

NOTICE OF REGULAR BOARD MEETING OF THE UPPER SAN JUAN HEALTH SERVICE DISTRICT d/b/a PAGOSA SPRINGS MEDICAL CENTER Tuesday, May 24, 2022, at 5:30 PM The Board Room (direct access – northeast entrance) 95 South Pagosa Blvd., Pagosa Springs, CO 81147

DUE TO THE PANDEMIC, IN-PERSON ATTENDEES WILL BE: LIMITED, SCREENED PRIOR TO ENTERING THE MEETING, AND REQUIRED TO WEAR A MASK

Please use this link to join the meeting: https://us02web.zoom.us/j/88304467907 or telephone (346) 248-7799 or (669) 900-6833 Zoom Meeting ID: 883 0446 7907

CORRECTED AGENDA

1) CALL TO ORDER; ADMINISTRATIVE MATTERS OF THE BOARD

- a) Confirmation of quorum
- b) Seat Board Members Elected on May 3, 2022:
 - i) Confirmation by Clerk to the Board of execution of Oath of Office for term of May 2022 until the election in May 2025 for Kate Alfred, Jason Cox, Barbara Parada, and Marty Rose
 - ii) Affirmation by the Clerk to the Board that all Directors are covered by the District's Directors and Officers insurance policy.
- c) Board member self-disclosure of actual, potential or perceived conflicts of interest
- d) 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) PRESENTATIONS

- a) **Recognition of Memi Fox, RN** Memi has been honored with the 2021-2022 Trauma Nurse Coordinator (Level III-IV) Award by the Colorado Trauma Network
- b) PSMC's Quality Assurance Program
- c) Antibiotic Stewardship

4) REPORTS

a) Oral Reports (may be accompanied by a written report)

i) Chair Report Vice Chair Matt Mees

ii) CEO Report Dr. Rhonda Webb

iii) Executive Committee Vice Chair Mees

iv) Foundation Committee Vice Chair Mees, Dir. Dr. Pruitt and CEO R. Webb

v) Facilities Committee Vice Chair Mees and COO K.Douglas

vi) Strategic Planning Committee

vii) Finance Committee & Report Treas./Sec. Zeigler 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. John Wisneski

5) DECISION AGENDA

- a) Consideration of <u>Resolution 2022-14</u> regarding acceptance of the Quality Assurance and Performance Improvement Plan.
- b) Consideration of <u>Resolution 2022-15</u> regarding support for broadband grant by Archuleta County Broadband Services Management Office.
- 6) 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 05/24/2022
 - b) Approval of Minutes for the following meeting(s):
 - i) Regular Meeting of: 04/26/2022 (note: Board members should abstain from approving the Minutes if they were not on the Board for this meeting).
 - c) Approval of Medical Staff report recommendations for new or renewal of provider privileges.

7) EXECUTIVE SESSION

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

8) OTHER BUSINESS

- a) Election of Officers for each of the following Board offices:
 - i) Chair
 - ii) Vice-Chair
 - iii) Treasurer/Secretary

9) ADJOURN



Quality Assurance and Performance Improvement Plan - 2022

Mandated Programs (Regulatory)

The programs below are mandated by Medicare or Medicaid and consist of a variety of measures for which we submit data periodically and process improvement activities for which we must submit evidence of performance each year.

- 1. Hospital Quality Incentive Payment Program (HQIP)
 - Measures:
 - Reducing Racial and Ethnic Disparities in Healthcare
 - Management of Sepsis
 - Zero Suicide Program
 - Antibiotic Stewardship Program
 - Adverse Event Reporting
 - Culture of Safety Survey
 - Advance Care Planning
- 2. Medicare Beneficiary Quality Improvement Program (MBQIP)
 - Measures:
 - Antibiotic Annual Survey
 - Healthcare Workers vaccinated for influenza
 - CMS Measures:
 - ❖ ED-2 Time from decision to admit to actual departure
 - OP-2 Fibrinolytic therapy received within 30 minutes
 - ❖ OP-3 Median time to transfer for acute coronary intervention
 - OP-5 Median time to ECG
 - ❖ OP-18 Median time from admit to departure for ED patients
 - ❖ OP-22 Patient left without being seen in the ED
 - ❖ Hospital Consumer Assessment of Healthcare Providers and Systems (HCAPHS)
 - EMR Accuracy Improvement Project
- 3. Merit Based Incentive Payment System (MIPS)
 - Measures:
 - Electronic Clinical Quality Measures
 - ❖ CMS 122 Diabetes: Hemoglobin A1c Poor Control
 - CMS 137 Initiation and Engagement of Alcohol and Other Drug Dependence Treatment
 - * CMS 127 Pneumococcal Vaccination Status for Older Adults
 - CMS 165 Controlling High Blood Pressure
 - CMS 146 Appropriate Testing for Pharyngitis
 - * CMS 154 Appropriate Treatment with Upper Respiratory Infection
 - Promoting Interoperability
 - Security Risk Assessment
 - e-Prescribing
 - Query Prescription Drug Monitoring Program (PDMP)

- ❖ Health Information Exchange Bi-directional Exchange
- ❖ Provide Patients Electronic Access to their Health Information
- Immunizations Registry (bi-directional)
- Clinical Data Registry
- ♣ Improvement Activity Implementation of Co-location PCP and Mental Health Services

4. Hospital Transformation Program (HTP)

- Measures:
 - Increase follow-up appointments after discharge from inpatient care
 - Increase follow-up appointments after discharge from emergency department
 - Begin social needs screening and referral
 - Reduce readmissions for adults with chronic conditions
 - Begin screening and referral for depression
 - Begin discharge planning and coordination with Medicaid's Regional Accountability Entity for Behavioral Health patients discharged from inpatient or emergency department
 - Initiation of Medication Assisted Treatment in the clinic
 - Transmit a Summary of Care for all discharged patients to the primary care physician
 - Increase the number of patients who had a wellness visit within one year

5. Eligible Hospital Medicare Promoting Interoperability

- Electronic Clinical Quality Measures
 - ED-2 Median Admit Decision Time to ED Departure Time for Admitted Patients
 - VTE-1 Venous Thromboembolism Prophylaxis
 - STK-2 Discharge on Antithrombotic Therapy
 - STK-5 Antithrombotic Therapy by End of Hospital Day 2
- Promoting Interoperability Measures
 - Security Risk Assessment
 - e-Prescribing
 - Query Prescription Drug Monitoring Program
 - Support Electronic Referral Loops by Sending Health Information
 - Support Electronic Referral Loops by Receiving and Incorporating Health Information
 - Provide Patients Electronic Access to their Health Information
 - Immunizations Registry (bi-directional)
 - Electronic Laboratory Reporting

6. Departmental Performance Indicators

Department	KPI	GOAL
Compliance	Completion Rate for Required Compliance Training	95% of staff
Quality	% of Returned HCAPHS Surveys	40% of mailed
		surveys
EMS	Charting Completed in less than 3 days	100% of patients
Clinic	Number of Diabetic Patients with A1c greater than 9	Less than 26%

Patient Financial	Collection of Actual Cash Receipts will equal budgeted cash	100%
Services	goal	
Registration	Point of Service Cash Collections will increase by 50%	150% of prior year
Pre-Service	Reduce write-off for no prior authorization by 25% over prior	Write-off will be
	year.	less than \$60,350
HIM	Coding Completed in less than or equal to 0.5 A/R days	100%
EVS	Air Vents cleaned once each week	100%
HR	Increase number of staff aligned with pay scales	10% over previous
		year
Employee Health	Mandatory Vaccinations (or accommodation) will be	100%
	completed for all staff within 30 days of start date or Titer	
	result or due date.	
Dietary	Food products will be properly labeled with expiration date	100%
Nursing Services	ADT notice sent to admitting hospital on the day of transfer	100%
	Critical Care Records will be reviewed, scanned to the charts,	100%
	when utilized.	
Social Services	MOON form provided to appropriate patients	100%
Cardiopulmonary	Stress ECHO completed within 5 business days of provider	95%
	order.	
Infection Control	IP will complete Environmental Rounds once each weekday	100%
Accounting	Accounts will be paid on or before the due date	100%
Infomatics	Turn-around time for service requests	10 business days
Diagnostic	Completion, with results available for all STAT CT scans	100%
Imaging	within 60 minutes	
Laboratory	Critical values will be reported and documented per policy.	100%
	Correct blood product will be administered to the patient.	100%
Physical Therapy	Waiting area time will be no longer than 5 minutes	95%
Pharmacy	Medications / patients will be scanned prior to administration.	95%
Oncology	Biopsy workflow completed properly	100%
Surgery	Surgical Site Infections	0
	Clean endoscopes will be transported to storage and/or use in	100%
	appropriate labeled, covered container.	
PACU	Medications will be documented at the time of administration	100%

PSMC Selected Ouality/Performance Improvement Projects

These are projects that have been selected based on issues identified through our on-going monitoring programs, occurrence reporting, staff suggestions, patient suggestions and strategic planning.

- 1. Practice Transformation in the Clinic This project allows PSMC to participate in Medicaid revenue enhancement programs while improving the quality of primary care offered in the Clinic.
- 2. MRI Operationalize the new MRI unit and MRI structure in order to keep technologically up-to-date. To be completed during the first quarter of 2022.
- 3. Admission, Discharge and Transfer Electronic Notification Project Medicare requirement for notification of the primary care provider of all admissions, discharges and transfers.

Finance Committee & CFO Report for the USJHSD Board Meeting on May 24, 2022

The Board's Finance Committee met on May 16, 2022. The report below provides an overview of the financials and addresses any questions made by members of the Finance Committee.

1) April Financials:

a) Bottom line and Income Statement:

- i) Historically PSMC has a negative bottom line until May or June each year PSMC budgeted a net income loss for April of <-\$213,980.00> and PSMC's actual net income loss for April was slightly less at <-\$169,828.00>.
- ii) On the Income Statement:
 - (1) Gross Revenue: Gross patient revenues are 5% higher than budget.
 - (2) <u>Deductions to Gross Revenues for Payer Contractuals, Charity and Bad Debt</u>: Each month PSMC has deductions to its revenue for bad debt, charity care as well as deductions made by third-party payers (Medicare and commercial insurers) that are referred to as payer contractuals. Year to date, these deductions to revenue are slightly less than budget.
 - (3) <u>Expenses</u>: Expenses for April were 7.27% greater than budget. The main reason expenses are higher is traveler contract labor is about \$400,000 higher than budget (we still have travelers in outpatient clinic, lab, radiology, emergency department and inpatient).
 - (4) Net Revenues: Year to date, PSMC is operating at a loss. Finance Committee member Mark Floyd made his annual reminder to the Finance Committee that PSMC business typically runs in the red through May and we make up ground during the summer.
- iii) Days of accounts receivable continued at A/R 49.5 days.

b) Balance Sheet:

- i) As of April 30, 2022, PSMC has 140.45 days of cash on hand.
- ii) On the Balance Sheet, PSMC has additional cash on hand that appears as both an asset and a liability as follows:
 - (1) \$669,775 (additional 6.4 days of cash) of CARES Funding (appears in the Assets column as "Relief Fund Restricted" and in the Liabilities column as "Relief Fund Liability").
 - (2) \$1,690,468 (additional 16.16 days of cash) of Medicare Accelerated Payment in 2020, Medicare made an advance which PSMC applies against sums due to PSMC for Medicare services. Staff reported that these funds are being applied at a faster rate so we will see these funds depleted at a faster rate than the past. Any sums not applied through September 2022 are returned to Medicare.

2) Finance Committee Recommendations:

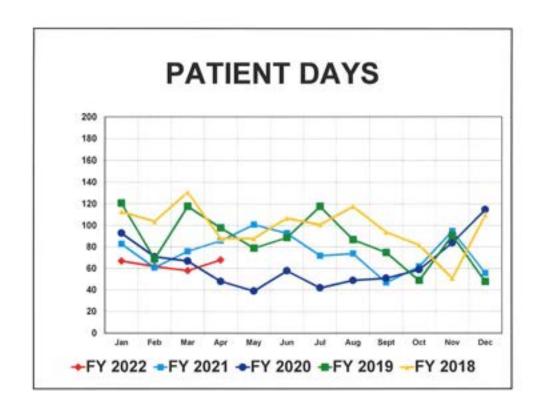
a) The Finance Committee expressed no issues or concerns with the April 2022 financial reports.

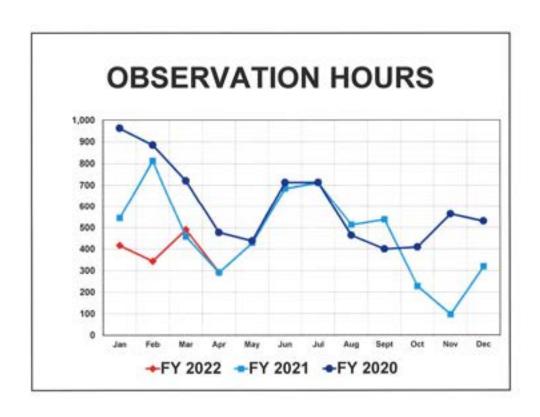


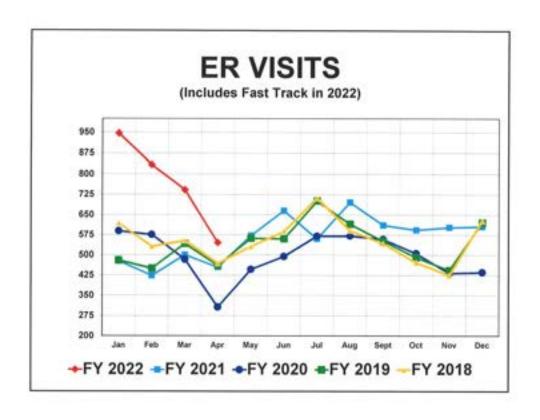
FINANCIAL PRESENTATION YTD APRIL 2022

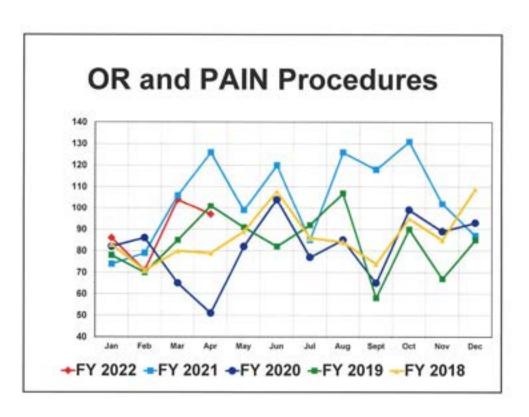
Glossary of Terms

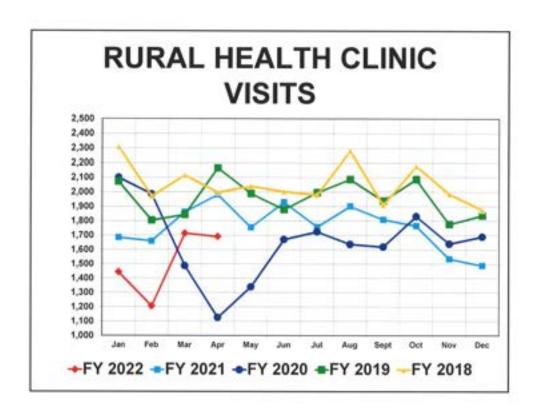
- · Gross revenue is the total amount of charges.
- Net revenue = charges less contractuals, bad debt and charity care and then add back the provider tax income.
- Contractuals are discounts to gross revenue we contractually accept from commercial patients or are required to accept by governmental payers.
- Bad Debt is the amount that is written off due to the inability to collect from patients.
- Net Income = Net Revenue Expenses + tax and other income.
- Gross Days in accounts receivable = Three months average gross revenue divided into the total A/R. (National benchmark is 60 days.)
- Days Cash on hand = Total Expenses YTD (less depr and amortization) divided into the total cash (less bond reserve, Medicare advance payments and & unapplied stimulus).

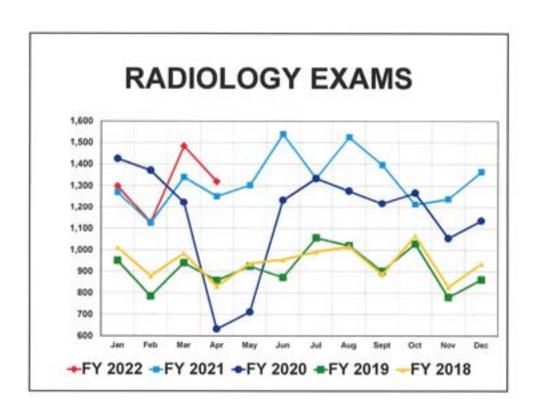


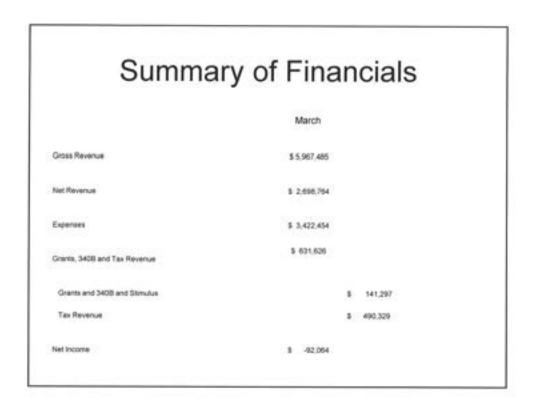


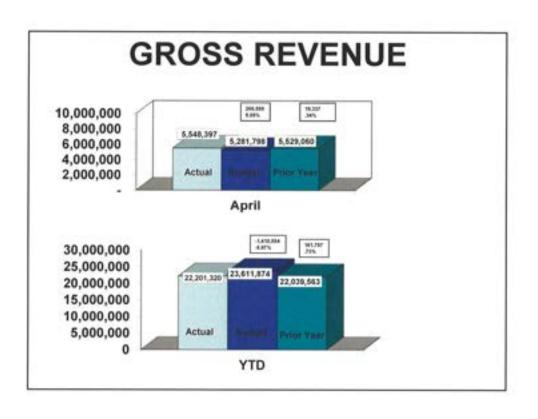


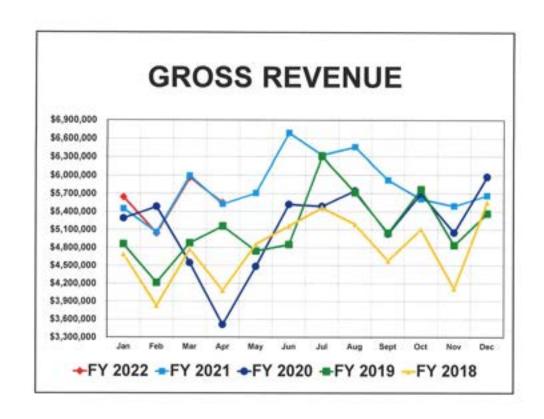


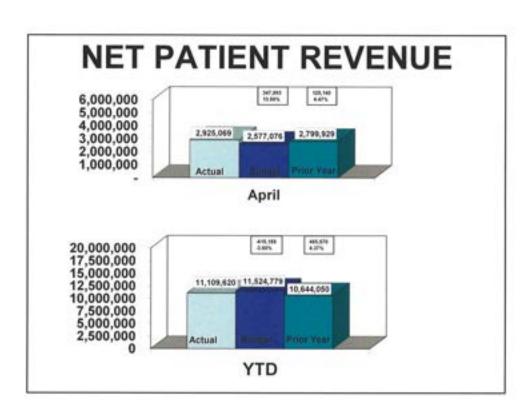


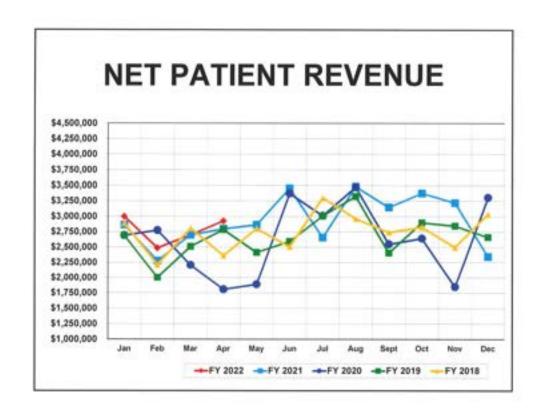


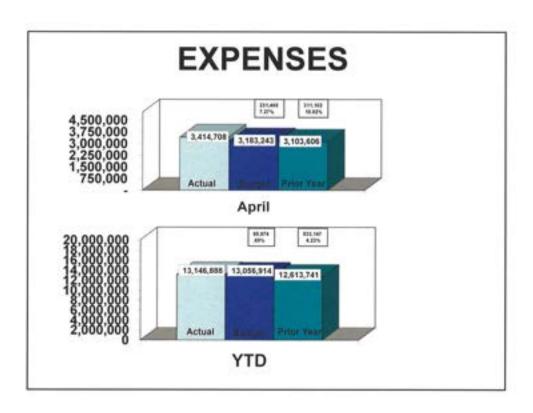


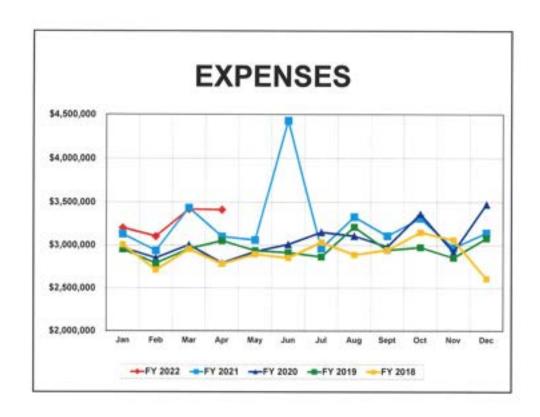


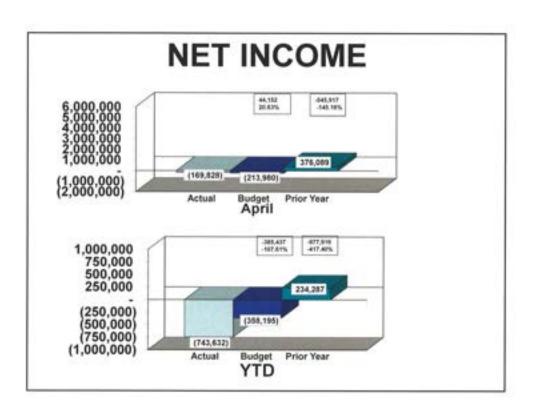


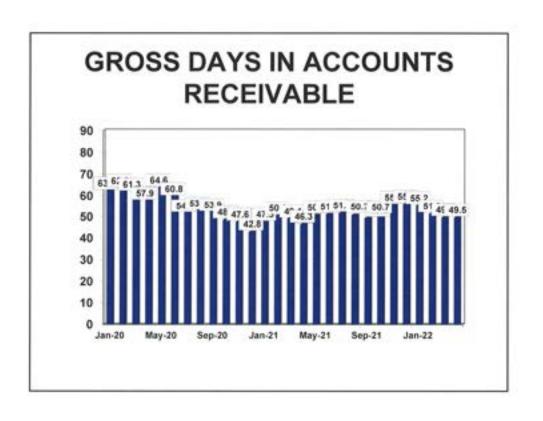




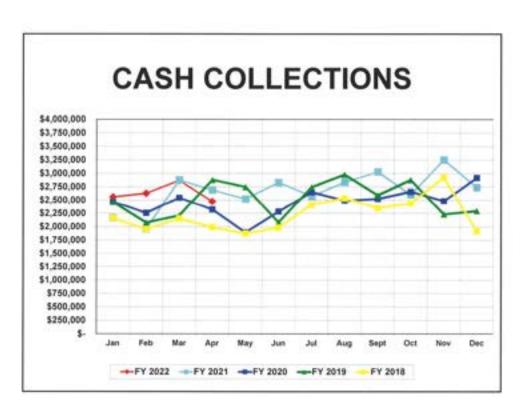












		ı	ncome State	ement Ap	ril 30, 2022				Page 1
			Current	Month	07		Year-to-Dat	te	1100
		2022	Budget	Difference	Variance	2022	Budget	Difference	Variance
	Revenue								
7	Total In-patient Revenue	438,052	444,472	(6,420)	-1%	1,787,244	1,949,355	(162,111)	-8%
7	Total Out-patient Revenue	4,626,745	4,410,505	216,240	5%	18,483,746	19,754,183	(1,270,437)	-6%
8	Professional Fees	483,600	426,821	56,779	13%	1,930,330	1,908,336	21,994	1%
9	Total Patient Revenue	5,548,397	5,281,798	266,599	5%	22,201,320	23,611,874	(1,410,554)	-6%
0	Revenue Deductions & Bad Debt								
1	Contractual Allowances	2,810,883	2,752,339	58,544	2%	10,904,859	12,299,887	(1,395,028)	-11%
2	Charity	32,545		32,545		131,495		131,495	
3	Bad Debt	21,649	183,280	(161,631)	-88%	1,017,590	819,060	198,530	24%
4	Provider Fee & Other	(241,749)	(230,897)	(10,852)	5%	(962,244)	(1,031,852)	69,608	-7%
5	Total Revenue Deductions & Bad Debt	2,623,328	2,704,722	(81,394)	-3%	11,091,700	12,087,095	(995,395)	-8%
6	Total Net Patient Revenue	2,925,069	2,577,076	347,993	14%	11,109,620	11,524,779	(415,159)	-4%
7	Grants	77,288	5,747	71,541	1245%	77,288	18,351	58,937	321%
8	HHS Stimulus Other Revenue		1000					200	
9	COVID PPP Loan Forgiveness		2	2	0%				0%
0	Other Operating Income - Misc	79,517	179,713	(100,196)	-56%	481,222	577,408	(96,186)	-17%
1	Total Net Revenues	3,081,874	2,762,536	319,338	12%	11,668,130	12,120,538	(452,408)	-4%
2	Operating Expenses								
3	Salary & Wages	1,631,157	1,639,415	(8,258)	-1%	6,462,439	6,715,090	(252,651)	-4%
4	Benefits	311,423	281,751	29,672	11%	1,070,527	1,140,493	(69,966)	-6%
5	Professional Fees/Contract Labor	438,681	36,489	402,192	1102%	900,430	149,768	750,662	501%
6	Purchased Services	203,457	216,714	(13,257)	-6%	729,907	879,819	(149,912)	-17%
7	Supplies	381,995	501,878	(119,883)	-24%	1,981,039	2,106,762	(125,723)	-6%
8	Rent & Leases	18,485	14,109	4,376	31%	76,244	58,680	17,564	30%
9	Repairs & Maintenance	46,198	43,300	2,898	7%	205,692	177,652	28,040	16%
0	Utilities	33,110	39,376	(6,266)	-16%	194,398	172,876	21,522	12%
1	Insurance	35,174	29,256	5,918	20%	148,501	116,983	31,518	27%
2	Depreciation & Amortization	151,033	172,209	(21,176)	-12%	588,506	663,633	(75,127)	-11%
3	Interest	42,641	66,533	(23,892)	-36%	285,270	274,812	10,458	4%
4	Other	121,354	142,213	(20,859)	-15%	503,935	600,346	(96,411)	-16%
5	Total Operating Expenses	3,414,708	3,183,243	231,465	7%	13,146,888	13,056,914	89,974	156
6	Operating Revenue Less Expenses	(332,834)	(420,707)	87,873	-21%	(1,478,758)	(936,376)	(542,382)	58%
7	Non-Operating Income								
8	Tax Revenue	163,006	181,427	(18,421)	-10%	735,126	507,421	227,705	45%
9	Donations		25,300	(25,300)	-100%		70,760	(70,760)	-100%
0	Total Non-Operating Income	163,006	206,727	(43,721)	-21%	735,126	578,181	156,945	27%
1	Total Revenue Less Total Expenses \$	(169,828) \$	(213,980)	\$ 44,152	-21%	\$ (743,632) \$	(358,195) \$	(385,437)	108%

		Income	Statement	Comparison -	April 30, 2	2022			Page 2
	V		Current l	Month	200		Year-to-Di		
		2022	2021	Difference	Variance	2022	2021	Difference	Variance
	Revenue								
	Total In-patient Revenue	438,052	462,303	(24,251)	-5%	1,787,244	1,768,657	18,587	1%
7	Total Out-patient Revenue	4,626,745	4,622,216	4,529	0%	18,483,746	18,482,316	1,430	0%
8	Professional Fees	483,600	444,541	39,059	9%	1,930,330	1,788,590	141,740	8%
9	Total Patient Revenue	5,548,397	5,529,060	19,337	0%	22,201,320	22,039,563	161,757	1%
0	Revenue Deductions & Bad Debt								
1	Contractual Allowances	2,810,883	2,715,520	95,363	4%	10,904,859	11,394,277	(489,418)	-4%
ż	Charity	32,545	51,054	(18,509)	-36%	131,495	339,931	(208,436)	-61%
3	Bad Debt	21,649	172,631	(150,982)	-87%	1,017,590	501,401	516,189	103%
4	Provider Fee & Other	(241,749)	(210,074)			(962,244)	(840,096)	(122,148)	15%
5	Total Revenue Deductions & Bad Debt	2,623,328	2,729,131	(105,803)		11,091,700	11,395,513	(303,813)	-3%
5	Total Net Patient Revenue	2,925,069	2,799,929	125,140	4%	11,109,620	10,644,050	465,570	4%
7	Grants	77,288	195	77,093	39535%	77,288	504,050	(426,762)	-85%
8	HHS Stimulus Other Revenue		362,381	(362,381)	-100%		464,244	(464,244)	-100%
9	COVID PPP Loan Forgiveness	5.75		8 9 1					
0	Other Operating Income - Misc	79,517	173,352	(93,835)	-54%	481,222	605,109	(123,887)	-20%
1	Total Net Revenues	3,081,874	3,335,857	(253,983)	-8%	11,668,130	12,217,453	(549,323)	-4%
2	Operating Expenses								
3	Salary & Wages	1,631,157	1,697,976	(66,819)	-4%	6,462,439	6,654,376	(191,937)	-3%
4	Benefits	311,423	271,046	40,377	15%	1,070,527	1,149,851	(79,324)	-7%
5	Professional Fees/Contract Labor	438,681	30,654	408,027	1331%	900,430	117,639	782,791	665%
6	Purchased Services	203,457	201,035	2,422	1%	729,907	659,548	70,359	11%
7	Supplies	381,995	407,527	(25,532)	-6%	1,981,039	1,888,783	92,256	5%
8	Rent & Leases	18,485	35,841	(17,356)	-48%	76,244	140,098	(63,854)	-46%
9	Repairs & Maintenance	46,198	33,440	12,758	38%	205,692	169,715	35,977	21%
0	Utilities	33,110	18,153	14,957	82%	194,398	156,852	37,546	24%
1	Insurance	35,174	28,676	6,498	23%	148,501	117,409	31,092	26%
2	Depreciation & Amortization	151,033	148,271	2,762	2%	588,506	597,893	(9,387)	-2%
3	Interest	42,641	90,996	(48,355)	-53%	285,270	343,626	(58,356)	-17%
4	Other	121,354	139,991	(18,637)	-13%	503,935	617,951	(114,016)	-18%
5	Total Operating Expenses	3,414,708	3,103,606	311,102	10%	13,146,888	12,613,741	533,147	4%
6	Operating Revenue Less Expenses	(332,834)	232,251	(565,085)	-243%	(1,478,758)	(396,288)	(1,082,470)	273%
7	Non-Operating Income								
8	Tax Revenue	163,006	143,838	19,168	13%	735,126	630,575	104,551	17%
9	Donations		40						
0	Total Non-Operating Income	163,006	143,838	19,168	13%	735,126	630,575	104,551	17%
1	Total Revenue Less Total Expenses	(169,828)	\$ 376,089	\$ (545,917)	-145%	\$ (743,632) \$	234,287	(977,919)	305%

	Ba	lance	Sł	neet Ap	oril 30, 2022		Page 3
Assets	Curre			Prior Month	Liabilities	Current Month	Prior Month
Current Assets					Current Liabilities		
Cash							
Operating	\$ 13,68	1,905	\$	14,118,616	Accts Payable - System	\$ 582,785	\$ 947,365
Debt Svc. Res. 2016 Bonds	87	8,731		878,731	Accrued Expenses	1,081,619	951,644
Bond Funds - 2016 Bonds		10		10	Cost Report Settlement Res	788,033	793,340
Bond Funds - 2021 / 2006	1,01	7,078		866,477	Wages & Benefits Payable	1,677,985	1,485,977
Escrow - UMB		-		2	Deferred Revenue	712,277	875,284
COVID PPP		1.0		18	COVID PPP Short Term Loan		7.5
Relief Fund Cash Restricted	66	9,775		669,775	Relief Fund Liability	669,775	669,775
Medicare Accelerated Pmt	1,69	0,468		1,985,738	Medicare Accelerated Pmt Liab	1,690,468	1,985,738
Total Cash	17,93	7,967		18,519,347	Current Portion of LT Debt-Lease	9,016	18,007
					Current Portion of LT Debt-2006		
Accounts Receivable					Current Portion of LT Debt-2016	340,000	340,000
Patient Revenue - Net	4,52	4,107		4,319,418	Total Current Liabilities	7,551,958	8,067,130
Other Receivables	1,02	8,603		1,217,949			
Total Accounts Receivable	5,55	2,710		5,537,367	Long-Term Liabilities		
					Leases Payable	-	
Inventory	1,78	5,965		1,809,592	Equipment Lease (Wells Fargo)		
1990300199024					Bond Premium (Net) - 2006 Def Outflows	201,302	202,414
Total Current Assets	25,27	6,642		25,866,306	Bond Premium (Net) - 2016	122,347	122,772
					Bond Premium (Net) - 2021	746,583	750,554
					Bonds Payable - 2021	7,885,000	7,885,000
Fixed Assets					Bonds Payable - 2006		***************************************
Property Plant & Equip (Net)	7,63	3,317		7,684,891	Bonds Payable - 2016	9,250,000	9,250,000
Electronic Health Record (Net)				5 m	Total Long-Term Liabilities	18,205,232	18,210,740
Clinic Expansion	13,37	7,405		13,377,405			
Work In Progress	32	1,855		321,855	Net Assets		
Land	10	1,000		101,000	Un-Restricted	22,063,448	22,063,448
Total Fixed Assets	21,43	3,577		21,485,151	Current Year Net Income/Loss	(743,632)	(573,804
					Total Un-Restricted	21,319,816	21,489,644
Other Assets							
Prepaids & Other Assets	36	6,787		416,057	Restricted		
Total Other Assets	36	6,787		416,057	Total Net Assets	21,319,816	21,489,644
Total Assets	\$ 47,07	7,006	\$	47,767,514	Total Liabilities & Net Assets	\$ 47,077,006	\$ 47,767,514

Monthly Trends

	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22
Activity		31					0.000						30
In-Patient Admissions	33	41					100000						30
In-Patient Days	86	101	93	72	74			95		417.000			68
Avg Stay Days (in-patients)	2.6	2.5	2.8	2.1	2.3	2.8	2.6	3.0	2.1	2.2	2.5	2.6	2.3
Swing Bed Admissions	0	0	0	0	0	0	0	0	0	0	0	0	.0
Swing Bed Days	0	0	0	0	0	0	0	0	0	0		0	0
Avg Length of Stay (Swing)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0,0
Average Daily Census	2.9	3.3	3.1	2.3	2.4	1.6	2.0	3.2	1.8	2.2	2.2	1.9	2.3
Statistics													
E/R visits	455	573	666	561	697	612	594	604	607	946	834	742	546
Observ Hours	291	428	685	713	513	538	228	97	319	416	343	490	292
Lab Tests	5,583	6,045	6,032	5,687	5,586	5,409	5,918	6,005	5,498	5,660	4,897	5,200	5,353
Radiology/CT/MRI Exams	1,252	1,304	1,539	1,335	1,525	1,397	1,214	1,240	1,365	1,299	1,195	1,483	1,320
OR Cases	126	99	120	85	126	118	131	102	87	85	71	104	97
Clinic Visits	1,983	1,756	1,931	1,759	1,902	1,810	1,766	1,536	1,490	1,444	1,206	1,714	1,692
Spec. Clinic Visits	109	101	113	204	89	85	75	46	37	33	32	44	27
Oncology Clinic Visits	127	116	127	90	135	119	114	110	103	106	107	116	105
Oncology/Infusion Patients	150	158	159	151	195	160	156	193	174	193	198	166	139
Infusion Patients	51	75	96	122	109	92	93	137	101	109	108	116	66
EMS Transports	83	112	137	113	126	108	93	106	124	101	100	112	87
Total Stats	10,210	10,767	11,605	10,820	11,003	10,448	10,382	10,176	9,905	10,393	9,091	10,287	9,724
	In-Patient Days Avg Stay Days (in-patients) Swing Bed Admissions Swing Bed Days Avg Length of Stay (Swing) Average Daily Census Statistics E/R visits Observ Hours Lab Tests Radiology/CT/MRI Exams OR Cases Clinic Visits Oncology Clinic Visits Oncology/Infusion Patients Infusion Patients EMS Transports	Activity 30	Activity 30 31 In-Patient Admissions 33 41 In-Patient Days 86 101 Avg Stay Days (in-patients) 2.6 2.5 Swing Bed Admissions 0 0 Swing Bed Days 0 0 Avg Length of Stay (Swing) 0.0 0.0 Average Daily Census 2.9 3.3 Statistics E/R visits 455 573 Observ Hours 291 428 Lab Tests 5,583 6,045 Radiology/CT/MRI Exams 1,252 1,304 OR Cases 126 99 Clinic Visits 1,983 1,756 Spec. Clinic Visits 109 101 Oncology Clinic Visits 127 116 Oncology/Infusion Patients 150 158 Infusion Patients 51 75 EMS Transports 83 112	Activity 30 31 30 In-Patient Admissions 33 41 33 In-Patient Days 86 101 93 Avg Stay Days (in-patients) 2.6 2.5 2.8 Swing Bed Admissions 0 0 0 0 Swing Bed Days 0 0 0 0 Avg Length of Stay (Swing) 0.0 0.0 0.0 Average Daily Census 2.9 3.3 3.1 Statistics E/R visits 455 573 666 E/R visits 455 573 666 60 Observ Hours 291 428 685 685 Lab Tests 5,583 6,045 6,032 865 Radiology/CT/MRI Exams 1,252 1,304 1,539 0R OR Cases 126 99 120 120 120 120 120 120 120 120 120 120 120 120 120 120 120	Activity 30 31 30 31 30 31 31 30 31 31	Activity 30 31 30 31 31 31 31 31	Activity 30 31 30 31 31 30 31 31	Activity 30 31 30 31 30 31 30 31 31	Activity 30 31 30 30	Activity 30 31 30 31 30 31 30 31 30 31 30 31 30 31 30 31 30 31 31	Activity 30 31 30 31 30 31 30 31 30 31 31	Activity 30 31 30 31 30 31 31 30 31 31 30 31 31 28 In-Patient Admissions 33 41 33 35 32 17 24 32 27 31 25 In-Patient Days 86 101 93 72 74 47 62 95 56 67 62 Avg Stay Days (in-patients) 26 25 28 21 23 28 26 3.0 2.1 2.2 2.5 Swing Bed Admissions 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Activity 30 31 30 31 30 31 31 30 31 30 31 30 31 31

		COLUMN TO SERVICE STREET	Stat	istical Revie		200		- University		age 5
	š —	April		X-50-0 - (X-0)-1500	April				rior Y-T-D	250n Vicin
2022	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										
Admissions:			- 11			- 11				
Acute	30	24	6	108	108		108	116	(8)	-79
Swing Bed		-					-			
Total	30	24	6	108	108	8	108	116	(8)	-79
Patient Days:										
Acute	68	60	8	255	267	(12)	255	306	(51)	-179
Swing Bed		-	+ 1		-	- 11				
Total	68	60	8	255	267	(12)	255	306	(51)	-179
Average Daily Census:	96.00		- 11							
# Of Days	30	30	- 11	120	120	l I I	120	120		
Acute	2.3	2.0	0.3	2.1	2.2	(0.1)	2.1	2.6	(0.4)	-179
Swing Bed		*	- 6		7	-	18.			
Total	2.3	2.0	0.3	2.1	2.2	(0.1)	2.1	2.6	(0.4)	-179
Length of Stay:	200.00									
Acute	2.3	2.5	(0.2)	2.4	2.5	(0.1)	2.4	2.6	(0.3)	-109
Swing Bed	*					-				09
Total	2.3	2.5	(0.2)	2.4	2.5	(0.1)	2.4	2.6	(0.3)	-109
Out-Patient			- 							
Out-Patient Visits			- 11			l I I				
E/R Visits	546	471	75	3,068	2,105	963	3,068	1,858	1,210	659
Observ admissions	14	22	(8)	76	97	(21)	76	103	(27)	-269
Lab Tests	5,353	4,782	571	21,110	21,414	(304)	21,110	22,048	(938)	-49
Radiology/CT/MRI Exams/M	1,320	1,107	213	5,297	4,966	331	5,297	4,990	307	69
OR Cases	97	90	7	358	398	(40)	358	385	(27)	-79
Clinic Visits	1,692	1,481	211	6,056	6,635	(579)	6,056	7,193	(1,137)	-169
Spec. Clinic Visits	27	79	(52)	136	360	(224)	136	421	(285)	-689
Oncology Clinic Visits	105	96	9	434	430	4	434	441	(7)	-29
Oncology/Infusion Patients	139	132	7	696	593	103	696	526	170	329
Infusion Patients	66	73	(7)	399	326	73	399	201	198	999
EMS Transports	87	92	(5)	400	409	(9)	400	395	5	19
Total	9,446	8,425	1,021	38,030	37,733	297	38,030	38,561	(531)	-19

Pagosa Springs Medical Center

Cerner/Healthland Accounts Receivable for Hospital by Payor and Days Outstanding -- As of April 30, 2022

Page 6

	79.76	0-30 Days		31-60 Days		61-90 Days		91-120 Days	1	21-150 Days		151-180 Days		181+ Days		Total	Percent of	Accts sent to Collections
Medicare Medicaid Third Party Self-Pay	\$	2,124,153 656,308 1,417,899 213,405	\$	146,669 101,405 489,548 348,354	5	189,798 33,629 225,415 244,778	\$	130,155 81,641 171,334 226,813	\$	45,920 32,575 179,014 183,285	\$	65,618 19,992 72,649 131,643	\$	174,308 237,429 444,784 812,881	5	2,876,621 1,162,979 3,000,643 2,161,159	31% 13% 33% 23%	
Current Month Total Pct of Total	\$	4,411,765 48%	5	1,085,976 12%	\$	693,620 8%	\$	609,943 7%	5	440,794 5%	\$	289,902 3%	\$	1,669,402 18%	5	9,201,402 100%	100%	215,897
Mar-22 Pct of Total	5	4,269,812 47%	5	1,152,479 13%	5	785,374 9%	\$	537,928 6%	5	428,578 5%	5	254,062 3%	\$	1,720,326 19%	\$	9,148,559 100%		167,155
Feb-22 Pct of Total	\$	4,206,381 45%	5	1,389,690 15%	\$	673,681 7%	\$	575,452 6%	\$	413,271 4%	S	309,780 3%	\$	1,752,689 19%	\$	9,320,944 100%		199,177
Jan-22 Pct of Total	\$	4,815,885 48%	5	1,218,564 12%	5	968,019 10%	5	573,545 6%	5	504,719 5%	5	332,446 3%	5	1,663,719 17%	5	10,076,897 100%		184,318
Dec-21 Pct of Total	5	4,411,483 43%	\$	1,771,146 17%	\$	897,483 9%	5	629,416 6%	5	471,528 5%	\$	299,814 3%	\$	1,716,882 17%	s	10,197,752 100%		246,249
Nov-21 Pct of Total	\$	5,254,766 51%	5	1,288,663 12%	5	765,276 7%	5	596,925 6%	5	429,612 4%	\$	449,363 4%	\$	1,582,207 15%	5	10,366,811 100%		223,165
Oct-21 Pct of Total	\$	4,591,197 46%	\$	1,412,195 14%	\$	784,524 8%	\$	573,095 6%	\$	661,916 7%	5	330,409 3%	\$	1,562,788 16%	5	9,916,124 100%		372,288
Sep-21 Pct of Total	\$	4,623,878 46%	5	1,367,954 14%	\$	793,192 8%	\$	861,326 9%	5	484,324 5%	5	263,617 3%	5	1,610,326 16%	s	10,004,617 100%		251,846
Aug-21 Pct of Total	5	5,070,970 47%	5	1,423,538 13%	5	1,289,523 12%	5	637,852 6%	5	423,338 4%	5	370,971 3%	\$	1,518,317 14%	5	10,734,509 100%		181,959
Jul-21 Pct of Total	5	4,918,121 47%	5	1,859,528 18%	5	864,925 8%	s	524,846 5%	5	546,331 5%	5	340,021 3%	\$	1,455,387 14%	5	10,509,159 100%		125,498
Jun-21 Pct of Total	S	4,450,225 49%	\$	991,357 11%	\$	492,319 5%	5	470,912 5%	\$	586,430 6%	5	386,858 4%	\$	1,658,314 18%	5	9,036,415 100%		248,707
May-21 Pct of Total	5	4,564,596 48%	\$	1,223,151 13%	5	900,499 9%	5	559,379 6%	5	516,823 5%	\$	338,558 4%	s	1,383,875 15%	s	9,486,881 100%		95,678
Apr-21 Pct of Total	s	4,315,723 49%	\$	1,332,592 15%	5	712,599 8%	5	645,005 7%	5	417,714 5%	5	166,007 2%	5	1,174,380 13%	5	8,764,020 100%		190,242
Mar-21 Pct of Total	s	4,536,107 50%	5	1,283,697 14%	\$	893,010 10%	\$	614,678 7%	s	287,740 3%	5	205,954 2%	5	1,187,089 13%	5	9,008,275 100%		141,056
Feb-21	s	4,632,177	\$	1,808,956	5	796,014	5	329,120	5	255,606	5	194,030	5	1,194,813	5	9,210,716		116,794

Pagosa Springs Medical Center - - - Net Days in A/R 2022

Page 7

1			31		28		31	30		31		30
1			Jan-22		Feb-22		Mar-22	Apr-22	8	May-21	9	Jun-21
	Net Accounts Receivable	\$	5,205,517	\$	4,682,554	\$	4,319,418	\$ 4,524,107	5	3,877,097	\$	4,279,409
	Net Patient Revenue	\$	2,998,220	\$	2,487,566	S	2,698,764	\$ 2,925,069	\$	2,867,264	\$	3,457,110
	Net Patient Rev/Day (2 month Avg)	\$	92,779	\$	87,949	\$	92,280	\$ 92,912	\$	103,865	\$	100,513
ě,	Net Days in A/R	\dashv	56	\vdash	53	\vdash	47	49		37		43

Γ			31		31		30	8 -	31		30		31
- 1			Jul-21		Aug-21		Sep-21	5	Oct-21		Nov-21		Dec-21
1	Net Accounts Receivable	\$	4,520,929	\$	4,713,332	\$	4,472,476	\$	4,754,058	\$	5,115,376	\$	4,491,257
ŀ	Net Patient Revenue	\$	2,659,431	5	3,484,951	\$	3,150,551	\$	3,377,543	\$	3,221,526	\$	2,347,320
,	Net Patient Rev/Day (2 month Avg)	5	99,103	\$	108,718	\$	106,986	\$	108,169	\$	91,552	\$	86,218
۰	Net Days in A/R		46	\vdash	43	\vdash	42		44	\vdash	56	Н	52

Medicare		33%	21	S	92,194	\$	638,904
Medicaid		7%	35	5	92,194	\$	225,875
Blue Cross		15%	48	\$	92,194	5	663,797
Commercial		26%	65	S	92,194	\$	1,558,078
Self Pay		19%	150	5	92,194	5	2,627,529
5000000000	Total:	100%				5	5,714,183
						\$	92,194
			Gross Days i	n A/R 1	Target		62

Pagosa Springs Medical Center Revenue by Financial Class April 30, 2022

Financial Class	Inpatient MTD	Outpatient MTD	Total MTD	% MTD
Auto/Liability Insurance		55,697.45	55,697.45	1.00%
Blue Cross	8,197.30	536,387.24	544,584.54	9.82%
Champus		34,455.30	34,455.30	0.62%
Commercial Insurance	92,556.00	570,314.58	662,870.58	11.95%
Medicaid	70,733.29	998,694.23	1,069,427.52	19.27%
Medicare	100,417.92	1,667,806.13	1,768,224.05	31.87%
Medicare HMO	167,999.40	720,781.60	888,781.00	16.02%
Self Pay	14,138.90	156,629.08	170,767.98	3.08%
Self Pay - Client Billing		7,292.40	7,292.40	0.13%
Veterans Administration	85,186.13	126,040.12	211,226.25	3.81%
Workers Compensation	33000 m	135,069.78	135,069.78	2.43%
Total	539,228.94	5,009,167.91	5,548,396.85	100.00%

Financial Class	Inpatient YTD	Outpatient YTD	Total YTD	% YTD	12/31/2021 % YTD	12/31/20 % YTD	12/31/19 % YTD	12/31/18 % YTD	12/31/17 % YTD	12/31/16 % YTD
Auto/Liability Insurance		151,947.47	151,947.47	0.68%	1.41%	0.91%	1.15%	1.05%	1.24%	1.11%
Blue Cross	94,449.60	2,268,559.57	2,363,009.17	10.64%	11.40%	12.38%	15.40%	15.42%	15.90%	15.83%
Champus		179,373.13	179,373.13	0.81%	0.95%	0.82%	0.31%	0.08%	0.07%	0.19%
Commercial Insurance	308,705.58	2,320,387.14	2,629,092.72	11.84%	12.12%	11.72%	11.34%	13.08%	11.79%	13.08%
Medicaid	335,986.49	3,765,042.08	4,101,028.57	18.47%	17.50%	18.86%	18.75%	18.22%	20.28%	21.56%
Medicare	678,792.26	6,903,576.04	7,582,368.30	34.15%	36.51%	38.60%	36.99%	36.75%	35.27%	35.90%
Medicare HMO	472,736.97	2,614,674.31	3,087,411.28	13.91%	11.01%	7.77%	7.20%	4.47%	3.55%	2.76%
Self Pay	60,879.29	674,282.91	735,162.20	3.31%	3.95%	3.68%	4.40%	5.40%	6.96%	5.26%
Self Pay - Client Billing	270	72,370.44	72,370.44	0.33%	0.36%	0.22%	0.18%	0.18%	0.19%	0.17%
Veterans Administration	134,703.13	809,204.37	943,907.50	4.25%	3.76%	4.13%	2.74%	4.13%	3.58%	2.74%
Workers Compensation		355,648.95	355,648.95	1.60%	1.03%	0.92%	1.52%	1.22%	1.17%	1.37%
Total	2,086,253.32	20,115,066.41	22,201,319.73	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.97%
Blank										0.00%
HMO (Health Maint Org)										0.03%
Total						100.00%	100.00%	100.00%	100.00%	100.00%

Cash Flows from operating activities	April 2022
Change in net assets	(169,828)
Adjustments to reconcile net assets to net cash	
Depreciation and amortization	151,033
Patient accounts receivable	(204,689)
Accounts payable and wages payable	(172,572)
Accrued liabilities	129,975
Pre-paid assets	49,270
Deferred revenues	(163,007)
Other receivables	189,346
Reserve for third party settlement	(5,307)
Inventory	23,627
Net Cash Provided by (used in) operating activities	(172,152)
Cash Flows from investing activities	
Purchase of property and equipment	(104,967)
Work in progress	
Proceeds from sale of equipment/(Loss)	
Net Cash Provided by (used in) investing activities	(104,967)
Cash Flows from financing activities	
Principal payments on long-term debt	
Proceeds from debt (funding from 2021 Bond)	
Proceeds from PPP Short Term Loan	
Recognize Amounts from Relief Fund	
Payments/Proceeds from Medicare Accelerated Payment	(295,270)
Change in Prior Year Net Assets	
Change in leases payable	(8,991)
Net Cash Provided by (used in) financing activities	(304,261)
Net Increase(Decrease) in Cash	(581,380)
Cash Beginning of Month	18,519,347
Cash End of Month	17,937,967

		2	022	81			
Month	Cash Goal	Actual Cash	Variance	% Collected	GL	Non AR	Total
Jan-22	\$2,121,338.00	\$2,559,519.95	\$438,181.95	120.66%	\$	(89,581.25)	\$2,469,938.70
Feb-22	\$2,758,055.00	\$2,629,036.30	(\$129,018.70)	95.32%	\$	229,760.89	\$2,858,797.19
Mar-22	\$2,447,401.00	\$2,867,669.94	\$420,268.94	117.17%	\$	(100,621.01)	\$2,767,048.93
Apr-22	\$2,458,581.00	\$2,473,500.99	\$14,919.99	100.61%	\$	(75,703.82)	\$2,397,797.17
	\$9,785,375.00	\$10,529,727.18	\$744,352.18	107.61%	\$	(36,145.19)	\$10,493,581.99

Pagosa Springs Medical Center Cash Forecast as of end of April 2022 Forecast Months Based on Budget and Actual

Prepared 5/17/2022 Cash balance 18,153,025 at 12/31/21

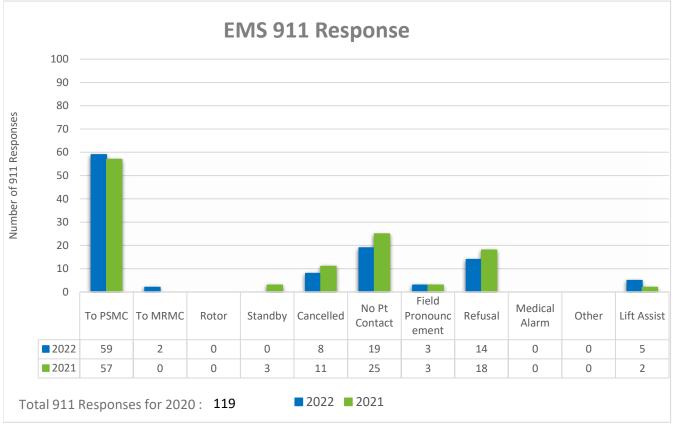
	(1) Net Asset Change	(2) Depreciation	(3) Receivables	(4) Payables & Other Liabilities	(5) Pre-Paid Assets	(6) Deferrred Revenue	(7) Third Party	(8)	(9) Equipment Purchase	(10) Lease Payables	(11) Other	Net Cash Change	Balance
January 2022 (Actual)	(92,659)	145,357	(208,375)	1,309	(27,688)		(43,608)	(3,452)	(38,542)	(14,316)	(143,656)	(425,630)	17,727,395
February 2022 (Actual)	(389,081)	145,171	749,244	284,437	(8,139)	(70,348)	(204,353)	2,184	(122,975)	(14,341)	(159,398)	212,401	17,939,796
March 2022 (Actual)	(92,064)	146,944	865,722	429,452	26,909	(490,329)	(3,184)	(6,718)	(10,302)	(14,367)	(272,512)	579,551	18,519,347
April 2022 (Actual)	(169,828)	151,033	(15,343)	(42,597)	49,270	(163,007)	(5,307)	23,627	(104,967)	(8,991)	(295,270)	(581,380)	17,937,967
May 2022 (Budget)	27,608	173,209	(75,000)	25,000	5,000		(50,000)	5,000	(50,000)	(30,000)	10,968	41,785	17,979,752
June 2022 (Budget)	(84,597)	178,170	(75,000)	25,000	5,000	20	(50,000)	5,000	(100,000)	(30,000)	10,968	(115,459)	17,864,293
July 2022 (Budget)	461,651	195,208	(75,000)	25,000	5,000		50,000	5,000	(50,000)	(30,000)	10,968	597,827	18,462,120
August 2022 (Budget)	288,228	200,209	(75,000)	25,000	5,000		(50,000)	5,000	(100,000)	(30,000)	10,968	279,405	18,741,525
September 2022 (Budget)	291,487	206,208	(75,000)	25,000	5,000	*	(50,000)	5,000	(50,000)	(30,000)	10,968	338,663	19,080,188
October 2022 (Budget)	(148,862)	211,208	(75,000)	25,000	5,000		50,000	5,000	(100,000)	(30,000)	10,968	(45,686)	19,033,502
November 2022 (Budget)	(15,488)	217,207	(75,000)	25,000	5,000		(50,000)	5,000	(50,000)	(30,000)	10,968	42,687	19,075,189
December 2022 (Budget)	38,367	217,207	(75,000)	25,000	5,000		50,000	5,000	(110,495)_	(30,000)	10,972	136,051	19,212,240
Totals	114,762	2,187,131	791,248	872,601	80,352	(723,684)	(356,452) 981,635	55,641	(887,281)	(292,015)	(783,088)	1,059,215	19,212,240
								nents (60 days	cash)				et 12/31/21 6,279,191
								Less Cares Act Less Medicare Less Bond Res	Accelerated				(669,775) (1,690,468) (878,731)
Notes:								Net Cash for D AVG. Expense Days Cash on I		nd			15,973,266 104,653 152.63

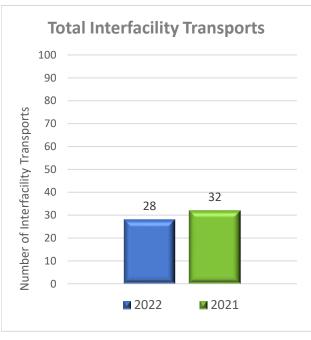
- (1) Forecast based on projected net income.
- (2) Forecast is based on the budgeted depreciation expense.
- (3) Based on projected changes in receivables.
- (4) Based on projected changes in payables and liabilities.
- (5) Based on projected changes in prepaids.
- (6) Based on projected deferred revenues.
- (7) Based on projected Due to Third Party Reserves.
- (8) Based on projected Inventory changes.
- (9) Based on projected equipment and capital project expenditures.
- (10) Based on projected lease payments.
- (11) Based on projected receivables and payables due to Covid.

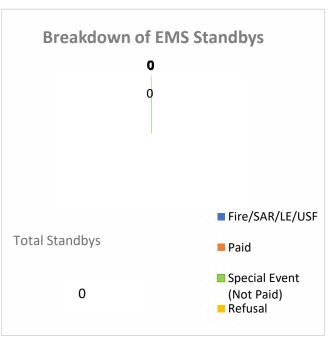


Operations Report for April 2022

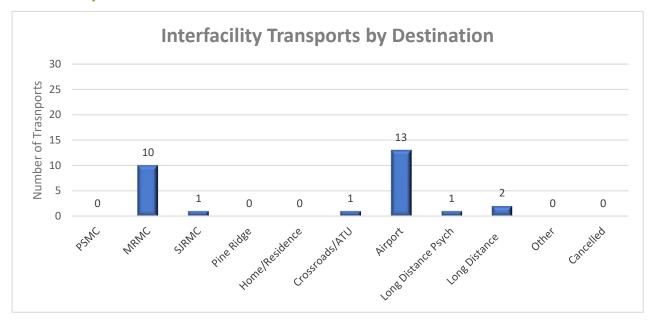
EMS: April



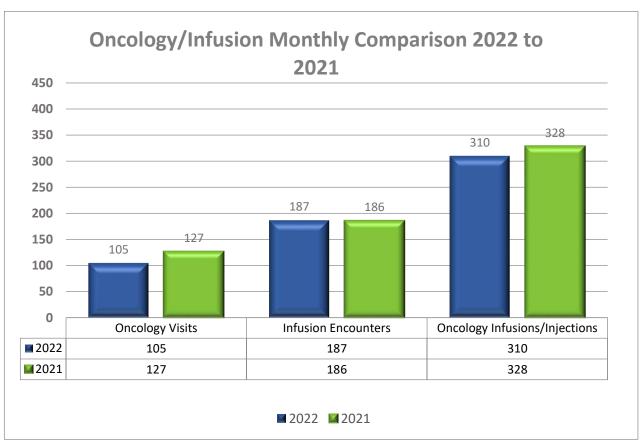




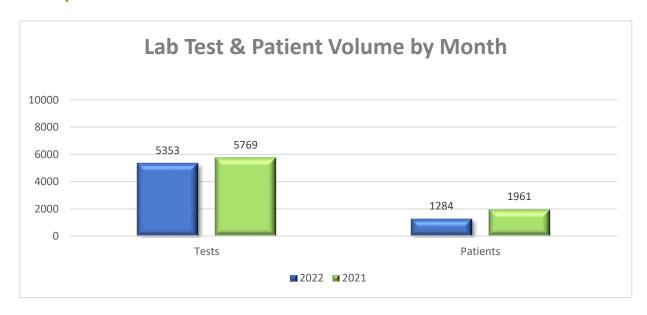
EMS: April



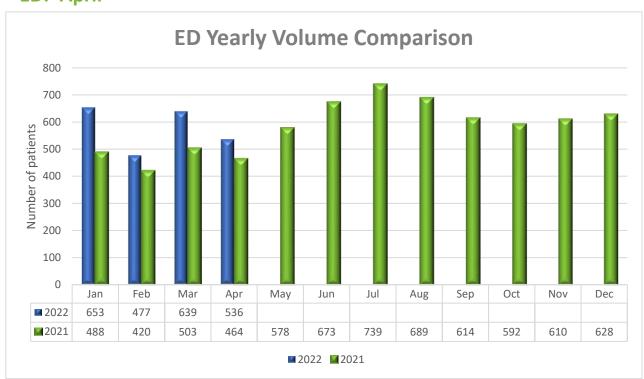
Oncology/Infusion: April



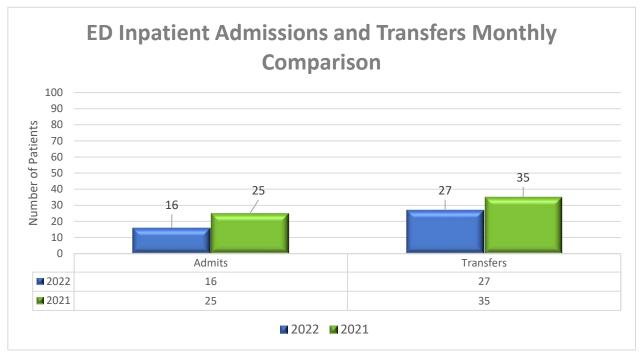
Lab: April



ED: April



ED: April







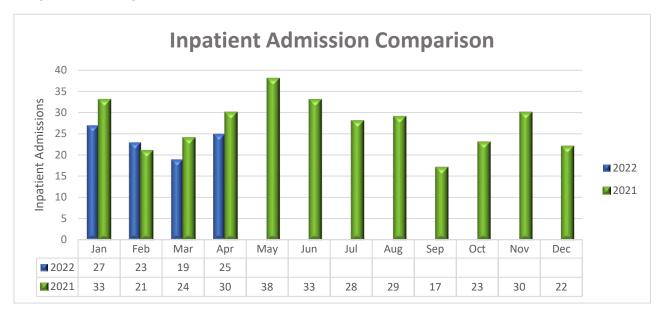
Average Daily Census

Average Length of Stay (in hours)

17.8

2.7

Inpatient: April





Average Daily Census

Average Length of Stay (in days)

2.9

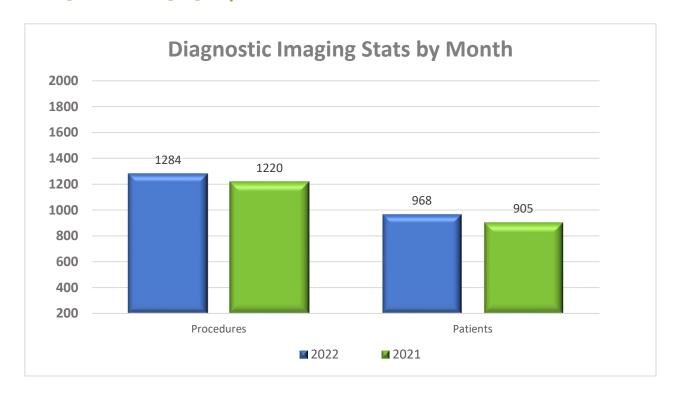
2.5

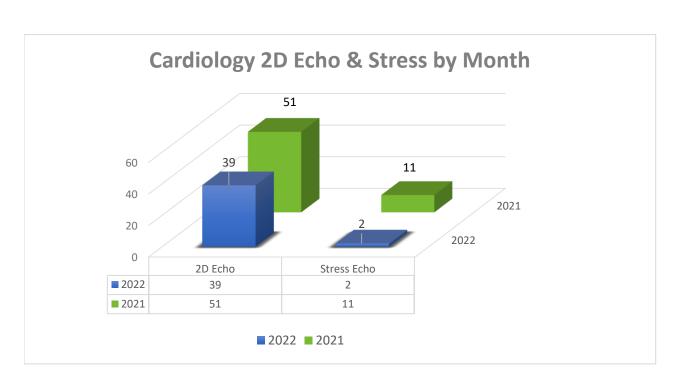


COVID-19 Patients Hospitalized at PSMC

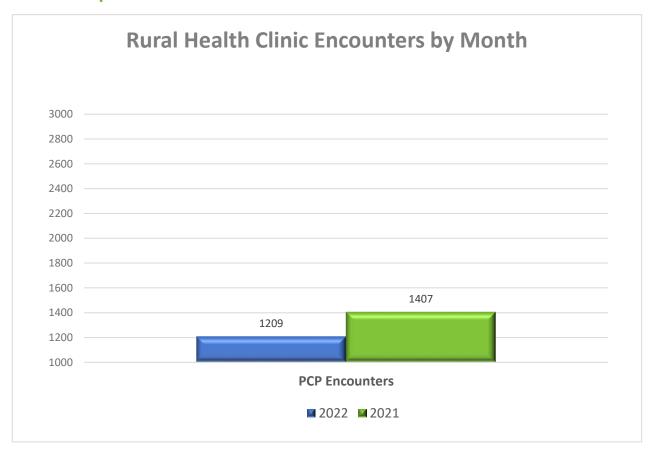
0

Diagnostic Imaging: April



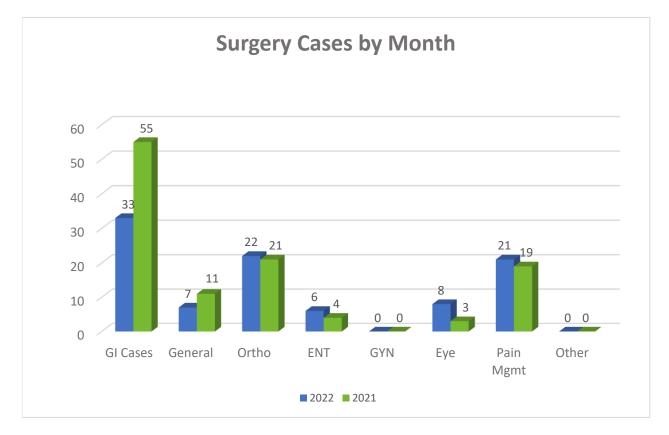


Clinic: April





Surgery





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

MEDICAL STAFF REPORT BY CHIEF OF STAFF, JOHN WISNESKI May 24, 2022

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	
David Dungan, MD	Reappointment	Telemedicine/Teleradiology	Neuroradiology &	
_			Diagnostic Radiology	
Matthew Gipson, MD Reappointment		Telemedicine/Teleradiology	Interventional Radiology &	
			Diagnostic Radiology	
William Grande, MD	Reappointment	Telemedicine/Teleradiology	Interventional Radiology &	
			Diagnostic Radiology	
Whitney Morgan, MD	Reappointment	Telemedicine/Teleradiology	Diagnostic Radiology	
Daniel Renner, MD	Reappointment	Active/Emergency Medicine	Emergency Medicine	
Peter Ricci, MD	Reappointment	Telemedicine/Teleradiology	Neuroradiology &	
			Diagnostic Radiology	
David Shook, MD	Reappointment	Telemedicine/Teleradiology	Diagnostic Radiology	
Andrew Sonin, MD	Reappointment	Telemedicine/Teleradiology	Diagnostic Radiology	
Corinne Reed, DO	Change in Privileges: addition of	Active/Hospitalist, Family	Family Medicine	
	"Administration, supervision, and	Medicine, & Osteopathic		
	limited interpretation of exercise	Manipulative Medicine		
	stress tests"			

III. REPORT OF NUMBER OF PROVIDERS BY CATEGORY

Active: 18 Courtesy: 23

Courtesy-Locum Tenens: 2

Telemedicine: 132

Advanced Practice Providers & Behavioral Health Providers: 12

Honorary: 1 Total: 188

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

Formal Written Resolution 2022-14 May 24, 2022

WHEREAS, the Upper San Juan Health Service District d/b/a Pagosa Springs Medical Center has received the 2022 Quality Assurance and Performance Improvement Plan and a staff presentation about the Quality Assurance and Performance Improvement Program at PSMC.

NOW, THEREFORE, THE BOARD OF DIRECTORS OF THE UPPER SAN JUAN HEALTH SERVICE DISTRICT HEREBY RESOLVES to accept PSMC's 2022 Quality Assurance and Performance Improvement Plan.

ADOPTED and APPROVED by the Board of I	Directors this 24th day of May, 2022
Matt Mees, Vice Chair of the Board of Directors	

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

Formal Written Resolution 2022-15 May 24, 2022

WHEREAS, the Archuleta County Broadband Services Management Office ("BSMO") is applying for a cooperative grant from the State of Colorado Division of Local Government ("DOLA");

WHEREAS, BSMO reports that the goal of the grant, if awarded, would be to complete fiber between Durango, Ignacio and Pagosa Springs as well as establish a standalone Carrier Neutral Location (CNL) on the grounds of Pagosa Springs Medical Center;

WHEREAS, improvements to broadband fiber support PSMC's operations and are consistent with PSMC's Strategic Plan; and

WHEREAS, the Upper San Juan Health Service District d/b/a Pagosa Springs Medical Center has received a request to provide support for the grant application.

NOW, THEREFORE, THE BOARD OF DIRECTORS OF THE UPPER SAN JUAN HEALTH SERVICE DISTRICT HEREBY RESOLVES to authorize Board Director Matt Mees to sign a letter of support for a BSMO grant application that is consistent with the information set forth herein.

Matt Mees, Vice Chair of the Board of Directors



MINUTES OF REGULAR BOARD MEETING Tuesday, April 26, 2022 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 April 26, 2022, 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, and Director Karin Daniels.

Present via Zoom: Director Jason Cox, Director Dr. Jim Pruitt and Director Kate Alfred.

Director(s) Absent: Treasurer-Secretary Mark Zeigler. (The noted absence was approved due to prior notification.)

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.
- b) Board member self-disclosure of actual, potential or perceived conflicts of interest: Director Dr. Pruitt acknowledged a conflict of interest due to a personal interest in the property being discussed and will recuse himself from matters related to his property for the executive session, discussions and actions on the agenda for this meeting.
- c) Approval of the Agenda: The Board then noted approval of the agenda as presented.

2) PUBLIC COMMENT

There was none.

3) PRESENTATION: Recognition of Board Members who have reached the end of their terms

CEO, Dr. Rhonda Webb, presented and discussed the PowerPoint presentation recognizing the accomplishments during the terms of Chair Schulte, Director Alfred, Director Cox and Director Daniels. CEO Dr. Webb noted there will be a gift forthcoming for those named directors in recognition of PSMC's appreciation for their services.

Chair Schulte noted appreciation for the presentation, highlighting that he recognized that the accomplishments were due to a team effort.

Director Daniels stated that it has been her pleasure to be a part of this organization and that she is proud of PSMC.

Directors Cox and Dr. Pruitt voiced thanks to the board members for volunteering for public service.

4) REPORTS

- a) Oral Reports
 - i) Chair Report

There was no report.

ii) CEO Report

CEO Dr. Webb advised of the following updates:

- Currently, PSMC is not seeing much COVID-19, though patients suspected of having the virus are still isolated in the Aspen Rooms for testing.
- Flu type A has been more prevalent.
- PSMC remains under the masking mandate by the governor of Colorado. It is not known when/if the mask mandate will change.
- CEO Dr. Webb noted a concern that the state of Colorado has stated that if there is a surge of COVID-19 related testing through the summer and fall, future testing and treating of COVID-19 will be solely dependent on local hospitals and medical facilities to perform, and there will not be governmental reimbursement for funding of tests and treatment.

iii) Executive Committee

Chair Schulte advised that the Executive Committee has been focused on the acquisition of the Pruitt property, which will be discussed during executive session.

iv) Foundation Committee

There was no report.

v) Facilities Committee

There was no report.

vi) Strategic Planning Committee

There was no report.

vii) Finance Committee & Report

Director Alfred stated that the Finance Committee met on April 19th and reviewed all of the March financials. The committee recommends the acceptance of the March financials as reported. CAO Ann Bruzzese noted that as stated on the Finance Committee report to the Board, the committee discussed and has no objections to offering PSMC employees, beginning July 1, 2022, long-term disability insurance so long as the cost is less than \$50,000 per year.

CFO Chelle Keplinger then presented and discussed the PowerPoint presentation regarding financials for March 2022.

Questions were asked and answered.

- b) Written Reports
 - i) Operations Report

There were no questions.

ii) Medical Staff Report

There were no questions

5) EXECUTIVE SESSION

Director Daniels motioned to enter into executive session. Upon motion seconded by Vice-Chair Mees, the Board entered into executive session at 6:01 p.m. MST, pursuant to the following subparagraphs of C.R.S. Section 24-6-402(4):

- (b) conferences with an attorney for USJHSD for the purpose of receiving legal advice on specific legal questions;
- (a) the possible purchase, acquisition, lease, transfer, or sale of real property owned by James

Pruitt Properties LLC;

• (e) determining positions relative to matters that may be subject to negotiations; developing strategy for negotiations; and instructing negotiators.

Directors present in the portion of executive session pertaining to subparagraph of C.R.S. Section 24-6-402(4)(b) for the purpose of receiving legal advice on specific legal questions were: Chair Schulte, Vice-Chair Mees, Director Dr. Pruitt, Director Alfred, Director Daniels, and Director Cox.

Others present in the above-noted portion of executive session were, CEO Rhonda Webb, CAO Ann Bruzzese, CFO Chelle Keplinger, and Board Clerk Heather Thomas.

Directors present in the portion of executive session pertaining to C.R.S. Section 24-6-402(4)(a) and (e) regarding the possible purchase, acquisition, lease, transfer, or sale of real property owned by James Pruitt Properties LLC; and determining positions relative to matters that may be subject to negotiations; developing strategy for negotiations; and instructing negotiators were: Chair Schulte, Vice-Chair Mees, Director Alfred, Director Daniels, and Director Cox.

Others present in the above-noted portion of executive session were, CEO Rhonda Webb, CAO Ann Bruzzese, CFO Chelle Keplinger, and Board Clerk Heather Thomas.

Chair Schulte adjourned the executive session at 6:45 p.m. MST.

6) <u>DECISION AGENDA</u>

a) Resolution 2022-10

Director Cox motioned to accept Resolution 2022-10 regarding approval to correct the employee PTO plan and policies going forward subject to acceptance by the Finance Committee. Upon motion seconded by Director Dr. Pruitt, the Board unanimously adopted said resolution.

b) Resolution 2022-11

Director Daniels motioned to accept Resolution 2022-11 regarding consideration of long-term disability insurance (which includes an employee assistance program) for employees. Upon motion seconded by Vice-Chair Mees, the Board unanimously adopted said resolution.

c) Resolution 2022-12

CAO Bruzzese gave an overview of Resolution 2022-12.

Vice-Chair Mees motioned to accept Resolution 2022-12 regarding approval for the continuation of PSMC's Trauma Program. Upon motion seconded by Director Daniels, the Board unanimously adopted said resolution.

d) Resolution 2022-13

Vice-Chair Mees motioned to accept Resolution 2022-13 regarding authority for actions related to an offer from the USJHSD d/b/a PSMC to purchase the real property and building located at 75 S. Pagosa Blvd. owned by James Pruitt Properties, LLC. Director Alfred seconded. Director Dr. Pruitt then noted abstention due to acknowledgement of a conflict of interest in the property being discussed.

Upon motion being seconded, the Board unanimously accepted said resolution with noted abstention of Director Dr. Pruitt.

7) CONSENT AGENDA

Director Dr. Pruitt recused himself from approving of the meeting minutes of 03/22/2022, special meeting of 03/31/2022 and special meeting of 04/11/2022 due to his acknowledgement of a conflict of interest in the property that was discussed during those meetings.

Director Daniels motioned to approve the Board Member absence of Treasurer-Secretary Zeigler, regular meeting minutes of 03/22/2022, special meeting of 03/31/2022 and special meeting of 04/11/2022, and the Medical Staff report recommendations for new or renewal of provider privileges.

Upon motion seconded by Director Alfred, the Board approved said consent agenda items with

noted abstention of Director Dr. Pruitt.

8) OTHER BUSINESS

There was no other business.

9) ADJOURN

There being no further business, Chair Schulte adjourned the regular meeting at 6:55 p.m. MST.

Respectfully submitted by:

Heather Thomas, serving as Clerk to the Board