



**Regular Board of Directors Meeting  
3615 E Las Posas Road, Suite 161  
Camarillo, CA 93010  
Tuesday, June 6, 2017  
12:00 p.m.**

## **2017 Board Meeting Calendar**

January 24, 2017, 12:00 p.m.

February 28, 2017, 12:00 p.m.

March 28, 2017, 12:00 p.m.

April 25, 2017, 12:00 p.m.

May 23, 2017, 12:00 p.m.

June 6, 2017, 12:00 p.m. (Budget)

June 27, 2017, 12:00 p.m. (If Needed)

July 25, 2017, 12:00 p.m.

August – Dark

September 19, 2017, 12:00 p.m.

October 24, 2017, 12:00 p.m.

November 28, 2017, 12:00 p.m.

December 5, 2017, 8:30 a.m. (Board Work Study)

**AGENDA**

**June 6, 2017, 12:00 P.M.**  
Regular Meeting of the Board of Directors  
3615 E. Las Posas Road, Suites 160 & 161, Camarillo, CA 93010

**Board of Directors**

Rod Brown, MBA, President  
Christopher Loh, M.D., Vice President  
Scott W. Packham, DDS, Clerk of the Board  
Richard Loft, M.D., Director  
Mark Hiepler, Esq., Director

**Staff**

Kara Ralston, Chief Executive Officer  
Sue Tatangelo, Chief Resource Officer  
Sonia Amezcua, Chief Administrative Officer  
Karen Valentine, Clerk to the Board  
Renee Murphy, Accounting Manager

**Participants**

David Mitchell, CPA, *Mitchell & Associates*

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1. **Call to Order/Roll Call**
  2. **Pledge of Allegiance – Director Loft**
  3. **Amendments to the Agenda**  
Requests to change the order of the agenda, delete, add any agenda item(s), or to remove any consent agenda items for discussion.
  4. **Public Comment – Ca. GC Section 54954.3;** The Board reserves this time to hear from the public. Please complete a Speaker Card and submit to the Clerk to the Board. Your name will be called in order of the agenda item, or in order of received general topic Speaker Cards. Comments regarding items not on the agenda can be heard only; items on the agenda can be discussed. Three minutes per speaker are available; multiple speakers on the same topic/agenda item will be limited to 20 minutes total.
  5. **Presentations –**
  6. **Action Items:**
    - A. **Presentation/ Review/ Discussion/ Action:** Consideration, discussion, and recommendation for approval of Resolution 17-06 supporting a Camarillo Dementia Friendly Business Zone. **(Please see Section 6-A)**

**Suggested Motion:** Vote to adopt Resolution 17-06, supporting a Camarillo Dementia Friendly Business Zone.

Motion \_\_\_\_\_ Second \_\_\_\_\_ Abstain \_\_\_\_\_ Pass \_\_\_\_\_

Brown \_\_\_\_\_ Loh \_\_\_\_\_ Packham \_\_\_\_\_ Loft \_\_\_\_\_ Hiepler \_\_\_\_\_

**B. Presentation/ Review/ Discussion/ Action:** It is the recommendation of Administration that the Board of Directors approve the Letter of Agreement for Transition of Care, with Gold Coast Health Plan. **(Please see Section 6-B)**

**Suggested Motion:** Vote to approve the Letter of Agreement with Gold Coast Health Plan, for Transition of Care.

Motion \_\_\_\_\_ Second \_\_\_\_\_ Abstain \_\_\_\_\_ Pass \_\_\_\_\_

Brown \_\_\_\_\_ Loh \_\_\_\_\_ Packham \_\_\_\_\_ Loft \_\_\_\_\_ Hiepler \_\_\_\_\_

**C. Presentation/ Review/ Discussion/ Action:** To consider waiving the attorney-client privilege with regard to the invoices prepared by Ferguson Law & Leadership, pursuant to the Public Records Act request made by the Ventura County Star.

**Suggested Motion:** To waive the attorney-client privilege with regard to the invoices prepared by Ferguson Law & Leadership, and provide those invoices to the Ventura County Star, pursuant to its request.

Motion \_\_\_\_\_ Second \_\_\_\_\_ Abstain \_\_\_\_\_ Pass \_\_\_\_\_

Brown \_\_\_\_\_ Loh \_\_\_\_\_ Packham \_\_\_\_\_ Loft \_\_\_\_\_ Hiepler \_\_\_\_\_

**D. Presentation/ Review/ Discussion/ Action -** It is the recommendation of Administration that the Board of Directors approve Fiscal Year 2017/2018 Operating and Capital budgets. (Second reading may be waived.) **(Please see Section 6-D)**

**Suggested Motion:** Vote to approve Fiscal Year 2017/2018 Operating and Capital budgets.

Motion \_\_\_\_\_ Second \_\_\_\_\_ Abstain \_\_\_\_\_ Pass \_\_\_\_\_

Brown \_\_\_\_\_ Loh \_\_\_\_\_ Packham \_\_\_\_\_ Loft \_\_\_\_\_ Hiepler \_\_\_\_\_

**7. CEO Report**

**8. Board Reports**

**9. Future Meeting and Events**

**Board of Directors Meetings**

- Full Board (Budget Presentation – Second Reading)      Tuesday, June 27, 2017, 12:00 p.m.  
    Second reading may be waived
- Executive Committee (Brown/Loh)      Tuesday, July 18, 2017, 12:00 p.m.
- Finance Committee (Packham/Hiepler)      Tuesday, July 25, 2017, 11:00 a.m.
- Full Board      Tuesday, July 25, 2017, 12:00 p.m.
- Executive Committee (Brown/Loh)      Tuesday, September 12, 2017, 12:00 p.m.
- Full Board      Tuesday, September 19, 2017, 12:00 p.m.

**Events**

- 24<sup>th</sup> Annual Fainer/Tauber Awards  
Ventura County Medical Resource Foundation  
at Ancient Creek at Petersen Ranch, Somis  
Thursday, August 17, 2017; 5:00 p.m.
- 3<sup>rd</sup> Annual Party for the Park  
Pleasant Valley Recreation & Parks District  
at Camarillo Grove Park, Camarillo  
Saturday, August 26 2017; 5:30 p.m.
- 13<sup>th</sup> Annual Spirit Awards Gala  
United Way of Ventura County  
at Four Seasons Hotel, Westlake Village  
Saturday, August 26, 2017; no time listed

10. **Adjournment** - Having no further business, this meeting is adjourned at \_\_\_\_\_ p.m.

**Action Items** not appearing on the Agenda may be addressed on an emergency basis by a majority vote of the Board of Directors when need for action arises.

**ADA compliance statement;** In compliance with the Americans with Disabilities Act, if you need special assistance to participate in this meeting, please contact the Clerk to the Board of Directors, Karen Valentine, at (805) 482-9382. Notification 48 hours prior to the meeting will enable the District to make reasonable arrangements to ensure accessibility to this meeting.

Note: This agenda was posted at the Camarillo Health Care District Administrative Office and on our website, [www.camhealth.com](http://www.camhealth.com), on Friday, June 2, 2017, at 4:00 p.m.

**SECTION 6**

**ACTION ITEMS**

**SECTION 6-A  
CONSIDERATION, DISCUSSION, AND RECOMMENDATION FOR APPROVAL  
OF RESOLUTION 17-06 SUPPORTING A CAMARILLO DEMENTIA FRIENDLY  
BUSINESS ZONE.**

**JUNE 6, 2017**

# RESOLUTION NO. 17-06

## Supporting a Camarillo Dementia Friendly Business Zone

*Resolution of the Board of Directors  
Camarillo Health Care District  
Ventura County, California*

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**WHEREAS**, June is National Alzheimer’s disease awareness month; and

**WHEREAS**, Alzheimer’s disease is an irreversible and progressive brain disease that slowly erodes precious memories, thinking skills, and the ability to perform simple tasks; and

**WHEREAS**, every sixty-six seconds, someone develops Alzheimer’s disease, and by 2050 someone will develop the disease every thirty-three seconds; and

**WHEREAS**, Ventura County is one of eighty communities nationwide certified as a Dementia Friendly America Partner, and is taking a leadership role in the Dementia Friendly movement; and

**WHEREAS**, Camarillo is part of the greater Ventura County community that cares about its citizens, values dignity, and respects people and families battling dementia, and

**WHEREAS**, the Camarillo Old Town Association endeavors to establish the first Dementia Friendly Business Zone in California.

**NOW THEREFORE BE IS RESOLVED** that the Board of Directors of the Camarillo Health Care District stands with the Camarillo Old Town Association in its endeavors to build a Dementia Friendly Business Zone.

**ADOPTED, SIGNED, AND APPROVED** this 6th day of June 2017.

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Rod Brown, President  
Board of Directors  
Camarillo Health Care District

Attest: \_\_\_\_\_  
Scott Packham, Clerk of the Board  
Board of Directors  
Camarillo Health Care District

STATE OF CALIFORNIA)

COUNTY OF VENTURA) ss

I, **Scott Packham**, Clerk of the Board of Directors of the Camarillo Health Care District

**DO HEREBY CERTIFY** that the foregoing Resolution 17-06 was duly adopted by the Board of Directors of said District at a Regular Meeting held on the 6th day of June 2017, and it was adopted by the following vote:

AYES: \_\_\_\_\_

NAYS: \_\_\_\_\_

ABSENT: \_\_\_\_\_

\_\_\_\_\_  
Scott Packham, Clerk of the Board  
Board of Directors  
Camarillo Health Care District



**SECTION 6**

**ACTION ITEMS**

**SECTION 6-B**

**IT IS THE RECOMMENDATION OF ADMINISTRATION THAT THE BOARD OF DIRECTORS APPROVE THE LETTER OF AGREEMENT FOR TRANSITION OF CARE, WITH GOLD COAST HEALTH PLAN.**

**JUNE 6, 2017**



## LETTER OF AGREEMENT

### TERMS AND CONDITIONS

The purpose of this Letter of Agreement (“LOA”), effective on **June 1, 2017 (Effective Date)**, is to develop and implement an agreement that has been reached between the **Ventura County Medi-Cal Managed Care Commission** dba Gold Coast Health Plan ( hereinafter referred to as “Gold Coast”) and the **Camarillo Health Care District** (hereinafter referred to as “**Provider**”), to develop and implement a community health services **Transition of Care Program Pilot Program (“Pilot”)** for Members (as defined below) of Gold Coast’s **Medi-Cal Managed Care Plan as set forth herein**. Provider will render special services to the Members (as defined below) of Gold Coast’s Medi-Cal Managed Care Plan (“Plan” or “Medi-Cal”) as set forth herein. This LOA shall remain in effect until **May 31, 2018**, unless otherwise terminated sooner in accordance with the terms of this LOA.

### RECITALS

- A. WHEREAS**, Gold Coast and Provider in alignment with the “Triple Aim” of health care services desire to form a collaborative effort designed to reduce avoidable hospital, emergency room and physician visits through integration of community-based interventions, that increase patient satisfaction, improve health outcomes and reduce the per capita cost of healthcare.
- B. WHEREAS**, Provider is a uniquely qualified and a well experienced community-based organization specializing in a wide range of high-quality supportive services including care transitions, chronic disease self-management, senior nutrition and health benefits counseling. In addition, Provider maintains a Wellness and Caregiver Center that provides educational, practical and emotional support for family caregivers to Members identified by Provider.
- C. WHEREAS**, Gold Coast and Provider agree there is a longstanding need for a comprehensive program dedicated to transitioning the care of Members from hospital to home, focused on improving care, enhancing the patient experience, managing expenses and maximizing the opportunity of return to health at home.
- D. WHEREAS**, Provider has declared its intent to provide these health related services through direct services and by contracting for specific expertise and Gold Coast seeks to ensure immediate access to these services for its Members by entering into the Pilot with Provider under the terms of this LOA.

NOW, THEREFORE, the parties hereto expressly agree as follows:

**I. DEFINITIONS:**

- A. Member:** An eligible Medi-Cal beneficiary who is enrolled in the Plan. Only Non-Dual Members shall be eligible for this Pilot.
- B. Pilot:** Refers to a community based care transition of care program from hospital to home in an effort to reduce unnecessary readmissions, lower costs and improve patient health outcomes.
- C. Non-Dual Member:** A Member who does not have dual coverage with Medicare primary coverage and Plan coverage as the secondary carrier.
- D. Plan:** Gold Coast Health Plan Medi-Cal Managed Care Plan.
- E. Medi-Cal Managed Care State Contract:** Shall mean the contract between Gold Coast and the California Department of Health Care Services
- F. Targeted Population:** Refers to those Members who are determined by Gold Coast and Provider in writing to be eligible for the Pilot based on review of identifying criteria, by the embedded Transitional Health Coach and utilizing hospital census and patient EMR as defined in Section IV below.
- G. Transitional Health Coach:** Refers to an individual that uses evidence-based skillful conversation, clinical interventions and strategies to actively and safely engage client/patients in health behavior change. Health coaches are certified or credentialed to safely guide clients and patients who may have chronic conditions or those at moderate to high risk for chronic conditions

**II. PURPOSE AND INTENT:**

The Pilot is designed to enhance 30 to 90 day care transition interventions to Members discharged from Community Memorial Health System (“CMHS”). Each Member will receive an inpatient visit from a Transitional Health Coach, one to three home visits and weekly check-in calls following each visit. Additionally, Pilot staff will collaborate with and offer support to the home health agencies and other community health partners involved in the care of the Member post discharge.

It is the goal of this this Pilot to keep the Targeted Population of Members out of the emergency room and help avoid hospital re-admissions when possible. This Pilot allows both Gold Coast and Provider to address the broader aspect of a Member’s care, not only for medical conditions, but also for day-to-day improvement of functional abilities, cognitive status and social supports that will allow a Member to thrive at home and in the community.

A partnership with Provider offers an advantage in achieving better care:

- Experienced track record of successful innovative accomplishments

- Integrates critical community-based support as a "warm handoff" to a trusted source, long after a member has returned home
- Creates a new circle of communication back to the health plan regarding patient red flags
- Links to evidence-based health promotion programs to support member's return to health in the community
- Incorporates the silent army of family caregivers into the care plan with critical support and education for their job at home
- Prepares and provides person-centered supports for recovery at home

The parties endeavor to achieve the following outcomes through the Pilot:

- Readmission cost savings
- Emergency department cost savings
- Improved HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems), HEDIS and Star ratings relating to patient experience with post-hospital care due to enhanced patient support, satisfaction, and engagement
- Enhanced patient care long after the 30-day Hospital to Home intervention due to use of community services.

### III. DELIVERABLES

The Transitional Health Coach performs the initial inpatient bedside visit to introduce the Member and/or family caregiver to the Pilot, provide educational materials, and schedule the home visit. Once the Member is home, the Transitional Health Coach will provide a home visit and a minimum of three (3) follow-up coaching calls. The Transitional Health Coach will work closely and communicate often with Gold Coast and other entities, to facilitate the Member's return to optimum health at home.

The Pilot serves Members who are at high or increased risk of avoidable readmissions, and features three components:

- **30-Day Care Transition Intervention (initial/30-day program):** evidence-based solution developed by Dr. Eric Coleman, University of Colorado, as further described below.
- **30-Day Intervention Extension:** (2nd 30-day program) service for Members with complex needs who would benefit from continued intervention
- **Evidence-Based Community Health Maintenance Programs:** enrollment in evidence-based community health programs, supporting the Member in maintaining health in a community setting

#### **30-Day Care Transition Intervention**

The 30-Day Care Transition Intervention provides enhanced care coordination for Members discharging from CMHS, and reduces the risk that Members will return to the hospital or emergency department ("ED") in an unnecessary readmission event.

Patients in this program will receive an initial home visit and three weekly follow-up phone calls. The intervention includes the following tools and services:

- **Assessment of Patient Status:** including such elements as Member living situation, DME, current health status and understanding of condition, pain level, substance use/abuse,

- cultural preferences, impairments, ADLs, IADLs, presence of formal and informal services, interests and activities, mental health/abuse screening, and life planning activities
- **Patient Activation Assessment:** gauges patient ability and motivation to engage in this intervention and helps design a person-centered plan
  - **Home Safety Evaluation:** home and environment reviewed for safety hazards and fall risks
  - **Medication Reconciliation:** the Provider's intervention utilizes HomeMeds, a nationally recognized, evidence-based program providing web-based medication risk screening that enables non-medical personnel to address medication safety in partnership with a pharmacist who reviews the medication list and history (including chronic conditions, allergies, prior falls) for potential medication reconciliation problems and makes recommendations to the physician/provider for resolution
  - **PHQ9 Depression Screening:** appropriate loop back for linkage to mental health resources provided as indicated
  - **Mini Mental Status Exam (SPMSQ):** assess patient's cognitive status
  - **Physician Follow-Up:** ensures primary care physician appointments are scheduled and will assist with scheduling as needed
  - **Care Plan:** educates Member and/or caregiver on person-centered goals, and closes identified gaps in care to support the return to optimum health
  - **Linkage:** connects Member with available resources that support care plan goals and return to health
  - **Weekly "Check-In" Calls:** provides further support for care plan goals and addresses emerging issues that may hinder the continued return to optimum health
  - **Warm Hand-Off to Gold Coast Case Management:** identified for Members who will need follow-up once the Provider intervention is completed

#### IV. TARGET POPULATION

The Pilot's Target Population is determined through review of identifying criteria, by the embedded Transitional Health Coach, utilizing hospital census and patient electronic medical record ("EMR"), as follows:

- Two or more chronic conditions including Asthma, Chronic Obstructive Pulmonary Disorders (COPD), Diabetes, Traumatic Brain Injury (TBI), Chronic Heart Failure (CHF), Coronary Artery Disease (CAD), Hypertension (HTN), Chronic Liver Disease (CLD), dementia, or substance use, or
- One chronic condition with major depressive disorder, bipolar disorder, or psychotic disorders (including schizophrenia) as a secondary diagnosis, or
- Prescribed five (5) or more routine medications (polypharmacy), or
- At least one prior related hospitalization in the last year, or
- Three (3) or more ED visits in the last year

Exclusions include:

- Dual Eligible Members (Medicare/Medicaid)
- Homeless individuals
- Hospice patients
- Individuals with a primary diagnosis of mental health/substance abuse

#### V. PROGRAM OUTCOMES

**1. Provider agrees to:**

- Track improved quality of life, based on Quality of Life scale
- Track increased Member self-management activation based on Patient Activation Assessment
- Track self-reported measured improvements after successful class completion of Evidence-Based Community Health Maintenance Programs

**2. Gold Coast agrees to:**

- Track Plan hospital readmission rates at CMHS, based on the readmit rate prior to contract compared to readmit rate at close of contract
- Track decreased ED visits for Members enrolled in this Pilot.

**VI. METHODS OF MEASURING CARE**

Monitoring quality and care will be accomplished through the utilization of a variety of tools, including the Patient Activation Assessment, Caregiving Outcomes from results of the Zarit Caregiver Burden Scale, and Quality of Life measures.

Additionally, the Provider is an early adopter of the National Committee for Quality Assurance's (NCQA) new LTSS9 Case Management Accreditation, which has set the Provider onto a course of developing and utilizing a recognized standard focused on process and procedures that identify quality care and ultimately earns an organization NCQA Accreditation. The Provider will be able to use NCQA's standards of care to perform a gap analysis and identify areas to improve how care is provided.

The NCQA's provisions address the unique needs of individuals receiving LTSS:

- Implementation of a person-centered care plan
- Management of care transitions and reduction of unplanned transitions, where possible
- Coordination of care and services to help close gaps in care
- Implementation of a critical incident management system to promptly report, track, and follow up on incidents such as abuse, neglect and exploitation.

**VII. CULTURAL AND LINGUISTIC SERVICES**

Provider shall provide services to Members described in this LOA in a culturally, ethnically and linguistically appropriate manner. Provider shall take reasonable steps to recognize and integrate Members' practices and beliefs about disease causation and prevention into the provision of services. Provider shall comply with Gold Coast's language assistance program standards developed under California Health and Safety Code Section 1367.04 and Title 28 CCR Section 1300.67.04 and shall cooperate with Gold Coast by providing any information necessary to assess compliance. Gold Coast shall retain ongoing administrative and financial responsibility for implementing and operating the language assistance program. Provider has 24 (twenty-four) hours, 7 (seven) days a week access to telephonic interpretive services outlined in policies and procedures as set forth in Gold Coast's Provider Manual.

**VIII. ELIGIBILITY**

- a. Provider will verify Member eligibility prior to rendering services. Prior authorization from Gold Coast or referral from a primary care physician is not a guarantee of Member eligibility with Gold Coast or eligibility in the State Medi-Cal program.
- b. Member eligibility is available via telephone or electronic media. Gold Coast shall use best efforts to update Member eligibility information daily from DHCS eligibility tapes.
- c. Gold Coast will maintain (or arrange to have maintained) records, on Member eligibility. Gold Coast will promptly verify Member eligibility at the request of Provider.

## **IX. GOLD COAST RESPONSIBILITIES**

### **GOLD COAST shall:**

- A. Monitor and Evaluate:** Gold Coast shall monitor and evaluate the performance of Provider in meeting the terms of the LOA and the quality and effectiveness of the services provided under this LOA.
- B. Consultation and Technical Assistance:** Gold Coast shall provide consultation and technical assistance in monitoring the terms of this LOA.
- C. Compensation:** Gold Coast shall compensate Provider under this LOA as described in Attachment A. Any change in the maximum reimbursable amount shall be valid only when an amendment reflecting the change has been duly signed and approved by the parties to this LOA.

Provider shall invoice Gold Coast for amounts due Provider in accordance with this Section and Attachment A no more than on a monthly basis. Gold Coast shall pay such amounts due in accordance with this LOA within thirty (30) days of receipt of an invoice.

Notwithstanding anything to the contrary and for purposes of clarity, Provider shall provide Gold Coast with a list of potential Members to enroll in the Pilot. However, it is understood that such a list is not a guarantee that all Members on said list will enroll in the Pilot. As a result, payment by Gold Coast to Provider under this Pilot shall only be applicable to those Targeted Population who have enrolled in the Pilot.

In the event that a Member initially enrolls in the Pilot and subsequently decides to opt out prior to completion of the Pilot or a Member is determined to be non-compliant and thus terminated from the Pilot, the parties will meet and confer through the Joint Operations Committee (“JOC”) to review and discuss such case disposition and shall determine how best to reimburse Provider for said services under the Pilot while the Member was enrolled.

Medi-Cal is the payor of last resort and recognizes any other health coverage as the primary carrier. Gold Coast will not authorize any Member for referral to this Pilot for whom Gold Coast has not verified that Medi-Cal is the Member’s primary health coverage.

**D. Condition of Payment:** Gold Coast shall pay only for services specified in this LOA. Provider agrees the payment for services furnished under this LOA made in accordance with the rates stipulated herein, represents payment in full for said service. Provider shall not seek payment from Gold Coast for any service paid in whole or in part by any other payer.

## **X. MUTUAL RESPONSIBILITIES.**

**A.** Gold Coast and Provider shall establish mutually satisfactory methods for the exchange of such information as may be necessary in order that each party may perform its duties and functions under this LOA. Appropriate procedures will be implemented to insure that all information is safeguarded from improper disclosure in accordance with applicable state and federal laws and regulations.

It is understood by the parties that in order to provide a means for exchange of information and to review the status of the Pilot, a JOC shall be established. The JOC shall be comprised of Gold Coast and Provider clinical and operational business leaders and staff associated with this Pilot. Gold Coast shall have the right to reasonably determine the composition of the JOC. The JOC shall meet on a regular basis no less than quarterly during the term of this LOA.

**B.** Gold Coast and Provider agree to establish mutually satisfactory methods for problem resolution at the lowest possible staff level, with a procedure to pursue problem resolution up through Gold Coast's and Provider's respective chains of command, as deemed necessary.

## **XI. TERM, TERMINATION**

**A. Initial Term and Renewal** - This LOA will be effective as of the Effective Date through May 31, 2018 unless terminated sooner as set forth below. The LOA may be renewed for additional one-year terms upon mutual written agreement of the parties.

**B. Termination With or Without Cause** - Either party upon sixty (60) days prior written notice to the other party may terminate this LOA with or without cause.

In the event that this LOA should terminate prior to its initial term, the parties agree to meet and confer within thirty (30) calendar days prior to the date of termination to determine the amount of dollars per enrolled Member not utilized by Provider in the performance of this LOA. Such amounts shall be prorated for the time in which the Member was enrolled in the Pilot. Said prorated amount as agreed to by the parties, shall be repaid directly by Provider to Gold Coast prior to or upon the date of termination.

## **XII. GENERAL TERMS**

### **A. Inspection and Right to Audit**

Gold Coast may at its own expense and no more than once every three (3) months during the term of this LOA, upon thirty (30) calendar days prior written notice for mail-in audits and forty-five (45) calendar days written notice for on-site audits, or as required by state or federal law, and during normal business hours, inspect and audit any portion of Provider's



records that are relevant for the purpose of verifying compliance with this LOA, subject to Provider's legal obligations or privileges, including, but not limited to, obligations of confidentiality owed to third parties or its own employees.

## **B. Auditing and Monitoring**

Provider shall keep fiscal, program and management records. Fiscal records shall be kept in accordance with generally accepted accounting procedures.

Provider shall maintain all records pertaining to service delivery and all fiscal, statistical and management books and records pertaining to this program locally (within Ventura County). Records shall be available for examination and audit for a period of three (3) years after final payment under the LOA or until audits are completed and settled, whichever is later. Program data shall be retained and made available upon request or turned over to Gold Coast. Failure to maintain acceptable records per the requirements may be grounds for termination of the LOA.

## **C. Confidentiality**

Provider and Gold Coast agree to comply with, and to require its employees, agents, contractors, and volunteers to comply with, the provisions of state and federal confidentiality laws.

All applications and records concerning any individual made or kept by any public officer or agency or vendor in connection with the administration of any provision of the Welfare and Institutions Code relating to any forms of public social services for which funds are received by Provider under this LOA will be confidential and will not be open to examination for any purpose not directly connected with the administration of such service, except to the extent otherwise required by law or court order, including, but not limited to, the provisions of the California Public Records Act, Government Code section 6250, *et seq.* No person will publish or disclose, or use or permit, or cause to be published or disclosed or used, any confidential information pertaining to an applicant or recipient of services under this LOA except to the extent required by law or court order. Provider agrees to inform all consultants, employees of the above provisions and that any persons knowingly and/or intentionally violating the provisions of this paragraph may be guilty of a misdemeanor or other violation of law.

Nothing in this section will be construed as relieving Provider or its employees of the obligation to make reports mandated by laws and regulations of the State of California or restricting Provider's obligation to comply with the California Public Records Act or a binding court order.

## **D. Compliance with the State**

Provider agrees to comply with all applicable rules, regulations, requirements and directives of the State of California and comply with the Medi-Cal Managed Care State Contract, all of which impose duties and limitations upon Provider, which are equally applicable to and made binding upon Provider as though made with Gold Coast directly.

## **E. Assignment**

This LOA and the rights, interests and benefits hereunder will not be assigned, transferred, pledged, or hypothecated in any way by Provider and will not be subject to execution, attachment or similar process, nor will the duties imposed on Provider be, contracted or delegated without the prior written approval of Gold Coast and the California Department of Health Care Services (“DHCS”). Subcontractor agreements must state that assignment or delegation of the subcontract will be void unless prior written approval is obtained from DHCS.

#### **F. Amendment**

This LOA, including its one (1) attachment, attached hereto and incorporated herein, is the full and complete document describing services to be rendered by Provider to Gold Coast including all covenants, conditions and benefits.

This LOA may be amended at any time upon written agreement of both parties, subject to review and approval by DHCS, if required by law.

Notwithstanding the foregoing, Gold Coast may amend this LOA with at least **sixty** (60) days’ prior written notice to Provider in order to maintain compliance with state and federal law and the Medi-Cal Managed Care State Contract. Such amendment shall be binding and shall not require the consent of Provider. Such amendment may not alter, in any way, Provider’s right to terminate this LOA upon 60 days’ notice.

#### **G. Governing Law**

The validity, construction, interpretation and enforcement of this LOA will be governed by the laws of the State of California and the United States of America., and the contractual obligations of PLAN. Any provision required to be included in this LOA by law, regulation, or the Medi-Cal Managed Care State Contract will bind PLAN and PROVIDER whether or not provided in this LOA.

#### **H. HIPAA**

Provider and Gold Coast each acknowledge that it is a “Covered Entity” as that term is defined in the Standards for Privacy of Individually Identifiable Health Information adopted by the U.S. Department of Health and Human Services, as modified (the “HIPAA Privacy Rule”). Each party shall adequately protect the confidentiality of individually identifiable health information and shall comply with the HIPAA Privacy Rule and with all state and federal laws governing the confidentiality of Members’ individually identifiable health information. If the Provider identifies any inappropriate uses of or breach of the HIPAA Privacy Rule with respect to Gold Coast or Members, Gold Coast must notify PLAN’s Privacy Officer immediately.

## **I. Use of Name**

Each party reserves the right to, and to control the use of, its names, symbols, trademarks and service marks, presently existing or hereafter established and no party shall use another party's names, symbols, trademarks or service marks in any advertising or promotional materials or communication of any type or otherwise without the latter party's prior written consent.

## **J. Subcontract Arrangements**

- a. Written Gold Coast Approval.** Provider will not utilize the services of any subcontractors in providing the services required hereunder without Gold Coast's prior written approval for each named subcontractor (which consent Gold Coast may grant or withhold in Gold Coast's sole and absolute discretion).
- b. Binding to Agreement.** Any subcontract arrangement entered into by Provider for the delivery of services to Members shall be in writing.
- c. Immediate Removal.** Gold Coast may require the immediate removal of any of Provider subcontractors from assignment under this LOA if Gold Coast is not satisfied with the subcontractor's performance or if the subcontractor violates any terms or conditions under this LOA.
- d. Provider Responsibility.** Provider shall remain the prime contractor for the services and be responsible for the conduct and performance of each approved subcontractor as if Provider had performed all of the subcontracted services.
- e. Subcontract Template.** Upon Gold Coast request, Provider shall provide Gold Coast with a specimen of its standard forms of subcontract (together with any general variations to be used in terms and provisions of such standard forms) made, or to be made, with parties with which Provider has, or will have, a contractual relationship to provide services.
- f. Hold Harmless.** Provider acknowledges and agrees that it shall be solely responsible for paying subcontractor(s) for all services provided by its subcontractor(s), and to indemnify and hold harmless Gold Coast, for any negligent act, omission or breach of this LOA committed by subcontractor(s).

## **K. Notices**

All notices required or permitted to be given by this LOA shall be in writing and may be delivered personally, by certified or registered U.S. Postal Service mail, return receipt requested, postage prepaid, or by U.S. Postal Service Express mail, Federal Express or other overnight courier that guarantees next day delivery, and shall be delivered or mailed to the parties at the addresses set forth in the provider services agreement between the parties. Each party may change its address by giving notice as provided in this Section. Notices given by certified or registered mail, return receipt requested, shall be deemed given on the date of delivery shown on the receipt card, or if no delivery date is shown, the postmark date.

Notices delivered by U.S. Postal Service Express mail, Federal Express or overnight courier that guarantees next day delivery shall be deemed given twenty-four (24) hours after delivery of the notice to the U.S. Postal Service, Federal Express or overnight courier.

**Address for Notices: Provider**

Camarillo Health Care District  
3639 E. Las Posas Road, **Suite 117**  
Camarillo, CA 93010  
Attention Chief Resource Officer

**Address for Notices: Gold Coast**

Gold Coast Health Plan  
711 E. Daily Drive, Suite 196  
Camarillo, CA 93010-6082  
Attention: Senior Director  
Network Operations

**L. Encounter Data**

Provider shall submit to Gold Coast such encounter, claims information and other data information related to Provider’s provision of services as requested by Gold Coast and within the time periods as determined by Gold Coast (“Encounter Data”). No payments under this LOA shall be paid unless Provider submits true, correct and complete Encounter Data on a timely basis and in a form as required by this LOA and as reasonably requested by Gold Coast.

SIGNATURES ON FOLLOWING PAGE

IN WITNESS WHEREOF, this LOA is entered into by and between the undersigned parties.

I have reviewed the above and agree upon the terms and conditions and the payment rates for services provided to Members in accordance with this LOA. I understand that my signature hereto constitutes authorization for services to be provided to Members by all licensed professionals and other staff associated.

**FOR: CAMARILLO HEALTH  
CARE DISTRICT**

**FOR: GOLD COAST  
HEALTH PLAN**

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Name (Print): Kara Ralston

Name (Print): Dale Villani

Title: Chief Executive Officer

Title: Chief Executive Officer

Date: \_\_\_\_\_

Date: \_\_\_\_\_

TIN: \_\_\_\_\_

**SECTION 6**

**ACTION ITEMS**

**SECTION 6-C**

**TO CONSIDER WAIVING THE ATTORNEY-CLIENT PRIVILEGE WITH REGARD  
TO THE INVOICES PREPARED BY FERGUSON LAW & LEADERSHIP,  
PURSUANT TO THE PUBLIC RECORDS ACT REQUEST MADE BY THE  
VENTURA COUNTY STAR.**

**JUNE 6, 2017**

**SECTION 6**

**ACTION ITEMS**

**SECTION 6-D**

**IT IS THE RECOMMENDATION OF ADMINISTRATION THAT THE BOARD OF DIRECTORS APPROVE FISCAL YEAR 2017/2018 OPERATING AND CAPITAL BUDGETS. (SECOND READING MAY BE WAIVED.)**

**JUNE 6, 2017**

# Camarillo Health Care District

Proposed Operating & Capital Budget

Fiscal Year 2017-18

June 6, 2017

 CAMARILLO HEALTH CARE DISTRICT  
*Changing. Aging.*



# BOARD OF DIRECTORS

*Fiscal Year 2017/18*

<i>President</i>	Rod Brown, MBA
<i>Vice President</i>	Christopher Loh, MD
<i>Clerk of the Board</i>	Scott Packham, DDS
<i>Director</i>	Richard Loft, MD
<i>Director</i>	Mark Hiepler, Esq.

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# Mission & Vision

## MISSION

The mission of the Camarillo Health Care District is to be a highly respected, preferred partner in Ventura County's continuum of health care by providing valuable, effective, measurable and integrated community-based health services that optimize health and wellness.

## VISION

Ventura County is a model healthy community with seamless access to high quality health and community-based services that optimize well-being, empower healthy lifestyles, and build strong communities.

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# Guiding Principles

- ▶ Valuing public trust through transparency and integrity in governance
- ▶ Acknowledging the value of resources through accountable stewardship and visionary development of funding opportunities
- ▶ Engaging in Patient-Centered Care to tailor client services base on individual goals, preferences and values
- ▶ Improving patient outcomes, reducing costs, and improving quality of care across a continuum of providers
- ▶ Building core competencies and a knowledge base of emerging research, programs, technologies, policies and initiatives that improve health outcomes in the community, by recruiting, training and retaining a professional workforce
- ▶ Recognizing and honoring the significant contribution and sacrifice of family caregivers by providing excellence in education, training and support

# Revenue FY 2017/18

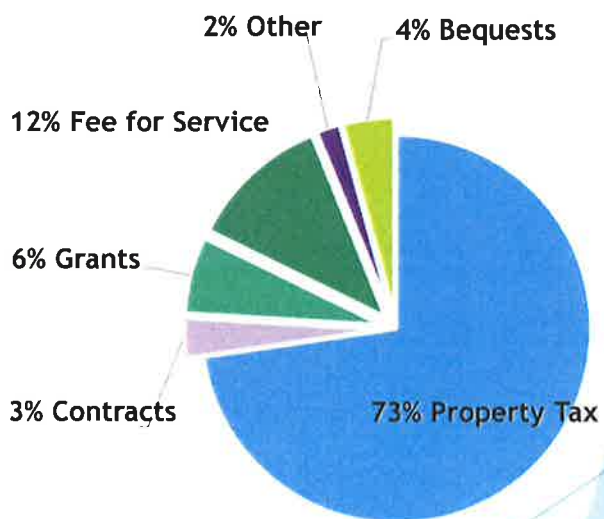
5

# Revenue Categories

(summary)

Tax Receipts:	\$2,546,160
Fee for Service:	\$407,283
Grants:	\$221,680
Bequests:	\$150,000
Contracts:	\$114,679
Other:	<u>\$64,627</u>

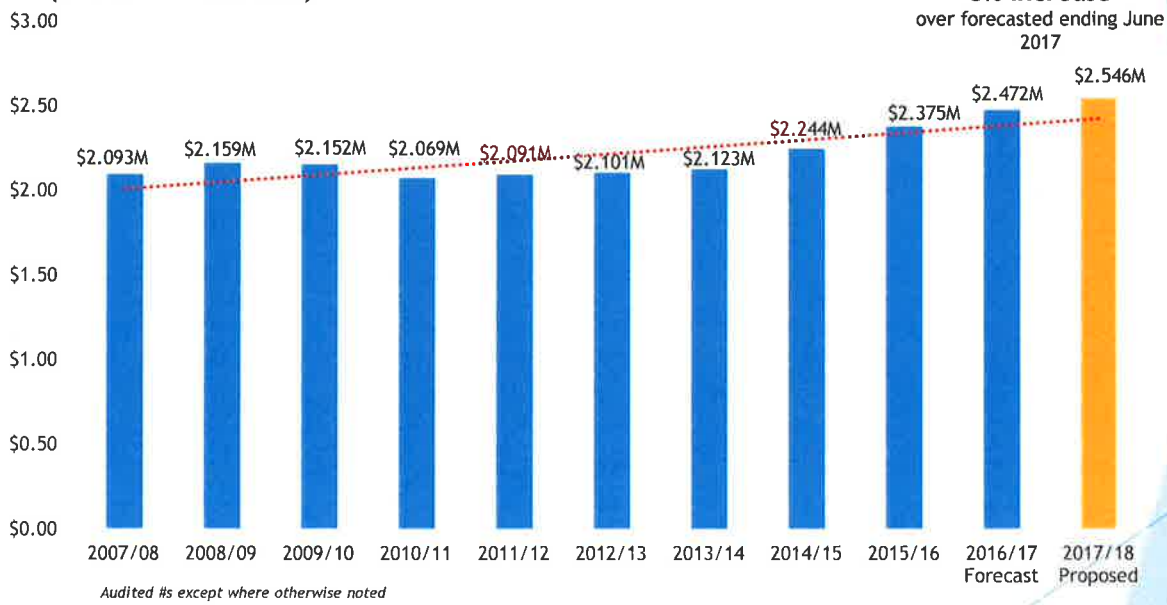
**TOTAL REVENUE \$3,504,429**



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# Property Tax Receipts 10-Year Review

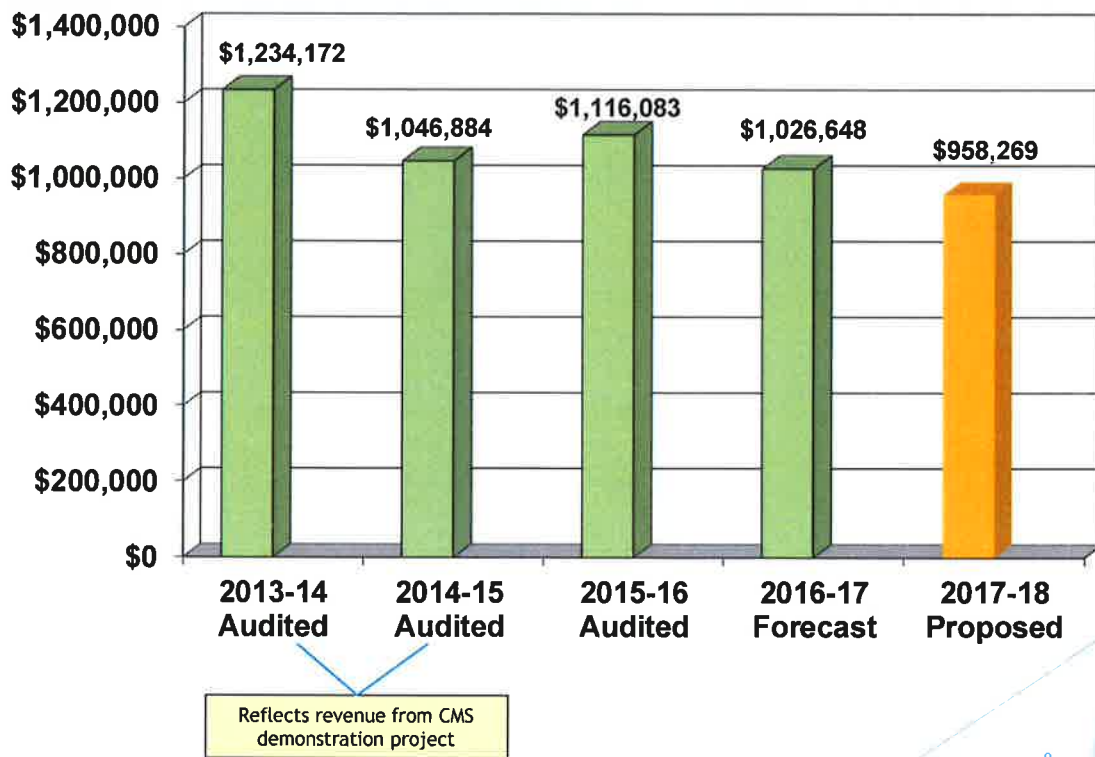
**Tax Disbursements/Receipts: 10-year Comparison  
(shown in millions)**



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# Non-Tax Revenue

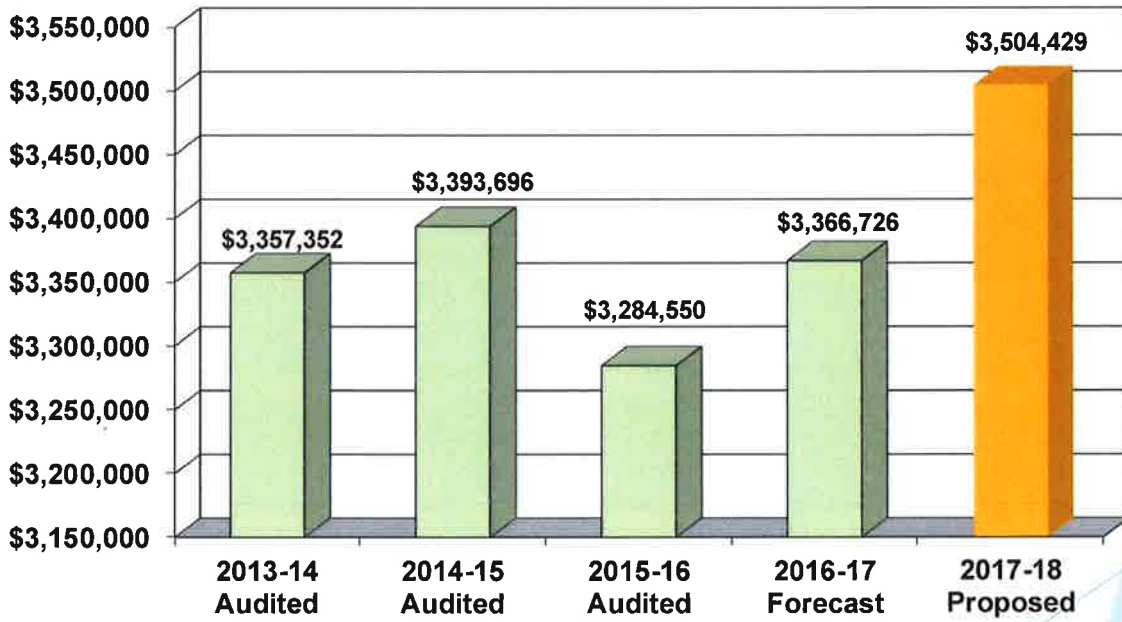
## Most Recent 5-Year Review



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# Total Revenue

## 5-year Review





# Fee Schedule

## Adult Day Center

# of Days/Month	Half Day 9:00am-12:30pm		Full Day 9:00am-3:00pm	
	Out District	In District	Out District	In District
4 Days	\$228.00	\$220.00	\$292.00	\$284.00
8 Days	\$440.00	\$424.00	\$568.00	\$552.00
12 Days	\$624.00	\$600.00	\$816.00	\$792.00
16 Days	\$800.00	\$768.00	\$1,056.00	\$1,024.00
20 Days	\$980.00	\$940.00	\$1,300.00	\$1,260.00

**Extended Hours**  
available upon prior arrangement.  
Monday-Thursday  
**3:00pm-5:30pm**  
add \$24.00/day

	Half Day 9:00am-12:30pm		Full Day 9:00am-3:00pm	
	Out District	In District	Out District	In District
Extra Days	\$55.00	\$53.00	\$71.00	\$69.00

# Fee Schedule

## Facility Use/Rental

Room	Rate/Hour	Minimum
Bldg F: Boardroom (Internet/AV)	\$40	2 hr.
Bldg F, 160 (Internet/AV)	\$45	2 hr.
Bldg F, 161	\$40	2 hr.
Bldg F, 160 + 161	\$80	2 hr.
Bldg E, 115	\$45	2 hr.
Bldg E, 124 with Kitchen Use	\$50	2 hr.
Bldg E, 124 no Kitchen Use	\$40	2 hr.
Bldg H, Classroom (Internet/AV)	\$50	2 hr.
Bldg H, Group Room	\$35	2 hr.
Bldg H, Tranquility Room	\$35	2 hr.
Bldg H, Office 1 or 4	\$20	2 hr.

- Use of Adult Day Center/Commercial Kitchen fees determined upon request/purpose

- Coffee Service available upon request: \$50-\$75

- AV & Equipment Use: \$10-\$30

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# Fee Schedule

## Transportation

Starting Location	Destination	Fare (ea way)
Camarillo	<i>Anywhere in Camarillo</i>	\$20.00/way
Camarillo	<i>Oxnard</i>	\$25.00/way
Camarillo	<i>Thousand Oaks/WLV</i>	\$25.00/way
Camarillo	<i>Ventura</i>	\$30.00/way
Camarillo	<i>West Hills/W Hills</i>	\$50.00/way

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# Fee Schedule

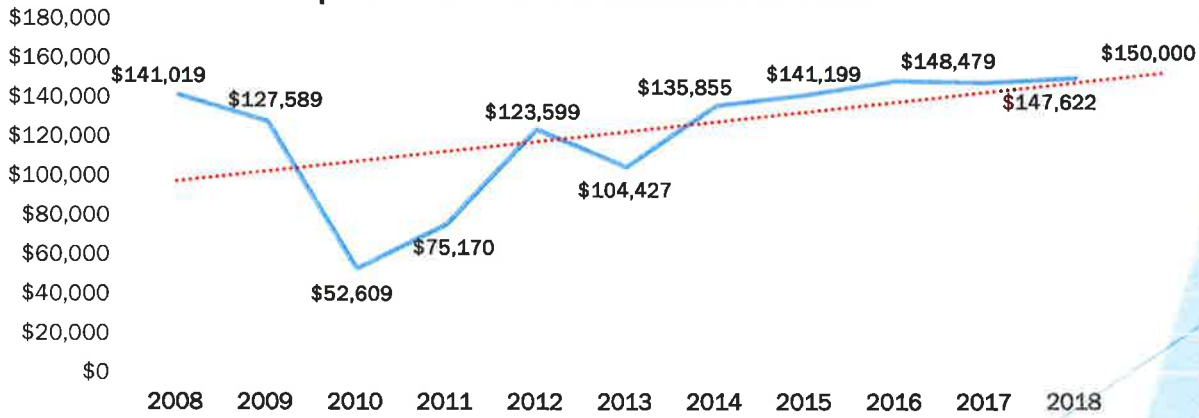
## Transportation

PV Lions Agreement for Braille Transport

*\$72,250 since January 2009; ADC "Lion's Den" Sponsor*

Russell Fischer Bequest Distribution

**Russell Fischer Bequest: 10-Year Distribution Review**



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# Fee Schedule

## Other

### Senior Nutrition Program

- Partial funding by VCAAA (\$13,718 increase YOY; \$69,660)
- Partial support by City of Camarillo (\$37,000; same for last 5 years)
- Donor Support (\$25,000; HDM & Congregate)
- \$3.00 donation...recommended by VCAAA, not enforceable or trackable
- Meals served since inception: 263,000+
- 97% of total meals served are Home Delivered

### Produce Day

- FOODShare collaborative
- No means test

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# Fee Schedule

## *Other*

### **Community Education**

- Room Rentals
  - Long-term or series
  - Event-specific
- Split fee agreement
  - District retains 30% of collected fees
- Speaker/Instructor mandated fees
  - Minimum enrollment requirements
  - Cancellations/refunds
- Materials Fee

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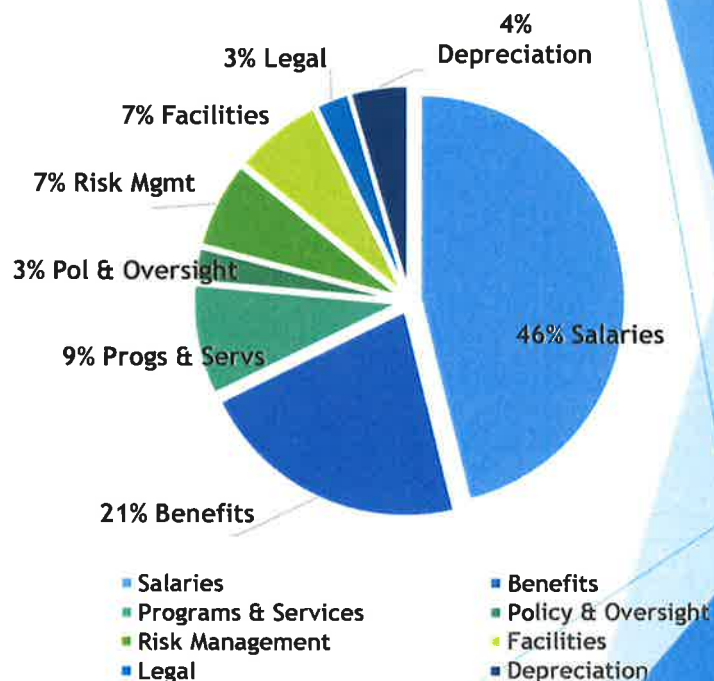
# Expenditures FY 2017/18

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# Expenditure Categories

(summary)

Salaries:	\$1,591,704
Benefits/OPEB/PERS:	\$744,165
Programs/Services:	\$300,279
Facilities:	\$240,030
Risk Management:	\$234,789
Depreciation:	\$156,523
Legal:	\$91,000
Policy/Oversight:	\$90,655
<b>TOTAL EXPENDITURES</b>	<b>\$3,449,145</b>

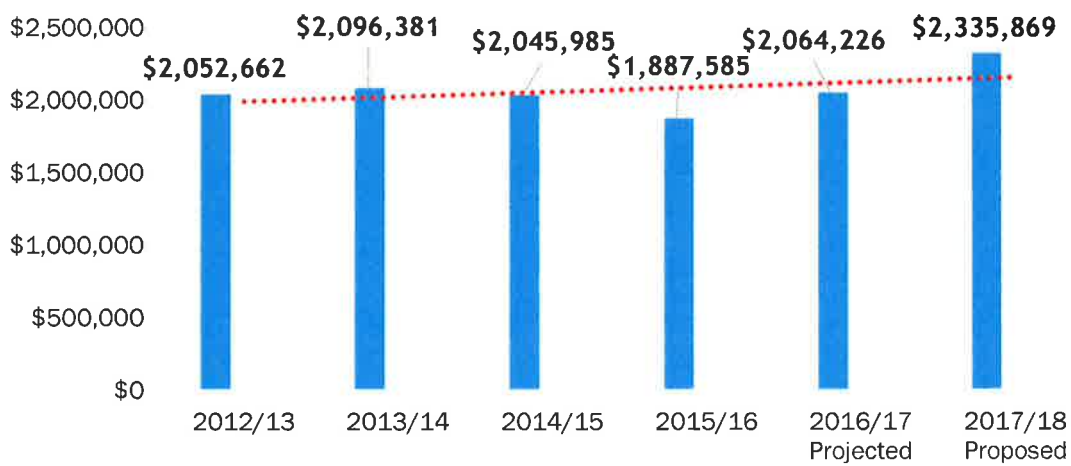


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# Salaries + Benefits

## 5-Year Review; Total Labor Cost



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# Workforce

Tenure	% of Total Workforce	# of EEs
10+ years	30%	10
2-10 years	44%	15
>2 years	26%	9(*)
<i>*includes proposed positions</i>		<b>34*</b>

Hours worked per week	# of Employees per category
40 hrs/wk	20 employees
39-30 hrs/wk	5 employees
Less than 30 hrs/wk	9 employees

# Benefits

## Benefits

- Some required by law
- Some affected by factors over which there is minimal or no control
- Some have been strategically developed to recruit/retain excellent staff

## Associated Expenses & Line Items

- *Workers Compensation Insurance*
- *Payroll Taxes*
- *Life/ADD*
- *PERS*
- *Health*
- *Other Post Employment Benefits (OPEB & PERS Liability)*

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# Programs & Services

## Programs & Services

Fee for Service: \$407,283  
Contracts: \$114,679  
Grants: \$184,680

## Associated Expenses & Line Items

- Advertising & Promotion
- Bank/Credit Card Changes
- Contractors
- Community Partnerships
- Community Support
- Community/Staff Relations
- Continuing Education
- Dues/Subscriptions
- Educator Costs
- Fleet Maintenance
- Gas & Oil
- Legal/Professional
- Mileage
- Minor Equipment Printing
- Postage
- Program Materials & Activities
- Refunds
- Supplies
- Tax, Licenses & Fees

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# Policy & Oversight

## Accountability

- Education
- Legislation
- Association
- Transparency

## Associated Expenses & Line Items

- *Continuing Education - Board*
- *LAFCo Participation*
- *Trustee Stipends*
- *Professional Association Memberships*
- *Director and Officer Insurance*

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# Risk Management

## Legal & Fiduciary Responsibilities

- External Audit Actuarial Valuations (*due 2017*)
- Appropriate Insurance Coverage
- Legal Services

## Associated Expenses & Line Items

- *Auditor Fees*
- *Consultants/Contractors*
- *Insurance*
- *Legal Fees*

# Facilities

## Fully-owned assets

13,200 square feet in Dos Caminos Plaza

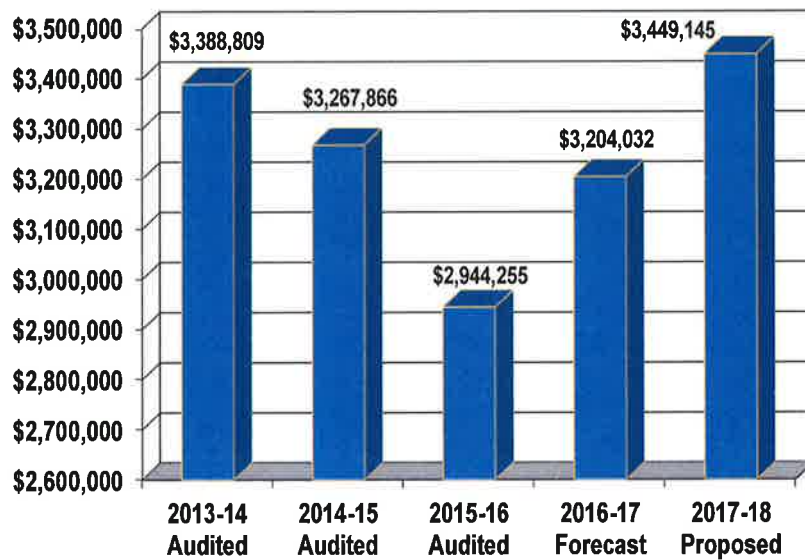
## Associated Expenses & Line Items

- *Association Fees*
- *Insurance*
- *Rental/Lease*
- *Repairs & Maintenance*
- *Utilities*
- *Telephone*

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# Operating Expenditures

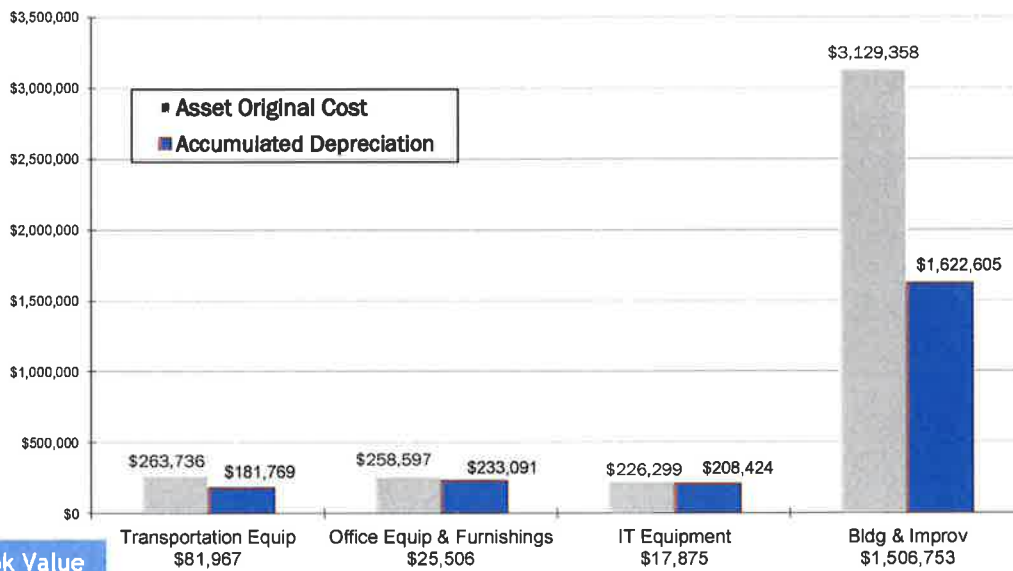
## 5-Year Review



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# Net Book Value Property & Equipment



Net Book Value

# Estimated Fair Market Value

## Real Property

Address	Square Footage
Las Posas, Bldg E	6,000
Las Posas, Bldg F	3,600
Las Posas, Bldg G	1,200
Las Posas, Bldg H	2,400
<b>TOTAL</b>	<b>13,200sf</b>

### Estimated Market Value

**Dos Caminos Plaza**  
**\$250/sf = \$3,300,000**

*2016 values; no appreciable change in last 12 months*

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# Consolidated Income Statement

## Proposed FY 2017-18

Revenues	Amount	Expenses	Amount
Property Tax Revenue	\$2,546,160	Salaries	\$1,591,704
Adult Day Center	206,368	Payroll Taxes/Benefits	489,907
Transportation Services	202,000	Program Related	300,279
Senior Nutrition Services	139,391	Contractors	234,789
Wellness Center & Grants	84,330	Facility	240,030
Facility & Education	64,209	OPEB & PERS Liability	254,258
Lifeline Services	56,256	Depreciation	156,523
Care Transitions Services	151,884	Education-All	90,655
Other	53,831	Legal	91,000
<b>TOTAL REVENUES</b>	<b>\$3,504,429</b>	<b>TOTAL EXPENSES</b>	<b>\$3,449,145</b>

<b>Total Revenues</b>	<b>\$3,504,429</b>
<b>Total Expenses</b>	<b>\$3,449,145</b>
<b>NET POSITION</b>	<b>\$55,284</b>

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# Capital Budget *FY2016/17*

## Capital Budget

- Single item, or items dependent upon labor and installation
- \$1000 or greater purchase price

## Annual review

- Safety, refurbishment
- Equipment
- Capital or tenant improvement projects
- Infrastructure and overall facility maintenance

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## Capital Budget *FY2017/18*

Description	Building	Quarter Performed	Not to Exceed Amount
Facilities: 2 HVAC units; est. \$11,000/unit	E117, E124	As needed	\$22,000
Facilities: Room Dividing Wall	F160-161	As needed	\$8,000
3 PC replacements with all software and equipment to make operational	As needed	As needed	\$4,000
IT: Upgrade Server	As needed	As needed	\$13,000
IT: File Server & Domain Controller	As needed	As needed	\$3,000
		SUB-TOTAL	\$50,000
		Contingency	\$5,000
		<b>TOTAL</b>	<b>\$55,000</b>

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**CAMARILLO HEALTH CARE DISTRICT**  
**Proposed Operating Budget**  
**Fiscal Year 2017-18**

Account Name	Adopted Budget 2016-17	Adjusted Budget 2016-17	Forecasted Results 2016-17	Proposed Budget 2017-18
<b>Revenue</b>				
Tax Revenue	\$ 2,472,000	\$ 2,472,000	\$2,472,000	\$ 2,546,160
Community Education Fees	25,250	25,250	\$30,986	28,980
Transportation Fees	27,000	27,000	\$22,427	27,000
Transport Fees ADC	25,000	25,000	\$10,980	25,000
Health Screening Fees	900	900	\$900	840
Lifeline Fees	56,256	56,256	\$68,579	57,360
Sr Nutrition Home Delivered	24,000	24,000	\$25,709	26,000
Sr Nutrition Congregate	1,740	1,740	\$1,254	1,416
Contract-PICF-Falls	29,312	29,312	\$16,118	2,727
Contract-PICF-Blue Shield	9,384	9,384	\$24,331	14,952
HSAG DEEP	-	7,000	\$7,488	4,000
Contract-VCAAA-Evidence Based	4,640	4,640	\$6,660	15,600
Gold Coast Contract	-	-	\$0	75,000
ADC Fees	261,272	261,272	\$160,621	206,368
John Hopkins University	-	-	\$0	2,400
Grant-VCAAA-Caregiver Resources	30,000	45,005	\$45,005	30,000
Donations-Scholarship	2,400	2,400	\$11,556	5,400
NANASP Grant	-	-	\$1,000	-
Sr Nutrition Sponsors	2,500	2,500	\$2,900	5,600
Healthy Attitude Advertising	4,700	4,700	\$4,700	5,000
Interest Income	4,000	4,000	\$9,146	8,000
Facility Use Rental	36,875	36,875	\$36,621	28,217
Facility Use Lease	-	-	\$0	6,102
Donations-General	1,000	1,000	\$459	700
Fischer Fund Distribution	150,000	150,000	\$147,622	150,000
Grant-VCAAA-Senior Nutrition	69,660	87,933	\$87,933	69,375
City of Cam SNP HDM	37,000	37,000	\$37,000	37,000
Dignity Cognitive Impaired Grant	-	10,935	\$0	32,805
Rupe REACH Grant	-	35,000	\$35,000	-
Grant-VCAAA-SS Line	50,000	50,000	\$50,000	50,000
Grant-SCAN-Comm Constituents	5,000	5,000	\$5,000	2,500
Other Income	36,837	36,837	24,967	39,927
<b>Total Revenue</b>	<b>\$ 3,366,726</b>	<b>\$ 3,452,939</b>	<b>\$ 3,346,961</b>	<b>\$ 3,504,429</b>

**Expenditures**

Salaries	\$ 1,461,859	\$ 1,461,859	\$ 1,370,000	\$ 1,591,704
Payroll Taxes	111,832	111,832	\$ 113,784	\$ 121,765
Benefits-PERS-Health	221,199	221,199	\$ 143,904	\$ 201,600
Benefits-PERS-Retirement	97,820	97,820	\$ 89,370	\$ 108,457
Benefits - Workers Comp	32,220	32,220	\$ 28,431	\$ 31,195
Benefits - Life/ADD/Annuity	24,557	24,557	\$ 24,657	\$ 26,890
Benefits - OPEB	201,802	201,802	\$ 256,033	\$ 201,802
PERS Retirement UAL	-	38,046	\$ 38,046	\$ 52,456
Audit Fees	13,170	13,170	\$ 12,736	\$ 13,560
Partnership Initiatives	2,500	2,500	\$ 2,500	\$ 2,500
Legal Fees	90,350	90,350	\$ 178,362	\$ 91,000
Contractors/Consultants	266,477	266,477	\$ 220,414	\$ 219,152
Instructor Agreement Fees	10,889	10,889	\$ 15,598	\$ 10,252
Community/Staff Outreach	15,156	15,156	\$ 6,564	\$ 14,513
Dues/Subscriptions	14,253	14,253	\$ 23,427	\$ 14,221

**CAMARILLO HEALTH CARE DISTRICT**  
**Proposed Operating Budget**  
**Fiscal Year 2017-18**

Account Name	Adopted Budget 2016-17	Adjusted Budget 2016-17	Forecasted Results 2016-17	Proposed Budget 2017-18
Cont Ed/Outreach - Board	44,529	44,529	\$ 36,772	\$ 39,809
Continuing Education - Staff	47,251	47,251	\$ 40,169	\$ 50,846
Trustee Stipends	11,900	11,900	\$ 7,680	\$ 12,800
Election Costs	17,000	17,000	\$ 350	\$ -
LAFCO Assessment	2,200	2,200	\$ 2,077	\$ 2,077
Mileage	21,396	21,396	\$ 17,818	\$ 26,604
Program Materials/Activities	26,466	26,466	\$ 20,940	\$ 18,607
Gas & Oil	10,660	10,660	\$ 8,240	\$ 9,000
Fleet Maintenance	12,607	12,607	\$ 9,515	\$ 10,200
Minor Equipment	12,908	12,908	\$ 7,354	\$ 22,608
Supplies	12,892	12,892	\$ 8,024	\$ 11,230
Postage	38,037	38,037	\$ 35,000	\$ 38,155
Advertising & Promotion	13,050	13,050	\$ 19,131	\$ 17,175
Refunds	2,582	2,582	\$ 722	\$ 2,150
Printing	65,079	65,079	\$ 64,800	\$ 68,062
Repairs & Maintenance	46,652	46,652	\$ 47,000	\$ 47,913
Association Fees	53,195	53,195	\$ 53,196	\$ 53,196
Insurance	49,305	49,305	\$ 31,049	\$ 42,275
Storage Rent/Equipment Lease	26,864	26,864	\$ 31,152	\$ 31,941
Telephone	27,097	27,097	\$ 24,000	\$ 29,246
Utilities	38,892	38,892	\$ 29,000	\$ 35,459
Licenses & Fees	1,252	1,252	\$ 1,552	\$ 1,170
Bank and Credit Card Charges	23,237	23,237	\$ 20,468	\$ 21,032
Depreciation Expense & Loss on Assets	162,159	162,159	\$ 164,195	156,523
<b>Total Operating Expenditures</b>	<b>\$ 3,331,294</b>	<b>\$ 3,369,340</b>	<b>\$ 3,204,032</b>	<b>\$ 3,449,145</b>
<b>NET RESULTS</b>	<b>\$ 35,432</b>	<b>\$ 83,599</b>	<b>\$ 142,928</b>	<b>\$ 55,284</b>

**Camarillo Health Care District**  
**Statements of Activities**  
**Consolidated Compare Prior Year to Proposed Year**

	<u>2016-17</u> <u>Budget</u>	<u>2017-18</u> <u>Proposed</u> <u>Budget</u>	<u>Variance</u> <u>Fav/(Unfav)</u>	<u>Percent</u> <u>Change</u>
<b>REVENUES</b>				
Tax revenue	\$ 2,472,000	\$ 2,546,160	\$ 74,160	2.9%
Program and facilities revenue	462,993	412,283	\$ (50,710)	-12.3%
Grants and agency funding	234,996	336,357	\$ 101,361	30.1%
Donations and sponsorship	5,900	11,700	\$ 5,800	49.6%
Investment and interest income	154,000	158,000	\$ 4,000	2.5%
Other income	36,837	39,927	\$ 3,090	7.7%
Total Revenues	<u>3,366,726</u>	<u>3,504,429</u>	<u>137,701</u>	<u>3.9%</u>
<b>EXPENSES</b>				
Personnel cost				
Wages and salaries	1,461,859	1,591,704	129,845	8.2%
Payroll taxes and benefits	689,430	744,165	54,735	7.4%
Total personnel cost	<u>2,151,289</u>	<u>2,335,869</u>	<u>184,580</u>	<u>7.9%</u>
Other expenses				
Contractors Fees	281,847	234,789	(47,058)	-20.0%
Legal/Professional Fees	90,350	91,000	650	0.7%
Facilities and related	254,913	262,638	7,725	2.9%
Depreciation	162,159	156,523	(5,636)	-3.6%
Program related expense	82,018	74,663	(7,355)	-9.9%
Advertising and promotion	93,285	99,750	6,465	6.5%
Supplies and office expense	65,182	63,606	(1,576)	-2.5%
Board and staff	120,680	103,455	(17,225)	-16.6%
Community partnerships	2,500	2,500	-	0.0%
Interest	21,200	17,396	(3,804)	-21.9%
Combined other expenses	<u>5,871</u>	<u>6,956</u>	<u>1,085</u>	<u>15.6%</u>
Total other expenses	<u>1,180,005</u>	<u>1,113,276</u>	<u>(66,729)</u>	<u>-6.0%</u>
Total expenses	<u>3,331,294</u>	<u>3,449,145</u>	<u>117,851</u>	<u>3.42%</u>
Net results	<u>\$ 35,432</u>	<u>\$ 55,284</u>	<u>\$ 19,852</u>	<u>35.9%</u>



**SECTION 7**

**CEO REPORT**

**JUNE 6, 2017**

**SECTION 8**

**BOARD REPORTS**

**JUNE 6, 2017**

# Consolidated Income Statement

*Proposed FY 2017-18*

Revenues	Amount	Expenses	Amount
Property Tax Rev	\$2,546,160	Salaries/Bene/OPEB	\$2,335,869
Fee for Service	\$407,283	Programs/Services	\$300,279
Grants	\$221,680	Facilities/Depreciation	\$396,553
Bequests	\$150,000	Risk Management	\$234,789
Contracts	\$114,679	Legal	\$91,000
Other	<u>\$64,627</u>	Policy/Oversight	<u>\$90,655</u>
<b>TOTAL REVENUE</b>	<b>\$3,504,429</b>	<b>TOTAL EXPENSE</b>	<b>\$3,449,145</b>

Total Revenues	\$3,504,429
Total Expenses	\$3,449,145
<b>NET POSITION</b>	<b>\$55,284</b>

Addendum to

-52-

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