



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

MEMBERS PRESENT:

Wayne Morris
Kenny Aydt
Paula Hatfield
Jimmy Johnson
Kelly Karcher
Greg Muehlenbein (via phone)
Larry Rowland
John Warner

MEMBERS ABSENT:

Christina Epperson
Jason Waier

OTHERS PRESENT:

Victoria Woodrow, CEO
Justin Epperson, CFO
Patty Blazier, CNO
Glenna Sutton, Compliance Officer
Jenee Burchell, Quality Director
Holly Hubele, ASC

Paula Hatfield, Board Vice 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.

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Topic of Discussion	Description	Action Taken
<u>Public Comment</u>	No comments were made.	
<u>Review of Minutes from the June 22, 2021</u>	Regular session and Executive session minutes were reviewed.	<p>Wayne Morris made a motion to approve the June 22, 2021 Board of Directors Regular Session minutes. John Warner seconded the motion. Motion carried.</p> <p>Kenny Aydt made a motion to approve the June 22, 2021 Board of Directors Executive Session minutes. Kelly Karcher seconded the motion. Motion carried.</p>
<u>June 30, 2021 Financial Statement Narrative</u>	Justin Epperson, CFO, reviewed the June 2021 finances and statistics.	Kelly Karcher made a motion to approve the June 30, 2021 Financial Statement. Kenny Aydt seconded the motion.
<u>Balance Sheet</u>	<p><u>Current Assets</u> Cash – HMHD has an operating cash balance of \$13,028,880 which is a decrease of \$432K from the previous month. The decrease is due to bond payment, and the amount spent on COVID related capital projects. Accounts Receivables- The net patient receivable balance decreased by \$160K over the prior month to \$1,474,457. Other Receivables- Increased by \$51K over the prior month to \$13K. Inventories and Other Assets- Increased by \$27K leaving a balance of \$604K.</p>	Roll Call Vote: Kelly Karcher-Yes; Kenny Aydt-Yes; Wayne Morris-Yes; Jimmy Johnson-Yes; John Warner-Yes; Greg Muehlenbein-Yes; Motion carried.

<p><u>Balance Sheet (continued)</u></p>	<p>Accounts Payable- \$7.1M is the total in Payables for May which includes \$1M for regular business payables. This amount includes PRF funds (\$3.7M) that await loan forgiveness.</p> <p>Long Term Liabilities- Long-term liabilities are at \$18,126,060, the outstanding amount of bonds payable by HMHD, the Payroll Protection Program (PPP) and the REDLG loan for the roof.</p>	
<p><u>Income Statement</u></p>	<p><u>Gross Patient Revenue-</u> Total revenue was \$2.8M, which was \$30K above budget. Gross Patient Revenue is broken down into two areas: -\$2.6M Hospital Revenue (\$31K above budget) -\$166K Clinic Revenue (\$1K below budget)</p> <p><u>Deductions</u> Contractual adjustments and bad debt allowances are recorded at 56% of gross revenue, which is above the previous month of 52%.</p> <p><u>Operating Expenses</u> Total operating expenses of \$1,725,013 represents an increase of \$135K from the prior month.</p>	

<p><u>Income Statement (continued)</u></p>	<p><u>Net Income</u> The net loss of \$376K represents a decrease of \$357K from the prior month.</p> <p>June was a decent month financially, with HMHD coming in near budget in both the hospital and clinic. The reason for the loss in July was expenses related to COVID projects that had to be completed by June 30th. Operating Expenses, budgeted at \$82K, were \$374K. The COVID department had \$253K of expense in July, with One Stop Flooring accounting for over \$200K of that.</p> <p>With FY21 coming to a close, HMHD will now begin audit season. HMHD has learned that the PPP loan has been forgiven, so that \$1.25M will now be moved from debt to revenue. The prediction is that the revenue is applied to the months the loan was applied for, which is April of 2020 to October 2020. Also, the CARES Act money, \$3.8M, will be applied to the last six quarters of business. HMHD's Cost Report will be finalized, which currently appears to be a pickup in the area of \$150K. Once these three revenue pieces are finalized, together they will have a significant positive impact on revenue, and help determine how much of the</p>	
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<p><u>Income Statement (continued)</u></p>	<p>CARES Act cash HMHD will get to keep. Auditors will be on site the week of August 16th, and will expectantly provide answers on these topics by the September Board meeting.</p> <p><u>Cash Collections</u> Cash collections were \$1.9M in June, an increase of \$300K from last month. In July, HMHD did receive a \$300K stimulus payment for COVID testing from HRSA.</p> <p><u>Cost Report Settlement</u> The template currently shows a receivable of \$185K. The current reserve sits at \$1M.</p>	
<p><u>Final Adjustments to the Bottom Line</u></p>	<p>None</p> <p>Justin Epperson stated that salaries and wages were higher for the month due to Paid Time Off (PTO) buyback and shift bonuses. Building Repair and Maintenance was higher as well due to an air handler bill.</p>	
<p><u>Annual Appropriations Ordinance #200</u></p>	<p>Justin Epperson explained that this is the second step of a 3-step process that started with the Annual Prevailing Wage Ordinance. The levy will be made off of this appropriation.</p>	<p>Wayne Morris made a motion to approve the Annual Appropriations Ordinance #200. Kenny Aydt seconded the motion. Roll Call Vote: Wayne Morris- Yes; Kenny Aydt- Yes; Jimmy Johnson-Yes; Kelly Karcher-Yes; Greg Muehlenbein- Yes; John Warner-NO. Motion carried.</p>

<p><u>Reports</u></p>	<p><u>Quality & Performance Improvement Report</u> Jenee Burchell Wilson, Quality/Compliance/Risk Management Director discussed HMHD's recent Accreditation/Survey Activity:</p> <ul style="list-style-type: none">- IDPH Life Safety Recertification Survey was conducted. A Plan of Correction has been completed and submitted.- IDPH Rural Health Re-certification Survey was conducted with one deficiency for Emergency Preparedness identified. A Plan of Correction has been completed and submitted.-The Sexual Assault Recertification survey was conducted with zero deficiencies identified. <p>Review of the Quality and Performance Improvement Report took place: <u>Fiscal Year '20 - '21 Senior Enrichment:</u></p> <p>Patient Experience At least 90% score of "Good" or higher on the "Current Patient Survey" given to patients currently in the program quarterly. Goal: 90% Results: 100%</p> <p>Population Health Staff will provide community education quarterly to raise awareness about mental health issues in the geriatric</p>	<p>John Warner made a motion to approve the Quality and Performance Improvement Report. Kenny Ayt seconded the motion. Motion carried.</p>
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<p><u>Reports (continued)</u></p>	<p>population to local providers and community members. Goal: 75 units Results: 100% met</p> <p>Reducing Cost Temperature kiosks will be installed to reduce average wait time to 5 minutes. Goal: 5-minute average or less Results: 100% met</p> <p>Care Team Well-being Senior Enrichment will complete departmental staff needs assessment once yearly. Goal: 100% Result: 100% met</p> <p>Performance Improvement Committee Teams (PIC) continue to meet: <u>EPIC Steering Team:</u> Meeting weekly for Epic migration planning continues.</p> <p><u>Risk Exposure Adjustment Program (REAP) 2021:</u> REAP for clinic continues to meet weekly. Yearly goal setting for the clinic will reflect measures that will be included in the REAP for clinic. REAP for surgery has met once. ERAS principles will be established to enhance guidelines and interventions for recovery protocols and the preoperative, intraoperative and postoperative surgical phases.</p>	
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Reports (continued)

IV Blood Draw PIC Team:

Some blood drawn with the luer lock connector was hemolyzed. The lab has purchased a different brand of luer lock connectors for IV blood draws. ER staff has been provided with the new equipment. Testing with this new equipment is being evaluated.

EKG PIC Team:

EKG PIC team met to re-evaluate the processes related to symptoms included in protocols for EKGs. This will improve delays in EKG timing with patients diagnosed with chest pain, STEMI, NSTEMI. The goal for door to EKG time is 10 minutes or less. The process will include widening the range of chief complaints to include in protocols.

Stroke/TIA PIC Team:

Stroke PIC team met to improve process opportunities related to our stroke protocols. Preselects have been established and added into the order set in TSystem. Blood tubes and a reference poster will be added into patient rooms for easier access of laboratory supplies. The goal is to decrease PT/INR return times to within 60 minutes.

HUB/Web PIC Team:

Annual education to be deployed as soon as updates are established. A system patch with updates from

<p><u>Reports (continued)</u></p>	<p>HospitalPortal will be received in the next month. Meeting on 7/19/21 with system administrator for HospitalPortal discussion. Restructuring of members and responsibilities is ongoing.</p> <p><u>Compliance Report</u> Glenna Sutton, Compliance Officer, stated that one HIPAA breach with exceptions occurred in June. The situation has been corrected and education of existing and new employees will take place. There were zero calls received in June to the Compliance Hotline.</p>	
<p><u>FY '21-'22 Board of Directors Officer Election</u></p>	<p>Wayne Morris, John Warner and Christina Epperson, members of the Board of Directors Nominating Committee, made the nominations for the Board of Directors Executive Committee as follows:</p> <p>Wayne Morris – President Paula Hatfield – Vice President John Warner- Secretary Kenny Aydt – Treasurer</p> <p>The Board of Directors Committee assignments will be given at the August 24, 2021 Board meeting.</p>	<p>Kelly Karcher made a motion to approve the June 2021 Compliance report. John Warner seconded the motion. Motion carried.</p> <p>Jimmy Johnson made the motion to approve the Board of Directors Executive Committee as nominated. Kelly Karcher seconded the motion. Motion carried.</p>

<p><u>FY '21-'22 Board of Directors Meeting Dates</u></p>	<p>The Board of Directors of Hamilton Memorial Hospital meet on the 4th Tuesday of each month. The meeting schedule for FY '21-'22 was discussed and the December 28, 2021 date was changed to Tuesday, December 21, 2021 due to the proximity of the holidays. The schedule will be published via newspaper and added to the HMHD website.</p>	<p>Kenny Aydt made a motion to approve the FY '21-'22 Board of Directors meeting dates with the December date change. John Warner seconded the motion. Motion carried.</p>
<p><u>Executive Session Recordings</u></p>	<p>Discussion and/or Action to destroy Executive Session recordings for months prior to <i>December 2019</i> under 2.06 Section C of the Open Meetings Act.</p>	<p>Wayne Morris made a motion to destroy Executive Session recordings prior to December 2019. Kelly Karcher seconded the motion. Motion carried.</p>
<p><u>CEO Report</u></p>	<p><u>COVID-19 Planning and Response</u> Victoria Woodrow, CEO stated that the U.S. Health and Human Services (HHS) did not delay COVID-19 PRF true-up until 2022 per CliftonLarsonAllen (CLA) audit firm. The first COVID-19 funds must have been used by June 30, 2021 with invoices processed before the end of the fiscal year.</p> <p>COVID-19 positivity rate has increased to 8.1% with ICU availability at 16% in our area.</p> <p>Vaccines are in large supply and Monoclonal Antibody Treatment (MAT) is in stable supply with the demands increasing for both. COVID-</p>	

<p><u>CEO Report (continued)</u></p>	<p>19 Vaccines for Hamilton County are at 24.65% with 2,012 of the 8,163 population fully vaccinated Patient care staffing is difficult at HMHD with several nursing positions open.</p> <p>Victoria Woodrow reviewed the statistics for June 2021: <u>Key Statistics for June 2021</u> --Net Days in A/R – 33 --Days Cash on Hand-281 Due to the COVID-19 CARES Act funds.</p> <p><u>Statistics for the month of June 2021</u> -- General Surgery/Scopes: 20 -- Eyes: 0 --Revenue driver/ER visits: 371 --CT scans: 199 --Lab: 6424 --Clinics combined had 1341 patient visits Carmi: 376 McLeansboro: 965 --Acute Admissions: 32 --Transitional Care: 11</p>	
<p><u>Executive Session</u></p>		<p>Wayne Morris made a motion to enter into Executive Session at 6:54 pm. Jimmy Johnson seconded the motion. Motion carried.</p> <p>Wayne Morris made a motion to exit Executive Session at 7:39 pm. Kenny Aydt seconded the motion. Motion carried.</p>

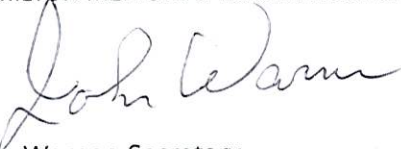
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<p><u>Proposed Physician Employment Agreement</u></p> <p><u>Meeting Adjournment</u></p>	<p>Discussion took place within the Executive Session regarding a Proposed Physician Employment Agreement and cost comparison.</p>	<p>Wayne Morris made a motion to approve the Proposed Physician Employment Agreement. Jimmy Johnson seconded the motion. Motion carried.</p> <p>Jimmy Johnson made a motion to adjourn the meeting at 7:45 pm. Kenny Aydt seconded the motion. Motion carried.</p>
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HAMILTON MEMORIAL HOSPITAL DISTRICT



John Warner, Secretary
Board of Director