

GOVERNING BOARD MEETING

September 29, 2022 1:30 p.m.

(In person and Via Webex Conferencing)

Sprowel Creek Campus, Rm 106 286 Sprowel Creek Road Garberville, CA 95542



Governing Board

Date:	Thursday September 29, 2022
Time:	1:30 p.m.
Location:	Sprowel Creek Campus and Via Webex Conferencing
Facilitator:	Board President, Corinne Stromstad

Link: https://shchd.webex.com/shchd/j.php?MTID=md6c6ee4e3259fac45cadf8463cd89a88

Agenda - Revised

Time*	Page	Item
1:30 p.m.		A. Call to Order
		B. Public Comment See below for Public Comment Guidelines
1:35 p.m.		C. Board Member Comments Board members are invited to address issues not on the agenda and to submit items within the subject jurisdiction of the Board for future consideration. Please limit individual comments to three minutes.
1:40 p.m.		D. Announcements
1:45 p.m.	1-25	E. Consent Agenda
		 Approval of Agenda Approval of Previous Meeting Minutes a. Special Governing Board Meeting, July 22, 2022 b. Governing Board Meeting Minutes, July 29, 2022 c. Governing Board Meeting Minutes, August 25, 2022 d. Special Governing Board Meeting Minutes, September 6, 2022 e. Special Governing Board Meeting Minutes, September 6, 2022
		 Approval of Resolution 22:22 – Brown Act Amendment AB 361 Subsequent to Resolution 21:17 to provide a 30-day extension until

October 29, 2022.

1:50 p.m.		F. Correspondence, Suggestions or Written Comments to the Board
2:00 p.m.	26-42	G. Finance Report – Corinne Stromstad, Barbara Truitt, Paul Eves and Matt Rees
		 Approval of August, 2022 Finances - Paul Eves PFS report/Provider Printout – August, 2022 – Marie Brown/Remy Quinn HRG report –Remy Quinn
		• Theorem Quinn
	43-45	H. Chief Nursing Officer's Report – Adela Yanez, CNO
		I. Quality Assurance Performance Improvement Committee Report [H&S Code § 32155]– Kristen Rees, MPH, CPHQ, LSSBB, RHCEOC, Chief Quality and Compliance Officer and Risk Manager– (Jan., April, July, Oct.)
2:30 p.m.		J. Administrator's Report –Matt Rees
		 Human Resources Quarterly Report – Jennifer Baskin (Jan., April, July, Oct.) Foundation Report – Chelsea Brown – (May, Aug., Nov., Feb.) Strategic Plan Committee reports Committee reports – Barbara Truitt
		K. Old Business
		1. Employee Handbook for approval – See separate packet
3:45 p.m.		L. New Business
		 Policies and Procedures – See Packet "A", Revised and Reviewed Medical Staff Bylaws for review – See separate packet Board Vacancy
		M. Meeting Evaluation
		N. Parking Lot
		1. Governing Board retreat
		O. Next Meetings

- 1. Medical Staff Committee Policy Development, Wednesday, October 12, 2022, 11:00 a.m.
- 2. QAPI Meeting TBD
- 3. Medical Staff Committee, Wednesday, October 19, 2022, 12:00 p.m.
- 4. Governing Board Meeting October 27, 2022 at 1:30 p.m.
- P. Adjourn to Closed Session
- Q. Closed Session
 - 1. Approval of Previous Closed Session Minutes
 - a. Closed Session Governing Board Meeting July 29, 2022
 - b. Closed Session Governing Board Meeting August 25, 2022
 - Compliance and Risk Report [H&S Code § 32155] Kristen Rees, MPH, CPHQ, LSSBB, RHCEOC, Chief Quality and Compliance Officer and Risk Manager – no written report
 - Clinic Service Review [H&S Code § 32155] Adela Yanez, CNO – see report
 - 4. MERP Report [H&S Code § 32155] Adela Yanez, CNO – see report
 - 5. Medical Staff Appointments/Reappointments [Gov. Code § 54957]
 - a. Tahir Alkhairy, MD, Reappointment to Associate for Diagnostic Teleradiology privileges, 10/01/2022 to 09/30/2024
 - b. David Ishimitsu, MD, Reappointment to Associate for Diagnostic Teleradiology privileges, 10/01/2022 to 09/30/2024
 - Paul Lampert, MD, Reappointment to Associate for Diagnostic Teleradiology privileges, 10/01/2022 to 09/30/2024
 - d. Jonathan Meyer, MD, Reappointment to Associate for Diagnostic Teleradiology privileges, 10/01/2022 to 09/30/2024
 - e. Michael Witkosky, MD, Reappointment to Associate for Diagnostic Teleradiology privileges, 10/01/2022 to 09/30/2024
 - 6. Next regular Meeting Thursday, October 27, 2022

Governing Board Meeting Agenda September 29, 2022 Page 4 of 4

R. Adjourn Closed Session

S. Resume Open Session

T. Adjourn

Abbreviations

ACHD	Association of California Healthcare Districts	ACLS	Advanced Cardiac Life Support Certification
AR	Accounts Receivable	BLS	Basic Life Support Certification
CAIR	California Immunization Registry	CEO	Chief Executive Officer
CFO	Chief Financial Officer	CMS	Centers for Medicare and Medicaid Services
CNO	Chief Nursing Officer	COO	Chief Operating Officer
CPHQ	Certified Professional in Healthcare Quality	CQO	Chief Quality Officer
EMR	Electronic medical record	ER	Emergency Room
FTE	Full Time Equivalent/Full Time Employee	HIM	Health Information Management
HRG	Healthcare Resource Group	HVAC	Heating, Ventilation and Air Conditioning system
IGT	Intergovernmental transfer	IT	Information Technology
JPCH	Jerold Phelps Community Hospital	LCSW	Licensed Clinical Social Worker
LVN	Licensed Vocational Nurse	MPH	Master of Public Health
OBS	Observation	PALS	Pediatric Advanced Life Support Certification
PFS	Patient Financial Services	QAPI	Quality Assurance Performance Improvement
QIP	Quality Improvement Project/Program	RN	Registered Nurse
SHCC	Southern Humboldt Community Clinic	SHCHD	Southern Humboldt Community Healthcare District
SNF	Skilled Nursing Facility	SWG	Swing beds
DO	Doctor of Osteopathic Medicine		

PUBLIC COMMENT ON MATTERS NOT ON THE MEETING AGENDA: Members of the public are welcome to address the Board on items not listed on the agenda and within the jurisdiction of the Board of Directors. The Board is prohibited by law from taking action on matters not on the agenda, but may ask questions to clarify the speaker's comment and/or briefly answer questions. The Board limits testimony on matters not on the agenda to three minutes per person and not more than ten minutes for a particular subject, at the discretion of the Board.

PUBLIC COMMENT ON MATTERS THAT ARE ON THE AGENDA: Individuals wishing to address the Board regarding items on the agenda may do so after the Board has completed their initial discussion of the item and before the matter is voted on, so that the Board may have the benefit of these comments before making their decision. Please remember that it is the Board's responsibility to discuss matters thoroughly amongst themselves and that, because of Brown Act constraints, the Board meeting is their only opportunity to do so.

OTHER OPPORTUNITIES FOR PUBLIC COMMENT: Members of the public are encouraged to submit written comments to the Board at any time by writing to SHCHD Board of Directors, 733 Cedar Street, Garberville, CA 95542. Writers who identify themselves may, at their discretion, ask that their comments be shared publicly. All other comments shall be kept confidential to the Board and appropriate staff.

IN COMPLIANCE WITH THE AMERICANS WITH DISABILITIES ACT, if you require special accommodations to participate in a District meeting, please contact the District Clerk at 707-923-3921, ext. 276 at least 48 hours prior to the meeting." **Times are estimated*

Posted Tuesday, September 27, 2022



Governing Board – Special Meeting

Time: 10:00 a.m.

Location: Sprowel Creek and Webex

Facilitator: Corinne Stromstad, Board President

Minutes

Governing Board: Barbara Truitt, Via Webex – Corinne Stromstad and Kevin Church

Not Present: Jessica Willis and Galen Latsko

Also present: Marie Brown, Remy Quinn, Paul Eves CFO, and Darrin Guerra

Also Present Webex: Matt Rees, CEO, Heidi Holterman, Karen Johnson, and CNO Adela Yanez

- A. Call to order -10:07 a.m.
- B. Public Comment-None
- C. Board Member Comments none
- D. Announcements -- None
- E. New Business -

Approval of Resolution 22:16 - Brown Act Amendment AB 361 Subsequent to Resolution 21:17 to provide a 30-day extension until, August 21, 2022.

Motion: Kevin Church made a motion to adopt Resolution 22:16, as described above.
Second: Corinne Stromstad seconded the motion
Ayes: Corinne Stromstad, Barbara Truitt, and Kevin Church
Noes: None
Not Present: Galen Latsko and Jessica Willis
Motion carried.



F. Adjourned at: 10:09 a.m.

Abbreviations

ACUID		ACTO	
ACHD	Association of California Healthcare Districts	ACLS	Advanced Cardiac Life Support Certification
AR	Accounts Receivable	BLS	Basic Life Support Certification
CAIR	California Immunization Registry	CEO	Chief Executive Officer
CFO	Chief Financial Officer	CMS	Centers for Medicare and Medicaid Services
CNO	Chief Nursing Officer	COO	Chief Operating Officer
CPHQ	Certified Professional in Healthcare Quality	CQO	Chief Quality Officer
EMR	Electronic medical record	ER	Emergency Room
FTE	Full Time Equivalent/Full Time Employee	HIM	Health Information Management
HRG	Healthcare Resource Group	HVAC	Heating, Ventilation and Air Conditioning system
IGT	Intergovernmental transfer	IT	Information Technology
JPCH	Jerold Phelps Community Hospital	LCSW	Licensed Clinical Social Worker
LVN	Licensed Vocational Nurse	MPH	Master of Public Health
OBS	Observation	PALS	Pediatric Advanced Life Support Certification
PFS	Patient Financial Services	QAPI	Quality Assurance Performance Improvement
QIP	Quality Improvement Project/Program	RN	Registered Nurse
SHCC	Southern Humboldt Community Clinic	SHCHD	Southern Humboldt Community Healthcare District
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DO	Doctor of Osteopathic Medicine		

Submitted by Darrin Guerra



Governing Board

Date:	Friday, July 29, 2022
Time:	1:30 p.m.
Location:	Sprowel Creek Campus and Via Webex Conferencing
Facilitator:	Board President, Corinne Stromstad

Minutes

Special Note: Due to COVID-19, this meeting was held via teleconference and in person.

The following people attended at Sprowel Creek Campus and via Webex

Governing Board: Corinne Stromstad, Kevin Church, Jessica Willis and Barbara Truitt. Also via Webex: Galen Latsko

Not Present: None

Also in person: Darrin Guerra, Governing Board Clerk; CEO Matt Rees, Marie Brown, PFS Manager; Remy Quinn, HIM Manager; COO Kent Scown CFO Paul Eves, CQO Kristen Rees, Heidi Holterman, Graham Russell, Dorothy Russell, Rio Anderson, Josh Grain, Monica Pereine, Charles Anderson and Karen Johnson, Medical Staff Coordinator.

Also via Webex: CNO Adela Yanez, Director of HR Jennifer Baskin, Marvin Cohen, Amy Terrones, Angela Quail, Michael Newdow and Andrew Saighian

- A. Call to Order Board president Corinne Stromstad called the meeting to order at 1:30 p.m.
- B. Public Comment None
- C. Board Member Comments Jessica Informed the Public that this meeting held on the 29th day of July would be her final meeting. Attached is her signed letter of resignation dated July 23, 2022 reading –

"I am sorry to give you my notice, but I have to resign from the SHCHD governing board. I have taken a full-time position at SHUSD and will not be able to attend morning and midafternoon meetings. I have enjoyed my time on this board. I appreciate all that I have learned and all the wonderful people I have had the privilege to work with. This board meeting in July will be my last, my official end date will be July 31, 2022."

- D. Announcements -None
- E. Consent Agenda
 - 1. Approval of Agenda
 - 2. Approval of Previous Meeting Minutes
 - a. Governing Board meeting June 23, 2022

Motion:	Barbara Truitt moved to approve the previous minutes of June 23, 2022	
	as amended to include the Board Committees and other Consent Agenda	
	items.	
Second:	Kevin church	
Ayes:	Corinne Stromstad, Jessica Willis, Barbara Truitt, Kevin Church and	
	Galen Latsko	
Noes:	None	
Not Present: None		

Motion carried.

Barbara Truitt and Kevin Church agreed to be in a committee to schedule Board Training and Education from Govern Well.

The second committee, on which Barbara Truitt and Kevin Church will also serve, is to explore financing options involving the Foundation for construction of housing on the SCHER property.

3. **Approval of Resolution 22:18** – Brown Act Amendment AB 361 Subsequent to Resolution 21:17 to provide a 30-day Extension until August 28, 2022.

Motion:	Barbara Truitt made a motion to adopt Resolution 22:18, as described
	above.
Second:	Kevin Church
Ayes:	Corinne Stromstad, Kevin Church, Galen Latsko, Jessica Willis, and
	Barbara Truitt.
Noes:	None
Not Present: None	
Motion carried.	

- F. Correspondence, Suggestions or Written Comments to the Board None
- G. Finance Report Paul Eves

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- 1. Approval of June, 2022 Finances Paul Eves see report
 - This month we had only 3 swing beds days which is a major reduction from previous years. We anticipate that if we hire a full-time discharge planner we will then be able to increase those days by accepting new referrals.
 - Outpatient labs remain high due to Covid and are starting to rise. We anticipate this may be due to all the events in the area and summer starting.
 - June also saw a large number of EKGs in comparison to previous months
 - Coincidentally the EKG machine went down, and we are currently using a replacement until we receive a new machine.
 - June was the third month in a row that we collected more than 1 million dollars in patient AR
 - The pharmacy filled 3,279 prescriptions in the month of June.
 - Total patient revenue was \$1.4M in June, \$200,000 from the Pharmacy
 - Interest income is listed every 3 months. It's posted at the month's end after a quarter.
 - Humboldt County Property Tax account remains inaccurate. It's been years since we've been able to get a figure from the county. Paul has had a response in the past month and he's hopeful that it is a sign that they are catching up.
 - We continue to pay down the Medicare accelerated payment and expect to pay it off within the next 2 years. We have paid more than \$200,000 off the last few months in a row.
 - Our net income for the year is 4.797 million!

Motion:Barbara Truitt moved to approve the Financials, submitted for June, 2022.Second:Jessica WillisAyes:Corinne Stromstad, Kevin Church, Jessica Willis, Galen Latsko, and Barbara
TruittNoes:NoneNot Present:NoneMotion carried.

2. Approval of Resolution 22:15- Annual Parcel tax Resolution - A resolution of the Board of the Southern Humboldt Community Healthcare District ordering the levy of a special tax and approving collection of a special tax for fiscal year 2022-2023

Motion:Barbara Truitt moved to approve Resolution 22:15 as submitted.Second:Kevin ChurchAyes:Corinne Stromstad, Jessica Willis, Kevin Church, Galen Latsko, and Barbara
TruittNoes:NoneNot Present:NoneMotion carried.

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- 3. PFS report –June, 2022 –Marie Brown See report
 - a. HRG report June, 2022 Remy Quinn See report
 - There is an error on the 1st page of the PFS report. The 1st bullet should note June not May.
 - PFS continues to make improvements in processes. This continues to show lower AR days.
 - PFS has offered two letters of employment both of which have been accepted. The 1st PFS rep is already training in the ED and the 2nd will begin at the beginning of August in the clinic.
 - Additionally, the nighttime PFS rep in the ED had requested some time off and we finally got to see the outcome of the new position. Overall, it seemed to affect workflow into the day. Marie feels confident that the evening position has proven to be a tremendous asset to the team and there has been a clear increase in patient information received, reducing billing errors.
 - The Ochin/Epic teams continue to make improvements but have shown to be very time demanding, with some members of the team being in 11 hours of meetings weekly. It will be a lot of work from different members in the District, but we believe it will all be worth it once our integration is completed and we have received our new personalized systems.
 - PFS is now finally fully staffed. There are plans to potentially move some of staff members around and train them on more of the back-office work. Roles and daily workflows will change after the integration and PFS is waiting to see how these processes play out.
 - We were surprised to find out that coding was behind significantly. We anticipated that they were at least 5 days behind. Unfortunately, the clinic was month behind, and other areas were 2-3 weeks behind. The reason they have been backed up has been attributed to a combination of new management, lack of staffing, and they claim that they had multiple people out on vacation. We have had a meeting with them and set expectations We will reevaluate in a few months and if there isn't much improvement, we may have to seek other coding agencies.
- H. Chief Nursing Officer's Reports Adela Yanez, Interim CNO See Report
- I. Quality Assurance Performance Improvement Committee Report [H&S Code § 32155]–Kristen Rees, MPH, CPHQ, LSSGB, Chief Quality and Compliance Officer and Risk Manager (Jan., April, July, Oct.) See Report
 - Quality is currently in the process of applying for 3 ship grants.
 - Quality had a call with the American Medical Association, and they would like to partner with us on a Blood Pressure control program. They are interested in the population we

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serve and the programs we offer. They have done some pilot programs in larger hospitals and have decided to partner with 4 or 5 hospitals across the nation. We are currently negotiating terms with them.

- The Quality lead position has been filled and will start in August.
- J. Administrator's Report –Matt Rees, CEO
 - 1. Human Resources Quarterly Report Jennifer Baskin (Jan., April, July, Oct.) See report
 - 2. Foundation Report Chelsea Brown (May, Aug., Nov., Feb.) No Report
 - 3. Strategic Plan No Report
 - 4. Committee Reports No Report
 - 5. Department report –FRC– Amy Terrones New Job Description Approval
 - Family Support Specialist This position would be funded through the Department of Health and Human Services. Their primary duty will be to provide case management services for our child welfare service clients.
 - Youth Prevention Coordinator This person would be a full-time employee stationed at the middle school or high school with a team of service providers. Their primary goal would be to provide drug and alcohol intervention as well as one on one intervention and prevention.

Motion:	Barbara Truitt moved to approve the hiring of two new Grant Funded positions for the FRC with the Change of the title and posting to "Youth
	Diversion Coordinator".
Second:	Jessica Willis
Ayes:	Corinne Stromstad, Jessica Willis, Kevin Church, Galen Latsko, and Barbara
	Truitt
Noes:	None
Not Present: None	
Motion carried.	

- 6. Angela Quail Table Group Consultant- Admin Offsite Training
 - Angela Quail spoke briefly about the July 25, offsite training that took place in shelter cove. She covered the process of how they try to build the team up and help them learn how to be a more cohesive team. She mentioned that over the last four months she has seen a profound change and is proud to say that it was one of the fastest improvements she has seen at an organization.
- K. Old Business None

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L. New Business

1. Policies and Procedures - See Packet

Motion: Barbara Truitt moved to approve the Policies and Procedures as submitted. Second: Jessica Willis Ayes: Corinne Stromstad, Jessica Willis, Kevin Church, Galen Latsko, and Barbara Truitt Noes: None Not Present: None Motion carried.

- 2. Hearing on proposed resolution of necessity for acquisition, by eminent domain of a fee simple interest in certain real property located at 531 Elm Street, Garberville, California, for the construction and maintenance of additional public parking for the Jerold Phelps Community Hospital Project.
 - Andrew Saighian from BBK Law opened the hearing for the resolution of necessity. Andrew stated that the purpose of this hearing is to make findings to allow the District to file a lawsuit to exercise its eminent domain powers, the hearing is not to negotiate a definitive price or to make any other decision regarding the property.
 - The Clerk of the Board then Noted the proof of mailing and the notice of hearing dated July 11, 2022 (on page 55-57 of the Governing Board Packet).
 - Kent Scown, COO gave a brief description of what the project would entail. The project involves rebuilding a retaining wall around the property, clearing the land in its entirety, including the foundation, buildings, and tree for space for a parking lot.
 - Andrew notified the Board that there was contact for public comment. He reminded the public that this hearing is just to adopt a resolution of necessity to have the ability to file a lawsuit for eminent domain. The District, isn't taking the property outright, they intend to acquire the property at fair market value. The hearing is not to negotiate a definitive price or to make any other decision regarding the property. He then opened the floor to Dorothy Russel and her peers to speak publicly.
 - Dorothy Russell Church owner. She spoke about the property being considered an R4 property. She believes the best use for the property would be to build housing on it. She mentioned prices of other properties in the area and believes that the parcel is worth more than previously appraised. She spoke about the trouble the church has faced with vandalism through the years and hopes that this situation will turn out to be a blessing.
 - Graham Russell -Church Treasurer. Russel believes the best use for the property would be for housing for the public. He then spoke about how the District and his party "…just need to come up with a fair agreement".
 - Kevin Dolan Property Owner. Kevin spoke that the district should caution themselves with these types of processes. He believes it sets a dangerous precedence in the community. He believes the District and Mrs. Russel should come to an agreement.

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- Monica Pereine Former Planner for the city of San Francisco and CAL Trans- She stated that from a planner's perspective that the property should be used for housing. She also mentioned that it sets a dangerous precedent. She would like to see the District and Mrs. Russel come to an agreement.
- Charles Anderson Public Member. Charles spoke about how wherever there is money there is corruption and that he is not sure about the process that is taking place and asked that the board "...just hold off for a while".
- Rio Anderson Property Owner. Rio believes that the property would be best suited for senior or low-income housing. He would like to advocate that the District and Dorothy come to a fair agreement.

Board questions and comments:

- Board member Kevin Church reminded the public that the eminent domain process does not hinder any negotiations and actually helps to ensure a fair market price for both parties. If the property owner is unsatisfied with the appraisal, they are allowed to hire their own appraiser at which the district will pay up to \$5,000 for, to ensure fair market price. He had also asked Matt Rees how long the district has been trying to acquire this parcel for and how responsive the property owner has been. Matt explained that the District has been trying to acquire it for about 3 years and has made multiple offers which have been "left on the table".
- Board member Barbara Truitt asked CEO Matt Rees to inform the public of the current housing projects the District has planned. Matt informed the public that the District currently has a property across the street from the Sprowel Creek Campus, the district intends to build a housing unit that has up to 13 different living quarters. This would be primarily for hospital employees that travel and need to stay overnight. The District also owns a property behind Ray's that they intend on building 7 apartments on for district employees, freeing up housing in the community.
- Kevin Church wanted to reiterate that if the independent appraiser the property owner hires finds information that the District's appraiser did not consider in their 1st estimate, it opens up more room for negotiations and the District would be required by law to update their estimate.
- Barbara Truitt asked Andrew if there was a Mandated timeline if the process is started and in the following stages. Andrew replied that typically a lawsuit would need to be filed within 60 days of a resolution being adopted. The steps after that would depend on the county and how busy the court is, though eminent domain laws strictly forbid trials within 1 year of the lawsuit.
- At this point Andrew closed the hearing.
- 4. **Approval of Resolution 22:17** Hearing on proposed resolution of necessity for acquisition, by eminent domain of a fee simple interest in certain real property located at

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531 Elm Street, Garberville, California, for the construction and maintenance of additional public parking for the Jerold Phelps Community Hospital Project.

Motion:	Kevin Church made a motion to adopt Resolution 22:17, as described
	above.
Second:	Jessica Willis
Ayes:	Corinne Stromstad, Kevin Church, Galen Latsko, Jessica Willis, and
	Barbara Truitt.
Noes:	None
Not Present: None	
Motion carried.	

- M. Meeting Evaluation Good meeting
- N. Parking Lot None
- O. Next Meetings:
 - 1. Medical Staff Committee Policy Development, Wednesday, august 10, 2022, 10:00 a.m.
 - 2. QAPI Meeting September TBD
 - 3. Finance Committee will be held August 23, 2022 at 10:00 a.m.
 - 4. Governing Board Meeting August 25, 2022 at 1:30 p.m.
 - P. Adjourn to Closed Session 2:33 p.m.
 - Q. Closed Session opened at 3:03 p.m.
 - 1. Approval of Previous Closed Session Minutes
 - a. Closed Session Special Governing Board Meeting June 23, 2022
 - 2. Compliance and Risk Report [H&S Code § 32155] Kristen Rees, MPH, CPHQ, LSSGB, Chief Quality and Compliance Officer and Risk Manager
 - 3. Clinic Service Review [H&S Code § 32155] Adela Yanez, Interim CNO
 - 4. Medication Error Reduction Plan Report [H&S Code § 32155] Adela Yanez, Interim CNO
 - 5. Medical Staff Appointments/Reappointments [Gov. Code § 54957] -None

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- 6. Personnel matter Chief Quality Officer Evaluation Pursuant to Gov. Code § 54957
- 7. Conference with Legal Counsel Existing Litigation (§ 54956.9(d)(1) Cheryl Wik
- 8. Next Regular Meeting:
 - a. Governing Board Meeting, Thursday, August 25, 2022
- R. Adjourned Closed Session at 4:33 p.m.
- S. Resumed Open Session at 4:33 p.m.
 - 1. The following actions were taken at closed session

Motion:	Barbara Truitt moved to approve the Previous closed session minutes June 23, 2022
	with corrections.
Second:	Corinne Stromstad
Ayes:	Galen Latsko, Barbara Truitt, Jessica Willis, Kevin Church and Corinne
	Stromstad
Noes:	None
Not Present: None	
Motion carried.	

T. Adjourned Open Session at 4:16 p.m.

All recordings of Board meetings are held on file for 1 year and are available upon request.

Submitted by Darrin Guerra

Abbreviations

ACHD	Association of California Healthcare Districts	ACLS	Advanced Cardiac Life Support Certification
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PFS	Patient Financial Services	QAPI	Quality Assurance Performance Improvement

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QIP	Quality Improvement Project/Program	RN	Registered Nurse
SHCC	Southern Humboldt Community Clinic	SHCHD	Southern Humboldt Community Healthcare District
SNF	Skilled Nursing Facility	SWG	Swing beds
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Governing Board

Date:	Thursday, August 25, 2022
Time:	1:30 p.m.
Location:	Sprowel Creek Campus and Via Webex Conferencing
Facilitator:	Board President, Corinne Stromstad

Minutes

Special Note: Due to COVID-19, this meeting was held via teleconference.

The following people attended at Sprowel Creek Campus and via Webex

Governing Board: Corinne Stromstad, Kevin Church, Galen Latsko and Barbara Truitt.

Not Present: None

Also in person: Darrin Guerra, Governing Board Clerk; CEO Matt Rees, Chelsea brown Outreach Manager, Adam Summers, Marie Brown, PFS Manager; Remy Quinn, HIM Manager; CNO Adela Yanez, CFO Paul Eves, and Karen Johnson, Medical Staff Coordinator.

Also via Webex: CQO Kristen Rees, Heidi Holterman, COO Kent Scown, Director of HR Jennifer Baskin, and Dr. Michael Newdow.

- A. Call to Order Board president Corinne Stromstad called the meeting to order at 1:32 p.m.
- B. Public Comment None
- C. Board Member Comments

The Board would like to receive detailed presentations on larger documents, in addition they ask that the document be sent as early as possible so that they may have adequate time to review them.

- D. Announcements None
- E. Consent Agenda
 - 1. Approval of Agenda

- 2. Approval of Previous Meeting Minutes
 - a. Special Governing Board Meeting July 22, 2022
 - b. Governing Board Meeting July 26, 2022
 - Both Meeting Minutes will be moved to the September 29, 2022, SHCHD Governing Board Meeting to be approved.
- 3. Approval of Resolution 22:19 Brown Act Amendment AB 361 Subsequent to Resolution 21:17 to provide a 30-day Extension until September 27, 2022 and other consent agenda items.

n: Barbara Truitt made a motion to adopt Resolution 22:19, as describe			
above.			
Kevin Church			
Corinne Stromstad, Kevin Church, Galen Latsko, and Barbara Truitt			
None			
Not Present: None			
Motion carried.			

- F. Correspondence, Suggestions or Written Comments to the Board None
- G. Finance Report Paul Eves
 - 1. Approval of July 2022 Finances Paul Eves see report
 - This month we had only 3 swing beds days for the 2nd month in a row. We anticipate that if we hire a full-time discharge planner, we will then be able to increase those days by accepting new referrals. We currently have a nurse that would be willing to take the position but due to the rise in covid cases and understaffing they currently cannot fill that role.
 - Outpatient labs remain high due to Covid testing and have stayed consistent through the summer months
 - The previous 3 months of AR cash collections exceeded 1 million each month and have sense returned to our average of around \$800,000.
 - The pharmacy filled 3,512 prescriptions in the month of July.
 - Total patient revenue was \$1.4M in July, \$250,000 from the Pharmacy, the most the Pharmacy has made in 1 month so far! The Pharmacy continues to grow each month.
 - Interest income is listed every 3 months. It's posted at the month's end after a quarter.
 - Salaries and benefits appear incredibly high for the month. Paul and Matt

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explained the reason for this. The state offered a bonus to all hospital employees in California granting each employee \$1,000. If the District offered another \$500 the State would match it. Some of the initial funds will be refunded through the State and cost reimbursement. The District Paid out \$440,000 to employees. Matt believes this will be budget neutral after reimbursement is received.

- Humboldt County Property Tax account remains inaccurate. It has been years since we have been able to get a figure from the county. Paul has said that he has now sent them a withdrawal form for \$1.8 million and is waiting for a reply from the county.
- We continue to pay down the Medicare accelerated payment and expect to pay it off within the next 2 years. We have paid more than \$200,000 off the last few months in a row.
- The line on the balance sheet "Medicare Contingency" under current liabilities should be named "Bridge Loan". This correction will be made for the next meeting.

Motion:Barbara Truitt moved to approve the Financials, submitted for July, 2022.Second:Galen LatskoAyes:Corinne Stromstad, Kevin Church, Galen Latsko, and Barbara TruittNoes:NoneNot Present:NoneMotion carried.

- 2. PFS report –July 2022 –Marie Brown See report
 - a. HRG report July 2022 Remy Quinn See report
 - PFS continues to make improvements in processes. This continues to show lower AR days. Currently at its lowest point since August 2021
 - Both new PFS representatives are continuing to excel, and we are planning to start cross training in September.
 - The idea to split Treatment Authorization between PFS and HIM has turned out to be a positive change. Marie mentioned that one of the HIM employees was able to get a paid claim that they had been fighting for 16 months!
 - Remy Believes we need to hire a full time Case Manager, every week HIM and PFS representatives spend their time and resources to try to fill that missing clinical role. They do not have the staff to help support this need and are hopeful that if we can manage to hire more nurses, then we can fill this much needed role.
 - The HIM audit is currently underway, and we should have the data back for the September meeting.
 - On the final page of the HRG report in the "Third Party Aging & Self Pay Aging" graph continues to show a downward trend, Remy believes this is reaching a point of stabilization.

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- H. Chief Nursing Officer's Reports Adela Yanez, Interim CNO See Report.
- I. Quality Assurance Performance Improvement Committee Report [H&S Code § 32155]–Kristen Rees, MPH, CPHQ, LSSGB, Chief Quality and Compliance Officer and Risk Manager (Jan., April, July, Oct.) No Report
- J. Administrator's Report -Matt Rees, CEO -See "Board Update"
 - 1. Human Resources Quarterly Report Jennifer Baskin (Jan., April, July, Oct.) No Report.
 - 2. Foundation Report Chelsea Brown (May, Aug., Nov., Feb.) -See Report
 - 3. Strategic Plan No Report
 - 4. Committee Reports Kevin Church and Barbara Truitt -Board Training

Kevin has been working with a consultant from Govern Well to get together an agenda and schedule for Board training. The expected date is October 25-26 in Santa Rosa. Currently a meeting location has not been determined.

- 5. Department report Lab Adam Summers
 - Adam gave a brief background of the laboratory and its key functions at the hospital. Our lab is accredited by an agency called COLA which grants us the ability to have a CLEA certificate to test human specimens.
 - He then informed the Board about the 20% increase in test volume we have received this last year. The Lab performed over 50,000 tests, 8,000 of which were covid tests. This increase is not only due to covid tests, but it can also be attributed to patients bringing in orders from outside of the area.
 - The lab has received a new microscope that will allow them to share slides with Dr. Lu, the lab's Pathologist, for a second opinion before samples are sent off site.
 - 6. Matt Rees See Board Update
 - We have received word that CR and HSU are working on starting a Lab program that hopefully could help with Lab recruitment in the coming years.
 - Jennifer gave us an update that we currently have a Mid-level student that completed their rotation with us that has an interest in working with us after graduation.

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K. Old Business - None

- L. New Business
 - 1. Determining the Boards November and December Holiday Schedule.
 - October's Finance Meeting will be moved to Monday October 24, 2022.
 - November's Finance Meeting will be moved to Tuesday November 29, 2022
 - November's Governing Board Meeting will be moved to December 1, 2022
 - Both Meetings will begin again in January
 - 2. Policies and Procedures See separate packet Medical Staff Policy Development Committee A and Policies for Ultrasound.

Motion:	Barbara Truitt made a motion to approve the Policy and Procedure packet A and Policies for Ultrasound as submitted to the Board.	
Second:	Kevin Church	
Ayes:	Barbara Truitt, Kevin Church, Galen Latsko, and Corinne Stromstad.	
Noes:	None	
Not Present: None		
Motion Carried		

3. Medical Staff Bylaws and Rules and Regulations – See separate packet

Motion:	on: Barbara Truitt made a motion to approve Medical Staff Bylaws an		
	Rules and Regulation as submitted to the Board.		
Second:	Galen Latsko		
Ayes:	Barbara Truitt, Kevin Church, Galen Latsko, and Corinne Stromstad.		
Noes:	None		
Not Present: None			
Motion Carried			

4. Updated Employee Handbook – See Handbook

The Board agreed to revisit the Employee Handbook next month, after they have had sufficient time to thoroughly review the document.

5. SHCHD Conditional Will Serve Letter – See letters

Kent gave a brief description of the Conditional Will Serve Letter. It is a Will Serve letter from the Sanitary District stating they will serve the site of the new Hospital with water and sewer services.

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Motion:	Barbara Truitt made a motion to approve and to grant CEO Matt Rees		
	authorization to sign the Conditional Will Serve Letter.		
Second:	Kevin Church		
Ayes:	Barbara Truitt, Kevin Church, Galen Latsko, and Corinne Stromstad.		
Noes:	None		
Not Present: None			
Motion Carried			

6. Election of Board Members

Motion:	Kevin Church nominates Barbara Truitt as Vice President and Secretary of the	
	SHCHD Governing Board	
Second:	Galen Latsko	
Ayes:	Barbara Truitt, Kevin Church, Galen Latsko, and Corinne Stromstad.	
Noes:	None	
Motion carried.		

M. Meeting Evaluation – Good meeting

- N. Parking Lot None
- O. Next Meetings:
 - 1. Medical Staff Committee Policy Development, Wednesday, September 14, 2022, 10:00 a.m. Barbara Truitt will be attending.
 - 2. QAPI Meeting -TBD
 - 3. Finance Committee will be held September 21, 2022 at 10:00 a.m.
 - 4. Governing Board Meeting September 29, 2022 at 1:30 p.m.
 - P. Adjourn to Closed Session at 3:38 p.m.
 - Q. Closed Session opened at 3:38 p.m.
 - Approval of Previous Closed Session Minutes

 a. Closed Session Governing Board Meeting July 29, 2022
 - 2. Compliance and Risk Report [H&S Code § 32155] Kristen Rees, MPH, CPHQ, LSSGB, Chief Quality and Compliance Officer and Risk Manager
 - 3. Clinic Service Review [H&S Code § 32155] Adela Yanez, Interim CNO
 - 4. Medication Error Reduction Plan Report [H&S Code § 32155] Adela Yanez, Interim CNO

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- 5. Medical Staff Appointments/Reappointments [Gov. Code § 54957]
 - a. Surender Kurapati, MD, Reappointment to Associate for Diagnostic Teleradiology privileges, 09/01/2022 to 08/31/2024
 - b. PeiLin Reed, MD, Reappointment to Associate for Diagnostic Teleradiology privileges, 09/01/2022 to 08/31/2024
- 6. Next Regular Meeting:
 - a. Governing Board Meeting, Thursday, September 29, 2022
- R. Adjourned Closed Session at 4:03 p.m.
- S. Resumed Open Session at 4:03 p.m.
 - 1. The following actions were taken at closed session

CS July 29 Meeting Minutes will be moved to the September 29, 2022, SHCHD Governing Board Meeting to be approved.

Motion:Galen Latsko moved to approve Surender Kurapati MD and PeiLin Reed MD,
Reappointment to Associate for Diagnostic Teleradiology privileges, September
1, 2022 to August 31, 2024Second:Kevin Church
Galen Latsko, Barbara Truitt, Kevin Church and Corinne Stromstad
Noes:Noes:NoneNot Present: NoneMotion carried.

T. Adjourned Open Session at 4:03 p.m.

Submitted by Darrin Guerra

Governing Board Meeting Minutes August 26, 2022 Page 8 of 8

Abbreviations

ACHD	Association of California Healthcare Districts	ACLS	Advanced Cardiac Life Support Certification
AR	Accounts Receivable	BLS	Basic Life Support Certification
CAIR	California Immunization Registry	CEO	Chief Executive Officer
CFO	Chief Financial Officer	CMS	Centers for Medicare and Medicaid Services
CNO	Chief Nursing Officer	COO	Chief Operating Officer
CPHQ	Certified Professional in Healthcare Quality	CQO	Chief Quality Officer
EMR	Electronic medical record	ER	Emergency Room
FTE	Full Time Equivalent/Full Time Employee	HIM	Health Information Management
HRG	Healthcare Resource Group	HVAC	Heating, Ventilation and Air Conditioning system
IGT	Intergovernmental transfer	IT	Information Technology
JPCH	Jerold Phelps Community Hospital	LCSW	Licensed Clinical Social Worker
LVN	Licensed Vocational Nurse	MPH	Master of Public Health
OBS	Observation	PALS	Pediatric Advanced Life Support Certification
PFS	Patient Financial Services	QAPI	Quality Assurance Performance Improvement
QIP	Quality Improvement Project/Program	RN	Registered Nurse
SHCC	Southern Humboldt Community Clinic	SHCHD	Southern Humboldt Community Healthcare District
SNF	Skilled Nursing Facility	SWG	Swing beds
DO	Doctor of Osteopathic Medicine		



Governing Board – Special Meeting

Date: Tuesday, September 6, 2022

Time: 3:00 p.m.

Location: Sprowel Creek and Webex

Facilitator: Corinne Stromstad, Board President

Minutes

Governing Board: Corinne Stromstad and Barbara Truitt, **Via Webex** –Kevin Church and Galen Latsko

Not Present: None

Also present: Matt Rees, CEO and Karen Johnson, Board Clerk

Also, Present Webex: Jason Dockins, Kristen Rees, and Jennifer Baskin

- A. Call to order -3:01 p.m.
- B. Public Comment None
- C. Board Member Comments none
- D. Announcements -- None
- E. New Business -
 - 1. Governing Board Bylaws Board members to review the bylaws. Board's training is scheduled for October, then we'll discuss the bylaws, make any necessary changes, then put it to a vote after October.
 - 2. Policies and Procedures New electronic process
 - a. Clinical policies will be reviewed and sent to the Board for approval by Medical Staff Committee annually, as required by law.
 - b. Non-clinical policies will be reviewed by Administration Team, then sent to the Board for approval every two years.



- c. Procedures do not need to be sent to the Board for approval, but the Board may ask for them, or for additional information on the policy before voting on its approval.
- d. The manager submitting the policies will attend the board meeting and be ready for a discussion and to answer questions. The policies, with markups, will be shared on screen, if the Board chooses, as part of the manager's presentation. If the manager isn't available for the presentation, then someone who is knowledgeable about them will need to be there.
- e. The policies will have the Track Changes feature in Word used, which results in markups showing in red.
- 3. IT Tech position Jason is asking for one full-time, permanent position, for the day-to-day tasks, while the others are working with OCHIN and EPIC.

Approval of one full time, permanent, IT Tech Position.

Motion:	Barbara Truitt made a motion to approve one full-time, permanent, IT	
	Tech position.	
Second:	Kevin Church seconded the motion	
Ayes:	Corinne Stromstad, Barbara Truitt, Kevin Church and Galen Latsko	
Noes:	None	
Not Present: None		
Motion carried.		

4. Approval of Resolution 22:20 – Brown Act Amendment AB 361 Subsequent tot Resolution 21:17 to provide 30-day extension until October 6, 2022.

Motion:Barbara Truitt made a motion to adopt Resolution 22:20, as described
above.Second:Kevin Church seconded the motion
Ayes:Corinne Stromstad, Barbara Truitt, Kevin Church and Galen Latsko
Noes:NoneNot Present: NoneMotion carried.

F. Adjourned at: 3:38 p.m.

Abbreviations

ACHD	Association of California Healthcare Districts	ACLS	Advanced Cardiac Life Support Certification
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CFO	Chief Financial Officer	CMS	Centers for Medicare and Medicaid Services
CNO	Chief Nursing Officer	COO	Chief Operating Officer
CPHQ	Certified Professional in Healthcare Quality	CQO	Chief Quality Officer
EMR	Electronic medical record	ER	Emergency Room



Southern Humboldt Community Healthcare District

FTE	Full Time Equivalent/Full Time Employee	HIM	Health Information Management
HRG	Healthcare Resource Group	HVAC	Heating, Ventilation and Air Conditioning system
IGT	Intergovernmental transfer	IT	Information Technology
JPCH	Jerold Phelps Community Hospital	LCSW	Licensed Clinical Social Worker
LVN	Licensed Vocational Nurse	MPH	Master of Public Health
OBS	Observation	PALS	Pediatric Advanced Life Support Certification
PFS	Patient Financial Services	QAPI	Quality Assurance Performance Improvement
QIP	Quality Improvement Project/Program	RN	Registered Nurse
SHCC	Southern Humboldt Community Clinic	SHCHD	Southern Humboldt Community Healthcare District
SNF	Skilled Nursing Facility	SWG	Swing beds
DO	Doctor of Osteopathic Medicine		

Submitted by Karen Johnson



Governing Board – Special Meeting

Date: Friday, September 16, 2022

Time: 1:30 p.m.

Location: Sprowel Creek and Webex

Facilitator: Corinne Stromstad, Board President

Minutes

Governing Board: Corinne Stromstad, Barbara Truitt, Galen Latsko, and Kevin Church

Not Present: None

Also present: Kristen Rees, Chief Quality and Compliance Officer and Risk Manager, Matt Rees, CEO, Paul Eves, CFO, and Karen Johnson, Board Clerk

Also Present Webex: None

- A. Call to order -1:30 p.m.
- B. Public Comment None
- C. Board Member Comments none
- D. Announcements –Doty Russell stated to a member of the Administration Team that she's working with an attorney to put together an offer.
- E. New Business -

Approval of Resolution 22:21 – CHFFA Loan.

This loan requested is for \$1,500,000.00. The loan application is complete and is just needing the resolution approving it attached. Paul stated he could send the application off today and may expect to receive the money in about 3 months.

Motion:	Barbara Truitt made a motion to adopt Resolution 22:21, as described
	above.
Second:	Kevin Church seconded the motion



Ayes:Corinne Stromstad, Barbara Truitt, Kevin Church and Galen LatskoNoes:NoneNot Present:NoneMotion carried.

F. Adjourned at: 1:35 p.m.

Abbreviations

ACHD	Association of California Healthcare Districts	ACLS	Advanced Cardiac Life Support Certification
AR	Accounts Receivable	BLS	Basic Life Support Certification
CAIR	California Immunization Registry	CEO	Chief Executive Officer
CFO	Chief Financial Officer	CMS	Centers for Medicare and Medicaid Services
CNO	Chief Nursing Officer	COO	Chief Operating Officer
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IGT	Intergovernmental transfer	IT	Information Technology
JPCH	Jerold Phelps Community Hospital	LCSW	Licensed Clinical Social Worker
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SNF	Skilled Nursing Facility	SWG	Swing beds
DO	Doctor of Osteopathic Medicine		

Submitted by Karen Johnson

Southern Humboldt Community Healthcare District

													Current 12	Year to Date-
	Sept 21	Oct 21	Nov 21	Dec 21	Jan 22	Feb 22	March 22	April 22	May 22	June 22	July 22	Aug 22	Month AVG	Current Year
In Patient Statistics														
Total Acute Patient Days	16	9	5	11	3	18	15	5	3	7	6	6	9	12
Total Swing Patient Days	56	66	30	39	35	65	95	98	54	3	3	26	48	29
Total SNF Patient Days	240	231	191	237	223	190	217	228	221	215	248	248	224	496
Total Patient Days	312	306	226	287	261	273	327	331	278	225	257	280	280	537
-														
Total Acute Discharges	5	4	2	5	1	7	3	3	1	3	1	2	3	3
Total Swing Discharges	4	5	0	2	2	2	5	5	. 3	2	1	- 1	3	2
Total SNF Discharges	. 0	1	1	2	-	-	0	0	2	0	4	0	1	4
	9	10	3	9	4	10	8	8	6	5	6	3	7	9
				Ū			Ū				Ū	5		
Acute Length of Stay	3.20	2.25	2.50	2.20	3.00	2.57	5.00	1.67	3.00	2.33	6.00	3.00	2.89	6
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ER Admits	5	4	2	5	1	7	4	3	2	3	1	2	3	3
I/P Lab Visits	23	14	7	10	23	26	14	17	22	23	41	61	23	102
I/P Radiology Visits	3	2	. 2	4	2	5	6	6	10	3	3	5	4	8
I/P EKG's	0	0	0	1	0	0	0	0	0	0	0	0	. 0	0
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Out Patient Statistics														
ER Visits	250	220	260	206	233	188	218	219	248	270	278	287	240	565
Clinic Visits	459	471	495	453	449	380	509	452	500	479	466	581	475	1,047
SLS Visits	0	0	0	0	0	0		0	0				0	0
Outpatient Medical	1570	1871	1302	1644	2278	2597	1042	1049	1453	1853	1859	2005	1,710	3,864
Laboratory Visits	740	546	640	839	1009	455	589	574	681	702	753	1351	740	2,104
Radiology	209	152	167	179	121	182	170	161	154	193	162	160	168	322
Mammography	6	11	19	9	17	9	14	13	28	9	18	30	15	48
CT Scans	76	63	70	66	73	77	88	72	80	88	63	80	75	143
EKG's	42	38	25	44	48	55	37	34	59	64	28	47	43	75
Total O/P Visits	3,352	3,372	2,978	3,440	4,228	3,943	2,667	2,574	3,203	3,658	3,627	4,541	-	8,168
•														
Retail Pharmacy Rxs Sold	2,001	2,358	2,566	2,249	2,573	2,455	2,999	2,983	3,237	3,279	3,512	3,693	2,611	
Salary Statistics														
Productive FTE's	76.8	79.2	80.5	79.2	71.7	79.1	77.4	79.7	81.1	81.2	81.2	80.2	79	
Paid FTE's	85.0	87.1	87.8	87.9	85.4	87.0	88.0	87.8	88.2	92.0	91.8	94.5	88	
Salaries & Ben as % of Net Rev	59.2%	77.6%	64.5%	66.4%	50.1%	72.8%	56.79%	70.03%	71.65%	48.15%	2867.64%	#DIV/0!	297.77%	
Benefits as % of Salaries	32.0%	64.4%	32.2%	23.9%	28.1%	43.9%	23.93%	43.42%	47.12%	-24.13%	11.55%	#DIV/0!	31.06%	
Revenue Statistics						0.450.557	0.074.5	0 101 055		1 700 055	1 070 05		1 770 0-1	
Gross A/R > 120 Days	1,336,739	1,505,869	1,451,996	1,746,576	2,040,686	2,152,505	2,071,508	2,181,976	1,997,956	1,799,059	1,676,234	1001	1,772,854	
A/R>120 Days as % of Total AR	34%	34%		42%	42%	42%	42%	42%	42%	42%	42%	42%	0	
Gross Days in A/R	85.1 79.8	85.9 81.6	86.3 79.8	94.7 87.5	91.6 84.4	86.5 79.9	86.5 79.9	88.5 80.0	84.9 78.6	82.9 75.0	83.4 77.3	83.4 74.7	86 80	
Net Days in A/R A/R Cash Collections	79.8 782.980	81.6 847,125	79.8 845,077		84.4 727.607	79.9 859.954	79.9 770.454			75.0 1,227,309	77.3 801,517		80 897,974	
A/R Cash Collections Collections as % of Net Rev	782,980 67.2%	847,125 70.8%	845,077 68.8%	729,186 63.1%	727,607 58.0%	859,954 59.5%	770,454 69.3%	1,024,101 69.8%	1,137,769 91.6%	1,227,309 95.1%	801,517 54.9%	1,182,187 2860.8%	897,974 69.9%	
Accounts Payable Days	67.2% 9.3		68.8% 1.9	63.1% 0.8	58.0% 6.4	59.5% 6.2	6.9		91.6%	95.1%	54.9%	2860.8%	69.9%	
Cash Collections per Cal Day	9.3 25,257	2.1 27,327	1.9 27,261	0.8 23,522	6.4 23,471	6.2 27,740	6.9 24,853	7.4 33,036	8.0 36,702	3.9 39,591	2.1 25,855	0.0 38,135	4.9 28,967	347,603
Cash Disburs, per Cal Day	25,257	458,718	40.600	23,522 42,521	23,471 41,846	27,740 54,626	24,853 50,307	33,036 46,099	36,702 53,257	39,591 53,859	25,855 58,544	38,135	28,967 81,687	347,603 918,145
Casil Dispurs, per Cal Day	41,202	408,718	40,600	42,521	41,846	04,020	əU,3U7	40,099	53,257	53,859	28,544	-	81,687	918,145
DATA Entry/Details/Calcs													· · · · · · · · · · · · · · · · · · ·	
Calendar Days	30	31	30	31	31	28	31	30	31	30	31	31		
calondal Dayo	50	51	50	51	51	20	51	50	51	50	51	51	l i	I I

Southern Humboldt Community Healthcare District Income Statement August 2022

_			August 2022				
C	urrent Month			Year to Date			
\$ Variance	Budget	Actual		Actual	Budget	\$ Variance	% Variance
Variance	Dudget	Actual	GROSS PATIENT REVENUE	Actual	Budget	Variance	Valiance
(41,970)	237,500	195,530	INPATIENT	399,024	475,000	(75,976)	-16%
4,904	41,670	46,574	INPATIENT ANCILLARY	109,369	83,340	26,029	31%
382,932	1,202,080	1,585,012	OUTPATIENT ANCILLARY	3,079,277	2,404,160	675,117	28%
345,866	1,481,250	1,827,116	TOTAL PATIENT REVENUE	3,587,670	2,962,500	625,170	21%
			DEDUCTIONS FROM REVENUE				
78,421	515,630	594,051	CONTRACTUAL ALLOWANCES	738,269	1,031,260	(292,991)	-28%
(59,382)	71,670	12,288	PROVISION FOR BAD DEBTS	88,477	143,340	(54,863)	-38%
37,992	36,000	73,992	OTHER ALLOWANCES/DEDUCTIONS	265,912	72,000	193,912	269%
	-300,000	(300,000)	OTHER OPERATING IGTs & SUPPLEMENTAL	(600,000)	(600,000)		
57,031	323,300	380,331	TOTAL DEDUCTIONS	492,658	646,600	(153,942)	-24%
288,835	1,157,950	1,446,785	NET PATIENT REVENUE	3,095,012	2,315,900	779,112	34%
8,822	12,000	20,822	OTHER OPERATING REVENUE	36,271	24,000	12,271	51%
297,657	1,169,950	1,467,607	TOTAL OPERATING REVENUE	3,131,283	2,339,900	791,383	34%
(59,152)	731,670	672,518	SALARIES & WAGES	1,734,800	1,463,340	271,460	19%
2,594	158,330	160,924	EMPLOYEE BENEFITS	283,666	316,660	(32,994)	-10%
100,945	123,330	224,275	PROFESSIONAL FEES	399,690	246,660	153,030	62%
20,386	112,500	132,886	SUPPLIES	236,873	225,000	11,873	5%
(6,587)	21,670	15,083	REPAIRS & MAINTENANCE	63,434	43,340	20,094	46%
92,305	110,000	202,305	PURCHASED SERVICES	391,918	220,000	171,918	78%
3,387	14,170	17,557	UTILITIES	26,748	28,340	(1,592)	-6%
(10,213)	23,330	13,117	INSURANCE	26,234	46,660	(20,426)	-44%
0	,	0	INTEREST	0	0	Ú Ó	#DIV/0!
8,880	38,330	47,210	DEPRECIATION/ AMORTIZATION	94,420	76,660	17,760	23%
40,321	33,330	73,651	OTHER	116,595	66,660	49,935	75%
192,866	1,366,660	1,559,526	TOTAL OPERATING EXPENSES	3,374,378	2,733,320	641,058	23%
104,791	(196,710)	(91,919)	OPERATING PROFIT (LOSS)	(243,095)	(393,420)	150,325	-38%
(2,500)	95,000	92,500	TAX REVENUE	185,000	190,000	(5,000)	-3%
(27,965)	40,000	12,035	OTHER NONOPERATING REV (EXP)	112,035	80,000	32,035	40%
		0	INTEREST INCOME	0			
(30,465)	135,000	104,535	NET NON OPERATING REV (EXP)	297,035	270,000	27,035	10%
74,326	(61,710)	12,616	NET INCOME (LOSS)	53,940	(123,420)	177,360	-144%
			Page 27 of 45				

						Southern Humi								
Community Healthcare District Income Statement Trend														
					inc	ome Statemen	t Trena							
													12 Month AVG:	YTD - Current
	Sept 21	Oct 21	Nov 21	Dec 21	Jan 22	Feb 22	March 22	April 22	May 22	June 22	July 22	Aug 22	Mar '21-Feb 22	Year
									,					
Inpatient Daily Hospital Services	244,718	219,424	170,256	217,954	170,724	226,213	263,867	217,261	192,011	175,686	203,494	195,530	203,300	399,024
Ancillary Revenue	72,321	45,472	40,036	51,743	54,178	57,688	86,204	71,057	64,210	41,791	62,795	46,574	57,628	109,369
Outpatient Revenue	1,364,347	1,273,369	1,162,271	1,356,271	1,577,499	1,208,326	1,472,842	1,285,791	1,414,753	1,463,561	1,494,265	1,585,012	1,402,059	3,079,277
Total Hospital Revenue	1,681,386	1,538,265	1,372,563	1,625,968	1,802,401	1,492,227	1,822,913	1,574,109	1,670,974	1,681,038	1,760,554	1,827,116	1,662,986	3,587,670
	1,001,000	1,000,200	1,072,000	1,020,000	1,002,401	1,402,221	1,022,010	1,074,100	1,070,074	1,001,000	1,700,004	1,027,110	1,002,000	0,007,070
Contractual Allowances	404,071	324,712	415,578	447,106	501,660	508,013	761,987	556,716	615,921	472,276	144,218	594,051	501,753	738,269
Provision for Bad Debts	48,684	140,689	54,169	137,821	117,448	118,631	10,157	49,676	17,220	43,045	76,189	12,288	63,664	88,477
Other Allowances/Deductions	48,084	39,931	63,107	100.622	38.322	67.521	90,994	49,070 52.827	61.168	21,290	191.920	73.992	76.176	265,912
Other Operating: IGTs & Supplemental	(300,000)	(300,000)	(300,000)	(300,000)	(300,000)	(300,000)	(300,000)	(300,000)	(300,000)	(300,000)	(300,000)	(300,000)	(300,000)	(600,000)
Total Deductions	(300,000) 157,584	205,332	(300,000) 232,854	385,549	(300,000) 357,430	(300,000) 394,165	563,138	(300,000) 359,219	(300,000) 394,309	236,611	(300,000)	380,331	341,593	492,658
	157,564	205,552	232,034	365,549	357,430	394,103	505,156	559,219	394,309	230,011	112,327	360,331		,
Contractual %													21%	14%
Net Patient Revenue	1,523,802	1,332,933	1,139,709	1,240,419	1,444,971	1,098,062	1,259,775	1,214,890	1,276,665	1,444,427	1,648,227	1,446,785	1,314,490	3,095,012
Net Revenue %	91%	87%	83%	76%	80%	74%	69%	77%	76%	86%	94%	79%	79%	86%
Other Operating Revenue	15,318	14,551	15,668	14,753	34,137	14,219	14,964	26,619	14,215	15,242	15,449	20,822	18,609	36,271
Total Revenue	1,539,120	1,347,484	1,155,377	1,255,172	1,479,108	1,112,281	1,274,739	1,241,509	1,290,880	1,459,669	1,663,676	1,467,607	1,333,099	3,131,283
Salaries & Wages	536,284	579,710	564,028	627,862	565,381	562,777	634,230	606,216	628,652	926,391	1,062,282	672,518	685,034	1,734,800
Employee Benefits	171,366	373,211	181,430	134,580	159,058	247,085	271,899	263,210	296,245	(223,582)	122,742	160,924	161,359	283,666
Professional Fees	112,847	112,883	180,917	109,637	112,547	278,975	310,402	178,201	228,761	214,234	175,415	224,275	201,336	399,690
Supplies	61,224	106,131	109,659	101,501	182,616	107,907	93,932	68,106	119,328	64,935	103,987	132,886	108,486	236,873
Repairs & Maintenance	25,766	20,930	13,640	8,884	12,666	27,885	16,373	43,108	21,161	24,467	48,351	15,083	23,162	63,434
Purchased Services	140,865	125,499	70,442	66,996	132,609	159,060	109,754	87,732	221,948	427,722	189,613	202,305	166,818	391,918
Utilities	24,502	30,677	5,875	6,943	4,079	39,491	6,414	32,704	18,898	42,146	9,191	17,557	18,330	26,748
Insurance	11,755	12,982	12,703	13,521	13,112	13,112	13,112	13,112	13,112	13,111	13,117	13,117	13,113	26,234
Interest														0
Depreciation	45,896	37,258	45,975	37,021	38,614	49,177	48,603	48,603	48,603	48,603	47,210	47,210	45,962	94,420
Other Expense	152,351	30,170	33,332	211,206	76,536	44,049	55,565	41,975	54,246	77,739	42,944	73,651	72,027	116,595
Total Expenses	1,282,856	1,429,451	1,218,001	1,318,151	1,297,218	1,529,518	1,560,284	1,382,967	1,650,954	1,615,766	1,814,852	1,559,526	1,495,627	3,374,378
Expenses %	83%	106%	105%	105%	88%	138%	122%	111%	128%	111%	109%	106%	112%	4%
Profit/Loss from Operations	256,264	(81,967)	(62,624)	(62,979)	181,890	(417,237)	(285,545)	(141,458)	(360,074)	(156,097)	(151,176)	(91,919)	(162,528)	(243,095)
Tax Revenue	95,000	92,500	92,500	92,500	100,855	92,500	92,500	92,500	92,500	92,500	92,500	92,500	93,336	185,000
Other Non Operating Rev (Exp)	1,574,676	311,075	40,160	244,733	327,636	347,670	383,116	301,936	365,465	724,752	100,000	12,035	284,750	112,035
Interest Income	14,173	31	1,064		6,789	-		9,031	-			-	6,218	0
Net Non-operating Rev/(Exp)	1,683,849	403,606	133,724	337,233	435,280	440,170	475,616	403,467	457,965	817,252	192,500	104,535	384,303	297,035
			-	,										
NET INCOME/ (LOSS)	1,940,113	321,639	71,100	274,254	617,170	22,933	190,071	262,009	97,891	661,155	41,324	12,616	221,775	53,940

Southern Humboldt

Southern Humboldt Community Healthcare District Balance Sheet August 2022

ASSETS

LIABILITIES & FUND BALANCE

Current Assets		Current Liabilities	
Cash- Checking & Investments	1,159,001	Accounts Payable	60,091
LAIF Account	9,599,344	Accrued Payroll & Related costs	3,609,863
Humboldt County Property Tax Acct	1,119,622	-	
		Other Current Liabilities	
Patient Accounts Receivable	3,708,255	Deferred revenue IGT	
Less Allowances	2,285,492	A/R Credit balances	
Accounts Receivable- Net	1,422,763	Medicare Accelerated Payments	1,746,296
		Medicare Contingency	2,000,000
Other Receivables	3,861,072	Current Portion-Long Term Debt	
Inventories	201,537	Other Short Term Debt - PPP Loan	
Estimated 3rd Party Settlements		Accrued interest	
Prepaid expenses and Deposits	1,267,767		
Total current assets	18,631,106	Total current Liabilities	7,416,250
Property and Equipment		Long Term Debt, Less Current Portion	
Land	959,877		
Land improvements	553,251	CHFFA Bridge Loan	511,000
Buildings	2,465,451		
Equipment	6,315,822		
Construction in progress	2,449,971	Total Long-term debt	511,000
Total property and equipment	12,744,372	Less: Current Portion-Long Term Debt	
Less : accumulated depreciation	(6,409,113)	Net Long Term Debt	511,000
Net property and equipment	6,335,259		
		Equity	
		Unrestricted Fund BalancePrior Years	16,991,026
Other Assets		Net Income (Loss)Current Year	53,940
		Restricted Fund Balance	
Investments	5,852		
Total Other Assets	5,852	Total fund balance	17,044,966
Total Assets	24,972,217	Total Liabilities and Fund Balance	24,972,217

Revenue Cycle / Patient Financial Services August 2022 Finance Committee Report

HRG - Key Items:

- Cash collections totaled \$1.2M, 140% of July's net revenue
- August closed at 74.7 AR days or \$3.7M in Gross AR
- Gross AR reduced by 2.6 days or \$29K
- Third Party Aging decreased by \$5K, down to 19.1%
- Unbilled AR increased by 1.3 days; Self-Pay decreased 2.2

Accounts Receivable – The AR days continue their downward trend, moving from 77.3 days in July to 74.7 days in August, remaining at the lowest point since August 2021.

Self-Pay & Bad Debt – As reflected in the HRG report we were able to do two bad debt pulls in August, for a total of \$22K. Due to the account 'boomerang' issue we reported earlier in the year, which caused patient statements to recycle within the HRG system, combined with the implementation of AB 1020, resulted in a disproportionately large # of accounts moving to Bad Debt eligible this coming month. There are over 700 accounts we will be processing in two batches; the first half will be the highest dollar accounts followed by the rest.

We anticipate seeing a drastic reduction in the Self-pay AR inventory by the time of our next report, moving further toward our goal of 25 days.

Aging – Our continued efforts to reduce aging in all Financial Classes has been successful overall. With the exception of Medicare due to technical issues with CMS, and Medicaid due to authorizations pending for paperwork. HRG is working with CMS for resolution on the technical issue, but it is holding up a significant amount of revenue in the Medicare FC aged over 90 days. The paperwork for the Medicaid authorizations were completed and these are now set to be paid. As noted in the HRG report, Commercial aging is at a record low of 21.5%. We continue to close the gap toward our overall Third-Party aging goal of 14%.

Training – We have reached a point of stabilization with our new PFS trainees working in the Clinic and the Hospital. This has allowed us to begin the planned cross training in the business office that was on hold for over a year. This will ensure that we avoid any future charge posting delays when we have staff out.

OCHIN Epic – Our Pivot Point Project Manager Giridhar was able to join us on-site for three weeks, and staff have reported having a very positive and productive experience. He was able to help with numerous ongoing data calls, projects, and other areas where progress had stalled. Everyone welcomed his help and look forward to continuing their work with his assistance.

Treatment Authorization – After a year and a half long initiative to restructure how we capture and submit Treatment Authorizations, bringing in and training two additional staff to assist, we have seen tremendous outcomes. When we inherited this process in February of 2021 the outstanding balances pending authorizations was \$176,000.00. We are happy to report that as of the end of August 2022, we have reduced that balance to \$15,157 over 4 current accounts for all IP and OP authorizations.



Monthly Report Executive Summary

Southern Humboldt August 2022



Key Items

- Cash collections totaled \$1.2M, 140% of July's net revenue
- August closed at 74.7 AR days or \$3.7M in Gross AR
- Gross AR reduced by 2.6 days or \$29K
- Third Party Aging decreased by \$5K, down to 19.1%
- ➡ Unbilled AR increased by 1.3 days, Self Pay decreased 2.2

Self Pay AR Day Trending 48 46 44 45.4 44.3 42 40 40.5 38 38.8 36 34 May June July August

Detailed Initiatives & Obstacles

- **Overall AR:** August closed with \$3.7M in Gross AR or 74.7 AR days. Revenue came in strong at \$1.58M and despite the \$72.5K increase to revenue, Gross AR was reduced by \$29K. Third Party AR came in at 30.8 AR days, which is a decrease of 1.6 days since July. Unbilled AR increased 1.3 AR days coming in at 5.6 AR days for the month of August and is now 2.6 days from goal which is set at 3 days. Unbilled AR is a topic that is discussed in the bi-weekly conference calls between SHCHD and HRG. It was known fairly early on in the month that the unbilled would increase due to charges not being added as the person responsible for adding charges was out. Self Pay AR continues to decrease and ended August at 38.3 days in AR which is just 13..3 days from goal. Cash collections came in high at \$1.2M, or 140% or July's net revenue.
- Self Pay (SP) AR: The month ended with 2,855 accounts for \$1.9M in Self Pay equating to 38.3 days in AR. The amount of accounts in Self Pay went down by 102 and collections were strong. Self Pay collections came in at \$66K; which is an increase of \$27K since July and record cash for 2022. SHCHD was able to complete two bad debt pulls for the month of August and sent nearly \$22K to collections. Self Pay AR has been a focal point in recent months and will continue to be until we reach goal of 25 days.
- Third Party Aging: August closed with \$356K in Third Party balances aged over 90 days, totaling 19.1%. There was a decrease of \$5K from July, decreasing the total percentage of aged accounts by 0.6%. Medicare aging increased by \$6K, but the overall percentage aged over 90 days decreased from 18% down to 16.5%. There is currently an issue with Medicare in regards to the Swingbed (SB) PTAN/NPI. Medicare is stating the effective date for PTAN 05Z309 is 8/3/22. There are currently two SB claims for \$27K that are aged over 90 days that Medicare will not process as the date of service is prior to this effective date. HRG is currently trying to get this issue resolved with Medicare so all SB claims are processed accordingly. Medi-Cal aging increased by \$6K, and is at 18.6%. There were 3 NH accounts pending TARs, all of which have since been billed and are still pending for payment. Commercial aging decreased by \$12K and ended August at 21.5%. The commercial aging is at an all time record low. Workers Compensation decreased by \$5K ending at 57.4%. Overall, Third Party aging is now 5.1% from goal which is set at 14%.

Industry Updates

Medicare Releases Updated Cost Report Instructions for RHCs

Medicare's Provider Reimbursement Manual, Chapter 46 has been updated to provide additional guidance for Rural Health Clinic cost reporting.

Effective for cost reporting periods ending on or after July 31st, 2022, the instructions include additional and revised edits as well as clarified instructions regarding rounding standards for fractional computations. To review the full transmittal, please visit <u>CMS.gov R3P246i</u>

Amanda Hornby | Revenue Cycle Director

Healthcare Resource Group

Office 509.209.2078 | ahornby@hrgpros.com

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Patient Financial Services (PFS) | Health Information Management (HIM) | Revenue Cycle Integrity (RCI) Largest employee-owned revenue cycle management company in the nation.

Southern Humboldt Community Healthcare District



MONTH END FINANCE REPORT

August 2022

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FINANCE DASHBOARD

	Target	March-22	April-22	May-22	June-22	July-22	August-22
REVENUE							
Net Revenue	1	\$956,179	\$818,902	\$860,466	\$892,707	\$844,388	\$878,488
Gross Revenue		\$1,639,234	\$1,384,159	\$1,464,711	\$1,474,557	\$1,510,151	\$1,582,735
CASH							
Cash Collections as a % of Net Revenue	100%	98%	107%	139%	142%	88%	140%
Cash Collections		\$770,454	\$1,024,101	\$1,137,769	\$1,217,580	\$786,503	\$1,182,187
ACCOUNTS RECEIVABLE							
Net AR	1	\$2,466,209	\$2,143,062	\$1,774,113	\$1,696,446	\$1,416,249	\$1,422,763
Gross AR		\$4,832,867	\$4,350,642	\$4,140,558	\$3,936,767	\$3,737,262	\$3,708,255
Unbilled	3	4.8	6.9	6.1	6.9	4.3	5.6
Third Party	38	45.1	36.0	33.4	31.7	32.4	30.8
Self Pay	25	44.0	45.6	45.4	44.3	40.5	38.3
Total Days in AR	66	94.0	88.5	84.9	82.9	77.3	74.7
Days in AR - Credit Balances	<1	2.10	2.25	1.87	1.90	1.93	1.98
UNBILLED							
In-house	< 2 Days	0.2	0.0	0.0	0.2	0.0	0.4
DNFB	<1 Day	4.6	6.9	6.1	6.7	4.3	5.2
Total Unbilled	<3 Days	4.8	6.9	6.1	6.9	4.3	5.6

		Target	Mar	ch-22	Apr	·il-22	Ma	ay-22		Jun	e-22	2	Jul	y-22	:	Aug	ust-2	2
	AGING (excluding credits)																	
	Medicare Aging > 90 Days	9%	11.5%	\$ 117,577	11.6%	\$ 100,944	12.6%	\$	104,764	11.8%	\$	70,384	18.0%	\$	92,227	16.5%	\$	97,731
	Medicaid Aging > 90 Days	14%	18.7%	\$ 217,453	21.0%	\$ 198,832	17.9%	\$	131,848	12.7%	\$	112,593	18.0%	\$	165,977	18.6%	\$	171,806
Party	Commercial Aging > 90 Days	18%	31.0%	\$ 131,036	30.0%	\$ 95,549	33.5%	\$	123,298	35.7%	\$	132,930	22.3%	\$	81,128	21.5%	\$	69,362
ם	Work Comp Aging > 90 Days	36%	56.4%	\$ 25,652	49.9%	\$ 26,297	33.5%	\$	14,992	47.4%	\$	14,065	57.8%	\$	22,197	57.4%	\$	17,596
	Total Third Party Aging > 90 Days	14%	18.5%	\$ 491,718	19.3%	\$ 421,622	18.9%	\$	374,902	17.5%	\$	329,972	19.7%	\$	361,528	19.1%	\$	356,496
hird	CLAIM SUBMISSION EFFECIENCY																	
:= I	Claims Submission		1,501	\$ 1,481,392	2,003	\$ 2,189,220	1,263	\$ 1	1,451,713	1,794	\$	1,918,330	1,486	\$	1,682,882	1,380	\$	2,222,145
⊢	Clean Claims	85%	8	3%	8	3%	8	31%		84	4%		8	3%		8	1%	
	Denial Percent	5%	3	%	7	7%		5%		5	5%			4%		4	1%	
	Total Denial Rate	Count Amt	79	\$ 50,437	136	\$ 98,978	120	\$	112,468	99	\$	72,659	87	\$	75,394	107	\$	63,681
	Late Charges	Count Amt	3	\$ 186	150	\$ 35,391	76	\$	8,701	28	\$	902	66	\$	24,528	42	\$	9,335
	Communication Log Backlog		26	\$ 146,746	21	\$ 58,931	77	\$	154,303	100	\$	157,069	50	\$	70,186	79	\$	58,426

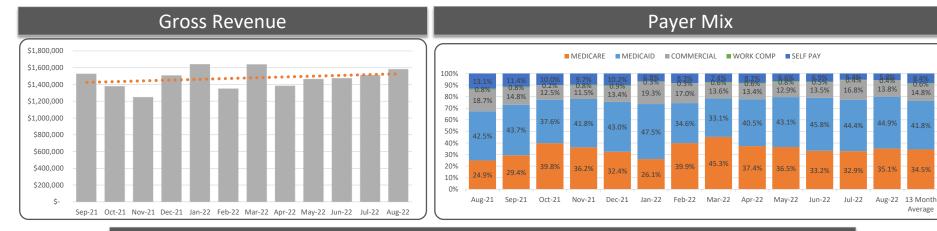
		Target	Mar	ch-22	Ар	ril-22	Ma	ay-22	Jur	ne-22	Jul	y-22	Aug	just-22
	INVENTORY & QUALITY													
	Total Inventory		3,527	\$ 2,264,662	3,505	\$ 2,240,554	3,344	\$ 2,216,895	3,173	\$ 2,105,043	2,957	\$ 1,959,428	2,855	\$ 1,899,559
	New		313	\$ 110,984	384	\$ 129,050	364	\$ 123,986	422	\$ 196,662	317	\$ 93,596	374	\$ 122,268
	Resolved		485	\$ 152,376	1,103	\$ 66,875	459	\$ 114,812	610	\$ 332,592	524	\$ 223,952	447	\$ 173,344
Рау	Aged >180 days from Assignment	< 25%	71.7%	\$ 1,623,121	71.6%	\$ 1,605,165	63.4%	\$ 1,405,722	60.2%	\$ 1,266,992	59.4%	\$ 1,164,657	62.5%	\$ 1,187,446
ف ا	Total Payment Plans over 120 days		\$8,	967	\$9,	,637	\$2	3,479	\$28	3,312	\$24	,661	\$3	9,557
또 🛛	Average Speed to Answer	< 60 seconds	1	50	1	37	1	.12	1	29	1	45		32
Self	STATEMENTS & LETTERS													
°,	Statements & Letters		1,3	380	8	97	3	94	1,	110	1,	850	1,	,492
	Charity Care Applications In Process		0	\$ -	33	\$ 19,674	14	\$ 16,699	37	\$ 26,461	7	\$ 12,385	29	\$ 32,537
	Inbound and Outbound Calls	In Out	326	154	305	455	260	800	231	770	184	310	284	847
	WRITE OFFS													
	Bad Debt as a % of Gross Revenue	< 2%	2.2%	\$ 35,941	0.0%	\$ -	1.9%	\$ 27,754	1.4%	\$ 21,026	0.8%	\$ 11,557	1.4%	\$ 21,643
	Charity as a % of Gross Revenue	< 2%	5.6%	\$ 92,241	6.3%	\$ 87,222	3.1%	\$ 45,909	13.5%	\$ 199,419	3.5%	\$ 53,600	5.1%	\$ 81,379

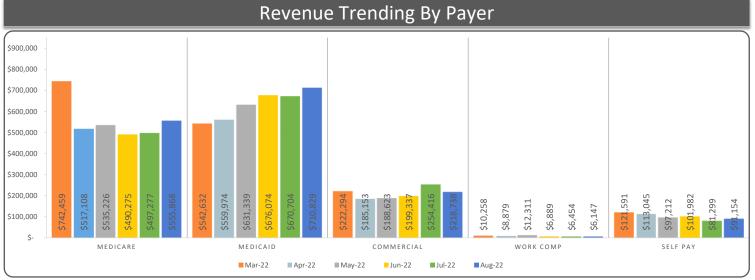
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GROSS REVENUE

PAYER	Aug-21	9	Sep-21	Oct-21	I	Nov-21	Dec-21	ļ	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	13 Month Average
MEDICARE	\$ 370,915	\$	448,301	\$ 548,436	\$	452,536	\$ 489,231	\$	427,748	\$ 538,639	\$ 742,459	\$ 517,108	\$ 535,226	\$ 490,275	\$ 497,277	\$ 555,868	\$ 508,771
MEDICAID	\$ 632,322	\$	666,353	\$ 518,532	\$	522,097	\$ 649,245	\$	779,456	\$ 466,921	\$ 542,632	\$ 559,974	\$ 631,339	\$ 676,074	\$ 670,704	\$ 710,829	\$ 617,421
COMMERCIAL	\$ 277,534	\$	225,873	\$ 172,566	\$	144,086	\$ 202,524	\$	316,007	\$ 229,347	\$ 222,294	\$ 185,153	\$ 188,623	\$ 199,337	\$ 254,416	\$ 218,738	\$ 218,192
WORK COMP	\$ 12,495	\$	12,387	\$ 2,285	\$	10,340	\$ 14,240	\$	4,843	\$ 3,414	\$ 10,258	\$ 8,879	\$ 12,311	\$ 6,889	\$ 6,454	\$ 6,147	\$ 8,534
SELF PAY	\$ 194,690	\$	173,622	\$ 137,550	\$	120,951	\$ 153,177	\$	111,825	\$ 111,801	\$ 121,591	\$ 113,045	\$ 97,212	\$ 101,982	\$ 81,299	\$ 91,154	\$ 123,838
TOTAL	\$ 1,487,956	\$	1,526,536	\$ 1,379,368	\$	1,250,010	\$ 1,508,417	\$	1,639,879	\$ 1,350,122	\$ 1,639,234	\$ 1,384,159	\$ 1,464,711	\$ 1,474,557	\$ 1,510,151	\$ 1,582,735	\$ 1,476,757
AVERAGE DAILY REVENUE	\$ 50,096	\$	50,049	\$ 47,759	\$	45,669	\$ 44,976	\$	47,808	\$ 49,982	\$ 51,436	\$ 49,141	\$ 48,784	\$ 47,510	\$ 48,363	\$ 49,646	\$ 48,555





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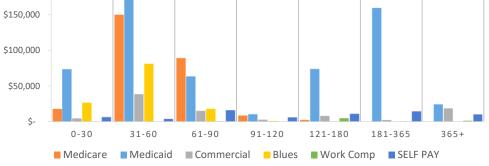
CASH DETAIL

PAYER	A	ug-21	9	Sep-21		Oct-21	ſ	Nov-21		Dec-21		Jan-22		Feb-22		Mar-22		Apr-22	I	May-22		Jun-22		Jul-22		Aug-22		3 Month Average
MEDICARE Payments Adjustments Collection %	\$	434,639 (43,612) 111%		302,872 (9,988) 103%	\$ \$	324,436 6,310 98%	\$ \$	505,109 (103,551) 126%		382,225 97,705 80%	\$ \$	353,842 66,441 84%	\$ \$	398,314 65,484 86%	\$ \$,	\$ \$	491,736 (48,508) 111%	•	653,772 (48,202) 108%	\$ \$	743,061 (155,707) 127%		450,340 20,576 96%	\$ \$	268,672 186,886 59%	\$ \$	443,075 9,217 98%
MEDICAID Payments Adjustments Collection %	;	347,502 482,578 42%	\$ \$	253,418 353,823 42%	\$ \$	317,123 360,075 47%	\$ \$	173,863 273,521 39%	\$ \$	200,547 338,117 37%	\$ \$	212,315 396,591 35%	\$ \$	275,251 445,733 38%	\$ \$	131,928 311,968 30%	\$ \$	327,277 296,009 53%	\$ \$		\$ \$	243,359 476,678 34%	\$ \$	137,465 288,197 32%	\$ \$	623,479 355,444 64%	\$ \$	273,086 373,080 41%
COMMERCIAL Payments Adjustments Collection %	\$ \$	79,233 30,259 72%	\$ \$	-,	\$ \$	90,785 38,548 70%	\$ \$	23,057 15,162 60%		32,890 11,202 75%	\$ \$	42,329 12,751 77%	\$ \$	45,115 9,930 82%	\$ \$	55,397 27,215 67%	\$ \$	94,255 34,954 73%	\$ \$	35,661 19,183 65%	\$ \$	49,987 15,330 77%	\$ \$	78,377 67,108 54%	\$ \$	90,192 37,478 71%		60,798 26,255 71%
Collection %	\$ \$	115,131 48,423 0%	\$ \$	97,873 37,614 0%	\$ \$	71,400 31,797 0%	\$ \$	109,199 46,032 0%		88,547 35,632 0%	\$ \$	95,349 34,181 0%	\$ \$	107,252 58,967 0%	\$ \$		\$ \$		\$ \$	• • • •	\$ \$		\$ \$	74,430 40,415 65%	\$ \$	127,658 54,789 70%		96,915 43,386 67%
Adjustments Collection %	\$ \$	2,674 4,080 40%	\$ \$		\$ \$	7,004 3,282 68%	\$ \$	8,873 5,576 61%		5,181 3,131 62%	\$ \$	4,469 1,731 72%	\$ \$	1,631 1,688 49%	\$ \$	•	\$ \$	1,482 1,463 50%	\$ \$	9,756 4,651 68%	\$ \$	7,723 5,630 58%	\$ \$	6,841 2,719 72%	\$ \$	6,504 4,325 60%	\$ \$	6,276 3,456 62%
	\$ \$ \$	39,318 4,111 24,880 210,892	\$ \$ \$	1,927	\$ \$ \$	32,085 4,291 11,569 3,409	\$ \$ \$	24,686 291 8,579 107,586	\$	17,085 2,711 23,588 6,325	\$ \$ \$ \$	18,553 751 12,037 7,646	\$ \$ \$	29,302 3,090 7,658 2,062	\$ \$ \$	174 29,539	\$ \$ \$ \$	739 36,623	\$ \$ \$		\$ \$ \$	179	\$ \$ \$	38,993 57 160,625 53,600	\$ \$ \$	65,640 44 50,805 81,379	\$ \$ \$ \$	36,289 1,424 32,390 69,476
	\$ \$	43,004 278,776 12%	\$ \$	7,470 23,933 63%	\$ \$	6,828 21,806 60%	\$ \$	158,775 274,940 8%		31,967 61,879 22%	\$ \$	- 19,682 49%	\$ \$	9,721 75%	\$ \$	35,941 157,722 16%	\$ \$	-	\$ \$	27,754	\$ \$		\$ \$	11,557 225,781 15%	\$ \$	21,643 153,827 30%	\$ \$	28,151 130,017 33%
Total Adjustment Total Collection %	\$	800,505 56%		782,067 430,532 64%		847,125 461,817 65%		845,077 511,680 62%		729,186 547,667 57%	\$ \$	727,607 531,378 58%	\$ \$	859,954 591,522 59%		770,454 626,184 55%	\$	443,517 70%	\$	1,137,769 581,700 66%	\$	1,217,580 646,293 65%	\$	786,503 644,797 55%	\$	1,182,187 792,749 60%	\$ \$	917,863 455,394 61%
Cash &	Cash & Adjustment Trending															Cash	C	Collect	ti	ons k)y	Disc	ha	arge l	Da	ate		

Cash & Adjustment Trending



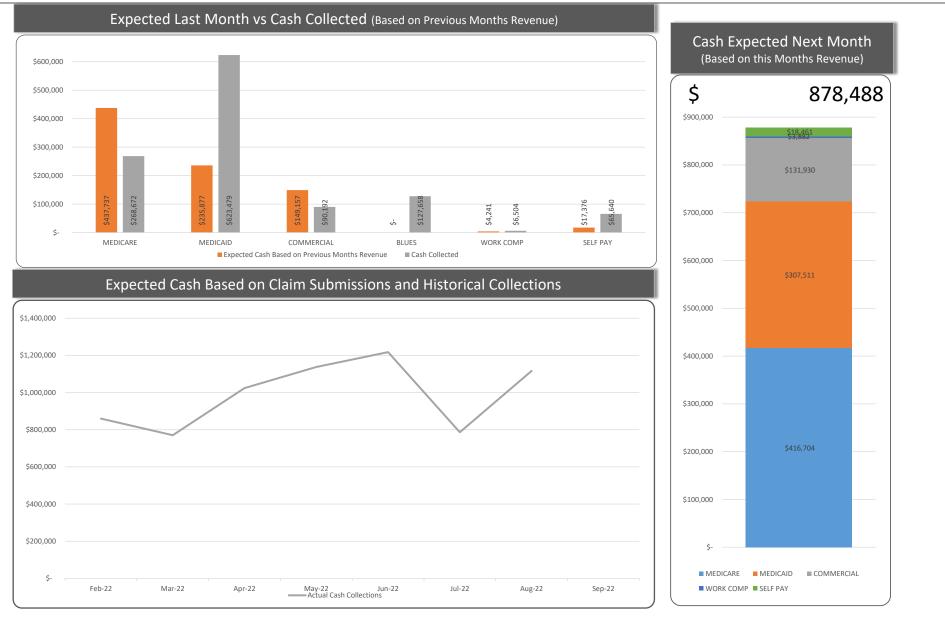




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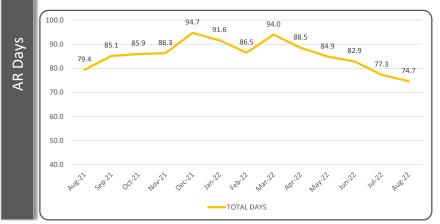
CASH FORECASTING

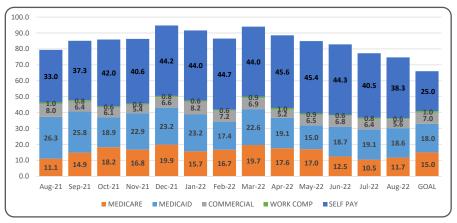


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ACCOUNTS RECEIVABLE

	PAYER	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	13 Month Average
Ĩ	MEDICARE	11.1	14.9	18.2	16.8	19.9	15.7	16.7	19.7	17.6	17.0	12.5	10.5	11.7	15.6
	MEDICAID	26.3	25.8	18.9	22.9	23.2	23.2	17.4	22.6	19.1	15.0	18.7	19.1	18.6	20.8
	COMMERCIAL	8.0	6.4	6.1	5.4	6.6	8.2	7.2	6.9	5.2	6.5	6.8	6.4	5.6	6.6
	WORK COMP	1.0	0.8	0.6	0.6	0.8	0.6	0.6	0.9	1.0	0.9	0.6	0.8	0.6	0.7
	SELF PAY	33.0	37.3	42.0	40.6	44.2	44.0	44.7	44.0	45.6	45.4	44.3	40.5	38.3	41.8
	TOTAL DAYS	79.4	85.1	85.9	86.3	94.7	91.6	86.5	94.0	88.5	84.9	82.9	77.3	74.7	85.5





PAYER	Aug-21	Sep-21	Oct-2	21	Nov-21	0	Dec-21	Jan	n-22	I	Feb-22	ſ	Mar-22	Apr-22	ſ	May-22	Jun-22	Jul-22	Aug-22	3 Month Average
MEDICARE	\$ 557,543	\$ 744,813	\$ 87	1,052 \$	765,280	\$	895,860	\$ 7	48,436	\$	834,221	\$	1,011,373	\$ 864,590	\$	828,105	\$ 593,780	\$ 507,839	\$ 582,895	\$ 754,291
MEDICAID	\$ 1,315,195	\$ 1,289,536	\$ 90	4,985 \$	1,047,831	\$	1,043,932	\$ 1,1	.06,825	\$	870,378	\$	1,159,997	\$ 939,475	\$	733,511	\$ 888,101	\$ 921,687	\$ 921,244	\$ 1,010,977
COMMERCIAL	\$ 403,116	\$ 318,247	\$ 29	0,697 \$	245,343	\$	297,214	\$ 3	90,942	\$	357,842	\$	352,803	\$ 255,074	\$	319,138	\$ 321,984	\$ 311,717	\$ 275,712	\$ 318,448
WORK COMP	\$ 48,151	\$ 42,074	\$ 3	0,405 \$	26,812	\$	34,458	\$	29,721	\$	28,217	\$	44,031	\$ 50,949	\$	42,910	\$ 27,858	\$ 36,591	\$ 28,844	\$ 36,232
SELF PAY	\$ 1,653,468	\$ 1,866,174	\$ 2,00	6,398 \$	1,855,738	\$	1,987,106	\$ 2,1	.03,148	\$	2,232,314	\$	2,264,662	\$ 2,240,554	\$	2,216,895	\$ 2,105,043	\$ 1,959,428	\$ 1,899,559	\$ 2,030,037
TOTAL	\$ 3,977,473	\$ 4,260,844	\$ 4,10	3,537 \$	3,941,004	\$	4,258,570	\$ 4,3	79,072	\$	4,322,972	\$	4,832,867	\$ 4,350,642	\$	4,140,558	\$ 3,936,767	\$ 3,737,262	\$ 3,708,255	\$ 4,149,986

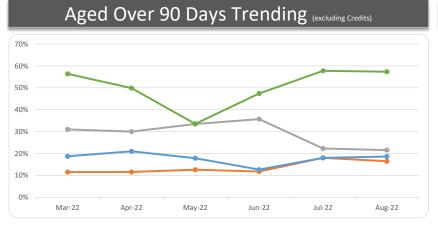


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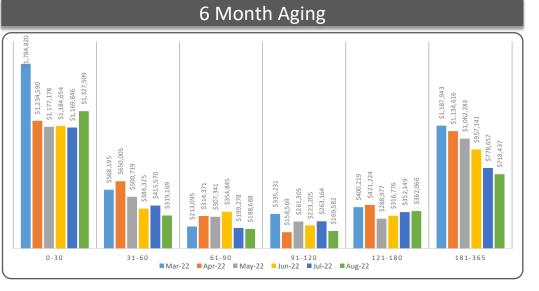


ACCOUNTS RECEIVABLE AGING

	0-30 Days 31 # Acts \$ # Acts			60 Days	61	-90 Day	s	91-1	20 Da	ys	121-	180 D	ays	181-	-365 Da	iys	366	6+ Day	ſS	Gr	and Tota	als
	# Acts	\$	# Acts	\$	# Acts		\$	# Acts		\$	# Acts		\$	# Acts		\$	# Acts		\$	# Acts		\$
MEDICARE																						
Non-Credit	262	\$ 426,853	59	\$ 58,5	53 22	\$	10,298	14	\$	31,984	16	\$	36,344	10	\$	12,091	6	\$	17,313	389	\$	593,435
Credit	1	\$ (20)	0	\$	0	\$	-	0	\$	-	0	\$	-	1	\$	(167)	3	\$	(10,353)	5	\$	(10,540)
TOTAL	263	\$ 426,833	59	\$ 58,5	53 22	\$	10,298	14	\$	31,984	16	\$	36,344	11	\$	11,924	9	\$	6,959	394	\$	582,895
MEDICAID																						
Non-Credit	331	\$ 619,103	113	\$ 90,5	39 89	\$	41,746	46	Ś	24,953	46	Ś	90,468	39	\$	32,892	20	\$	23,493	684	\$	923,195
Credit	3	\$ (312)	0	\$	2	\$	(888)	0	\$	-	1	\$	(122)	1	\$	(15)	9	\$	(613)	16	\$	(1,950)
TOTAL	334	\$ 618,792	113	\$ 90,5	39 91	\$	40,858	46	\$	24,953	47	\$	90,345	40	\$	32,877	29	\$	22,879	700	\$	921,244
COMMERCIAL																						
Non-Credit	268	\$ 168,448	74	\$ 55,0	61 75	\$	29,056	18	Ś	10,866	24	Ś	13,172	31	Ś	21,248	32	Ś	24,077	522	\$	321,927
Credit	24	\$ (650)	11		48) 3	\$	(495)	2	\$	(366)	10	\$	(1,718)	34	\$	(6,056)	298	\$	(35,982)	382	\$	(46,215)
TOTAL	292	\$ 167,798	85	\$ 54,1	13 78	\$	28,561	20	\$	10,500	34	\$	11,454	65	\$	15,192	330	\$	(11,905)	904	\$	275,712
WORK COMP													-								•	
Non-Credit	9	\$ 6,014	4	\$ 2,8	81 15	\$	4,186	2	\$	350	13	\$	14,920	3	\$	1,790	2	\$	535	48	\$	30,677
Credit	0	\$ -	0	\$	0	\$	-	0	\$	-	1	\$	(33)	3	\$	(478)	5	\$	(1,322)	9	\$	(1,833)
TOTAL	9	\$ 6,014	4	\$ 2,8	81 15	\$	4,186	2	\$	350	14	\$	14,887	6	\$	1,313	7	\$	(787)	57	\$	28,844
SELF PAY																						
Non-Credit	136	\$ 110,435	191	\$ 113,7	80 209	\$	105,247	139	\$	102,314	305	\$	211,884	826	\$	667,708	716	\$	625,937	2522	\$	1,937,306
Credit	28	\$ (2,364)	7	\$ (6	98) 5	\$	(462)	7	\$	(519)	21	\$	(2,848)	43	\$	(10,577)	222	\$	(20,279)	333	\$	(37,747)
TOTAL	164	\$ 108,072	198	\$ 113,0	83 214	\$	104,785	146	\$	101,795	326	\$	209,036	869	\$	657,131	938	\$	605,658	2855	\$	1,899,559
ACCOUNTS RECEIVABLE																						
Non-Credit	1006	\$ 1,330,854	441	\$ 320,8	15 410	\$	190,533	219	\$	170,467	404	\$	366,788	909	\$	735,730	776	\$	691,354	4165	\$	3,806,540
Credit	56	\$ (3,345)	18	\$ (1,6	46) 10	\$	(1,845)	9	\$	(885)	33	\$	(4,722)	82	\$	(17,292)	537	\$	(68,550)	745	\$	(98,285)
GRAND TOTAL	1062	\$ 1,327,509	459	\$ 319,1	69 420	\$	188,688	228	\$	169,582	437	\$	362,066	991	\$	718,437	1313	\$	622,804	4910	\$	3,708,255



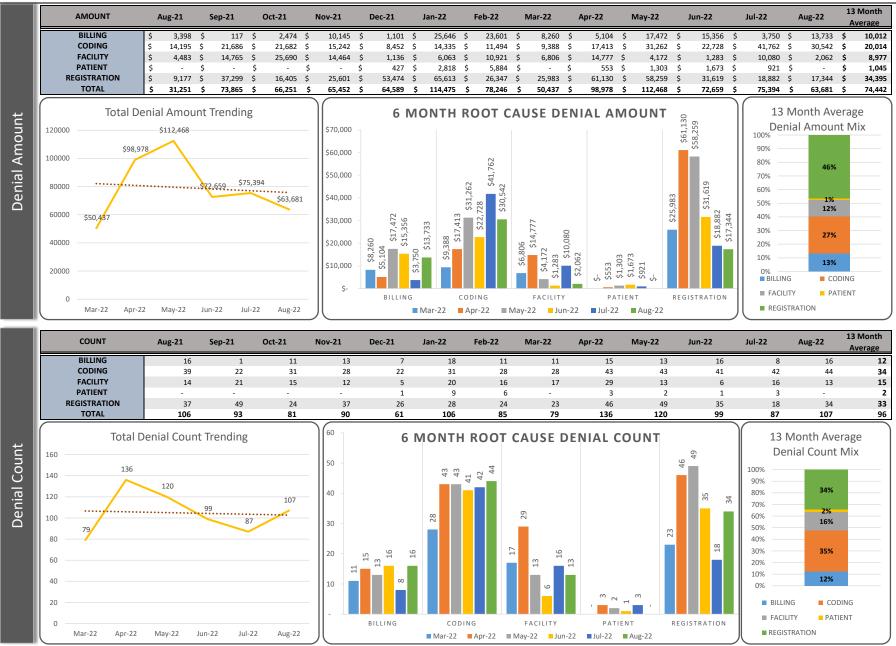
	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22
Medicare	11.5%	11.6%	12.6%	11.8%	18.0%	16.5%
Medicaid	18.7%	21.0%	17.9%	12.7%	18.0%	18.6%
Commercial	31.0%	30.0%	33.5%	35.7%	22.3%	21.5%
Work Comp	56.4%	49.9%	33.5%	47.4%	57.8%	57.4%





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DENIAL MANAGEMENT



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CLAIM SUBMIT EFFICIENCY & DENIAL RESOLUTION



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UNBILLED & INVENTORY

		Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	13 Month Average
	In House DNFB Total Unbilled	\$ 59,277 \$ 560,649 \$ 619,925	\$ 577,639		\$ 487,338	\$ 64,355 \$ 577,901 \$ 642,256	\$ 245,224	\$ 320,765	\$ 238,954	\$ 338,650	\$ - \$ 295,441 \$ 295,441		\$ 208,502		\$ 20,322 \$ 381,906
	Unbilled Days	12.4	3 333,803 12.0	3 344,802 11.4	3 308,133 11.1	14.3	3 202,578 5.5		3 243,420 4.8	5 558,650 6.9	3 233,441 6.1	5 525,851 6.9	\$ 208,502 4.3		
Unbilled	12.0 - 11 0-	12.4		11.4 pilled Days	11.1	14.3	5.5	7.1 \$700,000 \$600,000 \$500,000 \$400,000 \$300,000	4.8	6.9		ed Dollars	4.3	5.6	8.3
	AUG-21 SEP-21 OCT-21	NOV-21 DEC-2	5.5 21 JAN-22 FE	4.8 B-22 MAR-22 A	.PR-22 MAY-22	6.9 4.3 JUN-22 JUL-2	5.6 22 AUG-22	\$200,000 \$100,000 \$-	Aug-21 Sep-21	L Oct-21 Nov-2		22 Feb-22 Mar- In House	22 Apr-22 May	-22 Jun-22 Jul	-22 Aug-22
	ADMISSIONS	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Average
	INPATIENT	1	6	3	2	5	1	7	4	2	1	3	1	2	3
	SWINGBED	2	3	5	2	3	1	4	5	5	1	1	1	2	3
	OUTPATIENT	1,190	916	733	826	1,102	1,043	581	630	634	607	582	633	615	776
	EMERGENCY ROOM	297	250	218	260	205	202	186	217	218	246	270	276	287	241
	CLINIC	427	461	471	495	454	449	380	510	453	442	482	472	588	468
~	NURSING HOME	3	0	0	0	1	1	1	0	1	0	2	4	0	1
	TOTAL	1,920	1,636	1,430	1,585	1,770	1,697	1,159	1,366	1,313	1,297	1,340	1,387	1,494	1492
Account Inventory	ACCOUNT INVENTORY	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	13 Month Average
2	MEDICARE	632	657	886	869	1,543	1,294	662	578	556	561	468	362	394	728
	MEDICAID	922	832	779	862	911	1,073	799	1,010	714	726	731	656	700	824
L T	COMMERCIAL	1,201	1,117	1,111	1,119	1,193	1,339	1,214	1,046	964	938	1,020	997	904	1089
2	WORK COMP	103	100	89	83	80	81	82	95	95	85	71	70	57	84
ပ ပ	SELF PAY TOTAL	3,271 6129	3,545 6251	3,862 6727	3,872 6805	4,058 7785	4,293 8080	4,408 7165	3,527 6256	3,505 5834	3,344 5654	3,173 5463	2,957 5042	2,855 4910	3590 6315
Ac		0129	0231	0/2/	0805	1185	0808	/103	0230	5054	5054	5403	5042	4910	0313
Admissions & ,	9000 8000 7000 6000 5000 4000 3000 2000	Accou	nt Invento	ory & Admis	ssions			1400 1200 1000 800 600 400 200		Ac	missions b	oy Service T	уре		

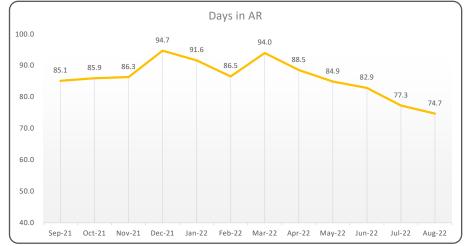
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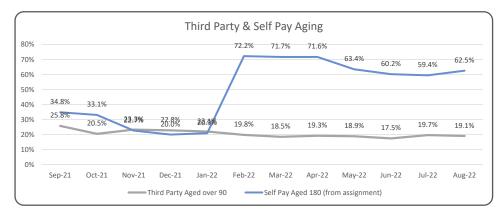
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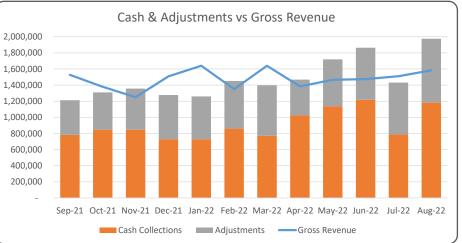


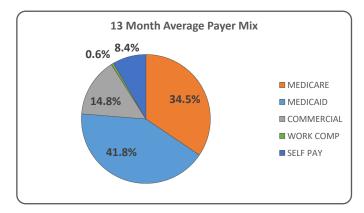
Southern Humboldt Community Healthcare District Executive Dashboard

	TARGET	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22
Days in AR	66.0	85.1	85.9	86.3	94.7	91.6	86.5	94.0	88.5	84.9	82.9	77.3	74.7
Gross AR		4,260,844	4,103,537	3,941,004	4,258,570	4,379,072	4,322,972	4,832,867	4,350,642	4,140,558	3,936,767	3,737,262	3,708,255
Gross Revenue		1,526,536	1,379,368	1,250,010	1,508,417	1,639,879	1,350,122	1,639,234	1,384,159	1,464,711	1,474,557	1,510,151	1,582,735
Cash Collections		782,067	847,125	845,077	729,186	727,607	859,954	770,454	1,024,101	1,137,769	1,217,580	786,503	1,182,187
Adjustments		430,532	461,817	511,680	547,667	531,378	591,522	626,184	443,517	581,700	646,293	644,797	792,749
Collection %		64.5%	64.7%	62.3%	57.1%	57.8%	59.2%	55.2%	69.8%	66.2%	65.3%	55.0%	59.9%
Late Charges	1%	0.0%	0.0%	2.2%	1.4%	0.3%	1.2%	0.0%	2.6%	0.6%	0.1%	1.6%	0.6%
Bad Debt	3%	0.5%	0.5%	12.7%	2.1%	0.0%	0.0%	2.2%	0.0%	1.9%	1.4%	0.8%	1.4%
Charity Care	3%	0.4%	0.2%	8.6%	0.4%	0.5%	0.2%	5.6%	6.3%	3.1%	13.5%	3.5%	5.1%
Third Party Aged over 90	14%	25.8%	20.5%	23.3%	22.8%	22.1%	19.8%	18.5%	19.3%	18.9%	17.5%	19.7%	19.1%
Self Pay Aged 180 (from assignment)	25%	34.8%	33.1%	22.7%	20.0%	20.9%	72.2%	71.7%	71.6%	63.4%	60.2%	59.4%	62.5%









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CNO BOARD REPORT August 2022 Thursday, September 18, 2022

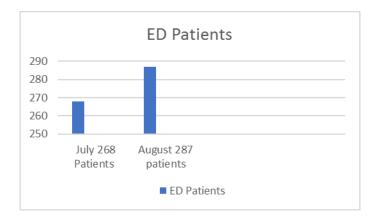
COVID update:

Covid 19 What's new?

The new COVID Booster: Pfizer is available for 12 years and older. The new booster is expected to increase protection for the new circulating omicron variant. Please get in touch with the Clinic for more information and availability. We follow the CDC COVID guidelines for precautions and isolation when testing positive for covid. The SNF residents continue to be free from covid, thanks to the consistent staff following all the infection prevention regulations and protocols. As Matt, our CEO, mentioned, "we have had good luck." We will continue following CDC COVID guidelines to keep residents, patients, and staff free from COVID.

ED/Acute:

The ED continues to serve the community by providing emergency care and outpatient services. There were 268 ED patients seen in the ED in July and 287 in August. There was a 7.09 % increase in the patient census from July to August.



The chart reflects the increase in ED patients from July to August and the rise in ED visits. And there were four OBS and two inpatients in August.

We have one new full-time RN that started in September and two new travelers RNs that will be with us for the next 13 weeks. We are training three newly graduated RNs, and the goal is to have no need for traveler RNs at the beginning of the new year. When the two travelers end their contracts, we will not need to replace them since the new RNs training will be ready to work on their own. Also, we hired an ED/Acute manager who will start in the third week of November. Our goal continues to be that our patients and the community get the highest quality of care, and when they come to our hospital, they can see that the care reflects excellence, compassion, and love.

Southern Humboldt Community Healthcare District · 733 Cedar Street · Garberville, CA 95542 · (707) 923-3921 · sohumhealth.org



Laboratory:

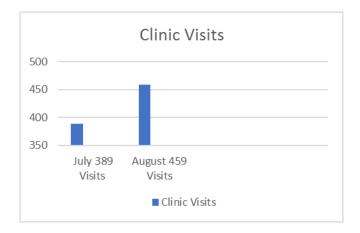
The lab has been embracing positive change and continues to have morning huddles twice a week and monthly lab meetings. The CBC analyzer stopped working and was repaired within two days. Redwood Memorial lab was able to help for those two days by running all our CBC labs, and we continued to provide care for our patients during that time. The lab is working with a new CBC analyzer as a backup, and it will be ready in about one to two weeks, so we do not have the same problem if the old analyzer breaks down again. The lab team continues to prepare for the surveyors who will survey the lab a second time. We are confident that we are preparing for the second survey.

Skills Nursing Facility:

The SNF is still at full capacity with eight residents and has been able to keep all the residents covid free until now. The biggest challenge Kim Simms, DON, has been having is keeping and recruiting nurses to work on the SNF. In the last schedule, the acute nurses worked in the SNF and helped by caring for the SNF residents. Also, Kim has been working on the floor as a nurse. We have four travelers LVNs who will start within the next two weeks, and we expect to have a full staff on the SNF for the new schedule. The residents have been having fun with their new planters outside and have beautiful flowers growing. It is an excellent place to relax and enjoy nature. The residents continue to get together for lunch daily, go on outings, and do fun activities.

Clinic:

The Clinic continues to provide excellent service to the community. The Clinic had 459 visits in August compared to 389 in July 2022.



The chart reflects the increased clinic visits from July to August.

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The Clinic delivers COVID vaccines every Wednesday. The Clinic continues to work on developing the "Behavioral Health Program," and Katy has been working on developing the program manual and the policies for the program. As soon as the policies and the program manual have been approved, we will call the State to come and review the program and look at the Sprowel Creek campus to get the proper licensing and start providing services. The mobile Clinic will be going to Shelter cove once a month to provide care to the community. The Clinic continuously offers covid vaccines every Wednesday. A new nurse Practitioner has been hired for the Clinic, and it will be starting soon. Also, a Physician Assistant has accepted an offer, and will be joining the team soon. The Clinic continues to look for a physician to join the clinic team and fill the vacancy Dr. Seth left when he departed. We celebrated with Linda the 25 years she has served this community, and we are so thankful for what she has done and is continuously doing for this community. Dr. Emily, Linda, PA, and Laura, FMP, are working together to provide excellent care to the community, and we are proud and thankful for the superb team we have in the Clinic.

Radiology

In August, Radiology performed 159 x-ray exams, 76 CTs, and 30 mammograms. The new mammography equipment installation has been updated to November by Hologic. The State has approved ultrasound. GE came for initial training on 9/15 and 9/16 with the Sonographer. She will continue to scan volunteers to become more comfortable with the new equipment. We hope to offer Ultrasound exams beginning 10/11.

Adelaida Vargas de Yanez, CNO