

Measure A Citizen Oversight Committee Meeting

Friday, May 20, 2016 (9:00AM - 11:30AM)
1000 San Leandro Blvd. (Conference Room 325)
San Leandro, CA 94577

ATTENDANCE

Members Present

1. Arthur Chen
2. Adam Davis
3. Al Murray
4. Fran David
5. Gwendolyn McClain
6. Olga Borjon
7. Sally Morgan
8. Ursula Rolfe

Members Absent

- George Phillips (excused)
John Becker (excused)
Kuwaza Imara (unexcused)
Louis Chicoine (unexcused)
Rachel Richman (excused)

("Excused" indicates that member notified HCSA of absence in advance.)

Other Attendees

1. James Nguyen, Health Care Services Agency
2. Rebecca Gebhart, Health Care Services Agency
3. Connie Soriano, Health Care Services Agency
4. Keith Davies

I. 9:00AM Welcome

II. 9:05AM Announcements & Updates

Oversight Committee Membership Updates

- No nominations have been received for Seats No. 4, 16 and 17.

III. 9:10AM Public Comments

There were no public comments.

IV. 9:15AM Review of Minutes

Meeting Minutes from March 25, 2016

- Fran made a motion to approve the minutes. Al seconded the motion. No abstentions. Motion passed.

V. 9:20AM Update: Finance/Budget

A. Measure A Revenue Received to Date (handout) & Reserve Update

- HCSA Staff highlighted revenues received to date and current reserve balance.
- Estimated County (Non- AHS) revenue projected to almost \$34 million (\$33,885,832)
- No significant change to the Measure A reserve balance which remains at \$5.4 million. The only change is the pending allocation to Youth Uprising.

B. Board of Supervisors Measure A Approvals (See Appendix A)

- James reviewed Board-approved contracts.

VI. 9:30AM Quarterly Update: Alameda Health Systems Financial Update and Metrics Report

Presenter: David Cox, Chief Financial Officer

- AHS reported Operating Income of \$17.3 million which is slightly below budget. Operations are going well; total revenues are 2.9% favorable to budget which is offset by volume-related expense variances.
- Labor attrition over time for support positions in large part due to not filling open positions that become vacant.
- New Strategic plan involves Care Coordination (case management and utilization management) with the goal patients receiving appropriate care and moving through the system. AHS continues to track benchmarks.

- VII. 10:15AM Review: FY 2013-14 Measure A Report Final Draft**
Fran made motion to accept Final Report with edits. Sally seconded the motion. Motion passed.
- VIII. 10:30 AM Future Measure A Presentations**
Oversight Committee to discuss future Measure A Presentations at a future meeting date.
- IX. 10:45 AM FY 2015-16 Measure A Allocation Report Template**
Two specific changes proposed regarding measureable results received.
- X. 10:55AM Future Meetings**
Next Meeting: Friday, June 24, 2016 (9:00AM to 11:30AM)
- XI. 11:00 AM Adjourn to subcommittees to review FY 2014-20115 Allocation Report summaries**

Public comments on agenda items are welcomed when the item is considered by the committee.

Appendix A

Board of Supervisors Measure A Approvals

Board Date	Provider	Amount	Services
1/26/16	Regents of the University of California, San Francisco	\$135,269 (Measure A Base)	Provide evaluation and project management services for the School Health Center Program of Center for Healthy Schools and Communities.
	Niroga Institute (2 nd Amendment)	\$41,200 (Measure A Base augmentation)	Provide mental health services to incarcerated and at-risk youth at the Alameda County Juvenile Justice Center.
	Senior Support Program of the Tri-Valley	\$20,000 (Measure A BOS D4 Discretionary)	Provide mental health services to low-income seniors in Tri-Valley.
2/2/16	City of Fremont	\$163,863 (Measure A Base)	Provide Youth and Family Opportunity program services (which include medical, behavioral health, dental, early intervention and prevention services, youth development, career development, training, family engagement, and community outreach) to students and their families in Tri-Cities
	Spanish Speaking Unity Council	\$64,297 (Measure A Base)	Provide the Latino Men & Boys (LMB) program services (which include continuous educational support and health-related services to more than 130 high-risk Latino boys through case management from middle school to high school) at school health centers.