

SOUTHERN COOS HEALTH DISTRICT

Board of Directors | Regular Meeting
Public Access via Southern Coos Hospital Website and Facebook Meeting Links February 24, 2022 6:30 p.m.

AGENDA

I.	Public Meeting 6:30 p.m. Call to Order 1. Public Input	
II.	Consent Agenda	
	 Meeting Minutes Regular Meeting—01/27/22 Special Meeting—02/08/22 Executive Sessions – 01/18/22; 01/25/22; 01/27/22; & 02/08/22 Monthly Counsel Invoices Robert S. Miller III, General Counsel – 02/03/2022 Inv. #1027 	p 2-6 p 7
III.	 Staff Reports CEO Report—Deborah Ellis, Interim CEO Clinic Report—Deborah Ellis CNO Report—Cori Valet, CNO CFO Report—Jeremiah Dodrill, CFO CIO Report—Scott McEachern, CIO SCHD Foundation Report—Scott McEachern, CIO Medical Staff Report—Dr. P.J. Keizer, MD Credentialing Report 	p 10 p 11-12 p 13-14 p 15 p 16 p 17 p 18
IV.	Review of Monthly Financial Statements, presented by Jeremiah Dodrill, CFO	p 19-35
V.	Quality & Patient Safety Monthly Report, presented by Barb Snyder, RN	p 36
VI.	New Business 1. Consideration of MRI Proposal 2. Moss-Adams Cost Report & FY21 Adjustments – Tony Andrade, Moss Adams	p 38
VII.	Old Business 1. Permanent CEO Search Update 2. Governance Institute Education	
VIII.	Open Discussion	
IX.	Adjournment	



SOUTHERN COOS HEALTH DISTRICT

Board of Directors Regular Meeting Minutes January 27, 2022

Members Present: Brent Bischoff, Chairman; Mary Schamehorn, Secretary; Norbert Johnson, Treasurer; Pamela Hansen, Director and Tom Bedell, Director. Member Not-Present: None. Administration: Deborah Ellis, Interim CEO; Jeremiah Dodrill, CFO; Cori Valet, CNO; Scott McEachern, CIO; and Philip Keizer, MD, Medical Staff Chief of Staff. Others present: Robert S. Miller III, General Counsel. Due to COVID019 restrictions, meeting was held virtually via Zoom for all attendees.

An Executive session was held at 6:00 pm under ORS 192.660(2)(a) and 192.660(7) to consider the employment of a public officer, employee, staff member or individual agent and ORS 192.660(2)(h) to consider with counsel concerning the legal rights and duties of a public body with regard to current litigation or litigation likely to be filed. No decisions were made in Executive Session.

I. Call to Order

Mr. Bischoff, Chairman, called the meeting to order at 6:48 p.m. following Executive Session, noting the presence of a quorum.

Tom Bedell **moved to approve** the confidential agreement as reviewed in Executive Session. Mary Schamehorn **seconded** the motion. No further discussion. **All in favor. None opposed. Motion passed.**

Mr. Bischoff requested a motion to approve the meeting agenda.

Mary Schamehorn **moved** to accept the meeting agenda. Norbert Johnson **seconded** the motion. **None opposed. Motion passed.**

1. Public Input

No public input received, option was left open in case there was input after the fact since the meeting was held virtually. Scott McEachern monitored for input.

II. Consent Agenda

1. Meeting Minutes

i. Regular Meeting -12/16/2021 and Executive Session -12/14/21; 12/21/21; 12/28/21; and 12/30/21

2. Monthly Counsel Invoices

i. Robert S. Miller III, General Counsel ~ #2088 ~ 01/3/22



Norbert Johnson **moved** to approve the Consent Agenda and Mary Schamehorn **seconded** the motion. **None opposed. Motion passed.**

III. Staff Reports

1. CEO Report

Deborah Ellis, Interim CEO, started with recognition of Employees of the Year. Clinical recipient was Denise Ebenal, Infection Control Nurse, Employee Health, and Quality and Risk; Non-Clinical Dietary Department consisting of Bonnie Ragan; Rick Haas; Steven Bettelyoun. COVID-19 continues to stress the limits of all the Hospitals, local and throughout our State and Nation. All locations are facing excess stress to staff, supplies and equipment. In effort to reduce exposure we have implemented a work from home option to those employees that are able to perform their duties without having to be on site. Communication with off-site employees has been enabled by doing Zoom meeting. Also internal communication has been moved to zoom meeting as much as possible. Visitors to patients in the Hospital has been limited to essential personal or care taker on site. We are coordinating with local Hospitals, Bay Area Hospital, Coquille Hospital and OHA and have plans in place to support the each other as needs may apply. With support from Barbara Snyder we were awarded a SHIP Grant (Small Hospital Improvement Program Grant) from Oregon Office of Rural Health. Funds will be used to work with the Stroudwater consulting firm to provide us with guide dance in maximizing our medical staff services across the hospital. Annual Health Day is coming up on 26th of February lead by Stephanie Lyon, Karen Stafford, Scott McEachern and his staff are working to make this a successful event.

2. Multi-Specialty Clinic Report

Deborah Ellis, Interim CEO, announced the hiring of Cherie Turbitt as the new Manager in the department and will start in February. Clinic has multiple employees affected by COVID and it has limited the capacity to service our patients. Clinic is focusing on working on the no show rate to help reduce the number. Norbert Johnson noted that an appointment was made with the clinic and that a reminder of the appointment was made a week before the appointment was scheduled. Norbert Johnson asked if we could make the call reminder a little closer to the appointment date. Deborah Ellis confirmed that the new manager will be assigned the project and we are in process of addressing the challenge.

3. CNO Report

Cori Valet, RN/BSN, CNO presented the CNO Report. Ms. Valet updated the plan to begin using the new Cepheid GeneXPert (Rapid PCR) in the Laboratory beginning in February instead of January due to a delay in installation that will affect validation and implementation. Med/Surg census remains at or close to our capacity based on physical beds and nursing capacity. Currently have five full time Nurse and five full time CNA positions to fill. There are 4 Agency Nurse contracts in place to fill the



current need. Announced Karen Stafford moved from Clinic Manager to Case Management, Discharge Planner, and Swing Bed Manager. Karen Stafford has oriented well to new position and is already making a difference in referrals and discharges. Due to challenges with only using Rite Aid for our outsourced Pharmacy needs, we are in process of instituting a contract with Coast Community Health Center Pharmacy to fill non-formulary medications for inpatient and Swing Bed patients. This will help reduce the risk of delays medications. Respiratory Department has noticed in increase in In-Patient and Swing Bed procedures. In addition Out-Patient Pulmonary Function test have also increase due to local Pulmonary Function test facilities not doing those test and referring them to our Hospital. Supply Chain process may affect numbers in the month of February due to components needed for test are being delayed. Opened floor to questions and none were introduced.

4. CFO Report

Jeremiah Dodrill, CFO, reviewed his report. The summary report is included in the financials this month. Jeremiah provided the individual stats for each provider to the board privately. Jeremiah acknowledge Katelin Wirth and accounting team for building these reports. Progress made to move to standard tools to evaluate financial performance for Hospital based provider contracts. Year End tax reporting 1099 forms completed. Introduced the CBR-1 Community Benefit Report. A State wide report validated Medic Aid Medic Care support vs expenses beyond those coverages incurred by the Hospital.

5. CIO Report

Scott McEachern, CIO, shared that looking to highlight internal and external testimonials. Published Bandon Health Wave and Leslie Tucker was recognized for 30 years of service to our Hospital. Website update changes made and an electronic application has been implemented. Next in process will be an electronic medical records request form. Looking to move to a digital format to allow community easier access. Adding detail to current emergency plan and contingency plans in collaboration with our Engineering Department. Lastly, starting in February our Clinical Informatics Manager will begin bench marking workflows in Multi-Specialty Clinic in effort to identify gaps to improve productivity. Opened floor to questions and none were introduced.

6. SCHD Foundation Report

Scott McEachern, CIO & Foundation Executive Director provided a recap of the Health Foundation Report; the year-end fundraising campaign to support the Bandon School nurse program; the 19th annual Women's Health Day is February 26th, 2022 all virtual; and Above and Beyond Recognition. Opened floor to questions and Brent Bischoff inquired what percentage of funds raised are for salary for the RN and threshold needed to be reached. Reply was the threshold was met and yes, salary and current funds will cover the rest of this school year and part of next year. Fundraising will continue to support the position beyond current amount. Pamela Hansen inquired



if the schools received COVID funds and if so, could those funds be used to support the School RN program. Yes, and the School System will also contribute to fund.

7. Medical Staff Report

i. Dr. Keizer presented the Privileging Report from the January 11 Medical Staff monthly meeting:

New Appointment

None

Reappointments

None

Current Staff Changes

Marc David Smith, MD - Emergency Medicine – Retiring Steven Rudis - Emergency Medicine – Retiring Jonathan Doug Mayeux – Emergency Medicine – Retiring Oregon License

<u>Direct Radiology - Third Party Reading Radiology Group</u>

Jeffrey Grossman, MD – Courtesy – Reappoint Michael Rozenfeld, MD – Courtesy - Resign

Mary Schamehorn **moved** to accept the Medical Staff Report as presented. Norbert Johnson **seconded** the motion. **None were opposed. Motion passed.**

IV. Monthly Financial Statements: Review

Jeremiah Dodrill, CFO, provided a review of the financial statements for the month of December. **Discussion:** Discussion took place throughout the presentation of the financial reports. Opened floor to questions and none were introduced.

V. Quality and Patient Safety Report

Barbara Snyder, Quality and Risk Manager. Ms. Snyder went over the monthly report. Updated working on fundamental goals currently set and taking into account the high level of stress currently being addressed by staff. Opened floor to questions and none were introduced.

VI. New Business

1. Proposed Discussion to District Bylaws Update or Changes.

Proposal submitted to create a process of periodic review of Bylaws. Two volunteers requested by Brent Bischoff and Norbert Johnson and Tom Bedell also volunteered.

VII. Old Business



1. Permanent CEO Search Update

Brent Bischoff, Board Chair gave an update on the CEO position posting. December period was used to interview six selected potential candidates and narrowed the selection down to two candidates. Moving to next step of having the first choice candidate to visit the Hospital and tour and meet key individuals. Due to COVID a large introduction to more than key individuals was not an option. Itinerary for visit to be supplied to Board Members.

2. Governance Institute Update

Brent Bischoff, Board Chair, gave an update on Board education available. Looking to come up with an agenda that will assist the current Board. Brent Johnson contributed his experience on how useful and easy to use the modules available. All Board members confirmed to review modules.

VIII. Open Discussion

Norbert Johnson inquired inviting Board Member to Leadership meeting. Deborah Ellis will have zoom link sent for future meetings. Tom Bedell recognized Robin Miller for being awarded #2 Best Attorney and Law firm in Coos County. Cori Valet updated that Debra Backman will have a proposal for upgrade MRI machine at February meeting.

IX. Adjournment

At 8:25 p.m. the meeting was adjourned. Health District will be February 24, 2022 at	The next regular meeting of the Southern Coos 6:30 p.m.
Brent Bischoff, Chairman 2-24-22	Mary Schamehorn, Secretary 2-24-22



SOUTHERN COOS HEALTH DISTRICT

Board of Directors Special Meeting Minutes February 8, 2022 6:30 pm.

Members Present: Brent Bischoff, Board Chairman; Mary Schamehorn, Secretary; Norbert Johnson, Pamela Hansen, Tom Bedell; Directors. Administration: Scott McEachern, CIO. Others present: Robert Miller, III, Counsel. Mr. Bedell and Mr. Miller attended via teleconference. Press: None.

At 6:00 the Board met in Executive Session Under ORS 192.660(2)(a) to discuss CEO applicant screening. No decisions were made in Executive Session.

I. Call to Order

Meeting adjourned at 6:41 p.m.

Brent Bischoff, Chairman 02-24-2022

At 6:36 the Open Session Meeting was called to order by the Board Chairman. This open session was also available to the general public via the SCHHC website and Facebook social media page.

II. Consideration of Employment of New CEO

Norbert Johnson **moved** that the Southern Coos Health District hire Mr. Raymond Hino as CEO at a salary of \$230,000, in a 3-year contract renewable annually, with other standard benefits, with contract to be signed by Mr. Hino before his start date. Mary Schamehorn **seconded** the motion. **No further discussion. All in favor. None opposed. Motion passed.**

Mr. Bischoff noted that a press release will be provided February 9 and the CEO start date will be February 28. Mr. Bischoff also took a moment to express appreciation for the pool of qualified candidates who expressed interest and participated in the interview process. Pam Hansen noted appreciation for the efforts of the board and others throughout the process to meet the February goal.

J			

Mary Schamehorn, Secretary 02-24-2022

INVOICE

Robert S. Miller III Attorney (CY2022+)

1010 First Street SE, Suite 210 Bandon, OR 97411 robertstevensmilleriii@gmail.com (541) 347-6075

Southern Coos Hospital & Health Center

DII				

Southern Coos Hospital & Health

Center

900 11th Street SE Bandon, OR 97411

USA

Ship to

Southern Coos Hospital & Health

Center

900 11th Street SE Bandon, OR 97411

USA

Invoice details

Invoice no.: 1027

Invoice date: 02/03/2022 Terms: Due on receipt Due date: 02/03/2022

			196.000000000000000000000000000000000000
	Product or service		Amount
1.	Attorney	0.8 units × \$250.00	\$200.00
	Service date: 01/01/2022		
	Prospective CEO Steiner telepohone call, research, emails.		
2.	Attorney	0.5 hrs × \$250.00	\$125.00
	Service date: 01/04/2022		
	Receive, review confidential agreement.		
3.	Attorney	1.4 hrs × \$250.00	\$350.00
	Service date: 01/14/2022		
	Prospective CEO Steiner telephone call, research, to Board Chair.		
4.	Attorney	1.2 hrs × \$250.00	\$300.00
	Service date: 01/18/2022		
	Prepare and attend Southern Coos Special Executive Session.		
5.	Attorney	4.5 hrs × \$250.00	\$1,125.00
	Service date: 01/25/2022		
	tc PDX counsel re: confidential agreement; participate in f/u interviews Steiner, Hino.		
6.	Attorney	2.2 hrs × \$250.00	\$550.00
	Service date: 01/26/2022		
	emails Hall, to Hansen: issue of reference checking CEO candidate Hino.		
7.	Attorney	3.5 hrs × \$250.00	\$875.00
	Service date: 01/27/2022		
	Executive Session and Board Meeting.		

Service date: 01/28/2022

tPay VISA (III) DISCOVER (III) BANK

Prospective CEO Hino contract preparation; terms consult.

Ways to pay

Total

\$4,275.00



CHIEF EXECUTIVE OFFICER REPORT

To: Southern Coos Health District Board of Directors and Southern Coos Management

From: Deborah Ellis, Interim CEO

Re: Chief Executive Officer Report for SCHD Board of Directors, February 2022

Greetings Everyone,

As this will be my last Southern Coos Health District Board meeting as Interim CEO, I wanted to take a moment to thank each and every one of you for the support you have provided me during my time as Interim CEO. Since this past July, you have supported myself and the entire staff as we came together to focus on stabilizing the organization. I feel honored to have been a part of this highly-skilled, competent, and dedicated team of professionals.

I have great faith that the combination of each of your strengths, experience, and abilities will provide Southern Coos Health District with the leadership that is so needed to take this organization forward. I admire your dedication in attaining all of the necessary education in order to function as a fully cohesive Board, the spending of countless hours doing your due diligence in selecting the candidate, Ray Hino, who would fit perfectly with our organization—all of which speaks volumes as to your dedication to this Health District. I think I speak for the entire staff at Southern Coos Hospital & Health Center when I express the tremendous degree of gratitude that all of us feel for the time, energy, and commitment each of you have volunteered in order to insure the continued growth and expansion of Southern Coos Health Center to our community.

Sincerely,

Debi Ellis, RN, Interim CEO



MULTI-SPECIALTY CLINIC REPORT

To: Southern Coos Health District Board of Directors and Southern Coos Management

From: Deborah Ellis, Interim CEO

Re: Chief Executive Officer Report for SCHD Board of Directors, February 2022

Provider News

- Dr. Mitchell, Dr. Pense and Dr. Adams all saw an average of 8 patients per day. Dr. Mitchell was in clinic a total of 14 days with 115 total patients seen. Dr. Pense was at 6 days with 49 patients and Dr. Adams 5 days with a total of 40 patients seen.
- · Shane Matsui, LCSW continues to average 3 patients per day with 17 days in clinic
- Debra Guzman, NP continues to lead the team with telehealth and new patients. She logged in 39 telehealth calls and added 23 new patients to her panel. She averaged 10 patients per day with 16 days in clinic and a total of 162 patient visits.
- Dr. Webster, Dermatologist, was in clinic January 20 seeing 17 patients.
- Dr. Qadir, Nephrologist comes for a ½ day, and was in clinic January 4 and saw 9 patients.
- Project planning for the Pain Management Center is in the final stages with a go live at the end of March.

Clinic Report

- Telehealth visits for December were 67. We anticipate this number to maintain or slightly decrease as we transition out of the recent Covid-19 surge.
- We have a new clinic manager! Cherie Turbitt's first day was February 2 and we are thrilled to have someone of her caliber joining our team.
- Karen Stafford, the outgoing clinic manager, accepted the position of Discharge Planner /
 Swing Bed Coordinator/UR Coordinator and has transitioned into her role this month. She
 will be training Cherie Turbitt to her new role. Kassandra Keller remains as interim clinic
 supervisor as Cherie trains and orients thru the end of February.



- We continue to offer Covid booster days in the clinic with 4 days being offered this month. We definitely saw a decrease from previous months of the events selling out and adding walkins. We had a total of 120 slots this month and administered 105 vaccines. All vaccines were offered. We will continue to offer booster clinics.
- With the weekly check in meetings with the coders and finance manager, we continue to see a dramatic decrease in various issues resulting in not being able to process the patients account and bill. Kassandra Keller continues to remain instrumental in keeping the outstanding charges to a minimum with the assistance of Lori Colby and Cathy Mann.
- We are pleased that our LCSW, Shane Matsui along with Dr. Mitchell will be guest speakers at our annual Women's Health Day on February 26. They gave very informative talks at last year's event and were very popular with the attendees.

	Days in Clinic	Patients			Total	Average	No Show	Total	Total
Provider	Clinic	Scheduled	CXL'D	No Show	Seen	Seen	Rate	Telehealth	New Pts
Debra Guzman, FNP	16	183	5	16	162	10	11%	39	23
Olixn Adams, DO	5	44	1	3	40	8	9%	7	0
Noel Pense, DO	6	52	0	3	49	8	6%	0	9
Christine Mitchell, DO	14	130	8	7	115	8	12%	7	14
Shane Matsui, LCSW	17	70	9	2	59	3	16%	14	3
COVID-19 Clinic	4	120	0	0	105	26	0%	0	0
Outpatient Services	21	215	6	4	208	10	5%	0	0
Totals	13	814	29	35	750	58	8%	67	49
Total telehealth	67								
Southern Coos Health	Center Intrado	Results -	January 2	2022					
Туре	Total								
Called - No Answer	3		*Pts Seen	366					
Phone Too Busy	13		*Cancelled	14					
Answered No TT Requested	7		*No Show	29					
Answered - Hung Up	14		*Primary C	are Only					
Answered - Entire Msg	0		Total Cano	el/No Show r	ate - 11%				
Invalid Ph # / Out of Order	2								
Answered - Repeated Msg	0								
Answering Machine	94								
Answered Yes	132								
Answered No	3								
Total Calls Made	268								



CHIEF NURSING OFFICER REPORT

To: Southern Coos Health District Board of Directors and Southern Coos Management

From: Cori Valet, CNO

Re: Chief Nursing Officer Report for SCHD Board of Directors, February 2022

People

- Clinical Department Staffing
 - o Nursing
 - Vacancies include 8 Full Time nurse positions (5 MS, 3 ED) and 5 CNA positions.
 - Four Agency Nurse Contracts are in place (2 MS, 2 ED)
 - Surgical Manager position remains vacant
 - o Laboratory
 - Vacancies include: 1 Full Time and 1 Per Diem Medical Laboratory Scientist/Medical Laboratory Technologist, and 1 Medical Laboratory Assistant
 - Agency/Contract MLS/MLT will likely be required
 - Medical Imaging
 - Vacancies include 2 Full Time Technologists and one Part Time Technologist.
 - 1 Agency/Contract Technologist in place.
 - o Respiratory Therapy Fully staffed

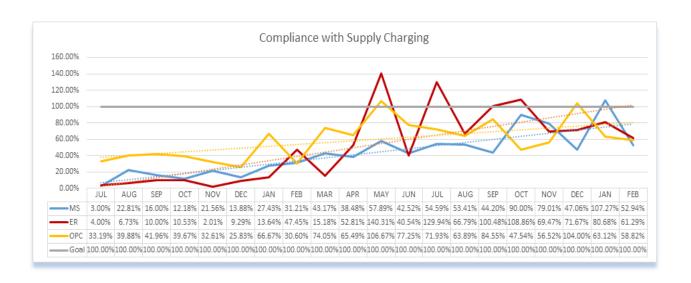
Growth

- Respiratory Therapy outpatient volumes remain consistent through February 2022.
 - o Albuterol metered dose inhalers (MDIs) and spacers previously on shortage were received and remain available.
- Pharmacy has seen slight improvement in the availability of specific medications previously on shortage.
- COVID-19 testing supply shortages have resolved.
 - O Shortages resulted from the production and release home testing kits. The manufacturers paused production of the Sofia tests to meet the governmental need for at home testing. Manufacturing of Sofia tests has resumed and there is no indication that there will be a recurrence.

Finance

- Floor stock charge capture
 - Ongoing project between Finance and the nursing units; Emergency Dept., Med-Surg, and Outpatient nursing services, to increase the volume of charge capture for floor stock items.
 - o Goal is 100%.
 - o Graph (on next page) demonstrates monthly variance with overall upward trend.







CHIEF FINANCIAL OFFICER REPORT

To: Board of Directors and Southern Coos Management

From: Jeremiah Dodrill, CFO

Re: CFO Report for Board of Directors Meeting – February 2022

Cost Report Adjustments and FY 2021 Updated Audited Financials

Moss Adams presented the audited financial statements and filed cost report to the Board in its regular November Board Meeting. Subsequently, Management has identified significant adjustments to the cost report that are necessary to accurately report the Hospital's cost based reimbursements to Noridian. These adjustments are primarily related to the reconciliation of Medicare Advantage swing bed days as well as the provider based cost based reimbursement in the Clinic. The net difference of these adjustments is a reduction in Medicare revenues of approximately \$300k.

Moss Adams is on the agenda to update its report to the Board regarding the cost report adjustments and necessary corrections to the audited financial statements.

Community Benefit Report (CBR-1)

Finance has requested an extension on the State of Oregon CBR-1 reporting due to the aforementioned adjustments in the Medicare cost report. Various data from the Medicare cost report are inputs into the calculations that drive values in the CBR-1 report. The report extended due date is now March 26. Finance will review the completed CBR-1 with the Board in the March Board meeting.

Budget Planning

Finance has begun to plan for the fiscal FY2022/23 budget. The majority of the budget activities occur during April and May with a finalized budget to be passed by the Board in the June regular Board meeting. We will provide the Board an outline of the Budget process in the March regular Board meeting.



CHIEF INFORMATION OFFICER REPORT

To: Southern Coos Health District Board of Directors and Southern Coos Management

From: Scott McEachern, Chief Information Officer

Re: CIO Report for SCHD Board of Directors, February 2022

People

- In Marketing, we are focused on our long-term strategy of highlighting the personal stories that comprise the culture of the hospital by posting the Above and Beyond program recipients on Facebook and Instagram.
- HIM staff is planning for continuing education in the field of Medical Records.
- We will soon launch the SCHHC Health & Wellness program. The program will kick-off with the release of a health and wellness app called HeadSpace for Work.
- IS staff are working toward certifications in the information systems fields, including Jeff Weymouth will soon complete the COMP A+ certification.

Service

- We will go-live with an updated patient portal in March; it is called MyCareCorner. It will
 offer improved ease of use for our patients and better communication tools with their
 providers.
- In collaboration with the Southern Coos Health Foundation, we partnering with Bandon School District to continue the School Nurse Program at BSD. As stated in the Southern Coos Health Foundation report, we have hired Karrie Devine, RN, who will begin on March 1.

Quality

• We are working on a dashboard that will give us real-time data on chart deficiencies so we can respond immediately to incomplete charts. The goal is to decrease the time it takes between patient encounter and payment for service.

Growth/Finance

Shawn March, our clinical informatics manager, is working to analyze workflows in the Multi-Specialty Clinic and has a baseline for the current processes in place. We are now working toward making specific recommendations to the clinic to optimize patient intake and increase productivity



SOUTHERN COOS HEALTH FOUNDATION REPORT

To: Southern Coos Health District Board of Directors and Southern Coos Management

From: Scott McEachern, Executive Director, SCHF

Re: SCH Foundation Report for SCHD Board of Directors, February 2022

School Nurse Program at Bandon School District

SCHHC has hired Karrie Devine to serve as the School Nurse at Bandon School District. Ms. Devine is an RN with 23 years of progressive experience in nursing. She has worked in pediatric units at the California Children's Hospital and at Bay Area Cancer Center in Coos Bay. Karrie is a Bandon resident with children in the school district. Her focus for the nine month school year will be to serve as the BSD School Nurse; during summers, Karrie will be available to work shifts at SCHHC if she desires to do so.

Women's Health Day

The 19th Annual Women's Health Day takes place on February 26th, 2022. Due to rising COVID cases in the county, state, and nation, we moved to a fully virtual format. You may sign up for the event at https://www.eventbrite.com/organizations/events

As of this writing, we have 105 people signed up for the event.

Golf for Health Classic

The 16th Golf for Health Classic fundraiser takes place on September 17th, 2022, at the Bandon Crossings. Our internal team has started planning for the event and will kick off advertising in March with a long-lead save the date. The team has already contacted the major sponsors from last year asking to renew sponsorships.

Gift Shop Update

The SCHF Gift Shop will promote upcoming Mother's Day in May and Father's Day in June with seasonally-appropriate products. The Gift Shop will also switch point of sale systems by the beginning of the next fiscal year, July 1, 2022, in an attempt to increase ease of use for our volunteers and prepare to sell items online.



		SCHHC Medical Staff Meeting	February 8, 2022						
Appointment and Privileges – MEDICAL STAFF									
Name	Category	Area of Practice							
Brent Hatch, PA-C	Dependent Allied Health Professional	Orthopedic							
Supervising Physician: S. Hobson			_						

Appointment and Privileges – Licensed Independent and Dependent Practitioners								
Name	Category	Area of Practice						
None								

Reappointment and Privileges – MEDICAL STAFF								
Name	Category	Area of Practice						
Olixn Adams, DO	Active	Family Medicine						
Thomas Kinsley, MD	Courtesy	Emergency Med						
Don Hirschman, CRNA	Courtesy	Anesthesia						
James Tracy, DO	Courtesy	Allergy						

Appointments, Reappointments, Changes – Direct Radiology								
Name	Category	Area of Practice	Change					
Perry Kaneriay, MD	Courtesy	Radiology	Reappoint					
Suzanne Aquino, MD	Courtesy	Radiology	Reappoint					
Patricia Barnes, MD	Courtesy	Radiology	Reappoint					
Lee Hewett, MD	Courtesy	Radiology	Appoint					
James Le, MD	Courtesy	Radiology	Appoint					

Staff Changes – MEDICAL STAFF								
Name	From Status	To Status	Area of Practice					
Tamara Stambaugh, FNP	Courtesy	Resigned Privileges	Family Medicine					



Financial Report January 2022



To: Board of Directors and Southern Coos Management

From: Jeremiah Dodrill, CFO

Re: January 2022 Month End Financial Results

Gross Revenue and Volumes – Gross revenues for December of \$3,394,000 were higher than budgeted expectations of \$3,145,000. OP gross revenues of \$2,291,000 were higher than a budget of \$2,068,000. Lab volumes increased slightly in January, slightly exceeding budget expectations. There was a significant increase in ED volumes in January, far exceeding budget. Imaging volumes were marginally over budgeted expectation with a slight decrease over the prior month. IP and Swing Bed volumes and revenues of \$1,103,000 were slightly higher than a budget of \$1,077,000 for the month of January.

Deductions from Revenue – Revenue deductions at \$1,252,000 or 36.9% of gross revenue were higher than a budget of 35.0% due to higher mix of OP services compared with IP during the month. Year-to-date, deductions from revenue is 34.6% of gross revenue vs. a budget of 36.1%.

Total Operating Revenues of \$2,142,000 exceeded the budget of \$2,050,000.

Labor Expenses totaled \$1,441,000 in January compared to a budget of \$1,339,000.

Professional Fees and Purchased Services combined were \$456,000 which was slightly below budget of \$462,000.

Medical Supplies, Drugs and Other Supplies combined were flat compared to budgeted expectations at \$153,000.

Operating Expenses – Total operating expenses of \$2,207,000 for the month were 2.2% higher than budget of \$2,160,000.

Operating Income / Loss – Operating loss for January was (\$65,000) compared to budgeted loss of (\$110,000). Year to date operating loss is (\$860,000) compared to a budgeted loss of (\$1,076,000).

Increase in Net Position was \$21,000 compared to a budgeted loss of (\$3,000).

Days Cash on Hand in January was 132.1 days, up from December at 127.4 due to strong collections in January which saw A/R days decrease from 62.4 to 55.1 from December to January. Days cash on hand remains high due to the recognition of COVID-19 grant funds in FY2021, in particular HRSA Provider Relief Funds received in November 2021.

Volume and Key Performance Ratios For The Period Ending January 2022

	[Month				7	ear to Date		
					Variance	Variance				Variance	Variance
		Actual	Budget	Prior Year	to Bud	to Prior	Actual	Budget	Prior Year	to Bud	to Prior
	IP Days	111	84	80	32.0%	38.8%	731	538	512	35.9%	42.8%
	Swing Bed Days	127	147	125	-13.6%	1.6%	773	1,019	1,066	-24.1%	-27.5%
	Total Inpatient Days	238	231	205	3.0%	16.1%	1,504	1,557	1,578	-3.4%	-4.7%
Dad.	Avg Daily Census	7.7	7.5	6.6	3.0%	16.1%	7.0	7.2	7.3	-3.4%	-4.7%
G G	Avg Length of Stay - IP	3.3	4.0	3.8	-18.4%	-14.3%	3.6	3.6	3.4	0.2%	5.3%
S	Avg Length of Stay - SWB	9.1	12.3	10.4	-25.9%	-12.9%	11.5	10.6	11.1	8.7%	3.9%
Volume Summary											
Vol	ED Registrations	403	304	323	32.4%	24.8%	2,685	2,252	2,390	19.2%	12.3%
	Clinic Registrations	478	484	258	-1.2%	85.3%	3,154	3,354	1,992	-6.0%	58.3%
	Ancillary Registrations	1,261	1,179	1,179	7.0%	7.0%	8,882	7,728	7,728	14.9%	14.9%
	Total OP Registrations	2,142	1,967	1,760	8.9%	21.7%	14,721	13,334	12,110	10.4%	21.6%
t	Gross IP Rev/IP Day	8,288	10,420	9,551	-20.5%	-13.2%	8,390	10,862	9,763	-22.8%	-14.1%
ner	Gross SWB Rev/SWB Day	1,439	1,366	2,021	5.4%	-28.8%	960	1,365	1,290	-29.7%	-25.6%
ate	Gross OP Rev/Total OP Registrations	1,070	1,051	1,079	1.8%	-0.8%	1,027	1,071	1,052	-4.1%	-2.4%
ome St Ratios	Collection Rate	63.1%	65.0%	67.8%	-3.0%	-6.8%	65.4%	63.9%	65.5%	2.2%	-0.1%
Key Income Statement Ratios	Compensation Ratio	67.3%	65.3%	63.3%	3.0%	6.3%	68.7%	66.7%	65.3%	3.0%	5.1%
lpc	OP EBIDA Margin \$	(10,096)	(41,018)	14,807	-75.4%	-168.2%	(489,703)	(645,739)	(563,853)	-24.2%	-13.2%
وق	OP EBIDA Margin %	-0.5%	-2.0%	0.8%	-76.5%	-162.8%	-3.4%	-4.7%	-0.5%	-27.3%	579.8%
¥	Total Margin	0.6%	-0.1%	2.0%	-778.5%	-69.0%	-1.0%	-1.5%	-1.4%	-33.5%	-26.3%
	Days Cash on Hand	132.1	80.0	34.6	65.1%	281.8%					
Key aquadity Ratios											
Key Liquidity Ratios	1										
	AR Days Outstanding	55.1	50	52.5	10.2%	5.0%					



Data Dictionary

	IP Days	Total Inpatient Days Per Midnight Census
	Swing Bed Days	Total Swing Bed Days per Midnight Census
	Total Bed Days	Total Days per Midnight Census
(Juet	Avg Daily Census	Total Bed Days / # of Days in period (Mo or YTD)
Summary	Avg Length of Stay - IP	Total Inpatient Days / # of IP Discharges
ne Su	Avg Length of Stay - SWB	Total Swing Bed Days / # of SWB Discharges
Volume	ED Registrations	Number of ED patient visits
	Clinic Registrations	Number of Clinic patient visits
	Ancillary Registrations	Total number of all other OP patient visits
	Total OP Registrations	Total number of OP patient visits

		Gross IP Rev/IP Day	Avg. gross patient charges per IP patient day
ement		Gross SWB Rev/SWB Day	Avg. gross patient charges per SWB patient day
ater		Gross OP Rev/Total OP Registrations	Avg. gross patient charges per OP visit
ş	tios	Collection Rate	Net patient revenue / total patient charges
do	Rati	Compensation Ratio	Total Labor Expenses / Total Operating Revenues
Pic		OP EBIDA Margin \$	Operating Margin + Depreciation + Amortization
Key.		OP EBIDA Margin %	Operating EBIDA / Total Operating Revenues
		Total Margin (%)	Total Margin / Total Operating Revenues

Days Cash on Hand	Total unrestricted cash / Daily OP Cash requirements
AR Days Outstanding	Gross AR / Avg. Daily Revenues



Summary Statements of Revenues, Expenses, and Changes in Net Position

For The Period Ending January 31, 2022

For the Period Ending January 51, 2022		Curr	ent Month - Jan-2	022		Year To Date - Jan-2022				
	Jan-2022	Jan-2022			Jan-2021	Jan-2022	Jan-2022			Jan-2021
	Actual	Budget	Variance	Var %	Actual	Actual	Budget	Variance	Var %	Actual
Patient Revenue										
Inpatient	1,102,724	1,076,765	25,959	2.4%	1,016,734	6,875,028	7,235,374	(360,346)	(5.0%)	6,373,546
Outpatient	2,291,351	2,068,053	223,298	10.8%	1,898,442	15,116,133	14,282,689	833,443	5.8%	12,741,470
Total Patient Revenue	3,394,074	3,144,817	249,257	7.9%	2,915,176	21,991,161	21,518,063	473,098	2.2%	19,115,016
Deductions From Revenue										
Total Deductions	1,251,791	1,099,186	(152,605)	(13.9%)	940,094	7,615,095	7,758,830	143,735	1.9%	6,602,135
Revenue Deductions %	36.9%	35.0%			32.2%	34.6%	36.1%			34.5%
Net Patient Revenue	2,142,283	2,045,631	96,652	4.7%	1,975,082	14,376,066	13,759,234	616,833	4.5%	12,512,881
Other Operating Revenue	30	4,090	(4,060)	(99.3%)	(2,591)	715	28,633	(27,918)	(97.5%)	11,996
Total Operating Revenue	2,142,313	2,049,722	92,591	4.5%	1,972,491	14,376,781	13,787,867	588,914	4.3%	12,524,877
Operating Expenses										
Total Labor Expenses	1,440,951	1,338,789	(102,162)	(7.6%)	1,248,072	9,874,171	9,191,295	(682,876)	(7.4%)	8,182,850
Total Other Operating Expenses	766,422	821,238	54,816	6.7%	767,450	5,362,429	5,672,886	310,458	5.5%	5,289,831
Total Operating Expenses	2,207,372	2,160,027	(47,346)	(2.2%)	2,015,522	15,236,599	14,864,182	(372,418)	(2.5%)	13,472,682
Operating Income / (Loss)	(65,059)	(110,305)	45,246	(41.0%)	(43,031)	(859,818)	(1,076,315)	216,496	(20.1%)	(947,805)
Net Non-Operating Revenues	86,272	107,408	(22,511)	(21.0%)	101,736	639,741	752,611	(117,808)	(15.7%)	688,283
Change in Net Position	21,213	(2,897)	24,110	(832.2%)	58,705	(220,077)	(323,704)	103,626	(32.0%)	(259,522)
Collection Rate %	63.1%	65.0%	(3.0%)	(3.0%)	67.8%	65.4%	63.9%	2.2%	2.2%	65.5%
Compensation Ratio %	67.3%	65.3%	3.0%	3.0%	63.3%	68.7%	66.7%	3.0%	3.0%	65.3%
OP EBIDA Margin \$	(10,096)	(41,018)	30,922	(75.4%)	14,807	(489,704)	(645,739)	156,035	(24.2%)	(563,853)
OP EBIDA Margin %	(0.5%)	(2.0%)	1.5%	(76.4%)	0.8%	(3.4%)	(4.7%)	1.3%	(27.3%)	(4.5%)
Total Margin (%)	1.0%	(0.1%)	1.1%	(800.5%)	3.0%	(1.5%)	(2.3%)	0.8%	(34.8%)	(2.1%)



Volume and Key Performance Ratios For The Period Ending January 2022

		Actual	Budget	Month Prior Year	Variance to Bud	Variance to Prior Year
	Medicare	57.46%	67.43%	67.43%	-14.8%	-14.8%
Сһагде	Medicaid	22.95%	16.09%	16.09%	42.6%	42.6%
Gross	Commercial	10.41%	9.04%	9.04%	15.2%	15.2%
Payor Mix - Gross Charges	Government	7.62%	5.94%	5.94%	28.3%	28.3%
	Other	0.32%	0.89%	0.89%	-64.0%	-64.0%
	Self Pay	1.24%	0.61%	0.61%	103.3%	103.3%

			Year to Date		
				Variance to	Variance to
L	Actual	Budget	Prior Year	Bud	Prior Year
	60.67%	66.43%	66.43%	-8.7%	-8.7%
	19.22%	17.54%	17.54%	9.6%	9.6%
	11.96%	9.64%	9.64%	24.1%	24.1%
	5.74%	4.63%	4.63%	24.0%	24.0%
	0.39%	0.66%	0.66%	-40.9%	-40.9%
	2.02%	1.10%	1.10%	83.6%	83.6%

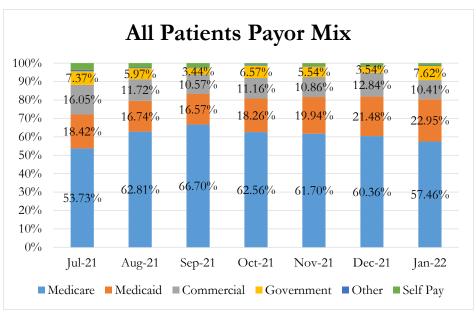
Total	100.00%	100.00%	100.00%

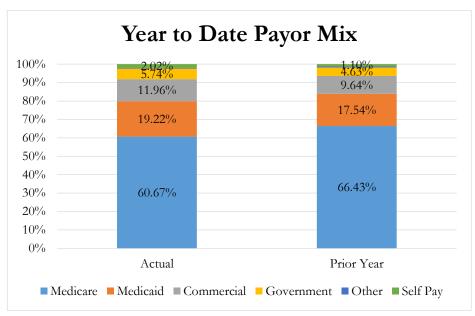
100.00%	100.00%	100.00%

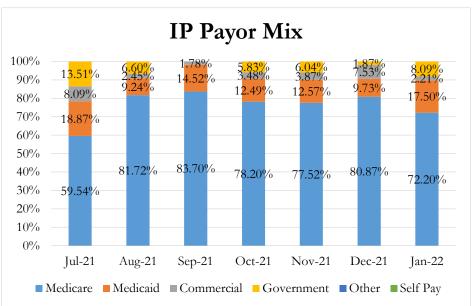
				Month		
		FY 21 - 22	FY 21 - 22	FY 20 - 21	Varia	nce %
						To Prior
		Actual	Budget	Prior Year	To Budget	Year
	In Patient Days	111	84	80	32.0%	38.8%
	Swing Bed Days	127	147	125	-13.6%	1.6%
	Total Patient Days	238	231	205	3.0%	16.1%
Patient Volumes	Emergency Visits	403	304	323	32.4%	24.8%
A	Radiology Procedures	710	682	663	4.1%	7.1%
ter	Laboratory Tests	3,778	3,487	3,592	8.3%	5.2%
Ъ	Respiratory Visits	896	628	966	42.6%	-7.2%
	Surgeries and Endoscopies	24	49	43	-50.9%	-44.2%
	Specialty Clinic Visits	208	230	179	-9.6%	16.2%
	Primary Care Clinic	425	484	203	-12.2%	109.4%

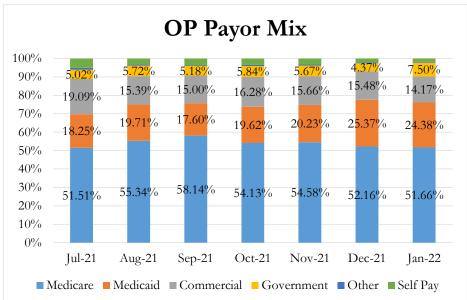
Year To Date							
FY	FY	FY	Variance %				
21 - 22	21 - 22	20 - 21					
				To Prior			
Actual	Budget	Prior Year	To Budget	Year			
731	538	512	35.9%	42.8%			
773	1,019	1,066	-24.1%	-27.5%			
1,504	1,557	1,578	-3.4%	-4.7%			
2,685	2,252	2,390	19.2%	12.3%			
4,800	4,853	4,854	-1.1%	-1.1%			
26,934	24,183	23,930	11.4%	12.6%			
4,077	4,356	4,198	-6.4%	-2.9%			
154	227	200	-32.3%	-23.0%			
1,255	1,594	1,641	-21.3%	-23.5%			
2,982	3,354	1,911	-11.1%	56.0%			



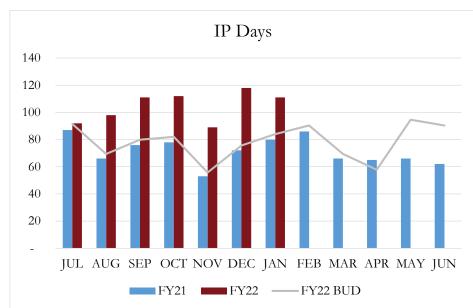


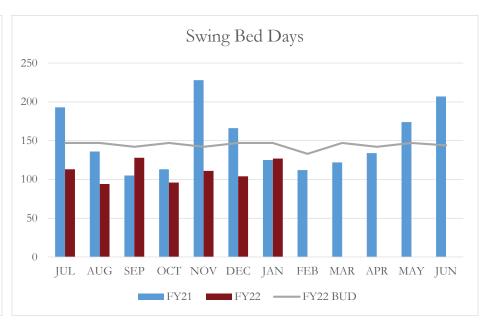


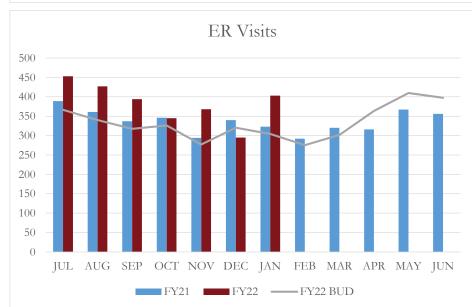


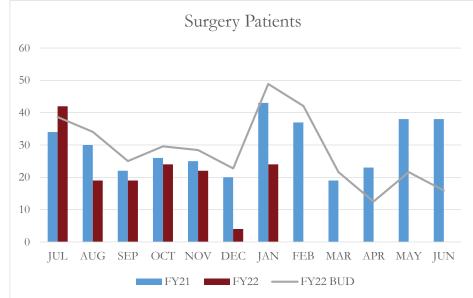




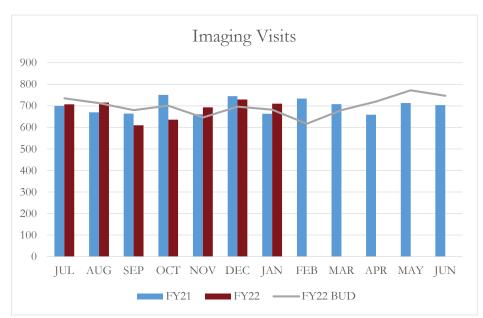


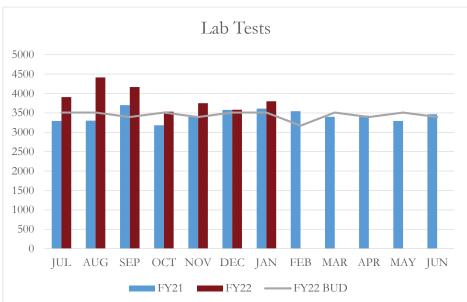


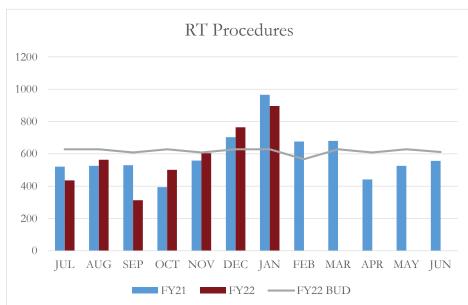


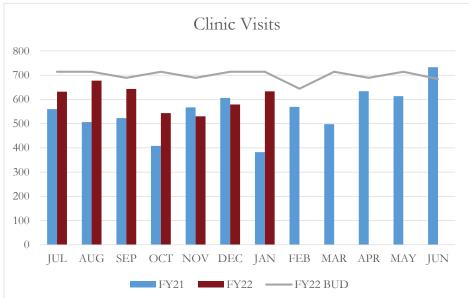














Balance Sheet For The Period Ending January 2022

	Balance as of	Balance as of		Balance as of
	Jan-2022	Jun-2021	Change	Jun-2020
Assets				
Current Assets				
Cash - Operating	6,747,812	7,754,374	1,006,562	(781,040)
Covid-19 Relief Funds	1,201,335	0	(1,201,335)	8,016,556
Medicare Accelerated Payments	5,342,795	7,028,524	1,685,729	7,352,042
Investments - Unrestricted	481,661	452,620	(29,041)	375,577
Investments - Restricted	9,488	9,488	(0)	9,488
Investment - USDA Restricted	233,705	233,705	0	233,705
Investment - Board Designated	1,972,783	1,972,783	(0)	1,972,783
Cash and Cash Equivalents	15,989,579	17,451,494	1,461,915	17,179,111
Patient Accounts Receivable	6,006,920	4,845,025	(1,161,895)	5,758,157
Allowance for Uncollectibles	(3,010,924)	(2,456,334)	554,590	(2,336,539)
Net Patient Accounts Receivable	2,995,997	2,388,691	(607,306)	3,421,618
Other Receivables	1,345,809	940,233	(405,576)	81,441
Inventory	239,672	239,072	(600)	300,563
Prepaid Expense	310,500	402,507	92,007	128,607
Property Tax Receivable	0	0	0	0
Total Current Assets	20,881,557	21,421,997	540,440	21,111,340
Property, Plant and Equipment				
Land	461,527	461,527	(0)	461,527
Property and Equipment:	16,403,975	16,154,324	(249,651)	15,980,096
Less: Accumulated Depreciation	(11,878,984)	(11,651,955)	227,029	(11,010,369)
Construction In Progress	0	31,125	31,125	0
Net PP&E	4,986,519	4,995,021	8,503	5,431,254
Total Assets	25,868,076	26,417,018	548,942	26,542,594



Balance Sheet For The Period Ending January 2022

	Balance as of	Balance as of		Balance as of
	Jan-2022	Jun-2021	Change	Jun-2020
Liabilities and Net Assets				
Current Liabilities				
Accounts Payable	815,981	924,534	108,553	1,072,148
Accrued Payroll and Benefits	1,242,792	1,054,435	(188,357)	938,690
Interest and Other Payable	542,248	310,866	(231,382)	33,306
Current Portion of Long Term Debt	231,964	231,964	(0)	227,789
Medicare Accelerated Fund	5,342,795	6,952,217	1,609,422	7,352,042
Provider Relief Funds	1,201,335	0	(1,201,335)	4,308,836
Oregon Provider Relief Funds	0	0	0	68,963
Covid-19 Relief Funds	0	0	0	3,638,757
Current Liabilities	9,377,114	9,474,016	96,902	17,640,531
Long-Term Debt	4,136,733	4,368,697	231,964	4,596,488
Less Current Portion of Long-Term Debt	(231,964)	(231,964)	0	(227,789)
Total Long-Term Debt, net	3,904,769	4,136,733	231,964	4,368,699
Total Liabilities	13,281,883	13,610,749	328,866	22,009,230
Net Assets:				
Fund Balance	12,806,270	4,533,364	(8,272,906)	6,518,595
Change in Net Position	(220,077)	8,272,906	8,492,983	(1,985,231)
Total Net Assets	12,586,193	12,806,270	220,077	4,533,364
Total Liabilities & Net Assets	25,868,076	26,417,019	548,943	26,542,594



Summary Statements of Revenues, Expenses, and Changes in Net Position

For The Period Ending January 31, 2022

For the Period Ending January 31, 2022		C	ent Month - Jan-20	722		Year To Date - Jan-2022				
	Jan-2022	Jan-2022	ent Month - Jan-2	322	Jan-2021	Jan-2022	Jan-2022	ir To Date - Jan-202	.2	Jan-2021
	Actual	Budget	Variance	Var %	Actual	Actual	Budget	Variance	Var%	Actual
Patient Revenue				0.4					/E 0	
Inpatient	1,102,724	1,076,765	25,959	2.4%	1,016,734	6,875,028	7,235,374	(360,346)	(5.0%)	6,373,546
Outpatient	2,291,351	2,068,053	223,298	10.8%	1,898,442	15,116,133	14,282,689	833,443	5.8%	12,741,470
Total Patient Revenue	3,394,074	3,144,817	249,257	7.9%	2,915,176	21,991,161	21,518,063	473,098	2.2%	19,115,016
Deductions From Revenue										
Total Deductions	1,251,791	1,099,186	(152,605)	(13.9%)	940,094	7,615,095	7,758,830	143,735	1.9%	6,602,135
Revenue Deductions %	36.9%	35.0%			32.2%	34.6%	36. t%			34.5%
Net Patient Revenue	2,142,283	2,045,631	96,652	4.7%	1,975,082	14,376,066	13,759,234	616,833	4.5%	12,512,881
Other Operating Revenue	30	4,090	(4,060)	(99.3%)	(2,591)	715	28,633	(27,918)	(97.5%)	11,996
Total Operating Revenue	2,142,313	2,049,722	92,591	4.5%	1,972,491	14,376,781	13,787,867	588,914	4.3%	12,524,877
O										
Operating Expenses Salaries & Wages	1,000,000	1.000 150	2F 790	2.5%	942 500	C 701 40E	e e70 F27	99.053	1.3%	e 007 000
Contract Labor	1,000,369	1,026,159	25,790	(465.8%)	942,560	6,781,485	6,870,537	89,052	(207.9%)	6,007,822
Benefits	171,832	30,367	(141,465)		28,267	1,378,700	447,812	(930,888)		449,122
Total Labor Expenses	268,750	282,263	13,513	(7.6%)	277,245	1,713,986	1,872,946	158,960	8.5% (7.4%)	1,725,907
Professional Fees	1,440,951 218,125	1,338,789 214,109	(102,162)	(1.9%)	1,248,072 203,002	9,874,171 1,489,955	9,191,295	(682,876) 8,588	0.6%	8,182,850
Purchased Services	218,125		(4,016) 9,586	3.9%	203,002	1,463,333	1,498,543 1,735,167	0,500 142,506	8.2%	1,488,172 1,671,058
Drugs & Pharmaceuticals		247,881 48,952		(14.1%)	213,326 38,649	397,851	339,505		(17.2%)	318,110
Medical Supplies	55,874		(6,922)	37.8%	30,643 19,686			(58,346)	22.7%	
Other Supplies	12,562 84,606	20,207	7,646	(0.5%)	82,556	95,444 595,793	123,454 589,374	28,010	(1.1%)	113,684 529,476
Lease and Rental		84,196 35.751	(409)	(15.3%)				(6,419)	(6.3%)	
	29,685	25,751	(3,934)		27,864	191,431	180,143	(11,289)		168,513
Maintenance & Repairs	6,952	24,410	17,459	71.5%	31,128	109,166	170,871	61,705	36.1%	173,240
Other Expenses Utilities	35,857	54,332	18,475	34.0% 43.3%	54,122	250,726	380,469	129,743	34.1% (3.7%)	221,399
Insurance	11,350	20,009	8,659	(50.0%)	26,135 12,542	145,229	140,064	(5,165)	(46.4%)	144,884
Depreciation & Amortization	18,154	12,103 69,287	(6,051)	20.7%	-	124,057 370,115	84,720	(39,338)	14.0%	77,345
Total Operating Expenses	54,963 2,207,372	2,160,027	14,324 (47,346)	(2.2%)	57,838 2,015,522	15,236,599	430,576 14,864,182	60,461 (372,418)	(2.5%)	383,952 13,472,682
Operating Income I (Loss)	(65,059)	(110,305)	45,246	(41.0%)	(43,031)	(859,818)	(1,076,315)	216,496	(20.1%)	(947,805)
Non-Operating				40.0					(0.00.1)	
Property Taxes	85,155	86,497	(1,342)	(1.6%)	83,924	592,391	605,478	(13,088)	(2.2%)	587,466
Non-Operating Revenue	12,342	30,344	(18,002)	(59.3%)	27,443	135,175	212,409	(77,234)	(36.4%)	162,963
Interest Expense	(15,135)	(16,511)	1,375	(8.3%)	(15,828)	(109,881)	(114,818)	4,938	(4.3%)	(115,233)
Investment Income	3,910	7,078	(3,168)	(44.8%)	6,198	30,056	49,543	(19,487)	(39.3%)	53,112
Gain(Loss) on Sale of Assets		- 407 400	-	0.0%	404 700	(8,000)	- -	(8,000)	0.0%	
Total Non-Operating	86,272	107,408	(21,136)	(19.7%)	101,736	639,741	752,611	(112,870)	(15.0%)	688,307
Change in Net Position	21,213	(2,897)	24,110	(832.2%)	58,705	(220,077)	(323,704)	103,626	(32.0%)	(259,498)



Income Statement For The Period Ending January 2022 Comparison to Prior Months

	Aug-2021	Sep-2021	Oct-2021	Nov-2021	Dec-2021	Jan-2022
Patient Revenue						
Inpatient	985.833	1,048,102	926.822	887,913	1,038,237	1,102,724
Outpatient	2,310,828	2,074,562	1,931,052	2,029,023	2,151,667	2,291,351
Total Patient Revenue	3,296,661	3,122,665	2,857,874	2,916,936	3,189,905	3,394,074
Deductions From Revenue						
Charity Services	3,555	8.495	7,799	12,278	5,999	8,192
Contractual Allowances	1,151,916	929,345	759,761	913,152	1,177,785	1,125,496
Other Discounts	79,831	112,511	80,194	67,248	84,537	95,317
Bad Debt	32,210	(33,357)	(115,066)	(17,221)	(7,928)	22,786
Total Deductions	1,267,512	1,016,994	732,688	975,457	1,260,393	1,251,791
Net Patient Revenue	2.029.149	2,105,671	2.125.186	1.941.479	1.929.512	2,142,283
Other Operating Revenue	35	10	75	(406)	223	30
Total Operating Revenue	2.029.184	2.105.681	2.125.261	1.941.073	1.929.735	2.142.313
	2,023,104	2,103,001	2,123,201	1,541,075	1,323,133	2,142,313
Operating Expenses	007.020	1 025 150	070 000	1 001 001	057.703	1 000 300
Salaries & Wages	897,028	1,025,159	970,890	1,001,981	967,783	1,000,369
Benefits Contract Labor	248,929	281,139	112,902	281,283	270,780	268,750
Professional Fees	221,928	219,346	181,849	147,348	175,524	171,832
Purchased Services	182,244	200,272 227,573	195,049 269,603	242,511 203,933	214,229 239,380	218,125
	201,863	•				238,295
Medical Supplies	12,908	13,327	13,298	15,069	15,802	12,562
Drugs & Pharmaceuticals	56,164	68,418	76,661	25,740	51,741	55,874
Other Supplies	93,354	93,759	83,004	71,303	93,883	84,606
Depreciation & Amortization	51,275	51,275	53,432	51,527	54,980	54,963
Lease and Rental	43,308	24,529	25,914	23,244	31,298	29,685
Maintenance & Repairs	22,649	15,183	(13,238)	17,117	23,441	6,952
Utilities Insurance	17,122	24,264	27,075	22,493	25,304	11,350
	17,655	17,655	16,672	17,655	17,626	18,154
Other Expenses Total Operating Expenses	19,007 2,085,434	34,324 2,296,223	41,172 2,054,283	33,020 2,154,227	43,887 2,225,658	35,857 2,207,372
Excess of Revenue Over Expenses fr		(190,543)	70.978	(213,154)	(295,923)	(65,059)
	(30,231)	(130,343)	10,510	(213,134)	(233,323)	(03,033)
Non-Operating Unrestricted Contributions	83,924	83,924	85,155	85,155	85,155	85,155
		•				•
Other NonOperating Revenue\Expe	•	17,599	11,763	15,546	12,803	12,342
Investment Income	4,632	4,464	4,090	4,145	3,851	3,910
Gain(Loss) on Sale of Assets	0	0		(8,000)	0	0
Total Non-Operating	108,045	105,987	101,008	96,845	101,810	101,407
Interest Expense	(15,499)	(15,499)	(15,317)	(17,795)	(15,135)	(15,135)
Excess of Revenue Over Expenses	36,296	(100,055)	156,668	(134,105)	(209,249)	21,213





Calculation: Total Unrestricted Cash on Hand

Daily Operating Cash Needs

Definition: This ratio quantifies the amount of cash on hand in terms

of how many "days" an organization can survive with

existing cash reserves.

Desired Position: Upward trend, above the median

Average Year 2022 102.0 2021 41.2 54.0 2020 2019 64.7 2018 70.7 2017 96.1 2016 83.6 2015 67.3

Benchmark

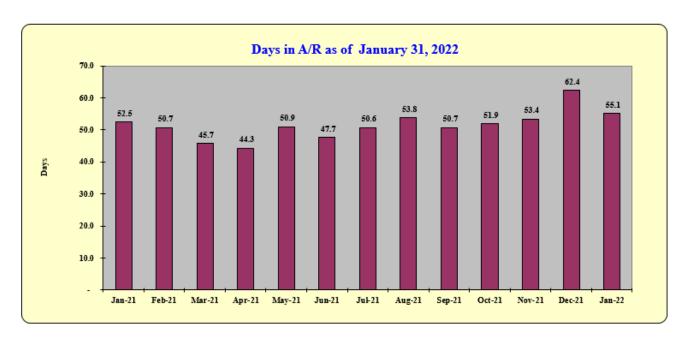
How ratio is used:

80 Days

This ratio is frequently used by bankers, bondholders and analysts to gauge an organization's liquidity--and ability to meet short term obligations as they mature.

Fiscal 1	<u>Jul</u>	Aug	<u>Sep</u>	Oct	Nov	Dec	<u>Jan</u>	<u>Feb</u>	<u>Mar</u>	<u>Apr</u>	May	<u>Jun</u>
2022	67.2	66.2	56.6	128.6	136.1	127.4	132.1					
2021	38.7	54.6	39.1	48.2	61.6	34.4	34.6	33.0	37.2	19.9	21.9	70.8
2020	54.3	53.4	54.2	53.3	50.3	58.3	62.6	64.9	63.8	56.4	44.0	32.0
2019	63.0	63.5	59.0	59.6	67.6	67.6	69.3	67.8	71.2	62.8	69.0	55.7
2018	93.3	88.3	82.1	68.2	79.4	69.4	64.5	63.4	59.8	60.1	63.0	57.5





50

Calculation: Gross Accounts Receivable

Average Daily Revenue

Definition: Considered a key "liquidity ratio" that calculates how quickly

accounts are being paid.

Desired Position: Downward trend below the median, and below average.

Benchmark

How ratio is used: Used to determine timing required to collect accounts. Usually, organizations below the average Days in AR are likely to have

higher levels of Days Cash on Hand.

	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22
A/R (Gross)	4,827,674	4,916,092	4,391,535	4,152,150	4,617,946	4,459,196	5,014,861	5,592,484	5,312,319	5,237,705	5,217,942	6,078,310	5,690,377
Days in AR	52.5	50.7	45.7	44.3	50.9	47.7	50.6	53.8	50.7	51.9	53.4	62.4	55.1
***	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22
A/R (Gross)	4,827,674	4,916,092	4,391,535	4,152,150	4,617,946	4,459,196	5,014,861	5,592,484	5,312,319	5,237,705	5,217,942	6,078,310	5,690,377
Days in Month	31	28	31	30	31	30	31	31	30	31	30	31	31
Monthly Revenue	2,915,176	2,842,408	2,883,748	2,610,510	2,849,482	3,049,042	3,213,046	3,296,661	3,122,665	2,857,874	2,916,936	3,189,905	3,394,074
3 Mo Avg Daily Revenue	92,024	96,877	96,015	93,670	90,693	93,506	99,039	103,899	104,700	100,839	97,774	97,443	103,271
Days in AR	52.5	50.7	45.7	44.3	50.9	47.7	50.6	53.8	50.7	51.9	53.4	62.4	55.1



SOUTHERN COOS HOSPITAL & HEALTH CENTER CAPTIAL PURCHASES SUMMARY

FY2021	VENDOR	DESCRIPTION	COST	DATE	GRANT FUNDING SOURCE
	Non-Threshold Capital Purchases (<\$25,000)			
	CDW Government	Computer ThinkCenters & Monitors (Covid)	16,247	9/29/2020	CARES Grant Funded
	Steris Corporation	Endo Cabinet, Seismic Anchor-	7,656	10/1/2020	
	CDW Government	Ergotron Sit-Stand Vertical Lift	5,549	11/1/2020	
	CDW Government	Computer ThinkCenters & Monitors (Covid)	11,488	11/30/2020	CARES Grant Funded
	Helmer Scientific	Blood Bank Refrigerator	12,470	12/1/2020	
	Para Healthcare Financial	Price Transparency Tool	15,000	12/31/2020	
	Emergency Genrator Repairs	Repairs to Hospital Generator	17,522	12/31/2020	CARES Grant Funded
	Zoho Corporation	OpManager Plus	7,595	2/28/2021	
	Medline	COVID Vaccination Freezers	15,226	4/21/2021	CARES Grant Funded
	Fukuda Denshi	Ds-8100 Patient Monitor	16,373	5/1/2021	
	Threshold Projects (>\$25,000)				
	Stryker Instruments	Two Neptune Surgical Waste Management Systems	29,645	1/1/2021	
	Walk-In Refrigeration	Refrigerator & Electric Hook Up	39,265	3/1/2021	
	Oxygen Tanks	Bulk storage tanks	92,766	6/30/2021	CARES Grant Funded
	Total		286,800		
	Total Grant Funded Equipment		153,248		
	Capital Purchases Under Budge	et Authority	133,552		
	FY2021 Budget Authority		250,000		
	Remaining Budget		116,448		

			Δ	pproved Budget		
FY2022	VENDOR	DESCRIPTION	COST	Amount	DATE	GRANT FUNDING SOURCE
	Non-Threshold Capital Purchases	; (<\$25,000)				
	Threshold Projects (>\$25,000)					
	C&R Homes & Construction	New Roof	76,800	150,000	9/30/2023	l
	Stryker	New Patient Beds	81,185	120,000	11/30/2023	l
	Cepheid	PCR Testing Machine - Lab	61,731	-	1/31/2022	2 SHIP ARPA
	Total		219,716			
	Total Grant Funded Equipmer	nt	61,731			
	rotar drane ranaca zgarpiner		01,701			
	Capital Purchases Under Budg	get Authority	157,985			
	FY2021 Budget Authority		1,000,000			
	Remaining Budget		842,015			



Budget Income Summary

For The Budget Year 2022																Current Bu	ıdget YTD
All Providers	ACT	BUD	ACT	FY22													
	JUL	JUL	AUG	AUG	SEP	SEP	OCT	OCT	NOV	NOV	DEC	DEC	JAN	JAN	YTD	Budget	Variance
Provider Productivity Metrics																	
Clinic Days	67	73	68	72	60	73	57	74	48	69	52	72	58	68	409	501	(93)
Total Visits	431	484	488	484	476	467	410	484	373	467	379	484	425	484	2,982	3,354	(372)
Visits/Day	6.4	6.6	7.2	6.7	8.0	6.4	7.3	6.5	7.8	6.8	7.4	6.7	7.3	7.1	7.3	6.7	0.6
Total RVU	922.84	882.40	1,031.24	882.40	1,045.36	855.80	845.91	882.40	833.02	855.80	902.56	882.40	985.24	882.40	6,566.17	6,123.60	442.57
RVU/Visit	2.14	1.82	2.11	1.82	2.20	1.83	2.06	1.82	2.23	1.83	2.38	1.82	2.32	1.82	2.20	1.83	0.38
RVU/Clinic Day	13.77	12.09	15.17	12.26	17.57	11.72	14.97	11.92	17.35	12.40	17.53	12.26	16.99	12.98	16.07	12.22	3.85
Gross Revenue/Visit	331.74	353.24	282.73	353.24	345.56	353.26	351.14	353.24	334.94	353.26	348.44	353.24	370.78	353.24	336.68	353.24	(16.57)
Gross Revenue/RVU	154.93	193.75	133.79	193.75	157.35	192.77	170.19	193.75	149.98	192.77	146.32	193.75	159.94	193.75	152.90	193.48	(40.58)
Patient Revenue																	
Outpatient																	
Total Patient Revenue	142,978	170,968	137,973	170,968	164,485	164,972	143,968	170,968	124,932	164,972	132,060	170,968	157,580	170,968	1,003,977	1,184,784	(180,807)
Deductions From Revenue																	
Total Deductions From Revenue (Note A)	79,311	94,398	75,702	94,398	90,716	91,093	79,770	94,398	68,865	91,093	72,522	94,398	87,494	94,398	554,381	654,175	(99,794)
Net Patient Revenue	63,667	76,570	62,271	76,570	73,769	73,879	64,198	76,570	56,068	73,879	59,537	76,570	70,086	76,570	449,596	530,609	(81,013)
Total Operating Revenue	63,667	76,570	62,271	76,570	73,769	73,879	64,198	76,570	56,068	73,879	59,537	76,570	70,086	76,570	449,596	530,609	(81,013)
Operating Expenses																	
Salaries & Wages	65,195	64,890	65,893	64,890	61,655	63,389	65,341	65,133	48,479	63,353	55,262	65,856	52,159	65,856	413,983	453,012	(39,029)
Benefits	8,805	14,973	8,782	14,914	8,606	14,524	6,989	14,933	7,112	13,804	5,668	13,557	11,197	15,740	57,159	103,050	(45,891)
Puxchased Services	7,421	5,465	7,226	5,465	4,561	5,465	8,735	5,465	4,244	5,465	5,680	5,465	8,963	5,465	46,832	38,254	8,578
Medical Supplies	0	507	0	507	0	491	0	507	0	490	0	507	0	506	0	3,515	(3,515)
Other Supplies	0	455	0	455	0	455	0	455	0	455	188	455	0	455	188	3,185	(2,997)
Maintenance and Repairs	0	316	0	316	0	316	0	316	0	316	0	316	0	316	0	2,209	(2,209)
Other Expenses	1,517	1,251	1,517	1,251	2,405	1,251	3,684	1,251	(650)	1,251	3,319	1,251	4,201	1,251	15,993	8,760	7,234
Allocation Expense	18,223	31,488	18,782	31,488	33,375	30,682	31,695	31,488	32,144	30,682	35,627	31,488	29,289	31,543	199,135	218,866	(19,731)
Total Operating Expenses	101,161	119,346	102,200	119,286	110,602	116,573	116,444	119,549	91,329	115,816	105,744	118,896	105,809	121,132	733,290	830,851	(97,561)
Excess of Operating Revenue Over Expenses	(37,494)	(42,776)	(39,929)	(42,716)	(36,832)	(42,694)	(52,246)	(42,978)	(35,262)	(41,937)	(46,207)	(42,325)	(35,723)	(44,562)	(283,694)	(300,242)	16,548
																,	
Total Non-Operating Income	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Excess of Revenue Over Expenses	(37,494)	(42,776)	(39,929)	(42,716)	(36,832)	(42,694)	(52,246)	(42,978)	(35,262)	(41,937)	(46,207)	(42,325)	(35,723)	(44,562)	(283,694)	(300,242)	16,548

Note A - Average Collection Rate =43% of Gross Charges, therefore the Deduction Rate is 57% of Gross Charges





QUALITY REPORT

To: Southern Coos Health District Board of Directors and Southern Coos Management

From: Barbara Snyder, RN, Quality & Risk Manager

Re: Quality Report for SCHD Board of Directors, February 2022

Data Reporting

Patient Satisfaction Questionnaires:

62 HCAHPS questionnaires sent out for Med Surg 4Q 2021 with only 13 returned (21%) but still trying to get results for that quarter. G. Meidinger arranged for departments to meet and discuss tablet survey strategies resulting in tablet surveys now being offered to patients in ED at a higher rate with positive feedback. Swing bed has added the tablets as part of their discharge planning. Mammography has received a tablet and it has been in use for a week. Workflows of Clinic and Lab are being looked at to discover ways to incorporate tablets. More surveys/respondents will provide legitimate data for use for this committee.

Learning from Complaints and Grievances

<u>Clinical documentation</u> continues to be an area that is very important. Sometimes documentation is good; other times it is lacking. Med Surg is actively improving documentation; ED has recognized goals for documentation. This is an ongoing process due to rotation of staff so tools will need to be in place. Med Surg auditing currently done by documentation RN but Staff and Charge RNs will audit going forward. Results will be reported to the Quality Committee.

<u>Patient Arm Bands</u> has been identified as a possible issue. Patients should always have arm bands and there was a discussion of if this facility had a policy regarding this topic. Meeting to be scheduled for all departments involved with patient arm bands (M/S, ED, Registration, Imaging, Lab, Resp. Therapy, Surgery, with CNO)

Antimicrobial Stewardship (AS) Status Update. Currently collecting data with last year's process. Stephanie Lyon will be more of a lead on this project and working with D. Ebenal on what to present to Medical Staff and to help with compliance of program and streamlining the data entry process.

<u>Patient Rights</u> policy is done; brochure content is completed and sent to SCHHC Marketing. Training in Relias for disability rights and patient rights will be put together for all SCH employees. A disability flyer (from the state) has been added to admissions information given to patients and families.



<u>Creating a Safety Culture</u>. A safety culture questionnaire was sent to SCHHC Marketing to set up. The survey is regarding people's comfort in answering how safe they feel reporting issues at the facility. We are ready to send this out and will be sending this out to all employees at the beginning of April.



CONSIDERATION OF NEW MRI TRAILER

To: Board of Directors and Southern Coos Management

From: SCHHC Leadership

Re: MRI Trailer SBAR – February 2022

Situation

Currently, SCHHC contracts with Alliance Imaging to provide onsite MRI services to our community. The contract SCHHC entered into in 2018 with Alliance Imaging is up for renewal. Deb Backman, Medical Imaging Manager, and an internal SCHHC team have done extensive research on available options for our facility in order to continue providing onsite MRI services.

Central to the SCHHC team's analysis of the available options is alignment with the district's strategic pillars of People, Service, Quality, Growth, and Finance. An analysis of the alignment of our recommendation with SCHHC's strategic pillars begins on the next page.

Background

The current MRI scanner was manufactured in 1999 and had a software upgrade done in 2007. The hospital is currently paying \$16,345 monthly (\$196,140 annually) to provide this service to patients. The current trailer has several barriers that negatively impact the patient experience nor allow us to plan for future growth. For example, the trailer is not well-insulated, the entrance to the unit does not allow for in-patients confined to beds, and throws a high level of external noise. Additionally, the control room is cramped and difficult to accommodate staff and the bore width is small for industry standards.

Analysis

For FY21, we provided the public with 273 MRI scans or 23 procedures per month resulting in \$943,000 gross charges. MRI had an average collection rate of 68.4% for FY21, resulting in an estimated \$644,000 net revenue. After considering all expenses in the department, the net margin for FY21 was 36%. In order to maintain a net margin of 36%, the facility must be able to provide an additional 6 procedures a month compared to last year with an average gross charge of \$3,430 per procedure.

Recommendation

Based off of an analysis of current and future MRI volumes and financial comparison completed by SCHHC Medical Imaging, Multi-Specialty Clinic, and Finance staff, SCHHC leadership recommends moving forward with a proposed five-year contract from **MRI Mobile** in the total amount of \$1,302,000 or \$260,400 annually. This will be an increase of \$5,355 per month, but the facility projects to cover the added expenses by providing a minimum of 29 MRI procedures a



month without impacting net margin. For FY22, we have provided an average of 33 MRI procedures per month.

Recommendation Detail: MRI Mobile

SCHHC recommends contracting with MRI Mobile for the following reasons, aligned with the district's strategic plan pillars.

People: Improve SCHHC staff workflow

 Improved workflow through more comfortable control room and up-to-date software



Service: Provide improved experience for our patients

- Reduced acoustic noise during patient procedures
- · Wider bore (see picture) that accomodates patients with wider shoulders



59.7 cm bore



Quality: Enhance quality of care and improve patient safety

- Larger lift door (see picture below), allowing SCHHC to scan inpatients with limited mobility in beds and wheelchairs, thereby increasing number of potential MRIs
- Up-to-date technology and EMR integration



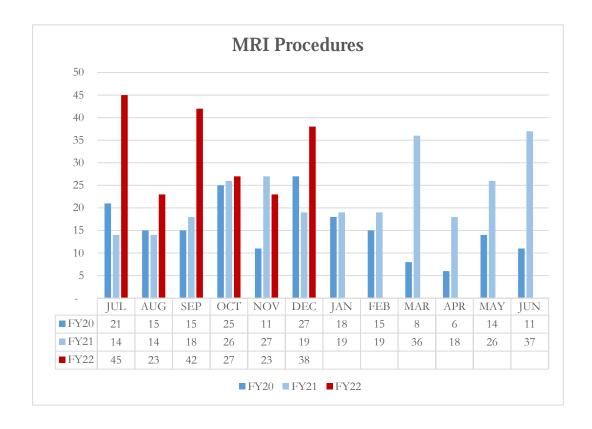
Growth: Increase market share through enhancement of services

- Immediate availability of trailer
- Potential for adding services such as breast imaging Breast coil included at no cost
 - o MRI Mobile adding a breast imaging softward upgrade at no cost a \$30,000 value
- MRI procedures largely consist of outpatients* due to small lift door size—by increasing lift door size, SCHHC will be able to accommodate inpatients who may be in their beds (a typical bed measures 85" wide)
 - o *In FY21, SCHHC MRIs consisted of, by number of patients, 4.15% inpatients and 95.85% outpatients
- Growth potential in neurovascular studies: e.g. the new unit will allow SCHHC medical imaging to perform a triple study MRA Head/MRI Brain w/without and Carotid, a study performed after a variety of head injuries, including aneurysms, and detecting atherosclerotic (plaque) disease in the carotid artery of the neck, which may limit blood flow to the brain and result in a stroke.



Finance: Increase net revenue/margin

- The minimum patient volume needed to maintain historical margin is 29 patients per month or 343 annually
- Projected FY22 volumes exceeds FY21 MRI net margin by 7%





Vendor Comparison

Recommendation: MRI Mobile

					1							
				SCHHC Recommended Option								
	Shared Imaging	Shared Imaging w/ Breast Imaging Software	MRI Mobile	MRI Mobile w/ Breast Imaging Software	Allianœ Imaging	Allianœ Imaging w/ Breast Imaging Software						
MRI Unit Configuration												
Bore Size	60 cm	60 cm	60 cm	60 cm	60 cm	60 cm						
Actual Size	58 cm	58 cm	59.7 cm	59.7 cm	57 cm	57 cm						
Door Lift Opening	88.5"	88.5"	89"	89"	76.5"	76.5"						
Software	16	16	16	16	16	16						
Type	1.5 T GE Signa HDxt	1.5 T GE Signa HDxt	1.5 T GE Signa HDxt	1.5 T GE Signa HDxt	1.5 T GE Signa HDxt	1.5 T GE Signa HDxt						
Estimated Availability	Apr-22	4/1/2022	44501	Nov-21	44682	44682						
Set Up Fees	\$4,000.00	\$4,000.00	\$4,000.00	\$4,000.00	4000	4000						
Notes	No Wrist Coil	No Wrist Coil	None	Breast Coil Included	None	Breast Coil Induded Free						
				Free								
		36 M	onth Contra	ct								
36 Month Contract Total	819,000	919,800	837,000	\$ 837,000.00	846,000	846,000						
36 Monthly Rate	22,750	25,550	23,250	\$ 23,250.00	23,500	23,500						
Increase from Current Per Month	6,405	9,205	6,905	\$ 6,905.00	7,155	7,155						
Annual Increase from Current	76,860	110,460	82,860	\$ 82,860.00	85,860	85,860						
	,		onth Contra		,	·						
60 Month Contract Total	1,197,000	1,341,000	1,302,000	\$ 1,302,000.00	1,338,000	1,338,000						
60 Monthly Rate	19,950	22,350	21,700	\$ 21,700.00	22,300	22,300						
Increase from Current Per Month	3,605	6,005	5,355	\$ 5,355.00	5,955	5,955						
Annual Increase from Current	43,260	72,060	64,260	\$ 64,260.00	71,460	71,460						



Income Statement Summary

MRI

MRI	F3.504	EXCO	Minimum	**********	********
	FY21 Actual	FY22 Projected	Requirement	Variance Projected	Variance
	3 50 50003	110/0000	mequation	a to jected	
Patient Volumes	273	396	343	123	45.05%
Average PT Volume/Month	23	33	29	10	45.05%
Patient Revenue					
Inpatient	83,776	54,656	76,595	(29,120)	-34.76%
Outpatient	858,725	1,262,766	1,098,405	404,041	47.05%
Other Patient Revenue					
Total Patient Revenue	942,501	1,317,422	1,175,000	374,921	39.78%
Total Deductions	298,042	416,305	371,300	118,264	39.68%
	31.6%	31.6%	31.6%		
Net Patient Revenue	644,459	901,117	803,700	256,657	39.83%
Other Operating Revenue	-	:-:			
Total Operating Revenue	644,459	901,117	803,700	256,657	39.83%
Operating Expenses					
Salaries & Wages	96,594	98,538	98,538	1,944	2.01%
Benefits	23,067	23,380	23,380	313	1.36%
Professional Fees	62,096	86,902	86,902	24,806	39.95%
Purchased Services	192,858	257,118	257,118	64,260	33.32%
Medical Supplies	188	188	188		0.00%
Other Supplies	56	56	56		0.00%
Maintenance & Repairs	143	143	143	2	0.00%
Total Operating Expenses	375,002	466,325	466,325	91,323	24.35%
Excess of Revenue Over Expenses from Operations	269,457	434,791	337,375	165,334	61.36%
Overhead Expenses	40,000	50,000	50,000	10,000	25.00%
Ni Net Income (Loss)	229,457	384,791	287,375	155,334	67.70%
N1 Total Margin %	35.6%	42.7%	35.8%	7.1%	19.9%
Administrative Overhead	52,445	55,067	55,067	2,622	5.00%
N2 Net Income (Loss)	177,012	329,724	232,308	152,712	86.27%
N2 Total Margin %	27.5%	36.6%	28.9%	9.1%	33.2%