

February 17, 2022

TO: Legal Counsel

News Media

Salinas Californian  
El Sol  
Monterey County Herald  
Monterey County Weekly  
KION-TV  
KSBW-TV/ABC Central Coast  
KSMS/Entravision-TV

The Regular Meeting of the **FINANCE COMMITTEE – COMMITTEE OF THE WHOLE** of the Salinas Valley Memorial Healthcare System will be held **WEDNESDAY, FEBRUARY 23, 2022, AT 12:00 P.M., IN THE DOWNING RESOURCE CENTER, ROOMS A, B & C AT SALINAS VALLEY MEMORIAL HOSPITAL, 450 E. ROMIE LANE, SALINAS, CALIFORNIA, OR BY PHONE OR VIDEO (Visit [svmh.com/virtualboardmeeting](http://svmh.com/virtualboardmeeting) for Access Information).**

Please note: Pursuant to SVMHS Board Resolution No. 2022-01, Assembly Bill 361, and guidance from the Monterey County Health Department in response to concerns regarding COVID-19, Board Members of Salinas Valley Memorial Healthcare System, a local health care district, are permitted to participate in this duly noticed public meeting via teleconference and certain requirements of The Brown Act are suspended.



Pete Delgado  
President/Chief Executive Officer

**Committee Members: Richard Turner, Chair; Juan Cabrera, Vice Chair; Pete Delgado, President/CEO; Augustine Lopez, CFO; Clement Miller, COO; Tarun Bajaj, MD, Medical Staff Member; Harry Wardwell, Community Member; Michael Wilson, Community Member**

**FINANCE COMMITTEE MEETING – FEBRUARY 2022  
COMMITTEE OF THE WHOLE  
SALINAS VALLEY MEMORIAL HEALTHCARE SYSTEM**

**WEDNESDAY, FEBRUARY 23, 2022  
12:00 P.M. – DOWNING RESOURCE CENTER, ROOMS A, B & C  
SALINAS VALLEY MEMORIAL HOSPITAL  
450 E. ROMIE LANE, SALINAS, CALIFORNIA  
OR BY PHONE OR VIDEO  
(Visit [svmh.com/virtualboardmeeting](http://svmh.com/virtualboardmeeting) for Access Information)**

Please note: Pursuant to SVMHS Board Resolution No. 2022-01, Assembly Bill 361, and guidance from the Monterey County Health Department in response to concerns regarding COVID-19, Board Members of Salinas Valley Memorial Healthcare System, a local health care district, are permitted to participate in this duly noticed public meeting via teleconference and certain requirements of The Brown Act are suspended.

**AGENDA**

1. Approval of Minutes from the Finance Committee Meeting of January 24, 2022 (DELGADO)
  - Motion/Second
  - Action by Committee/Roll Call Vote
2. Consider Recommendation for Board of Directors Approval and Award of Hazardous Waste Disposal Contract to Stericycle, Inc., a Delaware Corporation (MILLER/STROTMAN)
  - Staff Report
  - Committee Questions to Staff
  - Motion/Second
  - Public Comment
  - Committee Discussion/Deliberation
  - Action by Committee/Roll Call Vote
3. Review Balanced Scorecard – December 2021 (LOPEZ)
4. Financial and Statistical Review (LOPEZ)
5. Public Input

This opportunity is provided for members of the public to make a brief statement, not to exceed three (3) minutes, on issues or concerns within the jurisdiction of this District Board which are not otherwise covered under an item on this agenda.
6. Closed Session

(See Attached Closed Session Sheet Information)
7. Reconvene Open Session/Report on Closed Session
8. Adjournment - The March 2022 Finance Committee Meeting is scheduled for **Monday, March 21, 2022 at 12:00 p.m.**

Notes: This Committee meeting may be attended by Board Members who do not sit on this Committee. In the event that a quorum of the entire Board is present, this Committee shall act as a Committee of the Whole. In either case, any item acted upon by the Committee or the Committee of the Whole will require consideration and action by the full Board of Directors as a prerequisite to its legal enactment.

The Committee packet is available at the Committee Meeting, at [www.svmh.com](http://www.svmh.com), and in the Human Resources Department of the District. All items appearing on the agenda are subject to action by the Committee.

Requests for a disability related modification or accommodation, including auxiliary aids or services, in order to attend or participate in a meeting should be made to the Executive Assistant during regular business hours at 831-755-0741. Notification received 48 hours before the meeting will enable the District to make reasonable accommodations.

**FINANCE COMMITTEE MEETING OF THE  
BOARD OF DIRECTORS – COMMITTEE OF THE WHOLE**

**AGENDA FOR CLOSED SESSION**

Pursuant to California Government Code Section 54954.2 and 54954.5, the board agenda may describe closed session agenda items as provided below. No legislative body or elected official shall be in violation of Section 54954.2 or 54956 if the closed session items are described in substantial compliance with Section 54954.5 of the Government Code.

**CLOSED SESSION AGENDA ITEMS**

- [ ] **LICENSE/PERMIT DETERMINATION**  
(Government Code §54956.7)

**Applicant(s):** (Specify number of applicants) \_\_\_\_\_

- [ ] **CONFERENCE WITH REAL PROPERTY NEGOTIATORS**  
(Government Code §54956.8)

**Property:** (Specify street address, or if no street address, the parcel number or other unique reference, of the real property under negotiation): \_\_\_\_\_

**Agency negotiator:** (Specify names of negotiators attending the closed session): \_\_\_\_\_

**Negotiating parties:** (Specify name of party (not agent): \_\_\_\_\_

**Under negotiation:** (Specify whether instruction to negotiator will concern price, terms of payment, or both): \_\_\_\_\_

- [ ] **CONFERENCE WITH LEGAL COUNSEL-EXISTING LITIGATION**  
(Government Code §54956.9(d)(1))

**Name of case:** (Specify by reference to claimant's name, names of parties, case or claim numbers): \_\_\_\_\_, or

**Case name unspecified:** (Specify whether disclosure would jeopardize service of process or existing settlement negotiations): \_\_\_\_\_

- [ ] **CONFERENCE WITH LEGAL COUNSEL-ANTICIPATED LITIGATION**  
(Government Code §54956.9)

Significant exposure to litigation pursuant to Section 54956.9(d)(2) or (3) (Number of potential cases): \_\_\_\_\_

Additional information required pursuant to Section 54956.9(e): \_\_\_\_\_

Initiation of litigation pursuant to Section 54956.9(d)(4) (Number of potential cases): \_\_\_\_\_

[ ] **LIABILITY CLAIMS**  
(Government Code §54956.95)

**Claimant:** (Specify name unless unspecified pursuant to Section 54961): \_\_\_\_\_

**Agency claimed against:** (Specify name): \_\_\_\_\_

[ ] **THREAT TO PUBLIC SERVICES OR FACILITIES**  
(Government Code §54957)

**Consultation with:** (Specify name of law enforcement agency and title of officer): \_\_\_\_\_

[ ] **PUBLIC EMPLOYEE APPOINTMENT**  
(Government Code §54957)

**Title:** (Specify description of position to be filled): \_\_\_\_\_

[ ] **PUBLIC EMPLOYMENT**  
(Government Code §54957)

**Title:** (Specify description of position to be filled): \_\_\_\_\_

[ ] **PUBLIC EMPLOYEE PERFORMANCE EVALUATION**  
(Government Code §54957)

**Title:** (Specify position title of employee being reviewed): \_\_\_\_\_

[ ] **PUBLIC EMPLOYEE DISCIPLINE/DISMISSAL/RELEASE**  
(Government Code §54957)

(No additional information is required in connection with a closed session to consider discipline, dismissal, or release of a public employee. Discipline includes potential reduction of compensation.)

[ ] **CONFERENCE WITH LABOR NEGOTIATOR**  
(Government Code §54957.6)

**Agency designated representative:** (Specify name of designated representatives attending the closed session): \_\_\_\_\_

**Employee organization:** (Specify name of organization representing employee or employees in question); \_\_\_\_\_ or \_\_\_\_\_

**Unrepresented employee:** (Specify position title of unrepresented employee who is the subject of the negotiations): \_\_\_\_\_

[ ] **CASE REVIEW/PLANNING**  
(Government Code §54957.8)

(No additional information is required to consider case review or planning.)

**[X] REPORT INVOLVING TRADE SECRET**  
(Government Code §37606 & Health and Safety Code § 32106)

Discussion will concern: (Specify whether discussion will concern proposed new service, program, or facility):  
Strategic Planning, Proposed New Programs and Services

**Estimated date of public disclosure:** (Specify month and year): Unknown

**[ ] HEARINGS/REPORTS**  
(Government Code §37624.3 & Health and Safety Code §§1461, 32155)

**Subject matter:** (Specify whether testimony/deliberation will concern staff privileges, report of medical audit committee, or report of quality assurance committee): \_\_\_\_\_

**[ ] CHARGE OR COMPLAINT INVOLVING INFORMATION PROTECTED BY FEDERAL LAW** (Government Code §54956.86)

(No additional information is required to discuss a charge or complaint pursuant to Section 54956.86.)

**ADJOURN TO OPEN SESSION**

**MINUTES OF THE JANUARY 2022 FINANCE COMMITTEE MEETING  
COMMITTEE OF THE WHOLE  
SALINAS VALLEY MEMORIAL HEALTHCARE SYSTEM**

**MONDAY, JANUARY 24, 2022  
12:00 P.M. – DOWNING RESOURCE CENTER, ROOMS A, B & C  
SALINAS VALLEY MEMORIAL HOSPITAL  
450 E. ROMIE LANE, SALINAS, CALIFORNIA  
OR BY PHONE OR VIDEO**

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Please note: Pursuant to SVMHS Board Resolution No. 2021-08, Assembly Bill 361, and guidance from the Monterey County Health Department in response to concerns regarding COVID-19, Board Members of Salinas Valley Memorial Healthcare System, a local health care district, are permitted to participate in this duly noticed public meeting via teleconference and certain requirements of The Brown Act are suspended.

Committee Members Present: By teleconference: Richard Turner, Chair, Juan Cabrera, Vice Chair, Tarun Bajaj, MD, Pete Delgado, Harry Wardwell and Michael Wilson. In person: Augustine Lopez, Clement Miller.

Committee Members Absent: None

Other Board Members Present, Constituting Committee of the Whole: By teleconference: Regina Gage and Victor Rey.

A quorum was present and the meeting was called to order at 12:02 p.m. by Richard Turner, Committee Chair.

**APPROVAL OF MINUTES FROM THE FINANCE COMMITTEE MEETING OF  
DECEMBER 13, 2021**

Pete Delgado, President/Chief Executive Officer, recommended the Finance Committee approve the minutes of the Finance Committee Meeting of December 13, 2021. This information was included in the Committee packet.

No Public Comment.

MOTION: The Finance Committee approves the minutes of the Finance Committee Meeting of December 13, 2021, as presented. Moved/Seconded/Roll Call Vote: Ayes: Turner, Bajaj, Delgado, Lopez, Miller, Wardwell, Wilson; Noes: None; Abstentions: None; Absent: Cabrera; Motion Carried.

Juan Cabrera joined the meeting at 12:04 p.m.

**CONSIDER RECOMMENDATION FOR BOARD OF DIRECTORS APPROVAL OF  
SENTRICS INTERACTIVE PATIENT CARE SOLUTIONS SYSTEM AS SOLE SOURCE  
JUSTIFICATION AND CONTRACT AWARD**

Audrey parks reported Salinas Valley Memorial Healthcare System (SVMHS) currently utilizes Sentrics, formerly known as Allen Technologies., Inc. (ATI) as the interactive patient care systems or patient education and entertainment solution. The solution is used by patients to access patient education videos, CARE Channel (relaxation videos), Dish Network content and more. We would like to renew the support agreement for an initial 3-year term followed by 1-year annual renewals. The financial, quality, safety, regulatory and financial implications were included in the packet.

No Public Comment.

**MOTION:** The Finance Committee recommends the Board of Directors approve Sentric's Interactive Patient Care Solutions System as sole source justification and contract award \$4.3/year. Moved/Seconded/Roll Call Vote: Ayes: Turner, Cabrera, Delgado, Bajaj, Lopez, Miller, Wardwell, Wilson; Noes: None; Abstentions: None; Absent: None; Motion Carried.

**CONSIDER RECOMMENDATION FOR BOARD OF DIRECTORS APPROVAL OF CONTRACT AWARD TO MERCURY HEALTHCARE FOR A NEW CUSTOMER RELATIONSHIP MANAGEMENT (CRM) PLATFORM**

Adrienne Laurent reported Salinas Valley Memorial Healthcare System (SVMHS) leverages various technologies in its outreach to the community – from broad based traditional media advertising to more targeted, granular communication to individuals. A key element of our communication strategy centers on a personalized approach in our communication to patients, prospective patients, and stakeholders. A Customer Relationship Management platform is a critical element to that strategy.

Salinas Valley Memorial Healthcare System has employed the use of a CRM since 2014, when we became a beta test site for the Advisory Board's CRM solution. Through a series of acquisitions, Optum has become our CRM vendor. It is our opinion that SVMHS and our local community would greatly benefit from a more robust CRM platform than the one in place today.

We reached out to three vendors with a Request for Proposals: Mercury Healthcare was the clear leading proposal due to their customer support, extensive experience with healthcare clients, ROI reporting capabilities, and campaign tracking dashboard.

No Public Comment.

**MOTION:** The Finance Committee recommends the Board of Directors approve contract award to Mercury Healthcare for a new customer relationship management (CRM) platform. Moved/Seconded/Roll Call Vote: Ayes: Turner, Cabrera, Delgado, Bajaj, Lopez, Miller, Wardwell, Wilson; Noes: None; Abstentions: None; Absent: None; Motion Carried.

**CONSIDER RECOMMENDATION FOR BOARD OF DIRECTORS APPROVAL OF THE ABBOTT STREET LEASE AGREEMENT BETWEEN SALINAS VALLEY MEMORIAL HEALTHCARE SYSTEM AND UNI-KOOL PARTNERS FOR THE PARKING LOT LOCATED AT 241 ABBOTT STREET, SALINAS**

Clement Miller, Chief Operating Officer, and Earl Strotman, Director Facilities Management & Construction reported the need to relieve anticipated vehicle-parking shortages at the hospital site during construction of the Parking Garage Annex. A recommendation was presented to lease an additional 70,000 sq. ft. of parking at 241 Abbott Street, adjacent to the 87,120 sq. ft. lot currently under contract, providing an additional 200 parking spaces alleviating parking pressures at and surrounding the hospital campus. The background/situation/rationale and financial implications were included in the packet.

No Public Comment.

**MOTION:** The Finance Committee recommends the Board of Directors approve the Abbott Street Lease Agreement between Salinas Valley Memorial Healthcare System and Uni-Kool Partners for the parking lot located at 241 Abbott Street, Salinas. Moved/Seconded/Roll Call Vote Ayes: Turner, Cabrera, Delgado, Bajaj, Lopez, Miller, Wardwell, Wilson; Noes: None; Abstentions: None; Absent: None; Motion Carried.

**CONSIDER RECOMMENDATION FOR BOARD OF DIRECTORS APPROVAL OF THE HELLMUTH, OBATA & KASABAUM INC. (HOK) AGREEMENT FOR SPACE PLANNING & FULL TENANT DESIGN IMPROVEMENTS FOR THE DRC EXPANSION (BASEMENT OF NEW PARKING ANNEX)**

Clement Miller, Chief Operating Officer, Earl Strotman, Director Facilities Management & Construction, and Dave Sullivan, Facilities Management reported the Downing Resource Center (DRC) Parking Garage Annex project approved by the Board in July 2021 specifically did not call out for build-out of the 20,000 square foot lowest (basement) level beyond open shell space. This proposal calls on HOK to provide space programming and full tenant improvements necessitated to design the building out of the shell space for office and hospital support space (administrative offices). This includes: Updating the existing space program and validating past and current inclusions in the administrative offices, providing full design and documentation of the new administrative space (schematic design, design development and construction documents) for permitting and construction, and construction administration. The background/situation/rationale, financial implications, description of work, timeline and fee proposal were included in the packet.

No Public Comment.

**MOTION:** The Finance Committee recommends the Board of Directors approve the Hellmuth, Obata & Kasabaum Inc. (HOK) Agreement for Space Planning & Full Tenant Design Improvements for the DRC Expansion (Basement of new Parking Annex). Moved/Seconded/Roll Call Vote: Ayes: Turner, Cabrera, Delgado, Bajaj, Lopez, Miller, Wardwell, Wilson; Noes: None; Abstentions: None; Absent: None; Motion Carried.

**CONSIDER RECOMMENDATION FOR BOARD APPROVAL FOR THE PURCHASE OF ZOLL MEDICAL R SERIES ALS DEFIBRILLATORS FOR ALL HOSPITAL BASED DEPARTMENTS**

SVMH currently utilizes Philips Heartstart Defibrillator's in patient care areas to support patients requiring resuscitation during a Code Blue as well as during Cardioversion procedures. With our current equipment reaching end of life, the clinical care team is requesting that we transition our defibrillation system from our current model to the Zoll Medical R Series ALS which offers the same functionality of our current system, with the addition of improved ease of use, and expands our ability to assess the adequacy of CPR and objectively monitor the quality of care during Code Blues. The background/situation/rationale, financial implications, description of work, timeline and fee proposal were included in the packet.

No Public Comment

**MOTION:** The Finance Committee recommends the Board of Directors approve the the purchase of thirty seven (37) Zoll Medical R Series ALS Defibrillators at the cost of \$748,675.40 subject to final negotiation and legal review. Moved/Seconded/Roll Call Vote: Ayes: Turner, Cabrera, Delgado, Bajaj, Lopez, Miller, Wardwell, Wilson; Noes: None; Abstentions: None; Absent: None; Motion Carried.

**REVIEW BALANCED SCORECARD – NOVEMBER 2021**

Augustine Lopez, Chief Financial Officer, reviewed the Balanced Scorecard Summary for fiscal year 2022, year-to-date November 2021, which provided an overview of the metrics and performance of the SVMHS organizational goals for Service, People, Quality, Finance, Growth, and Community. This information was included in the Committee packet.



**FINANCIAL AND STATISTICAL REVIEW**

Augustine Lopez, Chief Financial Officer, provided a financial and statistical performance review for the month ending December, 2021. This information was included in the Committee packet

Key highlights of the financial summary for December 2021 were: (1) Income from operations was \$9.1 million with an operating margin of 14.9%, with a net income of \$9.1M with a net operating margin of 15%; (2) Income from operations includes \$6.1 million Provider Relief Fund-Phase 4 funds recorded as deferred revenue; to date \$8.5 million has been received in FY22; (3) inpatient gross revenues were favorable to the budget; (4) Emergency Department gross revenues were favorable to the budget; outpatient gross revenues were favorable to the budget; (5) the payor mix was favorable to the budget; (6) total net patient revenues were favorable to the budget; outpatient and inpatient surgeries were below budget; (7) average daily census and total admissions were above budget; (8) total acute average length of stay (ALOS) was favorable to the budget while Medicare traditional ALOS CMI adjusted was unfavorable; (9) labor productivity was favorable to the budget; (10) operating revenues were above expenses; (11) days cash on hand 2as 378; total capital expenditures were \$1,351,043. The case mix index for all discharges with and without COVID-19 cases for January 2021 through December 2021 was reviewed.

Judy Melton presented a brief presentation on supply chain challenges, impact and SVMH activities which included a market overview, global stressors, current activities to mitigate reduced supply, cost impact, and pricing pressure. This information was included in the Committee packet.

**NO PUBLIC INPUT****NO CLOSED SESSION****ADJOURNMENT**

There being no other business, the meeting was adjourned at 1:15 p.m. The February 2022 Finance Committee Meeting is scheduled for **Wednesday, February 23, 2022 at 12:00 p.m.**

Richard Turner  
Chair, Finance Committee

**RECOMMENDATIONS OF THE JANUARY 2022  
FINANCE COMMITTEE MEETING  
COMMITTEE OF THE WHOLE  
SALINAS VALLEY MEMORIAL HEALTHCARE SYSTEM**

**January Committee Meeting  
of January 24, 2022  
to the Board of Directors**

**1. CONSIDER RECOMMENDATION FOR BOARD OF DIRECTORS TO APPROVE THE SENTRICS INTERACTIVE PATIENT CARE SOLUTIONS SYSTEM AS SOLE SOURCE JUSTIFICATION AND CONTRACT AWARD**

RECOMMENDATION: Recommends the Board of Directors approve the Sentrics interactive patient care solutions system as sole source justification and contract award for \$439,668 over a 3-year term, as presented.

**2. CONSIDER RECOMMENDATION FOR BOARD OF DIRECTORS APPROVAL OF CONTRACT AWARD TO MERCURY HEALTHCARE FOR A NEW CUSTOMER RELATIONSHIP MANAGEMENT (CRM) PLATFORM**

RECOMMENDATION: Recommends the Board of Directors approve the contract with Mercury Healthcare for a New Customer Relationship Management (CRM) Platform, as presented.

**3. CONSIDER RECOMMENDATION FOR BOARD APPROVAL OF THE ABBOTT STREET LEASE AGREEMENT BETWEEN SALINAS VALLEY MEMORIAL HEALTHCARE SYSTEM AND UNI-KOOL PARTNERS FOR THE PARKING LOT LOCATED AT 241 ABBOTT STREET, SALINAS**

RECOMMENDATION: Recommends the Board of Directors approve the Abbott Street Lease Agreement between Salinas Valley Memorial Healthcare System and Uni-Kool Partners for the Parking Lot located at 241 Abbott Street, Salinas, as presented.

**4. CONSIDER RECOMMENDATION FOR BOARD APPROVAL OF THE HELLMUTH, OBATA & KASABAUM INC. (HOK) AGREEMENT FOR SPACE PLANNING & FULL TENANT DESIGN IMPROVEMENTS FOR THE DRC EXPANSION (BASEMENT OF NEW PARKING ANNEX)**

RECOMMENDATION: Recommends the Board of Directors approve the Hellmuth, Obata & Kasabaum Inc. (HOK) Agreement for Space Planning & Full Tenant Design Improvements for the DRC Expansion (Basement of new Parking Annex), as presented.

**5. CONSIDER RECOMMENDATION FOR BOARD APPROVAL FOR THE PURCHASE OF ZOLL MEDICAL R SERIES ALS DEFIBRILLATORS FOR ALL HOSPITAL BASED DEPARTMENTS**

RECOMMENDATION: Recommends the Board of Directors approve the purchase of Zoll Medical R Series ALS Defibrillators for all hospital based departments.

## Board Paper: Finance Committee

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Agenda Item: Consider Recommendation for Board Approval and Award of Hazardous Waste Disposal Contract to Stericycle, Inc., a Delaware Corporation.

Executive Sponsor: Clement Miller, Chief Operating Officer  
Earl Strotman, Director Facilities Management & Construction

Date: February 8, 2022

### Executive Summary

Salinas Valley Memorial Healthcare System is a Small Quantity Generator of Hazardous Waste (less than 1,000 kilograms per month) requiring handling and disposal by a licensed, certified and competent vendor who is capable of minimizing the risks associated with Hazardous materials and its disposal under current California codes and regulations.

### Background/Situation/Rationale

Salinas Valley Memorial Healthcare System is a Small Quantity Generator of Hazardous Waste (less than 1,000 kilograms per month). Most of this hazardous material is in the form of Formalin and other Hazardous Materials utilized in the Histology Department for tissue preservation and other purposes. Other streams of hazardous wastes may include incandescent, fluorescent and metal hydride lamps and ballasts used for illumination as well as refrigerant oil used in the HVAC trade.

The district has had a long-standing relationship with All Chemical Disposal Company. Stericycle purchased that company in 2014. Stericycle has been the main Hazardous Materials Waste hauler since that time. Previous 3-year contract with Stericycle, Inc. expired in May 2021. A month-to-month Memorandum of Understanding was signed with Stericycle in May 2021 to allow SVMH personnel to explore other Hazardous Waste vendors (haulers) and opportunities for both cost reduction and service improvements. After completing a review of options for this service we have determined Stericycle is the appropriate vendor to provide our hazardous waste management going forward.

### Pillar/Goal Alignment:

Service  People  Quality  Finance  Growth  Community

### Financial Implications

The essential terms of the proposed Contract with the hazardous waste vendor are as follows:

<b>Key Contract Terms</b>	<b>Stericycle, Inc.</b>
1. Proposed effective date	Issuance of Notice to Proceed anticipated on March 1, 2022
2. Term of agreement	36 months
3. Renewal terms	Not Applicable
4. Cost	Total all-inclusive sum not to exceed \$200,000 per year (\$600,000 for 3 years/36 months).
5. Budgeted (indicate y/n)	Yes

Schedule: May 2021 – Expiration of Existing Hazardous Waste Disposal Contract.  
May 2021 – Memorandum of Understanding with Existing Hazardous Waste Disposal vendor signed.  
February 2022 – Anticipated Award to Hazardous Waste Vendor  
March 2022 – Anticipated Start Date of Hazardous Waste Contract

### Recommendation

Consider Recommendation for Board Approval and Award of the Hazardous Waste Disposal contract to Stericycle Inc. for management of disposal of hazardous and universal waste generated at Salinas Valley Memorial Hospital, 450 E. Romie Lane, Salinas in the total amount of \$600,000.00.

### Attachments

- Attachment 1: Master Service Agreement between Salinas Valley Memorial Healthcare System and Stericycle.
- Attachment 2: Estimated anticipated costs prepared January 2022.
- Attachment 3: Sole Source documentation.



Vizient SV2425 Exhibit C-4

Master Service Agreement

Customer/Company Name: Salinas Valley Memorial Hospital Billing Attention: Accounts Payable
Customer Address 1: 450 E. Romie Ln Billing Name:
Customer Address 2: Contact Phone #:
City/State/Zip: Salinas, CA 93901 Contact Fax #:
Contact Title: Contact Email:

This Agreement is entered into, and effective as of 3/1/2022 between Salinas Valley Memorial Hospital and (hereinafter referred to as Customer), for itself and on behalf of any of its operating subsidiaries and Stericycle, Inc., a Delaware Corporation having a place of business at 2355 Waukegan Road, Bannockburn, IL 60015 (hereinafter referred to as "Stericycle").

Table with 3 columns: Regulated Medical Waste Disposal, Sharps Disposal Management, Integrated Waste Stream Solutions. Includes details for Pharmaceutical Waste Disposal, X Hazardous Waste Disposal, and Medical Product Supplies.

Service Details are referenced in Corresponding Attachments included herein.

Agreement Effective Date: 3/1/2022

Master Agreement ID: SV2425 - Exhibit C-4

Terms of Agreement: 36 Months

See Master Agreement ID (The Master) for services between the Customer and Supplier. The execution of this Customer Agreement constitutes the Customer's agreement to participate in this Agreement.

Stericycle, Inc.

Service Provider Name: Stericycle, Inc.
Representative Name:
Representative Title:
Date:
Signature:

Customer

Customer/Company Name: Salinas Valley Memorial Hospital
Signee Name:
Signee Title:
Date:
Signature:
GPO ID #: See Location Listing

By signing above, I acknowledge that I am the Customer's authorized officer or agent and that I have the authority to bind Customer to this agreement. Customer agrees to be bound by the terms and conditions that appear on the following pages hereof and comply with Stericycle's Waste Acceptance Policy, both of which are integral parts of this agreement.

STERICYCLE USE ONLY

Type of Agreement: Affiliation Code: LQ Record #:
Purchase Order #: From: To: Segment Code: LQ Contract #:

Stericycle, Inc. • 2355 Waukegan Road, Bannockburn, IL 60015 • www.stericycle.com

# TERMS AND CONDITIONS

## 1. Hazardous Waste Services and Customer Responsibilities

(a) Certain capitalized terms as used in this Agreement or any attachment hereto shall have the definitions given to them in Schedule A hereto. Stericycle, Inc. has obtained all necessary licenses, permits, insurance and authorizations required to perform services hereunder and, upon request, shall furnish copies thereof to customer. Stericycle will manage Customer's Waste that are Hazardous Waste and/or Universal Waste, as more fully described in Attachment C. Customer shall place only Conforming Waste into the containers provided. Customer warrants that the Waste presented for disposal will not contain any Non-Conforming Waste and Customer shall be liable for any injury, loss or damage resulting from violations of such applicable law regarding disposal of Non-Conforming Waste. Stericycle employees may refuse containers that are determined to contain Non-Conforming Waste or otherwise do not comply with Stericycle's Waste Acceptance Policy ("WAP"). Stericycle reserves the right to change the WAP at any time to ensure compliance with applicable laws or regulations. A copy of Stericycle's Waste Acceptance Policy may also be obtained from your local Stericycle representative. Title to Conforming Waste shall transfer to and vest in Stericycle at such time as such Waste is loaded onto Stericycle vehicles. Customer shall have title to the Conforming Waste at all prior times. Customer shall hold title to any Non-Conforming Waste at all times, whether refused for collection, returned to the Customer for proper disposal after collection or otherwise disposed of in accordance with Customer's instructions or arrangements.

(b) Any Waste tendered to Stericycle by Customer or at Customer's locations will conform fully with the applicable Waste Characterization Data for that Waste, be labelled by Customer in conformance with applicable laws and so as to communicate its contents to Stericycle, and be segregated from other Wastes in accordance with the WAP. Customer will provide Stericycle with complete and accurate Profile Sheet(s), Waste Characterization Form(s) and other Waste Characterization Data to assure accurate Waste Characterizations. Customer shall tender to Stericycle only fully Conforming Waste and follow all applicable Laws in storing, handling, treating, segregating, labelling, securing, manifesting, and inspecting such Waste and in preparing and maintaining records relating to that Waste. Customer agrees to comply with Stericycle's Waste Acceptance Policy set forth in the attachment hereto. Customer will provide Stericycle advance notice of any changes in the ingredients of, character of, substances contained in or processes involved in generating any Waste for which services are performed, and Customer shall conduct a new Waste Characterization and provide Stericycle with revised Waste Characterization Data before tendering such Waste to Stericycle for services.

**2. Recordkeeping and Compliance with Laws** Stericycle and Customer shall keep and retain adequate books and records and other documentation including personnel records, correspondence, instructions, plans, receipts, vouchers, permits, required state registrations, copies of manifests and tracking records consistent with and for the periods required by applicable regulations and guidelines pertaining to generation, storage or handling of Regulated Medical Waste and the services to be performed under this Agreement.

**3. Term, Pricing and Termination** The term ("Term") of this Agreement is established on page one of this document, 36 months from the date of execution of this agreement.

- (a) Customer shall pay Stericycle the prices set forth on the Attachment A of this Agreement. Stericycle may increase the contract price by 4%. Such increase may not be implemented until the date occurring after the first 12 months of the Term with a 36-month agreement, and after 18 months with a 60-month agreement. Thereafter, price increases may be implemented on each subsequent anniversary date of the initial price increase. Stericycle may adjust the contract price to account for operational changes it implements to comply with changes in law and/or changes in customer's service requirements or to otherwise cover unforeseen, significant cost escalation.
- (b) Stericycle has instituted a per invoice fuel surcharge to manage and isolate the impact of Diesel fuel price fluctuations. The fuel surcharge is based on the U.S. 'On Highway' Diesel Price Index. A table outlining the Fuel Surcharge can be found in Attachment D of this agreement.
- (c) In the event of breach of any provision of this Agreement, the non-breaching party shall notify the breaching party in writing of the specific nature of the breach and shall request that it be cured. If the breaching party does not cure the breach within thirty (30) days of such notice, the non-breaching party may immediately terminate this Agreement on written notice to the breaching party, and such termination shall not preclude the non-breaching party from pursuing any and all remedies available to it at law or in equity.
- (d) If Customer breaches this Agreement by terminating Stericycle's collections prior to the expiration of its Term or in any other way violates this agreement in such a way that Stericycle's continued performance is rendered impossible or commercially impracticable, then Stericycle shall be entitled to collect from Customer an amount in liquidated damages (a) equal to 50% if in first 12 months of agreement (b) equal to 45% if in months 12 through 24, or (c) equal to 40% if past the initial 24 months of the agreement, of Customer's average charge on a monthly basis based on the 12 months' billings prior to the cessation of collections (or based on any lesser period if the contract began less than twelve months earlier) times the number of months, including prorated partial months, remaining until the expiration date of the Term or Extension Term. Customer hereby acknowledges (i) that Stericycle's damages resulting from the premature termination of collections include lost profits, inefficiencies resulting from route changes and reduced treatment plant throughput, increased administrative overhead, unrecoverable sunk training/instruction costs, and other elements of injury, (ii) that such damages are extremely difficult to quantify as they relate to any one customer, and (iii) that the foregoing liquidated damages amount is a reasonable estimate of actual expected damages and is not a penalty. Liquidated damages as described herein is Stericycle's sole remedy for Customer's improper early termination.
- (e) Stericycle shall have the right to terminate this Agreement at any time by giving Customer at least sixty (60) days' notice in the event that it is unable to continue performing its obligations under this Agreement due to the suspension, revocation, cancellation or termination of any permit or required to perform this Agreement or in the event that a change in any law, regulation or ordinance makes it impractical or uneconomical, in Stericycle's sole discretion, to continue performing this Agreement.
- (f) Upon 30 days' notice to Stericycle, Customer shall have the right to add or delete mutually acceptable Customer facilities receiving Regulated waste services under this Agreement. This addition or exclusion of any facility participating under this Agreement shall have no effect on the services provided the other participating facilities.

**4. Survival** The term of this agreement is established on page one of the documents. If Stericycle is re-awarded a new GPO agreement for medical waste management services, Members having signed a waste service agreement under the previous GPO agreement will continue to have their sales reported and Administrative Fees paid for their Stericycle waste purchase activity on the new GPO agreement without any further action being required, through the term of the Stericycle waste service agreement.

**5. Billing** Stericycle shall provide Customer with monthly, quarterly, or annual invoices that are due upon receipt. Customer agrees to pay a late charge on any amounts owed to Stericycle that are more than 30 days old, at a rate equal to the lesser of 1 ½% per month or the maximum rate permitted by law. Customer shall bear any costs that Stericycle may incur in collecting overdue amounts from Customer, including, but not limited to, reasonable attorneys' fees and court costs. Should any amounts due pursuant to this Agreement remain unpaid for more than 30 days from the date of the debt's first invoice, Stericycle shall have the option, without notice to Customer, to suspend service under this Agreement until the overdue amounts (plus late charges and collection fees) are paid. In the event that Stericycle suspends services under this Agreement for any reason, including the expiration or termination of this Agreement or Customer's breach (see 3, above), Stericycle may remove all containers belonging to it from Customer's premises. Any non-compliant containers will be billed an additional container charge at the current container rate not to exceed 1.25% of Stericycle's cost. Non-compliant containers include containers that are overweight under applicable laws or regulations or containers holding Non-Conforming Waste.

**6. Surcharge** Stericycle may also impose a 'no waste' surcharge identified in the pricing attachment in the event that Stericycle attempts to pick up waste at a Customer location (on either a scheduled pick-up or in response to a Customer request) and, through no fault of Stericycle, either (a) there is no Regulated Waste for Stericycle to pick up, (b) waste is not ready for pick-up or (c) the Customer location is closed.

**7. Liability for Equipment** Customer shall have the care, custody and control of containers and other equipment placed at Customer's premises which is owned by Stericycle and accepts responsibility and liability for the equipment and its contents except when it is being physically handled by employees of Stericycle. Customer agrees to defend, indemnify and hold harmless Stericycle from and against any and all claims for loss or damage to property, or personal injury or death, resulting from or arising in any manner out of Customer's use, operation or possession of any containers and other equipment furnished under this Agreement, except to the extent any such loss or damage to personal property, or personal injury or death is a result of Stericycle's negligence, intentional misconduct, or breach of this agreement. Any damage to such property and equipment, other than normal wear and tear, will be charged to the Customer, and payable to Stericycle as additional service cost.

**8. Indemnification** In addition to and not limitation of the indemnification obligations set forth in the GPO Agreement, Stericycle shall indemnify and hold Customer harmless from any liabilities arising from the gross negligence or willful misconduct of Stericycle in the performance of its obligations under this Agreement. Customer shall indemnify and hold harmless Stericycle from any liabilities arising from the gross negligence or willful misconduct of Customer, which shall include, but not be limited to, failure to properly store, package, label, or segregate Regulated Medical Waste and any liabilities relating to Non-Conforming Waste, whether or not collected, transported or treated by Stericycle. Each party agrees to pay the reasonable attorneys' fees and costs incurred by the other in bringing a successful indemnification claim under this Paragraph. Customer agrees to pay Stericycle's reasonable attorney's fees incurred for any success defense by Stericycle of a suit for indemnification brought against Stericycle by Customer.

**9. Compliance with Laws** Stericycle hereby agrees to carry General Liability, Automobile Liability, and Workmen's Compensation Insurance as required by applicable state law, and to otherwise comply with all federal and state laws, rules, and regulations applicable thereto and relating to its performance hereunder. As of the date of this Agreement, Stericycle has obtained, and agrees to maintain during the Term of this Agreement, all necessary permits, licenses, zoning and other federal, state or local authorizations required to perform the services under this Agreement and will furnish copies of these to Customer upon request. Customer and Stericycle each hereby agrees to comply with all federal and state laws, rules, and regulations applicable to their handling of Regulated Waste and their performance under this Agreement, including, without limitation, all applicable record keeping, documentation and manifesting requirements. Stericycle and Customer shall keep and retain adequate books and records and other documentation including personnel records, correspondence, instructions, plans, receipts, vouchers, copies of manifests and tracking records and any other records or reports or memoranda consistent with and for the periods required by applicable regulatory requirements and guidelines pertaining to storage or handling of Regulated Waste and the services to be performed under this Agreement.

**10. Exclusivity** Except as set forth in the GPO Agreement, Customer agrees to use no other Hazardous Waste disposal service or method during the Term of this Agreement and any Extension Terms.

**11. Force Majeure.** The obligations of either party to perform under this Agreement will be excused during each period of delay caused by acts of God, war or terrorism, or by shortages of power or materials or government orders which are beyond the reasonable control of the party obligated to perform and prevents the party from being able to perform ("Force Majeure Event"). In the event that either party ceases to perform its obligations under this Agreement due to the occurrence of a Force Majeure Event, such party shall: (1) immediately notify the other party in writing of such Force Majeure Event and its expected duration; (2) take all reasonable steps to recommence performance of its obligations under this Agreement as soon as possible. In the event that any Force Majeure Event delays a party's performance for more than thirty (30) days following notice by such party pursuant to this Agreement, the other party may terminate this agreement immediately upon written notice to such party.

**12. Independent Contractor** Stericycle's relationship with Customer pursuant hereto is that of an independent contractor, and nothing in this Agreement shall be construed to designate Stericycle as an employee, agent, or partner of or a joint venture with Customer.

**13. Amendment and Waiver** All other amendments to this Agreement (other than as provided in 3(b)) shall be affected only by a written instrument executed by the parties. No waiver shall be effective unless submitted in writing by the party granting such waiver. No waiver of any provision of this Agreement shall be deemed a waiver of any other provision of this Agreement and no waiver of any breach or duty under this Agreement shall be deemed a waiver of any other breach or later instances of the same duty.

**14. Savings Clause** In case any one or more of the provisions contained in this Agreement shall, for any reason, be held to be invalid, illegal or unenforceable in any respect, such invalidity, illegality or unenforceability shall not affect any other provisions of this Agreement; this Agreement shall be construed as if such invalid, illegal or unenforceable provision had never been contained herein, unless such finding shall impair the rights or increase the obligations of Stericycle hereunder, in which event, at Stericycle's option, this Agreement may be terminated

**15. Entire Agreement** This Agreement (including any attachments, exhibits and amendments made in accordance with Paragraph 13) together with the GPO Agreement constitutes the entire understanding and agreement of the parties and cancels and supersedes all prior negotiations, representations, understandings or agreements, whether written or oral, with respect to the subject matter of this Agreement.

**16. Governing Law** This Agreement shall be governed by and construed in accordance with the laws in the state of California without regard to the conflicts of laws rules of any jurisdiction.

**17. Notices** All required notices, or those which the parties may desire to give under this Agreement shall be in writing and sent to the parties' addresses set forth on the first page of this Agreement, and in the case of Stericycle, to the Stericycle LQ Sales Department address as follows: Attn: Stericycle LQ Sales Department, 2355 Waukegan Road, Bannockburn, IL 60015. Notices shall be effective when received.

**18. Assignment** Neither party will assign any rights or obligations under this Agreement without the express written consent of the other party. Such consent shall not be unreasonably withheld.

**19. Counterparts** This Agreement may be executed in one or more counterparts, each of which shall be deemed an original but all of which when taken together shall constitute one and the same instrument. A copy or facsimile of this Agreement shall be as effective as an original.

**20. Limitation of Liability.** Except as explicitly provided in this Agreement, Stericycle shall not be liable for any loss of profits or other consequential damages sustained by Customer in connection with performance or nonperformance under this Agreement.

**21. Waste Brokers** Stericycle reserves the right to deal solely with the Customer and not with any third-party agents of the customer for all purposes relating to this Agreement (other than as contemplated by the GPO Agreement). Customer represents and warrants to Stericycle that it is the medical waste generator and is acting for its own account and not through a broker or agent. Stericycle shall be entitled to terminate this agreement and seek all available legal remedies, including but not limited to liquidated damages, in the amount set forth herein for Customer's breach of this representation and warranty.



# Schedule A

## Definitions

“**Conforming Waste**” means Waste that is tendered to Stericycle for Services under this Agreement in compliance with the terms of this Agreement and applicable Law and that: (a) fully conforms to correct and complete Waste Characterization Data; (b) conforms in its content to any associated labelling or packaging; (c) is properly segregated from other types of Wastes; and (d) is properly packaged or containerized.

“**Hazardous Waste**” means any waste containing hazardous, toxic or radioactive substances, as such terms are defined by applicable Laws, including any substance regulated by the Toxic Substances Control Act, 15 U.S.C. Section 2601 *et seq.*, as amended, or any listed or characteristic hazardous waste under the Resource Conservation and Recovery Act, 42 U.S.C. Section 6901 *et seq.*, as amended (“**RCRA**”) or under any comparable state or local laws, and any waste material that has been mixed with, derived from or came into contact with any of the foregoing, but shall not include pharmaceutical waste.

“**Nonconforming Waste**” means any material tendered to Stericycle under this Agreement that is not a Conforming Waste.

“**Profile Sheet**” or “**Waste Characterization Data Form**” means form(s) used to obtain Waste Characterization Data that may be made available to Customer by Stericycle on a case-by-case basis depending on the type of Waste managed.

“**Universal Waste**” means specific hazardous wastes that the EPA has identified in 40 CFR part 273 (batteries, lamps, mercury-containing equipment, pesticides) and any other waste that individual states may have added to this list.

“**Waste**” means Hazardous Waste or Universal Waste.

“**Waste Characterization**” means the process of determining a Waste’s regulated status according to applicable laws.

“**Waste Characterization Data**” means all information used for Waste Characterization, including but not limited to generator knowledge, descriptions of the processes generating the Waste, material safety data sheets, ingredient information, package inserts, analytical testing, and other information describing a Waste’s characteristics.

## Attachment A Pricing

### Hazardous Waste Disposal Pricing:

Service Description	UOM	Process Code	Service Code	Rate	Minimums
<b>Pharm Waste:</b>					
Non-Hazardous Pharmaceuticals	DR55	INC27-1	I2701	\$ 250.00	
RCRA Pharmaceuticals	DR55	INC29	I2900	\$ 451.00	
P-Listed RCRA pharmaceuticals Waste	DR55	INC29-2	I2902	\$ 521.00	
Dual Waste	DR55	INC31-2	I3102	\$ 1,250.00	
<b>Lab Packs:</b>					
Fuels for thermal treatment	DR55	AF07	LPA01	\$ 312.00	
Oxidizer	DR55	INC14-E	LPI02	\$ 1,120.00	
Isocyanates	DR55	INC14-I	LPI03	\$ 1,089.00	
Reactive Metals (Li, Na, K - 1 lb under oil)	LB	INC15-1	LPI05	\$ 52.50	Lab Pack Minimums Apply
Dioxins (F027)	LB	INC15-F2	LPI06	\$ 63.63	Lab Pack Minimums Apply
Landfill, Non-regulated	DR55	LF06	LPL01	\$ 358.00	
Non-reactive	DR55	LP01	Missing	\$ 603.00	
Reactive	LB	LP02	Missing	\$ 7.63	Lab Pack Minimums Apply
Treatment, corrosives	DR55	LP04	Missing	\$ 407.00	
Retort, Inorg Hg Cmpd/Soln	DR55	REC04-H1	LPR01	\$ 4,338.00	
Treatable oxidizers	DR55	STAB06-6	LPS01	\$ 780.00	
Stab, Characteristic Metal	DR55	STAB19	LPS02	\$ 510.00	
<b>Containerized Waste Streams:</b>					
Flammable liquid (xylene, methanol, ethanol, stains)	DR55	AF01	A0100	\$ 239.00	
AF<1" Sludge 3-6% halo BTU > 5k	DR55	AF01-1	A0101	\$ 189.00	
AF<1" Sludge 6-10% halo BTU>5k	DR55	AF01-2	A0102	\$ 178.00	
AF<1" Sludge 20-25% halo BTU>5k	DR55	AF01-4	A0104	\$ 212.00	
AF<1" sldge.>25% halog BTU >5K	DR55	AF01-5	A0105	CBC	
High Water Solvents - 55 gallon drum	DR55	AF01-9	A0109	CBC	
AF 0-25% sludge<3% halo BTU> 5k	DR55	AF02	A0200	\$ 272.00	
AF 25-50% sludge<3% halo BTU>8k	DR55	AF03	A0300	\$ 291.00	
AF >50% sludge<3% halo BTU>10k	DR55	AF04	A0400	\$ 332.00	
AF <3" sldge3% hal NR BTU > 50	DR55	AF05	A0500	\$ 204.00	
Waste paint - (oil based D001 code)	DR55	AF06	A0600	\$ 318.00	
AF solid/debris haz to kilns	DR55	AF09	A0900	\$ 524.00	
*Non DOT, Non-RCRA Hazardous Waste - 55 gallon drum (oily rags, sorbents, antifreeze)	DR55	AF12	A1200	\$ 291.00	
Non-Hazardous Fixer/Developer WTE- 55 gallon drum	DR55	AF13	A1300	CBC	
AF Spec Handling	DR55	AF16	A1600	CBC	
AF solid/debris haz to kilns	DR55	AF17	A1700	\$ 266.00	
AF solid/debris haz	DR55	AF17-2	A1702	CBC	

COVID-19 Decon Debris for Waste to Energy	DR55	AF24-1	Missing	\$ 425.00	
Flammable Aerosols	DR55	INC01-1	I0101	\$ 497.00	
CALIBRATION GAS CYLINDERS	Each	INC03	I0300	CBC	
Cat 1 cyl lecture INC03-1LE	Each	INC03-1LE	I31LE	\$ 257.00	
Cat 1 cyl med INC03-1M	Each	INC03-1M	I310M	\$ 435.00	
Cat 1 cyl small INC03-1S	Each	INC03-1S	I310S	\$ 308.00	
Cat 2 cyl lecture INC03-2LE	Each	INC03-2LE	I32LE	\$ 361.00	
Cat 3 cyl lecture INC03-3LE	Each	INC03-3LE	I33LE	\$ 472.00	
Cat 4 cyl lecture INC03-4LE	Each	INC03-4LE	I34LE	\$ 929.00	
CN LIQ 0-100k ppm INC04	DR55	INC04	I0400	\$ 1,665.00	
LIQUIDS - PESTICIDE SOLUTIONS	DR55	INC08	I0800	\$ 1,041.00	
Liquids- Lean waters, < 5% chlorinated solvents , <2500 btu	DR55	INC09	I0900	\$ 624.00	
LP, oxidizer	LB	INC11	LPI02	\$ 3.45	Common Container Minimums Apply
LP, Reactive	LB	INC11-1	LPI04	\$ 9.00	Common Container Minimums Apply
LP, Non-reactive	LB	INC13	LPI01	\$ 1.48	Common Container Minimums Apply
Debris for incin	LB	INC16	I1600	\$ 1.82	Lab Pack Minimums Apply
Cont solid for incineration	LB	INC17	I1700	\$ 2.01	Common Container Minimums Apply
Halo Liq >10% halogens- incin	DR55	INC18-2	I1802	\$ 814.00	
Non-comp for Direct Pump Incin	LB	INC19	I1900	CBC	Common Container Minimums Apply
Reac non-comp LIQ INC19-3	LB	INC19-3	I1903	\$ 3.03	Common Container Minimums Apply
BUTANE REFILL	LB	INC19-6	I1906	\$ 2.15	Common Container Minimums Apply
Methanol, Glacial Acetic Acid Poly Drum - 15 gallon drum	DR55	INC20	I2000	\$ 791.00	
INC Alk liq-incin/DIRincin	DR55	INC21	I2100	\$ 780.00	
ACID ALK <5000 BTU INC24	LB	INC24	I2400	\$ 2.23	Common Container Minimums Apply
Pest/Fert Solid INCIN	LB	INC25	I2500	\$ 2.08	Common Container Minimums Apply
Formalin for RCRA incin	LB	INC27	I2700	\$ 1.75	Common Container Minimums Apply
Biopsy Methanol Vials - 55 gallon drum	DR55	INC27-2	I2702	\$ 512.00	
Formalin and Animal Parts for RCRA Incineration	DR55	INC27-3	I2703	\$ 512.00	
Fuel LIQ>5k BTU<5% halo INC28	LB	INC28	I2800	\$ 0.96	Common Container Minimums Apply
RCRA pharmaceuticals containing HG for incineration	DR55	INC29-1	I2901	\$ 524.00	
Chemo Hood Filters	DR55	INC29-3	I2903	CBC	
LP, oxidizer	DR55	INC29-5	LPI02	\$ 746.00	
LP, Non-reactive	DR55	INC29-8	LPI01	\$ 678.00	
RCRA/Non-RCRA DEA pharm INC30	DR55	INC30	I3000	CBC	
COVID-19 Decon Debris for Incineration	DR55	INC32-1	Missing	\$ 605.00	
LNDFL ready, non-reg	DR55	LF01	L0100	\$ 185.00	
Landfill, Crushed drums	DR55	LF04	L0400	\$ 83.00	
LNDFL ready reg meets UTS	DR55	LF07	L0700	\$ 225.00	
LNDFL wet SOLIDIFY CA st 90%FL	DR55	LF08	L0800	\$ 242.00	
Lead Aprons/ Lead Indicators	DR55	LF09	L0900	\$ 395.00	
X Ray Film	DR55	LF10	L1000	\$ 495.00	
Asbestos, double bagged and wetted, for landfill, regulated	DR55	LF11	L1100	\$ 278.00	

COVID-19 Decon Debris for Landfill	DR55	LF18-1	Missing	\$ 240.00	
PCB Ballasts for incineration	DR55	PCB01	PCB01	CBC	
PCB ball/caps for TSCA LNDFL	DR55	PCB09	PCB09	CBC	
*PCB Ballasts	LB	PCB10	PCB10	CBC	Common Container Minimums Apply
Latex Paint for recycling - 55 gallon drum	DR55	REC01	R0100	CBC	
Mercury Compounds, Mercury spill materials for waste disposal	DR55	REC04	R0400	\$ 3,872.00	
*Lead Acid	LB	REC05	R0500	\$ 0.77	\$10 Minimum Applies
Fluorescent Bulbs/Lamps: 4ft, 8ft, U-Shaped, and Circular	LB	REC06	R0600	\$ 1.87	\$15 Minimum Applies
Bulbs - U-Shaped/Circular Fluorescent	LB	REC06-1	R0601	\$ 1.67	\$15 Minimum Applies
Bulbs - 8 Ft Fluorescent	LB	REC06-2	R0602	\$ 1.67	\$15 Minimum Applies
Bulbs - Compact Fluorescent	LB	REC06-3	R0603	\$ 1.67	\$15 Minimum Applies
Bulbs - Incandescent	LB	REC06-4	R0604	\$ 1.67	\$15 Minimum Applies
Used Oil/Refrigerant Oil	DR55	REC07	R0700	\$ 212.00	
Antifreeze/Propylene Glycol	DR55	REC08	R0800	\$ 265.00	
*Lithium	LB	REC09	R0900	\$ 6.81	\$50 Minimum Applies
Oil filters, Non-regulated	DR55	REC10	R1000	\$ 211.00	
*Nickel Cadmium	LB	REC11	R1100	\$ 2.13	\$25 Minimum Applies
*Nickel Metal Hydride	LB	REC11-1	R1101	\$ 1.30	\$25 Minimum Applies
Devices containing Mercury (Recycle) (Amalgam)	LB	REC14	R1400	\$ 7.76	Lab Pack Minimums Apply
Devices Containing Mercury	LB	REC14-L	R14L0	CBC	Lab Pack Minimums Apply
Crushed Fluorescents Lamps	LB	REC15	R1500	\$ 3.91	Common Container Minimums Apply
BATTERIES SILVER OXIDE	LB	REC19	R1900	CBC	\$25 Minimum Applies
*Alkaline	LB	REC24	R2400	\$ 1.74	\$25 Minimum Applies
RCRA empty drums, for reconditioning or scrap recycling	DR55	REC27	R2700	\$ 47.00	
Pb Aprons/ Pb Indicators Rcyc	DR55	REC40	R4000	CBC	
Mixed Batteries	DR55	REC41	R4100	CBC	
Bulbs: HID, Halgoenated, and Incandescent	LB	REC42	R4200	\$ 5.17	\$25 Minimum Applies
Bulbs - Halogens	LB	REC42-3	R4203	CBC	\$25 Minimum Applies
*Non-PCB Ballasts	LB	REC45	R4500	\$ 0.94	Common Container Minimums Apply
CRT intact-recycle REC50	LB	REC50	R5000	#N/A	\$25 Minimum Applies
X Ray Film Recycling	LB	REC50-1	R5001	CBC	\$25 Minimum Applies
Flat Screen Monitors	LB	REC50-L	R5002	\$ 1.50	\$25 Minimum Applies
Electronic Devices	LB	REC55	R5500	\$ 1.68	\$25 Minimum Applies
Cylinders, flammable, propane-small, camp type, for recycle	Each	REC61	R6100	\$ 34.00	
Flammable Cylinders - Small	Each	REC61-1	R6101	\$ 41.00	
Cyl CO2 for recycle REC63	Each	REC63	R6300	\$ 42.00	
Cyl Oxygen for Recycle	Each	REC65	R6500	\$ 63.00	
Latex Paint for solidification- 55 gallon drum	DR55	STAB01	S0100	\$ 198.00	
LNDFL wet SOLIDIFY CA st	DR55	STAB02	S0200	\$ 300.00	
Sludge pH<4 w/RCRA metal STAB2	DR55	STAB02-1	S0201	\$ 355.00	
ALK SOL/SLG/RCRA mtl STAB02-2	DR55	STAB02-2	S0202	\$ 355.00	
SLDG F6-F9 F19 CN<590 STAB03	DR55	STAB03	S0300	\$ 313.00	
HAZ DEB Alk F6-F9 F19 CN <590	DR55	STAB03-2	S0302	CBC	

Treatable oxidizers STAB06	DR55	STAB06	S0600	CBC	
Treat Oxi LIQ Class A STAB06-1	DR55	STAB06-1	S0601	\$ 814.00	
Sludge pH7 w/RCRA metals STAB7	DR55	STAB07	S0700	\$ 355.00	
Acid D7 25-50% acid WAT01-2	DR55	STAB12	S1200	\$ 476.00	
NR shredble sol w/free liq-LF	DR55	STAB14	S1400	\$ 241.00	
HZ shredble sol w/free liq-LF	DR55	STAB15	S1500	CBC	
HAZ DEB Alk F6-F9 F19 CN <590	DR55	STAB17-1	S1701	CBC	
Mercury Debris, or Mercury Containing Liquids, > 260 ppm (No metallic), for stab	DR55	STAB22-2	S2202	CBC	
HYDROCHLORIC ACID LAB PACK	DR55	WAT01	W0100	CBC	
Acid aqueous no Cr/acid< 25%	DR55	WAT01-1	W0101	\$ 313.00	
Acid no Cr 10-25%HNO3 WAT01-10	DR55	WAT01-10	W0110	CBC	
Acid no D7 >26%HNO3 WAT01-11	DR55	WAT01-11	W0111	CBC	
Acid D7 25-50% acid WAT01-2	DR55	WAT01-2	W0102	\$ 442.00	
Acid LIQ Acid > 50% WAT01-3	DR55	WAT01-3	W0103	\$ 604.00	
POTASSIUM HYDROXIDE, SOLUTION	DR55	WAT02	W0200	CBC	
Alkali waste water-Caustic<25%	DR55	WAT02-1	W0201	\$ 339.00	
AF<1" Sludge 6-10% halo BTU>5k	DR55	WAT02-2	W0202	\$ 355.00	
ALK LIQ <50% caustic WAT02-3	DR55	WAT02-3	W0203	\$ 373.00	
CHROMIC ACID SOLUTIONS 0-100%	DR55	WAT04	W0400	CBC	
Acid chromic total Cr<5000 ppm	DR55	WAT04-1	W0401	\$ 543.00	
H2O,<10% floc NR treat&dschrge	DR55	WAT05	W0500	\$ 204.00	
H2O/Oil <10% floc NR WAT05-1	DR55	WAT05-1	W0501	CBC	
Fixer/Developer Containing Silver	DR55	WAT08	W0800	\$ 218.00	
Water w/orgs D codes <10% floc	DR55	WAT13	W1300	CBC	
Inorganic cyanides	DR55	WAT16-J	LPW03	\$ 787.00	
CN Liq 5k-15k ppm WAT20-2	DR55	WAT20-2	W2002	\$ 476.00	

### Hazardous Waste Non-Disposal Pricing:

Service Description	UOM	Process Code	Rate	Minimums
<b>Transportation:</b>				
Haz Stop Fee (West)	Each	TRSTOP1	\$ 445	
Demurrage	Hour	TRADMDEM	\$ 116	
AK Surcharge Fee	Each	TRADMHM	\$ 650	
HI Surcharge Fee	Each	TRADMHM	\$ 400	
PR Surcharge Fee	Each	TRADMHM	\$ 400	
Insurance, Security & Environmental	Per Invoice		4%	
<b>Labor:</b>				
Lab packing and sorting	Hour	LBLABRST	\$ 66	4 hour minimum (Portal to Portal)
Field Tech	Hour	LBLABRST	\$ 66	4 hour minimum (Portal to Portal)
Field Chemist	Hour	LBCHEMST	\$ 95	4 hour minimum (Portal to Portal)

Project Manager, Straight Time	Hour	LBPROJMST	\$ 110	4 hour minimum (Portal to Portal)
Consulting Services/Training	Hour	ADMCOST	\$ 145	
<b>Supplies:</b>				
Box (4 foot) Fluorescent Lamp Box	Each	SPBxBUB4	\$ 41	
Box (8 foot) Fluorescent Lamp Box	Each	SPBxBUB8	\$ 48	
Steel Drum - 5 gallon	Each	SPDM05NO	\$ 44	
Poly Drum - 5 gallon	Each	SPDP05NO	\$ 28	
Drum, Fiber, 5 gallon, New, Open Top	Each	SPDF05NO	\$ 28	
Drum, Fiber, 8 gallon	Each	SPDF10NC	\$ 73	
Drum, 10 gallon	Each	SPDP10NO	\$ 73	
Drum, 15 gallon	Each	SPDP15NC	\$ 73	
Drum, 15 gallon, RX	Each	SPDF15NC	\$ 73	
Drum, Fiber, 15 gallon, New, Open Top	Each	SPDF15NO	\$ 73	
Drum, Fiber/Poly, 30 gallon, New, Open Top	Each	SPDF30NO	\$ 94	
Drum, Metal, 55 gallon, New, Closed Top	Each	SPDM55NC	\$ 123	
Drum, Metal, 55 gallon, New, Open Top	Each	SPDM55NO	\$ 123	
Drum, Poly, 55 gallon, New, Open Top	Each	SPDP55NO	\$ 108	
Drum, Poly, 55 gallon, New, Closed Top	Each	SPDP55NC	\$ 108	
Drum, Poly, 5 gallon, Recon, Closed Top	Each	SPDP05UO	\$ 23	
Drum, Poly, 15 gallon, Recon, Closed Top	Each	SPDP15UC	\$ 55	
Drum, Poly, 30 gallon, Recon, Open Top	Each	SPDP30UO	\$ 63	
Drum, Poly, 55 gallon, Recon, Open Top	Each	SPDP55UO	\$ 80	
Liner, Drum, 2 mil	Each	SPLINED	\$ 8	
Liner, Cubic Yard Box Liners	Each	SPLINECYB	\$ 16	
Labpacker, 55 gallon	Each	SPLABPK55	\$ 36	
Steel Overpack - 85 gallon	Each	SPDM85NO	\$ 313	
Poly Overpack - 85 gallon	Each	SPDF85NO	\$ 310	
Vermiculite - bag	Each	SPVERM	\$ 56	
Cubic Yard Box	Each	SPBXCYP	\$ 152	
PIH Box	Each	SPBX916P	\$ 256	
Labels	Each	SPLABEL	\$ 1	
Spill Pads - bale	Each	SPSORAL	\$ 146	
Poly Sheeting - roll	Each	SPLINELUG	\$ 195	
EPA E-Manifest Fee	Each	ADMEMANFST	\$ 25	
NITRILE GLOVES	Each	SPPEGLNI	\$ 6	
Personal Protective Equip (Lvl D)	Day	SPPPED	\$ 62	

## Conversions and Minimums:

Non-Specified Container Conversions		Conversion Table Notes
Container Size	Conversion	
1-5 Gallon	35%	These conversions will apply to all disposal and Transportation items priced per container unless quoted separately
6-15 Gallon	50%	
16-30 Gallon	75%	
31-55 Gallon	1x	The greater of the conversion factor or location container minimum of \$40 will be applied unless quoted a different rate
85 Gallon	1.5x	
Cubic Yard Boxes	4x	Some Waste may have a different, typically lower, minimum which is reflected on the Non-Standard Minimum table below.
250/275 Gallon Totes	5x	
330/350 Gallon Totes	6x	
		Small container sizes can be converted to larger containers using the following steps: 1) Divide the smaller container price by its conversion factor for the 55-gallon price (e.g., 5-gallon price).

Per Pound Standard Minimums			
	Common Containers	Lab Pack Containers	Light Weight Containers
Container (Gal)	Minimums		
5 or less	50 lbs.	25 lbs.	30 lbs.
6 to 15	125 lbs.	50 lbs.	75 lbs.
16 to 30	175 lbs.	110 lbs.	100 lbs.
31 to 55	250 lbs.	250 lbs.	150 lbs.
56 to 85	400 lbs.	300 lbs.	275 lbs.
Cubic box/pallet	525 lbs.	550 lbs.	500 lbs.
Tote (<300 gal)	1950 lbs.	-	-
1. Excludes Lab Pack and Light Weight items. 2. Includes: LPL01, LPS01, series of codes for I1400, I1500, LPW01 3. Includes: A1700, I0200, I1600 4. All other container sizes are case by case (CBC)			

Ancillary Charges	Service Code	UOM	Price
<b>Profiling Fees</b>			
<24 Hour URGENT Profile Fee	ADMPROPRU	Each	\$150.00
<b>Off Spec &amp; Discrepancy Fees</b>			
Rejection Fee	ADMREJECT	Each	\$75.00
Manifest Discrepancy/Paperwork Error	ADM MAN	Each	\$75.00
Off Spec/Discrepant - Storage Fee	ADMSTOR	Day	\$25.00
<b>Transportation, Labor, and Other Fees</b>			
e-Manifest Administration Fee (per manifest)	ADM MAN FEE	Each	\$25.00
Demurrage, after 1-hour loading	TRADMDEM	Hour	\$105.00
Scheduled Pickup Cancellation	ADM CAN	Each	\$150.00
Repacking/Overpacking Fee	ADM REPK	Each	\$150.00
Overpack Handling Fee	ADM VOPK	Each	\$50.00
Technical Lab Pack Review "Flat Rate fee - \$175.00 the Flat Fee Criteria":			
(1) Excel Submitted inventories:	ADTECHRVW	Each	\$175.00
(2) Maximum of 500 inventory items:			
(3) <5% of items with Trade Names:			

Non-Standard Minimums	
Container Min	Service Codes
\$0	REC51-3
\$5	R6000, R6101, R6200, R6300, R6400, R6500
\$10	R0500
\$15	L0100, R600, R2700
\$25	R1100, R1101, R1200, R1600, R1900, R2400, R4200, R4400, R5000, R5500
\$50	R0900, R09100

**\*Please Note:** The greater of the disposal minimum or \$40 per container will be charged unless quoted otherwise. A minimum charge of \$325 will apply to the invoice.

## **Assumptions:**

### **Standard Pricing Conditions:**

- This section and the terms and conditions apply to this quote unless superseded by a service agreement.
- Pricing is based on the information provided and will be confirmed following receipt of a completed waste profile. All pricing is pending profile approval and/or waste sample analysis.
- Pricing is based on the volume assumptions provided. Stericycle reserves the right to adjust pricing if waste quantity differs from what was provided.
- A minimum charge of \$325 applies to all invoices.
- Transportation, labor and equipment is portal to portal, and requires a four hour minimum unless otherwise specified.
- Unless otherwise specified, transportation rates include one hour of loading at the customer facility. Demurrage rates will apply after one hour and will be billed in 15 minute increments.
- All invoices are subject to applicable Federal, State, and local taxes & fees as well as an Energy & Insurance recovery charge tied to the National monthly average price for diesel fuel as published by the Department of Energy.
- E-Manifest Fee's will be applied
- In order to offer the safest and most complete services, we may need to apply price adjustments as necessary to cover costs that are beyond our control such as extraordinary or unexpected increases in disposal costs, regulatory changes, economic changes, war, etc.

### **Waste Specific Conditions**

- Disposal prices for gas cylinders are for those with original label, operable valve and in acceptable DOT shipping condition.
- Unknown identification fee of \$350 may be charged for each unknown gas that is sampled and analyzed
- A confirmation fee of \$200 may be charged for each suspected gas that requires confirmation due to lack of original label. If results do not match suspected contents, then unknown ID rate will apply along with additional disposal costs if applicable.
- Inoperable valve fee: No charge for Category A cylinders. For Categories B thru E, a tapping fee of \$350 per cylinder will apply regardless of size of cylinder. For categories F & G, inoperable valve fee will be Case-by-Case.
- Batteries not in original manufacturer's packaging must have both ends taped to avoid arc. Additional fees may apply if Stericycle personnel must tape the battery ends.

### **General Disposal Terms and Conditions**

- Bulk waste is typically defined as tanker or roll-off loads.
- Non-bulk waste means drums, boxes, totes, pails, bags, and cubic yard boxes and other containerized waste.
- Electronic profiling is included in the price. Paper profiles will be charged at \$50 each.
- Unless otherwise specified, prices quoted do not include the following:
  - Radioactive Waste
  - Biohazard or Infectious Waste
  - Explosives of any type
  - Liquid or free mercury
  - Isocyanates
  - Reactive materials (metals, solids, liquids)

Customer approves Stericycle's use of Customer's name and/or logo in Stericycle's marketing and promotional materials, including on Stericycle's website.



# Attachment B

## Service Locations

### Customers Locations, Serviced by Stericycle Under this Agreement

Cust ID	Site ID	Service Name	Address 1	Address 2	City	State	Zip	Frequency	GPO Member ID	EPA No.
6152489	001	Salinas Valley Memorial Hospital Laboratory	450 E. Romie Ln		Salinas	CA	93901	As needed, Transactional Pricing	58206	CAD981626039
6155582	750	SVMHS Outpatient Infusion Center	515 East Romie Lane		Salinas	CA	93901	As needed, Transactional Pricing	3542471	CAR000288258

# Future Service Locations

## Customer Locations to be Serviced by Stericycle

As of the Effective Date of this Agreement, the locations listed below are currently subject to existing agreements (“Third Party Agreements”) with service providers other than Stericycle (“Third Party Providers”), for services similar to the Services. Customer agrees that it will use commercially reasonable efforts to terminate such Third-Party Agreements at the end of the current term of each such agreement. Upon the expiration of the current term of each Third-Party Agreement, the location that is subject to such expiring Third-Party Agreement shall become subject to the terms and conditions of this Agreement, and Stericycle shall provide the Services hereunder. Stericycle agrees that it shall not be a breach of the “Exclusivity” provision of this Agreement for Customer to receive services similar to the Services from the Third-Party Provider during the current term of the Third-Party Agreement.

Cust ID	Site ID	Service Name	Address 1	Address 2	City	State	Zip	Frequency	GPO Member ID	EPA No.

# Attachment C

## STERICYCLE WASTE ACCEPTANCE POLICY

### NON-HAZARDOUS WASTES MUST BE IDENTIFIED, SEGREGATED AND

#### PACKAGED SEPARATELY FROM HAZARDOUS & UNIVERSAL WASTES: Examples Include.

- ✓ **Trace-Chemotherapy Contaminated Waste** – RCRA Empty drug vials, syringes and needles, spill kits, IV tubing and bags, contaminated gloves and gowns, and related materials as defined in applicable laws, rules, regulations, or guidelines.
- ✓ **Non-RCRA Hazardous Pharmaceuticals** – Must be characterized and certified as non-RCRA hazardous material by the generator. Consult Stericycle Representative for specific requirements.
- ✗ **Non-hazardous waste does not include RCRA Pharmaceuticals, Hazardous Chemical / Laboratory Wastes, Compressed Gas Cylinders, Universal Wastes or E-Wastes**

### HAZARDOUS (RCRA) WASTES MUST BE IDENTIFIED, SEGREGATED AND PACKAGED SEPARATELY FROM NON-HAZARDOUS AND UNIVERSAL WASTES: Examples Include:

- ✓ **RCRA Hazardous Wastes**
- ✓ **Hazardous Chemical / Laboratory Wastes** – Drums or other containers that contain characteristically or listed hazardous wastes - Formaldehyde, formalin, acids, alcohol, waste oil, solvents, reagents, fixer, developer
- ✓ **Compressed Gas Cylinders** - Canisters, Inhalers, and Aerosol Cans
- ✓ **Mercury - Containing Dental Waste** – Non-contact and contact amalgam and products, chair side traps, amalgam sludge or vacuum pump filters, extracted teeth with mercury fillings, and empty amalgam capsules
- ✓ **Radioactive Waste** – Any container with a radioactivity level that exceeds regulatory or permitted limits; lead-containing materials

### UNIVERSAL AND E-WASTES WASTES MUST BE IDENTIFIED, SEGREGATED AND PACKAGED SEPARATELY FROM HAZARDOUS AND NON-HAZARDOUS WASTES: Examples Include:

- ✓ **Universal Wastes:** Batteries, Mercury Containing Equipment, Fluorescent Lamps, Pesticides (Pharmaceuticals in some states)
- ✓ **E-Wastes** – computers, monitors, medical devices, lab equipment, miscellaneous electronics

### SEGREGATION AND LABELING

- ✗ **Segregate Wastes:** Do NOT store Incompatible wastes in the same container
- ✓ **Labeling:** Affix labels required by RCRA to appropriately identify contents

Customer is solely responsible for ensuring the proper segregation and labeling of all wastes. If any of the Waste is Not packaged properly, then Customer will be solely responsible for all costs associated with clean-up, transportation, treatment, and disposal of the Non-Conforming Waste by a company or companies permitted to clean-up, transport, treat, and dispose of such Non-conforming Waste.

## ATTACHMENT D Per Invoice Energy Charge

Stericycle uses an index-based surcharge that is adjusted monthly. Changes to the surcharge will be effective the first business day of each month. The surcharge will be based on the National U.S. Average 'On Highway' Diesel Fuel Price reported by the U.S. Department of Energy for the prior month to the adjustment.

The prices on these indexes are published by the U.S. Dept. of Energy and Stericycle is not responsible for the information provided.

<b>Stericycle Energy Charge Table (prices per gallon)</b>		
<i>At Least</i>	<b>But Less Than</b>	<b>Surcharge</b>
0	\$2.75	5.8%
\$2.76	\$3.00	6.3%
\$3.01	\$3.25	6.9%
\$3.26	\$3.50	7.4%
\$3.51	\$3.75	7.9%
\$3.76	\$4.00	8.5%
\$4.01	\$4.25	9.0%
\$4.26	\$4.50	9.6%
\$4.51	\$4.75	10.1%
\$4.76	\$5.00	10.7%
\$5.01	\$5.25	11.2%
\$5.26	\$5.50	11.7%
\$5.51	\$5.75	12.3%
\$5.76	\$6.00	12.8%

Table will continue using the same methodology as illustrated above for Diesel prices in excess of \$6.01  
Stericycle reserves the right to update or modify the fuel table without prior notice

# **Addendum to Customer Service Agreement**

Attachment #2

2018 - 2022 Stericycle Contracted Cost Comparison

	contracted					<i>proposed</i>			Annual Usage (drum)	2018 Annual Cost	2022 Anticipated Annual Cost	Cost Increase
	2018	2019	2020	2021	2022	increase \$	increase %					
	Pricing per 55 gal drum											
* Formalin	\$ 380	\$ 385	\$ 395	\$ 395	\$ 512	\$ 132	35%	38	\$ 14,440	\$ 19,456	\$ 5,016	
Xylene	\$ 90	\$ 105	\$ 125	\$ 150	\$ 239	\$ 149	165%	13	\$ 1,170	\$ 3,107	\$ 1,937	
Alcohols	\$ 90	\$ 105	\$ 125	\$ 150	\$ 239	\$ 149	165%	15	\$ 1,350	\$ 3,585	\$ 2,235	
Waste Oils	\$ 230	\$ 230	\$ 230	\$ 235	\$ 291	\$ 61	26%	16	\$ 3,680	\$ 4,656	\$ 976	
<b>Annual expense</b>	<b>\$ 105,821</b>	<b>\$ 128,816</b>	<b>\$ 179,968</b>	<b>\$ 126,014</b>								

\* 5 highest usage

Justification for Sole Source Form

To: Contract Review Committee

From: Earl Strotman, Facilities

Type of Purchase: (Check One)

- Non-Medical, Non-Surgical Equipment/Supplies >= \$25,000
- Data Processing/Telecommunication Goods >= \$25,000
- Medical/Surgical – Supplies/Equipment >= \$25,000
- Purchased Services >= \$350,000

<b>Total Cost \$:</b>	Total all-inclusive sum not to exceed \$200,000 per year (\$600,000).
<b>Vendor Name:</b>	Stericycle, Inc.
<b>Agenda Item:</b>	Consider Recommendation for Board of Directors Approval and Award of Hazardous Waste Disposal Contract to Stericycle, Inc., a Delaware Corporation.

**Statement of Need:** My department’s recommendation for sole source is based upon an objective review of the product/service required and appears to be in the best interest of SVMHS. The procurements proposed for acquisition through sole source are the only ones that can meet the district’s need. I know of no conflict of interest on my part or personal involvement in any way with this request. No gratuities, favors or compromising action have taken place. Neither has my personal familiarity with particular brands, types of equipment, materials or firms been a deciding influence on my request to sole source this purchase when there are other known suppliers to exist.

**Describe how this selection results in the best value to SVMHS. See typical examples below.**

Licensed or patented product or service. No other vendor provides this. Warranty or defect correction service obligations of the consultant. **Describe.**

Existing SVMHS equipment, inventory, custom-built information system, custom built data inventory system, or similar products or programs. **Describe.**

Uniqueness of the service. Failure to dispose of hazardous waste in the required time constrained manner has the potential of resulting in significant fines and penalties from both the California State Department of Toxic Substance Control and the County of Monterey Health Department. Stericycle is the only vendor able to deliver this service in time constrained and regulated manner (“90 days from first drop”).

SVMHS has established a standard for this manufacturer, supplier or provider and there is only one vendor. **Describe.**

Factory-authorized warranty service available from only this single dealer. Sole availability at the location required. **Describe.**

By signing below, I am attesting to the accuracy and completeness of this form.

Submitter Signature 

Date: 11 | 2022

***SVMH  
Balanced Scorecard***



***FY 2022 YTD December***



# Monthly Scorecard

## Service (30%)



Organizational Goals by Pillar	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	FY 2022 Act/Proj	TARGET	Var %		FY 2021 Baseline
I. Service											
Average of Inpatient HCAHPS Scores	72.4	78.8	75.6	77.4	77.1	72.1	75.6	75.1	0.7%		74.6
Emergency Room Press Ganey Score (*)	60.6	58.2	60.0	61.7	63.4	66.5	61.7	64.8	-4.8%		61.4
Average of Ambulatory HCAHPS Scores	88.0	91.3	87.6	94.7	89.4	91.1	90.3	91.6	-1.3%		91.1

### Notes / Assumptions:

- Source: Press Ganey
- Based on monthly **received date**
- Based on top box scores (highest response possible on the survey scale: Yes, Definitely Yes, Always)
- IP HCAHPS Score FY 2021 Baseline was 74.6. Rationale: Baseline = Threshold is based on FY 2021 Actuals. Target is +0.5 from baseline. Max is +1.0 from baseline.
- ER HCAHPS Score FY 2021 Baseline was 61.4. Rationale: Baseline = Threshold is based on FY 2021 Actuals. The Target at 64.8 is the midpoint between Threshold & Max. The Max Goal at 68.27 is the 50th percentile rank.  
(\* **Measurement period will be Quarter 4 for Fiscal Year 2022.**)
- Ambulatory HCAHPS Score FY 2021 Baseline was 91.1. Rationale: Baseline = Threshold is based on FY 2021 Actuals. Target is +0.5 from baseline. Max is +1.0 from baseline.

# Monthly Scorecard

## Quality & Safety Processes – ER (8%)



Organizational Goals by Pillar	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	FY 2022 Act/Proj	TARGET	Var %		FY 2021 Baseline
III. Quality & Safety Processes											
Emergency Room Efficiencies											
Median length of stay for non-admits (in minutes)	171.0	162.0	162.0	168.0	172.0	165.0	167.0	162.0	-3.1%		163.0
Median time from admit decision to time of admission to nursing unit (in minutes)	81.0	79.0	82.0	78.0	93.0	78.0	82.0	89.0	7.9%		90.0

Source: Meditech

**ER - LOS for Non-Admits in Minutes:** Data Criteria: Calculate the median LOS in minutes for ER Outpatients for each month & YTD for cases in ER (excludes inpatients and patients leaving against medical advice or left without being seen.) Rationale: Baseline = Threshold is based on FY 2021 Actuals. The Target is a 1 minute improvement from the Baseline, and the Max is a 2 minute improvement from the Baseline.

**ER - Time to Admit in Minutes:** Data Criteria: Calculate the median time for inpatients from admit decision to time of admission to nursing unit in minutes (includes observation cases). Rationale: Baseline = Threshold is based on FY 2021 Actuals. The Target is a 1 minute improvement from the Baseline, and the Max is a 2 minute improvement from the Baseline.

# Monthly Scorecard

## Quality & Safety Processes – OR (8%)



Organizational Goals by Pillar	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	FY 2022 Act/Proj	TARGET	Var %	FY 2021 Baseline
<b>Operating Room Efficiencies</b>										
Turnover Time (Wheels out / Wheels in) (in minutes)	28.2	27.5	28.1	28.2	27.9	28.3	28.0	29.5	5.0%	29.6
Percentage of 1st Case On Time Start Time	93.3%	97.7%	95.5%	95.6%	94.2%	92.4%	94.8%	89.0%	6.5%	91.6%

**Turnover Time Measurement:** Source is from the PICIS OR Nurse Record, calculate minutes elapsed between the wheels out & wheels in of the next case. Only cases where the time difference is less than or equal to 60 minutes will be included because breaks are often scheduled in a day. Due to MD availability, cases that exceed 60 threshold minutes will not count as a turnover. Excludes non-scheduled cases. Measurement applies to cases for the same physician and same room only. Data will be partitioned by actual date rather than previously scheduled date. **National benchmarks range from 25 to 38 minutes.** FY 2022 Goals are the same as prior year to continue high efficiency performance and strive to maintain sustainability at these levels. Planning to reduce minutes may cause patient safety risks and other concerns, especially considering the Covid-19 ongoing pandemic and the impact it has had in our hospital capacity as well as in our perioperative operations.

### Percentage of 1<sup>st</sup> case On Time Start Time

- Source is from PICIS for 1st scheduled case of the day in each OR room where the scheduled time is between 07:00 AM and 08:59 AM
- Cases in which the patient is Wheeled In at least zero minutes prior to the case
- **National benchmark goals range from 70% to 80%**
- FY 2022 Goals are the same as prior year to continue high efficiency performance and strive to maintain sustainability.

# Monthly Scorecard

## Quality & Safety Processes – HAC & Hand Hygiene(4%)



Organizational Goals by Pillar	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	FY 2022 Act/Proj	TARGET	Var %	FY 2021 Baseline
<b>Hospital Acquired Conditions</b>										
CLABSI SIR (Standard Infection Ratio)	0.00			0.63			0.31	0.30	-4.5%	0.11
# of CLABSI EVENTS	0	0	0	1	0	0				1
CAUTI SIR (Standard Infection Ratio)	0.00			0.61			0.31	0.47	35.1%	0.57
# of CAUTI EVENTS	0	0	0	0	1	0				5
CDI SIR (Standard Infection Ratio)	0.51			0.31			0.41	0.45	9.3%	0.19
# of CDI EVENTS	0	2	1	0	1	1				4
<b>Hospital Acquired Conditions Average</b>	0.17			0.52			0.34	0.41	15.9%	0.29
<b>Hand Hygiene</b> (Percentage of successful Hand Hygiene observations)	80.1%	79.7%	90.9%	81.0%	94.0%	91.0%	86.1%	75.0%	14.8%	78.0%



### Hospital Acquired Conditions

- > Source: National Healthcare Safety Network (NHSN) & Medline Interface
- > Hospital Acquired Conditions will be measured **quarterly**
- > **Rationale for Targets:** The FY 2022 Target (0.41) is set to be an improvement from the prior year target (0.49)
- > Acronyms:
  1. CLABSI (Central Line Associated Bloodstream Infection)
  2. CAUTI (Catheter Associated Urinary Tract Infection)
  3. CDI (Clostridium Difficile Infection)

### Hand Hygiene

- > Source: MyRounding Tool populated by SVMHS staff / leaders direct observations
- > Hand Hygiene will be measured **monthly**
- > **Rationale for Targets:** Improve Hand Hygiene performance and meet recommended metrics by Leapfrog and JC/CMS

# Monthly Scorecard

## Finance (20%)



Organizational Goals by Pillar	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	FY 2022 Act/Proj	TARGET	Var %		FY 2021 Baseline
<b>IV. Finance</b>											
<b>Income from Operations (Normalized) (\$ in Millions)</b>	\$7,939	\$9,298	\$5,782	\$4,561	\$6,597	\$11,434	\$91,222	\$68,853	32.5%		\$86,392
<i>Operating Margin (Normalized)</i>	16.3%	18.1%	12.3%	10.1%	13.9%	21.5%	15.4%	12.5%	23.1%		15.1%

- Target Methodology is based on SVMH's 100% of FY 2022 Board Approved Annual Operating Budget

# Monthly Scorecard

## Growth (10%)



Organizational Goals by Pillar	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	FY 2022 Act/Proj	TARGET	Var %	FY 2021 Baseline
V. Growth										
Increase % of patients adopting of EPIC MyChart to →	37.1%	37.6%	38.2%	39.1%	39.5%	39.9%	39.9%	40.0%	-0.3%	36.5%
Implement eConsult in a Number of Specialties	0	0	0	0	1	1	1	2	-50.0%	-
eConsult Patient Utilization	0	0	0	0	8	20	28	100	-72.0%	-

- **I. MyChart adoption for SVMC:** Source is the EPIC SVMC system. Increasing from 36.5% to 40% - this continues to be a significant focus as we expand functionality for patient engagement and develop MyChart as our digital front door for the clinic. Measurement will be based on 12 months ending June 30, 2022. Monthly reporting will be based on a rolling 12 month period.
- **II. & III. SVMC eConsult development (Number of Specialties & Patient Volume):** Source is the EPIC SVMC system. Increasing access to specialty services by providing a mechanism for our specialty care physicians to support primary care through electronic consults facilitated through Epic. Primary care MDs submit specified data to a specialist through Epic and receive a plan/recommendation for care that they can implement or the specialist will request to see the patient. The first specialty we are targeting is **Dermatology**, followed by **Infectious Disease** and **Cardiology**. The functionality exists in Epic to support the workflows but it will require program and protocol development that we will begin in the next several weeks.
  - *Dermatology went live effective November 2021*
  - *Infectious Disease will go into effect January 2022*
  - *Cardiology will go into effect February 2022*

# Monthly Scorecard

## Community (5%)



Organizational Goals by Pillar	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	FY 2022 Act/Proj	TARGET	Var %	FY 2021 Baseline
<b>VI. Community</b>										
Improve the patient experience and increase access to hospital services as measured by the number of hospital-based clinical departments that accommodate online appointment scheduling							0	2	-100.0%	-

### Targeted Goals for online based scheduling:

- Creation/adaptation of technology tailored to the needs of the SVMHS department that is implementing online scheduling
- Successful implementation and launch of system
- Marketing campaign regarding the ability to schedule appointments online
- Ongoing monitoring of system
- Monthly reporting on usage rates, customer satisfaction, and other data collected by the system
- Source is based on management reporting of final results for each clinical department



**Salinas Valley Memorial Hospital**  
 Monthly Balanced Scorecard (BSC) Summary  
 FY 2021 : as of 12/31/21



Organizational Goals by Pillar		FY 2022 Act/Proj	TARGET	Var %		FY 2021 Baseline	
Weight 30%	<b>I. Service</b>						
	Average of Inpatient HCAHPS Scores	75.6	75.1	0.7%		74.6	
	Emergency Room Press Ganey Score	61.7	64.8	-4.8%		61.4	
	Average of Ambulatory HCAHPS Scores	90.3	91.6	-1.3%		91.1	
15%	<b>II. People</b>						
	Annual Employee Indicator Survey	-	4.39			4.36	
20%	<b>III. Quality &amp; Safety Processes</b>						
	Emergency Room Efficiencies						
	Median length of stay for non-admits (in minutes)	167.0	162.0	-3.1%		163.0	
	Median time from admit decision to time of admission to nursing unit (in minutes)	82.0	89.0	7.9%		90.0	
	Operating Room Efficiencies						
	Turnover Time (Wheels out / Wheels in) (in minutes)	28.0	29.5	5.0%		29.6	
	Percentage of 1st Case On Time Start Time	94.8%	89.0%	6.5%		91.6%	
	Hospital Acquired Conditions Average	0.34	0.41	15.9%		0.29	
	Hand Hygiene (Percentage of successful Hand Hygiene observations)	86.1%	75.0%	14.8%		78.0%	
20%	<b>IV. Finance</b>						
	Income from Operations (Normalized) (\$ in Millions)	\$91,222	\$68,853	32.5%		\$86,392	
	Operating Margin (Normalized)	15.4%	12.5%	23.1%		15.1%	
10%	<b>V. Growth</b>						
	Increase % of patients adopting of EPIC MyChart to →	39.9%	40.0%	-0.3%		36.5%	
	Implement eConsult in a Number of Specialties	1	2	-50.0%		-	
	eConsult Patient Utilization	28	100	-72.0%		-	
5%	<b>VI. Community</b>						
	Improve the patient experience and increase access to hospital services as measured by the number of hospital-based clinical departments that accommodate online appointment scheduling	0	2	-100.0%		-	



# *Questions / Comments?*



# Financial Performance Review

## January 2022

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**Augustine Lopez**  
**Chief Financial Officer**



# Consolidated Financial Summary

## For the Month of January 2022

### Profit/Loss Statement

\$ in Millions	For the Month of January 2022				
			Variance fav (unfav)		
	Actual	Budget	\$VAR	%VAR	
Operating Revenue	\$ 59.4	\$ 53.2	\$ 6.2	11.7%	
Operating Expense	\$ 55.0	\$ 52.3	\$ (2.7)	-5.2%	
<b>Income from Operations*</b>	<b>\$ 4.4</b>	<b>\$ 0.9</b>	<b>\$ 3.5</b>	<b>388.9%</b>	
Operating Margin %	7.3%	1.8%	5.5%	305.56%	
Non Operating Income**	\$ (2.0)	\$ 1.1	\$ (3.1)	-281.8%	
<b>Net Income</b>	<b>\$ 2.4</b>	<b>\$ 2.0</b>	<b>\$ 0.4</b>	<b>20.0%</b>	
Net Income Margin %	4.0%	3.9%	0.1%	2.6%	

**\* Income from Operations includes:**

**\$1.9M** AB113 Intergovernmental Transfer Payment (FY 20-21)

**\$1.9M Total Normalizing Items, Net**

\*\*Non-operating income was below budget predominately due to mark-to-market adjustments in investment portfolios.

# Consolidated Financial Summary

## For the Month of January 2022 - Normalized

### Profit/Loss Statement

\$ in Millions	For the Month of January 2022					
			Variance fav (unfav)			
	Actual	Budget	\$VAR	%VAR		
Operating Revenue	\$ 57.5	\$ 53.2	\$ 4.3	8.1%		
Operating Expense	\$ 55.0	\$ 52.3	\$ (2.7)	-5.2%		
<b>Income from Operations</b>	<b>\$ 2.5</b>	<b>\$ 0.9</b>	<b>\$ 1.6</b>	<b>177.8%</b>		
<i>Operating Margin %</i>	4.2%	1.8%	2.4%	133.3%		
Non Operating Income	\$ (2.0)	\$ 1.1	\$ (3.1)	-281.8%		
<b>Net Income</b>	<b>\$ 0.5</b>	<b>\$ 2.0</b>	<b>\$ (1.5)</b>	<b>-75.0%</b>		
<i>Net Income Margin %</i>	0.8%	3.9%	-3.1%	-79.5%		

#### Operating Performance highlights:

- Total Net Revenues were \$4.3M (8%) above budget
- Admissions and ADC were above budget by 10% and 12%, respectively
- The average revenue collection rate was 3% favorable to budget

The above was partially offset by the following:

- Payor mix – Commercial Insurance was 11% below budget
- OP volume was below by 15%
- The Contract labor was at a record high at \$2.8M coupled with high utilization of overtime which was needed to support the dramatic increase in COVID patient activity and acuity.

# Consolidated Financial Summary

## Year-to-Date January 2022

### Profit/Loss Statement

\$ in Millions	FY 2022 YTD January				
	Actual	Budget	Variance fav (unfav)		
			\$VAR	%VAR	
Operating Revenue	\$ 399.1	\$ 369.5	\$ 29.6	8.0%	
Operating Expense	\$ 368.6	\$ 361.6	\$ (7.0)	-1.9%	
<b>Income from Operations*</b>	<b>\$ 30.5</b>	<b>\$ 7.9</b>	<b>\$ 22.6</b>	<b>286.1%</b>	
Operating Margin %	7.6%	2.1%	5.5%	261.9%	
Non Operating Income**	\$ 3.0	\$ 7.6	\$ (4.6)	-60.5%	
<b>Net Income</b>	<b>\$ 33.5</b>	<b>\$ 15.5</b>	<b>\$ 18.0</b>	<b>116.1%</b>	
Net Income Margin %	8.4%	4.2%	4.2%	100.0%	

**\* Income from Operations includes:**

\$1.9M AB113 Intergovernmental Transfer Payment (FY 20-21)

<\$1.0M> Medi-Cal Cost Report Final Settlement (FY18)

\$0.5M AB113 Intergovernmental Transfer Payment (FY 19-20)

**\*\* Non Operating Income includes:**

\$1.1M Doctors on Duty Forgiven Paycheck Protection Program Loan

**\$2.5M Total Normalizing Items, Net**

# Consolidated Financial Summary

## Year-to-Date December 2021 - Normalized

### Profit/Loss Statement

\$ in Millions	FY 2022 YTD January				
			Variance fav (unfav)		
	Actual	Budget	\$VAR	%VAR	
Operating Revenue	\$ 397.7	\$ 369.5	\$ 28.2	7.6%	
Operating Expense	\$ 368.6	\$ 361.6	\$ (7.0)	-1.9%	
<b>Income from Operations</b>	<b>\$ 29.1</b>	<b>\$ 7.9</b>	<b>\$ 21.2</b>	<b>268.4%</b>	
<i>Operating Margin %</i>	7.3%	2.1%	5.2%	247.6%	
Non Operating Income	\$ 1.9	\$ 7.6	\$ (5.7)	-75.0%	
<b>Net Income</b>	<b>\$ 31.0</b>	<b>\$ 15.5</b>	<b>\$ 15.5</b>	<b>100.0%</b>	
<i>Net Income Margin %</i>	7.8%	4.2%	3.6%	85.7%	

# SVMH Financial Highlights January 2022

Gross Revenues were favorable

- **Gross Revenues** were **3% favorable** to budget
- **IP gross revenues** were **11% favorable** to budget
- **ED gross revenues** were **22% above** budget

- **OP gross revenues** were **15% unfavorable** to budget in the following areas:

- Infusion Therapy
- Other OP Pharmacy
- Surgery
- Cardiology
- Radiology
- Other OP Services

- **Commercial:** **11% below** budget
- **Medicaid:** **3% above** budget
- **Medicare:** **15% above** budget

Payor Mix – **unfavorable** to budget

Total Normalized Net Patient Revenues were \$49.0M, which was favorable to budget by \$3.0M or 6.6%

# Financial Summary – January 2022



## 1) Higher than expected Inpatient business:

- Average daily census was at 129, 12% above budget of 115

## 2) Total admissions were 10% (88 admits) above budget

- ER admissions were 16% above budget (103 admits)
- ER admissions (including OB ED) were 87% of total acute admissions

## 3) ER Outpatient visits were above budget by 43% (1,273 visits)

## 4) OP Observation cases were 16% (25 cases) below budget at 131

## 5) Medicare Traditional ALOS CMI adjusted 2% favorable at 2.4 days with a Case Mix Index of 1.8



## 6) Lower than expected Outpatient business:

- Predominantly due to lower than expected volumes in Outpatient Surgery, Infusion Therapy, Cardiology, Radiology, and Other Outpatient Services

## 7) Outpatient Surgeries were 50% (155 cases) below budget predominately in General Surgery, Orthopedics, and Gynecology

## 8) Inpatient Surgeries cases were 12% (17 cases) below budget

## 9) Deliveries were 3% (4 deliveries) below budget at 140

## 10) Total Acute ALOS was 2% unfavorable at 4.3 vs 4.2 days budgeted



# COVID Inpatient Discharge Cases

## Payor Mix Analysis

### February 2021 thru January 2022

Payor	Feb 21	Mar 21	Apr 21	May 21	Jun 21	July 21	Aug 21	Sep 21	Oct 21	Nov 21	Dec 21	Jan 22
Medicare	50	9	2	2	1	1	10	11	12	5	18	82
Medi-Cal	23	12	1	2	8	3	19	11	10	6	12	44
Commercial	13	5	5	2	1	9	14	10	7	11	11	37
Other	3	1	1			1	3	1		1		4
<b>Grand Total</b>	<b>89</b>	<b>27</b>	<b>9</b>	<b>6</b>	<b>10</b>	<b>14</b>	<b>46</b>	<b>33</b>	<b>29</b>	<b>23</b>	<b>41</b>	<b>167</b>

COVID Inpatient cases increased during January compared to prior month.

Note: COVID Criteria is based on any DX U07.1 diagnosis code

# CMI – All Discharges (with & without COVID)

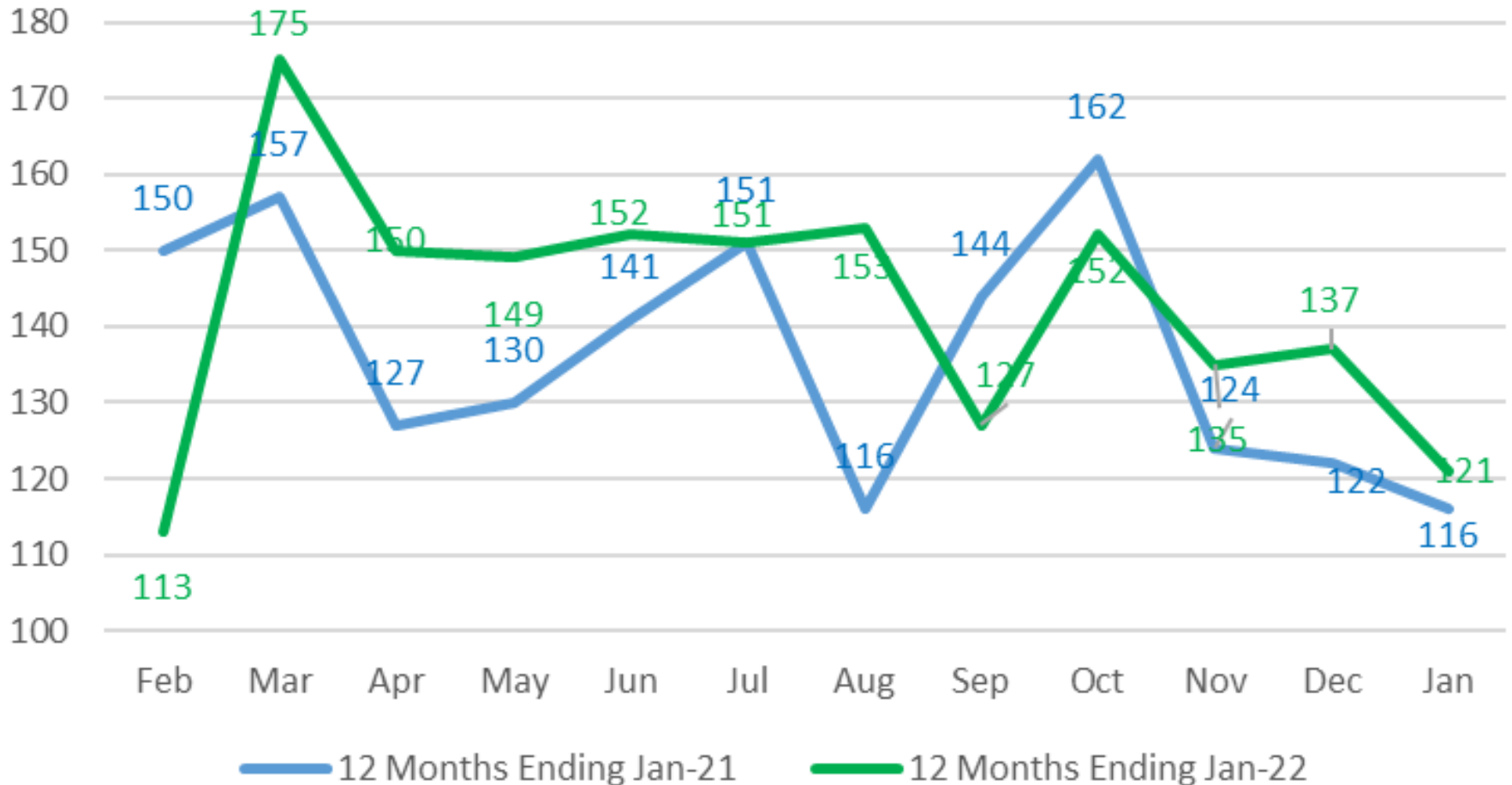
## Based on Discharges

### 12 months ended January 2022

All Payors Month	All Discharges				COVID Discharges Only				Discharges Excluding COVID			
	All Payor CMI	Discharges	ADC	ALOS	All Payor CMI	Discharges	ADC	ALOS	All Payor CMI	Discharges	ADC	ALOS
2/28/2021	1.77	767	119	4.4	2.36	89	27	8.4	1.70	678	92	3.8
3/31/2021	1.74	875	116	4.1	3.11	27	11	12.8	1.69	848	105	3.8
4/30/2021	1.59	824	104	3.8	1.92	9	1	3.7	1.59	815	103	3.8
5/31/2021	1.70	816	100	3.8	2.19	7	1	5.1	1.69	809	99	3.8
6/30/2021	1.64	826	100	3.6	2.04	10	2	5.9	1.63	816	98	3.6
7/31/2021	1.66	892	108	3.8	2.04	14	2	3.4	1.65	878	107	3.8
8/31/2021	1.67	867	107	3.8	2.12	46	8	5.4	1.64	821	99	3.7
9/30/2021	1.60	843	109	3.9	2.88	33	13	11.5	1.55	810	96	3.6
10/31/2021	1.65	828	100	3.7	2.46	29	6	6.8	1.63	799	93	3.6
11/30/2021	1.60	917	121	4.0	2.15	23	4	5.0	1.58	894	117	3.9
12/31/2021	1.60	963	121	3.9	1.89	41	7	5.2	1.59	922	114	3.8
1/31/2022	1.63	950	127	4.1	1.87	167	28	5.1	1.57	783	99	3.9
<b>Total</b>	<b>1.65</b>	<b>10,368</b>	<b>111</b>	<b>3.9</b>	<b>2.25</b>	<b>495</b>	<b>9</b>	<b>6.6</b>	<b>1.63</b>	<b>9,873</b>	<b>102</b>	<b>3.8</b>

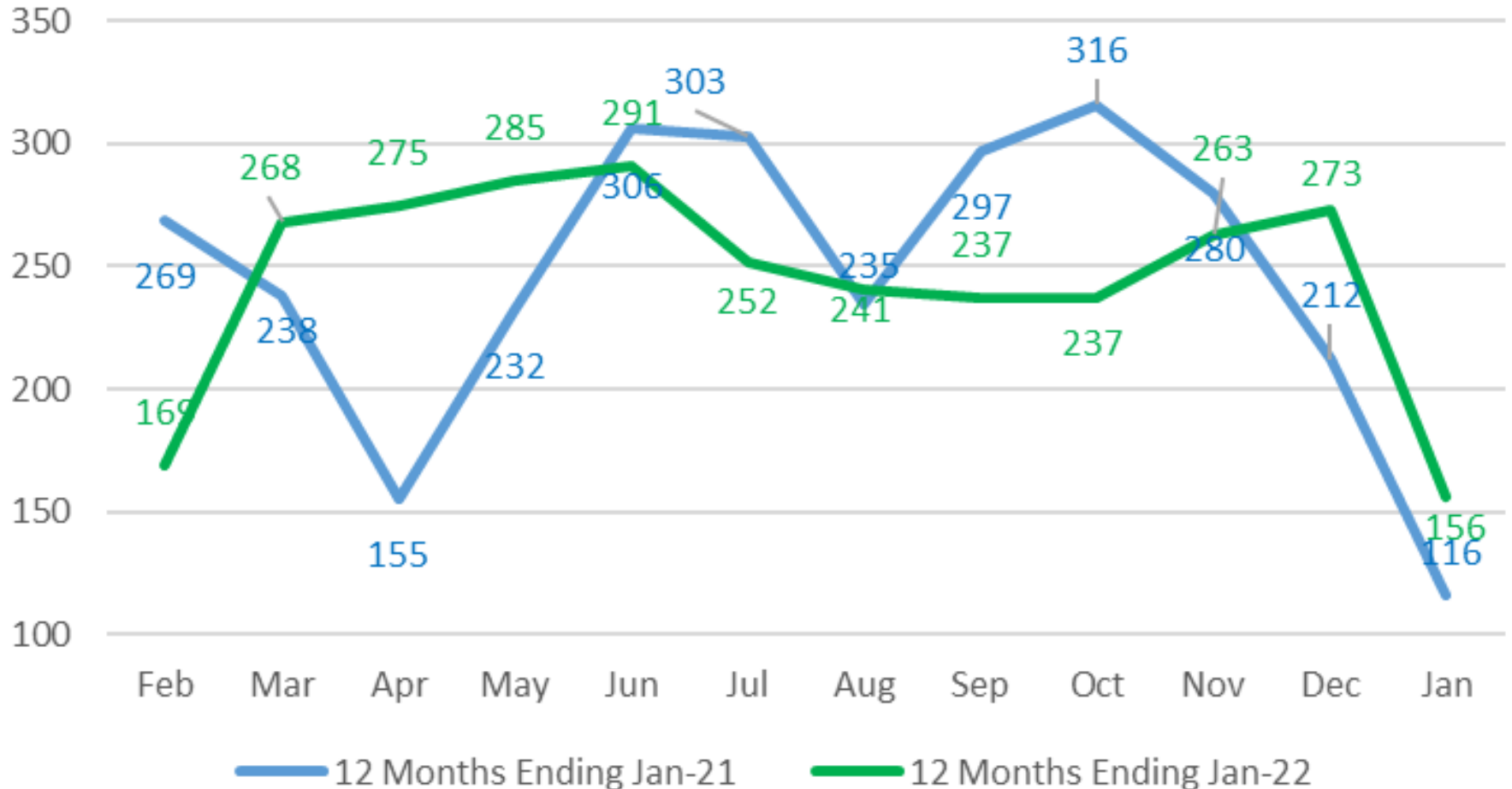
# IP Surgery Cases – January 2022

## IP Surgery Cases



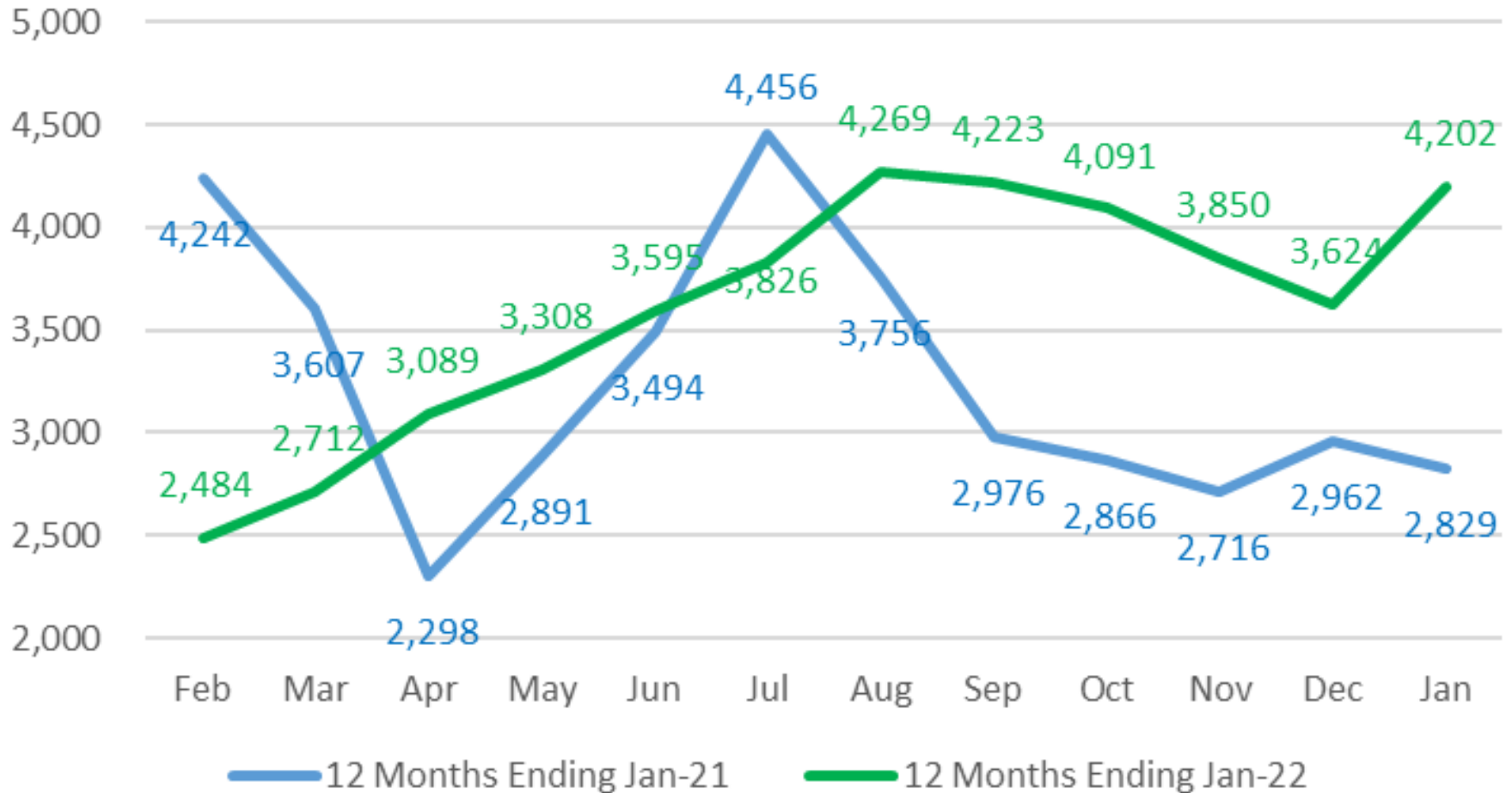
# OP Surgery Cases – January 2022

## OP Surgery Cases



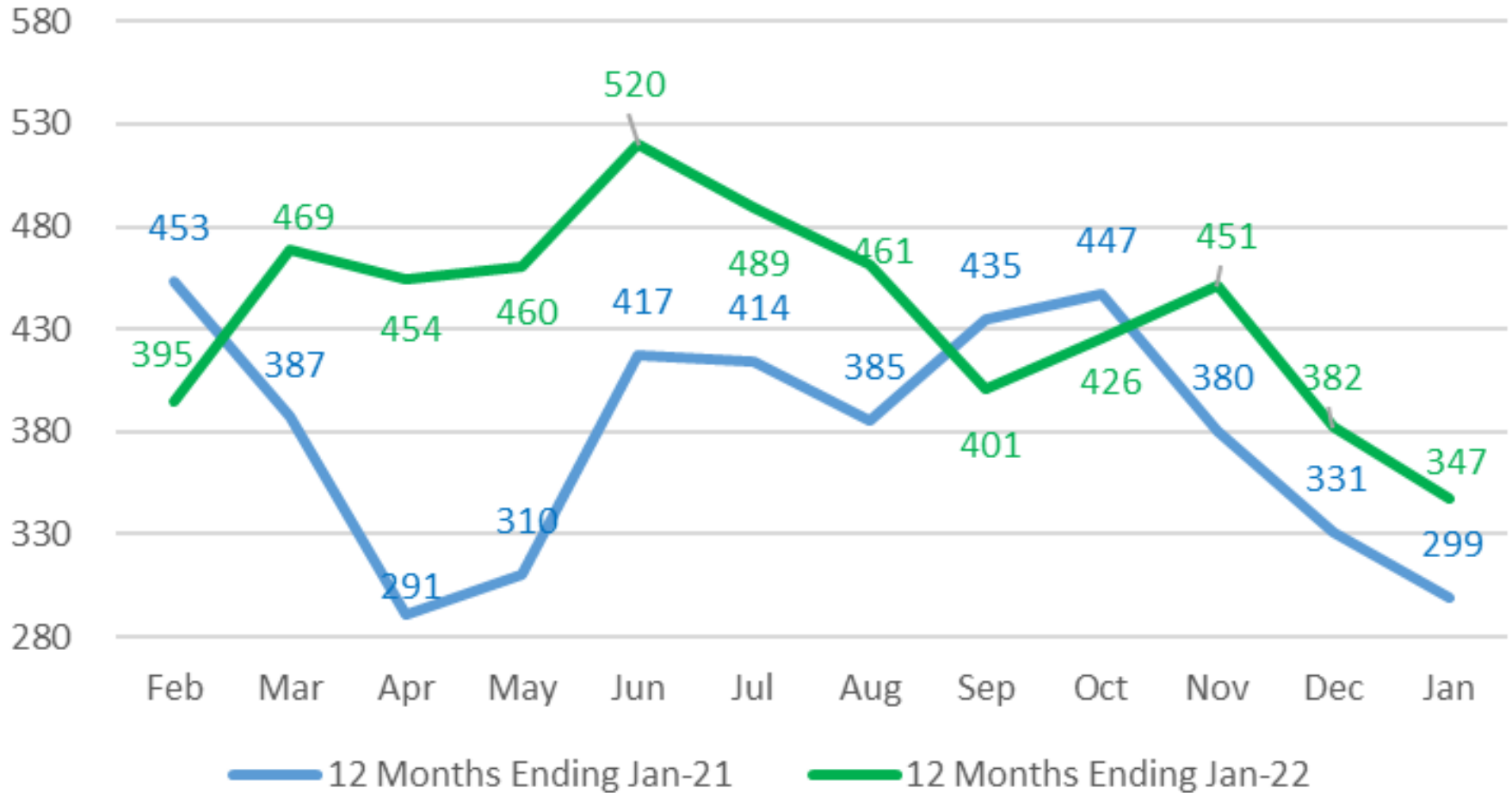
# ER OP Visits – January 2022

ER OP Visits



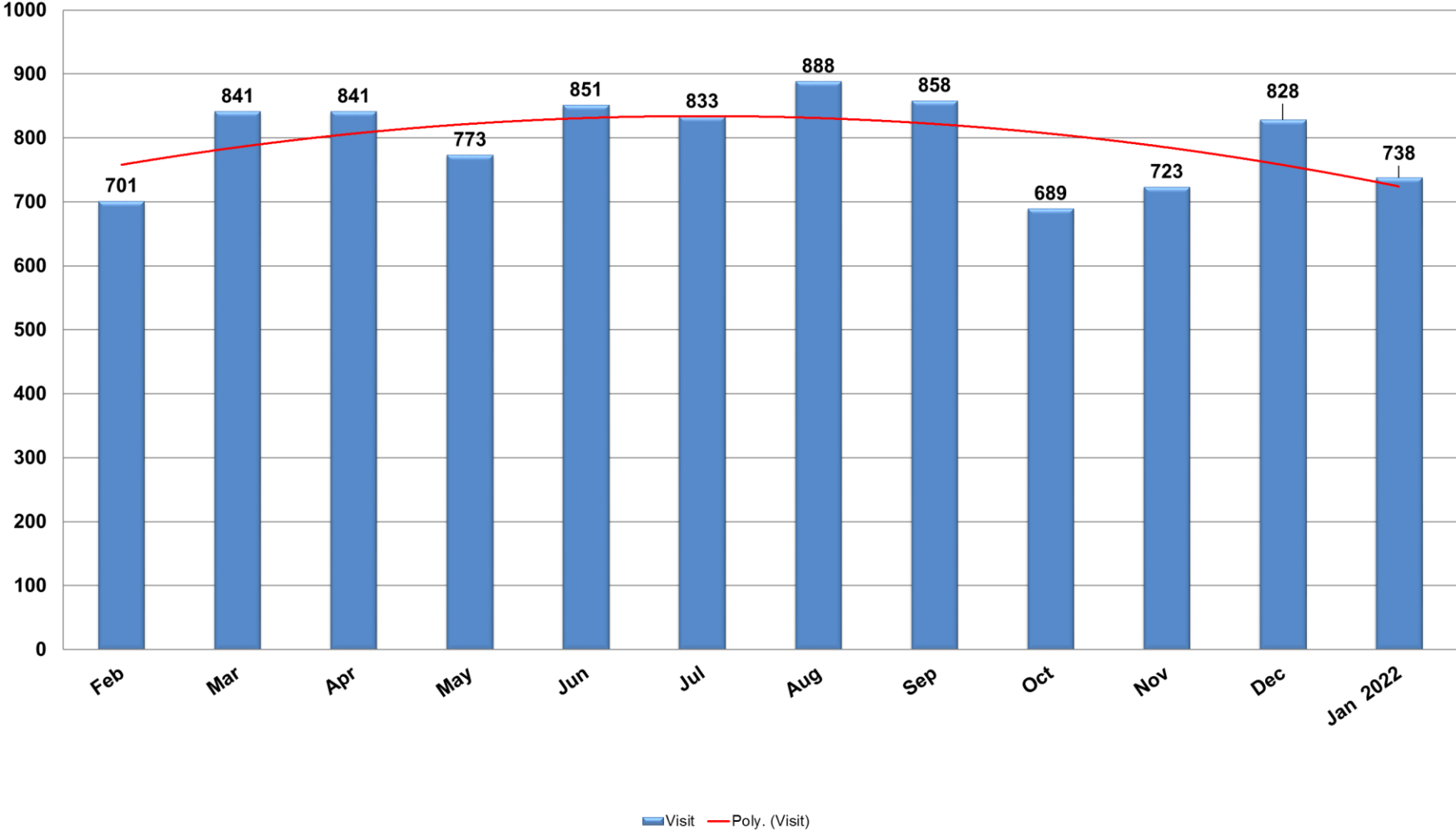
# Cath Lab – January 2022

Cath Lab



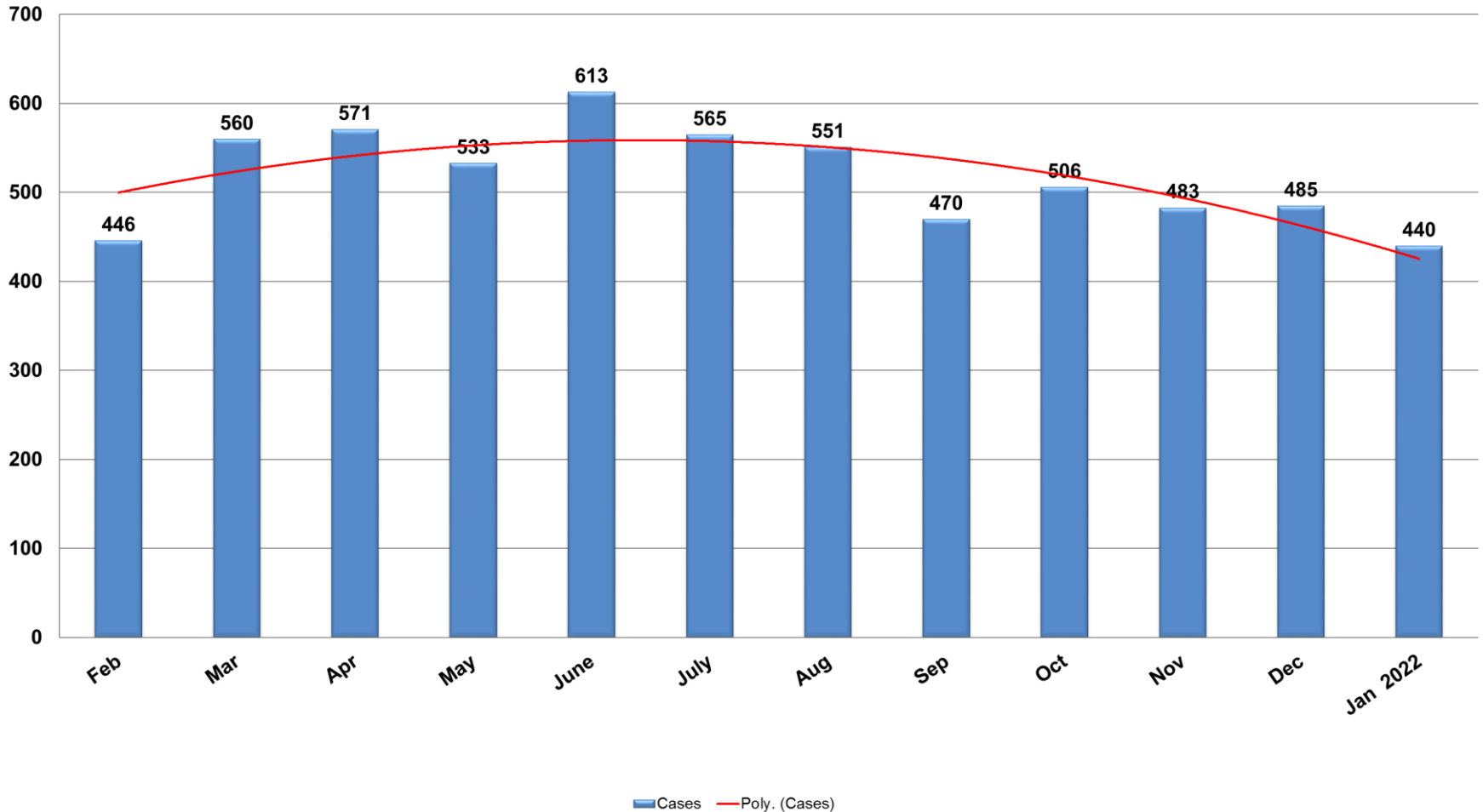
# OP Infusion Service Line

OP Infusion - Rolling 12 Month Trend  
(Includes Botox)  
Feb 2021 thru Jan 2022



# Cardiac Diagnostic O/P Center (CDOC)

CDOC Cases - Rolling 12 Month Trend  
Feb 2021 thru Jan 2022



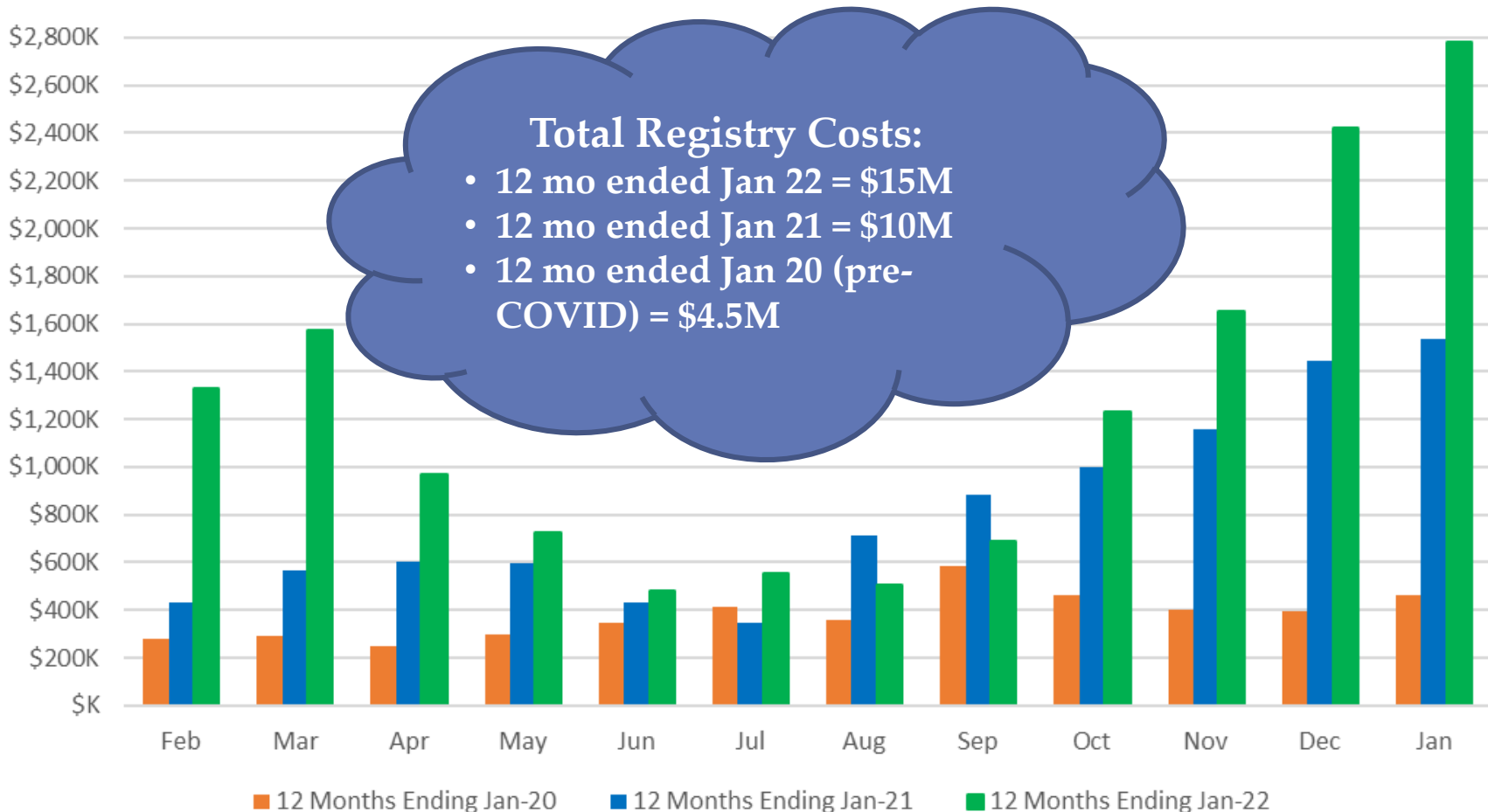


# Labor Productivity – January 2022

- 1. Worked FTEs:** During the month of January, Worked FTEs on a PAADC basis were **0.9%** unfavorable at **6.71** with a target of **6.65**. *When reviewed on a unit by unit level, the variance was 1.2 FTEs negative with the variance for salaries, wages and benefits valued at \$13k negative.* The impact of COVID patients coupled with volume fluctuations has contributed to the staffing challenges. We also continued to have hiring challenges related to the Staff Covid Vaccine Mandate. Worked FTEs increased to 1,472 in January from 1,418 in December.
- 2. Paid FTEs:** On a PAADC basis Paid FTEs were **0.7%** unfavorable to budget at **7.92 actual vs. 7.86 budget**. The key driver being high/variable volumes. Paid FTEs increased from 1,681 in December to 1,736 in January.

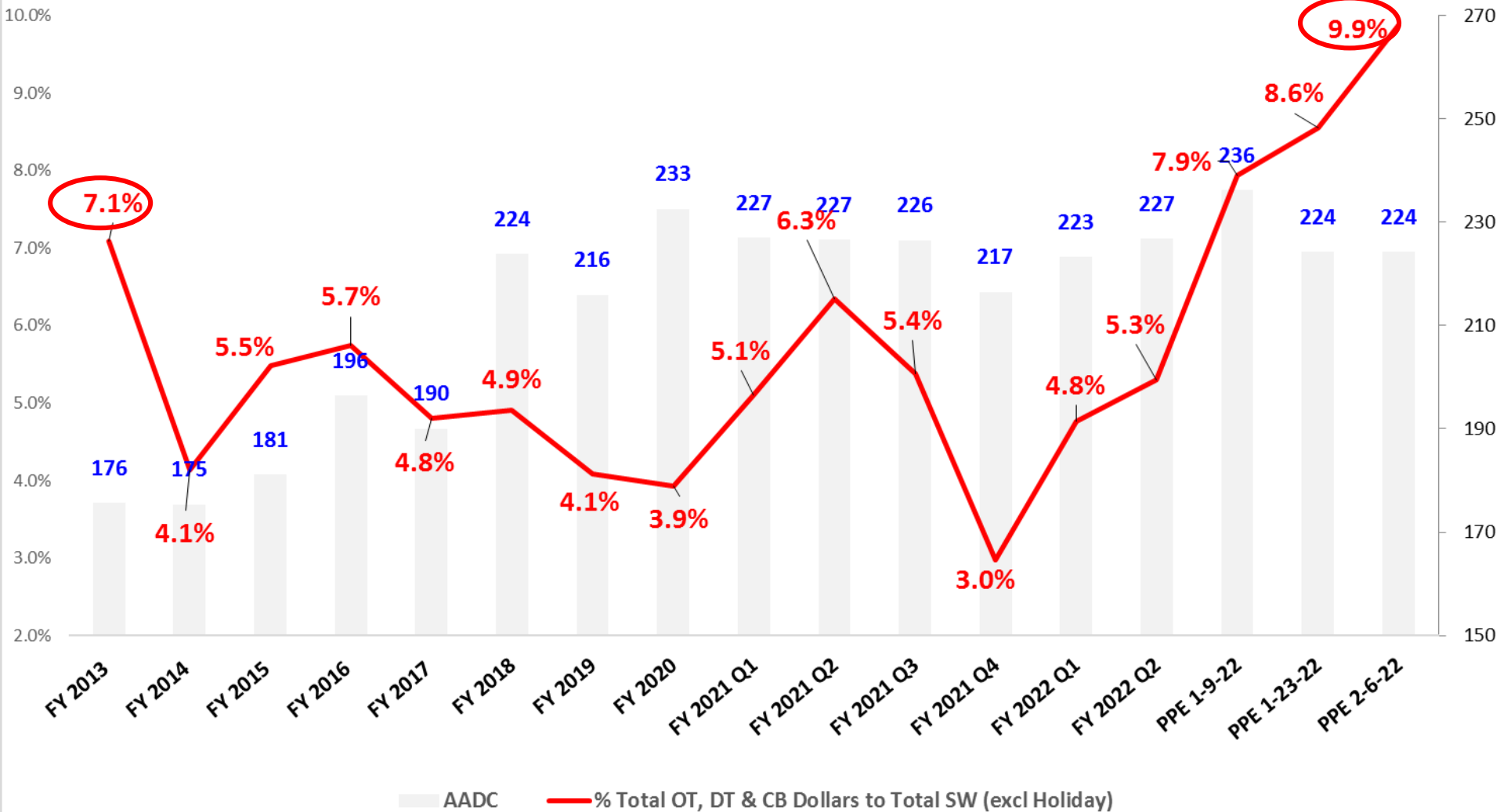
# Registry – January 2022

Registry Dollars  
(\$ in thousands)

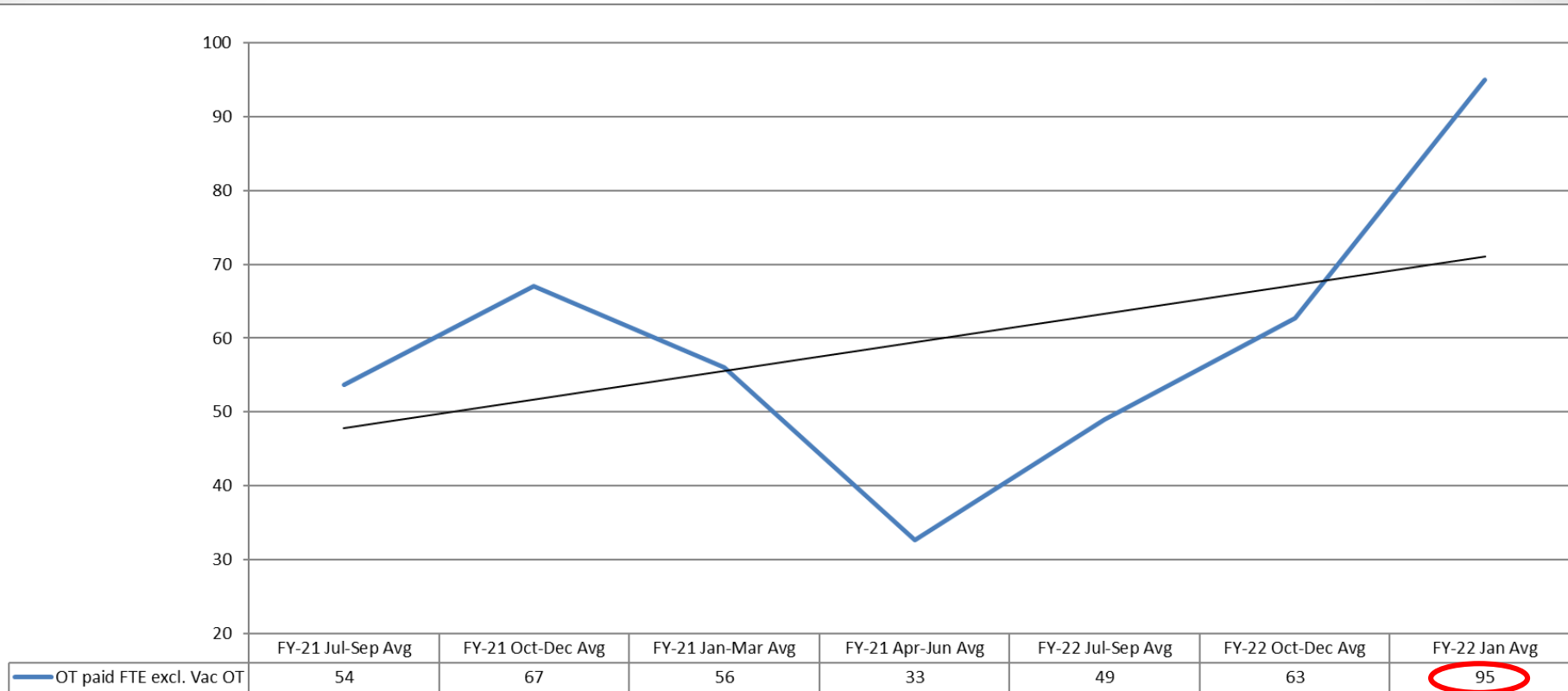


# % of Total OT, DT & CB Dollars to Total S&W

## Updated Thru PPE 2-6-22



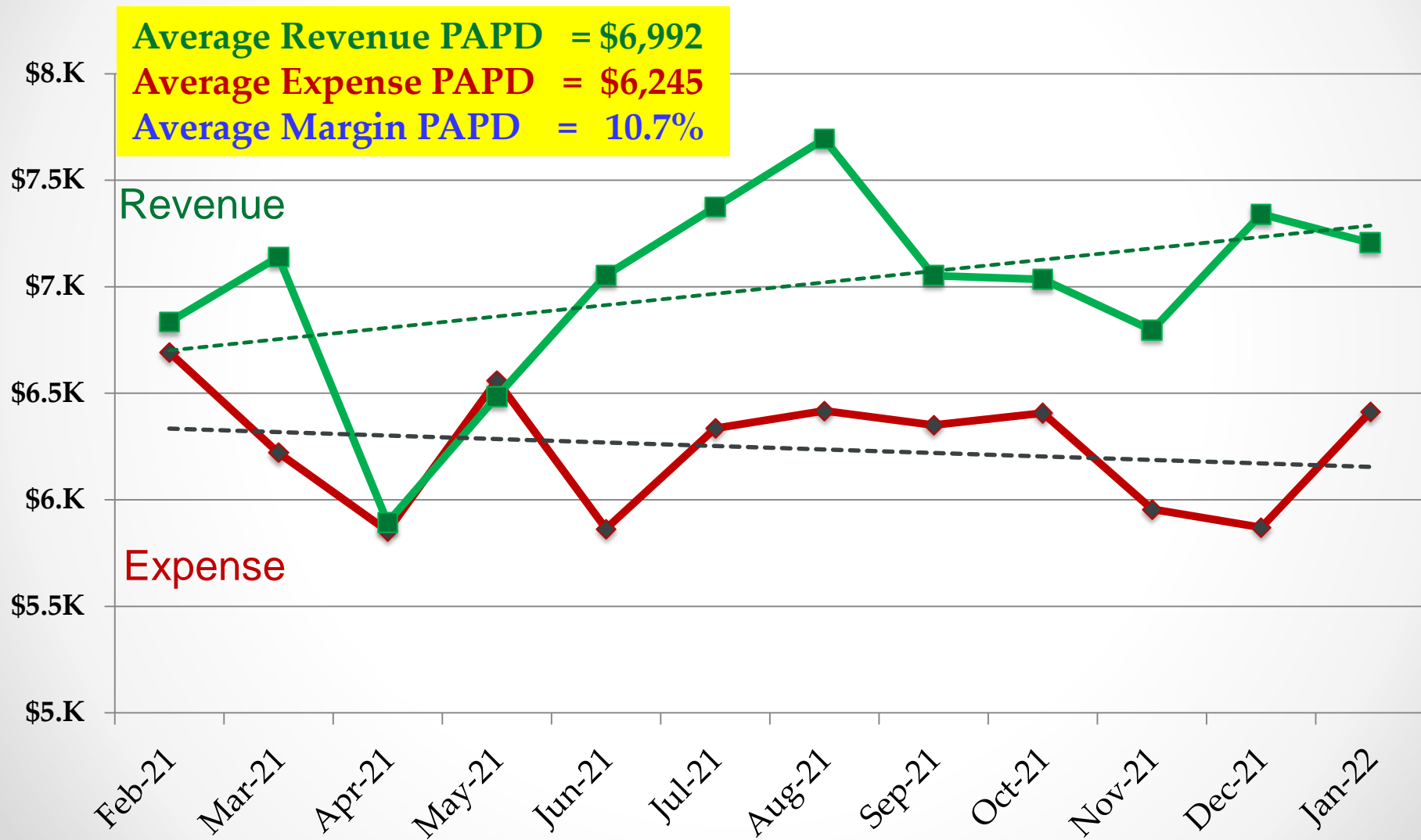
# Overtime Paid FTEs



**Note that overtime FTEs exclude holiday pay**

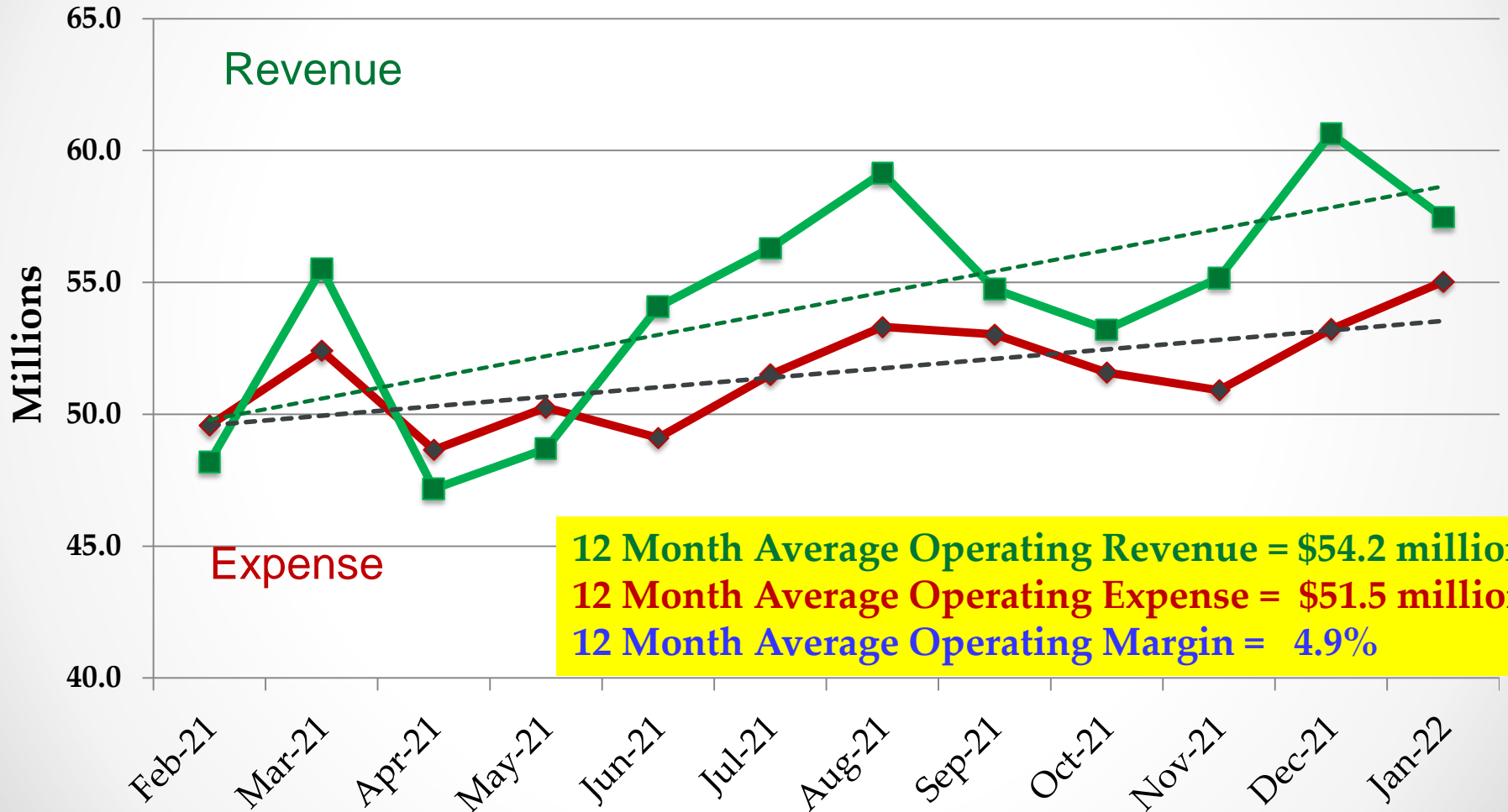
# SVMH Revenues & Expenses Per Adjusted Patient Day (Normalized)

Rolling 12 Months: February 21 to January 22



# SVMHS Operating Revenues & Expenses (Normalized)

Rolling 12 Months: February 21 to January 22



# SVMHS Key Financial Indicators

	YTD	SVMHS		S&P A+ Rated		YTD	
Statistic	Jan-22	Target	+/-	Hospitals	+/-	Jan-21	+/-
Operating Margin*	7.3%	9.0%		4.0%		7.6%	
Total Margin*	7.8%	10.8%		6.6%		10.5%	
EBITDA Margin**	11.3%	13.4%		13.6%		11.7%	
Days of Cash*	379	305		249		347	
Days of Accounts Payable*	45	45		-		50	
Days of Net Accounts Receivable***	52	45		49		55	
Supply Expense as % NPR	13.1%	15.0%		-		12.9%	
SWB Expense as % NPR	51.1%	53.0%		53.7%		53.8%	
Operating Expense per APD*	6,239	4,992		-		6,193	

\*These metrics have been adjusted for normalizing items

\*\*Metric based on Operating Income (consistent with industry standard)

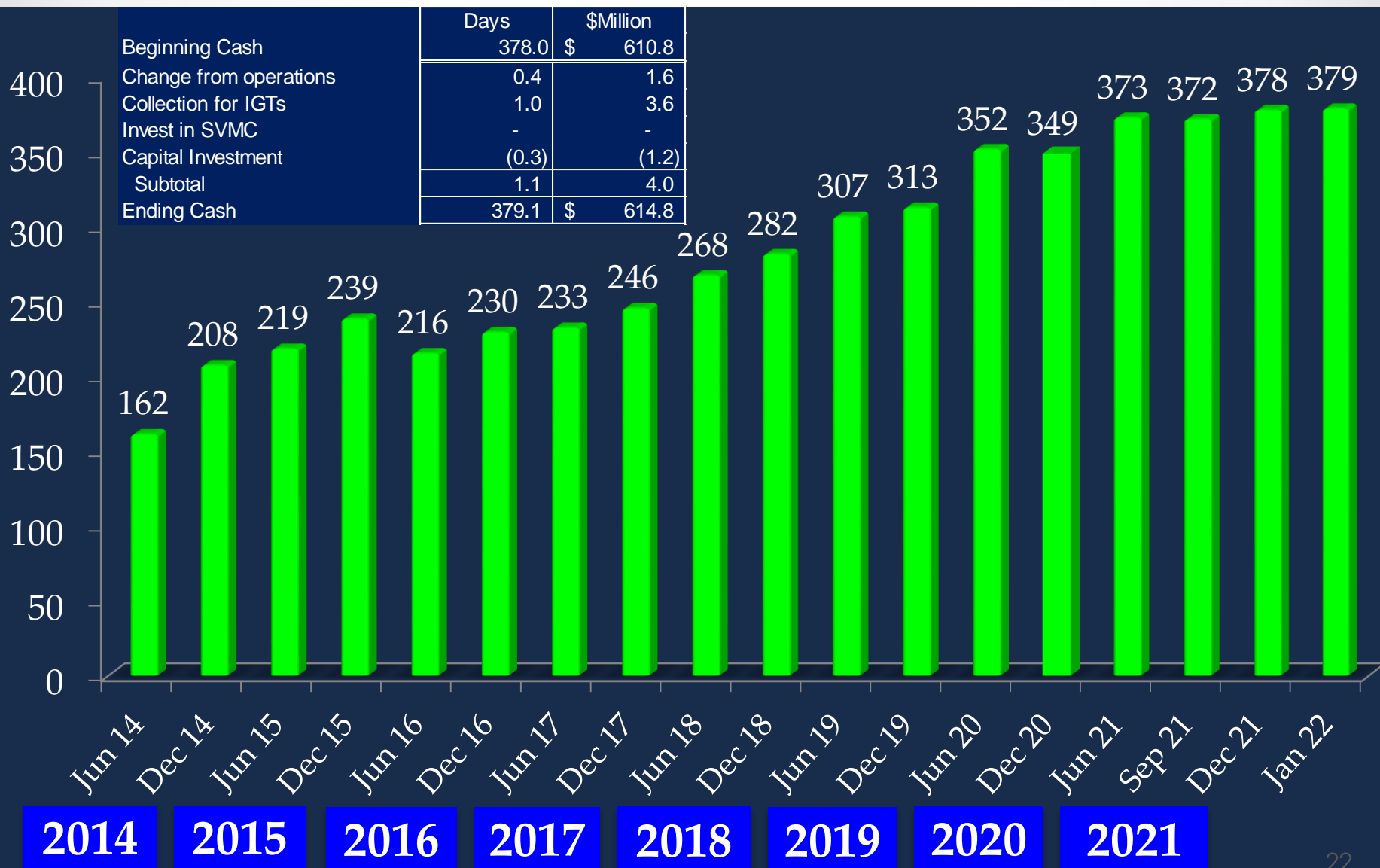
\*\*\*Metric based on 90 days average net revenue (consistent with industry standard)

Days of Cash and Accounts Payable metrics have been adjusted to **exclude** accelerated insurance payments (COVID-19 assistance)

# Salinas Valley Memorial Healthcare System

Days Cash on Hand = 379 Days (\$615M)

January 2022



2014

2015

2016

2017

2018

2019

2020

2021



# ASSETS WHOSE USE IS LIMITED

		<u>January-22</u>		<u>YTD</u>
Beginning balance	\$	148,277,441	\$	143,257,278
Investment income or (loss)		(1,210,300)		(2,190,137)
Transfer		1,000,000		7,000,000
Ending balance	\$	148,067,141	\$	148,067,141

# ROUTINE CAPITAL EXPENDITURES Through January 2022

Fiscal Month	2021-22 Approved Budget *	Total Purchased Expenditures	Remaining	Project	Amount
July	1,558,333	764,068	794,265		
August	1,558,333	840,566	1,512,033	Roof Replacement Project	131,184
September	1,558,333	2,259,376	810,990	321 Romie Elevator Upgrade	92,513
October	1,558,333	535,000	1,834,323	Nurse Call Replacement System	67,743
November	1,558,333	1,388,043	2,004,614	Other CIP	47,554
December	1,558,333	1,351,043	2,211,904	Total Improvements	338,993
January	1,558,333	788,483	2,981,755		
February	1,558,333		4,540,088	Sleep Center Information System Replacement	252,680
March	1,558,333		6,098,421	Magview Mammography Reporting Software	123,642
April	1,558,333		7,656,755	IT Equipment	50,191
May	1,558,333		9,215,088	Other Equipment	22,977
June	1,558,333		10,773,421	Total Equipment	449,489
<b>YTD TOTAL</b>	<b>18,700,000</b>	<b>7,926,579</b>	<b>10,773,421</b>	<b>Grand Total</b>	<b>788,483</b>

# *QUESTIONS / COMMENTS*

SALINAS VALLEY MEMORIAL HOSPITAL  
SUMMARY INCOME STATEMENT  
January 31, 2022

	<u>Month of January,</u>		<u>Seven months ended January 31,</u>	
	<u>current year</u>	<u>prior year</u>	<u>current year</u>	<u>prior year</u>
Operating revenue:				
Net patient revenue	\$ 50,918,521	\$ 52,093,651	\$ 338,719,062	\$ 341,762,921
Other operating revenue	1,062,886	1,210,845	6,818,231	9,151,988
Total operating revenue	<u>51,981,407</u>	<u>53,304,496</u>	<u>345,537,293</u>	<u>350,914,909</u>
Total operating expenses	43,601,230	43,029,898	291,023,019	290,880,695
Total non-operating income	<u>(6,481,289)</u>	<u>(4,517,015)</u>	<u>(22,042,739)</u>	<u>(20,371,347)</u>
Operating and non-operating income	<u>\$ 1,898,888</u>	<u>\$ 5,757,583</u>	<u>\$ 32,471,535</u>	<u>\$ 39,662,867</u>

SALINAS VALLEY MEMORIAL HOSPITAL  
 BALANCE SHEETS  
 January 31, 2022

	<u>Current year</u>	<u>Prior year</u>
<b>ASSETS:</b>		
Current assets	\$ 454,273,348	\$ 410,981,388
Assets whose use is limited or restricted by board	148,067,141	138,617,245
Capital assets	239,361,740	258,439,413
Other assets	176,825,021	187,407,642
Deferred pension outflows	<u>50,119,236</u>	<u>83,379,890</u>
	<u>\$ 1,068,646,486</u>	<u>\$ 1,078,825,578</u>
<b>LIABILITIES AND EQUITY:</b>		
Current liabilities	127,678,758	152,234,648
Long term liabilities	14,556,513	14,780,831
	83,585,120	126,340,336
Net assets	<u>842,826,095</u>	<u>785,469,763</u>
	<u>\$ 1,068,646,486</u>	<u>\$ 1,078,825,578</u>

**SALINAS VALLEY MEMORIAL HOSPITAL  
SCHEDULES OF NET PATIENT REVENUE  
January 31, 2022**

	<u>Month of January,</u>		<u>Seven months ended January 31,</u>	
	<u>current year</u>	<u>prior year</u>	<u>current year</u>	<u>prior year</u>
Patient days:				
By payer:				
Medicare	2,062	2,155	11,878	12,099
Medi-Cal	1,115	1,121	7,039	7,617
Commercial insurance	742	918	5,350	5,589
Other patient	85	92	813	980
Total patient days	<u>4,004</u>	<u>4,286</u>	<u>25,080</u>	<u>26,285</u>
Gross revenue:				
Medicare	\$ 96,285,908	\$ 89,275,837	\$ 629,321,264	\$ 568,607,623
Medi-Cal	56,671,890	53,083,675	391,695,138	373,422,605
Commercial insurance	46,456,674	48,822,980	346,467,191	346,982,400
Other patient	<u>6,922,618</u>	<u>7,967,921</u>	<u>57,447,716</u>	<u>60,479,514</u>
Gross revenue	<u>206,337,090</u>	<u>199,150,413</u>	<u>1,424,931,309</u>	<u>1,349,492,142</u>
Deductions from revenue:				
Administrative adjustment	391,772	590,340	2,180,593	2,370,481
Charity care	295,212	1,263,827	6,219,505	6,516,386
Contractual adjustments:				
Medicare outpatient	22,938,056	19,223,263	187,127,973	166,825,661
Medicare inpatient	46,132,671	43,362,590	276,007,105	259,891,083
Medi-Cal traditional outpatient	2,580,080	2,018,330	18,987,334	13,726,968
Medi-Cal traditional inpatient	9,268,575	8,099,914	43,505,551	55,390,282
Medi-Cal managed care outpatient	20,110,155	15,277,900	152,620,104	123,741,299
Medi-Cal managed care inpatient	17,029,967	20,441,324	135,006,039	132,418,675
Commercial insurance outpatient	13,858,634	12,665,333	112,436,891	106,302,052
Commercial insurance inpatient	18,491,332	20,180,991	120,123,276	108,064,998
Uncollectible accounts expense	3,256,357	3,216,019	25,831,324	24,819,272
Other payors	<u>1,065,757</u>	<u>716,932</u>	<u>6,166,553</u>	<u>7,662,063</u>
Deductions from revenue	<u>155,418,568</u>	<u>147,056,763</u>	<u>1,086,212,248</u>	<u>1,007,729,221</u>
Net patient revenue	<u>\$ 50,918,522</u>	<u>\$ 52,093,651</u>	<u>\$ 338,719,061</u>	<u>\$ 341,762,921</u>
Gross billed charges by patient type:				
Inpatient	\$ 121,448,900	\$ 125,522,978	\$ 766,106,253	\$ 754,859,351
Outpatient	59,318,131	51,559,925	470,872,207	447,584,701
Emergency room	<u>25,570,059</u>	<u>22,067,511</u>	<u>187,952,851</u>	<u>147,048,090</u>
Total	<u>\$ 206,337,090</u>	<u>\$ 199,150,413</u>	<u>\$ 1,424,931,311</u>	<u>\$ 1,349,492,142</u>

**SALINAS VALLEY MEMORIAL HOSPITAL  
STATEMENTS OF REVENUE AND EXPENSES  
January 31, 2022**

	<u>Month of January,</u>		<u>Seven months ended January 31,</u>	
	<u>current year</u>	<u>prior year</u>	<u>current year</u>	<u>prior year</u>
Operating revenue:				
Net patient revenue	\$ 50,918,521	\$ 52,093,651	\$ 338,719,062	\$ 341,762,921
Other operating revenue	1,062,886	1,210,845	6,818,231	9,151,988
Total operating revenue	<u>51,981,407</u>	<u>53,304,496</u>	<u>345,537,293</u>	<u>350,914,909</u>
Operating expenses:				
Salaries and wages	16,065,048	16,567,936	107,782,829	113,265,665
Compensated absences	3,055,239	2,526,510	19,220,782	18,688,981
Employee benefits	6,602,879	7,703,965	47,170,921	51,975,992
Supplies, food, and linen	6,120,865	6,334,207	43,453,006	43,808,456
Purchased department functions	3,327,140	3,172,890	23,599,458	21,448,862
Medical fees	1,789,858	1,901,467	13,432,913	11,947,514
Other fees	3,503,167	1,842,158	13,909,067	9,079,385
Depreciation	1,854,248	1,811,371	12,821,395	12,487,903
All other expense	1,282,786	1,169,394	9,632,648	8,177,937
Total operating expenses	<u>43,601,230</u>	<u>43,029,898</u>	<u>291,023,019</u>	<u>290,880,695</u>
Income from operations	<u>8,380,177</u>	<u>10,274,598</u>	<u>54,514,274</u>	<u>60,034,214</u>
Non-operating income:				
Donations	166,667	166,667	1,188,667	1,666,667
Property taxes	333,333	333,333	2,333,333	2,333,333
Investment income	(2,765,384)	(71,821)	(6,252,239)	2,037,743
Taxes and licenses	0	0	0	0
Income from subsidiaries	(4,215,905)	(4,945,194)	(19,312,500)	(26,409,090)
Total non-operating income	<u>(6,481,289)</u>	<u>(4,517,015)</u>	<u>(22,042,739)</u>	<u>(20,371,347)</u>
Operating and non-operating income	1,898,888	5,757,583	32,471,535	39,662,867
Net assets to begin	<u>840,927,207</u>	<u>779,712,180</u>	<u>810,354,560</u>	<u>745,806,898</u>
Net assets to end	<u>\$ 842,826,095</u>	<u>\$ 785,469,763</u>	<u>\$ 842,826,095</u>	<u>\$ 785,469,764</u>
Net income excluding non-recurring items	\$ 1,898,888	\$ 5,757,583	\$ 31,989,757	\$ 38,043,758
Non-recurring income (expense) from cost report settlements and re-openings and other non-recurring items	<u>0</u>	<u>0</u>	<u>481,778</u>	<u>1,619,109</u>
Operating and non-operating income	<u>\$ 1,898,888</u>	<u>\$ 5,757,583</u>	<u>\$ 32,471,535</u>	<u>\$ 39,662,867</u>

**SALINAS VALLEY MEMORIAL HOSPITAL  
SCHEDULES OF INVESTMENT INCOME  
January 31, 2022**

	<u>Month of January,</u>		<u>Seven months ended January 31,</u>	
	<u>current year</u>	<u>prior year</u>	<u>current year</u>	<u>prior year</u>
Detail of other operating income:				
Dietary revenue	\$ 128,401	\$ 126,487	\$ 976,330	\$ 945,762
Discounts and scrap sale	249,736	(666)	803,185	222,654
Sale of products and services	111,528	11,317	557,459	161,250
Clinical trial fees	4,144	0	27,339	46,128
Stimulus Funds	0	0	0	0
Rental income	155,306	145,184	1,119,723	1,115,503
Other	413,771	928,523	3,334,195	6,660,691
Total	<u>\$ 1,062,886</u>	<u>\$ 1,210,845</u>	<u>\$ 6,818,231</u>	<u>\$ 9,151,988</u>
Detail of investment income:				
Bank and payor interest	\$ 82,930	\$ 109,167	\$ 616,690	\$ 972,614
Income from investments	(2,660,805)	(179,871)	(6,546,062)	1,036,496
Gain or loss on property and equipment	(187,509)	(1,117)	(322,866)	28,633
Total	<u>\$ (2,765,384)</u>	<u>\$ (71,821)</u>	<u>\$ (6,252,239)</u>	<u>\$ 2,037,743</u>
Detail of income from subsidiaries:				
Salinas Valley Medical Center:				
Pulmonary Medicine Center	\$ (203,052)	\$ (82,010)	\$ (1,277,649)	\$ (1,255,723)
Neurological Clinic	(82,538)	(119,245)	(391,413)	(568,205)
Palliative Care Clinic	(103,270)	(111,340)	(576,191)	(545,008)
Surgery Clinic	(141,246)	(218,412)	(843,384)	(1,169,287)
Infectious Disease Clinic	(31,219)	(38,830)	(189,201)	(211,777)
Endocrinology Clinic	(167,531)	(236,882)	(880,060)	(1,332,827)
Early Discharge Clinic	0	0	0	0
Cardiology Clinic	(642,773)	(530,306)	(2,804,894)	(3,463,636)
OB/GYN Clinic	(512,297)	(402,268)	(2,323,136)	(2,541,658)
PrimeCare Medical Group	(868,841)	(1,436,277)	(3,084,488)	(6,682,646)
Oncology Clinic	(560,124)	(250,280)	(2,315,995)	(1,814,162)
Cardiac Surgery	(310,311)	(373,472)	(1,151,771)	(1,231,757)
Sleep Center	(45,350)	(109,029)	(212,970)	(480,335)
Rheumatology	(86,526)	(82,615)	(388,017)	(402,838)
Precision Ortho MDs	(383,612)	(587,681)	(1,779,120)	(2,842,668)
Precision Ortho-MRI	0	(100)	0	(1,363)
Precision Ortho-PT	(79,283)	(64,833)	(358,170)	(329,496)
Vaccine Clinic	(53,581)	0	(189,512)	0
Dermatology	(37,672)	(49,153)	(115,472)	(227,452)
Hospitalists	0	0	0	0
Behavioral Health	(91,003)	(95,848)	(475,115)	(504,644)
Pediatric Diabetes	(46,438)	(37,436)	(309,905)	(235,601)
Neurosurgery	(44,496)	(68,755)	(179,059)	(249,665)
Multi-Specialty-RR	22,785	(30,025)	75,877	(1,878)
Radiology	(301,480)	(322,591)	(1,700,134)	(1,463,122)
Salinas Family Practice	(142,593)	0	(627,648)	0
Total SVMC	(4,912,451)	(5,247,388)	(22,097,427)	(27,555,748)
Doctors on Duty	(59,876)	218,535	160,922	207,688
Assisted Living	0	(7,965)	0	(49,548)
Salinas Valley Imaging	0	0	0	(19,974)
Vantage Surgery Center	12,266	28,591	182,123	145,340
LPCH NICU JV	0	0	0	0
Central Coast Health Connect	0	0	0	0
Monterey Peninsula Surgery Center	738,846	133,147	2,180,057	545,786
Aspire/CHI/Coastal	(44,508)	(104,430)	(195,848)	(306,472)
Apex	32,791	(8,268)	103,759	39,189
21st Century Oncology	(26,258)	(12,454)	80,760	(116,907)
Monterey Bay Endoscopy Center	43,285	55,038	273,155	701,556
Total	<u>\$ (4,215,905)</u>	<u>\$ (4,945,194)</u>	<u>\$ (19,312,500)</u>	<u>\$ (26,409,090)</u>



**SALINAS VALLEY MEMORIAL HOSPITAL  
BALANCE SHEETS  
January 31, 2022**

	<b>Current year</b>	<b>Prior year</b>
<b>A S S E T S</b>		
Current assets:		
Cash and cash equivalents	\$ 348,713,308	\$ 297,985,446
Patient accounts receivable, net of estimated uncollectibles of \$25,784,471	87,508,281	93,746,118
Supplies inventory at cost	7,902,480	8,605,987
Other current assets	10,149,278	10,643,838
Total current assets	454,273,348	410,981,388
Assets whose use is limited or restricted by board	148,067,141	138,617,245
Capital assets:		
Land and construction in process	35,455,695	47,426,417
Other capital assets, net of depreciation	203,906,045	211,012,996
Total capital assets	239,361,740	258,439,413
Other assets:		
Investment in Securities	137,249,683	148,230,694
Investment in SVMC	11,414,249	11,337,726
Investment in Aspire/CHI/Coastal	1,791,520	4,503,941
Investment in other affiliates	21,385,568	21,826,766
Net pension asset	4,984,001	1,508,515
Total other assets	176,825,021	187,407,642
Deferred pension outflows	50,119,236	83,379,890
	\$ 1,068,646,486	\$ 1,078,825,578
<b>LIABILITIES AND NET ASSETS</b>		
Current liabilities:		
Accounts payable and accrued expenses	\$ 54,100,747	\$ 59,187,516
Due to third party payers	55,553,238	74,900,827
Current portion of self-insurance liability	18,024,773	18,146,305
Total current liabilities	127,678,758	152,234,648
Long term portion of workers comp liability	14,556,513	14,780,831
Total liabilities	142,235,271	167,015,479
Pension liability	83,585,120	126,340,336
Net assets:		
Invested in capital assets, net of related debt	239,361,740	258,439,413
Unrestricted	603,464,355	527,030,350
Total net assets	842,826,095	785,469,763
	\$ 1,068,646,486	\$ 1,078,825,578

**SALINAS VALLEY MEMORIAL HOSPITAL**  
**STATEMENTS OF REVENUE AND EXPENSES - BUDGET VS. ACTUAL**  
**January 31, 2022**

	Month of January,				Seven months ended January 31,			
	Actual	Budget	Variance	% Var	Actual	Budget	Variance	% Var
Operating revenue:								
Gross billed charges	\$ 206,337,090	\$ 199,588,021	6,749,069	3.38%	\$ 1,424,931,309	\$ 1,366,642,535	58,288,774	4.27%
Deductions from revenue	155,418,568	153,627,876	1,790,692	1.17%	1,086,212,248	1,049,753,582	36,458,666	3.47%
Net patient revenue	50,918,522	45,960,144	4,958,378	10.79%	338,719,061	316,888,953	21,830,108	6.89%
Other operating revenue	1,062,886	783,804	279,082	35.61%	6,818,231	5,477,135	1,341,096	24.49%
<b>Total operating revenue</b>	<b>51,981,408</b>	<b>46,743,948</b>	<b>5,237,460</b>	<b>11.20%</b>	<b>345,537,292</b>	<b>322,366,088</b>	<b>23,171,204</b>	<b>7.19%</b>
Operating expenses:								
Salaries and wages	16,065,048	15,734,432	330,616	2.10%	107,782,829	108,167,943	(385,114)	-0.36%
Compensated absences	3,055,239	2,737,145	318,094	11.62%	19,220,782	19,884,801	(664,019)	-3.34%
Employee benefits	6,602,879	7,412,756	(809,877)	-10.93%	47,170,921	49,559,065	(2,388,144)	-4.82%
Supplies, food, and linen	6,120,865	5,938,499	182,366	3.07%	43,453,006	41,189,060	2,263,946	5.50%
Purchased department functions	3,327,140	3,088,552	238,588	7.72%	23,599,458	21,406,187	2,193,271	10.25%
Medical fees	1,789,858	1,830,070	(40,212)	-2.20%	13,432,913	12,791,618	641,295	5.01%
Other fees	3,503,167	928,184	2,574,983	277.42%	13,909,067	6,535,693	7,373,374	112.82%
Depreciation	1,854,248	1,790,446	63,802	3.56%	12,821,395	12,503,663	317,732	2.54%
All other expense	1,282,786	1,445,868	(163,082)	-11.28%	9,632,648	10,075,722	(443,074)	-4.40%
<b>Total operating expenses</b>	<b>43,601,230</b>	<b>40,905,952</b>	<b>2,695,278</b>	<b>6.59%</b>	<b>291,023,019</b>	<b>282,113,750</b>	<b>8,909,269</b>	<b>3.16%</b>
<b>Income from operations</b>	<b>8,380,178</b>	<b>5,837,996</b>	<b>2,542,182</b>	<b>43.55%</b>	<b>54,514,273</b>	<b>40,252,337</b>	<b>14,261,936</b>	<b>35.43%</b>
Non-operating income:								
Donations	166,667	166,667	0	0.00%	1,188,667	1,166,667	22,000	1.89%
Property taxes	333,333	333,333	(0)	0.00%	2,333,333	2,333,333	(0)	0.00%
Investment income	(2,765,384)	(63,302)	(2,702,082)	4268.59%	(6,252,239)	(443,111)	(5,809,129)	1310.99%
Income from subsidiaries	(4,215,905)	(4,369,030)	153,125	-3.50%	(19,312,500)	(28,919,361)	9,606,861	-33.22%
<b>Total non-operating income</b>	<b>(6,481,289)</b>	<b>(3,932,332)</b>	<b>(2,548,957)</b>	<b>64.82%</b>	<b>(22,042,739)</b>	<b>(25,862,472)</b>	<b>3,819,733</b>	<b>-14.77%</b>
<b>Operating and non-operating income</b>	<b>\$ 1,898,889</b>	<b>\$ 1,905,664</b>	<b>(6,775)</b>	<b>-0.36%</b>	<b>\$ 32,471,534</b>	<b>\$ 14,389,865</b>	<b>18,081,669</b>	<b>125.66%</b>

**SALINAS VALLEY MEMORIAL HOSPITAL  
PATIENT STATISTICAL REPORT**

For the month of Jan and seven months to date

	<u>Month of Jan</u>		<u>Seven months to date</u>		<u>Variance</u>
	<u>2021</u>	<u>2022</u>	<u>2020-21</u>	<u>2021-22</u>	
<u>NEWBORN STATISTICS</u>					
Medi-Cal Admissions	37	43	314	297	(17)
Other Admissions	81	99	674	683	9
Total Admissions	118	142	988	980	(8)
Medi-Cal Patient Days	56	69	468	461	(7)
Other Patient Days	150	171	1,089	1,126	37
Total Patient Days of Care	206	240	1,557	1,587	30
Average Daily Census	6.6	7.7	7.2	7.4	0.1
Medi-Cal Average Days	1.5	1.6	1.6	1.6	0.0
Other Average Days	1.0	1.7	1.6	1.7	0.1
Total Average Days Stay	1.8	1.7	1.6	1.6	0.1
<u>ADULTS &amp; PEDIATRICS</u>					
Medicare Admissions	351	387	2,262	2,353	91
Medi-Cal Admissions	288	248	1,671	1,699	28
Other Admissions	358	292	1,976	2,127	151
Total Admissions	997	927	5,909	6,179	270
Medicare Patient Days	1,819	1,757	10,595	10,204	(391)
Medi-Cal Patient Days	1,166	1,158	7,865	7,325	(540)
Other Patient Days	1,220	1,083	6,930	7,538	608
Total Patient Days of Care	4,205	3,998	25,390	25,067	(323)
Average Daily Census	135.6	129.0	118.1	116.6	(1.5)
Medicare Average Length of Stay	5.0	4.7	4.7	4.3	(0.4)
Medi-Cal Average Length of Stay	3.6	3.8	3.9	3.5	(0.4)
Other Average Length of Stay	3.8	2.6	2.6	2.7	0.1
Total Average Length of Stay	4.2	3.7	3.7	3.5	(0.2)
Deaths	97	34	284	199	(85)
Total Patient Days	4,411	4,238	26,947	26,654	(293)
Medi-Cal Administrative Days	8	72	164	177	13
Medicare SNF Days	0	0	0	0	0
Over-Utilization Days	0	0	0	0	0
Total Non-Acute Days	8	72	164	177	13
Percent Non-Acute	0.18%	1.70%	0.61%	0.66%	0.06%

**SALINAS VALLEY MEMORIAL HOSPITAL**  
**PATIENT STATISTICAL REPORT**  
For the month of Jan and seven months to date

	<u>Month of Jan</u>		<u>Seven months to date</u>		<u>Variance</u>
	<u>2021</u>	<u>2022</u>	<u>2020-21</u>	<u>2021-22</u>	
<u>PATIENT DAYS BY LOCATION</u>					
Level I	292	269	1,786	1,869	83
Heart Center	360	346	2,406	1,808	(598)
Monitored Beds	888	775	6,302	5,439	(863)
Single Room Maternity/Obstetrics	315	357	2,457	2,555	98
Med/Surg - Cardiovascular	905	875	5,252	4,910	(342)
Med/Surg - Oncology	304	267	1,335	1,973	638
Med/Surg - Rehab	574	517	3,065	3,035	(30)
Pediatrics	172	77	609	627	18
Nursery	206	240	1,557	1,587	30
Neonatal Intensive Care	72	162	889	768	(121)
<u>PERCENTAGE OF OCCUPANCY</u>					
Level I	72.46%	66.75%	63.90%	66.87%	
Heart Center	77.42%	74.41%	74.60%	56.06%	
Monitored Beds	106.09%	92.59%	108.56%	93.70%	
Single Room Maternity/Obstetrics	27.46%	31.12%	30.89%	32.12%	
Med/Surg - Cardiovascular	64.87%	62.72%	54.28%	50.75%	
Med/Surg - Oncology	75.43%	66.25%	47.76%	70.59%	
Med/Surg - Rehab	71.22%	64.14%	54.83%	54.29%	
Med/Surg - Observation Care Unit	0.00%	66.98%	0.00%	56.99%	
Pediatrics	30.82%	13.80%	15.74%	16.20%	
Nursery	40.27%	46.92%	21.95%	22.37%	
Neonatal Intensive Care	21.11%	47.51%	37.59%	32.47%	

**SALINAS VALLEY MEMORIAL HOSPITAL**  
**PATIENT STATISTICAL REPORT**  
For the month of Jan and seven months to date

	<u>Month of Jan</u>		<u>Seven months to date</u>		<u>Variance</u>
	<u>2021</u>	<u>2022</u>	<u>2020-21</u>	<u>2021-22</u>	
<u>DELIVERY ROOM</u>					
Total deliveries	114	149	975	962	(13)
C-Section deliveries	36	42	292	318	26
Percent of C-section deliveries	31.58%	28.19%	29.95%	33.06%	3.11%
<u>OPERATING ROOM</u>					
In-Patient Operating Minutes	15,342	14,376	143,526	129,064	(14,462)
Out-Patient Operating Minutes	10,849	16,053	154,560	171,600	17,040
Total	26,191	30,429	298,086	300,664	2,578
Open Heart Surgeries	11	9	83	81	(2)
In-Patient Cases	115	117	992	929	(63)
Out-Patient Cases	117	160	1,702	1,706	4
<u>EMERGENCY ROOM</u>					
Immediate Life Saving	43	34	234	256	22
High Risk	570	501	3,650	3,231	(419)
More Than One Resource	2,170	2,465	14,872	17,983	3,111
One Resource	950	2,060	9,394	12,106	2,712
No Resources	31	66	278	632	354
Total	<u>3,764</u>	<u>5,126</u>	<u>28,428</u>	<u>34,208</u>	<u>5,780</u>

**SALINAS VALLEY MEMORIAL HOSPITAL  
PATIENT STATISTICAL REPORT**

For the month of Jan and seven months to date

	Month of Jan		Seven months to date		Variance
	2021	2022	2020-21	2021-22	
<b>CENTRAL SUPPLY</b>					
In-patient requisitions	16,315	15,295	102,118	105,727	3,609
Out-patient requisitions	6,250	6,730	67,967	63,426	-4,541
Emergency room requisitions	1,375	698	11,273	8,349	-2,924
Interdepartmental requisitions	7,849	7,115	49,644	44,398	-5,246
Total requisitions	<u>31,789</u>	<u>29,838</u>	<u>231,002</u>	<u>221,900</u>	<u>-9,102</u>
<b>LABORATORY</b>					
In-patient procedures	42,107	38,721	253,735	241,589	-12,146
Out-patient procedures	9,286	11,597	76,062	80,263	4,201
Emergency room procedures	9,433	11,145	60,934	76,430	15,496
Total patient procedures	<u>60,826</u>	<u>61,463</u>	<u>390,731</u>	<u>398,282</u>	<u>7,551</u>
<b>BLOOD BANK</b>					
Units processed	<u>318</u>	<u>297</u>	<u>1,996</u>	<u>1,965</u>	<u>-31</u>
<b>ELECTROCARDIOLOGY</b>					
In-patient procedures	1,041	1,068	6,566	6,885	319
Out-patient procedures	349	302	2,706	2,668	-38
Emergency room procedures	1,045	1,148	6,142	7,127	985
Total procedures	<u>2,435</u>	<u>2,518</u>	<u>15,414</u>	<u>16,680</u>	<u>1,266</u>
<b>CATH LAB</b>					
In-patient procedures	64	77	512	607	95
Out-patient procedures	51	71	571	625	54
Emergency room procedures	0	0	1	0	-1
Total procedures	<u>115</u>	<u>148</u>	<u>1,084</u>	<u>1,232</u>	<u>148</u>
<b>ECHO-CARDIOLOGY</b>					
In-patient studies	298	371	2,033	2,406	373
Out-patient studies	138	156	1,262	1,520	258
Emergency room studies	2	1	16	5	-11
Total studies	<u>438</u>	<u>528</u>	<u>3,311</u>	<u>3,931</u>	<u>620</u>
<b>NEURODIAGNOSTIC</b>					
In-patient procedures	140	165	1,109	1,090	-19
Out-patient procedures	24	27	169	164	-5
Emergency room procedures	0	0	0	0	0
Total procedures	<u>164</u>	<u>192</u>	<u>1,278</u>	<u>1,254</u>	<u>-24</u>

**SALINAS VALLEY MEMORIAL HOSPITAL**  
**PATIENT STATISTICAL REPORT**  
For the month of Jan and seven months to date

	<u>Month of Jan</u>		<u>Seven months to date</u>		<u>Variance</u>
	<u>2021</u>	<u>2022</u>	<u>2020-21</u>	<u>2021-22</u>	
<b>SLEEP CENTER</b>					
In-patient procedures	0	0	1	0	-1
Out-patient procedures	183	167	1,315	1,153	-162
Emergency room procedures	0	0	0	0	0
Total procedures	<u>183</u>	<u>167</u>	<u>1,316</u>	<u>1,153</u>	<u>-163</u>
<b>RADIOLOGY</b>					
In-patient procedures	1,654	1,429	9,708	8,710	-998
Out-patient procedures	416	356	4,323	2,915	-1,408
Emergency room procedures	1,217	1,382	7,939	8,809	870
Total patient procedures	<u>3,287</u>	<u>3,167</u>	<u>21,970</u>	<u>20,434</u>	<u>-1,536</u>
<b>MAGNETIC RESONANCE IMAGING</b>					
In-patient procedures	105	141	860	890	30
Out-patient procedures	127	77	953	768	-185
Emergency room procedures	14	6	80	49	-31
Total procedures	<u>246</u>	<u>224</u>	<u>1,893</u>	<u>1,707</u>	<u>-186</u>
<b>MAMMOGRAPHY CENTER</b>					
In-patient procedures	2,718	3,550	20,910	24,711	3,801
Out-patient procedures	2,696	3,518	20,790	24,527	3,737
Emergency room procedures	3	0	3	8	5
Total procedures	<u>5,417</u>	<u>7,068</u>	<u>41,703</u>	<u>49,246</u>	<u>7,543</u>
<b>NUCLEAR MEDICINE</b>					
In-patient procedures	12	14	86	94	8
Out-patient procedures	61	78	506	541	35
Emergency room procedures	1	0	4	4	0
Total procedures	<u>74</u>	<u>92</u>	<u>596</u>	<u>639</u>	<u>43</u>
<b>PHARMACY</b>					
In-patient prescriptions	111,491	94,299	636,356	605,331	-31,025
Out-patient prescriptions	10,439	11,319	99,978	104,283	4,305
Emergency room prescriptions	5,342	7,197	36,983	48,996	12,013
Total prescriptions	<u>127,272</u>	<u>112,815</u>	<u>773,317</u>	<u>758,610</u>	<u>-14,707</u>
<b>RESPIRATORY THERAPY</b>					
In-patient treatments	29,606	21,738	156,457	131,478	-24,979
Out-patient treatments	143	981	3,391	7,896	4,505
Emergency room treatments	373	194	1,179	1,583	404
Total patient treatments	<u>30,122</u>	<u>22,913</u>	<u>161,027</u>	<u>140,957</u>	<u>-20,070</u>
<b>PHYSICAL THERAPY</b>					
In-patient treatments	2,256	2,396	16,109	16,284	175
Out-patient treatments	99	170	1,751	2,108	357
Emergency room treatments	0	0	0	0	0
Total treatments	<u>2,355</u>	<u>2,566</u>	<u>17,860</u>	<u>18,392</u>	<u>532</u>

**SALINAS VALLEY MEMORIAL HOSPITAL**  
**PATIENT STATISTICAL REPORT**  
For the month of Jan and seven months to date

	Month of Jan		Seven months to date		Variance
	2021	2022	2020-21	2021-22	
<b>OCCUPATIONAL THERAPY</b>					
In-patient procedures	1,445	1,660	9,403	10,682	1,279
Out-patient procedures	74	99	797	1,086	289
Emergency room procedures	0	0	0	0	0
Total procedures	<u>1,519</u>	<u>1,759</u>	<u>10,200</u>	<u>11,768</u>	<u>1,568</u>
<b>SPEECH THERAPY</b>					
In-patient treatments	348	525	2,682	3,077	395
Out-patient treatments	23	28	171	200	29
Emergency room treatments	0	0	0	0	0
Total treatments	<u>371</u>	<u>553</u>	<u>2,853</u>	<u>3,277</u>	<u>424</u>
<b>CARDIAC REHABILITATION</b>					
In-patient treatments	0	0	0	0	0
Out-patient treatments	498	401	2,637	4,268	1,631
Emergency room treatments	0	0	1	0	-1
Total treatments	<u>498</u>	<u>401</u>	<u>2,638</u>	<u>4,268</u>	<u>1,630</u>
<b>CRITICAL DECISION UNIT</b>					
Observation hours	<u>378</u>	<u>344</u>	<u>1,866</u>	<u>2,252</u>	<u>386</u>
<b>ENDOSCOPY</b>					
In-patient procedures	85	78	626	636	10
Out-patient procedures	12	29	159	223	64
Emergency room procedures	0	0	0	0	0
Total procedures	<u>97</u>	<u>107</u>	<u>785</u>	<u>859</u>	<u>74</u>
<b>C.T. SCAN</b>					
In-patient procedures	537	596	3,803	4,027	224
Out-patient procedures	445	281	3,598	2,517	-1,081
Emergency room procedures	433	552	3,208	4,164	956
Total procedures	<u>1,415</u>	<u>1,429</u>	<u>10,609</u>	<u>10,708</u>	<u>99</u>
<b>DIETARY</b>					
Routine patient diets	17,554	21,351	113,154	130,102	16,948
Meals to personnel	19,345	21,421	144,216	152,161	7,945
Total diets and meals	<u>36,899</u>	<u>42,772</u>	<u>257,370</u>	<u>282,263</u>	<u>24,893</u>
<b>LAUNDRY AND LINEN</b>					
Total pounds laundered	<u>99,573</u>	<u>100,531</u>	<u>710,088</u>	<u>689,921</u>	<u>-20,167</u>



# *PUBLIC INPUT*

*CLOSED SESSION*

*(Report on Item to be  
Discussed in Closed Session)*

*RECONVENE OPEN SESSION/  
REPORT ON CLOSED SESSION*

*ADJOURNMENT – THE MARCH 2022  
FINANCE COMMITTEE MEETING  
IS SCHEDULED FOR MONDAY,  
MARCH 21, 2022, AT 12:00 P.M.*