I. Toyon Report on Alameda Health System Progress Update

Rebecca Gebhart, Acting Director, Health Care Services Agency, presented introductory comments and introduced Nancy Kaatz, Vice President, Public Hospital Services, Toyon Associates. Ms. Kaatz presented a PowerPoint presentation to update the Committee on the progress of Alameda Health System, based on findings from the Toyon Report.

In October 2014, the Health Care Services Agency contracted with Toyon and Associates to conduct an assessment of the current financial and operation conditions of Alameda Health System (AHS) and develop recommendations and metrics for AHS to track and report financial and operating targets.

Highlights of the update include:

- Since developing the recommendations significant efforts have been made at operating and financial improvement.
- AHS has maintained a positive bottom line, although below budget.
- AHS must continue efforts on business processes associated with the revenue capture and expense containment.
- Revenue cycle is not stable
- Staffing in the finance and reimbursement continues to be an issue

Purpose:

☒ Report progress
☐ Advocacy or Education
☐ Request Health Committee Recommendation or Position
☐ Other:

This item was informational only and required no Committee action.

II. Alameda Health System Metrics Report

David Cox, Chief Finance Officer, Alameda Health System, presented a PowerPoint presentation to update the Committee on the Alameda Health System financial update.

Currently AHS is profitable but under budget. Operating expenses are two percent higher than the fixed budget and reflect generally strong patient activity. Management is reviewing opportunities for further cost reductions.
As reflected in the Toyon report recommendations, AHS is struggling to address significant operational revenue cycle issues, including rebuilding the Soarian Financial system. There is a work plan in place; however there are several long standing issues.

The Negative Net Balance (NNB) forecast has improved due to the AB 85 Cost Guarantee Reconciliation. AHS expects to be in compliance as of June 30, 2016 with a NNB of approximately $110 to $120 million.

**Purpose:**
- [x] Report progress
- [ ] Advocacy or Education
- [ ] Request Health Committee Recommendation or Position
- [ ] Other:

**Recommendation from Health Committee:** Supervisors Carson requested AHS to send a report on the Soarian Financial System, including original projections for costs, and current costs as adjustments continue to be made.

### III. Whole Person Care Pilot Program (*as part of Med-Cal 2020 Waiver)

**Attachment**

Dr. Kathleen Clanon, Medical Director, Health Care Services Agency, presented a PowerPoint presentation on the Whole Person Care Pilot Program.

The Whole Person Care Pilot Program (WPCP) will integrate care for a particularly vulnerable group of Medi-Cal beneficiaries who have been identified as high users of multiple systems and continue to have poor health outcomes.

Through collaborative leadership and systemic coordination among public and private entities the WPCP will identify target populations, share data between systems, coordinate care real time and evaluate individual and population progress.

State funding of up to $300 million per year is available through a competitive grant, with County matching funds of fifty percent.

The Health Care Services Agency proposes to apply for the Whole Person Care Pilot Program.

**Purpose:**
- [ ] Report progress
- [x] Advocacy or Education
- [ ] Request Health Committee Recommendation or Position
- [ ] Other:

This item was informational only and required no Committee action.

### IV. 330h Plan of Correction Update

**Attachment**

Dr. Kathleen Clanon, Medical Director, Health Care Services Agency and Damon Francis, MD, Interim Director & Medical Director, Health Care for the Homeless Program, Health Care Services Agency presented a PowerPoint presentation to update the Committee on the 330h Plan of Correction for the Health Care for the Homeless Governance structure.
In 2014, the federal Health Resources and Services Administration (HRSA) published new requirements for the governance of public entity health centers. In California, many counties, including Alameda have 330 health centers as part of their public hospital and healthcare systems; all have been going through the process of meeting the new requirements.

The Health Care for the Homeless timeline for establishing the 330h Plan of Correction includes:

- Ordinance and initial bylaws for creation of Joint Co-Applicant Board (JCAB) – May 2016
- List of nominees for the JCAB – June 2016
- Appointment of JCAB members – June 2016
- Initial meeting of JCAB – July 2016
- Present draft co-applicant agreement to JCAB, Board of Trustees & Board of Supervisors – August 2016
- Final co-applicant agreement – August 2016
- Signed co-applicant agreement – September 2016
- Submit ordinance, bylaws, and co-applicant agreement to the Health Resources and Services Administration - September 2016

**Purpose:**
- [ ] Report progress
- [ ] Advocacy or Education
- [x] Request Health Committee Recommendation or Position
- [ ] Other:

**Recommendation from Health Committee:** Approve the submittal of the 330h Plan of Correction. Move to the full Board of Supervisors.

**PUBLIC COMMENT**

Joe Rose, past member of the Alameda County Mental Health Board, stated that he was concerned about the implementation of the Mental Health Services Act programs by the Behavioral Health Care Services.

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