

Board of Commissioners Meeting

February 22, 2024 Summit Pacific Medical Center

Gravs HarborCounty Public Hospital District No.1

Agenda

- 1. 6:00 Call to Order
 - a. Introductions as needed
 - b. Business from audience
- 2. 6:05 Consent Agenda See separate Consent Agenda Action (vote)
- 3. 6:08 Approval of Minutes Action (vote)
 - a. January 25, 2024 Regular Meeting
 - b. February 8, 2024 Special Meeting
- 4. 6:10 Patient Story Tori Bernier Info
- 5. 6:15 Pulse Survey Jennifer Burkhardt, CTLO *Info*
- 6. Executive Reports
 - a. 6:30 Quality Report and Dashboard, Tori Bernier Info
 - b. **6:45** Finance Report, James Hansen *Info*
 - c. 7:00 Advocacy Committee, Josh Martin (as needed)
 - d. 7:10 Executive Report, Josh Martin Info

7. Commissioner Business

a. 7:25 – Medical Staff Privileges – Action (vote)

Alan Itkin, MD (Radiology) Telemedicine	Initial Appointment
Pratik Bhattacharya, MD (Neurology) Telemedicine	Reappointment
Michael Chen, MD (Neurology) Telemedicine	Reappointment
William Lou, MD (Neurology) Telemedicine	Reappointment

- b. 7:30 -Bylaw Reviews- Action (vote)
- c. 7:45- Resolution 2024-03 Compensation Limit– Action (vote)
- d. 7:50- Hot Topic Discussion Discussion
- e. 7:55 Upcoming Events, Andrew Hooper
- f. 8:00 Meeting Evaluation, Andrew Hooper
- 8. 8:05 Executive Session
 - a. (g) qualifications of applicant or review performance of public employee/elective office
 - b. (i) discuss claims with legal counsel (ii) litigation or legal risks expected to result in adverse legal or financial consequences
- 9. Commissioner Business Continued
 - a. 8:35- Resolution 2024-04 Superintendent Compensation— Action (vote)
- **10. 8:40 Adjourn** *Action (vote)*



Board of Commissioners Meeting

February 22, 2024 Summit Pacific Medical Center

Gravs HarborCounty Public Hospital District No.1

<u>Upcoming events</u>: - BOLD events indicate desired Commissioner attendance.

- Annual Golf Tournament | Salish Cliffs | May 10, 2024
- WSHA and AWPHD Rural Health Conference | Campbells Resort Lake Chelan | June 23-26, 2024
- Employee Awards Ceremony | Ortquist Conference Room | July 24, 2024
- Ride the Harbor | McCleary, WA | August 3, 2024
- Strategic Plan Retreat | Alderbrook Resort and Spa | August 6-7, 2024
- Employee Picnic | TBD | August 28, 2024
- > Peak Health 5K Walk & Fun Run and Community Wellness Fair | Wellness Center | September 14, 2024
- Donor Celebration Saving Lives Celebration | Wellness Center | September 25, 2024
- Ladies' Night Out | Wellness Center | October 10, 2024
- Harbor Lights Laser Show | Satsop Business Park | December 11-12, 2024
- Summit Fights Hunger | Wellness Center | December 18-19, 2024

Consent Agenda

A very useful technique involves the use of a consent agenda. The board agenda planners (usually the executive or governance committee, but occasionally the board chair with the CEO) divide agenda issues into two groups of items. The first are those items that must be acted on because of legal, regulatory, or other requirements, but are not significant enough to warrant discussion by the full board. Such issues are combined into a single section of the board agenda book; members review these materials prior to the meeting, and if no one has any questions or concerns, the entire block of issues is approved with one board vote and no discussion. This frees up a tremendous amount of time that would otherwise be squandered on minor issues. Any member can request that an item be removed from the consent agenda and discussed by the full board. The success of the consent agenda is predicated upon all board members reading the material in the consent agenda section of the board agenda book. If they do not, then the board becomes a veritable rubber stamp. The second group of agenda items are those important issues that require discussion, deliberation, and action by the board. These are addressed one by one.

Executive Session Justification

Executive Session is convened to discuss the following topics, as permitted by the cited sections of the Revised Code of Washington (RCW):

- Executive session (RCW 42.30.110)
 - a. (a) national security
 - b. (b) (c)real estate
 - c. (d) negotiations of publicly bid contracts
 - d. (e) export trading
 - e. (f) complaints against public officers/employees
 - f. (g) qualifications of applicant or review performance of public employee/elective office
 - g. (h) evaluate qualifications of candidate for appointment to elective office
 - h. (i) discuss claims with legal counsel
 - i. existing or reasonably expected litigation
 - ii. litigation or legal risks expected to result in adverse legal or financial consequences
 - iii. presence of legal counsel alone does not justify executive session
 - i. QI/peer review committee documents and discussions
- Final action must be in open meeting



For the Period:

January 2024

Description	Amount
Payroll	\$ 3,019,609
A/P Operations	\$ 3,071,287
A/P Capital	\$ 918,169
Community Care	\$ 178
Bad Debt	\$ 7,999
Property Tax Credit	\$ 81
Total	\$ 7,017,324



AGENDA	DISCUSSION/CONCLUSIONS	ACTIONS/FOLLOW-UP
CALL TO ORDER	CALL TO ORDER	
	The meeting of the Board of Commissioners of the Grays Harbor County Public Hospital	
	District No. 1 was called to order by Andrew Hooper at 6:00 pm	
	Commissioners present: Gary Thumser, Georgette Hiles, Carolyn Wescott, Andrew Hooper	
	Commissioner Absent: Kevin Bossard	
	Present: Josh Martin, Tori Bernier, Jennifer Burkhardt, Winfried Danke, Jim Hansen, Dr. Ken	
	Dietrich, Rachel Brown, Patti Haught, Jori Stott, Brad Thomas, Tracy Kateley, Jennifer	
	Brackeen, Justin McClintock, Steven Thomson, Dr. Kevin Caserta, Sharlene Higa, Peter	
	Seyfarth-Lechner, Lourdes Schoch	
BUSINESS FROM	Business from Audience	
AUDIENCE	• NA	
CONSENT AGENDA		Commissioner Thumser made a motion to approve the consent agenda. Commissioner Hiles seconded the motion. All voted in favor. Chairman Bossard was absent and excused.
MINUTES	December 28, 2023 Regular Meeting	Commissioner Wescott made a motion to approve the December 28, 2023 minutes. Commissioner Hiles seconded the motion. All voted in favor. Commissioner Bossard was absent and excused.
PATIENT STORY	CTLO Burkhardt shared a patient safety story regarding Jaime Tully, RN correctly	
	diagnosing and reporting patient blood clot(see patient story for more details).	
ANNUAL REPORT 2023	 CEO Martin presented 2023 Annual Report (see Prezi presentation for more details). 	



- CEO Martin and Executive team provided updates on our achievement and progress on the 2023 objectives.
- There was an overall reduction of 32% of open positions in 2023.
- Summit Pacific implemented Franklin Covey's Leading at the Speed of Trust for leadership.
- Summit Pacific reduced first year turnover by 7.8% in 2023.
- Summit Paific ended the year at 53 days in AR. The organization met the adjusted internal goal but missed the strategic goal of 47.
- SPMC is back to baseline for before Epic Go Live.
- 74 caregivers responded in Epic survey with 24 departments represented. 69% of respondents shared they liked Epic more than prior electronic medical records. The greatest shared need is more training.
- Summit Pacific contracted with Medasource to help with over 13,000 patient chart conversions.
- Summit Pacific selected the ERP Workday and is already well on the way to setting up for implementation. SPMC is set to Go Live in July 2024.
- Summit Pacific is on schedule to break ground with the expansion January 31, 2024.
- Summit Pacific established an HRO Steering Committee in 2023. The team is working with Mike and Alan from Press Gainey and working towards a plan forward for staff training.
- The organization started doing internal audits which have been well received.
- Service Excellence was launched this year. Staff have benefited from these modules to create a culture of excellence.
- In September the Foundation launched the Community Capital Campaign.
- CMO Dietrich congratulated Dr. Caserta and Jennifer Brackeen for their work in Innovation. The team has been engaged with Wellpoint to obtain valuable data to see how we are making improvements in our patient population.
- Summit Pacific struggled with Annual Wellness visits due to our Epic implementation.
- CEO Martin reviewed 2023 statistics (see prezi for more details).
- CEO Martin reviewed 'a year in review' (see prezi for more details).
- CFO Hansen and Jori Stott, SR EA were recognized by Cain Brothers from Keybanc for Bond financing efforts.
- CEO Martin closed presentation with quote by Marc Benioff "There is no finish line in system reliability and our efforts to improve performance never cease".



	1 1
	 Chairman Hooper shared conversation with Medrice Coluccio about how impressed she is with the annual achievements of Summit Pacific over the many years. Chairman Hooper extended his gratitude for all the hard work from our staff for an exceptional five years.
QUALITY	 CNO Bernier reviewed the Quality Report and Dashboard (see presentation for more details). Last year seven (7) corneas were used from patients from our hospital in 2023 through tissues donation. Karla De La Cruz received infection control certification. ACU has been working diligently on preventing patient falls. There has been no foley catheter hospital acquired infections since 2016. RQI has been opened to all staff for BLS. Commissioners are welcome to get BLS trained if interested. Commissioner Hooper expressed interest in receiving BLS training. The Lab did 11,000 tests and are doing an exceptional job. Summit Pacific is meeting all of our trauma, cardiac and stroke measures during hard times. The Quality Committee reviewed and approved the Annual Quality Plan during their January meeting. Commissioners Hiles and Wescott attended the meeting.
FINANCE	 CFO Hansen reviewed the Financial Report (see report for more details) Gross operating revenue was down due to volume and particularly due to the holidays. Operating margin was low due to a timing issue. Our Medicare Cost report was adjusted, and it was not in our favor by \$1.5 million for the interim cost report. Summit Pacific did receive some grant money in December which did offset some of the costs. CFO Hansen reviewed days in AR graph for 2023. Days peaked in July and the team was able to bring it down tremendously over the last 5 months. At the same time in our implementation process with Meditech Summit Pacific was at 77 days in AR as opposed to 53. CEO Martin and CFO Hansen have been discussing HRO and what that means for our finances. There will be some changes in our reporting to reflect being a high performing organization for our bond rated status and for investors.
ADVOCACY	 CEO Martin provided an update on Advocacy. Advocacy Committee did meet with Representative Tharinger in January.



	 Thank you Commissioner Wescott for jumping in to attend the WSHA Advocacy Days. 	
EXECUTIVE REPORT	 CEO Martin reviewed the Executive Report (see report for more details). Summit Pacific is recruiting a GI ARNP to help with GI follow up appointments. The Cardiology program launched this month. In February we will go to two days a week for clinics. The program is entirely outpatient. There will be some protocols developed to do some in patient ACU for observation and will be referred to tertiary centers for risk patients. HR is busy working to locate a new HR director. There were two onsite interviews this week with some additional applications coming in. HR is very busy with Workday implementation tests. There are over 400 tests that need to be completed. Summit Pacific did an active shooter training in January with community agencies law enforcement, fire, and county emergency preparedness. The event was well received by patients and employees. Summit Pacific received permitting from city for our hospital expansion. Summit Pacific commenced Family Medicine Residency application review process for 2024. HRO Alan Bennett will be presenting to the Board this Spring. Jori Stott to add Board HRO document to Commissioner Packets. CEO Martin presented on the expansion to Elma City Council on the hospital expansion. 	
COMMISSONER BUSINESS	Medical Staff Privileges John Ringquist, MD (Emergency Medicine) Initial Appointment Seth Kingree, MD (Hospital Medicine) Telemedicine Initial Appointment Darelle Walker, ARNP (Cardiology) Initial Appointment Laura Armstrong, MD (Family Medicine) Active Status Angela Shimoda, MD (Family Medicine) Active Status Angela Shimoda, MD (Family Medicine) Active Status Board Bylaw Review Summit Pacific did a full review in 2022 and established a committee to make recommended changes. Commissioners agreed to review Bylaws before February meeting and make recommended changes to Jori Stott prior to the meeting. Resolution 2024-01 Regular Meeting Schedule	Commissioner Hiles made a motion to approve the Medical Staff privileges. Commissioner Wescott seconded the motion. All voted in favor. Commissioner Bossard was absent and excused. Commissioner Hiles made a motion to approve Resolution 2024-01 Regular Meeting Schedule. Commissioner



January 25, 2024

•	Legal Counsel recommended setting up a regular meeting calendar by resolution
	annually.

• The calendar can be modified at any time by resolution.

Capital Campaign

- Chairman Hooper shared that the goal for Capital Campaign is to get all leadership participating in the campaign. This is important for our attempts to get larger participation from donors.
- CEO martin proposed to come back to a future meeting to connect separately to help identify a dollar amount for a collective amount.
- Commissioner Thumser asked for a list of naming opportunities.

Reproductive Rights Acts Response to ATG

- Commissioners were provided with Summit Pacific's response to the Attorney General's office on Reproductive Rights.
- Thank you CTLO Burkhardt and CMO Dietrich for their hard work on this response.
- The Attorney General's office sent Summit Pacific a letter stating the organization is out of compliance with state requirements.
- Summit Pacific worked with 27 other hospitals to determine what is "substantially equivalent to"
- CEO Martin read the letter regarding the response to AG.
- Summit Pacific does not provide labor and delivery services or surgery. Summit Pacific does provide prenatal and maternal care and as such provides pharmaceutical termination services.
- Discussion what we do next if they say that our response is not acceptable.
- WSHA has been a great partner for us. The Attorney General does intend to engage in conversations with each hospital.

Hot Topic

 Chairman Hooper proposed to carry these articles forward to the next board meeting.

Upcoming event

- CEO Evaluation debrief is scheduled February 8th at 3:00 pm.
- All are invited to attend the Estate planning event sponsored by the Foundation.

Wescott seconded the motion.
All voted in favor.
Commissioner Bossard was
absent and excused.



January 25, 2024

	Meeting Evaluation	
	 There were no topics of interest for future board meetings. 	
EXECUTIVE SESSION	 Chairman Hooper recessed the meeting at 8:05 pm. Chairman Hooper announced reason for executive session RCW (B,C) real estate. Chairman Hooper announced the session is anticipated to have action and last 15 minutes. CEO Martin, CMO Dietrich, Chairman Hooper, Commissioner Wescott, Commissioner Hiles and Vice Chair Thumser were present. The executive session convened at 8:10 pm. The executive session ended at 8:25 pm. 	
201414160101150	The regular session reconvened at 8:25 pm.	
COMMISSIONER BUSINESS CONTINUED	Resolution 2023-02 Purchase of Property There was no discussion.	Commissioner Thumser made a motion to approve Resolution 2024-02 Purchase of Property. Commissioner Wescott seconded the motion. All voted in favor. Commissioner Bossard was absent and excused.
ADJOURNMENT	The regular session of the Board of Commissioner's meeting adjourned at 8:10 pm.	Commissioner Hiles made a motion to adjourn the meeting. Commissioner Wescott seconded the motion. All voted in favor. Commissioner Bossard was absent and excused.

Recording Secretary Board Secretary



February 8, 2024

AGENDA	DISCUSSION/CONCLUSIONS	ACTIONS/FOLLOW-UP
CALL TO ORDER	CALL TO ORDER The meeting of the Board of Commissioners of the Grays Harbor County Public Hospital District No. 1 was called to order by Andrew Hooper at 3:00 pm Commissioners present: Andrew Hooper Care Thumson Care In Wessett Coorgette Hiles	
	Commissioners present: Andrew Hooper, Gary Thumser, Carolyn Wescott, Georgette Hiles, Kevin Bossard was absent and excused.	
	Present: Josh Martin, Medrice Coluccio (Virtual)	
BUSINESS FROM AUDIENCE	Business from Audience NA	
Executive Session	 Chairman Hooper announced the Board will be going to executive session (RCW 42.30.110) to discuss (g) review of a public employee with no anticipated action. Chairman Hooper announced the session was anticipated to last 58 minutes with no anticipated action. The board recessed the session at 3:00 pm The executive session convened at 3:01 pm. The regular session reconvened at 4:00 pm. 	
ADJOURNMENT	The regular session of the Board of Commissioner's meeting adjourned at 4:00 pm.	Commissioner Hiles made a motion to adjourn the meeting. Commissioner Wescott seconded the motion. All voted in favor. Commissioner Bossard was absent and excused.



February 8, 2024

Recording Secretary	Board Secretary

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% Inpatient Compliance - Flu Vaccine ↑	100%	100%												0%	100%
% Employee Compliance - Hand Hygiene 个	92.05%	97.00%												97.00%	100%
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Quality Measures	2024	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	ОСТ	NOV	DEC	2024 Total	Goal
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Urgent Care Volumes	16,197	1,427												1,427	
				EME	RGENCY DE	PARTMEN	IT		1		1		1		
Emergency Department Volume	18,520													1,590	
Arrival to triage (avg in min) ↓	9	9												9.0	24
ED Length of Stay (hours)	3.6	3.9												3.9	2.5
% left without being seen ↓	2.8%	2.3%												2.3%	2.0%
% left against medical advice ↓	1.4%	1.1%		550										1.1%	2.0%
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Acute Care: Restraints	4	6												- 6	
Emergency Department: Restraints	35 35	4												4	
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Emergency Department: Mortality	9	1 1												1	
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30 Day Inpatient Readmissions ↓	29	1												1	0
Wellpoint Washington	72	11												11	
72 Hour ED Re-Admits ↓	3.3%	3.1%												3.1%	2.5%
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% blood culture contamination ↓	2.3%	Pending												#DIV/0!	0.0%
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Quality Measures	2024	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	2024 Total	Goal
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% of ED patient complaints ↓	0.2%	0.1%												0.1%	
% of Acute Care complaints ↓	0.8%	0.0%												0.0%	
% of Clinic complaints ↓	0.2%	0.2%												0.2%	
% Urgent Care complaints ↓	0.1%	0.0%												0.0%	
		1		P	ATIENT EXP	ERIENCE							1		
Patient Experience Feedtrail Score	94%	Pending												#DIV/0!	
Call Button Response as soon as Patient Wanted	95%	Pending												#DIV/0!	
Room Quiet at Night	95%	Pending												#DIV/0!	
Patient was Informed what Medication was for	55%	Pending			DOI:C	EC								#DIV/0!	1000/
% of Completed policies ↓	84.9%	Bonding			POLICI	LO								#DIV/0!	100%
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% of Completed contracts ↓	96.9%	Pending			CONTRA									#DIV/0!	100%
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_	0	0												0	
Allergy	U	U												U	

		r .		ı	1	ı	ı		1	1					
Excessive Dose	0	0												0	
Total Number of Medication Errors	22	0												0	
Administration	13	0												0	
Transcription	0	0												0	
Prescribing	2	0												0	
Narcotic Discrepancy	0	0												0	
Pharmacy	0	0												0	
Other	7	0												0	
Total Number of Falls	30	2												2	
Ancillary Departments	2	0												0	
Acute Care	17	2												2	
Urgent Care	1	0												0	
Wellness Center	6	0												0	
Emergency Department	4	0												0	
			QR	GANIZA	TIONAL	DEVELO	OPMEN1								
Quality Measures	2024	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	ОСТ	NOV	DEC	2024 Total	Goal
Total number of staff injuries ↓	17	Pending												0	0
iotal named of startingaries V		Tonding		UNUSU	AL OCCURA	NCE REPO	RTS			l.			I	, and the second	_
Total Number Unusual Occurance Reports	658	54		1										54	
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Quality Measures	2024	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	ОСТ	NOV	DEC	2024 Total	Goal
Quality incucured		07.01		1017 41 1	TRAUN			302	7.00	UZ.				2024 10101	
Total Trauma Patients	45			l	INAUN		l			1				_	
	45	7												7	
Total Trauma Patients meets criteria	39	7												7	
Trauma to Transfer out Door (mins)	193	114												114	≤ 180 mins
					STRO	(E									
Total Stroke Patients	26	2												2	
Total Stroke Patients (meets criteria)	4	2													
Number of Activated Code Stroke	4	2												2	
Door to CT (Goal less than 30 Mins)	34	19												19	≤ 20 mins
Door to CT Read (median mins)	67	44												44	≤ 45 mins
Door to TPA (median mins)	48	N/A												#DIV/0!	≤ 60 mins
Door to Transfer w/ TPA (median mins)	132	N/A												#DIV/0!	≤ 90 mins
Door to Transfer-Interv Other (median mins)	210	N/A												#DIV/0!	≤ 120 mins
					CARDI	AC									
Total Cardiac Patients	576	N/A												0	
Door to EKG (mins)	13	16												16	≤ 10mns
Aspirin Given (or reason not given documented) (%)	92%	100%												100%	100%
Total STEMI Patients	6	0												0	
STEMI Door to Transfer (median mins)	81	N/A												#DIV/0!	≤ 30mns
Total NSTEMI/ACS Patients	44	5												5	
NSTEMI/ACS Door to Transfer (median mins)	658	N/A												#DIV/0!	

Summit Pacific Medical Center Finance Dashboard Month-to-Date

Key Financial Results used in review of Operational and Financial Performance

Favorable Variance = +

Unfavorable Variance = ()

Lanuary			Month-to-												
January		Actual	Budget	Variance		Var%	Month	Actual		Budget		Variance		Var%	YTD
Gross Operating Revenue	\$	16,863,758	\$16,240,436	\$	623,321	3.8%		\$	16,863,758	\$	16,240,436	\$	623,321	3.8%	
Total Operating Expenses	\$	6,092,690	\$ 6,152,516	\$	(9,286)	(0.1%)		\$	6,092,690	\$	6,152,516	\$	(9,286)	(0.1%)	•
Operating Margin		5.1%	7.4%			(2.3%)	0		5.1%		7.4%			(2.3%)	0
Net Income Margin		13.1%	13.2%			(0.2%)	•		13.1%		13.2%			(0.2%)	•
Days in AR									57		47		(10)	(21.8%)	•
DCOH								85	281		300		-19	(6.2%)	



2024 Income Statement

• MEDICAL CENTER •											V			
January		Actual		Month-			V av97		Antuel		Year-to-			Var97
Gross Patient Revenue		Actual		Budget		Variance	Var%		Actual		Budget	\ 	Variance	Var%
Medicare Revenue	\$	6,840,354	\$	6,551,046	\$	289,308	4.4%	¢	6,840,354	\$	6,551,046	\$	289,308	4.4%
Medicaid Revenue	\$			4,258,840	\$	570,278	13.4%		4.829.118	\$	4,258,840	\$	570,278	13.4%
Other Revenue	\$			5,430,550	\$	(236,264)	(4.4%)	\$	5,194,286	\$	5,430,550	\$	(236,264)	(4.4%)
Total Gross Operating Revenue		16,863,758	_	16,240,436	<u></u> \$	623,321	3.8%	_	16,863,758	<u></u>	16,240,436	\$	623,321	3.8%
	Ą	10,003,730	Ą	10,240,430	Ą	623,321	3.0/0	Ą	10,003,736	Ą	10,240,436	Ą	023,321	3.0/0
Patient Revenue Deductions														
Medicare Contractual	\$			3,944,725	\$	(170,020)	, ,	\$	4,114,745	\$	3,944,725	\$	(170,020)	(4.3%)
Medicaid Contractual	\$		\$		\$	(315,394)	(12.1%)	\$	2,914,390	\$	2,598,996	\$	(315,394)	(12.1%)
Other Contractual	\$		\$	1,808,650	\$	(70,914)		\$	1,879,564	\$	1,808,650	\$	(70,914)	(3.9%)
Bad Debt Expense	\$, -	\$	549,108	\$	(136,934)	(24.9%)		686,042	\$	549,108	\$	(136,934)	(24.9%)
Community Care	\$		\$	134,597	\$	(26,703)	(19.8%)	\$	161,300	\$	134,597	\$	(26,703)	(19.8%)
Administrative Adjustments	\$		\$	82,929	\$	(29,790)	(35.9%)	\$	112,719	\$	82,929	\$	(29,790)	(35.9%)
Total Revenue Deductions	\$			9,119,005	\$	(749,754)	(8.2%)	-	9,868,759	\$	9,119,005	\$	(749,754)	(8.2%)
340B Revenue Net Patient Revenue	<u>\$</u>	71,740 7,066,739	\$	117,990 7,239,422	<u>\$</u> \$	46,251 (172,683)	39.2% (2.4%)		71,740 7,066,739	<u>\$</u>	7,239,422	<u>\$</u> \$	46,251 1,419,326	39.2% 19.6%
	ş	7,000,737	Ą	7,237,422	Ą	(172,003)	(2.4/0)	ş	7,066,737	Ą	7,237,422	ş	1,417,320	17.0/0
Other Revenue	_	005 / /2	•	001.07	•	/F /10:	12.00	•	005 / /5	•	001.07	<u></u>	/F /10:	12.00
Other Operating Income	\$		\$	301,067 301.067	\$	(5,418)	(1.8%)	_	295,648	\$	301,067	\$	(5,418)	(1.8%)
Total Other Revenue	\$		\$		\$	(5,418)	(1.8%)		295,648	\$	301,067	\$	(5,418)	(1.8%)
Net Operating Revenue	\$	7,362,387	\$	7,540,489	\$	(178,101)	(2.4%)	\$	7,362,387	\$	7,540,489	\$	(178,101)	(2.4%)
Operating Expenses														
Salaries & Wages	\$	3,347,394	\$	3,239,703	\$	(107,691)	(3.3%)	\$	3,347,394	\$	3,239,703	\$	(107,691)	(3.3%)
Benefits	\$	836,167	\$	878,094	\$	41,927	4.8%	\$	836,167	\$	878,094	\$	41,927	4.8%
Professional Fees	\$	204,519	\$	130,760	\$	(73,758)	(56.4%)	\$	204,519	\$	130,760	\$	(73,758)	(56.4%)
Supplies	\$	417,715	\$	415,793	\$	(1,922)	(0.5%)	\$	417,715	\$	415,793	\$	(1,922)	(0.5%)
Utilities	\$	50,526	\$	53,450	\$	2,925	5.5%		50,526	\$	53,450	\$	2,925	5.5%
Purchased Services	\$	997,548	\$	1,036,705	\$	39,157	3.8%	\$	997,548	\$	1,036,705	\$	39,157	3.8%
Insurance	\$		\$	43,350	\$	(40)	(0.1%)	\$	43,390	\$	43,350	\$	(40)	(0.1%)
Other Expenses	\$	155,711	\$	305,664	\$	149,953	49.1%		155,711	\$	305,664	\$	149,953	49.1%
Rentals & Leases	\$		\$	48,995	\$	9,276	18.9%		39,720	\$	48,995	\$	9,276	18.9%
Depreciation	\$		\$	301,771	\$	(69,113)	(22.9%)	\$	370,884	\$	301,771	\$	(69,113)	(22.9%)
Total Operating Expenses	\$		\$		\$	(9,286)	(0.1%)	_	6,463,573	\$	6,454,287	\$	(9,286)	(0.1%)
Operating Income (Loss)	\$	898,814	\$	1,086,202	S	(187,388)	(17.3%)		898,814	\$	1,086,202	\$	(187,388)	(17.3%)
	Y	070,014	Ÿ	1,000,202	٧	(107,000)	(17.070)	Ÿ	070,014	Y	1,000,202	٧	(107,000)	(17.070)
Non-Operating Revenue/(Expenses)	¢	17 701	đ	12.000	ď	2 522	07.097	đ	17 701	ď	12.000	æ	2 522	07.007
Tax Revenue Contributions from SPMF	\$		\$	13,088 2,083	\$	3,533 (2,083)	27.0% (100.0%)		16,621	\$	13,088 2,083	\$	3,533 (2,083)	27.0% (100.0%)
Interest Income	\$ \$		\$ \$	424,750	\$ \$	147,855	34.8%		572,605	\$	424,750	\$ \$	147,855	. ,
Interest income Interest Expense	\$ \$			(528,500)		1,536		\$	(526,964)	\$ \$	(528,500)		1,536	34.8% (0.3%)
Total Non-Operating Rev/(Expenses)	<u>₽</u> \$		<u></u> \$	(88,579)		150,841	(170.3%)		62,262	<u> </u> \$	(88,579)		150,841	(170.3%)
			-	• •										
Net Income (Loss)	\$	961,076	\$	997,623	\$	(36,547)	(3.7%)	<u> </u>	961,076	\$	997,623	\$	(36,547)	(3.7%)
METRICS														
Operating Margin		5.1%		7.4%		(2.3%)	(31.7%)		5.1%		7.4%		(2.3%)	(31.7%)
Net Income Margin		13.1%		13.2%		(0.2%)	(1.3%)		13.1%		13.2%		(0.2%)	(1.3%)
Days in AR						, ,	, ,		57		50		(7)	(14.5%)
DCOH									281		300		(19)	(6.2%)
Deduction %		58.5%		56.2%		(2.4%)	(4.2%)		58.5%		56.2%		(2.4%)	(4.2%)
NPSR %		41.5%		43.9%		(2.4%)	(5.4%)		41.5%		43.9%		(2.4%)	(5.4%)
Net Operating Revenue %		43.7%		46.4%		(2.4%)	(6.0%)		43.7%		46.4%		(2.4%)	(6.0%)
Benefits as a % Of SW		25.0%		27.1%		2.1%	7.8%		25.0%		27.1%		2.1%	7.8%
Benefits as a % of SWB		20.0%		21.3%		1.3%	6.3%		20.0%		21.3%		1.3%	6.3%
Paid FTEs (excludes Agency)		366.0		360.0		(6.0)	(1.7%)		354.8		360.0		5.2	1.4%
Salary per FTE	\$		\$	8,999	\$	(147)	(1.6%)	\$	9,434	\$	8,999	\$	(435)	(4.8%)
Hours		64,653		63,787		(867)	(1.4%)		64,472		63,787		(685)	(1.1%)
Avg Hourly Rate	\$	51.77	\$	50.79	\$	(0.98)	(1.9%)	\$	51.92	\$	50.79	\$	(1.13)	(2.2%)



Balance Sheet as of Jan 2024

A and In			12 Month		
Assets	01/31/2024	12/31/2023	Variance	01/31/2023	Variance
Current Assets					
Operating Cash	55,869,945	55,441,189	428,756	51,599,530	4,270,415
MFP Construction Cash	58,511,651	58,239,482	272,692	-	58,784,343
Debt Reserve	8,253,492	8,253,492	-	2,036,008	6,217,484
Accounts Receivables	28,171,094	25,431,929	2,739,164	22,251,899	5,919,195
Less Allow for Uncollectables	(3,750,086)	(4,466,199)	716,113	(3,025,450)	(724,636)
Less Contractual Adjustments	(12,331,016)	(10,252,105)	(2,078,911)	(9,728,312)	(2,602,704)
Accounts Receivable - Net	12,089,992	10,713,625	1,376,366	9,498,137	2,591,855
Taxes Receivable	32,882	42,541	(9,659)	48,747	(15,865)
Other Receivables	2,627,159	4,203,490	(1,576,331)	2,915,300	(288,142)
Inventory	991,895	964,979	26,917	818,236	173,659
Prepaid Expenses	847,236	821,952	25,285	864,160	(16,923)
Total Current Assets	139,496,945	138,952,918	544,026	67,780,118	71,716,827
Property, Plant and Equipment					
Land	1,652,029	1,652,029	-	1,652,029	-
Land Improvements	4,527,505	4,527,505	-	4,473,365	54,139
Buildings	47,402,703	47,402,703	-	44,996,173	2,406,531
Equipment	19,125,386	18,961,209	164,177	16,104,435	3,020,950
Construction In Progress	5,199,065	5,028,125	170,940	4,448,660	750,405
Less Accumulated Depreciation	(32,683,720)	(32,312,837)	(370,884)	(28,152,746)	(4,530,974)
Total Other Assets			-		-
Total Assets	184,719,912	184,211,652	508,259	111,302,033	73,417,878



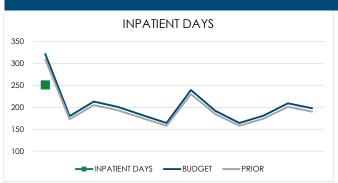
Balance Sheet as of Jan 2024

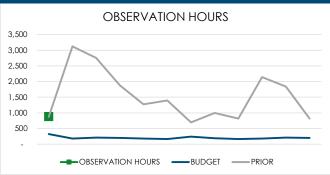
	1 Month							
Liabilities	01/31/2024	12/31/2023	Variance	01/31/2023	Variance			
Current Liabilities								
Accounts Payable	1,325,872	1,148,600	177,272	538,886	786,987			
Other Payables	595,818	1,728,424	(1,132,606)	909,214	(313,396)			
Payroll and Related Liabilities	4,881,207	4,416,665	464,542	4,084,688	796,520			
Interest Payable	1,180,143	715,545	464,598	139,036	1,041,107			
Third Party Settlement Payable	1,170,141	1,550,000	(379,859)	406,795	763,346			
Other Current Liabilities	1,497,364	1,507,869	(10,505)	1,583,160	(85,796)			
Current Maturities of LTD	1,383,664	1,383,664	-	1,383,664	-			
Total Current Liabilities	12,034,210	12,450,768	(416,558)	9,045,443	2,988,767			
Non Current Liabilities								
Current Maturities of LTD	(1,383,664)	(1,383,664)	-	(1,383,664)	-			
Long Term Debt	109,027,328	109,063,587	(36,259)	46,038,377	62,988,951			
Total Non Current Liabilities	107,643,664	107,679,923	(36,259)	44,654,713	62,988,951			
Total Liabilities	119,677,873	120,130,690	(452,817)	53,700,155	65,977,718			
Net Assets								
Unrestricted Fund Balance	61,592,750	64,080,962	(2,488,212)	55,989,130	5,603,620			
YTD Excess of Revenues	3,449,288	-	3,449,288	1,612,748	1,836,540			
Total Net Assets	65,042,038	64,080,962	961,076	57,601,878	7,440,160			
Total Liabilities and Net Assets	184,719,912	184,211,652	508,259	111,302,033	73,417,878			

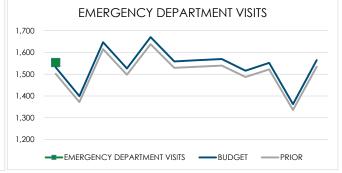
Statistic	JAN
INPATIENT DAYS	251
BUDGET	321
PRIOR	309
OBSERVATION HOURS	880
BUDGET	1,065
PRIOR	871
EMERGENCY DEPARTMENT VISITS	1,553
BUDGET	1,531
PRIOR	1,502
GI CASES	93
BUDGET	110
PRIOR	97
SLEEP LAB	28
BUDGET	26
LAB TESTS	18,057
BUDGET	21,921
PRIOR	19,321
XRAY EXAMS	1,541
BUDGET	1,305
PRIOR	1,323
CT EXAMS	616
BUDGET	470
PRIOR	501
ULTRASOUND EXAMS	360
BUDGET	248
PRIOR	276
MRI EXAMS	83
BUDGET	70
PRIOR	82
THERAPY TREATMENTS	1,018
BUDGET	712
PRIOR	650
URGENT CARE VISITS	1,429
URGENT CARE BUDGET	1,046
URGENT CARE PRIOR	1,110
KELSEY CLINIC VISITS	382
BUDGET	388
PRIOR	-
MCCLEARY HEALTHCARE CLINIC VISITS	737
BUDGET	798
PRIOR	716
SUMMIT PACIFIC HEALTH CLINIC VISITS	758
BUDGET	899
PRIOR	- 0.450
WELLNESS CENTER VISITS	2,658
BUDGET	3,298
PRIOR CUANCE VISITE	3,109
CLINICS VISITS	4,535
CLINICS BUDGET	5,383
CLINICS PRIOR	3,825
OPERATING MARGIN GOAL	12.7%
PRIOR	4.0%
DAYS IN AR	26.6% 57
GOAL	50
PRIOR	50
DAYS CASH ON HAND	281
GOAL	300
PRIOR	296
FTES TOTAL PAID	366.0
FTES INCLUDING AGENCY	396.3
BUDGET	380.3
PRIOR	294.7
I KIOK	L74./

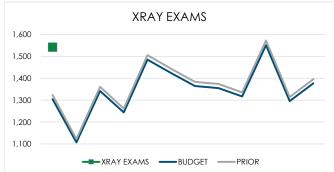


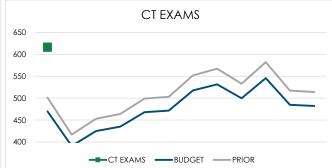
2024 STATISTIC GRAPHS

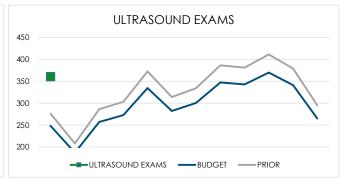


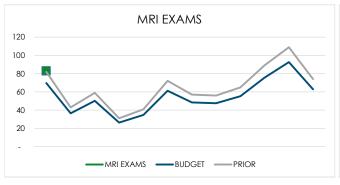


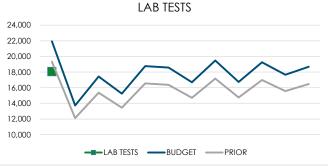


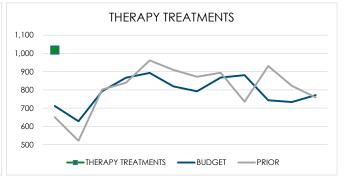














2024 STATISTIC GRAPHS

