



Memorial Hospital  
of Carbon County

**BOARD OF TRUSTEES**

**Regular Meeting**

July 25, 2019

Minutes

10:00 am

**Members Present:**

Rod Waeckerlin, President  
Jason Campbell, Vice President  
Garry Goergen, Treasurer  
Jerry Steele, Secretary  
Mark Kostovny, Member

**Administration:**

Bob Quist, Interim CEO  
Becky Forney, Interim CNO  
Jon Smith, CFO  
Collin McDonald, Quality, Compliance, Risk Director  
Lisa Woodcock, Human Resources Director  
Stephanie Hinkle, Executive Assistant, Marketing and Communications Director

**Guests:**

Ron Vigus, QHR  
Dr. Greg Johnson, Chief of Staff  
Jessica Seldomridge, OB Department Manager  
Abbi Forwood, Crank Legal Group (via phone)

Rod Waeckerlin, President, called the Memorial Hospital of Carbon County Board of Trustees meeting to order at 1002 hours.

**Approval of Agenda:**

Request was made to amend the agenda as follows:

1. Addition of Vince Hinshaw, MD, Employment Contract

Garry Goergen made a motion and Jerry Steele seconded the motion to accept the agenda as amended. Motion carried.

**Approval of Regular Board Minutes:** Board of Trustees 06/27/19.

Garry Goergen made a motion and Jerry Steele seconded the motion to accept the minutes as presented. Motion carried.

**Department Manager Report: Jessica Seldomridge, OB Department Manager:**

Jessica Seldomridge presented a summary of the growth and changes occurring within the OB Department. Highlights included 90 expected deliveries for 2019, 3 twin deliveries to date, a low primary

C-Section rate well below national average and an increase in V-BAC Deliveries. Post-partum dinners for parents and cards with recording of babies first cry are special items the department has recently added. An overview of the new CPN Web Module previously approved by the Board was given; this technology allows the doctor to see the monitoring strip from personal device and begin to evaluate patient before arriving on site.

**Memorial Hospital of Carbon County Foundation Report presented by Bob Quist, CEO:** A review of the July 2019 Foundation Meeting was provided. Mr. Quist recommended that the Foundation Report be moved to the Consent Agenda beginning August 2019. Mark Kostovny noted he did not support this and is concerned that too many items are being moved to Consent Agenda. Discussion ensued; majority of Board members were in support of adding this item to Consent Agenda.

**Medical Staff Report presented by Greg Johnson, MD:**

- Officer elections were completed.
- MEC is considering approval for additional breast surgeries to be performed by Dr. John Lumb.
- Recent problem with cardiac monitoring machine in ED due to a power surge. Unit is now working correctly. Two backup monitors have been purchased however for future use.
- Code Pink policy was approved and will be presented to the Board.

**Corporate Compliance Report presented by Mark Kostovny:**

- No calls had been received.

**Citizen Participation:**

- Dean Michelle, Rawlins Daily Times Reporter, stated that he is leaving the paper to continue his education and wanted to thank the Board and Bob Quist for their time and cooperation he experienced while reporting on hospital business.

**Administrative Report: Consent Agenda**

- Discussion: Regarding the Clinical Report by Becky Forney, Interim CNO, Rod Waeckerlin asked for more information about Code Pink and Code Blue. Jessica Seldomridge, OB Department Manager, explained that Code Pink addresses the abduction of infants and children. Code Blue is Cardiac and Respiratory Arrest. Jason Campbell asked if employees have specific areas of responsibility in a Code Pink situation. Seldomridge stated that mock codes are practiced for employees and that employees do have specific areas of responsibility but it is not formerly stated in the policy as such. She also noted that a new bracelet system for the OB Department is being researched. Implementing this system would provide significant increased security for newborns at MHCC. Garry Goergen asked if all staff are notified when any code is used. Jessica informed the Board that yes, all staff are notified through the overhead system. By dialing 888, staff are able to make an announcement heard hospital wide. Rod Waeckerlin asked who is responsible for initiating system when a Code Pink is identified to which Seldomridge replied the first person who notices the child is missing initiates process.
- Rod Waeckerlin commended Becky Forney, Interim CNO, for implementing Physical Therapy services at Wagon Circle.

Mark Kostovny made a motion and Garry Goergen seconded the motion to approve the Consent Agenda as presented. Motion carried.

**QHR Report, Ron Vigus, QHR Regional Vice President:**

- QHR Quarterly Report: Highlights from Benchmark Report were reviewed including Growth, Profitability, Cash and Liquidity.

- Financial Review: Completed April 2019; included Cost Report and Contractual Accounts and Bad Debt Review.

Discussion: Jon Smith, CFO, spoke about changes already being implemented to address bad debt and lowering accounts receivable. A Revenue Cycle Committee has been created to ensure continuation of improvements. Rod Waeckerlin asked how long bad debt is carried as well as what steps can be taken to prevent this from occurring. Smith responded that upfront cash collection is now being utilized which is a new process for MHCC. He also stated that we have a good process for moving bad debt to collections. Garry Goergen noted the decreased credit levels and what this was attributed to. Mr. Smith informed the Board that all billing is being moved to MedHost to simplify and improve the billing process. Continual improvements are being made in this area and the credit balance will be monitored. Dr. Greg Johnson asked about disclosure of costs. Mr. Smith stated this is currently on the MHCC website as a requirement for CAH facilities. He also stated that a full charge master review is currently in process. Patients will be able to get a quality estimate for procedures based on this information disclosure.

**Financial Report:  
Jon Smith, CFO:**

- DZA will be onsite the end of August 2019 for audit.

**YTD Highlights for June 2019 included:**

- Gross Revenue is 14.9% below budget.
- Net Revenue is 13.44% below budget.
- Deductions are 53% of revenue.
- Expenses are 2.7% below budget.
- Salaries are 0.4% below budget.
- Year to Date Net Income of \$495,352 with a budgeted income of \$744,205
- Current Days Cash on Hand is 140.1
- Current Net Days in Accounts Receivable is 71.5

Discussion: Garry Goergen inquired about cash being received from bonds and contribution to overall bottom line. Jon Smith clarified that bond funds were received Fiscal Year 2018. In the current year, we have a mill levy fund balance of \$277,000 with potential for an additional \$150,000.

**Approval of Financials for period ending 06/30/2019 was requested.**

Jason Campbell made a motion and Garry Goergen seconded the motion to approve the financials for the period ending 06/30/2019 as presented. Motion carried.

**Approval of Vouchers for period ending 06/30/2019 was requested.**

Mark Kostovny made a motion and Mark Garry Goergen seconded the motion to approve the vouchers for the period ending 06/30/2019 as presented. Motion carried.

**2019-2020 Capital Budget presented by Jon Smith, CFO:**

- Jon Smith presented the 2019-2020 Capital Budget of \$4,901,475.00. Of this, \$2,936,154 are Priority 1 Items as indicated on proposal. \$1,965,321 are Priority 2. \$881,757 has been restricted for Helmsley Grant Funds.

Discussion: Jason Campbell requested further clarification about the Priority 1 and Priority 2 classifications and if Priority 2 items required approval at this time. Jon Smith stated that Priority 2 items

will be looked at in 2021. The budget amount requested for approval at this time is the \$2,936,154. Mr. Campbell then asked if a new ambulance would be ordered despite receipt of grant. Mr. Smith informed the Board that the ambulance has been budgeted for and will be ordered even if grant is not received. Rod Waeckerlin inquired about an update to billing system and if this had been accounted for in Capital Budget. Mr. Smith stated that this is already being done within MedHost and does not need to be accounted for in the proposed Capital Budget.

### **2019-2020 Operating Budget presented by Jon Smith, CFO**

- Total Patient Revenue: \$59,610,387
- Net Patient Revenue: \$28,708,362
- Net Operating Revenue: \$30,079,962
- Total Operating Expenses: \$30,074,793
- Total Operating Income: \$5,169.00
- Total Non-Operating Income: \$533,000
- Projected Net Income: \$538,169

Discussion: Jason Campbell asked if numbers from Hospitalists have been quantified to see full impact to bottom line. Bob Quist stated that data is still being compiled; while the financial benefit is yet to be determined, quality of care has improved and we are receiving good feedback from patients and staff alike. Dr. Greg Johnson inquired where Patient Service Revenue was reflected in Operating Budget. Jon Smith replied that it is captured in Outpatient Revenue. President Rod Waeckerlin stated that he was very impressed with budget reports and their easy to follow formatting. Jason Campbell noted that QHR is projecting a flat growth rate in Carbon County; can it be predicted that this will impact future revenue for MHCC? CEO Bob Quist said that despite predictions for flat growth rates, Medicare will continue to grow at a 3% rate. In addition, continued improvements will be made to retain more Carbon County patients through marketing and increased service lines.

Garry Goergen made a motion and Mark Kostovny seconded the motion to approve the 2019-2020 Capital and Operating Budgets as presented. Motion carried.

### **Quality Report:**

#### **Collin McDonald, Director Quality/Compliance/Risk:**

- Dashboard: Statistics for OB, Safety, Financial and Quality were presented.
- HCAHPS Vendor: A new vendor is being considered for quality reporting.

### **Old Business:**

- MHCC Family Practice Clinic Update presented by Bob Quist, CEO and Garry Goergen, Treasurer: Mr. Quist stated that he met with the State of Wyoming and MOA on Tuesday, July 23, 2019 for a final walk through of facility. A few minor items were noted by the State however a simple letter of corrective action is all that is required for finalization. The City of Rawlins has approved final occupancy. Waiting room furniture has been delayed due to a backorder problem but is expected mid-August. A temporary solution is being worked on. VIP and Employee Tours are scheduled for July 30<sup>th</sup> and July 31<sup>st</sup> respectively. Garry Goergen reported that a tour had been provided to the Auxiliary and they were all very excited about the new facility.
- Wagon Circle Clinic Licensure presented by Bob Quist, CEO: The facility has been evaluated by the State of Wyoming and upgrades are necessary to meet ADA and State of Wyoming requirements. As a hospital based clinic, this does affect the full licensure status for MHCC.

Energy Basin Clinic does meet ADA requirements but there were other findings including grab bars, access to water fountain in waiting area, roof of employee entrance, etc. Findings were fairly minor in nature and can be corrected for approximately \$20,000.

Discussion: Mark Kostovny asked how many days Wagon Circle is currently open. Bob Quist stated that facility is open 5 days a week. Mr. Kostovny then asked what will be done with Wagon Circle patients should a renovation takes place. Mr. Quist replied that those patients will be seen in the upstairs MHCC Outpatient Clinic or in the new MHCC Family Practice Clinic as a temporary solution.

- SLIB Ambulance Grant Presentation by Denise Clark, Operations Consultant: Denise Clark presented a PowerPoint summarizing information on existing ambulances and statistical data on ambulance use. Clark stated that grant submittal will occur Monday, July 29, 2019 but will require a resolution to proceed by the Board of Trustees.

Mark Kostovny made a motion and Garry Goergen seconded the motion to apply for the SLIB Grant as presented. Motion carried.

#### **New Business:**

- Policy and Procedure: Code Pink (Child-Infant Abduction), Jessica Seldomridge, OB Manager:

Jason Campbell made a motion and Mark Kostovny seconded the motion to approve the policy as presented. Motion carried.

- Saratoga/Platte Valley Clinic Discussion:
  1. Bob Quist informed the Board that he formerly made a proposal to the Saratoga City Council, upon the Council's request, to provide health care services in the Platte Valley. Mr. Quist provided the Saratoga City Council with patient statistics for current services provided by MHCC to the Platte Valley including 2000 patients/year and to date 60 ambulance runs have been made. Revenue is \$4,000,000 million for Saratoga and \$1,325,000 for Encampment and Riverside.
  2. Rod Waeckerlin stated that MHCC can better serve Carbon County residents by extending hospital services to the Platte Valley. He noted that operating a clinic in Saratoga has been a goal of the MHCC Board for a significant amount of time.
  3. Jason Campbell agreed and noted that there is a need for medical services in the Platte Valley, and that the current clinic in Saratoga is not adequately addressing those needs.
  4. Mark Kostovny followed by stating that MHCC needs to seriously look at a plan to increase services in that area of the county.
- Saratoga/Platte Valley Clinic Public Discussion
  1. Dr. Greg Johnson noted he feels it is best for MHCC to not be in competition with the existing Saratoga Clinic. He also stated that he feels the nursing home needs to be included in the plans.
  2. Saratoga resident and former MHCC Board Member Henry Hewitt provided his insight and opinion, ultimately encouraging the Board to continue to evaluate patient numbers as there are many individuals not captured in statistics because they live out of state the majority of the year. In addition, Mr. Hewitt expressed that he believes the current Saratoga clinic operators make no referrals to MHCC and have offered no level of cooperation to date. He does not foresee future cooperation with MHCC in the future. He hopes there is potential for MHCC to partner with the Corbett Medical Foundation.

3. Jeb Stewart, former State Legislator and Encampment resident, provided a history of medical services in the Platte Valley including a struggle to maintain a physician since 2006-2007. Stewart also cited the Ruprey Study which identified a fragmented approach to healthcare in the Rocky Mountain Region and political fighting surrounding this topic. He noted that the study also recommends collaboration, cooperation, and coordinated efforts with existing hospitals. Further, the report predicts continued struggles which Stewart feels have come to fruition. In closing, Mr. Stewart stated that instead of competing with the existing Saratoga clinic, the goal should be to try to work together for the good of the region.
4. Rod Waeckerlin posed the question to Henry Hewitt if he felt a cooperative effort could be made. Hewitt responded that he believes it is possible, but not probable. He suggested approaching HMS to purchase the clinic. If HMS is unwilling to discuss that option, then it is up to MHCC to defend their market. Hewitt also noted that the existing building and equipment are owned by the City of Saratoga and that MHCC can use their CAH status to offer more effective billing and reimbursement rates. He doesn't believe it is reasonable to tie the nursing home to medical services in the valley.
5. Mark Kostovny stated it is the Board's fiduciary duty to service all of Carbon County, which includes the Platte Valley. He asked that administration prepare a budget and business plan to show exactly what MHCC can do. He also stated that, if possible, he would like to see MHCC and HMS work in cooperation.
6. Vice President Jason Campbell asked if it was conceivable to have some type of affiliation with HMS. CEO Bob Quist responded that he feels it will be very challenging. "We can provide a doctor in Saratoga within 30 days; we can very quickly fill a need. I support MHCC being present in Saratoga. We should approach the current provider and see if we can integrate. This is at least 10% of our revenue." Quist added that MHCC is willing to look at collaboration but this isn't consistent with what MHCC has done in the past.
7. Rod Waeckerlin noted that MHCC was never formally approached regarding a proposal to offer services in Saratoga; the opportunity was never provided. The Saratoga City Council ultimately made the decision to enter an agreement with HMS without consideration of a proposal by MHCC. Rod Waeckerlin concluded the discussion with a statement that the MHCC Board is committed to providing quality medical services to patients in the Platte Valley. Bob Quist agreed by stating that he feels very strongly this is what needs to be done. He requested that the Board authorize the release of a press release notifying Carbon County communities that MHCC is moving forward with plans to operate a clinic in the Platte Valley.

Jason Campbell made a motion and Mark Kostovny seconded the motion to authorize the CEO and Administration to move forward with a plan to build or purchase a building in Saratoga, to contact HMS, and to issue associated press releases. Motion carried.

Ten minute recess occurred at 1345 hours. Meeting called to order at 1355.

- 2020 Business Plan Initiatives: Bob Quist, CEO: Review of 2020 Business Plan Initiatives, Mission Statement and Core Values was provided.

**Open Discussion:**

No open discussion occurred.

**Recess Board of Trustees Public Meeting to Executive Session.**

Mark Kostovny made a motion and Garry Goergen seconded the motion to go into Executive Session at 1404 hours. Motion carried.

**Resume Board of Trustees Public Meeting.**

Mark Kostovny made a motion and Garry Goergen seconded the motion to resume the Board of Trustees public meeting at 1510 hours. Motion carried.

**New Business Continued:**

Mark Kostovny made a motion and Garry Goergen seconded the motion to approve members as recommended by Credentialing Committee.

A. Credentialing

1. Christian Van Kirk, MD – Radiology: Telemedicine Staff Reappointment
2. Richard Rossin, MD – Radiology: Telemedicine Staff Reappointment
3. Oleg Ivanov, MD – Cardiology: Courtesy Staff Reappointment

Motion carried.

Mark Kostovny made a motion and Jason Campbell seconded the motion to grant credentialing privileges to Direct Radiology.

4. Direct Radiology: Telemedicine Staff Appointment

Motion carried.

Mark Kostovny made a motion and Garry Goegen seconded the motion to accept provisional reviews as recommended.

B. Provisional Review

1. Weston Jones, DMD – Pediatric Dentistry: Courtesy Staff (recommend continued provisional)
2. Artur Narkiewicz-Jodko, MD – Radiology: Courtesy Staff (recommend full, unrestricted)
3. Jim Bradley, APRN – Certified Registered Nurse Anesthetist: Allied Health Staff (recommend full, unrestricted)
4. Justin Fenus, APRN – Certified Registered Nurse Anesthetist: Allied Health Staff (recommend continued, provisional)
5. Jerry Glattfelt, APRN – Certified Registered Nurse Anesthetist: Allied Health Staff (recommend continued, provisional)

Motion carried.

Mark Kostovny made a motion and Jason Campbell seconded the motion to accept the resignation of privileges as presented:

C. Resignation of Privileges

1. Karen Caldemeyer, MD – Radiology: Telemedicine Staff

Motion carried.

D. Joel M. Pull, MD – Employment Agreement

Mark Kostovny made a motion and Garry Goergen seconded the motion to approve the employment agreement for Joel M. Pull, MD as presented. Motion carried.

E. Vincent Hinshaw, MD – Employment Agreement

Jason Campbell made a motion and Garry Goergen seconded the motion to approve the employment agreement for Vincent Hinshaw, MD as presented. Motion carried.

**Adjournment:**

Jason Campbell made a motion and Mark Kostovny seconded the motion to adjourn the Board of Trustees public meeting at 1525 hours with no further business coming before the Board.

The next Board of Trustees meeting will be August 22, 2019.

Respectfully Submitted.

Stephanie Hinkle, Executive Assistant

Jerry Steele, Secretary, Board of Trustees

sh