



AGENDA

**REGULAR MEETING OF THE FINANCE COMMITTEE
A COMMITTEE OF THE BOARD OF DIRECTORS**

Tuesday, March 29, 2022 – 9:00 AM

IN AN EFFORT TO PREVENT THE SPREAD OF COVID-19 (CORONAVIRUS), AND IN ACCORDANCE WITH THE GOVERNOR’S EXECUTIVE ORDER N-29-20, THERE WILL BE NO PUBLIC LOCATION FOR ATTENDING THIS BOARD/COMMITTEE MEETING IN PERSON. MEMBERS OF THE PUBLIC MAY LISTEN TELEPHONICALLY BY CALLING THE FOLLOWING NUMBER:

Meeting Information:

Call in number: 1-510-338-9438

Access Code: 2555 808 4579

Passcode: 1234

Meeting Link: <https://sangorgoniomemorialhospital-ajd.my.webex.com/sangorgoniomemorialhospital-ajd.my/j.php?MTID=m1dadf76c77e4a4ceb8b6f9438dab2324>

**THE TELEPHONES OF ALL MEMBERS OF THE PUBLIC LISTENING
IN ON THIS MEETING MUST BE “MUTED”.**

TAB

I. Call to Order

S. DiBiasi

II. Public Comment

Members of the public who wish to comment on any item on the agenda may speak during public comment or submit comments by emailing publiccomment@sgmh.org on or before 5:00 PM on Monday, March 28, 2022, which will become part of the committee meeting record.

A five-minute limitation shall apply to each member of the public who wishes to address the Finance Committee of the Hospital Board of Directors on any matter under the subject jurisdiction of the Committee. 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 Committee Action.) (PLEASE STATE YOUR NAME AND ADDRESS FOR THE RECORD.)

On behalf of the San Gorgonio Memorial Hospital Board of Directors, we want you to know that the Board/Committee acknowledges the comments or concerns that you direct to this Committee. While the Board/Committee may wish to occasionally respond immediately to questions or comments if appropriate, they often will instruct the CEO, or other Administrative Executive personnel, to do further research and report back to the Board/Committee 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/Committee 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/Committee’s part; a response will be forthcoming.

OLD BUSINESS

- III. * **Proposed Action – Approval of Minutes** S. DiBiasi
 - February 22, 2022, regular meeting A

NEW BUSINESS

- IV. * **Proposed Action – Recommend approval to Hospital Board** D. Heckathorne B
 - **February 2022 Financial Report (Unaudited)**
 - **ROLL CALL**

V. Future Agenda Items

VI. Next Meeting – April 26, 2022

VII. Adjournment S. DiBiasi

*** Requires Action**

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 Committee. Such records shall be available at the Hospital office located at 600 N. Highland Springs Avenue, Banning, CA 92220 during regular business hours, Monday through Friday, 8:00 am - 4:30 pm.

Certification of Posting

I certify that on March 25, 2022, I posted a copy of the foregoing agenda near the regular meeting place of the Board of Directors of San Gorgonio Memorial Hospital - Finance Committee, and on the San Gorgonio Memorial Hospital website said time being at least 72 hours in advance of the regular meeting of the Finance Committee (*Government Code Section 54954.2*).

Executed at Banning, California, on March 25, 2022



Ariel Whitley, Executive Assistant

TAB A

REGULAR MEETING OF THE
SAN GORGONIO MEMORIAL HOSPITAL
BOARD OF DIRECTORS

FINANCE COMMITTEE
Tuesday, February 22, 2022

The regular meeting of the San Gorgonio Memorial Hospital Board of Directors Finance Committee was held on Tuesday, February 22, 2022. To prevent the spread of COVID-19 (coronavirus), and in accordance with the Governor's Executive Order N-29-20, there was no public location for attending this committee meeting in person. Committee members, staff members, and members of the public participated telephonically.

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

Members Absent: None

Required Staff: Steve Barron (CEO), Pat Brown (CNO/COO), Daniel Heckathorne (CFO), Ariel Whitley (Executive Assistant), Karan P. Singh, MD (CMO), Gary Hicks (G.L. Hicks Financial), Margaret Kammer (Controller)

AGENDA ITEM	DISCUSSION	ACTION / FOLLOW-UP
Call To Order	Susan DiBiasi called the meeting to order at 9:09 am.	
Public Comment	Members of the public who wished to comment on any item on the agenda were encouraged to submit comments by emailing publiccomment@sgmh.org prior to this meeting. No public comment emails were received.	
OLD BUSINESS		
Proposed Action - Approve Minutes January 25, 2022, regular meeting	Susan DiBiasi asked for any changes or corrections to the minutes of the January 25, 2022, regular meeting. There were none.	The minutes of the January 25, 2022, regular meeting will stand correct as presented.
NEW BUSINESS		
2022 General Obligation Refunding Bonds	Gary Hicks, with G.L. Financial, reviewed the 2022 General Obligation Refunding Bonds Memorandum, discussing details of the bond and Resolution No. 2022-03 as well as Resolution No.	

AGENDA ITEM	DISCUSSION	ACTION / FOLLOW-UP												
Memorandum	2022-04.													
<p>Proposed Action – Recommend approval to Hospital Board to adopt Resolution No. 2022-03 regarding authorizing the commencement of proceedings in connection with the proposed issuance of general obligation refunding bonds and designating a financial advisor, bond counsel and a placement agent in connection therewith.</p>	<p>Gary Hicks reviewed Resolution No. 2022-03, authorizing the commencement of proceedings in connection with the proposed issuance of general obligation refunding bonds and designating a financial advisor, bond counsel and a placement agent in connection therewith.</p> <p>It was noted that approval is recommended to the Hospital Board.</p> <p>ROLL CALL:</p> <table border="1" data-bbox="396 695 1227 810"> <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></td> <td></td> </tr> </table> <p>Motion carried.</p>	DiBiasi	Yes	Ngo	Yes	Rader	Yes	Rutledge	Yes	Welch	Yes			<p>M.S.C. (Rader/Rutledge), the SGMH Finance Committee voted to recommend approval to adopt Resolution No. 2022-03 regarding authorizing the commencement of proceedings in connection with the proposed issuance of general obligation refunding bonds and designating a financial advisor, bond counsel and a placement agent in connection therewith.</p>
DiBiasi	Yes	Ngo	Yes											
Rader	Yes	Rutledge	Yes											
Welch	Yes													
<p>Proposed Action – Recommend approval to Hospital Board to adopt Resolution No. 2022-04 regarding Approving the form and authorizing the execution of a deposit and transfer agreement (The deposit and transfer agreement, approved by this resolution, is attached as an exhibit to the Resolution).</p>	<p>Gary Hicks reviewed Resolution No. 2022-04, approving the form, and authorizing the execution of a deposit and transfer agreement (the deposit and transfer agreement, approved by this resolution, is attached as an attachment to the resolution).</p> <p>It was noted that approval is recommended to the Hospital Board.</p> <p>ROLL CALL:</p> <table border="1" data-bbox="396 1503 1227 1619"> <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></td> <td></td> </tr> </table> <p>Motion carried.</p>	DiBiasi	Yes	Ngo	Yes	Rader	Yes	Rutledge	Yes	Welch	Yes			<p>M.S.C. (Rutledge/Ngo), the SGMH Finance Committee voted to recommend approval to adopt Resolution No. 2022-04 regarding Approving the form and authorizing the execution of a deposit and transfer agreement (The deposit and transfer agreement, approved by this resolution, is attached as an</p>
DiBiasi	Yes	Ngo	Yes											
Rader	Yes	Rutledge	Yes											
Welch	Yes													

AGENDA ITEM	DISCUSSION	ACTION / FOLLOW-UP												
		exhibit to the Resolution).												
2022 Revenue Bonds Memorandum	Gary Hicks, with G.L. Financial, reviewed the 2022 Revenue Bonds Memorandum, discussing details of the bond and Resolution No. 2022-05 as well as Ordinance No. 2022-01.													
Proposed Action – Recommend approval to Hospital Board to adopt Resolution No. 2022-05 regarding authorizing the commencement of proceedings in connection with the proposed issuance of revenue bonds and designating a financial advisor, bond counsel, district counsel and a placement agent in connection therewith.	<p>Gary Hicks reviewed Resolution No. 2022-05, authorizing the commencement of proceedings in connection with the proposed issuance of revenue bonds and designating a financial advisor, bond counsel, district counsel, and a placement agent in connection therewith.</p> <p>It was noted that approval is recommended to the Hospital Board.</p> <p>ROLL CALL:</p> <table border="1" data-bbox="394 879 1227 995"> <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></td> <td></td> </tr> </table> <p>Motion carried.</p>	DiBiasi	Yes	Ngo	Yes	Rader	Yes	Rutledge	Yes	Welch	Yes			M.S.C. (DiBiasi/Welch), the SGMH Finance Committee voted to recommend approval to adopt Resolution No. 2022-05 regarding authorizing the commencement of proceedings in connection with the proposed issuance of revenue bonds and designating a financial advisor, bond counsel, district counsel and a placement agent in connection therewith.
DiBiasi	Yes	Ngo	Yes											
Rader	Yes	Rutledge	Yes											
Welch	Yes													
Proposed Action – Recommend approval to Hospital Board to adopt Ordinance No. 2022-01 regarding approving a formal agreement for the sale of San Gorgonio Memorial Healthcare District Revenue bonds series 2022A (Federally Taxable) and San Gorgonio	<p>Gary Hicks reviewed Ordinance No. 2022-01, approving a formal agreement for the sale of San Gorgonio Memorial healthcare District Revenue Bonds series 2022A (Federally Taxable) and San Gorgonio Memorial Healthcare District revenue bonds series 2022B (the form of bond purchase agreement, approved by this resolution, is attached to this ordinance).</p> <p>It was noted that approval is recommended to the Hospital Board.</p> <p>ROLL CALL:</p> <table border="1" data-bbox="394 1724 1227 1839"> <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></td> <td></td> </tr> </table> <p>Motion carried.</p>	DiBiasi	Yes	Ngo	Yes	Rader	Yes	Rutledge	Yes	Welch	Yes			M.S.C. (Rader/Welch), the SGMH Finance Committee voted to recommend approval to adopt Ordinance No. 2022-01 regarding approving a formal agreement for the sale of San Gorgonio Memorial Healthcare District Revenue bonds series 2022A
DiBiasi	Yes	Ngo	Yes											
Rader	Yes	Rutledge	Yes											
Welch	Yes													

AGENDA ITEM	DISCUSSION	ACTION / FOLLOW-UP												
<p>Memorial Healthcare District revenue bonds series 2022B (The form of bond purchase agreement, approved by this resolution, is attached to this ordinance).</p>		<p>(Federally Taxable) and San Gorgonio Memorial Healthcare District revenue bonds series 2022B (The form of bond purchase agreement, approved by this resolution, is attached to this ordinance).</p>												
<p>Bond Purchase Agreement – Informational</p>	<p>The Bond Purchase Agreement Document was included as informational. This document was also included as an exhibit in Ordinance No. 2022-01.</p>													
<p>Proposed Action – Recommend Approval to Hospital Board of Directors - Monthly Financial Report (Unaudited) – January 2022</p>	<p>Daniel Heckathorne, CFO, reviewed the Unaudited January 2022 finance report as included in the board packets.</p> <p>Mr. Heckathorne reported that January had a \$1.01M EBIDA compared to budgeted EBIDA loss of \$678K. The Hospital began to see a gradual increase in COVID related cases toward the end of December, which carried on into January. This had a large impact on January’s operations, as the hospital was forced to cancel elective surgeries for three to four weeks due to staffing reassignments needed to care for COVID patients. Inpatient workloads were up due to the COVID surge. Adjusted Patient Days were below budget (2,352 vs 2,482) while Patient Days were over budget (1,306 vs 1,263). Emergency Visits were right on budget (3,466 vs 3,467), but Surgeries were significantly under budget (55 vs 103) due to the cancellation of elective surgeries.</p> <p>It was noted that approval is recommended to the Hospital Board.</p> <p>ROLL CALL:</p> <table border="1" data-bbox="396 1724 1221 1835"> <tbody> <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></td> <td></td> </tr> </tbody> </table> <p>Motion carried.</p>	DiBiasi	Yes	Ngo	Yes	Rader	Yes	Rutledge	Yes	Welch	Yes			<p>M.S.C. (Rutledge/Rader), the SGMH Finance Committee voted to recommend approval of the Unaudited January 2022 Financial report to the Hospital Board of Directors.</p>
DiBiasi	Yes	Ngo	Yes											
Rader	Yes	Rutledge	Yes											
Welch	Yes													

AGENDA ITEM	DISCUSSION	ACTION / FOLLOW-UP
Future Agenda Items	None.	
Next Meeting	The next regular Finance Committee meeting will be held on March 29, 2022.	
Adjournment	The meeting was adjourned 10:28 am.	

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

TAB B



SAN GORGONIO MEMORIAL HOSPITAL
BANNING, CALIFORNIA

Unaudited Financial Statements

for

EIGHT MONTHS ENDING FEBRUARY 28, 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 Gorgonio Memorial Hospital

Financial Report - Executive Summary

For the Month of February 28, 2022 and Eight Months Ended February 28, 2022 (Unaudited)

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

The month of February had \$374K negative Earnings before Interest, Depreciation and Amortization (EBIDA) compared to budgeted EBIDA loss of \$1.098M.

YTD – There was a \$3.1M loss in Earnings before Interest, Depreciation and Amortization (EBIDA) compared to a budgeted loss of \$4.3M (adjusted to \$3.4M to remove \$895K IGT Expense booked in 2021).

Month – Adjustments/unusual items: The Hospital started seeing a gradual decrease in covid related cases toward the middle of February. Although the average census has dropped to previous norms, surgery cases rebounded to 139 plus 19 G.I. procedures. Other February adjustments included:

- Deductions from Revenue had an extra expense of \$376K due to long-stay patient cases;
- Other Income included \$383K of Cares Act Phase 4 reimbursement, \$73K Covid expense reimbursement from the SGMH Foundation, and a third-party settlement of \$360K.
- Salaries expense was credited \$237K for PTO accruals (KRONOS downtime reconciliation)
- Contract Labor was credited \$97K after staff diversion re: KRONOS downtime reconciliation

February's inpatient average daily census dropped to 29.5, down from 42.1 in January. Adjusted Patient Days were slightly over budget due to the high outpatient surgery volumes, while Patient Days were 21% below budget (827 vs.1,048). Emergency Visits were 15% under budget (2,655 vs. 3,122), but overall Surgeries were significantly over budget by 53% (139 vs. 91).

YTD – Overall workloads are as follows: Adjusted Patient Days = 16,673 vs. 17,483 budgeted (-4.6%); Patient Days = 7,180 vs. 8,439 budgeted (-15%); Emergency Visits = 26,338 vs. 25,747 (+2.3%), and Surgeries were 848 vs. 709 (+20%). EBIDA results are now \$1.1M better than the unadjusted EBIDA target of \$4.26M for the first 8 months of the year. Overall Operating Revenues are \$294K better than budget, while Operating Expenses were \$855K under budget.

Patient Revenues (MTD) Negative & YTD Positive

Month - The Net Patient Revenue in February would have slightly exceeded budget except for the \$376K adjustment mentioned above. The estimated increased reimbursement due to managed care contracted rate increases was \$185K in February.

YTD – Net Patient Revenue through February was \$40.5M compared to the budgeted \$40.4M. The increase in managed care contracted revenue since September has been estimated at \$1.2M.

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

Month – Operating Revenue in February was \$341K over budget. This was favorably impacted by the key variances in Other Income described above.

YTD – Operating Revenue was \$294K over budget, impacted by the Net Patient Revenues being \$131K over budget and the Non-Patient Revenues were \$163K over budget.

Operating Expenses (MTD) Positive & (YTD) Positive

Month - Operating Expenses in February were \$6.43M and were under budget by \$382K. Notable items impacting the budget were as follows: 1) Salaries were \$362K under budget impacted by the reversal of the PTO accrual discussed above. 2) Benefits were over budget, which is consistent with the year's trend. 3) Contract Labor was \$143K under over budget, largely impacted by reversal of previously over-accrued expenses per the comment above; 4) Purchased Services were \$123K over budget impacted by Navigant collection fees and Allscripts fees being a combined \$207K over budget, while other I/T items were under budget by \$41K; 5)Supplies were over budget by \$83K, with a \$54K variance in Pharmacy supplies, \$27K in prosthesis, and \$25K in general Medical supplies. 6) Utilities

were over budget (\$66K) primarily due to the costs associated with the cold weather in February; 7) Other Expenses were \$143K below budget. Everyone is continuing to take a conservative approach on all costs including dues and subscriptions, outside travel, and education costs. 8) Rents and Leases were \$83K below budget, which includes the delay in the startup of the surgical robotics program (\$25K) and conversion of a portion of telemetry monitors to actual purchases (\$34K).

YTD – Variances include: 1) Salaries were \$554K under budget while Benefits were \$339K over budget; 2) Contract Labor was over budget by \$127K due to shortage of nurses and the covid surge; 3) Supplies were over budget by \$1.1M, largely due to the covid surges and much higher Surgery volumes than budgeted. Some of the major variances over budget include Surgery (\$154K), Lab (\$661K), Pharmaceuticals (\$479), Emergency (\$93K), Blood (\$67K), and ICU and Med Surg (\$213K). These were offset by several other departments whose supply costs were below budget 4) Repairs were over budget by \$126K, which included accelerated repairs made on emergency doors and negative pressure rooms; 5) Other Expenses were \$876K 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 \$260K), along with other expenditures which have been delayed; 6) IGT Expense was under budget by \$895K due to those costs being included in the previous year's audited statements; and 7) Leases and Rentals were \$457K below budget, of which \$377K was impacted by the exclusion of leasing telemetry monitors along with the delay in the surgical robotics lease, and Respiratory Therapy rentals are \$105K less than expected.

Balance Sheet/Cash Flow

Patient cash collections in February were \$6.7M, compared to \$4.2M in January, and \$6.0M in December. As far as we can tell, February's A/R cash collections were the largest ever in SGMH history, and this is especially remarkable for a 28 day month! The Gross A/R Days dropped from 74.4 in January to 71.4 in February. This drop is in spite of the fact that we were unable to relieve approximately \$2.38M of bad debt accounts over the last 2 months 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, along with changes needed to the Allscripts system.

Cash balances decreased in February to \$5.4M compared to \$7.3M in January. The line of credit balance, however, was reduced from \$9M in January to \$6M at the end of the month, although we will need to make more draws in upcoming months. The Accounts Payable was \$9.1M, compared to the \$8.2M level on January 31st.

Concluding Summary

Positive takeaways:

- 1) Total Surgeries were over budget by 53%.
- 2) Non-Patient Revenue was an important key to February's performance.

Negative takeaways:

- 1) Supply expenses continue to be a challenge.

Dashboard Items and New Report:

Two new dashboards were included in the February Financial Reports. The first compares Net Patient Revenues to overall Labor costs, and illustrates that for the most part, Net Revenues barely cover the cost of Labor. This illustrates just how dependent the Hospital is on Supplemental funding to cover all other costs and to provide for a positive EBIDA. The second new dashboard illustrates the "normalization" of the Supplemental funding recorded in December by allocating equal portions of December's amounts over the first 6 months of the fiscal year. This has the impact of "normalizing both the monthly Operating Revenues and the monthly EBIDA's for this 6 month period.

New to the reports this month is a comparative Month-to-Month Statement of Revenues and Expenses for the current fiscal year, along with comparisons to the monthly averages of FYE's 2018 – 2021.

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.

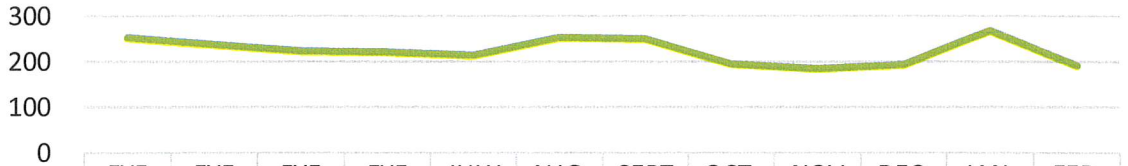
ADJUSTED PATIENT DAYS

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



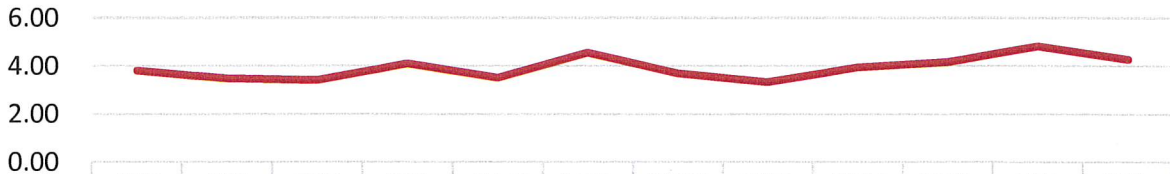
	FYE 17/18	FYE 18/19	FYE 19/20	FYE 20/21	JULY 2021	AUG. 2021	SEPT 2021	OCT. 2021	NOV 2021	DEC. 2021	JAN. 2022	FEB. 2022
DSCHGS	253	238	224	222	214	253	251	196	185	194	269	192

INPATIENT DAYS



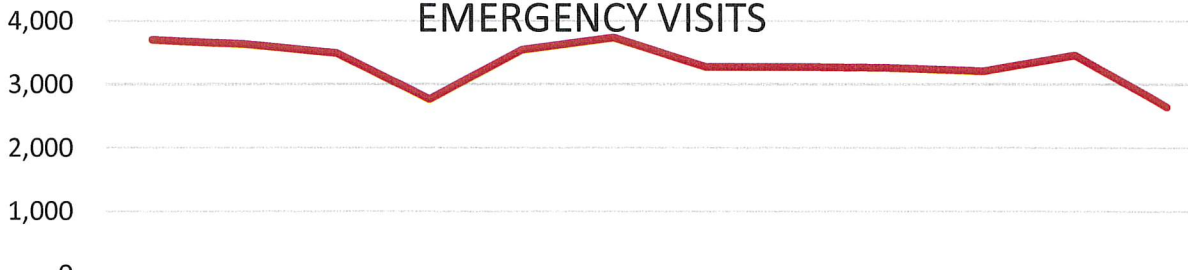
	FYE 17/18	FYE 18/19	FYE 19/20	FYE 20/21	JULY 2021	AUG. 2021	SEPT 2021	OCT. 2021	NOV 2021	DEC. 2021	JAN. 2022	FEB. 2022
PAT. DAYS	969	833	767	917	755	1,157	935	658	732	814	1,306	827

AVERAGE LENGTH OF STAY



	FYE 17/18	FYE 18/19	FYE 19/20	FYE 20/21	JULY 2021	AUG. 2021	SEPT 2021	OCT. 2021	NOV 2021	DEC. 2021	JAN. 2022	FEB. 2022
ALOS	3.83	3.50	3.43	4.13	3.53	4.57	3.73	3.36	3.96	4.20	4.86	4.31

EMERGENCY VISITS

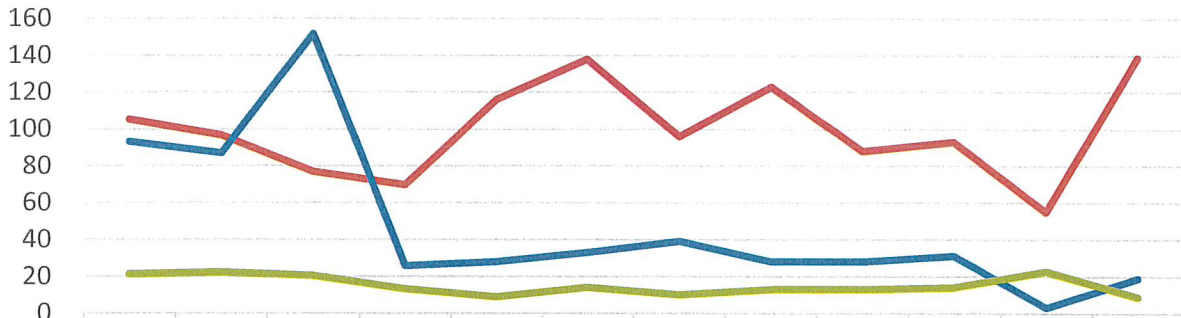


	FYE 17/18	FYE 18/19	FYE 19/20	FYE 20/21	JULY 2021	AUG. 2021	SEPT 2021	OCT. 2021	NOV 2021	DEC. 2021	JAN. 2022	FEB. 2022
VISITS	3,714	3,641	3,500	2,775	3,548	3,742	3,277	3,284	3,268	3,212	3,466	2,655

3-B

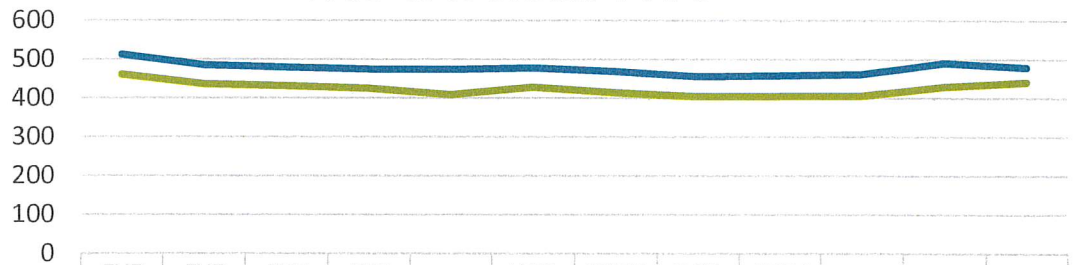
SAN GORGONIO MEMORIAL HOSPITAL

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



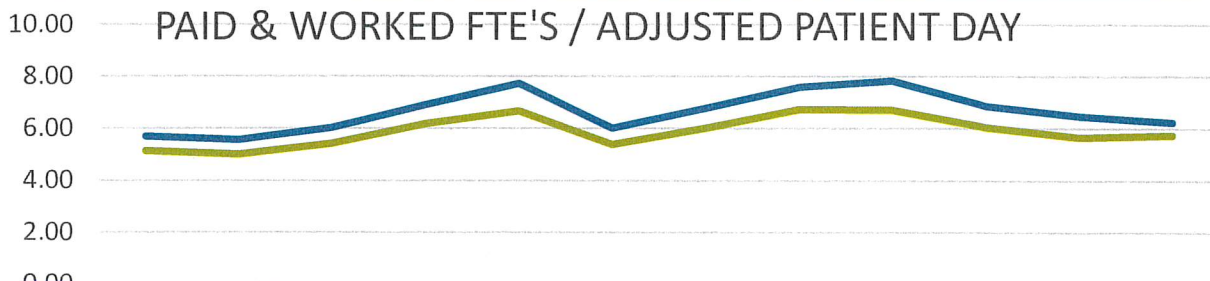
	FYE 17/18	FYE 18/19	FYE 19/20	FYE 20/21	JULY 2021	AUG. 2021	SEPT 2021	OCT. 2021	NOV 2021	DEC. 2021	JAN. 2022	FEB. 2022
— SURG.	105	97	77	70	116	138	96	123	88	93	55	139
— G.I.CASES	93	87	152	26	28	33	39	28	28	31	3	19
— DELIV.	21	22	21	13	9	14	10	13	13	14	23	9

PAID & WORKED FTE'S



	FYE 17/18	FYE 18/19	FYE 19/20	FYE 20/21	JULY, 2021	AUG. 2021	SEPT 2021	OCT. 2021	NOV 2021	DEC, 2021	JAN, 2022	FEB, 2022
— PAID FTES	511	484	479	474	473	476	468	455	457	460	491	479
— WRKD FTES	461	436	431	425	408	428	414	404	405	406	429	442

PAID & WORKED FTE'S / ADJUSTED PATIENT DAY



	FYE 17/18	FYE 18/19	FYE 19/20	FYE 20/21	JULY, 2021	AUG., 2021	SEPT., 2021	OCT., 2021	NOV, 2021	DEC, 2021	JAN, 2022	FEB, 2022
— PFTES/APD	5.69	5.55	6.01	6.89	7.72	6.00	6.79	7.59	7.84	6.88	6.47	6.23
— WFTES/APD	5.13	5.00	5.41	6.18	6.66	5.39	6.01	6.74	6.72	6.06	5.66	5.75

3-C

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.

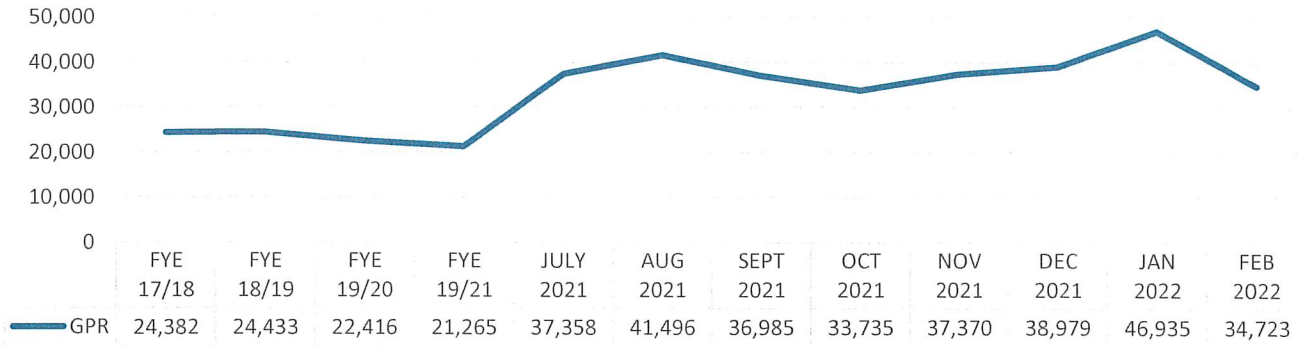
Operating Revenues (Normalized), Expenses, Staffing Expenses, and EBIDA (Normalized)
(new in February, 2022)

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.

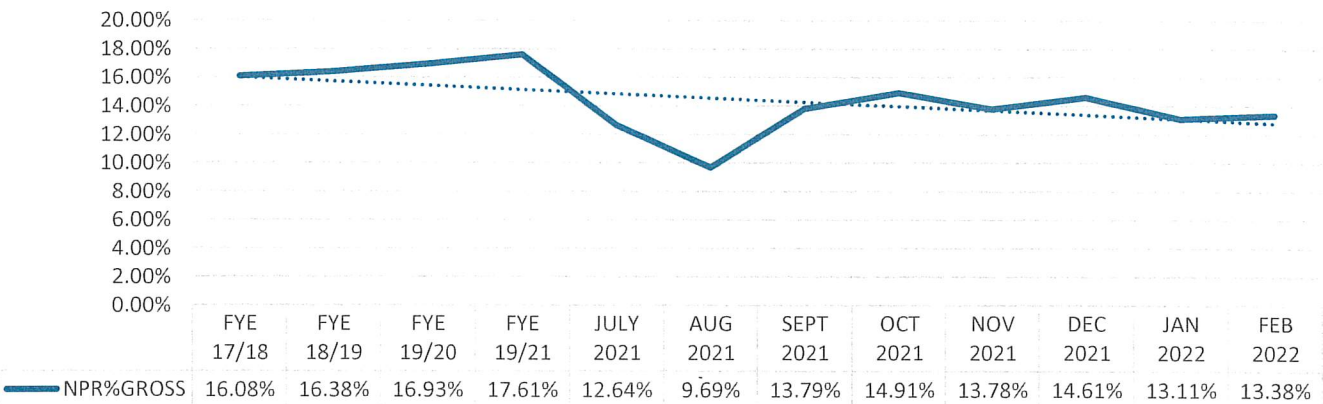
3-17

SAN GORGONIO MEMORIAL HOSPITAL

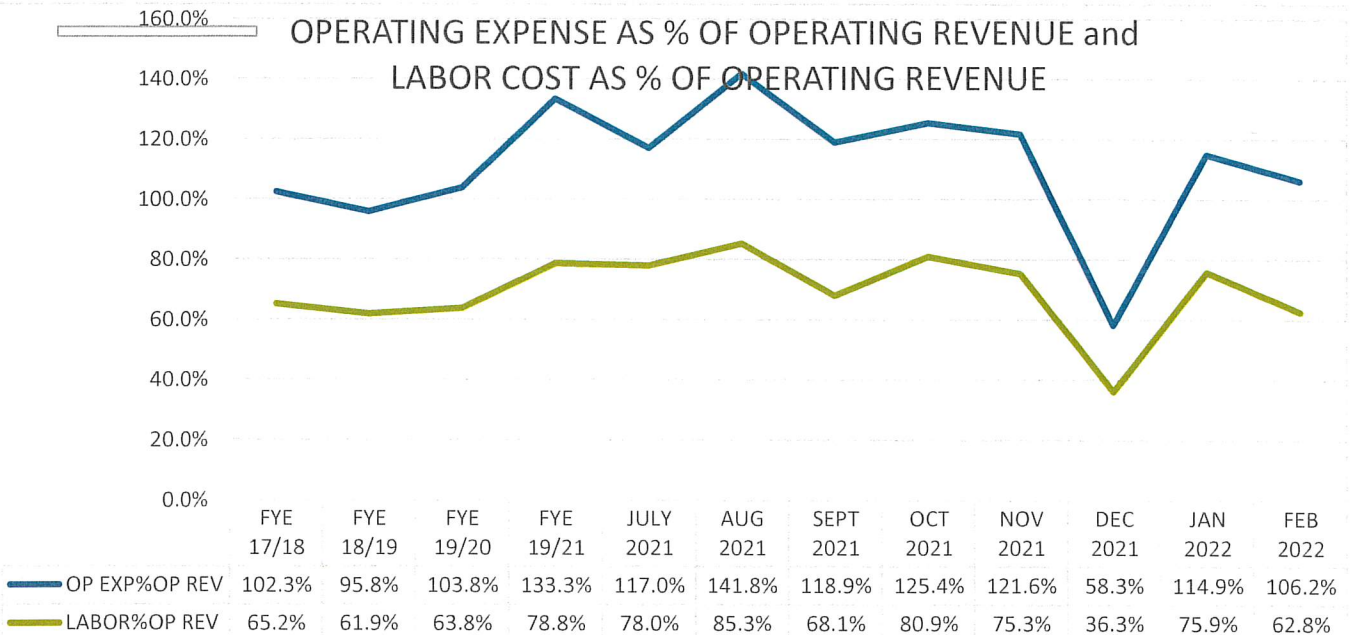
GROSS PATIENT REVENUE



NET PATIENT REVENUE AS % OF GROSS



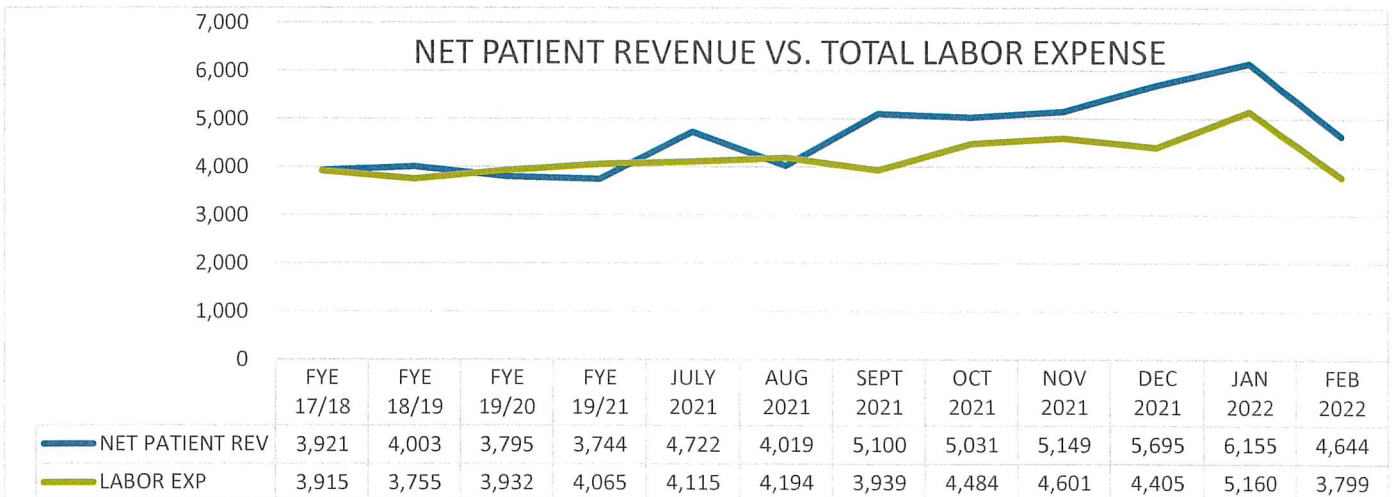
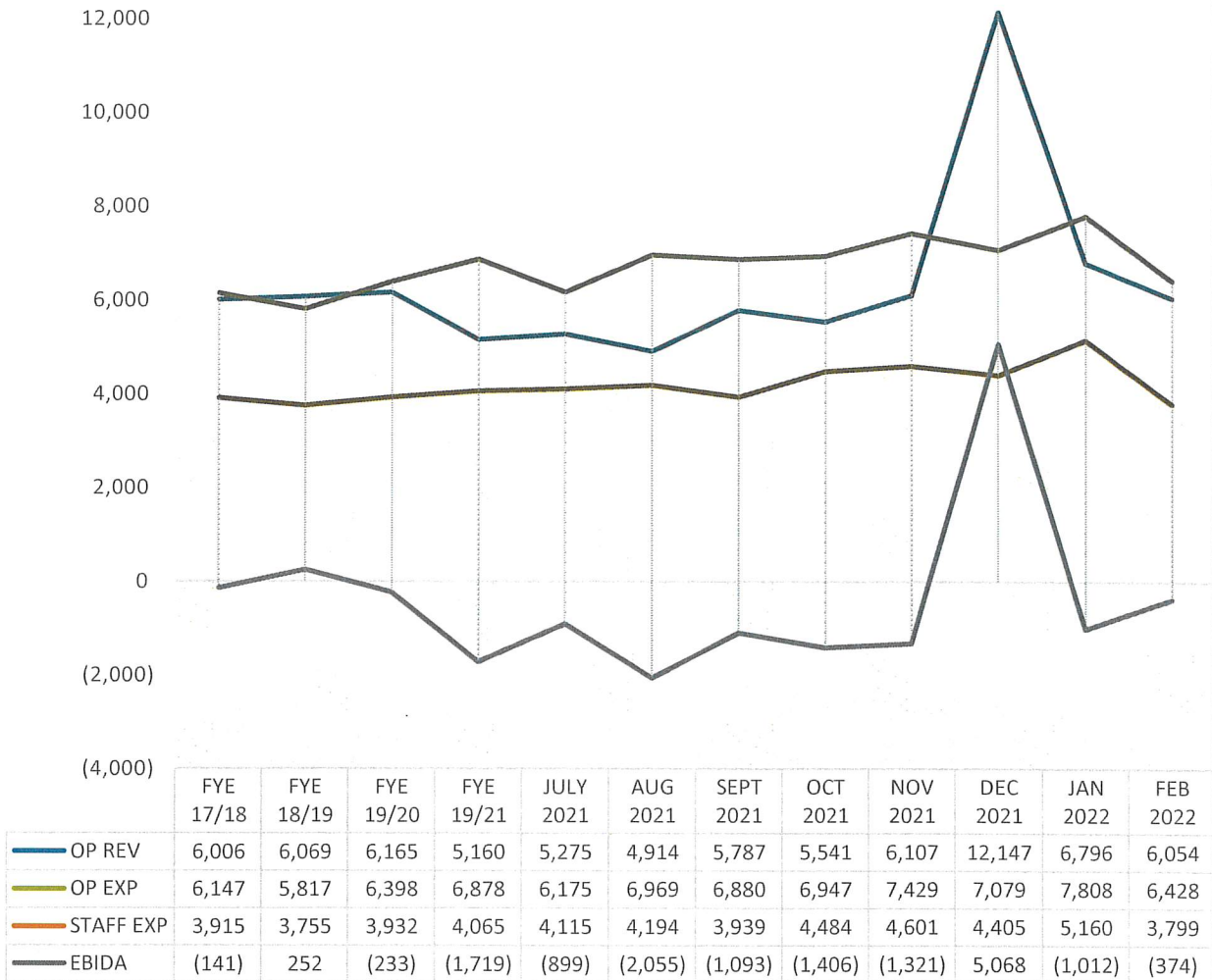
OPERATING EXPENSE AS % OF OPERATING REVENUE and LABOR COST AS % OF OPERATING REVENUE



3-E

SAN GORGONIO MEMORIAL HOSPITAL

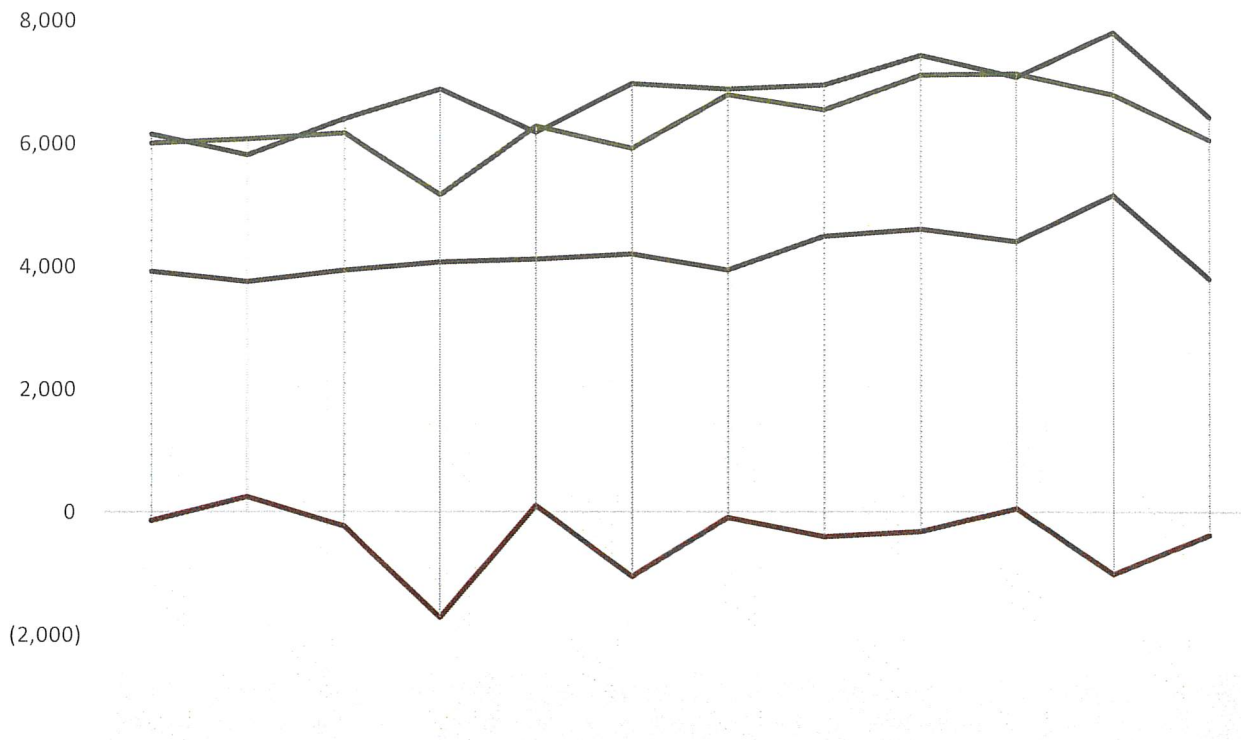
OPERATING REVENUE, OPERATING EXPENSE, STAFFING EXPENSE, AND EBIDA



3-F

SAN GORGONIO MEMORIAL HOSPITAL

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



	FYE 17/18	FYE 18/19	FYE 19/20	FYE 19/21	JULY 2021	AUG 2021	SEPT 2021	OCT 2021	NOV 2021	DEC 2021	JAN 2022	FEB 2022
REV NORMAL	6,006	6,069	6,165	5,160	6,277	5,916	6,789	6,543	7,109	7,137	6,796	6,054
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
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
EBIDA NORMAL	(141)	252	(233)	(1,719)	103	(1,053)	(91)	(404)	(319)	58	(1,012)	(374)

3-G

SAN GORGONIO HEALTHCARE DISTRICT & HOSPITAL - BANNING, CA
Month-to Month FYE June 30, 2022
Statement of Revenue and Expense

	FYE17/18	FYE18/19	FYE19/20	FYE 20/21	FYE 21/22	FYE 21/22	FYE 21/22	FYE 21/22	FYE 21/22	FYE 21/22	FYE 21/22	FYE 21/22
	MONTHLY AVE.	MONTHLY AVE.	MONTHLY AVE.	MONTHLY AVE.	MONTHLY AVE.	MONTHLY AVE.	MONTHLY AVE.	MONTHLY AVE.	MONTHLY AVE.	MONTHLY AVE.	MONTHLY AVE.	MONTHLY AVE.
Gross Patient Revenue												
Inpatient Revenue	\$ 8,652,325	\$ 7,667,883	\$ 7,401,282	\$ 9,331,371	\$ 18,290,836	\$ 15,366,746	\$ 20,315,097	\$ 18,658,896	\$ 11,148,784	\$ 18,051,448	\$ 17,581,450	\$ 29,180,538
Inpatient Psych/Rehab Revenue	0	0	0	0	0	0	0	0	0	0	0	0
Outpatient Revenue	15,730,069	16,765,365	15,067,104	11,933,682	20,156,821	21,991,078	21,181,242	18,326,106	22,586,269	19,318,269	21,397,485	18,699,730
Long Term Care Revenue	0	0	0	0	0	0	0	0	0	0	0	0
Home Health Revenue	0	0	0	0	0	0	0	0	0	0	0	0
Total Gross Patient Revenue	24,382,394	24,433,247	22,468,386	21,265,053	38,447,657	37,357,824	41,496,339	36,985,002	33,735,053	37,369,717	38,978,936	46,934,926
Deductions From Revenue												
Discounts and Allowances	(19,635,639)	(19,588,148)	(17,845,730)	(16,635,734)	(31,884,507)	(31,157,700)	(36,364,720)	(30,346,595)	(27,094,692)	(30,704,377)	(31,514,954)	(38,941,080)
Bad Debt Expense	(806,002)	(858,023)	(653,280)	(824,395)	(1,417,416)	(1,478,073)	(963,563)	(1,509,194)	(1,466,791)	(1,418,564)	(1,744,778)	(1,661,127)
GI HMO Discounts	0	0	0	0	0	0	0	0	0	0	0	0
Charity Care	(80,410)	(56,168)	(86,517)	(41,362)	(81,112)	0	(148,810)	(29,218)	(142,235)	(97,440)	(23,772)	(177,583)
Total Deductions From Revenue	(20,522,051)	(20,502,339)	(18,585,527)	(17,501,490)	(33,383,035)	(32,635,773)	(37,477,083)	(31,885,008)	(28,703,718)	(32,220,382)	(33,283,504)	(40,779,789)
Net Patient Revenue	3,860,343	3,930,908	3,882,859	3,763,563	5,064,622	4,722,051	4,019,246	5,099,995	5,031,335	5,149,335	5,695,431	6,155,137
Non-Patient Revenues												
IGT/DSH Revenues	1,530,975	1,485,337	1,157,326	869,707	752,111	0	0	0	0	0	6,016,888	0
Grants & Other Op Revenues	193,507	205,590	750,434	505,190	376,660	167,360	505,308	308,393	124,989	573,166	51,070	257,227
Clinic Net Revenues	20,106	22,362	15,743	15,743	0	0	0	0	0	0	0	0
Tax Subsidies Measure D	174,852	196,524	199,469	209,744	233,333	233,333	233,333	233,333	233,333	233,333	233,333	233,333
Tax Subsidies Prop 13	105,376	115,388	114,061	142,552	150,000	150,000	150,000	150,000	150,000	150,000	150,000	150,000
Tax Subsidies County Supplml Funds	16,858	16,159	9,064	16,163	0	0	0	0	0	0	0	0
Non-Patient Revenues	2,041,675	2,041,381	2,246,097	1,743,355	1,512,104	888,641	888,641	691,726	508,322	956,499	6,451,291	640,560
Total Operating Revenue	5,902,018	5,972,289	6,128,956	5,506,919	6,576,725	5,272,745	4,907,888	5,791,721	5,539,656	6,105,833	12,146,722	6,795,697
Operating Expenses												
Salaries and Wages	3,000,485	2,941,226	3,104,224	3,125,159	3,416,370	3,189,198	3,247,078	3,119,355	3,609,281	3,731,115	3,541,554	3,869,331
Fringe Benefits	784,204	702,477	752,708	856,889	838,319	846,091	739,288	723,743	807,750	806,996	755,181	1,176,353
Contract Labor	130,625	106,628	95,516	114,886	82,379	79,279	207,937	95,749	66,995	62,832	108,418	114,375
Physicians Fees	211,630	246,631	331,858	350,783	323,911	360,075	224,167	532,291	316,536	343,587	198,313	296,243
Purchased Services	581,239	513,857	691,337	772,336	513,356	613,182	891,877	810,404	810,404	1,033,039	953,575	992,328
Supply Expense	699,167	685,518	751,025	903,883	969,345	644,984	1,273,837	1,133,627	784,949	1,044,298	931,808	877,171
Utilities	74,205	75,471	80,680	92,287	112,942	67,465	61,579	119,284	159,817	83,919	145,701	135,515
Repairs and Maintenance	53,574	58,325	58,592	139,712	71,464	107,979	71,453	89,547	89,547	48,900	48,900	51,709
Insurance Expense	86,537	85,267	103,277	110,683	120,629	115,997	115,997	115,996	115,996	129,887	130,590	130,590
All Other Operating Expenses	68,153	70,922	160,745	148,752	83,393	63,027	56,824	97,243	122,788	46,020	75,944	154,765
IGT Expense	217,249	58,743	109,484	172,366	0	0	0	0	0	0	0	0
Leases and Rentals	57,507	76,150	79,233	79,424	71,053	69,305	73,820	56,259	87,089	81,362	76,968	72,138
1206 (b) CLINIC	80,927	98,810	94,628	34,096	0	0	0	0	0	0	0	0
Total Operating Expenses	6,045,502	5,720,023	6,377,306	6,901,255	6,965,162	6,174,581	6,969,083	6,887,564	6,946,803	7,428,666	7,078,738	7,808,187
EBIDA	(143,485)	252,266	(248,351)	(1,394,337)	(388,437)	(901,836)	(2,061,196)	(1,095,843)	(1,407,147)	(1,322,832)	5,067,984	(1,012,491)
Interest, Depreciation, and Amortization												
Depreciation and Amortization	512,466	497,808	506,497	494,721	504,865	504,865	504,865	504,865	504,865	504,865	504,865	504,865
Interest Expense	432,490	418,193	422,094	447,994	414,966	386,425	413,384	335,467	404,425	421,092	374,425	393,735
Total Interest, Depr., & Amort.	944,956	916,000	928,591	942,715	919,861	891,290	918,249	840,332	909,290	925,957	879,290	898,600
Non-Operating Revenue:												
Contributions & Other	14,354	7,745	27,759	7,121	28,898	3,213	29,882	2,969	1,708	1,695	4,381	963
Tax Subsidies for GO Bonds - M-A	652,487	692,457	666,966	598,410	613,966	613,966	613,966	613,966	613,966	613,966	613,966	613,966
Total Non Operating Revenue/(Expense)	666,841	700,202	694,725	605,531	642,864	617,179	643,864	616,935	615,674	615,661	618,347	614,928
Total Net Surplus/(Loss)	(421,599)	36,467	(482,217)	(1,731,521)	(665,434)	(1,175,948)	(2,335,597)	(1,319,240)	(1,700,764)	(1,633,129)	4,807,040	(1,296,162)
Change in Interest in Foundation	0	0	0	(650)	0	0	0	0	0	0	0	0
Extra-ordinary Loss on Financing	0	0	(689,574)	(650)	0	0	0	0	0	0	0	0
Increase/(Decrease in Unrestricted Net / \$)	(421,599)	36,467	(1,171,791)	(1,732,171)	(665,434)	(1,175,948)	(2,335,597)	(1,319,240)	(1,700,764)	(1,633,129)	4,807,040	(1,296,162)
Total Profit Margin	-7.1%	0.6%	-7.9%	-31.4%	-10.1%	-22.3%	-47.6%	-22.8%	-30.7%	-26.7%	39.6%	-19.1%
EBIDA %	-2.4%	4.2%	-4.1%	-25.3%	-5.9%	-17.1%	-42.0%	-18.9%	-25.4%	-21.7%	41.7%	-14.9%
Total Profit Margin	-10.1%	-10.1%	-10.1%	-10.1%	-10.1%	-10.1%	-10.1%	-10.1%	-10.1%	-10.1%	-10.1%	-10.1%
EBIDA %	-2.4%	4.2%	-4.1%	-25.3%	-5.9%	-17.1%	-42.0%	-18.9%	-25.4%	-21.7%	41.7%	-14.9%

Note: Trend variances in the FYE 21/22 monthly columns are explained in the respective monthly financial reports - "Financial Report - Executive Summary".

3-H

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.

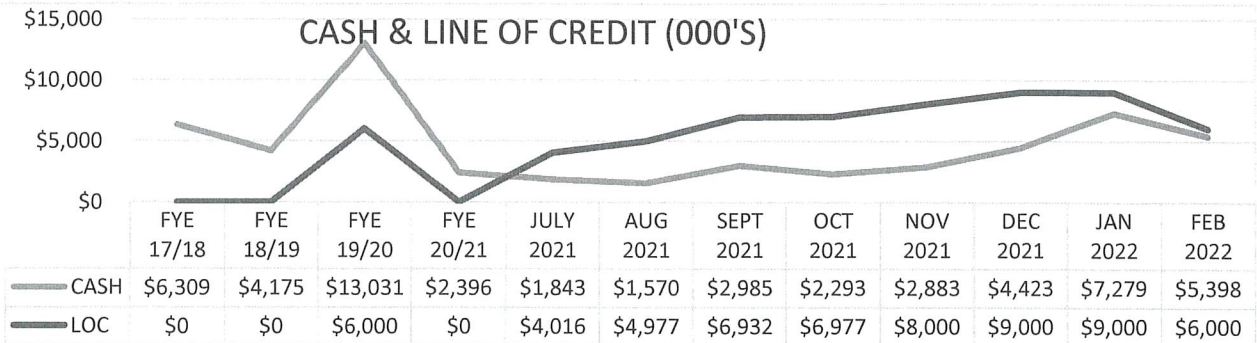
Line of Credit Balance (000's)

The amount that is currently borrowed from a lending institution as of a given point in time.

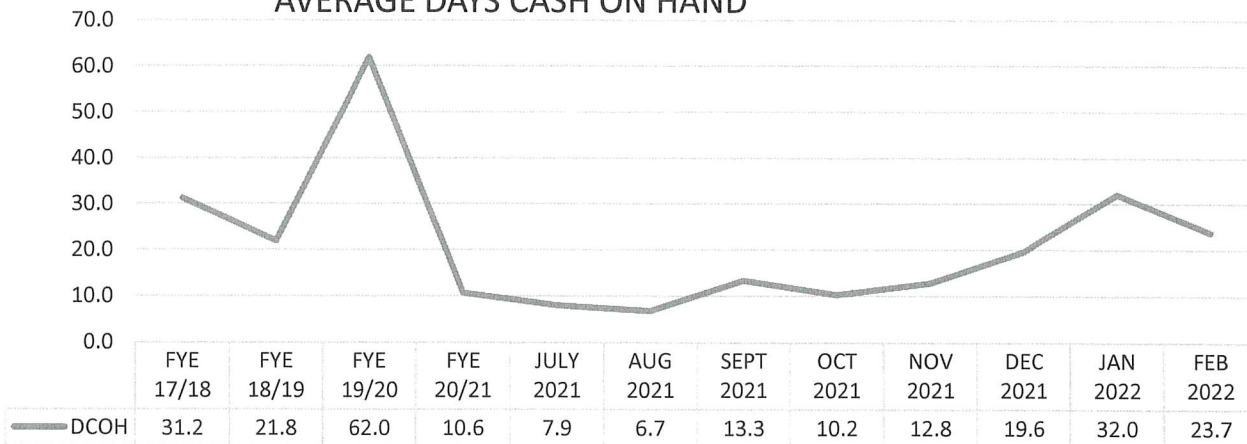
3-I

SAN GORGONIO MEMORIAL HOSPITAL

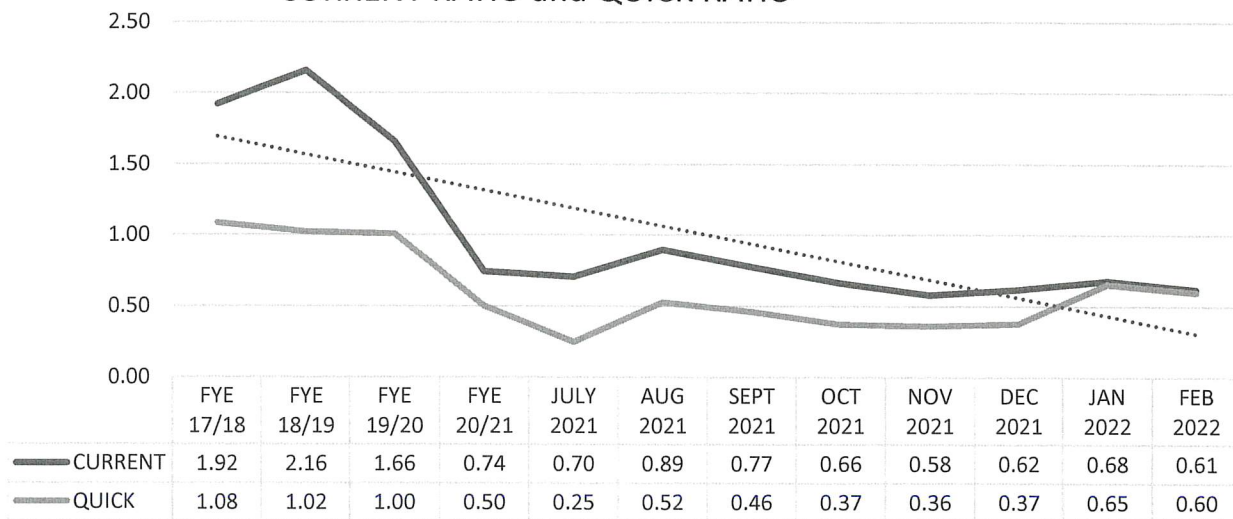
CASH & LINE OF CREDIT (000'S)



AVERAGE DAYS CASH ON HAND



CURRENT RATIO and QUICK RATIO



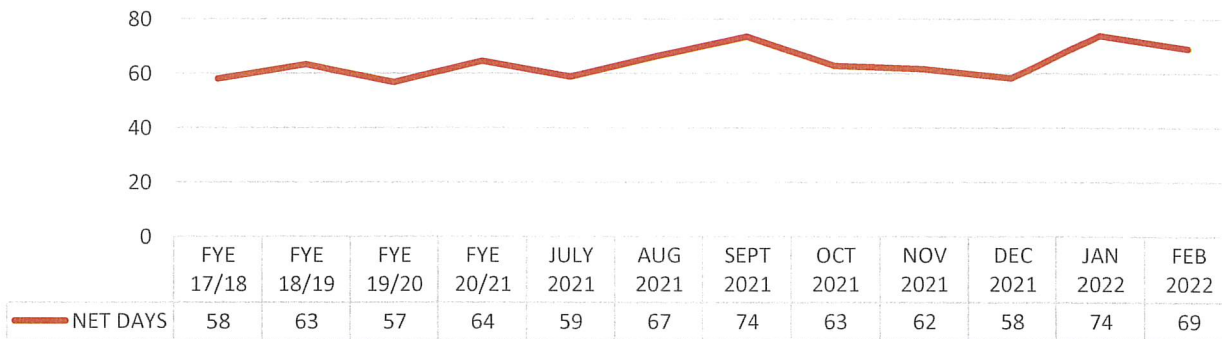
3-J

SAN GORGONIO MEMORIAL HOSPITAL

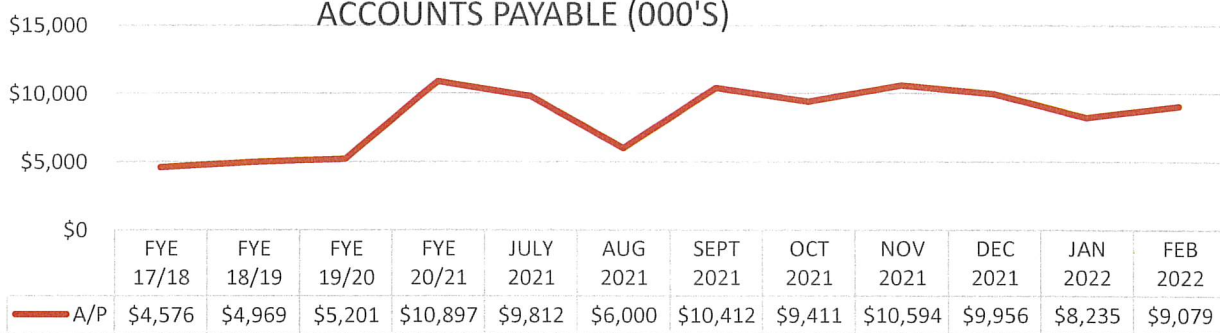
NET ACCOUNTS RECEIVABLE (000'S)



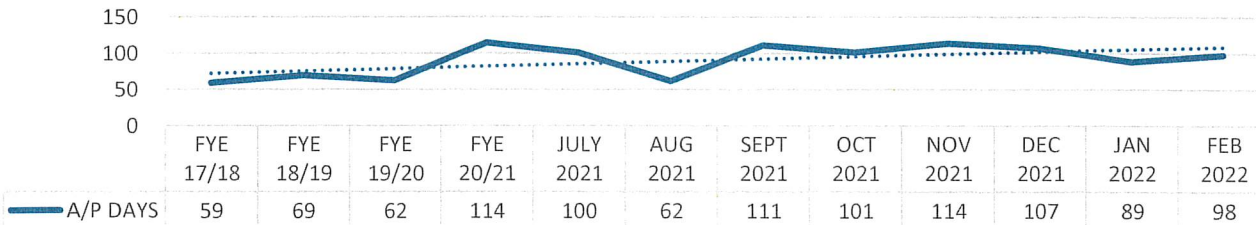
AVE. DAYS OF COLLECTIONS IN NET A/R



ACCOUNTS PAYABLE (000'S)



AVERAGE DAYS IN ACCOUNTS PAYABLE



3-K

SAN GORGONIO MEMORIAL HOSPITAL
EXECUTIVE FINANCIAL SUMMARY
EIGHT MONTHS ENDING FEBRUARY 28, 2022

STATEMENT OF REVENUE AND EXPENSES - MONTH & YTD						
REF LINE#	02/28/22 ACTUAL	02/28/22 BUDGET	YTD ACTUAL	YTD BUDGET	YTD DIFFERENCE	
	Revenue:					
[1]	\$ 34,723,457	\$ 41,115,928	\$ 307,581,254	\$ 335,821,613	\$ (28,240,358)	
[2]	(30,079,014)	(36,110,154)	(267,064,281)	(295,435,331)	28,371,049	
[3]	4,644,443	5,005,774	40,516,973	40,386,282	130,691	
[4]	-	-	6,016,888	6,282,227	(265,339)	
[5]	1,409,099	706,441	6,079,943	5,651,528	428,414	
[6]	6,053,542	5,712,215	52,613,804	52,320,037	293,766	
	Total Operating Revenues					
	Expenses:					
[7]	3,875,200	4,146,840	34,037,514	34,252,626	215,112	
	(76,550)	66,405	659,033	531,718	(127,315)	
	318,078	340,810	2,591,290	2,703,638	112,348	
	992,328	868,853	7,002,847	6,945,243	(57,604)	
[8]	1,233,856	1,276,068	10,253,171	10,180,599	(72,571)	
[9]	907,500	824,070	7,754,758	6,605,678	(1,149,080)	
[10]	411,120	563,101	3,675,855	4,642,741	966,885	
[11]	-	-	-	895,056	895,056	
[12]	\$ 6,427,676	\$ 6,810,079	\$ 55,721,298	\$ 56,576,700	\$ 855,402	
	Total Expenses					
[13]	\$ (374,133)	\$ (1,097,863)	\$ (3,107,494)	\$ (4,256,662)	\$ 1,149,168	
	EBIDA					
[14]	1,095,878	926,118	7,358,887	7,388,283	29,396	
[15]	800,339	741,667	5,142,910	5,933,333	(790,424)	
[16]	\$ (669,672)	\$ (1,282,315)	\$ (5,323,472)	\$ (5,711,612)	\$ 388,141	
	TOTAL NET SURPLUS (LOSS)					

SAN GORGONIO MEMORIAL HOSPITAL
EXECUTIVE FINANCIAL SUMMARY
EIGHT MONTHS ENDING FEBRUARY 28, 2022

BALANCE SHEET

	YTD 2/28/2022	Prior FYE 6/30/2021
ASSETS		
[1] Current Assets	\$ 15,574,375	\$ 14,763,567
[2] Assets Whose Use is Limited	9,686,306	15,999,821
[3] Property, Plant & Equipment (Net)	74,197,125	77,860,175
[4] Other Assets	624,956	1,320,339
[5] Total Unrestricted Assets	100,082,762	109,943,902
[6] Restricted Assets	0	0
[7] Total Assets	\$ 100,082,762	\$ 109,943,902
LIABILITIES AND NET ASSETS		
[8] Current Liabilities	\$25,351,577	\$22,077,546
[9] Long-Term Debt	105,699,029	105,992,009
[10] Other Long-Term Liabilities	0	0
[11] Total Liabilities	\$ 131,050,606	\$ 128,069,555
[12] Net Assets	\$ (30,671,412)	\$ (18,125,653)
[13] Total Liabilities and Net Assets	\$ 100,379,194	\$ 109,943,902

SAN GORGONIO MEMORIAL HOSPITAL

EXECUTIVE FINANCIAL SUMMARY

EIGHT MONTHS ENDING FEBRUARY 28, 2022

KEY STATISTICS AND RATIOS					
	01/31/22 ACTUAL FY 22	02/28/22 ACTUAL FY 22	02/28/22 BUDGET FY 22	2022 YTD FY 22	2021 YR END TOTAL FY 21
[1] Total Acute Patient Days	1,306	827	1,048	7,180	11,008
[2] Average Daily Census	42.1	29.5	37.4	29.5	30.2
[3] Average Acute Length of Stay	4.9	4.3	4.1	4.1	4.1
[4] Patient Discharges	269	192	254	1,754	2,667
[5] Observation Days	197	177	240	1,875	2,512
[6] Total Emergency Room Visits	3,466	2,655	3,122	26,338	33,299
[7] Average ED Visits Per Day	112	95	112	108	91
[9] Total Surgeries	55	139	91	848	837
[10] Deliveries/Births	23	9	14	105	158

Statement of Revenue and Expense
SAN GORGONIO MEMORIAL HOSPITAL
BANNING, CALIFORNIA
EIGHT MONTHS ENDING FEBRUARY 28, 2022

	DISTRICT ONLY	CURRENT MONTH				
		Actual 02/28/22	COMBINED		Positive (Negative) Variance	Percentage Variance
			Actual 02/28/22	Budget 02/28/22		
Gross Patient Revenue						
[1] Inpatient Revenue	\$ -	\$ 16,023,727	\$ 20,036,505	\$ (4,012,778)	-25.0%	
[2] Inpatient Psych/Rehab Revenue	-	-	-	-	-	
[3] Outpatient Revenue	-	18,699,730	\$ 21,079,423	(2,379,693)	-12.7%	
[4] Long Term Care Revenue	-	-	-	-	-	
[5] Home Health Revenue	-	-	-	-	-	
[6] Total Gross Patient Revenue	\$ -	\$ 34,723,457	\$ 41,115,928	\$ (6,392,471)	-18.4%	
Deductions From Revenue						
[7] Discounts and Allowances	-	(28,951,935)	\$ (35,201,821)	\$ 6,249,886	-21.6%	
[8] Bad Debt Expense	-	(1,097,242)	\$ (850,000)	(247,242)	22.5%	
[9] Prior Year Settlements	-	-	\$ -	-	-	
[10] Charity Care	-	(29,837)	\$ (58,333)	28,496	-95.5%	
[11] Total Deductions From Revenue	-	(30,079,014)	(36,110,154)	\$ 6,031,140	-20.1%	
[12]		-86.6%	-88%			
[13] Net Patient Revenue	\$ -	\$ 4,644,443	\$ 5,005,774	\$ (361,331)	-7.8%	
Non Patient Operating Revenues						
[14] IGT/DSH Revenues	-	-	\$ -	\$ -	#DIV/0!	
[15] Grants & Other Op Revenues	-	1,025,766	\$ 300,191	725,575	70.7%	
[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	-	-	\$ -	-	#DIV/0!	
Non- Patient Revenue	\$ 383,333	\$ 1,409,099	\$ 706,441	\$ 702,658	49.9%	
Total Operating Revenue	\$ 383,333	\$ 6,053,542	\$ 5,712,215	\$ 341,327	5.6%	
Operating Expenses						
[20] Salaries and Wages	-	3,024,051	3,385,791	\$ 361,740	12.0%	
[21] Fringe Benefits	-	851,149	761,049	(90,100)	-10.6%	
[22] Contract Labor	-	(76,550)	66,405	142,955	-186.7%	
[23] Physicians Fees	-	318,078	340,810	22,732	7.1%	
[24] Purchased Services	1,600	992,328	868,853	(123,475)	-12.4%	
[25] Supply Expense	-	907,500	824,070	(83,430)	-9.2%	
[26] Utilities	4,975	130,260	63,967	(66,293)	-50.9%	
[27] Repairs and Maintenance	6,800	58,986	55,920	(3,066)	-5.2%	
[28] Insurance Expense	-	119,850	115,494	(4,356)	-3.6%	
[29] All Other Operating Expenses	-	50,537	193,338	142,801	282.6%	
[30] Supplemental and Grant Expense	-	-	-	-	0.0%	
[31] Leases and Rentals	-	51,487	134,381	82,894	161.0%	
[32] Clinic Expense	-	-	0	-	0.0%	
[33] Total Operating Expenses	\$ 13,375	\$ 6,427,676	\$ 6,810,079	\$ 382,403	5.9%	
[34] EBIDA	\$ 369,958	\$ (374,133)	\$ (1,097,863)	\$ 723,730	-193.4%	
Interest Expense and Depreciation						
[35] Depreciation	504,865	504,865	494,658	\$ (10,207)	-2.0%	
[36] Interest Expense and Amortization	360,065	591,013	431,460	(159,553)	-27.0%	
[37] Total Interest & depreciation	864,930	1,095,878	926,118	(169,760)	-15.5%	
Non-Operating Revenue:						
[38] Contributions & Other	5,646	186,373	75,000	111,373	59.8%	
[39] Tax Subsidies for GO Bonds - M-A	613,966	613,966	666,667	(52,701)	-8.6%	
[40] Total Non Operating Revenue/(Expense)	619,611	800,339	741,667	\$ 58,672	7.3%	
[41] Total Net Surplus/(Loss)	\$ 124,639	\$ (669,672)	\$ (1,282,315)	\$ 612,642	-91.5%	
[42] Extra-ordinary loss on Financing	-	-	-	-	-	
[43] Increase/(Decrease in Unrestricted Net Assets	\$ 124,639	\$ (669,672)	\$ (1,282,315)	\$ 612,642	-91.5%	
[44] Total Profit Margin	32.51%	-11.06%	-22.45%			
[45] EBIDA %	96.51%	-6.18%	-19.22%			

Statement of Revenue and Expense
SAN GORGONIO MEMORIAL HOSPITAL
BANNING, CALIFORNIA
EIGHT MONTHS ENDING FEBRUARY 28, 2022

		YEAR-TO-DATE				
		DISTRICT ONLY			Positive	Percentage
		Actual	Actual	Budget	(Negative)	Variance
		02/28/22	02/28/22	02/28/22	Variance	
Gross Patient Revenue						
[1]	Inpatient Revenue	\$ -	\$ 146,326,686	\$ 162,358,499	\$ (16,031,813)	-11.0%
[2]	Inpatient Psych/Rehab Revenue	-	-	-	-	
[3]	Outpatient Revenue	-	161,254,568	\$ 173,463,113	(12,208,545)	-7.6%
[4]	Long Term Care Revenue	-	-	-	-	
[5]	Home Health Revenue	-	-	-	-	
[6]	Total Gross Patient Revenue	\$ -	\$ 307,581,254	\$ 335,821,613	\$ (28,240,358)	-9.2%
Deductions From Revenue						
[7]	Discounts and Allowances	-	(255,076,053)	\$ (288,168,664)	\$ 33,092,611	13.0%
[8]	Bad Debt Expense	-	(11,339,332)	\$ (6,800,000)	(4,539,332)	-40.0%
[9]	Prior Year Settlements	-	-	\$ -	-	
[10]	Charity Care	-	(648,896)	\$ (466,667)	(182,229)	-28.1%
[11]	Total Deductions From Revenue	-	(267,064,281)	(295,435,331)	\$ 28,371,049	10.6%
[12]			86.8%	-88.0%		
[13]	Net Patient Revenue	\$ -	\$ 40,516,973	\$ 40,386,282	\$ 130,691	0.3%
Non Patient Operating Revenues						
[14]	IGT/DSH Revenues	-	6,016,888	\$ 6,282,227	\$ (265,339)	-4.4%
[15]	Grants & Other Op Revenues	-	3,013,279	\$ 2,401,528	611,750	20.3%
[16]	Clinic Net Revenues	-	-	\$ -	-	
[17]	Tax Subsidies Measure D	1,866,664	1,866,664	\$ 1,916,667	(50,003)	-2.7%
[18]	Tax Subsidies Prop 13	1,200,000	1,200,000	\$ 1,333,333	(133,333)	-11.1%
[19]	Tax Subsidies County Supplemental Funds	-	-	\$ -	-	#DIV/0!
	Non- Patient Revenue	\$ 3,066,664	\$ 12,096,831	\$ 11,933,755	\$ 163,075	1.3%
	Total Operating Revenue	\$ 3,066,664	\$ 52,613,804	\$ 52,320,037	\$ 293,766	0.6%
Operating Expenses						
[20]	Salaries and Wages	-	27,330,963	\$ 27,885,030	\$ 554,067	2.0%
[21]	Fringe Benefits	-	6,706,551	\$ 6,367,596	(338,955)	-5.1%
[22]	Contract Labor	-	659,033	\$ 531,718	(127,315)	-19.3%
[23]	Physicians Fees	-	2,591,290	\$ 2,703,638	112,348	4.3%
[24]	Purchased Services	209,158	7,002,847	\$ 6,945,243	(57,604)	-0.8%
[25]	Supply Expense	-	7,754,758	\$ 6,605,678	(1,149,080)	-14.8%
[26]	Utilities	18,133	903,539	\$ 705,142	(198,397)	-22.0%
[27]	Repairs and Maintenance	71,045	571,709	\$ 445,862	(125,847)	-22.0%
[28]	Insurance Expense	-	965,033	\$ 923,954	(41,079)	-4.3%
[29]	All Other Operating Expenses	-	667,147	\$ 1,542,732	875,586	131.2%
[30]	Supplimental and Grant Expense	-	-	\$ 895,056	895,056	0.0%
[31]	Leases and Rentals	-	568,428	\$ 1,025,051	456,622	80.3%
[32]	Clinic Expense	-	-	\$ -	-	0.0%
[33]	Total Operating Expenses	\$ 298,337	\$ 55,721,298	\$ 56,576,700	\$ 855,402	1.5%
[34]	EBIDA	\$ 2,768,327	\$ (3,107,494)	\$ (4,256,662)	\$ 1,149,168	-37.0%
Interest Expense and Depreciation						
[35]	Depreciation	4,038,920	4,038,920	\$ 3,957,265	\$ (81,655)	-2.0%
[36]	Interest Expense and Amortization	2,920,632	3,319,967	\$ 3,431,018	111,051	3.3%
[37]	Total Interest & depreciation	6,959,552	7,358,887	7,388,283	29,396	0.4%
Non-Operating Revenue:						
[38]	Contributions & Other	46,236	231,185	\$ 600,000	(368,815)	-159.5%
[39]	Tax Subsidies for GO Bonds - M-A	4,911,725	4,911,725	\$ 5,333,333	(421,608)	-8.6%
[40]	Total Non Operating Revenue/(Expense)	4,957,961	5,142,910	5,933,333	(790,424)	-15.4%
[41]	Total Net Surplus/(Loss)	\$ 766,736	\$ (5,323,472)	\$ (5,711,612)	\$ 388,141	-7.3%
[42]	Extra-ordinary loss on Financing	-	-	-	-	
[43]	Increase/(Decrease in Unrestricted Net Assets	\$ 766,736	\$ (5,323,472)	\$ (5,711,612)	\$ 388,141	-7.3%
[44]	Total Profit Margin	25.00%	-10.12%	-10.92%		
[45]	EBIDA %	90.27%	-5.91%	-8.14%		

Balance Sheet - Assets

SAN GORGONIO MEMORIAL HOSPITAL

BANNING, CALIFORNIA

EIGHT MONTHS ENDING FEBRUARY 28, 2022

	DISTRICT ONLY		
	Current Month 2/28/2022	Current Month 2/28/2022	Prior Year End 6/30/2021
Current Assets			
[1] Cash and Cash Equivalents	\$1,528,927	\$5,397,658	\$ 1,763,843
[2] Gross Patient Accounts Receivable	\$0	\$93,723,702	58,800,003
[3] Less: Bad Debt and Allowance Reserves	\$0	(\$84,017,676)	(50,860,772)
[4] Net Patient Accounts Receivable	\$0	\$9,706,026	7,939,231
[5] Taxes Receivable	\$946,262	\$2,049,768	99,170
[6] Other Receivables (includes advances)	\$0	(\$2,360,363)	1,609,566
[7] Inventories	\$0	\$2,568,665	1,830,192
[8] Prepaid Expenses	\$126,169	\$714,570	21,540
[9] Due From Third Party Payers	\$0	(\$2,205,478)	598,026
[10] Malpractice Receivable	\$0	\$0	-
[11] Supplemental Receivables	\$0	(\$40)	902,000
Total Current Assets	2,601,359	15,574,375	\$ 14,763,567
Assets Whose Use is Limited			
[12] Cash			
[13] Investments			
[14] Bond Reserve/Debt Retirement Fund	\$6,854,696	\$9,686,306	15,999,821
[15] Trustee Held Funds			
[16] Funded Depreciation			
[17] Board Designated Funds			
[18] Other Limited Use Assets			
Total Limited Use Assets	6,854,696	9,686,306	\$ 15,999,821
Property, Plant, and Equipment			
[19] Land and Land Improvements	\$4,828,182	\$4,828,182	\$ 4,828,182
[20] Building and Building Improvements	\$129,281,491	\$129,281,491	129,257,409
[21] Equipment	\$26,853,549	\$26,853,549	26,562,627
[22] Construction In Progress	\$313,256	\$360,111	299,244
[23] Capitalized Interest			
[24] Gross Property, Plant, and Equipment	161,276,478	161,323,333	160,947,462
[25] Less: Accumulated Depreciation	(\$86,133,357)	(\$87,126,207)	(83,087,287)
[26] Net Property, Plant, and Equipment	75,143,121	74,197,125	\$ 77,860,175
Other Assets			
[27] Unamortized Loan Costs	\$627,385	\$624,796	\$ 728,520
[28] Assets Held for Future Use		\$160	
[29] Investments in Subsidiary/Affiliated Org.	\$22,716,652	\$0	591,819
[30] Other			
[31] Total Other Assets	23,344,036	624,956	\$ 1,320,339
[32] TOTAL UNRESTRICTED ASSETS	107,943,212	100,379,194	\$ 109,943,902
Restricted Assets			
	0	0	0
[33] TOTAL ASSETS	\$107,943,212	\$100,379,194	\$ 109,943,902

Balance Sheet - Liabilities and Net Assets

SAN GORGONIO MEMORIAL HOSPITAL

BANNING, CALIFORNIA

EIGHT MONTHS ENDING FEBRUARY 28, 2022

	DISTRICT ONLY		
	Current Month 2/28/2022	Current Month 2/28/2022	Prior Year End 6/30/2021
Current Liabilities			
[1] Accounts Payable	\$ 308,095	\$ 9,078,718	\$ 9,285,913
[2] Notes and Loans Payable (Line of Credit)	-	6,000,000	16,391
[3] Accounts Payable- Construction	-	-	-
[4] Accrued Payroll Taxes	-	5,829,632	5,565,216
[5] Accrued Benefits	-	-	-
[6] Accrued Benefits Current Portion	-	-	-
[7] Other Accrued Expenses	-	-	-
[8] Accrued GO Bond Interest Payable	(51,168)	1,141,440	2,484,778
[9] Stimulus Advance	-	370,062	2,336,777
[10] Due to Third Party Payers (Settlements)	-	-	-
[11] Advances From Third Party Payers	-	-	-
[12] Current Portion of LTD (Bonds/Mortgages)	2,335,000	2,335,000	2,335,000
[13] Current Portion of LTD (Leases)	-	-	-
[14] Other Current Liabilities	-	596,724	53,471
Total Current Liabilities	2,591,926	25,351,577	22,077,546
Long Term Debt			
[15] Bonds/Mortgages Payable (net of Cur Portion)	103,097,387	\$103,084,029	\$ 105,677,009
[16] Leases Payable (net of current portion)	\$2,615,000	\$2,615,000	\$315,000
[17] Total Long Term Debt (Net of Current)	105,712,387	105,699,029	105,992,009
Other Long Term Liabilities			
[18] Deferred Revenue			
[19] Accrued Pension Expense (Net of Current)			
[20] Other			
[21] Total Other Long Term Liabilities	0	0	0
TOTAL LIABILITIES	\$ 108,304,314	\$ 131,050,606	\$ 128,069,555
Net Assets:			
[22] Unrestricted Fund Balance	(1,127,838)	(25,347,940)	\$ (3,774,444)
[23] Temporarily Restricted Fund Balance	-	-	-
[24] Restricted Fund Balance	-	-	-
[25] Net Revenue/(Expenses)	766,736	(5,323,472)	(14,351,209)
[26] TOTAL NET ASSETS	(361,102)	(30,671,412)	\$ (18,125,653)
[27] TOTAL LIABILITIES AND NET ASSETS	\$ 107,943,212	\$ 100,379,194	\$ 109,943,902
	\$ (0)	\$ 0	\$ -

Statement of Cash Flows

SAN GORGONIO MEMORIAL HOSPITAL BANNING, CALIFORNIA EIGHT MONTHS ENDING FEBRUARY 28, 2022

		CASH FLOW	
		Current	
HEALTHCARE SYSTEM CASH FLOW		Month	
		2/28/2022	
BEGINNING CASH BALANCES			
[1]	Cash: Beginning Balances- HOSPITAL	\$	5,687,519
[2]	Cash: Beginning Balances- DISTRICT		1,591,018
[3]	Cash: Beginning Balances TOTALS	\$	7,278,537
Receipts			
[4]	Pt Collections	\$	6,682,400
[5]	Tax Subsidies Measure D		-
[6]	Tax Subsidies Prop 13		-
[7]	Tax Subsidies County Supplemental Funds		-
[8]	IGT & other Supplemental (Net)		98,046
[9]	Draws/(Paydown) of LOC Balances		(3,000,000)
[10]	Other Misc Receipts/Transfers		798,697
	TOTAL RECEIPTS	\$	4,579,144
Disbursements			
[11]	Payroll/ Benefits	\$	3,875,200
[12]	Other Operating Costs		3,125,028
[13]	Capital Spending		0
[14]	Debt serv payments (Hosp onlyw/ LOC interest)		-
[15]	Other (increase) in AP /other bal sheet		(540,206)
[16]	TOTAL DISBURSEMENTS	\$	6,460,022
[17]	TOTAL CHANGE in CASH	\$	(1,880,878)
ENDING CASH BALANCES			
[18]	Ending Balances- HOSPITAL	\$	3,868,731
[19]	Ending Balances- DISTRICT		1,528,927
[20]	Ending Balances- TOTALS	\$	5,397,659
ADDITIONAL INFO			
[21]	LOC CURRENT BALANCES	\$	6,000,000