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Outpatient Health

AGENDA

KERN COUNTY HOSPITAL AUTHORITY
COMMUNITY HEALTH CENTER
BOARD OF DIRECTORS

Community Health Center
Administrative Office
900 Truxtun Avenue, Suite 250
Bakersfield, California 93301

Special Meeting
Thursday November 19, 2026

11:30 A.M.

BOARD TO RECONVENE

Board Members: Achterberg, Avila, Behill, Kemp, Lopez, Martinez, Nichols, Sandoval, Smith
Roll Call:

CONSENT AGENDA/OPPORTUNITY FOR PUBLIC COMMENT: ALL ITEMS LISTED WITH A "CA" ARE CONSIDERED TO BE ROUTINE AND NON-CONTROVERSIAL BY KERN COUNTY HOSPITAL AUTHORITY COMMUNITY HEALTH CENTER STAFF. THE "CA" REPRESENTS THE CONSENT AGENDA. CONSENT ITEMS WILL BE CONSIDERED FIRST AND MAY BE APPROVED BY ONE MOTION IF NO MEMBER OF THE BOARD OR AUDIENCE WISHES TO COMMENT OR ASK QUESTIONS. IF COMMENT OR DISCUSSION IS DESIRED BY ANYONE, THE ITEM WILL BE REMOVED FROM THE CONSENT AGENDA AND WILL BE CONSIDERED IN LISTED SEQUENCE WITH AN OPPORTUNITY FOR ANY MEMBER OF THE PUBLIC TO ADDRESS THE BOARD CONCERNING THE ITEM BEFORE ACTION IS TAKEN.

STAFF RECOMMENDATION SHOWN IN CAPS

PUBLIC PRESENTATIONS

1) This portion of the meeting is reserved for persons to address the Board on any matter not on this agenda but under the jurisdiction of the Board. Board members may respond briefly to statements made or questions posed. They may ask a question for clarification, make a referral to staff for factual information or request staff to report back to the Board at a later meeting. In addition, the Board may take action to direct the staff to place a matter of business on a future agenda. SPEAKERS ARE LIMITED TO TWO MINUTES. PLEASE STATE AND SPELL YOUR NAME BEFORE MAKING YOUR PRESENTATION. THANK YOU!

BOARD MEMBER ANNOUNCEMENTS OR REPORTS

2) On their own initiative, Board members may make an announcement or a report on their own activities. They may ask a question for clarification, make a referral to staff or take action to have staff place a matter of business on a future agenda (Government Code section 54954.2(a)(2)) –

ITEMS FOR CONSIDERATION

CA

3) Minutes for the Kern County Hospital Authority Community Health Center Board of Directors regular meeting on October 28, 2026 –
APPROVE

4) Report on the Kern County Hospital Authority Community Health Center Clinical Quality Metrics for Quarter 3 –
RECEIVE AND FILE

5) Report on the Kern County Hospital Authority Community Health Center Health Center Service Utilization for October 2026–
RECEIVE AND FILE

6) Report on the Kern County Hospital Authority Community Health Center financials for September 2026 –
RECEIVE AND FILE

7) Kern County Hospital Authority Community Health Center Executive Director Report –
RECEIVE AND FILE

ADJOURN TO WEDNESDAY, DECEMBER 9, 2026 AT 11:30 A.M.

SUPPORTING DOCUMENTATION FOR AGENDA ITEMS

All agenda item supporting documentation is available for public review at Kern Medical Center in the Administration Department, 1700 Mount Vernon Avenue, Bakersfield, 93306 during regular business hours, 8:00 a.m. – 5:00 p.m., Monday through Friday, following the posting of the agenda. Any supporting documentation that relates to an agenda item for an open session of any regular meeting that is distributed after the agenda is posted and prior to the meeting will also be available for review at the same location.

AMERICANS WITH DISABILITIES ACT
(Government Code Section 54953.2)

The Community Health Center Conference Room is accessible to persons with disabilities. Disabled individuals who need special assistance to attend or participate in a meeting of the Kern County Hospital Authority Community Health Center Board of Directors may request assistance at Kern Medical Center in the Administration Department, 1700 Mount Vernon Avenue, Bakersfield, California, or by calling (661) 326-2102. Every effort will be made to reasonably accommodate individuals with disabilities by making meeting material available in alternative formats. Requests for assistance should be made five (5) working days in advance of a meeting whenever possible.

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SUMMARY OF PROCEEDINGS

KERN COUNTY HOSPITAL AUTHORITY
COMMUNITY HEALTH CENTER
BOARD OF DIRECTORS

Community Health Center
Administrative Office
900 Truxtun Avenue, Suite 250
Bakersfield, California 93301

Regular Meeting
Wednesday, October 28, 2026

11:30 A.M.

BOARD RECONVENED – Director Smith convened the meeting of the Board at 11:31 A.M., and established a quorum was present.

Board Members: Achterberg, Avila, Behill, Kemp, Lopez, Martinez, Nichols, Sandoval, Smith
Roll Call: 7 Present; 2 Absent – Kemp, Martinez
DIRECTOR MARTINEZ ARRIVED AFTER ROLL CALL WAS MADE.

NOTE: The vote is displayed in bold below each item. For example, Smith-Behill denotes Director Smith made the motion and Director Behill seconded the motion.

CONSENT AGENDA: AGENDA/OPPORTUNITY FOR PUBLIC COMMENT: AS INDICATED BELOW WITH A "CA" WAS REVIEWED, DISCUSSED, AND APPROVED AS ONE MOTION.

BOARD ACTION SHOWN IN CAPS

PUBLIC PRESENTATIONS

1) This portion of the meeting is reserved for persons to address the Board on any matter not on this agenda but under the jurisdiction of the Board. Board members may respond briefly to statements made or questions posed. They may ask a question for clarification, make a referral to staff for factual information or request staff to report back to the Board at a later meeting. In addition, the Board may take action to direct the staff to place a matter of business on a future agenda.
NO ONE HEARD

BOARD MEMBER ANNOUNCEMENTS OR REPORTS

2) On their own initiative, Board members may make an announcement or a report on their own activities. They may ask a question for clarification, make a referral to staff or take action to have staff place a matter of business on a future agenda (Government Code section 54954.2(a)(2)) – **NO ONE HEARD**

CA
3) Minutes for the Kern County Hospital Authority Community Health Center Board of Directors special meeting on September 30, 2026 –
APPROVED
Smith-Nichols: 8 Ayes; 1 Absent – Kemp

CA
4) Proposed retroactive Amendment No. 2 to Co-Applicant Agreement 011-2025 with the Kern County Hospital Authority –
APPROVED; AUTHORIZED CHAIRMAN TO SIGN
Smith-Nichols: 8 Ayes; 1 Absent – Kemp

CA
5) Establish Regular Meeting Dates of the Kern County Hospital Authority Community Health Center Board of Directors for Calendar Year 2027 –
APPROVED; ADOPTED RESOLUTION
Smith-Nichols: 8 Ayes; 1 Absent - Kemp

CA
6) Proposed approval of revised policy LAL-OP-05 Ambulatory Specialty Referral Authorization –
APPROVED; AUTHORIZED CHAIRMAN TO SIGN
Smith-Nichols: 8 Ayes; 1 Absent - Kemp

CA
7) Proposed resolution adopting new policy addressing public participation during meetings of the Board of Directors –
APPROVED; ADOPTED RESOLUTION
Smith-Nichols: 8 Ayes; 1 Absent - Kemp

8) Report on referral to staff from May 27, 2026 regarding the updated phone system –
DIRECTOR MARTINEZ INTRODUCED PRACTICE MANAGER BRADEN RAY WHO MADE PRESENTATION REGARDING THE STATUS OF THE PHONE SYSTEM. DIRECTOR MARTINEZ ASKED IF EACH CLINIC HAS THEIR OWN PHONE NUMBER. EXECUTIVE DIRECTOR RESPONDED THAT CALLERS ARE NOW ABLE TO CALL THE CLINICS DIRECTLY SINCE THEY EACH HAVE THEIR OWN PHONE NUMBER TO REACH THEIR PROVIDERS. FOR APPOINTMENTS AND REFERRALS, THEY CAN STILL CALL THE APPOINTMENT LINE. DIRECTOR NICHOLS ASKED IF STAFF CALLS CALLERS BACK IF THEY HANG UP OF IF THE CALL IS DISCONNECTED. EXECUTIVE DIRECTOR RESPONDED THAT IF THE NUMBER THEY CALLED FROM APPEARS, STAFF DOES CALL THEM BACK. PRACTICE MANAGER ANNOUNCED THAT STOCKDALE HAD THE HIGHEST VOLUME OF CALLS AT 12,575 IN 6 WEEKS. EXECUTIVE DIRECTOR EXPLAINED THAT IF ONE CLINIC HAS TOO MANY CALLS COMING IN AT THE SAME TIME, CALLS ARE PUT ON CUE FOR OTHER CLINIC RECEPTIONISTS TO ANSWER. DIRECTOR AVILA ASKED IF THERE WAS

ANY DATA TO COMPARE TO. PRACTICE MANAGER RESPONDED THAT THIS REPORT WAS THE BASELINE.
RECEIVED AND FILED
Avila-Smith: 8 Ayes; 1 Absent - Kemp

9) Report on the Kern County Hospital Authority Community Health Center Board of Directors Peer Review process for the period July 1, 2025 through June 30, 2026 –
EXECUTIVE DIRECTOR MADE PRESENTATION. EXECUTIVE DIRECTOR ANNOUNCED THAT THE COMMUNITY HEALTH CENTER HAS DELEGATED THE PEER REVIEW PROCESS TO KERN MEDICAL CENTER (KMC). EXECUTIVE NOTED THAT NO STAFF WAS REFERRED TO PEER REVIEW. DIRECTOR MARTINEZ ASKED WHAT DOES M&M STAND FOR. EXECUTIVE DIRECTOR RESPONDED MORBIDITY AND MORTALITY.
RECEIVED AND FILED
Smith-Behill: 8 Ayes; 1 Absent - Kemp

10) Report on the status of long-term planning for the Kern County Hospital Authority Community Health Center –
EXECUTIVE DIRECTOR MADE PRESENTATION. EXECUTIVE DIRECTOR ANNOUNCED THAT CUSTOMER SERVICE FOLLOW-UP TRAINING WAS EXPANDED TO ALL CHC STAFF. EXECUTIVE DIRECTOR ADDED THAT THE ANNUAL COMPETENCY SKILLS FAIR THROUGH AMBULATORY CLINIC LEADERSHIP WAS WELL RECEIVED BY STAFF. EXECUTIVE DIRECTOR FURTHER ANNOUNCED THAT THE FOCUS WAS TO FOLLOW-UP TO PRIOR SURVEYS IN ORDER TO ENHANCE PATIENT EXPERIENCES IN WOMEN'S HEALTH BY ADDING ADDITIONAL PHYSICIANS AND ADVANCED PRACTICE PROVIDERS TO WOMEN'S HEALTH INCLUDING AN OBGYN RESIDENT AND INCREASED CLINIC HOURS. EXECUTIVE DIRECTOR POINTED OUT THAT THERE WAS AN 8% INCREASE IN OVERALL EXPERIENCE FROM WOMEN'S HEALTH FROM JULY 2025 TO SEPTEMBER 2026. EVERY PATIENT RECEIVES A SURVEY DURING THEIR APPOINTMENT TO ASSESS SERVICE QUALITY.
RECEIVED AND FILED
Avila-Sandoval: 8 Ayes; 1 Absent - Kemp

11) Report on Kern County Hospital Authority Community Health Center Quality – Patient Complaints and Grievances for Quarter 3 –
INTERIM CHIEF MEDICAL OFFICER DR. RAJ INTRODUCED DIRECTOR OF PERFORMANCE IMPROVEMENT CARMELITA MAGNO WHO MADE PRESENTATION. DIRECTOR OF PERFORMANCE IMPROVEMENT ANNOUNCED THAT IN QUARTER 3, ONLY 6 COMPLAINTS WERE PRESENTED. FIVE (5) IN JULY AND ONE (1) IN SEPTEMBER. DIRECTOR MARTINEZ ASKED IF COMPLAINTS ARE ELEVATED TO HEALTH PLANS. DIRECTOR OF PERFORMANCE IMPROVEMENT RESPONDED THAT THEY ARE NOT AND ADDED THAT ALL COMPLAINTS AND GRIECANCES GO THROUGH RISK MANAGEMENT AS FOLLOW-UP, TO BE INVESTIGATED IF THEY CANNOT BE IMMEDIATELY RESOLVED. INTERIM CHIEF MEDICAL DIRECTOR ADDED THAT GIVEN THE VOLUME OF PATIENTS THAT ARE SEEN, THE NUMBER OF GRIEVANCES IS VERY LOW.
RECEIVED AND FILED
Avila-Achterberg: 8 Ayes; 1 Absent – Kemp (Director Achterberg left after vote)

12) Report on the Kern County Hospital Authority Community Health Center Health Center Service Utilization for August 2026 –
DIRECTOR MARTINEZ NOTED A CORRECTION TO BE MADE REGARDING THE MONTH OF

THE UTILIZATION REPORT WHICH SHOULD READ SEPTEMBER 2026. DIRECTOR MARTINEZ INTRODUCED NURSING ADMINISTRATOR ALICIA GAETA WHO MADE PRESENTATION. NURSING ADMINISTRATOR ANNOUNCED THAT FOR SEPTEMBER THE PERCENTAGE OF NO-SHOWS WAS 15% WHICH IS CONSIDERED GOOD BASED ON THE VOLUME OF APPOINTMENTS THAT ARE MADE. NURSING ADMINISTRATOR ADDED THAT FOR THE MONTH OF SEPTEMBER 1.58% OF PATIENTS SEEN WERE UNINSURED. DIRECTOR SANDOVAL POINTED OUT THAT TUESDAY IS THE DAY OF THE WEEK THAT IS THE BUSIESTS BUT WHEN SHE CALLS TO MAKE APPOINTMENTS, THEY ALWAYS SCHEDULE HER APPOINTMENTS ON A TUESDAY AND ASK WHY IS THAT. EXECUTIVE DIRECTOR RESPONDED THAT TUESDAYS ARE WHEN MOST OF THE PHYSICIANS ARE AT THE CLINICS AND THAT ON OTHER DAYS OF THE WEEK, THEY ARE ON HOSPITAL DUTIES OR RESIDENT RESPONSIBILITIES. EXECUTIVE DIRECTOR ADDED THAT AS FOLLOW-UP, STAFF IS CONTINOUSLY BEING REINFORCED TO OFFER OTHER OPTIONS TO PATIENTS LIKE SEEING AN NP INSTEAD OR OFFERING EVENING AND WEEKEND APPOINTMENTS.
RECEIVED AND FILED
Smith-Sandoval: 7 Ayes; 2 Absent – Achterberg, Kemp

13) Report on the Kern County Hospital Authority Community Health Center financials for August 2026 –
DIRECTOR MARTINEZ INTRODUCED FINANCE ADMINISTRATOR ANDREW CANTU WHO MADE PRESENTATION. DIRECTOR MARTINEZ ASKED IF WHEN TRANSITIONING TO CHC, DID THE CHC LOSE PREFERRED PRICING. FINANCE ADMINISTRATOR RESPONDED THAT THE CHC DID NOT LOSE PREFERRED PRICING. DIRECTOR MARTINEZ FURTHER ASKED FINANCE ADMINISTRATOR IF HE HAS SEEN A HIGHER INFLATION RATE AND POINTED OUT THAT THE COUNTY HAS SEEN A 6-7% HIGHER COST FOR EVERYTHING. FINANCE ADMINISTRATOR RESPONDED THAT THERE WAS A HIGHER COST BECAUSE OF THE SALARY INCREASES BECAUSE OF THE MOU THAT WAS SIGNED THIS YEAR AND THAT FOR EXAMPLE THE PHARMACY DEPARTMENT USUALLY BUDGETS 8-10% HIGHER DUE TO THE COST INCREASES THAT ARE EXPECTED.
RECEIVED AND FILED
Avila-Behill: 7 Ayes; 2 Absent – Achterberg, Kemp

14) Kern County Hospital Authority Community Health Center Executive Director Report –
EXECUTIVE DIRECTOR ANNOUNCED THAT THE HOSPITAL HAD A SUCCESSFUL JOINT COMMISSION SURVEY THE PREVIOUS WEEK. EXECUTIVE DIRECTOR ASKED TO MOVE THE NOVEMBER 11TH MEETING TO THURSDAY NOVEMBER 19TH AND THE DECEMBER 9TH MEETING TO THURSDAY DECEMBER 17TH DUE TO VARIOUS STAFF BEING OUT OF THE OFFICE. EXECUTIVE DIRECTOR ANNOUNCED THAT HRSA ADDITIONS WERE APPROVED TO BE ADDED ON OCTOBER 31ST. TWO (2) OUT OF THE THREE (3) MOBILE CLINICS WERE APPROVED INCLUDING THE PSYCHIATRY MOBILE CLINIC. ONLY ONE MOBILE CLINIC IS PENDING APPROVAL AND THAT THE MOBILE DENTAL UNIT WILL BE ADDED TO THE FQHC. EXECUTIVE DIRECTOR ADDED THAT ON OCTOBER 20TH SENATOR MELISSA HURTADO PRESENTED A 2 MILLION DOLLAR GRANT CHECK FOR THE MOBILE DENTAL UNIT. EXECUTIVE DIRECTOR FURTHER ADDED THAT OVER 600 PATIENTS WERE SEEN AT THE MOBILE CLINICS LAST MONTH. EXECUTIVE DIRECTOR ANNOUNCED THAT THE RATE SEETING IS STILL IN PROCESS.
RECEIVED AND FILED
Nichols-Smith: 7 Ayes; 2 Absent – Achterberg, Kemp

CA
15) Miscellaneous Correspondence as of October 28, 2026 –
RECEIVED AND FILED
Smith-Nichols: 8 Ayes; 1 Absent - Kemp

ADJOURNED TO WEDNESDAY, NOVEMBER 11, 2026 AT 11:30 A.M.
Behill

/s/ Marisol Urcid
Clerk of the Board of Directors

/s/ Elsa Martinez
Chairman, Board of Directors
Kern County Hospital Authority Community Health Center

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BOARD OF DIRECTORS
COMMUNITY HEALTH CENTER
SPECIAL MEETING

November 19, 2026

Subject: Report on the Kern County Hospital Authority Community Health Center Clinical Quality Metrics for Quarter 3

Recommended Action: Receive and File

Summary:

Dr. Thiagarajan Nandhagopal Medical Director of the Kern County Hospital Authority Community Health Center, will provide your Board with a presentation on the Kern County Hospital Authority Community Health Center's Clinical Quality Metrics Report for Quarter 3 for Year 2026.

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Quality Metrics – Quarter 3, 2026

Community Health Center Board of Directors

Dashboard

Measure Name	Numerator	Denominator	2025	Total Q1 + Q2			Total Q1 + Q2 + Q3			Target
			%	NUM	DEN	%	NUM	DEN	%	
Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan	Patients with a documented BMI during the encounter or during the measurement period, AND when the BMI is outside of normal parameters, a follow-up plan is documented during the encounter or during the measurement period	All patients aged 18 and older with at least one qualifying encounter during the measurement period	72.0%	7101	13047	54.4%	7905	15504	51.0%	73.0%
Childhood Immunization Status	Children who received the recommended vaccines by their second birthday.	Children who turn 2 years of age during the measurement period and have a visit during the measurement period	20.6%	142	713	19.9%	151	772	19.6%	21.3%
Diabetes: Hemoglobin A1c (HbA1c) Poor Control (> 9%) (Inverse Measure)	Patients whose most recent HbA1c level is >9.0%	Patients 18-75 years of age with diabetes with a visit during the measurement period	25.0%	767	3055	25.1%	742	3420	21.7%	24.9%
Cervical Cancer Screening	Women with one or more screenings for cervical cancer	Women 24-64 years of age by the end of the measurement period with a visit during the measurement period	63.7%	4475	7170	62.4%	5368	8810	60.9%	63.7%
Colorectal Cancer Screening	Patients with one or more screenings for colorectal cancer	Patients 46-75 years of age with a visit during the measurement period	47.1%	2876	5967	48.2%	3292	6910	47.6%	47.4%
Breast Cancer Screening	Women with one or more mammograms any time on or between October 1 two years prior to the measurement period and the end of the measurement period	Women 52-74 years of age with a visit during the measurement period	62.0%	1610	2406	66.9%	3137	4948	63.4%	63.5%
Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	Pop 1: Patients who were screened for tobacco use at least once	All patients aged 12 years and older seen for at least two visits or at least one preventive visit during the measurement period	96.9%	11682	12198	95.8%	14564	15280	95.3%	81.6%
	Pop 2: Patients who received tobacco cessation intervention		49.4%	200	386	51.8%	350	673	52.0%	49.3%
	Pop 3: Patients who were screened for tobacco use at least once AND who received tobacco cessation intervention		95.3%	11496	12198	94.2%	14162	15280	92.7%	79.5%

Red – not meeting target
Green – meeting target

Dashboard - continued

Measure Name	Numerator	Denominator	2025	Total Q1 + Q2			Total Q1 + Q2 + Q3			Target
			%	NUM	DEN	%	NUM	DEN	%	
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents	Pop 1: Patients who had a height, weight and body mass index (BMI) percentile recorded	Patients 3-17 years of age with at least one outpatient visit with a primary care physician (PCP) or an OB/GYN	98.5%	3323	3382	98.3%	5569	5630	98.9%	91.2%
	Pop 2: Patients who had counseling for nutrition		66.5%	1032	3382	30.5%	2002	5630	35.6%	65.2%
	Pop 3: Patients who had counseling for physical activity		64.9%	1097	3382	32.4%	1951	5630	34.7%	59.8%
Preventive Care and Screening: Screening for Depression and Follow-Up Plan	Patients screened for depression	All patients aged 12 years and older with at least one qualifying encounter during the measurement period	23.8%	7604	16341	46.5%	17031	20556	82.9%	16.2%
Depression Remission at Twelve Months	Patients who achieved remission at twelve months as demonstrated by the most recent twelve month (+/- 60 days) PHQ-9 score of less than five	Patients 12 years of age and older with a diagnosis of major depression or dysthymia and an initial PHQ-9 score greater than nine	6.5%	4	136	2.9%	5	140	3.6%	14.2%
Controlling High Blood Pressure	Patients whose most recent blood pressure is adequately controlled (systolic blood pressure < 140 mmHg and diastolic blood pressure < 90 mmHg)	Patients 18-85 years of age who had a visit during the measurement period and diagnosis of essential hypertension	91.6%	3598	4379	82.2%	3689	4548	81.1%	63.9%
Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	Patients who are actively using or who receive an order (prescription) for statin therapy	Pop 1: All patients who were previously diagnosed with or currently have a diagnosis of clinical ASCVD, including an ASCVD procedure Pop 2: Patients aged 20 to 75 years who have ever had a laboratory result of LDL-C >=190 mg/dL or were previously diagnosed with or currently have an active diagnosis of familial hypercholesterolemia Pop 3: Patients aged 40 to 75 years with Type 1 or Type 2 diabetes	79.8%	2367	3421	69.2%	2645	3796	69.7%	69.5%
HIV Screening	Patients with documentation of an HIV test performed on or after their 15th birthday and before their 66th birthday	Patients 15 to 65 years of age who had at least one outpatient visit during the measurement period	76.5%	11701	14726	79.5%	13677	17372	78.7%	45.0%

Red – not meeting target
Green – meeting target

Key initiatives to improve quality metrics

- Focus on mammogram scheduling before end of the year for CHC patients.
- Offer pharmacist-led diabetes management and nutrition consultations.
- Implement cervical cancer self-swab testing.
- Standardize documentation for tobacco cessation, nutrition, and physical activity counseling.
- Provide phone follow-up and behavioral health therapy for patients with elevated PHQ-9 scores.

Questions ?

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BOARD OF DIRECTORS
COMMUNITY HEALTH CENTER
SPECIAL MEETING

November 19, 2026

Subject: Report on the Kern County Hospital Authority Community Health Center Health Center Service Utilization for October 2026

Recommended Action: Receive and File

Summary:

The Health Resources and Services Administration (HRSA) Health Center Program Compliance Manual (Program) outlines certain roles and responsibilities that must reside with the Community Health Center Board (CHC Board). One of these responsibilities includes oversight for service utilization.

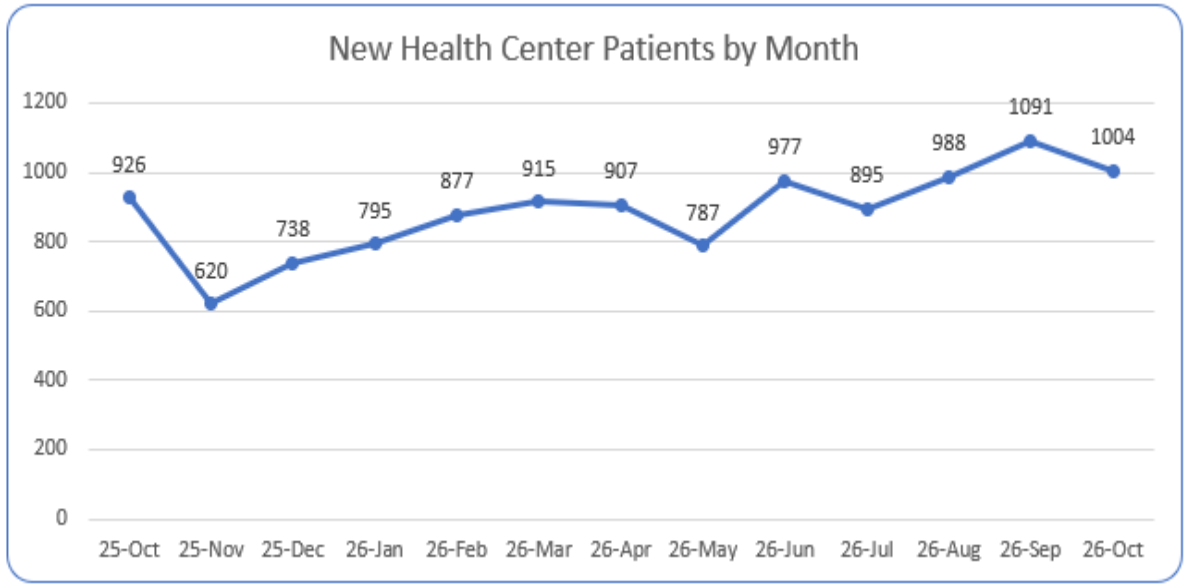
The Community Health Center produces data-based reports on: patient service utilization, trends and patterns in the patient population and overall health center performance, as necessary to inform and support internal decision-making and oversight by key management staff and governing board.

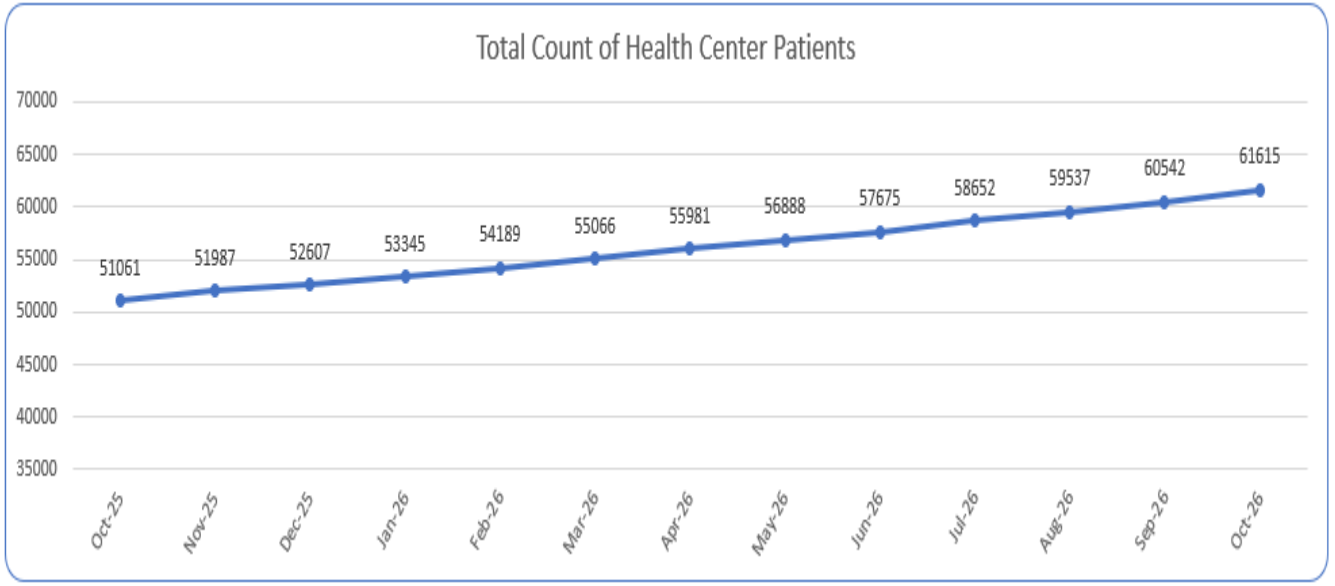
This presentation will be delivered on a monthly basis, as it contains critical information necessary for the CHC Board to effectively monitor progress and ensure alignment with its long-term strategic planning goals. In addition to the monthly data, quarterly, the report will include utilization summaries to highlight the trends and patterns to provide a broader perspective on performance over time and how effective changes/additions are to improving patient utilization.

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Kern County Hospital Authority Community Health Center Board of Directors' – October 2026 Health Center Service Utilization

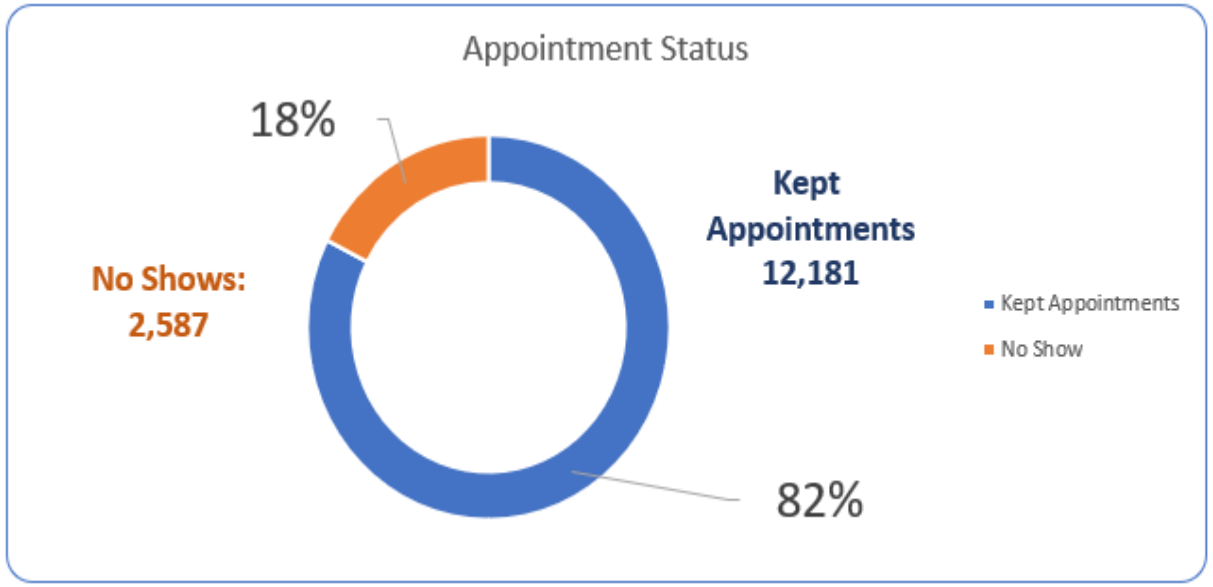
New Patient Data
October 2026

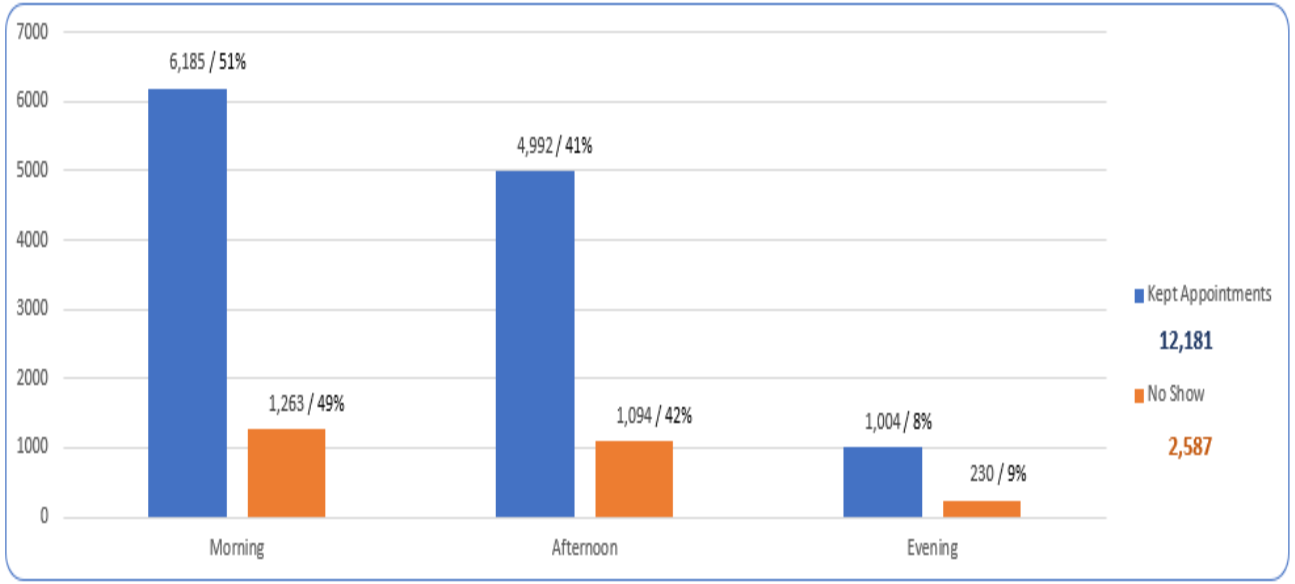




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Kept Versus No Shows
October 2026

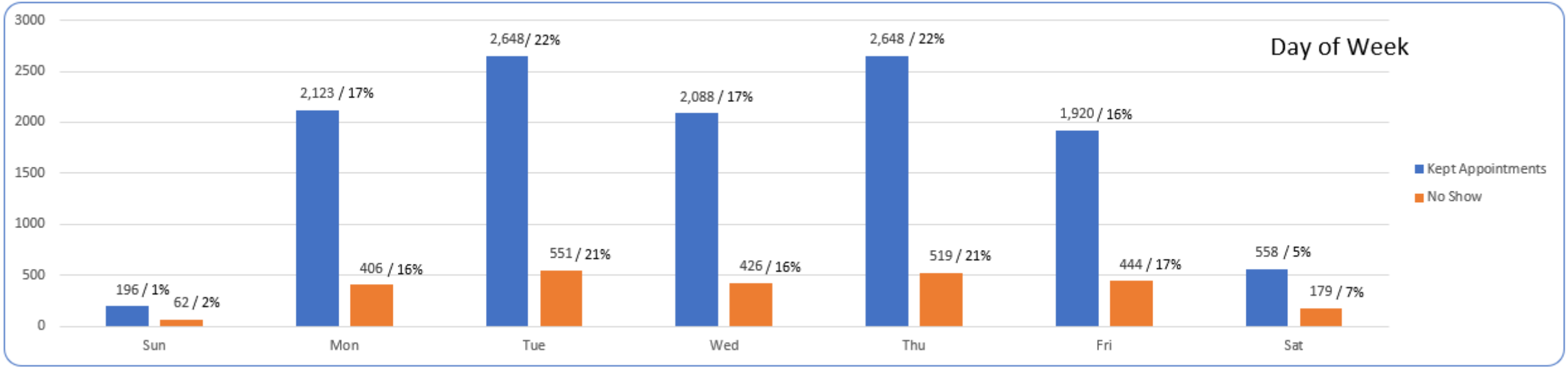




Morning: 8am-12pm
Afternoon: 12pm -5pm
Evening: 5pm-8pm

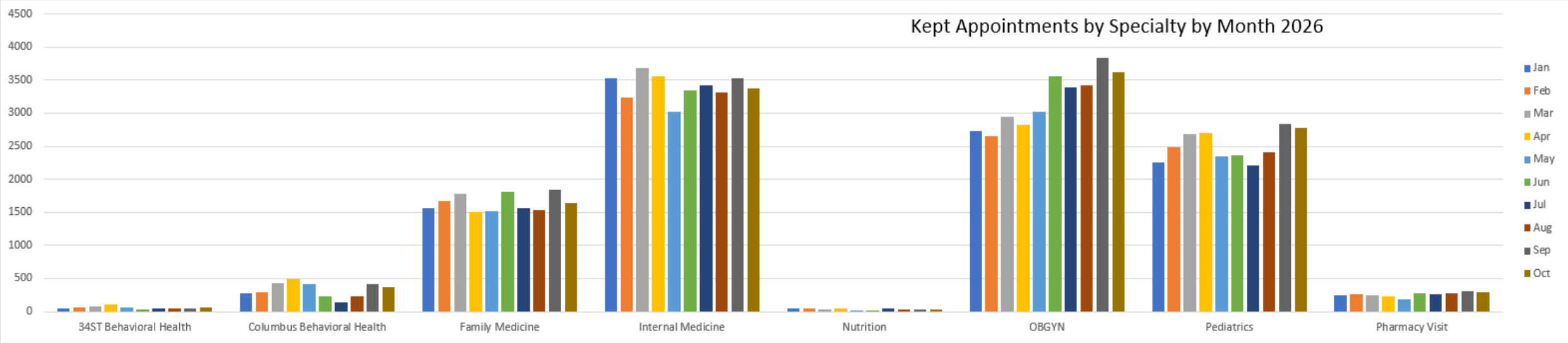
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Appointments by Day of Week
October 2026



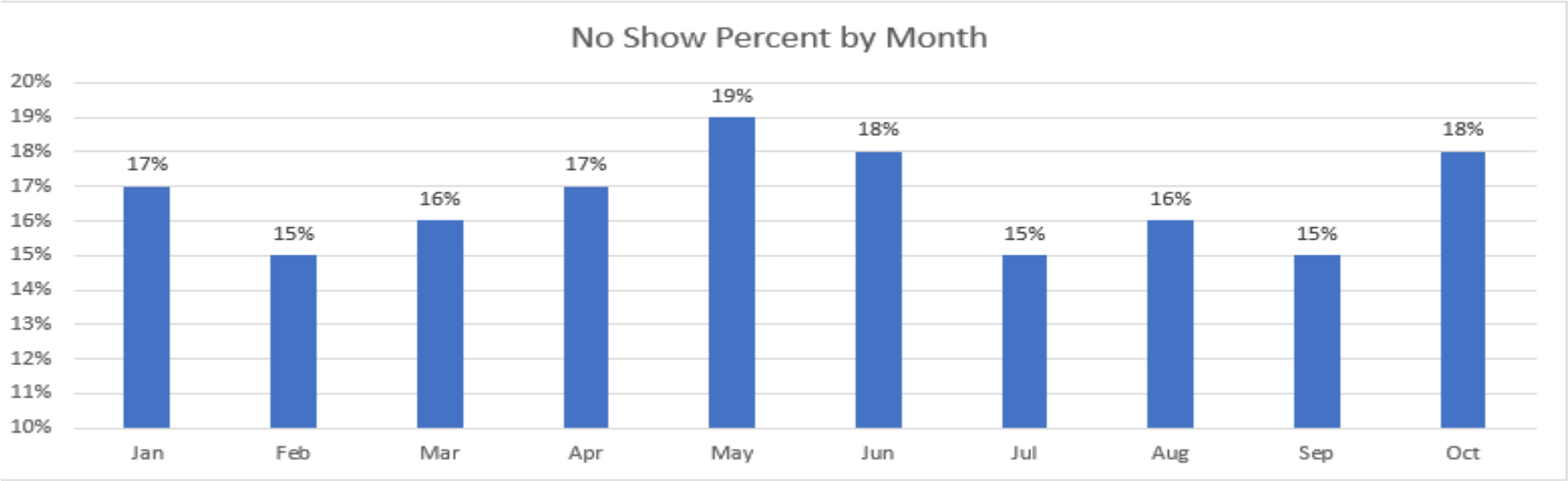
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Visits by Month and Service Line



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Percent of No Shows by Month
October 2026



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No Shows by Month and Location
October 2026

Count of No Show Appointments											
Row Labels	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Grand Total
34ST Behavioral Hea	25	24	20	30	31	15	35	21	21	22	244
COL NUT	16	15	16	29	3	13	6	18	17	24	157
COL PHARM CO	73	76	95	87	101	70	51	74	69	85	781
COL NST	99	86	117	132	145	126	201	198	135	155	1394
KMOH COL PEDS	372	216	306	427	539	560	309	394	439	531	4093
KMOH COL IM	528	483	618	626	641	629	454	481	619	697	5776
KMOH COL FM	315	287	307	267	286	385	203	237	311	303	2901
KMOH COL WH	369	333	368	391	469	511	317	380	411	441	3990
KMOH 34ST IM	170	141	122	141	122	153	173	132	116	122	1392
KMOH COL BH	56	44	80	98	108	55	18	31	51	54	595
KMOH STK PEDS	73	48	59	61	46	47	66	62	64	72	598
KMOH STK WH	12	24	21	14	28	28	27	26	33	40	253
KMOH STK FM	30	24	26	29	22	26	37	37	43	28	302
KMOH STK IM	26	36	22	19	21	24	11	14	16	13	202
Grand Total	2164	1837	2177	2351	2562	2642	1908	2105	2345	2587	22678

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Visits by Month and Location
October 2026

Count of Kept Appointments											
Row Labels	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Grand Total
34ST Behavioral H	52	63	84	101	70	34	51	42	51	65	613
COL NUT	40	40	33	42	22	20	47	36	35	36	351
COL PHARM CO	242	261	249	235	229	288	258	283	310	300	2655
COL NST	402	386	423	377	381	500	549	540	612	502	4672
KMOH COL PEDS	1715	1937	2077	2068	1898	1935	1663	1886	2332	2135	19646
KMOH COL IM	2632	2377	2827	2672	2278	2470	2678	2600	2770	2663	25967
KMOH COL FM	1364	1494	1573	1331	1329	1563	1306	1194	1519	1360	14033
KMOH COL WH	2164	2094	2297	2278	2438	2745	2566	2590	2851	2727	24750
KMOH 34ST IM	777	674	652	713	549	639	616	614	637	582	6453
KMOH COL BH	281	287	427	490	413	236	144	232	414	367	3291
KMOH STK PEDS	537	544	603	635	446	429	551	516	507	647	5415
KMOH STK WH	163	173	223	168	209	314	270	291	377	387	2575
KMOH STK FM	204	175	206	178	191	275	310	335	315	285	2474
KMOH STK IM	126	186	196	181	154	198	77	104	120	125	1467
Grand Total	10699	10691	11870	11469	10607	11646	11086	11263	12850	12181	114362

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Visits by Zip Code
October 2026

Row Labels	Count of Zip
⊞ Bakersfield Zip Codes	100955
⊞ Greater Kern County	12961
⊞ Other California	446
Grand Total	114362

Top 10 Zip Codes		
Zip Code	Count of Zip	Percent
93307	22567	22%
93306	17520	17%
93305	16976	17%
93304	9682	10%
93308	8428	8%
93309	7156	7%
93313	5525	5%
93311	4428	4%
93312	3242	3%
93301	3044	3%

Uninsured Zip Codes YTD		
Zip Code	Count of Zip	City
93307	404	Bakersfield
93305	371	Bakersfield
93306	300	Bakersfield
93304	233	Bakersfield
93308	139	Bakersfield
93309	126	Bakersfield
93313	111	Bakersfield
93312	92	Bakersfield
93241	78	Lamont
93203	52	Arvin
93311	46	Bakersfield
93301	43	Bakersfield
93280	41	Wasco
93263	36	Shafter
93314	36	Bakersfield
93215	33	Delano
93561	17	Tehachapi
93268	16	Taft
93250	15	McFarland
93389	12	Bakersfield
93555	12	Ridgecrest
92395	11	Victor Ville
93505	10	California City

Zip Codes Included in Application:
93301, 93304, 93305, 93306, 93307, 93308, 93309, 93311, 93312, 93313, 93241

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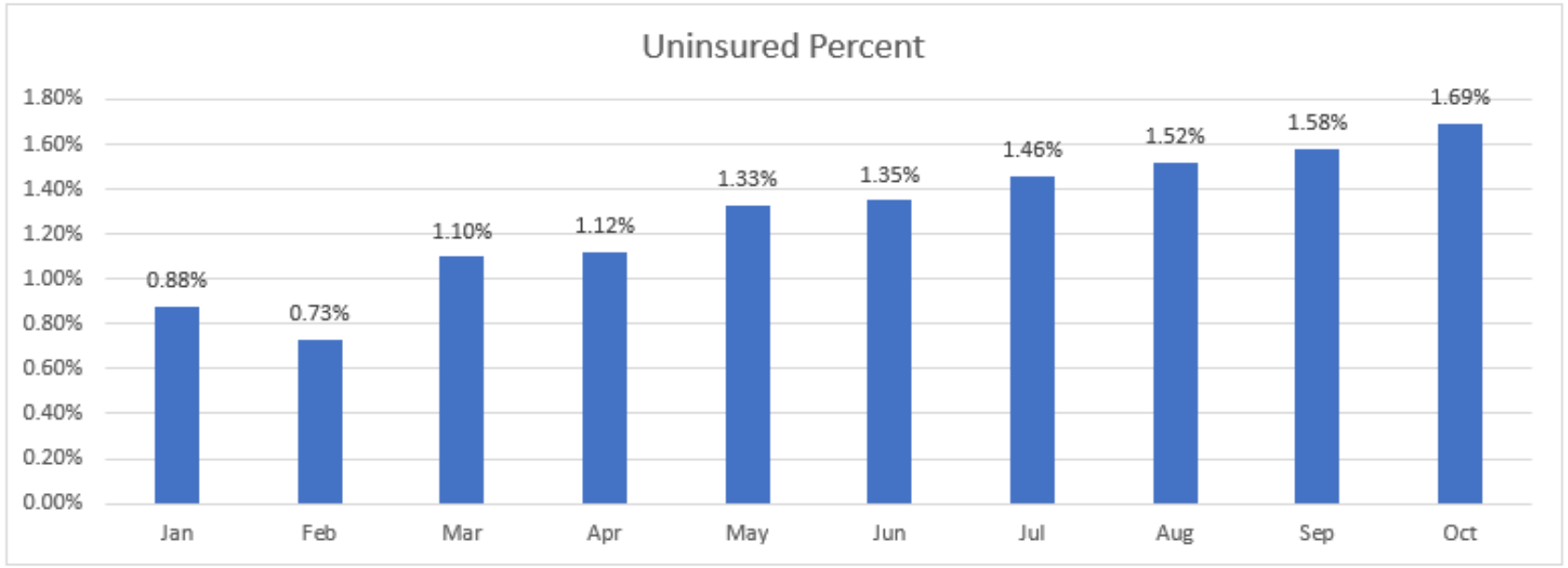
Health Center Data
CY 2026

Health Center Profile: Based on YEAR Data Total Patients Served			
Ethnicity		**Race**	
Unknown	0	Other Single Race	1477
Puerto Rican	45	Unknown	0
Unreported/Chose Not to Disclose Ethnicity	461	Black/African American	2218
Mexican	16737	White	26155
Not Hispanic, Latino/A, Or Spanish Origin	8326	Unreported/Chose Not To Disclose Race	591
Another Hispanic, Latino/A, Or Spanish Origin	4898	Two Or More Races	26

Insurance Status	Count	Percent
No Coverage	507	1.69%
Has Coverage	29960	

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Health Center Data
CY 2026



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Questions

Thank you

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BOARD OF DIRECTORS
COMMUNITY HEALTH CENTER
SPECIAL MEETING

November 19, 2026

Subject: Report on the Kern County Hospital Authority Community Health Center financials for September 2026

Recommended Action: Receive and File

Summary:

The Kern County Hospital Authority Community Health Center (KCHA CHC) clinics provided 12,850 patient visits during the month of September, which was 1,778 more than the budgeted amount of 11,072 for the month. KCHA CHC recognized $723,000 of net patient revenue from these visits.

The following items have budget variances for the month of September 2026:

Total Revenues:

Net Patient Revenue:

KCHA CHC recognized $723,000 of net patient revenue for the month and year-to-date, $613,000 less than the $1.34 million budgeted for September. On a year-to-date basis, net patient revenue is $2.06 million, $2.03 million less than the $4.09 million budgeted amount. Budgeted net patient revenue is based on the approximate number of total clinic visits expected and the per visit reimbursement rate.

Indigent Revenue:

Total revenues for the month of September include $667,000 of contributions from Medi-Cal supplemental programs, $21,000 less than the $688,000 budgeted for the month. On a year-to-date basis, $2.03 million of revenue from Medi-Cal supplemental programs has been recognized, $76,000 less than the $2.11 million budgeted dollar amount.

Other Income:

The Health Resources Services Administration (HRSA) requires that the organization submit a breakeven budget. As such, the Kern County Hospital Authority makes monthly contributions to cover expected expenses associated with the organization's first year of operation as an FQHC Look-Alike (LAL) clinic system.

Operating and Other Expenses:

Salaries and Benefits:

Salaries and benefits expenses total $4.60 million for the month, $742,000 more than the September budget of $3.86 million. On a year-to-date basis, salaries and benefits expenses total $13.60 million, $1.80 million more than the budget of $11.80 million. Staffing includes directly employed physicians, nurse practitioners, medical residents, and behavioral health providers.

Medical Fees:

Medical fees expense totaled $291,000 for the month of September, $248,000 less than the budget of $539,000. On a year-to-date basis, medical fees expense is $1.29 million, $359,000 less than the $1.65 million budgeted amount. Medical fees expense is comprised of contracted physician fees.

Other Professional Fees:

Other professional fees expense totaled $69,000 for the month of September, $1,000 less than the budgeted amount of $70,000. On a year-to-date basis, Other professional fees expense is $335,000, $121,000 more than the budget of $214,000. Other professional fees expense is comprised of legal expenses and other various consulting fees.

Supplies Expense:

Supplies expense totaled $237,000 for the month, $103,000 more than the $134,000 budgeted for September. On a year-to-date basis, supplies expense is $684,000, $274,000 more than the $410,000 budget. Pharmaceuticals and various medical supplies account for a significant amount of total supply costs.

Purchased Services:

Purchased services expenses totaled $166,000 for the month of September, $75,000 more than the $91,000 budgeted for the month. On a year-to-date basis, purchased services expenses are $475,000, $195,000 more than the $280,000 budget amount. Purchased services expenses are comprised of items such as computer maintenance fees, various purchased medical services, and laundry and linen services.

Other Expenses:

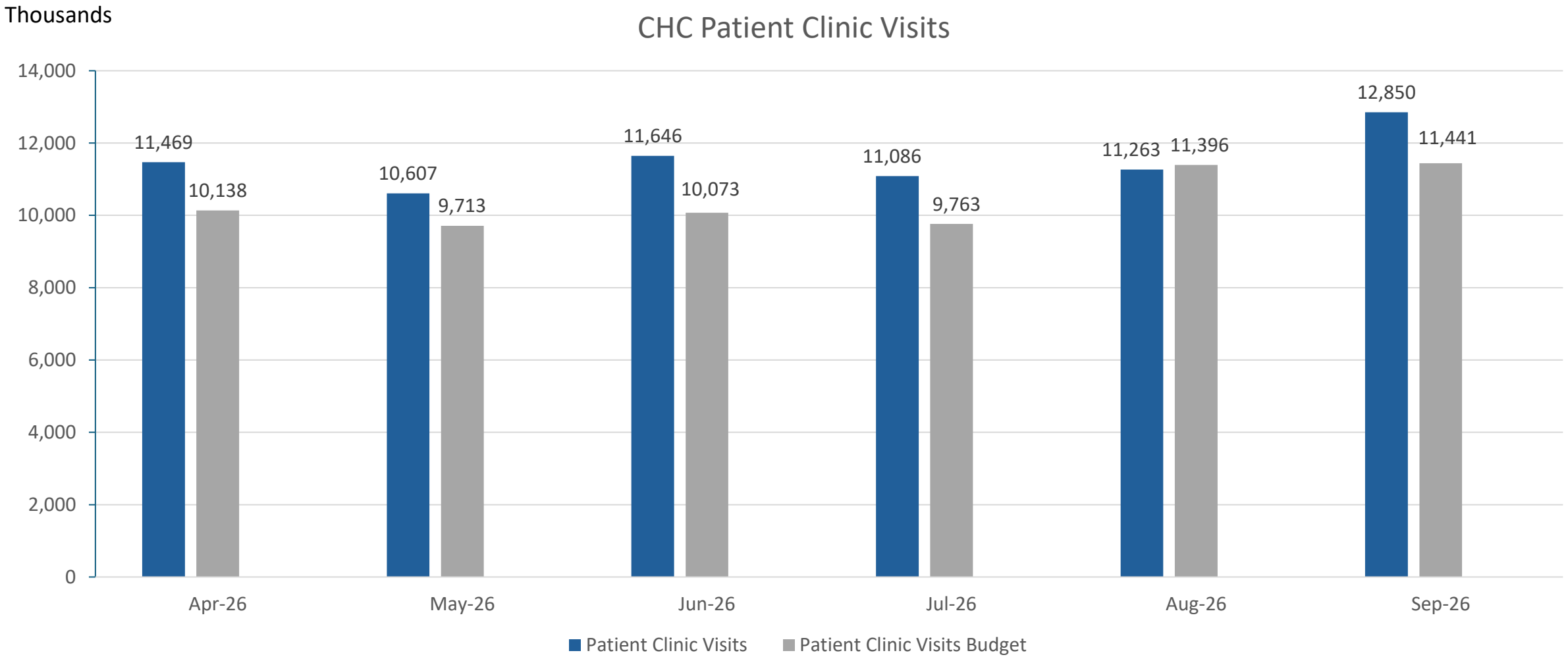
Other expenses totaled $372,000 for the month of September, $63,000 more than the $309,000 budgeted amount for the month. On a year-to-date basis, other expenses are $1.10 million, $157,000 more than the $946,000 budget. Other expenses include recruiting fees, repairs and maintenance, rent, interest, and utilities.

Overhead Expenses:

A percentage of overhead expenses from Kern Medical services and support departments such as housekeeping, engineering, and information systems has been allocated to the KCHA CHC clinics and is included in total operating expense.

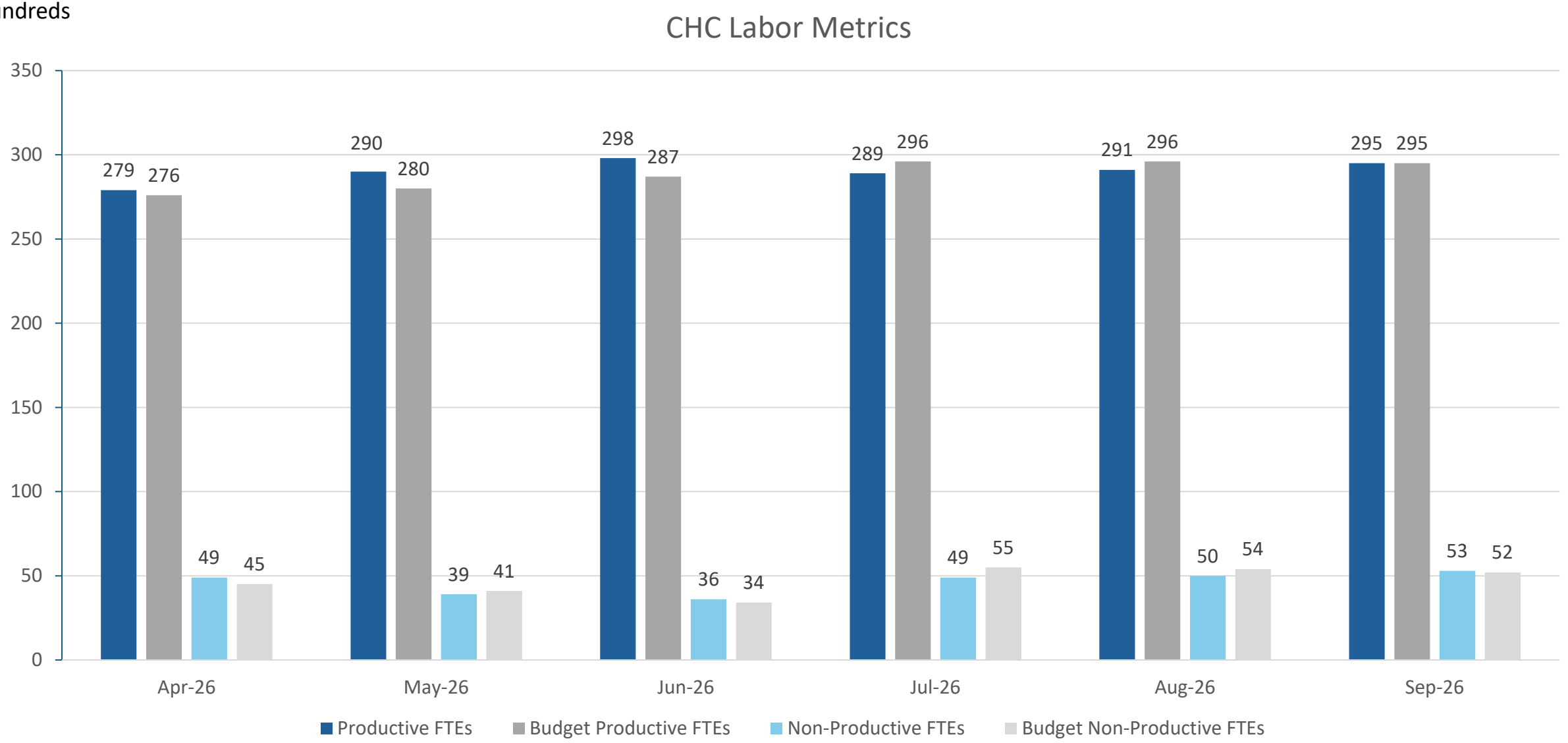
KernMedical
Outpatient Health

Kern County Hospital Authority
Community Health Center
Board of Directors' Report – November 2026



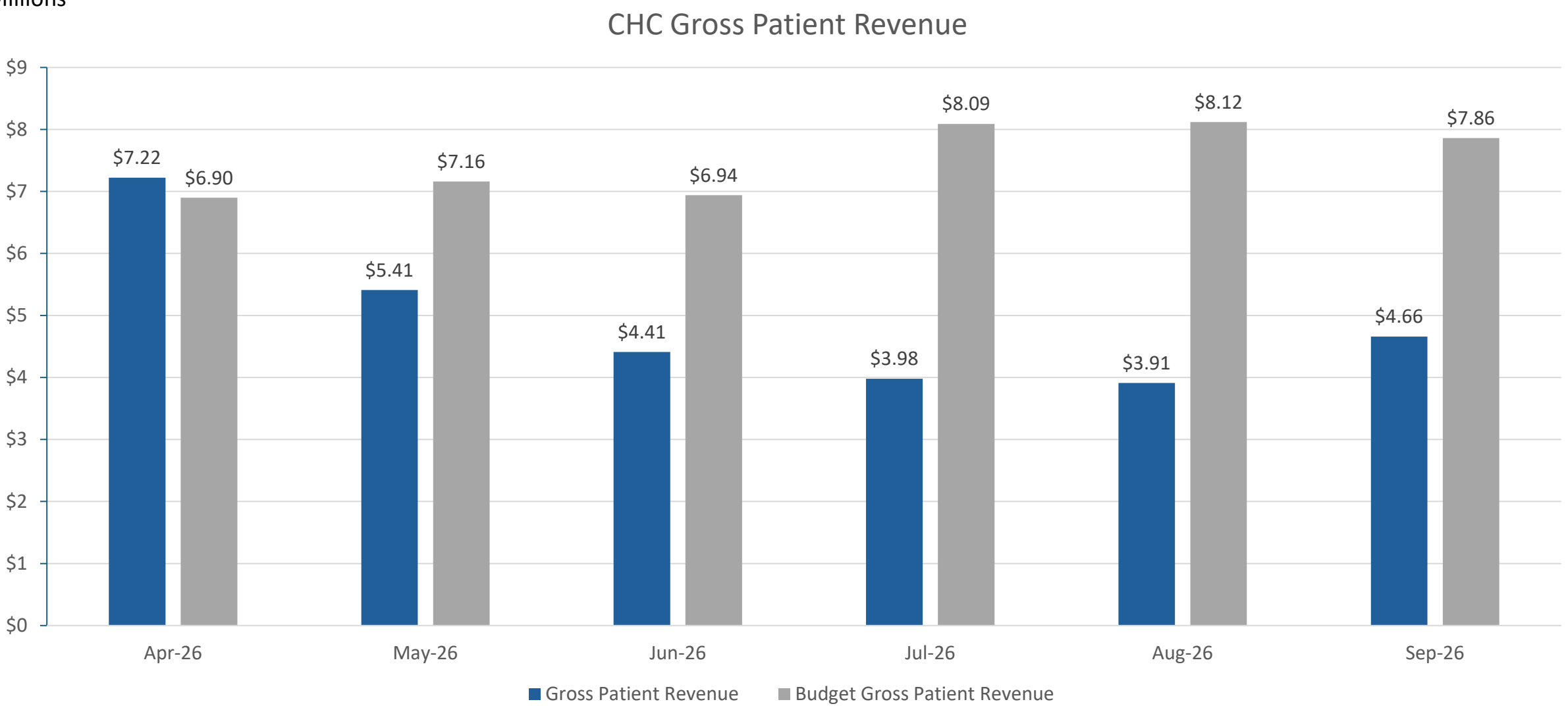
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Hundreds

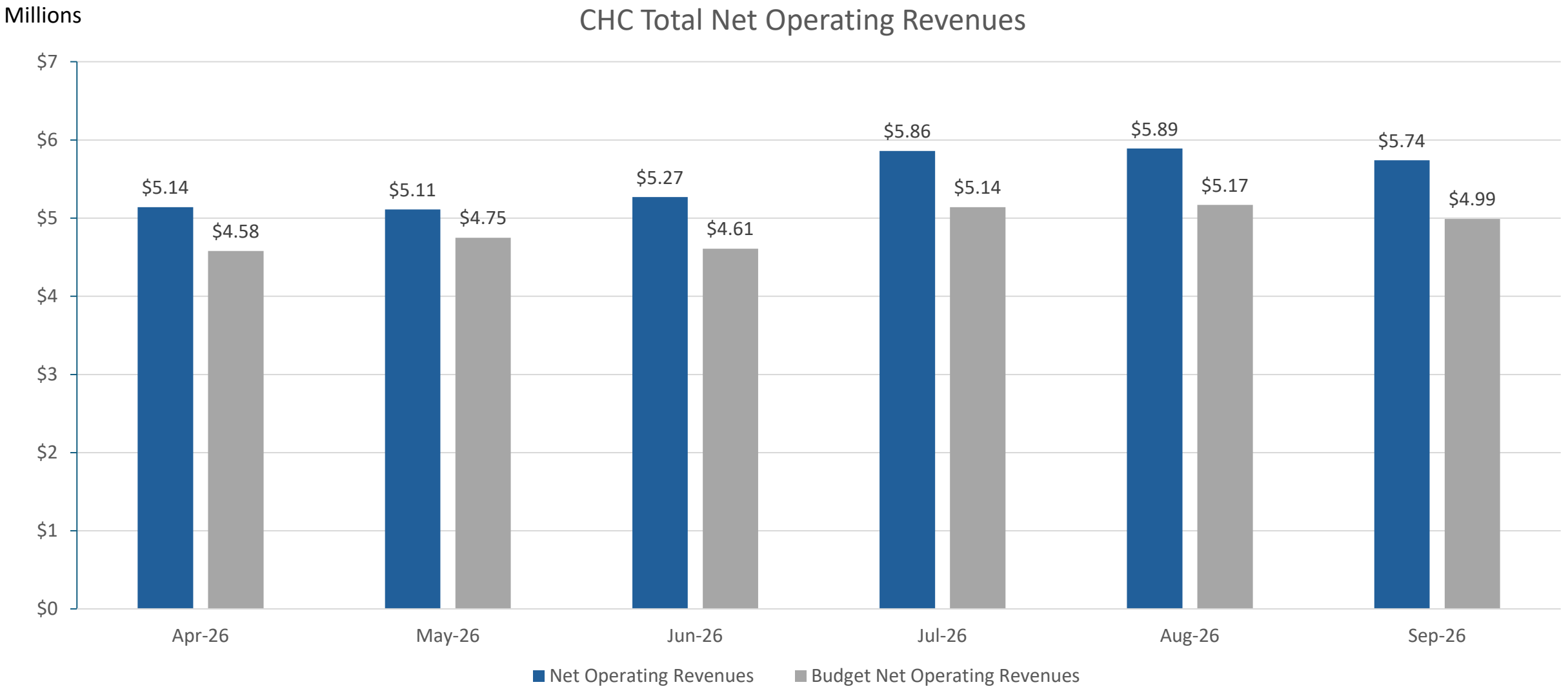


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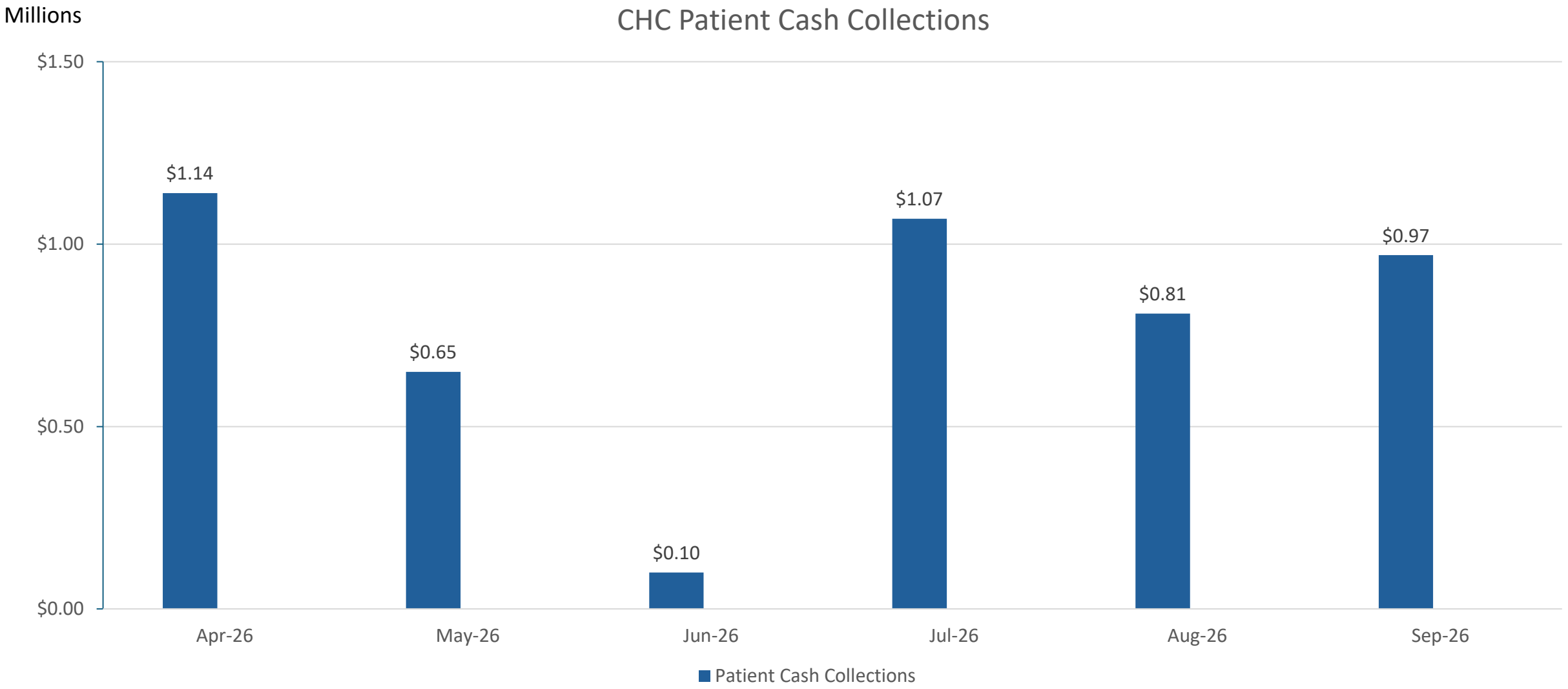
Millions



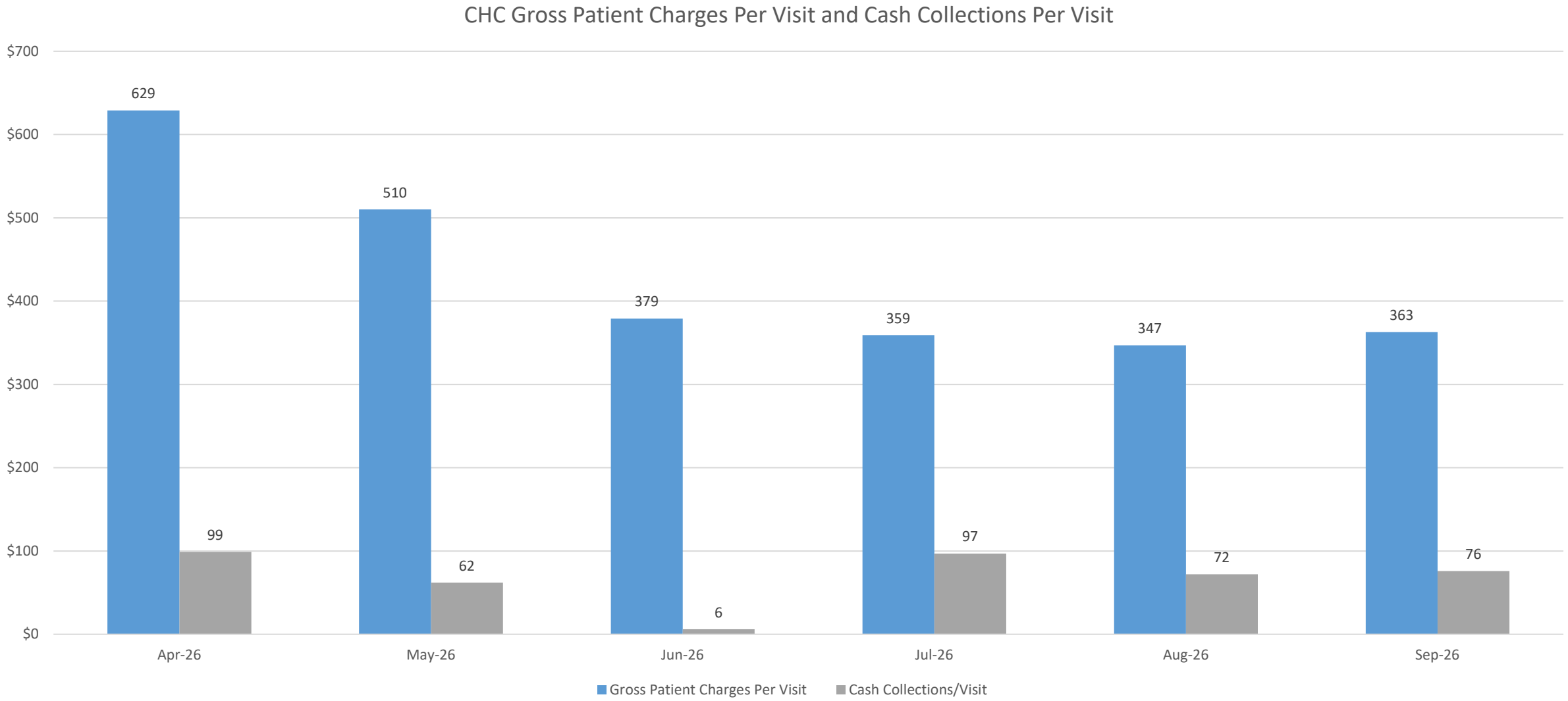
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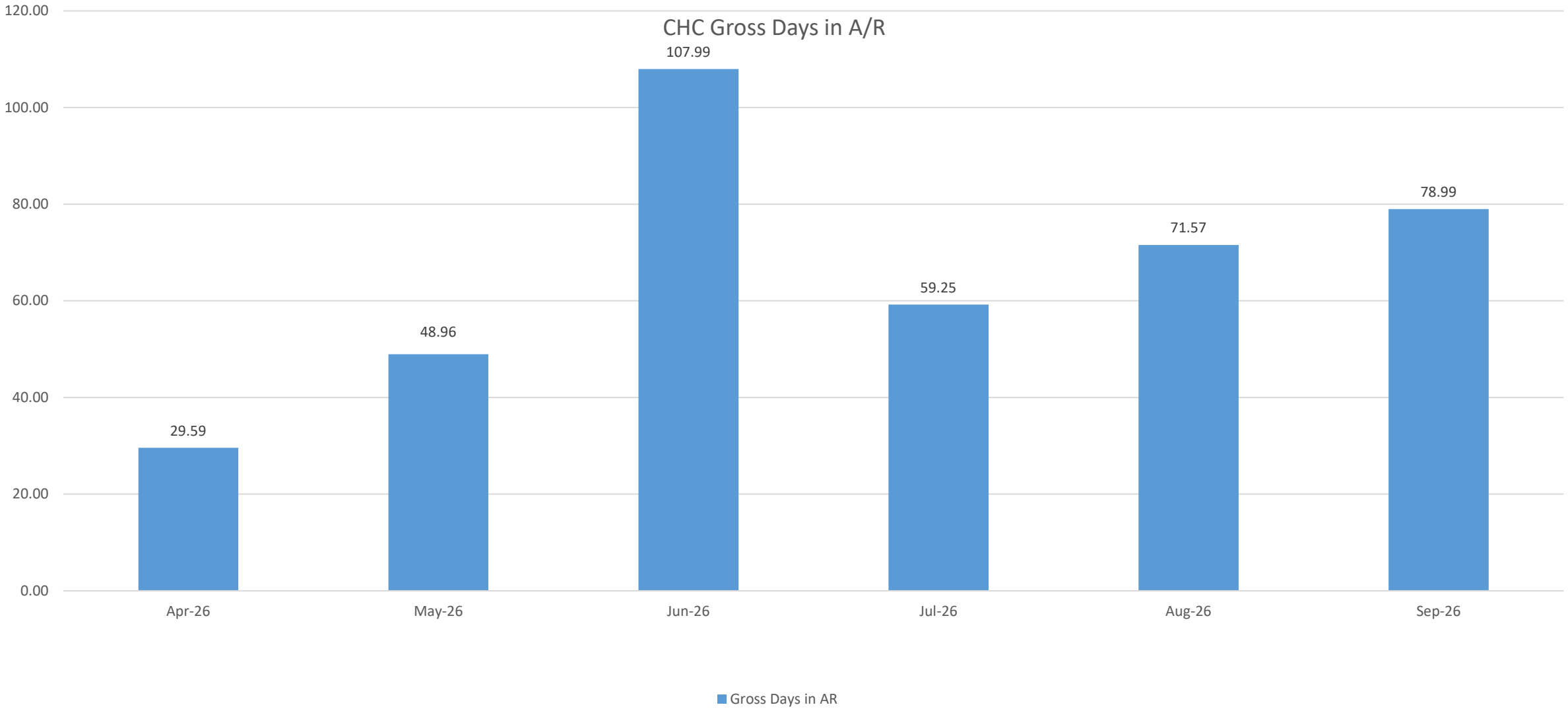
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KERN MEDICAL OUTPATIENT HEALTH
TRENDED INCOME STATEMENT
JULY 2026 - SEPTEMBER 2026

	July Actual	August Actual	September Actual	September Budget	September Variance	September Variance %
Operating Revenues:						
Gross Patient Revenue						
Outpatient						
Self-Pay	$92,559	$84,802	$102,591	$103,605	($1,014)	(1.0%)
Commercial Fee-for-Service (FFS)	33,127	32,313	25,164	41,941	(16,777)	(40.0%)
Commercial Managed Care (HMO/PPO)	521,790	487,741	523,818	764,115	(240,297)	(31.4%)
Workers' Compensation Fee-for-Service (FFS)	300	247	528	23,327	(22,799)	(97.7%)
Medicare Fee-for-Service (FFS)	227,931	214,977	311,341	562,618	(251,277)	(44.7%)
Medicare Managed Care (HMO)	52,700	61,132	70,528	44,721	25,807	57.7%
Medi-Cal Fee-for-Service (FFS)	204,104	214,401	225,140	252,831	(27,691)	(11.0%)
Medi-Cal Managed Care (HMO)	2,838,522	2,800,082	3,384,471	5,349,324	(1,964,853)	(36.7%)
Other Government Fee-for-Service (FFS)	9,573	12,862	18,614	714,192	(695,578)	(97.4%)
Total Outpatient	$ 3,980,605	$ 3,908,558	$ 4,662,195	$ 7,856,674	$ (3,194,480)	(40.7%)

KernMedical
Outpatient Health

KERN MEDICAL OUTPATIENT HEALTH
TRENDED INCOME STATEMENT
JULY 2026 - SEPTEMBER 2026

	July Actual	August Actual	September Actual	September Budget	September Variance	September Variance %
Total Gross Patient Revenue	4,227,121	3,908,558	4,662,195	7,856,674	(3,194,480)	(40.7%)
Patient Revenue Deductions	(3,303,903)	(3,244,103)	(3,939,491)	(6,521,038)	2,581,547	(39.6%)
Net Patient Revenue	676,703	664,455	722,703	1,335,636	(612,932)	(45.9%)
Total Indigent	679,742	683,933	666,892	687,822	(20,930)	(3.0%)
Other Income	4,503,154	4,543,496	4,345,514	2,975,301	1,370,212	46.1%
Total Operating Revenues	$ 5,859,598	$ 5,891,884	$ 5,735,109	$ 4,998,759	$ 736,350	14.7%

KernMedical
Outpatient Health

KERN MEDICAL OUTPATIENT HEALTH
TRENDED INCOME STATEMENT
JULY 2026 - SEPTEMBER 2026

	July Actual	August Actual	September Actual	September Budget	September Variance	September Variance %
Operating Expenses:						
Salaries	$ 3,192,305	$ 3,284,557	$ 3,546,298	$ 2,938,311	$ 607,987	20.7%
Benefits	1,388,128	1,135,943	1,051,894	917,468	134,427	14.7%
Total Salaries and Benefits	4,580,433	4,420,499	4,598,192	3,855,779	742,414	19.3%
Physicians	398,408	569,848	341,508	526,132	(184,624)	(35.1%)
Therapists	15,557	15,557	(50,337)	12,615	(62,952)	(499.0%)
Total Medical Fees	413,965	585,405	291,172	538,747	(247,575)	(46.0%)
Consulting	42,742	51,888	17,800	19,798	(1,998)	(10.1%)
Legal	8,205	17,185	10,818	9,175	1,642	17.9%
Other contracted services	91,812	53,298	40,916	40,882	34	0.1%
Total Other Professional Fees	142,759	122,372	69,534	69,856	(322)	(0.5%)

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KERN MEDICAL OUTPATIENT HEALTH
TRENDED INCOME STATEMENT
JULY 2026 - SEPTEMBER 2026

	July Actual	August Actual	September Actual	September Budget	September Variance	September Variance %
Operating Expenses:						
Computer software	80,325	83,862	75,788	36,865	38,923	105.6%
Food	7,379	11,674	4,654	4,649	6	0.1%
Office Supplies	5,723	17,389	4,705	8,458	(3,752)	(44.4%)
Minor Equipment	2,732	2,462	8,302	7,623	679	8.9%
Non-Medical Supplies	33,864	37,999	42,044	29,793	12,252	41.1%
Pharmaceuticals	40,901	118,739	100,302	44,656	55,645	124.6%
Surgery Supplies-General	1,412	2,272	1,516	1,867	(351)	(18.8%)
Total Supplies	172,336	274,396	237,312	133,911	103,401	77.2%
Conferences-Travel-Residents	15,419	(468)	6,988	841	6,147	731.1%
Licenses - Residents	12,537	6,673	7,318	2,117	5,201	245.7%
Laundry and Linen	5,680	7,757	4,679	2,687	1,992	74.1%
Medical Services	1,414	1,076	971	393	578	147.1%
Purchase Services	101,084	78,173	85,940	61,831	24,110	39.0%
Security	11,567	12,370	12,621	6,296	6,325	100.5%
Support & maintenance-IT Software	24,125	30,640	48,149	17,289	30,860	178.5%
Total Purchased Services	171,826	136,222	166,666	91,453	75,213	82.2%

KERN MEDICAL OUTPATIENT HEALTH
TRENDED INCOME STATEMENT
JULY 2026 - SEPTEMBER 2026

	July Actual	August Actual	September Actual	September Budget	September Variance	September Variance %
Operating Expenses:						
Advertising	-	-	22	874	(853)	(97.5%)
Catering	3,319	870	1,698	2,392	(693)	(29.0%)
Insurance	13,357	11,966	11,891	6,117	5,775	94.4%
Licenses Permits and Taxes	3,276	8,005	10,340	5,760	4,579	79.5%
Repairs and Maintenance	68,552	41,813	55,810	15,754	40,057	254.3%
Utilities	31,942	30,813	25,296	15,862	9,434	59.5%
Dues and subscriptions	31,008	19,844	9,823	5,046	4,777	94.7%
Outside and online training	(6,131)	11,099	31,484	8,809	22,676	257.4%
Residents precept-rotations	6,033	7,253	4,416	7,898	(3,482)	(44.1%)
Recruiting	12,766	7,076	7,224	8,350	(1,127)	(13.5%)
Bank fees	1,176	1,176	1,147	2,288	(1,141)	(49.9%)
Equipment Rental	4,491	4,583	4,588	4,815	(227)	(4.7%)
Rent	153,370	153,370	153,370	169,201	(15,831)	(9.4%)
Interest Expense	55,123	55,123	55,123	55,845	(722)	(1.3%)
Total Other Expenses	378,280	352,990	372,233	309,012	63,221	20.5%
Total Operating Expenses	5,859,598	5,891,884	5,735,109	4,998,758	736,351	14.7%
Net Income (Loss)	$ 0	$ 0	$ 0	$ 0	$ 0	0.0%

KernMedical Outpatient Health

KERN MEDICAL OUTPATIENT HEALTH
INCOME STATEMENT
FISCAL YEAR-TO-DATE
JULY 2026 - SEPTEMBER 2026

	Year-to-Date Actual	Year-to-Date Budget	Year-to-Date Variance	Year-to-Date Variance %
Operating Revenues:				
Gross Patient Revenue				
Outpatient				
Self-Pay	$279,952	$317,295	($37,343)	(11.8%)
Commercial Fee-for-Service (FFS)	90,604	128,445	(37,841)	(29.5%)
Commercial Managed Care (HMO/PPO)	1,533,349	2,340,130	(806,781)	(34.5%)
Workers' Compensation Fee-for-Service (FFS)	1,075	71,439	(70,364)	(98.5%)
Medicare Fee-for-Service (FFS)	754,250	1,723,038	(968,788)	(56.2%)
Medicare Managed Care (HMO)	184,360	136,959	47,401	34.6%
Medi-Cal Fee-for-Service (FFS)	643,645	774,304	(130,659)	(16.9%)
Medi-Cal Managed Care (HMO)	9,023,075	16,382,505	(7,359,430)	(44.9%)
Other Government Fee-for-Service (FFS)	41,049	2,187,241	(2,146,192)	(98.1%)
	$ 12,551,358	$ 24,061,356	$ (11,509,998)	(47.8%)

KernMedical
Outpatient Health

KERN MEDICAL OUTPATIENT HEALTH
INCOME STATEMENT
FISCAL YEAR-TO-DATE
JULY 2026 - SEPTEMBER 2026

	Year-to-Date Actual	Year-to-Date Budget	Year-to-Date Variance	Year-to-Date Variance %
Total Gross Patient Revenue	12,551,358	24,061,356	(11,509,998)	(47.8%)
Patient Revenue Deductions	(10,487,497)	(19,970,924)	9,483,427	(47.5%)
Net Patient Revenue	2,063,861	4,090,432	(2,026,571)	(49.5%)
Total Indigent	2,030,566	2,106,481	(75,915)	(3.6%)
Other Income	13,392,164	9,111,972	4,280,192	47.0%
Total Operating Revenues	$ 17,486,591	$ 15,308,885	$ 2,177,706	14.2%

KernMedical
Outpatient Health

KERN MEDICAL OUTPATIENT HEALTH
INCOME STATEMENT
FISCAL YEAR-TO-DATE
JULY 2026 - SEPTEMBER 2026

	Year-to-Date Actual	Year-to-Date Budget	Year-to-Date Variance	Year-to-Date Variance %
Operating Expenses:				
Salaries	$ 10,023,160	$ 8,998,688	$ 1,024,472	11.4%
Benefits	3,575,965	2,809,779	766,186	27.3%
Total Salaries and Benefits	13,599,125	11,808,466	1,790,658	15.2%
Physicians	1,309,764	1,611,298	(301,534)	(18.7%)
Therapists	(19,223)	38,635	(57,858)	(149.8%)
Total Medical Fees	1,290,541	1,649,933	(359,392)	(21.8%)
Consulting	112,430	60,632	51,798	85.4%
Legal	36,208	28,100	8,107	28.9%
Other contracted services	186,027	125,204	60,823	48.6%
Total Other Professional Fees	334,664	213,936	120,728	56.4%

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Outpatient Health

KERN MEDICAL OUTPATIENT HEALTH
INCOME STATEMENT
FISCAL YEAR-TO-DATE
JULY 2026 - SEPTEMBER 2026

	Year-to-Date Actual	Year-to-Date Budget	Year-to-Date Variance	Year-to-Date Variance %
Operating Expenses:				
Computer software	239,975	112,901	127,074	112.6%
Food	23,707	14,237	9,471	66.5%
Office Supplies	27,817	25,902	1,916	7.4%
Minor Equipment	13,496	23,346	(9,850)	(42.2%)
Non-Medical Supplies	113,907	91,242	22,666	24.8%
Pharmaceuticals	259,941	136,761	123,180	90.1%
Surgery Supplies-General	5,200	5,719	(520)	(9.1%)
Total Supplies	684,044	410,108	273,936	66.8%
Conferences-Travel-Residents	21,939	2,575	19,364	752.0%
Licenses - Residents	26,529	6,482	20,046	309.2%
Laundry and Linen	18,115	8,230	9,886	120.1%
Medical Services	3,461	1,204	2,257	187.5%
Purchase Services	265,197	189,359	75,838	40.0%
Security	36,558	19,282	17,276	89.6%
Support & maintenance-IT Software	102,914	52,947	49,968	94.4%
Total Purchased Services	474,714	280,079	194,635	69.5%

KernMedical
Outpatient Health

KERN MEDICAL OUTPATIENT HEALTH
INCOME STATEMENT
FISCAL YEAR-TO-DATE
JULY 2026 - SEPTEMBER 2026

	Year-to-Date Actual	Year-to-Date Budget	Year-to-Date Variance	Year-to-Date Variance %
Operating Expenses:				
Advertising	22	2,677	(2,656)	(99.2%)
Catering	5,887	7,325	(1,438)	(19.6%)
Insurance	37,213	18,733	18,481	98.7%
Licenses Permits and Taxes	21,620	17,641	3,979	22.6%
Repairs and Maintenance	166,175	48,247	117,928	244.4%
Utilities	88,051	48,577	39,474	81.3%
Dues and subscriptions	60,675	15,455	45,220	292.6%
Outside and online training	36,453	26,977	9,476	35.1%
Residents precept-rotations	17,702	24,188	(6,487)	(26.8%)
Recruiting	27,066	25,573	1,493	5.8%
Bank fees	3,498	7,008	(3,510)	(50.1%)
Equipment Rental	13,662	14,747	(1,085)	(7.4%)
Rent	460,110	518,183	(58,073)	(11.2%)
Interest Expense	165,370	171,029	(5,659)	(3.3%)
Total Other Expenses	1,103,503	946,361	157,142	16.6%
Total Operating Expenses	17,486,591	15,308,884	2,177,708	14.2%
Net Income (Loss)	$ 0	$ 0	$ 0	0.0%

KernMedical Outpatient Health

Questions

Thank you

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BOARD OF DIRECTORS
COMMUNITY HEALTH CENTER
SPECIAL MEETING

November 19, 2026

Subject: Kern County Hospital Authority Community Health Center Executive Director Report

Recommended Action: Receive and File

Summary:

The Executive Director of the Kern County Hospital Authority Community Health Center will provide your Board with a clinic-wide update.