



*Board of Directors
Meeting Agenda Packet*

May 8, 2023



Board of Directors

Linda Greer, RN, Chair
Jeffrey D. Griffith, EMT-P, Vice Chair
Laura Barry, Treasurer
Theresa Corrales, RN, Secretary
John Clark, Director
Laurie Edwards-Tate, MS, Director
Michael Pacheco, Director

Diane Hansen, President and CEO

Regular meetings of the Board of Directors are held on the second Monday of each month at 6:30 p.m., unless indicated otherwise.

For an agenda, locations or further information please call (760) 740-6375 or visit our website at www.palomarhealth.org

Our Mission

To heal, comfort, and promote health
in the communities we serve

Our Vision

Palomar Health will be the health system of choice for patients, physicians and employees, recognized nationally for the highest quality of clinical care and access to comprehensive services

Our Values

Compassion - Providing comfort and care
Integrity - Doing the right thing for the right reason
Teamwork - Working together toward shared goals

Excellence - Aspiring to be the best
Service - Serving others and our community
Trust - Delivering on promises

POSTED
Friday
May 5, 2023

BOARD OF DIRECTORS MEETING

AGENDA

Monday, May 8, 2023
6:30 p.m.

PLEASE SEE PAGE 3 FOR MEETING LOCATION

The Board may take action on any of the items listed below, unless the item is specifically labeled "Informational Only"				Time	Form A Page	Target
CALL TO ORDER						6:30
1.	ESTABLISHMENT OF QUORUM			2	-	6:32
2.	OPENING CEREMONY			3		6:35
	a. Pledge of Allegiance to the Flag					
3.	PUBLIC COMMENTS¹			30	-	7:05
4.	PUBLIC HEARING REGARDING BOARD MEMBER COMPENSATION INCREASE			15		7:20
5.	PRESENTATIONS – Informational Only					
	a. Patient Experience Moment			5		7:25
	b. Physician Updates Presentation			5		7:30
6.	APPROVAL OF MINUTES (ADD A)			5		7:35
	a. Special Session Board of Directors Meeting – Monday, April 10, 2023 (Pp 18-19)				2	
	b. Board of Directors Meeting - Monday, April 10, 2023 (Pp 20-26)				3	
7.	APPROVAL OF AGENDA to accept the Consent Items as listed (ADD B)			5		7:40
	a. Palomar Medical Center Escondido Medical Staff Credentialing and Reappointments (Pp 28-30)				4	
	b. Palomar Medical Center Poway Medical Staff Credentialing and Reappointments (Pp 31-51)				5	
	c. Ophthalmology Core Privilege Checklist – (Redline Pp 52-58, Clean Pp 59-65)				6	
	d. Vascular Surgery Core Privilege Checklist – (Redline Pp 66-70, Clean Pp 71-74)				7	
	e. Certified Nurse Midwife Core Privilege Checklist – (Redline Pp 75-79, Clean Pp 80-84)				8	
	f. Physician Agreements - Informational Only (ADD C Pp 85-131)				9-10	
	g. March Financials – Informational Only (ADD D Pp 132-157)				11	
8.	REPORTS – Informational Only					
	a. Medical Staff					
	I. Palomar Medical Center Escondido – Andrew Nguyen, MD			5		7:45
	II. Palomar Medical Center Poway – Sam Filiciotto, MD			5		7:50
	b. Administration					
	I. Chair of the Palomar Health Foundation – Kirk Effinger			5		7:55
	II. President and CEO – Diane Hansen			5		8:00
	III. Chair of the Board – Linda Greer, RN			5		8:05
9.	APPROVAL of BYLAWS, CHARTERS, RESOLUTIONS (ADD E)			5		8:10
	Agenda Item	Committee or Dept.	Action			
	a. Resolution No. 05.08.23(01)-06 Resolution of the Board of Directors of Palomar Health Finding The Need For Up To Six Compensable Meetings Per Month For The Effective Operation Of The District (Pp 159-161)	Legal	Review/Approve		12	
	b. Resolution No. 05.08.23(02)-07 Ordinance of the Board of Directors of Palomar Health Providing for a Five Percent	Legal	Review/Approve		13	

	Increase in Board Member Compensation for Attendance at Board Meetings <i>(Pp 162-164)</i>				
	c. Resolution No. 05.08.23(03)-08 Resolution of the Board of Directors of Palomar Health Providing for Expenditure and Requisition Approval Authority <i>(ADD F Pp 165-172)</i>	Finance	Review/Approve		14
	d. Resolution No. 05.08.23(04)-09 Resolution of the Board of Directors of Palomar Health Authorizing the Investment of Monies in the Local Agency Investment Fund <i>(Pp 173-174)</i>	Finance	Review/Approve		15
	e. Board Member Facility Visitation Policy <i>(Redline Pp 175, Clean Pp 176)</i>	Governance	Review/Approve		16
10.	COMMITTEE REPORTS – Informational Only <i>(ADD G)</i>			5	8:15
	a. Audit & Compliance Committee – Linda Greer, Committee Chair <i>(Pp 178)</i>				
	b. Community Relations Committee – Terry Corrales, Committee Chair <i>(Pp 179)</i>				
	c. Finance Committee – Laura Barry, Committee Chair <i>(Pp 180)</i>				
	d. Governance Committee – Jeff Griffith, Committee Chair <i>(Pp 181)</i>				
	e. Human Resources Committee – Terry Corrales, Committee Chair <i>(No Meeting in April)</i>				
	f. Quality Review Committee – Linda Greer, Committee Chair <i>(No Meeting in April)</i>				
	g. Strategic & Facilities Planning Committee – Michael Pacheco, Committee Chair <i>(No Meeting in April)</i>				
FINAL ADJOURNMENT					8:15

NOTE: If you have a disability, please notify us by calling 760.740.6375, 72 hours prior to the event so that we may provide reasonable accommodations

¹ 3 minutes allowed per speaker with a cumulative total of 9 minutes per group.

For further details, see Request for Public Comment Process and Policy available by clicking on or copying the URL below into your browser or page 4 of agenda.

<https://www.palomarhealth.org/board-of-directors/meetings>

[Public Comments and Attendance at Public Board Meetings](#)



Board of Directors Meeting Location Options

Palomar Medical Center Escondido
1st Floor Conference Center
2185 Citracado Parkway, Escondido, CA 92029

- **Committee members who are elected members of the Board of Directors will attend at this location, unless otherwise noticed below**
- **Elected members of the Board of Directors who are not members of the Committee and wish only to observe, non-Board member attendees, and members of the public may also attend at this location**

<https://www.microsoft.com/en-us/microsoft-teams/join-a-meeting?rtc=1>

Meeting ID: 292 740 851 974

or

Dial in using your phone at 929.352.2216; Access Code: 896 226 868#¹

- **Elected members of the Board of Directors who are not members of the Committee and wish only to observe, non-Board member attendees and members of the public may attend the meeting virtually utilizing the above link**

¹ *New to Microsoft Teams? Get the app now and be ready when your first meeting starts: [Download Teams](#)*

DocID: 21790
 Revision: 9
 Status: Official

Source:
 Administrative
 Board of Directors

Applies to Facilities:
 All Palomar Health Facilities

Applies to Departments:
 Board of Directors

Policy: Public Comments and Attendance at Public Board Meetings

I. PURPOSE:

A. It is the intention of the Palomar Health Board of Directors to hear public comment about any topic that is under its jurisdiction. This policy is intended to provide guidelines in the interest of conducting orderly, open public meetings while ensuring that the public is afforded ample opportunity to attend and to address the board at any meetings of the whole board or board committees.

II. DEFINITIONS:

A. None defined.

III. TEXT / STANDARDS OF PRACTICE:

- A. There will be one-time period allotted for public comment at the start of the public meeting. Should the chair determine that further public comment is required during a public meeting, the chair can call for such additional public comment immediately prior to the adjournment of the public meeting. Members of the public who wish to address the Board are asked to complete a [Request for Public Comment form](#) and submit to the Board Assistant prior to or during the meeting. The information requested shall be limited to name, address, phone number and subject, however, the requesting public member shall submit the requested information voluntarily. It will not be a condition of speaking.
- B. Should Board action be requested, it is encouraged that the public requestor include the request on the *Request for Public Comment* as well. Any member of the public who is speaking is encouraged to submit written copies of the presentation. C. The subject matter of any speaker must be germane to Palomar Health's jurisdiction.
- D. Based solely on the number of speaking requests, the Board will set the time allowed for each speaker prior to the public sections of the meeting, but usually will not exceed 3 minutes per speaker, with a cumulative total of thirty minutes.
- E. Questions or comments will be entertained during the "Public Comments" section on the agenda. All public comments will be limited to the designated times, including at all board meetings, committee meetings and board workshops.
- F. All voting and non-voting members of a Board committee will be seated at the table. Name placards will be created as placeholders for those seats for Board members, committee members, staff, and scribes. Any other attendees, staff or public, are welcome to sit at seats that do not have name placards, as well as on any other chairs in the room. For Palomar Health Board meetings, members of the public will sit in a seating area designated for the public.
- G. In the event of a disturbance that is sufficient to impede the proceedings, all persons may be excluded with the exception of newspaper personnel who were not involved in the disturbance in question.
- H. The public shall be afforded those rights listed below (Government Code Section 54953 and 54954).
 - 1. To receive appropriate notice of meetings;
 - 2. To attend with no pre-conditions to attendance;
 - 3. To testify within reasonable limits prior to ordering consideration of the subject in question;
 - 4. To know the result of any ballots cast;
 - 5. To broadcast or record proceedings (conditional on lack of disruption to meeting);
 - 6. To review recordings of meetings within thirty days of recording; minutes to be Board approved before release;
 - 7. To publicly criticize Palomar Health or the Board; and
 - 8. To review without delay agendas of all public meetings and any other writings distributed at the meeting. I. This policy will be reviewed and updated as required or at least every three years.

IV. ADDENDUM:

Original Document Date: 2/94
 Reviewed: 8/95; 1/99; 9/05
 Revision Number: 1 Dated: 9/20/05

Source Administrator Hernandez, Lisa

Document Owner DeBruin, Kevin

Collaborators: Carla Albright, Deanna Peterson, Deborah Hollick, Douglas Moir, Jami Piearson, Jeffrey Griffith, Julie H Avila, Kelly Wells, Laurie Edwards-Tate, Megan Strole, Nancy Calabria, Nanette Irwin, Richard Engel, Sally Valle, Tanya L Howell, Thomas Kumura

Reviewers

Approvals

- Committees: (10/12/2022) Policies & Procedures

- Signers: Kevin DeBruin

Original Effective Date Kevin DeBruin, Chief Legal Officer (10/25/2022 09:21AM PST)

Revised Reviewed [09/20/2005 Rev. 1], [03/13/2009 Rev. 2], [04/14/2012 Rev. 3], [05/01/2014 Rev. 4], [02/03/2017 Rev. 5], [04/22/2019 Rev. 6], [07/10/2019 Rev. 7], [12/02/2021 Rev. 8], [10/25/2022 Rev. 9]

Next Review Date 10/24/2025

Attachments:

(REFERENCED BY [Public Comment Form](#)

Paper copies of this document may not be current and should not be relied on for official purposes. The current version is in Lucidoc at

Special Session Minutes Board of Directors Meetings March 13, 2023

TO: Board of Directors

MEETING DATE: Monday, May 8, 2023

FROM: Carla Albright, Assistant to the Board of Directors

Background: The minutes from the April 10, 2023, Special Session Board of Directors meeting are respectfully submitted for approval.

Budget Impact: N/A

Staff Recommendation: Recommend to approve the April 10, 2023, Special Session Board of Directors meeting minutes.

Committee Questions: N/A

COMMITTEE RECOMMENDATION: N/A

Motion:

Individual Action:

Information:

Required Time:

**Minutes
Board of Directors Meetings
April 10, 2023**

TO: Board of Directors

MEETING DATE: Monday, May 8, 2023

FROM: Carla Albright, Assistant to the Board of Directors

Background: The minutes from the April 10, 2023, Regular Board of Directors meeting are respectfully submitted for approval.

Budget Impact: N/A

Staff Recommendation: Recommend to approve the April 10, 2023, Regular Board of Directors meeting minutes.

Committee Questions: N/A

COMMITTEE RECOMMENDATION: N/A

Motion:

Individual Action:

Information:

Required Time:

**Palomar Medical Center Escondido Medical Staff
Credentialing Recommendations**

TO: Board of Directors

MEETING DATE: May 8, 2023

FROM: Kanchan Koirala, M.D., Chief of Staff, Palomar Medical Center Escondido

Background: Credentialing Recommendations from the Medical Executive Committee of Palomar Medical Center Escondido.

Budget Impact: None

Staff Recommendation: Recommend Approval

Committee Questions:

COMMITTEE RECOMMENDATION: Approval

Motion: X

Individual Action:

Information:

Required Time:

**Palomar Medical Center Poway
Medical Staff Credentials Recommendations
April, 2023**

TO: Board of Directors

MEETING DATE: Monday May 8, 2023

FROM: Sam Filiciotto, M.D., Chief of Staff, Palomar Medical Center Poway

Background: Monthly credentials recommendations from the Palomar Medical Center Poway Medical Executive Committee for approval by the Board of Directors.

Budget Impact: None

Staff Recommendation:

Committee Questions:

COMMITTEE RECOMMENDATION: Approval

Motion: X

Individual Action:

Information:

Required Time:

**Palomar Medical Center Escondido/Palomar Medical Center
Poway
Medical Staff Privilege Checklist**

TO: Board of Directors

MEETING DATE: May 8, 2023

FROM: Kanchan Koirala, M.D., Chief of Staff
Palomar Medical Center Escondido

Sam Filiciotto, M.D., Chief of Staff,
Palomar Medical Center Poway

Background: Ophthalmology Core Privilege Checklist: Updated to include new procedures, new criteria, new training. Has been approved at all applicable Medical Staff Department meetings at PMC Poway and PMC Escondido. Includes redlined and final versions.

Budget Impact: None.

Staff Recommendation: Recommend Approval

Committee Questions:

COMMITTEE RECOMMENDATION: Approval

Motion: X

Individual Action:

Information:

Required Time:

**Palomar Medical Center Escondido/Palomar Medical Center
Poway
Medical Staff Privilege Checklist**

TO: Board of Directors

MEETING DATE: May 8, 2023

FROM: Kanchan Koirala, M.D., Chief of Staff
Palomar Medical Center Escondido

Sam Filiciotto, M.D., Chief of Staff,
Palomar Medical Center Poway

Background: Vascular Surgery Core Privilege Checklist: Updated to include new procedures, new criteria, new training. Has been approved at all applicable Medical Staff Department meetings at PMC Poway and PMC Escondido. Includes redlined and final versions.

Budget Impact: None.

Staff Recommendation: Recommend Approval

Committee Questions:

COMMITTEE RECOMMENDATION: Approval

Motion: X

Individual Action:

Information:

Required Time:

**Palomar Medical Center Escondido
Medical Staff Privilege Checklist**

TO: Board of Directors

MEETING DATE: May 8, 2023

FROM: Kanchan Koirala, M.D., Chief of Staff
Palomar Medical Center Escondido

Background: Certified Nurse Midwife Core Privilege Checklist: Updated to current, best practices. Has been approved at all applicable Medical Staff Department meetings at PMC Escondido. Includes redlined and final versions.

Budget Impact: None.

Staff Recommendation: Recommend Approval

Committee Questions:

COMMITTEE RECOMMENDATION: Approval

Motion: X

Individual Action:

Information:

Required Time:

EXECUTED, BUDGETED, ROUTINE PHYSICIAN AGREEMENTS

TO: Board of Directors

MEETING DATE: Monday, May 8, 2023

FROM: Board Finance Committee
Thursday, May 4, 2023

BY: Laura Barry, Chair, Board Finance Committee

Background: The following Executed, Budgeted, Routine Physician Agreement became effective as noted below:

PHYSICIAN/GROUP	TYPE OF AGREEMENT
June 2022	
<ul style="list-style-type: none"> • Palomar Hospital Partners, Inc. aka Emergent Medical Associates 	<ul style="list-style-type: none"> • Professional Services Agreement – Acute Rehabilitation & Behavioral Services
September 2022	
<ul style="list-style-type: none"> • Escondido Pulmonary & Sleep Specialists, Inc. – Services of Frank Bender, MD 	<ul style="list-style-type: none"> • Amendment 2 to Medical Director Agreement – Respiratory & Pulmonary Services
October 2022	
<ul style="list-style-type: none"> • James Bried, MD 	<ul style="list-style-type: none"> • Amendment 1 to Medical Director Agreement – Orthopedic Services – PMC Poway
<ul style="list-style-type: none"> • Palomar Health Medical Group 	<ul style="list-style-type: none"> • Professional Services & Medical Director Agreement – Radiation Oncology
<ul style="list-style-type: none"> • Palomar Health Medical Group 	<ul style="list-style-type: none"> • Call Coverage Agreement – Electrophysiology
<ul style="list-style-type: none"> • The Neurology Center of Southern California – Services of Remia Paduga, MD 	<ul style="list-style-type: none"> • Amendment 2 to Medical Director Agreement – Neuroscience Acute Care & Stroke Program
November 2022	
<ul style="list-style-type: none"> • Palomar Health Medical Group 	<ul style="list-style-type: none"> • Amendment 1 to Anesthesia Coverage Agreement
December 2022	
<ul style="list-style-type: none"> • Srinivas Iyengar, MD 	<ul style="list-style-type: none"> • Call Coverage Agreement – Ophthalmology
<ul style="list-style-type: none"> • Brian Le, MD 	<ul style="list-style-type: none"> • Call Coverage Agreement – Ophthalmology
<ul style="list-style-type: none"> • Lillian Lee, MD 	<ul style="list-style-type: none"> • Call Coverage Agreement – Ophthalmology
<ul style="list-style-type: none"> • Nikolas London, MD 	<ul style="list-style-type: none"> • Call Coverage Agreement – Ophthalmology
<ul style="list-style-type: none"> • Reza Khoshini, MD 	<ul style="list-style-type: none"> • Amendment 1 to Professional Services Agreement – EUS Procedures - Gastrointestinal
January 2023	
<ul style="list-style-type: none"> • Maria Castillo, MD 	<ul style="list-style-type: none"> • Department Chair Agreement – OB/GYN – PMC Poway
<ul style="list-style-type: none"> • Sam Filiciotto, MD, Inc. 	<ul style="list-style-type: none"> • Chief of Staff Agreement – PMC Poway
<ul style="list-style-type: none"> • Mark Goldsworthy, MD, Inc. 	<ul style="list-style-type: none"> • Chief of Staff-Elect Agreement – PMC Poway

EXECUTED, BUDGETED, ROUTINE PHYSICIAN AGREEMENTS

PHYSICIAN/GROUP	TYPE OF AGREEMENT
<ul style="list-style-type: none"> • Mark Goldsworthy, MD, Inc. 	<ul style="list-style-type: none"> • Quality Management Committee Chair Agreement – PMC Poway
<ul style="list-style-type: none"> • Hematology Oncology Partners in Excellence – Services of Hardeep S. Phull, MD 	<ul style="list-style-type: none"> • Amendment 1 to Medical Director Agreement – Oncology Infusion Services
<ul style="list-style-type: none"> • Jason Keri, MD 	<ul style="list-style-type: none"> • Department Chair Agreement – Psychiatry – PMC Poway
<ul style="list-style-type: none"> • Palomar Medical Center Escondido Medical Staff 	<ul style="list-style-type: none"> • Bulk Stipend Agreement – Department Chairs
<ul style="list-style-type: none"> • Rady Children’s Chadwick Center 	<ul style="list-style-type: none"> • Amendment 2 to Coverage Agreement – Pediatric SART
<ul style="list-style-type: none"> • Paul Ritchie, MD 	<ul style="list-style-type: none"> • Department Chair Agreement – Anesthesia Services – PMC Poway
<ul style="list-style-type: none"> • Robert Stein, MD 	<ul style="list-style-type: none"> • Medical Director Agreement – Cardiac Rehabilitation
April 2023	
<ul style="list-style-type: none"> • OB Hospitalist Group aka OBHG California, PC 	<ul style="list-style-type: none"> • Amendment 2 – Professional Services Agreement

The standard Form A’s and Abstract Tables for each are included as *Addendum C*.

Staff Recommendation: Approval

COMMITTEE RECOMMENDATION: The Board Finance Committee recommends approval of the Executed Budgeted Routine Physician Agreements as presented. Approval recommended 6 to 0 by the Committee; Board members: 3 to 0; Absent: 0.

Motion: X

Individual Action:

Information:

Required Time:

March 2023 and YTD FY2023 Financial Report

TO: Board of Directors

MEETING DATE: Monday, May 8, 2023

FROM: Board Finance Committee
Thursday, May 4, 2023

BY: Laura Barry, Chair, Board Finance Committee

Background: The Board Financial Report (unaudited) for March 2023 and YTD FY2023, *Addendum D*, is submitted for the Finance Committee's approval.

Budget Impact: N/A

Staff Recommendation: Approval

Committee Questions:

COMMITTEE RECOMMENDATION: The Board Finance Committee recommends approval of the Board Financial Report (unaudited) for March 2023 and YTD FY2023 as presented. Approval recommended 5 to 0 by the Committee; Board members: 3 to 0; Absent: 1.

Motion: X

Individual Action:

Information:

Required Time:

**Palomar Health Board of Directors
Resolution
Six Compensable Meetings per Month**

TO: Board of Directors

MEETING DATE: Monday, May 8, 2023

FROM: Kevin DeBruin, Chief Legal Officer

Background: Pursuant to California Health & Safety Code § 32103(a), the Palomar Health Board of Directors (“Board”) may be compensated for up to six (6) meetings in a calendar month, provided that the Board makes annual written findings that more than 5 meetings per month are necessary for the effective operation of the District. California Health & Safety Code § 32103 requires the Board to make initial, and then annual findings, supported by substantial evidence, as to why more than 5 compensable Board meetings per month are necessary for the effective operation of the District.

Budget Impact: N/A

Staff Recommendation: Staff recommends the approval of the Resolution of the Board of Directors of Palomar Health finding the need for up to six compensable meetings per month for the effective operation of the District to show the substantial evidence required by California Health & Safety Code § 32103.

Committee Questions: N/A

COMMITTEE RECOMMENDATION:

Motion: X

Individual Action:

Information:

Required Time:

RESOLUTION NO. 05.08.23(02)-07

**ORDINANCE OF THE BOARD OF DIRECTORS OF PALOMAR HEALTH
PROVIDING FOR A FIVE PERCENT INCREASE IN BOARD MEMBER COMPENSATION
AT BOARD MEETINGS**

TO: Board of Directors
MEETING DATE: Monday, May 8, 2023
FROM: Kevin DeBruin, Chief Legal Officer

Background: Pursuant to California Health and Safety Code Section 32103, the Palomar Health Board of Directors may, by ordinance adopted pursuant to the California Water Code Section 20200 *et seq.*, increase the amount of compensation received by Directors for attendance at Board meetings not exceed an amount equal to 5% for each calendar year following the operative date of the last adjustment.

Budget Impact: TBD

Staff Recommendation: Staff recommend the Board approve Resolution No. 05.08.23(02)-07 adopting the Ordinance in accordance with the requirements of the California Water Code Section 20200 *et seq.*

Committee Questions: N/A

COMMITTEE RECOMMENDATION:

Motion: X

Individual Action:

Information:

Required Time:

Expenditure & Requisition Approval Authority Procedure

TO: Board of Directors

MEETING DATE: Monday, May 8, 2023

FROM: Board Finance Committee
Thursday, May 4, 2023

BY: Laura Barry, Chair, Board Finance Committee

Background: Palomar Health’s Expenditure and Requisition Approval Authority Procedure—Lucidoc No. 14779—(“ERAA Procedure”) specifies the monetary limits established by the Board of Directors (“Board”) for the CEO or her designee, as specified by the ERAA Procedure, related to the authority to approve any capital transaction, including non-budgeted construction-in-progress transaction, operating non-budgeted transaction, emergency non-budgeted transaction, emergency or non-budgeted construction-in-progress transaction, or a settlement of a claim. The Board may increase these specific monetary limits. Legal counsel recommends any increase to the monetary limits be approved by the Board via resolution, and such increases be memorialized in an updated ERAA procedure. The ERAA procedure is presented as **Addendum F** in both redline and clean format, along with the proposed Resolution.

Budget Impact: N/A

Staff Recommendation: Staff recommended that the Finance Committee recommend the proposed increases to the monetary limits of the ERAA Procedure to the Board, and such increases be approved by the Board via resolution and memorialized in an updated ERAA procedure.

Committee Questions:

COMMITTEE RECOMMENDATION: The Board Finance Committee recommends approval of proposed increases to the monetary limits of the ERAA Procedure, with such increases to be presented to the Board for approval via resolution and an updated ERAA Procedure. Approval recommended 5 to 0 by the Committee; Board members: 3 to 0; Absent: 1.

Motion:

Individual Action: X

Information:

Required Time:

**Resolution No. 05.08.23(04)-09
Authorizing the Investment of Monies in the
Local Agency Investment Fund**

TO: Board of Directors

MEETING DATE: Monday, May 8, 2023

FROM: Hugh King, Chief Financial Officer

Background: Due to organizational changes in the fairly recent past, the Local Agency Investment Fund (LAIF), an investment alternative created by the State of California that allows special districts the opportunity to participate in a major portfolio, has requested that we update the information that the agency has on file regarding subordinate officers of the district. They have requested that the Board pass a new resolution designating subordinate officers with specific authority to order the deposit or withdrawal of monies in the LAIF.

Resolution No. 05.08.23(04)-09 designates the same officers as Board Resolution No. 04.11.22(01)-08 Designating Subordinate Officers of the District, utilizing the format required by LAIF to make it specific to their fund.

Budget Impact: N/A

Staff Recommendation: Staff recommends approval of Resolution No. 05.08.23(04)-09 Authorizing Investment of Monies in the Local Agency Investment Fund.

Committee Questions:

COMMITTEE RECOMMENDATION: This request was received by Management after the May 4th Board Finance Committee packet had been posted and the deadline for editing had passed. In the interests of time, Management is requesting that the Board act without prior review by that Committee.

Motion:

Individual Action: X

Information:

Required Time:

**Board Governance Committee
Policy Development:
Board Member Facility Visitation Policy
Board of Directors**

TO: Board of Directors

MEETING DATE: Monday, May 8, 2023

FROM: Kevin DeBruin, Chief Legal Officer

Background: The Palomar Health Board of Directors (“Board”) is committed to the highest standards of patient privacy, confidentiality, and safety as required by all applicable state or federal legal authorities; the most stringent of these will prevail, depending on the circumstances, as required by law. To this end, and balancing Board and individual Board Member requests for access to facility, provider, and patient resources in keeping with each’s oversight and fiduciary duties, as applicable, the Board hereby adopts a Board Member Facility Visitation Policy.

Budget Impact: N/A

Staff Recommendation: Staff recommends the adoption of the Board Member Facility Visitation Policy of the Board of Directors.

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion: X

Individual Action:

Information:

Required Time:

ADDENDUM A

SPECIAL SESSION BOARD OF DIRECTOR’S MEETING MINUTES – MONDAY, APRIL 10, 2023	
AGENDA ITEM	CONCLUSION / ACTION
<ul style="list-style-type: none"> DISCUSSION 	
I. CALL TO ORDER	
<p>The meeting, which was held at Palomar Medical Center Escondido, 1st Floor Conference Room at 2185 Citracado Parkway, Escondido, CA. 92029, and called to order at 5:00 p.m. by Board Vice-Chair Jeff Griffith.</p>	
NOTICE OF MEETING	
<p>Notice of Meeting was posted at the Palomar Health Administrative Office, as well as on the Palomar Health website, on Friday, April 7, 2023, which is consistent with legal requirements.</p>	
II. ESTABLISHMENT OF QUORUM	
<p>Quorum comprised of Directors Barry, Clark, Corrales, Griffith, Edwards-Tate, Pacheco Excused Absences: Greer</p>	
III. PUBLIC COMMENTS	
<p>There were no public comments</p>	
IV. PRESENTATIONS	
<p><i>a. Board Education Session – Political Activities on Palomar Health Properties – Informational Only</i></p>	
Empty space for additional content	

SPECIAL SESSION BOARD OF DIRECTOR’S MEETING MINUTES – MONDAY, APRIL 10, 2023

AGENDA ITEM

CONCLUSION / ACTION

- **DISCUSSION**

V. ADJOURNMENT TO CLOSED SESSION

a. Pursuant to California Government Code §54962 and California Health & Safety Code §32155—HEARINGS—EXISTING LITIGATION—Subject matter: Report of Quality Assurance Committee

VI. RE-ADJOURNMENT TO OPEN SESSION

VII. ACTION RESULTING FROM CLOSED SESSION DISCUSSION, IF ANY

b. Pursuant to California Government Code §54962 and California Health & Safety Code §32155—HEARINGS—EXISTING LITIGATION—Subject matter: Report of Quality Assurance Committee

MOTION: By Director Barry, 2nd by Director Edwards-Tate and carried to table the closed session agenda item. Roll call voting was utilized.
 Director Corrales – aye Director Griffith – aye
 Director Greer – absent Director Barry – aye
 Director Clark – aye Director Pacheco – aye
 Director Edwards-Tate – aye
 Vice-Chair Griffith announced that six board members were in favor. None opposed. No abstentions. One absence. Motion approved.

VIII. FINAL ADJOURNMENT

There being no further business, Vice-Chair Griffith adjourned the meeting at 5:37 p.m.

SIGNATURES:

BOARD SECRETARY

Terry Corrales, R.N.

BOARD ASSISTANT

Carla Albright



Board of Directors Meeting Minutes – Monday, April 10, 2023

Agenda Item

- *Discussion*

Conclusion / Action /Follow Up

NOTICE OF MEETING

Notice of Meeting was posted at the Palomar Health Administrative Office; also posted with full agenda packet to the Palomar Health website on Friday, April 7, 2023, which is consistent with legal requirements.

CALL TO ORDER

The meeting, which was held at Palomar Medical Center Escondido, 1st Floor Conference Room at 2185 Citracado Parkway, Escondido, CA. 92029, and called to order at 6:30 p.m. by Board Vice-Chair Jeff Griffith.

1. ESTABLISHMENT OF QUORUM

Quorum comprised of Directors Barry, Clark, Corrales, Edwards-Tate, Griffith, Pacheco
Absences: Greer

2. OPENING CEREMONY – Pledge of Allegiance to the Flag

The Pledge of Allegiance to the Flag was recited in unison.

MISSION AND VISION STATEMENTS

The Palomar Health mission and vision statements are as follows:

- *The mission of Palomar Health is to heal, comfort and promote health in the communities we serve*
- *The vision of Palomar Health is to be the health system of choice for patients, physicians and employees, recognized nationally for the highest quality of clinical care and access to comprehensive services*

Agenda Item

- Discussion

Conclusion / Action /Follow Up

3. PUBLIC COMMENTS

- No public comments

4. PRESENTATIONS

a. Volunteer Program Presentation

- Margaret Mertens, Director of Volunteer Development and Spiritual Care, shared a presentation highlighting the volunteer, spiritual care and gift shop programs that support Palomar Health.

b. Employee Recognition

- Vice-Chair Jeff Griffith and Director Michael Pacheco presented Margaret Mertens with a certificate of appreciation. Volunteer members of Palomar PAWS, Cathy Schulte (Vinca), Stephen Kahn (Zues) and Director Michael Pacheco (Jessie) were also presented certificates of appreciation for their commitment to the program.

5. APPROVAL OF MINUTES

Agenda Item

<ul style="list-style-type: none"> Discussion 	Conclusion / Action /Follow Up
<ul style="list-style-type: none"> a. Special Session Board of Directors Meeting – Monday, March 13, 2023 b. Board of Directors Meeting - Monday, March 13, 2023 	<p>MOTION: By Director Edwards-Tate, 2nd by Director Corrales and carried to approve the Monday, March 13, 2023 Special Session Board of Directors Meeting minutes as presented.</p> <p>Roll call voting was utilized. Director Corrales – aye Director Griffith – aye Director Greer – absent Director Barry – aye Director Clark – aye Director Pacheco – aye Director Edwards-Tate – aye Vice-Chair Griffith announced that six board members were in favor. None opposed. No abstentions. One absence. Motion approved.</p> <p>MOTION: By Director Barry, 2nd by Director Pacheco and carried to approve the Monday, March 13, 2023 Board of Directors Meeting minutes, as presented.</p> <p>Roll call voting was utilized. Director Corrales – aye Director Griffith – aye Director Greer – absent Director Barry – aye Director Clark – aye Director Pacheco – aye Director Edwards-Tate – aye Vice-Chair Griffith announced that six board members were in favor. None opposed. No abstentions. One absence. Motion approved.</p>
<ul style="list-style-type: none"> No discussion 	

Agenda Item

• Discussion	Conclusion / Action /Follow Up
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6. APPROVAL OF AGENDA to accept the Consent Items as listed

<ul style="list-style-type: none"> a. Palomar Medical Center Escondido Medical Staff Credentialing and Reappointments b. Palomar Health Center Poway Medical Staff Credentialing and Reappointments 	<p>MOTION: By Director Barry, 2nd by Director Clark and carried to approve Consent Agenda item A as presented.</p> <p>Roll call voting was utilized. Director Corrales – aye Director Griffith – aye Director Greer – absent Director Barry – aye Director Clark – aye Director Pacheco – aye Director Edwards-Tate – aye Vice-Chair Griffith announced that six board members were in favor. None opposed. No abstention. One absence. Motion approved.</p> <p>MOTION: By Director Clark, 2nd by Director Edwards-Tate and carried to approve Consent Agenda items B as presented.</p> <p>Roll call voting was utilized. Director Corrales – aye Director Griffith – aye Director Greer – absent Director Barry – aye Director Clark – aye Director Pacheco – aye Director Edwards-Tate – aye Vice-Chair Griffith announced that six board members were in favor. None opposed. No abstention. One absence. Motion approved.</p>
<ul style="list-style-type: none"> • No discussion 	

7. REPORTS

a. Medical Staffs

I. Palomar Medical Center Escondido
Palomar Medical Center Escondido Chief of Staff, Dr. Kanchan Koirala, provided a verbal report to the Board of Directors.
II. Palomar Medical Center Poway

Board of Directors Meeting Minutes – Monday, April 10, 2023

Agenda Item

• *Discussion*

Conclusion / Action /Follow Up

Palomar Medical Center Poway Chief of Staff, Dr. Sam Filiciotto, provided a verbal report to the Board of Directors.

b. Administrative

I. President and CEO

Palomar Health President & CEO Diane Hansen provided the following report:

- Recognized the organization for the for the successful Joint Commission Surveys
- Shared a patient experience letter

II. Vice-Chair of the Board

Palomar Health Vice-Chair of the Board Jeff Griffith provided the following report:

- Leadership Conference, April 23rd – April 26th
- Complimented Palomar Health Administration for the positive feedback and results of the recent surveys
- Honored former Board Member Ted Kleiter

8. APPROVAL OF BYLAWS, CHARTERS, RESOLUTIONS

- a. Resolution No. 04.10.23(01)-05 Ordinance of the Board of Directors of Palomar Health Providing for a Five Percent Increase in Board Member Compensation for Attendance at Board Meetings

MOTION: By Director Corrales, 2nd by Director Edwards-Tate and carried to approve and adopt Resolution No. 04.10.23(01)-05 Ordinance of the Board of Directors of Palomar Health Providing for a Five Percent Increase in Board Member Compensation for Attendance at Board Meetings as presented.

Roll call voting was utilized.

Director Corrales – aye Director Griffith – aye
Director Greer – absent Director Barry – aye
Director Clark – aye Director Pacheco – aye
Director Edwards-Tate – abstain
Vice-Chair Griffith announced that five board members were in favor. None opposed. One abstention. One absence. Motion approved.

Board of Directors Meeting Minutes – Monday, April 10, 2023

Agenda Item

• *Discussion*

Conclusion / Action /Follow Up

- Director John Clark inquired why the resolution is only for one year. Chief Legal Officer, Kevin DeBruin, noted the statute provides the guidelines.
- Director Laurie Edwards-Tate prefers to donate the compensation to programs within the organization.
- Vice-Chair Jeff Griffith called for a vote.

9. COMMITTEE REPORTS *(information only unless otherwise noted)*

a. Audit and Compliance Committee

- Through the Chair, committee members present reported it was dark in March

b. Community Relations Committee

- Committee Chair Terry Corrales reported the committee was dark in March

c. Finance Committee

- Committee Chair Laura Barry reported the committee was dark in March

d. Governance Committee

- Committee Chair Jeff Griffith reported the committee was dark in March.

e. Human Resources Committee

- Committee Chair Terry Corrales reported the committee was dark in March

f. Quality Review Committee

- Committee member Laura Barry noted the committee meeting summary was included in the board meeting packet

g. Strategic & Facilities Planning Committee

- Committee Chair Michael Pacheco noted the committee-meeting summary was included in the board meeting packet.

FINAL ADJOURNMENT

- There being no further business, Vice-Chair Griffith adjourned the meeting at 7:42 p.m.

Board of Directors Meeting Minutes – Monday, April 10, 2023

Agenda Item

- Discussion*

Conclusion / Action /Follow Up

Board Secretary

Terry Corrales, R.N.

Signatures:

Board Assistant

Carla Albright

DRAFT

ADDENDUM B

Palomar Medical Center Escondido

2185 Citracado Parkway
Escondido, CA 92029
(442) 281-1005 (760) 233-7810 fax

Medical Staff Services

April 26, 2023

To: Palomar Health Board of Directors

From: Kanchan Koirala, M.D., Chief of Staff
Palomar Medical Center Escondido Medical Executive Committee

Board Meeting Date: May 8, 2023

Subject: Palomar Medical Center Escondido Credentialing Recommendations

Provisional Appointments (05/08/2023 – 04/30/2025)

Allen, Thomas M., M.D. – Emergency Medicine
Chaudhary, Saadia R., M.D. – Diagnostic Radiology
Dashtaei, Ayda, D.O. – General Surgery
Dunn, William M., M.D. – Diagnostic Radiology
Hays, Johnathan C., M.D. – Diagnostic Radiology
Liu, Jiajing, M.D. – Diagnostic Radiology
Touma, Elie, DPM - Podiatry

Advance from Provisional to Active Category

Campbell, Leticia J., M.D. – OB/Gyn (eff. 05/08/2023 – 08/31/2023)
Ellis, Jimmy S., D.O. – OB/Gyn (eff. 06/01/2023 – 05/31/2025)
Masifi, Sheela L., M.D. – Psychiatry (eff. 05/08/2023 – 09/30/2023)
Pevoto, Patrick S., M.D. – OB/Gyn (eff. 05/08/2023 – 10/31/2023)
Quan, Michele G., M.D. – Pulmonary Disease/Critical Care (05/08/2023 – 10/31/2023)

Advance from Provisional to Courtesy Category

Brummel, Kirsta L., D.O. – Ophthalmology (eff. 05/08/2023 – 04/30/2024)
Coelho, Isaias C., M.D. – OB/Gyn (eff. 05/08/2023 – 01/31/2024)
Jennings-Nunez, Chasity D., M.D. – (eff. 05/08/2023 – 09/30/2024)

Additional Privileges

Zakko, Maram F., M.D. – Gastroenterology

- Moderate Sedation Privileges (eff. 05/08/2023-04/30/2025)

Requests for Leave of Absence – 2 year

Ameer, Adnan, M.D. – Gastroenterology, (eff. 01/01/2023-12/31/2024)
 Khattar, Ramni, D.O. – Pulmonary Disease (eff. 04/17/2023-03/31/2025)
 Promer, Katherine E., M.D. – Infectious Disease (eff. 04/01/2023-03/31/2025)
 Wu, Fang, M.D. – Internal Medicine (eff. 04/01/2023-03/31/2025)

Voluntary Resignations

Chan, Philip, M.D. – OB/Gyn, (eff. 05/31/2023)
 DeLong, Lisa, M.D. - OB/Gyn, (eff. 05/31/2023)
 Dombo, Kudzai, M.D. – OB/Gyn, (effective 04/05/2023)
 Geria, Veejay M.D. – Internal Medicine (effective 04/01/2023)
 Jones, Teresa D.O. – Internal Medicine (eff. 02/01/2023)
 Khan, Sidrah M.D. – Internal Medicine (effective 04/11/2023)
 Omens, Erwin M., M.D. – Ophthalmology (effective 03/31/2023)
 Sampath, Neha J., M.D. – Internal Medicine (eff. 09/09/2022)
 Singh, T. Tejpal, M.D. – Diagnostic Radiology (eff. 04/14/2023)
 Tintner, Ron, M.D. – Clinical Neurophysiology (eff. 05/01/2023)
 Valdivia, Leopoldo, D.O. - OB/Gyn, (eff. 05/31/2023)

Allied Health Professional Appointments (05/08/2023 – 04/30/2025)

Gao, Xiudan, RNFA – RN First Assist (sponsoring physicians – list on file)
 Kim, Unja, CNM – Certified Nurse Midwife (sponsoring physician – Dr. Kevin Carnevale, for OBHG)

Reappointment Effective 06/01/2023 – 11/30/2023

Ebrahimi Adib, Tannaz, M.D.	OB/Gyn	Dept. of OB/Gyn	Courtesy
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(Remainder of reappointment)

Reappointments (effective 06/01/2023 – 05/31/2025)

Alvergue, Juan C., M.D.	Cardiovascular Disease	Dept. of Medicine	Active
Bower, Bradley B., M.D.	Internal Medicine	Dept. of Medicine	Affiliate w/Refer & Follow
Cotten, Paul J., M.D.	Anesthesiology	Dept. of Anesthesia	Active
Fatayerji, Aayah N. D.O.	Internal Medicine	Dept. of Medicine	Active
Gara, Naveen, M.D.	Gastroenterology	Dept. of Medicine	Active
Kelly, Thomas F., M.D.	Mat.- Fetal Medicine	Dept. of OB/Gyn	Active
Kim, Philip H., M.D.	Urology	Dept. of Urology	Courtesy

*Category Change from Active to Courtesy

Macleay, Lachlan Jr., M.D.	Pathology	Dept. of Pathology	Active
Orr, Robert W., M.D.	Cardiovascular Disease	Dept. of Medicine	Active
Rivera, Marcelo R., M.D.	Internal Medicine	Dept. of Medicine	Affiliate w/Refer & Follow
Rivera, Tania L., M.D.	Rheumatology	Dept. of Medicine	Consulting
Sahagian, Gregory A., M.D.	Neurology	Dept. of Medicine	Affiliate w/No Clinical Privileges

*Category Change from Active to Affiliate

Sorensen, Eva L., M.D.	Neurology	Dept. of Medicine	Active
Tarzy, Neil T., M.D.	Family Practice	Dept. of Family Prac.	Affiliate w/Refer & Follow
Thalken, Gregory, M.D.	Diagnostic Radiology	Dept. of Radiology	Active
Wolf, Richard B., D.O.	Mat.-Fetal Medicine	Dept. of OB/Gyn	Active

Allied Health Professional Reappointments (effective 06/01/2023 – 05/31/2025)

Tanner, Natasha A., N.N.P.	Dept. of Pediatrics	(Sponsor: Dr. David Golembeski for Children’s Specialists)
Hermanson, Kathleen H., P.A.-C.	Dept. of Medicine	(Sponsor: Dr. Remia Paduga for The Neurology Center)
Pellechia, Kristyn G., PMHNP	Dept. of Psychiatry	(Sponsor: Dr. Louisa Steiger for Senior Medical Associates)
Quach, Linda L., P.N.P.	Dept. of Pediatrics	(Sponsor: Dr. David Golembeski for Children’s Specialists)

Certification by and Recommendation of Chief of Staff

As Chief of Staff of Palomar Medical Center Escondido, I certify that the procedures described in the Medical Staff Bylaws for appointment, reappointment or alteration of staff membership or the granting of privileges and that the policy of Palomar Health’s Board of Directors regarding such practices have been properly followed. I recommend that the action requested in each case be taken by the Board of Directors.

Palomar Medical Center Poway
Medical Staff Services
15615 Pomerado Road
Poway, CA 92064
(858) 613-4538 (858) 613-4217 fax

Date: April 26, 2023
To: Palomar Health Board of Directors – May 8, 2023 Meeting
From: Sam Filiciotto, M.D., Chief of Staff, PMC Poway Medical Staff
Subject: Medical Staff Credentials Recommendations – April, 2023

Provisional Appointments: (05/08/2023 – 04/30/2025)

Thomas Allen, M.D., Emergency Medicine
Saadia Chaudhary, M.D., Teleradiology
Ayda Dashtaei, D.O., General Surgery
William Dunn, M.D., Teleradiology
Johnathan Hays, M.D., Teleradiology
Jiajing Liu, M.D., Teleradiology
Elie Touma, DPM, Podiatry (Includes The Villas at Poway)

Biennial Reappointments: (06/01/2023 - 05/31/2025)

Philip Balikian, M.D., Orthopedics, Active (Includes The Villas at Poway)
Bradley Bower, M.D., Internal Medicine, Affiliate
Kathy Clewell, M.D., Internal Medicine, Active No Clinical Activity
Paul Cotten, M.D., Anesthesiology, Active
Aayah Fatayerji, D.O., Internal Medicine, Active
Casey Fisher, M.D., Pain Medicine, Courtesy
Naveen Gara, M.D., Gastroenterology, Active (Includes The Villas at Poway)
Gilbert Ho, M.D., Neurology, Affiliate
Philip Kim, M.D., Urology, Courtesy
Lachlan Macleay, M.D., Pathology, Active
Robert Orr, M.D., Cardiology, Courtesy
Aileen Ramgren, D.O., Pediatrics, Active
Marcelo Rivera, M.D., Internal Medicine, Active (Includes The Villas at Poway)
Gregory Sahagian, M.D., Neurology, Affiliate
Gregory Thalken, M.D., Teleradiology, Active

Reappointment Effective 06/01/2023 – 05/31/2024:

Ednan Ahmed, M.D., Ophthalmology, Active

Advancement to Active Category:

Sheela Masifi, M.D., Psychiatry, effective 05/08/2023 – 09/30/2023
Michele Quan, M.D., Critical Care/Pulmonology, effective 05/08/2023 – 10/31/2023

Advancement to Courtesy Category:

Kirsta Brummel, D.O., Ophthalmology, effective 05/08/2023 – 04/30/2024

Voluntary Resignations:

Bruce Biederman, M.D., Radiology, effective 04/14/2023 (no longer with SDI)
Veejay Geria, M.D., Internal Medicine, effective 04/01/2023 (no longer with Benchmark)
Sidrah Khan, M.D., Internal Medicine, effective 04/11/2023 (no longer with Benchmark)
Neha Sampath, M.D., Internal Medicine, effective 09/09/2022 (no longer with Benchmark)

Requests for 2 Year Leave of Absence:

Ramni Khattar, D.O., Pulmonology, effective 04/17/2023 – 04/16/2025 (per her request)
Mandy Majerski, M.D., OB/GYN, effective 04/01/2023 – 03/31/2025 (per her request)
Katherine Promer, M.D., Infectious Disease, effective 03/29/2023 – 03/28/2025 (per her request)
Fang Wu, M.D., Internal Medicine, effective 03/24/2023 – 03/23/2025 (per her request)

Allied Health Professional Appointments: (05/08/2023 – 04/30/2025)

Robert Frost, PA, Sponsor Brad Cohen

Allied Health Professional Biennial Reappointment: (06/01/2023 - 05/31/2025)

Kathleen Hermanson, PA, Sponsor Dr. Paduga
Kristyn Pellecchia, PNP, Sponsor Dr. Steiger (Includes The Villas at Poway)
Natasha Tanner, NNP, Sponsor Dr. Golembeski

Allied Health Professional Request for Additional Privileges:

Christopher Crespo, PA, Sponsor Dr. Balikian – Additional Orthopedic Surgery Privileges, effective 05/08/2023 – 01/31/2025

PALOMAR MEDICAL CENTER POWAY: Certification by and Recommendation of Chief of Staff: As Chief of Staff of Palomar Medical Center Poway, I certify that the procedures described in the Medical Staff Bylaws for appointment, reappointment, or alternation of staff membership or the granting of privileges and the policy of the Palomar Health's Board of Directors regarding such practices have been properly followed. I recommend that the Board of Directors take the action requested in each case.

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
May, 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Thomas M. Allen, M.D.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Emergency Medicine – Not Certified Yet
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ORGANIZATIONAL NAME

<i>Name</i>	Palomar Emergency Physicians
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School Uniformed Services University - Health Sciences, MD From: 08/22/2011 To: 05/15/2015 Doctor of Medicine Degree
<i>Internship Information</i>	Internship Naval Medical Center, San Diego GME Transitional From: 07/01/2015 To: 06/30/2016
<i>Residency Information</i>	Residency UC San Diego School of Medicine Emergency Medicine From: 07/22/2018 To: 06/30/2022
<i>Fellowship Information</i>	
<i>Current Affiliation Information</i>	Camp Pendleton Naval Hospital

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
May, 2023**



**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
May, 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Saadia R. Chaudhary, M.D.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Radiology - Certified 2008
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ORGANIZATIONAL NAME

<i>Name</i>	Transparent Imaging
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School David Geffen School of Medicine at UCLA, MD From: 08/01/1999 To: 06/01/2003 Doctor of Medicine
<i>Internship Information</i>	Internship Kaiser Foundation Hospital, Los Angeles Internal Medicine From: 07/01/2003 To: 06/30/2004
<i>Residency Information</i>	Residency University of California, San Francisco Radiology, Diagnostic Imaging From: 07/01/2004 To: 06/30/2008
<i>Fellowship Information</i>	Fellowship University of California, San Francisco Neuroradiology From: 07/01/2008 To: 06/30/2009
<i>Current Affiliation Information</i>	Torrance Memorial Medical Center Huntington Memorial Hospital, Pasadena

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
May, 2023**



**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
May, 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Ayda Dashtaei, D.O.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Surgery, General - Certified 2022
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ORGANIZATIONAL NAME

<i>Name</i>	Minimally Invasive Surgeons of North County
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School Midwestern University, DO From: 08/01/2011 To: 06/30/2015 Midwestern University Arizona College of Osteopathic Medicine
<i>Internship Information</i>	
<i>Residency Information</i>	Residency Henry Ford Wyandotte Hospital General Surgery From: 06/22/2015 To: 06/30/2020
<i>Fellowship Information</i>	
<i>Current Affiliation Information</i>	Providence St. Mary Medical Center

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
May, 2023**



**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
May, 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	William M. Dunn, M.D.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Radiology, Nuclear, Neuroradiology, Diagnostic Radiology - Certified 1983, 1996, 1985
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ORGANIZATIONAL NAME

<i>Name</i>	Synthesis Health, Inc.
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School Loyola University Chicago Stritch School of Medicine, MD From: 07/01/1975 To: 01/01/1978 start date listed 07/01/1975
<i>Internship Information</i>	Internship Loyola University, Illinois Internal Medicine From: 07/01/1978 To: 06/30/1979 AMA Verified
<i>Residency Information</i>	Residency Ronald Reagan UCLA Medical Center Radiology, Diagnostic Imaging From: 07/01/1980 To: 06/30/1983 AMA Verified Residency LAC + USC Medical Center Pathology From: 07/01/1979 To: 06/30/1980 PATHOLOGY - ANATOMIC & CLINICAL

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
May, 2023**

<i>Fellowship Information</i>	Fellowship UCSD Medical Center Radiology, Diagnostic Imaging From: 07/01/1984 To: 07/31/1986 University of California San Diego Medical Center Fellowship Stanford Health Care Nuclear Medicine From: 09/01/1983 To: 06/30/1984 AMA Verified
<i>Current Affiliation Information</i>	Mercy Southwest Hospital - Bakersfield Mercy Hospital Downtown - Bakersfield Bakersfield Memorial Hospital



**PALOMAR HEALTH
ALLIED HEALTH PROFESSIONAL APPOINTMENT
May, 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Robert D. Frost, PA-C
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido (already on staff here) Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Physician Assistant - Certified 2007
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ORGANIZATIONAL NAME

<i>Name</i>	Physician Assistant Specialists-CA, Inc.
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EDUCATION/AFFILIATION INFORMATION

<i>Education Information</i>	University Western University of Health Sciences, PA From: 09/06/1998 To: 07/31/2000 Physician Assistant Degree
<i>Employment</i>	Current Employment UCSD Healthcare Physician Assistant From: 06/21/2016 To: Current Current Employment Physician Assistant Specialists - California, Inc. Physician Assistant From: 06/01/2018 To: Current
<i>Current Affiliation Information</i>	Loma Linda University Medical Center Pomona Valley Hospital Medical Center Children’s Hospital of Orange County Fountain Valley Regional Hospital Riverside Community Hospital St. Jude Medical Center, Fullerton Providence St. Joseph Hospital Palomar Medical Center Escondido Mission Hospital Medical Center - M Viejo Loma Linda University Medical Center - Murrieta Tri-City Medical Center

**PALOMAR HEALTH
ALLIED HEALTH PROFESSIONAL APPOINTMENT
May, 2023**



**PALOMAR HEALTH
ALLIED HEALTH PROFESSIONAL APPOINTMENT
May, 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Xiudan Gao, RNFA
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	R.N. First Assistant - Certified 2020
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ORGANIZATIONAL NAME

<i>Name</i>	Xiudan Gao, RNFA
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EDUCATION/AFFILIATION INFORMATION

<i>Education Information</i>	University Huazhong University of Science & Technology, Nursing School, BSN From: 09/01/2000 To: 06/30/2003
<i>Employment</i>	Current Employment Palomar Medical Center-Escondido Registered Nurse From: 09/18/2017 To: Current Past Employment Sharp Grossmont Hospital Registered Nurse From: 12/17/2015 To: 09/07/2017
<i>Current Affiliation Information</i>	



**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
May, 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Johnathan C. Hays, M.D.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Diagnostic Radiology - Certified 2011
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ORGANIZATIONAL NAME

<i>Name</i>	Synthesis Health, Inc.
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School University of South Alabama, MD From: 11/01/2002 To: 05/06/2006
<i>Internship Information</i>	Internship University of South Alabama Medical Center Internal Medicine From: 07/01/2006 To: 06/30/2007 AMA verified
<i>Residency Information</i>	Residency University of South Alabama Medical Center Radiology From: 07/01/2007 To: 06/30/2011 AMA verified
<i>Fellowship Information</i>	Fellowship Ellen Shaw De Padres Radiology, Breast Imaging From: 07/01/2011 To: 06/30/2012 Women's Imaging

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
May, 2023**

<i>Current Affiliation Information</i>	Mercy Health - Lourdes Hospital Huntsville Memorial Hospital Logan Medical Center Tri-City Medical Center Weiss Memorial Hospital West Suburban Hospital Medical Center Salinas Valley Memorial Healthcare System Palmdale Regional Medical Center Knapp Medical Center Novant Health UVA Culpeper Medical Ceter UVA Health Imaging Prince William Medical Center UVA Health Haymarket Medical Center Southampton Memorial Hospital Sentara Obici Hospital Delta Health Northwest Regional Sentara Bayside & Sentara Princess Anne Hospitals Sentara Virginia Beach General Hospital Mary Immaculate Hospital
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**PALOMAR HEALTH
ALLIED HEALTH PROFESSIONAL APPOINTMENT
May, 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Unja Kim, CNM
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Nurse Midwife - Certified 2018
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ORGANIZATIONAL NAME

<i>Name</i>	OB Hospitalist Group
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EDUCATION/AFFILIATION INFORMATION

<i>Education Information</i>	University Yonsei University College of Medicine, BSN From: 03/01/1993 To: 02/28/1998 Yonsei University college of nursing
<i>Employment</i>	Current Employment Scripps Memorial Hospital Encinitas Certified Nurse Midwife From: 12/09/2019 Current Employment OB Hospitalist Group Certified Nurse Midwife From: 03/01/2023
<i>Current Affiliation Information</i>	Scripps Memorial Hospital, Encinitas

**PALOMAR HEALTH
ALLIED HEALTH PROFESSIONAL APPOINTMENT
May, 2023**



**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
May, 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Jiajing Liu, M.D.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Diagnostic Radiology - Certified 2022
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ORGANIZATIONAL NAME

<i>Name</i>	Synthesis Health/Transparent Imaging
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School Tufts University School of Medicine, MD From: 08/01/2012 To: 06/30/2016
<i>Internship Information</i>	Internship Saint Vincent Hospital at Worcester Medical Center Internal Medicine From: 07/01/2016 To: 06/30/2017
<i>Residency Information</i>	Residency Boston Medical Center Radiology, Diagnostic Imaging From: 07/01/2017 To: 06/30/2021
<i>Fellowship Information</i>	Fellowship Stanford University Medical Center Neuroradiology From: 07/01/2021 To: / / tentative completion date 06/30/2023
<i>Current Affiliation Information</i>	Stanford University Medical Center

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
May, 2023**



**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
May, 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Elie Touma, D.P.M.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Podiatry - Certified 2022
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ORGANIZATIONAL NAME

<i>Name</i>	Elie Touma, DPM
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School Des Moines University - Osteopathic Medical Center, DPM From: 08/03/2015 To: 05/24/2019 Doctor of Podiatric Medicine
<i>Internship Information</i>	Internship HCA Florida Northwest Hospital Podiatry From: 07/01/2019 To: 06/30/2020
<i>Residency Information</i>	Residency HCA Florida Northwest Hospital Podiatry From: 07/01/2019 To: 06/30/2022
<i>Fellowship Information</i>	
<i>Current Affiliation Information</i>	SCA North Coast Surgery Center Center for Surgery of Encinitas UCSD Surgical Center of San Diego, LLC Tri-City Medical Center

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
May, 2023**



PALOMAR HEALTH

OPHTHALMOLOGY CLINICAL PRIVILEGES

Name: _____

Page 1

Effective From ___/___/_____ To ___/___/_____

- Palomar Medical Center Escondido
- Palomar Medical Center Poway

- Initial Appointment
- Reappointment

Applicant: Check off the “Requested” box for each privilege requested. Applicants have the burden of producing information deemed adequate by the Hospital for a proper evaluation of current competence, current clinical activity, and other qualifications and for resolving any doubts related to qualifications for requested privileges.

Department Chair/Clinical Service Division Director: Check the appropriate box for recommendation on the last page of this form. If recommended with conditions or not recommended, provide condition or explanation on the last page of this form.

Other Requirements

- Note that privileges granted may only be exercised at the site(s) and/or setting(s) that have the appropriate equipment, license, beds, staff and other support required to provide the services defined in this document. Site-specific services may be defined in hospital and/or department policy.
- This document is focused on defining qualifications related to competency to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.

QUALIFICATIONS FOR OPTHALMOLOGY

To be eligible to apply for core privileges in ophthalmology, the initial applicant must meet the following criteria:

Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency in ophthalmology.

AND

Current certification or active participation in the examination process, with achievement of certification within 4 years of appointment, leading to certification in ophthalmology by the American Board of Ophthalmology or the American Osteopathic Board of Ophthalmology and Otolaryngology – Head and Neck Surgery, or another board with equivalent requirements.

Required Previous Experience: Applicants for initial appointment must be able to demonstrate performance of at least 20 ophthalmic procedures, reflective of the scope of privileges requested, in the past 12 months or demonstrate successful completion of an ACGME or AOA accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months.

Approved: PMC Poway OR Committee 03/10/2023
 Approved: PMC Escondido Surgery Advisory Committee 4/4/2023
 Approved: PMCE Escondido Department of Surgery 4/11/2023
 PMC Escondido MEC 04/24/2023
 PMC Poway MEC 04/25/2023

OPHTHALMOLOGY CLINICAL PRIVILEGES

Name: _____

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Effective From ___/___/_____ To ___/___/_____

Focused Professional Practice Evaluation (FPPE Monitoring (Proctoring) guidelines: For core ophthalmology procedures, no less than six (6) Operating Room cases of varying complexity and representative of the scope of practice will be monitored/proctored by direct observation. Appropriateness of the indications for surgery and outcomes of surgery will be assessed. If applicable, cases within each subspecialty grouping (special – non core bundles) will be concurrently monitored/proctored as defined within the specific grouping and these cases will be in addition to the six (6) “Core” cases.

Reappointment Requirements: To be eligible to renew core privileges in ophthalmology, the applicant must meet the following maintenance of privilege criteria:

Current demonstrated competence and an adequate volume of experience (40 ophthalmic procedures) in the Operating Room or Laser Suite with appropriate indications and acceptable results for the past 24 months based on results of ongoing professional practice evaluation and outcomes. These procedures must be reflective of the scope of privileges requested. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

SURGERY ASSIST ONLY PRIVILEGES (NOT APPLICABLE IF REQUESTING OPHTHALMOLOGY CORE PRIVILEGES)

Criteria: Successful completion of an ACGME or AOA accredited residency in Ophthalmology which included training as a surgical assist. **Required Previous Experience:** Demonstrated current competence and evidence of assisting for an adequate volume of surgical procedures in the past 12 months. **Maintenance of Privilege:** Demonstrated current competence and evidence of assisting for an adequate volume of procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Requested

OPHTHALMOLOGY CONSULTATIVE PRIVILEGES (NOT APPLICABLE IF REQUESTING OPHTHALMOLOGY CORE PRIVILEGES)

Provide consultation to adolescent and adult patients with ocular and visual disorders including the eyelid and orbit affecting the eye and the visual pathways. The consulting role shall be purely to evaluate and make recommendations for therapy and precludes any procedural privileges or admission of patients.

Requested

CORE PRIVILEGES

OPHTHALMOLOGY CORE PRIVILEGES

Requested Admit, evaluate, diagnose, treat and provide consultation, order diagnostic studies and procedures, and perform surgical ~~and non-surgical~~ procedures on adolescent and adult patients, with ~~ocular and visual~~ disorders of the eye, eyelid, orbit, or visual pathways. May provide care to patients in the intensive care setting as well as other hospital settings in conformance with unit policies. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.

Approved: PMC Poway OR Committee 03/10/2023
Approved: PMC Escondido Surgery Advisory Committee 4/4/2023
Approved: PMCE Escondido Department of Surgery 4/11/2023
PMC Escondido MEC 04/24/2023
PMC Poway MEC 04/25/2023

OPHTHALMOLOGY CLINICAL PRIVILEGES

Name: _____

Page 3

Effective From ___/___/_____ To ___/___/_____

CHECK HERE TO REQUEST SKILLED NURSING FACILITY FORM.

Requested The Villas at Poway

SPECIAL NON-CORE PRIVILEGES (SEE SPECIFIC CRITERIA)

If desired, Non-Core Privileges are requested individually in addition to requesting the Core. Each individual requesting Non-Core Privileges must meet the specific threshold criteria governing the exercise of the privilege requested including training, required previous experience, and for maintenance of clinical competence.

SETON TUBE SURGERY NOT OFFERED AT PALOMAR MEDICAL CENTER ESCONDIDO

Criteria: Successful completion of an ACGME or AOA accredited residency in ophthalmology followed by successful completion of a fellowship in glaucoma surgery that included training in seton tube surgery or documented equivalent experience or training course. **Required Previous Experience:** Demonstrated current competence and evidence of appropriate training or experience in the last 12 months. Demonstrated current competence and evidence of the performance of at least two (2) seton tube surgeries in the past 12 months. **Maintenance of Privilege:** Demonstrated current competence and evidence of performance of at least 4 seton tube surgeries in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Requested

CORNEAL SURGERY NOT OFFERED AT PALOMAR MEDICAL CENTER ESCONDIDO

Criteria: Successful completion of an ACGME or AOA accredited residency in ophthalmology followed by successful completion of a fellowship in corneal surgery or documented equivalent experience or training course. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least four (4) corneal procedures reflective of the scope of privileges requested (listed below), in the past 12 months. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of eight (8) corneal procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes. **FPPE:** No less than two (2) procedures reflective of the scope of privileges requested will be concurrently monitored.

- Requested** Penetrating keratoplasty / lamellar keratoplasty
- Requested** Wedge resections / compression sutures
- Requested** Keratoprosthesis
- Requested** Endothelial keratoplasty (Including DSEK, DSAEK, and DMEK)

ADVANCED STRABISMUS SURGERY

Criteria: Successful completion of an ACGME or AOA accredited residency in ophthalmology followed by an approved fellowship in advanced strabismus surgery or documented equivalent experience or training course. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least 4 advanced strabismus surgery procedures, reflective of the scope of privileges requested, in the past 12 months. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least 8 advanced strabismus surgery procedures reflective of the scope of privileges requested, in the past 24 months based on results of ongoing professional practice

Approved: PMC Poway OR Committee 03/10/2023
 Approved: PMC Escondido Surgery Advisory Committee 4/4/2023
 Approved: PMCE Escondido Department of Surgery 4/11/2023
 PMC Escondido MEC 04/24/2023
 PMC Poway MEC 04/25/2023

OPHTHALMOLOGY CLINICAL PRIVILEGES

Name: _____

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Effective From ___/___/___ To ___/___/___

evaluation and outcomes. **FPPE:** No less than two (2) procedures reflective of the scope of privileges requested will be concurrently monitored.

- Requested** Reoperations on Horizontal Muscles
- Requested** Vertical Muscle Surgery
- Requested** Muscle Transpositions

ADVANCED RETINAL SURGERY (NOT OFFERED AT PALOMAR MEDICAL CENTER ESCONDIDO) POWAY ONLY

Criteria: Successful completion of an ACGME or AOA accredited residency in ophthalmology followed by successful completion of **an approved** ~~a one-year~~ fellowship in vitreoretinal surgery. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least 40 retinal procedures reflective of the scope of privileges requested in the past 12 months. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least 40 advanced retinal procedures, reflective of the scope of privileges requested, in the past 24 months based on results of ongoing professional practice evaluation and outcomes. **FPPE:** No less than two (2) procedures will be concurrently monitored.

- Requested** ~~Surgical Repair of Retinal Tears~~ Scleral buckle with/without drainage of subretinal fluid
- Requested** ~~Closed system~~ Pars plana vitrectomy, peeling epiretinal membranes, removal of posterior chamber foreign body with magnet
- Requested** Endolaser photocoagulation
- Requested** Use of intravitreal or intraocular gases or liquids
- Requested** ~~Parretinal photocoagulation with indirect ophthalmoscope~~ Placement of external radiotherapeutic source

OPHTHALMOLOGY CLINICAL PRIVILEGES

Name: _____

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Effective From ____/____/____ To ____/____/____

OCULOPLASTIC SURGERY

Criteria: Successful completion of an ACGME or AOA accredited residency in ophthalmology followed by successful completion of a fellowship in oculoplastic surgery. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least four (4) of the specific type of oculoplastic surgery procedure, reflective of the scope of privileges requested, in the past 12 months. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least eight (8) of the specific type of oculoplastic surgery procedure, reflective of the scope of privileges requested, in the past 24 months based on results of ongoing professional practice evaluation and outcomes. **FPPE:** No less than two (2) procedures reflective of the scope of privileges requested will be concurrently monitored.

- Requested** Dacryocystorhinostomy
- Requested** Exenteration of orbit
- Requested** Excision and repair of lid lesions > 1/4 of eyelid, eyelid grafting procedures, full thickness lid splitting procedures
- Requested** Excision of large orbital tumors
- Requested** Lacrimal gland surgery
- Requested** Optic nerve sheath decompression
- Requested** Orbital decompression
- Requested** Orbital fracture repair
- Requested** Tarsconjunctival flap dehiscence (Hughes procedure)

OPHTHALMOLOGY CLINICAL PRIVILEGES

Name: _____

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Effective From ____/____/____ To ____/____/____

CORE PROCEDURE LIST

This list is a sampling of procedures included in the core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

To the applicant: If you wish to exclude any procedures, please strike through those procedures which you do not wish to request, initial, and date.

- Anterior limbal approach or pars plana automated vitrectomy *Poway
- Astigmatic keratotomy / relaxing incision *Poway
- Conjunctiva surgery, including grafts, flaps, tumors, pterygium, pinguecula, amniotic membrane transplant
- Corneal surgery, including traumatic repair but excluding keratoplasty, keratotomy and refractive surgery
- Corneal/Scleral laceration repair *
- Glaucoma surgery with intraoperative/postoperative antimetabolite therapy, primary trabeculectomy surgery *Poway
- Glaucoma, reoperation *Poway
- Injection of intravitreal medications
- Intra and extracapsular cataract extraction with or without lens implant, or phacoemulsification *Poway
- Intraocular lens removal or exchange *Poway
- Laser peripheral iridotomy, trabeculoplasty, pupilloplasty/gonioplasty, suture lysis, panretinal photocoagulation with contact lens or indirect ophthalmoscope, macular photocoagulation, retinopexy for repair of retinal tears, capsulotomy, cyclophotocoagulation *Poway
- Lid and ocular adnexal surgery, chalazion, ptosis, repair of malposition, repair of laceration, entropion and ectropion surgery, blepharospasm repair, flaps, enucleation, evisceration, small tumors of eyelid and anterior orbit, repair of canalicular lacerations, anterior orbitotomy
- Nasolacrimal surgery including dacryocystectomy, excision of lacrimal sac mass, probing and irrigation, balloon dacryoplasty
- Orbit surgery, including exploration by lateral orbitotomy, tumor and foreign body removal
- Perform history and physical exam
- Placement of orbital prosthesis *
- Removal of anterior and/or posterior segment foreign body * Poway
- Retrobulbar or peribulbar injections for medical delivery or chemical denervation for pain control
- Strabismus surgery; horizontal muscle recessions and resections including adjustable sutures and inferior oblique muscle surgery
- Use of local anesthetics and parenteral sedation for ophthalmic conditions

*Poway – Not offered at Palomar Medical Center Escondido

OPHTHALMOLOGY CLINICAL PRIVILEGES

Name: _____

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Effective From ___/___/_____ To ___/___/_____

ACKNOWLEDGEMENT OF PRACTITIONER

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at Palomar Health, and I understand that:

- a. In exercising any clinical privileges granted, I am constrained by Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.

Signed _____

Date _____

Approved: PMC Poway OR Committee 03/10/2023
 Approved: PMC Escondido Surgery Advisory Committee 4/4/2023
 Approved: PMCE Escondido Department of Surgery 4/11/2023
 PMC Escondido MEC 04/24/2023
 PMC Poway MEC 04/25/2023

PALOMAR HEALTH

OPHTHALMOLOGY CLINICAL PRIVILEGES

Name: _____

Page 1

Effective From ___/___/_____ To ___/___/_____

- Palomar Medical Center Escondido
- Palomar Medical Center Poway

- Initial Appointment
- Reappointment

Applicant: Check off the “Requested” box for each privilege requested. Applicants have the burden of producing information deemed adequate by the Hospital for a proper evaluation of current competence, current clinical activity, and other qualifications and for resolving any doubts related to qualifications for requested privileges.

Department Chair/Clinical Service Division Director: Check the appropriate box for recommendation on the last page of this form. If recommended with conditions or not recommended, provide condition or explanation on the last page of this form.

Other Requirements

- Note that privileges granted may only be exercised at the site(s) and/or setting(s) that have the appropriate equipment, license, beds, staff and other support required to provide the services defined in this document. Site-specific services may be defined in hospital and/or department policy.
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AND

Current certification or active participation in the examination process, with achievement of certification within 4 years of appointment, leading to certification in ophthalmology by the American Board of Ophthalmology or the American Osteopathic Board of Ophthalmology and Otolaryngology – Head and Neck Surgery, or another board with equivalent requirements.

Required Previous Experience: Applicants for initial appointment must be able to demonstrate performance of at least 20 ophthalmic procedures, reflective of the scope of privileges requested, in the past 12 months or demonstrate successful completion of an ACGME or AOA accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months.

OPHTHALMOLOGY CLINICAL PRIVILEGES

Name: _____

Page 2

Effective From ___/___/_____ To ___/___/_____

Focused Professional Practice Evaluation (FPPE Monitoring (Proctoring) guidelines: For core ophthalmology procedures, no less than six (6) Operating Room cases of varying complexity and representative of the scope of practice will be monitored/proctored by direct observation. Appropriateness of the indications for surgery and outcomes of surgery will be assessed. If applicable, cases within each subspecialty grouping (special – non core bundles) will be concurrently monitored/proctored as defined within the specific grouping and these cases will be in addition to the six (6) “Core” cases.

Reappointment Requirements: To be eligible to renew core privileges in ophthalmology, the applicant must meet the following maintenance of privilege criteria:

Current demonstrated competence and an adequate volume of experience (40 ophthalmic procedures) in the Operating Room or Laser Suite with appropriate indications and acceptable results for the past 24 months based on results of ongoing professional practice evaluation and outcomes. These procedures must be reflective of the scope of privileges requested. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

SURGERY ASSIST ONLY PRIVILEGES (NOT APPLICABLE IF REQUESTING OPHTHALMOLOGY CORE PRIVILEGES)

Criteria: Successful completion of an ACGME or AOA accredited residency in Ophthalmology which included training as a surgical assist. **Required Previous Experience:** Demonstrated current competence and evidence of assisting for an adequate volume of surgical procedures in the past 12 months. **Maintenance of Privilege:** Demonstrated current competence and evidence of assisting for an adequate volume of procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Requested

OPHTHALMOLOGY CONSULTATIVE PRIVILEGES (NOT APPLICABLE IF REQUESTING OPHTHALMOLOGY CORE PRIVILEGES)

Provide consultation to adolescent and adult patients with ocular and visual disorders including the eyelid and orbit affecting the eye and the visual pathways. The consulting role shall be purely to evaluate and make recommendations for therapy and precludes any procedural privileges or admission of patients.

Requested

CORE PRIVILEGES

OPHTHALMOLOGY CORE PRIVILEGES

Requested Admit, evaluate, diagnose, treat and provide consultation, order diagnostic studies and procedures, and perform surgical procedures on adolescent and adult patients, with disorders of the eye, eyelid, orbit, or visual pathways. May provide care to patients in the intensive care setting as well as other hospital settings in conformance with unit policies. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.

CHECK HERE TO REQUEST SKILLED NURSING FACILITY FORM

Requested The Villas at Poway

OPHTHALMOLOGY CLINICAL PRIVILEGES

Name: _____

Page 3

Effective From ____/____/____ To ____/____/____

SPECIAL NON-CORE PRIVILEGES (SEE SPECIFIC CRITERIA)

If desired, Non-Core Privileges are requested individually in addition to requesting the Core. Each individual requesting Non-Core Privileges must meet the specific threshold criteria governing the exercise of the privilege requested including training, required previous experience, and for maintenance of clinical competence.

SETON TUBE SURGERY (NOT OFFERED AT PALOMAR MEDICAL CENTER ESCONDIDO)

Criteria: Successful completion of an ACGME or AOA accredited residency in ophthalmology followed by successful completion of a fellowship in glaucoma surgery that included training in seton tube surgery or documented equivalent experience or training course. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least two (2) seton tube surgeries in the past 12 months. **Maintenance of Privilege:** Demonstrated current competence and evidence of performance of at least 4 seton tube surgeries in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Requested

CORNEAL SURGERY (NOT OFFERED AT PALOMAR MEDICAL CENTER ESCONDIDO)

Criteria: Successful completion of an ACGME or AOA accredited residency in ophthalmology followed by successful completion of a fellowship in corneal surgery or documented equivalent experience or training course. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least four (4) corneal procedures reflective of the scope of privileges requested (listed below), in the past 12 months. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of eight (8) corneal procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes. **FPPE:** No less than two (2) procedures reflective of the scope of privileges requested will be concurrently monitored.

- Requested** Penetrating keratoplasty / lamellar keratoplasty
- Requested** Wedge resections / compression sutures
- Requested** Keratoprosthesis
- Requested** Endothelial keratoplasty (Including DSEK, DSAEK, and DMEK)

ADVANCED STRABISMUS SURGERY

Criteria: Successful completion of an ACGME or AOA accredited residency in ophthalmology followed by an approved fellowship in advanced strabismus surgery or documented equivalent experience or training course. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least 4 advanced strabismus surgery procedures, reflective of the scope of privileges requested, in the past 12 months. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least 8 advanced strabismus surgery procedures reflective of the scope of privileges requested, in the past 24 months based on results of ongoing professional practice evaluation and outcomes. **FPPE:** No less than two (2) procedures reflective of the scope of privileges requested will be concurrently monitored.

- Requested** Reoperations on Horizontal Muscles
- Requested** Vertical Muscle Surgery
- Requested** Muscle Transpositions

OPHTHALMOLOGY CLINICAL PRIVILEGES

Name: _____

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Effective From ___/___/_____ To ___/___/_____

ADVANCED RETINAL SURGERY (NOT OFFERED AT PALOMAR MEDICAL CENTER ESCONDIDO) POWAY ONLY

Criteria: Successful completion of an ACGME or AOA accredited residency in ophthalmology followed by successful completion of an approved fellowship in vitreoretinal surgery. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least 40 retinal procedures reflective of the scope of privileges requested in the past 12 months. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least 40 advanced retinal procedures, reflective of the scope of privileges requested, in the past 24 months based on results of ongoing professional practice evaluation and outcomes. **FPPE:** No less than two (2) procedures will be concurrently monitored.

- Requested** Scleral buckle with/without drainage of subretinal fluid
- Requested** Pars plana vitrectomy, peeling epiretinal membranes, removal of posterior chamber foreign body with magnet
- Requested** Endolaser photocoagulation
- Requested** Use of intravitreal or intraocular gases or liquids
- Requested** Placement of external radiotherapeutic source

OPHTHALMOLOGY CLINICAL PRIVILEGES

Name: _____

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Effective From ____/____/____ To ____/____/____

OCULOPLASTIC SURGERY

Criteria: Successful completion of an ACGME or AOA accredited residency in ophthalmology followed by successful completion of a fellowship in oculoplastic surgery. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least four (4) of the specific type of oculoplastic surgery procedure, reflective of the scope of privileges requested, in the past 12 months. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least eight (8) of the specific type of oculoplastic surgery procedure, reflective of the scope of privileges requested, in the past 24 months based on results of ongoing professional practice evaluation and outcomes. **FPPE:** No less than two (2) procedures reflective of the scope of privileges requested will be concurrently monitored.

- Requested** Dacryocystorhinostomy
- Requested** Exenteration of orbit
- Requested** Excision and repair of lid lesions > 1/4 of eyelid, eyelid grafting procedures, full thickness lid splitting procedures
- Requested** Excision of large orbital tumors
- Requested** Lacrimal gland surgery
- Requested** Optic nerve sheath decompression
- Requested** Orbital decompression
- Requested** Orbital fracture repair
- Requested** Tarsoconjunctival flap dehiscence (Hughes procedure)

OPHTHALMOLOGY CLINICAL PRIVILEGES

Name: _____

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Effective From ____/____/____ To ____/____/____

CORE PROCEDURE LIST

This list is a sampling of procedures included in the core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

To the applicant: If you wish to exclude any procedures, please strike through those procedures which you do not wish to request, initial, and date.

- Anterior limbal approach or pars plana automated vitrectomy *Poway
- Astigmatic keratotomy / relaxing incision *Poway
- Conjunctiva surgery, including grafts, flaps, tumors, pterygium, pinguecula, amniotic membrane transplant
- Corneal surgery, including traumatic repair but excluding keratoplasty, keratotomy and refractive surgery
- Corneal/Scleral laceration repair
- Glaucoma surgery with intraoperative/postoperative antimetabolite therapy, primary trabeculectomy surgery *Poway
- Glaucoma, reoperation *Poway
- Injection of intravitreal medications
- Intra and extracapsular cataract extraction with or without lens implant, or phacoemulsification *Poway
- Intraocular lens removal or exchange *Poway
- Laser peripheral iridotomy, trabeculoplasty, pupilloplasty/gonioplasty, suture lysis, panretinal photocoagulation with contact lens or indirect ophthalmoscope, macular photocoagulation, retinopexy for repair of retinal tears, capsulotomy, cyclophotocoagulation *Poway
- Lid and ocular adnexal surgery, chalazion, ptosis, repair of malposition, repair of laceration, entropion and ectropion surgery, blepharospasm repair, flaps, enucleation, evisceration, small tumors of eyelid and anterior orbit, repair of canalicular lacerations, anterior orbitotomy
- Nasolacrimal surgery including dacryocystectomy, excision of lacrimal sac mass, probing and irrigation, balloon dacryoplasty
- Orbit surgery, including exploration by lateral orbitotomy, tumor and foreign body removal
- Perform history and physical exam
- Placement of orbital prosthesis
- Removal of anterior and/or posterior segment foreign body * Poway
- Retrobulbar or peribulbar injections for medical delivery or chemical denervation for pain control
- Strabismus surgery; horizontal muscle recessions and resections including adjustable sutures and inferior oblique muscle surgery
- Use of local anesthetics and parenteral sedation for ophthalmic conditions

*Poway – Not offered at Palomar Medical Center Escondido

OPHTHALMOLOGY CLINICAL PRIVILEGES

Name: _____

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Effective From ___/___/_____ To ___/___/_____

ACKNOWLEDGEMENT OF PRACTITIONER

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at Palomar Health, and I understand that:

- a. In exercising any clinical privileges granted, I am constrained by Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.

Signed _____

Date _____

PALOMAR HEALTH

VASCULAR SURGERY CLINICAL PRIVILEGES

Name: _____

Page 1

Effective From ___/___/_____ To ___/___/_____

- Palomar Medical Center Escondido
- Palomar Medical Center Poway

- Initial Appointment
- Reappointment

Applicant: Check off the “Requested” box for each privilege requested. Applicants have the burden of producing information deemed adequate by the Hospital for a proper evaluation of current competence, current clinical activity, and other qualifications and for resolving any doubts related to qualifications for requested privileges.

Department Chair: Check the appropriate box for recommendation on the last page of this form. If recommended with conditions or not recommended, provide condition or explanation on the last page of this form.

Other Requirements

- Note that privileges granted may only be exercised at the site(s) and/or setting(s) that have the appropriate equipment, license, beds, staff and other support required to provide the services defined in this document. Site-specific services may be defined in hospital and/or department policy.
- This document is focused on defining qualifications related to competency to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.

QUALIFICATIONS FOR VASCULAR SURGERY

To be eligible to apply for core privileges in vascular surgery, the initial applicant must meet the following criteria:

Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency in general surgery that included training in vascular surgery or successful completion of an ACGME or AOA accredited fellowship in vascular surgery

AND

Current certification or active participation in the examination process with achievement of certification within 48 months of appointment leading to certification in general surgery by the American Board of Surgery, or the American Osteopathic Board of Surgery, or another board with equivalent requirements.

OR

Current subspecialty certification or active participation in the examination process leading to certification in vascular surgery by the American Board of Surgery or the American Osteopathic Board of Surgery, or another board with equivalent requirements.

Required Previous Experience: Applicants for initial appointment must be able to demonstrate performance of a minimum of 20 vascular surgery procedures, reflective of the scope of privileges requested, within the past 12 months, the majority being of a reconstructive nature excluding cardiac surgery, or demonstrate successful completion of an ACGME or AOA accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months.

Approved: PMC Poway MEC 04/25/2023

Approved: PMC Escondido MEC 04/24/2023

Approved: PMC Escondido Surgery Advisory Committee 4/4/2023

Approved: PMCE Escondido Department of Surgery 4/11/2023

Approved: PMCP OR Committee 03/10/2023

VASCULAR SURGERY CLINICAL PRIVILEGES

Name: _____

Page 2

Effective From ___/___/_____ To ___/___/_____

Focused Professional Practice Evaluation (FPPE)/ Monitoring guidelines: No less than 8 operating room cases of varying complexity and representative of the scope of practice will be monitored.

Reappointment Requirements: To be eligible to renew core privileges in vascular surgery, the applicant must meet the following maintenance of privilege criteria:

Current demonstrated competence and an adequate volume of experience (40 vascular surgery procedures) with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

CORE PRIVILEGES

VASCULAR SURGERY CORE PRIVILEGES

- Requested** Admit, evaluate, diagnose, provide consultation and treat adolescent and adult patients with diseases/disorders of the arterial, venous, and lymphatic circulatory systems, excluding the intracranial vessels or the heart. May provide care to patients in the intensive care setting in conformance with unit policies. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.

CHECK HERE TO REQUEST SKILLED NURSING FACILITY FORM

- Requested – The Villas at Poway**

SPECIAL NON-CORE PRIVILEGES (SEE SPECIFIC CRITERIA)

If desired, Non-Core Privileges are requested individually in addition to requesting the Core. Each individual requesting Non-Core Privileges must meet the specific threshold criteria governing the exercise of the privilege requested including training, required previous experience, and for maintenance of clinical competence.

VENOUS RECONSTRUCTION

Must have completed an ACGME or AOA Vascular Surgery fellowship. (Should we include a number of cases required of previous experience or maintenance of privilege?)

- [Approved: PMC Poway MEC 04/25/2023](#)
- [Approved: PMC Escondido MEC 04/24/2023](#)
- [Approved: PMC Escondido Surgery Advisory Committee 4/4/2023](#)
- [Approved: PMCE Escondido Department of Surgery 4/11/2023](#)
- [Approved: PMCP OR Committee 03/10/2023](#)

VASCULAR SURGERY CLINICAL PRIVILEGES

Name: _____

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Effective From ___/___/_____ To ___/___/_____

CAROTID STENTING

~~**Criteria:** Successful completion of an ACGME or AOA accredited post graduate training program that included training in diagnostic angiography, carotid angioplasty, and stent placement procedures, OR completion of an approved hands on training program in diagnostic angiography and carotid angioplasty under the supervision of a qualified physician instructor. Applicants must also have completed a training course in the embolic protection system or device that is used in the carotid artery stenting procedure. In addition, applicants must be able to demonstrate that they have performed at least 100 diagnostic cerebral angiograms if they have no prior catheter experience or 100 diagnostic angiograms in the past 24 months. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least 25 (this is an incredibly high number?(there probably have not been 25 carotid stents done in the entire hospital system in the last several years in total (if anyone is doing this many of this procedure that is a problem as the indications for doing so are very limited. Board of vascular surgery recommends a total of 5 cases) carotid artery stenting procedures in the past 12 months with at least half as the primary operator. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least 12 (see previous statement)? carotid artery stenting procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.~~

~~Carotid stenting should not be a separate privilege as it is a part of standard vascular surgery training (this should also include TCAR (transcarotid artery revascularization)~~

~~Requested~~

ADMINISTRATION OF SEDATION AND ANALGESIA

Requested See Hospital Policy for Sedation and Analgesia by Non-Anesthesiologists

USE OF FLUOROSCOPY

Requested Requires maintenance of a valid x-ray supervisor and operator's license.

- [Approved: PMC Poway MEC 04/25/2023](#)
- [Approved: PMC Escondido MEC 04/24/2023](#)
- [Approved: PMC Escondido Surgery Advisory Committee 4/4/2023](#)
- [Approved: PMCE Escondido Department of Surgery 4/11/2023](#)
- [Approved: PMCP OR Committee 03/10/2023](#)

VASCULAR SURGERY CLINICAL PRIVILEGES

Name: _____

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Effective From ___/___/_____ To ___/___/_____

VASCULAR SURGERY CORE PROCEDURE LIST

This list is a sampling of procedures included in the core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

To the applicant: If you wish to exclude any procedures, please strike through those procedures which you do not wish to request, initial, and date.

- ~~Major and minor a~~Amputations, upper extremity, lower extremity (excluding hip disarticulations)
- Aneurysm repair, ~~abdominal-aortica~~ and peripheral ~~vessels emergent and elective~~ Aortic / thoracic at PMCE only
- ~~Angioplasty, femoral, iliae~~ Angioplasty, stent and atherectomy of peripheral vessels PMCE
- Bypass grafting all vessels excluding coronary and intracranial vessels PMCE
- Carotid endarterectomy PMCE
- Central venous access catheters and ports
- Cervical, thoracic or lumbar sympathectomy PMCE
- Diagnostic biopsy or other diagnostic procedures on blood ~~vessels~~
- Embolectomy or thrombectomy for all vessels excluding coronary ~~vessels and intra-cranial vessels~~
- Endarterectomy for all vessels excluding ~~coronary vessels coronary and intracranial vessels~~ PMCE
- Extra cranial carotid and vertebral artery surgery PMCE
- Hemodialysis access procedures
- ~~Intraoperative~~ angiography and venography
- ~~Intraoperative angioplasty, balloon dilatation~~
- ~~Lumbar~~ sympathectomy
- Muscle flap creation
- ~~Other~~ major open and endovascular peripheral vascular arterial and venous reconstructions
- Perform history and physical exam
- Placement and removal of inferior vena cava (IVC) filter
- Reconstruction, resection, repair of ~~major arterial and venous~~ vessels with anastomosis or replacement (excluding cardiopulmonary), ~~intracranial~~
- Sclerotherapy
- Skin grafts
- Spinal access (thoracic and lumbar) PMCE
- ~~Temporal artery biopsy~~
- Carotid stenting PMCE
- Transcarotid artery revascularization (TCAR) PMCE
- Thoracic outlet decompression procedures including rib resection PMCE
- Vein ligation and stripping
- ~~Venous reconstruction~~
- ~~(one concern is that this privilege bundle includes significant endovascular component, those that have vascular privileges but have not done fellowship training likely do not have the ability to perform these types of procedures, i.e. those with board certification in general surgery alone)~~

Approved: PMC Poway MEC 04/25/2023
 Approved: PMC Escondido MEC 04/24/2023
 Approved: PMC Escondido Surgery Advisory Committee 4/4/2023
 Approved: PMCE Escondido Department of Surgery 4/11/2023
 Approved: PMCP OR Committee 03/10/2023

VASCULAR SURGERY CLINICAL PRIVILEGES

Name: _____

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Effective From ___/___/_____ To ___/___/_____

ACKNOWLEDGEMENT OF PRACTITIONER

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at Palomar Health, and I understand that:

- a. In exercising any clinical privileges granted, I am constrained by Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.

Signed _____

Date _____

[Approved: PMC Poway MEC 04/25/2023](#)
[Approved: PMC Escondido MEC 04/24/2023](#)
[Approved: PMC Escondido Surgery Advisory Committee 4/4/2023](#)
[Approved: PMCE Escondido Department of Surgery 4/11/2023](#)
[Approved: PMCP OR Committee 03/10/2023](#)

PALOMAR HEALTH

VASCULAR SURGERY CLINICAL PRIVILEGES

Name: _____

Page 1

Effective From ___/___/_____ To ___/___/_____

- Palomar Medical Center Escondido
- Palomar Medical Center Poway

- Initial Appointment
- Reappointment

Applicant: Check off the "Requested" box for each privilege requested. Applicants have the burden of producing information deemed adequate by the Hospital for a proper evaluation of current competence, current clinical activity, and other qualifications and for resolving any doubts related to qualifications for requested privileges.

Department Chair: Check the appropriate box for recommendation on the last page of this form. If recommended with conditions or not recommended, provide condition or explanation on the last page of this form.

Other Requirements

- Note that privileges granted may only be exercised at the site(s) and/or setting(s) that have the appropriate equipment, license, beds, staff and other support required to provide the services defined in this document. Site-specific services may be defined in hospital and/or department policy.
- This document is focused on defining qualifications related to competency to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.

QUALIFICATIONS FOR VASCULAR SURGERY

To be eligible to apply for core privileges in vascular surgery, the initial applicant must meet the following criteria:

Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency in general surgery that included training in vascular surgery or successful completion of an ACGME or AOA accredited fellowship in vascular surgery

AND

Current certification or active participation in the examination process with achievement of certification within 48 months of appointment leading to certification in general surgery by the American Board of Surgery, or the American Osteopathic Board of Surgery, or another board with equivalent requirements.

OR

Current subspecialty certification or active participation in the examination process leading to certification in vascular surgery by the American Board of Surgery or the American Osteopathic Board of Surgery, or another board with equivalent requirements. **Required Previous Experience:** Applicants for initial appointment must be able to demonstrate performance of a minimum of 20 vascular surgery procedures, reflective of the scope of privileges requested, within the past 12 months, the majority being of a reconstructive nature excluding cardiac surgery, or demonstrate successful completion of an ACGME or AOA accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months.

Focused Professional Practice Evaluation (FPPE)/ Monitoring guidelines: No less than 8 operating room cases of varying complexity and representative of the scope of practice will be monitored.

VASCULAR SURGERY CLINICAL PRIVILEGES

Name: _____

Page 2

Effective From ____/____/____ To ____/____/____

Reappointment Requirements: To be eligible to renew core privileges in vascular surgery, the applicant must meet the following maintenance of privilege criteria:

Current demonstrated competence and an adequate volume of experience (40 vascular surgery procedures) with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

CORE PRIVILEGES

VASCULAR SURGERY CORE PRIVILEGES

- Requested** Admit, evaluate, diagnose, provide consultation and treat adolescent and adult patients with diseases/disorders of the arterial, venous, and lymphatic circulatory systems, excluding the intracranial vessels or the heart. May provide care to patients in the intensive care setting in conformance with unit policies. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.

CHECK HERE TO REQUEST SKILLED NURSING FACILITY FORM

- Requested – The Villas at Poway**

SPECIAL NON-CORE PRIVILEGES (SEE SPECIFIC CRITERIA)

If desired, Non-Core Privileges are requested individually in addition to requesting the Core. Each individual requesting Non-Core Privileges must meet the specific threshold criteria governing the exercise of the privilege requested including training, required previous experience, and for maintenance of clinical competence.

ADMINISTRATION OF SEDATION AND ANALGESIA

- Requested** See Hospital Policy for Sedation and Analgesia by Non-Anesthesiologists

USE OF FLUOROSCOPY

- Requested** Requires maintenance of a valid x-ray supervisor and operator's license.

VASCULAR SURGERY CLINICAL PRIVILEGES

Name: _____

Page 3

Effective From ___/___/_____ To ___/___/_____

VASCULAR SURGERY CORE PROCEDURE LIST

This list is a sampling of procedures included in the core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

To the applicant: If you wish to exclude any procedures, please strike through those procedures which you do not wish to request, initial, and date.

- Major and minor amputations, upper extremity, lower extremity (excluding hip disarticulations)
- Aneurysm repair, aortic and peripheral Aortic/thoracic *PMCE
- Angioplasty, stent and atherectomy of peripheral vessels *PMCE
- Bypass grafting all vessels excluding coronary and intracranial vessels *PMCE
- Carotid endarterectomy *PMCE
- Central venous access catheters and ports
- Cervical, thoracic or lumbar sympathectomy *PMCE
- Diagnostic biopsy or other diagnostic procedures
- Embolectomy or thrombectomy for all vessels excluding coronary vessels
- Endarterectomy for all vessels excluding coronary vessels *PMCE
- Extra cranial carotid and vertebral artery surgery *PMCE
- Hemodialysis access procedures
- Angiography and venography
- Sympathectomy
- Muscle flap creation
- Major open and endovascular vascular arterial and venous reconstructions
- Perform history and physical exam
- Placement and removal of inferior vena cava (IVC) filter
- Reconstruction, resection, repair of arterial and venous vessels with anastomosis or replacement (excluding cardiopulmonary))
- Sclerotherapy
- Skin grafts
- Spinal access (thoracic and lumbar) *PMCE
- Temporal artery biopsy
- Carotid stenting *PMCE
- Transcarotid artery revascularization (TCAR) *PMCE
- Thoracic outlet decompression procedures including rib resection *PMCE
- Vein ligation and stripping
- Venous reconstruction

*PMCE = Available at Palomar Medical Center Escondido Only

VASCULAR SURGERY CLINICAL PRIVILEGES

Name: _____

Page 4

Effective From ___/___/_____ To ___/___/_____

ACKNOWLEDGEMENT OF PRACTITIONER

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at Palomar Health, and I understand that:

- a. In exercising any clinical privileges granted, I am constrained by Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.

Signed _____

Date _____

PALOMAR HEALTH

CERTIFIED NURSE MIDWIFE (CNM) CLINICAL PRIVILEGES

Name: _____

Page 1

Effective From ____/____/____ To ____/____/____

- Palomar Medical Center Escondido
- Palomar Medical Center Poway

- Initial Appointment
- Reappointment

Applicant: Check off the "Requested" box for each privilege requested. Applicants have the burden of producing information deemed adequate by the Hospital for a proper evaluation of current competence, current clinical activity, and other qualifications and for resolving any doubts related to qualifications for requested privileges.

Department Chair: Check the appropriate box for recommendation on the last page of this form. If recommended with conditions or not recommended, provide condition or explanation on the last page of this form.

Other Requirements

- Note that privileges granted may only be exercised at the site(s) and/or setting(s) that have the appropriate equipment, license, beds, staff and other support required to provide the services defined in this document. Site-specific services may be defined in hospital and/or department policy.
- This document is focused on defining qualifications related to competency to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.

QUALIFICATIONS FOR CERTIFIED NURSE MIDWIFE

To be eligible to apply for clinical privileges as a Certified Nurse Midwife (CNM) in OB/Gyn, the applicant must meet the following criteria:

- Successful completion of a nurse-midwifery education program accredited by the American Commission of Midwifery Education (ACME) Division of Accreditation (DOA).
- Successful completion of an approved CNM Cesarean Section First Assistant training program to request First Assist Cesarean Section, Tubal Ligation, and Laceration Repair privileges under **Advanced** Core Privileges.
- Possession of a valid California Nursing license as a Registered Nurse
- Certification by the state of California, Board of Registered Nursing, as a Certified Nurse Midwife
- Possession of a valid Furnishing Number from the State of California (Note: if the nurse midwife is newly certified and not yet eligible to apply for a Furnishing Number, they must successfully obtain same as soon as they are eligible.)
- Certification as a Nurse Midwife, or active participation in the examination process with achievement of board certification from the American Midwifery Certification Board (AMCB), formerly ACNM Certification Council, within 12 months of appointment.
- BLS and NRP Certification
- Professional liability insurance coverage issued by a recognized company and of a type and in an amount equal to or greater than the limits established by the governing body (1 million / 3 million).
- Completion of an AWHONN/ACOG approved fetal monitoring course that includes National Institute of Child Health and Human Development (NICHD) nomenclature on the interpretation of fetal monitoring.

CERTIFIED NURSE MIDWIFE (CNM) CLINICAL PRIVILEGES

Name: _____

Page 2

Effective From ____/____/____ To ____/____/____

Required Previous Experience: Applicants for initial appointment must be able to demonstrate provision of care, treatment of services, as a Nurse Midwife for at least 20 successful deliveries in the past 12 months, or completion of an approved nurse-midwifery education program in the past 12 months.

Focused Professional Practice Evaluation (FPPE) / Monitoring guidelines: No less than ten (10) cases required for intra-partum management and vaginal deliveries, as well as performing ultrasounds representative of the scope of practice will be monitored concurrently by the sponsoring physician.

Reappointment Requirements: To be eligible to renew core privileges as a nurse midwife in ob/gyn, the applicant must meet the following maintenance of privilege criteria:

Current demonstrated competence and an adequate volume of experience (40 patients) with acceptable results reflective of the scope of privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges. Completion of an AWHONN/ACOG approved fetal monitoring course that includes National Institute of Child Health and Human Development (NICHD) nomenclature on the interpretation of fetal monitoring (every 2 years). Maintenance of BLS and NRP certification is required.

CERTIFIED NURSE MIDWIFE (CNM) CORE PRIVILEGES — OB/GYN

- Requested** Core Privileges for Certified Nurse Midwives includes the admission, diagnostic evaluation, consultation as indicated and treatment of patients as delegated by an attending physician. This will include managing patients with complex, acute, and chronic health conditions and may be in a variety of clinical settings. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.

ADVANCED CERTIFIED NURSE MIDWIFE (CNM) CORE PRIVILEGES — OB/GYN

- Requested** Additional privileges not included in the general core privileges for Certified Nurse Midwives will include the performance of diagnostic and therapeutic procedures as appropriate to current role for which privileges are being requested. The core privileges in this specialty include the procedures on the attached advanced procedure list and such other procedures that are extensions of the same techniques and skills.

To be eligible to apply for Advanced CNM core privileges, the initial applicant must meet the following criteria:

As per Certified Nurse Midwife Core criteria

AND

Documentation obtained of training by one of the following methods: 1) Letter from education program director stating that the applicant received training in the advanced procedures during midwifery training program if within 12 months of training; 2) Certificate of completion for specialized training program; 3) Letter from previous employer stating applicant successfully completed training and monitoring during employment; or 4) Letter from current nurse midwifery service director/faculty physician stating that training has been completed as part of current employment.

CERTIFIED NURSE MIDWIFE (CNM) CLINICAL PRIVILEGES

Name: _____

Page 3

Effective From ____/____/____ To ____/____/____

Focused Professional Practice Evaluation (FPPE) / Monitoring guidelines: Monitoring of ten (10) Advanced procedures monitored concurrently by the sponsoring physician.

Reappointment Requirements: To be eligible to renew Advanced CNM core privileges, the applicant must meet the following maintenance of privilege criteria:

Current demonstrated competence and an adequate volume of experience 12 advanced procedure cases with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes.

PRESCRIPTIVE AUTHORITY AS DELEGATED BY A PHYSICIAN IN A WRITTEN AGREEMENT IN ACCORDANCE WITH STATE AND FEDERAL LAW

Requested The delegation to the CNM to administer or dispense drugs shall include schedules II - V. The certified nurse midwife dispensing scheduled controlled drugs II-V must have a DEA number in addition to a Furnishing Number.

Affiliation with Medical Staff Appointee / Supervision

The exercise of these clinical privileges requires a designated sponsoring physician with clinical privileges at this hospital in the same area of specialty practice. All practice is performed under the supervision of this physician/designee and in accordance with agreed upon protocols.

In addition, the sponsoring physician must:

- Participate as requested in the evaluation of competency (i.e., at the time of reappointment and, as applicable, at intervals between reappointment, as necessary);
- Be physically present, on hospital premises or readily available by electronic communication to provide consultation when requested and to intervene when necessary;
- Assume total responsibility for the care of any patient when requested or required by the policies referenced above, or in the interest of patient care;
- Sign the privilege request of the practitioner he/she supervises, accepting responsibility for appropriate supervision of the services provided under his/her supervision and agrees that the supervised practitioner will not exceed the scope of practice defined by law (within his/her licensing agreement — i.e., supervising agreement);
- Co-sign entries on the medical record of all patients seen or treated by the supervised practitioner in accordance with organizational policies.

Medical Record Charting Responsibilities

Clearly, legibly, completely, and in timely fashion, the CNM must describe each service provided to a patient in the hospital and relevant observations. Standard rules regarding authentication of, necessary content of, and required time frames for preparing and completing the medical record and portions thereof are applicable to all entries made. All orders are to be countersigned by sponsoring physician in accordance with hospital policy.

CERTIFIED NURSE MIDWIFE (CNM) CLINICAL PRIVILEGES

Name: _____

Page 4

Effective From ____/____/____ To ____/____/____

CORE PROCEDURE LIST

This list is a sampling of procedures included in the core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

To the applicant: If you wish to exclude any procedures, please strike through those procedures which you do not wish to request, initial, and date.

- As ordered by the supervising physician, perform admission functions of the low risk obstetrical patient, including performing the admission history and physical examination
- Admitting routine induction of labor patients (elective inductions or late term induction of labor)
- Amniotomy
- Amnioinfusion
- Diagnostic testing and screening
- Emergency management related to labor and delivery
- External fetal and uterine monitor application
- Family planning counsel, including but not limited to: barrier, chemical, hormonal, mechanical, physiologic, surgical counseling (for postpartum rounding)
- **First-Assist cesarean section, tubal ligation, and laceration repair**
- Induction or augmentation of uncomplicated labor patients after consultation with the sponsoring physician
- Internal fetal scalp electrode application
- Internal uterine pressure catheterization
- Intrapartum care of the low risk obstetrical patient that includes, but is not limited to: order/administer necessary anesthesia and analgesia; episiotomy performance; labor diagnosis assessment, and progress; laceration repair (cervical, vaginal, perineal: 3rd degree and 4th degree lacerations need to be repaired or supervised by MD/DO); manage labor; maternal and fetal status assessment during labor; psychosocial support during labor and delivery; spontaneous vaginal delivery; third-stage management.
- IUD insertion
- Local perineal infiltration
- Order cervical ripening agents
- Ordering Rh immune globulin
- Order tocolytic agents for uterine relaxation for hyperstimulation or prevention of labor after consultation with sponsoring physician.
- Perform any procedure normally done by labor and delivery staff nurses
- Postpartum care of the low risk obstetrical patient that includes, but is not limited to: complication management; counsel patient on lactation and newborn care and feeding; puerperium discomfort management; self-care.
- Prescriptive privileges as defined by the state of California
- Provision of primary health care services for all women of different ages, particularly during pregnancy, childbirth, and care of the newborn. This includes medical consultation, collaboration and referral when appropriate.
- Sexually transmitted disease screening and treatment
- Subcutaneous contraceptive implant insertion and removal
- Vaginal examinations

CERTIFIED NURSE MIDWIFE (CNM) CLINICAL PRIVILEGES

Name: _____

Page 5

Effective From ____/____/____ To ____/____/____

ADVANCED CORE PROCEDURE LIST

This list is a sampling of procedures included in the advanced core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

To the applicant: If you wish to exclude any procedures, please strike through those procedures which you do not wish to request, initial, and date.

- Biophysical profile
- Colposcopy
- Endometrial biopsy
- ~~First-Assist cesarean section, tubal ligation, and laceration repair~~
- First trimester ultrasound
- Insertion of laminaria
- Resuscitation, newborn
- Skin lesion biopsy
- Ultrasound amniotic fluid index assessment
- Ultrasound for biometry, fetal position and/or placenta localization
- Word catheter placement

ACKNOWLEDGEMENT OF PRACTITIONER

I have requested only those clinical privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at Palomar Health, and I understand that:

- a. In exercising any clinical privileges granted and in carrying out the responsibilities assigned to me, I am constrained by Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the policies governing privileged allied health professionals.

Signed _____ **Date** _____

ENDORSEMENT OF PHYSICIAN EMPLOYER(S)/SUPERVISOR(S)

Signed _____ **Date** _____

Signed _____ **Date** _____

PALOMAR HEALTH

CERTIFIED NURSE MIDWIFE (CNM) CLINICAL PRIVILEGES

Name: _____

Page 1

Effective From ___/___/_____ To ___/___/_____

- Palomar Medical Center Escondido
- Palomar Medical Center Poway

- Initial Appointment
- Reappointment

Applicant: Check off the "Requested" box for each privilege requested. Applicants have the burden of producing information deemed adequate by the Hospital for a proper evaluation of current competence, current clinical activity, and other qualifications and for resolving any doubts related to qualifications for requested privileges.

Department Chair: Check the appropriate box for recommendation on the last page of this form. If recommended with conditions or not recommended, provide condition or explanation on the last page of this form.

Other Requirements

- Note that privileges granted may only be exercised at the site(s) and/or setting(s) that have the appropriate equipment, license, beds, staff and other support required to provide the services defined in this document. Site-specific services may be defined in hospital and/or department policy.
- This document is focused on defining qualifications related to competency to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.

QUALIFICATIONS FOR CERTIFIED NURSE MIDWIFE

To be eligible to apply for clinical privileges as a Certified Nurse Midwife (CNM) in OB/Gyn, the applicant must meet the following criteria:

- Successful completion of a nurse-midwifery education program accredited by the American Commission of Midwifery Education (ACME) Division of Accreditation (DOA).
- Successful completion of an approved CNM Cesarean Section First Assistant training program to request First Assist Cesarean Section, Tubal Ligation, and Laceration Repair privileges under Core Privileges.
- Possession of a valid California Nursing license as a Registered Nurse
- Certification by the state of California, Board of Registered Nursing, as a Certified Nurse Midwife
- Possession of a valid Furnishing Number from the State of California (Note: if the nurse midwife is newly certified and not yet eligible to apply for a Furnishing Number, they must successfully obtain same as soon as they are eligible.)
- Certification as a Nurse Midwife, or active participation in the examination process with achievement of board certification from the American Midwifery Certification Board (AMCB), formerly ACNM Certification Council, within 12 months of appointment.
- BLS and NRP Certification
- Professional liability insurance coverage issued by a recognized company and of a type and in an amount equal to or greater than the limits established by the governing body (1 million / 3 million).
- Completion of an AWHONN/ACOG approved fetal monitoring course that includes National Institute of Child Health and Human Development (NICHD) nomenclature on the interpretation of fetal monitoring.

CERTIFIED NURSE MIDWIFE (CNM) CLINICAL PRIVILEGES

Name: _____

Page 2

Effective From ___/___/_____ To ___/___/_____

Required Previous Experience: Applicants for initial appointment must be able to demonstrate provision of care, treatment of services, as a Nurse Midwife for at least 20 successful deliveries in the past 12 months, or completion of an approved nurse-midwifery education program in the past 12 months.

Focused Professional Practice Evaluation (FPPE) / Monitoring guidelines: No less than ten (10) cases required for intra-partum management and vaginal deliveries, as well as performing ultrasounds representative of the scope of practice will be monitored concurrently by the sponsoring physician.

Reappointment Requirements: To be eligible to renew core privileges as a nurse midwife in ob/gyn, the applicant must meet the following maintenance of privilege criteria:

Current demonstrated competence and an adequate volume of experience (40 patients) with acceptable results reflective of the scope of privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges. Completion of an AWHONN/ACOG approved fetal monitoring course that includes National Institute of Child Health and Human Development (NICHD) nomenclature on the interpretation of fetal monitoring (every 2 years). Maintenance of BLS and NRP certification is required.

CERTIFIED NURSE MIDWIFE (CNM) CORE PRIVILEGES — OB/GYN

- Requested** Core Privileges for Certified Nurse Midwives includes the admission, diagnostic evaluation, consultation as indicated and treatment of patients as delegated by an attending physician. This will include managing patients with complex, acute, and chronic health conditions and may be in a variety of clinical settings. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.

ADVANCED CERTIFIED NURSE MIDWIFE (CNM) CORE PRIVILEGES — OB/GYN

- Requested** Additional privileges not included in the general core privileges for Certified Nurse Midwives will include the performance of diagnostic and therapeutic procedures as appropriate to current role for which privileges are being requested. The core privileges in this specialty include the procedures on the attached advanced procedure list and such other procedures that are extensions of the same techniques and skills.

To be eligible to apply for Advanced CNM core privileges, the initial applicant must meet the following criteria:

As per Certified Nurse Midwife Core criteria

AND

Documentation obtained of training by one of the following methods: 1) Letter from education program director stating that the applicant received training in the advanced procedures during midwifery training program if within 12 months of training; 2) Certificate of completion for specialized training program; 3) Letter from previous employer stating applicant successfully completed training and monitoring during employment; or 4) Letter from current nurse midwifery service director/faculty physician stating that training has been completed as part of current employment.

CERTIFIED NURSE MIDWIFE (CNM) CLINICAL PRIVILEGES

Name: _____

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Effective From ___/___/_____ To ___/___/_____

Focused Professional Practice Evaluation (FPPE) / Monitoring guidelines: Monitoring of ten (10) Advanced procedures monitored concurrently by the sponsoring physician.

Reappointment Requirements: To be eligible to renew Advanced CNM core privileges, the applicant must meet the following maintenance of privilege criteria:

Current demonstrated competence and an adequate volume of experience 12 advanced procedure cases with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes.

PRESCRIPTIVE AUTHORITY AS DELEGATED BY A PHYSICIAN IN A WRITTEN AGREEMENT IN ACCORDANCE WITH STATE AND FEDERAL LAW

- Requested** The delegation to the CNM to administer or dispense drugs shall include schedules II - V. The certified nurse midwife dispensing scheduled controlled drugs II-V must have a DEA number in addition to a Furnishing Number.

Affiliation with Medical Staff Appointee / Supervision

The exercise of these clinical privileges requires a designated sponsoring physician with clinical privileges at this hospital in the same area of specialty practice. All practice is performed under the supervision of this physician/designee and in accordance with agreed upon protocols.

In addition, the sponsoring physician must:

- Participate as requested in the evaluation of competency (i.e., at the time of reappointment and, as applicable, at intervals between reappointment, as necessary);
- Be physically present, on hospital premises or readily available by electronic communication to provide consultation when requested and to intervene when necessary;
- Assume total responsibility for the care of any patient when requested or required by the policies referenced above, or in the interest of patient care;
- Sign the privilege request of the practitioner he/she supervises, accepting responsibility for appropriate supervision of the services provided under his/her supervision and agrees that the supervised practitioner will not exceed the scope of practice defined by law (within his/her licensing agreement — i.e., supervising agreement);
- Co-sign entries on the medical record of all patients seen or treated by the supervised practitioner in accordance with organizational policies.

Medical Record Charting Responsibilities

Clearly, legibly, completely, and in timely fashion, the CNM must describe each service provided to a patient in the hospital and relevant observations. Standard rules regarding authentication of, necessary content of, and required time frames for preparing and completing the medical record and portions thereof are applicable to all entries made. All orders are to be countersigned by sponsoring physician in accordance with hospital policy.

CERTIFIED NURSE MIDWIFE (CNM) CLINICAL PRIVILEGES

Name: _____

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Effective From ____/____/____ To ____/____/____

CORE PROCEDURE LIST

This list is a sampling of procedures included in the core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

To the applicant: If you wish to exclude any procedures, please strike through those procedures which you do not wish to request, initial, and date.

- As ordered by the supervising physician, perform admission functions of the low risk obstetrical patient, including performing the admission history and physical examination
- Admitting routine induction of labor patients (elective inductions or late term induction of labor)
- Amniotomy
- Amnioinfusion
- Diagnostic testing and screening
- Emergency management related to labor and delivery
- External fetal and uterine monitor application
- Family planning counsel, including but not limited to: barrier, chemical, hormonal, mechanical, physiologic, surgical counseling (for postpartum rounding)
- First-Assist cesarean section, tubal ligation, and laceration repair
- Induction or augmentation of uncomplicated labor patients after consultation with the sponsoring physician
- Internal fetal scalp electrode application
- Internal uterine pressure catheterization
- Intrapartum care of the low risk obstetrical patient that includes, but is not limited to: order/administer necessary anesthesia and analgesia; episiotomy performance; labor diagnosis assessment, and progress; laceration repair (cervical, vaginal, perineal: 3rd degree and 4th degree lacerations need to be repaired or supervised by MD/DO); manage labor; maternal and fetal status assessment during labor; psychosocial support during labor and delivery; spontaneous vaginal delivery; third-stage management.
- IUD insertion
- Local perineal infiltration
- Order cervical ripening agents
- Ordering Rh immune globulin
- Order tocolytic agents for uterine relaxation for hyperstimulation or prevention of labor after consultation with sponsoring physician.
- Perform any procedure normally done by labor and delivery staff nurses
- Postpartum care of the low risk obstetrical patient that includes, but is not limited to: complication management; counsel patient on lactation and newborn care and feeding; puerperium discomfort management; self-care.
- Prescriptive privileges as defined by the state of California
- Provision of primary health care services for all women of different ages, particularly during pregnancy, childbirth, and care of the newborn. This includes medical consultation, collaboration and referral when appropriate.
- Sexually transmitted disease screening and treatment
- Subcutaneous contraceptive implant insertion and removal
- Vaginal examinations

CERTIFIED NURSE MIDWIFE (CNM) CLINICAL PRIVILEGES

Name: _____

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Effective From ___/___/_____ To ___/___/_____

ADVANCED CORE PROCEDURE LIST

This list is a sampling of procedures included in the advanced core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

To the applicant: If you wish to exclude any procedures, please strike through those procedures which you do not wish to request, initial, and date.

- Biophysical profile
- Colposcopy
- Endometrial biopsy
- First trimester ultrasound
- Insertion of laminaria
- Resuscitation, newborn
- Skin lesion biopsy
- Ultrasound amniotic fluid index assessment
- Ultrasound for biometry, fetal position and/or placenta localization
- Word catheter placement

ACKNOWLEDGEMENT OF PRACTITIONER

I have requested only those clinical privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at Palomar Health, and I understand that:

- a. In exercising any clinical privileges granted and in carrying out the responsibilities assigned to me, I am constrained by Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the policies governing privileged allied health professionals.

Signed _____ **Date** _____

ENDORSEMENT OF PHYSICIAN EMPLOYER(S)/SUPERVISOR(S)

Signed _____ **Date** _____

Signed _____ **Date** _____

ADDENDUM C

**PROFESSIONAL SERVICES AGREEMENT
BEHAVIORAL HEALTH UNIT
PALOMAR HOSPITAL PARTNERS, INC.**

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, MBA, Chief Medical Officer

Background: Palomar Health desires to provide continuous twenty-four hour inpatient services to the members of the community who require medical and hospital services through Hospital’s medical staff and behavioral health units in accordance with the Medical Staff by-laws, rules and regulations, policies and procedures of Palomar Health.

This agreement will provide complete and integrated behavioral health services, provided by a group of physicians and Allied Health Professionals who strive for excellence in the provision of quality inpatient behavioral health services, for all Unassigned Patients and all patients referred by community outpatient physicians, or other physicians who do not have admitting privileges or who choose to refer patients to the Physicians for consultative services at Hospital’s behavioral health facility, regardless of patients’ insurance status or ability to pay.

Budget Impact: Budgeted.

Staff Recommendation:

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
Title	TITLE	Professional Services Agreement Behavioral Health Unit
1 st Paragraph	AGREEMENT DATE	June 19, 2022
1 st Paragraph	PARTIES	Palomar Health, a California local healthcare district ("PH"), and Palomar Hospital Partners, Inc. ("Group").
Recitals Paragraph 1	PURPOSE	PH desires to provide continuous twenty-four hour inpatient services to the members of the community who require medical and hospital services through Hospital's medical staff and behavioral health units.
Recitals Paragraph 3	SCOPE OF SERVICES	To provide complete and integrated behavioral health services provided by a group of physicians and Allied Health Professionals who strive for excellence in the provision of quality inpatient behavioral health services. Physicians shall provide integrated, comprehensive inpatient Services for all Unassigned Patients and all patients referred by community outpatient physicians, or other physicians who do not have admitting privileges or who choose to refer patients to the Physicians for consultative services at Hospital's behavioral health facility, regardless of patients' insurance status or ability to pay.
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	Evergreen, beginning June 19, 2022
	RENEWAL	None.
2.A.	TERMINATION	After the Initial Term of this Agreement <u>only</u> , either Party may terminate this Agreement by providing no less than one hundred eighty (180) days' written notice of termination to the other Party, in which case this Agreement will terminate at the end of the applicable notice period.
10.F.	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – DATE COMPLETED: 9/7/2022
10.F	COMPENSATION METHODOLOGY	Fair Market Value. Group shall compensate each Physician affiliated with Group, including but not limited to any physician shareholder, member, partner, employee and/or independent contractor, in a manner that is commercially reasonable and consistent with fair market value, and what Group can afford to pay based upon its collections and that does not vary with or reflect or relate to either directly or indirectly the volume or value of any actual or anticipated patient referrals to, or other business generated for, the Hospital.
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
Recitals Paragraph 2	JUSTIFICATION	A community need exists for behavioral health services for patients requiring admission to the Hospital.
	AGREEMENT NOTICED	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Methodology & Response:
	ALTERNATIVES/IMPACT	N/A
	Duties	<input type="checkbox"/> Provision for Staff Education <input type="checkbox"/> Provision for Medical Staff Education <input type="checkbox"/> Provision for participation in Quality Improvement <input type="checkbox"/> Provision for participation in budget process development
	COMMENTS	None.
	APPROVALS REQUIRED	<input type="checkbox"/> VP <input checked="" type="checkbox"/> CFO <input type="checkbox"/> CEO <input checked="" type="checkbox"/> BOD-Committee – X-Finance; <input checked="" type="checkbox"/> BOD

**Medical Director Agreement
Respiratory/Pulmonary Services
Frank Bender, M.D. (Amend 2)**

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, MBA, Chief Medical Officer

Background: This second amendment to the Medical Director Agreement of Respiratory and Pulmonary services will include the medical directorship of Outpatient Pulmonary Rehab Services (“Program”). The Medical Director shall deliver high quality services to eligible patient participants of the outpatient pulmonary rehab program along with other medical administrative responsibilities as outlined in the agreement to the reasonable satisfaction of the Hospital to include but not limited to clinical expertise and oversight to multidisciplinary pulmonary rehab staff as required, assist with program development, communicate with Palomar Health referring physicians regarding pulmonary rehab benefits for patients, provide oversight of the ITP process to ensure regulatory compliance, assist with department education of staff and patients, provide recommendations for department policies/procedures, and monitor outcomes of key program metrics.

Budget Impact: Budgeted

Staff Recommendation:

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	<ol style="list-style-type: none"> 1. Escondido Pulmonary & Sleep Specialists, Inc. (EPSS) Bender, Frank M.D. - Respiratory & Pulmonary Services - Medical Director Agrmt - 11.29.2018 2. Escondido Pulmonary & Sleep Specialists, Inc. (EPSS) Bender, Frank M.D. - Respiratory & Pulmonary Services - Medical Director Agrmt - 9.1.2020 3. Escondido Pulmonary & Sleep Specialists, Inc. (EPSS) Bender, Frank M.D. - Respiratory & Pulmonary Services - Amendment 1 to Medical Director Agrmt 9.1.2020 - 4.22.2022 4. Escondido Pulmonary & Sleep Specialists, Inc. (EPSS) Bender, Frank M.D. - Respiratory & Pulmonary Services - Amendment 2 to Medical Director Agrmt 9.1.2020 - 9.1.2022
	AGREEMENT DATE	<ol style="list-style-type: none"> 1. November 29, 2018 2. September 1, 2020 3. May 4, 2022 4. September 1, 2022
	PARTIES	Palomar Health and Escondido Pulmonary and Sleep Specialists, Inc. (EPSS) with respect to Frank Bender, M.D.
	PURPOSE	Physician leadership and support of the Respiratory/Pulmonary Program which includes the Outpatient Pulmonary Rehab medical directorship.
	SCOPE OF SERVICES	Physician shall serve as Medical Director of Program and be responsible for the medical direction of Program and performance of all other medical administrative services set forth in this Agreement, including medical directorship of the Outpatient Pulmonary Rehab set forth.
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	<ol style="list-style-type: none"> 1. November 29, 2018 – August 31, 2020 2. September 1, 2020 – August 31, 2022 3. May 4, 2022 – May 31, 2023 4. September 1, 2022 – August 31, 2024
	RENEWAL	None
	TERMINATION	Either party may terminate this Agreement without cause upon thirty (30) days' prior written notice.
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – DATE COMPLETED: 09-06-2022
	COMPENSATION METHODOLOGY	Physician prepares and submits complete and accurate time logs, documenting separately all time spent providing Medical Director services for the Program.
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
	JUSTIFICATION	Hospital owns and operates several acute hospitals and other facilities which require physician leadership and support of the Respiratory/Pulmonary Services ("Program").
	AGREEMENT NOTICED	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Methodology & Response:
	ALTERNATIVES/IMPACT	N/A
	Duties	<ul style="list-style-type: none"> x Provision for Staff Education x Provision for Medical Staff Education x Provision for participation in Quality Improvement x Provision for participation in budget process development
	COMMENTS	None.
	APPROVALS REQUIRED	X-VP X-CFO <input type="checkbox"/> CEO X-BOD Committee – Finance; X-BOD

**MEDICAL DIRECTOR AGREEMENT - JAMES BRIED, M.D. (Amend 1)
ORTHOPEDIC ACUTE CARE PROGRAM**

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, MBA, Chief Medical Officer

Background: This amended contract represents the Medical Director Agreement for the Orthopedic Acute Care Program Palomar Medical Center Poway in accordance with the Medical Staff by-laws, rules and regulations, policies, and procedures of Palomar Health. The Medical Director will manage, generally supervise, and direct the medical administrative operations of the Program.

Budget Impact: Budgeted

Staff Recommendation:

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

**ARCH HEALTH PARTNERS, INC. DBA
PALOMAR HEALTH MEDICAL GROUP
RADIATION ONCOLOGY COVERAGE AND
PROFESSIONAL SERVICES AGREEMENT**

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, MBA, Chief Medical Officer

Background: This contract represents the Radiation Oncology Coverage and Professional Services Agreement with Arch Health Partners, Inc. dba Palomar Health Medical Group. Palomar Health desires to retain Group as an independent contractor to provide, on an exclusive basis through its Physicians, certain coverage and professional medical services in the operation of the Departments to support Palomar Health's Radiation Oncology Program.

Budget Impact: Budgeted

Staff Recommendation: Approval

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	Radiation Oncology Coverage and Professional Services Agreement
	AGREEMENT DATE	October 1, 2022
	PARTIES	Palomar Health & Arch Health Partners, Inc. dba Palomar Health Medical Group
	PURPOSE	Provision of Radiation Oncology services
	SCOPE OF SERVICES	Provide exclusive on-site medical services for Radiation Oncology services in inpatient and outpatient clinics
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input type="checkbox"/> Discretionary
	TERM	October 1, 2022 to September 30, 2023
	RENEWAL	Annually upon approval to extend
	TERMINATION	Clause for termination without cause by either party with 90-day written notice
	FAIR MARKET VALUATION	X YES NO – DATE COMPLETED: 3.11.2022
	COMPENSATION METHODOLOGY	Fair Market Value. The parties agree that the terms and provisions of the Agreement are commercially reasonable, and to the best of the Parties' knowledge, the compensation is consistent with fair market value.
	BUDGETED	X YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input type="checkbox"/> NO X YES – EXPLAIN:
	JUSTIFICATION	Physician expertise needed to provide service
	AGREEMENT NOTICED	<input type="checkbox"/> YES X NO Methodology & Response:
	ALTERNATIVES/IMPACT	N/A
	Duties	X Provision for Staff Education X Provision for Medical Staff Education X Provision for participation in Quality Improvement X Provision for participation in budget process development
	COMMENTS	
	APPROVALS REQUIRED	<input type="checkbox"/> VP <input type="checkbox"/> CFO <input type="checkbox"/> CEO <input type="checkbox"/> BOD Committee _____ <input type="checkbox"/> BOD

**CALL COVERAGE AGREEMENT
ELECTROPHYSIOLOGY**

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, MBA, Chief Medical Officer

Background: This contract represents the Call Coverage Agreement with Arch Health Partners, Inc. dba Palomar Health Medical Group. Group shall identify and provide qualified Physicians to participate in Palomar Health’s on-call program and render on-call electrophysiological services to Palomar Health’s patients according to a reasonable call schedule developed by the parties, and to otherwise provide the services required in the Agreement.

Budget Impact: Budgeted.

Staff Recommendation: Approval

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	ELECTROPHYSIOLOGY (EP) CALL COVERAGE AGREEMENT
	AGREEMENT DATE	October 1, 2022
	PARTIES	Palomar Health, a California healthcare district and Arch Health Partners, Inc. dba Palomar Health Medical Group, a California nonprofit corporation.
	PURPOSE	Palomar Health desires to ensure that physicians practicing in the specialty of electrophysiology are available and on call to provide needed medical services at Palomar Medical Center Escondido and Palomar Medical Center Poway by contracting with Group to provide such services per the terms of Agreement.
	SCOPE OF SERVICES	Group shall identify and provide qualified Physicians to participate in Palomar Health’s on-call program and render on-call electrophysiological services to Palomar Health’s patients according to a reasonable call scheduled developed by the parties, and to otherwise provide the services required by in the Agreement.
	PROCUREMENT METHOD	<input checked="" type="checkbox"/> Request For Proposal <input type="checkbox"/> Discretionary
	TERM	October 1, 2022 – September 30, 2023
	RENEWAL	None.
	TERMINATION	Either party may, in its sole discretion, upon the completion of the Initial Term only, terminate this Agreement without cause by giving the other party at least 180 days’ prior written notice.
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – DATE COMPLETED: APRIL 19, 2023
	COMPENSATION METHODOLOGY	Fair Market Value. The parties agree that the terms and provisions of the Agreement are commercially reasonable, and to the best of the Parties’ knowledge, the compensation is consistent with fair market value.
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
	JUSTIFICATION	Hospital desires to retain Group as an independent contractor to provide, through its Physicians, certain coverage services (“Services”) in the specialty of electrophysiology (EP) (the “EP Program”).
	AGREEMENT NOTICED	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Methodology & Response:
	ALTERNATIVES/IMPACT	N/A
	Duties	<input type="checkbox"/> Provision for Staff Education <input type="checkbox"/> Provision for Medical Staff Education <input type="checkbox"/> Provision for participation in Quality Improvement <input type="checkbox"/> Provision for participation in budget process development
	COMMENTS	None.
	APPROVALS REQUIRED	<input checked="" type="checkbox"/> VP <input checked="" type="checkbox"/> X-CFO <input type="checkbox"/> CEO <input checked="" type="checkbox"/> X-BOD-Committee – Finance; <input checked="" type="checkbox"/> X-BOD

**Emergency and Stroke on Call Agreement
North County Neurology Associates dba The Neurology Center of
Southern California (Amend 2)**

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, MBA
Chief Medical Officer

Background: Palomar Medical Center Escondido and Palomar Medical Center Poway have been designated as a Primary Stroke Centers by San Diego County. Pursuant to State and Federal law the hospitals have established specialty physician on-call panels in order to assure the availability of adequate physician coverage for emergency department patients. This second amended agreement will provide for Emergency and Stroke on-call coverage for unassigned inpatients requiring specialty consultations and stroke care. This coverage will be provided by the North County Neurology Associates dba The Neurology Center of Southern California.

Budget Impact: Budgeted

Staff Recommendation: Recommend approval.

Committee Questions/Suggestions/Requests:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH - AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	<ol style="list-style-type: none"> 1. North County Neurology Associates DBA The Neurology Center - Emergency & Stroke On-Call Agreement - 10.1.2013 2. North County Neurology Associates d/b/a The Neurology Center - Amend 1 to Emergency & Stroke On-Call Agreement 10.1.2013 - 10.1.2014 3. North County Neurology Associates dba The Neurology Center of Southern California – Amend 2 to Emergency and Stroke Call Coverage Agreement 7.1.2019 - 11.1.2022
	AGREEMENT DATE	<ol style="list-style-type: none"> 1. October 1, 2013 2. October 1, 2014 3. November 1, 2022
	PARTIES	Palomar Health and North County Neurology Associates dba The Neurology Center of Southern California
	PURPOSE	PH desires to ensure that physicians practicing in the specialty of neurology are available and on call to provide needed medical services at the emergency departments of both hospitals by contracting with the Group to provide such services per the terms of the agreement.
	SCOPE OF SERVICES	Group shall identify and provide qualified Physicians to participate in PH's on-call program and render on-call neurology services to PH's patients according to a reasonable call schedule developed by the parties, and to otherwise provide the services required by the agreement.
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	<ol style="list-style-type: none"> 1. October 1, 2013 – September 30, 2016 2. October 1, 2014 - September 30, 2016 3. November 1, 2022 – June 30, 2025
	RENEWAL	None
	TERMINATION	This agreement may be terminated by either party without penalty with a 30 day written notice.
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No – Date Completed: 11-12-2022
	COMPENSATION METHODOLOGY	Daily per diem based on Fair Market Value and Commercial Reasonableness.
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN: Specialty Physician
	JUSTIFICATION	Palomar Health has established specialty physician on-call panels in order to assure the availability of adequate physician coverage for emergency department patients.
	AGREEMENT NOTICED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Methodology & Response:
	ALTERNATIVES/IMPACT	None
	Duties	<input type="checkbox"/> Provision for Staff Education – NA <input type="checkbox"/> Provision for Medical Staff Education - NA <input type="checkbox"/> Provision for participation in Quality Improvement - NA <input type="checkbox"/> Provision for participation in budget process development - NA
	COMMENTS	This contract covers Palomar Medical Center Escondido and Palomar Medical Center Poway.
	APPROVALS REQUIRED	<input checked="" type="checkbox"/> VP <input checked="" type="checkbox"/> CFO <input type="checkbox"/> CEO <input checked="" type="checkbox"/> BOD Committee Finance <input checked="" type="checkbox"/> BOD

**ANESTHESIA COVERAGE AND DIRECTOR SERVICES AGREEMENT
ARCH HEALTH PARTNERS, INC.
DBA PALOMAR HEALTH MEDICAL GROUP (AMEND 1)**

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, MBA, Chief Medical Officer

Background: Hospital desires to retain Group as an independent contractor to provide on an exclusive basis through its Physicians certain administrative services and professional Anesthesia medical services in the operation of the Departments and has determined that this proposed arrangement with Group shall enhance the Departments' and each Facility's organization, procedure standardization, economic efficiency, professional proficiency, and provide other benefits to enhance coordination and cooperation among the Departments' providers and users.

Budget Impact: Budgeted

Staff Recommendation:

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	1. Palomar Health Medical Group (PHMG) fka Arch Health Partners, Inc. - Anesthesia Coverage & Director Svcs Agreement - 11.1.2021 2. Palomar Health Medical Group (PHMG) fka Arch Health Partners, Inc. - Amend 1 to Anesthesia Coverage Agmt 11.1.2021 - 11.1.2022
	AGREEMENT DATE	1. November 1, 2021 2. November 1, 2022
	PARTIES	Palomar Health and Arch Health Partners, Inc. dba Palomar Health Medical Group
	PURPOSE	Hospital desires to retain Group as an independent contractor to provide on an exclusive basis through its Physicians, certain administrative services and professional Anesthesia medical services in the operation of the Department.
	SCOPE OF SERVICES	Professional Services and Medical Director Duties
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	1. November 1, 2021 – October 31, 2024 2. November 1, 2022 – November 1, 2024
	RENEWAL	None
	TERMINATION	Either party may terminate this Agreement at any time without cause by providing no less than one hundred eighty (180) days' written notice to the other party.
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – DATE COMPLETED: MAY 2, 2022
	COMPENSATION METHODOLOGY	The Parties hereby acknowledge and agree that the compensation hereunder is the product of bona fide arms-length negotiations and represents a commercially reasonable and fair market value payment for the Professional Services to be furnished hereunder without regard to the volume or value of the federal health care program or any other business generated by and among the Parties.
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
	JUSTIFICATION	Hospital owns and operates an emergency department and/or Trauma Center at two (2) acute care hospitals in the north San Diego community, including Palomar Medical Center Escondido and Palomar Medical Center Poway.
	AGREEMENT NOTICED	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Methodology & Response:
	ALTERNATIVES/IMPACT	N/A
	Duties	<input checked="" type="checkbox"/> Provision for Staff Education <input checked="" type="checkbox"/> Provision for Medical Staff Education <input checked="" type="checkbox"/> Provision for participation in Quality Improvement <input checked="" type="checkbox"/> Provision for participation in budget process development
	COMMENTS	None.
	APPROVALS REQUIRED	X-VP X-CFO <input type="checkbox"/> CEO X-BOD-Committee – Finance; X-BOD

**OPHTHALMOLOGY CALL AGREEMENT
SRINIVAS IYENGAR, M.D.**

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, MBA, Chief Medical Officer

Background: This contract represents the Call Agreement with Srinivas Iyengar, M.D. Physician shall serve as a member of the On-Call Panel at Palomar Medical Center Escondido and Palomar Medical Center Poway on a rotating basis and provide Call Coverage for the specialty of Ophthalmology in accordance with the Medical Staff by-laws, rules and regulations, policies and procedures of Palomar Health.

Call coverage services to PH's patients will be according to a reasonable call schedule developed by the parties, regardless of payor class, to patients not currently assigned to a particular physician, patients who present to the emergency department, and to hospital patients, including inpatients, who may be assigned to a particular physician but who require consultation or other physician services from an on-call panel physician ophthalmology specialist per the terms of this Agreement.

Budget Impact: Budgeted.

Staff Recommendation:

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	Iyengar, Srinivas M.D. - Ophthalmology Call Coverage Agreement
	AGREEMENT DATE	December 1, 2022
	PARTIES	Palomar Health and Srinivas Iyengar, M.D.
	PURPOSE	PH desires to ensure that physicians practicing in the specialty of ophthalmology are available and on call to provide needed medical services at the Emergency Department of Palomar Medical Center Escondido and Palomar Medical Center Poway by contracting with Physician to provide such services per the terms of this Agreement.
	SCOPE OF SERVICES	To provide medical services in the specialty of ophthalmology at Hospital when called by rendering services to PH's patients according to a reasonable call schedule developed by the parties, regardless of payor class, to patients not currently assigned to a particular physician, patients who present to the emergency department, and to hospital patients, including inpatients, who may be assigned to a particular physician but who require consultation or other physician services from an on-call panel physician ophthalmology specialist per the terms of this Agreement and to otherwise provide the services required by this Agreement.
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	December 1, 2022 – November 30, 2024
	RENEWAL	None.
	TERMINATION	Either party may terminate this agreement without cause upon ninety (90) days' prior written notice.
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – DATE COMPLETED: 5/31/2022
	COMPENSATION METHODOLOGY	Fair Market Value. The parties understand and agree that the payments made per this Agreement represent fair market value for legitimate and needed services actually provided without regard to volume or value of referrals or other business generated between the Parties.
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
	JUSTIFICATION	Need for continued Ophthalmology consultation call coverage for the Emergency Departments at PMC Escondido and PMC Poway.
	AGREEMENT NOTICED	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Methodology & Response:
	ALTERNATIVES/IMPACT	N/A
	Duties	<input type="checkbox"/> Provision for Staff Education <input type="checkbox"/> Provision for Medical Staff Education <input type="checkbox"/> Provision for participation in Quality Improvement <input type="checkbox"/> Provision for participation in budget process development
	COMMENTS	None.
	APPROVALS REQUIRED	<input checked="" type="checkbox"/> VP <input checked="" type="checkbox"/> CFO <input type="checkbox"/> CEO <input checked="" type="checkbox"/> BOD-Committee – <input checked="" type="checkbox"/> Finance; <input checked="" type="checkbox"/> BOD

**OPHTHALMOLOGY CALL AGREEMENT
BRIAN B. LE, M.D.**

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, MBA, Chief Medical Officer

Background: This contract represents the Call Agreement with Brian B. Le, M.D. Physician shall serve as a member of the On-Call Panel at Palomar Medical Center Escondido and Palomar Medical Center Poway on a rotating basis and provide Call Coverage for the specialty of Ophthalmology in accordance with the Medical Staff by-laws, rules and regulations, policies and procedures of Palomar Health.

Call coverage services to PH's patients will be according to a reasonable call schedule developed by the parties, regardless of payor class, to patients not currently assigned to a particular physician, patients who present to the emergency department, and to hospital patients, including inpatients, who may be assigned to a particular physician but who require consultation or other physician services from an on-call panel physician ophthalmology specialist per the terms of this Agreement.

Budget Impact: Budgeted.

Staff Recommendation:

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	Le, Brian M.D. - Ophthalmology Call Coverage Agreement
	AGREEMENT DATE	December 1, 2022
	PARTIES	Palomar Health and Brian Le, M.D.
	PURPOSE	PH desires to ensure that physicians practicing in the specialty of ophthalmology are available and on call to provide needed medical services at the Emergency Department of Palomar Medical Center Escondido and Palomar Medical Center Poway by contracting with Physician to provide such services per the terms of this Agreement.
	SCOPE OF SERVICES	To provide medical services in the specialty of ophthalmology at Hospital when called by rendering services to PH's patients according to a reasonable call schedule developed by the parties, regardless of payor class, to patients not currently assigned to a particular physician, patients who present to the emergency department, and to hospital patients, including inpatients, who may be assigned to a particular physician but who require consultation or other physician services from an on-call panel physician ophthalmology specialist per the terms of this Agreement and to otherwise provide the services required by this Agreement.
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	December 1, 2022 – November 30, 2024
	RENEWAL	None.
	TERMINATION	Either party may terminate this agreement without cause upon ninety (90) days' prior written notice.
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – DATE COMPLETED: 5/31/2022
	COMPENSATION METHODOLOGY	Fair Market Value. The parties understand and agree that the payments made per this Agreement represent fair market value for legitimate and needed services actually provided without regard to volume or value of referrals or other business generated between the Parties.
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
	JUSTIFICATION	Need for continued Ophthalmology consultation call coverage for the Emergency Departments at PMC Escondido and PMC Poway.
	AGREEMENT NOTICED	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Methodology & Response:
	ALTERNATIVES/IMPACT	N/A
	Duties	<input type="checkbox"/> Provision for Staff Education <input type="checkbox"/> Provision for Medical Staff Education <input type="checkbox"/> Provision for participation in Quality Improvement <input type="checkbox"/> Provision for participation in budget process development
	COMMENTS	None.
	APPROVALS REQUIRED	<input checked="" type="checkbox"/> VP <input checked="" type="checkbox"/> CFO <input type="checkbox"/> CEO <input checked="" type="checkbox"/> BOD-Committee – <input checked="" type="checkbox"/> Finance; <input checked="" type="checkbox"/> BOD

OPHTHALMOLOGY CALL AGREEMENT

Lillian Lee, M.D.

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, MBA, Chief Medical Officer

Background: This contract represents the Call Agreement with Lillian Lee, M.D. Physician shall serve as a member of the On-Call Panel at Palomar Medical Center Escondido and Palomar Medical Center Poway on a rotating basis and provide Call Coverage for the specialty of Ophthalmology in accordance with the Medical Staff by-laws, rules and regulations, policies and procedures of Palomar Health.

Call coverage services to PH’s patients will be according to a reasonable call schedule developed by the parties, regardless of payor class, to patients not currently assigned to a particular physician, patients who present to the emergency department, and to hospital patients, including inpatients, who may be assigned to a particular physician but who require consultation or other physician services from an on-call panel physician ophthalmology specialist per the terms of this Agreement.

Budget Impact: Budgeted.

Staff Recommendation:

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	Lee, Lillian M.D. - Ophthalmology Call Coverage Agreement
	AGREEMENT DATE	December 1, 2022
	PARTIES	Palomar Health and Lillian Lee, M.D.
	PURPOSE	PH desires to ensure that physicians practicing in the specialty of ophthalmology are available and on call to provide needed medical services at the Emergency Department of Palomar Medical Center Escondido and Palomar Medical Center Poway by contracting with Physician to provide such services per the terms of this Agreement.
	SCOPE OF SERVICES	To provide medical services in the specialty of ophthalmology at Hospital when called by rendering services to PH's patients according to a reasonable call schedule developed by the parties, regardless of payor class, to patients not currently assigned to a particular physician, patients who present to the emergency department, and to hospital patients, including inpatients, who may be assigned to a particular physician but who require consultation or other physician services from an on-call panel physician ophthalmology specialist per the terms of this Agreement and to otherwise provide the services required by this Agreement.
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	December 1, 2022 – November 30, 2024
	RENEWAL	None.
	TERMINATION	Either party may terminate this agreement without cause upon ninety (90) days' prior written notice.
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – DATE COMPLETED: 5/31/2022
	COMPENSATION METHODOLOGY	Fair Market Value. The parties understand and agree that the payments made per this Agreement represent fair market value for legitimate and needed services actually provided without regard to volume or value of referrals or other business generated between the Parties.
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
	JUSTIFICATION	Need for continued Ophthalmology consultation call coverage for the Emergency Departments at PMC Escondido and PMC Poway.
	AGREEMENT NOTICED	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Methodology & Response:
	ALTERNATIVES/IMPACT	N/A
	Duties	<input type="checkbox"/> Provision for Staff Education <input type="checkbox"/> Provision for Medical Staff Education <input type="checkbox"/> Provision for participation in Quality Improvement <input type="checkbox"/> Provision for participation in budget process development
	COMMENTS	None.
	APPROVALS REQUIRED	<input checked="" type="checkbox"/> VP <input checked="" type="checkbox"/> CFO <input type="checkbox"/> CEO <input checked="" type="checkbox"/> BOD-Committee – <input checked="" type="checkbox"/> Finance; <input checked="" type="checkbox"/> BOD

**OPHTHALMOLOGY CALL AGREEMENT
NIKOLAS LONDON, M.D.**

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, MBA, Chief Medical Officer

Background: This contract represents the Call Agreement with Nikolas London, M.D. Physician shall serve as a member of the On-Call Panel at Palomar Medical Center Escondido and Palomar Medical Center Poway on a rotating basis and provide Call Coverage for the specialty of Ophthalmology in accordance with the Medical Staff by-laws, rules and regulations, policies and procedures of Palomar Health.

Call coverage services to PH's patients will be according to a reasonable call schedule developed by the parties, regardless of payor class, to patients not currently assigned to a particular physician, patients who present to the emergency department, and to hospital patients, including inpatients, who may be assigned to a particular physician but who require consultation or other physician services from an on-call panel physician ophthalmology specialist per the terms of this Agreement.

Budget Impact: Budgeted.

Staff Recommendation:

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	London, Nikolas M.D. - Ophthalmology Call Coverage Agreement
	AGREEMENT DATE	December 1, 2022
	PARTIES	Palomar Health and Nikolas London, M.D
	PURPOSE	PH desires to ensure that physicians practicing in the specialty of ophthalmology are available and on call to provide needed medical services at the Emergency Department of Palomar Medical Center Escondido and Palomar Medical Center Poway by contracting with Physician to provide such services per the terms of this Agreement.
	SCOPE OF SERVICES	To provide medical services in the specialty of ophthalmology at Hospital when called by rendering services to PH's patients according to a reasonable call schedule developed by the parties, regardless of payor class, to patients not currently assigned to a particular physician, patients who present to the emergency department, and to hospital patients, including inpatients, who may be assigned to a particular physician but who require consultation or other physician services from an on-call panel physician ophthalmology specialist per the terms of this Agreement and to otherwise provide the services required by this Agreement.
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	December 1, 2022 – November 30, 2024
	RENEWAL	None.
	TERMINATION	Either party may terminate this agreement without cause upon ninety (90) days' prior written notice.
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – DATE COMPLETED: 5/31/2022
	COMPENSATION METHODOLOGY	Fair Market Value. The parties understand and agree that the payments made per this Agreement represent fair market value for legitimate and needed services actually provided without regard to volume or value of referrals or other business generated between the Parties.
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
	JUSTIFICATION	Need for continued Ophthalmology consultation call coverage for the Emergency Departments at PMC Escondido and PMC Poway.
	AGREEMENT NOTICED	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Methodology & Response:
	ALTERNATIVES/IMPACT	N/A
	Duties	<input type="checkbox"/> Provision for Staff Education <input type="checkbox"/> Provision for Medical Staff Education <input type="checkbox"/> Provision for participation in Quality Improvement <input type="checkbox"/> Provision for participation in budget process development
	COMMENTS	None.
	APPROVALS REQUIRED	<input checked="" type="checkbox"/> VP <input checked="" type="checkbox"/> CFO <input type="checkbox"/> CEO <input checked="" type="checkbox"/> BOD-Committee – <input checked="" type="checkbox"/> Finance; <input checked="" type="checkbox"/> BOD

**PROFESSIONAL SERVICES AGREEMENT WITH
REZA KHOSHINI, MD
FOR ENDOSCOPIC ULTRASOUND COVERAGE – Amend 1**

TO: Board Finance Committee

MEETING DATE:

FROM: Omar Khawaja, MD, Chief Medical Officer

Background: This amended contract represents the Professional Services Agreement with Reza Khoshini, MD, for Endoscopic Ultrasound services at Palomar Medical Center for unassigned patients referred by other physicians on staff at Palomar Health.

Budget Impact: Budgeted

Staff Recommendation:

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	1. Khoshini, Reza M.D. - EUS Procedures - Gastrointestinal (GI) Professional Services Agreement - 12.15.2020 2. Khoshini, Reza M.D. - EUS Procedures - Gastrointestinal (GI) Professional Services Agreement - 12.15.2022 – Amend 1
	AGREEMENT DATE	1. December 15, 2020 2. December 16, 2022
	PARTIES	Palomar Health, a California healthcare district (“PH”) and Reza Khoshini, M.D. (“Physician”)
	PURPOSE	PH desires to ensure that physicians practicing in the specialty of endoscopic ultrasound are available to provide needed medical services Palomar Medical Center by contracting with Physician to provide such services per the terms of this Agreement.
	SCOPE OF SERVICES	Physician is a member of the medical staff of Palomar Medical Center and is duly qualified by licensure, education, and training to practice in the specialty of endoscopic ultrasound and provide medical services at PH when called per the terms of this Agreement and to otherwise provide the services required by this Agreement.
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	1. December 15, 2020 - December 15, 2022 2. December 16, 2022 – December 15, 2024
	RENEWAL	None.
	TERMINATION	Either party may terminate this agreement without cause upon ninety (90) days' prior written notice.
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – DATE COMPLETED: 11/04/2020
	COMPENSATION METHODOLOGY	Fair Market Value. The parties understand and agree that the payments made per this Agreement represent fair market value for legitimate and needed services actually provided without regard to volume or value of referrals or other business generated between the Parties.
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
	JUSTIFICATION	PH desires to ensure that physicians practicing in the specialty of endoscopic ultrasound are available to provide needed medical services Palomar Medical Center by contracting with Physician to provide such services per the terms of this Agreement.
	AGREEMENT NOTICED	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Methodology & Response:
	ALTERNATIVES/IMPACT	N/A
	Duties	<input type="checkbox"/> Provision for Staff Education <input type="checkbox"/> Provision for Medical Staff Education <input type="checkbox"/> Provision for participation in Quality Improvement <input type="checkbox"/> Provision for participation in budget process development
	COMMENTS	None.
	APPROVALS REQUIRED	<input checked="" type="checkbox"/> VP <input checked="" type="checkbox"/> CFO <input type="checkbox"/> CEO <input checked="" type="checkbox"/> BOD-Committee – Finance; <input checked="" type="checkbox"/> BOD

**Palomar Medical Center Poway
Administrative Services Agreement
Medical Staff Department Chair**

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, Chief Medical Officer

Background: Palomar Medical Center Poway Medical Staff Department Chairs are provided a stipend for services performed as required by the Medical Staff Bylaws. This agreement serves to document the relationship of the Medical Staff Department Chairs to Palomar Medical Center Poway and the duties to be performed as consideration for the stipend to assure compliance with federal regulations.

Presented is the Contract for the following Department Chair:

Chair, Department of OB/GYN – Maria Castillo, M.D.

Budget Impact: None.

Staff Recommendation: Approval

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	Department Chair Agreement – OB/GYN
	AGREEMENT DATE	01/01/2023
	PARTIES	Maria Castillo, M.D. and Palomar Health
	PURPOSE	To provide administrative services on behalf of the Palomar Medical Center Poway Medical Staff in accordance with the Medical Staff Bylaws, Plans, and Policies.
	SCOPE OF SERVICES	As per duties defined in the Palomar Medical Center Poway Medical Staff Bylaws and Policies.
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	01/01/2023-12/31/2024
	RENEWAL	None
	TERMINATION	As described under Section 5 of the contract.
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – DATE COMPLETED: 11/19/22
	COMPENSATION METHODOLOGY	Monthly
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
	JUSTIFICATION	Department Chair position elected by the Medical Staff in accordance with the Medical Staff Bylaws.
	AGREEMENT NOTICED	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Methodology & Response: Elected by the Palomar Medical Center Poway Medical Staff.
	ALTERNATIVES/IMPACT	n/a
	Duties	<input type="checkbox"/> Provision for Staff Education <input type="checkbox"/> Provision for Medical Staff Education <input type="checkbox"/> Provision for participation in Quality Improvement <input type="checkbox"/> Provision for participation in budget process development <input checked="" type="checkbox"/> Defined in the Palomar Medical Center Poway Medical Staff Bylaws
	COMMENTS	
	APPROVALS REQUIRED	<input type="checkbox"/> VP <input type="checkbox"/> CFO <input type="checkbox"/> CEO <input type="checkbox"/> BOD Committee _____ <input type="checkbox"/> BOD

**Palomar Medical Center Poway
Administrative Services Agreement
Medical Staff Chief of Staff**

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, Chief Medical Officer

Background: Palomar Medical Center Poway Medical Staff Chief of Staff is provided a stipend for services performed as required by the Medical Staff Bylaws. This agreement serves to document the relationship of the Medical Staff Chief of Staff to Palomar Medical Center Poway and the duties to be performed as consideration for the stipend to assure compliance with federal regulations.

Presented is the Contract for the Chief of Staff: Sam Filiciotto, M.D., Inc.

Budget Impact: None.

Staff Recommendation: Approval

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion: X

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	Chief of Staff Agreement
	AGREEMENT DATE	01/01/2023
	PARTIES	Sam Filiciotto, M.D., Inc., and Palomar Medical Center Poway
	PURPOSE	To provide administrative services on behalf of the Palomar Medical Center Poway Medical Staff in accordance with the Medical Staff Bylaws, Plans, and Policies.
	SCOPE OF SERVICES	As per duties defined in the Palomar Medical Center Poway Medical Staff Bylaws and Policies.
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	01/01/2023-12/31/2025
	RENEWAL	None
	TERMINATION	As described under Section 5 of the contract.
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – DATE COMPLETED: 11/19/22
	COMPENSATION METHODOLOGY	Monthly
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
	JUSTIFICATION	Chief of Staff position elected by the Medical Staff in accordance with the Medical Staff Bylaws.
	AGREEMENT NOTICED	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Methodology & Response: Elected by the Palomar Medical Center Poway Medical Staff.
	ALTERNATIVES/IMPACT	n/a
	Duties	<input type="checkbox"/> Provision for Staff Education <input type="checkbox"/> Provision for Medical Staff Education <input type="checkbox"/> Provision for participation in Quality Improvement <input type="checkbox"/> Provision for participation in budget process development <input checked="" type="checkbox"/> Defined in the Palomar Medical Center Poway Medical Staff Bylaws
	COMMENTS	
	APPROVALS REQUIRED	<input type="checkbox"/> VP <input type="checkbox"/> CFO <input type="checkbox"/> CEO <input type="checkbox"/> BOD Committee _____ <input type="checkbox"/> BOD

**Palomar Medical Center Poway
Administrative Services Agreement
Medical Staff Chief of Staff-Elect**

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, Chief Medical Officer

Background: Palomar Medical Center Poway Medical Staff Chief of Staff-Elect is provided a stipend for services performed as required by the Medical Staff Bylaws. This agreement serves to document the relationship of the Medical Staff Chief of Staff-Elect to Palomar Medical Center Poway and the duties to be performed as consideration for the stipend to assure compliance with federal regulations.

Presented is the Contract for the Chief of Staff-Elect: Mark Goldsworthy, M.D.

Budget Impact: None.

Staff Recommendation: Approval

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	Chief of Staff-Elect Agreement
	AGREEMENT DATE	01/01/2023
	PARTIES	Mark Goldsworthy, M.D. and Palomar Health
	PURPOSE	To provide administrative services on behalf of the Palomar Medical Center Poway Medical Staff in accordance with the Medical Staff Bylaws, Plans, and Policies.
	SCOPE OF SERVICES	As per duties defined in the Palomar Medical Center Poway Medical Staff Bylaws and Policies.
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	01/01/2023-12/31/2025
	RENEWAL	None
	TERMINATION	As described under Section 5 of the contract.
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – DATE COMPLETED: 11/19/22
	COMPENSATION METHODOLOGY	Monthly
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
	JUSTIFICATION	Chief of Staff-Elect position elected by the Medical Staff in accordance with the Medical Staff Bylaws.
	AGREEMENT NOTICED	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Methodology & Response: Elected by the Palomar Medical Center Poway Medical Staff.
	ALTERNATIVES/IMPACT	n/a
	Duties	<input type="checkbox"/> Provision for Staff Education <input type="checkbox"/> Provision for Medical Staff Education <input type="checkbox"/> Provision for participation in Quality Improvement <input type="checkbox"/> Provision for participation in budget process development <input checked="" type="checkbox"/> Defined in the Palomar Medical Center Poway Medical Staff Bylaws
	COMMENTS	
	APPROVALS REQUIRED	<input type="checkbox"/> VP <input type="checkbox"/> CFO <input type="checkbox"/> CEO <input type="checkbox"/> BOD Committee _____ <input type="checkbox"/> BOD

**Palomar Medical Center Poway
Administrative Services Agreement
Medical Staff Committee Chair**

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, Chief Medical Officer

Background: Palomar Medical Center Poway Medical Staff Quality Management Committee (QMC) Chair is provided a stipend for services performed as required by the Medical Staff Bylaws. This agreement serves to document the relationship of the QMC Chair to Palomar Medical Center Poway and the duties to be performed as consideration for the stipend to assure compliance with federal regulations.

Presented is the Contract for the QMC Chair: Mark Goldsworthy, M.D.

Budget Impact: None.

Staff Recommendation: Approval

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	Quality Management Committee Chair Agreement
	AGREEMENT DATE	01/01/2023
	PARTIES	Mark Goldsworthy, M.D. and Palomar Health
	PURPOSE	To provide administrative services on behalf of the Palomar Medical Center Poway Medical Staff in accordance with the Medical Staff Bylaws, Plans, and Policies.
	SCOPE OF SERVICES	As per duties defined in the Palomar Medical Center Poway Medical Staff Bylaws and Policies.
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	01/01/2023-12/31/2025
	RENEWAL	None
	TERMINATION	As described under Section 5 of the contract.
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – DATE COMPLETED: 11/19/22
	COMPENSATION METHODOLOGY	Monthly
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
	JUSTIFICATION	QMC Chair position elected by the Medical Staff in accordance with the Medical Staff Bylaws.
	AGREEMENT NOTICED	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Methodology & Response: Elected by the Palomar Medical Center Poway Medical Staff.
	ALTERNATIVES/IMPACT	n/a
	Duties	<input type="checkbox"/> Provision for Staff Education <input type="checkbox"/> Provision for Medical Staff Education <input type="checkbox"/> Provision for participation in Quality Improvement <input type="checkbox"/> Provision for participation in budget process development <input checked="" type="checkbox"/> Defined in the Palomar Medical Center Poway Medical Staff Bylaws
	COMMENTS	
	APPROVALS REQUIRED	<input type="checkbox"/> VP <input type="checkbox"/> CFO <input type="checkbox"/> CEO <input type="checkbox"/> BOD Committee _____ <input type="checkbox"/> BOD

**MEDICAL DIRECTOR AGREEMENT - HARDEEP PHULL, M.D. (Amend 2)
MEDICAL ONCOLOGY/INFUSION**

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, MBA, Chief Medical Officer

Background: This amended agreement addresses the need for a medical director specifically for Palomar Health’s Medical Oncology/Infusion Services. The Medical Oncology/Infusion Program consists of PH Infusion, PH Radiation Oncology, and Arch (PH Foundation) Oncology. The Physician shall serve as medical director of the Program and shall be responsible for the medical direction of the Program and the performance of the other medical administrative services as set forth in the Agreement. Physician may perform similar duties within the scope of Physician’s responsibilities as Hospital may reasonably request to the extent permitted by applicable law. Hospital will provide Physician with a copy of its policies and procedures. Physician shall abide by all policies and procedures of the Medical Staff, provided that patient safety is not compromised and no federal, state or local laws are violated by following such policies.

Budget Impact: Budgeted

Staff Recommendation:

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	<ol style="list-style-type: none"> 1. Phull, Hardeep S., M.D. - Medical Oncology Infusion Svcs - Medical Director Agreement - 6.8.2021 2. Phull, Hardeep S., MD Hematology Oncology Partners in Excellence Inc. - Med Onc Infusion Svcs - Medical Director Agrmt Assignment Acknowledgment and Agrmt 7.1.2021 - 10.28.2021 - 10.1.2021 3. Phull, Hardeep S., MD Hematology Oncology Partners in Excellence Inc. - Med Oncology Infusion Svcs - Amend 2 to Medical Director Agreement - 1.1.2023
	AGREEMENT DATE	<ol style="list-style-type: none"> 1. July 1, 2021 2. October 28, 2021 3. January 1, 2023
	PARTIES	Palomar Health and Hardeep Phull, M.D.
	PURPOSE	Physician shall serve as medical director of the Medical Oncology/Infusion Program and shall be responsible for the medical direction of the Program and the performance of the other medical administrative services in accordance with this Agreement.
	SCOPE OF SERVICES	As Medical Director, Physician shall devote as much time as is reasonably necessary in performing the Medical Director services required under this Agreement to ensure the proper management of the Program.
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	<ol style="list-style-type: none"> 1. July 1, 2021, - December 31, 2022 2. October 28, 2021 - December 31, 2022 3. January 1, 2023 – December 31, 2024
	RENEWAL	None.
	TERMINATION	Either party may terminate this Agreement without cause upon thirty (30) days' prior written notice.
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – DATE COMPLETED: 6/30/2021
	COMPENSATION METHODOLOGY	The Parties hereby acknowledge and agree that the compensation hereunder is the product of bona fide arms-length negotiations and represents a commercially reasonable and fair market value payment for the Services to be furnished hereunder without regard to the volume or value of federal health care program or any other business generated by and among the Parties.
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
	JUSTIFICATION	Hospital owns and operates several acute hospitals and other facilities, which require physician leadership and support of the Medical Oncology/Infusion Program.
	AGREEMENT NOTICED	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Methodology & Response:
	ALTERNATIVES/IMPACT	N/A
	Duties	<input checked="" type="checkbox"/> Provision for Staff Education <input checked="" type="checkbox"/> Provision for Medical Staff Education <input checked="" type="checkbox"/> Provision for participation in Quality Improvement <input checked="" type="checkbox"/> Provision for participation in budget process development
	COMMENTS	None.
	APPROVALS REQUIRED	<input checked="" type="checkbox"/> VP <input checked="" type="checkbox"/> X-CFO <input type="checkbox"/> CEO <input checked="" type="checkbox"/> X-BOD-Committee – Finance ; <input checked="" type="checkbox"/> X-BOD

**Palomar Medical Center Poway
Administrative Services Agreement
Medical Staff Department Chair**

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, Chief Medical Officer

Background: Palomar Medical Center Poway Medical Staff Department Chairs are provided a stipend for services performed as required by the Medical Staff Bylaws. This agreement serves to document the relationship of the Medical Staff Department Chairs to Palomar Medical Center Poway and the duties to be performed as consideration for the stipend to assure compliance with federal regulations.

Presented is the Contract for the following Department Chair:

Chair, Department of Psychiatry – Jason Keri, M.D.

Budget Impact: None.

Staff Recommendation: Approval

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	Department Chair Agreement – Psychiatry
	AGREEMENT DATE	01/01/2023
	PARTIES	Jason Keri, M.D. and Palomar Health
	PURPOSE	To provide administrative services on behalf of the Palomar Medical Center Poway Medical Staff in accordance with the Medical Staff Bylaws, Plans, and Policies.
	SCOPE OF SERVICES	As per duties defined in the Palomar Medical Center Poway Medical Staff Bylaws and Policies.
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	01/01/2023-12/31/2024
	RENEWAL	None
	TERMINATION	As described under Section 5 of the contract.
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – DATE COMPLETED: 11/19/22
	COMPENSATION METHODOLOGY	Monthly
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
	JUSTIFICATION	Department Chair position elected by the Medical Staff in accordance with the Medical Staff Bylaws.
	AGREEMENT NOTICED	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Methodology & Response: Elected by the Palomar Medical Center Poway Medical Staff.
	ALTERNATIVES/IMPACT	n/a
	Duties	<input type="checkbox"/> Provision for Staff Education <input type="checkbox"/> Provision for Medical Staff Education <input type="checkbox"/> Provision for participation in Quality Improvement <input type="checkbox"/> Provision for participation in budget process development <input checked="" type="checkbox"/> Defined in the Palomar Medical Center Poway Medical Staff Bylaws
	COMMENTS	
	APPROVALS REQUIRED	<input type="checkbox"/> VP <input type="checkbox"/> CFO <input type="checkbox"/> CEO <input type="checkbox"/> BOD Committee _____ <input type="checkbox"/> BOD

Palomar Medical Center Escondido – Administrative Services Agreement Medical Staff Department Chairs/Officers Bulk Stipend Agreement

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, M.D., Chief Medical Officer

Background: Palomar Medical Center Escondido Medical Staff Officers and Department and Committee Chairs are provided a stipend for services performed as required by the Medical Staff Bylaws. This agreement serves to document the relationship of the Medical Staff Department and Committee Chairs to Palomar Health, and the duties to be performed as consideration for the stipend to assure compliance with Federal regulations.

Presented is the Contract for all of the Palomar Medical Center Escondido Medical Staff Leadership.

Kanchan Koirala, M.D. – Chief of Staff	Bradley Harward, M.D. – Education Library Committee Chair
Graham Davis, D.O. – Dept. Anesthesia Chair	Andrew Nguyen, M.D. – Chief of Staff-Elect/QMC Chair
Alejandro Paz, M.D. – Dept. Family Medicine Chair	Bruce Friedberg, M.D. – Dept. Emergency Medicine Chair
Paul Hinshaw, D.O. – Dept. OB/GYN Chair	Steven Zgliniec, M.D. – Dept. Medicine Chair
Lachlan Macleay, M.D. – Pathology Chair	Patrick O’Meara, M.D. – Dept. Ortho Chair
Denise Suttner, M.D. – Dept. Pediatrics Chair	Jason Keri, M.D. – Dept. Psychiatry Chair
Charles McGraw, M.D. – Dept. Radiology Chair	Gregory Campbell, M.D. – Dept. Surgery Chair & OR Committee Chair
John Steele, M.D. – Dept. Trauma Chair	Paul Polishuk, M.D. – Dept. Urology Chair
Christian McClung, M.D. – MSPRC Chair	Khaldoun Abouelhosn, M.D. – Secretary/Treasurer

Budget Impact: Budgeted

Staff Recommendation: Approval

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	Palomar Medical Center Escondido Medical Staff Bulk Stipend/Department Chairs/Officers Agreement
	AGREEMENT DATE	01/01/2023
	PARTIES	Palomar Health and (for 2023) Kanchan Koirala, M.D. – Chief of Staff Andrew Nguyen, M.D. – Chief of Staff-Elect/QMC Chair Graham Davis, D.O. – Dept. Anesthesia Chair Bruce Friedberg, M.D. – Dept. Emergency Medicine Chair Alejandro Paz, M.D. – Dept. Family Medicine Chair Steven Zgliniec, M.D. – Dept. Medicine Chair Paul Hinshaw, D.O. – Dept. OB/GYN Chair Patrick O’Meara, M.D. – Dept. Ortho Chair Lachlan Macleay, M.D. – Dept. Pathology Chair Khaldoun Abouelhosn, M.D. – Secretary/Treasurer Denise Suttner, M.D. – Dept. Pediatrics Chair Jason Keri, M.D. – Dept. Psychiatry Chair Charles McGraw, M.D. – Dept. Radiology Chair Greg Campbell, M.D. – Dept. Surgery Chair/OR Committee Chair John Steele, M.D. – Dept. Trauma Chair Paul Polishuk, M.D. – Dept. Urology Chair Christian McClung, M.D. – MSPRC Chair Bradley Harward, M.D. – Education Library Committee Chair
	PURPOSE	To provide administrative services on behalf of the Palomar Medical Center Escondido Medical Staff in accordance with Medical Staff Bylaws, Plans and Policies.
	SCOPE OF SERVICES	As per duties defined in the Palomar Medical Center Escondido Medical Staff Bylaws and Policies.
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	Jan 1, 2023– December 31, 2024
	RENEWAL	None.
	TERMINATION	As described in section 7.
	COMPENSATION METHODOLOGY	Monthly
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No – Date Completed: 11/19/2022
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
	JUSTIFICATION	Positions elected by the Medical Staff in accordance with Medical Staff Bylaws.
	AGREEMENT NOTICED	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Methodology & Response: Elected by the Palomar Medical Center Escondido Medical Staff
	ALTERNATIVES/IMPACT	N/A
	Duties	<input type="checkbox"/> Provision for Staff Education <input type="checkbox"/> Provision for Medical Staff Education <input type="checkbox"/> Provision for participation in Quality Improvement <input type="checkbox"/> Provision for participation in budget process development <input checked="" type="checkbox"/> Defined in the Palomar Medical Center Escondido Medical Staff Bylaws
	COMMENTS	
	APPROVALS REQUIRED	<input type="checkbox"/> VP <input type="checkbox"/> CFO <input type="checkbox"/> CEO <input type="checkbox"/> BOD Committee <input type="checkbox"/> BOD

**Palomar Medical Center Poway
Administrative Services Agreement
Medical Staff Department Chair**

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, Chief Medical Officer

Background: Palomar Medical Center Poway Medical Staff Department Chairs are provided a stipend for services performed as required by the Medical Staff Bylaws. This agreement serves to document the relationship of the Medical Staff Department Chairs to Palomar Medical Center Poway and the duties to be performed as consideration for the stipend to assure compliance with federal regulations.

Presented is the Contract for the following Department Chair:

Chair, Department of Anesthesia – Paul Ritchie, M.D.

Budget Impact: None.

Staff Recommendation: Approval

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	Department Chair Agreement – Anesthesia Services
	AGREEMENT DATE	01/01/2023
	PARTIES	Paul Ritchie, M.D. and Palomar Health
	PURPOSE	To provide administrative services on behalf of the Palomar Medical Center Poway Medical Staff in accordance with the Medical Staff Bylaws, Plans, and Policies.
	SCOPE OF SERVICES	As per duties defined in the Palomar Medical Center Poway Medical Staff Bylaws and Policies.
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	01/01/2023-12/31/2024
	RENEWAL	None
	TERMINATION	As described under Section 5 of the contract.
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – DATE COMPLETED: 11/19/22
	COMPENSATION METHODOLOGY	Monthly
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
	JUSTIFICATION	Department Chair position elected by the Medical Staff in accordance with the Medical Staff Bylaws.
	AGREEMENT NOTICED	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Methodology & Response: Elected by the Palomar Medical Center Poway Medical Staff.
	ALTERNATIVES/IMPACT	n/a
	Duties	<input type="checkbox"/> Provision for Staff Education <input type="checkbox"/> Provision for Medical Staff Education <input type="checkbox"/> Provision for participation in Quality Improvement <input type="checkbox"/> Provision for participation in budget process development <input checked="" type="checkbox"/> Defined in the Palomar Medical Center Poway Medical Staff Bylaws
	COMMENTS	
	APPROVALS REQUIRED	<input type="checkbox"/> VP <input type="checkbox"/> CFO <input type="checkbox"/> CEO <input type="checkbox"/> BOD Committee _____ <input type="checkbox"/> BOD

**MEDICAL DIRECTOR AGREEMENT
CARDIAC REHAB SERVICES
ROBERT STEIN, MD**

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, CMO

Background: This is an agreement between Palomar Health and Robert Stein, M.D., for medical directorship of the cardiac rehab services program at Palomar Health. Hospital and physician have agreed that physician will manage, generally supervise, and direct the medical administrative operations of the program in accordance with the agreement. Physician shall abide by all policies and procedures of the Medical Staff.

Budget Impact: Budgeted

Staff Recommendation:

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	Stein, Robert MD - Cardiac Rehab - Medical Director Agreement
	AGREEMENT DATE	January 1, 2023
	PARTIES	Palomar Health and Robert Stein, M.D.
	PURPOSE	Hospital owns and operates several acute hospitals and other facilities which require physician leadership and support of the Cardiac Rehab Services Unit/Program at Palomar Health.
	SCOPE OF SERVICES	Hospital and Physician have agreed that Physician will manage, generally supervise, and direct the medical administrative operations of the Unit/Program in accordance with this Agreement.
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	January 1, 2023 to December 31, 2023
	RENEWAL	None
	TERMINATION	Either party may terminate this Agreement without cause upon thirty (30) days' prior written notice.
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – DATE COMPLETED: 12/02/2022
	COMPENSATION METHODOLOGY	Fair Market Value
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
	JUSTIFICATION	Hospital owns and operates several acute hospitals and other facilities which require physician leadership and support of the Cardiac Rehab Services Unit/Program.
	AGREEMENT NOTICED	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Methodology & Response:
	ALTERNATIVES/IMPACT	N/A
	Duties	<input checked="" type="checkbox"/> Provision for Staff Education <input checked="" type="checkbox"/> Provision for Medical Staff Education <input checked="" type="checkbox"/> Provision for participation in Quality Improvement <input checked="" type="checkbox"/> Provision for participation in budget process development
	COMMENTS	None.
	APPROVALS REQUIRED	<input checked="" type="checkbox"/> -VP <input checked="" type="checkbox"/> -CFO <input type="checkbox"/> CEO <input checked="" type="checkbox"/> -BOD-Committee – Finance; <input checked="" type="checkbox"/> -BOD

Palomar Health Forensic Health Services Pediatric Sexual Abuse Response Team Coverage Agreement

TO: Board Finance Committee

MEETING DATE:

FROM: Virginia A. Barragan, FACHE, PT, MOMT, DPT Vice President Continuum Care
Michelle Shores, RN, MSN, MBA-HC, CEN, Director Forensic Health Services

Background:

Palomar Health and Rady Children’s Hospital Chadwick Center both operate nationally accredited Child Advocacy Centers (CAC). Linkage agreements that allow additional expert review and evaluation of complex child abuse cases are recommended by national accreditation standards. This agreement will allow Palomar Health Forensic Health Services to submit a request to the Rady Children’s Chadwick Center Child Abuse pediatrician to perform a formal medical chart review for complex child forensic medical exams if requested by the current Palomar Health Forensic Health Services Medical Director Dr. Nicole Ayson. The Child Abuse Pediatrician would submit an invoice for their time and report at a flat rate per chart as defined in the contract. This service has not frequently been used but is crucial to have available if needed.

This contract also allows for the Palomar Health Forensic Health Services specialty trained forensic nurses to provide night, weekend, and holiday coverage for the Chadwick center that is compensated to Palomar Health.

Budget Impact: Budgeted

Staff Recommendation: Approval

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	Pediatric Sexual Assault Coverage Agreement
	AGREEMENT DATE	Effective date is January 1, 2023
	PARTIES	Rady Children’s Hospital Chadwick Center for Children and Families
	PURPOSE	Palomar Health desires to utilize additional Child Abuse Pediatrician at South County Child Advocacy Center for complex chart review and pay provider for that time when determined by medical director. Additionally, the contract allows Palomar Health Forensic Health Services Nurses to provide afterhours weekend and holiday coverage at Rady.
	SCOPE OF SERVICES	Professional Services: Contractor shall provide Forensic Examinations chart review as necessary.
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	Amendment 2 Effective January 1, 2023, expires December 31, 2023.
	RENEWAL	None
	TERMINATION	This Agreement shall terminate on December 31, 2023 unless earlier terminated in accordance with the terms of this Agreement.
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – DATE COMPLETED: 01/13/2021
	COMPENSATION METHODOLOGY	Professional and administrative services will be paid by hospital on a monthly basis
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT: \$6,000 administrative
	EXCLUSIVITY	<input type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
	JUSTIFICATION	Linkage agreement and service agreement for chart review for complicated cases and use of forensic nurses for coverage at Rady.
	AGREEMENT NOTICED	<input type="checkbox"/> YES <input type="checkbox"/> NO Methodology & Response:
	ALTERNATIVES/IMPACT	Best practice to have a second formal case review opinion on difficult cases.
	Duties	X Provision for Staff Education X Provision for Medical Staff Education X Provision for participation in Quality Improvement X Provision for participation in budget process development
	COMMENTS	This linkage agreement is required for national accreditation to have a second opinion on difficult cases.
	APPROVALS REQUIRED	<input type="checkbox"/> VP <input type="checkbox"/> CFO <input type="checkbox"/> CEO <input type="checkbox"/> BOD Committee _____ <input type="checkbox"/> BOD

PROFESSIONAL SERVICES AGREEMENT
Obstetrics and Gynecologic Physician Coverage (Amend 2)

TO: Board Finance Committee

MEETING DATE: Thursday, May 4, 2023

FROM: Omar Khawaja, MD, MBA, Chief Medical Officer

Background: Palomar Medical Center Escondido provides women services in OB/GYN. These women's health programs require an Obstetrician and Gynecologist to be in-house on a 24-hour, 7 days per week basis. OBHG will continue to provide coverage and related services and will additionally assist with maintaining the obstetrics emergency department at the Hospital's facility.

Budget Impact: Budgeted.

Staff Recommendation: Approval recommended

Committee Questions:

COMMITTEE RECOMMENDATION:

Motion:

Individual Action:

Information:

Required Time:

PALOMAR HEALTH – AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	<ol style="list-style-type: none"> OB Hospitalist Group aka OBHG California, P.C. - Professional Services Agreement - 4.30.2021. OB Hospitalist Group aka OBHG California, P.C. - Amendment 1 to Professional Services Agreement 4.30.2021 - 7.1.2022. OB Hospitalist Group aka OBHG California, P.C. - Amendment 2 to Professional Services Agreement - 2.1.2023.
	AGREEMENT DATE	<ol style="list-style-type: none"> April 30, 2021 July 1, 2022 February 1, 2023
	PARTIES	Palomar Health, a California healthcare district, and OBHG California, P.C., a California professional corporation (“OBHG”);.
	PURPOSE	To provide in-house obstetrical and gynecological coverage on a 24-hour, 7 days per week basis, as well as development of an obstetrics emergency department.
	SCOPE OF SERVICES	Provide in-house physician coverage for unassigned or emergent obstetric patients, provide consultative services and possible surgical services for unassigned emergent gynecologic patients; respond to all unassigned walk-in obstetrical and gynecologic calls/consults in ED or elsewhere in hospital; assist with discharge planning, including assistance with arranging for follow-up consultation and to otherwise provide the services required by in this Agreement.
	PROCUREMENT METHOD	<input type="checkbox"/> Request For Proposal <input checked="" type="checkbox"/> Discretionary
	TERM	<ol style="list-style-type: none"> April 30, 2021 – May 1, 2024 July 1, 2022 - May 1, 2024 February 1, 2023 – January 31, 2026
	RENEWAL	None
	TERMINATION	30 days if breached; termination upon bankruptcy; termination due to violation of patient health, safety.
	FAIR MARKET VALUATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – DATE COMPLETED: 07/26/2021
	COMPENSATION METHODOLOGY	Based on Fair Market Value and Commercial Reasonableness.
	BUDGETED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO – IMPACT:
	EXCLUSIVITY	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES – EXPLAIN:
	JUSTIFICATION	Hospital desires to retain OBHG to provide 24/7 Ob/Gyn coverage and other services described in this Agreement
	AGREEMENT NOTICED	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Methodology & Response:
	ALTERNATIVES/IMPACT	None
	Duties	<input checked="" type="checkbox"/> Provision for Staff Education <input checked="" type="checkbox"/> Provision for Medical Staff Education <input checked="" type="checkbox"/> Provision for participation in Quality Improvement <input type="checkbox"/> Provision for participation in budget process development
	COMMENTS	None.
	APPROVALS REQUIRED	<input checked="" type="checkbox"/> VP <input checked="" type="checkbox"/> CFO <input type="checkbox"/> CEO <input checked="" type="checkbox"/> BOD Committee Finance <input checked="" type="checkbox"/> BOD

ADDENDUM D

Fiscal Year 2023 Financial Performance

*Supplemental Section includes Palomar Health Medical Group (PHMG)
and Consolidating Schedules

March 2023

Monthly Management Discussion and Analysis

Summary Results of Operations for the Period Ended March 31, 2023

Income from operations for the month was \$700 thousand, unfavorable to budget by \$3.9 million. Net income from operation for third quarter is \$1.8 million, unfavorable to budget by \$11.3 million. The year-to-date income from operations was \$6.8 million with a \$35.0 million unfavorable variance. Net loss for the month was \$770 thousand, unfavorable to budget by \$3.9 million. Net loss year-to-date was \$1 million and unfavorable variance of \$38.7 million.

EBIDA margin for the month of March was unfavorable to budget by 9.7% and year-to-date EBIDA margin was unfavorable to budget by 4.1%. Additional comments and further analyses are presented in the following sections.

Patient Utilization

Inpatient (IP) Services

For the month of March, Acute Discharges for the District were (1.0%) unfavorable to budget. Average Daily Census was (4.4%) favorable to budget. Adjusted Discharges were 3,577, which was 169 (5.0%) favorable to budget. Adjusted Patient Days were 20,002, which was 1,450 (7.8%) favorable to budget. Case Mix Index for both campuses, excluding deliveries, was 1.62, which was (5.5%) unfavorable to budget.

IP surgeries for PMC Escondido and PMC Poway for the month were 523 cases (includes CVS), which were 67 cases (11.4%) unfavorable to budget.

Deliveries for PMC Escondido and PMC Poway for the month were 353, which were 88 deliveries (19.9%) unfavorable to budget. For the month, Trauma admissions were 111, which was 3.5% unfavorable to budget.

Outpatient (OP) and Ancillary Services

OP surgeries for PMC Escondido and PMC Poway for the month were 565 cases, which were 86 cases (18.0%) favorable to budget. Outpatient ER visits for the month were 10,125 visits (includes trauma), which were 995 visits (10.9%) favorable to budget. OP registrations for the month were 10,683, which were (3.9%) favorable to budget. ER admissions for the month were 1,463, which were (17.4%) unfavorable to budget.

Monthly Management Discussion and Analysis

Summary Results of Operations for the Period Ended March 31, 2023

Financial Performance

Operating Revenue

Net Patient Revenue for the month was \$73.3 million, which was \$951 thousand (1.3%) unfavorable to budget.

Other Operating Revenue

Other Operating Revenue for the month was \$930 thousand, which was \$117 thousand (14.3%) favorable to budget.

Operating Expenses

Total Operating Expenses for the month were \$73.5 million, which was \$3.1 million (4.4%) unfavorable to budget.

Salaries, Wages & Contract Labor for the month were \$36.1 million, which was \$4.5 million (14.4%) favorable to budget.

Benefits for the month were \$6.9 million, which was \$2.5 million (26.5%) unfavorable to budget.

Supplies for the month were \$11.1 million, which was \$944 thousand (9.3%) favorable to budget.

Professional Fees and Purchased Services for the month were \$12.0 million, which was \$207 thousand (1.7%) unfavorable to budget.

Depreciation & Amortization for the month was \$3.8 million, which was \$60 thousand (1.6%) favorable to budget.

Other Direct Expenses for the month were \$3.6 million, which was \$224 thousand (6.6%) favorable to budget.

Monthly Management Discussion and Analysis

Summary Results of Operations for the Period Ended March 31, 2023

Net Non-Operating Income/Expense

Net Non-Operating Income for the month was \$1.5 million, which was \$1.1 million unfavorable to budget due to interest expense.

Payor Mix, Net Days in Accounts Receivable (A/R) and Cash Collections

The percentages of Gross Patient Service Revenue from the Medicare, Managed Care Medicare, Managed Care, Medi-Cal and Managed Care Medi-Cal financial classes for the month were consistent with budget. Cash postings were \$61.0 million. Days in Net A/R are 77.2, an increase of 0.1 days from February.

Revenue Cycle - Key Performance Indicators (KPIs)

Key Performance Indicators (KPI)	January 2021	January 2023	February 2023	March 2023	Target
Total Net A/R (\$) ¹	\$137,851,805	\$182,315,584	\$181,976,823	\$184,683,827	
Net Days in A/R (Days) (3-months)	64.6	78.4	77.1	77.2	61.0-63.0
DNFB (Days)	2.0	1.3	1.7	1.7	3.0
Urgent Insurance Verification (DDC) (%)	98.9%	n/a	n/a	n/a	98.0%
Elective IP Insurance Verification (Average Secure) (%)	93.8%	n/a	n/a	n/a	98.0%
Elective OP Insurance Verification (Average Secure) (%)	97.9%	n/a	n/a	n/a	98.0%
True Cash Denial (%)	5.2%	6.3%	5.5%	5.7%	6.0%

¹ Total Net A/R (\$) does not have a FY2022 Target as \$ is dependent on Gross Revenue

Please see Appendix A, which contains a glossary of the Key Performance Indicators presented above.

Balance Sheet

Cash, Cash Equivalents and Investments increased in March by \$13.4 million from the previous month due to released restricted assets.

The Days Cash On Hand ratio increased by 6.0 days from the prior month to 51.7 days.

Monthly Management Discussion and Analysis - APPENDIX A

Glossary of Terms: Revenue Cycle Key Performance Indicators

Total Net A/R: This is the total amount of accounts receivable which management expects to collect from patients, insurance companies, Medicare and Medi-Cal, in future months, for services to patients through the end of the current accounting period. This number is computed by subtracting estimated contractual adjustments, bad debts and charity write-offs from gross accounts receivable.

Net Days in A/R (Days): The full name for this performance indicator is “Net Days of Revenue in Net Accounts Receivable.” This statistic is a measure of the effectiveness of the organization’s collections of revenue. For example, if the organization has average daily net revenues of \$2 million and \$140 million in Net A/R, then the organization has 70 days of net revenue/potential cash (\$140M divided by \$2M) tied up in its Accounts Receivable.

DNFB (Days): The full name for this performance indicator is **D**ischarged **N**ot **F**inal **B**illed Revenue. Before a hospital bill can be completed and sent to an insurance company, patient, Medicare or Medi-Cal certain information must be completed and entered in the system and submitted as components of the bill. This information includes specific codes for the services performed using the **C**urrent **P**rocedural **T**erminology codes (CPT-4) as defined by the American Medical Association or the **H**ealthcare **C**ommon **P**rocedure **C**oding **S**ystem (HCPCS) as defined by the Medicare Program. Additionally, the **I**nternational **C**lassification of **D**isease codes (ICD-10) which define a patient’s various illnesses must be included in the billing information. This information is inserted in the patient billing information by employees certified in these coding methodologies based on information in the patient’s medical record. Certified coding specialists rely heavily on clinical information supplied by the patient and physicians including History and Physical Reports, Operative Reports and Discharge Summaries. This performance indicator measures the effectiveness of the billing process. Bills cannot be collected if they are not submitted and this indicator shows the average time required between the time a patient is discharged and the time the bill is submitted. The lower the number the better the performance. A number below 3.0 is considered best practice.

Urgent Insurance Verification (DDC) (%): In order to ensure the organization is properly paid for its services it needs to confirm the patient is insured and whether the patient’s insurance covers the services to be rendered. Additionally, some insurers and HMOs require a pre-authorization or pre-certification before they will authorize payment for the services. This verification must be performed very quickly for certain patients. Failure to verify insurance and obtain pre-authorizations, if necessary, significantly reduces the probability of collecting for the services rendered. This performance metric measures the percentage of time insurance verification is obtained for urgent cases prior to the service being rendered. A higher percentage is better. A percentage in excess of 98% is considered best practice.

Elective IP Insurance Verification (Average Secure) (%): In order to ensure the organization is properly paid for its services it needs to confirm the patient is insured and whether the patient's insurance covers the services to be rendered. Additionally, some insurers and HMOs require a pre-authorization or pre-certification before they will authorize payment for services. For inpatient elective procedures/cases, this verification process is critical for payment. Failure to verify insurance and obtain pre-authorizations, if necessary, significantly reduces the probability of collecting for the services rendered. This performance metric measures the percentage of time insurance verification is obtained for elective inpatient cases prior the service billing rendered. A higher percentage is better. A percentage of 95% is considered best practice.

Elective OP Insurance Verification (Average Secure) (%): In order to ensure the organization is properly paid for its services it needs to confirm the patient is insured and whether the patient's insurance covers the services to be rendered. Additionally, some insurers and HMOs require a pre-authorization or pre-certification before they will authorize payment for services. For outpatient elective procedures/cases, this verification process is critical for payment. Failure to verify insurance and obtain pre-authorizations, if necessary, significantly reduces the probability of collecting for the services rendered. This performance metric measures the percentage of time insurance verification is obtained for elective outpatient cases prior the service billing rendered. A higher percentage is better. A percentage of 95% is considered best practice.

True Cash Denial Rate (%): Once claims (bills) are submitted, insurance companies, Medicare and Medi-Cal may deny those claims. Denials may occur for several reasons including:

- Insurance was not valid for the name patient
- The procedure performed was not covered by the patient's insurance
- The provider did not obtain pre-authorization to perform the procedure
- The procedure was not medically necessary
- The bill was received outside the contractually agreed upon timetable

This performance indicator measures whether the organization's processes for insurance verification, obtaining pre-authorization, medical necessity verification and timely billing are working effectively. The measurement is computed by dividing the dollar value of the denials for a twelve-month period by the total annual billings for that same period. A lower percentage indicates better performance with a percentage below 10% is considered best practice.

Prior to Fiscal Year 2021, gross charges were reflected instead of the true cash/AR balance at risk.

	Month to Date				Year to Date			
	Actual	Budget	Variance	Prior Year	Actual	Budget	Variance	Prior Year
	Mar-23	Mar-23		Mar-22	Mar-23	Mar-23		Mar-22
Key Volumes								
Discharges - Total	2,104	2,145	(1.9%)	2,035	18,985	21,556	(11.9%)	18,295
Acute - General	2,017	2,002	0.8%	1,900	18,095	20,302	(10.9%)	17,163
Acute Behavioral Health	36	72	(50.0%)	73	425	635	(33.1%)	610
Total Acute Discharges	2,053	2,074	(1.0%)	1,973	18,520	20,937	(11.5%)	17,773
The Villas at Poway	51	71	(28.2%)	62	465	619	(24.9%)	522
Patient Days - Total	13,121	12,914	1.6%	12,418	110,008	125,076	(12.1%)	112,895
Acute - General	9,316	8,459	10.1%	8,432	78,270	86,314	(9.3%)	78,059
Acute Behavioral Health	349	797	(56.2%)	777	3,521	6,982	(49.6%)	6,953
Total Acute Patient Days	9,665	9,256	4.4%	9,209	81,791	93,296	(12.3%)	85,012
The Villas at Poway	3,456	3,658	(5.5%)	3,209	28,217	31,780	(11.2%)	27,883
Acute Adjusted Discharges	3,514	3,337	5.3%	3,297	31,172	33,691	(7.5%)	28,422
Total Adjusted Discharges*	3,577	3,408	5.0%	3,380	31,751	34,310	(7.5%)	29,096
Acute Adjusted Patient Days	16,543	14,894	11.1%	15,388	137,563	150,121	(8.4%)	135,811
Total Adjusted Patient Days*	20,002	18,552	7.8%	18,597	165,783	181,901	(8.9%)	163,694
Acute Average Daily Census	312	299	4.4%	297	299	340	(12.3%)	310
Total Average Daily Census*	423	417	1.6%	401	401	456	(12.1%)	412
Surgeries - Total	1,088	1,069	1.8%	1,090	9,025	8,811	2.4%	8,650
Inpatient	523	590	(11.4%)	532	4,437	4,822	(8.0%)	4,244
Outpatient	565	479	18.0%	558	4,588	3,989	15.0%	4,406
Deliveries	353	441	(19.9%)	353	3,488	3,882	(10.1%)	3,055
ER Visits (Includes Trauma) - Total	11,588	10,902	6.3%	10,754	101,377	96,717	4.8%	88,202
Inpatient	1,463	1,772	(17.4%)	1,479	13,162	15,259	(13.7%)	12,884
Outpatient	10,125	9,130	10.9%	9,275	88,215	81,458	8.3%	75,318

* Includes The Villas at Poway

	Quarter to Date				Year to Date			
	Actual	Budget	Variance	Prior Year	Actual	Budget	Variance	Prior Year
	Mar-23	Mar-23		Mar-22	Mar-23	Mar-23		Mar-22
Key Statistics								
Acute Average LOS - Days	4.64	4.54	(2.2%)	5.00	4.42	4.45	0.6%	4.78
Acute - General	4.56	4.36	(4.6%)	4.77	4.33	4.25	(1.7%)	4.55
Acute Behavioral Health	8.59	10.10	15.0%	11.94	8.28	11.00	24.7%	11.40
Average Observation Hours	29	31	6.2%	31	31	28	(10.7%)	28
Acute Case Mix-Excludes Deliveries	1.63	1.69	(3.6%)	1.69	1.62	1.63	(0.7%)	1.63
Acute Case Mix-Medicare Only	1.81	1.89	(4.5%)	1.89	1.83	1.84	(0.1%)	1.84
Labor Productivity by Hrs					102.8%	100.0%	2.8%	107.0%
Days Cash on Hand					51.7			123.7
Financial Performance								
Operating Income	1,837,522	13,095,410	(11,257,888)	8,458,838	6,873,087	41,876,741	(35,003,654)	32,344,230
Net Income	(1,022,657)	11,833,539	(12,856,196)	1,012,840	(1,031,851)	37,702,376	(38,734,227)	25,450,484
Oper. Expenses/Adj. Patient Days	3,598	3,328	(8.1%)	3,276	3,594	3,311	(8.6%)	3,299
EBIDA Margin-Excludes PHMG	10.4%	13.6%	(3.2%)	9.3%	10.2%	13.8%	(3.6%)	13.1%
EBIDA-Excludes PHMG	22,699,540	30,432,589	(7,733,049)	18,552,561	64,981,479	93,391,306	(28,409,827)	79,288,318

Note: Financial Performance excludes GO Bonds

	Quarter to Date				Year to Date			
	Actual	Budget	Variance	Prior Year	Actual	Budget	Variance	Prior Year
	Mar-23	Mar-23		Mar-22	Mar-23	Mar-23		Mar-22
Key Volumes								
Discharges - Total	6,270	6,958	(9.9%)	5,994	18,985	21,556	(11.9%)	18,295
Acute - General	6,001	6,543	(8.3%)	5,643	18,095	20,302	(10.9%)	17,163
Acute Behavioral Health	117	209	(44.0%)	185	425	635	(33.1%)	610
Total Acute Discharges	6,118	6,752	(9.4%)	5,828	18,520	20,937	(11.5%)	17,773
The Villas at Poway	152	206	(26.2%)	166	465	619	(24.9%)	522
Patient Days - Total	38,110	41,282	(7.7%)	38,416	110,008	125,076	(12.1%)	112,895
Acute - General	27,379	28,551	(4.1%)	26,902	78,270	86,314	(9.3%)	78,059
Acute Behavioral Health	1,005	2,111	(52.4%)	2,209	3,521	6,982	(49.6%)	6,953
Total Acute Patient Days	28,384	30,662	(7.4%)	29,111	81,791	93,296	(12.3%)	85,012
The Villas at Poway	9,726	10,620	(8.4%)	9,305	28,217	31,780	(11.2%)	27,883
Acute Adjusted Discharges	10,186	10,865	(6.3%)	9,200	31,172	33,691	(7.5%)	28,422
Total Adjusted Discharges*	10,374	11,071	(6.3%)	9,412	31,751	34,310	(7.5%)	29,096
Acute Adjusted Patient Days	47,257	49,338	(4.2%)	45,861	137,563	150,121	(8.4%)	135,811
Total Adjusted Patient Days*	56,986	59,958	(5.0%)	55,166	165,783	181,901	(8.9%)	163,694
Acute Average Daily Census	525	548	(4.2%)	510	299	340	(12.3%)	310
Total Average Daily Census*	423	459	(7.7%)	427	401	456	(12.1%)	412
Surgeries - Total	3,062	2,783	10.0%	2,894	9,025	8,811	2.4%	8,650
Inpatient	1,500	1,529	(1.9%)	1,420	4,437	4,822	(8.0%)	4,244
Outpatient	1,562	1,254	24.5%	1,474	4,588	3,989	15.0%	4,406
Deliveries	1,101	1,313	(16.1%)	1,035	3,488	3,882	(10.1%)	3,055
ER Visits (Includes Trauma) - Total	32,745	28,635	14.4%	28,243	101,377	96,717	4.8%	88,202
Inpatient	4,376	5,031	(13.0%)	4,180	13,162	15,259	(13.7%)	12,884
Outpatient	28,369	23,604	20.2%	24,063	88,215	81,458	8.3%	75,318

* Includes The Villas at Poway

	Quarter to Date				Year to Date			
	Actual	Budget	Variance	Prior Year	Actual	Budget	Variance	Prior Year
	Mar-23	Mar-23		Mar-22	Mar-23	Mar-23		Mar-22
Key Statistics								
Acute Average LOS - Days	4.64	4.54	(2.2%)	5.00	4.42	4.45	0.6%	4.78
Acute - General	4.56	4.36	(4.6%)	4.77	4.33	4.25	(1.7%)	4.55
Acute Behavioral Health	8.59	10.10	15.0%	11.94	8.28	11.00	24.7%	11.40
Average Observation Hours	29	31	6.2%	31	31	28	(10.7%)	28
Acute Case Mix-Excludes Deliveries	1.63	1.69	(3.6%)	1.69	1.62	1.63	(0.7%)	1.63
Acute Case Mix-Medicare Only	1.81	1.89	(4.5%)	1.89	1.83	1.84	(0.1%)	1.84
Labor Productivity by Hrs					102.8%	100.0%	2.8%	107.0%
Days Cash on Hand					51.7			123.7
Financial Performance								
Operating Income	1,837,522	13,095,410	(11,257,888)	8,458,838	6,873,087	41,876,741	(35,003,654)	32,344,230
Net Income	(1,022,657)	11,833,539	(12,856,196)	1,012,840	(1,031,851)	37,702,376	(38,734,227)	25,450,484
Oper. Expenses/Adj. Patient Days	3,598	3,328	(8.1%)	3,276	3,594	3,311	(8.6%)	3,299
EBIDA Margin-Excludes PHMG	10.4%	13.6%	(3.2%)	9.3%	10.2%	13.8%	(3.6%)	13.1%
EBIDA-Excludes PHMG	22,699,540	30,432,589	(7,733,049)	18,552,561	64,981,479	93,391,306	(28,409,827)	79,288,318

Note: Financial Performance excludes GO Bonds

Income Statement: Current Month

Excludes PHMG

	Actual	Budget	Variance	Variance		Dollars/Adjusted Patient Day		
	Mar-23	Mar-23	Mar-23	Volume	Rate/Eff	Actual	Budget	Variance
Adjusted Patient Days	20,002	18,552	1,450					
Adjusted Discharges	3,577	3,408	169					
Operating Revenue								
Gross revenue	443,600,042	423,002,505	20,597,537	33,061,321	(12,463,784.27)	22,177.78	22,800.91	(623)
Deductions from revenue	(370,303,205)	(348,754,342)	(21,548,863)	(27,258,182)	5,709,319	(18,513.31)	(18,798.75)	285
Net patient revenue	73,296,837	74,248,163	(951,326)	5,803,139	(6,754,465)	3,664	4,002	(338)
Other operating revenue	930,396	813,734	116,662	63,600.38	53,061.94	46.52	43.86	3
Total net revenue	74,227,233	75,061,897	(834,664)	5,866,739	(6,701,404)	3,711	4,046	(335)
Operating Expenses								
Salaries, wages & contract labor	36,067,614	31,539,927	(4,527,687)	(2,465,119)	(2,062,568)	1,803	1,700	(103)
Benefits	6,853,720	9,319,185	2,465,465	(728,375)	3,193,840	343	502	160
Supplies	11,110,027	10,165,677	(944,350)	(794,536)	(149,814)	555	548	(7)
Prof fees & purch svcs	12,017,813	12,225,240	207,427	(955,509)	1,162,935	601	659	58
Depreciation	3,871,878	3,812,356	(59,522)	(297,969)	238,447	194	205	12
Other	3,606,062	3,381,642	(224,420)	(264,305)	39,885	180	182	2
Total expenses	73,527,114	70,444,027	(3,083,087)	(5,505,813)	2,422,726	3,676	3,797	121
Income from operations	700,119	4,617,870	(3,917,751)	360,927	(4,278,678)	35	249	(214)
Non-operating revenue(expense)								
Property tax revenues ¹	1,675,000	1,675,000	0					
Interest rate swap	-	-	-					
Investment income	1,198,662	83,372	1,115,290					
Revenue bond interest expense	(4,119,374)	(2,382,303)	(1,737,071)					
Other non-operating revenue(expense)	(224,633)	214,207	(438,840)					
Net Income ²	(770,226)	4,208,146	(4,978,371)					
EBIDA Margin	9.7%	13.9%	(4.1%)					

1= Property Tax Revenue excludes G.O. Bonds Levy

2= Excludes G.O. Bonds income / expense

Income Statement: 3rd Quarter

Excludes PHMG

	Actual	Budget	Variance	Variance		Dollars/Adjusted Patient Day		
	Mar-23	Mar-23	Mar-23	Volume	Rate/Eff	Actual	Budget	Variance
Adjusted Patient Days	56,986	59,959	(2,973)					
Adjusted Discharges	10,374	34,310	(23,936)					
Operating Revenue								
Gross revenue	1,278,832,622	1,285,660,784	(6,828,162)	(63,748,053)	56,919,891	22,441	21,442	999
Deductions from revenue	(1,063,585,545)	(1,063,968,329)	382,784	52,755,680	(52,372,896)	(18,664)	(17,745)	(919)
Net patient revenue	215,247,077	221,692,455	(6,445,378)	(10,992,373)	4,546,995	3,777	3,697	80
Other operating revenue	3,142,293	2,381,202	761,091	(118,069)	879,160	55	40	15
Total net revenue	218,389,370	224,073,657	(5,684,287)	(11,110,442)	5,426,155	3,832	3,737	95
Operating Expenses								
Salaries, wages & contract labor	102,523,154	95,680,575	(6,842,579)	4,744,214	(11,586,793)	1,799	1,596	(203)
Benefits	23,176,860	27,685,068	4,508,208	1,372,733	3,135,475	407	462	55
Supplies	31,711,166	29,452,963	(2,258,203)	1,460,392	(3,718,595)	556	491	(65)
Prof fees & purch svcs	37,570,566	36,565,239	(1,005,327)	1,813,047	(2,818,374)	659	610	(49)
Depreciation	11,530,866	11,452,141	(78,725)	567,842	(646,567)	202	191	(11)
Other	10,039,236	10,142,261	103,025	502,893	(399,868)	176	169	(7)
Total expenses	216,551,848	210,978,247	(5,573,601)	10,461,121	(16,034,722)	3,800	3,519	(281)
Income from operations	1,837,522	13,095,410	(11,257,888)	(649,321)	(10,608,567)	32	218	(186)
Non-operating revenue(expense)								
Property tax revenues ¹	5,025,000	5,025,000	-					
Interest Rate Swap	-	-	-					
Investment income	2,996,613	250,116	2,746,497					
Revenue bond interest expense	(12,191,331)	(7,146,909)	(5,044,422)					
Other non-operating revenue(expense)	1,309,539	609,922	699,617					
Net Income ²	(1,022,657)	11,833,539	(12,856,196)					
EBIDA Margin	10.4%	13.6%	(3.2%)					

1= Property Tax Revenue excludes G.O. Bonds Levy

2= Excludes G.O. Bonds income / expense

Income Statement: Year-to-Date

Excludes PHMG

	Actual	Budget	Variance	Variance		Dollars/Adjusted Patient Day		
	Mar-23	Mar-23	Mar-23	Volume	Rate/Eff	Actual	Budget	Variance
Adjusted Patient Days	165,783	181,903	(16,120)					
Adjusted Discharges	31,751	34,310	(2,559)					
Operating Revenue								
Gross revenue	3,720,900,377	3,924,595,601	(203,695,224)	(347,792,401)	144,097,177	22,444	21,575	869
Deductions from revenue	(3,090,711,249)	(3,253,386,881)	162,675,632	288,310,784	(125,635,151)	(18,643)	(17,885)	(758)
Net patient revenue	630,189,128	671,208,720	(41,019,592)	(59,481,617)	18,462,025	3,801	3,690	111
Other operating revenue	8,099,315	7,143,608	955,707	(633,057)	1,588,764	49	39	10
Total net revenue	638,288,443	678,352,328	(40,063,885)	(60,114,674)	20,050,789	3,850	3,729	121
Operating Expenses								
Salaries, wages & contract labor	302,504,650	289,592,524	(12,912,126)	25,663,301	(38,575,427)	1,825	1,592	(233)
Benefits	69,723,396	81,426,540	11,703,144	7,215,911	4,487,233	421	448	27
Supplies	90,289,754	89,798,968	(490,786)	7,957,864	(8,448,650)	545	494	(51)
Prof fees & purch svcs	104,688,601	111,342,688	6,654,087	9,867,040	(3,212,952)	631	612	(19)
Depreciation	35,533,945	34,248,203	(1,285,742)	3,035,030	(4,320,772)	214	188	(26)
Other	28,675,010	30,066,664	1,391,654	2,664,467	(1,272,814)	173	165	(8)
Total expenses	631,415,356	636,475,587	5,060,231	56,403,613	(51,343,382)	3,809	3,499	(310)
Income from operations	6,873,087	41,876,741	(35,003,654)	(3,711,061)	(31,292,593)	41	230	(189)
Non-operating revenue(expense)								
Property tax revenues ¹	15,075,000	15,075,000	0					
Interest Rate Swap	5,324,960	-	5,324,960					
Investment income	4,677,812	750,344	3,927,468					
Revenue bond interest expense	(35,804,345)	(21,440,727)	(14,363,618)					
Other non-operating revenue(expense)	2,821,635	1,441,018	1,380,617					
Net Income ²	(1,031,851)	37,702,376	(38,734,227)					
EBIDA Margin	10.2%	13.8%	(3.6%)					

1= Property Tax Revenue excludes G.O. Bonds Levy

2= Excludes G.O. Bonds income / expense

Income Statement: Current Month vs. Prior Year Month

Excludes PHMG

	Current Month	Prior Year Month	Change	Variance		Dollars/Adjusted Patient Day		
	Mar-23	Mar-22		Volume	Rate/Eff	Actual	Budget	Variance
Adjusted Patient Days	20,002	18,597	1,405					
Adjusted Discharges	3,577	3,380	197					
Operating Revenue								
Gross revenue	443,600,042	409,850,606	33,749,436	30,964,139	2,785,297	22,178	22,039	139
Deductions from revenue	(370,303,205)	(342,686,440)	(27,616,765)	(25,889,899)	(1,726,866)	(18,513)	(18,427)	(86)
Net patient revenue	73,296,837	67,164,166	6,132,671	5,074,241	1,058,430	3,664	3,612	53
Other operating revenue	930,396	784,547	145,849	59,272	86,577	47	42	4
Total net revenue	74,227,233	67,948,713	6,278,520	5,133,513	1,145,007	3,711	3,654	57
Operating Expenses								
Salaries, wages & contract labor	36,067,614	33,220,635	(2,846,979)	(2,509,813)	(337,166)	1,803	1,786	(17)
Benefits	6,853,720	5,430,822	(1,422,898)	(410,298)	(1,012,600)	343	292	(51)
Supplies	11,110,027	9,585,924	(1,524,103)	(724,215)	(799,888)	555	515	(40)
Prof fees & purch svcs	12,017,813	11,861,620	(156,193)	(896,143)	739,950	601	638	37
Depreciation	3,871,878	3,701,760	(170,118)	(279,667)	109,549	194	199	5
Other	3,606,062	3,899,706	293,644	(294,622)	588,266	180	210	29
Total expenses	73,527,114	67,700,467	(5,826,647)	(5,114,758)	(711,889)	3,676	3,640	(36)
Income from operations	700,119	248,246	451,873	18,755	433,118	35	13	22
Non-operating revenue(expense)								
Property tax revenues ¹	1,675,000	1,583,333	91,667					
Interest rate swap	-	-	-					
Investment income	1,198,662	(2,146,500)	3,345,162					
Revenue bond interest expense	(4,119,374)	(2,328,900)	(1,790,474)					
Other non-operating revenue(expense)	(224,633)	(580,961)	356,328					
Net Income ²	(770,226)	(3,224,782)	2,454,556					
EBIDA Margin	9.7%	4.1%	5.6%					

1= Property Tax Revenue excludes G.O. Bonds Levy

2= Excludes G.O. Bonds income / expense

Income Statement: Current Year vs. Prior Year

Excludes PHMG

	Current Year	Prior Year	Change	Variance		Dollars/Adjusted Patient Day		
	Mar-23	Mar-22		Volume	Rate/Eff	Actual	Budget	Variance
Adjusted Patient Days	165,783	163,694	2,089					
Adjusted Discharges	31,751	29,096	2,655					
Operating Revenue								
Gross revenue	3,720,900,377	3,450,474,003	270,426,374	44,033,625	226,392,749	22,444	21,079	1,366
Deductions from revenue	(3,090,711,248)	(2,851,429,025)	(239,282,223)	(36,388,843)	(202,893,380)	(18,643)	(17,419)	(1,224)
Net patient revenue	630,189,130	599,044,978	31,144,151	7,644,782	23,499,369	3,801	3,660	142
Other operating revenue	8,099,315	6,428,074	1,671,241	82,033	1,589,208	49	39	10
Total net revenue	638,288,444	605,473,052	32,815,392	7,726,815	25,088,577	3,850	3,699	151
Operating Expenses								
Salaries, wages & contract labor	302,504,650	261,586,928	(40,917,722)	(3,338,272)	(37,579,450)	1,825	1,598	(227)
Benefits	69,723,396	71,418,559	1,695,163	(911,416)	2,606,579	421	436	16
Supplies	90,289,754	82,692,703	(7,597,051)	(1,055,293)	(6,541,758)	545	505	(39)
Prof fees & purch svcs	104,688,601	97,176,536	(7,512,065)	(1,240,130)	(6,271,935)	631	594	(38)
Depreciation	35,533,945	33,093,602	(2,440,343)	(422,328)	(2,018,015)	214	202	(12)
Other	28,675,011	27,160,494	(1,514,517)	(346,612)	(1,167,905)	173	166	(7)
Total expenses	631,415,357	573,128,822	(58,286,535)	(7,314,050)	(50,972,485)	3,809	3,501	(307)
Income from operations	6,873,087	32,344,230	(25,471,143)	412,765	(25,883,908)	41	198	(156)
Non-operating revenue(expense)								
Property tax revenue ¹	15,075,000	14,250,000	825,000					
Interest Rate Swap	5,324,960	-	5,324,960					
Investment income	4,677,812	(5,113,610)	9,791,422					
Revenue bond interest expense	(35,804,345)	(20,744,232)	(15,060,113)					
Other non-operating revenue(expense)	2,821,635	4,714,096	(1,892,461)					
Net Income²	(1,031,852)	25,450,484	(26,482,336)					
EBIDA Margin	10.2%	13.1%	(2.9%)					

1- Property Tax Revenue excludes G.O. Bonds Levy

2- Excludes G.O. Bonds income / expense

Income Statement: Current Fiscal Year Monthly Trend

Excludes PHMG

	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Fiscal Year 2023
Adjusted Discharges	3,428	3,548	3,514	3,664	3,578	3,645	3,554	3,243	3,577	-	-	-	31,751
Operating Revenue													
Gross revenue	386,861,833	414,593,123	400,045,463	398,360,268	410,607,111	431,599,958	432,150,986	403,081,594	443,600,042	-	-	-	3,720,900,377
Deductions from revenue	(319,503,944)	(347,149,344)	(333,966,875)	(324,930,831)	(340,408,016)	(361,166,691)	(358,776,424)	(334,505,916)	(370,303,205)	-	-	-	(3,090,711,249)
Net patient revenue	67,357,889	67,443,779	66,078,588	73,429,437	70,199,095	70,433,267	73,374,562	68,575,678	73,296,837	-	-	-	630,189,128
Other operating revenue	652,405	777,663	861,211	724,955	847,263	1,093,524	1,101,428	1,110,469	930,396	-	-	-	8,099,315
Total net revenue	68,010,294	68,221,442	66,939,799	74,154,392	71,046,358	71,526,791	74,475,990	69,686,147	74,227,233	-	-	-	638,288,443
Operating Expenses													
Salaries, wages & contract labor	32,764,595	32,513,284	32,924,893	33,775,849	34,989,349	33,013,527	35,061,254	31,394,286	36,067,614	-	-	-	302,504,650
Benefits	8,157,659	5,548,530	7,714,185	7,659,670	7,740,593	9,725,899	7,884,855	8,438,285	6,853,720	-	-	-	69,723,396
Supplies	8,187,227	9,771,666	9,540,971	10,911,278	9,664,535	10,502,911	10,644,566	9,956,573	11,110,027	-	-	-	90,289,754
Prof fees & purch svcs	10,021,634	11,295,327	10,136,394	12,681,563	11,523,340	11,459,778	13,010,935	12,541,818	12,017,813	-	-	-	104,688,601
Depreciation	3,466,586	4,918,874	4,081,665	3,872,660	3,871,656	3,791,637	3,823,741	3,835,247	3,871,878	-	-	-	35,533,945
Other	3,618,338	3,442,044	1,603,481	4,226,752	3,156,513	2,588,646	3,032,621	3,400,553	3,606,062	-	-	-	28,675,010
Total expenses	66,216,039	67,489,725	66,001,589	73,127,772	70,945,985	71,082,398	73,457,972	69,566,762	73,527,114	-	-	-	631,415,356
Income from operations	1,794,255	731,717	938,210	1,026,619	100,372	444,393	1,018,018	119,385	700,119	-	-	-	6,873,087
Non-operating revenue (expense)													
Property tax revenues ¹	1,583,333	1,583,333	1,583,333	1,583,332	2,041,668	1,675,000	1,675,000	1,675,000	1,675,000	-	-	-	15,075,000
Investment Income	1,022,171	(732,362)	(906,583)	292,790	722,703	1,282,479	1,152,256	645,695	1,198,662	-	-	-	4,677,812
Interest Expense	1,914,301	4,562,164	3,214,888	3,075,712	6,786,342	4,059,607	4,038,845	4,033,112	4,119,374	-	-	-	35,804,345
Interest Rate Swap	-	-	-	-	5,324,960	-	-	-	(0)	-	-	-	5,324,960
Other	108,213	346,688	562,613	193,452	236,239	64,895	1,524,892	9,280	(224,634)	-	-	-	2,821,635
Net income ²	2,593,671	(2,632,788)	(1,037,315)	20,481	1,639,601	(592,840)	1,331,321	(1,583,752)	(770,226)	-	-	-	(1,031,851)
EBIDA Margin	11.7%	10.0%	9.4%	9.4%	9.8%	10.2%	12.3%	9.0%	9.7%	0.0%	0.0%	0.0%	10.2%

1= Property Tax Revenue excludes G.O. Bonds Levy

2= Excludes G.O. Bonds income / expense

Income Statement: 13-Month Trend

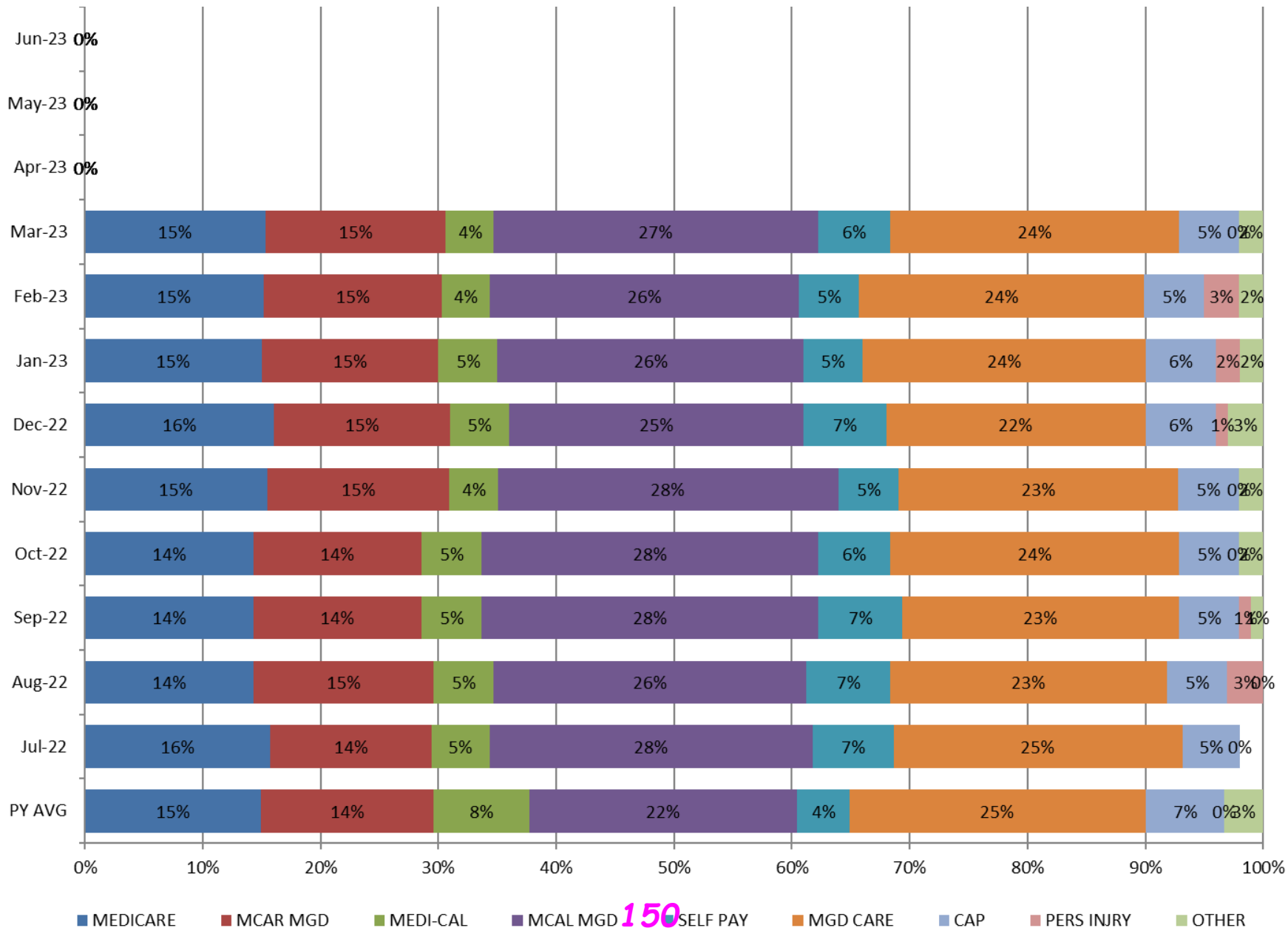
Excludes PHMG

	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23
Adjusted Discharges	3,380	3,349	3,251	3,900	3,428	3,548	3,514	3,664	3,578	3,645	3,554	3,243	3,577
Operating Revenue													
Gross revenue	409,850,606	367,578,896	361,928,194	375,821,247	386,861,833	414,593,123	400,045,463	398,360,268	410,607,111	431,599,958	432,150,986	403,081,594	443,600,042
Deductions from revenue	(342,686,440)	(301,312,242)	(297,940,380)	(314,241,456)	(319,503,944)	(347,149,344)	(333,966,875)	(324,930,831)	(340,408,016)	(361,166,691)	(358,776,424)	(334,505,916)	(370,303,205)
Net patient revenue	67,164,166	66,266,654	63,987,814	61,579,791	67,357,889	67,443,779	66,078,588	73,429,437	70,199,095	70,433,267	73,374,562	68,575,678	73,296,837
Other operating revenue	784,547	852,459	641,173	1,310,521	652,405	777,663	861,211	724,955	847,263	1,093,524	1,101,428	1,110,469	930,396
Total net revenue	67,948,713	67,119,113	64,628,987	62,890,312	68,010,294	68,221,442	66,939,799	74,154,392	71,046,358	71,526,791	74,475,990	69,686,147	74,227,233
Operating Expenses													
Salaries, wages & contract labor	33,220,635	29,807,910	28,995,864	24,928,515	32,764,595	32,513,284	32,924,892	33,775,849	34,989,349	33,013,527	35,061,254	31,394,286	36,067,614
Benefits	5,430,822	6,823,078	7,373,649	8,232,869	8,157,659	5,548,530	7,714,185	7,659,670	7,740,593	9,725,899	7,884,855	8,438,285	6,853,720
Supplies	9,585,924	8,834,196	8,775,759	9,987,179	8,187,227	9,771,666	9,540,971	10,911,278	9,664,535	10,502,911	10,644,566	9,956,573	11,110,027
Prof fees & purch svcs	11,861,620	10,756,291	9,994,501	12,623,669	10,021,634	11,295,327	10,136,393	12,681,563	11,523,340	11,459,778	13,010,935	12,541,818	12,017,813
Depreciation	3,701,760	3,767,782	3,766,102	9,639,591	3,466,586	4,918,874	4,081,665	3,872,660	3,871,656	3,791,637	3,823,741	3,835,247	3,871,878
Other	3,899,706	3,601,095	3,627,356	(6,623,350)	3,618,338	3,442,044	1,603,481	4,226,752	3,156,513	2,588,646	3,032,621	3,400,553	3,606,062
Total expenses	67,700,467	63,590,352	62,533,231	58,788,473	66,216,039	67,489,725	66,001,587	73,127,772	70,945,986	71,082,398	73,457,972	69,566,762	73,527,114
Income from operations	248,246	3,528,761	2,095,756	4,101,839	1,794,255	731,717	938,212	1,026,620	100,372	444,393	1,018,018	119,385	700,119
Non-operating revenue (expense)													
Property tax revenues ¹	1,583,333	1,583,333	1,583,333	2,767,623	1,583,333	1,583,333	1,583,333	1,583,333	2,041,667	1,675,000	1,675,000	1,675,000	1,675,000
Investment Income	(2,146,500)	(1,089,763)	868,329	(173,507)	1,022,171	(732,362)	(906,583)	292,790	722,703	1,282,479	1,152,256	645,695	1,198,662
Interest Expense	(2,328,900)	(2,269,055)	(2,299,876)	(13,300,418)	(1,914,301)	(4,562,164)	(3,214,888)	(3,075,712)	(6,786,342)	(4,059,607)	(4,038,845)	(4,033,112)	(4,119,374)
Interest Rate Swap	-	-	-	13,152,115	-	-	-	-	5,324,960	-	-	-	-
Other	(580,961)	797,213	1,131,532	4,864,522	108,213	346,688	562,609	193,452	236,239	64,895	1,524,892	9,280	(224,633)
Net income ²	(3,224,782)	2,550,489	3,379,074	11,412,174	2,593,671	(2,632,788)	(1,037,317)	20,483	1,639,599	(592,840)	1,331,321	(1,583,752)	(770,226)
EBIDA Margin	4.1%	12.8%	14.6%	33.7%	11.7%	10.0%	9.4%	9.4%	9.8%	10.2%	12.3%	9.0%	9.7%

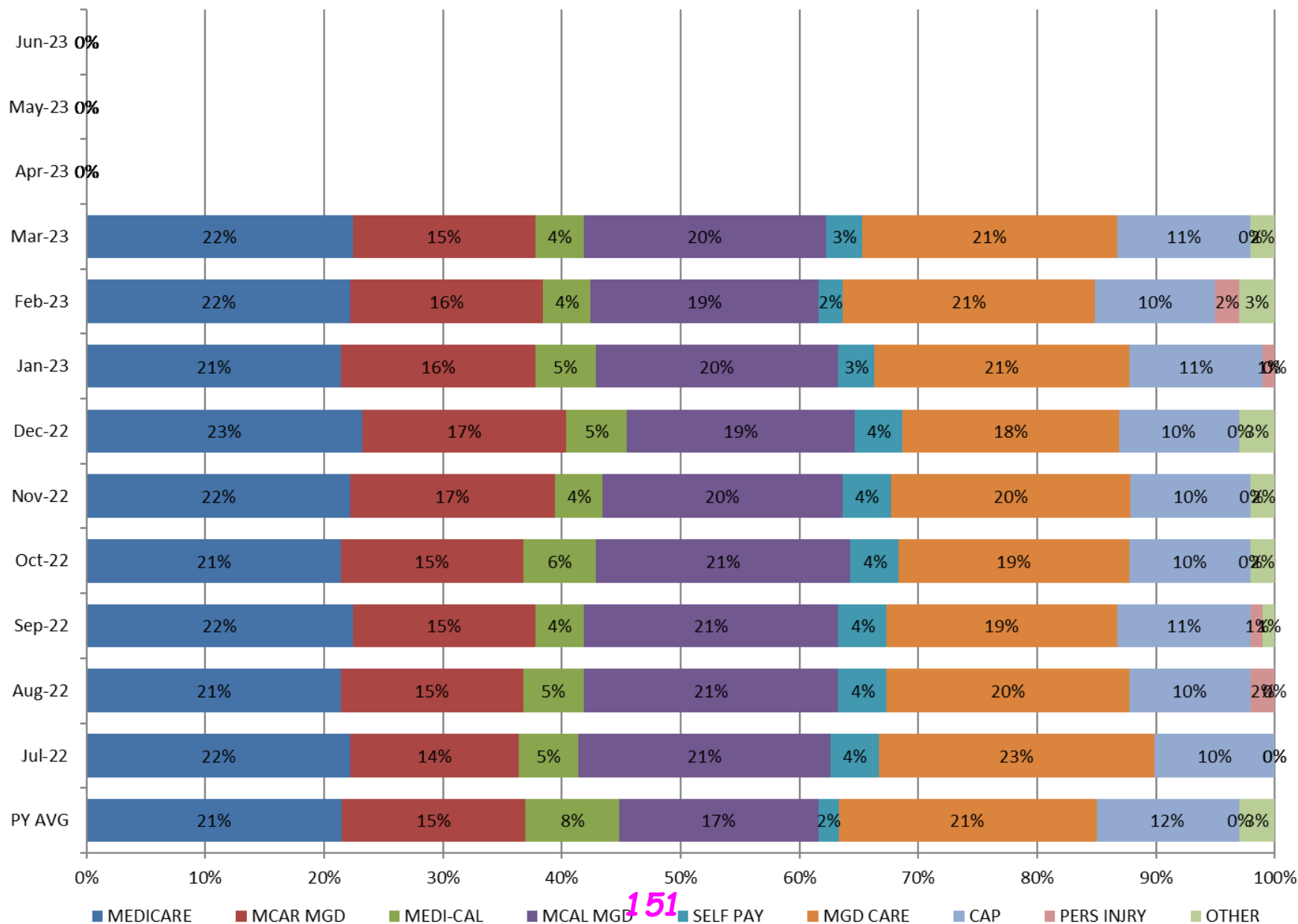
1= Property Tax Revenue excludes G.O. Bonds Levy

2= Excludes G.O. Bonds income / expense

Payor Mix: Emergency Department



Payor Mix: Gross Revenue



Statement of Net Position: Excludes G.O. Bonds

Excludes PHMG

Assets	Mar-23	Feb-23	Jun-22
Current Assets			
Cash and cash equivalents	12,983,156	8,684,252	30,997,521
Investments	85,777,506	90,329,865	186,291,158
Board Designated	13,678,054	-	34,785,660
Total cash,cash equivalents & investments	112,438,716	99,014,116	252,074,340
Patient Accounts Receivable	503,774,320	485,475,390	400,381,312
Allowance on accounts	(319,090,493)	(303,498,567)	(251,383,493)
Net accounts receivable	184,683,827	181,976,822	148,997,820
Inventories	12,919,937	12,739,674	12,480,465
Prepaid expenses	13,242,288	10,994,480	8,682,562
Est. third party settlements	123,851,715	90,441,388	58,713,877
Other	48,210,205	43,753,752	37,918,474
Total current assets	495,346,687	438,920,232	518,867,537
Non-Current Assets			
Restricted assets	149,057,008	150,259,776	58,256,063
Restricted other	356,057	14,031,949	353,100
Total restricted assets	149,413,065	164,291,725	58,609,163
Property, plant & equipment	1,516,172,038	1,515,564,527	1,511,183,821
Accumulated depreciation	(631,213,228)	(627,913,677)	(601,520,327)
Construction in process	99,146,790	95,915,879	64,486,109
Net property, plant & equipment	984,105,600	983,566,729	974,149,602
Right of Use Assets	229,676,501	229,964,006	238,533,505
Investment related companies	6,151,535	6,266,673	6,903,551
Prepaid debt insurance costs	7,688,509	7,714,548	5,868,703
Other non-current assets	38,620,237	37,704,404	39,561,628
Total non-current assets	1,415,655,447	1,429,508,085	1,323,626,151
Total assets	1,911,002,134	1,868,428,317	1,842,493,688
Deferred outflow of resources-loss on refunding of debt	53,088,765	54,700,611	47,781,137
Total assets and deferred outflow of resources	1,964,090,899	1,923,128,929	1,890,274,825

Liabilities	Mar-23	Feb-23	Jun-22
Current Liabilities			
Accounts payable	69,202,643	49,177,634	67,371,368
Accrued payroll	23,628,959	33,532,651	30,182,511
Accrued PTO	25,599,060	24,469,955	24,932,792
Accrued interest payable	15,247,292	12,129,360	5,057,411
Current portion of bonds	8,110,000	8,110,000	14,425,000
Current portion of lease liab	6,233,526	6,146,350	5,744,577
Est. third party settlements	15,455,895	(15,413,001)	27,984,699
Other current liabilities	66,524,643	65,188,343	61,780,722
Total current liabilities	230,002,018	183,341,293	237,479,080
Long Term Liabilities			
Other LT liabilities	446,562	489,295	1,302,956
Bonds & contracts payable	741,973,522	743,531,100	626,046,242
Lease liabilities	243,512,461	243,293,180	247,242,225
Total long term liabilities	985,932,545	987,313,575	874,591,423
Total liabilities	1,215,934,563	1,170,654,867	1,112,070,502
Deferred inflow of unearned revenue	6,798,025	6,806,876	6,877,684
Total liabilities and deferred inflow of resources	1,222,732,588	1,177,461,743	1,118,948,186
Net Position			
Unrestricted	741,002,253	731,635,236	757,295,485
Restricted for other purpose	356,057	14,031,949	14,031,154
Total net position	741,358,311	745,667,185	771,326,639
Total liabilities, deferred inflow of resources and net position	1,964,090,899	1,923,128,929	1,890,274,825

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Statement of Net Position: Includes G.O. Bonds

Excludes PHMG

Assets	Mar-23	Feb-23	Jun-22
Current Assets			
Cash and cash equivalents	12,983,156	8,684,252	30,997,521
Investments	85,777,506	90,329,865	186,291,158
Board Designated	13,678,054	-	21,107,606
Total cash, cash equivalents & investments	112,438,716	99,014,116	238,396,286
Patient Accounts Receivable	503,774,320	485,475,390	400,381,312
Allowance on accounts	(319,090,493)	(303,498,567)	(251,383,493)
Net accounts receivable	184,683,827	181,976,822	148,997,820
Inventories	12,919,937	12,739,674	12,480,465
Prepaid expenses	13,242,288	10,994,480	8,682,562
Est. third party settlements	123,851,715	90,441,388	58,713,877
Other	51,944,630	44,892,760	38,118,475
Total current assets	499,081,113	440,059,241	505,389,483
Non-Current Assets			
Restricted assets	191,929,240	191,976,274	110,141,999
Restricted other	356,057	14,031,949	14,031,154
Total restricted assets	192,285,297	206,008,223	124,173,153
Property, plant & equipment	1,516,172,038	1,515,564,527	1,511,183,821
Accumulated depreciation	(631,213,228)	(627,913,677)	(601,520,327)
Construction in process	99,146,790	95,915,879	64,486,109
Net property, plant & equipment	984,105,600	983,566,729	974,149,602
Right of Use Assets	229,676,501	229,964,006	238,533,505
Investment related companies	6,151,535	6,266,673	6,903,551
Prepaid debt insurance and other costs	9,189,444	9,228,953	7,491,373
Other non-current assets	38,620,237	37,704,404	39,561,628
Total non-current assets	1,460,028,614	1,472,738,988	1,390,812,812
Total assets	1,959,109,727	1,912,798,229	1,896,202,295
Deferred outflow of resources-loss on refunding of debt	55,946,437	57,576,144	50,799,553
Total assets and deferred outflow of resources	2,015,056,165	1,970,374,374	1,947,001,848

Liabilities	Feb-23	Feb-23	Jun-22
Current Liabilities			
Accounts payable	69,203,143	49,177,634	67,374,118
Accrued payroll	23,628,959	33,532,651	30,182,511
Accrued PTO	25,599,060	24,469,955	24,932,792
Accrued interest payable	25,195,088	19,361,102	21,425,246
Current portion of bonds	16,903,916	16,903,916	22,485,800
Current portion of lease liab	6,233,526	6,146,350	5,744,577
Est. third party settlements	15,455,895	(15,413,001)	27,984,699
Other current liabilities	31,996,615	30,475,607	24,680,710
Total current liabilities	214,216,201	164,654,215	224,810,452
Long Term Liabilities			
Other LT liabilities	446,562	489,295	1,302,956
Bonds & contracts payable	1,387,444,728	1,388,736,032	1,277,787,416
Lease liabilities	243,512,461	243,293,180	247,242,225
Total long term liabilities	1,631,403,751	1,632,518,507	1,526,332,597
Total liabilities	1,845,619,952	1,797,172,721	1,751,143,049
Deferred inflow of unearned revenue	41,326,053	41,519,612	43,977,697
Total liabilities and deferred inflow of resources	1,886,946,005	1,838,692,333	1,795,120,746
Net Position			
Unrestricted	127,754,101	117,650,091	137,849,948
Restricted for other purpose	356,057	14,031,949	14,031,154
Total net position	128,110,158	131,682,040	151,881,102
Total liabilities, deferred inflow of resources and net position	2,015,056,165	1,970,374,374	1,947,001,848

Palomar Health
STATEMENT OF CASH FLOWS
Fiscal Year 2023

	<u>Mar-23</u>	<u>YTD</u>
CASH FLOWS FROM OPERATING ACTIVITIES:		
Income (Loss) from operations	700,119	6,873,087
Adjustments to reconcile change in net assets to net cash provided from operating activities:		
Depreciation Expense	3,871,878	36,698,154
Provision for bad debts	7,775,215	64,357,319
Changes in operating assets and liabilities:		
Patient accounts receivable	(10,482,219)	(100,043,323)
Property Tax and other receivables	(3,349,150)	(9,017,293)
Inventories	(180,263)	(439,472)
Prepaid expenses and other current assets	(1,963,928)	(296,533)
Accounts payable	20,025,509	1,829,025
Accrued compensation	(8,774,587)	(5,887,285)
Estimated settlement amounts due third-party payors	(2,541,431)	(77,666,642)
Other liabilities	1,422,490	7,375,974
Net cash provided from (used by) operating activities	<u>6,503,633</u>	<u>(76,216,989)</u>
CASH FLOWS FROM INVESTING ACTIVITIES:		
Net (purchases) sales of investments	4,597,231	39,831,060
Income (Loss) on investments	1,324,813	5,354,595
Investment in affiliates	(4,376,796)	(27,975,632)
Net cash provided from (used by) investing activities	<u>1,545,248</u>	<u>17,210,023</u>
CASH FLOWS FROM NON-CAPITAL FINANCING ACTIVITIES:		
Receipt of G.O. Bond Taxes	1,029,582	29,090,573
Receipt of District Taxes	567,698	13,800,564
Net cash provided from non-capital financing activities	<u>1,597,280</u>	<u>42,891,137</u>
CASH FLOWS FROM CAPITAL AND RELATED FINANCING ACTIVITIES:		
Proceeds on asset sale	3,600	926,552
Proceeds from the issuance of long-term debt	0	258,696,778
Cost of Issuance payments	0	(18,211,396)
Acquisition of property plant and equipment	(3,818,695)	(43,283,292)
Redevelopment Trust Fund Distributions	0	1,448,297
G.O. Bond Interest paid	0	(27,373,589)
Revenue Bond Interest paid	0	(8,903,858)
ROU Interest paid	(921,137)	(6,560,894)
Payments of Long Term Debt	(611,025)	(158,637,135)
Net cash provided from (used by) capital and related financing activities	<u>(5,347,257)</u>	<u>(1,898,537)</u>
NET INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS	4,298,904	(18,014,365)
CASH AND CASH EQUIVALENTS - Beginning of period	<u>8,684,252</u>	<u>30,997,521</u>
CASH AND CASH EQUIVALENTS - End of period	<u>12,983,156</u>	<u>12,983,156</u>

Investment Fund - Quarter Ended March 31, 2023 Yield Analysis

Investment Account:	% of Portfolio at 3/31/2023	Maturity Date	Yield	Benchmark		Actual to Benchmark Variance	Total Yield
Fidelity-Institutional Portfolio Treasury Fund	8.18%	Demand	4.74%	4.76%	(1)	(0.02%)	0.39%
State Treasurer Local Agency Investment Fund	71.26%	Demand	2.74%	2.63%	(2)	0.11%	1.95%
Morgan Stanley	17.23%	Various	1.64%	1.82%	(3)	(0.18%)	0.28%
				7.50%	(4)	(5.86%)	
Chandler Asset Management	2.32%	Various	2.66%	1.82%	(3)	0.84%	0.06%
				7.50%	(4)	(4.84%)	
Goldman Sachs Asset Management	1.00%	Various	4.48%	1.82%	(3)	2.66%	0.04%
				7.50%	(4)	(3.02%)	
Total:	100.00%						

TOTAL YIELD: 2.73%

PRIOR QUARTER: 1.77%

PRIOR YEAR: (1.65%)

- (1) Approximate average of 90 day T-Bills
- (2) LAIF annual average return based upon monthly yields
- (3) BC Intermediate Government Credits
- (4) S&P 500

Condensed Combining Statement of Net Position

CONDENSED COMBINING STATEMENT OF NET POSITION

MARCH 31, 2023

	PH	PHMG	PAM	PAM-SD	PAC	Eliminations	Total
ASSETS							
Current assets	499,081,115	44,312,287	2,937	-	1,135,311	(35,378,296)	509,153,354
Capital assets - net	984,105,600	5,744,548	-	-	-	-	989,850,148
Right of use assets - net	229,676,501	19,087,977	-	-	-	(14,477,717)	234,286,761
Non-current assets	246,246,512	6,330,533	-	-	-	(8,804,163)	243,772,882
Total assets	1,959,109,728	75,475,345	2,937	-	1,135,311	(58,660,176)	1,977,063,145
Deferred outflow of resources	55,946,437	-	-	-	-	-	55,946,437
TOTAL ASSETS AND DEFERRED OUTFLOW OF RESOURCES	2,015,056,165	75,475,345	2,937	-	1,135,311	(58,660,176)	2,033,009,582
LIABILITIES AND NET POSITION							
Current liabilities	214,278,702	56,496,051	-	-	111,743	(38,228,121)	232,658,375
Long-term liabilities	1,387,891,290	4,341,183	-	-	-	(4,341,183)	1,387,891,290
Right of use lease liabilities	243,512,461	14,127,812	-	-	-	(12,254,287)	245,385,986
Total liabilities	1,845,682,453	74,965,046	-	-	111,743	(54,823,591)	1,865,935,651
Deferred inflow of resources - deferred revenue	41,263,554	-	-	-	-	-	41,263,554
Total liabilities and deferred inflow of resources	1,886,946,007	74,965,046	-	-	111,743	(54,823,591)	1,907,199,205
Invested in capital assets - net of related debt	(356,229,229)	4,695,102	-	-	-	-	(351,534,127)
Restricted	142,210,450	-	-	-	-	-	142,210,450
Unrestricted	342,128,937	(4,184,803)	2,937	-	1,023,568	(3,836,585)	335,134,054
Total net position	128,110,158	510,299	2,937	-	1,023,568	(3,836,585)	125,810,377
TOTAL LIABILITIES, DEFERRED INFLOW OF RESOURCES, AND NET POSITION	2,015,056,165	75,475,345	2,937	-	1,135,311	(58,660,176)	2,033,009,582

Note: Financial Performance includes GO Bonds

Condensed Combining Statement of Revenue, Expenses, and Changes in Net Position

CONDENSED COMBINING STATEMENT OF REVENUE, EXPENSES, AND CHANGES IN NET POSITION FOR THE NINE MONTHS ENDED MARCH 31, 2023

	PH	PHMG	PAM	PAM-SD	PAC	Elimination	YTD Consolidated
OPERATING REVENUE:							
Net patient service revenue	584,477,950	59,792,845	-	-	-	-	644,270,795
Shared risk revenue	45,711,178	37,729,394	-	-	-	(4,607,510)	78,833,062
Other revenue	8,099,315	8,513,945	-	-	937,640	(318,865)	17,232,035
PH Program revenue	-	8,750,903	-	-	-	(8,750,903)	-
Total operating revenue	638,288,443	114,787,087	-	-	937,640	(13,677,278)	740,335,892
OPERATING EXPENSES							
DEPRECIATION AND AMORTIZATION	35,533,945	2,410,136	-	-	-	-	37,944,081
Total operating expenses	631,415,356	143,730,002	(228,341)	3,064	613,842	(16,731,131)	758,802,793
INCOME (LOSS) FROM OPERATIONS	6,873,087	(28,942,915)	228,341	(3,064)	323,797	3,053,853	(18,466,901)
NON-OPERATING INCOME (EXPENSE):							
Investment income	5,354,595	164	49	105	-	-	5,354,913
Unrealized loss on interest rate swap	5,324,960	-	-	-	-	-	5,324,960
Interest expense	(62,910,994)	(124,334)	-	-	-	120,471	(62,914,857)
Property tax revenue	47,700,000	-	-	-	-	-	47,700,000
Other - net	2,804,432	1,759,355	1,921,723	(1,891,890)	-	(3,174,324)	1,419,295
Total non-operating expense - net	(1,727,007)	1,635,185	1,921,772	(1,891,785)	-	(3,053,853)	(3,115,689)
CHANGE IN NET POSITION	5,146,080	(27,307,730)	2,150,113	(1,894,849)	323,797	-	(21,582,589)
Interfund Capital Support - PHMG							-
Interfund Operating Support - PHMG	(28,917,022)	27,247,825	-	-	-	-	(1,669,197)
Interfund Support - Graybill							-
Interfund - PHMG	(28,917,022)	27,247,825	-	-	-	-	(1,669,197)
NET POSITION - Beginning of year	151,881,100	570,204	(2,147,176)	1,894,849	699,771	(3,836,585)	149,062,164
NET POSITION - Year to date	128,110,158	510,299	2,937	-	1,023,568	(3,836,585)	125,810,377

EBIDA 79,276,349
EBIDA Margin 10.7%

Note: Financial Performance includes GO Bonds

ADDENDUM E

RESOLUTION NO. 05.08.23(01)-06

**RESOLUTION OF THE BOARD OF DIRECTORS OF PALOMAR HEALTH FINDING
THE NEED FOR UP TO SIX COMPENSABLE MEETINGS PER MONTH FOR THE
EFFECTIVE OPERATION OF THE DISTRICT**

WHEREAS, Palomar Health is a special health care district duly organized and existing under and pursuant to California Health & Safety Code section 32000 *et seq.*;

WHEREAS, California Health & Safety Code section 32103 sets forth the authority for establishing compensation for members of the Board of Directors of Palomar Health District;

WHEREAS, Board members receive compensation in the amount of \$100 for each attendance at a meeting of the Board, or otherwise as permitted pursuant to California Health & Safety Code 32103(b), for a maximum of 5 compensable meetings per month;

WHEREAS, California Health & Safety Code section 32103(a) provides that Board members may be compensated for up to 6 meetings in a calendar month, provided that the Board makes annual written findings that more than 5 meetings per month are necessary for the effective operation of the District;

WHEREAS, the Board wishes to increase the number of compensable meetings from 5 to 6 meetings per calendar month;

WHEREAS, effective January 1, 2019, California Health & Safety Code section 32103 requires the Board to make initial, and then annual findings, supported by substantial evidence, as to why more than 5 compensable Board meetings per month are necessary for the effective operation of the District;

NOW THEREFORE, the Board of Directors of Palomar Health does resolve as follows:

SECTION ONE.

The Board of Directors finds, based on substantial evidence, that the following is representative of the non-exhaustive scope of responsibilities held by the Board, administered and managed through a process requiring more than 5 and up to six 6 compensable Board meetings per calendar month:

1. The Board is responsible for overseeing the business affairs of the largest public healthcare district in California, which services a community comprised of more than half a million people spanning an area of 850-square miles.
2. Board oversight extends to operational management of various facilities, including the District's designated Trauma Center, which serves the needs of over 1,500 patients annually.

3. Fiscal responsibilities include designing and implementing an annual budget responsive to community health needs. Currently, the Board oversees an annual budget of over \$760 million.
4. In 2019, the Board expanded the District's existing physician network by affiliating with the only remaining large medical group in North San Diego County.
5. More recently, the Board secured an affiliation with two of North San Diego County's largest medical groups to create Palomar Health Medical Group, the largest health network in the region.
6. The Board continues to grow the responsibilities of the District, such as with recent contracts with North County Health Project Inc. and Vista Community Clinic.
7. Given the geographical size of the District, the number of residents served, and the broad range of official duties, each Board member must devote a substantial amount of time to District-related business, which includes the following commitments:
 - Board meetings (monthly): 2-3 hours per month
 - Committee meetings (1-3 meetings per month): 1-3 hours per meeting
 - Social events (1-3 events per month): 1-3 hours per event
 - Meeting preparation: 1-2 hours per meeting
 - Meetings with the Executive Vice President (monthly): 1 hour
 - Meetings with the Chief Executive Officer (monthly): 1.5 hours
 - Outside education/readings: 2-4 hours per month
 - Travel outside of local area: 1-2 hours per year
8. The strategic plan for the District has necessitated more informational meetings and education sessions, thereby increasing the amount of time each Board member must dedicate to District-related business.

SECTION TWO. More than 5 compensable meetings per month are necessary for the effective operation of the District. Therefore, Board members may be compensated for up to 6 meetings per month.

SECTION THREE. The Board of Directors of Palomar Health hereby amends and supersedes, to the extent inconsistent with this Resolution, all bylaws, policies, or other documents relating to Board member compensation, to reflect the findings detailed in this

Resolution regarding the necessity for more than 5, and up to 6, compensable meetings per month, such findings to be reviewed annually.

PASSED AND ADOPTED by the Board of Directors of Palomar Health held on May 8, 2023, by the following vote:

AYES:

NAYS:

ABSENT:

ABSTAINING:

DATED: May 8, 2022

<i>APPROVED:</i>	<i>ATTESTED:</i>
Linda Greer, RN, Chairperson Board of Directors Palomar Health.	Terry Corrales, RN, Secretary Board of Directors Palomar Health

RESOLUTION NO. 05.08.23(02)-07

**ORDINANCE OF THE BOARD OF DIRECTORS OF PALOMAR HEALTH
PROVIDING FOR A FIVE PERCENT INCREASE IN BOARD MEMBER
COMPENSATION FOR ATTENDANCE AT BOARD MEETINGS**

WHEREAS, Palomar Health is a special district duly organized and existing under and pursuant to California Health and Safety Code (“Health & Safety Code”) Section 32000 *et seq.*; and

WHEREAS, Health & Safety Code section 32103 provides that Board of Directors (the “Board”) shall serve without compensation, except that the Board may adopt a resolution authorizing the payment of \$100 as compensation per meeting to each Director for attendance at up to 6 Board meetings per calendar month; and

WHEREAS, in 2018, the California Legislature passed Assembly Bill No. 2329 (Obernolte) (“AB 2329”), which amended section 32103 of the Health & Safety Code;

WHEREAS, commencing January 1, 2019, if the Board compensates its Directors for more than 5 meetings in a calendar month, section 32103 of the Health & Safety Code, as amended by AB 2329, requires the Board to adopt an annual written policy describing, based on a finding supported by substantial evidence, why more than 5 meetings per month are necessary for the effective operation of the District; and

WHEREAS, section 32103 of the Health & Safety Code, as amended by AB 2329, provides that the Board may, by ordinance adopted pursuant to California Water Code (“Water Code”) Section 20200 *et seq.*, increase the amount of compensation received by Directors for attendance at Board meetings;

WHEREAS, Water Code section 20202 provides that an increase in compensation may not exceed an amount equal to 5% for each calendar year following the operative date of the last adjustment; and

WHEREAS, the Board desires to establish the amount of compensation by way of this Ordinance in accordance with the provisions of the Water Code;

WHEREAS, the Board has determined that an increase of 5% in the amount of compensation received for each attendance at a Board meeting is appropriate; and

WHEREAS, Water Code section 20203 requires that an ordinance increasing compensation must be considered after a public hearing and a notice of said hearing must be published in a newspaper of general circulation pursuant to California Government Code (“Government Code”) section 6066; and

WHEREAS, in accordance with section 20203 of the Water Code and section 6066 of the Government Code, the Board held a public hearing regarding this Ordinance on May 8, 2023, at 6:30 p.m., at the 1st Floor Conference Center, PMC Escondido, 2185 Citracado Parkway, Escondido, CA. 92029, and a notice of said hearing was duly published in the San Diego Union-

Tribune, a newspaper of general circulation, for two weeks as follows: April 21, 2023, and April 26, 2023; and

NOW THEREFORE, BE IT ORDAINED by the Board of Directors (“Board”) of the Palomar Healthcare District (“District”) as follows:

Section 1. The amount of compensation to be received by the Board for each day’s attendance at meetings of the Board shall be increased by 5% from \$100 to \$105 per day.

Section 2. No Director shall receive the compensation set forth in Section 1 of this Ordinance for more than 6 meetings in any calendar month.

Section 3. The Board reserves the right, pursuant to and in accordance with Health & Safety Code section 32103, to increase the number of compensable meetings from 5 to 6 in any calendar month.

Section 4. Pursuant to Water Code section 20204, this Ordinance shall become effective 60 days from the date of its adoption.

Section 5. Voters of the District have the right, pursuant to Water Code Section 20204, to petition for referendum on this Ordinance. Any such petition must be presented to the Board prior to the effective date of the Ordinance pursuant to Section 20205 of the Water Code.

Section 6. Upon its effective date, this Ordinance supersedes and repeals the provisions of any prior ordinances, resolutions, motions and other actions of the Board to the extent such other provisions are inconsistent with the provisions of this Ordinance.

Section 7. If any subdivision, sentence, clause, or phrase of this Ordinance is, for any reason, held to be invalid or unenforceable by a court of competent jurisdiction, such invalidity or unenforceability shall not affect the validity or enforcement of the remaining portions of this Ordinance. It is the District’s express intent that each remaining portion would have been adopted irrespective of the fact that one or more subdivisions, paragraphs, sentences, clauses, or phrases be declared invalid or unenforceable.

* * * * *

APPROVED AND ADOPTED by the Board of Directors of Palomar Health on this 8th day of May, 2023, by the following vote:

AYES: _____

NOES: _____

ABSTAIN: _____

ABSENT: _____

ATTEST:

****Secretary, Board of Directors****

APPROVED:

****President, Board of Directors****

APPROVED AS TO FORM:

****General Counsel****

ADDENDUM F

RESOLUTION NO. 05.08.23(03)-8

**RESOLUTION OF THE BOARD OF DIRECTORS OF PALOMAR HEALTH
PROVIDING FOR EXPENDITURE AND REQUISITION APPROVAL AUTHORITY**

WHEREAS, Palomar Health (the “District”) is a large and complex healthcare district with many different types of transactions; and

WHEREAS, in order to safeguard the District’s assets, the Board of Directors (the “Board”) has established a set of approval thresholds that must be followed to ensure appropriate review and approval to spend or commit funds; and

WHEREAS, in order to safeguard the District’s assets and ensure that key transactions are executed in accordance the Board’s intentions and plans, certain limits are placed on the authority of individuals to authorize the expenditure or commitment of funds; and

WHEREAS, the District understands the “contracting authority” to mean authority delegated to specified representatives to administer, approve, and execute contracts and agreements on behalf of the District; and

WHEREAS, the District understands the “responsible officer” to be the primary contracting officer for all of the District’s external commitments/transactions that he/she administers; and wherefore he or she may designate other contracting officers in a written plan of delegation that must be provided to Palomar Health’s Chief Executive Officer (“CEO”) for approval; and

WHEREAS, the District understands a “transaction” in this context to mean an act that commits the District to spend or receive funds or assets or otherwise contractually commit to certain actions—the amount of a transaction is its collective amount over the entire period of commitment;

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

- A. The CEO is the contracting authority authorized to approve any transactions that are part of a Board-approved District budget and not specifically identified as requiring the Board’s action;
- B. The CEO is authorized to approve any capital, including any non-budgeted construction-in-progress, transaction or operating non-budgeted transaction as follows: 1) up to \$500,000.00 per transaction – CEO only approval; or 2) \$500,000.01 to \$999,999.99 per transaction after consultation with the Chairman of the Board or Chairman of the Board Finance Committee/Treasurer;
- C. The Board must approve all budgeted transactions(s) at or above the amount of \$1,000,000.00;
- D. The CEO has authorization from the Board to allow, compromise, or settle any single claim, if the amount paid from the District’s treasury does not exceed \$50,000.00 per transaction;

E. The CEO may designate a representative of the CEO for settlement of claims, and the designated representative may approve these settlements up to \$50,000.00 on behalf of the CEO, but the Board must approve all claims that exceed \$50,000.00;

F. The CEO has authorization from the Board for emergency¹ non-budgeted expenditures as follows: 1) up to \$500,000.00 per transaction – CEO only approval; or 2) \$500,000.01 to \$999,999.99 per transaction after consultation with the Chairman of the Board or Chairman of the Board Finance Committee/Treasurer;

G. A higher approval level is always acceptable in response to a disaster or other emergency situation when an authorized individual cannot be contacted. The designated representative of the CEO may approve expenditures on behalf of the CEO in the CEO's absence and must indicate same when signing the document. The Board must approve all emergency non-budgeted expenditures above the amount of \$1,000,000.00 at its next regularly scheduled meeting, following prior review by the Board Finance Committee.

H. The CEO shall review with the Board any emergency or non-budgeted construction-in-progress expenditures of \$1,000,000.00 or over at the next regularly scheduled meeting of the Board or the next scheduled Board Finance Committee meeting, whichever comes first;

I. The CEO may delegate to responsible officers expenditures and requisition approval authority levels for specific types of transactions;

J. The responsible officers delegated by the CEO to approve expenditures and requisitions may further delegate this approval authority for specific types of transactions in a written plan of delegation that must be provided to the CEO for approval. Responsible officers delegating this approval authority must ensure that all such transactions are approved in accordance with applicable procedures.

K. This Resolution supersedes and replaces any prior resolutions, motions or other actions of the Board to the extent such prior resolutions, motions or other actions of the Board are inconsistent with the provisions of this Resolution.

L. If any subdivision, sentence, clause, or phrase of this Resolution is, for any reason, held to be invalid or unenforceable by a court of competent jurisdiction, such invalidity or unenforceability shall not affect the validity or enforcement of the remaining portions of this Resolution. It is the District's express intent that each remaining portion would have been adopted irrespective of the fact that one or more subdivisions, paragraphs, sentences, clauses, or phrases be declared invalid or unenforceable.

* * * * *

APPROVED AND ADOPTED by the Board of Directors of Palomar Health on this **day** of **month**, 2023, by the following vote:

AYES: _____

¹ "Emergency" shall have the same meaning as prescribed in Cal. Health & Safety Code § 32136.

NOES: _____

ABSTAIN: _____

ABSENT: _____

ATTEST:

APPROVED:

****Secretary, Board of Directors****

****President, Board of Directors****

APPROVED AS TO FORM:

****General Counsel****

Source:
 Administrative
 Financial Services

Applies to Facilities:
 All Palomar Health Facilities

Applies to Departments:
 All Departments

Procedure : Expenditure and Requisition Approval Authority

I. PURPOSE:

- A. Palomar Health (OR "the District") is a large and complex healthcare district with many different types of transactions. In order to safeguard the District's assets, the Board of Directors has established a set of approval thresholds that must be followed to ensure appropriate review and approval to spend or commit funds.
- B. In order to safeguard the District's assets and ensure that key transactions are executed in accordance the Board of Directors' intentions and plans, certain limits are placed on the authority of individuals to authorize the expenditure or commitment of funds.

II. DEFINITIONS:

- A. **Contracting Authority:**
 The authority designated to specified representatives to administer, approve, and execute contracts and agreements on behalf of the District.
- B. **Responsible Officer:**
 A responsible officer is the primary contracting officer for all of the District's external commitments/transactions that he/she administers. A responsible officer may designate other contracting officers in a written plan of delegation that must be provided to the President and CEO for approval.
- C. **Transaction:**
 A transaction is an act that commits the District to spend or receive funds or assets or otherwise contractually commit to certain actions. The size of a transaction is its collective amount over the entire period of commitment.

III. TEXT / STANDARDS OF PRACTICE:

- A. The CEO of Palomar Health is the contracting authority authorized to approve any transactions that are part of a Board-approved District budget and not specifically identified as requiring Board of Directors' action.
- B. The CEO of Palomar Health is authorized to approve any capital, including any non-budgeted construction-in-progress, transaction or operating non-budgeted transaction as follows: 1) up to \$250,000.00 per transaction - CEO only approval; or, 2) \$250,000.01 to \$499,999.99 per transaction after consultation with the Chairman of the Board or the Chairman of the Board Finance Committee/Treasurer. The Board of Directors must approve all budgeted transaction(s) above the amount of \$500,000.00.
- C. The CEO has authorization from the Palomar Health Board of Directors to allow, compromise, or settle any single claim, if the amount paid from the District's treasury does not exceed: 1) up to \$50,000.00 per transaction - CEO only approval; or, 2) \$50,000.01 to \$499,999.99 per claim after consultation with the Chairman of the Board or the Chairman of the Board Finance Committee/Treasurer. The CEO may designate a representative of the CEO for settlement of claims, and the designated representative may approve these settlements up to \$50,000.00 on behalf of the CEO. The Board of Directors must approve all claims above the amount of \$500,000.01 prior to settlement.
- D. The CEO has authorization from the Palomar Health Board of Directors for emergency non-budgeted expenditures as follows: 1) up to \$250,000.00 per transaction - CEO-only approval; or, 2) \$250,000.01 to \$499,999.99 per transaction after consultation with the Chairman of the Board or the Chairman of the Board Finance Committee/Treasurer. A higher approval level is always acceptable in response to a disaster or other emergency situation when an authorized individual cannot be contacted. The designated representative of the CEO may approve expenditures on behalf of the CEO in the CEO's absence and must indicate same when signing the document. The Board of Directors must approve all emergency non-budgeted expenditures above the amount of \$500,000.00 at its next regularly scheduled meeting, following prior review by the Finance Committee.
- E. The CEO shall review with the Board of Directors any emergency or non-budgeted construction-in-progress expenditures of \$250,000.00 or over at the next scheduled meeting of the Board or the next scheduled Board Finance Committee meeting, whichever comes first.
- F. The CEO may delegate to responsible officers expenditure and requisition approval authority levels for specific types of transactions.

G. The responsible officers delegated by the CEO to approve expenditures and requisitions may further delegate this approval authority for specific types of transactions in a written plan of delegation that must be provided to the CEO for approval. Responsible officers delegating this approval authority must ensure that all such transactions are approved in accordance with applicable procedures.

Reference Documents:

IV. A. Contracting Authority with External Parties Procedure

V. **ADDENDUM:**

A. This policy supersedes:

1. Board of Directors Resolution No. 06.14.93(03) dated June 14, 1993.
2. PPHS Policy and Procedure Signature Authorization Matrix dated January 12, 2001.

Document Owner: Bogert, Michael

Approvals

- **Committees:**

- **Signers:**

Hala Helm

Hala Helm, Chief Risk & Compliance Office (01/13/2020 12:10PM PST)

Carlos Bohorquez

Carlos Bohorquez, Chief Financial Officer (01/20/2020 09:13AM PST)

Revision Date: [01/20/2020 Rev. 6]

Attachments: Bylaws Of Palomar Pomerado Health Board Of Directors
(REFERENCED BY THIS DOCUMENT) Contracting Authority with External Parties Procedure

Paper copies of this document may not be current and should not be relied on for official purposes. The current version is in Lucidoc at

<https://www.lucidoc.com/cgi/doc-gw.pl?ref=pphealth:14779>.

Expenditure and Requisition Approval Authority

14779

Official (Rev: 6)

Source: Administrative Financial Services	Applies to Facilities: All Palomar Health Facilities	Applies to Departments: All Departments
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I. PURPOSE:

- A. Palomar Health (~~OR~~ the "District") is a large and complex healthcare district with many different types of transactions. In order to safeguard the District's assets, the Board of Directors (~~the "Board"~~) has established a set of approval thresholds that must be followed to ensure appropriate review and approval to spend or commit funds.
- B. In order to safeguard the District's assets and ensure that key transactions are executed in accordance the Board's ~~of Directors'~~ intentions and plans, certain limits are placed on the authority of individuals to authorize the expenditure or commitment of funds.

II. DEFINITIONS:

- A. **Contracting Authority:**
The authority delegated to specified representatives to administer, approve, and execute contracts and agreements on behalf of the District.
- B. **Responsible Officer:**
A responsible officer is the primary contracting officer for all of the District's external commitments/transactions that he/she administers. A responsible officer may designate other contracting officers in a written plan of delegation that must be provided to Palomar Health's the President and CEO ("CEO") for approval.
- C. **Transaction:**
A transaction is an act that commits the District to spend or receive funds or assets or otherwise contractually commit to certain actions. The amount of a transaction is its collective amount over the entire period of commitment.

III. TEXT / STANDARDS OF PRACTICE:

- A. The CEO ~~of Palomar Health~~ is the contracting authority authorized to approve any transactions that are part of a Board-approved District budget and not specifically identified as requiring ~~the Board's of Directors'~~ action.
- B. The CEO ~~of Palomar Health~~ is authorized to approve any capital, including any non-budgeted construction-in-progress, transaction or operating non-budgeted transaction as follows: 1) up to \$~~2550~~0,000.00 per transaction – CEO only approval; or, 2) \$~~2550~~0,000.01 to \$~~4999~~9,999.99 per transaction after consultation with the ~~Chairman~~ of the Board or ~~Chairman~~ of the Board Finance Committee/Treasurer. The Board ~~of Directors~~ must approve all budgeted transactions(s) ~~at or~~ above the amount of \$~~51~~0,000,000.00.
- C. The CEO has authorization from the ~~Palomar Health~~ Board ~~of Directors~~ to allow, compromise, or settle any single claim, if the amount paid from the District's treasury does not exceed ~~;-1) up to \$50,000.00 per transaction. - CEO only approval; or, 2) \$50,000.01 to \$499,999.99 per claim after consultation with the Chairman of the Board or Chairman of the Board Finance Committee/Treasurer.~~ The CEO may designate a representative of the CEO for settlement of claims, and the designated representative may approve these settlements up to \$50,000.00 on behalf of the CEO. The Board ~~of Directors~~ must approve all claims ~~above the amount of that exceed \$50,000.00, 1-prior to settlement.~~
- D. The CEO has authorization from the ~~Palomar Health~~ Board ~~of Directors~~ for emergency¹ non-budgeted expenditures as follows: 1) up to \$~~2550~~0,000.00 per transaction – CEO only approval; or, 2) \$~~2550~~0,000.01 to \$~~4999~~9,999.99 per transaction after consultation with the ~~Chairman~~ of the Board or ~~Chairman~~ of the Board Finance Committee/Treasurer. A higher

¹ "Emergency" shall have the same meaning as prescribed in Cal. Health & Safety Code § 32136.

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approval level is always acceptable in response to a disaster or other emergency situation when an authorized individual cannot be contacted. The designated representative of the CEO may approve expenditures on behalf of the CEO in the CEO's absence and must indicate same when signing the document. The Board ~~of Directors~~ must approve all emergency non-budgeted expenditures above the amount of \$~~51,000,000.00~~ at its next regularly scheduled meeting, following prior review by the Board Finance Committee.

- E. The CEO shall review with the Board ~~of Directors~~ any emergency or non-budgeted construction-in-progress expenditures of \$~~251,000,000.00~~ or over at the next regularly scheduled meeting of the Board or the next scheduled Board Finance Committee meeting, whichever comes first.
- F. The CEO may delegate to responsible officers expenditures and requisition approval authority levels for specific types of transactions.
- G. The responsible officers delegated by the CEO to approve expenditures and requisitions may further delegate this approval authority for specific types of transactions in a written plan of delegation that must be provided to the CEO for approval. Responsible officers delegating this approval authority must ensure that all such transactions are approved in accordance with applicable procedures.

Reference Documents:

- IV. A. Contracting Authority with External Parties Procedure

V. **ADDENDUM:**

- A. This policy supersedes:
 - 1. Board of Directors Resolution No. 06.14.93(03) dated June 14, 1993.
 - 2. PPHS Policy and Procedure Signature Authorization Matrix dated January 12, 2001.

Document Owner: Bogert, Michael

Approvals

-Committees:

-Signers:

Hala Helm

Hala Helm, Chief Risk & Compliance Office (01/13/2020 12:10PM PST)

Carlos Bohorquez

Carlos Bohorquez, Chief Financial Officer (01/20/2020 9:13AM PST)

[01/20/2020 Rev.6]

Revision Date:

Attachments:

(REFERENCED BY THIS DOCUMENT)

Bylaws Of Palomar Pomerado Health Board Of Directors
Contracting Authority with External Parties Procedure

Paper copies of this document may not be current and should not be relied on for official purposes. The current version is in Lucidoc at

<https://www.lucidoc.com/cgi/doc-gw.pl?ref=pphealth:14779>.

RESOLUTION NO. 05.08.23(04)-09

AGENCY ADDRESS	2125 Citracado Parkway, Suite 300 Escondido, CA 92029	AGENCY PHONE NUMBER	760-740-6385
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RESOLUTION OF THE BOARD OF DIRECTORS OF PALOMAR HEALTH AUTHORIZING THE INVESTMENT OF MONIES IN THE LOCAL AGENCY INVESTMENT FUND

WHEREAS, the Local Agency Investment Fund is established in the State Treasury under Government Code Section 16429.1 et. seq. for the deposit of money of a local agency for purposes of investment by the State Treasurer; and,

WHEREAS, the Board of Directors of Palomar Health hereby finds that the deposit and withdrawal of money in the Local Agency Investment Fund in accordance with Government Code Section 16429.1 et. seq. for the purpose of investment as provided therein is in the best interests of the District;

NOW THEREFORE, BE IT RESOLVED, that the Board of Directors of Palomar Health hereby authorizes the deposit and withdrawal of District monies in the Local Agency Investment Fund in the State Treasury in accordance with Government Code Section 16429.1 et. seq. for the purpose of investment as provided therein.

BE IT FURTHER RESOLVED, as follows:

Section 1. The following District officers holding the title(s) specified hereinbelow **or their successors in office** are each hereby authorized to order the deposit or withdrawal of monies in the Local Agency Investment Fund and may execute and deliver any and all documents necessary or advisable in order to effectuate the purposes of this resolution and the transactions contemplated hereby:

Diane L. Hansen
(NAME)
President & CEO

(TITLE)

Hubert U. King
(NAME)
Chief Financial Officer

(TITLE)

Ryan Olsen
(NAME)
Chief Operations Officer

(TITLE)

Omar Khawaja, MD
(NAME)
Chief Medical Officer

(TITLE)

(SIGNATURE)

(SIGNATURE)

(SIGNATURE)

(SIGNATURE)

Amanda B. Pape
(NAME)
Vice President of Finance

(TITLE)

(SIGNATURE)

Section 2. This resolution shall supersede previous such resolutions and shall remain in full force and effect until rescinded by the Board of Directors by resolution, and a copy of the resolution rescinding this resolution is filed with the State Treasurer's Office.

PASSED AND ADOPTED at a meeting of the Board of Directors of Palomar Health held on May 8, 2023:

AYES:
NOES:
ABSTAINING:
ABSENT:

Dated: May 8, 2023

BY:

Linda Greer, RN
Chair, Board of Directors

ATTESTED:

Terry Corrales, RN
Secretary, Board of Directors

PALOMAR HEALTH
BOARD OF DIRECTORS
BOARD MEMBER FACILITY VISITATION POLICY

Introduction and Purpose

The Palomar Health Board of Directors (“Board”) is committed to the highest standards of patient privacy, confidentiality, and safety as required by all applicable state or federal legal authorities; the most stringent of these will prevail, depending on the circumstances, as required by law. To this end, and balancing Board and individual Board Member requests for access to facility, provider, and patient resources in keeping with each’s oversight and fiduciary duties, as applicable, the Board hereby adopts a Board Member Facility Visitation Policy.

Procedure

Any Board Member who wishes to visit a non-public area of a Palomar Health (hereinafter “District”) facility will, ten (10) business days prior to the requested visit, transmit the request, with date, time, and facility description included, to: (i) the Board Chair, (ii) the Chief Executive Officer (“CEO”) and his or her Executive or Administrative Assistant, (iii) the Chief Medical Officer (“CMO”) and his or her Executive or Administrative Assistant, and (iv) the Chief Legal Officer (“CLO”) and his or her Executive or Administrative Assistant. One these individuals, or their designees, will respond on behalf of the District within a reasonable time to the request.

Should the request be accepted by any of the aforementioned District individuals acting on behalf of the District, or his or her designee, any of the aforementioned District individuals or his or her designee will, upon the Board Member’s arrival at the facility: (i) greet the Board Member, (ii) escort the Board Member into the facility, and (iii) coordinate with the facility’s operational representative (hereinafter “Facility Representative”) a visitation procedure for the Board Member, to the extent any such procedure has not been provided or agreed upon in advance. Such procedure will be in accordance with all applicable public health and safety requirements, including federal, state, or local public health orders or standards, and in keeping with the Facility Representative’s recommendations and standards as per the obligations and needs of the facility to promote (i) public health, (ii) patient confidentiality, (iii) patient privacy, (iv) family member or visitor access, use, and engagement, (v) premises safety, or any other standard, guideline, or procedure in accordance with the Facility Representative’s recommendation(s). The Board Chair, Chief Executive Officer, Chief Medical Officer, or Chief Legal Officer may decline or limit the request to visit any Palomar facility if doing so is necessary to protect patient security or privacy.

Amendments

This policy may be amended by the Board.

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BOARD OF DIRECTORS
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Amendments

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ADDENDUM G

Memorandum



To: Board of Directors
From: Michael Pacheco - Director, Board Audit & Compliance Committee
Date: Monday, May 8, 2023
Re: Board Audit & Compliance Committee Meeting, April 18, 2023

BOARD MEMBER ATTENDANCE: Director Laurie Edwards-Tate, Director Michael Pacheco and Director Jeff Griffith

INFORMATIONAL ITEMS

- **Review Government Agencies – Informational Only:** The voting members reviewed a presentation of Government Agencies. No action, informational only.
- **Review Office of Inspector General (OIG) Workplan Update – Informational Only:** The voting members reviewed the workplan update from the Office of Inspector General (OIG). No action, informational only.

ACTION ITEMS

- **Approval of Board Audit & Compliance Committee minutes, February 21, 2023:** The voting members reviewed and approved the Board Audit & Compliance Committee minutes from February 21, 2023

Memorandum

To: Palomar Health Board of Directors

From: Terry Corrales, Chair
Palomar Health Board of Directors Community Relations Committee

Date: April 5, 2023

Subject: Committee Meeting Summary – April 5, 2023

BOARD MEMBER ATTENDANCE: Directors Corrales, Pacheco and CEO Hansen

INFORMATIONAL ITEMS:

Volunteer Development and Spiritual Care - The volunteer pool is slowly rebuilding following the Covid pandemic to provide services to a large variety of assignments throughout Palomar Health. The sewing, knitting, crocheting roles include in excess of 70 offsite needlework volunteer who provide handmade items for the Birth Center, Emergency Room, Laboratory, Lobby, Inpatients, Behavioral Health, Infusion, Perinatal and The Villas at Poway, the Retail Gift Shop and Palomar Paws. Newest volunteer assignments include One Safe Place, supporting the Trauma Recovery Center, Camp Hope and Baby cuddling in the NICU. There are 10 Palomar Paws teams providing K-9 comfort companionship. Spiritual Care volunteers provide on-call services daily from 8am to 10pm district wide. Palomar Health is partnering with Hospice Groups to revise the Palomar Health Bereavement booklet and looking into establishing bereavement support groups. Profits from the Retail Gift Shop go back to the hospital via the Volunteer Foundation Fund which providing equipment and other valuable needs on request

Pathmaker Internship Program - Pathmaker Program provides students the ability to explore healthcare careers by providing hands on patient care and leadership experiences over a 15 month commitment. Students are provided basic patient care skills training and move to additional areas as Flu Clinics, Emergency Room Navigators, Skin Studies and the newly added The Villas at Poway, providing piano concerts. Each rotation provides the student the ability to make informed continuing education decisions in specific areas of expertise. There are currently 478 active interns covering 35 departments throughout the district providing over 190,661 hours of service since April, 2020 and 599 individuals returning to Palomar following completion of higher education for employment in a variety of nursing, technical rehabilitation related careers with 14 of these employees serving in supervisory or managerial roles.

Patient Experience Focus Group Update

Deferred

Foundation Update

Deferred

Marketing Update

Deferred

ACTION ITEMS:

- **Board Community Relations Committee Minutes – Wednesday, February 1, 2023** : The minutes were approved as presented

Memorandum



To: Board of Directors
From: Laura Barry, Chair, Board Finance Committee
Date: May 8, 2023
Re: Board Finance Committee, Thursday, May 4, 2023, Meeting Summary

BOARD MEMBER ATTENDANCE: Directors Barry, Griffith & Pacheco

INFORMATION ITEMS – Wednesday, April 27, 2022, Meeting:

- **Mr. King will present proposals for revamping the financial packet at a future meeting: The Finance team had updated the packet that was utilized at the meeting.**
- **Mrs. Howell will begin emailing the entire packet to everyone on the Committee, as well as posting it online: That practice began with this meeting.**

ACTION ITEMS

- **Minutes, Wednesday, July 27, 2022, Board Finance Committee Meeting:** Reviewed and approved the draft minutes from the Wednesday, July 27, 2022, Board Finance Committee meeting.
- **Minutes, Wednesday, August 24, 2022, Board Finance Committee Meeting:** Reviewed and approved the draft minutes from the Wednesday, August 24, 2022, Board Finance Committee meeting.
- **Minutes, Tuesday, September 27, 2022, Special Board Finance Committee Meeting:** Reviewed and approved the draft minutes from the Tuesday, September 27, 2022, Special Board Finance Committee meeting.
- **Executed, Budgeted, Routine Physician Agreements¹:** Reviewed and recommended approval of the Executed, Budgeted, Routine, Physician Agreements that had been administratively approved, signed and became effective in prior months.
- **Expenditure & Requisition Approval Authorities (ERRA)¹:** Reviewed and recommended approval of proposed increases to the monetary limits of the ERRA Procedure, with such increases to be presented to the Board for approval via resolution and an updated ERRA Procedure.
- **March 2023 and YTD FY2023 Financial Report¹:** Reviewed the Financial Reporting Packet and recommended approval of the March 2023 and YTD FY2023 financial performance, which reflected operating income of \$.7M, unfavorable to budget by \$3.9M and favorable to March 2022 by \$.5M; and net income of (\$.8M), unfavorable to budget by (\$.5.0M), and favorable to March 2022 by \$2.5M. On a YTD basis—FY2023 through 9 months—operating income was \$6.9M, unfavorable to budget by \$35.0M and to YTD March 2022 by \$25.5M. YTD net income was (\$1.0M), unfavorable to budget by \$38.7M and to YTD March 2022 by \$26.5M.

¹ Backup documentation may be reviewed elsewhere in the agenda packet

Memorandum



To: Board of Directors
From: Jeffrey Griffith, EMT-P, Chair, Board Governance Committee
Date: May 8, 2023
Re: Board Governance Committee, April 6, 2023, Meeting Summary

BOARD MEMBER ATTENDANCE: Directors Griffith, Barry and Corrales

INFORMATION ITEM

- **All Board Committee charters have been vetted and approved by the Board of Directors**

ACTION ITEMS

- **Policy Development: Board Member Facility Visitation:** The Governance Committee reviewed and approved the proposed policy, and will be presented to the Board of Directors for consideration on May 8, 2023.
- **Board Governance Committee Meeting minutes, February 2, 2023:** The Governance Committee reviewed and approved the minutes from February 2, 2023
- **Board Governance Committee Meeting minutes, February 23, 2023:** The Governance Committee reviewed and approved the minutes from February 23, 2023