

### BACKGROUND

The COVID-19 Pandemic has become a historic public health challenge that is testing the capacity of health care delivery organizations to respond to escalating patient demand while also having to manage patient and staff safety. As one of the largest safety net providers in the Southern California, AltaMed is well-positioned to respond to the urgent needs of the COVID-19 pandemic. AltaMed provides care in communities that traditionally bear the burdens of health disparities and that have been disproportionately impacted by COVID-19. A significant number of the community members we care for are burdened with chronic disease, are at risk of becoming homeless or are currently homeless, and have substance use disorders. Collectively, these populations are disproportionately impacted by this pandemic, at high-risk of COVID-19 infection and have lower rates of recovery. Additionally, in our immigrant communities, low-income patients and underinsured patients are less likely to seek medical care due to cost. As such, our patient population represents some of the most vulnerable especially as it pertains to COVID-19.

### COVID-19 RESPONSE

As Southern California felt the impact of rapidly unfolding events such as school closings and safer-at-home orders in mid-March, AltaMed promptly mobilized to best respond and support not only its 230,000 patients, but also the greater community it serves—predominantly low-income, immigrant, communities of color in Los Angeles and Orange Counties. Led by Dr. Sherril Brown, AltaMed’s Infection Prevention Medical Director, a COVID-19 action plan to shift the way health care is delivered was quickly developed and deployed. In order for the organization to be able respond effectively to COVID-19, it was determined that an approach was needed to ensure individuals with upper respiratory symptoms could be triaged and treated quickly without exposing others to possible infection. The team was able to rapidly develop infrastructure for the delivery of alternative medical care in response to the COVID-19 pandemic. The result was the implementation of safe, outdoor evaluation/ community testing sites in Los Angeles and Orange Counties for AltaMed patients and non-patients presenting symptoms with upper respiratory infection, one of the main COVID-19 symptoms. These centers provide community-based testing and evaluation for both AltaMed patients and non-patients in a “drive-through” setting. Our testing efforts has been imperative to maintain the overall health system capacity by allowing AltaMed care for individuals that otherwise could have inundated the hospital system.

### PERFORMANCE UPDATE (REPORTING PERIOD 3/15/2020 – 7/20/2020)

During this reporting period, AltaMed launched nine outdoor Evaluation & Testing Centers to meet the need of underserved, high-risk of infection communities across Los Angeles and Orange Counties. Three of our nine evaluation sites were located in Southeast Los Angeles (SELA) region. As of July 20<sup>th</sup>, AltaMed's evaluation centers in SELA have been able to complete **20,798** medical assessments serving City of Vernon residents, neighboring community members and individuals working in the city. The tables below show demographics breakdown for community members that have turned to AltaMed as a trusted Medical Care provider during this pandemic.

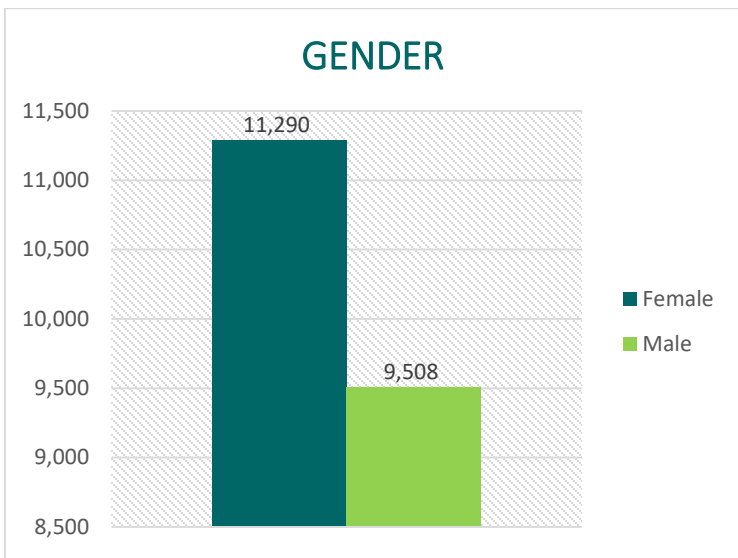
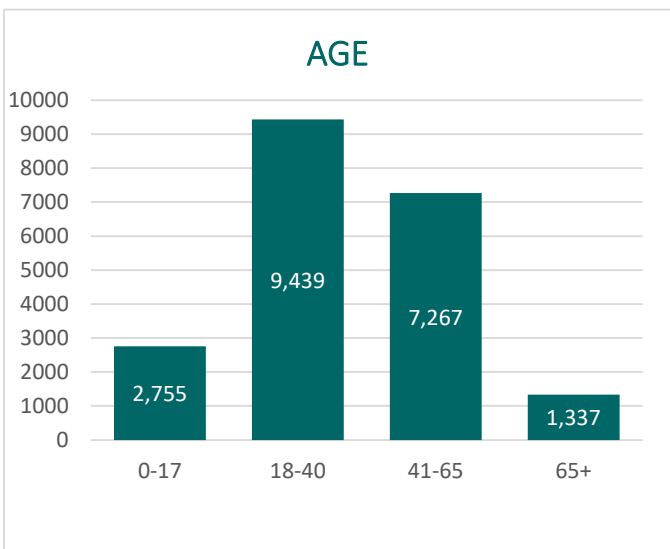
While the numbers above show significant wins for AltaMed and the health of our communities, the operational cost of these programs has been a huge undertaking. "One of the key things that I am concerned about, when government is making big decisions about where resources should go, those resources are not coming down to our communities, even though these are the individuals categorized as essential workers" says Dr. Efrain Talamantes, AltaMed's Chief Operating Officer. Many health centers have had to take on the burden of expenses caused by the COVID-19 pandemic. The three main areas where AltaMed has incurred significant unplanned expenses are:

1. **Building capacity in temporary drive-up testing centers** – During this reporting period, AltaMed incurred start up cost to operate and maintain outdoor testing centers, open for evening and weekend evaluations; Some of the most notable expenses in this category has been outdoor equipment rentals, security, portable technology equipment, signage, etc.
2. **Increased health center capacity and personnel levels to support coronavirus testing, clinical and operational needs directly related to testing** – Increased capacity by redeploying clinical staff to evaluation centers with a high testing need including nursing staff to assess and conduct tests and physicians to provide onsite oversight and testing services;
3. **Purchased and distributed personal protective equipment and supplies to provide a safe testing environment for staff and patients** – Supplies include: N95 masks, Pediatric masks, Face Shields, PPE gowns, gloves, shoe covers, bouffants, hand sanitizer, disinfectants, and thermometers, etc.

AltaMed is incredibly grateful to City of Vernon for their financial support during this worldwide crisis. The awarded funds of \$250,000 have been utilized to offset over 2 million dollars of unplanned expenditures (see breakdown below) and will allow us to continue to serve Southeast Los Angeles community members in need of testing and/or treatment for COVID-19.

**DEMOGRAPHICS**

ETHNICITY	QUANTITY
Hispanic or Latino	12,738
White	6,341
Asian	783
Black or African American	165
American Indian or Alaska Native	9
Native Hawaiian/Other Pacific Islander	26
Other Multi Racial	736
<b>TOTAL</b>	<b>20,798</b>



## EXPENDITURES

AltaMed Health Services Corporation Statement of Revenues and Expenditures				
From 3/1/2020 Through 6/30/2020				
	Goodrich Commerce Clinic	South Gate Clinic	Corporate-2035 Camfield	Total
Expenditures				
Personnel				
Salaries	487,881.47	420,329.82	245,728.57	1,153,939.86
Payroll Taxes & Fringe Benefits	114,973.30	95,434.45	59,688.85	270,096.60
Contract Labor	<u>2,862.24</u>	<u>0.00</u>	<u>22,210.00</u>	<u>25,072.24</u>
Total Personnel	605,717.01	515,764.27	327,627.42	1,449,108.70
Professional Fees				
Administrative Services	25,763.25	10,892.13	28,747.41	65,402.79
Medical Services	<u>23,630.22</u>	<u>1,096.54</u>	<u>5.90</u>	<u>24,732.66</u>
Total Professional Fees	49,393.47	11,988.67	28,753.31	90,135.45
Operating Expenses				
Equipment Rental, R & M	48,456.17	48,284.18	41,030.06	137,770.41
Medical/Patient Supplies	31,988.31	21,405.14	19,227.13	72,620.58
Office/Facility/Other Supplies	69,756.55	50,352.40	35,771.68	155,880.63
Insurance	9,150.31	10,787.88	5,397.31	25,335.50
Utilities & Facilities Expense	3,679.55	3,679.55	3,679.55	11,038.65
Telephone	225.00	135.00	0.00	360.00
Staff Development	0.00	71.76	374.15	445.91
Postage/Printing	0.00	1,791.56	0.00	1,791.56
Equipment & Software Purchase	10,068.61	10,068.61	5,791.56	25,928.78
Other Expenses	<u>210.63</u>	<u>242.72</u>	<u>80.44</u>	<u>533.79</u>
Total Operating Expenses	173,535.13	146,818.80	111,351.88	431,705.81
Corporate Direct & Indirect				
Corporate Indirect	<u>96,170.31</u>	<u>77,581.43</u>	<u>52,321.60</u>	<u>226,073.34</u>
Total Corporate Direct & Indirect	<u>96,170.31</u>	<u>77,581.43</u>	<u>52,321.60</u>	<u>226,073.34</u>
Total Expenditures	<u>924,815.92</u>	<u>752,153.17</u>	<u>520,054.21</u>	<u>2,197,023.30</u>
Net Income (Loss)	<u>(924,815.92)</u>	<u>(752,153.17)</u>	<u>(520,054.21)</u>	<u>(2,197,023.30)</u>