



SVHCD FINANCE COMMITTEE

AGENDA

TUESDAY, July 23, 2019

5:00 p.m. Regular Session

Location: Schantz Conference Room

Sonoma Valley Hospital, 347 Andrieux Street

Sonoma CA 95476

Alternative location:

1774 Stockton St, San Francisco

Call In Number 866-228-9900, guest code 294221

<p>In compliance with the Americans Disabilities Act, if you require special accommodations to participate in a Finance Committee meeting, please contact District Clerk Stacey Finn at sfinn@svh.com or (707) 935.5004 at least 48 hours prior to the meeting.</p>	RECOMMENDATION	
AGENDA ITEM		
<p>MISSION STATEMENT The mission of the SVHCD is to maintain, improve, and restore the health of everyone in our community.</p>		
<p>1. CALL TO ORDER/ANNOUNCEMENTS</p>	<i>Nevins</i>	
<p>2. PUBLIC COMMENT SECTION <i>At this time, members of the public may comment on any item not appearing on the agenda. It is recommended that you keep your comments to three minutes or less. Under State Law, matters presented under this item cannot be discussed or acted upon by the Board at this time. For items appearing on the agenda, the public will be invited to make comments at the time the item comes up for Board consideration. At all times please use the microphone</i></p>	<i>Nevins</i>	
<p>3. CONSENT CALENDAR Finance Committee minutes 06.25.19</p>	<i>Nevins</i>	Inform/Action
<p>4. FINANCE COMMITTEE CHARTER</p>	<i>Nevins</i>	Inform
<p>5. ADMINISTRATIVE REPORT</p>	<i>Mather</i>	Inform
<p>6. FINANCIAL REPORT MONTH END JUNE 30, 2019 – PRE AUDIT FINANCIALS</p>	<i>Jensen</i>	Inform
<p>7. ADJOURN</p>	<i>Nevins</i>	



**SVHCD
FINANCE COMMITTEE MEETING
MINUTES
TUESDAY, JUNE 25, 2019
Schantz Conference Room**

Present	Excused	Staff	Public
Sharon Nevins *Susan Porth *Peter Hohorst *Dr. Subhash Mishra via telephone *Art Grandy Joshua Rymer via telephone		Ken Jensen, CFO Sarah Dungan Dawn Kuwahara, RN CAO	

AGENDA ITEM	DISCUSSION	ACTIONS	FOLLOW-UP
MISSION & VISION STATEMENT <i>The mission of SVHCD is to maintain, improve and restore the health of everyone in our community.</i>			
1. CALL TO ORDER/ANNOUNCEMENTS	<i>Nevins</i>		
	Called to order at 5:02pm		
2. PUBLIC COMMENT SECTION	<i>Nevins</i>		
	None		
3. CONSENT CALENDAR	<i>Nevins</i>		
	Minutes from the 05.28.19 meeting were reviewed.	MOTION: by Hohorst to approve 2 nd by Grandy. All in favor	
4. IGT SUMMARY	<i>Dungan</i>		
	Ms. Dungan gave an overview of the IGT program and funding.		
5. REVIEW OF CAPITAL SPENDING PLAN FOR FY2020	<i>Jensen</i>		
	Mr. Jensen reported that the capital budget is not complete. To be reported out at the August meeting.		

6. FINANCIAL REPORT MONTH END MAY 31, 2019	<i>Jensen</i>		
	<p>Mr. Jensen reported that the days of cash on hand was 39.1 Accounts Receivable was at 37.2 days and Accounts Payable was at 45.3 days. After accounting for all activity the net gain for May was \$248,845 vs. the budgeted net gain of \$54,554 with a monthly EBDA of 6.6% vs. a budgeted 2.5%.</p> <p>Mr. Jensen said the cash flow going into the next fiscal year (July 1st) is expected to be at three million dollars.</p> <p>He also reported that with the fire insurance claim we received \$275,000 initially. With further discussion the insurance company paid another \$110,000.</p>		
7. OTHER			
	<p>Mr. Jensen gave an update on the status of the Ensign SNF management agreement and terms post legal review.</p> <p>Ms. Dungan reviewed the daily cash by month from July 2018 – June 2019. Ms. Nevins recommended that this be presented to the Board during the committee updates. Mr. Rymer requested that this become a monthly addition to the financial report.</p> <p>Mr. Hohorst suggested that the newborn data be replaced with observation days on attachment B.</p>		
8. ADJOURN	<i>Nevins</i>		
	Meeting adjourned at 5:41pm		



SUBJECT: Finance Committee Charter	POLICY #
DEPARTMENT: Board of Directors	PAGE 1 OF 4
APPROVED BY: Board of Directors	EFFECTIVE: 4/5/12
	REVISED: <u>3.26.13</u>

Purpose:

This charter (the “Charter”) sets forth the duties and responsibilities and governs the operations of the Finance Committee (the “Committee”) of the Board of Directors (the “Board”) of Sonoma Valley Healthcare District (the “District”), a nonprofit corporation organized and existing under the California Law.

The Finance Committee’s purpose is to assist the Board in its oversight of the District’s financial affairs, including District’s financial condition, financial planning, operational, and capital budgeting, debt structure, debt financing and refinancing and other significant financial matters involving the District. The Finance Committee is the body which recommends to the District Board on all financial decisions.

Policy:

Duties and Responsibilities

The Committee’s primary duties and responsibilities are as follows:

- A. Review Monthly Financial Operating Performance
 1. Review the District’s monthly financial operating performance. The committee will review the monthly financial statements, including but not limited to the Statement of Revenues and Expenses, Balance Sheet and Statement of Cash Flows, prepared by management. The committee will also review other financial indicators as warranted.
 2. Review management’s plan for improved financial and operational performance including but not limited to new patient care programs, cost management plans, and new financial arrangements. The committee will make recommendations to the Board when necessary.

- B. Budgets
 1. Review and recommend to the Board for approval an annual operating budget for the District.
 2. Review management’s budget assumptions including volume, growth, inflation and other budget assumptions.
 3. Review and recommend to the Board for approval an annual capital expenditures budget for



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the District. If deemed appropriate by the Committee, review and recommend to the Board for approval projected capital expenditures budgets for one or more succeeding years.

C. Debt, Financing and Refinancing

1. Evaluate and monitor the District's long and short-term indebtedness, debt structure, collateral or security, therefore, cash flows, and uses and applications of funds.
2. Evaluate and recommend to the Board for approval proposed new debt financing, including lines of credit, financings and refinancing, including (i) interest rate and whether the rate will be fixed or floating rate; (ii) collateral or security, if any; (iii) issuance costs; (iv) banks, investment banks, and underwriters retained or compensated by the District in connection with any financing or refinancing.
3. Review and recommend to the Board all guarantees or other obligations for the indebtedness of any third party.

D. Insurance

1. Review on an annual basis all insurance coverage's, including (i) identity and rating of carriers; (ii) premiums; (iii) retentions; (iv) self-insurance; (v) stop-loss policies; and (vi) all other aspects of insurance coverage for healthcare institutions.

E. Investment Policies

1. Review and recommend to the Board the District's cash management and cash investment policies, utilizing the advice of financial consultants as the Committee deems necessary or desirable.
2. Review and recommend to the Board the District's investment policies relating to assets of any employee benefit plans maintained and controlled by the District, utilizing the advice of financial consultants as the Committee deems necessary or desirable.

F. General

1. Review and recommend the services of all outside financial advisors, financial consultants, banks, investment banks, and underwriters for the District. Review annually the District's significant commercial and investment bank relationships.
2. Perform any other duties and responsibilities as the Board may deem necessary, advisable



SUBJECT: Finance Committee Charter	POLICY #
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or appropriate for the Committee to perform.

3. Perform such other duties and responsibilities as the Committee deems appropriate to carry out its purpose as provided in this Charter.
4. Meet on a monthly basis preceding the Board meeting concerning the District's financial affairs. Urgent and time sensitive matters shall be reported at the next regular or special Board meeting.
5. The Finance Committee will be invited to attend the presentation by the District's independent auditors.
6. The Finance Committee shall review the Charter annually after the close of the fiscal year, or more often if required. If revisions are needed, they will be taken to the Board for action.
7. The Finance Committee shall report to the District Board on the status of its prior fiscal year's work plan accomplishments by after the completion of the Financial Statement Audit.



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Organization

The Committee’s membership, the chairperson, the call and conduct of Committee meetings, the preparation of Committee minutes, and the Committee’s other activities shall be appointed, conducted and accomplished in accordance with applicable provisions of the Bylaws and the Corporate Governance Principles adopted by the Board. The committee’s membership is subject to the Approval of the District Board. The membership shall include the following:

- 1. Two (2) Board Members, one being the Treasurer
- 2. Six (6) District Citizens
- 3. At least one (1) member of the Medical Staff
- 4. District’s Chief Executive Officer (non-voting)
- 5. District’s Chief Financial Officer (non-voting)

Performance Evaluation

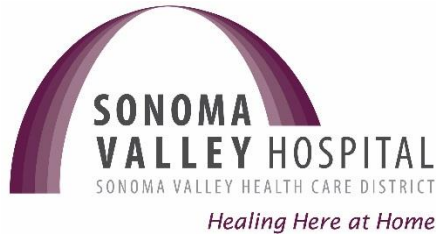
The Committee shall prepare and review with the Board an annual performance evaluation of the Committee, which evaluation shall compare the performance of the Committee with the requirements of this Charter. The performance evaluation shall also recommend to the Board any amendments to this Charter deemed necessary or desirable by the Committee. The performance evaluation shall be conducted in such manner as the Committee deems appropriate. The report to the Board may take the form of an oral report by the chairperson or any other member of the Committee designated by the Committee to make the report.

Resources and Authority of the Committee

The Finance Committee shall have the resources and authority appropriate to discharge its duties and responsibilities, including the responsibility to recommend to select, retain, terminate, and approve the engagement and other retention terms of special counsel or other experts or consultants, as it deems appropriate.

Amendment

This Charter shall not be amended except upon approval by the Board.
| Adopted by the Board on April 5, 2012.



To: SVHCD Board of Directors
From: Kelly Mather
Date: 7/3/19
Subject: Administrative Report

Summary

We ended FY 2020 financially on a positive note after a year of significant and necessary change. The Days cash on hand exceeded goal for the first time in years. The Skilled Nursing Facility, now called “Valley of the Moon Post Acute”, is under new management and the transition went well. The South Lot sale will go through next week.

Strategic Update from FY 2020 Strategic Plan:

Strategic Priorities	Update
Exceed Community Expectations in Emergency Services	<ul style="list-style-type: none"> ➤ We started the marketing campaign around our Emergency Services this summer to continue to remind our community about what we do here at home. ➤ The Foundation and the Hospital are meeting with a communications firm to revisit the face of the hospital and our message before the Parcel Tax vote in 2021. ➤ We are doing another Community Perception survey this fall. We did one in 2015 and it was generally positive and look forward to seeing these results.
Create UCSF Health Outpatient Center	<ul style="list-style-type: none"> ➤ We have raised over \$17 million towards the goal of \$21 million to complete the new CT, MRI suites and upgrade the facilities in the new Outpatient Diagnostic Center (ODC.) ➤ We plan to break ground on the first phase of the ODC by December, 2019. ➤ The Patient Access Center has now been live with Imaging services for a few months. We will add other outpatient services to their responsibilities this summer.
Become a 5 Star Hospital	<ul style="list-style-type: none"> ➤ The new hospitalist group is up and running. There were a lot of changes happening and this transition will take time. The physicians and nursing staff have shared their concerns and we are addressing them. ➤ The Patient Experience team is focusing on two areas for improvement: Communication on Medications and Food. ➤ The Respiratory Therapy, Inpatient Rehab and Case Management all have a home on 3rd floor to increase teamwork and the inpatient experience.
Provide Access to Excellent Physicians	<ul style="list-style-type: none"> ➤ The Prima physicians are upgrading their Electronic Health Record to be the same as UCSF as of August 1st. This will improve coordination of care. ➤ We are discussing recruitment of another Primary Care Physician for Prima. ➤ We have made good progress to bring several physicians from UCSF to Sonoma. ➤ We will do an annual assessment of the Sonoma Family Practice this month.
Healthy Hospital	<ul style="list-style-type: none"> ➤ The staff satisfaction survey results for the organization are complete and will be shared at the August Board meeting. ➤ The new Organization chart demonstrates less leaders and some leaders doing multiple jobs now that we have reduced the size of our hospital. ➤ The South Lot sale is almost complete. We recommend using the proceeds to pay down our line of credit.

MAY 2019

			National
Patient Experience	Current Performance	FY 2019 Goal	Benchmark
Would Recommend Hospital	67 th	> 60th percentile	50th percentile
Inpatient Overall Rating	62.5%	>60th percentile	50th percentile
Outpatient Services	4.71	Rate My Hospital	4.5
Emergency	4.53	Rate My Hospital	4.5
Quality & Safety	YTD Performance	FY 2019 Goal	Benchmark
CLABSI	0	<1	<.51
CAUTI	0	<1	<1.04
SSI – Colon Surgery	0	<1	N/A
SSI – Total Joint	0	<1.5%	N/A
MRSA Bacteremia	0	<.13	<.13
C. Diff	0	3.5	7.4/10,000 pt days
PSI – 90 Composite	2	<1	<1
Heart Failure Mortality Rate	12.5%	TBD	17.3%
Pneumonia Mortality Rate	18.1%	TBD	23.6%
Stroke Mortality Rate	14.7%	TBD	19.7%
Sepsis Mortality Rate	10.2%	<18%	25%
30 Day All- Cause Readmissions	9.50%	< 10 %	< 18.5%
Serious Safety Events	0	0	0
Falls	2.7	< 2.3	2.3
Pressure Ulcers	0	<3.7	3.7
Injuries to Staff	15	< 10	17
Adverse Drug Events with Harm	0	0	0
Reportable HIPAA Privacy Events	0	0	0
SNF Star Rating	4	4	3
Hospital Star Rating	4	4	3
Our People	Performance	FY 2019 Goal	Benchmark
Staff Satisfaction Survey	61 st percentile	75th percentile	50th percentile
Turnover	14.5%/15.8%	< 10%	< 15%
Financial Stability	YTD Performance	FY 2019 Goal	Benchmark
EBDA	6.8%	1%	3%
FTE's/AOB	3.8	4.3	5.3
Days Cash on Hand	39	20	30
Days in Accounts Receivable	37	49	50
Length of Stay	3.8	3.85	4.03
Funds raised by SVHF	\$17.2 million	\$20 million	\$1 million
Strategic Growth	YTD Performance	FY 2019 Goal	Benchmark
Inpatient Discharges	1003/1094	1000	1000
Outpatient Visits	50,160/54,720	53,000	51,924
Emergency Visits	9240/10,080	10,000	11,040
Surgeries + Special Procedures	2691/2935	2500	2,568
Community Benefit Hours	1124/1226	1200	1200

Note: Colors demonstrate comparison to National Benchmark



To: SVH Finance Committee
From: Ken Jensen, CFO
Date: July 23, 2019
Subject: Financial Report for the Month Ending June 30, 2019 – Pre Audit Financials

June's actual loss of (\$642,229) from operations was (\$63,543) unfavorable to the budgeted loss of (\$578,686). During the month of June the hospital experienced overall lower than budgeted volume except in the Emergency room where volume was over budgeted expectations. The hospital was able to offset the lower net revenue with better than budgeted expenses primarily in employee costs. After accounting for all other activity; the net gain for June was \$15,490 vs. the budgeted net loss of (\$96,924) with a monthly EBDA of -2.4% vs. a budgeted -0.8%.

Gross patient revenue for June was \$20,650,512; (\$2,400,880) under budget. Inpatient gross revenue was under budget by (\$2,066,263). Inpatient days were under budget by (89) days and inpatient surgeries were under budgeted expectations by (18) cases. Outpatient revenue was under budget by (\$503,761). Outpatient visits were under budgeted expectations by (557) visits, and outpatient surgeries were over budgeted expectations by 9 cases and special procedures were over budget by 12 cases. The Emergency Room gross revenue was over budget by \$621,878 with ER visits over budgeted expectations by 85 visits. SNF gross revenue was under budgeted expectations by (\$452,734) with SNF patient days under budget by (144) days and an average daily census of 10.2 patients.

Deductions from revenue were favorable to budgeted expectations by \$2,158,502. Of the variance, (\$290,055) is from the prior period adjustments or IGT payments. Without the IGT variance, the deductions from revenue variance is favorable by \$2,448,557 which is due to gross revenue being under budgeted expectation.

After accounting for all other operating revenue, the **total operating revenue** was unfavorable to budgeted expectations by (257,164).

Operating Expenses of \$4,815,075 were favorable to budget by \$193,621. Salaries and wages and agency fees were under budget by \$69,571 with the salaries and wages being under budget by \$31,990 and agency fees under by \$37,581. Supplies were under budget in June due to the lower volume in clinical departments. Purchased Services are over budget by (\$116,657) primarily due to the remaining cost of repaving the visitor parking lots (\$72,347). Other expenses are over budget by (\$25,147) primarily due to the accrual of legal fees expected from the SNF Management Agreement.



After accounting for all income and expenses, but not including Restricted Contributions and GO bond activity, the net loss for June was (\$358,181) vs. a budgeted net loss of (\$326,544). The total net income for June after all activity was \$15,490 vs. a budgeted net loss of (\$96,924).

EBIDA for the month of June was -2.4% vs. the budgeted -0.8%.

Patient Volumes – June

	ACTUAL	BUDGET	VARIANCE	PRIOR YEAR
Acute Discharges	66	88	-22	99
Newborn Discharges	0	0	0	16
Acute Patient Days	220	309	-89	354
SNF Patient Days	306	450	-144	545
Home Care Visits	0	0	0	871
OP Gross Revenue	\$15,138	\$15,020	\$118	\$13,677
Surgical Cases	157	166	-9	151

Gross Revenue Overall Payer Mix – June

	ACTUAL	BUDGET	VARIANCE	YTD ACTUAL	YTD BUDGET	VARIANCE
Medicare	41.1%	42.9%	-1.8%	42.8%	42.9%	-0.1%
Medicare Mgd Care	14.2%	12.8%	1.4%	14.0%	12.8%	1.2%
Medi-Cal	18.8%	17.7%	1.1%	18.1%	17.9%	0.2%
Self Pay	2.5%	1.3%	1.2%	1.4%	1.4%	0.0%
Commercial	20.1%	20.6%	-0.5%	20.1%	20.6%	-0.5%
Workers Comp	2.1%	2.6%	-0.5%	2.1%	2.4%	-0.3%
Capitated	1.2%	2.1%	-0.9%	1.5%	2.0%	-0.5%
Total	100.0%	100.0%		100.0%	100.0%	

Cash Activity for June:

For the month of June the cash collection goal was \$3,535,118 and the Hospital collected \$3,272,053 or under the goal by (\$263,065). The year-to-date cash collection goal was \$43,593,495 and the Hospital has collected \$44,121,125 or over goal by \$527,630. Days of cash on hand are 35.3 days at June 30, 2019. Accounts Receivable increased from May, from 37.2 days to 43.0 days in June. Accounts Payable increased by \$621,339 from May and Accounts Payable days are at 53.0.

Year End June 30, 2019 (Unaudited):

After accounting for all activity, the Fiscal Year ended with a net gain of \$4,234,934 vs. a budgeted net loss of (\$166,530). EBIDA ended at \$3,590,712 or 6.1% vs. budgeted at \$556,228, or 1.0%. Accounts Payable at year end was \$4,242,741 vs. \$3,814,430 at the end of last fiscal year. Cash at June 30, 2019 was \$3,450,014 vs. \$1,671,423 at June 30, 2018.

At fiscal year-end June 30, 2019 the gross patient revenue is over budget by \$1,066,307 with the inpatient gross revenue under budget by (\$826,497), outpatient gross revenue over budget by \$6,617,520, ER gross revenue under budget by (\$1,740,971), and the SNF gross revenue was under budget by (\$2,640,039). The fiscal year-end June 30, 2019 revenue deductions were favorable to budget by \$3,481,052. Of the variance, \$4,974,818 is from the prior period adjustments or IGT payments. Without the prior period adjustments and IGT variance, the deductions from revenue variance is unfavorable by (\$1,493,766) which is due to better than budgeted gross revenue and an increase to the bad debt reserve.

During fiscal year 2019 the hospital received \$9,205,478 in governmental supplemental program payments which were offset by matching fees of (\$2,796,223) for a net of \$6,409,255.

At fiscal year-end June 30, 2019 expenses are over budget by (\$1,419,588). At year-end total people cost were under budget by \$298,938. Salaries, wages, and agency fees were over budget by (\$298,774) due to the increase use in registry in the ICU, ER, and Physical Therapy staff for the SNF. This was offset by employee benefits being better than budget by \$597,712. Physician and Professional fees were under budget by \$336,818 due lower than budgeted costs for on-call physicians and a reduction of consulting costs in the Family Practice Clinic and in Patient Financial Services. Supplies were over budget by (\$122,133) primarily in the pharmacy due to the loss of the hospital's participation in the 340b drug program. Purchased Services were over budget by (\$380,299) primarily in Plant Operations (\$241,341) due to the repaving of the hospital's visiting parking lots (\$150,597) and other unbudgeted repairs and maintenance costs and in Pharmacy (\$32,471) and Information Systems (\$51,453). The hospital had IGT matching fees of \$2,796,223 that were over budget by (\$1,735,388).

During fiscal year 2019 the hospital received \$1,946,999 from the Sonoma Valley Hospital Foundation for the Outpatient diagnostic center, 3rd floor acute care move, and various equipment.

ATTACHMENTS:

- Attachment A is the Payer Mix Analysis which includes the projected collection percentage by payer.
- Attachment B is the Operating Indicators Report
- Attachment C is the Balance Sheet
- Attachment D (two pages) is the Statement of Revenue and Expense. The first page breaks out the hospital operations and page two includes all other activity.
- Attachment E is the Variance Analysis. The line number tie to the Statement of Revenue and Expense line numbers and explains any significant variances.
- Attachment F are the graphs for Revenue and Accounts Payable.
- Attachment G is the Statistical Analysis
- Attachment H is the Cash Forecast



Sonoma Valley Hospital
Payer Mix for the month of June 30, 2019

ATTACHMENT A

YTD

Gross Revenue:	Actual	Budget	Variance	% Variance	Actual	Budget	Variance	% Variance
Medicare	8,523,794	9,867,539	-1,343,745	-13.6%	116,561,190	116,222,656	338,534	0.3%
Medicare Managed Care	2,923,028	2,949,082	-26,054	-0.9%	38,096,371	34,734,018	3,362,353	9.7%
Medi-Cal	3,871,673	4,079,541	-207,868	-5.1%	49,123,007	48,411,407	711,600	1.5%
Self Pay	520,949	303,329	217,620	71.7%	3,706,685	3,675,037	31,648	0.9%
Commercial & Other Government	4,144,650	4,760,915	-616,265	-12.9%	54,779,982	55,852,324	-1,072,342	-1.9%
Worker's Comp.	423,918	599,590	-175,672	-29.3%	5,744,652	6,662,798	-918,146	-13.8%
Capitated	242,500	491,396	-248,896	-50.7%	4,085,786	5,473,126	-1,387,340	-25.3%
Total	20,650,512	23,051,392	(2,400,880)		272,097,673	271,031,366	1,066,307	

Net Revenue:	Actual	Budget	Variance	% Variance	Actual	Budget	Variance	% Variance
Medicare	1,216,849	1,256,455	-39,606	-3.2%	16,255,595	16,050,557	205,038	1.3%
Medicare Managed Care	351,348	363,618	-12,270	-3.4%	4,938,240	4,488,151	450,089	10.0%
Medi-Cal	544,855	540,417	4,438	0.8%	6,533,624	6,364,093	169,531	2.7%
Self Pay	293,611	111,716	181,895	162.8%	1,943,193	1,672,675	270,518	16.2%
Commercial & Other Government	1,497,426	1,539,374	-41,948	-2.7%	17,536,228	18,421,245	-885,017	-4.8%
Worker's Comp.	107,336	139,969	-32,633	-23.3%	1,051,538	1,612,212	-560,674	-34.8%
Capitated	3,735	15,934	-12,199	-76.6%	98,421	175,365	-76,944	-43.9%
Prior Period Adj/IGT	62,500	352,555	-290,055	-82.3%	9,205,478	4,230,660	4,974,818	117.6%
Total	4,077,660	4,320,038	(242,378)	-5.6%	57,562,317	53,014,958	4,547,359	8.6%

Percent of Net Revenue:	Actual	Budget	Variance	% Variance	Actual	Budget	Variance	% Variance
Medicare	29.9%	29.1%	0.8%	2.7%	28.2%	30.3%	-2.2%	-7.3%
Medicare Managed Care	8.6%	8.4%	0.2%	2.4%	8.6%	8.5%	0.1%	1.2%
Medi-Cal	13.4%	12.5%	0.9%	7.2%	11.4%	12.0%	-0.6%	-5.0%
Self Pay	7.2%	2.6%	4.6%	176.9%	3.4%	3.2%	0.2%	6.3%
Commercial & Other Government	36.7%	35.6%	1.1%	3.1%	30.4%	34.7%	-4.3%	-12.4%
Worker's Comp.	2.6%	3.2%	-0.6%	-18.8%	1.8%	3.0%	-1.2%	-40.0%
Capitated	0.1%	0.4%	-0.3%	-75.0%	0.2%	0.3%	-0.1%	-33.3%
Prior Period Adj/IGT	1.5%	8.2%	-6.7%	-81.7%	16.0%	8.0%	8.0%	100.0%
Total	100.0%	100.0%	0.0%	0.0%	100.0%	100.0%	-8.1%	-8.1%

Projected Collection Percentage:	Actual	Budget	Variance	% Variance	Actual	Budget	Variance	% Variance
Medicare	14.3%	12.7%	1.6%	12.6%	13.9%	13.8%	0.1%	0.7%
Medicare Managed Care	12.0%	12.3%	-0.3%	-2.4%	13.0%	12.9%	0.1%	0.8%
Medi-Cal	14.1%	13.2%	0.9%	6.8%	13.3%	13.1%	0.2%	1.5%
Self Pay	56.4%	36.8%	19.6%	53.3%	52.4%	45.5%	6.9%	15.2%
Commercial & Other Government	36.1%	32.3%	3.8%	11.8%	32.0%	33.0%	-1.0%	-3.0%
Worker's Comp.	25.3%	23.3%	2.0%	8.6%	18.3%	24.2%	-5.9%	-24.4%

**SONOMA VALLEY HOSPITAL
OPERATING INDICATORS
For the Period Ended June 30, 2019**

ATTACHMENT B

	<u>CURRENT MONTH</u>				<u>YEAR-TO-DATE</u>			<u>YTD</u>
	<u>Actual 06/30/19</u>	<u>Budget 06/30/19</u>	<u>Favorable (Unfavorable) Variance</u>		<u>Actual 06/30/19</u>	<u>Budget 06/30/19</u>	<u>Favorable (Unfavorable) Variance</u>	<u>Prior Year 06/30/18</u>
Inpatient Utilization								
Discharges								
1	46	76	(30)	Acute	871	947	(76)	985
2	20	12	8	ICU	152	145	7	163
3	66	88	(22)	Total Discharges	1,023	1,092	(69)	1,148
4	-	-	-	Newborn	46	24	22	113
5	66	88	(22)	Total Discharges inc. Newborns	1,069	1,116	(47)	1,261
Patient Days:								
6	139	223	(84)	Acute	2,870	2,849	21	2,969
7	81	86	(5)	ICU	971	1,027	(56)	1,030
8	220	309	(89)	Total Patient Days	3,841	3,876	(35)	3,999
9	-	-	-	Newborn	102	45	57	202
10	220	309	(89)	Total Patient Days inc. Newborns	3,943	3,921	22	4,201
Average Length of Stay:								
11	3.0	2.9	0.1	Acute	3.3	3.0	0.3	3.0
12	4.1	7.2	(3.1)	ICU	6.4	7.1	(0.7)	6.3
13	3.3	3.5	(0.2)	Avg. Length of Stay	3.8	3.5	0.2	3.5
14	0.0	0.0	-	Newborn ALOS	2.2	1.9	(0.3)	1.8
Average Daily Census:								
15	4.6	7.4	(2.8)	Acute	7.9	7.8	0.1	8.1
16	2.7	2.9	(0.2)	ICU	2.7	2.8	(0.2)	2.8
17	7.3	10.3	(3.0)	Avg. Daily Census	10.5	10.6	(0.1)	11.0
18	0.0	0.0	-	Newborn	0.28	0.12	0.2	0.55
Long Term Care:								
19	306	450	(144)	SNF Patient Days	4,810	5,865	(1,055)	6,361
20	18	26	(8)	SNF Discharges	258	323	(65)	360
21	10.2	15.0	(4.8)	Average Daily Census	13.2	16.1	(2.9)	17.4
Other Utilization Statistics								
Emergency Room Statistics								
22	941	856	85	Total ER Visits	10,181	10,771	(590)	10,629
Outpatient Statistics:								
23	4,436	4,993	(557)	Total Outpatients Visits	54,596	54,698	(102)	53,253
24	17	35	(18)	IP Surgeries	319	346	(27)	334
25	140	131	9	OP Surgeries	1,628	1,606	22	1,515
26	102	90	12	Special Procedures	1,003	788	215	859
27	-	-	-	Home Health Visits	2,027	3,837	(1,810)	9,350
28	315	327	(12)	Adjusted Discharges	3,763	3,986	(223)	4,062
29	1,970	2,177	(207)	Adjusted Patient Days (Inc. SNF)	25,371	27,456	(2,085)	27,921
30	65.7	72.6	(6.9)	Adj. Avg. Daily Census (Inc. SNF)	69.5	75.2	(5.7)	76.5
31	1.6194	1.4000	0.219	Case Mix Index -Medicare	1.5294	1.4000	0.129	1.5047
32	1.6561	1.4000	0.256	Case Mix Index - All payers	1.5545	1.4000	0.155	1.4851
Labor Statistics								
33	224	253	29.8	FTE's - Worked	256	261	5.0	275
34	255	287	31.8	FTE's - Paid	285	295	10.4	310
35	45.45	41.82	(3.63)	Average Hourly Rate	43.12	41.12	(2.00)	42.94
36	22.1	22.5	0.4	Manhours / Adj. Pat Day	23.3	22.4	(1.0)	23.1
37	138.4	149.8	11.4	Manhours / Adj. Discharge	157.4	154.0	(3.4)	158.6
38	22.4%	23.9%	1.5%	Benefits % of Salaries	22.8%	23.7%	0.9%	21.7%
Non-Labor Statistics								
39	13.5%	13.8%	0.3%	Supply Expense % Net Revenue	13.2%	12.5%	-0.7%	11.6%
40	1,755	1,861	106	Supply Exp. / Adj. Discharge	1,841	1,708	(134)	1,598
41	15,666	15,797	132	Total Expense / Adj. Discharge	16,869	15,628	(1,241)	15,858
Other Indicators								
42	35.3			Days Cash - Operating Funds				
43	43.0	50.0	(7.0)	Days in Net AR	42.6	50.0	(7.4)	45.8
44	93%			Collections % of Net Revenue	101%			103.7%
45	53.0	55.0	(2.0)	Days in Accounts Payable	53.0	55.0	(2.0)	45.0
46	19.9%	19.2%	0.7%	% Net revenue to Gross revenue	19.2%	20.0%	-0.8%	21.2%
47	21.4%			% Net AR to Gross AR	21.4%			21.5%

Sonoma Valley Health Care District
Balance Sheet
As of June 30, 2019

ATTACHMENT C

	<u>Current Month</u>	<u>Prior Month</u>	<u>Prior Year</u>
Assets			
Current Assets:			
1 Cash	\$ 3,450,014	\$ 4,082,531	\$ 1,671,423
2 Trustee Funds	5,016,479	4,999,410	4,431,932
3 Net Patient Receivables	7,126,897	6,258,285	7,792,665
4 Allow Uncollect Accts	(1,185,346)	(1,255,011)	(1,210,340)
5 Net A/R	5,941,551	5,003,274	6,582,325
6 Other Accts/Notes Rec	7,051,556	(73,409)	6,904,040
7 3rd Party Receivables, Net	1,171,358	1,279,593	1,800,325
8 Inventory	901,652	877,125	852,689
9 Prepaid Expenses	1,120,165	797,542	776,242
10 Total Current Assets	<u>\$ 24,652,775</u>	<u>\$ 16,966,066</u>	<u>\$ 23,018,976</u>
12 Property, Plant & Equip, Net	\$ 50,868,938	\$ 51,098,617	\$ 51,965,266
13 Specific Funds/ Money Market	2,201,684	2,201,431	671,315
14 Other Assets	-	-	-
15 Total Assets	<u><u>\$ 77,723,397</u></u>	<u><u>\$ 70,266,114</u></u>	<u><u>\$ 75,655,557</u></u>
Liabilities & Fund Balances			
Current Liabilities:			
16 Accounts Payable	\$ 4,242,741	\$ 3,621,402	\$ 3,814,340
17 Accrued Compensation	3,670,842	3,802,899	4,071,080
18 Interest Payable	503,825	403,057	528,873
19 Accrued Expenses	1,746,367	1,386,452	1,320,048
20 Advances From 3rd Parties	297,936	105,388	124,882
21 Deferred Tax Revenue	6,904,781	571,102	6,853,235
22 Current Maturities-LTD	544,598	611,934	1,302,516
23 Line of Credit - Union Bank	6,723,734	6,723,734	6,973,734
24 Other Liabilities	201,386	201,386	2,201,386
25 Total Current Liabilities	<u>\$ 24,836,210</u>	<u>\$ 17,427,354</u>	<u>\$ 27,190,094</u>
26 Long Term Debt, net current portion	\$ 32,811,420	\$ 32,778,482	\$ 32,457,139
Fund Balances:			
28 Unrestricted	\$ 13,207,065	\$ 13,191,576	\$ 10,945,354
29 Restricted	6,868,702	6,868,702	5,062,970
30 Total Fund Balances	<u>\$ 20,075,767</u>	<u>\$ 20,060,278</u>	<u>\$ 16,008,324</u>
31 Total Liabilities & Fund Balances	<u><u>\$ 77,723,397</u></u>	<u><u>\$ 70,266,114</u></u>	<u><u>\$ 75,655,557</u></u>

**Sonoma Valley Health Care District
Statement of Revenue and Expenses
Comparative Results
For the Period Ended June 30, 2019**

ATTACHMENT D

	Month				Volume Information	Year-To-Date				YTD					
	This Year		Variance			This Year		Variance			Prior Year				
	Actual		\$	%		Actual	Budget	\$	%						
1	66	88	(22)	-25%	Acute Discharges	1,023	1,092	(69)	-6%	1,148					
2	306	450	(144)	-32%	SNF Days	4,810	5,865	(1,055)	-18%	6,361					
3	-	-	-	0%	Home Care Visits	2,027	3,837	(1,810)	-47%	9,350					
4	15,138	15,020	118	1%	Gross O/P Revenue (000's)	\$ 179,269	\$ 174,654	4,614	3%	\$ 166,289					
Financial Results															
Gross Patient Revenue															
5	\$ 4,287,222	\$ 6,353,485	(2,066,263)	-33%	Inpatient	\$ 73,559,599	\$ 74,386,096	(826,497)	-1%	\$ 74,185,947					
6	8,251,132	8,754,893	(503,761)	-6%	Outpatient	102,472,437	95,854,917	6,617,520	7%	91,863,215					
7	6,887,100	6,265,222	621,878	10%	Emergency	76,095,407	77,836,378	(1,740,971)	-2%	71,169,484					
8	1,225,058	1,677,792	(452,734)	-27%	SNF	19,207,783	21,847,822	(2,640,039)	-12%	24,062,441					
9	-	-	-	0%	Home Care	762,447	1,106,153	(343,706)	-31%	3,421,722					
10	\$ 20,650,512	\$ 23,051,392	(2,400,880)	-10%	Total Gross Patient Revenue	\$ 272,097,673	\$ 271,031,366	1,066,307	0%	\$ 264,702,809					
Deductions from Revenue															
11	\$ (16,403,242)	\$ (18,959,174)	2,555,932	13%	Contractual Discounts	\$ (221,461,298)	\$ (220,750,303)	(710,995)	0%	\$ (213,195,741)					
12	(195,000)	(100,000)	(95,000)	-95%	Bad Debt	(1,980,000)	(1,200,000)	(780,000)	-65%	(1,903,000)					
13	(37,110)	(24,735)	(12,375)	-50%	Charity Care Provision	(299,536)	(296,765)	(2,771)	-1%	(191,666)					
14	62,500	352,555	(290,055)	-82%	Prior Period Adj/Government Program Revenue	9,205,478	4,230,660	4,974,818	*	5,286,886					
15	\$ (16,572,852)	\$ (18,731,354)	2,158,502	-12%	Total Deductions from Revenue	\$ (214,535,356)	\$ (218,016,408)	3,481,052	-2%	\$ (210,003,521)					
Net Patient Service Revenue															
16	\$ 4,077,660	\$ 4,320,038	(242,378)	-6%	Risk contract revenue	\$ 755,801	\$ 1,241,385	(485,584)	-39%	\$ 1,358,417					
17	\$ 24,084	\$ 95,999	(71,915)	-75%	Net Hospital Revenue	\$ 58,318,118	\$ 54,256,343	4,061,775	7%	\$ 56,057,705					
18	\$ 4,101,744	\$ 4,416,037	(314,293)	-7%	Other Op Rev & Electronic Health Records	\$ 499,083	\$ 167,621	331,462	198%	\$ 186,371					
19	\$ 71,102	\$ 13,973	57,129	*	Total Operating Revenue	\$ 58,817,201	\$ 54,423,964	4,393,237	8%	\$ 56,244,076					
20	\$ 4,172,846	\$ 4,430,010	(257,164)	-6%	Operating Expenses										
21	\$ 1,978,892	\$ 2,048,463	69,571	3%	Salary and Wages and Agency Fees	\$ 25,542,835	\$ 25,244,061	(298,774)	-1%	\$ 27,666,431					
22	725,593	779,097	53,504	7%	Employee Benefits	9,069,787	9,667,499	597,712	6%	10,170,264					
23	\$ 2,704,485	\$ 2,827,560	123,075	4%	Total People Cost	\$ 34,612,622	\$ 34,911,560	298,938	1%	\$ 37,836,695					
24	\$ 481,518	\$ 497,815	16,297	3%	Med and Prof Fees (excl Agency)	\$ 5,669,261	\$ 6,006,079	336,818	6%	\$ 5,053,429					
25	552,200	608,749	56,549	9%	Supplies	6,928,535	6,806,402	(122,133)	-2%	6,490,766					
26	497,414	380,757	(116,657)	-31%	Purchased Services	4,863,412	4,483,113	(380,299)	-8%	4,398,278					
27	256,183	290,874	34,691	12%	Depreciation	3,392,235	3,473,190	80,955	2%	3,424,202					
28	100,962	115,414	14,452	13%	Utilities	1,172,034	1,247,155	75,121	6%	1,189,992					
29	40,081	35,321	(4,760)	-13%	Insurance	441,379	418,168	(23,211)	-6%	381,828					
30	50,243	56,961	6,718	12%	Interest	643,008	640,165	(2,843)	0%	564,618					
31	131,989	106,842	(25,147)	-24%	Other	1,296,235	1,348,689	52,454	4%	1,428,617					
32	-	88,403	88,403	*	Matching Fees (Government Programs)	2,796,223	1,060,835	(1,735,388)	*	1,695,736					
33	\$ 4,815,075	\$ 5,008,696	193,621	4%	Operating expenses	\$ 61,814,944	\$ 60,395,356	(1,419,588)	-2%	\$ 62,464,161					
34	\$ (642,229)	\$ (578,686)	(63,543)	-11%	Operating Margin	\$ (2,997,743)	\$ (5,971,392)	2,973,649	50%	\$ (6,220,085)					

**Sonoma Valley Health Care District
Statement of Revenue and Expenses
Comparative Results
For the Period Ended June 30, 2019**

ATTACHMENT D

	Month					Year-To- Date				YTD	
	This Year		Variance			This Year		Variance			Prior Year
	Actual		\$	%		Actual	Budget	\$	%		
35	\$ (1,370)	\$ (10,431)	9,061	-87%						\$ (101,082)	
36	-	2,672	(2,672)	-100%						30,326	
37	(13,000)	(56,766)	43,766	-77%						(681,192)	
38	298,418	316,667	(18,249)	-6%						3,792,096	
39	0	0	-	0%						(26,875)	
40	\$ 284,048	\$ 252,142	31,906	13%						\$ 3,013,273	
41	\$ (358,181)	\$ (326,544)	(31,637)	10%	Net Income / (Loss) prior to Restricted Contributions	\$ 198,477	\$ (2,916,962)	3,115,439	-107%	\$ (3,206,812)	
42	\$ -	\$ 20,949	(20,949)	-100%						\$ 143,998	
43	\$ -	\$ 55,003	(55,003)	0%						\$ 1,039,838	
44	\$ (358,181)	\$ (250,592)	(107,589)	43%	Net Income / (Loss) w/ Restricted Contributions	\$ 2,175,923	\$ (2,005,538)	4,181,461	-208%	\$ (2,022,976)	
45	474,439	254,436	220,003	86%						3,164,434	
46	(100,768)	(100,768)	-	0%						(1,273,802)	
47	\$ 15,490	\$ (96,924)	112,414	-116%	Net Income/(Loss) w GO Bond Activity	\$ 4,234,934	\$ (166,530)	4,401,464	-2643%	\$ (132,344)	
	\$ (101,998)	\$ (35,670)	(66,328)		EBDA - Not including Restricted Contributions	\$ 3,590,712	\$ 556,228	3,034,484		\$ 217,390	
	-2.4%	-0.8%				6.1%	1.0%			0.4%	

**Sonoma Valley Health Care District
Statement of Revenue and Expenses Variance Analysis
For the Period Ended June 30, 2019**

	YTD	MONTH	
Description	Variance	Variance	
Volume Information			
1 Acute Discharges	(69)	(22)	
2 SNF Days	(1,055)	(144)	
3 Home Care Visits	(1,810)	-	
4 Gross O/P Revenue (000's)	4,614	118	
Financial Results			
Gross Patient Revenue			
5 Inpatient	(826,497)	(2,066,263)	Inpatient days are 220 days vs. budgeted expectations of 309 days and inpatient surgeries are 17 vs. budgeted expectations 35.
6 Outpatient	6,617,520	(503,761)	Outpatient visits are 4,436 vs. budgeted expectations of 4,993 visits and outpatient surgeries are 140 vs. budgeted expectations 131.
7 Emergency	(1,740,971)	621,878	ER visits are 941 vs. budgeted visits of 856.
8 SNF	(2,640,039)	(452,734)	SNF patient days are 306 vs. budgeted expected days of 450.
9 Home Care	(343,706)	-	
10 Total Gross Patient Revenue	1,066,307	(2,400,880)	
Deductions from Revenue			
11 Contractual Discounts	(710,995)	2,555,932	
12 Bad Debt	(780,000)	(95,000)	
13 Charity Care Provision	(2,771)	(12,375)	
14 Prior Period Adj/Government Program Revenue	4,974,818	(290,055)	Accrual of Prime Grant (\$62,500).
15 Total Deductions from Revenue	3,481,052	2,158,502	
16 Net Patient Service Revenue	4,547,359	(242,378)	
17 Risk contract revenue	(485,584)	(71,915)	
18 Net Hospital Revenue	4,061,775	(314,293)	
19 Other Op Rev & Electronic Health Records	331,462	57,129	
20 Total Operating Revenue	4,393,237	(257,164)	
Operating Expenses			
21 Salary and Wages and Agency Fees	(298,774)	69,571	Salaries and Wages are under budget by \$31,990 and Agency fees are under budget by \$37,581
22 Employee Benefits	597,712	53,504	
23 Total People Cost	298,938	123,075	
24 Med and Prof Fees (excl Agency)	336,818	16,297	
25 Supplies	(122,133)	56,549	Supplies under budget in clinical departments due to lower than budgeted volume
26 Purchased Services	(380,299)	(116,657)	Purchased services over budget due to 1/2 of cost to repair visitor parking lots - total cost is \$150,597.
27 Depreciation	80,955	34,691	
28 Utilities	75,121	14,452	
29 Insurance	(23,211)	(4,760)	
30 Interest	(2,843)	6,718	
31 Other	52,454	(25,147)	Accrual of legal fees (\$20,000) pertaining to the SNF Management agreement
32 Matching Fees (Government Programs)	(1,735,388)	88,403	No Matching fees in June 2019
33 Operating expenses	(1,419,588)	193,621	
34 Operating Margin	2,973,649	(63,543)	
Non Operating Rev and Expense			
35 Miscellaneous Revenue	(55,088)	9,061	
36 Donations	(15,451)	(2,672)	
37 Physician Practice Support-Prima	231,328	43,766	
38 Parcel Tax Assessment Rev	(18,999)	(18,249)	
39 Extraordinary Items	-	-	
40 Total Non-Operating Rev/Exp	141,790	31,906	
41 Net Income / (Loss) prior to Restricted Contributions	3,115,439	(31,637)	

Sonoma Valley Health Care District
Statement of Revenue and Expenses Variance Analysis
For the Period Ended June 30, 2019

	YTD	MONTH	
Description	Variance	Variance	
		-	
42 Capital Campaign Contribution	(220,941)	(20,949)	
43 Restricted Foundation Contributions	1,286,963	(55,003)	
44 Net Income / (Loss) w/ Restricted Contributions	4,181,461	(107,589)	
45 GO Bond Tax Assessment Rev	220,003	220,003	
46 GO Bond Interest	-	-	
47 Net Income/(Loss) w GO Bond Activity	4,401,464	112,414	

Sonoma Valley Hospital
 Statistical Analysis
 FY 2019

ATTACHMENT G

Statistics	ACTUAL	BUDGET	ACTUAL												
	Jun-19	Jun-19	May-19	Apr-19	Mar-19	Feb-19	Jan-19	Dec-18	Nov-18	Oct-18	Sep-18	Aug-18	Jul-18	Jun-18	May-18
Acute															
Acute Patient Days	220	309	340	341	317	265	290	370	315	394	337	361	291	354	374
Acute Discharges (w/o Newborns)	66	88	86	87	87	76	83	97	93	92	90	85	81	99	108
SNF Days	306	450	383	362	357	286	345	291	326	405	457	628	664	545	423
HHA Visits	0	0	0	0	0	0	0	0	0	0	682	585	760	871	747
Emergency Room Visits	941	856	891	890	858	833	789	840	772	842	814	810	901	856	934
Gross Outpatient Revenue (000's)	\$15,138	\$15,020	\$16,224	\$15,396	\$15,281	\$13,994	\$14,826	\$13,583	\$13,530	\$15,824	\$13,946	\$16,762	\$14,801	\$13,677	\$15,188
Equivalent Patient Days	1,970	2,177	2,170	2,086	2,052	1,638	1,958	1,768	1,782	2,207	2,175	2,911	2,654	2,343	2,178
Births	0	0	0	0	0	0	0	0	0	9	13	14	8	16	9
Surgical Cases - Inpatient	17	35	32	30	29	18	20	26	33	34	31	26	23	28	29
Surgical Cases - Outpatient	140	131	134	133	134	137	137	123	128	141	151	139	127	123	146
Total Surgical Cases	157	166	166	163	163	155	157	149	161	175	182	165	150	151	175
Total Special Procedures	102	80	99	80	91	74	51	58	55	92	99	124	78	97	72
Medicare Case Mix Index	1.62	1.40	1.61	1.66	1.61	1.45	1.58	1.57	1.45	1.44	1.73	1.33	1.32	1.45	1.46
Income Statement															
Net Revenue (000's)	\$4,102	\$4,430	\$4,835	\$5,634	\$7,807	\$3,697	\$5,505	\$4,097	\$4,249	\$4,282	\$4,548	\$4,924	\$4,557	\$5,265	\$4,817
Operating Expenses (000's)	\$4,815	\$5,009	\$5,073	\$4,853	\$6,663	\$4,521	\$5,509	\$4,726	\$4,860	\$5,321	\$5,045	\$5,314	\$5,114	\$4,968	\$5,134
Net Income (000's)	\$15	(\$97)	\$249	\$1,687	\$1,722	(\$278)	\$807	(\$208)	(\$95)	(\$120)	\$209	\$32	\$214	\$859	\$369
Productivity															
Total Operating Expense Per Equivalent Patient Day	\$2,444	\$2,301	\$2,338	\$2,327	\$3,247	\$2,760	\$2,814	\$2,673	\$2,727	\$2,411	\$2,319	\$1,826	\$1,927	\$2,120	\$2,357
Productive FTEs	224	253	245	244	255	248	249	234	266	278	278	278	270	259	279
Non-Productive FTE's	31	34	21	23	20	29	31	47	22	20	36	31	40	39	27
Total FTEs	255	287	266	267	275	277	280	281	288	298	314	309	310	298	306
FTEs per Adjusted Occupied Bed	3.88	3.95	3.80	3.84	4.15	4.73	4.44	4.92	4.84	4.18	4.38	3.29	3.62	3.82	4.35
Balance Sheet															
Days of Expense In General Operating Cash	35.3		39	10	5	5	13	15	10	13	13	10	19	11	6
Net Days of Revenue in AR	43	50	37	38	44	43	43	44	45	44	48	43	41	42	47

Sonoma Valley Hospital
Cash Forecast
FY 2019

ATTACHMENT H

	Actual July	Actual Aug	Actual Sept	Actual Oct	Actual Nov	Actual Dec	Actual Jan	Actual Feb	Actual Mar	Actual Apr	Actual May	Actual Jun	TOTAL
Hospital Operating Sources													
1 Patient Payments Collected	4,372,057	4,288,459	3,963,236	4,597,184	4,281,345	4,244,883	4,197,482	3,957,008	3,711,986	5,022,741	4,362,374	3,749,749	50,748,504
2 Capitation Revenue	94,582	92,314	96,054	92,135	97,789	98,199	62,561	28,474	23,610	24,319	24,930	24,084	759,051
3 Napa State	12,295	4,713	-	24,798	8,185	-	-	5,135	6,174	8,306	3,794	1,842	75,242
4 Other Operating Revenue	40,299	47,536	18,852	63,629	24,975	48,665	35,012	10,595	22,415	47,814	35,484	28,722	423,997
5 Other Non-Operating Revenue	45,944	12,250	51,133	42,712	14,067	91,000	51,984	66,482	104,954	59,194	32,445	32,240	604,405
6 Unrestricted Contributions	403		415	4,175	2,381	1,159		509	2,136	6,594			17,772
7 Line of Credit													-
Sub-Total Hospital Sources	4,565,580	4,445,271	4,129,690	4,824,633	4,428,742	4,483,906	4,347,039	4,068,202	3,871,275	5,168,968	4,459,027	3,836,637	52,628,971
Hospital Uses of Cash													
8 Operating Expenses	4,897,828	5,636,984	5,473,847	4,825,598	4,505,452	4,768,421	5,387,017	4,586,118	4,035,545	4,737,356	5,035,469	4,848,687	58,738,322
9 Add Capital Lease Payments	44,847	193,141	46,104	46,021	195,820	34,330	21,314	193,464	21,780	144,621			941,442
10 Additional Liabilities/LOC											1,215,818	146,208	1,362,026
11 Capital Expenditures	331,168		286,200	408,421	110,420	11,238	407,402	110,181	99,762	196,603	99,477		2,060,872
Total Hospital Uses	5,273,843	5,830,125	5,806,151	5,280,040	4,811,692	4,813,989	5,815,733	4,889,763	4,157,087	5,078,580	6,350,764	4,994,895	63,102,662
Net Hospital Sources/Uses of Cash	(708,263)	(1,384,854)	(1,676,461)	(455,407)	(382,950)	(330,083)	(1,468,694)	(821,561)	(285,812)	90,388	(1,891,737)	(1,158,258)	(10,473,691)
Non-Hospital Sources													
12 Restricted Cash/Money Market	(809,886)	524,043			612,500	(200,000)		544,000	650,000		(2,850,000)		(1,529,343)
13 Restricted Capital Donations	357,448	8,688	286,283	409,088	116,736	5,800	407,402	110,181	99,762	129,887	43,311		1,974,586
14 Parcel Tax Revenue	207,015		1,500,000			512,117			1,500,000	155,961			3,875,093
15 Other Payments - South Lot/LOC/Fire Claim							(250,000)			196,603		140,431	87,034
16 Other:													-
17 IGT											7,169,044	385,310	7,554,354
18 IGT - AB915	20,681		384,837		40,615		1,049,088	25,181		381,379			1,901,781
19 PRIME	750,000					600,000					270,000		1,620,000
Sub-Total Non-Hospital Sources	525,258	532,731	2,171,120	409,088	769,851	917,917	1,206,490	679,362	2,249,762	863,830	4,632,355	525,741	15,483,505
Non-Hospital Uses of Cash													
20 Matching Fees					300,000			641,048	1,943,466	135,000	211,709		3,231,223
Sub-Total Non-Hospital Uses of Cash	-	-	-	-	300,000	-	-	641,048	1,943,466	135,000	211,709	-	3,231,223
Net Non-Hospital Sources/Uses of Cash	525,258	532,731	2,171,120	409,088	469,851	917,917	1,206,490	38,314	306,296	728,830	4,420,646	525,741	12,252,282
Net Sources/Uses	(183,005)	(852,123)	494,659	(46,319)	86,901	587,834	(262,204)	(783,247)	20,484	819,218	2,528,909	(632,517)	
Cash and Equivalents at beginning of period	<u>1,671,423</u>	1,488,418	636,295	1,130,954	1,084,636	1,171,537	1,759,371	1,497,167	713,920	734,404	1,553,622	4,082,531	
Cash and Equivalents at end of period	1,488,418	636,295	1,130,954	1,084,636	1,171,537	1,759,371	1,497,167	713,920	734,404	1,553,622	4,082,531	3,450,014	

Sonoma Valley Hospital
Cash Forecast
FY 2019

ATTACHMENT H

	Actual July - Dec	Actual Jan	Actual Feb	Actual Mar	Actual Apr	Actual May	Actual Jun	TOTAL
Hospital Operating Sources								
1 Patient Payments Collected	25,747,164	4,197,482	3,957,008	3,711,986	5,022,741	4,362,374	3,749,749	50,748,504
2 Capitation Revenue	571,073	62,561	28,474	23,610	24,319	24,930	24,084	759,051
3 Napa State	49,991		5,135	6,174	8,306	3,794	1,842	75,242
4 Other Operating Revenue	243,956	35,012	10,595	22,415	47,814	35,484	28,722	423,997
5 Other Non-Operating Revenue	257,106	51,984	66,482	104,954	59,194	32,445	32,240	604,405
6 Unrestricted Contributions	8,533		509	2,136	6,594	-	-	17,772
7 Line of Credit								-
Sub-Total Hospital Sources	26,877,823	4,347,039	4,068,202	3,871,275	5,168,968	4,459,027	3,836,637	52,628,971
Hospital Uses of Cash								
8 Operating Expenses	30,108,130	5,387,017	4,586,118	4,035,545	4,737,356	5,035,469	4,848,687	58,738,322
9 Add Capital Lease Payments	560,263	21,314	193,464	21,780	144,621	-	-	941,442
10 Additional Liabilities/LOC			-	-	-	1,215,818	146,208	1,362,026
11 Capital Expenditures	1,147,447	407,402	110,181	99,762	196,603	99,477	-	2,060,872
Total Hospital Uses	31,815,840	5,815,733	4,889,763	4,157,087	5,078,580	6,350,764	4,994,895	63,102,662
Net Hospital Sources/Uses of Cash	(4,938,017)	(1,468,694)	(821,561)	(285,812)	90,388	(1,891,737)	(1,158,258)	(10,473,691)
Non-Hospital Sources								
12 Restricted Cash/Money Market	126,657		544,000	650,000	-	(2,850,000)	-	(1,529,343)
13 Restricted Capital Donations	1,184,043	407,402	110,181	99,762	129,887	43,311	-	1,974,586
14 Parcel Tax Revenue	2,219,132		-	1,500,000	155,961	-	-	3,875,093
15 Other Payments - South Lot/LOC/Fire Claim		(250,000)	-	-	196,603	-	140,431	87,034
16 Other:			-	-	-	-	-	-
17 IGT			-	-	-	7,169,044	385,310	7,554,354
18 IGT - AB915	446,133	1,049,088	25,181	-	381,379	-	-	1,901,781
19 PRIME	1,350,000		-	-	-	270,000	-	1,620,000
Sub-Total Non-Hospital Sources	5,325,965	1,206,490	679,362	2,249,762	863,830	4,632,355	525,741	15,483,505
Non-Hospital Uses of Cash								
20 Matching Fees	300,000	-	641,048	1,943,466	135,000	211,709	-	3,231,223
Sub-Total Non-Hospital Uses of Cash	300,000	-	641,048	1,943,466	135,000	211,709	-	3,231,223
Net Non-Hospital Sources/Uses of Cash	5,025,965	1,206,490	38,314	306,296	728,830	4,420,646	525,741	12,252,282
Net Sources/Uses	87,948	(262,204)	(783,247)	20,484	819,218	2,528,909	(632,517)	
Cash and Equivalents at beginning of period	1,671,423	1,759,371	1,497,167	713,920	734,404	1,553,622	4,082,531	
Cash and Equivalents at end of period	1,759,371	1,497,167	713,920	734,404	1,553,622	4,082,531	3,450,014	