

# NOTICE OF REGULAR BOARD MEETING OF THE UPPER SAN JUAN HEALTH SERVICE DISTRICT d/b/a PAGOSA SPRINGS MEDICAL CENTER

Tuesday, July 28, 2020, at 5:30 PM

# BOARD ROOM LIMITED TO 10 PERSONS SO IN-PERSON MEETING IS LIMITED TO BOARD MEMBERS, CLERK TO BOARD, AND CEO, WITH ROTATING PRESENCE BY CFO, COO, CAO AND COS

# ALL OTHERS (PUBLIC OR OTHER PSMC EMPLOYEES) MAY ATTEND VIA ZOOM

Please use this link to join the meeting: <a href="https://zoom.us/j/96904926293">https://zoom.us/j/96904926293</a> or telephone (346) 248-7799 or (669) 900-6833

Zoom Meeting ID: **969 0492 6293** 

#### **AGENDA**

- 1) CALL TO ORDER; ADMINISTRATIVE MATTERS OF THE BOARD
  - a) Confirmation of quorum
  - b) Board member self-disclosure of actual, potential or perceived conflicts of interest
  - c) Approval of the Agenda (and changes, if any)
- 2) PUBLIC COMMENT (This is an opportunity for the public to make comment and/or address USJHSD Board. Persons wishing to address the Board need to notify the Clerk to the Board, Heather Thomas, prior to the start of the meeting. All public comments shall be limited to matters under the jurisdiction of the Board and shall be expressly limited to three (3) minutes per person. The Board is not required to respond to or discuss public comments. No action will be taken at this meeting on public comments.)
- 3) PRESENTATION: COVID-19
- 4) REPORTS
  - a) Oral Reports (may be accompanied by a written report)
    - i) Chair Report

Chair Greg Schulte

ii) CEO Report

Dr. Rhonda Webb

iii) Committee Reports

(1) Executive Committee
 (2) Foundation Committee
 (3) Facilities Committee
 (4) Strategic Planning Committee
 (5) Finance Committee & Report
 Chair Schulte and V.Chair Mees
 Dir. Mees, Dir. Dr. Pruitt and CEO R. Webb
 Dir. Mees, Dir. Daniels, and COO K.Douglas
 Dir. Schulte, Dir. Cox and CEO R. Webb
 Dir. Campbell, Dir. Ziegler and CFO C. Keplinger

b) Written Reports (no oral report unless the Board has questions)

i) Operations Report
 ii) Medical Staff Report
 COO-CNO, Kathee Douglas
 Chief of Staff, Dr. Ralph Battels

## 5) EXECUTIVE SESSION

Pursuant to C.R.S. Section 24-6-402(4)(f), there will be an executive session for personnel matters regarding renewal of the CEO's contract and the CEO was previously informed of this topic.

Further, the Board reserves the right to meet in executive session for any other purpose allowed and topic announced at open session of the meeting, in accordance with C.R.S. Section 24-6-402(4).

## 6) DECISION AGENDA

- a) Consideration of Resolution 2020-14 regarding negotiation of the CEO's contract.
- b) Consideration of Resolution 2020-15 regarding approval of MRI lease/purchase.
- c) <u>Consideration of Resolution 2020-16</u> regarding approval of infection control renovation to add 2 negative air pressure rooms in the ED at a cost of \$119,000.
- 7) **CONSENT AGENDA** (The Consent Agenda is intended to allow Board approval, by a single motion, of matters that are considered routine. There will be no separate discussion of Consent Agenda matters unless requested.)
  - a) Approval of Board Member absences:
    - i) Regular meeting of 07/28/2020
  - b) Approval of Minutes for the following meeting(s):
    - i) Regular meeting of: 06/23/2020
  - c) Approval of Medical Staff report recommendations for new or renewal of provider privileges.

## 8) OTHER BUSINESS

#### 9) ADJOURN



#### **REPORT** TO BOARD OF DIRECTORS FROM THE FACILITIES COMMITTEE

The Facilities Committee met on July 20<sup>th</sup>. The Committee includes Vice-Chair Matt Mees, Dir. Karin Daniels, CEO/CMO Rhonda Webb, COO/CNO Kathee Douglas, Plant Ops Manager Adam Miller; also present were CFO Chelle Keplinger and CAO Ann Bruzzese.

The Committee received a report on the HVAC project (which is proceeding per prior approval of the Board) as well as other proposed projects to improve PSMC's ability to improve infection control and manage COVID-19 healthcare. A summary, of the projects and Committee actions, is set forth below.

## 1. HVAC and Infection Control for the Emergency Department

- a. The HVAC renovation is proceeding on schedule. Highlights include that demo on the roof begins in August. The OR is anticipated to be under construction for a number of days in September.
- b. Staff recommends that to improve infection control at PSMC and to establish appropriate infection management for an infectious patient on a vent, PSMC should renovate Trauma 1 and 2 in the ED to negative air pressure. The cost of the work is \$119,035.
- c. RECOMMENDATION: The Facilities Committee recommends: for the Board to approve staff immediately proceeding with this project; the Board Finance Committee had no objection to the expenditure of funds for this project.
- d. *Note:* PSMC is pursuing a DOLA grant opportunity available to special districts to reimburse for certain COVID-19 matters; this grant does not require matching funds. The Facilities Committee recommends completing this Project regardless of whether PSMC is awarded the reimbursement grant.

#### 2. Infection Control for the Outpatient Clinic

- a. Create a direct entrance and 2 infection control outpatient treatment rooms in the Outpatient Clinic. The scope includes mostly HVAC work, replace carpet with vinyl, doors, sidewalk. The quote is \$87,083.
- b. NOTIFYING OF ACTION: The Facilities Committee approved proceeding with this project. Given that the project is less than \$100,000, no Board approval is needed. The Board Finance Committee had no objection to the expenditure of funds for this project.

#### 3. Infection Control for the Front Entrance Vestibule

- a. Committee reviewed the latest design that would allow the tent screening staff to move into the vestibule by the time Fall cold weather is here. The design maintains the front door entrance as is but adds an "air curtain" and a desk on southern end. An additional exit door would be added to the south side of the vestibule. Waiting for updated quote. Timing soon before fall cold weather and take advantage of GE on site.
- b. Committee took no action yet.

#### 4. Oxygen System

- a. Issue of needing a long-term solution for additional oxygen supply. There is consideration to bulk storage or oxygen generation. Still have issues to vet and would like consultant to advise on regulatory and other issues associated with oxygen generation. If we went with oxygen generation, we would be first in continental US to do this (this is used in Alaska, Hawaii and Guam). In terms of location one option is zircon with plumbing.
- b. NOTIFYING OF ACTION: Facilities Committee approved retaining a consultant to advise on the issue and how to proceed.

#### 5. MRI

- a. Location of a new MRI modular would be same area as the current trailer. Issues to resolve: power, water, canopy, lift/ramp, fire protection. Power needed is double the power we usually have transformer may be able to supply separate feed. At this time all issues seem solvable and no known issues with the Town.
- b. Facilities Committee is informed of the potential MRI project and has no issues.

#### 6. Ground covering

- a. Remove coconut husk mulch away from the building; take rocks from the roof and buy some more for ground covering. This will help mitigate the fire hazard that seems apparent from the mulch and visitors disposing of cigarettes in it.
- b. NOTIFYING OF ACTION: The Facilities Committee approved proceeding with this project. Given that the project is less than \$100,000, no Board approval is needed but will inform the Finance Committee and the Board; the Board Finance Committee had no objection to the expenditure of funds for this project.



# **REPORT** TO BOARD OF DIRECTORS FROM THE STRATEGIC PLANNING COMMITTEE

The Facilities Committee met on July 21<sup>st</sup>, the Committee Board members are Chair Greg Schulte and Dir. Jason Cox and also present were CEO/CMO Dr. Rhonda Webb, COO/CNO Kathee Douglas, CFO Chelle Keplinger and CAO Ann Bruzzese.

The Committee discussed process, guiding principles and possible goals. The Committee is in the early stages of work and anticipates providing written progress, for discussion at the Board, in the Fall.



# Finance Committee & CFO Report for the USJHSD Board Meeting on July 22, 2020

This report provides a summary of the discussions of the Board's Finance Committee that met on July 22, 2020.

## **June Financials:**

The Finance Committee reviewed the June financials. PSMC had a strong bottom line for June ending the month with net income of \$683,113. Highlights that contributed to the strong month included:

- 1. increasing volumes in all departments -- most notably in lab, radiology, surgery, oncology and infusion;
- 2. reduced contractual allowances which results from a change in how PSMC reserves for payer contractuals (this change follows a recommendation of the CFO approved by the auditor); and
- 3. strong cash collections that have resulted in the accounts receivable decreasing from February month-end of 11.3 million to June month-end of 9 million.

PSMC continues to manage expenses well with overall expenses almost at budget and the increased cost for pandemic supply being offset by decreased expenses in other areas. PSMC makes its semi-annual bond payments in June so cash dipped to 65 days but days of cash continues to be a strong position in light of the circumstances of 2020.

Given the strong month, PSMC did not apply any CARES Act Stimulus funds -- the remainder of the unapplied funds are on the balance sheet as a payable. This process is consistent with the limited guidance available on the use of the funds. PSMC and the auditor continue to track guidance on the use of CARES Act Stimulus funds.

<u>Medicare Advance</u>: The Finance Committee discussed the advance PSMC received from Medicare in April – the advance \$4,225,031.95 is essentially a loan against the future sums Medicare expects to owe the hospital for delivery of care. Medicare is expected to begin deducting from this advance in August.

<u>Payroll Protection Program</u>: As of the July Finance Committee meeting, the federal government online application for forgiveness for the Payroll Protection Program ("PPP") was not yet available (the federal government's delay appears to be due to recent changes of the federal government to allow forgiveness to small businesses). PSMC will apply for loan forgiveness as soon as the new application is available.

<u>Facilities Projects</u>: The Finance Committee received an overview of the projects being evaluated and/or recommended by the Board's Facilities Committee. The Finance Committee had no concerns/objections to the Facilities Committee recommendations set forth in the Facilities Committee report.

USJHSD Finance Committee Report USJHSD Board Packet 07-28-2020

MRI: The Finance Committee received a spreadsheet summary of the latest MRI vendor proposal and the reasons for the recommendation for the Siemens Magnetom Altea, modular with service and payment terms for six years at a total cost of \$2,085,033.60 (\$28,958.80 per month for 72 months). The Finance Committee noted that proceeding with the purchase of the MRI (over the current perpetual lease) continues to be good for patient care and financially responsible as the increased monthly cost for six years will be recouped with 2 additional studies per month.

<u>Finance Committee Recommendations</u>: The Finance Committee made the following recommendations to the Board of Directors:

- 1. For the Board to accept the June 2020 financials as presented;
- 2. For the Board to approve purchase of the Siemens Magnetom Altea MRI with modular and service and payment terms over 72 months.



# FINANCIAL PRESENTATION YTD JUNE 2020

# **Summary of Financials**

May

Gross Revenue

\$ 4,486,650

Net Revenue

\$ 1,892,329

Expenses

\$ 2,928,313

Grants, 340B and Tax Revenue

\$ 1,522,188

Grants and 340B and Stimulus

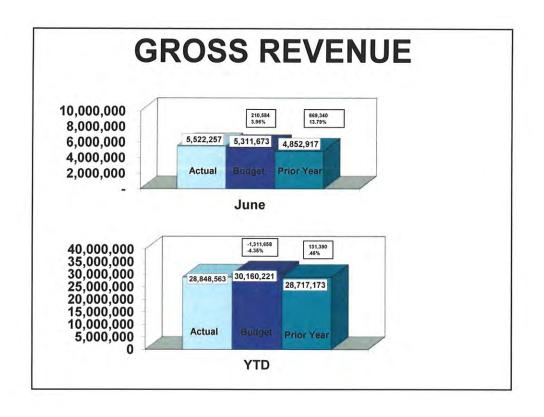
\$ 1,260,653

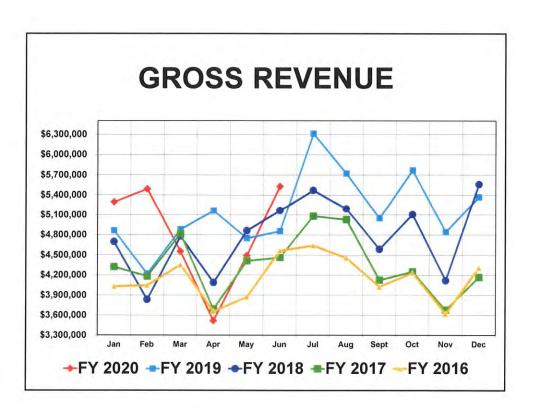
Tax Revenue

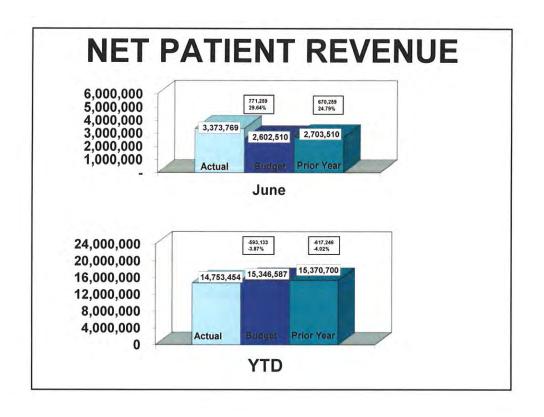
\$ 261,535

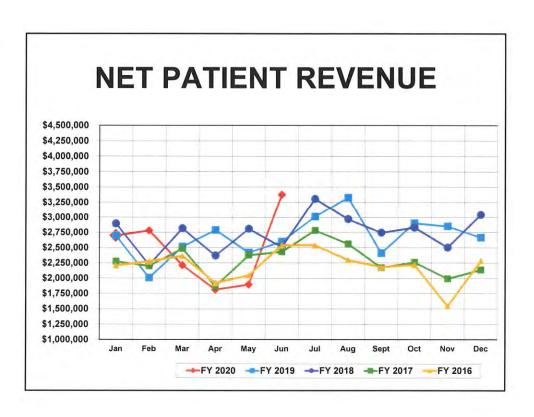
Net Income

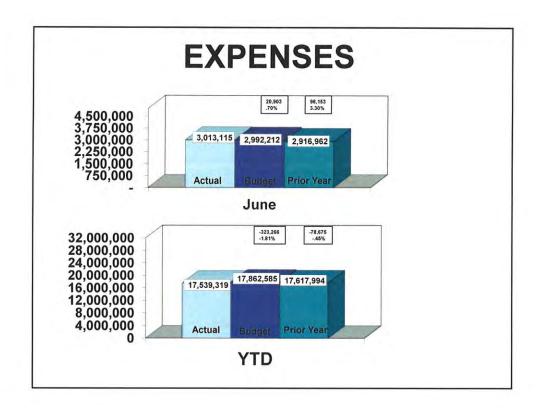
\$ 486,204

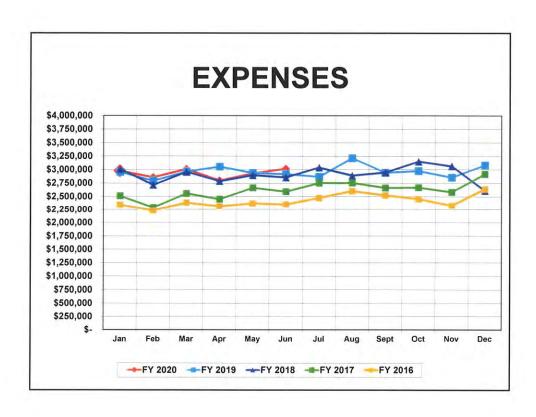


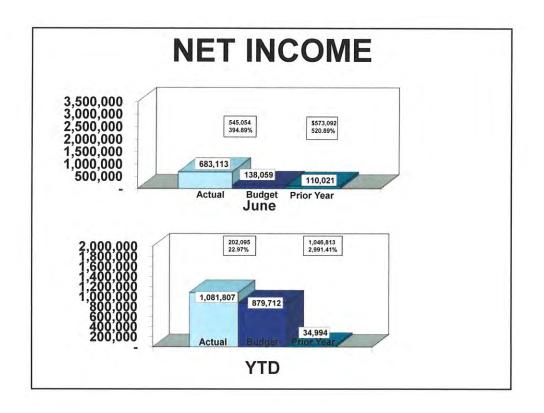


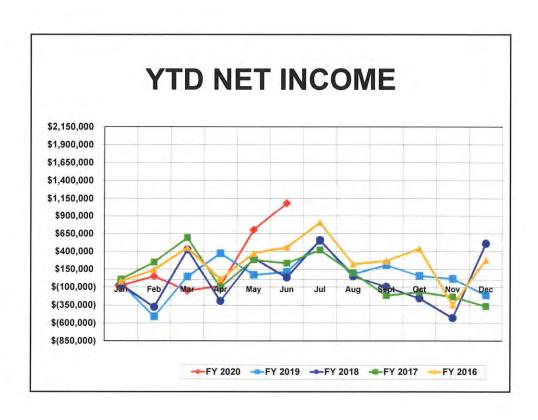


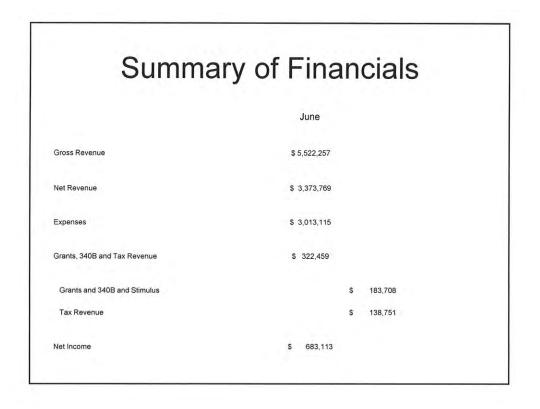


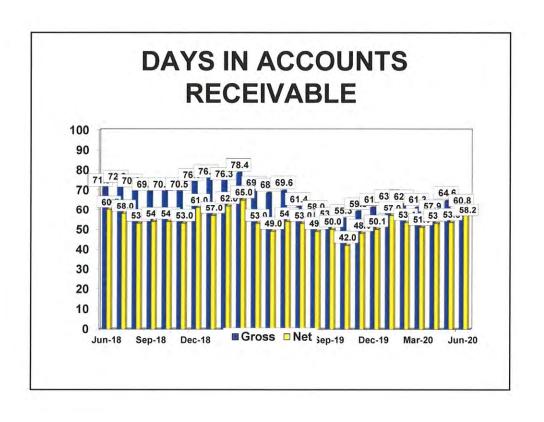


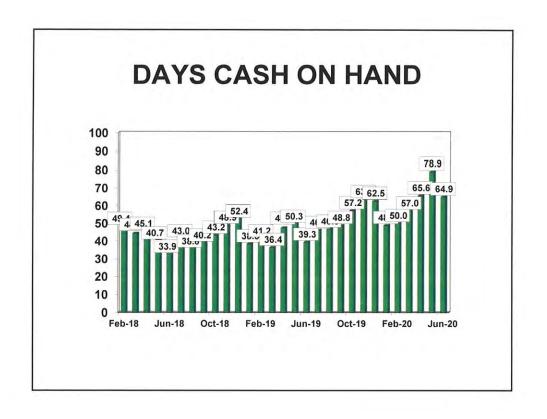


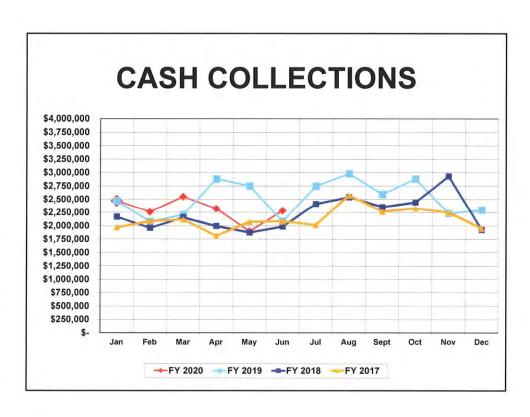












			<b>Income Stat</b>	ement Jur	ne 30, 2020				Page 1
			Current	Month			Year-to-Da	ate	
		2020	Budget	Difference	Variance	2020	Budget	Difference	Variance
	Revenue								
7	Total In-patient Revenue	404,789	439,288	(34,499)	-8%	2,449,854	2,732,123	(282,269)	-10%
17	Total Out-patient Revenue	4,736,795	4,280,864	455,931	11%	24,135,322	23,697,088	438,234	2%
18	Professional Fees	380,673	591,521	(210,848)	-36%	2,263,387	3,731,010	(1,467,623)	-39%
20	<b>Total Patient Revenue</b>	5,522,257	5,311,673	210,584	4%	28,848,563	30,160,221	(1,311,658)	-4%
21	Revenue Deductions & Bad Debt								
22	Contractual Allowances	2,406,152	2,711,798	(305,646)	-11%	14,135,839	14,561,862	(426,023)	-3%
23	Charity	14,428	42,301	(27,873)	-66%	(4,237)	490,029	(494,266)	-101%
24	Bad Debt	(24,881)	219,748	(244,629)	-111%	1,445,679	969,115	476,564	49%
25	Provider Fee & Other	(247,211)	(264,684)	17,473	-7%	(1,482,172)	(1,207,372)	(274,800)	23%
26	Total Revenue Deductions & Bad Debt	2,148,488	2,709,163	(560,675)	-21%	14,095,109	14,813,634	(718,525)	-5%
27	<b>Total Net Patient Revenue</b>	3,373,769	2,602,510	771,259	30%	14,753,454	15,346,587	(593,133)	-4%
28	Grants	24,451	- 6	24,451		167,151	911,000	(743,849)	-82%
28.5	HSS Stimulus Other Revenue		_	3		1,290,961		1,290,961	
29	Other Operating Income - Misc	159,257	251,751	(92,494)	-37%	1,104,244	1,432,814	(328,570)	-23%
30	Total Net Revenues	3,557,477	2,854,261	703,216	25%	17,315,810	17,690,401	(374,591)	-2%
31	Operating Expenses								
32	Salary & Wages	1,529,056	1,543,367	(14,311)	-1%	9,251,168	9,455,793	(204,625)	-2%
33	Benefits	326,576	328,885	(2,309)	-1%	1,589,509	1,998,359	(408,850)	-20%
35	Professional Fees/Contract Labor	32,566	18,226	14,340	79%	170,921	129,931	40,990	32%
36	Purchased Services	120,322	193,903	(73,581)	-38%	873,976	1,083,061	(209,085)	-19%
37		488,461	392,732	95,729	24%	2,688,366	2,231,223	457,143	20%
38		36,155	42,526	(6,371)	-15%	222,030	233,569	(11,539)	-5%
39	Repairs & Maintenance	61,352	46,585	14,767	32%	276,540	279,046	(2,506)	-1%
40		30,006	41,392	(11,386)	-28%	187,554	294,953	(107,399)	-36%
357	Insurance	24,563	23,103	1,460	6%	151,002	147,637	3,365	2%
42		148,247		(13,727)	-8%	887,523	873,412	14,111	2%
43	Interest		161,974	7,970	9%	537,286	469,310	67,976	14%
		92,413	84,443						
44		123,398	115,074	8,324	7%	703,443 <b>17,539,319</b>	666,291 <b>17,862,585</b>	37,152	6% - <b>2%</b>
	Total Operating Expenses	3,013,115	2,992,210	20,905	1%			(323,266)	
46	Operating Revenue Less Expenses	544,362	(137,949)	682,311	-495%	(223,509)	(172,184)	(51,325)	30%
47	Non-Operating Income								
48	Tax Revenue	138,751	126,008	12,743	10%	971,168	901,896	69,272	8%
49	Donations	9	150,000	(150,000)	-100%	334,148	150,000	184,148	123%
50	Total Non-Operating Income	138,751	276,008	(137,257)	-50%	1,305,316	1,051,896	253,420	24%
51	Total Revenue Less Total Expenses \$	683,113	\$ 138,059	\$ 545,054	395%	\$ 1,081,807	\$ 879,712	\$ 202,095	23%

		Incor	ne Statement	t Comparison	June 30, 2020				Page 2
			Current				Year-to-Da		
	Revenue	2020	2019	Difference	Variance	2020	2019	Difference	Variance
7		404,789	379,084	25,705	7%	2,449,854	2,708,377	(258,523)	-10%
17	Total Out-patient Revenue	4,736,795	3,959,470	777,325	20%	24,135,322	22,746,369	1,388,953	6%
18	Professional Fees	380,673	514,363	(133,690)	-26%	2,263,387	3,262,427	(999,040)	-31%
20	Total Patient Revenue	5,522,257	4,852,917	669,340	14%	28,848,563	28,717,173	131,390	0%
21	Revenue Deductions & Bad Debt								
22	Contractual Allowances	2,406,152	2,256,354	149,798	7%	14,135,839	13,694,912	440,927	3%
23	Charity	14,428	32,845	(18,417)	-56%	(4,237)	518,602	(522,839)	-101%
24	Bad Debt	(24,881)	192,116	(216,997)	-113%	1,445,679	730,974	714,705	98%
25	Provider Fee & Other	(247,211)	(331,908)	84,697	-26%	(1,482,172)	(1,598,015)	115,843	-7%
26	Total Revenue Deductions & Bad Debt	2,148,488	2,149,407	(919)	0%	14,095,109	13,346,473	748,636	6%
27	Total Net Patient Revenue	3,373,769	2,703,510	670,259	25%	14,753,454	15,370,700	(617,246)	-4%
28	Grants	24,451	12,366	12,085	98%	167,151	62,465	104,686	168%
28.5	HSS Stimulus Other Revenue	-		1,2		1,290,961	0	1,290,961	
29	Other Operating Income - Misc	159,257	166,358	(7,101)	-4%	1,104,244	1,316,327	(212,083)	-16%
30	Total Net Revenues	3,557,477	2,882,234	675,243	23%	17,315,810	16,749,492	566,318	3%
31	Operating Expenses								
32	Salary & Wages	1,529,056	1,525,932	3,124	0%	9,251,168	9,267,521	(16,353)	0%
33	Benefits	326,576	245,631	80,945	33%	1,589,509	1,649,368	(59,859)	-4%
34	Professional Fees	-	61,883	(61,883)	-100%	Charles and the	149,260	(149,260)	-100%
35	Professional Fees/Contract Labor	32,566	11,975	20,591	172%	170,921	117,423	53,498	46%
36	Purchased Services	120,322	183,237	(62,915)	-34%	873,976	996,095	(122,119)	-12%
37	Supplies	488,461	348,851	139,610	40%	2,688,366	2,186,077	502,289	23%
38	Rent & Leases	36,155	44,251	(8,096)	-18%	222,030	284,023	(61,993)	-22%
39	Repairs & Maintenance	61,352	41,862	19,490	47%	276,540	260,397	16,143	6%
40	Utilities	30,006	31,500	(1,494)	-5%	187,554	271,323	(83,769)	-31%
41	Insurance	24,563	23,872	691	3%	151,002	155,363	(4,361)	-3%
42	Depreciation & Amortization	148,247	152,017	(3,770)	-2%	887,523	951,868	(64,345)	-7%
43		92,413	88,054	4,359	5%	537,286	525,785	11,501	2%
44	Other	123,398	157,897	(34,499)	-22%	703,443	803,491	(100,048)	-12%
45	<b>Total Operating Expenses</b>	3,013,115	2,916,962	96,153	3%	17,539,319	17,617,994	(78,675)	0%
46	Operating Revenue Less Expenses	544,362	(34,728)	579,090	-1668%	(223,509)	(868,502)	644,993	-74%
47	Non-Operating Income								
48	Tax Revenue	138,751	144,749	(5,998)	-4%	971,168	903,496	67,672	7%
49	Donations		4			334,148	-	334,148	
50	Total Non-Operating Income	138,751	144,749	(5,998)	-4%	1,305,316	903,496	401,820	44%
51	Total Revenue Less Total Expenses \$	683,113	\$ 110,021	\$ 573,092	521%	\$ 1,081,807	\$ 34,994	1,046,813	2991%

# Pagosa Springs Medical Center

			Balance	Sh	eet Ju	ne 30, 2020	-		Page 3
			Current		Prior			Current	Prior
1	Assets		Month		Month	Liabilities		Month	Month
2	Current Assets					Current Liabilities			
3	Cash								
4	Operating	\$	4,506,645	\$	4,758,770	Accts Payable - System	\$	543,827	\$ 590,170
5	Debt Svc. Res. 2016 Bonds		878,731		878,731	Accrued Expenses		875,727	1,678,148
6	Bond Funds - 2016 Bonds		36		576,556	Cost Report Settlement Res		1,441,795	841,794
7	Bond Funds - 2006		1,433,934		1,842,204	Wages & Benefits Payable		1,958,313	1,292,135
8	Capital Escrow		-		-	Deferred Revenue		1,833	1,833
9	COVID PPP		3,740,044		3,740,044	COVID PPP Short Term Loan		3,740,044	3,740,044
10	Relief Fund Cash Restricted		3,801,853		3,801,853	Relief Fund Liability		3,801,853	3,801,853
11	Medicare Accelerated Pmt		4,224,952		4,224,952	Medicare Accelerated Pmt Liab		4,224,952	4,224,952
12	Total Cash		18,586,195		19,823,110	Current Portion of LT Debt-2006		320,000	320,000
13						Current Portion of LT Debt-2016		320,000	320,000
14	Accounts Receivable					Total Current Liabilities		17,228,344	16,810,929
15	Patient Revenue - Net		5,351,953		3,903,913				
16	Other Receivables		384,310		418,798				
17	Total Accounts Receivable		5,736,263		4,322,711	Long-Term Liabilities			
18						Leases Payable		162,315	174,518
19	Inventory		1,568,107		1,561,055	Equipment Lease (Wells Fargo)		201,107	209,560
20						Bond Premium (Net) - 2006		225,769	226,881
21	Total Current Assets		25,890,565		25,706,876	Bond Premium (Net) - 2016		131,693	132,118
22						Bonds Payable - 2006		8,385,000	8,705,000
23	Fixed Assets					Bonds Payable - 2016		9,600,000	9,920,000
24	Property Plant & Equip (Net)		7,430,605		7,480,625	Total Long-Term Liabilities		18,705,884	19,368,078
25	Electronic Health Record (Net)		12		4				
26	Clinic Expansion		13,377,405		13,377,405				
27	Work In Progress		389,073		199,229	Net Assets			
28	Land		101,000		101,000	Un-Restricted		10,582,520	10,582,520
29	Total Fixed Assets		21,298,083		21,158,259	Current Year Net Income/Loss		1,081,807	398,695
30						Total Un-Restricted		11,664,327	10,981,215
31	Other Assets							Contract Contract	1
32	Prepaids & Other Assets		409,907		295,087	Restricted			
33	Total Other Assets		409,907		295,087	Total Net Assets		11,664,327	10,981,215
	Total Assets	s	47,598,555	\$	47,160,222	Total Liabilities & Net Assets	\$	47,598,555	\$ 47,160,222

	Monthly Trends													
		Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20
	Activity	30	31	31	30	31	30	31	31	29	31	30	31	30
2	In-Patient Admissions	39	38	31	25	22	38	18	38	28	31	17	17	21
3	In-Patient Days	89	118	85	75	47	91	48	93	71	67	48	39	58
1	Avg Stay Days (In-patients)	2.3	3.1	2.7	3.0	2.1	2.4	2.7	2.4	2.5	2.2	2.8	2.3	2.8
5	Swing Bed Admissions	0	0	1	0	2	0	0	0	0	0	0	0	0
5	Swing Bed Days	0	0	2	0	2	0	0	0	0	0	0	0	0
7	Avg Length of Stay (Swing)	0.0	0.0	2.0	0.0	1.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
8	Average Daily Census	3.0	3.8	2.8	2.5	1.6	3.0	1.5	2.9	2.4	2.2	1.6	1.3	1.9
	Statistics													
9	E/R visits	561	702	616	552	492	444	622	590	576	484	307	447	495
0	Observ Hours	25	36	47	40	35	24	41	962	885	721	477	438	713
1	Lab Tests	1,609	1,818	1,762	1,637	1,679	1,433	1,566	5,250	5,111	4,447	3,197	4,479	5,761
12	Radiology/CT/MRI Exams	872	1,057	1,021	902	1,029	780	862	1,425	1,371	1,223	632	711	1,234
14	OR Cases	80	80	104	54	85	59	82	82	86	65	51	82	104
15	Clinic Visits	1,881	1,997	2,087	1,940	2,087	1,778	1,838	2,100	1,987	1,488	1,126	1,340	1,671
16	Spec. Clinic Visits	177	219	213	158	136	183	175	242	149	176	188	152	186
17	Oncology Clinic Visits	54	80	71	116	81	69	65	117	96	156	55	94	130
18	Oncology/Infusion Patients	42	80	68	37	81	59	71	98	111	117	152	178	179
19	Infusion Patients	81	79	67	104	71	50	60	64	67	131	88	53	56
0	EMS Transports	85	106	105	96	100	94	86	114	136	116	73	105	100
21	Total Stats	5,467	6,254	6,161	5,636	5,876	4,973	5,468	11,044	10,506	9,013	6,346	8,079	10,629

# Pagosa Springs Medical Center --- Statistical Review

				Statistical	Review	V						age 5
		June			J	une					rior Y-T-D	
2020	Current Month Actual	Current Month Budget	Variance	Y-T-D Actual	Y-T-D	Budget	Variance	Y-T-D	Actual	Prior Y-T-D Actual	Difference	Variance
In-Patient				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		244941	, arrange		7101000	7101001	- Sincrence	yununoo
Admissions:												
Acute	21	31	(10)	152		194	(42)		152	203	(51)	-25%
Swing Bed	74	1	(1)	1.97		6	(6)		1.47	1	(1)	-100%
Total	21	32	(11)	152		200	(48)		152	204	(52)	-25%
Patient Days:												
Acute	58	89	(31)	369		553	(184)		369	570	(201)	-35%
Swing Bed		3	(3)	- 1		18	(18)		- L	4	(4)	-100%
Total	58	92	(34)	369		571	(202)		369	574	(205)	-36%
Average Daily Census:			1 4									
# Of Days	30			182		182			182	181		
Acute	1.9		(1.0)	2.0		3.0	(1.0)		2.0	3.1	(1.1)	-35%
Swing Bed	1970	0.1	(0.1)	5		0.1	(0.1)		-		2	
Total	1.9	3.1	(1.1)	2.0		3.1	(1.1)		2.0	3.2	(1.1)	-36%
Length of Stay:	4.3		3.311									
Acute	2.8	2.9	(0.1)	2.4		2.9	(0.4)		2.4	2.8	(0.4)	-139
Swing Bed	180	1.5	1.5	-0		1.5	-		-	4.0	(4.0)	09
Total	2.8	2.9	(0.1)	2.4		2.9	(0.4)		2.4	2.8	(0.4)	-149
Out-Patient			H					-				
Out-Patient Visits			- 111				- 1	1				
E/R Visits	495	552	(57)	2,899		3,055	(156)		2,899	3,061	(162)	-5%
Observ admissions	29		(33)	211		383	(172)		211	185	26	149
Lab Tests	5,761	1,660	4,101	28,245		9,304	18,941		28,245	9,453	18,792	199%
Radiology/CT/MRI Exams	1,234	1,050	184	6,596		5,857	739		6,596	5,331	1,265	249
OR Cases	104	82	22	470		488	(18)		470	469	1	0%
Clinic Visits	1,671	2,057	(386)	9,712		11,400	(1,688)		9,712	11,762	(2,050)	-179
Spec. Clinic Visits	186		(33)	1,093		1,214	(121)		1,093	1,274	(181)	-149
Oncology Clinic Visits	130		57	648		412	236		648	415	233	56%
Oncology/Infusion Patients			114	835		365	470		835	354	481	136%
Infusion Patients	56	70	(14)	459		391	68		459	461	(2)	0%
EMS Transports	100	91	9	644		505	139		644	496	148	30%
Total	9,945		3,964	51,812		33,374	18,438	3	51,812	33,261	18,551	56%
	2,5,5	31447	,,,,,	9.110.12						100,000	,5,00	- 13

# Pagosa Springs Medical Center

Cerner/Healthland Accounts Receivable for Hospital by Payor and Days Outstanding As of June 30, 2020	Page 6

	-	erner/ nearth	lanc	Accounts Rec	eiv	able for Hosp	ILC	n by Payor and	טנ	ays Outstand	ulli	g As or June	2 30	0, 2020				Page
		0-30 Days		31-60 Days		61-90 Days		91-120 Days	3	121-150 Days		151-180 Days		181+ Days	Total	Percent of Total	Accts sent to Collections	
2 Medicare	\$	2,019,150	\$	140,920	\$	41,961	\$		\$		\$		\$	54,151	\$ 2,300,271	25%		
3 Medicaid		670,852		89,637		23,633		71,068		22,822		8,760		141,188	1,027,960	11%		
4 Third Party		1,547,666		489,820		243,166		162,644		292,391		135,147		664,368	3,535,202	39%		
5 Self-Pay		212,557		270,980		183,559		230,415		257,724		219,140		798,607	2,172,982	24%		
Current Month Total Pct of Total	\$	<b>4,450,225</b> 49%	\$	991,357 11%	\$	<b>492,319</b> 5%	5	470,912 5%	\$	586,430 6%	\$	386,858 4%	\$	1,658,314 18%	\$ 9,036,415 100%	100%	0	
A 100 A 100		0.000.000	ě.	270.700	-	0-0-		200.00	Q.	232 100		110 (04)	4.	2 200 200	223.331		2.	
May-20 Pct of Total	\$	3,589,609 41%	>	826,139 9%	\$	617,697 7%	5	746,962 8%	\$	522,098 6%	\$	443,199 5%	\$	2,065,360 23%	\$ 8,811,064 100%		0	
Apr-20	\$	2,681,917	\$	1,013,374	\$	1,015,473	\$	595,245	\$	587,885	\$	346,437	\$	2,642,011	\$ 8,882,342		0	
Pct of Total		30%		11%		11%		7%		7%		4%		30%	100%			
Mar-20	\$	3,612,859	Ś	1,586,402	Ś	855,343	Ś	748,561	Ś	448,372	S	368,712	\$	2,691,802	\$ 10,312,051		o o	
Pct of Total		35%	-	15%	x	8%		7%	9	4%		4%		26%	100%			
Feb-20	\$	4,881,391	\$	1,386,440	\$	901,832	\$	571,967	\$	516,414	\$	460,405	\$	2,555,288	\$ 11,273,737		0	
Pct of Total		43%		12%		8%		5%		5%		4%		23%	100%			
Jan-20	\$	4,542,726	\$	1,392,786	\$	710,103	5	568,045	\$	531,469	5	448,834	\$	2,322,276	\$ 10,516,239		0	
Pct of Total		43%		13%		7%		5%		5%		4%		22%	100%			
Dec-19	\$	4,481,747	\$	1,312,708	\$	908,066	\$	625,876	\$	627,407	\$	607,716	\$	2,044,961	\$ 10,608,481		O.	
Pct of Total		42%		12%		9%		6%		6%		6%		19%	100%			
Nov-19	\$	4,408,737	\$	1,436,158	\$	627,989	\$		\$		\$	336,215	\$	1,930,790	\$ 10,148,178		0	
Pct of Total		43%		14%		6%		7%		7%		3%		19%	100%			
Oct-19	\$	4,568,920	\$	1,130,990	\$	870,361	\$	794,889	\$	437,887	\$	381,541	\$	1,754,112	\$ 9,938,700		0	
Pct of Total		46%		11%		9%		8%		4%		4%		18%	100%			
Sep-19	\$	4,305,953	\$	1,369,222	\$	1,074,183	\$	534,873	\$	502,450	\$	239,643	\$	1,946,854	\$ 9,973,178		193,237	
Pct of Total		43%		14%		11%		5%		5%		2%		20%	100%			
Aug-19	\$	4,489,953	\$	1,643,643	\$	763,753	\$	692,390	\$	407,669	\$	450,136	5	2,188,090	\$ 10,635,634		572,029	
Pct of Total		42%		15%		7%		7%		4%		4%		21%	100%			
Jul-19	\$	5,080,360	\$	1,280,941	\$	915,491	\$	549,247	\$	607,257	\$	419,655	\$	2,387,501	\$ 11,240,452		1,106,517	
Pct of Total		45%		11%		8%		5%		5%		4%		21%	100%			
Jun-19	\$	4,199,727	\$	1,555,291	\$	715,848	5	712,192	\$	504,973	\$	621,808	\$	3,338,661	\$ 11,648,500		Ó	
Pct of Total		36%		13%		6%		6%		4%		5%		29%	100%			
May-19	\$	3,938,706	\$	1,192,758	\$	857,202	\$	558,303	\$	705,693	\$		\$	3,078,535	\$ 11,060,098		0	
Pct of Total		36%		11%		8%		5%		6%		7%		28%	100%			
Apr-19	\$	4,446,750	\$	1,328,789	\$	769,877	\$		\$	L	\$	354,704	\$	3,166,854	\$ 11,664,418		8,002	
Pct of Total		38%		11%		7%		7%		7%		3%		27%	100%			
Mar-19	\$	4,313,656	\$	1,360,981	\$	995,434	\$	985,732	\$	562,545	\$	619,342	\$	3,353,760	\$ 12,191,450		122,172	
Pct of Total		35%		11%		8%		8%		5%		5%		28%	100%			
Feb-19	\$	3,846,150	\$	1,550,896	\$	1,137,950	\$		\$		\$	667,524	\$	3,164,610	\$ 11,745,598		355,801	
Pct of Total		33%		13%		10%		6%		6%		6%		27%	100%			

Jan-19 Pct of Total	\$ 4,374,575 35%	\$ 1,664,567 13%	\$	771,356 6%	\$ 866,764 7%	\$ 765,154 6%	\$ 559,863 5%	\$ 3,411,981 27%	\$ 12,414,260 100%	310,436	
Dec-18 Pct of Total	\$ 4,810,234 38%	\$ 1,205,387 10%	\$	956,941 8%	\$ 872,250 7%	\$ 675,156 5%	\$ 652,620 5%	\$ 3,339,239 27%	\$ 12,511,827 100%	310,436	
Nov-18 Pct of Total	\$ 3,575,135 34%	\$ 1,298,788 12%	\$	913,800 9%	\$ 740,723 7%	\$ 766,567 7%	\$ 666,776 6%	\$ 2,695,762 25%	\$ 10,657,551 100%	112,443	
Oct-18 Pct of Total	\$ 4,188,615 36%	\$ 1,292,841 11%	\$	891,836 8%	\$ 836,368 7%	\$ 811,636 7%	\$ 594,372 5%	\$ 2,923,499 25%	\$ 11,539,167 100%	217,192	
Sep-18 Pct of Total	\$ 3,879,192 33%	\$ 1,290,689 11%	\$	1,088,210 9%	\$ 1,042,678 9%	\$ 794,963 7%	\$ 582,678 5%	\$ 2,960,063 26%	\$ 11,638,473 100%	302,125	
Aug-18 Pct of Total	\$ 4,290,838 35%	\$ 1,576,042 13%	\$	1,231,421 10%	\$ 977,015 8%	\$ 676,478 6%	\$ 606,305 5%	\$ 2,737,973 23%	\$ 12,096,072 100%	48,619	
Jul-18 Pct of Total	\$ 4,783,854 39%	\$ 1,759,771 14%	\$	1,145,364 9%	\$ 727,948 6%	\$ 726,411 6%	\$ 537,560 4%	\$ 2,635,767 21%	\$ 12,316,675 100%	24,966	
Jun-18 Pct of Total	\$ 4,334,347 39%	\$ 1,685,871 15%	\$	885,716 8%	\$ 689,267 6%	\$ 639,055 6%	\$ 576,480 5%	\$ 2,411,492 21%	\$ 11,222,228 100%	195,130	
May-18 Pct of Total	\$ 4,159,005 38%	\$ 1,795,159 16%	\$	1,208,334 11%	\$ 721,961 7%	\$ 670,041 6%	\$ 495,647 4%	\$ 2,003,816 18%	\$ 11,053,963 100%	47,472	
Apr-18 Pct of Total	\$ 3,697,643 39%	\$ 1,605,576 17%	\$	863,079 9%	\$ 713,382 7%	\$ 586,190 6%	\$ 391,762 4%	\$ 1,698,496 18%	\$ 9,556,128 100%	256,717	
Mar-18 Pct of Total	\$ 3,922,575 41%	\$ 1,408,723 15%	\$	1,095,293 11%	\$ 660,255 7%	\$ 439,343 5%	\$ 299,008 3%	\$ 1,759,366 18%	\$ 9,584,563 100%	139,778	
Feb-18 Pct of Total	\$ 3,744,129 41%	\$ 1,569,800 17%	\$	882,931 10%	\$ 495,048 5%	\$ 310,715 3%	\$ 273,375 3%	\$ 1,772,313 20%	\$ 9,048,312 100%	40,116	
Jan-18 Pct of Total	\$ 3,910,094 44%	\$ 1,418,969 16%	Ś	658,794 7%	\$ 398,631 5%	\$ 399,145 5%	\$ 263,261 3%	\$ 1,774,826 20%	\$ 8,823,719 100%	33,378	
Dec-17 Pct of Total	\$ 3,530,341 44%	\$ 998,668 12%	\$	567,335 7%	\$ 594,879 7%	\$ 431,479 5%	\$ 322,934 4%	\$ 1,657,210 20%	\$ 8,102,848 100%	825,723	
Nov-17 Pct of Total	\$ 2,955,885 36%	\$ 1,037,274 13%	\$	679,925 8%	\$ 592,310 7%	\$ 581,053 7%	\$ 435,072 5%	\$ 1,984,898 24%	\$ 8,266,421 100%	26,231	
Oct-17 Pct of Total	\$ 3,659,774 40%	\$ 1,357,490 15%	\$	752,198 8%	\$ 717,416 8%	\$ 562,600 6%	\$ 312,224 3%	\$ 1,893,353 20%	\$ 9,255,056 100%	218,112	
Sep-17 Pct of Total	\$ 3,724,332 38%	\$ 1,319,138 14%	\$	1,012,183 10%	\$ 671,452 7%	\$ 445,286 5%	\$ 377,867 4%	\$ 2,175,487 22%	\$ 9,725,747 100%	407,406	
Aug-17 Pct of Total	\$ 4,131,866 39%	\$ 1,552,324 15%	\$	893,339 8%	\$ 624,164 6%	\$ 490,221 5%	\$ 431,099 4%	\$ 2,449,394 23%	\$ 10,572,407 100%	341,071	
Jul-17 Pct of Total	\$ 4,612,446 42%	\$ 1,520,180 14%	\$	853,133 8%	\$ 632,738 6%	\$ 581,650 5%	\$ 552,521 5%	\$ 2,298,997 21%	\$ 11,051,665 100%	103,289	
Jun-17 Pct of Total	\$ 3,963,167 40%	\$ 1,339,294 13%	\$	815,790 8%	\$ 672,144 7%	\$ 657,236 7%	\$ 453,649 5%	\$ 2,101,821 21%	\$ 10,003,101 100%	129,723	
May-17	\$ 3,851,718	\$ 1,136,727	\$	1,030,085	\$ 770,865	\$ 477,918	\$ 354,848	\$ 1,972,569	\$ 9,594,730		

# ORAL REPORTS 4.a.iii.(5)

115,443

	Pct of Total	40%	12%	11%	8%	5%	4%	21%	100%	
12	Pct Settled (Current)		72.4%	40.4%	23,8%	21.5%	25.9%	-274.2%		
13	Pct Settled (May from Apr )		69.2%	39.0%	26.4%	12.3%	24.6%	-496.2%		
14	Pct Settled (Apr from Mar)		72.0%	36.0%	30.4%	21.5%	22.7%	-616.6%		
15	Pct Settled (Mar from Feb)		67.5%	38.3%	17.0%	21.6%	28.6%	-484.7%		
16	Pct Settled (Feb from Jan)		69.5%	35.2%	19.5%	9.1%	13.4%	-469,3%		

# Pagosa Springs Medical Center

# Pagosa Springs Medical Center --- Net Days in A/R 2020

Page 7

		31			28		31	30	31	30
			Jan-20		Feb-20		Mar-20	Apr-20	May-20	Jun-20
ſ	Net Accounts Receivable	\$	4,660,868	\$	4,774,997	\$	4,238,297	\$ 3,463,618	\$ 3,903,913	\$ 5,351,953
t	Net Patient Revenue	\$	2,693,581	\$	2,774,828	\$	2,209,846	\$ 1,809,102	\$ 1,892,329	\$ 3,373,769
ŀ	Net Patient Rev/Day (2 month Avg)	\$	86,399	\$	91,287	\$	83,485	\$ 65,794	\$ 60,673	\$ 86,751
ŀ	Net Days in A/R		54		52	-	51	53	64	62

		31			31	30	1	31	30		31
			Jul-19		Aug-19	Sep-19		Oct-19	Nov-19	-	Dec-19
7	Net Accounts Receivable	\$	4,939,510	\$	4,721,499	\$ 4,742,985	\$	3,614,699	\$ 4,367,929	\$	4,580,312
8	Net Patient Revenue	\$	3,009,707	\$	3,018,228	\$ 2,409,652	\$	2,899,113	\$ 2,650,917	\$	2,663,152
9	Net Patient Rev/Day (2 month Avg)	\$	93,602	\$	97,225	\$ 88,842	\$	86,921	\$ 90,942	\$	87,136
10	Net Days in A/R		53		49	53		42	48		53

Medicare		33%	21	\$	86,329	\$ 598,263
Medicaid		7%	35	\$	86,329	\$ 211,507
Blue Cross		15%	48	\$	86,329	\$ 621,572
Commercial		26%	65	\$	86,329	\$ 1,458,968
Self Pay		19%	150	\$	86,329	\$ 2,460,390
	Total:	100%				\$ 5,350,701
						\$ 86,329
			Gross Days i	n A/R 1	Target	62

# Pagosa Springs Medical Center Financial Forecast Statement of Cash Flows

Cash Flows from operating activities	June 2020
Change in net assets	683,113
Adjustments to reconcile net assets to net cash	8,10
Depreciation and amortization	148,247
Patient accounts receivable	(1,448,041)
Accounts payable and wages payable	619,835
Accrued liabilities	(802,421)
Pre-paid assets	(114,820)
Deferred revenues	4
Other receivables	34,488
Reserve for third party settlement	600,001
Inventory	(7,052)
Net Cash Provided by (used in) operating activities	(286,650)
Cash Flows from investing activities	
Purchase of property and equipment	(99,764)
Work in progress	(189,844)
Proceeds from sale of equipment/(Loss)	1.1.4
Net Cash Provided by (used in) investing activities	(289,608)
Cash Flows from financing activities	
Principal payments on long-term debt	(640,000)
Proceeds from debt	00000
Proceeds from PPP Short Term Loan	15
Proceeds from Relief Fund	19
Proceeds from PPP Short Term Loan	
Change in Prior Year Net Assets	
Change in leases payable	(20,656)
Net Cash Provided by (used in) financing activities	(660,656)
Net Increase(Decrease) in Cash	(1,236,914)
Cash Beginning of Month	19,823,110
Cash End of Month	18,586,195

# Pagosa Springs Medical Center Revenue and Usage by Financial Class June 30, 2020

Financial Class	Inpatient MTD	Outpatient MTD	Total MTD	% MTD
Auto/Liability Insurance	-	26,984.00	26,984.00	0.49%
Blue Cross	15,806.20	732,152.40	747,958.60	13.54%
Champus	19,458.80	42,379.90	61,838.70	1.12%
Commercial Insurance	13,421.70	537,489.54	550,911.24	9.98%
Medicaid	62,195.90	876,950.17	939,146.07	17.01%
Medicare	155,040.20	1,926,120.83	2,081,161.03	37.69%
Medicare HMO	27,991.60	452,080.18	480,071.78	8.69%
Self Pay	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	186,922.10	186,922.10	3.38%
Self Pay - Client Billing		4,286.80	4,286.80	0.08%
Veterans Administration	167,037.80	246,759.20	413,797.00	7.49%
Workers Compensation		29,179.93	29,179.93	0.53%
Total	460,952.20	5,061,305.05	5,522,257.25	100.00%

					12/31/19	12/31/18	12/31/17	12/31/16 %
Financial Class	Inpatient YTD	Outpatient YTD	Total YTD	% YTD	% YTD	% YTD	% YTD	YTD
Auto/Liability Insurance	11,222.70	217,498.30	228,721.00	0.79%	1.15%	1.05%	1.24%	1.11%
Blue Cross	241,382.00	3,269,099.40	3,510,481.40	12.17%	15.40%	15.42%	15.90%	15.83%
Champus	19,458.80	206,425.00	225,883.80	0.78%	0.31%	0.08%	0.07%	0.19%
Commercial Insurance	255,029.10	3,095,814.49	3,350,843.59	11.62%	11.34%	13.08%	11.79%	13.08%
Medicaid	321,844.90	5,054,882.26	5,376,727.16	18.64%	18.75%	18.22%	20.28%	21.56%
Medicare	1,262,888.41	9,994,973.44	11,257,861.85	39.02%	36.99%	36.75%	35.27%	35.90%
Medicare HMO	278,383.32	1,980,191.23	2,258,574.55	7.83%	7.20%	4.47%	3.55%	2.76%
Self Pay	74,056.40	887,598.48	961,654.88	3.33%	4.40%	5.40%	6.96%	5.26%
Self Pay - Client Billing	1000	38,221.60	38,221.60	0.13%	0.18%	0.18%	0.19%	0.17%
Veterans Administration	344,078.80	1,003,588.60	1,347,667.40	4.67%	2.74%	4.13%	3.58%	2.74%
Workers Compensation	(509.00)	292,434.30	291,925.30	1.01%	1.52%	1.22%	1.17%	1.37%
Total	2,807,835.43	26,040,727.10	28,848,562.53	100.00%	100.00%	100.00%	100.00%	99.97%
Blank								0.00%
HMO (Health Maint Org)								0.03%
Total				120	100.00%	100.00%	100.00%	100.00%

			2020			
Month	Cash Goal	Actual Cash	Variance	% Collected	GL Non AR	Total
20-Jan	\$2,440,100.00	\$2,459,574.05	\$19,474.05	100.80%	\$ 49,821.48	\$2,509,395.53
20-Feb	\$2,349,634.00	\$2,255,399.34	(\$94,234.66)	95.99%	\$ 29,324.97	\$2,284,724.31
20-Mar	\$2,553,998.00	\$2,545,182.76	(\$8,815.24)	99.65%	\$ 188,540.78	\$2,733,723.54
20-Apr	\$2,158,897.00	\$2,320,442.00	\$161,545.00	107.48%	\$ 8,728,180.14	\$ 10,952,114.91
20-May	\$1,577,510.00	\$1,894,337.87	\$316,827.87	120.08%	\$ 5,133,676.55	\$ 7,024,238.93
20-Jun	\$1,854,145.00	\$2,282,523.95	\$428,378.95	123.10%	\$ 170,543.11	\$2,453,067.06
20-Jul						
20-Aug						
20-Sep						
20-Oct						
20-Nov						
20-Dec						
Totals YTD	\$12,934,284.00	\$13,757,459.97	\$823,175.97	106.36%	\$ 14,300,087.03	\$27,957,264.28

# ORAL REPORTS 4.a.iii.(5)

(10)

Prepared7/15/2020

balance 5,772,169

6,404,537

5,489,603

Cash balance	
at 12/31/19	

	(1) Patient	(2) Tax	(3) Provider	(4) Grants &	(5)	(6) Clinic Expan. New Debt/	Total	(7) Operating	(8)	(9) Medicare/ Medicaid	Bond & Lease Interest & Principal	(11)	Total	
	Collections	Revenues	Fees	Donations	Other	Leases	Collections	Expenses	Capital	Repayment	Payments	Other	Cash Spending	Balance
January 2020 (Actual)	2,467,181	9,379	247,211	~	187,258		2,911,029	2,824,894		113,140	-2-	418,249	3,356,283	5,326,915
February 2020 (Actual)	2,257,097	83,099	246,117	2,059	123,620	- 4	2,711,992	2,615,769	75,934	95,439	il Light	(233,127)	2,554,014	5,484,893
March 2020 (Actual)	2,545,183	384,580	247,211	1,100	212,488		3,390,562	2,859,489	5,312	1.0	15,035	(136,751)	2,743,085	6,132,369
April 2020 (Actual)	2,320,442	127,085	247,211	139,541	784,766	-	3,619,045	2,794,499	200,000	т.	(+)	769,620	3,764,119	5,987,295
May 2020 (Actual)	1,894,338	261,535	247,211	334,148	926,505	-	3,663,737	2,928,313	100,000	50,000		(604,810)	2,473,503	7,177,529
June 2020 (Actual)	2,282,524	138,751	247,211	24,451	159,257	-	2,852,194	3,013,115	189,844	50,000	1,123,000	(286,850)	4,089,109	5,940,613
July 2020 (Budget)	2,788,423	169,669	306,685	18	211,636	-	3,476,413	3,159,617	*	50,000	19	(350,000)	2,859,617	6,557,409
August 2020 (Budget)	2,613,099	46,375	306,685	125,000	215,227		3,306,386	3,172,938	125,000	50,000		(350,000)	2,997,938	6,865,857
September 2020 (Budget)	2,072,915	26,784	300,476	~	206,746	~	2,606,921	3,061,238		50,000		(350,000)	2,761,238	6,711,540
October 2020 (Budget)	2,393,061	113,615	265,182	1,0	191,345		2,963,203	3,163,677	94	50,000	1 2	(350,000)	2,863,677	6,811,066
November 2020 (Budget)	2,228,477	11,998	258,809	(4)	219,452	2.	2,718,736	3,070,499		50,000	18	(350,000)	2,770,499	6,759,303
December 2020 (Budget)	2,996,028	29,663	254,789	- 9-	95,033		3,375,513	3,194,522	-	50,000	475,000	(350,000)	3,369,522	6,765,294
Totals	28,858,768	1,402,533	3,174,798	626,299	3,533,333	7	37,595,731	35,858,570 981,635	696,090	608,579	1,613,035	(2,173,668)	36,602,606	6,765,294
														at 12/31/20

Bond Requirements (70 days cash)

Bond Requirements (60 days cash)

#### Notes:

- (1) Forecast based on projected revenue.
- (2) Forecast is based on the actual percentages from prior year.
- (3) Based on current payment from Colorado Health and Hospitals.
- (4) Forecast is based on budget adjusted by YTD actual.
- (5) Forecast is based on budget adjusted by YTD actual.
- (6) Forecast new leases and equipment for capital purchases.
- (7) Forecast is based on budget excluding depreciation.
- (8) Assumes forecast capital expenditures of 1,036,000.
- (9) Medicare Cost Report Settlement for 2018 and 2019 and Medicaid for 2018 and 2019 Most of the estimated settlement dates are placeholders only, Medicare and Medicaid operate on their own schedules.
- (10) Forecast based on bond principal and interest payments.
- (11) Other balance sheet changes i.e., changes in accounts payable, receivables etc.

2020 MANAGEMENT ACTIONS TO INCREASE DAYS OF CASH							
ACTION	DEADLINE	JAN	FEB	MAR	APRIL	MAY	JUNE
REDUCE EXPENSE							
From 2020 staffing budget, continue to reduce FTEs and contractors (as practical and possible) through attrition or restructuring of positions.	ongoing	no additional reduction in FTEs during Jan.	no additional reduction during Feb.	Reduce 0.5 FTE by combining and reallocating duties among several employees. In addition voluntary furlough of 3 employees requesting.	Reduce 0.5 FTE by combining and reallocating duties among several employees.	Reduce 1.0 FTE by combining and reallocating duties among two employees.	Reduce 1.0 FTE by outsourcing the work at no out-of -pocket cost to PSMC.
Reduce expense through amendments to service agreements.	ongoing	no opportunities available in Jan.	No opportunitie s in Feb.	no opportunities in March.	Renegotiated a lab service contract.	No opportunities in May.	No opportunities in June.
Evaluate and amend contracts for management of IT to reduce expense and enhance security.	6/30/2020	Have amended contract to bring all IT management in-house (still have contract with Synoptek for a technician, minimal help desk support, and phone hosting.	Goal achieved except when ready to take phones from Synoptek.	Goal achieved except when ready to take phones from Synoptek.	Goal achieved except when ready to take phones from Synoptek.	Goal achieved except when ready to take phones from Synoptek.	Goal achieved except when ready to take phones from Synoptek.
IMPROVE REVENUES COLLECTED							
Evaluate self-pay pricing.	3/31/2020	Underway and created colonscopy self-pay pricing	Self-pay colonscopies start 3/1	No additional changes.	No additional changes.	No additional changes.	No additional changes.
Evaluate extended hours for outpatient clinic.	3/31/2020	Committee formed to evaluate.	keviewed - can start extended hours in the clinic 5 days/wk without additional	Evaluation achieved. (Implementation is a separate goal with 6/30 deadline down below).	Evaluation achieved.	Evaluation achieved.	Evaluation achieved.

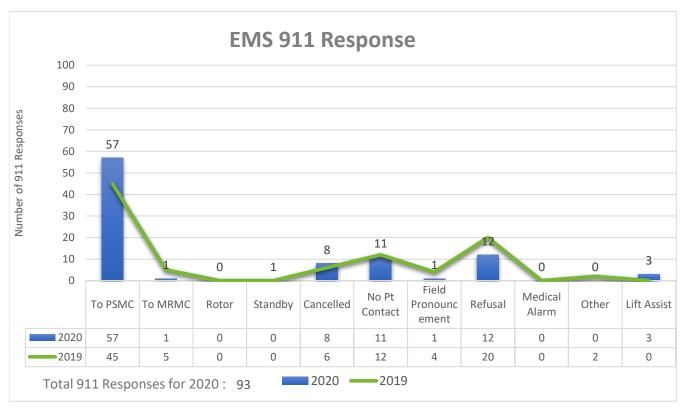
2020 MANAGEMENT ACTIONS TO INCREASE DAYS OF CASH							
ACTION	DEADLINE	JAN	FEB	MAR	APRIL	MAY	JUNE
Change outsourced company for collections to increase percentage of collection.	4/30/2020	Agreement in place for new company; termination notice to existing company sent in Feb.	There is a 60 day notice period. PSMC will be sending all new accounts to REL and PFC will finish out their current inventory.	REL commences collection starting April.	Goal achieved.	Goal achieved.	Goal achieved.
Increase opthalmology services on-site.	5/30/2020	Have verbal agreement	Have verbal agreement	Due to COVID-19, no elective surgeries are being performed.	Starting up essential surgeries in May, but due to COVID-19 will proceed cautiously in surgery services.	Starting up essential surgeries in May. Have resumed opthalmology services.	Have resumed opthalmology services. Ten cases were performed in June
Expand services for enhanced pain management.	5/30/2020	Received quotes on equipment	Evaluating training.	CRNAs were scheduled for training in May; training delayed to summer due to COVID restrictions.	CRNAs were scheduled for training in May; training delayed to summer due to COVID restrictions.	CRNAs were scheduled for training in May; training delayed to September due to COVID restrictions.	CRNAs were scheduled for training in May; training delayed to September due to COVID restrictions.
If feasible <u>implement</u> extended hours for outpatient clinic.	6/30/2020	See 3/31 deadline still in evaluation stage	Evaluation as noted above will allow.	Implementation timing will depend on COVID.	Schedule prepared and evaluated but implementation timing still depends on how COVID-19 proceeds.	Schedule prepared and evaluated but implementation timing still depends on how COVID-19 proceeds.	Schedule prepared and evaluated but implementation timing still depends on how COVID-19 proceeds.
Implement coding software to enable PSMC to compute payments on Medicaid EAPGs to assure accuracy of payment. (Note: this was a 2019 goal in which 50% was accomplished, but the remainder of the work is required of Cerner.)	6/30/2020	Still waiting on Cerner	Still waiting on Cerner.	Still waiting on Cerner. All implementations with Cerner are delayed due to COVID-19.	Still waiting on Cerner. All implementations with Cerner are delayed due to COVID-19.	Cerner scheduled implementation for June 8.	Stand Alone Version has been implemented and will implement the imbedded version when it is available.
Improve information on billing statement to reduce questions and disputes (deadline reflects that this requires changes in Cerner).	9/30/2020	Initial meeting with Cerner scheduled for Feb. 18	Meeting on 2/18.	Underway but not completed by Cerner.	Underway but not completed by Cerner.	Goal accomplished.	Goal accomplished.

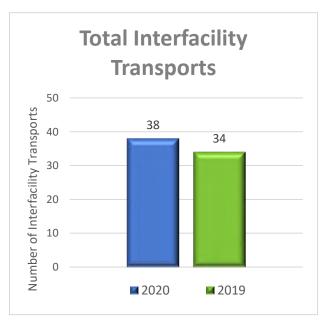
2020 MANAGEMENT ACTIONS TO INCREASE DAYS OF CASH							
ACTION	DEADLINE	JAN	FEB	MAR	APRIL	MAY	JUNE
Develop and implement operational goals/plan to end the year with gross days of A/R of 60 days.	12/31/2020	Business office needs full staffing. 2 positions filled in Jan. for orientation in Feb. All positions filled in the business office.	office filled in Feb. and trained in	Plan will be dependent on how COVID-19 continues; lost revenue is significant and unclear the amount of grants or federal funding that will be available to PSMC.	Revenue Cycle is working A/R. A plan remains dependent on how COVID-19 continues.	Revenue Cycle is working A/R. A plan remains dependent on how COVID-19 continues.	Revenue Cycle is working A/R. A plan remains dependent on how COVID-19 continues.
MANAGEMENT AND PLANNING							
Implement plan to accomplish State Hospital Transformation Project obligations.	ongoing	Plan to be submitted to the State in April.	On track to submit plan in April.	State has delayed all HTP deadlines due to COVID-19.	State has delayed all HTP deadlines due to COVID-19 but staff still working key aspects of plan.	State has delayed all HTP deadlines due to COVID-19 but staff still working key aspects of plan.	State has delayed all HTP deadlines due to COVID-19 but staff still working key aspects of plan (the next deadline is 10/31/2020)
Evaluate and develop/implement a plan to reduce ongoing expense for MRI. (Note: this was a 2019 goal in which 40% was accomplished.)	6/30/2020	Received quotes for MRI and evaluating.	We have a quote and are looking into financing options.	Not pursuing financing while dealing with COVID-19.	MRI options have been evaluated; have a proposal for Finance Committee in May.	In May, the Board approved PSMC to move forward with a lease/purchase of a MRI.	The MRI project was rebid in June and results will be taken to the July finance committee and board of directors.
Conduct the advance work (data collection and meetings with stakeholders) in order to begin meetings the Board's Strategic Planning Committee regarding service lines and future direction.	6/30/2020	Finished 3 of 5 planned internal meetings.	5 of 5 internal meetings completed.	On hold due to COVID-19.	On hold due to COVID- 19.	On hold due to COVID-19; aiming to resume in August unless COVID-19 circumstances change.	Strategic Planning via the board's committee will resume in July.

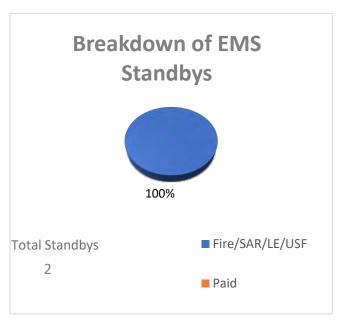


# **Operations Report for June 2020**

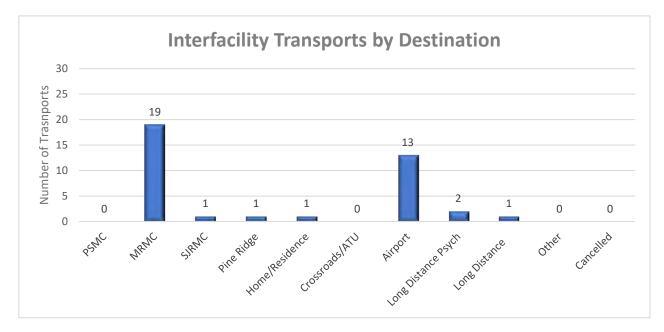
# **EMS:** June



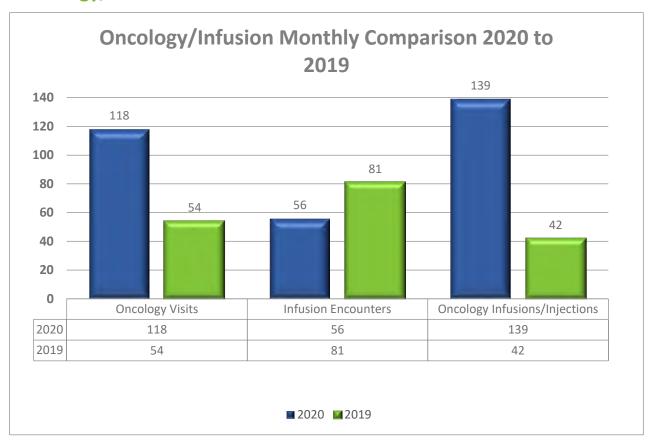




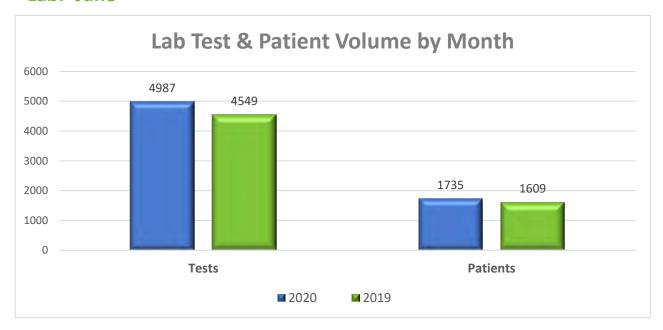
# **EMS:** June



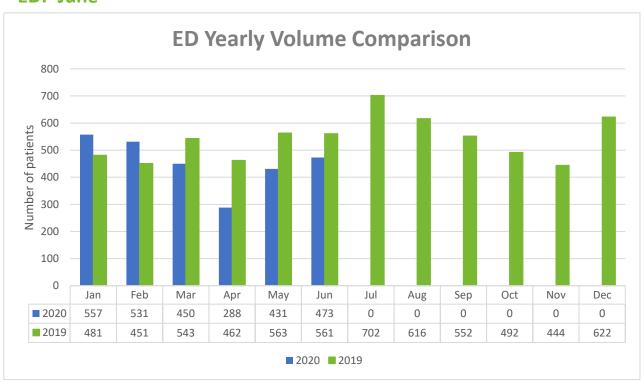
# **Oncology/Infusion: June**



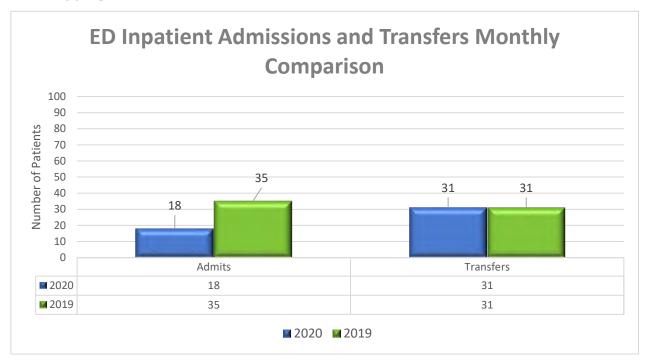
# Lab: June



# **ED:** June



# **ED: June**



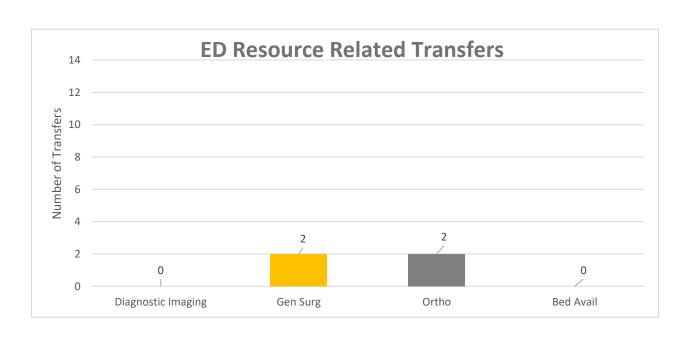


**Average Daily Census** 

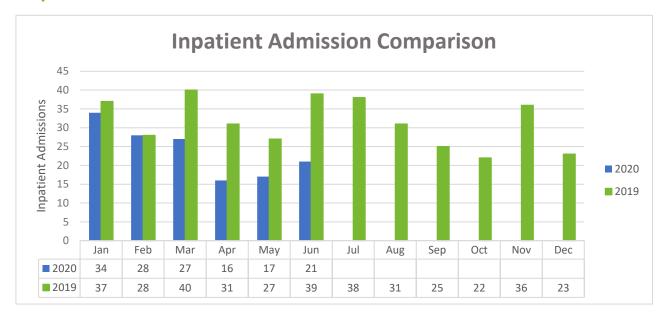
**Average Length of Stay (in hours)** 

**15.8** 

2.4



# Inpatient: June





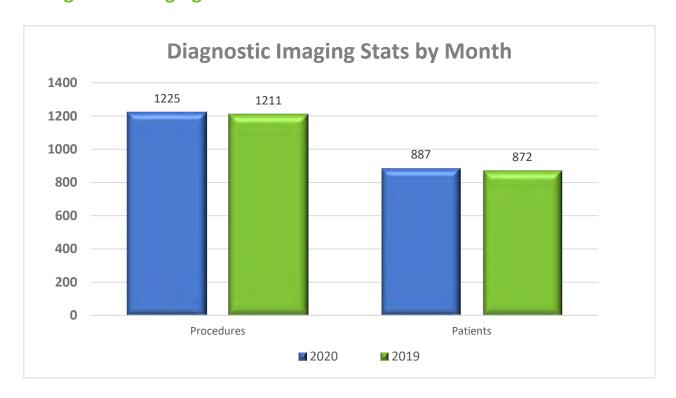
**Average Daily Census** 

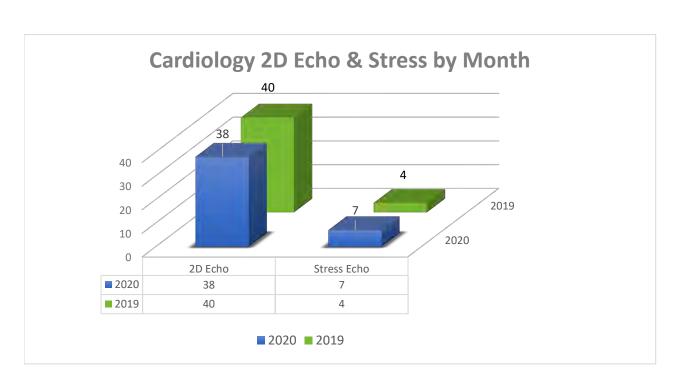
Average Length of Stay (in days)

2.8

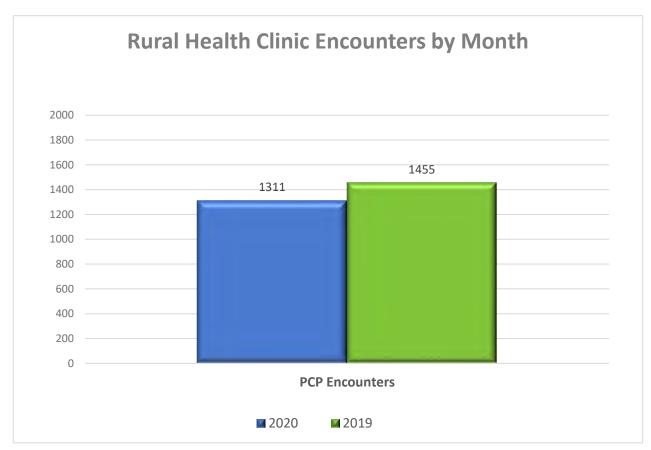
**2.**5

# **Diagnostic Imaging: June**



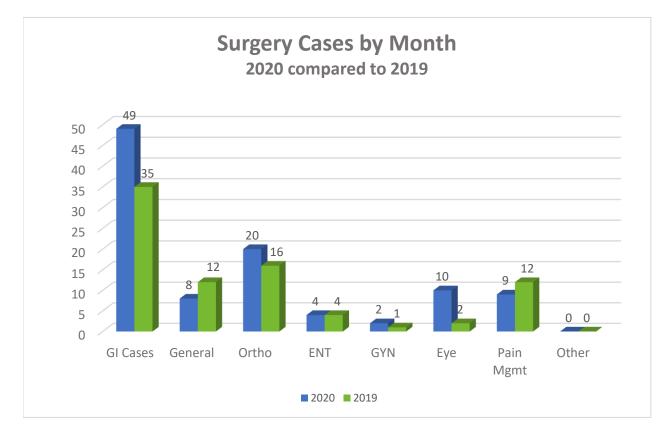


# Clinic: June





# **Surgery**





# THE UPPER SAN JUAN HEALTH SERVICE DISTRICT DOING BUSINESS AS PAGOSA SPRINGS MEDICAL CENTER

# MEDICAL STAFF REPORT BY CHIEF OF STAFF, RALPH BATTELS July 28, 2020

I. STATEMENT OF THE MEDICAL STAFF'S RECOMMENDATIONS FOR THE USJHSD BOARD ACCEPTANCE OF NEW POLICIES OR PROCEDURES ADOPTED BY THE MEDICAL STAFF:

II. STATEMENT OF THE MEDICAL STAFF'S RECOMMENDATIONS FOR THE USJHSD BOARD ACCEPTANCE OF PROVIDER PRIVILEGES (ACCEPTANCE BY THE BOARD RESULTS IN THE GRANT OF PRIVILEGES):

NAME	INITIAL/REAPPOINT/CHANGE	TYPE OF PRIVILEGES	SPECIALTY
Samuel Fuller, MD	Reappointment	Telemedicine/Teleradiology	Diagnostic Radiology
Luke Hoagland, MD	Reappointment	Telemedicine/Teleradiology	Diagnostic Radiology
Michael Lin, MD	Reappointment	Telemedicine/Teleradiology	Diagnostic Radiology
Paul McCarthy, MD	Reappointment	Courtesy/Pathology	Anatomic & Clinical
			Pathology
Dennis Phelps, MD	Reappointment	Courtesy/Orthopedics	Orthopedic Surgery
Scot Potts, MD	Reappointment	Courtesy/Pathology	Anatomic & Clinical
			Pathology
Gregory Reuter, MD	Reappointment	Telemedicine/Teleradiology	Diagnostic Radiology &
			Neuroradiology
Benjamin Ropp, MD	Reappointment	Courtesy/Pathology	Anatomic & Clinical
			Pathology and
			Cytopathology
Eric Weed, CRNA	Reappointment	APP/CRNA	Certified Registered Nurse
			Anesthetist

III. REPORT OF NUMBER OF PROVIDERS BY CATEGORY

Active: 20 Courtesy: 21 Telemedicine: 124

Advanced Practice Providers: 23

Honorary: 1 Total: 189

# UPPER SAN JUAN HEALTH SERVICES DISTRICT D/B/A PAGOSA SPRINGS MEDICAL CENTER

# Formal Written Resolution 2020-14 July 28, 2020

**WHEREAS**, the Board of Directors of Upper San Juan Health Service District ("USJHSD") has employed the CEO/CMO for a term of January 1, 2018 through December 31, 2020; and

**WHEREAS**, the Board of Directors have met in executive session on July 28, 2020 regarding the extension of the CEO/CMO's employment.

NOW, THEREFORE, THE BOARD OF DIRECTORS OF THE UPPER SAN JUAN HEALTH SERVICE DISTRICT HEREBY RESOLVES THAT the Board Executive Committee (Chair Schulte and Vice-Chair Mees) are authorized to proceed, on behalf of the Board, to negotiate renewal of the employment of the CEO/CMO (using the support of legal counsel and Human Resources staff as applicable) and subject to the guidance provided by the Board regarding material employment terms and/or parameters for negotiation.

Greg Schulte, as Chair of the Board

# UPPER SAN JUAN HEALTH SERVICES DISTRICT D/B/A PAGOSA SPRINGS MEDICAL CENTER

#### **Formal Written Resolution 2020-15**

July 28, 2020

**WHEREAS**, in May 2020, the Board approved the purchase of an MRI after reviewing the recommendations of staff and the Board's Finance Committee; *however*, the vendor for the MRI purchase approved by the Board made an error in its original quote which resulted in PSMC making a second request for proposals in June/July;

**WHEREAS**, PSMC staff have obtained new MRI proposals and provided the attached summary to the Board's Finance Committee on July 21, 2020;

**WHEREAS,** staff and the Board's Finance Committee recommend to the Board to approve the purchase of the Siemens Magnetom Altea MRI and modular building for the reasons set forth below:

- The purchase is financially responsible:
  - The Finance Committee noted that the previous approval required PSMC to conduct only one additional study per month to cover the additional monthly cost to purchase the new MRI and the updated quote requires only two additional studies per month to cover the additional monthly cost to purchase the new MRI;
  - The new MRI will result in additional service capabilities and therefore additional revenue opportunities;
  - PSMC's existing MRI is pursuant to a lease with a monthly payment of \$21,900, but at the time the lease was entered in 2013 and amended in 2015, PSMC was not in a financial position to negotiate for a lease with an option to purchase so there is no end to the lease payments; and
  - o A purchase of an MRI will allow PSMC to end paying the purchase cost at the end of 72 payments.
- The platform is 2020 which means the MRI should serve PSMC needs for the next 20 years;
- The MRI has enhanced orthopedic and neuro images with dedicated coil for each body part (whereas some options do not have specific dedicated coils);
- The MRI offers enhanced clinical care:
  - Serves larger patients (current MRI capped at 350 pounds and new MRI serves up to 550 pounds);
  - Offers breast, prostate and rectal imaging; and
  - Patient comfort larger opening and music to reduce claustrophobia.

Upper San Juan Health Service District Resolution 2020-15 Page 2

# NOW, THEREFORE, THE BOARD OF DIRECTORS OF THE UPPER SAN JUAN HEALTH SERVICE DISTRICT HEREBY RESOLVES THAT

- The authorization of Resolution 2020-12 is null except as to the Board's prior authorization for staff to take actions to terminate the existing MRI lease; and
- Staff are authorized to take such actions to facilitate the purchase of the Siemens Magnetom Altea MRI on the terms set forth on the attached summary and take such actions (including, for example, utility easements as may be needed and/or building permit applications and the like) to operationalize the MRI and its modular on-site.

Greg Schulte,	Chairman of the USJHSD Board	

		TOTAL PURCHASE PRICE INCLUDES						
	MONTHLY PAYMENT INCLUDES SERVICE	SERVICE CONTRACT DURING TERM OF	MONTHLY PAYMENT					
2020.07.21 EQUIPMENT	CONTRACT	LEASE /PURCHASE	AFTER PURCHASE	PROS	CONS	REVENUE OPPORTUNITY	OTHER	RECOMMENDATION
				Additional service to patient as it provides MRI of breast, rectum and	Service contract quite high after	Average gross charge per MRI is \$3,500. Can expand services and revenue for obese		
177 175 AA OSL L. O. 14 ST			After 72 months it is	prostate, and obese patients up to 550 pounds. Larger bore, 74 cm,	purchase. Height top to bottom	patients (currently refer out an estimated 8 per		No. The service contract after
Hitachi Ec+A4:G5helon Oval 1.5T and Modular			owned; thereafter, approximately \$8,291.67	better for claustrophobia; length . Better images for ortho and neuro as dedicated coil for every body part. Faster. Ramp to MRI rather than	is less than a standard round bore so could lose option for	month), breast MRI (currently refer out an estimated 3 per month), and prostate and		purchase is significantly higer. The bore hole height will limit too many
BuildiA4:I13+A4:I16ng	\$26,541.22	\$1,910,967.84	per month service contract	current lift which has ice issues. 32 channels	some obese patients.	rectal MRI.	Platform introduced in 2018	obese patients.
						Average gross charge per MRI is \$3,500. Can		
				Additional service to patient as it provides MRI of breast, rectum and		expand services and revenue for obese		
	Months 1-15		After 72 months it is owned; thereafter,	prostate, and obese patients up to 500 pounds. Larger bore, 70 cm, better for claustrophobia; length . Better images for ortho and neuro		patients (currently refer out an estimated 8 per month), breast MRI (currently refer out an		No. The platform is 13 years old and
GE 450W 1.5T and Modular Building	\$26,240.00 Months 16- 72 \$27,140.00	\$1.940.599.00	approximately \$7,888 per month service contract	as dedicated coil for every body part. Faster. Ramp to MRI rather than current lift which has ice issues. 32 channel.	Service provider approximately 2 hours away.	estimated 3 per month), and prostate and rectal MRI.	Platform introduced in 2007.	service contract after purchase is higher.
building	72 327,140.00	\$1,540,355.00	month service contract	current int which has be issues. 32 channel.	illouis away.	rectariviti.	Platform introduced in 2007.	ingrer.
C: 14						Average gross charge per MRI is \$3,500. Can		
Siemens Magnetom Aera This is a NEW machine with newer			After 72 months it is	Additional service to patient as it provides MRI of breast, rectum and prostate, and obese patients up to 550 pounds. Larger bore, 70 cm,	Service is out of Montrose (at	expand services and revenue for obese patients (currently refer out an estimated 8 per		We like this MRI but platform is 10
technology the platform was approved by the FDA in 2010			owned; thereafter, approximately \$5,916.67	better for claustrophobia; length. Better images for ortho and neuro as dedicated coil for every body part. Faster. Ramp to MRI rather than	least 3 hours away); also have	month), breast MRI (currently refer out an estimated 3 per month), and prostate and		years old. When compared to the Altea's new platform, we think the
and implemented in 2011	\$27,151.92	\$1,954,938.24		current lift which has ice issues. 48 channels	elsewhere.	rectal MRI.		Altea is a better choice.
				Additional service to patient as it provides MRI of breast, rectum and prostate, and obese patients up to 550 pounds. Larger bore, 70 cm,				
				better for claustrophobia; length . Better images for ortho and neuro				
				as dedicated coil for every body part (vs. some other options such as Canon and GE have "flex coils" that are used in many parts of the body		Average gross charge per MRI is \$3,500. Can expand services and revenue for obese		
Siemens Magnetom Altea and modular building. This is a			After 72 months it is owned: thereafter.	rather than dedicated). Faster. Ramp to MRI rather than current lift which has ice issues. Latest technology could attract more referrals 32		patients (currently refer out an estimated 8 per month), breast MRI (currently refer out an	Platform approved in 2020, this would be the first scanner	We recommend this MRI based
NEW machine and NEW			approximately \$5,916.67	channels. Other info: Staff likes the proactive maintenance of Siemans		estimated 3 per month), and prostate and	of this type in the state	upon the cost, the increased services
technology.	\$28,958.80	\$2,085,033.60	per month service contract	and this as well as double pump typically results in less down time.	(generally 3 hours away).	rectal MRI.	depending on installation date.	capability and the new platform.
				Additional continue to nations as it provides MPI of broast rectum and				
				Additional service to patient as it provides MRI of breast, rectum and prostate, and obese patients up to 550 pounds. Larger bore, 70 cm,		Average gross charge per MRI is \$3,500. Can		
			After 72 months it is	better for claustrophobia; length . Better images for ortho and neuro as dedicated coil for every body part. Faster. Ramp to MRI rather than		expand services and revenue for obese patients (currently refer out an estimated 8 per		We like this MRI, but subject to alternative info arriving on 7.21,
			owned; thereafter,	current lift which has ice issues. Channels not stated in the literature	Service is out of Albuquerque or	month), breast MRI (currently refer out an		we believe this does not
CANON Orian 1.5T and Modular Building	\$29,107.20	\$2,095,718.40	approximately \$6,076.39 per month service contract	we think 32 channel. Vascular focused great if we had a vascular surgeon. Not as ortho/neuro focused as Siemans.	Grand Junction (generallyt 4 hours away)	estimated 3 per month), and prostate and rectal MRI.	Platform introduced in 2018	emphasize ortho as much as the Altea and for slightly more cost.
						Average gross charge per MRI is \$3,500. Can		
			After 72 months it is	Additional service to patient as it provides MRI of breast, rectum and prostate, and obese patients up to 500 pounds. Larger bore, 70 cm,		expand services and revenue for obese patients (currently refer out an estimated 8 per		
			owned; thereafter,	better for claustrophobia; length . Better images for ortho and neuro		month), breast MRI (currently refer out an		No. The cost for the upgrade and
GE 450W 1.5T and Artist upgrade with Modular Building	\$34,300.00	\$2,469,600.00	approximately \$8,222 per month service contract	as dedicated coil for every body part. Faster. Ramp to MRI rather than current lift which has ice issues.		estimated 3 per month), and prostate and rectal MRI.	Upgrade to a platform introduced in 2007.	the service contract after purchase are too high.
						Average gross charge per MRI is \$3,500. Can		
			After 72 months it is	Additional service to patient as it provides MRI of breast, rectum and prostate, and obese patients up to 550 pounds. Larger bore, 70 cm,		expand services and revenue for obese patients (currently refer out an estimated 8 per		
			owned; thereafter,	better for claustrophobia; length . Better images for ortho and neuro		month), breast MRI (currently refer out an		No. The cost for the upgrade and
Philips Ingenia 1.5T Evolution and Modular Building	\$36,050.00	\$2,595,600.00	approximately \$11,300 per month service contract	as dedicated coil for every body part. Faster. Ramp to MRI rather than current lift which has ice issues. 32 channels	Higher costs for MRI unit, building and service.	estimated 3 per month), and prostate and rectal MRI.	Platform introduced in 2018	the service contract after purchase are too high.
	, ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						

# UPPER SAN JUAN HEALTH SERVICES DISTRICT D/B/A PAGOSA SPRINGS MEDICAL CENTER

## **Formal Written Resolution 2020-16** July 28, 2020

WHEREAS, the Board's Facilities Committee met on July 21, 2020 and made a report of such meeting to the Board of Directors on July 28, 2020;

**WHEREAS**, staff and the Board's Facilities Committee recommend the Board approve proceeding with an infection control renovation to the Emergency Department to make Trauma 1 and Trauma 2 negative air pressure rooms to enhance PSMC's infection control capabilities:

WHEREAS, PSMC's emergency operations pandemic response plan includes the possibility that the Emergency Department rooms Trauma 1 and 2 may need to converted to ICU bed use for infectious patients and as such, the rooms need to be negative air pressure for infection control and safety.

NOW, THEREFORE, THE BOARD OF DIRECTORS OF THE UPPER SAN JUAN HEALTH SERVICE DISTRICT HEREBY RESOLVES THAT the facilities renovation project to make Trauma 1 and 2 negative air pressure for an approximate cost of \$119,035 is approved and staff is authorized to take such actions as necessary to complete and operationalize such renovation.

Greg Schulte, Chairman of the USJHSD Board



# MINUTES OF REGULAR BOARD MEETING Tuesday, June 23, 2020

5:30 PM The Board Room 95 South Pagosa Blvd., Pagosa Springs, CO 81147

The Board of Directors of the Upper San Juan Health Service District (the "Board") held its regular board meeting on June 23, 2020, at Pagosa Springs Medical Center, The Board Room, 95 South Pagosa Blvd., Pagosa Springs, Colorado as well as via Zoom video communications.

Directors Present: Chair Greg Schulte, Vice-Chair Matt Mees, Treasurer-Secretary Dr. King Campbell, and Director Mark Zeigler.

Present via Zoom: Treasurer-Secretary Dr. King Campbell, Director Jason Cox, Director Karin Daniels, Dr. Jim Pruitt

Director(s) Absent: None

## 1) CALL TO ORDER

- a) <u>Call for quorum:</u> Chair Schulte called the meeting to order at 5:31 p.m. MST and Clerk to the Board, Heather Thomas, recorded the minutes. A quorum of directors was present and acknowledged by Treasurer-Secretary Dr. Campbell.
- b) <u>Board member self-disclosure of actual, potential or perceived conflicts of interest:</u> There were none.
- c) Approval of the Agenda: The Board noted approval of the agenda.

## 2) PUBLIC COMMENT

There was none.

## 3) PRESENTATION: 2019 Audit

Kami Matzek began, noting clarification regarding the statement of economic uncertainties which may negatively impact the District's financial position, as noted on page 2 of the attached management letter under the paragraph titled "Other Audit Findings or Issues," advising the statement is in every hospital audit, as it is a requirement on all audit firms to report. Ms. Matzek went on to clarify that the wording is meant to make clear that there are economic uncertainties that have the potential to cause substantial doubt but that the firm feels the District's plans and actions have alleviated such doubt.

Ms. Matzek then presented and discussed the attached audit presentation.

Questions were asked and answered including the auditor affirmation that the expensing of supply

and inventory process is acceptable but upon advice will occur twice per year rather than one time per year.

Chair Schulte then inquired of Finance Committee feedback regarding the audit. Treasurer-Secretary Dr. Campbell noted Finance Committee's recommendation to the Board to accept the audit as presented. Director Zeigler, as a member of the Finance Committee, noted an observation of financial improvement as compared to 2018 and congratulated the PSMC staff.

Further questions were asked and answered.

#### 4) <u>REPORTS</u>

# a) Oral Report

# i) Chair Report

Chair Schulte advised still Archuleta County Combined Dispatch is still working on the IGA. The language within one paragraph that was in question has been resolved. Chair Schulte further advised that the updated proposed IGA will be presented to the Executive Management Board at the July meeting. The Executive Management Board will then vote to recommend the IGA to each of the four entities and will be presented to the Board for approval.

## ii) CEO Report

CEO Dr. Webb advised the Board that PSMC continues to be in emergency operations and Incident Command mode. 276 people have been tested for COVID-19, the majority have been systematic. To date, there are three positive tests, two out of three in last two weeks. CEO Dr. Webb noted she would like to encourage people to not be afraid to get screenings, mammograms, checkups, etc.

CEO Dr. Webb then highlighted the following from her written report:

- Dr. Jason Wallace moving back to Pagosa Springs and will begin seeing patients on July 15<sup>th</sup>. CEO Dr. Webb advised Dr. Wallace is Spanish speaking.
- Dr. Reed and her husband will be welcoming a new baby to their family in July and will start her maternity leave around July 20<sup>th</sup>. Dr. Reed will then return on November 2<sup>nd</sup> on a part-time basis.
- Dr. Julie Buchner is changing her primary care practice and will be part-time beginning September 5<sup>th</sup> to have more time with her family.
- Dr. Bill Jordan will return to full-time on August 24<sup>th</sup>. Nurse Practitioner, Kelly Cesary, to continue to care for patients.
- Dr. Virginia Tjan will be moving to Montrose at the end of August.
- A delivery of HVAC project equipment arrived today.
- PSMC remains prepared for a surge.

Ouestions were asked and answered.

iii) <u>Committee Reports:</u> Chair Schulte gave an overview of the reorganization of committees noting the new Facilities Committee will meet as they see fit and the Strategic Planning Committee will be meeting again on June 30<sup>th</sup> to discuss the current strategic plan that is good through 2020.

## (1) Executive Committee

There was no report.

#### (2) Foundation Committee

There was no report.

# (3) Facilities Committee

There was no report.

# (4) Strategic Planning Committee

There was no report.

## (5) Finance Committee & Report

CFO, Chelle Keplinger-Kloep presented and discussed the attached PowerPoint financial presentation.

Director Zeigler asked a question regarding if the net income, as reported, included the additional stimulus funds. CFO Keplinger-Kloep answered.

Chair Schulte asked a question regarding when we would be able to apply for the PPP. CFO Keplinger-Kloep answered.

Director Mees asked for clarification regarding the stated 60/40 split. CFO Keplinger-Kloep answered.

## b) Written Reports

# i) Operations Report

There were no questions.

#### ii) Medical Staff Report

There were no questions.

# 5) <u>DECISION AGENDA</u>

a) Resolution 2020-13: Chair Schulte gave a brief overview of the proposed resolution.

Director Zeigler motioned to accept Resolution 2020-13 regarding acceptance of the audit report of Dingus, Zarecor & Associates, PLLC. Upon motion seconded by Treasurer-Secretary Dr. Campbell, the Board unanimously accepted said resolution.

## 6) CONSENT AGENDA

Director Cox motioned to approve the regular meeting minutes of 05/26/2020, and the Medical Staff report recommendations for new or renewal of provider privileges.

Upon motion seconded by Director Zeigler the Board unanimously approved said consent agenda items.

#### 7) OTHER BUSINESS

CFO Keplinger-Kloep presented the oncology department service line analysis. Questions were asked and answered.

#### 8) ADJOURN

There being no further business, Chair Schulte adjourned the regular meeting at 6:32 p.m. MST.

Respectfully submitted by:

Heather Thomas, serving as Clerk to the Board