



**REGULAR MEETING OF THE BOARD OF DIRECTORS
AGENDA**

**Thursday, March 25, 2021 at 9:30 a.m.
Portola Medical Clinic Conference Room, Portola, CA**

ATTENTION: As permitted by Governor Newsom’s Executive Order N-29-20 proclaiming a State of Emergency in the State of California, the March 25, 2021 Board of Directors meeting will be held in a virtual setting. The Board meeting location at the EPHC Clinic Conference Room will not be accessible to the public. The meeting is accessible to the public via Hangouts Meet (See the connection information below). Public comment will be accepted on any item on the agenda as called for by the Board chair until the close of public comment for each item.

Any person with a disability may submit a request for reasonable modification or accommodation to the above-described means for accessing and offering comment at the meeting to Jessica Folchi at jessica.folchi@ephc.org who will swiftly resolve such request.

The Board meeting is accessible to the public via live streaming at: meet.google.com/wii-fpej-upu
Or by phone at: 1.407.440.0269 PIN: 720 083 054#

	<u>Presenter(s)</u>	<u>I/D/A</u>	<u>Page(s)</u>
1. <u>Call to Order</u>	Gail McGrath	A	
2. <u>Roll Call</u>	Gail McGrath	I	
3. <u>Board Comments</u>	Board Members	I/D	
• Deletions/Corrections to the Posted Agenda			
4. <u>Consent Calendar</u>	Gail McGrath	I/D/A	
A. Agenda			1-2
B. Meeting Minutes of 2.25.21 Board Meeting			3-6
C. Meeting Minutes of 2.25.21 Finance Committee			7-8
D. Meeting Minutes of 2.25.21 Organizational Meeting			9-10
5. <u>Auxiliary Report</u>	Gail McGrath	I/D	
6. <u>Staff Reports</u>			
A. Infection Control/COVID-19	Michelle Romero	I/D	
B. Chief Nursing Officer Report	Penny Holland	I/D	
C. HR Director Report	Lori Tange	I/D	
D. Chief Financial Officer Report	Katherine Pairish	I/D	11-22
E. SNF Director of Nursing Report	Lorraine Noble	I/D	
7. <u>Chief Executive Officer Report</u>	Doug McCoy	I/D/A	23-30
8. <u>Policies</u>		I/D/A	31-32
A. Policy Review			
The CAH Committee recommends the following for approval by the Board of Directors:			
<u>Annual Policy Review</u>			
• Admitting, Laboratory, Pharmacy, and Skilled Nursing.			



**REGULAR MEETING OF THE BOARD OF DIRECTORS
AGENDA**

Thursday, March 25, 2021 at 9:30 a.m.

Portola Medical Clinic Conference Room, Portola, CA

9. Committee Reports Board Members I/D
A. Finance Committee

10. Discussion on Proposed Industrial Mine/Asphalt in Portola I/D

This is an opportunity for members of the public to address the Board on this item. Please limit your comments to three minutes. Any supporting documents can be submitted to Clerk of the Board by noon on Wednesday, March 24th to be distributed to the Board.

11. Public Comment Members of the Public I

This is an opportunity for members of the public to address the Board on items which are not on the agenda. Comments are limited to three minutes ordinarily, unless the Board Chair indicates a different amount will be allotted. Comments should be limited to matters within the jurisdiction of the Board. The Board Chair may choose to acknowledge the comment, or, where appropriate, briefly answer a question, refer the matter to staff, or set the item for discussion at a future meeting. Like any other member of the hospital district, an employee or a contracted employee can address the Board in the proper forum at the proper time. However, the Board will not hear personnel issues or grievances, or matter that affect the employees personally.

12. Organizational Re-appointment I/D/A

A. Revisit possible election of officers continued from previous Board Meeting (2.25.21)

13. Board Closing Remarks Board Members I/D

14. Closed Session Gail McGrath I/D/A

A. Public Employee Performance Evaluation (Government Code Section 54957)
CEO

B. Hearing (Health and Safety Code 32155)

Subject Matter: Staff Privileges

• **Provisional 1 Year Appointment**

- Sara Fletcher OB/Gynecology
- Claire Kerney Orthopedics
- Clara Gordon Orthopedics

• **Courtesy 2 Year Re-Appointment**

- Dr. Benjamin Hunt, M.D. Surgery

15. Open Session Report of Actions Gail McGrath I
Taken in Closed Session

16. Adjournment Gail McGrath A

The next regularly scheduled meeting of the Board of Directors of Eastern Plumas Health Care is April 22, 2021 at the Portola Medical Clinic Conference Room, 480 1st Avenue, Portola, CA 96122.

**EASTERN PLUMAS HEALTH CARE DISTRICT
REGULAR MEETING OF THE BOARD OF DIRECTORS
MINUTES**

Thursday, February 25, 2021 at 9:30 a.m.

1. Call to Order

Meeting was called to order at 9:33 a.m.

2. Roll Call

Board: Gail McGrath, Board Chair; Paul Swanson, M.D., Vice Chair; Teresa Whitfield, Board Member; Linda Satchwell, Board Member; and Augustine Corcoran, Board Member.

Staff in attendance: Doug McCoy, CEO; Katherine Pairish, CFO; Lori Tange, Human Resources Director; and Jessica Folchi, Executive Assistant

3. Board Comments

Chairman McGrath commented on the lovely, sunny weather. Director Whitfield mentioned a recall on an IV fusion pump. Several Board members commented on the crowd of 50+ people that were gathered in town, unmasked, on Tuesday evening for a concert.

4. Public Comment

No comment was received.

5. Consent Calendar

ACTION: Motion was made by Director Whitfield, seconded by Director Swanson to approve all items on the consent calendar including resolutions 289, 290, and 291.

AYES: Directors McGrath, Satchwell, and Corcoran

NAYS: None

6. Oath of Office

A. Augustine Corcoran took the Oath of Office to serve on the Board of Directors for the remainder of the term expiring December 2, 2022.

7. Auxiliary Report

Director McGrath reported that the Nifty Thrifty is open Wednesday through Sunday from 10 am to 5 pm. Nifty Thrifty is in need of more volunteers. Nifty Thrifty and the Auxiliary just donated enough money to purchase a new Dexa Bone Density Machine.

8. Staff Reports

Staff reported on COVID-19 response and actions being taken.

- Infection Control/COVID-19 Michelle Romero
 - Doug McCoy reported from Michelle Romero as she is administering vaccines. There have been 195 cases in California of the UK variant of COVID. For the South African variant, 22 cases in the US with 2 in California. And for the Brazil variant, 5 cases reported in the US.
- Chief Nursing Officer Report Penny Holland
 - Penny Holland was also administering vaccines so Doug McCoy presented. Currently, still separating COVID patients from inpatients and swing patients. The team is trying to find safe ways to admit more swing patients based on our layout. Director McGrath commented that the vaccination clinics at the Graeagle Fire Hall have been going very smoothly and everyone is happy.

Regular Meeting of the Board of Directors of Eastern Plumas Health Care
February 25, 2021 MINUTES - Continued

- HR Director Report Lori Tange
 - Lori Tange reported that HR is working on staffing initiatives with management and creative ways to recruit difficult to staff positions. Many new employees have been on boarded in the last few weeks.
- Chief Financial Officer Report Katherine Pairish
 - See attached January financial reports.
- SNF Director of Nursing Report Lorraine Noble
 - Lorraine Noble was unable to attend and Doug McCoy presented that CMS is holding off on annual survey until mid to late March or even later. SNF had a short survey recently and with no deficiencies. Visitations are to begin again soon as well as the CNA training program and respite care program. Almost all residents have been vaccinated.

9. Chief Executive Officer Report

Doug McCoy

OPERATIONAL PLAN OVERVIEW:

EPHC is trending well with the operational plan for the final two quarters of the fiscal year that was presented on February 4th. With few exceptions all February action items are either completed or in progress and listed in the attachment for Board review. Overall SNF census has increased by 3 ADC since the beginning of the month and outpatient, ancillary, and clinic volume remains strong. We are pending receipt of the plan proposals from Aspen Street for the ED expansion project and Loyalton clinic building relocation opportunity.

The 'Ignite the Patient Experience' training for all EPHC staff and providers which was planned for 3/2-3/3 was postponed due to ongoing COVID restrictions. It has been rescheduled for 5/18-5/19 which will coincide with our 3-year leadership strategic planning event. We are hopeful that the COVID restrictions will not limit the onsite training planned for that date. A patient experience portal has been added to the EPHC website for customer feedback and testimonials. We will post at least 10 testimonial statements monthly both online and throughout the EPHC campus.

Telemed units were installed at both SNF campuses for behavioral health therapy as well as patient/visitor interaction. EPHC will be provided with a demonstration on the EPIC EMR system on 2/26, and we have already received a demonstration and cost estimate for an upgrade to our AHT SNF software for electronic documentation.

There has been a change in Clinic leadership with Rhonda Grandi retiring after 5 years of service to EPHC. Rhonda has made significant operational and financial improvements to the clinics over her tenure and we appreciate her dedicated service to our organization. In the interim I will be overseeing clinic operations and working directly with Dr. Stoll and Christina Potter until a new director has been hired. Additional clinic recruitment continues for a front office lead and PA/NP with strong candidates currently undergoing final interviews.

The COVID community vaccine program continued in February with 64 residents (age 75+) receiving both 1st and 2nd doses, and 190 residents receiving their initial dose. 240 doses are expected to arrive on campus this week based on weather issues in the Midwest, and it is anticipated that all 75+ residents requesting vaccination will be completed this week. Public Health has also been vaccinating teachers and child care workers during this period. 5200 letters were mailed from EPHC to community members outlining the process for vaccine registration, vaccine information, and FAQs regarding immunization. We anticipate

community members age 65+ will begin receiving vaccinations as early as the 1st week of March (pending State receipt and distribution).

We are currently evaluating two new programs to add to our community offerings. An initial presentation has been made by Psychiatric Medical Care to provide outpatient group behavioral health services in conjunction with our current behavioral health program. This program would include both onsite and virtual group therapy sessions three times per week overseen by a psychiatrist and LCSW. The program will require a space allocation which is currently under review. We are also reviewing a community health program utilizing our EMT staff to provide home based health checks/screenings on patients at high risk due to significant medical issues. A similar program is being utilized through PDH with a high level of success.

EPHC would like to thank the Auxiliary for their generous donation to assist us in replacing our DEXA bone density scanner. This is a critical part of our radiology services, and we appreciate their ongoing support of our campus.

QUALITY/REGULATORY:

An abbreviated standard SNF survey was conducted on January 29th. No deficiencies were identified. CMS/CDPH continues to hold all annual surveys due to COVID restrictions. Life safety and clinical documentation reviews continue in order to prevent or reduce deficiencies per our operational plan.

10. Policies

Director Whitfield asked for clarification on three policies: Hand Hygiene, MRSA Survey Program, and High Risk Medication. They are approved after a second consideration. All other policies presented were approved.

ACTION: Motion was made by Director McGrath, seconded by Director Satchwell to approve the policies as submitted.

AYES: Directors Whitfield, Corcoran, and Swanson.

NAYS: None

11. Committee Reports

A. Finance Committee: Director Swanson reported that revenue was under by about \$360,000 for month with volume down as well. But the Intergovernmental transfer is greater than expected.

12. Board Closing Remarks

Director McGrath remarked that things are coming along well. Doug has been here for awhile now and that she is impressed with the timelines and strategic plans.

Open Session recessed at 10:33 a.m.

Board moved to Organizational Meeting Agenda and then recessed into Closed Session.

13. Closed Session

A. Public Employee Performance Evaluation (Government Code Section 54957)
Subject Matter: CEO
Discussion was held on a privileged item.

B. Hearing (Health and Safety Code 32155)
Subject Matter: Staff Privileges

**EASTERN PLUMAS HEALTH CARE DISTRICT
MEETING OF THE STANDING FINANCE COMMITTEE
OF THE BOARD OF DIRECTORS
MINUTES**

Thursday, February 25, 2021 at 8:30 a.m.

1. Call to Order

Meeting was called to order at 8:35 a.m.

2. Roll Call

Present: Paul Swanson, M.D., Board Member

Staff in attendance: Doug McCoy, CEO; Katherine Pairish, CFO; and Jessica Folchi, Executive Assistant

3. Consent Calendar

The consent calendar and minutes were approved as submitted.

Motion: Doug McCoy, Seconded by: Director Swanson

4. Board Comments

None.

5. Public Comments

None.

6. CFO Report

Report of January Financials

Summary

Total Patient Revenue for the month of January was under budget by \$360,276. Total Operating Expenses for the month of January were over budget by \$23,452. Year-to-date Net Loss was \$496,681. We budgeted for a Net Loss of \$2,108,153. PRIME IGT came back \$1,262,250 greater than what was budgeted and Contractual Adjustments were less than budget by \$523,245. Both of these had a positive impact on the bottom line for the seven months ended January 31, 2021.

Revenues

Year-to-Date Inpatient Revenue was under budget by \$251,427. Outpatient Revenue was over budget by \$225,956. Clinic Revenue was under budget by \$98,943.

Expenses

Salaries and Benefits: Year-to-Date Combined Salaries and Benefits were over budget by \$48,594.

Professional Fees: Year-to-Date Professional Fees were under budget by \$97,378.

Repairs & Maintenance: Year-to-Date Repairs & Maintenance were under budget by \$182,593.

Supplies: Year-to-Date Supplies were over budget by \$20,439.

Purchased Services: Year-to-Date Purchased Services were over budget by \$426,378. This included architectural fees, payments to our outside lab for COVID testing and travelers.

Depreciation Expense: Year-to-Date Depreciation Expense was under budget by \$10,699.

Meeting of the Standing Finance Committee of Eastern Plumas Health Care
February 25, 2021 MINUTES - Continued

Other Expenses: Other expenses were under budget by \$57,197. These include training, travel, and dues and subscriptions.

Revenue Cycle

Gross Accounts Receivable ended the month at \$5.3M. Gross Accounts Receivable days at January 31, 2021 were 51. We budgeted 45 and best practice is 55.

Balance Sheet

We paid off the Plumas Bank loan in February. The balance sheet will reflect the payoff in February in the amount of \$375,341.

Additional Information

Our cash position is good. Days cash on hand at January 31, 2021 was 257. Without the Medicare Advance, HHS Stimulus and PPP funds, days cash on hand would be 111. January 31, 2020 days cash on hand was 63. We will continue to work on the strategic/operating plan to determine the return on investment for some of the larger projects such as a new Rehab building, EPHC-owned MRI and Loylton clinic relocation.

Year-to-date we have paid \$395,495 for COVID supplies and testing.

We received good news regarding the HQAF6 IGT that was funded in December. The actual return of funds will be \$3,395,202; \$1,273,214 more than expected. We will receive these funds sometime in February.

7. **Adjournment**

Power outage at 9:12 a.m.

Meeting adjourned at 9:19 a.m.

**EASTERN PLUMAS HEALTH CARE DISTRICT
REGULAR MEETING OF THE BOARD OF DIRECTORS
MINUTES
Thursday, February 25, 2021
Organizational Meeting**

1. Call to Order

Meeting was called to order at 10:33 am.

2. Roll Call

Board: Gail McGrath, Board Chair; Paul Swanson, M.D., Vice Chair; Teresa Whitfield, Board Member; Linda Satchwell, Board Member, and Augustine Corcoran, Board Member.

Staff in attendance: Doug McCoy, CEO; Katherine Parish, CFO; Lori Tange, Human Resources Director; and Jessica Folchi, Executive Assistant

3. Consent Calendar

ACTION: Motion was made by Director Whitfield, seconded by Director Swanson to approve all items on the consent calendar.

AYES: Directors McGrath, Satchwell, and Corcoran

Abstention: None

NAYS: None

4. Board Comments

Gail McGrath welcomed new Director Augustine Corcoran.

5. Public Comment

No comment was received.

6. Annual Organizational Meeting

A. Election of Officers

1.Chairman. *Current officer: Gail McGrath*

2.Vice Chairman. *Current officer: Paul Swanson*

3.Secretary. *Current officer: vacant*

Chairman McGrath nominated Augustine Corcoran as secretary. After some discussion on the role, Director Corcoran accepted the nomination.

ACTION: Motion was made by Director Whitfield, seconded by Director Satchwell to elect Director Corcoran as Secretary:

AYES: Directors McGrath, Swanson, and Corcoran

Abstention: None

NAYS: None

Discussion was held on the Chairman position. Director Whitfield and Director Swanson expressed their interest in the Chairman position. Chairman McGrath has served as the chairman for many years and has served on the Board for approximately 14 years. The Board came to consensus that the item would be revisited during the next Board meeting.

B. Confirmation and/or Reconsideration of Subcommittee Assignments

1. Quality Assurance (Standing). *Current Officers: Gail McGrath, Teresa Whitfield*
2. Finance (Standing). *Current Directors: Paul Swanson, vacant*
3. Planning (Standing). *Current Directors: Gail McGrath, vacant*

After some discussion, Augustine Corcoran was nominated and accepted to fill the vacancy on the Finance Committee and Linda Satchwell was nominated and accepted to fill the vacancy on the Planning Committee.

ACTION: Motion was made by Director McGrath, seconded by Director Whitfield to fill vacancies on the Finance and Planning Committees:

AYES: Directors Swanson, Corcoran, and Satchwell

Abstention: None

NAYS: None

C. Adjournment

Meeting adjourned at 10:46 a.m.

Eastern Plumas Health Care
Financial Statements – Board Report
February 2021

Summary

For the month of February, 2021 we posted a net profit in the amount of \$1,089,628 – Thanks to the HQAF6 IGT in the amount of \$1,697,607. As we have discussed, the IGT's are crucial to our continued success.

Total Patient Revenue for the month of February was under budget by \$445,461. Total Operating Expenses for the month were over budget by \$68,018. Year-to-date Net Income was \$592,943. We budgeted for a year-to-date Net Loss of \$1,409,244.

Revenues

Year-to-Date Inpatient Revenue was under budget by \$563,539. Outpatient Revenue was over budget by \$139,372. Clinic Revenue was under budget by \$145,707.

Expenses

Salaries and Benefits: Year-to-Date Combined Salaries and Benefits were over budget by \$97,080.

Professional Fees: Year-to-Date Professional Fees were under budget by \$82,533.

Repairs & Maintenance: Year-to-Date Repairs & Maintenance were under budget by \$195,245.

Supplies: Year-to-Date Supplies were under budget by \$8,139.

Purchased Services: Year-to-Date Purchased Services were over budget by \$493,738. This included architectural fees, payments to our outside lab for COVID testing and travelers.

Depreciation Expense: Year-to-Date Depreciation Expense was under budget by \$27,076.

Other Expenses: Other expenses were under budget by \$68,422. These include training, travel, and dues and subscriptions.

Revenue Cycle

Gross Accounts Receivable ended the month at \$5.3M. Gross Accounts Receivable days at February 28, 2021 were 52. We budgeted 45 and best practice is 55.

Balance Sheet

We paid off the Plumas Bank loan in February in the amount of \$375,341. Total Assets increased by \$3,098,436 or 16.74% (not including the funds received for CARES Act, Medicare Advance and PPP).

Additional Information

Our cash position is good. Days cash on hand at February 28, 2021 was 269. Without the CARES Act, Medicare Advance, and PPP funds, days cash on hand would be 127. February 29, 2020 days cash on hand was 59.

Year-to-date we have paid \$450,883 for COVID supplies and testing.

We will begin the 21/22 budget process the first part of April.

Eastern Plumas Health Care
Income Statement
For the Month of February 2021

	% Net Pt Revenue	Actual	Month-to-Date Budget	\$ Variance	% Net Pt Revenue	Actual	Year-to-Date Budget	\$ Variance
1 REVENUE								
2 Inpatient Revenue - Acute		\$ 91,991	\$ 177,383	\$ (85,392)		\$ 748,242	\$ 747,416	\$ 826
3 Inpatient Revenue - Acute Pro Fees		\$ 6,215	\$ 14,215	\$ (8,000)		\$ 58,409	\$ 74,885	\$ (16,476)
4 Inpatient Revenue - Swing Bed		\$ 22,000	\$ 75,000	\$ (53,000)		\$ 694,000	\$ 665,480	\$ 28,520
5 Inpatient Revenue - SNF		\$ 578,400	\$ 681,331	\$ (102,931)		\$ 5,102,800	\$ 5,450,664	\$ (347,864)
6 Inpatient Revenue - Ancillary		\$ 88,823	\$ 151,613	\$ (62,790)		\$ 982,924	\$ 1,211,469	\$ (228,545)
7 Inpatient Revenue		\$ 787,429	\$ 1,099,542	\$ (312,113)		\$ 7,586,375	\$ 8,149,914	\$ (563,539)
8 Outpatient		\$ 1,567,531	\$ 1,654,115	\$ (86,584)		\$ 14,555,209	\$ 14,415,837	\$ 139,372
9 Clinics		\$ 374,754	\$ 421,518	\$ (46,764)		\$ 3,226,437	\$ 3,372,144	\$ (145,707)
10 Total Patient Revenue		\$ 2,729,719	\$ 3,175,175	\$ (445,461)		\$ 25,368,021	\$ 25,937,895	\$ (569,874)
11 Contractual Allowances		\$ (1,056,489)	\$ (1,265,112)	\$ 208,623		\$ (9,122,935)	\$ (9,764,638)	\$ 641,703
12 Charity Discounts		\$ (8,222)	\$ (8,501)	\$ 279		\$ (30,440)	\$ (65,446)	\$ 35,006
13 Other Allowances		\$ (15,502)	\$ (13,175)	\$ (2,327)		\$ (118,384)	\$ (102,427)	\$ (15,957)
14 Bad Debt		\$ (3,329)	\$ (56,629)	\$ 53,300		\$ (487,884)	\$ (465,205)	\$ (22,679)
15 Total Deductions		\$ (1,083,542)	\$ (1,343,417)	\$ 259,875		\$ (9,759,643)	\$ (10,397,716)	\$ 638,073
16 Net Patient Revenue		\$ 1,646,172	\$ 1,831,758	\$ (185,586)		\$ 15,608,378	\$ 15,540,179	\$ 68,199
17 % of Gross Revenue		60.31%	57.69%	2.62%		61.53%	59.91%	1.61%
18 Meaningful Use Revenue		\$ -	\$ -	\$ -		\$ -	\$ -	\$ -
19 Quality Payments		\$ -	\$ -	\$ -		\$ 172,120	\$ 68,970	\$ 103,150
20 IGT Payments		\$ 1,697,607	\$ 1,060,995	\$ 636,612		\$ 3,552,029	\$ 1,600,995	\$ 1,951,034
21 Other Operating Revenue		\$ 5,159	\$ 5,582	\$ (423)		\$ 144,006	\$ 44,656	\$ 99,350
22 Total Operating Revenue		\$ 3,348,938	\$ 2,898,335	\$ 450,603		\$ 19,476,533	\$ 17,254,800	\$ 2,221,733
23 EXPENSES								
24 Salaries and Wages	59.5%	\$ (979,439)	\$ (969,398)	\$ (10,041)	53.8%	\$ (8,404,959)	\$ (8,368,912)	\$ (36,047)
25 Employee Benefits	26.6%	\$ (437,997)	\$ (399,553)	\$ (38,444)	21.9%	\$ (3,423,136)	\$ (3,362,103)	\$ (61,033)
26 Professional Fees - Medical	12.3%	\$ (202,535)	\$ (203,360)	\$ 825	10.1%	\$ (1,574,233)	\$ (1,626,873)	\$ 52,640
27 Professional Fees - Other	1.6%	\$ (27,044)	\$ (11,375)	\$ (15,669)	0.5%	\$ (79,286)	\$ (109,179)	\$ 29,893
28 Supplies	10.0%	\$ (165,108)	\$ (193,686)	\$ 28,578	9.9%	\$ (1,541,456)	\$ (1,549,595)	\$ 8,139
29 Purchased Services	13.7%	\$ (225,829)	\$ (158,469)	\$ (67,360)	11.5%	\$ (1,801,868)	\$ (1,308,130)	\$ (493,738)
30 Insurance	1.9%	\$ (31,357)	\$ (30,734)	\$ (623)	1.6%	\$ (250,296)	\$ (245,871)	\$ (4,425)
31 Rental and Leases	0.3%	\$ (5,122)	\$ (5,181)	\$ 59	0.3%	\$ (40,976)	\$ (41,448)	\$ 472
32 Repairs and Maintenance	4.5%	\$ (74,875)	\$ (87,528)	\$ 12,653	3.2%	\$ (493,083)	\$ (688,328)	\$ 195,245
33 Utilities and Telephone	3.8%	\$ (61,933)	\$ (56,333)	\$ (5,600)	3.4%	\$ (535,722)	\$ (486,244)	\$ (49,478)
34 Depreciation Amortization	5.9%	\$ (96,338)	\$ (112,716)	\$ 16,378	5.6%	\$ (873,033)	\$ (900,109)	\$ 27,076
35 Other Expenses	1.9%	\$ (31,700)	\$ (42,926)	\$ 11,226	2.1%	\$ (324,985)	\$ (393,407)	\$ 68,422
36 Total Operating Expenses	142.1%	\$ (2,339,277)	\$ (2,271,259)	\$ (68,018)	123.9%	\$ (19,343,033)	\$ (19,080,199)	\$ (262,834)
37 Income From Operations	61.3%	\$ 1,009,661	\$ 627,076	\$ 382,585	0.9%	\$ 133,500	\$ (1,825,399)	\$ 1,958,899
38 Tax Revenue	-3.4%	\$ 55,875	\$ 50,417	\$ 5,458	-2.8%	\$ 441,539	\$ 403,336	\$ 38,203
39 Non Capital Grants and Donations	-2.4%	\$ 40,000	\$ 40,000	\$ -	-0.3%	\$ 46,000	\$ 41,500	\$ 4,500
40 Interest Income	0.0%	\$ -	\$ -	\$ -	-0.8%	\$ 117,603	\$ 120,000	\$ (2,397)
41 Interest Expense	1.2%	\$ (19,283)	\$ (21,210)	\$ 1,927	1.1%	\$ (169,457)	\$ (169,681)	\$ 224
42 Non-Operating Income (Expenses)	-0.2%	\$ 3,375	\$ 2,625	\$ 750	-0.2%	\$ 23,758	\$ 21,000	\$ 2,758
43 Total Non-Operating Gain (Loss)	-4.9%	\$ 79,967	\$ 71,832	\$ 8,135	-2.9%	\$ 459,443	\$ 416,155	\$ 43,288
44 Net Income	66.2%	\$ 1,089,628	\$ 698,908	\$ 390,720	3.8%	\$ 592,943	\$ (1,409,244)	\$ 2,002,187
45 Operating Margin %		30.15%	21.64%	8.51%		0.69%	-10.58%	11.26%
46 Net Margin %		32.54%	24.11%	8.42%		3.04%	-8.17%	11.21%
47 Payroll as % of Operating Expense		60.59%	60.27%			61.15%	61.48%	

**Eastern Plumas Health Care
Income Statement
13-Month Trend Ended February 28, 2021**

	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21
1 REVENUE													
2 Inpatient Revenue - Acute	\$ 125,134	\$ 85,618	\$ 95,497	\$ 144,892	\$ 26,344	\$ 30,231	\$ 60,895	\$ 128,427	\$ 79,032	\$ 73,326	\$ 155,211	\$ 129,129	\$ 91,991
3 Inpatient Revenue - Acute Pro Fees	\$ 8,439	\$ 6,682	\$ 7,643	\$ 13,599	\$ 2,313	\$ 2,261	\$ 5,676	\$ 8,106	\$ 6,251	\$ 6,075	\$ 13,751	\$ 10,074	\$ 6,215
4 Inpatient Revenue - Swing Bed	\$ 144,000	\$ 142,000	\$ 26,000	\$ 76,000	\$ 106,000	\$ 72,000	\$ 64,000	\$ 116,000	\$ 214,000	\$ 124,000	\$ 72,000	\$ 10,000	\$ 22,000
5 Inpatient Revenue - SNF	\$ 564,290	\$ 702,000	\$ 685,481	\$ 702,400	\$ 665,600	\$ 675,200	\$ 658,000	\$ 649,200	\$ 666,800	\$ 622,800	\$ 626,800	\$ 625,600	\$ 578,400
6 Inpatient Revenue - Ancillary	\$ 216,529	\$ 158,777	\$ 88,350	\$ 121,483	\$ 103,581	\$ 43,453	\$ 61,668	\$ 164,986	\$ 196,554	\$ 145,340	\$ 160,632	\$ 121,467	\$ 88,823
7 Inpatient Revenue	\$ 1,058,392	\$ 1,095,077	\$ 902,971	\$ 1,058,374	\$ 903,838	\$ 823,145	\$ 850,239	\$ 1,066,719	\$ 1,162,637	\$ 971,541	\$ 1,028,394	\$ 896,270	\$ 787,429
8 Outpatient	\$ 1,745,624	\$ 1,522,040	\$ 1,056,061	\$ 1,630,764	\$ 1,782,275	\$ 2,120,138	\$ 2,124,611	\$ 1,891,075	\$ 1,885,289	\$ 1,657,368	\$ 1,651,561	\$ 1,657,638	\$ 1,567,531
9 Clinics	\$ 401,216	\$ 366,644	\$ 190,902	\$ 262,399	\$ 400,119	\$ 419,597	\$ 395,680	\$ 441,672	\$ 466,443	\$ 388,798	\$ 388,242	\$ 351,251	\$ 374,754
10 Total Patient Revenue	\$ 3,205,232	\$ 2,983,761	\$ 2,149,934	\$ 2,951,537	\$ 3,086,232	\$ 3,362,880	\$ 3,370,530	\$ 3,399,466	\$ 3,514,369	\$ 3,017,707	\$ 3,068,197	\$ 2,905,159	\$ 2,729,714
11 Contractual Allowances	\$ (1,222,002)	\$ (701,666)	\$ (1,266,196)	\$ (594,082)	\$ (1,005,169)	\$ (1,142,215)	\$ (937,672)	\$ (1,117,578)	\$ (1,404,731)	\$ (1,207,637)	\$ (1,127,945)	\$ (1,169,064)	\$ (1,056,489)
12 Charity Discounts	\$ (21,867)	\$ (19,909)	\$ 316	\$ (37,472)	\$ (9,302)	\$ 52	\$ 5,618	\$ (387)	\$ (17,460)	\$ (10,381)	\$ 340	\$ -	\$ (8,222)
13 Other Allowances	\$ (19,450)	\$ (20,579)	\$ (36,818)	\$ (32,604)	\$ (10,376)	\$ (9,799)	\$ (20,517)	\$ (18,670)	\$ (9,611)	\$ (10,349)	\$ (22,283)	\$ (11,649)	\$ (15,502)
14 Bad Debt	\$ (128,749)	\$ (73,472)	\$ 9,850	\$ (11,610)	\$ (38,433)	\$ (60,875)	\$ (97,443)	\$ (68,022)	\$ (97,996)	\$ (40,383)	\$ (64,925)	\$ (54,909)	\$ (3,329)
15 Total Deductions	\$ (1,392,068)	\$ (815,626)	\$ (1,292,848)	\$ (675,768)	\$ (1,063,280)	\$ (1,212,837)	\$ (1,050,014)	\$ (1,204,657)	\$ (1,529,798)	\$ (1,268,750)	\$ (1,214,813)	\$ (1,235,622)	\$ (1,083,542)
16 Net Patient Revenue	\$ 1,813,164	\$ 2,168,135	\$ 857,086	\$ 2,275,769	\$ 2,022,952	\$ 2,150,043	\$ 2,320,516	\$ 2,194,809	\$ 1,984,571	\$ 1,748,957	\$ 1,853,384	\$ 1,669,537	\$ 1,646,172
17 % of Gross Revenue	56.57%	72.66%	39.87%	77.10%	65.55%	63.93%	68.85%	64.56%	56.47%	57.96%	60.41%	57.47%	60.31%
18 Meaningful Use Revenue	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
19 Quality Payments	\$ -	\$ -	\$ 50,221	\$ -	\$ 218,130	\$ -	\$ -	\$ 108,036	\$ 321	\$ -	\$ -	\$ 101,208	\$ -
20 IGT Payments	\$ -	\$ -	\$ 3,814,192	\$ 4,014,605	\$ -	\$ -	\$ 12,268	\$ 523,267	\$ 1,262,250	\$ -	\$ -	\$ -	\$ 1,697,607
21 Other Operating Revenue	\$ 7,257	\$ 23,753	\$ 4,205	\$ 11,686	\$ 4,310	\$ 2,466	\$ 72,275	\$ 7,239	\$ 11,284	\$ 5,193	\$ 94,931	\$ 5,042	\$ 5,159
22 Total Operating Revenue	\$ 1,820,421	\$ 2,191,888	\$ 4,725,704	\$ 6,302,060	\$ 2,245,392	\$ 2,152,509	\$ 2,392,791	\$ 2,322,352	\$ 2,519,443	\$ 3,016,400	\$ 1,948,315	\$ 1,775,787	\$ 3,348,938
23 EXPENSES													
24 Salaries & Wages	\$ (1,016,424)	\$ (1,075,743)	\$ (998,179)	\$ (1,016,136)	\$ (995,825)	\$ (1,035,560)	\$ (1,054,164)	\$ (1,016,621)	\$ (1,116,843)	\$ (1,050,070)	\$ (1,068,440)	\$ (1,083,822)	\$ (979,439)
25 Employee Benefits	\$ (409,547)	\$ (411,107)	\$ (380,632)	\$ (370,086)	\$ (370,344)	\$ (447,500)	\$ (394,504)	\$ (355,947)	\$ (422,165)	\$ (418,457)	\$ (497,099)	\$ (449,467)	\$ (437,997)
26 Professional Fees - Medical	\$ (177,198)	\$ (180,813)	\$ (137,063)	\$ (180,277)	\$ (202,588)	\$ (191,796)	\$ (198,153)	\$ (189,821)	\$ (212,565)	\$ (184,524)	\$ (183,832)	\$ (203,514)	\$ (202,535)
27 Professional Fees - Other	\$ (6,787)	\$ (13,418)	\$ (14,813)	\$ (15,440)	\$ (7,839)	\$ (5,249)	\$ (17,370)	\$ (6,578)	\$ (4,945)	\$ (7,855)	\$ (3,937)	\$ (13,801)	\$ (27,044)
28 Supplies	\$ (178,750)	\$ (199,522)	\$ (151,729)	\$ (148,196)	\$ (68,715)	\$ (188,428)	\$ (179,795)	\$ (201,692)	\$ (197,269)	\$ (239,863)	\$ (226,299)	\$ (143,001)	\$ (165,108)
29 Purchased Services	\$ (122,930)	\$ (178,158)	\$ (143,265)	\$ (127,556)	\$ (300,736)	\$ (164,166)	\$ (194,035)	\$ (192,446)	\$ (281,199)	\$ (214,397)	\$ (245,778)	\$ (284,018)	\$ (225,829)
30 Insurance	\$ (29,409)	\$ 39,081	\$ (29,409)	\$ (29,409)	\$ (29,073)	\$ (31,217)	\$ (31,217)	\$ (31,217)	\$ (31,217)	\$ (31,078)	\$ (31,357)	\$ (31,636)	\$ (31,357)
31 Rental and Leases	\$ (6,572)	\$ (6,572)	\$ (6,572)	\$ (8,236)	\$ (5,122)	\$ (5,122)	\$ (5,122)	\$ (5,122)	\$ (5,122)	\$ (5,122)	\$ (5,122)	\$ (5,122)	\$ (5,122)
32 Repairs and Maintenance	\$ (118,832)	\$ (60,726)	\$ (77,954)	\$ (66,261)	\$ (59,178)	\$ (61,400)	\$ (83,704)	\$ (43,013)	\$ (63,115)	\$ (76,045)	\$ (52,642)	\$ (38,289)	\$ (74,875)
33 Utilities and Telephone	\$ (53,351)	\$ (56,319)	\$ (61,926)	\$ (72,718)	\$ (84,492)	\$ (39,007)	\$ (77,351)	\$ (48,639)	\$ (67,242)	\$ (77,007)	\$ (84,068)	\$ (80,476)	\$ (61,933)
34 Depreciation Amortization	\$ (92,414)	\$ (92,896)	\$ (89,455)	\$ (90,127)	\$ (187,118)	\$ (109,142)	\$ (107,956)	\$ (108,633)	\$ (113,490)	\$ (113,761)	\$ (114,772)	\$ (108,941)	\$ (96,338)
35 Other Expenses	\$ (19,374)	\$ (70,938)	\$ (22,667)	\$ (28,402)	\$ (184,222)	\$ (32,616)	\$ (91,542)	\$ (31,347)	\$ (34,884)	\$ (30,394)	\$ (38,524)	\$ (33,975)	\$ (31,700)
36 Total Operating Expenses	\$ (2,231,588)	\$ (2,307,131)	\$ (2,113,664)	\$ (2,152,844)	\$ (2,495,252)	\$ (2,311,203)	\$ (2,434,913)	\$ (2,231,076)	\$ (2,550,056)	\$ (2,448,573)	\$ (2,551,870)	\$ (2,476,062)	\$ (2,339,277)
37 Income From Operations	\$ (411,167)	\$ (115,243)	\$ 2,612,040	\$ 4,149,216	\$ (249,860)	\$ (158,694)	\$ (42,122)	\$ 91,276	\$ (30,613)	\$ 567,827	\$ (603,555)	\$ (700,275)	\$ 1,009,661
38 Tax Revenue	\$ 50,417	\$ 50,417	\$ 50,417	\$ 50,417	\$ 50,417	\$ 50,417	\$ 55,875	\$ 55,875	\$ 55,875	\$ 55,875	\$ 55,875	\$ 55,875	\$ 55,875
39 Non Capital Grants and Donations	\$ 7,038	\$ -	\$ 786	\$ 62,038	\$ -	\$ 1,000	\$ -	\$ -	\$ -	\$ 5,000	\$ -	\$ -	\$ 40,000
40 Interest Income	\$ 1	\$ -	\$ 18,890	\$ -	\$ -	\$ 50,064	\$ -	\$ -	\$ 37,921	\$ -	\$ -	\$ 29,553	\$ -
41 Interest Expense	\$ (26,223)	\$ (26,264)	\$ (29,891)	\$ (27,418)	\$ (6,387)	\$ (22,044)	\$ (22,139)	\$ (22,078)	\$ (21,663)	\$ (21,817)	\$ (21,275)	\$ (19,160)	\$ (19,283)
42 Non-Operating Income (Expenses)	\$ -	\$ 376	\$ 21,100	\$ 2,844	\$ 2,801	\$ 3,325	\$ 2,653	\$ 20	\$ -	\$ 7,880	\$ 3,125	\$ 3,444	\$ 3,375
43 Total Non-Operating Gain (Loss)	\$ 31,233	\$ 24,529	\$ 61,302	\$ 87,881	\$ 46,831	\$ 82,762	\$ 36,389	\$ 33,817	\$ 72,133	\$ 41,938	\$ 42,725	\$ 69,712	\$ 79,967
44 Net Income	\$ (379,934)	\$ (90,714)	\$ 2,673,342	\$ 4,237,097	\$ (203,029)	\$ (75,932)	\$ (5,733)	\$ 125,093	\$ 41,520	\$ 609,765	\$ (560,830)	\$ (630,563)	\$ 1,089,628
45 Operating Margin %	-22.59%	-5.26%	55.27%	65.84%	-11.13%	-7.37%	-1.76%	3.93%	-1.22%	18.82%	-30.98%	-39.43%	30.15%
46 Net Margin %	-20.87%	-4.14%	56.57%	67.23%	-9.04%	-3.53%	-24.00%	5.39%	1.65%	20.21%	-28.79%	-35.51%	32.54%
47 Payroll as % of Operating Expense	63.90%	64.45%	65.23%	64.39%	54.75%	64.17%	59.50%	61.52%	60.35%	59.97%	61.35%	61.92%	60.59%

Eastern Plumas Health Care
Comparative Balance Sheets - Board Report
Dates as Indicated

	FYE	FYE	FYE	FYE	FYE 2021-2020	
	as of 2/28/21	2/28/2020	2/28/2019	2/28/2018	\$ Change	% Change
Assets						
Current Assets						
Cash	\$ 687,489	\$ 835,887	\$ 838,014	\$ 622,497	\$ (148,398)	-17.75%
Short-term Investments (LAIF)	\$ 19,908,959	\$ 3,722,626	\$ 1,269,467	\$ 1,918,790	\$ 16,186,333	434.81%
Total Cash and Equivalents	\$ 20,596,448	\$ 4,558,513	\$ 2,107,481	\$ 2,541,287	\$ 16,037,935	351.82%
Patient Accounts Receivable	\$ 5,336,358	\$ 5,506,591	\$ 5,771,444	\$ 6,092,581	\$ (170,233)	-3.09%
Accounts Receivable Reserves	\$ (1,976,056)	\$ (1,985,325)	\$ (2,366,089)	\$ (2,216,747)	\$ 9,270	-0.47%
Net Accounts Receivable	\$ 3,360,302	\$ 3,521,266	\$ 3,405,355	\$ 3,875,834	\$ (160,963)	-4.57%
% of Gross Account Receivables	63.0%	63.9%	59.0%	63.6%		
Inventory	\$ 262,207	\$ 219,825	\$ 229,621	\$ 200,598	\$ 42,382	19.28%
Other Assets	\$ 658,922	\$ 169,684	\$ 145,392	\$ 286,326	\$ 489,238	288.32%
Total Other Assets	\$ 921,129	\$ 389,508	\$ 375,014	\$ 486,924	\$ 531,621	136.49%
Total Current Assets	\$ 24,877,879	\$ 8,469,287	\$ 5,887,850	\$ 6,904,045	\$ 16,408,592	193.74%
Fixed Assets						
Land	\$ 1,123,344	\$ 1,120,209	\$ 948,686	\$ 948,686	\$ 3,135	0.28%
Buildings	\$ 14,837,671	\$ 14,143,123	\$ 14,087,815	\$ 10,400,251	\$ 694,547	4.91%
Capital Equipment	\$ 14,372,618	\$ 13,536,691	\$ 12,585,510	\$ 12,408,336	\$ 835,927	6.18%
In Progress	\$ -	\$ 955,454	\$ 448,608	\$ 2,684,666	\$ (955,454)	-100.00%
Total Plant & Equipment	\$ 30,333,632	\$ 29,755,477	\$ 28,070,619	\$ 26,441,940	\$ 578,155	1.94%
Accumulated Depreciation	\$ (21,045,234)	\$ (19,712,656)	\$ (18,495,774)	\$ (17,504,675)	\$ (1,332,578)	6.76%
Net Fixed Assets	\$ 9,288,397	\$ 10,042,821	\$ 9,574,845	\$ 8,937,265	\$ (754,424)	-7.51%
Total Assets	\$ 34,166,277	\$ 18,512,108	\$ 15,462,695	\$ 15,841,310	\$ 15,654,169	84.56%
LIABILITIES AND RETAINED EARNINGS						
Current Liabilities						
Accounts Payable	\$ 742,280	\$ 668,024	\$ 767,444	\$ 925,090	\$ 74,255	11.12%
Accrued Payroll & Benefits	\$ 1,060,803	\$ 871,990	\$ 1,284,592	\$ 1,244,555	\$ 188,814	21.65%
Other Current Liabilities	\$ 12,556,892	\$ 240,265	\$ 14,570	\$ 750,000	\$ 12,316,627	5126.27%
Total Current Liabilities	\$ 14,359,974	\$ 1,780,278	\$ 2,066,606	\$ 2,919,645	\$ 12,579,696	706.61%
Long-Term Liabilities						
Loans	\$ 5,343,740	\$ 6,129,688	\$ 6,484,528	\$ 3,537,237	\$ (785,948)	-12.82%
Capitalized Leases	\$ -	\$ -	\$ 50,156	\$ 512,150	\$ -	0.00%
Total Long Term Liabilities	\$ 5,343,740	\$ 6,129,688	\$ 6,534,684	\$ 4,049,387	\$ (785,948)	-12.82%
Deferred Revenue	\$ -	\$ -	\$ 202,286	\$ 660,195	\$ -	0.00%
TOTAL LIABILITIES	\$ 19,703,714	\$ 7,909,966	\$ 8,803,576	\$ 7,629,227	\$ 11,793,748	149.10%
Fund Balance	\$ 14,462,562	\$ 10,602,142	\$ 6,659,119	\$ 8,212,083	\$ 3,860,421	36.41%
TOTAL LIABILITIES AND FUND BALANCE	\$ 34,166,277	\$ 18,512,108	\$ 15,462,695	\$ 15,841,310	\$ 15,654,169	84.56%

EASTERN PLUMAS HEALTH CARE
ACTIVITY SUMMARY
FOR THE MONTH OF JANUARY 2021

		MONTH TO DATE			YEAR TO DATE	
		CURRENT MONTH Feb-21	PRIOR MONTH Jan-21	PRIOR YEAR MONTH Feb-20	Jul-20 - Jun-21	Jul-19 - Jun-20
1	Acute Inpatient					
	Admissions	7	12	10	71	63
	Discharges	8	13	8	232	61
2	Observations Admissions	4	14	1	42	55
3	Endoscopy	26	0	16	118	154
4	Ambulatory Services	32	108	29	415	482
5	Ambulance	57	78	65	547	675
6	Emergency Visits	167	201	334	1908	2664
7	Lab Procedures	3404	3412	2899	28488	23707
8	Diagnostic Imaging					
	CT Scan	70	133	144	1074	1273
	Mammography	33	13	40	301	374
	MRI	16	6	14	121	147
	Radiology Procedures	151	211	268	1794	2419
	Ultrasound	49	54	61	558	606
9	Respiratory	51	92	374	528	1830
10	Cardiology	97	112	194	894	812
11	Physical Therapy	923	881	906	8870	5850
12	Occupational Therapy	480	385	493	3693	3288
13	ACUTE CARE					
14	Acute Patient Days	27	40	38	232	389
15	Acute ADC	0.96	1.29	1.31	1.08	1.59
16	% Occupancy Acute	10.71%	14.34%	14.56%	11.99%	17.64%
17	Avg Length of Stay	3.5	3.2	4.3	3.3	3.7
18	Swing Bed Days	11	5	72	347	538
19	Swing Bed ADC	0.39	0.16	2.48	1.43	2.20
20	Avg Length of Stay	11.00	5.00	13.00	20.40	13.30
21	Observations Hours	133	246	12	1009	1452
22	Observations ADC	0.20	0.33	0.02	0.17	0.25
23	Total ADC	1.56	1.78	3.81	2.68	4.03
	SKILLED NURSING UNIT					
24	Patient Days	1446	1564	1587	12751	13044
25	SNF Average Census	51.64	50.45	54.72	52.47	53.24
26	% Occupancy SNF	78.25%	76.44%	82.91%	79.50%	80.67%
	TOTAL					
27	Patient Days	1484	1609	1697	13330	13971
28	Average Daily Census	53.00	51.90	58.52	54.86	57.02

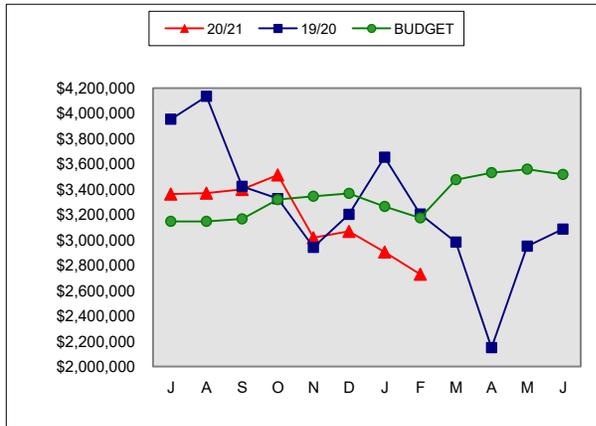
**EASTERN PLUMAS HEALTH CARE
ACTIVITY SUMMARY
FOR THE MONTH OF JANUARY 2021**

	MONTH TO DATE			YEAR TO DATE	
	CURRENT MONTH Feb-21	PRIOR MONTH Jan-21	PRIOR YEAR MONTH Feb-20	Jul-20 - Jun-21	Jul-19 - Jun-20
Provider Visits					
Adams, Robert	47	0	0	49	3
Adkins, Stacia	82	74	94	617	739
Aggarwal, Shruti	0	0	0	0	885
Ball, Donald	0	0	25	0	245
Brooks, Michael	75	61	82	584	587
Bugna, Eric	42	45	17	397	380
Coll, Shawni	0	0	0	29	37
Corvera, Amanda	0	0	0	1	0
Cox, Charles	6	0	7	14	59
Dhond, Milind	47	60	51	420	417
Dupuis, William	52	59	0	469	0
Ettinger, Victor	18	14	19	123	117
Farias, Ginger	1	1	11	28	46
Feil, Frederick	0	0	18	69	154
Flapan, Wendy	0	0	0	0	294
Foley, Trish	73	72	71	568	533
Freitas, Paul	0	0	1	3	11
Gould, Roxanne	30	7	0	136	290
Grier, Barnett	190	164	202	1451	1474
Hibler, John	50	39	80	495	817
Hill, Beth	0	0	175	658	1290
Hoffman, Daniel	185	151	248	1409	1953
Hunt, Ben	14	14	16	108	158
Jaquez, Robin	27	28	61	246	481
Mills, William	0	1	2	7	7
Morrison, Mary	134	138	0	1054	525
Muto-Isolani, Antonio	0	0	0	7	1
Nielsen, Marc	0	0	1	5	15
Ouyang, Debra	0	0	10	0	46
Phen, Lovsho	71	79	121	923	1086
Potter, Christina	222	242	248	1934	1841
Prichard, Gail	0	0	0	0	1
Printz, Richard	0	15	15	53	76
Robinson, Ken	1	0	3	24	43
Sapir, Leora	122	143	85	977	695
Scott, John	0	0	0	0	64
Skiles, Sunny	4	2	7	36	62
Spencer, Christine	45	51	68	573	602
Stoll, Daniel	96	107	95	891	983
Streit, Cara	18	0	7	36	21
Sturgis, Cristy	0	0	0	0	63
Swanson, Paul	27	26	2	67	25
Taylor, Peter	0	0	0	22	23
Thompson, Steven	0	18	0	35	14
Vo, Quang	3	5	9	50	64
Walters, Marc	0	1	3	13	11
Williams, Anne	0	0	0	0	34
Wojek, Irene	109	104	85	821	675
Total	1791	1721	1939	15402	17947

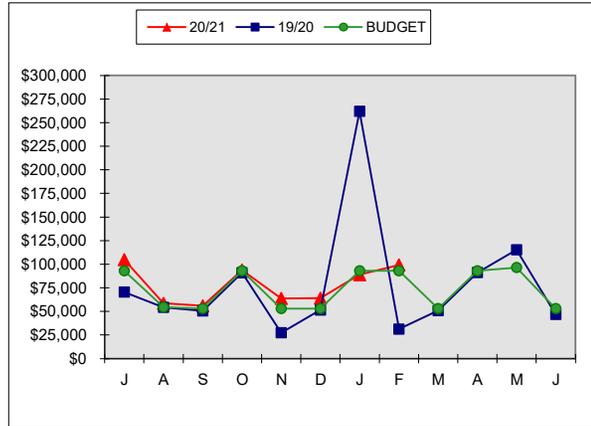
Clinics					
Graeagle Medical Clinic	191	202	213	1708	2180
Loyalton Medical Clinic	281	283	310	2385	2414
Pine Street Dental Clinic	0	0	0	0	0
Pine Street Medical Clinic	0	0	0	0	103
Portola Dental Clinic	349	291	341	2631	3047
Portola Medical Clinic	750	718	870	6918	8500
Behavioral Health	168	162	156	1277	1209
Telemed	52	65	49	483	494
Total	1791	1721	1939	15402	17947

EASTERN PLUMAS HEALTH CARE MONTHLY FINANCIAL GRAPHS FOR THE YEAR ENDED JUNE 30, 2021

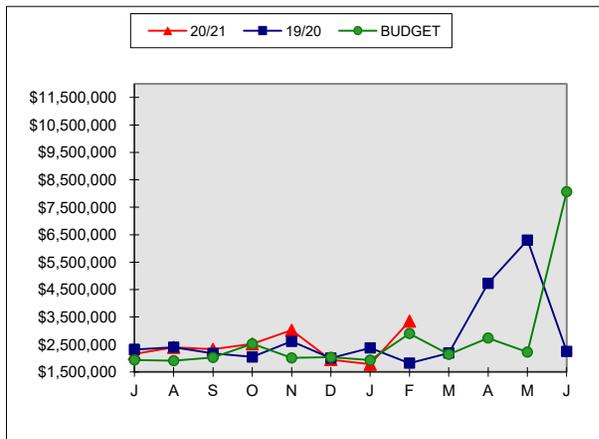
1. GROSS PATIENT REVENUE



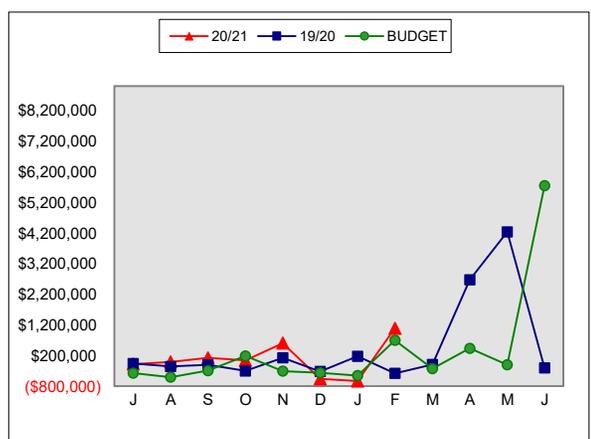
4. NON-OPERATING INCOME



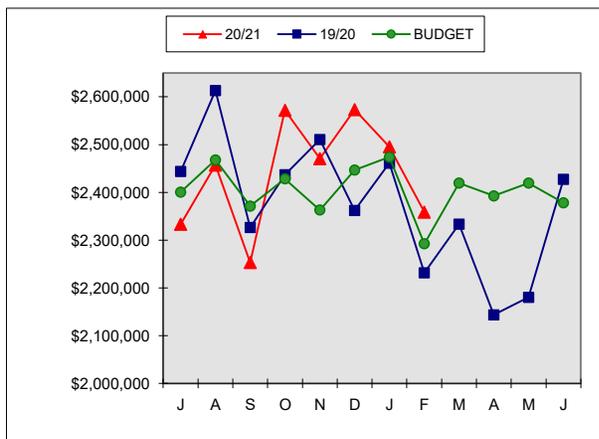
2. ESTIMATED NET REVENUE



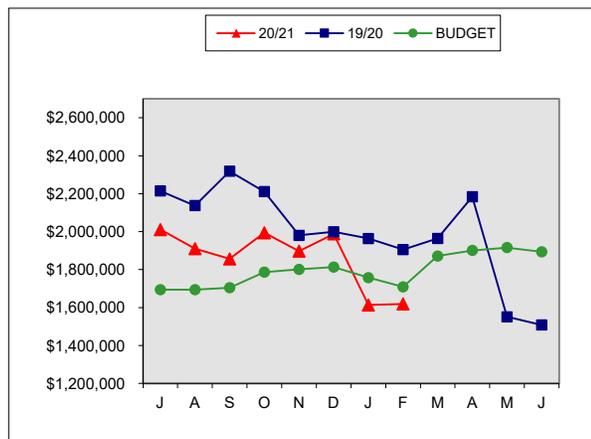
5. NET INCOME (LOSS)



3. OPERATING EXPENSES

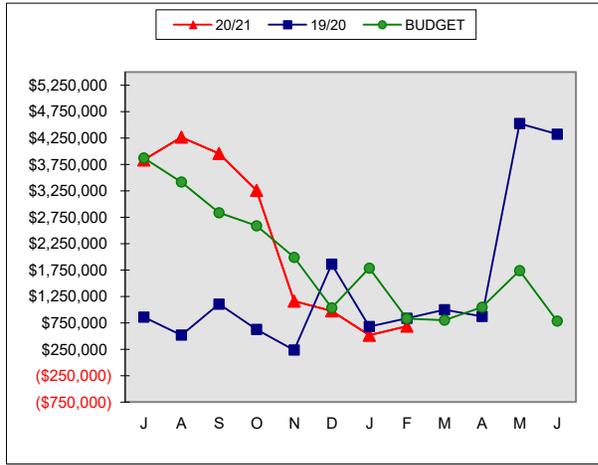


6. CASH RECEIPTS

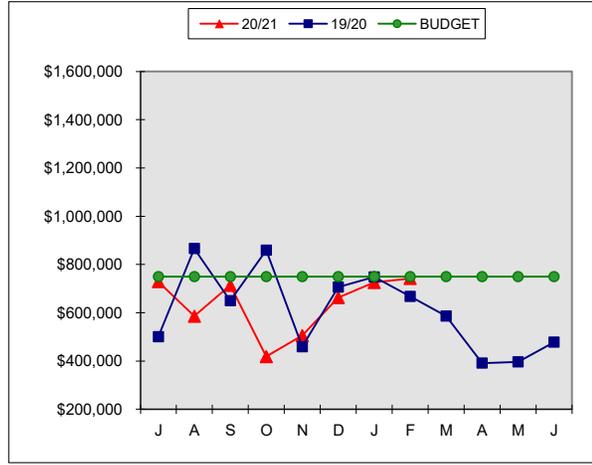


**EASTERN PLUMAS HEALTH CARE
MONTHLY FINANCIAL GRAPHS
FOR THE YEAR ENDED JUNE 30, 2021**

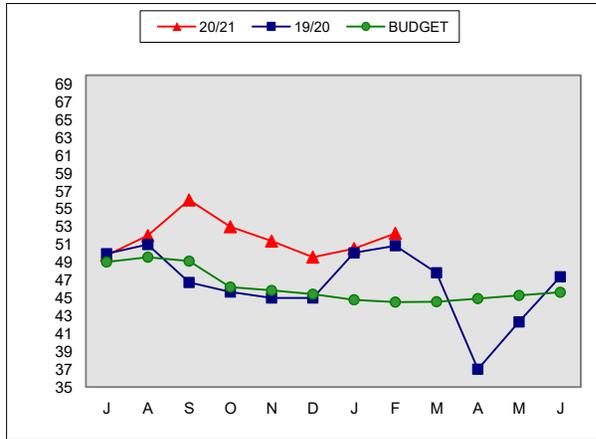
7. OPERATING CASH



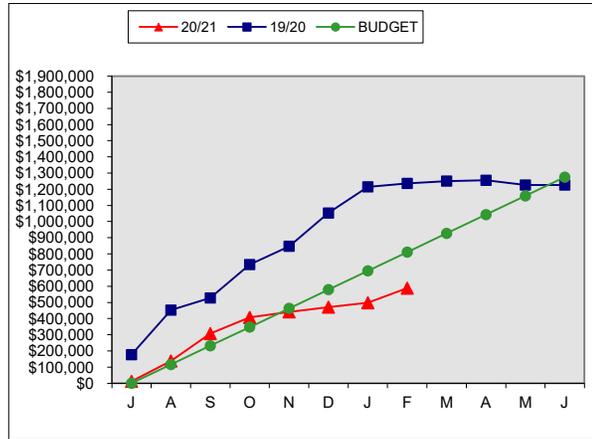
10. ACCOUNTS PAYABLE



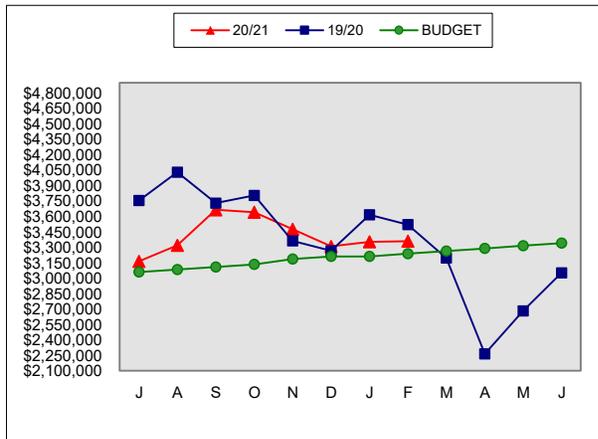
8. ACCOUNTS RECEIVABLE-DAYS



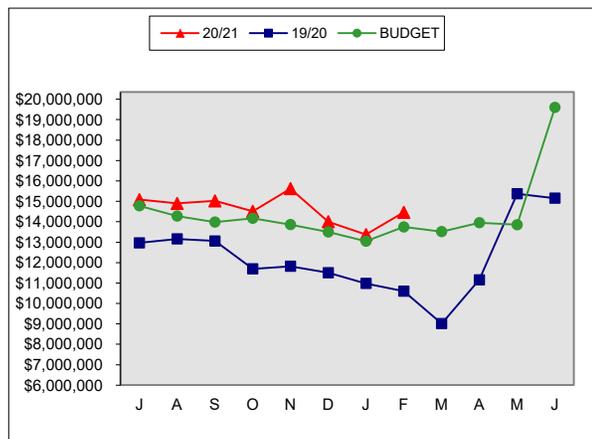
11. CAPITAL EXPENDITURES-YTD



9. ACCOUNTS RECEIVABLE, NET

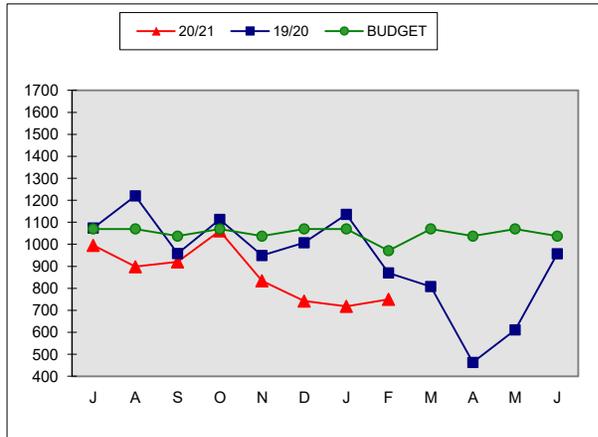


12. FUND BALANCE + NET INCOME (LOSS)

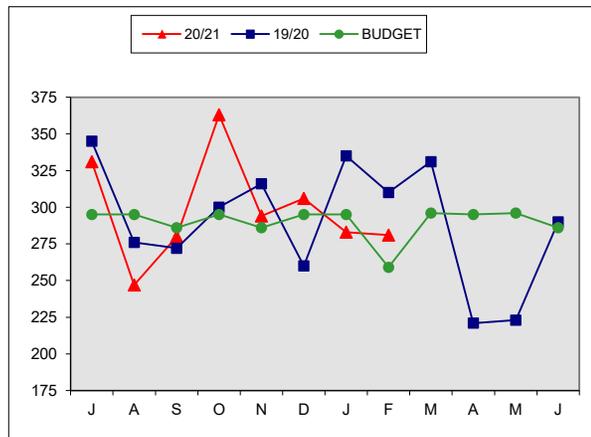


EASTERN PLUMAS HEALTH CARE
MONTHLY FINANCIAL GRAPHS
FOR THE YEAR ENDED JUNE 30, 2021

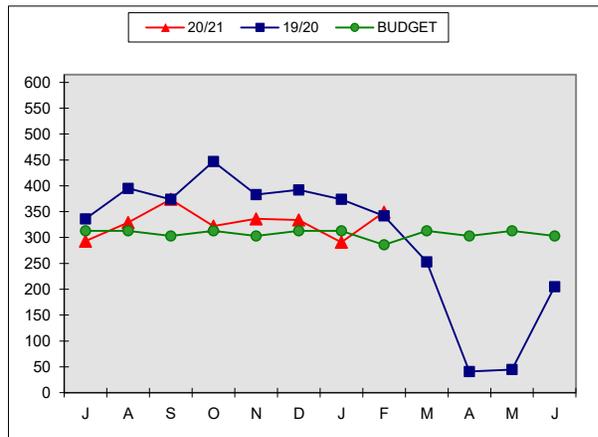
13. PORTOLA MEDICAL CLINIC VISITS



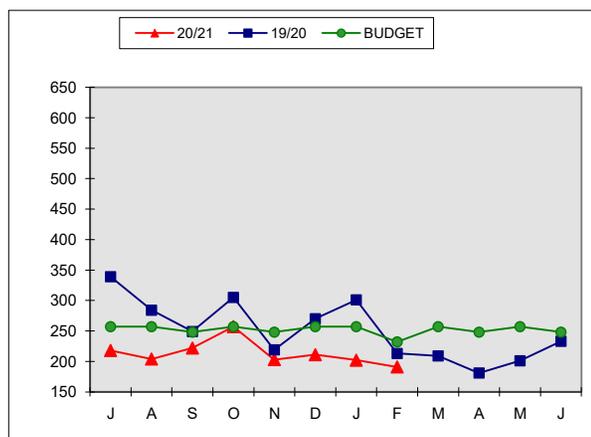
16. LOYALTON MEDICAL CLINIC VISITS



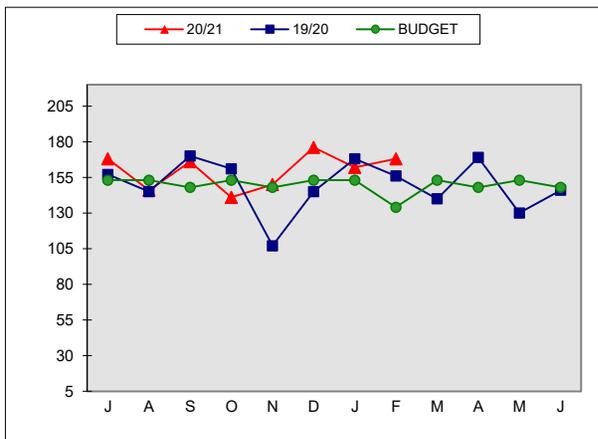
14. PORTOLA DENTAL CLINIC VISITS



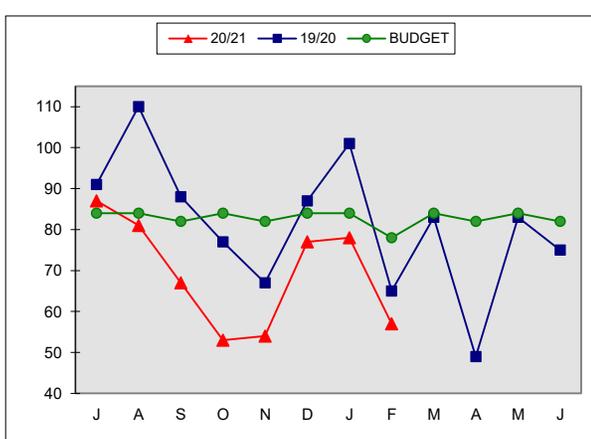
17. GRAEAGLE MEDICAL CLINIC VISITS



15. BEHAVIORAL HEALTH VISITS

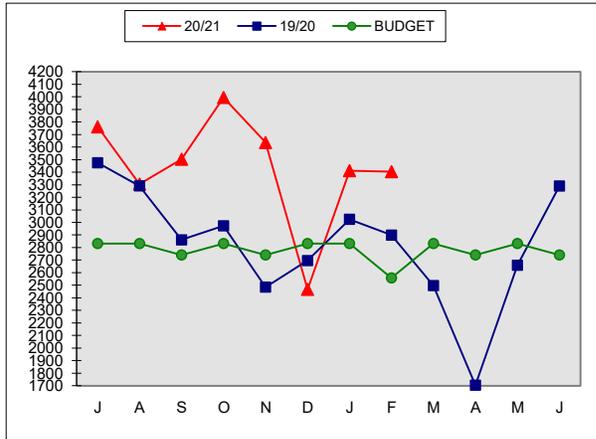


18. AMBULANCE RUNS

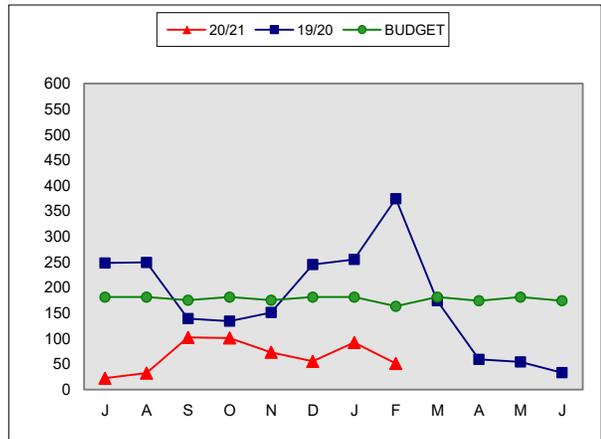


**EASTERN PLUMAS HEALTH CARE
MONTHLY FINANCIAL GRAPHS
FOR THE YEAR ENDED JUNE 30, 2021**

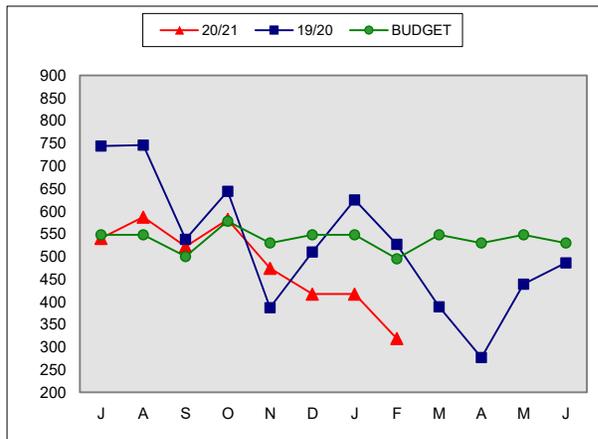
19. LABORATORY PROCEDURES



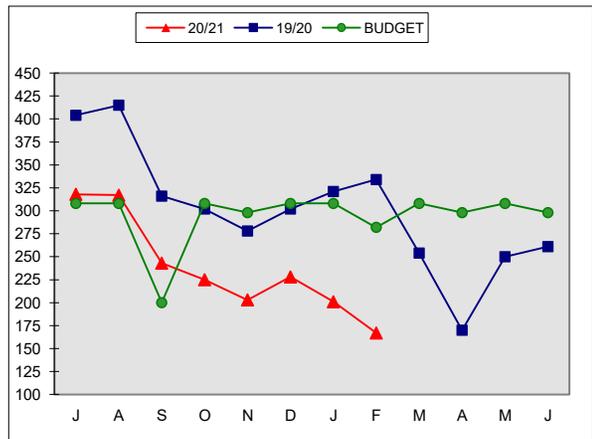
22. RESPIRATORY PROCEDURES



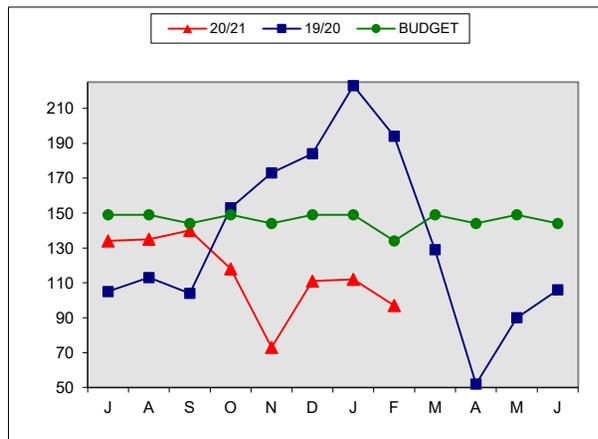
20. RADIOLOGY PROCEDURES



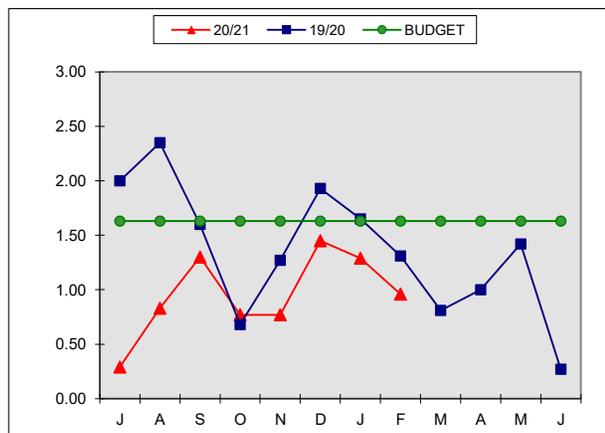
23. EMERGENCY ROOM VISITS



21. ECGS

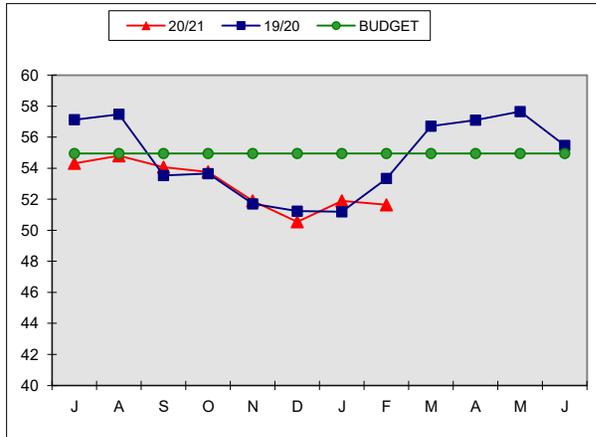


24. AVERAGE DAILY CENSUS - ACUTE

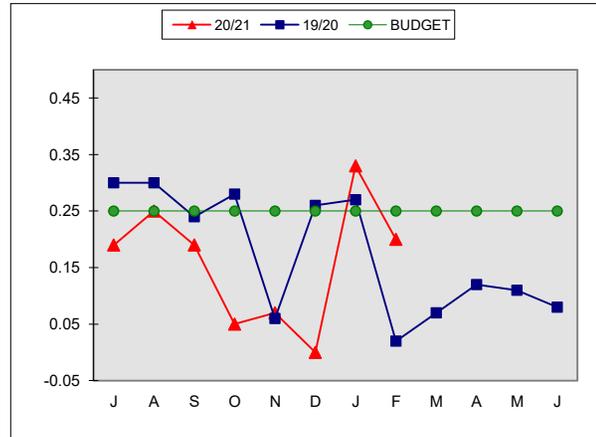


EASTERN PLUMAS HEALTH CARE
MONTHLY FINANCIAL GRAPHS
FOR THE YEAR ENDED JUNE 30, 2021

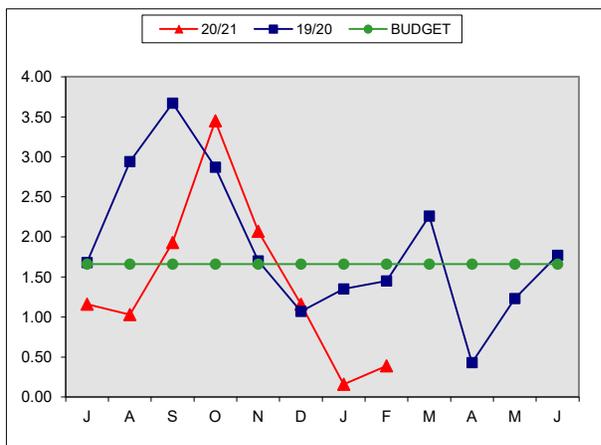
25. AVERAGE DAILY CENSUS - SNF



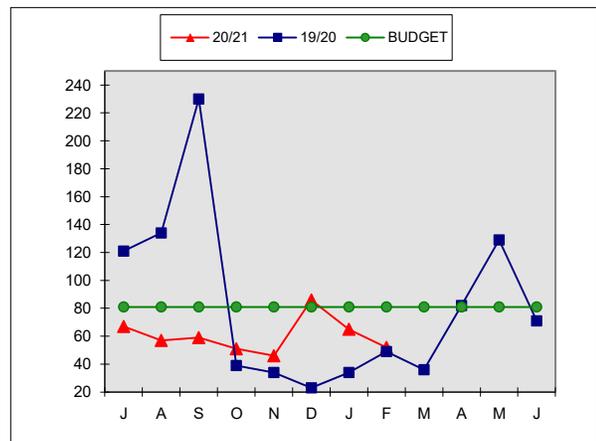
28. AVERAGE DAILY CENSUS - OBSERVATION



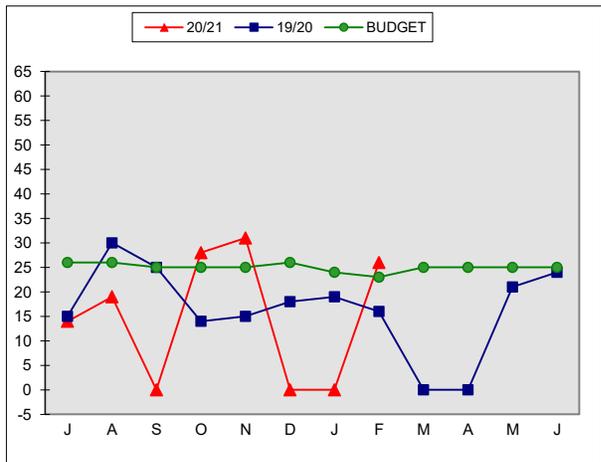
26. AVERAGE DAILY CENSUS-SWING



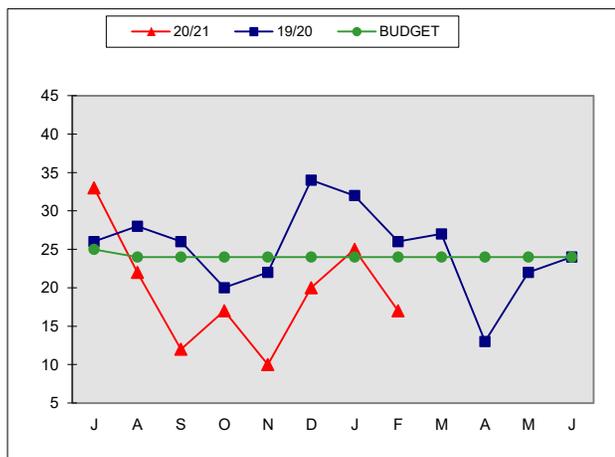
29. TELEMEDICINE VISITS



27. ENDOSCOPY PROCEDURES

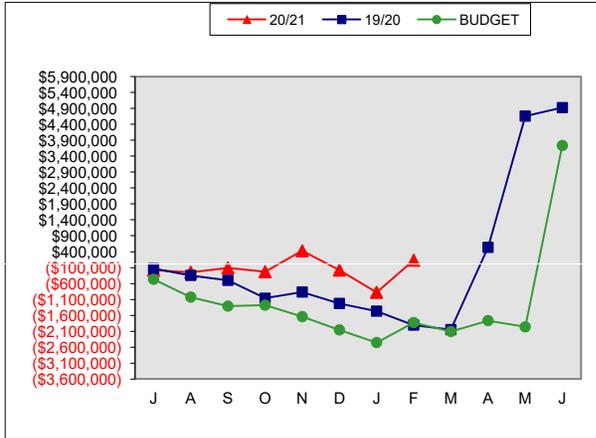


30. EMERGENCY DEPARTMENT TRANSFERS

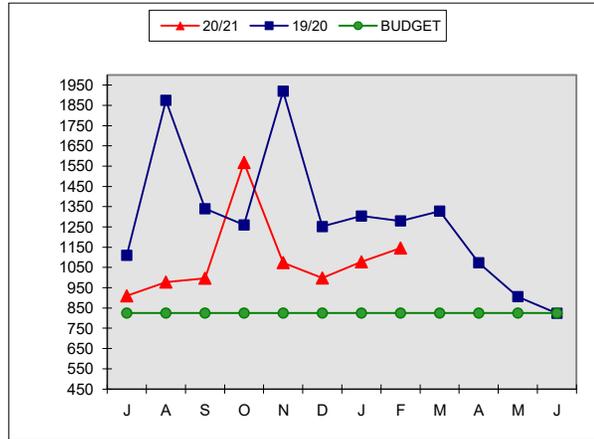


**EASTERN PLUMAS HEALTH CARE
MONTHLY FINANCIAL GRAPHS
FOR THE YEAR ENDED JUNE 30, 2021**

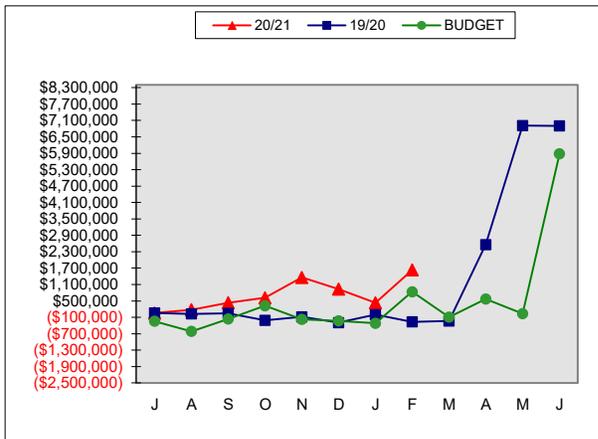
31. YEAR TO DATE OPERATING INCOME (LOSS)



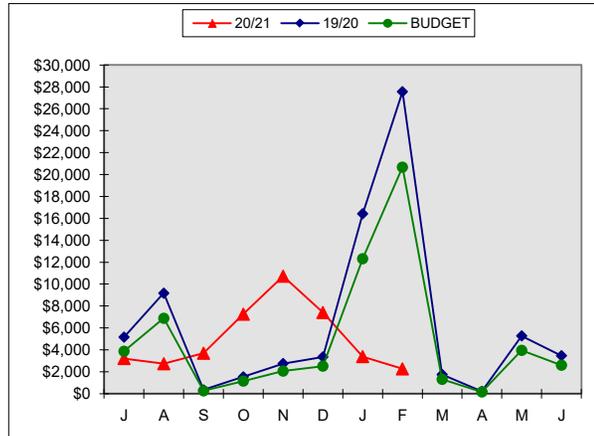
34. OVERTIME HOURS



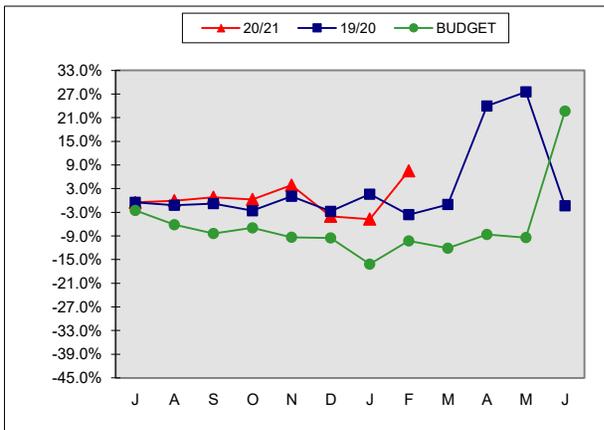
32. EARNINGS BEFORE INTEREST, DEPRECIATION & AMORTIZATION



35. DENIALS



33. RETURN ON EQUITY



EPHC Operating Plan Outline January- June 2021

Goals	Objectives	Measurements/ Actions	Timing	Responsibility	Status
Quality and Customer Service Provide the highest level of quality patient care to meet the EPHC mission through exceptional patient experience, efficient care delivery, and regulatory compliance.	1. SNF annual survey results below CA State average and no citation over 'E' S/S	1. Total deficiencies under the CA State average and no citation over 'E' S/S	March 31, 2021	DON, CNO, CEO	CMS/CDPH annual surveys continue to be on hold due to COVID. Mock survey chart reviews continue through outside vendor.
		2. No more than 3 Life Safety citations at a level 'D' S/S	March 31, 2021	Plant Ops Mgr	Plant manager completed site reviews for necessary corrections. Will monitor correction completion weekly.
		3. Meet 95% RN SNF coverage requirements for Q1 and 100% for Q2.		DON	
	2. Implementation of 'ITPE' program throughout EPHC to include training for current and new staff, and measurable impact to positive customer experience	1. Training for all staff, providers, and Board members.	May 19, 2021	CEO	Date modified to May 18-19 due to COVID
		2. HCAHPS survey response rate increase of 50% over 2020 average.	June 30, 2021	QA Manager, Pt Exp Mgr	
		3. Patient satisfaction tracking system implemented in SNFs with 85% positive results received quarterly. Increase family response rate to 65%.	March 31, 2021	DON, Pt Exp Mgr	
		4. Positive customer response rate to increase by 20% over 2020 average.	June 30, 2021	Pt Exp Mgr	
		5. (10) customer testimonials posted to EPHC website, Kaleidoscope display, and Facebook page per month.	March 31, 2021	Public Relations/Pt Exp Mgr	Patient Experience Survey posted to website on 2/22/21
		6. 'ITPE' training and expectations added to new hire and department orientation	May 31, 2021	Pt Exp Mgr	Date modified due to COVID restrictions for presentation. New date 5/18-19
	3. Upgrade AHT software for electronic order entry	1. Complete vendor demonstration project	January 31, 2021	DON/SNF Medical Director	AHT demonstration completed. Initial 'Point Click Care' demo awaiting scheduling to compare software platforms.
		2. Review cost and IT software integration	February 15, 2021	IT Mgr/CFO	Completed - decision pending EPIC, Cerner, and Point Click Care demonstration project
		3. Review EPIC product demonstration and option for SNF EMR solution. 3/15 update - add demonstrations for Cerner and Point Click Care platforms	Revised date to include Cerner demo - April 30, 2021	Exec Team	Issue identified with third party EPIC vendor in February. Identifying new EPIC vendor for demo and added a review of the Cerner EMR platform (used by PDH)
	4. Complete Price Transparency mandate (CMS)	1. Access to Patient Liability Estimator	March 31, 2021	CFO and Finance Team	In process
	5. Implement behavioral health tele-med program for both SNF campuses.	1. Install telehealth units at both campuses	February 20, 2021	CEO, IT Manager	Completed 2/19
		2. Complete training of staff and providers on telehealth program and initiate treatments.	March 1, 2021	Behavioral Health Team	Completed 2/26

EPHC Operating Plan Outline January- June 2021

Goals	Objectives	Measurements/ Actions	Timing	Responsibility	Status
	6. Ensure optimal standards of care are being met by Medical Providers.	1. Obtain an Memorandum of Understanding with an equivalent medical facility or medical group to perform routine peer reviews of like providers.	March 31, 2021	CNO, CEO	
		2. Obtain, inservice and implement software to assist with appropriate admissions, treatment and length of stay per current standards of care.	March 31, 2021	CNO, ER Manager, Medical Director	Bid received and approved. Puchase complete through MCG. Software is installed pending teaching to MD, Nursing staff
	7. Promote continuity of excellent, reliable, patient care through stable staffing.	1. Seek a staffing model that has more full time and part time staff as opposed to travelers and casual per diems.	June 30, 2021	CNO, SNF DON, ER Manager	3/16 - PTO cash out policy updated to reduce employee issues during critical staffing. On call program for ER/Acute/EMS in development.
		2. If this model fails to fill staffing holes, institute call or float positions.			
Medical Staff Recruit and retain qualified medical/clinical professionals to consistently serve the needs of the community	1. Recruit and hire a qualified FNP or PA in the clinics to meet primary care and walk-in/acute episodic needs	1. Successful candidate hired, credentialed and onboarded.	June 30, 2021	Clinic Director, HR	2/19 Initial interview process completed. Finalists scheduled for second review with leadership and Clinic Medical Director. 3/8 Full time NP hired for Portola. 3/16 3-day per week D.O. physician hired for Graeagle - both in credentialing process.
	2. Promote emotional health of all EPHC staff.	1. Coordinate mental health services through Behavioral Health to staff members either individually or as a group.	June 30, 2021	CNO, Clinic Director, HR Director	3/22/2021 Have spoken with Tracy Studer RN Case Manager Staff can access services as needed but Mental health will not do group settings. The goal of mental health is that every person has a primary provider.

EPHC Operating Plan Outline January- June 2021

Goals	Objectives	Measurements/ Actions	Timing	Responsibility	Status
Human Resources Align organizational objectives with Human Resource initiatives in key focus areas in recruitment, staffing, retention, smart technology, performance management, skills development, workforce agility and resiliency. Build workforce capabilities to maximize internal talent pool.	1. Grow performance capabilities and performance assesment through an improved evaluation and assesment process including semi-annual informal review.	<ul style="list-style-type: none"> - Delivery of department survey/feedback to gain input on desired performance evaluation tool (form). - Identify critical competencies within each job family. - Incorporate competency development milestones into Annual Performance evaluation process 	June 30, 2021	HR/ Department Mangers	
	2. Utilize technology to increase productivity, drive efficiency and create simplification of processes.	<ul style="list-style-type: none"> - Train managers in the full-cycle recruiting process to include interview skills, ability to attract and retain highly qualified candidates during screeing and interview process, recognizing unconscious bias, and promoting EPHC's competitive total compensation package. Grow manager involvement in recruiting.com tool to deselect unqualified candidates or commucation pathway to HR. - Collect and analyze data to better understand recruiting candidate selection or disqualification. - Move HR processes away from paper and towards electronic automation. - Explore HRIS for a comprehensive recruiting management system, employee self-service. 	June 30, 2021- December 2021	HR/ Department Mangers	

EPHC Operating Plan Outline January- June 2021

Goals	Objectives	Measurements/ Actions	Timing	Responsibility	Status
		2. Develop retention strategies for new students to meet retention target of 75% in year one.	May 1, 2021	DON, HR Director, DSD	
	8. Increase employee engagement through week long recognition events quarterly	Establish event schedule and daily activities/gift items using December holiday model which received positive campus wide feedback.	March 31, 2021 then quarterly	Exec Team, Executive Assistant	Employee engagement event held 3/17.
	9. Implement annual employee engagement survey process	Review industry models and select survey format to be used throughout EPHC.	June 1, 2021	Exec Team	
Financial Performance Maintain and grow the financial position of the organization, meet regulatory requirements, and increase efficiencies to meet operational objectives.	1. Trubridge RCM implementation	Reduction in hours needed to complete daily deposit	March 31, 2021	Controller/CFO	Started
	2. Improvements to Business Office/HIM Building	Allow for COVID distancing requirements and add break and meeting rooms	September 1, 2021	Maintenance/CFO	Meet with CFO to get vision of project
	3. Increase swing bed census	Schedule presentations to Case Management Departments at Renown, St. Mary's, Northern Nevada, and Tahoe Forest on EPHC rehab and clinical capabilities.	April 30, 2021 based on COVID restrictions	Case Manager, CEO, CNO, Rehab Director	3/8 - Swing beds reopened based on modification to COVID emergency plan.
Market Position Maximize community confidence and referral source knowledge regarding the services provided by EPHC and increase utilization across all lines of business.	1. Develop and market SNF respite program	1. Develop program to include amenities, services, and care delivery/admissions process	March 31, 2021	DON, CEO, CNO	
		2. Develop print and electronic marketing materials to distribute to the public and County Social Service agencies	March 31, 2021	Public Relations	
		3. Admit two respite admissions per month	April 30, 2021	DON	
		4. Present program to EPHC providers and County Social Services to generate referral volume	March 31, 2021	CEO, DON, CNO, SNF Medical Director	
	2. Increase SNF census by 4 ADC through increased short term rehab admissions	1. Develop a marketing campaign to highlight therapy services, specialties and equipment.	March 15, 2021	Rehab Director, Public Relations	SNF census has increased by 3 ADC since Feb 1st.
		2. Develop provider specific marketing materials to increase hospital and direct referrals	April 15, 2021	Public Relations	
		3. Meet with area hospital case managers to present capabilities and therapy programs	April 30, 2021	CEO, DON, Rehab Director	
		Review state requirements, needs assessment, and ROI for Home Health program	March 31, 2021	Exec Team	Needs assessment and requirements reviewed. Proposal placed on hold to focus on internal staffing/provider recruitment and growth in current services.
	3. Complete feasibility study for EPHC Home Health Program				

EPHC Operating Plan Outline January- June 2021

Goals	Objectives	Measurements/ Actions	Timing	Responsibility	Status
	4. Add additional specialty services	1. Complete a community needs assessment for additional specialty services	May 31, 2021	Patient Exp Mgr, Exec Team	
		2. Complete an ROI for needs assessment results	June 15, 2021	CEO/CFO	
		3. Initiate recruitment for specialty providers	June 30, 2021	Exec Team	
	5. Implement originating site telemedicine services with Renown Regional Medical Center pursuant to Master Telemedicine Agreement	1. New Telemedicine Coordinator hired	January 30, 2021	Clinical Manager	Complete - April Downs started 1/29/21
		2. New Telemedicine Coordinator to complete all Renown Telemedicine trainings for presentation of various types of patients to distant site providers	April 30, 2021	Clinic Director, Clinical Manager	
		3. Begin scheduling and facilitation of telemedicine services with Renown	May 1, 2021	Clinic Director, Clinical Manager	
Affiliations Establish representation of EPHC on community boards and advisory committees to promote EPHC services and health care initiatives throughout the community.	1. Add EPHC membership to community organizations, boards, and government councils	1. Board member position on Portola Rotary	February 1, 2021	CEO	Completed - term begins 7/1
		2. Request addition to any City Council committees related to community health needs	February 28, 2021	CEO	Completed - EPHC currently represented on fire safety council
		3. Request addition to any County committees related to community health needs	February 28, 2021	CEO	Completed
	2. Collaborate with Sierra Nevada Journeys Program	1. Have EPHC represented on SNJs Board of Directors	March 31, 2021	CEO	Introductory meeting completed 1/29. Follow up meeting with SNJ CEO completed 2/16.
		2. Set schedule for EPHC involvement in community initiatives based on COVID restrictions	April 30, 2021	CEO	
Capital Equipment Procure necessary equipment to expand services and increase operational efficiencies.	1. Complete cost analysis and ROI for EPHC owned MRI equipment	1. Present analysis and ROI to Board for review	April 29, 2021	Radiology Mgr, CEO, CFO	
	2. Establish a safer and more efficient medical record system.	1. Research other EMR systems or design consistent workarounds with our current EMR to safeguard patients from harm.	June 30, 2021	CNO, ER Manager	EPIC demonstration presentation scheduled for 2/24/21 postponed due to third party vendor concerns. Reviewing other EPIC vendors and adding Cerner demonstration project.
	3. Auxillary capital request	1. Identify capital purchase need and submit proposal to auxillary for funding.	March 15, 2021	CFO	Done - Auxiliary donated \$40,000 towards new Dexa bone density machine replacement.
	4. Implement a HRIS software system	1. Review product demonstrations and cost estimates for HRIS implementation to increase efficiency.	May 1, 2021	HR Director, CFO	

EPHC Operating Plan Outline January- June 2021

Goals	Objectives	Measurements/ Actions	Timing	Responsibility	Status
Community Engagement Promote community awareness and confidence in EPHC care delivery, assess community needs for expansion of additional services, and engage community members in future strategic planning.	1. Create EPHC Advisory Committee with 3-5 active community members to meet monthly	1. Recruit Advisory Committee members	March 31, 2021	CEO	Final candidate list for recruitment will be completed by 2/26
		2. Set monthly Advisory Committee schedule, charter, and Board reporting process	April 15, 2021	CEO	
	2. Revitalize EPHC Foundation membership and meetings	1. Recruit new Foundation members and review charter	March 31, 2021	CEO/CFO	Final candidate list for recruitment will be completed by 2/26
		2. Develop meeting schedule/goals and objectives	April 15, 2021	CEO/CFO	
		3. Identify at least (2) key foundation fundraising events and schedule dates based on COVID restrictions.	April 30, 2021	Public Relations, Foundation membership	
	3. Increase public awareness of EPHC programs and outcomes	1. Publish EPHC updates 2x per month in Portola and Loyalton newspapers	February 28, 2021	CEO	
		2. Update website monthly on EPHC updates	February 28, 2021	Public Relations	Completed
	4. Create virtual community wellness educational presentations	1. Develop topic and speaker list	April 30, 2021	CEO, Public Relations, Mgt Team	
		2. Develop event calendar and promote through news media, website, and community postings	May 15, 2021	Public Relations	
	3. Coordinate EPHC community efforts with local groups and Government agencies	1. Develop 2021 calendar of community events EPHC will support, required staff/supplies, and marketing activities	May 15, 2021	Public Relations	Postponed due to ongoing COVID community vaccination process and continued precautions.
2. Improve relations with law enforcement to better our mutual support of each other in caring for behavioral health and violent patients.		February 5, 2021	Emergency Room Manager	Postponed by CHP - revised meeting date pending	
3. Work with Plumas/Sierra County Health Department to obtain recent Community Health Assessment.		February 28, 2021	CNO	https://www.plumascounty.us/DocumentCenter/View/28306/2020-Plumas-County-Community-Health-Assessment	
Physical Plant/Acquisitions Expand EPHC services through additional acquisitions and improve care delivery/patient satisfaction through improvements to existing physical plant operations.	1. Complete feasibility/ROI for Loyalton Clinic relocation project	1. Complete architectural drawings and construction cost estimates	Revised date based on OSHPD requirement cost review and final architectural drawings - 4/30/21	CEO	2/25 - Pending receipt from Aspen Street Architects. 3/16 site review completed by Aspen Street. Reviewing licensure and OSHPD requirements for cost estimates.
		2. Complete financial ROI and Board approval for purchase	Revised due to pending final design cost estimates - 4/22/21	CEO/CFO	3/16 - initial project cost estimate received. Final estimate pending Aspen design plans and OSHPD review.

EPHC Operating Plan Outline January- June 2021

Goals	Objectives	Measurements/ Actions	Timing	Responsibility	Status
		3. Acquire contractor bids and initiate construction based on Board approval.	Revised - 5/1/21	Plant Ops Mgr	List of contractors ready. Awaiting plans and scope
		4. Develop plan for repurposing existing clinic space.	Revised 5/1/21	Exec Team	
	2. Installation of replacement SNF boilers in Q1 of 21-22 FY	Complete architectural plans and OSHPD permitting for SNF boiler replacement	June 30, 2021	Plant Ops Mgr	2 contractors contacted. Scheduling a meeting with architects
	3. Prepare flooring replacement plan for Loylton SNF and Portola Acute to be installed in Q1 of 21-22 FY	Acquire (3) vendor bids to include installation schedule and flooring selection early in 2021/22 fiscal year.	May 31, 2021	Plant Ops Mgr	Located 2 contractors need 2 more. In progress
	4. Utilize 2nd floor of Commercial St. building for EPHC/community needs	1. Complete needs assessment for building use	February 28, 2021	Exec Team	Site review completed 2/12. Plumbing, electrical, IT and construction cost estimates in development.
		2. Based on assessment, complete architectural plan for construction needs	March 31, 2021	CEO	Cost estimates pending
		3. Obtain contractor bids and construction schedule	April 15, 2021	Plant Ops Mgr	Pending design plans
	5. Complete ED expansion and physician office project	1. Complete architectural plans for expansion proposal	March 15, 2021	CEO	2/25 - Pending receipt from Aspen Street Architects. 3/15 - plan options received. Will be reviewed with Medical Director and clinical leadership.
		2. Obtain and review cost bids for project	April 15, 2021	Plant Ops Mgr	Pending design plans
		3. Generate construction plan and vendor bids for project completion	April 30, 2021	Plant Ops Mgr/CEO/CFO	Contractor list ready, Pending design plans
	6. Review proposed rehab expansion project	1. Based on 2021 FY utilization data, determine if ROI for the rehab expansion project is viable	May 31, 2021	CEO, CFO, Rehab Mgr	Initial review with CFO/Rehab Director was favorable. Will review again after receipt of Feb financial trend report.
	7. Upgrade training space	Review space options to improve new hire and staff training room - location and equipment. Upgrade area to improve employee satisfaction and training efficiency.	March 31, 2021	IT Manager, Exec Team	IT area construction will be initiated by 3/1 to increase security and space availability. IT server area renovated for increased security.

AGENDA ITEM COVER SHEET

ITEM	CAH Committee Consent Agenda
RESPONSIBLE PARTY	Donna Dorsey, RN, BSN Emergency Room Manager
ACTION REQUESTED?	For Board Action
BACKGROUND: During the February 24, 2021 CAH Committee meeting, the committee made the following consent agenda item recommendations to the Board of Directors.	
SUMMARY/OBJECTIVES: Approval of the following consent agenda items: Annual Policy Review: <ul style="list-style-type: none">• Admitting• Laboratory• Pharmacy• Skilled Nursing	
SUGGESTED DISCUSSION POINTS: None	
SUGGESTED MOTION/ALTERNATIVES: Move to approve CAH Committee Consent Agenda as presented.	
LIST OF ATTACHMENTS: List attached.	

Policy List

PolicyStat ID	Title	Area
8949207	Patient Registration During Computer Down Time	Admitting
9079512	Back-Up Auto Instruments	Laboratory
9079527	Employee Competency Evaluation	Laboratory
9079516	Environment of Care Laboratory Safety	Laboratory
9079514	Hospital Computer System Down	Laboratory
9079530	Proficiency Program	Laboratory
9079528	Release of Results	Laboratory
9079532	Request for Services	Laboratory
9079513	Retention of Records	Laboratory
9079533	Specimen Quality Evaluation - Rejection	Laboratory
9079493	STAT Test List	Laboratory
9250713	Compounding Sterile Preparations (CSP)	Pharmacy
9079490	Elder or Dependent Adult Abuse Reporting	Skilled Nursing
9079529	Physical Restraints	Skilled Nursing