

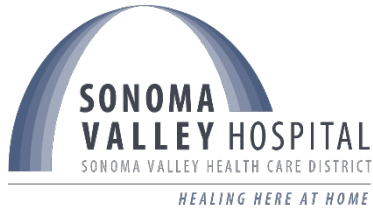
AGENDA ITEM

In compliance with the Americans with Disabilities Act, if you require special accommodations to attend a District meeting, please contact the Board Clerk, Whitney Reese, at wreese@sonomavalleyhospital.org or 707.935.5005 at least 48 hours prior to the meeting.

MISSION STATEMENT

The mission of the SVHCD is to maintain, improve, and restore the health of everyone in our community.

1. CALL TO ORDER/ANNOUNCEMENTS	<i>Case</i>	
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.</i>	<i>Case</i>	
3. CONSENT CALENDAR <ul style="list-style-type: none">Finance Committee Minutes 03.25.25	<i>Case</i>	Action <i>Pages 2 - 4</i>
4. COMMITTEE PHYSICIAN REPRESENTATION: DR. ALEXIS ALEXANDRIDIS	<i>Case</i>	Action <i>Pages 5</i>
5. SVH FOUNDATION UPATE	<i>Peterson</i>	Inform
6. REQUEST FOR EMERGENCY APPROVAL: AC-1 UNIT REPLACEMENT	<i>Armfield & Hennelly</i>	Action <i>Pages 6 - 18</i>
7. ICU UPGRADE PROJECT CHANGE ORDER SUBMISSION: RIDEVIEW BUILDERS	<i>Armfield & Hennelly</i>	Action <i>Pages 19 - 39</i>
8. FY BUDGET UPDATE	<i>Armfield</i>	Inform
9. FINANCIAL REPORTS FOR MONTH END MARCH 2025	<i>Armfield</i>	Inform <i>Pages 40 - 47</i>
10. ADJOURN	<i>Case</i>	
CLOSED SESSION: Calif. Government Code §37606 and 37624.3: TRADE SECRET; Discussion will concern proposed new service and/or program		



**SVHCD
FINANCE COMMITTEE MEETING
MINUTES**

TUESDAY, MARCH 25, 2025

**In Person at Sonoma Valley Hospital
347 Andrieux Street
and Via Zoom Teleconference**

Present		Not Present/Excused	Staff/Public
Ed Case, in person Dennis Bloch, in person Robert Crane, via zoom Subhash Mishra, MD, via zoom Graham Smith, via zoom		Catherine Donahue Carl Gerlach	Ben Armfield, SVH CFO, in person John Hennelly, SVH CEO, in person Lois Fruzynski, SVH Accounting Manager, in person Whitney Reese – SVH Board Clerk, in person Leslie Peterson, Sonoma Valley Hospital Foundation, in person
MISSION & VISION STATEMENT <i>The mission of SVHCD is to maintain, improve, and restore the health of everyone in our community.</i>			
AGENDA ITEM		DISCUSSION	ACTIONS
1. CALL TO ORDER/ANNOUNCEMENTS		<i>Ed Case</i>	Meeting called to order 5:01pm
Dr. Mishra will be retiring from the Finance Committee after 10 years on the committee. The committee thanks him for all his contributions over the years.			
2. PUBLIC COMMENT SECTION		None	
3. CONSENT CALENDAR		<i>Ed Case</i>	Action
Finance Committee Minutes 2.25.25			MOTION: Motion to approve by Crane, 2 nd by Bloch. All in favor.
4. DISTRICT HOSPITAL LEADERSHIP FORM (DHLF)		<i>Nathan Davis, SVP Finance, DHLF</i>	Inform
Nathan Davis provided an overview of DHLF's advocacy efforts on behalf of California's 33 district and municipal hospitals, with a focus on Medi-Cal supplemental payments. He detailed how DHLF has successfully secured and expanded funding programs such as the District Hospital Directed Payment Program (DHDP) and Quality Incentive Program (QIP), which collectively brought in \$881 million in 2025. He also addressed the challenges small hospitals face in meeting QIP metrics and efforts to adjust them to better reflect district hospital realities. Discussion covered the ongoing reliance on self-financed supplemental funding due to persistent state budget deficits, as well as looming federal threats to Medicaid funding and hospital support programs. The Committee expressed appreciation for DHLF's advocacy and underscored the importance of sustaining these critical financial resources.			
5. INVESTMENT POLICY (P-2022.02.16-1)		<i>Ed Case</i>	Action

Case presented the updated investment policy, focusing on future-oriented planning despite current limited reserves. Key points included adding yield and benchmark comparisons to fund reporting and debating the inclusion of target asset allocations in the long-term reserve portfolio. While some members questioned the appropriateness of equities and broader asset classes for an organization of this size, others emphasized the importance of flexibility and advisor accountability. Ultimately, the committee agreed to approve the policy with minor revisions and revisit it annually as financial conditions evolve.		MOTION: Motion to recommend to Board of Directors for approval by Bloch, 2 nd by Smith. All in favor.
6. CIP PROJECT	<i>Ben Armfield & John Hennelly</i>	Action
Hennelly presented a late-breaking capital investment proposal involving the replacement of outdated chemistry and hematology lab equipment. The current vendor's contract is expiring, and rates are set to increase if no action is taken. The proposed plan includes a \$300,000 investment—with \$100,000 in equipment and additional costs for infrastructure updates like power and data—to achieve significant cost savings. Financial analysis suggests a potential \$1 million savings over five years, primarily from reduced reagent costs, with a payback period of under 18 months. However, questions were raised about the high design fee relative to construction costs, lack of project detail, possible service disruption during installation, and the urgency of the timeline. The committee agreed more clarity is needed but that they would bypass their approval so that the Board could have the opportunity to approve at their next meeting, assuming all their questions were addressed.		MOTION: The committee agreed to bypass their recommendation to the Board.
7. SVH CAPITAL PROJECT TRACKER	<i>Ben Armfield & John Hennelly</i>	Inform
A discussion focused on the delayed MRI/ODC project. Originally estimated at \$35 million, the project was later revised down to \$21 million and then up to \$24 million, but is now facing funding shortfalls and escalating costs. Delays due to rain and vendor timing constraints exacerbated the budget issues, and no clear plan currently exists for moving the MRI from its temporary trailer to a permanent facility. Points were raised about accountability and need for detailed planning, especially given the substantial foundation and community investment. The Committee emphasized the urgent need for a comprehensive review of the project's current status, costs, and next steps to restore trust and ensure successful completion.		
8. FY26 BUDGET ASSUMPTIONS	<i>Ben Armfield</i>	Inform
Armfield shared that they've entered the budget planning phase and outlined some preliminary assumptions for the next fiscal year. A kickoff meeting is scheduled for the following day, with more detailed work expected over the next 2–4 weeks. He noted uncertainties and potential headwinds, particularly around IGT levels for FY26, which may require adjustments. Despite the challenges, strategic growth in key areas remains a focus. Case and Smith responded positively, viewing the memo as a solid starting point and appropriate context for the future detailed budget, with no immediate red flags noted.		
9. FINANCIAL CLASS CONTRIBUTION MARGIN ANALYSIS	<i>Ben Armfield</i>	Inform
The Committee reviewed net revenue data—excluding contribution margins for now—with plans to delve deeper in future sessions, including payer contracts next month. They emphasized that commercial payers contribute the most revenue, with specific mention of Kaiser and Blue Cross, and clarified that the figures include IGT, which affects Medicaid revenue positively. The conversation highlighted the complexity of payer performance, noting factors like contract structure and outpatient versus inpatient service mix. This evolving		

analysis aims to inform budget planning for 2026.		
10. FINANCIAL REPORTS FOR MONTH END FEBRUARY 2025	<i>Ben Armfield</i>	Inform
February saw a slight revenue dip—partly due to it being a shorter month—overall year-to-date metrics remain strong. March volumes are exceeding budget, indicating continued positive trends. There was also good news: Kaiser is now participating in the rate range IGT program, which will result in a net benefit of over \$1 million for the next fiscal year. Reporting is being refined, with a proposal to eliminate some schedules (attachments F, G, and H), and feedback is welcome.		
11. ADJOURN	<i>Ed Case</i>	Meeting adjourned at 6:28 pm

APRIL 7, 2025

TO SVHCD BOARD OF DIRECTORS:

I am writing today to introduce myself and formally notify you of my interest in joining the SVHCD Finance Committee. I am a board-certified general surgeon, and currently the only full-time general surgeon working in Sonoma. I started working in here in October 2017, initially in solo private-practice, and later joined the 1206(b) clinic in June 2024. As Medical Director, I supervise the Wound Care service line at SVH and I am currently the Vice-Chair of the SVH Surgery Department. I assisted the hospital's transition to Epic EMR as the Physician Champion. I currently sit on the SVH Foundation's Finance Committee and spent a term on that board. I completed my MBA through Auburn University's Physician Executive MBA program in 2018. I was a member of the Meritage Medical Network's Board of Directors prior to the sale of that organization in 2021. Prior to moving to California, I practiced general surgery in Southern Oregon; was treasurer of an ambulatory surgery center there; and sat on the Quality Committee of AllCareHealth, an ACO/IPA in Southern Oregon.

I would like to join the Finance Committee because physician involvement in hospital leadership and management is crucial to its well-being. As a small district hospital, we face unique challenges that promise to only become more critical and immediate in the current climate.

Thank you for your consideration.

Alexis R. Alexandridis MD MBA FACS

General Surgery | Sonoma Valley Speciality Clinic
347 Andrieux Street, Suite 28 | Sonoma, California 95476
O. 707.938.7690 | F. 844.581.1700 | www.DrAlexisSurgery.com



To: SVHCD Finance Committee
From: Ben Armfield, Chief Financial Officer | John Hennelly, Chief Executive Officer
Date: April 22, 2025
Subject: Emergency Capital Request | AC-1 Condenser Unit Replacement

THE ASK

We are requesting emergency capital approval to replace a failing air conditioning condenser unit, which is a critical component of the HVAC system serving our Emergency Department and Operating Room.

Specifically, we are asking the Board to:

- **Authorize management to proceed with the proposed Carrier quote**, allowing us to initiate equipment procurement immediately and minimize current lead time delays.
- **Approve a not-to-exceed total project cost of \$200,000**, which includes all equipment & installation costs, as well as our best estimates of all other applicable costs necessary to complete the replacement.

This authorization will allow us to move forward without delay and mitigate the substantial operational risk posed by continued system failure.

BACKGROUND

Air Conditioning Unit 1, or “**AC-1**,” is the hospital’s primary rooftop condensing unit that supplies chilled air to the Emergency Department and Operating Room — two of the most clinically sensitive and operationally essential areas of the hospital. AC-1 functions in tandem with the hospital’s air handling systems to regulate temperature, humidity, and air pressure. This environmental control is not only essential for patient safety and satisfaction, but also a regulatory requirement for infection prevention and overall code compliance.

To meet required redundancy standards, the AC-1 system was originally designed with two independent condenser units. Both units are now beyond their expected service life.

In recent weeks, one of the two condensers failed again, prompting an emergency call to Carrier for temporary stabilization. While repairs were successful in the short term, these fixes are no longer reliable or sustainable. The system remains vulnerable to full failure at any time. If this were to occur, it would likely necessitate the full shutdown of our operating rooms and could seriously impact Emergency Department operations, resulting in diversions, postponed procedures, and regulatory exposure.

PROPOSED SCOPE

The attached Carrier proposal outlines a multi-phase plan to replace the AC-1 condenser system and address the immediate compressor failure. The proposal includes all necessary equipment, crane mobilization, installation labor, and mechanical work to restore near-term functionality and long-term system stability.

Specifically, the quote covers:

- **Phase 1 – Installation of Condenser 1 | Cost: \$87,500**
 - Procurement of two (2) new air-cooled condensers
 - Crane lift and rooftop placement of both units

- Installation of Condenser 1, including electrical disconnects, fusing, piping modifications, refrigerant charging, and startup/testing
- **Compressor Replacement for the Existing Unit | Cost: \$19,850**
 - Removal and replacement of the failed compressor
 - Refrigerant recovery and recharge
 - New drier, contactor, and system startup
 - Do not need additional crane since compressor replacement will be done in conjunction with Phase I and existing crane will already be on-site
- **Phase 2 – Installation of Condenser 2 (Deferred) | Cost: \$37,500**
 - Mirror scope to Phase 1, installation to occur at a later date as operational need arises

RECOMMENDATION

Our recommendation is to proceed with Phase 1 and the Compressor Replacement only at this time. This approach allows us to immediately stabilize a critical system while also controlling upfront costs. We will defer Phase 2 (installation of the second condenser) until operational need dictates, but recommend procuring both units now to avoid future delays and added expense.

JUSTIFICATION FOR REPLACEMENT OF BOTH CONDENSERS

While we are only moving forward with installing one unit at this time, replacing just one condenser without procuring the second would be short-sighted. Both existing condensers are at end of life, and delaying replacement of the second would result in duplicative costs down the line — including a second crane mobilization, duplicative roof work and curb penetrations, potential street closures and more operational disruption. Procuring both units now ensures we're prepared and avoids inflating total project costs later.

ADDITIONAL COST CONSIDERATIONS

While the attached Carrier quote covers the majority of mechanical installation work, we want to ensure the Board is aware of additional costs that may be incurred to complete the project. These include structural and electrical engineering services, roof curb fabrication and penetrations, permitting fees, potential refrigerant costs, and any traffic control or safety logistics related to crane staging. In addition to these fees, if this project requires HCAI submission, we may also incur costs for engagement of an Inspector of Record (IOR) and Architect of Record (AOR) to ensure regulatory compliance and inspection sign-off.

ESTIMATED PROJECT BUDGET

The project budget reflects a hard bid received from Carrier for the primary equipment and installation work, totaling \$107,350. All other associated costs—including roof work, structural and electrical engineering, permitting, refrigerant, crane logistics, and regulatory compliance support—are currently estimates. These figures represent our best assessment based on recent similar projects and input from our Facilities team. We are actively engaging with vendors and contractors to obtain detailed quotes and develop not-to-exceed (NTE) amounts for each of these additional components. Until those are finalized, we are recommending a total NTE project budget of \$200,000 to ensure adequate funding coverage.

AC-1 REPLACEMENT PROJECT BUDGET

Equipment / Installation Costs				
Item	Bid Cost	Description		
Phase 1 Work	\$ 87,500	Procurement of two new Condensers and installation of Condenser 1.		
Compressor Replacement	19,850	Compressor replacement for existing unit. Do not need add'l crane.		
Total Equipment / Installation Costs	\$ 107,350			
Other Associated Project Costs (currently being finalized)			Cost Estimate Ranges	
Item	Current Estimate	Estimate - Low	Estimate - High	
Electrical/Structural Engineering	\$ 15,000	\$ 10,000	\$ 20,000	
Roof Work / Penetrations	10,000	5,000	15,000	
Permitting (City or HCAI)	10,000	5,000	15,000	
Street Closure / Crane Staging	3,000	1,000	5,000	
IOR / AOR (if needed)	42,500	25,000	60,000	
Refrigerant (if needed)	1,850	1,000	2,700	
Contingency	10,300	10,000	15,000	
Other Associated Project Costs *	\$ 92,650	\$ 57,000	\$ 132,700	
Current Project Cost Estimate	\$ 200,000	\$ 164,350	\$ 240,050	
* Other associated project costs are estimates at this point in time. We are working on procuring bids specific to the additional work that will be required, and while not fully defined, we estimate additional projects to range from ~\$60K - \$130K.				

PROJECT MANAGEMENT:

This project will be managed internally by the SVH Facilities team

CLOSING SUMMARY AND RECOMMENDATION:

Given the critical role of the AC-1 system in maintaining safe and compliant operations in the Emergency Department and Operating Room, and the recent failure requiring emergency stabilization, we are requesting emergency capital approval to proceed with the Carrier proposal and other associated costs with the project, contingent upon total costs not exceeding **\$200,000**.

By ordering both condenser units now and installing one immediately, we significantly reduce our risk of complete system failure, minimize duplicative future costs, and maintain continuity of care in our most critical clinical spaces.

Total Requested Emergency Capital Approval

Carrier Equipment and Installation | \$107,350

Other Associated Project Costs | Not-to-exceed \$92,650

ATTACHMENTS:

- Scope of Work Proposal Bid | Carrier Commercial Service

Carrier Commercial Service

Sonoma Valley Hospital Condenser Replacement & Installation

Prepared For: Sonoma Valley Hospital

For Service At:
Sonoma Valley Hospital
347 Andrieux St. Sonoma, CA. 95476-6811



Prepared by

Michael W. Cortez

Service Sale Representative
(916) 616-4669
michael.cortez@carrier.com

Date: April 14th, 2025

To: Kyle Magnani

Subject: Sonoma Valley Hospital Condenser
Replacement & Installation

Quotation #: 01581548

Description: Provide two (2) Standard Vertical Discharge Air Cooled Condensers 460/3/60. Set on roof and
Installation of Condenser 1. Condenser 2 installation based on approval

Vendor ID: Carrier Commercial Service – Sacramento

1170 W. National Dr. Suite. 50 Sacramento, CA 95834

P: 916.928.9500 E: Sacramento.CCSVC@carrier.om

Ca Bus. Lic. **499642** (C-20 HVAC, C-38 Refrigeration, C-36 Plumbing, C-4 Boiler)

DIR: **1000017325**

Sourcwell: **070121-CAR**

Carrier is a Union company and adheres to all prevailing wage standards

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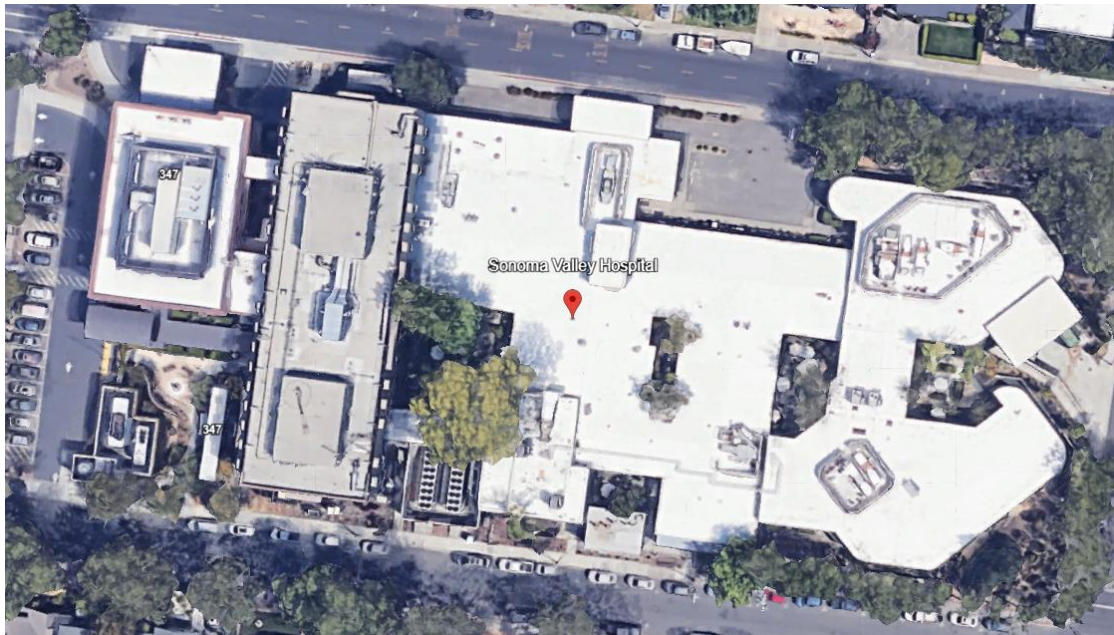


24/7 SUPPORT & SERVICE

1-916-928-9500

WWW.CARRIER.COM/COMMERCIAL

Site Map: Provided by Google Earth



Site Map: Crane location/ Schedule

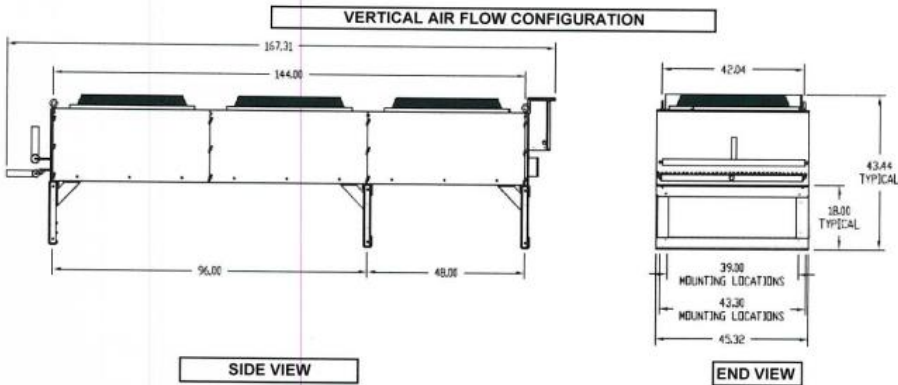
Vendor: AAA Crane

- Crane to be operating on location 4 hours
- Delivery of units, two (2) condensers
- Lift & set two (2) units on roof
- Condenser locations have not been Defined. To be determined by POC
- Proposal does not include street closures
- Proposal does not include permits
- Time of lift: To be determined by POC
- Building evacuation: To be determined by POC



Equipment Selection:

LINE NO.	PRODUCT AND DESCRIPTION	QUANTITY ORDERED
	STANDARD VERTICAL DISCHARGE 460/3/60 10 FINS PER INCH 1 X 3 FAN CONFIGURATION SINGLE CIRCUIT THROUGH THE DOOR NON FUSED DISCONNECT INDIVIDUAL MOTOR CONTACTORS INDIVIDUAL MOTOR FUSING NO FAN CYCLING OR HEAD PRESSURE INCLUDED NO PROTECTIVE COIL COATING INCLUDED CURRENT LEAD TIME IS 5-6 WEEKS TO BUILD 7-10 DAYS IN TRANSIT	
1	RUS RDS027GB3A AIR COOLED CONDENSOR	2
	NON-STOCK / SPECIAL ORDER ITEM	



PERFORMANCE DATA - THR / MBH @ 1 DEG TD				
Refrig Type	Fins Per Inch			
	8	10	12	14
R-404A	24.4	26.8	28.3	29.7
R-407A ^	24.7	27.1	28.6	30.0
R-448A ^	24.7	27.1	28.6	30.0
R-449A ^	24.7	27.1	28.6	30.0
R-407C ^	24.2	26.6	28.0	29.4

PHYSICAL DATA										
Qty Fans	Fan Diam	Motor HP	Motor RPM	CFM	Refrig Conn (ODS) *		Sound Level (dBA) +	Refrig Chg (Summer)	Refrig Chg (Winter)	Net Weight
					Inlet	Outlet				
3	30"	1-1/2	1,140	29,400	1-5/8"	1-3/8"	74.6	26.5 Lb's	97.9 Lb's	1,150 Lb's

ELECTRICAL DATA (60 Hertz)						
Design Voltage	Volts	Phase	KW	FLA	MCA	MOPD
<input type="checkbox"/>	208/230	3	5.4	19.5	21.1	25
<input type="checkbox"/>	460	3	5.4	9.9	15	15

Notes	^ Capacities listed are based upon the Mean Condensing Temperature (average of dew and bubble points at cond inlet)
	* Refrigerant connection sizes and quantities are subject to change based upon actual design operating conditions
	+ Sound pressure value as measured in horizontal plane 10' away from unit
	# Based on R-407A, R-407C, R-448A, R-449A @ +95 / -20 ambient temp / 15 TD. Multiply values by 0.92 for R-404A

Scope of Work: Phase 1, Condenser delivery, lift, & condenser 1 Installation

- Arrive on site and check in with site contact
- Meet with crane operators and prep area for lift
- Provide two (2) new condensers
- Lift and set in place two (2) new condenser. Location of condensers provided by site POC
- Mount unit to roof, per factory recommendations
- Provide power to location of condenser
- Provide and install one (1) new disconnect, electrical whip, needed fuses and tie into condenser
- Provide new piping as needed.
- Trim charge
- Startup unit and verify operations
- Check out with customer and report any findings

Scope of Work: Phase 2, Condenser 2 Installation

- Arrive on site and check in with site contact
- Provide power to location of condenser
- Provide and install one (1) new disconnect, electrical whip, needed fuses and tie into condenser
- Provide new piping as needed.
- Trim charge
- Startup unit and verify operations

Excludes:

- Permits, Engineered Drawings, & Structural Drawing
- Controls integration

Clarification

- Lead time: 5-6 weeks to build units
- Lead time: 7-10 Days Standard Shipping
- Customer to provide all roof work.
- Customer to provide penetration and roof curb
- Customer to provide all structural and electrical engineering
- Customer to bring power to roof

Warranty Information:

- Carrier Factory Standard Warranty per Terms and Conditions
- One Year Manufacturers Warranty on Parts

Compressor Replacement - Scope of Work

- Arrive on site and check in with site contact
- Perform lock out tag out
- Recover refrigerant and store on site for reuse
- Disconnect failed compressor from wiring and mounting
- Perform lift and remove failed compressor
- Provide and install one (1) new factory compressor
- Reconnect wiring and mounting
- Provide and install new contactor for compressor circuit
- Provide and install new drier for circuit
- Pressurize system and leak check
- Evacuate
- Charge system with recovered refrigerant
- Perform startup and verify operations
- Checkout with customer and report any findings

Compressor Clarifications

- Proposal does not include refrigerant. Needed refrigerant will be billable
- Lead time: Compressor 7-10 days shipping
- Added Crane charge: Compressor only lift Total \$2,210 _____ Initial for approval

Total Price for Scope of Work Phase 1	\$87,500.00 _____ <i>(Initial for approval)</i>
Total Price for Scope of Work Phase 2	\$37,500.00 _____ <i>(Initial for approval)</i>
Total Price Compressor Replacement	\$19,850.00 _____ <i>(Initial for approval)</i>
Add for Crane (Compressor Only)	\$2,210.00 _____ <i>(Initial for approval)</i>
Total Price Scope of Work Phase 1 & 2	\$147,060.00 _____ <i>(Initial for approval)</i>

This proposal is valid for 30 days from the date of proposal. Carrier's terms and conditions will govern in lieu of any other terms and conditions contained in any resulting Purchase, Order, Contract, Agreement, etc. Carrier would like to thank you for the continuing opportunity to be of service.

Sincerely,

Michael W. Cortez
Carrier Commercial Service

_____		_____
		Title
_____		_____
Customer Acceptance (Signature)	Date	Purchase Order

Carrier Corporation is a Union Company and adheres to prevailing wage standards

CARRIER CORPORATION
TERMS AND CONDITIONS OF SALE – EQUIPMENT AND/OR SERVICE

1. PAYMENT AND TAXES - Payment shall be made net 30 days from date of invoice. Carrier reserves the right to require cash payment or other alternative method of payment prior to shipment or completion of work if Carrier determines, in its sole discretion, that Customer or Customer's assignee's financial condition at any time does not justify continuance of the net 30 days payment term. In addition to the price, Customer shall pay Carrier any taxes or government charges arising from this Agreement. If Customer claims that any such taxes or government charges do not apply to the transactions governed by this Agreement, Customer shall provide Carrier with acceptable tax exemption certificates or other applicable documents. All past due invoices will accrue interest at the lesser of 1% per month or the maximum amount allowable by law.

2. EXTRAS - Equipment, parts or labor in addition to those specified in this Agreement will be provided upon receipt of Customer's written authorization, paid for as an extra at Carrier's prevailing labor rates and equipment/parts charges, and subject to the terms of this Agreement.

3. RETURNS - No items will be accepted for return without prior written authorization. Returned goods may be subject to a restocking charge. Special order and non-stock items cannot be returned.

4. SHIPMENT - All shipments shall be F.O.B. shipping point, freight prepaid and allowed to the job site. Shipment dates quoted are approximate. Carrier does not guarantee a particular date for shipment or delivery.

5. PARTIAL SHIPMENT - Carrier shall have the right to ship any portion of the equipment, goods or other materials included in this Agreement and invoice Customer for such partial shipment.

6. DELAYS - Carrier shall not be liable for delays in manufacturing, shipping or delivery by causes beyond the control and without the fault or negligence of Carrier, including but not restricted to acts of God, acts of a public enemy, acts of government, acts of terrorism, fires, floods, epidemics, quarantine restrictions, freight embargoes, supplier delays, strikes, or labor difficulties (collectively "Force Majeure Events"). Carrier agrees to notify Customer in writing as soon as practicable of the causes of such delay. In the event that any materials or equipment to be provided by Carrier under this Agreement become permanently unavailable as a result of a Force Majeure Event, Carrier shall be excused from furnishing such materials or equipment.

7. WARRANTY - Carrier warrants that all equipment manufactured by Carrier Corporation and all Carrier equipment, parts or components supplied hereunder will be free from defects in material and workmanship. Carrier shall at its option repair or replace, F.O.B. point of sale, any equipment, part or component sold by Carrier and determined to be defective within one (1) year from the date of initial operation or eighteen (18) months from date of shipment, whichever is earlier. Carrier does not warrant products not manufactured by Carrier Corporation, but it does pass on to Customer any transferrable manufacturer warranties for those products. Carrier warrants that all service provided by Carrier hereunder shall be performed in a workmanlike manner. In the event any such service is determined to be defective within ninety (90) days of completion of that service, Carrier shall at its option re-perform or issue a credit for such service. Carrier's obligation to repair or replace any defective equipment, parts or components during the warranty period shall be Customer's exclusive remedy. Carrier shall not be responsible for labor charges for removal or reinstallation of defective equipment, parts or components, for charges for transportation, handling and shipping or

refrigerant loss, or for repairs or replacement of such equipment, parts or components, required as a consequence of faulty installation, misapplication, vandalism, abuse, exposure to chemicals, improper servicing, unauthorized alteration or improper operation by persons other than Carrier. THIS WARRANTY IS GIVEN IN LIEU OF ALL OTHER WARRANTIES, EXPRESS, IMPLIED OR STATUTORY INCLUDING THE IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE.

8. WORKING HOURS - All services performed under this Agreement, including but not limited to, major repairs, are to be provided during Carrier's normal working hours unless otherwise agreed.

9. CUSTOMER RESPONSIBILITIES (Service Contracts only) - Customer shall:

- Provide safe and reasonable equipment access and a safe work environment.
- Permit access to Customer's site, and use of building services including but not limited to: water, elevators, receiving dock facilities, electrical service and local telephone service.
- Keep areas adjacent to equipment free of extraneous material, move any stock, fixtures, walls or partitions that may be necessary to perform the specified service.
- Promptly notify Carrier of any unusual operating conditions.
- Upon agreement of a timely mutual schedule, allow Carrier to stop and start equipment necessary to perform service.
- Provide adequate water treatment.
- Provide the daily routine equipment operation (if not part of this Agreement) including availability of routine equipment log readings.
- Where Carrier's remote monitoring service is provided, provide and maintain a telephone line with long distance direct dial and answer capability.
- Operate the equipment properly and in accordance with instructions.
- Promptly address any issues that arise related to mold, fungi, mildew or bacteria.
- Identify and label any asbestos containing material that may be present. The customer will provide, in writing, prior to the start of a job, a signed statement regarding the absence or presence of asbestos for any job where the building or the equipment to be serviced is older than 1981. Should this document state that no asbestos is present, the customer will also provide in writing the method used to determine the absence of asbestos.

10. EXCLUSIONS - Carrier is not responsible for items not normally subject to mechanical maintenance including but not limited to: duct work, casings, cabinets, fixtures, structural supports, grillage, water piping, steam piping, drain piping, cooling tower fill, boiler tubes, boiler refractory, disconnect switches and circuit breakers. Carrier is not responsible for repairs, replacements, alterations, additions, adjustments, repairs by others, unscheduled calls or emergency calls, any of which may be necessitated by negligent operation, abuse, misuse, prior improper maintenance, vandalism, obsolescence, building system design, damage due to freezing weather, chemical/electrochemical attack, corrosion, erosion, deterioration due to unusual wear and tear, any damage related to the presence of mold, fungi, mildew, or bacteria, damage caused by power reductions or

failures or any other cause beyond Carrier's control. Carrier shall not be required to perform tests, install any items of equipment or make modifications that may be recommended or directed by insurance companies, government, state, municipal or other authority. However, in the event any such recommendations occur, Carrier, at its option, may submit a proposal for Customer's consideration in addition to this Agreement. Carrier shall not be required to repair or replace equipment that has not been properly maintained.

11. EQUIPMENT CONDITION & RECOMMENDED SERVICE (Service Contracts only) - Upon the initial scheduled operating and/or initial annual stop inspection, should Carrier determine the need for repairs or replacement, Carrier will provide Customer in writing an 'equipment condition' report including recommendations for corrections and the price for repairs in addition to this Agreement. In the event Carrier recommends certain services (that are not included herein or upon initial inspection) and if Customer does not elect to have such services properly performed in a timely fashion, Carrier shall not be responsible for any equipment or control failures, operability or any long-term damage that may result. Carrier at its option will either continue to maintain equipment and/or controls to the best of its ability, without any responsibility, or remove such equipment from this Agreement, adjusting the price accordingly.

12. PROPRIETARY RIGHTS (Service Contracts only) - During the term of this Agreement and in combination with certain services, Carrier may elect to install, attach to Customer equipment, or provide portable devices (hardware and/or software) that shall remain the personal proprietary property of Carrier. No devices installed, attached to real property or portable device(s) shall become a fixture of the Customer locations. Customer shall not acquire any interest, title or equity in any hardware, software, processes, and other intellectual or proprietary rights to devices that are used in connection with providing service on Customer equipment.

13. DATA RIGHTS (Service Contracts only) - Customer hereby grants and agrees to grant to Carrier a worldwide, non-exclusive, non-terminable, irrevocable, perpetual, paid-up, royalty free license to any Source Data, with the right to sub-license to its affiliates and suppliers for (i) Carrier's performance of services pursuant to this Agreement, (ii) the improvement of Carrier services, and Carrier's Analytics Platform; (iii) improving product performance, operation, reliability, and maintainability; (iv) to create, compile, and/or use datasets and/or statistics for the purposes of benchmarking, development of best practices, product improvement; (v) the provision of services to third parties, (vi) research, statistical, and marketing purposes, and/or (vii) in support of Carrier agreements.

Source Data – shall mean data that is produced directly from a system, or device and received at a collection point or a central server (e.g. a Carrier database, data lake, or third party cloud service).

Analytics Platform – shall mean server algorithms or web interface systems used to (i) interpret, convert, manipulate, or calculate data, (ii) perform data processing, and/or (iii) the delivery of data to Carrier, affiliates or suppliers of Carrier, and/or Customer.

14. RETURN OF DATA (Service Contracts only) - Customer understands and acknowledges that the portable devices will collect Source Data that will be stored on and/or transmitted to Carrier's servers and to suppliers or affiliates that are contracted by Carrier and used to transmit, process, extract or store such Source Data for purposes of Carrier's performance of the service in accordance with this Agreement. Once such data and information has been stored and/or transmitted to Carrier's servers, Customer agrees that such data and information shall become part of Carrier's database and therefore subject to the license terms under section 13.

15. DATA DELIVERY - During the term of the Agreement Customer shall (i) make reasonable efforts to ensure that the hardware remains powered on, (ii) avoid intentional action to impede, block or throttle collection and transmission of Source Data by Carrier, and (iii) avoid intentional action to disable, turn off, or remove the hardware without Carrier's express written consent, which consent shall not be unreasonably withheld.

16. REVERSE ENGINEERING - Customer shall not extract, decompile or reverse engineer any software included with, incorporated in, or otherwise associated with the hardware and shall not reverse engineer any reports or analytics provided to or received by Customer from Carrier.

17. WAIVER OF DAMAGES - Under no circumstances shall Carrier be liable for any incidental, special or consequential damages, including loss of revenue, loss of use of equipment or facilities, or economic damages based on strict liability or negligence.

18. LIMITATION OF LIABILITY - Carrier's maximum liability for any reason (except for personal injuries) arising from this Agreement shall not exceed the value of the payments received by Carrier under this Agreement.

19. CANCELLATION - Customer may cancel this Agreement only with Carrier's prior written consent, and upon payment of reasonable cancellation charges. Such charges shall take into account costs and expenses incurred, and purchases or contract commitments made by Carrier and all other losses due to the cancellation including a reasonable profit.

20. CUSTOMER TERMINATION FOR CARRIER NON-PERFORMANCE - Customer shall have the right to terminate this Agreement for Carrier's non-performance provided Carrier fails to cure such non-performance within thirty (30) days after having been given prior written notice of the non-performance. Upon early termination or expiration of this Agreement, Carrier shall have free access to enter Customer locations to disconnect and remove any Carrier personal proprietary property or devices as well as remove any and all Carrier-owned parts, tools and personal property. Additionally, Customer agrees to pay Carrier for all incurred but unamortized service costs performed by Carrier including overheads and a reasonable profit.

21. CARRIER TERMINATION - Carrier reserves the right to discontinue its service any time payments have not been made as agreed or if alterations, additions or repairs are made to equipment during the term of this Agreement by others without prior agreement between Customer and Carrier.

22. CLAIMS - Any lawsuits arising from the performance or nonperformance of this Agreement, whether based upon contract, negligence, strict liability or otherwise, shall be brought within one (1) year from the date the claim arose.

23. GOVERNMENT PROCUREMENTS - The components, equipment and services provided by Carrier are "commercial items" as defined in Section 2.101 of the Federal Acquisition Regulations ("FAR"), and the prices of such components, equipment and services are based on Carrier's commercial pricing policies and practices (which do not consider any special requirements of U.S. Government cost principles, FAR Part 31, or any similar procurement regulations). As such, Carrier will not agree to provide or certify cost or pricing data, nor will Carrier agree to comply with the Cost Accounting Standards (CAS). In addition, no government procurement regulations, such as

FARs or DFARs, shall apply to this Agreement except those regulations expressly accepted in writing by Carrier.

24. HAZARDOUS MATERIALS - Carrier is not responsible for the identification, detection, abatement, encapsulating or removal of asbestos, products or materials containing asbestos, similar hazardous substances, or mold, fungi, mildew, or bacteria. If Carrier encounters any asbestos or other hazardous material while performing this Agreement, Carrier may suspend its work and remove its employees from the project, until such material and any hazards associated with it are abated. The time for Carrier's performance shall be extended accordingly, and Carrier shall be compensated for the delay.

25. WASTE DISPOSAL - Customer is wholly responsible for the removal and proper disposal of waste oil, refrigerant and any other material generated during the term of this Agreement.

26. SUPERSEDEURE, ASSIGNMENT and MODIFICATION - This Agreement contains the complete and exclusive statement of the agreement between the parties and supersedes all previous or contemporaneous, oral or written, statements. Customer may assign this Agreement only with Carrier's prior written consent. No modification to this Agreement shall be binding unless in writing and signed by both parties. Orders shall be binding upon Carrier when accepted in writing by an authorized representative of Carrier. CARRIER'S ACCEPTANCE OF CUSTOMER'S ORDER IS CONDITIONED UPON CUSTOMER'S ACCEPTANCE OF THE TERMS AND CONDITIONS SET FORTH HEREIN (THIS "AGREEMENT") AND CUSTOMER'S AGREEMENT TO BE BOUND BY AND COMPLY WITH THIS AGREEMENT. THIS AGREEMENT AND ALL REFERENCED ATTACHMENTS CONSTITUTE THE ENTIRE AGREEMENT BETWEEN CARRIER AND CUSTOMER, AND NO AMENDMENT OR MODIFICATION SHALL BE BINDING ON CARRIER UNLESS SIGNED BY AN OFFICER OR AUTHORIZED EMPLOYEE OF CARRIER. THE FAILURE OF CARRIER TO OBJECT TO PROVISIONS CONTAINED IN ANY PURCHASE ORDER OR OTHER DOCUMENT OF CUSTOMER SHALL NOT BE CONSTRUED AS A WAIVER BY CARRIER OF THE TERMS IN THIS AGREEMENT OR AN ACCEPTANCE OF ANY OF CUSTOMER'S PROVISIONS. ANY CONFLICTING OR ADDITIONAL TERMS OR CONDITIONS SET FORTH BY CUSTOMER IN A PURCHASE ORDER OR OTHER DOCUMENT SHALL NOT BE BINDING UPON CARRIER, AND CARRIER HEREBY EXPRESSLY OBJECTS THERETO.

27. CUSTOMER CONSENT - Customer consents and agrees that Carrier may, from time to time, publicize Carrier related projects with

Customer, including the value of such projects, in all forms and media for advertising, trade, and any other lawful purposes.

28. FOR WORK BEING PERFORMED IN CALIFORNIA - Contractors are required by law to be licensed and regulated by the Contractors' State License Board which has jurisdiction to investigate complaints against contractors if a complaint regarding a patent act or omission is filed within four years of the date of the alleged violation. A complaint regarding a latent act or omission pertaining to structural defects must be filed within 10 years of the date of the alleged violation. Any questions concerning a contractor may be referred to the Registrar, Contractors' State License Board, P.O. Box 26000, Sacramento, California 95826.

29. INTELLECTUAL PROPERTY - Notwithstanding anything to the contrary stated herein, Carrier retains ownership of its intellectual property and no license to Carrier's intellectual property is granted except as necessary for Customer to use any deliverables and/or services provided hereunder.

30. DATA PRIVACY - Carrier processes personal data in accordance with its privacy notice at Carrier.com. Each party will comply with applicable data privacy laws governing personal information collected and processed under this Agreement, including the California Consumer Privacy Act and the European General Data Protection Regulation, and take all reasonable commercial and legal steps to protect personal data. If Customer provides Carrier with personal data, Customer will ensure that it has the legal right to do so, including notifying the individuals whose personal data it provides to Carrier. If a party collects or processes personal data from California residents under this Agreement, such party is a "Service Provider" under the CCPA, and will not sell or exchange such personal data for anything of value.

31. FACTORY ACCEPTANCE TESTS AND INSPECTIONS - The nature and extent of factory acceptance tests or factory inspections, including without limitation, the number and identity of participants, locations visited, and activities undertaken, shall be limited to activities directly related to the performance of this Agreement. The tests or inspections will be subject to mutual agreement of the parties, Carrier policy and internal pre-approval requirements, and strictly comply with Customer's policies as well as all applicable laws and regulations including, without limitation, all applicable laws and regulations prohibiting corruption.



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1-916-928-9500

WWW.CARRIER.COM/COMMERCIAL



To: SVHCD Finance Committee
From: Ben Armfield, Chief Financial Officer | John Hennelly, Chief Executive Officer
Date: April 22, 2025
Subject: ICU Upgrade Project Change Order Submission | Change Order #4 – Ridgeview Builders

THE ASK

We are requesting Board approval to move forward with processing a change order to Ridgeview Builders in the amount of \$28,200.55. Ridgeview Builders is the general contractor for the ICU Upgrade project and this change order covers two critical scope adjustments: relocation of casework, plumbing, and electrical components to meet ADA sink clearance standards, and the repair of compromised partition studs uncovered during the demolition process.

The original contract with Ridgeview Builders was \$302,000, which sets the 5% change order authority threshold at \$15,100. Because the total value of change orders exceeds 5% of the original construction contract, we are seeking Board approval in accordance with district policy.

BACKGROUND OF PROJECT

The ICU Upgrade Project is a strategic capital initiative focused on refreshing and modernizing the existing Intensive Care Unit to meet updated regulatory and clinical standards. The project was approved with a total budget of \$630,000, of which \$601,000 was secured through philanthropic support from the Sonoma Valley Hospital Foundation. The project includes infrastructure updates, accessibility improvements, and necessary upgrades to casework, mechanicals, and finishes to extend the functional life of the ICU.

The original construction contract with Ridgeview Builders totaled \$302,000. The project also has an overall contingency reserve of \$67,310. As is typical with projects involving existing hospital infrastructure, several unforeseen conditions have emerged, requiring scope changes.

JUSTIFICATION FOR BOARD APPROVAL

As construction has progressed, several previously unforeseen site conditions have required mid-project adjustments. These included ADA compliance updates, structural issues, and coordination gaps identified during field implementation. While there are adequate funds in the project's contingency reserve to fund these changes, this change order exceeds the 5% threshold of the base construction contract, triggering the requirement for board-level review and approval.

Ridgeview Builders Change Order #4, in the amount of **\$28,200.55**, includes two significant scope adjustments:

- **ADA Sink Clearance Modifications | Cost \$19,761**

During installation planning, it became evident that the casework, sink plumbing, and electrical outlet needed to be shifted approximately two feet to provide the proper knee clearance required under ADA accessibility regulations. This issue was not anticipated in the original design documents and must be corrected to ensure full regulatory compliance.

- **Structural Framing Repair | Cost \$8,439**

Upon wall demolition, the contractor discovered that some of the existing partition studs were compromised—either damaged or insufficient for proper support of the planned finishes and equipment. To ensure safety and durability, these studs require reinforcement or replacement in line with construction best practices and OSHPD expectations.

These scope changes are non-discretionary and are considered necessary to complete the project in a compliant and safe manner.

PROJECT BUDGET UPDATE

The project budget summary provided below reflects all known commitments and incurred costs as of April 2025, and is intended to provide the Board with a current snapshot of the ICU Upgrade Project's financial position. The budget includes the original board-approved figures, contingency allocations made to date, and the pending change order request currently under review (Requested Changes, column E).

As of this update, \$589,298 of the total \$630,000 budget has been committed, with approximately \$207,000 in costs already incurred. The remaining balance to complete the project, based on current committed costs, is \$410,556. This includes the impact of the proposed \$28,201 change order.

ICU Upgrade Project Budget Summary April 2025									
Line Item	A Board Approved Budget	B Contingency Allocations	C (A+B) Current Budget	D Committed Cost	E Requested Changes	F (D+E) Committed Cost w Requested Changes	G Incurred Costs	H (F-G) Balance To Finish	Projected Final (Over) / Under
Preconstruction	-	-	-	-	-	-	-	-	-
Feasibility Study	-	-	-	-	-	-	-	-	-
Design	122,159	4,500	126,659	126,659	-	126,659	66,741	59,918	-
Architect	122,159	4,500	126,659	126,659	-	126,659	66,741	59,918	-
Permits and Fees	18,870	-	18,870	8,000	-	8,000	7,481	519	10,870
OSHPD	18,870	-	18,870	8,000	-	8,000	7,481	519	10,870
City of Sonoma	-	-	-	-	-	-	-	-	-
FF&E	67,090	3,506	70,596	46,687	-	46,687	37,796	8,891	23,908
FF&E Vendor	67,090	3,506	70,596	46,687	-	46,687	37,796	8,891	23,908
Construction	302,000	19,019	321,019	321,019	28,201	349,219	57,217	292,003	-
General Contractor	302,000	19,019	321,019	321,019	28,201	349,219	57,217	292,003	-
Medical Equipment	-	-	-	-	-	-	-	-	-
Medical Equipment	-	-	-	-	-	-	-	-	-
Project Management	22,065	-	22,065	48,290	-	48,290	29,969	18,322	(26,225)
Professional Labor	22,065	-	22,065	48,290	-	48,290	29,969	18,322	(26,225)
Preconstruction	4,929	-	4,929	4,929	-	4,929	4,929	-	-
Design Fees	-	-	-	-	-	-	-	-	-
Panel Load Study	3,905	-	3,905	3,905	-	3,905	3,905	-	-
Bidding Fees	1,024	-	1,024	1,024	-	1,024	1,024	-	-
Testing & Inspection	15,000	-	15,000	15,000	-	15,000	2,810	12,190	-
Special Inspections	-	-	-	-	-	-	-	-	-
IOR	15,000	-	15,000	15,000	-	15,000	2,810	12,190	-
IT	10,000	9,028	19,028	18,714	-	18,714	-	18,714	314
IT Vendor	10,000	9,028	19,028	18,714	-	18,714	-	18,714	314
Project Contingency	67,310	(36,052)	31,258	-	-	-	-	-	3,057
Contingency	67,310	(36,052)	31,258	-	-	-	-	-	3,057
Project Totals	\$ 629,423	\$ -	\$ 629,423	\$ 589,298	\$ 28,201	\$ 617,499	\$ 206,943	\$ 410,556	\$ 11,924

CONTINGENCY SUMMARY

The project's original contingency was **\$67,310**. To date, **\$36,052** has been drawn from this reserve to support essential scope adjustments, including:

- **\$9,028** for Nurse Call Integration scope change– designing and installing a cable pathway from patient headboards to televisions to enable control from the pillow speaker
- **\$9,046** for Ridgeview Builders change order (CO#1) for the substitution and addition of flooring
- **\$6,775** for Ridgeview Builders change order (CO#2) for the inclusion of nearby alcove that had not been included in original bidding documents

- **\$3,197** for a Ridgeview Builders change order (CO#3) related to installation of concrete anchor wedges for safe and compliant furniture placement. Not part of original bid.
- **\$3,506** change order for FF&E sink modifications due to unforeseen conditions
- **\$4,500** for architectural revisions – designing and installing a cable pathway from patient headboards to televisions to enable control from the pillow speaker.

These adjustments have brought the current remaining contingency to \$31,258. If the board approves this request for \$28,200.55, the remaining project contingency would be reduced to approximately \$3,000.

Contingency Usage Summary				
<u>Vendor</u>	<u>Reason</u>	<u>Line Item</u>	<u>Amount</u>	<u>Purpose</u>
Comtel	Scope Change	IT	\$ 9,028	Nurse call integration for TVs in patient rooms - missed during scoping and needed for new TVs on footwall to work with pillow speakers -critical functionality.
Ridgeview Builders	Change Order #1	Construction	\$ 9,046	Change order for substitution of flooring material used.
Ridgeview Builders	Change Order #2	Construction	\$ 6,775	Change order for additional flooring in Alcove W300D. Alcove was not included in original bidding documents.
Ridgeview Builders	Change Order #3	Construction	\$ 3,197	To supply and install concrete anchor wedges for furniture installation (not part of original bid).
Trope Furniture	Change Order #1	FF&E	\$ 3,506	ADA Sink Modifications due to unforeseen conditions
Smith-Karng Architect	Change Order #1	Architect	\$ 4,500	Design cable pathway and connection from patient headboard to the in-room TV to enable channel and volume control from the patient remote.
Total Project Contingency Utilized			\$ 36,052	
Project Contingency Initial Budget			\$ 67,310	
Remaining Project Contingency			\$ 31,258	
Requested Changes				
<u>Vendor</u>	<u>Reason</u>	<u>Line Item</u>	<u>Amount</u>	<u>Purpose</u>
Ridgeview Builders	Change Order #4	Construction	\$ 28,201	Casework, plumbing, & electrical outlet to be related 2' for accessible knee clearance. Repair existing partition studs if previously compromised.
Total Contingency Utilized w Requested Changes			\$ 64,253	
Remaining Contingency After Requested Changes			\$ 3,057	

CONCLUSION AND RECOMMENDATION

The ICU Upgrade Project remains a high-impact investment in the hospital's infrastructure and patient care environment. While the proposed change order slightly exceeds the management approval threshold and will nearly exhaust the project contingency, the scope is both necessary and appropriate—addressing ADA compliance and structural deficiencies uncovered during construction.

We recommend that the Board approve Change Order #4 in the amount of \$28,200.55 to Ridgeview Builders. This approval will allow the project to proceed without delay and ensure that the upgraded ICU space is fully compliant, structurally sound, and patient-ready upon completion. Management will continue to closely monitor the remaining activity and provide a final cost reconciliation as the project moves closer to closeout.

ATTACHMENTS

- Change Order #4 Request | Ridgeview Builders
- ICU Upgrade Project Budget Summary | as of April 2025

CHANGE ORDER FORM**Sonoma Valley Health Care District**347 Andrieux Street,
Sonoma, CA, 95476**Contract Change Order # 4****Project:** SVH ICU Refresh**Change Order No.:** 4**Orig. Contract Amt.:** \$ 302,000.00 Days**Contract No.:** 1 (Owner-Insite)**Contractor:** Ridgeview Builders**Prev. Appvd. Changes:** \$ 19,018.56 Days**Owner:** Sonoma Valley Health Care District**This Change:** \$ 28,200.55 Days 0**Revised Contract Amt.:** \$ 349,219.11 Days 0

This Change Order covers changes to the subject contract as described herein. The Contractor shall construct, furnish equipment and materials, and perform all work as necessary or required to complete the Change Order items for a lump sum price agreed upon between the Contractor and Sonoma Valley Health Care District, otherwise referred to as Owner.

Item No.	Description of Changes	Increase/ (Decrease) in Contract Amount	Contract Time Extension, Days
1	Casework, plumbing, & electrical outlet to be relocated 2' for knee clearance compliance. Modification of existing rough-in requirements at new sink location	\$ 19,761.11	0
2	Repair existing partition studs if previously compromised, ACD 001 per detail	\$ 8,439.44	0
Totals		\$ 28,200.55	0

This Contract Change Order consists of **2 pages** and any exhibits attached to this Contract Change Order shall not be part of the Contract Change Order unless specifically initialed by or on behalf of both the Contractor and the Sonoma Valley Healthcare District.

Page 1 of 2

The amount of the contract will be increased by the sum of \$ 28,200.55 and the contract time shall be extended by _____ working days. The undersigned Contractor approves the foregoing Change Order # _____ as to the changes, if any, in the contract price specified for each item including any and all supervision costs and other miscellaneous costs relating to the change in work, and as to the extension of time allowed, if any, for completion of the entire work on account of said Change Order # _____. The Contractor agrees to furnish all labor and materials and perform all other necessary work, inclusive of the directly or indirectly related to the approved time extension, required to complete the Change order items. This document will become a supplement of the contract and all provisions will apply hereto. It is understood that the Change Order shall be effective when approved by the Owner.

Contractor accepts the terms and conditions stated above as full and final settlement of any and all claims arising out of or related to the subject of this Change Order and acknowledges that the compensation (time and cost) set forth herein comprises the total compensation due for the work or change defined in the Change Order, including all impact on any unchanged work. By signing this Change Order, the Contractor acknowledges and agrees that the stipulated compensation includes payment for all Work contained in the Change Order, plus all payment for any acceleration or interruption of schedules, extended overhead costs, delay, and all impact or cumulative impact on all Work under this Contract. The signing of this Change Order acknowledges full mutual accord and satisfaction for the change and that the stated time and/or cost constitute the total equitable adjustment owed the Contractor as a result of the change. The Contractor hereby releases and agrees to waive all rights, without exception or reservation of any kind whatsoever, to file any further claim or request for equitable adjustment of any type, for any reasonably foreseeable cause that shall arise out of, or as a result of, this Change Order and/or its impact on the remainder of the Work under the Contract.

Accepted:

DocuSigned by:

 1D68C77F1BA94CB
 (Signature) Contractor's Authorized Representative
 3/17/2025
 Date

Recommended:

Signed by:

 43070E330C2F2D8
 (Signature) Design Professional Authorized Representative
 4/7/2025
 Date

Approved:

(Signature) Sonoma Valley Health Care District
 Date

Item No.	Justification for Change(s)
1	Casework, plumbing, & electrical outlet to be related 2' for accessible knee clearance
2	Repair existing partition studs if previously compromised, ACD 001 per detail

This Contract Change Order consists of **2 pages** and any exhibits attached to this Contract Change Order shall not be part of the Contract Change Order unless specifically initialed by or on behalf of both the Contractor and the Sonoma Valley Healthcare District.

Contract Change Order #/

Page 2 of 2

Ridgeview Builders, Inc.



CHANGE ORDER REQUEST

COR #:

5

NMA 005

RFI 06

Project:	Contractor:	Via	Email
ICU Nurse Station Replacement Project	Ridgeview Builders, Inc.	Architect	Yes
		Owner	Yes
		Contractor	Yes
		Consultant	No
		Inspector	No

Owner: Sonoma Valley Healthcare **Arch Job #:** 22103

Date Issued:

3/6/2025

DESCRIPTION:

Discovered Condition: Existing drain line penetrates directly below the handwash sink, and impedes the accessible knee clearance. The casework, plumbing and electrical outlet will be relocated 2' so the accessible knee clearance is compliant. E1.0 – Keynote #8 added for note to modify receptacle mounting requirements at sink. P1.0 – Added sheet keynote #3 & 4 to modify existing rough-in requirements at new sink location.

MODIFICATION TO \$ 19,761.11
CONTRACT SUM:

MODIFICATION TO 7
CONTRACT TIME:

Contractor's Signature:

Date:

3/13/2025

ARCHITECTS ACTION:

☐

Review and Comment Only,
Forward to Owner

☐

REJECT - Received Too Late

☐

REJECT - Inadequate Back-Up

☐

REJECT - Not in Proper Form

CHANGE ORDER REQUEST WORKSHEET

COR #: 5

RFP RFI 06

Line	TITLE: Discovered Condition: Existing drain line penetrates directly be	ADDED	CREDIT
ALL LINES SHALL BE FILLED IN (zero values acceptable).			
GENERAL CONTRACTOR'S WORK			
1	Material (attach itemized quantity and unit cost <u>plus</u> sales tax)	\$ -	\$ -
2	Labor (attach itemized hours and rates) \$126.74 hrs 5.00	\$ 633.70	\$ -
3	Equipment (attach invoices)	\$ -	\$ -
4	Subtotal	\$ 633.70	\$ -
5	General Contractor's Overhead and Profit, Self-Performed Work not to exceed fifteen percent (10%) of line 4.	\$ 63.37	\$ -
6	Subtotal	\$ 697.07	\$ -
7	Liability and Property Damage Insurance, Worker's Compensation Insurance, Social Security, and Unemployment Taxes, not to exceed twenty-five percent (25%) of line 2.	\$ 158.43	\$ -
8	Subtotal General Contractor Work (sum of lines 4, 6, & 7.)	\$ 855.50	\$ -
SUBCONTRACT WORK (Provide separate breakdown for each subcontract)*			
9	Material (attach itemized quantity and unit cost <u>plus</u> sales tax)	\$ -	\$ -
10	Labor (attach itemized hours and rates)	\$ -	\$ -
11	Equipment (attach invoices)	\$ -	\$ -
12	Subtotal	\$ -	\$ -
13	Subcontractor's overhead and profit on work performed by Sub-contractor, not to exceed fifteen percent (15%) of line 12.	\$ -	\$ -
14	Subtotal See attached	\$ 17,636.33	\$ -
15	General Contractor's Overhead and Profit on subcontract work, not to exceed five percent (5%) of line 14.	\$ 881.82	\$ -
17	Total of Subcontract Work (sum of lines 12, 14 and 15)	\$ 18,518.15	\$ -
18	Subtotal General Contractor and Subcontractor Work (sum of lines 8 and 17.)	\$ 19,373.64	\$ -
19	Applicable Taxes (itemized by levy and by contract)	\$ -	\$ -
20	Subtotal (sum of lines 18 and 19)	\$ 19,373.64	\$ -
21	Bond not to exceed one percent 2%) of line 20.	\$ 387.47	\$ -
22	TOTAL (sum of lines 20 and 21.)	\$ 19,761.11	\$ -

Attach additional copies of this page as required to summarize additional subcontracts.



CVE | PROFESSIONAL
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CONTRACTOR'S LICENSE # 974852 DOSH REGISTRATION # 1064

COP#2

Attn Estimating

03/12/2025

ICU Nurse Station Replacement
347 Andrieux St, Sonoma, CA 95476

Scope of Work: Additional IC Set Up & Tear Down

1. Set up additional infection control within ICU.
2. Includes return trip to tear down and demobilize.

COP#2 Total: \$5,133.00

Materials & Equipment	1	
Supervisor - PVV	8	6
Worker - PVV	8	6

765.00 each	\$765.00
156.00 hour	\$2,184.00
156.00 hour	\$2,184.00
Waste, Permit, Labor, Etc	
GRAND TOTAL	\$5,133.00

Includes Prevailing Wages
CVE DIR # 1000001557

Exclusions:

1. Any other demolition or services not noted in this proposal.
2. Any unforeseen conditions.
3. Any PLA's, union contracts, bonding, or addendums.
4. Any protection of anything existing to remain.
5. Any safe-off to existing services.



CBS PLUMBING & HEATING, INC.

LICENSE NO. 294171

300 W. ROBLES AVENUE UNIT E P.O. BOX 2385 SANTA ROSA, CALIFORNIA 95405

PHONE (707) 585-1171 FAX (707) 585-3679

3/6/2025

Attn: Tom Langer

Re: SVH – ICU Nurse Station – RFI 006 – Relocate Plumbing for (N) Sink Location

Tom,

Here is your price to relocate the waste, domestic water, and condensate lines for the new sink location. Price includes sterilization of domestic water piping. Please see the attached labor and material breakdown sheet.

Please feel free to call with any questions or concerns.

Total: \$9,599.00

Respectfully,

David Duty

Vice President/Estimator

ESTIMATE SHEET

PAGE NO. OF PAG

JOB NAME Sonoma Valley / ICU	CONTRACTOR	ESTIMATE NO.
LOCATION Nurse Station	ARCHITECT	DATE 3.6.25
ESTIMATOR	CHECKED BY	BID DATE
JOB DESCRIPTION RFI 1006 - Relocat Plumbing For (N) Sink location		

Waste-Water - Cond.

FORWARD

DESCRIPTION	QUANTITY	Ø	MATERIAL	LABOR	SUBCONTRACT	TOTAL
Misc waste material	1		300 -			300 ⁰⁰
Condensates						
1" L Hard Cop Pipe	20'	7 ³⁸	147 ⁶⁰			147 ⁶⁰
1" Cop Coup	4	4 ²⁸	17 ¹²			17 ¹²
1" " 90°	8	7 ⁰¹	62 ⁴⁸			62 ⁴⁸
1" " 45°	4	11 ⁰⁹	44 ³⁶			44 ³⁶
Hangers/straps in wall	8	8 -	64 ⁰⁰			64 ⁰⁰
Domestic Water						
1/2" L Hard Cop Pipe	20'	3 ⁰⁷	61 ⁴⁰			61 ⁴⁰
1/2" Cop 90°	10	1 ⁴⁵	14 ⁵⁰			14 ⁵⁰
1/2" " Coup	4	1 ⁰⁸	4 ³²			4 ³²
Hangers in wall	8	8 -	64 ⁰⁰			64 ⁰⁰
1x1/2" Cop Tee	2	15 ⁵⁶	31 ¹²			31 ¹²
1/2"x1/4" MIP Cop adpt	2	9 ⁰²	18 ⁰⁴			18 ⁰⁴
1/4" Nibco T-585-80-LF B. V	2	24 ⁰⁰	48 ⁰⁰			48 ⁰⁰
1/4" Brass IPS Brass Plug	2	2 ⁴³	4 ⁸⁶			4 ⁸⁶
1/2" Cop Caps	2	1 ⁰⁴	2 ⁰⁸			2 ⁰⁸
1" Cop Coup	4	4 ²⁸	17 ¹²			17 ¹²
Sterilization					3200	3200 ⁰⁰
Labor @ 139.11/Hr x 8 = 1112.88	4 day	1112 ⁸⁸		4451 ⁵²		4451 ⁵²
TOTAL COSTS			901 ⁰⁰	4451 ⁵²	3200 ⁰⁰	8552 ⁵²

MISC. JOB EXPENSES

AMOUNT

\$9599.00

Material

Tax 9.75%

OVERHEAD 10%

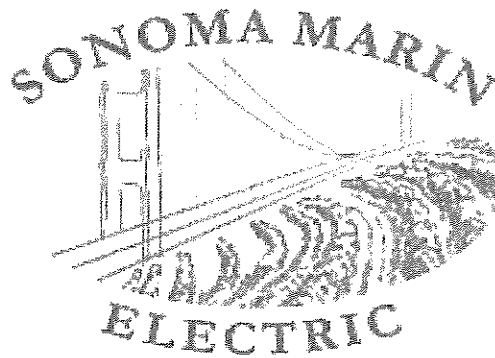
Labor

PROFIT 5%

Sub 15%

BID - GUARANTEED

TOTAL



PROJECT CHANGE ORDER REQUEST

SVH Nurse Station Replacement

Date: 03/03/2025

REFERENCE: RFI 6

PCO NUMBER: 1

TIME IMPACT: 1 Working Day

PCO SUBJECT: Relocate Hand Sink

TO:

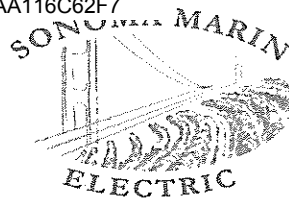
Rebecca Langer
Ridgeview Builders, Inc.
3100 Dutton Ave. St. 104
Santa Rosa CA, 95407

RETURN:

Ian Muskar
Sonoma Marin Electric, Inc.
1971 Green Hill Rd.
Sebastopol, CA 95472

SCOPE OF WORK:

Per revised E1.0, relocate existing receptacle at hand sink approximately 24" to the left. Intercept existing 3/4" EMT conduit in accessible ceiling location, ring conduit, install J-box, MC whip into existing stud wall to new receptacle location. Work requires power shutdown for circuits 3EA-13, 3EA-15, and 3EA-17. These circuits are generally located in the immediate area and appear to be dedicated circuits not currently being utilized.



CONTRACTOR CHANGE ORDER

PROJECT NAME	SVH ICU	CHANGE ORDER NO	1
PROJECT LOCATION	347 Andrieux St, Sonoma	DATE OF REQUEST	03/03/2025

CONTRACTOR ITEMIZED BREAKDOWN OF WORK

MATERIAL NAME & DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT
- MISC. 3/4" EMT, connectors, couplings, back box, straps, supports, Hospital MC, and conductors - Tax	1	\$100	\$100.00
	1	9.75%	\$9.75

SUBTOTAL	\$109.75
MARK UP	on \$100.00 @ 15% = \$15.00
TOTAL	\$125.75

LABOR	NO. OF HRS	RATE	AMOUNT
Foreman 1		\$130.29	
Journeyman 1	8	\$100.83	\$806.64
Apprentice 1	8	\$86.67	\$693.36
Apprentice 2			

SUBTOTAL	\$1,500.00
MARK UP	@ 15% = \$225.00
TOTAL	\$1,725.00

EQUIPMENT	NO. OF HRS	RATE	AMOUNT
Vehicle 1	8	\$57.26	\$458.08
Vehicle 2	8	\$57.26	\$458.08

SUBTOTAL	\$916.16
MARK UP	@ 15% = \$137.42
TOTAL	\$1,053.58

SUBCONTRACTOR	SUB PCO #	COMPANY NAME	AMOUNT
MATERIAL			
TAX ON MATERIAL			
LABOR			

SUBTOTAL	
MARK UP	
TOTAL	

GRAND TOTAL	\$2,904.33
-------------	------------

CONTRACTOR:
Sonoma Marin Electric, Inc.
1971 Green Hill Rd.
Sebastopol, CA 95472

San Muskar

DATE: 03/03/2025

CLIENT:
Ridgeview Builders, Inc.
3100 Dutton Ave.
Santa Rosa, CA 95407

DATE:



**DEPARTMENT OF HEALTH CARE ACCESS AND INFORMATION
OFFICE OF STATEWIDE HOSPITAL PLANNING AND DEVELOPMENT**

Non-Material Alteration (NMA) Change Form

NMA Number: 005	Facility ID Number: 11064	Client Document Name: RFI 006	Issue Date: 02/26/54
Facility Name and Address: Sonoma Valley Hospital 347 Andrieux St, Sonoma, CA		HCAI/OSHPD Project Name and Number: ICU Nurse Station Remodel - 22103 SVH ICU Refresh	
Subject of NMA Change: Relocate Hand Wash Sink		<input type="checkbox"/> Contractor RFI <input checked="" type="checkbox"/> Field Condition <input type="checkbox"/> Owner Request <input type="checkbox"/> DPOR Revision <input type="checkbox"/> OIL Resolution	Attached Drawings/Sketches: A2.1, E1.0, P1.0
Description of NMA Change: If NMA is clearing outstanding item(s), provide details. Discovered Condition: Existing drain line penetrates directly below the handwash sink, and impedes the accessible knee clearance. The casework, plumbing and electrical outlet will be relocated 2' so the accessible knee clearance is compliant. E1.0 – Keynote #8 added for note to modify receptacle mounting requirements at sink. P1.0 – Added sheet keynote #3 & 4 to modify existing rough-in.			
AOR/EOR Stamp and Signature. <i>Only required if not attaching drawings/sketches.</i>		HCAI/OSHPD Concurrence and Date:	

Check the Type of Non-Material Alteration Change this NMA Represents – Reference CAC Section 7-153(b):

<input type="checkbox"/>	1. Clarification and interpretation of plans and specifications where substantiating structural calculations are not required.
<input type="checkbox"/>	2. Construction means and methods.
<input type="checkbox"/>	3. Substitutions of equipment, products, or materials without increasing loads to mechanical, plumbing, electrical systems, or increasing lateral or gravity loads.
<input type="checkbox"/>	4. New details that are referenced standards or preapproved details or based on other approved reference standards or preapproved details. Reference to the approved details must be shown.
<input type="checkbox"/>	5. Final routing configurations of ducts, conduits, pipes, etc., where shown diagrammatically on the approved plans.
<input type="checkbox"/>	6. Dimensional changes to rooms that do not affect code required minimum dimensions, fixed dimensions, minimum room or space requirements and required clearances.
<input type="checkbox"/>	7. Relocation of doors, windows, electrical switches and outlets, plumbing fixtures, etc., without code implications.
<input checked="" type="checkbox"/>	8. Cabinetry relocation or reconfiguration without code implications.

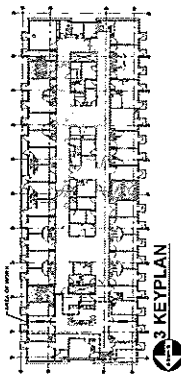
Design Professional of Record

By my signature below, I acknowledge that the documents for the submittal type above have been reviewed and have been found to be in conformance with CAC Section 7-153(b) and the design of the project.

Signature of Architect or Engineer in Responsible Charge 	Date: 02/26/25
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GENERAL SHEET NOTES

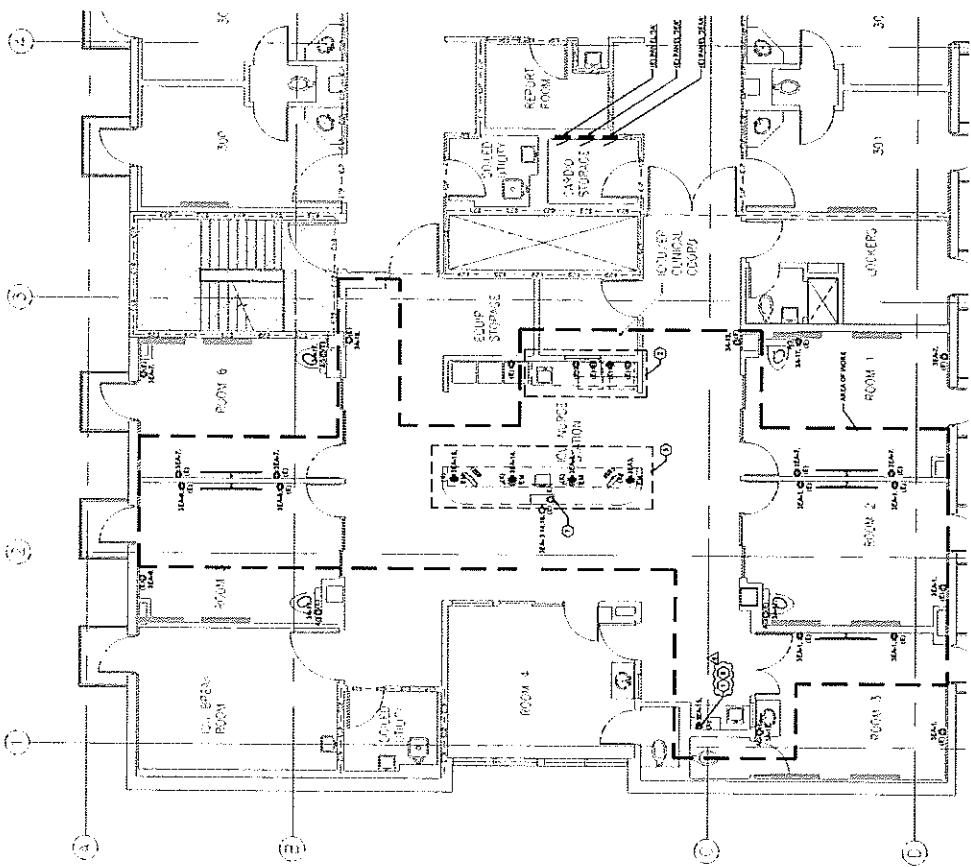
1. REFER TO THE GENERAL NOTES FOR THE PROJECT FOR A COMPLETE LIST OF NOTES.
2. ALL WORK SHALL BE IN ACCORDANCE WITH THE LATEST EDITIONS OF THE IBC AND NFPA 99.
3. ALL WORK SHALL BE IN ACCORDANCE WITH THE LATEST EDITIONS OF THE IBC AND NFPA 99.
4. ALL WORK SHALL BE IN ACCORDANCE WITH THE LATEST EDITIONS OF THE IBC AND NFPA 99.
5. ALL WORK SHALL BE IN ACCORDANCE WITH THE LATEST EDITIONS OF THE IBC AND NFPA 99.



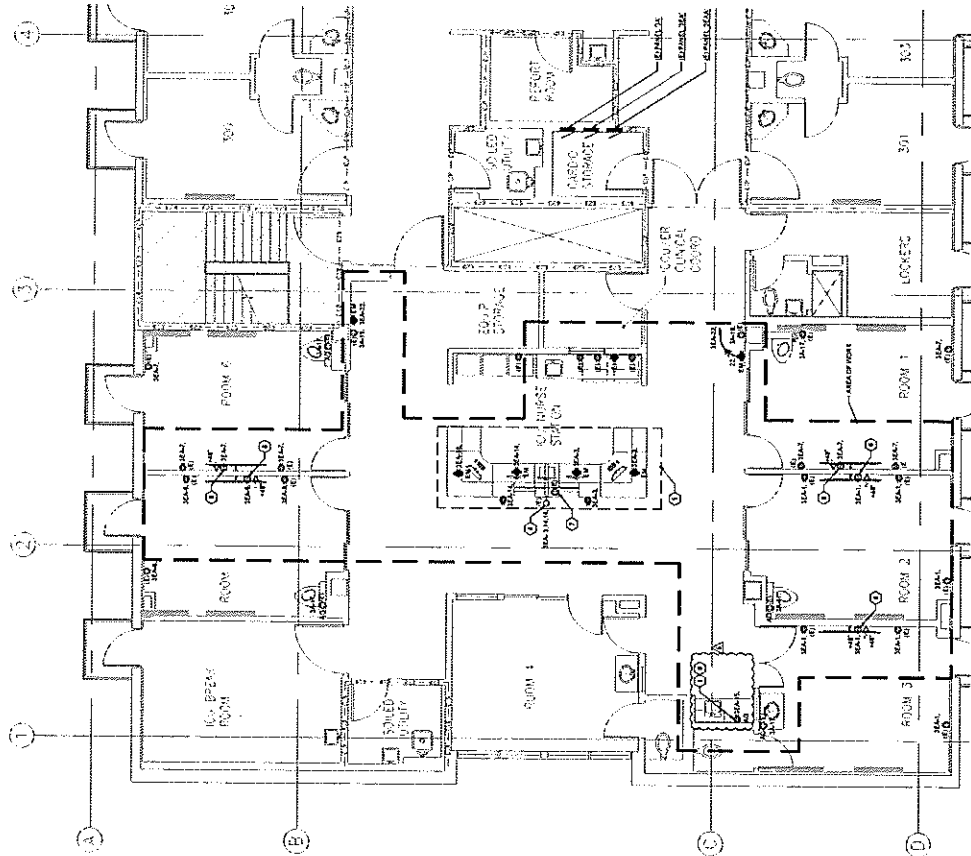
3 KEYPLAN

O SHEET KEYNOTES

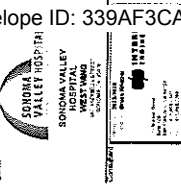
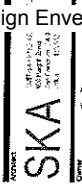
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5. ALL WORK SHALL BE IN ACCORDANCE WITH THE LATEST EDITIONS OF THE IBC AND NFPA 99.



1 PARTIAL DEMO 3RD FLOOR FLOOR PLAN - WEST WING ICU NURSE STATION - POWER AND SIGNAL



2 PARTIAL 3RD FLOOR FLOOR PLAN - WEST WING ICU NURSE STATION - POWER AND SIGNAL



22103
CONTINUED

ICU Nurse Station

ICU Nurse Station

ICU Nurse Station

ICU Nurse Station

ICU Nurse Station

ICU Nurse Station

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ICU Nurse Station

E1.0

30 X 42

- FREE 147601.0 DWS - P1.0 | EN* - 2/25/2023 3:30 PM NY T0005 | PLOT: 2/25/2023 3:41 PM BY T000 SMOOTPC

Type of Non-Materially Altered Change - Reference CAC 7-153(b):

1. Clarification/interpretation of plans and specifications without structural calculations.
2. Construction means and methods.
3. Substitutions of equipment, products, or materials without increasing loads to MPE 5 or more.
4. New details based on other approved details in whole or part, including referenced standards.
5. Final routing configurations of ducts, conduits, pipes, etc., where shown diagrammatically.
6. Dimensional changes to rooms that do not affect code required minimums or space requirements.

Non-Material Altered (NMA) Change Log

- 7. Relocation of doors, windows, switches, outlets, plumbing fixtures, etc., without code implications.
- 8. Cabinetry relocation/reconfiguration without code implications.

Ridgeview Builders, Inc.**CHANGE ORDER REQUEST**

COR #: 6
ACD 001

Project:	Contractor:	Via	Email
ICU Nurse Station Replacement Project	Ridgeview Builders, Inc.	Architect	Yes
Owner: Sonoma Valley Healthcare Arch Job #: 22103		Owner	Yes
		Contractor	Yes
		Consultant	No
		Inspector	No

Date Issued: 3/13/2025

DESCRIPTION:

REPAIR EXISTING PARTITION STUDS IF PREVIOUSLY COMPROMISED, ACD 001 PER DETAIL 7/A6.4

MODIFICATION TO \$ 8,439.44
CONTRACT SUM:

MODIFICATION TO 7
CONTRACT TIME:

Contractor's Signature:

Date:

3/13/2025

ARCHITECTS ACTION:

☐

Review and Comment Only,
Forward to Owner

☐

REJECT - Not in Proper Form

☐

REJECT - Received Too Late

☐

REJECT - Inadequate Back-Up

CHANGE ORDER REQUEST WORKSHEET

COR #: 6
ACD 001 0

Line	TITLE: REPAIR EXISTING PARTITION STUDS IF PREVIOUSLY COM	ADDED	CREDIT
ALL LINES SHALL BE FILLED IN (zero values acceptable).			
GENERAL CONTRACTOR'S WORK			
1	Material (attach itemized quantity and unit cost <u>plus</u> sales tax)	\$ 550.00	\$ -
2	Labor (attach itemized hours and rates) \$126.74 hrs 40.00	\$ 5,069.60	\$ -
3	Equipment (attach invoices)	\$ 750.00	\$ -
4	Subtotal	\$ 6,369.60	\$ -
5	General Contractor's Overhead and Profit, Self-Performed Work not to exceed fifteen percent (10%) of line 4.	\$ 636.96	\$ -
6	Subtotal	\$ 7,006.56	\$ -
7	Liability and Property Damage Insurance, Worker's Compensation Insurance, Social Security, and Unemployment Taxes, not to exceed twenty-five percent (25%) of line 2.	\$ 1,267.40	\$ -
8	Subtotal General Contractor Work (sum of lines 4, 6, & 7.)	\$ 8,273.96	\$ -
SUBCONTRACT WORK (Provide separate breakdown for each subcontract)*			
9	Material (attach itemized quantity and unit cost <u>plus</u> sales tax)	\$ -	\$ -
10	Labor (attach itemized hours and rates)	\$ -	\$ -
11	Equipment (attach invoices)	\$ -	\$ -
12	Subtotal	\$ -	\$ -
13	Subcontractor's overhead and profit on work performed by Sub-contractor, not to exceed fifteen percent (15%) of line 12.	\$ -	\$ -
14	Subtotal See attached	\$ -	\$ -
15	General Contractor's Overhead and Profit on subcontract work, not to exceed five percent (5%) of line 14.	\$ -	\$ -
17	Total of Subcontract Work (sum of lines 12, 14 and 15)	\$ -	\$ -
18	Subtotal General Contractor and Subcontractor Work (sum of lines 8 and 17.)	\$ 8,273.96	\$ -
19	Applicable Taxes (itemized by levy and by contract)	\$ -	\$ -
20	Subtotal (sum of lines 18 and 19)	\$ 8,273.96	\$ -
21	Bond not to exceed one percent (2%) of line 20.	\$ 165.48	\$ -
22	TOTAL (sum of lines 20 and 21.)	\$ 8,439.44	\$ -

Attach additional copies of this page as required to summarize additional subcontracts.

Sonoma Valley Hospital
ICU Upgrade Project | Budget Summary | April 2025

	A	B	C (A+B)	D	E	F (D+E)	G	H (F-G)	
Line Item	Board Approved Budget	Contingency Allocations	Current Budget	Committed Cost	Requested Changes	Committed Cost w Requested Changes	Incurred Costs	Balance To Finish	Projected Final (Over) / Under
Preconstruction	-	-	-	-	-	-	-	-	-
Feasibility Study	-	-	-	-	-	-	-	-	-
Design	122,159	4,500	126,659	126,659	-	126,659	66,741	59,918	-
Architect	122,159	4,500	126,659	126,659	-	126,659	66,741	59,918	-
Permits and Fees	18,870	-	18,870	8,000	-	8,000	7,481	519	10,870
OSHPD	18,870	-	18,870	8,000	-	8,000	7,481	519	10,870
City of Sonoma	-	-	-	-	-	-	-	-	-
FF&E	67,090	3,506	70,596	46,687	-	46,687	37,796	8,891	23,908
FF&E Vendor	67,090	3,506	70,596	46,687	-	46,687	37,796	8,891	23,908
Construction	302,000	19,019	321,019	321,019	28,201	349,219	57,217	292,003	-
General Contractor	302,000	19,019	321,019	321,019	28,201	349,219	57,217	292,003	-
Medical Equipment	-	-	-	-	-	-	-	-	-
Medical Equipment	-	-	-	-	-	-	-	-	-
Project Management	22,065	-	22,065	48,290	-	48,290	29,969	18,322	(26,225)
Professional Labor	22,065	-	22,065	48,290	-	48,290	29,969	18,322	(26,225)
Preconstruction	4,929	-	4,929	4,929	-	4,929	4,929	-	-
Design Fees	-	-	-	-	-	-	-	-	-
Panel Load Study	3,905	-	3,905	3,905	-	3,905	3,905	-	-
Bidding Fees	1,024	-	1,024	1,024	-	1,024	1,024	-	-
Testing & Inspection	15,000	-	15,000	15,000	-	15,000	2,810	12,190	-
Special Inspections	-	-	-	-	-	-	-	-	-
IOR	15,000	-	15,000	15,000	-	15,000	2,810	12,190	-
IT	10,000	9,028	19,028	18,714	-	18,714	-	18,714	314
IT Vendor	10,000	9,028	19,028	18,714	-	18,714	-	18,714	314
Project Contingency	67,310	(36,052)	31,258	-	-	-	-	-	3,057
Contingency	67,310	(36,052)	31,258	-	-	-	-	-	3,057
Project Totals	\$ 629,423	\$ -	\$ 629,423	\$ 589,298	\$ 28,201	\$ 617,499	\$ 206,943	\$ 410,556	\$ 11,924

Contingency Usage Summary

Vendor	Reason	Line Item	Amount	Purpose
Comtel	Scope Change	IT	\$ 9,028	Nurse call integration for TVs in patient rooms - missed during scoping and needed for new TVs on footwall to work with pillow speakers -critical functionality.
Ridgeview Builders	Change Order #1	Construction	\$ 9,046	Change order for substitution of flooring material used.
Ridgeview Builders	Change Order #2	Construction	\$ 6,775	Change order for additional flooring in Alcove W300D. Alcove was not included in original bidding documents.
Ridgeview Builders	Change Order #3	Construction	\$ 3,197	To supply and install concrete anchor wedges for furniture installation (not part of original bid).
Trope Furniture	Change Order #1	FF&E	\$ 3,506	ADA Sink Modifications due to unforeseen conditions
SKA	Change Order #1	Architect	\$ 4,500	Design cable pathway and connection from patient headboard to the in-room TV to enable channel and volume control from the patient remote.
Total Project Contingency Utilized			\$ 36,052	
Project Contingency Initial Budget			\$ 67,310	
Remaining Project Contingency			\$ 31,258	

Requested Changes

Vendor	Reason	Line Item	Amount	Purpose
Ridgeview Builders	Change Order #4	Construction	\$ 28,201	Casework, plumbing, & electrical outlet to be related 2' for accessible knee clearance. Repair existing partition studs if previously compromised.
Total Contingency Utilized w Requested Changes			\$ 64,253	
Remaining Contingency After Requested Changes			\$ 3,057	



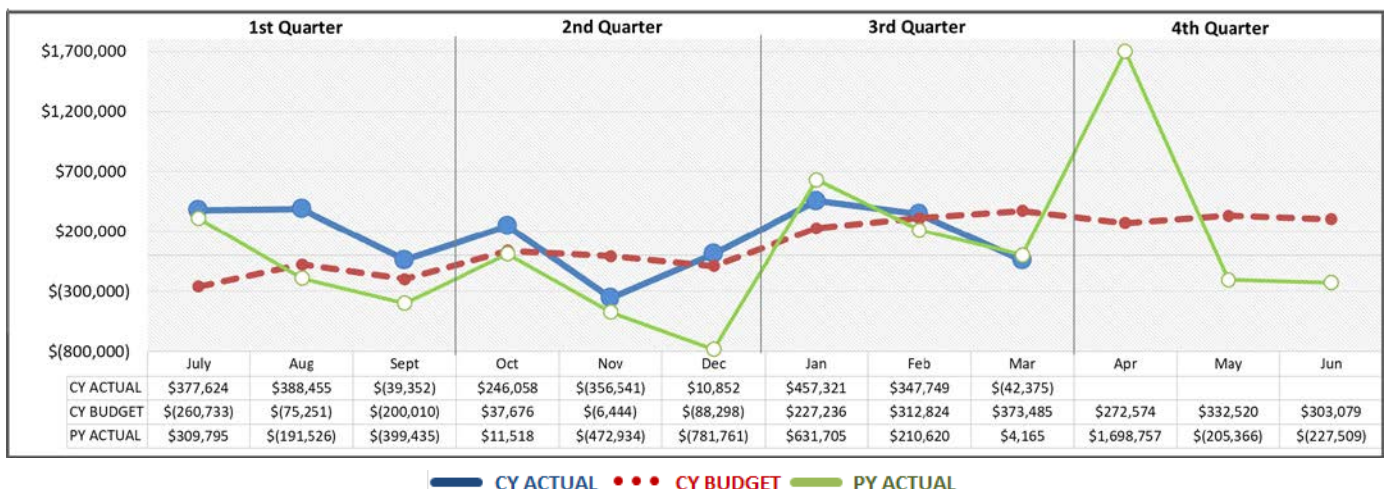
To: SVHCD Finance Committee
 From: Ben Armfield, Chief Financial Officer
 Date: April 22, 2025
 Subject: Financial Report for March 2025

OVERALL PERFORMANCE SUMMARY

While March fell short of budget from a financial standpoint, the hospital still delivered solid operational performance across most key service lines. The unfavorable budget variance was primarily driven by higher-than-expected expenses, particularly in employee benefits and supply costs. Importantly, overall revenues exceeded budget, and volumes remain strong.

- **Operating EBDA** (with Parcel Taxes) – The hospital posted an **Operating EBDA of (\$42,400)** in March, falling below the budgeted \$373,500 by **\$415,900**. Although this represents a notable variance, it was driven almost entirely by expense pressures, with revenues continuing to trend positively. Year-to-date, the hospital remains ahead of budget on Operating EBDA by over \$1 million.
- **Operating Revenues** – Total operating revenue for the month was **\$5.93 million**, exceeding budget by **\$269,000 (5%)**.
- **Operating Expenses** - Total expenses for March were **\$6.80 million**, exceeding budget by **\$712,000 (12%)**. The majority of the overage stemmed from higher employee benefit costs, which came in approximately \$200,000 over budget due to large health insurance claims processed through our self-insured captive plan. In addition, supply costs trended above budget, but this was largely attributable to the increase in surgical volume and corresponding use of chargeable and operating supplies. While expense growth is something we are monitoring closely, much of this month's variance can be tied to volume-related and non-recurring activity.
- **Cash** – The hospital ended the month with **34.5 Days Cash on Hand**.

Trended Operating EBDA (Includes Parcel Taxes)



Overall Performance (In 1000s, Includes Parcel Taxes) | March 2025

	Current Month				Year-To- Date				PY Actual		
	Actual	Budget	Var	%	Actual	Budget	Var	%	PY Actual	Var	%
Operating EBDA	\$ (42.4)	\$ 373.5	\$(415.9)	-111%	\$ 1,389.8	\$ 320.5	\$ 1,069.3	334%	\$ (677.9)	\$ 2,067.6	305%
Operating Revenues	\$ 5,929.9	\$ 5,661.2	\$ 268.7	5%	\$ 48,137.7	\$ 45,662.0	\$ 2,475.8	5%	\$ 43,191.9	\$ 4,945.8	11%
Operating Expenses	\$ 6,289.0	\$ 5,600.2	\$ 688.8	12%	\$ 49,597.9	\$ 48,154.0	\$ 1,444.0	3%	\$ 46,719.7	\$ 2,878.2	6%

DRIVERS IN MONTHLY PERFORMANCE

- **Inpatient Activity** – March delivered an ADC of **11**, exceeding budget by **22%**, with discharges also up by **13%**. This marks one of the busiest inpatient months this fiscal year.
- **Surgical Volumes** - Surgical activity rebounded with **176 cases** in March, exceeding budget by **10%**. This represents the busiest month in the OR since April of last year. Both inpatient and outpatient surgeries contributed to the growth, with Orthopedics, GI, and Ophthalmology all seeing increased activity.
- **Emergency Room** – Volumes continue to be robust in our ER. We had 926 visits in January, ~29.8 per day.
- **Other Outpatient Activity** - Outpatient volumes remained strong across most departments, once again exceeding budget with a total of **5,894 visits**.
 - **Physical Therapy** – PT delivered 1,395 visits, coming in just below budget. Notably, the budget ramped up in January to reflect the expected completion of the expansion project, so performance is particularly impressive given the ongoing space constraints. The team continues to maximize throughput despite not yet being in the fully expanded footprint.
 - **MRI** – MRI volumes came in just under 200 exams for the month. We continue to make strategic investments in referral development and outreach, including new roadshow-style engagement efforts across the North Bay to raise awareness of the 3T MRI capabilities.
 - **Wound Care** - Continues to deliver consistent, exceptional results, with 267 visits in March—reflecting sustained month-over-month growth.
- **Cash Collections - The hospital collected over \$5.2 million in March**, marking a banner month for cash receipts. This is one of the strongest collection months in recent memory and helped drive a 12% reduction in Days in Net A/R from prior month (57.2 in February to 50.2 in March).
- **Accounts Payable Activity** - Payables increased by approximately 4% from February, driven by a combination of factors. These include timing, as a large number of invoices were received in the final week of March, many of which were construction-related expenses hitting this line, and the accrual of our matching fee liability for two IGT programs (increased AP by over \$600,000). We anticipate that April's payables balance will look significantly different as these items are processed and reconciled.

Reducing payables will be a key financial priority between now and fiscal year-end, and it remains our goal to have accounts payable below prior year-end levels by June 30.

OTHER FINANCE UPDATES

- **Enterprise Resource Planning (ERP) Solution** – After extensive internal evaluation and discussion, we have made the decision to pursue a short-term renewal with our existing ERP system, Paragon. While not ideal from a long-term technology perspective, Paragon remains significantly more cost-effective than its competitors. Our analysis showed that switching ERP vendors would add approximately \$500,000 in incremental cost in FY26, and over \$1 million in added expense over the next five years. While we continue to believe a transition to a new ERP platform is inevitable, the financial investment required is difficult to justify at this time. We will revisit this discussion as part of future capital planning.

- **General Purchasing Organization (GPO) Review** - We are currently evaluating a potential opportunity to switch GPO vendors. Our team is performing due diligence to assess pricing structures, service levels, and potential cost savings. More to come in months ahead but we believe this could be a favorable move for us from a financial standpoint.
 - **FY26 Budget Planning** - A verbal update will be provided to the Finance Committee but department-level budget meetings are ongoing and we expect to have a preliminary roll-up available in the next couple of weeks.
 - **Rate Range Program Updates** – No tangible update to provide on Rate Range IGT allocations for FY26. We should know more in the next 2-4 weeks.
 - **FY25 Audit Fieldwork** - Moss Adams completed on-site fieldwork last week as part of their interim audit procedures. This included mid-year testing of accounts receivable and other balance sheet items. Full-year audit planning remains on track. They will come back out on-site in mid-August.
-

FINANCE REPORT ATTACHMENTS:

- Attachment A Income Statement
- Attachment B Balance Sheet
- Attachment C Cash Flow Forecast
- Attachment D Key Performance Indicators | Volumes & Statistics
- Attachment E Fiscal Year 2025 Business Plan Tracker

Sonoma Valley Health Care District
Income Statement (in 1000s)
For the Period Ended March 31, 2025

ATTACHMENT A

		Month				Year-To- Date						
Revenues		CYM Actual	CYM Budget	Var	%	YTD Actual	YTD Budget	Var	%	PYTD Actual	Var	%
1	Net Patient Revenue	\$ 4,383.2	\$ 4,697.7	(314.4)	-7%	\$ 38,100.8	\$ 36,990.1	1,110.7	3%	\$ 36,550.8	1,550.0	4%
2	IGT Program Revenue	1,419.8	871.5	548.2	63%	9,119.4	7,843.9	1,275.4	16%	5,812.4	3,306.9	57%
3	Parcel Tax Revenue	316.7	312.5	4.2	1%	2,850.0	2,812.5	37.5	1%	2,850.0	-	0%
4	Other Operating Revenue	127.0	92.0	35.0	38%	917.5	827.9	89.6	11%	828.6	88.9	11%
5	Total Revenue	\$ 6,246.6	\$ 5,973.7	272.9	5%	\$ 50,987.7	\$ 48,474.5	2,513.3	5%	\$ 46,041.9	4,945.8	11%
Operating Expenses		CYM Actual	CYM Budget	Var	%	YTD Actual	YTD Budget	Var	%	PYTD Actual	Var	%
6	Labor / Total People Cost	\$ 3,303.3	\$ 3,079.7	223.6	7%	\$ 26,362.7	\$ 26,186.1	176.7	1%	\$ 25,100.2	1,262.5	5%
7	Professional Fees	759.0	715.3	43.7	6%	6,154.1	6,137.2	16.9	0%	5,309.6	844.5	16%
8	Supplies	769.7	656.2	113.5	17%	5,767.4	5,458.0	309.4	6%	6,001.3	(233.9)	-4%
9	Purchased Services	484.5	400.8	83.7	21%	3,646.5	3,656.8	(10.3)	0%	3,788.8	(142.3)	-4%
10	Depreciation	514.8	491.7	23.1	5%	4,724.9	4,485.3	239.5	5%	3,927.9	797.0	20%
11	Interest	32.7	29.4	3.3	11%	330.6	265.0	65.6	25%	519.9	(189.3)	-36%
15	Other	361.2	353.7	7.6	2%	3,378.0	3,164.2	213.8	7%	2,936.3	441.7	15%
16	IGT Program Expense	578.6	365.2	213.4	58%	3,958.6	3,286.7	671.9	20%	3,063.5	895.1	29%
17	Operating Expenses	\$ 6,803.8	\$ 6,091.9	711.8	12%	\$ 54,322.8	\$ 52,639.3	1,683.5	3%	\$ 50,647.6	3,675.2	7%
18	Operating Margin	\$ (557.2)	\$ (118.2)	(438.9)	-371%	\$ (3,335.1)	\$ (4,164.9)	830	20%	\$ (4,605.7)	1,270.6	28%
Non Operating Income		CYM Actual	CYM Budget	Var	%	YTD Actual	YTD Budget	Var	%	PYTD Actual	Var	%
19	GO Bond Activity, Net	162.8	177.6	(14.8)	-8%	1,454.2	1,598.1	(143.9)	-9%	1,571.9	(117.7)	-7%
20	Misc Revenue/(Expenses)	34.2	10.5	23.6	224%	239.7	94.8	144.9	153%	282.3	(42.6)	-15%
21	Total Non-Op Income	\$ 197.0	\$ 188.1	8.9	5%	\$ 1,693.9	\$ 1,692.9	1.0	0%	\$ 1,854.2	(160.2)	-9%
22	Net Income (Loss)	\$ (360.2)	\$ 69.9	(430.1)	-615%	\$ (1,641.1)	\$ (2,471.9)	830.8	34%	\$ (2,751.5)	1,110.4	40%
23	Restricted Foundation Contr.	67.6	157.4	(89.8)	-57%	2,105.5	1,416.7	688.9	49%	3,586.4	(1,480.8)	-41%
24	Change in Net Position	\$ (292.6)	\$ 227.3	(519.9)	-229%	\$ 464.4	\$ (1,055.2)	1,519.6	144%	\$ 834.8	(370.4)	44%
25	Operating EBDA	\$ (42.4)	\$ 373.5	(415.9)	-111%	\$ 1,389.8	\$ 320.5	1,069.3	334%	\$ (677.9)	2,067.6	305%

Sonoma Valley Health Care District

ATTACHMENT B

**Balance Sheet
As of March 31, 2025
Expressed in 1,000s**

		<u>Current Month</u>	<u>Prior Month</u>	<u>FYE 2024 Prior Year</u>
Assets				
Current Assets:				
1	Cash	\$ 5,572.6	\$ 5,379.6	\$ 3,748.6
2	Net Patient Receivables	7,908.8	8,526.5	11,860.2
3	Allow Uncollect Accts	(893.3)	(903.8)	(4,323.2)
4	Net Accounts Receivable	\$ 7,015.4	\$ 7,622.8	\$ 7,537.0
5	Parcel Tax Receivable	1,730.7	1,730.7	-
6	GO Bond Tax Receivable	975.3	975.3	-
7	Other Receivables	2,394.9	2,195.3	1,647.5
8	Inventory	942.2	947.7	913.4
9	Prepaid Expenses	1,030.0	1,087.0	637.5
10	Total Current Assets	\$ 19,661.2	\$ 19,938.3	\$ 14,484.0
11	Property, Plant & Equip, Net	\$ 59,848.2	\$ 60,242.8	\$ 61,734.0
12	Trustee Funds - GO Bonds	4,801.6	5,010.4	5,957.3
13	Other Assets - Deferred IGT Expense	2,120.4	2,806.1	-
14	Total Assets	\$ 86,431.4	\$ 87,997.7	\$ 82,175.3
Liabilities & Fund Balances				
Current Liabilities:				
15	Accounts Payable	\$ 8,294.3	\$ 7,956.0	\$ 6,443.4
16	Accrued Compensation	4,476.6	4,020.9	3,648.8
17	Interest Payable - GO Bonds	295.0	481.3	189.4
18	Accrued Expenses	388.5	222.6	409.6
19	Deferred IGT Revenue	4,602.4	6,022.2	-
20	Deferred Parcel Tax Revenue	950.0	1,266.7	-
21	Deferred GO Bond Tax Revenue	601.9	802.5	-
22	Line of Credit - Summit Bank	-	-	4,973.7
23	Other Liabilities	-	-	57.5
24	Total Current Liabilities	\$ 19,608.7	\$ 20,772.2	\$ 15,939.9
25	Long Term Debt, net current portion	\$ 27,845.7	\$ 27,955.9	\$ 27,457.8
26	Total Fund Balance	\$ 38,977.0	\$ 39,269.6	\$ 38,777.6
27	Total Liabilities & Fund Balances	\$ 86,431.4	\$ 87,997.7	\$ 82,175.3

<u>Cash Indicators</u>	<u>Current Month</u>	<u>Prior Month</u>	<u>Prior Year FYE</u>
Days Cash	35.9	34.5	22.7
A/R Days	50.2	57.2	60.1
A/P Days	69.2	66.4	55.1

Sonoma Valley Health Care District
Cash Forecast (In 1000s)
FY 2025

ATTACHMENT C

	Actual July	Actual Aug	Actual Sept	Actual Oct	Actual Nov	Actual Dec	Actual Jan	Actual Feb	Actual Mar	Forecast Apr	Forecast May	Forecast Jun	TOTAL
Hospital Operating Sources													
1 Patient Payments Collected	\$ 4,211.7	\$ 4,169.5	\$ 4,265.7	\$ 4,281.0	\$ 4,115.5	\$ 3,960.7	\$ 4,215.3	\$ 3,754.9	\$ 5,221.2	\$ 4,300.0	\$ 4,300.0	\$ 4,300.0	\$ 51,095.4
2 Other Operating Revenue	316.7	106.8	46.0	192.7	75.3	88.8	115.0	107.7	90.1	110.0	100.0	100.0	1,449.1
3 Other Non-Operating Revenue	12.1	20.9	11.4	5.4	16.2	18.0	24.2	13.5	44.3	18.6	3.6	8.0	196.2
4 Unrestricted Contributions	-	8.2	9.5	9.1	6.0	7.6	-	-	-	-	-	-	40.4
5 Sub-Total Hospital Sources	\$ 4,540.5	\$ 4,305.4	\$ 4,332.6	\$ 4,488.2	\$ 4,212.9	\$ 4,075.1	\$ 4,354.5	\$ 3,876.2	\$ 5,355.6	\$ 4,428.6	\$ 4,403.6	\$ 4,408.0	\$ 52,781.2
Hospital Uses of Cash													
6 Operating Expenses / AP Payments	\$ 5,003.0	\$ 4,703.6	\$ 4,628.1	\$ 5,681.0	\$ 5,589.2	\$ 5,094.6	\$ 5,422.8	\$ 5,437.3	\$ 4,807.5	\$ 5,680.0	\$ 5,803.0	\$ 5,977.0	\$ 63,827.2
7 Term Loan Paydown	-	-	-	-	-	116.6	89.7	73.6	73.6	73.6	73.6	73.6	574.1
8 Bridge Loan Payback	-	-	-	-	-	-	758.2	-	-	-	-	-	758.2
9 Capital Expenditures	66.0	1,047.6	177.6	185.2	230.8	7.6	-	109.2	25.0	100.0	100.0	50.0	2,099.0
10 Total Hospital Uses	\$ 5,068.9	\$ 5,751.3	\$ 4,805.7	\$ 5,866.2	\$ 5,820.0	\$ 5,218.8	\$ 6,270.7	\$ 5,620.2	\$ 4,906.1	\$ 5,853.6	\$ 5,976.6	\$ 6,100.6	\$ 67,258.5
Net Hospital Sources/Uses of Cash	\$ (528.5)	\$ (1,445.8)	\$ (473.1)	\$ (1,378.0)	\$ (1,607.1)	\$ (1,143.7)	\$ (1,916.3)	\$ (1,743.9)	\$ 449.5	\$ (1,424.9)	\$ (1,573.0)	\$ (1,692.6)	\$ (14,477.4)
Non-Hospital Sources													
12 Restricted Cash/Money Market													-
11 Restricted Capital Donations	\$ 66.0	\$ 986.4	\$ 177.6	\$ 51.6	\$ 216.7	\$ -	\$ -	\$ 87.0	\$ -	\$ -	\$ -	\$ -	\$ 1,585.3
12 Parcel Tax Revenue	142.5	-	-	1,612.0	-	446.6	-	-	-	1,754.8	-	-	3,955.9
13 Other Payments	-	-	-	653.0	-	-	-	-	-	-	-	-	653.0
14 IGT Payments	-	-	0.9	-	27.0	-	12,553.3	-	-	550.0	-	1,495.0	14,626.1
15 Distressed Hospital Loan Program	3,100.0	-	-	-	-	-	-	-	-	-	-	-	3,100.0
16 Line of Credit Payoff Funding - New Bank	-	-	-	-	1,900.0	-	-	-	-	-	-	-	1,900.0
17 Line of Credit Draw - New Bank	-	-	-	-	5,400.0	-	-	-	-	-	-	-	5,400.0
18 Sub-Total Non-Hospital Sources	\$ 3,308.4	\$ 986.4	\$ 178.4	\$ 2,316.6	\$ 7,543.6	\$ 446.6	\$ 12,553.3	\$ 87.0	\$ -	\$ 2,304.8	\$ -	\$ 1,495.0	\$ 31,220.3
Non-Hospital Uses of Cash													
19 IGT Matching Fee Payments	\$ -	\$ -	\$ -	\$ -	\$ 5,157.6	\$ -	\$ -	\$ -	\$ 230.2	\$ 409.9	\$ 86.5	\$ -	\$ 5,884.2
20 Line of Credit Payoff - US Bank LOC	3,100.0	-	-	-	1,895.5	-	-	-	-	-	-	-	4,995.5
21 Line of Credit Repayment - New LOC	-	-	-	-	-	-	5,400.0	-	-	-	-	-	5,400.0
22 Sub-Total Non-Hospital Uses of Cash	\$ 3,100.0	\$ -	\$ -	\$ -	\$ 7,053.1	\$ -	\$ 5,400.0	\$ -	\$ 230.2	\$ 409.9	\$ 86.5	\$ -	\$ 16,279.7
23 Net Non-Hospital Sources/Uses of Cash	\$ 208.4	\$ 986.4	\$ 178.4	\$ 2,316.6	\$ 490.5	\$ 446.6	\$ 7,153.3	\$ 87.0	\$ (230.2)	\$ 1,894.9	\$ (86.5)	\$ 1,495.0	\$ 14,940.6
24 Net Sources/Uses	\$ (320.1)	\$ (459.4)	\$ (294.7)	\$ 938.6	\$ (1,116.5)	\$ (697.1)	\$ 5,237.1	\$ (1,656.9)	\$ 219.3	\$ 470.0	\$ (1,659.5)	\$ (197.6)	\$ 463.2
25 Total Cash at beginning of period	\$ 3,748.6	\$ 3,428.5	\$ 2,969.1	\$ 2,674.5	\$ 3,613.0	\$ 2,496.5	\$ 1,799.4	\$ 7,036.5	\$ 5,379.6	\$ 5,598.9	\$ 6,068.9	\$ 4,409.4	
26 Total Cash at End of Period	\$ 3,428.5	\$ 2,969.1	\$ 2,674.5	\$ 3,613.0	\$ 2,496.5	\$ 1,799.4	\$ 7,036.5	\$ 5,379.6	\$ 5,598.9	\$ 6,068.9	\$ 4,409.4	\$ 4,211.8	
27 Days of Cash on Hand at End of Month	22.0	19.0	17.1	23.2	16.0	11.5	45.1	34.5	35.9	38.9	28.3	28.1	

Sonoma Valley Health Care District

Key Performance Indicators | Volumes & Statistics

For the Period Ended March 31, 2025

	Current Month				Year-To- Date							
	Actual	Budget	Var	%	YTD Actual	YTD Budget	Var	%	PYTD Actual	Var	%	
Inpatient Volume												
Acute Patient Days	337	277	60	22%	2,332	2,381	(49)	-2%	2,314	18	1%	
Acute Discharges	82	72	10	13%	616	650	(34)	-5%	629	(13)	-2%	
Average Length of Stay	4.1	3.8	0.3	7%	3.8	3.7	0.1	3%	3.7	0.1	3%	
Average Daily Census	10.9	8.9	1.9	22%	8.5	8.7	(0.2)	-2%	8.4	0	1%	
Surgical Volume												
IP Surgeries	13	10	3	24%	84	93	(9)	-10%	119	(35)	-29%	
OP Surgeries	163	150	13	9%	1,199	1,201	(2)	0%	1,305	(106)	-8%	
Total Surgeries	176	160	16	10%	1,283	1,294	(11)	-1%	1,424	(141)	-10%	
Other Outpatient Activity												
Total Outpatient Visits	5,894	5,100	794	16%	51,184	45,900	5,284	12%	46,546	4,638	10%	
Emergency Room Visits	926	960	(34)	-4%	8,273	7,690	583	8%	7,624	649	9%	
Payor Mix												
	Actual	Budget	%		Actual	Budget	%					
Medicare	35.4%	37.7%	-2.3%		37.0%	37.8%	-0.8%					
Medicare Mgd Care	22.7%	18.2%	4.5%		20.9%	18.3%	2.6%					
Medi-Cal	17.8%	16.2%	1.6%		18.2%	16.2%	2.0%					
Commercial	20.6%	23.9%	-3.3%		20.6%	23.8%	-3.2%					
Other	3.5%	3.9%	-0.4%		3.2%	3.9%	-0.6%					
Total	100.0%	100.0%			100.0%	100.0%						

Payor Mix calculated based on gross revenues

Department	Most Recent Six Months								YoY Monthly Averages			
	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Last 6 Months	FY25	FY24	Chg	% Chg
Lab	1,269	1,443	1,328	1,211	1,461	1,189	1,372		1,328	1,297	31	2%
Medical Imaging	878	1,019	791	917	1,122	980	983		951	927	25	3%
Physical Therapy	1,411	1,481	1,278	1,337	1,500	1,412	1,395		1,406	1,154	252	22%
CT Scanner	458	472	442	426	435	423	428		440	380	60	16%
Occ. Health	162	255	252	229	251	259	338		260	282	(22)	-8%
Mammography	215	275	234	230	287	260	266		243	240	3	1%
Occ. Therapy	294	205	167	210	190	159	205		205	205	(0)	0%
Ultrasound	233	252	183	163	235	206	214		218	217	1	0%
Wound Care	209	277	236	254	280	264	267		248	177	71	40%
MRI	182	222	151	190	163	176	191		176	131	45	34%
ECHO	141	147	110	89	104	148	145		123	115	9	7%
Speech Therapy	66	69	31	69	80	65	57		66	49	16	33%
Other	26	30	19	8	28	24	33		24	20	4	20%
TOTAL	5,544	6,147	5,222	5,333	6,136	5,565	5,894		5,687	5,195	492	9%
Emergency Room	862	894	814	972	993	873	926		918	868	50	6%

Sonoma Valley Hospital | FY25 Business Plan Tracker

ATTACHMENT E

Through March 2025																	
Initiative	Investment	Measurable Outcome *	Financial Impact	Volumes / Impact	July	August	September	October	November	December	January	February	March	April	May	June	YTD
3T MRI	\$1 Million (Temp Trailer)	MRI Exams Incremental Growth over Baseline (>120 scans/month)	Incremental Revenue \$1,250,000	VOLUMES	*3T went live August 2023												
				Baseline (FY24)	95	95	95	95	95	95	95	95	95	95	95	95	855
				FY25 Budget	178	196	184	214	215	215	225	225	230	235	240	240	1,881
				FY25 Actual	130	182	182	222	151	190	163	176	191				1,587
				Actual vs. Budget	(48)	(14)	(2)	8	(64)	(25)	(62)	(49)	(39)				(294)
					↓	↓	↓	↑	↓	↓	↓	↓	↓				↓
				FINANCIAL IMPACT INCREMENTAL REVENUE													
				FY25 Budgeted	\$ 71,400	\$ 86,300	\$ 76,100	\$ 102,200	\$ 103,000	\$ 103,000	\$ 111,600	\$ 111,600	\$ 115,900	\$ 120,100	\$ 124,400	\$ 124,400	\$ 881,100
				FY25 Actual	\$ 30,000	\$ 74,700	\$ 74,700	\$ 109,000	\$ 48,100	\$ 81,500	\$ 58,400	\$ 69,500	\$ 82,400				\$ 628,300
				Actual vs. Budget	\$ (41,400)	\$ (11,600)	\$ (1,400)	\$ 6,800	\$ (54,900)	\$ (21,500)	\$ (53,200)	\$ (42,100)	\$ (33,500)				\$ (252,800)
	↓	↓	↓	↑	↓	↓	↓	↓	↓				↓				
Physical Therapy Expansion	\$2.3 Million	Patient Visits 25% growth over FY24 baseline (50% starting in January)	Incremental Revenue \$475,000	VOLUMES													
				Baseline (FY24)				1,100	1,100	1,100	1,100	1,100	1,100	1,100	1,100	1,100	6,600
				FY25 Budgeted				1,100	1,100	1,100	1,590	1,590	1,590	1,590	1,590	1,590	8,070
				FY25 Actual				1,481	1,278	1,337	1,500	1,412	1,395				8,403
				Actual vs. Budget	-	-	-	381	178	237	(90)	(178)	(195)				333
								↑	↑	↑	↓	↓	↓				↑
				FINANCIAL IMPACT INCREMENTAL REVENUE													
				FY25 Budgeted				\$ -	\$ -	\$ -	\$ 56,400	\$ 56,400	\$ 56,400	\$ 56,400	\$ 56,400	\$ 56,400	\$ 169,200
				FY25 Actual				\$ 43,800	\$ 20,500	\$ 27,300	\$ 46,000	\$ 35,900	\$ 33,900				\$ 207,400
				Actual vs. Budget				43,800	20,500	27,300	(10,400)	(20,500)	(22,500)				\$ 38,200
				↑	↑	↑	↓	↓	↓				↑				
Orthopedist Recruit	TBD	Surgical Cases Exceed 190 surgeries (16/month)	Incremental Revenue \$1,615,000	VOLUMES	*Started performing surgeries late August24												
				Baseline (FY24)	-	-	-	-	-	-	-	-	-	-	-	-	-
				FY25 Budgeted	5	5	10	10	15	15	15	20	20	25	25	25	115
				FY25 Actual	-	11	15	18	15	11	22	15	21				128
				Actual vs. Budget	(5)	6	5	8	-	(4)	7	(5)	1				13
					↓	↑	↑	↑	-	↓	↑	↓	↑				↑
				FINANCIAL IMPACT INCREMENTAL REVENUE													
				FY25 Budgeted	\$ 35,000	\$ 35,000	\$ 70,000	\$ 70,000	\$ 105,000	\$ 105,000	\$ 105,000	\$ 140,000	\$ 140,000	\$ 175,000	\$ 175,000	\$ 175,000	\$ 805,000
				FY25 Actual	\$ -	\$ 77,000	\$ 105,000	\$ 126,000	\$ 105,000	\$ 77,000	\$ 154,000	\$ 105,000	\$ 147,000				\$ 896,000
				Actual vs. Budget	\$ (35,000)	\$ 42,000	\$ 35,000	\$ 56,000	\$ -	\$ (28,000)	\$ 49,000	\$ (35,000)	\$ 7,000				\$ 91,000
	↓	↑	↑	↑	-	↓	↑	↓	↑				↑				
ROSA Robot Orthopedic Cases	TBD Incremental Operational Costs	ROSA Joint Replacement Volumes Exceed 124 surgeries over 12 month period (~10/month)	Operational Costs \$ -	VOLUMES													
				FY25 Target								6	6	6	6	6	12
				FY25 Actual								4	7				11
				Actual vs. Target								(2)	1				(1)
												↓	↑				↓
				FINANCIAL IMPACT													
				ROSA Lease Cost								\$ (2,500)	\$ 1,250	\$ -	\$ -	\$ -	\$ (1,250)
				Implant Supply Savings								\$ 8,060	\$ 10,400				\$ 18,460
				Rebate Savings (savings will kick-in once total annual Zimmer spend exceeds \$500,000)								\$ -	\$ -				\$ -
				Actual vs. Target								\$ 5,560	\$ 11,650				\$ 17,210
									↑	↑				↑			
GRAND TOTAL Actual vs. Budget					\$ (76,400)	\$ 30,400	\$ 33,600	\$ 106,600	\$ (34,400)	\$ (22,200)	\$ (14,600)	\$ (92,040)	\$ (37,350)	\$ -	\$ -	\$ -	\$ (106,390)
					↓	↑	↑	↑	↓	↓	↓	↓	↓				↓