



NOTICE OF REGULAR BOARD MEETING OF  
THE UPPER SAN JUAN HEALTH SERVICE DISTRICT  
dba PAGOSA SPRINGS MEDICAL CENTER  
Tuesday, February 22, 2022, at 5:30 PM  
The Board Room (direct access – northeast entrance)  
95 South Pagosa Blvd., Pagosa Springs, CO 81147

**ALL ATTENDEES MUST BE SCREENED PRIOR TO ENTERING THE MEETING & ALL  
PERSONS MUST WEAR A MASK DUE TO COVID-19,  
THE NUMBER OF IN-PERSON ATTENDEES WILL BE LIMITED**

**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**

## **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: 2021 ACCOMPLISHMENTS**

### **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) ~~Executive Committee~~ ~~Chair Schulte and V.Chair Mees~~
  - iv) Foundation Committee Dir. Mees, Dir. Dr. Pruitt and CEO R.Webb
  - v) Facilities Committee Dir. Mees, Dir. Daniels, and COO K.Douglas
  - vi) ~~Strategic Planning Committee~~ ~~Dir. Schulte, Dir. Cox and CEO R.Webb~~
  - vii) Finance Committee & Report Treas./Sec. Zeigler and CFO C.Keplinger
    - (a) January 2022 Financials

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

i) [Operations Report](#)

COO-CNO, Kathee Douglas

ii) [Medical Staff Report](#)

Chief of Staff, Dr. John Wisneski

5) **EXECUTIVE SESSION** There will be an executive session pursuant to the following subparagraphs of C.R.S. Section 24-6-402(4):

- (c): matters to remain confidential pursuant to other federal or state statute – specifically confidential quality and peer review stats that are confidential per state statutes C.R.S. Section 25-3-109, et seq. and C.R.S. Section 12-36.5-101 et seq.
- (f)(I) personnel matters – specifically the annual evaluation of the CEO who has been previously informed of the meeting; and, as and if needed,
- (b): to receive legal advice on specific legal questions.

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 2022-03](#)** regarding acceptance of PSMC's annual report of 2021 peer review activities.
  - i) Overview: The confidential annual report of PSMC's 2021 peer review activities is presented in executive session by the Manager of the Medical Staff Office (Krista Starr) as such report is to be used and remain confidential in accordance with the Quality Management Act, C.R.S. Section 25-3-109, et seq. and the Professional Review Act, C.R.S. Section 12-36.5-101 et seq.
- b) **Consideration of [Resolution 2022-04](#)** regarding adjustment to CEO contract to be consistent with latest case law.
- c) **Consideration of [Resolution 2022-05](#)** regarding approval to proceed with purchasing 3D Mammography equipment from Hologic and make the associated facility renovations.

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 02/22/2022
- b) Approval of Minutes for the following meeting(s):
  - i) [Regular meeting of: 01/25/2022](#)
- c) Approval of [Medical Staff report](#) recommendations for new or renewal of provider privileges.

8) **OTHER BUSINESS**

9) **ADJOURN**

TO: Board of Directors  
 FROM: Rhonda Webb, M.D. and PSMC Administration  
 DATE: February 2, 2022  
 RE: 2021 Accomplishments

Due to the COVID-19 pandemic, PSMC entered into Incident Command on February 26, 2020 and has continuously operated in a state of emergency since that time. Due to the pandemic, we include a list of COVID-19 specific accomplishments as well as our accomplishments related to PSMC's strategic planning pillars.

# **1. COVID-19 PANDEMIC**

- a. **COVID Vaccines to the Community:** PSMC took on a significant undertaking of organizing and holding mass vaccine events at the Pagosa Community Center from January through April. While PSMC staff already had a significant workload with care for patients and the pandemic response, staff took on the additional work to create patient-friendly events for vaccination of our community. Throughout the vaccine process there was significant time spent in advance of each event including coordination of patients, staffing and with SJBPH, ASH and others. During 2021, PSMC administered approximately 8,804 COVID vaccine shots.
- b. **COVID Patient Care:**
  - i. PSMC's Incident Command and staff continually evaluated and adjusted its response to the evolving pandemic. In the last quarter of 2021, hospitals in Colorado experienced the most significant surge of the pandemic. In response, PSMC quickly pivoted to expand its ability to respond to more infectious patients by moving the Cancer Center to the outpatient clinic and setting up a FastTrack emergency area in the Cancer Center. This FastTrack area has been staffed Monday through Friday by already overworked staff.
  - ii. As Monoclonal Antibody infusion treatments (MABs) became available, PSMC staff did the background work to be able to provide infusions to patients who qualified. The delivery of MABs is labor intensive and given that PSMC has been very short-staffed, PSMC (with the support of SJBPH) pursued and obtained additional staffing from State Homeland Security; the MABs staffing commenced work at PSMC on December 27<sup>th</sup>.
  - iii. PSMC's clinical staff remained engaged in understanding the latest evolving and fluctuating information for patient diagnosis and care.
- c. **COVID – IC and management:**
  - i. Held weekly meetings (and more often as needed) for Incident Command regarding COVID information and response. Conducted ongoing assessment of such matters as COVID policies, supply, oxygen, lab capacity, hospital capacity, employee wellness, etc.
  - ii. Issued written briefings weekly to all employees, Board members and press.

d. **COVID and Financial Sustainability**

During 2021, PSMC leadership monitored changes to available funding and uses and diligently applied for any additional qualifying funding. PSMC staff all tracked COVID specific expenses to support use of funds. The following is a summary of the approximately \$8.8 million in COVID specific funds awarded to PSMC for expenses incurred to respond to the pandemic and/or lost revenues:

\$3,458,633.00	PSMC monitored the changes to the use of CARES Act funds and was able to use funds to cover expenses related to the pandemic for equipment, hazard pay bonuses, PPE, testing supplies, utilities employee benefits and insurance.
\$3,740,044.42	PSMC received approval of its request for forgiveness of the Payroll Protection Program loan – this loan was originally awarded based upon PSMC’s continued staffing levels despite the 2020 initial lockdown that suspended elective surgery and limited other services.
\$291,653.80	PSMC applied to COVID Relief Fund #2 for pandemic expenses related to daily screening of employees, screening of patients, employee health nurse, infection control nurse, and behavioral health.
\$147,967.16	PSMC applied to COVID Relief Fund #2.2 for pandemic expenses related to staffing of housekeeping and EMS.
\$50,000.00	PSMC applied to COVID Relief Fund #3 for pandemic expenses for daily screening, employee health nurse, infection control nurse, patient access screening and behavioral health related to the pandemic.
\$ 20,000.00	PSMC applied to COVID Relief Fund #4 for expenses associated with oxygen generation.
\$832,347.00	PSMC applied for and received sums from the federal Health Resources & Services Administration Provider Relief Fund. The fund supports healthcare-related expenses and/or lost revenue attributable to COVID.
\$103,000.00	PSMC applied for and received sums from the federal Health Resources & Services Administration Provider Relief Fund. The fund supports healthcare-related expenses and/or lost revenue attributable to COVID.
\$100,000.00	PSMC applied for and received from federal Health Resources & Services Administration funds for testing expenses.
\$75,194.14	PSMC requested and received from Archuleta County COVID relief funds related to testing expenses.

- e. **COVID Lab Testing:** PSMC’s bench staff in the lab worked significant hours (often 55-60 hours per week) to assure COVID-19 testing for patients and staff.

During 2021, PSMC lab staff processed 4,602 COVID tests (4,578 processed in-house).

- f. **COVID Supply:** PSMC continually monitored supplies in 2021 and maintained steady supply of all personal protective equipment. In addition, PSMC monitored oxygen supply and use and, at all times, met hospital patient need.
- g. **COVID Infection Control:** Throughout 2021, PSMC adjusted processes for patient and visitor screening and access depending on the infection rates. PSMC continued to monitor changing guidance from the public health, the State and federal government and updated policies and practices to meet infection control needs.
- h. **COVID Employee Health.** Throughout 2021, PSMC continued to screen employees daily. The Employee Health nurse managed employee screenings, quarantines and return to work issues under continually changing CDC guidelines. In the third quarter of 2021, the State mandated that all healthcare workers be vaccinated except those with a religious or medical exemption. PSMC's Employee Health took on the additional work of conducting weekly testing of exempted unvaccinated employees and associated reporting to the State.
- i. **COVID and Personnel**
  - i. The entire U.S. is challenged for adequate staffing due to the "great resignation"; like most hospitals, PSMC has been severely short-staffed but nonetheless adjusted staffing and roles and met the priority of patient care.
- j. **COVID Community leadership:**
  - i. Continued a leadership role in the community during the pandemic.
  - ii. Continued to host SJBPH's free community testing in the parking lot at PSMC.
  - iii. Continued to participate in State in local meetings with policy makers for the most current and effective response.

## **2. ADVANCED CLINICAL SERVICES AVAILABLE TO PATIENTS**

- a. EMS
  - i. EMS responded to 2,131 calls -- EMS maintained operations despite significant staffing challenges.
  - ii. The Emergency Medical Services Association of Colorado recognized the excellence of PSMC's EMS team with the following awards:
    - 1. Dave Bronson: C.J. Shanaberger Lifetime Achievement Award
    - 2. James Jackson: ALS EMS Professional of the year
    - 3. Andrew Spangler: EMS Instructor of the year
  - iii. EMS recognized dispatch and community responders with "lifesaver awards" for saving a cardiac arrest patient.

- b. Orthopedics
  - i. Expanded available services through the successful recruitment of Dr. David Eisenhower who is double-boarded in orthopedic surgery and hand surgery with a focus on upper extremities.
- c. Pain Management
  - i. During 2021, PSMC expanded its pain management services available to patients through its two CRNAs on staff.
- d. Lab
  - i. In 2021, PSMC's lab saw 24,213 patients and processed 68,294 tests/specimens (this number excludes pathology samples and only 3,813 of those tests/specimens were sent out to reference labs). This volume was managed despite significant staffing challenges.
- e. Radiology
  - i. In 2021, PSMC's Radiology Department saw 10,571 patients and performed 15,563 diagnostic imaging procedures.
  - ii. All techs were trained and reached proficiency on the portable xray machine.
  - iii. PSMC passed the Mammography Quality Standards Act FDA mammography inspection.
- f. Oncology and Infusion
  - i. Dr. Andrew Buck commenced caring for patients in PSMC's Cancer Center which supported a smooth transition of Dr. Bill Jordan to semi-retirement.
  - ii. The Cancer Center continued to grow resulting in 1,355 annual encounters in oncology and 2,455 annual encounters in infusion.
  - iii. The Cancer Center team implemented a cancer patient support group.
- g. Pharmacy
  - i. Revenues approximately 48% above budget while expenses within 5% of budget.
  - ii. Successful inventory management utilizing "just in time" ordering.
  - iii. Entered new 340b contracts and remain profitable in the program.
  - iv. Med Take Back program is successful in comparison to other Colorado counties (this program gets unused medications out of the community and reduces risk of abuse).
- h. Clinic
  - i. Successfully participated in State of Colorado Practice Transformation program -- the goal of this program is to move outpatient clinic care to a population health model (population health management includes elements of care integration, care coordination, teamwork, patient engagement, data analytics to reduce health disparities among populations, value-based care payment based on health outcomes rather than volume). The program requires the Clinic to meet certain quality metrics. In 2021, PSMC moved from tier 4 to tier 3 with the ultimate goal of moving to tier 1. The financial result is an increase in a monthly payment to PSMC for its Medicaid patients (PSMC has 3,583 Medicaid members and at tier 4 was paid \$2.00 per member per month and at tier 3 is now paid \$2.25 per member per month).

- ii. Successfully participated in the Zero Suicide program and moved from a level zero to a level three (of 4 total levels). Work in the program included: training of all PSMC employees to recognize indicators of suicide and interventions; specific training of certain clinical staff for handling indepth analysis of patient risk; and collection/reporting of data on screenings and behavioral health follow-up.
  - iii. Successfully participated in and completed a State LARC program (long-acting contraception program which also included a monetary benefit to PSMC of \$12,000).
- i. Information Technology
  - i. PSMC earned “CHIME Most Wired” recognition level 9 of 10 (PSMC was previously at level 7). The College of Healthcare Information Management Executives (CHIME) aims to recognize healthcare organizations that have adopted and leveraged information technology to improve patient safety and outcomes in the healthcare industry. CHIME recognized 107 hospitals in the U.S. that achieved level 9.
  - ii. The PSMC team was very proactive in addressing cyber security and implemented new programs to identify suspicious activity as well as actions to improve business continuity in the event of a cyber security event.
- j. Community Relations
  - i. Greatly improved our out-reach to the entire community by preparing our first-ever Community Report in magazine format with photos and information about PSMC. The Community Report was mailed to every home in Archuleta County.
- k. Foundation
  - i. The Foundation had a very successful year and exceeded the annual fundraising goal by 200%.
- l. Facilities
  - i. Completed approximately 710 staff requested work orders.
  - ii. Commenced the initial planning work for an oxygen generation system.
  - iii. Commenced planning work for facility modifications that will be needed for 3D mammography.
  - iv. Commenced the planning work for security improvements.
  - v. After resolving many challenges, completed the foundation work for the new modular building for the new MRI (shortly after the start of 2022, the modular was set on the foundation and the magnet placed in the modular).

### **3. ADVANCED PSMC’S FINANCIAL STABILITY**

- a. Refinanced the 2006 bonds (the 2006 bonds were associated with the initial construction of the hospital) to a lower interest rate with the same pay-off date in 2036 resulting in an overall net savings of \$1,838,409 (21%).
- b. Despite COVID, at the end of 2021 PSMC is in the most stable financial position it has been in since the hospital opened in 2008 as evidenced by PSMC’s days cash on hand at the end of December was 135.95 days (at the end of 2020, PSMC had 61.1 days cash on hand).

- c. As of the end of December 2021, PSMC exceeded budgeted net *patient* revenue by \$1,322,924.00.
  - d. As of the end of December 2021, PSMC had annual net revenues of \$8,215,744 (exceeding budget by \$7,994,866).
  - e. Gross days of Accounts Receivable: 55.9 days
  - f. Completed another successful annual audit with the added challenge of remote document review and meetings due to COVID-19.
- 4. ADVANCED PSMC'S COMPLIANCE, QUALITY AND PATIENT SAFETY**
- a. Successfully met HTP goals. Because PSMC successfully met the 2021 HTP milestones, PSMC will receive approximately \$521,739 from the Rural Support Fund.
  - b. PSMC continues to participate in population health quality programs with primary care that improve patient care and earn modest financial rewards (private payers Humana, United Health, and Anthem).
  - c. PSMC received \$228,336 for successful participation in HQIP. In 2021, PSMC earned 95 of 100 points resulting in full funding of quality dollars.
  - d. Successfully submitted for other Quality programs: MIPS, MBQIP and SHIP.
  - e. With all the extra work associated with COVID, our staff remained up-to-date on its compliance training at a rate of approximately 90%.
  - f. All life-safety requirements are met and inspections are current.
- 5. ADVANCED CULTURE AND TALENT**
- a. Physicians and Advanced Practice Providers (nurse practitioners, physician assistants, certified nurse anesthetists) changes:
    - i. Long-time emergency department physician and Chief of Staff Dr. Ralph Battels sought to semi-retire and reduce his work to PRN services; PSMC was able to accommodate this with the addition of Dr. Joy Norris to the emergency department physician team.
    - ii. After years of service, oncologist Dr. Bill Jordan wished to retire and reduce his work to PRN services; PSMC was able to accommodate this with the addition of Dr. Andrew Buck to PSMC's Cancer & Infusion Center.
    - iii. Long-time family medicine physician Dr. Bob Brown sought to reduce his work load but remains with PSMC on a PRN status.
- 6. PLANNING FOR THE FUTURE**
- a. Worked with the Board Strategic Planning Committee and the Board to develop a three-year strategic plan, vetted the plan with key stakeholders in the community and obtained approval.



**Facilities Committee Report for the  
USJHSD Board Meeting on February 22, 2022**

The Facilities Committee met on February 17, 2022 regarding the following:

- **COMMITTEE RECEIVED STATUS REPORTS ON PROJECTS**
  - **MRI**
    - The MRI is calibrated and most modalities are being used for patient care.
    - In July 2021, the Board authorized \$500,000 in expenditures for the supporting foundation and installation of the MRI and modular building. As of this date, PSMC has spent \$406,983.88 (there are still outstanding unpaid invoices but total cost expected to come in under the authorized expenditure).
  - **3D MAMMOGRAPHY**
    - Discussed that there were 3 responses to a request for proposals for 3D mammo and reasons staff recommends Hologic.
    - Regarding renovation discussed the diagram for moving doors and that proceeding with level 1 changes that do not require renovations similar to a surgical suite with external sink.
    - *Facilities Committee recommends to Board to pursue Hologic 3D mammo equipment and facility renovations summarized immediately above.*
  - **OXYGEN GENERATION**
    - Currently in design phase
  - **SECURITY CAMERAS**
    - Project in process.
- **OTHER BUSINESS**
  - Discussed fact gathering for corrections to OR humidity.

**Finance Committee & CFO Report for the  
USJHSD Board Meeting on February 22, 2022**

The Board's Finance Committee met on February 15, 2022. The report below provides an overview of the financials and addresses any questions made by members of the Finance Committee.

1) **January Financials:**

a) **Bottom line and Income Statement:**

- i) PSMC's had a negative bottom line in January but the loss was slightly less than budgeted loss.
- ii) The Finance Committee discussed January volumes. Only ED visits were higher than the past four years largely due to 260 COVID fast-track visits in January. Inpatient, observation, surgery and clinic volumes were lower than the prior four years. In January, radiology had solid volumes despite the new MRI being calibrated and not operational for patient care.
- iii) The Finance Committee discussed the aging A/R process as it relates to bad debt on the Income Statement.

b) **Balance Sheet:**

- i) In January, days cash on hand decreased from 135.95 days of cash to 133.17 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) \$936,145.35 (additional 9.24 days of cash) of CARES Funding for which PSMC currently has no guidance on qualifying uses (appears in the Assets column as "Relief Fund Restricted" and in the Liabilities column as "Relief Fund Liability").
  - (2) \$2,417,648 (additional 23.86 days of cash) of Medicare Accelerated Payment which was an advance and is applied against sums due to PSMC for Medicare services.

c) **Other:**

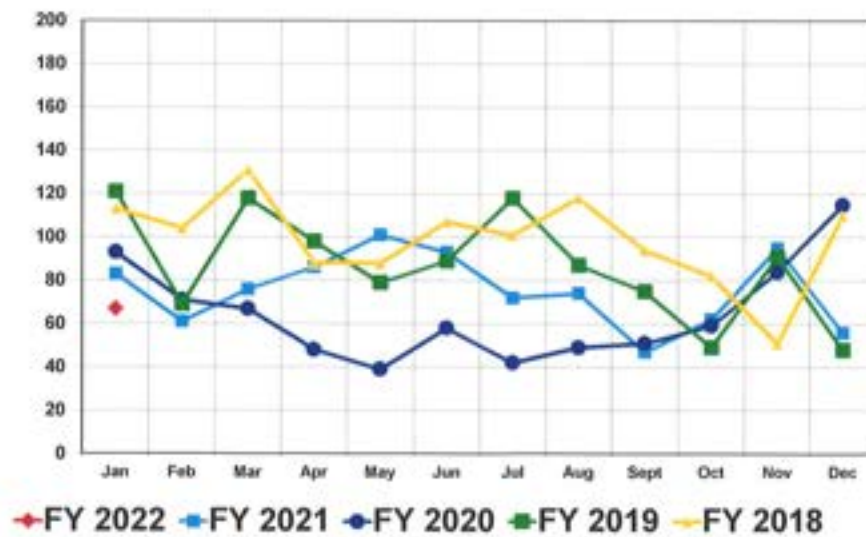
- i) The Finance Committee received information that the 3D Mammography would be on the Board agenda with funding sourced by the Foundation.

2) **Finance Committee Recommendations:** Again, the Finance Committee expressed no issues or concerns with the January 2022. financial reports.

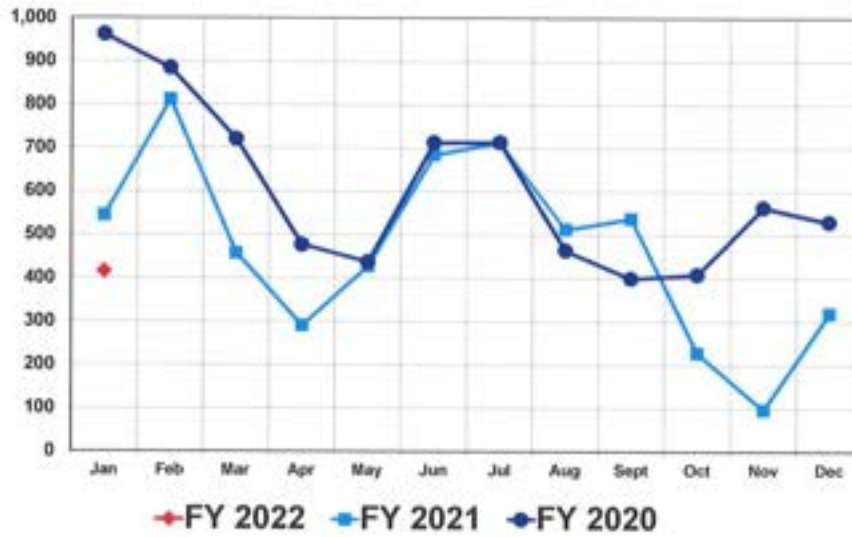


**FINANCIAL PRESENTATION**  
**YTD JANUARY 2022**

**PATIENT DAYS**



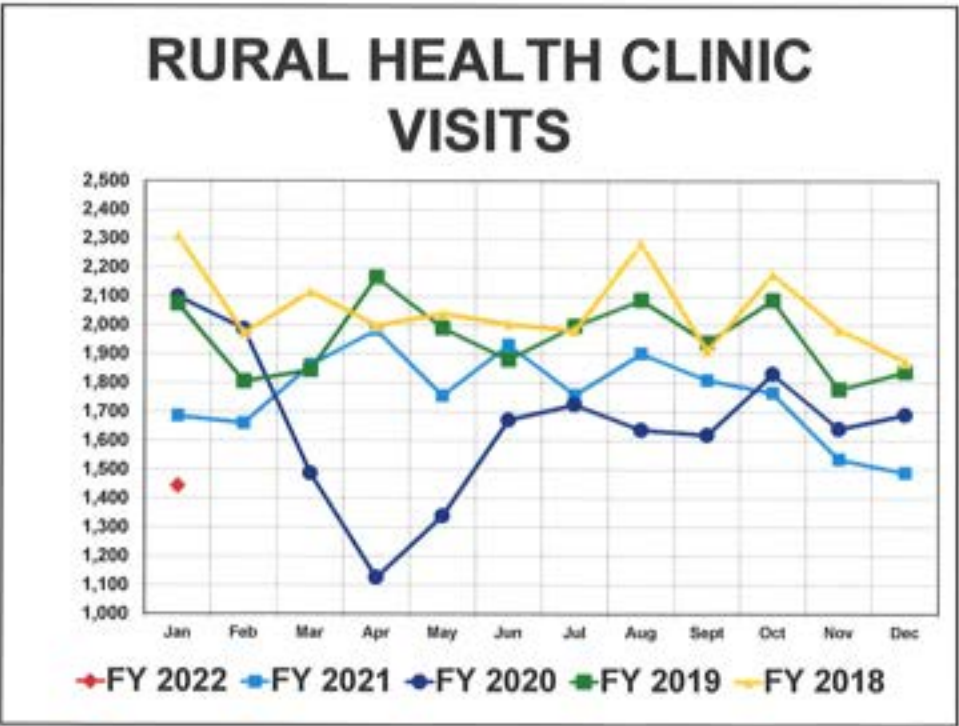
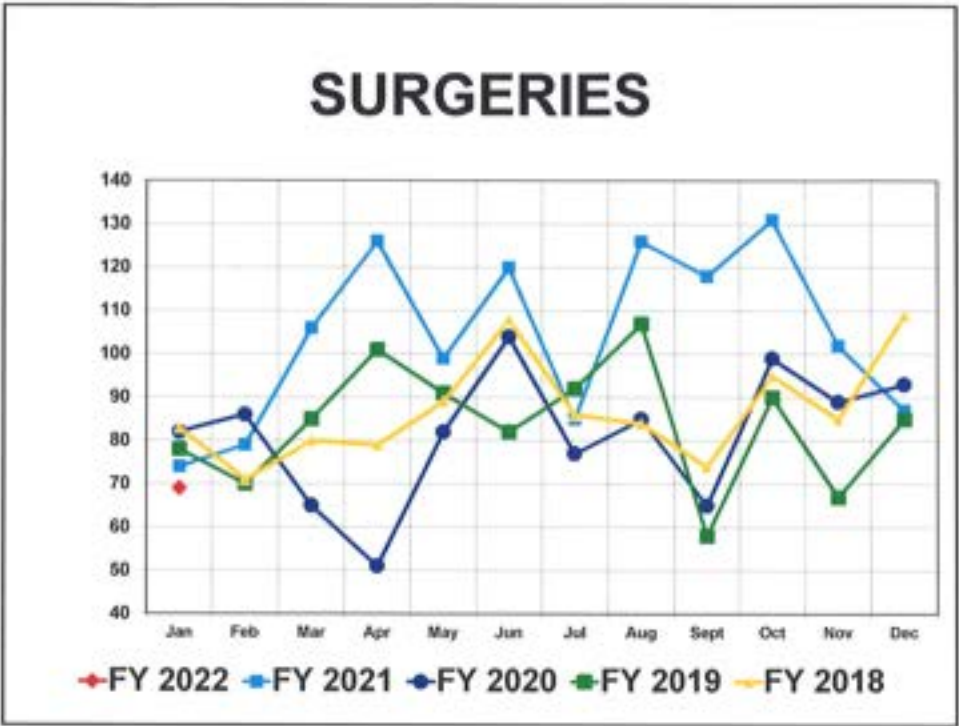
## OBSERVATION HOURS

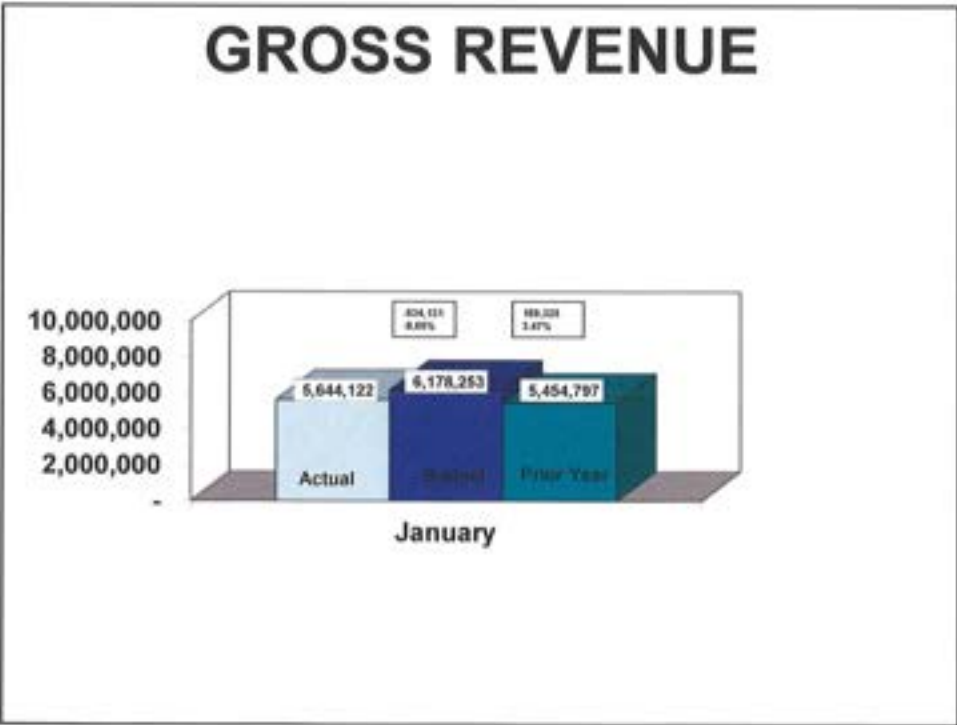
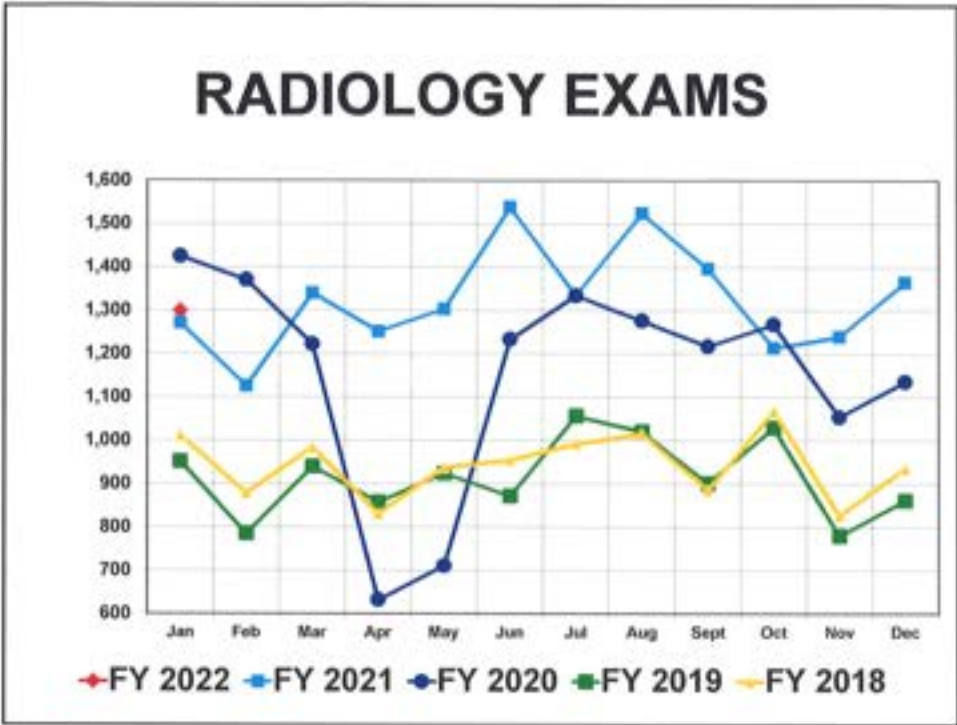


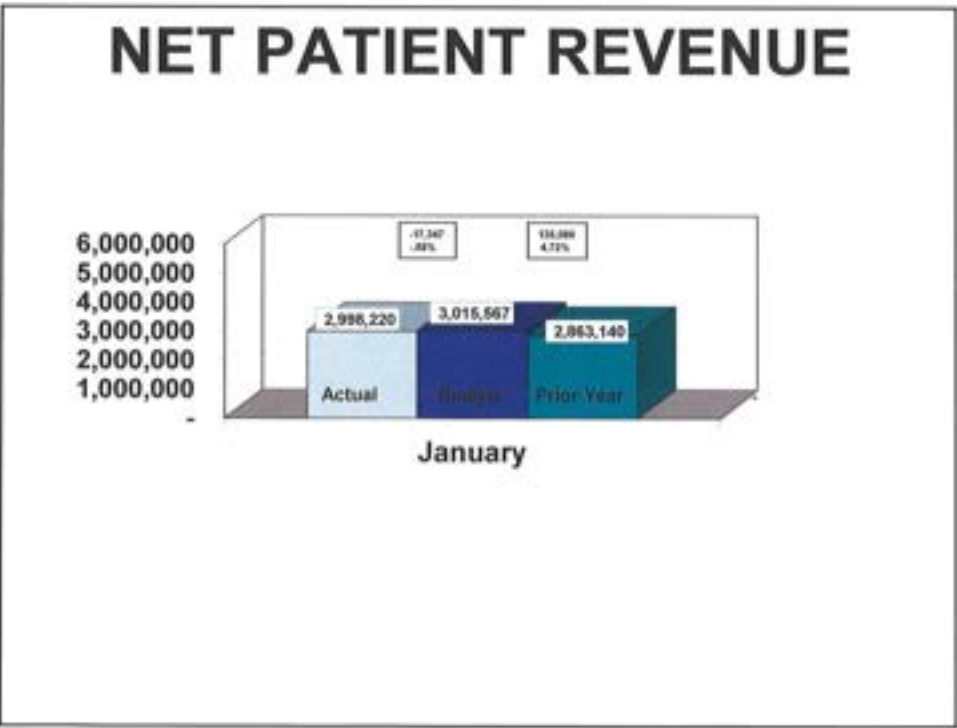
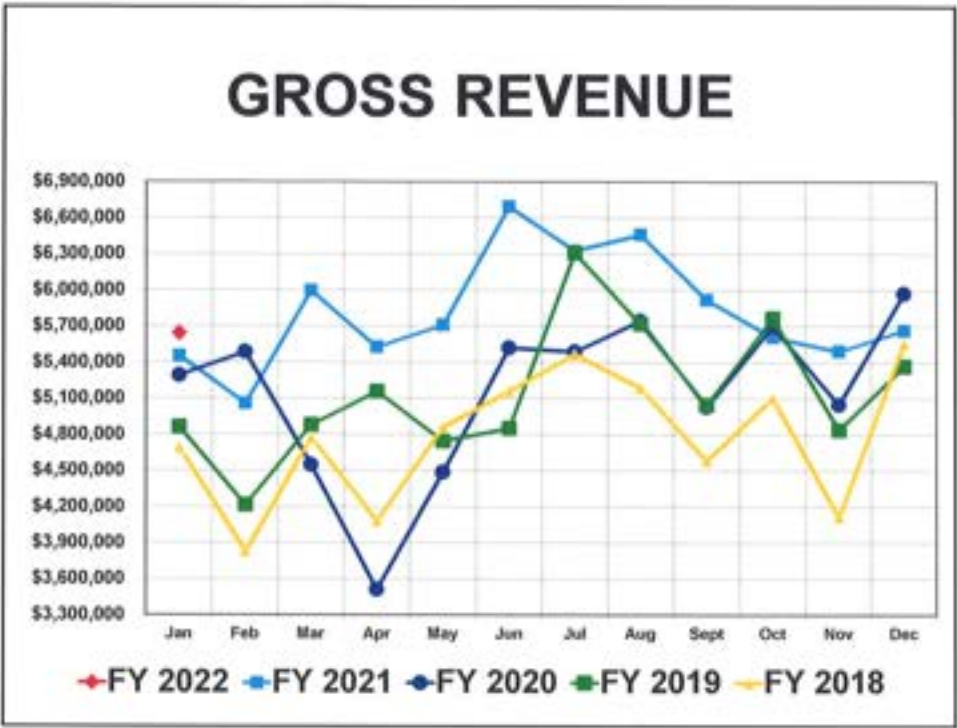
## ER VISITS

(Includes Fast Track in 2022)

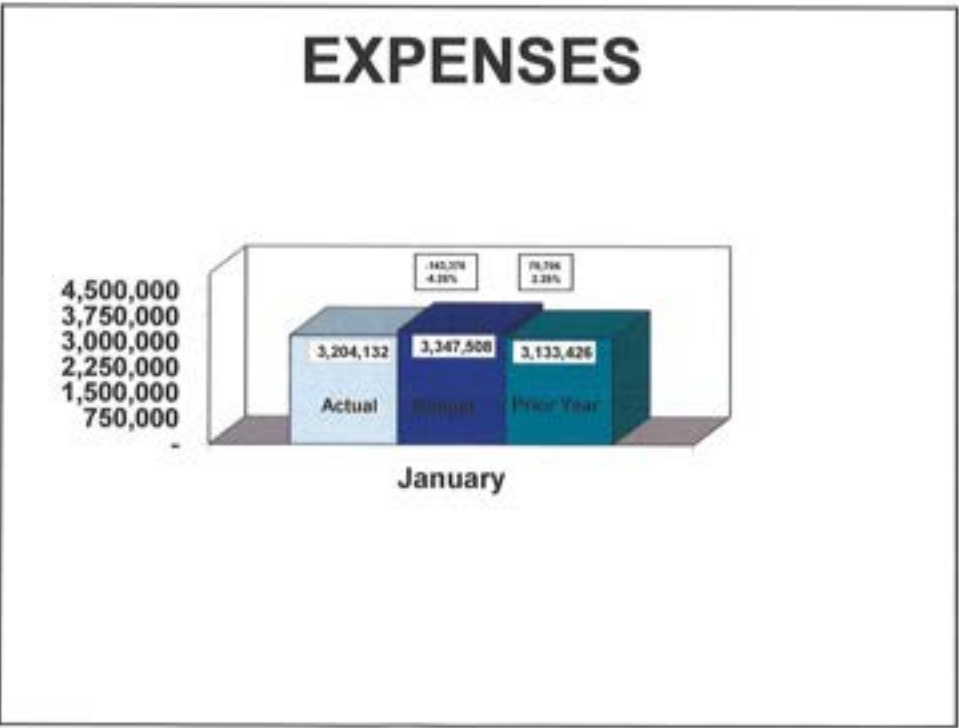
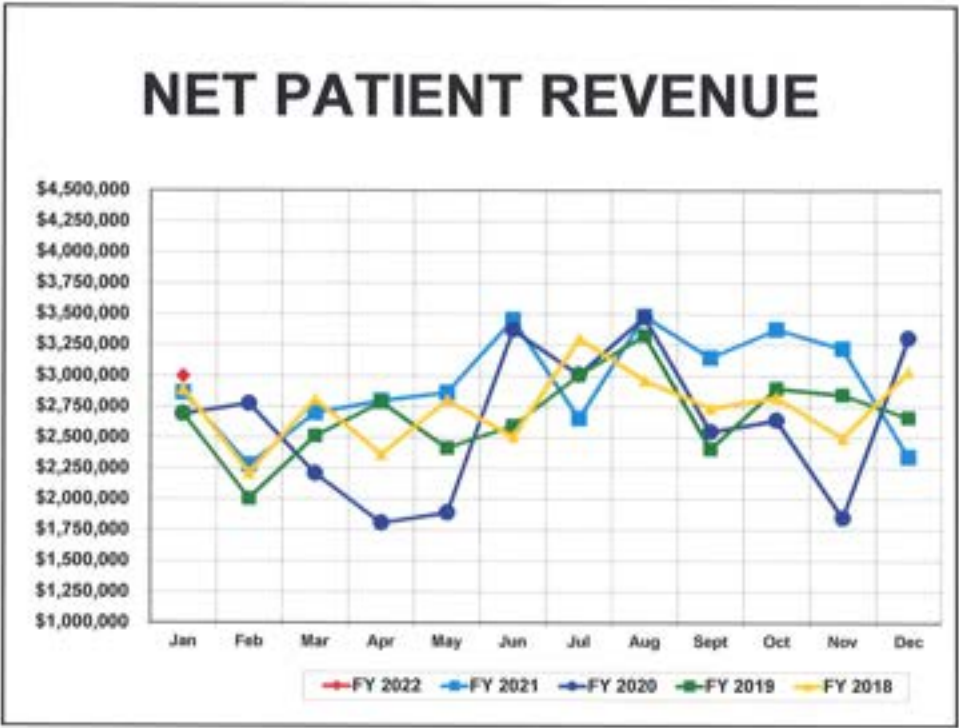




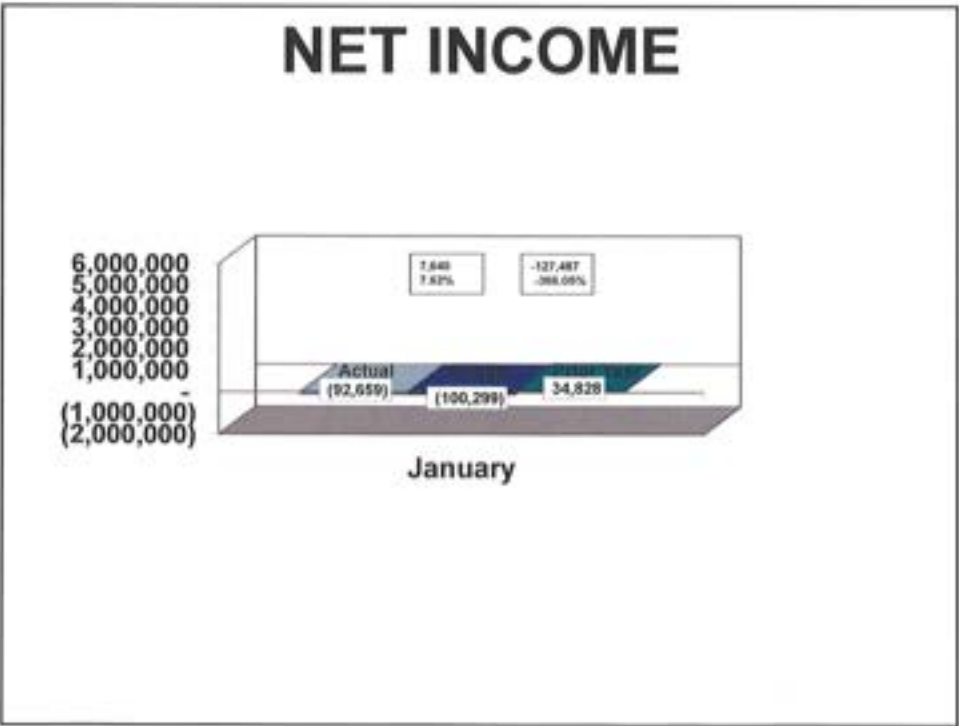
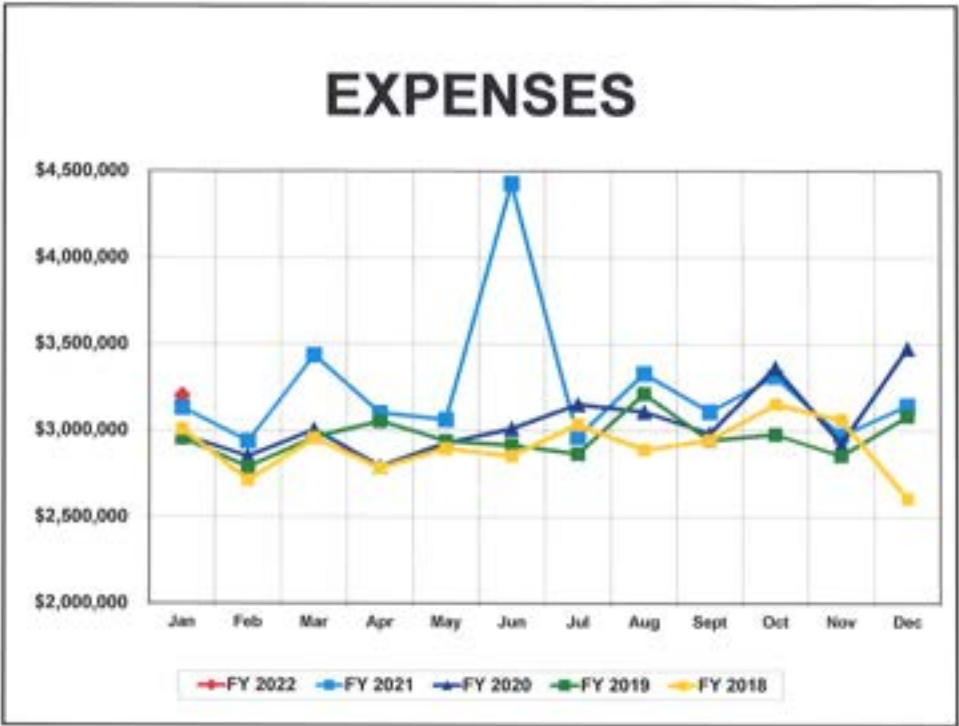










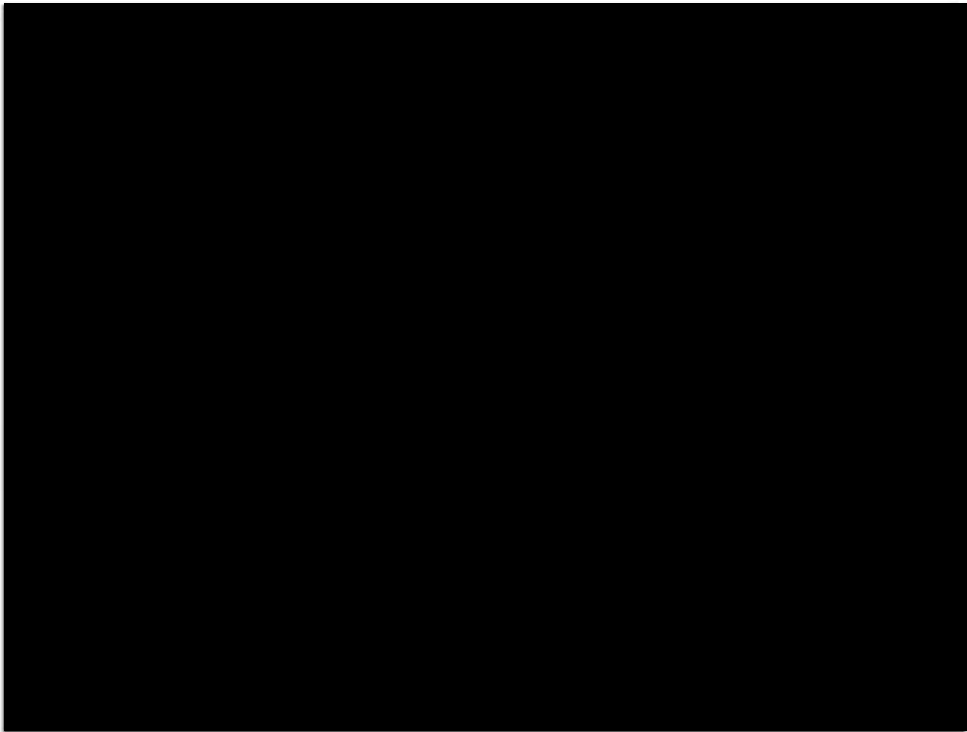


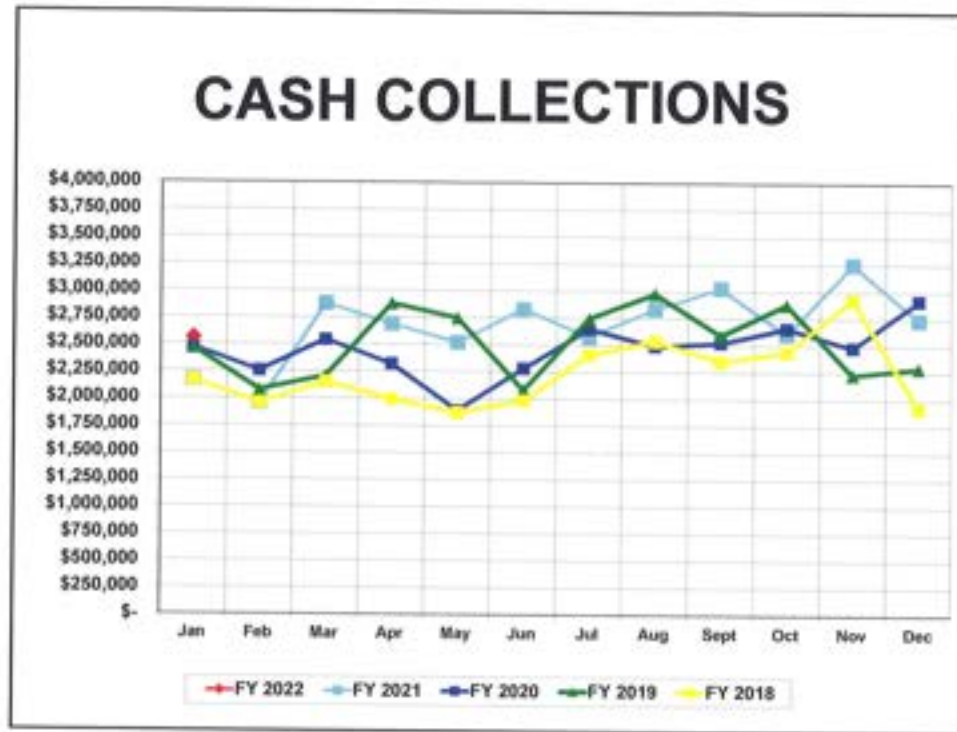
## Summary of Financials

	January
Gross Revenue	\$ 5,644,122
Net Revenue	\$ 2,998,220
Expenses	\$ 3,204,132
Grants, 340B and Tax Revenue	\$ 113,253
Grants and 340B and Stimulus	\$ 101,810
Tax Revenue	\$ 11,443
Net Income	\$ -92,659

## GROSS DAYS IN ACCOUNTS RECEIVABLE







## Income Statement - - - January 31, 2022

Page 1

		Current Month				Year-to-Date			
		2022	Budget	Difference	Variance	2022	Budget	Difference	Variance
<b>Revenue</b>									
7	Total In-patient Revenue	449,666	549,662	(99,996)	-18%	449,666	549,662	(99,996)	-18%
17	Total Out-patient Revenue	4,667,033	5,129,539	(462,506)	-9%	4,667,033	5,129,539	(462,506)	-9%
18	Professional Fees	527,423	499,052	28,371	6%	527,423	499,052	28,371	6%
19	<b>Total Patient Revenue</b>	<b>5,644,122</b>	<b>6,178,253</b>	<b>(534,131)</b>	<b>-9%</b>	<b>5,644,122</b>	<b>6,178,253</b>	<b>(534,131)</b>	<b>-9%</b>
20	Revenue Deductions & Bad Debt								
21	Contractual Allowances	2,738,237	3,218,364	(480,127)	-15%	2,738,237	3,218,364	(480,127)	-15%
22	Charity	27,656	-	27,656		27,656	-	27,656	
23	Bad Debt	120,174	214,314	(94,140)	-44%	120,174	214,314	(94,140)	-44%
24	Provider Fee & Other	(240,165)	(269,992)	29,827	-11%	(240,165)	(269,992)	29,827	-11%
25	Total Revenue Deductions & Bad Debt	2,645,902	3,162,686	(516,784)	-16%	2,645,902	3,162,686	(516,784)	-16%
26	<b>Total Net Patient Revenue</b>	<b>2,998,220</b>	<b>3,015,567</b>	<b>(17,347)</b>	<b>-1%</b>	<b>2,998,220</b>	<b>3,015,567</b>	<b>(17,347)</b>	<b>-1%</b>
27	Grants	-	4,282	(4,282)	-100%	-	4,282	(4,282)	-100%
28	HHS Stimulus Other Revenue	-	-	-		-	-	-	
29	COVID PPP Loan Forgiveness	-	-	-	0%	-	-	-	0%
30	Other Operating Income - Misc	101,810	136,008	(34,198)	-25%	101,810	136,008	(34,198)	-25%
31	<b>Total Net Revenues</b>	<b>3,100,030</b>	<b>3,155,857</b>	<b>(55,827)</b>	<b>-2%</b>	<b>3,100,030</b>	<b>3,155,857</b>	<b>(55,827)</b>	<b>-2%</b>
32	<b>Operating Expenses</b>								
33	Salary & Wages	1,648,507	1,686,102	(37,595)	-2%	1,648,507	1,686,102	(37,595)	-2%
34	Benefits	191,163	285,740	(94,577)	-33%	191,163	285,740	(94,577)	-33%
35	Professional Fees/Contract Labor	107,356	37,606	69,750	185%	107,356	37,606	69,750	185%
36	Purchased Services	146,986	242,327	(95,341)	-39%	146,986	242,327	(95,341)	-39%
37	Supplies	584,649	568,731	15,918	3%	584,649	568,731	15,918	3%
38	Rent & Leases	21,436	14,749	6,687	45%	21,436	14,749	6,687	45%
39	Repairs & Maintenance	71,065	44,587	26,478	59%	71,065	44,587	26,478	59%
40	Utilities	55,680	44,698	10,982	25%	55,680	44,698	10,982	25%
41	Insurance	40,266	29,244	11,022	38%	40,266	29,244	11,022	38%
42	Depreciation & Amortization	145,357	157,208	(11,851)	-8%	145,357	157,208	(11,851)	-8%
43	Interest	70,529	69,002	1,527	2%	70,529	69,002	1,527	2%
44	Other	121,138	167,514	(46,376)	-28%	121,138	167,514	(46,376)	-28%
45	<b>Total Operating Expenses</b>	<b>3,204,132</b>	<b>3,347,508</b>	<b>(143,376)</b>	<b>-4%</b>	<b>3,204,132</b>	<b>3,347,508</b>	<b>(143,376)</b>	<b>-4%</b>
46	<b>Operating Revenue Less Expenses</b>	<b>(104,102)</b>	<b>(191,651)</b>	<b>87,549</b>	<b>-46%</b>	<b>(104,102)</b>	<b>(191,651)</b>	<b>87,549</b>	<b>-46%</b>
47	<b>Non-Operating Income</b>								
48	Tax Revenue	11,443	80,172	(68,729)	-86%	11,443	80,172	(68,729)	-86%
49	Donations	-	11,180	(11,180)	-100%	-	11,180	(11,180)	-100%
50	<b>Total Non-Operating Income</b>	<b>11,443</b>	<b>91,352</b>	<b>(79,909)</b>	<b>-87%</b>	<b>11,443</b>	<b>91,352</b>	<b>(79,909)</b>	<b>-87%</b>
51	<b>Total Revenue Less Total Expenses</b>	<b>\$ (92,659)</b>	<b>\$ (100,299)</b>	<b>\$ 7,640</b>	<b>-8%</b>	<b>\$ (92,659)</b>	<b>\$ (100,299)</b>	<b>\$ 7,640</b>	<b>-8%</b>

## Income Statement Comparison - - - January 31, 2022

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	2022	Current Month			2022	Year-to-Date		
		2021	Difference	Variance		2021	Difference	Variance
<b>Revenue</b>								
7 Total In-patient Revenue	449,666	575,215	(125,549)	-22%	449,666	575,215	(125,549)	-22%
17 Total Out-patient Revenue	4,667,033	4,453,278	213,755	5%	4,667,033	4,453,278	213,755	5%
18 Professional Fees	527,423	426,304	101,119	24%	527,423	426,304	101,119	24%
19 <b>Total Patient Revenue</b>	<b>5,644,122</b>	<b>5,454,797</b>	<b>189,325</b>	<b>3%</b>	<b>5,644,122</b>	<b>5,454,797</b>	<b>189,325</b>	<b>3%</b>
20 Revenue Deductions & Bad Debt								
21 Contractual Allowances	2,738,237	2,633,616	104,621	4%	2,738,237	2,633,616	104,621	4%
22 Charity	27,656	183,638	(155,982)	-85%	27,656	183,638	(155,982)	-85%
23 Bad Debt	120,174	(15,590)	135,764	-871%	120,174	(15,590)	135,764	-871%
24 Provider Fee & Other	(240,165)	(210,007)	(30,158)	14%	(240,165)	(210,007)	(30,158)	14%
25 Total Revenue Deductions & Bad Debt	2,645,902	2,591,657	54,245	2%	2,645,902	2,591,657	54,245	2%
26 <b>Total Net Patient Revenue</b>	<b>2,998,220</b>	<b>2,863,140</b>	<b>135,080</b>	<b>5%</b>	<b>2,998,220</b>	<b>2,863,140</b>	<b>135,080</b>	<b>5%</b>
27 Grants	-	151,255	(151,255)	-100%	-	151,255	(151,255)	-100%
28 HHS Stimulus Other Revenue	-	-	-	-	-	-	-	-
29 COVID PPP Loan Forgiveness	-	-	-	-	-	-	-	-
30 Other Operating Income - Misc	101,810	142,352	(40,542)	-28%	101,810	142,352	(40,542)	-28%
31 <b>Total Net Revenues</b>	<b>3,100,030</b>	<b>3,156,747</b>	<b>(56,717)</b>	<b>-2%</b>	<b>3,100,030</b>	<b>3,156,747</b>	<b>(56,717)</b>	<b>-2%</b>
<b>Operating Expenses</b>								
33 Salary & Wages	1,648,507	1,676,400	(27,893)	-2%	1,648,507	1,676,400	(27,893)	-2%
34 Benefits	191,163	262,933	(71,770)	-27%	191,163	262,933	(71,770)	-27%
35 Professional Fees/Contract Labor	107,356	27,266	80,090	294%	107,356	27,266	80,090	294%
36 Purchased Services	146,986	160,958	(13,972)	-9%	146,986	160,958	(13,972)	-9%
37 Supplies	584,649	403,256	181,393	45%	584,649	403,256	181,393	45%
38 Rent & Leases	21,436	46,821	(25,385)	-54%	21,436	46,821	(25,385)	-54%
39 Repairs & Maintenance	71,065	43,879	27,186	62%	71,065	43,879	27,186	62%
40 Utilities	55,680	59,629	(3,949)	-7%	55,680	59,629	(3,949)	-7%
41 Insurance	40,266	30,004	10,262	34%	40,266	30,004	10,262	34%
42 Depreciation & Amortization	145,357	148,862	(3,505)	-2%	145,357	148,862	(3,505)	-2%
43 Interest	70,529	84,034	(13,505)	-16%	70,529	84,034	(13,505)	-16%
44 Other	121,138	189,384	(68,246)	-36%	121,138	189,384	(68,246)	-36%
45 <b>Total Operating Expenses</b>	<b>3,204,132</b>	<b>3,133,426</b>	<b>70,706</b>	<b>2%</b>	<b>3,204,132</b>	<b>3,133,426</b>	<b>70,706</b>	<b>2%</b>
46 <b>Operating Revenue Less Expenses</b>	<b>(104,102)</b>	<b>23,321</b>	<b>(127,423)</b>	<b>-546%</b>	<b>(104,102)</b>	<b>23,321</b>	<b>(127,423)</b>	<b>-546%</b>
<b>Non-Operating Income</b>								
48 Tax Revenue	11,443	11,507	(64)	-1%	11,443	11,507	(64)	-1%
49 Donations	-	-	-	-	-	-	-	-
50 <b>Total Non-Operating Income</b>	<b>11,443</b>	<b>11,507</b>	<b>(64)</b>	<b>-1%</b>	<b>11,443</b>	<b>11,507</b>	<b>(64)</b>	<b>-1%</b>
51 <b>Total Revenue Less Total Expenses</b>	<b>\$ (92,659)</b>	<b>\$ 34,828</b>	<b>\$ (127,487)</b>	<b>-366%</b>	<b>\$ (92,659)</b>	<b>\$ 34,828</b>	<b>\$ (127,487)</b>	<b>-366%</b>

## Balance Sheet - - January 31, 2022

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Assets	Current Month	Prior Month	Liabilities	Current Month	Prior Month
Current Assets			Current Liabilities		
Cash					
Operating	\$ 13,164,868	\$ 13,447,007	Accts Payable - System	\$ 638,137	\$ 725,842
Debt Svc. Res. 2016 Bonds	878,731	878,731	Accrued Expenses	621,526	533,631
Bond Funds - 2016 Bonds	422	267	Cost Report Settlement Res	1,000,877	1,044,485
Bond Funds - 2021 / 2006	329,981	329,971	Wages & Benefits Payable	1,278,488	1,277,369
Escrow - UMB	-	-	Deferred Revenue	1,435,961	1,435,961
COVID PPP	-	-	COVID PPP Short Term Loan	-	-
Relief Fund Cash Restricted	936,145	936,145	Relief Fund Liability	936,145	936,145
Medicare Accelerated Pmt	2,417,648	2,561,304	Medicare Accelerated Pmt Liab	2,417,648	2,561,304
Total Cash	17,727,795	18,153,425	Current Portion of LT Debt-Lease	46,715	61,031
			Current Portion of LT Debt-2006	-	-
Accounts Receivable			Current Portion of LT Debt-2016	340,000	340,000
Patient Revenue - Net	5,205,517	4,994,719	Total Current Liabilities	8,715,497	8,915,768
Other Receivables	1,827,781	1,830,204			
Total Accounts Receivable	7,033,298	6,824,923	Long-Term Liabilities		
			Leases Payable	-	-
Inventory	1,805,058	1,801,606	Equipment Lease (Wells Fargo)	-	-
			Bond Premium (Net) - 2006 Def Outflows	204,638	205,750
Total Current Assets	26,566,151	26,779,954	Bond Premium (Net) - 2016	123,622	124,047
			Bond Premium (Net) - 2021	758,496	762,467
Fixed Assets			Bonds Payable - 2021	7,885,000	7,885,000
Property Plant & Equip (Net)	7,482,566	7,633,431	Bonds Payable - 2006	-	-
Electronic Health Record (Net)	-	-	Bonds Payable - 2016	9,250,000	9,250,000
Clinic Expansion	13,377,405	13,377,405	Total Long-Term Liabilities	18,221,756	18,227,264
Work In Progress	781,904	743,362			
Land	101,000	101,000	Net Assets		
Total Fixed Assets	21,742,875	21,855,198	Un-Restricted	21,899,259	13,057,906
			Current Year Net Income/Loss	(92,659)	8,841,353
Other Assets			Total Un-Restricted	21,806,600	21,899,259
Prepays & Other Assets	434,827	407,139			
Total Other Assets	434,827	407,139	Restricted		
			Total Net Assets	21,806,600	21,899,259
<b>Total Assets</b>	<b>\$ 48,743,853</b>	<b>\$ 49,042,291</b>	<b>Total Liabilities &amp; Net Assets</b>	<b>\$ 48,743,853</b>	<b>\$ 49,042,291</b>

## Monthly Trends

	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22
Activity	31	28	31	30	31	30	31	31	30	31	30	31	31
2 In-Patient Admissions	34	22	27	33	41	33	35	32	17	24	32	27	27
3 In-Patient Days	83	61	76	86	101	93	72	74	47	62	95	56	56
4 Avg Stay Days (In-patients)	2.4	2.8	2.8	2.6	2.5	2.8	2.1	2.3	2.8	2.6	3.0	2.1	2.1
5 Swing Bed Admissions	0	0	0	0	0	0	0	0	0	0	0	0	0
6 Swing Bed Days	0	0	0	0	0	0	0	0	0	0	0	0	0
7 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
8 Average Daily Census	2.7	2.2	2.5	2.9	3.3	3.1	2.3	2.4	1.6	2.0	3.2	1.8	1.8
Statistics													
9 E/R visits	478	424	501	455	573	666	561	697	612	594	604	607	946
10 Observ Hours	545	781	458	291	428	685	713	513	538	228	97	319	416
11 Lab Tests	5,824	4,831	5,810	5,583	6,045	6,032	5,687	5,586	5,409	5,918	6,005	5,498	5,660
12 Radiology/CT/MRI Exams	1,271	1,126	1,341	1,252	1,304	1,539	1,335	1,525	1,397	1,214	1,240	1,365	1,299
14 OR Cases	74	79	106	126	99	120	85	126	118	131	102	87	69
15 Clinic Visits	1,686	1,661	1,863	1,983	1,756	1,931	1,759	1,902	1,810	1,766	1,536	1,490	1,444
16 Spec. Clinic Visits	136	97	79	109	101	113	204	89	85	75	46	37	33
17 Oncology Clinic Visits	92	93	129	127	116	127	90	135	119	114	110	103	106
18 Oncology/Infusion Patients	110	91	175	150	158	159	151	195	160	156	193	174	193
19 Infusion Patients	20	52	78	51	75	96	122	109	92	93	137	101	109
20 EMS Transports	114	90	108	83	112	137	113	126	108	93	106	124	101
21 Total Stats	10,350	9,325	10,648	10,210	10,767	11,605	10,820	11,003	10,448	10,382	10,176	9,905	10,376



**Statistical Review**

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2022	January			January			January Prior Y-T-D			
	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
<b>In-Patient</b>										
Admissions:										
Acute	31	28	3	31	28	3	31	34	(3)	-9%
Swing Bed	-	-	-	-	-	-	-	-	-	
Total	31	28	3	31	28	3	31	34	(3)	-9%
Patient Days:										
Acute	67	69	(2)	67	69	(2)	67	83	(16)	-19%
Swing Bed	-	-	-	-	-	-	-	-	-	
Total	67	69	(2)	67	69	(2)	67	83	(16)	-19%
Average Daily Census:										
# Of Days	31	31		31	31		31	31		
Acute	2.2	2.2	(0.1)	2.2	2.2	(0.1)	2.2	2.7	(0.5)	-19%
Swing Bed	-	-	-	-	-	-	-	-	-	
Total	2.2	2.2	(0.1)	2.2	2.2	(0.1)	2.2	2.7	(0.5)	-19%
Length of Stay:										
Acute	2.2	2.5	(0.3)	2.2	2.5	(0.3)	2.2	2.4	(0.3)	-11%
Swing Bed	-	-	-	-	-	-	-	-	-	0%
Total	2.2	2.5	(0.3)	2.2	2.5	(0.3)	2.2	2.4	(0.3)	-11%
<b>Out-Patient</b>										
Out-Patient Visits										
E/R Visits	946	546	400	946	546	400	946	478	468	98%
Observ admissions	17	25	(8)	17	25	(8)	17	27	(10)	-37%
Lab Tests	5,660	5,560	100	5,660	5,560	100	5,660	5,824	(164)	-3%
Radiology/CT/MRI Exams/M	1,299	1,290	9	1,299	1,290	9	1,299	1,271	28	2%
OR Cases	69	103	(34)	69	103	(34)	69	74	(5)	-7%
Clinic Visits	1,444	1,723	(279)	1,444	1,723	(279)	1,444	1,686	(242)	-14%
Spec. Clinic Visits	33	94	(61)	33	94	(61)	33	136	(103)	-76%
Oncology Clinic Visits	106	112	(6)	106	112	(6)	106	92	14	15%
Oncology/Infusion Patients	193	154	39	193	154	39	193	110	83	75%
Infusion Patients	109	12	97	109	12	97	109	20	89	445%
EMS Transports	101	106	(5)	101	106	(5)	101	114	(13)	-11%
Total	9,977	9,725	252	9,977	9,725	252	9,977	9,832	145	1%

## Pagosa Springs Medical Center

Cerner/Healthland Accounts Receivable for Hospital by Payor and Days Outstanding -- As of January 31, 2022

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		0-30 Days	31-60 Days	61-90 Days	91-120 Days	121-150 Days	151-180 Days	181+ Days	Total	Percent of Total	Accts sent to Collections
Medicare	\$	2,283,882	\$ 347,150	\$ 267,543	\$ 120,972	\$ 75,527	\$ 42,643	\$ 112,263	\$ 3,249,980	32%	
Medicaid		779,087	159,326	138,662	52,008	16,703	33,515	351,875	1,531,176	15%	
Third Party		1,472,748	487,084	309,677	198,190	197,670	107,835	344,720	3,117,924	31%	
Self-Pay		280,168	225,004	252,137	202,375	214,819	148,453	854,861	2,177,817	22%	
<b>Current Month Total</b>	<b>\$</b>	<b>4,815,885</b>	<b>\$ 1,218,564</b>	<b>\$ 968,019</b>	<b>\$ 573,545</b>	<b>\$ 504,719</b>	<b>\$ 332,446</b>	<b>\$ 1,663,719</b>	<b>\$ 10,076,897</b>	<b>100%</b>	<b>184,318</b>
<b>Pct of Total</b>		<b>48%</b>	<b>12%</b>	<b>10%</b>	<b>6%</b>	<b>5%</b>	<b>3%</b>	<b>17%</b>	<b>100%</b>		
Dec-21	\$	4,411,483	\$ 1,771,146	\$ 897,483	\$ 629,416	\$ 471,528	\$ 299,814	\$ 1,716,882	\$ 10,197,752		246,249
Pct of Total		43%	17%	9%	6%	5%	3%	17%	100%		
Nov-21	\$	5,254,766	\$ 1,288,663	\$ 765,276	\$ 596,925	\$ 429,612	\$ 449,363	\$ 1,582,207	\$ 10,366,811		223,165
Pct of Total		51%	12%	7%	6%	4%	4%	15%	100%		
Oct-21	\$	4,591,197	\$ 1,412,195	\$ 784,524	\$ 573,095	\$ 661,916	\$ 330,409	\$ 1,562,788	\$ 9,916,124		372,288
Pct of Total		46%	14%	8%	6%	7%	3%	16%	100%		
Sep-21	\$	4,623,878	\$ 1,367,954	\$ 793,192	\$ 861,326	\$ 484,324	\$ 263,617	\$ 1,610,326	\$ 10,004,617		251,846
Pct of Total		46%	14%	8%	9%	5%	3%	16%	100%		
Aug-21	\$	5,070,970	\$ 1,423,538	\$ 1,289,523	\$ 637,852	\$ 423,338	\$ 370,971	\$ 1,518,317	\$ 10,734,509		181,959
Pct of Total		47%	13%	12%	6%	4%	3%	14%	100%		
Jul-21	\$	4,918,121	\$ 1,859,528	\$ 864,925	\$ 524,846	\$ 546,331	\$ 340,021	\$ 1,455,387	\$ 10,509,159		125,498
Pct of Total		47%	18%	8%	5%	5%	3%	14%	100%		
Jun-21	\$	4,450,225	\$ 991,357	\$ 492,319	\$ 470,912	\$ 586,430	\$ 386,858	\$ 1,658,314	\$ 9,036,415		248,707
Pct of Total		49%	11%	5%	5%	6%	4%	18%	100%		
May-21	\$	4,564,596	\$ 1,223,151	\$ 900,499	\$ 559,379	\$ 516,823	\$ 338,558	\$ 1,383,875	\$ 9,486,881		95,678
Pct of Total		48%	13%	9%	6%	5%	4%	15%	100%		
Apr-21	\$	4,315,723	\$ 1,332,592	\$ 712,599	\$ 645,005	\$ 417,714	\$ 166,007	\$ 1,174,380	\$ 8,764,020		190,242
Pct of Total		49%	15%	8%	7%	5%	2%	13%	100%		
Mar-21	\$	4,536,107	\$ 1,283,697	\$ 893,010	\$ 614,678	\$ 287,740	\$ 205,954	\$ 1,187,089	\$ 9,008,275		141,056
Pct of Total		50%	14%	10%	7%	3%	2%	13%	100%		
Feb-21	\$	4,632,177	\$ 1,808,956	\$ 796,014	\$ 329,120	\$ 255,606	\$ 194,030	\$ 1,194,813	\$ 9,210,716		116,794
Pct of Total		50%	20%	9%	4%	3%	2%	13%	100%		
Jan-21	\$	4,667,228	\$ 1,324,541	\$ 489,574	\$ 380,972	\$ 303,832	\$ 307,163	\$ 1,102,666	\$ 8,575,976		197,220
Pct of Total		54%	15%	6%	4%	4%	4%	13%	100%		
Dec-20	\$	4,315,448	\$ 835,664	\$ 542,288	\$ 394,340	\$ 421,056	\$ 304,468	\$ 965,830	\$ 7,779,094		222,785
Pct of Total		55%	11%	7%	5%	5%	4%	12%	100%		

<b>Pagosa Springs Medical Center</b>
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<b>Cerner/Healthland Accounts Receivable for Hospital by Payor and Days Outstanding -- As of January 31, 2022</b>
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		0-30 Days		31-60 Days		61-90 Days		91-120 Days		121-150 Days		151-180 Days		181+ Days		Total	Percent of Total	Accts sent to Collections
Nov-20	\$	4,108,089	\$	1,171,013	\$	583,125	\$	541,005	\$	584,542	\$	275,531	\$	985,311	\$	8,248,616		172,213
Pct of Total		50%		14%		7%		7%		7%		3%		12%		100%		
Oct-20	\$	4,351,562	\$	1,054,133	\$	832,882	\$	694,766	\$	372,848	\$	200,118	\$	1,158,212	\$	8,664,521		855,499
Pct of Total		50%		12%		10%		8%		4%		2%		13%		100%		
Sep-20	\$	4,073,962	\$	1,528,744	\$	916,786	\$	468,911	\$	324,972	\$	204,586	\$	2,011,419	\$	9,529,381		12,049
Pct of Total		43%		16%		10%		5%		3%		2%		21%		100%		
<b>Pct Settled (Current)</b>				72.4%		45.3%		36.1%		19.8%		29.5%		-454.9%				
<b>Pct Settled (Dec from Nov)</b>				66.3%		30.4%		17.8%		21.0%		30.2%		-282.1%				
<b>Pct Settled (Nov from Oct)</b>				71.9%		45.8%		23.9%		25.0%		32.1%		-378.9%				
<b>Pct Settled (Oct from Sept)</b>				69.5%		42.6%		27.7%		23.2%		31.8%		-492.8%				
<b>Pct Settled (Sept from Aug)</b>				73.0%		44.3%		33.2%		24.1%		37.7%		-334.1%				

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

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	31	28	31	30	31	30
	Jan-22	Feb-21	Mar-21	Apr-21	May-21	Jun-21
2 Net Accounts Receivable	\$ 5,205,517	\$ 4,025,591	\$ 3,956,034	\$ 3,777,753	\$ 3,877,097	\$ 4,279,409
3 Net Patient Revenue	\$ 2,998,220	\$ 2,280,206	\$ 2,700,773	\$ 2,799,928	\$ 2,867,264	\$ 3,457,110
4 Net Patient Rev/Day (2 month Avg)	\$ 86,218	\$ 86,898	\$ 84,279	\$ 90,226	\$ 92,912	\$ 103,865
5 Net Days in A/R	60	46	47	42	42	41

	31	31	30	31	30	31
	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21
7 Net Accounts Receivable	\$ 4,520,929	\$ 4,713,332	\$ 4,472,476	\$ 4,754,058	\$ 5,115,376	\$ 4,491,257
8 Net Patient Revenue	\$ 2,659,431	\$ 3,484,951	\$ 3,150,551	\$ 3,377,543	\$ 3,221,526	\$ 2,347,320
9 Net Patient Rev/Day (2 month Avg)	\$ 100,513	\$ 99,103	\$ 108,718	\$ 106,986	\$ 108,169	\$ 91,552
10 Net Days in A/R	45	48	41	44	47	49

## Pagosa Springs Medical Center - - - Gross Days Target

12 Medicare	33%	21	\$ 86,218	\$ 597,493
13 Medicaid	7%	35	\$ 86,218	\$ 211,235
14 Blue Cross	15%	48	\$ 86,218	\$ 620,772
15 Commercial	26%	65	\$ 86,218	\$ 1,457,091
16 Self Pay	19%	150	\$ 86,218	\$ 2,457,224
17 Total:	100%			\$ 5,343,816
18				\$ 86,218
19				
			Gross Days in A/R Target	62

**Pagosa Springs Medical Center**  
**Revenue by Financial Class**  
**January 31, 2022**

**ORAL REPORTS 4.a.vii.(a.)**

Financial Class	Inpatient MTD	Outpatient MTD	Total MTD	% MTD
Auto/Liability Insurance	-	12,532.70	12,532.70	0.22%
Blue Cross	-	547,341.24	547,341.24	9.70%
Champus	-	49,440.30	49,440.30	0.88%
Commercial Insurance	36,575.60	564,463.94	601,039.54	10.65%
Medicaid	149,397.90	985,912.09	1,135,309.99	20.11%
Medicare	152,842.66	1,819,401.28	1,972,243.94	34.94%
Medicare HMO	111,799.43	607,190.15	718,989.58	12.74%
Self Pay	33,928.09	189,697.86	223,625.95	3.96%
Self Pay - Client Billing	-	23,555.17	23,555.17	0.42%
Veterans Administration	51,539.40	261,724.83	313,264.23	5.55%
Workers Compensation	-	46,779.68	46,779.68	0.83%
<b>Total</b>	<b>536,083.08</b>	<b>5,108,039.24</b>	<b>5,644,122.32</b>	<b>100.00%</b>

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	-	12,532.70	12,532.70	0.22%	1.41%	0.91%	1.15%	1.05%	1.24%	1.11%
Blue Cross	-	547,341.24	547,341.24	9.70%	11.40%	12.38%	15.40%	15.42%	15.90%	15.83%
Champus	-	49,440.30	49,440.30	0.88%	0.95%	0.82%	0.31%	0.08%	0.07%	0.19%
Commercial Insurance	36,575.60	564,463.94	601,039.54	10.65%	12.12%	11.72%	11.34%	13.08%	11.79%	13.08%
Medicaid	149,397.90	985,912.09	1,135,309.99	20.11%	17.50%	18.86%	18.75%	18.22%	20.28%	21.56%
Medicare	152,842.66	1,819,401.28	1,972,243.94	34.94%	36.51%	38.60%	36.99%	36.75%	35.27%	35.90%
Medicare HMO	111,799.43	607,190.15	718,989.58	12.74%	11.01%	7.77%	7.20%	4.47%	3.55%	2.76%
Self Pay	33,928.09	189,697.86	223,625.95	3.96%	3.95%	3.68%	4.40%	5.40%	6.96%	5.26%
Self Pay - Client Billing	-	23,555.17	23,555.17	0.42%	0.36%	0.22%	0.18%	0.18%	0.19%	0.17%
Veterans Administration	51,539.40	261,724.83	313,264.23	5.55%	3.76%	4.13%	2.74%	4.13%	3.58%	2.74%
Workers Compensation	-	46,779.68	46,779.68	0.83%	1.03%	0.92%	1.52%	1.22%	1.17%	1.37%
<b>Total</b>	<b>536,083.08</b>	<b>5,108,039.24</b>	<b>5,644,122.32</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>99.97%</b>
Blank										0.00%
HMO (Health Maint Org)										0.03%
<b>Total</b>						<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>	<b>100.00%</b>

**Pagosa Springs Medical Center**  
**Financial Forecast**  
**Statement of Cash Flows**

ORAL REPORTS 4.a.vii.(a.)

	January 2022
<b>Cash Flows from operating activities</b>	
Change in net assets	(92,659)
Adjustments to reconcile net assets to net cash	
Depreciation and amortization	145,357
Patient accounts receivable	(210,798)
Accounts payable and wages payable	(86,586)
Accrued liabilities	87,895
Pre-paid assets	(27,688)
Deferred revenues	-
Other receivables	2,423
Reserve for third party settlement	(43,608)
Inventory	(3,452)
Net Cash Provided by (used in) operating activities	(229,116)
<b>Cash Flows from investing activities</b>	
Purchase of property and equipment	-
Work in progress	(38,542)
Proceeds from sale of equipment/(Loss)	-
Net Cash Provided by (used in) investing activities	(38,542)
<b>Cash Flows from financing activities</b>	
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	(143,656)
Change in Prior Year Net Assets	-
Change in leases payable	(14,316)
Net Cash Provided by (used in) financing activities	(157,972)
<b>Net Increase(Decrease) in Cash</b>	(425,630)
<b>Cash Beginning of Month</b>	18,153,425
<b>Cash End of Month</b>	17,727,795

2022						
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
	\$2,121,338.00	\$2,559,519.95	\$438,181.95	120.66%	\$ (89,581.25)	\$2,469,938.70

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

Prepared 2/10/2022  
Cash balance 18,153,425  
at 12/31/21

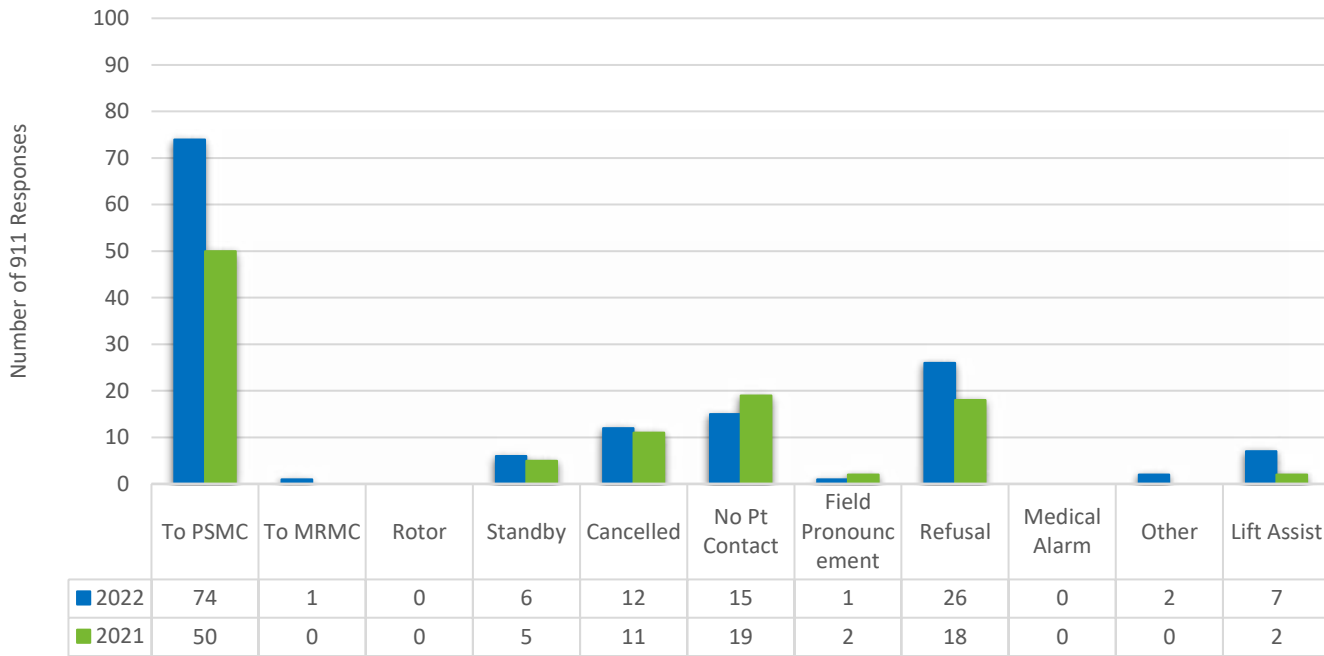
	(1) Net Asset Change	(2) Depreciation	(3) Receivables	(4) Payables & Other Liabilities	(5) Pre-Paid Assets	(6) Deferred Revenue	(7) Third Party	(8) Inventory	(9) Equipment Purchase	(10) Lease Payables	(11) Other	Net Cash Change	Balance
January 2022 (Actual)	(92,659)	145,357	(208,375)	1,309	(27,688)	-	(43,608)	(3,452)	(38,542)	(14,316)	(143,656)	(425,630)	17,727,795
February 2022 (Budget)	76,888	165,008	(75,000)	15,000	5,000	-	(50,000)	5,000	(100,000)	(14,000)	10,968	38,864	17,766,659
March 2022 (Budget)	(120,803)	169,208	(75,000)	(2,000,000)	5,000	-	(50,000)	5,000	(50,000)	(30,000)	10,968	(2,135,627)	15,631,032
April 2022 (Budget)	(213,980)	172,209	(75,000)	25,000	5,000	-	50,000	5,000	(100,000)	(30,000)	10,968	(150,803)	15,480,229
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	15,522,014
June 2022 (Budget)	(84,597)	178,170	(75,000)	25,000	5,000	-	(50,000)	5,000	(100,000)	(30,000)	10,968	(115,459)	15,406,555
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	16,004,382
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	16,283,787
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	16,622,450
October 2022 (Budget)	(148,862)	211,208	(75,000)	25,000	5,000	-	50,000	5,000	(100,000)	(30,000)	10,968	(46,686)	16,575,764
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	16,618,451
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	16,754,502
Totals	507,840	2,250,408	(1,033,375)	(1,758,691)	27,312	-	(193,608) 981,635	51,548	(899,037)	(328,316)	(23,004)	(1,398,923)	16,754,502
													at 12/31/21
													6,080,177



# Operations Report for January 2022

## EMS: January

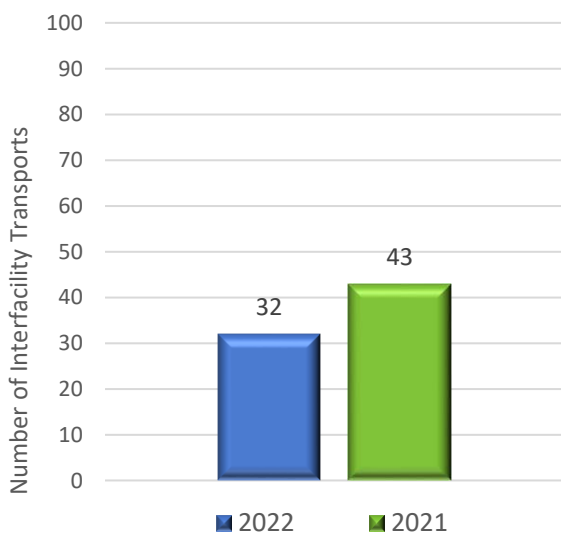
### EMS 911 Response



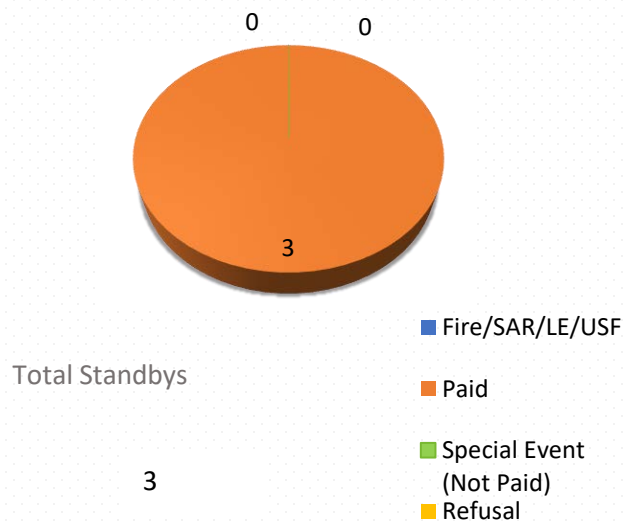
Total 911 Responses for 2020 : 107

2022 2021

### Total Interfacility Transports

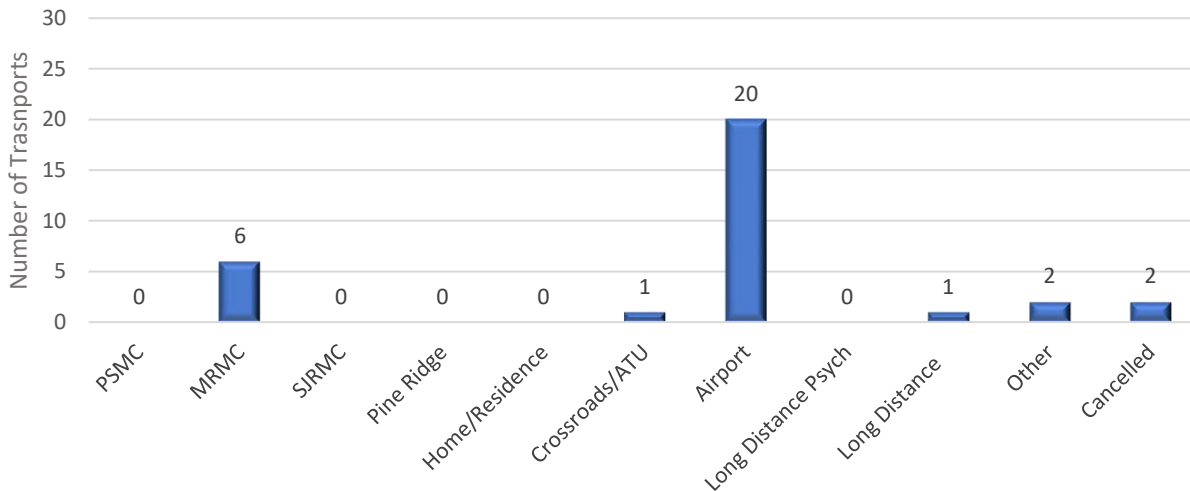


### Breakdown of EMS Standbys



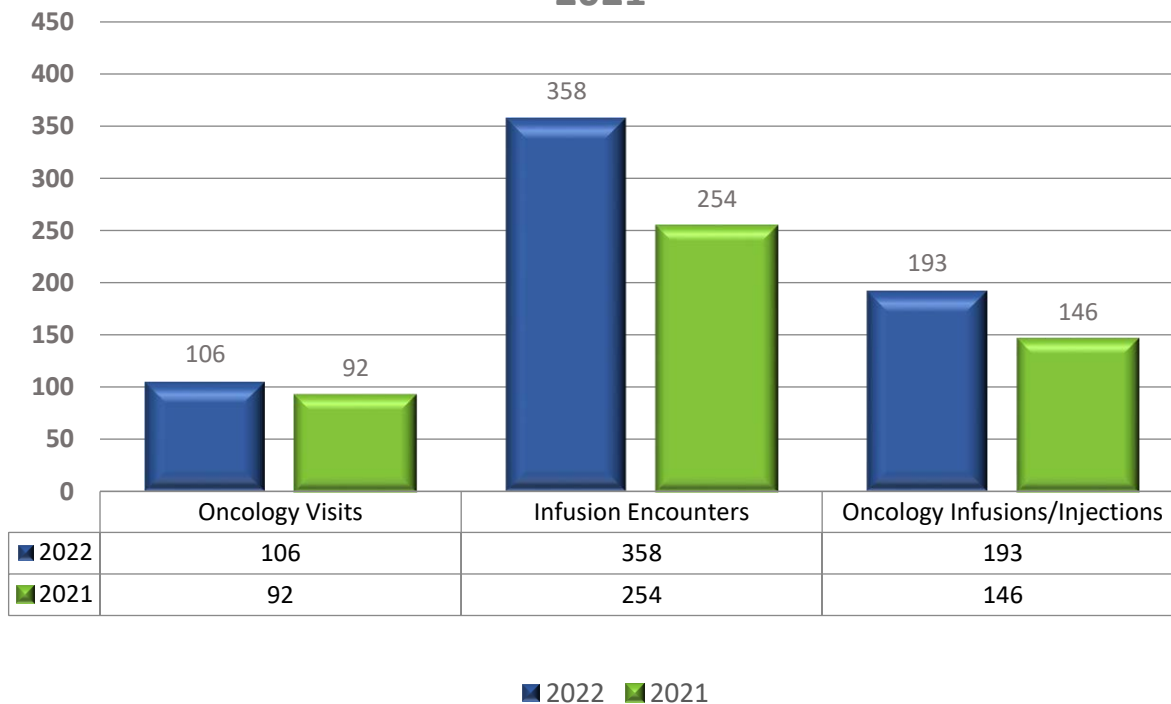
### EMS: January

Interfacility Transports by Destination

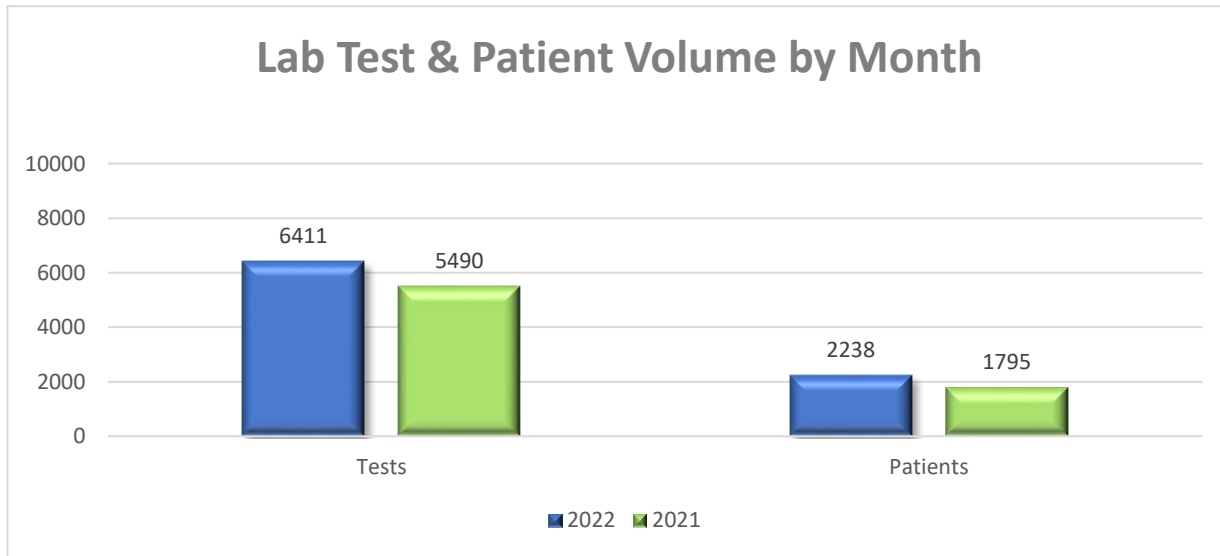


### Oncology/Infusion: January

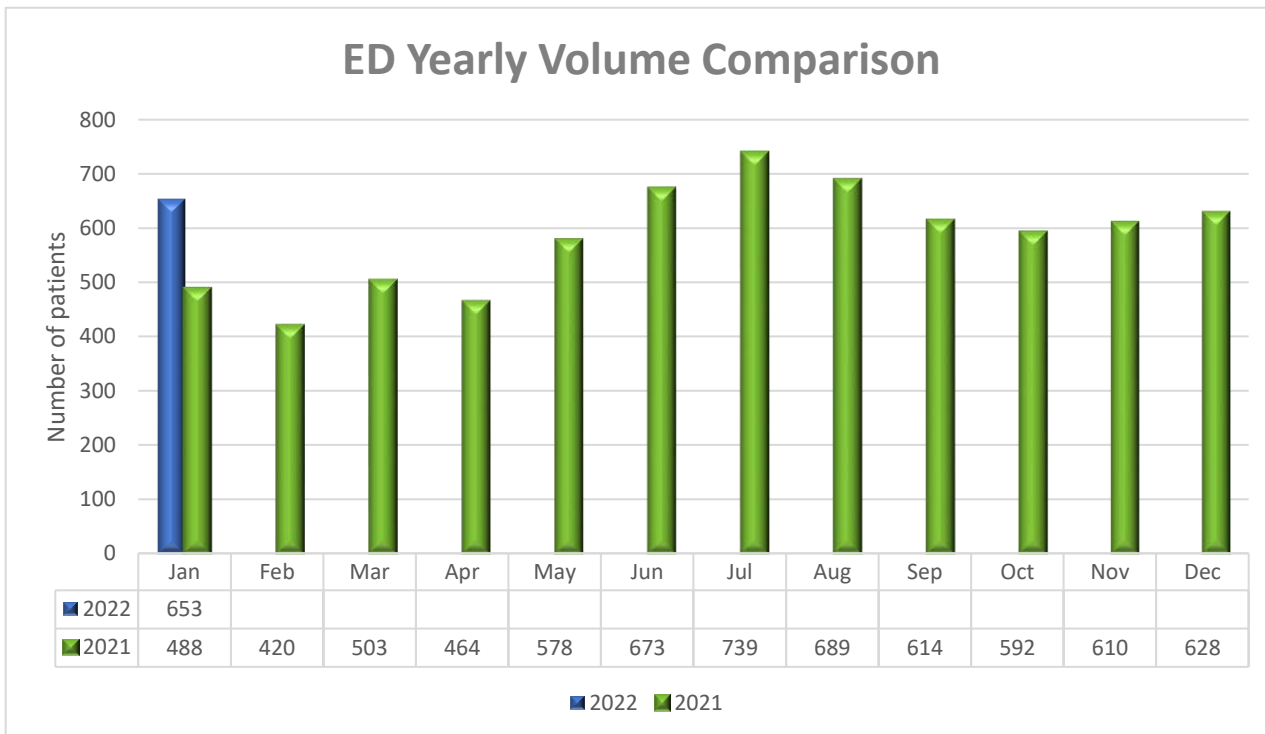
Oncology/Infusion Monthly Comparison 2022 to 2021



## Lab: January

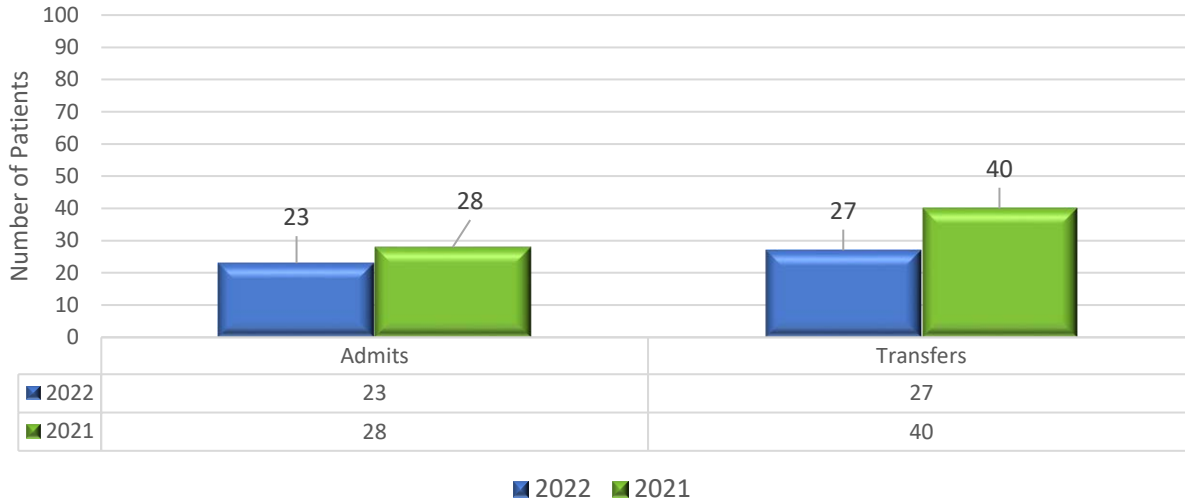


## ED: January

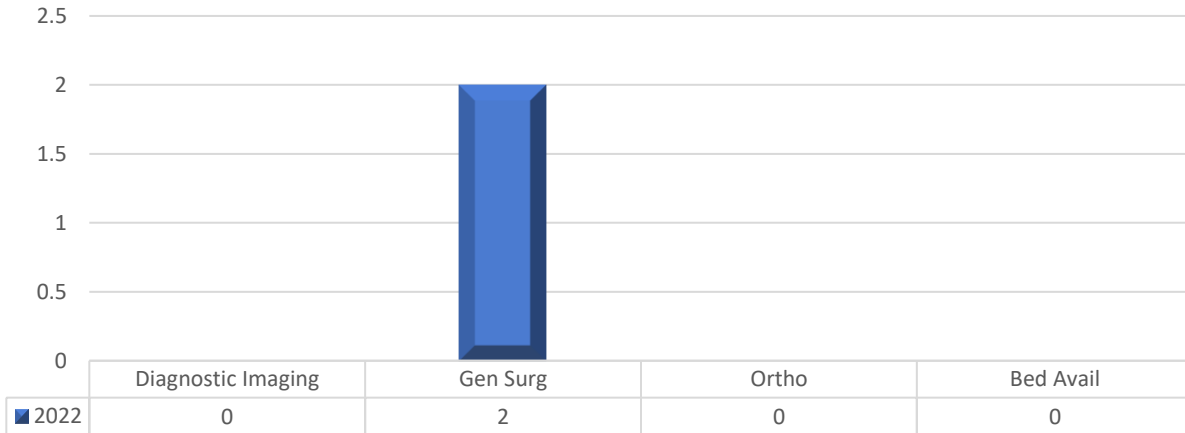


ED: January

### ED Inpatient Admissions and Transfers Monthly Comparison



### Resource Related Transfers



Average Daily Census

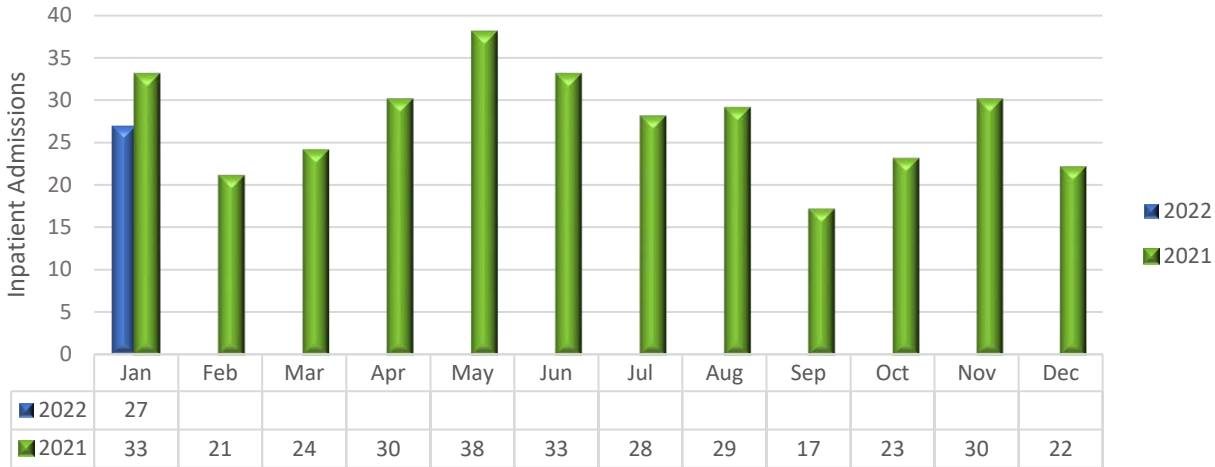
21

Average Length of Stay (in hours)

2.25

## Inpatient : January

### Inpatient Admission Comparison



Average Daily Census

3.3

Average Length of Stay (in days)

1.65

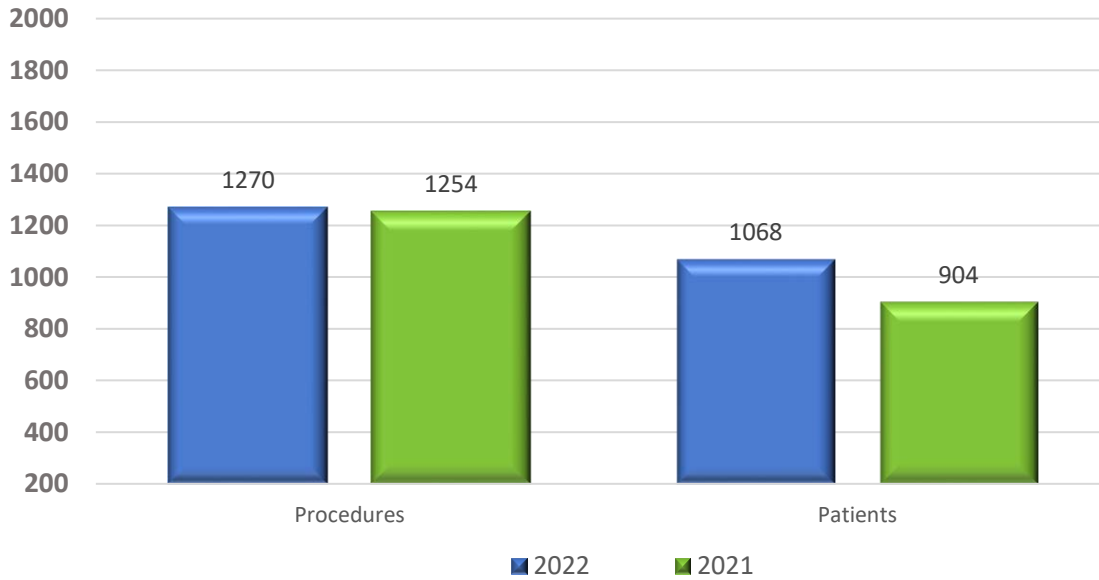


COVID-19 Patients  
Hospitalized at PSMC

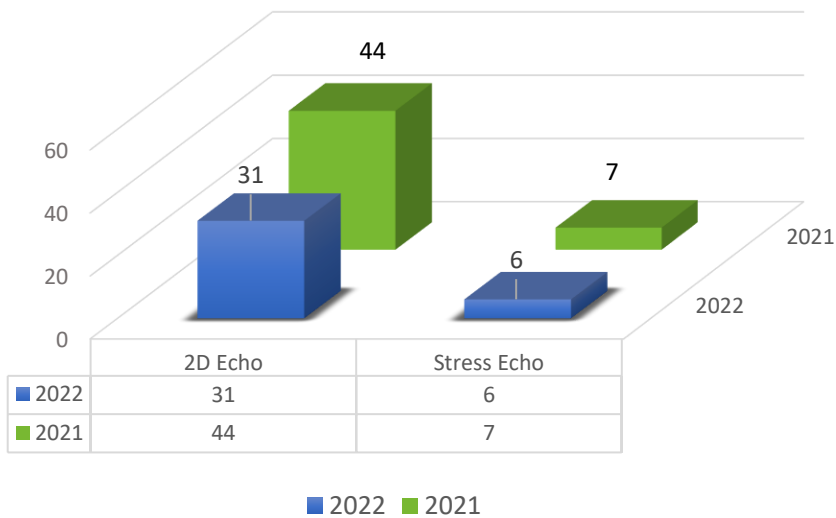
5

## Diagnostic Imaging: January

### Diagnostic Imaging Stats by Month

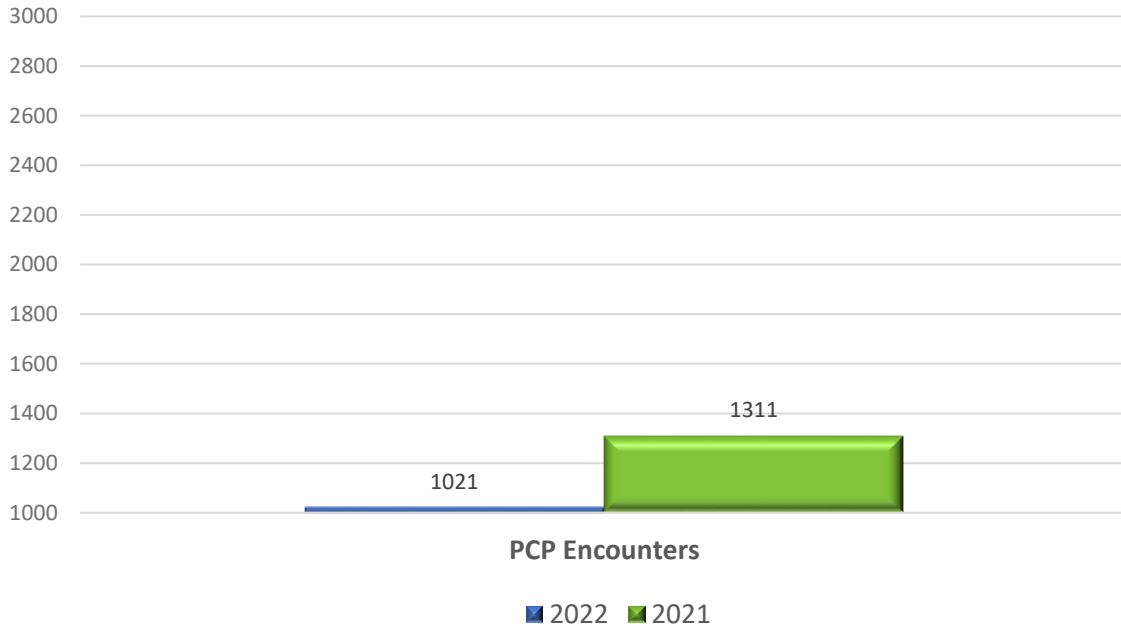


### Cardiology 2D Echo & Stress by Month

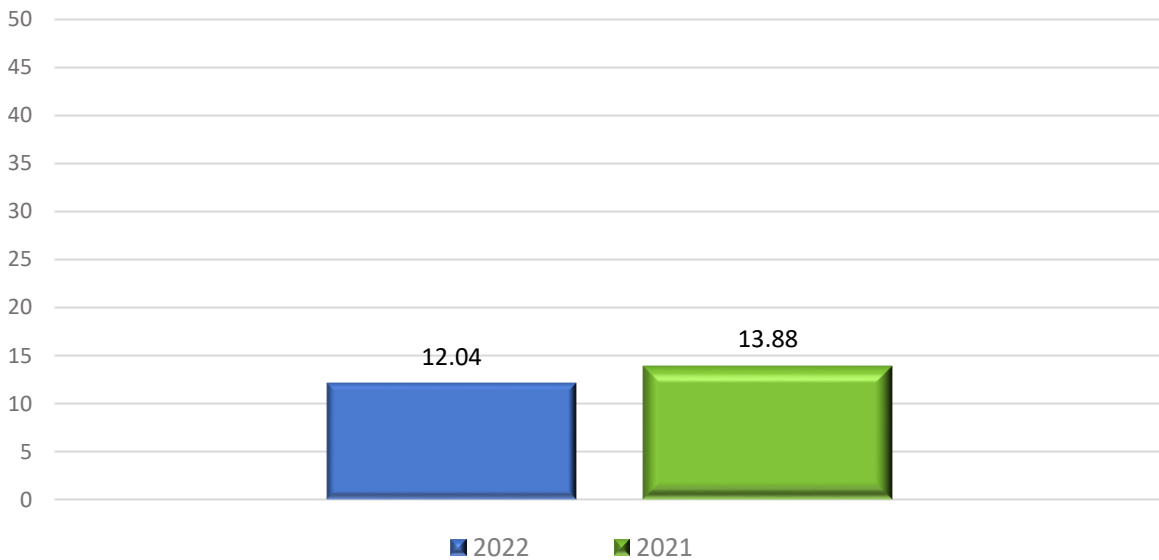


Clinic: January

### Rural Health Clinic Encounters by Month

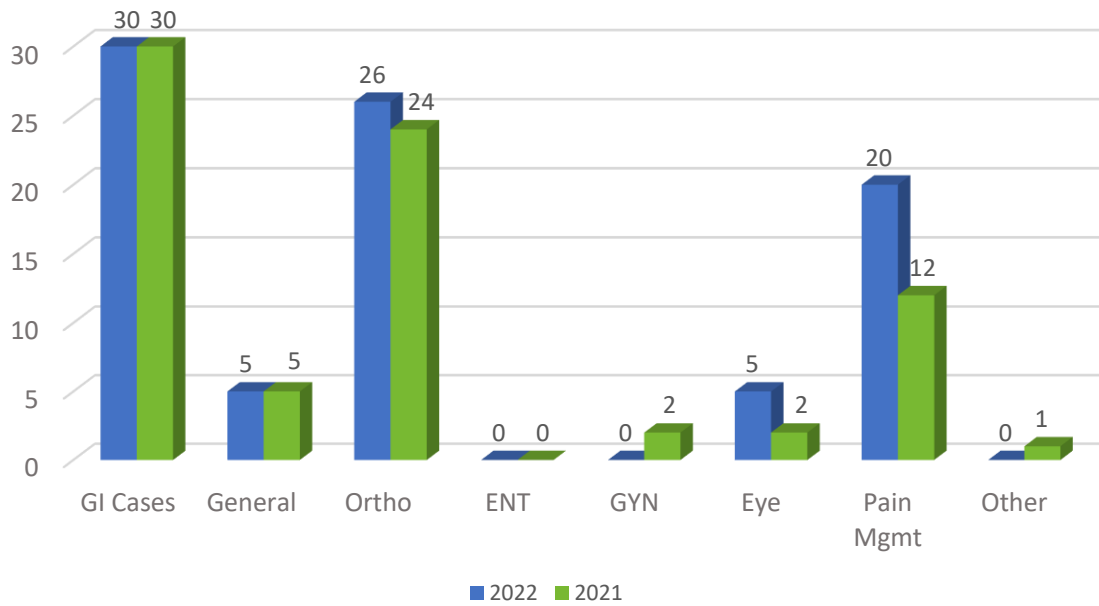


### Average Daily Walk-Ins



## Surgery

**Surgery Cases by Month**  
2021 compared to 2020







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

**MEDICAL STAFF REPORT BY CHIEF OF STAFF, JOHN WISNESKI  
February 22, 2022**

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

RECOMMENDATION	DESCRIPTION
<b>Waiver of Board Certification Requirement for Dr. Robert Brown</b>	For reappointment; this waiver process is a requirement of the Medical Staff Bylaws and was granted by the Med Exec Committee and Board of Directors at the time of his last reappointment in 2020.

**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
<b>Jennifer Berarducci, DO</b>	Initial Appointment	Courtesy/Gynecology	Obstetrics & Gynecology
<b>Joseph Edelson, MD</b>	Initial Appointment	Courtesy-Locum Tenens/Gastroenterology	Gastroenterology and Internal Medicine
<b>Jillian Nickelsen, MD</b>	Initial Appointment	Courtesy/Hospitalist	Internal Medicine
<b>Robert Brown, MD</b>	Reappointment	Courtesy/Family Medicine	Family Medicine
<b>Adam Graham, MD</b>	Reappointment	Telemedicine/Teleneurologist	Neurology
<b>Orlin Hopper, MD</b>	Reappointment	Telemedicine/Teleradiology	Diagnostic Radiology
<b>Todd Kooy, MD</b>	Reappointment	Telemedicine/Teleradiology	Interventional Radiology/Diagnostic Radiology
<b>Gregory Martin, MD</b>	Reappointment	Telemedicine/Teleradiology	Interventional Radiology/Diagnostic Radiology
<b>Marcia Newth, LCSW</b>	Reappointment	BHP/LCSW	Licensed Clinical Social Worker

**III. REPORT OF NUMBER OF PROVIDERS BY CATEGORY**

Active: 18  
 Courtesy: 23  
 Telemedicine: 133  
 Advanced Practice Providers & Behavioral Health Providers: 21  
 Honorary: 1  
 Total: 196

**IV. MEDICAL STAFF BYLAWS (not a consent agenda item)**

Proposed edits to the Medical Staff Bylaws were sent to the MEC on Jan 26<sup>th</sup> and approved. Bylaws revision notification emails were sent out to Active Medical Staff and the Board of Directors on February 2<sup>nd</sup> for their comment period. Ballots were sent to the Active Medical Staff on February 17<sup>th</sup> and they have 15 days to vote. This item is still expected to be on the agenda for the March Board of Directors meeting.

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

**Formal Written Resolution 2022-03  
February 22, 2022**

WHEREAS, the Board of Directors of Upper San Juan Health Service District ("USJHSD") has reviewed, in executive session, the annual report of PSMC's 2021 peer review activities and whereas such report is to be used and remain confidential in accordance with the Quality Management Act, C.R.S. Section 25-3-109, et seq. and the Professional Review Act, C.R.S. Section 12-36.5-101 et seq.

**NOW, THEREFORE, THE BOARD OF DIRECTORS OF THE UPPER SAN JUAN HEALTH SERVICE DISTRICT HEREBY RESOLVES THAT** it accepts the Annual Report of PSMC's 2021 Peer Review Activities and that such report shall be used and remain confidential in accordance with the Quality Management Act, C.R.S. Section 25-3-109, et seq. and the Professional Review Act, C.R.S. Section 12-36.5-101 et seq.

---

Gregory J. Schulte, Chairman of the USJHSD Board  
and President of the District

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

**Formal Written Resolution 2022-04**

**February 22, 2022**

WHEREAS, the CEO's contract contains provisions requiring forfeiture of her paid time off at separation from employment and at the end of each year;

WHEREAS, the Colorado Supreme Court concluded in the 2021 case *Nieto v. Clark's Market, Inc.* that employers do not have to offer vacation pay and employers offering vacation pay can cap the amount of vacation pay; however, employers cannot require an employee to forfeit such vacation pay even at termination of employment. Further, any contractual agreement that purports to forfeit earned vacation pay is void.

WHEREAS, the Board of Directors and the CEO desire to modify her contract regarding the forfeiture provisions to be consistent with Colorado law.

**NOW, THEREFORE, THE BOARD OF DIRECTORS OF THE UPPER SAN JUAN HEALTH SERVICE DISTRICT HEREBY RESOLVES** to authorize the Board Chair to work with the CEO to revise portions of the CEO contract, regarding forfeiture of PTO so the contract is consistent with Colorado law, and execute said revised contract.

---

Greg J. Schulte, as Chairman of the Board of Directors of USJHSD  
and President of the District

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

**Formal Written Resolution 2022-05**

**February 22, 2022**

WHEREAS On November 17, 2020, the Board of Directors approved Resolution 2020-22 approving a fundraising campaign to bring 3D Mammography to PSMC;

WHEREAS the Pagosa Springs Medical Center Foundation received generous donations from its donors and has sufficient cash on-hand to pay for the 3D mammo equipment;

WHEREAS PSMC issued an RFP for 3D Mammography equipment, ancillary equipment, biopsy equipment and specimen imaging and received three responses;

WHEREAS PSMC staff (including the contracted radiologist) all advise to pursue the Hologic 3D mammo equipment because of its rating and the Hologic response was the lowest cost of all responses at \$429,412.00;

WHEREAS the facility renovations are estimated at a maximum of \$30,000 to include the cost of moving the radiologist office, moving the dexa-scanner, a physicist and the changes to the mammography space; and

WHEREAS the estimated costs for facility renovations are less than the \$100,000 mammography renovation itemized in PSMC's capital budget approved by the Board November 16, 2021.

**NOW, THEREFORE, THE BOARD OF DIRECTORS OF THE UPPER SAN JUAN HEALTH SERVICE DISTRICT HEREBY RESOLVES** to approve PSMC to proceed with contracting for the 3D mammography equipment with Hologic with such estimated costs of \$429,412 funded by transfer from the PSMC Foundation.

---

Gregory J. Schulte, as Chairman of the Board of Directors of USJHSD  
And President of the District



**MINUTES OF REGULAR BOARD MEETING**  
**Tuesday, January 25, 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 January 25, 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, Treasurer/Secretary Mark Zeigler, and Director Kate Alfred.

Present via Zoom: Director Jason Cox Director Dr. Jim Pruitt and Director Karen Daniels.

Present via Phone: Vice-Chair Matt Mees

Director(s) Absent: None

**1) CALL TO ORDER**

- a) Call for quorum: Chair Schulte called the meeting to order at 5:30 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: There were none.
- c) Approval of the Agenda: The Board then noted approval of the agenda as presented.

**2) PUBLIC COMMENT**

There was none.

**3) REPORTS**

- a) Oral Reports
  - i) Chair Report

Chair Schulte reminded the Board the CEO annual evaluation will be discussed at an executive session at the February regular meeting. Clerk to the Board, Heather Thomas will send out the forms to be completed and a due date will be disclosed in the email to Board Members.

Chair Schulte noted he will be out of town for the month of March, but will endeavor to call in and run the meeting remotely. If that doesn’t work, Vice-Chair Mees, who will still be out of the country, would chair the meeting. If Vice-Chair Mees is unable to attend the meeting, Treasurer-Secretary Zeigler would then chair the meeting.

ii) CEO Report

Chair Schulte noted that CEO Dr. Rhonda Webb is out of town and has provided the included written report for review of the Board.

COO-CNO Kathee Douglas noted in the written report it states that the MRI will be fully vetted and ready for patients the week of February 7<sup>th</sup> to the 14<sup>th</sup>. COO-CNO Douglas stated it is possible that the timeline will move up by one week as installation is ahead of schedule and expected to be running the first week of February.

Questions were asked and answered.

iii) Executive Committee

There was no report.

iv) Foundation Committee

There was no report.

v) Facilities Committee

There was no report

vi) Strategic Planning Committee

There was no report.

Finance Committee & Report

CFO, Chelle Keplinger, presented and discussed the PowerPoint presentations regarding financials for December 2021.

Questions were asked and answered.

b) Written Reports

i) Operations Report

There were no questions.

ii) Medical Staff Report

Treasurer-Secretary asked a question regarding the reported initial appointment of two new licensed counselors. COS Dr. Wisneski and COO-CNO Douglas answered.

CAO Ann Bruzzese noted the advisement at the bottom of the Medical Staff Report that states that in February, the Board will receive a proposed revision to the bylaws indicating a minor change in the definition of behavioral health providers.

**4) DECISION AGENDA**

a) Consideration of Resolutions regarding approval of matters related to May 3, 2022 Election of Board Members. Chair Schulte gave a brief overview of the proposed resolutions.

i) Resolution 2022-01

Treasurer-Secretary Zeigler motioned to accept Resolution 2022-01 to appoint Clerk to the Board (Heather Thomas) as the Designated Election Official and authorizing the DEO to cancel election as necessary. Upon motion seconded by Director Kate Alfred, the Board unanimously adopted said resolution.

ii) Resolution 2022-02

Director Kate Alfred motioned to accept Resolution 2022-02 to establish USJHSD terms for its regular May 3, 2022 election. Upon motion seconded by Director Daniels, the Board unanimously adopted said resolution.

**5) CONSENT AGENDA**

Director Alfred motioned to approve the Board Member absences (there was none), regular meeting minutes of 12/28/2021, the Medical Staff report recommendations for new or renewal of provider privileges, as well as establishing the Board's regular meeting schedule and notice-posting locations for 2022.

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

**6) OTHER BUSINESS**

Chair Schulte noted that the attached Transparency Notice was filed with DOLA.

The Board then completed and submitted to Clerk Thomas annual disclosures for conflicts of interest and gifts.

**7) EXECUTIVE SESSION**

The Board did not meet in executive session.

**8) ADJOURN**

There being no further business, Chair Schulte adjourned the regular meeting at 6:10 p.m. MST.

Respectfully submitted by:

Heather Thomas, serving as Clerk to the Board