



AGENDA

REGULAR MEETING OF THE BOARD OF DIRECTORS

Tuesday, August 2, 2022 – 4:00 PM

Modular C Classroom

600 N. Highland Springs Avenue, Banning, CA 92220

In compliance with the Americans with Disabilities Act, if you need special assistance to participate in this meeting, please contact the Administration Office at (951) 769-2160. **Notification 48 hours prior to the meeting** will enable the Hospital to make reasonable arrangement to ensure accessibility to this meeting. [28 CFR 35.02-35.104 ADA Title II].

TAB

I. Call to Order

S. DiBiasi, Chair

II. Public Comment

A five-minute limitation shall apply to each member of the public who wishes to address the Hospital Board of Directors on any matter under the subject jurisdiction of the Board. A thirty-minute time limit is placed on this section. No member of the public shall be permitted to “share” his/her five minutes with any other member of the public. (Usually, any items received under this heading are referred to staff for future study, research, completion and/or future Board Action.) (PLEASE STATE YOUR NAME AND ADDRESS FOR THE RECORD.)

On behalf of the Hospital Board of Directors, we want you to know that the Board acknowledges the comments or concerns that you direct to this Board. While the Board may wish to occasionally respond immediately to questions or comments if appropriate, they often will instruct the Hospital CEO, or other Hospital Executive personnel, to do further research and report back to the Board prior to responding to any issues raised. If you have specific questions, you will receive a response either at the meeting or shortly thereafter. The Board wants to ensure that it is fully informed before responding, and so if your questions are not addressed during the meeting, this does not indicate a lack of interest on the Board’s part; a response will be forthcoming.

OLD BUSINESS

III. ***Proposed Action - Approve Minutes**

S. DiBiasi

- July 5, 2022, Regular Meeting

A

NEW BUSINESS

IV. Hospital Board Chair Monthly Report

S. DiBiasi

verbal

San Geronio Memorial Hospital
Board of Directors Regular Meeting
August 2, 2022

- | | | | |
|-------|--|---------------------------------|--------|
| V. | CEO Monthly Report | S. Barron | verbal |
| VI. | August, September, & October Board/Committee Meeting Calendars | S. DiBiasi | B |
| VII. | Foundation monthly report | R. Robbins/ V.Hunter | C |
| VIII. | Committee Reports: | | |
| | • Finance Committee | E. Ngo/ | |
| | ○ July 26, 2022, regular meeting minutes | D. Heckathorne | D |
| | * Proposed Action – Approve June 2022 Financial Statement (Unaudited) | | |
| | (Approval recommended by Finance Committee 07/26/2022) | | |
| | ▪ ROLL CALL | | |
| IX. | Chief of Staff Report | S. Khalil, MD Chief of Staff | verbal |
| X. | * Proposed Action - Approve Policies and Procedures | Staff | E |
| | • ROLL CALL | | |
| XI. | Community Benefit events/Announcements/ and newspaper articles | S. DiBiasi | F |
| XII. | Future Agenda Items | | |

***** ITEMS FOR DISCUSSION/APPROVAL IN CLOSED SESSION**

S. DiBiasi

- Proposed Action - Recommend approval to Healthcare District Board - Medical Staff Credentialing
(Health & Safety Code §32155; and Evidence Code §1157)
- Receive Quarterly Security/Safety & Emergency Preparedness Report
(Health & Safety Code §32155; and Evidence Code §1157)
- Receive Quarterly Performance Improvement Committee Report
(Health & Safety Code §32155; and Evidence Code §1157)
- Receive Quarterly Corporate Compliance Committee Report
(Health & Safety Code §32155; and Evidence Code §1157)

XIII. ADJOURN TO CLOSED SESSION

*** The Board will convene to the Open Session portion of the meeting approximately 2 minutes after the conclusion of Closed Session.**

RECONVENE TO OPEN SESSION

***** REPORT ON ACTIONS TAKEN DURING CLOSED SESSION**

S. DiBiasi

XIV. **ADJOURN**

S. DiBiasi

***Action Required**

In accordance with The Brown Act, *Section 54957.5*, all public records relating to an agenda item on this agenda are available for public inspection at the time the document is distributed to all, or a majority of all, members of the Board. Such records shall be available at the Hospital Administration office located at 600 N. Highland Springs Avenue, Banning, CA 92220 during regular business hours, Monday through Friday, 8:00 am - 4:30 pm.

I certify that on July 29, 2022, I posted a copy of the foregoing agenda near the regular meeting place of the Board of Directors of San Gorgonio Memorial Hospital, and on the San Gorgonio Memorial Hospital website, said time being at least 72 hours in advance of the regular meeting of the Board of Directors
(*Government Code Section 54954.2*).

Executed at Banning, California, on July 29, 2022



Ariel Whitley, Executive Assistant

TAB A

**REGULAR MEETING OF THE
SAN GORGONIO MEMORIAL HOSPITAL
BOARD OF DIRECTORS**

July 5, 2022

The regular meeting of the San Gorgonio Memorial Hospital Board of Directors was held on Tuesday, July 5, 2022, in Modular C meeting room, 600 N. Highland Springs Avenue, Banning, California.

Members Present: Susan DiBiasi (Chair), Ehren Ngo, Steve Rutledge (Vice Chair), Randal Stevens, Dennis Tankersley, Siri Welch

Members Absent: Joel Labha, Phillip Capobianco, Ron Rader

Required Staff: Steve Barron (CEO), Pat Brown (CNO/COO), Daniel Heckathorne (CFO), Sherif Khalil, MD (Chief of Staff), Annah Karam (CHRO), Ariel Whitley (Executive Assistant), Karan P. Singh, MD (CMO), Angie Brady (ED Director), Margaret Kammer (Controller)

| AGENDA ITEM | | ACTION / FOLLOW-UP |
|---|--|--|
| Call To Order | Chair, Susan DiBiasi, called the meeting to order at 4:08 pm. | |
| Public Comment | No public addressed the Board. | |
| OLD BUSINESS | | |
| Proposed Action - Approve Minutes June 7, 2022, regular meeting. | Chair, Susan DiBiasi, asked for any changes or corrections to the minutes of the June 7, 2022, regular meeting as included on the board tablets. | The minutes of the June 7, 2022, regular meeting will stand correct as presented. |
| NEW BUSINESS | | |
| Hospital Board Chair Monthly Report | Chair DiBiasi reported that the Finance team at SGMH has been working extremely hard to complete the FY 2023 Capital and Operating Budget. She thanked them for their effort in getting it done. | |
| CEO Monthly Report | As this was our first in-person meeting since 2020, Steve Barron, CEO, asked that everyone introduce themselves. Steve briefly reported on SGMH's financial situation and informed the board that we may need to call a special meeting. | |

| AGENDA ITEM | | ACTION / FOLLOW-UP | | | | | | | | | | | | | | | | | | | | |
|--|--|--------------------|--------|---------|-----|-------|--------|-----|-----|-------|--------|----------|-----|---------|-----|------------|-----|-------|-----|-----------------|--|---|
| July, August, & September Board/Committee meeting calendars | Calendars for July, August, & September were included on the board tablets. | | | | | | | | | | | | | | | | | | | | | |
| Proposed Action – Appoint Ad Hoc Affiliation Committee | <p>The Ad Hoc Affiliation Committee will include the following members: Dennis Tankersley, Ehren Ngo, Steve Rutledge, and Susan DiBiasi.</p> <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="383 680 1250 869"> <tr> <td>Capobianco</td> <td>Absent</td> <td>DiBiasi</td> <td>Yes</td> </tr> <tr> <td>Labha</td> <td>Absent</td> <td>Ngo</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Absent</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Tankersley</td> <td>Yes</td> </tr> <tr> <td>Welch</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table> | Capobianco | Absent | DiBiasi | Yes | Labha | Absent | Ngo | Yes | Rader | Absent | Rutledge | Yes | Stevens | Yes | Tankersley | Yes | Welch | Yes | Motion carried. | | M.S.C., (Tankersley/Ngo) the SGMH Board of Directors voted to appoint Dennis Tankersley, Ehren Ngo, Steve Rutledge, and Susan DiBiasi as Ad Hoc Affiliation Committee members. |
| Capobianco | Absent | DiBiasi | Yes | | | | | | | | | | | | | | | | | | | |
| Labha | Absent | Ngo | Yes | | | | | | | | | | | | | | | | | | | |
| Rader | Absent | Rutledge | Yes | | | | | | | | | | | | | | | | | | | |
| Stevens | Yes | Tankersley | Yes | | | | | | | | | | | | | | | | | | | |
| Welch | Yes | Motion carried. | | | | | | | | | | | | | | | | | | | | |
| Foundation Monthly Report | Foundation Director, Valerie Hunter, gave the Foundation Monthly Report as included on the board tablets. | | | | | | | | | | | | | | | | | | | | | |
| Patient Care Services Bi-Monthly Report | <p>Chair DiBiasi noted that the Patient Care Services Bi-Monthly report was included as a handout for review.</p> <p>Pat Brown reviewed the Patient Care Services Bi-Monthly Report.</p> | | | | | | | | | | | | | | | | | | | | | |
| COMMITTEE REPORTS: | | | | | | | | | | | | | | | | | | | | | | |
| Finance Committee Proposed Action – Recommend Approval of the May 2022 Financial Statement (Unaudited). | <p>Dan Heckathorne, CFO, reviewed the Executive Summary of the May 2022 Financial report which was included on the board tablet. A copy of the Finance Committee’s June 28, 2022, meeting minutes were also included on the board tablet. It was noted that the Finance Committee recommends approval of the May 2022 Financial report as presented.</p> <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="383 1633 1250 1822"> <tr> <td>Capobianco</td> <td>Absent</td> <td>DiBiasi</td> <td>Yes</td> </tr> <tr> <td>Labha</td> <td>Absent</td> <td>Ngo</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Absent</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Tankersley</td> <td>Yes</td> </tr> <tr> <td>Welch</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table> | Capobianco | Absent | DiBiasi | Yes | Labha | Absent | Ngo | Yes | Rader | Absent | Rutledge | Yes | Stevens | Yes | Tankersley | Yes | Welch | Yes | Motion carried. | | M.S.C., (Welch/Rutledge), the SGMH Board of Directors approved the May 2022 Financial Statement as presented. |
| Capobianco | Absent | DiBiasi | Yes | | | | | | | | | | | | | | | | | | | |
| Labha | Absent | Ngo | Yes | | | | | | | | | | | | | | | | | | | |
| Rader | Absent | Rutledge | Yes | | | | | | | | | | | | | | | | | | | |
| Stevens | Yes | Tankersley | Yes | | | | | | | | | | | | | | | | | | | |
| Welch | Yes | Motion carried. | | | | | | | | | | | | | | | | | | | | |

| AGENDA ITEM | | ACTION / FOLLOW-UP | | | | | | | | | | | | | | | | | | | | |
|---|---|--------------------|--------|---------|-----|-------|--------|-----|-----|-------|--------|----------|-----|---------|-----|------------|-----|-------|-----|-----------------|--|---|
| <p>Proposed Action - Recommend Approval to Healthcare District Board FY 2023 Operating Budget and FY 2023 Capital Budget</p> | <p>Daniel Heckathorne gave a detailed review of the SGMH FYE June 30, 2023, Budget Package: Operating Budget, Capital Budget, Combined Balance Sheet, Cash Flow Statement, and the SGMHD Operating Budget presentation as included in the board packets.</p> <p>It was noted that approval is recommended to the Healthcare District Board.</p> <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="383 642 1250 835"> <tr> <td>Capobianco</td> <td>Absent</td> <td>DiBiasi</td> <td>Yes</td> </tr> <tr> <td>Labha</td> <td>Absent</td> <td>Ngo</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Absent</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Tankersley</td> <td>Yes</td> </tr> <tr> <td>Welch</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table> | Capobianco | Absent | DiBiasi | Yes | Labha | Absent | Ngo | Yes | Rader | Absent | Rutledge | Yes | Stevens | Yes | Tankersley | Yes | Welch | Yes | Motion carried. | | <p>M.S.C., (Rutledge/Stevens), the SGMH Board of Directors voted to recommend approval of the FY 2023 Operating budget and FY 2023 Capital budget to the Healthcare District Board of Directors.</p> |
| Capobianco | Absent | DiBiasi | Yes | | | | | | | | | | | | | | | | | | | |
| Labha | Absent | Ngo | Yes | | | | | | | | | | | | | | | | | | | |
| Rader | Absent | Rutledge | Yes | | | | | | | | | | | | | | | | | | | |
| Stevens | Yes | Tankersley | Yes | | | | | | | | | | | | | | | | | | | |
| Welch | Yes | Motion carried. | | | | | | | | | | | | | | | | | | | | |
| <p>Chief of Staff Report</p> <p>Proposed Action – Approve Recommendations of the Medical Executive Committee</p> | <p>There was no report or items for approval.</p> | | | | | | | | | | | | | | | | | | | | | |
| <p>Proposed Action – Approve Policies and Procedures</p> | <p>There were two (2) policies and procedures included on the board tablets presented for approval by the Board.</p> <p>BOARD MEMBER ROLL CALL:</p> <table border="1" data-bbox="383 1415 1247 1608"> <tr> <td>Capobianco</td> <td>Absent</td> <td>DiBiasi</td> <td>Yes</td> </tr> <tr> <td>Labha</td> <td>Absent</td> <td>Ngo</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Absent</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Stevens</td> <td>Yes</td> <td>Tankersley</td> <td>Yes</td> </tr> <tr> <td>Welch</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table> | Capobianco | Absent | DiBiasi | Yes | Labha | Absent | Ngo | Yes | Rader | Absent | Rutledge | Yes | Stevens | Yes | Tankersley | Yes | Welch | Yes | Motion carried. | | <p>M.S.C., (Tankersley/Welch), the SGMH Board of Directors approved the policies and procedures as submitted.</p> |
| Capobianco | Absent | DiBiasi | Yes | | | | | | | | | | | | | | | | | | | |
| Labha | Absent | Ngo | Yes | | | | | | | | | | | | | | | | | | | |
| Rader | Absent | Rutledge | Yes | | | | | | | | | | | | | | | | | | | |
| Stevens | Yes | Tankersley | Yes | | | | | | | | | | | | | | | | | | | |
| Welch | Yes | Motion carried. | | | | | | | | | | | | | | | | | | | | |
| <p>Community Benefit events/Announcements/and newspaper articles</p> | <p>Miscellaneous information was included on the board tablets.</p> <p>Susan DiBiasi announced that she would like to see board members attend community events more often now that things are beginning to open.</p> | | | | | | | | | | | | | | | | | | | | | |

| AGENDA ITEM | | ACTION / FOLLOW-UP |
|----------------------------------|--|--------------------|
| Future Agenda Items | None. | |
| Adjourn to Closed Session | Chair, DiBiasi reported the items to be reviewed and discussed and/or acted upon during Closed Session will be: <ul style="list-style-type: none"> ➤ Recommend approval to the Healthcare District Board – Medical Staff Credentialing ➤ Receive Quarterly Environment of Care/Life Safety/Utility Management Report The meeting adjourned to Closed Session at 5:23 pm. | |
| Reconvene to Open Session | The meeting adjourned from closed session at 5:59 pm. At the request of Chair DiBiasi, Ariel Whitley reported on the actions taken/information received during the Closed Session as follows: <ul style="list-style-type: none"> ➤ Recommended approval to the Healthcare District Board – Medical Staff Credentialing ➤ Received Quarterly Environment of Care/Life Safety/Utility Management Report | |
| Adjourn | The meeting was adjourned at 6:00 pm. | |

In accordance with The Brown Act, *Section 54957.5*, all reports and handouts discussed during this Open Session meeting are public records and are available for public inspection. These reports and/or handouts are available for review at the Hospital Administration office located at 600 N. Highland Springs Avenue, Banning, CA 92220 during regular business hours, Monday through Friday, 8:00 am - 4:30 pm.

Respectfully submitted by Ariel Whitley, Executive Assistant

TAB B



August 2022

Board of Directors Calendar

| Sun | Mon | Tue | Wed | Thu | Fri | Sat |
|-----|-----|--|-----------------------------------|-----|-----|-----|
| | 1 | 2 4:00 pm Hospital Board Meeting 6:00 pm Healthcare District Board Meeting | 3 | 4 | 5 | 6 |
| 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| 14 | 15 | 16 9:00 am Community Planning Committee | 17 9:00 am HR Committee | 18 | 19 | 20 |
| 21 | 22 | 23 | 24 | 25 | 26 | 27 |
| 28 | 29 | 30 9:00 am Finance Committee | 31 | | | |

Items in **bold** = Board/Committee meetings

Items with * = Associate functions that Board members are invited to attend



September 2022

Board of Directors Calendar

| Sun | Mon | Tue | Wed | Thu | Fri | Sat |
|-----|---|--|-----|-----|-----|-----|
| | | | | 1 | 2 | 3 |
| 4 | 5 ADMIN. CLOSED LABOR DAY | 6 4:00 pm Hospital Board Meeting 6:00 pm Healthcare District Board Meeting | 7 | 8 | 9 | 10 |
| 11 | 12 | 13 | 14 | 15 | 16 | 17 |
| 18 | 19 | 20 | 21 | 22 | 23 | 24 |
| 25 | 26 | 27 9:00 am Finance Committee 10:00 am Executive Committee | 28 | 29 | 30 | |

Items in **bold** = Board/Committee meetings

Items with * = Associate functions that Board members are invited to attend



October 2022

Board of Directors Calendar

| Sun | Mon | Tue | Wed | Thu | Fri | Sat |
|-----|---|--|-----|-----|-----|-----|
| | | | | | | 1 |
| 2 | 3 | 4 4:00 pm Hospital Board Meeting 6:00 pm Healthcare District Board Meeting | 5 | 6 | 7 | 8 |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| 23 | 24 | 25 9:00 am Finance Committee | 26 | 27 | 28 | 29 |
| 30 | 31  | | | | | |

Items in **bold** = Board/Committee meetings

Items with * = Associate functions that Board members are invited to attend

TAB C

SGMH Foundation July 2022 Report

Foundation Finances for July 2022

(as of July 26, 2022)

| | | |
|----------------------------------|---------------------|---|
| Bank of Hemet Checking Acct: | \$293,180.81 | (actual as of <u>7/26/2022</u>) |
| Bank of Hemet Money Market Acct: | \$128,159.72 | (actual as of <u>7/26/2022</u>) |
| I.E. Community Foundation Acct: | \$91,705.82 | <u>Actual for June 2022/July 2022 not available</u> |
| Total | \$513,045.81 | |

Foundation Report

- The Foundation department is in its Employee Giving Appreciation campaign. The campaign started off late but has already gained 6 new members in July.
- The Foundation's first event coming out of covid is slated to be a golf tournament which is scheduled for Friday October 6, 2023. The Morongo Golf Club at Tukwet Canyon has been reserved.
- The Foundation Director and the Foundation Executive Team are planning to meet with potential major donors to support the Stroke Center tentatively coming to the hospital fall 2023.

TAB D

REGULAR MEETING OF THE
SAN GORGONIO MEMORIAL HOSPITAL
BOARD OF DIRECTORS

FINANCE COMMITTEE
Tuesday, July 26, 2022

The regular meeting of the San Gorgonio Memorial Hospital Board of Directors Finance Committee was held on Tuesday, July 26, 2022, in Classroom B, 600 N. Highland Springs Avenue, Banning, California.

Members Present: Susan DiBiasi, Ehren Ngo (Chair), Ron Rader, Steve Rutledge, Siri Welch

Members Absent: Daniel Heckathorne (CFO)

Required Staff: Steve Barron (CEO), Pat Brown (CNO/COO), Ariel Whitley (Executive Assistant), Margaret Kammer (Controller), Angela Brady (ED Director), Annah Karam (CHRO), Karan P. Singh (CMO)

| AGENDA ITEM | DISCUSSION | ACTION / FOLLOW-UP |
|---|---|---|
| Call To Order | Chair Ngo called the meeting to order at 9:10 am. | |
| Public Comment | No public addressed the committee. | |
| OLD BUSINESS | | |
| Proposed Action - Approve Minutes June 28, 2022, regular meeting | Chair Ngo asked for any changes or corrections to the minutes of the June 28, 2022, regular meeting. There were none. | The minutes of the June 28, 2022, regular meeting will stand correct as presented. |
| NEW BUSINESS | | |

| AGENDA ITEM | DISCUSSION | ACTION / FOLLOW-UP | | | | | | | | | | | | |
|--|---|--------------------|-----|-----|-----|-------|-----|----------|-----|-------|-----|-----------------|--|---|
| <p>Proposed Action – Recommend Approval to Hospital Board of Directors - Monthly Financial Report (Unaudited) – June 2022</p> | <p>Steve Barron, CEO, reviewed the Unaudited June 2022 finance report as included in the board packets.</p> <p>Steve reported that the current YTD EBIDA was negative at \$2.6M compared to a budgeted loss of \$8.3M (adjusted to \$7.4M to remove \$895K IGT Expense booked in 2021). YTD Variances included Salaries being under budget while Contract Labor was over budget by \$485K due to shortage of nurses and the covid surge. Overall, June resulted in \$1.02M EBIDA compared to budgeted loss of \$712K. June Surgery visits remained high, Emergency visits were high, the average inpatient census was 22.7, up from 18.7 in May.</p> <p>It was noted that approval is recommended to the Hospital Board.</p> <p>ROLL CALL:</p> <table border="1" data-bbox="394 877 1221 993"> <tr> <td>DiBiasi</td> <td>Yes</td> <td>Ngo</td> <td>Yes</td> </tr> <tr> <td>Rader</td> <td>Yes</td> <td>Rutledge</td> <td>Yes</td> </tr> <tr> <td>Welch</td> <td>Yes</td> <td colspan="2">Motion carried.</td> </tr> </table> | DiBiasi | Yes | Ngo | Yes | Rader | Yes | Rutledge | Yes | Welch | Yes | Motion carried. | | <p>M.S.C. (Rader/Rutledge), the SGMH Finance Committee voted to recommend approval of the Unaudited June 2022 Financial report to the Hospital Board of Directors.</p> |
| DiBiasi | Yes | Ngo | Yes | | | | | | | | | | | |
| Rader | Yes | Rutledge | Yes | | | | | | | | | | | |
| Welch | Yes | Motion carried. | | | | | | | | | | | | |
| <p>Future Agenda Items</p> | <ul style="list-style-type: none"> • Review of Audit Partners | | | | | | | | | | | | | |
| <p>Next Meeting</p> | <p>The next regular Finance Committee meeting will be held on August 30, 2022.</p> | | | | | | | | | | | | | |
| <p>Adjournment</p> | <p>The meeting was adjourned 10:44 am.</p> | | | | | | | | | | | | | |

In accordance with The Brown Act, *Section 54957.5*, all reports, and handouts discussed during this Open Session meeting are public records and are available for public inspection. These reports and/or handouts are available for review at the Hospital Administration office located at 600 N. Highland Springs Avenue, Banning, CA 92220 during regular business hours, Monday through Friday, 8:00 am - 4:30 pm.

Minutes respectfully submitted by Ariel Whitley, Executive Assistant



SAN GORGONIO MEMORIAL HOSPITAL
BANNING, CALIFORNIA

Unaudited Financial Statements

for

TWELVE MONTHS ENDING JUNE 30, 2022

Certification Statement:

To the best of my knowledge, I certify for the hospital that the attached financial statements, except for the uncertainty of IGT revenue accruals, do not contain any untrue statement of a material fact or omit to state a material fact that would make the financial statements misleading. I further certify that the financial statements present in all material respects the financial condition and results of operation of the hospital and all related organizations reported herein.

Certified by:

Daniel R. Heckathorne

Daniel R. Heckathorne

CFO

San Geronio Memorial Hospital

Financial Report - Executive Summary

For the Month of June 30, 2022 and Twelve Months Ended June 30, 2022 (Unaudited)

Profit/Loss (EBIDA) Summary (MTD) Positive and (YTD) Negative (see YTD Note)

The month of June resulted in \$1.02M Earnings before Interest, Depreciation and Amortization (EBIDA) compared to budgeted EBIDA loss of \$712K.

YTD – There was a \$2.6M loss in Earnings before Interest, Depreciation and Amortization (EBIDA) compared to a budgeted loss of \$8.3M (adjusted to \$7.4M to remove \$895K IGT Expense booked in 2021).

Month – Adjustments and Items of note:

- The June Surgery visits remained high again at 153 plus 21 G.I. procedures.
- The Emergency visits were also high at 3,470.
- The average inpatient census was 22.7, up from 18.7 in May.
- Other Income one-time items included \$779K of “QIP 3.5” (July 2020 – December 2020), \$245K of prior year NFP Grant “pick-up”, \$88K from the PT Joint venture, and recognition of Cafeteria quick charge revenue of \$114K.
- Total Operating Expenses were \$588K below budget (see comments below)

June’s inpatient average daily census was 22.7 compared to 18.7 in May, 20.3 in April and 20.7 in March. Adjusted Patient Days were 11.5% under budget (1,821 vs. 2,058) and Patient Days were 34% below budget (680 vs.1,025). Emergency Visits were 16.4% over budget (3,470 vs. 2,982), and overall Surgeries were significantly over budget by 70% (153 vs. 90).

YTD – Overall workloads are as follows: Adjusted Patient Days = 23,604 vs. 26,172 budgeted (-9.8%); Patient Days = 9,689 vs. 12,865 budgeted (-25%); Emergency Visits = 39,374 vs. 37,900 (+3.9%), and Surgeries were 1,446 vs. 1,081 (+34%).

EBIDA results are now \$5.7M better than the unadjusted EBIDA target of -\$8.3M for the year. Overall Operating Revenues are \$5.3M better than budget, while Operating Expenses were \$362K under budget.

Patient Revenues (MTD) Positive (YTD) Positive

Month - The Net Patient Revenue in June continues to reflect improved A/R collections ratios and managed care rate increases estimated at \$194K for the month impacting the favorable \$522K variance.

YTD – Net Patient Revenue through June was \$63.3M compared to the budgeted \$60.8M. The increase in managed care contracted revenue since September is estimated at \$1.96M.

Total Operating Revenues (MTD) Positive & (YTD) Positive

Month – Operating Revenue in June was \$1.1M over budget. This was impacted by the key variances in Net Patient Revenues and Other Income described above.

YTD – Operating Revenue was \$5.3M over budget, impacted by the Net Patient Revenues being \$2.5M over budget and the Non-Patient Revenues were \$2.8M over budget. Overall Supplemental Revenues have been \$3.7M better than anticipated, as some of the programs were accelerated, others had favorable retro adjustments, and some came in higher than expected. Nevertheless, the six-month Rate Range delay estimated at \$5.4M has still had a significant impact on the current year’s operations.

Operating Expenses (MTD) Positive & (YTD) Positive

Month - Operating Expenses in June were \$6.3M and were under budget by \$588K. Unusual items that impacted overall Expenses included a favorable Inventory count adjustment of \$220K. Salaries were under budget by \$162K and were also \$278K lower than May, even though the Gross Revenues in June were \$3M higher than in May. These reductions in Salary expense are positively impacted by the PTO “flex-down” that the Associates are following. Benefits continue to be over budget, and the variance is

in line with past experience. Contract Labor is over budget, mostly impacted by staffing needs in the OB service. Physician on-call fees were under budget, and the Residency costs were trued-up, leaving a favorable variance of \$97K. Purchased Services were favorable by \$125K, as legal fees were \$66K below budget, coupled with several other departments being lower than expected. Supplies were under budget by \$251K, which was largely impacted by the \$220K Inventory adjustment to actual counts.

YTD – Variances included: 1) Salaries were \$1.2M under budget while Contract Labor was over budget by \$485K due to shortage of nurses and the covid surge; 2) Benefits were \$805K (8.0%) over budget which has been somewhat consistent with previous monthly experience. 3) Purchased Services were \$287K over budget which includes Allscripts/Navigant \$702K variance to budget based on overall collection performance with other large favorable variances in Administration (\$158K), I/T (\$281K), Surgery (\$106K), Legal fees (\$88K) and Laundry (\$84K); 4) Supplies were over budget by \$1.49M, largely due to the covid surges and much higher Surgery volumes than budgeted. Some of the major variances over budget include Surgery (\$419K), Lab (\$570K), Pharmaceuticals (\$446K), Emergency (\$136K), Blood (\$109K), and ICU and Med Surg (\$215K). These were offset by several other departments whose supply costs were below budget; 5) Utilities are over budget by \$254K (19%) – it appears that the warmer than usual summer and the cooler than usual winter are having an impact on these costs; 6) Repairs were over budget by \$246K, which included accelerated repairs made on emergency doors and negative pressure rooms and all of the testing/repairs referred to in the April monthly comment; 7) Other Expenses were \$1.16M below budget as generally everyone is taking a conservative approach toward many projects during this year, including dues and subscriptions, outside education, and travel (combined \$330K), along with other expenditures which have not been incurred; 8) IGT Expense was under budget by \$895K due to those costs being included in the previous year's audited statements; and 9) Leases and Rentals were \$595K below budget, of which \$337K was impacted by the exclusion of leasing telemetry monitors along with the delay in the surgical robotics lease (\$151K), and Respiratory Therapy rentals are \$142K less than expected.

Balance Sheet/Cash Flow

Patient cash collections in June were \$5.0M following May (\$4.5M) and record months in April (\$7.0M), March (\$6.7M) and February (\$6.68M). The Gross A/R Days dropped from 74.4 in May to 67.0 in June. The 7.4 days decrease in Gross Days included about 4.4 days of write-offs for previously "held" \$5.5M Bad Debt write offs due to complications surrounding implementation of the new California AB1020 rule which changed the "150 day" self-pay billing process to a mandated "180 day" billing process. The Net A/R days also decreased from 60 days outstanding in May to 57 in June.

Cash balances increased in June to \$11.3M, compared the May balance of \$6.5M and April's \$8.4M. The line of credit balance was also increased from \$6M in May to \$12M in June. The Accounts Payable increased to \$10.6M, compared to \$9.1M at the end of May. Other Receivables changes included recording IGT revenues along with recognition of several items that were reflected in the "Other Income" revenues.

Concluding Summary

Positive takeaways:

- 1) Total Surgeries were 70% over budget.
- 2) Operating Expenses were under budget.
- 3) Total Operating Revenues were strong due to Net Revenues and Supplemental Funding.

Negative takeaways:

- 1) Supply expenses continue to be the biggest YTD challenge.

STATISTICS

Inpatient Admissions/Discharges (Monthly Average)

Represents number of patients admitted/discharged into and out of the hospital.

Patient Days (Monthly Average)

Each day a patient stays in the hospital is counted as a patient day. This count is normally done at midnight.

Average Daily Census (Inpatient)

Equals the average number of inpatients in the hospital on any given day or month.

Average Length of Stay (Inpatient)

Represents that average number of days that inpatients stay in the hospital.

Emergency Visits (Monthly Average)

Represents the number of patients who sought services at the emergency room.

Surgery Cases - Excluding G.I. (Monthly Average)

Equals the number of patients who had a surgical procedure(s) performed.

G.I. Cases (Monthly)

Number of patients who had a gastrointestinal exam performed.

Newborn Deliveries (Monthly)

Number of babies delivered.

PRODUCTIVITY

Worked FTEs (includes Registry FTEs)

Represents an equivalency of full-time staff worked. One FTE is equivalent of working 40 hours per week, 80 hours per pay period, 173.3 hours per 30 day month, or 2,080 hours in a 52 week year. This calculation divides the number of hours worked by the number of hours in the respective work period (40, 80, etc.) Example: 340 hours worked in an 80 hour pay period = 4.25 FTE's

Worked FTEs per APD

Divides the Total Worked FTE's by the daily average of the Adjusted Patient Days.

Paid FTEs (includes Registry FTEs)

Represents an equivalency of full-time staff paid. One FTE is equivalent of working 40 hours per week, 80 hours per pay period, 173.3 hours per 30 day month, or 2,080 hours in a 52 week year. This calculation divides the number of hours paid (includes all hours paid consisting of worked hours, PTO hours, sick pay, etc.) by the number of hours in the respective work period (40, 80, etc.) Example: 500 hours paid in an 80 hour pay period = 6.25 FTE's.

Paid FTEs per APD

Divides the Total Paid FTE's by the daily average of the Adjusted Patient Days.

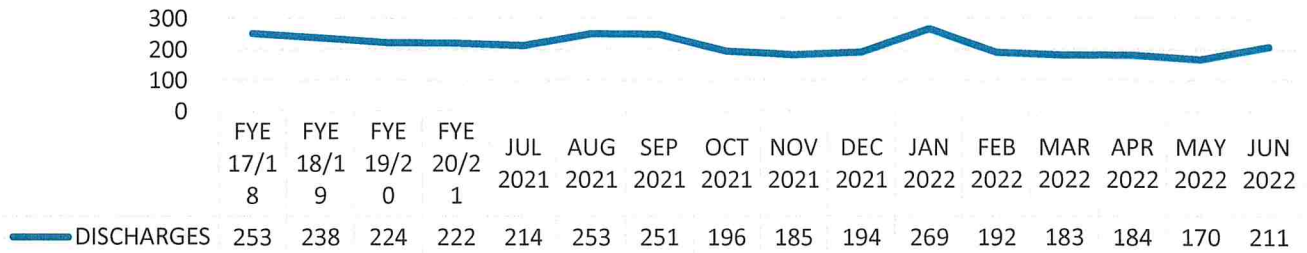
ADJUSTED PATIENT DAYS

This is a blend of total patient days stayed in the hospital for a month, plus an equivalency factor (based on average inpatient revenue per patient day) applied to the outpatient revenues in order to account for outpatient workloads.

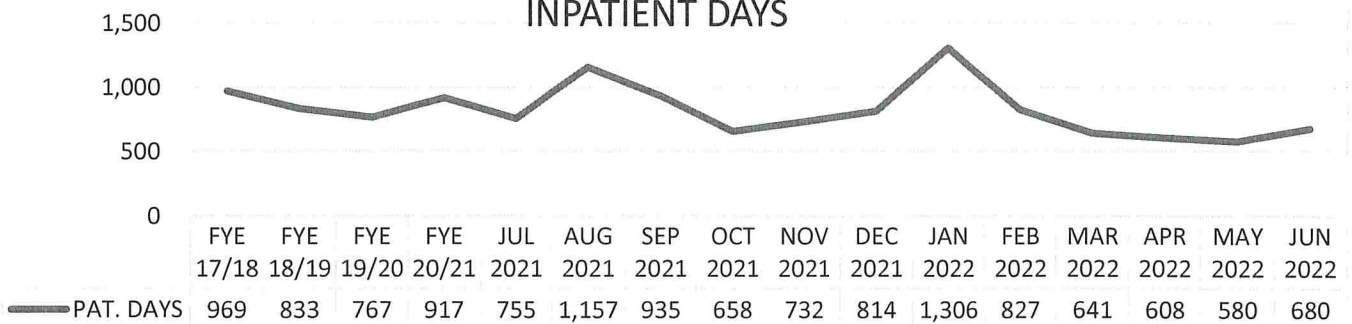
3-A

SAN GORGONIO MEMORIAL HOSPITAL

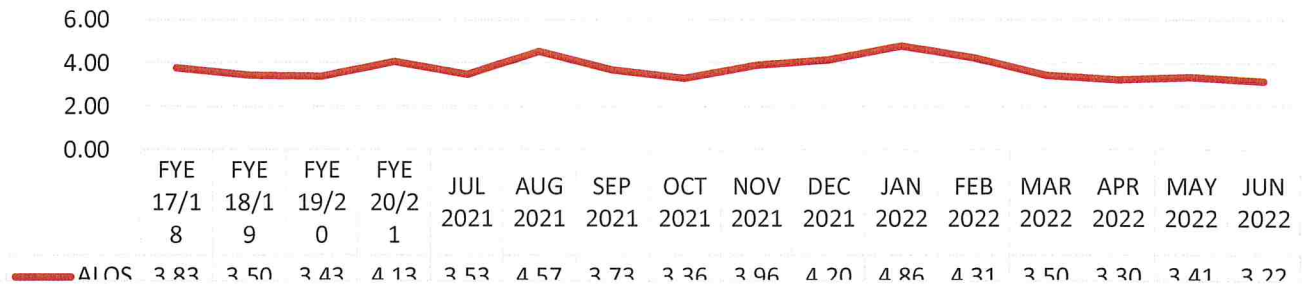
INPATIENT DISCHARGES



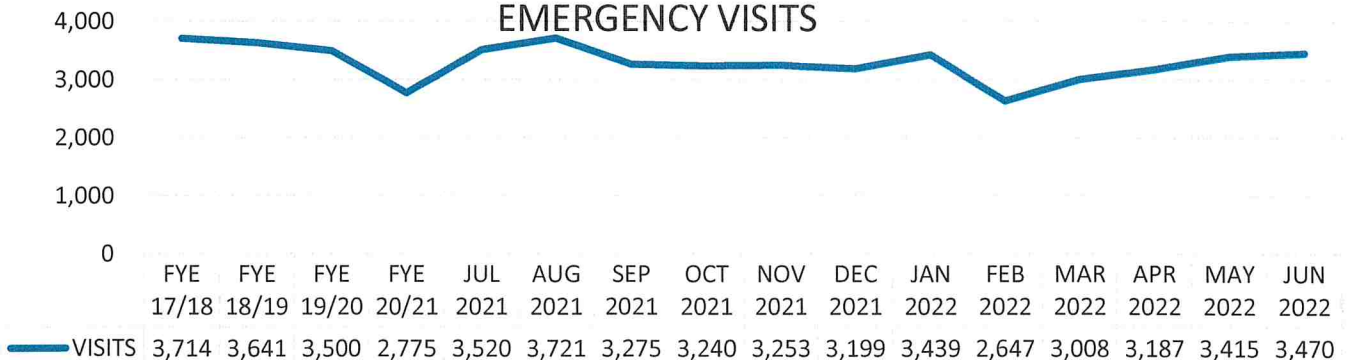
INPATIENT DAYS



AVERAGE LENGTH OF STAY

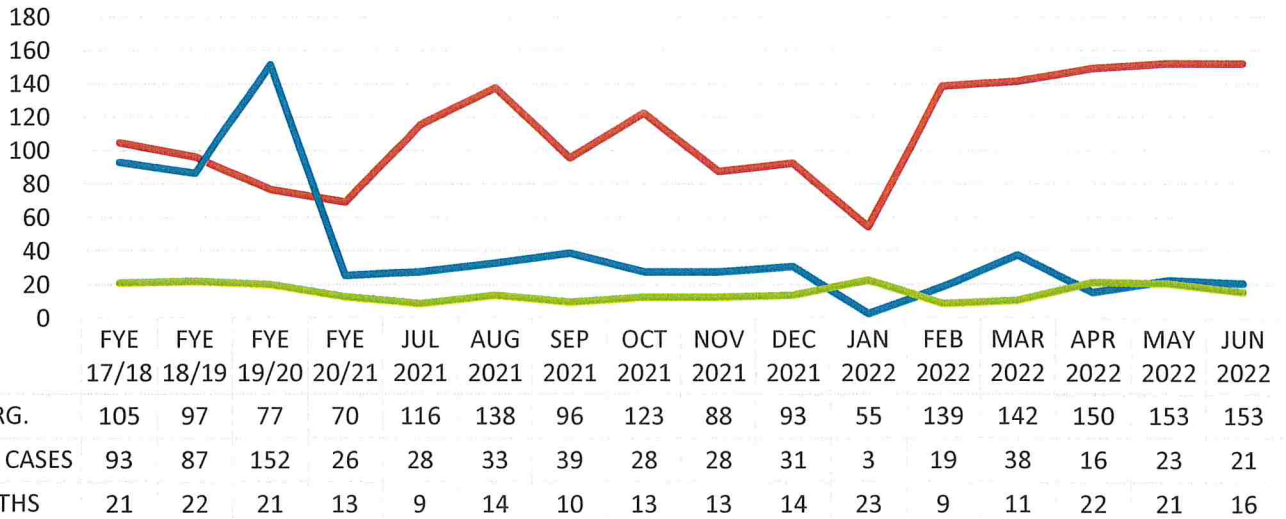


EMERGENCY VISITS

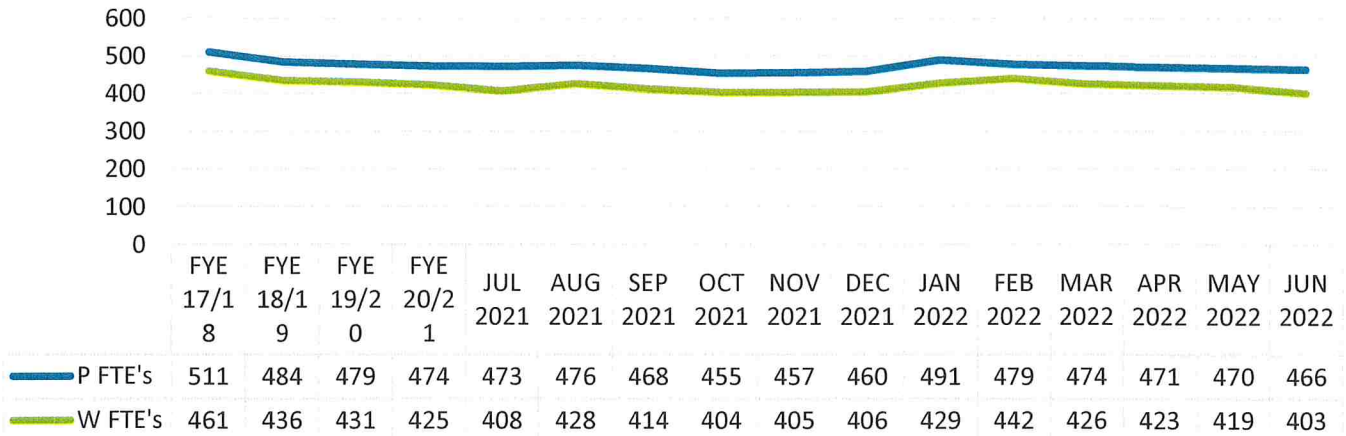


SAN GORGONIO MEMORIAL HOSPITAL

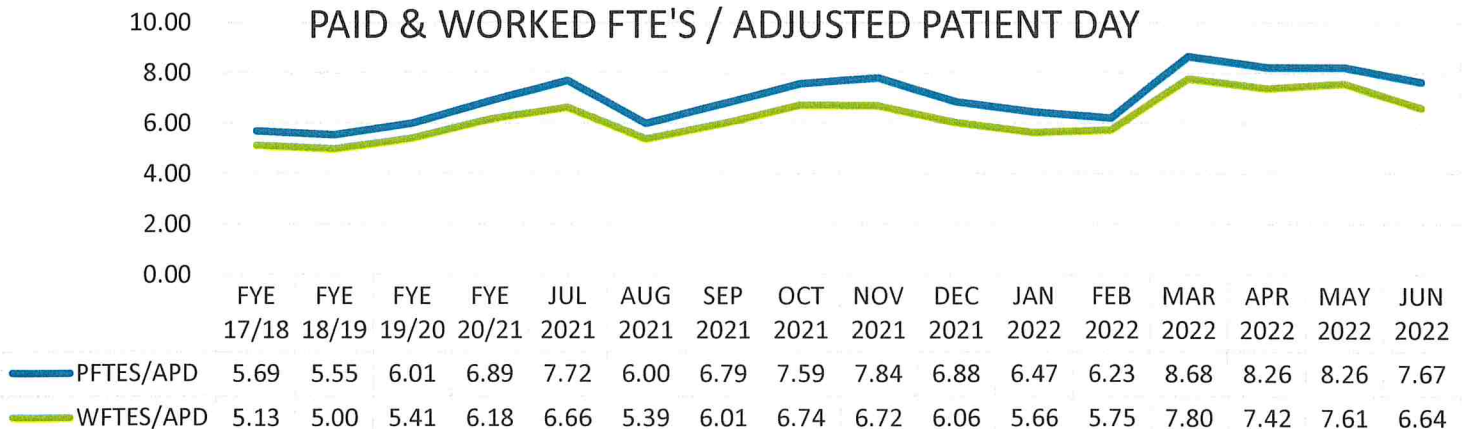
SURGERY CASES, G.I. CASES, N/B DELIVERIES



PAID & WORKED FTE'S



PAID & WORKED FTE'S / ADJUSTED PATIENT DAY



INCOME STATEMENT

Gross Patient Revenue (000's) (Monthly Ave.)

Represents total charges (before discounts and allowances) made for all patient services provided.

Net Patient Revenue (NPR) (000's) (Monthly Ave.)

Equals the sum of all (patient) charges for services provided that are due to the hospital, less estimated adjustments for discounts and other contractual disallowances for which the patients may be entitled.

NPR as % of Gross

Reflects the percentage of Gross Patient Revenues (charges) that are expected to be collected. Calculated by dividing Net Patient Revenue by the Gross Patient Revenue.

Total Operating Revenue (000's) (Monthly Ave.)

This reflects all Revenues available for payment of Operating Expenses. This includes Net Patient Revenue plus all other forms of miscellaneous Revenues.

Salaries, Wages, Benefits & Contract Labor (000's) (Monthly Ave.)

Represents the total staffing expenses of the Hospital

SWB + Contract Labor as % of Total Operating Revenue

Identifies what portion the Operating Revenues are spent on staffing costs.

Total Operating Expense (TOE) (000's)(Monthly Ave.)

Operating Expense reflects all costs needed to fund the Hospital's business operations.

TOE as % of Total Operating Revenue

Identifies the relationship that Operating Expenses have to the Total Operating Revenues.

EBIDA (000's)(Monthly Average)

Earnings Before Interest, Depreciation, and Amortization. This reflects the difference between Net Operating Revenues and Total Operating Expense. This is a quick measurement of the Hospital's ability to meet its financial obligations and have additional funds for equipment replacement and future growth of the organization.

EBIDA as % of NPR

This measurement is a gauge of the surplus (or deficit) of funds available for operations and future growth.

Net Patient Revenue vs. Total Labor Expense
(new in February, 2022)

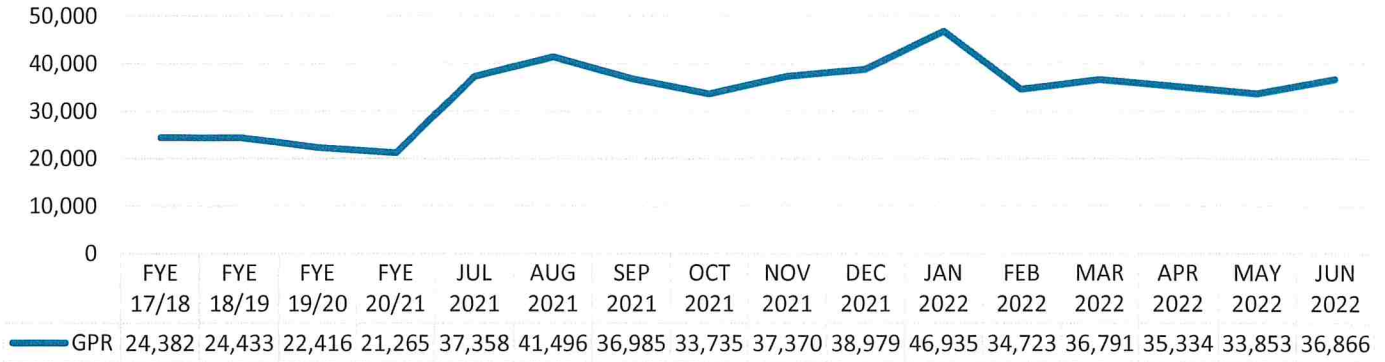
This measurement illustrates that Net Patient Revenues basically only cover Total Labor Expense, and that all of the Other Revenues and Supplemental Incomes are necessary to cover the remaining operational Expenses and EBIDA required to operate the Hospital.

Operating Revenues (Normalized), Expenses, Staffing Expenses, and EBIDA (Normalized)
(new in February, 2022)

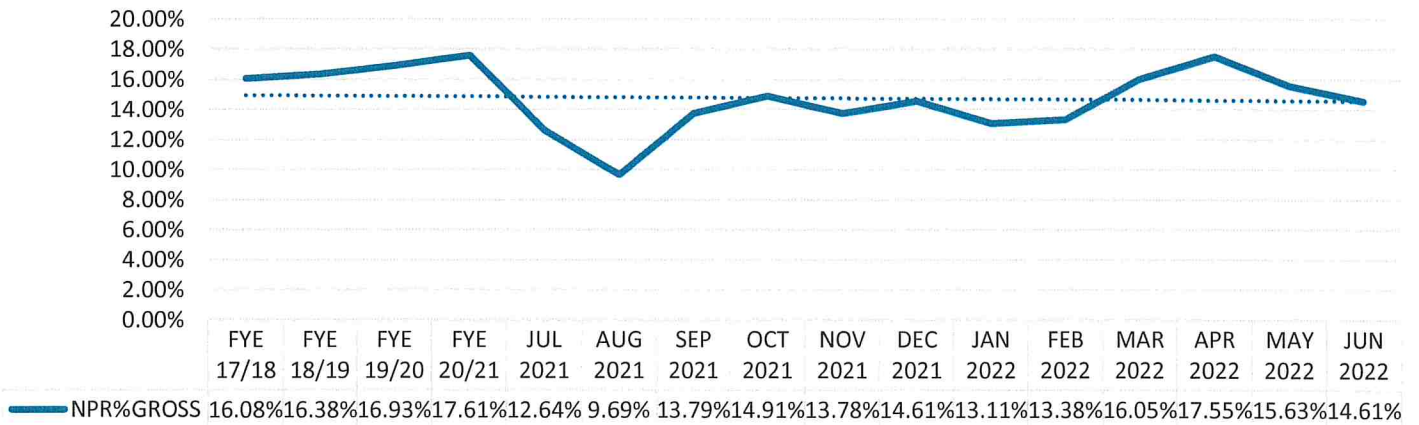
This graph illustrates the "normalization" of Operating Revenues and EBIDA, by reallocating the Rate Range Income booked in December, 2021 over the all 6 months of the FYE December 31, 2021.

SAN GORGONIO MEMORIAL HOSPITAL

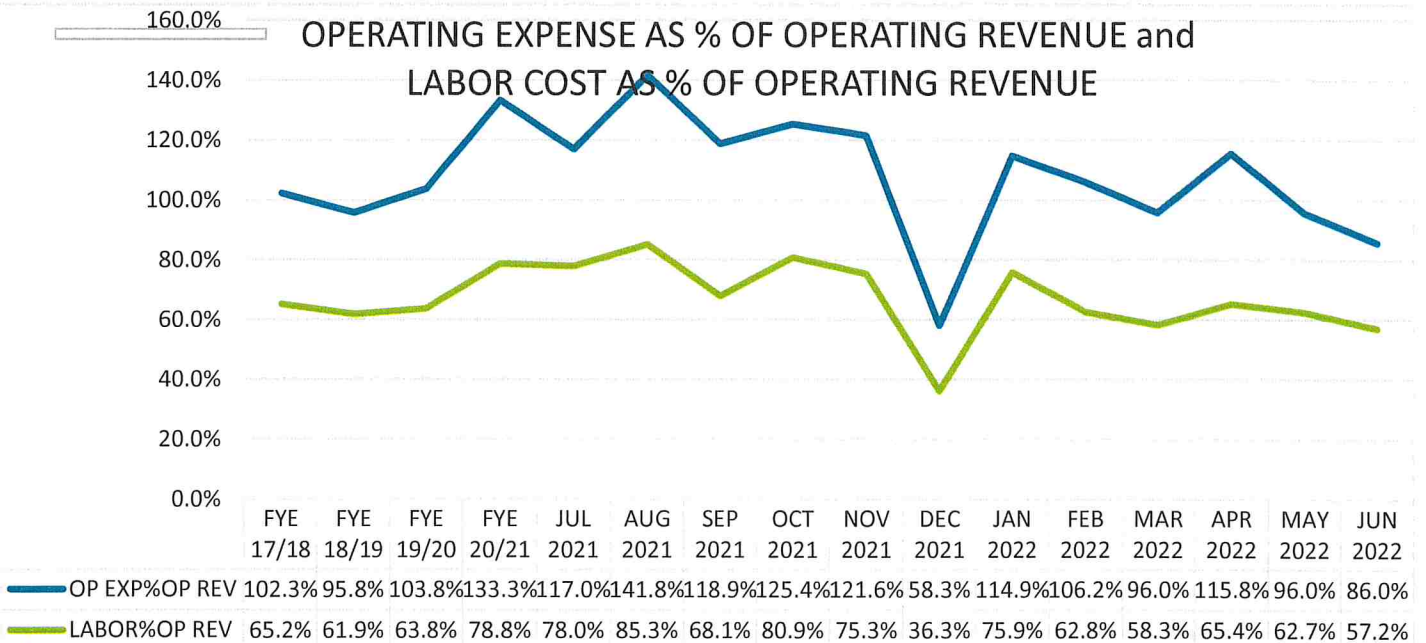
GROSS PATIENT REVENUE



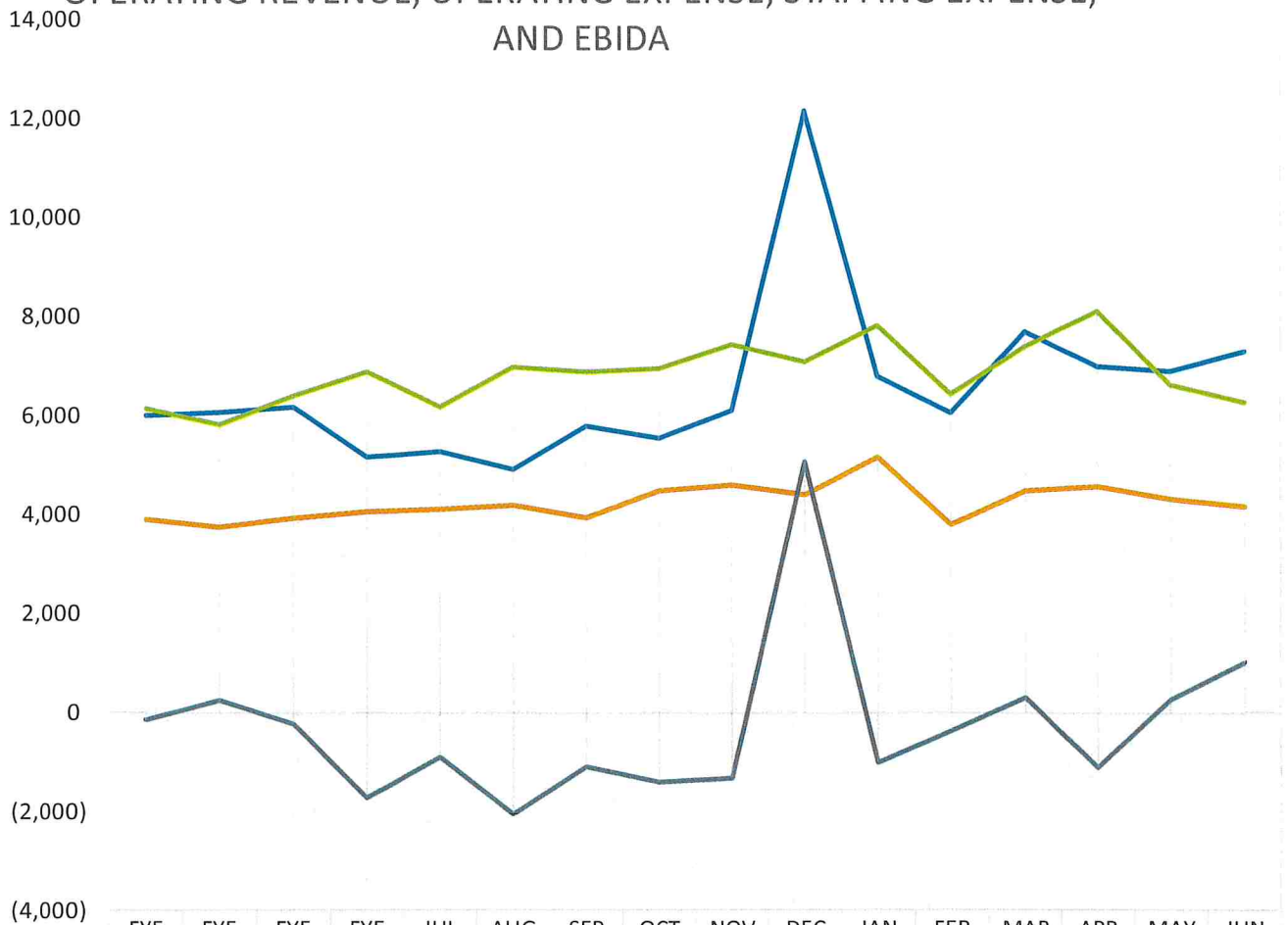
NET PATIENT REVENUE AS % OF GROSS



OPERATING EXPENSE AS % OF OPERATING REVENUE and LABOR COST AS % OF OPERATING REVENUE

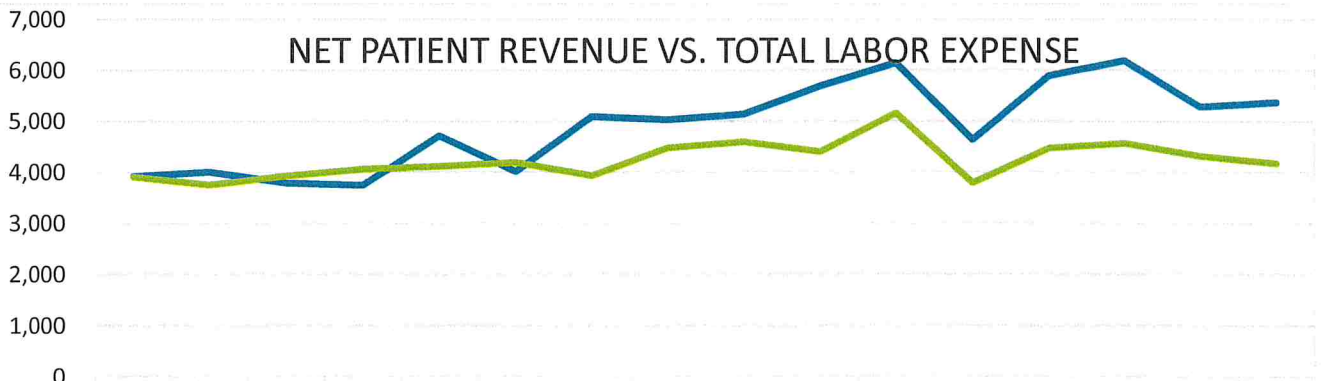


SAN GORGONIO MEMORIAL HOSPITAL OPERATING REVENUE, OPERATING EXPENSE, STAFFING EXPENSE, AND EBIDA



| | FYE 17/18 | FYE 18/19 | FYE 19/20 | FYE 20/21 | JUL 2021 | AUG 2021 | SEP 2021 | OCT 2021 | NOV 2021 | DEC 2021 | JAN 2022 | FEB 2022 | MAR 2022 | APR 2022 | MAY 2022 | JUN 2022 |
|-----------|-----------|-----------|-----------|-----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| OP REV | 6,006 | 6,069 | 6,165 | 5,160 | 5,275 | 4,914 | 5,787 | 5,541 | 6,107 | 12,147 | 6,796 | 6,054 | 7,693 | 6,990 | 6,896 | 7,296 |
| OP EXP | 6,147 | 5,817 | 6,398 | 6,878 | 6,175 | 6,969 | 6,880 | 6,947 | 7,429 | 7,079 | 7,808 | 6,428 | 7,383 | 8,097 | 6,619 | 6,273 |
| STAFF EXP | 3,915 | 3,755 | 3,932 | 4,065 | 4,115 | 4,194 | 3,939 | 4,484 | 4,601 | 4,405 | 5,160 | 3,799 | 4,483 | 4,575 | 4,321 | 4,176 |
| EBIDA | (141) | 252 | (233) | (1,719) | (899) | (2,055) | (1,093) | (1,406) | (1,321) | 5,068 | (1,012) | (374) | 310 | (1,107) | 277 | 1,023 |

NET PATIENT REVENUE VS. TOTAL LABOR EXPENSE



| | FYE 17/18 | FYE 18/19 | FYE 19/20 | FYE 20/21 | JUL 2021 | AUG 2021 | SEP 2021 | OCT 2021 | NOV 2021 | DEC 2021 | JAN 2022 | FEB 2022 | MAR 2022 | APR 2022 | MAY 2022 | JUN 2022 |
|-------------|-----------|-----------|-----------|-----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| NET PAT REV | 3,921 | 4,003 | 3,795 | 3,744 | 4,722 | 4,019 | 5,100 | 5,031 | 5,149 | 5,695 | 6,155 | 4,644 | 5,905 | 6,202 | 5,291 | 5,385 |
| LABOR EXP | 3,915 | 3,755 | 3,932 | 4,065 | 4,115 | 4,194 | 3,939 | 4,484 | 4,601 | 4,405 | 5,160 | 3,799 | 4,483 | 4,575 | 4,321 | 4,176 |

3-F

SAN GORGONIO MEMORIAL HOSPITAL

OPERATING REVENUE (NORMALIZED), OPERATING EXPENSE, STAFFING EXPENSE, AND EBIDA (NORMALIZED)

10,000

8,000

6,000

4,000

2,000

0

(2,000)

(4,000)

| | FYE 17/18 | FYE 18/19 | FYE 19/20 | FYE 20/21 | JUL 2021 | AUG 2021 | SEP 2021 | OCT 2021 | NOV 2021 | DEC 2021 | JAN 2022 | FEB 2022 | MAR 2022 | APR 2022 | MAY 2022 | JUN 2022 |
|--------------|-----------|-----------|-----------|-----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| REV NORMAL | 6,006 | 6,069 | 6,165 | 5,160 | 6,351 | 5,990 | 6,863 | 6,617 | 7,183 | 7,211 | 6,870 | 6,128 | 6,878 | 6,175 | 6,081 | 6,481 |
| OP EXP | 6,147 | 5,817 | 6,398 | 6,878 | 6,175 | 6,969 | 6,880 | 6,947 | 7,429 | 7,079 | 7,808 | 6,428 | 7,383 | 8,097 | 6,619 | 6,273 |
| LABOR EXP | 3,915 | 3,755 | 3,932 | 4,065 | 4,115 | 4,194 | 3,939 | 4,484 | 4,601 | 4,405 | 5,160 | 3,799 | 4,483 | 4,575 | 4,321 | 4,176 |
| EBIDA NORMAL | (141) | 252 | (233) | (1,719) | 177 | (979) | (17) | (330) | (245) | 132 | (938) | (300) | (505) | (1,922) | (538) | 208 |

3-G

BALANCE SHEET (Period End)

| | |
|--|---|
| Cash (000's) | Represents all unrestricted cash in the bank at each month-end. |
| Days Cash on Hand | Calculated by dividing amount of Cash on Hand by the historical average daily amount of cash requirements to cover operating expenses. |
| Accounts Receivable - Net (000's) | Equals the sum of all (patient) accounts that are due to the hospital, less estimated adjustments for discounts and other contractual disallowances for which the patients may be entitled. |
| A/R Days - Net | This measures the average number of days it takes to collect payment of the Net Accounts Receivable. Lower values are desired. |
| Current Ratio (Current Assets/Current Liabilities) | A measure that illustrates the ability for the hospital to pay its obligations that come due over the course of the next year. The greater the Current Assets as compared to the Current Liabilities, the stronger position the organization is in to pay its upcoming obligations. Desired position is greater than 1:00 to 1:00, preferably at least 1:25 to 1:00 or greater. |
| Quick Ratio | This measures the Cash + Net Accounts Receivable compared to the Current Liabilities. Desired ratio is greater than 1.00 : 1.00. |
| Accounts Payable (000's) | Reflects payment obligations of the Hospital as of a point in time. Excludes Loans, Payroll and other Debt obligations. Lower values are desired. |
| Accounts Payable Days | Reflects the average number of days that it takes to pay routine bills. Lower numbers are desired. Calculated by dividing the Accounts Payable amount by the historical average daily cost of routine expenses. |
| Line of Credit Balance (000's) | The amount that is currently borrowed from a lending institution as of a given point in time. |

3-1

SAN GORGONIO MEMORIAL HOSPITAL

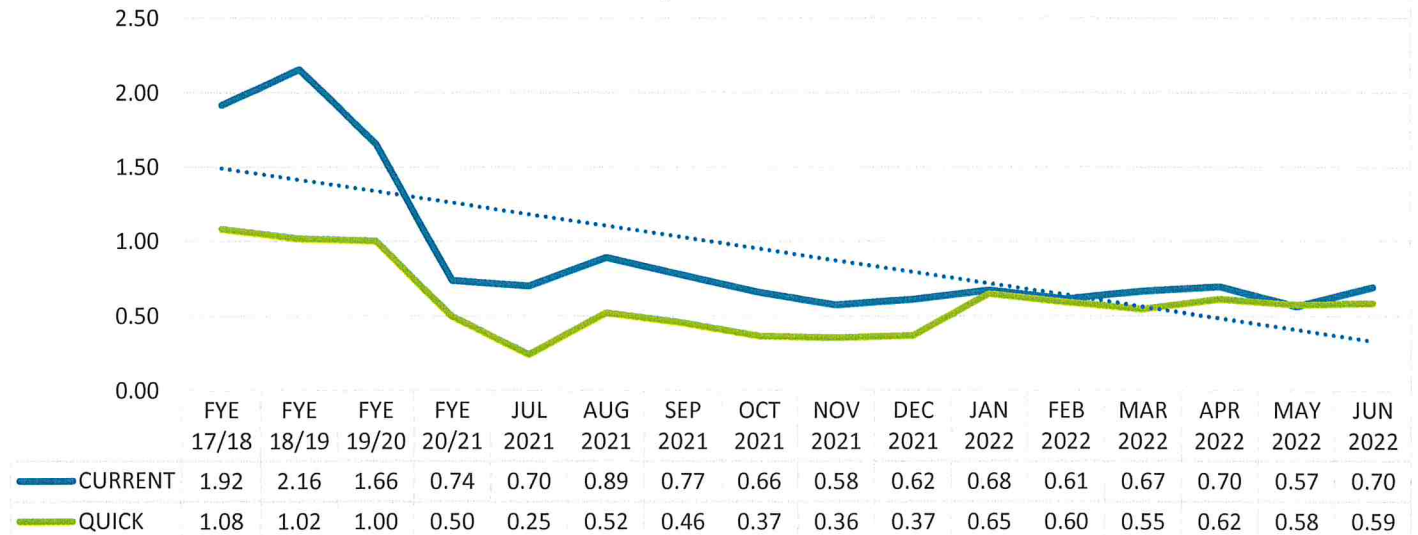
CASH & LINE OF CREDIT (000'S)



AVERAGE DAYS CASH ON HAND

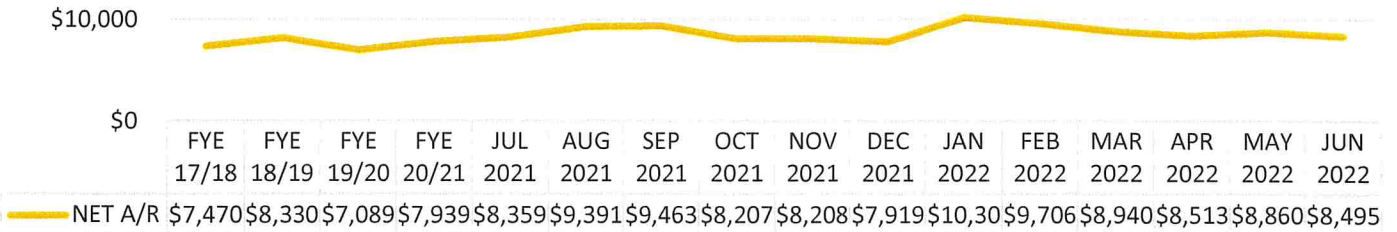


CURRENT RATIO and QUICK RATIO

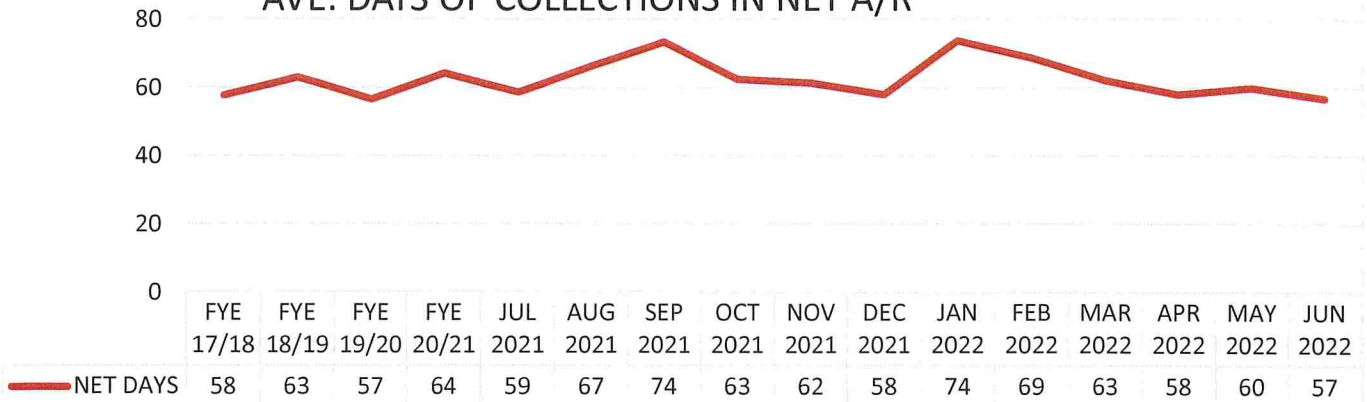


SAN GORGONIO MEMORIAL HOSPITAL

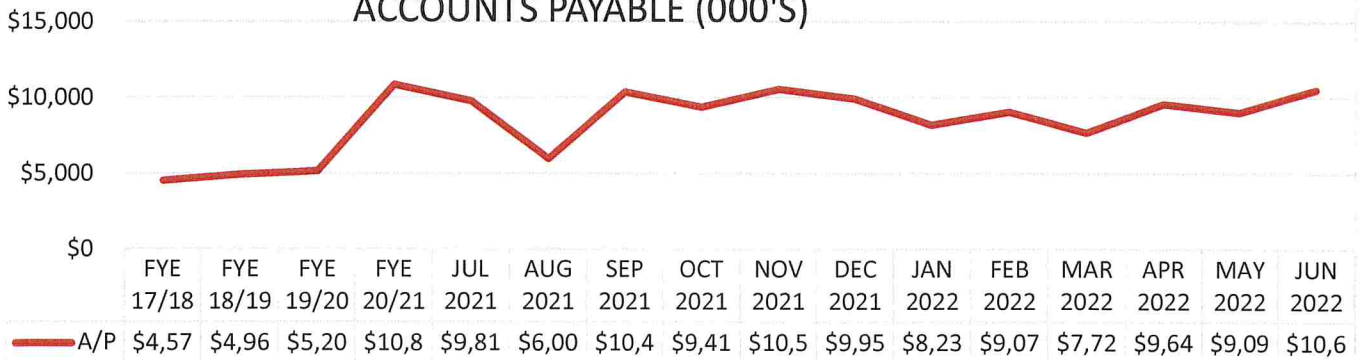
NET ACCOUNTS RECEIVABLE (000'S)



AVE. DAYS OF COLLECTIONS IN NET A/R



ACCOUNTS PAYABLE (000'S)



AVERAGE DAYS IN ACCOUNTS PAYABLE

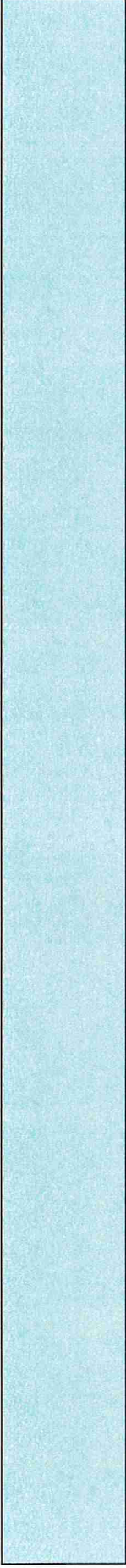


3-K

SAN GORGONIO MEMORIAL HOSPITAL
EXECUTIVE FINANCIAL SUMMARY
TWELVE MONTHS ENDING JUNE 30, 2022

BALANCE SHEET

| | YTD 6/30/2022 | Prior FYE 6/30/2021 |
|--|-----------------------|------------------------|
| ASSETS | | |
| [1] Current Assets | \$ 23,401,085 | \$ 16,547,047 |
| [2] Assets Whose Use is Limited | 12,704,494 | 10,422,841 |
| [3] Property, Plant & Equipment (Net) | 73,514,801 | 77,876,031 |
| [4] Other Assets | 503,000 | 1,196,701 |
| [5] Total Unrestricted Assets | 110,123,381 | 106,042,620 |
| [6] Restricted Assets | 0 | 0 |
| [7] Total Assets | \$ 110,123,381 | \$ 106,042,620 |
| LIABILITIES AND NET ASSETS | | |
| [8] Current Liabilities | \$33,649,575 | \$24,037,506 |
| [9] Long-Term Debt | 105,323,946 | 108,480,892 |
| [10] Other Long-Term Liabilities | 2,231,628 | 0 |
| [11] Total Liabilities | \$ 141,205,148 | \$ 132,518,398 |
| [12] Net Assets | \$ (31,081,767) | \$ (26,475,778) |
| [13] Total Liabilities and Net Assets | \$ 110,123,381 | \$ 106,042,620 |



| KEY STATISTICS AND RATIOS | | | | | |
|----------------------------------|-----------------------------|-----------------------------|-----------------------------|----------------------|-------------------------------|
| | 05/31/22 ACTUAL FY 22 | 06/30/22 ACTUAL FY 22 | 06/30/22 BUDGET FY 22 | 2022 YTD FY 22 | 2021 YR END TOTAL FY 21 |
| [1] Total Acute Patient Days | 580 | 680 | 1,025 | 9,689 | 11,008 |
| [2] Average Daily Census | 18.7 | 22.7 | 34.2 | 26.5 | 30.2 |
| [3] Average Acute Length of Stay | 3.4 | 3.2 | 4.1 | 3.9 | 4.1 |
| [4] Patient Discharges | 170 | 211 | 248 | 2,502 | 2,667 |
| [5] Observation Days | 228 | 241 | 229 | 2,775 | 2,512 |
| [6] Total Emergency Room Visits | 3,415 | 3,470 | 2,982 | 39,374 | 33,299 |
| [7] Average ED Visits Per Day | 110 | 116 | 99 | 108 | 91 |
| [9] Total Surgeries | 153 | 153 | 90 | 1,446 | 837 |
| [10] Deliveries/Births | 21 | 16 | 15 | 175 | 158 |

Statement of Revenue and Expense
SAN GORGONIO MEMORIAL HOSPITAL
BANNING, CALIFORNIA
TWELVE MONTHS ENDING JUNE 30, 2022

| | DISTRICT ONLY | CURRENT MONTH | | | | Percentage Variance |
|--|---------------|---------------|-----------------|----------------|------------|---------------------|
| | | ACTUAL | FY 21 | FY 21 | Positive | |
| | | 06/30/22 | ACTUAL | CUR MO BUD | (Negative) | |
| | | | 06/30/22 | 06/30/22 | Variance | |
| Gross Patient Revenue | | | | | | |
| [1] Inpatient Revenue | \$ - | \$ 13,219,644 | \$ 19,972,293 | \$ (6,752,649) | | -51.1% |
| [2] Inpatient Psych/Rehab Revenue | - | - | - | - | | |
| [3] Outpatient Revenue | - | 23,646,523 | \$ 20,145,562 | 3,500,961 | | 14.8% |
| [4] Long Term Care Revenue | - | - | - | - | | |
| [5] Home Health Revenue | - | - | - | - | | |
| [6] Total Gross Patient Revenue | \$ - | \$ 36,866,167 | \$ 40,117,855 | \$ (3,251,689) | | -8.8% |
| Deductions From Revenue | | | | | | |
| [7] Discounts and Allowances | - | (33,958,338) | \$ (34,346,265) | \$ 387,927 | | -1.1% |
| [8] Bad Debt Expense | - | 2,536,474 | \$ (850,000) | 3,386,474 | | 133.5% |
| [9] Prior Year Settlements | - | - | \$ - | - | | |
| [10] Charity Care | - | (59,144) | \$ (58,333) | (811) | | 1.4% |
| [11] Total Deductions From Revenue | - | (31,481,008) | (35,254,598) | \$ 3,773,590 | | -12.0% |
| [12] | | -85.4% | -87.9% | | | |
| [13] Net Patient Revenue | \$ - | \$ 5,385,158 | \$ 4,863,257 | \$ 521,901 | | 9.7% |
| Non Patient Operating Revenues | | | | | | |
| [14] IGT/DSH Revenues | - | - | \$ 480,000 | \$ (480,000) | | 0.0% |
| [15] Grants & Other Op Revenues | - | 1,386,261 | \$ 300,191 | 1,086,070 | | 78.3% |
| [16] Clinic Net Revenues | - | - | \$ - | - | | |
| [17] Tax Subsidies Measure D | 233,333 | 233,333 | \$ 239,583 | (6,250) | | -2.7% |
| [18] Tax Subsidies Prop 13 | 150,000 | 150,000 | \$ 166,667 | (16,667) | | -11.1% |
| [19] Tax Subsidies County Supplemental Funds | 141,462 | 141,462 | \$ 100,000 | 41,462 | | 0.0% |
| Non - Patient Revenue | \$ 524,795 | \$ 1,911,057 | \$ 1,286,441 | \$ 624,616 | | 32.7% |
| Total Operating Revenue | \$ 524,795 | \$ 7,296,215 | \$ 6,149,698 | \$ 1,146,517 | | 15.7% |
| Operating Expenses | | | | | | |
| [20] Salaries and Wages | - | 3,245,290 | 3,407,469 | \$ 162,179 | | 5.0% |
| [21] Fringe Benefits | - | 834,861 | 762,163 | (72,698) | | -8.7% |
| [22] Contract Labor | - | 96,023 | 65,271 | (30,752) | | -32.0% |
| [23] Physicians Fees | - | 243,800 | 340,810 | 97,010 | | 39.8% |
| [24] Purchased Services | 21,339 | 744,090 | 868,853 | 124,763 | | 16.8% |
| [25] Supply Expense | - | 559,448 | 810,229 | 250,781 | | 44.8% |
| [26] Utilities | (1,123) | 114,902 | 108,067 | (6,835) | | -5.9% |
| [27] Repairs and Maintenance | 9,715 | 90,516 | 55,920 | (34,595) | | -38.2% |
| [28] Insurance Expense | - | 120,427 | 115,494 | (4,933) | | -4.1% |
| [29] All Other Operating Expenses | - | 111,788 | 193,338 | 81,550 | | 73.0% |
| [30] Supplemental and Grant Expense | - | - | 0 | - | | 0.0% |
| [31] Leases and Rentals | - | 112,284 | 134,381 | 22,097 | | 19.7% |
| [32] Clinic Expense | - | - | 0 | - | | 0.0% |
| [33] Total Operating Expenses | \$ 29,931 | \$ 6,273,429 | \$ 6,861,995 | \$ 588,566 | | 9.4% |
| [34] EBIDA | \$ 494,865 | \$ 1,022,786 | \$ (712,297) | \$ 1,735,083 | | 169.6% |
| Interest Expense and Depreciation | | | | | | |
| [35] Depreciation | 504,865 | 504,865 | 535,486 | \$ 30,621 | | 6.1% |
| [36] Interest Expense and Amortization | 359,808 | 380,300 | 431,460 | 51,159 | | 13.5% |
| [37] Total Interest & depreciation | 864,673 | 885,165 | 966,945 | 81,780 | | 9.2% |
| Non-Operating Revenue: | | | | | | |
| [38] Contributions & Other | 3,045 | 4,029 | 75,000 | (70,971) | | -1761.3% |
| [39] Tax Subsidies for GO Bonds - M-A | 613,966 | 613,966 | 666,667 | (52,701) | | -8.6% |
| [40] Total Non Operating Revenue/(Expense) | 617,011 | 617,995 | 741,667 | \$ (123,672) | | -20.0% |
| [41] Total Net Surplus/(Loss) | \$ 247,202 | \$ 755,616 | \$ (937,575) | \$ 1,693,191 | | 224.1% |
| [42] Extra-ordinary loss on Financing | - | - | - | - | | |
| [43] Increase/(Decrease in Unrestricted Net Assets | \$ 247,202 | \$ 755,616 | \$ (937,575) | \$ 1,693,191 | | 224.1% |
| [44] Total Profit Margin | 47.10% | 10.36% | -15.25% | | | |
| [45] EBIDA % | 94.30% | 14.02% | -11.58% | | | |

Statement of Revenue and Expense
SAN GORGONIO MEMORIAL HOSPITAL
BANNING, CALIFORNIA
TWELVE MONTHS ENDING JUNE 30, 2022

| | YEAR-TO-DATE | | | | |
|--|---------------------|----------------------|----------------------|------------------------------------|------------------------|
| | DISTRICT ONLY | | | Positive (Negative) Variance | Percentage Variance |
| | Actual 06/30/22 | Actual 06/30/22 | Budget 06/30/22 | | |
| Gross Patient Revenue | | | | | |
| [1] Inpatient Revenue | \$ - | \$ 199,240,684 | \$ 247,562,258 | \$ (48,321,575) | -24.3% |
| [2] Inpatient Psych/Rehab Revenue | - | - | - | - | |
| [3] Outpatient Revenue | - | 251,184,896 | \$ 255,546,210 | (4,361,314) | -1.7% |
| [4] Long Term Care Revenue | - | - | - | - | |
| [5] Home Health Revenue | - | - | - | - | |
| [6] Total Gross Patient Revenue | \$ - | \$ 450,425,580 | \$ 503,108,468 | \$ (52,682,889) | -11.7% |
| Deductions From Revenue | | | | | |
| [7] Discounts and Allowances | - | (372,934,437) | \$ (431,395,966) | \$ 58,461,529 | 15.7% |
| [8] Bad Debt Expense | - | (12,546,840) | \$ (10,200,000) | (2,346,840) | -18.7% |
| [9] Prior Year Settlements | - | - | \$ - | - | |
| [10] Charity Care | - | (1,643,365) | \$ (700,000) | (943,365) | -57.4% |
| [11] Total Deductions From Revenue | - | (387,124,642) | (442,295,966) | \$ 55,171,323 | 14.3% |
| [12] | | 85.9% | -87.9% | | |
| [13] Net Patient Revenue | \$ - | \$ 63,300,937 | \$ 60,812,503 | \$ 2,488,435 | 3.9% |
| Non Patient Operating Revenues | | | | | |
| [14] IGT/DSH Revenues | - | 6,016,888 | \$ 6,762,227 | \$ (745,339) | -12.4% |
| [15] Grants & Other Op Revenues | - | 7,429,783 | \$ 3,602,293 | 3,827,491 | 51.5% |
| [16] Clinic Net Revenues | - | - | \$ - | - | |
| [17] Tax Subsidies Measure D | 2,799,996 | 2,799,996 | \$ 2,875,000 | (75,004) | -2.7% |
| [18] Tax Subsidies Prop 13 | 1,800,000 | 1,800,000 | \$ 2,000,000 | (200,000) | -11.1% |
| [19] Tax Subsidies County Supplemental Funds | 141,462 | 141,462 | \$ 100,000 | 41,462 | 0.0% |
| Non- Patient Revenue | \$ 4,741,458 | \$ 18,188,130 | \$ 15,339,520 | \$ 2,848,610 | 15.7% |
| Total Operating Revenue | \$ 4,741,458 | \$ 81,489,067 | \$ 76,152,022 | \$ 5,337,045 | 6.5% |
| Operating Expenses | | | | | |
| [20] Salaries and Wages | - | 40,984,374 | \$ 42,170,755 | \$ 1,186,381 | 2.9% |
| [21] Fringe Benefits | - | 10,011,418 | \$ 9,206,280 | (805,138) | -8.0% |
| [22] Contract Labor | - | 1,312,551 | \$ 827,611 | (484,940) | -36.9% |
| [23] Physicians Fees | - | 3,838,995 | \$ 3,979,878 | 140,883 | 3.7% |
| [24] Purchased Services | 312,339 | 10,707,599 | \$ 10,420,653 | (286,946) | -2.7% |
| [25] Supply Expense | - | 11,431,922 | \$ 9,941,099 | (1,490,823) | -13.0% |
| [26] Utilities | 23,506 | 1,334,299 | \$ 1,080,000 | (254,299) | -19.1% |
| [27] Repairs and Maintenance | 106,943 | 915,394 | \$ 669,543 | (245,851) | -26.9% |
| [28] Insurance Expense | - | 1,427,942 | \$ 1,385,931 | (42,012) | -2.9% |
| [29] All Other Operating Expenses | - | 1,160,276 | \$ 2,316,085 | 1,155,809 | 99.6% |
| [30] Supplemental and Grant Expense | - | - | \$ 895,056 | 895,056 | 0.0% |
| [31] Leases and Rentals | - | 968,306 | \$ 1,562,576 | 594,270 | 61.4% |
| [32] Clinic Expense | - | - | \$ - | - | 0.0% |
| [33] Total Operating Expenses | \$ 442,787 | \$ 84,093,076 | \$ 84,455,467 | \$ 362,390 | 0.4% |
| [34] EBIDA | \$ 4,298,671 | \$ (2,604,009) | \$ (8,303,444) | \$ 5,699,435 | -218.9% |
| Interest Expense and Depreciation | | | | | |
| [35] Depreciation | 5,553,515 | 6,058,380 | \$ 6,058,380 | \$ - | 0.0% |
| [36] Interest Expense and Amortization | 4,011,748 | 4,919,841 | \$ 5,156,857 | 237,015 | 4.8% |
| [37] Total Interest & depreciation | 9,565,263 | 10,978,221 | 11,215,237 | 237,015 | 2.2% |
| Non-Operating Revenue: | | | | | |
| [38] Contributions & Other | 115,049 | 480,816 | \$ 900,000 | (419,184) | -87.2% |
| [39] Tax Subsidies for GO Bonds - M-A | 7,367,588 | 7,367,588 | \$ 8,000,000 | (632,412) | -8.6% |
| [40] Total Non Operating Revenue/(Expense) | 7,482,637 | 7,848,403 | 8,900,000 | (1,051,597) | -13.4% |
| [41] Total Net Surplus/(Loss) | \$ 2,216,045 | \$ (5,733,827) | \$ (10,618,681) | \$ 4,884,854 | -85.2% |
| [42] Extra-ordinary loss on Financing | - | - | - | - | |
| [43] Increase/(Decrease in Unrestricted Net Assets | \$ 2,216,045 | \$ (5,733,827) | \$ (10,618,681) | \$ 4,884,854 | -85.2% |
| [44] Total Profit Margin | 46.74% | -7.04% | -13.94% | | |
| [45] EBIDA % | 90.66% | -3.20% | -10.90% | | |

Balance Sheet - Assets

**SAN GORGONIO MEMORIAL HOSPITAL
BANNING, CALIFORNIA
TWELVE MONTHS ENDING JUNE 30, 2022**

| | | ASSETS | | | | |
|---------------------------------------|---|-------------------------------|-------------------------------|-----------------------------|-------------------------------------|--------------------------------|
| | | DISTRICT ONLY | | | | |
| | | Current Month 6/30/2022 | Current Month 6/30/2022 | Prior Month 5/31/2022 | Positive/ (Negative) Variance | Prior Year End 6/30/2021 |
| Current Assets | | | | | | |
| [1] | Cash and Cash Equivalents | \$1,873,283 | \$11,340,002 | \$6,479,991 | \$ 4,860,011 | \$ 2,395,672 |
| [2] | Gross Patient Accounts Receivable | \$0 | \$77,594,807 | \$83,700,002 | \$ (6,105,196) | 58,800,003 |
| [3] | Less: Bad Debt and Allowance Reserves | \$0 | (\$69,099,845) | (\$74,840,418) | \$ 5,740,573 | (50,860,800) |
| [4] | Net Patient Accounts Receivable | \$0 | \$8,494,961 | \$8,859,584 | \$ (364,623) | 7,939,203 |
| [5] | Taxes Receivable | \$1,178,859 | \$1,178,859 | \$117,177 | \$ 1,061,682 | 1,000,061 |
| [6] | Other Receivables (includes advances) | \$660,465 | \$738,141 | (\$2,267,925) | \$ 3,006,066 | 2,015,108 |
| [7] | Inventories | \$0 | \$2,297,204 | \$2,433,993 | \$ (136,789) | 1,776,554 |
| [8] | Prepaid Expenses | \$426,169 | \$1,197,395 | \$1,032,187 | \$ 165,208 | 21,485 |
| [9] | Due From Third Party Payers-DSH | \$0 | (\$1,845,477) | (\$1,845,477) | \$ (0) | 138,601 |
| [10] | Malpractice Receivable | \$0 | \$0 | \$0 | \$ - | - |
| [11] | Supplimental Receivables | \$0 | \$0 | \$256,558 | \$ (256,558) | 1,260,363 |
| | Total Current Assets | 4,138,776 | 23,401,085 | 15,066,087 | \$ (736,481) | \$ 16,547,047 |
| Assets Whose Use is Limited | | | | | | |
| [12] | Cash | | | | | |
| [13] | Investments | | | | | |
| [14] | Bond Reserve/Debt Retirement Fund | \$12,704,494 | \$12,704,494 | \$12,546,077 | \$ 158,417 | 10,422,841 |
| [15] | Trustee Held Funds | | | | | |
| [16] | Funded Depreciation | | | | | |
| [17] | Board Designated Funds | | | | | |
| [18] | Other Limited Use Assets | | | | | 0 |
| | Total Limited Use Assets | 12,704,494 | 12,704,494 | 12,546,077 | \$ (223,324) | \$ 10,422,841 |
| Property, Plant, and Equipment | | | | | | |
| [19] | Land and Land Improvements | \$4,828,182 | \$4,828,182 | \$4,828,182 | \$ - | \$ 3,655,877 |
| [20] | Building and Building Improvements | \$129,281,491 | \$129,281,491 | \$129,281,561 | \$ (70) | 130,453,796 |
| [21] | Equipment | \$26,856,789 | \$26,856,789 | \$26,853,549 | \$ 3,240 | 26,562,201 |
| [22] | Construction In Progress | \$1,694,007 | \$1,694,007 | \$1,679,782 | \$ 14,225 | 291,444 |
| [23] | Capitalized Interest | | | | | |
| [24] | Gross Property, Plant, and Equipment | 162,660,469 | 162,660,469 | 162,643,074 | \$ 17,395 | 160,963,318 |
| [25] | Less: Accumulated Depreciation | (\$89,145,667) | (\$89,145,667) | (\$88,640,802) | \$ (504,865) | (83,087,287) |
| [26] | Net Property, Plant, and Equipment | 73,514,801 | 73,514,801 | 74,002,271 | \$ (475,050) | \$ 77,876,031 |
| Other Assets | | | | | | |
| [27] | Unamortized Loan Costs | \$627,385 | \$614,440 | \$617,029 | \$ (2,589) | \$ 645,507 |
| [28] | Assets Held for Future Use | | \$485 | \$450 | \$ 35 | |
| [29] | Investments in Subsidiary/Affiliated Org. | \$21,282,258 | (\$111,925) | \$0 | \$ (111,925) | 551,194 |
| [30] | Other | | | | | |
| [31] | Total Other Assets | 21,909,642 | 503,000 | 617,479 | \$ (114,479) | \$ 1,196,701 |
| [32] | TOTAL UNRESTRICTED ASSETS | 112,267,714 | 110,123,381 | 102,231,915 | \$ 7,891,466 | \$ 106,042,620 |
| Restricted Assets | | | | | | |
| | | 0 | 0 | 0 | 0 | 0 |
| [33] | TOTAL ASSETS | \$112,267,714 | \$110,123,381 | \$102,231,915 | \$ 7,891,466 | \$ 106,042,620 |

Balance Sheet - Liabilities and Net Assets

SAN GORGONIO MEMORIAL HOSPITAL

BANNING, CALIFORNIA

TWELVE MONTHS ENDING JUNE 30, 2022

| | DISTRICT ONLY | LIABILITIES AND FUND BALANCE | | | |
|---|----------------------------|------------------------------|--------------------------|-------------------------------------|--------------------------------|
| | Current Month 6/30/2022 | Current Month 6/30/2022 | Prior Month 5/30/2022 | Positive/ (Negative) Variance | Prior Year End 6/30/2021 |
| Current Liabilities | | | | | |
| [1] Accounts Payable | \$ 980,448 | \$ 10,600,622 | \$ 9,090,210 | \$ (1,510,412) | \$ 11,184,294 |
| [2] Notes and Loans Payable (Line of Credit) | - | 12,000,000 | 6,000,000 | \$ (6,000,000) | - |
| [3] Accounts Payable- Tax advance | - | - | - | \$ - | - |
| [4] Accrued Payroll Taxes | - | 5,597,527 | 6,017,448 | \$ 419,921 | 4,865,852 |
| [5] Accrued Benefits | - | - | - | \$ - | - |
| [6] Accrued Benefits Current Portion | - | - | - | \$ - | - |
| [7] Other Accrued Expenses | - | - | - | \$ - | - |
| [8] Accrued GO Bond Interest Payable | 2,526,756 | 2,526,756 | 2,049,071 | \$ (477,684) | 1,945,116 |
| [9] Stimulus Advance | - | 4,259 | - | \$ (4,259) | 2,120,577 |
| [10] Due to Third Party Payers (Settlements) | - | - | - | \$ - | - |
| [11] Advances From Third Party Payers | - | - | 400,001 | \$ 400,001 | 1,533,196 |
| [12] Current Portion of LTD (Bonds/Mortgages) | 2,335,000 | 2,335,000 | 2,335,000 | \$ - | 2,335,000 |
| [13] Current Portion of LTD (Leases) | - | - | - | \$ - | - |
| [14] Other Current Liabilities | - | 585,411 | 601,692 | - | 53,471 |
| Total Current Liabilities | 5,842,204 | 33,649,575 | 25,493,422 | \$ 791,861 | 24,037,506 |
| Long Term Debt | | | | | |
| [15] Bonds/Mortgages Payable (net of Cur Portion) | 103,043,956 | \$103,030,598 | \$ 103,043,956 | \$ 13,358 | \$ 108,165,892 |
| [16] Leases Payable (net of current portion) | \$2,293,348 | \$2,293,348 | \$2,300,565 | \$ 7,217 | \$315,000 |
| [17] Total Long Term Debt (Net of Current) | 105,337,304 | 105,323,946 | 105,344,521 | \$ 313,358 | 108,480,892 |
| Other Long Term Liabilities | | | | | |
| [18] Deferred Revenue | - | - | - | \$ - | 0 |
| [19] Accrued Pension Expense (Net of Current) | - | - | - | \$ - | 0 |
| [20] Other-Bridge Loan | 0 | 2,231,628 | 2,231,628 | \$ - | 0 |
| [21] Total Other Long Term Liabilities | 0 | 2,231,628 | 2,231,628 | 0 | 0 |
| TOTAL LIABILITIES | \$ 111,179,508 | \$ 141,205,148 | \$ 134,069,570 | \$ (7,135,578) | \$ 132,518,398 |
| Net Assets: | | | | | |
| [22] Unrestricted Fund Balance | (1,127,838) | (25,347,940) | \$ (25,347,940) | \$ - | \$ 3,261,178 |
| [23] Temporarily Restricted Fund Balance | - | - | - | \$ - | - |
| [24] Restricted Fund Balance | - | - | - | \$ - | - |
| [25] Net Revenue/(Expenses) | 2,216,045 | (5,733,827) | (6,489,715) | (755,888) | (29,736,956) |
| [26] TOTAL NET ASSETS | 1,088,207 | (31,081,767) | (31,837,655) | (755,888) | (26,475,778) |
| [27] TOTAL LIABILITIES AND NET ASSETS | \$ 112,267,714 | \$ 110,123,381 | \$ (102,231,915) | \$ (212,355,296) | \$ 106,042,620 |
| | \$ 0 | \$ 0 | \$ - | (\$0) 0 | \$ - |

Statement of Cash Flows

SAN GORGONIO MEMORIAL HOSPITAL BANNING, CALIFORNIA TWELVE MONTHS ENDING JUNE 30, 2022

| | | CASH FLOW | |
|------------------------------------|---|--|-------------------|
| | | Current Month 6/30/2022 | |
| HEALTHCARE SYSTEM CASH FLOW | | | |
| BEGINNING CASH BALANCES | | | |
| [1] | Cash: Beginning Balances- HOSPITAL | \$ | 4,572,383 |
| [2] | Cash: Beginning Balances- DISTRICT | | 1,907,608 |
| [3] | Cash: Beginning Balances TOTALS | \$ | 6,479,991 |
| Receipts | | | |
| [4] | Pt Collections | \$ | 4,994,132 |
| [5] | Tax Subsidies Measure D | | - |
| [6] | Tax Subsidies Prop 13 | | - |
| [7] | Tax Subsidies County Supplemental Funds | | - |
| [8] | IGT & other Supplemental (Net) | | 1,556,911 |
| [9] | Draws/(Paydown) of LOC Balances | | 6,000,000 |
| [10] | Other Misc Receipts/Transfers | | 85,542 |
| | TOTAL RECEIPTS | \$ | 12,636,585 |
| Disbursements | | | |
| [11] | Payroll/ Benefits | \$ | 4,080,151 |
| [12] | Other Operating Costs | | 5,854,538 |
| [13] | Capital Spending | | 17,395 |
| [14] | Debt serv payments (Hosp onlyw/ LOC interest) | | - |
| [15] | Other (increase) in AP /other bal sheet | | (2,175,511) |
| [16] | TOTAL DISBURSEMENTS | \$ | 7,776,573 |
| [17] | TOTAL CHANGE in CASH | \$ | 4,860,012 |
| ENDING CASH BALANCES | | | |
| [18] | Ending Balances- HOSPITAL | \$ | 9,466,720 |
| [19] | Ending Balances- DISTRICT | | 1,873,283 |
| [20] | Ending Balances- TOTALS | \$ | 11,340,003 |
| ADDITIONAL INFO | | | |
| [21] | LOC CURRENT BALANCES | \$ | 12,000,000 |
| | | | \$84,977 |

TAB E

POLICIES AND PROCEDURES FOR BOARD APPROVAL - Hospital Board Meeting of August 2, 2022

| | Title | Policy Area | Owner | Workflow Approval |
|---|--|--------------------------|---|---|
| 1 | Disclosure of Adverse Outcomes or Unanticipated Events | Risk | Sommers, Susan: Director of Infection Control and Risk Management | Ariel Whitley for Hospital Board of Directors |
| 2 | Environment of Care/Safety Committee | Environment of Care | Sanchez, Salvador: Director of Engineering | Ariel Whitley for Hospital Board of Directors |
| 3 | Organ / Tissue Donation | Administration | Brown, Pat: Chief Nursing Officer | Ariel Whitley for Hospital Board of Directors |
| 4 | The Radiation Safety Officer | Radiation Safety Program | Chamberlin, Krystal: Director Diagnostic Imaging | Ariel Whitley for Hospital Board of Directors |
| 5 | Utilities Management Plan 2022 | Engineering | Sanchez, Salvador: Director of Engineering | Ariel Whitley for Hospital Board of Directors |
| 6 | Warewashing/Dishwasher Use | Dietary | Hawthorne, Lakeisha: Director Food and Nutrition | Ariel Whitley for Hospital Board of Directors |
| 7 | Workplace Standards for Operations with Unsealed Radioactive Materials | Radiation Safety Program | Chamberlin, Krystal: Director Diagnostic Imaging | Ariel Whitley for Hospital Board of Directors |

TAB F

WE'RE READY WHEN YOU NEED US



**SAN GORGONIO
MEMORIAL HOSPITAL**

Since 1951 we've provided the best possible healthcare to our community.

Whether you're new to the area, or have lived here for generations, San Gorgonio Memorial Hospital is here to care for you.

600 N. Highland Springs Ave., Banning, CA
951-845-1121 | www.sgmh.org

Accidents Don't Take a Vacation, Neither Do We.



SAN GORGONIO
MEMORIAL HOSPITAL

Since 1951 we've provided the best possible healthcare to our community. Whether you're new to the area, or have lived here for generations, San Geronio Memorial Hospital is here to care for you.

600 N. Highland Springs Ave., Banning, CA
951-845-1121 | www.sgmh.org

WE ARE EXCEPTIONALLY HONORED TO BE YOUR HEALING PLACE



SAN GORONIO
MEMORIAL HOSPITAL

Since 1951 we've provided the best possible healthcare to our community.

Whether you're new to the area, or have lived here for generations, San Geronio Memorial Hospital is here to care for you.

600 N. Highland Springs Ave., Banning, CA
951-845-1121 | www.sgmh.org

Whitley, Ariel

From: Whitley, Ariel
Sent: Wednesday, July 13, 2022 9:19 AM
To: Whitley, Ariel
Subject: RE: NEWS: Dr. Ruiz Announces Nearly Half Million Investment to Improve Pass Area Health Care Access

From: O'Keeffe, Kelly <Kelly.O'Keeffe@mail.house.gov>
Sent: Tuesday, July 12, 2022 3:39 PM
To: O'Keeffe, Kelly <Kelly.O'Keeffe@mail.house.gov>
Subject: NEWS: Dr. Ruiz Announces Nearly Half Million Investment to Improve Pass Area Health Care Access



FOR IMMEDIATE RELEASE

July 12, 2022

MEDIA CONTACT: Kelly O'Keeffe
Kelly.OKeeffe@mail.house.gov; (202) 893-1554

Dr. Ruiz Announces Nearly Half Million Investment to Improve Pass Area Health Care Access

Washington, D.C. – Today, Congressman Raul Ruiz, M.D. (CA-36) announced the inclusion of a nearly half-million-dollar investment in Fiscal Year 2023 appropriations legislation to upgrade equipment for San Geronio Memorial Hospital (SGMH), the only emergency department in the Pass Area.

Once signed into law as part of a larger appropriations package, SGMH will use the funding to purchase a portable X-Ray unit and a mobile C-arm Fluoroscopy unit to provide imaging services in the operating room. Currently, the hospital's X-Ray Unit and C-arm unit are incapable of meeting the needs of the hospital to care for its patients. The funding included by Dr. Ruiz will help SGMH broaden its capabilities to provide safe, efficient care to its patients and improve health outcomes in the region. The House is expected the vote on the legislation in the coming weeks.

“As an emergency medicine physician, I know how crucial reliable, up-to-date equipment is to providing quality care to patients,” **said Dr. Ruiz.** “That is why I advocated for robust federal funding for San Geronio Memorial Hospital to upgrade its current equipment and improve health outcomes for local families. Once signed into law, this funding will make a meaningful difference in the lives of the people I serve and improve access to quality care.”

“San Gorgonio Memorial Hospital (SGMH) is honored to be included in the federal Community Project Funding program being facilitated by Congressman Raul Ruiz. This funding will allow the hospital to purchase needed diagnostic imaging equipment to better serve our community,” **said Steve Barron, CEO of San Gorgonio Memorial Hospital.** “As the only acute-care hospital in the San Gorgonio pass area, SGMH’s commitment to providing state-of-the-art diagnostic tools for our healthcare providers is always our priority. Receiving this funding will enhance our ability to continue with this goal. We appreciate Congressman Ruiz joining us in providing high-quality and personalized healthcare services to our community.”

BACKGROUND

For the FY23 appropriations cycle, Chair Rosa DeLauro (CT-03) announced that each Member of Congress could submit local community projects for potential funding. In total, Dr. Ruiz advocated for \$20.9 million for projects throughout California’s 36th Congressional District that will improve local infrastructure.

The FY23 Labor, Health and Human Services, and Education and Related Agencies appropriations bill includes \$452,000 for SGMH to purchase much-needed updated equipment, including a portable X-Ray Unit and a mobile C-arm Fluoroscopy unit to provide imaging services in the operating room.

To learn more about the community project funding for the 36th District, click [here](#).

###