



## **BOARD OF TRUSTEES**

### **Regular Meeting**

June 24, 2021

Minutes

10:00 am

#### **Members Present:**

Rod Waeckerlin, *President*  
Jason Campbell, *Vice President*  
Garry Goergen, *Treasurer*  
Mark Kostovny, *Member*

#### **Members Absent:**

Jerry Steele, *Secretary*

#### **Administration:**

Ken Harman, *Chief Executive Officer*  
Jon Smith, *Chief Financial Officer* (via phone)  
Dr. Johnson, *Chief of Staff*

#### **Guests:**

Abbi Forwood, *Legal Counsel* (via phone)  
Sue Dorsey, QHR, MyPlus Supply Chain, *Director* (via phone)  
Stasia Hermes, Cerner, *Senior Client Executive*

Rod Waeckerlin, President, called the Memorial Hospital of Carbon County Board of Trustees meeting to order at 10:01am. The Pledge of Allegiance and a moment of silence for those affected by COVID-19 followed.

#### **Approval/Amendment of Agenda:**

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

#### **Approval of Board of Trustees Open Session Minutes from 05.27.2021:**

Jason Campbell made a motion, and Mark Kostovny seconded the motion to accept the minutes as presented. Motion carried.

**New Provider Introduction:** Melissa Yowell, Director of Clinics, introduced Amanda Jones, the new Physician Assistant who has joined the Family Practice Clinic. She comes to us from Idaho State University and specializes in women's health and nutrition, and is a certified lactation consultant. CEO Harman added that Mrs. Jones is bilingual in Spanish, and we are excited about what she has to offer our community.

#### **MHCC Health Center – Platte Valley Final Report by Kaye Mullaney, Senior Project Manager, and Katie Vander Putten, Principal/Director of Healthcare, MOA Architecture:**

- Ms. Mullaney and Ms. Vander Putten presented a final project review for MHCC Health Center – Platte Valley, which recapped the design, schedule and budget. It was noted that the approved guaranteed maximum price was \$2,821,462, and a 10% retainage is being held until all the punch-list items are complete.

*Discussion:* Treasurer Goergen asked to have the contract checked to see if the retainage could be held in lieu of a bond. He also verified that the contingency amount was included in the GMP.

President Waeckerlin inquired about the sidewalks not being ADA compliant. Ms. Mullaney explained that because there is not a safe means or destination for them to go to from the street, it is actually not safe to make them ADA compliant, and, in addition to that, the Town does not require it. Mr. Waeckerlin asked MOA to provide a letter to MHCC stating those reasons. He also noted the 3-month overage on the construction timeline, to which Ms. Mullaney and Ms. Vander Putten explained that there were some longer lead times on some items and some delays due to weather, but that didn't account for 3 months' time. However, CEO Harman added that, unfortunately, there was not a penalty clause put in the contract.

Still, the Board expressed their satisfaction with the quality of the final product.

**2021 Health Fair Report by Stephanie Hinkle, *Health Fair Committee Chair*, and Abbie Madalinski, *Committee Co-Chair*:**

- Mrs. Hinkle and Ms. Madalinski presented a PowerPoint presentation outlining the final outcome from this year's Health Fair. In summary, total revenue was \$147,737.00 and total expenses were \$117,203.58, giving us a net income of \$30,533.42. A total of 1,352 blood draws were done and included our services being offered to the residents of the Platte Valley for the first time. Mrs. Hinkle also noted that the space at the Visiting Specialist Clinic worked really well this year, as well as having appointments and sending results out immediately. Ms. Madalinski also shared some of the feedback from the survey, which were, overall, very positive and reemphasized that things were done well. With all the changes that were made this year, the committee is very pleased with the results and may have stumbled upon a better way of conducting the Health Fair moving forward.

*Discussion:* There was some discussion regarding the idea of whether MHCC should still continue to offer the 1-day event or move away from that and try to get involved in a number of other community events. Board Member Kostovny expressed his concern of losing the interaction with people if we do not host the annual event. CEO Harman reiterated that we could still incorporate some of the aspects of the event, such as having vendors and providers on site to provide information, but do a number of other smaller events throughout the year, rather than one large event. Mrs. Hinkle assured everyone that this will continue to be evaluated. The Board and CEO Harman commended the committee for their efforts in making the Health Fair such a success.

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

- Dr. Johnson reported that the Surgical Care and Clinic Care Committees are setting up some parameters for pediatric surgeries, as there has been misinformation given, and we certainly don't want the community to think that we can't do them. He also added that the Medical Executive Committee continues to review numerous Lab policies that Dr. Long, the Lab Medical Director, has reviewed. They are all procedural with no issues.

The Medical Executive Committee recommended approval of credentialing for the following individuals:

- Joseph Skinner, Jr., APRN – Certified Registered Nurse Anesthetist: Allied Health Staff Reappointment
- Steven Larsen, MD (MIA) – Radiology: Courtesy Staff Reappointment
- Matthew Williamson, DO (MIA) – Radiology: Courtesy Staff Reappointment
- Jason Rytlewski, MD – Cardiology: Courtesy Staff Appointment
- Suzanne Aquino, MD (DR) – Radiology: Telemedicine Staff Appointment
- Direct Radiology: Telemedicine Staff Reappointments:
  - Shameem Azizad, MD
  - Troy Belle, MD
  - John Boardman, MD
  - James Brulle, DVM, DO
  - Courtney Carter, MD
  - Lillian Cavin, MD
  - Todd Greenberg, MD
  - Jeffrey Grossman, MD

- Perry Kaneriya, MD
- John Nwankwo, MD
- William Phillips, MD
- Teppe Popovich, MD
- Shree Shah, MD

Dr. Johnson also informed the Board that officer elections for MEC will take place in July, and Dr. Lumb will be ratified as the new Chief of Staff. Dr. Johnson will then be Vice Chief of Staff, Dr. Mikesell will be Secretary, and Dr. Abels will be Past Chief of Staff.

**Administrative Report - Consent Agenda:**

*Discussion:* Vice President Campbell noted the efforts in getting Ophthalmology in Saratoga. CEO Harman confirmed that he is in preliminary conversations with two ophthalmologists and would like to have simple procedures done at MHCC, or, perhaps, in the procedure room at the clinic. Dr. Pierce, urologist, is also interested in doing clinics in Saratoga.

The Board expressed their appreciation for everyone’s work on their reports.

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

**QHR Report presented by Sue Dorsey, QHR, MyPlus Supply Chain, Director:**

- Ms. Dorsey offered a \$1,000 contribution to the MHCC Foundation Golf Tournament, in addition to what Woody White is donating for QHR. She also reminded the board members about the three regional meetings that QHR will be hosting in July and August. Finally, Ms. Dorsey assured the Board that they are looking to do a separate contract with our purchasing group in an effort to reduce the fee in 2022.

**Corporate Compliance Report presented by Mark Kostovny, Board of Trustees, Member:**

- Mr. Kostovny informed the Board that there was no compliance meeting this month due to Mr. McDonald being called to a trial. He reported that there was one call on the Compliance Line this month, which was not really a compliance issue, but Mr. McDonald is working to resolve it.

Open Session dismissed for a 5-minute restroom break at 11:20am.

Open Session resumed at 11:25am.

**Quality Report presented by Christina Baugh, Director of Quality and Infection Prevention:**

- Mrs. Baugh shared a PowerPoint presentation outlining the progress that has been made on some of the departmental quality initiatives. She noted that the Emergency Room is now in the top 25% of hospitals for overall satisfaction related to HCAHPS due to their implementation of patient follow-up phone calls, and Acute Care has also improved from 42.7% to 98.3% in regards to medication explanation. Some challenges still to overcome include timeliness of IV lab draws for the Lab, as well as complete and accurate blood transfusion documentation. Mrs. Baugh also added that we continue to work on the surgical site infection processes and will wait for Dr. Jonassen to join us to complete the rest of the protocols and processes. However, we are happy to report that the SSI numbers have improved dramatically.

**Financial Report presented by Jon Smith, Chief Financial Officer:**

- CFO Smith reported that May 2021 showed a loss from operations of \$48,479 and a total net income of \$1,707,662 as compared to a budget of \$184,157. The positive net income comes from the forgiveness of the first PPP loan and receipt of the additional cost report money from the 2019 settlement. Revenues continued to be low during May across many service lines, including inpatient, surgery, clinics, and emergency services. Year-to-date revenues continue to be far below projected and are very much in line with last year’s, which was heavily impacted by the pandemic.

Gross patient revenues were 36% below budget and operating expenses were 6% above budget.

Mr. Smith also noted that the number of days' cash on hand were 139.8 on May 31<sup>st</sup> compared to 143.8 on April 30<sup>th</sup>. Cash collections are 94% compared to revenue, which is the first time in 6 months that we did not hit our goal of 100%. Low gross revenue is impacting our cash collections in the current months, which is a trend that may continue for the next several months. He also added that the government has started withholding 25% of our Medicare remittances for repayment of the \$3 Million Medicare Advance Payment Loan that we received last year.

Jason Campbell made a motion, and Mark Kostovny seconded the motion to approve the financials for period ending 05.31.2021 as presented. Motion carried.

Garry Goergen made a motion, and Mark Kostovny seconded the motion to approve the vouchers for period ending 05.31.2021 as presented. Motion carried.

- Mr. Smith also presented the final FY22 Capital and Operations Budget. He and Mr. Harman noted the changes that were made to the previous draft, in response to their requests at the retreat and work session that were held prior. The additions to the Capital Budget include \$100,000 for the development of the Master Facility Plan, \$50,000 for the IT hardware to implement the new EHR system, and \$100,000 for the Medical Day Spa Project. All of which are projections, as we don't know what they will actually cost. Also, the MRI project was moved to a future project.

In regards to operations, Mr. Smith and Mr. Harman noted the wage changes that reflect a \$12 minimum wage, other scale increases, and 3% management bonus, as well as the addition of travel costs for the implementation of the Cerner Electronic Health Record system and overlap with MedHost.

*Discussion:* Treasurer Goergen confirmed the annual cost savings of \$200,000 for the first year and \$350,000 after the start-up costs when switching EHR systems.

President Waeckerlin thanked the Administration Team for involving the Board in the budget process this year, and CEO Harman commended the department managers and Finance Manager Alyssa Hofmann on all of their work with this process behind the scenes.

Garry Goergen made a motion, and Jason Campbell seconded the motion to approve the FY22 Capital and Operations Budget as presented. Motion carried.

**Old Business:** There were no agenda items, but President Waeckerlin suggested having someone answer the phones at the Family Practice Clinic, rather than using the auto-attendant. CEO Harman assured him that most of the calls are being answered by a front desk representative, and only 8-10% of the calls are being rolled over to the auto-attendant.

Open Session dismissed for a 30-minute lunch break at 12:15pm.

Open Session resumed at 12:45pm.

**New Business:**

- **FY22 Annual Strategic Business Plan – Ken Harman, Chief Executive Officer:** Mr. Harman presented the strategic business plan for 2022. He explained that our initiatives are still divided into the same five buckets as last year, which include 1) Improve Care and Quality of Services 2) Become the Employer of Choice in Carbon County 3) Develop and Grow Services to Meet Community Needs 4) Improve Revenue Cycle and Create Financial Growth and Sustainability and 5) Assist in Growing Quality of Life in Carbon County (Community Stewardship). He discussed in further detail each initiative and how those goals will be accomplished over the next year. Mr. Harman added that, while last year consisted of implementing a lot of new services and programs, this year will be spent operationalizing a lot of things already in progress.

*Discussion:* President Waeckerlin inquired about the availability of space to be able to move all of our billing back in house, to which CEO Harman explained that an offer on the acquisition of some property has been made which will allow for more space. The location cannot be disclosed until the transaction is final.

Board Member Kostovny commented that the Board had not been involved in the Employee Engagement Survey although they are the ones that requested it to be done. Mr. Harman expressed that he was not aware of that and assured him that the results would be reported to them at the next board meeting.

Mark Kostovny made a motion, and Jason Campbell seconded the motion to approve the EY22 Annual Strategic Business Plan as presented. Motion carried.

- **Cerner Proposal and Business Agreement – Ken Harman, Chief Executive Officer:** Mr. Harman introduced Stasia Hermes, Senior Client Executive with Cerner. He continued that, after evaluating three Electronic Health Record systems, the overwhelming majority of our staff selected the Cerner Community Works program. They are able to meet all of our objectives at a significantly lower cost than what we are paying for the current programs that are being used. Mr. Harman outlined that the monthly cost will be \$83,000 per month, with \$146,000 cost up front, and will have all of our records for the hospital and clinics housed in one system. This still saves \$20,000 per month for the first year and \$30,000 per month starting the second year. He also noted that there will be a cost for storing the archived data from MedHost for a period of time after the switch is made, but it will only be for about three years. The proposal is a 10-year agreement with the option to get out at 7 years with no penalties.

*Discussion:* Vice President Campbell asked for clarification on whether there was scaling on the price, to which Ms. Hermes explained that Cerner can request a 3% CPI increase each year. Treasurer Goergen confirmed that there is a non-performance termination clause in the contract and clarified that, as a subscription, there are no additional IT upgrade costs. Ms. Hermes also explained that all of the data is stored on the Cerner servers in Kansas City, and Cerner is responsible for helping us meet all regulatory compliance.

Mr. Smith thanked the Board for their support in this endeavor and for all of the participation from the staff, as this is an exciting project with a lot of work ahead of us.

Jason Campbell made a motion, and Mark Kostovny seconded the motion to approve the Cerner Proposal and Business Agreement as presented. Motion carried.

- **DZA FY21 Cost Report and Audit Proposal – Jon Smith, Chief Financial Officer:** Mr. Smith presented the proposal for the FY21 Cost Report and Audit from DZA. The cost for the audit is \$27,000, the preparation for the Medicare Cost Report is \$10,750, and the single audit fees for the COVID funding that we received is \$7,500, coming to a total of \$45,000. He noted that there are also \$5,000-\$10,000 in travel costs.

*Discussion:* Treasurer Goergen commented that he wants the auditors to be required to come on site in person, rather than trying to do things electronically.

Garry Goergen made a motion, and Mark Kostovny seconded the motion to approve the DZA FY21 Cost Report and Audit Proposal as presented. Motion carried.

- **QHR Master Facility Plan Proposal – Ken Harman, Chief Executive Officer:** Mr. Harman informed the Board that he has been working with Woody White and David Anton with QHR on the Master Facility Plan for a new facility. He explained that Phase 1 includes planning and evaluation of the needs, Phase 2 is the design process, and Phase 3 is the building and occupancy process. Due to the size of this project, he expressed that it is imperative that we have QHRs help and will also need to have an Owner's Rep for Phases 2 and 3. The fee for QHR to assist us with Phase 1 is \$85,000, or the equivalent of 120 consulting hours.

*Discussion:* Treasurer Goergen verified that this commitment is just for Phase 1, as he does not want to get locked in and prevent MHCC from being able to look at other options along the way.

Mark Kostovny made a motion, and Jason Campbell seconded the motion to approve the QHR Master Facility Plan Proposal as presented. Motion carried.

- **Healogics Wound Care Program Services Agreement – Phil Reints, Chief Nursing Officer:** Mr. Reints shared a PowerPoint presentation outlining the need and ROI for the wound care program through Healogics. The need for chronic wound care was discovered through the partnership with Fremont Therapy Group, as there are 100-150 patients in Carbon County. With this agreement, Healogics will provide policies and procedures, forms, documentation software, educational materials and equipment to help MHCC develop the program. Mr. Reints noted that Carey Lake, FNP, has offered to be the medical provider for the program and would do it part-time out of the orthopedic clinic. He added that the ROI for the first year is estimated to be \$50,000-\$55,000 and \$80,000-\$100,000 the second year.

*Discussion:* Board Member Kostovny expressed his concern about spreading Carey Lake too thin and that pulling him from the Hanna clinic to do this would negatively impact that clinic. He is also hesitant to believe that there is as little overhead as reported. CEO Harman assured him that there is so capital outlet and Healogics only benefits if we benefit, but he agreed that some logistical planning should be complete for coverage of the clinic in Hanna before the execution of this program.

The approval of the Healogics Wound Care Program Services Agreement was tabled to next month, pending a strategic plan is put in place.

- **Center for Spine and Orthopedics Periodic Lease Agreement – Ken Harman, Chief Executive Officer:** Mr. Harman informed the Board that the Center for Spine and Orthopedics is Dr. Janssen's practice. He is currently seeing patients in Saratoga, but he and his Podiatrist Dr. Kuhlman are interested in doing clinics in Rawlins and possibly doing some procedures here. It is our standard lease agreement with all of our visiting specialists.

Mark Kostovny made a motion, and Jason Campbell seconded the motion to approve the Center for Spine and Orthopedics Periodic Lease Agreement as presented. Motion carried.

**Open Discussion/Citizen Participation:** No comments were made.

**Motion Recess Board of Trustees Public Meeting to go to Executive Session:**

Mark Kostovny made a motion, and Garry Goergen seconded the motion to move the Board of Trustees to Executive Session. Motion carried.

**Recess Board of Trustees Public Meeting for Executive Session:**

Mark Kostovny made a motion, and Garry Goergen seconded the motion to recess the Board of Trustees Public Meeting for Executive Session at 2:15pm. Motion carried.

The Board convened to Executive Session at 2:15pm to discuss personnel issues and to consider or receive any information classified as confidential by law.

**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 2:55pm. Motion carried.

**New Business Continued:**

- **Credentialing:**
  - Joseph Skinner, Jr., APRN – Certified Registered Nurse Anesthetist: Allied Health Staff Reappointment
  - Steven Larsen, MD (MIA) – Radiology: Courtesy Staff Reappointment
  - Matthew Williamson, DO (MIA) – Radiology: Courtesy Staff Reappointment

- Jason Rytlewski, MD – Cardiology: Courtesy Staff Appointment
- Suzanne Aquino, MD (DR) – Radiology: Telemedicine Staff Appointment
- Direct Radiology: Telemedicine Staff Reappointments:
  - Shameem Azizad, MD
  - Troy Belle, MD
  - John Boardman, MD
  - James Brulle, DVM, DO
  - Courtney Carter, MD
  - Lillian Cavin, MD
  - Todd Greenberg, MD
  - Jeffrey Grossman, MD
  - Perry Kaneriya, MD
  - John Nwankwo, MD
  - William Phillips, MD
  - Teppe Popovich, MD
  - Shree Shah, MD

Mark Kostovny made a motion, and Garry Goergen seconded the motion to approve credentialing privileges for the individuals listed above and as presented. Motion carried.

• **Employment Contracts:**

- Bob Keel, PA – Physician Assistant Employment Contract (Renewal)

Mark Kostovny made a motion, and Jason Campbell seconded the motion to approve the Physician Assistant Employment Contract for Bob Keel as presented. Motion carried.

- Tasha Worthington, RN – Professional Services Agreement for Activities Consultant (New)

Mark Kostovny made a motion, and Jason Campbell seconded the motion to approve the Professional Services Agreement for Tasha Worthington as presented. Motion carried.

- Ruth Pitts, MD – On Call PRN Physician Employment Contract (New)

Mark Kostovny made a motion, and Jason Campbell seconded the motion to approve the On Call PRN Physician Employment Contract for Dr. Pitts 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 2:56pm with no further business coming before the Board.

The next Board of Trustees meeting will be July 29, 2021.

Respectfully Submitted.

Chandra Buchholz, *Executive Assistant*  
 Jerry Steele, *Secretary, Board of Trustees*

crb