

Agenda

1. **1:00 – Call to Order**
 - a. Introductions as needed
 - b. Business from audience
2. **1:05 – Consent Agenda – See separate Consent Agenda – Action (vote)**
3. **1:08 – Approval of Minutes – Action (vote)**
 - a. November 26, 2024 Regular Meeting
4. **1:10 - Patient Story – Jennifer Burkhardt, CTLO – Info**
5. **1:13 – 2025 Strategic Plan– Josh Martin – Info**
6. **1:33 – S&P Rating Review Presentation – Info**
7. **Executive Reports**
 - a. **1:50** – Quality Report and Dashboard, Tori Bernier – *Info*
 - b. **2:05** – Finance Report, Rachel Brown and Leslie Hiebert – *Info*
 - c. **2:20** – Advocacy Committee, Josh Martin – *(as needed)*
 - d. **2:35** – Executive Report, Josh Martin – *Info*
8. **Commissioner Business**
 - a. **2:50** – Medical Staff Privileges – *Action (vote)*
 - i. *Bailey Walczak, DNP-Ambulatory Family Medicine- Reappointment*
 - ii. *Andrew Burton, PharmD- Pharmacist-Reappointment*
 - iii. *Rebecca Bishop, MD- Emergency Medicine- Reappointment*
 - iv. *John Hoyt, MD- Pathology- Reappointment*
 - v. *Ryan Fortna, MD- Pathology- Reappointment*
 - vi. *Mariam Shehata, MD-Radiology- Initial Appointment*
 - b. **2:55** – DZA Engagement Letter
 - c. **3:00** – Resolution 2024-14 Regular Meeting Schedule– *Action (vote)*
 - d. **3:00** – RN Contract Ratification – *Action (vote)*
 - e. **3:05** – Board Discussion, Kevin Bossard – *Discussion*
 - i. **RUPRI articles**
 - f. **3:15** – Upcoming Events, Andrew Hooper
 - g. **3:20** – Meeting Evaluation, Andrew Hooper
9. **3:25 – Adjourn – Action (vote)**

Upcoming events: - **BOLD events indicate desired Commissioner attendance.**

- WSHA Advocacy Days | Olympia | February 11, 2025
- CEO Evaluation Special Meeting | ~ February 19, 2025 AM

- AHA Conference | San Antonio, TX | February 22-26, 2025
- AWP/PHD and WSHA Rural Health Conference | Lake Chelan | June 22-25, 2025
- Board Strategic Planning Retreat | Union, WA | August 5-6, 2025

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:	
November 2024	
Description	Amount
Payroll	\$ 2,832,509
A/P Operations	\$ 3,582,154
A/P Capital	\$ 5,329,133
Community Care	\$ 404,417
Bad Debt	\$ 618,334
Property Tax Credit	\$ -
Total	\$ 12,766,547



BOARD OF COMMISSIONERS REGULAR MEETING MINUTES

November 26, 2024

AGENDA	DISCUSSION/CONCLUSIONS	ACTIONS/FOLLOW-UP
<p>CALL TO ORDER</p>	<p>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 1:00 pm.</p> <p>Commissioners present: Gary Thumser, Georgette Hiles, Carolyn Wescott, Andrew Hooper, Kevin Bossard</p> <p>Present: Josh Martin, Tori Bernier, Jennifer Burkhardt, Jori Stott, Cinthya Schuder, Brad Thomas, Jenny Prentice, Jennifer Brackeen, Wendy Hawkins, Morgan Lundy, Rachael Schermer, Tracy Kateley, Andrew Burton, Sharlene Higa, Lynn Fifield, and Diana Kolar</p>	
<p>BUSINESS FROM AUDIENCE</p>	<p><u>Business from Audience</u></p> <ul style="list-style-type: none"> • NA 	
<p>CONSENT AGENDA</p>		<p><i>Commissioner Thumser made a motion to approve the consent agenda. Commissioner Bossard seconded the motion. All voted in favor.</i></p>
<p>MINUTES</p>		<p><i>Commissioner Wescott made a motion to approve the Regular Board October 23, 2024 minutes and the Special Budget Hearing October 23, 2024 minutes. Commissioner Hiles seconded the motion. All voted in favor.</i></p>
<p>PATIENT STORY</p>	<ul style="list-style-type: none"> • CTLO Burkhardt shared patient story regarding care provided to pediatric patient by Baily Walczak, DNP in Urgent Care (see patient Story for more details) • CNO Bernier Shared Walczak received the Daisy Award this quarter. She started with Summit Pacific as a CNA and has recently been recently received Doctorate in Nursing and serves a provider in the Urgent Care. 	



BOARD OF COMMISSIONERS REGULAR MEETING MINUTES

November 26, 2024

<p>MED STAFF PRIVILEGING PRESENTATION</p>	<ul style="list-style-type: none"> • CEO Martin presented on ACU redeployment (see presentation for more details) • CNO Bernier gave an update on "Zone H" and a 12 month lookahead. Summit plans to move ACU into new unit August 2025. • CEO Martin reviewed Hospital expansion floor plans. • Discussion regarding Summit's plans to communicate with our community regarding care interruptions. Marketing is working with the construction team regarding a communication plan regarding care impacts. There will be lots of signage and media coverage of project impacts. • The new parking lot will be open December 9, 2024. There will be 65 new spots accessed by Oakhurst until it can be accessed by the Blue House pending culvert updates and construction. Funding will be out of pocket since we do not qualify for available grants. Summit will likely go forward with construction in January and funds will likely come out of contingency at a price of roughly \$300,000. • The city has plans of putting in a roundabout at the intersection of E Main Street and Highway 12 several years from now. • CEO Martin reviewed population data and projected volumes. (See presentation for more details). • CEO Martin shared plans for current ACU space (see presentation for more details). • Commissioner Thumser asked if there are plans for flexing the future to provide surgical. There is no current plans to provide surgery, but if we did we would likely do an outpatient model outside of the hospital to match the current industry. • Discussion regarding how Summit communicates with our patients and community. The reader board will not be operational until May 2026. • Commissioner Wescott shared excitement around the opening a wound care program. Many community members will benefit from this program. 	
<p>QUALITY REPORT</p>	<ul style="list-style-type: none"> • CNO Bernier reviewed the Quality report and Dashboard (See presentation for more details). • Summit Pacific has stood up an internal auditing process. This group has been very effective and provided needed solutions quickly. • CNO Bernier reviewed their findings are categorized by: noteworthy effort, opportunities for improvement, and non-conformities. • Discussion regarding terminology Medication variances include near misses and incorrect vaccination dose. • Congratulations Crisalyn Spoon for winning Hand Hygiene trophy this month. There is a new Infection Prevention employee Alyssa Cooke. 	



BOARD OF COMMISSIONERS REGULAR MEETING MINUTES

November 26, 2024

	<ul style="list-style-type: none"> • October was the highest volume for Therapy YTD. There has been a 10% test increase for lab services in 2024. • Food and Nutrition services has been hit hard with staffing and their volumes remain high. • ED volumes remain steady. LWBS remains in good position even with high patient volumes. • ACU volumes have also remained steady. There was a dip in volume in October, but observations were higher. • Discussion regarding mortality rates. There was only one in October. Question raised discrepancy in report that stated there were two. Quality will make update to fix discrepancy. • The Kelsey Clinic has been working diligently to improve specialty service access. • Discussion regarding the reason for the increase in the blood culture contamination rate. The leaders are doing a deep dive to identify cause. • The ED is working on two projects: Sepsis and violence prevention toward caregivers. 	
<p>FINANCE REPORT</p>	<ul style="list-style-type: none"> • Rachel Brown, Finance Director gave Finance Presentation (see presentation for more details) . • Operation variance is due primarily to agency staffing. • Days in AR were at 51. • DCOH went down ten days primarily due to increase in operating costs. • Finance is working on cash flow projection to forecast where we will be end of year. • Summit is over budget on FTES and labor costs. • Volumes are much higher resulting in needing additional staff. • There needs to be improvements to diminish the usage of travelers. • ED at one point had a high of 17 travelers and are now at five. • DI traditionally did not have travelers, but have needed some in specialty areas. • Discussion regarding Cost Report impacts. 	
<p>ADVOCACY COMMITTEE</p>	<ul style="list-style-type: none"> • CEO Martin shared an update on our Advocacy Committee meeting. • Legislators representing our District requested to meet with Summit leadership following this meeting. • There is a plan to get to WSHA State Advocacy this year. • Commissioner Hiles shared experience at GGHI meet the commissioners business Forum. 	



BOARD OF COMMISSIONERS REGULAR MEETING MINUTES

November 26, 2024

	<ul style="list-style-type: none"> • CEO Martin shared thank you letter to Commissioner Warne and Commissioner Pine for their public service. • CEO Martin requested commission to sign thank you letter for their service (see letter for more details). • Summit Pacific was selected as one of four finalists for the AHA Rural Hospital Leadership Award. The winner will be announced at the conference in San Antonio, Texas in February. AHA will be covering the cost of one registration. • Summit Pacific plans to partner with city for roundabout in 2031. Summit plans to bring together city council and board members to address vested interests. 	
<p>EXECUTIVE REPORT</p>	<ul style="list-style-type: none"> • CEO Martin reviewed Executive Report (See report for more details). • CTLO Burkhardt shared updates on open enrollment and how HR highlighted benefits to employees. Open enrollment has moved to an electronic process this year. • Our sleep Medicine program received its accreditation from the American Association of Sleep Medicine. • Brad Thomas provided an update on our Saving Lives Campaign and achieving campaign goals. • The Foundation has raised \$3.5 million for the Saving Lives campaign and plans to keep moving forward. April 9, 2025 will be a large donor appreciation event. • The Foundation will be meeting with our consultant to revise our Capital Campaign. • CEO Martin was recently in Washington DC with group RUPRI. This group researches different programs to advise legislation. CEO Martin was only one of two hospital administrators represented in this group. • Commissioner Bossard requested we might have a future topic • of forecasted impacts with change in administration and legislation. • Jori Stott to add RUPRI articles at the next Board meeting. 	
<p>COMMISSIONER BUSINESS</p>	<p>Medical Staff Privileges</p> <ul style="list-style-type: none"> • <i>Phillip Ervin, CRNA-Out Patient Procedures-Initial Appointment</i> • <i>Ayan Rage, MD- Gastroenterology-Initial Appointment</i> • <i>Robert Johansen, PA-Sleep-Initial Appointment</i> • <i>Gurpreet Dhillon, MD-Radiology- Initial Appointment</i> • <i>Oksana Prychyna, MD-Radiology-Initial Appointment</i> • <i>Scott Zelasko, MD-Radiology-Initial Appointment</i> • <i>David Gimarc, MD-Radiology-Initial Appointment</i> 	<p><i>Commissioner Hiles made a motion to approve Medical Staff privileges. Commissioner Wescott seconded the motion. All voted in favor.</i></p> <p><i>Commissioner Hiles made a motion to approve Resolution</i></p>



BOARD OF COMMISSIONERS REGULAR MEETING MINUTES

November 26, 2024

	<ul style="list-style-type: none"> • <i>Thomas Griffith, ND-Active Status</i> <p>Resolution 2024-12 Levy Limit</p> <ul style="list-style-type: none"> • There was no discussion. <p>Tech Service Collective Bargaining Agreement</p> <ul style="list-style-type: none"> • CTLO Burkhardt shared after five months of Union Negotiations Summit reached tentative agreement with UFCW for service and tech contract. • CTLO Burkhardt requested approval of contract and shared highlights. • The agreement has a market increase and there was an addition of education and preceptor pay. • The union is voting today. Summit will know by this evening if the contract is ratified. • The RN contract will be brought forward to the next meeting. <p>Medical Staff Bylaws</p> <ul style="list-style-type: none"> • There was no discussion. <p>Board Discussion</p> <ul style="list-style-type: none"> • Commissioner Hiles provided an update on NRHA training takeaways. There were three trainings: Advocacy and Community, Leadership, and Board Benchmarking. • There are three more classes left. • The dashboard training was interesting and how to make impacts and insightful on the cause and effect factors. • CEO Martin shared learnings at RUPRI how we get Boards to be high functioning and high functioning leadership. The Rural Governance NRHA Conference plans to focus on these learnings. There needs to be more interest from members for this education. • Discussion regarding revision for Community Health Needs Assessments. CEO Martin volunteered to use SPMC as a pilot to partner with NRHA to improve this process. <p>Upcoming Events</p> <ul style="list-style-type: none"> • Holiday events Harbor lights and Summit Fights Hunger are coming up. • The Light Show is selling out fast. 	<p>2024-13 Levy Limit. <i>Commissioner Bossard seconded the motion. All voted in favor.</i></p> <p><i>Commissioner Hiles made a motion to approve Tech Service Collective Bargaining Agreement. Commissioner Wescott seconded the motion. All voted in favor.</i></p> <p><i>Commissioner Thumser made a motion to approve Medical Staff Bylaws. Commissioner Bossard seconded the motion. All voted in favor.</i></p>
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BOARD OF COMMISSIONERS REGULAR MEETING MINUTES

November 26, 2024

	<p>Meeting Evaluations</p> <ul style="list-style-type: none">• In the packet there is an article regarding Medicare Advantage and how it affects the hospital. The continued challenge seen is a considerable denial rate for these plans. There is a plan to get in front of state and federal legislators.• Summit will need to do some financial impact study on Medicare Advantage Plans.• Summit is still in Incident command for national IV fluid shortages. Baxter plans to be back to normal operations by February 2025.• Discussion regarding how commissioners feel about day time meetings. Commissioners shared it has been valuable to have leaders present. Question raised if there will be an increase in public attendance over time.	
ADJOURNMENT	The regular session of the Board of Commissioner's meeting adjourned at 3:01 pm.	<i>Commissioner Bossard made a motion to adjourn the meeting. Commissioner Hiles seconded the motion. All voted in favor.</i>



Recording Secretary



Board Secretary

Monthly Dashboard

2024 Income Statement Summary

Favorable Variance = + | Unfavorable Variance = ()

November		Year to Date				
		Actual	Budget	Variance	Var%	
+	Gross Patient Revenue	\$ 185,612,040	\$ 174,872,282	\$ 10,739,758	6.1%	😊
-	Revenue Deductions	\$ 110,589,162	\$ 98,190,786	\$ (12,398,376)	(12.6%)	
+	340B Revenue	\$ 687,766	\$ 1,254,990	\$ (567,224)	(45.2%)	
=	Net Patient Revenue	\$ 75,710,643	\$ 77,936,485	\$ (2,225,842)	(2.9%)	
+	Other Operating Revenue	\$ 5,975,545	\$ 3,318,735	\$ 2,656,810	80.1%	
=	Net Operating Revenue	\$ 81,686,188	\$ 81,255,220	\$ 430,968	0.5%	
-	Total Operating Expenses	\$ 73,680,673	\$ 71,934,115	\$ (1,746,559)	(2.4%)	😐
+/-	Non-Operating Rev / (Expenses)	\$ 1,337,210	\$ (273,846)	\$ 1,611,057	(588.3%)	
=	Net Income (Loss)	\$ 9,342,724	\$ 9,047,259	\$ 295,466	3.3%	😊

YTD Financial Highlights

Salaries & Wages & Benefits
\$1.1M under budget

Purchased Services
\$3.5M over budget (Agency Costs)

Interest Income/Expense
Earning 5.11% APR
\$1.1M expense exceeds income

Monthly Dashboard

2024 Finance Summary

Key Financial Results to Review Operational and Financial Performance

Favorable Variance = + | Unfavorable Variance = ()

November	Year to Date				
	Actual	Goal/Budget	Variance	Var%	
Days in AR	53	50	(3)	(5.2%)	☹️
DCOH	289	300	(11)	(3.8%)	😐
Operating Margin	2.7%	4.3%	(1.6%)		😐
Net Income Margin	11.4%	11.1%	0.3%		😊
Net Patient Revenue per FTE	\$ 187,179	\$ 202,283	\$ (15,104)	(7.5%)	☹️
Labor Cost per FTE	\$ 126,050	\$ 126,149	\$ 100	0.1%	😊
Non Labor Cost per FTE	\$ 101	\$ 110	\$ 9	8.4%	😊
FTEs	377.7	375.0	(2.7)	(0.7%)	😐
FTEs including Agency	404.5	385.3	(19.2)	(5.0%)	☹️

November	Month to Date				Year to Date			
	Actual	Budget	Variance	Var%	Actual	Budget	Variance	Var%
Gross Patient Revenue								
Medicare Revenue	\$ 7,029,922	\$ 6,355,990	\$ 673,932	10.6%	\$ 74,016,223	\$ 69,011,679	\$ 5,004,544	7.3%
Medicaid Revenue	\$ 3,702,982	\$ 4,190,512	\$ (487,531)	(11.6%)	\$ 47,263,884	\$ 47,183,383	\$ 80,500	0.2%
Other Revenue	\$ 5,733,025	\$ 5,338,380	\$ 394,645	7.4%	\$ 64,331,933	\$ 58,677,219	\$ 5,654,714	9.6%
Total Gross Patient Revenue	\$ 16,465,929	\$ 15,884,883	\$ 581,046	3.7%	\$ 185,612,040	\$ 174,872,282	\$ 10,739,758	6.1%
Patient Revenue Deductions								
Medicare Contractual	\$ 3,995,846	\$ 3,858,363	\$ (137,483)	(3.6%)	\$ 46,327,022	\$ 42,475,652	\$ (3,851,371)	(9.1%)
Medicaid Contractual	\$ 2,638,694	\$ 2,542,096	\$ (96,598)	(3.8%)	\$ 29,352,959	\$ 27,985,230	\$ (1,367,728)	(4.9%)
Other Contractual	\$ 2,840,276	\$ 1,769,053	\$ (1,071,223)	(60.6%)	\$ 24,291,084	\$ 19,475,014	\$ (4,816,071)	(24.7%)
Bad Debt Expense	\$ 594,329	\$ 537,086	\$ (57,243)	(10.7%)	\$ 7,570,516	\$ 5,912,637	\$ (1,657,880)	(28.0%)
Community Care	\$ 404,417	\$ 131,650	\$ (272,767)	(207.2%)	\$ 1,669,639	\$ 1,449,300	\$ (220,338)	(15.2%)
Administrative Adjustments	\$ 53,202	\$ 81,113	\$ 27,911	34.4%	\$ 1,377,942	\$ 892,953	\$ (484,989)	(54.3%)
Total Revenue Deductions	\$ 10,526,764	\$ 8,919,362	\$ (1,607,402)	(18.0%)	\$ 110,589,162	\$ 98,190,786	\$ (12,398,376)	(12.6%)
340B Revenue	\$ 14,426	\$ 107,264	\$ (92,838)	(86.6%)	\$ 687,766	\$ 1,254,990	\$ (567,224)	(45.2%)
Net Patient Revenue	\$ 5,953,590	\$ 7,072,785	\$ (1,119,195)	(15.8%)	\$ 75,710,643	\$ 77,936,485	\$ (2,225,842)	(2.9%)
Other Revenue								
Other Operating Income	\$ 454,218	\$ 301,067	\$ 153,151	50.9%	\$ 5,975,545	\$ 3,318,735	\$ 2,656,810	80.1%
Total Other Revenue	\$ 454,218	\$ 301,067	\$ 153,151	50.9%	\$ 5,975,545	\$ 3,318,735	\$ 2,656,810	80.1%
Net Operating Revenue	\$ 6,407,809	\$ 7,373,852	\$ (966,043)	(13.1%)	\$ 81,686,188	\$ 81,255,220	\$ 430,968	0.5%
Operating Expenses								
Salaries & Wages	\$ 3,193,999	\$ 3,478,988	\$ 284,990	8.2%	\$ 36,312,581	\$ 36,750,784	\$ 438,203	1.2%
Benefits	\$ 660,581	\$ 878,094	\$ 217,513	24.8%	\$ 8,954,341	\$ 9,659,038	\$ 704,697	7.3%
Professional Fees	\$ 173,926	\$ 221,909	\$ 47,983	21.6%	\$ 1,843,844	\$ 1,808,703	\$ (35,141)	(1.9%)
Supplies	\$ 355,753	\$ 368,539	\$ 12,787	3.5%	\$ 4,751,991	\$ 4,177,899	\$ (574,093)	(13.7%)
Utilities	\$ 47,392	\$ 48,640	\$ 1,248	2.6%	\$ 587,336	\$ 568,403	\$ (18,932)	(3.3%)
Purchased Services	\$ 1,075,618	\$ 960,696	\$ (114,922)	(12.0%)	\$ 13,044,805	\$ 10,772,148	\$ (2,272,658)	(21.1%)
Insurance	\$ (4,784)	\$ 43,350	\$ 48,134	111.0%	\$ 523,096	\$ 476,850	\$ (46,246)	(9.7%)
Other Expenses	\$ 369,076	\$ 284,056	\$ (85,020)	(29.9%)	\$ 3,230,759	\$ 3,228,465	\$ (2,294)	(0.1%)
Rentals & Leases	\$ 36,697	\$ 57,887	\$ 21,189	36.6%	\$ 463,875	\$ 432,291	\$ (31,584)	(7.3%)
Depreciation	\$ 362,014	\$ 381,626	\$ 19,612	5.1%	\$ 3,968,045	\$ 4,059,535	\$ 91,490	2.3%
Total Operating Expenses	\$ 6,270,273	\$ 6,723,787	\$ 453,514	6.7%	\$ 73,680,673	\$ 71,934,115	\$ (1,746,559)	(2.4%)
Operating Income (Loss)	\$ 137,536	\$ 650,065	\$ (512,530)	(78.8%)	\$ 8,005,514	\$ 9,321,105	\$ (1,315,591)	(14.1%)
Non-Operating Revenue/(Expenses)								
Tax Revenue	\$ 91,892	\$ 64,199	\$ 27,694	43.1%	\$ 1,137,856	\$ 844,487	\$ 293,369	34.7%
Contributions from SPMF	\$ -	\$ 2,083	\$ (2,083)	(100.0%)	\$ 181,764	\$ 22,917	\$ 158,848	693.2%
Interest Income	\$ 468,990	\$ 424,750	\$ 44,240	10.4%	\$ 5,792,573	\$ 4,672,250	\$ 1,120,323	24.0%
Interest Expense	\$ (516,326)	\$ (528,500)	\$ 12,174	(2.3%)	\$ (5,774,983)	\$ (5,813,500)	\$ 38,517	(0.7%)
Total Non-Operating Rev/(Expenses)	\$ 44,557	\$ (37,468)	\$ 82,025	(218.9%)	\$ 1,337,210	\$ (273,846)	\$ 1,611,057	(588.3%)
Net Income (Loss)	\$ 182,093	\$ 612,597	\$ (430,505)	(70.3%)	\$ 9,342,724	\$ 9,047,259	\$ 295,466	3.3%

METRICS

Operating Margin	(5.9%)	1.6%	(7.6%)	(458.6%)	2.7%	4.3%	(1.6%)	(36.7%)
Net Income Margin	2.8%	8.3%	(5.5%)	(65.8%)	11.4%	11.1%	0.3%	2.7%
Days in AR					53	50	(3)	(5.2%)
DCOH					289	300	(11)	(3.8%)
Deduction %	63.9%	56.2%	(7.8%)	(13.9%)	59.6%	56.2%	(3.4%)	(6.1%)
NPSR %	36.1%	43.9%	(7.8%)	(17.7%)	40.4%	43.9%	(3.4%)	(7.8%)
Net Operating Revenue %	38.9%	46.4%	(7.5%)	(16.2%)	44.0%	46.5%	(2.5%)	(5.3%)
Benefits as a % Of SW	20.7%	25.2%	4.6%	18.1%	24.7%	26.3%	1.6%	6.2%
Benefits as a % of SWB	17.1%	20.2%	3.0%	15.0%	19.8%	20.8%	1.0%	5.0%
Paid FTEs (excludes Agency)	386.3	390.0	3.7	0.9%	377.7	375.0	(2.7)	(0.7%)
Salary per FTE	\$ 8,268	\$ 8,920	\$ 652	7.3%	\$ 96,150	\$ 98,003	\$ 1,853	1.9%
Hours	61,808	66,845	5,037	7.5%	583,935	715,765	131,830	18.4%
Avg Hourly Rate	\$ 51.68	\$ 52.05	\$ 0.37	0.7%	\$ 62.19	\$ 51.34	\$ (10.84)	(21.1%)
Total Agency FTEs	30.3	16.9	(13.5)	(79.8%)	26.8	10.3	(16.5)	(160.7%)
Agency Staffing Expense	\$ 412,763	\$ 229,577	\$ (183,186)	(79.8%)	\$ 5,717,940	\$ 2,193,582	\$ (3,524,359)	(160.7%)
Net Patient Revenue per FTE (\$K)	\$ 14,290	\$ 17,384	\$ 3,093	17.8%	\$ 187,179	\$ 202,283	\$ (15,104)	(7.5%)
Labor Cost per FTE (\$K)	\$ 10,243	\$ 11,046	\$ 803	7.3%	\$ 126,050	\$ 126,149	\$ 99	0.1%
Non Labor Cost per \$1K Gross Rev (\$K)	\$ 100	\$ 116	\$ 17	14.3%	\$ 101	\$ 110	\$ 9	8.4%

Balance Sheet as of November 2024

Assets	10/31/2024	09/30/2024	1 Month Variance	10/31/2023	12 Month Variance
Current Assets					
Operating Cash	63,111,296	59,233,146	3,878,149	53,551,218	9,560,078
Self-Insured Reserve	1,957,500	1,957,500	-	10	1,957,490
Total Operating Cash	65,068,796	61,190,646	3,878,149	53,551,228	11,517,568
MFP Construction Cash	38,234,941	44,048,343	(5,813,402)	58,239,482	(20,004,541)
Debt Reserve	8,253,492	8,253,492	-	8,253,492	-
Total Restricted Cash	46,488,433	52,301,835	(5,813,402)	66,492,974	(20,004,541)
Accounts Receivables	29,683,550	29,220,305	463,245	28,058,920	1,624,630
Less Allow for Uncollectables	(3,780,333)	(3,741,178)	(39,155)	(5,963,866)	2,183,533
Less Contractual Adjustments	(12,433,350)	(11,467,269)	(966,081)	(10,716,548)	(1,716,802)
Accounts Receivable - Net	13,469,867	14,011,858	(541,991)	11,378,506	2,091,361
Taxes Receivable	108,153	323,055	(214,902)	74,971	33,182
Other Receivables	3,013,655	3,772,327	(758,672)	2,772,755	240,901
Inventory	1,180,111	1,249,435	(69,325)	905,346	274,765
Prepaid Expenses	1,006,513	911,034	95,478	863,083	143,430
Total Current Assets	130,335,528	133,760,191	(3,424,663)	136,038,863	(5,703,335)
Property, Plant and Equipment					
Land	1,652,029	1,652,029	-	1,652,029	-
Land Improvements	4,571,049	4,571,049	-	4,527,505	43,544
Buildings	47,846,613	47,846,488	125	47,402,703	443,910
Equipment	22,641,133	22,561,409	79,724	19,054,006	3,587,128
Construction In Progress	23,328,939	23,299,806	29,133	3,949,189	19,379,750
Less Accumulated Depreciation	(36,878,334)	(36,516,320)	(362,014)	(31,909,993)	(4,968,341)
Property, Plant and Equipment - Net	63,161,429	63,414,462	(253,033)	44,675,438	18,485,991
Total Assets	193,496,957	197,174,653	(3,677,696)	180,714,301	12,782,656

Balance Sheet as of November 2024

Liabilities	10/31/2024	09/30/2024	1 Month Variance	10/31/2023	12 Month Variance
Current Liabilities					
Accounts Payable	933,576	5,578,720	(4,645,144)	1,052,714	(119,138)
Other Payables	942,553	866,935	75,618	1,066,399	(123,846)
Payroll and Related Liabilities	4,340,307	4,055,817	284,490	4,104,272	236,035
Interest Payable	2,555,693	2,092,992	462,701	41,268	2,514,425
Third Party Settlement Payable	0	0	-	(289,275)	289,275
Other Current Liabilities	1,370,346	1,370,346	-	1,424,393	(54,047)
Current Maturities of LTD	1,383,664	1,383,664	-	1,383,664	-
Total Current Liabilities	11,526,140	15,348,475	(3,822,335)	8,783,435	2,742,704
Non Current Liabilities					
Current Maturities of LTD	(1,383,664)	(1,383,664)	-	(1,383,664)	-
Long Term Debt	111,143,170	111,180,623	(37,454)	109,099,729	2,043,441
Total Non Current Liabilities	109,759,506	109,796,959	(37,454)	107,716,065	2,043,441
Total Liabilities	121,285,645	125,145,434	(3,859,789)	116,499,500	4,786,145
Net Assets					
Unrestricted Fund Balance	9,349,171	9,167,078	182,093	8,225,671	1,123,499
YTD Excess of Revenues	62,862,141	62,862,141	-	55,989,130	6,873,011
Total Net Assets	72,211,312	72,029,219	182,093	64,214,801	7,996,511
Total Liabilities and Net Assets	193,496,957	197,174,653	(3,677,696)	180,714,301	12,782,656

November

Current Month

Year to Date

Cash Flows From Operating Activities

Net Income (Loss)	\$	182,093	\$	9,349,171
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities:				
Depreciation	\$	362,014	\$	3,968,045
(Increase)/Decrease in Net Patient Accounts Receivable	\$	541,991	\$	(2,756,240)
(Increase)/Decrease in Taxes Receivable	\$	214,902	\$	(65,612)
(Increase)/Decrease in Other Receivables	\$	758,672	\$	2,058,387
(Increase)/Decrease in Inventories	\$	69,325	\$	(215,132)
(Increase)/Decrease in Pre-Paid Expenses	\$	(95,478)	\$	(184,561)
Increase/(Decrease) in Accounts Payable	\$	(4,645,144)	\$	(241,874)
Increase/(Decrease) in Other Payables	\$	75,618	\$	(975,784)
Increase/(Decrease) in Accrued Payroll and Benefits	\$	284,490	\$	(368,790)
Increase/(Decrease) in Interest Payable	\$	462,701	\$	1,840,148
Increase/(Decrease) in Third Party Payers	\$	-	\$	(1,744,844)
Increase/(Decrease) in Other Current Liabilities	\$	-	\$	74,369
Net Cash Provided by Operating Activities	\$	(1,788,817)	\$	10,737,284

Cash Flows from Investing Activities

Purchase of Property, Plant and Equipment	\$	(108,982)	\$	(20,123,587)
(Increase)/Decrease in Other Limited Use Assets	\$	-	\$	-
Net Cash Used by Investing Activities	\$	(108,982)	\$	(20,123,587)

Cash Flows from Financing Activities

Increase/(Decrease) in Other Long Term Liabilities	\$	(37,454)	\$	(1,207,716)
Net Cash Used for Financing Activities	\$	(37,454)	\$	(1,207,716)

MFP Construction Fund	\$	5,813,402	\$	20,276,710
Debt Reserve Fund	\$	-	\$	(0)
(Increase)/Decrease in Net Restricted Assets	\$	5,813,402	\$	20,276,710

Net Increase/(Decrease) in Cash	\$	3,878,149	\$	9,682,690
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Cash, Beginning of Period	\$	61,190,646	\$	55,386,106
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Cash, End of Period	\$	65,068,796	\$	65,068,796
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