

GOVERNING BOARD MEETING

OPEN SESSION

August 29, 2024

*(In person and Via Webex
Conferencing)*

**Sprowel Creek Campus, Rm 105
286 Sprowel Creek Road
Garberville, CA 95542**



SoHum Health

Southern Humboldt Community Healthcare District

MEETING NOTICE

Governing Board

A regular meeting of the Board of Directors of the Southern Humboldt Community Healthcare District will be held on August 29, 2024, at 1:30 p.m., by teleconference and in-person. Members of the public may participate virtually via Webex or telephone, or appear in person at the Sprowel Creek Campus at 286 Sprowel Creek Road, Garberville, California 95542.

Call-In Information:

Tap to join from a mobile device (attendees only) [+1-415-655-0001,,25961264606##](tel:+1415655000125961264606) US Toll

Join by phone +1-415-655-0001 US Toll

Webex Link: <https://shchd.webex.com/shchd/j.php?MTID=m65c1024281b4ef67076bbe032ec5f0d9>

Written comments may also be sent to boardcomments@shchd.org. Comments received no later than two hours prior to the start of the meeting will be provided to the Board or may be read aloud or summarized during the meeting. Members of the public may also comment in real time during the meeting by attending in person or via Webex or phone.

Agenda

| Page | Item |
|------|--|
| | A. Call to Order |
| | B. Approval of the Teleconferencing of a Board Member |
| | C. Approval of the Agenda |
| | D. Public Comment on Non-Agendized Items See below for Public Comment Guidelines |
| | E. 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. |
| | F. Announcements |
| 1-10 | G. Approval of Consent Agenda – 1. Approval of Previous Minutes a. Governing Board Meeting Minutes, July 25, 2024 |

- b. Governing Board Meeting Minutes, July 29, 2024
 - 2. SHCHD New and Updated Policies - None
 - 3. Quarterly Reports - (Feb, May, Aug, Nov)
 - a. Quality and Risk Management – Kristen Rees, Chief Quality and Compliance Officer and Risk Manager – Not Received
- 11-13 b. Human Resources – Season Bradley Koskinen, HR Manager – See Report
- 14-20 c. Foundation – Chelsea Brown, Outreach Manager – See Report
- H. Correspondence, Suggestions, or Written Comments to the Board
- I. Last Action Items for Discussion - None
- J. Administrator’s Report – Matt Rees, CEO
 - 1. Department Updates
 - a. Milestones
 - b. August Employee Anniversaries – Matt Zail, Roberto Rodriguez-Aguirre, Alan French OD, Jacob Taylor, and Alyvia Nelson 1 Year.
 - c. Financial Reports – Paul Eves, CFO -See Supplemental Packet
 - d. Nursing – Adela Yanez, CNO
 - e. Quality and Risk Management – Kristen Rees, CQO
 - f. Family Resource Center – Amy Terrones – Mar and Oct
- 21-33
- 34-36
- K. Old Business
 - 1. 2024 Board Election
 - 2. ACHD 72nd Annual Meeting, September 25-27
 - 3. November Board Meeting Schedule
 - 37-42 4. Approval to Grant Signing Authority to Matt Rees for:
 - a. The ONRAD Agreement for the Provision of Credentialing, Privileging, and Quality Assurance Information Contract.
 - b. (SLS) - Psychiatric Medical Cares Credential by Proxy Agreement. - See Supplemental Packet
 - 43-44
- L. New Business
 - 1. Approval of Resolution 24:10 Fixing the Employer Contribution Under the Public Employees’ Medical and Hospital Care Act at an Equal Amount for Employees and Annuitants
700 all employees
 - 2. SoHum Health employee Benefits Update
 - 3. Strategic Items for Discussion
 - a. Strategic Planning Update
 - b. Future Facilities Planning
 - c. Services

M. Parking Lot

1. Sprowel Creek Campus parking

N. Meeting Evaluation

O. New Action Items

P. Next Meetings

1. Medical Staff Committee – Policy Development – Thursday, August 5, 2024, at 3:00 p.m
2. Medical Staff Committee – Thursday, September 12, 2024, 12:30 p.m.
3. QAPI Meeting – Wednesday, September 11, 2024, at 10:00 a.m.
4. Finance Committee – Friday, September 20, 2024, at 10:00 a.m.
5. Governing Board Meeting – Thursday, September 26, 2024, at 1:30 p.m.

Q. Adjourn to Closed Session

1. Closed Session
2. Reports of Quality Assurance Committees **[H&S Code § 32155]**
3. Compliance and Risk - Kristen Rees, CQO
4. Quarterly Reports - Adela Yanez, CNO
 - a. Clinic – Jan., Apr., July, Oct.
 - b. Patient Safety – Mar., June, Sept., Dec. – See Report
 - c. Medication Error – Feb., May, Aug., Dec.- See Report
5. Approval of Medical Staff Appointments/Reappointments **[H&S Code § 32155]**
 - a. Dr. Lawrence Gettler, Initial Appointment, with Emergency Department and Inpatient privileges and Provisional status, September 1, 2024, to August 31, 2025.
 - b. Dr. Surender Kurapati, Reappointment with Telemedicine privileges, including Mammography, September 1, 2024 to August 31, 2026.
 - c. Dr. PeiLin Reed, Reappointment with Telemedicine privileges, including Mammography, September 1, 2024 to August 31, 2026.

R. Adjourn Closed Session; Report on Any Action Taken, If Needed

S. Resume Open Session

T. Adjourn

Abbreviations

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

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. 1276 at least 48 hours prior to the meeting.”

**Times are estimated*

COPIES OF OPEN SESSION AGENDA ITEMS: Members of the public are welcome to see and obtain copies of the open session regular meeting documents by contacting SHCHD Administration

Governing Board Meeting Agenda

August 29, 2024

Page 5 of 5

at (707) 923-3921 ext. 1276 or stopping by 291 Sprowel Creek Rd, Garberville, CA 95542 during regular business hours. Copies may also be obtained on the District's website, sohumhealth.org.

Posted Monday, August 26, 2024

Governing Board

Date: Thursday, July 25, 2024
Time: 1:30 p.m.
Location: Sprowel Creek Campus and Via Webex Conferencing
Facilitator: Board President, Corinne Stromstad

Minutes

The following people attended at Sprowel Creek Campus and via Webex

Governing Board: Corinne Stromstad, Kevin Church, Barbara Truitt, Galen Latsko, and Jay Sooter, all in-person

Not Present: None

Also in person: CEO Matt Rees, Administrative Assistant Darrin Guerra, CFO Paul Eves, COO Kent Scown, CQO Kristen Rees, CNO Adela Yanez, PFS Manager Marie Brown, and OD Seth Miskin

Also via Webex: Chief of Staff Dr. Carl Hsu, Vice Chief of Staff Dr. Carl Hsu, HIM Manager Remy Quin, Quality Specialist Adam Dias, Medical Staff Coordinator Karen Johnson, and Radiology Director Lora Simone

A. Call to Order – Board president Corinne Stromstad called the meeting to order.

B. Approval of the Teleconferencing of a Board Member – None

C. Approval of the Agenda

Motion: Barbara Truitt motioned to approve the agenda.
Second: Galen Latsko
Ayes: Corinne Stromstad, Galen Latsko, Kevin Church, Jay Sooter, and Barbara Truitt
Noes: None
Not Present: None
Motion Carried

D. Public Comment on Non-Agenda Items - None

E. Board Member Comments – None

F. Announcements – None

G. Consent Agenda

1. Approval of Previous Minutes
 - a. Governing Board Meeting Minutes, June 27, 2024
2. SHCHD New and Updated Policies
 - a. Human Resources – Employee Handbook Policy - Season
 - b. HIM – Coding Guidelines - Remy
 - c. HIM - Medical Records Consultant – Remy
 - d. HIM – Security of Medical Records – Remy
3. Quarterly Reports – (Feb., May., Aug., Nov) - None
 - a. Quality and Risk Management – Kristen Rees, Chief Quality and Compliance Officer and Risk Manager
 - b. Human Resources – Rachel Wells, Interim HR Manager
 - c. Foundation – Chelsea Brown

Motion: Kevin Church motioned to approve the Consent Agenda
Second: Barbara Truitt
Ayes: Corinne Stromstad, Galen Latsko, Kevin Church, Jay Sooter, and Barbara Truitt
Noes: None
Not Present: None
Motion Carried

H. Correspondence Suggestions or Written Comments to the Board – None

I. Action Items for Discussion

1. Approval of Quality Compliance Plan and Associated Forms.
 - a. Board discussion regarding the changes that were made to the Quality Compliance Plan with CQO Kristen Rees ensued.
 - b. No action was taken.
2. Approval of the Operating Budget
 - a. Paul presented the 2024–2025 Operating Budget with the Board, confidently explaining why he views it as a thoughtfully conservative estimate.

Motion: Kevin Church motioned to approve the Operating Budget
Second: Barbara Truitt
Ayes: Corinne Stromstad, Galen Latsko, Kevin Church, Jay Sooter, and Barbara Truitt
Noes: None
Not Present: None
Motion Carried

3. Approval of the Medical Staff Bylaws – Changes Include Credentialing by Proxy, Technical and Editorial Corrections and Urgent Amendments – Karen Johnson
 - a. The Board expressed their desire to have large packets presented in person and that they be easier to navigate.

Motion: Kevin Church motioned to approve the Medical Staff Bylaws – Changes Include Credentialing by Proxy, Technical and Editorial Corrections, and Urgent Amendments with the removal of the word “information” from 2.2.6 and the complete removal of sections 12.2 and 12.3.

Second: Barbara Truitt

Ayes: Corinne Stromstad, Galen Latsko, Kevin Church, Jay Sooter, and Barbara Truitt

Noes: None

Not Present: None

Motion Carried

J. Administrator’s Report – Matt Rees, CEO

Matt Rees introduced Items 1-2 and presented his staff report.

1. Department Updates

a. Milestones

- i. Matt Rees informed the Board of the current power outage problems we are facing as we transfer over to our new generator system.

b. Employee Anniversaries

- i. The governing Board congratulated and presented Anniversary awards to Season Bradley-Koskinen 1 year, Ariel Rayco 5 years, and Jessica Little and Lora Simone 10 Years

c. Financial Reports – Paul Eves, CFO

- i. Board discussion with the administrative team centered on the ongoing issues with NetSuite and EPIC.
- ii. Marie Brown and Remy Quinn shared that HRG is currently making adjustments that will lower our AR.

d. Nursing – Adela Yanez, CNO

- i. Adela Yanez presented her Board report and informed the Board of our increase in Swing beds due to the addition of Occupational and Speech Therapy.

e. Quality and Risk Management – Kristen Rees, CQO

- i. Kristen Rees presented her staff report and announced that the QIP program will be merging with Cal-AIM.

f. Family Resource Center – Amy Terrones – (Mar and Oct)

K. Old Business

1. Hiring Doctors/Practitioners Update – Matt Reess

Matt Rees announced that we have sent offer letters to two Family Practice Physicians, and he expects them to start in the months of August and September.

L. New Business

1. Approval of Resolution 24:08 for the Ordering of a Levy of a Special Tax and for Approving Collections of this tax for the 2024-2025 fiscal year.

a. Paul presented the Annual Special Tax Resolution to the Governing Board.

Motion: Barbara Truitt motioned to approve Resolution 24:08 for the Ordering of a Levy of a Special Tax and for Approving Collections of this tax for the 2024-2025 fiscal year

Second: Jay Sooter

Ayes: Corinne Stromstad, Galen Latsko, Kevin Church, Jay Sooter, and Barbara Truitt

Noes: None

Not Present: None

Motion Carried

2. Approval of Resolution 24:09 for the offer, purchase price of \$30,300, and granting signature authority for Kent Scown, COO, for the following Real Properties APN 032-091-019, 032-091-016, 032-171-019, and 032-091-017 from the California Department of Transportation.

a. DD-5678-01-01

b. DD-6596-01-01

Motion: Barbara Truitt motioned to approve Resolution 24:09 for the offer, purchase price of \$30,300, and granting signature authority for Kent Scown, COO, for the following Real Properties APN 032-091-019, 032-091-016, 032-171-019, and 032-091-017 from the California Department of Transportation. DD-5678-01-01 and DD-6596-01-01

Second: Galen Latsko

Ayes: Corinne Stromstad, Galen Latsko, Kevin Church, Jay Sooter, and Barbara Truitt

Noes: None

Not Present: None

Motion Carried

3. Strategic Items for Discussion

a. Future Facilities Planning

b. Services

M. Parking Lot

N. Meeting Evaluation - Good

O. New Action Items

1. Quality Compliance Plan and Associated Forms.
2. Medical Staff Bylaws.
3. Approval of the Operating Budget

P. Next Meetings

1. Medical Staff Committee – Policy Development – Thursday, August 1, 2024, at 3:00 p.m.
2. Medical Staff Committee – Thursday, August 8, 2024, 12:30 p.m.
3. QAPI Meeting – Wednesday, August 14, 2024, at 10:00 a.m.
4. Finance Committee – Friday, August 23, 2024, at 10:00 a.m.
5. Governing Board Meeting – Thursday, August 29, 2024, at 1:30 p.m.

Q. Corinne Stromstad Adjourn to Closed Session

1. Closed Session Opened
2. Reports of Quality Assurance Committees **[H&S Code § 32155]**
3. Compliance and Risk - Kristen Rees, CQO
4. Quarterly Reports - Adela Yanez, CNO
 - a. Clinic – Jan., Apr., July, Oct.
 - b. Patient Safety – Mar., June, Sept., Dec.
 - c. Medication Error – Feb., May, Aug., Nov
5. Approval of Medical Staff Appointments/Reappointments **[H&S Code § 32155]**
 - a. Dr. Dennis McDonald, Reappointment as Telemedicine, Diagnostic Radiology and Mammography Privileges, August 1, 2024, to July 31, 2026.
6. Personnel matter –Evaluation § 54957 - None
 - a. CQO Kristen Rees

R. Corinne Stromstad Adjourned Closed Session

S. Corinne Stromstad Resumed Open Session

Motion: Galen Latsko motioned to approve Dr. Dennis McDonald's reappointment as Telemedicine, Diagnostic Radiology, and Mammography Privileges, August 1, 2024, to July 31, 2026.

Second: Kevin Church

Ayes: Corinne Stromstad, Galen Latsko, Kevin Church, Jay Sooter, and Barbara Truitt

Noes: None

Not Present: None

Motion Carried

T. Corinne Stromstad Adjourned Open Session

Submitted by Darrin Guerra

Abbreviations

| | | | |
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| <i>ACHD</i> | Association of California Healthcare Districts | <i>ACLS</i> | Advanced Cardiac Life Support Certification |
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| <i>JPCH</i> | Jerold Phelps Community Hospital | <i>LCSW</i> | Licensed Clinical Social Worker |
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| <i>PFS</i> | Patient Financial Services | <i>QAPI</i> | Quality Assurance Performance Improvement |
| <i>QIP</i> | Quality Improvement Project/Program | <i>RN</i> | Registered Nurse |
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SoHum Health

733 Cedar Street
Garberville, CA 95542
(707) 923-3921
shchd.org

Southern Humboldt Community Healthcare District

GOVERNING BOARD RESOLUTION 24:08

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 2024-2025

WHEREAS, on June 5, 2018, the voters of the Southern Humboldt Community Healthcare District (the "District") authorized the District's Board of Directors (the "Board") to levy a Special Tax of up to \$125 per qualified parcels, as defined in Resolution 18:04, to ensure continued local access to emergency room care, acute hospital care, community clinic, skilled nursing facility, laboratory services, physical therapy, CT, x-ray, mammography imaging services, visiting nurse program, and other health care services for residents of the District and visitors to the area, WHEREAS, the District's budget for Fiscal Year 2024-2025 requires a Special Tax rate of \$125 per qualified parcel,

NOW, THEREFORE, IT IS RESOLVED by the Board of Directors of the District as follows:

1. The Board hereby authorizes the levy of a Special Tax at the authorized rate of \$125 per qualified parcel in the District for Fiscal Year 2024-2025.
2. The Special Tax shall be collected in the same manner and subject to the same penalties as ad valorem property taxes by the Humboldt County Treasurer-Tax Collector.
3. The Board hereby directs the Humboldt County Auditor-Controller to place the Special Tax on the Humboldt County tax roll for Fiscal Year 2024-25.

THE FOREGOING RESOLUTION WAS ADOPTED upon motion of Barbara Truitt, Seconded by Jay Soater of the Southern Humboldt Community Healthcare District Governing Board at a Board meeting held on the 25th day of July, 2024, by the following roll call vote:

Ayes: Corinne Stromstad, Kevin Church, Barbara Truitt, Galen Laatsko, and Jay Soater

Noes: _____

Abstain: _____

Absent: _____

Corinne Stromstad
Witnessed by:

Barbara Truitt
Witnessed by:



SoHum Health

733 Cedar Street
Garberville, CA 95542
(707) 923-3921
shchd.org

Southern Humboldt Community Healthcare District

GOVERNING BOARD RESOLUTION

24:09

APPROVAL OF THE PURCHASE PRICE AND SIGNATURE AUTHORITY FOR PURCHASE OF PARCELS 032-091-019, 032-091-016, 032-171-019, AND 032-091-017 FROM THE CALIFORNIA DEPARTMENT OF TRANSPORTATION.

WHEREAS, the Southern Humboldt Community Healthcare District (the "District") ... and

WHEREAS, the purchase of the properties, parcel numbers 032-091-019, 032-091-016, 032-171-019, and 032-091-017 in Garberville, California, require a resolution for the purchase and signature authority,

NOW, THEREFORE, IT IS RESOLVED by the Board of Directors of the District as follows:

1. The Board hereby authorizes the purchase of parcel numbers 032-091-019, 032-091-016, 032-171-019, and 032-091-017 in Garberville, California, in the amount of \$30,300.00 from the California Department of Transportation.
2. The Board hereby authorizes signature authority for this purchase to Kent Scown, Chief Operating Officer for the District.

THE FOREGOING RESOLUTION WAS ADOPTED upon motion of Barbara Truitt,
Seconded by Galen Latsko of the Southern Humboldt Community Healthcare District Governing Board at the regular board meeting held on the 26th day of July 2024, by the following roll call vote:

Ayes: Barbara Truitt, Kevin Church, Galen Latsko, Corinne Stromstad, and Jay Senter

Noes: _____

Abstain: _____

Absent: _____

Corinne Stromstad
Witnessed by: Corinne Stromstad, President

Barbara Truitt
Witnessed by: Barbara Truitt, Vice President/Secretary

Special Governing Board Meeting

Date: Tuesday, July 29, 2024
Time: 12:00 p.m.
Location: Sprowel Creek Campus and Via Webex Conferencing
Facilitator: Board President, Corinne Stromstad

Minutes

The following people attended at Sprowel Creek Campus and via Webex

Governing Board: Corinne Stromstad, Barbara Truitt, Kevin Church, and Jay Sooter in-person

Not Present: Galen Latsko

Also in person: CQO Kristen Rees

Also via Webex: None

A. Call to Order – Board president Corinne Stromstad called the meeting to order.

B. Approval of the Teleconferencing of a Board Member – None

C. Approval of the Agenda –

Motion: Kevin Church made a motion to approve the agenda.
Second: Barbara Truitt
Ayes: Corinne Stromstad, Jay Sooter, Kevin Church, and Barbara Truitt
Noes: None
Not Present: Galen Latsko
Motion carried

D. Public Comment on Non-Agendized Items - None

E. Board Member Comments - None

F. Announcements - None

G. New Business - None

H. Board president Corinne Stromstad Adjourned to Closed Session.

I. Closed Session

1. Personnel Matter –Evaluation § 54957

a. Kristen Rees

J. Corinne Stromstad Adjourned Closed Session

K. Corrine Stromstad Resumed Open Session

1. No actions were taken in Closed Session

L. Corinne Stromstad Adjourned Open Session

Submitted by Darrin Guerra

Abbreviations

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SoHum Health

HUMAN RESOURCES QUARTERLY REPORT Q2

Statistics

| | April | May | June | Qtr Total |
|-----------------------------|-------|-----|------|-----------|
| New Hires | 3 | 6 | 3 | 12 |
| Separations from Employment | | 1 | 1 | 2 |
| Injuries/Illness | 1 | 2 | 4 | 7 |

Second Quarter Separation Reasons

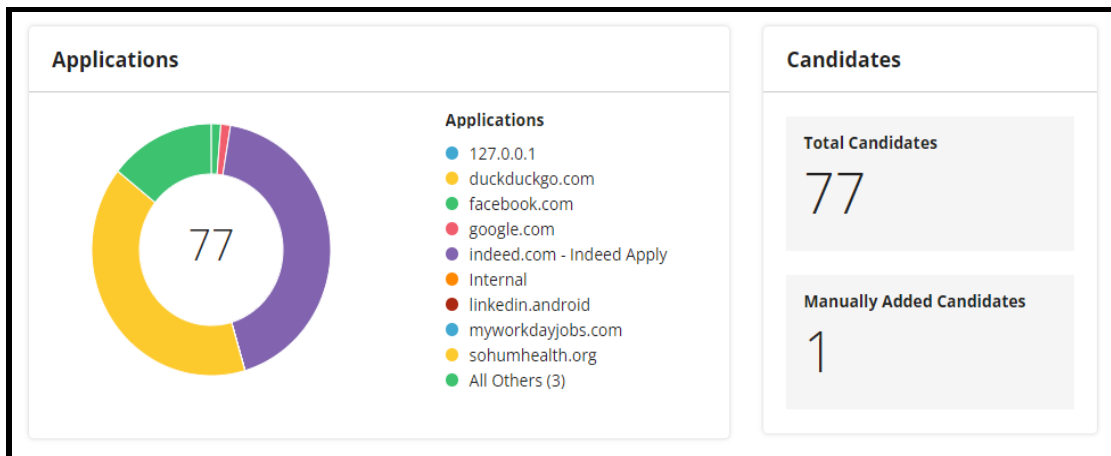
Moved – 1; Retired – 0; Other -- 1

We had two employees leave the District during Q2, and their exit interview reasons were other (1).

Recruiting

We posted 5 new jobs and had 24 total published jobs during Quarter two.

One of HR's key focus areas is to broaden the reach of our job postings, thereby expanding our pool of applicants to include a more diverse and extensive range of candidates. This initiative aims to provide our hiring managers with a larger selection of highly qualified applicants to choose from and fill the open position faster.



We received applications from the following sources:

The average time to fill a position is currently 95 days.

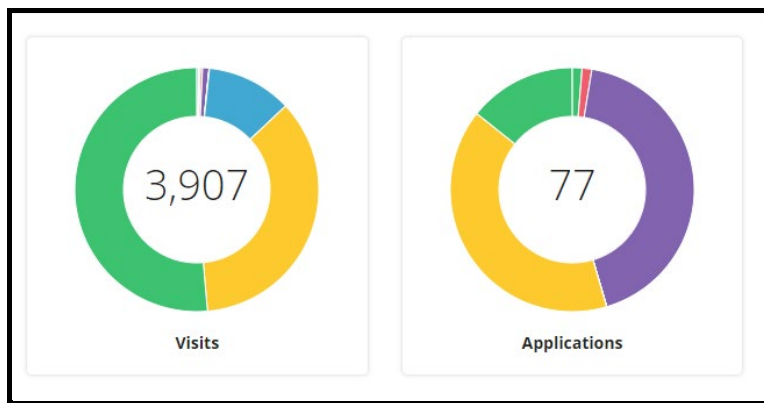
The quickest position to fill was the Quality Department Clerk, with an average time of 14 days to hire for two positions.

In contrast, the position of Licensed Clinical Social Worker took the longest to fill, with an average time of 496 days for one position. Additionally, two candidates have received offers and are currently in the process of obtaining their California licenses. These candidates, who applied outside of Q2, have not yet been onboarded. The candidate who applied in Q2 has successfully completed onboarding and is currently employed.

Please note that these averages exclude the time required for background checks and employee health physicals after the candidate moves to onboard status.

Candidate Source Detail

To broaden our reach, we are exploring how many visits sources are getting and what sources our applicants are coming from. We will focus on changing how we post positions to increase visits.



| Source* | Visits | Applications | Hired |
|---------------------------|--------|--------------|-------|
| 127.0.0.1 | 10 | 0 | 0 |
| duckduckgo.com | 3 | 0 | 0 |
| facebook.com | 6 | 1 | 1 |
| google.com | 11 | 1 | 0 |
| indeed.com - Indeed Apply | 33 | 33 | 0 |
| Internal | 1 | 0 | 0 |
| linkedin.android | 1 | 0 | 0 |
| myworkdayjobs.com | 442 | 0 | 0 |
| sohumhealth.org | 1,392 | 31 | 9 |
| All Others (3) | 2,008 | 11 | 8 |

* Top 10 sources displayed.



SoHum Health

Summary

Entry-level positions are generally easier to fill compared to credentialed, certified, licensed, and highly specialized roles. This trend is evident within the District and is supported by our Average Time to Fill reports. To address this, HR will continue to prioritize building talent pipelines in Humboldt and surrounding counties by actively participating in career fairs at colleges and universities and ensuring that we are leveraging the most popular career boards. We will also keep our job postings current and appealing to the demographic of newly graduating applicants. Additionally, we will explore other networking sources to keep SoHum Health at the forefront of local professionals' minds.

We will also maintain our focus on supporting career pathing for employees, helping them advance to higher positions and thereby building a strong internal pipeline. As the CARES Act's \$5,250 loan reimbursement benefit is set to expire on December 31, 2025, HR will review the Reimbursement of Education and Student Loan Debt Repayment policy prior to that date. Since student loan reimbursement has proven to be an effective recruiting tool, continuing this support could enhance our recruitment efforts.

Governing Board Report

Submitted by Chelsea Brown

Development Director & Outreach Manager

August 2024



Foundation Report:

- **Benbow Wine Auction – Saturday, November 9th 2-6pm** The Foundation will be partnering to hold the Benbow Wine Auction again. Sponsorship and auction item requests are underway.
- Since the close of the second quarter (June 30th) the Foundation has received \$60,000 in pledge payments and had two donors re-up their pledges for an additional \$45,000. We also received an anonymous \$25,000 donation in memory of Peggy Andrews.
- The June fundraising mailer sent to all SoHum Health’s active patients generated \$3,855 in returns and attracted 5 first-time donors.
- Development Director Chelsea Brown is attending a grant writing training for Critical Access Hospitals put on by HCAI Aug. 27-28th in Sacramento.
- SoHum Health has posted a full-time Grant Writer position who will work under the Development Director to expand and formalize the District’s grant-seeking efforts.

Outreach Report:

- **Holding Space - Friday, September 6th 5:30-7pm at Garberville Town Square**
The Family Resource Center will host their Annual Holding Space event for suicide prevention and awareness. There will be an enchilada dinner, music, and an open mic for people to talk about their experiences or read a poem if they wish. Free.
- **Blood Donation Drive – Tuesday, September 24th at Garberville Pharmacy** in partnership with Garberville Rotary.
- Heidi and Chelsea attended a social media engagement training put on by FEMA at Blue Lake Rancheria in June. We learned a lot and are implementing many of the new engagement strategies on our fb and Instagram.

- We have developed a map of Southern Humboldt to put in the empty Humboldt Hunnies storefront and also developed a brochure version to distribute. (see following pages)
- *New Hospital Outreach*: Developed a Community Update to distribute. Draft plans are on our website. Ratcliff Architects continue to hold user group meetings to finalize the designs, which will be submitted to the state for permitting and approval in mid-2025.
- SoHum Health will be tabling at North Country Fair in Arcata on September 21st.

| 2nd Quarter (Apr-May-Jun) | Beginning Balance | Income | Expense | Quarterly Ending Balance |
|----------------------------------|-------------------|---------------|-----------------|--------------------------|
| HAF Mid-Term | \$ 732,126.73 | \$ - | \$ - | \$ 732,126.73 |
| Vocality Savings | \$ 81.60 | \$ - | \$ - | \$ 81.60 |
| Vocality Checking | \$ 27,460.03 | \$ 201,464.05 | \$ (198,918.25) | \$ 30,005.83 |
| Vocality Money Market | \$ 868,860.97 | \$ 21,097.92 | \$ (200,000.00) | \$ 689,958.89 |
| Vocality CD 01 (24mo) | \$ 195,798.40 | \$ 1,937.63 | \$ - | \$ 197,736.03 |
| Vocality CD 02 (18mo) | \$ 52,800.33 | \$ 1,157.95 | \$ - | \$ 53,958.28 |
| Coast Central Savings | \$ 25.00 | \$ - | \$ - | \$ 25.00 |
| Totals | \$ 1,877,153.06 | \$ 225,657.55 | \$ (398,918.25) | \$ 1,703,892.36 |

Southern Humboldt Family Resource Center
& SoHum Health present

H O L D I N G S P A C E :

for suicide prevention & awareness

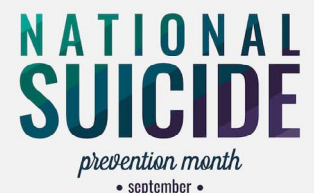
Friday, September 6th
Garberville Town Square
5-7pm

*To support the ones we love and
remember the ones we've lost.*

Food | Community Space | Music

Bring a photo or item to remember your loved one, if
you wish. Mental health resources onsite.

If you are interested in volunteering or speaking at
this event, please contact (707) 923-1147
or FRC@shchd.org.





IT'S MORE THAN
JUST TREES!

Explore! there's much to see and do. We invite you to discover Southern Humboldt and our points of interest.

● FOOD
● GAS

● LODGING
● RV/CAMPING

● VISITOR CENTERS
● WINERY/BREWERY



August 2024 - SoHum Health Enters Next Design Phase for Construction of New Community Hospital and Clinic in Garberville

SoHum Health and the Ratcliff Architect team are pleased to share the draft architectural designs for a new, modern two-story healthcare facility to serve Southern Humboldt and surrounding communities. Our facility will be split into two distinct parts—a hospital and a primary care clinic—located at 286 Sprowel Creek Road in Garberville, CA. The facility will replace our current Garberville Hospital and Clinic, which is unable to meet pending seismic requirements. The Redwood Playhouse building will remain intact, and house additional health services and meeting rooms.



Hospital | roughly 30,000 square feet

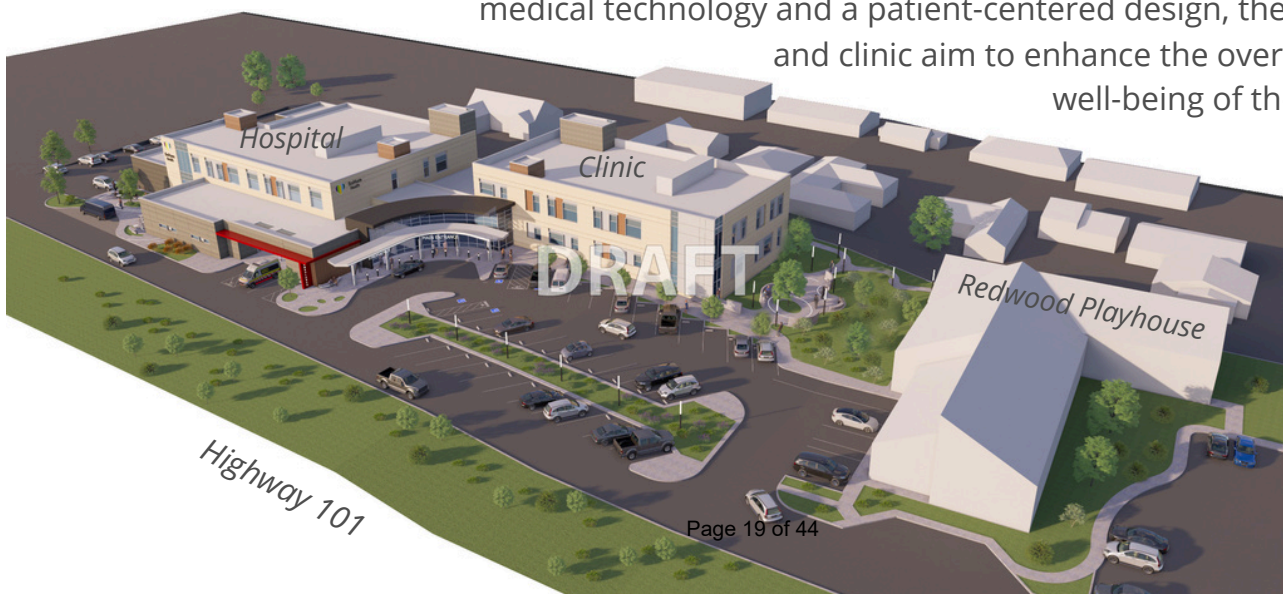
- Emergency Department with 8 beds
- Radiology services: X-Ray, CT, Ultrasound, Mobile MRI
- Full-service Laboratory
- Dining options with outdoor seating area
- 2nd floor inpatient nursing unit with ten beds
- Helistop for expedited patient transfers



Community Clinic | roughly 15,000 square feet

- Full-service primary care facility
- Two specialty treatment rooms and twelve exam rooms
- Mammography suite
- Bone density scanning
- 2nd Floor outpatient surgery suite
- Meditation Park: peaceful outdoor space for patients and families

SoHum Health is committed to ensuring that this new facility will significantly improve healthcare services for the Southern Humboldt community and neighboring areas. By integrating modern medical technology and a patient-centered design, the new hospital and clinic aim to enhance the overall health and well-being of the community.



Costs & Community Involvement

The total cost of the project has increased with rising building costs, inflation, and challenges finding qualified contractors in rural Humboldt County. The cost is presently estimated at \$75,000,000. SoHum Health Foundation continues to seek additional grant funding, as well as donations from local individuals, businesses, and organizations to offset the costs of this project and reduce the long-term debt burden for the Healthcare District. The remaining balance will be financed by a 40-year USDA loan.

SoHum Health Foundation urges you to be a part of this community endeavor! Please consider making a contribution today to help us save more lives and improve the health of our community.

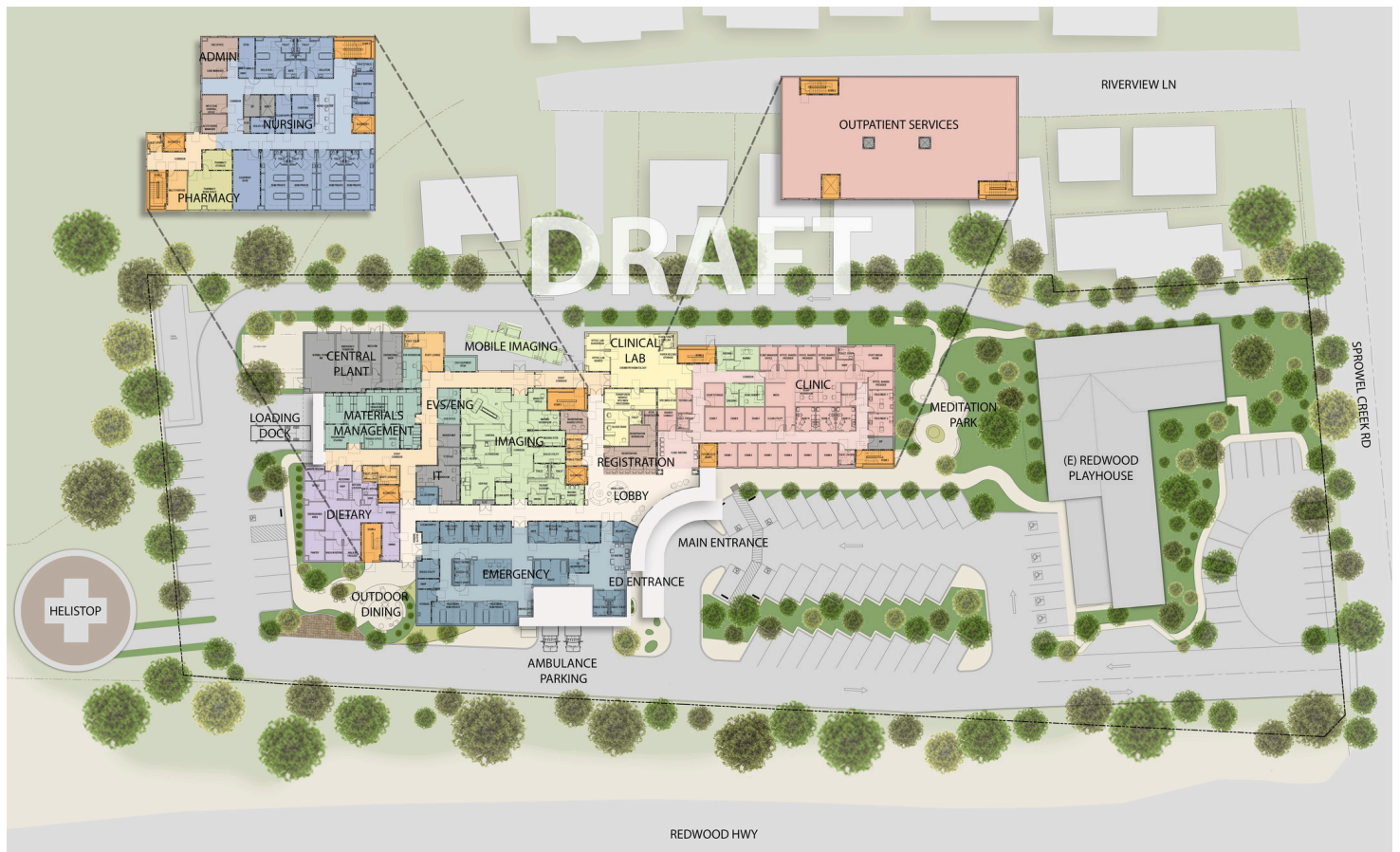
Donation Website: sohumhealthfoundation.org

Contact: foundation@shchd.org | (707) 923-3921 x1241

Project Timeline

| 2023 | 2024 | 2025 | 2026 | 2027 | 2028 | 2029 |
|------------------|--------------------------------------|------------------------|-----------------------|------|----------------------------------|------|
| Program/ Site | Design and Documentation (22 mos) | Permit/Bid (11 mos) | Construction (24 mos) | | Closeout / Move-In (6 mos) | |

Ratcliff Architects will continue to hold meetings with our local Steering Committee and key staff to fine-tune the designs and ensure they meet the needs of our patients and staff, as well as State and County regulations. In mid-2025, the designs will be submitted to the State for permitting. Upon acquiring the proper permits and financing, the project will be put out to bid. Groundbreaking is projected to occur in 2026, with construction completion in late 2028.



Mission

Caring for the community we're privileged to serve.

Vision

To empower individuals to live longer, healthier lives.

Core Values

Caring | Quality
Teamwork | Positivity



Southern Humboldt Community Healthcare District

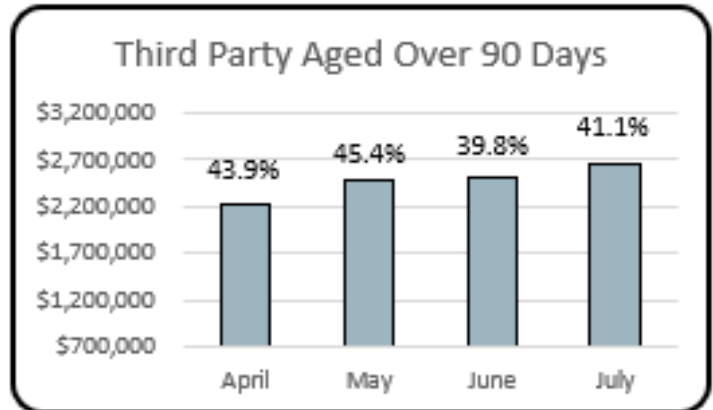
July 2024 – Centriq & Epic Combined



SoHum Health

Key Items

- ➔ Cash totaled \$1.5M, 117% of net revenue
- ➔ AR decreased to 94.2 days
- ➔ Third Party aging increased \$127K, to 41.1%
- ➔ Unbilled AR decreased 1.4 days, ending at 14.5 days



Detailed Initiatives & Obstacles

- **Overall AR:** The figures calculated continue to include both the legacy system (Centriq) and Epic figures combined. July closed with \$8.1M in gross AR or 94.2 days. Revenue was \$218K higher than reported in June, ending at \$2.9M. Third Party AR saw an increase of 0.3 days ending at 58.9 days. Unbilled AR decreased by 1.4 days ending at 14.5 AR days. Cash collections came in roughly \$437K higher than June, exceeding \$1.5M, or 117% of net revenue.
- **Self Pay:** Self Pay AR remained the same as we saw in June, remaining at 20.9 AR days. Self Pay collections came in at \$51K, \$18K more than what was collected in June. In July, there was \$12K sent to bad debt. We estimate a \$250K Bad debt turn in August between Epic and Centriq. Our self-pay Manager did a Centriq audit in August and expects to have Bad Debt inventory finalized and transferred by the end of September. There are \$22K in Centriq payment plans through December 2024.
- **Third-Party Aging:** July closed with \$2.6M in third-party balances aged over 90 days, totaling 41.1%. Due to SoHum's EHR conversion, we continue the wind-down phase of Centriq—cleaning up outstanding and aged balances. We have assigned staff-specific accounts to work by high dollars and will continue until we see the desired reduction in AR. Medicare ended at \$291K aged over 90 days or 19.8%, this is an overall decrease of \$137K from June or a 8.8% decrease. Currently, Sydni is a working supervisor and responsible for the Medicare AR as well as the LTC. We have a new hire starting in August who will be taking over Medicare and Medicare Advantage to allow Sydni to focus on other areas. Medicaid increased by \$106K up to 39.9%. Commercial increased by \$154K increasing its overall percentage to 63.5%, and Work Comp decreased by roughly \$3K down to 26%. Below is a breakdown of the current issues holding up AR.
- **Anthem Issue:** \$447K in accounts pending repayment due to an incorrect pay-to address. We were working with Anthem on repayments and are no longer receiving responses. This has been escalated to the SoHum team as it is impacting 5.1 days in AR and may need to be escalated to Matt Rees to contact someone higher up. This will be escalated if we do not receive a response from our contact by the end of August. The most recent ETA is for August 31st and we are pending a response to clarify if this is when the funds will be released.
- **Correct Care:** The Correct Care contract is signed and we are working with the payer to receive payments. There are currently 14 accounts totaling \$55K, or .6 days in pending AR.



If you have any questions, concerns, or points you wish to discuss after reviewing the enclosed information, please feel free to contact me.

Sydni Thomas | Revenue Cycle Supervisor

Healthcare Resource Group

Office 509-703-4920 | sythomas@hrgpros.com



SoHum Health

MONTH END FINANCE REPORT

July 2024



Table of Contents

| | |
|------------------------------|----------|
| Finance Dashboard..... | Page 2 |
| Revenue Detail..... | Page 3 |
| Cash Detail..... | Page 4 |
| Cash Forecasting..... | Page 5 |
| Accounts Receivable..... | Page 6-7 |
| Denial Management..... | Page 8 |
| Claim Submit Efficiency..... | Page 9 |
| Admits & Unbilled..... | Page 10 |
| Executive Dashboard..... | Page 11 |

FINANCE DASHBOARD

| | Target | February-24 | March-24 | April-24 | May-24 | June-24 | July-24 |
|--|-------------------|-------------|-------------|-------------|--------------|-------------|-------------|
| REVENUE | | | | | | | |
| Net Revenue | | \$1,360,721 | \$1,015,411 | \$1,139,524 | \$1,211,309 | \$1,290,770 | \$1,504,916 |
| Gross Revenue | | \$2,422,995 | \$2,021,182 | \$2,266,954 | \$2,406,584 | \$2,673,513 | \$2,891,588 |
| CASH | | | | | | | |
| Cash Collections as a % of Net Revenue | 100% | 102% | 81% | 119% | 90% | 88% | 117% |
| Cash Collections | | \$1,391,162 | \$1,095,888 | \$1,213,098 | \$1,023,598 | \$1,069,835 | \$1,507,305 |
| ACCOUNTS RECEIVABLE | | | | | | | |
| Net AR | | \$3,653,343 | \$3,348,215 | \$2,912,953 | \$3,470,980 | \$3,112,865 | \$3,847,902 |
| Gross AR | | \$7,052,380 | \$6,946,485 | \$6,645,338 | \$7,288,529 | \$7,701,902 | \$8,162,895 |
| Unbilled | 3 | 13.8 | 14.9 | 13.3 | 17.1 | 15.9 | 14.5 |
| Third Party | 26 | 47.4 | 46.9 | 50.5 | 56.6 | 58.6 | 58.9 |
| Self Pay | 16 | 26.3 | 29.2 | 25.3 | 26.5 | 20.9 | 20.9 |
| Total Days in AR | 45 | 87.5 | 90.9 | 89.1 | 100.2 | 95.4 | 94.2 |
| Days in AR - Credit Balances | < 1 | 3.83 | 1.96 | 4.26 | 2.39 | 4.39 | 1.47 |
| UNBILLED | | | | | | | |
| In-house | < 2 Days | 0.7 | 0.5 | 0.1 | 1.7 | 0.5 | 0.9 |
| DNFB | < 1 Day | 13.1 | 14.4 | 13.2 | 15.4 | 15.4 | 13.5 |
| Total Unbilled | <3 Days | 13.8 | 14.9 | 13.3 | 17.1 | 15.9 | 14.5 |

| | Target | February-24 | March-24 | April-24 | May-24 | June-24 | July-24 |
|---|-------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| AGING (excluding credits) | | | | | | | |
| Medicare Aging > 90 Days | 11% | 30.5% | 33.1% | 46.0% | 36.2% | 28.6% | 19.8% |
| Medicaid Aging > 90 Days | 12% | 32.3% | 37.7% | 36.5% | 43.2% | 36.9% | 39.9% |
| Commercial Aging > 90 Days | 20% | 46.7% | 53.8% | 54.6% | 58.2% | 55.9% | 63.5% |
| Work Comp Aging > 90 Days | 35% | 42.9% | 55.0% | 51.0% | 37.4% | 37.9% | 26.0% |
| Total Third Party Aging > 90 Days | 13% | 35.0% | 40.5% | 43.9% | 45.4% | 39.8% | 41.1% |
| CLAIM SUBMISSION EFFICIENCY | | | | | | | |
| Claims Submission | | 1,727 \$ 3,091,516 | 1,538 \$ 2,803,341 | 1,763 \$ 2,760,024 | 1,533 \$ 2,578,338 | 1,997 \$ 3,466,200 | 2,008 \$ 3,317,829 |
| Clean Claims | 85% | 96% | 97% | 97% | 99% | 99% | 98% |
| Denial Percent | 5% | 9% | 9% | 10% | 8% | 6% | 5% |
| Total Denial Rate | Count Amt | 308 \$ 249,006 | 234 \$ 279,308 | 333 \$ 267,412 | 354 \$ 231,110 | 224 \$ 149,538 | 286 \$ 186,322 |
| Late Charges | Count Amt | 28 \$ 7,746 | 52 \$ (8,444) | 81 \$ (18,541) | 43 \$ (46,904) | 304 \$ 78,745 | 222 \$ 36,879 |
| Communication Log Backlog | | 21 \$ 40,392 | 34 \$ 49,032 | 36 \$ 56,297 | 8 \$ 7,792 | 4 \$ 4,864 | 4 \$ 4,864 |

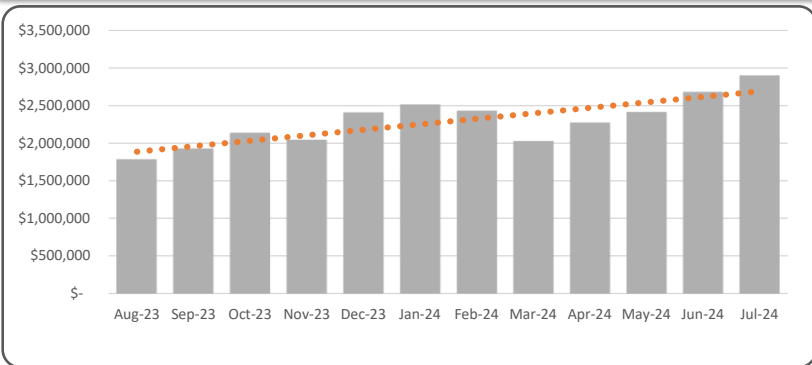
| | Target | February-24 | March-24 | April-24 | May-24 | June-24 | July-24 |
|--------------------------------------|--------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| INVENTORY & QUALITY | | | | | | | |
| Total Inventory | | 2,500 \$ 2,122,365 | 2,537 \$ 2,228,193 | 2,078 \$ 1,883,672 | 2,146 \$ 1,926,672 | 1,776 \$ 1,684,185 | 1,800 \$ 1,809,858 |
| New | | 5 \$ 2,109 | 12 \$ 6,485 | 7 \$ 3,278 | 0 \$ - | 2 \$ 8,577 | 0 \$ - |
| Resolved | | 117 \$ 108,550 | 124 \$ 73,203 | 20 \$ 14,167 | 556 \$ 479,902 | 436 \$ 243,260 | 0 \$ - |
| Aged >180 days from Discharge | < 25% | 62.7% | 68.4% | 64.9% | 64.8% | 64.2% | 62.4% |
| Total Payment Plans over 120 days | | \$18,662 | \$19,950 | \$18,943 | \$18,173 | \$14,980 | \$0 |
| Average Speed to Answer | < 60 seconds | 7 | 10 | 30 | 34 | 23 | 24 |
| STATEMENTS & LETTERS | | | | | | | |
| Statements & Letters | | 296 | 250 | 115 | 101 | 176 | 0 |
| Charity Care Applications In Process | | 26 \$ 70,997 | 80 \$ 30,398 | 0 \$ - | 14 \$ 2,757 | 1 \$ 340 | 0 \$ - |
| Inbound and Outbound Calls | In Out | 136 209 | 140 190 | 128 216 | 169 672 | 166 276 | 203 789 |
| WRITE OFFS | | | | | | | |
| Bad Debt as a % of Gross Revenue | < 2% | 2.2% | 0.0% | 21.1% | 0.0% | 9.3% | 0.4% |
| Charity as a % of Gross Revenue | < 2% | 0.4% | 0.5% | 0.4% | 0.0% | 0.4% | 0.0% |

Updated Self Pay to reflect Aged over 180 from date of service opposed to date of assignment which was previously used for Centriq. Updated to reflect data in Epic. Statements, letters and payment plans are also using an old calculation for Centriq opposed to Epic. Reviewing Epic for report to present total statements for both Epic and Centriq and will backfill once received.

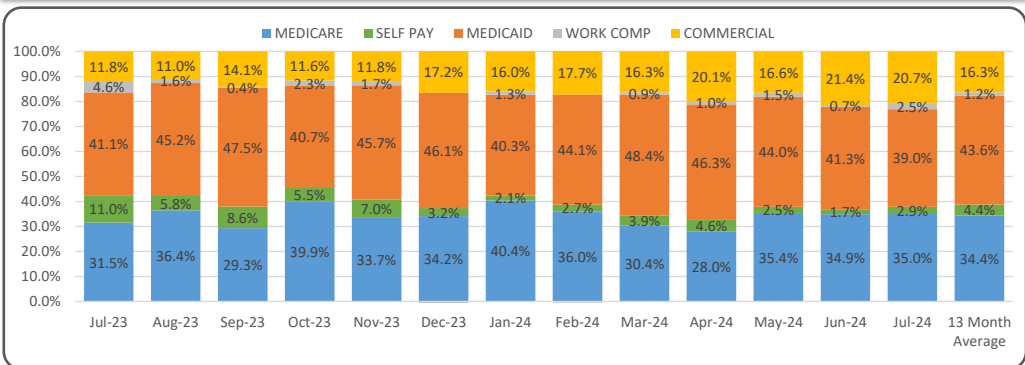
GROSS REVENUE

| PAYER | Jul-23 | Aug-23 | Sep-23 | Oct-23 | Nov-23 | Dec-23 | Jan-24 | Feb-24 | Mar-24 | Apr-24 | May-24 | Jun-24 | Jul-24 | 13 Month Average |
|------------------------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|------------------|
| MEDICARE | \$ 504,094 | \$ 648,555 | \$ 563,819 | \$ 849,853 | \$ 686,408 | \$ 820,695 | \$ 1,011,885 | \$ 873,176 | \$ 615,389 | \$ 635,762 | \$ 852,190 | \$ 933,285 | \$ 1,010,801 | \$ 769,686 |
| MEDICAID | \$ 658,441 | \$ 805,092 | \$ 913,825 | \$ 867,885 | \$ 930,946 | \$ 1,108,246 | \$ 1,008,861 | \$ 1,067,416 | \$ 978,875 | \$ 1,048,651 | \$ 1,059,248 | \$ 1,103,495 | \$ 1,128,400 | \$ 975,337 |
| COMMERCIAL | \$ 189,003 | \$ 196,363 | \$ 271,079 | \$ 247,190 | \$ 241,360 | \$ 413,697 | \$ 402,037 | \$ 429,688 | \$ 329,806 | \$ 456,749 | \$ 398,468 | \$ 572,709 | \$ 597,354 | \$ 365,039 |
| WORK COMP | \$ 73,141 | \$ 28,402 | \$ 8,619 | \$ 48,010 | \$ 35,245 | \$ (17,130) | \$ 32,033 | \$ (12,352) | \$ 18,728 | \$ 22,422 | \$ 37,168 | \$ 17,509 | \$ 71,038 | \$ 27,910 |
| SELF PAY | \$ 175,618 | \$ 102,746 | \$ 164,957 | \$ 117,250 | \$ 143,534 | \$ 76,560 | \$ 51,516 | \$ 65,067 | \$ 78,384 | \$ 103,370 | \$ 59,510 | \$ 46,514 | \$ 83,996 | \$ 97,617 |
| TOTAL | \$ 1,600,297 | \$ 1,781,158 | \$ 1,922,299 | \$ 2,130,187 | \$ 2,037,494 | \$ 2,402,068 | \$ 2,506,331 | \$ 2,422,995 | \$ 2,021,182 | \$ 2,266,954 | \$ 2,406,584 | \$ 2,673,513 | \$ 2,891,588 | \$ 2,235,589 |
| AVERAGE DAILY REVENUE | \$ 59,681 | \$ 58,817 | \$ 55,829 | \$ 61,407 | \$ 65,484 | \$ 71,410 | \$ 75,499 | \$ 80,565 | \$ 76,379 | \$ 74,568 | \$ 72,769 | \$ 80,737 | \$ 86,649 | \$ 70,753 |

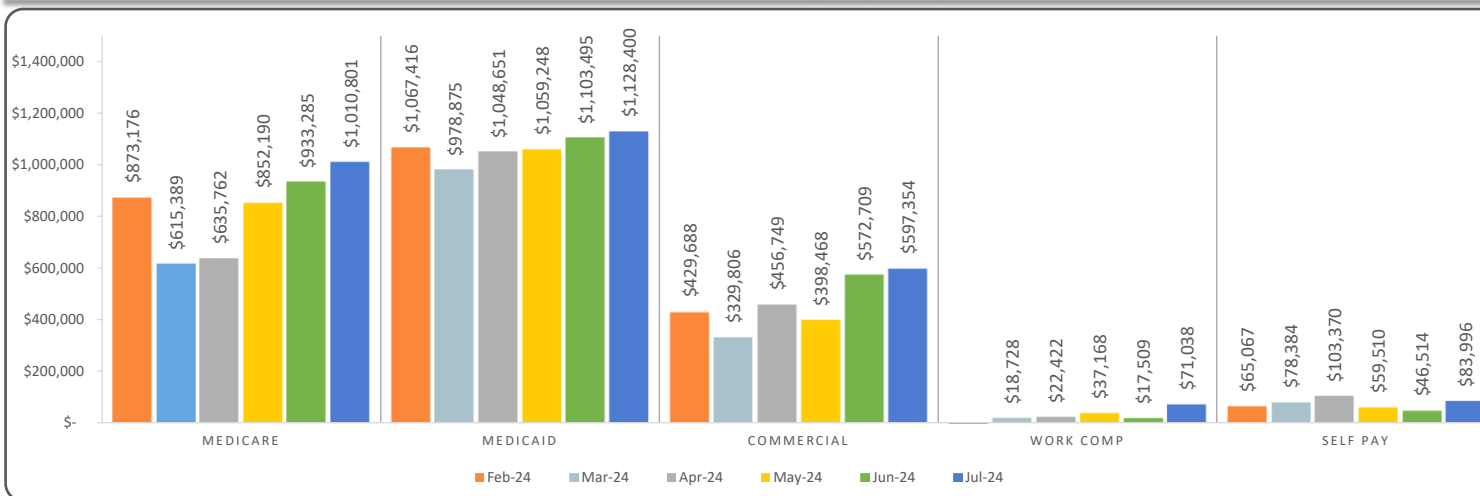
Gross Revenue



Payer Mix



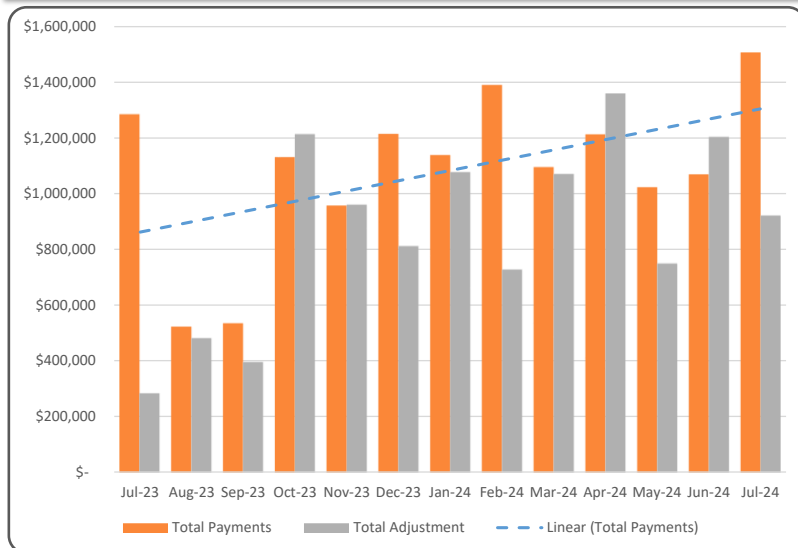
Revenue Trending By Payer



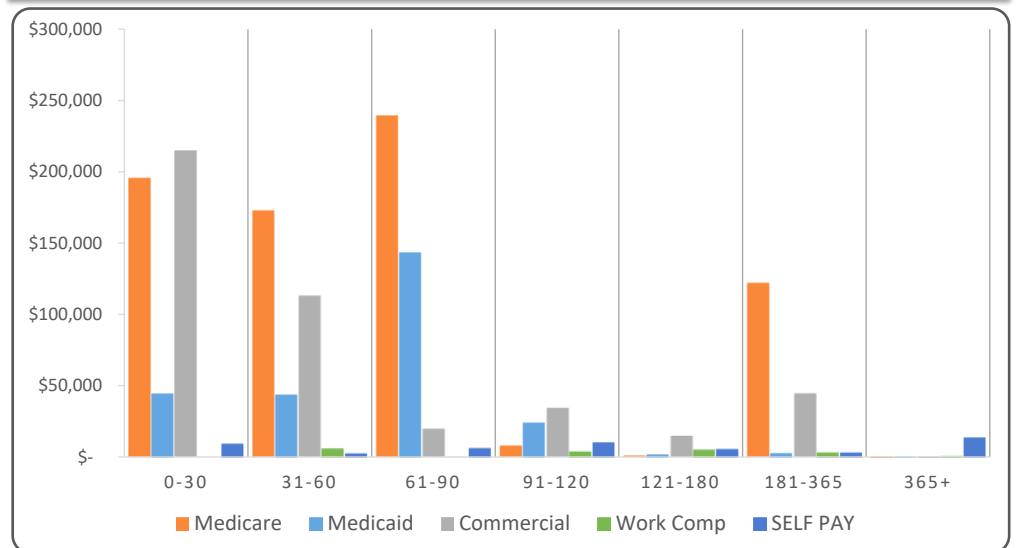
CASH DETAIL

| PAYER | Jul-23 | Aug-23 | Sep-23 | Oct-23 | Nov-23 | Dec-23 | Jan-24 | Feb-24 | Mar-24 | Apr-24 | May-24 | Jun-24 | Jul-24 | 13 Month Average |
|----------------------|--------------|------------|------------|--------------|------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|------------------|
| MEDICARE | | | | | | | | | | | | | | |
| Payments | \$ 851,353 | \$ 273,732 | \$ 303,327 | \$ 572,057 | \$ 539,621 | \$ 656,043 | \$ 661,118 | \$ 918,553 | \$ 534,506 | \$ 693,621 | \$ 604,561 | \$ 616,646 | \$ 735,187 | \$ 612,333 |
| Adjustments | \$ (297,566) | \$ 14,075 | \$ 40,065 | \$ 133,024 | \$ 129,515 | \$ 2,826 | \$ 137,240 | \$ (178,481) | \$ 75,696 | \$ 137,172 | \$ (91,180) | \$ 291,465 | \$ (101,465) | \$ 22,491 |
| Collection % | 154% | 95% | 88% | 81% | 81% | 100% | 83% | 124% | 88% | 83% | 118% | 68% | 116% | 98% |
| MEDICAID | | | | | | | | | | | | | | |
| Payments | \$ 192,283 | \$ 90,923 | \$ 92,296 | \$ 313,889 | \$ 229,010 | \$ 310,938 | \$ 242,089 | \$ 202,951 | \$ 308,231 | \$ 239,691 | \$ 164,030 | \$ 97,940 | \$ 262,500 | \$ 211,290 |
| Adjustments | \$ 466,985 | \$ 399,800 | \$ 295,314 | \$ 971,132 | \$ 641,672 | \$ 700,680 | \$ 799,319 | \$ 712,729 | \$ 868,417 | \$ 639,713 | \$ 701,030 | \$ 503,340 | \$ 816,511 | \$ 655,126 |
| Collection % | 29% | 19% | 24% | 24% | 26% | 31% | 23% | 22% | 26% | 27% | 19% | 16% | 24% | 24% |
| COMMERCIAL | | | | | | | | | | | | | | |
| Payments | \$ 209,919 | \$ 101,592 | \$ 116,675 | \$ 186,852 | \$ 134,200 | \$ 193,457 | \$ 184,950 | \$ 235,389 | \$ 189,706 | \$ 235,808 | \$ 216,262 | \$ 305,316 | \$ 440,497 | \$ 211,586 |
| Adjustments | \$ 82,826 | \$ 46,336 | \$ 49,900 | \$ 73,180 | \$ 59,182 | \$ 74,621 | \$ 67,238 | \$ 112,836 | \$ 92,883 | \$ 76,097 | \$ 116,244 | \$ 116,014 | \$ 169,693 | \$ 87,465 |
| Collection % | 72% | 69% | 70% | 72% | 69% | 72% | 73% | 68% | 67% | 76% | 65% | 72% | 72% | 71% |
| WORK COMP | | | | | | | | | | | | | | |
| Payments | \$ 11,971 | \$ 34,920 | \$ 2,990 | \$ 18,118 | \$ 7,910 | \$ 30,109 | \$ 13,561 | \$ 4,542 | \$ 31,805 | \$ 10,514 | \$ 12,100 | \$ 17,155 | \$ 17,492 | \$ 16,399 |
| Adjustments | \$ 7,288 | \$ 7,277 | \$ 2,489 | \$ 4,838 | \$ 739 | \$ 24,588 | \$ 5,401 | \$ 2,553 | \$ 8,362 | \$ 5,425 | \$ 8,259 | \$ 3,256 | \$ 3,666 | \$ 6,472 |
| Collection % | 62% | 83% | 55% | 79% | 91% | 55% | 72% | 64% | 79% | 66% | 59% | 84% | 83% | 72% |
| SELF PAY | | | | | | | | | | | | | | |
| Payments | \$ 19,754 | \$ 22,724 | \$ 20,294 | \$ 40,894 | \$ 47,308 | \$ 24,138 | \$ 37,492 | \$ 29,727 | \$ 31,640 | \$ 33,463 | \$ 26,645 | \$ 32,275 | \$ 51,271 | \$ 32,125 |
| Bad Debt Recoveries | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ 503 | \$ 357 | \$ 66 |
| Adjustments | \$ 14,103 | \$ 9,683 | \$ 5,797 | \$ 23,642 | \$ 19,912 | \$ 7,961 | \$ 9,710 | \$ 12,066 | \$ 14,080 | \$ 8,917 | \$ 14,342 | \$ 28,485 | \$ 19,435 | \$ 14,472 |
| Charity Care | \$ 10,549 | \$ 4,244 | \$ 1,705 | \$ 5,068 | \$ - | \$ - | \$ 56,527 | \$ 10,025 | \$ 9,508 | \$ 10,166 | \$ - | \$ 10,046 | \$ - | \$ 9,064 |
| Bad Debt | \$ - | \$ - | \$ - | \$ - | \$ 108,610 | \$ - | \$ - | \$ 54,417 | \$ - | \$ 479,228 | \$ - | \$ 248,562 | \$ 12,294 | \$ 69,470 |
| Total SP Adjustments | \$ 24,653 | \$ 13,927 | \$ 7,502 | \$ 28,710 | \$ 128,522 | \$ 7,961 | \$ 66,236 | \$ 76,509 | \$ 23,588 | \$ 498,311 | \$ 14,342 | \$ 287,093 | \$ 31,729 | \$ 93,006 |
| Collection % | 44% | 62% | 73% | 59% | 27% | 75% | 36% | 28% | 57% | 6% | 65% | 10% | 62% | 47% |
| TOTAL | | | | | | | | | | | | | | |
| Total Payments | \$ 1,285,280 | \$ 523,891 | \$ 535,583 | \$ 1,131,808 | \$ 958,049 | \$ 1,214,685 | \$ 1,139,209 | \$ 1,391,162 | \$ 1,095,888 | \$ 1,213,098 | \$ 1,023,598 | \$ 1,069,835 | \$ 1,507,305 | \$ 1,083,799 |
| Total Adjustment | \$ 284,186 | \$ 481,416 | \$ 395,270 | \$ 1,210,884 | \$ 959,630 | \$ 810,676 | \$ 1,075,435 | \$ 726,145 | \$ 1,068,946 | \$ 1,356,717 | \$ 748,695 | \$ 1,201,168 | \$ 920,133 | \$ 771,556 |
| Total Collection % | 82% | 52% | 58% | 48% | 50% | 60% | 51% | 66% | 51% | 47% | 58% | 47% | 62% | 56% |

Cash & Adjustment Trending

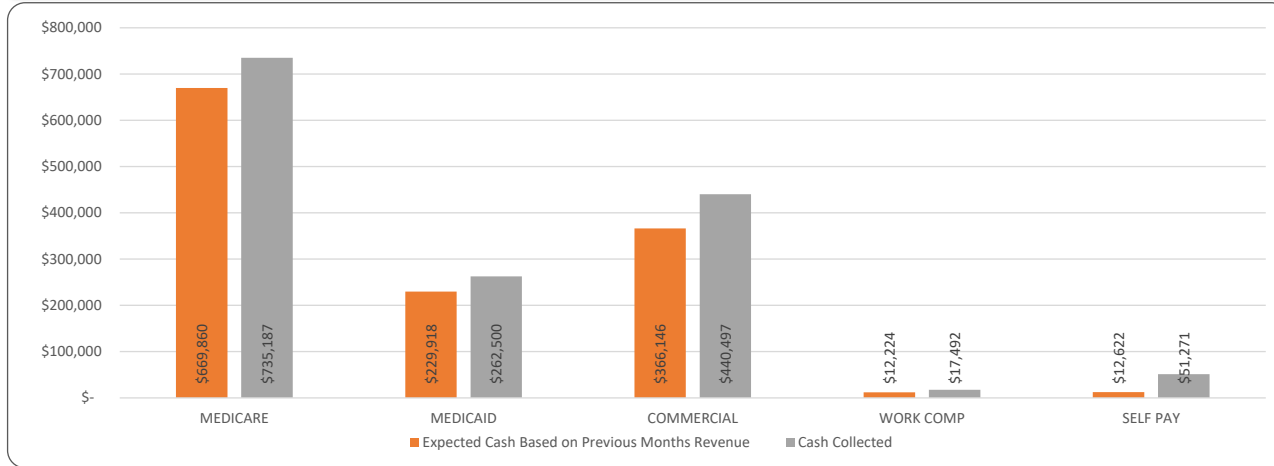


Cash Collections by Discharge Date

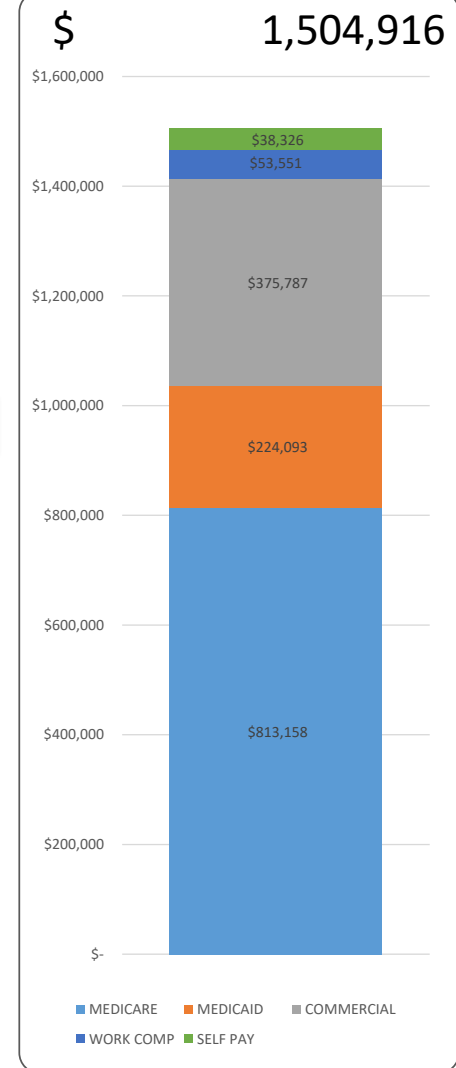


CASH FORECASTING

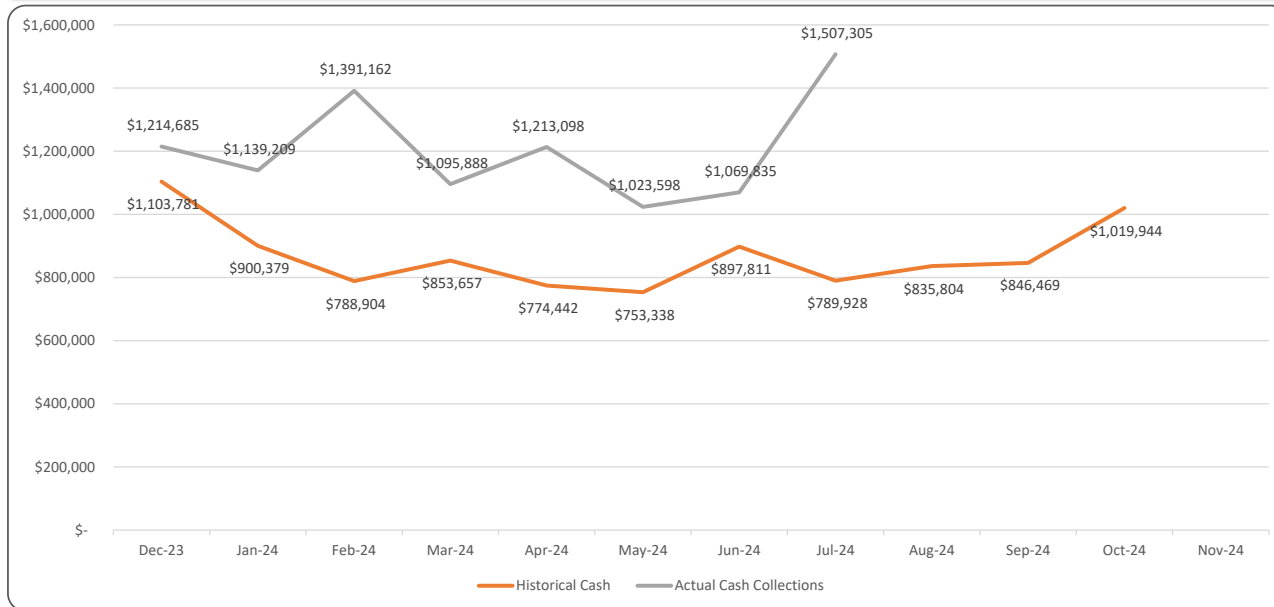
Expected Last Month vs Cash Collected (Based on Previous Months Revenue)



Cash Expected Next Month (Based on this Months Revenue)



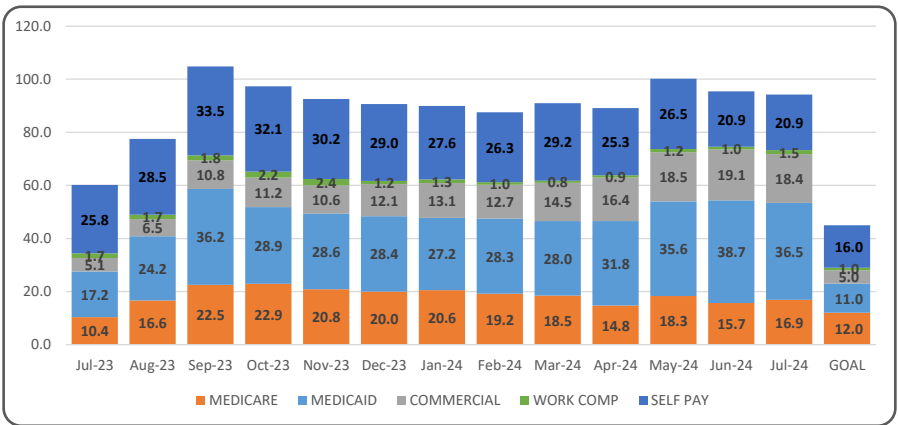
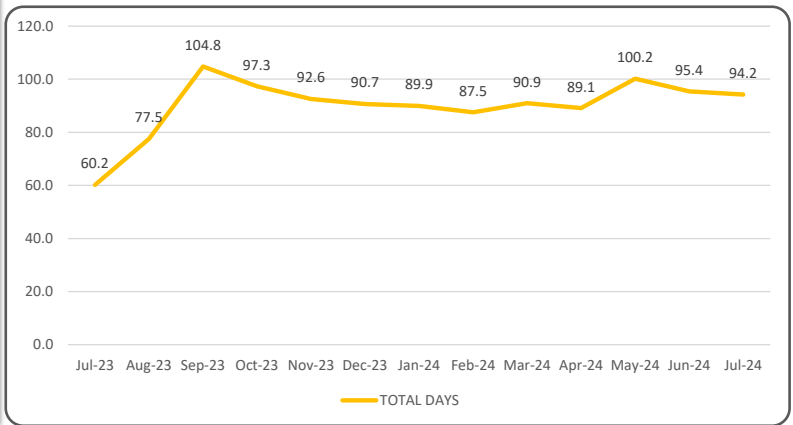
Actual Cash vs Historical Average Collections



ACCOUNTS RECEIVABLE

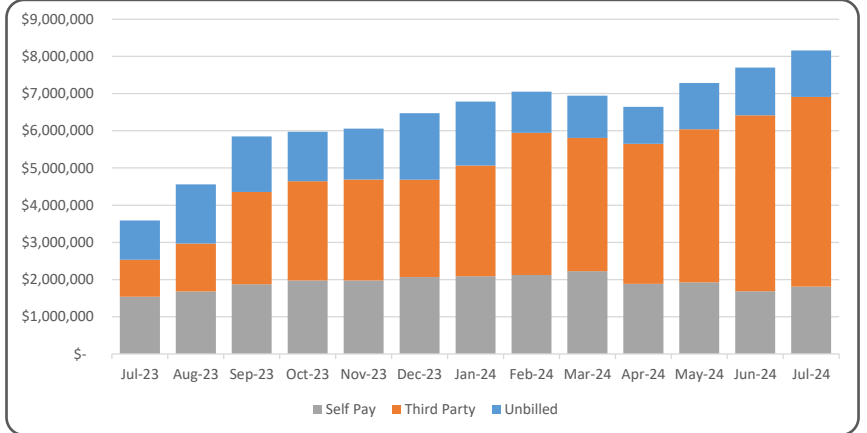
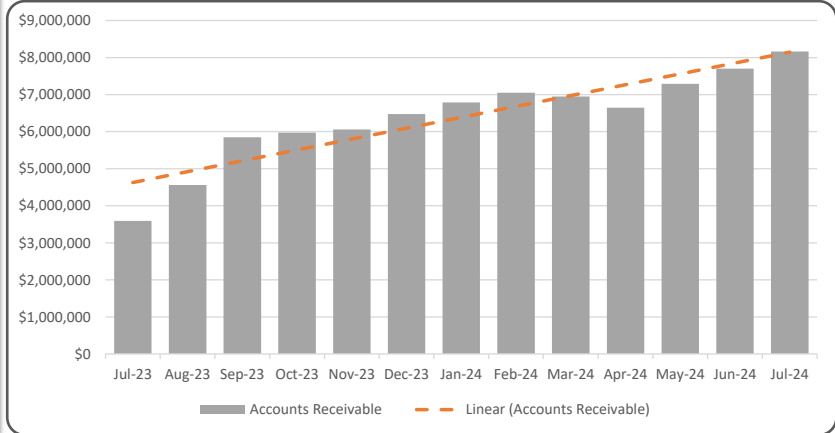
AR Days

| PAYER | Jul-23 | Aug-23 | Sep-23 | Oct-23 | Nov-23 | Dec-23 | Jan-24 | Feb-24 | Mar-24 | Apr-24 | May-24 | Jun-24 | Jul-24 | 13 Month Average |
|-------------------|-------------|-------------|--------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|--------------|-------------|-------------|------------------|
| MEDICARE | 10.4 | 16.6 | 22.5 | 22.9 | 20.8 | 20.0 | 20.6 | 19.2 | 18.5 | 14.8 | 18.3 | 15.7 | 16.9 | 18.3 |
| MEDICAID | 17.2 | 24.2 | 36.2 | 28.9 | 28.6 | 28.4 | 27.2 | 28.3 | 28.0 | 31.8 | 35.6 | 38.7 | 36.5 | 30.0 |
| COMMERCIAL | 5.1 | 6.5 | 10.8 | 11.2 | 10.6 | 12.1 | 13.1 | 12.7 | 14.5 | 16.4 | 18.5 | 19.1 | 18.4 | 13.0 |
| WORK COMP | 1.7 | 1.7 | 1.8 | 2.2 | 2.4 | 1.2 | 1.3 | 1.0 | 0.8 | 0.9 | 1.2 | 1.0 | 1.5 | 1.4 |
| SELF PAY | 25.8 | 28.5 | 33.5 | 32.1 | 30.2 | 29.0 | 27.6 | 26.3 | 29.2 | 25.3 | 26.5 | 20.9 | 20.9 | 27.4 |
| TOTAL DAYS | 60.2 | 77.5 | 104.8 | 97.3 | 92.6 | 90.7 | 89.9 | 87.5 | 90.9 | 89.1 | 100.2 | 95.4 | 94.2 | 90.0 |



AR Balance

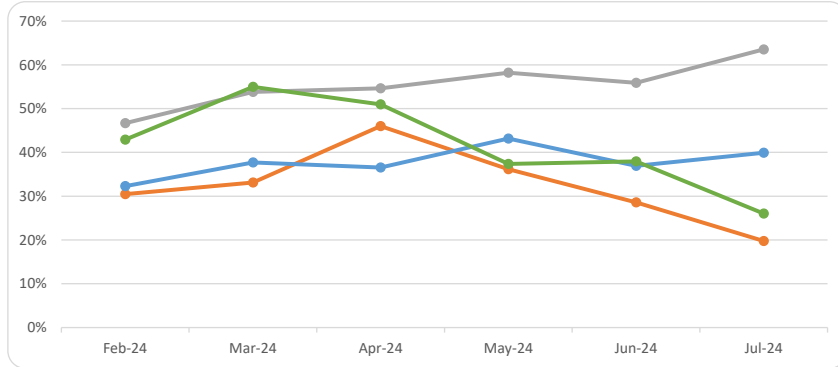
| PAYER | Jul-23 | Aug-23 | Sep-23 | Oct-23 | Nov-23 | Dec-23 | Jan-24 | Feb-24 | Mar-24 | Apr-24 | May-24 | Jun-24 | Jul-24 | 13 Month Average |
|--------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|---------------------|
| MEDICARE | \$ 619,122 | \$ 977,025 | \$ 1,257,444 | \$ 1,408,379 | \$ 1,364,196 | \$ 1,430,057 | \$ 1,552,239 | \$ 1,546,696 | \$ 1,414,285 | \$ 1,101,851 | \$ 1,334,185 | \$ 1,264,190 | \$ 1,466,233 | \$ 1,287,377 |
| MEDICAID | \$ 1,024,807 | \$ 1,425,127 | \$ 2,019,041 | \$ 1,774,925 | \$ 1,873,656 | \$ 2,027,427 | \$ 2,056,249 | \$ 2,281,795 | \$ 2,139,446 | \$ 2,370,804 | \$ 2,591,679 | \$ 3,126,226 | \$ 3,160,071 | \$ 2,143,942 |
| COMMERCIAL | \$ 306,012 | \$ 380,817 | \$ 600,808 | \$ 684,736 | \$ 692,018 | \$ 861,736 | \$ 990,874 | \$ 1,024,848 | \$ 1,105,847 | \$ 1,222,227 | \$ 1,348,694 | \$ 1,545,259 | \$ 1,594,542 | \$ 950,648 |
| WORK COMP | \$ 102,360 | \$ 97,414 | \$ 101,908 | \$ 133,125 | \$ 155,295 | \$ 87,612 | \$ 100,345 | \$ 76,676 | \$ 58,713 | \$ 66,783 | \$ 87,299 | \$ 82,043 | \$ 132,192 | \$ 98,597 |
| SELF PAY | \$ 1,539,006 | \$ 1,678,055 | \$ 1,871,417 | \$ 1,973,313 | \$ 1,975,406 | \$ 2,068,907 | \$ 2,087,543 | \$ 2,122,365 | \$ 2,228,193 | \$ 1,883,672 | \$ 1,926,672 | \$ 1,684,185 | \$ 1,809,858 | \$ 1,911,430 |
| TOTAL | \$ 3,591,307 | \$ 4,558,438 | \$ 5,850,618 | \$ 5,974,477 | \$ 6,060,571 | \$ 6,475,740 | \$ 6,787,249 | \$ 7,052,380 | \$ 6,946,485 | \$ 6,645,338 | \$ 7,288,529 | \$ 7,701,902 | \$ 8,162,895 | \$ 6,391,994 |



ACCOUNTS RECEIVABLE AGING

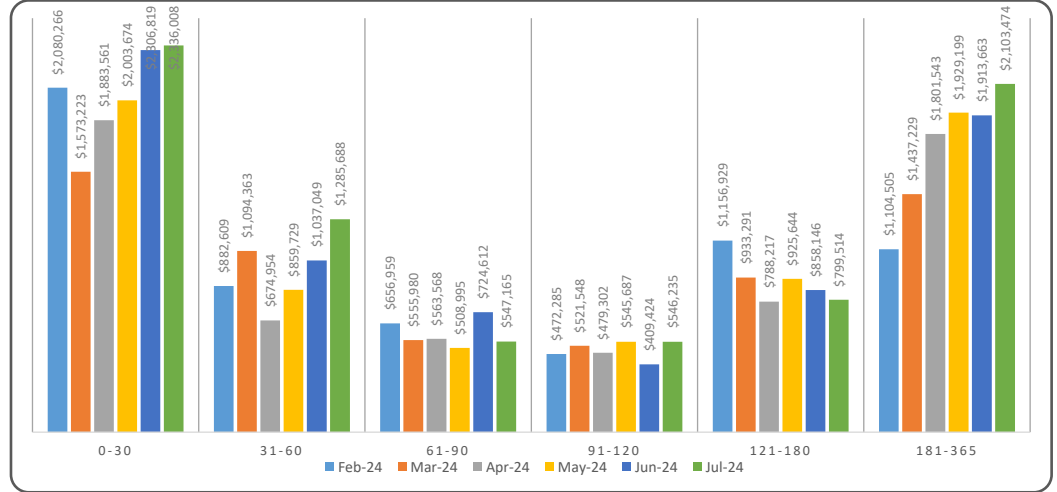
| | 0-30 Days | | 31-60 Days | | 61-90 Days | | 91-120 Days | | 121-180 Days | | 181-365 Days | | 366+ Days | | Grand Totals | |
|----------------------------|------------|---------------------|------------|---------------------|------------|-------------------|-------------|-------------------|--------------|-------------------|--------------|---------------------|-------------|-------------------|--------------|---------------------|
| | # Acts | \$ | # Acts | \$ | # Acts | \$ | # Acts | \$ | # Acts | \$ | # Acts | \$ | # Acts | \$ | # Acts | \$ |
| MEDICARE | | | | | | | | | | | | | | | | |
| Non-Credit | 243 | \$ 811,700 | 82 | \$ 252,480 | 39 | \$ 119,059 | 15 | \$ 18,345 | 32 | \$ 63,510 | 55 | \$ 200,498 | 8 | \$ 9,245 | 474 | \$ 1,474,835 |
| Credit | 0 | \$ (330) | 0 | \$ - | 0 | \$ - | 0 | \$ - | 0 | \$ - | 3 | \$ (6,518) | 7 | \$ (1,754) | 10 | \$ (8,602) |
| TOTAL | 243 | \$ 811,370 | 82 | \$ 252,480 | 39 | \$ 119,059 | 15 | \$ 18,345 | 32 | \$ 63,510 | 58 | \$ 193,979 | 15 | \$ 7,491 | 484 | \$ 1,466,233 |
| MEDICAID | | | | | | | | | | | | | | | | |
| Non-Credit | 241 | \$ 890,524 | 206 | \$ 762,972 | 109 | \$ 247,769 | 118 | \$ 252,898 | 139 | \$ 378,239 | 270 | \$ 573,704 | 41 | \$ 58,740 | 1124 | \$ 3,164,845 |
| Credit | 0 | \$ - | 0 | \$ - | 2 | \$ (194) | 4 | \$ (706) | 3 | \$ (539) | 12 | \$ (2,622) | 9 | \$ (715) | 30 | \$ (4,774) |
| TOTAL | 241 | \$ 890,524 | 206 | \$ 762,972 | 111 | \$ 247,575 | 122 | \$ 252,192 | 142 | \$ 377,700 | 282 | \$ 571,082 | 50 | \$ 58,025 | 1154 | \$ 3,160,071 |
| COMMERCIAL | | | | | | | | | | | | | | | | |
| Non-Credit | 250 | \$ 397,914 | 135 | \$ 137,494 | 88 | \$ 72,759 | 66 | \$ 90,112 | 119 | \$ 202,688 | 297 | \$ 585,305 | 223 | \$ 181,558 | 1178 | \$ 1,667,831 |
| Credit | 0 | \$ (126) | 1 | \$ (796) | 0 | \$ - | 2 | \$ (1,172) | 7 | \$ (5,870) | 11 | \$ (11,175) | 320 | \$ (54,151) | 341 | \$ (73,289) |
| TOTAL | 250 | \$ 397,788 | 136 | \$ 136,698 | 88 | \$ 72,759 | 68 | \$ 88,940 | 126 | \$ 196,818 | 308 | \$ 574,130 | 543 | \$ 127,407 | 1519 | \$ 1,594,542 |
| WORK COMP | | | | | | | | | | | | | | | | |
| Non-Credit | 31 | \$ 64,104 | 19 | \$ 23,274 | 89 | \$ 12,658 | 4 | \$ 11,302 | 2 | \$ 4,136 | 21 | \$ 7,220 | 22 | \$ 12,554 | 188 | \$ 135,249 |
| Credit | 0 | \$ - | 0 | \$ - | 0 | \$ - | 0 | \$ - | 0 | \$ - | 1 | \$ (414) | 17 | \$ (2,643) | 18 | \$ (3,057) |
| TOTAL | 31 | \$ 64,104 | 19 | \$ 23,274 | 89 | \$ 12,658 | 4 | \$ 11,302 | 2 | \$ 4,136 | 22 | \$ 6,806 | 39 | \$ 9,912 | 206 | \$ 132,192 |
| SELF PAY | | | | | | | | | | | | | | | | |
| Non-Credit | 94 | \$ 174,232 | 127 | \$ 111,916 | 101 | \$ 96,656 | 103 | \$ 176,439 | 134 | \$ 159,749 | 401 | \$ 763,969 | 532 | \$ 364,665 | 1492 | \$ 1,847,627 |
| Credit | 1 | \$ (2,011) | 0 | \$ (1,652) | 2 | \$ (1,542) | 3 | \$ (984) | 6 | \$ (2,399) | 10 | \$ (6,493) | 286 | \$ (22,687) | 308 | \$ (37,769) |
| TOTAL | 95 | \$ 172,221 | 127 | \$ 110,264 | 103 | \$ 95,115 | 106 | \$ 175,455 | 140 | \$ 157,349 | 411 | \$ 757,476 | 818 | \$ 341,978 | 1800 | \$ 1,809,858 |
| ACCOUNTS RECEIVABLE | | | | | | | | | | | | | | | | |
| Non-Credit | 859 | \$ 2,338,474 | 569 | \$ 1,288,136 | 426 | \$ 548,901 | 306 | \$ 549,097 | 426 | \$ 808,321 | 1044 | \$ 2,130,696 | 826 | \$ 626,762 | 4456 | \$ 8,290,387 |
| Credit | 1 | \$ (2,466) | 1 | \$ (2,448) | 4 | \$ (1,735) | 9 | \$ (2,862) | 16 | \$ (8,808) | 37 | \$ (27,222) | 639 | \$ (81,950) | 707 | \$ (127,491) |
| GRAND TOTAL | 860 | \$ 2,336,008 | 570 | \$ 1,285,688 | 430 | \$ 547,165 | 315 | \$ 546,235 | 442 | \$ 799,514 | 1081 | \$ 2,103,474 | 1465 | \$ 544,812 | 5163 | \$ 8,162,895 |

Aged Over 90 Days Trending (excluding Credits)



| | Feb-24 | Mar-24 | Apr-24 | May-24 | Jun-24 | Jul-24 |
|------------|--------|--------|--------|--------|--------|--------|
| Medicare | 30.5% | 33.1% | 46.0% | 36.2% | 28.6% | 19.8% |
| Medicaid | 32.3% | 37.7% | 36.5% | 43.2% | 36.9% | 39.9% |
| Commercial | 46.7% | 53.8% | 54.6% | 58.2% | 55.9% | 63.5% |
| Work Comp | 42.9% | 55.0% | 51.0% | 37.4% | 37.9% | 26.0% |

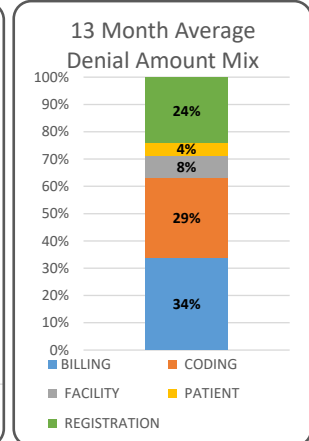
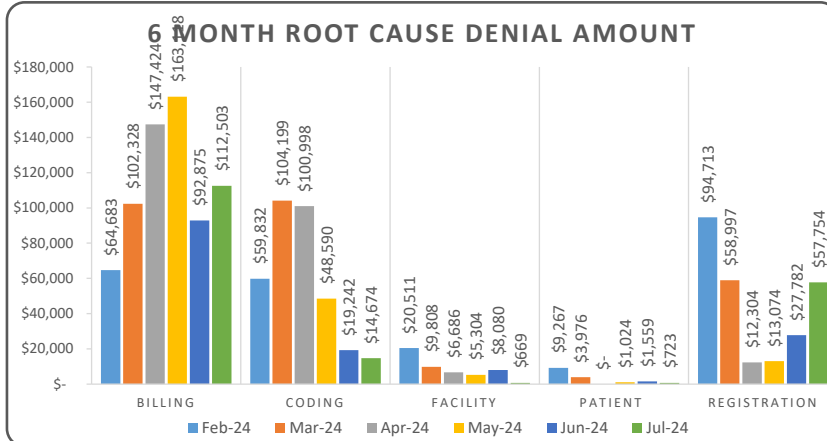
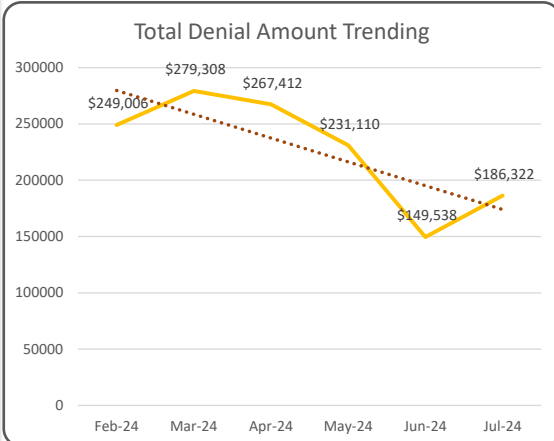
6 Month Aging



DENIAL MANAGEMENT

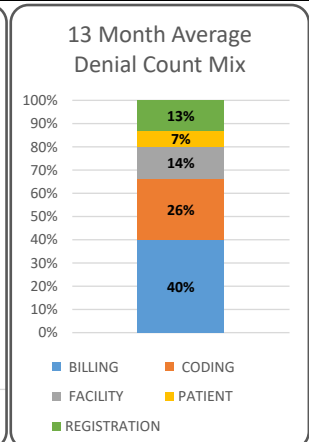
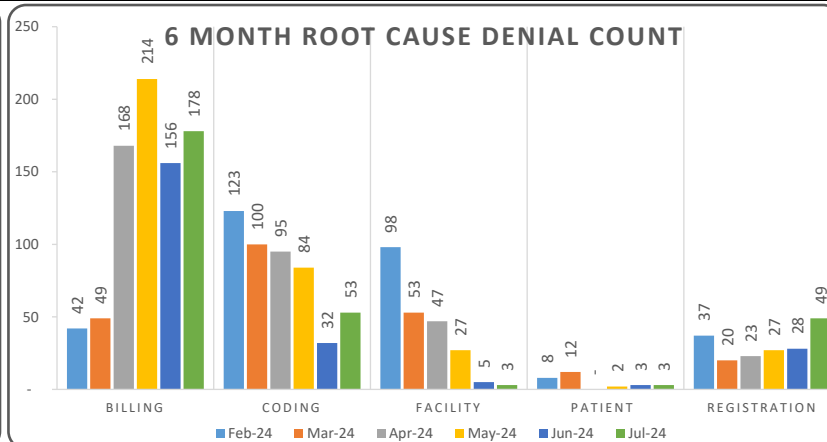
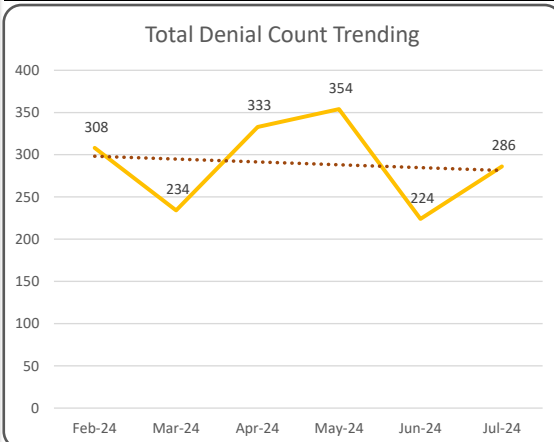
Denial Amount

| AMOUNT | Jul-23 | Aug-23 | Sep-23 | Oct-23 | Nov-23 | Dec-23 | Jan-24 | Feb-24 | Mar-24 | Apr-24 | May-24 | Jun-24 | Jul-24 | 13 Month Average |
|---------------------|-----------|------------|------------|------------|------------|-------------|------------|------------|------------|------------|------------|------------|------------|------------------|
| BILLING | \$ 16,441 | \$ 4,186 | \$ 14,532 | \$ 23,169 | \$ 57,603 | \$ (28,742) | \$ 67,372 | \$ 64,683 | \$ 102,328 | \$ 147,424 | \$ 163,118 | \$ 92,875 | \$ 112,503 | \$ 64,423 |
| CODING | \$ 28,731 | \$ 69,786 | \$ 82,600 | \$ 125,103 | \$ 41,055 | \$ 7,806 | \$ 14,432 | \$ 59,832 | \$ 104,199 | \$ 100,998 | \$ 48,590 | \$ 19,242 | \$ 14,674 | \$ 55,158 |
| FACILITY | \$ 8,170 | \$ 2,617 | \$ 3,773 | \$ 599 | \$ 59,842 | \$ 57,620 | \$ 23,485 | \$ 20,511 | \$ 9,808 | \$ 6,686 | \$ 5,304 | \$ 8,080 | \$ 669 | \$ 15,936 |
| PATIENT | \$ 4,418 | \$ 4,468 | \$ 407 | \$ 24,606 | \$ 14,699 | \$ 4,347 | \$ 40,316 | \$ 9,267 | \$ 3,976 | \$ - | \$ 1,024 | \$ 1,559 | \$ 723 | \$ 8,447 |
| REGISTRATION | \$ 32,719 | \$ 24,061 | \$ 58,303 | \$ 171,363 | \$ 12,651 | \$ 21,850 | \$ 9,369 | \$ 94,713 | \$ 58,997 | \$ 12,304 | \$ 13,074 | \$ 27,782 | \$ 57,754 | \$ 45,765 |
| TOTAL | \$ 90,479 | \$ 105,119 | \$ 159,615 | \$ 344,840 | \$ 185,849 | \$ 62,881 | \$ 154,975 | \$ 249,006 | \$ 279,308 | \$ 267,412 | \$ 231,110 | \$ 149,538 | \$ 186,322 | \$ 189,727 |



Denial Count

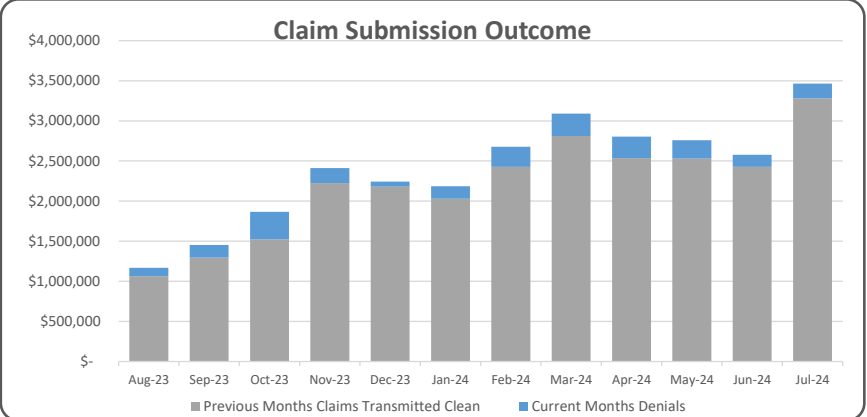
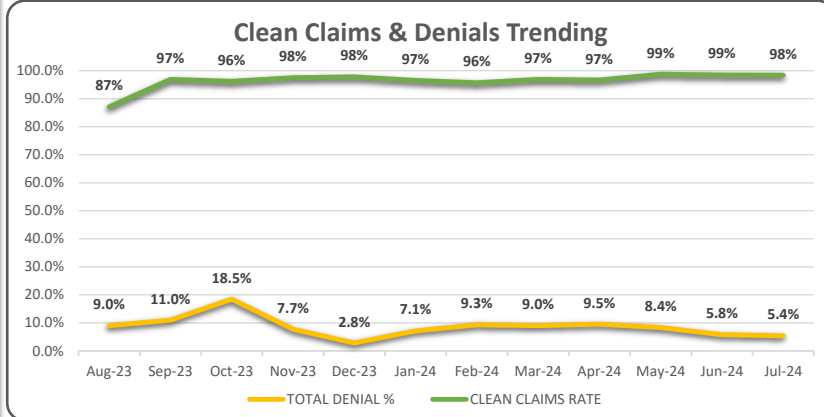
| COUNT | Jul-23 | Aug-23 | Sep-23 | Oct-23 | Nov-23 | Dec-23 | Jan-24 | Feb-24 | Mar-24 | Apr-24 | May-24 | Jun-24 | Jul-24 | 13 Month Average |
|---------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|------------------|
| BILLING | 17 | 23 | 21 | 69 | 103 | 48 | 82 | 42 | 49 | 168 | 214 | 156 | 178 | 90 |
| CODING | 58 | 39 | 53 | 73 | 31 | 22 | 13 | 123 | 100 | 95 | 84 | 32 | 53 | 60 |
| FACILITY | 28 | 15 | 6 | 1 | 54 | 16 | 52 | 98 | 53 | 47 | 27 | 5 | 3 | 31 |
| PATIENT | 2 | 4 | 1 | 10 | 12 | 25 | 116 | 8 | 12 | - | 2 | 3 | 3 | 15 |
| REGISTRATION | 34 | 30 | 27 | 57 | 15 | 31 | 7 | 37 | 20 | 23 | 27 | 28 | 49 | 30 |
| TOTAL | 139 | 111 | 108 | 210 | 215 | 142 | 270 | 308 | 234 | 333 | 354 | 224 | 286 | 226 |



CLAIM SUBMIT EFFICIENCY & DENIAL RESOLUTION

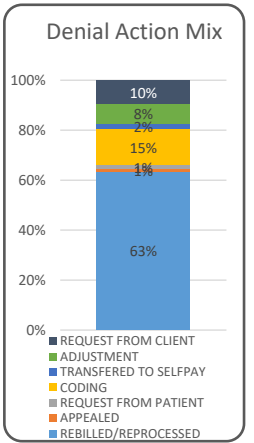
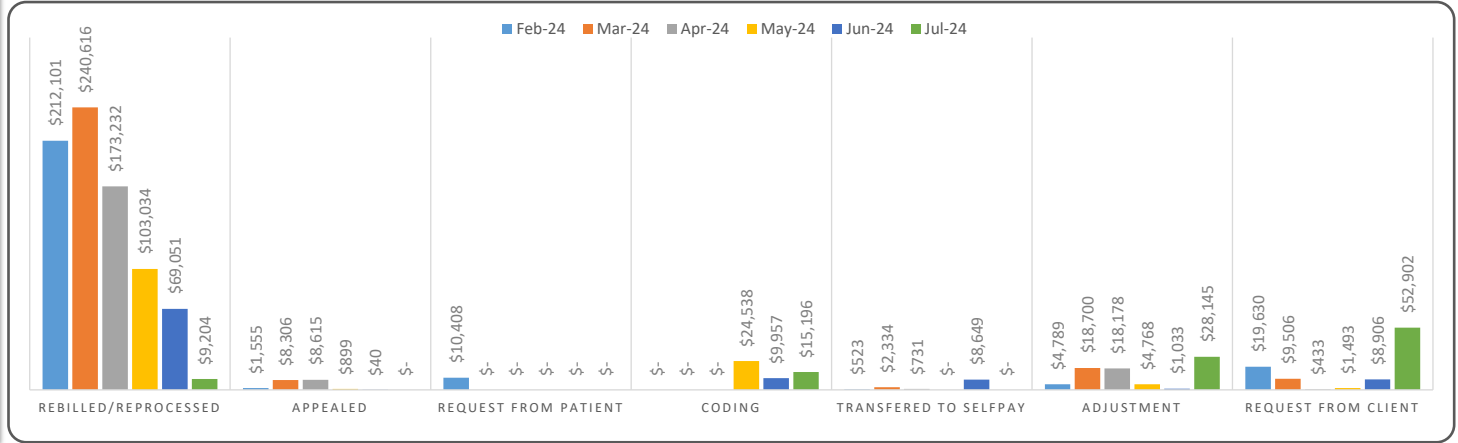
Denial & Clean Claim Trending

| | Jul-23 | Aug-23 | Sep-23 | Oct-23 | Nov-23 | Dec-23 | Jan-24 | Feb-24 | Mar-24 | Apr-24 | May-24 | Jun-24 | Jul-24 | 13 Month Average |
|---|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|------------------|
| DENIAL AMOUNT | \$ 90,479 | \$ 105,119 | \$ 159,615 | \$ 344,840 | \$ 185,849 | \$ 62,881 | \$ 154,975 | \$ 249,006 | \$ 279,308 | \$ 267,412 | \$ 231,110 | \$ 149,538 | \$ 186,322 | \$ 189,727 |
| PREVIOUS MONTH'S TRANSMITTED CLAIMS TOTAL DENIAL % | \$ 2,264,169 | \$ 1,167,844 | \$ 1,454,165 | \$ 1,867,928 | \$ 2,411,329 | \$ 2,241,921 | \$ 2,184,032 | \$ 2,676,735 | \$ 3,091,516 | \$ 2,803,341 | \$ 2,760,024 | \$ 2,578,338 | \$ 3,466,200 | \$ 2,382,119 |
| CLEAN CLAIMS RATE | 97% | 87% | 97% | 96% | 98% | 98% | 97% | 96% | 97% | 97% | 99% | 99% | 98% | 96% |



Action Taken on Denials

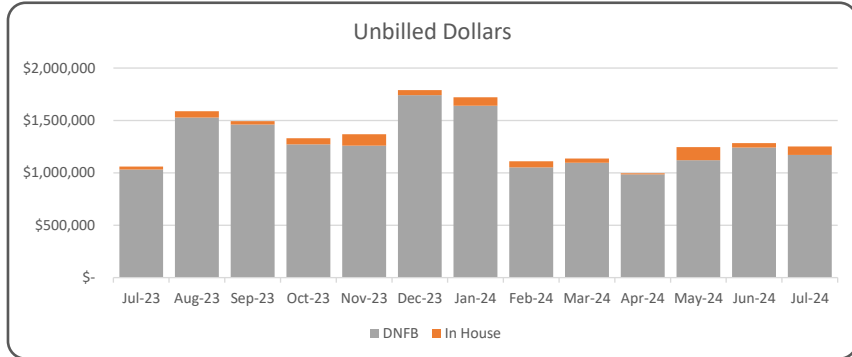
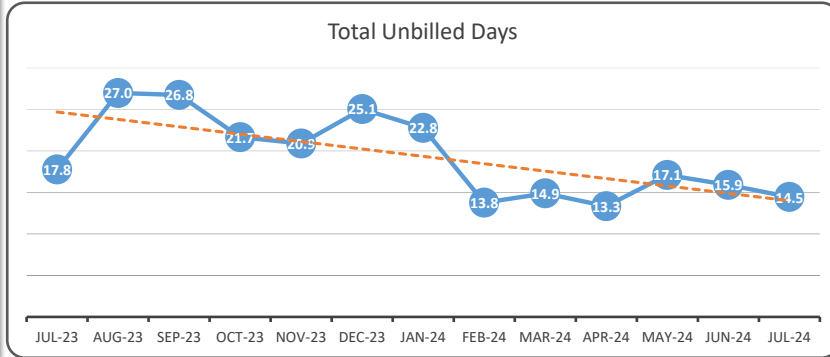
| DENIAL ACTION | Jul-23 | Aug-23 | Sep-23 | Oct-23 | Nov-23 | Dec-23 | Jan-24 | Feb-24 | Mar-24 | Apr-24 | May-24 | Jun-24 | Jul-24 | 13 Month Average |
|-------------------------------|-----------|------------|------------|------------|------------|-----------|------------|------------|------------|------------|------------|-----------|------------|------------------|
| REBILLED/REPROCESSED | \$ 35,311 | \$ 8,771 | \$ 21,181 | \$ 240,169 | \$ 107,339 | \$ 31,003 | \$ 97,434 | \$ 212,101 | \$ 240,616 | \$ 173,232 | \$ 103,034 | \$ 69,051 | \$ 9,204 | \$ 103,727 |
| APPEALED | \$ 4,051 | \$ 21 | \$ 1,355 | \$ - | \$ - | \$ - | \$ - | \$ 1,555 | \$ 8,306 | \$ 8,615 | \$ 899 | \$ 40 | \$ - | \$ 1,911 |
| REQUEST FROM PATIENT | \$ 13,047 | \$ 5,235 | \$ - | \$ - | \$ - | \$ - | \$ - | \$ 10,408 | \$ - | \$ - | \$ - | \$ - | \$ - | \$ 2,207 |
| CODING | \$ 7,358 | \$ 67,848 | \$ 75,684 | \$ 70,743 | \$ 2,098 | \$ 3,052 | \$ 34,614 | \$ - | \$ - | \$ - | \$ 24,538 | \$ 9,957 | \$ 15,196 | \$ 23,930 |
| TRANSFERRED TO SELFPAY | \$ 555 | \$ 561 | \$ - | \$ 3,542 | \$ 3,856 | \$ - | \$ 23,609 | \$ 523 | \$ 2,334 | \$ 731 | \$ - | \$ 8,649 | \$ - | \$ 3,412 |
| ADJUSTMENT | \$ 25,659 | \$ 6,499 | \$ 7,028 | \$ 30,387 | \$ 3,436 | \$ 8,001 | \$ 8,089 | \$ 4,789 | \$ 18,700 | \$ 18,178 | \$ 4,768 | \$ 1,033 | \$ 28,145 | \$ 12,670 |
| REQUEST FROM CLIENT | \$ 4,499 | \$ 16,182 | \$ 54,368 | \$ - | \$ 291 | \$ 20,823 | \$ 14,875 | \$ 19,630 | \$ 9,506 | \$ 433 | \$ 1,493 | \$ 8,906 | \$ 52,902 | \$ 15,685 |
| TOTAL | \$ 90,479 | \$ 105,116 | \$ 159,615 | \$ 344,842 | \$ 117,020 | \$ 62,880 | \$ 178,621 | \$ 249,006 | \$ 279,461 | \$ 201,189 | \$ 134,732 | \$ 97,637 | \$ 105,447 | \$ 163,542 |



UNBILLED & INVENTORY

Unbilled

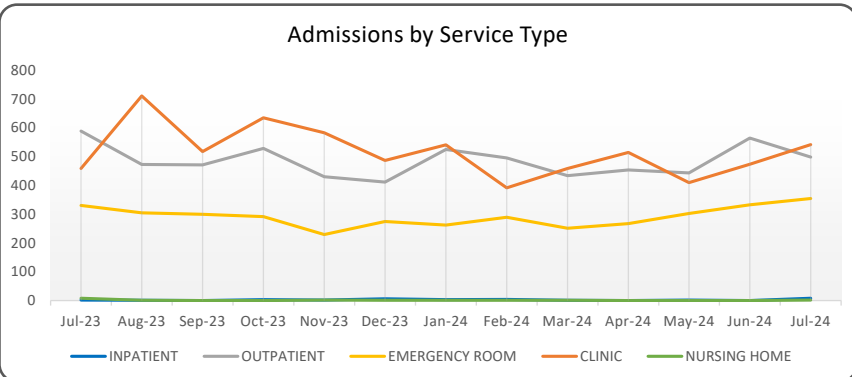
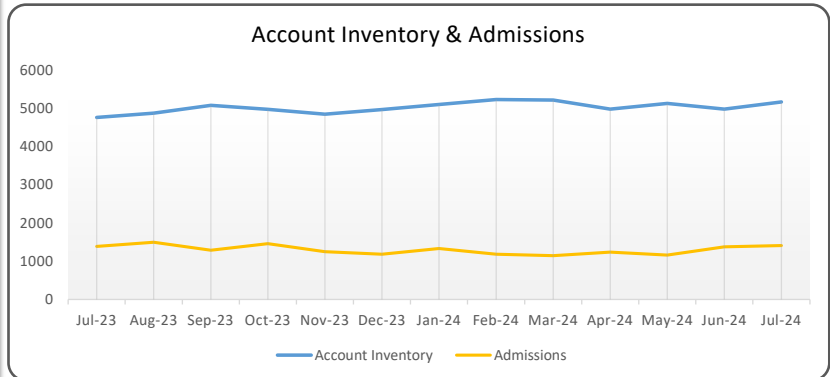
| | Jul-23 | Aug-23 | Sep-23 | Oct-23 | Nov-23 | Dec-23 | Jan-24 | Feb-24 | Mar-24 | Apr-24 | May-24 | Jun-24 | Jul-24 | 13 Month Average |
|-----------------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|------------|--------------|--------------|--------------|------------------|
| In House | \$ 27,926 | \$ 59,290 | \$ 34,128 | \$ 58,121 | \$ 108,806 | \$ 49,158 | \$ 81,326 | \$ 57,589 | \$ 40,091 | \$ 9,467 | \$ 125,095 | \$ 41,831 | \$ 80,889 | \$ 59,517 |
| DNFB | \$ 1,032,055 | \$ 1,528,438 | \$ 1,460,193 | \$ 1,272,278 | \$ 1,259,714 | \$ 1,740,429 | \$ 1,639,771 | \$ 1,052,041 | \$ 1,097,004 | \$ 986,005 | \$ 1,119,850 | \$ 1,241,997 | \$ 1,171,385 | \$ 1,277,012 |
| Total Unbilled | \$ 1,059,981 | \$ 1,587,728 | \$ 1,494,321 | \$ 1,330,399 | \$ 1,368,520 | \$ 1,789,587 | \$ 1,721,097 | \$ 1,109,630 | \$ 1,137,095 | \$ 995,472 | \$ 1,244,945 | \$ 1,283,828 | \$ 1,252,274 | \$ 1,336,529 |
| Unbilled Days | 17.8 | 27.0 | 26.8 | 21.7 | 20.9 | 25.1 | 22.8 | 13.8 | 14.9 | 13.3 | 17.1 | 15.9 | 14.5 | 19.3 |



Admissions & Account Inventory

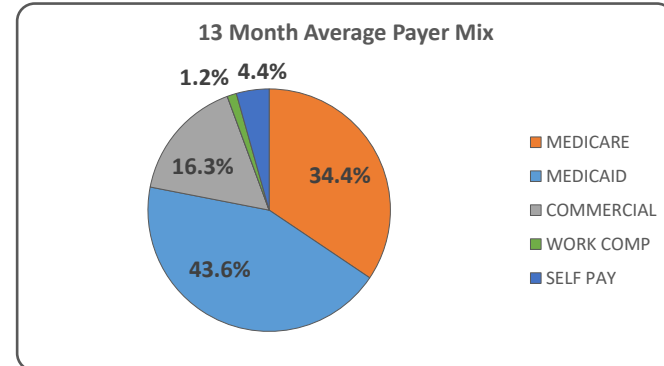
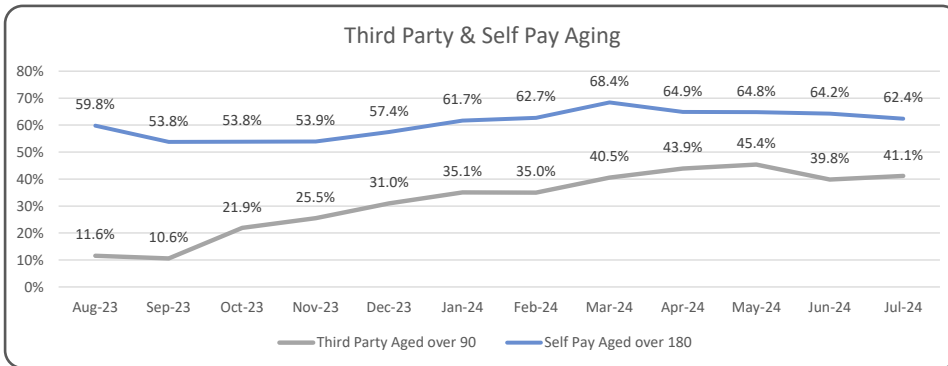
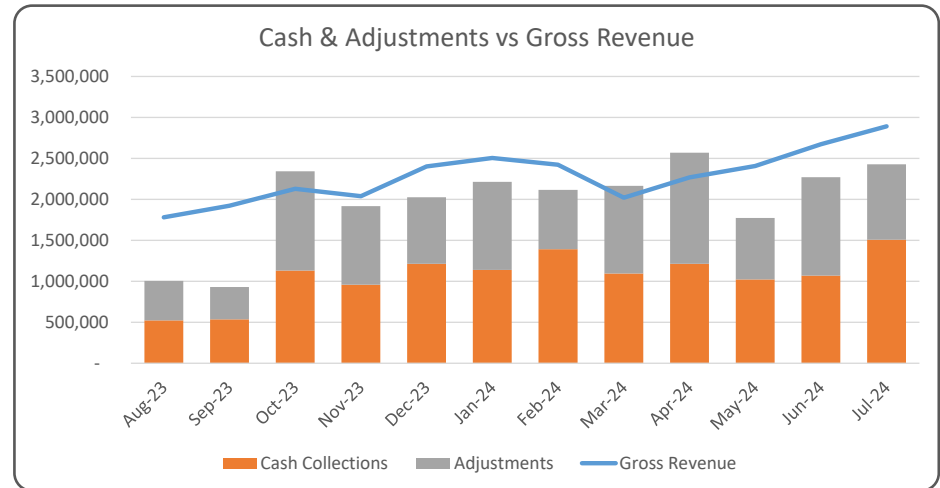
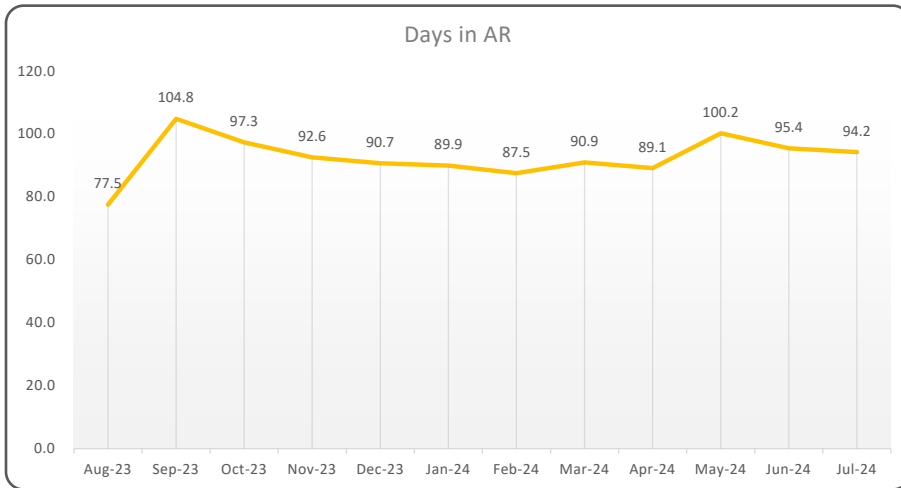
| ADMISSIONS | Jul-23 | Aug-23 | Sep-23 | Oct-23 | Nov-23 | Dec-23 | Jan-24 | Feb-24 | Mar-24 | Apr-24 | May-24 | Jun-24 | Jul-24 | 13 Month Average |
|-----------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|------------------|
| INPATIENT | 2 | 1 | 0 | 3 | 2 | 6 | 3 | 4 | 1 | 0 | 2 | 0 | 8 | 2 |
| SWINGBED | 2 | 7 | 1 | 4 | 1 | 5 | 2 | 2 | 1 | 1 | 3 | 4 | 3 | 3 |
| OUTPATIENT | 588 | 472 | 471 | 528 | 430 | 411 | 524 | 495 | 433 | 453 | 443 | 564 | 498 | 485 |
| EMERGENCY ROOM | 330 | 304 | 299 | 291 | 229 | 274 | 262 | 289 | 251 | 267 | 302 | 332 | 354 | 291 |
| CLINIC | 458 | 710 | 517 | 634 | 582 | 486 | 540 | 391 | 458 | 514 | 409 | 473 | 541 | 516 |
| NURSING HOME | 8 | 1 | 0 | 0 | 2 | 1 | 1 | 1 | 1 | 0 | 0 | 0 | 2 | 1 |
| TOTAL | 1,388 | 1,495 | 1,288 | 1,460 | 1,246 | 1,183 | 1,332 | 1,182 | 1,145 | 1,235 | 1,159 | 1,373 | 1,406 | 1,299 |

| ACCOUNT INVENTORY | Jul-23 | Aug-23 | Sep-23 | Oct-23 | Nov-23 | Dec-23 | Jan-24 | Feb-24 | Mar-24 | Apr-24 | May-24 | Jun-24 | Jul-24 | 13 Month Average |
|-------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|------------------|
| MEDICARE | 387 | 519 | 598 | 579 | 556 | 633 | 583 | 601 | 453 | 474 | 446 | 562 | 484 | 529 |
| MEDICAID | 682 | 688 | 762 | 732 | 759 | 756 | 874 | 940 | 990 | 1,102 | 1,141 | 1,197 | 1,154 | 906 |
| COMMERCIAL | 862 | 838 | 887 | 897 | 942 | 997 | 1,052 | 1,131 | 1,173 | 1,256 | 1,340 | 1,368 | 1,519 | 1,097 |
| WORK COMP | 75 | 59 | 57 | 55 | 61 | 56 | 58 | 54 | 58 | 67 | 51 | 74 | 206 | 72 |
| SELF PAY | 2,752 | 2,767 | 2,772 | 2,708 | 2,527 | 2,524 | 2,528 | 2,500 | 2,537 | 2,078 | 2,146 | 1,776 | 1,800 | 2,417 |
| TOTAL | 4,758 | 4,871 | 5,076 | 4,971 | 4,845 | 4,966 | 5,095 | 5,226 | 5,211 | 4,977 | 5,124 | 4,977 | 5,163 | 5,020 |



SoHum Health Executive Dashboard

| | TARGET | Aug-23 | Sep-23 | Oct-23 | Nov-23 | Dec-23 | Jan-24 | Feb-24 | Mar-24 | Apr-24 | May-24 | Jun-24 | Jul-24 |
|--------------------------|-------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|
| Days in AR | 45.0 | 77.5 | 104.8 | 97.3 | 92.6 | 90.7 | 89.9 | 87.5 | 90.9 | 89.1 | 100.2 | 95.4 | 94.2 |
| Gross AR | | 4,558,438 | 5,850,618 | 5,974,477 | 6,060,571 | 6,475,740 | 6,787,249 | 7,052,380 | 6,946,485 | 6,645,338 | 7,288,529 | 7,701,902 | 8,162,895 |
| Gross Revenue | | 1,781,158 | 1,922,299 | 2,130,187 | 2,037,494 | 2,402,068 | 2,506,331 | 2,422,995 | 2,021,182 | 2,266,954 | 2,406,584 | 2,673,513 | 2,891,588 |
| Cash Collections | | 523,891 | 535,583 | 1,131,808 | 958,049 | 1,214,685 | 1,139,209 | 1,391,162 | 1,095,888 | 1,213,098 | 1,023,598 | 1,069,835 | 1,507,305 |
| Adjustments | | 481,416 | 395,270 | 1,210,884 | 959,630 | 810,676 | 1,075,435 | 726,145 | 1,068,946 | 1,356,717 | 748,695 | 1,201,168 | 920,133 |
| Collection % | | 52.1% | 57.5% | 48.3% | 50.0% | 60.0% | 51.4% | 65.7% | 50.6% | 47.2% | 57.8% | 47.1% | 62.1% |
| Late Charges | 1% | 0.3% | 0.7% | 0.8% | 0.2% | 0.6% | 0.3% | 0.3% | -0.4% | -0.8% | -1.9% | 2.9% | 1.3% |
| Bad Debt | 3% | 0.0% | 0.0% | 0.0% | 5.3% | 0.0% | 0.0% | 2.2% | 0.0% | 21.1% | 0.0% | 9.3% | 0.4% |
| Charity Care | 3% | 0.2% | 0.1% | 0.2% | 0.0% | 0.0% | 2.3% | 0.4% | 0.5% | 0.4% | 0.0% | 0.4% | 0.0% |
| Third Party Aged over 90 | 13% | 11.6% | 10.6% | 21.9% | 25.5% | 31.0% | 35.1% | 35.0% | 40.5% | 43.9% | 45.4% | 39.8% | 41.1% |
| Self Pay Aged over 180 | 25% | 59.8% | 53.8% | 53.8% | 53.9% | 57.4% | 61.7% | 62.7% | 68.4% | 64.9% | 64.8% | 64.2% | 62.4% |



Updated Self Pay Aging to reflect 180 Days from Discharge due to data available in Epic (previously used assignment date in proprietary database).

Infection Prevention:

The Infection Prevention Department consistently maintains survey readiness by conducting regular hand hygiene surveillance, auditing individuals on transmission-based isolation precautions for proper placement and documentation and convening frequent infection prevention committee (IPC) and antibiotic stewardship meetings. The IP nurse diligently audits the EVS cleaning clipboards on Thursdays, covering areas such as the ED, laundry, ice machine, and eyewash station. A public health alert concerning the heightened risk of dengue virus has been released and forwarded to the Group ER Physicians to be displayed in the provider's office. Presently, we have Covid vaccines available in-house. Communication has been initiated with the team through a Webex meeting to discuss organizing a vaccination clinic, with the date still pending. Furthermore, the IP nurse ensures daily checks of the lab results folder in the provider's office and follows up as necessary.

ED/Acute:

Katherine, our ED/Acute manager, reports: "Throughout June, the Emergency Department (ED) saw 343 patients, including four swing bed admissions, nine observation patients, and one inpatient admission. Seven patients were discharged from inpatient (IP) and swing bed (SWB) status.

Projects worked on in June:

We planned and prepared for an upcoming disaster evacuation drill, which included reviewing and reorganizing Incident Command Supplies with the help of the Chief Nursing Officer's administrative assistant.

In June, we also organized several productive and collaborative meetings with the inpatient pharmacy. These meetings focused on medication administration overlinks and scanning compliance issues, demonstrating our commitment to shared decision-making and teamwork.

Our SWING bed program has made significant progress. We can now provide a more comprehensive care plan involving Physical Therapy, Occupational Therapy, and Speech Therapy. These expanded care plans allow us to admit patients requiring all these services, expanding our scope beyond just Physical Therapy treatment. Our ongoing commitment is to deliver high-quality care to our patients continually. Additionally, we are proud to serve our community by allowing local community members needing outside medical care to recover in their local hospital."

Laboratory

The laboratory has been diligently working to introduce new services, including the in-house processing of blood cultures, EDSP tests. We will offer in-house HIV and syphilis testing on a stat basis by October. Additionally, the lab director and the lab manager are actively engaged in transitioning the lab from being accredited by a third-party organization to being certified directly with CDPH, which is expected sometime this Fall. The outpatient lab census is experiencing growth, with an increasing number of patients seeking care from out of town due to the more prompt and efficient services provided compared to other local labs.

Skilled Nursing

Our dedicated nursing staff is fully committed to providing exceptional care for our residents. We aim to create an environment where they can thrive and enjoy life to the fullest while focusing on their well-being. To combat the summer heat, we have provided ice water, popsicles, watermelons, and appropriate attire. Additionally, we have organized trips to Shelter Cove and the Redwoods to offer our residents a break from the heat, resulting in their overall happiness and satisfaction. We are also dedicated to providing proper medication guidance to ensure careful monitoring and management of any use of controlled substances, as required by state regulations, thus ensuring the safety of our residents from falls. We take pride in achieving a 100% compliance rate for documenting psychotropic medications, reflecting the exceptional dedication of our team.

Clinic:

The clinic is thrilled to introduce two new staff members: Katherine, our new LCSW, and Keri, our new Substance Use Navigator. They will be providing essential care and services to our community.

We are fully prepared and eagerly await the upcoming Partnership Review. The review team is scheduled to arrive on July 16. All necessary documents have been submitted, and we are well-prepared for the Chart and On-site reviews on July 16th and 18th.

Currently, we are working with local schools to arrange sports physicals.

We are pleased to announce that Jessie is now dual-certified as an FNP and AGACNP and can now care for children.

We have several dedicated team members working diligently to meet quality measures for this year.

Radiology- June

In the month of June, Radiology performed 178 x-ray exams, 111 CTs, 43 ultrasounds and 25 mammograms.

Work on the X-ray room continues but should soon be completed. We will limit hours when necessary but returning to regular hours.

We continue to address JIRA's for Radiology issues in EPIC, mostly related to billing.

The physicist returned for the annual mammography equipment survey. The state mammography license has been renewed for the next 3 years.

Pharmacy

The pharmacy is currently working on several important initiatives, including correcting medication orders in EPIC, updating disease-state treatment protocols, collaborating with architects to plan the foundation for the new hospital's pharmacy, preparing for and participating in various district grants, and ensuring accurate revenue capture within EPIC for medication administrations.

Physical Therapy:

We are excited to announce that we have established a Rehabilitation Department, complete with a team consisting of a physical therapist, an occupational therapist, and a speech therapist. We are pleased to offer these services to our patients and residents and will soon provide them to the community through outpatient services.

Our physical therapist, Sierra, has been working with inpatients twice daily, per our standard practice. She has also mentored our new occupational therapist, Katelyn, by allowing her to shadow and assist in the department. We are happy to report that we are making significant progress in setting up the outpatient space, finalizing the schedule, and determining charges. This progress brings us closer to offering these services to the community. We are also thrilled to announce that Susan, our speech therapist, is scheduled to start on Thursday, July 18, further expanding our suite of services.

Adela Yanez, RN, BSN, CNO

Agreement for the Provision of Credentialing, Privileging and Quality Assurance Information

I. INTRODUCTION

This Agreement is a contract between the undersigned Healthcare Organization providing teleradiology services to patients, and Online Radiology Medical Group, Inc., (ORMG), the distant-site facility where radiologists are located.

The words “we,” “us,” “our,” “distant-site,” and “ORMG” in the Agreement refer to Online Radiology Medical Group, Inc., which will provide the credentialing and privileging information to the Healthcare Organization as described in this Agreement. The words “you” and “your” refer to the undersigned Healthcare Organization.

II. PURPOSE

ORMG wishes to share information that is reasonably related to the qualifications, competency, ability, professional ethics, and conduct of ORMG physicians providing teleradiology services (“ORMG Teleradiologist(s)”) to Hospitals, Critical Access Hospitals (CAH), and other Healthcare Organizations, as defined by the Centers for Medicare and Medicaid Services (CMS), and/or accredited by The Joint Commission (TJC). ORMG believes that sharing this information can help increase patient access to services, improve the quality of patient care, reduce duplication of administrative procedures, and allow ORMG to furnish services that permit the Healthcare Organization to comply with all applicable conditions of participation and standards for contracted services. Healthcare Organization has chosen to allow its Medical Staff to rely upon Credentialing information developed by ORMG in recommending an ORMG Teleradiologist for membership and clinical privileges at Healthcare Organization.

III. DEFINITIONS

“Credentialing information,” as defined below, is confidential and privileged and should be managed appropriately. Credentialing information will be provided in accordance with CMS-3227-F 72, §482.12 (a) (1) through (a) (10) and §482.22 (a) (1) through (a) (4), and this policy. It includes information obtained from primary source verifications, data and reports that relate to the qualifications, competency, ability to practice, professional ethics or conduct of an ORMG Teleradiologist who provides services to patients of Healthcare Organization. It also includes professional review activity information, as defined in 42 U.S.C. §11151(10). Credentialing information will include verification of professional liability insurance coverage for the clinical privileges held/requested in minimum amount of \$1M per claim and \$3M aggregate. It includes, but is not limited to, the following:

- 3.1** New physician credentialing profile forms and supporting materials of ORMG medical staff members, including privileging decisions
- 3.2** Reappointment/renewal credentialing profile forms and supporting materials of ORMG Teleradiologists, including privileging decisions and the following:

- 3.2.1 Quality assessment information, specific to the ORMG Teleradiologist applicants or members of the Medical Staff of Healthcare Organization;
 - 3.2.2 Any adverse actions reported to, or taken by, any licensing board or the National Practitioner Data Bank, to the extent known by ORMG;
 - 3.2.3 Reports based on information from the ORMG Quality Assessment/Performance Improvement Committee, including proctoring;
 - 3.2.4 Any other data believed to reflect on the ORMG Teleradiologist's professional competence, conduct and/or support quality patient care.
- 3.3 ORMG maintains a list of privileges for each ORMG Teleradiologist and shall provide information about the status of ORMG Teleradiologists' privileges and membership, which shall be reviewed by Healthcare Organization prior to granting membership and/or clinical privileges to a ORMG Teleradiologist at Healthcare Organization.
- 3.4 Information regarding necessary accommodations or restrictions made to the privileges, duties, or work performed by an ORMG Teleradiologist due to any health condition or disability. Such information is confidential, and only those individuals or committees responsible for supervising and managing the medical staff shall have access to it.

IV. CONDITIONS FOR THE PROVISION OF CREDENTIALING INFORMATION

- A. **Authorization by practitioner:** ORMG shall provide credentialing information to the Healthcare Organization **within** in accordance with this policy once we receive a release signed by the medical staff applicant or member to permit sharing **with** the Healthcare Organization. The release will remain valid for a period of two years, or until it is revoked by the applicant or member in writing. Should the applicant/member not agree to sign this release, his/her application and credentialing paperwork will not be shared with the Healthcare Organization and Healthcare Organization may determine the applicant/member's application **in**complete.
- B. **Provision of credentialing information:** ORMG represents that all ORMG Teleradiologists providing services for Healthcare Organization are licensed to practice medicine in California. ORMG shall provide credentialing information **within** so the Healthcare Organization can assess professional qualifications and grant membership or privileges, to improve patient care, or for any other appropriate reason. ORMG shall provide identifiable ORMG Teleradiologist information for Healthcare Organization's National Practitioner Data Bank query. Such information shall be updated, as necessary, by ORMG and provided within a reasonable time frame to Healthcare Organization, upon request. It is understood that direct primary source verifications will be obtained by ORMG Medical Staff Services in accordance with CMS requirements and TJC standards, and state laws. ORMG shall provide a Physician Credentialing Profile Summary

form to the Healthcare Organization to represent these verifications, and shall provide primary source documents, upon request. The Healthcare Organization receiving this information, by signing below, agrees to maintain confidentiality of the credentialing information and to restrict its use to the purposes set forth by the CMS, in state statutes, and TJC standards (if Healthcare Organization is accredited by TJC).

- C. Exchange of quality assessment information:** The provision of credentialing information and quality assessment data from ORMG to Healthcare Organization is essential to fulfilling the intent of 42 C.F.R. §482.22 and pursuant to Cal. Bus. & Prof. Code §809.08. Reports will be provided on an ongoing basis, and for use in the periodic appraisal by the Healthcare Organization of ORMG teleradiologists. ORMG shall provide prompt notification to the Healthcare Organization, in the event it becomes aware of any of the following actions involving an ORMG Teleradiologist providing services to patients of Healthcare Organization: (1) formal corrective action; (2) any claim for professional liability; and (3) any information that substantively changes the information provided in an application.
- D. Internal Performance Information:** The Healthcare Organization shall have evidence of an internal review of ORMG Teleradiologists' performance, including adverse events and complaints the Healthcare Organization has received regarding an ORMG Teleradiologist, and shall provide ORMG such performance information for use in its periodic appraisal of the ORMG radiologist. An ORMG Teleradiologist shall be made generally aware by ORMG of any such adverse event or complaint information received about his/her care and treatment.
- E. Identifying information:** ORMG and the Healthcare Organization shall remove all identifying information of anyone other than the applicable ORMG Teleradiologist before providing credentialing, privileging or quality assessment information to the Healthcare Organization. When appropriate and practical, ORMG shall exchange data in the form of aggregate data or summaries.
- F. Required Statement:** All credentialing, privileging and quality assessment and peer review information exchanged in accordance with this Agreement shall include the label "confidential credentialing information" and be accompanied by the following statement:

"This document contains confidential healthcare review information that is legally privileged. Disclosure of this information is prohibited unless required to do so by law or regulation. Destruction of the information is required after its stated need has been fulfilled. This information is protected to the fullest extent under Section 1157 of the California Evidence Code."

Neither party shall use information produced pursuant to this agreement for reasons other than credentialing, privileging and other peer review activities including but not limited to corrective or disciplinary action. Each party may be a requesting or responding peer review body as those terms are used in California law.

In the event that either party to this agreement receives a request, demand or subpoena to disclose information provided pursuant to this agreement, the party in receipt of the request, demand or subpoena shall notify the other party as soon as practicable.

- G. Security and confidentiality:** ORMG is responsible for taking adequate measures to protect the privileged and confidential nature of the credentialing information exchanged in accordance with this policy. Healthcare Organization agrees to provide adequate security for the information and to use such information only as authorized in this Agreement and under law.
- H. Coordination with Risk Management:** ORMG Medical Staff Services is responsible for coordinating the exchange of information under this Agreement with the ORMG Risk Manager or other persons responsible for reviewing and assessing potential liability for the corporation. Healthcare Organization is responsible for coordinating the exchange of information under this Agreement with the Risk Manager of undersigned Healthcare Organization.

V. SCOPE

- 5.1 Entity specifying determinations.** Only the ORMG governing body, herein identified as the ORMG Board of Directors, shall have the authority to make determinations regarding physician membership or privileges at ORMG. Nothing in this policy is intended to limit our authority to take such actions as we deem appropriate regarding the qualifications or competency of ORMG medical staff members or applicants.

Only the Governing Body of the Healthcare Organization shall have the authority to make final determinations regarding membership or clinical privileges for a medical staff member or applicant of the Healthcare Organization, based upon the recommendation of its Medical Staff. The privileges granted to any ORMG Teleradiologist shall not exceed the privileges granted by ORMG. Nothing in this policy is intended to limit the authority of the Healthcare Organization and its Medical Staff to take such actions as it determines to be appropriate regarding the competence or conduct of an applicant or member of the Medical Staff of Healthcare Organization, including one providing services via telemedicine.

- 5.2 Events triggering Provision of information:**
 - 5.2.1** At the request of the ORMG Medical Executive Committee
 - 5.2.2** Upon request of the appropriate persons of the Healthcare Organization
 - 5.2.3** When the ORMG MEC knows of information it believes should be exchanged to advance the purposes of this Agreement or to improve patient care or services
 - 5.2.4** Application/Reapplication, as defined previously in this policy.

VI. TERM AND TERMINATION

This agreement is effective as of the date set forth on the signature page and shall continue in effect for the duration of the term of the Professional Services Agreement (“PSA”) dated September 1, 2009, by and between ORMG and Southern Humboldt Community Healthcare District. In the event the PSA is terminated, the membership and privileges of the ORMG Teleradiologist members on the Medical Staff of Healthcare Organization shall terminate without entitlement to hearing or appeal rights. Notice of such termination will be sent by certified mail.

Either Party may terminate this Agreement, with or without cause, upon sixty (60) days prior written notice. Notice of such termination will be sent by certified mail.

VII. INDEMNIFICATION

The parties agree to release each other from any liability, to the fullest extent permitted by law, and agree to indemnify each other for any and all claims, demands, liabilities, losses, and damages resulting in any manner, directly or indirectly, from the receiving party’s alleged improper release or disclosure of information shared pursuant to this agreement.

ORMG shall indemnify and hold harmless Southern Humboldt Healthcare District, and its respective representatives from and against any and all claims, actions, causes of action, demands, losses, liabilities, costs, damages, and expenses (including reasonable attorney’s fees and associated costs) (collectively “losses”) of any nature whatsoever asserted against, relating to, imposed upon, or incurred, directly or indirectly, by reason of, resulting from, or attributable to the credentialing, privileging or medical peer review of an ORMG Teleradiologist using information shared pursuant to this Agreement.

This provision shall survive the termination of this Agreement.

VIII. GENERAL TERMS

8.1 The provisions of this Agreement are independent of and separate from each other. If any one provision is determined to be invalid or unenforceable, it shall not render any other provision invalid or unenforceable.

8.2 You may not assign this Agreement ent without our prior written consent. We may not assign this Agreement without your prior written consent, except that we may assign this Agreement to an entity related to us by ownership or control without your prior written consent.

8.3 The parties are independent entities. Nothing in this Agreement shall be construed to create a relationship of employer and employee, principal and agent, joint venturers, partners, or any relationship other than independent entities.

8.4 No part of this Agreement, including this section, may be modified or amended except in writing signed by both parties, but we may modify or amend this Agreement, effective immediately, by sending you a notice, if any state or federal

law, regulation or agency requires us to make the modification or amendment.

8.5 This Agreement shall be governed by and construed in accordance with the laws of the State of California, without regard to the principles of conflicts of law.’

In witness whereof, the parties hereto have executed this Agreement for the Provision of Credentialing, Privileging and Quality Assurance Information, effective as of the effective date indicated below.

Online Radiology Medical Group, Inc.

Healthcare Organization:
Southern Humboldt Community
Healthcare District dba Jerold Phelps
Community Hospital

By: _____

By: _____

Title: _____

Title: _____

Date: _____

Date: _____

Address:

Address:

1770 Iowa Avenue, Suite 280
Riverside, CA 92507

733 Cedar Street
Garberville, CA 95542

Effective Date: _____

**RESOLUTION NO. 24:00
FIXING THE EMPLOYER CONTRIBUTION
UNDER THE PUBLIC EMPLOYEES’ MEDICAL AND HOSPITAL CARE ACT
AT AN EQUAL AMOUNT FOR EMPLOYEES AND ANNUITANTS
700 ALL EMPLOYEES**

WHEREAS, (1) Southern Humboldt Community Healthcare District is a contracting agency under Government Code Section 22920 and subject to the Public Employees’ Medical and Hospital Care Act (the “Act”); and

WHEREAS, (2) Government Code Section 22892(a) provides that a contracting agency subject to Act shall fix the amount of the employer contribution by resolution; and

WHEREAS, (3) Government Code Section 22892(b) provides that the employer contribution shall be an equal amount for both employees and annuitants, but may not be less than the amount prescribed by Section 22892(b) of the Act; now, therefore be it

RESOLVED, (a) That the employer contribution for each employee or annuitant shall be the amount necessary to pay the full cost of his/her enrollment, including the enrollment of family members, in a health benefits plan up to a maximum of:

| Health Plan Set | Monthly Employer Health Contribution | | |
|-------------------|--------------------------------------|-----------------------------|-----------------------------|
| | Self | Self+1 | Self+ Family |
| PERS Platinum PPO | Total premium less \$200.00 | Total premium less \$600.00 | Total premium less \$800.00 |
| All other plans | Total premium less \$95.00 | Total premium less \$295.00 | Total premium less \$380.00 |

plus administrative fees and Contingency Reserve Fund assessments; and be it further

RESOLVED, (b) Southern Humboldt Community Healthcare District has fully complied with any and all applicable provisions of Government Code Section 7507 in electing the benefits set forth above; and be it further

RESOLVED, (c) That the participation of the employees and annuitants of Southern Humboldt Community Healthcare District shall be subject to determination of its status as an “agency or instrumentality of the state or political subdivision of a State” that is eligible to participate in a governmental plan within the meaning of Section 414(d) of the Internal Revenue Code, upon publication of final Regulations pursuant to such Section. If it is determined that Southern Humboldt Community Healthcare District would not qualify as an agency or instrumentality of the state or political subdivision of a State under such final Regulations, CalPERS may be obligated, and reserves the right to terminate the health coverage of all participants of the employer; and be it further

RESOLVED, (d) That the executive body appoint and direct, and it does hereby appoint and direct, HR benefits Assistant Toni Genaro Siska to file with the Board a verified copy of this resolution, and to perform on behalf of Southern Humboldt Community Healthcare District all functions required of it under the Act; and be it further

RESOLVED, (e) That coverage under the Act be effective on January 1, 2025.

Adopted at a regular meeting of the Southern Humboldt Community Healthcare District at 286 Sprowel Creek Rd, Garberville, Ca, 95542, this 29th day of August, 2024.

Signed: _____
President, Corinne Stromstad

Attest: _____
Vice President/Secretary, Barbara Truitt