



May 16, 2024

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 next regular meeting of the **FINANCE COMMITTEE - COMMITTEE OF THE WHOLE** of **SALINAS VALLEY HEALTH**<sup>1</sup> will be held **MONDAY, MAY 20, 2024, AT 12:00 P.M., DOWNING RESOURCCE CENTER ROOMS A, B, & C, SALINAS VALLEY HEALTH MEDICAL CENTER, 450 E. ROMIE LANE, SALINAS, CALIFORNIA.** (*Visit [SalinasValleyHealth.com/virtualboardmeeting](https://www.SalinasValleyHealth.com/virtualboardmeeting) for Public Access Information*).

A handwritten signature in black ink, appearing to read "Allen Radner".

Allen Radner, MD  
Interim President/Chief Executive Officer

Committee Voting Members: **Joel Hernandez Laguna**, Chair, **Juan Cabrera**, Vice-Chair, **Allen Radner, MD**, Interim President/CEO; **Augustine Lopez**, Chief Financial Officer; and **Tarun Bajaj, M.D.**, Medical Staff Member.

Advisory Non-Voting Members: Sanjeev Tandon and Harry Wardwell, Community Members, Administrative Executive Team.

**FINANCE COMMITTEE  
COMMITTEE OF THE WHOLE  
SALINAS VALLEY HEALTH<sup>1</sup>**

**MONDAY, MAY 20, 2024, 12:00 P.M.  
DOWNING RESOURCE CENTER, ROOMS A, B & C**

**Salinas Valley Health Medical Center  
450 E. Romie Lane, Salinas, California**

**(Visit [SalinasValleyHealth.com/virtualboardmeeting](https://www.SalinasValleyHealth.com/virtualboardmeeting) for Public Access Information)**

**AGENDA**

1. Call to Order / Roll Call

2. Public Comment

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.

3. Approve Minutes of the Finance Committee Meeting of April 22, 2024 (HERNANDEZ LAGUNA)

- Motion/Second
- Action by Committee/Roll Call Vote

4. Closed Session

5. Reconvene Open Session

6. Consider Recommendation to the Board of Directors for Approval of the Epic Inpatient Electronic Health Record Solution Support Amendment, Hosting Services Amendment and Related Implementation Services as Sole Source Justification and Contract Award (RADNER/RAY)

- Staff Report
- Committee Questions to Staff
- Public Comment
- Committee Discussion/Deliberation
- Motion/Second
- Action by Committee/Roll Call Vote

<sup>1</sup>Salinas Valley Memorial Healthcare System operating as Salinas Valley Health

7. Consider Recommendation to the Board of Directors to Approve Contract with Linde for Product Supply Agreement of Medical Gas Supply and Equipment (MILLER/MELTON)
  - Staff Report
  - Committee Questions to Staff
  - Public Comment
  - Committee Discussion/Deliberation
  - Motion/Second
  - Action by Committee/Roll Call Vote
8. Consider Recommendation to Board to Approve Project Budget and Major Medical Equipment Purchases for the SVHMC Interventional Radiology and Catheterization Laboratory Equipment Replacement Project (MILLER/KEARNS/KAZEL)
  - Staff Report
  - Committee Questions to Staff
  - Public Comment
  - Committee Discussion/Deliberation
  - Motion/Second
  - Action by Committee/Roll Call Vote
9. Financial and Statistical Review (LOPEZ/CLEVELAND)
10. Review Balanced Scorecard (*INFORMATIONAL ONLY- Refer to Packet*)
11. Adjournment

The next Finance Committee Meeting is scheduled for **Monday, June 24, 2023 at 12:00 p.m.**

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.SalinasValleyHealth.com](http://www.SalinasValleyHealth.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 Board Clerk during regular business hours at 831-759-3050. Notification received 48 hours before the meeting will enable the District to make reasonable accommodations.

**FINANCE COMMITTEE MEETING  
COMMITTEE OF THE WHOLE  
SALINAS VALLEY HEALTH**

**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**

**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): Trade secrets, strategic planning/proposed new programs and services

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

**ADJOURN TO OPEN SESSION**

*CALL TO ORDER*  
*ROLL CALL*

*(Chair to call the meeting to order)*

*PUBLIC COMMENT*

**DRAFT SALINAS VALLEY HEALTH<sup>1</sup>**  
**FINANCE COMMITTEE**  
**COMMITTEE OF THE WHOLE**  
**MEETING MINUTES APRIL 22, 2024**

Committee Member Attendance:

Voting Members Present: **Joel Hernandez Laguna**, Chair; **Juan Cabrera**, Vice-Chair; **Allen Radner, MD**, Interim President/CEO; **Augustine Lopez**, Chief Financial Officer; and **Tarun Bajaj, M.D.**, Medical Staff Member.

Advisory Non-Voting Members Present: Administrative Executive Team Members Clement Miller, COO, Michelle Childs, CHRO, (via teleconference) and Gary Ray, CLO.

Other Board Members Present, Constituting Committee of the Whole: Rolando Cabrera, MD, (via teleconference), Catherine Carson (via teleconference) and Victor Rey (via teleconference).

*Juan Cabrera arrived at 12:06 p.m.*

### **1. CALL TO ORDER/ROLL CALL**

A quorum was present and Chair Joel Hernandez Laguna, called the meeting to order at 12:00 p.m. in the Downing Resource Center, Rooms A, B, and C.

### **2. PUBLIC COMMENT:**

None

### **3. MINUTES OF THE FINANCE COMMITTEE MARCH 25, 2024**

Approve the minutes of the March 25, 2024 Finance Committee meeting. The information was included in the Committee packet.

#### **COMMENTS FROM THE BOARD:**

None

#### **PUBLIC COMMENT:**

None

#### **MOTION:**

Upon motion by Committee member Dr. Radner, and second by Committee member Lopez, the minutes of the March 25, 2024 Finance Committee were approved as presented.

#### **ROLL CALL VOTE:**

Ayes: Cabrera, Dr. Radner, Lopez, Dr. Bajaj and Hernandez-Laguna;

Nays: None;

Abstentions: None;

Absent: None.

#### **Motion Carried**

<sup>1</sup>Salinas Valley Memorial Healthcare System operating as Salinas Valley Health

**4. CONSIDER RECOMMENDATION FOR BOARD APPROVAL OF THE LEASE AGREEMENT AMENDMENT ONE BETWEEN SALINAS VALLEY MEMORIAL HEALTHCARE SYSTEM (SVMHS) AND UNI-KOOL PARTNERS FOR PARKING LOCATED AT 241 ABBOTT STREET, SALINAS, CA (70,000 SQ. FT. SUPPLEMENTATION OF CURRENT LEASED SPACE)**

Clement Miller, COO, and Earl Strotman, Director/Facilities Management & Construction, reported that as part of the strategy to relieve vehicle-parking shortages at and around the hospital site, a recommendation is presented to extend the lease to include an 87,120 sq. ft. parking lot located at 241 Abbott Street, to ensure that we maintain and consolidate adequate patient and visitor parking at and around the hospital campus in addition to ensuring the availability of parking at the surrounding clinic offices. A full report was included in the packet.

**COMMITTEE MEMBER DISCUSSION:** The proposed lease does not include reduction of space for the future. However, having this lot allows us to flex out as census fluctuates and there is no indication this will change in the future.

**PUBLIC COMMENT:**

None

**MOTION:**

Upon motion by Committee Vice-Chair Cabrera and second by Committee member Dr. Radner, the Finance Committee recommends Board of Directors approval of Lease Agreement Amendment One between Salinas Valley Memorial Healthcare System and the Uni-Kool Partners for 87,120 square feet of finished parking area located at 241 Abbott Street, Salinas, CA 93901, at the annual rate of \$142,213.68 per year for a 5-year term for a total \$711,068.40.

**ROLL CALL VOTE:**

Ayes: Cabrera, Dr. Radner, Lopez, Dr. Bajaj and Hernandez-Laguna;

Nays: None;

Abstentions: None;

Absent: None.

**Motion Carried**

**5. CONSIDER RECOMMENDATION FOR BOARD APPROVAL OF VALET SERVICES AGREEMENT WITH CORINTHIAN INTERNATIONAL PARKING SERVICES, INC.**

Clement Miller, COO, and Earl Strotman, Director/Facilities Management & Construction, reported that HSS notified SVH that they would be exiting the Valet services arena effective June 1, 2024. SVH created a Request for Proposal search for suitable vendors for Valet services. That search identified Corinthian International Parking Services, Inc., as a replacement partner for Valet services here at SVH. Valet services are needed to alleviate the parking burden imposed on all hospital patients/visitors and to help improve the SVH patient experience. This proposal includes an increase for this service but is necessary to ensure a viable program that will stand for the duration of this contract.

**COMMITTEE MEMBER DISCUSSION:** Feedback from patients and staff is that valet services are appreciated. There have been several issues related to the current vendor, staffing



being the biggest issue. Due to our employee regulations, consistent staffing is necessary to maintain regulatory compliance. The vendor will be evaluated annually and monitored quarterly.

**PUBLIC COMMENT:**

None

**MOTION:**

Upon motion by Committee Vice-Chair Cabrera, and second by Committee member Dr. Radner, the Finance Committee recommends Board of Directors approval of the Valet Service Agreement between Salinas Valley Memorial Healthcare System and Corinthian International Parking Services, Inc. for three years in the amount of \$2,211,587.

**ROLL CALL VOTE:**

Ayes: Cabrera, Dr. Radner, Lopez, Dr. Bajaj and Hernandez-Laguna;

Nays: None;

Abstentions: None;

Absent: None.

**Motion Carried**

**6. CONSIDER RECOMMENDATION FOR BOARD APPROVAL TO LEASE 740 E. ROMIE (A VACANT LOT) TO SALINASIDENCE OPCO, LLC DBA PACIFIC COAST POST ACUTE**

Clement Miller, COO, and Earl Strotman, Director/Facilities Management & Construction, reported that Salinas Valley Memorial Healthcare System is looking to lease a District owned undeveloped vacant lot located at 740 E. Romie Lane, Salinas, CA to Pacific Coast Post Acute, a business located adjacent to said property for the purposes of employee parking at a monthly fee of \$1,800. They will develop the lot. District Legal Counsel provided a competitive value comparison based on the community.

**COMMITTEE MEMBER DISCUSSION:**

None

**PUBLIC COMMENT:**

None

**MOTION:**

Upon motion by Committee member Dr. Radner, and second by Committee member Lopez, the Finance Committee recommends Board of Directors approval of a 5-year lease of property located at 740 E. Romie Lane, Salinas, CA to Pacific Coast Post Acute for purposes of employee parking in the amount of \$21,600 per year.

**ROLL CALL VOTE:**

Ayes: Cabrera, Dr. Radner, Lopez, Dr. Bajaj and Hernandez-Laguna;

Nays: None;

Abstentions: None;

Absent: None.

**Motion Carried**

## **7. CONSIDER RECOMMENDATION FOR BOARD OF DIRECTORS TO APPROVE PROCUREMENT TO REPLACE OUR FLEET OF BD INFUSION IV PUMP EQUIPMENT**

Carla Spencer, Associate CNO, reported that the clinical departments are requesting approval to enter into a new agreement with BD (Carefusion/Alaris) to replace our aging fleet of IV Infusion Pump equipment. Our current equipment ranges from 7yrs to 22 years old. Average life span for this equipment is 5-7 years. The Infusion pumps allow for the precise delivery of fluids and medications, reducing the risk of errors and improving patient outcomes. Additionally the pumps allow for increased safety, as the infusion pumps can be programmed with safety limits to prevent over or under-dosing a patient, reducing the risk of adverse events. IV Infusion Pumps less than 7 years old will be replaced for free.

A full report was included in the packet.

**COMMITTEE MEMBER DISCUSSION:** BD has 43% of the market share and using BD pumps will reduce the staff learning curve. Materials Management did a great job of negotiating the contract and brought cost down. We will phase equipment in over 4 years; this will not be a bulk buy.

### **PUBLIC COMMENT:**

None.

### **MOTION:**

Upon motion by Committee member Dr. Radner, and second by Committee member Lopez, the Finance Committee recommends Board of Directors approval of procurement of the BD Infusion IV Pump equipment in the amount of \$1,182,987.48.

### **ROLL CALL VOTE:**

Ayes: Cabrera, Dr. Radner, Lopez, Dr. Bajaj and Hernandez-Laguna;

Nays: None;

Abstentions: None;

Absent: None.

### **Motion Carried**

## **8. CLOSED SESSION**

Chair Hernandez Laguna announced that items to be discussed in Closed Session as listed on the posted Agenda are *Report Involving Trade Secrets: Trade secret, strategic planning/proposed new programs and services*.

The meeting recessed into Closed Session under the Closed Session Protocol at 12:25 p.m.

## **9. RECONVENE OPEN SESSION/REPORT ON CLOSED SESSION**

The Board reconvened Open Session at 1:05 p.m. Chair Hernandez Laguna announced in Closed Session, the Board received a *Report Involving Trade Secrets: Trade secret, strategic planning/proposed new programs and services*. No action was taken.

## **10. FINANCIAL PERFORMANCE REVIEW**

An update was received from Augustine Lopez, Chief Financial Officer on the Financial Performance Review for the month of March 2024. Highlights included Income from Operations \$1.1M, Net Income \$5.0M, Consolidated Net Income \$22.8M, and Days Cash on Hand of 338. A full report was included in the packet.

**COMMITTEE MEMBER DISCUSSION:** None.

## **11. BALANCED SCORECARD**

The Balanced Scorecard Summary for FY2024, year-to-date February 2024 was included in the Committee packet for committee review. Mr. Lopez provided a brief review of metrics and progress.

**COMMITTEE MEMBER DISCUSSION:** None

## **12. CAPITAL SPENDING YTD MARCH 31, 2024 UPDATE**

Augustine Lopez, Chief Financial Officer and Stephen Lyon, Bogard Construction provided a presentation on FY24 YTD March Capital Spending,

The report on Active Projects Approved by the Board was reviewed as follows:

- Parking garage annex: Near completion
- Medical Center campus painting: Will happen in the near future
- Surgery addition plus seismic retrofit: Awaiting State approval
- 559 Abbott Street renovations: Near completion
- CT equipment replacement: Equipment issues/working with vendor
- Nuclear Medicine equipment replacement: Near completion
- Elevator modernization: In progress
- Bulk oxygen tank replacement: Just starting
- SVH rebranding/signage as reported by Claudia Pizarro Villalobos, Director Marketing & Communications: Approved in Dec/2022, permitted, 46 locations/21 completed
- HR replacement system (Workday) as reported by Audrey Parks, Chief Information Officer: Workday went live on 4/1/24; equipment interface has required replacement of some older equipment
- Cath Lab 3 replacement: Commencing design
- Angio Suite replacement: Will be 1<sup>st</sup> before Cath Lab 3 and commencing design
- 212 San Jose Street renovation: In progress

All projects have a Board approved amount of \$74,444,377. A full report was included in the packet.

**COMMITTEE MEMBER DISCUSSION:** 212 San Jose Street renovation has included physician office relocation and expansion of clinical space. The Capital Projects team was commended for managing on all these projects.

### **13. ADJOURNMENT**

There being no other business, the meeting was adjourned at 1:27 p.m. The next Finance Committee Meeting is scheduled for **Monday, May 20, 2024 at 12:00 p.m.**

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Joel Hernandez Laguna, Chair

*CLOSED SESSION*

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

*RECONVENE OPEN SESSION/  
REPORT ON CLOSED SESSION*

## Board Paper: Finance Committee

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Agenda Item: Consider Recommendation to the Board of Directors for Approval of the Epic Inpatient Electronic Health Record Solution Support Amendment, Hosting Services Amendment and Related Implementation Services as Sole Source Justification and Contract Award

Executive Sponsor: Allen Radner, MD, Interim Chief Executive Officer  
Gary Ray, Chief Legal Officer  
Augustine Lopez, Chief Financial Officer  
Audrey Parks, Chief Information Officer  
Josh Rivera, Director Enterprise Informatics

Date: May 1, 2024

### Executive Summary

Salinas Valley Health has been working towards the development of a comprehensive enterprise-wide electronic health record (EHR) strategy that includes moving Salinas Valley Health Medical Center to a consolidated software system aligned with its ambulatory network, Salinas Valley Health Clinic. This project includes significant investments in software to support clinical, financial, population health, data analytics and enables the migration of our inpatient and outpatient systems to a single, common EHR.

By implementing Epic Inpatient applications, Salinas Valley Health will be migrating from its current vendor, Meditech, to Epic. This transition will displace over forty other applications that are used throughout the healthcare system to augment the current EHR vendor. An integrated EHR platform provides a unified view of the patient healthcare record, will help facilitate streamlined workflows and health system communication, support quality payment program performance, and allow for data analytics. All of this in support of the quadruple aim of enhanced patient experience, improved population health of the populations we serve, reduced costs and better work-life balance of our healthcare providers. The move to Epic Inpatient simplifies communications and data sharing between the Medical Center and Clinics. A fully Epic EHR will also create stronger ties with tertiary referral sites in our region who primarily use Epic.

### Background/Situation/Rationale

In 2017, Salinas Valley Health began exploring options to unify our ambulatory clinic network as its growth in size and scale required more advanced functionality than could be accommodated with our Page 15 of 92 then ambulatory systems. With one unified record in mind, we attempted to leverage Meditech's ambulatory system. Once this was determined as non-viable, and with a common EHR in mind, we pursued the Epic ambulatory EHR. This was approved by Salinas Valley Health Board of Directors in March 2019.

In October 2023, Salinas Valley Health's Executive Team directed the organization to start looking into an integrated EHR business impact analysis. Over the past several months we have engaged with Impact Advisors, an information technology consulting company with deep experience in Epic

implementation and who previously assisted with the evaluation and implementation of our Epic Ambulatory solution, to develop a detailed project budget, Total Cost of Ownership (TCO), for a proposed Epic Inpatient system. This work has resulted in a total estimated project cost of approximately eighty-eight million dollars (\$88,000,000) over five (5) years. This total reflects the following:

- Epic Inpatient Care software licensing fees
- Epic hosting costs
- necessary third-party software licensing fees
- hardware costs
- incremental staffing
- training
- implementation professional services

We believe this investment is necessary to support improvements in our healthcare delivery system and our ability to adapt to regulatory requirements, changing reimbursement models that demand a higher level of integration, and more robust clinical and analytics functionality.

### Timeline/Review Process to Date

- March 2019:** Epic Ambulatory Project Approved by Salinas Valley Health Board of Directors
- April 2020:** Epic Ambulatory Go-Live at Salinas Valley Health Clinics
- October 2023:** Salinas Valley Health's Executive Team requests a Total Cost of Ownership (TCO) evaluation for potential Epic Inpatient business impact analysis
- April 2024:** Epic Inpatient EHR solution and related implementation services are presented to the Salinas Valley Health Board of Directors
- May 2024:** Epic Inpatient EHR solution and related implementation services are submitted to the Salinas Valley Board of Directors for final approval.

### Meeting our Mission, Vision, Goals

#### Strategic Plan Alignment:

Implementation of Epic Inpatient provides a unified platform for care delivery across our health system. The implementation will improve the service we are able to provide to our patients, enhance patient engagement, result in higher quality of care through more robust access to data, allow for financial improvements related to better integration and population health management capability, and improve work life balance for our healthcare providers that are critical to our success.

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#### Pillar/Goal Alignment

- Service    People    Quality    Finance    Growth    Community



**Financial/Quality/Safety/Regulatory Implications:**

<b>Proposed Project</b>	<b>Vendor: Epic</b>
1. Proposed effective date	July 1, 2024
2. Term of agreement	Subscription agreement with successive one-year terms (guaranteed support for up to 10 years)
3. Renewal terms	Automatic
4. Termination provision(s)	90 days' notice following initial one-year subscription term
5. Payment terms	The Enterprise Epic Upgrade License Fee is payable as follows: \$806,788 upon execution of this Enterprise Amendment and \$154,496 per month for forty-seven (47) consecutive months beginning one (1) month after execution of this Enterprise Amendment.
6. Annual cost	Approximately \$1,549,372 annually for Epic software maintenance and \$1,457,400 for Epic hosting services (inclusive of Ambulatory & Inpatient services (post IP go-live))
7. Cost over five years	\$88,000,000
8. Cost over ten years	\$125,000,000
9. Budgeted (yes or no)	Yes, FY2025 (Tentative Department 8552) operating and capital budget subject to approval by the Board of Directors
10. Contract(s)	

**Recommendation**

Consider Recommendation to the Board of Directors for approval of the Epic Inpatient electronic health record solution support amendment, hosting services amendment and related Implementation services as sole source justification and contract award at an estimated project cost (implementation cost less offset costs) of approximately \$88 million for years 1-5, and approximately \$37 million for years 6-10.

**Exhibit: Project Budget Summary**

Exhibit: Project Budget Summary

SVH Epic Cost Model Cost Summary	Epic Hosted - Months 1 - 60 (FY25 - FY28)			
	Capital	One-Time Operating	Annual Operating	Total All Costs
Total Paid to Epic	\$ 19,330,600	\$ -	\$ 12,245,100	\$ 31,575,700
Total SVH Internal Costs	\$ 38,029,217	\$ 16,896,306	\$ 56,357,086	\$ 111,282,610
Total Cost (Paid to Epic + Internal)	\$ 57,359,817	\$ 16,896,306	\$ 68,602,185	\$ 142,858,309
Total Cost Reductions	\$ (11,155,427)	\$ -	\$ (43,841,274)	\$ (54,996,701)
Net Total Cost	\$ 46,204,391	\$ 16,896,306	\$ 24,760,911	\$ 87,861,608

SVH Epic Cost Model Cost Summary	Epic Hosted - Months 61 - 120 (FY29 - FY34)			
	Capital	One-Time Operating	Annual Operating	Total All Costs
Total Paid to Epic	\$ -	\$ -	\$ 17,188,420	\$ 17,188,420
Total SVH Internal Costs	\$ 675,050	\$ -	\$ 90,122,612	\$ 90,797,662
Total Cost (Paid to Epic + Internal)	\$ 675,050	\$ -	\$ 107,311,031	\$ 107,986,081
Total Cost Reductions	\$ -	\$ -	\$ (70,961,357)	\$ (70,961,357)
Net Total Cost	\$ 675,050	\$ -	\$ 36,349,674	\$ 37,024,724

SVH Epic Cost Model Cost Summary	Epic Hosted - 120 Month Total (FY25 - FY34)			
	Capital	One-Time Operating	Annual Operating	Total All Costs
Total Paid to Epic	\$ 19,330,600	\$ -	\$ 29,433,519	\$ 48,764,119
Total SVH Internal Costs	\$ 38,704,267	\$ 16,896,306	\$ 146,479,698	\$ 202,080,271
Total Cost (Paid to Epic + Internal)	\$ 58,034,867	\$ 16,896,306	\$ 175,913,217	\$ 250,844,391
Total Cost Reductions	\$ (11,155,427)	\$ -	\$ (114,802,631)	\$ (125,958,058)
Net Total Cost	\$ 46,879,441	\$ 16,896,306	\$ 61,110,585	\$ 124,886,332

## Board/CEO – Packet Submission Checklist

### Epic: Inpatient Electronic Health Record, 2024 - 2034

The original of this completed/fully signed checklist and all required supporting documents are to be hand-delivered to Assistant to CFO **by 4:00 p.m. on the Tuesday that falls three (3) weeks before Board week.**

- BOARD/CEO PAPER** – required for all submissions; see attached instructions/sample
- KEY CONTRACT TERMS** – required for all submissions – see table in Board/CEO Paper
- CONTRACT** – negotiated final with vendor signature #1001.3574 (EHR)  
#1001.3619 (hosting)
- PROCUREMENT PROCESS DOCUMENTATION** – required for all submissions requiring Board review/approval per Procurement Management Policy (see policy for details; indicate which sub-category is applicable):
  - If for **data processing/telecommunications goods/services** of more than \$25,000, check applicable option and include documentation: **CIO must review.**
    - RFP documentation
    - If sole source – provide detailed justification (see attachment)
    - If GPO, submit qualifying verification from Materials Management
  - If for **professional/other services or medical/surgical equipment and supplies** more than \$350,000, check applicable option and include documentation:
    - RFP documentation
    - If GPO, submit qualifying verification from Materials Management
    - If emergency – as designated by Board
  - If for **non-medical materials/supplies** more than \$25,000, check applicable option and include documentation:
    - Invitation for bids documentation
    - If sole source – provide detailed justification (see Attachment 3B)
    - If GPO, submit qualifying verification from Materials Management

Legal counsel/Contract Administrator reviewed:  No or  Yes, By Whom: Gary Ray and Natalie James

**SUBMITTED BY DEPARTMENT DIRECTOR OR DEPARTMENT ADMINISTRATOR:**

 <small>Joshua Rivera (Apr 15, 2024 11:23 PDT)</small>	Director Enterprise Informatics	04/15/2024
Signature	Title/Department	Date

**REVIEWED BY:**

CIO (if applicable):  Date: 04/15/2024

Director of MM/Designee in lieu of Compliance: Natalie Ann James, JD Date: 04/15/2024  
Natalie Ann James, JD (Apr 15, 2024 11:49 PDT)

## Justification for Sole Source Form

**To:** Proposal Evaluation Panel

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**From:** Allen Radner, MD, Interim Chief Executive Officer  
 Gary Ray, Chief Legal Officer  
 Augustine Lopez, Chief Financial Officer  
 Audrey Parks, Chief Information Officer  
 Josh Rivera, Director Enterprise Informatics

- Type of Purchase:** (check one)
- Materials/Supplies
  - Data Processing/Telecommunication Goods > \$25,000
  - Medical/Surgical – Supplies/Equipment > \$25,000
  - Purchased Services

Cost Estimate (\$):	Estimated \$88,000,000 (years 1 – 5) Estimated \$37,000,000 (years 6 – 10)
Vendor Name:	Epic Systems Corporation and other vendors associated with the Epic Inpatient EHR implementation project
Item Title:	Epic: Inpatient EHR Implementation Project , 2024 - 2034

**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 the SVMHS. 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 why it is mandatory to use this licensed or patented product or service:**
- Existing SVMHS equipment, inventory, custom-built information system, custom built data inventory system, or similar products or programs. **Describe. If product is off-the-shelf, list efforts to find other vendors (i.e. web site search, contacting the manufacturer to see if other dealers are available to service this region, etc.).**  
 Salinas Valley Health is looking to integrate an enterprise-wide Electronic Health Record (EHR) across its ambulatory and inpatient operations. A significant investment was made in 2019 to transition all ambulatory clinics under the Epic Ambulatory EHR system. By implementing Epic Inpatient applications, Salinas Valley Health will be migrating from its current vendor, Meditech, to Epic. This transition will displace over forty other applications that are used throughout the healthcare system to augment the current EHR vendor. An integrated EHR platform provides a unified view of the patient healthcare record, will help facilitate streamlined workflows and health system communication, support quality payment program performance, and allow for data analytics. All of this in support of the quadruple aim of enhanced patient experience, improved population health of the populations we serve, reduced costs and better work-life balance of our healthcare providers. The move to Epic Inpatient simplifies communications and data sharing between the Medical Center and Clinics. A fully Epic EHR will also create stronger ties with tertiary referral sites in our region who primarily use Epic.
- Uniqueness of the service. **Describe.**
- SVMHS has established a standard for this manufacturer, supplier or provider and there is only one vendor. **Attach documentation from manufacturer to confirm that only one dealer provides the product.**
- Factory-authorized warranty service available from only this single dealer. Sole availability at the location required. **Describe.**

## Justification for Sole Source Form

- Used item with bargain price (describe what a new item would cost). **Describe.**
- Other -The above reasons are the most common and established causes for an eligible sole source. If you have a different reason, **Describe:**

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

Submitter Signature:   
Joshua Rivera (Apr 15, 2024 11:23 PDT)

Date: 04/15/2024

# Board Paper: Finance Committee

Agenda Item: **Consider Recommendation for Board of Directors to approve contract with Linde for Product Supply Agreement of Medical Gas supply and equipment**

Executive Sponsor: Judi Melton, Director Materials Management  
Clement Miller, Chief Operating Officer

Date: May 3, 2024

## Executive Summary

The clinical departments are requesting approval to enter into a new agreement with Linde Gas for our Medical Gas supply and equipment. The Medical Gas supply consists of oxygen cylinders, propane/Nitrous Oxide, Helium, Carbon Dioxide, and Argon tanks.

## Background/Situation/Rationale

We are looking to improve the technology of the regulator on the medical gas oxygen transport tanks.

The Linde "GRAB 'N GO" Digital advanced gas delivery system provides a digital display showing time remaining in hours and minutes, along with visual and audible alarms that signal when contents are getting low and then again when time to replace the cylinder. Our current vendor does not possess the new technology.

This new technology will allow our clinical staff to easily identify how much oxygen is in the tank and provides safety measures that do not exist today.

## Timeline/Review Process to Date:

[3/2024] SVH reviews new technology and obtains quote

[5/2024] SVH brings opportunity to the Board

**Strategic Plan Alignment:** Approval will allow SVH to continue to provide high quality patient care services.

**Pillar/Goal Alignment:**  Service  People  Quality  Finance  Growth  Community

## Financial/Quality/Safety/Regulatory Implications:

Key Contract Terms	Vendor: Linde
1. Proposed effective date	7/1/2024
2. Term of agreement	5 years (60 months)
3. Renewal terms	Annual price Increase, not to exceed CPI or 4%
4. Termination provision(s)	No early termination, No auto renewal
5. Payment Terms	Net 45
6. Annual cost	\$101,990.52
7. Cost over life of agreement	\$509,952.60
8. Budgeted (indicate y/n)	Yes, 01.7050.7600 (Increase of \$3662/yr, starts in FY25, is included in budget)

## Recommendation:

**Consider Recommendation for Board to approve contract with Linde for Product Supply agreement of Medical Gas supply and equipment, in the amount of \$509,952.60.**

Attachments :

Linde Product Rider CA02072024PL-Cyl and Linde PSA



THIS RIDER ("Rider") numbered CA02072024PL-Cyl and dated as of February 7, 2024 (the "Effective Date"), by and between LINDE GAS & EQUIPMENT INC., a Delaware corporation, having an office at 10 Riverview Drive, Danbury, CT 06810 ("Seller") and Salinas Valley Memorial Healthcare System, a local health care district organized and operating pursuant to Division 23 of the California Health and Safety Code, operating as Salinas Valley Health, having an office at 450 East Romie Lane, Salinas, CA 93901 ("Buyer"), is made part of the Product Supply Agreement between Seller and Salinas Valley Health and dated February 7, 2024 (the "Agreement"; capitalized terms used herein without definition shall have the meanings set forth in the Agreement).

1. As to this Rider, the following words and terms shall have the following meanings:  
"Basic Term" of this Rider commences on the Effective Date and continues for Five (5) years after Effective Date..  
"Location" for this Rider are solely for Salinas Valley Memorial Healthcare System operating as Salinas Valley Health, having an office at 450 East Romie Lane, Salinas, CA 93901.  
"Prices" are:

Table with 7 columns: Product, Specification, Product Code, Cylinder Type, Product Price, Estimated Monthly Volume, Rental Charge Per Day. Rows include various gas cylinders like Oxygen USP, Nitrous Oxide USP, Nitrogen NF, Argon HP, Helium UHP, Helium Industrial, Helium USP, Air USP, Carbon Dioxide USP, and Lung Diffusion.

Buyer will pay Seller the prices for Product, rental charge or other amount listed in the table above for any cylinder, or other Equipment, items or services (the "Prices"). In addition to the Prices set out above, Products are subject to the Fee and Surcharges Schedule Below, "Exhibit A.6 Fee Scheulde and Supplemental Energy Charge," which may be updated from time to time. Rental is subject to a safety and environmental charge which will be noted on the invoice for such Products.

This Rider is being signed as a member in good standing with Vizient GPO. The pricing herein will be fixed firm for eighteen (18) months, after which time will be subject to an annual price increase. The price adjustment shall be the lower of either (a) the net annual percentage change in Medical Care index, as published in Consumer Price Index (Urban) ("CPI-U") for the immediately preceding twelve (12) month period or (b) four percent (4%). If the net change in the index for the immediately preceding twelve (12) month period is a decrease, the Seller will not be permitted a price increase for that period and Seller may not request another increase until the next period .

Notwithstanding any other provision hereof, after the Effective Date of this Rider, Seller may increase the Prices then in effect for gases which Seller does not produce by giving not less than forty five (45) days prior written notice of such increase. If Seller's Price increase exceeds 4% in the aggregate for a period greater than ninety (90) consecutive days other than Contingencies set forth in Article 6, Buyer may Terminate this Agreement without stating a cause or reason and without penalty.

Buyer estimates its monthly consumption of each Product will be the Estimated Monthly Volume ("EMV") if set forth in the table above. Buyer will purchase from Seller its requirements for Product in excess of 120% of the EMV ("Excess Product") to the extent that Seller elects, in its sole discretion, to supply such Excess Product, provided that in such case Seller, upon 15 days prior written notice, may adjust the Prices for all such Product hereunder. If Buyer's monthly consumption of any Product is eighty percent

(80%) or less than the EMV during any period of three (3) consecutive calendar months, Seller, upon 15 days prior written notice, may adjust the Prices and the EMV for such Product. If Buyer fails to take any Product during any period of six (6) consecutive months, Seller will have the right at any time thereafter to immediately terminate this Rider.

Exhibit A.6 Fee Schedule and Supplemental Energy Charge June 2022		
Description	Cylinder Gases (All Tiers 75 Mile Radius FDA plant)	Frequency
Delivery Charge	\$24	Per Delivery
Emergency Delivery Same Day, Next Day, Weekend	\$350	Per Occurrence
HazMat Charge	\$12	Per Delivery
Safety Environmental	\$10.00	Per Invoice
Sentry Cylinder Tracking	\$17.95	Per Invoice
Cylinder Audit Charge	\$450	As Requested by Buyer
Certificate of Analysis	\$30	As Requested by Buyer
Loss of Use Cylinder Size: A,B,D,E	\$95.00	Per Lost Cylinder
Loss of Use Cylinder Size: G,H,K,J, M	\$225.00	Per Lost Cylinder
Loss of Use Cylinder Size: DewarOK	\$1,500.00	Per Lost Cylinder

Supplemental Energy Charge will be implemented based schedule below. Should fuel prices warrant implementation the charge to be reviewed and adjusted quarterly. Rates will be based on the average price of the previous quarter cost of On-Highway Diesel as published by the Energy Information Administration at <http://www.eia.gov/petroleum/gasdiesel>

Supplemental Energy Charge			
ON-HIGHWAY DIESEL FUEL INDEX	Fee Per Delivery	Fee Per Delivery	
Cost per Gallon			
Below \$3.26	0	0	Per Index
\$3.26 to \$3.50	\$15	\$15	Per Index
\$3.51 to \$3.75	\$17.50	\$17.50	Per Index
3.76 to \$4.00	\$20.50	\$20.50	Per Index
\$4.01 to \$4.25	\$23.00	\$23.00	Per Index
\$4.26 to \$4.50	\$26.50	\$26.50	Per Index
US Energy Information Administration			

"Products" means the items under the Products column in gaseous, liquid or solid form noted in the table under "Prices" above.

"Specifications" means the Product specification set forth under the column so indicated in the table under "Prices" above or listed in the Product Information Sheet(s) attached hereto or available on [www.lindeus.com](http://www.lindeus.com).

2. In addition to the Prices, for each delivery, Products are subject to a delivery, fuel and/or hazardous materials charge that will be noted on the invoice and certain other charges and surcharges, including without limitation those associated with regulatory, safety and environmental compliance, greenhouse gas emission reductions, and obtaining power, energy and transportation, as well as occasional equipment maintenance at rates in effect at the time thereof, in each case whether or not set forth herein (collectively, "Charges and Surcharges"). Charges or Surcharges may be adjusted from time to time as indicated on the invoice. Buyer will pay Seller for any taxes, tariffs, fees, Charges or Surcharges now or hereafter imposed due to the provision of any Product, Equipment or other item hereunder. Terms of payment will be net forty-five(45) days following date of invoice. By paying the amount specified on Seller's invoice, unless Buyer objects in writing within forty-five(45) days of receipt thereof, Buyer shall be deemed to agree to the pricing, Charges and Surcharges and any cylinder balance thereon.

3. If Buyer fails to make payment when due, or its financial responsibility becomes otherwise impaired, or if Buyer is otherwise in default of its obligations hereunder, Seller may, among other remedies, refuse to supply Product except for receipt of cash with order and/or payment in full of all outstanding charges, and/or charge to Buyer a monthly late charge on any delinquent balance equal to 0.5% per month, and/or suspend Seller's performance and/or terminate the Agreement or this or any other Rider. Buyer will pay Seller all fees and costs, including reasonable legal fees and expenses required to collect Buyer's delinquent account, recover any cylinders or other Equipment or otherwise enforce this Agreement.

4. Each cylinder will remain the property of Seller at all times. Buyer will return all cylinders in a good condition, non-contaminated, valves closed, complete with caps and fittings. Buyer will prevent anyone not authorized by Seller from filling Seller owned cylinders. Buyer will pay Seller for any cleanup of cylinders returned in a contaminated condition and for the replacement or repair cost of any cylinders lost or damaged beyond normal wear and tear, including if cylinders are used, filled, refilled, altered, repaired, adjusted, or otherwise tampered with by any person not authorized by Seller. Buyer will comply with all laws, rules and regulations applicable to Buyer's Location relating to a safe and secure operation.

**BY SIGNING BELOW, BUYER AND SELLER EACH ACKNOWLEDGE AND AGREE THAT THIS RIDER IS CONDITIONAL UPON THE TERMS AND CONDITIONS HEREIN AND IN THE AGREEMENT AND ANY ATTACHMENT HERETO.** Buyer and Seller intending to be legally bound have by the signatures of their authorized representatives executed this Rider as of the date first above written.

Salinas Valley Memorial Healthcare System as Salinas Valley Health (Buyer)

LINDE GAS & EQUIPMENT INC. (Seller)

Submitted by: Patrick Larimer \_\_\_\_\_

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

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

Name and Title: \_\_\_\_\_

Name and Jennifer Claggett – Regional Manager- Healthcare- US West \_\_\_\_\_

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

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





**THIS PRODUCT SUPPLY AGREEMENT** ("Agreement") numbered CA02072024PL and dated as of February 7, 2024 (the "Effective Date"), is made by and between LINDE GAS & EQUIPMENT INC., a Delaware corporation, having an office at 10 Riverview Drive, Danbury, Connecticut 06810-5113 ("Seller") and Salinas Valley Memorial Healthcare System, a local health care district organized and operating pursuant to Division 23 of the California Health and Safety Code, operating as Salinas Valley Health, having an office at 450 East Romie Lane, Salinas, CA 93901 ("Buyer").

#### 1. Requirements.

Seller will sell to Buyer, and Buyer will purchase from Seller, on the terms and conditions herein and in any rider hereto (each, a "Rider"; capitalized terms not defined herein shall have the meanings set forth in the Rider) executed by the parties from time to time.

#### 2. Prices

Buyer will pay Seller the Prices, Charges and Surcharges set forth in the Rider.

#### 3. Delivery.

The delivery of Product will constitute Buyer's purchase thereof.

#### 4. Specifications; Warranties; Remedies.

Product delivered hereunder will meet the Specifications. Buyer may reject any Product that does not meet the Specifications and no charge will be made for Product so rejected. With respect to any items or equipment, including cylinders and supply systems covered hereunder and not manufactured by Seller, Seller shall make reasonable efforts to assist Buyer in obtaining the benefit for Buyer of any manufacturer's warranty, to the extent available and applicable to Buyer (copies of which may be available on the manufacturer's website). **THERE ARE NO EXPRESS WARRANTIES BY SELLER OTHER THAN UNDER THIS ARTICLE 4. NO WARRANTIES BY SELLER (OTHER THAN WARRANTY OF TITLE AS PROVIDED IN THE UNIFORM COMMERCIAL CODE) WILL BE IMPLIED OR OTHERWISE CREATED INCLUDING WARRANTY OF MERCHANTABILITY AND WARRANTY OF FITNESS FOR A PARTICULAR PURPOSE.** In certain circumstances, Buyer's claims any kind with respect to the conformance of Product to the Specifications, or for nonconforming equipment, whether or not based on negligence, warranty, strict liability or any other theory of law, may exceed the price of the nonconforming Product or equipment due to the nature and extent of the incident, however shall not be greater than the amounts of Seller's general liability insurance required in Article 10. Buyer's exclusive remedy for the unexcused failure to deliver Product when required by Buyer, regardless of cause, including negligence, shall be to recover from Seller the difference between the cost to Buyer of any reasonable purchase of Product in substitution for Product not delivered and the price of such quantity of Product hereunder. Seller's sole obligations and Buyer's exclusive remedies are set forth in this Article 4 with respect to the claims addressed herein. No action, regardless of form, may be brought by either party more than one year after delivery of the Product to which such action applies, except that any claims by Seller for non-payment of invoices, taxes or recovery of any equipment may be brought at any time. For clarity, this also excludes Seller from invoicing for Product or other fees for which they failed to invoice Buyer for if Seller fails to invoice for any such Product or other fees within the one (1) year period of when such costs are incurred.

#### 5. Price Changes

Seller shall be allowed one (1) price adjustment per preceding eighteen (18) months period (each period commences on the first day of the month immediately following the expiration of the prior period), to be based on the following formula and associated indices. The price adjustment shall be the lower of either (a) the net annual percentage change in Medical Care index, as published in Consumer Price Index (Urban) ("CPI-U") for the immediately preceding twelve (12) month period or (b) four percent (4%). If the net change in the index for the immediately preceding twelve (12) month period is a decrease, the Seller will not be permitted a price increase for that period and Seller may not request another increase until the next period. The applicable percentage increase will be used to adjust the then current prices on the date at which Buyer is eligible for a price adjustment. Seller shall provide not less than one hundred twenty (120) days' written notice to Buyer of any change in pricing per terms permitted or required by this Agreement. As exceptions to the above, (i) Prices for Products not Manufactured by Supplier will be adjusted based on the percentage change in the cost of Product. Seller shall provide Buyer forty-five (45) days written notice of any such change in pricing and Seller and Buyer will mutually agree whether a price increase is warranted. If after thirty (30) days Seller and Buyer cannot agree to terms, this Agreement for such Product may be terminated by either party upon providing no less than ninety (90) days' prior written notice. Seller may also request to negotiate additional price increases based on "extraordinary circumstances" that arise during the Term. As a condition of such request, Seller must (i) demonstrate the financial reason for such request and (ii) supply the method and means that Seller and Buyer will use to track and monitor such extraordinary circumstances. If price increase is approved by Buyer due to extraordinary circumstances, it may be implemented with forty-five (45) days' simultaneous notice to Buyer. If such extraordinary circumstances are temporary, Seller will provide periodic updates to Buyer (not less than ninety (90) days) as to the timeline for changes to or the elimination of such price increases. Any price increase approved by Buyer due to the extraordinary circumstances will immediately terminate when the extraordinary circumstances have ended.

#### 6. Contingencies.

Except for the obligation to pay money when due, neither party hereto shall be liable to the other for default or delay in performance due to act of God, accident, fire, flood, storm, riot, war, terrorism, sabotage, disease, epidemic, explosion, strike, labor disturbance, governmental law or regulation, inability to obtain electricity or other type of energy, feedstock, raw or finished material, equipment or transportation, or any similar or different contingency beyond its reasonable control which would prevent or

delay performance or make performance commercially impracticable. During a contingency, Seller will allocate Product among its own requirements and those of its customers in a fair and reasonable manner and Buyer will either pay for any related additional costs for Product Seller is able to deliver to Buyer during the contingency or source Product from another supplier solely for the duration of the contingency. During the contingency, Seller will apply Buyer's sourced Product from another supplier to Buyer's purchase commitment set forth within the Rider.

#### 7. Health, Safety.

Buyer (i) acknowledges that there are hazards associated with Product and Equipment, including the storage, use and handling thereof; (ii) will warn, protect and train its employees, contractors and others exposed to the hazards posed by Buyer's storage, use and handling of Product and Equipment; (iii) assumes all responsibility for the suitability and the results of using Product alone or in combination with other articles or substances and in any manufacturing, medical, or other process or procedures; and will notify Seller of any hazards and safety procedures at the Location(s). If, at any time, Seller considers that performance of its supply obligations hereunder would pose an unreasonable risk to safety, Seller may suspend its supply obligations without notice. Buyer will be responsible for complying with all applicable laws, rules and regulations, including those applicable to Buyer's Locations, and all relevant reporting obligations, including the Emergency Planning and Community Right-to-Know Act of 1986, 42 U.S.C. Sections 11001-11049. Buyer is directed to www.lindeus.com for the applicable Safety Data Sheets related to Product(s), and Buyer will incorporate such information into Buyer's safety program. Buyer will warn and protect its employees including with respect to all necessary and prudent safety practices for handling Products, wearing necessary personal protective equipment, avoiding contact with skin, and use and storage only in adequately ventilated areas.

#### 8. Indemnity.

(a) Each Party shall be responsible for its own acts and omissions and not the acts or omissions of the other Party. Each Party shall indemnify and hold harmless the other Party, its officers, directors, agents, and employees from and against any and all claims, liabilities, and losses occurring or resulting to any person or entity for damage, injury, or death, to the extent such claims, liabilities, or losses arise out of, are alleged to arise out of, or are connected with wrongful, willful, or negligent act or omission of the indemnifying Party or its agents in the performance of this Agreement.

**9. Limitation on Liability.** Notwithstanding any other provision of this Agreement to the contrary, (a) Seller shall not be liable to Buyer or any third party for any: incidental, consequential, indirect, special, exemplary, punitive or enhanced damages, lost profits or revenues, diminution in value, sales, cover, losses in any way related to damages to vaccines, loss of biological material or scientific research; or any other similar loss or damage, arising in connection with this Agreement regardless of (i) whether such damages were foreseeable or Seller was advised of the possibility of such damages and (ii) the legal or equitable theory (contract, tort, or otherwise) upon which the claim is based; and (b) in no event shall Seller's cumulative liability for any and all claims of any kind under this Agreement exceed the amount of the Seller's general liability insurance amounts as required in Article 10.

#### 10. Insurance

Supplier shall maintain in effect throughout the term of this Agreement general liability insurance in the amount of \$1,000,000 per occurrence and \$3,000,000 annual aggregate; and comprehensive automobile liability insurance in the amounts of \$100,000 per occurrence and \$300,000 annual aggregate covering all motor vehicles, including owned, leased, non-owned, and hired vehicles that are or will be used in providing services under this Agreement. Supplier shall provide Buyer with evidence of current coverage upon request.

#### 11. Confidentiality.

This Agreement, and all pricing and other information furnished by either party hereunder are the proprietary and confidential information ("Information") of the disclosing party, to be kept confidential for ten (10) years after termination hereof, provided (i) the receiving party may disclose Information to the extent legally obligated if such party provides notice to the disclosing party where practicable; and (ii) either party may disclose the Agreement to enforce its rights hereunder.

#### 12. Term.

This Agreement will be in effect from the Effective Date ("Initial Term") and will continue in effect as to each Rider for the Basic Term in each Rider. At the expiration of the Initial Term, this Agreement can **RENEW FOR SUCCESSIVE ONE (1) YEAR TERMS UPON THE EXECUTION OF A MUTUALLY SIGNED AMENDMENT.**

#### Termination With Cause.

Should either Party default on its obligations under this Agreement, the other Party has the right to notify them in writing of the breach, and the Party in default shall have ten (10) business days to cure such breach. Should the Party in default fail to cure the default within the ten (10) day period, the other Party shall have the right to immediately terminate this Agreement.

#### Termination Without Cause.

Effectively immediately following completion of the Initial Term, either Party may terminate this Agreement at any time without stating a cause or reason and without penalty upon sixty (60) days' prior written notice to the other Party.

#### 13. Dispute Resolution.

A party that reasonably believes the other party has failed to fulfill any obligation hereunder shall prior to commencing any legal action, promptly notify the other party. If the parties cannot, in good faith discussions, resolve their dispute, they may pursue all remedies under law without prejudice.

**14. Assignment and Notice.**

This Agreement (i) may not be assigned without the prior written consent of the other party, except to an affiliate of Seller; and (ii) will inure to the benefit of, and be binding upon, the successors and permitted assigns of the parties. Except as otherwise stated herein, notices shall be in writing and deemed given on the date hand delivered, mailed or electronically transmitted to either party at the address in the preamble above.

**15. General.**

The entire agreement is contained herein and in the Rider(s) and any other or different current or subsequent terms or conditions, including on any website or in any purchase orders, will be deemed null and void unless duly executed by both parties, regardless of any party's "acceptance" by any means including electronically. This Agreement supersedes any prior agreement(s) among the parties covering the supply of Product or Equipment to Buyer's Location(s). If Seller records any telephone conversations, notice of such recordings will be provided and Buyer hereby consents to such recordings. Modifications and waivers hereof are not binding unless in writing by both

parties and a waiver will apply solely to the instance for which sought. Headings are solely for convenience, and shall not be used to interpret the Agreement. The word "including" and variations thereof used herein are deemed to be followed by the words "without limitation." Any rule of construction to the effect that ambiguities are to be resolved against the drafting party shall not apply. In the event of conflict between the terms and conditions contained in this Agreement and any Rider, the Rider will govern. This Agreement will be governed by the laws of the State of California. This Agreement may be executed in counterparts, each of which shall be deemed an original and all of which together shall constitute one and the same instrument and may be delivered by a party by facsimile transmission or by email. If any provision or portion thereof herein or in any Rider is held invalid, illegal or unenforceable, the validity, legality and enforceability of the remaining provisions or portions shall not in any way be affected or impaired thereby. **THE PARTIES WAIVE TO THE FULLEST EXTENT PERMITTED BY LAW ANY RIGHT TO A TRIAL BY JURY IN ANY ACTION OR PROCEEDING IN ANY WAY RELATING TO THIS AGREEMENT.**

**BY SIGNING BELOW, BUYER AND SELLER EACH ACKNOWLEDGE AND AGREE THAT THIS AGREEMENT IS CONDITIONAL UPON THE TERMS AND CONDITIONS HEREIN AND ON ANY RIDER OR OTHER ATTACHMENT HERETO.** Buyer and Seller intending to be legally bound have by the signatures of their authorized representatives executed this Agreement as of the date first above written.

Salinas Valley Memorial Healthcare System as Salinas Valley Health **(Buyer)**

**LINDE GAS & EQUIPMENT INC. (Seller)**

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

Submitted by: Patrick Larimer  
Signature: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Name & Title: Jennifer Claggett- Regional Manager- Healthcare- US West

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

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

Rev6/22

## Board Paper: Finance Committee

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Agenda Item: Consider Recommendation to Board to Approve Project Budget and Major Medical Equipment Purchases for the Salinas Valley Health Medical Center Interventional Radiology and Catheterization Laboratory Equipment Replacement Project

Executive Sponsor: Clement Miller, Chief Operating Officer  
Christianna Kearns, Associate Chief Operating Officer  
John Kazel, Director of Radiology

Date: May 8, 2024

### Executive Summary

The cardiac catheterization (cath) lab and the Interventional Radiology Lab are critical areas for treating patients with heart disease, peripheral vascular disease and many other diseases of the vascular, gastrointestinal, hepatobiliary, genitourinary, pulmonary, and musculoskeletal system. As a ST Elevation Myocardial Infarction (STEMI) receiving center, Salinas Valley Health (SVH) is required to maintain fully operational catheterization labs. The fluoroscopy equipment in Interventional Radiology and catheterization lab 3 has reached end of useful life and will no longer be serviceable by the vendor (Siemens) as of December 31, 2025. Current project planning encompasses full replacement of existing equipment and building components within the procedure and control rooms. All planned renovations require a building permit from California's Department of Health Care Access and Information (HCAI).

### Background/Situation

The current equipment in the Interventional Radiology Lab and Cath Lab 3, (installed in) has reached end of useful life. The existing fluoroscopy equipment will no longer be serviced by the medical equipment vendor (Siemens) as of December 31, 2025. Other supporting building components located within the procedure and control rooms (i.e. cabinetry, storage, lights etc.) are obsolete and no longer serve the needs of the physicians and staff. The control and procedure rooms require a complete overhaul to comply with current regulations and accommodate the procedures taking place in that space (i.e. structural heart, peripheral vascular, cardiac cath). Additionally, upgrading our imaging equipment in both suites will provide capacity for growth in endovascular cardiac and vascular service lines.

### Timeline/Review Process:

December 2023 - June 2024 – Solicit equipment vendors & finalize equipment package purchases  
March 2024 – November 2024 – Finalize design packages & HCAI approvals/permits  
Winter 2024 – Bid process & contractor selection  
Winter 2024 – Summer 2025 – Construction Activity & temporary trailer utilization  
Spring 2025 – Activate & occupy IR Suite  
Summer 2025 – Activate & occupy Cath Lab 3 Suite

### Pillar/Goal Alignment:

Service    People    Quality    Finance    Growth    Community

### Financial/Quality/Safety/Regulatory Implications:

Fiscal year 2024, 2025, 2026 capital budget allocated funding for planning, design, and construction activities required to complete the renovations are indicated below. After completion of the construction bidding process, we will return to the Board for consideration of the construction contract award. Major purchases are identified as follows with Vizient group purchase order discounts applied:

Total Planned Capital Budget(s):

CIP 01.1250.3760 (IR Suite)	\$4,140,627
CIP 01.1250.3765 (CLab3 suite)	<u>\$4,300,526</u>
Total:	\$8,441,153

Total Planned Capital Cash Flow Projections

CIP 01.1250.3760 (IR Suite)	
Fiscal Year 2024	\$100,000
Fiscal Year 2025	\$4,040,627
CIP 01.1250.3765 (CLab3 Suite)	
Fiscal Year 2024	\$50,000
Fiscal Year 2025	\$500,000
Fiscal Year 2026	\$3,750,526

Major Fixed Equipment Costs:

Cath Lab 3 and Interventional Radiology- Fluoroscopy Capital Equipment

Philips	Expense:	\$3,906,091.14
Cath Lab 3 and IR Monitors, Lights, Booms and Cabinets		
JM Keckler	Expense:	<u>\$ 517,059.38</u>
Total Major Fixed Equipment:		\$4,423,150.52

Temporary Facility (mobile trailer through construction) Cost: \$ 525,000.00

Expected 5-year Service Agreement Cost (not included in CIP totals) \$2,051,848.00

Recommendation

**Consider recommendation to Board of Directors to (i) approve the total estimated project cost for the SVH Interventional Radiology and Catheterization Laboratory Equipment Replacement Project(s) in the budgeted amount of \$8,441,153.00, (ii) award the capital equipment purchase to Philips Healthcare for the SVH Interventional Radiology and Catheterization Fluoroscopy Equipment Replacement, in the amount of \$3,906,091.14, (iii) award the capital equipment purchases to JM Keckler Medical Company Incorporated for the SVH Interventional Radiology and Catheterization Laboratory Equipment Replacement, in the amount of \$261,152.30, (iv) award the capital equipment purchases to JM Keckler Medical Company Incorporated for the SVH Interventional Radiology and Catheterization Laboratory Cabinetry Replacement, in the amount of \$255,907.08, as presented and (v) approve the five (5) year expected service agreement cost in the amount of \$2,051,848.00 to commence after warranty period.**

Attachments:

- (1) Philips IR Fluoroscopy Quote (Closed Session)
- (2) Philips CLab3 Fluoroscopy Quote (Closed Session)
- (3) Philips IR Service Agreement Quote (Closed Session)
- (4) Philips CLab3 Service Agreement Quote (Closed Session)
- (5) Keckler Skytron Light/Boom Quote
- (6) Keckler Logiquip Cabinetry Quote
- (7) Mobile Devices trailer Quote
- (8) Global Project Budget Breakdowns



# Salinas Valley Memorial Hospital

Megan Giovanetti  
450 E Romie Ln  
Salinas, CA 93901-4098



**DATE**  
04-09-2024

**EXPIRES**  
08-07-2024

PRESENTED BY



**ACCOUNT MANAGER:** Trina McNeil

**SALINAS VALLEY MEMORIAL HOSPITAL-IR ROOM**

Quote#: Q-87326-1

ATTENTION

## Salinas Valley Memorial Hospital

450 E Romie Ln  
Salinas, CA 93901-4098Megan Giovanetti  
mgiovanetti@SalinasValleyHealth.com  
(831) 809-0191

Hello,

Attached is the quote that you requested. Please make your PO out to Skytron and email to trina@kecklermedical.com or fax to 209-847-4166. For additional information please contact me at 800-523-1010 ext.111. Thank you for your business opportunity.

Mobile: 800-523-1010 ext.111

Trina McNeil  
trina@kecklermedical.com  
J.M. Keckler Medical Co., Inc.

QUOTE

Q-87326-1

DATE

04-09-2024

EXPIRES

08-07-2024

Salinas Valley Memorial Hospital

450 E Romie Ln  
Salinas, CA 93901-4098

# SALINAS VALLEY MEMORIAL HOSPITAL-IR ROOM

QUOTE Q-87326-1

## PRICING SUMMARY

PRODUCT	QTY	LIST PRICE	LIST PRICE EXTENDED	QUOTED PRICE	QUOTED PRICE EXTENDED
Booms - Freedom: Mount A: Radiation Shield w/ Light	1	\$ 41,384.00	\$ 41,384.00	\$ 29,614.08	\$ 29,614.08
Booms - Freedom: Mount B: Philips Monitor	1	\$ 32,711.00	\$ 32,711.00	\$ 23,591.40	\$ 23,591.40
Booms - Freedom: Mount C: Radiation Shield	1	\$ 21,480.00	\$ 21,480.00	\$ 15,465.60	\$ 15,465.60
Lights: Mount D: Quad Lucina 4 Lights	1	\$ 29,054.00	\$ 29,054.00	\$ 20,692.14	\$ 20,692.14
Subtotal					\$ 89,363.22
Skytron One: Solutions Fees: Q-87326					\$ 44,193.15
Handling					\$ 1,117.04
<b>TOTAL INVESTMENT</b>					<b>\$ 134,673.41</b>
<b>REQUIRED DEPOSIT</b>					<b>\$ 17,167.77</b>
		<b>Subtotal</b>	<b>\$134,673.41</b>		
		<b>Allow for Sales Tax</b>	<b>\$ 8,266.10</b>		
		<b>Total Budget</b>	<b>\$142,939.51</b>		

### QUOTE (Q-87326) SPECIFIC TERMS AND CONDITIONS

GPO Vizient - 1 (1151)  
 ISSUE PO TO Skytron, LLC · PO Box 888615, Grand Rapids, MI, 49588 · P: 616-656-2900 · trina@kecklermedical.com or fax to 209-847-4166  
 REMIT TO Skytron, LLC · PO Box 675164, Detroit, MI, 48267-5164

**QUOTE**  
Q-87326-1

**DATE**  
04-09-2024

**EXPIRES**  
08-07-2024

## PRICING DETAIL

### BOOMS - FREEDOM: MOUNT A: RADIATION SHIELD W/ LIGHT

Reference #: C-129283-5

Ceiling Height: 114 (2896mm)

Power Type: Non-Isolated Power

Top Arm Clearance: 6.5" (Short Hub)

Gas Style: None

ITEM	DESCRIPTION	QTY EXTENDED	LIST PRICE UNIT	QUOTED PRICE UNIT	QUOTED PRICE EXTENDED
F110 SERIES	F110 SERIES MOUNT WITH 1 LD ARM	1	Included	Included	Included
4PIK-MTG	Mounting plate pre-install kit, mounting hardware sold separately	1	\$ 800.00	\$ 576.00	\$ 576.00
4CC-ML-00	Ceiling cover MD 4.1" LD 4.5" minimum arm clearance, Freedom	1	\$ 650.00	\$ 468.00	\$ 468.00
4LDS-S-1	Stackmodule F110 Short, Freedom	1	\$ 3,100.00	\$ 2,232.00	\$ 2,232.00
4SP-AUA1	Aurora lamp spindle single, Freedom	1	\$ 800.00	\$ 576.00	\$ 576.00
H9-200-37	Boom Mounting Hardware Kit, Includes 6 rods, 24 nuts, 1-1/4" x 13"	1	\$ 340.00	\$ 244.80	\$ 244.80
4TL-43	Primary 43" LD horizontal arm (not on 4LLS), Freedom	1	\$ 2,000.00	\$ 1,440.00	\$ 1,440.00
42A-43L	Secondary 43" LD Vertical spring arm (1750N) 13-32 lbs, Freedom	1	\$ 5,100.00	\$ 3,672.00	\$ 3,672.00
4LD-E3	Adapter LD Freedom to LD Ergon3, Freedom	1	\$ 940.00	\$ 676.80	\$ 676.80
4VSTL-6	6" Alu LD VST, Freedom	1	\$ 210.00	\$ 151.20	\$ 151.20
X-RAY 50001-A	MAVIG X-Ray Shield 61x76 cm center mounted with cutout. 3AFC-M arms only. Ergon 3.	1	\$ 7,000.00	\$ 5,040.00	\$ 5,040.00
AUA5B	Single Fixture with 24" diameter center focus Aurora Four LED light on 35.25" radial arm	1	\$ 18,000.00	\$ 12,780.00	\$ 12,780.00
B3-320-01-12	VST NON TV AURORA 12" WITH BRUSH BLOCK	1	Included	Included	Included
B9-720-01-RS	SINGLE WALL INTENSITY CONTROL WITH RS232 CONNECTION FOR AURORA FOUR AUA SERIES ONLY	1	\$ 2,300.00	\$ 1,633.00	\$ 1,633.00
B9-210-57-1	Wall Control Back Box; Aurora, Stellar & Nautilus (single and dual only)	1	\$ 68.00	\$ 48.28	\$ 48.28

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08-07-2024



ITEM	DESCRIPTION	QTY EXTENDED	LIST PRICE UNIT	QUOTED PRICE UNIT	QUOTED PRICE EXTENDED
B1-530-10	CENTER FOCUS HANDLE WITH INTENSITY CONTROL AUR/AUT/AUA SERIES	1	\$ 76.00	\$ 76.00	\$ 76.00
<b>TOTAL</b>					<b>\$ 29,614.08</b>

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04-09-2024

**EXPIRES**

08-07-2024

## PRICING DETAIL

### BOOMS - FREEDOM: MOUNT B: PHILIPS MONITOR

Reference #: C-129284-1  
 Ceiling Height: 114 (2896mm)  
 Power Type: Non-Isolated Power  
 Top Arm Clearance: 7.5"  
 Gas Style: None

ITEM	DESCRIPTION	QTY EXTENDED	LIST PRICE UNIT	QUOTED PRICE UNIT	QUOTED PRICE EXTENDED
F310 SERIES	F310 SERIES MOUNT WITH 1 HD ARM	1	Included	Included	Included
4PIK-MTG	Mounting plate pre-install kit, mounting hardware sold separately	1	\$ 800.00	\$ 576.00	\$ 576.00
4CC-HD-05	Ceiling cover 6.3" – 10.4" arm clearance HD stack, Freedom	1	\$ 1,000.00	\$ 720.00	\$ 720.00
4HD-BC-F	Bottom cover, HD, w/o light spindle hole, Freedom	1	\$ 141.00	\$ 141.00	\$ 141.00
H9-200-37	Boom Mounting Hardware Kit, Includes 6 rods, 24 nuts, 1-1/4" x 13"	1	\$ 340.00	\$ 244.80	\$ 244.80
4EC-68	Primary 68" HD Active Assist Horizontal arm, Freedom	1	\$ 12,000.00	\$ 8,640.00	\$ 8,640.00
4VSTHM-5	5" Steel VST MD/HD (for Stack or ED arm), Freedom	1	\$ 690.00	\$ 496.80	\$ 496.80
42E-40H	Secondary 40" HD/MD Vert. motor arm 206 - 434 lbs.	1	\$ 14,000.00	\$ 10,080.00	\$ 10,080.00
4MCS-PHILIPS	Adapter HD/MD for Philips MCS, Freedom	1	\$ 2,900.00	\$ 2,088.00	\$ 2,088.00
4A-PH-UD	2E Up/down cntr. for 4MCS-Philips (2 pos.), Freedom	1	\$ 840.00	\$ 604.80	\$ 604.80
<b>TOTAL</b>					<b>\$ 23,591.40</b>

**QUOTE**  
Q-87326-1

**DATE**  
04-09-2024

**EXPIRES**  
08-07-2024

## PRICING DETAIL

### BOOMS - FREEDOM: MOUNT C: RADIATION SHIELD

Reference #: C-129288-3  
 Ceiling Height: 114 (2896mm)  
 Power Type: Non-Isolated Power  
 Top Arm Clearance: 12.5" (Long Hub) **\*\*NON-STOCK\*\***  
 Gas Style: None

ITEM	DESCRIPTION	QTY EXTENDED	LIST PRICE UNIT	QUOTED PRICE UNIT	QUOTED PRICE EXTENDED
F110 SERIES	F110 SERIES MOUNT WITH 1 LD ARM	1	Included	Included	Included
4PIK-MTG	Mounting plate pre-install kit, mounting hardware sold separately	1	\$ 800.00	\$ 576.00	\$ 576.00
4CC-ML-00	Ceiling cover MD 4.1" LD 4.5" minimum arm clearance, Freedom	1	\$ 650.00	\$ 468.00	\$ 468.00
4LDS-L-1	Stackmodule F110 Long, Freedom	1	\$ 4,400.00	\$ 3,168.00	\$ 3,168.00
H9-200-37	Boom Mounting Hardware Kit, Includes 6 rods, 24 nuts, 1-1/4" x 13"	1	\$ 340.00	\$ 244.80	\$ 244.80
4TL-50	Primary 50" LD horizontal arm (not on 4LLS), Freedom	1	\$ 2,100.00	\$ 1,512.00	\$ 1,512.00
42A-43L	Secondary 43" LD Vertical spring arm (1750N) 13-32 lbs, Freedom	1	\$ 5,100.00	\$ 3,672.00	\$ 3,672.00
4LD-E3	Adapter LD Freedom to LD Ergon3, Freedom	1	\$ 940.00	\$ 676.80	\$ 676.80
4VSTL-3	3" Alu LD VST, Freedom	1	\$ 150.00	\$ 108.00	\$ 108.00
X-RAY 50001-A	MAVIG X-Ray Shield 61x76 cm center mounted with cutout. 3AFC-M arms only. Ergon 3.	1	\$ 7,000.00	\$ 5,040.00	\$ 5,040.00
<b>TOTAL</b>					<b>\$ 15,465.60</b>

**QUOTE**  
Q-87326-1

**DATE**  
04-09-2024

**EXPIRES**  
08-07-2024

## PRICING DETAIL

### LIGHTS: MOUNT D: QUAD LUCINA 4 LIGHTS

Reference #: C-129285-1

Ceiling Height (inches): 114

ITEM	DESCRIPTION	QTY	LIST	QUOTED	QUOTED
		EXTENDED	PRICE	PRICE	PRICE
			UNIT	UNIT	EXTENDED
LCN4-PKG4	Lucina 4 Quad Light Package, consisting of four light heads, B5-014-101 wall control, B5-014-39 Control Wand, B5-014-40 Stand for Control Wand. DOES NOT INCLUDE OPTIONAL BACK BOX.	1	\$ 28,732.00	\$ 20,399.72	\$ 20,399.72
B5-014-41	Back Box for Lucina 4 wall controls	1	\$ 102.00	\$ 72.42	\$ 72.42
B5-010-02-1	Sterile drape for Argos control wand, 50 per case	1	\$ 220.00	\$ 220.00	\$ 220.00
<b>TOTAL</b>					<b>\$ 20,692.14</b>

**QUOTE**

Q-87326-1

**DATE**

04-09-2024

**EXPIRES**

08-07-2024

## PRICING DETAIL

### SKYTRON ONE: SOLUTIONS FEES: Q-87326

Reference #: C-129286-4

ITEM	DESCRIPTION	QTY EXTENDED
SERV-926-01	Installation of ceiling mounted boom system, model series, 100, 110 and 120 without integral lighting system. Includes pre-installation walk through, installation, full functional testing of the system and one structural test, to manufacturers specifications. Does not include electrical wiring or structure installation.	1
SERV-926-02	Installation of ceiling mounted boom system, model series, 100, 110 and 120 with integral lighting system. Includes pre-installation walk through, installation, full functional testing of the system and one structural test, to manufacturers specifications. Does not include electrical wiring, wall control unit rough in, or structure installation.	1
SERV-926-05	Installation of ceiling mounted boom system, model series, 300, 310, 320, 330 without integral lighting system. Includes pre-installation walk through, installation, full functional testing of the system and one structural test, to manufacturers specifications. Does not include electrical wiring or structure installation.	1
SERV-926-15	Installation, inspection and warranty certification of recessed lighting system, single mount or up to Four (4) flush ceiling mounted exam system, model series Lucna4 (2). Includes pre-installation walk through, installation and full functional testing of the system. Does not include electrical wiring, structure or wall control unit rough in. Pricing does not include weekend/after hours work.	1
SERV-927-20	Project Management	14
SERV-929-01	Mobilization of service team for site specific required service engagement. Includes all transportation of necessary support equipment/service technician(s) for required service. Does not include transportation of point of service equipment required for the engagement.	1
<b>PRODUCT TOTAL</b>		<b>\$ 44,193.15</b>

**QUOTE**

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**DATE**

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**EXPIRES**

08-07-2024

## PRICING DETAIL

### SOLUTIONS: DETAILS ONLY - PRICING PRESENTED IN SKYTRON ONE: SOLUTIONS FEES

ITEM	DESCRIPTION	QTY	LIST PRICE UNIT	QUOTED PRICE UNIT	QUOTED PRICE EXTENDED
PROJECT SCOPE	As you budget for this project you should include your facilities management team to review the project scope.	1	\$0.00	\$0.00	\$0.00
INSTALL-LIGHT	*Installation quoted to take place in the same trip as installation of Freedom Booms. If separate trips are needed, additional trip charges will be applied.	1	\$0.00	\$0.00	\$0.00

Installation pricing is an estimate only until site survey is conducted to determine if any additional site preparation is required for proper installation of equipment.

Installation price is on facility provided mount and electrical. Includes installation of wall control to facility installed back box. All electrical connections and final ties must be made by a qualified electrician.

Quoted prices are based on installation being performed during normal business hours Monday thru Friday, 8:00 am to 5:00 pm and to be performed within one year from receipt of purchase order. Installation beyond normal hours and time frame must be negotiated and a purchase order issued. Should the delivery and installation team arrive at the requested date and time specified by the facility/contractor and the facility is not ready a purchase order for additional costs will be required before installation actually begins. Any installation with a duration of more than 30 days will have progress billings & payments. A schedule of values with milestones will be submitted at the early stages of project development.

QUOTE

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ITEM	DESCRIPTION	QTY	LIST PRICE UNIT	QUOTED PRICE UNIT	QUOTED PRICE EXTENDED
INSTALL-BOOM	<p>*Installation quoted to take place in one trip over consecutive days. If more trips are needed, additional trip charges will be applied.</p> <p>Installation pricing is an estimate only until site survey is conducted to determine if any additional site preparation is required for proper installation of equipment.</p> <p>Installation pricing is to facility provided electrical and mounts. Installation includes one mount test and final adjustments. Additional mount tests are \$600.00 per mount per test (purchase order required for re-test).</p> <p>If existing cables are to be re-used, pricing does not include removal of existing cables or install of other mfg cables, new or used. This would need to be completed by the supplier and coordinated with our install team for them to pull their cables while we are installing. Pricing does include install of up to 15 Skytron cable only.</p> <p>All electrical connections and final ties must be made by a qualified electrician. Access doors are required at each mount and must be provided by facility.</p> <p>Quoted prices are based on installation being performed during normal business hours Monday thru Friday, 8:00 am to 5:00 pm and to be performed within one year from receipt of purchase order. Installation beyond normal hours and time frame must be negotiated and a purchase order issued. Should the delivery and installation team arrive at the requested date and time specified by the facility/contractor and the facility is not ready a purchase order for additional costs will be required before installation actually begins. Any installation with a duration of more than 30 days will have progress billings &amp; payments. A schedule of values with milestones will be submitted at the early stages of project development.</p>	1	\$0.00	\$0.00	\$0.00
DEINSTALL	Deinstallation of existing equipment to be performed by hospital's own facilities team or contractor. If you would like Keckler to perform deinstallation, additional fee will apply.	1	\$0.00	\$0.00	\$0.00
PROJECT MGMT FEE	Initiating, planning, executing, controlling, and closing the work to achieve the specific goals and criteria to assure a successful outcome.	1	\$0.00	\$0.00	\$0.00
STORAGE	Customer will receive the product at their facility and store until ready for installation. If storage and staging is requested of J.M. Keckler Medical then please contact your sales representative for pricing and terms.	1	\$0.00	\$0.00	\$0.00

**QUOTE**

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08-07-2024

ITEM	DESCRIPTION	QTY	LIST PRICE UNIT	QUOTED PRICE UNIT	QUOTED PRICE EXTENDED
TOTAL					\$0.00

**QUOTE**

Q-87326-1

**DATE**

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**EXPIRES**

08-07-2024



## TERMS AND CONDITIONS

**CHANGE ORDER FEE:** Change order fees, equal to five percent (5%) of order total, apply if order changes occur within 60 days prior to shipment.

**CANCELLATION FEE:** Eight percent (8%) cancellation fee will be invoiced or deposit will be forfeited on cancelled items of an equipment order.

**DRAWING CHANGE FEE:** \$200.00 Drawing Revision Charge will be invoiced after 2nd submittal revision, and after 1st fabrication revision. \$750.00 Fabrication Revision Charge will be invoiced if revision is within 45 days of shipping.

**MINIMUM ORDER FEE:** Orders with a product total less than \$25.00 are subject to a \$20 non-refundable minimum order fee added to the invoice.

### **RE-STOCKING FEE:**

- a. Equipment - 20% re-stocking fee will apply to all returns for credit of new equipment not yet installed, within 180 days of shipment. Refurbishment charges, if any, are calculated upon inspection of goods when received. All returns to be authorized by Skytron in advance.
- b. Parts - \$50.00 re-stocking fee for inspection/testing, and up to five percent (5%) of item cost for repair/refurbishing charge (not to exceed \$2,500 per item). Non-warranty part returns with a List Price less than \$100.00 per item are not accepted.
- c. Re-Stocking policy does not supersede Skytron's North American Warranty policy, Demo policy, or Table Pad Return policy.

**WORKING HOURS:** All service and installation pricing is based on normal working hours: 8AM to 5PM, Monday thru Friday, excluding holidays.

**UNION LABOR:** Facilities requiring the use of union labor must be identified as such for quoting purposes.

**SEISMIC REQUIREMENTS:** Please notify Skytron's Service Manager for installations having specific seismic requirements. Skytron is not responsible for any x-raying of the floor, structural ceiling through bolting, and associated fasteners.

**SERVICE CONTRACTS:** A signed service contract is required for service programs included in this quote, if applicable. A preliminary evaluation of product may be required for product that has been in use for some time.

**SCHEDULING AND TRADE-IN EQUIPMENT:** Contact Skytron's Service Manager a minimum of 15 working days prior to desired installation date. Large and intensive projects requiring multiple phases require a minimum 60-day notice before installation commences. Notice is required for installation where trade-in equipment will be present. If required, for a fee, Skytron can disconnect and remove existing equipment.

**ELECTRICAL CONNECTIONS, FINAL TIE-INS AND FINISHES:** All final tie-ins of electrical connections, plumbing and media must be made by a qualified and licensed individual. Skytron does not provide final tie-in services due to local licensing regulations. Finish work (e.g. caulking and trim) is the responsibility of others. Installation of standard product moldings or trim is included in the pricing provided.

### **MISCELLANEOUS:**

- a. Unless otherwise noted, Skytron reserves the right to make product improvements, discontinue products or change prices without notice.
- b. Unless otherwise noted, quoted amounts do not include freight costs and applicable taxes. Freight and tax rates in effect at time of shipment will be applied.
- c. For products combining lights and equipment pendants, include installation pricing for both individual units.
- d. Buyer expressly agrees that no terms and conditions shall supersede those in this quote without express, written consent of Skytron.

**UV DISINFECTION, IF APPLICABLE:** In order to maintain warranty on UV Disinfection products (IPT UV-C), a service contract must be purchased from Skytron, and service work performed by a Skytron Service Technician. Failure to comply with the terms of the service contract may void warranty. Service contract terms and conditions are available upon request.

QUOTE

Q-87326-1

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EXPIRES

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## TERMS AND CONDITIONS CONTINUED VIZIENT

### PAYMENT TERMS

Net thirty (30) days after date of invoice, subject to credit approval.  
Shipping and Taxes are not included in this quote unless itemized above. All products are invoiced upon shipment.

### WARRANTY

1 – year Parts and Labor on contracted products.  
1 - year Parts and Labor on non-contracted products.  
90 - days on replacement parts, spare bulbs (surgical lights), spare pads (surgical tables), supplies, and accessory items.  
15 - years on sterilizer pressure vessel (steam chamber and jacket).  
*\*In order to maintain warranty on UV Disinfection products (IPT UV-C), a service contract must be purchased from Skytron, and service work performed by a Skytron Service Technician. Failure to comply with the terms of the service contract may void warranty. Service contract terms and conditions are available upon request.*

### FREIGHT TERMS

F.O.B. Destination. Freight Prepaid and Added. All shipments subject to handling charge.

### DELIVERY

120 Days after receipt of order.  
Due to the COVID-19 pandemic and increased demand, delivery times may exceed 120 days.

### DEPOSIT

25% deposit required for Booms and Active RTLS upon order acceptance.  
50% deposit required for Integration and custom products upon order acceptance.

### CONTRACT NUMBER

CE7191 (Stainless Steel); CE7201 (Lights, Booms, Integration)  
CE7211 (Tables and Accessories); CE7593 (Sterilizers)  
CE7598 (Washers and Decontaminators)

*I acknowledge that I have reviewed and accept the content of this quote in its entirety.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

\_\_\_\_\_  
Customer Purchase Order Number

\_\_\_\_\_  
Billing Address

\_\_\_\_\_  
Delivery Address

**QUOTE**  
Q-87326-1

**DATE**  
04-09-2024

**EXPIRES**  
08-07-2024



# Salinas Valley Memorial Hospital

Megan Giovanetti  
450 E Romie Ln  
Salinas, CA 93901-4098



**DATE**  
04-09-2024

**EXPIRES**  
08-07-2024

PRESENTED BY



**ACCOUNT MANAGER:** Trina McNeil

## SALINAS VALLEY MEMORIAL HOSPITAL- CATH LAB #3 BOOM REPLACEMENT

Quote#: Q-87300-1

ATTENTION

## Salinas Valley Memorial Hospital

450 E Romie Ln  
Salinas, CA 93901-4098Megan Giovanetti  
mgiovanetti@SalinasValleyHealth.com  
(831) 809-0191

Hello,

Attached is the quote that you requested. Please make your PO out to Skytron and email to trina@kecklermedical.com or fax to 209-847-4166. For additional information please contact me at 800-523-1010 ext.111. Thank you for your business opportunity.

Mobile: 800-523-1010 ext.111

Trina McNeil  
trina@kecklermedical.com  
J.M. Keckler Medical Co., Inc.

QUOTE

Q-87300-1

DATE

04-09-2024

EXPIRES

08-07-2024



ATTENTION

### Salinas Valley Memorial Hospital

450 E Romie Ln  
Salinas, CA 93901-4098

# SALINAS VALLEY MEMORIAL HOSPITAL-CATH LAB #3 BOOM REPLACEMENT

QUOTE Q-87300-1

## PRICING SUMMARY

PRODUCT	QTY	LIST PRICE	LIST PRICE EXTENDED	QUOTED PRICE	QUOTED PRICE EXTENDED
Booms - Freedom: Mount A: Radiation Shield w/ Light	1	\$ 41,384.00	\$ 41,384.00	\$ 29,614.08	\$ 29,614.08
Booms - Freedom: Mount B: Philips Monitor	1	\$ 32,711.00	\$ 32,711.00	\$ 23,591.40	\$ 23,591.40
Lights: Mount C: Quad Lucina 4 Light	1	\$ 29,054.00	\$ 29,054.00	\$ 20,692.14	\$ 20,692.14
Subtotal					\$ 73,897.62
Skytron One: Solutions Fees: Q-87300					\$ 36,558.92
Handling					\$ 923.72
<b>TOTAL INVESTMENT</b>					<b>\$ 111,380.26</b>
<b>REQUIRED DEPOSIT</b>					
		Subtotal	\$ 111,380.26		\$ 13,301.37
		Allow for Sales Tax	\$ 6,835.53		
		<b>Total Budget</b>	<b>\$ 118,212.79</b>		

### QUOTE (Q-87300) SPECIFIC TERMS AND CONDITIONS

GPO Vizient - 1 (1151)  
 ISSUE PO TO Skytron, LLC · PO Box 888615, Grand Rapids, MI, 49588 · P: 616-656-2900 · trina@kecklermedical.com or fax to 209-847-4166  
 REMIT TO Skytron, LLC · PO Box 675164, Detroit, MI, 48267-5164

**QUOTE**  
Q-87300-1

**DATE**  
04-09-2024

**EXPIRES**  
08-07-2024

Salinas Valley Memorial Hospital-Cath Lab #3  
Boom Replacement

PRICING DETAIL  
BOOMS - FREEDOM: MOUNT A: RADIATION SHIELD W/ LIGHT

Reference #: C-129237-2  
 Ceiling Height: 114 (2896mm)  
 Power Type: Non-Isolated Power  
 Top Arm Clearance: 6.5" (Short Hub)  
 Gas Style: None

ITEM	DESCRIPTION	QTY EXTENDED	LIST PRICE UNIT	QUOTED PRICE UNIT	QUOTED PRICE EXTENDED
F110 SERIES	F110 SERIES MOUNT WITH 1 LD ARM	1	Included	Included	Included
4PIK-MTG	Mounting plate pre-install kit, mounting hardware sold separately	1	\$ 800.00	\$ 576.00	\$ 576.00
4CC-ML-00	Ceiling cover MD 4.1" LD 4.5" minimum arm clearance, Freedom	1	\$ 650.00	\$ 468.00	\$ 468.00
4LDS-S-1	Stackmodule F110 Short, Freedom	1	\$ 3,100.00	\$ 2,232.00	\$ 2,232.00
4SP-AUA1	Aurora lamp spindle single, Freedom	1	\$ 800.00	\$ 576.00	\$ 576.00
H9-200-37	Boom Mounting Hardware Kit, Includes 6 rods, 24 nuts, 1-1/4" x 13"	1	\$ 340.00	\$ 244.80	\$ 244.80
4TL-43	Primary 43" LD horizontal arm (not on 4LLS), Freedom	1	\$ 2,000.00	\$ 1,440.00	\$ 1,440.00
42A-43L	Secondary 43" LD Vertical spring arm (1750N) 13-32 lbs, Freedom	1	\$ 5,100.00	\$ 3,672.00	\$ 3,672.00
4LD-E3	Adapter LD Freedom to LD Ergon3, Freedom	1	\$ 940.00	\$ 676.80	\$ 676.80
4VSTL-6	6" Alu LD VST, Freedom	1	\$ 210.00	\$ 151.20	\$ 151.20
X-RAY 50001-A	MAVIG X-Ray Shield 61x76 cm center mounted with cutout. 3AFC-M arms only. Ergon 3.	1	\$ 7,000.00	\$ 5,040.00	\$ 5,040.00
AUA5B	Single Fixture with 24" diameter center focus Aurora Four LED light on 35.25" radial arm	1	\$ 18,000.00	\$ 12,780.00	\$ 12,780.00
B3-320-01-12	VST NON TV AURORA 12" WITH BRUSH BLOCK	1	Included	Included	Included
B9-720-01-RS	SINGLE WALL INTENSITY CONTROL WITH RS232 CONNECTION FOR AURORA FOUR AUA SERIES ONLY	1	\$ 2,300.00	\$ 1,633.00	\$ 1,633.00
B9-210-57-1	Wall Control Back Box; Aurora, Stellar & Nautilus (single and dual only)	1	\$ 68.00	\$ 48.28	\$ 48.28

QUOTE  
Q-87300-1

DATE  
04-09-2024

EXPIRES  
08-07-2024

ITEM	DESCRIPTION	QTY EXTENDED	LIST PRICE UNIT	QUOTED PRICE UNIT	QUOTED PRICE EXTENDED
B1-530-10	CENTER FOCUS HANDLE WITH INTENSITY CONTROL AUR/AUT/AUA SERIES	1	\$ 76.00	\$ 76.00	\$ 76.00
<b>TOTAL</b>					<b>\$ 29,614.08</b>

**QUOTE**

Q-87300-1

**DATE**

04-09-2024

**EXPIRES**

08-07-2024

Salinas Valley Memorial Hospital-Cath Lab #3  
Boom Replacement

PRICING DETAIL  
BOOMS - FREEDOM: MOUNT B: PHILIPS MONITOR

Reference #: C-129238-2  
 Ceiling Height: 114 (2896mm)  
 Power Type: Non-Isolated Power  
 Top Arm Clearance: 7.5"  
 Gas Style: None

ITEM	DESCRIPTION	QTY EXTENDED	LIST PRICE UNIT	QUOTED PRICE UNIT	QUOTED PRICE EXTENDED
F310 SERIES	F310 SERIES MOUNT WITH 1 HD ARM	1	Included	Included	Included
4PIK-MTG	Mounting plate pre-install kit, mounting hardware sold separately	1	\$ 800.00	\$ 576.00	\$ 576.00
4CC-HD-05	Ceiling cover 6.3" – 10.4" arm clearance HD stack, Freedom	1	\$ 1,000.00	\$ 720.00	\$ 720.00
4HD-BC-F	Bottom cover, HD, w/o light spindle hole, Freedom	1	\$ 141.00	\$ 141.00	\$ 141.00
H9-200-37	Boom Mounting Hardware Kit, Includes 6 rods, 24 nuts, 1-1/4" x 13"	1	\$ 340.00	\$ 244.80	\$ 244.80
4EC-68	Primary 68" HD Active Assist Horizontal arm, Freedom	1	\$ 12,000.00	\$ 8,640.00	\$ 8,640.00
4VSTHM-5	5" Steel VST MD/HD (for Stack or ED arm), Freedom	1	\$ 690.00	\$ 496.80	\$ 496.80
42E-40H	Secondary 40" HD/MD Vert. motor arm 206 - 434 lbs.	1	\$ 14,000.00	\$ 10,080.00	\$ 10,080.00
4MCS-PHILIPS	Adapter HD/MD for Philips MCS, Freedom	1	\$ 2,900.00	\$ 2,088.00	\$ 2,088.00
4A-PH-UD	2E Up/down cntr. for 4MCS-Philips (2 pos.), Freedom	1	\$ 840.00	\$ 604.80	\$ 604.80
<b>TOTAL</b>					<b>\$ 23,591.40</b>

**QUOTE**  
Q-87300-1

**DATE**  
04-09-2024

**EXPIRES**  
08-07-2024



## Salinas Valley Memorial Hospital-Cath Lab #3 Boom Replacement

### PRICING DETAIL LIGHTS: MOUNT C: QUAD LUCINA 4 LIGHT

Reference #: C-129239-1

Ceiling Height (inches): 114

ITEM	DESCRIPTION	QTY EXTENDED	LIST PRICE UNIT	QUOTED PRICE UNIT	QUOTED PRICE EXTENDED
LCN4-PKG4	Lucina 4 Quad Light Package, consisting of four light heads, B5-014-101 wall control, B5-014-39 Control Wand, B5-014-40 Stand for Control Wand. DOES NOT INCLUDE OPTIONAL BACK BOX.	1	\$ 28,732.00	\$ 20,399.72	\$ 20,399.72
B5-014-41	Back Box for Lucina 4 wall controls	1	\$ 102.00	\$ 72.42	\$ 72.42
B5-010-02-1	Sterile drape for Argos control wand, 50 per case	1	\$ 220.00	\$ 220.00	\$ 220.00
<b>TOTAL</b>					<b>\$ 20,692.14</b>

**QUOTE**

Q-87300-1

**DATE**

04-09-2024

**EXPIRES**

08-07-2024

Salinas Valley Memorial Hospital-Cath Lab #3  
Boom Replacement

PRICING DETAIL  
SKYTRON ONE: SOLUTIONS FEES: Q-87300

Reference #: C-129240-2

ITEM	DESCRIPTION	QTY EXTENDED
SERV-926-02	Installation of ceiling mounted boom system, model series, 100, 110 and 120 with integral lighting system. Includes pre-installation walk through, installation, full functional testing of the system and one structural test, to manufacturers specifications. Does not include electrical wiring, wall control unit rough in, or structure installation.	1
SERV-926-05	Installation of ceiling mounted boom system, model series, 300, 310, 320, 330 without integral lighting system. Includes pre-installation walk through, installation, full functional testing of the system and one structural test, to manufacturers specifications. Does not include electrical wiring or structure installation.	1
SERV-926-15	Installation, inspection and warranty certification of recessed lighting system, single mount or up to Four (4) flush ceiling mounted exam system, model series Lucna4 (2). Includes pre-installation walk through, installation and full functional testing of the system. Does not include electrical wiring, structure or wall control unit rough in. Pricing does not include weekend/after hours work.	1
SERV-927-20	Project Management	14
SERV-929-01	Mobilization of service team for site specific required service engagement. Includes all transportation of necessary support equipment/service technician(s) for required service. Does not include transportation of point of service equipment required for the engagement.	1
<b>PRODUCT TOTAL</b>		<b>\$ 36,558.92</b>

QUOTE

Q-87300-1

DATE

04-09-2024

EXPIRES

08-07-2024

Salinas Valley Memorial Hospital-Cath Lab #3  
Boom Replacement

PRICING DETAIL

SOLUTIONS: DETAILS ONLY - PRICING PRESENTED IN SKYTRON ONE:  
SOLUTIONS FEES

ITEM	DESCRIPTION	QTY	LIST PRICE UNIT	QUOTED PRICE UNIT	QUOTED PRICE EXTENDED
PROJECT SCOPE	As you budget for this project you should include your facilities management team to review the project scope.	1	\$0.00	\$0.00	\$0.00
INSTALL-LIGHT	*Installation quoted to take place in the same trip as installation of Freedom Booms. If separate trips are needed, additional trip charges will be applied.	1	\$0.00	\$0.00	\$0.00

Installation pricing is an estimate only until site survey is conducted to determine if any additional site preparation is required for proper installation of equipment.  
 Installation price is on facility provided mount and electrical. Includes installation of wall control to facility installed back box. All electrical connections and final ties must be made by a qualified electrician.  
 Quoted prices are based on installation being performed during normal business hours Monday thru Friday, 8:00 am to 5:00 pm and to be performed within one year from receipt of purchase order. Installation beyond normal hours and time frame must be negotiated and a purchase order issued. Should the delivery and installation team arrive at the requested date and time specified by the facility/contractor and the facility is not ready a purchase order for additional costs will be required before installation actually begins. Any installation with a duration of more than 30 days will have progress billings & payments. A schedule of values with milestones will be submitted at the early stages of project development.

**QUOTE**  
Q-87300-1

**DATE**  
04-09-2024

**EXPIRES**  
08-07-2024

ITEM	DESCRIPTION	QTY	LIST PRICE UNIT	QUOTED PRICE UNIT	QUOTED PRICE EXTENDED
INSTALL-BOOM	<p>*Installation quoted to take place in one trip over consecutive days. If more trips are needed, additional trip charges will be applied.</p> <p>Installation pricing is an estimate only until site survey is conducted to determine if any additional site preparation is required for proper installation of equipment.</p> <p>Installation pricing is to facility provided electrical and mounts. Installation includes one mount test and final adjustments. Additional mount tests are \$600.00 per mount per test (purchase order required for re-test).</p> <p>If existing cables are to be re-used, pricing does not include removal of existing cables or install of other mfg cables, new or used. This would need to be completed by the supplier and coordinated with our install team for them to pull their cables while we are installing. Pricing does include install of up to 15 Skytron cable only.</p> <p>All electrical connections and final ties must be made by a qualified electrician. Access doors are required at each mount and must be provided by facility.</p> <p>Quoted prices are based on installation being performed during normal business hours Monday thru Friday, 8:00 am to 5:00 pm and to be performed within one year from receipt of purchase order. Installation beyond normal hours and time frame must be negotiated and a purchase order issued. Should the delivery and installation team arrive at the requested date and time specified by the facility/contractor and the facility is not ready a purchase order for additional costs will be required before installation actually begins. Any installation with a duration of more than 30 days will have progress billings &amp; payments. A schedule of values with milestones will be submitted at the early stages of project development.</p>	1	\$0.00	\$0.00	\$0.00
DEINSTALL	Deinstallation of existing equipment to be performed by hospital's own facilities team or contractor. If you would like Keckler to perform deinstallation, additional fee will apply.	1	\$0.00	\$0.00	\$0.00
PROJECT MGMT FEE	Initiating, planning, executing, controlling, and closing the work to achieve the specific goals and criteria to assure a successful outcome.	1	\$0.00	\$0.00	\$0.00
STORAGE	Customer will receive the product at their facility and store until ready for installation. If storage and staging is requested of J.M. Keckler Medical then please contact your sales representative for pricing and terms.	1	\$0.00	\$0.00	\$0.00

**QUOTE**

Q-87300-1

**DATE**

04-09-2024

**EXPIRES**

08-07-2024

ITEM	DESCRIPTION	QTY	LIST PRICE UNIT	QUOTED PRICE UNIT	QUOTED PRICE EXTENDED
TOTAL					\$0.00

**QUOTE**

Q-87300-1

**DATE**

04-09-2024

**EXPIRES**

08-07-2024

## TERMS AND CONDITIONS

**CHANGE ORDER FEE:** Change order fees, equal to five percent (5%) of order total, apply if order changes occur within 60 days prior to shipment.

**CANCELLATION FEE:** Eight percent (8%) cancellation fee will be invoiced or deposit will be forfeited on cancelled items of an equipment order.

**DRAWING CHANGE FEE:** \$200.00 Drawing Revision Charge will be invoiced after 2nd submittal revision, and after 1st fabrication revision. \$750.00 Fabrication Revision Charge will be invoiced if revision is within 45 days of shipping.

**MINIMUM ORDER FEE:** Orders with a product total less than \$25.00 are subject to a \$20 non-refundable minimum order fee added to the invoice.

### **RE-STOCKING FEE:**

- a. Equipment - 20% re-stocking fee will apply to all returns for credit of new equipment not yet installed, within 180 days of shipment. Refurbishment charges, if any, are calculated upon inspection of goods when received. All returns to be authorized by Skytron in advance.
- b. Parts - \$50.00 re-stocking fee for inspection/testing, and up to five percent (5%) of item cost for repair/refurbishing charge (not to exceed \$2,500 per item). Non-warranty part returns with a List Price less than \$100.00 per item are not accepted.
- c. Re-Stocking policy does not supersede Skytron's North American Warranty policy, Demo policy, or Table Pad Return policy.

**WORKING HOURS:** All service and installation pricing is based on normal working hours: 8AM to 5PM, Monday thru Friday, excluding holidays.

**UNION LABOR:** Facilities requiring the use of union labor must be identified as such for quoting purposes.

**SEISMIC REQUIREMENTS:** Please notify Skytron's Service Manager for installations having specific seismic requirements. Skytron is not responsible for any x-raying of the floor, structural ceiling through bolting, and associated fasteners.

**SERVICE CONTRACTS:** A signed service contract is required for service programs included in this quote, if applicable. A preliminary evaluation of product may be required for product that has been in use for some time.

**SCHEDULING AND TRADE-IN EQUIPMENT:** Contact Skytron's Service Manager a minimum of 15 working days prior to desired installation date. Large and intensive projects requiring multiple phases require a minimum 60-day notice before installation commences. Notice is required for installation where trade-in equipment will be present. If required, for a fee, Skytron can disconnect and remove existing equipment.

**ELECTRICAL CONNECTIONS, FINAL TIE-INS AND FINISHES:** All final tie-ins of electrical connections, plumbing and media must be made by a qualified and licensed individual. Skytron does not provide final tie-in services due to local licensing regulations. Finish work (e.g. caulking and trim) is the responsibility of others. Installation of standard product moldings or trim is included in the pricing provided.

### **MISCELLANEOUS:**

- a. Unless otherwise noted, Skytron reserves the right to make product improvements, discontinue products or change prices without notice.
- b. Unless otherwise noted, quoted amounts do not include freight costs and applicable taxes. Freight and tax rates in effect at time of shipment will be applied.
- c. For products combining lights and equipment pendants, include installation pricing for both individual units.
- d. Buyer expressly agrees that no terms and conditions shall supersede those in this quote without express, written consent of Skytron.

**UV DISINFECTION, IF APPLICABLE:** In order to maintain warranty on UV Disinfection products (IPT UV-C), a service contract must be purchased from Skytron, and service work performed by a Skytron Service Technician. Failure to comply with the terms of the service contract may void warranty. Service contract terms and conditions are available upon request.

QUOTE

Q-87300-1

DATE

04-09-2024

EXPIRES

08-07-2024



## TERMS AND CONDITIONS CONTINUED VIZIENT

### PAYMENT TERMS

Net thirty (30) days after date of invoice, subject to credit approval.  
Shipping and Taxes are not included in this quote unless itemized above. All products are invoiced upon shipment.

### WARRANTY

1 – year Parts and Labor on contracted products.  
1 - year Parts and Labor on non-contracted products.  
90 - days on replacement parts, spare bulbs (surgical lights), spare pads (surgical tables), supplies, and accessory items.  
15 - years on sterilizer pressure vessel (steam chamber and jacket).  
*\*In order to maintain warranty on UV Disinfection products (IPT UV-C), a service contract must be purchased from Skytron, and service work performed by a Skytron Service Technician. Failure to comply with the terms of the service contract may void warranty. Service contract terms and conditions are available upon request.*

### FREIGHT TERMS

F.O.B. Destination. Freight Prepaid and Added. All shipments subject to handling charge.

### DELIVERY

120 Days after receipt of order.  
Due to the COVID-19 pandemic and increased demand, delivery times may exceed 120 days.

### DEPOSIT

25% deposit required for Booms and Active RTLS upon order acceptance.  
50% deposit required for Integration and custom products upon order acceptance.

### CONTRACT NUMBER

CE7191 (Stainless Steel); CE7201 (Lights, Booms, Integration)  
CE7211 (Tables and Accessories); CE7593 (Sterilizers)  
CE7598 (Washers and Decontaminators)

*I acknowledge that I have reviewed and accept the content of this quote in its entirety.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

\_\_\_\_\_  
Customer Purchase Order Number

\_\_\_\_\_  
Billing Address

\_\_\_\_\_  
Delivery Address

**QUOTE**  
Q-87300-1

**DATE**  
04-09-2024

**EXPIRES**  
08-07-2024

## EQUIPMENT QUOTE



1010 Warnerville Rd • Oakdale, CA 95361  
 (800) 523-1010 • Fax (209) 847-4166 • KecklerMedical.com

Buying Group: Contract Pricing - Standard

Salinas Valley Memorial Hospital

Salinas, CA

Megan Giovanetti

[mgiovanetti@SalinasValleyHealth.com](mailto:mgiovanetti@SalinasValleyHealth.com) - (831) 809-0191

Your Sales Representative:

Trina McNeil

(209) 523-1010 ext.111

[trina@kecklermedical.com](mailto:trina@kecklermedical.com)

*Thank you for the opportunity to earn your business!*

Quote # **TM-240416-1**

Quote Date: **04/16/24**

Expiration: **06/15/24**

Item No.	Description	Qty	UOM	Unit Price Quoted	Extended Price Quoted
<b>IR North Wall</b>					
SST263680HG-1C	SS TALL CABINET, 26 X 36 X 80, SINGLE COLUMN, LOGICELL, GLASS DOORS	3	EA	\$ 11,280.00	\$ 33,840.00
SST263680HG-2C	SS TALL CABINET, 26 X 36 X 80, DOUBLE COLUMN, LOGICELL, GLASS DOORS	2	EA	\$ 11,894.00	\$ 23,788.00
SST262080RG	SS TALL CABINET, 26 X 19.5 X 80, SINGLE COLUMN, LOGICELL, RIGHT GLASS DOOR	1	EA	\$ 9,078.00	\$ 9,078.00
SSW133630HG	SS WALL CABINET, 13 X 36 X 30, 2 SHELF, GLASS DOORS	1	EA	\$ 6,236.00	\$ 6,236.00
40000EL	ELECTRONIC LOCK, 40000 SERIES	7	EA	\$ 937.00	\$ 6,559.00
2436SHC-L	LOGICELL SHELF, 36"W, WITH LOCKING CLIP	2	EA	\$ 212.00	\$ 424.00
CAT24HD	CATH SLIDE, 24 D SHELF, HVY DTY, EASY PULL, EPOXY COATED, 9 HOOKS (15 PKG PER HOOK)	14	EA	\$ 186.00	\$ 2,604.00
CATHCARD2	DOUBLE SIDED CARD FOR CATH SLIDES	14	EA	\$ 1.00	\$ 14.00
2436SHC-3	SHELF, 24 X 36 X 2.5, 31 DIVIDER SLOTS, STEEL, FROSTY WHITE, CATH MTG RAIL, SLANTABLE	7	EA	\$ 184.00	\$ 1,288.00
244DIV	DIVIDER, 24 X 4, STEEL, FROSTY WHITE	137	EA	\$ 36.00	\$ 4,932.00
2416SHC-3	SHELF, 24 X 16 X 2.5, 13 DIVIDER SLOTS, STEEL, FROSTY WHITE, CATH MTG RAIL, SLANTABLE	10	EA	\$ 110.00	\$ 1,100.00
2TCL24D33	TUB, PLASTIC, 1 CELL, 22 X 14.25 X 2, CLEAR, 3 LONG / 3 SHORT DIVIDERS	10	SET	\$ 274.00	\$ 2,740.00
5BD22	BASKET, WIRE, 2 CELL, 22 X 14.25 X 5, WHITE, 2 LONG / 2 SHORT DIVIDERS	30	SET	\$ 135.00	\$ 4,050.00
8BD22	BASKET, WIRE, 3 CELL, 22 X 14.25 X 8, WHITE, 2 LONG / 2 SHORT DIVIDERS	10	SET	\$ 160.00	\$ 1,600.00
SSTF2636	SS TOE KICK, 26 X 36 X 4	5	EA	\$ 108.00	\$ 540.00
SSTF2620	SS TOE KICK, 26 X 19.5 X 4	1	EA	\$ 66.00	\$ 66.00
<b>IR 1 South Wall</b>					
SSW133630HG	SS WALL CABINET, 13 X 36 X 30, 2 SHELF, GLASS DOORS	2	EA	\$ 6,236.00	\$ 12,472.00
40000EL	ELECTRONIC LOCK, 40000 SERIES	4	EA	\$ 937.00	\$ 3,748.00
SSB263631HS-2C	SS BASE CABINET, 26 X 36 X 30.5, DOUBLE COLUMN, LOGICELL, SOLID DOORS	2	EA	\$ 7,299.00	\$ 14,598.00
SSCT2636	SS COUNTERTOP, 26 X 36, 4" BACK SPLASH	2	EA	\$ 2,099.00	\$ 4,198.00
2TCL24D33	TUB, PLASTIC, 1 CELL, 22 X 14.25 X 2, CLEAR, 3 LONG / 3 SHORT DIVIDERS	8	SET	\$ 274.00	\$ 2,192.00
5BD22	BASKET, WIRE, 2 CELL, 22 X 14.25 X 5, WHITE, 2 LONG / 2 SHORT DIVIDERS	12	SET	\$ 135.00	\$ 1,620.00
SSTF2636	SS TOE KICK, 26 X 36 X 4	2	EA	\$ 108.00	\$ 216.00
<b>CL 3 North Wall</b>					
SST263680HG-1C	SS TALL CABINET, 26 X 36 X 80, SINGLE COLUMN, LOGICELL, GLASS DOORS	1	EA	\$ 11,280.00	\$ 11,280.00
SST262080RG	SS TALL CABINET, 26 X 19.5 X 80, SINGLE COLUMN, LOGICELL, RIGHT GLASS DOOR	1	EA	\$ 9,078.00	\$ 9,078.00





# EQUIPMENT QUOTE



1010 Warnerville Rd • Oakdale, CA 95361  
 (800) 523-1010 • Fax (209) 847-4166 • KecklerMedical.com

Buying Group: **Contract Pricing - Standard**  
**Salinas Valley Memorial Hospital**  
**Salinas, CA**  
**Megan Giovanetti**  
[mgiovanetti@SalinasValleyHealth.com](mailto:mgiovanetti@SalinasValleyHealth.com) - (831) 809-0191

Your Sales Representative:  
 Trina McNeil  
 (209) 523-1010 ext.111  
[trina@kecklermedical.com](mailto:trina@kecklermedical.com)

*Thank you for the opportunity to earn your business!*

Quote # **TM-240416-1** Quote Date: **04/16/24**  
 Expiration: **06/15/24**

Item No.	Description	Qty	UOM	Unit Price Quoted	Extended Price Quoted
40000EL	ELECTRONIC LOCK, 40000 SERIES	2	EA	\$ 937.00	\$ 1,874.00
2436SHC-L	LOGICELL SHELF, 36"W, WITH LOCKING CLIP	1	EA	\$ 212.00	\$ 212.00
CAT24HD	CATH SLIDE, 24 D SHELF, HVY DTY, EASY PULL, EPOXY COATED, 9 HOOKS (15 PKG PER HOOK)	7	EA	\$ 186.00	\$ 1,302.00
CATHCARD2	DOUBLE SIDED CARD FOR CATH SLIDES	7	EA	\$ 1.00	\$ 7.00
2436SHC-3	SHELF, 24 X 36 X 2.5, 31 DIVIDER SLOTS, STEEL, FROSTY WHITE, CATH MTG RAIL, SLANTABLE	1	EA	\$ 184.00	\$ 184.00
244DIV	DIVIDER, 24 X 4, STEEL, FROSTY WHITE	41	EA	\$ 36.00	\$ 1,476.00
2416SHC-3	SHELF, 24 X 16 X 2.5, 13 DIVIDER SLOTS, STEEL, FROSTY WHITE, CATH MTG RAIL, SLANTABLE	2	EA	\$ 110.00	\$ 220.00
2TCL24D33	TUB, PLASTIC, 1 CELL, 22 X 14.25 X 2, CLEAR, 3 LONG / 3 SHORT DIVIDERS	2	SET	\$ 274.00	\$ 548.00
5BD22	BASKET, WIRE, 2 CELL, 22 X 14.25 X 5, WHITE, 2 LONG / 2 SHORT DIVIDERS	6	SET	\$ 135.00	\$ 810.00
8BD22	BASKET, WIRE, 3 CELL, 22 X 14.25 X 8, WHITE, 2 LONG / 2 SHORT DIVIDERS	2	SET	\$ 160.00	\$ 320.00
SSTF2636	SS TOE KICK, 26 X 36 X 4	1	EA	\$ 108.00	\$ 108.00
SSTF2620	SS TOE KICK, 26 X 19.5 X 4	1	EA	\$ 66.00	\$ 66.00
<b>CL 3 South Wall</b>					
SST263680HG-2C	SS TALL CABINET, 26 X 36 X 80, DOUBLE COLUMN, LOGICELL, GLASS DOORS	2	EA	\$ 11,894.00	\$ 23,788.00
SSW133630HG	SS WALL CABINET, 13 X 36 X 30, 2 SHELF, GLASS DOORS	2	EA	\$ 6,236.00	\$ 12,472.00
40000EL	ELECTRONIC LOCK, 40000 SERIES	6	EA	\$ 937.00	\$ 5,622.00
SSB263631HS-2C	SS BASE CABINET, 26 X 36 X 30.5, DOUBLE COLUMN, LOGICELL, SOLID DOORS	2	EA	\$ 7,299.00	\$ 14,598.00
SSCT2636	SS COUNTERTOP, 26 X 36, 4" BACK SPLASH	2	EA	\$ 2,099.00	\$ 4,198.00
2416SHC-3	SHELF, 24 X 16 X 2.5, 13 DIVIDER SLOTS, STEEL, FROSTY WHITE, CATH MTG RAIL, SLANTABLE	8	EA	\$ 110.00	\$ 880.00
244DIV	DIVIDER, 24 X 4, STEEL, FROSTY WHITE	40	EA	\$ 36.00	\$ 1,440.00
2TCL24D33	TUB, PLASTIC, 1 CELL, 22 X 14.25 X 2, CLEAR, 3 LONG / 3 SHORT DIVIDERS	16	SET	\$ 274.00	\$ 4,384.00
5BD22	BASKET, WIRE, 2 CELL, 22 X 14.25 X 5, WHITE, 2 LONG / 2 SHORT DIVIDERS	36	SET	\$ 135.00	\$ 4,860.00
8BD22	BASKET, WIRE, 3 CELL, 22 X 14.25 X 8, WHITE, 2 LONG / 2 SHORT DIVIDERS	8	SET	\$ 160.00	\$ 1,280.00
SSTF2636	SS TOE KICK, 26 X 36 X 4	4	EA	\$ 108.00	\$ 432.00
	Large Volume Discount	1	EA		\$ (11,967.10)

TRIM CAN BE QUOTED ONCE EXACT CABINET PLACEMENT WITHIN CAD DRAWING IS DETERMINED

\*\*\*Removal of old equipment and Installation of new equipment not included but can be quoted upon request\*\*\*

SUBTOTAL \$ 227,374.90

# EQUIPMENT QUOTE



1010 Warnerville Rd • Oakdale, CA 95361  
 (800) 523-1010 • Fax (209) 847-4166 • KecklerMedical.com

**J.M. KECKLER**  
 MEDICAL COMPANY INC

Buying Group: **Contract Pricing - Standard**  
**Salinas Valley Memorial Hospital**  
**Salinas, CA**  
**Megan Giovanetti**  
[mgiovanetti@SalinasValleyHealth.com](mailto:mgiovanetti@SalinasValleyHealth.com) - (831) 809-0191

Your Sales Representative:  
 Trina McNeil  
 (209) 523-1010 ext.111  
[trina@kecklermedical.com](mailto:trina@kecklermedical.com)

*Thank you for the opportunity to earn your business!*

Quote # **TM-240416-1** Quote Date: **04/16/24**  
 Expiration: **06/15/24**

Item No.	Description	Qty	UOM	Unit Price Quoted	Extended Price Quoted
	Shipping & Handling				<i>Not included in quote. Can be quoted upon request.</i>
	Sales Tax				<i>Not included in quote.</i>

**TOTAL \$ 227,374.90**

TERMS & CONDITIONS

**Terms:** Net 30 Days  
**Deposit:** 25% Deposit required on all orders greater than \$5,000.00. Due upon submission of purchase order.  
**FOB:** Mfg, prepaid and added.  
**Sales Tax:** Local sales tax will be added.  
**Storage:** Customer will receive product at their facility and store until scheduled install.  
**Progress Billing:** Any installation with duration of greater than 30 days will have progress billing. Schedule of values with milestones will be provided.

**Purchase orders should be issued to J.M. Keckler Medical.**

Tax **\$21,032.18**  
 Allow at S&H **\$ 7,500.00**  
**\$255,907.08**

Keckler Medical is proud to offer **PREVENTIVE MAINTENANCE** programs that ensure manufacturer warranty compliance. All of our service technicians are dedicated to keeping you operationally effective by offering 24-hour emergency equipment repair. Ask your sales representative for more information today!

## MOBILE IR LAB LEASE PROPOSAL

<b>PROPOSAL FOR:</b>	<p><b>Mobile IR, Special Procedures Lab</b></p> <ul style="list-style-type: none"> <li>8’x48’ Mobile Lab Coach (Trailer) with pop-out side extensions, on-demand backup generator and hydraulic patient lift</li> <li><b>Philips Allura FD20 or GE Innova 3100</b> digital flat panel detector x-ray imaging system</li> </ul>
<b>PRESENTED TO:</b>	Bogard Construction – David Scott
<b>DATE OF PROPOSAL:</b>	4/11/24
<b>LEASE TERM:</b>	6 Months (Option to Extend)
<b>LEASE PRICE:</b>	<p><del>\$54,500</del> <b>\$47,500.00</b> per Chris Basey phone call with DScott 4/23/24  <del>\$54,500</del>/Month</p>
<b>LEASE PAYMENT TERMS:</b>	<ol style="list-style-type: none"> <li>1. First month payment due and payable upon delivery (\$54,500).</li> <li>2. Subsequent payments due monthly</li> <li>3. Monthly extensions at end of term</li> </ol>
<b>DELIVERY DATE:</b>	
<b>DELIVERY REQUIREMENTS:</b>	<ol style="list-style-type: none"> <li>1. Site prepared by Hospital</li> <li>2. Transportation: \$7,500 (each way)</li> <li>3. Training and installation assistance included</li> </ol>
<b>SUPPORT/TRAINING:</b>	<b>Comprehensive applications training included.</b>
<b>INSURANCE:</b>	Insurance is required.
<b>SERVICE:</b>	<b>MDI service agreement included with the lease featuring 24 hour, 7 day a week and one-call service. No service or maintenance fees for the term of the lease.</b>

## Salinas Valley Memorial Healthcare System

Project Cost Model: SVM CIP ANGIO EQ REPLACEMENT - 01.1250.3760

Architect: SKA

Subject: Budget prepared during concept phase

Date Printed: 5/10/2024

Budget Amount: \$4,140,627.00

Budget Approved Date:

Version:2

Anticipated Completion: Spring 2025

Prepared by: DS/SL, Checked by

### Budget Summary

		A	A1	A2
Line Item	Description	Original Budget	Budget Revisions	Current Budget
<b>1</b>	<b>Construction</b>			
100	Construction	\$700,000	\$0	\$700,000
101	ADA Barrier Removal Allowance	\$60,000	\$0	\$60,000
101	Owner Contingency	\$0	\$0	\$0
<b>2</b>	<b>Design</b>			
200	Professional Fees	\$340,000	\$0	\$340,000
200	Reimbursables	\$3,500	\$0	\$3,500
	<b>Inspections and Consultation</b>			
300	Inspector of Record	\$50,000	\$0	\$50,000
301	Special Inspections	\$22,000	\$0	\$22,000
<b>4</b>	<b>AHJ Fees</b>			
400	HCAI Fees	\$38,000	\$0	\$38,000
<b>5</b>	<b>Soft Costs</b>			
502	Construction Management	\$240,000	\$0	\$240,000
504	Soft Cost Contingency	\$20,000	\$0	\$20,000
<b>7</b>	<b>FF&amp;E</b>			
702	Philips Azurion 7 Equipment Package	\$1,500,000	\$402,679	\$1,902,679
702	Logiquip Cabinet Package	\$0	\$157,508	\$157,508
702	Light, Lucina Light, Rad Shield, Monitor Boom, Monitor on Wall	\$150,000	-\$7,060	\$142,940
703	Data & Phone Equipment	\$25,000	\$0	\$25,000
704	Furnishings	\$10,000	\$0	\$10,000
704	Hazmat	\$1,500	\$0	\$1,500
705	Rental Trailers	\$0	\$237,500	\$237,500
<b>9</b>	<b>Rental Trailer utility and infrastructure adjustments</b>		\$50,000	\$50,000
9900	Project Contingency + Escalation	\$140,000	\$0	\$140,000
<b>Totals</b>		<b>\$3,300,000</b>	<b>\$840,627</b>	<b>\$4,140,627</b>

# Salinas Valley Memorial Healthcare System

Project Cost Model: Cath Lab 3 Equipment Replacement 01.1250.3765

Architect: SKA

Subject: Budget prepared during concept phase

Date Printed: 5/10/2024

Budget Amount: \$4,300,526.00

Budget Approved Date:

Version: 2

Anticipated Completion: Summer 2025

Prepared by: DS/SL, Checked by

## Budget Summary

		A	A1	A2
Line Item	Description	Original Budget	Budget Revisions	Current Budget
	<b>1 Construction</b>			
100	Construction	\$750,000	\$0	\$750,000
101	ADA Barrier Removal Allowance	\$40,000	\$0	\$40,000
101	Owner Contingency	\$0	\$0	\$0
	<b>2 Design</b>			
200	Professional Fees	\$360,000	\$0	\$360,000
200	Reimbursables	\$3,500	\$0	\$3,500
	<b>Inspections and Consultation</b>			
300	Inspector of Record	\$66,000	\$0	\$66,000
301	Special Inspections	\$22,000	\$0	\$22,000
	<b>4 AHJ Fees</b>			
400	HCAI Fees	\$40,000	\$0	\$40,000
	<b>5 Soft Costs</b>			
502	Construction Management	\$285,000	\$0	\$285,000
504	Soft Cost Contingency	\$20,000	\$0	\$20,000
	<b>7 FF&amp;E</b>			
702	Philips Azurion 7 Equipment Package	\$1,550,000	\$503,413	\$2,053,413
702	Intercom	\$30,000	\$0	\$30,000
702	Logiequip Cabinets for Catheters + Supplies	\$82,000	\$16,400	\$98,400
702	Light, Lucina Light, Rad Shield, Monitor Boom, Monitor on Wall	\$175,000	-\$56,787	\$118,213
703	Data & Phone Equipment	\$25,000	\$0	\$25,000
704	Furnishings	\$10,000	\$0	\$10,000
704	Hazmat Surveying	\$1,500	\$0	\$1,500
705	Rental Equipment	\$0	\$237,500	\$237,500
	<b>9</b>			
9900	Project Contingency + Escalation	\$140,000	\$0	\$140,000
<b>Totals</b>		<b>\$3,600,000</b>	<b>\$700,526</b>	<b>\$4,300,526</b>

# **Financial Performance Review**

## **April 2024**

### **Finance Committee - Open Session**

**Augustine Lopez**

**Chief Financial Officer**

# Consolidated Financial Summary

## For the Month of April 2024

\$ in Millions	For the Month of April 2024				
			Variance fav (unfav)		
	Actual	Budget	\$VAR	%VAR	
Operating Revenue	\$ 78.7	\$ 61.1	\$ 17.6	28.8%	
Operating Expense	\$ 65.3	\$ 60.7	\$ (4.6)	-7.6%	
<b>Income from Operations *</b>	<b>\$ 13.4</b>	<b>\$ 0.4</b>	<b>\$ 13.0</b>	<b>3250.0%</b>	
<i>Operating Margin %</i>	17.1%	0.6%	16.5%	2750.00%	
Non Operating Income **	\$ (0.5)	\$ 1.9	\$ (2.4)	-126.3%	
<b>Net Income</b>	<b>\$ 12.9</b>	<b>\$ 2.3</b>	<b>\$ 10.6</b>	<b>460.9%</b>	
<i>Net Income Margin %</i>	16.4%	3.8%	12.6%	331.6%	

**\*Normalizing revenue items included above are:**

- **\$4.8M** Medi-Cal - Rate Range Program (CY 2022)

**In addition:**

- **\$6.5M** Medi-Cal - QIP Program: Annual Lump Sum Budgeted Payment Received (CY 2021) included above.

**\*\* Non-Operating Revenue** was unfavorable by \$2.4M, primarily as the result of unfavorable investment bond performance.

# Consolidated Financial Summary

## For the Month of April 2024 - Normalized

\$ in Millions	For the Month of April 2024				
			Variance fav (unfav)		
	Actual	Budget	\$VAR	%VAR	
Operating Revenue	\$ 67.4	\$ 61.1	\$ 6.3		10.3%
Operating Expense	\$ 65.3	\$ 60.7	\$ (4.6)		-7.6%
<b>Income from Operations *</b>	<b>\$ 2.1</b>	<b>\$ 0.4</b>	<b>\$ 1.7</b>		<b>425.0%</b>
Operating Margin %	3.2%	0.6%	2.6%		433.33%
Non Operating Income **	\$ (0.5)	\$ 1.9	\$ (2.4)		-126.3%
<b>Net Income</b>	<b>\$ 1.6</b>	<b>\$ 2.3</b>	<b>\$ (0.7)</b>		<b>-30.4%</b>
Net Income Margin %	2.4%	3.8%	-1.4%		-36.8%

**\*Normalizing revenue items not included above are:**

- **\$4.8M** Medi-Cal - Rate Range Program (CY 2022)

**In addition:**

- **\$6.5M** Medi-Cal - QIP Program: Annual Lump Sum Budgeted Payment Received (CY 2021) not included above.

**\*\* Non-Operating Revenue** was unfavorable by \$2.4M, primarily as the result of unfavorable investment bond performance.



# Consolidated Financial Summary

## YTD April 2024 - Normalized

\$ in Millions	FY 2024 YTD April				
			Variance fav (unfav)		
	Actual	Budget	\$VAR	%VAR	
Operating Revenue	\$ 616.2	\$ 602.0	\$ 14.2	2.4%	
Operating Expense	\$ 617.2	\$ 599.7	\$ (17.5)	-2.9%	
<b>Income from Operations *</b>	<b>\$ (1.0)</b>	<b>\$ 2.3</b>	<b>\$ (3.3)</b>	<b>-143.5%</b>	
Operating Margin %	-0.2%	0.4%	-0.6%	-150.0%	
Non Operating Income	\$ 30.8	\$ 19.1	\$ 11.7	61.3%	
<b>Net Income</b>	<b>\$ 29.8</b>	<b>\$ 21.4</b>	<b>\$ 8.4</b>	<b>39.3%</b>	
Net Income Margin %	4.8%	3.6%	1.2%	33.3%	

### Normalizing Item:

The above excludes Medicare and Medi-Cal prior year favorable cost report settlements totaling **\$1.2M**.

The above excludes Medi-Cal - Rate Range Program (CY 2022) **\$4.8M**.

# Salinas Valley Health Key Financial Indicators

Statistic	YTD	SVH		S&P A+ Rated		YTD	
	04/30/24	Target	+/-	Hospitals	+/-	4/30/23	+/-
Operating Margin*	-0.2%	5.0%		4.0%		3.7%	
Total Margin*	4.8%	6.0%		6.6%		6.0%	
EBITDA Margin**	4.5%	7.4%		13.6%		7.7%	
Days of Cash*	348	305		249		346	
Days of Accounts Payable*	46	45		-		52	
Days of Net Accounts Receivable***	52	45		49		48	
Supply Expense as % NPR	13.8%	14.0%		-		12.8%	
SWB Expense as % NPR	54.4%	53.0%		53.7%		52.6%	
Operating Expense per APD*	6,738	6,739		-		6,273	

All metrics above are consolidated for SVH except Operating Expense per APD

\*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)

# Questions/Comments

SALINAS VALLEY HEALTH MEDICAL CENTER  
SUMMARY INCOME STATEMENT  
April 30, 2024

	<u>Month of April,</u>		<u>Ten months ended April 30,</u>	
	<u>current year</u>	<u>prior year</u>	<u>current year</u>	<u>prior year</u>
Operating revenue:				
Net patient revenue	\$ 60,518,141	\$ 58,084,461	\$ 516,323,620	\$ 524,322,042
Other operating revenue	<u>7,615,190</u>	<u>8,114,714</u>	<u>17,476,695</u>	<u>15,725,228</u>
Total operating revenue	<u>68,133,331</u>	<u>66,199,175</u>	<u>533,800,315</u>	<u>540,047,270</u>
Total operating expenses	50,422,614	47,009,348	481,968,847	473,621,809
Total non-operating income	<u>(5,326,060)</u>	<u>(1,527,865)</u>	<u>(18,199,429)</u>	<u>(19,591,386)</u>
Operating and non-operating income	<u>\$ 12,384,657</u>	<u>\$ 17,661,962</u>	<u>\$ 33,632,039</u>	<u>\$ 46,834,075</u>

SALINAS VALLEY HEALTH MEDICAL CENTER  
 BALANCE SHEETS  
 April 30, 2024

	<u>Current year</u>	<u>Prior year</u>
<b>ASSETS:</b>		
Current assets	\$ 363,975,697	\$ 430,752,880
Assets whose use is limited or restricted by board	163,692,604	158,016,957
Capital assets	247,338,410	241,433,632
Other assets	293,238,895	178,199,484
Deferred pension outflows	<u>116,911,125</u>	<u>95,857,027</u>
	<u>\$ 1,185,156,731</u>	<u>\$ 1,104,259,981</u>
<b>LIABILITIES AND EQUITY:</b>		
Current liabilities	92,148,892	103,980,309
Long term liabilities	19,934,335	16,902,107
Lease deferred inflows	1,323,811	1,642,999
Pension liability	118,792,064	79,111,485
Net assets	<u>952,957,629</u>	<u>902,623,081</u>
	<u>\$ 1,185,156,731</u>	<u>\$ 1,104,259,981</u>

**SALINAS VALLEY HEALTH MEDICAL CENTER**  
**SCHEDULES OF NET PATIENT REVENUE**  
**April 30, 2024**

	Month of April,		Ten months ended April 30,	
	current year	prior year	current year	prior year
Patient days:				
By payer:				
Medicare	1,586	1,929	17,833	20,121
Medi-Cal	1,013	1,109	10,505	11,752
Commercial insurance	566	581	5,723	7,465
Other patient	118	152	1,022	1,258
Total patient days	3,283	3,771	35,083	40,596
Gross revenue:				
Medicare	\$ 116,701,699	\$ 109,557,113	\$ 1,142,368,657	\$ 1,049,911,497
Medi-Cal	80,519,457	72,464,646	717,858,792	707,174,003
Commercial insurance	54,859,204	50,466,973	527,395,918	517,001,393
Other patient	9,553,478	8,568,032	88,838,567	87,190,984
Gross revenue	261,633,838	241,056,764	2,476,461,934	2,361,277,877
Deductions from revenue:				
Administrative adjustment	206,980	179,008	3,066,899	2,455,388
Charity care	311,716	698,431	6,223,899	6,287,557
Contractual adjustments:				
Medicare outpatient	39,768,075	29,810,038	358,575,684	301,126,654
Medicare inpatient	43,796,091	48,513,678	466,907,260	469,900,601
Medi-Cal traditional outpatient	1,958,276	2,622,546	24,897,293	33,571,156
Medi-Cal traditional inpatient	3,171,090	4,319,253	46,159,972	53,344,209
Medi-Cal managed care outpatient	38,315,373	30,187,198	320,099,670	280,854,145
Medi-Cal managed care inpatient	23,897,809	20,842,201	252,896,969	256,758,356
Commercial insurance outpatient	24,448,212	19,417,708	222,304,969	181,006,667
Commercial insurance inpatient	18,891,959	21,085,097	203,972,303	198,135,138
Uncollectible accounts expense	5,099,551	3,986,399	43,495,003	38,603,709
Other payors	1,250,565	1,310,745	11,538,393	14,912,255
Deductions from revenue	201,115,697	182,972,303	1,960,138,314	1,836,955,835
Net patient revenue	\$ 60,518,141	\$ 58,084,461	\$ 516,323,620	\$ 524,322,042
Gross billed charges by patient type:				
Inpatient	\$ 121,396,269	\$ 130,582,607	\$ 1,243,611,140	\$ 1,276,374,759
Outpatient	108,573,818	79,568,284	936,107,901	794,568,648
Emergency room	31,663,751	30,905,873	296,742,893	290,334,469
Total	\$ 261,633,838	\$ 241,056,764	\$ 2,476,461,934	\$ 2,361,277,877

**SALINAS VALLEY HEALTH MEDICAL CENTER**  
**STATEMENTS OF REVENUE AND EXPENSES**  
**April 30, 2024**

	<b>Month of April,</b>		<b>Ten months ended April 30,</b>	
	<b>current year</b>	<b>prior year</b>	<b>current year</b>	<b>prior year</b>
Operating revenue:				
Net patient revenue	\$ 60,518,141	\$ 58,084,461	\$ 516,323,620	\$ 524,322,042
Other operating revenue	<u>7,615,190</u>	<u>8,114,714</u>	<u>17,476,695</u>	<u>15,725,228</u>
Total operating revenue	<u>68,133,331</u>	<u>66,199,175</u>	<u>533,800,315</u>	<u>540,047,270</u>
Operating expenses:				
Salaries and wages	16,614,493	14,576,020	166,656,648	169,148,524
Compensated absences	2,801,687	3,492,842	30,164,702	28,855,854
Employee benefits	8,025,558	9,813,071	84,455,346	79,273,460
Supplies, food, and linen	9,011,941	7,173,182	74,398,214	68,469,985
Purchased department functions	4,195,194	3,823,713	36,761,392	41,313,987
Medical fees	2,460,917	1,982,177	24,568,603	20,903,402
Other fees	2,743,758	2,688,657	23,219,807	29,332,930
Depreciation	2,772,807	1,826,428	24,389,785	20,334,222
All other expense	<u>1,796,259</u>	<u>1,633,258</u>	<u>17,354,350</u>	<u>15,989,445</u>
Total operating expenses	<u>50,422,614</u>	<u>47,009,348</u>	<u>481,968,847</u>	<u>473,621,809</u>
Income from operations	<u>17,710,717</u>	<u>19,189,827</u>	<u>51,831,468</u>	<u>66,425,461</u>
Non-operating income:				
Donations	56,322	2,606,456	2,660,534	8,366,424
Property taxes	333,333	333,333	3,333,333	3,333,333
Investment income	(1,647,527)	1,714,706	20,872,769	6,059,942
Taxes and licenses	0	0	0	0
Income from subsidiaries	<u>(4,068,188)</u>	<u>(6,182,360)</u>	<u>(45,066,065)</u>	<u>(37,351,085)</u>
Total non-operating income	<u>(5,326,060)</u>	<u>(1,527,865)</u>	<u>(18,199,429)</u>	<u>(19,591,386)</u>
Operating and non-operating income	12,384,657	17,661,962	33,632,039	46,834,075
Net assets to begin	<u>940,572,972</u>	<u>884,961,119</u>	<u>919,325,590</u>	<u>855,789,006</u>
Net assets to end	<u>\$ 952,957,629</u>	<u>\$ 902,623,081</u>	<u>\$ 952,957,629</u>	<u>\$ 902,623,081</u>
Net income excluding non-recurring items	\$ 12,384,657	\$ 17,661,962	\$ 33,632,039	\$ 46,834,075
Non-recurring income (expense) from cost report settlements and re-openings and other non-recurring items	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Operating and non-operating income	<u>\$ 12,384,657</u>	<u>\$ 17,661,962</u>	<u>\$ 33,632,039</u>	<u>\$ 46,834,075</u>

**SALINAS VALLEY HEALTH MEDICAL CENTER**  
**SCHEDULES OF INVESTMENT INCOME**  
**April 30, 2024**

	<u>Month of April,</u>		<u>Ten months ended April 30,</u>	
	<u>current year</u>	<u>prior year</u>	<u>current year</u>	<u>prior year</u>
Detail of income from subsidiaries:				
Salinas Valley Health Clinics				
Pulmonary Medicine Center	\$ (184,338)	\$ (261,690)	\$ (2,008,039)	\$ (1,758,198)
Neurological Clinic	(32,331)	(99,820)	(665,570)	(684,269)
Palliative Care Clinic	(105,840)	(48,441)	(921,793)	(680,898)
Surgery Clinic	(163,280)	(166,338)	(1,804,745)	(1,442,101)
Infectious Disease Clinic	(34,404)	(26,832)	(380,770)	(309,055)
Endocrinology Clinic	(185,784)	(209,283)	(2,271,112)	(1,735,710)
Early Discharge Clinic	0	0	0	0
Cardiology Clinic	(474,932)	(887,922)	(5,657,976)	(4,866,901)
OB/GYN Clinic	(370,833)	(500,970)	(4,058,607)	(3,279,205)
PrimeCare Medical Group	(685,493)	(1,552,589)	(8,420,806)	(6,778,156)
Oncology Clinic	(397,518)	(360,011)	(3,498,149)	(2,623,735)
Cardiac Surgery	(398,354)	(349,825)	(3,197,867)	(2,856,186)
Sleep Center	(67,750)	(62,467)	(568,078)	(363,687)
Rheumatology	(58,521)	(108,738)	(709,909)	(624,749)
Precision Ortho MDs	(384,566)	(661,438)	(4,712,226)	(3,924,354)
Precision Ortho-MRI	0	0	0	0
Precision Ortho-PT	(38,001)	(35,266)	(474,410)	(370,515)
Vaccine Clinic	0	0	16	(683)
Dermatology	(37,944)	(23,756)	(396,140)	(186,516)
Hospitalists	0	0	0	0
Behavioral Health	(51,209)	(40,052)	(497,665)	(334,835)
Pediatric Diabetes	(51,846)	(44,115)	(461,680)	(457,224)
Neurosurgery	(90,377)	(51,795)	(526,149)	(309,145)
Multi-Specialty-RR	7,542	474	30,815	71,140
Radiology	(284,028)	(1,442,282)	(3,069,445)	(2,963,763)
Salinas Family Practice	(71,318)	(141,183)	(1,289,818)	(1,037,683)
Urology	(104,078)	(158,411)	(1,659,691)	(962,549)
Total SVHC	(4,265,203)	(7,232,750)	(47,219,814)	(38,478,977)
Doctors on Duty	(14,994)	694,466	271,135	707,517
Vantage Surgery Center	0	0	0	0
LPCH NICU JV	0	0	0	(1,387,567)
Central Coast Health Connect	0	0	0	0
Monterey Peninsula Surgery Center	144,022	222,191	1,319,761	1,448,559
Coastal	9,088	34,034	105,314	4,595
Apex	0	0	0	0
21st Century Oncology	11,209	24,758	56,865	(28,622)
Monterey Bay Endoscopy Center	47,689	74,941	400,675	383,411
Total	<u>\$ (4,068,188)</u>	<u>\$ (6,182,360)</u>	<u>\$ (45,066,065)</u>	<u>\$ (37,351,085)</u>



**SALINAS VALLEY HEALTH MEDICAL CENTER**  
**BALANCE SHEETS**  
**April 30, 2024**

	<b>Current year</b>	<b>Prior year</b>
<b>A S S E T S</b>		
Current assets:		
Cash and cash equivalents	\$ 243,116,557	\$ 321,753,911
Patient accounts receivable, net of estimated uncollectibles of \$45,198,876	96,838,017	83,591,939
Supplies inventory at cost	7,787,156	8,103,578
Current portion of lease receivable	935,448	546,861
Other current assets	15,298,519	16,756,591
Total current assets	363,975,697	430,752,880
Assets whose use is limited or restricted by board	163,692,604	158,016,957
Capital assets:		
Land and construction in process	48,812,146	53,803,445
Other capital assets, net of depreciation	198,526,264	187,630,188
Total capital assets	247,338,410	241,433,632
Other assets:		
Right of use assets, net of amortization	6,730,433	5,622,496
Long term lease receivable	494,234	1,186,426
Subscription assets, net of amortization	6,989,307	0
Investment in Securities	254,241,866	145,492,305
Investment in SVMC	5,599,898	7,425,452
Investment in Coastal	1,786,955	1,648,295
Investment in other affiliates	21,571,491	20,556,784
Net pension asset	(4,175,289)	(3,732,274)
Total other assets	293,238,895	178,199,484
Deferred pension outflows	116,911,125	95,857,027
	\$ 1,185,156,731	\$ 1,104,259,981
 <b>LIABILITIES AND NET ASSETS</b>		
Current liabilities:		
Accounts payable and accrued expenses	\$ 60,114,379	\$ 64,164,293
Due to third party payers	4,998,064	18,368,337
Current portion of self-insurance liability	20,330,294	18,676,725
Current subscription liability	4,220,137	0
Current portion of lease liability	2,486,018	2,770,954
Total current liabilities	92,148,892	103,980,309
Long term portion of workers comp liability	12,935,574	13,801,058
Long term portion of lease liability	4,465,691	3,101,049
Long term subscription liability	2,533,070	0
Total liabilities	112,083,227	120,882,416
Lease deferred inflows	1,323,811	1,642,999
Pension liability	118,792,064	79,111,485
Net assets:		
Invested in capital assets, net of related debt	247,338,410	241,433,632
Unrestricted	705,619,219	661,189,449
Total net assets	952,957,629	902,623,081
	\$ 1,185,156,731	\$ 1,104,259,981

**SALINAS VALLEY HEALTH MEDICAL CENTER**  
**STATEMENTS OF REVENUE AND EXPENSES - BUDGET VS. ACTUAL**  
**April 30, 2024**

	Month of April,				Ten months ended April 30,			
	Actual	Budget	Variance	% Var	Actual	Budget	Variance	% Var
Operating revenue:								
Gross billed charges	\$ 261,633,838	\$ 234,958,521	26,675,317	11.35%	\$ 2,476,461,934	\$ 2,346,971,771	129,490,163	5.52%
Deductions from revenue	201,115,697	184,990,763	16,124,934	8.72%	1,960,138,314	1,848,699,981	111,438,333	6.03%
Net patient revenue	60,518,141	49,967,758	10,550,383	21.11%	516,323,620	498,271,790	18,051,830	3.62%
Other operating revenue	7,615,190	1,332,540	6,282,650	471.48%	17,476,695	13,325,400	4,151,295	31.15%
<b>Total operating revenue</b>	<b>68,133,331</b>	<b>51,300,298</b>	<b>16,833,033</b>	<b>32.81%</b>	<b>533,800,315</b>	<b>511,597,189</b>	<b>22,203,126</b>	<b>4.34%</b>
Operating expenses:								
Salaries and wages	16,614,493	17,615,786	(1,001,293)	-5.68%	166,656,648	171,645,573	(4,988,925)	-2.91%
Compensated absences	2,801,687	2,526,492	275,195	10.89%	30,164,702	29,110,086	1,054,616	3.62%
Employee benefits	8,025,558	8,228,388	(202,830)	-2.46%	84,455,346	79,634,496	4,820,850	6.05%
Supplies, food, and linen	9,011,941	6,679,670	2,332,271	34.92%	74,398,214	67,896,469	6,501,745	9.58%
Purchased department functions	4,195,194	3,539,228	655,966	18.53%	36,761,392	35,392,291	1,369,101	3.87%
Medical fees	2,460,917	2,359,060	101,857	4.32%	24,568,603	23,590,602	978,001	4.15%
Other fees	2,743,758	2,222,815	520,943	23.44%	23,219,807	22,480,581	739,226	3.29%
Depreciation	2,772,807	2,172,851	599,956	27.61%	24,389,785	21,397,326	2,992,459	13.99%
All other expense	1,796,259	1,801,863	(5,604)	-0.31%	17,354,350	18,215,966	(861,616)	-4.73%
<b>Total operating expenses</b>	<b>50,422,614</b>	<b>47,146,153</b>	<b>3,276,461</b>	<b>6.95%</b>	<b>481,968,847</b>	<b>469,363,390</b>	<b>12,605,457</b>	<b>2.69%</b>
<b>Income from operations</b>	<b>17,710,717</b>	<b>4,154,144</b>	<b>13,556,573</b>	<b>326.34%</b>	<b>51,831,468</b>	<b>42,233,799</b>	<b>9,597,669</b>	<b>22.73%</b>
Non-operating income:								
Donations	56,322	166,667	(110,345)	-66.21%	2,660,534	1,666,667	993,867	59.63%
Property taxes	333,333	333,333	(0)	0.00%	3,333,333	3,333,333	(0)	0.00%
Investment income	(1,647,527)	1,185,806	(2,833,333)	-238.94%	20,872,769	11,858,056	9,014,713	76.02%
Income from subsidiaries	(4,068,188)	(3,727,785)	(340,403)	9.13%	(45,066,065)	(39,563,798)	(5,502,267)	13.91%
<b>Total non-operating income</b>	<b>(5,326,060)</b>	<b>(2,041,979)</b>	<b>(3,284,081)</b>	<b>160.83%</b>	<b>(18,199,429)</b>	<b>(22,705,742)</b>	<b>4,506,313</b>	<b>-19.85%</b>
<b>Operating and non-operating income</b>	<b>\$ 12,384,657</b>	<b>\$ 2,112,165</b>	<b>10,272,492</b>	<b>486.35%</b>	<b>\$ 33,632,039</b>	<b>\$ 19,528,057</b>	<b>14,103,982</b>	<b>72.22%</b>

**SALINAS VALLEY HEALTH MEDICAL CENTER**

**PATIENT STATISTICAL REPORT**

For the month of April and ten months to date

	<u>Month of April</u>		<u>Ten months to date</u>		<u>Variance</u>
	<u>2023</u>	<u>2024</u>	<u>2022-23</u>	<u>2023-24</u>	
<u>NEWBORN STATISTICS</u>					
Medi-Cal Admissions	33	28	371	337	(34)
Other Admissions	77	61	854	778	(76)
Total Admissions	110	89	1,225	1,115	(110)
Medi-Cal Patient Days	61	46	604	536	(68)
Other Patient Days	145	102	1,439	1,273	(166)
Total Patient Days of Care	206	148	2,043	1,809	(234)
Average Daily Census	6.9	4.9	6.7	5.9	(0.8)
Medi-Cal Average Days	1.9	1.8	1.7	1.7	(0.0)
Other Average Days	0.8	1.6	1.7	1.7	(0.0)
Total Average Days Stay	1.9	1.7	1.7	1.7	(0.0)
<u>ADULTS &amp; PEDIATRICS</u>					
Medicare Admissions	373	343	3,995	3,706	(289)
Medi-Cal Admissions	296	269	2,928	2,664	(264)
Other Admissions	372	293	3,106	2,959	(147)
Total Admissions	1,041	905	10,029	9,329	(700)
Medicare Patient Days	1,611	1,318	17,019	15,050	(1,969)
Medi-Cal Patient Days	1,152	1,052	12,085	10,790	(1,295)
Other Patient Days	898	710	10,226	7,144	(3,082)
Total Patient Days of Care	3,661	3,080	39,330	32,984	(6,346)
Average Daily Census	122.0	102.7	129.0	108.1	(20.8)
Medicare Average Length of Stay	4.4	3.8	4.3	4.1	(0.2)
Medi-Cal Average Length of Stay	3.8	3.5	3.6	3.5	(0.0)
Other Average Length of Stay	2.5	2.1	2.6	1.9	(0.7)
Total Average Length of Stay	3.5	3.1	3.5	3.2	(0.3)
Deaths	27	29	256	266	10
Total Patient Days	3,867	3,228	41,373	34,793	(6,580)
Medi-Cal Administrative Days	4	24	85	56	(29)
Medicare SNF Days	0	0	0	0	0
Over-Utilization Days	0	0	0	0	0
Total Non-Acute Days	4	24	85	56	(29)
Percent Non-Acute	0.10%	0.74%	0.21%	0.16%	-0.04%

**SALINAS VALLEY HEALTH MEDICAL CENTER**

**PATIENT STATISTICAL REPORT**

For the month of April and ten months to date

	<u>Month of April</u>		<u>Ten months to date</u>		<u>Variance</u>
	<u>2023</u>	<u>2024</u>	<u>2022-23</u>	<u>2023-24</u>	
<u>PATIENT DAYS BY LOCATION</u>					
Level I	293	262	3,005	2,478	(527)
Heart Center	354	283	3,498	3,254	(244)
Monitored Beds	644	585	6,732	6,177	(555)
Single Room Maternity/Obstetrics	313	220	3,349	2,955	(394)
Med/Surg - Cardiovascular	760	817	9,176	8,405	(771)
Med/Surg - Oncology	308	271	2,810	2,794	(16)
Med/Surg - Rehab	448	457	5,171	4,557	(614)
Pediatrics	86	113	1,241	1,305	64
Nursery	206	148	2,043	1,809	(234)
Neonatal Intensive Care	179	72	1,421	1,059	(362)
<u>PERCENTAGE OF OCCUPANCY</u>					
Level I	75.13%	67.18%	76.04%	62.70%	
Heart Center	78.67%	62.89%	76.71%	71.36%	
Monitored Beds	79.51%	72.22%	82.02%	75.26%	
Single Room Maternity/Obstetrics	28.20%	19.82%	29.77%	26.27%	
Med/Surg - Cardiovascular	56.30%	60.52%	67.08%	61.44%	
Med/Surg - Oncology	78.97%	69.49%	71.10%	70.70%	
Med/Surg - Rehab	57.44%	58.59%	65.42%	57.65%	
Med/Surg - Observation Care Unit	0.00%	0.00%	0.00%	0.00%	
Pediatrics	15.93%	20.93%	22.68%	23.85%	
Nursery	41.62%	29.90%	20.36%	18.03%	
Neonatal Intensive Care	54.24%	21.82%	42.49%	31.67%	

**SALINAS VALLEY HEALTH MEDICAL CENTER**

**PATIENT STATISTICAL REPORT**

For the month of April and ten months to date

	<u>Month of April</u>		<u>Ten months to date</u>		<u>Variance</u>
	<u>2023</u>	<u>2024</u>	<u>2022-23</u>	<u>2023-24</u>	
<u>DELIVERY ROOM</u>					
Total deliveries	99	88	1,171	1,036	(135)
C-Section deliveries	36	20	383	319	(64)
Percent of C-section deliveries	36.36%	22.73%	32.71%	30.79%	-1.92%
<u>OPERATING ROOM</u>					
In-Patient Operating Minutes	16,444	19,960	199,591	161,557	(38,034)
Out-Patient Operating Minutes	28,776	32,124	272,004	297,852	25,848
Total	45,220	52,084	471,595	459,409	(12,186)
Open Heart Surgeries	15	14	140	113	(27)
In-Patient Cases	110	121	1,368	1,130	(238)
Out-Patient Cases	307	327	2,792	2,953	161
<u>EMERGENCY ROOM</u>					
Immediate Life Saving	40	39	333	372	39
High Risk	828	797	6,221	7,673	1,452
More Than One Resource	2,875	2,861	29,401	27,927	(1,474)
One Resource	1,818	1,891	20,610	18,886	(1,724)
No Resources	109	68	964	843	(121)
Total	<u>5,670</u>	<u>5,656</u>	<u>57,529</u>	<u>55,701</u>	<u>(1,828)</u>

**SALINAS VALLEY HEALTH MEDICAL CENTER**

**PATIENT STATISTICAL REPORT**

For the month of April and ten months to date

	Month of April		Ten months to date		Variance
	2023	2024	2022-23	2023-24	
<b>CENTRAL SUPPLY</b>					
In-patient requisitions	14,686	12,641	152,969	128,955	-24,014
Out-patient requisitions	10,072	11,315	95,155	105,038	9,883
Emergency room requisitions	961	610	7,613	7,033	-580
Interdepartmental requisitions	6,219	6,402	69,338	66,049	-3,289
<b>Total requisitions</b>	<b>31,938</b>	<b>30,968</b>	<b>325,075</b>	<b>307,075</b>	<b>-18,000</b>
<b>LABORATORY</b>					
In-patient procedures	38,458	33,663	397,296	362,312	-34,984
Out-patient procedures	10,945	43,836	104,290	292,890	188,600
Emergency room procedures	13,479	12,552	129,409	128,354	-1,055
<b>Total patient procedures</b>	<b>62,882</b>	<b>90,051</b>	<b>630,995</b>	<b>783,556</b>	<b>152,561</b>
<b>BLOOD BANK</b>					
Units processed	260	277	3,091	2,836	-255
<b>ELECTROCARDIOLOGY</b>					
In-patient procedures	1,179	1,110	11,312	10,988	-324
Out-patient procedures	407	411	3,615	3,918	303
Emergency room procedures	1,234	1,397	11,459	12,408	949
<b>Total procedures</b>	<b>2,820</b>	<b>2,918</b>	<b>26,386</b>	<b>27,314</b>	<b>928</b>
<b>CATH LAB</b>					
In-patient procedures	130	103	1,007	1,224	217
Out-patient procedures	85	152	813	1,233	420
Emergency room procedures	0	1	1	1	0
<b>Total procedures</b>	<b>215</b>	<b>256</b>	<b>1,821</b>	<b>2,458</b>	<b>637</b>
<b>ECHO-CARDIOLOGY</b>					
In-patient studies	467	372	3,973	3,807	-166
Out-patient studies	267	311	2,429	2,824	395
Emergency room studies	1	0	12	9	-3
<b>Total studies</b>	<b>735</b>	<b>683</b>	<b>6,414</b>	<b>6,640</b>	<b>226</b>
<b>NEURODIAGNOSTIC</b>					
In-patient procedures	130	114	1,401	1,261	-140
Out-patient procedures	20	14	197	174	-23
Emergency room procedures	0	0	0	0	0
<b>Total procedures</b>	<b>150</b>	<b>128</b>	<b>1,598</b>	<b>1,435</b>	<b>-163</b>

**SALINAS VALLEY HEALTH MEDICAL CENTER**

**PATIENT STATISTICAL REPORT**

For the month of April and ten months to date

	Month of April		Ten months to date		Variance
	2023	2024	2022-23	2023-24	
<b>SLEEP CENTER</b>					
In-patient procedures	1	0	2	0	-2
Out-patient procedures	160	301	1,401	2,487	1,086
Emergency room procedures	0	0	1	0	-1
<b>Total procedures</b>	<b>161</b>	<b>301</b>	<b>1,404</b>	<b>2,487</b>	<b>1,083</b>
<b>RADIOLOGY</b>					
In-patient procedures	1,401	1,261	14,480	13,027	-1,453
Out-patient procedures	458	428	3,936	4,057	121
Emergency room procedures	1,506	1,638	15,168	15,017	-151
<b>Total patient procedures</b>	<b>3,365</b>	<b>3,327</b>	<b>33,584</b>	<b>32,101</b>	<b>-1,483</b>
<b>MAGNETIC RESONANCE IMAGING</b>					
In-patient procedures	187	166	1,515	1,462	-53
Out-patient procedures	119	104	1,023	1,107	84
Emergency room procedures	2	6	59	61	2
<b>Total procedures</b>	<b>308</b>	<b>276</b>	<b>2,597</b>	<b>2,630</b>	<b>33</b>
<b>MAMMOGRAPHY CENTER</b>					
In-patient procedures	3,891	4,579	39,718	41,698	1,980
Out-patient procedures	3,856	4,548	39,355	41,263	1,908
Emergency room procedures	0	0	9	9	0
<b>Total procedures</b>	<b>7,747</b>	<b>9,127</b>	<b>79,082</b>	<b>82,970</b>	<b>3,888</b>
<b>NUCLEAR MEDICINE</b>					
In-patient procedures	17	22	191	199	8
Out-patient procedures	76	125	902	1,142	240
Emergency room procedures	0	1	2	3	1
<b>Total procedures</b>	<b>93</b>	<b>148</b>	<b>1,095</b>	<b>1,344</b>	<b>249</b>
<b>PHARMACY</b>					
In-patient prescriptions	91,756	76,901	960,490	837,441	-123,049
Out-patient prescriptions	15,650	16,760	150,085	158,726	8,641
Emergency room prescriptions	8,782	10,207	87,097	93,965	6,868
<b>Total prescriptions</b>	<b>116,188</b>	<b>103,868</b>	<b>1,197,672</b>	<b>1,090,132</b>	<b>-107,540</b>
<b>RESPIRATORY THERAPY</b>					
In-patient treatments	19,381	15,415	181,557	161,573	-19,984
Out-patient treatments	1,296	1,236	11,147	11,301	154
Emergency room treatments	467	558	4,110	5,079	969
<b>Total patient treatments</b>	<b>21,144</b>	<b>17,209</b>	<b>196,814</b>	<b>177,953</b>	<b>-18,861</b>
<b>PHYSICAL THERAPY</b>					
In-patient treatments	2,210	2,490	25,604	24,962	-642
Out-patient treatments	278	231	1,987	2,600	613
Emergency room treatments	0	0	2	0	-2
<b>Total treatments</b>	<b>2,488</b>	<b>2,721</b>	<b>27,593</b>	<b>27,562</b>	<b>-31</b>

**SALINAS VALLEY HEALTH MEDICAL CENTER**

**PATIENT STATISTICAL REPORT**

For the month of April and ten months to date

	<u>Month of April</u>		<u>Ten months to date</u>		<u>Variance</u>
	<u>2023</u>	<u>2024</u>	<u>2022-23</u>	<u>2023-24</u>	
<b>OCCUPATIONAL THERAPY</b>					
In-patient procedures	1,251	1,305	15,866	14,086	-1,780
Out-patient procedures	187	163	1,675	2,335	660
Emergency room procedures	0	0	0	0	0
Total procedures	<u>1,438</u>	<u>1,468</u>	<u>17,541</u>	<u>16,421</u>	<u>-1,120</u>
<b>SPEECH THERAPY</b>					
In-patient treatments	592	437	4,706	4,988	282
Out-patient treatments	17	38	251	387	136
Emergency room treatments	0	0	0	0	0
Total treatments	<u>609</u>	<u>475</u>	<u>4,957</u>	<u>5,375</u>	<u>418</u>
<b>CARDIAC REHABILITATION</b>					
In-patient treatments	0	0	1	11	10
Out-patient treatments	644	719	5,210	5,473	263
Emergency room treatments	0	3	0	3	3
Total treatments	<u>644</u>	<u>722</u>	<u>5,211</u>	<u>5,487</u>	<u>276</u>
<b>CRITICAL DECISION UNIT</b>					
Observation hours	<u>437</u>	<u>251</u>	<u>4,259</u>	<u>3,128</u>	<u>-1,131</u>
<b>ENDOSCOPY</b>					
In-patient procedures	66	88	830	780	-50
Out-patient procedures	59	65	604	567	-37
Emergency room procedures	0	0	0	0	0
Total procedures	<u>125</u>	<u>153</u>	<u>1,434</u>	<u>1,347</u>	<u>-87</u>
<b>C.T. SCAN</b>					
In-patient procedures	749	689	7,390	7,172	-218
Out-patient procedures	455	353	4,022	3,513	-509
Emergency room procedures	723	756	6,798	7,311	513
Total procedures	<u>1,927</u>	<u>1,798</u>	<u>18,210</u>	<u>17,996</u>	<u>-214</u>
<b>DIETARY</b>					
Routine patient diets	20,660	14,091	235,669	164,397	-71,272
Meals to personnel	<u>23,295</u>	<u>30,362</u>	<u>246,257</u>	<u>285,172</u>	<u>38,915</u>
Total diets and meals	<u>43,955</u>	<u>44,453</u>	<u>481,926</u>	<u>449,569</u>	<u>-32,357</u>
<b>LAUNDRY AND LINEN</b>					
Total pounds laundered	<u>100,446</u>	<u>93,500</u>	<u>1,020,928</u>	<u>967,005</u>	<u>-53,923</u>



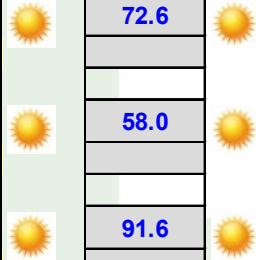
# Balanced Scorecard

*Year To Date: March 2024*

# Monthly Scorecard Service (30%)

Organizational Goals by Pillar
<b>I. Service</b>
Average of Inpatient HCAHPS Scores # of Total Responses - IP
Emergency Room Press Ganey Score # of Total Responses - ER
Average of Ambulatory HCAHPS Scores # of Total Responses - Ambulatory

Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	FY 2024 Act/Proj	TARGET	Var %	FY 2023 Baseline
72.5	72.6	74.6	76.8	73.8	74.0	72.2	70.8	72.2	73.2	73.1	0.2%	72.6
139	189	136	92	138	120	141	136	119				
63.4	59.4	57.5	53.0	54.8	59.8	53.3	61.9	64.7	58.7	58.5	0.3%	58.0
223	193	195	224	169	161	195	146	279				
92.4	91.6	92.3	90.6	92.9	96.4	93.6	95.8	94.4	93.3	92.1	1.3%	91.6
61	72	62	47	54	44	48	21	53				



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 2023 Baseline was 72.6. Rationale: Baseline = Threshold is based on FY 2023 Actuals. Target is +0.5 from baseline. Max is +1.0 from baseline.
- ER HCAHPS Score FY 2023 Baseline was 58.0. Rationale: Baseline = Threshold is based on FY 2023 Actuals. Target is +0.5 from baseline. Max is +1.0 from baseline.
- Ambulatory HCAHPS Score FY 2023 Baseline was 91.6. Rationale: Baseline = Threshold is based on FY 2023 Actuals. Target is +0.5 from baseline. Max is +1.0 from baseline.

# Monthly Scorecard

## Quality & Safety Processes – ER (5%)

Organizational Goals by Pillar	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	FY 2024 Act/Proj	TARGET	Var %	FY 2023 Baseline
<b>Emergency Room Efficiencies</b>													
Median length of stay for non-admits (in minutes)	180.0	189.0	181.0	185.0	183.0	189.0	173.0	174.0	175.0	181.0	183.0	1.1%	180.0
Median time from admit decision to time of admission to nursing unit (in minutes)	75.5	71.0	73.0	71.0	76.0	79.0	80.0	77.0	76.0	75.0	74.0	-1.4%	76.0

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.) Maximum is based the FY23 Baseline. The Target is a 3 minute increase from the Max, and the Threshold is a 6 minute increase from the Max. **Rationale:** SVMH ER has recently experienced a higher volume level, including a surge of patients and provider turnover. According to CMS, the latest available data from 2021 indicates that the State Rate is 196 minutes and the National Rate is 203 minutes for comparable size hospitals.

**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). Baseline = Threshold is based on FY 2023 Actuals. The Target is a 2 minute decrease from the Baseline, and the Max is a 4 minute decrease from the Baseline.

**Rationale:** The ER average daily census is currently averaging at about 186 patients a day compared to the baseline period of 128 (Jul21-Jan22), or a **45%** increase in ER census. We also have continued challenges with COVID and respiratory isolation. The vast increase of volume leads to limited space availability and delays. We have put forth a new initiative called the “Big 5 Handover Process”, which is a streamline handover process between the ED and nursing units, which may reduce admit time.

# Monthly Scorecard

## Quality & Safety Processes – OR & Cath Lab (5%)

Organizational Goals by Pillar	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	FY 2024 Act/Proj	TARGET	Var %	FY 2023 Baseline
<b>Operating Room Efficiencies</b>													
Turnover Time (Wheels out / Wheels in) (in minutes)	30.2	28.4	30.2	31.0	31.1	31.3	31.8	31.2	31.3	30.7	30.5	-0.7%	29.6
<b>Cath Lab Efficiencies</b>													
First Case - On Time Start %	N/A	N/A	N/A	N/A	79.5%	73.7%	88.6%	85.3%	79.5%	81.3%	75.0%	8.4%	49.0%

**OR 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 2024 Goals are set at a level 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. Additionally, our OPS department has moved over to the other side of the building into 1 Main, which means the nurse, anesthesiologist and surgeon now have to go that distance to interview and mark the patient. While this isn't a huge distance, it can add 1-2 minutes to each start and/or turnover.

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

- Source is from Meditech Community Wide Scheduling for the first case scheduled in each Cath Lab, where the scheduled time is from 7:00 am to 9:00 am
- Conscious sedation patients prepped and draped 5 minutes before the scheduled start time as measured by "Patient Ready" note charted in McKesson/CPACS
- Anesthesia patients prepped and draped within 60 minutes of scheduled start time as measured by "Patient Ready" note charted in McKesson/CPACS
- *Measurement period is from November 2023 through June 2024.* This is due to adjustments made to the Cath Lab scheduling policy, provider notification and implementation time.

# Monthly Scorecard

## Quality & Safety Processes – HAC & Hand Hygiene (10%)

Organizational Goals by Pillar	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	FY 2024 Act/Proj	TARGET	Var %	FY 2023 Baseline
Hospital Acquired Conditions Index (Weighted Total)	N/A	N/A	8.3	N/A	N/A	4.3	N/A	N/A	2.79	5.1	3.9	-32.6%	4.2
Hand Hygiene (Average Number of Observations Per Quarter Per Nursing Unit)	N/A	N/A	N/A	N/A	N/A	198	N/A	N/A	192	198	100	98.0%	60

### Hospital Acquired Conditions

Source: National Healthcare Safety Network (NHSN) & BD Health Insight Interface

Hospital Acquired Conditions will be measured **quarterly**

**Rationale for Targets: Utilizing CMS/NHSN/Magnet benchmarks and last years FY targets for sustainment and ongoing prevention practices. Process improvement measures for Falls, HAPIs, CLABSI, CAUTI, CDI and SSI processes are in place.**

- **Falls with injury:** NDNQI Magnet benchmark 0.5- our outcomes in FY2022 and FY2023 are meeting the benchmarks
- **HAPI-** stage 2 and Deep tissue injuries are added to the CMS measures already reported (currently stage 3,4 and unstageable events are reported)- goal expanded. No current benchmark. We have already improved the outcomes in FY 2023 over FY 2021- we are proposing to keep/sustain the current outcomes. Displayed as a rate: number of pressure injuries /over 1000 patient days.
- **CLABSI** (Central Line Associated Bloodstream Infection), Health & Human Services 2023 Goal for CLABSI: SIR <0.50. An HAI Event can create increases above the benchmark SIR due to low utilization. Example: FY Q2 2021 1 CLABSI increased the SIR to 0.63. We will utilize a rate methodology: number of infections/ over 1000 line days – this rate is not risk adjusted like the SIR rate is but it provides us with the ability to display outcome measures after the close of the month instead of waiting from NHSN for benchmarked data. This is important for rapid continuous improvement work.
- **CAUTI** (Catheter Associated Urinary Tract Infection) Health & Human Services 2023 Goal for CAUTI: SIR <0.75. An HAI Event(s) can create increases above the benchmark SIR due to low utilization. Example: FY Q4 2022 1 CAUTI increased the SIR to 0.72 .We will utilize a rate methodology: number of infections/ over 1000 line days – this rate is not risk adjusted like the SIR rate is but it provides us with the ability to display outcome measures after the close of the month instead of waiting from NHSN for benchmarked data.
- **CDI** (Clostridium Difficile Infection), Health & Human Services 2023 Goal for CDI: SIR <0.70. We will utilize a rate methodology: number of infections/ over 1000 patient days – this rate is not risk adjusted like the SIR rate is but it provides us with the ability to display outcome measures after the close of the month instead of waiting from NHSN for benchmarked data.
- **SSI** (Surgical Site Infections), Health and Human Services 2023 Goal for SSI <0.70. We will utilize a rate methodology: number of infections/ over 1000 procedure days – this rate is not risk adjusted like the SIR rate is but it provides us with the ability to display outcome measures after the close of the month instead of waiting from NHSN for benchmarked data.

### Hand Hygiene

Source: Hand Hygiene Auditing Tool populated by SVHMC staff, Goal is to reach 100 observations/quarter/unit –Leapfrog minimum recommended goal

*Because this is a new program, the measurement period starts October 1<sup>st</sup> and the first measurement period will be available for FY24 Q2*

# Monthly Scorecard

## Finance (20%)

Organizational Goals by Pillar	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	FY 2024 Act/Proj	TARGET	Var %	FY 2023 Baseline
<b>IV. Finance</b>													
Income from Operations (Normalized & Adjusted) (\$ in Millions)	\$3,317	\$5,915	\$6,601	\$5,278	\$2,646	\$5,928	\$10,993	\$4,031	\$5,463	\$66,895	\$50,681	32.0%	\$79,748
Operating Margin (Normalized)	6.6%	11.1%	12.4%	10.2%	5.2%	10.9%	17.7%	7.9%	10.1%	9.4%	8.2%	14.7%	12.4%

### Notes / Assumptions:

- Target Methodology is based on SVHMC's 100% of FY 2024 Board Approved Annual Operating Budget (in dollars).
- *Targets/actuals will be adjusted for FY24 for any negative impacts from the Anthem negotiations.*

# Monthly Scorecard Growth (10%)

Organizational Goals by Pillar	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	FY 2024 Act/Proj	TARGET	Var %	FY 2023 Baseline
<b>V. Growth</b>													
Percentage of Medicare Patients with <u>Post Discharge Follow Ups</u> within 14 days for an Inpatient Encounter (Attributed to SVH Clinics; Medicare Shared Savings Program and Aspire)	N/A	N/A	70.4%	N/A	N/A	67.7%	N/A	N/A	67.3%	67.9%	70%	-3.0%	60.7%
Robotic-Assisted Surgeries (DaVinci X1 System Only)	16	21	25	35	28	27	16	17	19	204	124	64.5%	113
Expand Epic Access for Hospital Departments (view access to Ambulatory Medical Record)	N/A	N/A	3	N/A	N/A	0	N/A	N/A	7	10	6	66.7%	3

- **Post Discharge Follow Up:** The eligible population is approximately 13,000 (MSSP=9768 and Aspire=3315). The denominator will consist of any hospital discharges for this eligible population. The numerator will consist of those patients with a post-discharge follow-up within 14 days. [Data will be provided quarterly.](#)
- **Robotic Surgery:** The volume of robotic-assisted surgeries attributed to use of DaVinci system only. Currently 4 surgeons are using the robot. Plan for expansion to urology. [Data will be provided monthly](#) and will be broken down by physician and procedure category.
- **Expanded Epic Access:** Plan is to provide access to various hospital departments with emphasis on departments with clinical staff.
  - Areas of emphasis for FY 2024: L&D, ONS (4th Floor), Med Surg (3rd Floor), Critical Care (1Main), 3rd Tower, 4th Tower, ICU, Telemetry
  - Rollout will require implementation plan and resources to ensure success/adoption
  - Important for care continuity, especially medication reconciliation
  - [Data will be provided quarterly.](#)

# Monthly Scorecard Community (5%)

Organizational Goals by Pillar	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	FY 2024 Act/Proj	TARGET	Var %	FY 2023 Baseline
<b>VI. Community</b>													
Increase community engagement through a newly designed employee outreach program resulting in community benefit events involving Salinas Valley Health staff. (Number of events)	0	0	0	0	0	1	2	0	0	3	2	50.0%	NA



- The Community Pillar team will engage employees to create an employee outreach program, designing various program elements and characteristics such as:
  - Method of measuring impact/benefit provided to the community
  - Measurement of employee/family/friends engagement
  - Alignment with Community Benefit Funding
  - Addresses issues identified in Community Health Needs Assessment
  - Communication strategy
  - Measurement and reporting structure
  - Objectives and goals
  - Employee driven
  - Sustainability
  - Processes such as applications and approvals
  
- The Community Pillar team will engage employees to execute the created employee outreach program resulting in community benefit events.
  
- Engagement Events:
  1. Christmas in Closer Park, December 4<sup>th</sup>
  2. Martin Luthor King Day of Service Events, January 15<sup>th</sup> & January 20<sup>th</sup>
  3. The next event is April 21st in collaboration with Salinas Regional Sports Complex. This will feature the Mobile Clinic, SVH service lines, a park clean up and other.



# *Questions / Comments?*



# ***APPENDIX***

# Monthly Scorecard

## Quality & Safety Processes – HAC Detail

Organizational Goals by Pillar	Jul	Aug	Sep	Q1	Oct	Nov	Dec	Q2	Jan	Feb	Mar	Q3	FY 2024 Act/Proj	TARGET	Variance	Var %
<b>Hospital Acquired Conditions Index</b>																
Falls With Injury, Occurance Rate (16.7% Weight)	0.00	0.00	0.74	0.25	0.24	0.47	0.22	0.31	0.00	0.51	0.24	0.24	0.27	0.18	-0.1	-44.3%
# of FALLS EVENTS	0	0	3	3	1	2	1	4	0	2	1	3				
HAPI Stages 2-4 and Unstageable Rate (16.7% Weight)	1.57	3.41	2.53	2.50	1.45	2.00	0.95	1.47	1.01	1.73	1.87	1.52	1.83	2.03	0.2	9.8%
# of HAPI EVENTS	6	12	9	27	5	7	4	16	4	6	7	17				
Surgical Site Infections Rate (16.6% Weight)	10.81	0.00	0.00	3.60	0.00	6.80	0.00	2.27	0.00	0.00	0.00	0.00	1.96	0.80	-1.2	-145.5%
# of SSI EVENTS	2	0	0	2	0	1	0	1	0	0	0	0				
CLABSI Rate (16.7% Weight)	0.00	2.15	0.00	0.72	0.00	0.00	0.00	0.00	0.00	0.00	2.27	0.74	0.49	0.27	-0.2	-77.9%
# of CLABSI EVENTS	0	1	0	1	0	0	0	0	0	0	1	1				
CAUTI Rate (16.7% Weight)	1.54	0.00	1.44	0.99	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.33	0.36	0.0	6.7%
# of CAUTI EVENTS	1	0	1	2	0	0	0	0	0	0	0	0				
CDI Rate (16.6% Weight)	0.29	0.30	0.00	0.20	0.30	0.29	0.27	0.29	0.30	0.30	0.28	0.29	0.26	0.23	0.0	-12.6%
# of CDI EVENTS	1	1	0	2	1	1	1	3	1	1	1	3				
<b>Hospital Acquired Conditions Index (Weighted Total)</b>				8.26				4.33				2.79	5.13	3.87	-1.3	-32.6%

# **ADJOURNMENT**