

Board of Directors Meeting Agenda Packet

November 13. 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 November 10, 2023



BOARD OF DIRECTORS MEETING AGENDA

Monday, November 13, 2023 6:30 p.m.

PLEASE SEE PAGE 3 FOR MEETING LOCATION

					Form	
	The Board may take action on any of the items listed below,				A	
	including items specifically labeled "Informational Only"				Page	Target
CALL	TO ORDER				- 3 -	6:30
1.	ESTABLISHMENT OF QUORUM			2	-	6:32
2.	OPENING CEREMONY			3		6:35
	a. Pledge of Allegiance to the Flag					
3.	PUBLIC COMMENTS ¹			30	-	7:05
4.	PRESENTATIONS – Informational Only					
	a. Physician Recognition			5		7:10
	b. Management Services Agreement			15		7:25
5.	APPROVAL OF MINUTES (ADD A)			5		7:30
	a. Board of Directors Meeting – Monday, October 9, 2023 (Pp 11				2	
	 Board of Directors Special Closed Session Meeting – Monday, 0 		Pp 21-22)		3	
	c. Board of Directors Special Session Meeting – Friday, October 6	, 2023 (Pp 23-24)			4	
6.	APPROVAL OF AGENDA to accept the Consent Items as listed (ADD B)			5		7:35
	a. Palomar Medical Center Escondido Medical Staff Credentialing				5	
	b. Palomar Medical Center Poway Medical Staff Credentialing and				6	
	c. Nurse Practitioner Psychiatry Core Privilege Checklist (Redline Pp 63-68, Clean Pp 69-73)				7	
	d. Board Member Onboarding Quick-Start Guide (Pp 74-76)				8	
	e. Executed, Budgeted, Routine Physician Agreements (Pp 77-86) f. September 2023 and VTD EV2024 Financial Report (Pp 87-107)				9	
	f. September 2023 and YTD FY2024 Financial Report (Pp 87-107)				10	
7.	REPORTS – Informational Only					
	a. Medical Staff					
	I. Palomar Medical Center Escondido – Kanchan Koiral	a, MD		5		7:40
	II. Palomar Medical Center Poway – Sam Filiciotto, MD			5		7:45
	b. Administration			-		7:50
	President and CEO – Diane Hansen Chair of the Board – Linda Greer, RN			5 5		8:00
_						
8.	APPROVAL of BYLAWS, CHARTERS, RESOLUTIONS, and OTHER A	· · · · · ·		15		8:15
	Agenda Item	Committee or Dept.	Action			
		Dept.		 		
	a. Resolution No. 11.13.23(01)-17 of the Board of Directors of	Legal	Review/Approve			
	Palomar Health Authorizing the Executive Team to Identify a]				
	Potential Management Services Company and Negotiate a					
	Proposed Management Services Agreement (Pp 108-110)					
	b. Vote of No Confidence in a Director; Request for Director to					
	Show Cause (John Clark)	Board	Vote			

	C.	Vote of No Confidence in a Director; Request for Director to Show Cause (Laurie Edwards-Tate)	Board	Vote			
9.	9. COMMITTEE REPORTS – Informational Only (ADD D)						8:20
	a.	Audit & Compliance Committee – Michael Pacheco, Committee	e Chair <i>(Pp 111-1</i> .	12)			
	b. Community Relations Committee – Terry Corrales, Committee Chair (<i>Pp 113</i>)						
	c. Finance Committee – Laura Barry, Committee Chair (Pp 114)						
	d. Governance Committee – Jeff Griffith, Committee Chair (Pp 115)						
	e. Human Resources Committee – Terry Corrales, Committee Chair (No meeting in October)			October)			
	f. Quality Review Committee – Linda Greer, Committee Chair (<i>Pp 116-117</i>)						
	g. Strategic & Facilities Planning Committee – Michael Pacheco, Committee Chair						
		(No meeting in October)					
FINAL ADJOURNMENT						-	8:20

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

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

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 refer to page 4 of agenda.



Board of Directors MeetingLocation Options

Linda Greer Board Room 2125 Citracado Parkway, Suite 300, Escondido, CA 92029

- Elected Board Members of the Palomar Health Board of Directors will attend at this location, unless otherwise noticed below
- 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

 Non-Board member attendees, and members of the public may also attend the meeting virtually utilizing the above link

New to Microsoft Teams? Get the app now and be ready when your first meeting starts: <u>Download Teams</u>



DocID: 21790 9 Revision:

Applies to Departments:

Board of Directors

Official Status:

Applies to Facilities: Source: Administrative All Palomar Health Facilities

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. 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.
- 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 DeBruin, Kevin **Document Owner**

> Carla Albright, Deanna Peterson, Deborah Hollick, Douglas Moir, Jami Piearson, Jeffrey Griffith, Julie H Avila, Kelly Wells, Laurie Edwards-Tate, **Collaborators:**

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**

Attachments: 10/24/2025

(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

Palomar Health Board of Directors Meeting

Meeting will begin at 6:30 p.m.



Request for Public Comments

If you would like to make a public comment, please submit a request by doing the following:

- In Person: Submit Public Comment Form, or verbally submit a request, to the Board Assistant
- Virtual: Enter your name and "Public Comment" in the chat function once the meeting opens

Those who submit a request will be called on during the Public Comments section and given 3 minutes to speak.

Public Comments Process

Pursuant to the Brown Act, the Board of Directors can only take action on items listed on the posted agenda. To ensure comments from the public can be made, there is a 30 minute public comments period at the beginning of the meeting. Each speaker who has requested to make a comment is granted three (3) minutes to speak. The public comment period is an opportunity to address the Board of Directors on agenda items or items of general interest within the subject matter jurisdiction of Palomar Health.



Minutes Board of Directors Meeting October 9, 2023

Board of Directors

MEETING DATE:	Monday, November 13, 2023		
FROM:	Carla Albright, Executive Assistant to the Board of Directors		
_	inutes from the October 9, 2023, Regular Board of Directors ng are respectfully submitted for approval.		
Budget Impact: N	/A		
Staff Recommendation	n: Recommend to approve the October 9, 2023, Regular Board of Directors meeting minutes.		
Committee Questions:	Committee Questions: N/A		
COMMITTEE RECOMM	ENDATION: N/A		
Motion:			
Individual Action:			
Information:			
Required Time:			

Minutes Special Closed Session Board of Directors Meeting October 9, 2023

Board of Directors

MEETING DATE:	Monday, November 13, 2023	
FROM:	Carla Albright, Executive Assistant to the Board of Directors	
Background:	The minutes from the October 9, 2023, Special Closed Session Board of Directors meeting are respectfully submitted for approval.	
Budget Impact:	N/A	
Staff Recommendat	ion: Recommend to approve the October 9, 2023, Special Closed Session Board of Directors meeting minutes.	
Committee Questions: N/A		
COMMITTEE RECOM	IMENDATION: N/A	
Motion:		
Individual Action:		
Information:		
Required Time:		

Minutes Special Session Board of Directors Meeting October 6, 2023

Board of Directors

MEETING DATE:	Monday, November 13, 2023		
FROM:	Carla Albright, Executive Assistant to the Board of Directors		
Background:	The minutes from the October 6, 2023, Special Session Board of Directors meeting are respectfully submitted for approval.		
Budget Impact:	N/A		
Staff Recommendati	ion: Recommend to approve the October 6, 2023, Special Session Board of Directors meeting minutes.		
Committee Questions: N/A			
COMMITTEE RECOM	IMENDATION: N/A		
Motion:	Motion:		
Individual Action:			
Information:			
Required Time:			

Palomar Medical Center Escondido Medical Staff Credentialing Recommendations

Board of Directors

MEETING DATE:	November 13, 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 Recommen	dation: Recommend Approval	
Committee Ques	tions:	
COMMITTEE RECO	MMENDATION: Approval	
Motion: X		
Individual Action:		
Information:		
Required Time:		

Palomar Medical Center Poway Medical Staff Credentials Recommendations October, 2023

Board of Directors			
Monday November 13, 2023			
Sam Filiciotto, M.D., Chief of Staff, Palomar Medical Center Poway			
Monthly credentials recommendations from the Palomar Medical Center Poway Medical Executive Committee for approval by the Board of Directors.			
None			
Staff Recommendation:			
Committee Questions:			
COMMITTEE RECOMMENDATION: Approval			
Motion: X			
ndividual Action:			
nformation:			
Required Time:			

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

Board of Directors

MEETING DATE:	MEETING DATE: November 13, 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:	Revised Nurse Practitioner Psychiatry Core Privilege Checklist: Revised to current standards. 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 RECO	DMMENDATION: Approval	
Motion: X		
Individual Action:		
Information:		
Required Time:		

Board Governance Committee Board Member Onboarding Quick-Start Guide

Board of Directors

TO:

MEETING DATE:	Monday, November 13, 2023			
FROM: Jeff Griffith, EMT-P, Board Governance Committee Chair				
Background: The Board Member Onboarding Quick-Start Guide is respectively submitted to the Board of Directors for consideration. The guide intended to assist new board members get up to speed and undexpectations during onboarding into their new role.				
Budget Impact:	N/A			
Recommendation: Recommend adoption of the Board Member Onboarding of Start Guide as an addendum to the Code of Conduct Police				
Committee Ques	tions: N/A			
COMMITTEE	RECOMMENDATION:			
Motion: X	Motion: X			
Individual Action:				
Information:				
Required Tin	Required Time:			

EXECUTED, BUDGETED, ROUTINE PHYSICIAN AGREEMENTS

го:	Board of Directors	

MEETING DATE: Monday, November 13, 2023

FROM: Board Finance Committee

Wednesday, October 25, 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	
May	2023	
Ayda Dashtaei, DO Corporation	 Professional Services Agreement – Surgery Call Coverage – PMC Poway 	
Palomar Hospital Partners, Inc. (EMA-Benchmark)	 Professional Services Agreement – ED Hospitalist Services 	
Retina Results Medical Corporation	Call Coverage Agreement - Ophthalmology	
July	2023	
Adnan M. Zahid, MD	Amendment 1 to Medical Director Agreement – MedSurg/Tele/IMC – PMC Escondido	
September 2023		
 Arch Health Partners, Inc., dba Palomar Health Medical Group 	Amendment 1 to Radiology & Director Services Agreement	

The standard Form A's and Abstract Tables for each are included as Addendum B.

Staff Recommendation: Approval

COMMITTEE RECOMMENDATION: The Board Finance Committee recommends approval of the Executed Budgeted Routine Physician Agreements as presented. Approval recommended 5 to 0 by the Committee; Board members: 2 to 0; Absent: 1.

Motion: X

Individual Action:

Information:

September 2023 and YTD FY2024 Financial Report

TO:	Board of Directors			
MEETING DATE:	Monday, November 13, 2023			
FROM:	Board Finance Committee Wednesday, October 25, 2023			
BY:	Laura Barry, Chair, Board Finance Committee			
Background: The Board Financial Report (unaudited) for September 2023 and YTD FY2024 (per pages 87-107) is submitted for the Board's approval.				
Budget Impact:	N/A			
Staff Recommendatio	n: Approval			
Committee Questions:				
	MENDATION: The Board Finance Committee recommends approval			
of the September 2023 and YTD FY2024 Board Financial Report as presented. Approval recommended 5 to 0 by the Committee; Board members: 2 to 0; Absent: 1.				
Motion: X				
Individual Action:				
Information:				
Required Time:				

ADDENDUM A



Board of Directors Meeting Minutes – Monday, October 9, 2023	
Agenda Item	
• Discussion	Conclusion / Action /Follow Up
NOTICE OF MEETING	
Notice of Meeting was posted at the Palomar Health Administrative Office at 2125 0 website, on Friday, October 6, 2023, which is consistent with legal requirements.	Citracado Parkway, Suite 300, Escondido, CA 92029, as well as on the Palomar Health
CALL TO ORDER	
The meeting, which was held at the First Floor Conference Center at 2185 Citracad Greer.	o Parkway, Escondido, CA. 92029, and called to order at 6:30 p.m. by Board Chair Linda
1. ESTABLISHMENT OF QUORUM	
Quorum comprised of Directors Barry, Clark, Corrales, Edwards-Tate, Greer, Griffith Absences:	n, Pacheco
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 employed.
- 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

Board of Directors Meeting Minutes – Monday, October 9, 2023	
Agenda Item	
Discussion	Conclusion / Action /Follow Up
3. PUBLIC COMMENTS	
No public comments	
4. PRESENTATIONS	
a. Patient Experience Moment	
A patient experience video was shared with the Board.	
b. Physician Introduction	
Omar Khawaja, MD, Chief Medical Officer introduced Remia Paduga, MD, to the Board.	
c. Emergency Department Presentation and Recognition	
 Mel Russell, Chief Nursing Executive, introduced Tracy Page, District Director of Emergency Services. A visit shared with the Board. Diane Hanse, CEO, added the Lantern Award is given out to the top one percent of Linda Greer presented a certificate of appreciation to the Emergency Services Department. 	ideo highlighting the recent Lantern Award achievement was f hospital emergency departments across the nation. Chair
d. Terms of Use for Palomar Health's Website	
 Kevin DeBruin, Chief Legal Officer, updated the Board on the Terms of Use agreement on the Palomar He Director John Clark inquired if the Terms of Use process will de indefinite. David Holtzman, outsic Clark's concerns. Director Laurie Edwards-Tate thanked Legal Counsel for their diligent work on this matter. 	

Board of Directors Meeting Minutes – Monday, October 9, 2023	
Agenda Item	
• Discussion	Conclusion / Action /Follow Up
5. APPROVAL OF MINUTES	
a. Board of Directors Meeting - Monday, September 11, 2023	MOTION: By Director Pacheco, 2 nd by Director Edwards-Tate and carried to approve the Monday, September 11, 2023 Board of Directors Meeting minutes, as presented.
	Roll call voting was utilized. Director Corrales – aye Director Griffith – aye Director Greer – aye Director Barry – aye Director Clark – abstain Director Pacheco – aye Director Edwards-Tate – aye Chair Greer announced that six board members were in favor. None opposed. One abstention. None absent Motion approved.
No discussion	
b. Board of Directors Special Closed Session Meeting - Monday, September 11, 2023	MOTION: By Director Barry, 2 nd by Director Corrales and carried to approve the Monday, September 11, 2023 Board of Directors Special Session Meeting minutes, as presented.
	Roll call voting was utilized. Director Corrales – aye Director Griffith – aye Director Greer – aye Director Barry – aye Director Clark – abstain Director Pacheco – aye Director Edwards-Tate – aye Chair Greer announced that six board members were in favor. None opposed. One abstention. None absent Motion approved.
No discussion	

Agenda	Item	
•	Discussion	Conclusion / Action /Follow Up
6. APPI	ROVAL OF AGENDA to accept the Consent Items as listed	
a. b. c.	Palomar Medical Center Escondido Medical Staff Credentialing and Reappointments Palomar Health Center Poway Medical Staff Credentialing and Reappointments Palomar Medical Center Medical Staff (Escondido Campus & Poway Campus) Bylaws (Including Credentials Policy Manual and Medical Staff Rights Manual) Rules and Regulations	MOTION: By Director Edwards-Tate, 2 nd by Director Griffith and carried to approve Consent Agenda item A through C as presented. Roll call voting was utilized. Director Corrales – aye Director Griffith – aye Director Greer – aye Director Barry – aye Director Clark – aye Director Pacheco – aye Director Edwards-Tate – aye Chair Greer announced that seven board members were in favor. None opposed. None abstention. Non absent. Motion approved.
	Chair Linda Greer thanked the medical staff for their work on the combining the bylaws	absent. Motion approved.
• •	Chair Linda Greer thanked the medical staff for their work on the combining the bylaws. Kanchan Koirala, MD, Palomar Medical Center Chief of Staff, reminded the board members they are approving	
	Kanchan Koirala, MD, Palomar Medical Center Chief of Staff, reminded the board members they are approving	
a. I	Kanchan Koirala, MD, Palomar Medical Center Chief of Staff, reminded the board members they are approving	
а. І	Kanchan Koirala, MD, Palomar Medical Center Chief of Staff, reminded the board members they are approving ORTS Iedical Staffs	the interim bylaws at this time.

Board of Directors Meeting Minutes - Monday, October 9, 2023 Agenda Item Conclusion / Action / Follow Up **Discussion** b. Administrative I. President and CEO Palomar Health President & CEO Diane Hansen provided a verbal report to the Board of Directors: Thanked the Medical Executive Committee for their continued work on their bylaws Health Rocks Gala is on Saturday, October 15th Director Michael Pacheco received recognition from Marie Waldron, California State Senator, for his community involvement Chair Linda Greer was awarded Trustee of the Year Award at the 2023 ACHD Annual Meeting (Association of California Healthcare Districts) Thanked board members for their tireless work and support of Palomar Health II. Chair of the Board Palomar Health Chair of the Board Linda Greer provided a verbal report to the Board of Directors: Asked board members who attended the 2023 ACHD Annual Meeting to share their experience Presentation of CEO accomplishments was shared with the board members

Board of Directors Meeting Minutes - Monday, October 9, 2023 Agenda Item Conclusion / Action / Follow Up Discussion 7. APPROVAL OF BYLAWS, CHARTERS, RESOLUTIONS and OTHER ACTIONS MOTION: By Director Barry, 2nd by Director Corrales a. Resolution No. 10.09.23(01)-16 of the Board of Directors of Palomar Health Proposing and Consenting to Amendment to CEO Employment Agreement and carried to approve Resolution No. 10.09.23(01)-16 of the Board of Directors of Palomar Health Proposing and Consenting to Amendment to CEO Employment Agreement. **AMENDED MOTION:** By Director Pacheco, 2nd by Director Barry and carried to approve Resolution No. 10.09.23(01)-16 of the Board of Directors of Palomar Health Proposing and Consenting to Amendment to CEO Employment Agreement including addition of section 70th percentile of total compensation (section 1a), variable compensation maximum is amended to be 30% (section 1c), and scored 4.9/5 (section 7). Roll call voting was utilized. Director Corrales – ave Director Griffith – ave Director Greer - ave Director Barry - ave Director Clark - nay Director Pacheco - ave Director Edwards-Tate - nav Chair Greer announced that five board members were in favor. Two opposed. None abstention. None absent. Motion approved. **MOTION:** By Clark, 2nd by Director Edwards-Tate and carried to approve engaging an independent third party analysis of the CEO agreement and compensation Roll call voting was utilized. Director Corrales - nav Director Griffith - nav Director Greer - nay Director Barry - nay Director Clark - ave Director Pacheco - nay Director Edwards-Tate – abstain Chair Greer announced that one board members were in favor. Five opposed. One abstention. None absent. Motion failed.

Board of Directors Meeting Minutes - Monday, October 9, 2023

Agenda Item

Discussion

Conclusion / Action / Follow Up

- The CEO Ad Hoc Committee presented their recommendation based on the market data, section (1a) 70, section (1b) 30, and (7) 4.9
- Board members were allotted time to ask questions regarding the process of Resolution No. 10.09.23(01)-16. Kevin DeBruin, Chief Legal Officer, explained the process to the board. An amended motion was brought to the floor by Director Michael Pacheco
- Board members were allotted time to comment regarding the amendment to the CEO employment agreement
- Board members were allotted time to comment regarding the motion engaging an independent third party analysis

b. Vote of No Confidence in a Director; Request for Director to Show Cause (John Clark)

MOTION: By Director Griffith, 2nd by Director Barry and carried to approve to concurrently address agenda items 8 b. and 8 c.

Roll call voting was utilized.

Director Corrales – nay
Director Greer – nay
Director Clark – nay
Director Clark – nay
Director Pacheco – nay

Director Edwards-Tate - nav

Chair Greer announced that one board members were in favor. Six opposed. None abstention. None absent. Motion failed.

MOTION: By Director Greer, 2nd by Director Corrales and carried to table the vote of no confidence in a director, pending investigation of allegations, until the next Board of Director meeting

Roll call voting was utilized.

Director Corrales – aye
Director Greer – aye
Director Clark – abstain

Director Griffith – aye
Director Barry – aye
Director Pacheco – aye

Director Edwards-Tate – aye

Chair Greer announced that six board members were in favor. Six opposed. One abstention. None absent. Motion approved.

Board of Directors Meeting Minutes - Monday, October 9, 2023 Agenda Item Conclusion / Action / Follow Up **Discussion** Directors Michael Pacheco, Laurie Edwards-Tate and Chair Linda Greer noted they do not support handling agenda items 8b and 8c concurrently Vice-Chair Jeff Griffith introduced cause for the vote of no confidence in Director John Clark Director John Clark spoke on his behalf regarding the vote of no confidence in Director John Kern, outside legal counsel (Holland & Knight), explained the investigation process to the board members MOTION: By Director Greer, 2nd by Director Pacheco Vote of No Confidence in a Director; Request for Director to Show Cause (Laurie Edwards-Tate) and carried to table the vote of no confidence in a director, pending investigation of allegations, until the next Board of Director meeting Roll call voting was utilized. Director Corrales – ave Director Griffith - ave Director Greer - aye Director Barry – aye Director Clark – abstain Director Pacheco – aye Director Edwards-Tate - ave Chair Greer announced that six board members were in favor. None opposed. One abstention. None absent. Motion approved. Vice-Chair Jeff Griffith introduced cause for the vote of no confidence in Director Laurie Edwards-Tate Director Laurie Edwards-Tate read a statement to the Board of Directors John Kern, outside legal counsel (Holland & Knight), explained the investigation process to the board members Vice-Chair Jeff Griffith reminded board members to review the media policy, code of conduct and bylaws 8. COMMITTEE REPORTS (information only unless otherwise noted) a. Audit and Compliance Committee Committee Chair Michael Pacheco reported the committee was dark in the month of September. b. Community Relations Committee Committee Chair Terry Corrales reported the committee was dark in the month of September.

Board of Directors Meeting Minutes – Monday,	October 9, 2023	
Agenda Item		
• Discussion		Conclusion / Action /Follow Up
c. Finance Committee		
Committee Chair Laura Barry reported the	committee was dark in the month of September.	
d. Governance Committee		
Committee Chair Jeff Griffith reported the	committee was dark in the month of September.	
e. Human Resources Committee		
Committee Chair Terry Corrales reported	the committee was dark in the month of September.	
f. Quality Review Committee		
Committee Chair Linda Greer reported the	committee summary is included in the board-meeting packet.	
g. Strategic & Facilities Planning Committee		
Committee Chair Michael Pacheco reporter	ed the committee summary is included in the board-meeting pac	cket.
FINAL ADJOURNMENT		
There being no further business, Chairwo	man Linda Greer adjourned the meeting at 8:46 p.m.	
	Board Secretary	Terry Corrales, R.N.
Signatures:	Board Assistant	
		Carla Albright



SPECIAL CLOSED SESSION BOARD OF DIRECTOR'S MEETING MINUTES – MONDAY, OCTOBER 9, 2023				
AGENDA ITEM CONCLUSION / ACTION				
DISCUSSION				
NOTICE OF MEETING				
Notice of Meeting was posted at the Palomar Health Administrative Office at 2125 Citra the Palomar Health website, on Thursday, October 5, 2023, which is consistent with leg				
I. CALL TO ORDER				
The meeting, which was held in the First Floor Conference Room at 2185 Citracado Parl order at 5:30 p.m. by Board Chair Linda Greer.	kway, Escondido, CA. 92029, and virtually, was called to			
II. ESTABLISHMENT OF QUORUM				
Quorum comprised of Directors Barry, Clark (virtual), Corrales, Greer, Griffith, Pacheco Absences: Edwards-Tate				
III. PUBLIC COMMENTS				
There were no public comments				

SPECIAL CLOSED SESSION BOARD OF DIRECTOR'S MEETING MINUTES – MONDAY, OCTOBER	9, 2023	
AGENDA ITEM CONCLUSION / ACTION		
DISCUSSION		
IV. ADJOURNMENT TO CLOSED SESSION		
a. Pursuant to California Government Code §54956.9(a) and (e); §54954.5—CONFERENCE WITH L unspecified, disclosure would jeopardize service of process, existing negotiations, or result in ot		
V. RE-ADJOURNMENT TO OPEN SESSION		
VI. ACTION RESULTING FROM DISCUSSION – IF ANY		
No action resulting from discussion		
VII. FINAL ADJOURNMENT		
There being no further business, Chair Greer adjourned the meeting at 5:54 p.m.		
SIGNATURES: BOARD SECRETARY BOARD ASSISTANT	Terry Corrales, R.N. Carla Albright	



SPECIAL SESSION BOARD OF DIRECTOR'S MEETING MINUTES – FRIDAY, OCTOBER 6, 2023				
AGENDA ITEM CONCLUSION / ACTION				
DISCUSSION				
I. CALL TO ORDER				
The meeting, which was held in the Linda Greer Board Room at 2125 Citracado Poto order at 11:01 a.m. by Board Chair Linda Greer.	arkway, Suite 300, Escondido, CA. 92029, and virtually, was called			
NOTICE OF MEETING				
Notice of Meeting was posted at the Palomar Health Administrative Office at 212 the Palomar Health website, on Wednesday, September 6, 2023, which is consist				
II. ESTABLISHMENT OF QUORUM				
Quorum comprised of Directors Barry, Clark, Corrales, Edwards-Tate, Greer, Griff Absences: None	ith, Pacheco			
III. PUBLIC COMMENTS				
There were no public comments				

SPECIAL SESSION BOARD OF DIRECTOR'S MEETING MINUTES – FRIDAY, OCTOBER 6, 2023							
AGENDA İTEM		CONCLUSION / ACTION					
• DISCUSSION							
IV. ADJOURNMENT TO CLOSED SESSION							
a. Pursuant to California Government Code §54957(b) —Public Employee Performance Evaluation – President & CEO							
V. RE-ADJOURNMENT TO	OPEN SESSION						
VI. ACTION RESULTING FRO	OM DISCUSSION — IF ANY						
No action resulting from	discussion						
VII. PRESENTATIONS							
a. State of the Market for I	Executive Compensation – Informational Only						
VIII. FINAL ADJOURNMENT							
There being no further business	, Chair Greer adjourned the meeting at 12:36	p.m.					
	BOARD SECRETARY	Terry Corrales, R.N.					
SIGNATURES:							
	BOARD ASSISTANT	Carla Albright					

ADDENDUM B

Palomar Medical Center Escondido 2185 Citracado Parkway Escondido, CA 92029 (442) 281-1005 (760) 233-7810 fax Medical Staff Services

November 1, 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: November 13, 2023

Subject: Palomar Medical Center Escondido Credentialing Recommendations

Provisional Appointment (11/13/2023 – 10/31/2025)

Anderson, John S., M.D. – Teleradiology
Choudry, Qasim M., M.D. – Nephrology
Drake, Macarthur Jr., M.D. – Teleradiology
Eisinger, Philip, D.O. – Teleradiology
Healey, Mark A., M.D. – General Surgery
Hennein, Lauren M., M.D. – Ophthalmology
Jean-Baptiste, Ryan S., M.D. – Teleradiology
Leblang, Stephanie E., M.D. – OB/Gyn
McCarty, Troy S., Jr., D.O. – Emergency Medicine
Savani, Aman A., M.D. – Neurology
Suhail, Mohammed, M.D. – Teleradiology
Teal, Elizabeth N., M.D. – Maternal-Fetal Medicine

Advance from Provisional to Active Category

Toensing, Christopher, M.D. - Teleradiology

Aldiwani, Haider D., M.D. - Internal Medicine (eff. 11/13/2023 -08/31/2025)
Bonenfant, Jeffrey M., D.O. - Critical Care Medicine (eff. 11/13/2023 -04/30/2024)
Das, Tapash K., M.D. – Internal Medicine (eff. 12/01/2023- 11/30/2025)
El Ghazal, Roland B., M.D. - Critical Care Medicine (eff. 11/13/2023 – 07/31/2024)
Garfinkle, Mark A., M.D. - Internal Medicine (eff. 11/13/2023 – 08/31/2024)
Khader, Waseem, D.O. – Family Medicine (eff. 11/13/2023 – 09/30/2025)
Leonard, Lisa A., M.D – OB/Gyn (eff. 11/13/2023 – 01/31/2025)
Yi, Jung Soo, M.D. - Anesthesiology (eff. 11/13/2023 – 09/30/2025)

Additional Privileges

Azadian, Moosa, M.D. - Critical Care Medicine

ECMO Management (effective 11/13/2023 – 07/31/2024)

Popper, Steven T., M.D. – Critical Care Medicine

- ECMO Management (effective 11/13/2023 03/31/2025)
- Use of ION Intuitive Robotic-Assisted Bronchoscopy (RAB) (eff. 11/13/2023 03/31/2025)
- Radial <u>and</u> Linear EBUS Bronchoscopy (eff. 11/13/2023 03/31/2025)

Quan, Michelle, M.D. – Pulmonary Disease/Critical Care

- Use of ION Intuitive Robotic-Assisted Bronchoscopy (RAB) (eff. 11/13/2023 10/31/2025)
- Radial and Linear EBUS Bronchoscopy (eff. 11/13/2023 10/31/2025)

Rai, Baroon, M.D. – Critical Care Medicine

ECMO Management (effective 11/13/2023 – 11/30/2024)

Voluntary Resignations

Asante, Kristi M.D. – Internal Medicine (eff. 10/05/2023)

Chan, Philip T., M.D. – OB/Gyn (eff. 09/02/2023)

Cheng, Brian C.F., M.D. – Hematology/Oncology, KP (eff. 11/30/2023)

Fry, James J., D.O. – Internal Medicine, KP (eff. 11/30/2023)

Furubayashi, Jill, M.D. – Teleradiology (eff. 10/08/2023)

Koski, Michelle E., M.D. – Urology (eff. 09/22/2023)

Gerber, Eric W., M.D. – Urology (eff. 09/22/2023)

Moore, George W., M.D. – Internal medicine, KP (eff. 11/30/2023)

Reddy, Samathha R., M.D. – Internal Medicine (eff. 11/30/2023)

Song, Steve S., M.D. – Internal Medicine, KP (eff. 11/30/2023)

Steele, Lauren E., M.D. – Pediatrics (eff. 10/31/2023)

Stewart, Ethan R., D.O. – Infectious Disease, KP (eff. 11/30/2023)

Warner, Shweta, M.D. - Infectious Disease, KP (eff. 11/30/2023)

Wine, Nelar, M.D. – Internal Medicine, KP (eff. 11/30/2023)

Yue, Herbert J., M.D. – Critical Care Medicine, KP (eff. 11/30/2023)

Request for Leave of Absence – 2 years

Fatayerji, Aayah, D.O. – Internal Medicine (eff. 10/01/2023 to 09/30/2025)

Huskey, Dana, M.D. – OB/Gyn (eff. 10/12/2023 to 09/30/2025)

Read, Trenton, DPM – Podiatry (eff. 10/24/2023 to 09/30/2025)

Allied Health Professional Appointment (11/13/2023 – 10/31/2025)

McConnell, Colleen C., PA-C – Physician Assistant (sponsor – Dr. Bruce Friedberg, for EMA)

Allied Health Professional Resignations

Houser, Dale D., PA-C - KP (eff. 11/30/2023)

Lavin, Barbara J., NNP (eff. 10/31/2023)

PALOMAR MEDICAL CENTER ESCONDIDO RECOMMENDATIONS FOR REAPPOINTMENT

Reappointment	(effective	12/01	/2023 -	- 02/28	<u>/2025)</u>

Arrieta, Iris R., M.D. Medical Oncology Dept. of Medicine Active

Reappointment (effective 12/01/2023 – 05/31/2024)

Hamdard, Farah, M.D. Family Practice Dept. of Family Practice Active Ebrahimi Adib, Tannaz, M.D. Ob/Gyn Dept. of Ob/Gyn Active

Reappointments (effective 12/01/2023 – 11/30/2025)

Neappointments (effective 12	$\frac{2}{11}\frac{1}{30}\frac{2023}{20} - \frac{11}{30}\frac{30}{20}$	<u> 231</u>		
Alunni, Marisa L., M.D.	OB/Gyn	Dept. Of OB/Gyn	Active	
Cote, Matthew T., M.D.	Emergency Medicine	Dept. of Emergency Med	Active	
Cloyd, David W., M.D.	Surgery, Gen/Vasc	Dept. of Surgery	Active	
Emont, Eric M., M.D.	Geriatric Medicine	Dept. of Medicine	Active	
Epner, Steven L., M.D.	Diagnostic Radiology	Dept. of Radiology	Active	
Foraci, Anna R., D.O.	Family Practice	Dept. of Family Prac.	Affiliate	
Friedberg, Bruce H., M.D.	Emergency Medicine	Dept. of Emergency Med.	Active	
Hinshaw, Paul W., D.O.	OB/Gyn	Dept. of OB/Gyn	Active	
Kim, Choll W., M.D.	Ortho Surgery	Dept. Of Ortho Surg/Rehab	Courtesy	
Kim, Paul D., M.D.	Ortho Surgery	Dept. of Ortho Surg/Rehab	Active	
Klaristenfeld, Daniel D., M.D.	Surgery, General	Dept. of Surgery	Courtesy	
Laverson, Steve, M.D.	Plastic Surgery	Dept. of Surgery	Active	
Levin, Ronald M., M.D.	Anesthesiology	Dept. of Anesthesia	Active	
Paduga, Remia S., M.D.	Neurology	Dept. of Medicine	Active	
Rastle, Thomas E., M.D.	Family Practice	Dept. of Family Practice	Affiliate	
(*Change from Active to Affiliate – Surgical Assist Only*)				
Sweeney, Nathaly M., M.D.	Neonatal-perinatal	Dept. of Pediatrics	Courtesy	
Tordilla, F. Omar B., M.D.	Family Practice	Dept. of Family Practice	Affiliate	

Tordilla, F. Omar B., M.D. Family Practice Dept. of Family Practice Affiliate Volp, P. Brian, M.D. Radiation Oncology Dept. Of Radiology Active Zahid, Adnan M., M.D. Internal Medicine Dept. of Medicine Active

Allied Health Professional Reappointments (effective 12/01/2023 – 11/30/2025)

Brett, Austin M., PA-C Dept. of Emergency Medicine (Sponsor: Dr. Friedberg for Palomar Emergency Physicians)

Gebauer, Heather C., PA-C Dept. of Emergency Medicine (Sponsor: Dr. Friedberg for Palomar Emergency Physicians)

Hartman, Elizabeth M., PA-C Dept. of Emergency Medicine (Sponsor: Dr. Friedberg for Palomar Emergency Physicians)

Lindsey, Sabrina E., NNP Dept. of Pediatrics (Sponsor: Julie West, M.D. for Children's Specialist of San Diego)

McElhose, Jessica J., NNP Dept. of Pediatrics (Sponsor: Julie West, M.D. for Children's Specialist of San Diego)



Nesbitt, Rosel B., PA-C
Emergency Physicians)

Reece, Charla C., NP
Medical Group)

Savic, Jessica E., PA-C
Witt, Kendra R., PA-C
Spine Center)

Dept. of Emergency Medicine (Sponsor: Dr. Friedberg for Palomar
Emergency Physicians)

Dept. of Emergency Medicine (Sponsor: Dr. Ali Fadhil for Palomar Hospitalists
Dept. of Surgery (Sponsor: Dr. Andrew Nguyen for UCSD Neurosurgery)
Dept. of Orthopaedic Surgery/Rehab (Sponsor: Dr. Choll Kim - Excel

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: November 1, 2023

To: Palomar Health Board of Directors – November 13, 2023 Meeting
From: Sam Filiciotto, M.D., Chief of Staff, PMC Poway Medical Staff
Subject: Medical Staff Credentials Recommendations – October, 2023

<u>Provisional Appointments:</u> (11/13/2023 – 10/31/2025)

John Anderson, M.D., Teleradiology
Qasim Choudry, M.D., Nephrology
Macarthur Drake, M.D., Teleradiology
Philip Eisinger, D.O., Teleradiology
Ryan Jean-Baptiste, M.D., Teleradiology
Troy McCarty, D.O., Emergency Medicine
Aman Savani, M.D., Neurology
Mohammed Suhail, M.D., Teleradiology
Christopher Toensing, M.D., Diagnostic Radiology
Brian Volpp, M.D., Radiation Oncology

<u>Biennial Reappointments:</u> (12/01/2023 - 11/30/2025)

Christopher Chisholm, M.D., Pain Medicine, Active Matthew Cote, M.D., Emergency Medicine, Active

Eric Emont, M.D., Geriatric Medicine, Active (Includes The Villas at Poway)

Steven Epner, M.D., Diagnostic Radiology, Active Bruce Friedberg, M.D., Emergency Medicine, Active Steve Laverson, M.D. Plastic Surgery, Active

Ronald Levin, M.D., Anesthesiology, Active Remia Paduga, M.D., Neurology, Active

Advancements to Active Category:

Haider Aldiwani, M.D., Internal Medicine, effective 11/13/2023 – 08/31/2025

Jeffrey Bonenfant, D.O., Critical Care Medicine, effective 11/13/2023 – 04/30/2024 (Includes The Villas at Poway)

Tapash Das, M.D., Internal Medicine, effective 12/01/2023 – 11/30/2025

Advancement to Courtesy Category:

Mark Garfinkle, M.D., Internal Medicine, effective 11/13/2023 - 08/31/2024



Voluntary Resignations:

Chandani DeZure, M.D., Pediatrics, effective 04/26/2023 Anna Gelberg, M.D., Internal Medicine, effective 10/31/2023 Lorne Kapner, M.D., Ophthalmology, effective 10/31/2023 Erik Velez, M.D., Teleradiology, effective 09/28/2023

<u>Allied Health Professional Appointment:</u> (11/13/2023 – 10/31/2025) Holly Contreras, PA, Surgery, Sponsors Drs. Burgess and Schultzel Colleen McConnell, PA, Emergency Medicine, Sponsor Dr. Friedberg

Allied Health Professional Reappointments: (12/01/2023 – 11/30/2025)
Austin Brett, PA, Emergency Medicine, Sponsor Dr. Friedberg
Heather Gebauer, PA, Emergency Medicine, Sponsor Dr. Friedberg
Elizabeth Hartman, PA, Emergency Medicine, Sponsor Dr. Friedberg
Rosel Nesbitt, PA, Emergency Medicine, Sponsor Dr. Friedberg
Charla Reece, NP, Medicine, Sponsor Dr. Fadhil

Allied Health Professional Voluntary Resignations:

Marie Egge, PA, effective 11/11/2023 Oriesa Oeij, PA, effective 10/31/2023

PALOMAR MEDICAL CENTER POWAY: <u>Certification by and Recommendation of Chief of Staff:</u> 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.

PERSONAL INFORMATION

Provider Name & Title	John S. Anderson, M.D.
Palomar Health Facilities	Palomar Medical Center Escondido
	Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

Specialties	Diagnostic Radiology - Certified 2007

ORGANIZATIONAL NAME

Name	Self
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Medical Education Information	Medical School Case Western Reserve University, MD From: 08/01/1995 To: 05/16/1999 Doctor of Medicine Degree
Internship Information	Internship Brooke Army Medical Center General Surgery From: 07/01/1999 To: 06/30/2000
Residency Information	Residency Barnes-Jewish Hospital at Washington University Radiology, Diagnostic Imaging From: 07/01/2003 To: 06/30/2007
Fellowship Information	Fellowship University of California, San Diego Magnetic Resonance Imaging From: 07/01/2007 To: 06/30/2008
Current Affiliation Information	University Hospitals Cleveland Medical Center



PERSONAL INFORMATION

Provider Name & Title	Qasim M. Choudry, M.D.
Palomar Health Facilities	Palomar Medical Center Escondido
	Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

Specialties	Nephrology - Certified 2006

ORGANIZATIONAL NAME

Name	Balboa Nephrology
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Medical Education Information	Medical School St. George's University School of Medicine, MD From: 01/01/1993 To: 12/27/1996
Internship Information	
Residency Information	Residency Kaiser Permanente Santa Clara Medical Center Internal Medicine From: 06/01/1997 To: 06/30/2001
Fellowship Information	Fellowship University of Louisville Nephrology From: 07/01/2004 To: 06/30/2006
Current Affiliation Information	Norton Hospital



PALOMAR HEALTH ALLIED HEALTH PROFESSIONAL APPOINTMENT November 2023

PERSONAL INFORMATION

Provider Name & Title	Holly Contreras, PA-C
Palomar Health Facilities	Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

Specialties	Physician Assistant - Certified 2023
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ORGANIZATIONAL NAME

Name	United Medical Doctors
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Education Information	University of Southern California, PA From: 08/22/2020 To: 05/12/2023
Employment	Current Employment United Medical Doctors Physician Assistant From: 07/17/2023 To: Current
Current Affiliation Information	



PERSONAL INFORMATION

Provider Name & Title	Macarthur Drake, Jr., M.D.
Palomar Health Facilities	Palomar Medical Center Escondido
	Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

Specialties	Diagnostic Radiology - Certified 2006

ORGANIZATIONAL NAME

Name	Stat Radiology Group
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Medical Education Information	Medical School Wright State University, MD From: 08/01/1997 To: 06/28/2001 Wright State University Medical School
Internship Information	Internship Akron City Hospital Medicine From: 07/02/2001 To: 06/30/2002
Residency Information	Residency Mount Sinai Medical Center Radiology, Diagnostic Imaging From: 07/01/2002 To: 06/30/2006
Fellowship Information	Fellowship Jackson Memorial Hospital Neuroradiology From: 07/01/2006 To: 06/30/2007

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PERSONAL INFORMATION

Provider Name & Title	Philip Eisinger, D.O.
Palomar Health Facilities	Palomar Medical Center Escondido
	Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

Specialties	Diagnostic Radiology - Certified 2004

ORGANIZATIONAL NAME

Stat Radiology Medical Group

Medical Education Information	Medical School Des Moines University - Osteopathic Medical Center, DO From: 06/01/1995 To: 06/30/1999
Internship Information	Internship Michigan State University Rotating From: 06/24/1999 To: 06/23/2000
Residency Information	Residency William Beaumont Hospital - Michigan Radiology, Diagnostic Imaging From: 07/01/2000 To: 06/30/2004
Fellowship Information	
Current Affiliation Information	Silver Cross Hospital Kaweah Health San Mateo Medical Center St. John's Medical Center Encino Hospital Medical Center Sherman Oaks Community Hospital Campbell County Health Chestnut Hill Hospital Butler Health System - Clarion Hospital Memorial Hospital of Converse County Butler Memorial Hospital Mount Nittany Medical Center Reading Hospital - Tower Health Med Center Health



PERSONAL INFORMATION

Provider Name & Title	Mark A. Healey, M.D.
Palomar Health Facilities	Palomar Medical Center Escondido

SPECIALTIES/BOARD CERTIFICATION

ORGANIZATIONAL NAME

Name	North County Trauma Associates
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Medical Education Information	Medical School Queens University, MD From: 09/07/1982 To: 05/24/1986
Internship Information	Internship McGill University - Hospital Royal Victoria General Surgery From: 07/01/1986 To: 06/30/1987
Residency Information	Residency McGill University - Hospital Royal Victoria General Surgery From: 07/01/1987 To: 06/30/1992
Fellowship Information	Fellowship UCSD Medical Center Trauma From: 07/01/1995 To: 06/30/1996 Fellowship UCSD Medical Center Surgical Critical Care From: 01/01/1994 To: 06/30/1995 Surgical Critical Care
Current Affiliation Information	Canton - Potsdam Hospital



PERSONAL INFORMATION

Provider Name & Title	Lauren M. Hennein, M.D.
Palomar Health Facilities	Palomar Medical Center Escondido

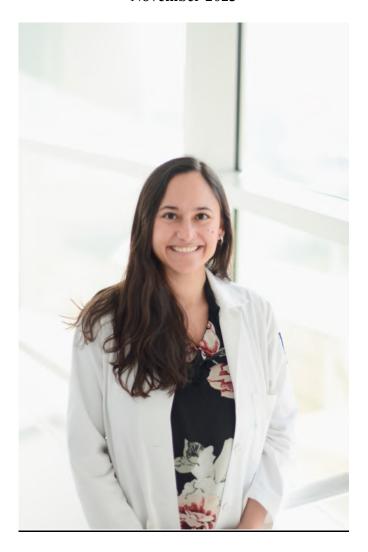
SPECIALTIES/BOARD CERTIFICATION

Specialties	Ophthalmology, Pediatric - Certified 2023
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ORGANIZATIONAL NAME

Name Children's Specialists of San Diego	
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Medical Education Information	Medical School University of California, San Francisco, MD From: 07/01/2013 To: 06/30/2017
Internship Information	Internship Scripps Mercy Hospital, San Diego Ophthalmology From: 06/24/2017 To: 06/23/2018
Residency Information	Residency University of California, San Francisco Ophthalmology From: 07/01/2018 To: 06/30/2021
Fellowship Information	Fellowship Harvard University-Boston City Hospital Pediatric, Ophthalmology From: 07/05/2021 To: 07/04/2022
Current Affiliation Information	Sharp Grossmont Hospital Sharp Memorial Hospital Rady Children's Hospital, San Diego



PERSONAL INFORMATION

Provider Name & Title	Ryan S. Jean-Baptiste, M.D.
Palomar Health Facilities	Palomar Medical Center Escondido
	Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

Specialties	Diagnostic Radiology - Certified 2009

ORGANIZATIONAL NAME

Name	Stat Radiology Group
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Medical Education Information	Medical School Yale University School of Medicine, MD From: 10/01/1999 To: 05/30/2004
Internship Information	Internship Tufts Medical Center Transitional From: 06/23/2004 To: 06/23/2005
Residency Information	Residency Lenox Hill Hospital Radiology, Diagnostic Imaging From: 07/01/2005 To: 06/30/2009
Fellowship Information	Fellowship University of Michigan Hospitals and Health Ctrs Vasc&Interventional Radiology From: 07/15/2009 To: 06/15/2010
Current Affiliation Information	Hollywood Presbyterian Medical Center Barton Healthcare System Corona Regional Medical Center Beverly Hospital (Montebello) Chino Valley Medical Center Banner Lassen Medical Center Centinela Hospital Medical Center El Camino Health - Mountain View Hospital Encino Hospital Medical Center Adventist Health Bakersfield Aspirus Riverview Hospital
	45



PERSONAL INFORMATION

Provider Name & Title	Stephanie E. Leblang, M.D.
Palomar Health Facilities	Palomar Medical Center Escondido

SPECIALTIES/BOARD CERTIFICATION

Specialties	Obstetrics and Gynecology – Not Certified Yet
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ORGANIZATIONAL NAME

ame	OB Hospitalist Group
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Medical Education Information	Medical School Rush Medical College, Rush University, MD From: 08/03/2015 To: 04/30/2019 Doctor of Medicine Degree
Internship Information	
Residency Information	Residency Advocate Illinois Masonic Medical Center Obstetrics/Gynecology From: 07/01/2019 To: 06/30/2023
Fellowship Information	
Current Affiliation Information	



PERSONAL INFORMATION

Provider Name & Title	Troy S. McCarty, Jr., D.O.
Palomar Health Facilities	Palomar Medical Center Escondido
	Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

Specialties	Emergency Medicine – Not Certified Yet

ORGANIZATIONAL NAME

Name	Palomar Emergency Physicians
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Medical Education Information	Medical School Lincoln Memorial University-DeBusk College of Ostepathic Medicine, DO From: 08/01/2015 To: 05/11/2019 Doctor of Osteopathy Medicine
Internship Information	
Residency Information	Residency Naval Medical Center, San Diego GME Emergency Medicine From: 07/01/2019 To: 06/30/2023
Fellowship Information	
Current Affiliation Information	



PALOMAR HEALTH ALLIED HEALTH PROFESSIONAL APPOINTMENT November, 2023

PERSONAL INFORMATION

Provider Name & Title	Colleen C. McConnell, PA-C
Palomar Health Facilities	Palomar Medical Center Escondido
	Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

Specialties	Physician Assistant - Certified 2020

ORGANIZATIONAL NAME

Name	Palomar Emergency Physicians
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Education Information	A.T. Still University of Health Sciences Master of Science/PA Studies 06/11/2018 – 08/07/2020
Employment	Current Employment South County Hospital (Team Health) Physician Assistant From: 03/06/2023 To: Current Current Employment Emergent Medical Associates From: 10/01/2023 - Current Prior Employment Team Health Physician Assistant From: 01/22/2021 To: 02/12/2023
Current Affiliation Information	South County Hospital

PALOMAR HEALTH ALLIED HEALTH PROFESSIONAL APPOINTMENT November, 2023



PERSONAL INFORMATION

Provider Name & Title	Aman A. Savani, M.D.
Palomar Health Facilities	Palomar Medical Center Escondido
	Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

Specialties	Neurology - Certified 2008

ORGANIZATIONAL NAME

The Neurology Center

Medical Education Information	Medical School Eastern Virginia Medical School, MD From: 08/14/2000 To: 05/22/2004
Internship Information	Internship Eastern Virginia Medical School Internal Medicine From: 07/01/2004 To: 06/30/2005
Residency Information	Residency University of Virginia Medical Center Neurology From: 07/01/2005 To: 06/30/2008
Fellowship Information	Fellowship Stanford University Medical Center Sleep Medicine From: 07/01/2008 To: 06/30/2009
Current Affiliation Information	Scripps Memorial Hospital, Encinitas



PERSONAL INFORMATION

Provider Name & Title	Mohammed Suhail, M.D.
Palomar Health Facilities	Palomar Medical Center Escondido
	Palomar Medical Center Poway

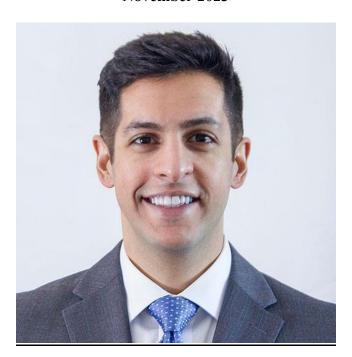
SPECIALTIES/BOARD CERTIFICATION

Specialties	Diagnostic Radiology - Certified 2019

ORGANIZATIONAL NAME

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Medical Education Information	Medical School UCSD School of Medicine, MD From: 09/01/2009 To: 06/30/2013
Internship Information	Internship Scripps Mercy Hospital, San Diego Transitional From: 06/24/2013 To: 06/23/2014
Residency Information	Residency UC San Diego School of Medicine Radiology From: 07/01/2014 To: 06/30/2018
Fellowship Information	Fellowship UCLA Medical Center Abdominal Radiology From: 07/01/2018 To: 07/01/2019 Abdominal Radiology and Cross Sectional IR fellowship
Current Affiliation Information	Temecula Valley Hospital Inland Valley Medical Center Rancho Springs Medical Center



PERSONAL INFORMATION

Provider Name & Title	Elizabeth N. Teal, M.D.
Palomar Health Facilities	Palomar Medical Center Escondido

SPECIALTIES/BOARD CERTIFICATION

OB/GYN/Perinatology, Maternal-Fetal Medicine - Certified 2022	Specialties
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ORGANIZATIONAL NAME

Name	UCSD Dept. of OB/Gyn and Reproductive Sciences

Medical Education Information	Medical School University of South Florida, MD From: 08/20/2011 To: 04/20/2016 Doctor of Medicine
Internship Information	
Residency Information	Residency University of California, San Francisco Obstetrics/Gynecology From: 06/09/2016 To: 06/20/2020
Fellowship Information	Fellowship University of North Carolina Hospitals Maternal-Fetal Medicine From: 07/01/2020 To: 06/17/2023
Current Affiliation Information	University of California, San Diego University of North Carolina Hospitals



PERSONAL INFORMATION

Provider Name & Title	Christopher Toensing, M.D.
Palomar Health Facilities	Palomar Medical Center Escondido
	Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

Specialties	Diagnostic Radiology - Certified 2018

ORGANIZATIONAL NAME

Name	Self
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Medical Education Information	Medical School Virginia Commonwealth University, MD From: 08/01/2008 To: 05/12/2012
Internship Information	Internship Virginia Commonwealth University Internal Medicine From: 07/01/2012 To: 06/30/2013
Residency Information	Residency Loma Linda University Medical Center Radiology, Diagnostic Imaging From: 07/01/2013 To: 06/30/2017
Fellowship Information	Fellowship Loma Linda University Medical Center Neuroradiology From: 07/01/2017 To: 06/30/2018
Current Affiliation Information	Sharp Grossmont Hospital Temecula Valley Hospital Southwest Healthcare System Riverside County Regional Medical Center



PERSONAL INFORMATION

Provider Name & Title	P. Brian Volpp, M.D.
Palomar Health Facilities	Palomar Medical Center Escondido
	Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

Specialties	Radiation Oncology - Certified 2009

ORGANIZATIONAL NAME

Name	Palomar Health Radiation Oncology
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Medical Education Information	Medical School University of Nevada Reno, MD From: 09/01/1998 To: 05/20/2002 Doctor of Medicine Degree
Internship Information	Internship Cedars-Sinai Medical Center Internal Medicine From: 06/24/2002 To: 06/23/2003
Residency Information	Residency Kaiser Foundation Hospital, Los Angeles Radiation Oncology From: 07/01/2003 To: 06/30/2007
Fellowship Information	
Current Affiliation Information	Palomar Medical Center Escondido



PALOMAR HEALTH

NURSE PRACTITIONER CLINICAL PRIVILEGES — PSYCHIATRY

Name:	Page 1
Effective From/ To/	
□ Palomar Medical Center Escondido□ Palomar Medical Center Poway□ The Villas at 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 Medical Staff 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 NURSE PRACTITIONER (NP) — PSYCHIATRY

To be eligible to apply for clinical privileges as a Nurse Practitioner (NP) in psychiatry, the applicant must meet the following criteria:

- Possession of a valid California license as a Registered Nurse
- Certification by the state of California, Board of Registered Nursing, as a Nurse Practitioner
- Possession of a valid Furnishing Number from the State of California (Note: if the nurse practitioner is newly certified and not yet eligible to apply for a Furnishing Number, they must successfully obtain same as soon as they are eligible.)
- Possession of a valid DEA number
- Masters Degree in Nursing
- Certification as an Adult or <u>Psychiatric Family</u> Nurse Practitioner, <u>or active participation in the</u>
 examination process with achievement of board certification by ANCC or AANP-within 14 months
 of appointment.
- BLS 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)

Poway MEC: 10/31/2023 Escondido MEC: 10/30/2023 IPC reviewed/revised 10/09/2023

Approved:

Board of Directors: 09/14/2020

PALOMAR HEALTH

NURSE PRACTITIONER CLINICAL PRIVILEGES — PSYCHIATRY

Name:	Page 2
Effective From/ To/	
Required Previous Experience: Applicants for in	nitial appointment must be able to demonstrate provision

of care, treatment or services, reflective of the scope of privileges requested to at least 30 patients in the past 12 months, or completion of master's /post masters degree program in the past 12 months.

Focused Professional Practice Evaluation (FPPE) / Monitoring guidelines: Monitoring shall be performed for at least six (6) cases. Monitoring shall include an ongoing review of the NP's charting and concurrent review of procedures performed, when deemed necessary.

Reappointment Requirements: To be eligible to renew core privileges as a nurse practitioner in psychiatric and mental health, the applicant must meet the following maintenance of privilege criteria:

Current demonstrated competence and an adequate volume of experience (60 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.

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 written policies and protocols developed and approved by the relevant clinical department or service, the Medical Executive Committee, nursing administration and the governing body. A copy of the [collaborating/sponsoring] agreement signed by both parties is to be provided to the hospital.

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 or
 provide an alternate 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/collaborating 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 NP 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 collaborating/supervising physician in accordance with hospital policy.

Poway MEC: 10/31/2023 Escondido MEC: 10/30/2023 IPC reviewed/revised 10/09/2023

Approved:

Board of Directors: 09/14/2020

PALOMAR HEALTH
FALOWAN HEALTH

NURSE PRACTITIONER CLINICAL PRIVILEGES — PSYCHIATRY

Name:							Page 3
Effective From	1	1	То	1	1		

Poway MEC: 10/31/2023 Escondido MEC: 10/30/2023 IPC reviewed/revised 10/09/2023 Approved: Board of Directors: 09/14/2020

PALOMAR HEALTH

NURSE PRACTITIONER CLINICAL PRIVILEGES — PSYCHIATRY

Naı	me:	Page 4
Effe	ective From	<u>//</u>
Nu	RSE PRACTITIO	NER (NP) CORE PRIVILEGES — PSYCHIATRY
	Requested	Evaluate, diagnose, and provide mental health care using a variety of therapeutic techniques for patients within age group seen by the supervising physician who are at risk for developing or presently have psychiatric disorders. The NP may not admit patients to the hospital. May provide care to patients in other hospital care settings including the Crisis Stabilization Unit (CSU) which may be performed via telemedicine link in conformance with unit policies. 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.
		NER (NP) CORE PRIVILEGES — THE VILLAS AT POWAY CONTINUING CARE – PSYCHIATRY F AT PALOMAR MEDICAL CENTER POWAY)
	Requested	Provide mental health care to adolescent and adult patients with common and complex psychiatric illnesses. The psychiatric nurse practitioner continuing care core do not include any procedural privileges.
SPE	ECIAL NON-CO	RE PRIVILEGES (SEE SPECIFIC CRITERIA)
indi of t	ividual request	re privileges are requested individually in addition to requesting the core. Each ing non-core privileges must meet the specific threshold criteria governing the exercise quested including training, required previous experience, and for maintenance of clinical
		HORITY AS DELEGATED BY A SPONSORING PHYSICIAN IN A WRITTEN AGREEMENT IN I STATE AND FEDERAL LAW
	Requested	A Nurse Practitioner may not administer, provide or transmit a prescription for controlled substances in Schedules II through V inclusive without patient-specific authority by a sponsoring physician unless he/she has passed an approved controlled substance education course. (Counter-signed within 24 hours) Requires current DEA certificate and Nurse Practitioner Furnishing Number

Poway MEC: 10/31/2023 Escondido MEC: 10/30/2023 IPC reviewed/revised 10/09/2023

Approved:

Board of Directors: 09/14/2020

NURSE PRACTITIONER CLINICAL PRIVILEGES — PSYCHIATRY

Name:	Page 5
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.

- Assess and treat individual patients with disease states and non disease-based etiologies, using advanced theoretical and empirical knowledge of physiology, path physiology, and pharmacology
- Clinically manage psychiatric disorders including, but not limited to, severe and persistent neurobiological disorders
- Conduct behavioral health care maintenance of the population served
- Conduct individual, group, and family psychotherapy
- · Direct care as specified by medical staff approved protocols
- Evaluate and manage psychobiological interventions
- Initiate referral to appropriate physician or other health care professional of problems that exceed the NP's scope of practice
- Make daily rounds on hospitalized patients performing continued comprehensive assessments, and ordering and implementation of treatments per approved protocols.
- Monitor and manage populations of patients with disease states and non-disease based etiologies to improve and promote health care outcomes
- Obtain admission psychiatric and medical assessment
- Obtain social and psychological admission history
- Order diagnostic testing and therapeutic modalities such as laboratory tests, medications, treatments, x-ray, EKG, IV fluids and electrolytes, etc.
- Utilize advanced practice skills to independently provide (1) case management, including psychiatric rehabilitation and home care; and (2) teaching, promotion, and prevention

Poway MEC: 10/31/2023 Escondido MEC: 10/30/2023 IPC reviewed/revised 10/09/2023

Approved:

Board of Directors: 09/14/2020

NURSE PRACTITIONER CLINICAL PRIVILEGES — PSYCHIATRY

Name:		
Eff	fective From/ To/	
40	CKNOWLEDGEMENT OF PRACTITIONER	
AC	ANOWLEDGEMENT OF PRACTITIONER	
de	nave requested only those clinical privileges for which by education emonstrated performance I am qualified to perform and for which I and I understand that:	
a.	In exercising any clinical privileges granted and in carrying out to am constrained by Hospital and Medical Staff policies and rules applicable to the particular situation.	
b.	Any restriction on the clinical privileges granted to me is waived such situation my actions are governed by the applicable section allied health professionals.	
Się	gned	Date
EN	IDORSEMENT OF PHYSICAN SPONSOR(S)	
Się	gned	Date
Si	gned	Date

Poway MEC: 10/31/2023 Escondido MEC: 10/30/2023 IPC reviewed/revised 10/09/2023 Approved:

Board of Directors: 09/14/2020

NURSE PRACTITIONER CLINICAL PRIVILEGES — PSYCHIATRY

Name:	Page 1
Effective From/ To/	
□ Palomar Medical Center Escondido□ Palomar Medical Center Poway□ The Villas at 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 Medical Staff 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.
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- Possession of a valid Furnishing Number from the State of California (Note: if the nurse practitioner is newly certified and not yet eligible to apply for a Furnishing Number, they must successfully obtain same as soon as they are eligible.)
- Possession of a valid DEA number
- Masters Degree in Nursing
- Certification as an Adult or Psychiatric Nurse Practitioner by ANCC or AANP.
- BLS 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)

Required Previous Experience: Applicants for initial appointment must be able to demonstrate provision of care, treatment or services, reflective of the scope of privileges requested to at least 30 patients in the past 12 months, or completion of master's /post masters degree program in the past 12 months.

Focused Professional Practice Evaluation (FPPE) / **Monitoring guidelines:** Monitoring shall be performed for at least six (6) cases. Monitoring shall include an ongoing review of the NP's charting and concurrent review of procedures performed, when deemed necessary.

Approved:

Board of Directors: 11/13/2023

NURSE PRACTITIONER CLINICAL PRIVILEGES — PSYCHIATRY

Name:							Page 2
Effective From	/_	/_	To	/_	/		

Reappointment Requirements: To be eligible to renew core privileges as a nurse practitioner in psychiatric and mental health, the applicant must meet the following maintenance of privilege criteria:

Current demonstrated competence and an adequate volume of experience (60 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.

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 written policies and protocols developed and approved by the relevant clinical department or service, the Medical Executive Committee, nursing administration and the governing body. A copy of the [collaborating/sponsoring] agreement signed by both parties is to be provided to the hospital.

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 or provide an alternate 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/collaborating agreement);
- Co-sign entries on the medical record of all patients seen or treated by the supervised practitioner in accordance with organizational policies.

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Approved:

Board of Directors: 11/13/2023

NURSE PRACTITIONER CLINICAL PRIVILEGES — PSYCHIATRY

Name:	Name: Page 3				
Effective	Effective From// To//				
Nurse	PRACTITION	NER (NP) CORE PRIVILEGES — PSYCHIATRY			
□ Red	quested	Evaluate, diagnose, and provide mental health care using a variety of therapeutic techniques for patients within age group seen by the supervising physician who are at risk for developing or presently have psychiatric disorders. The NP may not admit patients to the hospital. May provide care to patients in other hospital care settings which may be performed via telemedicine link in conformance with unit policies. 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.			
		NER (NP) CORE PRIVILEGES — THE VILLAS AT POWAY CONTINUING CARE – PSYCHIATRY F AT PALOMAR MEDICAL CENTER POWAY)			
□ Red	quested	Provide mental health care to adolescent and adult patients with common and complex psychiatric illnesses. The psychiatric nurse practitioner continuing care core do not include any procedural privileges.			
SPECIAL	L Non-Cor	RE PRIVILEGES (SEE SPECIFIC CRITERIA)			
individu of the p	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.				
PRESCRIPTIVE AUTHORITY AS DELEGATED BY A SPONSORING PHYSICIAN IN A WRITTEN AGREEMENT IN ACCORDANCE WITH STATE AND FEDERAL LAW					
□ Red	quested	A Nurse Practitioner may not administer, provide or transmit a prescription for controlled substances in Schedules II through V inclusive without patient-specific authority by a sponsoring physician unless he/she has passed an approved controlled substance education course. (Counter-signed within 24 hours) Requires current DEA certificate and Nurse Practitioner Furnishing Number.			

Approved: Board of Directors: 11/13/2023

NURSE PRACTITIONER CLINICAL PRIVILEGES — PSYCHIATRY

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.

- Assess and treat individual patients with disease states and non disease-based etiologies, using advanced theoretical and empirical knowledge of physiology, path physiology, and pharmacology
- Clinically manage psychiatric disorders including, but not limited to, severe and persistent neurobiological disorders
- Conduct behavioral health care maintenance of the population served
- Conduct individual, group, and family psychotherapy
- · Direct care as specified by medical staff approved protocols
- Evaluate and manage psychobiological interventions
- Initiate referral to appropriate physician or other health care professional of problems that exceed the NP's scope of practice
- Make daily rounds on hospitalized patients performing continued comprehensive assessments, and ordering and implementation of treatments per approved protocols.
- Monitor and manage populations of patients with disease states and non-disease based etiologies to improve and promote health care outcomes
- Obtain admission psychiatric and medical assessment
- Obtain social and psychological admission history
- Order diagnostic testing and therapeutic modalities such as laboratory tests, medications, treatments, x-ray, EKG, etc.
- Utilize advanced practice skills to independently provide (1) case management, including psychiatric rehabilitation and home care; and (2) teaching, promotion, and prevention

Approved:

Board of Directors: 11/13/2023

NURSE PRACTITIONER CLINICAL PRIVILEGES — PSYCHIATRY

Name:		
Eff	fective From/ To/	
AC	KNOWLEDGEMENT OF PRACTITIONER	
l ha	nave requested only those clinical privileges for which by education important performance I am qualified to perform and for which I and I understand that:	
a.	In exercising any clinical privileges granted and in carrying out the am constrained by Hospital and Medical Staff policies and rules applicable to the particular situation.	
b.	Any restriction on the clinical privileges granted to me is waived such situation my actions are governed by the applicable section allied health professionals.	
Sig	gned	Date
EN	DORSEMENT OF PHYSICAN SPONSOR(S)	
Sig	gned	Date
Sig	gned	Date

Approved: Board of Directors: 11/13/2023

Board Member Onboarding | Quick-Start Guide

This guide will help a new Board Member quickly get up to speed and understand the expectations during onboarding into their new role.

Key Onboarding Milestones

The steps below outline the common major milestones all new Board Members will complete during their introductory period. These occur in tandem with assigned education and any District orientation provided by the Executive team.

- 1. Administration of the Oath of Office
- Administered at an official ceremony before elected official assumes office
- 2. Bylaws of Palomar Health, Board of Directors Code of Conduct, and all other relevant policies of the District
- Provision of Bylaws and all other relevant policies of the District
- Acknowledgement of Board of Directors Code of Conduct (Annual)
- Provision of any Board of Directors Handbook materials
- 3. Orientation Meetings
 with Board Chair,
 President and CEO,
 Officers and Facility Tours
- Organize structured orientation meeting relative to roles, relationships and responsibilities of governance
- Organize suggested stakeholder introductions*
- Organize facility tours**
- 4. Facilitation of Training as Required by Law
- Per Government Code sections 12950.1 and 53232 et seq.
 - Sexual Harassment
 - Ethics Training
- 5. Information relative to District, third-party, or outside programs on Hospital Governance
- Provided by Chief Legal Officer, as needed
- Provision of copies of Board and Committee meeting minutes (previous 3 months)



Board of Directors Materials to Review

☐ Other Senior Leadership as requested

It can be helpful to seek out and review the following (as applicable) during the onboarding period. Board of Directors Code of Conduct, Lucidoc #68552 Bylaws of Palomar Health, Lucidoc #59212 Board of Directors specific Lucidoc Procedures Brown Act, Roberts Rules, and Parliamentary Procedures Board of Directors Handbook (ACHD Governance Toolkit)
☐ Review Board and Committee minutes for the previous three-month period
Key Communication Channels ☐ Standing Board and Board Committee Meetings
Board of Directors Meetings (2 nd Monday of each month)
 Special or Closed Session Board of Directors Meetings, as needed
 Board Audit & Compliance Committee (3rd Thursday every other month)
Board Community Relations Committee (1st Wednesday every other month) Board Cinarias Committee (4th Wednesday of each month following the end of a guerter)
 Board Finance Committee (4th Wednesday of each month following the end of a quarter) Board Governance Committee (1st Thursday every other month)
 Board Human Resources Committee (1 Mednesday every quarter)
 Board Quality Review Committee (4th Wednesday every other month)
 Strategic & Facilities Planning Committee (last Tuesday every odd month)
☐ Board Representation, Assigned as Needed
O Health Development Board/Audit Committee (twice in a year) High Conference Constitute (4th Theoretic and the development)
 Joint Conference Committee (4th Thursday quarterly) Palomar Health Foundation Board Liaison (4th Tuesday of each month)
 Palomar Health Foundation Board Liaison (4" Tuesday of each month) Pension Committee Liaison (quarterly)
ACHD Representative
*Suggested Stakeholder Introductions
Board Members should work with the Board of Directors Executive Assistant to begin scheduling time to mee
with key stakeholders across the organization. The list below helps guide prioritizing the order in which a Board Member might plan to meet others within the organization (as available):
Board Chair
☐ President & CEO
☐ Chief Legal Officer
☐ Chief Financial Officer
☐ Chief Medical Officer ☐ Chief Nurse Executive
☐ Chief Information Officer
☐ Chief Human Resources Officer

**Suggested Facility Tours

Board Members should work with the Board of Directors Executive Assistant to begin scheduling facility tours. The list below helps guide prioritizing the order in which a Board Member might plan to tour the Districts facilities:

☐ Palomar Medical Center Escondido

☐ Palomar Medical Center Poway

☐ Administrative Offices

☐ Palomar Health Foundation

☐ One Safe Place

Board of Directors Core Education

☐ Sexual Harassment training (required by law, Government Code sections 12950.1 and 53232 et seq.)

☐ Ethics training (required by law, Government Code sections 12950.1 and 53232 et seq.)

Procuring Supplies, Equipment & Systems Access

If equipment is not already available in the department, contact the Board of Directors Executive Assistant for devices (computer, iPad, etc.).

☐ Supported by IT Help Desk (858.613.4357)

- Computer (including dock, accessories, etc.)
- o iPad
- Remote/DUO access (e.g. VPN, Remote Desktop)

☐ Supported by Human Resources/Security

- o Building/office access (physical or through ID Badge privileges via Security)
- Alarm codes & after-hours access (if applicable)

Additional Computer Applications

Board Members are automatically granted access to select computer applications based on their role, and may receive a notification email indicating newly received access.

Professional Services Agreement General Surgery Call Coverage Ayda Dashtaei, DO. CORP

Board Finance Committee

TO:

MEETING DATE:	Wednesday, October 25, 2023			
FROM:	Omar Khawaja, MD, MBA, Chief Medical Officer			
CORP. Physician shall see Poway on a rotating be Surgery in accordance v	Background: This contract represents the On-Call Agreement with Ayda Dashtaei, DO. CORP. Physician shall serve as a member of the On-Call Panel at Palomar Medical Center Poway on a rotating basis and provide On-Call Coverage for the specialty of General Surgery in accordance with the Medical Staff by-laws, rules and regulations, policies and procedures of Palomar Health.			
Budget Impact: Not Bu	dgeted.			
Staff Recommendation	: Approval			
Committee Questions:				
COMMITTEE RECOMM	ENDATION:			
Motion:				
Individual Action:				
Information:				
Required Time:				

PALOMAR HEALTH - AGREEMENT ABSTRACT

Section	1 7(2011) (1)	HEALIH - AGREEMENT ABSTRACT
Reference	Term/Condition	Term/Condition Criteria
Reference	TITLE	Ayda Dashtaei, DO. CORP- General Surgery Call Coverage Professional Services Agreement - 5.1.2023
	AGREEMENT DATE	May 1, 2023
	PARTIES	Palomar Health, a California healthcare district ("PH"), and Ayda Dashtaei, DO. CORP ("Physician").
	PURPOSE	PH desires to ensure that physicians practicing in the specialty of general surgery are available and on call to provide needed medical services at Palomar Medical Center Poway by contracting with Physician to provide such services per the terms of Agreement.
	SCOPE OF SERVICES	Physician is a member of the medical staff of Palomar Medical Center Poway and is duly qualified by licensure, education, and training to practice in the specialty of general surgery and provide medical services at Hospital when called per the terms of this Agreement and to otherwise provide the services required by this Agreement.
	PROCUREMENT METHOD	☐ Request For Proposal X Discretionary
	TERM	May 1, 2023 – September 30, 2024
	RENEWAL	None.
	TERMINATION	Either party may terminate this Agreement without cause upon thirty (30) days' prior written notice.
	FAIR MARKET VALUATION	X YES ☐ NO – DATE COMPLETED: 10/31/2022
	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 □ NO – IMPACT:
	Exclusivity	X No ☐ YES — EXPLAIN:
	JUSTIFICATION	Hospital owns and operates several care facilities including Palomar Medical Center Poway and has the need for physicians to provide on-site and on-call medical services in the specialty of general surgery in order to better serve its geographic service area.
	AGREEMENT NOTICED	☐ YES X NO Methodology & Response:
_	ALTERNATIVES/IMPACT	N/A
	Duties	 □ Provision for Staff Education □ Provision for Medical Staff Education □ Provision for participation in Quality Improvement □ Provision for participation in budget process development
	COMMENTS	None.
	APPROVALS REQUIRED	X VP X-CFO ☐ CEO X-BOD-Committee — Finance; X-BOD

Professional Services Agreement (ED-Hospitalist Services) PALOMAR HOSPITAL PARTNERS, INC.

Board Finance Committee

TO:

PALOMAR HEALTH - AGREEMENT ABSTRACT

Section		WAR REALTH - AGREEMENT ABSTRACT
Reference	Term/Condition	Term/Condition Criteria
	TITLE	Palomar Hospital Partners, Inc. (EMA-Benchmark) – Professional Services Agreement (ED-Hospitalist Services) – 5.1.2023
	AGREEMENT DATE	May 1, 2023
	PARTIES	Palomar Health, a California healthcare district ("PH"), and Palomar Hospital Partners, Inc. aka Emergent Medical Associates (EMA)
	PURPOSE	Hospital desires for Physician Group to provide emergency department and hospitalist professional services pursuant to exclusive agreements between the Parties, and also provide administrative oversight in different capacities for the Emergency Departments and related Hospitalist services.
	SCOPE OF SERVICES	Physician Group shall designate Providers to provide the Services outlined in Exhibit A, which may be amended from time to time. Physician Group and Providers shall abide by all policies and procedures of Hospital's Medical Staff.
	PROCUREMENT METHOD	X Request For Proposal Discretionary
	TERM	May 1, 2023 – April 30, 2024
	RENEWAL	Agreement shall automatically renew for successive on year periods unless earlier terminated in accordance with the terms of this Agreement.
	TERMINATION	Either party may terminate at any time for any reason upon 120 days' written notice. Palomar Health may terminate immediately in the event of other occurrences described in Section 10(b).
	FAIR MARKET VALUATION	X YES NO - DATE COMPLETED: JULY 1, 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	X YES □ NO - IMPACT:
	EXCLUSIVITY	□ No X YES – EXPLAIN: Group has developed and is making comprehensive services available as an aid and assistance to medical centers and to communities specializing in care and treatment of patients admitted to hospitals and medical centers.
	JUSTIFICATION	Hospital owns and operates two (2) acute care hospitals, which require professional clinical services, physician leadership, support and coordination between the Emergency Departments and Hospitalist services.
	AGREEMENT NOTICED	☐ Yes X No Methodology & Response:
	ALTERNATIVES/IMPACT	N/A
	Duties	□ Provision for Staff Education □ Provision for Medical Staff Education □ Provision for participation in Quality Improvement □ Provision for participation in budget process development
	COMMENTS	None.
	APPROVALS REQUIRED	X -VP X-CFO □ CEO X-BOD-Committee – Finance; X-BOD

OPHTHALMOLOGY CALL AGREEMENT Retina Results Medical Corporation (Chirag M. Shah, M.D.)

Board Finance Committee

TO:

MEETING DATE:	Wednesday, October 25, 2023							
FROM:	Omar Khawaja, MD, MBA, Chief Medical Officer							
Background: This contract represents the Call Agreement with Retina Results Medical Corporation. 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 bylaws, rules and regulations, policies and procedures of Palomar Health.								
developed by the parti a particular physician, hospital patients, inclu who require consultat	to PH's patients will be according to a reasonable call schedule es, regardless of payor class, to patients not currently assigned to patients who present to the emergency department, and to ding inpatients, who may be assigned to a particular physician but ion or other physician services from an on-call panel physician ist per the terms of this Agreement.							
Budget Impact: Not B	udgeted.							
Staff Recommendation	n: Approval							
Committee Questions								
COMMITTEE RECOMM	IENDATION:							
Motion:								
Individual Action:								
Information:								
Required Time:								

PALOMAR HEALTH - AGREEMENT ABSTRACT

Section		Town/Condition Cuitoria
Reference	Term/Condition TITLE	Term/Condition Criteria Retina Results Medical Corporation - Ophthalmology Call Coverage
		Agreement
	AGREEMENT DATE	May 1, 2023
	PARTIES	Palomar Health, a California healthcare district ("PH"), and Retina Results Medical Corporation ("Physician").
	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	□ Request For Proposal X Discretionary
	METHOD TERM	May 1, 2023 – April 30, 2025
	RENEWAL	None.
	TERMINATION	Either party may terminate this agreement without cause upon ninety (90) days' prior written notice.
	FAIR MARKET VALUATION	X YES □ 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	☐ YES X NO – IMPACT:
	EXCLUSIVITY	X No □ YES - EXPLAIN:
	JUSTIFICATION	Need for continued Ophthalmology consultation call coverage for the Emergency Departments at PMC Escondido and PMC Poway.
	AGREEMENT NOTICED	☐ YES X NO Methodology & Response:
	ALTERNATIVES/IMPACT	N/A
	Duties	 □ Provision for Staff Education □ Provision for Medical Staff Education □ Provision for participation in Quality Improvement □ Provision for participation in budget process development
	COMMENTS	None.
	APPROVALS REQUIRED	X ∨P X-CFO □ CEO X-BOD-Committee – X-Finance; X-BOD

Medical Director Agreement Medical Surgical/Telemetry & Intermediate Care Adnan M. Zahid, M.D.

Board Finance Committee

TO:

MEETING DATE:	Wednesday, October 25, 2023						
FROM:	Omar Khawaja, MD, MBA, Chief Medical Officer						
Background: The amended Agreement represents the duties of the Med Director in support of the Medical Surgical/Telemetry and Intermediate Care units Palomar Medical Center Escondido. The Medical Director will be responsible for performance of the units along with other medical administrative services as outlined the reasonable satisfaction of the Hospital.							
Budget Impact:	Budgeted						
Staff Recommendation	n: Approval						
Committee Questions:							
COMMITTEE RECOMM	ENDATION:						
Motion:							
Individual Action:							
Information:							
Required Time:							

PALOMAR HEALTH - AGREEMENT ABSTRACT

Section	1 / (2011) (1)	TILALIII — AGRELIVILIII ABSTRACT
Reference	Term/Condition	Term/Condition Criteria
Reference	TITLE	1. Zahid, Adnan M., M.D Medical Surge/Tele and IMC -
		Medical Director Agreement - 7.1.2021Medical Director Agreement
		2. Zahid, Adnan M., M.D Med Surg/Tele & IMC - Amend1 to
		Med Director Agrmt 7.1.2021 - 7.1.2023
	AGREEMENT DATE	 July 1, 2021 July 1, 2023
	PARTIES	Palomar Health, a California healthcare district and Adnan M. Zahid, M.D.
	PURPOSE	Medical Director leadership and support of the Medical Surgical and Telemetry Unit and the Intermediate Care Unit at PMC Escondido.
	SCOPE OF SERVICES	Physician shall serve as Medical Director of the Medical Surgical/Telemetry and Intermediate Care Units and shall be responsible for the medical direction and other medical administrative services set forth in the agreement. Physician shall abide by all policies and procedures of the Medical Staff.
	PROCUREMENT METHOD	☐ Request For Proposal X Discretionary
	TERM	1. July 1, 2021 – June 30, 2023
		2. July 1, 2023 – June 30, 2025
	RENEWAL	None
	TERMINATION	Either party may terminate this Agreement without cause upon thirty (30) days' prior written notice.
	FAIR MARKET VALUATION	X YES □ NO - DATE COMPLETED: MAY 5, 2021
	COMPENSATION	Fair Market Value. The parties hereby acknowledge and agree
	METHODOLOGY	that the compensation is the product of bona fine arms-length
		negotiations and represents a commercially reasonable and
		fair market value payment for the services to be furnished
		without regard to the volume or value of federal health care program or any other business generated by and among the
		Parties.
	BUDGETED	X YES D NO - IMPACT:
	EXCLUSIVITY	X No ☐ YES – EXPLAIN:
	JUSTIFICATION	Hospital owns and operates several acute hospitals and other
		facilities which require physician leadership and support of the
		Medical Surgical/Telemetry and intermediate Care Units at PMC Escondido.
	AGREEMENT NOTICED	☐ 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	None.
	APPROVALS	X- VP X-CFO CEO X-BOD-Committee – Finance; X-BOD
	REQUIRED	7 X C. C = CEC X BOB Committee I manot, X-BOB

Radiology and Director Services Agreement Arch Health Partners, Inc. dba Palomar Health Medical Group (Amend 1)

Board Finance Committee

TO:

MEETING DATE:	Wednesday, October 25, 2023							
FROM:	Omar Khawaja, MD, CMO							
Background: Hospital has engaged group to provide Physicians, on a independent contractor basis, to provide certain services on behalf of the Hospital. Th amendment between Palomar Health and Arch Health Partners, Inc. dba Palomar Health Medical Group adds diagnostic night shift coverage to the Radiology Services Agreemen								
Budget Impact:	Not Budgeted.							
Staff Recommendation	:							
Committee Questions:								
COMMITTEE RECOMM	ENDATION:							
Motion:								
Individual Action:								
Information:								
Required Time:								

PALOMAR HEALTH - AGREEMENT ABSTRACT

Section		
Reference	Term/Condition	Term/Condition Criteria
	TITLE	 Arch Health Partners, Inc. dba Palomar Health Medical Group – Radiology Coverage and Director Services Agreement – 3.1.2023 Arch Health Partners, Inc. dba Palomar Health Medical Group – Amendment No. 1 to Radiology and Director Services Agreement – 9.22.2023
	AGREEMENT DATE	 March 1, 2023 September 22, 2023
	PARTIES	Palomar Health, a California healthcare district, and Arch Health Partners, Inc. dba Palomar Health Medical Group, a California nonprofit corporation
	PURPOSE	To retain Group as an independent contractor to provide, on an exclusive basis through its Physicians, certain administrative services and professional radiology medical services in the operation of the Departments. This amendment adds diagnostic night shift coverage to the Radiology Services Agreement for diagnostic night/weekend coverage.
	SCOPE OF SERVICES	Group shall provide diagnostic and interventional radiology services as set forth in this Agreement.
	PROCUREMENT METHOD	□ Request For Proposal X Discretionary
	TERM	 March 1, 2023 to December 31, 2026 September 22, 2023 to February 28, 2026
	RENEWAL	None
	TERMINATION	Either party may terminate the agreement without cause upon 180 days' written notice to the other party. Either party may terminate the agreement for breach upon 30 days' notice with corresponding cure period.
	FAIR MARKET VALUATION	X YES □ NO - DATE COMPLETED: 09/22/2023
	COMPENSATION METHODOLOGY	Fair Market Value
	BUDGETED	□YES X NO – IMPACT: The Palomar Health Board of Directors authorized the CEO or her designee to negotiate and execute this agreement on 3/13/2023 [Resolution No. 03.13.23(01)-04]. Amendment is adding diagnostic night shift coverage.
	EXCLUSIVITY	□No X 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 which require Group to recruit and retain the Physicians required to perform the Services as set forth in this Agreement.
	AGREEMENT NOTICED	☐ YES X NO Methodology & Response:
	ALTERNATIVES/IMPACT	N/A
	Duties	 □ Provision for Staff Education □ Provision for Medical Staff Education □ Provision for participation in Quality Improvement □ Provision for participation in budget process development
	COMMENTS	None.
	APPROVALS REQUIRED	X -VP X -CFO □ CEO X -BOD-Committee - Finance; X -BOD



Fiscal Year 2024 Financial Performance

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

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Monthly Management Discussion and Analysis Summary Results of Operations for the Quarter Ended September 30, 2023



The year-to-date net loss from operations was \$11.9 million with a \$24.8 million unfavorable variance. Net loss year-to-date was \$17.2 million and unfavorable variance of \$25.2 million.

EBIDA margin year-to-date EBIDA margin was unfavorable to budget by 10.2%. Additional comments and further analyses are presented in the following sections.

Patient Utilization

Inpatient (IP) Services

For the quarter ended of September, Acute Discharges for the District were (6.1%) unfavorable to budget. Average Daily Census was (6.4%) unfavorable to budget. Adjusted Discharges were 10,005, which was 356 (5.1%) unfavorable to budget. Adjusted Patient Days were 53,616, which was 324 (4.2%) unfavorable to budget.

IP surgeries for PMC Escondido and PMC Poway for the quarter were 1,256 cases (includes CVS), which were 40 cases (3.3%) favorable to budget.

Deliveries for PMC Escondido and PMC Poway for the quarter were 987, which were 140 deliveries (12.4%) unfavorable to budget. For the quarter, Trauma admissions were 396, which was 0.2% favorable to budget.

Outpatient (OP) and Ancillary Services

OP surgeries for PMC Escondido and PMC Poway for the quarter were 762 cases, which were 717 cases 48.5% unfavorable to budget. Outpatient ER visits for the quarter were 19,993 visits (includes trauma), which were 11,579 visits (36.7%) unfavorable to budget. OP registrations for the quarter were 30,457, which were (0.1%) unfavorable to budget. ER admissions for the quarter were 3,245, which were (22.9%) unfavorable to budget.

Monthly Management Discussion and Analysis Summary Results of Operations for the Quarter Ended September 30, 2023



Financial Performance

Operating Revenue

Net Patient Revenue for the quarter was \$194.3 million, which was \$23.0 million (10.6%) unfavorable to budget.

Other Operating Revenue

Other Operating Revenue for the quarter was \$3.5 million, which was \$254 thousand (6.8%) unfavorable to budget.

Operating Expenses

Total Operating Expenses for the quarter were \$209.7 million, which was \$1.5 million (0.7%) favorable to budget.

Salaries, Wages & Contract Labor for the quarter were \$98.3 million, which was \$2.7 million (2.8%) unfavorable to budget.

Benefits for the quarter were \$23.3 million, which was \$1.3 million (5.3%) favorable to budget.

Supplies for the quarter were \$29.5 million, which was \$225 thousand (0.8%) favorable to budget.

Professional Fees and Purchased Services for the quarter were \$37.0 million, which was \$630 thousand (1.7%) unfavorable to budget.

Depreciation & Amortization for the quarter was \$13.0 million, which was \$926 thousand (7.7%) unfavorable to budget.

Other Direct Expenses for the quarter were \$8.7 million, which was \$1.3 million (12.9%) favorable to budget.

Monthly Management Discussion and Analysis Summary Results of Operations for the Quarter Ended September 30, 2023



-Operating Income for the quarter was \$5.3 million, which was \$389 thousand unfavorable to budget due to non-operating depreciation.

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 quarter were consistent with budget. Cash postings were \$185 million. Days in Net A/R are 84, an increase of 2 days from the last quarter.

Revenue Cycle - Key Performance Indicators (KPIs)

Key Performance Indicators (KPI)	January 2022	July 2023	August 2023	September 2023	Та	ırget
Total Net A/R (\$) 1	\$162,042,993	\$184,849,418	\$178,334,100	\$177,503,553		
Net Days in A/R (Days) (3-months)	74.4	83.1	82.0	84.0		
DNFB (Days)	2.5	1.4	1.8	1.5	:	3.0
True Cash Denial (%)	5.0%	5.1%	4.6%	5.4%	6	5.0%

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 decreased in quarter ended September by \$80.3 million due a reduction in accounts payable of \$23.9 million, a reduction of accrued payroll of \$6.9M, and an overall decrease in cash collections.

The Days Cash On Hand ratio decreased by 37.2 days from the prior quarter end to 54.5 days.

Monthly Management Discussion and Analysis - APPENDIX A | PALOMAR 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 Current Procedural Terminology codes (CPT-4) as defined by the American Medical Association or the Healthcare Common Procedure Coding System (HCPCS) as defined by the Medicare Program. Additionally, the International Classification of Disease 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.

Monthly Management Discussion and Analysis - APPENDIX A

Glossary of Terms: Revenue Cycle Key Performance Indicators (Cont'd)

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 precertification 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 precertification 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.



		Year to	Date	
	Actual	Budget	Variance	Prior Year
	Sep-23	Sep-23		Sep-22
Key Volumes				
Discharges - Total	5,900	6,317	(6.6%)	6,181
Acute - General	5,624	5,955	(5.6%)	5,868
Acute Behavioral Health	113	154	(26.6%)	166
Total Acute Discharges	5,737	6,109	(6.1%)	6,034
The Villas at Poway	163	208	(21.6%)	147
Patient Days - Total	35,381	37,781	(6.4%)	35,403
Acute - General	24,547	25,205	(2.6%)	24,807
Acute Behavioral Health	1,024	1,076	(4.8%)	1,550
Total Acute Patient Days	25,571	26,281	(2.7%)	26,357
The Villas at Poway	9,810	11,500	(14.7%)	9,046
Acute Adjusted Discharges	9,827	10,393	(5.5%)	10,307
Total Adjusted Discharges [*]	10,005	10,541	(5.1%)	10,490
Acute Adjusted Patient Days	43,806	44,756	(2.1%)	45,010
Total Adjusted Patient Days [*]	53,616	55,940	(4.2%)	54,056
Acute Average Daily Census	278	286	(2.7%)	286
Total Average Daily Census*	385	411	(6.4%)	385
Surgeries - Total	2,018	2,695	(25.1%)	2,970
Inpatient	1,256	1,216	3.3%	1,440
Outpatient	762	1,479	(48.5%)	1,530
Deliveries	987	1,127	(12.4%)	1,188
ER Visits (Includes Trauma) - Total	23,238	35,781	(35.1%)	33,979
Inpatient	3,245	4,209	(22.9%)	4,195
Outpatient	19,993	31,572	(36.7%)	29,784

^{*} Includes The Villas at Poway



	Year to Date							
	Actual	Budget	Variance	Prior Year				
	Sep-23	Sep-23		Sep-22				
Key Statistics								
Acute Average LOS - Days	6.29	6.34	0.7%	4.37				
Acute - General	4.36	4.23	(3.1%)	4.23				
Acute Behavioral Health	9.06	6.99	(29.7%)	9.34				
Average Observation Hours	34	34	0.0%	32				
Acute Case Mix-Excludes Deliveries	1.77	1.77	(0.3%)	1.58				
Acute Case Mix-Medicare Only	1.70	1.82	(6.7%)	1.80				
Labor Productivity by Hrs	97.9%	100.0%	(2.1%)	102.0%				
Days Cash on Hand	54.5			77.5				
Financial Performance								
Operating Income	(11,879,332)	12,901,847	(24,781,179)	3,464,183				
Net Income	(17,206,206)	7,963,616	(25,169,822)	(1,076,434)				
Oper. Expenses/Adj. Patient Days	3,669	3,507	(4.6%)	3,464				
EBIDA Margin-Excludes PHMG	5.8%	16.0%	(10.2%)	11.2%				
EBIDA-Excludes PHMG	11,455,778	35,348,627	(23,892,849)	22,828,359				

Note: Financial Performance excludes GO Bonds

Income Statement: Quarter Ended September 30, 2023 Excludes PHMG

Actual Budget Variance Variance **Dollars/Adjusted Patient Day** Sep-23 Sep-23 Sep-23 Volume Rate/Eff Variance Actual Budget **Adjusted Patient Days** 53,616 55,940 (2,324)**Adjusted Discharges** 10,005 10,541 (536)**Operating Revenue** 24,321 Gross revenue 1,318,730,507 1,360,525,556 (41,795,049)(56,522,370)14,727,321 24,596 275 Deductions from revenue (1,124,391,192)18,735,423 47,490,637 (28,755,214)(20,971)(20,435)(536)(1,143,126,615)Net patient revenue 194,339,315 217,398,941 (23.059.626)(9.031,733)(14,027,893)3,625 3,886 (262)(253,853)(97,739)65 67 (2) Other operating revenue 3,503,889 3,757,742 (156, 114)197,843,204 (14, 125, 633)3,953 3,690 (263)Total net revenue 221,156,683 (23,313,479)(9,187,846)Operating Expenses Salaries, wages & contract labor 98,273,209 95,557,927 (6,685,189)1,833 1,708 (125)(2,715,282)3,969,907 **Benefits** 23,280,935 24,575,609 1,294,674 1,020,982 273,692 434 439 5 Supplies 29,535,836 29,760,913 225,077 1,236,403 (1,011,326)551 532 (19)Prof fees & purch svcs 36,954,217 36,324,587 (629,630)1,509,087 (2,138,717)689 649 (40)501,740 Depreciation 13,003,136 12,077,172 (925, 964)(1,427,704)243 216 (27)8,675,203 162 178 Other 9,958,628 1,283,425 413,726 869,699 16 209,722,536 3,912 3,723 Total expenses 208,254,836 (1,467,700)8,651,846 (10, 119, 546)(189)Income from operations (11,879,332)12,901,847 (24,781,179)(536,001)(24,245,178)(222)231 (452)Non-operating revenue(expense) Property tax revenues 1 5,875,000 5,875,002 (2)Interest Rate Swap Investment income 2,352,535 4,556,725 2,204,190 Revenue bond interest expense (12,402,130)(11,859,363)(542,767)191,758 Non-operating depreciation (3,256,718)(3,448,476)Other non-operating revenue(expense) (99,751)2,290,415 (2,390,166)Net Income 2 (17,206,206)7,963,615 (25, 169, 821)

5.8%

16.0%

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

EBIDA Margin

(10.2%)

²⁼ Excludes G.O. Bonds income / expense

Income Statement: Current Year vs. Prior Year Excludes PHMG

	Current Year	Prior Year		Variance		Dollars/	Adjusted Patient	Day
	Sep-23	Sep-22	Change	Volume	Rate/Eff	Actual	Budget	Variance
Adjusted Patient Days	53,616	54,056	(440)				-	
Adjusted Discharges	10,005	10,490	(485)					
Operating Revenue								
Gross revenue	1,318,730,507	1,201,500,419	117,230,088	(9,779,861)	127,009,950	24,596	22,227	2,369
Deductions from revenue	(1,124,391,192)	(1,000,620,164)	(123,771,028)	8,144,755	(131,915,783)	(20,971)	(18,511)	(2,460)
Net patient revenue	194,339,315	200,880,255	(6,540,940)	(1,635,106)	(4,905,834)	3,625	3,716	(91)
Other operating revenue	3,503,889	2,291,279	1,212,610	(18,650)	1,231,261	65	42	23
Total net revenue	197,843,204	203,171,534	(5,328,330)	(1,653,757)	(3,674,573)	3,690	3,759	(69)
Operating Expenses								
Salaries, wages & contract labor	98,273,209	98,202,772	(70,437)	799,342	(869,778)	1,833	1,817	(16)
Benefits	23,280,935	21,420,374	(1,860,561)	174,356	(2,034,917)	434	396	(38)
Supplies	29,535,836	27,499,863	(2,035,973)	223,841	(2,259,813)	551	509	(42)
Prof fees & purch svcs	36,954,217	31,453,354	(5,500,863)	256,021	(5,756,884)	689	582	(107)
Depreciation	13,003,136	12,467,125	(536,011)	101,479	(637,490)	243	231	(12)
Other	8,675,203	8,663,863	(11,340)	70,521	(81,862)	162	160	(2)
Total expenses	209,722,536	199,707,351	(10,015,185)	1,625,559	(11,640,744)	3,912	3,694	(217)
Income from operations	(11,879,331)	3,464,183	(15,343,515)	(28,197)	(15,315,317)	(222)	64	(286)
Non-operating revenue(expense)								
Property tax revenues ¹	5,875,000	4,750,000	1,125,000					
Interest Rate Swap	-	-	-					
Investment income	4,556,725	(616,774)	5,173,499					
Revenue bond interest expense	(12,402,130)	(9,691,353)	(2,710,777)					
Non-operating depreciation	(3,256,718)	(1,746,315)	(1,510,403)					
Other non-operating revenue(expense)	(99,751)	2,763,825	(2,863,575)					
Net Income ²	(17,206,205)	(1,076,434)	(16, 129, 772)					

EBIDA Margin

(5.5%)

11.2%

5.8%

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-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	2024
Adjusted Discharges	3,393	3,424	3,188	-	-	-	-	-	-	-	- ··········	-	10,005
,													
Operating Revenue													
Gross revenue	442,758,079	456,484,340	419,488,088	-	-	-	-	-	-	-	-	-	1,318,730,507
Deductions from revenue	(372,333,793)	(392,500,394)	(359,557,005)	-	-	-	-	-	-	-	-	-	(1,124,391,192)
Net patient revenue	70,424,286	63,983,946	59,931,083	-	-	-	-	-	-	-	-	-	194,339,315
Other operating revenue	1,069,946	1,028,345	1,405,599	-	-	-	-	•	-	-	-	-	3,503,889
Total net revenue	71,494,232	65,012,291	61,336,682	-	-	-	-	-	-	-	-	-	197,843,204
Operating Expenses													
Salaries, wages & contract labor	34,305,763	32,704,482	31,262,963	-	-	-	-	-	-	-	-	-	98,273,209
Benefits	9,564,231	7,472,768	6,243,936	-	-	-	-	-	-	-	-	-	23,280,935
Supplies	8,994,530	10,876,665	9,664,641	-	-	-	-	-	-	-	-	-	29,535,836
Prof fees & purch svcs	12,487,577	12,851,342	11,615,298	-	-	-	-	-	-	-	-	-	36,954,217
Depreciation	3,933,889	4,634,232	4,435,015	-	-	-	-	-	-	-	-	-	13,003,136
Other	2,205,082	2,760,571	3,709,550	-	-	-	-	-	-	-	-	-	8,675,203
Total expenses	71,491,072	71,300,060	66,931,403	-	-	-	-	-	-	-	-	-	209,722,536
Income from operations	3,160	(6,287,769)	(5,594,721)	-	-	-	-	-	-	-	-	-	(11,879,331)
Non-operating revenue (expense)												
Property tax revenues 1	1,958,333	1,958,333	1,958,333	-	-	-	-	-	-	-	-	-	5,875,000
Investment Income	1,376,417	1,425,149	1,755,159	-	-	-	-	-	-	-	-	-	4,556,725
Interest Expense	(4,076,719)	(4,214,312)	(4,111,099)	-	-	-	-	-	-	-	-	-	(12,402,130)
Interest Rate Swap	-	-	-	-	-	-	-	-	-	-	-	-	-
Non-operating depreciation	(1,045,581)	(1,103,594)	(1,107,543)	-	-	-	-	-	-	-	-	-	(3,256,718)
Other non-operating revenue(expens	6,742	(198,892)	92,399	-	-	-	-	-	-	-	-	-	(99,751)
Net income ²	(1,777,648)	(8,421,085)	(7,007,473)	-	-	-	-	-	-	-	-	-	(17,206,206)
EBIDA Margin	10.2%	2.4%	4.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	5.8%

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

²⁼ Excludes G.O. Bonds income / expense

Income Statement: 13-Month Trend Excludes PHMG

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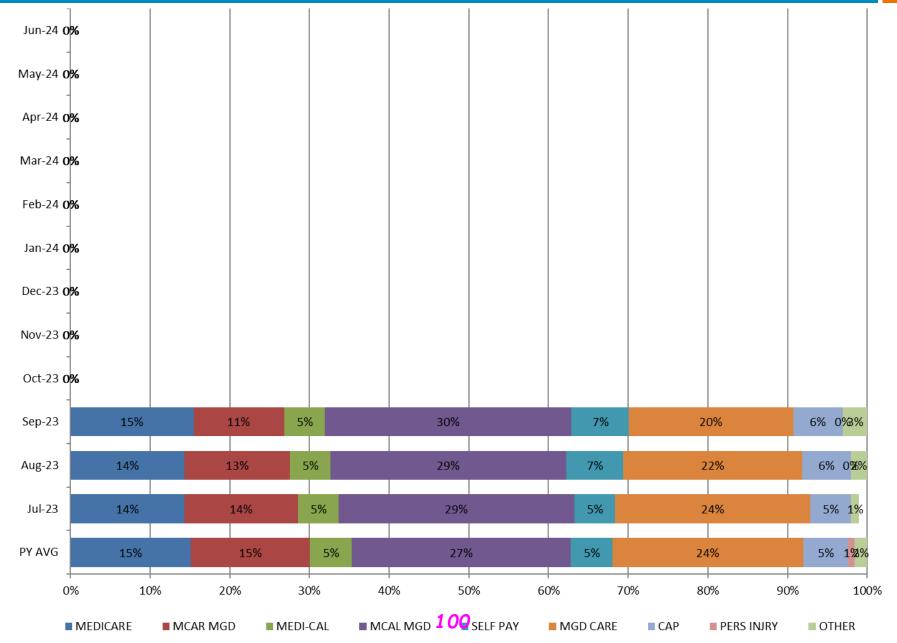
	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23
Adjusted Discharges	3,514	3,664	3,578	3,645	3,554	3,243	3,577	3,349	3,561	3,391	3,393	3,424	3,188
Operating Revenue													
Gross revenue	400,045,463	398,360,268	410,607,111	431,599,958	432,150,986	403,081,594	443,600,042	399,948,109	425,241,602	418,042,260	442,758,079	456,484,340	419,488,088
Deductions from revenue	(333,966,875)	(324,930,831)	(340,408,016)	(361,166,691)	(358,776,424)	(334,505,916)	(370,303,205)	(329,956,915)	(356,617,762)	(352,377,727)	(372,333,793)	(392,500,394)	(359,557,005)
Net patient revenue	66,078,588	73,429,437	70,199,095	70,433,267	73,374,562	68,575,678	73,296,837	69,991,194	68,623,840	65,664,533	70,424,286	63,983,946	59,931,083
Other operating revenue	861,211	724,955	847,263	1,093,524	1,101,428	1,110,469	930,396	919,288	1,504,750	1,706,452	1,069,946	1,028,345	1,405,599
Total net revenue	66,939,799	74,154,392	71,046,358	71,526,791	74,475,990	69,686,147	74,227,233	70,910,482	70,128,590	67,370,985	71,494,232	65,012,291	61,336,682
Operating Expenses													
Salaries, wages & contract labor	32,924,892	33,775,849	34,989,349	33,013,527	35,061,254	31,394,286	36,067,614	34,108,438	33,443,819	33,649,709	34,305,763	32,704,482	31,262,963
Benefits	7,714,185	7,659,670	7,740,593	9,725,899	7,884,855	8,438,285	6,853,720	7,737,750	5,557,296	7,101,550	9,564,231	7,472,768	6,243,936
Supplies	9,540,971	10,911,278	9,664,535	10,502,911	10,644,566	9,956,573	11,110,027	9,181,613	9,659,172	10,259,179	8,994,530	10,876,665	9,664,641
Prof fees & purch svcs	10,136,393	12,681,563	11,523,340	11,459,778	13,010,935	12,541,818	12,017,813	12,609,433	12,560,771	14,850,803	12,487,577	12,851,342	11,615,298
Depreciation	4,081,665	3,872,660	3,871,656	3,791,637	3,823,741	3,835,247	3,871,878	3,841,392	4,383,355	11,588,244	3,933,889	4,634,232	4,435,015
Other	1,603,481	4,226,752	3,156,513	2,588,646	3,032,621	3,400,553	3,606,062	3,309,404	3,143,614	(4,981,386)	2,205,082	2,760,571	3,709,550
Total expenses	66,001,587	73,127,772	70,945,986	71,082,398	73,457,972	69,566,762	73,527,114	70,788,030	68,748,027	72,468,099	71,491,072	71,300,060	66,931,403
Income from operations	938,212	1,026,620	100,372	444,393	1,018,018	119,385	700,119	122,452	1,380,563	(5,097,114)	3,160	(6,287,769)	(5,594,721)
Non-operating revenue (expense)													
Property tax revenues 1	1,583,333	1,583,333	2,041,667	1,675,000	1,675,000	1,675,000	1,675,000	1,675,000	5,133,344	99,190	1,958,333	1,958,333	1,958,333
Investment Income	(906,583)	292,790	722,703	1,282,479	1,152,256	645,695	1,198,662	1,474,276	844,477	4,611,773	1,376,417	1,425,149	1,755,159
Interest Expense	(3,214,888)	(3,075,712)	(6,786,342)	(4,059,607)	(4,038,845)	(4,033,112)	(4,119,374)	(4,010,334)	(4,113,718)	(4,844,468)	(4,076,719)	(4,214,312)	(4,111,099)
Interest Rate Swap	-	-	5,324,960	-	-	-	-	-	-	-	-	-	-
Non-operating depreciation	(582,105)	(582,105)	(582,105)	(582,105)	(582,105)	(582,105)	(582,105)	(582,105)	(582,105)	(855,877)	(1,045,581)	(1,103,594)	(1,107,543)
Other non-operating revenue(exper	1,144,714	775,557	818,344	647,000	2,106,997	591,385	357,472	(241,823)	(1,914,314)	5,376,753	6,742	(198,892)	92,399
Net income ²	(1,037,317)	20,483	1,639,599	(592,840)	1,331,321	(1,583,752)	(770,226)	(1,562,534)	748,247	(709,743)	(1,777,648)	(8,421,085)	(7,007,472)
EBIDA Margin	10.2%	10.2%	10.6%	11.0%	13.1%	9.9%	10.5%	9.7%	14.0%	24.6%	10.2%	2.4%	4.3%

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

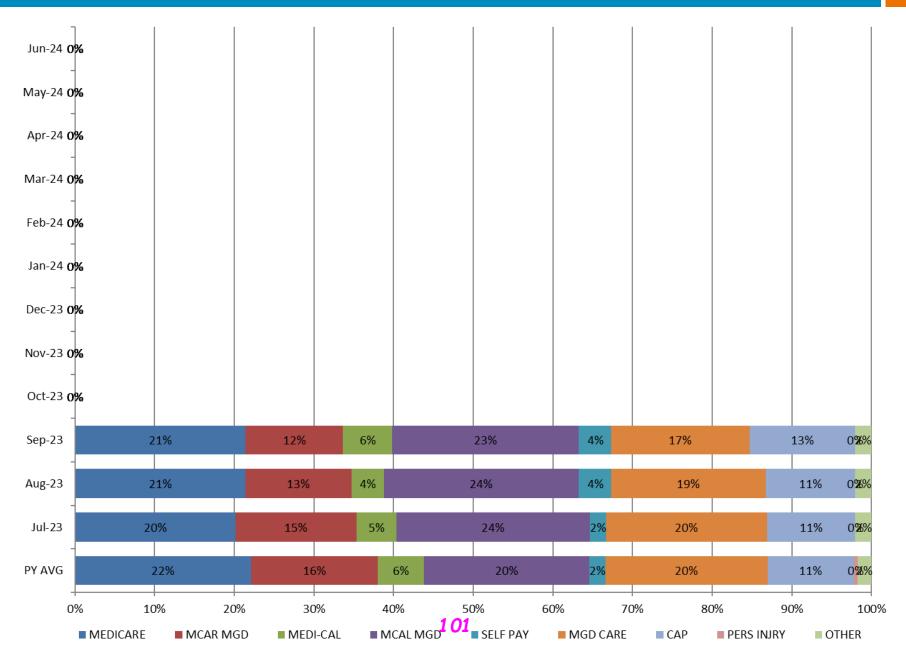
²⁼ Excludes G.O. Bonds income / expense

Payor Mix: Emergency Department





Payor Mix: Gross Revenue



Statement of Net Position: Excludes G.O. Bonds Excludes PHMG

Aug-23

10,426,818

6,495,823

120,421,214

137,343,855

Jun-23

64,696,934

119,515,170

197,890,158

13,678,054

Sep-23

610,238

110,503,682

117,609,743

6,495,823

Assets
Current Assets

Investments
Board Designated

Cash and cash equivalents

Total cash, cash equivalents & investments



Total assets and deferred outflow of			
refunding of debt	51,691,911	51,924,720	52,390,338
Deferred outflow of resources-loss on			
Total assets	1,944,553,416	1,963,510,579	1,988,124,437
Total non-current assets	1,460,444,110	1,472,078,655	1,449,765,200
Other non-current assets	46,392,016	47,375,993	47,276,630
Prepaid debt insurance costs	7,532,277	7,558,316	7,610,393
Investment related companies	6,033,974	5,389,229	5,427,952
Right of Use Assets	282,319,980	294,480,435	275,542,766
Net property, plant & equipment	974,472,715	974,171,107	972,226,134
Construction in process	100,118,517	96,628,679	94,719,898
Accumulated depreciation	(634,928,705)	(631,497,705)	(624,985,735)
Property, plant & equipment	1,509,282,904	1,509,040,133	1,502,491,970
Total restricted assets	143,693,148	143,103,575	141,681,325
Restricted other	356,386	356,386	356,226
Non-Current Assets Restricted assets	143,336,762	142,747,189	141,325,098
	.0.,200,000	.52, .62,52 :	300,000,201
Total current assets	484,109,306	491,431,924	538,359,237
Other	63,437,727	60,895,447	58,923,618
Est. third party settlements	96,658,546	82,786,470	71,203,136
Inventories Prepaid expenses	12,628,603 16,271,135	12,787,701 19,284,352	12,821,349 12,445,827
Net accounts receivable	177,503,552	178,334,099	185,075,148
Allowance on accounts	(295,152,669)	(299,028,575)	(304,856,426)
Patient Accounts Receivable	472,656,222	477,362,675	489,931,574

Liabilities	Sep-23	Aug-23	Jun-23	
Current Liabilities				
Accounts payable	47,130,883	42,705,345	71,057,718	
Accrued payroll	25,823,872	31,373,074	28,007,606	
Accrued PTO	24,766,960	24,651,369	25,380,895	
Accrued interest payable	18,041,012	15,158,719	9,200,926	
Current portion of bonds	8,110,000	8,110,000	8,110,000	
Current portion of lease liab	13,552,125	15,477,015	10,965,390	
Est. third party settlements	15,470,193	13,868,899	15,470,193	
Other current liabilities	103,777,947	105,279,553	108,925,212	
Total current liabilities	256,672,993	256,623,974	277,117,938	
Long Term Liabilities				
Other LT liabilities	2,871,051	2,892,956	2,971,429	
Bonds & contracts payable	740,546,572	740,784,415	741,260,101	
Lease liabilities	288,503,251	297,748,924	282,271,128	
Total long term liabilities	1,031,920,874	1,041,426,295	1,026,502,657	
Total liabilities	1 200 502 000	1 200 050 200	1 202 620 505	
Total Habilities	1,288,593,868	1,298,050,268	1,303,620,595	
Deferred inflow of resources-				
unearned revenue	6,924,505	6,954,189	6,763,558	
Total liabilities and deferred inflow				
of resources	1,295,518,373	1,305,004,458	1,310,384,153	
Net Position				
Unrestricted	700,370,568	710,074,456	729,774,395	
Restricted for other purpose	356,386	356,386	356,226	
Total net position	700,726,955	710,430,842	730,130,621	
Total fiet position	700,720,333	710,430,042	750,130,021	
Total liabilities, deferred inflow of				
resources and net position	1,996,245,327	2,015,435,299	2,040,514,774	

Statement of Net Position: Includes G.O. Bonds **Excludes PHMG**

Assets	Sep-23	Aug-23	Jun-23	Liabilities	Sep-23
Current Assets				Current Liabilities	
Cash and cash equivalents	610,238	10,426,818	64,696,934	Accounts payable	47,130,8
Investments	110,503,682	120,421,214	119,515,170	Accrued payroll	25,823,8
Board Designated	6,495,823	6,495,823	13,678,054	Accrued PTO	24,766,9
Total cash, cash equivalents & investments	117,609,743	137,343,855	197,890,158	Accrued interest payable	23,806,8
				Current portion of bonds	17,625,0
Patient Accounts Receivable	472,656,222	477,362,675	489,931,574	Current portion of lease liab	13,552,1
Allowance on accounts	(295,152,669)	(299,028,575)	(304,856,426)	Est. third party settlements	15,470,1
Net accounts receivable	177,503,552	178,334,099	185,075,148	Other current liabilities	36,588,7
				Total current liabilities	204,764,6
Inventories	12,628,603	12,787,701	12,821,349		
Prepaid expenses	16,271,136	19,284,353	12,445,828	Long Term Liabilities	
Est. third party settlements	96,658,546	82,786,470	71,203,136	Other LT liabilities	2,871,0
Other	76,472,650	69,503,824	59,335,542	Bonds & contracts payable	1,377,798,0
Total current assets	497,144,229	500,040,302	538,771,161	Lease liabilities	288,503,2
				Total long term liabilities	1,669,172,3
Non-Current Assets					
Restricted assets	177,627,048	176,740,004	203,456,651	Total liabilities	1,873,937,0
Restricted other	356,386	356,386	356,226		
Total restricted assets	177,983,434	177,096,390	203,812,877	Deferred inflow of resources-	
				unearned revenue	74,113,7
Property, plant & equipment	1,509,282,904	1,509,040,133	1,502,491,970	Total liabilities and deferred inflow	
Accumulated depreciation	(634,928,705)	(631,497,705)	(624,985,735)	of resources	1,948,050,7
Construction in process	100,118,517	96,628,679	94,719,898		
Net property, plant & equipment	974,472,715	974,171,107	972,226,134	Net Position	
				Unrestricted	99,335,1
Right of Use Assets	282,319,980	294,480,435	275,542,766	Restricted for other purpose	356,3
				Total net position	99,691,5
Investment related companies	6,033,974	5,389,229	5,427,952		
Prepaid debt insurance and other costs	8,953,507	8,992,458	9,070,918		
Other non-current assets	46,392,016	47,375,993	47,276,630		
Total non-current assets	1,496,155,627	1,507,505,613	1,513,357,277	Total liabilities, deferred inflow of	
				resources and net position	2,047,742,2
Total assets	1,993,299,856	2,007,545,915	2,052,128,438	·	
Deferred outflow of resources-loss on					
refunding of debt	54,442,421	54,693,090	55,194,429		
Total assets and deferred outflow of					
resources	2,047,742,276	2,062,239,006	2,107,3 <mark>2</mark> 2 <mark>8</mark> 38		

Liabilities	Sep-23	Aug-23	Jun-23
Current Liabilities			
Accounts payable	47,130,883	42,705,345	71,060,218
Accrued payroll	25,823,872	31,373,074	28,007,606
Accrued PTO	24,766,960	24,651,369	25,380,895
Accrued interest payable	23,806,880	18,041,652	27,289,238
Current portion of bonds	17,625,044	17,625,044	16,903,916
Current portion of lease liab	13,552,125	15,477,015	10,965,390
Est. third party settlements	15,470,193	13,868,899	15,470,193
Other current liabilities	36,588,718	61,663,381	65,286,498
Total current liabilities	204,764,676	225,405,780	260,363,951
Long Term Liabilities			
Other LT liabilities	2,871,052	2,892,957	2,971,430
Bonds & contracts payable	1,377,798,053	1,377,938,958	1,387,561,498
Lease liabilities	288,503,251	297,748,924	282,271,128
Total long term liabilities	1,669,172,356	1,678,580,839	1,672,804,055
Total liabilities	1,873,937,032	1,903,986,619	1,933,168,006
Deferred inflow of resources-			
unearned revenue	74,113,734	50,570,361	50,402,272
Total liabilities and deferred inflow			
of resources	1,948,050,766	1,954,556,980	1,983,570,279
Net Position			
Unrestricted	99,335,124	107,325,640	123,396,362
Restricted for other purpose	356,386	356,386	356,226
Total net position	99,691,510	107,682,026	123,752,588
Total liabilities, deferred inflow of			
resources and net position	2,047,742,276	2,062,239,006	2,107,322,867

Cash Flow Statement Excludes PHMG



	Sep-23	YTD
CASH FLOWS FROM OPERATING ACTIVITIES:		
Income (Loss) from operations	(5,594,721)	(11,879,330)
Adjustments to reconcile change in net assets to net cash		
provided from operating activities:		
Depreciation Expense	4,435,015	13,003,136
Provision for bad debts	10,006,887	22,949,513
Changes in operating assets and liabilities:		
Patient accounts receivable	(9,176,340)	(15,377,918)
Property Tax and other receivables	(765,644)	430,853
Inventories	159,098	192,746
Prepaid expenses and other current assets	1,834,382	(4,320,286)
Accounts payable	4,425,538	(23,929,335)
Accrued compensation	(5,433,612)	(4,478,929)
Estimated settlement amounts due third-party payors	(12,270,782)	(25,455,410)
Other liabilities	134,401	(4,182,517)
Net cash provided from (used by) operating activities	(12,245,778)	(53,047,477)
CASH FLOWS FROM INVESTING ACTIVITIES:		
Net (purchases) sales of investments	9,030,488	42,023,162
Income (Loss) on investments	1,895,842	5,186,741
Investment in affiliates	(2,965,685)	(10,363,419)
Net cash provided from (used by) investing activities	7,960,645	36,846,484
CASH FLOWS FROM NON-CAPITAL FINANCING ACTIVITIES:		
Receipt of G.O. Bond Taxes	156,789	1,127,001
Receipt of District Taxes	181,696	805,749
Net cash provided from non-capital financing activities	338,485	1,932,750
CASH FLOWS FROM CAPITAL AND RELATED FINANCING ACTIVITIES:		
Proceeds on asset sale	0	6,000
Acquisition of property plant and equipment	(3,732,609)	(12,189,328)
G.O. Bond Interest paid	0	(20,804,366)
ROU Interest paid	(1,090,497)	(3,340,328)
Payments of Long Term Debt	0	(10,812,307)
Payments of Long Term Lease Liabilities	(1,046,826)	(2,678,124)
Net cash provided from (used by) capital and related financing activities	(5,869,932)	(49,818,453)
NET INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS	(9,816,580)	(64,086,696)
CASH AND CASH EQUIVALENTS - Beginning of period	10,426,818	64,696,934
CASH AND CASH EQUIVALENTS - End of period	610,238	610,238
	,30	

Condensed Combining Statement of Net Position



CONDENSED COMBINING STATEMENT OF NET POSITION SEPTEMBER 30, 2023

_	PH	PHMG	PAC	Eliminations	Total
ASSETS					
Current assets	497,144,229	51,670,044	5,669,946	(41,806,252)	512,677,967
Capital assets - net	974,472,715	7,091,396	-	-	981,564,111
Right of use assets - net	282,319,980	32,377,064	-	(15,553,004)	299,144,040
Non-current assets	239,362,931	4,839,853	-	(5,433,813)	238,768,971
Total assets	1,993,299,855	95,978,357	5,669,946	(62,793,069)	2,032,155,089
Deferred outflow of resources	54,442,421	-	-	-	54,442,421
TOTAL ASSETS AND DEFERRED OUTFLOW					
OF RESOURCES	2,047,742,276	95,978,357	5,669,946	(62,793,069)	2,086,597,510
LIABILITIES AND NET POSITION					
Current liabilities	204,764,675	63,724,869	1,777,544	(44,722,309)	225,544,779
Long-term liabilities	1,380,669,105	4,233,813	-	(4,233,813)	1,380,669,105
Right of use lease liabilities	288,503,251	28,234,151	-	(13,387,524)	303,349,878
Total liabilities	1,873,937,031	96,192,833	1,777,544	(62,343,646)	1,909,563,761
Deferred inflow of resources - deferred revenue	74,113,735	-	-	-	74,113,735
Total liabilities and deferred inflow of resources	1,948,050,766	96,192,833	1,777,544	(62,343,646)	1,983,677,496
Invested in capital assets - net of related debt	(255,560,271)	5,729,414	_	-	(249,830,857)
Restricted	29,593,536	-	-	-	29,593,536
Unrestricted	325,658,245	(5,943,890)	3,892,403	(449,423)	323,157,335
Total net position	99,691,510	(214,476)	3,892,403	(449,423)	102,920,014
TOTAL LIABILITIES, DEFERRED INFLOW OF					
RESOURCES, AND NET POSITION	2,047,742,276	95,978,357	5,669,946	(62,793,069)	2,086,597,510

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 THREE MONTHS ENDED SEPTEMBER 30, 2023

					YTD
	PH	PHMG	PAC	Elimination	Consolidated
OPERATING REVENUE:					
Net patient service revenue	180,519,218	24,837,264	-	_	205,356,482
Shared risk revenue	13,820,097	14,096,498	_	(1,433,780)	26,482,815
Other revenue	3,503,889	2,792,093	1,677,455	(124,035)	7,849,402
PH Program revenue	- -	3,740,095	-	(3,740,095)	-
Total operating revenue	197,843,204	45,465,950	1,677,455	(5,297,910)	239,688,699
OPERATING EXPENSES	196,719,400	53,762,231	680,785	(6,818,554)	244,343,862
DEPRECIATION AND AMORTIZATION	13,003,136	906,195		-	13,909,331
Total operating expenses	209,722,536	54,668,426	680,785	(6,818,554)	258,253,193
INCOME (LOSS) FROM OPERATIONS	(11,879,332)	(9,202,476)	996,670	1,520,645	(18,564,494)
NON-OPERATING INCOME (EXPENSE):					
Investment income	5,186,740	442	=	_	5,187,182
Interest expense	(21,442,055)	(48,017)	-	48,017	(21,442,055)
Property tax revenue	19,624,999	-	-	-	19,624,999
Other - net	(3,305,747)	166,798	-	(1,568,662)	(4,707,611)
Total non-operating expense - net	63,937	119,223	-	(1,520,645)	(1,337,485)
CHANGE IN NET POSITION	(11,815,395)	(9,083,254)	996,670	-	(19,901,979)
Interfund - PHMG	(12,080,496)	12,008,428	-		(72,068)
NET POSITION - Beginning of year	123,587,401	(3,139,650)	2,895,733	(449,423)	122,894,061
NET POSITION - Year to date	99,691,510	(214,476)	3,892,403	(449,423)	102,920,014

EBIDA EBIDA Margin 34,155,533 14.3%

(4) S&P 500



Investment Fund - Quarter Ended September 30, 2023 Yield Analysis

Investment Account:	% of Portfolio at 9/30/2023	Maturity Date	Yield	Benchmark	_	Actual to Benchmark Variance	Total Yield
Fidelity-Institutional Portfolio Treasury Fund	21.02%	Demand	5.26%	5.46%	(1)	(0.20%)	1.11%
State Treasurer Local Agency Investment Fund	61.50%	Demand	3.59%	3.42%	(2)	0.17%	2.21%
Morgan Stanley	14.63%	Various	0.23%	0.21% (3.27%)	(3) (4)	0.02% 3.50%	0.03%
Chandler Asset Management	1.97%	Various	(0.62%)	0.21% (3.27%)	(3) (4)	(0.83%) 2.65%	(0.01%)
Goldman Sachs Asset Management	0.87%	Various	4.97%	5.46%	(1)	(0.49%)	0.04%
Total:	100.00%					TOTAL YIELD:	3.38%
(1) Approximate average of 90 day T-E	Bills					PRIOR QUARTER:	3.29%
(2) LAIF annual average return based(3) BC Intermediate Government Cred						PRIOR YEAR:	(0.24%)

ADDENDUM C

RESOLUTION NO. 11.13.23(01)-17

RESOLUTION OF THE BOARD OF DIRECTORS OF PALOMAR HEALTH AUTHORIZING THE EXECUTIVE TEAM TO IDENTIFY A POTENTIAL MANAGEMENT SERVICES COMPANY AND NEGOTIATE A PROPOSED MANAGEMENT SERVICES AGREEMENT

WHEREAS, the Board of Directors of Palomar Health (the "Board") seeks opportunities to enhance the financial condition of Palomar Health, including through partnerships and affiliations;

WHEREAS, the Board seeks opportunities to enhance the level of care provided by Palomar Health, including through expanded services and investments in health care personnel, property, and management;

WHEREAS, the Board seeks to explore opportunities for management services to ensure and promote the mission, functions and financial stability of the District, in compliance with Cal. Health & Safety Code § 32121;

WHEREAS, the Board wishes to delegate such responsibility to the District's Chief Executive Officer ("CEO"), and such subordinate officers as she may designate, in accordance with the District's Bylaws Article VI.A & B., as well as Cal. Health & Safety Code § 32121(g)-(h), (k), which imbues the District with broad authority to "employ any officers and employees" "necessary to carry on properly the business of the district," and "prescribe the duties and powers" of such officers and employees as necessary "[t]o do any and all such other acts and things necessary to carry out [Division 23 of the Health & Safety Code concerning hospital districts]";

WHEREAS, following negotiation the Board retains ultimate authority to approve any proposed management services agreement;

NOW, THEREFORE, IT IS HEREBY RESOLVED that the Board:

- 1. Delegates to the CEO and her designees the authority to identify candidates to enter into a proposed Management Services Agreement;
- Delegates to the CEO and her designees the authority to negotiate reasonable terms for the Management Services Agreement, in accordance with all applicable law, and subject to the approval of the Board; and
- 3. Commands the CEO, following any such identification and negotiation, to present her findings and recommendation to the Board, as required by the Ralph M. Brown Act, the Health & Safety Code, and all other applicable law;

PASSED AND ADOPTED by the Board of Directors of Palomar Health held on November 13, 2023, by the following vote:

AYES:

NAYS:

ABSENT:
ABSTAINING:

DATED: November 13, 2023

APPROVED:	ATTESTED:
Linda Greer, RN, Chairperson	Terry Corrales, RN, Secretary
Board of Directors	Board of Directors
Palomar Health	Palomar Health

ADDENDUM D



To: Board of Directors

From: Michael Pacheco - Director, Board Audit & Compliance Committee

Date: Monday, November 13, 2023

Re: Board Audit & Compliance Committee Meeting, October 17, 2023

BOARD MEMBER ATTENDANCE: Directors Mike Pacheco, Laurie Edwards-Tate, and Linda Greer

INFORMATIONAL ITEMS

• Lachlan Macleary, MD: The committee appointed physician representative has accepted a new position out of state. Dr. Macleary has been a member of the Board Audit and Compliance Committee since 2004.

ACTION ITEMS

- Approval of Board Audit & Compliance Committee minutes, August 15, 2023: The voting members reviewed and approved the Board Audit & Compliance Committee minutes from August 15, 2023
- Review/Adopt Quarterly Meeting Schedule for 2024: The voting members reviewed and approved a quarterly meeting schedule for 2024



To: Palomar Health Board of Directors

From: Terry Corrales, Chair

Palomar Health Board of Directors Community Relations Committee

Date: November 13, 2023

Subject: Committee Meeting Summary – October 4, 2023

BOARD MEMBER ATTENDANCE: Directors Corrales, Pacheco and President and CEO Hansen

INFORMATIONAL ITEMS:

Community Initiative

Program updates provided from Forensic Health and Trauma Recover Center, First Steps Grant and Healthy Development Services provided updates outlining 2023 accomplishments.

Patient Experience Focus Group Update

Patient Experience Focus Group (PEFG) update provided with roll out of lobby navigator, emergency room care plan passport and communication response plan.

Foundation Update

The Foundation provided a handout for an in depth review of 2023 accomplishments.

Marketing Update

Marketing update provided an update highlighting 2023 efforts to date.

ACTION ITEMS:

 Board Community Relations Committee Minutes – Wednesday, June 7, 2023: The minutes were approved aspresented



To: Board of Directors

From: Laura Barry, Chair, Board Finance Committee

Date: November 13, 2023

Re: Board Finance Committee, Wednesday, October 25, 2023, Meeting Summary

BOARD MEMBER ATTENDANCE: Directors Barry & Pacheco

ACTION ITEMS:

• Minutes, Wednesday, May 31, 2023, Board Finance Committee Meeting: Reviewed and approved the draft minutes from the Wednesday, May 31, 2023, Board Finance Committee meeting.

- Minutes, Wednesday, July 26, 2023, Board Finance Committee Meeting: Reviewed and approved the draft minutes from the Wednesday, July 26, 2023, Board Finance Committee meeting.
- Minutes, Wednesday, August 23, 2023, Board Finance Committee Meeting: Reviewed and approved the draft minutes from the Wednesday, August 23, 2023, 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.
- September 2023 & YTD FY2024 Financial Report¹ Reviewed the Financial Reporting Packet and recommended approval of the September 2023 & YTD FY2024 financial report, which reflected YTD an operating loss of \$11.9M, unfavorable to budget by \$24.8M and to September 2022 by \$15.3M; and a YTD net loss of \$17.2M, unfavorable to budget by \$25.2M, and to September 2022 by \$16.1M.

¹ Backup documentation may be reviewed elsewhere in the agenda packet



To: Board of Directors

From: Jeffrey Griffith, EMT-P, Chair, Board Governance Committee

Date: November 13, 2023

Re: Board Governance Committee, October 5, 2023, Meeting Summary

BOARD MEMBER ATTENDANCE: Directors Jeff Griffith and Laura Barry

ACTION/INFORMATIONAL ITEMS

- Board Governance Committee Meeting minutes, August 3, 2023: The Governance Committee reviewed and approved the minutes from August 3, 2023
- Bylaws of Palomar Health Discussion of Robert's Rules: The Governance Committee reviewed and recommend no changes to the Bylaws of Palomar Health
- **Disruptive Meeting Protocol:** The Governance Committee discussed the subject. Administration will post the public comments policy before regular board meetings
- Terms of Officers: The Governance Committee discussed the subject. No action was taken.
- **AB 1234 Ethics Training:** As of December 31, 2023, the Fair Political Practices Commission (FPPC) will no longer offer AB 1234 Local Ethics Training. The Governance Committee and Administration are reviewing options for future training. No action was taken.
- Board Member Onboarding: The Governance Committee recommends adoption of the Board Member Onboarding Quick Start Guide as an addendum to the Code of Conduct policy. Item will be added to the November 13th Board of Directors meeting agenda for approval



To: Board of Directors

From: Linda Greer, R.N., Chair Board Quality Review Committee

Date: November 13, 2023

Re: Wednesday, October 25, 2023 Board Quality Review Committee – Meeting Summary

Board Committee Member Attendance: Directors: Greer, Corrales and Barry. Medical Staff: Goldsworthy & Nguyen

Action Items:

Approval of Board Quality Review Committee September 27, 2023, Meeting Minutes

• The BQRC meeting minutes from September 27, 2023, were approved.

Approval of Contracted Services; Advantage Ambulance, Alhiser Comer, Associated Regional & University Pathologists (ARUP) Lab, California Transplant Service, R. Bravo Intraoperative Monitoring Services

• The contracted services were approved.

Approval of the Quality Assessment Performance Improvement (QAPI) and Patient Safety Plan

The Quality Assessment Performance Improvement (QAPI) and Patient Safety Plan was approved.

STANDING ITEMS:

Medical Executive Committee (MEC)/Quality Management Committee (QMC) Update

• Mark Goldsworthy, MD, and Andrew Nguyen, MD, shared an update with the committee.

NEW BUSINESS:

Radiology & Nuclear Medicine Medical Staff Annual Report

Charles McGraw, MD, Medical Director, shared an update with the committee.

Behavioral Health Services Annual Report

• Don Myers, Behavioral Health Services Director, shared an update with the committee.

Perioperative Services (includes Endoscopy) Annual Report

Bruce Grendell, Sr. Director of Perioperative Services, shared an update with the committee.

Dietary Services (Food & Nutrition Services) Annual Report

Russell Riehl, Vice President of Operational Support Services, shared an update with the committee.



Nursing Services Annual Report

Mel Russell, Chief Nurse Executive, shared an update with the committee.

Infection Prevention & Control Update (Hand Hygiene)

 Valerie Martinez, Sr. Director, Quality/Patient Safety & Infection Prevention, shared an update with the committee.

Annual Board Quality Review Committee (BQRC) Assessment

• The Committee Chair acknowledged the Committee for the work and information provided all year long.