



CAMBRIA COMMUNITY HEALTHCARE DISTRICT REGULAR BOARD MEETING February 24, 2026 – 9:00 AM

The regular meeting of the Cambria Community Healthcare District will be held at
2535 Main Street, Cambria, California.

Join Zoom Meeting

<https://us02web.zoom.us/j/87307330578?pwd=yIruEYqKaHGIDNfCuVqYTFyeHksN3g.1>

Meeting ID: 873 0733 0578 Passcode: 529826
+1 669 444 9171 US +1 669 900 6833 US (San Jose)

AGENDA

A. OPENING

1. Call to order
2. Pledge of Allegiance
3. Establishment of a quorum

B. PUBLIC COMMENT FOR ITEMS NOT ON THE AGENDA

1. Public members wishing to address the Board on matters other than scheduled items may do so when recognized by the President of the Board of Directors, Cecilia Montalvo. Presentations are limited to a maximum of three minutes per person.

C. CONSENT AGENDA

1. Approve Minutes from the January 27, 2026, Regular Board Meeting

D. REPORTS

1. Operations Report: Operations Manager Tim Nurge, Supervisors Paul Hoover and Michael Bryant
2. Administrative/Financial Review: Administrator Hendy
3. Committee Reports: January 2026
 - a. *President's Report*: Cecilia Montalvo
 - b. *Property & Facilities*: Laurie Mileur
 - c. *Healthcare Advocacy & Outreach*: Dawn Kulesa
 - d. *Finance*: Iggy Fedoroff
 - e. *Development*: Laurie Mileur

E. REGULAR BUSINESS

1. Key Billing Indicators (KBI) Report
2. Fiscal Year 2025-2026 Mid-Year Budget Review
3. Key Performance Indicators (KPI) Biannual Report

F. DECLARATION OF FUTURE AGENDA ITEMS

G. ADJOURNMENT

The next Regular Board meeting will be on March 24, 2026, at 9:00 A.M. at 2535 Main Street, Cambria, California.

Copies of the monthly agenda, staff reports, and written materials provided to the Board of Directors for Open Session agenda items may be obtained online at www.cambria-healthcare.org and at the District office located at 2535 Main Street, Cambria, during regular business hours. Closed-session items are not available for public review. Any changes or additions to the agenda will be posted at the District office and on the District website.

Note: While board members may not engage in dialogue with the public during the board meeting, individual members may choose to incorporate an answer to a question posed by the public during their discussion of an agenda item.



**CAMBRIA COMMUNITY HEALTHCARE DISTRICT
REGULAR BOARD MEETING MINUTES
January 27, 2026**

A. OPENING

1. President Montalvo called the meeting to order at 9:01 am.
2. President Montalvo led the Pledge of Allegiance.
3. Board of Directors members Cecilia Montalvo, Bruce Mumper, Iggy Fedoroff, and Laurie Mileur were present. Dawn Kulesa was present via Zoom.

Administrator Linda Hendy, Operations Manager Tim Nurge, and Office Manager Jennifer Harley were also present. Supervisor Mike Bryant joined the meeting in session.

B. PUBLIC COMMENT FOR ITEMS NOT ON THE AGENDA

1. No members of the public provided comments.

C. CONSENT AGENDA

1. The minutes from the December 16, 2025, Regular Board meeting were presented for review and approval. Director Mumper moved to approve the minutes from December 16, 2025. Director Fedoroff seconded, and the Board approved the motion, 5/0.

Public Comment: There were no public comments.

E. REGULAR BUSINESS

A proposed change to the order of Agenda items was approved, moving E. Regular Business Agenda Item 1, Fiscal Year 2024-2025 Audit - Presentation, before Agenda Item D. Reports.

1. **Fiscal Year 2024-2025 Audit – Presentation** – Administrator Hendy introduced Adam Guise, CPA, Moss, Levy & Hartzheim LLP, who was present via Zoom. Mr. Guise gave a brief report on the findings of his team’s Fiscal Year 2024-2025 Audit and answered questions from the Board.

Public Comment: There were no public comments.

Motion: No Board action was required for this item.

D. REPORTS

1. **Operations Report:** Operations Manager Tim Nurge presented the monthly operations report for January 2026.
2. **Administrative/Financial Review:** The January 2026 financial reports were presented by Administrator Linda Hendy.

3. Committee Reports:

- a. President's Report: President Montalvo announced that the new ambulance station project was presented to the North Coast Advisory Council (NCAC) and was well received.
- b. Property & Facilities: Director Mileur provided an update on the new ambulance station, including a recent meeting with Bruce Gibson regarding the County's minor land use permit requirements. She also reported on project delays, updated timelines, the building design status, and progress on the USDA grant. Additionally, banners will be placed at the station to highlight project progress and acknowledge community support.
- c. Healthcare Advocacy & Outreach: Director Kulesa will replace the holiday stress articles from the "Minutes Matter Stress Relief Kits" with new articles focused on exercise and stress-relieving actions.
- d. Finance: Director Fedoroff discussed the timing of a potential increase to the special tax rate and believes it is best to implement this at the next election in 2028.
- e. Development Committee: Director Mileur provided an update on the USDA grant during her Property & Facilities report.

E. REGULAR BUSINESS

2. **District Policy Manual Updates** – Operations Manager Nurge provided an overview of the policies presented to the Board for review and approval.

Operations Manager Nurge acknowledged that Policy 3104 – Disciplinary Action, specifically Section 3104.3, duplicates information covered in Policy 3106 – Training and Record Review, Section 3106.6. It is recommended to remove Section 3106.6 and retain the information in Section 3104.3.

Public Comment: There were no public comments.

Motion: Director Fedoroff moved to approve the proposed policy updates, including the deletion of Section 3106.6 of Policy 3106, effective upon completion of the entire manual. Director Mileur seconded, and the Board approved the updates to the identified policies by roll call, 5/0.

3. **Proposed Increase to Ambulance Service Rate Schedule; Resolution 58-26** – Administrator Hendy provided an overview of the comparatives used for fee evaluations to determine a new rate schedule.

Public Comment: There were no public comments.

Motion: Director Kulesa moved to approve Resolution 58-26, adopting the 2026 Ambulance Rate Schedule outlined in Attachment 1 of the Resolution. Director Mileur seconded the motion, and the Board approved Resolution 58-26 by roll call, 5/0.

4. **California Brown Act Updates for 2026** Administrator Hendy provided an overview of the 2026 updates to the Brown Act. The Board of Directors will receive a copy of the updated Brown Act Manual when it becomes available.

Public Comment: There were no public comments.

Motion: No Board action was required for this item.

F. DECLARATION OF FUTURE AGENDA ITEMS

1. Fiscal Year 2025-2026 Mid-Year Budget Review
2. District Policy Manual Updates
3. Key Performance Indicators
4. Key Billing Indicators
5. Closed Session Performance Reviews

G. ADJOURNMENT

The meeting was adjourned at 10:41 am.

Note: The next regular meeting will be held on Tuesday, February 24, 2026, at 9:00 am.



OPERATIONS REPORT

Board of Directors Meeting

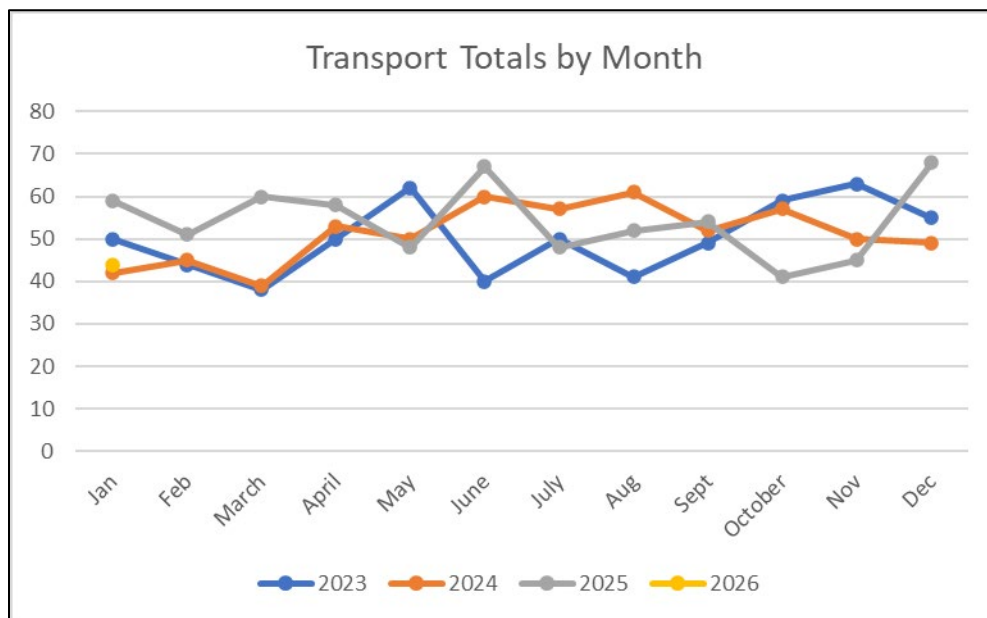
February 24, 2026

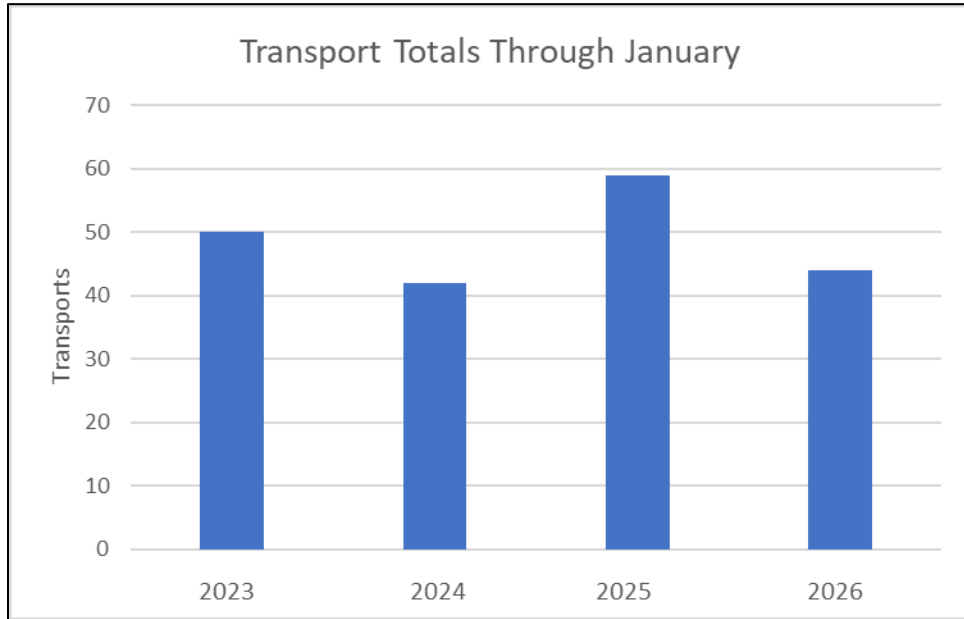
Operations Manager, Tim Nurge
Supervisors Michael Bryant and Paul Hoover

Operations Report for January 2026

Operations Manager Nurge

- Transport Activity Report** – For January 2026, there has been a decrease of twenty-five (25) incidents and a decrease of fifteen (15) incidents requiring transport compared to January 2025.
- Response Times and Delays** – In January 2026, 92.5 % of calls were responded to within ten (10) minutes in Cambria. Three calls were delayed by 1-3 minutes due to night calls deep in the Marine Terrace, Lodge Hill West, and Park Hill Areas. One call was delayed by two minutes deep in the Marine Terrace area due to the weather.





- San Luis Ambulance (SLA) Transports/Coverage** – In January 2026, San Luis Ambulance had two (2) Code-3 and zero (0) Code-2 calls in the District’s service area. San Luis Ambulance was dispatched to “move up and cover” Cambria eight (8) times Code-8 and (0) times Code-11 for a total time covering the District’s response area of 12 hours and 54 minutes.

In January 2026, the District responded to four (4) Code-3 and zero (0) Code-2 calls in the San Luis Ambulance service area. District crews were dispatched to “move up and cover” the San Luis Ambulance service area twenty- five (25) times Code-8 and two (2) times Code-11, for a total time covering the San Luis Ambulance service area of 9 hours and 55 minutes.

- ❖ Code 2 Call - Emergency call that does not require the use of lights and sirens to respond
- ❖ Code 3 Call - Emergency call that requires the use of lights and sirens to respond
- ❖ Code 8 Call - A term used when an ambulance is staged (parked) between two response areas. (Summit/Villa Creek)
- ❖ Code 11 Call – A term used when an ambulance is staged (parked) between two response areas. (Areas 2, 3 & 5)

- Monterey County Calls** – District crews responded to three (3) calls in Monterey County during January 2026, compared to one (1) call in January 2025. One call was cancelled prior to going en route.

- **Staffing/Employees** – One Reserve EMT completed his training in January and has begun picking up shifts. Most shifts in January were picked up by Reserve EMTs. A District crew provided standby for the Castle-to-Coast Fun Run.
- **Recruitment** – Nothing to report.
- **Training** – The District began holding monthly Protocol Tabletop Discussions in January and has completed a District-specific Protocol Update module for the new protocol.
- **IT/Radios** – Unit 22 radios were updated.
- **Outreach** – The District participated in Hands-Only CPR training at the Cambria Farmer’s Market in January. With the support of donated funds, the District procured and installed signs for the Automated External Defibrillators (AEDs) at the Cambria Pickleball courts. The District will also present information on CPR and AED usage at its next meeting. Additionally, we will continue our outreach efforts to update AEDs and signage throughout Cambria.
- **Other** –
 - The Operations Manager and Supervisors continue to work with the Facilities Committee on the new ambulance station design, project planning, and demolition
 - The District updated and submitted its Controlled Substance Policy and Procedures to the EMSA for review, ensuring compliance with EMSA Policy.
 - The District is developing a QI/QA Policy and Procedure manual to comply with EMSA Policy.

Supervisor Bryant

Equipment / Medications:

- All expired medical supplies and medications have been replaced, ensuring all ambulances are fully stocked and ready for service.
- Previously back-ordered ALS medications have been received and are now in service across all units.
- The 2026 Quarter 1 Emergency Worker Exposure Control (EWEC) Inventory for the Office of Emergency Services (OES) has been completed.
- Coordination with the San Luis Obispo County Health Agency is ongoing to secure “leave-behind” Naloxone kits. We are currently awaiting a delivery date for the initial six kits.
- District-owned D-size O₂ cylinders are now fully in service, and all Airgas D-size tank rentals have been returned.

SLO County Emergency Medical Services Authority (EMSA):

- No current updates.
-

Supervisor Hoover

Ambulance Unit Performance/Maintenance

- **Stryker Gurneys** – An annual service on the Stryker gurneys, loading systems, and stair chairs was completed.
- **Unit 20** – A regular service was completed at Nelson’s Garage with no issues noted.
- **Unit 23** – A regular service was completed at Nelson's Garage with no issues noted. The cab camera screen mount was replaced under warranty.
- **Unit 23** – Unit 23 is currently at Perry Ford to address an engine light issue.
- **Fleet Mileage for January 2026:**

Ambulance Unit	Current Mileage
18	246,685
20	106,793
22	60,217
23	29,273

Controlled Substance:

- A medication order was placed, received, and processed according to County requirements.

Facility/Station Repairs

- Nothing to report.

Total Assignment Count

Total Assignment Count
110

Total Assignments by Type of Coverage

Total Assignment Count	
Type of Coverage: 911 Response	81
Type of Coverage: Code 11	2
Type of Coverage: Code 8	25
Type of Coverage: Standby	2

Total 911 Responses by Location of Incident

Total Assignment Count	
Activity/Training Sub-Category: Cambria - Happy Hill	4
Activity/Training Sub-Category: Cambria - Highway 1	2
Activity/Training Sub-Category: Cambria - Leimert	3
Activity/Training Sub-Category: Cambria - Lodge Hill East	5
Activity/Training Sub-Category: Cambria - Lodge Hill West	32
Activity/Training Sub-Category: Cambria - Moonstone Beach	2
Activity/Training Sub-Category: Cambria - Park Hill	7
Activity/Training Sub-Category: Cambria - Pine Knolls	3
Activity/Training Sub-Category: Cambria- Main Street	6
Activity/Training Sub-Category: Cambria- Station 81	3
Activity/Training Sub-Category: Harmony	1
Activity/Training Sub-Category: Monterey County	4
Activity/Training Sub-Category: San Simeon	1
Activity/Training Sub-Category: San Simeon Creek Rd	1
Activity/Training Sub-Category: San Simeon- Hearst Castle / Hearst State Beach	3
Activity/Training Sub-Category: SLO Area 2 - Paso Robles / Templeton	1
Activity/Training Sub-Category: SLO Area 3 - Morro Bay / Cayucos / Los Osos	2
Activity/Training Sub-Category: SLO Area 4 - Atascadero / Santa Margarita / Creston	1

Total Code 8 Responses by Posting Location

Total Assignment Count
Activity/Training Sub-Category: Code 8 Avila

Total Assignment Count	
	1
Activity/Training Sub-Category: Code 8 Cuesta	
	2
Activity/Training Sub-Category: Code 8 Summit	
	6
Activity/Training Sub-Category: Code 8 Tassajara / Hwy 58	
	1
Activity/Training Sub-Category: Code 8 Turri	
	2
Activity/Training Sub-Category: Code 8 Twin	
	2
Activity/Training Sub-Category: Code 8 Villa Creek	
	11

Total Code 11 Responses by Area

Total Assignment Count	
Activity/Training Sub-Category: Code 11 Area 2 (Paso Robles)	1
Activity/Training Sub-Category: Code 11 Area 3 (Morro Bay)	1

Total Standby Responses by Type

Total Assignment Count	
Activity/Training Sub-Category: Committed Standby	1
Activity/Training Sub-Category: Vital Sign Check	1

Total Monterey County Assignment Count

Total Monterey Incident Count	
	4

Total Transport Count

Total Transport Count	SQ System Level CCHD - Destination Name
0	
2	Twin Cities Community Hospital
21	French Hospital Medical Center
21	Sierra Vista Regional Medical Center



**Administrator/Finance Report
Board of Directors Meeting
February 24, 2026**

**Linda Hendy, Administrator/Director of Finance
Jennifer Harley, Office Manager**

Finance:

Income Statement:

January 2026 Monthly/Year-To-Date vs Budget

- **Income:** In January, net ambulance billing of \$65,316 resulted in an unfavorable budget variance of (\$24,684). This brings the year-to-date ambulance net billing total to \$518,685, (\$89,037) unfavorable to budget.
 - In January, ambulance net income decreased by (\$20,914) compared to the previous year.

	2025	2026	Variance
Ambulance Billing	334,756	272,150	(\$62,606)
Insurance Adjustments	(248,556)	(206,834)	\$41,692
Net Ambulance Income	\$86,200	\$65,316	(\$20,914)

- General and Special Assessment Tax revenues were favorable to the budget in January, while unfavorable year-to-date. Tax revenues are projected to be in line with the budget by year's end.
- **Other Income:** In January, District crew members received two dispatch calls to Monterey County. January financials show a favorable year-to-date variance, with income \$12,000 above the budget.
- **Net Operating Total Income:** January financials show net income of \$283,083, resulting in a favorable budget variance of \$15,670 and a year-to-date unfavorable variance of (\$19,140).
- **Total Expenses:** In January, the operating cost was \$217,578, resulting in a favorable variance of \$9,910 from the budget. Year-to-date expenses indicate a favorable variance of \$60,200.
 - Payroll Expenses: In January, payroll expenses were (\$3,781), unfavorable to the budget. Line items Employee Medical/Dental and PERS Pension Expense have increased slightly and reflect an unfavorable variance to the budget.
 - Audit Fees: The 2024-2025 financial statements audited are complete, and the District is expecting an invoice for services rendered.
 - Utilities: Utilities continue to reflect a favorable budget variance due to warmer weather through January; however, year-to-date, the expense will be in line with the budget.

- **Net Income:** The January financial report shows a favorable net income of \$283,083 and a year-to-date net income of (\$37,533). Year-to-date budget variance is unfavorable at (\$19,140).
- **Asset Payments/Cash Flow:** The January financials reflect monthly payments of \$2,100 for medical equipment (Zoll Monitors), \$3,625 for Ambulance Unit 22, and \$2,419 for Unit 23.

Office Manager Harley

January 2026 Claim Payments

In January 2026, the District received (99) payments, totaling \$74,421.77, for billed claims. Of these payments, (92) were for claims billed in 2025. Below is a breakdown of the payments received based on the date of service (DOS).

January 2026 – Claim Payments

Claim Date of Service	Amount Received	# of Payments Received
2024	\$ 50.00	1
Dec	50.00	1
2025	\$ 70,013.45	92
Jun	672.97	1
Jul	2,248.86	2
Oct	2,157.88	2
Nov	7,841.78	11
Dec	57,091.96	76
2026	\$ 4,358.32	6
Jan	4,358.32	6
Total	\$ 74,421.77	99

Fiscal Year 2025-2026 Year-to-Date Claim Payments

For Fiscal Year 2025-2026, the District is averaging (95) claim payments and \$75,817.86 per month. Below is a summary of claim payments recorded by month through January 2026.

Month	Cencal/Medi-Cal	Medicare	Self Pay	Traditional	Medicare Advantage Plans	Medicare Supplemental	Total Amt Paid	# of Claims
July 2025	7,850.53	20,677.89	4,202.28	35,017.22	6,492.63	6,268.40	80,508.95	98
August 2025	13,397.39	17,111.35	4,601.13	22,500.39	3,437.06	4,666.62	65,713.94	88
September 2025	8,361.84	23,690.46	8,042.04	40,337.72	10,621.75	5,020.51	96,074.32	114
October 2025	12,341.46	25,849.89	2,725.62	18,787.30	7,399.36	6,173.08	73,276.71	97
November 2025	7,084.21	14,359.82	7,855.00	4,031.38	5,455.35	4,051.51	42,837.27	62
December 2025	5,109.27	34,537.19	2,804.89	44,574.25	5,078.07	5,788.37	97,892.04	107
January 2026	3,953.94	26,195.07	8,843.00	20,222.10	6,027.00	9,180.66	74,421.77	99
Totals thru January 2026	58,098.64	162,421.67	39,073.96	185,470.36	44,511.22	41,149.15	530,725.00	665
% of Total thru January 2026	11%	31%	7%	35%	8%	8%	100%	
Average thru January 2026	8,299.81	23,203.10	5,581.99	26,495.77	6,358.75	5,878.45	75,817.86	95

In January 2026, the District billed a total of (56) claims, which included transports, dry runs, and Monterey dry runs. Of the (46) transports billed, (8) were for Cencal/Medi-Cal, (32) were for Medicare, and (6) were for Medicare Advantage Plans. Below is a breakdown of the claims billed for January 2026 by incident type.

January 2026 – Billed Claims by Incident Type

Incident Type	Amount Billed	# of Claims
Transports	\$ 265,210.00	46
Non-Emergency Transports	0.00	0
Dry Runs	6,300.00	9
Monterey - Transports	0.00	0
Monterey - Dry Runs	700.00	1
Totals	\$ 272,210.00	56

Fiscal Year 2025-2026 Year-to-Date Billed Claims

For Fiscal Year 2025-2026, the District is billing an average of (63) claims, or \$309,578.57, per month. The table below provides a breakdown of the total amounts billed by response types.

Month	Transports	Non-Emergency Transports	Dry Runs	Monterey Transports	Monterey Dry Runs	Total Amt Billed	# of Claims
July 2025	\$ 274,277.50	\$ -	\$ 9,100.00	\$ 8,242.50	\$ 700.00	\$ 292,320.00	62
August 2025	304,832.50	5,780.00	12,600.00	-	-	323,212.50	71
September 2025	305,802.50	10,757.50	4,200.00	9,982.50	-	330,742.50	63
October 2025	248,195.00	-	5,600.00	-	-	253,795.00	51
November 2025	257,805.00	-	4,200.00	8,467.50	700.00	271,172.50	54
December 2025	378,742.50	17,072.50	9,100.00	18,682.50	-	423,597.50	84
January 2026	265,210.00	-	6,300.00	-	700.00	272,210.00	56
Totals	\$ 2,034,865.00	\$ 33,610.00	\$ 51,100.00	\$ 45,375.00	\$ 2,100.00	\$ 2,167,050.00	441
% of Total	93.9%	1.6%	2.4%	2.1%	0.1%		
Average	\$ 290,695.00	\$ 4,801.43	\$ 7,300.00	\$ 6,482.14	\$ 300.00	\$ 309,578.57	63

Other Business

Other

- The District received a closing report for the 2022 GEMT Audit, indicating that an overpayment of \$868.94 was made to the District. The District has since processed a repayment to the program.
- Administrator Hendy prepared and submitted the California State Transaction report to the State Controller’s Office.

- 2025 1099 forms were processed for all independent contractors.

New Ambulance Station – Administrative Support

- Attended weekly meetings with Edwards Construction Group and PBK Architects, providing input on the site plan and project budget.
- Continued to provide administrative support for Minor Use Permit and PG&E application.
- Processed project expense payments by submitting requisitions through US Bank.

Billing

- Attended the January 2026 California Ambulance Association’s Reimbursement Roundup.

Cambria Community Healthcare District
Summary of Revenues and Expenses
JANUARY 2026, and Year-To-Date JULY-JAN 2025-2026

	January Actual	January Budget	Variance	July - January YTD Actual	July - January YTD Budget	Variance
<u>Ambulance Revenue</u>						
Ambulance Billings	271,510	325,000	(53,490)	2,161,206	2,355,000	(193,794)
Prior Year Income	640	-	640	(20)	-	(20)
Total Ambulance Income	272,150	325,000	(52,850)	2,161,186	2,355,000	(193,814)
Insurance Adjustments/Contra	(206,834)	(235,000)	28,166	(1,641,905)	(1,737,278)	95,373
Sent to Collections	-	-	-	(596)	(8,000)	7,404
Bad Debt	-	-	-	-	(2,000)	2,000
Ambulance Income	65,316	90,000	(24,684)	518,685	607,722	(89,037)
<u>Tax Income</u>						
General Tax	234,377	220,000	14,377	411,796	420,000	(8,204)
Special Assessment Tax	195,223	182,000	13,223	411,007	417,000	(5,993)
Total Tax Income	429,600	402,000	27,600	822,802	837,000	(14,198)
<u>Other Income</u>						
Monterey Contract	4,000	2,000	2,000	38,000	26,000	12,000
Rental Income	-	-	-	-	300	(300)
Misc. Income	-	100	(100)	223	700	(477)
Bad Debt Recovery	70	300	(230)	2,733	1,800	933
Grant Income	-	-	-	-	-	-
Interest Income	675	500	175	2,060	1,860	200
Stand By/Event Income	1,000	-	1,000	1,000	-	1,000
Donations -Amb. Procurement	-	-	-	-	-	-
Total Other Income	5,745	2,900	2,845	44,015	30,660	13,355
Total Income	500,661	494,900	5,761	1,385,502	1,475,382	(89,880)
<u>Payroll Expenses</u>						
Administration	17,143	17,500	357	119,898	122,500	2,602
Full Time Employees	81,681	90,000	8,319	599,531	640,450	40,919
Part Time Employees	11,316	2,000	(9,316)	48,350	28,000	(20,350)
Payroll Tax Expense	5,730	5,700	(30)	40,315	44,700	4,385
Employee Medical/Dental	22,050	19,000	(3,050)	144,925	130,000	(14,925)
PERS Pension Expense	9,790	7,200	(2,590)	63,546	50,400	(13,146)
PERS - Unfunded Liability	19,807	19,807	0	139,780	138,650	(1,129)
Uniforms	410	500	90	1,574	3,500	1,926
Workers Comp. Insurance	5,738	6,375	637	36,275	44,625	8,350
Retiree Health	7,118	8,920	1,802	57,803	62,400	4,597
Total Payroll Expense	180,784	177,002	(3,781)	1,251,998	1,265,225	13,228
<u>Operating Expenses</u>						
Contacted Services	-	-	-	-	-	-
Audit Fees	-	16,000	16,000	-	16,000	16,000
Billing Services	599	710	111	4,193	4,880	687
Other	-	-	-	-	-	-
Payroll Services	764	950	186	3,416	4,250	834
Total Contracted Services	1,363	17,660	16,297	7,609	25,130	17,521
Dues and Subscriptions	853	600	(253)	22,152	20,000	(2,152)
Education/Travel/Mileage	-	120	120	627	900	273
Election Expense	-	-	-	-	-	-
Facility Maintenance	280	420	140	5,895	2,900	(2,995)
Legal	2,192	1,200	(992)	4,208	8,400	4,192
Liability Insurance	3,496	3,600	104	24,064	25,200	1,136
License/Permits	28	1,000	972	1,799	7,000	5,201
Office and Computer Supplies	1,700	1,500	(200)	9,540	10,500	960
Storage	-	-	-	480	480	-
Training	-	280	280	1,011	2,100	1,089
Utilities	3,367	4,200	833	17,597	19,500	1,904
Total Operating Expenses	13,278	30,580	17,302	94,981	122,110	27,129

Cambria Community Healthcare District
Summary of Revenues and Expenses
JANUARY 2026, and Year-To-Date JULY-JAN 2025-2026

	January Actual	January Budget	Variance	July - January YTD Actual	July - January YTD Budget	Variance
Fleet Expenses:						
Communication Equipment	78	100	22	78	600	522
Fuel	2,526	2,500	(26)	17,626	18,500	874
Unit - 18	-	350	350	573	2,250	1,677
Unit - 20	173	100	(73)	173	500	328
Unit - 21	-	250	250	825	1,750	925
Unit - 22	85	250	165	880	1,750	870
Unit - 23	172	250	78	725	1,750	1,025
Interest Expense	-	30	30	-	150	150
Medical Supplies/Equipment	6,113	5,600	(513)	31,147	40,000	8,853
Total Fleet Expenses	9,146	9,430	284	52,025	67,250	15,225
Total Operating Expenses	22,424	40,010	17,586	147,006	189,360	42,354
Other Expenses						
Bank and Credit Card Charges	246	375	129	2,037	2,625	588
Bond C-24 - New Ambulance Station	-	-	-	2,612	-	(2,612)
Contingency/Outreach/Public Ed. Equipment	184	330	146	1,158	2,350	1,192
Miscellaneous	-	150	150	-	900	900
PP-GEMT Fee	13,939	9,500	(4,439)	28,229	32,500	4,271
Sales Tax	-	120	120	536	815	279
Total Other Expenses	14,370	10,475	(3,895)	34,571	39,190	4,619
Total Expenses	217,578	227,487	9,910	1,433,575	1,493,775	60,200
Net Operating Income	283,083	267,413	15,670	(48,073)	(18,393)	(29,679)
Other Income/Expense						
Sale of Asset	-	-	-	3,825	-	3,825
Grant Income	-	-	-	6,714	-	6,714
Total Other Income	-	-	-	10,539	-	10,539
Net Income	283,083	267,413	15,670	(37,533)	(18,393)	(19,140)

Asset Payments - Cash Flow 2025-2026

Asset Monthly Payments	January Actual		July - January			
Zoll Monitors	(2,100)	(2,100)	-	(12,600)	(12,600)	-
Ambulance Unit 22	(3,625)	(3,625)	-	(21,750)	(21,750)	-
Ambulance Unit 23	(2,419)	(2,419)	-	(75,591)	(75,591)	-
Net Income less Asset Expense	274,939	259,269	15,670	(147,474)	(128,334)	(19,140)

Cambria Community Healthcare District Monthly Banking Financial Report

January 2026

Pacific Premier Bank Operating Account

Beginning Balance	\$	131,332.52	
Income		600,833.46	
Less Checking Expenses		(342,971.77)	
Bank Fee(s)		-	
Ending Balance			<u>\$ 389,194.21</u>

Pacific Premier Bank Money Market Account Reserve Account

Beginning Balance	\$	3,353.22	
Transfer from Operating Account		194,240.39	
Bond C-24 (Temporary Account)		(194,240.39)	
Interest		6.84	
Ending Balance			<u>\$ 3,360.06</u>

Local Agency Investment Fund Account Operating Reserves

Beginning Balance	\$	62,964.41	
Transfer from Operating Account		-	
Interest		665.76	
Ending Balance			<u>\$ 63,630.17</u>

ALL ACCOUNTS TOTAL

\$ 456,184.44

PPB Trust Account

Beginning Balance	\$	184,715.38	
Deposit		13,121.33	
Less Checking Expense		(234.26)	
Bank fee (paper statement)		(2.00)	
Withdrawal payables(Qgiv)		-	
Ending Balance			<u>\$ 197,600.45</u>

Accounts Prior Year Total Comparison (Not including Trust Account)

JANUARY	2026	\$	456,184.44
JANUARY	2025	\$	<u>448,248.68</u>
Difference		\$	7,935.76

Cambria Community Healthcare District

Transaction Detail by Account

January 2026

DATE	TRANSACTION TYPE	NUM	NAME	MEMO/DESCRIPTION	AMOUNT
11200 Columbia (5645) Operating					
01/01/2026	Bill Payment (Check)	4106	Danny Takaoka		-2,836.98
01/01/2026	Bill Payment (Check)	4105	Daniel Cariaga		-1,322.73
01/01/2026	Bill Payment (Check)	4108	Donald Melendy		-935.20
01/01/2026	Bill Payment (Check)	4109	Heidi Holmes-Nagy		-878.17
01/01/2026	Bill Payment (Check)	4107	Denise Coddling		-675.14
01/01/2026	Bill Payment (Check)	4130	Heidi Holmes-Nagy		-344.93
01/05/2026	Check	ACH	Payroll People	Payroll 12.16.2025 to 12.31.25.2025 Payday 01-05-2026	-49,450.17
01/05/2026	Bill Payment (Check)	4136	Porteous Management Group	Space #5	-960.00
01/05/2026	Bill Payment (Check)	4137	Robert W Sayers		-1,030.51
01/05/2026	Bill Payment (Check)	4133	Cal-Tec Computers		-420.00
01/05/2026	Bill Payment (Check)	ACH	Amazon Capital Services	A2DNIJ28UPUQD0	-236.95
01/05/2026	Bill Payment (Check)	4134	J. Curtis Reid		-196.91
01/05/2026	Bill Payment (Check)	4138	SEIU Local 620		-174.60
01/05/2026	Bill Payment (Check)	4132	Bound Tree Medical	Acct# 106918	-165.99
01/05/2026	Bill Payment (Check)	4131	Antonio Mercado		-150.00
01/05/2026	Bill Payment (Check)	4139	Wex Bank		-138.43
01/05/2026	Bill Payment (Check)	4135	JB Dewar, Inc.		-117.76
01/07/2026	Check	ACH	CalPERS Fiscal Services Division	Payroll 12.16.2025 to 12.31.2025 Payday 01.05.2026	-150.00
01/07/2026	Bill Payment (Check)	ACH	WEX Bank -		-2,414.31
01/07/2026	Bill Payment (Check)	4142	Mission Country Disposal	Acct# 4130-8101951	-247.62
01/07/2026	Bill Payment (Check)	4140	Cambria Business Center		-165.00
01/07/2026	Bill Payment (Check)	4143	Pitney Bowes		-119.58
01/07/2026	Bill Payment	4141	Cambria Business Center		-19.70

Cambria Community Healthcare District

Transaction Detail by Account

January 2026

DATE	TRANSACTION TYPE	NUM	NAME	MEMO/DESCRIPTION	AMOUNT
	(Check)				
01/08/2026	Bill Payment (Check)	4144	JB Dewar, Inc.		-58.27
01/09/2026	Bill Payment (Check)	ACH	Pacific Premier CC/FNBO		-3,164.72
01/09/2026	Bill Payment (Check)	ACH	Pacific Premier CC/FNBO		-1,322.31
01/09/2026	Bill Payment (Check)	ACH	Pacific Premier CC/FNBO		-300.15
01/09/2026	Expense		WORLDPAY CC		-236.95
01/09/2026	Expense		EDIS	FSA Health	-199.60
01/12/2026	Bill Payment (Check)	ACH	CalPERS Fiscal Services Division		-25,370.24
01/12/2026	Bill Payment (Check)	ACH	CalPERS Fiscal Services Division		-17,200.87
01/12/2026	Bill Payment (Check)	ACH	CalPERS Fiscal Services Division		-1,498.43
01/12/2026	Bill Payment (Check)	ACH	CalPERS Fiscal Services Division		-761.25
01/12/2026	Expense		EDIS	FSA Health	-59.73
01/15/2026	Bill Payment (Check)	4145	SDRMA WC	Member# 7576 W/C invoice	-5,412.80
01/15/2026	Bill Payment (Check)	4146	SDRMA P/L	Member# 7576 P/L invoice	-3,755.73
01/15/2026	Bill Payment (Check)	ACH	CalPERS Fiscal Services Division		-1,484.42
01/15/2026	Bill Payment (Check)	ACH	CalPERS Fiscal Services Division		-761.25
01/16/2026	Bill Payment (Check)	ACH	CalPERS Fiscal Services Division		-17,066.74
01/16/2026	Expense		EDIS		-35.00
01/20/2026	Check	ACH	Payroll People	Payroll 1.01.26 to 1.15.26 Payday 01-20-2026	-53,325.88
01/20/2026	Bill Payment (Check)	ACH	PG&E - ending in 816-2	Acct# 3886196816-2	-1,063.25
01/20/2026	Bill Payment (Check)	ACH	PG&E - #A ending 348-9	Acct# 9976402348-9	-414.42
01/20/2026	Bill Payment (Check)	ACH	PG&E - ending 135-3	Acct# 4378486135-3	-11.05
01/21/2026	Check	ACH	CalPERS Fiscal Services Division	Payroll 01.01.2026 to 01.15.2026 Payday 01.20.2026	-150.00
01/21/2026	Bill Payment (Check)	4149	California Special District Assoc.	Membership ID: 1104	-8,637.00
01/21/2026	Bill Payment (Check)	4151	KS StateBank		-2,418.80
01/21/2026	Bill Payment (Check)	4155	Streamline		-390.00

Cambria Community Healthcare District

Transaction Detail by Account

January 2026

DATE	TRANSACTION TYPE	NUM	NAME	MEMO/DESCRIPTION	AMOUNT
01/21/2026	Bill Payment (Check)	4147	Ameritas Life Insurance Corp.	Policy# 58022-00001 and 00002	-1,470.08
01/21/2026	Bill Payment (Check)	ACH	CalPERS Fiscal Services Division		-16,929.24
01/21/2026	Bill Payment (Check)	ACH	California Public Employees Ret. System		-6,638.19
01/21/2026	Bill Payment (Check)	ACH	California Public Employees Ret. System		-6,362.96
01/21/2026	Bill Payment (Check)	ACH	California Public Employees Ret. System		-1,348.61
01/21/2026	Bill Payment (Check)	ACH	California Public Employees Ret. System		-1,175.94
01/21/2026	Bill Payment (Check)	4148	Bound Tree Medical	Acct# 106918	-272.80
01/21/2026	Bill Payment (Check)	4150	Coastal Copy	Acct# CC45	-217.50
01/21/2026	Bill Payment (Check)	4156	Wells Fargo Vendor Financial Services	Cust# 1051980762	-191.98
01/21/2026	Bill Payment (Check)	4152	Mutual of Omaha	Group ID# G000BZ6W	-163.81
01/21/2026	Bill Payment (Check)	4153	Nelsons Garage, Inc.		-147.42
01/21/2026	Bill Payment (Check)	4154	SEIU Local 620		-139.68
01/22/2026	Expense		EDIS		-10.50
01/27/2026	Check	4163	CCSD	Invoice RMDL-1225-2515M APN 013.241.024 2515 Main Street Ambulance Station	-195.00
01/27/2026	Bill Payment (Check)	4162	Bound Tree Medical	Acct# 106918	-4,901.34
01/27/2026	Bill Payment (Check)	4164	Airgas West		-767.00
01/27/2026	Bill Payment (Check)	4166	Charter Communications	Acct# *****4228	-449.17
01/27/2026	Bill Payment (Check)	4170	Verizon Wireless	Acct# 271000184-00002	-432.58
01/27/2026	Bill Payment (Check)	4171	Wex Bank		-293.67
01/27/2026	Bill Payment (Check)	4168	McKesson Medical Surgical	Account #****5923	-96.94
01/27/2026	Bill Payment (Check)	4167	Kitzman Water (Culligan)	Acct# 190231	-70.30
01/27/2026	Bill Payment (Check)	4169	Templeton Uniforms, LLC		-16.00
01/27/2026	Bill Payment (Check)	4172	DHCS-Department of Health Care Services	GEMT SUPP. PYMT PROG., 06.30.2022, NPI 1710983929	-868.94

Cambria Community Healthcare District

Transaction Detail by Account

January 2026

DATE	TRANSACTION TYPE	NUM	NAME	MEMO/DESCRIPTION	AMOUNT
01/27/2026	Bill Payment (Check)	4165	Cambria Auto Supply	Acct# 7299	-24.66
01/28/2026	Bill Payment (Check)	4173	US Bank Card	Account ending in 3652	-249.33
01/28/2026	Bill Payment (Check)	ACH	KS StateBank		-3,621.48
01/29/2026	Bill Payment (Check)	4174	Danny Takaoka		-1,114.38
01/29/2026	Bill Payment (Check)	ACH	California Public Employees Ret. System		-6,469.14
01/29/2026	Bill Payment (Check)	ACH	California Public Employees Ret. System		-6,056.41
01/29/2026	Bill Payment (Check)	ACH	California Public Employees Ret. System		-1,348.60
01/29/2026	Bill Payment (Check)	ACH	California Public Employees Ret. System		-1,348.60
01/29/2026	Bill Payment (Check)	ACH	California Public Employees Ret. System		-1,175.94
01/29/2026	Bill Payment (Check)	ACH	California Public Employees Ret. System		-1,175.94
01/29/2026	Bill Payment (Check)	ACH	Amazon Capital Services	A2DNIJ28UPUQD0	-328.27
Total for 11200 Columbia (5645) Operating					\$ - 274,321.94



CAMBRIA COMMUNITY HEALTHCARE DISTRICT

BOARD AGENDA STAFF REPORT – 01

TO: Board of Directors

FROM: Linda Hendy, Administrator/Director of Finance
Jennifer Harley, Office Manager

DATE: February 24, 2026

DESCRIPTION: Key Billing Indicators (KBI)

RECOMMENDATION

Recommend maintaining billing data collection for ambulance claims to assist with future budgeting and fee schedule decisions.

FISCAL IMPACT

None at this time.

DISCUSSION

The District generates revenue from three primary sources: ambulance services, taxes, and miscellaneous income. Revenue from ambulance services accounts for roughly 40% of the annual total, while property taxes, grants, and other miscellaneous sources contribute approximately 60%. The District consistently strives to maximize allowable insurance reimbursements for the services provided.

Six payer types are identified in our billing process, indicating who is billed and who pays our ambulance claims. During the past year, the payer types were expanded from four to six to capture Medicare Advantage and Medicare Supplement plans:

- Medi-Cal/Cencal
- Medicare
- Medicare Advantage Plans
- Medicare Supplement Plans
- Self Pay (paid directly by the patient)
- Traditional Insurance (all other insurance providers not identified above)

Insurance information for claims is obtained from the hospital or the patient. If no insurance information has been provided, the patient is mailed a letter itemizing the charges and requesting insurance details. The claim is submitted to the identified primary payer (Medi-Cal/Cencal, Medicare, Medicare Advantage, or Traditional Insurance) for payment. After applying the payment from the primary payer and any relevant adjustments, the remaining balance, typically comprising a deductible,

coinsurance, or copayment, is billed to a secondary payer, such as Medi-Cal/Cencal, Medicare Supplement plan, Self Pay (patient), or Traditional Insurance.

Since October 2024, Office Manager Harley has been maintaining tracking systems for billed ambulance claims and their associated payments. Over the last six months, additional data points have been collected to aid in future budgeting and fee schedule decisions. This new data includes the demographics of billed transports by primary payer types, as well as the billed amounts and their corresponding payments by these payer types. This data helps identify the percentages of our total transport claims, revealing how much we are billing by payer type and the corresponding amounts we are receiving as a percentage from those payers.

Demographics of Billed Claims by Primary Payer Types – Transports Only

TRANSPORTS ONLY - July - December 2025						
	Cencal/Medi-Cal	Medicare	Medicare Adv	Self Pay	Traditional	# of Claims
Totals	27	196	48	11	37	319
% of Total	8.46%	61.44%	15.05%	3.45%	11.60%	100.0%
Average	4.5	32.7	8.0	1.8	6.2	53.2

- **84.95% of billed transport claims, an average of (45) claims per month**, are reimbursed at an established rate (Medi-Cal, Medicare, and Medicare Advantage).
- **3.45% of billed transport claims, an average of (2) claims per month**, are categorized as Self Pay, with the insurance status unknown at the time of billing. The maximum billing amount for uninsured patients is at the Medicare rate.
- **11.60% of billed transport claims, an average of (6) claims per month**, are processed through Traditional insurance; only these claims are directly impacted by an increase in the District Rate Schedule.

Billed Claims & Corresponding Payments to Date by Primary Payer Types – Transports Only

TRANSPORTS ONLY - AMOUNTS BILLED VS AMOUNT PAID BY PAYER TYPE - July - December 2025									
	Cencal/Medi-Cal	Medicare	Medicare Adv	Self Pay	Traditional	Total Amt Billed	Total Amt Paid*	% Paid	# of Claims
July 2025	\$ 36,370.00	\$ 167,300.00	\$ 29,450.00	\$ 22,787.50	\$ 26,612.50	\$ 282,520.00	61,077.59	22%	48
August 2025	34,870.00	181,065.00	46,942.50	11,832.50	35,902.50	310,612.50	74,832.23	24%	53
September 2025	26,725.00	195,567.50	62,012.50	9,290.00	32,947.50	326,542.50	64,365.88	20%	57
October 2025	39,335.00	138,827.50	30,167.50	5,772.50	34,092.50	248,195.00	50,854.05	20%	43
November 2025	9,705.00	195,362.50	33,635.00	11,657.50	15,912.50	266,272.50	51,123.44	19%	47
December 2025	5,705.00	251,512.50	80,345.00	-	76,935.00	414,497.50	108,174.85	26%	71
Amount Billed	\$ 152,710.00	\$ 1,129,635.00	\$ 282,552.50	\$ 61,340.00	\$ 222,402.50	\$ 1,848,640.00	\$ 410,428.04	22%	319
% of Total Amt Billed	8.3%	61.1%	15.3%	3.3%	12.0%	100.0%			
Average	\$ 25,451.67	\$ 188,272.50	\$ 47,092.08	\$ 10,223.33	\$ 37,067.08	\$ 308,106.67	\$ 68,404.67	22%	53

*Amounts paid include secondary payments

- **84.7%** of billed amounts are reimbursed at an established rate (Medi-Cal, Medicare, and Medicare Advantage).
- **3.3%** of billed amounts are categorized as Self Pay, with the insurance status unknown at the time of billing. The maximum billing amount for uninsured patients is at the Medicare rate.
- **12.0%** of billed amounts are processed through Traditional insurance; only these claims are impacted by an increase in the District Rate Schedule.

Below is a more detailed analysis of the amounts billed vs. the amounts paid on corresponding transport claims and the % paid to date by Primary Payer Types for July – December 2025 (paid amounts include secondary payments):

Payer Type	Amount Billed	Amount Paid*	% Paid
Cencal/Medi-Cal	\$ 152,710.00	\$ 30,610.25	20%
Medicare	\$ 1,129,635.00	\$ 196,203.74	17%
Medicare Advantage	\$ 282,552.50	\$ 46,927.21	17%
Totals	\$ 1,564,897.50	\$ 273,741.20	

Payer Type	Amount Billed	Amount Paid*	% Paid
Traditional	\$ 222,402.50	\$ 135,659.01	61%
Totals	\$ 222,402.50	\$ 135,659.01	

*Amounts paid include secondary payments

The first table reflects reimbursement to date from the three primary payer types (including secondary payments) operating under fixed rates, Cencal/Medi-Cal, Medicare, and Medicare Advantage plans. Medicare represents the largest share of these billed charges, with payments aligning to its standard fee schedule. Cencal/Medi-Cal shows the highest relative payment percentage at 20%, largely due to the District’s participation in the Public Provider Ground Emergency Medical Transport (PP-GEMT) program through the Department of Health Care Services. Medicare Advantage follows closely with similar reimbursement levels as Medicare. In total, from July – December 2025, \$1.56 million was billed to these three payer types for transports, and \$274,000 was paid to date, roughly 17.5% in payments for amount billed.

The second table reflects reimbursement to date from Traditional payers. From July – December 2025, Traditional payers were billed \$222,000 for transports and have paid \$136,000 to date, yielding a 61% collection rate.

Average % Paid on Claims – Transports Only

Preliminary data from October 2024 through February 2025 showed an overall reimbursement rate of 23.89% for transports and dry runs. During this period, primary payers covered an average of 20.71% of billed charges, while secondary payers contributed 101.56% of the remaining balance after primary payments.

When expanding the analysis to the full period of October 2024 through December 2025, reimbursement patterns remained consistent. Overall, payments for transports and dry runs averaged 23.59%, with primary payers contributing 20.23% and secondary payers increasing to 111% of the remaining balance. Transport-only claims during this extended period reflected a similar trend, averaging 23.97%.

	Transports and Dry Runs		Transports Only
	Oct 24 - Feb 25	Oct 24 - Dec 25	Oct 24 - Dec 25
Primary Total	20.71%	20.23%	20.53%
Secondary Total	101.56%	111.00%	111.00%
Grand Total	23.89%	23.59%	23.97%
**Secondary Avg % Paid based on Primary Amount Billed			

CONCLUSION

Office Manager Harley will continue to track data and prepare and present KBI reports semi-annually.

BOARD ACTION

None at this time.



CAMBRIA COMMUNITY HEALTHCARE DISTRICT
BOARD AGENDA STAFF REPORT – 02

TO: Board of Directors
FROM: Linda Hendy, Administrator/Director of Finance
DATE: February 24, 2026
DESCRIPTION: Fiscal Year 2025-2026 Mid-Year Budget Review

RECOMMENDATION

Receive and review the mid-year revenue and expenditure projections for Fiscal Year 2025–2026, including a comparison to the adopted budget.

FISCAL IMPACT

The adopted Fiscal Year 2025–2026 Budget includes operating and grant revenue of \$2,524,222 and operating expenditures of \$2,510,846, for a projected positive net income of \$13,376.

Mid-year projections estimate operating and grant revenue of \$2,475,529 and operating expenditures of \$2,472,845, resulting in:

- Favorable operating variance: \$2,684
- Projected operating net income unfavorable vs. budget: (\$10,692)

DISCUSSION

Each February, the Finance Committee and Administrator Hendy conduct a Performance vs. Projections Analysis to evaluate actual revenues and expenditures against the adopted budget. This review helps identify variances, determine their causes, and assess whether adjustments or corrective actions are needed.

The attached Mid-Year Budget financials and presentation incorporate actuals from July 2025 through January 2026 and projections for the remaining five months of the fiscal year. Forecasts are based on current-year activity, prior-year trends, and anticipated seasonal patterns. An analysis and explanations are provided in the presentation.

CONCLUSION

Net Income

Projected Fiscal Year 2025–2026 operating and grant activity indicates a positive net income of \$2,684 on an accrual basis. However, ongoing monthly payments for capital assets—including ambulance units and monitors—are expected to reduce cash flow, resulting in a projected cash-basis net loss of (\$95,044).

With minimal cash reserves, the District relies on insurance claim reimbursements and the timing of tax receipts throughout the year to support operations. Ongoing efforts focus on reducing expenses where possible and researching grants and other potential revenue sources, with the goal of building on the District’s limited reserves.

MOTION

Receive and file.

ATTACHMENT(S)

1. Summary of Revenues and Expenses – Mid-Year Update Fiscal Year 2025-2026
2. Mid-Year PowerPoint Presentation

Cambria Community Healthcare District
Summary of Revenues and Expenses
Mid-Year Update 2025-2026

	July-January YTD Actual	February - June Projected	Mid-Year Total Projected	2025-2026 YTD Budget	Variance
<u>Ambulance Revenue</u>					
Ambulance Billings	2,149,541	1,691,000	3,840,541	4,020,000	(179,459)
Prior Year Income	(660)	-	(660)	-	(660)
Total Ambulance Income	2,148,881	1,691,000	3,839,881	4,020,000	(180,119)
Insurance Adjustments/Contra	(1,625,011)	(1,252,000)	(2,877,011)	(2,945,278)	68,267
Sent to Collections	(596)	(7,000)	(7,596)	(10,000)	2,404
Bad Debt		(1,200)	(1,200)	(3,200)	2,000
Ambulance Income	523,274	430,800	954,074	1,061,522	(107,448)
<u>Tax Income</u>					
General Tax	411,796	297,830	709,626	705,000	4,626
Special Assessment Tax	411,008	305,227	716,235	710,000	6,235
Total Tax Income	822,803	603,057	1,425,860	1,415,000	10,860
<u>Other Income</u>					
Monterey Contract	38,000	18,000	56,000	40,000	16,000
Rental Income	-	-	-	300	(300)
Misc. Income	223	500	723	1,200	(477)
Bad Debt Recovery	2,733	1,700	4,433	3,500	933
Grant Income	-	-	-	-	-
Interest Income	2,060	840	2,900	2,700	200
Stand By/Event Income	1,000	-	1,000	-	1,000
Donations -Amb. Procurement	-	-	-	-	-
Total Other Income	44,015	21,040	65,055	47,700	17,355
Total Income	1,390,093	1,054,897	2,444,990	2,524,222	(79,232)
<u>Payroll Expenses</u>					
Administration	119,898	87,500	207,398	210,000	2,602
Full Time Employees	599,531	450,140	1,049,671	1,085,590	35,919
Part Time Employees	48,350	9,410	57,760	37,410	(20,350)
Payroll Tax Expense	40,315	27,300	67,615	73,200	5,585
Employee Medical/Dental	144,925	102,625	247,550	225,000	(22,550)
PERS Pension Expense	63,546	35,600	99,146	86,000	(13,146)
PERS - Unfunded Liability	139,780	99,036	238,815	237,686	(1,129)
Uniforms	1,524	2,500	4,024	6,000	1,976
Workers Comp. Insurance	36,275	31,875	68,150	76,500	8,350
Retiree Health	57,458	42,445	99,903	107,000	7,097
Total Payroll Expense	1,251,602	888,431	2,140,033	2,144,386	4,353
<u>Operating Expenses</u>					
Contacted Services	-	-	-	-	-
Audit Fees	-	16,000	16,000	16,000	-
Billing Services	4,193	3,620	7,813	8,500	687
Other: GAAP Reporting	-	5,000	5,000	5,000	-
Payroll Services	3,416	2,750	6,166	7,000	834
Total Contracted Services	7,609	27,370	34,979	36,500	1,521
Dues and Subscriptions	21,929	3,000	24,929	23,000	(1,929)
Education/Travel/Mileage	627	600	1,227	1,500	273
Election Expense	-	-	-	-	-
Facility Maintenance	5,834	2,100	7,934	5,000	(2,934)
Legal	4,208	9,600	13,808	18,000	4,192
Liability Insurance	24,064	20,000	44,064	43,200	(864)
License/Permits	1,772	5,000	6,772	12,000	5,228
Office and Computer Supplies	9,170	7,500	16,670	18,000	1,330
Storage	480	480	960	960	-

Cambria Community Healthcare District
Summary of Revenues and Expenses
Mid-Year Update 2025-2026

	July-January YTD Actual	February - June Projected	Mid-Year Total Projected	2025-2026 YTD Budget	Variance
Training	1,011	1,400	2,411	3,500	1,089
Utilities	16,918	16,500	33,418	36,000	2,582
Total Operating Expenses	93,621	93,550	187,171	197,660	10,489
Fleet Expenses:					
Communication Equipment	-	500	500	1,100	600
Fuel	17,626	13,500	31,126	32,000	874
Unit - 18	573	1,750	2,323	4,000	1,677
Unit - 20	-	500	500	1,000	500
Unit - 21 (Surplused Oct 2025)	825	-	825	3,000	2,175
Unit - 22	795	1,250	2,045	3,000	955
Unit - 23	725	1,250	1,975	3,000	1,025
Interest Expense	-	150	150	300	150
Medical Supplies/Equipment	30,193	30,000	60,193	68,000	7,807
Total Fleet Expenses	50,737	48,900	99,637	115,400	15,763
Total Operating Expenses	144,358	142,450	286,808	313,060	26,252
Other Expenses					
Bank and Credit Card Charges	2,037	1,875	3,912	4,500	588
Bond C-24 - New Ambulance Station	2,612	(2,612)	(0)	-	0
Contingency/Outreach/Public Ed. Equipment	993	1,650	2,643	4,000	1,357
Miscellaneous	-	600	600	1,500	900
PP-GEMT Fee	15,159	22,570	37,729	42,000	4,271
Sales Tax	536	585	1,121	1,400	279
Total Other Expenses	21,336	24,668	46,004	53,400	7,396
Total Expenses	1,417,297	1,055,549	2,472,845	2,510,846	38,001
Net Operating Income	(27,204)	(652)	(27,856)	13,376	(41,232)
Other Income/Expense					
Sale of Asset	3,825	-	3,825	-	3,825
Grant Income	6,714	20,000	26,714	-	26,714
Total Other Income	10,539	20,000	30,539	-	30,539
Net Income	(16,664)	19,348	2,684	13,376	(10,692)

Asset Payments - Cash Flow 2025-2026

Asset Monthly Payments	YTD Actual	July - January			
Zoll Monitors	(14,700)	(10,500)	(25,200)	(25,200)	-
Ambulance Unit 22	(25,375)	(18,125)	(43,500)	(43,500)	-
Ambulance Unit 23	(16,933)	(12,095)	(29,028)	(29,028)	-
Net Income less Asset Expense	(73,672)	(21,372)	(95,044)	(84,352)	(10,692)

Cambria Community Healthcare District
**2025-2026 MID-YEAR
BUDGET REVIEW**

February 24, 2026



The Importance of a Mid-Year Budget Review



Strategic “Compass Check”:

It is a crucial pause to assess if the District is on track or if the financial path needs adjustment.

Risk Management Tool:

A means to identify financial gaps or obstacles early to prepare for a successful year-end close.

Proactive Re-Forecasting:

A forward-looking process that uses current data to update projections for the remainder of the year.

Performance vs. Projections Analysis:

A detailed comparison of actual income/expenses against the original budget to identify, investigate, and understand variances.

Projections

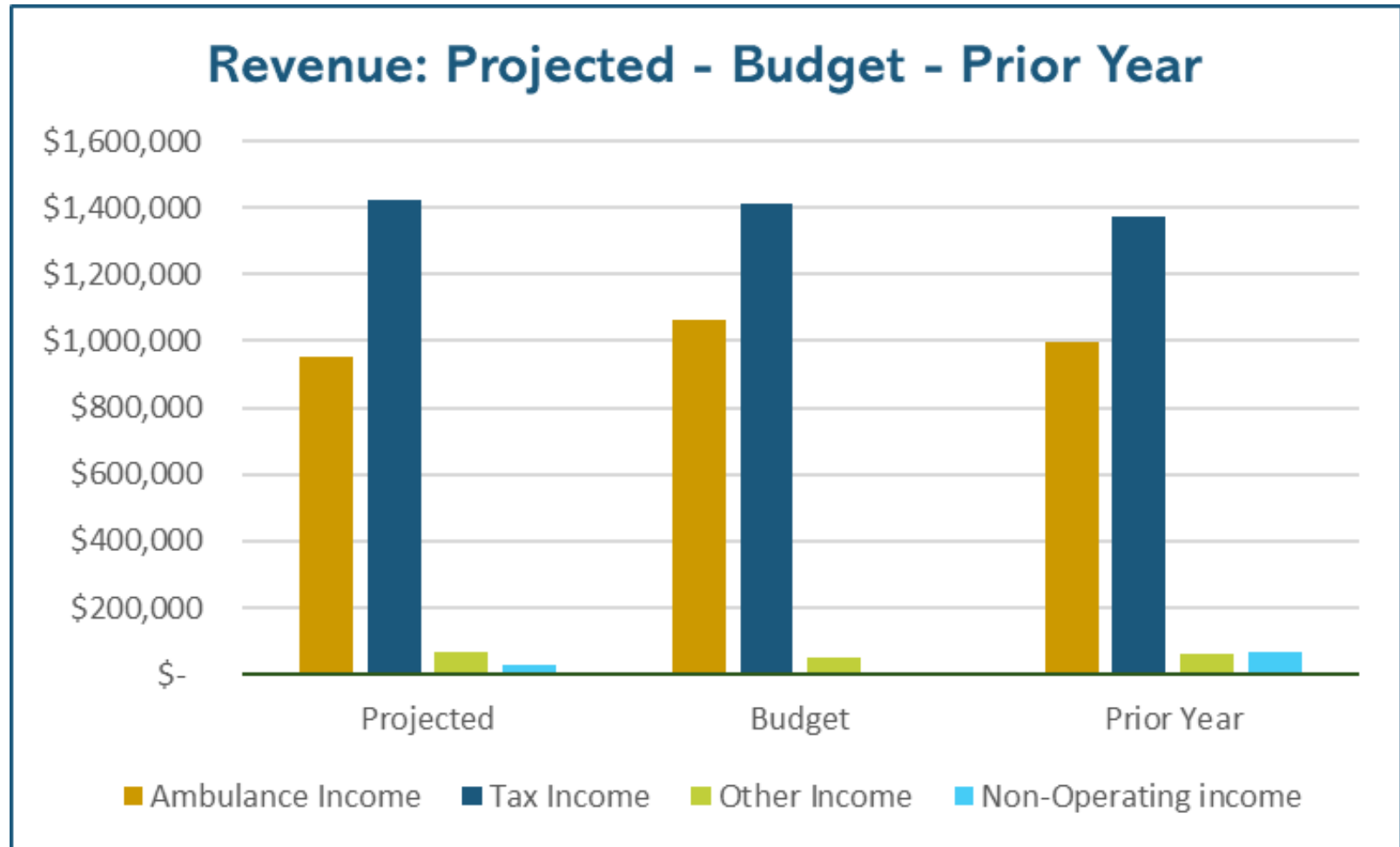
- The 2025-2026 projections are determined by adding the actual revenues and expenditures from the first seven months of the fiscal year (July to January) to the forecasted revenues and expenditures for the remaining five months (February through June).
- These projections are based on income and expenditure trends observed in the current and previous years, with adjustments made for expected seasonal timing differences.
- Today's review compares annual projections with the approved budget and explains any variances, whether increases or decreases.

2025-2026 Mid-Year Projections vs Budget

BUDGET CATEGORY	2025-2026 PROJECTED	2025-2026 BUDGET	BUDGET VARIANCE
Operating Revenue	\$2,444,990	\$2,524,222	(\$79,232)
Other Income	\$30,539	\$0	\$30,539
Operating Expense	\$2,472,845	\$2,510,846	\$38,001
Net Income	\$2,684	\$13,376	(\$10,692)

*Reference Attachment 1

Revenue Comparisons



Revenue Analysis

Ambulance Revenue Overview: (\$107,448) unfavorable to budget

Ambulance revenues are projected to decrease unfavorably by (\$107,448) (10% below budget) and by 4.5% compared to the previous year. The decrease is primarily due to the types of insurance reimbursement received for the transports provided. Currently, 84.6% of billed transport claims are reimbursed at an established rate (Medi-Cal, Medicare, and Medicare Advantage). This reimbursement rate is significantly lower than the actual cost of providing Advanced Life Support (ALS) transport services.

The Mid-Year Review projects a collection rate of 24%, 2% below the budgeted 26%.

In January 2026, the Board of Directors approved an increase in the fee schedule for transports beginning February 1, 2026. This increase will only affect traditional insurance payers but will not affect payers with established rates like Medi-Cal, Medicare, or Medicare Advantage plans, which constitute the majority of the service area's demographics.

General and Special Assessment Tax: \$10,860, favorable to the budget

In February 2026, the District received an updated countywide revenue estimate from the San Luis Obispo County Tax Collector's Office. The County estimates an additional \$10,860 for 2025-2026 and forecasts secured growth at 4%.

Revenue Analysis

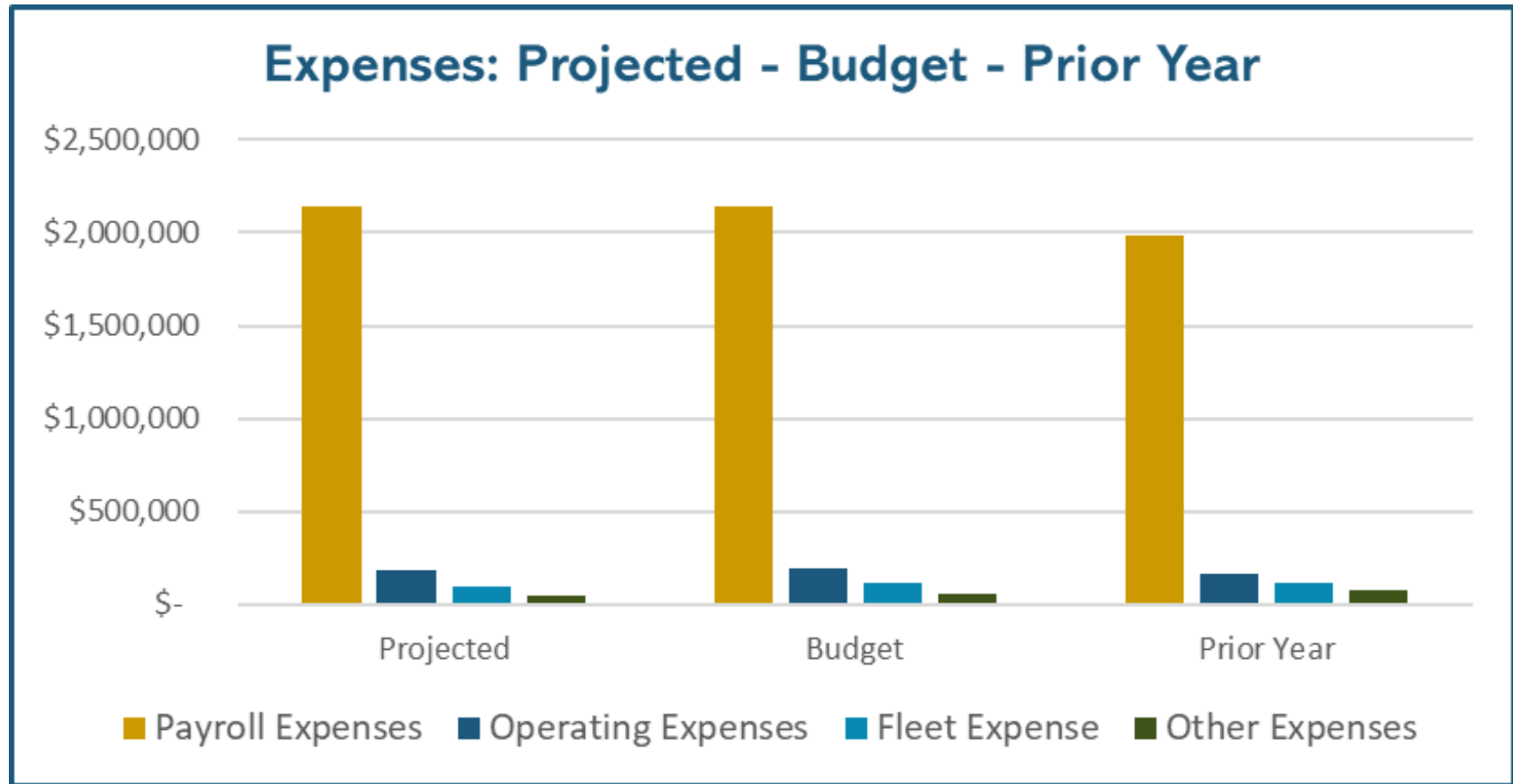
(Continued)

Other Income: \$17,355 favorable to budget

Variances include:

- Projections indicate a \$16,000 increase in the Monterey Contract revenue line item. Year-to-date, the District has seen a significant increase in dispatch calls to Monterey County compared with the prior year. On January 14, 2026, California Highway 1 through Big Sur fully reopened after a three-year closure caused by several landslides. The District maintains a contract to provide services in the South Coastal Zone of Monterey County.
- Grant Income and Sale of Asset Income are projected to increase by \$30,539. This favorable amount includes the surplus from the sale of Ambulance Unit 21, which brought in \$3,825, as well as annual community donations to the District's 501(c)(3) charitable trust. Current year's contributions will support the extended lease of four Zoll monitors. Additionally, District crew members received a grant from Project Heartbeat to purchase a Cascade Oxygen System. This new system will provide on-site oxygen storage, reducing the need for frequent orders.

Expenditure Comparisons



Operating Expenditure Analysis

Payroll Expenses: \$4,353 favorable to the budget

Variances include:

- Employee wages to be in line with the approved budget.
- Employee medical and dental expenses are (\$22,550) unfavorable compared to the budget, primarily due to an increase in premiums for coverage from CalPERS Health effective January 2026. Contributing factors include employee plan selection, age demographic, and dependent coverage.
- In the 2025-2026 fiscal year, the current employee composition in the CalPERS system mainly consists of (11) Safety PEPRA employees, (2) Safety CLASSIC employees, and (2) Miscellaneous (administrative) employees. The projected expenses for 2025-2026 indicate an increase in PERS Pension expenses, which is unfavorable to the budget by \$13,146.

Payroll expenses account for 87% of the District's operating budget.

Operating Expenditure Analysis (Continued)

Operating Expenses: \$26,252 favorable to budget

Given projected declines in ambulance revenues and ongoing monitoring of District cash flow, a concerted effort was made to track all operating expenditures.

Favorable Variances include:

- Contract Services, Fleet Expenses, Legal, Office Supplies, Utilities, PP-GEMT, and other Operating Expenses.

Unfavorable Variances include:

- Dues and subscriptions, this expense line item consists of: Streamline (website), QuickBooks (accounting), Microsoft Office subscriptions, LAFCO Annual Dues, the California Ambulance Association, and the California Special District Association. Each subscription has experienced a fee increase this fiscal year, resulting in a projected budget variance of (\$1,929).
- Facility maintenance has an unfavorable variance of (\$2,934) expenses, consisting of routine maintenance of the current facility and janitorial supplies.

Conclusion

The projected net operating income and grant income for Fiscal Year 2025-2026 suggests a positive net income of \$2,684 on an accrual basis. However, monthly payments associated with assets such as ambulance units and monitors are expected to decrease cash flow, resulting in a projected net loss of (\$95,044).

With minimal cash reserves, the District relies on insurance claim reimbursements and the timing of tax receipts throughout the year to support operations. Ongoing efforts focus on reducing expenses where possible and researching grants and other potential revenue sources, with the goal of building on the District's current reserves.

CAMBRIA COMMUNITY
HEALTHCARE DISTRICT





CAMBRIA COMMUNITY HEALTHCARE DISTRICT

BOARD AGENDA STAFF REPORT – 03

TO: Board of Directors
FROM: Tim Nurge, Operations Manager
DATE: February 24, 2026
DESCRIPTION: Key Performance Indicators (KPI) Biannual Report

RECOMMENDATION

No recommendations at this time.

FISCAL IMPACT

None at this time.

DISCUSSION

On a biannual basis, the Operations Manager presents the District's emergency first-responder Key Performance Indicators (KPI) related to quality, including identified metrics, objectives, success rate, notes, and current status of procedures. The attached report is based on the biannual period from July to December 2025.

During this performance period, the District saw improvements in some areas; however, there were also shortcomings in others. The success rate for IV Placement improved slightly from the first half of 2025. All other metrics stayed consistent for 12 Lead EKG Assessments, STEMI, TRAUMA, STROKE, and Cardiac Arrest Triage, although overall volume was down on these calls.

There was a 100% success rate for Advanced Airway Placement, specifically for Supraglottic Airways. The success rate of ETI intubation will be tracked as a new metric, alongside other metrics that the EMSA will review in 2026.

Trauma On Scene Time was extended on multiple calls due to extrication efforts. Most of these incidents involved mechanical falls rather than multi-system traumas. Our Return of Spontaneous Circulation (ROSC) rate improved to 50% this half, which is higher than the national average of 30%. When combined with the first half of 2025, this metric averages about 45%, exceeding the national standard. However, it's important to note that this figure is based on a small sample size and may fluctuate significantly from year to year.

Please see Attachment 1 for a more in-depth breakdown of KPI metrics and descriptors.

ATTACHMENT(S)

1. Key Performance Indicators for July-December 2025

BOARD ACTION

No Board action is required.

Metric	Objective	July-Dec 2025	Jan-June 2025	Notes	Status
Placement of IVs	IV Placed successfully on each attempt	98-Unsuccessful/246 Successful (71%)/344 Total	107-Unsuccessful/254 Successful (70%)/361 Total	IV Success rate compared to 82.7% County success rate.	
Advanced Airway: Intubation Success Rate	Intubation Attempts/Success Rate	N/A	N/A	Use of Advanced airways (ETI or SGA) is currently mandated for all Cardiac Arrest patients. Choice may depend on resources available or paramedic judgement	
Advance Airway: Supraglottic Airway Placement	Placement of Supraglottic airways including success rate for adult and pediatric	1/1.	2/2.	Use of Advanced airways (ETI or SGA) is currently mandated for all Cardiac Arrest patients. Choice may depend on resources available or paramedic judgement	
12 Lead +EKG Assessment with chest pain	Diagnostic procedure completed in the field to assess for possible heart attack. Shall be done on all suspected cardiac chest pain patients per SLOEMSA Procedure #707.	CP Suspected Cardiac-6/6- 12 Lead Performed/ CP Not Cardiac 12/18 12 Lead Performed	CP Suspected Cardiac-17/17- 12 Lead Performed/ CP Not Cardiac 13/19 12 Lead Performed	Metric Count is based on successful 12 lead performed on Chest Pain patients with a provider impression of "Chest Pain-Suspected Cardiac, or Chest Pain- Not Cardiac). Chest Pain-Not Cardiac may have justification for not performing 12 Lead EKG based on age, social circumstances, or trauma	
Specialty Care: STEMI	Specialty Care System metrics for STEMIs (heart attacks). This metric measures number of patients and 12 Lead EKG accurate recognition/treatment given.	2 STEMI EKG/2- STEMI ALERT and Correct Triage	8-STEMI EKG/8- STEMI ALERT and Correct Triage	Accurate treatment includes early and serial 12 Lead ECGs, appropriate medication administration, and appropriate Call In to the hospital (STEMI ALERT)	
Specialty Care: Trauma	Specialty Care System metrics for Trauma Alerts/Consultations. This metric measures number of patients and accurate categorization/treatment/transport	38 Trauma Consult or Alert/ 37 Appropriate Destination/Treatment	24 Trauma Consult or Alert/ 24 Appropriate Destination/Treatment	Accurate treatment includes proper trauma categorization, destination, Code 3 transport for Trauma Alerts	
Specialty Care: Stroke	Specialty Care System metrics for Stroke Alerts. This metric measures number of patients and accurate recognition/treatment given.	11/11.	14/14	Accurate treatment includes proper recognition of stroke criteria, obtaining blood glucose and 12 lead, and expedited on transport with last known normal < 6 hours.	
Specialty Care: Cardiac Arrest	Specialty Care System metrics for Cardiac Arrests. This metric measures number of patients who suffered Cardiac Arrest and accurate treatment/decisions were made.	2/2	6/6	Accurate treatment includes quick recognition/CPR initiation,advanced airway, appropriate medications/procedures rendered, proper recognition of obvious death, and appropriate transport and termination decisions. This does not include calls where the ambulance was cancelled on scene by Fire Crews who had already determined their were obvious signs of death.	
Specialty Care Trauma: On Scene Time	The recommended on scene time for true trauma patients is under 10 minutes to transport.Only Calls that met Step 1 or 2 Trauma Criteria were counted in 2025	<10 Minutes- 1, <15 Minutes- 0 20+ Minutes-5/ Total-6	<10 Minutes- 4, <15 Minutes- 4/ Total-8	Certain situations may require extrication or extra scene management. All calls with 20+ minute on scene time required extrication	
Specialty Care: Cardiac Arrest-Return of Spontaneous Circulation	Specialty Care System metrics for Cardiac Arrests. This metric measures number of patients who received ALS Cardiac Arrest Care and achieved Return of Spontaneous Circulation and were transported to the correct hospital.	1-ROSC,2-Working Cardiac Arrests	2-ROSC, 5-Working Cardiac Arrests	Accurate treatment includes quick recognition/CPR initiation, appropriate medications/procedures rendered,proper appropriate transport destinations. National Average: ~30%	