

GOVERNING BOARD MEETING

July 25, 2024
1:30 p.m.

*(In person and Via Webex
Conferencing)*

**Sprowel Creek Campus, Rm 105
286 Sprowel Creek Road
Garberville, CA 95542**

MEETING NOTICE Governing Board

A regular meeting of the Board of Directors of the Southern Humboldt Community Healthcare District will be held on July 25, 2024, at 1:30 p.m., by teleconference and in-person. Members of the public may participate virtually via Webex or telephone, or appear in person at the Sprowel Creek Campus at 286 Sprowel Creek Road, Garberville, California 95542.

Call-In Information:

Tap to join from a mobile device (attendees only) [+1-415-655-0001](tel:+14156550001), [25961264606##](tel:+1415655000125961264606) US Toll

Join by phone +1-415-655-0001 US Toll

Webex Link: <https://shchd.webex.com/shchd/j.php?MTID=m65c1024281b4ef67076bbe032ec5f0d9>

Written comments may also be sent to boardcomments@shchd.org. Comments received no later than two hours prior to the start of the meeting will be provided to the Board or may be read aloud or summarized during the meeting. Members of the public may also comment in real time during the meeting by attending in person or via Webex or phone.

Agenda

Page	Item
	A. Call to Order
	B. Approval of the Teleconferencing of a Board Member
	C. Approval of the Agenda
	D. Public Comment on Non-Agendized Items See below for Public Comment Guidelines
	E. Board Member Comments Board members are invited to address issues not on the agenda and to submit items within the subject jurisdiction of the Board for future consideration. Please limit individual comments to three minutes.
	F. Announcements
	G. Approval of Consent Agenda –
1-5	1. Approval of Previous Minutes
	a. Governing Board Meeting Minutes, June 27, 2024

- 6-10
 - 2. SHCHD New and Updated Policies
 - a. Human Resources – Employee Handbook Policy - Season
 - b. HIM – Coding Guidelines – Remy
 - c. HIM – Medical Records Consultant – Remy
 - d. HIM – Security of Medical Records – Remy
 - 3. Quarterly Reports - (Feb, May, Aug, Nov)- None
 - a. Quality and Risk Management – Kristen Rees, Chief Quality and Compliance Officer and Risk Manager
 - b. Human Resources – Rachel Wells, HR Director
 - c. Foundation – Chelsea Brown, Outreach Manager

- H. Correspondence, Suggestions, or Written Comments to the Board

- I. Last Action Items for Discussion
 - 10
 - 1. Approval of Quality Compliance Plan and Associated Forms.
 - 2. Approval of the Operating Budget – Paul Eves – See Attached
 - 3. Approval of Medical Staff Bylaws – Changes Include Credentialing by Proxy, Technical and Editorial Corrections and Urgent Amendments – Karen Johnson

- J. Administrator’s Report – Matt Rees, CEO
 - 12-24
 - 1. Department Updates
 - a. Milestones
 - b. June Employee Anniversaries – Season Bradley-Koskinen 1 year, Ariel Rayco 5 years, and Jessica Little and Lora Simone 10 Years.
 - 25-27
 - c. Financial Reports – Paul Eves, CFO
 - d. Nursing – Adela Yanez, CNO
 - e. Quality and Risk Management – Kristen Rees, CQO
 - f. Family Resource Center – Amy Terrones – Mar and Oct

- K. Old Business
 - 1. Hiring Doctors/Practitioners Update – Matt Reess

- L. New Business
 - 28
 - 1. Approval of Resolution 24:08 for the Ordering of a Levy of a Special Tax and for Approving Collections of this tax for the 2024-2025 fiscal year.
 - 29-37
 - 2. Approval of Resolution 24:09 for the offer, purchase price of \$30,300, and granting signature authority for Kent Scown, COO, for the following Real Properties APN 032-091-019, 032-091-016, 032-171-019, and 032-091-017 from the California Department of Transportation.
 - a. DD-5678-01-01
 - b. DD-6596-01-01

3. Strategic Items for Discussion
 - a. Future Facilities Planning
 - b. Services

- M. Parking Lot
 1. Sprowel Creek Campus parking

- N. Meeting Evaluation

- O. New Action Items

- P. Next Meetings
 1. Medical Staff Committee – Policy Development – Thursday, August 1, 2024, at 3:00 p.m
 2. Medical Staff Committee – Thursday, August 8, 2024, 12:30 p.m.
 3. QAPI Meeting – Wednesday, August 14, 2024, at 10:00 a.m.
 4. Finance Committee – Friday, August 23, 2024, at 10:00 a.m.
 5. Governing Board Meeting – Thursday, August 29, 2024, at 1:30 p.m.

- Q. Adjourn to Closed Session
 1. Closed Session
 2. Reports of Quality Assurance Committees [**H&S Code § 32155**]
 3. Compliance and Risk - Kristen Rees, CQO
 4. Quarterly Reports - Adela Yanez, CNO
 - a. Clinic – Jan., Apr., July, Oct. - None
 - b. Patient Safety – Mar., June, Sept., Dec. - Received
 - c. Medication Error – Feb., May, Aug., Dec. – Received
 5. Approval of Medical Staff Appointments/Reappointments [**H&S Code § 32155**]
 - a. Dr. Dennis McDonald, Reappointment as Telemedicine, Diagnostic Radiology and Mammography Privileges, August 1, 2024 to July 31, 2026.
 6. Personnel matter –Evaluation § 54957
 - a. CEO Matt Rees

- R. Adjourn Closed Session; Report on Any Action Taken, If Needed

- S. Resume Open Session

- T. Adjourn

Abbreviations

<i>ACHD</i>	Association of California Healthcare Districts	<i>ACLS</i>	Advanced Cardiac Life Support Certification
<i>AR</i>	Accounts Receivable	<i>BLS</i>	Basic Life Support Certification
<i>CAIR</i>	California Immunization Registry	<i>CEO</i>	Chief Executive Officer
<i>CFO</i>	Chief Financial Officer	<i>CMS</i>	Centers for Medicare and Medicaid Services
<i>CNO</i>	Chief Nursing Officer	<i>COO</i>	Chief Operating Officer
<i>CPHQ</i>	Certified Professional in Healthcare Quality	<i>COO</i>	Chief Quality and Compliance Officer
<i>EMR</i>	Electronic medical record	<i>ER</i>	Emergency Room
<i>FTE</i>	Full Time Equivalent/Full Time Employee	<i>HIM</i>	Health Information Management
<i>HRG</i>	Healthcare Resource Group	<i>HVAC</i>	Heating, Ventilation and Air Conditioning system
<i>IGT</i>	Intergovernmental transfer	<i>IT</i>	Information Technology
<i>JPCH</i>	Jerold Phelps Community Hospital	<i>LCSW</i>	Licensed Clinical Social Worker
<i>LVN</i>	Licensed Vocational Nurse	<i>MPH</i>	Master of Public Health
<i>OBS</i>	Observation	<i>PALS</i>	Pediatric Advanced Life Support Certification
<i>PFS</i>	Patient Financial Services	<i>QAPI</i>	Quality Assurance Performance Improvement
<i>QIP</i>	Quality Improvement Project/Program	<i>RN</i>	Registered Nurse
<i>SHCC</i>	Southern Humboldt Community Clinic	<i>SHCHD</i>	Southern Humboldt Community Healthcare District
<i>SNF</i>	Skilled Nursing Facility	<i>SWG</i>	Swing beds
<i>DO</i>	Doctor of Osteopathic Medicine		

PUBLIC COMMENT ON MATTERS NOT ON THE MEETING AGENDA: Members of the public are welcome to address the Board on items not listed on the agenda and within the jurisdiction of the Board of Directors. The Board is prohibited by law from taking action on matters not on the agenda, but may ask questions to clarify the speaker’s comment and/or briefly answer questions. The Board limits testimony on matters not on the agenda to three minutes per person and not more than ten minutes for a particular subject, at the discretion of the Chair of the Board.

PUBLIC COMMENT ON MATTERS THAT ARE ON THE AGENDA: Individuals wishing to address the Board regarding items on the agenda may do so after the Board has completed their initial discussion of the item and before the matter is voted on, so that the Board may have the benefit of these comments before making their decision. Please remember that it is the Board’s responsibility to discuss matters thoroughly amongst themselves and that, because of Brown Act constraints, the Board meeting is their only opportunity to do so. Comments are limited to three minutes per person per agenda item, at the discretion of the Chair of the Board.

OTHER OPPORTUNITIES FOR PUBLIC COMMENT: Members of the public are encouraged to submit written comments to the Board at any time by writing to SHCHD Board of Directors, 733 Cedar Street, Garberville, CA 95542. Writers who identify themselves may, at their discretion, ask that their comments be shared publicly. All other comments shall be kept confidential to the Board and appropriate staff.

IN COMPLIANCE WITH THE AMERICANS WITH DISABILITIES ACT, if you require special accommodations to participate in a District meeting, please contact the District Clerk at 707-923-3921, ext. 1276 at least 48 hours prior to the meeting.”

**Times are estimated*

COPIES OF OPEN SESSION AGENDA ITEMS: Members of the public are welcome to see and obtain copies of the open session regular meeting documents by contacting SHCHD Administration at (707) 923-3921 ext. 1276 or stopping by 291 Sprowel Creek Rd, Garberville, CA 95542 during regular business hours. Copies may also be obtained on the District’s website, sohumhealth.org.

Posted Monday, July 22, 2024

Governing Board

Date: Thursday, June 27, 2024
Time: 10:00 a.m.
Location: Sprowel Creek Campus and Via Webex Conferencing
Facilitator: Board President, Corinne Stromstad

Minutes

The following people attended at Sprowel Creek Campus and via Webex

Governing Board: Corinne Stromstad, Barbara Truitt, and Jay Sooter, all in-person

Not Present: Galen Latsko and Kevin Church

Also in person: CEO Matt Rees, Lead Architect Doug Straut, Beth Nelson, Michael Hsu, Outreach Manager Chelsea Brown, HIM Manager Remy Quinn, ESA Lead Kana Voelckers, HR Manager Season Bradley Koskinen, HR Assistant Kiley Boyd, CQO Kristen Rees, Administrative Assistant Darrin Guerra, CFO Paul Eves, and Vice Chief of Staff Dr. Joseph Rogers

Also via Webex: COO Kent Scown, Adam Dias, and Chief of Staff Dr. Carl Hsu

A. Call to Order – Board president Corinne Stromstad called the meeting to order.

B. Approval of the Teleconferencing of a Board Member – None

C. Approval of the Agenda

Motion: Barbara Truitt motioned to approve the agenda.
Second: Jay Sooter
Ayes: Corinne Stromstad, Jay Sooter, and Barbara Truitt
Noes: None
Not Present: Galen Latsko and Kevin Church
Motion Carried

D. Public Comment on Non-Agendized Items - None

E. Board Member Comments – None

F. Announcements

G. Consent Agenda

1. Approval of Previous Minutes
 - a. Governing Board Meeting Minutes, June 6, 2024
2. SHCHD New and Updated Policies
 - a. Engineering – Emergency Generator Monitoring P&P – Shannon
 - b. HIM – Authorization to Treat Minors P&P – Remy
 - c. HIM - Advance Directives – Remy
3. Approval of Quarterly Quality Assurance Performance Improvement Committee Report (Feb, May, Aug, Nov) – None
4. Quarterly Reports – (Feb., May., Aug., Nov) - None
 - a. Quality and Risk Management – Kristen Rees, Chief Quality and Compliance Officer and Risk Manager
 - b. Human Resources – Rachel Wells, Interim HR Manager
 - c. Foundation – Chelsea Brown

Motion: Barbara Truitt motioned to approve the Consent Agenda

Second: Jay Sooter

Ayes: Corinne Stromstad, Jay Sooter, and Barbara Truitt

Noes: None

Not Present: Galen Latsko and Kevin Church

Motion Carried

H. Correspondence Suggestions or Written Comments to the Board – None

I. Action Items for Discussion

1. Approval of Quality Compliance Plan and Associated Forms.
 - a. Barbara Truitt requested to table this action until the July 25 Governing Board Meeting.
 - b. No action was taken.

J. Administrator’s Report – Matt Rees, CEO

Matt Rees introduced Items 1-2 and presented his staff report.

1. Department Updates
 - a. Ratcliff Update
 - i. Lead Architect Doug Straut, Beth Nelson, and Michael Hsu presented a detailed slide PowerPoint to the Governing Board and the public.
 - ii. Board discussion ensued.
 - b. Milestones – Employee Anniversaries
 - i. The governing Board congratulated and presented Anniversary awards to Kiley Boyd, 1 Year, and Chelsea Brown, 5 Years

- c. Approval of Financial Reports – Paul Eves, CFO July 2023- March 2024 financials and HRG Report
 - i. Board discussion with the administrative team centered on the ongoing issues with NetSuite and EPIC.
 - ii. Marie Brown and Remy Quinn shared the June HRG report with the public and the Governing Board.
 - iii. Members of the public, Darrin Guerra and Dr. Joseph Rogers, asked questions for clarity.

Motion: Barbara Truitt motioned to approve the July 2023- March 2024 financials and June HRG Report.
Second: Jay Sooter
Ayes: Corinne Stromstad, Jay Sooter, and Barbara Truitt
Noes: None
Not Present: Galen Latsko and Kevin Church
Motion Carried

- d. Nursing – Adela Yanez, CNO
- e. Quality and Risk Management – Kristen Rees, CQO
 - i. Kristen Rees presented her staff report.
- f. Family Resource Center – Amy Terrones – (Mar and Oct)

K. Old Business

- 1. Hiring Doctors/Practitioners Update – Matt Reess
 - a. Matt Rees was happy to announce that we have filled a few of our current job postings. In the month of June, we hired an Optometrist, a Substance Abuse Navigator, and a Telehealth LCSW and have contracted with a Speech Therapist.

L. New Business

- 1. Strategic Items for Discussion
 - a. Future Facilities Planning
 - b. Services

M. Parking Lot

N. Meeting Evaluation - Alright

O. New Action Items

- 1. Quality Compliance Plan and Associated Forms.
- 2. Medical Staff Bylaws.
- 3. Approval of the Operating Budget

P. Next Meetings

1. Medical Staff Committee – Policy Development – Tuesday, July 9, 2024, at 4:00 p.m.
2. Medical Staff Committee – Thursday, July 11, 2024, 12:30 p.m.
3. QAPI Meeting – Wednesday, July 10, 2024, at 10:00 a.m.
4. Finance Committee – Friday, July 19, 2024, at 10:00 a.m.
5. Governing Board Meeting – Thursday, July 25, 2024, at 1:30 p.m.

Q. Corinne Stromstad Adjourn to Closed Session

1. Closed Session Opened
2. Reports of Quality Assurance Committees [**H&S Code § 32155**]
3. Compliance and Risk - Kristen Rees, CQO
4. Quarterly Reports - Adela Yanez, CNO
 - a. Clinic – Jan., Apr., July, Oct.
 - b. Patient Safety – Mar., June, Sept., Dec.
 - c. Medication Error – Feb., May, Aug., Nov
5. Approval of Medical Staff Appointments/Reappointments [**H&S Code § 32155**]
 - a. Dr. Daniel Merges, Reappointment as Active Status, Emergency Department and Inpatient Privileges, July 1, 2024, to June 30, 2026.
6. Personnel matter –Evaluation § 54957 - None
 - a. CEO Matt Rees
7. Conference with Labor Negotiators §54957.6

R. Corinne Stromstad Adjourned Closed Session

S. Corinne Stromstad Resumed Open Session

Motion: Barbara Truitt motioned to approve Dr. Daniel Merges's reappointment as Active Status, Emergency Department, and Inpatient Privileges, July 1, 2024, to June 30, 2026.

Second: Jay Sooter

Ayes: Corinne Stromstad, Jay Sooter, and Barbara Truitt

Noes: None

Not Present: Galen Latsko and Kevin Church

Motion Carried

T. Corinne Stromstad Adjourned Open Session

Submitted by Darrin Guerra

Abbreviations

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SUBJECT: Employee Handbook	Department: Human Resources	EFFECTIVE DATE:
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POLICY

It is the policy of the Southern Humboldt Community Healthcare District (“SHCHD” or “District”) to follow the Employee Handbook.

PURPOSE

The purpose of this policy is to ensure that all employees have equitable access to the most frequently used and referenced Human Resource policies within our organization. By providing clear and accessible guidelines, we aim to foster a fair and transparent work environment where employees can easily understand their rights and responsibilities. This policy also serves to allow Human Resources to quickly update the Human Resources Handbook to stay in compliance with changing laws and regulations. Through transparent communication and accessibility, we strive to empower our employees with the knowledge they need to navigate HR-related matters effectively.

REVIEWED BY:

Human Resources Manager



Subject: Coding Guidelines	Manual: Health Information
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POLICY

It is the policy of Southern Humboldt Community Healthcare District ("SHCHD", "District", "SoHum Health") to provide accurate coding assignments for diagnosis and procedure(s) and enter these codes into ~~the District's the facility computer system~~ Electronic Health Record System. Codes should be entered in such a way as to ensure the quality, accuracy, consistency and integrity of codes assigned for each visit in the inpatient and outpatient settings within the District.

~~**PURPOSE:**~~

~~The purpose of this policy and procedure is to ensure the quality, accuracy, consistency and integrity of codes assigned for each visit in the inpatient and outpatient settings within Southern Humboldt Community Healthcare District.~~

PROCEDURE:

The contracted coding company for the ~~D~~district reviews ~~all~~the documentation in the ~~medical record~~ Electronic Health Record System for Acute Inpatient, Swing Bed, Skilled Nursing, Hospital Outpatient and Clinic services to accurately assign the correct diagnosis and procedure code(s) relevant for that visit. This process is accomplished by utilizing the most current ICD-9-10-CM (International Classification of Diseases 10th Revision), CPT (Physicians Current Procedural Terminology) national guidelines in conjunction with the supporting provider documentation.

The coder will select the ICD-9-10-CM and CPT procedure codes documented by the provider to be the reason for the visit. - Some CPT codes are attached to charges in the Chargemaster and will be assigned during charge entry. - These codes will be reviewed at the time of coding and modifiers will be added if applicable. If any discrepancies are noted during charge review which require clarification, ~~by the department~~ they will be referred back to the appropriate department for clarification or correction. -When documentation is unclear, non-specific, or contraindicative, the Provider will be queried for clarification.

~~Codes will be assigned in our current Electronic Health Record system in line with industry-accepted coding practices. Codes are assigned in the HIM module of the system-wide computer system.~~ When charges have been entered and verified, coding will complete coding and release the record for billing.

REFERENCES:

California Administrative Code, Title XXII

California Hospital Association – California Hospital Compliance Manual [14th Edition March 2023] Chapter 4: Submission of Accurate Claims Information [page 4.1 – 4.47]

Centers for Disease control and Prevention – National Center for Health Statistics International Classification of Diseases, Tenth Revision (ICD-10) <https://www.cdc.gov/nchs/icd/icd10.htm>

American Medical Association – Current Procedural Terminology <https://www.ama-assn.org/amaone/cpt-current-procedural-terminology>

DEFINITIONS

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REVIEWED BY:
Health Information Manager

Page 2 of 2

Subject: Medical Records Consultant	Manual: Health Information
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POLICY

It is the policy of Southern Humboldt Community Healthcare District ("SHCHD", "District", "SoHum Health") to use a consultant to meet the requirement of Title XXII, section 70747(b), which requires that the ~~Medical Records Service~~Health Information Department's Medical Records Service be under the supervision of a ~~Registered Health Information Technician ("RHIT") or Registered Health Information Administrator ("RHIA").~~ The Health Information Department will administer the Medical Records Service as designated by Title XXII, section 70747.

PROCEDURE

The purpose of this procedure is to delineate the scope of the consultant's involvement with the ~~medical records~~Health Information Department's Medical Records Service.

1. The consultant will complete the requirements of the American Health Information Management Association's ("AHIMA") Maintenance of Certification program for continuing education credits. A copy of the current Continuing Education Validation Certificate will be maintained by the consultant and be made available to the District upon request. ~~Administration.~~
2. The ~~initial visit by the~~ consultant will ~~be for the purposes of~~ assessing the overall functioning of the department. ~~and They will assist where needed to ensure the department meets all regulatory requirements, for preparing a work plan. Subsequent visits will be for assisting the department in carrying out the work plan, providing~~ a resource for problem ~~solving~~, and monitoring department operations ~~as requested by the District. They will work with the Health Information Manager to identify areas for improvement.~~
3. The consultant will be available for telephone or video conference consultation on an as needed basis. ~~They and~~ will submit ~~regular dated~~ reports as requested by the Health Information Manager documenting their recommendations and continuing assessment of the Health Information Department's Medical Records Service.
4. ~~The effectiveness of this method of providing consultation to the Medical Records Department will be evaluated annually as part of the overall evaluation of the hospital Plan for Provision of Patient Care.~~

REFERENCES

California Administrative Code, Title XXII, Section 70747(b).

DEFINITIONS

None

REVIEWED BY

Health Information Manager



Subject: Security of Medical Records	Manual: Health Information
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POLICY

It is the policy of Southern Humboldt Community Healthcare District ("SHCHD", "District", "SoHum Health") to operate the Health Information Management Department' Medical Records Service according to standards of practice and applicable laws.

PURPOSE

~~To define how medical records are secured.~~

PROCEDURE

1. ~~Ownership of the Record:~~

~~The m~~Medical records ~~(including x-ray films) is are~~ the property of the ~~hospital~~District. ~~It is-They are~~ maintained for the benefit of the patient, the medical staff, ~~and the hospital, and to comply with state and federal regulation.~~ -The information within the medical record belongs to the patient. - Unless otherwise allowed by regulation, law, court order, or subpoena, the contents of a medical record will not be released without the patient's written authorization. The patient has a right to inspect or obtain a copy of his/her/their medical record in accordance with state law.

2. ~~Removal of Records from the Hospital:~~

The original patient medical record will not be removed from the ~~hospital's~~District's jurisdiction and safekeeping, except in accordance with a court order, subpoena, or statute.

3. ~~Security:~~

Security:

~~a.~~ AreasDistrict departments housing medical records shall be restricted to authorized personnel only.

~~b.~~ Medical records shall not be left unattended in areas accessible to unauthorized individuals.

~~c.~~ Medical records ~~Storage areas and the Health Information Department,~~ shall remain locked at all times when authorized staff ~~are~~ not present.

~~d.~~ Access to the Health Information Department is restricted to ~~the Medical Records-Health Information Staff, Revenue Cycle and Clinical Administrators, the Nurse Manager-Clinical Services, Engineering, and the ER/Acute nurse on duty~~Housekeeping.

~~a-e.~~ Any area ofAll records present or visible in ~~-~~the Health Information Management Department which has any form of records present or visible will be locked or secured whenever staff are not present in the ~~d~~Department.

~~b-f.~~ Medical records will be maintained in such a manner that they are protected from damage by fire and/or water. The records will be protected against loss, defacement, tampering and against use by unauthorized individuals.

REFERENCES

California Administrative Code, Title XXII, Section 70747.

DEFINITIONS

Word: Definition

REVIEWED BY:

Health Information Manager

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Southern Humboldt Community Healthcare District Fiscal Year 2025 Budget

	2025 Budget
Inpatient Daily Hospital Services	2,200,000
I/P Ancillary Revenue	380,000
Outpatient Revenue	21,500,000
O/P Ancillary Revenue	7,200,000
Total Hospital Revenue	31,280,000
Contractual Allowances ^	8,200,000
Provision for Bad Debts	1,200,000
Other Allowances/Deductions	240,000
Other Non Operating Rev (Exp)	(7,000,000)
Total Deductions	2,640,000
Net Patient Revenue	28,640,000
Other Operating Revenue	140,000
Total Revenue	28,780,000
Salaries & Wages	13,275,000
Employee Benefits*	3,450,000
Professional Fees	3,600,000
Supplies	5,000,000
Repairs & Maintenance	360,000
Purchased Services	2,400,000
Utilities	360,000
Insurance	220,000
Depreciation & Amortization	650,000
Other Expense	1,260,000
Total Expenses	30,575,000
Expenses %	
Profit/Loss from Operations	(1,795,000)
Interest	(300,000)
Other Supplemental Revenue	1,000,000
Tax Revenue	1,110,000
Net Non-operating Rev/(Exp)	1,810,000
NET INCOME/ (LOSS)	15,000

^ Contractual Allows are 30% of gross revenue

*Employee benefits includes Workers Comp, health insurance and pension plan expenses.

Southern Humboldt Community Healthcare District

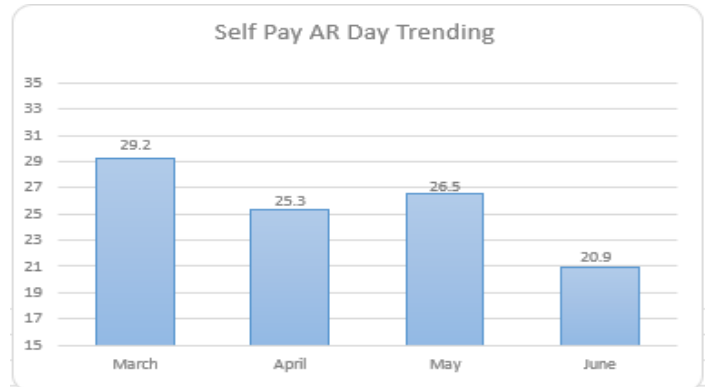
June 2024 – Centriq & Epic Combined



SoHum Health

Key Items

- ➔ **Cash totaled \$1.1M, 88% of net revenue**
- ➔ **AR decreased to 95.4 days**
- ➔ **Third Party aging increased \$32K, to 39.8%**
- ➔ **Unbilled AR decreased 1.2 days, ending at 15.9 days**



Detailed Initiatives & Obstacles

- **Overall AR:** The figures calculated continue to include both the legacy system (Centriq) and Epic figures combined. June closed with \$7.7M in gross AR or 95.4 days. Revenue came in \$267K higher than reported in May, ending at \$2.7M. Third Party AR saw an increase of 2 days ending at 58.6 days. Unbilled AR decreased by 1.2 days ending at 15.9 AR days. Cash collections came in roughly \$46K higher than what was collected in May, exceeding \$1M, or 88% of net revenue. We billed \$3.5K in June, \$888K more than the prior month and expect to see an increase in cash in July.
- **Self Pay:** Self Pay AR decreased by 5.6 days since May. Self Pay collections came in at \$32K, \$6K more than what was collected in May. In June, there were 409 accounts for \$249K sent to bad debt. The HRG/Trubridge Self-Pay Manager has started attending the SoHum Revenue cycle calls for full visibility on the Epic and Centriq Self-Pay AR. We have also assigned a resource to work specifically in the self-pay work queues in Epic to ensure those accounts are processing through the system appropriately. The newly added self-pay collector is in the process of reviewing Epic accounts for potential Bad Debt turns if the appropriate CA guidelines are met.
- **Third-Party Aging:** June closed with \$2.5M in third-party balances aged over 90 days, totaling 39.8%. Due to SoHum's EHR conversion, we continue the wind-down phase of Centriq—cleaning up outstanding and aged balances. We have assigned staff-specific accounts to work by high dollars and will continue until we see the desired reduction in AR. Medicare ended at \$428K aged over 90 days or 28.6%, this is an overall decrease of \$56K from May or a 7.6% decrease. Currently, Sydni is a working supervisor and responsible for the Medicare AR as well as the LTC. We received approval to add an additional staff member to backfill for Sydni giving her time to focus on other areas. Medicaid increased by \$34K down to 36.9%. Commercial increased \$55K decreasing its overall percentage to 55.9%, and Work Comp decreased roughly \$500.00 to 37.9%. Below is a breakdown of the current issues holding up AR. HRG is responsible for 22.3 days and will need reduce the AR by \$1.8M to bring third-party AR to goal. Increasing staff as well as focused assignments should bring us closer to the set goal within the next 30-60 days.
- **Centriq AR:** The team has been assigned a specific number of accounts they must work through daily (inclusive of credits) which will be reported back to the SoHum team.
- **Anthem Issue:** \$447K in accounts pending repayment due to an incorrect pay-to address. We were working with Anthem on repayments and are no longer receiving responses. This has been escalated to the SoHum team as it is impacting 5.5 days in AR.
- **Correct Care:** Correct Care is pending a newly signed contract and we are working with the SoHum team to resolve this. There are currently 14 accounts totaling \$55K, or .7 days in pending AR.
- **PB COVID Charges:** 206 accounts or \$76K are held up due to this issue. There is no impact on cash, however are being charged to accounts and negatively impacting AR by nearly 1-day in AR.



If you have any questions, concerns, or points you wish to discuss after reviewing the enclosed information, please feel free to contact me.

Sydni Thomas | Revenue Cycle Supervisor

Healthcare Resource Group

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SoHum Health

MONTH END FINANCE REPORT

June 2024



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FINANCE DASHBOARD

	Target	January-24	February-24	March-24	April-24	May-24	June-24
REVENUE							
Net Revenue		\$1,363,293	\$1,360,721	\$1,015,411	\$1,100,177	\$1,211,309	\$1,290,770
Gross Revenue		\$2,506,331	\$2,422,995	\$2,021,182	\$2,266,954	\$2,406,584	\$2,673,513
CASH							
Cash Collections as a % of Net Revenue	100%	92%	102%	81%	119%	93%	88%
Cash Collections		\$1,139,209	\$1,391,162	\$1,095,888	\$1,213,098	\$1,023,598	\$1,069,835
ACCOUNTS RECEIVABLE							
Net AR		\$3,416,047	\$3,653,343	\$3,348,215	\$2,912,953	\$3,470,980	\$3,112,865
Gross AR		\$6,787,249	\$7,052,380	\$6,946,485	\$6,645,338	\$7,288,529	\$7,701,902
Unbilled	3	22.8	13.8	14.9	13.3	17.1	15.9
Third Party	26	39.5	47.4	46.9	50.5	56.6	58.6
Self Pay	16	27.6	26.3	29.2	25.3	26.5	20.9
Total Days in AR	45	89.9	87.5	90.9	89.1	100.2	95.4
Days in AR - Credit Balances	< 1	3.85	3.83	1.96	4.26	2.39	4.39
UNBILLED							
In-house	< 2 Days	1.1	0.7	0.5	0.1	1.7	0.5
DNFB	< 1 Day	21.7	13.1	14.4	13.2	15.4	15.4
Total Unbilled	<3 Days	22.8	13.8	14.9	13.3	17.1	15.9

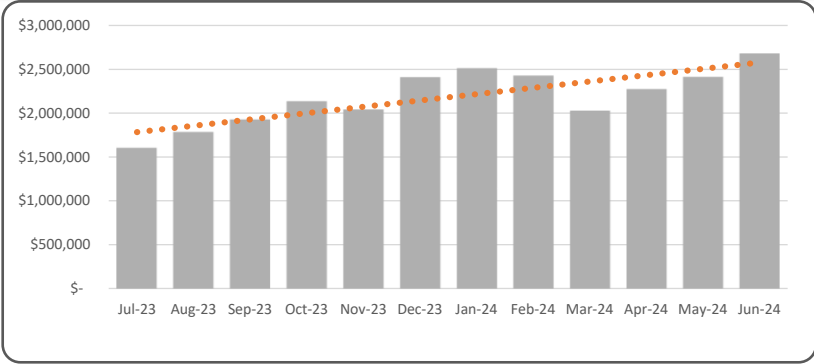
	Target	January-24	February-24	March-24	April-24	May-24	June-24
AGING (excluding credits)							
Medicare Aging > 90 Days	11%	26.5%	30.5%	33.1%	46.0%	36.2%	28.6%
Medicaid Aging > 90 Days	12%	33.8%	32.3%	37.7%	36.5%	43.2%	36.9%
Commercial Aging > 90 Days	20%	48.5%	46.7%	53.8%	54.6%	58.2%	55.9%
Work Comp Aging > 90 Days	35%	64.2%	42.9%	55.0%	51.0%	37.4%	37.9%
Total Third Party Aging > 90 Days	13%	35.1%	35.0%	40.5%	43.9%	45.4%	39.8%
CLAIM SUBMISSION EFFICIENCY							
Claims Submission		1,993 \$ 2,676,735	1,727 \$ 3,091,516	1,538 \$ 2,803,341	1,763 \$ 2,760,024	1,533 \$ 2,578,338	1,997 \$ 3,466,200
Clean Claims	85%	97%	96%	97%	97%	99%	99%
Denial Percent	5%	7%	9%	9%	10%	8%	6%
Total Denial Rate	Count Amt	270 \$ 154,975	308 \$ 249,006	234 \$ 279,308	333 \$ 267,412	354 \$ 231,110	224 \$ 149,538
Late Charges	Count Amt	67 \$ 7,612	28 \$ 7,746	52 \$ (8,444)	81 \$ (18,541)	43 \$ (46,904)	304 \$ 78,745
Communication Log Backlog		83 \$ 86,122	21 \$ 40,392	34 \$ 49,032	36 \$ 56,297	8 \$ 7,792	4 \$ 4,864

	Target	January-24	February-24	March-24	April-24	May-24	June-24
INVENTORY & QUALITY							
Total Inventory		2,528 \$ 2,087,543	2,500 \$ 2,122,365	2,537 \$ 2,228,193	2,078 \$ 1,883,672	2,146 \$ 1,926,672	1,776 \$ 1,684,185
New		7 \$ 4,842	5 \$ 2,109	12 \$ 6,485	7 \$ 3,278	0 \$ -	2 \$ 8,577
Resolved		79 \$ 66,023	117 \$ 108,550	124 \$ 73,203	20 \$ 14,167	556 \$ 479,902	436 \$ 243,260
Aged >180 days from Assignment	< 25%	52.1% \$ 1,088,207	48.6% \$ 1,032,447	45.4% \$ 1,011,471	26.2% \$ 492,735	25.2% \$ 486,203	14.4% \$ 242,869
Total Payment Plans over 120 days		\$19,292	\$18,662	\$19,950	\$18,943	\$18,173	\$14,980
Average Speed to Answer	< 60 seconds	7	7	10	30	34	23
STATEMENTS & LETTERS							
Statements & Letters		102	296	250	115	101	176
Charity Care Applications In Process		0 \$ -	26 \$ 70,997	80 \$ 30,398	0 \$ -	14 \$ 2,757	1 \$ 340
Inbound and Outbound Calls	In Out	129 152	136 209	140 190	128 216	169 672	166 276
WRITE OFFS							
Bad Debt as a % of Gross Revenue	< 2%	0.0% \$ -	2.2% \$ 54,417	0.0% \$ -	21.1% \$ 479,228	0.0% \$ -	9.3% \$ 248,562
Charity as a % of Gross Revenue	< 2%	2.3% \$ 56,527	0.4% \$ 10,025	0.5% \$ 9,508	0.4% \$ 10,166	0.0% \$ -	0.4% \$ 10,046

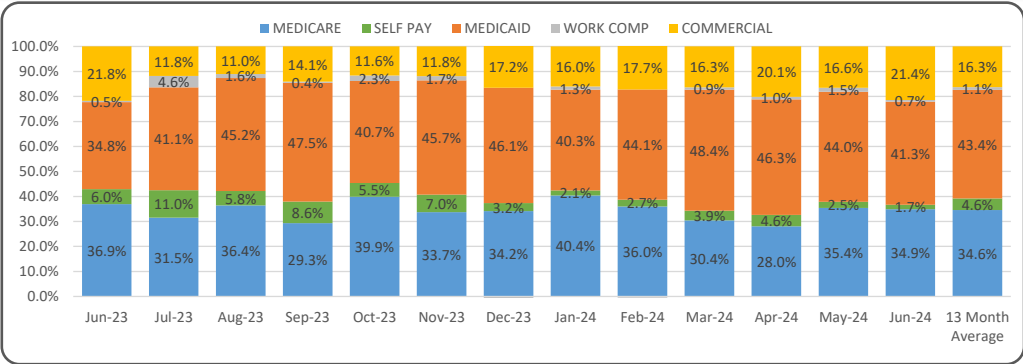
GROSS REVENUE

PAYER	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	13 Month Average
MEDICARE	\$ 770,520	\$ 504,094	\$ 648,555	\$ 563,819	\$ 849,853	\$ 686,408	\$ 820,695	\$ 1,011,885	\$ 873,176	\$ 615,389	\$ 635,762	\$ 852,190	\$ 933,285	\$ 751,202
MEDICAID	\$ 726,128	\$ 658,441	\$ 805,092	\$ 913,825	\$ 867,885	\$ 930,946	\$ 1,108,246	\$ 1,008,861	\$ 1,067,416	\$ 978,875	\$ 1,048,651	\$ 1,059,248	\$ 1,103,495	\$ 944,393
COMMERCIAL	\$ 454,637	\$ 189,003	\$ 196,363	\$ 271,079	\$ 247,190	\$ 241,360	\$ 413,697	\$ 402,037	\$ 429,688	\$ 329,806	\$ 456,749	\$ 398,468	\$ 572,709	\$ 354,061
WORK COMP	\$ 10,915	\$ 73,141	\$ 28,402	\$ 8,619	\$ 48,010	\$ 35,245	\$ (17,130)	\$ 32,033	\$ (12,352)	\$ 18,728	\$ 22,422	\$ 37,168	\$ 17,509	\$ 23,285
SELF PAY	\$ 126,294	\$ 175,618	\$ 102,746	\$ 164,957	\$ 117,250	\$ 143,534	\$ 76,560	\$ 51,516	\$ 65,067	\$ 78,384	\$ 103,370	\$ 59,510	\$ 46,514	\$ 100,871
TOTAL	\$ 2,088,494	\$ 1,600,297	\$ 1,781,158	\$ 1,922,299	\$ 2,130,187	\$ 2,037,494	\$ 2,402,068	\$ 2,506,331	\$ 2,422,995	\$ 2,021,182	\$ 2,266,954	\$ 2,406,584	\$ 2,673,513	\$ 2,173,812
AVERAGE DAILY REVENUE	\$ 60,691	\$ 59,681	\$ 58,817	\$ 55,829	\$ 61,407	\$ 65,484	\$ 71,410	\$ 75,499	\$ 80,565	\$ 76,379	\$ 74,568	\$ 72,769	\$ 80,737	\$ 68,757

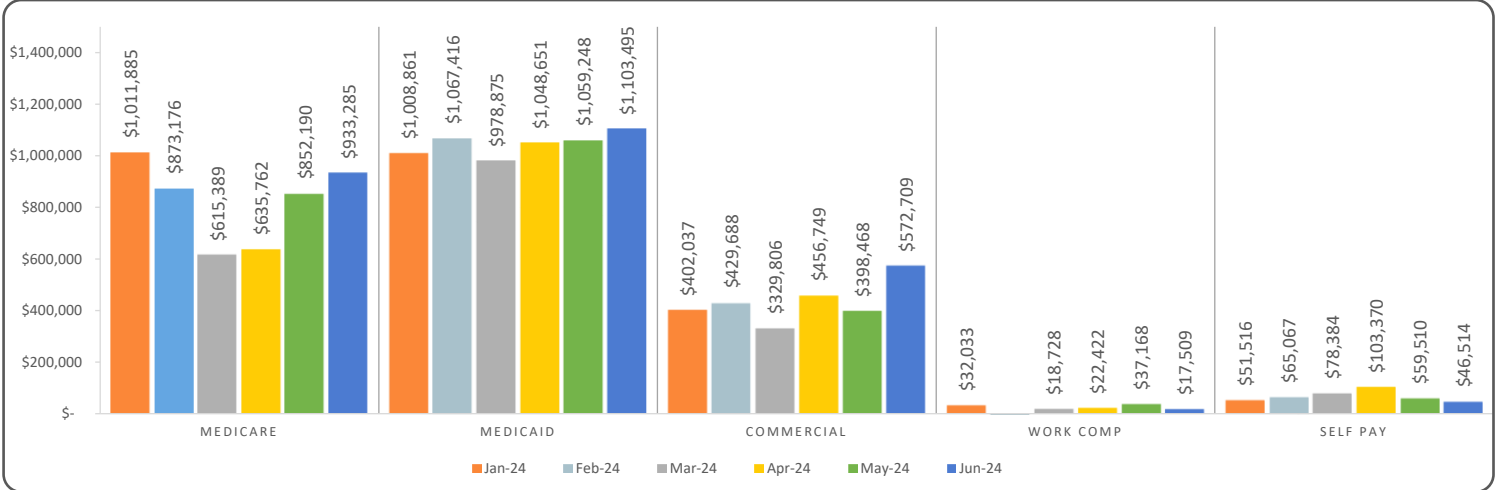
Gross Revenue



Payer Mix



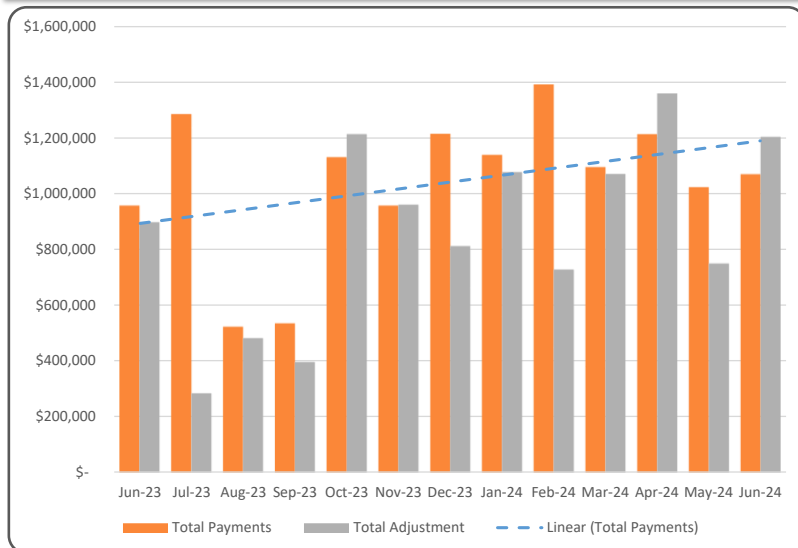
Revenue Trending By Payer



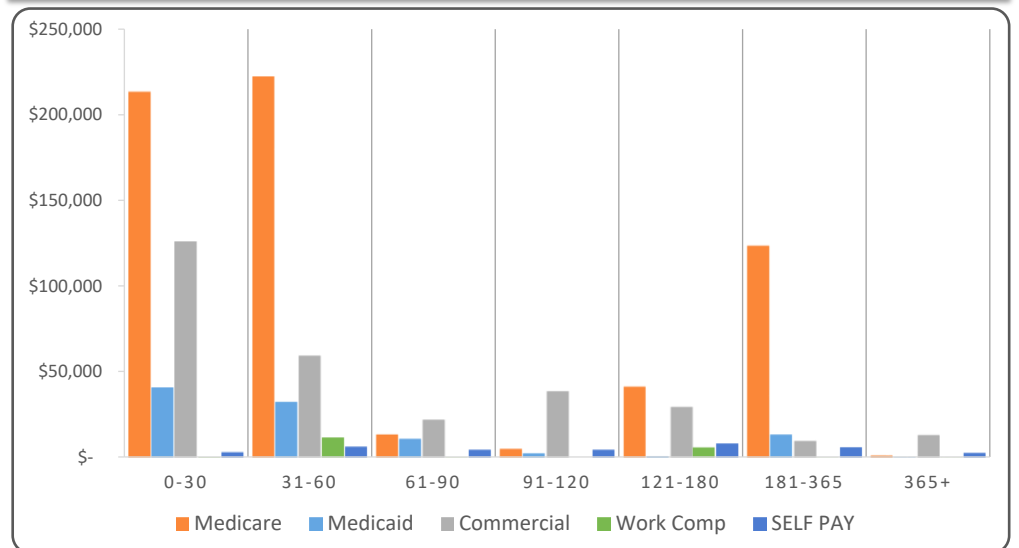
CASH DETAIL

PAYER	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	13 Month Average
MEDICARE														
Payments	\$ 380,113	\$ 851,353	\$ 273,732	\$ 303,327	\$ 572,057	\$ 539,621	\$ 656,043	\$ 661,118	\$ 918,553	\$ 534,506	\$ 693,621	\$ 604,561	\$ 616,646	\$ 585,019
Adjustments	\$ 166,800	\$ (297,566)	\$ 14,075	\$ 40,065	\$ 133,024	\$ 129,515	\$ 2,826	\$ 137,240	\$ (178,481)	\$ 75,696	\$ 137,172	\$ (91,180)	\$ 291,465	\$ 43,127
Collection %	70%	154%	95%	88%	81%	81%	100%	83%	124%	88%	83%	118%	68%	95%
MEDICAID														
Payments	\$ 275,555	\$ 192,283	\$ 90,923	\$ 92,296	\$ 313,889	\$ 229,010	\$ 310,938	\$ 242,089	\$ 202,951	\$ 308,231	\$ 239,691	\$ 164,030	\$ 97,940	\$ 212,294
Adjustments	\$ 571,141	\$ 466,985	\$ 399,800	\$ 295,314	\$ 971,132	\$ 641,672	\$ 700,680	\$ 799,319	\$ 712,729	\$ 868,417	\$ 639,713	\$ 701,030	\$ 503,340	\$ 636,252
Collection %	33%	29%	19%	24%	24%	26%	31%	23%	22%	26%	27%	19%	16%	25%
COMMERCIAL														
Payments	\$ 253,022	\$ 209,919	\$ 101,592	\$ 116,675	\$ 186,852	\$ 134,200	\$ 193,457	\$ 184,950	\$ 235,389	\$ 189,706	\$ 235,808	\$ 216,262	\$ 305,316	\$ 197,165
Adjustments	\$ 129,157	\$ 82,826	\$ 46,336	\$ 49,900	\$ 73,180	\$ 59,182	\$ 74,621	\$ 67,238	\$ 112,836	\$ 92,883	\$ 76,097	\$ 116,244	\$ 116,014	\$ 84,347
Collection %	66%	72%	69%	70%	72%	69%	72%	73%	68%	67%	76%	65%	72%	70%
WORK COMP														
Payments	\$ 6,593	\$ 11,971	\$ 34,920	\$ 2,990	\$ 18,118	\$ 7,910	\$ 30,109	\$ 13,561	\$ 4,542	\$ 31,805	\$ 10,514	\$ 12,100	\$ 17,155	\$ 15,561
Adjustments	\$ 2,215	\$ 7,288	\$ 7,277	\$ 2,489	\$ 4,838	\$ 739	\$ 24,588	\$ 5,401	\$ 2,553	\$ 8,362	\$ 5,425	\$ 8,259	\$ 3,256	\$ 6,361
Collection %	75%	62%	83%	55%	79%	91%	55%	72%	64%	79%	66%	59%	84%	71%
SELF PAY														
Payments	\$ 42,832	\$ 19,754	\$ 22,724	\$ 20,294	\$ 40,894	\$ 47,308	\$ 24,138	\$ 37,492	\$ 29,727	\$ 31,640	\$ 33,463	\$ 26,645	\$ 32,275	\$ 31,476
Bad Debt Recoveries	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 503	\$ 39
Adjustments	\$ 17,525	\$ 14,103	\$ 9,683	\$ 5,797	\$ 23,642	\$ 19,912	\$ 7,961	\$ 9,710	\$ 12,066	\$ 14,080	\$ 8,917	\$ 14,342	\$ 28,485	\$ 14,325
Charity Care	\$ 9,633	\$ 10,549	\$ 4,244	\$ 1,705	\$ 5,068	\$ -	\$ -	\$ 56,527	\$ 10,025	\$ 9,508	\$ 10,166	\$ -	\$ 10,046	\$ 9,805
Bad Debt	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 108,610	\$ -	\$ -	\$ 54,417	\$ -	\$ 479,228	\$ -	\$ 248,562	\$ 68,524
Total SP Adjustments	\$ 27,157	\$ 24,653	\$ 13,927	\$ 7,502	\$ 28,710	\$ 128,522	\$ 7,961	\$ 66,236	\$ 76,509	\$ 23,588	\$ 498,311	\$ 14,342	\$ 287,093	\$ 92,655
Collection %	61%	44%	62%	73%	59%	27%	75%	36%	28%	57%	6%	65%	10%	46%
TOTAL														
Total Payments	\$ 958,114	\$ 1,285,280	\$ 523,891	\$ 535,583	\$ 1,131,808	\$ 958,049	\$ 1,214,685	\$ 1,139,209	\$ 1,391,162	\$ 1,095,888	\$ 1,213,098	\$ 1,023,598	\$ 1,069,835	\$ 1,041,554
Total Adjustment	\$ 896,471	\$ 284,186	\$ 481,416	\$ 395,270	\$ 1,210,884	\$ 959,630	\$ 810,676	\$ 1,075,435	\$ 726,145	\$ 1,068,946	\$ 1,356,717	\$ 748,695	\$ 1,201,168	\$ 770,087
Total Collection %	52%	82%	52%	58%	48%	50%	60%	51%	66%	51%	47%	58%	47%	55%

Cash & Adjustment Trending

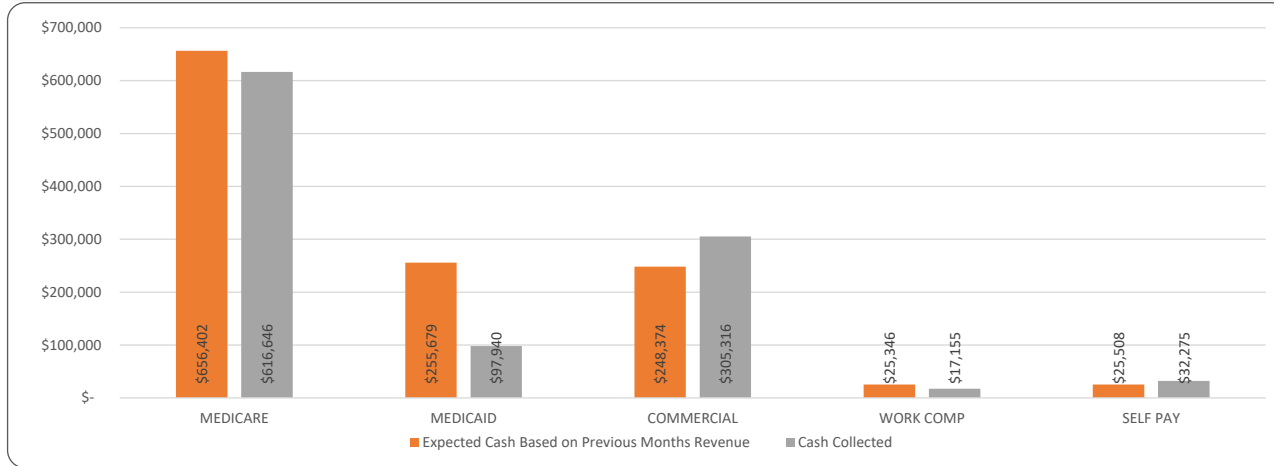


Cash Collections by Discharge Date

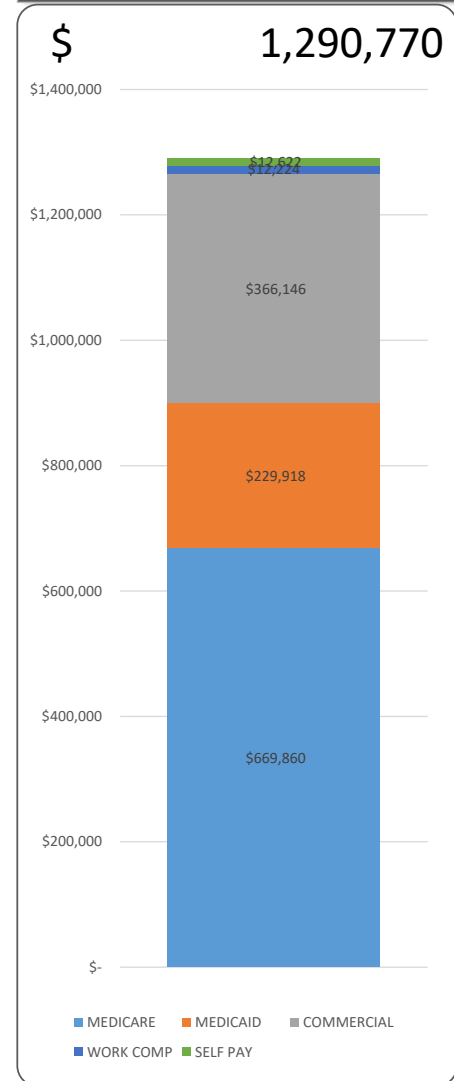


CASH FORECASTING

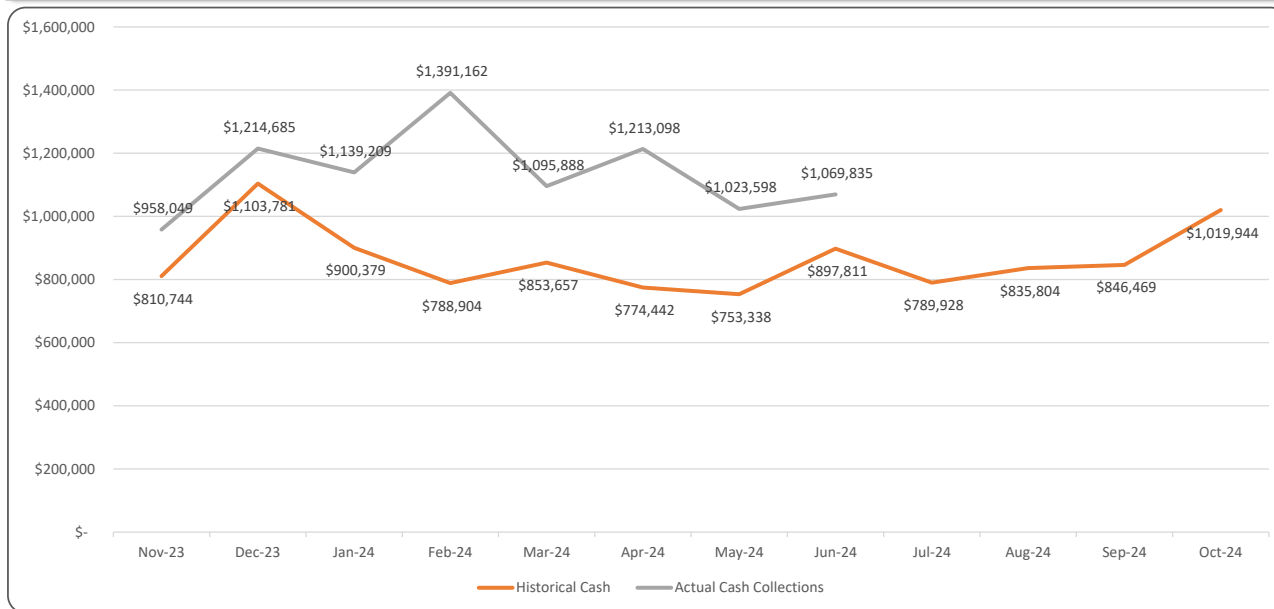
Expected Last Month vs Cash Collected (Based on Previous Months Revenue)



Cash Expected Next Month (Based on this Months Revenue)



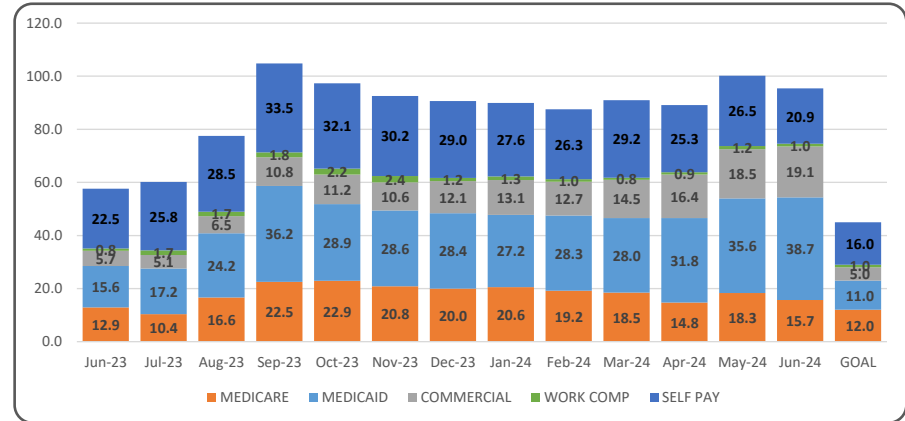
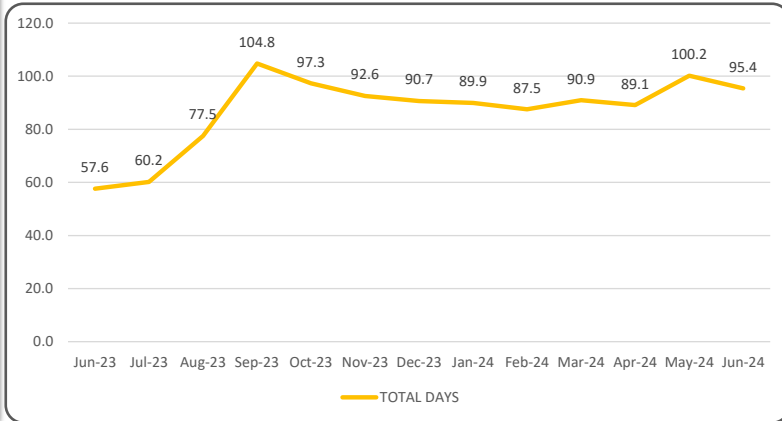
Actual Cash vs Historical Average Collections



ACCOUNTS RECEIVABLE

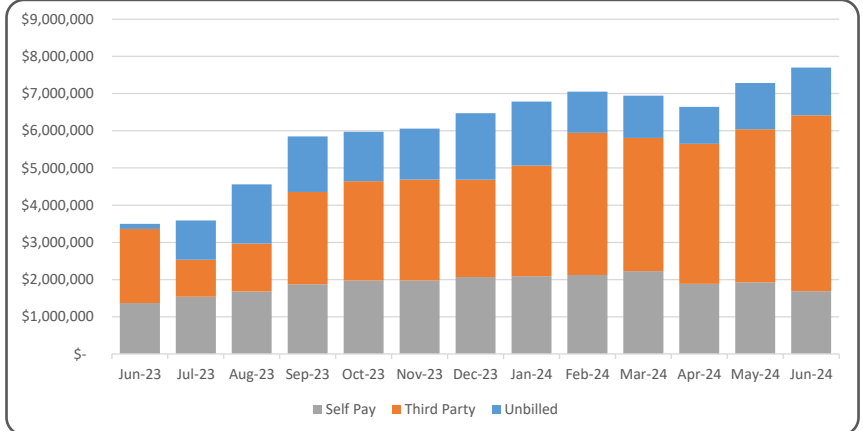
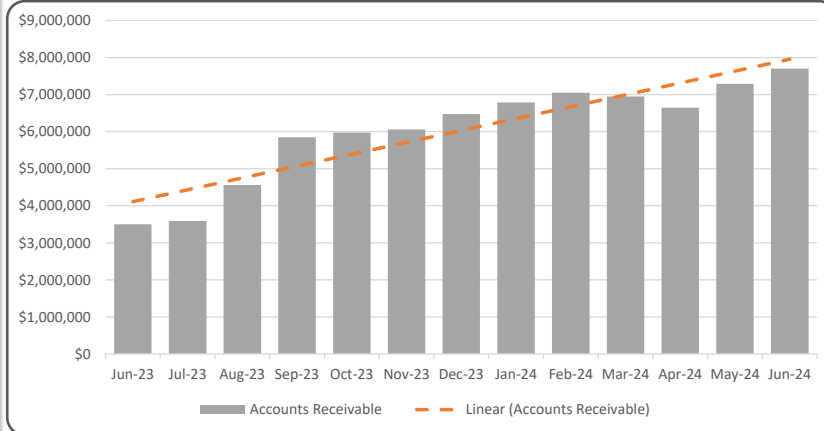
PAYER	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	13 Month Average
MEDICARE	12.9	10.4	16.6	22.5	22.9	20.8	20.0	20.6	19.2	18.5	14.8	18.3	15.7	17.9
MEDICAID	15.6	17.2	24.2	36.2	28.9	28.6	28.4	27.2	28.3	28.0	31.8	35.6	38.7	28.4
COMMERCIAL	5.7	5.1	6.5	10.8	11.2	10.6	12.1	13.1	12.7	14.5	16.4	18.5	19.1	12.0
WORK COMP	0.8	1.7	1.7	1.8	2.2	2.4	1.2	1.3	1.0	0.8	0.9	1.2	1.0	1.4
SELF PAY	22.5	25.8	28.5	33.5	32.1	30.2	29.0	27.6	26.3	29.2	25.3	26.5	20.9	27.5
TOTAL DAYS	57.6	60.2	77.5	104.8	97.3	92.6	90.7	89.9	87.5	90.9	89.1	100.2	95.4	87.2

AR Days



PAYER	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	13 Month Average
MEDICARE	\$ 783,065	\$ 619,122	\$ 977,025	\$ 1,257,444	\$ 1,408,379	\$ 1,364,196	\$ 1,430,057	\$ 1,552,239	\$ 1,546,696	\$ 1,414,285	\$ 1,101,851	\$ 1,334,185	\$ 1,264,190	\$ 1,234,826
MEDICAID	\$ 946,990	\$ 1,024,807	\$ 1,425,127	\$ 2,019,041	\$ 1,774,925	\$ 1,873,656	\$ 2,027,427	\$ 2,056,249	\$ 2,281,795	\$ 2,139,446	\$ 2,370,804	\$ 2,591,679	\$ 3,126,226	\$ 1,973,705
COMMERCIAL	\$ 348,563	\$ 306,012	\$ 380,817	\$ 600,808	\$ 684,736	\$ 692,018	\$ 861,736	\$ 990,874	\$ 1,024,848	\$ 1,105,847	\$ 1,222,227	\$ 1,348,694	\$ 1,545,259	\$ 854,803
WORK COMP	\$ 50,878	\$ 102,360	\$ 97,414	\$ 101,908	\$ 133,125	\$ 155,295	\$ 87,612	\$ 100,345	\$ 76,676	\$ 58,713	\$ 66,783	\$ 87,299	\$ 82,043	\$ 92,342
SELF PAY	\$ 1,367,447	\$ 1,539,006	\$ 1,678,055	\$ 1,871,417	\$ 1,973,313	\$ 1,975,406	\$ 2,068,907	\$ 2,087,543	\$ 2,122,365	\$ 2,228,193	\$ 1,883,672	\$ 1,926,672	\$ 1,684,185	\$ 1,877,399
TOTAL	\$ 3,496,943	\$ 3,591,307	\$ 4,558,438	\$ 5,850,618	\$ 5,974,477	\$ 6,060,571	\$ 6,475,740	\$ 6,787,249	\$ 7,052,380	\$ 6,946,485	\$ 6,645,338	\$ 7,288,529	\$ 7,701,902	\$ 6,033,075

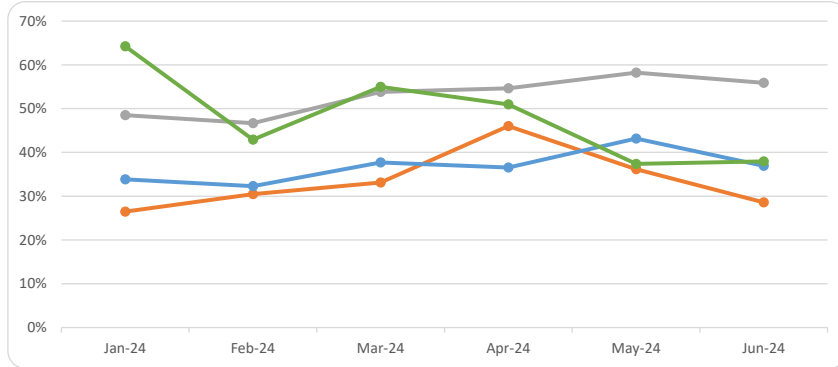
AR Balance



ACCOUNTS RECEIVABLE AGING

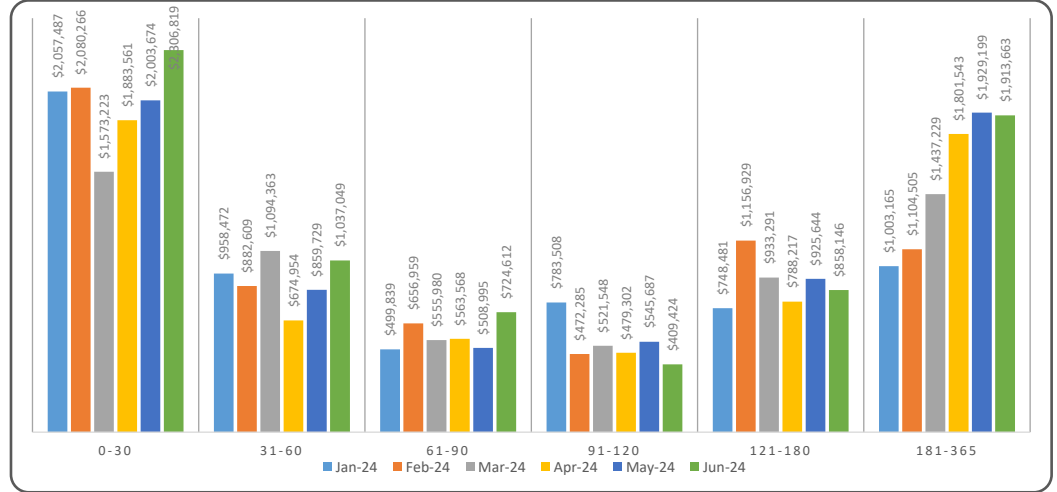
	0-30 Days		31-60 Days		61-90 Days		91-120 Days		121-180 Days		181-365 Days		366+ Days		Grand Totals	
	# Acts	\$	# Acts	\$	# Acts	\$	# Acts	\$	# Acts	\$	# Acts	\$	# Acts	\$	# Acts	\$
MEDICARE																
Non-Credit	303	\$ 809,036	52	\$ 219,142	27	\$ 42,203	23	\$ 61,888	45	\$ 106,908	84	\$ 242,713	12	\$ 16,869	546	\$ 1,498,760
Credit	2	\$ (120,210)	0	\$ -	0	\$ -	0	\$ -	1	\$ (24,748)	7	\$ (88,329)	6	\$ (1,284)	16	\$ (234,570)
TOTAL	305	\$ 688,825	52	\$ 219,142	27	\$ 42,203	23	\$ 61,888	46	\$ 82,161	91	\$ 154,384	18	\$ 15,586	562	\$ 1,264,190
MEDICAID																
Non-Credit	261	\$ 1,040,818	170	\$ 572,893	133	\$ 363,148	86	\$ 151,739	172	\$ 365,529	230	\$ 493,449	111	\$ 146,618	1163	\$ 3,134,194
Credit	0	\$ (278)	0	\$ -	2	\$ (45)	1	\$ (4)	5	\$ (1,512)	9	\$ (3,401)	17	\$ (2,727)	34	\$ (7,968)
TOTAL	261	\$ 1,040,540	170	\$ 572,893	135	\$ 363,103	87	\$ 151,735	177	\$ 364,017	239	\$ 490,047	128	\$ 143,891	1197	\$ 3,126,226
COMMERCIAL																
Non-Credit	280	\$ 458,609	106	\$ 119,129	70	\$ 135,914	61	\$ 112,488	121	\$ 222,567	277	\$ 487,340	117	\$ 82,773	1032	\$ 1,618,821
Credit	0	\$ -	0	\$ -	4	\$ (417)	0	\$ -	7	\$ (2,076)	7	\$ (9,203)	318	\$ (61,866)	336	\$ (73,562)
TOTAL	280	\$ 458,609	106	\$ 119,129	74	\$ 135,498	61	\$ 112,488	128	\$ 220,491	284	\$ 478,137	435	\$ 20,907	1368	\$ 1,545,259
WORK COMP																
Non-Credit	14	\$ 19,181	8	\$ 19,414	6	\$ 14,200	3	\$ 6,909	3	\$ 8,254	2	\$ 5,000	21	\$ 12,112	57	\$ 85,070
Credit	0	\$ (55)	0	\$ -	0	\$ -	0	\$ -	0	\$ -	1	\$ (414)	16	\$ (2,557)	17	\$ (3,027)
TOTAL	14	\$ 19,126	8	\$ 19,414	6	\$ 14,200	3	\$ 6,909	3	\$ 8,254	3	\$ 4,586	37	\$ 9,555	74	\$ 82,043
SELF PAY																
Non-Credit	75	\$ 95,814	114	\$ 108,027	108	\$ 170,632	73	\$ 77,015	145	\$ 185,931	404	\$ 792,332	523	\$ 289,576	1442	\$ 1,719,326
Credit	2	\$ 3,904	2	\$ (1,557)	3	\$ (1,024)	3	\$ (610)	4	\$ (2,708)	8	\$ (5,823)	312	\$ (27,323)	334	\$ (35,142)
TOTAL	77	\$ 99,719	116	\$ 106,470	111	\$ 169,608	76	\$ 76,404	149	\$ 183,223	412	\$ 786,509	835	\$ 262,252	1776	\$ 1,684,185
ACCOUNTS RECEIVABLE																
Non-Credit	933	\$ 2,423,458	450	\$ 1,038,606	344	\$ 726,098	246	\$ 410,038	486	\$ 889,189	997	\$ 2,020,834	784	\$ 547,948	4240	\$ 8,056,171
Credit	4	\$ (116,640)	2	\$ (1,557)	9	\$ (1,486)	4	\$ (615)	17	\$ (31,043)	32	\$ (107,171)	669	\$ (95,757)	737	\$ (354,269)
GRAND TOTAL	937	\$ 2,306,819	452	\$ 1,037,049	353	\$ 724,612	250	\$ 409,424	503	\$ 858,146	1029	\$ 1,913,663	1453	\$ 452,191	4977	\$ 7,701,920

Aged Over 90 Days Trending (excluding Credits)



	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24
Medicare	26.5%	30.5%	33.1%	46.0%	36.2%	28.6%
Medicaid	33.8%	32.3%	37.7%	36.5%	43.2%	36.9%
Commercial	48.5%	46.7%	53.8%	54.6%	58.2%	55.9%
Work Comp	64.2%	42.9%	55.0%	51.0%	37.4%	37.9%

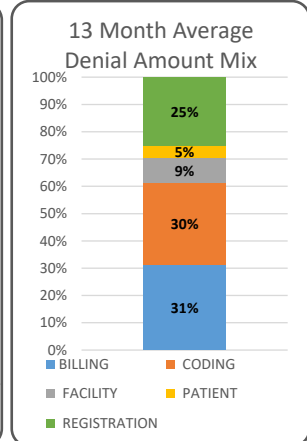
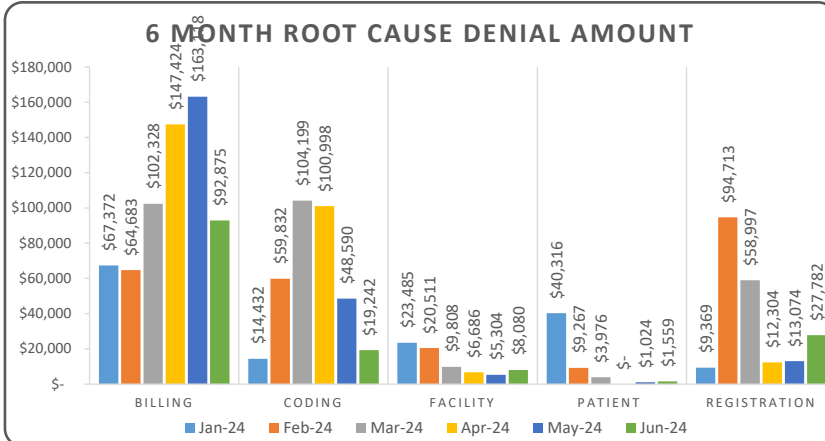
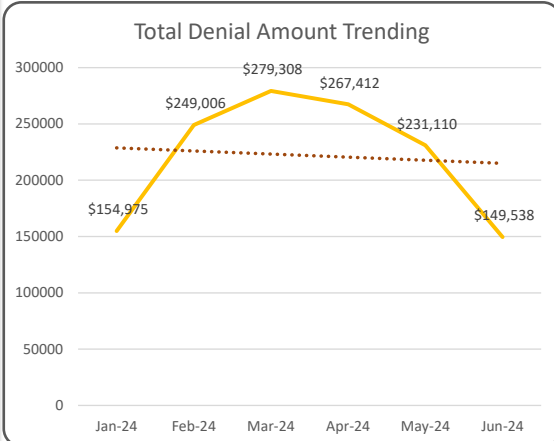
6 Month Aging



DENIAL MANAGEMENT

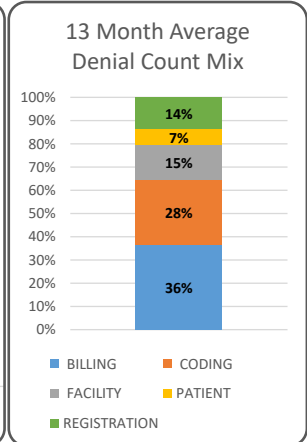
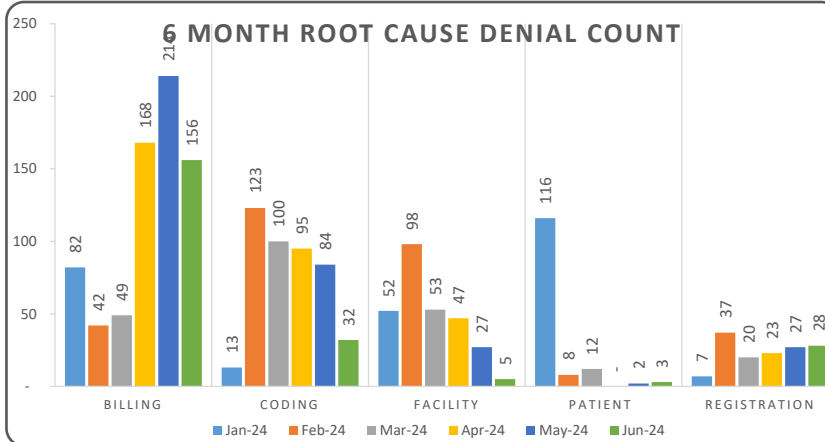
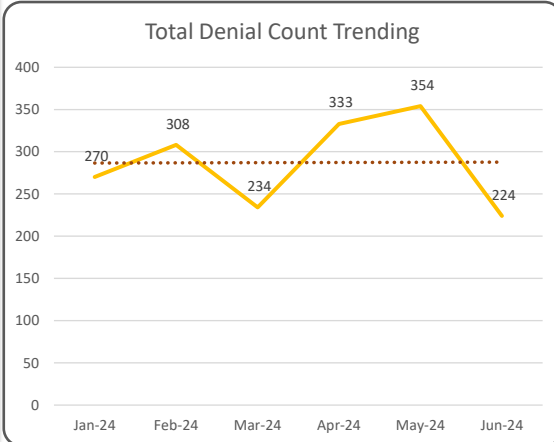
Denial Amount

AMOUNT	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	13 Month Average
BILLING	\$ 20,119	\$ 16,441	\$ 4,186	\$ 14,532	\$ 23,169	\$ 57,603	\$ (28,742)	\$ 67,372	\$ 64,683	\$ 102,328	\$ 147,424	\$ 163,118	\$ 92,875	\$ 57,316
CODING	\$ 20,027	\$ 28,731	\$ 69,786	\$ 82,600	\$ 125,103	\$ 41,055	\$ 7,806	\$ 14,432	\$ 59,832	\$ 104,199	\$ 100,998	\$ 48,590	\$ 19,242	\$ 55,569
FACILITY	\$ 5,061	\$ 8,170	\$ 2,617	\$ 3,773	\$ 599	\$ 59,842	\$ 57,620	\$ 23,485	\$ 20,511	\$ 9,808	\$ 6,686	\$ 5,304	\$ 8,080	\$ 16,274
PATIENT	\$ -	\$ 4,418	\$ 4,468	\$ 407	\$ 24,606	\$ 14,699	\$ 4,347	\$ 40,316	\$ 9,267	\$ 3,976	\$ -	\$ 1,024	\$ 1,559	\$ 8,391
REGISTRATION	\$ 59,497	\$ 32,719	\$ 24,061	\$ 58,303	\$ 171,363	\$ 12,651	\$ 21,850	\$ 9,369	\$ 94,713	\$ 58,997	\$ 12,304	\$ 13,074	\$ 27,782	\$ 45,899
TOTAL	\$ 104,704	\$ 90,479	\$ 105,119	\$ 159,615	\$ 344,840	\$ 185,849	\$ 62,881	\$ 154,975	\$ 249,006	\$ 279,308	\$ 267,412	\$ 231,110	\$ 149,538	\$ 183,449



Denial Count

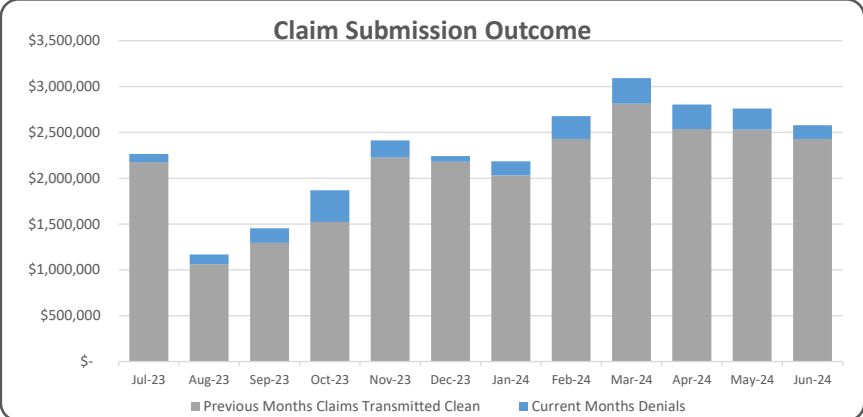
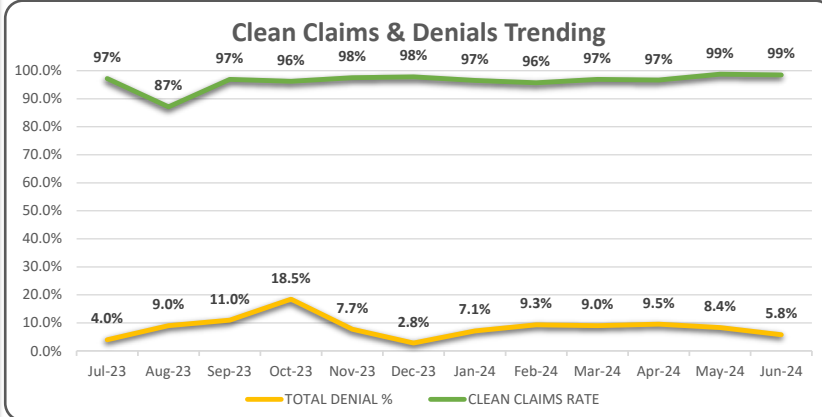
COUNT	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	13 Month Average
BILLING	25	17	23	21	69	103	48	82	42	49	168	214	156	78
CODING	61	58	39	53	73	31	22	13	123	100	95	84	32	60
FACILITY	14	28	15	6	1	54	16	52	98	53	47	27	5	32
PATIENT	-	2	4	1	10	12	25	116	8	12	-	2	3	15
REGISTRATION	43	34	30	27	57	15	31	7	37	20	23	27	28	29
TOTAL	143	139	111	108	210	215	142	270	308	234	333	354	224	215



CLAIM SUBMIT EFFICIENCY & DENIAL RESOLUTION

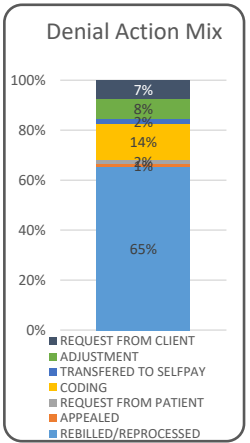
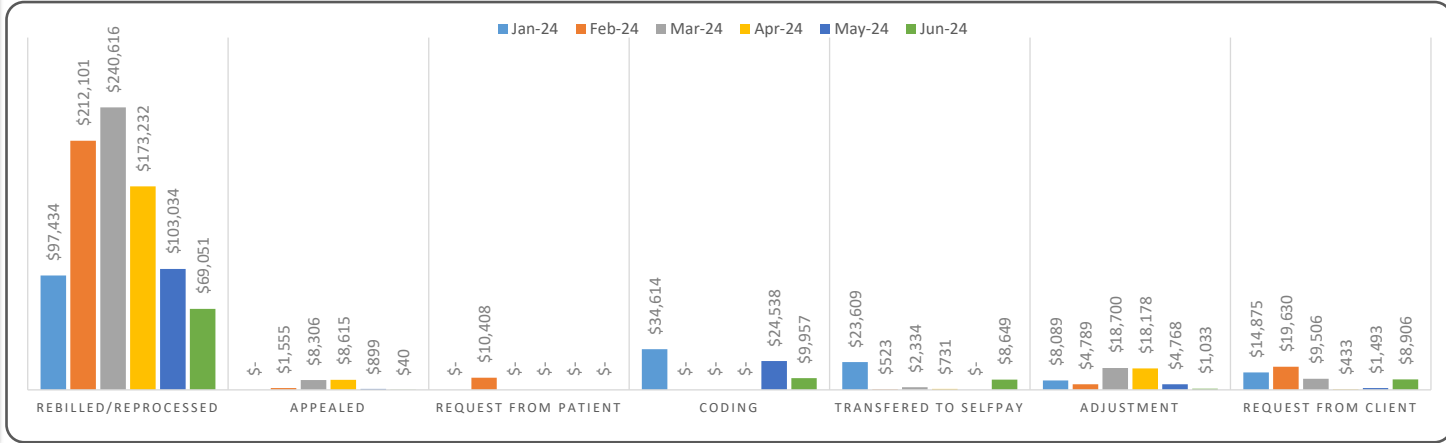
Denial & Clean Claim Trending

	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	13 Month Average
DENIAL AMOUNT	\$ 104,704	\$ 90,479	\$ 105,119	\$ 159,615	\$ 344,840	\$ 185,849	\$ 62,881	\$ 154,975	\$ 249,006	\$ 279,308	\$ 267,412	\$ 231,110	\$ 149,538	\$ 183,449
PREVIOUS MONTH'S TRANSMITTED CLAIMS	\$ 2,207,031	\$ 2,264,169	\$ 1,167,844	\$ 1,454,165	\$ 1,867,928	\$ 2,411,329	\$ 2,241,921	\$ 2,184,032	\$ 2,676,735	\$ 3,091,516	\$ 2,803,341	\$ 2,760,024	\$ 2,578,338	\$ 2,285,260
TOTAL DENIAL %	4.7%	4.0%	9.0%	11.0%	18.5%	7.7%	2.8%	7.1%	9.3%	9.0%	9.5%	8.4%	5.8%	8.2%
CLEAN CLAIMS RATE	83%	97%	87%	97%	96%	98%	98%	97%	96%	97%	97%	99%	99%	95%



Action Taken on Denials

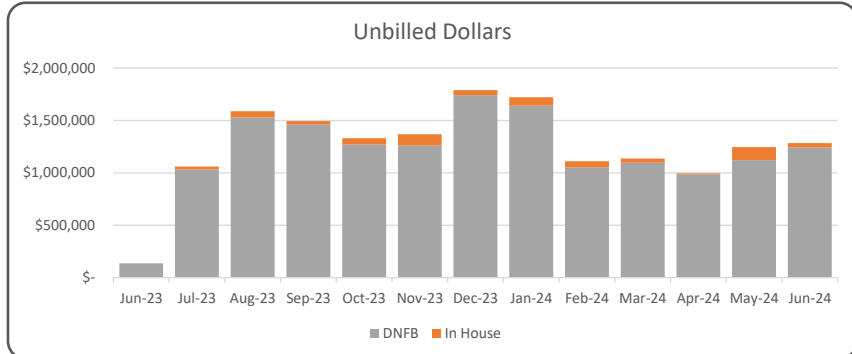
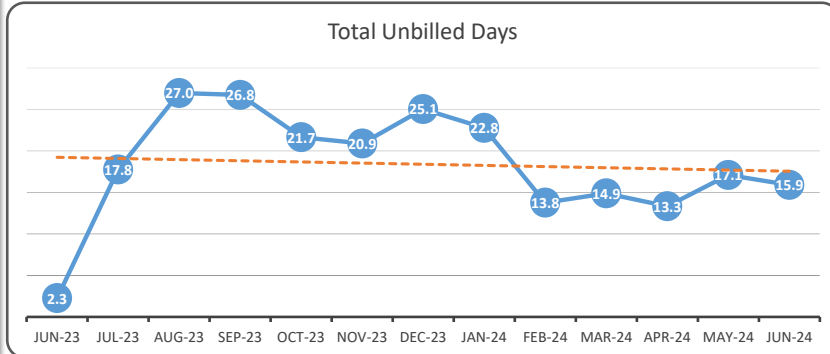
DENIAL ACTION	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	13 Month Average
REBILLED/REPROCESSED	\$ 48,104	\$ 35,311	\$ 8,771	\$ 21,181	\$ 240,169	\$ 107,339	\$ 31,003	\$ 97,434	\$ 212,101	\$ 240,616	\$ 173,232	\$ 103,034	\$ 69,051	\$ 106,719
APPEALED	\$ 133	\$ 4,051	\$ 21	\$ 1,355	\$ -	\$ -	\$ -	\$ -	\$ 1,555	\$ 8,306	\$ 8,615	\$ 899	\$ 40	\$ 1,921
REQUEST FROM PATIENT	\$ 10,114	\$ 13,047	\$ 5,235	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10,408	\$ -	\$ -	\$ -	\$ -	\$ 2,985
CODING	\$ 4,991	\$ 7,358	\$ 67,848	\$ 75,684	\$ 70,743	\$ 2,098	\$ 3,052	\$ 34,614	\$ -	\$ -	\$ -	\$ 24,538	\$ 9,957	\$ 23,145
TRANSFERRED TO SELFPAY	\$ 2,329	\$ 555	\$ 561	\$ -	\$ 3,542	\$ 3,856	\$ -	\$ 23,609	\$ 523	\$ 2,334	\$ 731	\$ -	\$ 8,649	\$ 3,592
ADJUSTMENT	\$ 36,597	\$ 25,659	\$ 6,499	\$ 7,028	\$ 30,387	\$ 3,436	\$ 8,001	\$ 8,089	\$ 4,789	\$ 18,700	\$ 18,178	\$ 4,768	\$ 1,033	\$ 13,320
REQUEST FROM CLIENT	\$ 2,435	\$ 4,499	\$ 16,182	\$ 54,368	\$ -	\$ 291	\$ 20,823	\$ 14,875	\$ 19,630	\$ 9,506	\$ 433	\$ 1,493	\$ 8,906	\$ 11,803
TOTAL	\$ 104,704	\$ 90,479	\$ 105,116	\$ 159,615	\$ 344,842	\$ 117,020	\$ 62,880	\$ 178,621	\$ 249,006	\$ 279,461	\$ 201,189	\$ 134,732	\$ 97,637	\$ 163,485



UNBILLED & INVENTORY

Unbilled

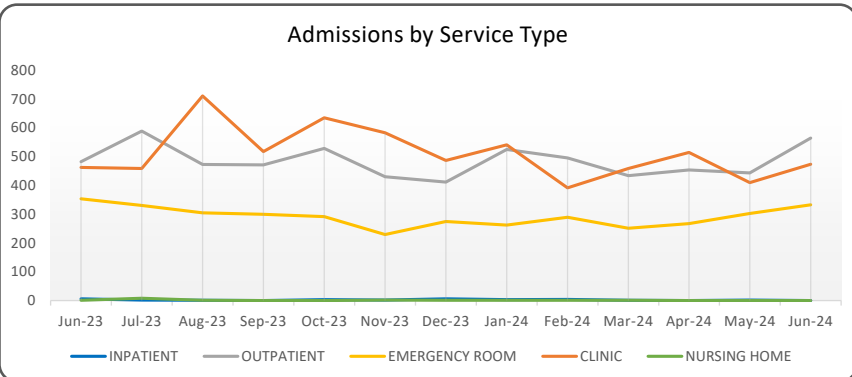
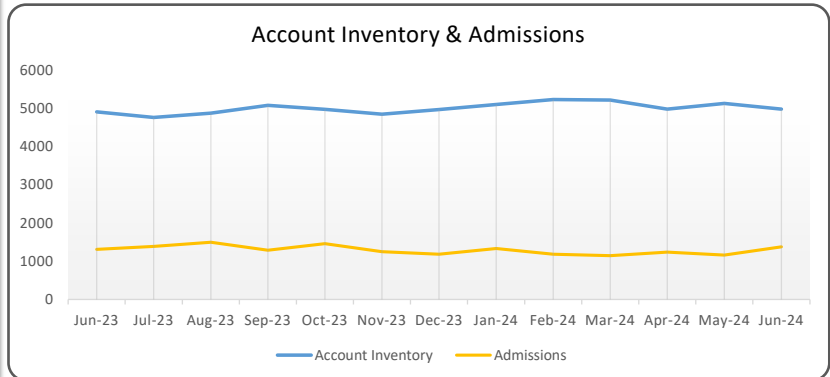
	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	13 Month Average
In House	\$ -	\$ 27,926	\$ 59,290	\$ 34,128	\$ 58,121	\$ 108,806	\$ 49,158	\$ 81,326	\$ 57,589	\$ 40,091	\$ 9,467	\$ 125,095	\$ 41,831	\$ 53,294
DNFB	\$ 137,865	\$ 1,032,055	\$ 1,528,438	\$ 1,460,193	\$ 1,272,278	\$ 1,259,714	\$ 1,740,429	\$ 1,639,771	\$ 1,052,041	\$ 1,097,004	\$ 986,005	\$ 1,119,850	\$ 1,241,997	\$ 1,197,511
Total Unbilled	\$ 137,865	\$ 1,059,981	\$ 1,587,728	\$ 1,494,321	\$ 1,330,399	\$ 1,368,520	\$ 1,789,587	\$ 1,721,097	\$ 1,109,630	\$ 1,137,095	\$ 995,472	\$ 1,244,945	\$ 1,283,828	\$ 1,250,805
Unbilled Days	2.3	17.8	27.0	26.8	21.7	20.9	25.1	22.8	13.8	14.9	13.3	17.1	15.9	18.4



Admissions & Account Inventory

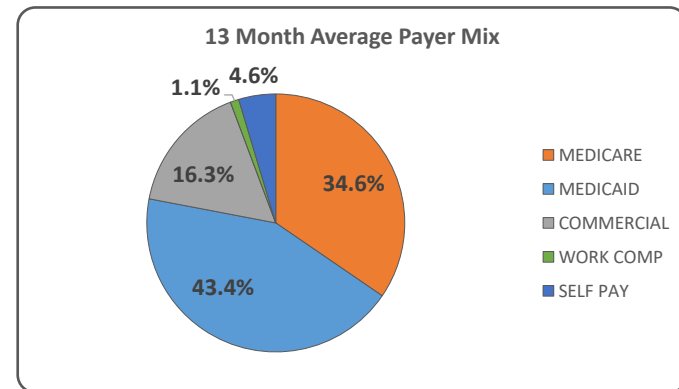
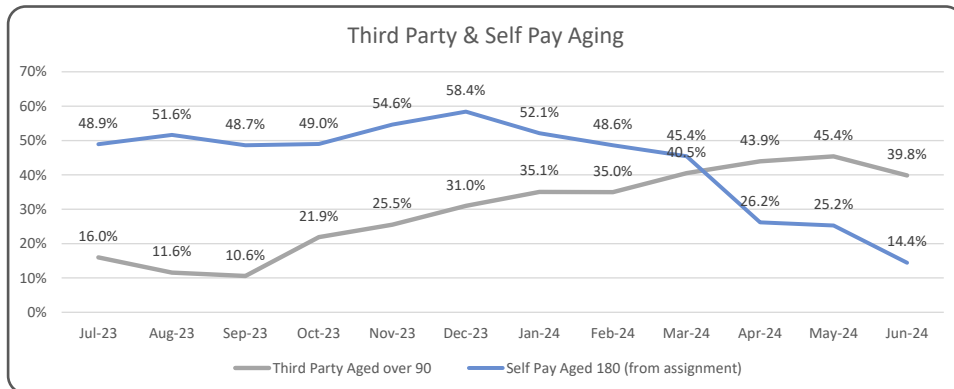
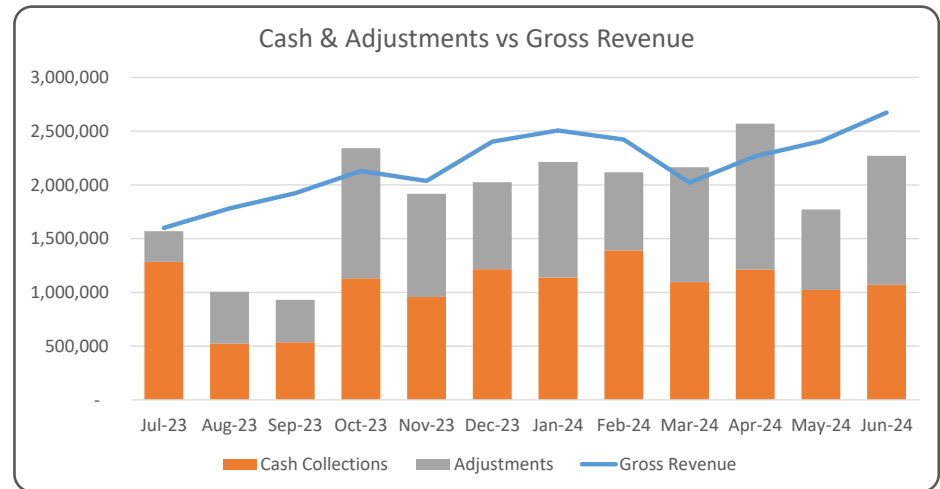
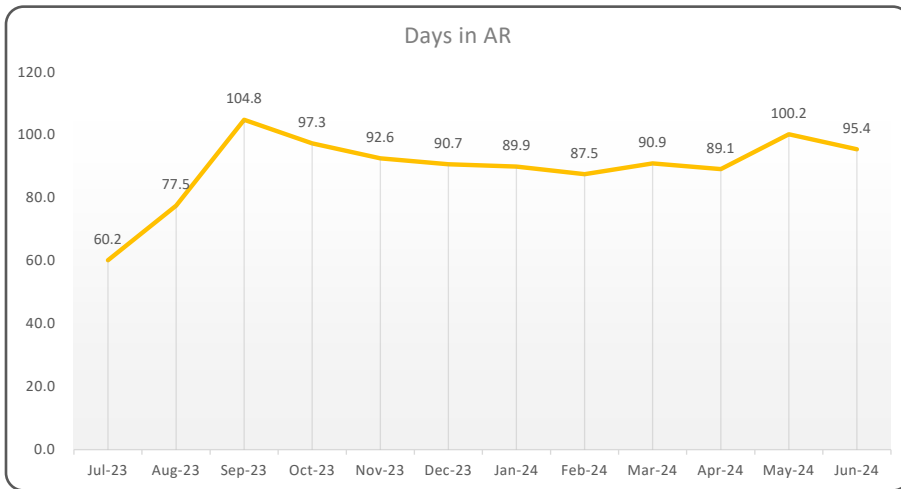
ADMISSIONS	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	13 Month Average
INPATIENT	6	2	1	0	3	2	6	3	4	1	0	2	0	2
SWINGBED	4	2	7	1	4	1	5	2	2	1	1	3	4	3
OUTPATIENT	482	588	472	471	528	430	411	524	495	433	453	443	564	484
EMERGENCY ROOM	353	330	304	299	291	229	274	262	289	251	267	302	332	291
CLINIC	462	458	710	517	634	582	486	540	391	458	514	409	473	510
NURSING HOME	1	8	1	0	0	2	1	1	1	1	0	0	0	1
TOTAL	1,308	1,388	1,495	1,288	1,460	1,246	1,183	1,332	1,182	1,145	1,235	1,159	1,373	1292

ACCOUNT INVENTORY	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	13 Month Average
MEDICARE	485	387	519	598	579	556	633	583	601	453	474	446	562	529
MEDICAID	748	682	688	762	732	759	756	874	940	990	1,102	1,141	1,197	875
COMMERCIAL	997	862	838	887	897	942	997	1,052	1,131	1,173	1,256	1,340	1,368	1057
WORK COMP	89	75	59	57	55	61	56	58	54	58	67	51	74	63
SELF PAY	2,584	2,752	2,767	2,772	2,708	2,527	2,524	2,528	2,500	2,537	2,078	2,146	1,776	2477
TOTAL	4903	4758	4871	5076	4971	4845	4966	5095	5226	5211	4977	5124	4977	5000



SoHum Health Executive Dashboard

	TARGET	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24
Days in AR	45.0	60.2	77.5	104.8	97.3	92.6	90.7	89.9	87.5	90.9	89.1	100.2	95.4
Gross AR		3,591,307	4,558,438	5,850,618	5,974,477	6,060,571	6,475,740	6,787,249	7,052,380	6,946,485	6,645,338	7,288,529	7,701,902
Gross Revenue		1,600,297	1,781,158	1,922,299	2,130,187	2,037,494	2,402,068	2,506,331	2,422,995	2,021,182	2,266,954	2,406,584	2,673,513
Cash Collections		1,285,280	523,891	535,583	1,131,808	958,049	1,214,685	1,139,209	1,391,162	1,095,888	1,213,098	1,023,598	1,069,835
Adjustments		284,186	481,416	395,270	1,210,884	959,630	810,676	1,075,435	726,145	1,068,946	1,356,717	748,695	1,201,168
Collection %		81.9%	52.1%	57.5%	48.3%	50.0%	60.0%	51.4%	65.7%	50.6%	47.2%	57.8%	47.1%
Late Charges	1%	2.2%	0.3%	0.7%	0.8%	0.2%	0.6%	0.3%	0.3%	-0.4%	-0.8%	-1.9%	2.9%
Bad Debt	3%	0.0%	0.0%	0.0%	0.0%	5.3%	0.0%	0.0%	2.2%	0.0%	21.1%	0.0%	9.3%
Charity Care	3%	0.7%	0.2%	0.1%	0.2%	0.0%	0.0%	2.3%	0.4%	0.5%	0.4%	0.0%	0.4%
Third Party Aged over 90	13%	16.0%	11.6%	10.6%	21.9%	25.5%	31.0%	35.1%	35.0%	40.5%	43.9%	45.4%	39.8%
Self Pay Aged 180 (from assignment)	25%	48.9%	51.6%	48.7%	49.0%	54.6%	58.4%	52.1%	48.6%	45.4%	26.2%	25.2%	14.4%



Infection Prevention:

The Infection Prevention Department consistently maintains survey readiness by conducting regular hand hygiene surveillance, auditing individuals on transmission-based isolation precautions for proper placement and documentation and convening frequent infection prevention committee (IPC) and antibiotic stewardship meetings. The IP nurse diligently audits the EVS cleaning clipboards on Thursdays, covering areas such as the ED, laundry, ice machine, and eyewash station. A public health alert concerning the heightened risk of dengue virus has been released and forwarded to the Group ER Physicians to be displayed in the provider's office. Presently, we have Covid vaccines available in-house. Communication has been initiated with the team through a Webex meeting to discuss organizing a vaccination clinic, with the date still pending. Furthermore, the IP nurse ensures daily checks of the lab results folder in the provider's office and follows up as necessary.

ED/Acute:

Katherine, our ED/Acute manager, reports: "Throughout June, the Emergency Department (ED) saw 343 patients, including four swing bed admissions, nine observation patients, and one inpatient admission. Seven patients were discharged from inpatient (IP) and swing bed (SWB) status.

Projects worked on in June:

We planned and prepared for an upcoming disaster evacuation drill, which included reviewing and reorganizing Incident Command Supplies with the help of the Chief Nursing Officer's administrative assistant.

In June, we also organized several productive and collaborative meetings with the inpatient pharmacy. These meetings focused on medication administration overlinks and scanning compliance issues, demonstrating our commitment to shared decision-making and teamwork.

Our SWING bed program has made significant progress. We can now provide a more comprehensive care plan involving Physical Therapy, Occupational Therapy, and Speech Therapy. These expanded care plans allow us to admit patients requiring all these services, expanding our scope beyond just Physical Therapy treatment. Our ongoing commitment is to deliver high-quality care to our patients continually. Additionally, we are proud to serve our community by allowing local community members needing outside medical care to recover in their local hospital."

Laboratory

The laboratory has been diligently working to introduce new services, including the in-house processing of blood cultures and EDSP tests. We will offer in-house HIV and syphilis testing on a stat basis by October. Additionally, the lab director and the lab manager are actively engaged in transitioning the lab from being accredited by a third-party organization to being certified directly with CDPH, which is expected sometime this Fall. The outpatient lab census is experiencing growth, with an increasing number of patients seeking care from out of town due to the more prompt and efficient services provided compared to other local labs.

Skilled Nursing

Our dedicated nursing staff is fully committed to providing exceptional care for our residents. We aim to create an environment where they can thrive and enjoy life to the fullest while focusing on their well-being. To combat the summer heat, we have provided ice water, popsicles, watermelons, and appropriate attire. Additionally, we have organized trips to Shelter Cove and the Redwoods to offer our residents a break from the heat, resulting in their overall happiness and satisfaction. We are also dedicated to providing proper medication guidance to ensure careful monitoring and management of any use of controlled substances, as required by state regulations, thus ensuring the safety of our residents from falls. We take pride in achieving a 100% compliance rate for documenting psychotropic medications, reflecting the exceptional dedication of our team.

Clinic:

The clinic is thrilled to introduce two new staff members: Katherine, our new LCSW, and Keri, our new Substance Use Navigator. They will be providing essential care and services to our community.

We are fully prepared and eagerly await the upcoming Partnership Review. The review team is scheduled to arrive on July 16. All necessary documents have been submitted, and we are well-prepared for the Chart and On-site reviews on July 16th and 18th.

Currently, we are working with local schools to arrange sports physicals.

We are pleased to announce that Jessie is now dual-certified as an FNP and AGACNP and can now care for children.

We have several dedicated team members working diligently to meet quality measures for this year.

Radiology- June

In the month of June, Radiology performed 178 x-ray exams, 111 CTs, 43 ultrasounds and 25 mammograms.

Work on the X-ray room continues but should soon be completed. We will limit hours when necessary but returning to regular hours.

We continue to address JIRA's for Radiology issues in EPIC, mostly related to billing.

The physicist returned for the annual mammography equipment survey. The state mammography license has been renewed for the next 3 years.

Pharmacy

The pharmacy is currently working on several important initiatives, including correcting medication orders in EPIC, updating disease-state treatment protocols, collaborating with architects to plan the foundation for the new hospital's pharmacy, preparing for and participating in various district grants, and ensuring accurate revenue capture within EPIC for medication administrations.

Physical Therapy:

We are excited to announce that we have established a Rehabilitation Department, complete with a team consisting of a physical therapist, an occupational therapist, and a speech therapist. We are pleased to offer these services to our patients and residents and will soon provide them to the community through outpatient services.

Our physical therapist, Sierra, has been working with inpatients twice daily, per our standard practice. She has also mentored our new occupational therapist, Katelyn, by allowing her to shadow and assist in the department. We are happy to report that we are making significant progress in setting up the outpatient space, finalizing the schedule, and determining charges. This progress brings us closer to offering these services to the community. We are also thrilled to announce that Susan, our speech therapist, is scheduled to start on Tuesday, July 23, further expanding our suite of services.

Adela Yanez, RN, BSN, CNO



SoHum Health

733 Cedar Street
Garberville, CA 95542
(707) 923-3921
shchd.org

Southern Humboldt Community Healthcare District

GOVERNING BOARD RESOLUTION 24:08

A RESOLUTION OF THE BOARD OF THE SOUTHERN HUMBOLDT COMMUNITY HEALTHCARE DISTRICT ORDERING THE LEVY OF A SPECIAL TAX AND APPROVING COLLECTION OF A SPECIAL TAX FOR FISCAL YEAR 2024-2025

WHEREAS, on June 5, 2018, the voters of the Southern Humboldt Community Healthcare District (the "District") authorized the District's Board of Directors (the "Board") to levy a Special Tax of up to \$125 per qualified parcels, as defined in Resolution 18:04, to ensure continued local access to emergency room care, acute hospital care, community clinic, skilled nursing facility, laboratory services, physical therapy, CT, x-ray, mammography imaging services, visiting nurse program, and other health care services for residents of the District and visitors to the area, WHEREAS, the District's budget for Fiscal Year 2024-2025 requires a Special Tax rate of \$125 per qualified parcel,

NOW, THEREFORE, IT IS RESOLVED by the Board of Directors of the District as follows:

1. The Board hereby authorizes the levy of a Special Tax at the authorized rate of \$125 per qualified parcel in the District for Fiscal Year 2024-2025.
2. The Special Tax shall be collected in the same manner and subject to the same penalties as ad valorem property taxes by the Humboldt County Treasurer-Tax Collector.
3. The Board hereby directs the Humboldt County Auditor-Controller to place the Special Tax on the Humboldt County tax roll for Fiscal Year 2024-25.

THE FOREGOING RESOLUTION WAS ADOPTED upon motion of _____, Seconded by _____ of the Southern Humboldt Community Healthcare District Governing Board at a Board meeting held on the 25th day of July, 2024, by the following roll call vote:

Ayes: _____

Noes: _____

Abstain: _____

Absent: _____

Witnessed by:

Witnessed by:

Memorandum

District	County	Route	Postmile	Project ID
01	HUM	101	R11.09	03-OR005

To: Alex Del Guerra
Right-of-Way Acquisition

From: James Cohoon
R/W Engineering
District 1

Subject: **DIRECTORS DEED TRANSMITTAL**

The following information has been provided, as requested by District Right of Way, for use in the preparation of an Excess Lands transaction and other documents necessary for conveyance, including:

- Director's Deed Mapping (2 pages)
- Director's Deed Legal Description for parcel(s): 1 page
 - Parcels 5678-01-01

The electronic files for the above listed information have been transmitted by email.

The attached real property descriptions have been prepared by me, or under my direction, in conformance with the Professional Land Surveyors' Act.

Signature


Professional Land Surveyor

Expires: 12/31/2023

Date 27 APR. 2023

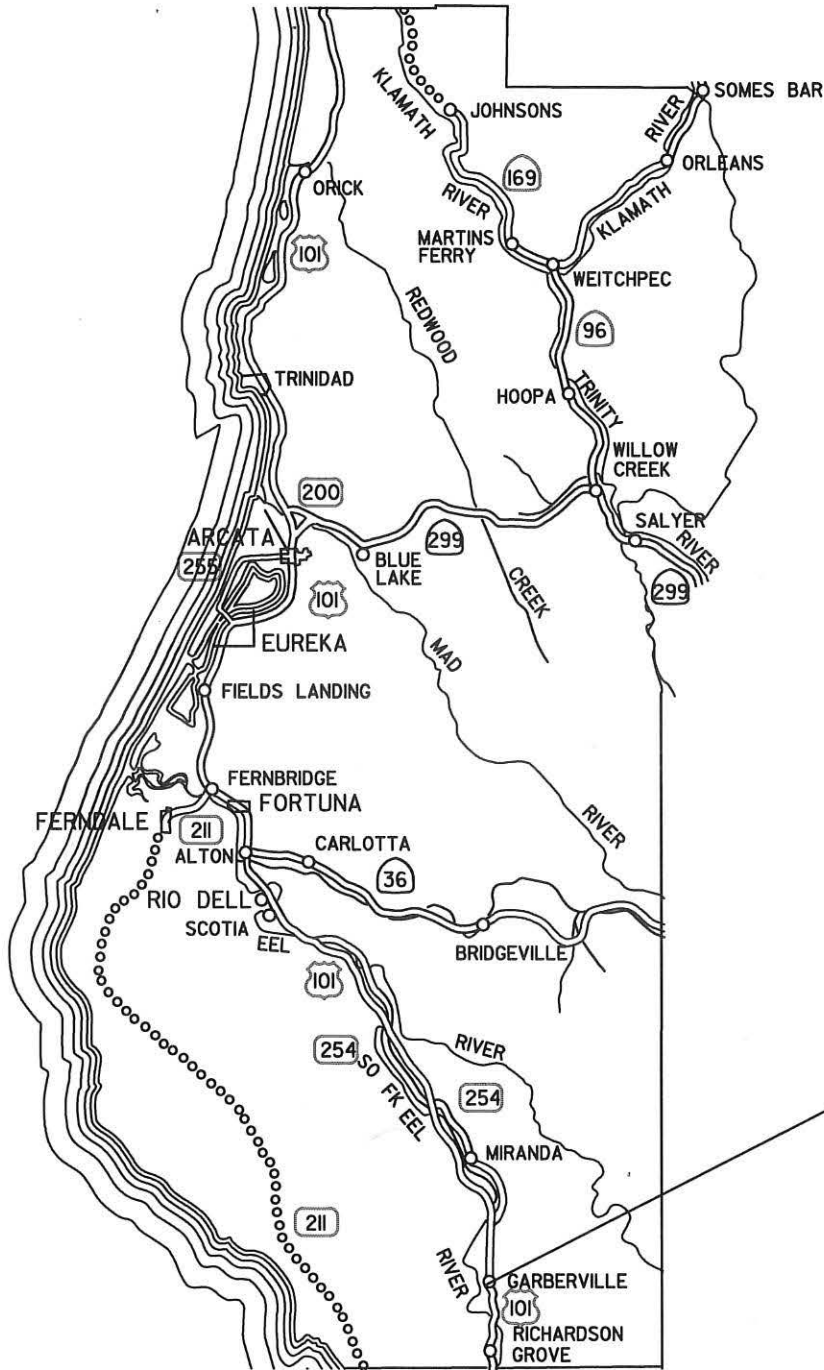


01/2023

"Provide a safe and reliable transportation network that serves all people and respects the environment"

NOTE: The State of California or its officers or agents shall not be responsible for the accuracy or completeness of digital images of this map.

INDEX MAP HUMBOLDT COUNTY



**PROJECT
LOCATION**

NOT TO SCALE

STATE OF CALIFORNIA
CALIFORNIA STATE TRANSPORTATION AGENCY
DEPARTMENT OF TRANSPORTATION

**RIGHT OF WAY
DIRECTOR'S DEED
DD 5678-01-01
INDEX MAP**

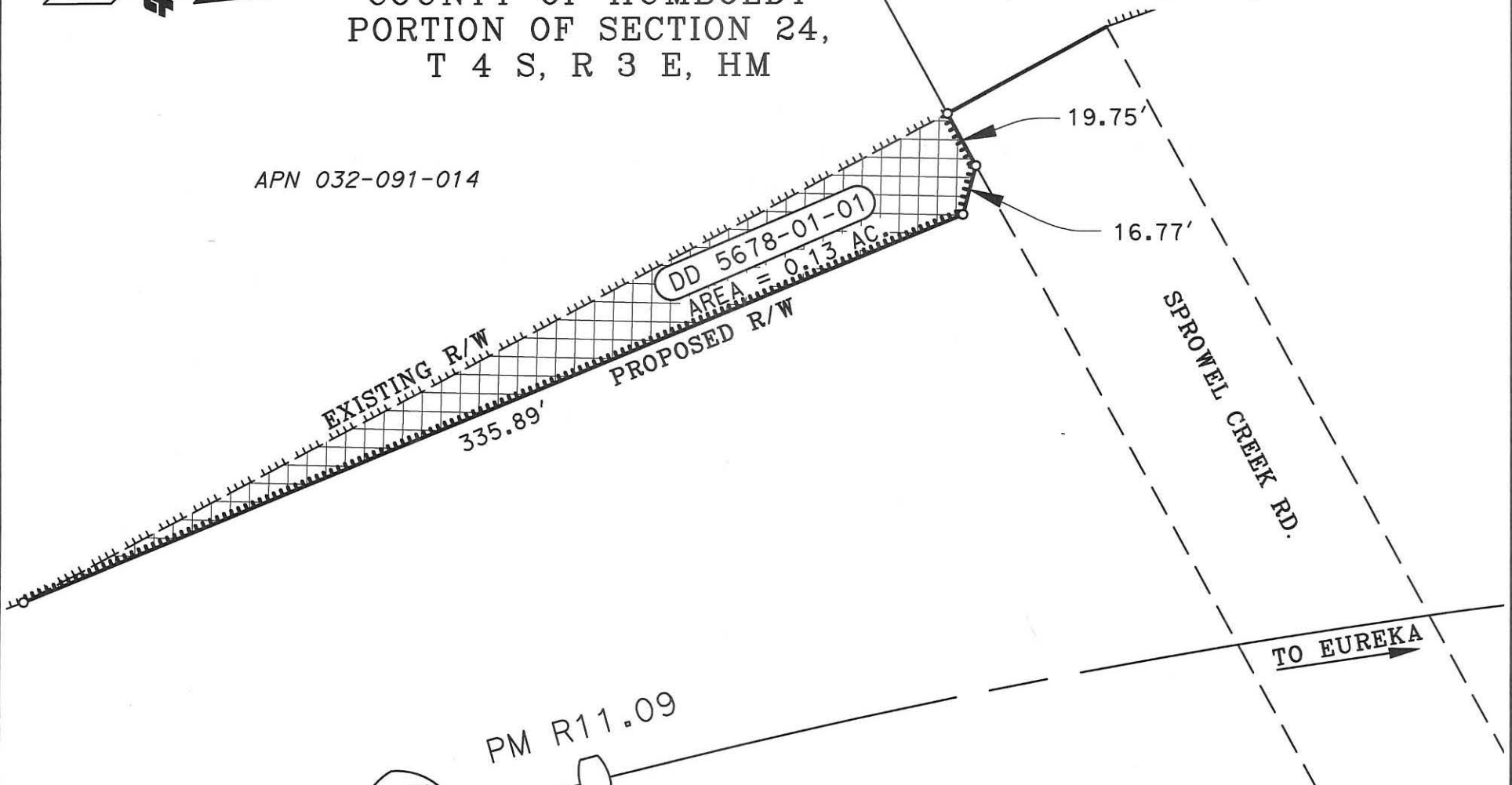
DISTRICT	COUNTY	ROUTE	EA	SHEET NO.	TOTAL SHEETS
1	HUM	101	03-0R005	1	2



COUNTY OF HUMBOLDT
 PORTION OF SECTION 24,
 T 4 S, R 3 E, HM

APN 032-091-014

NOTE: The State of California or its officers or agents shall not be responsible for the accuracy or completeness of digital images of this map.



STATE OF CALIFORNIA
 CALIFORNIA STATE TRANSPORTATION AGENCY
 DEPARTMENT OF TRANSPORTATION

**RIGHT OF WAY
 DIRECTOR'S DEED**

DD 5678-01-01
 DETAIL MAP

COPYRIGHT 2019 CALIFORNIA DEPARTMENT OF TRANSPORTATION
 ALL RIGHTS RESERVED
 SCALE: 1" = 50'



NOTES	
ALL DISTANCES ARE IN FEET UNLESS OTHERWISE NOTED.	

LEGEND	
	AREA TO BE CONVEYED BY DIRECTOR'S DEED
	ANGLE POINT, NOTHING SET
	EXISTING ACCESS RESTRICTED BOUNDARY TO BE SUPERCEDED
	PROPOSED ACCESS RESTRICTED BOUNDARY

DRAFTED BY	DATE	DISTRICT	COUNTY	ROUTE	SHEET PM	SHEET NO.	TOTAL SHEETS
J. COHOON	4/26/2023	01	HUM	101	R11.09	2	2

EXHIBIT A**Parcel DD 5678-01-01**

A portion of the lands of the State of California, described in Grant Deed recorded November 29, 1965 in Volume 861, Official Records Page 444, Humboldt County Records (HCR), together with a portion of the lands of the State of California, described in Grant Deed recorded October 31, 1929 in Book 194, Deeds Page 133, HCR, all lying in Section 24, Township 4 South, Range 3 East, Humboldt Meridian (T 4 S, R 3 E, HM), County of Humboldt, State of California, both portions lying southerly and westerly of the following described line:

Beginning at the northwest corner of those lands described in Grant Deed to the State of California, recorded November 29, 1965 in Volume 861, Official Records Page 444, HCR, said point also being the northeast corner of those lands described in Grant Deed recorded May 17, 2019 as Instrument Number 2019-008604, HCR;

- (1) Thence North $61^{\circ}23'44''$ East, 19.75 feet;
- (2) Thence South $75^{\circ}16'49''$ East, 16.77 feet;
- (3) Thence South $22^{\circ}26'58''$ East, 335.89 feet to the northerly terminus of Course Number (1), as described in Grant Deed to the State of California recorded April 22, 1966 in Volume 880, Official Records Page 381.

The bearings and distances used in the above descriptions are based on the California Coordinate System of 1983, Zone 1, as determined by ties to the California High Precision Geodetic Network, epoch 2017.50. To obtain ground distances, divide distances by 0.99995511

Memorandum

District	County	Route	Postmile	Project ID
01	HUM	101	R10.94	03-OR005

To: Alex Del Guerra
Right-of-Way Acquisition

From: James Cohoon
R/W Engineering
District 1

Subject: **DIRECTORS DEED TRANSMITTAL**

The following information has been provided, as requested by District Right of Way, for use in the preparation of an Excess Lands transaction and other documents necessary for conveyance, including:

- Director's Deed Mapping (2 pages)
- Director's Deed Legal Description for parcel(s): 1 page
 - Parcels 6596-01-01

The electronic files for the above listed information have been transmitted by email.

The attached real property descriptions have been prepared by me, or under my direction, in conformance with the Professional Land Surveyors' Act.

Signature *James W. Cohoon*
Professional Land Surveyor

Expires: 12/31/2023

Date 27 APR 2023

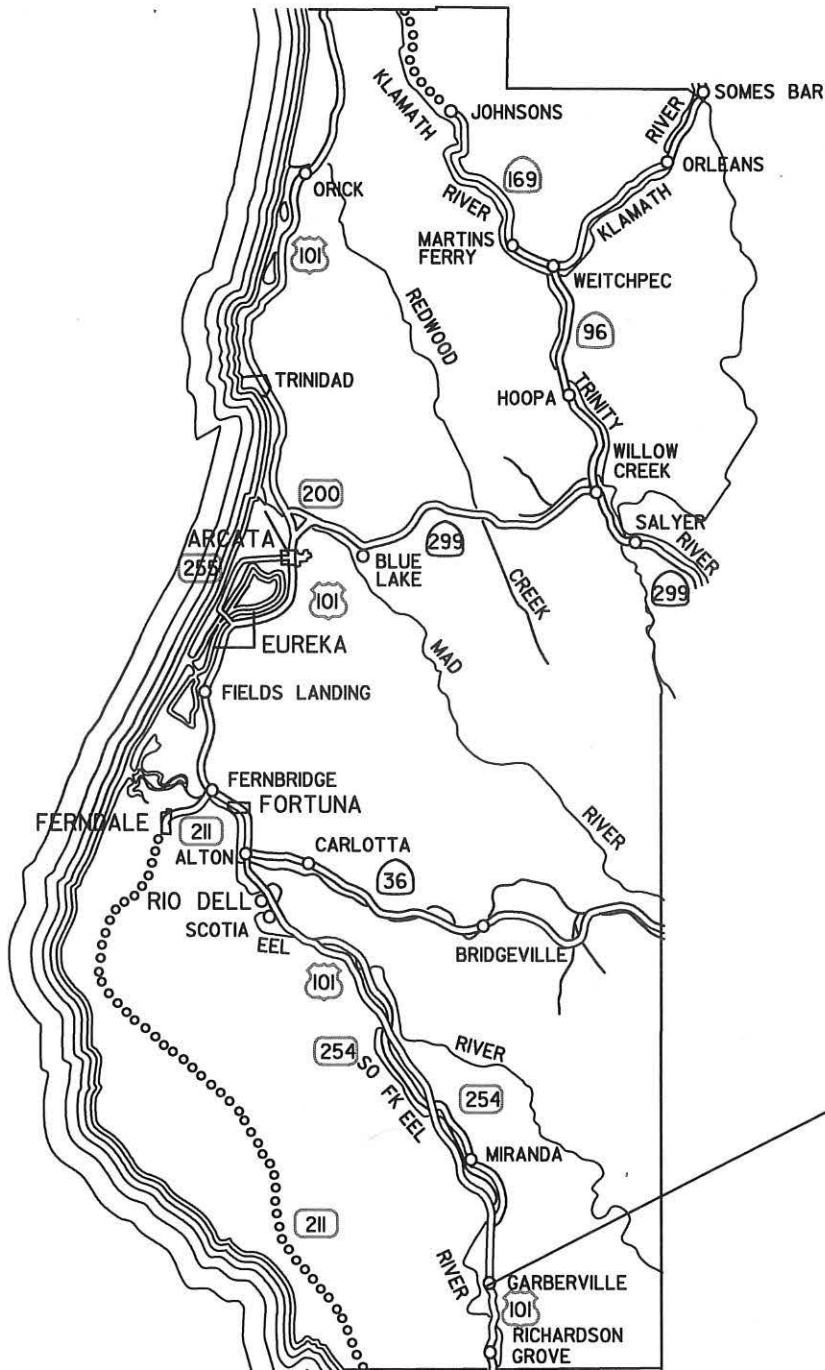


01/2023

"Provide a safe and reliable transportation network that serves all people and respects the environment"

NOTE: The State of California or its officers or agents shall not be responsible for the accuracy or completeness of digital images of this map.

INDEX MAP HUMBOLDT COUNTY



**PROJECT
LOCATION**

NOT TO SCALE

STATE OF CALIFORNIA
CALIFORNIA STATE TRANSPORTATION AGENCY
DEPARTMENT OF TRANSPORTATION

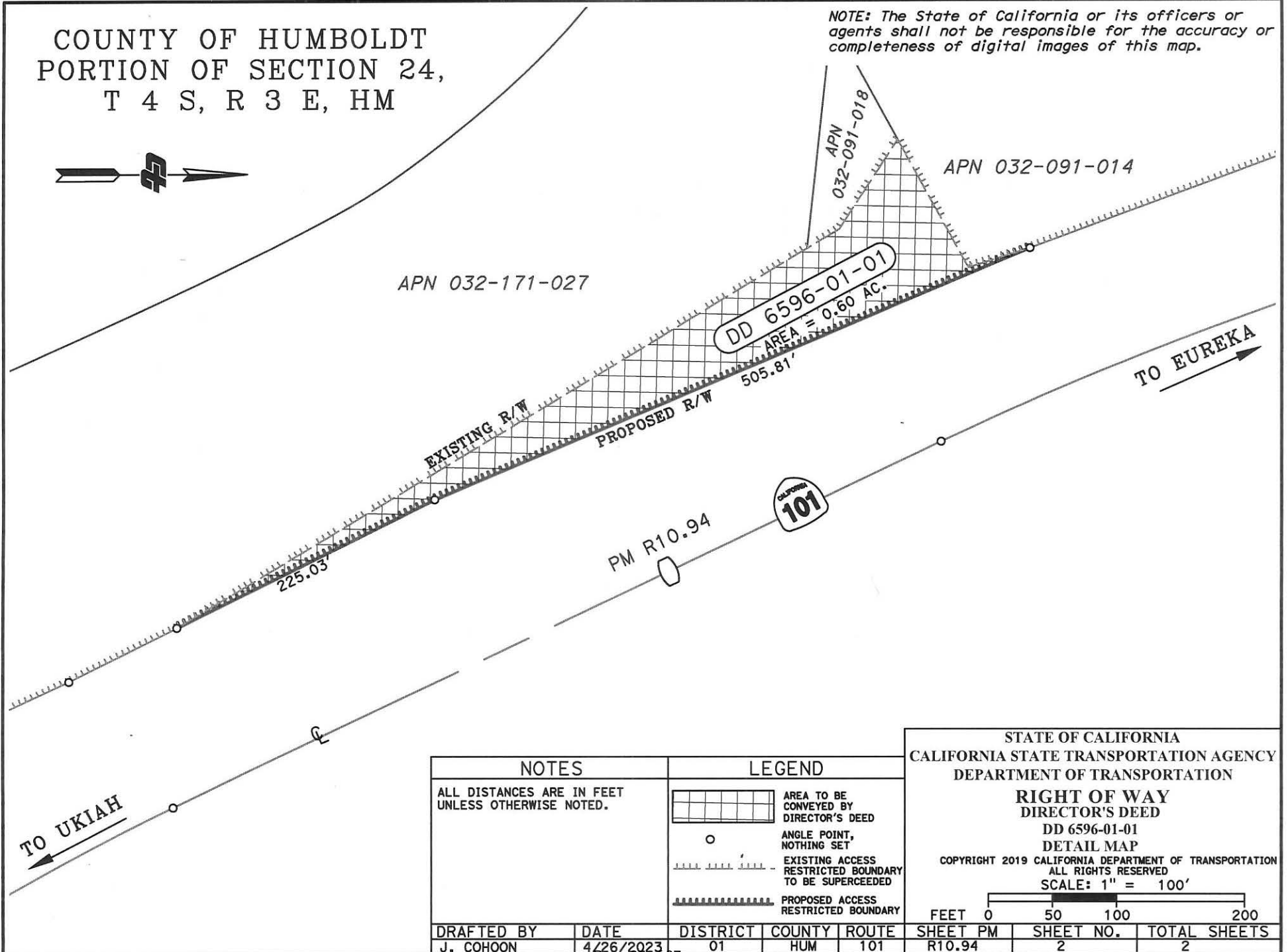
**RIGHT OF WAY
DIRECTOR'S DEED
DD 6596-01-01
INDEX MAP**

DISTRICT	COUNTY	ROUTE	EA	SHEET NO.	TOTAL SHEETS
1	HUM	101	03-0R005	1	2

COUNTY OF HUMBOLDT
 PORTION OF SECTION 24,
 T 4 S, R 3 E, HM



NOTE: The State of California or its officers or agents shall not be responsible for the accuracy or completeness of digital images of this map.



NOTES

ALL DISTANCES ARE IN FEET UNLESS OTHERWISE NOTED.

LEGEND

AREA TO BE CONVEYED BY DIRECTOR'S DEED

ANGLE POINT, NOTHING SET

EXISTING ACCESS RESTRICTED BOUNDARY TO BE SUPERCEDED

PROPOSED ACCESS RESTRICTED BOUNDARY

STATE OF CALIFORNIA
 CALIFORNIA STATE TRANSPORTATION AGENCY
 DEPARTMENT OF TRANSPORTATION

**RIGHT OF WAY
 DIRECTOR'S DEED**
 DD 6596-01-01
 DETAIL MAP

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SCALE: 1" = 100'

FEET 0 50 100 200

DRAFTED BY	DATE	DISTRICT	COUNTY	ROUTE	SHEET PM	SHEET NO.	TOTAL SHEETS
J. COHOON	4/26/2023	01	HUM	101	R10.94	2	2

EXHIBIT A**Parcel 6596-01-01**

A portion of the lands of the State of California, described in Grant Deed recorded April 28, 1969 in Volume 1000, Official Records Page 376, Humboldt County Records (HCR), together with a portion of the lands of the State of California, described in Grant Deed recorded April 22, 1966 in Volume 880, Official Records Page 381, HCR, all lying in Section 24, Township 4 South, Range 3 East, Humboldt Meridian (T 4 S, R 3 E, HM), County of Humboldt, State of California, both portions lying westerly of the following described line:

Beginning at the southerly terminus of Course Number (1) as described in Grant Deed to the State of California recorded April 22, 1966 in Volume 880, Official Records Page 381, HCR;

- (1) Thence South 22°56'27" East, 505.81 feet (South 24°12'39" East, 505.87 feet per Volume 861, Official Records Page 513, HCR) to the northerly terminus of Course Number (1) as described in Grant Deed recorded in Volume 1000 Official Records, Page 376, HCR;
- (2) Thence along said Course Number (1) South 26°36'51" East, 225.03 feet (South 27°53'03" East, 225.05 feet) being the southerly terminus of said Course.

The bearings and distances used in the above descriptions are based on the California Coordinate System of 1983, Zone 1, as determined by ties to the California High Precision Geodetic Network, epoch 2017.50. To obtain ground distances, divide distances by 0.99995511



SoHum Health

733 Cedar Street
Garberville, CA 95542
(707) 923-3921
shchd.org

Southern Humboldt Community Healthcare District

GOVERNING BOARD RESOLUTION

24:09

APPROVAL OF THE PURCHASE PRICE AND SIGNATURE AUTHORITY FOR PURCHASE OF PARCELS 032-091-019, 032-091-016, 032-171-019, AND 032-091-017 FROM THE CALIFORNIA DEPARTMENT OF TRANSPORTATION.

WHEREAS, the Southern Humboldt Community Healthcare District (the "District") ... and

WHEREAS, the purchase of the properties, parcel numbers 032-091-019, 032-091-016, 032-171-019, and 032-091-017 in Garberville, California, require a resolution for the purchase and signature authority,

NOW, THEREFORE, IT IS RESOLVED by the Board of Directors of the District as follows:

1. The Board hereby authorizes the purchase of parcel numbers 032-091-019, 032-091-016, 032-171-019, and 032-091-017 in Garberville, California, in the amount of \$30,300.00 from the California Department of Transportation.
2. The Board hereby authorizes signature authority for this purchase to Kent Scown, Chief Operating Officer for the District.

THE FOREGOING RESOLUTION WAS ADOPTED upon motion of _____,
Seconded by _____ of the Southern Humboldt Community Healthcare District Governing Board at the regular board meeting held on the 26th day of July 2024, by the following roll call vote:

Ayes: _____

Noes: _____

Abstain: _____

Absent: _____

Witnessed by: Corinne Stromstad, President

Witnessed by: Barbara Truitt, Vice President/Secretary