

BOARD OF TRUSTEES

Regular Meeting
July 29, 2021
Minutes
10:00 am

Members Present:

Rod Waeckerlin, *President*Jerry Steele, *Secretary*Garry Goergen, *Treasurer*Mark Kostovny, *Member*

Members Absent:

Jason Campbell, Vice President

Administration:

Ken Harman, Chief Executive Officer Jon Smith, Chief Financial Officer Dr. Johnson, Chief of Staff

Guests:

Abbi Forwood, *Legal Counsel* (via phone) Dr. Jonassen, *Orthopedic Surgeon*

Rod Waeckerlin, President, called the Memorial Hospital of Carbon County Board of Trustees meeting to order at 10:02am. The Pledge of Allegiance and a moment of silence for those affected by COVID-19 followed.

Approval/Amendment of Agenda:

President Waeckerlin requested to move the Election of Officers to item 2.a. on the agenda.

Dr. Johnson also noted that he is now the Vice Chief of Staff, rather than the Chief of Staff.

Mark Kostovny made a motion, and Garry Goergen seconded the motion to approve the agenda as amended. Motion carried.

Election of Officers:

Garry Goergen made a motion, and Mark Kostovny seconded the motion to approve the election of officers by a clear ballot and everyone continues to hold their current positions. Motion carried.

Approval of Board of Trustees Open Session Minutes from 06.24.2021:

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

New Provider Introduction: President Waeckerlin welcomed Dr. Andrew Jonassen, the new Orthopedic Surgeon, to the community and commented that adding him as a full-time orthodpedist is a step in the right direction for MHCC.

Employee Recognition presented by Rod Waeckerlin, Board President:

President Waeckerlin introduced the first Supervisor of the Quarter and Employee of the Month for going above
and beyond the call of duty in their respective positions. Caroline Ramirez, EVS Supervisor, was recognized as
Supervisor of the Quarter, and Alyssa Zamora, Medical Front Office Representative at MHCC Visiting Specialist
Clinic, was recognized as Employee of the Month.

CEO Harman added that the board will be recognizing an Employee of the Month every month and a Supervisor of the Quarter every quarter moving forward. All MHCC employees are welcome to send nominations to Administration.

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

• Dr. Johnson reported that the Medical Executive Committee had its election of officers, and Dr. Lumb is now the Chief of Staff, while Dr. Johnson is now the Vice Chief of Staff and Dr. Mikesell is the Secretary. He noted that Dr. Abels will still play an active role as Past Chief of Staff.

MEC continues to review and approve the Laboratory policies as Dr. Long reviews and revises them as part of a routine review.

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

- o Gabriel Habermehl, MD Pathology: Courtesy Staff Appointment
- o Amanda Jones, PA-C: Allied Health Staff Appointment
- o Michael Taylor, DO Internal Medicine: Locum Tenens Staff Appointment
- o Ruth Pitts, MD Family Medicine (RPG): Active Staff Appointment
- o Daeyoung Roh, MD Internal Medicine: Locum Tenens Staff Appointment
- o Direct Radiology: Telemedicine Staff Reappointments
 - Frederick Jones, MD
 - Charles Westin, MD
- O Justin Clark, MD Radiology (MIA): Courtesy Staff Appointment
- o Sharon Eskam, MD OB/GYN: Locum Tenens Staff Appointment
- o Andrew Jonassen, MD Orthopedic Surgery: Active Staff Appointment
- o Eric Kuhlman, DPM Podiatry: Courtesy Staff Appointment
- o Narina Grove, MD Pathology: Courtesy Staff Appointment

The Medical Executive Committee also recommended the following individuals to be moved from provisional status to full, unrestricted membership:

- o Jay Turner, AuD Audiology: Allied Health Staff
- o Jourdan Aromin, MD Psychiatry: Telemedicine Staff
- o Aaron Hawkins, MD Psychiatry: Telemedicine Staff
- o Joseph Hime, III, MD Psychiatry: Telemedicine Staff
- o Dwayne Narayan, MD Psychiatry: Telemedicine Staff
- o Gregory Renck, MD Psychiatry: Telemedicine Staff

Dr. Kafuuma and Dr. Jones with RPG both turned in their resignations to pursue other assignments.

Discussion: There was some discussion regarding the current status and resurgence of COVID. CEO Harman explained that MHCC is still in the green visitor status because Carbon County's positivity rate is still below 5%; although, he noted that that is mostly due to the prison testing all of their inmates weekly. A suggestion was made to offer vaccinations at the county fair next week so Mr. Harman assured them that he would work with Public Health to see if that would be possible to do. The possibility of mandating the vaccine for MHCC employees was also broached, as we start to see many other facilities and organizations require it. Everyone agreed that it is a sensitive subject that the Board will have to make a decision on at some point in the near future.

Administrative Report - Consent Agenda:

Discussion: President Waeckerlin noted Melissa Yowell's report regarding BioTE and thanked her for her efforts in holding them accountable.

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

QHR Report presented by Woody White, QHR, Senior Vice President:

• Mr. White was not able to give a report due to travel.

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

• Mr. Kostovny informed the Board that the Compliance Line has been busy within the last month. There were six complaints all directed at Human Resources, which will be further discussed in Executive Session.

Mr. Kostovny also reported that he received an anonymous letter. He expressed his frustration with the individual not identifying themselves, as well as his frustration with vague complaints being made on the Compliance Line. He explained that it is not helpful because he is not able to further investigate the complaint and asked that anyone who wants to remain anonymous to just state that, and he will honor that request. He just wants to be able to do his due diligence in addressing the issue.

Compliance Report presented by Collin McDonald, Director of Compliance and Risk Management:

• Mr. McDonald reported that there a total of 12 calls on the Compliance Line; some of which were asking for an update on previous complaints. More details of the complaints will be discussed in Executive Session.

Mr. McDonald also informed the Board that the judge found in favor of MHCC in the last court case, in that our employees are indeed our employees and that we are a government entity.

CEO Harman added that a HIPAA violation will also be discussed in Executive Session as well. He further explained that a new form and very aggressive process for tracking and handling HIPAA and compliance issues will be implemented for next month's report in an effort to address some concerns from the Employee Engagement Survey. He also noted that Human Resources job is not to discipline, but rather to be a resource to help follow policy.

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

Mrs. Baugh shared a PowerPoint presentation outlining the strategy for preparing for the State Survey and how to
remain prepared at all times. The steps include creating an arrival and exit plan, conducting mock surveys and
chart reviews, and for the Survey Readiness Committee to meet regularly to assess preparedness and areas that
need to be addressed. She added that the State will also be looking at the COVID processes this time, and the
survey is expected any time now.

Discussion: When asked how we are notified about the findings, CEO Harman said an email will be sent to him and a hard copy will be mailed to us as well. He assured the board that the results will be sent to the board members immediately upon receiving them, and the plan of correction for any findings will be started promptly.

Program Return on Investment Report presented by Jon Smith, Chief Financial Officer:

• Mr. Smith shared an overview of the QLER telehealth psychiatry services which is utilized in the Emergency Department. He noted that, although the county counselor does a great job, the QLER service allows our ER physicians to get an assessment on behavioral health patients right away, rather than having to, often times, wait until the next business day, which also provides better care to our patients. Since the implementation in July 2020, we have averaged nearly 10 consultations per month and costs about \$32,000 annually. However, this is a cost that we can claim on our cost report, and we receive roughly 61% or \$19,788 worth of credit due to being a Critical Access Hospital. Mr. Smith added that, although this service is not a revenue generating service, it is

much needed and has led to MHCC further developing outpatient therapy services at MHCC Family Practice Clinic

Open Session dismissed for a 10-minute restroom break at 11:10am.

Open Session resumed at 11:20am.

Financial Report presented by Jon Smith, Chief Financial Officer:

• CFO Smith shared a letter clarifying MHCC's billing practices which will be posted on our social media pages in response to some complaints that were made.

Mr. Smith reported that June 2021 showed a loss from operations of \$7,738 and a total net income of \$828 as compared to a budget of \$81,071. Revenues for June were the highest total of any month during FY2021 at nearly \$4.8 Million.

Gross patient revenues were 12% below budget for the month and 19% below budget for the year, while operating expenses were 10% below budget for the month and 1% below budget for the entire fiscal year.

Mr. Smith also noted that the number of days' cash on hand were 121.8 on June 30th compared to 139.8 on May 31st. The reason for cash reduction is due to the clinic in Saratoga and RF180 unit for Radiology, as well as that CMS began to take back funds for the Medicare Advanced Payment Loan that was taken at the start of the pandemic. He added that, as we are nearly complete with the clinic and radiology equipment, we will begin to see cash increase in the Fall 2021.

Mr. Smith further added that the first PPP loan has officially been forgiven and will show on the audit as such, and we are working on being able to show the \$4.2 Million of CARES Act funds as revenue in June for the audit.

Discussion: Treasurer Goergen recognized what a stressful year it has been and that a lot of work has had to be done double, and even triple times, to get loans approved, as well as forgiveness for those loans, and thanked CFO Smith and CEO Harman for their time and efforts.

Garry Goergen made a motion, and Jerry Steele seconded the motion to approve the financials for period ending 06.30.2021 as presented. Motion carried.

Garry Goergen made a motion, and Jerry Steele seconded the motion to approve the vouchers for period ending 06.30.2021 as presented. Motion carried.

Old Business:

• Healogics Wound Care Program Services Agreement – Ken Harman, Chief Executive Officer: Mr. Harman provided a schedule of clinic providers to the Board after concerns were expressed during the initial presentation of the Healogics Wound Care Program last month. He assured them that Carey Lake's schedule at the Hanna clinic would not be impacted. He added that, although we are expecting a small profit of about \$50,000, this program will provide better service to our patients and will be provided in the MHCC Orthopedic and Orthopedic Clinic.

Mark Kostovny made a motion, and Jerry Steele seconded the motion to approve the Healogics Wound Care Program Services Agreement as presented. Motion carried.

New Business:

• Human Resources Policies – Lisa Woodcock, *Director of Human Resources*: Ms. Woodcock presented six policies to the Board for approval. The Employee Recognition policy is new, while the other five policies were existing policies that have been revised, and Legal Counsel Abbi Forwood has reviewed all of them.

300.20 Employee Recognition – Ms. Woodcock explained that this is a new policy/program being
implemented in response to the Employee Engagement Survey, which will recognize an Employee of the
Month and Supervisor of the Quarter.

Discussion: Board Member Kostovny commented that he noticed there is no process outlined in the policy for how the selection process will be conducted, to which Ms. Woodcock said that it has been communicated out that nominations can be sent to Administration, who will be making the final selection each month/quarter. Mr. Kostovny added that he likes that it is employee driven.

o **100.11 Dress Code** – Ms. Woodcock explained that the revisions to the Dress Code policy more clearly specify the requirements, such as prohibiting sweatsuits and sweatshirt and adding requirement for scrubs in particular departments, as well as lab coats and hats being allowed in certain departments. Ms. Woodcock also noted that personal hygiene was added, as well as "hair color will be of a natural hair color".

Discussion: There was extensive discussion regarding hair being required to be of a natural hair color. While the Board expressed that they may *prefer* to have the hair of a natural color, concerns were raised about the trends being different in 2021 and the possible detriment to recruiting. The decision was ultimately made to remove that portion from the policy and leave it at "Hairstyles must be of a professional appearance."

Board Member Kostovny also noted that EMT's often times wear hats in the winter so he requested for them to be added to the hat exception.

Treasurer Goergen raised concern about jewelry, as it depends on what department you're in on whether it is restrictive or not, as well as the thought that facial piercings might be offensive to some of our Medicare patients. Ms. Woodcock assured him that there were no revisions made to the jewelry policy; it remains the same.

The Board Members agreed that there is no right answer to some of these situations, and concluded that the following statement in the policy should be put in bold text:

"They are not meant to cover all situations; therefore, employees with questions or requiring clarification should consult their immediate supervisor."

- o **301.08 Performance Reviews** Ms. Woodcock informed the Board that the revision proposes to have Performance Reviews due on the employee's anniversary date, rather than doing all employees at the same time every year, and to add the expectation of setting SMART goals.
- o **301-00 Licenses, Certification, and Registration Verification and Control Systems** Ms. Woodcock explained that this policy addresses how licenses and certifications are recorded and tracked, and we have just updated the language and added the process of *how* it is done.

Discussion: Mr. Kostovny inquired as to why it is done through HR when they are hired, and then through Education thereafter. Ms. Woodcock explained that they are initially collected when HR does the new hire background checks, and then they can just be updated in the Relias training program, which Clinical Educator Wendy Thorvaldson oversees. She further explained that employees are actually able to upload them themselves, which gives them ownership, and then Wendy can just verify that it's done.

o **304-01 Tuition Reimbursement** – Ms. Woodcock explained that we have had the Tuition Reimbursement policy for a long time; we just haven't been using it. The application process has been added, the procedure for reimbursement, the amount was increased from \$200 to \$2,000 per year, and a repayment agreement was added.

Discussion: Mr. Kostovny raised concern about why an "A" student would get more reimbursement than a "C" student, as he noted that there may be a hard worker that isn't as naturally gifted but may actually be a better student/employee. The Board agreed to change it to give full reimbursement to all grades A through C.

304-03 Staff Development – Ms. Woodcock informed the Board that the definitions section was added to the
policy in order to clarify the difference between Staff Development and Tuition Reimbursement, and the
process of how to request it was also added.

Discussion: Mr. Kostovny commented that it may cost more to fly and rent a car for two weeks or two months than to drive your own vehicle across country, so he suggested the provision that states "Reimbursement for use of personal auto will not exceed the price of coach air travel ticket" should be changed. After discussion, the Board agreed to add a provision that allows for exceptions if approved by the CEO and Human Resources Director.

Jerry Steele made a motion, and Mark Kostovny seconded the motion to approve the Human Resources policies listed above with the requested changes noted and as presented. Motion carried.

Open Session dismissed for a 5-minute restroom break at 12:28pm.

Open Session resumed at 12:33pm.

• BHG Patient Lending, LLC Program Agreement – Jon Smith, *Chief Financial Officer*: Mr. Smith presented the BHG Patient Lending Program to the Board, which will provide a guaranteed loan to patients in order to finance balances of up to \$20,000 for 5 years. BHG Lending works with our local Bank of Commerce to do the financing, and MHCC gets 70% while 30% is put into a holding account to be paid out if loans are not paid. Mr. Smith assured the Board that there are no out of pocket expenses, and we will get \$3.1 Million right off the top based on our current self-pay accounts. He expressed that this program will help our patients because it allows them to make payments over a longer period of time and everyone is eligible.

Discussion: Treasurer Goergen clarified that, since 30% goes into a holding account, MHCC will actually only get \$2 Million cash right off the top. He also inquired about the interest rate and risk involved, to which Mr. Smith said that the interest rate is whatever the market rate is at the time and the only risk involved is if a lot of patients default on their loans, which is very low. CEO Harman added that there is about a 3-5% default rate.

Garry Goergen made a motion, and Mark Kostovny seconded the motion to approve the BHG Patient Lending, LLC Program Agreement as presented. Motion carried.

• Summit Pathology First Amendment to Professional Services and Medical Director Agreement – Ken Harman, Chief Executive Officer: Mr. Harman reported that Summit Pathology approached us about changing the price of their services due to the extensive hours that the Medical Director for our Laboratory put in over the last year to get our Lab in compliance for the CLIA Survey. Mr. Harman specified that they are proposing a price change from \$500 per month to \$3,000 per month. He added that we have had a long-standing relationship with Summit and, without Dr. Long's help, we wouldn't have passed the survey.

Discussion: Board Member Kostovny asked if they would be putting in the same amount of hours, to which CEO Harman replied that that is not likely due to the fact that accreditation only occurs every two years, but, unfortunately we are paying for what's already been done. He also clarified that this extra expense was not budgeted for.

Mark Kostovny made a motion, and Jerry Steele seconded the motion to approve the Summit Pathology First Amendment to Professional Services and Medical Director Agreement as presented. Motion carried.

Open Discussion/Citizen Participation: Mr. Kostovny reported that he has heard from several employees that they are very grateful for the recent pay raise.

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

Jerry Steele made a motion, and Mark Kostovny 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 12:55pm. Motion carried.

The Board convened to Executive Session at pm 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 4:23pm. Motion carried.

New Business Continued:

• Credentialing:

- o Gabriel Habermehl, MD Pathology: Courtesy Staff Appointment
- o Amanda Jones, PA-C: Allied Health Staff Appointment
- o Michael Taylor, DO Internal Medicine: Locum Tenens Staff Appointment
- o Ruth Pitts, MD Family Medicine (RPG): Active Staff Appointment
- o Daeyoung Roh, MD Internal Medicine: Locum Tenens Staff Appointment
- o Direct Radiology: Telemedicine Staff Reappointments
 - Frederick Jones, MD
 - Charles Westin, MD
- o Justin Clark, MD Radiology (MIA): Courtesy Staff Appointment
- o Sharon Eskam, MD OB/GYN: Locum Tenens Staff Appointment
- o Andrew Jonassen, MD Orthopedic Surgery: Active Staff Appointment
- o Eric Kuhlman, DPM Podiatry: Courtesy Staff Appointment
- o Narina Grove, MD Pathology: Courtesy Staff Appointment

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

• Provisional Reviews:

- o Jay Turner, AuD Audiology: Allied Health Staff
- o Jourdan Aromin, MD Psychiatry: Telemedicine Staff
- o Aaron Hawkins, MD Psychiatry: Telemedicine Staff
- o Joseph Hime, III, MD Psychiatry: Telemedicine Staff
- o Dwayne Narayan, MD Psychiatry: Telemedicine Staff
- o Gregory Renck, MD Psychiatry: Telemedicine Staff

Mark Kostovny made a motion, and Jerry Steele seconded the motion to approve full, unrestricted privileges for the individual listed above and as presented. Motion carried.

• Resignation of Privileges:

- o Roland Kafuuma, MD Internal Medicine (RPG)
- o Anna Jones, MD Family Medicine (RPG)

Mark Kostovny made a motion, and Jerry Steele seconded the motion to accept the resignation of the individuals listed above and as presented. Motion carried.

Adjournment:

Mark Kostovny made a motion, and Jerry Steele seconded the motion to adjourn the Board of Trustees public meeting at 4:26pm with no further business coming before the Board.

The next Board of Trustees meeting will be September 2, 2021.

Respectfully Submitted.

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

crb