

Board of Directors Meeting Agenda Packet

February 12, 2024



Board of Directors

Jeffrey D. Griffith, EMT-P, Chair Michael Pacheco, Vice Chair Laura Barry, Treasurer Theresa Corrales, RN, Secretary John Clark, Director Laurie Edwards-Tate, MS, Director Linda Greer, RN, 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, February 9, 2024



BOARD OF DIRECTORS

MEETING AGENDA

Monday, February 12, 2024 6:30 p.m.

PLEASE SEE PAGE 3 FOR MEETING LOCATION

	The Board may take action on any of the items list		ı,		Form A	
	including items specifically labeled "Informational Only"				Page	Target
CALL	TO ORDER			Į.		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. Patient Experience Moment			5		7:10
5.	APPROVAL OF MINUTES (ADD A)			5		7:15
	a. Board of Directors Meeting – Monday, January 8, 2024 (Pp 12-18)					
	b. Board of Directors Special Closed Session Meeting – Monday, January	/ 8, 2024 <mark>(P</mark>	p 19-20)			
6.	APPROVAL OF AGENDA to accept the Consent Items as listed (ADD B)					7:20
	a. Palomar Medical Center Escondido Medical Staff Credentialing and Reappointments (Pp 21-24)				2	
	b. Palomar Medical Center Poway Medical Staff Credentialing and Reappointments (Pp 25-46)				3	
	c. Palomar Medical Centers Escondido and Poway Medical Staff Department Rules and Regulations (Redline Pp 47-50, Clean Pp 51-54)				4	
	d Palomar Medical Center Escondido Radiation Oncology Clinical Privileges					
	(Redline Pp 55-59, Clean Pp 60-64)				5	
	e. Executed Budgeted Routine Physician Agreements (<i>Pp 65-78</i>)				6	
					7	
7.	REPORTS – Informational Only					
	a. Medical Staff					
	I. Palomar Medical Center Escondido – Kanchan Koirala, MD			5		7:25
	II. Palomar Medical Center Poway – Sam Filiciotto, MD			5		7:30
	b. Administration					7.05
	I. President and CEO – Diane Hansen			5 5		7:35 7:40
_						
8.	APPROVAL of BYLAWS, CHARTERS, RESOLUTIONS, and OTHER ACTION			5		7:45
	Agenda Item	nittee or ept.	Action			

	a.	Charter of the Quality Review Committee of the Palomar Health Board of Directors (Redline Pp 94-98, Clean Pp 99-101)	Quality Review	Review/Approve		8	
	b.	Charter of the Strategic and Facilities Planning Committee of the Palomar Health Board of Directors (Redline Pp 102-105, Clean Pp 106-109)	Strategic/ Facilities Planning	Review/Approve		9	
	C.	Charter of the Governance Committee of the Palomar Health Board of Directors (Redline Pp 110-113, Clean Pp 114-116)	Governance	Review/Approve		10	
	d.	Conflict of Interest Code, Policy 21800 (Redline Pp 117-119, Clean Pp 120-122)	Governance	Review/Approve		11	
9.	сомм	ITTEE REPORTS – Informational Only (ADD D)			5		7:50
	a.	Audit & Compliance Committee – Michael Pacheco, Committee	ee Chair <i>(No meeti</i>	ng in January)			
	b. Community Relations Committee – Terry Corrales, Committee Chair (No meeting in January)			g in January)			
	c. Finance Committee – Laura Barry, Committee Chair (Pp 123-124)						
	d. Governance Committee – Jeff Griffith, Committee Chair (<i>Pp 125</i>)						
	e. Human Resources Committee – Terry Corrales, Committee Chair (No meeting in January)			January)			
	f. Quality Review Committee – Linda Greer, Committee Chair (<i>Pp 126-127</i>)						
	g.	Strategic & Facilities Planning Committee – Michael Pacheco,	Committee Chair	'Pp 128)			
FINA	L ADJOUI	RNMENT					7:50

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

¹ 3 minutes allowed per speaker. For further details, see Request for Public Comment Process and Policy on page 4 of agenda.



Board of Directors Meeting Location Options

Palomar Medical Center Escondido 1st Floor Conference Room 2185 Citracado Parkway, 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: 277 524 122 999

Passcode: mKfVNs

or

Dial in using your phone at 929.352.2216; Access Code: 365 445 192#1

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

3610 Rice Street, Lihue, HI, 96766

 An elected member of the Board of Directors will be attending the meeting virtually from these locations

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



DocID: 21790 9

Revision:

Official Status:

Applies to Facilities: **Applies to Departments:** All Palomar Health Facilities **Board of Directors**

Source: Administrative **Board of Directors**

Policy: Public Comments and Attendance at Public Board Meetings

I. PURPOSE:

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

II. DEFINITIONS:

A. None defined.

III. TEXT / STANDARDS OF PRACTICE:

- A. There will be one-time period allotted for public comment at the start of the public meeting. Should the chair determine that further public comment is required during a public meeting, the chair can call for such additional public comment immediately prior to the adjournment of the public meeting. Members of the public who wish to address the Board are asked to complete a Request for Public Comment form and submit to the Board Assistant prior to or during the meeting. The information requested shall be limited to name, address, phone number and subject, however, the requesting public member shall submit the requested information voluntarily. It will not be a condition of speaking.
- B. Should Board action be requested, it is encouraged that the public requestor include the request on the Request for Public Comment as well. Any member of the public who is speaking is encouraged to submit written copies of the presentation.
- C. The subject matter of any speaker must be germane to Palomar Health's jurisdiction.
- D. Based solely on the number of speaking requests, the Board will set the time allowed for each speaker prior to the public sections of the meeting, but usually will not exceed 3 minutes per speaker, with a cumulative total of thirty minutes.
- E. Questions or comments will be entertained during the "Public Comments" section on the agenda. All public comments will be limited to the designated times, including at all board meetings, committee meetings and board workshops.
- F. All voting and non-voting members of a Board committee will be seated at the table. Name placards will be created as placeholders for those seats for Board members, committee members, staff, and scribes. Any other attendees, staff or public, are welcome to sit at seats that do not have name placards, as well as on any other chairs in the room. For Palomar Health Board meetings, members of the public will sit in a seating area designated for the public.
- G. In the event of a disturbance that is sufficient to impede the proceedings, all persons may be excluded with the exception of newspaper personnel who were not involved in the disturbance in question.
- H. The public shall be afforded those rights listed below (Government Code Section 54953 and 54954).
 - 1. To receive appropriate notice of meetings:
 - 2. To attend with no pre-conditions to attendance:
 - 3. To testify within reasonable limits prior to ordering consideration of the subject in question;
 - 4. To know the result of any ballots cast:
 - 5. To broadcast or record proceedings (conditional on lack of disruption to meeting);
 - 6. To review recordings of meetings within thirty days of recording; minutes to be Board approved before release,
 - 7. To publicly criticize Palomar Health or the Board; and
 - 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.

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.



Palomar Medical Center Escondido Medical Staff Credentialing Recommendations

Board of Directors

MEETING DATE:	February 12, 2024			
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 Questions:				
COMMITTEE RECO	MMENDATION: Approval			
Motion: X				
Individual Action:				
Information:				
Required Time:	Required Time:			

TO:

Palomar Medical Center Poway Medical Staff Credentials Recommendations January 2024

TO:	Board of Directors			
MEETING DATE:	Monday, February 12, 2024			
FROM:	Sam Filiciotto, M.D., Chief of Staff, Palomar Medical Center Poway			
Background:	Monthly credentials recommendations from the Palomar Medical Center Poway Medical Executive Committee for approval by the Board of Directors.			
Budget Impact:	None			
Staff Recommendation: Recommend approval				
Committee Questions:				
COMMITTEE RECO	MMENDATION: Approval			
Motion: X				
Individual Action:				
Information:				
Required Time:				

Palomar Medical Centers Escondido and Poway Medical Staff Department Rules and Regulations Recommendation

TO:	Board of Directors	
MEETING DATE:	February 12, 2024	
FROM:	Sam Filiciotto, M.D., Chief of Staff, Palomar Medical Center Poway and Kanchan Koirala, M.D., Chief of Staff, Palomar Medical Center Escondido	
Background:	The Palomar Medical Centers Escondido and Poway Department of Emergency Medicine Rules and Regulations were updated to show current practices. Includes redlined and final versions.	
Budget Impact:	None	
Staff Recommendation: Recommend approval Committee Questions:		
COMMITTEE RECOMMENDATION: Approval		
Motion: X		
Individual Action:		
Information:		
information:		

Palomar Medical Center Escondido Medical Staff Privilege Checklist

10:	Board of Directors		
MEETING DATE:	February 12, 2024		
FROM:	Kanchan Koirala, M.D., Chief of Staff Palomar Medical Center Escondido		
Background:	Revised Radiology Oncology Core Privilege Checklist: Revised to current standards. Has been approved at all applicable Medical Staff department meetings at PMC Escondido. Includes redlined and final versions.		
Budget Impact:	None.		
Staff Recommendation: Recommend approval			
Committee Questions:			
COMMITTEE RECO	DMMENDATION: Approval		
Motion: X			
Individual Action:			
Information:			
Required Time:			

EXECUTED, BUDGETED, ROUTINE PHYSICIAN AGREEMENTS

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

TYPE OF AGREEMENT

TO:

FROM:

Background:

Motion: X

Information:

Individual Action:

PHYSICIAN/GROUP

BY:

MEETING DATE:

Board of Directors

Monday, February 12, 2024

Board Finance Committee Wednesday, January 24, 2024

Laura Barry, Chair, Board Finance Committee

Jan	uary 2022		
 Rady Children's Hospital San Diego dba Rady Children's Specialists of San Diego 	 Professional Services Agreement – Neonatal Coverage & Neonatal Medical Director Services – NICU – PMC Escondido 		
December 202	22 & November 2023		
Jean-Paul Abboud, MD	Ophthalmology Call Coverage AgreementTimely Remuneration Addendum		
M	1ay 2023		
Gregory Scott Campbell, MD, APC	Medical Director Agreement – Surgical Acute Care & Progressive Care Units – PMC Escondido		
Septe	ember 2023		
Matthew Schultzel, DO	Professional Services Agreement – General Surgery Call Coverage		
Oct	ober 2023		
Senior Medical Associates, Inc.	 Amendment 3 to Crisis Stabilization Unit & Medical Director Services Agreement 		
Senior Medical Associates	Amendment 1 to Psychiatric & Medical Director Services Agreement – PMC Escondido & PMC Poway		
Nove	ember 2023		
 North County Neurology Associates dba The Neurology Center of Southern California 	Emergency and Stroke Call Coverage Agreement		
The standard Form A's and Abstract Tables for each are included as Addendum B. Staff Recommendation: Approval			
	Finance Committee recommends approval of the Executed esented. Approval recommended 5 to 0 by the Committee		

December 2023 and YTD FY2024 Financial Report

TO:	Board of Directors			
MEETING DATE:	Monday, February 12, 2024			
FROM:	Board Finance Committee Wednesday, January 24, 2024			
BY:	Laura Barry, Chair, Board Finance Committee			
Background: The Board Financial Report (unaudited) for December 2023 and YTD FY2024 is submitted for the Board's approval.				
Budget Impact: N/A				
Staff Recommendation: Approval				
Committee Questions:				
COMMITTEE RECOMMENDATION: The Board Finance Committee recommends approval of the December 2023 and YTD FY2024 Board Financial Report as presented. Approval recommended 5 to 0 by the Committee; Board members: 3 to 0; Absent: 1.				
Motion: X				
Individual Action:				
Information:				

Charter of the Board Quality Review Committee of the Palomar Health Board of Directors

Board of Directors

TO:

MEETING DATE:	Monday, February 12, 2024			
FROM:	Linda Greer, Board Quality Review Committee Chair			
Background:	The updated Quality Committee Charter is provided to the Board of Directors for review and approval.			
Budget Impact: N	I/A			
Staff Recommendation: Approve				
Committee Questions:				
	1			
COMMITTEE RECO	OMMENDATION:			
Motion: X				
Individual Action:				
Information:				
Required Time:				

Charter of the Strategic & Facilities Planning Committee of the Palomar Health Board of Directors

TO:	Board of Directors		
MEETING DATE:	Monday, February 12, 2024		
FROM:	Board Strategic & Facilities Planning Committee Wednesday, January 24, 2024		
Background: The Palomar Health Board of Directors approved the Charter for the Strategic & Facilities Planning Committee on October 10, 2022. The removal of the titles Chief Administrative Officer and Senior Director of Managed Care and Business Development from Section II.C. Non-Voting Membership was recommended. The document may be viewed in both redline and clean versions in Addendum C.			
Budget Impact:	N/A		
Staff Recommendation: Adoption of the Charter of the Strategic & Facilities Planning Committee as amended, with a recommendation to the Board of Directors for formal ratification.			
Committee Questions:			
COMMITTEE RECOMN	MENDATION: The Board Strategic & Facilities Planning Committee		
recommends adoption the Palomar Health B	of the Charter of the Strategic & Facilities Planning Committee of oard of Directors, with the changes as recommended. Approval by the Committee; Board members: 3 to 0; Absent: 0		
Motion: X			
Individual Action:			
Information:			
Required Time:			

Charter of the Governance Committee of the Palomar Health Board of Directors

Board of Directors

Monday, February 12, 2024

TO:

MEETING DATE:

FROM: Jeff		Griffith, Board Governance Committee Chair	
-		ed section II, C, Non-Voting Membership, is recommended for II, and recommended to the Board of Directors for formal ion.	
Budget Impact:	N/A		
Staff Recommen	dation:	Approve	
Committee Questions:		N/A	
Motion: X		IMENDATION:	
Information:			
Required Tin	ne:		

Board Governance Committee Conflict of Interest Code Policy – Lucidoc 21800

Board of Directors

TO:

MEETING DATE:	Monday, February 12, 2024		
FROM:	Jeff Griffith, Board Governance Committee Chair		
Background:	The updated Conflict of Interest Code Policy, Lucidoc 21800, is respectively submitted to the Board of Directors for review and approval. Policy changes reflect current executive position titles.		
Budget Impact:	N/A		
Staff Recommend	dation: Approve		
Committee Ques	tions: N/A		
COMMITTEE	RECOMMENDATION:		
Motion: X			
Individual Action:			
Information:			
Required Tin	ne:		

ADDENDUM A



Board of Directors Meeting Minutes – Monday, January 8, 2024	
Agenda Item	
Discussion	Conclusion / Action /Follow Up
NOTICE OF MEETING	
Notice of Meeting was posted at the Palomar Health Administrative Office at 2125 Citracado Parkway, Suite 300, Escor website, on Friday, January 5, 2024, which is consistent with legal requirements.	ndido, CA 92029, as well as on the Palomar Health
CALL TO ORDER	
The meeting, which was held at the Palomar Medical Center Escondido, First Floor Conference Room at 2185 Citracad 6:38 p.m. by Board Chair Jeff Griffith.	o Parkway, Escondido, CA. 92029, and called to order at
1. ESTABLISHMENT OF QUORUM	
Quorum comprised of Directors Barry, Clark, Corrales, Edwards-Tate, Greer, Griffith, Pacheco Absences:	
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 natients, physicians and employees, reco	anized nationally for the highest quality of clinical care

and access to comprehensive services

genda Item	
• Discussion	Conclusion / Action /Follow Up
. PUBLIC COMMENTS	
Richard Engel, M.D. All F. William B. All F. Will B. All F. William B. All F. Wi	
Ali Fadhil, M.D.	
Eva Fadul, M.D. Hardeep Phyll M.D. The state of th	
Hardeep Phull, M.D.	
. PRESENTATIONS	
a. Security Department	
Anis Trabelsi, Chief Information Officer, shared a presentation with the Board.	
Anis Trabelsi, Chief Information Officer, shared a presentation with the Board.	MOTION: By Director Pacheco, 2 nd by Director Cla and carried to approve the Monday, December 11, 2023 Board of Directors Meeting minutes, as presented.
Anis Trabelsi, Chief Information Officer, shared a presentation with the Board. APPROVAL OF MINUTES	and carried to approve the Monday, December 11, 2023 Board of Directors Meeting minutes, as presented. Roll call voting was utilized. Director Edwards-Tate – aye
Anis Trabelsi, Chief Information Officer, shared a presentation with the Board. APPROVAL OF MINUTES	and carried to approve the Monday, December 11, 2023 Board of Directors Meeting minutes, as presented. Roll call voting was utilized. Director Edwards-Tate – aye Director Greer – aye
Anis Trabelsi, Chief Information Officer, shared a presentation with the Board. APPROVAL OF MINUTES	and carried to approve the Monday, December 11, 2023 Board of Directors Meeting minutes, as presented. Roll call voting was utilized. Director Edwards-Tate – aye Director Greer – aye Director Corrales – aye
Anis Trabelsi, Chief Information Officer, shared a presentation with the Board. APPROVAL OF MINUTES	and carried to approve the Monday, December 11, 2023 Board of Directors Meeting minutes, as presented. Roll call voting was utilized. Director Edwards-Tate – aye Director Greer – aye Director Corrales – aye Director Barry – aye Director Pacheco – aye
Anis Trabelsi, Chief Information Officer, shared a presentation with the Board. APPROVAL OF MINUTES	and carried to approve the Monday, December 11, 2023 Board of Directors Meeting minutes, as presented. Roll call voting was utilized. Director Edwards-Tate – aye Director Greer – aye Director Corrales – aye Director Barry – aye Director Pacheco – aye Director Clark – aye
Anis Trabelsi, Chief Information Officer, shared a presentation with the Board. APPROVAL OF MINUTES	and carried to approve the Monday, December 11, 2023 Board of Directors Meeting minutes, as presented. Roll call voting was utilized. Director Edwards-Tate – aye Director Greer – aye Director Corrales – aye Director Barry – aye Director Pacheco – aye Director Clark – aye Director Griffith - aye Chair Griffith announced that seven board membe
Anis Trabelsi, Chief Information Officer, shared a presentation with the Board. APPROVAL OF MINUTES	and carried to approve the Monday, December 11, 2023 Board of Directors Meeting minutes, as presented. Roll call voting was utilized. Director Edwards-Tate – aye Director Greer – aye Director Corrales – aye Director Barry – aye Director Pacheco – aye Director Clark – aye Director Griffith - aye Chair Griffith announced that seven board member were in favor. None opposed. No abstention.
Anis Trabelsi, Chief Information Officer, shared a presentation with the Board. APPROVAL OF MINUTES	presented. Roll call voting was utilized. Director Edwards-Tate – aye Director Greer – aye Director Corrales – aye Director Barry – aye Director Pacheco – aye Director Clark – aye

Board of Directors Meeting Minutes – Monday, January 8, 2024	
Agenda Item	
• Discussion	Conclusion / Action /Follow Up
b. Board of Directors Special Session Meeting - Monday, December 11, 2023	MOTION: By Director Clark, 2 nd by Director Barry and carried to approve the Monday, December 11, 2023 Board of Directors Meeting minutes, as presented. Roll call voting was utilized. Director Edwards-Tate – aye Director Greer – aye Director Corrales – aye Director Barry – aye Director Pacheco – aye Director Clark – aye Director Griffith - aye Chair Griffith announced that seven board members were in favor. None opposed. No abstention. None absent. Motion approved.
No discussion 6. APPROVAL OF AGENDA to accept the Consent Items as listed	
Palomar Medical Center Escondido Medical Staff Credentialing and Reappointments Palomar Medical Center Poway Medical Staff Credentialing and Reappointments	MOTION: By Director Barry, 2 nd by Director Clark and carried to approve Consent Agenda items a through b as presented. Roll call voting was utilized. Director Edwards-Tate – aye Director Greer – aye Director Corrales – aye Director Barry – aye Director Pacheco – aye Director Clark – aye Director Griffith - aye Chair Griffith announced that seven board members were in favor. None opposed. No abstention. None absent. Motion approved.

Board of Directors Meeting Minutes – Monday, January 8, 2024	
Agenda Item	
Discussion	Conclusion / Action /Follow Up
No discussion	
7. REPORTS	
a. Medical Staffs	
I. Palomar Medical Center Escondido	
Palomar Medical Center Escondido Chief of Staff, Dr. Kanchan Koirala, provided a verbal report to the Board of Director	S.
II. Palomar Medical Center Poway	
Palomar Medical Center Poway Chief of Staff, Dr. Sam Filiciotto, provided a verbal report to the Board of Directors.	
b. Administrative	
I. President and CEO	
Palomar Health President & CEO Diane Hansen provided a verbal report to the Board of Directors.	
II. Chair of the Board	
Palomar Health Chair of the Board Jeff Griffith provided a verbal report to the Board of Directors.	
9. APPROVAL OF BYLAWS, CHARTERS, RESOLUTIONS and OTHER ACTIONS	

	of Directors Meeting Minutes – Monday, January 8, 2024	
Agenda	ltem .	
•	Discussion	Conclusion / Action /Follow Up
a. b. c. d.	Resolution No. 01.08.24(01)-01 of the Board of Directors of Palomar Health Designating Subordinate Officers of the District Resolution No. 01.08.24(02)-02 of the Board of Directors of Palomar Health: Deposit Account & Treasury Management Services Banking Resolution & Certificate of Incumbency Resolution No. 01.08.24(03)-03 of the Board of Directors of Palomar Health Authorizing the Investment of Monies in the Local Agency Investment Fund Resolution No. 01.08.24(04)-04 of the Board of Directors of Palomar Health Morgan Stanley Authorized Persons and Enabling Resolutions for Municipalities and Certain Other Unincorporated Entities for DVP Accounts	MOTION: By Director Clark, 2 nd by Director Barry and carried to approve agenda items 9 a-d as presented. Roll call voting was utilized. Director Edwards-Tate – abstain Director Greer – aye Director Corrales – aye Director Barry – aye Director Pacheco – aye Director Clark – aye Director Griffith - aye Chair Griffith announced that six board members were in favor. None opposed. One abstention. None absent. Motion approved.
• 10. CON	No discussion MMITTEE REPORTS (information only unless otherwise noted)	
a. <i>F</i>	audit and Compliance Committee	
•	Committee Chair Michael Pacheco reported the committee was dark in the month of December.	
b. C	Community Relations Committee	
•	Committee Chair Terry Corrales reported the committee was dark in the month of December.	
c. F	inance Committee	
•	Committee Chair Laura Barry reported the committee was dark in the month of December.	
d. C	Governance Committee	
•	Committee Chair Jeff Griffith reported the committee was dark in the month of December.	
e. F	luman Resources Committee	
•	Committee Chair Terry Corrales reported the committee was dark in the month of December.	

Board of Directors Meeting Minutes – Monday, January 8	3, 2024	
Agenda Item		
• Discussion		Conclusion / Action /Follow Up
f. Quality Review Committee		
Committee Chair Linda Greer reported the committee	ee was dark in the month of December.	
g. Strategic & Facilities Planning Committee		
Committee Chair Michael Pacheco reported the con	nmittee summary is included in the board-meeting packet.	
FINAL ADJOURNMENT		
There being no further business, Chair Jeff Griffith a	djourned the meeting at 7:29 p.m.	
Signaturae	Board Secretary	Terry Corrales, R.N.
Signatures:	Board Assistant	Carla Albright



SPECIAL CLOSED SESSION BOARD OF DIRECTORS MINUTES — MONDAY, JAI	NUARY 8, 2024
AGENDA ITEM	CONCLUSION / ACTION
DISCUSSION	
NOTICE OF MEETING	
Notice of Meeting was posted at the Palomar Health Administrative Office at the Palomar Health website, on Friday, January 5, 2023, which is consistent	
I. CALL TO ORDER	
The meeting, which was held in the Palomar Medical Center Escondido, Firs 92029, and virtually, was called to order at 5:30 p.m. by Board Chair Jeff Gri	
II. ESTABLISHMENT OF QUORUM	
Quorum comprised of Directors Barry, Clark, Corrales, Edwards-Tate, Green	, Griffith, Pacheco
Absences: None	
III. PUBLIC COMMENTS	
There were no public comments.	

IV. ADJOURNMENT TO CLOSED SESSION	
a. Pursuant to California Government Code § 54962 and California Health & Safety Code § Discussion will concern proposed new service or program. Estimated date of public disc	
V. Re-Adjournment to Open Session	
VI. ACTION RESULTING FROM CLOSED SESSION – IF ANY	
	No action
VII. FINAL ADJOURNMENT	
There being no further business, Chair Jeff Griffith adjourned the meeting at 6:30 p.m.	
SIGNATURES: BOARD SECRETARY	 Terry Corrales, R.N.
	, ,
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

February 1, 2024

To: Palomar Health Board of Directors

From: Kanchan Koirala, M.D., Chief of Staff

Palomar Medical Center Escondido Medical Executive Committee

Board Meeting Date: February 12, 2024

Subject: Palomar Medical Center Escondido Credentialing Recommendations

Provisional Appointment (02/12/2024 – 01/31/2026)

Baig, Nabil, D.O. – Internal Medicine

Cannon, Victoria A., M.D. – Clinical Neurophysiology

Choudry, Muneeb A., M.D. - Oncology

Gailliot, Britain A., M.D. – Teleradiology

Oliver, Deanna, M.D. – Internal Medicine

Rodriguez, Rebecca, M.D. - Pediatrics

Sial, Khuram A., M.D. - Pain Medicine

Urioste, Alexander S., M.D. – Diagnostic Radiology

Advance from Provisional to Active Category

Burke, Hayden, M.D. - Internal Medicine/Infectious Disease (eff. 03/01/2024 to 08/31/2024)

Klein, Michael V., M.D. – Diagnostic Radiology (eff. 03/01/2024 to 08/31/2024)

Morneau, Leonard T., M.D. – Diagnostic Radiology (eff. 03/01/2024 to 02/28/2025)

Advance from Provisional to Affiliate Category

Enderby, Scott F., D.O. – Internal Medicine (eff. 03/01/2024 to 05/31/2025)

Additional Privileges

Healey, Mark A., M.D. – Trauma Surgery Clinical Privileges (effective 02/12/2024 – 10/31/2025)

Voluntary Resignations

Amukele, Samuel A., M.D. - Urology (eff. 12/31/2023)

Boone, Jacob E., M.D. - Urology (eff. 12/31/2023)

Campbell, Leticia, M.D. – OB/Gyn (eff. 09/02/2023)

Chang, David, M.D. – Anesthesiology (eff. 09/30/2023)

Chuang, Marc S., M.D. – Urology (eff. 12/31/2023)

Coleman, Lori A., M.D. – Radiation-Oncology (eff. 01/31/2024)

Crain, Donald S., M.D. – Urology (eff. 12/31/2023)

Delgado, Gustavo A., M.D. – Neurology (eff. 02/29/2024)

Dockweiler, Caitlin M., M.D. - Hospice/Palliative Medicine (eff. 12/31/2023)

Flynn, Vincent J., M.D. – Urology (eff. 12/31/2023)

Ibrahim, Tahcin, M.D. – Anesthesiology (eff. 01/08/2024)

Isariyawongse, Brandon K., M.D. – Urology (eff. 12/31/2023)

Kim, Philip H., M.D. – Urology (eff. 12/31/2023)

Lin, Han Ming J., M.D. – Internal Medicine (eff. 02/29/2024)

Lux, Matthew M., M.D. – Urology (eff. 12/31/2023)

Middleton, George W., M.D. – Urology (eff. 12/31/2023)

Murali, Sujatha, M.D. – Oncology (eff. 02/29/2024)

Nitahara, Kenneth S., M.D. – Urology (eff. 12/31/2023)

Ramos, Patrick M., M.D. – Urology (eff. 12/31/2023)

Roby, Jason L., D.O. – Emergency Medicine (eff. 01/31/2024)

Schwartz, Kevin J., M.D. – Anesthesiology (eff. 01/11/2024)

Shayya, Rana F., M.D. – OB/Gyn (eff. 02/29/2024)

Uchino, Catherine A., M.D. – OB/Gyn (eff. 02/29/2024)

Villalta, Jacqueline D., M.D. – Urology (eff. 12/31/2023)

Wuerstle, Melanie C., M.D. - Urology (eff. 12/31/2023)

Request for Change in Category

Conrad, Alan J., M.D. – Internal Medicine; requesting change to Affiliate with no privileges (eff. 01/01/2024-05/31/2024)

Request for Leave of Absence – 2 years

Chidi, Obiora O., M.D. – Emergency Medicine (eff. 06/26/2023 to 06/25/2025)

Kosmo, Michael A., M.D. – Hematology/Oncology (eff. 07/01/2023 to 06/30/2025)

Macleay, Lachlan Jr., M.D. - Pathology (eff. 01/01/2024 to 12/31/2025)

Allied Health Professional Appointment (02/12/2024 – 01/31/2026)

Clark, Brittany B., NP – Nurse Practitioner (Sponsor - Dr. John Steele)

Kondan, Christian M., PA-C – Physician Assistant (Sponsor - Dr. Ariel Palanca, for PHMG Orthopaedics)

Stewart, Katherine M., PA-C – Physician Assistant (Sponsor – Dr. Ariel Palanca, for PHMG Orthopaedics)

Allied Health Professional Voluntary Resignation

Brock, Whitney, NNP – Neonatal Nurse Practitioner (eff. 01/20/2024)



PALOMAR MEDICAL CENTER ESCONDIDO RECOMMENDATIONS FOR REAPPOINTMENT

Reappointment effective 03/01/2024 - 08/31/2024

Wang, Chunyang T., M.D. Neurology Dept. Of Medicine Active

Reappointments (effective 03/01/2024 – 2/28/2026)

Boonjindasup, Aaron G., M.D.	Surgery, Urology	Dept. of Urology	Active
Camilon, Marinelle L., D.O.	Family Practice	Dept. of Family Practice	Active
Davis, Kimberly R., M.D.	Physical Medicine & Rehab	Dept. of Orthopaedics	Courtesy*

(*Category change from Active to Courtesy)

(*Category change from	Active to Courtesy)		
Haffie, David A., D.O.	Family Practice	Dept. of Family Practice	Affiliate
Iem, Stephanie K., D.O.	Family Practice	Dept. of Family Practice	Affiliate
Jimenez-Grillo, Carlos E., M.D.	Internal Medicine	Dept. of Medicine	Active
Nehra, Vedika, M.D.	Psychiatry	Dept. of Psychiatry	Active
Ojha-Hammad, Anita R., M.D.	Wound Care/Hyperbaric	Dept. of Surgery	Active
Poudel, Regina, M.D.	Internal Medicine	Dept. Of Medicine	Active
Shah, Saurabh B., M.D.	Otolaryngology	Dept. of Surgery	Courtesy
Terramani, Thomas T., M.D.	Vascular Surgery	Dept. of Surgery	Courtesy
Tung, Howard, M.D.	Neurosurgery	Dept. of Surgery	Active
Wu, Darrell, M.D.	Surgery, Cardiothoracic	Dept. of Surgery	Active

Allied Health Professional Reappointment effective 03/01/2024 - 05/31/2024

Lilly, Anna M., NNP Dept. of Pediatrics (Sponsor: Dr. Jane O'Donnell for RCHSD)

Allied Health Professional Reappointments (effective 03/01/2024 - 02/28/2026)

McMichael, Amanda M., NNP	Dept. of Pediatrics (Sponsor: Nabil Fatayerji, MD - for Rady Children's)
Hedges, Megan, NNP	Dept. of Pediatrics (Sponsor: Nabil Fatayerji, MD - for Rady Children's)
Murray, Rachael, NNP	Dept. of Pediatrics (Sponsor: Nabil Fatayerji, MD - for Rady Children's)
Reimer, Errin B., NNP	Dept. of Pediatrics (Sponsor: Nabil Fatayerji, MD - for Rady Children's)

<u>Certification by and Recommendation of Chief of Staff</u>

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: February 1, 2024

To: Palomar Health Board of Directors – February 12, 2024 Meeting From: Sam Filiciotto, M.D., Chief of Staff, PMC Poway Medical Staff Subject: Medical Staff Credentials Recommendations – January, 2024

<u>Provisional Appointments:</u> (02/12/2024 – 01/31/2026)

Nabil Baig, D.O., Internal Medicine

Muneeb Choudry, M.D., Hematology/Oncology

Britain Gailliot, M.D., Teleradiology

Alexander Urioste, M.D., Diagnostic Radiology

Biennial Reappointments: (03/01/2024 - 02/28/2026)

Aaron Boonjindasup, M.D., Urology, Active Marinelle Camilon, D.O., Family Practice, Active

Carlos Jimenez-Grillo, M.D., Internal Medicine, Courtesy

Vedika Nehra, M.D., Psychiatry, Active

Regina Poudel, M.D., Internal Medicine, Active Saurabh Shah, M.D., Otolaryngology, Courtesy Chunyang Wang, M.D., Neurology, Active

Advancements to Active Category:

Hayden Burke, M.D., Infectious Disease, effective 02/12/2024 – 08/31/2024 (Includes The Villas at Poway)

Michael Klein, M.D., Teleradiology, effective 02/12/2024 – 08/31/2024 Leonard Morneau, M.D., Teleradiology, effective 02/12/2024 – 02/28/2025

Advancement to Affiliate Category:

Scott Enderby, D.O., Internal Medicine, effective 02/12/2024 – 05/31/2025

Request for Change in Category:

Alan Conrad, M.D., Internal Medicine, Transfer from Courtesy to Affiliate with no Clinical Privileges, effective 01/01/2024

Requests for Two Year Leave of Absence:

Michael Kosmo, M.D., Hematology/Oncology, effective 07/01/2023 – 06/30/2025 Lachlan Macleay, M.D., Pathology, effective 01/11/2024 – 01/10/2026



Voluntary Resignations:

Samuel Amukele, M.D., Urology, effective 12/31/2023 Jacob Boone, M.D., Urology, effective 12/31/2023 Marc Chuang, M.D., Urology, effective 12/31/2023 Shauna Conry, M.D., Emergency Medicine, effective 01/31/2024 Donald Crain, M.D., Urology, effective 12/31/2023 Caitlin Dockweiler, M.D., Palliative Medicine, effective 12/31/2023 Vincent Flynn, M.D., Urology, effective 12/31/2023 Tahcin Ibrahim, M.D., Anesthesiology, effective 01/08/2024 Brandon Isariyawongse, M.D., Urology, effective 12/31/2023 Philip Kim, M.D., Urology, effective 12/31/2023 Matthew Lux, M.D., Urology, effective 12/31/2023 George Middleton, M.D., Urology, effective 12/31/2023 Kenneth Nitahara, M.D., Urology, effective 12/31/2023 Anita Ojha-Hammad, M.D., Wound Care, effective 01/16/2024 Fernando Palacios, M.D., Family Practice, effective 01/31/2024 Patrick Ramos, M.D., Urology, effective 12/31/2023 Samathha Reddy, M.D., Internal Medicine, effective 02/17/2024 Jacqueline Villalta, M.D., Urology, effective 12/31/2023 Melanie Wuerstle, M.D., Urology, effective 12/31/2023

<u>Allied Health Professional Appointments:</u> (02/12/2024 – 01/31/2026) Christian Kondan, PA, Sponsor Dr. Palanca Katherine Stewart, PA, Sponsor Dr. Palanca

Allied Health Professional Voluntary Resignations:

Whitney Brock, NNP, effective 01/20/2024 Rachael Murray, NNP, effective 01/23/2024

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	Nabil Baig, D.O.
Palomar Health Facilities	Palomar Medical Center Escondido
	Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

Sne	cialties	Internal Medicine - Certified 2019
Spc	Cillines	internal Medicine Certified 2017

ORGANIZATIONAL NAME

Palomar Hospitalist Medical Group

EDUCATION/AFFILIATION INFORMATION

Medical Education Information	Medical School Touro University College of Osteopathic Medicine, DO From: 08/01/2008 To: 06/04/2012 Doctor of Osteopathic Medicine
Internship Information	
Residency Information	Residency University of California, San Francisco (Fresno) Internal Medicine From: 06/01/2016 To: 06/01/2017 Chief resident year Residency University of California, San Francisco (Fresno) Internal Medicine From: 06/30/2013 To: 08/15/2016 Residency Advocate Lutheran General Hospital Internal Medicine From: 06/25/2012 To: 06/24/2013
Fellowship Information	
Current Affiliation Information	Adventist Health Hanford Community Medical Center Saint Agnes Medical Center



PERSONAL INFORMATION

Provider Name & Title	Victoria A. Cannon, M.D.
Palomar Health Facilities	Palomar Medical Center Escondido

SPECIALTIES/BOARD CERTIFICATION

cialties Clinical Neurophysiology - Certified 2021	
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ORGANIZATIONAL NAME

Ī	Name	Specialt	yCare

EDUCATION/AFFILIATION INFORMATION

Medical Education Information	Medical School University of Mississippi, MD From: 08/15/2011 To: 05/22/2015 University of Mississippi School of Medicine
Internship Information	Internship University of Mississippi Medical Center Internal Medicine From: 07/01/2015 To: 06/30/2016
Residency Information	Residency University of Mississippi Medical Center Neurology From: 07/01/2016 To: 06/30/2019
Fellowship Information	Fellowship University of Southern California Neurology From: 07/01/2020 To: 07/30/2021 Intraoperative Neurophysologic Monitoring Fellowship University of Southern California Neurophysiology, Clinical From: 07/01/2019 To: 06/30/2020

Current Affiliation Information	SCA Health
	Southwest Healthcare System
	Providence Saint John's Health Center
	NorthBay Medical Center
	Castle Rock Adventist Hospital
	Littleton Adventist Hospital
	St. Anthony Hospital Centura Health
	Medical City Dallas Hospital
	Avista Adventist Hospital



PERSONAL INFORMATION

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

SPECIALTIES/BOARD CERTIFICATION

Specialties	Medical Oncology - Certified 2007

ORGANIZATIONAL NAME

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Name	Palomar Health Medical Group - Graybill
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Medical Education Information	Medical School St. George's University, MD From: 09/03/1990 To: 12/29/1995 Doctor of Medicine Degree
Internship Information	Internship University of Louisville Hospitals Internal Medicine From: 07/01/1996 To: 06/30/1997
Residency Information	Residency University of Louisville Hospitals Internal Medicine From: 07/01/1997 To: 06/30/1999
Fellowship Information	Fellowship University of Louisville Hospitals Hematology/Oncology From: 07/01/2002 To: 06/30/2005
Current Affiliation Information	Norton Audobon Hospital



PALOMAR HEALTH ALLIED HEALTH PROFESSIONAL APPOINTMENT February 2024

PERSONAL INFORMATION

Provider Name & Title	Brittany B. Clark, N.P.
Palomar Health Facilities	Palomar Medical Center Escondido

SPECIALTIES/BOARD CERTIFICATION

Specialties	Acute Care Nurse Practitioner - Certified 2020
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ORGANIZATIONAL NAME

me Palomar Medical Center Escondido Trauma Program	
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Education Information	University University of South Alabama, BSN From: 05/26/2009 To: 07/29/2011m 2016-2019 MSN
Employment	Current Employment Desert Trauma Surgeons Nurse Practitioner From: 01/01/2022 To: Current Current Employment UC San Diego Medical Center Nurse Manager From: 02/13/2018 To: Current Current Employment Aya Locum Tenens - Independent Contractor Contractor From: 01/03/2024 To: 04/03/2024
Current Affiliation Information	

PALOMAR HEALTH ALLIED HEALTH PROFESSIONAL APPOINTMENT February 2024



PERSONAL INFORMATION

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

SPECIALTIES/BOARD CERTIFICATION

Specialties	Diagnostic Radiology - Certified 2021

ORGANIZATIONAL NAME

Name	Stat Radiology Medical Group	
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Medical Education Information	Medical School Uniformed Services University - Health Sciences, MD From: 08/01/2010 To: 05/31/2014
Internship Information	Internship University of California, Davis Medical Center General Surgery From: 06/25/2014 To: 06/30/2015
Residency Information	Residency Travis Air Force Base/David Grant Medical Center Radiology, Diagnostic Imaging From: 07/01/2015 To: 06/30/2019
Fellowship Information	

Current Affiliation Information	Southwest Healthcare System Temecula Valley Hospital Advocate Christ Medical Center Advocate South Suburban Hospital Hollywood Presbyterian Medical Center Carondelet Holy Cross Hospital Carondelet St. Mary's Hospital-Tucson Scripps Green Hospital Scripps Encinitas Surgery Center Scripps Mercy Hospital, Chula Vista Beverly Hospital (Montebello) CHOC Children's at Mission Hospital
	Scripps Encinitas Surgery Center Scripps Mercy Hospital, Chula Vista Beverly Hospital (Montebello)
	Doctors Medical Center, Modesto Providence St. Joseph Hospital Kaweah Delta Medical Center
	Emanuel Medical Center Madera Community Hospital USAF Medical Center (Keesler)



PALOMAR HEALTH ALLIED HEALTH PROFESSIONAL APPOINTMENT February 2024

PERSONAL INFORMATION

Provider Name & Title	Christian M. Kondan, PA-C
Palomar Health Facilities	Palomar Medical Center Escondido
	Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

Specialties	Physician Assistant - Certified 2022

ORGANIZATIONAL NAME

Name	PHMG Orthopaedics
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Education Information	Pace University, 2019-2021, PA Studies
Employment	Current Employment PHMG Orthopaedics Physician Assistant From: 01/01/2024 To: Current
Current Affiliation Information	



PERSONAL INFORMATION

Provider Name & Title	Deanna Oliver, M.D.
Palomar Health Facilities	Palomar Medical Center Escondido

SPECIALTIES/BOARD CERTIFICATION

Specialties	Internal Medicine - Certified 2019
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ORGANIZATIONAL NAME

Medical Education Information	Medical School American University of the Caribbean, MD From: 01/01/2009 To: 10/27/2012
Internship Information	
Residency Information	Residency University of California, San Francisco (Fresno) Internal Medicine From: 08/19/2016 To: 06/25/2017 Chief Resident Residency University of California, San Francisco (Fresno) Internal Medicine From: 06/24/2013 To: 08/18/2016 Resident Physician
Fellowship Information	
Current Affiliation Information	Sharp Chula Vista Medical Center Scripps Mercy Hospital, Chula Vista Sharp Coronado Hospital



PERSONAL INFORMATION

Ī	Provider Name & Title	Rebecca Rodriguez, M.D.
	Palomar Health Facilities	Palomar Medical Center Escondido

SPECIALTIES/BOARD CERTIFICATION

Specialties	Pediatrics - Certified 2020
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ORGANIZATIONAL NAME

Children's Primary Care Medical Group	
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Medical Education Information	Medical School Texas Tech University, MD From: 07/01/2013 To: 05/19/2017 TTUHSC-Paul L. Foster School of Medicine
Internship Information	
Residency Information	Residency Loma Linda University Childrens Hospital Pediatrics From: 06/30/2017 To: 06/30/2020
Fellowship Information	
Current Affiliation Information	Rady Children's Hospital, San Diego



PERSONAL INFORMATION

Provider Name & Title	Khuram A. Sial, M.D.
Palomar Health Facilities	Palomar Medical Center Escondido

SPECIALTIES/BOARD CERTIFICATION

Specialties	Physical Medicine & Rehab, Pain Management - Certified 2007, 2006
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ORGANIZATIONAL NAME

Name Temecula Pain Management Group	
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Medical Education Information	Medical School Ross University School of Medicine, MD From: 01/01/1996 To: 06/02/2000 Doctor of Medicine Degree
Internship Information	Internship Riverside Regional Medical Center Transitional From: 06/26/2000 To: 06/26/2001
Residency Information	Residency Baylor College of Medicine Physical Medicine/Rehab From: 08/01/2001 To: 07/31/2004
Fellowship Information	Fellowship Beth Israel Deaconess Medical Center Pain Management From: 07/01/2004 To: 06/30/2005
Current Affiliation Information	Sovereign Surgery Center of the Pacific Orange County Global Medical Center Rancho Springs Medical Center Inland Valley Medical Center Scripps Mercy Hospital, San Diego



PALOMAR HEALTH ALLIED HEALTH PROFESSIONAL APPOINTMENT February 2024

PERSONAL INFORMATION

Provider Name & Title	Katherine M. Stewart, PA-C
Palomar Health Facilities	Palomar Medical Center Escondido
	Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

Specialties	Ph	ysician Assistant - Certified 2016

ORGANIZATIONAL NAME

Name	PHMG Orthopaedics
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Education Information	Midwestern University, 2014-2016, PA Studies
Employment	Current Employment PHMG Orthopaedics Physician Assistant From: 12/01/2023 To: Current
Current Affiliation Information	



PERSONAL INFORMATION

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

SPECIALTIES/BOARD CERTIFICATION

Specialties	Diagnostic Radiology -	Certified 2005

ORGANIZATIONAL NAME

Name	
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Medical Education Information	Medical School Wake Forest University, MD From: 09/01/1996 To: 05/15/2000 Doctor of Medicine
Internship Information	Internship St. Luke's-Roosevelt Hospital Center, New York Internal Medicine From: 07/01/2000 To: 06/30/2001
Residency Information	Residency University of California, San Francisco Radiology, Diagnostic Imaging From: 07/01/2001 To: 06/30/2005
Fellowship Information	Fellowship University of California, San Diego Magnetic Resonance Imaging From: 07/01/2005 To: 06/30/2006
Current Affiliation Information	Sharp Grossmont Hospital



Palomar Medical Center- Escondido and Poway

Department of Emergency Medicine Rules and Regulations

I. Purpose

The purpose of the Department of Emergency Medicine is to provide high-quality emergency medical care to the patient community served by Palomar Health and to provide this service to patients and referring physicians in a prompt, courteous, and cost-effective manner. It shall also be the functions of the Department to:

- 1.1 Supervise all professional services in the Emergency Department and formulate rules, regulations, and policies necessary to assure high standards of emergency care and to assure proper and efficient functioning of the Emergency Department.
- 1.2 Provide oversight for the emergency screening evaluation of all patients who present to the Emergency Departments at Palomar Medical Center -Escondido and Poway without discrimination on the basis of race, religion, gender, sexual orientation, insurance status, color, ancestry, national origin, citizenship, disability, economic status, pre-existing medical condition, or ability to pay for medical services.
- 1.3 Provide quality assurance to the Department and its patients, and investigate and respond to patient/physician complaints as requested.
- 1.4 Monitor the credentials of the physicians practicing in the Department and submit appropriate recommendations regarding privileges.
- 1.5 Counsel and administer disciplinary action to Members of the Department when required, in compliance with all applicable Medical Staff Bylaws and Rules and Regulations.
- 1.6 Provide liaison to all other departments and services of Palomar Health and its Medical Staffs. Specifically, this includes providing a Chairperson who will be responsible for helping to resolve medical and/or administrative issues involving the Medical Staffs and the District administrations.
- 1.7 Oversee continuing medical education in the Department.

II. Membership

2.1 Qualifications

- 2.1.1 Compliance with membership qualifications in accordance with the Medical Staffs Bylaws, Rules and Regulations.
- 2.1.2 Board certification or eligibility in Emergency Medicine, or training and experience equivalent to board-eligibility, is required for departmental membership as specified in the Palomar Medical Center-Escondido and Poway Staff Bylaws.

2.2 Responsibilities

- 2.2.1 Participation in department business and committees and duties assigned by the Department Chairperson in accordance with the departmental rules and regulations.
- 2.2.2 Meeting attendance requirements are defined in the Palomar Medical Center Escondido and Poway Staff Bylaws.
- 2.2.3 Compliance with the Department of Emergency Medicine Rules and Regulations.
- 2.2.4 Compliance with practice and behavioral expectations as described in the Expectations of Attending Physicians Granted Privileges at Palomar Health and Code of Conduct documents.

III. Privileges

Only emergency physicians who are affiliated with the group holding the active service contract with Palomar Health may apply for privileges.

3.1 Monitoring

- 3.1.1 The Department Chairperson will assign a monitor for all new members. Monitoring shall be performed on at least twenty-five (25) cases.
 - Monitoring shall include review of the physician's charting as well as concurrent review of procedures performed, when deemed necessary.
- 3.1.2 The monitoring report shall be completed by the monitoring physician and filed in the applicant's credentials file in Medical Staff Services.
- 3.1.3 Monitors must be members of the Department of Emergency Medicine except in the case of certain procedures, where monitoring may be performed by a member of another department, provided that that member has privileges in his or her department to perform the procedure in question.
- 3.1.4 The responsibility of a monitor shall be to observe and report on the performance of the practitioner who is undergoing monitoring. The monitor shall not be responsible for assisting or intervening in the procedure. However, monitors have the authority to interdict procedures or therapy which they deem dangerous or contraindicated, pending evaluation by the Department Chairperson or the Chief of Staff.
- 3.1.5 After monitoring reports have been filed with Medical Staff Services, the Department Chairperson shall review them and determine whether further monitoring is required.

3.2 Admission of Patient from the Emergency Department

- 3.2.1 Transfer of responsibility for patient care will occur only after direct communication between the Emergency Physician and the Admitting Physician.
- 3.2.2 The Emergency Physician and Admitting Physician will collaborate on an official time of transfer of care, level of care (i.e. m/s, tele, ICU), outstanding studies/tests and need for transition orders. Documentation will occur in the medical record.
- 3.2.3 The Emergency Physician DOES NOT have admitting privileges.
- 3.2.4 The Emergency Physician DOES NOT HAVE privileges to write the admission status order on patients being admitted to the institution.
- 3.2.5 The Emergency Physician DOES HAVE the privileges to write transition orders on patients that will be admitted when requested by the admitting physician. Transition orders are not admission orders and represent truncated orders for the inpatient care team, limited to extending care starting in the ED and allowing a patient to be moved from the ED to the inpatient setting prior to admission orders being written by the admitting physician.
- 3.2.6 Transition orders written by the ED physician:
 - 3.2.6.1 Expire in 6 hours or will be discontinued by the admitting physician.
 - 3.2.6.2 Orders will cover basic patient care, not inpatient evaluation, diagnosis or essential treatment.
 - 3.2.6.3 Include an order to call the admitting physician for any clarification of orders, change in medical condition if it arises and at expiration of the transition orders.

- 3.2.7 Boarding: When the patient remains in the Emergency Department after the decision to admit pending an inpatient bed:
 - 3.2.7.1 Admitting physician shall be responsible for the care of the patient after they have accepted responsibility for the admission regardless of the patient's physical location in the hospital.
 - 3.2.7.2 Admitting physician will place inpatient orders per med staff rules and regulations.
 - 3.2.7.3 Transition orders written by Emergency Physician will expire within 6 hours or will be discontinued by the admitting physician.
 - 3.2.7.4 All order requests whether routine or urgent will be addressed by the admitting physician.
 - 3.2.7.5 In the event a boarding patient deteriorates or experiences a critical medical need Emergency Physician will respond while the Admitting Physician is being notified.

IV. Officers - Chairperson and Chairperson-Elect

- 4.1 The Department Chairperson and Chairperson-Elect shall be elected by the voting members of the Department at least thirty (30) days prior to the end of the year. Terms of office shall be for two (2) years. The Chairperson and Chairperson-Elect may be re-elected.
- 4.2 Both the Department Chairperson and Chairperson-Elect shall be board-certified by either the American Board of Emergency Medicine or American Osteopathic Board of Emergency Medicine.
- 4.3 The Department Chairperson and Chairperson-Elect shall be elected, in accordance with Section 4.1.1 above. These officers shall be subject to recall upon a two-thirds (2/3) vote of the members of the Department, which vote must be approved by the Medical Executive Committees and the Board of Directors. These officers shall perform all duties specified in the Bylaws of Palomar Medical Center -Escondido and Poway as well as any duties specified in these Rules and Regulations.
- 4.4 Duties of the Chairperson shall include those duties specified in the Medical Staff Bylaws, Rules and Regulations of Palomar Medical Center -Escondido and Poway, as well as:
 - 4.4.1 Presiding over the monthly Emergency Medicine department meetings and any Emergency Medicine executive meetings which may be convened.
 - 4.4.2 Assuming and discharging responsibility for the professional direction of the Department under the Medical Staff Bylaws, Rules and Regulations of Palomar Medical Center -Escondido and Poway.
 - 4.4.3 Assisting the Medical Staffs and Hospital Administrations in achieving a high level of patient service with efficiency and economy.
 - 4.4.4 Assisting the Hospital Administrations in maintaining the Department, according to the needs of patients, the hospitals, the Medical Staffs, and the requirements of accrediting bodies.
 - 4.4.5 Being actively involved in the future planning of the Department and the hospitals.
 - 4.4.6 Fostering appropriate cost-effective use of emergency services.
 - 4.4.7 Calling special meetings of the Department or any of its committees at his or her own discretion upon three (3) days' notice.
- 4.5 The Chairperson-Elect shall serve as an assistant to the Chairperson and shall assume the duties of the Chairperson in his or her absence.

V. Department Meetings

- 5.1 The Department of Emergency Medicine will hold regular monthly meetings that will be immediately followed by Performance Improvement/Peer Review meetings in February, April, June, August, and October and Performance Improvement/Peer Review meetings in January, March, May, September, and November. There will be no meetings in July or in December. Written minutes shall be maintained.
- 5.2 Per the Medical Staffs Bylaws, only active category Members may vote on department policies/procedures.

VI. Committees

- 6.1 The Department shall maintain standing committees as it deems necessary.
- 6.2 Peer Review The Department Chairperson-elect, or the Department Chairperson's designee, shall serve on the Medical Staff Peer Review Committee.

VII. Supervision of Residents

- 7.1 An attending physician of the Emergency Medicine staff, or from the admitting staff, will evaluate every patient who has been evaluated by a resident.
- 7.2 The supervising attending physician will enter a personal notation documenting his or her participation in the three (3) key components of Evaluation and Management Services (i.e. history, exam, and medical decision making).
- 7.3 The supervising attending physician will review each resident care plan and counter-sign the medical record of every patient seen by a resident, indicating endorsement of the plan.
- 7.4 An attending physician of the Emergency Medicine staff or from the admitting staff will directly supervise all patient care procedures performed by residents.

VIII. Amendments

- 8.1 Proposed amendments to these rules and regulations shall be distributed to active members of the department no less than fifteen (15) days before the scheduled department meeting at which the proposed amendments will be reviewed.
- Amendments shall be adopted by a simple majority vote of the voting members of the Department so long as quorum has voted. Prior to submitting the revisions to the Executive Committees, any required legal review by Palomar Health counsel will be obtained. Legal opinion shall be submitted to the Department and, as indicated, revisions and re-approval will occur. The revisions will then be submitted to the Medical Executive Committees and the Board of Directors for approval.

Approved by Department of Emergency Medicine	9 /21/2022 1/7/2024
Approved by Palomar Medical Center Escondido Executive Committee	9 <mark>/26/2022</mark> 01/29/2024
Approved by Palomar Medical Center Poway Executive Committee	9 /27/2022 01/30/2024
Approved by Palomar Health Board of Directors	

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Palomar Medical Center- Escondido and Poway

Department of Emergency Medicine Rules and Regulations

I. Purpose

The purpose of the Department of Emergency Medicine is to provide high-quality emergency medical care to the patient community served by Palomar Health and to provide this service to patients and referring physicians in a prompt, courteous, and cost-effective manner. It shall also be the functions of the Department to:

- 1.1 Supervise all professional services in the Emergency Department and formulate rules, regulations, and policies necessary to assure high standards of emergency care and to assure proper and efficient functioning of the Emergency Department.
- 1.2 Provide oversight for the emergency screening evaluation of all patients who present to the Emergency Departments at Palomar Medical Center -Escondido and Poway without discrimination on the basis of race, religion, gender, sexual orientation, insurance status, color, ancestry, national origin, citizenship, disability, economic status, pre-existing medical condition, or ability to pay for medical services.
- 1.3 Provide quality assurance to the Department and its patients, and investigate and respond to patient/physician complaints as requested.
- 1.4 Monitor the credentials of the physicians practicing in the Department and submit appropriate recommendations regarding privileges.
- 1.5 Counsel and administer disciplinary action to Members of the Department when required, in compliance with all applicable Medical Staff Bylaws and Rules and Regulations.
- 1.6 Provide liaison to all other departments and services of Palomar Health and its Medical Staffs. Specifically, this includes providing a Chairperson who will be responsible for helping to resolve medical and/or administrative issues involving the Medical Staffs and the District administrations.
- 1.7 Oversee continuing medical education in the Department.

II. Membership

2.1 Qualifications

- 2.1.1 Compliance with membership qualifications in accordance with the Medical Staffs Bylaws, Rules and Regulations.
- 2.1.2 Board certification or eligibility in Emergency Medicine, or training and experience equivalent to board-eligibility, is required for departmental membership as specified in the Palomar Medical Center-Escondido and Poway Staff Bylaws.

2.2 Responsibilities

- 2.2.1 Participation in department business and committees and duties assigned by the Department Chairperson in accordance with the departmental rules and regulations.
- 2.2.2 Meeting attendance requirements are defined in the Palomar Medical Center Escondido and Poway Staff Bylaws.
- 2.2.3 Compliance with the Department of Emergency Medicine Rules and Regulations.
- 2.2.4 Compliance with practice and behavioral expectations as described in the Expectations of Attending Physicians Granted Privileges at Palomar Health and Code of Conduct documents.

III. Privileges

Only emergency physicians who are affiliated with the group holding the active service contract with Palomar Health may apply for privileges.

3.1 Monitoring

- 3.1.1 The Department Chairperson will assign a monitor for all new members. Monitoring shall be performed on at least twenty-five (25) cases.
 - Monitoring shall include review of the physician's charting as well as concurrent review of procedures performed, when deemed necessary.
- 3.1.2 The monitoring report shall be completed by the monitoring physician and filed in the applicant's credentials file in Medical Staff Services.
- 3.1.3 Monitors must be members of the Department of Emergency Medicine except in the case of certain procedures, where monitoring may be performed by a member of another department, provided that that member has privileges in his or her department to perform the procedure in question.
- 3.1.4 The responsibility of a monitor shall be to observe and report on the performance of the practitioner who is undergoing monitoring. The monitor shall not be responsible for assisting or intervening in the procedure. However, monitors have the authority to interdict procedures or therapy which they deem dangerous or contraindicated, pending evaluation by the Department Chairperson or the Chief of Staff.
- 3.1.5 After monitoring reports have been filed with Medical Staff Services, the Department Chairperson shall review them and determine whether further monitoring is required.

3.2 Admission of Patient from the Emergency Department

- 3.2.1 Transfer of responsibility for patient care will occur only after direct communication between the Emergency Physician and the Admitting Physician.
- 3.2.2 The Emergency Physician and Admitting Physician will collaborate on an official time of transfer of care, level of care (i.e. m/s, tele, ICU), outstanding studies/tests and need for transition orders. Documentation will occur in the medical record.
- 3.2.3 The Emergency Physician DOES NOT have admitting privileges.
- 3.2.4 The Emergency Physician DOES NOT HAVE privileges to write the admission status order on patients being admitted to the institution.
- 3.2.5 The Emergency Physician DOES HAVE the privileges to write transition orders on patients that will be admitted when requested by the admitting physician. Transition orders are not admission orders and represent truncated orders for the inpatient care team, limited to extending care starting in the ED and allowing a patient to be moved from the ED to the inpatient setting prior to admission orders being written by the admitting physician.
- 3.2.6 Transition orders written by the ED physician:
 - 3.2.6.1 Expire in 6 hours or will be discontinued by the admitting physician.
 - 3.2.6.2 Orders will cover basic patient care, not inpatient evaluation, diagnosis or essential treatment.
 - 3.2.6.3 Include an order to call the admitting physician for any clarification of orders, change in medical condition if it arises and at expiration of the transition orders.

- 3.2.7 Boarding: When the patient remains in the Emergency Department after the decision to admit pending an inpatient bed:
 - 3.2.7.1 Admitting physician shall be responsible for the care of the patient after they have accepted responsibility for the admission regardless of the patient's physical location in the hospital.
 - 3.2.7.2 Admitting physician will place inpatient orders per med staff rules and regulations.
 - 3.2.7.3 Transition orders written by Emergency Physician will expire within 6 hours or will be discontinued by the admitting physician.
 - 3.2.7.4 All order requests whether routine or urgent will be addressed by the admitting physician.
 - 3.2.7.5 In the event a boarding patient deteriorates or experiences a critical medical need Emergency Physician will respond while the Admitting Physician is being notified.

IV. Officers - Chairperson and Chairperson-Elect

- 4.1 The Department Chairperson and Chairperson-Elect shall be elected by the voting members of the Department at least thirty (30) days prior to the end of the year. Terms of office shall be for two (2) years. The Chairperson and Chairperson-Elect may be re-elected.
- 4.2 Both the Department Chairperson and Chairperson-Elect shall be board-certified by either the American Board of Emergency Medicine or American Osteopathic Board of Emergency Medicine.
- 4.3 The Department Chairperson and Chairperson-Elect shall be elected, in accordance with Section 4.1.1 above. These officers shall be subject to recall upon a two-thirds (2/3) vote of the members of the Department, which vote must be approved by the Medical Executive Committees and the Board of Directors. These officers shall perform all duties specified in the Bylaws of Palomar Medical Center -Escondido and Poway as well as any duties specified in these Rules and Regulations.
- 4.4 Duties of the Chairperson shall include those duties specified in the Medical Staff Bylaws, Rules and Regulations of Palomar Medical Center -Escondido and Poway, as well as:
 - 4.4.1 Presiding over the monthly Emergency Medicine department meetings and any Emergency Medicine executive meetings which may be convened.
 - 4.4.2 Assuming and discharging responsibility for the professional direction of the Department under the Medical Staff Bylaws, Rules and Regulations of Palomar Medical Center -Escondido and Poway.
 - 4.4.3 Assisting the Medical Staffs and Hospital Administrations in achieving a high level of patient service with efficiency and economy.
 - 4.4.4 Assisting the Hospital Administrations in maintaining the Department, according to the needs of patients, the hospitals, the Medical Staffs, and the requirements of accrediting bodies.
 - 4.4.5 Being actively involved in the future planning of the Department and the hospitals.
 - 4.4.6 Fostering appropriate cost-effective use of emergency services.
 - 4.4.7 Calling special meetings of the Department or any of its committees at his or her own discretion upon three (3) days' notice.
- 4.5 The Chairperson-Elect shall serve as an assistant to the Chairperson and shall assume the duties of the Chairperson in his or her absence.

V. Department Meetings

- 5.1 The Department of Emergency Medicine will hold regular monthly meetings that will be immediately followed by Performance Improvement/Peer Review meetings. There will be no meetings in July or in December. Written minutes shall be maintained.
- 5.2 Per the Medical Staffs Bylaws, only active category Members may vote on department policies/procedures.

VI. Committees

- 6.1 The Department shall maintain standing committees as it deems necessary.
- 6.2 Peer Review The Department Chairperson-elect, or the Department Chairperson's designee, shall serve on the Medical Staff Peer Review Committee.

VII. Supervision of Residents

- 7.1 An attending physician of the Emergency Medicine staff, or from the admitting staff, will evaluate every patient who has been evaluated by a resident.
- 7.2 The supervising attending physician will enter a personal notation documenting his or her participation in the three (3) key components of Evaluation and Management Services (i.e. history, exam, and medical decision making).
- 7.3 The supervising attending physician will review each resident care plan and counter-sign the medical record of every patient seen by a resident, indicating endorsement of the plan.
- 7.4 An attending physician of the Emergency Medicine staff or from the admitting staff will directly supervise all patient care procedures performed by residents.

VIII. Amendments

- 8.1 Proposed amendments to these rules and regulations shall be distributed to active members of the department no less than fifteen (15) days before the scheduled department meeting at which the proposed amendments will be reviewed.
- Amendments shall be adopted by a simple majority vote of the voting members of the Department so long as quorum has voted. Prior to submitting the revisions to the Executive Committees, any required legal review by Palomar Health counsel will be obtained. Legal opinion shall be submitted to the Department and, as indicated, revisions and re-approval will occur. The revisions will then be submitted to the Medical Executive Committees and the Board of Directors for approval.

Approved by Department of Emergency Medicine	01/7/2024
Approved by Palomar Medical Center Escondido Executive Committee	01/29/2024
Approved by Palomar Medical Center Poway Executive Committee	01/30/2024
Approved by Palomar Health Board of Directors	02/12/2024

RADIATION ONCOLOGY CLINICAL PRIVILEGES

Name:	Page 1
Effective From:/ To:/	
 □ Palomar Medical Center Escondido □ Palomar Medical Center Poway – Only Consultative Privileges Offered 	
□ Initial Appointment □ Reappointment	
If any privileges are covered by an exclusive contract or an employment contract, practitioners who not a party to the contract are not eligible to request the privilege(s), regardless of education, training	

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.

experience. Exclusive or employment contracts are indicated by [EC].

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

Other Requirements

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

QUALIFICATIONS FOR RADIATION ONCOLOGY

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

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

AND

Current certification or active participation in the examination process, with achievement of certification within 4 years of appointment leading to certification in therapeutic radiology or radiation oncology by the American Board of Radiology or the American Osteopathic Board of Radiology, or another board with equivalent requirements.

Approved: Board of Directors 07/12/2010

REVISED: 01/2024

RADIATION ONCOLOGY CLINICAL PRIVILEGES

Name: Page	2
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Required Previous Experience : Applicants for initial appointment must be able to demonstrate consultation and treatment for at least 60 patients, reflective of the scope of privileges requested, during the past 12 months or demonstrate successful completion of an ACGME or AOA accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months.	
Focused Professional Practice Evaluation (FPPE)/ Monitoring guidelines: At least five (5) inpatient or outpatient consultations or procedures will be retrospectively monitored reflective of the scope of privileges requested.	
Reappointment Requirements : To be eligible to renew core privileges in radiation oncology, the applicant must meet the following maintenance of privilege criteria:	
Current demonstrated competence and an adequate volume of experience (consultation and treatment to 120 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.	
RADIATION ONCOLOGY CONSULTATIVE PRIVILEGES (NOT APPLICABLE IF REQUESTING RADIATION ONCOLOGY CORE PRIVILEGES)	
□ Requested Provide consultation to patients of all ages with cancer and related disorders. The consulting role shall be purely to evaluate and make recommendations for therapy and precludes any procedural privileges or admission of patients.	
Core Privileges	
	_
RADIATION ONCOLOGY CORE PRIVILEGES [EC] (NOT OFFERED AT PMC POWAY)	
Requested Comprehensive (multidisciplinary) evaluation and treatment planning for patients with cancer, related disorders, and therapeutic radiation for benign diseases, and consult on patients of all ages. May provide care to patients in the intensive care setting as well as other hospital settings in conformance with unit policies. Assess, stabilize, and determin disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that ar extensions of the same techniques and skills.	

REVISED: 01/2024 Approved: Board of Directors 07/12/2010

RADIATION ONCOLOGY CLINICAL PRIVILEGES

Name: Page 3
Effective From:/ To:/
SPECIAL NON-CORE PRIVILEGES (SEE SPECIFIC CRITERIA)
If desired, Non-Core Privileges are requested individually in addition to requesting the Core. Each individual requesting Non-Core Privileges must meet the specific threshold criteria governing the exercise of the privilege requested including training, required previous experience, and for maintenance of clinical competence.
INTRACAVITARY BREAST BRACHYTHERAPY [EC] (NOT OFFERED AT PMC POWAY)
Criteria: Successful completion of an accredited ACGME OR AOA postgraduate training program in radiation oncology that included breast brachytherapy OR completion of a course or training in high dose rate breast brachytherapy; AND experience and training in the particular radiation therapy system to be used. Required Previous Experience: Demonstrated current competence and evidence of the performance of at least 2 high dose rate breast brachytherapy procedures in the past 12 months. Applicants who do not meet this volume in the past 12 months will be monitored for the first 3 procedures at Palomar Medical Center. This requirement is separate from FPPE requirements. FPPE: Monitoring required for at least the first three (3) procedures. Maintenance of Privilege: Demonstrated current competence and evidence of the performance of at least 3 high dose rate breast brachytherapy procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.
□ Requested
INTRACAVITARY GYNECOLOGIC BRACHYTHERAPY [EC] (NOT OFFERED AT PMC POWAY)
Criteria: Successful completion of an accredited ACGME OR AOA postgraduate training program in radiation oncology that included gynecologic brachytherapy OR completion of a course or training in high dose rate gynecologic brachytherapy; AND experience and training in the particular radiation therapy system to be used. Required Previous Experience: Demonstrated current competence and evidence of the performance of at least 2 high dose rate gynecologic brachytherapy procedures in the past 12 months. Applicants who do not meet this volume in the past 12 months will be monitored for the first 3 procedures at Palomar Medical Center. This requirement is separate from FPPE requirements. FPPE: Monitoring required for at least the first three (3) procedures. Maintenance of Privilege: Demonstrated current competence and evidence of the performance of at least 3 high dose rate gynecologic brachytherapy procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes. □ Requested
INTRACAVITARY PROSTATE BRACHYTHERAPY [EC] (NOT OFFERED AT PMC POWAY)
Criteria: Successful completion of an accredited ACGME OR AOA postgraduate training program in radiation oncology that included prostate brachytherapy OR completion of a course or training in high dose rate prostate brachytherapy; AND experience and training in the particular radiation therapy system to be used. Required Previous Experience: Demonstrated current competence and evidence of the performance of at least 2 high dose rate prostate brachytherapy procedures in the past 12 months. Applicants who do not meet this volume in the past 12 months will be monitored for the first 3 procedures at Palomar Medical Center. This requirement is separate from FPPE requirements. FPPE: Monitoring required for at least the first three (3) procedures. Maintenance of Privilege: Demonstrated current competence and evidence of the performance of at least 3 high dose rate prostate brachytherapy procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.
□ Requested

REVISED: 01/2024 Approved: Board of Directors 07/12/2010

RADIATION ONCOLOGY CLINICAL PRIVILEGES

Name: Page
Effective From:// To://
STEREOTACTIC RADIOSURGERY AND RADIOTHERAPY [EC] (NOT OFFERED AT PMC POWAY)
Criteria: Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency in radiation oncology that included training not stereotactic radiosurgery (SRS); OR successful completion of a formal stereotactic training course at a recognized center with an established radiosurgery program providing a minimum of three days of training. Required Previous Experience: Demonstrated current competence and evidence of the performance of at least 4 radiosurgery procedures in the past 12 months. FPPE: Monitoring by an experienced radiosurgery physician is required for at least the first 4 cases. Maintenance of Privilege: Demonstrated current competence and evidence of the performance of at least 8 radiosurgery procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes
□ Requested
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.

- Administration of drugs and medicines related to radiation oncology and cancer supportive care
- Administration of radiosensitizers, radioprotectors under appropriate circumstances
- Combined modality therapy (e.g., surgery, radiation therapy, chemotherapy, or immunotherapy used concurrently or in a timed sequence
- Computer assisted treatment simulation and planning (external beam therapy)
- Imaging assisted treatment planning
- Interpretation of studies as they pertain to neoplastic or benign conditions
- Perform history and physical exam
- Placement of catheters, IV's, IV contrast dye and radiopaque devices that pertain to treatment planning
- Placement of fiducial markers, and/or rectal gel placement, into the prostate for radiation guidance, and/or rectal spacer gel placement, and/or transperineal biopsy.
- Radiation prescription of doses, treatment volumes, field blocks, molds and other special devices for external beam therapy
- Radiation therapy by external beam (photon, electron and superficial irradiation)
- Total body irradiation

Approved: Board of Directors 07/12/2010

REVISED: 01/2024

RADIATION ONCOLOGY CLINICAL PRIVILEGES

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ACI	NOWLEDGEMENT OF PRACTITIONER	
der	ve requested only those privileges for which by education, training, current experience, and onstrated performance I am qualified to perform and for which I wish to exercise at Palomar Health, I understand that:	
a.	In exercising any clinical privileges granted, I am constrained by Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation.	
b.	Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.	
Sig	ned Date	

REVISED: 01/2024 Approved: Board of Directors 07/12/2010



RADIATION ONCOLOGY CLINICAL PRIVILEGES

Name:	Page 1
Effective From:/ To:/	
 □ Palomar Medical Center Escondido □ Palomar Medical Center Poway – Only Consultative Privileges Offered 	
□ Initial Appointment □ Reappointment	
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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.

experience. Exclusive or employment contracts are indicated by [EC].

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

Other Requirements

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AND

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RADIATION ONCOLOGY CLINICAL PRIVILEGES

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Approvals: Dept of Radiology 01/09/2024 PMCE MEC 01/29/2024 Board of Directors 02/12/2024

RADIATION ONCOLOGY CLINICAL PRIVILEGES

Name: Page 3
Effective From:// To://
SPECIAL NON-CORE PRIVILEGES (SEE SPECIFIC CRITERIA)
If desired, Non-Core Privileges are requested individually in addition to requesting the Core. Each individual requesting Non-Core Privileges must meet the specific threshold criteria governing the exercise of the privilege requested including training, required previous experience, and for maintenance of clinical competence.
INTRACAVITARY BREAST BRACHYTHERAPY [EC] (NOT OFFERED AT PMC POWAY)
Criteria: Successful completion of an accredited ACGME OR AOA postgraduate training program in radiation oncology that included breast brachytherapy OR completion of a course or training in high dose rate breast brachytherapy; AND experience and training in the particular radiation therapy system to be used. Required Previous Experience: Demonstrated current competence and evidence of the performance of at least 2 high dose rate breast brachytherapy procedures in the past 12 months. Applicants who do not meet this volume in the past 12 months will be monitored for the first 3 procedures at Palomar Medical Center. This requirement is separate from FPPE requirements. FPPE: Monitoring required for at least the first three (3) procedures. Maintenance of Privilege: Demonstrated current competence and evidence of the performance of at least 3 high dose rate breast brachytherapy procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.
□ Requested
INTRACAVITARY GYNECOLOGIC BRACHYTHERAPY [EC] (NOT OFFERED AT PMC POWAY)
Criteria: Successful completion of an accredited ACGME OR AOA postgraduate training program in radiation oncology that included gynecologic brachytherapy OR completion of a course or training in high dose rate gynecologic brachytherapy; AND experience and training in the particular radiation therapy system to be used. Required Previous Experience: Demonstrated current competence and evidence of the performance of at least 2 high dose rate gynecologic brachytherapy procedures in the past 12 months. Applicants who do not meet this volume in the past 12 months will be monitored for the first 3 procedures at Palomar Medical Center. This requirement is separate from FPPE requirements. FPPE: Monitoring required for at least the first three (3) procedures. Maintenance of Privilege: Demonstrated current competence and evidence of the performance of at least 3 high dose rate gynecologic brachytherapy procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.
□ Requested
PROSTATE BRACHYTHERAPY [EC] (NOT OFFERED AT PMC POWAY)
Criteria : Successful completion of an accredited ACGME OR AOA postgraduate training program in radiation oncology that included prostate brachytherapy OR completion of a course or training in prostate brachytherapy; AND experience and training in the particular radiation therapy system to be used. Required Previous Experience : Demonstrated current competence and evidence of the performance of at least 2 prostate brachytherapy procedures in the past 12 months. Applicants who do not meet this volume in the past 12 months will be monitored for the first 3 procedures at Palomar Medical Center. This

□ Requested

ongoing professional practice evaluation and outcomes.

requirement is separate from FPPE requirements. *FPPE*: Monitoring required for at least the first three (3)

procedures. *Maintenance of Privilege*: Demonstrated current competence and evidence of the performance of at least 3 prostate brachytherapy procedures in the past 24 months based on results of

RADIATION ONCOLOGY CLINICAL PRIVILEGES

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EREOTACTIC RADIOSURGERY AND RADIOTHERAPY [EC] (NOT OFFERED AT PMC POWAY)
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Requested
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.

- Administration of drugs and medicines related to radiation oncology and cancer supportive care
- Administration of radiosensitizers, radioprotectors under appropriate circumstances
- Combined modality therapy (e.g., surgery, radiation therapy, chemotherapy, or immunotherapy used concurrently or in a timed sequence
- Computer assisted treatment simulation and planning (external beam therapy)
- Imaging assisted treatment planning
- Interpretation of studies as they pertain to neoplastic or benign conditions
- Perform history and physical exam
- Placement of catheters, IV's, IV contrast dye and radiopaque devices that pertain to treatment planning
- Placement of fiducial markers into the prostate for radiation guidance, and/or rectal spacer gel placement, and/or transperineal biopsy.
- Radiation prescription of doses, treatment volumes, field blocks, molds and other special devices for external beam therapy
- Radiation therapy by external beam (photon, electron and superficial irradiation)
- Total body irradiation

RADIATION ONCOLOGY CLINICAL PRIVILEGES

Na	me: Paį	ge 5		
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AC	NOWLEDGEMENT OF PRACTITIONER			
de	ive requested only those privileges for which by education, training, current experience, and nonstrated performance I am qualified to perform and for which I wish to exercise at Palomar Healt I understand that:	h,		
a.	In exercising any clinical privileges granted, I am constrained by Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation.			
b.	Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.			
Sig	ned Date			

RADY CHILDREN'S HOSPITAL SAN DIEGO DBA RADY CHILDREN'S SPECIALISTS OF SAN DIEGO PROFESSIONAL SERVICES AGREEMENT

TO:	Board Finance Committee					
MEETING DATE:	Wednesday, January 24, 2024					
FROM:	Omar Khawaja, MD, MBA, Chief Medical Officer					
	Background: This contract represents Palomar's desire to engage the no exclusive services of RCSSD physicians to render neonatal coverage and neonatal medic director services to the Neonatal Intensive Care Unit.					
Budget Impact: Budgeted						
Staff Recommendation: Approval						
Committee Questions:						
COMMITTEE RECOMMENDATION:						
Motion:						
Individual Action:						
Information:						
Required Time:						

PALOMAR HEALTH - AGREEMENT ABSTRACT

Section	Section PALOMAR REALTH - AGREEMENT ABSTRACT			
Reference	Term/Condition	Term/Condition Criteria		
	TITLE	Professional Services Agreement		
	AGREEMENT DATE	September 23, 2022		
	EFFECTIVE DATE	January 3, 2023		
	PARTIES	Rady Children's Hospital San Diego dba Rady Children's Specialists of San Diego and Palomar Health		
	PURPOSE	Provision of non-exclusive services of the RCSSD physicians to render neonatal coverage and neonatal medical director services to Palomar		
	SCOPE OF SERVICES	RCSSD engages and provides the professional services of certain qualified physicians who are licensed to practice medicine in CA and are qualified to render services in the specialty fields of neonatology, and are willing and able to provide the services.		
	PROCUREMENT METHOD	☐ Request For Proposal ☑ Discretionary		
	TERM	Initial term of agreement commences on the date the Escondido NICU receives licensure from CDPH and shall continue for a one (1) year period, unless sooner terminated in accordance with Section IX.		
	RENEWAL	No		
	TERMINATION	With/Without Cause – Either party may terminate this Agreement in the event of a material breach or default by the other party of any duty, obligation, or covenant contained in the agreement, if such material breach or default is not cured within fourteen (14) days after the provision of written notice of such a breach or default the non-breaching Party.		
	FAIR MARKET	☐ YES ☑ NO Compensation is in the amount of the variance (if		
	VALUATION	any) for the actual costs associated with the physician coverage,		
		less the amount collected by RCCSD for the provision of the		
		professional services. The medical director rate is		
		commensurate with similar specialties		
	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	X No YES - EXPLAIN:		
	JUSTIFICATION	Increase in NICU bed capacity		
	AGREEMENT NOTICED	☐ YES ☐ NO Methodology & Response:		
	ALTERNATIVES/IMPA			
	Duties	 □ Provision for Staff Education □ Provision for Medical Staff Education □ Provision for participation in Quality Improvement □ Provision for participation in budget process development 		
	COMMENTS			
	APPROVALS REQUIRED	□ VP □ CFO CEO □ BOD Committee □ □ BOD		

OPHTHALMOLOGY CALL AGREEMENT W/TIMELY REMUNERATION ADDENDUM JEAN-PAUL ABBOUD, M.D.

Board Finance Committee

TO:

Background: This contract represents the Call Agreement with Jean-Paul Abboud, M.D. Physician shall serve as a member of the On-Call Panel at Palomar Medical Center Escondido and Palomar Medical Center Poway on a rotating basis and provide Call Coverage for the specialty of Ophthalmology in accordance with the Medical Staff bylaws, rules and regulations, policies and procedures of Palomar Health. Call coverage services to Palomar Health's patients will be according to a reasonable call schedule developed by the parties, regardless of payor class, to patients not currently assigned to a particular physician, patients who present to the emergency department, and to hospital patients, including inpatients, who may be assigned to a particular physician but who require consultation or other physician services from an on-call panel physician ophthalmology specialist per the terms of this Agreement. Although the effective date of the agreement was December 1, 2022, to comply with applicable federal regulations, it was agreed through a Timely Remuneration addendum that Dr. Abboud would only be eligible for remuneration for services rendered under the agreement that had been performed within ninety (90) days of the date of final signature of the agreement, which was November 21, 2023. Budget Impact: Budgeted. Staff Recommendation: Committee Questions: COMMITTEE RECOMMENDATION: Individual Action: Information:	MEETING DATE:	Wednesday, January 24, 2024				
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. Call coverage services to Palomar Health's patients will be according to a reasonable call schedule developed by the parties, regardless of payor class, to patients not currently assigned to a particular physician, patients who present to the emergency department, and to hospital patients, including inpatients, who may be assigned to a particular physician but who require consultation or other physician services from an on-call panel physician ophthalmology specialist per the terms of this Agreement. Although the effective date of the agreement was December 1, 2022, to comply with applicable federal regulations, it was agreed through a Timely Remuneration addendum that Dr. Abboud would only be eligible for remuneration for services rendered under the agreement that had been performed within ninety (90) days of the date of final signature of the agreement, which was November 21, 2023. Budget Impact: Budgeted. Staff Recommendation: Committee Questions: COMMITTEE RECOMMENDATION: Motion: Individual Action:	FROM:	Omar Khawaja, MD, MBA, Chief Medical Officer				
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. Although the effective date of the agreement was December 1, 2022, to comply with applicable federal regulations, it was agreed through a Timely Remuneration addendum that Dr. Abboud would only be eligible for remuneration for services rendered under the agreement that had been performed within ninety (90) days of the date of final signature of the agreement, which was November 21, 2023. Budget Impact: Budgeted. Staff Recommendation: Committee Questions: COMMITTEE RECOMMENDATION: Motion: Individual Action:	Physician shall serve as a member of the On-Call Panel at Palomar Medical Center Escondido and Palomar Medical Center Poway on a rotating basis and provide Call Coverage for the specialty of Ophthalmology in accordance with the Medical Staff by-					
applicable federal regulations, it was agreed through a Timely Remuneration addendum that Dr. Abboud would only be eligible for remuneration for services rendered under the agreement that had been performed within ninety (90) days of the date of final signature of the agreement, which was November 21, 2023. Budget Impact: Budgeted. Staff Recommendation: Committee Questions: COMMITTEE RECOMMENDATION: Motion: Individual Action:	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					
Staff Recommendation: Committee Questions: COMMITTEE RECOMMENDATION: Motion: Individual Action:	applicable federal regulations, it was agreed through a Timely Remuneration addendum that Dr. Abboud would only be eligible for remuneration for services rendered under the agreement that had been performed within ninety (90) days of the date of final signature					
Committee Questions: COMMITTEE RECOMMENDATION: Motion: Individual Action:	Budget Impact: Budge	Budget Impact: Budgeted.				
COMMITTEE RECOMMENDATION: Motion: Individual Action:	Staff Recommendatio	n:				
Motion: Individual Action:	Committee Questions:					
Individual Action:	COMMITTEE RECOMM	IENDATION:				
	Motion:					
Information:	Individual Action:					
mornation.						
Required Time:						

PALOMAR HEALTH - AGREEMENT ABSTRACT

Section		TILALIII - AGRELIMENT ABSTRACT
Reference	Term/Condition	Term/Condition Criteria
Title	TITLE	Ophthalmology Call Coverage Agreement
Tido	***************************************	Timely Remuneration Addendum
1 st	AGREEMENT DATE	1) December 1, 2022
Paragraph		2) November 21, 2023
1 st	PARTIES	Palomar Health, a California healthcare district ("PH"), and Jean-Paul
Paragraph		Abboud, M.D. ("Physician").
Recitals B	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
1.1	SCOPE OF SERVICES	Physician to provide such services per the terms of this Agreement.
1.1	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	1) December 1, 2022 – November 30, 2024
		2) November 21, 2023 – November 30, 2024
	RENEWAL	None.
7.2	TERMINATION	Either party may terminate this agreement without cause upon ninety
		(90) days' prior written notice.
2.2	EAID MADICET	V VEG. T. NO. DATE COMPLETED: 5/24/2022
2.2	FAIR MARKET VALUATION	X YES □ NO – DATE COMPLETED: 5/31/2022
2.2	COMPENSATION	Fair Market Value. The parties understand and agree that the
2.2	METHODOLOGY	payments made per this Agreement represent fair market value for
	WETHODOLOGI	legitimate and needed services actually provided without regard to
		volume or value of referrals or other business generated between the
		Parties.
	BUDGETED	X YES □ NO – IMPACT:
	EXCLUSIVITY	X No ☐ YES – EXPLAIN:
Recitals A	JUSTIFICATION	Need for continued Ophthalmology consultation call coverage
& B		for the Emergency Departments at PMC Escondido and PMC
	A	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 Quality improvement ☐ Provision for participation in budget process development
	COMMENTS	None.
	APPROVALS REQUIRED	□ VP X-CFO □ CEO X-BOD-Committee – X-Finance; X-BOD
	A I NOVALO INLIGUINED	L VI A-OI O L OLO A-BOD-Odininittee - A-I mance, A-BOD

MEDICAL DIRECTOR AGREEMENT SURGICAL ACUTE CARE AND PROGRESSIVE CARE UNITS Gregory Scott Campbell MD APC

Board Finance Committee

TO:

MEETING DATE:	NG DATE: Wednesday, January 24, 2024			
FROM:	Omar Khawaja, M.D., CMO			
Background: This contract represents the duties of the Medical Director in support of the Surgical Acute Care and Progressive Care Units at Palomar Medical Center Escondido. Medical Director shall be responsible for the performance of the units along with other medical administrative services as outlined to the reasonable satisfaction of the Hospital.				
Budget Impact: Budge	ted			
Staff Recommendation	n:			
Committee Questions:				
COMMITTEE RECOMM	ENDATION:			
Motion:				
Individual Action:				
Information:				
Required Time:				

PALOMAR HEALTH - AGREEMENT ABSTRACT

Section	I ALGINAIT	HEALTH - AGREEMENT ABSTRACT
Reference	Term/Condition	Term/Condition Criteria
11010101100	TITLE	Gregory Scott Campbell MD APC - Medical Director Agreement - 5.20.2023
	AGREEMENT DATE	May 20, 2023
	PARTIES	Palomar Health, a California healthcare district, and Gregory Scott Campbell MD APC.
	PURPOSE	To serve as Medical Director of the Surgical Acute Care and Progressive Care Units.
	SCOPE OF SERVICES	Physician shall serve as Medical Director of the Surgical Acute Care Unit and Progressive Care Unit and shall be responsible for the medical direction and other medical administrative services set forth in the Agreement. Physician's duties as Medical Director include the duties listed in Exhibit A. Physician shall abide by all policies and procedures of the Medical Staff.
	PROCUREMENT METHOD	☐ Request For Proposal X Discretionary
	TERM	May 20, 2023 – May 19, 2026
	RENEWAL	None.
	TERMINATION	Either party may terminate this Agreement without cause upon thirty (30) days' written notice.
	FAIR MARKET VALUATION	X YES □ NO – DATE COMPLETED: 7/9/2021
	COMPENSATION METHODOLOGY	Fair Market Value. 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 a federal health care program or any other business generated by and among the Parties.
	BUDGETED	X YES □ NO – IMPACT:
	EXCLUSIVITY	X No ☐ YES – EXPLAIN:
	JUSTIFICATION	Need for medical directorship of the Surgical Acute Care & Progressive Care program (PMCE).
	AGREEMENT NOTICED	☐ YES X NO Methodology & Response:
	ALTERNATIVES/IMPACT	Medical oversight for Surgical Acute Care and Progressive Care Units.
	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 REQUIRED	X VP X-CFO □ CEO X-BOD-Committee - Finance; X-BOD

EMERGENCY ON-CALL AGREEMENT GENERAL SURGERY Matthew Schultzel D.O.

Board Finance Committee

MEETING DATE: Wednesday, January 24, 2024 FROM: Omar Khawaja, MD, MBA, Chief Medical Officer Background: This contract represents the On-Call Agreement with Matthew Schultzel D.O. 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:** Budgeted Staff Recommendation: **Committee Questions:** COMMITTEE RECOMMENDATION: Motion: Individual Action: Information: **Required Time:**

TO:

PALOMAR HEALTH - AGREEMENT ABSTRACT

Section	17120111711111	EALTH - AGREEMENT ABSTRACT
Reference	Term/Condition	Term/Condition Criteria
	TITLE	Matthew Schultzel D.O General Surgery Call
	AGREEMENT DATE	September 1, 2023
	PARTIES	Palomar Health, a California healthcare district ("PH"), and Matthew Schultzel D.O. ("Physician").
	PURPOSE	Palomar Health 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	September 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
	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

Amendment 3 to Crisis Stabilization Unit & Medical Director Services Agreement Senior Medical Associates, Inc.

Board Finance Committee

DATE:	Wednesday, January 24, 2024
FROM:	Don Myers, Director Behavioral Health
•	Medical Associates, Inc., provides psychiatric and Medical Director mar Health Crisis Stabilization Unit. This agreement is the third ginal contract.
Budget Impact: Budg	eted
	on: Secure the services of Senior Medical Associates, Inc., to sychiatric and Medical Director services for Palomar Health Crisis
Committee Questions	::
COMMITTEE RECOMM	MENDATION:
Motion:	
Individual Action:	
Information:	
Required Time:	

TO:

PALOMAR HEALTH - AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	1) Crisis Stabilization Unit (CSU) Services & Medical Director
		Services Agreement
		2) Amendment 1 to CSU Agreement
		3) Amendment 2 to CSU Agreement
	A	4) Amendment 3 to CSU Agreement
	AGREEMENT DATE	1) 11/1/2019
		2) 11/1/2020 3) 11/1/2021
		4) 11/01/2023
	PARTIES	Senior Medical Associates, Inc. (SMA) and Palomar Health
	PURPOSE	Psychiatric and Medical Director Services for CSU
	SCOPE OF SERVICES	Per contract terms
	PROCUREMENT METHOD	☐ Request For Proposal x☐ Discretionary
	TERM	1) November 1, 2019 – November 1, 2020
		2) November 1, 2019 – November 1, 2021
		3) November 1, 2019 – November 1, 2022
		4) November 1, 2023 – June 30, 2025
	RENEWAL	Yes
	TERMINATION	Either party may terminate the Agreement without cause, with termination to be effective ninety (90) calendar days following such notice
	FAIR MARKET VALUATION	✓ YES NO – DATE COMPLETED: 10/12/2023
	COMPENSATION METHODOLOGY	Contractor to submit monthly invoice with supporting documents per description of services provided as defined in agreement
	BUDGETED	✓ YES □ NO – IMPACT:
	EXCLUSIVITY	☑ No ☐ YES — EXPLAIN:
	JUSTIFICATION	Psych and MD services needed
	AGREEMENT NOTICED	☐ YES ☒ No Methodology & Response:
	ALTERNATIVES/IMPACT	
	Duties	 □ Provision for Staff Education □ Provision for Medical Staff Education □ Provision for participation in Quality Improvement □ Provision for participation in budget process development
	COMMENTS	
	APPROVALS REQUIRED	□ VP □ CFO □ CEO □ BOD Committee □ BOD

Amendment 1 to Psychiatric Services & Medical Director Services Agreement Senior Medical Associates, Inc.

Board Finance Committee

TO:

DATE:	Wednesday, January 24, 2024
FROM:	Don Myers, Director Behavioral Health
_	Medical Associates, Inc., provides psychiatric and Medical Director Health hospitals. This agreement is the 1 st amendment to the
Budget Impact: Budg	geted
	on: Secure the services of Senior Medical Associates, Inc., to psychiatric and Medical Director services for Palomar Health
Committee Questions	s:
COMMITTEE RECOMI	MENDATION:
Motion:	
Individual Action:	
Information:	
Required Time:	

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PALOMAR HEALTH – AGREEMENT ABSTRACT

Section		
Reference	Term/Condition	Term/Condition Criteria
	TITLE	 Psychiatric Services & Medical Director Services Agreement Amend 1 - Psychiatric Services & Medical Director Services Agreement
	AGREEMENT DATE	 November 1, 2022 October 30, 2023
	PARTIES	Senior Medical Associates, Inc. and Palomar Health
	PURPOSE	Psychiatric Services and Medical Director Services for Hospital
	SCOPE OF SERVICES	Per contract terms
	PROCUREMENT METHOD	☐ Request For Proposal ☑ Discretionary
	TERM	 November 1, 2022 – October 31, 2023 October 30, 2023 – February 29, 2024
	RENEWAL	Yes
	TERMINATION	Either party may terminate the Agreement without cause, with termination to be effective ninety (90) calendar days following such notice
/	FAIR MARKET VALUATION	☑ Yes □ No – Date Completed: 10/19/2023
	COMPENSATION METHODOLOGY	Contractor to submit monthly invoice with supporting documents per description of services provided as defined in agreement
	BUDGETED	YES □ NO – IMPACT:
	Exclusivity	☑ No ☐ YES – EXPLAIN:
	JUSTIFICATION	Psych and MD services needed
	AGREEMENT NOTICED	☐ YES ☑ No Methodology & Response:
	ALTERNATIVES/IMPACT	
	Duties	 □ Provision for Staff Education □ Provision for Medical Staff Education □ Provision for participation in Quality Improvement □ Provision for participation in budget process development
	COMMENTS	
	APPROVALS REQUIRED	□ VP □ CFO □ CEO □ BOD Committee □ BOD
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Emergency and Stroke on Call Agreement North County Neurology Associates dba The Neurology Center of Southern California

TO:	Board Finance Committee			
MEETING DATE:	Wednesday, January 24, 2024			
FROM:	Omar Khawaja, MD, MBA, Chief Medical Officer			
Background: Palomar Medical Center Escondido and Palomar Medical Center Poway have been designated as a Primary Stroke Centers by San Diego County. Pursuant to State and Federal law the hospitals have established specialty physician on-call panels in order to assure the availability of adequate physician coverage for emergency department patients. This new agreement will provide for Emergency and Stroke on-call coverage for unassigned inpatients requiring specialty consultations and stroke care. This coverage will be provided by the North County Neurology Associates dba The Neurology Center of Southern California.				
Budget Impact: B	udgeted			
Staff Recommendat	ion: Recommend approval.			
Committee Questio	ns/Suggestions/Requests:			
COMMITTEE RECOMM	ENDATION:			
Motion:				
Individual Action:				
Information:				
Required Time:				

PALOMAR HEALTH - AGREEMENT ABSTRACT

Section Reference	Term/Condition	Term/Condition Criteria
	TITLE	North County Neurology Associates dba The Neurology Center of Southern California – Emergency and Stroke Call Coverage Agreement - 11.1.2023
	AGREEMENT DATE	November 1, 2023
	PARTIES	Palomar Health, a California healthcare district, and North County Neurology Associates dba The Neurology Center of Southern California
	PURPOSE	PH desires to ensure that physicians practicing in the specialty of neurology are available and on call to provide needed medical services at the emergency departments of both hospitals by contracting with the Group to provide such services per the terms of the agreement.
	SCOPE OF SERVICES	Group shall identify and provide qualified Physicians to participate in PH's on-call program and render on-call neurology services to PH's patients according to a reasonable call scheduled developed by the parties, and to otherwise provide the services required by the agreement.
	PROCUREMENT METHOD	☐ Request For Proposal ☑ Discretionary
	TERM	November 1, 2023 - October 31, 2026
	RENEWAL	None
	TERMINATION	7.2 Termination for cause With Notice. Either party may terminate this Agreement upon thirty (30) days prior written notice due to the other party's breach of a material term of this Agreement
	FAIR MARKET VALUATION	☑ Yes ☐ No – Date Completed: 11-12-2022
	COMPENSATION METHODOLOGY	Daily per diem based on Fair Market Value and Commercial Reasonableness.
	BUDGETED	☑ YES ☐ NO – IMPACT:
	EXCLUSIVITY	☑ No ☐ YES – EXPLAIN:
	JUSTIFICATION	Palomar Health has established specialty physician on-call panels in order to assure the availability of adequate physician coverage for emergency department patients.
	AGREEMENT NOTICED	☐ YES ☑ NO Methodology & Response:
	ALTERNATIVES/IMPACT	None
	Duties	 □ Provision for Staff Education – NA □ Provision for Medical Staff Education - NA □ Provision for participation in Quality Improvement - NA □ Provision for participation in budget process development - NA
	COMMENTS	This contract covers Palomar Medical Center Escondido and Palomar Medical Center Poway.
	APPROVALS REQUIRED	☑ VP ☑ CFO □ CEO ☑ BOD Committee Finance ☑ BOD



Fiscal Year 2024 Financial Performance

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

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	Quarter to Date				Year to Date			
	Actual	Budget	Variance	Prior Year	Actual	Budget	Variance	Prior Year
	Dec-23	Dec-23		Dec-22	Dec-23	Dec-23		Dec-22
Key Volumes								
Discharges - Total	6,186	6,351	(2.6%)	6,534	12,086	12,666	(4.6%)	12,715
Acute - General	5,875	5,989	(1.9%)	6,226	11,499	11,942	(3.7%)	12,094
Acute Behavioral Health	172	154	11.7%	142	285	308	(7.5%)	308
Total Acute Discharges	6,047	6,143	(1.6%)	6,368	11,784	12,250	(3.8%)	12,402
The Villas at Poway	139	208	(33.2%)	166	302	416	(27.4%)	313
Patient Days - Total	35,986	38,302	(6.1%)	36,495	71,367	76,083	(6.2%)	71,898
Acute - General	26,109	25,813	1.2%	26,084	50,656	51,018	(0.7%)	50,891
Acute Behavioral Health	954	988	(3.5%)	966	1,978	2,065	(4.2%)	2,516
Total Acute Patient Days	27,063	26,802	1.0%	27,050	52,634	53,083	(0.9%)	53,407
The Villas at Poway	8,923	11,500	(22.4%)	9,445	18,733	23,000	(18.6%)	18,491
Acute Adjusted Discharges	10,030	10,395	(3.5%)	10,679	19,857	20,728	(4.2%)	20,985
Total Adjusted Discharges*	10,174	10,603	(4.1%)	10,887	20,179	21,144	(4.6%)	21,377
Acute Adjusted Patient Days	44,879	45,319	(1.0%)	45,296	88,685	89,759	(1.2%)	90,305
Total Adjusted Patient Days [*]	53,802	56,819	(5.3%)	54,741	107,418	112,759	(4.7%)	108,797
Acute Average Daily Census	294	493	(40.3%)	294	286	288	(0.9%)	290
Total Average Daily Census*	391	416	(6.1%)	397	388	413	(6.2%)	391
Surgeries - Total	2,901	2,948	(1.6%)	2,993	5,842	5,900	(1.0%)	5,963
Inpatient	1,507	1,502	0.3%	1,497	2,976	2,975	0.0%	2,937
Outpatient	1,394	1,445	(3.6%)	1,496	2,866	2,925	(2.0%)	3,026
Deliveries	921	999	(7.8%)	1,199	1,908	2,126	(10.2%)	2,387
ER Visits (Includes Trauma) - Total	29,966	36,469	(17.8%)	34,653	61,505	72,250	(14.9%)	68,632
Inpatient	4,266	4,602	(7.3%)	4,591	8,480	8,811	(3.8%)	8,786
Outpatient	25,700	31,867	(19.4%)	30,062	53,025	63,438	(16.4%)	59,846
* Includes The Villas at Poway								



	Quarter to Date				Year to Date			
	Actual	Budget	Variance	Prior Year	Actual	Budget	Variance	Prior Year
	Dec-23	Dec-23		Dec-22	Dec-23	Dec-23		Dec-22
Key Statistics								
Acute Average LOS - Days	4.48	4.36	(2.6%)	4.25	4.47	4.33	(3.2%)	4.31
Acute - General	4.44	4.31	(3.1%)	4.19	4.41	4.27	(3.1%)	4.21
Acute Behavioral Health	5.55	6.42	13.6%	6.80	6.94	6.70	(3.5%)	8.17
Average Observation Hours	40	35	(14.4%)	35	37	32	(15.5%)	32
Acute Case Mix-Excludes Deliveries	1.74	1.79	(2.8%)	1.79	1.75	1.78	(1.7%)	1.78
Acute Case Mix-Medicare Only	1.78	1.88	(5.3%)	1.88	1.74	1.84	(5.6%)	1.84
Labor Productivity by Hrs					Not Avail.	100.0%	-	102.6%
Days Cash on Hand					44.4			63.2
Financial Performance								
Operating Income	(7,006,893)	13,123,256	(20,130,149)	5,872,763	(18,886,226)	27,307,758	(46,193,984)	5,035,572
Net Income	(10,686,901)	10,896,072	(21,582,973)	2,704,781	(27,893,107)	16,600,353	(44,493,460)	(9,187)
Oper. Expenses/Adj. Patient Days	3,588	3,539	(1.4%)	3,335	3,628	3,498	(3.7%)	3,593
EBIDA Margin-Excludes PHMG	9.7%	16.2%	(6.5%)	10.4%	7.8%	15.2%	(7.4%)	10.1%
EBIDA-Excludes PHMG	19,457,484	32,573,289	(13,115,805)	26,524,856	30,944,132	67,921,916	(36,977,784)	42,281,945

Note: Financial Performance excludes GO Bonds



	Actual	Budget	Variance	Variance		Dollars/A	Dollars/Adjusted Patient	
	Dec-23	Dec-23	Dec-23	Volume	Rate/Eff	Actual	Budget	Variance
Adjusted Patient Days	53,802	60,841	(7,039)					
Adjusted Discharges	10,174	11,705	(1,531)					
Operating Revenue								
Gross revenue	1,339,110,823	1,388,246,319	(49,135,496)	(160,613,169)	111,477,673	24,890	22,818	2,072
Deductions from revenue	(1,142,506,107)	(1,167,259,787)	24,753,680	135,046,131	(110,292,451)	(21,235)	(19,185)	(2,050)
Net patient revenue	196,604,716	220,986,532	(24,381,816)	(25,567,039)	1,185,223	3,654	3,632	22
Other operating revenue	3,759,336	3,757,742	1,594	(434,752)	436,346	70	62	8
Total net revenue	200,364,052	224,744,274	(24,380,222)	(26,001,791)	1,621,569	3,724	3,694	30
Operating Expenses								
Salaries, wages & contract labor	97,463,171	97,162,669	(300,502)	11,241,236	(11,541,738)	1,812	1,597	(215)
Benefits	23,323,767	24,539,869	1,216,102	2,839,140	(1,623,038)	434	403	(30)
Supplies	28,416,659	30,694,610	2,277,951	3,551,213	(1,273,262)	528	505	(24)
Prof fees & purch svcs	34,525,056	35,915,190	1,390,134	4,155,208	(2,765,074)	642	590	(51)
Depreciation	14,337,518	10,685,841	(3,651,677)	1,236,298	(4,887,975)	266	176	(91)
Other	9,304,774	9,948,849	644,075	1,151,032	(506,957)	173	164	(9)
Total expenses	207,370,945	208,947,028	1,576,083	24,174,128	(22,598,045)	3,854	3,434	(420)
Income from operations	(7,006,893)	15,797,246	(22,804,139)	(1,827,663)	(20,976,476)	(130)	260	(390)
Non-operating revenue(expense)								
Property tax revenues ¹	5,875,000	5,875,000	-					
Interest Rate Swap	-	-	-					
Investment income	7,818,933	2,204,190	5,614,743					
Revenue bond interest expense	(12,550,148)	(8,981,599)	(3,568,549)					
Non-operating depreciation	(3,234,742)	(3,448,476)	213,734					
Other non-operating revenue(expense)	(1,589,051)	1,787,749	(3,376,800)					
Net Income ²	(10,686,901)	13,234,110	(23,921,011)					

9.7%

EBIDA Margin

(6.5%)

16.2%

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

²⁼ Excludes G.O. Bonds income / expense



	Current Year	Prior Year		Variance		Dollars/	Adjusted Patient	Day
	Dec-23	Dec-22	Change	Volume	Rate/Eff	Actual	Budget	Variance
Adjusted Patient Days	107,418	108,797	(1,379)					_
Adjusted Discharges	20,179	21,377	(1,198)					
Operating Revenue								
Gross revenue	2,657,841,330	2,442,067,755	215,773,575	(30,953,164)	246,726,739	24,743	22,446	2,297
Deductions from revenue	(2,266,897,299)	(2,027,125,700)	(239,771,599)	25,693,781	(265,465,381)	(21,104)	(18,632)	(2,471)
Net patient revenue	390,944,031	414,942,055	(23,998,024)	(5,259,383)	(18,738,641)	3,639	3,814	(174)
Other operating revenue	7,263,227	4,957,021	2,306,206	(62,830)	2,369,036	68	46	22
Total net revenue	398,207,255	419,899,076	(21,691,819)	(5,322,213)	(16,369,606)	3,707	3,859	(152)
Operating Expenses								
Salaries, wages & contract labor	195,736,380	199,981,495	4,245,115	2,534,762	1,710,353	1,822	1,838	16
Benefits	46,604,702	46,546,536	(58,166)	589,976	(648,143)	434	428	(6)
Supplies	57,952,495	58,578,588	626,093	742,483	(116,390)	540	538	(1)
Prof fees & purch svcs	71,479,273	67,118,033	(4,361,240)	850,720	(5,211,960)	665	617	(49)
Depreciation	27,340,653	24,003,078	(3,337,575)	304,239	(3,641,814)	255	221	(34)
Other	17,979,977	18,635,774	655,797	236,208	419,589	167	171	4
Total expenses	417,093,481	414,863,504	(2,229,977)	5,258,387	(7,488,365)	3,883	3,813	(70)
Income from operations	(18,886,226)	5,035,572	(23,921,796)	(63,826)	(23,857,970)	(176)	46	(222)
Non-operating revenue(expense)								
Property tax revenues ¹	11.750.000	10,050,000	1,700,000					
Interest Rate Swap	-	5,324,960	(5,324,960)					
Investment income	12,375,658	1,681,199	10,694,459					
Revenue bond interest expense	(24,952,278)	(23,613,014)	(1,339,264)					
Non-operating depreciation	(6,544,309)	(1,746,315)	(4,797,994)					
Other non-operating revenue(expense)	(1,635,953)	3,258,411	(4,894,364)					
Net Income ²	(27,893,107)	(9,187)	(27,883,919)					

7.8%

10.5%

EBIDA Margin

(2.7%)

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

²⁼ Excludes G.O. Bonds income / expense



	Quarter	Fiscal Year	
	Sep-23	Dec-23	2024
Adjusted Discharges	10,005	10,174	20,179
Operating Revenue			
Gross revenue	1,318,730,507	1,339,110,823	2,657,841,330
Deductions from revenue	(1,124,391,192)	(1,142,506,107)	(2,266,897,299)
Net patient revenue	194,339,315	196,604,716	390,944,031
Other operating revenue	3,503,890	3,759,337	7,263,227
Total net revenue	197,843,205	200,364,052	398,207,255
Operating Expenses			
Salaries, wages & contract labor	98,273,208	97,463,171	195,736,380
Benefits	23,280,935	23,323,767	46,604,702
Supplies	29,535,836	28,416,659	57,952,495
Prof fees & purch svcs	36,954,217	34,525,056	71,479,273
Depreciation	13,003,136	14,337,518	27,340,653
Other	8,675,203	9,304,774	17,979,977
Total expenses	209,722,536	207,370,945	417,093,481
Income from operations	(11,879,331)	(7,006,893)	(18,886,226)
Non-operating revenue (expense)			
Property tax revenues ¹	5,875,000	5,875,000	11,750,000
Investment Income	4,556,725	7,818,933	12,375,658
Interest Expense	(12,402,130)	(12,550,148)	(24,952,278)
Non-operating depreciation	(3,309,567)	(3,234,742)	(6,544,309)
Other non-operating revenue(expense)	(46,902)	(1,589,051)	(1,635,953)
Net income ²	(17,206,207)	(10,686,901)	(27,893,107)
EBIDA Margin	5.8%	9.7%	7.8%

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

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



	Quarter	Fiscal Year Ended	
Assets	Dec-23	Sep-23	Jun-23
Current Assets			
Cash and cash equivalents	22,753,898	610,238	64,696,934
Investments	65,633,278	110,503,682	119,515,170
Board Designated	5,735,931	6,495,823	13,678,054
Total cash, cash equivalents & investments	94,123,107	117,609,743	197,890,158
Patient Accounts Receivable	487,220,722	472,656,222	489,931,574
Allowance on accounts	(300,805,958)	(295,152,669)	(304,856,426)
Net accounts receivable	186,414,764	177,503,552	185,075,148
The trace and th	100, 11 1,701	177,303,332	103,073,110
Inventories	11,736,358	12,628,603	12,821,349
Prepaid expenses	12,737,697	16,271,135	12,445,827
Est. third party settlements	100,606,186	96,658,546	71,203,136
Other	63,191,952	63,437,727	58,923,618
Total current assets	468,810,065	484,109,306	538,359,237
Non-Current Assets			
Restricted assets	143,117,022	143,336,762	141,325,098
Restricted other	356,483	356,386	356,226
Total restricted assets	143,473,505	143,693,148	141,681,325
Property, plant & equipment	1,509,442,603	1,509,282,904	1,502,491,970
Accumulated depreciation	(644,784,158)	(634,928,705)	(624,985,735)
Construction in process	104,414,126	100,118,517	94,719,898
Net property, plant & equipment	969,072,572	974,472,715	972,226,134
Right of Use Assets	283,059,997	282,319,980	275,542,766
Investment related companies	6,250,792	6,033,974	5,427,952
Prepaid debt insurance costs	7,454,192	7,532,277	7,610,393
Other non-current assets	60,841,629	46,392,016	47,276,630
Total non-current assets	1,470,152,686	1,460,444,110	1,449,765,200
Total assets	1,938,962,752	1,944,553,416	1,988,124,437
Deferred outflow of resources-loss on			
refunding of debt	45,825,205	51,691,911	52,390,338
Total assets and deferred outflow of			
resources	1,984,787,957	1,996,245,327	2,040,514,775

	Quarter	· Ended	Fiscal Year Ended
Liabilities	Dec-23	Sep-23	Jun-23
Current Liabilities			
Accounts payable	58,457,267	47,130,883	71,057,718
Accrued payroll	32,831,367	25,823,872	28,007,606
Accrued PTO	23,871,989	24,766,960	25,380,895
Accrued interest payable	8,752,571	18,041,012	9,200,926
Current portion of bonds	8,520,000	8,110,000	8,110,000
Current portion of lease liab	15,184,893	13,552,125	10,965,390
Est. third party settlements	18,652,239	15,470,193	15,470,193
Other current liabilities	115,823,750	103,777,947	108,925,212
Total current liabilities	282,094,075	256,672,993	277,117,938
Long Term Liabilities			
Other LT liabilities	2,805,337	2,871,051	2,971,429
Bonds & contracts payable	726,144,882	740,546,572	741,260,101
Lease liabilities	290,408,260	288,503,251	282,271,128
Total long term liabilities	1,019,358,479	1,031,920,874	1,026,502,657
Total liabilities	1,301,452,554	1,288,593,868	1,303,620,595
Deferred inflow of resources-			
unearned revenue	7,085,452	6,924,505	6,763,558
Total liabilities and deferred inflow	7,065,452	0,924,303	0,703,336
of resources	1,308,538,006	1,295,518,373	1,310,384,153
of resources	1,308,338,000	1,233,310,373	1,310,364,133
Net Position			
Unrestricted	675,893,467	700,370,568	729,774,395
Restricted for other purpose	356,483	356,386	356,226
Total net position	676,249,950	700,726,955	730,130,621
Total liabilities, deferred inflow of			
resources and net position	1,984,787,957	1,996,245,327	2,040,514,774

Fiscal Year Ended Jun-23

71,060,218

28,007,606

25,380,895

27,289,238

16,903,916

10,965,390

15,470,193

65,286,498

2,971,430

1,387,561,498 282,271,128

1,672,804,055

1,933,168,006

50,402,272

1,983,570,279

123,396,362

123,752,588

2,107,322,867

356,226

260,363,951

				- Keinagiiii	ig ricalandare	
	Quarter	<u>Ended</u>	Fiscal Year Ended		Quarter	<u>Ended</u>
Assets	Dec-23	Sep-23	Jun-23	Liabilities	Dec-23	Sep-23
Current Assets				Current Liabilities		
Cash and cash equivalents	22,753,898	610,238	64,696,934	Accounts payable	58,457,792	47,130,883
Investments	65,633,278	110,503,682	119,515,170	Accrued payroll	32,831,367	25,823,872
Board Designated	5,735,931	6,495,823	13,678,054	Accrued PTO	23,871,989	24,766,960
Total cash, cash equivalents & investments	94,123,107	117,609,743	197,890,158	Accrued interest payable	23,167,241	23,806,880
				Current portion of bonds	18,035,044	17,625,044
Patient Accounts Receivable	487,220,722	472,656,222	489,931,574	Current portion of lease liab	15,184,893	13,552,125
Allowance on accounts	(300,805,958)	(295,152,669)	(304,856,426)	Est. third party settlements	18,652,239	15,470,193
Net accounts receivable	186,414,764	177,503,552	185,075,148	Other current liabilities	58,088,383	60,533,342
				Total current liabilities	248,288,947	228,709,300
Inventories	11,736,358	12,628,603	12,821,349			
Prepaid expenses	12,737,698	16,271,136	12,445,828	Long Term Liabilities		
Est. third party settlements	100,606,186	96,658,546	71,203,136	Other LT liabilities	2,805,338	2,871,052
Other	74,215,613	76,472,649	59,335,542	Bonds & contracts payable	1,363,687,176	1,377,798,053
Total current assets	479,833,727	497,144,228	538,771,161	Lease liabilities	290,408,260	288,503,251
				Total long term liabilities	1,656,900,774	1,669,172,356
Non-Current Assets						
Restricted assets	193,599,835	177,627,048	203,456,651	Total liabilities	1,905,189,721	1,897,881,657
Restricted other	356,483	356,386	356,226			
Total restricted assets	193,956,318	177,983,434	203,812,877	Deferred inflow of resources-		
				unearned revenue	64,820,819	50,169,110
Property, plant & equipment	1,509,442,603	1,509,282,904	1,502,491,970	Total liabilities and deferred inflow		
Accumulated depreciation	(644,784,158)	(634,928,705)	(624,985,735)	of resources	1,970,010,542	1,948,050,766
Construction in process	104,414,126	100,118,517	94,719,898			
Net property, plant & equipment	969,072,572	974,472,715	972,226,134	Net Position		
				Unrestricted	80,006,831	99,335,124
Right of Use Assets	283,059,997	282,319,980	275,542,766	Restricted for other purpose	356,483	356,386
				Total net position	80,363,314	99,691,510
Investment related companies	6,250,792	6,033,974	5,427,952			
Prepaid debt insurance and other costs	8,836,686	8,953,507	9,070,918			
Other non-current assets	60,841,629	46,392,016	47,276,630			
Total non-current assets	1,522,017,994	1,496,155,627	1,513,357,277	Total liabilities, deferred inflow of		
				resources and net position	2,050,373,856	2,047,742,277
Total assets	2,001,851,723	1,993,299,855	2,052,128,438			
Deferred outflow of resources-loss on						
refunding of debt	48,522,133	54,442,421	55,194,429			
Total assets and deferred outflow of			87			

2,050,373,856

resources

2,047,742,277

2,107,322,868

	Dec-23	YTD
CASH FLOWS FROM OPERATING ACTIVITIES:		
Income (Loss) from operations	(2,304,194)	(18,886,226)
Adjustments to reconcile change in net assets to net cash		
provided from operating activities:		
Depreciation Expense	4,467,373	27,340,653
Provision for bad debts	11,317,116	50,108,825
Changes in operating assets and liabilities:		
Patient accounts receivable	(9,802,842)	(51,448,435)
Property Tax and other receivables	(689,869)	(2,462,539)
Inventories	(13,097)	1,084,991
Prepaid expenses and other current assets	(1,929,292)	(2,872,465)
Accounts payable	2,237,430	(12,602,426)
Accrued compensation	3,420,035	1,633,596
Estimated settlement amounts due third-party payors	(6,150,795)	(26,221,004)
Other liabilities	(429,221)	(6,096,989)
Net cash provided from (used by) operating activities	122,644	(40,422,019)
CASH FLOWS FROM INVESTING ACTIVITIES:		
Net (purchases) sales of investments	(14,388,455)	71,680,574
Income (Loss) on investments	4,294,777	13,436,939
Investment in affiliates	(3,874,175)	(24,449,362)
Net cash provided from (used by) investing activities	(13,967,853)	60,668,151
CASH FLOWS FROM NON-CAPITAL FINANCING ACTIVITIES:		
Receipt of G.O. Bond Taxes	13,349,174	16,888,261
Receipt of District Taxes	7,644,043	9,819,915
Net cash provided from non-capital financing activities	20,993,217	26,708,176
CASH FLOWS FROM CAPITAL AND RELATED FINANCING ACTIVITIES:		
Proceeds on asset sale	0	17,740
Acquisition of property plant and equipment	(330,646)	(16,808,144)
G.O. Bond Interest paid	0	(20,804,366)
Revenue Bond Interest paid	0	(17,997,585)
ROU Interest paid	(1,120,910)	(6,904,502)
Payments of Long Term Debt	0	(18,922,306)
Payments of Long Term Lease Liabilities	(1,614,856)	(7,478,180)
Net cash provided from (used by) capital and related financing activities	(3,066,412)	(88,897,344)
NET INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS	4,081,596	(41,943,036)
CASH AND CASH EQUIVALENTS - Beginning of period	18,672,302	64,696,934
CASH AND CASH EQUIVALENTS - End of period	22,753,898	22,753,898



Supplemental Information

*Financial performance includes Palomar Health Medical Group (PHMG) and Consolidating Schedules

	PH	PHMG	PAC	Eliminations	Total
ASSETS					
Current assets	510,992,564	55,776,066	3,188,058	(47,600,435)	522,356,253
Capital assets - net	969,072,572	8,717,040	-	-	977,789,612
Right of use assets - net	283,059,997	46,127,768		(23,669,031)	305,518,734
Non-current assets	238,726,590	4,692,813	-	(5,381,151)	238,038,252
Total assets	2,001,851,723	115,313,687	3,188,058	(76,650,617)	2,043,702,852
Deferred outflow of resources	48,522,133	-	-	-	48,522,133
TOTAL ASSETS AND DEFERRED OUTFLOW					
OF RESOURCES	2,050,373,856	115,313,687	3,188,058	(76,650,617)	2,092,224,985
LIABILITIES AND NET POSITION					
Current liabilities	211,864,095	73,823,983	205,249	(51,201,866)	234,691,463
Long-term liabilities	1,379,305,148	4,181,151	-	(4,181,151)	1,379,305,148
Right of use lease liabilities	290,408,260	40,527,777	-	(20,834,204)	310,101,833
Total liabilities	1,881,577,503	118,532,911	205,249	(76,217,221)	1,924,098,443
Deferred inflow of resources - deferred revenue	88,433,039	-	-	-	88,433,039
Total liabilities and deferred inflow of resources	1,970,010,542	118,532,911	205,249	(76,217,221)	2,012,531,482
Invested in capital assets - net of related debt	(255,802,921)	7,168,380	_	766,604	(247,867,937)
Restricted	42,871,549	-	-	-	42,871,549
Unrestricted	293,294,686	(10,387,605)	2,982,809	(1,200,000)	284,689,890
Total net position	80,363,314	(3,219,224)	2,982,809	(433,396)	79,693,503
TOTAL LIABILITIES, DEFERRED INFLOW OF					
RESOURCES, AND NET POSITION	2,050,373,856	115,313,687	3,188,058	(76,650,617)	2,092,224,985

Note: Financial Performance includes GO Bonds



					YTD
	PH	PHMG	PAC	Elimination	Consolidated
OPERATING REVENUE:					
Net patient service revenue	364,099,438	46,451,273	-	-	410,550,711
Shared risk revenue	26,844,590	25,776,221	-	(2,837,084)	49,783,727
Other revenue	7,263,227	4,968,599	1,677,455	(248,461)	13,660,819
PH Program revenue	-	9,069,223	-	(9,069,223)	-
Total operating revenue	398,207,255	86,265,316	1,677,455	(12,154,768)	473,995,257
OPERATING EXPENSES	389,752,828	110,929,981	1,590,378	(15,195,423)	487,077,764
DEPRECIATION AND AMORTIZATION	27,340,653	2,083,841	-	<u> </u>	29,424,494
Total operating expenses	417,093,481	113,013,822	1,590,378	(15,195,423)	516,502,259
INCOME (LOSS) FROM OPERATIONS	(18,886,226)	(26,748,506)	87,076	3,040,655	(42,507,001)
NON-OPERATING INCOME (EXPENSE):					
Investment income	13,436,940	593	-	-	13,437,533
Interest expense	(43,024,136)	(125,469)	=	95,480	(43,054,125)
Property tax revenue	39,249,998	-	-	-	39,249,998
Other - net	(8,125,482)	2,056,842		(2,995,107)	(9,063,748)
Total non-operating expense - net	1,537,320	1,931,966	-	(2,899,628)	569,659
CHANGE IN NET POSITION	(17,348,906)	(24,816,540)	87,076	141,027	(41,937,343)
Interfund - PHMG	(25,875,181)	24,692,812	-	-	(1,182,369)
NET POSITION - Beginning of year	123,587,401	(3,095,496)	2,895,733	(574,423)	- 122,813,215
NET POSITION - Year to date	80,363,314	(3,219,224)	2,982,809	(433,396)	79,693,503

EBIDA EBIDA Margin 67,626,862 14.3%

Note: Financial Performance includes GO Bonds

(4) S&P 500

Investment Fund - Quarter Ended December 31, 2023 Yield Analysis

Investment Account:	% of Portfolio at 12/31/2023	Maturity Date	Yield	Benchmark	_	Actual to Benchmark Variance	Total Yield
Fidelity-Institutional Portfolio Treasury Fund	10.92%	Demand	5.26%	5.35%	(1)	(0.09%)	0.57%
State Treasurer Local Agency Investment Fund	59.71%	Demand	4.00%	3.81%	(2)	0.19%	2.39%
Morgan Stanley	24.62%	Various	2.91%	3.44% 11.69%	(3) (4)	(0.53%) (8.78%)	0.72%
Chandler Asset Management	3.30%	Various	2.45%	3.44% 11.69%	(3) (4)	(0.99%) (9.24%)	0.08%
Goldman Sachs Asset Management	1.45%	Various	5.00%	5.35%	(1)	(0.35%)	0.07%
Total:	100.00%					TOTAL YIELD:	3.83%
(1) Approximate average of 90 day T-E	Bills					PRIOR QUARTER:	3.38%
(2) LAIF annual average return based(3) BC Intermediate Government Cred						PRIOR YEAR:	1.77%



Revenue Cycle - Key Performance Indicators (KPIs)

October	November	December
2023	2023	2023

Board Package:

Total Net A/R (\$)	184,942,165	187,929,038	186,414,764
Net Days in A/R (Days)	89.7	88.7	87.2
DNFB (Days) - Post Suspense	1.7	1.4	2.2
True Cash Denial (%)	6.6%	5.4%	4.8%

<u>Total Net A/R:</u> 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.

<u>Net Days in A/R (Days)</u>: 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. If the

ADDENDUM C

CHARTER

of the

QUALITY REVIEW COMMITTEE

of the

PALOMAR HEALTH BOARD OF DIRECTORS

I. **Purpose.** The Quality Review Committee ("Committee") of the Palomar Health Board of Directors ("Board") aims to oversee performance improvement and patient safety of the Palomar Health Local Healthcare District ("District").

II. Membership.

- A. <u>Voting Membership</u>. The voting members ("Voting Members") of the Committee may consist of those individuals appointed as Voting Members of the Committee by the Chair of the Board ("Board Chair") in accordance with the Bylaws of Palomar Health ("Bylaws") and other applicable policies of the Board.
- B. <u>Alternate(s)</u>. Any alternate voting members ("Alternates") of the Committee may consist of those individuals appointed as Alternates of the Committee by the Board Chair in accordance with the Bylaws and other applicable policies of the Board. Alternates enjoy voting rights only in the absence of a Voting Member. Unless Alternates enjoy voting rights, they may attend the meetings of the Committee only as an observer.
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 - Chief Operations Officer of Palomar Health
 - Chief Financial Officer of Palomar Health
 - Chief Legal Officer of Palomar Health
 - Chief Medical Officer of Palomar Health
 - Chief Nurse Executive of Palomar Health
 - Senior Director, Quality and Patient Safety of Palomar Health
 - Medical Quality Office

- III. **Authority.** The Committee has no expressed or implied power or authority except to make recommendations to the Board related to the Committee's purpose and duties as described in this Charter.
- IV. **Duties.** The duties of the Committee may include:
 - A. Annual review of credentialing and privileging process of the medical staff.
 - B. Periodic review of caregiver performance using objective date to recognize success and identify opportunities for improvement.

V. Committee Chairperson, Liaison, and Assistant.

- A. The Chairperson of the Committee ("Committee Chairperson") may be the individual appointed as Committee Chairperson by the Board Chair in accordance with the Bylaws and other applicable policies of the Board.
- B. The Manufaction Condition of Chief Medical Officer may serve as the Palomar Health Administration's liaison ("Administrative Liaison") to the Committee.
- C. The Executive Assistant to the Safety, Infection Prevention may serve the assistant to the Committee ("Committee Assistant").
- VI. **Meetings.** The Committee will meet at least quarterly and more often as needed. A majority of the Voting Members will constitute a quorum. The Committee Assistant will record the meeting minutes and forward a copy to the Board Secretary upon approval of the meeting minutes by the Committee. The Committee Chairperson may coordinate with the Administrative Liaison to invite any officer, staff member, expert or other advisor who is not a member of the Committee to attend a meeting of the Committee to discuss topics germane to the purpose and duties of the Committee.

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- VIII. **Review and Revision.** The Committee may review this Charter annually. Any revisions proposed by the Committee to this Charter must be approved by the Board in accordance with the Bylaws.

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REDLINE

CHARTER

of the

STRATEGIC and FACILITIES PLANNING COMMITTEE

of the

PALOMAR HEALTH BOARD OF DIRECTORS

1. **Purpose.** The Strategic and Facilities Planning Committee ("Committee") of the Palomar Health Board of Directors ("Board") aims to review, assess and establish that the mission and vision of the Board are implemented in an effective and meaningful manner through the establishment and implementation of plans and programs that enhance the well-being of the citizens of Palomar Health healthcare district ("District"). In addition, the Committee aims to provide oversight for the development, expansion, modernization and replacement of Palomar Health facilities and grounds in order to promote the physical life of the assets belonging to the District; and to ensure the safety and well-being of those working in and being served in the facilities and on the grounds.

II. Membership.

- A. <u>Voting Membership</u>. The voting members ("Voting Members") of the Committee may consist of those individuals appointed as Voting Members of the Committee by the Chair of the Board ("Board Chair") in accordance with the Bylaws of Palomar Health ("Bylaws") and other applicable policies of the Board.
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- Chief Legal Officer of Palomar Health
- Chief Human Resources Officer of Palomar Health
- Vice President of Philanthropy of Palomar Health
- Senior Director of Managed Care and Business Development of Palomar Health
- One (1) board member of the Palomar Health Foundation, recommended by the Foundation and approved and appointed by the Committee Chairperson
- III. **Authority.** The Committee has no expressed or implied power or authority except to make recommendations to the Board related to the Committee's purpose and duties as described in this Charter.
- IV. **Duties.** The duties of the Committee may include:
 - A. Review and make recommendations to the Board regarding the District's short and long range strategic plans, master and facility plans, physician development plans and strategic collaborative relationships.
 - B. Review the development of new programs and system initiatives to ensure their direction is in accordance with the mission and vision of the organization and support the strategic plans of the District.
 - C. Monitor completion of annual goals in order to ensure their effective completion on behalf of Palomar Health.
 - D. Recommend educational programs and enhance Board members' understanding of trends in the local, state and national healthcare arena and issues affecting Palomar Health.
 - E. Review annually those policies within the Committee's purview and report the results of such review to the Board. Such reports shall include recommendations regarding the modification of existing, or creation of new policies.
 - F. Approve the annual Facilities Development Plan and regularly review updates on implementation of plan.
 - G. Receive a biannual Environment of Care report.

- H. Advise the Finance Committee of the Board with respect to the need of adequate projects funding.
- Ensure that the District is in compliance with governmental agency and accreditation requirements with respect to earthquake and disaster preparedness, fire and safety codes, environmental standards and physical security needs.
- J. Provide oversight regarding the maintenance of facilities and grounds and implementation of improvement projects.
- K. Ensure that a long-term facility plan is developed and updated regularly.
- L. Perform such other duties as may be assigned by the Board.

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CHARTER

CLEAN

of the

STRATEGIC and FACILITIES PLANNING COMMITTEE

of the

PALOMAR HEALTH BOARD OF DIRECTORS

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CHARTER

of the

GOVERNANCE COMMITTEE

of the

PALOMAR HEALTH BOARD OF DIRECTORS

I. Purpose. The Governance Committee ("Committee") of the Palomar Health Board of Directors ("Board") aims to oversee, establish, and monitor the effective and efficient management of the governmental processes of the Board.

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- A. Make an annual, comprehensive review of the Bylaws, policies and procedures and receive reports regarding same, and elicit recommendations on such issues from management and the Board.
- B. Provide guidance to the CEO in the development of education and orientation programs that enhance member understanding of Board stewardships, health care, issues and management.
- C. Assist in development and completion of an annual Board self-assessment and where appropriate make recommendations to enhance governance of the organization by its members.
- D. Review and where appropriate make recommendations to the Board on pending or existing state and federal legislation that could affect the direction of the District and Board member responsibilities.
- E. Annually reviewReview the boundaries of the District, as needed, to ensure compliance with its charter in the completion of health care stewardship responsibilities.
- F. Review such other issues associated with Palomar Health and/or Board governance and its effectiveness, including but not limited to Board member orientation and continuing education.
- G. Advise the Board on the appropriate structure and operations of all committees of the Board, including committee member qualifications.
- H. Monitor developments, trends, and best practices in corporate governance, and propose such actions to the Board.
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- C. Assist in development and completion of an annual Board self-assessment and where appropriate make recommendations to enhance governance of the organization by its members.
- D. Review and where appropriate make recommendations to the Board on pending or existing state and federal legislation that could affect the direction of the District and Board member responsibilities.
- E. Review the boundaries of the District, as needed, to ensure compliance with its charter in the completion of health care stewardship responsibilities.
- F. Review such other issues associated with Palomar Health and/or Board governance and its effectiveness, including but not limited to Board member orientation and continuing education.
- G. Advise the Board on the appropriate structure and operations of all committees of the Board, including committee member qualifications.
- H. Monitor developments, trends, and best practices in corporate governance, and propose such actions to the Board.
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- B. Members may request to place items on a Committee Meeting Agenda. The Committee Chairperson will consider each item so requested and determine whether or not it is an appropriate Committee Agenda item. The Committee Chairperson will make every effort to accommodate all reasonable individual Member requests including refining the requested agenda item as indicated. The Committee Chairperson may decline to put the item on a Committee Agenda based upon his or her judgment. Any disagreement, dispute or confusion over specific agenda items and/or their appropriateness on the agenda between the Committee Chairperson and Member that cannot be resolved will be referred to the Board Chair for resolution. The Board Chair may consult with the Board or Corporate Counsel, the CEO and/or other members of the Administration to achieve resolution. If the Board Chair determines the issue cannot be satisfactorily resolved, the Board Chair will take the issue to the Board.
- VIII. **Review and Revision.** The Committee may review this Charter annually. Any revisions proposed by the Committee to this Charter must be approved by the Board in accordance with the Bylaws.





Source: Administrative Board of Directors Applies to Facilities:
All Palomar Health Facilities

DocID: 21800 Revision: 12 Status: Official

Applies to Departments:
All Departments

Policy: Conflict of Interest Code

AMENDED AND RESTATED CONFLICT OF INTEREST CODE OF PALOMAR HEALTH

I. SUMMARY:

The Political Reform Act (California Government Code, Sections 81000 et seq.) requires state and local government agencies to adopt and promulgate conflict of interest codes. Pursuant to the Political Reform Act of 1974 (California Government Code, Sections 81000 et seq.) and regulations of the Fair Political Practices Commission (California Code of Regulations, Title 2, Sections 18100, et seq.). Palomar Health hereby adopts the following Conflict of Interest Code.

II. DEFINITIONS:

The definitions contained in the Political Reform Act of 1974, regulations of the Fair Political Practices Commission, and any amendments to the Act or regulations, are incorporated by reference into this conflict of interest code.

III. POLICY:

A. Standards of Practice

1. INCORPORATION OF FPPC REGULATION §18730:

The Political Reform Act, requires state and local government agencies to adopt and promulgate Conflict of Interest Codes. The Fair Political Practices Commission has adopted a regulation, California Code of Regulations, Title 2, Section 18730, which contains the terms of a standard Conflict of Interest Code, which can be incorporated by reference in an agency's code. After public notice and hearing, the standard code may be amended by the Fair Political Practices Commission to conform to amendments in the Political Reform Act. Therefore, the terms of California Code of Regulations, Title 2, Section 18730 and any amendments to it duly adopted by the Fair Political Practices Commission are hereby incorporated by reference. This regulation and the attached Appendix, designating positions and establishing disclosure categories, shall constitute the Conflict of Interest Code of Palomar Health.

2. STATEMENTS OF ECONOMIC INTERESTS: PLACE OF FILING:

Individuals in designated positions shall file their statements of economic interests (Form 700) with the Palomar Health Chief Executive Officer or designee. The Palomar Health Chief Executive Officer or designee shall make and retain a copy and forward the original to the San Diego County Board of Supervisors. The Palomar Health Chief Executive Officer or designee will make the statements available for public inspection and reproduction. (California Government Code, Section 81008).

IV. APPENDIX:

OFFICIALS WHO MANAGE PUBLIC INVESTMENTS

Palomar Health Officials who manage public investments, as defined by California Code of Regulations, Title 2, section 18701, subdivision (b), are not subject to Palomar Health's Conflict of Interest Code, but are subject to the disclosure requirements of the Act. (Gov. Code § 87200 et seq.) These positions are listed here for informational purposes only, and are required to file a statement of economic interest.

It has been determined that the positions listed below are officials who manage public investments [1]:

- . Members of the Board of Directors
- Chief Executive Officer
 Chief Financial Officer

The persons holding positions listed below are designated employees. It has been determined that these persons make or participate in the making of decisions which may foreseeably have a material effect on economic interests.

Designated Employee Position Title	Assigned Disclosure Category	
Chief Legal Officer	All	
Chief Medical Officer	5	
Chief Operations Officer	All	
Chief Administrative Officer	1, 2, 3, 5, 6	
Chief Human Resources Officer	1, 5, 6, 7	
Chief Financial Officer	All	
Vice President of Perioperative Services	6	
Chief Nurse Executive	5, 6	
Vice President of Continuum Care	1, 2, 5	
Vice President of Quality	6	
Vice President of Information Technology	6	
Vice President Revenue Cycle	6, 7	
Chief Information Officer	<u>1, 5, 7</u>	

DISCLOSURE CATEGORIES

The disclosure categories set forth below specify which kinds of economic interests are reportable. Such a designated employee shall disclose in his or her statement of economic interests those economic interests he or she has which are of the kind described in the disclosure categories to which he or she is assigned. It has been determined that the economic interests set forth in a designated employee's disclosure categories are the kinds economic interests which he or she foreseeably can affect materially through the conduct of his or her office.

Category 1.

All investments and business positions in business entities, and sources of income, including gifts, loans, and travel payments that are located in, do business in or own real property within the jurisdiction of Palomar Health.

Category 2.

All interests in real property which is located in whole or in part within, or not more than two (2) miles outside, the jurisdiction of Palomar Health.

Category 3.

All investments and business positions in, and sources of income from, business entities that are engaged in land development, construction or the acquisition or sale of real property within the jurisdiction of Palomar Health.

Category 4.

All investments and business positions in, and sources of income from, business entities that are banking, savings and loan, or other financial institutions.

Category 5.

All investments and business positions in, and sources of income from, business entities that provide services, supplies, materials, machinery, vehicles or equipment of a type purchased or leased by Palomar Health.

Category 6.

All investments and business positions in, and sources of income from, business entities that provide services, supplies, materials, machinery, vehicles or equipment of a type purchased or leased by the Designated Employee's Department.

Category 7.

All financial interests in investment advisors and managers; financial services providers, actuaries, and those providing fiduciary services (including recordkeeping) to fearment plans.

- [1] Individuals holding one of the above-listed positions may contact the FPPC for assistance or written advice regarding their filing obligations if they believe that their position has been categorized incorrectly. The FPPC makes the final determination whether a position is covered by Government Code section 87200.
- [2] Consultants shall be included in the list of Designated Employees and shall disclose pursuant to the broadest disclosure category in this Code subject to the following limitation: The Chairperson of the Board will determine and communicate with the Board in writing that a particular consultant, although a "designated position," is hired to perform a range of duties that are limited in scope and thus is not required to fully comply with the disclosure requirements described in this section. Such written determination shall include a description of the consultant's duties and, based upon that description, a statement of the extent of disclosure requirements. The Chairperson's determination is a public record and shall be retained for public inspection in the same manner and location as this Conflict of Interest Code. Nothing herein excuses any such consultant from any other provision of this Conflict of interest Code.

Document Owner:

DeBruin, Kevin

Approvals

- Committees:

_ Signers:

Kevin De Bruin

Kevin DeBruin, Chief Legal Officer (02/22/2022 11:51AM PST)

Revision Date:

[02/22/2022 Rev. 12]

Attachments:

(REFERENCED BY THIS DOCUMENT)

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https://www.lucidoc.com/cgi/doc-gw.pl?ref=pphealth:21800\$12.





Source:
Administrative
Board of Directors

Applies to Facilities:All Palomar Health Facilities

DocID:21800Revision:12Status:Official

Applies to Departments: All Departments

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Designated Employee Position Title	Assigned Disclosure Category
Chief Legal Officer	All
Chief Medical Officer	5
Chief Operations Officer	All
Chief Human Resources Officer	1, 5, 6, 7
Chief Financial Officer	All
Chief Nurse Executive	5, 6
Chief Information Officer	1, 5, 7

DISCLOSURE CATEGORIES

The disclosure categories set forth below specify which kinds of economic interests are reportable. Such a designated employee shall disclose in his or her statement of economic interests those economic interests he or she has which are of the kind described in the disclosure categories to which he or she is assigned. It has been determined that the economic interests set forth in a designated employee's disclosure categories are the kinds economic interests which he or she foreseeably can affect materially through the conduct of his or her office.

Category 1.

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Category 6.

All investments and business positions in, and sources of income from, business entities that provide services, supplies, materials, machinery, vehicles or equipment of a type purchased or leased by the Designated Employee's Department.

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All financial interests in investment advisors and managers; financial services providers, actuaries, and those providing fiduciary services (including recordkeeping) to retirement plans.

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Document Owner: DeBruin, Kevin

Approvals

- Committees:

Signers: Kevin DeBruin

Kevin DeBruin, Chief Legal Officer (02/22/2022 11:51AM PST)

Revision Date: [02/22/2022 Rev. 12]

Attachments:

(REFERENCED BY THIS DOCUMENT)

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https://www.lucidoc.com/cgi/doc-gw.pl?ref=pphealth:21800\$12.

ADDENDUM D



To: Board of Directors

From: Laura Barry, Chair, Board Finance Committee

Date: February 12, 2024

Re: Board Finance Committee, Wednesday, January 24, 2024, Meeting Summary

BOARD MEMBER ATTENDANCE: Directors Barry, Griffith & Pacheco

ACTION ITEMS:

 Minutes, Wednesday, October 25, 2023, Board Finance Committee Meeting: Reviewed and approved the draft minutes from the Wednesday, October 25, 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.
- Finance Committee Meeting Dates, Times & Locations: Reviewed and established the dates, time and location for the Finance Committee meetings for the remainder of Calendar Year 2024 and for January 2025.
 - The meetings will be held at 1:00 p.m. on the fourth Wednesday of each month that follows the end of a quarter, with two additional meetings in May and August – the dates are listed below:

2024 & JANUARY 2025 BOARD FINANCE COMMITTEE MEETING SCHEDULE					
WED	WED	WED	WED	WED	WED
April 24, 2024	May 22, 2024	July 24, 2024	August 28, 2024	October 23, 2024	January 22, 2025

Locations are:

- In the Linda Greer Conference Room at Palomar Health's Administrative Offices, located at 2125 Citracado Parkway, Suite 300, Escondido, CA. Members of the Committee who are elected members of the Board of Directors shall attend at that location
- A virtual option will be provided for elected members of the-Board who are not members of the Committee and wish to only observe, for non-Board member attendees, and for members of the public. Members of the public may attend either in person or virtually.
- Charter of the Finance Committee of the Palomar Health Board of Directors¹: Reviewed and recommended adoption of the Charter of the Finance Committee, with no recommended changes.
- December 2023 & YTD FY2024 Financial Report¹ Reviewed the Financial Reporting Packet and recommended approval of the December 2023 & YTD FY2024 financial report, which reflected YTD an operating loss of \$18.9M, and a YTD net loss of \$27.9M.

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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: February 12, 2024

Re: Board Governance Committee, January 4, 2024, Meeting Summary

BOARD MEMBER ATTENDANCE: Directors Jeff Griffith and Laura Barry

ACTION/INFORMATIONAL ITEMS

• **Board Governance Committee Meeting minutes, October 5, 2023:** The Governance Committee reviewed and approved the minutes from October 5, 2023

- Mandatory Training AB 1234/Sexual Harassment: The Governance Committee reviewed and recommend status quo and monitoring the FPPC website for updates
- **Removal of Board of Directors Elected Officers:** The Governance Committee reviewed and recommend revisiting the subject at the February meeting
- Disturbances at Public Meetings: The Governance Committee reviewed and recommend re-visiting the subject at the February meeting



To: Board of Directors

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

Date: February 12, 2024

Re: Wednesday, January 24, 2024 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 October 25, 2023, Meeting Minutes

• The BQRC meeting minutes from October 25, 2023, were approved.

Approval of Annual Review of Board Quality Review Committee (BQRC) Charter

 The Board Quality Review Committee (BQRC) Charter was approved with the addition of "Medical Quality Officer" to section II, C.

Approval of Annual Review of Board Quality Review Committee (BQRC) Reporting Calendar

• The Board Quality Review Committee Reporting Calendar was approved and changing the meeting start time to 3:30p.

Adoption of Board Quality Review Committee Meeting Resolution for Calendar Year 2024

The Board Quality Review Committee Resolution for Calendar Year 2024 was approved.

Approval of Contracted Services; PraxAir, VitalCare, Pharmerica, Agiliti Health Asset Management of Infusion Pumps.

The contracted service evaluations were approved.

STANDING ITEMS:

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

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



NEW BUSINESS:

Continuum of Care (Radiation Oncology, SNF, Women's Center, Wound Care) Annual Report

• Tyler Powell, Director of Rehabilitation Services, presented the Continuum of Care Annual Report.

Rehabilitation Services Annual Report

• Tyler Powell, Rehabilitation Services presented the Rehabilitation Services Annual Report.



To: Board of Directors

From: Mike Pacheco, Chair, Board Strategic and Facilities Planning Committee

Date: February 12, 2024

Board Strategic and Facilities Planning Committee

Re: January 24, 2024, Meeting Summary

BOARD MEMBER ATTENDANCE: Directors Pacheco, Barry & Griffith

INFORMATION ITEMS

• **Construction Project Update:** Reviewed a presentation providing updates on the status of projects across the District.

ACTION ITEMS

- Minutes, Thursday, November 30, 2023, Meeting: Reviewed and approved the draft minutes from the Thursday, November 30, 2023, Board Strategic & Facilities Planning Committee meeting.
- Strategic & Facilities Planning Committee Meeting Dates, Times & Locations: Reviewed and established the dates, time and location for the Strategic & Facilities Planning Committee meetings for the remainder of Calendar Year 2024 and for January 2025.
 - The meetings will be held at 3:00 p.m. on the last Tuesday of each odd month the dates are listed below:

2024 & JANUARY 2025 BOARD STRATEGIC & FACILITIES PLANNING COMMITTEE MEETING SCHEDULE					
Tuesday	Tuesday	Tuesday			
March 26, 2024	May 28, 2024	July 30, 2024			
Tuesday	Tuesday	Tuesday			
September 24, 2024	November 26, 2024	January 28, 2025			

• Charter of the Strategic & Facilities Planning Committee of the Palomar Health Board of Directors¹: Reviewed and recommended adoption of the Charter of the Strategic & Facilities Planning Committee, with changes as recommended.

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¹ Backup documentation may be reviewed elsewhere in the agenda packet