Day by Month, Urgent Care Visits by Month and Work RVU's by Month) • Fiscal Year to Date Financial Performance by Practice • Revenue Cycle Trends (Quarterly Payer Mix Trend, Collection Rate Trend, Days Accounts Receivable Outstanding, Percentage of Accounts Receivable greater than 90 days). 	
<p>8. CAPITAL REQUEST (a) MV Chemistry Line Replacement Project Request</p>	<p>Ken King, CASO is requesting the Finance Committee to approve the MV Chemistry Line Replacement Project Request.</p> <p>Motion: To approve a capital facilities project budget not to exceed \$2.8 million for the replacement of the Mountain View Lab Chemistry Line. Movant: Hooper Second: Watters Ayes: Chow, Doiguchi, Hooper, Stewart, Watters, Zoglin Noes: None Abstentions: None Absent: Fung Recused: None</p>	
<p>9. ADJOURN TO CLOSED SESSION</p>	<p>Motion: To adjourn to closed session at 7:05 pm.</p> <p>Movant: Watters Second: Doiguchi Ayes: Chow, Doiguchi, Hooper, Stewart, Watters, Zoglin Noes: None Abstentions: None Absent: Fung Recused: None</p>	
<p>10. AGENDA ITEM 15: RECONVENE OPEN SESSION/REPORT OUT</p>	<p>Agenda Item 12 was discussed in the closed session and the Committee approved the consent calendar by a unanimous vote of all members present (Chow, Doiguchi, Hooper, Stewart, Watters, Zoglin).</p>	
<p>11. AGENDA ITEM 16: PHYSICIAN CONTRACTS & AGREEMENTS</p>	<p>Motion: To approve the MV Hospitalist Professional Services Agreement and to recommend Board approval for the MV Interventional Radiology Call Panel Agreement</p> <p>Movant: Hooper Second: Watters Ayes: Chow, Doiguchi, Hooper, Stewart, Watters, Zoglin Noes: None Abstentions: None Absent: Fung Recused: None</p>	
<p>12. AGENDA ITEM 20: CLOSING COMMENTS</p>	<p>No closing comments</p>	

13. AGENDA ITEM 21: ADJOURNMENT	Motion: To adjourn at 7:59 pm. Movant: Watters Second: Chow Ayes: Chow, Doiguchi, Hooper, Stewart, Watters, Zoglin Noes: None Abstentions: None Absent: Fung Recused: None	
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Attest as to the approval of the foregoing minutes by the Finance Committee of El Camino Hospital:

John Zoglin
Chair, Finance Committee

Prepared by: Samreen Salehi, Executive Assistant II, Administrative Services

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**Minutes of the Open Session of the
 Special Joint Meeting of the Finance Committee and the Investment Committee of the
 El Camino Hospital Board of Directors
 Monday, January 31, 2022
 El Camino Hospital | 2500 Grant Road, Mountain View, CA 94040**

Members Present
John Zoglin, Chair**
Brooks Nelson, Chair**
Nicola Boone**
Joseph Chow**
John Conover**
Wayne Doiguchi**
Bill Hooper**
Richard Juelis**
Cynthia Stewart**
Carol Somersille, MD**
Don Watters**

Members Absent
Peter Fung, MD

 **via teleconference

Agenda Item	Comments/Discussion	Approvals/ Action
1. CALL TO ORDER/ ROLL CALL	The open session meeting of the Finance Committee of El Camino Hospital (the “Committee”) was called to order at 5:00 pm by Chair John Zoglin. A verbal roll call was taken. All committee members participated via teleconference. Peter Fung, MD was absent, Don Watters joined at 5:40pm and Cynthia Stewart joined at 5:30pm. A quorum was present pursuant to State of California Executive Orders N-25-20 dated March 12, 2020, and N-29-20 dated March 18, 2020.	
2. POTENTIAL CONFLICT OF INTEREST	Chair Zoglin asked if any Committee members had a conflict of interest with any of the items on the agenda. No conflicts were reported.	
3. PUBLIC COMMUNICATION	There were no comments from the public.	
4. ADJOURN TO CLOSED SESSION	Motion: To adjourn to closed session at 5:05pm. Movant: Nelson Second: Conover Ayes: Boone, Chow, Conover, Doiguchi, Hooper, Juelis, Nelson, Somersille, Zoglin Noes: None Abstentions: None Absent: Fung, Stewart, Watters Recused: None	
5. AGENDA ITEM 16: RECONVENE OPEN SESSION/REPORT OUT	Agenda Item 6 was covered in the closed session and no items were voted on during the closed session.	
6. AGENDA ITEM 18: CLOSING COMMENTS	No closing comments	
7. AGENDA ITEM 19: ADJOURNMENT	Motion: To adjourn at 5:50 pm. Movant: Nelson Second: Somersille Ayes: Boone, Chow, Conover, Doiguchi, Fung, Hooper, Juelis,	

	Nelson, Stewart, Somersille, Watters, Zoglin Noes: None Abstentions: None Absent: None Recused: None	
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Attest as to the approval of the foregoing minutes by the Finance Committee of El Camino Hospital:

John Zoglin
Chair, Finance Committee

Prepared by: Samreen Salehi, Executive Assistant II, Administrative Services

DRAFT



El Camino Health

Summary of Financial Operations

*Fiscal Year 2022 – Period 7
7/1/2021 to 01/31/2022*

Executive Summary - Overall Commentary for Period 7

- Continued solid financial results for Period 7:
 - Continued strong Outpatient procedural activity and sustained growth in emergency department visits
 - When adjusted for volume increase, costs are being managed effectively
 - Adjusted Discharges were unfavorable to budget by 0.3% and 16.7% better than the same period last year
- Total gross charges were favorable to budget by \$28.0M / 7.2% and \$82.2M / 22.5% higher than the same period last year
 - Outpatient charges were favorable by \$19.1M / 11.1% while Inpatient charges were favorable by \$8.2M / 3.9%
- Net patient revenue was favorable to budget by \$12.2M / 12.5% and \$19.6M / 21.8% higher than the same period last year
- Operating margin was favorable to budget by \$4.6M / 64.8% and \$11.8M / 19,066.5% better than the same period last year.
- The impact of the Omicron variant was significant as January's operating margin was \$2.9M / 20.2% lower than the prior 6 month average.
- Operating EBIDA was favorable to budget by \$5.1M / 36.4% and \$12.2M / 172.5% better than the same period last year
- Net income was unfavorable to budget by \$34.7M / (232.1%) and \$19.8M / (84,213.5%) lower than the same period last year. This is attributed the instability in the capital markets, which has resulted in the lower than expected investment income.

Operational / Financial Results: Period 7 – January 2022 (as of 01/31/2022)

PERIOD 7 - RESULTS

(\$ thousands)									Moody's	S&P	Performance to
		Current Year	Budget	Variance to Budget	Performance to Budget	Prior Year	Variance to Prior Year	Variance to Prior Year	'A1'	'AA'	Rating Agency Medians
Activity / Volume	ADC	280	266	13	5.0%	269	11	4.1%	---	---	---
	Total Acute Discharges	1,708	1,766	(58)	(3.3%)	1,649	59	3.6%	---	---	---
	Adjusted Discharges	3,200	3,209	(9)	(0.3)	2,741	459	16.7%	---	---	---
	Emergency Room Visits	6,010	4,839	1,171	24.2%	3,859	2,151	55.7%	---	---	---
	OP Procedural Cases	12,951	10,476	2,475	23.6%	13,466	(515)	(3.8%)	---	---	---
	Gross Charges (\$)	417,996	389,995	28,001	7.2%	335,788	82,208	24.5%	---	---	---
Operations	Total FTEs	3,120	3,080	40	1.3%	2,896	224	7.7%	---	---	---
	Productive Hrs. / APD	29.5	31.0	(1.6)	(5.1%)	32.5	(3.1)	(9.5%)	---	---	---
	Cost Per CMI AD	17,688	17,952	(264)	(1.5%)	19,682	(1,993)	(10.1%)	---	---	---
	Net Days in A/R	49.6	49.0	0.6	1.2%	50.1	(0.5)	(1.1%)	47.7	49.7	---
Financial Performance	Net Patient Revenue (\$)	109,378	97,219	12,159	12.5%	89,795	19,583	21.8%	138,547	82,105	---
	Total Operating Revenue (\$)	112,741	101,296	11,444	11.3%	94,222	18,519	19.7%	152,743	109,602	---
	Operating Margin (\$)	11,756	7,132	4,625	64.8%	(62)	11,818	19066.5%	1,915	3,836	---
	Operating EBIDA (\$)	19,223	14,090	5,133	36.4%	7,055	12,168	172.5%	11,188	10,741	---
	Net Income (\$)	(19,783)	14,972	(34,754)	(232.1%)	(23)	(19,759)	(84213.5%)	8,124	7,343	---
	Operating Margin (%)	10.4%	7.0%	3.4%	48.1%	(0.1%)	10.5%	15951.1%	1.9%	3.5%	---
	Operating EBIDA (%)	17.1%	13.9%	3.1%	22.6%	7.5%	9.6%	127.7%	8.3%	9.8%	---
	DCOH (days)	314	325	(11)	(3.5%)	343	(30)	(8.6%)	306	355	---

Moody's Medians: Not-for-profit and public healthcare annual report; September 9, 2021. Dollar amounts have been adjusted to reflect monthly averages.

S&P Medians: U.S. Not-For-Profit Health Care Stand-Alone Hospital Median Financial Ratios; August 30, 2021. Dollar amounts have been adjusted to reflect monthly averages.

DCOH total includes cash, short-term and long-term investments.

Operational / Financial Results: YTD FY2022 (as of 01/31/2022)

YTD FY2022 - RESULTS

(\$ thousands)

	Current Year	Budget	Variance to Budget	Performance to Budget	Prior Year	Variance to Prior Year	Variance to Prior Year	Moody's 'A1'	S&P 'AA'	Performance to Rating Agency Medians	
Activity / Volume	ADC	267	251	17	6.6%	244	23	9.5%	---	---	---
	Total Acute Discharges	12,200	11,717	483	4.1%	10,979	1,221	11.1%	---	---	---
	Adjusted Discharges	23,913	21,682	2,231	10.3%	20,288	3,625	17.9%	---	---	---
	Emergency Room Visits	39,377	30,277	9,100	30.1%	28,981	10,396	35.9%	---	---	---
	OP Procedural Cases	90,376	71,923	18,453	25.7%	90,600	(224)	(0.2%)	---	---	---
	Gross Charges (\$)	2,929,324	2,641,430	287,894	10.9%	2,441,571	487,753	20.0%	---	---	---
Operations	Total FTEs	3,032	3,054	(22)	(0.7%)	2,803	229	8.2%	---	---	---
	Productive Hrs. / APD	28.8	31.8	(3.0)	(9.5%)	31.1	(2.4)	(7.6%)	---	---	---
	Cost Per CMI AD	16,491	17,952	(1,460)	(8.1%)	17,260	(768)	(4.5%)	---	---	---
	Net Days in A/R	49.6	49.0	0.6	1.2%	50.1	(0.5)	(1.1%)	47.7	49.7	
Financial Performance	Net Patient Revenue (\$)	747,333	667,261	80,072	12.0%	622,784	124,549	20.0%	969,831	574,732	
	Total Operating Revenue (\$)	772,790	693,772	79,018	11.4%	650,542	122,248	18.8%	1,063,365	767,215	
	Operating Margin (\$)	100,143	46,684	53,460	114.5%	35,822	64,321	179.6%	13,404	26,853	
	Operating EBIDA (\$)	152,318	95,976	56,342	58.7%	85,321	66,997	78.5%	78,318	75,187	
	Net Income (\$)	81,158	100,841	(19,683)	(19.5%)	177,489	(96,331)	(54.3%)	56,871	51,403	
	Operating Margin (%)	13.0%	6.7%	6.2%	92.6%	5.5%	7.5%	135.3%	1.9%	3.5%	
	Operating EBIDA (%)	19.7%	13.8%	5.9%	42.5%	13.1%	6.6%	50.3%	8.3%	9.8%	
	DCOH (days)	314	325	(11)	(3.5%)	343	(30)	(8.6%)	306	355	

Moody's Medians: Not-for-profit and public healthcare annual report; September 9, 2021.

S&P Medians: U.S. Not-For-Profit Health Care Stand-Alone Hospital Median Financial Ratios; August 30, 2021

DCOH total includes cash, short-term and long-term investments.

Key Statistics: Period 7 and YTD (as of 01/31/2022)

Key Metrics	Month to Date			Variance (%)		Year to Date			Variance (%)	
	PY	CY	Budget	CY vs PY	CY vs Budget	PY	CY	Budget	CY vs PY	CY vs Budget
ADC	269	280	266	4.1%	5.0%	244	267	251	9.5%	6.6%
Utilization MV	71%	74%	71%	3.9%	3.7%	64%	71%	66%	11.4%	6.7%
Utilization LG	34%	36%	32%	4.9%	11.2%	32%	33%	31%	1.5%	6.3%
Utilization Combined	59%	62%	59%	4.1%	5.0%	54%	59%	55%	9.5%	6.6%
Adjusted Discharges	2,741	3,200	3,209	16.7%	(0.3%)	20,288	23,913	21,682	17.9%	10.3%
Total Discharges (Exc NB)	1,649	1,708	1,766	3.6%	(3.3%)	10,979	12,200	11,717	11.1%	4.1%
Total Discharges	1,948	2,054	2,130	5.4%	(3.6%)	13,289	14,997	14,403	12.9%	4.1%
Inpatient Case Activity										
MS Discharges	1,165	1,217	1,213	4.5%	0.3%	7,470	8,162	7,747	9.3%	5.4%
Deliveries	329	372	385	13.1%	(3.3%)	2,468	3,005	2,834	21.8%	6.0%
BHS	114	84	122	(26.3%)	(31.4%)	724	768	829	6.1%	(7.3%)
Rehab	41	37	46	(9.8%)	(19.6%)	322	257	307	(20.2%)	(16.3%)
Outpatient Case Activity										
Total Outpatient Cases	16,426	17,807	14,072	8.4%	26.5%	112,057	120,952	94,473	7.9%	28.0%
ED	2,960	4,856	3,596	64.1%	35.0%	21,457	30,576	22,550	42.5%	35.6%
OP Surg	394	557	417	41.4%	33.5%	3,571	4,116	3,156	15.3%	30.4%
Endo	90	209	204	132.2%	2.5%	1,444	1,617	1,485	12.0%	8.9%
Interventional	142	187	174	31.7%	7.5%	1,187	1,352	1,211	13.9%	11.6%
All Other	12,840	11,998	9,680	(6.6%)	23.9%	84,398	83,291	66,071	-1.3%	26.1%
Hospital Payor Mix										
Medicare	51.0%	49.5%	48.6%	(2.8%)	2.0%	48.5%	47.4%	47.6%	(2.2%)	(0.5%)
Medi-Cal	10.7%	8.9%	8.2%	(16.4%)	7.9%	8.2%	8.3%	7.9%	0.5%	4.0%
Commercial	36.8%	39.3%	41.2%	6.9%	(4.7%)	41.1%	42.2%	42.4%	2.7%	(0.4%)
Other	1.6%	2.2%	2.0%	42.0%	8.1%	2.2%	2.1%	2.1%	(3.4%)	2.8%

Enterprise Income Statement: Rolling 16 Monthly Trend (\$000s)

	FY2021								FY2022							YTD FY2022	Rolling 16 Monthly Average	
	Period 4 Oct-20	Period 5 Nov-20	Period 6 Dec-20	Period 7 Jan-21	Period 8 Feb-21	Period 9 Mar-21	Period 10 Apr-21	Period 11 May-21	Period 12 Jun-21	Period 1 Jul-21	Period 2 Aug-21	Period 3 Sep-21	Period 4 Oct-21	Period 5 Nov-21	Period 6 Dec-21			Period 7 Jan-22
Operating Revenues:																		
Net Patient Revenue	90,554	88,597	92,289	89,795	85,273	97,171	94,903	95,542	112,238	101,774	104,482	104,776	106,632	107,257	113,033	109,378	747,333	99,606
Other Operating Revenue	4,024	3,234	3,079	4,427	3,352	3,537	3,692	5,385	4,706	3,116	3,746	3,479	4,506	3,600	3,648	3,362	25,457	3,806
Total Operating Revenue	94,578	91,831	95,368	94,222	88,625	100,708	98,595	100,927	116,945	104,889	108,228	108,256	111,138	110,857	116,681	112,741	772,790	103,412
Operating Expenses:																		
Salaries, Wages and Benefits	49,061	47,222	48,774	53,636	48,592	52,025	50,616	48,138	48,101	53,000	53,940	53,629	56,001	53,709	55,947	59,347	385,573	51,984
Supplies	13,496	13,641	14,519	13,888	13,587	15,421	14,256	15,241	15,156	15,109	14,569	14,862	14,502	14,941	16,060	16,051	106,093	14,706
Fees & Purchased Services	12,982	14,264	14,035	15,825	14,770	15,139	15,761	15,923	19,915	14,390	14,182	14,800	14,760	15,210	14,955	14,291	102,587	15,075
Other Operating Expenses	3,721	3,512	4,100	3,819	1,097	3,536	3,662	3,496	6,002	3,598	3,577	3,676	3,586	3,842	4,112	3,829	26,219	3,698
Interest	1,429	1,428	1,428	1,428	1,392	1,399	1,400	1,400	1,367	1,419	1,418	1,418	1,418	1,420	1,419	1,421	9,933	1,413
Depreciation	5,798	6,068	5,591	5,689	5,903	4,931	5,606	4,808	5,740	4,727	7,157	5,902	5,798	6,440	6,173	6,046	42,242	5,773
Total Operating Expenses	86,487	86,136	88,446	94,284	85,341	92,450	91,301	89,006	96,281	92,242	94,844	94,286	96,065	95,561	98,665	100,984	672,646	92,649
Operating Margin	8,091	5,695	6,922	(62)	3,285	8,258	7,294	11,921	20,664	12,648	13,384	13,970	15,073	15,297	18,016	11,756	100,143	10,763
Non-Operating Income	(27,499)	64,968	57,357	39	14,349	18,965	29,151	16,666	20,041	(4,099)	14,319	(18,378)	24,361	(21,232)	17,581	(31,539)	(18,986)	10,941
Net Margin	(19,408)	70,663	64,279	(23)	17,633	27,223	36,445	28,588	40,705	8,549	27,703	(4,408)	39,435	(5,935)	35,596	(19,783)	81,158	21,704
Operating EBIDA	15,318	13,192	13,940	7,055	10,580	14,588	14,301	18,130	27,771	18,793	21,959	21,289	22,290	23,156	25,608	19,223	152,318	17,949
Operating Margin (%)	8.6%	6.2%	7.3%	-0.1%	3.7%	8.2%	7.4%	11.8%	17.7%	12.1%	12.4%	12.9%	13.6%	13.8%	15.4%	10.4%	13.0%	10.4%
Operating EBIDA Margin (%)	16.2%	14.4%	14.6%	7.5%	11.9%	14.5%	14.5%	18.0%	23.7%	17.9%	20.3%	19.7%	20.1%	20.9%	21.9%	17.1%	19.7%	17.4%

Financial Overview: Period 7 – January 2022

Period ending 1/31/2022

Financial Performance

- January operating margin was \$11.8M compared to a budget of \$7.1M, resulting in a favorable variance of \$4.6M
- January volumes and revenues continue to be strong as demonstrated by:
 - Favorable variance of gross charges of \$27.3M was driven by Inpatient and Outpatient activity:
 - Inpatient gross charges: Favorable to budget by \$8.2M / 3.9% variance primarily driven by NICU (neonatal intensive care), emergency services, critical care, and corresponding ancillary services
 - Outpatient gross charges: Favorable to budget by \$19.1M / 11.1% variance primarily driven by emergency services, surgery, cath. lab, radiation oncology, and corresponding ancillary services
 - Operating Expenses were unfavorable to budget by \$6.8M / 7.2% driven by the level of patient activity
 - SWB were unfavorable by \$4.9M / 8.9%
 - Supplies were unfavorable by \$1.6M / 11.0%
 - Supply expenses attributed to Covid-19 were \$1.3M in January and \$5.5M YTD
 - All other discretionary non-volume driven expenses were unfavorable to budget by \$300K
- Non Operating Income includes:
 - Unfavorable variance in non-operating revenue is primarily due to unrealized gains on investments

Financial Overview: Period 7 – January 2022 (cont.)

Period ending 1/31/2022

Financial Performance

Hospital Operations:

- Adjusted Discharges (AD): Unfavorable to budget by 9 ADs / 0.3% and above prior year by 459 ADs / 16.7%:
 - Mountain View: Unfavorable to budget by 60 ADs / 2.8% and above prior year by 446 ADs / 21.4%
 - Los Gatos: Favorable to budget by 51 ADs / 7.2% and above prior year by 13 ADs / 1.7%
- Operating Expense Per CMI Adjusted Discharge: \$17,688 which is 1.5% favorable to budget
Note: Excludes depreciation and interest

El Camino Health Medical Network (ECHMN) Operations:

- January's total visits of 16,462 reflect a decrease of 1.1% over the prior month of 16,641. On the other hand, January's visit per day of 785 reflect an increase of 4.5% over the prior month of 751.
- January's total visits were favorable to budget by 4.4%. However, January's YTD total visits were unfavorable to budget by 3%. The YTD budget variance is related to the loss of several OB/GYN providers couples months ago.
- Net Income for the month of January was unfavorable to budget by \$279K or 10.3% while the YTD variance remains favorable by \$29K or 0.2%. Compared to last year, Jan FY2022's Net Income is better by \$22K or 0.7%.

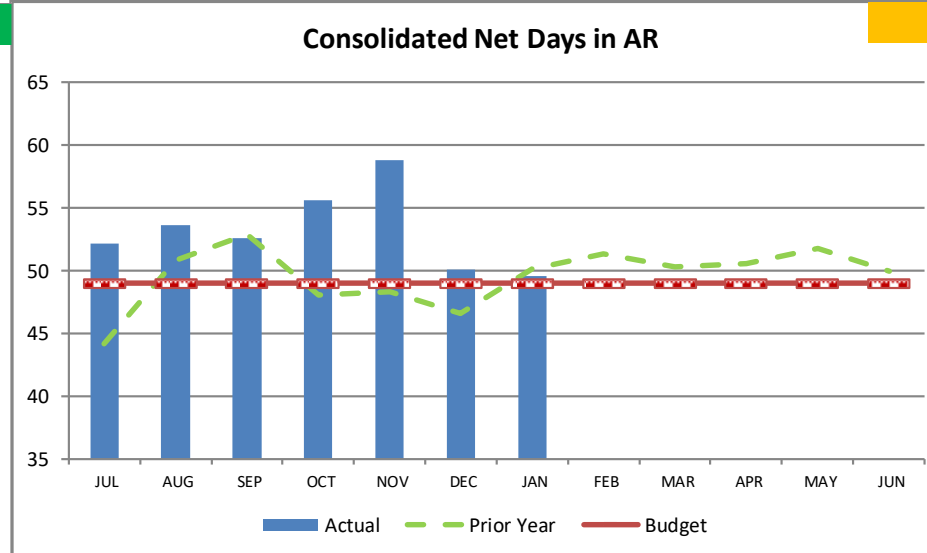
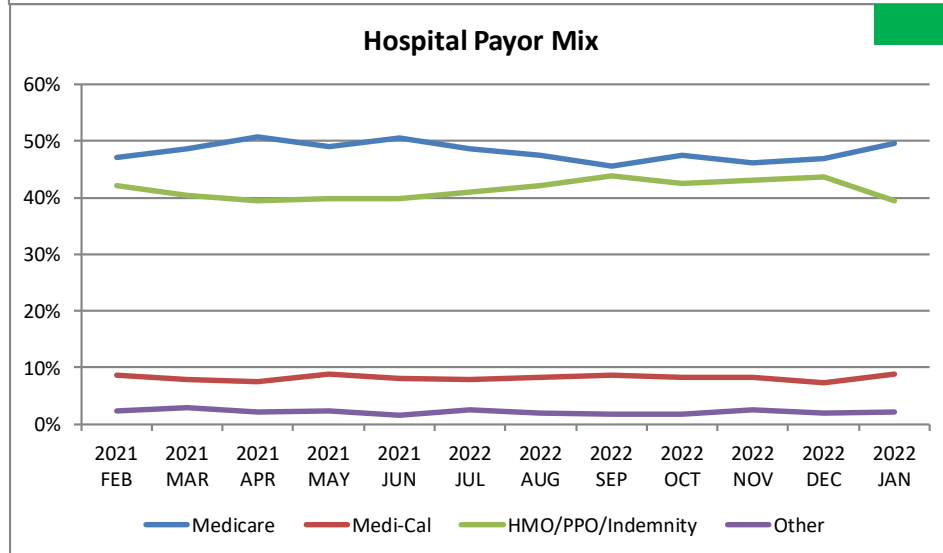
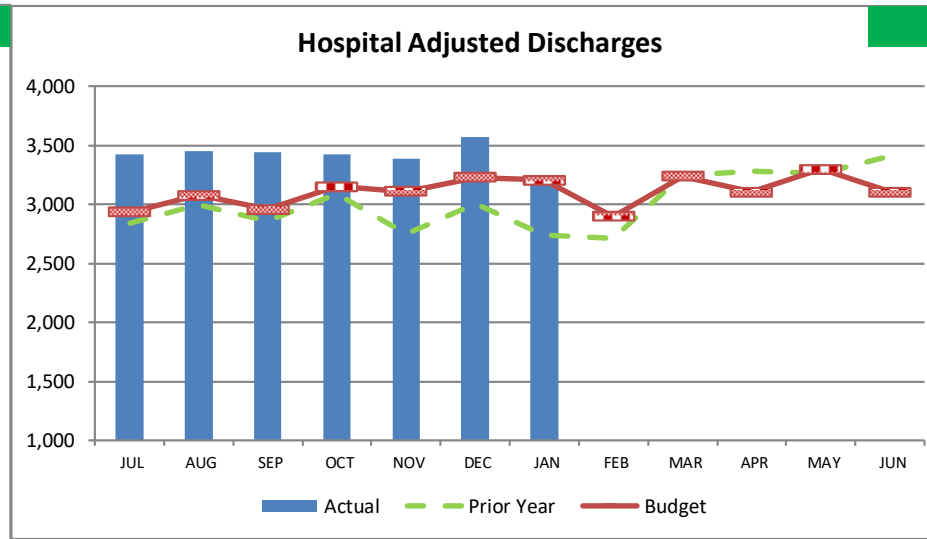
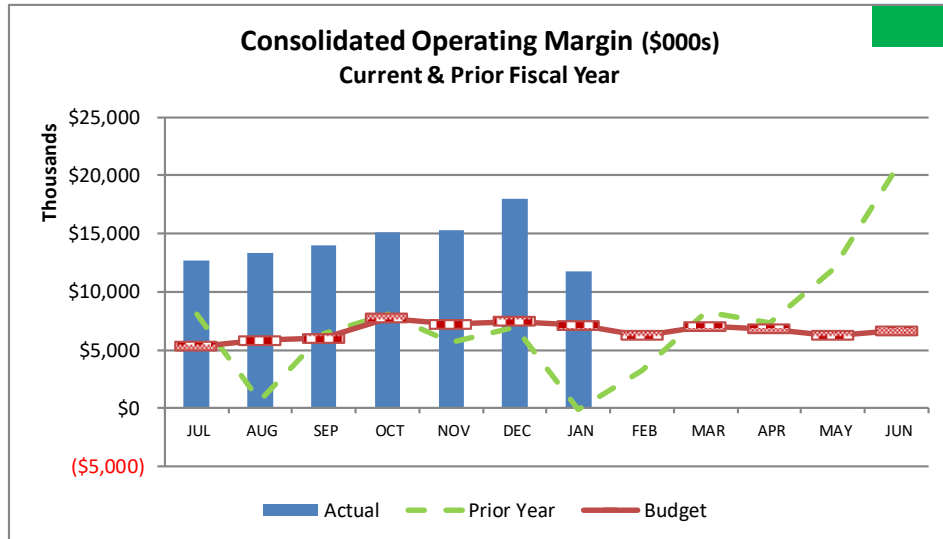
Financial Overview: YTD FY2022 (as of 1/31/2022)

Consolidated Financial Performance

- YTD FY2022 operating margin is \$100.1M compared to the budget of \$46.7M
 - Operating expense is \$672.6M / 3.9% unfavorable to budget
 - Operating expense per CMI adjusted discharge: \$16,491 which is 8.1% favorable to budget. This continues to demonstrate effective management of variable expenses and the impact of initiatives implemented by management.
- Note: Excludes depreciation and interest expense**
- Year-over-year operating margin is \$64.3M higher than the same period last year, which is primarily due to the strength in volumes as exhibited by year over year growth in:
 - Outpatient Surgeries: 15.3% primarily driven by Heart/Vascular, Orthopedic, and Gyn. surgery activity.
 - Emergency Room Visits: 41.6%
 - Deliveries - Maternal Child services: 22.1%
 - YTD FY2022 net margin of \$81.2M is unfavorable to budget by \$19.7M and \$96.3M lower than YTD FY2021. Year-over-year non-operating income is lower by \$160.7M which is primarily driven by investment income.

APPENDIX

YTD FY2022 Financial KPIs – Monthly Trends



Investment Scorecard (as of 12/31/2021)

Key Performance Indicator	Status	El Camino	Benchmark	El Camino	Benchmark	El Camino	Benchmark	FY22 Budget	Expectation Per Asset Allocation
Investment Performance		CY 4Q 2021 / FY 2Q 2022		Fiscal Year-to-Date 2022		9y 2m Since Inception (annualized)		FY 2022	2019
Surplus cash balance*		\$1,481.1	--	--	--	--	--	--	--
Surplus cash return		1.6%	2.4%	1.7%	2.3%	6.7%	6.6%	4.0%	5.6%
Cash balance plan balance (millions)		\$363.1	--	--	--	--	--	--	--
Cash balance plan return		2.1%	3.2%	2.5%	3.1%	9.0%	8.2%	6.0%	6.0%
403(b) plan balance (millions)		\$768.1	--	--	--	--	--	--	--
Risk vs. Return		3-year			9y 2m Since Inception (annualized)				2019
Surplus cash Sharpe ratio		1.21	1.28	--	--	0.98	1.00	--	0.34
Net of fee return		11.4%	11.6%	--	--	6.7%	6.6%	--	5.6%
Standard deviation		8.3%	8.0%	--	--	6.1%	5.9%	--	8.7%
Cash balance Sharpe ratio		1.22	1.25	--	--	1.05	1.04	--	0.32
Net of fee return		14.3%	13.4%	--	--	9.0%	8.2%	--	6.0%
Standard deviation		10.6%	9.5%	--	--	7.9%	7.2%	--	10.3%
Asset Allocation		CY 4Q 2021 / FY 2Q 2022							
Surplus cash absolute variances to target		5.3%	< 10% Green < 20% Yellow	--	--	--	--	--	--
Cash balance absolute variances to target		6.9%	< 10% Green < 20% Yellow	--	--	--	--	--	--
Manager Compliance		CY 4Q 2021 / FY 2Q 2022							
Surplus cash manager flags		18	< 24 Green < 30 Yellow	--	--	--	--	--	--
Cash balance plan manager flags		22	< 27 Green < 34 Yellow	--	--	--	--	--	--

*Excludes debt reserve funds, District assets (~\$42 mm), and balance sheet cash not in investable portfolio (~\$173 mm). Includes Foundation (~\$43 mm) and Concern (~\$15 mm) assets.



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Period 7 and YTD Operating Income, Non-Operating Income and Net Income by Affiliate (as of 01/31/2022)

(\$000s)

	Period 7- Month			Period 7- FYTD		
	Actual	Budget	Variance	Actual	Budget	Variance
El Camino Hospital Operating Margin						
Mountain View	11,702	7,262	4,440	90,373	46,722	43,650
Los Gatos	3,443	2,850	593	29,329	20,799	8,530
Sub Total - El Camino Hospital, excl. Affiliates	15,145	10,112	5,033	119,701	67,521	52,180
Operating Margin %	14.0%	10.4%		16.2%	10.2%	
El Camino Hospital Non Operating Income						
Sub Total - Non Operating Income	(30,983)	7,546	(38,530)	(20,364)	52,116	(72,480)
El Camino Hospital Net Margin	(15,838)	17,659	(33,497)	99,338	119,637	(20,300)
ECH Net Margin %	-14.6%	18.2%		13.4%	18.1%	
Concern	(286)	62	(348)	695	478	217
Foundation	(666)	(35)	(631)	319	(51)	370
El Camino Health Medical Network	(2,992)	(2,713)	(279)	(19,194)	(19,223)	29
Net Margin Hospital Affiliates	(3,944)	(2,687)	(1,258)	(18,180)	(18,796)	616
Total Net Margin Hospital & Affiliates	(19,783)	14,972	(34,754)	81,158	100,841	(19,683)

Consolidated Statement of Operations (\$000s)

Period 7 ending 01/31/2022

Period 7 FY 2021	Period 7 FY 2022	Period 7 Budget 2022	Variance Fav (Unfav)	Var%	\$000s	YTD FY 2021	YTD FY 2022	YTD Budget 2022	Variance Fav (Unfav)	Var%
OPERATING REVENUE										
335,788	417,996	389,995	28,001	7.2%	Gross Revenue	2,441,571	2,929,324	2,641,430	287,894	10.9%
(245,993)	(308,618)	(292,776)	(15,842)	(5.4%)	Deductions	(1,818,787)	(2,181,991)	(1,974,169)	(207,822)	(10.5%)
89,795	109,378	97,219	12,159	12.5%	Net Patient Revenue	622,784	747,333	667,261	80,072	12.0%
4,427	3,362	4,077	(715)	(17.5%)	Other Operating Revenue	27,758	25,457	26,511	(1,054)	(4.0%)
94,222	112,741	101,296	11,444	11.3%	Total Operating Revenues	650,542	772,790	693,772	79,018	11.4%
OPERATING EXPENSE										
53,636	59,347	54,482	(4,865)	(8.9%)	Salaries & Wages	340,999	385,573	364,608	(20,965)	(5.7%)
13,888	16,051	14,460	(1,591)	(11.0%)	Supplies	98,055	106,093	101,657	(4,436)	(4.4%)
15,825	14,291	14,324	32	0.2%	Fees & Purchased Services	99,339	102,587	101,362	(1,225)	(1.2%)
3,819	3,829	3,940	112	2.8%	Other Operating Expense	26,829	26,219	30,169	3,950	13.1%
1,428	1,421	1,403	(18)	(1.3%)	Interest	10,000	9,933	9,812	(121)	(1.2%)
5,689	6,046	5,556	(489)	(8.8%)	Depreciation	39,499	42,242	39,481	(2,761)	(7.0%)
94,284	100,984	94,165	(6,820)	(7.2%)	Total Operating Expenses	614,720	672,646	647,089	(25,558)	(3.9%)
(62)	11,756	7,132	4,625	64.8%	Net Operating Margin	35,822	100,143	46,684	53,460	114.5%
39	(31,539)	7,840	(39,379)	(502.3%)	Non Operating Income	141,667	(18,986)	54,157	(73,143)	(135.1%)
(23)	(19,783)	14,972	(34,754)	(232.1%)	Net Margin	177,489	81,158	100,841	(19,683)	(19.5%)
7,055	19,223	14,090	5,133	36.4%	Operating EBIDA	85,321	152,318	95,976	56,342	58.7%
7.5%	17.1%	13.9%	3.1%		Operating EBIDA Margin	13.1%	19.7%	13.8%	5.9%	
-0.1%	10.4%	7.0%	3.4%		Operating Margin	5.5%	13.0%	6.7%	6.2%	
0.0%	-17.5%	14.8%	(32.3%)		Net Margin	27.3%	10.5%	14.5%	(4.0%)	

El Camino Hospital – Mountain View

Statement of Operations (\$000s)

Period 7 ending 01/31/2022

Period 7 FY 2021	Period 7 FY 2022	Period 7 Budget 2022	Variance Fav (Unfav)	Var%	\$000s	YTD FY 2021	YTD FY 2022	YTD Budget 2022	Variance Fav (Unfav)	Var%
OPERATING REVENUES										
249,332	316,999	308,386	8,613	2.8%	Gross Revenue	1,871,988	2,216,425	2,054,738	161,687	7.9%
(183,291)	(233,110)	(232,984)	(126)	(0.1%)	Deductions	(1,391,404)	(1,644,086)	(1,542,661)	(101,425)	(6.6%)
66,041	83,889	75,402	8,487	11.3%	Net Patient Revenue	480,584	572,338	512,076	60,262	11.8%
2,249	1,390	2,135	(745)	(34.9%)	Other Operating Revenue	10,733	10,569	12,539	(1,969)	(15.7%)
68,290	85,279	77,537	7,742	10.0%	Total Operating Revenues	491,317	582,908	524,615	58,293	11.1%
OPERATING EXPENSES										
42,250	46,689	43,347	(3,342)	(7.7%)	Salaries & Wages	268,535	304,575	289,030	(15,545)	(5.4%)
10,166	11,484	11,325	(160)	(1.4%)	Supplies	74,461	78,128	77,666	(462)	(0.6%)
8,277	6,510	7,171	661	9.2%	Fees & Purchased Services	47,817	48,889	50,098	1,208	2.4%
2,503	2,806	2,647	(159)	(6.0%)	Other Operating Expense	17,870	18,291	20,135	1,844	9.2%
1,428	1,421	1,403	(18)	(1.3%)	Interest	10,000	9,933	9,812	(121)	(1.2%)
4,527	4,667	4,384	(284)	(6.5%)	Depreciation	31,695	32,718	31,153	(1,565)	(5.0%)
69,151	73,577	70,275	(3,301)	(4.7%)	Total Operating Expenses	450,377	492,535	477,893	(14,642)	(3.1%)
(862)	11,702	7,262	4,440	61.1%	Net Operating Margin	40,940	90,373	46,722	43,650	93.4%
316	(30,983)	7,546	(38,530)	(510.6%)	Non Operating Income	137,408	(20,387)	52,116	(72,503)	(139.1%)
(545)	(19,281)	14,809	(34,090)	(230.2%)	Net Margin	178,348	69,986	98,838	(28,852)	(29.2%)
5,094	17,791	13,049	4,742	36.3%	Operating EBIDA	82,635	133,024	87,687	45,337	51.7%
7.5%	20.9%	16.8%	4.0%		Operating EBIDA Margin	16.8%	22.8%	16.7%	6.1%	
-1.3%	13.7%	9.4%	4.4%		Operating Margin	8.3%	15.5%	8.9%	6.6%	
-0.8%	-22.6%	19.1%	(41.7%)		Net Margin	36.3%	12.0%	18.8%	(6.8%)	

El Camino Hospital – Los Gatos

Statement of Operations (\$000s)

Period 7 ending 01/31/2022

Period 7 FY 2021	Period 7 FY 2022	Period 7 Budget 2022	Variance Fav (Unfav)	Var%	\$000s	YTD FY 2021	YTD FY 2022	YTD Budget 2022	Variance Fav (Unfav)	Var%
					OPERATING REVENUE					
77,828	93,047	74,307	18,741	25.2%	Gross Revenue	509,665	648,662	528,926	119,736	22.6%
(56,856)	(70,184)	(55,220)	(14,964)	(27.1%)	Deductions	(386,879)	(494,875)	(395,144)	(99,731)	(25.2%)
20,972	22,864	19,087	3,777	19.8%	Net Patient Revenue	122,787	153,787	133,782	20,005	15.0%
257	287	272	14	5.3%	Other Operating Revenue	2,526	1,979	1,894	85	4.5%
21,229	23,150	19,359	3,791	19.6%	Total Operating Revenue	125,312	155,766	135,677	20,090	14.8%
					OPERATING EXPENSE					
9,355	10,641	9,047	(1,594)	(17.6%)	Salaries & Wages	58,235	66,947	60,601	(6,346)	(10.5%)
3,372	4,134	2,912	(1,223)	(42.0%)	Supplies	20,536	25,632	21,999	(3,633)	(16.5%)
3,324	3,557	3,221	(336)	(10.4%)	Fees & Purchased Services	20,257	24,184	22,491	(1,693)	(7.5%)
333	290	405	115	28.3%	Other Operating Expense	2,646	2,197	3,250	1,053	32.4%
0	0	0	0	0.0%	Interest	0	0	0	0	0.0%
922	1,086	925	(160)	(17.3%)	Depreciation	6,074	7,478	6,537	(941)	(14.4%)
17,305	19,708	16,509	(3,198)	(19.4%)	Total Operating Expense	107,748	126,438	114,878	(11,560)	(10.1%)
3,924	3,443	2,850	593	20.8%	Net Operating Margin	17,564	29,329	20,799	8,530	41.0%
0	0	0	0	0.0%	Non Operating Income	0	23	0	23	0.0%
3,924	3,443	2,850	593	20.8%	Net Margin	17,564	29,352	20,799	8,553	41.1%
4,846	4,528	3,775	753	20.0%	Operating EBIDA	23,638	36,807	27,336	9,471	34.6%
22.8%	19.6%	19.5%	0.1%		Operating EBIDA Margin	18.9%	23.6%	20.1%	3.5%	
18.5%	14.9%	14.7%	0.1%		Operating Margin	14.0%	18.8%	15.3%	3.5%	
18.5%	14.9%	14.7%	0.1%		Net Margin	14.0%	18.8%	15.3%	3.5%	

El Camino Health Medical Network

Statement of Operations (\$000s)

Period 7 ending 01/31/2022

Period 7 FY 2021	Period 7 FY 2022	Period 7 Budget 2022	Variance Fav (Unfav)	Var%	\$000s	YTD FY 2021	YTD FY 2022	YTD Budget 2022	Variance Fav (Unfav)	Var%
OPERATING REVENUES										
8,628	7,950	7,302	648	8.9%	Gross Revenue	59,917	64,237	57,766	6,471	11.2%
(5,846)	(5,324)	(4,572)	(752)	(16.5%)	Deductions	(40,504)	(43,029)	(36,363)	(6,666)	(18.3%)
2,782	2,626	2,730	(105)	(3.8%)	Net Patient Revenue	19,413	21,207	21,402	(195)	(0.9%)
1,122	984	869	114	13.2%	Other Operating Revenue	9,196	6,701	6,479	222	3.4%
3,904	3,610	3,600	10	0.3%	Total Operating Revenues	28,609	27,908	27,881	27	0.1%
OPERATING EXPENSES										
1,623	1,573	1,591	18	1.1%	Salaries & Wages	11,238	11,001	11,587	586	5.1%
348	429	214	(216)	(100.9%)	Supplies	2,969	2,274	1,921	(352)	(18.3%)
3,727	3,640	3,437	(203)	(5.9%)	Fees & Purchased Services	28,228	26,412	25,475	(938)	(3.7%)
950	677	839	162	19.3%	Other Operating Expense	5,967	5,322	6,438	1,115	17.3%
0	0	0	0	0.0%	Interest	0	0	0	0	0.0%
226	281	232	(49)	(20.9%)	Depreciation	1,641	1,961	1,683	(278)	(16.5%)
6,874	6,600	6,313	(287)	(4.5%)	Total Operating Expenses	50,042	46,971	47,104	133	0.3%
(2,970)	(2,991)	(2,713)	(277)	(10.2%)	Net Operating Margin	(21,434)	(19,063)	(19,223)	161	0.8%
0	(1)	0	(1)	0.0%	Non Operating Income	229	(132)	0	(132)	0.0%
(2,970)	(2,992)	(2,713)	(279)	(10.3%)	Net Margin	(21,205)	(19,194)	(19,223)	29	0.2%
(2,744)	(2,710)	(2,481)	(229)	(9.2%)	Operating EBIDA	(19,793)	(17,101)	(17,540)	439	2.5%
-70.3%	-75.1%	-68.9%	(6.2%)		Operating EBIDA Margin	-69.2%	-61.3%	-62.9%	1.6%	
-76.1%	-82.9%	-75.4%	(7.5%)		Operating Margin	-74.9%	-68.3%	-68.9%	0.6%	
-76.1%	-82.9%	-75.4%	(7.5%)		Net Margin	-74.1%	-68.8%	-68.9%	0.2%	

Consolidated Balance Sheet (as of 01/31/2022)

(\$000s)

ASSETS	Audited		LIABILITIES AND FUND BALANCE	Audited	
	January 31, 2022	June 30, 2021		January 31, 2022	June 30, 2021
CURRENT ASSETS			CURRENT LIABILITIES		
Cash	142,741	151,641	Accounts Payable	37,582	39,762
Short Term Investments	221,032	284,262	Salaries and Related Liabilities	31,833	50,039
Patient Accounts Receivable, net	181,677	166,283	Accrued PTO	32,588	33,197
Other Accounts and Notes Receivable	6,517	9,540	Worker's Comp Reserve	2,300	2,300
Intercompany Receivables	13,111	15,116	Third Party Settlements	14,191	12,990
Inventories and Prepays	30,632	23,079	Intercompany Payables	10,666	14,704
Total Current Assets	595,710	649,921	Malpractice Reserves	1,665	1,670
			Bonds Payable - Current	9,905	9,430
BOARD DESIGNATED ASSETS			Bond Interest Payable	-	8,293
Foundation Board Designated	22,933	20,932	Other Liabilities	10,469	16,953
Plant & Equipment Fund	301,560	258,191	Total Current Liabilities	151,199	189,338
Women's Hospital Expansion	39,250	30,401			
Operational Reserve Fund	182,907	123,838	LONG TERM LIABILITIES		
Community Benefit Fund	18,165	18,412	Post Retirement Benefits	31,201	30,658
Workers Compensation Reserve Fund	17,002	16,482	Worker's Comp Reserve	17,002	17,002
Postretirement Health/Life Reserve Fund	31,201	30,658	Other L/T Obligation (Asbestos)	6,385	6,227
PTO Liability Fund	31,936	32,498	Bond Payable	472,117	479,621
Malpractice Reserve Fund	2,000	1,977	Total Long Term Liabilities	526,706	533,509
Catastrophic Reserves Fund	26,641	24,874			
Total Board Designated Assets	673,596	558,264	DEFERRED REVENUE-UNRESTRICTED	36,635	67,576
			DEFERRED INFLOW OF RESOURCES	45,862	28,009
FUNDS HELD BY TRUSTEE	0	5,694	FUND BALANCE/CAPITAL ACCOUNTS		
			Unrestricted	2,186,590	2,097,010
LONG TERM INVESTMENTS	538,015	603,211	Board Designated	201,081	193,782
			Restricted	32,096	31,082
CHARITABLE GIFT ANNUITY INVESTMENTS	950	728	Total Fund Bal & Capital Accts	2,419,767	2,321,874
			TOTAL LIABILITIES AND FUND BALANCE	3,180,169	3,140,306
INVESTMENTS IN AFFILIATES	34,943	34,170			
PROPERTY AND EQUIPMENT					
Fixed Assets at Cost	1,877,901	1,799,463			
Less: Accumulated Depreciation	(786,312)	(742,921)			
Construction in Progress	81,293	94,236			
Property, Plant & Equipment - Net	1,172,882	1,150,778			
DEFERRED OUTFLOWS	23,938	21,444			
RESTRICTED ASSETS	29,278	29,332			
OTHER ASSETS	110,856	86,764			
TOTAL ASSETS	3,180,169	3,140,306			

FY2022 COMMITTEE GOALS

Finance Committee

PURPOSE

The purpose of the Finance Committee (the "Committee") is to provide oversight, information sharing, and financial reviews related to budgeting, capital budgeting, long-range financial planning and forecasting, and monthly financial reporting for the El Camino Hospital (ECH) Hospital Board of Directors ("Board"). In carrying out its review, advisory, and oversight responsibilities, the Finance Committee shall remain flexible in order to best define financial strategies that react to changing conditions.

STAFF: **Carlos Bohorquez**, Chief Financial Officer (Executive Sponsor)

The CFO shall serve as the primary staff to support the Committee and is responsible for drafting the Committee meeting agenda for the Committee Chair's consideration. Additional members of the Executive Team may participate in the meetings upon the recommendation of the Executive Sponsor and at the discretion of the Committee Chair.

GOALS	TIMELINE	METRICS
1. Evaluate Financial Performance Compared to Budget and Moody's 'A1' Medians	Q1, Q2, Q3 and Q4	Presentations in August -2021, September - 2021 November - 2021, January - 2022, March - 2022, April - 2022, May - 2022
2. Evaluate FY2023 Operating and Capital Budget Assumptions	Q3 and Q4	March - 2022, April - 2022, May - 2022
3. Review Progress on Opportunities / Risks identified by Management for FY2022	Q2	November - 2021
4. Review strategy, goals, and performance of business affiliates and service lines: 1) Joint Venture – Satellite Healthcare, 2) Orthopedics, 3) Cardiology, 4) Joint Venture – Pathways, 5) ECHMN, 6) CONCERN, 7) Hospital Community Benefits Program	Q1	Joint Venture - Satellite (August - 2021), ECHMN (September -2021)
	Q2	Orthopedics (November 2021)
	Q3	Cardiology and ECHMN (January - 2022), CONCERN (March 2022), Hospital Community Benefits Program (March 2022)
	Q4	ECHMN (April -2022), Joint Venture – Pathways (May - 2022)
5. Review and evaluate ongoing customer service/patient experience tactics / metrics and use of AI to improve the process and customer experience for the Revenue Cycle	Q3	Monitor customer service and patient satisfaction metrics – March (2022)

SUBMITTED BY: **Chair:** John Zoglin | **Executive Sponsor:** Carlos Bohorquez, CFO

FY2022 Finance Committee Pacing Plan

FY2022 FC Pacing Plan – Q1		
July 2021	August 9, 2021	September 27, 2021
No Scheduled Finance Committee Meeting	Approval Items <ul style="list-style-type: none"> • Standing Consent Agenda Items • Minutes (motion) • Candidate Interviews and Recommendation to Appoint • Financial Report (FY2021 Periods 11 and 12) Discussion Items <ul style="list-style-type: none"> • Financial Report (Pre-Audit Fiscal Year End 2021 Results) • Service Line / Business Affiliate Review: JV Satellite Healthcare • Update on Kindred IP Rehab JV • Medical Staff Development Plan • Report on Board Actions • Other Standing Agenda Items • Executive Session • Post Implementation Review (“PIR”) Per Attached Schedule 	Approval Items <ul style="list-style-type: none"> • Standing Consent Agenda Items • Minutes (motion) • Financial Report (FY2022 Periods 1 and 2) • Financial Report Fiscal Year End 2021 Results Discussion Items <ul style="list-style-type: none"> • Service Line / Business Affiliate Review: ECHMN Update • Progress Against FY2022 Committee Goals & Pacing Plan • AdHoc Committee Update on Finance Committee Member Recruitment • Project Update: Women’s and Newborn Hospital Project • PIR • Report on Board Actions • Other Standing Agenda Items • Executive Session
FY2022 FC Pacing Plan – Q2		
October 2021	November 22, 2021	December 2021
No Scheduled Finance Committee Meeting	Approval Items <ul style="list-style-type: none"> • Standing Consent Agenda Items • Minutes (motion) • Financial Report (FY2022 Periods 3 and 4) Discussion Items <ul style="list-style-type: none"> • Service Line Review: Orthopedics • Foundation Update • FY2023 Community Benefit Grant Application Guiding Principles / Process • Review Progress on Opportunities / Risks Identified for FY2022 • PIR • Report on Board Actions • Other Standing Agenda Items • Executive Session 	No Scheduled Finance Committee Meeting

FY2022 Finance Committee Pacing Plan

FY2022 FC Pacing Plan – Q2		
January 31, 2022	February 2022	March 28, 2022
<p>5:30pm Joint Meeting with the Investment Committee: Topic: Long Term Financial Forecast</p> <p>6:30pm Approval Items</p> <ul style="list-style-type: none"> • Standing Consent Agenda Items • Minutes (motion) • Financial Report (FY2022 Periods 5 and 6) <p>Discussion</p> <ul style="list-style-type: none"> • Service Line / Business Affiliate Review: ECHMN Update • Managed Care Update • PIR • MV Campus Completion Plan • Report on Board Actions • Other Standing Agenda Items • Executive Session 	<p>No Scheduled Finance Committee Meeting</p>	<p>Approval Items</p> <ul style="list-style-type: none"> • Standing Consent Agenda Items • Minutes (motion) • Financial Report (FY2022 Periods 7 and 8) <p>Discussion Items</p> <ul style="list-style-type: none"> • FY2023 Budget Part # 1 Process and Assumptions • Service Line Review: CONCERN • Community Benefit Grant Program Update • Summary Physician Financial Arrangements (Year-End) • FY2023 Committee Planning: Goals, Pacing Plan and Meeting Dates • PIR • Report on Board Actions • Other Standing Agenda Items • Executive Session
FY2022 FC Pacing Plan – Q4		
April 25, 2022	May 30, 2022	June 2022
<p>Approval Items</p> <ul style="list-style-type: none"> • Standing Consent Agenda Items • Minutes (motion) • Financial Report (FY2022 Period 9) <p>Discussion Items</p> <ul style="list-style-type: none"> • FY2023 Budget Preview Part 2 • Service Line Report – ECHMN Update and Cardiology • Review Cycle Progress Report • Progress Against FY2022 Committee Goals & Pacing Plan • FY2023 Committee Planning: Goals, Pacing Plan and Meeting Dates • PIR • Report on Board Actions • Other Standing Agenda Items • Executive Session 	<p>5:30pm Joint Meeting with the Hospital Board Approval Items: FY2023 Operating & Capital Budget</p> <p>6:15pm Approval Items</p> <ul style="list-style-type: none"> • Financial Report (FY2022 Period 10) • FY2023 Organizational Goals • FY2023 Committee Planning: Goals, Pacing Plan and Meeting Dates • FY2023 El Camino Hospital Community Benefit Grant Program <p>Discussion Items</p> <ul style="list-style-type: none"> • Service Line Report: Pathways JV <u>/ CONCERN</u> • PIR • Report on Board Actions • Other Standing Agenda Items • Executive Session 	<p>No Scheduled Finance Committee Meeting</p>

**FY2022 Finance Committee Pacing Plan
Last 30 Months Capital Project Approvals**

APPROVAL DATE	APPROVING BODY	PROJECT NAME	APPROVED AMOUNT	PROPOSED FC PROJECT UPDATE / POST-IMPLEMENTATION REVIEW DATE
2/13/2019	ECH Board	Women's Hospital Planning	\$10.0M (Total Now \$16M)	09/2020
2/13/2019	ECH Board	SVMD Clinic Site Tenant Improvements	\$8.0M	09/2020
2/13/2019	ECH Board	Interventional Equipment Replacement	\$13.0M	09/2020
2/13/2019	ECH Board	Imaging Equipment Replacement	\$16.9M	09/2020
2/13/2019	ECH Board	SVMD Asset Acquisition	\$1.2M	11/2020 (w/SVMD Financials)
3/25/2019	Finance Committee	SVMD Clinic IT Infrastructure	\$4.6M	11/2020 (w/SVMD Financials)
5/28/2019	Finance Committee	MV Campus Signage	\$1.1M	N/A < \$2 M
8/21/2019	ECH Board	Medical Staff Development Plan	\$6.1M	01/2021
8/21/2019	ECH Board	ED Remodel	\$6.75M	01/2021
10/10/2020	ECH Board	MV Campus Completion (Old Main Demo)	\$24.9M	03/2021
1/25/2020*	Finance Committee	Satellite Dialysis*	*No approval on /1/25/2020 presented only	07/2021
7/27/2020	Finance Committee	Sterile Processing Equipment	\$1.85M	N/A < \$2 M
8/12/2020	ECH Board	Radiation Oncology Replacement Equipment	\$10.3M (add'l \$3.55 M)	01/2022
1/25/2021	Finance Committee	Real Estate Transaction	\$1.875M	09/2021
1/25/2021	Finance Committee	Cardiopulmonary Wellness Center (CPWC) Relocation	\$5.0M	03/2022
2/10/2021	ECH Board	Women's Hospital Expansion Project	\$149M	09/2021
5/24/2021	Finance Committee	MV Wireless / DAS Network Upgrades	\$3.3M	04/2022
8/9/2021	ECH Board	MV Cath. Lab Replacement Project	\$19.5M	05/2022
8/9/2021	ECH Board	Pyxis MedStation Replacement Project	\$6.64M	04/2022
8/9/2021	Finance Committee	ECHMN Clinic Relocation	\$3.09M	01/2022
10/13/2021	ECH Board	Real Estate Transaction	\$14.65M	01/2022
11/22/2021	Finance Committee	LG Interventional radiology Equipment Replacement	\$3.86M	01/2023
11/22/2021	Finance Committee	LG Nuclear Medicine Equipment Replacement & Code Upgrades	\$2.4M	01/2023
11/22/2021	Finance Committee	LG Operating Room Sterile Processing Update	\$2.386M	01/2023
1/31/2022	Finance Committee	MV Lab Chemistry Line	\$2.8M	02/2023

KaufmanHall

FEBRUARY 2022

National Hospital Flash Report

Real Data. Real Insight. Real Time.

Based on January Data from More Than 900 Hospitals

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Key Observations

Summary

Key Observations

The first month of 2022 was devastating for hospitals and health systems nationwide as they were hit full force by the Omicron tidal wave. COVID-19 cases and hospitalizations peaked at record levels in January due to rapid spread of the highly contagious variant.

The 7-day moving average of new COVID-19 cases jumped 93% within a two-week period, from 417,524 on January 1 to an all-time high of 807,115 on January 15.¹ The rapid rise in cases drove a corresponding increase in COVID-related hospitalizations, with the 7-day moving average of new daily admissions climbing 54% over the same period, from 14,017 on January 1 to a peak of 21,622 on January 15.

Hospital margins declined dramatically as many providers temporarily halted nonurgent procedures, the numbers of inpatients requiring longer hospital stays rose, and expenses continued to climb due to widespread staffing and supply chain issues. The median Kaufman Hall Operating Margin Index for the month was -3.68%, without CARES. With the federal funding, it was -3.3%.

The numbers of new cases and hospitalizations receded the second half of the month, going down nearly as quickly as they had gone up. Consistent with past surges, hospital performance likely will stabilize somewhat in coming months as a result, but January's losses could have repercussions throughout 2022.

¹ CDC data as of Feb. 22, 2022.

Margins

The sudden volume shifts and persistent expense increases pushed margins down in January. Not including federal CARES aid, the median change in Operating Margin dropped 71.3% from December to January. Year-over-year (YOY), the median change in Operating Margin was down 23.7% versus January 2021 and 73.3% compared to before the pandemic in January 2020, not including CARES.

The median change in Operating EBITDA Margin declined 52% month-over-month, 14.9% versus January 2021, and 52.7% versus January 2020. With CARES, the median change in Operating Margin declined 80.7% month-over-month and 23.8% YOY. The median change in Operating EBITDA Margin (with CARES) decreased 59.4% month-over-month and 19.6% YOY.

Volumes

The Omicron surge drove a drop in outpatient care as many providers and patients delayed nonurgent procedures in efforts to mitigate spread of the virus and ease traffic to hospitals experiencing an influx of COVID-19 cases. Operating Room Minutes were down 15.7% from December to January and 20.4% compared to before the pandemic in January 2020.

Hospitals saw an increase in more severe patients requiring longer hospital stays. Patient Days rose 1.7% month-over-month and 2.1% YOY. The Average Length of Stay (LOS) jumped 8.6% from December to January, and was up 4.9% compared to January 2021 and 17.2% versus January 2020.

Summary *(continued)*

Adjusted Discharges declined 10.4% month-over-month but were essentially flat YOY, rising just 0.3% compared to January 2021. Emergency Department (ED) Visits were down 1.4% compared to December but up 20.7% versus January of last year.

Revenue

The delays in outpatient care led to corresponding declines in associated revenues. Outpatient (OP) Revenue dropped 7.5% from December to January, dragging Gross Operating Revenue (without CARES) down 4.7% month-over-month despite a 2.7% increase in Inpatient (IP) Revenue over the same period.

Compared to January 2021, however, Gross Operating Revenue (less CARES) was up 9.3%, IP Revenue increased 9%, and OP Revenue rose 9.4%. Looking back further to January 2020, Gross Operating Revenue rose 4.8% and IP Revenue increased 9.1%, but OP Revenue was down 1.6%.

Expenses

Hospitals continued to be hit with escalating expenses as nationwide labor shortages cause mounting wage pressures and global supply chain issues coupled with inflation affect non-labor expenses. Total Expense per Adjusted Discharge jumped 11.6% from December to January, largely driven by a 14.6% month-over-month increase in Labor Expense per Adjusted Discharge. Non-Labor Expense per Adjusted Discharge rose 7.8% month-over-month.

Compared to January 2021, Total Expense per Adjusted Discharge was up 10.9%, Labor Expense per Adjusted Discharge increased 14.2%, and Non-Labor Expense per Adjusted Discharge was up 5.9%. The YOY labor expense increase came despite a decrease in staffing levels, with Full-Time Equivalents (FTEs) per Adjusted Occupied Bed (AOB) down 4.9%. These trends reflect the impacts of wage pressures as hospitals compete in a tight labor market.

The expense increases were most dramatic compared to pre-pandemic levels. Compared to January 2020, Total Expense per Adjusted Discharge was up 43.5%, Labor Expense per Adjusted Discharge increased 57%, and Non-Labor Expense per Adjusted Discharge was up 35.5%. Drug Expense per Adjusted Discharge had the highest increase over this period of any expense metric at 65.3%.

Non-Operating

Inflation climbed to a 40-year peak in January, with the Consumer Price Index reading 7.5% YOY, its highest level since February 1982. The Federal Reserve is set to end asset purchases and begin rate hikes in March to counter inflation.

Recent Federal Open Market Committee (FOMC) minutes indicate a faster pace of balance sheet runoff compared to balance sheet reductions that occurred between 2017 and 2019. The FOMC also indicated a faster pace of interest rate increases compared to 2015.

Non-farm payrolls added 467,000 jobs in January—well above the expected 125,000—as unemployment came in at 4% for the month.

Takeaways at a Glance

1. Hospitals had an extremely difficult month under the apex of Omicron.

Hospital margins, outpatient volumes, and revenues all dropped while expenses rose in January as Omicron COVID-19 cases and associated hospitalizations peaked mid-month.

2. A pause in nonurgent procedures hit outpatient volumes and revenues.

Outpatient volumes and revenues saw dramatic declines as providers and patients delayed nonurgent, outpatient care to stem the virus' spread and reserve hospital resources for those with more urgent needs.

3. Hospitals saw more severe patients requiring longer hospital stays.

Inpatient volumes and average lengths of stay both increased in January as hospitals saw greater numbers of patients infected with the most contagious COVID-19 variant to date.

4. Expense pressures show no signs of subsiding.

Nationwide labor shortages continue to drive up labor expenses while supply chain challenges are contributing to inflation of non-labor costs, exacerbating hospital operating pressures amid unstable pandemic volumes and revenues.

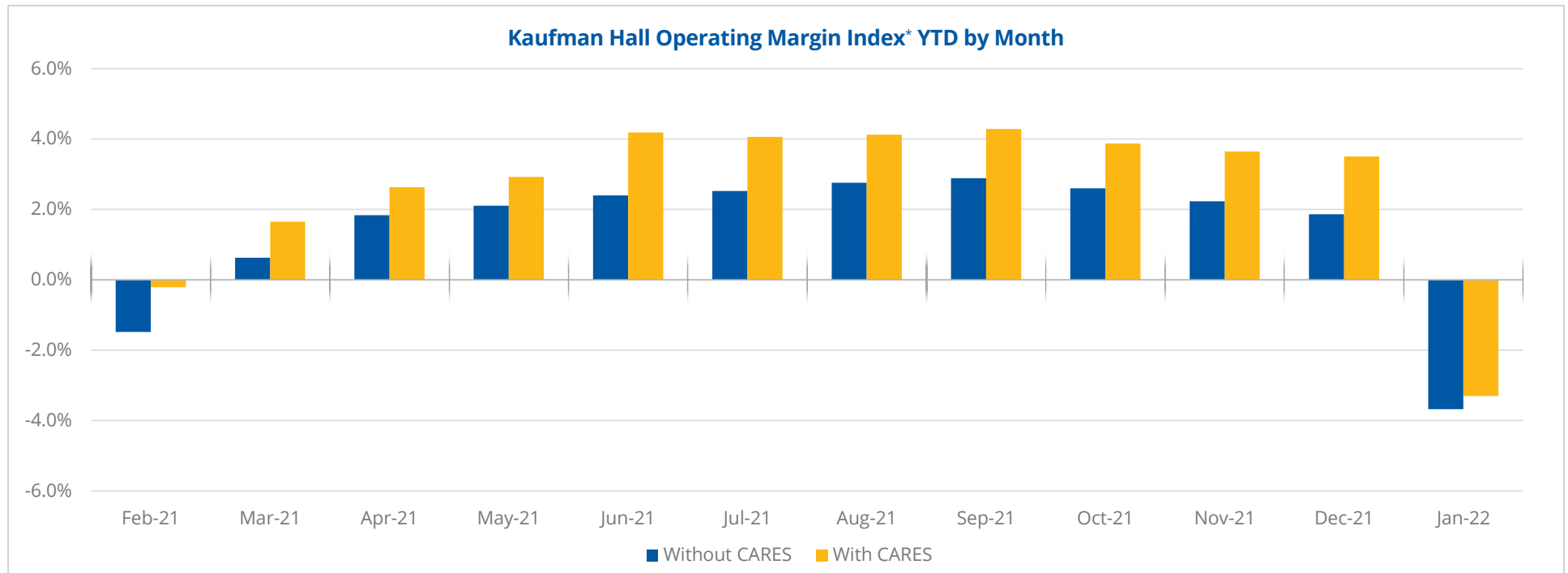
Margins

National Margin Results

MARGIN % CHANGE	Budget Variance	Month-Over-Month	Year-Over-Year	Year-Over-Year 2020
Operating EBITDA Margin Less CARES	-43.7%	-52.0%	-14.9%	-52.7%
Operating Margin Less CARES	-54.6%	-71.3%	-23.7%	-73.3%

Unless noted, figures are actuals and medians are expressed as percentage change

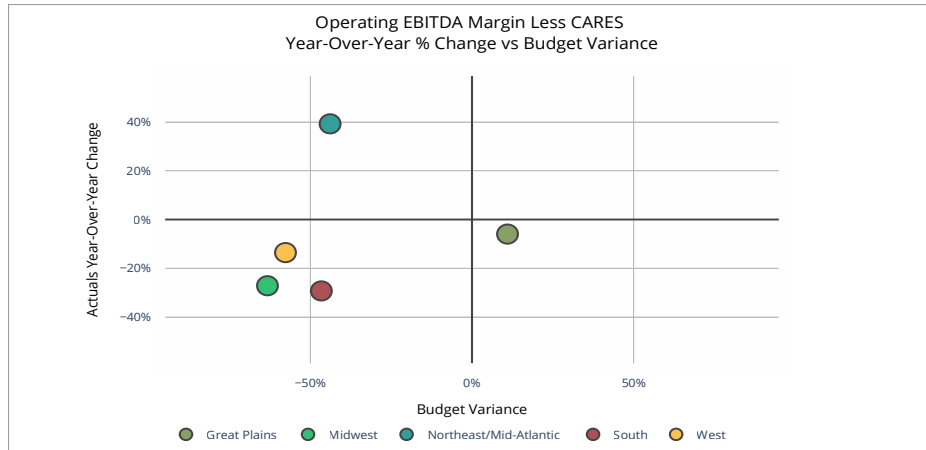
MARGIN ABSOLUTE CHANGE	Budget Variance	Month-Over-Month	Year-Over-Year	Year-Over-Year 2020
Operating EBITDA Margin Less CARES	(502)	(788.7)	(235.3)	(560.6)
Operating Margin Less CARES	(543.2)	(889.3)	(227.1)	(597.5)



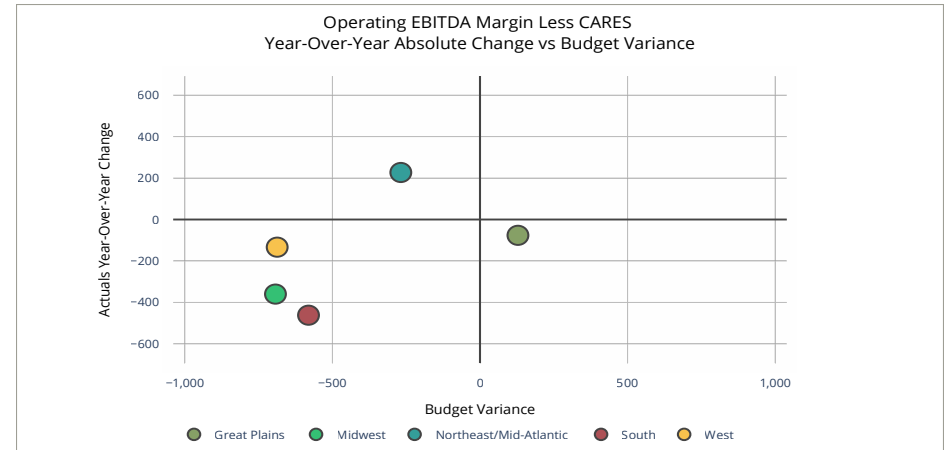
Source: National Hospital Flash Report (February 2022)

* Note: The Kaufman Hall Hospital Operating Margin and Operating EBITDA Margin Indices are comprised of the national median of our dataset adjusted for allocations to hospitals from corporate, physician, and other entities.

EBITDA Margin by Region



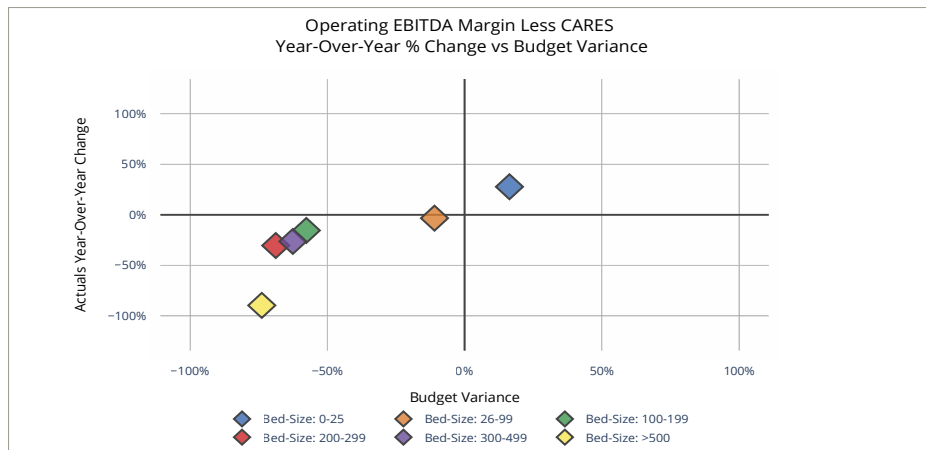
Source: Kaufman Hall National Hospital Flash Report, February 2022



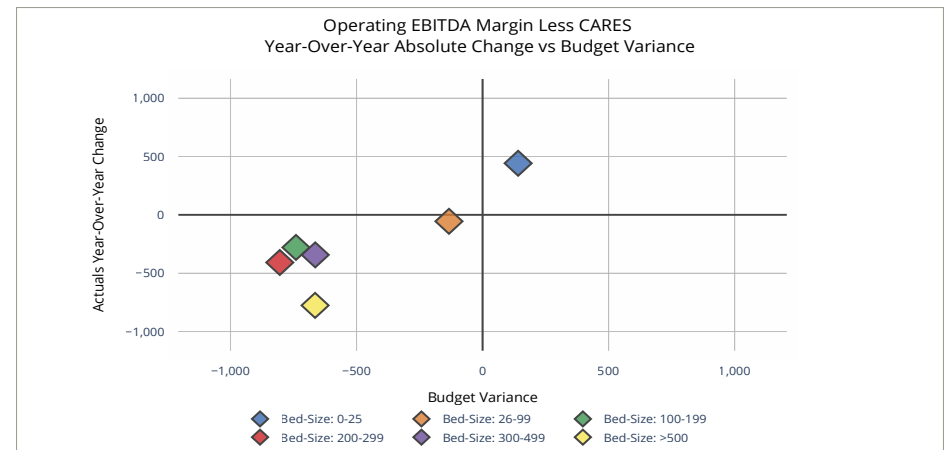
Source: Kaufman Hall National Hospital Flash Report, February 2022

The median change in Operating EBITDA Margin was down year-over-year (YOY) across four of five regions in January, not including CARES. The South had the biggest decrease from January 2021 at 29% YOY. The Northeast/Mid-Atlantic was the only region that was up YOY at 39%.

EBITDA Margin by Bed Size



Source: Kaufman Hall National Hospital Flash Report, February 2022



Source: Kaufman Hall National Hospital Flash Report, February 2022

The median change in Operating EBITDA Margin (without CARES) was down YOY for five of six bed-size cohorts. The largest hospitals with 500 beds or more had the biggest YOY decline at 90%, while the smallest hospitals with 0-25 beds were the only cohort to increase YOY at 28%.

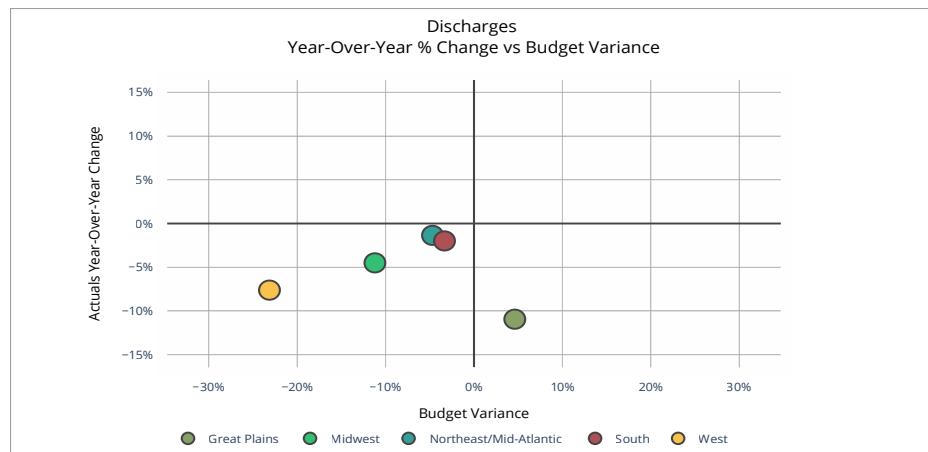
Volumes

National Volume Results

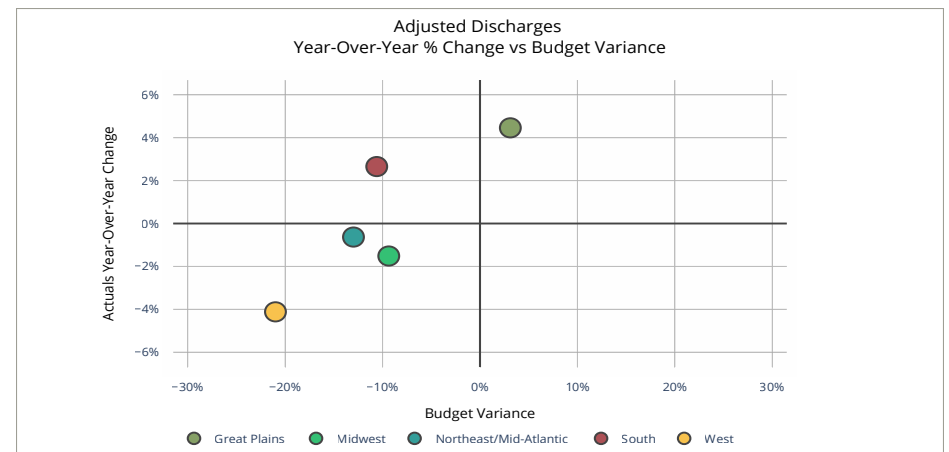
VOLUMES % CHANGE	Budget Variance	Month-Over-Month	Year-Over-Year	Year-Over-Year 2020
Discharges	-6.0%	-6.3%	-2.8%	-16.2%
Adjusted Discharges	-10.2%	-10.4%	0.3%	-18.9%
Patient Days	6.0%	1.7%	2.1%	0.6%
Observation Patient Days as a Percent of Patient Day	-12.4%	-13.3%	3.3%	-20.5%
Adjusted Patient Days	-0.1%	-3.8%	5.0%	-5.4%
Average Length of Stay	13.6%	8.6%	4.9%	17.2%
ED Visits	4.8%	-1.4%	20.7%	-10.0%
Operating Room Minutes	-14.5%	-15.7%	-2.7%	-20.4%

Unless noted, figures are actuals and medians are expressed as percentage change

Volume by Region



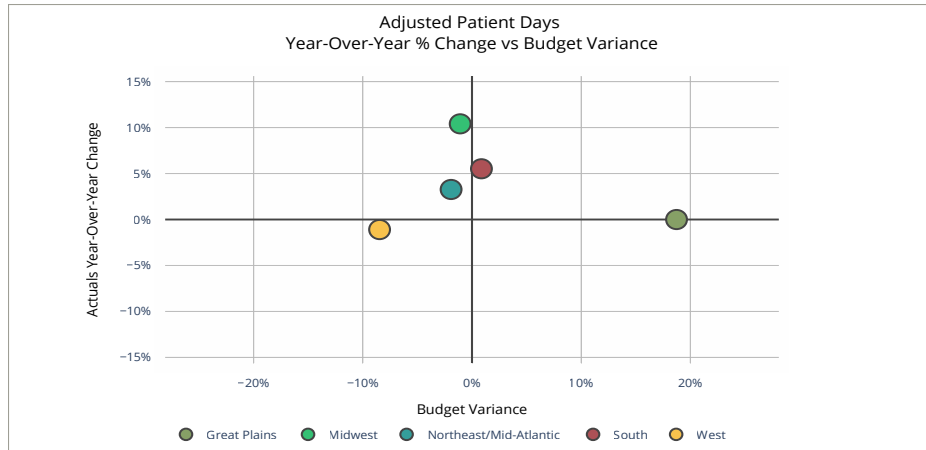
Source: Kaufman Hall National Hospital Flash Report, February 2022



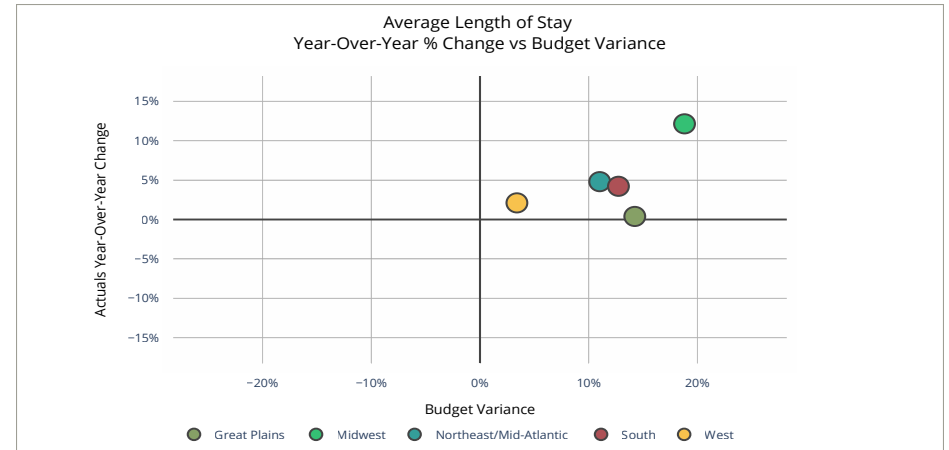
Source: Kaufman Hall National Hospital Flash Report, February 2022

Discharges declined YOY across all regions in January. The Great Plains had the biggest YOY decrease at 10.9%. Adjusted Discharges were down YOY in the West, Midwest, and Northeast/Mid-Atlantic, but the South and Great Plains were up 2.7% and 4.5% YOY, respectively.

Volume by Region (continued)

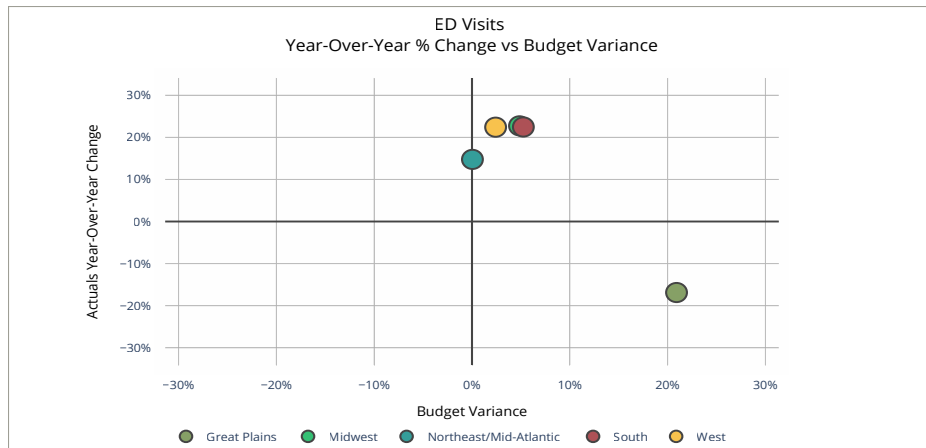


Source: Kaufman Hall National Hospital Flash Report, February 2022

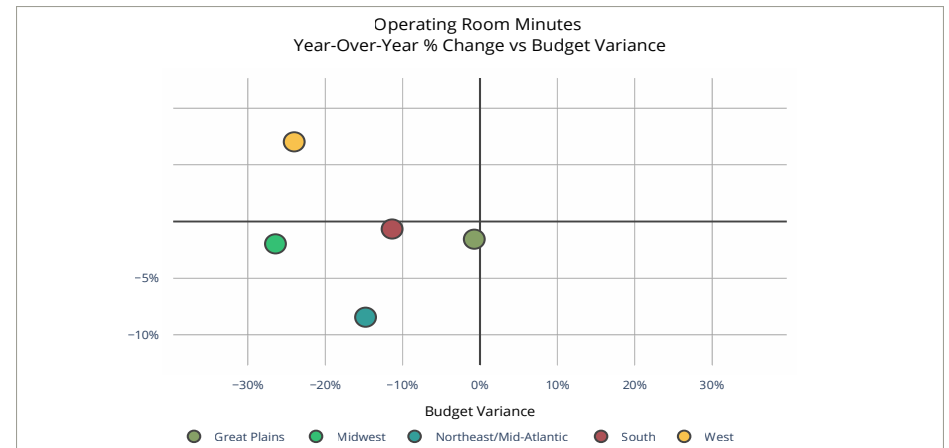


Source: Kaufman Hall National Hospital Flash Report, February 2022

Adjusted Patient Days rose YOY for three regions, were down 1.1% in the West, and flat YOY for the Great Plains. Average Length of Stay (LOS) rose YOY for all regions as hospitals saw an increase in sicker patients requiring care or longer periods. The Midwest had the biggest YOY increase at 12.1%.



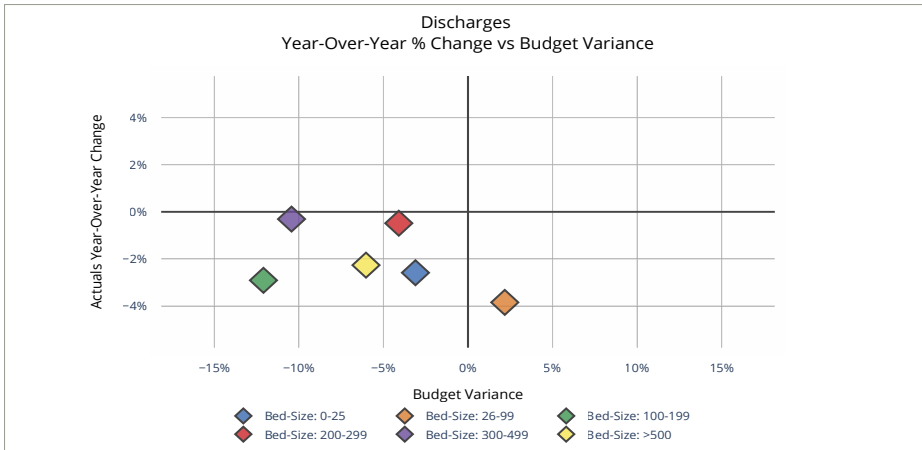
Source: Kaufman Hall National Hospital Flash Report, February 2022



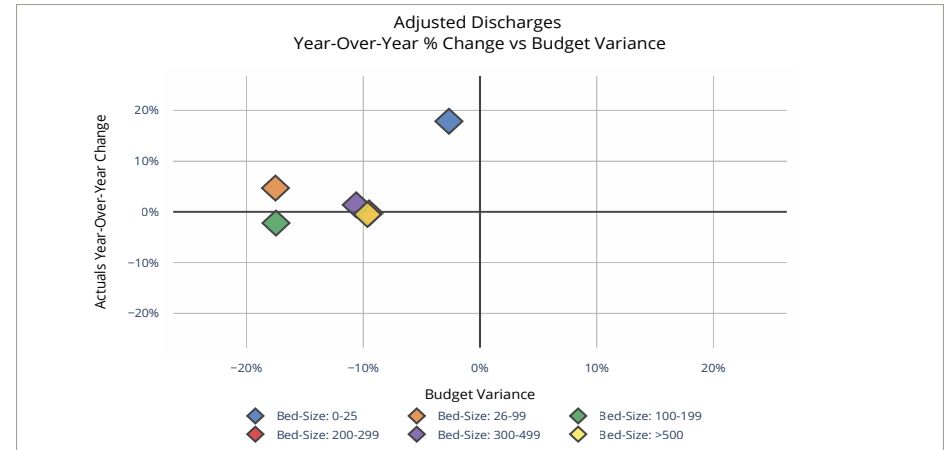
Source: Kaufman Hall National Hospital Flash Report, February 2022

Emergency Department (ED) Visits rose 14.8% or more YOY for four regions. The Great Plains was an outlier with ED Visits down 16.9% YOY. Operating Room Minutes declined YOY for four regions as many providers halted nonurgent procedures. The Northeast/Mid-Atlantic had the biggest YOY drop at 8.4%.

Volume by Bed Size

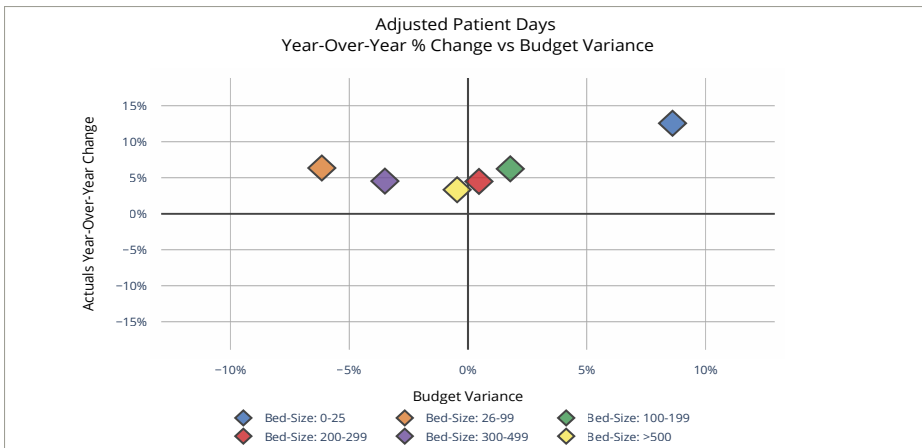


Source: Kaufman Hall National Hospital Flash Report, February 2022

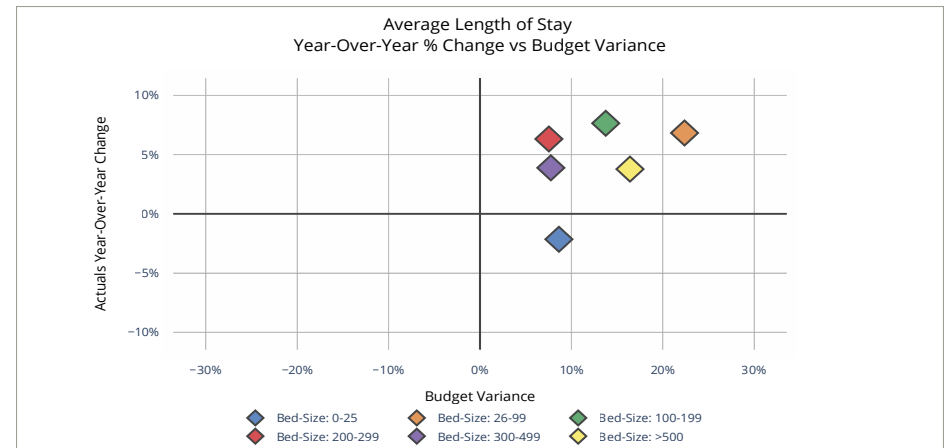


Source: Kaufman Hall National Hospital Flash Report, February 2022

Discharges were down YOY across all bed-size cohorts. Smaller hospitals with 26-99 beds had the biggest decrease at 3.9% YOY. Adjusted Discharges were below budget for all regions, down YOY for three, and up YOY for three. Hospitals with 0-25 beds had the biggest YOY increase at 17.9%.



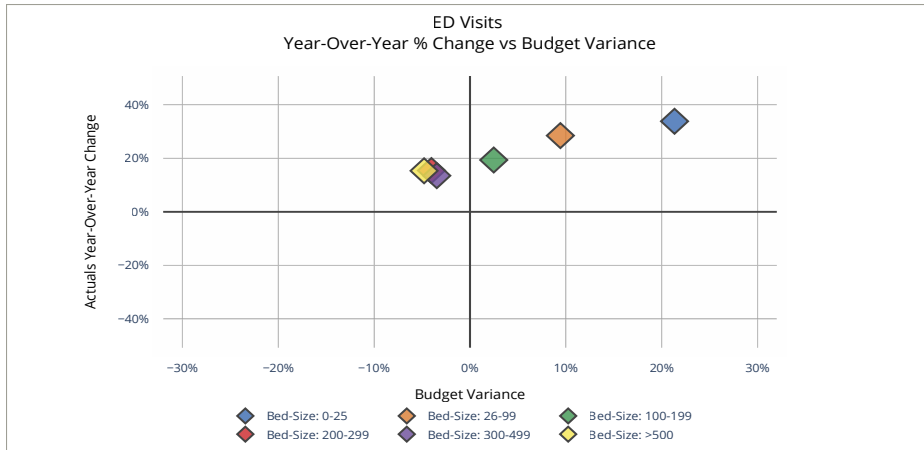
Source: Kaufman Hall National Hospital Flash Report, February 2022



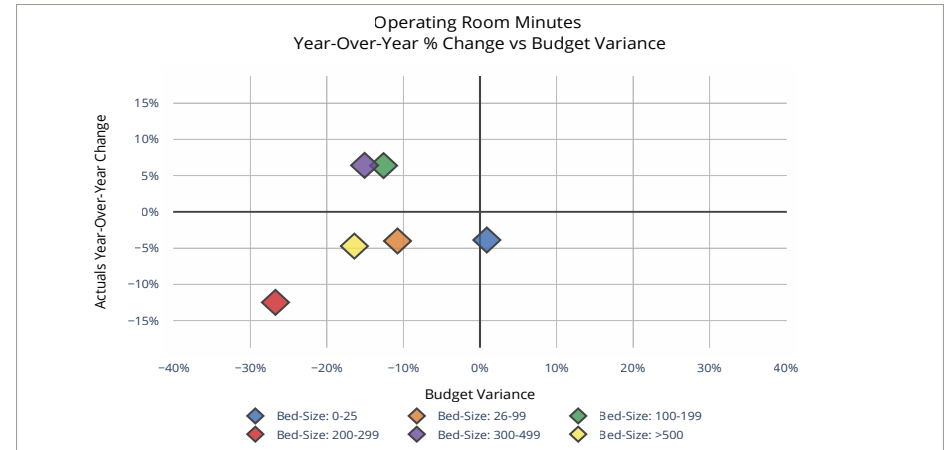
Source: Kaufman Hall National Hospital Flash Report, February 2022

Adjusted Patient Days rose 3.3% or more YOY for hospitals of all sizes. The smallest hospitals with 0-25 beds had the biggest increase at 12.6% YOY. Average LOS rose above budget for all cohorts and up YOY for five. Hospitals with 100-199 beds had the biggest YOY increase at 7.7%.

Volume by Bed Size (continued)



Source: Kaufman Hall National Hospital Flash Report, February 2022



Source: Kaufman Hall National Hospital Flash Report, February 2022

ED Visits were up 13.5% or more YOY for hospitals of all sizes. Smaller hospitals with 26-99 and 0-25 beds had the biggest YOY increases at 28.5% and 33.8%, respectively. Operating Room Minutes were down YOY for hospitals with 0-25, 26-99, 200-299, and 500 or more beds.

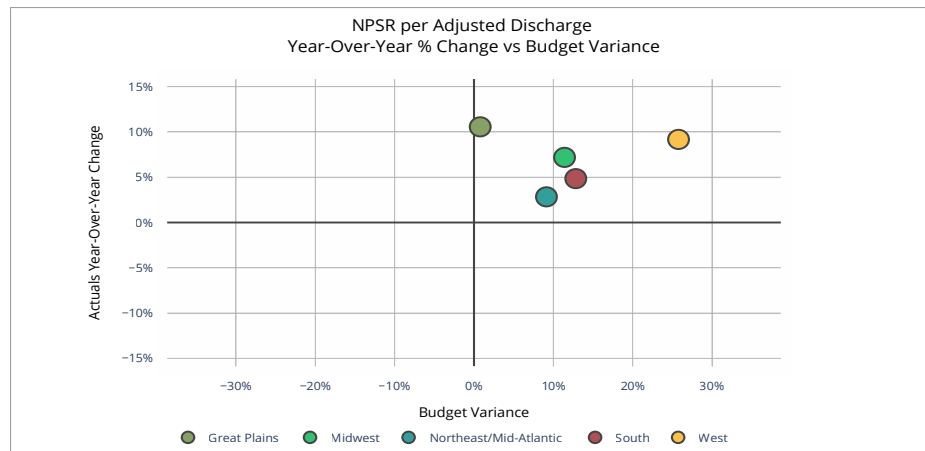
Revenues

National Revenue Results

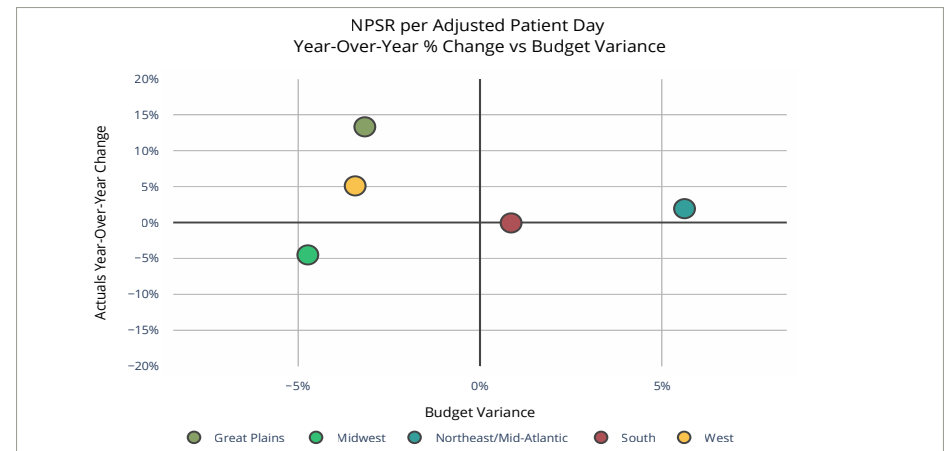
REVENUE % CHANGE	Budget Variance	Month-Over-Month	Year-Over-Year	Year-Over-Year 2020
Gross Operating Revenue Less CARES	-1.4%	-4.7%	9.3%	4.8%
IP Revenue	6.5%	2.7%	9.0%	9.1%
OP Revenue	-6.7%	-7.5%	9.4%	-1.6%
Bad Debt and Charity	-27.3%	-14.3%	-12.7%	-41.7%
NPSR per Adjusted Discharge	10.4%	3.6%	6.4%	32.2%
NPSR per Adjusted Patient Day	-0.7%	-5.1%	2.1%	13.6%
IP/OP Adjustment Factor	-5.6%	-5.9%	1.8%	-6.9%
Bad Debt and Charity as a % of Gross	-7.4%	3.2%	-2.5%	-14.9%

Unless noted, figures are actuals and medians are expressed as percentage change

Revenue by Region



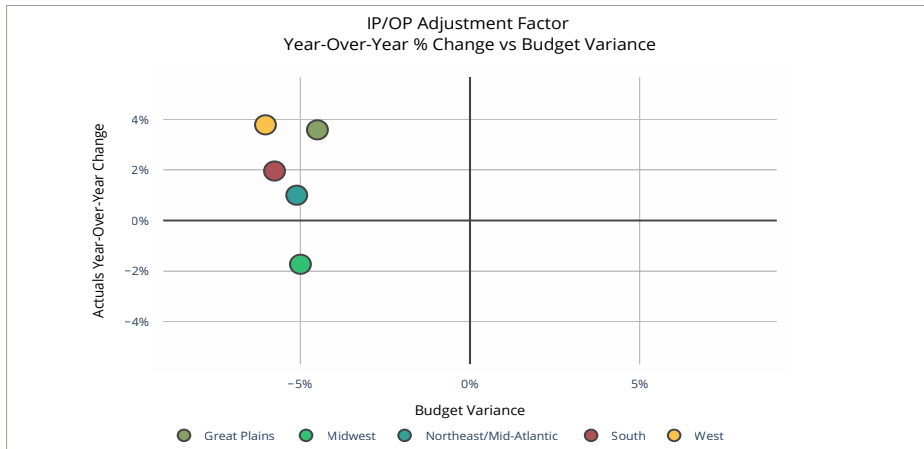
Source: Kaufman Hall National Hospital Flash Report, February 2022



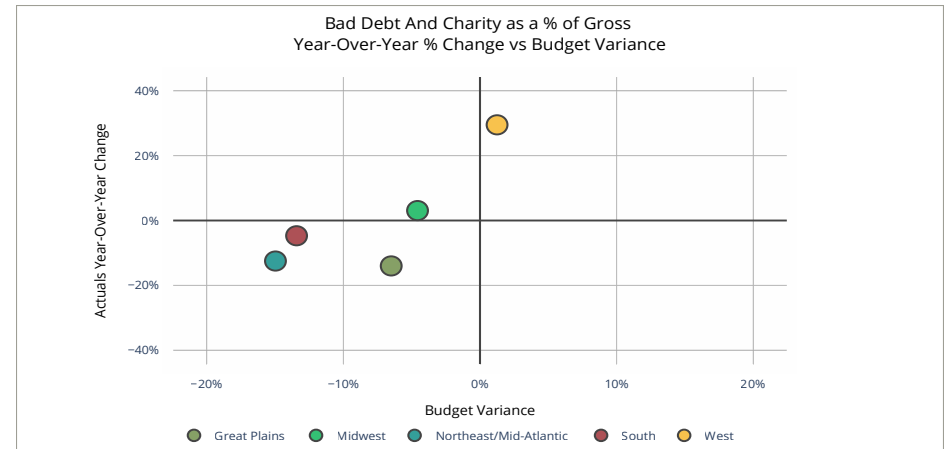
Source: Kaufman Hall National Hospital Flash Report, February 2022

Net Patient Service Revenue (NPSR) per Adjusted Discharge increased YOY for hospitals across all regions in January. The Great Plains had the biggest YOY increase at 10.6%. NPSR per Adjusted Patient Day was up YOY for three regions, down 4.5% YOY in the Midwest, and flat YOY in the South.

Revenue by Region (continued)



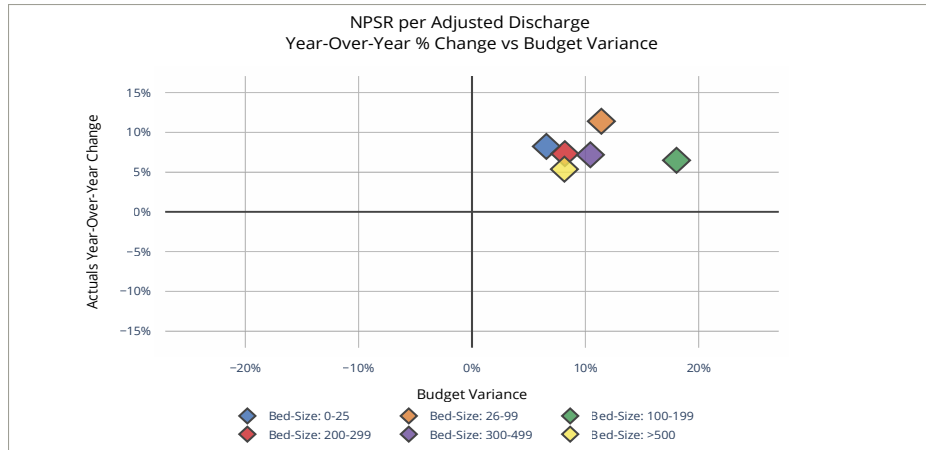
Source: Kaufman Hall National Hospital Flash Report, February 2022



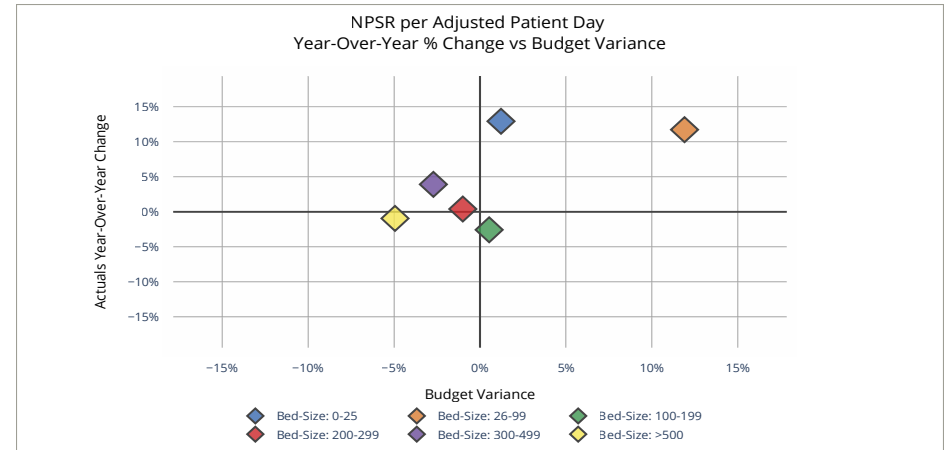
Source: Kaufman Hall National Hospital Flash Report, February 2022

Inpatient/Outpatient (IP/OP) Adjustment Factor rose YOY for four of five regions. The Great Plains and West had the biggest YOY increases at 3.6% and 3.8%, respectively. Bad Debt and Charity as a Percent of Gross was down YOY for three regions, up 3.1% YOY in the Midwest, and up 29.5% YOY in the West.

Revenue by Bed Size

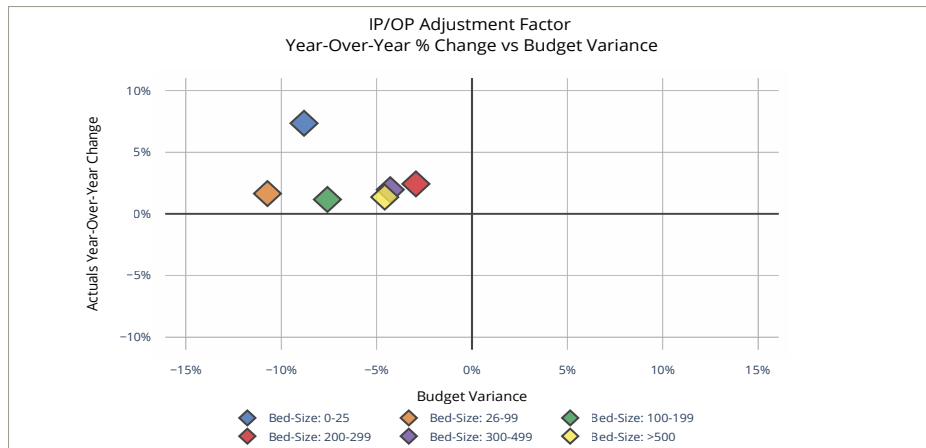


Source: Kaufman Hall National Hospital Flash Report, February 2022

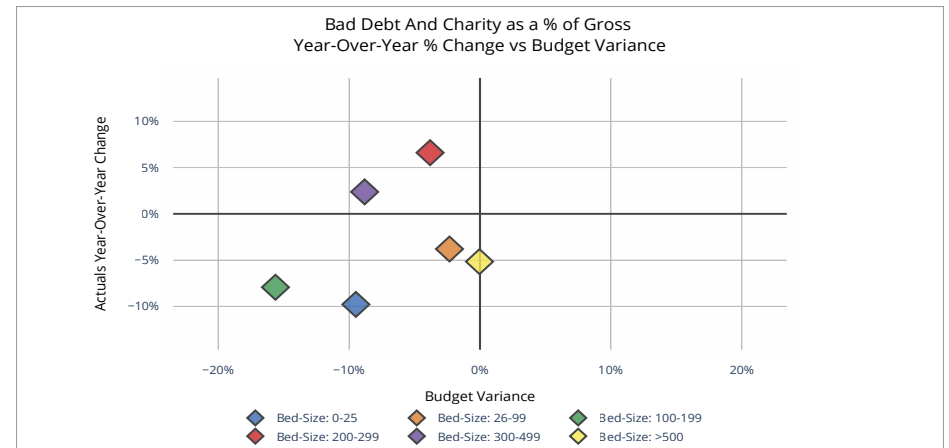


Source: Kaufman Hall National Hospital Flash Report, February 2022

NPSR per Adjusted Discharge rose YOY and to budget for all bed-size cohorts for a sixth consecutive month. Hospitals with 26-99 beds had the biggest YOY increase at 11.4%. NPSR per Adjusted Patient Day was up YOY for four bed-size cohorts, but down YOY for hospitals with 100-199 and 500+ beds.



Source: Kaufman Hall National Hospital Flash Report, February 2022



Source: Kaufman Hall National Hospital Flash Report, February 2022

The IP/OP Adjustment Factor was up YOY for hospitals of all sizes. The smallest hospitals (0-25 beds) had the biggest YOY increase at 7.4%. Bad Debt and Charity as a Percent of Gross was down YOY for four of six bed-size cohorts, but up 2.4% for 300-499 bed hospitals and up 6.6% for 200-299 bed hospitals.

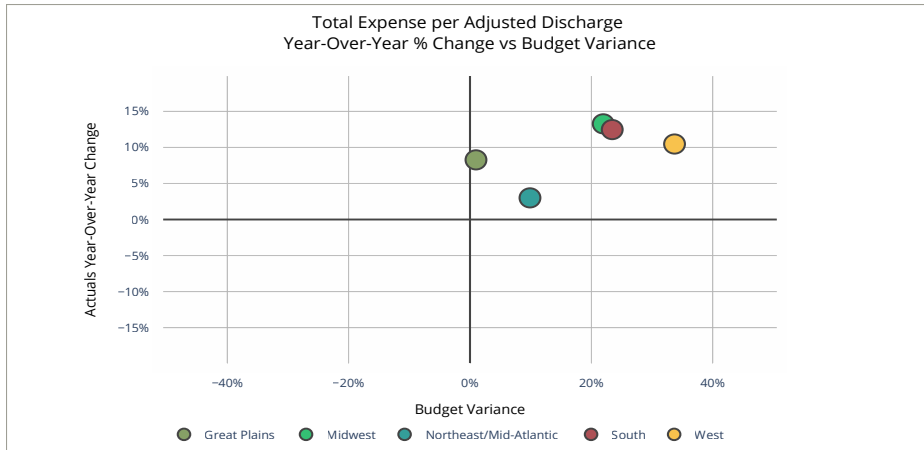
Expenses

National Expense Results

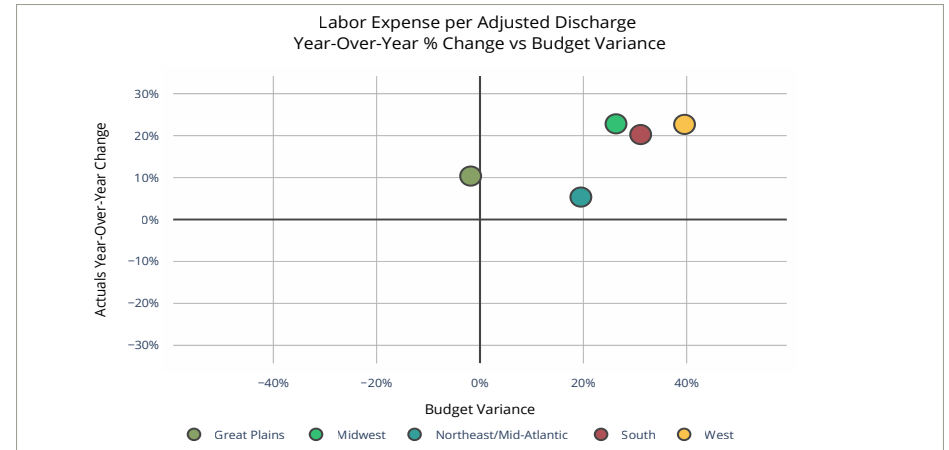
EXPENSES % CHANGE	Budget Variance	Month-Over-Month	Year-Over-Year	Year-Over-Year 2020
Total Expense	0.6%	-3.5%	7.4%	9.3%
Total Labor Expense	3.1%	-1.6%	10.1%	11.8%
Total Non-Labor Expense	-2.6%	-5.7%	6.6%	5.7%
Supply Expense	-0.3%	-7.8%	10.4%	9.2%
Drugs Expense	0.1%	-1.7%	5.7%	21.8%
Purchased Service Expense	-3.2%	-5.8%	1.2%	7.2%
Total Expense per Adjusted Discharge	19.4%	11.6%	10.9%	43.5%
Labor Expense per Adjusted Discharge	22.8%	14.6%	14.2%	57.0%
FTEs per AOB	-2.3%	2.4%	-4.9%	3.0%
Non-Labor Expense per Adjusted Discharge	14.7%	7.8%	5.9%	35.5%
Supply Expense per Adjusted Discharge	16.1%	2.7%	8.2%	34.9%
Drug Expense per Adjusted Discharge	27.5%	7.2%	14.5%	65.3%
Purchased Service Expense per Adjusted Discharge	15.1%	8.6%	7.3%	50.2%

Unless noted, figures are actuals and medians are expressed as percentage change

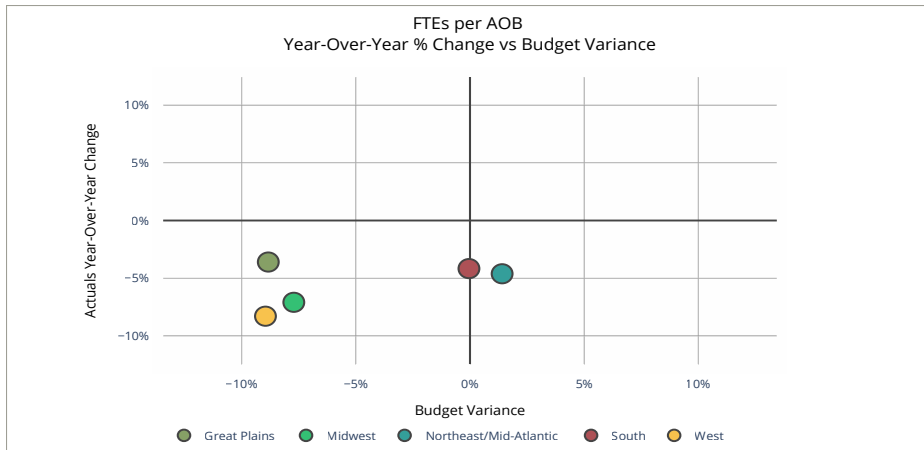
Expense by Region



Source: Kaufman Hall National Hospital Flash Report, February 2022



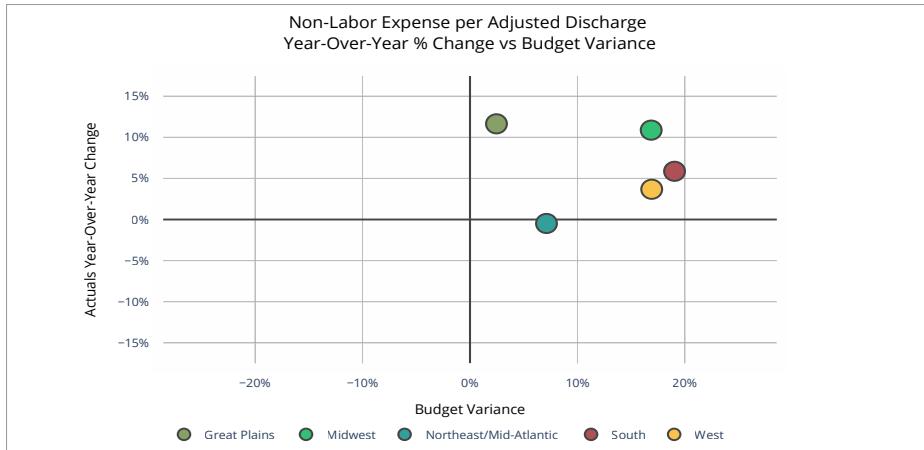
Source: Kaufman Hall National Hospital Flash Report, February 2022



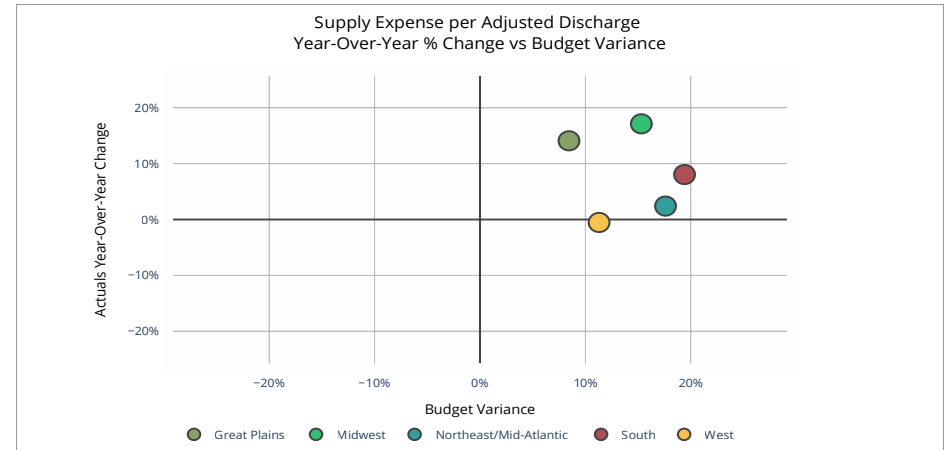
Source: Kaufman Hall National Hospital Flash Report, February 2022

Total Expense and Labor Expense per Adjusted Discharge rose YOY for all regions. The Midwest had the biggest YOY increases for both metrics at 13.3% and 22.8%, respectively. Full-Time Equivalents (FTEs) per Adjusted Occupied Bed (AOB) were down 3.6%-8.3% YOY for all regions.

Expense by Region (continued)

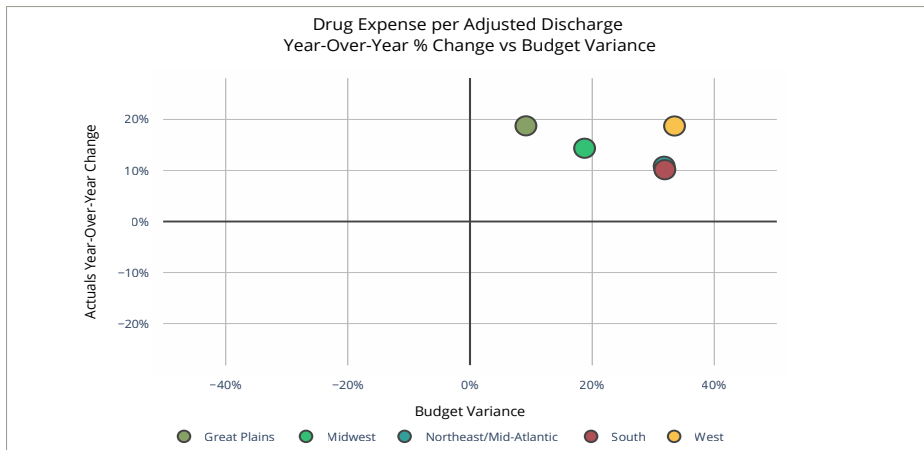


Source: Kaufman Hall National Hospital Flash Report, February 2022

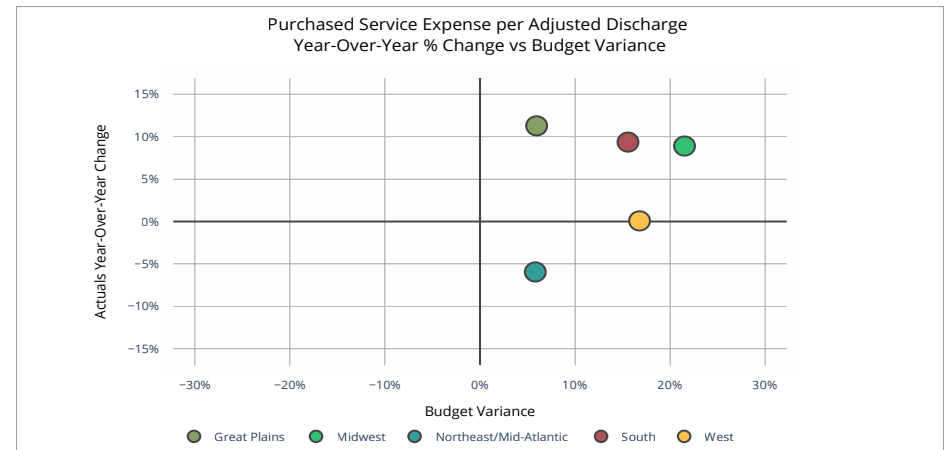


Source: Kaufman Hall National Hospital Flash Report, February 2022

Non-Labor Expense per Adjusted Discharge rose YOY for hospitals across four regions. The Great Plains had the biggest YOY increase at 11.6% and the West had the least increase at 3.7%. Supply Expense per Adjusted Discharge was up YOY for four regions, with the Midwest having the biggest increase at 17.2%.



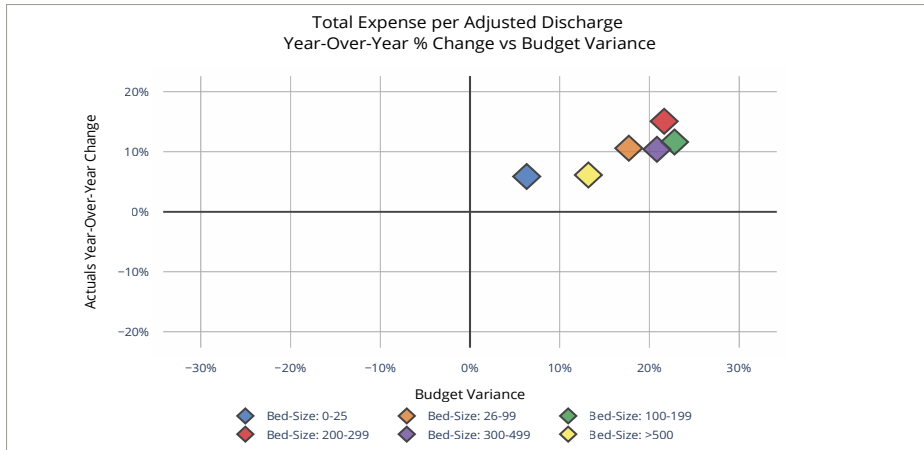
Source: Kaufman Hall National Hospital Flash Report, February 2022



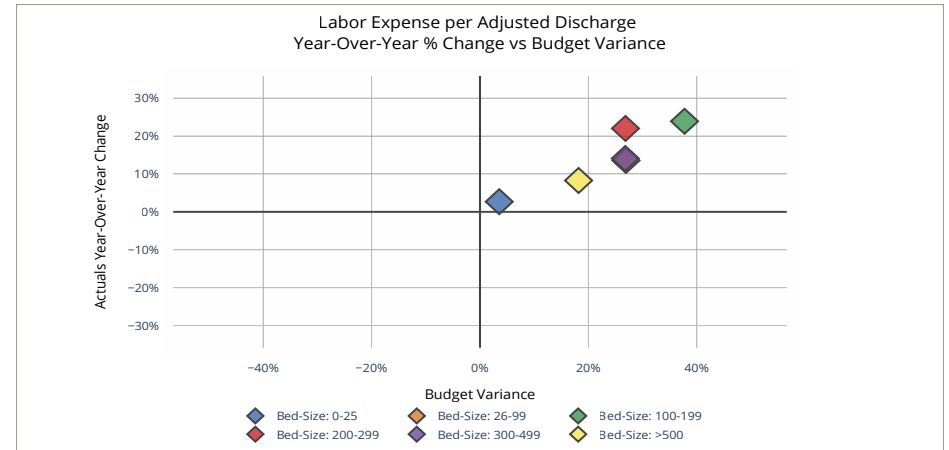
Source: Kaufman Hall National Hospital Flash Report, February 2022

Drug Expense per Adjusted Discharge rose YOY for hospitals in all regions. The Great Plains and West had the biggest YOY increases at 18.7%. Purchased Service Expense per Adjusted Discharge was up YOY for three regions, down 5.9% YOY in the Northeast/Mid-Atlantic, and flat YOY for the West.

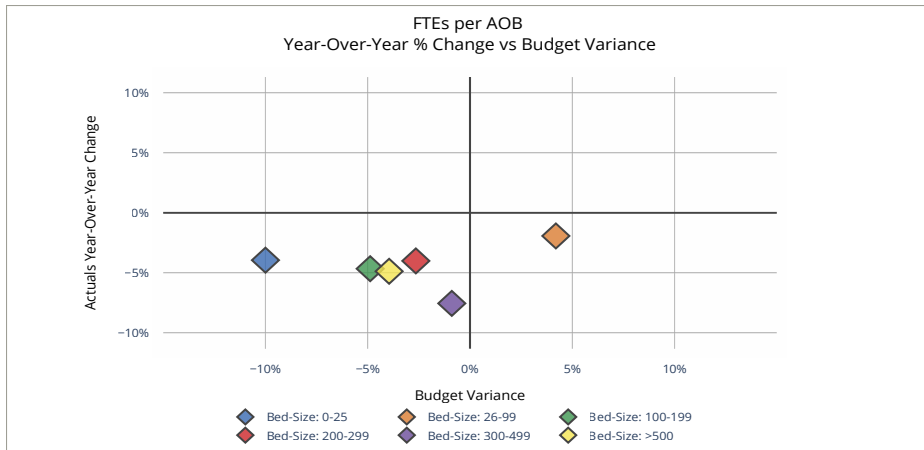
Expense by Bed Size



Source: Kaufman Hall National Hospital Flash Report, February 2022



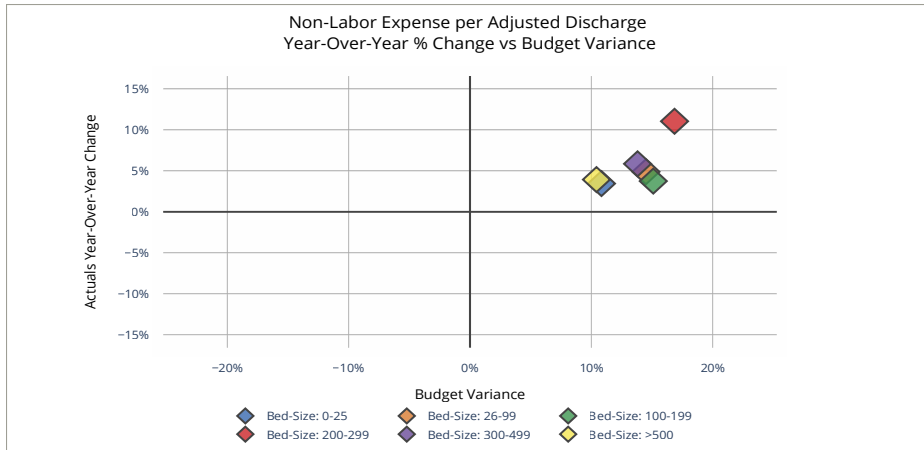
Source: Kaufman Hall National Hospital Flash Report, February 2022



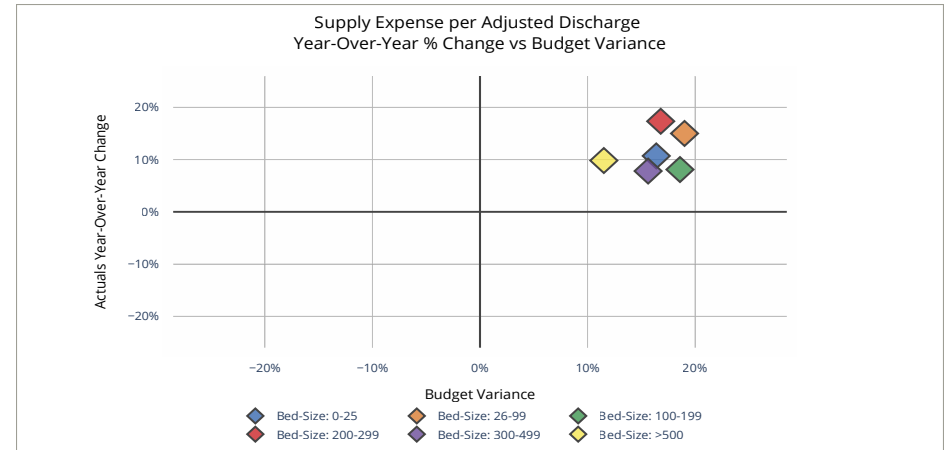
Source: Kaufman Hall National Hospital Flash Report, February 2022

Total Expense and Labor Expense per Adjusted Discharge rose YOY for hospitals of all sizes. Hospitals with 200-299 beds had the biggest YOY increase for Total Expense per Adjusted Discharge at 15.1%. FTEs per AOB were down YOY for all cohorts, with 300-499 bed hospitals having the biggest decline at 7.6%.

Expense by Bed Size (continued)

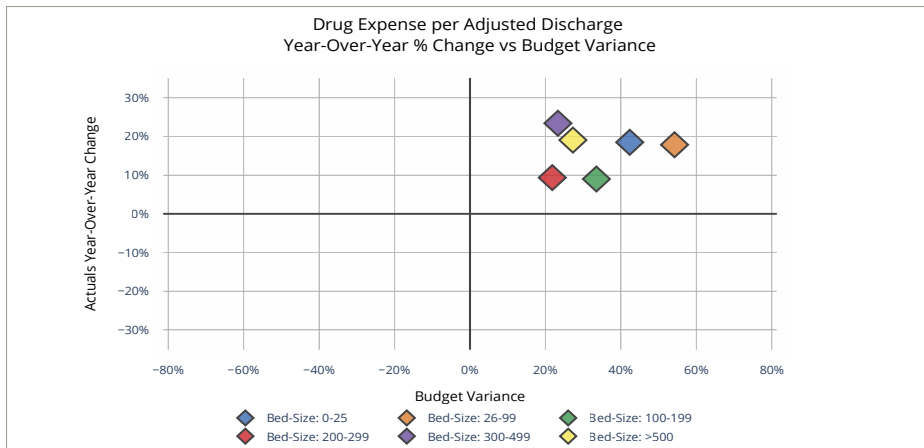


Source: Kaufman Hall National Hospital Flash Report, February 2022

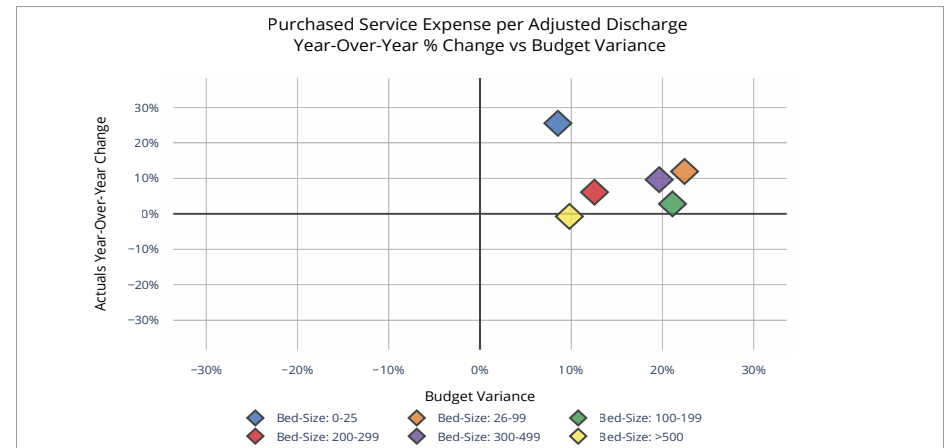


Source: Kaufman Hall National Hospital Flash Report, February 2022

Non-Labor Expense and Supply Expense per Adjusted Discharge increased YOY for all cohorts in January. Mid-sized hospitals with 200-299 beds had the biggest YOY increases for both metrics at 11.1% and 17.3%, respectively.



Source: Kaufman Hall National Hospital Flash Report, February 2022



Source: Kaufman Hall National Hospital Flash Report, February 2022

Drug Expense per Adjusted Discharge was up YOY for all hospitals. Larger hospitals with 300-499 beds had the biggest YOY increase at 23.4%. Purchased Service Expense per Adjusted Discharge increased YOY for five cohorts, with 0-25 bed hospitals having the biggest increase at 25.6%.

Non-Operating

National Non-Operating Results

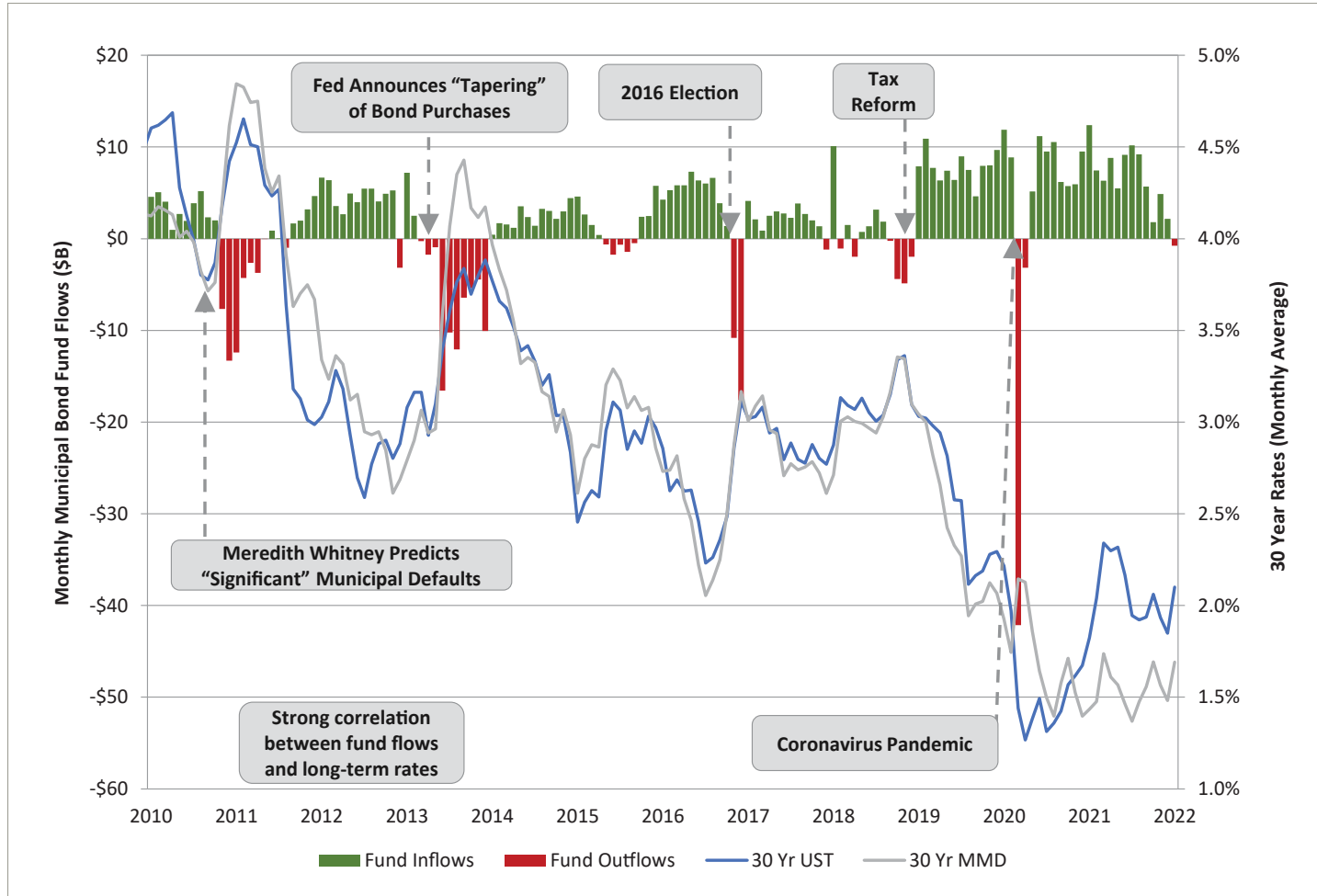
	January 2022	M-o-M Change	Y-o-Y Change
General			
GDP Growth†	6.9%	n/a	n/a
Unemployment Rate	4.0%	+0.1%	-2.4%
Personal Consumption Expenditures (YoY)	4.9%	n/c	+3.3%
Liabilities			
1m LIBOR	0.11%	+1 bp	-1 bp
SIFMA	0.06%	-4 bps	+2 bps
30yr MMD	1.95%	+46 bps	+57 bps
30yr Treasury	2.11%	+20 bps	+28 bps
Assets			
60/40 Asset Allocation*	n/a	-3.7%	+6.9%

† U.S. Bureau of Economic Analysis, Q4 2021 "Advance Estimate"

* 60/40 Asset Allocation assumes 30% S&P 500 Index, 20% MSCI World Index, 10% MSCI Emerging Markets Index, and 40% Barclays U.S. Aggregate Bond Index

Non-Operating Liabilities

Long Term – Monthly Municipal Bond Fund Flows with 30-Year U.S. Treasury and 30-Year MMD



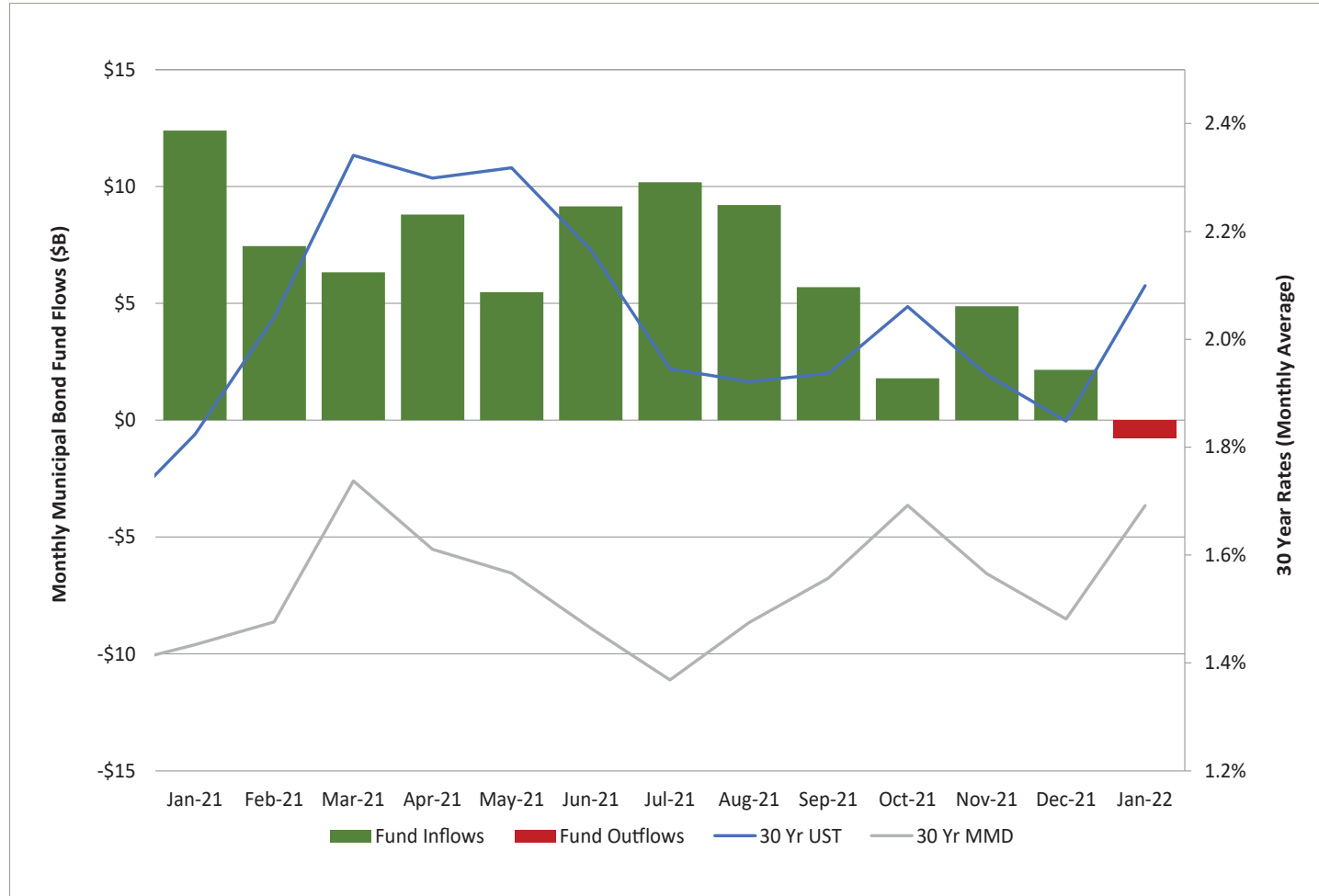
Source: Kaufman Hall National Hospital Flash Report, February 2022

Yields on the 30-year Treasury bond increased 20 basis points (bps) to 2.11% in January. Comparatively, yields on the tax-exempt benchmark 30-year MMD rate rose 46 bps over the course of the month to 1.95%. Demand has started to weaken as municipal bond funds saw \$754 million of outflows in January, the first outflows after 45 consecutive weeks of positive fund flows.

Note: Taxable and tax-exempt debt capital markets—as approximated here by the “30-year U.S. Treasury” and “30-year MMD Index”—are dependent upon macroeconomic conditions, including inflation expectations, GDP growth, and investment opportunities elsewhere in the market. A key measure to track is bond fund flows, particularly in the more supply and demand sensitive tax-exempt market. Fund flows are monies moving into bond funds from new investment and principal and interest payments on existing and maturing holdings. Strong fund flows generally signal that investors have more cash to put to work, a boon to demand. Fund inflows generally are moderate and consistent over time while fund outflows typically are large and sudden, as external events affect investor sentiment, resulting in quick position liquidation which can drive yields up considerably in a short amount of time.

Non-Operating Liabilities (continued)

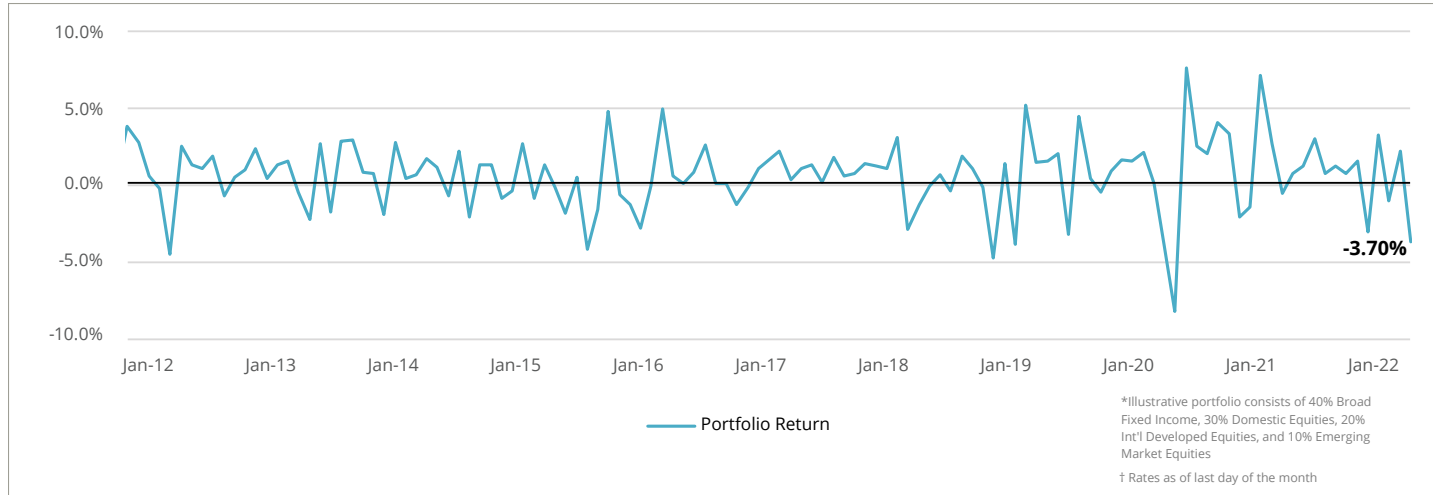
Last Twelve Months – Monthly Municipal Bond Fund Flows with 30-Year U.S. Treasury and 30-Year MMD



Source: Kaufman Hall National Hospital Flash Report, February 2022

Non-Operating Assets

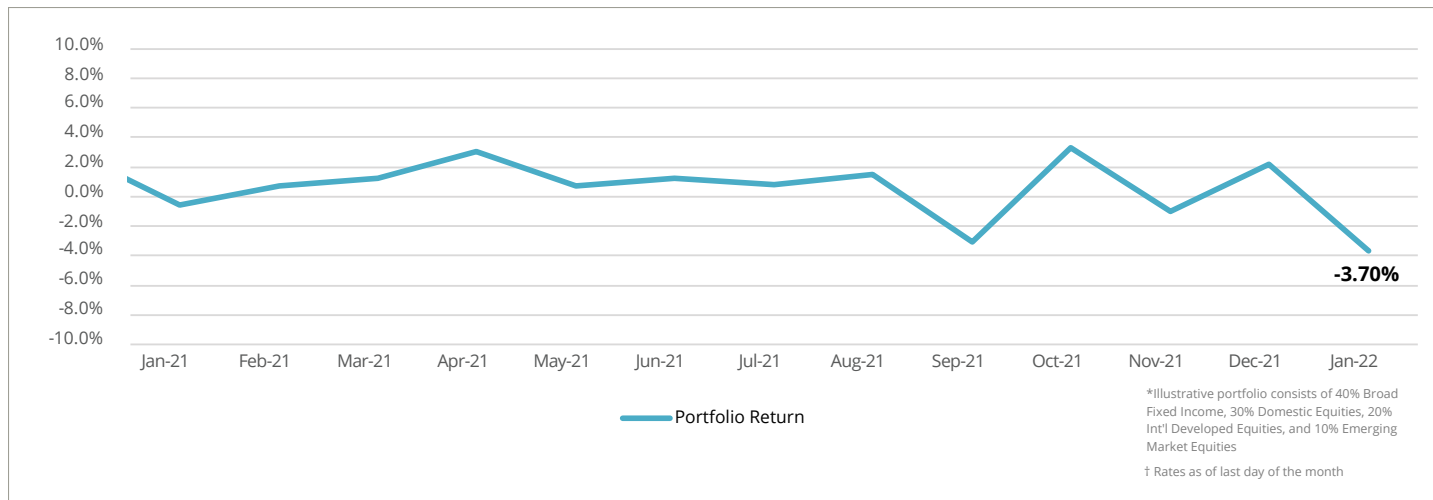
Long Term - Illustrative Investment Portfolio Returns, Month-over-Month Change



Source: Kaufman Hall National Hospital Flash Report, February 2022

The 60/40 blended asset portfolio ended January down 3.7%. The S&P 500 finished 5.3% lower for the month, after increasing 4.4% in December. The MSCI World Index finished down 5.3%. The MSCI Emerging Markets Index finished the month down 1.9%, with the Barclays Aggregate Index ending January 2.2% lower. The 60/40 portfolio was up 6.9% YOY.

Last Twelve Months - Illustrative Investment Portfolio Returns, Month-over-Month Change



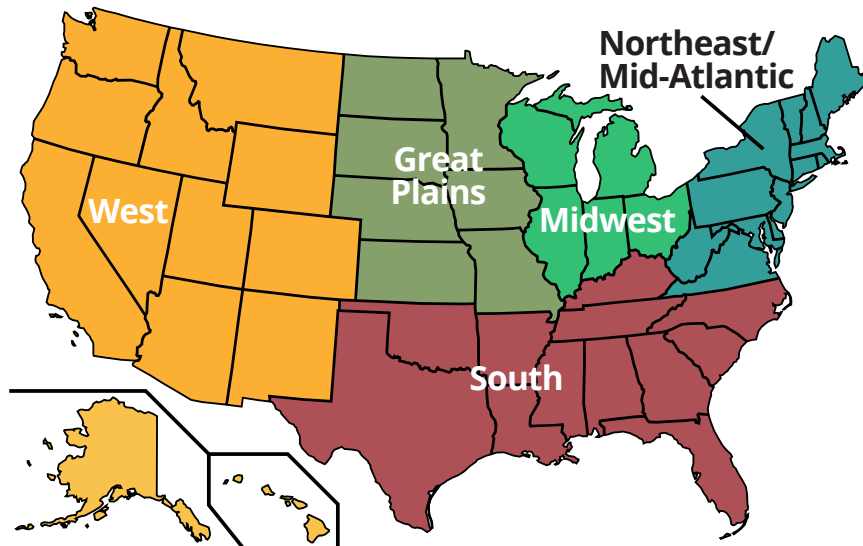
Source: Kaufman Hall National Hospital Flash Report, February 2022

About the Data

The *National Hospital Flash Report* uses both actual and budget data over the last three years, sampled from more than 900 hospitals on a recurring monthly basis from Syntellis Performance Solutions. The sample of hospitals for this report is representative of all hospitals in the United States both geographically and by bed size. Additionally, hospitals of all types are represented, from large academic to small critical access. Advanced statistical techniques are used to standardize data,

identify and handle outliers, and ensure statistical soundness prior to inclusion in the report. While this report presents data in the aggregate, Syntellis Performance Solutions also has real-time data down to individual department, jobcode, paytype, and account levels, which can be customized into peer groups for unparalleled comparisons to drive operational decisions and performance improvement initiatives.

Map of Regions



General Statistical Terms

- **Range:** The difference in value between the maximum and minimum values of a dataset
- **Average (Mean):** The average value of an entire dataset
- **Median:** The value that divides the dataset in half, the middle value
- **1st Quartile:** The value halfway between the smallest number and the median
- **3rd Quartile:** The value halfway between the median and the largest number

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For media requests

Contact Haydn Bush at hbush@kaufmanhall.com

Talk to us

Have a comment on the Kaufman Hall *National Hospital Flash Report*?

We want to hear from you. Please direct all questions or comments to

flashreports@kaufmanhall.com



**EL CAMINO HOSPITAL BOARD OF DIRECTORS
COMMITTEE MEETING MEMO**

To: Finance Committee
From: Stephanie Iljin, Manager of Administration
Date: March 28, 2022
Subject: Report on Board Actions

Purpose: To keep the Committee informed regarding actions taken by the El Camino Hospital and El Camino Healthcare District Boards.

Summary:

1. **Situation:** It is essential to keep the Committees informed about Board activity to provide context for Committee work. The list below is not meant to be exhaustive; still, it includes agenda items the Board voted on that are most likely to be of interest to or pertinent to the work of El Camino Hospital's Board Advisory Committees.
2. **Authority:** This is being brought to the Committees at the request of the Board and the Committees.
3. **Background:** Since the last time we provided this report to the Finance Committee, the Hospital Board has met three times the and District Board has met twice. In addition, since the Board has delegated specific authority to the Executive Compensation Committee, the Compliance and Audit Committee, and the Finance Committee, those approvals are also noted in this report.

Board/Committee	Meeting Date	Actions (Approvals unless otherwise noted)
ECH Board	February 9, 2022	<ul style="list-style-type: none"> - Continuation of Resolution 2021-10 of the Board of Directors Making Findings and Determinations Under AB 361 for Teleconference Meetings - Minutes of the Open Session of the Hospital Board Study Session(12/01/21) - Minutes of the Closed Session of the Hospital Board Study Session(12/01/21) - Minutes of the Open Session of the Hospital Board Meeting (12/08/21) - Minutes of the Closed Session of the Hospital Board Meeting (12/08/21) - Plans, Policies, and Scope of Services - FY21 Period 6 Financials - Mountain View ED & Inpatient On-Call Interventional Radiology Panel Agreement Renewal - Enterprise Radiology Professional Services Agreement Renewal - Medical Staff Report - Board Member Benefits Report - Credentialing & Privileging Report - ByLaws - Investment Advisory Firm RFP

Report on Board Actions
 March 28, 2022

Board/Committee	Meeting Date	Actions (Approvals unless otherwise noted)
	February 23, 2022 (Retreat)	- N/A
	March 9, 2022	<ul style="list-style-type: none"> - Approval of Enterprise Strategy - Minutes of the Closed Session of the Hospital Board (02/09/2022) - Minutes of the Closed Session of the Hospital Board Study Session (02/23/2022) - Credentialing and Privileges Report - Continuation of Resolution 2021-10 of the Board of Directors Making Findings and Determinations Under AB 361 for Teleconference Meetings - Minutes of the Open Session of the Hospital Board (02/09/2022) - Minutes of the Open Session of the Hospital Board Study Session (02/23/2022) - Medical Staff Report - Plans, Policies, and Scope of Services
ECHD Board	January 25, 2022	<ul style="list-style-type: none"> - Continuation of Resolution 2021-10 of the Board of Directors Making Findings and Determinations Under AB 361 for Teleconference Meetings - Community Benefit Spotlight: Resolution 2022-01 - ECHD FY22 YTD Financial Approval - El Camino Healthcare District Board Members Transition to W-2 Employees and Worker's Compensation Insurance: Resolution 2022-03 - FY22 El Camino Hospital Board Member Election Ad Hoc Committee Recommendation - FY22 El Camino Healthcare District Policy ByLaw Review AdHoc Committee Recommendations - Minutes of the Closed Session of the District Board Meeting (12/01/21)
	March 15, 2022	<ul style="list-style-type: none"> - Approval of Enterprise Strategy - Continuation of Resolution 2021-10 of the Board of Directors Making Findings and Determinations Under AB 361 for Teleconference Meetings - Minutes of the Open Session of the District Board Meeting (12/01/21) - Minutes of the Open Session of the District Board Meeting (01/25/22) - El Camino Healthcare District Board Health and Safety Code: Resolution 2022-02 – Public Hearing - District Board Mission Statement Ad Hoc Committee Formation - ECHD FY22 YTD Financial Approval - Minutes of the Closed Session of the District Board Meeting (01/25/22)

Report on Board Actions
 March 28, 2022

Board/Committee	Meeting Date	Actions (Approvals unless otherwise noted)
Executive Compensation Committee	March 3, 2022	<ul style="list-style-type: none"> - Minutes of the Open Session of the ECC Meeting (11/4/2021) - Minutes of the Closed Session of the ECC Meeting (11/04/2021) - Proposed FY22 Individuals Goals of Chief Quality Officer
Compliance Committee	January 27, 2022	<ul style="list-style-type: none"> - Minutes of the Open Session of the CAC Meeting (11/18/2021) - Minutes of the Closed Session of the CAC Meeting (11/18/2021) - KPI Scorecard and Trends - Activity Log November 2021 - Activity Log December 2021 - Internal Audit Work Plan - Internal Audit Follow Up Table - Summary Physician Financial Arrangements
Finance Committee	N/A	

List of Attachments: None.

Suggested Committee Discussion Questions: None.

PRELIMINARY DRAFT
FY2023 COMMITTEE GOALS
 Finance Committee

PURPOSE

The purpose of the Finance Committee (the “Committee”) is to provide oversight, information sharing, and financial reviews related to budgeting, capital budgeting, long-range financial planning and forecasting, and monthly financial reporting for the El Camino Hospital (ECH) Hospital Board of Directors (“Board”). In carrying out its review, advisory, and oversight responsibilities, the Finance Committee shall remain flexible in order to best define financial strategies that react to changing conditions.

STAFF: **Carlos Bohorquez**, Chief Financial Officer (Executive Sponsor)

The CFO shall serve as the primary staff to support the Committee and is responsible for drafting the Committee meeting agenda for the Committee Chair’s consideration. Additional members of the Executive Team may participate in the meetings upon the recommendation of the Executive Sponsor and at the discretion of the Committee Chair.

GOALS	TIMELINE	METRICS
1. Summary of Physician Financial Agreements	Q3	March 2023
2. Review Progress on Opportunities / Risks identified by Management for FY2023 and Managed Care Update	Q2, Q3	Progress on Opportunities / Risks (November 2022), Managed Care update (January 2023)
3. Review strategy, goals, and performance of business affiliates and service lines: 1) Joint Venture – Satellite Healthcare, 2) Orthopedics, 3) Cardiology, 4) Joint Venture – Pathways, 5) ECHMN, 6) CONCERN, 7) Hospital Community Benefits Program, 8) Foundation Performance to Target and 3-5 year strategic plan	Q1	ECHMN (September 2023)
	Q2	Service Line Overview: TBD (November 2021)
	Q3	Service Line Overview: TBD (January -2023), Foundation (January 2023), Hospital Community Benefits Program (March 2023), CONCERN (2023)
	Q4	ECHMN (April 2023), Joint Venture – Pathways (May 2023)
4. Review and evaluate ongoing customer service/patient experience tactics / metrics and use of AI to improve the process and customer experience for the Revenue Cycle	Q3	Monitor customer service and patient satisfaction metrics (May 2023)

SUBMITTED BY: **Chair:** John Zoglin | **Executive Sponsor:** Carlos Bohorquez, CFO



Finance Committee Meetings
Proposed FY2023 Dates

RECOMMENDED FC DATE MONDAYS	CORRESPONDING HOSPITAL BOARD DATE
Monday, August 29, 2022	Wednesday, September xx, 2022
Tuesday, September 27, 2022 <i>*(Sept 26 – Rosh Hashanah)</i>	Wednesday, November xx, 2022
Monday, November 21, 2022	Wednesday, December xx, 2022
Monday, January 30, 2023 (Plus Joint with IC)	Wednesday, March xx, 2023 <i>*(February xx, 2023 – Retreat)</i>
Monday, March 27, 2023	Wednesday, April xx, 2023
Monday, April 24, 2022	Wednesday, May xx, 2023
Monday, May 22, 2022 <i>*(May 29 – Memorial Day)</i>	Wednesday, June xx, 2023



El Camino Health

Summary of Financial Operations

Fiscal Year 2022 – Period 8

7/1/2021 to 02/28/2022

Executive Summary - Overall Commentary for Period 8

- Continued solid financial results for Period 8:
 - Both Inpatient and Outpatient activity/charges were above budgeted levels and above last year's performance
 - Continued strong rebound in Outpatient activity and emergency department visits
 - When adjusted for volume, overall costs are below target levels and continue to be managed effectively
- Total gross charges were favorable to budget by \$40.5M / 11.2% and \$87.9M / 27.9% higher than the same period last year.
 - Outpatient charges were favorable by \$19.5M / 10.1% while Inpatient charges were favorable by \$21.0M / 12.9%
- Net patient revenue was favorable to budget by \$14.2M / 15.5% and \$20.7M / 24.3% higher than the same period last year.
- Operating margin was favorable to budget by \$3.9M / 63.0% and \$6.9M / 210.2% higher than the same period last year.
- Operating EBIDA was favorable to budget by \$4.7M / 35.5% and \$7.3M / 69.0% better than the same period last year.
- Net income was unfavorable to budget by \$35.1M / (279.6%) and \$40.2M / (227.8%) lower than the same period last year. This is attributed the instability in the capital markets, which has resulted in the lower than expected investment income.

Operational / Financial Results: Period 8 – February 2022 (as of 02/28/2022)

(\$ thousands)		Current Year	Budget	Variance to Budget	Performance to Budget	Prior Year	Variance to Prior Year	Variance to Prior Year	Moody's	S&P	Performance to Rating Agency Medians
									'A1'	'AA'	
Activity / Volume	ADC	300	264	36	13.8%	229	71	31.2%	---	---	---
	Total Acute Discharges	1,758	1,568	190	12.1%	1,431	327	22.9%	---	---	---
	Adjusted Discharges	3,291	2,901	390	13.4%	2,713	577	21.3%	---	---	---
	Emergency Room Visits	4,770	4,248	522	12.3%	3,663	1,107	30.2%	---	---	---
	OP Procedural Cases	11,933	9,448	2,485	26.3%	13,212	(1,279)	(9.7%)	---	---	---
	Gross Charges (\$)	402,507	362,006	40,502	11.2%	314,620	87,887	27.9%	---	---	---
Operations	Total FTEs	3,185	3,121	64	2.1%	2,868	317	11.1%	---	---	---
	Productive Hrs. / APD	29.0	30.9	(1.9)	(6.1%)	33.6	(4.5)	(13.4%)	---	---	---
	Cost Per CMI AD	17,041	17,952	(911)	(5.1%)	17,528	(486)	(2.8%)	---	---	---
	Net Days in A/R	53.5	49.0	4.5	9.1%	51.3	2.1	4.2%	47.7	49.7	---
Financial Performance	Net Patient Revenue (\$)	105,960	91,762	14,197	15.5%	85,273	20,686	24.3%	138,547	82,105	---
	Total Operating Revenue (\$)	109,273	95,241	14,033	14.7%	88,625	20,648	23.3%	152,743	109,602	---
	Operating Margin (\$)	10,189	6,251	3,938	63.0%	3,285	6,905	210.2%	1,915	3,836	---
	Operating EBIDA (\$)	17,881	13,195	4,686	35.5%	10,580	7,301	69.0%	11,188	10,741	---
	Net Income (\$)	(22,531)	12,544	(35,074)	(279.6%)	17,633	(40,164)	(227.8%)	8,124	7,343	---
	Operating Margin (%)	9.3%	6.6%	2.8%	42.1%	3.7%	5.6%	151.6%	1.9%	3.5%	---
	Operating EBIDA (%)	16.4%	13.9%	2.5%	18.1%	11.9%	4.4%	37.1%	8.3%	9.8%	---
	DCOH (days)	303	325	(22)	(6.8%)	346	(43)	(12.4%)	306	355	---

Moody's Medians: Not-for-profit and public healthcare annual report; September 9, 2021. Dollar amounts have been adjusted to reflect monthly averages.

S&P Medians: U.S. Not-For-Profit Health Care Stand-Alone Hospital Median Financial Ratios; August 30, 2021. Dollar amounts have been adjusted to reflect monthly averages.

DCOH total includes cash, short-term and long-term investments.

Operational / Financial Results: YTD FY2022 (as of 02/28/2022)

(\$ thousands)		Current Year	Budget	Variance to Budget	Performance to Budget	Prior Year	Variance to Prior Year	Variance to Prior Year	Moody's	S&P	Performance to Rating Agency Medians
									'A1'	'AA'	
Activity / Volume	ADC	271	252	19	7.5%	242	29	11.9%	---	---	---
	Total Acute Discharges	13,958	13,285	673	5.1%	12,410	1,548	12.5%	---	---	---
	Adjusted Discharges	27,203	24,582	2,621	10.7%	23,002	4,202	18.3%	---	---	---
	Emergency Room Visits	44,147	34,524	9,623	27.9%	32,644	11,503	35.2%	---	---	---
	OP Procedural Cases	102,330	81,371	20,959	25.8%	103,812	(1,482)	(1.4%)	---	---	---
	Gross Charges (\$)	3,331,831	3,003,435	328,396	10.9%	2,756,191	575,640	20.9%	---	---	---
Operations	Total FTEs	3,050	3,061	(11)	(0.4%)	2,811	239	8.5%	---	---	---
	Productive Hrs. / APD	28.8	31.7	(2.9)	(9.1%)	31.4	(2.6)	(8.2%)	---	---	---
	Cost Per CMI AD	16,559	17,952	(1,393)	(7.8%)	17,295	(736)	(4.3%)	---	---	---
	Net Days in A/R	53.5	49.0	4.5	9.1%	51.3	2.1	4.2%	47.7	49.7	---
Financial Performance	Net Patient Revenue (\$)	853,292	759,023	94,269	12.4%	708,057	145,235	20.5%	1,108,378	656,837	---
	Total Operating Revenue (\$)	882,063	789,013	93,050	11.8%	739,167	142,896	19.3%	1,215,275	876,817	---
	Operating Margin (\$)	110,333	52,935	57,398	108.4%	39,107	71,226	182.1%	15,319	30,689	---
	Operating EBIDA (\$)	170,198	109,171	61,027	55.9%	95,900	74,298	77.5%	89,507	85,928	---
	Net Income (\$)	58,627	113,385	(54,758)	(48.3%)	195,122	(136,495)	(70.0%)	64,995	58,747	---
	Operating Margin (%)	12.5%	6.7%	5.8%	86.4%	5.3%	7.2%	136.4%	1.9%	3.5%	---
	Operating EBIDA (%)	19.3%	13.8%	5.5%	39.5%	13.0%	6.3%	48.7%	8.3%	9.8%	---
	DCOH (days)	303	325	(22)	(6.8%)	346	(43)	(12.4%)	306	355	---

Moody's Medians: Not-for-profit and public healthcare annual report; September 9, 2021.

S&P Medians: U.S. Not-For-Profit Health Care Stand-Alone Hospital Median Financial Ratios; August 30, 2021

DCOH total includes cash, short-term and long-term investments.

Approved Capital vs. Expenditures (\$ Millions)

Approved Capital Total		➔	Capital Expenditures to Date (as of 2/28/2022)	
Approved Projects	\$253.1M		Approved Projects	\$78.3M
FY2022 Routine Capital	<u>20.0M</u>		FY2022 Routine Capital	<u>14.6M</u>
Total Approved	\$273.1M		Total Expenditures	\$92.9M

- Of the total capital approved, \$92.9M has been deployed with **\$180.2M remaining.**
- The \$92.9M represents a **capex ratio of 1.91x.** Rating agency medians for comparable non-profit health systems is 1.2x-1.3x.

Approval Date	Approving Body	Approved Project	Total Approved (\$M)	Total Expenditures (\$M)	Estimated Completion
Oct-20	ECHB	Old Tower Demolition	\$24.90	\$5.78	Q1/Q2 2023
Jul-20	FC	Sterile Processing Equipment	\$1.85	\$1.77	Completed
Aug-20	ECHB	Radiation Oncology Replacement	\$10.30	\$9.12	Apr-22
Jan-21	FC	Real Estate Transaction	\$1.88	\$1.88	Completed
Jan-21	FC	CPWC Relocation	\$5.00	\$2.02	Q1 2022
Feb-21	ECHB	Women's Hospital Renovation	\$149.00	\$30.63	Jul-24
May-21	FC	MV Wireless / DAS Network	\$3.30	\$2.63	Apr-22
Aug-21	ECHB	MV Cath Lab Replacement Project	\$32.50	\$6.48	Q1 2024
Aug-21	ECHB	Pyxis MedStation Replacement	\$6.64	\$0.25	Jun-22
Aug-21	FC	ECHMN Clinic Relocation	\$3.10	\$3.10	Completed
Sep-21	ECHB	Real Estate Transaction	\$14.65	\$14.65	Completed
Sub-Total FC / Board Approved Projects			\$253.12	\$78.32	In-Process
FY2022 Routine Capital			\$20.00	\$14.60	In-Process

Key Statistics: Period 8 and YTD (as of 02/28/2022)

Key Metrics	Month to Date			Variance (%)		Year to Date			Variance (%)	
	PY	CY	Budget	CY vs PY	CY vs Budget	PY	CY	Budget	CY vs PY	CY vs Budget
ADC	229	300	264	31.2%	13.8%	242	271	252	11.9%	7.5%
Utilization MV	60%	80%	70%	32.8%	14.1%	63%	72%	67%	13.9%	7.6%
Utilization LG	29%	36%	32%	24.2%	12.3%	32%	33%	31%	4.1%	7.1%
Utilization Combined	50%	66%	58%	31.2%	13.8%	53%	60%	56%	12.1%	7.5%
Adjusted Discharges	2,713	3,291	2,901	21.3%	13.4%	23,002	27,203	24,582	18.3%	10.7%
Total Discharges (Exc NB)	1,431	1,758	1,568	22.9%	12.1%	12,410	13,958	13,285	12.5%	5.1%
Total Discharges	1,706	2,149	1,886	26.0%	14.0%	14,995	17,141	16,288	14.3%	5.2%
Inpatient Case Activity										
MS Discharges	1,010	1,182	1,086	17.0%	8.9%	8,480	9,340	8,833	10.1%	5.7%
Deliveries	293	425	333	45.1%	27.8%	2,761	3,430	3,167	24.2%	8.3%
BHS	109	114	106	4.6%	7.1%	833	881	935	5.8%	(5.8%)
Rehab	20	36	43	80.0%	(16.3%)	342	293	350	(14.3%)	(16.3%)
Outpatient Case Activity										
Total Outpatient Cases	15,857	15,523	12,587	-2.1%	23.3%	127,914	136,489	107,060	6.7%	27.5%
ED	2,645	3,590	3,139	35.7%	14.4%	24,102	34,159	25,689	41.7%	33.0%
OP Surg	442	541	423	22.4%	27.7%	4,013	4,656	3,579	16.0%	30.1%
Endo	191	248	201	29.8%	23.4%	1,635	1,865	1,686	14.1%	10.6%
Interventional	153	199	171	30.1%	16.4%	1,340	1,556	1,382	16.1%	12.6%
All Other	12,426	10,945	8,652	(11.9%)	26.5%	96,824	94,253	74,724	(2.7%)	26.1%
Hospital Payor Mix										
Medicare	47.1%	49.2%	48.5%	4.4%	1.4%	48.3%	47.6%	47.7%	(1.4%)	(0.2%)
Medi-Cal	8.6%	7.8%	8.0%	(8.5%)	(1.6%)	8.3%	8.2%	7.9%	(0.6%)	3.3%
Commercial	42.0%	40.7%	41.4%	(3.2%)	(1.7%)	41.2%	42.0%	42.3%	2.0%	(0.5%)
Other	2.3%	2.3%	2.1%	(0.6%)	6.3%	2.2%	2.2%	2.1%	(3.0%)	3.2%

Enterprise Income Statement: Rolling 16 Monthly Trend (\$000s)

	FY2021								FY2022								YTD FY2022	Rolling 16 Monthly Average
	Period 5 Nov-20	Period 6 Dec-20	Period 7 Jan-21	Period 8 Feb-21	Period 9 Mar-21	Period 10 Apr-21	Period 11 May-21	Period 12 Jun-21	Period 1 Jul-21	Period 2 Aug-21	Period 3 Sep-21	Period 4 Oct-21	Period 5 Nov-21	Period 6 Dec-21	Period 7 Jan-22	Period 8 Feb-22		
Operating Revenues:																		
Net Patient Revenue	88,597	92,289	89,795	85,273	97,171	94,903	95,542	112,238	101,774	104,482	104,776	106,632	107,257	113,033	109,378	105,960	853,292	100,569
Other Operating Revenue	3,234	3,079	4,427	3,352	3,537	3,692	5,385	4,706	3,116	3,746	3,479	4,506	3,600	3,648	3,362	3,313	28,770	3,761
Total Operating Revenue	91,831	95,368	94,222	88,625	100,708	98,595	100,927	116,945	104,889	108,228	108,256	111,138	110,857	116,681	112,741	109,273	882,063	104,330
Operating Expenses:																		
Salaries, Wages and Benefits	47,222	48,774	53,636	48,592	52,025	50,616	48,138	48,101	53,000	53,940	53,629	56,001	53,709	55,947	59,347	55,256	440,829	52,371
Supplies	13,641	14,519	13,888	13,587	15,421	14,256	15,241	15,156	15,109	14,569	14,862	14,502	14,941	16,060	16,051	15,296	121,389	14,819
Fees & Purchased Services	14,264	14,035	15,825	14,770	15,139	15,761	15,923	19,915	14,390	14,182	14,800	14,760	15,210	14,955	14,291	16,550	119,137	15,298
Other Operating Expenses	3,512	4,100	3,819	1,097	3,536	3,662	3,496	6,002	3,598	3,577	3,676	3,586	3,842	4,112	3,829	4,290	30,509	3,733
Interest	1,428	1,428	1,428	1,392	1,399	1,400	1,400	1,367	1,419	1,418	1,418	1,418	1,420	1,419	1,421	1,380	11,313	1,410
Depreciation	6,068	5,591	5,689	5,903	4,931	5,606	4,808	5,740	4,727	7,157	5,902	5,798	6,440	6,173	6,046	6,311	48,553	5,805
Total Operating Expenses	86,136	88,446	94,284	85,341	92,450	91,301	89,006	96,281	92,242	94,844	94,286	96,065	95,561	98,665	100,984	99,084	771,730	93,436
Operating Margin	5,695	6,922	(62)	3,285	8,258	7,294	11,921	20,664	12,648	13,384	13,970	15,073	15,297	18,016	11,756	10,189	110,333	10,894
Non-Operating Income	64,968	57,357	39	14,349	18,965	29,151	16,666	20,041	(4,099)	14,319	(18,378)	24,361	(21,232)	17,581	(31,539)	(32,720)	(51,706)	10,614
Net Margin	70,663	64,279	(23)	17,633	27,223	36,445	28,588	40,705	8,549	27,703	(4,408)	39,435	(5,935)	35,596	(19,783)	(22,531)	58,627	21,509
Operating EBIDA	13,192	13,940	7,055	10,580	14,588	14,301	18,130	27,771	18,793	21,959	21,289	22,290	23,156	25,608	19,223	17,881	170,198	18,110
Operating Margin (%)	6.2%	7.3%	-0.1%	3.7%	8.2%	7.4%	11.8%	17.7%	12.1%	12.4%	12.9%	13.6%	13.8%	15.4%	10.4%	9.3%	12.5%	10.4%
Operating EBIDA Margin (%)	14.4%	14.6%	7.5%	11.9%	14.5%	14.5%	18.0%	23.7%	17.9%	20.3%	19.7%	20.1%	20.9%	21.9%	17.1%	16.4%	19.3%	17.4%

Financial Overview: Period 8 – February 2022

Period ending 2/28/2022

Financial Performance

- February operating margin was \$10.2M compared to a budget of \$6.3M, resulting in a favorable variance of \$3.9M
- February volumes and revenues continue to be strong as demonstrated by:
 - Favorable variance of gross charges of \$40.5M was driven by Inpatient and Outpatient activity:
 - Inpatient gross charges: Favorable to budget by \$19.5M / 10.1% variance primarily driven by medical surgical and maternal/child inpatient services, NICU (neonatal intensive care), emergency services, and corresponding ancillary services
 - Outpatient gross charges: Favorable to budget by \$21.0M / 12.9% variance primarily driven by outpatient surgery, cath lab, emergency services, radiation oncology, and corresponding ancillary services
 - Operating Expenses were unfavorable to budget by \$10.1M / 11.3% driven by the level of patient activity
 - SWB were unfavorable by \$5.2M / 10.4%
 - Supplies were unfavorable by \$1.5M / 10.5%
 - Supply expenses attributed to Covid-19 were \$742K in February and \$6.2M YTD
 - All other discretionary non-volume driven expenses were unfavorable to budget by \$3.4M
- Non Operating Income includes:
 - Unfavorable variance in non-operating revenue is due to unrealized losses on investments
- Unfavorable market performance drove unrealized losses for the investment portfolio, which resulted in negative net income for period 8

Financial Overview: Period 8 – February 2022 (cont.)

Period ending 2/28/2022

Financial Performance

Hospital Operations:

- Adjusted Discharges (AD): Favorable to budget by 390 ADs / 3.4% and above prior year by 578 ADs / 21.3%:
 - Mountain View: Favorable to budget by 254 ADs / 10.8% and above prior year by 409 ADs / 19.5%
 - Los Gatos: Favorable to budget by 136 ADs / 20.6% and above prior year by 169 ADs / 27.0%
- Operating Expense Per CMI Adjusted Discharge: \$17,041 which is 5.1% favorable to budget
Note: Excludes depreciation and interest

El Camino Health Medical Network (ECHMN) Operations:

- February's total visits of 14,712 reflect a decrease of 10.6% over the prior month of 16,462. February's visit per day of 755 reflect a decrease of 3.8% over the prior month of 785.
- February's total visits were unfavorable to budget by 1.8%. February's YTD total visits were unfavorable to budget by 2.6%. The YTD budget variance is related to the loss of several OB/GYN providers couples months ago.
- Net Income for the month of February was unfavorable to budget by \$113K or 4.0% and the YTD was unfavorable by \$84K or 0.4%. However compared to last year, Feb FY22's Net Income was favorable by \$2.04M or 8.4%

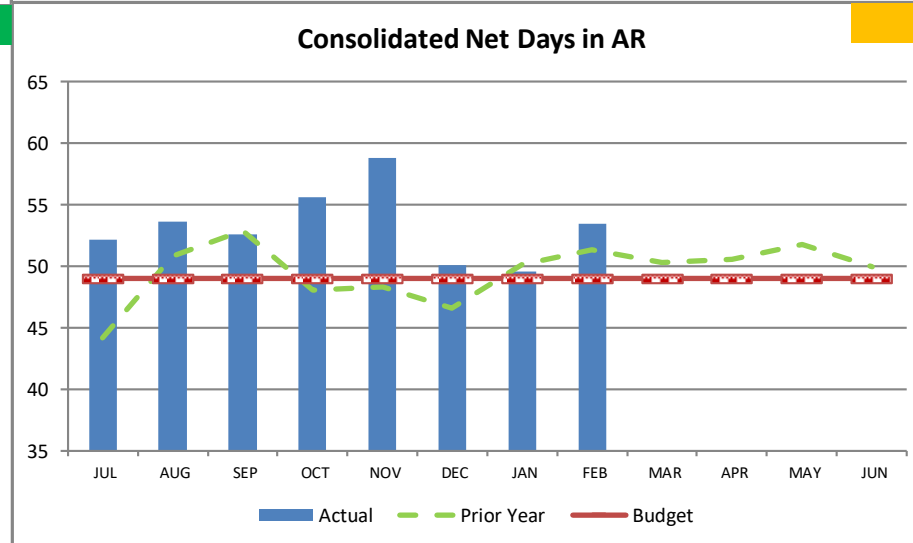
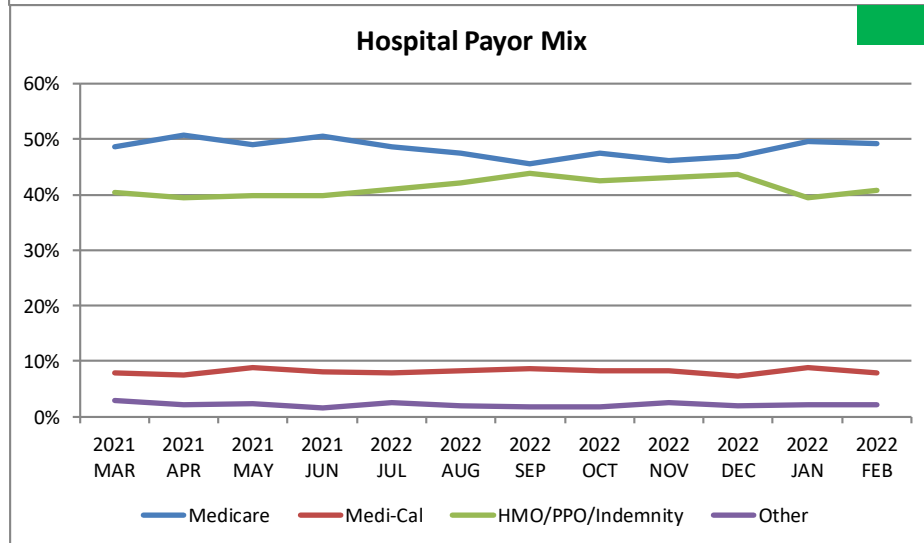
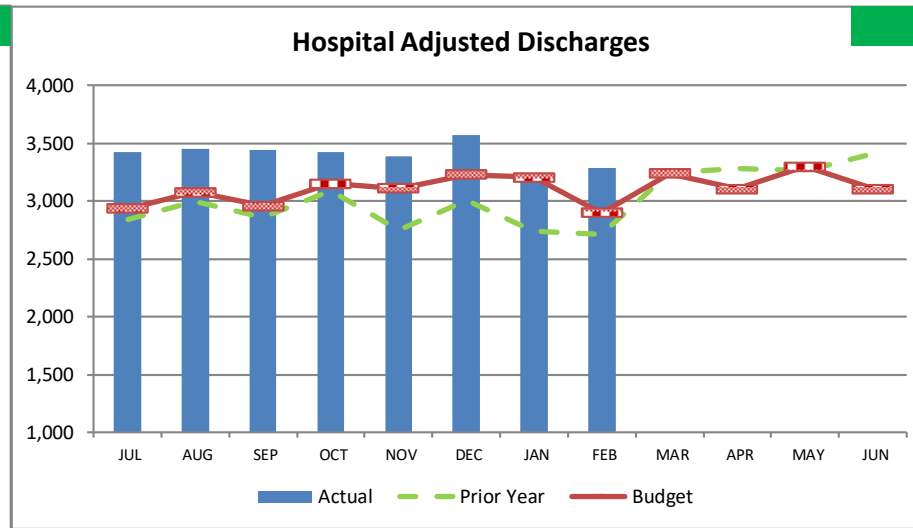
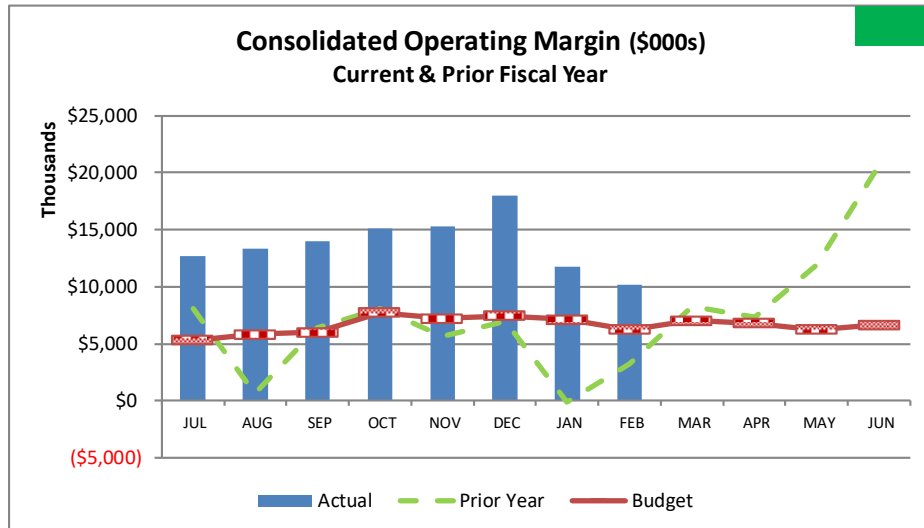
Financial Overview: YTD FY2022 (as of 2/28/2022)

Consolidated Financial Performance

- YTD FY2022 operating margin is \$110.3M compared to the budget of \$52.9M
 - Operating expense is \$771.7M / 4.8% unfavorable to budget
 - Operating expense per CMI adjusted discharge: \$16,559 which is 7.8% favorable to budget. This continues to demonstrate effective management of variable expenses and the impact of initiatives implemented by management
- Note: Excludes depreciation and interest expense**
- Year-over-year operating margin is \$71.2M higher than the same period last year, which is primarily due to the strength in volumes as exhibited by year over year growth in:
 - Outpatient Surgeries: +16.0% primarily driven by Heart/Vascular, Orthopedic, and Spine surgery activity
 - Emergency Room Visits: 40.6%
 - Deliveries - Maternal Child services: 24.5%
 - Year-over-year net margin is \$136.5M lower than the same period last year, which is attributed to lower investment income

APPENDIX

YTD FY2022 Financial KPIs – Monthly Trends



Investment Scorecard (as of 12/31/2021)

Key Performance Indicator	Status	El Camino	Benchmark	El Camino	Benchmark	El Camino	Benchmark	FY22 Budget	Expectation Per Asset Allocation
Investment Performance		CY 4Q 2021 / FY 2Q 2022		Fiscal Year-to-Date 2022		9y 2m Since Inception (annualized)		FY 2022	2019
Surplus cash balance*		\$1,481.1	--	--	--	--	--	--	--
Surplus cash return	Green	1.6%	2.4%	1.7%	2.3%	6.7%	6.6%	4.0%	5.6%
Cash balance plan balance (millions)		\$363.1	--	--	--	--	--	--	--
Cash balance plan return	Green	2.1%	3.2%	2.5%	3.1%	9.0%	8.2%	6.0%	6.0%
403(b) plan balance (millions)		\$768.1	--	--	--	--	--	--	--
Risk vs. Return		3-year			9y 2m Since Inception (annualized)			2019	
Surplus cash Sharpe ratio	Green	1.21	1.28	--	--	0.98	1.00	--	0.34
Net of fee return	Green	11.4%	11.6%	--	--	6.7%	6.6%	--	5.6%
Standard deviation	Green	8.3%	8.0%	--	--	6.1%	5.9%	--	8.7%
Cash balance Sharpe ratio	Green	1.22	1.25	--	--	1.05	1.04	--	0.32
Net of fee return	Green	14.3%	13.4%	--	--	9.0%	8.2%	--	6.0%
Standard deviation	Green	10.6%	9.5%	--	--	7.9%	7.2%	--	10.3%
Asset Allocation		CY 4Q 2021 / FY 2Q 2022							
Surplus cash absolute variances to target	Green	5.3%	< 10% Green < 20% Yellow	--	--	--	--	--	--
Cash balance absolute variances to target	Green	6.9%	< 10% Green < 20% Yellow	--	--	--	--	--	--
Manager Compliance		CY 4Q 2021 / FY 2Q 2022							
Surplus cash manager flags	Green	18	< 24 Green < 30 Yellow	--	--	--	--	--	--
Cash balance plan manager flags	Green	22	< 27 Green < 34 Yellow	--	--	--	--	--	--

*Excludes debt reserve funds, District assets (~\$42 mm), and balance sheet cash not in investable portfolio (~\$173 mm). Includes Foundation (~\$43 mm) and Concern (~\$15 mm) assets.



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Period 8 and YTD Operating Income, Non-Operating Income and Net Income by Affiliate (as of 02/28/2022)

(\$000s)

	Period 8- Month			Period 8- FYTD		
	Actual	Budget	Variance	Actual	Budget	Variance
El Camino Hospital Operating Margin						
Mountain View	10,900	6,507	4,393	101,273	53,229	48,044
Los Gatos	2,309	2,780	(471)	31,637	23,579	8,058
Sub Total - El Camino Hospital, excl. Affilates	13,209	9,287	3,922	132,910	76,808	56,102
Operating Margin %	12.5%	10.2%		15.7%	10.2%	
El Camino Hospital Non Operating Income						
Sub Total - Non Operating Income	(32,461)	5,998	(38,460)	(52,825)	58,114	(110,939)
El Camino Hospital Net Margin	(19,252)	15,285	(34,538)	80,085	134,922	(54,837)
ECH Net Margin %	-18.2%	16.8%		9.5%	18.0%	
Concern	(51)	89	(139)	645	567	78
Foundation	(271)	13	(284)	48	(38)	85
El Camino Health Medical Network	(2,957)	(2,843)	(113)	(22,151)	(22,067)	(84)
Net Margin Hospital Affiliates	(3,278)	(2,742)	(537)	(21,458)	(21,538)	80
Total Net Margin Hospital & Affiliates	(22,531)	12,544	(35,074)	58,627	113,385	(54,758)

Consolidated Statement of Operations (\$000s)

Period 8 ending 02/28/2022

Period 8 FY 2021	Period 8 FY 2022	Period 8 Budget 2022	Variance Fav (Unfav)	Var%	\$000s	YTD FY 2021	YTD FY 2022	YTD Budget 2022	Variance Fav (Unfav)	Var%
OPERATING REVENUE										
314,620	402,507	362,006	40,502	11.2%	Gross Revenue	2,756,191	3,331,831	3,003,435	328,396	10.9%
(229,347)	(296,548)	(270,243)	(26,304)	(9.7%)	Deductions	(2,048,133)	(2,478,538)	(2,244,412)	(234,127)	(10.4%)
85,273	105,960	91,762	14,197	15.5%	Net Patient Revenue	708,057	853,292	759,023	94,269	12.4%
3,352	3,313	3,478	(165)	(4.7%)	Other Operating Revenue	31,110	28,770	29,989	(1,219)	(4.1%)
88,625	109,273	95,241	14,033	14.7%	Total Operating Revenues	739,167	882,063	789,013	93,050	11.8%
OPERATING EXPENSE										
48,592	55,256	50,049	(5,207)	(10.4%)	Salaries & Wages	389,591	440,829	414,657	(26,172)	(6.3%)
13,587	15,296	13,842	(1,455)	(10.5%)	Supplies	111,641	121,389	115,499	(5,890)	(5.1%)
14,770	16,550	14,041	(2,509)	(17.9%)	Fees & Purchased Services	114,109	119,137	115,403	(3,734)	(3.2%)
1,097	4,290	4,114	(176)	(4.3%)	Other Operating Expense	27,926	30,509	34,282	3,773	11.0%
1,392	1,380	1,399	19	1.4%	Interest	11,392	11,313	11,211	(102)	(0.9%)
5,903	6,311	5,544	(767)	(13.8%)	Depreciation	45,402	48,553	45,025	(3,528)	(7.8%)
85,341	99,084	88,989	(10,095)	(11.3%)	Total Operating Expenses	700,060	771,730	736,078	(35,652)	(4.8%)
3,285	10,189	6,251	3,938	63.0%	Net Operating Margin	39,107	110,333	52,935	57,398	108.4%
14,349	(32,720)	6,292	(39,012)	(620.0%)	Non Operating Income	156,016	(51,706)	60,450	(112,155)	(185.5%)
17,633	(22,531)	12,544	(35,074)	(279.6%)	Net Margin	195,122	58,627	113,385	(54,758)	(48.3%)
10,580	17,881	13,195	4,686	35.5%	Operating EBIDA	95,900	170,198	109,171	61,027	55.9%
11.9%	16.4%	13.9%	2.5%		Operating EBIDA Margin	13.0%	19.3%	13.8%	5.5%	
3.7%	9.3%	6.6%	2.8%		Operating Margin	5.3%	12.5%	6.7%	5.8%	
19.9%	-20.6%	13.2%	(33.8%)		Net Margin	26.4%	6.6%	14.4%	(7.7%)	

El Camino Hospital – Mountain View

Statement of Operations (\$000s)

Period 8 ending 02/28/2022

Period 8 FY 2021	Period 8 FY 2022	Period 8 Budget 2022	Variance Fav (Unfav)	Var%	\$000s	YTD FY 2021	YTD FY 2022	YTD Budget 2022	Variance Fav (Unfav)	Var%
					OPERATING REVENUES					
238,441	302,365	283,694	18,671	6.6%	Gross Revenue	2,110,429	2,518,789	2,338,431	180,358	7.7%
(177,534)	(219,246)	(212,691)	(6,555)	(3.1%)	Deductions	(1,568,939)	(1,863,332)	(1,755,352)	(107,980)	(6.2%)
60,906	83,119	71,003	12,116	17.1%	Net Patient Revenue	541,491	655,457	583,079	72,378	12.4%
1,081	1,456	1,533	(77)	(5.0%)	Other Operating Revenue	11,814	12,025	14,071	(2,046)	(14.5%)
61,988	84,575	72,535	12,039	16.6%	Total Operating Revenues	553,304	667,482	597,150	70,332	11.8%
					OPERATING EXPENSES					
38,395	43,251	39,772	(3,479)	(8.7%)	Salaries & Wages	306,930	347,826	328,802	(19,024)	(5.8%)
10,099	11,087	10,670	(418)	(3.9%)	Supplies	84,560	89,215	88,335	(880)	(1.0%)
7,225	9,786	6,983	(2,802)	(40.1%)	Fees & Purchased Services	55,042	58,675	57,081	(1,594)	(2.8%)
(134)	3,275	2,831	(444)	(15.7%)	Other Operating Expense	17,736	21,566	22,965	1,399	6.1%
1,392	1,380	1,399	19	1.4%	Interest	11,392	11,313	11,211	(102)	(0.9%)
4,567	4,896	4,373	(523)	(12.0%)	Depreciation	36,261	37,615	35,527	(2,088)	(5.9%)
61,544	73,675	66,029	(7,646)	(11.6%)	Total Operating Expenses	511,921	566,210	543,921	(22,288)	(4.1%)
443	10,900	6,507	4,393	67.5%	Net Operating Margin	41,383	101,273	53,229	48,044	90.3%
13,099	(32,461)	5,998	(38,460)	(641.2%)	Non Operating Income	150,506	(52,848)	58,114	(110,962)	(190.9%)
13,542	(21,561)	12,505	(34,066)	(272.4%)	Net Margin	191,889	48,425	111,343	(62,919)	(56.5%)
6,402	17,176	12,279	4,897	39.9%	Operating EBIDA	89,036	150,200	99,967	50,233	50.2%
10.3%	20.3%	16.9%	3.4%		Operating EBIDA Margin	16.1%	22.5%	16.7%	5.8%	
0.7%	12.9%	9.0%	3.9%		Operating Margin	7.5%	15.2%	8.9%	6.3%	
21.8%	-25.5%	17.2%	(42.7%)		Net Margin	34.7%	7.3%	18.6%	(11.4%)	

El Camino Hospital – Los Gatos

Statement of Operations (\$000s)

Period 8 ending 02/28/2022

Period 8 FY 2021	Period 8 FY 2022	Period 8 Budget 2022	Variance Fav (Unfav)	Var%	\$000s	YTD FY 2021	YTD FY 2022	YTD Budget 2022	Variance Fav (Unfav)	Var%
					OPERATING REVENUE					
67,718	93,525	71,716	21,809	30.4%	Gross Revenue	577,384	742,187	600,643	141,545	23.6%
(46,631)	(72,857)	(53,423)	(19,434)	(36.4%)	Deductions	(433,509)	(567,732)	(448,567)	(119,165)	(26.6%)
21,088	20,668	18,294	2,374	13.0%	Net Patient Revenue	143,874	174,455	152,076	22,379	14.7%
257	287	270	17	6.1%	Other Operating Revenue	2,783	2,266	2,165	101	4.7%
21,345	20,955	18,564	2,391	12.9%	Total Operating Revenue	146,657	176,721	154,240	22,481	14.6%
					OPERATING EXPENSE					
8,033	10,037	8,352	(1,685)	(20.2%)	Salaries & Wages	66,268	76,984	68,953	(8,030)	(11.6%)
3,058	3,861	2,948	(912)	(30.9%)	Supplies	23,594	29,492	24,947	(4,545)	(18.2%)
2,958	3,267	3,165	(101)	(3.2%)	Fees & Purchased Services	23,215	27,450	25,656	(1,794)	(7.0%)
422	357	394	37	9.4%	Other Operating Expense	3,068	2,554	3,644	1,090	29.9%
0	0	0	0	0.0%	Interest	0	0	0	0	0.0%
1,097	1,125	923	(201)	(21.8%)	Depreciation	7,171	8,603	7,461	(1,142)	(15.3%)
15,568	18,646	15,784	(2,862)	(18.1%)	Total Operating Expense	123,316	145,084	130,661	(14,422)	(11.0%)
5,777	2,309	2,780	(471)	(17.0%)	Net Operating Margin	23,341	31,637	23,579	8,058	34.2%
0	0	0	0	0.0%	Non Operating Income	0	23	0	23	0.0%
5,777	2,309	2,780	(471)	(17.0%)	Net Margin	23,341	31,660	23,579	8,081	34.3%
6,874	3,434	3,704	(270)	(7.3%)	Operating EBIDA	30,512	40,240	31,040	9,201	29.6%
32.2%	16.4%	20.0%	(3.6%)		Operating EBIDA Margin	20.8%	22.8%	20.1%	2.6%	
27.1%	11.0%	15.0%	(4.0%)		Operating Margin	15.9%	17.9%	15.3%	2.6%	
27.1%	11.0%	15.0%	(4.0%)		Net Margin	15.9%	17.9%	15.3%	2.6%	

El Camino Health Medical Network

Statement of Operations (\$000s)

Period 8 ending 02/28/2022

Period 8 FY 2021	Period 8 FY 2022	Period 8 Budget 2022	Variance Fav (Unfav)	Var%	\$000s	YTD FY 2021	YTD FY 2022	YTD Budget 2022	Variance Fav (Unfav)	Var%
OPERATING REVENUES										
8,461	6,618	6,596	22	0.3%	Gross Revenue	68,378	70,854	64,361	6,493	10.1%
(5,181)	(4,445)	(4,130)	(315)	(7.6%)	Deductions	(45,685)	(47,474)	(40,493)	(6,981)	(17.2%)
3,279	2,173	2,466	(293)	(11.9%)	Net Patient Revenue	22,692	23,380	23,868	(488)	(2.0%)
970	806	875	(70)	(7.9%)	Other Operating Revenue	10,165	7,506	7,354	153	2.1%
4,249	2,978	3,341	(363)	(10.9%)	Total Operating Revenues	32,857	30,887	31,222	(336)	(1.1%)
OPERATING EXPENSES										
1,756	1,528	1,463	(65)	(4.4%)	Salaries & Wages	12,994	12,530	13,051	521	4.0%
420	345	214	(132)	(61.7%)	Supplies	3,389	2,619	2,135	(484)	(22.7%)
4,050	3,199	3,436	237	6.9%	Fees & Purchased Services	32,278	29,611	28,911	(700)	(2.4%)
779	584	839	255	30.4%	Other Operating Expense	6,746	5,906	7,277	1,371	18.8%
0	0	0	0	0.0%	Interest	0	0	0	0	0.0%
226	279	232	(46)	(19.9%)	Depreciation	1,867	2,240	1,916	(324)	(16.9%)
7,232	5,935	6,185	250	4.0%	Total Operating Expenses	57,274	52,906	53,289	383	0.7%
(2,983)	(2,957)	(2,843)	(113)	(4.0%)	Net Operating Margin	(24,417)	(22,019)	(22,067)	47	0.2%
0	0	0	0	0.0%	Non Operating Income	229	(132)	0	(132)	0.0%
(2,983)	(2,957)	(2,843)	(113)	(4.0%)	Net Margin	(24,188)	(22,151)	(22,067)	(84)	(0.4%)
(2,757)	(2,678)	(2,611)	(67)	(2.6%)	Operating EBIDA	(22,550)	(19,779)	(20,151)	372	1.8%
-64.9%	-89.9%	-78.1%	(11.8%)		Operating EBIDA Margin	-68.6%	-64.0%	-64.5%	0.5%	
-70.2%	-99.3%	-85.1%	(14.2%)		Operating Margin	-74.3%	-71.3%	-70.7%	(0.6%)	
-70.2%	-99.3%	-85.1%	(14.2%)		Net Margin	-73.6%	-71.7%	-70.7%	(1.0%)	

Consolidated Balance Sheet (as of 02/28/2022)

(\$000s)

ASSETS

	Audited	
	February 28, 2022	June 30, 2021
CURRENT ASSETS		
Cash	142,371	151,641
Short Term Investments	194,449	284,262
Patient Accounts Receivable, net	195,022	166,283
Other Accounts and Notes Receivable	6,365	9,540
Intercompany Receivables	12,435	15,116
Inventories and Prepays	30,928	23,079
Total Current Assets	581,569	649,921
BOARD DESIGNATED ASSETS		
Foundation Board Designated	22,857	20,932
Plant & Equipment Fund	303,825	258,191
Women's Hospital Expansion	30,261	30,401
Operational Reserve Fund	182,907	123,838
Community Benefit Fund	18,109	18,412
Workers Compensation Reserve Fund	17,002	16,482
Postretirement Health/Life Reserve Fund	31,292	30,658
PTO Liability Fund	33,303	32,498
Malpractice Reserve Fund	1,986	1,977
Catastrophic Reserves Fund	26,701	24,874
Total Board Designated Assets	668,244	558,264
FUNDS HELD BY TRUSTEE	0	5,694
LONG TERM INVESTMENTS	538,357	603,211
CHARITABLE GIFT ANNUITY INVESTMENTS	940	728
INVESTMENTS IN AFFILIATES	33,975	34,170
PROPERTY AND EQUIPMENT		
Fixed Assets at Cost	1,882,983	1,799,463
Less: Accumulated Depreciation	(792,623)	(742,921)
Construction in Progress	83,193	94,236
Property, Plant & Equipment - Net	1,173,553	1,150,778
DEFERRED OUTFLOWS	23,888	21,444
RESTRICTED ASSETS	29,310	29,332
OTHER ASSETS	109,982	86,764
TOTAL ASSETS	3,159,817	3,140,306

LIABILITIES AND FUND BALANCE

	Audited	
	February 28, 2022	June 30, 2021
CURRENT LIABILITIES		
Accounts Payable	47,863	39,762
Salaries and Related Liabilities	25,488	50,039
Accrued PTO	33,980	33,197
Worker's Comp Reserve	2,300	2,300
Third Party Settlements	14,191	12,990
Intercompany Payables	9,607	14,704
Malpractice Reserves	1,665	1,670
Bonds Payable - Current	9,905	9,430
Bond Interest Payable	1,619	8,293
Other Liabilities	11,307	16,953
Total Current Liabilities	157,926	189,338
LONG TERM LIABILITIES		
Post Retirement Benefits	31,292	30,658
Worker's Comp Reserve	17,002	17,002
Other L/T Obligation (Asbestos)	6,398	6,227
Bond Payable	471,915	479,621
Total Long Term Liabilities	526,606	533,509
DEFERRED REVENUE-UNRESTRICTED	32,312	67,576
DEFERRED INFLOW OF RESOURCES	45,862	28,009
FUND BALANCE/CAPITAL ACCOUNTS		
Unrestricted	2,164,116	2,097,010
Board Designated	200,902	193,782
Restricted	32,094	31,082
Total Fund Bal & Capital Accts	2,397,112	2,321,874
TOTAL LIABILITIES AND FUND BALANCE	3,159,817	3,140,306

**EL CAMINO HOSPITAL BOARD OF DIRECTORS
COMMITTEE MEETING MEMO**

To: Finance Committee
From: Jon Cowan, Senior Director of Government Relations & Community Partnerships
Date: March 28, 2022
Subject: ECH Community Benefit Update and Midyear Grant Update

Purpose:

To provide a) an update of ECH Community Benefit and b) information regarding midyear grant performance.

Summary:

1. **Situation:** To inform the Finance Committee about the Community Benefit process in FY22 and to provide an update on Midyear FY22 grant performance.

2. **Authority:**

Community Benefit Update: In February 2021, the Hospital Board of Directors approved revisions to the Community Benefit Policy to (1) replace the Community Benefit Advisory Council (CBAC) review with review by the Hospital Community Benefit Committee (HCBC) and (2) delegate approval of the El Camino Health Annual Community Benefit Plan and certain midyear grant funding changes to the Finance Committee.

Midyear Grant Update: Midyear performance is provided through the Metric Dashboard.

3. **Background:**

Community Benefit Update:

- Community Benefit grant-funded programs provide a diverse range of services and activities that address identified health needs
- Grant Process overview: 1. Staff assessment of grant proposals → 2. Hospital Community Benefit Committee (HCBC) review and recommendations → 3. Development of Annual Community Benefit Plan & Implementation Strategy including HCBC grant recommendations → 4. Finance Committee review and approval (May) → 5. Agreements developed for approved grant partners → 6. Partners submit Midyear and Yearend Reports
- Funding framework: Community Health Needs Assessment (CHNA), conducted every three years as required by state and federal regulations, determines health needs. 2022 CHNA in process of being written and will come to Finance Committee for approval in May
- Implementation strategy: A community benefit implementation strategy is defined as a written plan which describes how the organization plans to address the selected health needs and the anticipated impact of these actions
- The five health needs selected to focus on for FY23-25 are Healthcare Access & Delivery (including oral health), Behavioral Health (including domestic violence trauma), Diabetes & Obesity, Economic Stability (including food insecurity, housing & homelessness), and Chronic Conditions (other than Diabetes & Obesity)

Midyear Grant Update:

- In June 2021, the ECH Board of Directors approved \$3,236,000 for 44 grants

Community Benefit Update and Midyear Grant Update
March 28, 2022

- Midyear reports have historically been requested to provide an update on performance and challenges/successes

4. Assessment:

Community Benefit Update:

- The draft implementation strategy attached slides include samples from the Diabetes & Obesity, Behavioral Health, as well as Healthcare Access & Delivery Health Needs
- A more robust community benefit implementation strategy that links the strategy to goals, initiatives, and measurement can allow for greater clarity of the program's focus and an understanding of outcomes
- Using a framework for year-over-year comparisons for each initiative can inform what is more impactful in how the program is addressing each health need

Midyear Grant Update

- Organizations continued to adapt programs due to Delta and Omicron surges, but overall were able to improve performance compared to FY21
- Yearend performance often improves over midyear
- 63% of grant programs met all of their metrics and 68% of programs met 80%+ metrics (up from 51% of programs meeting all of their metrics in FY21)
- Grants related to Healthcare Access and Delivery are seeing higher demand this fiscal year, with more people being willing to access traditional healthcare services and preventive screenings

5. Outcomes:

Community Benefit Update:

- Management and staff will finish developing the Annual Community Benefit Plan & Implementation Strategy after incorporating any policy direction or feedback

Midyear Grant Update

- Midyear metrics provide current grantee performance information which helps inform grant recommendations for FY23

List of Attachments:

1. FY22 El Camino Health Community Benefit Update and Midyear Grant Update
2. FY22 El Camino Health Midyear Dashboard

Suggested Committee Discussion Questions:

1. What additional background information do committee members need to satisfy their fiduciary duty related to approval of the Annual Community Benefit Plan & Implementation Strategy in May?
2. Are there any other critical items the committee members would like us to consider as management and staff finalize the implementation strategy?



El Camino Health

Community Benefit Update and Midyear Grant Update

Jon Cowan, Senior Director, Government Relations & Community Partnerships

March 28, 2022

Community Benefit Update

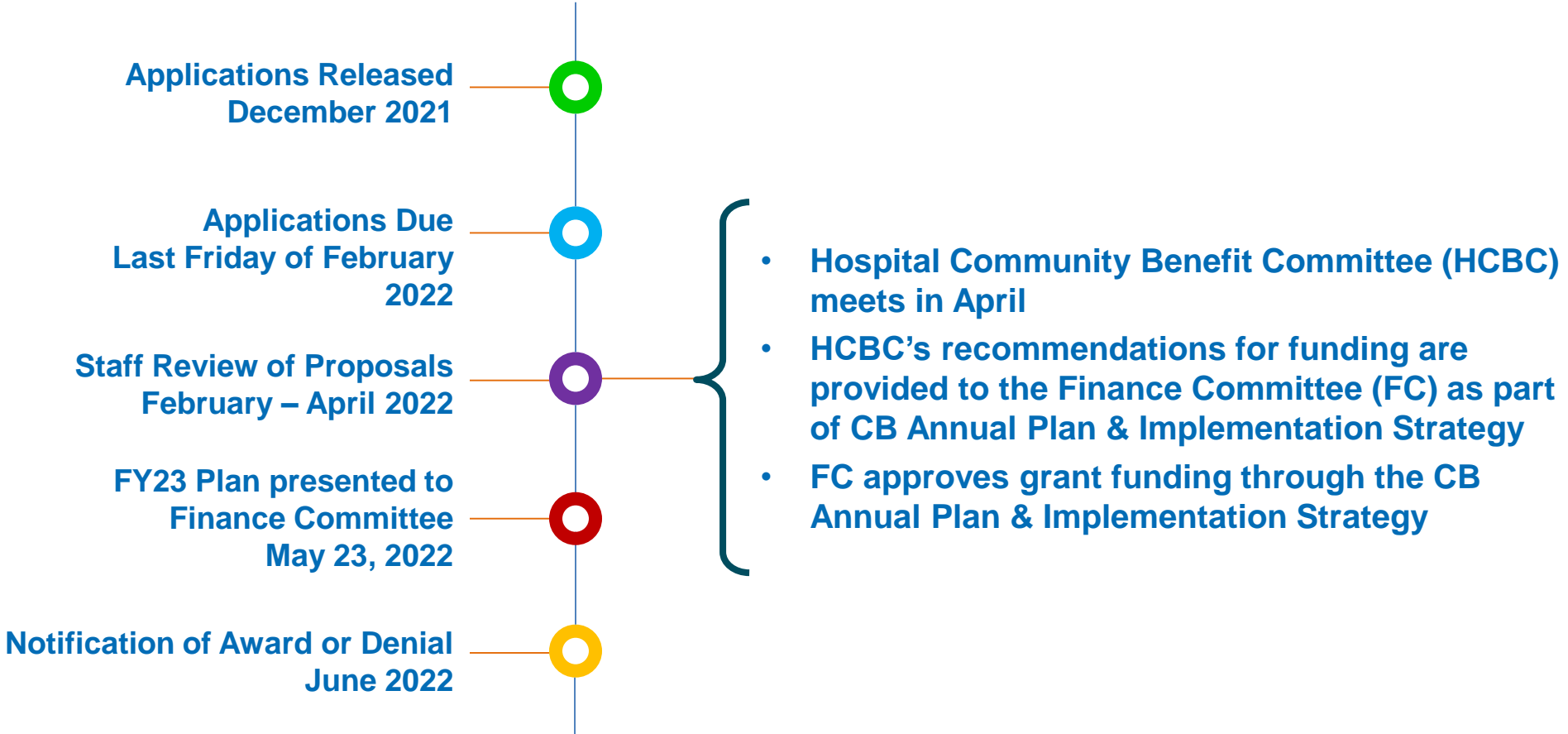


What is Community Benefit?

Community Benefit programs provide treatment, prevention or promotion of health as a response to identified community needs. Programs meet at least one of these objectives:



Timeline & Process



May 23, 2022 Finance Committee Meeting

- Annual Plan & Implementation Strategy is mechanism for approving funding
 - Total plan recommendation for grants, sponsorships, and placeholder
 - Implementation strategy to explain how the organization plans to address the health needs identified through the Community Health Needs Assessment and the anticipated impact of these actions
- 2022 Community Health Needs Assessment
 - Conducted every three years in collaboration with other Santa Clara County hospitals
 - In the process of being written, taken to Finance Committee for approval

Important Note: Each three-year cycle there is a gap between completion of the full CHNA report / implementation strategy and the ECH/ECHD grant proposal evaluation timeline. This means that the new implementation strategy will more heavily impact the FY24 and FY25 grants.

Implementation Strategy Overview (for each health need)

1 Strategy

- Narrative of what we're trying to do to impact each health need
- Explanation of why the goals were chosen, why they are meaningful, and why they will lead to positive impact

4 Anticipated Impact

- Explains what impact(s) we expect to see from each initiative

2 Goals

- 2-5 per health need
- Allows for focus areas within each health need

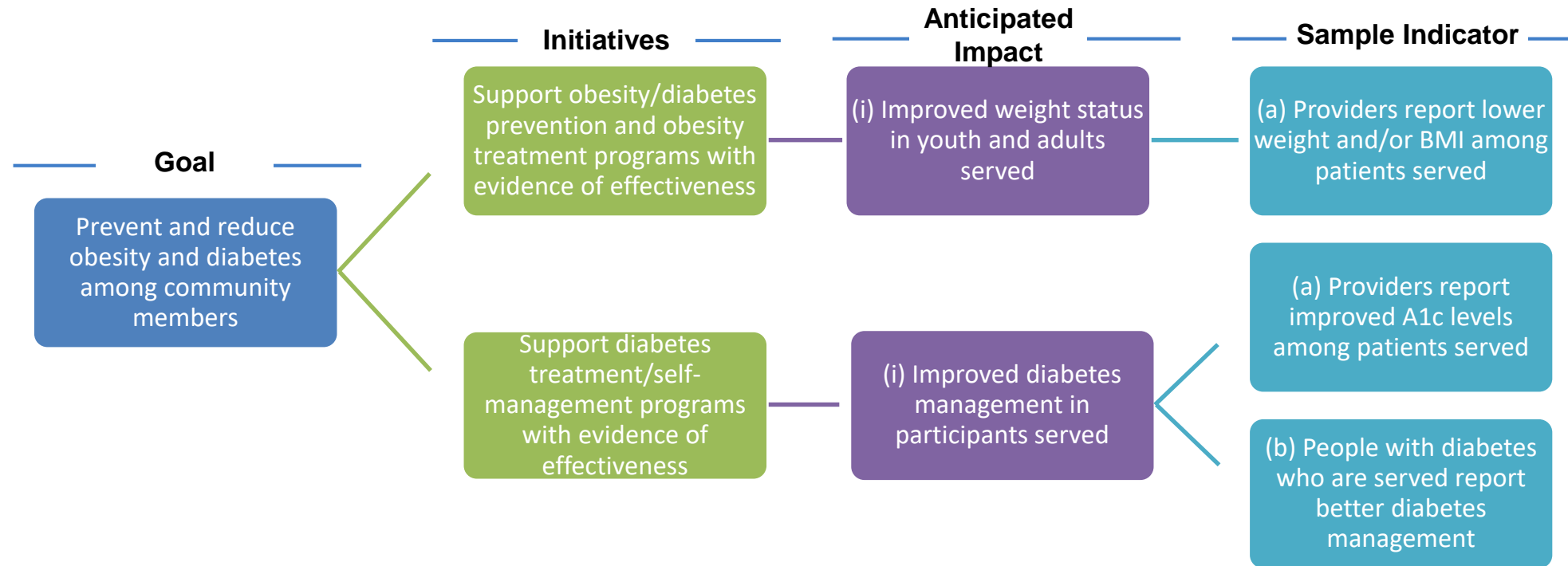
5 Sample Indicator

- Sample impact indicators that can be shared with our grant partners to measure the impact of an initiative

3 Initiatives

- 1-4 per goal
- Explains “how” the Community Benefit program will attempt to achieve the goal

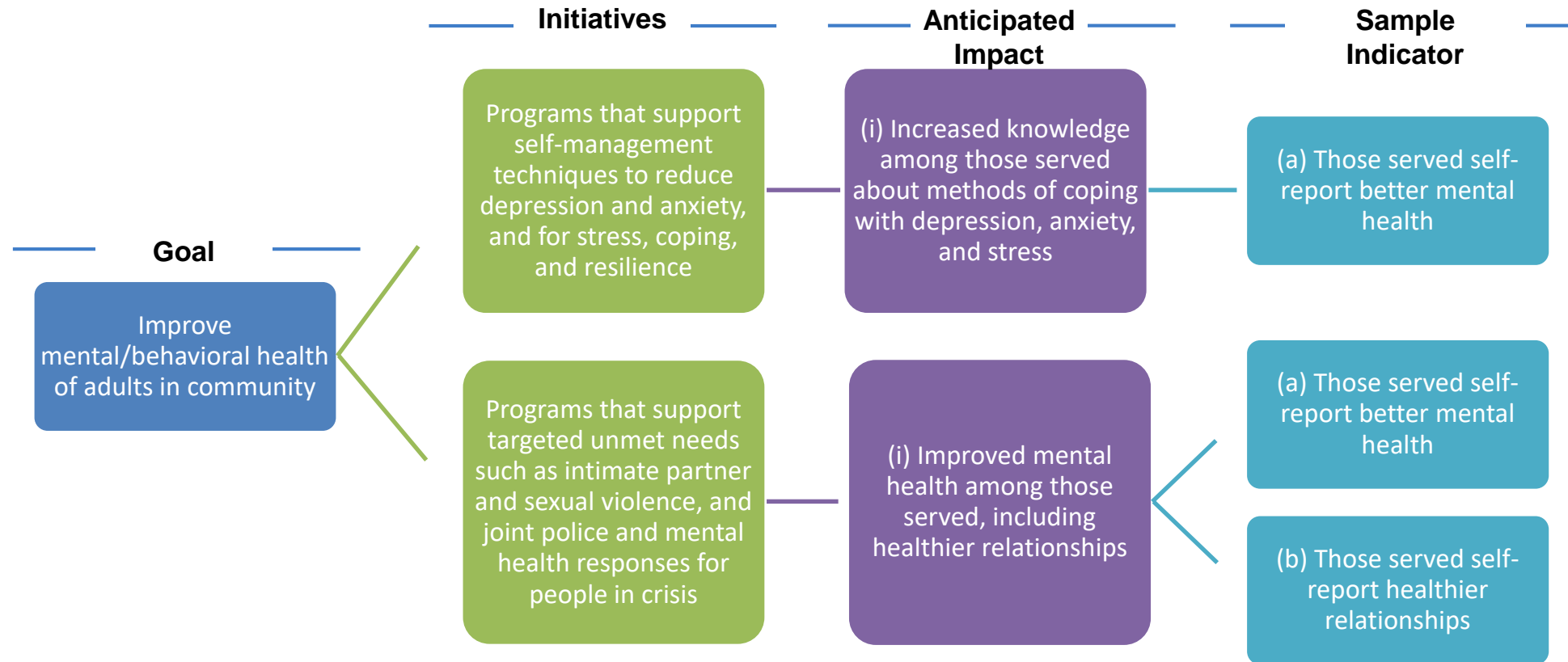
Illustrative Draft Sample: Diabetes & Obesity Health Need



Additional Draft Identified Goals

- Reduce food insecurity and increase healthy food access for low-income community members
- Increase physical activity among community members

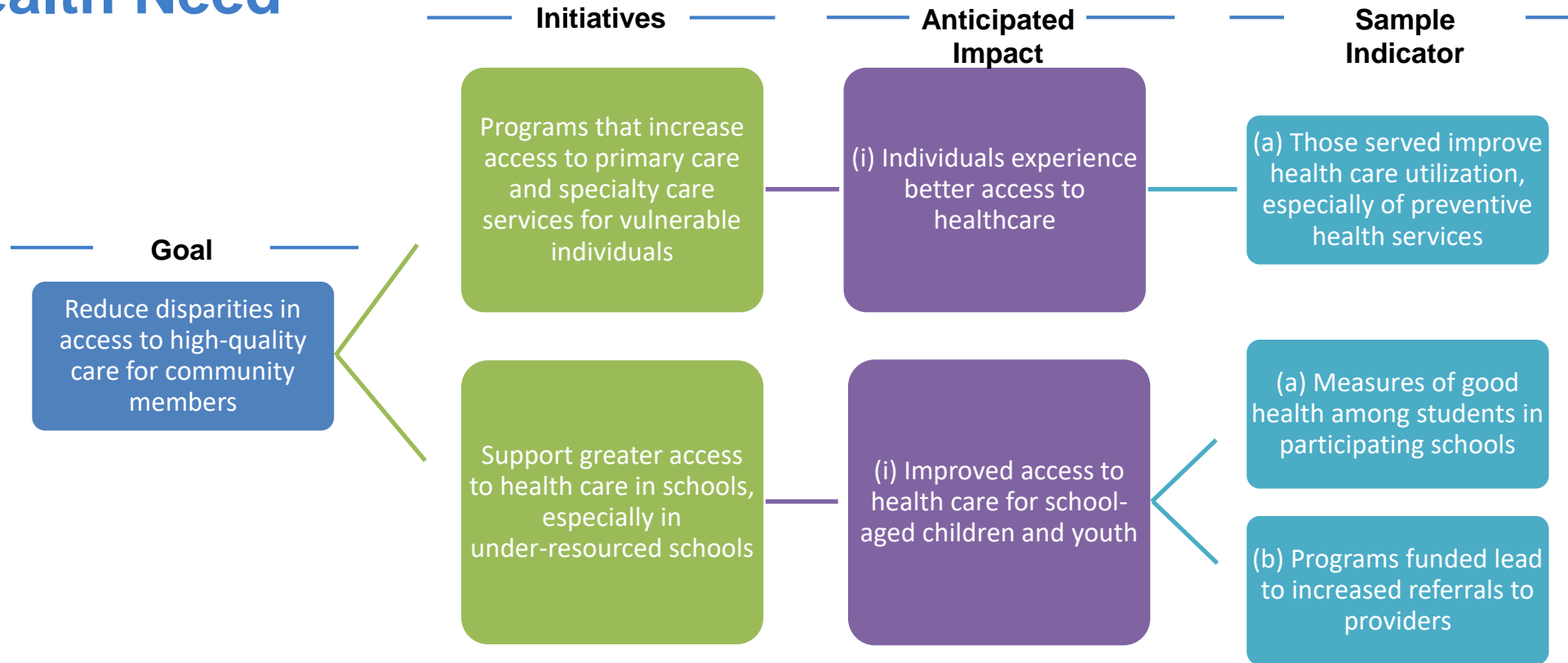
Illustrative Draft Sample: Behavioral Health Need



- Additional Draft Identified Goals**
- Improve mental/behavioral health care access for community members
 - Improve mental/behavioral health of youth in community

Illustrative Draft Sample: Healthcare Access & Delivery

Health Need



Additional Draft Identified Goals

- Reduce disparities and inequitable access to maternal/infant health care for community members
- Increase access to oral health care for underserved community members
- Provide and expand workforce training in cultural competence and compassionate and respectful care delivery

Feedback Received on Implementation Strategy Framework

1. Realistically understand that we are contributing to health solutions but we will rarely be able to claim that a change in a health goal is purely a tribute to our investment
2. Have realistic metric expectations from grantees based on the amount requested/size of the grant
3. Behavioral health access challenges aren't limited to those who are low income since access is also a challenge for the middle class
4. The framework helps with transparency and adhering to best practice innovations to address these needs. It helps to see the bigger strategic impact of our grant strategy
5. The framework is excellent in demonstrating the big picture and the examples are great
6. Clinical organizations can provide more robust measures than non-clinical community organizations. Get these robust measures from the clinical organizations
7. Consider taking a collaborative/coordination approach to pair organizations in our portfolio who may be able to work together to get better metrics
8. Have an open dialogue with partners to identify what they are already tracking to avoid adding "extra work." Don't dictate to them an exact metric to measure
9. For Behavioral Health, consider measures that are more objective such as social support, feeling that there is something meaningful to do during the day, etc.

Midyear Grant Update



FY22: Grant Summary

\$3.3M

Board Approved
Funding

Grant Programs

44

68%

Grants that Met
Midyear Metrics

Current Health Needs from 2019 Community Health Needs Assessment (CHNA)



- Diabetes & Obesity
- Chronic Conditions (other than Diabetes & Obesity)
- Healthcare Access & Delivery
- Oral/Dental Health



- Behavioral Health
- Cognitive Decline



- Violence & Injury Prevention
- Economic Stability
- Housing & Homelessness

FY22: El Camino Health Grant-Funded Partners

Healthy Body Program Partners

5210 Health Awareness Program — School-based nutrition and health programs at Campbell Union, Cupertino Union and San Jose Unified School Districts

African American Community Service Agency — Family health services outreach program for low-income children and families

Asian Americans for Community Involvement (AACI) — Primary care services at an East San Jose clinic

Bay Area Women's Sports Initiative (BAWSI) — Physical activity and self-esteem program for girls at Campbell Union School District

Better Health Pharmacy, Santa Clara County — No-cost medication program for low-income individuals

Breathe California of the Bay Area — Screenings and education for families of children with asthma

Cambrian School District — School nurse program

Campbell Union School District — School nurse program

Community Health Partnership — Safety-net clinics capacity building, learning collaborative and training

Cupertino Union School District — School nurse program

Gardner Family Health Network — Clinical services and healthy behavior change program for adult and teen patients with pre-diabetes and diabetes

GoNoodle — Movement and mindfulness programs for youth at K-8 schools

Health Mobile — Mobile dental services for homeless and low-income community members

Healthier Kids Foundation — Dental and hearing screenings for children

Indian Health Center of Santa Clara Valley — Clinical services and healthy behavior change program for youth with or at risk of pre-diabetes or diabetes

Latinas Contra Cancer — Cancer prevention and early detection services

Mount Pleasant School District — School nurse program

Playworks — Physical activity and positive school climate program at Campbell Union School District

Vista Center for the Blind and Visually Impaired — Vision rehabilitation program

Healthy Mind Program Partners

ACT for Mental Health — Behavioral health services to low-income Latinx residents

Almaden Valley Counseling Service — Social-emotional skill building in elementary and middle schools

Alzheimer's Association — Culturally-focused services for Latinx patients and caregivers

Bill Wilson Center — Psychotherapy for victims of child abuse

Cancer CAREpoint — Counseling for cancer patients, survivors, family members and caregivers

Child Advocates of Silicon Valley — Advocacy and support services for foster teens

Cupertino Union School District — Mental health counseling program

Jewish Family Services of Silicon Valley — Mental health support for low-income older adults

LifeMoves — Mental health counseling at San Jose interim housing communities

Los Gatos Union School District — Mental health counseling program

Momentum for Health — Psychiatric services and medication management for underinsured and uninsured

Peninsula Healthcare Connection — Psychiatric services and medication management for homeless and at-risk community members

Uplift Family Services — Mental health counseling and addiction prevention services at Campbell Union High School District

Healthy Community Program Partners

American Heart Association — Multilingual hypertension management classes

Chinese Health Initiative — Hypertension and diabetes education and consultations

Downtown Streets Team — Case management and life skills courses for the unhoused community members

First Community Housing — Workshops, monthly health tips and resources for affordable housing community residents

Los Gatos-Saratoga Recreation — Guided activities and support groups to address social isolation among older adults

Next Door Solutions to Domestic Violence — Crisis counseling, shelter services and advocacy for victims of domestic violence

Pink Ribbon Girls — Cancer support program for vulnerable and at-risk community members

Rebuilding Together Silicon Valley — Home repair program for low-income older adults at risk for falls

South Asian Heart Center — Screenings and education to prevent heart disease and diabetes

Valley Verde — Home gardens and nutrition education for low-income households

West Valley Community Services — Case management, assistance accessing benefits and nutrition workshops for at-risk families and older adults

FY22: El Camino Health Top Investment Areas

- Safety-net clinics / diabetes prevention
- School nurse programs
- Youth mental health counseling
- Community services agency case management services

FY22: In Their Own Words, Impact of Grants



“[Our school nurse] has been instrumental in supporting the variety of student health needs on campus. Whether organizing our hearing and vision screening schedule, training our staff on the variety of medical needs of a number of our (Bagby) Barracudas, or monitoring the daily health of students with variable conditions, Degie has been essential in ensuring that all our students have access to their education despite any medical challenges that they may face on a daily basis.”

-- Michael Kretsch, Principal, Bagby Elementary School

(Translated from Spanish) **As a mother, I have to be strong and not show fear to my children, but inside I die of fear, not knowing where all this will go and I am even more afraid that my children will get sick. Thank you for helping. I value your dedication and effort, and the help you give so many people like me.**

-- West Valley Community Services-CARE client

“The funding from El Camino Hospital has allowed the African American Community Service Agency (AACSA) to expand our ability to serve more people and to be intentional in carrying out our service model during the ongoing global pandemic. Although Black-led and Black-operated nonprofits receive less than 10% of philanthropic dollars (according to the Silicon Valley Community Foundation), AACSA remains committed to serving the region’s Black community and other hard to reach populations. We are grateful to El Camino Hospital for joining us in this effort.”

-- Milan Balinton, Executive Director, African American Community Service Agency

Community Benefit FY22 Midyear Grant Metrics Dashboard

- In May 2021, the ECH Finance Committee approved \$3,236,000 for 44 grants for FY22
- This Dashboard reflects FY22 midyear and prior year grant performance
- Grants are organized by three priority areas: Healthy Body, Healthy Mind & Healthy Community; Support Grants (\leq \$30k) are in the second section)
- FY22 Metric Data: Columns T – X
- Historical performance: Columns D – S
- See legend in footer for metric performance indicators
 - A dash “ – ” represents either 1) program is new so no metrics from prior year(s), or 2) new metric with no historical data

Health Priority Area <i>Column A</i>	Agency/Program <i>Column B</i>	FY22 Metrics <i>Column C</i>	Performance against target: ● = 90%+ ● = 75% - 89% ● = 0% - 74%																			
			FY20 6-month Target <i>Column D</i>	FY20 6-month Actual <i>Column E</i>	FY20 % 6-month Metrics Met <i>Column G</i>	FY20 Yearend Target <i>Column H</i>	FY20 Yearend Actual <i>Column I</i>	FY20 % Yearend Metrics Met <i>Column K</i>	FY21 6-month Target <i>Column L</i>	FY21 6-month Actual <i>Column M</i>	FY21 % 6-month Metrics Met <i>Column O</i>	FY21 Yearend Target <i>Column P</i>	FY21 Yearend Actual <i>Column Q</i>	FY21 % Yearend Metrics Met <i>Column S</i>	FY22 6-month Target <i>Column T</i>	FY22 6-month Actual <i>Column U</i>	FY22 % 6-month Metrics Met <i>Column W</i>	FY22 Yearend Target <i>Column X</i>				
	Asian Americans for Community Involvement (AACI) <i>Primary Care/Safety Net Clinic</i> FY22 Approved: \$100,000 FY21 Approved: \$85,000 FY21 Spent: \$85,000 New Metrics: 1 of 5	Individuals served	-	-		-	-		350	359	●	700	895	●	210	185	●	420				
		Medical appointments	-	-		-	-		500	830	●	1000	1,885	●	800	592	●	1600				
		Patients screened for depression with a positive result who are offered integrated behavioral health services	-	-	New Program in FY21	-	-	New Program in FY21	40%	44%	●	100%	80%	74%	●	60%	80%	92%	●	40%	80%	
		Patients who rate their MA or PN as excellent or good and will recommend AACI to their family and friends	-	-		-	-		-	-		-	-		90%	96%	●	90%				
		Female patients receiving a cervical cancer screening	-	-		-	-		34%	35%	●	68%	47%	●	90%	64%	●	90%				
	Better Health Pharmacy <i>Free Medication for Uninsured and Underserved</i> FY22 Approved: \$75,000 FY21 Approved: \$50,000 FY21 Spent: \$50,000 FY20 Approved: \$50,000 FY20 Spent: \$50,000 New Metrics: 0 of 5	Patients served (full program)	1,500	2,303	●	2,800	3,520	●	2,000	1,937	●	3,000	2,906	●	2,100	1,813	●	3,200				
		Prescriptions filled (full program)	11,000	16,416	●	22,000	32,767	●	14,000	17,485	●	28,000	34,601	●	16,000	16,895	●	30,000				
		Patients who report that they are very satisfied with the quality of service	97%	98%	●	100%	97%	97%	●	100%	97%	100%	●	100%	97%	92%	●	80%	97%			
		Patients who reported that they are very satisfied with the time waited for services	97%	94%	●	97%	91%	●	97%	96%	●	97%	87%	●	97%	92%	●	97%				
		Patients who reported that they are very satisfied with the time waited for medication information	97%	92%	●	97%	88%	●	97%	96%	●	97%	93%	●	97%	92%	●	97%				
	Breathe California <i>Children's Asthma Program</i> FY22 Approved: \$40,000 FY21 Approved: \$40,000 FY21 Spent: \$40,000 FY20 Approved: \$50,000 FY20 Spent: \$36,681 New Metrics: 0 of 3	Individuals served (children, parents, teachers and care providers) through air quality assessment and asthma management training	225	580	●	800	630	●	100	87	●	350	622	●	100	890	●	330				
		Children with asthma receiving multi-session asthma education who show an increase in knowledge/skills	50%	65%	●	100%	70%	65%	●	67%	N/A	N/A	0%	50%	72%	●	67%	50%	83%	●	100%	50%
		Home, school, and childcare centers served that reduce environmental hazards/triggers for asthma, as measured by assessments of respiratory hazards using the EPA's best-practice environmental checklist	50%	100%	●	60%	100%	●	N/A	N/A	0%	50%	0%	●	50%	100%	●	50%				
	Cambrian School District <i>School Nurse Program</i> FY22 Approved: \$125,000 FY21 Approved: \$125,000 FY21 Spent: \$125,000 FY20 Approved: \$128,000 FY20 Spent: \$128,000 New Metrics: 4 of 6	Students served	1,400	1,488	●	3,350	2,885	●	1,400	1,051	●	2,700	2,668	●	1,200	1,000	●	3,000				
		Hearing screenings- all TK, K, grade 2,5 & 8th graders	-	-		-	-		-	-		-	-		1,000	466	●	1,500				
		Vision Screenings- all TK, K, grades 2,5, & 8th graders	-	-		-	-		-	-		-	-		1,000	466	●	1,500				
		Staff trained in Epi-Pen	-	-		-	-		-	-		-	-		40%	30%	●	90%				
		Students with failed vision screening who see a provider and receive glasses or other needed services	-	-		-	-		-	-		-	-		10%	0%	●	25%				
		Students in Transitional Kindergarten, Kindergarten & 7th grade out of compliance with required immunizations who become compliant	-	-		-	-		5%	85%	●	30%	134%	●	50%	0%	●	90%				
	Campbell Union School District <i>School Nurse Program</i> FY22 Approved: \$215,000 FY21 Approved: \$215,000 FY21 Spent: \$215,000 FY20 Approved: \$215,000 FY20 Spent: \$215,000 New Metrics: 0 of 5	Students served	2,100	1,950	●	3,950	2,815	●	2,000	2,030	●	3,850	3,863	●	2,000	2,248	●	3,850				
Kindergarten students enrolled in Rosemary and Lynhaven schools who are noncompliant with immunizations receive their required vaccinations by California School Immunization Law		-	-		-	-		10%	68%	●	18%	91%	●	68%	100%	●	88%					
School staff (including teachers, psychologists, speech language pathologists and other staff members) who receive Epi-Pen Trainings		-	-		-	-		45%	37%	●	65%	69%	●	45%	82%	●	70%					
Classrooms participating in handwashing videos and teeth brushing videos among two Title 1 elementary schools		-	-		-	-		30%	30%	●	45%	42%	●	32%	44%	●	47%					
Special education students who receive flu vaccinations (due to being a vulnerable population)		-	-		-	-		10%	13%	●	18%	19%	●	13%	36%	●	13%					

Community Benefit Dashboard Notes

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- A metric receives a "purple" indicator if performance against target is 75% - 89%
- A metric receives a "blue" indicator if performance against target is 0% - 74%

N/A There are some 6-month metric targets with "N/A" because the client/patient has not had significant exposure to the intervention in order to accurately evaluate effectiveness or because activities or surveys are not scheduled until the second half of the year

Health Priority Area <i>Column A</i>	Agency/Program <i>Column B</i>	FY22 Metrics <i>Column C</i>	Performance against target: ● = 90%+ ● = 75% - 89% ● = 0% - 74%																						
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HEALTHY BODY	Community Health Partnership <i>Patient Engagement Learning Collaborative of Safety-net Clinics</i>	Clinic staff who attend Learning Collaborative training sessions on patient attribution and patient engagement	20	30	●		60	60	●		20	32	●		60	59	●		32	65	●		100		
		Patients who complete the program who rate at least a 2 point increase in their confidence in connecting with their primary care provider using technology as assessed by pre/post survey	-	-			-	-			-	-			-	-				N/A	N/A			55%	
		Telehealth visits as a proportion of all patient visits from baseline of 13%	-	-	100%		-	-	67%		-	-	50%		-	-	67%			N/A	N/A	100%		25%	
		Staff who rate their confidence level regarding Ask-Tell-Ask at 4 or above as assessed by post training evaluation	-	-			-	-			-	-			-	-				N/A	N/A			75%	
		Staff who feel more prepared to support their health center's telehealth activities for seniors with chronic conditions at 5 or above as assessed by pre/post evaluations	-	-			-	-			-	-			-	-				N/A	N/A			65%	
	Cupertino Union School District <i>School Nurse Program</i>	FY22 Approved: \$40,000 FY21 Approved: \$61,000 FY21 Spent: \$61,000 FY20 Approved: \$50,000 FY20 Spent: \$50,000 New Metrics: 4 of 5	Students served	563	510	●		1,103	964	●		600	654	●		1,300	1,295	●		2,025	1,879	●		4,050	
			Students who failed a vision or hearing screening who saw a healthcare provider	-	-			-	-			-	-			-	-				25%	30%	●		35%
			Teachers/staff at target schools that receive training on severe allergies, anaphylaxis, and EpiPen usage	-	-	100%		-	-	50%		-	-	75%		-	-	100%			15%	28%	●		30%
			Students in TK, Kindergarten & 7th grade non-compliant with required vaccines who become compliant	-	-			-	-			25%	37%	●		50%	65%	●			35%	70%	●		50%
			Students who are out of compliance with TB testing who become compliant	-	-			-	-			-	-			-	-				20%	64%	●		35%
			First grade students out of compliance with required physical who become compliant	-	-			-	-			N/A	N/A	●		15%	58%	●			N/A	N/A			20%
	ECH COVID Community Testing & Vaccine Program	FY22 Approved: \$50,000 FY21 Approved: \$50,000 FY21 Spent: \$50,000 New Metrics: 1 of 2	Individuals served	-	-			-	-			200	217	●		400	1,221	●		N/A	N/A			800	
			COVID-19 vaccinations (including booster vaccines)	-	-			-	-			-	-			-	-				N/A	N/A			400
	Gardner Family Health Network <i>Prediabetes and Diabetes</i>	FY22 Approved: \$113,000 FY21 Approved: \$225,000 FY21 Spent: \$225,000 FY20 Approved: \$220,000 FY20 Spent: \$220,000 New Metrics: 0 of 4	Patients served	800	1,402	●		1,500	1,706	●		730	752	●		1,370	1,105	●		700	1,052	●		1,320	
			Services provided, including patient visits with a Registered Dietitian and/or Wellness Coordinator	1,425	2,404	●	100%	2,910	3,563	●	75%	1,300	1,375	●	75%	2,650	3,429	●	75%	1,690	2,486	●	100%	3,385	
			Patients demonstrating a reduction in body weight	49%	48%	●		49%	42%	●		40%	46%	●		40%	47%	●			40%	51%	●		40%
			Patients demonstrating a reduction in HbA1c levels	44%	49%	●		44%	41%	●		40%	29%	●		40%	51%	●			40%	40%	●		40%
	GoNoodle <i>Youth Movement & Mindfulness</i>	FY22 Approved: \$113,000 FY21 Approved: \$113,000 FY21 Spent: \$113,000 FY20 Approved: \$113,000 FY20 Spent: \$113,000 New Metrics: 1 of 5	Students served	38,250	34,255	●		38,250	39,308	●		38,250	44,218	●		38,250	91,181	●		72,820	135,175	●		88,129	
			Schools served	184	189	●		184	197	●		184	198	●		184	184	●			204	333	●		261
			GoNoodle physical activity breaks played	120,000	96,472	●	67%	238,000	218,924	●	100%	100,000	137,591	●	100%	238,000	287,964	●	60%	7,057,218	8,631,891	●	100%	9,736,114	
Teachers who believe GoNoodle benefits their students' focus and attention in the classroom			N/A	N/A			92%	N/A			N/A	N/A			93%	0%	●			75%	75%	●		75%	
Teachers who report GoNoodle has had a positive impact on their students' emotional health			-	-			-	-			-	-			-	-				75%	75%	●		75%	
Health Mobile <i>Dental Services</i>	FY22 Approved: \$55,000 FY21 Approved: \$75,000 FY21 Spent: \$75,000 New Metrics: 0 of 4	Low-income and homeless individuals served	-	-			-	-			45	25	●		200	193	●		50	52	●		135		
		Dental procedures provided	-	-			-	-			270	165	●		1,200	1,205	●		150	158	●		500		
		Patients who report increased knowledge about their oral health	-	-			-	-			90%	90%	●		90%	89%	●		85%	85%	●		85%		
		Patients who report no pain after their first visit	-	-			-	-			90%	90%	●		90%	90%	●			90%	90%	●		90%	

Community Benefit Dashboard Notes

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 ● A metric receives a "purple" indicator if performance against target is 75% - 89%
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N/A There are some 6-month metric targets with "N/A" because the client/patient has not had significant exposure to the intervention in order to accurately evaluate effectiveness or because activities or surveys are not scheduled until the second half of the year

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HEALTHY BODY 	Indian Health Center Youth Diabetes & Obesity FY22 Approved: \$87,000 FY21 Approved: \$80,000 FY21 Spent: \$80,000 FY20 Approved: \$74,000 FY20 Spent: \$73,528 New Metrics: 0 of 5	Youth patients served	130	143	●		200	216	●		125	140	●		230	208	●		150	126	●		210
		Services provided	250	455	●		500	733	●		400	383	●		800	834	●		500	295	●		835
		Patients who decrease their BMI percentile	20%	39%	●	100%	30%	44%	●	100%	20%	40%	●	100%	30%	39%	●	100%	25%	38%	●	50%	35%
		Patients who demonstrate retention of key health material through assessments	-	-			-	-			65%	95%	●		65%	90%	●		65%	100%	●		80%
		Patients who demonstrate increased knowledge about topics related to diabetes and obesity	N/A	N/A			40%	87%	●		N/A	N/A			75%	94%	●		N/A	N/A			80%
	Latinas Contra Cancer FY22 Approved: \$35,000 FY21 Approved: \$25,000 FY21 Spent: \$25,000 New Metrics: 0 of 5	Individuals served	-	-			-	-			60	71	●		214	224	●		120	123	●		300
		Services provided	-	-			-	-			122	165	●		458	464	●		332	303	●		745
		Clients who agree or strongly agree that they better understand key cancer prevention and health messages	-	-		New Program in FY21	-	-		New Program in FY21	70%	92%	●	100%	70%	90%	●	100%	70%	95%	●	100%	70%
		Navigation clients who demonstrate a better understanding of their health options by their ability to list two or more options to address their health concerns	-	-			-	-			90%	86%	●		90%	97%	●		90%	98%	●		90%
		Health navigation participants who agree or strongly agree that they were overall satisfied with services received	-	-			-	-			85%	96%	●		85%	97%	●		85%	100%	●		85%
	Mt. Pleasant School District School Nurse Program FY22 Approved: \$122,000 FY21 Approved: \$125,000 FY21 Spent: \$104,333 FY20 Approved: \$125,000 FY20 Spent: \$97,983 New Metrics: 2 of 5	Students served	2,200	2,126	●		2,200	2,133	●		600	625	●		1,900	1,992	●		600	1,677	●		2,100
		Staff completing health related trainings	-	-			-	-			60%	55%	●		75%	78%	●		60%	92%	●		100%
		Decrease in students chronically absent from school (includes Distance Learning/10% or more absenteeism)	-	-		100%	-	-		100%	1%	2%	●	80%	3%	3%	●	100%	2%	1%	●	60%	2%
		Students with a failed Kindergarten oral health screening who see a dentist	-	-			-	-			-	-			-	-			20%	17%	●		30%
		Students who failed a health screening seeing a medical provide	-	-			-	-			-	-			-	-			30%	28%	●		40%
	Playworks Physical Activity & Anti-bullying FY22 Approved: \$86,000 FY21 Approved: \$86,000 FY21 Spent: \$12,900 FY20 Approved: \$91,627 FY20 Spent: \$91,627 New Metrics: 0 of 5	Students served	2,332	2,195	●		2,332	1,953	●		1,950	N/A			1,950	404	●		1,500	445	●		1,500
		Teachers/administrators reporting that Playworks positively impacts school climate	N/A	N/A			95%	100%	●		N/A	N/A			95%	0%	●		N/A	N/A			95%
		Teachers reporting that overall student engagement increased use of positive language, attentiveness and participation in class	N/A	N/A		100%	90%	100%	●	80%	N/A	N/A		N/A	90%	0%	●	0%	N/A	N/A		0%	91%
		Teachers/administrators surveyed who agree or strongly agree that Playworks helps increase physical activity	N/A	N/A			95%	100%	●		N/A	N/A			91%	0%	●		N/A	N/A			92%
		Teacher/administrators who agree or strongly agree that Playworks helps increase social awareness and self-regulation	-	-			-	-			N/A	N/A			90%	0%	●		N/A	N/A			91%
Vista Center for the Blind and Visually Impaired FY22 Approved: \$40,000 FY21 Approved: \$40,000 FY21 Spent: \$40,000 FY20 Approved: \$40,000 FY20 Spent: \$40,000 New Metrics: 0 of 5	Individuals served	25	26	●		65	65	●		31	30	●		62	65	●		32	35	●		62	
	Services provided (information & referral, intake, counseling, support group, adapted daily living skills, orientation & mobility, assistive technology, low vision evaluation)	200	282	●		475	521	●		240	287	●		475	491	●		255	268	●		475	
	Clients who rate at least a 4 on a scale of 1 (unsatisfactory) to 5 (satisfactory) that they were informed about resources, community agencies and programs that are available to help live with vision loss	90%	100%	●	100%	90%	100%	●	100%	N/A	N/A		100%	90%	100%	●	100%	90%	100%	●	100%	90%	
	Clients who report being somewhat confident to confident in their ability to safely move within their residence	85%	92%	●		85%	92%	●		N/A	N/A			85%	100%	●		85%	100%	●		85%	
	Clients who indicate that they are able to read printed material after program participation	70%	85%	●		70%	82%	●		N/A	N/A			70%	75%	●		70%	100%	●		70%	
HEALTHY MIND 	ACT for Mental Health FY22 Approved: \$60,000 New Metrics: N/A	Individuals served (unduplicated)	-	-			-	-			-	-			-	-			15	21	●		40
		Services Provided	-	-		New Program in FY22	-	-		New Program in FY22	-	-		New Program in FY22	-	-		New Program in FY22	230	146	●	100%	620
		Statistically Significant Improvement from pre- to-post test on Perceived Stress Scale (PSS)	-	-			-	-			-	-			-	-			N/A	N/A			60%
		Statistically Significant Improvement from pre- to-post test on Hispanic Stress Inventory: all 5 Scales	-	-			-	-			-	-			-	-			N/A	N/A			60%

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HEALTHY MIND 	Almaden Valley Counseling Services <i>School-based Mental Health Counseling</i> FY22 Approved: \$70,000 FY21 Approved: \$70,000 FY21 Spent: \$70,000 FY20 Approved: \$60,000 FY20 Spent: \$60,000 New Metrics: 0 of 4	Students served	60	83	●		280	222	●		90	131	●		240	429	●		131	115	●		312	
		Counseling sessions provided	300	391	●		1,755	1,501	●		500	1,132	●		1,000	1,622	●		700	560	●		2,003	
		Students who improved by at least 3 points from pre-test to post-test on the 40-point Strengths and Difficulties Questionnaire and Impact Assessment based on self-report (for students age 11-17)	N/A	N/A		100%	50%	N/A		0%	N/A	N/A		100%	50%	33%	●	75%	N/A	N/A		0%		50%
		Students who improved by at least 3 points from pre-test to post-test on the 40-point scale Strengths and Difficulties Questionnaire and Impact Assessment based on teacher or therapist report (for students age 10 and under)	N/A	N/A			50%	N/A			N/A	N/A			50%	48%	●		N/A	N/A				50%
	Alzheimer's Association <i>Latino Family Connections</i> FY22 Approved: \$70,000 FY21 Approved: \$65,000 FY21 Spent: \$65,000 FY20 Approved: \$70,000 FY20 Spent: \$70,000 New Metrics: 0 of 5	Individuals served	275	162	●		530	305	●		150	100	●		300	186	●		125	161	●		250	
		Services provided	295	292	●		625	705	●		325	345	●		650	1,086	●		319	239	●		700	
		Information and Referral Services clients who agree or strongly agree they are able to find resources to utilize	N/A	N/A		50%	95%	93%	●	80%	N/A	N/A		50%	95%	93%	●	80%	N/A	N/A		50%	95%	
		Educational Sessions or Caregiver Training recipients who agree or strongly agree they were satisfied with the services received	N/A	N/A			95%	96%	●		N/A	N/A			95%	93%	●		N/A	N/A				95%
		Care consultation participants who agree or strongly agree they are better informed of necessary steps to address identified needs	N/A	N/A			90%	92%	●		N/A	N/A			90%	86%	●		N/A	N/A				90%
	Child Advocates of Silicon Valley FY22 Approved: \$40,000 FY21 Approved: \$30,000 FY21 Spent: \$30,000 FY20 Approved: \$30,000 FY20 Spent: \$30,000 New Metrics: 0 of 4	Foster teens served	60	32	●		80	129	●		40	62	●		80	78	●		50	53	●		80	
		New volunteer Court Appointed Special Advocates (CASAs)	60	32	●		80	103	●		40	68	●		80	78	●		50	53	●		80	
		CASA high school seniors who earn their diploma or equivalent	N/A	N/A		0%	80%	98%	●	100%	N/A	N/A		100%	80%	87%	●	100%	N/A	N/A		100%	85%	
		CASAs who will report that their assigned foster youth has a greater sense of well-being	-	-			-	-			N/A	N/A			90%	90%	●		N/A	N/A				85%
	Cupertino Union School District <i>Mental Health Counseling</i> FY22 Approved: \$120,000 FY21 Approved: \$120,000 FY21 Spent: \$120,000 FY20 Approved: \$140,000 FY20 Spent: \$140,000 New Metrics: 0 of 5	Students served	150	181	●		395	230	●		63	92	●		157	181	●		68	75	●		160	
		Service hours provided	1,175	2,435	●		4,251	5,284	●		730	963	●		1,750	2,046	●		705	801	●		1,605	
		Students who improve on treatment plan goals by 20% in 6 months and 50% by the end of the school year as measured by counselor report	60%	57%	●		80%	70%	●		60%	76%	●		80%	86%	●		60%	64%	●		80%	
Students who improved by at least 3 points from pre-test to post-test on the Strength and Difficulties Questionnaire and Impact Assessment based on teacher report (for students age 10 and under)		N/A	N/A		100%	50%	50%	●	40%	N/A	N/A		100%	50%	61%	●	100%	N/A	N/A		100%	50%		
Students who improved by at least 3 points from pre-test (at the beginning of counseling services) to post-test (prior to termination of services) on the Strength and Difficulties Questionnaire and Impact Assessment based on self-report (for students age 11-17)		N/A	N/A			50%	42%	●		N/A	N/A			50%	50%	●		N/A	N/A				50%	
Jewish Family Services of Silicon Valley <i>Senior Case Management</i> FY22 Approved: \$82,000 FY21 Approved: \$80,000 FY21 Spent: \$80,000 FY20 Approved: \$75,000 FY20 Spent: \$75,000 New Metrics: 1 of 4	Older adults served	70	109	●		95	145	●		90	118	●		120	159	●		90	91	●		120		
	Encounters	250	1,263	●		500	2,513	●		350	430	●		850	951	●		800	824	●		2,050		
	Clients who experience reduced isolation as measured by an improved score on the UCLA Loneliness Scale	-	-		100%	-	-		75%	-	-		100%	-	-		100%	20%	13%	●		20%		
	Clients who report utilization of at least two behavioral health services	70%	92%	●		95%	94%	●		50%	52%	●		75%	72%	●		50%	39%	●		75%		
LifeMoves <i>Mental Health Counseling at Homeless Shelters</i> FY22 Approved: \$60,000 FY21 Approved: \$60,000 FY21 Spent: \$60,000 FY20 Approved: \$50,000 FY20 Spent: \$50,000 New Metrics: 0 of 5	Individuals served	50	116	●		150	187	●		55	60	●		160	171	●		75	78	●		160		
	Services provided (Individual, group and milieu therapy)	100	137	●		375	390	●		120	132	●		375	361	●		100	105	●		350		
	Clients who attend at least three individual therapy sessions who report improved functioning and well-being	80%	95%	●	100%	85%	93%	●	100%	N/A	N/A		100%	85%	81%	●	100%	N/A	N/A		100%	85%		
	Clients who learned how trauma affects themselves and their family	-	-			-	-			N/A	N/A			75%	75%	●		N/A	N/A				75%	
	Practicum students who report that their experience will be useful in their future ability to serve the greater community	-	-			-	-			N/A	N/A			85%	90%	●		N/A	N/A				85%	

Community Benefit Dashboard Notes

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- A metric receives a "purple" indicator if performance against target is 75% - 89%
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N/A There are some 6-month metric targets with "N/A" because the client/patient has not had significant exposure to the intervention in order to accurately evaluate effectiveness or because activities or surveys are not scheduled until the second half of the year

Health Priority Area <i>Column A</i>	Agency/Program <i>Column B</i>	FY22 Metrics <i>Column C</i>	Performance against target: ● = 90%+ ● = 75% - 89% ● = 0% - 74%																			
			FY20 6-month Target <i>Column D</i>	FY20 6-month Actual <i>Column E</i>	FY20 % 6-month Metrics Met <i>Column G</i>	FY20 Yearend Target <i>Column H</i>	FY20 Yearend Actual <i>Column I</i>	FY20 % Yearend Metrics Met <i>Column K</i>	FY21 6-month Target <i>Column L</i>	FY21 6-month Actual <i>Column M</i>	FY21 % 6-month Metrics Met <i>Column O</i>	FY21 Yearend Target <i>Column P</i>	FY21 Yearend Actual <i>Column Q</i>	FY21 % Yearend Metrics Met <i>Column S</i>	FY22 6-month Target <i>Column T</i>	FY22 6-month Actual <i>Column U</i>	FY22 % 6-month Metrics Met <i>Column W</i>	FY22 Yearend Target <i>Column X</i>				
HEALTHY MIND 	Los Gatos Union School District Mental Health Counseling FY22 Approved: \$110,000 FY21 Approved: \$110,000 FY21 Spent: \$110,000 New Metrics: 1 of 6	Individuals served	-	-		-	-		380	467	●	775	1,065	●	380	462	●	775				
		Services provided (in hours)	-	-		-	-		425	271	●	850	1,025	●	425	530	●	850				
		Teachers who participate in model push-in lessons related to inclusivity and diversity who identify positive student engagement in the lesson of at least 70% or higher.	-	-		-	-		-	-		-	-		60%	60%	●	60%				
		Parents who participate in Parent Education Seminar will increase their self-reported readiness to support their student's mental health needs.	-	-		-	-		40%	86%	●	50%	80%	102%	●	67%	80%	75%	●	100%	80%	
		Students who improved by at least 3 points from pre-test to post-test on the 40-point scale Strengths and Difficulties Questionnaire and Impact Assessment based on self-report (middle school for students age 11-17).	-	-		-	-		N/A	N/A		50%	10%	●	N/A	N/A		80%				
	Third through fifth-grade students (aged 8-12) who increased from baseline survey (scale of 1-2) to end of year wellness and school connectedness survey. (Based on the Panorama Wellness Survey).	-	-		-	-		N/A	N/A		50%	65%	●	N/A	N/A		60%					
	Momentum for Mental Health FY22 Approved: \$46,000 FY21 Approved: \$51,000 FY21 Spent: \$51,000 FY20 Approved: \$50,000 FY20 Spent: \$50,000 New Metrics: 0 of 3	Patients served	16	21	●	25	24	●	16	17	●	25	28	●	17	25	●	24				
		Services provided	165	217	●	330	438	●	100%	165	231	●	100%	350	532	●	100%	220	209	●	100%	334
		Patients who avoid psychiatric hospitalization for 12 months after admission after beginning services with Momentum	97%	95%	●	97%	95%	●	97%	94%	●	97%	89%	●	97%	100%	●	97%				
	Peninsula HealthCare Connection FY22 Approved: \$90,000 FY21 Approved: \$90,000 FY21 Spent: \$90,000 FY20 Approved: \$90,000 FY20 Spent: \$90,000 New Metrics: 0 of 6	Patients served	100	87	●	200	257	●	130	281	●	260	383	●	100	372	●	200				
Services provided (psychiatry, therapy, and case management)		322	293	●	645	397	●	300	365	●	600	628	●	380	290	●	660					
Depression screenings provided		-	-		-	-		100	108	●	200	300	●	80	262	●	160					
Psychiatric patients not hospitalized in a 12-month period		85%	85%	●	90%	85%	●	85%	88%	●	90%	93%	●	85%	95%	●	90%					
Psychiatry patients that attend scheduled follow up appointments		50%	65%	●	70%	60%	●	60%	68%	●	75%	90%	●	60%	95%	●	75%					
Patients for depression that attend scheduled follow up appointments with Psychiatrist		-	-		-	-		45%	39%	●	55%	55%	●	45%	95%	●	55%					
Uplift Family Services School-based Mental Health Counseling FY22 Approved: \$210,000 FY21 Approved: \$230,000 FY21 Spent: \$230,000 FY20 Approved: \$230,000 FY20 Spent: \$230,000 New Metrics: 0 of 6	Students served in Campbell Union High School District with individual and/or group counseling and classroom presentations	1,125	1,015	●	2,900	1,496	●	500	552	●	1,650	1,289	●	500	818	●	1,250					
	Service hours provided	940	865	●	2,070	1,946	●	582	642	●	1,345	1,284	●	570	605	●	1,190					
	Students who increase their school attendance for pre to post rating (defined as at least one point change on the CANS 50 assessment), among the students served who have school attendance issues	N/A	N/A		30%	20%	●	N/A	N/A		20%	20%	●	N/A	N/A		20%					
	Students who decrease high risk behaviors from pre to post rating (defined as at least alone point change on the CANS 50 assessment), among students served who have high risk behaviors	N/A	N/A		60%	65%	●	60%	65%	●	100%	60%	56%	●	83%	N/A	N/A	100%	60%			
	Students who decrease their thoughts and feelings of suicide from pre to post rating (defined as at least a one point change on the CANS 50 assessment), among students served with suicidal thoughts and feelings	N/A	N/A		80%	80%	●	N/A	N/A		80%	80%	●	N/A	N/A		80%					
	Students who increase coping skills from pre to post rating (defined as at least a one point change on the CANS 50 assessment), among students served with trauma, depression, anxiety, and/or anger	N/A	N/A		80%	80%	●	N/A	N/A		80%	80%	●	N/A	N/A		80%					
HEALTHY COMMUNITY 	American Heart Association Hypertension Management FY22 Approved: \$50,000 FY21 Approved: \$50,000 FY21 Spent: \$49,210 New Metrics: 0 of 4	Individuals served	-	-		-	-		40	37	●	80	96	●	60	74	●	130				
		Hypertension class participants will improve blood pressure by 7mmHg	-	-		-	-		30%	56%	●	30%	56%	●	35%	32%	●	35%				
		Hypertension class participants will measure 8 BP readings within 4 months	-	-		-	-		50%	53%	●	50%	100%	●	55%	50%	●	55%				
		Hypertension class participants adopt health behaviors to improve BP by self-reporting increased fruit and vegetable consumption	-	-		-	-		30%	35%	●	30%	59%	●	35%	32%	●	35%				

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Health Priority Area <i>Column A</i>	Agency/Program <i>Column B</i>	FY22 Metrics <i>Column C</i>	Performance against target: ● = 90%+ ● = 75% - 89% ● = 0% - 74%																			
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HEALTHY COMMUNITY	Chinese Health Initiative FY22 Approved: \$42,000 New Metrics: N/A	Individuals served (unduplicated)	-	-		-	-		-	-		-	-		-	-		98	142	●	210	
		Services provided, including dietitian consultations and chronic disease health education workshops	-	-		-	-		-	-		-	-		-	-		225	343	●	450	
		Healthy Habits, Healthy Lifestyle participants who are very motivated or motivated to make lifestyle change on exercise, diet, sleep or stress-reduction.	-	-		-	-		-	-		-	-		-	-		80%	95%	●	100%	80%
		Participants who strongly agree or agree that dietitian consultations help them improve their eating habits	-	-		-	-		-	-		-	-		-	-		95%	96%	●	95%	
		Participants who strongly agree or agree that the services received (such as health education and screening) helped them better manage their health	-	-		-	-		-	-		-	-		-	-		94%	94%	●	94%	
	Next Door Solutions Domestic Violence Services FY22 Approved: \$90,000 FY21 Approved: \$85,000 FY21 Spent: \$85,000 FY20 Approved: \$75,000 FY20 Spent: \$75,000 New Metrics: 0 of 4	Adults served through the Comprehensive Services For Victims of Domestic Violence Program	66	66	●	132	123	●	73	73	●	146	141	●	69	91	●	137				
		Services provided	279	345	●	560	567	●	251	336	●	521	726	●	267	323	●	594				
		Surveyed participants who report that they have gained at least one strategy to increase their safety or their children's safety	80%	92%	●	80%	93%	●	80%	0%	●	80%	92%	●	90%	96%	●	90%				
		Clients engaged in Self-Sufficiency Case Management during the grant period will maintain the level of self-sufficiency	55%	55%	●	55%	49%	●	55%	50%	●	55%	46%	●	75%	75%	●	75%				
	South Asian Heart Center FY22 Approved: \$100,000 FY21 Approved: \$75,000 FY21 Spent: \$75,000 FY20 Approved: \$110,000 FY20 Spent: \$110,000 New Metrics: 0 of 6	Individuals served	61	66	●	121	151	●	45	49	●	100	115	●	70	81	●	150				
		Services provided	330	361	●	659	827	●	243	264	●	518	585	●	330	362	●	700				
		Improvement in average level of weekly physical activity from baseline	20%	19%	●	21%	21%	●	21%	20%	●	21%	20%	●	21%	20%	●	21%				
		Improvement in average levels of daily servings of vegetables from baseline	19%	20%	●	20%	19%	●	20%	19%	●	20%	20%	●	20%	18%	●	20%				
		Improvement in levels of HDL-C as measured by follow-up lab test	5%	5%	●	5%	5%	●	5%	5%	●	6%	5%	●	5%	5%	●	5%				
	Improvement in cholesterol ratio as measured by follow-up lab test	6%	7%	●	6%	6%	●	6%	6%	●	7%	6%	●	6%	6%	●	6%					
Valley Verde Nutrition access/education for low-income households FY22 Approved: \$45,000 FY21 Approved: \$45,000 FY21 Spent: \$45,000 FY20 Approved: \$45,000 FY20 Spent: \$45,000 New Metrics: 1 of 4	Individuals/households served	92	138	●	300	280	●	120	163	●	280	312	●	136	113	●	252					
	Services provided	152	180	●	491	403	●	200	142	●	500	1,182	●	198	644	●	446					
	Participants report increased food security for themselves and their families by at least one unit of measurement, as measured by pre- and post-program surveys.	-	-		-	-		-	-		-	-		80%	69%	●	25%	80%				
	Participants reporting an increase in their knowledge of nutrition and healthy cooking, as measured by pre- and post-participation surveys and final focus group	80%	91%	●	80%	91%	●	N/A	N/A		80%	95%	●	80%	56%	●	80%					
West Valley Community Services Social Work Case Management FY22 Approved: \$160,000 FY21 Approved: \$153,000 FY21 Spent: \$153,000 FY20 Approved: \$153,000 FY20 Spent: \$153,000 New Metrics: 1 of 5	Households served	65	65	●	125	157	●	75	75	●	150	163	●	163	184	●	326					
	Households that receive intensive Case Management services	10	10	●	20	50	●	10	10	●	20	32	●	25	25	●	50					
	Case managed clients who increased in 3 of the 18 domains measured by Self Sufficiency Index	N/A	N/A		80%	91%	●	N/A	N/A		90%	91%	●	N/A	N/A		90%					
	Food pantry clients overcoming food insecurity as indicated on client survey	-	-		-	-		-	-		-	-		N/A	N/A		90%					
	Clients will remain stably housed after 3 months of receiving emergency financial assistance	-	-		-	-		N/A	N/A		90%	92%	●	N/A	N/A		95%					
West Valley Community Services Social Work Case Management for Older Adults FY22 Approved: \$45,000 FY21 Approved: \$45,000 FY21 Spent: \$45,000 FY20 Approved: \$45,000 FY20 Spent: \$45,000 New Metrics: 0 of 3	Older adults served	25	25	●	45	45	●	35	35	●	45	83	●	30	32	●	60					
	Encounters provided	130	139	●	260	320	●	150	250	●	300	449	●	160	199	●	320					
	Case managed clients who increased in 3 of the 18 domains measured by Self Sufficiency Index	N/A	N/A		90%	94%	●	N/A	N/A		91%	96%	●	N/A	N/A		92%					

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Support Grants (≤\$30k)																							
HEALTHY BODY	5-2-1-0 Healthy Behavior Education for Youth FY22 Approved: \$20,000 FY21 Approved: \$25,000 FY21 Spent: \$12,100 FY20 Approved: \$20,000 FY20 Spent: \$20,000 New Metrics: 0 of 3	Students served	4,000	5,471	●		5,600	5,471	●		3,750	109	●		5,250	173	●		1,200	15	●	2,400	
		Students who report being active one or more hours per day after program engagement	N/A	N/A		100%	56%	60%	●	67%	N/A	N/A		0%	58%	0%	●	0%	N/A	N/A		0%	58%
		Students who report the knowledge to limit sweetened beverages to 0 per day after program engagement	N/A	N/A			75%	58%	●		N/A	N/A			75%	42%	●			N/A	N/A		
HEALTHY MIND	African American Community Services Agency (AACSA) Screening/Referrals and Nutrition Education for Families FY22 Approved: \$28,000 FY21 Approved: \$25,000 FY21 Spent: \$25,000 FY20 Approved: \$20,000 FY20 Spent: \$20,000 New Metrics: 0 of 3	Individuals served	112	282	●		560	401	●		100	624	●		396	468	●		300	434	●	787	
		Encounters (screenings, workshops and class sessions)	112	325	●	100%	560	468	●	50%	150	770	●	100%	515	544	●	100%	400	550	●	100%	856
		Parents will report that they have gained a better understanding of how to support their child's healthy development	65%	75%	●		65%	75%	●		N/A	N/A			65%	65%	●			N/A	N/A		
HEALTHY MIND	BAWSI Girls Program Physical Activity & Self-esteem Program FY22 Approved: \$15,000 FY21 Approved: \$15,000 FY21 Spent: \$15,000 FY20 Approved: \$16,500 FY20 Spent: \$16,500 New Metrics: 0 of 3	Youth served	60	53	●		124	106	●		45	5	●		90	11	●		45	63	●	90	
		Average weekly virtual participation	80%	83%	●	67%	80%	83%	●	67%	80%	70%	●	33%	80%	64%	●	33%	80%	79%	●	67%	80%
		Parents who respond that they agree or strongly agree that their child wants to engage in more physical activity since joining the program	85%	93%	●		85%	86%	●		85%	100%	●		85%	80%	●			85%	66%	●	
HEALTHY MIND	Healthier Kids Foundation Dental & Hearing Screening/Referrals FY22 Approved: \$30,000 FY21 Approved: \$30,000 FY21 Spent: \$30,000 FY20 Approved: \$30,000 FY20 Spent: \$30,000 New Metrics: 0 of 4	Children screened through DentalFirst	175	168	●		350	364	●		175	103	●		350	418	●		175	276	●	350	
		Children screened through HearingFirst	175	200	●		350	595	●		N/A	N/A			176	209	●		175	276	●	350	
		Of children dental screened who received a referral, the percent that received and completed appropriate dental services	75%	74%	●	75%	75%	69%	●	100%	60%	75%	●	50%	62%	86%	●	100%	65%	40%	●	75%	65%
		Of children hearing screened who received a referral, the percent that received and completed appropriate hearing services	35%	28%	●		35%	36%	●		N/A	N/A			30%	71%	●			30%	76%	●	
HEALTHY MIND	Bill Wilson Center Psychotherapy for Child Abuse Victims FY22 Approved: \$25,000 FY21 Approved: \$25,000 FY21 Spent: \$25,000 FY20 Approved: \$25,000 FY20 Spent: \$25,000 New Metrics: 1 of 3	Youth served (abused children)	6	6	●		12	12	●		6	6	●		12	12	●		6	6	●	12	
		Services provided	60	65	●	100%	120	133	●	100%	60	64	●	100%	120	135	●	100%	60	48	●	67%	120
		Clients completing the program who report that they have learned one new healthy coping mechanism	-	-			-	-			-	-			-	-				80%	100%	●	
HEALTHY MIND	Cancer CAREpoint Counseling for Cancer Patients, Survivors, Family & Caregivers FY22 Approved: \$30,000 FY21 Approved: \$22,000 FY21 Spent: \$22,000 FY20 Approved: \$21,600 FY20 Spent: \$21,600 New Metrics: 0 of 4	Individuals served	100	108	●		250	266	●		120	112	●		250	227	●		100	98	●	210	
		Counseling sessions provided	200	214	●		450	499	●		220	456	●		459	459	●		300	411	●	625	
		Clients who agree or strongly agree they experienced reduced levels of anxiety about issues related to a cancer diagnosis	85%	78%	●	100%	85%	89%	●	100%	85%	80%	●	100%	85%	80%	●	100%	80%	81%	●	100%	80%
		Clients who agree or strongly agree that they received helpful tools or resources	85%	93%	●		85%	96%	●		90%	87%	●		90%	90%	●			90%	89%	●	

Community Benefit Dashboard Notes

- A metric receives a "green" indicator if performance against target is 90% - 100%
- A metric receives a "purple" indicator if performance against target is 75% - 89%
- A metric receives a "blue" indicator if performance against target is 0% - 74%

N/A There are some 6-month metric targets with "N/A" because the client/patient has not had significant exposure to the intervention in order to accurately evaluate effectiveness or because activities or surveys are not scheduled until the second half of the year

Health Priority Area <i>Column A</i>	Agency/Program <i>Column B</i>	FY22 Metrics <i>Column C</i>	Performance against target: ● = 90%+ ● = 75% - 89% ● = 0% - 74%																				
			FY20 6-month Target <i>Column D</i>	FY20 6-month Actual <i>Column E</i>	FY20 % 6-month Metrics Met <i>Column F</i>	FY20 Yearend Target <i>Column G</i>	FY20 Yearend Actual <i>Column H</i>	FY20 % Yearend Metrics Met <i>Column I</i>	FY21 6-month Target <i>Column J</i>	FY21 6-month Actual <i>Column K</i>	FY21 % 6-month Metrics Met <i>Column L</i>	FY21 Yearend Target <i>Column M</i>	FY21 Yearend Actual <i>Column N</i>	FY21 % Yearend Metrics Met <i>Column O</i>	FY22 6-month Target <i>Column P</i>	FY22 6-month Actual <i>Column Q</i>	FY22 % 6-month Metrics Met <i>Column R</i>	FY22 Yearend Target <i>Column S</i>	FY22 Yearend Actual <i>Column T</i>	FY22 % Yearend Metrics Met <i>Column U</i>			
HEALTHY COMMUNITY 	Downtown Streets Team FY22 Approved: \$30,000 New Metrics: N/A	Individuals served (unduplicated)	-	-		-	-		-	-		-	-		10	80	●	-	-		20		
		Services provided	-	-		-	-		-	-		-	-		152	147	●	-	-		304		
		Participants who report improved their self-esteem, motivation, and/or hope since joining the program	-	-		New Program in FY22	-	-		New Program in FY22	-	-		New Program in FY22	-	-		New Program in FY22	-	-		100%	75%
		Barriers removed related to housing, employment, health, and/or self-sufficiency cumulatively for all unduplicated participants	-	-		-	-		-	-		-	-		30%	89%	●	-	-		60%		
		Participants who report decreased quantity or improved the quality of interactions with law enforcement/the court system	-	-		-	-		-	-		-	-		N/A	N/A		-	-		40%		
	First Community Housing FY22 Approved: \$30,000 New Metrics: N/A	Individuals served (unduplicated)	-	-		-	-		-	-		-	-		125	319	●	-	-		250		
		Services provided (duplicated)	-	-		-	-		-	-		-	-		250	487	●	-	-		500		
		Residents reported committing to eating more fruits and vegetables.	-	-		New Program in FY22	-	-		New Program in FY22	-	-		New Program in FY22	50%	91%	●	-	-		100%	60%	
		Residents reported committing to doing more physical activity.	-	-		-	-		-	-		-	-		50%	82%	●	-	-		60%		
		Residents reported committing to reducing toxins in their home.	-	-		-	-		-	-		-	-		50%	91%	●	-	-		60%		
	Los Gatos Saratoga Recreation Senior Isolation Program FY22 Approved: \$20,000 FY21 Approved: \$20,000 FY21 Spent: \$20,000 FY20 Approved: \$20,000 FY20 Spent: \$20,000 New Metrics: 0 of 3	Individuals served	100	102	●	-	200	148	●	60	180	●	120	200	●	125	281	●	-	-		200	
		Services provided	-	-		100%	-	-	0%	114	100	●	715	479	●	2,004	1,042	●	67%	67%		3,340	
		Participants who agree or strongly agree feeling less isolated as a result of the program	-	-		-	-		-	-		65%	66%	●	65%	65%	●	-	-		65%		
	Pink Ribbon Girls Cancer Support Program FY22 Approved: \$25,000 New Metric: N/A	Individuals served (unduplicated)	-	-		-	-		-	-		-	-		24	42	●	-	-		60		
		Services provided	-	-		-	-		-	-		-	-		490	1,472	●	-	-		1,275		
		Patients who report feeling stronger and well-nourished through treatment as reflected in off-boarding survey	-	-		New Program in FY22	-	-		New Program in FY22	-	-		New Program in FY22	80%	86%	●	-	-		100%	80%	
		Social workers who report that treatment compliance has increased by at least 20%	-	-		-	-		-	-		-	-		50%	75%	●	-	-		50%		
		Participants in peer support who report at least a 50% decrease in feelings of loneliness and isolation	-	-		-	-		-	-		-	-		35%	65%	●	-	-		35%		
	Rebuilding Together Silicon Valley Falls Prevention Services for at-risk Older Adults FY22 Approved: \$30,000 FY21 Approved: \$30,000 FY21 Spent: \$30,000 New Metrics: 0 of 4	Older adults served	-	-		-	-		-	-		5	13	●	17	26	●	-	-		24		
		Older adults who report their overall health has improved somewhat or a lot since completed repairs/modifications.	-	-		New Program in FY21	-	-		New Program in FY21	-	-		New Program in FY21	N/A	N/A		100%	100%		75%		
Older adults who report a low or no chance of falling due to completed repairs/modifications.		-	-		-	-		-	-		-	-		60%	60%	●	-	-		65%			
Older adults who report at least a 1-point increase in their ability to move around their home.		-	-		-	-		-	-		-	-		60%	60%	●	-	-		65%			

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