



**Board of Directors
Regular Meeting & Executive Session
August 28, 2025 6:00 p.m.**

AGENDA

- I. Regular Meeting Open Session Call to Order 6:00 p.m.**
1. Agenda - Corrections or Additions.....(action)
- II. Consent Agenda**
1. Meeting Minutes
- a. Regular Meeting-07-24-253
- b. Special Meeting-07-31-2510
- c. Special Meeting-08-21-2512
2. Board Counsel Invoice – Robert S. Miller III Attorney – #1100.....13
4. **Motion to Approve Consent Agenda**.....(action)
- III. New Business**
1. Resolution 2025-02 Bank Signature Authority.....14
2. Business Office Conversion & Remodel Recommendation.....(under separate cover)
- IV. Old Business**
- None.
- V. Staff Reports-Discussion**
1. CEO Report.....15
2. CMO Report.....19
3. CNO Report21
4. CFO Report(under separate cover)
5. CIO Report24
6. Multi-Specialty Clinic Report26
7. HR Report(under separate cover)
8. SCHD Foundation Report27
9. Strategic Plan Update.....(under separate cover)
- VI. Monthly Financial Statements: Review & Discussion**
1. Month End Summary & Month End Statements for Period Ending July 31, 202528

VII. Open Discussion

VIII. Executive Session

Executive Session Under 192.660(2)(c) to consider matters pertaining to the function of the medical staff of a public hospital licensed pursuant to ORS 441.015 Licensing of facilities and health maintenance organizations, and under ORS 192.660(2)(f) to consider information or records that are exempt by law from public inspection. No decision will be made in Executive Session.

IX. Return to Open Session

Action from Executive Session

1. Motion to Approve Executive Session Minutes-07/24/25.....(action)
2. Motion to Approve Reports from Executive Session:.....(action)
 - a. Quality & Patient Safety, Risk & Compliance
 - b. Medical Staff Report

X. Adjournment

**Southern Coos Health District
Board of Directors Meeting
Open Session Minutes
July 24, 2025**

I. Open Session Call to Order at 6:00 p.m.

Roll Call – Quorum established; Thomas Bedell, Chairman; Mary Schamehorn, Secretary; Pamela Hansen, Treasurer/Foundation Liaison, Kay Hardin, Quality Liaison, and Robert Pickel, Directors. **Administration:** Raymond Hino, CEO; Antone Eek, CFO; Alden Forrester, CMO; Scott McEachern, CIO; David Serle, Clinic Director; Philip J. Keizer, MD, Chief of Staff. **Absent:** Cori Valet, CNO; Alix McGinley, SCH Foundation Executive Director. **Others present:** Robert S. Miller, Counsel; Kim Russell, Executive Assistant. **Via Remote Link:** Stacy Nelson, HR Director; Amanda Bemetz, Quality/Risk/Compliance Director. **Press:** None.

1. Agenda - Corrections or Additions

#9 Strategic Plan added to Staff Reports.

Bob Pickel **moved** to agenda as amended. Mary Schamehorn **seconded** the motion. All in favor. Motion passed.

2. Public Input – None. Mr. Bedell reminded viewers of recorded meeting that a link to the live meeting is available by request.

II. Consent Agenda

1. Open Session Meeting Minutes (Executive Session Minutes are Reviewed in Executive Session):

- a. Regular Meeting–06/25/25**
- b. Board Legal Counsel Invoice #1081**

Mary Schamehorn **moved** to approve the Consent Agenda. Pam Hansen **seconded** the motion. **All in favor. Motion passed.**

III. New Business

1. Annual Election of Officers

Mary Schamehorn **nominated** Thomas Bedell as Chairman. Pam Hansen **seconded**. **All in favor.**

Tom Bedell **nominated** Mary Schamehorn to continue as Secretary and Pam Hansen continue as Treasurer. Pam Hansen **seconded**. **All in favor.**

2. FY 2026 Public Meeting Calendar

Members acknowledged the proposed calendar for the current fiscal year, a continuation of the current schedule for the regular meeting of the Southern Coos

Health District Board of Directors will be held every 4th Thursday at 6:00pm, adjusted to the third Thursday in the months of November and December due to holidays.

IV. Old Business

None.

V. Staff Reports

1. CEO Report

Ray Hino, CEO, opened with a recruitment update, noting recent addition of a new consulting Registered Dietician to replace the service previously provided by Bay Area Hospital, thanks to the assistance of the new Bay Area Hospital Board Chairman. The new consulting Dietician is currently full-time with Lower Umpqua Hospital but will provide Southern Coos with a site visit one day per month and be available for telephone consultations. Mr. Hino provided a summary regarding passage of the Federal Budget Reconciliation Act, HR1, that has prompted several calls from the Hospital Association of Oregon and Oregon Office of Rural Health to Oregon legislators. The bill will have no effect on the FY26 budget. Reductions in the Oregon Provider Tax Program, used to increase matching funds from the federal government will begin in FY28, gradually, with a .5% reduction and then additional .5% reductions each year until 2032. Medicaid cuts affecting eligibility for recipients are anticipated, with most provisions in effect by the end of FY 2026, likely to increase uninsured patient visits through the ER. The goal of the bill is to reduce the federal government's share of Medicaid. In anticipation of these provisions, the Hospital Association of Oregon (HAO) is currently working at rolling back burdensome regulations such as those relating to community engagement (charity) and staffing requirements. On a positive note, the Rural Health Transformation Fund bill appropriates \$10 billion each year, over 5 years beginning in FY26, to provide assistance for rural health facilities.

2. CMO Report

- a. Medical Staff Bylaws – Revised July 2025**
- b. Medical Staff Rules & Regulations – Revised July 2025**

Dr. Forrester, Chief Medical Officer, presented his monthly report this month including the recently revised/updated Medical Staff Bylaws and Medical Staff Rules and Regulations, approved by the Medical Staff on July 9, noting that the revision process involved himself, members of the Quality team and Health Information Management team. The purpose of the revisions were to update terminology, add items required by DNV, and reflect current practices. Peer Review was discussed, regarding 30-day process and approval by Medical Staff.

Bob Pickel **moved** to approve the Medical Staff Bylaws and Rules and Regulations as presented. Mary Schamehorn **seconded** the motion. **All in favor. Motion passed.**

3. CNO Report

Ray Hino, CEO, presented on behalf of Cori Valet who is out of office. We are pleased to report the recent completion of 6 successful interviews that will help us reduce the current number of RN travelers. Our new case manager will begin this month, allowing us to provide discharge planning coverage 7 days per week. This will update the Strategic Plan to 100%. Southern Coos will participate in the OHSU SAINTS fall prevention and next month will learn if we will participate as a control group or active participant. Participating facilities will receive trainings and quality improvement cycles over the 2 year study period in line with our goals for reduced patient falls and employee injury due to falls. ED Transfers: Of the 24 transfers from our facility for a higher level of care, 2 were due to lack of bed availability due to last minute staffing shortage. ED census was down slightly in the month of June. Our next Daisy Award ceremony to recognize nurses will be held on September 4 at 1:30 p.m.

4. CFO Report

Antone Eek, Chief Financial Officer, opened with announcement of the resignation of Katelin Wirth, Financial Analyst. Katelin has offered to assist in the transition. Until this position is filled, the finance department will require some mitigation of work allocation. Resources are being reviewed and evaluated. Accounting department activities were described for each position and skill sets. Materials Management is doing very well with the new Sage configuration and training. Payments rose in June reflecting improvements in collections. Focus remains on reducing initial claim billing delays. The Retail Pharmacy is going very well, we are still working to hire a second pharmacist. Insurance contracting has progressed to approximately 80% completion. At end of last month after being open just 9 days, an average of 42 prescriptions were filled daily.

5. CIO Report

Scott McEachern, Chief Information Officer, provided a review of department activities for the month of June with a recap of new and ongoing projects. A new AI phone agent was implemented and has stabilized after 2 months. A new contract management system is in development to meet DNV contract management requirements and we hope to be live by August 1. A new IT help desk solution is in process with roll out to all staff on August 1.

6. Clinic Report

David Serle, Clinic Director, opened with upcoming activities for the clinic staff including August 15 sports physical program open to Coos and Curry County schools and the annual PSA program in September. New FNP Kim Bagby is ramping up to 10 patients per day and is doing extremely well. Felisha Miller, FNP, is scheduled to start in September. Full time physician recruitment is in process. Clinic volume has increased 6 straight months. July will be lower due to scheduled

vacations and staffing changes. A new contract was completed with Dr. Preslar agreeing to increase to 13-15 patients per day. Wellness visits are anticipated to increase. Mr. Serle noted that the clinic just missed breaking even over the last 6 months by \$310.00 thanks in part to contributions from the Pain Management Clinic and Dr. Webster, new clinic Medical Director, also doing very well. This year's loss of \$300K was incurred primarily in the first 6 months of the year. Board members noted this as a great turnaround!

7. Human Resources Report

Stacy Nelson, HR Director, attending remotely, introduced himself and his new report for the monthly meeting to include a similar structure each month. Metrics this month included Employee Engagement activities, Compensation Survey update, and Staffing Turnover report compared to prior years. Open positions were identified. Regulatory updates include DNV readiness, Wage and Hour Laws, and an update of the SCHHC Employee Handbook to be in process. Training and Development initiatives include a transition from Relias to Healthstream online modular training and a "Legal 101" training for Leadership. Mr. Nelson announced the clinical and non-clinical employees of the month, Deena Buchanan and Michele Jurgenson, both in Medical Imaging. On a sad note, we share the loss of a beloved staff member who had been with Southern Coos in our Laboratory for over a decade, Jim Morgan. Jim was not only a valued team member at Southern Coos, but also a volunteer fire fighter for the Coquille Valley Fire Department and had been an EMT. On August 9 there will be a celebration of life for Jim at the Coquille Community Center precipitated by a ladder truck fire truck flag processing from Lincoln School to the Coquille Community Center at 11:15 with BBQ at 11:30, open to the public. The annual employee and family picnic will be on August 16, 11am to 4pm on private property owned by Dr. Crane and board members are welcome to join for the BBQ and staff engagement.

8. SCHD Foundation Report

Ray Hino presented on behalf of Alix McGinley, Foundation Executive Director, who is attending a conference. The annual major fundraiser of the year, the Golf for Health Classic at Bandon Crossings to be held in September, has received sponsor and donation commitments over \$80,000 as of this report, toward goal of \$125,000. Pam Hansen, Board Liaison to the Foundation added that donations are tax deductible and hole sponsor signage can be a marketing expense write off for businesses. The written report included updates on the weekly community Meet and Greet presentations which in July included Ray Hino with an overview of FY25 and what we might expect from the Federal Budget Reconciliation Bill. On July 22 we added a special forum as part of the Master Facility Planning with a presentation from the architect team evaluation and receive community feedback.

9. Strategic Plan

Ray Hino, CEO, reviewed his summary of activities represented in the Strategic Plan working spreadsheet. In the first 12 months since the new Strategic Plan was created, the team has completed 5 goals (at 100% each) with all but 2 currently

activated. The five completed are: 1) Develop and Implement an organization wide Risk Management Strategy; 2) ERP Implementation, 3) Upgrade Sterile Processing Department; 4) Improve Service Offerings to Patients, and 5) Restructure Southern Coos Foundation and Fundraising. The team is at 65.20% completed for the 39 goals that have been activated so far in the plan. It is anticipated that the August report will highlight activity on 40 of the 41 goals. Mr. Hino took questions from members of the Board regarding several initiatives including the Profitability Plan (5.2) proposed percentage increase to the bottom line which will be defined when new service line projections for Geri-Psych and Surgery are added and to align with the budget contingency plan. Level IV Trauma goal has progressed from 14% to 27% complete with completion goal date of August 31.

VI. Monthly Financial Statements Review & Discussion

1. Month End Financial Summary and Review of Statements Ending June 30, 2025

Antone Eek, CFO, provided a summary overview noting the reduction in the revenue deduction to 41% from 46.3%. Days in Accounts Receivable has increased to over 120 days. Discussion of billing and collections included the length of time a provider has to submit a claim (365 days) and the time a payer has to make payment (less restricted), the claims process, and how the balance sheet reflects that discrepancy. The guidance to write off 100% after 4 months is conservative. The Cost Report has not yet been received so we have reserved over \$1M at this time. Claims were reviewed, noting that they vary in size, with one claim of \$170,000 having just moved past the 120-day mark with appeal in place and additional documentation requested. Contributing factors can be related to a specific insurance company, technology, and/or provider documentation. Debt ratio is good and we have solid cash coming in with a record month in Collections. Discussion included questions regarding how to reconcile FY25 loss from income statement against the balance sheet. It was noted that in general cash collections are up and expenses were reported significantly under budget. A board financial education session was offered the following week to include a review of deductions from revenue and swing bed vs inpatient utilization.

VII. Executive Session

At 7:50 p.m. the board moved into Executive Session Under ORS 192.660(2)(c) to consider matters pertaining to the function of the medical staff of a public hospital licensed pursuant to ORS 441.015 Licensing of facilities and health maintenance organizations, and under ORS 192.660(2)(f) to consider information or records that are exempt from disclosure by law, including written advice from legal counsel. No decision were made in Executive Session

Stacy Nelson and David Serle were excused at this time. **Remaining in attendance:** Thomas Bedell, Chairman; Mary Schamehorn, Secretary; Pamela Hansen, Treasurer/Foundation Liaison, Kay Hardin, Director/Quality Committee Liaison, and Robert Pickel, Director. **Administration:** Raymond Hino, CEO; Antone Eek, CFO; Scott McEachern, CIO; P.J. Keizer, Medical Staff Chief of Staff;

Alden Forrester, MD, Chief Medical Officer; and Amanda Bemetz, Director Quality Risk & Compliance. **Others in attendance:** Robert S. Miller, Counsel; Kim Russell, Executive Assistant. **Press:** None.

VIII. Return to Open Session

At 8:54 p.m. the meeting returned to Open Session.

1. Consideration of Executive Session Minutes 6/26/25

Mary Schamehorn **moved** to accept Executive Session Minutes as amended. Pam Hansen **seconded** the motion. **All in favor. Motion passed.**

2. Reports from Executive Session

- a. Quality, Risk & Compliance Report**
- b. Medical Staff Credentialing Report**

2-Year Privileges – New

Brian Phelps, MD – Provisional – Emergency Medicine

Heather Huston, NP – Provisional – Emergency Medicine

2-Year Privileges – Reappointments

Douglas Crane, MD – Active - Hospitalist

Direct Radiology Appointments – After Hours Reading Radiology

Jeffrey Grossman, MD - Reappointment – Courtesy

Nathan Hannemann, DO – Reappointment – Courtesy

Andrew Sellers, MD - Reappointment – Courtesy

Anthony Vogel, MD - Reappointment – Courtesy

Medical Staff Status Change

James Woods, MD – Emergency Med – Letting Privileges Lapse
07.31.25

Bob Pickel **moved** to approve the reports as presented. Mary Schamehorn **seconded** the motion. **All in favor. Motion passed.**

3. Consideration of Budgetary Contingency Plan Dashboard

In response to concerns regarding the passage of the Federal Budget Reconciliation bill, budgetary benchmarks and potential financial balancing actions were reviewed and considered.

Mary Schamehorn **moved** to approve the dashboard as presented. Pam Hansen **seconded** the motion. **Discussion:** Concern was expressed about the timeline with regard to adoption of the FY27 budget. Kay Hardin and Bob Pickel **opposed**. Tom Bedell **affirmed**. **The motion passed 3 to 2.**

IX. Open Discussion

None.

X. Adjournment

The meeting adjourned at 9:05 p.m. The next regular will be held on August 28, 2025 at 6:00 p.m. at the Southern Coos Hospital & Health Center main conference room.

Thomas Bedell, Chairman 08-28-2025

Mary Schamehorn, Secretary 08-28-25

**Southern Coos Health District
Board of Directors
Special Meeting Minutes
July 31, 2025**

I. Attendance

Thomas Bedell, Chairman; Mary Schamehorn, Secretary; Pam Hansen, Treasurer; Kay Hardin, Quality Liaison. **Absent:** Bob Pickel, Director. **Administration:** Raymond Hino, CEO; Scott McEachern, CIO; David Serle, Clinic Director. **Others present:** Joseph Bain, President; Alix McGinley, Executive Director. **Via Remote Link:** Antone Eek, CFO; Joe Kunkel, Consultant/Healthcare Collaborative; Jody Corona, Consultant/Health Facilities Planning & Development. **Press:** None.

Due to having a quorum of board members present, this meeting was publicly noticed as a Special Meeting in compliance with Oregon Public Meeting Law. There is no agenda and no decisions were made during this meeting.

II. Workshop Presentation: Data and Underlying Assumptions

1. Joe Kunkel, from The Healthcare Collaborative, introduced Jody Corona, of Health Facilities Planning and Development, who provided a review of research and data from the prepared Powerpoint presentation, as a component of the Master Facility Planning project.

In early 2025, Southern Coos Hospital & Health Center retained Health Facilities Planning & Development (HFPD) to help inform and facilitate its master planning related to a hospital replacement project. HFPD provided a menu of services, and the following were selected: 1) Service Area Demographics and Inpatient and Outpatient Use Patterns; 2) Project Future Volumes and Space-Driving Needs (ED, surgery, inpatient beds, imaging, etc.); 3) Provider Need Estimates; and 4) to Engage the Community, Providers and Staff in Voicing their Health Care Expectations and Perceptions. Key findings and demographics of the Primary and Secondary Patient Service Areas were reviewed. It was noted that today, the PSA is about 18,000 with 37% over the age of 65. Additional stats for school enrollment, housing demand, labor trends were included. Community survey results were reviewed, with 219 total responses, of which 24% were SCH&HC employees. Survey data included use of specialists in the last 2 years, primary care, and barriers to access. Inpatient and Outpatient statistics were reviewed with expected growth projections. In conclusion, Sensitivity Testing results detailed how space needs would be impacted by population growth over and above current estimates for the next 10-15 years.

- III. Adjournment.** The Special Meeting adjourned at approximately 4:30 p.m. There was no agenda and no decisions were considered at this public meeting to hear the consultant presentation.

Thomas Bedell, Chairman 08-28-2025

Mary Schamehorn, Secretary 08-28-25

**Southern Coos Health District
Board of Directors
Special Meeting Minutes
August 21, 2025**

I. Attendance

Thomas Bedell, Chairman; Pam Hansen, Treasurer. **Absent:** Mary Schamehorn, Secretary; Kay Hardin, Quality Liaison; Bob Pickel, Director. **Administration:** Raymond Hino, CEO; Scott McEachern, CIO; David Serle, Clinic Director. **Via Remote Link:** Antone Eek, CFO; Scott McEachern, CIO; Joe Kunkel, Consultant/Healthcare Collaborative. **Press:** None.

Due to the potential to have a quorum of board members present, this meeting was publicly noticed as a Special Meeting in compliance with Oregon Public Meeting Law. There is no agenda and no decisions were made during this meeting.

II. Recurring Meeting

Mr. Kunkel led the group in the primary goal for today's meeting, the Guiding Principle Exercise. The group was tasked with assessing and identifying key guiding principles under the areas of Patient, Family, Clinician, Leader, Employee, Community and Other. The purpose of this exercise was to identify fundamental beliefs, values, or truths to provide the framework for decisions to help guide actions toward goals in personal, professional, and organizational contexts. These are actionable guidelines used to help ensure that this project remains consistent, encouraging innovation and ensuring patient and staff satisfaction. Unlike abstract core values, guiding principles provide concrete ideas and standards for expected behavior and decision-making.

III. Adjournment. The Special Meeting adjourned at approximately 3:55 p.m. There was no agenda and no decisions were considered at this public meeting.

Thomas Bedell, Chairman 08-28-2025

Mary Schamehorn, Secretary 08-28-25

INVOICE

Robert S. Miller III, Attorney
1010 1st St SE
Ste 210
Bandon, OR 97411-9309

rsmiii@aol.com
+1 (541) 347-6075



Bill to
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.: 1100
Terms: Net 60
Invoice date: 07/30/2025
Due date: 09/28/2025

#	Product or service	Description	Qty	Rate	Amount
1.	Attorney (\$300/hr)	Thursday, July 24, 2025: Board Meeting & Executive Sessions.	3.5	\$300.00	\$1,050.00

Total **\$1,050.00**

Ways to pay



View and pay

**Southern Coos Health District
Resolution 2025-02
Banking Signature Authority**

BE IT RESOLVED that the Board of Directors of the Southern Coos Health District hereby officially requests removal of Antone Eek, Chief Financial Officer, effective September 1, 2025, from all banking accounts and all banking services including credit card and online banking. Raymond Hino, CEO and Thomas Bedell, SCHD Board Chairman, and Pam Hansen, SCHD Board Treasurer, are to remain signers.

The above resolution is approved and declared adopted by the Board of Directors for the Southern Coos Health District on the 28th day of August 2025.

AYES _____ NAYS _____

ATTEST:

Thomas Bedell, Chairman

Mary Schamehorn, Secretary



Chief Executive Officer Report

To: Southern Coos Health District Board of Directors
From: Raymond T. Hino, MPA, FACHE, CEO
Re: CEO Report for SCHD Board of Directors, August 2025

Antone Eek's Resignation:

- Our CFO for the past 18 months, Antone Eek, announced his resignation as SCHHC CFO on August 12. His last day of work for SCHHC will be September 1. I want to take this opportunity to thank Antone for all that he has done for SCHHC during his tenure as our CFO. He was a key leader in our Epic and Sage implementations during the past year, as a Co-Executive Sponsor with Scott McEachern. His previous experience with the Epic software system was extremely valuable. Perhaps his most important contribution was as the Executive Team Project Leader for the Retail Pharmacy implementation in June of this year. Antone's previous experience in hospital pharmacy operations was critical during this project, and we are all very grateful to him.
- With Antone's announcement, I have been successful in identifying an Interim CFO replacement for him. Our Interim CFO is Cameron Marlowe, a former critical access hospital CFO at Curry General Hospital in Gold Beach, OR and former critical access hospital CFO at Blue Mountain Hospital in John Day, OR. Cam also has previous CAH CEO experience as CEO at Blue Mountain Hospital in John Day, OR. He retired as Hospital CEO at Blue Mountain Hospital in December of 2024 and has been working as an independent consultant and Interim CFO since that time. He is available to start at SCHHC next month in September. He only wants an Interim CFO position and is not interested in the full-time CFO position here, since he has now established his permanent residence in Idaho. With Cam's previous CAH CFO (and CEO) experience, as well as his skill and experience in Finance Analytics, he will be a great help for us at SCHHC as we plan for a new CFO in the future. He has committed to being on-site at SCHHC 4 days per week.

Pharmacy:

- With Antone's departure, I have named our Chief Medical Officer (CMO) Alden Forrester, as the Executive Team Oversight for our Pharmacy and our Pharmacy Director, Jeremy Brown. Dr. Forrester's Medical background puts him in a great position to provide medical oversight, in addition to clinical oversight over the pharmacy. He is excited about the opportunity, and I believe that he and Jeremy will make a great team.
- Our Retail Pharmacy is getting busier. We are up to 75 prescriptions filled per day, on average for the full 7-day weeks.
- We had a 2-day "mock" 340B audit on August 6-7 earlier this month. It is a requirement for 340B certification that we engage with independent auditors to evaluate our 340B program regularly. The results were very good. The reviewer complimented our pharmacy by stating that our current 340B

program is improved from the last mock audit, which was 2-3 years ago. Much of this credit goes to our 340B Pharmacy Technician on staff, Christina Harner.

- In order to continue to boost our pharmacy utilization, we are planning to begin actively marketing our retail pharmacy, including replacing the current billboard sign near the intersection of 2nd Street and Harlem (currently advertises our Epic My Chart application) with a new billboard sign that announces that the SCHHC Pharmacy is now open 7 days per week.

DNV Survey:

- It gives me great pleasure to inform the Board that I have been notified that our Director of Quality, Risk & Compliance, Amanda Bemetz, has been notified that she has officially earned her certification credentials as a Certified Professional in Healthcare Quality (CPHQ). The CPHQ is the only accredited certification in healthcare quality, and it demonstrates competency across the continuum of healthcare quality, including patient safety, performance improvement, risk management, data analysis and regulatory compliance. We are extremely fortunate to have Amanda Bemetz as our Director of Quality, Risk & Compliance. We are all very proud of her on this tremendous accomplishment.
- Our Quality team is continuing to make great progress in working with each of our managers to be prepared for our impending 2025 DNV survey. The internal audits are going well, and our staff are extremely engaged in the process, which is wonderful to see.
- I am doing a report at our August Quality & Patient Safety Committee meeting on the new Cobblestone contract management system. All of our contracts have now been loaded into the new system.

Coast Community Health Center:

- The agreed upon implementation date for the merger between Adapt Integrated Health of Roseburg, OR and Coast Community Health Center is October 1, 2025.

Bay Area Hospital:

- Kelly Morgan, former CEO at CHI Mercy Medical Center in Roseburg, OR officially became the new Interim CEO at Bay Area Hospital on August 4, 2025. He replaced Brian Moore, who resigned as CEO for BAH on July 17. I have known Kelly for over 20 years, due to the fact that we first met when we were both Hospital CEOs in the Central Valley region of California in the early 2000s. I was at Tehachapi Hospital in Tehachapi, CA and Kelly was CEO at Sierra View Medical Center in Porterville, CA. Kelly is an excellent Hospital CEO and did a phenomenal job at CHI Mercy Medical Center for 15 years before retiring in 2023. He is coming out of retirement to be Interim CEO at BAH. Since his hire, I have had 2 meetings with Kelly. The first was at my office at SCHHC and the 2nd meeting was a group meeting of hospitals and clinics in Coos Bay on Monday, August 15. I am looking forward to working with Kelly and helping to create collaborative opportunities for our hospitals to work together to strengthen both facilities and to continue to improve health care in our region.
- On a side note, Kelly Morgan was born at the old hospital in Myrtle Point, OR and grew up in Coquille and the Coquille school system. Some long-time residents of our area remember growing up with Kelly Morgan as a child, including Kim Russell's husband, Troy Russell. Kelly is definitely a local product who has done extremely well for himself.

Master Facility Plan Update:

- In the past 30 days we have made some major strides on our Master Facility Planning (MFP) project. This started with a 2.5-day on-site review by the Davis Partnership architectural team on July 21 – 23. During the 3 days that the Davis team was here, they met with department managers, medical staff, executive team members, community representatives and Board members. Following the 3 days with the architects, we also had a 1-day visit from a team of engineers, as well. The result was that the architects and engineers will be able to start creating conceptual plans for future usage of our existing facilities, as well as our space needs for the present and the future. The team shared with us some potential concepts that would add to our current building to give us more space, and also to add new buildings on our campus, with the acreage that we currently have.
- Also, during the month, we received a report from our data consultants at Healthcare Facilities & Planning Development. The results of the data review were quite enlightening, showing slower than anticipated population growth in the coming years, but a major shift if the aging of our population as the Medicare population in our area is growing at a faster rate than the non-Medicare aged population. The report does indicate underserved medical specialties in our area are opportunities for SCHHC as it continues to grow and add services.

Contingency Plan Initiatives Update:

- I am going to begin this month, reporting on our Financial Contingency Plan Improvements on a monthly basis in my monthly CEO Report. At the end of each quarter, we will have a separate agenda item to provide a Quarterly Review of the Contingency Plan, as promised to the Board of Directors last month.
- The Financial Contingency Plan Updates will include the following services: (a) Retail Pharmacy, (b) Surgery, (c) Geriatric Psychiatric Services, (d) Clinic Provider Productivity and (e) Outpatient Ancillary Services.
- Here is the first update:

Geriatric Psychiatric (Senior Life Solutions)

- We had a successful onsite kick-off meeting with Senior Life Solutions (SLS) on August 20, 2025.
- The project team is mapping out a series of meetings in the next few weeks to tackle:
 - Billing and Revenue Cycle
 - Data exchange between their EHR and Epic
 - Credentialling
 - Recruiting – our HR team is working closely with SLS to post positions locally.

General Surgery & Endoscopy (Colonoscopy and Upper GI) Procedures

- Signed contract with Dr. Brett Schulte
- Clinical Informatics, Revenue Cycle and Surgical Services are working with Providence Health to build new department for ambulatory surgical services.
- Dr. Schulte is already scheduled to be in Bandon and provide surgical services for 1 week per month for the months of October, November, and December 2024.
- His first workday will be October 20, 2025.

Clinic Provider Productivity

- Temporary Family Nurse Practitioner, Kim Bagby, is already up to averaging 10 patients per day.
- New Full Time Nurse Practitioner, Felisha Miller, will begin seeing patients on September 8, 2025.
- Dr. Preslar continues to ramp up his practice.

Outpatient Ancillary Services (Laboratory, Medical Imaging)

- CIO is working with Providence to scope an order and results interface between CCHC and SCHHC; project will include interfaces between SCHHC and BAH, CVH, and North Bend Medical Center

For the Recommended Immediate Cost Cutting Measures:

- Hiring Freeze: in effect
- We will start monthly meetings with every department to review charge capture initiatives in September.
- We have limited employee conference/travel.
- Reduced the number of billboards from 3 to 2.
- All legal requests now go through the CEO office.
- We have decommissioned several pieces of software, including Axiom, Dialog Health, Seven Medical – just between these three, we have saved \$60,000 annually.

Initiatives in the Win-Wins and Wins Categories

- Working with our vendor VersaBadge to improve ED provider time tracking
- We held a mock 340b audit and the results were positive.
- Clinical Informatics, CIO, and the Director of Revenue Cycle are working closely with our coding team and departments to improve service charge throughput.
 - We have seen significant improvements in coding turnaround time, a drop in time charts spend in work queues, and shorter time for claims to be submitted.
- We are taking co-pays at the time of service.



Chief Medical Officer Report

To: Southern Coos Health District Board of Directors
From: Alden Forrester, MD, Chief Medical Officer
Re: CMO Report for SCHD Board of Directors, August 2025

OHSU Telemedicine Collaboration Update:

Because OHSU clinicians involved in this program will provide care directly to patients in our hospital via secure video conference link, they will need to be credentialed members of our medical staff. You will note the names of some of these clinicians in the credentialing report. We continue to target September or October for the start of this service.

125th US Women's Amateur Championship:

My sincere thanks and gratitude to the volunteer clinicians and the staff of multiple departments including Materials, Plant Operations, ED, Nursing, Pharmacy, Finance, Marketing, and IT for making our presence at the golf tournament a success. Fortunately, most injuries we saw were minor.

It was a great opportunity to showcase our quality care and feedback I have received so far is universally positive. Our team was even (very briefly) on the Golf Channel while tending to one of the competitors on the course.

Surgery:

Limited general surgery coverage is expected to start on or around October 20. Dr. Brett Shulte is an experienced general surgeon with both recent experience in rural hospitals (Burns, Oregon) and experience starting new general surgery programs. This combination of skills and experience makes him an ideal choice to re-ignite our general surgery program.

Dr. Schulte will be available to us 5 days per month. He will be able to help us work out the inevitable kinks inherent with starting a new surgery program in anticipation of expanding general surgery services in 2026. He will primarily perform elective procedures such as endoscopies, hernia repairs and other non-emergent abdominal surgical procedures.

On a related note, I am sad to confirm that Dr. Veronica Simmonds has now left Southern Coos.

Geriatric Psychiatry:

Our "Kick Off" meeting for this program occurred on August 20. Many departments are coordinating efforts to enable us to provide this new service. In addition to clinical departments and our informatics team, we are coordinating with our facilities engineering team to convert current administrative space in the Business Office to clinical space, which is a requirement for the establishment of this program as we have no other space available that will meet the program's needs.

Occupational Medicine:

The possibility of developing occupational medicine as a service line is intriguing on several levels. First, it is a service local employers need that is not readily available locally. Second, it has the potential to provide a revenue stream independent from Medicare and Medicaid, thus providing some protection against anticipated cuts in funding for those services.

We are currently receiving interest from both a nurse practitioner desiring an employment opportunity with us for occupational medicine and a board-certified occupational medicine physician looking to contract with us for services. With both these providers, we would have a strong team enabling us to provide a wide range of occupational medicine services to employers on the southern Oregon coast.

I am in the process of gauging interest from local employers. I have found it challenging to develop engagement from employers in a program that may exist in the future compared to presenting them with one that already exists. Because of this, I cannot guarantee the program will be initially financially self-sustaining, although I am working on ways to mitigate that based on how we contract with the providers.

The open question is whether to risk investing capital in this program to achieve the aims of serving our community and achieving revenue streams independent of Medicare and Medicaid funding constraints. Compounding this is that the window to hire the currently interested providers is not infinite and when that window closes it will be exponentially more difficult to start a program if we must recruit the providers cold. Time is of the essence.



Chief Nursing Officer Report

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

From: Cori Valet, RN, BSN, Chief Nursing Officer

Re: CNO Report for SCHD Board of Directors Meeting – August 28, 2025

Service Limitations –

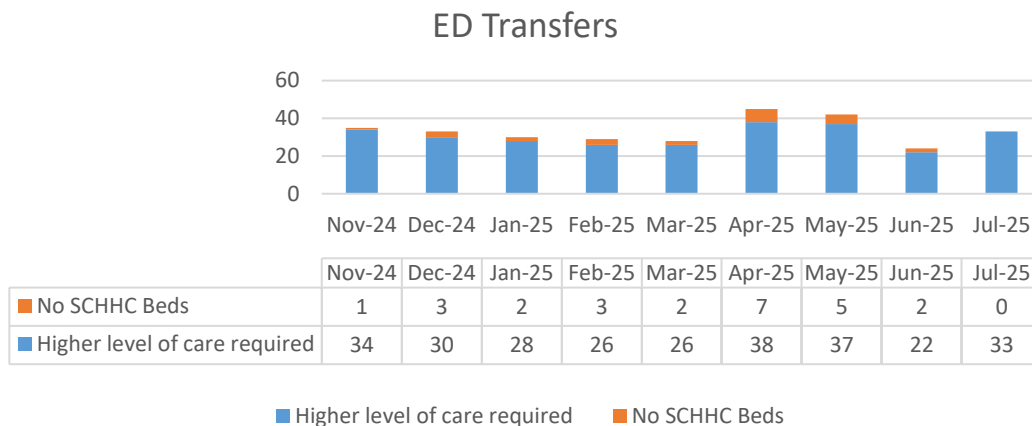
- Magnetic resonance imaging (MRI) – The MRI unit suffered a system failure 08/07/2025 resulting in down-time through 8/18/2025. The failure was related to the disk drives that store the protocols for each MRI procedure. The MRI protocols were unable to be retrieved and required new upload of the basic protocols supplied by Heritage Imaging. Each protocol will be reviewed and updated with our radiologist preferences (5mm slice change to 3mm slice).
- Pulmonary Function Test (PFT) machine – An oxygen sensor failed 8/21/2025 that was discovered upon routine equipment calibration prior to patient appointment. Three (3) PFTs appointments were rescheduled. Equipment is under service contract. Resolution update will be provided at the board meeting.

Clinical Department Staffing –

- Medical-Surgical department – Three (3) Full time RNs have been recruited between July and August to date. Four (4) Full time nurse positions remain vacant. One (1) CNA recruited in July. Three (3) Full time CNA positions remain vacant. Currently utilizing five (5) contract nurses.
 - Department shows -5.8 FTEs in chart below. 2.22 tele tech remains vacant as we will not require this additional staffing until we become Trauma rated. Nurse variance was due to lower census on the unit and staffing was flexed down to accommodate.
- Emergency department – One (1) full time Float RN and one (1) Float LPN positions remain vacant, creating the deficiency seen in the FTE table.
- Laboratory department – Exceeding budgeted FTEs due to staff orientation periods and additional manual and administrative processes related to new EPIC workflows.
- Surgical department – FTEs below expectations due to limited surgical volumes.
- Medical Imaging – Exceeding budgeted FTEs due to staff training, specifically MRI training.
- Respiratory therapy – FTEs below expectations due to both scheduled time off and short notice vacancies.
- Case management – FTEs below budgeted expectations due to one (1) Full time vacancy.

	July 2025 FTE				
	SCH Actual	Contract Actual	Actual Total	Budget	Diff
Med Surg	21.9	4.25	26.15	31.95	-5.8
Manager	1	0	1	1	0
CH RN	3.86	0	3.86	3.85	0.01
RN	5.8	4.25	10.05	12	-1.95
LPN	1.52	0	1.52	2.45	-0.93
CNA	7.94	0	7.94	8.65	-0.71
TeleTech	1.78	0	1.78	4	-2.22
Emergency Dept	13.36	0.69	14.05	15.18	-1.13
Manager	1	0	1	1	0
RN	8.1	0.69	8.79	8.78	0.01
LPN	3.43	0	3.43	3.6	-0.17
CNA/US	0.83	0	0.83	1.8	-0.97
Laboratory	11.13	2.26	13.39	9.41	3.98
Manager	1	0	1	1	0
MLS	1.03	0	1.03	0.37	0.66
MLT	3.84	2.26	6.1	3.12	2.98
Lab Assist I	3.16	0	3.16	2.38	0.78
Lab Assist II	1.05	0	1.05	1.47	-0.42
Lab Assist III	1.05	0	1.05	1.07	-0.02
Surgical Dept	5.12	0	5.12	7.8	-2.68
Manager	1	0	1	1	0
Surgical RN	1.72	0	1.72	3	-1.28
Sterile processor	0.78	0	0.78	1	-0.22
Surgical Tech	1.62	0	1.62	2	-0.38
Housekeeper	0	0	0	0.8	-0.8
Medical Imaging	11.16	3.85	15.01	14.39	0.62
Manager	1	0	1	1	0
Radiology Tech	5.98	3.85	9.83	8.03	1.8
Rad Tech I	0.86	0	0.86	0.7	0.16
Ultrasound	1.67	0	1.67	2.66	-0.99
MI Coordinator	0.84	0	0.84	1	-0.16
MI Admin Assist	0.81	0	0.81	1	-0.19
Respiratory Therapy	5.15	0.91	6.06	7.31	-1.25
Manager	1	0	1	1	0
RT	4.15	0.91	5.06	6.31	-1.25
Swing Bed	0.7	0	0.7	1.65	-0.95
Case manager	0.7	0	0.7	1.65	-0.95

Transfer Statistics –



- July 2025 Transfers – Total Transfers = 33.
 - All Thirty-three (33) transfers required higher levels of care and/or services not offered at SCHHC.
 - Neurology – 1
 - Cardiology – 7
 - Surgical – 9
 - Obstetrical – 0
 - Intensive care – 10
 - Urology – 2
 - Pediatric – 1
 - Orthopedics - 1
 - Hematology/Platelets - 1
 - MRI – 1 Emergent MRI (per ED provider) for sudden onset urinary incontinence and back pain
 - Nurse Staffing on the Med-Surg unit has been changed to nurse to reflect the nurse to patient ratios required by the state of Oregon. Previously a patient acuity and intensity tool was utilized to determine how many nurses were required to care for the patients. The acuity and intensity tool was determined to be too subjective and showed variance depending on which nurse was completing the form. The new staffing ratios are simple:
 - Intensive care 1:2
 - Intermediate care 1:3
 - Cardiac-telemetry care 1:4
 - Medical-Surgical care 1:5
 - SWING 1:7

This change has increased the nurse to patient ratios, allowing more patients to be admitted with existing staffing levels.



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, August 28, 2025

Information Systems Projects

- ❖ New Help Desk Go-Live August 1
- ❖ Implementing VOIP phones for our remote billing staff
- ❖ Working with Andersen Dabrowski Architects on design for the conversion of the business office to clinical space (see Business Office Conversion Proposal for additional information)
- ❖ Supporting new employee and provider onboarding
- ❖ Implementing Contract Management System

Clinical Informatics Tickets Summary

Month	Open	Waiting	Closed	Total
May 2025	0	0	85	85
June 2025	0	1	138	139
July 2025	2	0	63	65
August 2025	12	2	10	24

Priority Clinical Informatics Projects

- ❖ Epic Build for Surgery Dept – *In Progress*
- ❖ SCHHC Senior Life Solutions/Geriatric Psych – *Reviewing*
- ❖ Medication Waste Documentation/Settings – *In Progress*
- ❖ HIM Deficiency WQ/Workflow – *Reviewing*
- ❖ Deficiency Query Process – *Reviewing*
- ❖ Immunization Medication Configuration – *Reviewing*
- ❖ Authorization and Referral Workqueue Routing – *Education/Monitoring*
- ❖ Departmental Charge Capture Configuration - *Reviewing*
- ❖ E/M Charging Configuration – *Reviewing*

Clinical Informatics Projects by Department

- EMR Workflow Videos – *In Progress*
- Data Extraction – Archive Setup/Validation – *In Progress*
- ● Ticketing System – Clinical Informatics Ticket Revisions – *Monitoring*

Emergency Department

- ● ASAP Workflow/Charge Capture – *Reviewing*
- ● ASAP Documentation - *Reviewing*
- ✓ Provider EPIC Onboarding 8/17 - *Complete*



Key:

✓ *Complete*











✓ *In Progress*

● *Education/Monitoring*



● *Reviewing*

-  Provider EPIC Onboarding 9/21 – *Reviewing*
-  Provider EPIC Onboarding x2 Mid-Sept - *Reviewing*




HC Primary Care

-  Provider Onboarding Support – 8/27 – *Reviewing*
-  Immunization Workflow Assessment - *Reviewing*
-  Result Scanning Workflow for External Results – *Monitoring*
-  Ambulatory EKG Workflow for Interpretation Documentation – *In Progress*
-  Internal and External Referral Order Entry Process – *Education/Monitoring*
-  Internal and External Imaging Order Entry Process - *Reviewing*
-  Telehealth Video Visit Workflow – *Education/Monitoring*
-  Care Gaps Documentation – *In Progress*
-  DME ordering and referral workflow (Interface pending) – *Reviewing*
-  Sports Physical Clinic Visits - *Reviewing*






Pain Management

-  Medication Administration Workflow – *Education/Monitoring*
-  Ketamine Flowsheet Documentation – *Complete*




Laboratory / Ambulatory Clinic

-  Ambulatory Preappointment Lab Testing Scheduling – *Reviewing*
-  Lab Pathology Ordering – *Reviewing*
-  Lab MISC Lab Ordering – *Reviewing*






Med Surg

-  Patient Status Transition Process (IP to Swing, DCRA One Way) – *Monitoring*
-  Order Set Customization – *Reviewing*
-  ADT label Printing - *Reviewing*
-  New Provider Onboarding Epic Onboarding 8/28 – *Reviewing*
-  New Provider Onboarding Epic Onboarding 9/24 – *Reviewing*


OP Nursing

-  Internal and External Therapy Plan Workflow – *Monitoring*
-  Wound Care Acute/Ambulatory Workflow – *Complete*
-  Blood Transfusion Type and Screen OP Nursing Workflow – *Education/Monitoring*



Quality

-  Clinical Documentation – *Education/Monitoring*
-  ACO Documentation/eCQM measures – *In Progress*
-  Medici AUR reporting – *In Progress*
-  Quality Measures Clinical Documentation – *In Progress*
-  Promoting Interoperability - *Reviewing*




Radiology

-  Internal Imaging Ordering Process – *Education/Monitoring*

Respiratory Therapy

-  Internal Order Routing to Workqueue for RT Orders – *In Progress*
-  Respiratory Orders dropped at Registration - *Reviewing*

Surgical Services

-  Anesthesia Workflow Review – Personalization Setup – *In Progress*
-  Surgical Case Referral/Scheduling Workflow – *In Progress*
-  Surgeon Perioperative Workflow - *Reviewing*



Multi-Specialty Clinic Report July 2025

To: Southern Coos Health District Board of Directors and Southern Coos Management
From: David M Serle – Director Medical Group Operations
Re: Multi-Specialty Clinic Report for SCHD Board of Directors Meeting – August 29, 2025

Provider Recruiting/Onboarding: As of 8/22/25

Hiring/Onboarding Status: Providers

- Felisha Miller, FNP
 - Orientation August 27th
 - First day seeing patients Monday, September 8th
- Full time Physician.
 - Recruiting is ongoing

Year: 2025												Mar	Apr	May	June	July	Aug Proj
Month: July	Clinic	PT's		No	Total	AVG	No	Cancel	Tele	New							
Provider	Days	Sched	Cancel	Show	Seen	Seen	Rate	Rate	HLTH	PT's							
Bonnie Wong, DO											109	48	127	102			
Paul Preslar, DO	12	151	7	3	141	11.8	2%	5%	0	8	133	129	115	134	141	108	
Shane Matsui, LCSW	17	63	6	1	56	3.3	2%	10%	4	3	40	85	84	78	56	64	
Victoria Schmelzer, CRNA	8	73	8	0	65	8.1	0%	11%	0	1	60	60	60	74	65	30	
Tami Marriott, MD	7	75	6	1	68	9.7	1%	8%	0	0	35	23	57	87	68	74	
Jennifer Webster, MD	8.5	112	6	5	101	11.9	4%	5%	2	24	133	149	147	180	101	156	
Henry Holmes, MD	6	51	1	2	48	8.0	4%	2%	1	0	60	85	51	0	48	47	
Veronica Simmonds, MD	9	68	14	2	52	5.8	3%	21%	0	34	0	34	71	75	52	22	
Kim Bagby FNP	12	97	5	1	91	7.6	1%	5%	1	13					91	103	
Outpatient Services	22	230	16	3	211	9.6	1%	7%	0	0	201	243	189	206	211	210	
Totals	101.5	920	69	18	833	8.2	2.0%	7.5%	8	83	771	856	901	936	833	814	
Totals Visits Minus OP	79.5	690	53	15	622	7.8	2.2%	7.7%	8	83	570	613	712	730	622	604	

Clinic Visits:

- Total clinic visits are down 12% from the previous month (-103)
- Provider visits minus OP services are down 17% (-108)
- Total clinic visits for August are projected to drop 2% compared to current month (-19)
- Provider visits minus OP services, are projected to drop by 3% compared to current month (-18)
- **Kim Bagby FNP:**
 - 91 visits for July
 - 103 projected visits for August
- **Sports Physicals Bandon Highschool:**
 - 96 were performed (Dr. Preslar, & Dr. Holmes)



Southern Coos Health Foundation Report

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

From: Alix McGinley, Executive Director, SCHF

Re: SCH Foundation Report for SCHD/SCHF Board of Directors, Aug 14, 2025

Golf for Health Classic (GFHC) - The 18th anniversary 2025 Golf for Health Classic is September 19th and 20th. Our goal for this year's signature event is \$125,000.00. To date we have received or have promises for \$96,200 for this year's tournament, under \$30k to go! We have a host of new sponsors and the majority of returning Sponsors are upping their game. Our Bandon Dunes reception is going to be the best yet and is ramping up to be the hottest ticket in town. This year golfers, non-golfers, businesses and individuals want to attend.

This is the final push for sponsors and donations. If you have a personal connection with any community partners, please encourage them to support our biggest fundraiser of the year. This event helps fund most of the SCHF expenses throughout the year.

Meet & Greet-SCHHC & SCHF Lecture Series - SCHHC/SCHF is slotted in for the second Tuesday of each month Meet & Greet at Bandon Fisheries Warehouse. Our July presenter was our very own CEO Ray Hino who presentation was an overview of FY25, what is to come and the Federal Budget Reconciliation Bill. We also had a second session in July for our MFP community engagement session. August's presentation was Medicare and presented by Colene Hickman who subbed in for Brenna Watkins.

Quarterly Art Show - Art from our local art community is a value add for our Hospital for patients, families and staff alike. Our show on Sunday, July 13th entitled Goodies from the Garden was very well attended and our Hospital looks alive with garden views.

Gift Shop - Training continues with Development Coordinator Tina Gulseth, but she has taken on all of the Gift Shop functions and volunteer oversight. We withheld ordering in June due to end of the year inventory which effected our sales in July. We are now back in business and focusing on bring in more sales. Karen and Tina would like to give patients from our Clinic and Pharmacy 10% off coupons to drive traffic over to the Gift Shop. More to come.

New/continuation of fundraising programs - Our Heartfelt Thanks Campaign (Grateful Patient-GP) is nearly ready. Our first GP Sally Powers will join Alix for the Meet & Greet rollout on Tuesday, September 9th at the Bandon Fisheries Warehouse.

4Q will bring the new Employee Giving, 2nd Annual Giving programs.
Capital Campaign initiatives to follow likely in 2026.

Grant Submissions - Our grant submission to JAMF for Bandon School Nursing program is moving on to the next phase, site visit on July 26th. Two additional grants were submitted to OCF and CHIP (Advanced Health). If granted, could be worth up to \$50k towards our business office remodel to additional clinic space.



To: Board of Directors and Southern Coos Management

From: Antone Eek, CFO

RE: July 2025 Month End Financial Results

Revenue Performance:

- Gross Revenue: Achieved \$5,465,000, surpassing the budget of \$4,931,000.
 - OP revenue saw the biggest increase compared to budget of over \$500,000

Revenue Deductions:

- **Deductions from Revenue:**
 - July amounted to \$2,404,000 or 44%
 - Accounts receivable increased by \$851,000 to \$9,425,000 in July, with AR over 120 days coming in at 2,050,000.
 - The remaining AR balance in CPSI of \$735,000 is included in the over 120-day category.
 - Actual Contractual deductions were 31.25% for the month of July. Included in that amount is \$36,000 in Charity Care (0.6% of gross revenue) and a recovery of \$13,000 in bad debt payments.
 - Discounts were \$41,000 or 0.75% of gross revenue. Included in that amount is \$14,000 in Medical Necessity Discounts and \$3,000 in Non-Authorized Discounts.
 - Estimated Contractual deductions were \$700,000 for July.
 - This is primarily driven by open AR over 120 days as expectations of being able to collect on these accounts are low.
- **Medicare Cost Report Settlement:**
 - For FY26 - The current anticipated receivable from Medicare is \$41,000.
 - For FY25 – the current anticipated receivable is \$341,000.
 - We are currently working on the cost report. Totals will be final in November, and any receivable will be paid to us by Medicare in January / February.

Operating Revenues:

- **Total Operating Revenues:** Totaling \$3,389,000 were more than the budget of \$3,058,000 and marked an increase of \$431,000 from the same period last year.

Operating Expenses:

- **Labor Expenses** totaled \$2,396,000, coming in above the budgeted \$2,207,000
 - Increased contract staffing in Radiology, MedSurg and ER drove this variance.
- **Other Operating Expenses** reached \$1,020,000, coming in just above the budget of \$1,005,000.

Operating Income/Loss:

- Operating Loss of (\$26,000) compared to a budgeted loss of (\$154,000).
 - Driven by higher revenue

Change in Net Position:

- A gain of \$83,000 compared to the budgeted loss of (\$41,000)

Financial Health Indicators:

- Days Cash on Hand: July decreased to 71.6 from 80.1 in June.
 - Expense Spending was higher in July and included the settlement payment to Trubridge of \$350,000
- Accounts Receivable (A/R) Days Outstanding: Increased to 57.2 days, up from 52.3 days in June.

Financial Ratio Benchmark Chart (as of July 2025)

For Organization Type: Critical Access Hospital / Public Healthcare District

Metric	Value	Target Range / Benchmark	What It Means
Cash to Debt Ratio	0.85	0.20 – 1.00+	SCHHC has 85¢ in cash for every \$1 of debt — strong liquidity for a small/rural hospital.
Debt Ratio	0.51	0.30 – 0.60 (nonprofit healthcare sector)	About 51% of our assets are financed with liabilities — a balanced use of debt.
Days Cash on Hand	72 days	60 – 180 days (CAH benchmark: 75+ recommended)	We can cover 72 days of operations with cash on hand — a solid buffer for stability and planning.
A/R Days Outstanding	57 days	40 – 55 days (typical nonprofit hospital range)	A/R collection efforts are being strengthened to bring this back in line.

- **Liquidity (Cash to Debt Ratio & Days Cash on Hand):**
SCHHC liquidity profile remains solid. With 72 days cash on hand and a cash-to-debt ratio of 0.85, the hospital is positioned to withstand reimbursement lags or unexpected operating pressures without heavy reliance on credit.
- **Debt Management (Debt Ratio):**
At 51%, SCHHC's debt ratio is in the moderate and stable range, reflecting a balanced use of borrowing to fund operations and capital needs without overleveraging.
- **Revenue Cycle (A/R Days Outstanding):**
A/R performance is at 57 days, slightly above the target range. While collections are functioning, continued attention is needed to bring days closer to benchmark and support stronger cash flow.

SCHHC maintains stable financial health with strong liquidity, balanced debt, and steady revenue cycle performance.

Southern Coos Hospital & Health Center
Statements of Revenues, Expenses, and Changes in Net Position
As of July 31, 2025

	Month Ending 07/31/2025				Month Ending 07/31/2024	Year To Date 07/31/2025				Prior Year To Date 07/31/2024
	Actual	Operating Budget	Actual minus budget	Budget variance	Actual	Actual	Operating Budget	Actual minus budget	Budget variance	Actual
Total Patient Revenue										
Inpatient Revenue	899,551	664,801	234,750	35.3 %	545,154	899,551	664,801	234,750	35.3 %	545,154
Outpatient Revenue	4,302,825	3,767,000	535,826	14.2 %	3,571,296	4,302,825	3,767,000	535,826	14.2 %	3,571,296
Swingbed Revenue	262,365	499,402	(237,038)	(47.5) %	382,267	262,365	499,402	(237,038)	(47.5) %	382,267
Total Patient Revenue	5,464,741	4,931,203	533,538	10.8 %	4,498,717	5,464,741	4,931,203	533,538	10.8 %	4,498,717
 Total Deductions	 2,403,809	 1,876,172	 527,637	 28.1 %	 1,557,676	 2,403,809	 1,876,172	 527,637	 28.1 %	 1,557,676
Revenue Deductions %	44.0 %	38.0 %	6.0 %	15.7 %	34.6 %	44.0 %	38.0 %	6.0 %	15.7 %	34.6 %
Net Patient Revenue	3,060,932	3,055,031	5,901	0.2 %	2,941,041	3,060,932	3,055,031	5,901	0.2 %	2,941,041
Other Operating Revenue	328,464	3,280	325,184	9,913.9 %	16,931	328,464	3,280	325,184	9,913.9 %	16,931
 Total Operating Revenue	 3,389,396	 3,058,311	 331,085	 10.8 %	 2,957,972	 3,389,396	 3,058,311	 331,085	 10.8 %	 2,957,972
 Total Operating Expenses	 2,395,574	 2,207,058	 188,516	 8.5 %	 1,882,821	 2,395,574	 2,207,058	 188,516	 8.5 %	 1,882,821
Total Labor Operating Expenses	2,395,574	2,207,058	188,516	8.5 %	1,882,821	2,395,574	2,207,058	188,516	8.5 %	1,882,821
Total Other Operating Expenses	1,020,234	1,005,295	14,939	1.5 %	784,392	1,020,234	1,005,295	14,939	1.5 %	784,392
Total Operating Expenses	3,415,808	3,212,353	203,455	6.3 %	2,667,213	3,415,808	3,212,353	203,455	6.3 %	2,667,213
 Operating Income / (Loss)	 (26,412)	 (154,042)	 127,630	 (82.9) %	 290,760	 (26,412)	 (154,042)	 127,630	 (82.9) %	 290,760
Net Non Operating Revenue	109,356	113,001	(3,645)	(3.2) %	145,535	109,356	113,001	(3,645)	(3.2) %	145,535
Change In Net Position	82,944	(41,041)	123,985	(302.1) %	436,294	82,944	(41,041)	123,985	(302.1) %	436,294

* Other Operating Income YTD:
- \$328k – OP Pharmacy Revenue

Southern Coos Hospital & Health Center
Statements of Revenues, Expenses & Changes in Net Position
 As of July 31, 2025

	Month Ending 07/31/2025				Month Ending 07/31/2024
	Actual	Operating Budget	Actual minus budget	Budget variance	Actual
Total Patient Revenue					
Inpatient Revenue	899,551	664,801	234,750	35%	545,154
Outpatient Revenue	4,302,825	3,767,000	535,826	14%	3,571,296
Swingbed Revenue	262,365	499,402	(237,038)	-48%	382,267
Total Patient Revenue	5,464,741	4,931,203	533,538	11%	4,498,717
Total Deductions	2,403,809	1,876,172	527,637	28%	1,557,676
Net Patient Revenue	3,060,932	3,055,031	5,901	0%	2,941,041
Other Operating Revenue	328,464	3,280	325,184	9914%	16,931
Total Operating Revenue	3,389,396	3,058,311	331,085	11%	2,957,972
Total Operating Expenses					
Total Labor Expenses					
Salaries & Wages	1,566,650	1,665,069	(98,419)	-6%	1,173,223
Contract Labor	528,636	351,587	177,049	50%	499,999
Benefits	300,288	190,402	109,886	58%	209,599
Total Labor Expenses	2,395,574	2,207,058	188,516	9%	1,882,821
Purchased Services	211,581	343,046	(131,465)	-38%	293,713
Drugs & Pharmaceuticals	220,544	119,266	101,278	85%	102,854
Medical Supplies	111,902	100,436	11,466	11%	104,043
Other Supplies					
4300 - OTHER NON-MEDICAL SUPPLIES	138	6,520	(6,382)	-98%	2,442
4301 - OFFICE SUPPLIES	7,219	4,291	2,928	68%	5,287
4304 - LAUNDRY & LINENS / NONFOOD SUPPLIES	13,734	2,615	11,119	425%	3,670
4398 - MINOR EQUIPMENT	21,671	28,992	(7,321)	-25%	4,134
4399 - INVENTORY ADJUSTMENT	(82)	-	(82)	100%	(15,533)
4505 - CATERING & FOOD	8,565	10,761	(2,196)	-20%	11,227
Other Supplies	51,245	53,179	(1,934)	-4%	11,227
Lease & Rental Expense	1,267	2,387	(1,121)	-47%	754
Repairs & Maintenance	14,568	31,187	(16,617)	-53%	19,682

Southern Coos Hospital & Health Center
Statements of Revenues, Expenses & Changes in Net Position
 As of July 31, 2025

	Month Ending 07/31/2025				Month Ending 07/31/2024
	Actual	Operating Budget	Actual minus budget	Budget variance	Actual
Other Expenses					
4302 - POSTAGE & FREIGHT	5,312	5,350	(38)	-1%	4,024
4303 - COMPUTER & IT EQUIPMENT	15,462	-	15,461	100%	-
4501 - MARKETING - ALLOWABLE (MCR)	6,709	8,564	(1,855)	-22%	5,906
4502 - MARKETING - NON ALLOWABLE	2,853	8,502	(5,649)	-66%	9,392
4504 - PRINTING & COPYING	55	-	55	100%	-
4700 - OTHER EXPENSES	117	(5,065)	5,182	-102%	-
4702 - LICENSING & GOVERNMENT FEES	15,719	19,236	(3,517)	-18%	14,612
4703 - DUES & SUBSCRIPTIONS	117,888	64,190	53,698	84%	31,061
4704 - EMPLOYEE RELATIONS ACTIVITIES - MEETINGS	2,577	7,503	(4,926)	-66%	593
4705 - TRAINING / CONFERENCE FEES	-	19,703	(19,703)	-100%	12,574
4706 - TRAVEL & LODGING	11,157	8,187	2,971	36%	13,029
4711 - EQUIPMENT RENTAL	-	833	(834)	-100%	-
4720 - DONATIONS / GRANTED FUNDS	500	-	500	100%	-
4797 - MISC TAX (A/P)	5	-	5	100%	-
4798 - BANK & COLLECTION FEES	14,155	5,618	8,537	152%	5,789
4799 - MISCELLANEOUS EXPENSE	-	(13,829)	13,829	-100%	2,247
Other Expenses	192,509	128,792	63,716	50%	99,227
Utilities	32,056	31,746	310	1%	26,869
Insurance	23,629	20,954	2,674	13%	21,508
Depreciation & Amortization	160,933	174,302	(13,368)	-8%	104,515
Total Operating Expenses	3,415,808	3,212,353	203,455	6%	2,667,213
Operating Income / (Loss)	(26,412)	(154,042)	127,630	-83%	290,760
Net Non Operating Revenue					
Property Taxes	96,792	98,219	(1,427)	-2%	78,913
Non-Operating Revenue	4,673	9,422	(4,749)	-50%	14,683
Interest Expense	(50,084)	(33,436)	(16,648)	50%	(22,306)
Investment Income	59,660	38,796	20,864	54%	74,245
Gain / Loss on Asset Disposal	(1,685)	-	(1,685)	100%	-
Net Non Operating Revenue	109,356	113,001	(3,645)	-3%	145,535
Change In Net Position	82,944	(41,041)	123,985	-302%	436,294

Southern Coos Hospital & Health Center
Balance Sheet Summary
Month Ending July 31, 2025

	Year To Date 07/31/2025	Year Ending 06/30/2025		Year Ending 06/30/2024
	Current Year Balance	Prior Year	Current vs. Prior	Actual
Total Assets				
Total Current Assets				
Cash and Cash Equivalents	11,054,147	11,239,810	(185,662)	11,721,015
Net Patient Accounts Receivable	4,429,256	3,994,422	434,834	3,907,633
Other Assets	1,195,589	1,030,033	165,555	798,202
Total Current Assets	16,678,992	16,264,265	414,727	16,426,850
Net PP&E	8,615,271	8,708,314	(93,043)	6,423,952
Total Assets	25,294,263	24,972,579	321,684	22,850,802
Total Liabilities & Net Assets				
Total Liabilities				
Current Liabilities	8,664,719	8,391,023	273,696	4,490,006
Total Long Term Debt, Net	4,323,981	4,358,938	(34,956)	4,535,131
Total Liabilities	12,988,700	12,749,961	238,740	9,025,137
Total Net Assets	12,305,563	12,222,765	82,797	13,825,665
Total Liabilities & Net Assets	25,294,263	24,972,726	321,537	22,850,802
Cash to Debt Ratio	0.85	0.88	(0.03)	1.30
Debt Ratio	0.51	0.51	0.00	0.39
Current Ratio	1.92	1.94	(0.02)	3.66
Debt to Capitalization Ratio	0.26	0.24	0.02	0.25

Southern Coos Hospital & Health Center

Balance Sheet

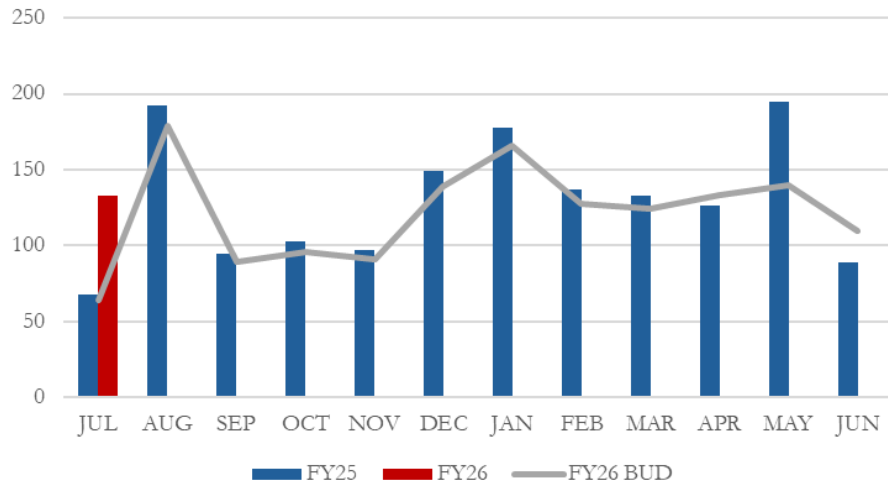
	Year To Date 07/31/2025	Year Ending 06/30/2025		Year Ending 06/30/2024
	Current Year Balance	Prior Year	Change	Actual
Total Assets				
Total Current Assets				
Cash and Cash Equivalents				
Cash Operating	1,123,645	1,335,553	(211,909)	1,400,507
Investments - Unrestricted	4,010,559	3,984,314	26,247	4,076,428
Investments - Reserved Certificate of Deposit	3,186,239	3,186,238	-	3,510,375
Investment - USDA Restricted	233,704	233,705	-	233,705
Investment - Board Designated	2,500,000	2,500,000	-	2,500,000
Cash and Cash Equivalents	11,054,147	11,239,810	(185,662)	11,721,015
Net Patient Accounts Receivable				
Patient Accounts Receivable				
1101 - A/R PATIENT - EPIC	8,689,765	7,850,956	838,808	-
1102 - A/R PATIENT - CPSI / EVIDENT	735,482	723,680	11,802	7,228,690
1103 - A/R - PHARMACY RETAIL OP	40,108	-	40,109	-
2003 - REFUNDS - PATIENT / INSURANCE	90	-	89	(192)
Patient Accounts Receivable	9,465,445	8,574,636	890,808	7,228,499
Allowance for Uncollectibles				
1121 - ALLOW FOR UNCOLL - EPIC	(5,029,679)	(4,598,461)	(431,219)	-
1122 - ALLOW FOR UNCOLL - CPSI	(735,484)	(723,679)	(11,803)	(3,840,559)
1130 - WRITE OFF RECOVERY	(736,240)	(723,288)	(12,952)	(554,030)
1132 - BAD DEBT W/O - NON-MEDICARE	1,465,214	1,465,214	-	1,073,723
Allowance for Uncollectibles	(5,036,189)	(4,580,214)	(455,974)	(3,320,866)
Net Patient Accounts Receivable	4,429,256	3,994,422	434,834	3,907,633
Other Assets				
Other Receivables	1,200	29,598	(28,398)	21,045
Inventory	360,540	369,514	(8,975)	230,930
Prepaid Expense	693,078	572,290	120,788	465,262
Property Tax Receivable	140,771	58,631	82,140	80,965
Other Assets	1,195,589	1,030,033	165,555	798,202
Total Current Assets	16,678,992	16,264,265	414,727	16,426,850
Net PP&E				
Land	461,528	461,528	-	461,527
Property and Equipment	24,299,708	24,224,122	75,585	20,435,404
Accumulated Depreciation	(16,379,257)	(16,235,298)	(143,959)	(15,194,163)
Construction In Progress	233,292	267,962	(24,669)	721,184
Net PP&E	8,615,271	8,708,314	(93,043)	6,423,952
Total Assets	25,294,263	24,972,579	321,684	22,850,802

Southern Coos Hospital & Health Center

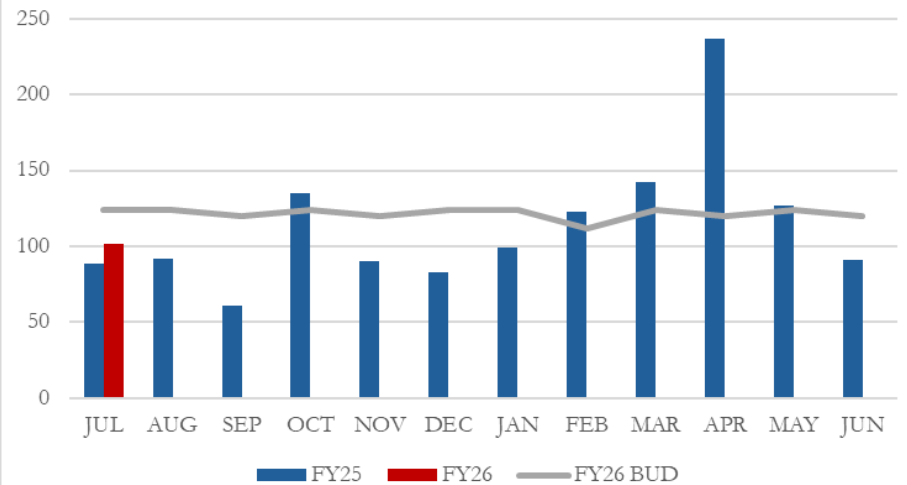
Balance Sheet

	Year To Date 07/31/2025	Year Ending 06/30/2025		Year Ending 06/30/2024
	Current Year Balance	Prior Year	Change	Actual
Total Liabilities & Net Assets				
Total Liabilities				
Current Liabilities				
Accounts Payable	1,664,885	1,517,014	147,871	1,344,652
Accrued Payroll and Benefits	1,923,308	1,748,456	174,853	1,411,152
Line of Credit Payable	3,139,377	3,139,376	-	-
Interest and Other Payable	291,293	278,968	12,325	100,992
Estimated Third Party Payor Settlements	1,021,929	1,050,372	(28,443)	997,650
Current Portion of Long Term Debt	623,927	656,837	(32,910)	635,560
Current Liabilities	8,664,719	8,391,023	273,696	4,490,006
Total Long Term Debt, Net				
Long Term Debt	4,323,981	4,358,938	(34,956)	4,535,131
Total Long Term Debt, Net	4,323,981	4,358,938	(34,956)	4,535,131
Total Liabilities	12,988,700	12,749,961	238,740	9,025,137
Total Net Assets	12,305,563	12,222,618	82,945	13,825,665
Total Liabilities & Net Assets	25,294,263	24,972,579	321,684	22,850,802

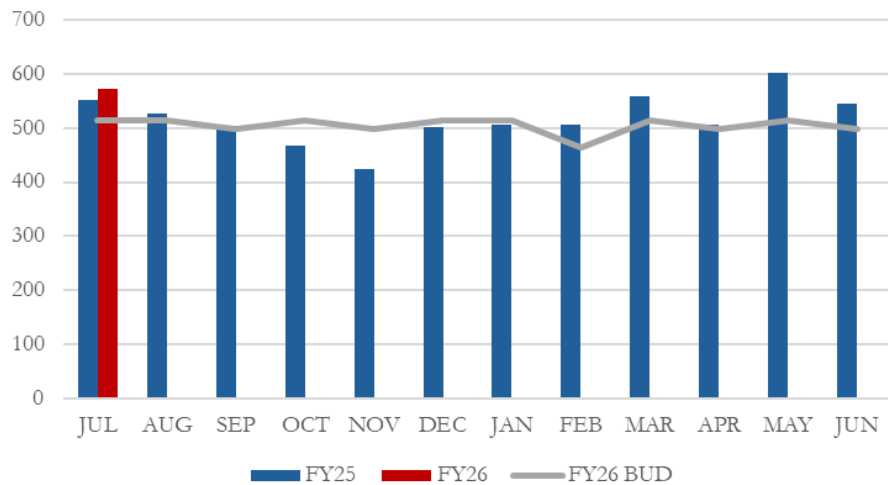
IP Days



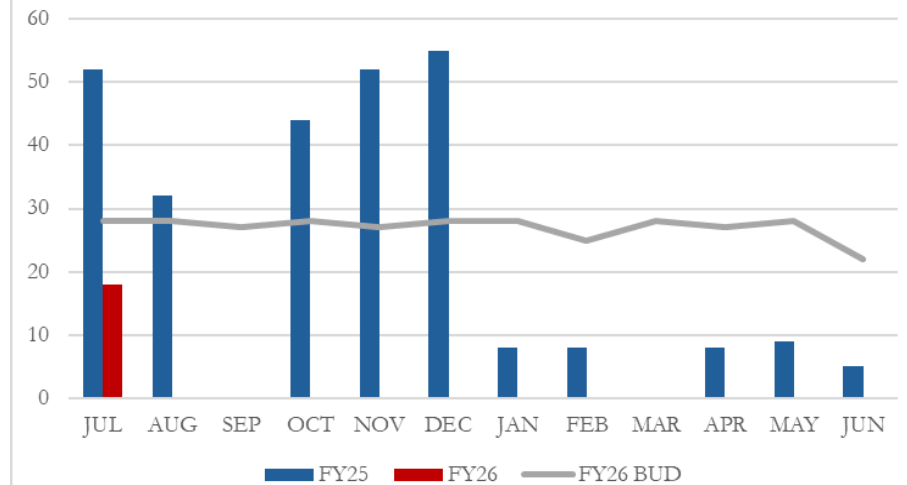
Swing Bed Days



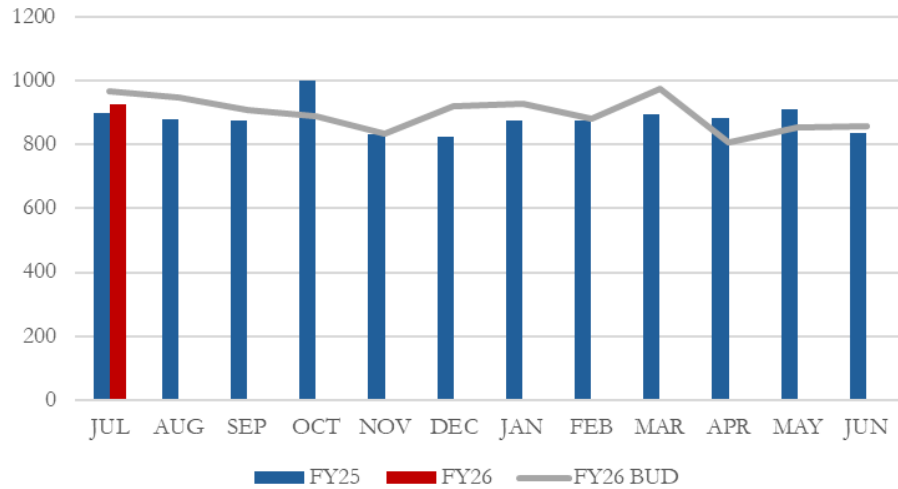
ER Visits



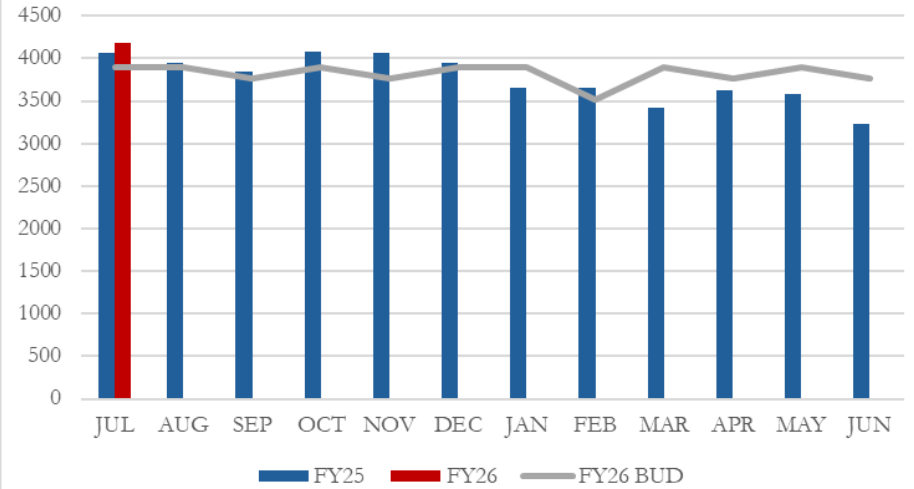
Surgery Patients



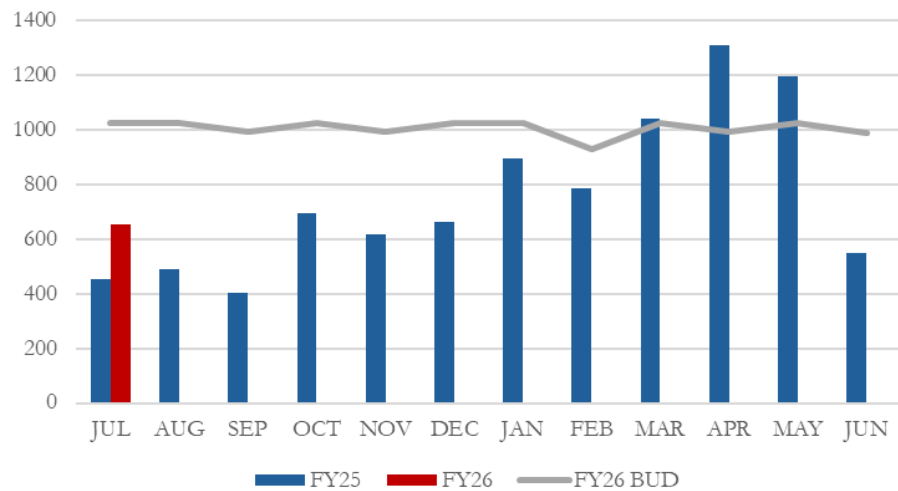
Imaging Visits



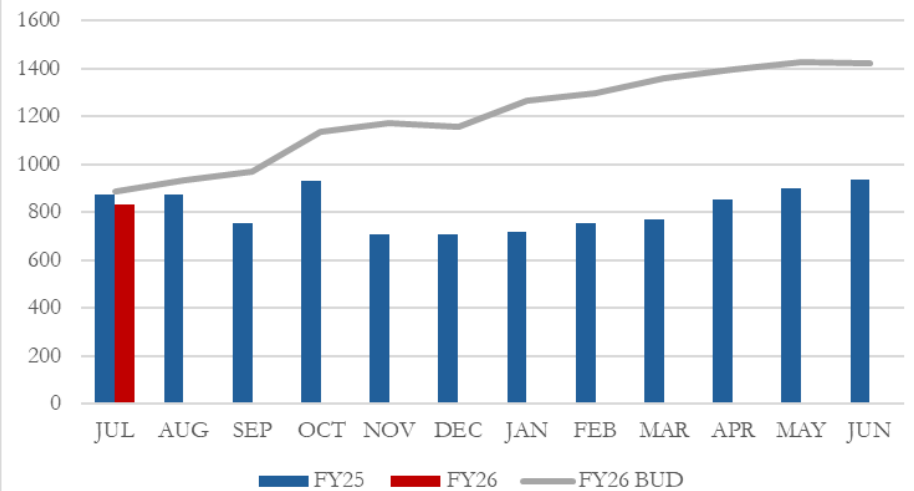
Lab Tests



RT Procedures



Clinic Visits



Southern Coos Hospital & Health Center

Volume and Key Performance Ratios
For The Period Ending July 2025

		Month					Year to Date				
		Variance to					Variance to				
		Actual	Budget	Prior Year	Bud	Prior Year	Actual	Budget	Prior Year	Bud	Prior Year
Volume Summary	IP Days	133	64	68	109.3%	95.6%	133	64	68	109.3%	95.6%
	Swing Bed Days	102	186	89	-45.2%	14.6%	102	186	89	-45.2%	14.6%
	Total Inpatient Days	235	250	157	-5.8%	49.7%	235	250	157	-5.8%	49.7%
	Avg Daily Census	7.6	8.1	5.1	-5.8%	49.7%	7.6	8.1	5.1	-5.8%	49.7%
	Avg Length of Stay - IP	2.5	3.0	3.2	-17.9%	-23.9%	2.5	3.0	3.2	-17.9%	-23.9%
	Avg Length of Stay - SWB	6.8	8.9	12.7	-23.2%	-46.5%	6.8	8.9	12.7	-23.2%	-46.5%
	ED Registrations	587	514	551	14.2%	6.5%	587	514	551	14.2%	6.5%
	Clinic Registrations	833	332	590	150.9%	41.2%	833	332	590	150.9%	41.2%
	Ancillary Registrations	1,601	615	1,143	160.3%	40.1%	1,143	615	1,143	85.9%	0.0%
	Total OP Registrations	3,021	1,461	2,284	106.8%	32.3%	2,563	1,461	2,284	75.4%	12.2%

Key Income Statement Ratios	Gross IP Rev/IP Day	6,764	10,459	8,017	-35.3%	-15.6%	6,764	6,764	8,017	0.0%	-15.6%
	Gross SWB Rev/SWB Day	2,572	2,685	4,295	-4.2%	-40.1%	2,572	2,685	4,295	-4.2%	-40.1%
	Gross OP Rev/Total OP Registrations	1,424	3,070	1,564	-53.6%	-8.9%	1,424	3,070	1,564	-53.6%	-8.9%
	Collection Rate	56.0%	62.0%	65.4%	-9.6%	-14.3%	56.0%	62.0%	65.4%	-9.6%	-14.3%
	Compensation Ratio	70.7%	72.2%	63.7%	-2.1%	11.0%	70.7%	72.2%	63.7%	-2.1%	11.0%
	OP EBIDA Margin \$	134,521	20,260	395,275	564.0%	-66.0%	134,521	20,260	395,275	564.0%	-66.0%
	OP EBIDA Margin %	4.0%	0.7%	13.4%	499.1%	-70.3%	4.0%	0.6%	13.4%	564.0%	-70.3%
	Total Margin	2.4%	-1.3%	14.7%	-282.4%	-83.4%	2.4%	-1.3%	14.7%	-282.4%	-83.4%

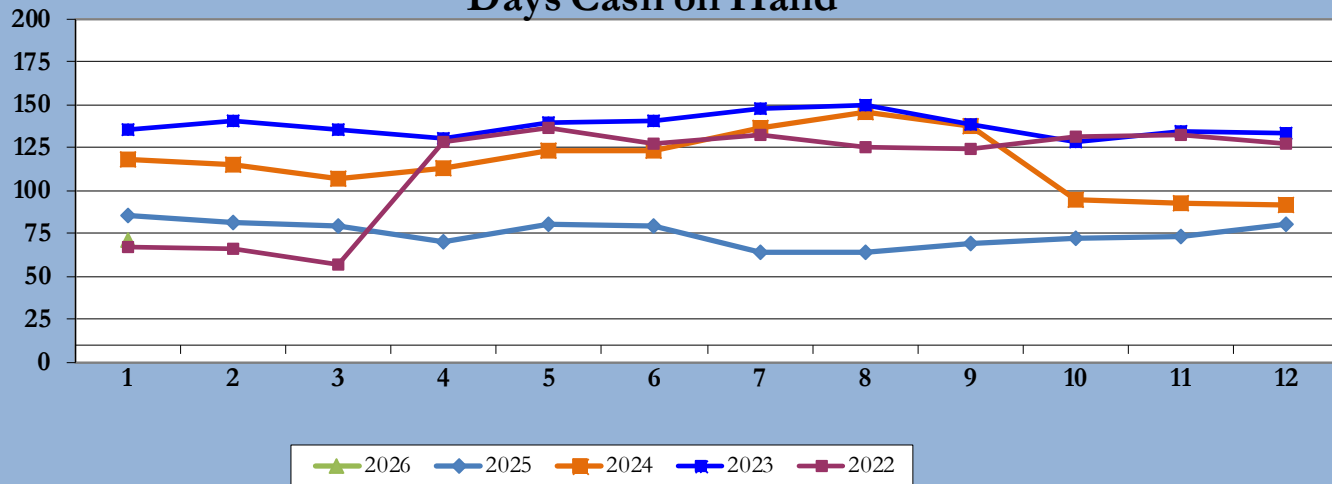
Key Liquidity Ratios	Days Cash on Hand	71.6	80.0	85.4	-10.5%	-16.2%	
	AR Days Outstanding	57.2	50.0	49.8	14.4%	14.8%	

Southern Coos Hospital & Health Center

Data Dictionary

Volume Summary	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
	Avg Daily Census	Total Bed Days / # of Days in period (Mo or YTD)
	Avg Length of Stay - IP	Total Inpatient Days / # of IP Discharges
	Avg Length of Stay - SWB	Total Swing Bed Days / # of SWB Discharges
	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
Key Income Statement Ratios	Gross IP Rev/IP Day	Avg. gross patient charges per IP patient day
	Gross SWB Rev/SWB Day	Avg. gross patient charges per SWB patient day
	Gross OP Rev/Total OP Registrations	Avg. gross patient charges per OP visit
	Collection Rate	Net patient revenue / total patient charges
	Compensation Ratio	Total Labor Expenses / Total Operating Revenues
	OP EBIDA Margin \$	Operating Margin + Depreciation + Amortization
	OP EBIDA Margin %	Operating EBIDA / Total Operating Revenues
	Total Margin (%)	Total Margin / Total Operating Revenues
Key Liquidity Ratios	Days Cash on Hand	Total unrestricted cash / Daily OP Cash requirements
	AR Days Outstanding	Gross AR / Avg. Daily Revenues

July 2025 Days Cash on Hand



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

Benchmark

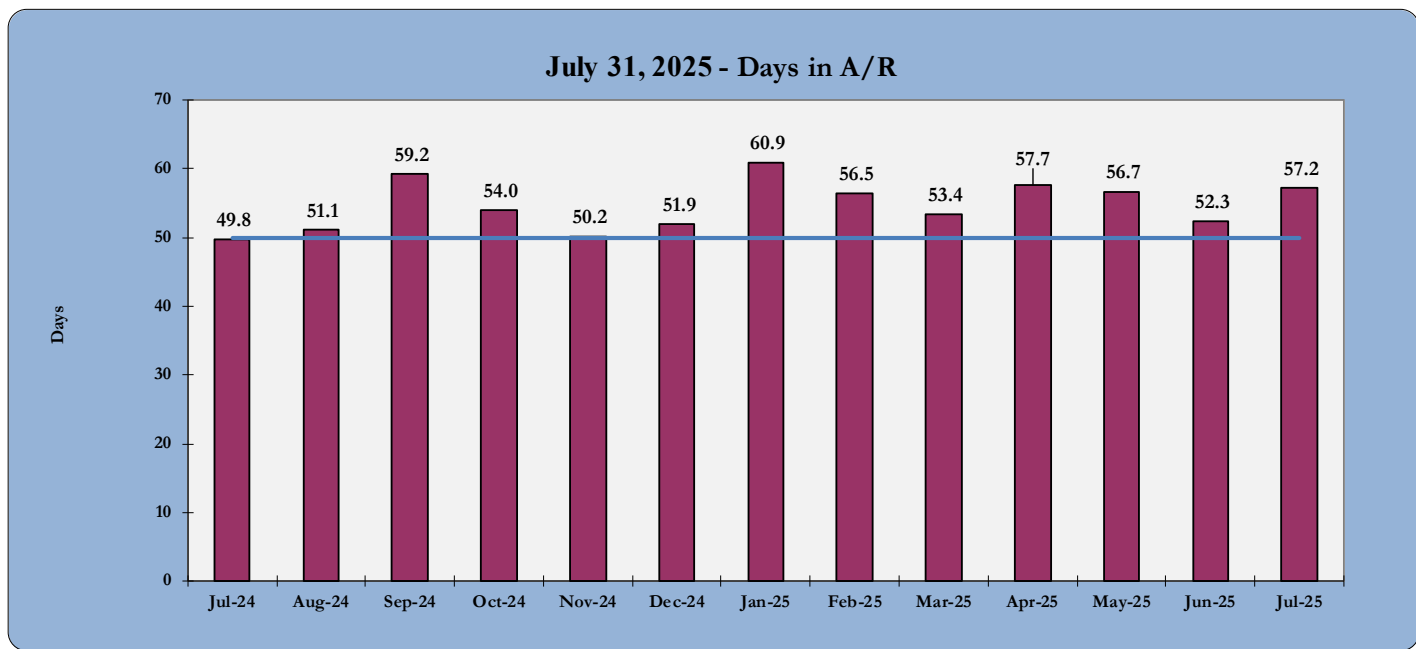
80 Days

How ratio is used:

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.

Year	Average
2026	71.6
2025	74.8
2024	116.3
2023	137.8
2022	113.0

Fiscal	<u>Jul</u>	<u>Aug</u>	<u>Sep</u>	<u>Oct</u>	<u>Nov</u>	<u>Dec</u>	<u>Jan</u>	<u>Feb</u>	<u>Mar</u>	<u>Apr</u>	<u>May</u>	<u>Jun</u>
2026	71.6											
2025	85.4	81.4	79.0	70.5	79.9	79.7	64.2	63.7	68.6	71.9	72.8	80.1
2024	117.7	114.5	106.8	113.1	123.1	123.3	136.1	145.3	137.0	94.5	92.8	91.4
2023	135.9	140.8	135.2	130.5	139.4	140.7	147.8	149.7	138.9	127.8	134.2	133.3
2022	67.2	66.2	56.6	128.6	136.1	127.4	132.1	125.1	124.6	131.5	132.8	127.5



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 **50**

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.

	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25
A/R (Gross)	7,194,350	7,269,865	8,263,819	7,671,394	7,122,984	7,761,771	9,505,725	9,372,293	8,762,600	9,509,727	9,356,665	8,574,636	9,425,337
Days in AR	49.8	51.1	59.2	54.0	50.2	51.9	60.9	56.5	53.4	57.7	56.7	52.3	57.2
	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25
A/R (Gross)	7,194,350	7,269,865	8,263,819	7,671,394	7,122,984	7,761,771	9,505,725	9,372,293	8,762,600	9,509,727	9,356,665	8,574,636	9,425,337
Days in Month	31	31	30	31	30	31	31	28	31	30	31	30	31
Monthly Revenue	4,498,717	4,289,700	4,043,588	4,728,499	4,140,953	4,891,719	5,318,712	4,720,191	4,720,191	5,229,933	5,239,205	4,451,443	5,464,741
3 Mo Avg Daily Revenue	144,429	142,255	139,478	141,976	141,902	149,578	155,993	165,896	163,990	164,835	165,101	163,962	164,732
Days in AR	49.8	51.1	59.2	54.0	50.2	51.9	60.9	56.5	53.4	57.7	56.7	52.3	57.2

SOUTHERN COOS HOSPITAL & HEALTH CENTER
CAPITAL PURCHASES SUMMARY FY2026

Approved Projects:							
Project Name	Department	Budgeted Amount	Total Spending	Amount Remaining	Status	Notes	

Budgeted Non-Threshold Capital Purchases (<\$15,000)

Light Source	Surgery	14,000					
Glucose Monitors Hospital Grade	Lab	13,000					
Ortho MTS Workstation (Blood Bank)	Lab	8,000					
Centrifuges (x4)	Lab	8,000					
Software update for current HT1 ventilator	Respiratory	7,000					
Blanket Warmer	Clinic	7,000					
A1C for Clinic	Lab	6,000					
Exam Tables	Pain Management	6,000					
ID TipMaster	Lab	5,000					

Un-Budgeted Non-Threshold Capital Purchases (<\$15,000)

Misc Projects		112,000					

Totals - Non Threshold Projects	186,000	-	-
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SOUTHERN COOS HOSPITAL & HEALTH CENTER
CAPITAL PURCHASES SUMMARY FY2026

Approved Projects:

Project Name	Department	Budgeted Amount	Total Spending	Amount Remaining	Status	Notes
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Budgeted Threshold Projects (>\$15,000)

Business Office Remodel	Engineering	600,000				
MM Expansion	Engineering	600,000				
Lab Expansion	Engineering	600,000				
Air Handler repairs and upgrade	Engineering	150,000				
Pyxis Anesthesia System	Pharmacy	130,000				
Building Automation (HVAC)	Engineering	120,000				
Hamilton C1 X4 Invasive/NON-invasive/High flow	Respiratory	74,000				
Mindray US Machine	ED	70,000				
Transport Vehicle	Admin	65,000				
Ultrasound	Pain Management	55,000				
Parking Lot Resurface	Engineering	50,000				
Unit Room Remodels	Med Surg	50,000				
ED room 3 safety renovation project	ED	40,000				
Floor Replacement for Various Departments	Engineering	36,000				
ConMed Insuflation (Working on Quote)	Surgery	35,000				
Trailers	Engineering	30,000				
Level 1 rapid infuser fluid warmer	ED	30,000				
Cardiac Monitors	Med Surg	29,000				
Avantos RFA machine (Meeting with Rep on 4/7)	Surgery	29,000				
Primary Firewall Replacement	Information Systems	27,000				
Vapotherm High Flow X2	Respiratory	27,000				
Biosafety Cabinet Type II Class 2B (Hood)	Lab	25,000				
Sonosite Ultrasound Machine	Surgery	25,000				

Rain Gutters for Hospital (Commercial Grade)	Engineering	22,000				
Blood Culture Incubator w/ Synapsys (BD FX 40)	Lab	21,000				
Heated Chilled Meal Cart	Dietary	20,000				
Louvered panel wall hanging bin storage system.	Materials	20,000				
Backup Troponin System	Lab	20,000				
Conference Room Upgrade	Information Systems	20,000				
DataCenter Battery Backup Replacement	Information Systems	19,000				
Storage Server Replacement	Information Systems	15,000				
New desk/workspace in ER	ED	15,000				
Midmark EKGs	EKG	15,000				
Camera Control Unit	Surgery	15,000				
Instrumentation/Sets for Simmonds	Surgery	15,000				

Un-Budgeted Threshold Projects (>\$15,000)

Totals - Threshold Projects

3,114,000	-	-
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Grand Total

3,300,000	-	-
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