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pattersonhc.org

Mission Statement: Hospital District #6 provides high quality, patient, and family centered health and wellness services in partnership with our communities.

HD#6 HOSPITAL BOARD REGULAR MEETING February 27, 2025 - 5:15 p.m. - Patterson Health Center, Large Conference Room

PRESENT:

PHC

Board of Directors

Jan Lanie, Amy Walker, Stan Wedman, Kara Bello, Tim Penner, Pam Fallis, Kristin Stoughton Sarah Teaff, CEO; Lori Allen, COO; Sandra Owen, CFO; Kim Barwick, HR Director Guests

CALL TO ORDER: Lanie called the meeting to order at 5:15 p.m.

PUBLIC COMMENTS: None

BOARD EDUCATION or PRESENTATIONS: None

APPROVAL OF MINUTES: Minutes of January 23, 2025, regular board meeting was presented for approval. Motion to approve by Bello; seconded by Wedman; motion carried unanimously.

DEPARTMENT REPORTS, POLICY REVIEW & APPROVAL: Nuclear Medicine biennial review of policies and procedures were presented. Changes were minor and noted on the cover page.

340B policies were presented for review and approval. A mock audit resulted in a couple of minor changes and two new policies which are: Lost Charge Management and Emergency Preparedness.

QAPI Plan - There are no changes to the QAPI Plan itself; however, the initiatives for the year have been updated to align with CMS's latest updates and priorities

Nuclear Medicine policies and procedures, 340B policies and the QAPI Plan were approved as presented. Motion by Walker; seconded by Fallis; motion carried unanimously.

MEDICAL STAFF AND CREDENTIALING REPORT:

The Executive Medical Staff met on February 26, 2025, to consider credentialing applications from:

- New appointments None
- Reappointments -
 - Daren Badura, PA (Allied Health)
 - Trent Blackwill, CRNA (Allied Health)
 - Jessica Grigoreva, APRN (Allied Health)
 - Timothy Hanson, CRNA (Allied Health)
 - Susan Huynh, DO (Courtesy Internal Medicine)
 - Douglas Simon, PA (Allied Health)
 - Jason Werth, CRNA (Allied Health)
 - Melissa Whitney, PA (Allied Health)
 - Dany Zayour, MD (Consulting Endocrinology/Internal Medicine)
- Resignations:
 - Xavier Garcia, MD

The applications were recommended for Board approval by the Executive Medical Staff. The board approved the medical staff applications and privileges as presented. Motion by Bello, seconded by Wedman. Motion carried unanimously

OPERATIONS REPORT:

Quality/Infection Control: None

COO:

- A mock audit of the 340B program was conducted. There were a few minor policy changes recommended along with the addition of two new policies. Overall, the program is in good shape.
- Several engineering firms have been contacted regarding the lagoon project. Those interested will
 conduct an initial site visit at no cost. Following their visit, cost estimates for the best path forward
 to address issues with the lagoon will be provided. Any plan selected will require KDHE approval.
- The PHC building has settled and there are some cracks to the concrete on the north end. A longterm fix will be necessary and is being researched.
- The inflatable heart was demonstrated at Attica Elementary School last week and will be at Anthony
 this Friday. Additional visits are planned for Argonia, Norwich, and Harper. The inflatable heart was
 fully funded through a grant from the Kansas Health Foundation, which Kristen Birket successfully
 secured.

CEO:

- Patterson Health Center was selected as one of the top 100 critical access hospitals. Our ER was also chosen for the Women's Choice Award.
- The Harper County EMS transfer policy has been provided to PHC. PHC staff have been made aware of the policy.
- Ongoing financial and budget discussions continue with department managers to ensure financial stability and alignment with strategic goals.
- Elizabeth Caudillo, P.A., in the Conway Springs Clinic has renewed her contract. Renee Pence has been engaged to provide clinic availability on days when the clinic is minimally staffed. She's tentatively scheduled to begin in May 2025. Pence will also shadow the hospitalists to gain experience.
- The new Dexa scanner is being installed. Staff training is underway after which patients will be scheduled for the service.
- A letter to the public regarding financial challenges experienced by a nearby hospital was reviewed to provide insight into the financial realities of rural healthcare.
- The Hospital Charge Master has not been updated since 2019. Common practice and industry standard suggests an analysis every three to five years. We are seeking quotes for an external charge master review.
- Marketing strategies were discussed.

FINANCIAL STATEMENTS:

Owen reported on the January 2025 Financials. January's activity in cash accounts was reviewed, that included payments received and expenses paid out. Payments received from insurance and patients were \$1,470,049.15. Additional revenue included tax revenue payments from Harper and Kingman Counties, reimbursement from Harper County Health Foundation and a SHIP Grant. January included three payrolls paid. Days Cash on Hand increased to 155 days. Patient Accounts Receivable decreased with a total AR balance of \$3,104,996 and AR Days at 35.75. Gross Patient Revenue for January was \$2,000,300. Swingbed revenue increased by \$56,085 with 101 patient days. Outpatient Revenue saw a decrease in revenue of 3% compared to December 2024. Total Operating Revenue had a YTD decrease of 7% or \$135,529.00 compared to December 2024. Due to the extreme January weather, clinics and several outpatient departments were either closed or closed early that impacted Total Operating Revenues for the month. Total Operating

Expenses decreased for the month with total expenses of \$2,155,293. Net Loss of \$334,214 was reported for the month of January 2025.

Accounts payable for January were \$2,204,623.03. Motion by Penner seconded by Walker to approve accounts payable. Motion carried unanimously.

HARPER COUNTY HEALTH FOUNDATION (HCHF): Members are focusing on IRS regulations relevant to the foundation's designation.

UNFINISHED BUSINESS: Bylaws –The Hospital Bylaws amendment was revisited which changes the wording for the annual meeting "...to be held at 7pm on a date in May" to "...in the month of May at a suitable time and location in Harper County". Members reviewed the bylaw amendment at the January 2025 regular meeting. As provided in the bylaws, action to approve the amendment was tabled until tonight's regular meeting. Motion to adopt the bylaws amendment by Lanie, seconded by Bello. Motion carried unanimously.

NEW BUSINESS: The Risk Management Plan has been updated to reflect a change in personnel to remove Jonathan Kalorik as the Risk Manager and to appoint Amber Speer in his place. No other modifications were made to the plan. The Board appointed Amber Speer as the Risk Manager/Infection Control Nurse and approved the updated Risk Management Plan. Motion by Penner, seconded by Fallis. Motion carried unanimously.

EXECUTIVE SESSION: At 6:30 p.m. the hospital board entered executive session for 10 minutes to discuss non-elected personnel. Open session to resume at 6:40 p.m. Motion by Lanie, seconded by Penner. Motion carried unanimously. Open session resumed at 6:40pm at which time a motion was made to extend the executive session by 10 minutes. Open session to resume at 6:50 p.m. Motion by Lanie, seconded by Walker. Motion carried unanimously. Open session resumed at 6:50 p.m. at which time a motion was made to extend the executive session by 10 minutes. Open session to resume at 7:00 p.m. Motion by Walker, seconded by Penner. Motion carried unanimously. Open session resumed at 7:00 p.m. No action was taken while in executive session.

ADJOURNMENT: There was no further business, and the meeting adjourned to 7:00 p.m. Motion made by Penner; seconded by Lanie. Motion carried unanimously.

Kara Bello, Secretary

Approved by the Board $\frac{3}{27}$

(Date)