

BOARD OF DIRECTORS MEETING MINUTES Tuesday, April 27, 2021 6:00 p.m.

MEMBERS PRESENT:

Mike Lewis
Christina Epperson
Paula Hatfield- via Teams
Kelly Karcher-via Teams
Wayne Morris
Greg Muehlenbein
Larry Rowland
John Warner

MEMBERS ABSENT:

Kenny Aydt

OTHERS PRESENT:

Victoria Woodrow, CEO
Justin Epperson, CFO
Patty Blazier, CNO
Glenna Sutton, Compliance Officer
Bryan Russell, Quality Director
Michell Schoenheit, Support Services
Holly Hubele, ASC

Mike Lewis, Board President, called the meeting to order at 6:00 p.m. This meeting was held at the Hamilton County Schools Administrative Center located at 804 Golf Course Road, McLeansboro, Illinois and will be the site of all future meetings unless communicated otherwise.

Roll call was taken and with a quorum present, the meeting proceeded.

Topic of Discussion	Description	Action Taken
<u>Public Comment</u>	No comments were made.	
Review of Minutes from the March 23, 2021	Regular session and Executive session minutes were reviewed.	Larry Rowland made a motion to approve the March 23, 2021 Board of Directors Regular Session minutes. Christina Epperson seconded the motion. Motion carried. Larry Rowland made a motion to approve the March 23, 2021 Board of Directors Executive Session minutes. Christina Epperson seconded the motion. Motion carried.
March 31, 2021 Financial Statement Narrative Balance Sheet	Justin Epperson, CFO, reviewed the March, 2021 finances and statistics. Current Assets Cash – HMHD has an operating cash balance of \$13,039,981 which is an increase of \$580K from the previous month. Accounts Receivables- The net patient receivable balance decreased by \$333K over the prior month to \$1,668,692. Other Receivables- Increased by \$4K over the prior month to \$148K. Inventories and Other Assets- Increased by \$17K leaving a balance of \$638K.	John Warner made a motion to approve the March 31, 2021 Financial Statement. Paula Hatfield seconded the motion. Roll Call Vote: John Warner-Yes; Paula Hatfield-Yes; Christina Epperson-Yes; Kelly Karcher-Yes; Wayne Morris-Yes; Greg Muehlenbein-Yes; Larry Rowland- Yes. Motion carried.

Balance Sheet (continued)	Current Liabilities
	Accounts Payable-
	\$6.8M is the total in Payables
	for March which includes
	\$899K for regular business
	payables. This amount
	includes PRF funds (\$3.7M)
	that await loan forgiveness.
	Long Term Liabilities-
	Long-term liabilities are at
	\$18,375,393, the outstanding
	amount of bonds payable by
	HMHD, the Payroll Protection
	Program (PPP) and the
	REDLG loan for the roof.
Income Statement	Gross Patient Revenue-
	Total revenue was \$3M,
	which was \$105K above
	budget.
	Gross Patient Revenue is
	broken down into two areas:
	-\$2.8M Hospital Revenue
	(\$91K above budget)
	-\$182K Clinic Revenue
	(\$14K above budget)
	<u>Deductions</u>
	Contractual adjustments and
	bad debt allowances are

Contractual adjustments and bad debt allowances are recorded at 48% of gross revenue, which is above the previous month of 61%.

Operating Expenses

Total operating expenses of \$1,485,532represents an increase of \$136K from the prior month. Employee Benefits (health costs) were above budget, as well as Operating Supplies (COVID).

Income Statement (continued)	Net Income The net income of \$196K represents an increase of \$452K from the prior month.	
	Higher revenue in March, driven by outpatient services (Lab, PT, Radiology, Clinic), as well as a very good month in Surgery, managed to offset a quiet month in Med/Surg, which saw activity very much like the previous month.	
	Cash Collections Cash collections were \$2M in March, down \$200K from last month.	
Final Adjustments to the Bottom Line	Reduction of Due to Medicare in the amount of \$125K, which increased our net income. As HMHD approaches year end, the Cost Report is overly reserved and will help keep the debt service ratio flat.	
Capital/Building/Grounds	One Stop Flooring Quote Removal of 16,000 square feet of carpet throughout the hospital and installation of new vinyl floors, as well as several out-dated and damaged heat welded floors in the ED and patient rooms, has been quoted at \$157,861.40 by One Stop Flooring. The second quote that will include additional heat welded floor replacement will go to the Board in May.	Paula Hatfield made a motion to approve the One Stop Flooring quote for \$157, 861.40. Larry Rowland seconded the motion. Roll Call Vote: Paula Hatfield- Yes; Larry Rowland-Yes; Christina Epperson-Yes; Kelly Karcher-Yes; Wayne Morris- Yes; Greg Muehlenbein-Yes; John Warner-Yes.

<u>Capital/Building/Grounds</u> (<u>continued</u>)

Floor replacement is deemed necessary in light of the ongoing COVID-19 pandemic and will help eliminate infection hazards. It was difficult to find flooring companies that were prepared to take on such a large job.

Accruent Maintenance Ticketing System Quote

The purchase and implementation of a Ticket Maintenance System (TMS) from Accruent will allow for front end users to easily open maintenance work orders. The system will provide a much-needed preventative maintenance platform as well as assets/vendor tracking. Maintenance platforms, such as TMS, are increasingly important especially during the on-going COVID-19 pandemic in the healthcare setting to aid in ensuring a safe environment of care. The implementation of cost is \$10,575.

Year One Cost: \$4,500 Year Two Cost: \$4,635 Year Three Cost: \$4,774

Both the One Stop replacement flooring with installation and the Accruent Maintenance Ticketing System will be funded by the Provider Relief Fund (PRF). Funds must be used by June 30, 2021. HMHD is being

Wayne Morris made a motion to approve the Accruent Maintenance Ticketing System implementation quote for \$10,575.00 and the 3-year costs. Christina Epperson seconded the motion. Roll Call Vote: Wayne Morris-Yes; Christina Epperson-Yes; Paula Hatfield-Yes; Kelly Karcher-Yes; Greg Muehlenbein-Yes; Larry Rowland-Yes; John Warner-Yes.

Capital/Building/Grounds	cautious and is obtaining	
(continued)	Board approval in the event	
	that the projects must be	
	moved to Capital.	
Fiscal Year '21-'22 Capital Budget	Justin Epperson, CFO	
<u>Presentation</u>	reviewed the Capital	
	Schedules for both Fiscal	
	Years 2022 and 2023.	
	Total for Fiscal Year 2022 is	
	\$639,045.40 Total for Fiscal Year 2023 is	
	\$507,200.	
	The Epic Implementation	
	Costs make up a total of	
	\$411,600 for the two-fiscal	
	years and \$200,000 will be	
	for data conversion.	
	Going forward, the Capital	
	Budget will be put in the	
	Board packets monthly.	
COVID-19 Response	Victoria Woodrow, CEO	
	discussed the current COVID-	
	19 Response and Provider	
	Relief Fund (PRF) Planning.	
	-Vaccinations –HMHD is now	
	offering both Moderna and	
	Johnson & Johnson.	
	Vaccinations for	
	the public will be scheduled	
	weekly at both HMHD	
	clinics. To schedule a COVID	
	vaccine, call 618.643.5859.	
	-Permanent negative-air	
	rooms for Med/Surge are in	
	the initial stages with an	
	architect due onsite April 28,	
	2021. Preliminary costs for	
	the project are \$250,000 and the Provider Relief Fund	
	(PRF) will cover part of the	
	(1 M) will cover part of the	

COVID-19	Response	(continued)
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costs prior to the June 30, 2021 cutoff.

The Board will receive firm details regarding costs at the May meeting.

Reports

Quality & Performance Improvement Report

Bryan Russell, Quality Director stated that the Joint Commission was here in April for a re-accreditation survey in the Lab.

Review the Quality and Performance Improvement Report took place:

Fiscal Year '20 - '21 Surgery

Goals:

Patient Experience

All surgery staff members will be courteous and respectful to patient and family.

Goal: 100% **Results**: 100%

Population Health

Surgery staff members will provide general surgery specific discharge instructions to patients with incision.

Goal: 100% **Results**: 100%

Reducing Cost

Surgery will reduce waste of disposable surgical items opened and not used during surgical cases.

Goal: 90% **Results:** 100%

Larry Rowland made a motion to approve the Quality and Performance Improvement Report. Kelly Karcher seconded the motion. Motion carried.

Reports (continued)

Care Team Well-being

A departmental Needs
Assessment will be
completed one time per year.
Feedback from this
assessment is a valuable tool
in understanding needed
equipment and opportunities
for process improvements.

Goal: One Needs Assessment will be completed for each department. Feedback will be evaluated during Quality Committee.

Result: 100%

Performance Improvement Committee Teams (PIC) continue to meet:

EPIC Steering Team:

Meeting weekly for Epic migration planning. SSM discovery template by HMH Epic Steering team including vital information about current state hardware, software, and interfaces has been completed. Capital budget including Epic migration costs in coming and following fiscal year are progressing. Vendor identification for data conversion of CPSI and NexGen patient information. Imaging PACs migration to Sectra in advance of Epic was approved for placement on FY '22 capital budget. Confirmation from SSM Epic Team of HMHD Epic go-live schedule for July 2022 has been received.

Reports (continued)

Inpatient & Swingbed Pre-Certification Team:

Opportunity for improvement was identified due to the need to reduce/eliminate precertification denials of inpatient and swingbed stays. This multi-disciplinary team includes business office, revenue cycle, and clinical staff with the goal of modifying the pre-cert process to begin with business office initiating the pre-cert with the payor, then case management completing the pre-cert process by providing the payor with the required clinical information. New process has been established and is currently being continually reviewed for additional improvements required.

Compliance Report

Glenna Sutton, Compliance Director, stated that she completed an audit of the HIPAA breaches listed on the Compliance Dashboard and several adjustments were made in HMHD's favor. The updated report was reviewed from July 2020 through March 2021.

March had zero compliance issues and no calls were received to the compliance hotline in March.

John Warner made a motion to approve the March Compliance report. Christina Epperson seconded the motion. Motion carried.

Reports (continued)

Q3 Safety Summary

Victoria Woodrow, CEO reviewed the Q3 Safety Summary stating that no issues were noted for the following:

Utilities Management, Risk Management, or Hazardous Waste.

Supplemental documents were added and reviewed that included security incidents and equipment failures.

Quarterly walk- throughs for Safety/Infection Control and HIPAA Inspections took place on February 9, 2021 for the Hospital, McLeansboro Family Clinic, Senior Enrichment and Carmi Family Clinic. Noted issues have been resolved.

Emergency Preparedness: Initiated Code Disaster on March 9, 2020 due to COVID-19 with daily briefings with Administration members, IC Nurse, Safety Officer, Local EMA, Local EMS and Hamilton County IDPH. Meetings moved to twice weekly in May of 2020 and they continue.

Policies

IV Pump Drug Library Maintenance

Purpose: To maintain the drug library for the IV pumps.

Greg Muehlenbein made a motion to approve the Q3 Safety Summary. Kelly Karcher seconded the motion. Motion carried.

Christina Epperson made a motion to approve the IV Pump Drug Library Maintenance policy. Greg Muehlenbein seconded the motion.

Policies (continued)

	Purpose: To calculate cost and set up payment arrangements for patients who are approved for private pay Swing Bed stay by administration when no other options are available and patient has no available Medicare days.	motion to approve the Swing Bed Private Pay policy. John Warner seconded the motion. Motion carried.
	Revision of the Swing Bed Private Pay policy is required with an Initial Date moved to the correct field and the Department Director/Manager changed from Justin Epperson to CFO.	
Executive Session Recordings	Discussion and/or Action to destroy Executive Session recordings for months prior to <i>October 2019</i> under 2.06 Section C of the Open Meetings Act.	Wayne Morris made a motion to destroy Executive Session recordings prior to October 2019. Christina Epperson seconded the motion. Motion carried.
CEO Report	Victoria Woodrow reviewed the statistics for March 2021: Key Statistics for March 2021 Net Days in A/R – 40 Days Cash on Hand-301 Due to the COVID-19 CARES Act funds in May	
	Statistics for the month of March 2021 General Surgery/Scopes:31 Eyes: 20Revenue driver/ER visits: 321CT scans: 170Lab: 6366Clinics combined had	

Swing Bed Private Pay

Greg Muehlenbein made a

	1147 patient visits Carmi: 362 McLeansboro: 785Acute Admissions: 21Transitional Care: 14	
Executive Session		Paula Hatfield made a motion to enter into Executive Session at 7:14 pm. Kelly Karcher seconded the motion. Motion carried.
		Larry Rowland made a motion to exit Executive Session at 7:53 pm. Christina Epperson seconded the motion. Motion carried.
Meeting Adjournment		Paula Hatfield made a motion to adjourn the meeting at 7:56 pm. John Warner seconded the motion. Motion carried.

HAMILTON MEMORIAL HOSPITAL DISTRICT

John Warner, Secretary Board of Director