

Cascade Medical Center Board Minutes

November 18th, 2020

CMC Conference Room

12:00 pm – 3:25 pm

Trustees present in person: None

Trustees attending remotely via Zoom: George Greenfield, Lesa Becker, Jacque Zemlicka, Rachel Smith, Mary Tracey, and David Gough

Members absent and excused: Anthony Henry

Others present: Tom Reinhardt, David Donnahoo, Teri Coombs, and Sarah Hasbrouck

Call to Order: Meeting called to order by George Greenfield at 12:12PM

Approval of Agenda: Motion to approve the agenda was made by George Greenfield; all in favor, motion passes.

BOT Minutes:

The minutes from the October Board Meeting were reviewed, there were no corrections noted.

A motion to approve the minutes as they stand was made by Jacque Zemlicka, seconded by Lesa Becker; all members were in favor, motion passes.

Quality Moment: Dr. Gough presented a quality moment, informing the members of the board about the recent technical audit of our Radiology Department, which is done quarterly by our Gem State Radiology providers. The result of our most recent audit, in addition to past audits dating back to the hiring of current Radiology Manager Bryan Gibson, show that there have been no sub-optimal imaging studies. This contributes to excellent patient care as it allows patients to avoid additional radiation, allows our providers to make quicker decisions, and by providing high quality imaging, allows Radiologists to see the images with increased anatomical accuracy. The Radiology Department will be recognized for their exceptional performance.

Operations Report:

Medical Staff Minutes:

Sarah presented the Board with the November 10th, 2020 Medical Staff Minutes, which include the Utilization Report and Volume Trends, for review.

Tom did notify the members of the board that overall, volumes are currently down about 3% from last year for all services lines when combined.

The Utilization Review and Volume Trends for the month of October 2020 were as follows:

UTILIZATION REVIEW:

- Total ER Visits: 94 (117 October 2019)
- Total OP Visits: 15 (21 October 2019)
- Total Physical Therapy Visits: 325 (340 October 2019)

- Total Clinic Visits: 492 (528 October 2019)
 - Dr. Ellsworth: 99
 - David Hill: 79
 - Dr. Camarata: 66
 - Heather Lewis: 71
 - Dr. Dardis: 33
 - Courtney Hill: 82
 - Allison Dwyer: 12
 - Jamie Coffey-Kelly: 50
- Total Laboratory Visits: 348 (286 October 2019)
- Total Radiology Visits: 84 XR's, 51 CT's and 9 US's (106 XR's, 57 CT's, 4 US's October 2019)
 - Death – two, one elderly MVC and one end of life
 - Blood Transfusions – none
 - Average Length of Stay for Inpatients – there were three inpatients in the month of October, ALOS 56.08 hours (one observation patient)
 - Leaving Against Medical Advice – none

QUALITY REVIEW:

All provider response times were within the 30-minute window.

EMERGENCY DEPARTMENT CALL BACKS:

70 patients called / 23 not indicated / 1 missed = 98.6% success rate

TRANSFERS:

All transfers were noted to be of appropriate mode. The following reasons were cited for services and/or equipment needed at CMC to keep patient here:

	<i>Transfers</i>		<i>Mode</i>
Surgery	2	Rotor	4
ENT		Fixed Wing	
Neurology		Ambulance	4
CCU	4	Private Vehicle	1
ICU	3	Amb. Rendezvous	
Obstetric		Contracted Psych	1
PICU			
Psych	1		
Burns (Utah)			

INPATIENT CARE PLANS:

There were three inpatients in the month of October; all three of the charts contained a complete care plan.

Financial Reports & CARES Act Status:

David presented the October 2020 financials in conjunction with the October 2020 Variance Report (provided at the end of these Minutes as Attachment A,) pointing out Clinic and ER volumes are both down due to the increased COVID surge, which is driving revenue down for this first month of fiscal year 2021.

Additionally, supply cost also is above the budgeted expense due to the COVID surge; however, these supply expenses will be offset by our CARES funding when recognized at a later time. David informed

the board that the next few months would most likely be similar in deficit due to COVID. CARES act financial relief will help off-set higher expenses due to COVID in FY21, as well as potentially lost revenues, but CMC is awaiting revised rules from HHS on revenue shortfall relief.

Rachel Smith asked what is allocated into “Other Sources” for revenue. David explained it includes items like employee meals and miscellaneous payer payments not directly related to patient claims.

CEO Report, Old & New Business:

Introduction to Dr. Camarata and OMT:

Dr. Camarata provided the board with a brief presentation on Osteopathic Manipulation Therapy, and what it entails. It is a group of manual therapy techniques used to maximize the body’s innate ability to heal, including both soft and hard manipulations. Most of these techniques are passive, not requiring much on the patient’s part. It shares some characteristics of chiropractic manipulations but does not focus on “cracking.” It also includes components of massage therapy but focuses heavily on alignment. She noted that it is most beneficial when paired with Physical Therapy.

CEO Update:

The clinic has begun full day Saturday clinics, staffing an additional provider to provide chronic condition visits in addition to the established walk in clinic. The new hours will be 9a-4p, with a soft start in November and advertising to begin in December.

Space changes are currently underway to create more clinical space, and allow for a new space to draw patient blood samples that is outside of the laboratory itself.

Annual Idaho Board of Pharmacy inspection occurred recently; there were no deficiencies noted.

There is a CMS survey currently occurring which is scheduled to be completed by Friday. Tom will provide an update once completed.

COVID Update:

Preparation for vaccine administration has begun with partners at the state and federal level. A special meeting of the board may be scheduled once vaccines are released and a timeline has been established for public vaccination.

Tom shared the current COVID testing trends and positivity rates. Currently offering Viral RNA, Antigen and Antibody testing. Testing supplies are well stocked, and can be given at the order of a providers for all symptomatic patients. We continue to provide testing of asymptomatic patients in healthcare, first responders and teachers for safe return to work.

Lesla and Dr. Gough spoke briefly at the request of George on proper mask wearing, and the types of masks that should be worn and why.

Break from 1347-1352

Committee Reports:

Finance Committee:

Members:

Mary Tracey, Chairperson
Jacque Zemlicka
David Donnahoo
Tom Reinhardt

The Finance Committee did not meet in November. Mary Tracey did comment that Tom and David are doing further research regarding the Tax Levy issue, and will have a report to provide to the Board of Trustees at the December meeting.

Quality Assurance, Performance Improvement and Compliance Committee:

Members:

Lesa Becker, Chairperson
Rachel Smith
David Gough
Aline Lee
Tom Reinhardt
Teri Coombs

The Quality Assurance, Performance Improvement and Compliance met November 9th, 2020. Lesa provided an update and notified the board that meeting minutes are taken if any of the other members would like to review them.

Some current initiatives include the development of a Quality Indicators dashboard that will include all of the current Patient Satisfaction and Quality Indicator Metrics. The clinic is currently working on measures to improve diabetic care management, and the providers have been engaged to help develop improvement methods. Physical Therapy has also begun to track outcomes data for its patients. The Provider Peer Review process is being modified to best utilize services that we already subscribe to.

Strategic Planning Committee:

Members:

Anthony Henry
David Gough
Mary Tracey
Tom Reinhardt
Jack Knoblock
Karolyn Plehal
Ann Young

The Strategic Planning Committee did not meet in November and had no updates to provide.

Executive Session:

An Executive Session was scheduled in accordance with IDAPA 74-206(1)(b) to discuss Personnel. A motion was made by Rachel Smith to enter into an Executive Session, the motion was seconded by Lesa Becker; role was taken of all members; motion to enter into Executive Session carries. Members entered into Executive Session to discuss Personnel at 2:08 PM.

The members exited executive session at 3:46PM to discuss the CEO's annual performance evaluation and related compensation. Mary Tracey proposed that the CEO receive an 8.5% bonus payout in addition to a \$2/hr bonus for hours worked during the COVID Pandemic. Lesa Becker seconded this motion; all members were in favor, motion passes.

Other/Next Steps:

- Clarification of Board Responsibilities regarding Provider Peer Review Process
- Possible Special Meeting of the Board, to include Dr. Ellsworth regarding COVID Vaccinations

Adjournment: The meeting was adjourned by George Greenfield at 3:49PM.

Attachment A

Variance Detail Analysis - Oct 2020 FYTD						
Category	Budget FYTD Oct, 2020	Actual FYTD Oct, 2020	Variance to Budget	Variance %	Explanation	Correction/Action Plan
REVENUES						
Gross Revenue from Inpatient, Outpatient, ER, and Clinic	\$ 481,625	\$ 411,892	\$ (69,732)	-14%	Volumes continue to be affected by COVID. ER volume is down 20% to prior year, Clinic volume is down 7% to prior year.	Currently, COVID cases are rising and the state has reverted back to Stage-2. We anticipate our volumes may continue decrease if the pandemic worsens. We are increasing our efforts to respond to the virus.
Gross Revenue from 340B Rx Plan	\$ 8,314	\$ -	\$ (8,314)	-100%	Revenue from 340B is reported 2 months in arrears. This will be updated once the amounts are received from the vendor (Macrohelix)	None.
Off-sets to Revenue						
Contractual Adjustment	\$ 53,885	\$ 73,046	\$ 19,162	36%	Contractual adjustments are higher than budgeted, but are lower than October of 2019. Continuing to monitor and seek a payment vetting solution.	Need to conduct audit of payor contractuals and assess contracts to verify that adjustments are correct, and that contracts with insurance companies going forward are fair. Project TBD.
Bad Debt Expense	\$ 9,632	\$ 7,065	\$ (2,567)	-27%	Bad debt expense is continuing the favorable trend experienced at the end of FY 2020. In 2020 CMC began improved insurance and patient information collection in the ER.	Continue to improve operations to optimize collections.
Indigent Care Writeoff	\$ 19,265	\$ 9,510	\$ (9,755)	-51%	Enrollment in Idaho Medicaid Expansion continues to grow, with the statewide enrollment now hitting the original projection. Locally we are having success in retroactive eligibility for some patients, shifting revenue from sliding scale write-off to Medicaid receipts.	Continue to enroll patients in Medicaid. Support IHA lobby of Idaho legislature to maintain support of Medicaid expansion and budget.
Other Revenue	\$ 80,071	\$ 75,915	\$ (4,156)	-5%	Variance is due to strait-lining of budgeted Donations and Grant Revenue as it is not known when Donations/Grants will post. Additionally, CARES Act Provider Relief Funds, which are not included in the budget, have not yet been applied to FY 2021	Continue to engage potential donors and grant funding sources in FY 2021. We anticipate applying CARES Act Provider Relief Funds on a quarterly basis
EXPENSES (Unfavorable Variances > \$5,000 from Budget YTD)						
Contract Labor	10,057	-	(10,057)	-100%	Contract Labor invoices (lab worker - 100% COVID related) have not been received for October. This is likely a timing issue, and we expect these invoices will be received for November.	No action needed. Contracted NP finished 9/10/20. Lab worker through mid-November and then will be evaluated as COVID develops.
Supplies	22,407	54,461	32,054	143%	Supply costs are higher than expected because of medical supply and drugs purchased, including COVID related supplies, extra PPE.	Need project to assess purchasing arrangements and GPO options. Leadership to develop supply chain strategy.
Repairs & Maintenance	2,674	13,405	10,731	401%	\$8,400 Tri-Plex expenses (interior work and driveway grading and repair). \$3,300 of COVID-Related expenses installing security cameras (to monitor hospital entrances). posted in October.	No action needed. Tri-plex is now in use and ready for winter. CARES Act Provider Relief Funds are still covering COVID-related expenses
Depreciation & Amortization	18,185	26,829	8,644	48%	Capital equipment purchases incurred in late FY19 and into FY20 drove D&A higher than budget. Some items (e.g., modular buildings) are COVID related. FY21 will see purchase of \$100k in new lab equipment hitting depreciation.	No correction planned. Some items will "age-off" our depreciation schedule over the next year as they become fully depreciated.
Favorable variances in Green	Unfavorable variances in Red					