RANGELY DISTRICT HOSPITAL

BOARD OF DIRECTORS MEETING

March 30, 2017

BOARD MEMBERS PRESENT

John Payne, Chairman Jason Kurrasch, Vice Chairman Nathaniel Polley, Secretary/Treasurer Marques L Jones, Director Michelle Huber, Director (not present)

OTHERS PRESENT

Nick Goshe III, CEO James Dillon, CFO Bernie Rice, CCO Abigail R Urish MD, COS (arrived at 6:20pm) Jodi Dillon, Business Office Manager

I. WELCOME/CALL TO ORDER

A quorum being present, this regular meeting of the Rangely Hospital District Board of Directors was called to order at 6:00p.m. by John Payne, Chairman of the Board. It was noted Michelle Huber was absent

II. APPROVAL OF MINUTES

A. Minutes of the Rangely District Hospital Board of Director's meeting dated February 23, 2017 were presented for review. A motion was made and seconded to accept the meeting minutes as presented. The motion carried unanimously. **ACTION/TAKEN/CLOSED)**

III. PUBLIC FORUM

- **A.** Correspondence: Karen Robie Wilder sent a card thanking the board and staff for the flowers sent to their family during this time of loss.
- **B.** General Public: There was no one present from the general public.

IV. MEDICAL STAFF REPORT

A. Review of Medical Staff Report (Accepted): Minutes of the March 9th, 2017 Medical Staff Report were presented for review. A motion was made and seconded to approve the report as presented. The motion carried unanimously. (ACTION TAKEN/CLOSED)

- **B.** It was recommended to re-appoint Scott Glasser MD, Melissa Lipton MD, & Eric Lyders MD, from Diversified Radiology, 2 year reappointments as Consulting Staff. A motion was made and seconded. The motion carried unanimously. (ACTION TAKEN/CLOSED)
- C. It was recommended to appoint 19 Radiologists for their initial appointment to Consulting Staff from Diversified Radiology. Names presented were: Jonathan Brandon, MD; Garret Gannuch, MD; Stephen George, MD; Sangeeta Grewal, MD; Richard Grzybowski, DO; Steven Gunberg, MD; Peder Horner, MD; Robert Johnston, MD; Jennifer Kemp, MD; Craig Kornbluth, MD; Sonali Mehandru, MD; Lisa Niebergall, MD; Michael Oakes, MD; Eric Robbins, MD; Bradford Robinson, MD; Marc Sarti, MD; Jerome Schroeder, MD; Adam Stibbe, MD; and Janice Ugale, MD. 2 year initial appointment as Consulting Staff. A motion was made and seconded. The motion carried unanimously. (ACTION TAKEN/CLOSED)

V. COMPLIANCE REPORT

- **A. EMR Update:** EMR is ahead of schedule. Our system builds are going great, we are looking at Point Click Care, a system secondary for LTC, Assisted Living, and Home health departments. We are doing the cost analysis and work arounds in Athena to determine which system will work best and is more cost effective. We will keep you posted of our progress in this area.
- **B.** End of Life Options Act: Wendi Gillard has worked on our facility End of Life Options policy. We recently received it back from Legal and made a few more edits and it is now in the form of what you see before you. This policy protects our mission, our physicians and the facility. Sharma and Wendi have done an outstanding job on getting this implemented. The policy is now downloaded onto Policy Stat and is in the approval process. It will be adopted by hospital upon signatures.
- C. Ambulance Update: Our new ambulance has arrived. This vehicle was acquired by grants. Shanna is in the process of getting it checked out, insured and certified to begin service. Board members were given the opportunity to tour the new MS1 ambulance prior to the meeting. Bernie announced that Shanna has really gone the extra mile in acquiring these grant funds and he appreciates her efforts.
- **D.** Bernie has a Personnel Issue update in executive session.

VI. FINANCIAL REPORTS

A. Presentation of February's Financial Report: The gross income remains significantly higher than expected due to the recognition of greater than average Medicare contractuals in January. This figure is always extremely variable within the year, but will cumulatively align with expectations as the year continues. In February we paid \$186,124 for the new ambulance. In March we received the \$150,000 CCITF grant and are waiting for state

grant payments which will cover the purchase of the new ambulance and equipment in full. Stats are mixed and remain relatively flat. Revenue is 1% less than budget but 9% better than last year. Gross profit is 30% better than last year and 12% better than budget due to higher than average Medicare payments, as mentioned above. Total Expenses are 1% more than budget but 7% less than last year. Payroll expense is 8% above budget and even with last year. Year to date Net Income is \$309,092 which is more than the budgeted amount of \$83,320 and last year which was (\$401,361) mostly due to the positive Gross Profit variance. Cash balances are as expected given the large January Medicare payment and the ambulance purchase. The check register for February was reviewed. A motion was made and seconded to accept the February 2017 Financial Report as presented. The motion carried unanimously. (ACTION TAKEN/CLOSED)

VII. OLD BUSINESS

- **A. Health Fair:** Our Health Fair is this Friday-Saturday. Board members were handed out their t-shirts for the event. As in years past we will have a table near the front for board members to greet people. John's uncle has passed away and he will not be able to attend. Jason will not be in attendance either. Marques and Nate may possibly be there, unless they are called out to work. Michelle will be there as she has a booth for Mental Health.
- **B.** CHA Rural Health Conference: The CHA Rural Conference and trip to the Capitol to defend the HPF funds went well. At the Capitol luncheon I was introduced with a four minute clip taken from the video the Colorado Rural Health Center did on us last year. Then I had the floor for about 4 minutes or so. I think overall this went well. I understand there were at least 20 legislatures in the audience. Afterwards one of the republicans asked CHA that I speak directly to a working section at the Capitol in the coming weeks. I have not heard any more about this at the time of this writing but I believe I was well received. The people I spoke to I tried to make a point of not making it political only that this is what we are facing today.

VIII. NEW BUSINESS

- **A. Board Presentation:** We held an all staff meeting putting on the presentation we provided to the board last month. This presentation was held at noon and 6pm on March 16th. Between both meetings we had at least 100 employees attend. I think support seemed strong and while the information was scary I think people for the most part appreciated the information. We are scheduled to present this presentation again at the Community Networking Meeting April 25th at noon at CNCC.
- **B.** Clinic & Pharmacy Hours: Starting April 3rd we will have new after-hours rules for the clinic and pharmacy. Basically it doesn't make sense to have people sitting around doing nothing if there are no after-hour's patients and on the flip side we don't want to turn people away during cold and flu season. The plan we have come up with addresses both. The clinic will see patients in the after-hour's clinic until the last patient is seen and then will go home. So they could be open past seven but this is a rarity. If by six there are no waiting patients they will close. The pharmacy will stay open until 6pm unless the clinic is still seeing patients then they will stay until the last patient is seen matching the clinic hours.

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C. CEO Evaluation Due: It doesn't seem possible but another year has rolled along and it is time for my evaluation again. Also doesn't seem possible but June 1st is my eight year anniversary as being the CEO here. As fast as CEO's turn over it is rare to have the same one for this long. According to Steven Summer whom is the president of the Colorado Hospital Association (CHA) he believes there are only two CEOs in the state that have been in their current position longer than me at present. There are close to 90 facilities within the CHA. Anyhow this year, like most years has seen a great deal of strife. This year has seen us double down on cost controls even more seriously than in years past as well as take steps to prepare for difficult financial times ahead. Internally morale has taken a hit with the cuts and around town I sense morale hit the lowest I have seen since arriving in 2008.

On a positive note, having consistent providers in the clinic all year I believe was a success. Losing Aguirre hurt but with Dr. Urish, Sutton, and Shelby we have a great group. Overall we had great success keeping volumes up in the face of rising deductibles and copays, as well as the shrinking population, all working against us.

IX. BUSINESS FROM THE FLOOR

A. No business from the floor was presented.

X. <u>EXECUTIVE SESSION</u>

A. A motion was made and seconded to enter Executive Session at 6:53 p.m. per C.R.S. §24-6-402(4) (f) "personnel matters." The motion was approved unanimously. (ACTION TAKEN/CLOSED)

XI. ADJOURNMENT

A motion was made and seconded to adjourn this regular meeting of the Rangely Hospital District Board of Directors at 7:08 p.m. Motion approved. (ACTION TAKEN/CLOSED)

Submitted By:	
Nathaniel Polley, Secretary/Treasurer, Board of Directors	Date:
Cynthia Stults Executive Assistant	Date: