



REGULAR MEETING OF THE BOARD OF DIRECTORS  
AGENDA

Thursday, September 28, 2023 at 5:00 p.m.  
Portola Medical Clinic Conference Room, Portola, CA

The September 28, 2023 Board of Directors meeting will be held in both a virtual and an in-person setting for the general public. The Board meeting location at the Portola Medical Clinic Conference Room will be accessible to the public. The meeting is also accessible to the public via Zoom (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 Barbara Sokolov at [barbara.sokolov@ephc.org](mailto:barbara.sokolov@ephc.org) who will swiftly resolve such request.

The Board meeting is accessible to the public via Zoom:

Meeting ID: 841 0499 5766    Passcode: 988920    Dial In: +1 669 900 6833 US (San Jose)  
<https://us06web.zoom.us/j/84104995766?pwd=aVlvMjV2T3p2WHljOGVKNWtndDdxdz09>

	<u>Presenter(s)</u>	<u>I/D/A</u>	<u>Page(s)</u>
1. <u>Call to Order</u>	Augustine Corcoran	A	
2. <u>Roll Call</u>	Augustine Corcoran	I	
3. <u>Board Comments</u>	Board Members	I/D	
• Deletions/Corrections to the Posted Agenda			
4. <u>Public Comment</u>			
There will be an opportunity for public comment on each agenda item listed with an “A” for action. Comments will be limited to three minutes per individual.			
5. <u>Consent Calendar</u>	Augustine Corcoran	I/D/A	
A. Agenda			1-2
B. Meeting Minutes of 8.24.23 Regular Board Meeting			3-6
6. <u>Auxiliary Report</u>	Gail McGrath	I/D/A	
7. <u>Staff Reports</u>			
A. Chief Nursing Officer Report	Penny Holland	I/D	7
B. SNF Directors of Nursing Report	Lorraine Noble/Tamara Santella	I/D	8
C. Director of Clinics Report	Tracy Studer	I/D	9
D. Director of Rehabilitation	Jim Burson	I/D	10-11
E. Chief Financial Officer	Katherine Pairish	I/D	12-14
8. <u>Chief Executive Officer Report</u>	Doug McCoy	I/D/A	15-16
9. <u>Policies</u>		I/D/A	17-18
A. Policy Review			

The CAH Committee recommends the following for approval by the Board of Directors:

Annual Policy Review

- EOCC, Nursing, Pharmacy, Infection Prevention, SNF, Admitting, Ambulance, Acute

Regular Meeting of the Board of Directors of Eastern Plumas Health Care  
**August 24, 2023 AGENDA – Continued**

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**10. Committee Reports** Board Members I/D/A  
A. Finance Committee

**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 matters that affect the employees personally.

**12. Board Closing Remarks** Board Members I/D

**13. Closed Session** Augustine Corcoran I/D/A  
A. Hearing (Health and Safety Code 32155)  
*Subject Matter: Staff Privileges*

- Provisional 1-year appointments
  - Eisinger, Philip DO Tele Radiology
  - Gonzales, Corey PhD Psychology
  - Kuo, Kevin MD (temporary privileges approved by MEC on 9/10) Emergency Department
  - Kopec, Marcin MD Tele Radiology
- Active 2-year reappointments
  - Nielsen, Marc DO Emergency Department
  - Streit, Cara MD Obstetrics/ Gynecology

B. Public Employee Performance Evaluation (Government Code Section 54957): *CEO*

**14. Open Session Report of Actions** Augustine Corcoran I  
Taken in Closed Session

**15. Adjournment** Augustine Corcoran A

*The next regularly scheduled meeting of the Board of Directors of Eastern Plumas Health Care is October 26, 2023 at the Portola Medical Clinic Conference Room, 480 1<sup>st</sup> Avenue, Portola, CA 96122*



**EASTERN PLUMAS HEALTH CARE DISTRICT  
REGULAR MEETING OF THE BOARD OF DIRECTORS  
MINUTES  
Thursday, August 24, 2023 at 5:00 p.m.**

**1. Call to Order**

Meeting was called to order at 5:01 p.m.

**2. Roll Call**

Present: Paul Swanson, M.D., Board Member; Marcia Hughes, Board Member; Linda Satchwell, Board Member

Absent: Augustine Corcoran, Board Chair

Staff in attendance: Doug McCoy, CEO; Katherine Pairish, CFO; Penny Holland, Chief Nursing Officer; Lorraine Noble, Director of Nursing Portola; Tracy Studer, Director of Clinics; Barbara Sokolov, Executive Assistant/Clerk of the Board

**3. Board Comments**

None

**4. Public Comment**

None

**5. Consent Calendar**

- **ACTION:** Motion was made by Director McGrath, seconded by Director Hughes to approve the consent calendar with the correction to the 7.27.23 minutes that Director McGrath was not present and thus did not second the motion to approve the consent agenda.

**Roll Call Vote:** AYES: Directors Hughes, Swanson, Satchwell, McGrath

Nays: None

Not present: Director Corcoran

- **Public Comment:** None

**6. Auxiliary Report**

Director McGrath reported that all was going smoothly and productively at the Auxiliary.

**7. Staff Reports**

**A. Chief Nursing Officer Report**

Penny Holland

See August BOD report. Director Satchwell asked about Mind Ray, the new central monitoring system and Penny explained that it would communicate with the new EMR and provide full screen monitoring at the nurses' station.

**B. SNF Directors of Nursing**

Lorraine Noble/Tamara Santella

See August BOD report. Lorraine noted that the census was up to 58 with 27 in Portola and 31 in Loyalton. She shared that Dr. Stanton had told her that he sends kudos to EPHC for the great care provided to him and other patients.

**C. Director of Clinics**

Tracy Studer

See August BOD report. Tracy shared that the Clinics team had created a wonderful Employee Engagement Event serving root beer and orange floats to all EPHC staff. Discussed move to telehealth OB care with Director Satchwell.

D. Chief Financial Officer

Katherine Pairish

Due to the Cerner transition and impacts to revenue cycle reporting, no financial statements are available for reporting this month, but the finance team is getting caught up and is close to being able to have regular reports again. Katherine revised the budget to reflect less conservative IGT estimates, the reduced rate of reimbursement for SNF patients, and reduced rental revenue from dental office closure in Loyalton. The result was \$1.8 million net profit. Doug noted that efficiencies have decreased expenses year over year, that the anticipated volume was accurate and reflected anticipated growth, and that there had been no modifications to the capital budget. Director Satchwell then moved directly to item 10 on the Agenda to accommodate Dr. Swanson being on call in the Emergency Department.

**8. Chief Executive Officer Report**

Doug McCoy

**OPERATIONAL OVERVIEW:**

The Cerner post implementation project continues to be the primary operational focus for the EPHC management team during August. We continue to review all departments for documentation, coding, and revenue charges, and modify workflows as needed. Items that were not completed in the original build are also identified on the daily reviews with tickets generated for support through either our internal HIT team or Cerner. The Finance Department still is unable to generate financial statements through July, but progress has been made over the last 30 days. We have engaged a third-party vendor with Cerner expertise to assist with the revenue cycle process.

Given our ongoing focus with streamlining workflows and utilization of the new EMR system, we have made the decision to postpone the LTC module implementation indefinitely. Our planned go-live for the LTC module had been mid-October but feel our lack of available resources could prevent a successful implementation. Our current AHT system is not sunsetting and workflows have been established to continue documentation and billing integration with the Cerner system.

The Plant Operations Department completed the renovation project for the physician call house this month. The project was extensive and now provides a significant upgrade and modernization to reflect the high quality provided by our emergency physicians. The administration building also received a small remodel project and will include the redesign of the billing area to create additional office space for our new Patient Financial Services Manager. The upcoming priority projects include the installation of the fire panel in Portola, renovation of the purchasing/physician documentation area, replacement of the main lobby doors, and continuation of the flooring project in Loyalton.

The Loyalton clinic HVAC system was installed mid-August and we are awaiting the final equipment and computers in preparation for the grand opening event. Our Wipfli consulting group will be on campus August 23<sup>rd</sup> to conduct a mock certification survey. We reviewed the CMS accreditation survey process with the Compliance Team which is the organization contracted by CMS to complete the survey process. Once they receive notification from EPHC on our survey readiness we will expect their arrival within 6-8 weeks. This will not delay the opening of the clinic.

EPHC will be providing a health and wellness fair for the community on Saturday August 26<sup>th</sup> in Portola. We have approximately 25 booths providing information on preventative care, financial assistance, Cal Aim services, utility support, and job opportunities within our organization. We are excited to offer this event to the district and look forward to a well-attended event.

Congressman Kevin Kiley is tentatively planning to attend a town hall event in Loyalton to discuss the water project that EPHC has been participating in for the past year. The appropriations finding request

that was submitted in March successfully made it through the sub-committee hearing for 2.2 million dollars, and we continue to work with the Congressman's office as the bill proceeds to the final appropriations process in September. I am looking forward to speaking with the Congressman in detail on this project as well as health care related topics and legislation which are important to our community.

Both Joanna Garneau and Pat McCarthy representing our EPHC Foundation Board attended a rural grant training program held on August 2<sup>nd</sup>. This program provided additional grant opportunities which can be accessed by EPHC, and we appreciate the interest by the Foundation in supporting and assisting with future project funding.

CHI Optima which provide our insurance coverage completed an onsite risk assessment earlier this month. The process included a detailed review of our policies and procedures, risk mitigation plan, and campus tour. The result was a score of 4.4 on a 5-point scale which indicated that our processes were working well to ensure proper patient care and safety. Recommendations from the assessment will be shared with the management team for implementation.

Our ongoing seismic planning project was reviewed on August 11<sup>th</sup> with the Aspen Street Architects for both SPC and NPC standards. Both plans are required to be submitted to HCAI by January 1, 2024. The SPC standards for the structural requirements of the hospital have already received a preliminary review by HCAI. The NPC standards which include large equipment bracing, emergency power, temporary water/sewer services, etc. are in development. EPHC will be participating in an HCAI compliance seminar for NPC standards at the end of the month, followed by completion of the plan for submission at the end of the year.

#### **COMPLIANCE PROGRAM:**

There were no compliance reviews initiated for the period of July 22<sup>nd</sup> through August 18<sup>th</sup>.

Doug also reported that Dr. Ryan Sipher had joined the ED and was receiving positive reviews and that another physician was also interested in joining the ED. Taryn Russell will be starting in Finance in early October and a new physical therapist had recently come on board as well.

#### **9. Policies**

Public Comment: None.

**ACTION:** Motion was made by Director Hughes, seconded by Director McGrath to approve all policies.

**Roll Call Vote:** AYES: Directors McGrath, Hughes, Swanson, Satchwell

Nays: None

Not present: Director Corcoran

#### **10. Committee Reports**

Board Members

I/D/A

##### **A. Finance Committee**

Director Swanson reported there had been no Finance Committee meeting due to Director Corcoran's absence. Director Swanson explained that he had spoken with Katherine and Doug since the last meeting and that they had satisfied the concerns he had raised about the budget last month.

- **ACTION:** Motion was made by Director Swanson, seconded by Director Hughes to approve the budget.

**Roll Call Vote:** AYES: Directors Hughes, Swanson, Satchwell, McGrath

Nays: None

Not present: Director Corcoran

- **Public Comment:** None

**11. Public Comment**

None.

**12. Board Closing Remarks**

Director Satchwell commended Doug for his report and the positive trends across the board at EPHC.

**Open Session recessed at 5:44 p.m.**

**13. Closed Session**

**A. Hearing (Health and Safety Code 32155)**

*Subject Matter: Staff Privileges*

- **Active 2 Year Appointments**

- Brooks, Michael DPM
- Printz, Richard MD
- Swanson, Paul MD
- Althaus, Sandra MD
- Carlevato, Nicolas MD
- Goldberg, Eric MD
- Jackson, Leon MD
- Leckie, Robert MD

- Clinic/ Podiatry
- Clinic/ Gynecology
- Emergency Department
- Tele Radiology
- Tele Radiology
- Tele Radiology
- Tele Radiology
- Tele Radiology

**B. Public Employee Performance Evaluation (Government Code Section 54957): *CEO***

**14. Open Session Report of Actions Taken in Closed Session**

The Board returned at approximately 10:40 am

**A: ACTION-** The Board unanimously approved a motion to provide staff privileges to all persons listed on agenda item 13.A.

**B: No Action Taken.**

**C: No Action Taken.**

**15. Adjournment**

Meeting adjourned at 6:00 p.m.

Eastern Plumas Health Care  
Board Report  
Penny Holland CNO

9/28/2023

We had a surprise visit from state surveyors to review our charts and we only had a few small issues to correct. We are still awaiting a full survey for the hospital any day.

Plan to employ clinical experts of Cerner to help with workflows for the clinical team on acute and ER.

Obtaining quotes for a new Lab Analyzer which the auxiliary has graciously offered to help purchase. The one currently in the lab has at least 10 yrs on it and has occasionally gone down. The lab is a vital component to the community so we would like to update the equipment to meet the demands.

Working with two new ER doctors Dr. Sipherd and Dr. Kuo

Have had two meetings with Renown on transfers and request for return of patients for swing stays. Will be attending a symposium in October to collaborate with Renown and other hospitals in our area.

Eastern Plumas Health Care  
Nursing Division  
Skilled Nursing Facilities  
Board Report 09/19/2023  
by Lorraine Noble RN & Tamara Santella RN

Financials and Productivity:

	February	March	April	May	June	July	August
<b>LOYALTON</b> -actual census for month	<b>27.17</b>	<b>28.93</b>	<b>30.22</b>	<b>30.93</b>	<b>30.33</b>	<b>31.03</b>	<b>30.80</b>
admits	1	2	1	1	1	1	1
discharges	0	0	0	2	1	1	1
<b>PORTOLA</b> -actual census for month	<b>25.71</b>	<b>26.61</b>	<b>27</b>	<b>27</b>	<b>27</b>	<b>26.93</b>	<b>26.58</b>
admits	1	1	0	0	0	0	1
discharges	1	0	0	0	0	1	0
<b>TOTAL CENSUS for month</b>	<b>52.88</b>	<b>55.54</b>	<b>57.22</b>	<b>57.93</b>	<b>57.33</b>	<b>57.96</b>	<b>57.38</b>

Staffing:

- We are still using one traveling LVN and 2 C.N.A.s at the Loyalton campus. CNA traveler contracts ending Mid October.
- Nursing Assistant Training Program completed August 15<sup>th</sup>. All have been hired on and are currently training so we will be able to cancel C.N.A. travelers soon.
- Still looking for a FT dayshift nurse in Loyalton.

State Issues:

State at Loyalton campus on 8/23/23- no deficiencies.

State at Loyalton campus 9/19/23 for COVID outbreak in Loyalton- no deficiencies

No annual survey as of yet. Last date of annual survey was May 2022.



Eastern Plumas Health Care  
Board Report  
Tracy Studer Director of Clinics

09-28-2023

Progress is being made in licensing of the new Loyalton Medical Clinic. Installation of the new HVAC system was completed on Tuesday, August 15<sup>th</sup>. The air distribution system needs to be balanced for the HVAC prior to being signed off by the architect to submit to Wipfli.

A meeting with departments of EPHC occurred on 9/20/2023 to enlist their support and assistance for important items needed for licensing. The meeting was very productive.

Communication continues with Wipfli staff, with the most recent meeting on Monday, September 25<sup>th</sup>.

The acting Telehealth coordinator and our Behavioral Health Case Manager are gaining ground in bringing the Behavioral Health department back to its previously productive state. Behavioral Health has deeply missed an important part of the department when Trish Foley, LMFT, left in June 2022. The Telehealth department has a psychiatrist, and two psychologists (one needing credentialing) with limited availability. My hope continues to hold strong in finding a LMFT or LCSW to complete the Integrated Behavioral Health into Primary Care Model the department is based upon.

On Thursday, 9/21/2023, our team met with Stacy Olson (Director, Musculoskeletal Physician Services) and Scott Baker (Vice President, Provider Services) from Tahoe Forest Hospital. The meeting was successful and EPHC made one large step closer to having an orthopedic physician assistant work two to four times per month in our clinics.

Four EPHC clinic employees have enrolled in a Medical Assistant program with US Career Institute. The students are excited to begin the program. The clinic has also identified four medical assistants who would like to learn the role of registration clerk. This flexibility will help the clinics immensely, especially when wintertime snow arrives and only three of us make it to work.

Eastern Plumas Health Care  
Board Report  
Jim Burson-Director of Rehabilitation

Date: September 28, 2023

Reporting for June, July, August

1. Swallow Evaluations are, once again, available in our Portola and Loyalton facilities, as well as the Therapy and Wellness Center. The contract Speech Pathologist providing this service is also interested in providing limited follow-up care and education. Meanwhile, we continue efforts to recruit a staff SLP.
2. Our Inpatient/SNF therapy census has largely recovered following our EHR conversion including an uptick in Swing bed rehab admissions.
3. The Outpatient census has improved since my report in June. We are now down 3% over last year at this time vs. being down 27%, previously. Missing 2 P.T.s and a Speech Pathologist this Summer held our numbers down. Fortunately, we're now fully staffed with Physical Therapists and our Active Patient census is climbing with the August census exceeding that of last year by 8%. Also, we received a record number of monthly new patient referrals in August at 91 (more than doubled, year over year). As of September 15th, we've received 31 referrals, which is trending upward compared to this time last year.
4. Cardiac Rehabilitation was rolled out in August, at the Therapy and Wellness Center, and I want to thank Cardiologist, Milind Dhond, for agreeing to be our Medical Director for the program. We've received several referrals to date.
5. We're moving forward with the Pediatric Occupational Therapy clinic on our Loyalton SNF campus and we expect to be operational this Fall.

6. Minimizing outpatient same-day cancellations for the last 3 months has been successful. Our goal was no more than 2/ day and we achieved 1.8. I give credit to our persistent and caring front desk and clinical staff.

**Eastern Plumas Health Care**  
**Financial Statements – Board Report**  
**June 2023**

**Summary**

These financials are in DRAFT status, as always, until the audit is complete. Our auditor will be onsite the first week of October to conduct the annual audit.

**Revenues (Year-to-Date)**

Net Patient Revenues were under budget by \$2,321,955. IGT payments were over budget by \$1,103,045 leaving our Net Operating Revenue under budget by \$778,062. Included in Non-Operating Income is the final recognition of COVID monies of \$3,118,505, Test to Treat Grant of \$433,928; ARP Ship Grant of \$258,376 and Workers Retention Pay of \$293,708.

**Expenses (Year-to-Date)**

**Salaries and Benefits:** Combined Salaries and Benefits were under budget by \$173,056.

**Professional Fees:** Professional Fees were over budget by \$192,594.

**Repairs & Maintenance:** Repairs & Maintenance were over budget by \$256,736.

**Utilities:** Utilities were under budget by \$218,355.

**Supplies:** Supplies were under budget by \$304,772.

**Purchased Services:** Purchased Services were over budget by \$1,820,143.

**Depreciation Expense:** Depreciation Expense was under budget by \$464,331.

**Other Expenses:** Other Expenses were under budget by \$129,131. These include training, travel, and dues and subscriptions.

**Revenue Cycle**

Gross Accounts Receivable as of June 30, 2023, was \$13.2 million. Gross Accounts Receivable days were 102. The uptick is due to the Cerner transition.

**Balance Sheet**

Total Assets decreased by 6.76%. Long Term Debt decreased by 6.52%.

**Additional Information**

Days cash on hand on June 30, 2023, was 166. We projected 164. Our cash position is still very strong.

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

	FYE	FYE	FYE	FYE	FYE 2023-2022	
	as of 6/30/23	6/30/2022	6/30/2021	6/30/2020	\$ Change	% Change
<b>Assets</b>						
<b>Current Assets</b>						
Cash	\$ 1,353,855	\$ 740,558	\$ 232,905	\$ 4,320,352	\$ 613,297	82.82%
Short-term investments (LAIF)	\$ 15,470,234	\$ 25,096,060	\$ 21,930,015	\$ 18,241,458	\$ (9,625,826)	-38.36%
<b>Total Cash and Equivalents</b>	<b>\$ 16,824,088</b>	<b>\$ 25,836,618</b>	<b>\$ 22,162,920</b>	<b>\$ 22,561,810</b>	<b>\$ (9,012,530)</b>	<b>-34.88%</b>
Patient Accounts Receivable	\$ 13,179,004	\$ 6,909,935	\$ 6,470,604	\$ 4,681,554	\$ 6,269,069	90.73%
Accounts Receivable Reserves	\$ (5,666,205)	\$ (2,455,255)	\$ (2,213,336)	\$ (1,629,446)	\$ (3,210,950)	130.78%
<b>Net Accounts Receivable</b>	<b>\$ 7,512,799</b>	<b>\$ 4,454,680</b>	<b>\$ 4,257,268</b>	<b>\$ 3,052,108</b>	<b>\$ 3,058,119</b>	<b>68.65%</b>
<b>% of Gross Account Receivables</b>	<b>57.0%</b>	<b>64.5%</b>	<b>65.8%</b>	<b>65.2%</b>		
Inventory	\$ 549,293	\$ 482,121	\$ 326,433	\$ 248,093	\$ 67,172	13.93%
Other Assets	\$ 1,097,130	\$ 475,687	\$ 4,414,625	\$ 632,115	\$ 621,443	130.64%
<b>Total Other Assets</b>	<b>\$ 1,646,423</b>	<b>\$ 957,808</b>	<b>\$ 4,741,058</b>	<b>\$ 880,208</b>	<b>\$ 688,615</b>	<b>71.89%</b>
<b>Total Current Assets</b>	<b>\$ 25,983,311</b>	<b>\$ 31,249,106</b>	<b>\$ 31,161,246</b>	<b>\$ 26,494,126</b>	<b>\$ (5,265,795)</b>	<b>-16.85%</b>
<b>Fixed Assets</b>						
Land	\$ 1,166,344	\$ 1,123,344	\$ 1,123,344	\$ 1,123,344	\$ 43,000	3.83%
Buildings	\$ 15,220,840	\$ 14,931,290	\$ 14,850,753	\$ 14,675,399	\$ 289,550	1.94%
Capital Equipment	\$ 15,271,224	\$ 14,825,652	\$ 14,416,638	\$ 13,853,920	\$ 445,572	3.01%
In Progress	\$ 2,696,362	\$ 493,536	\$ 567,707	\$ 92,788	\$ 2,202,826	446.34%
<b>Total Plant &amp; Equipment</b>	<b>\$ 34,354,769</b>	<b>\$ 31,373,822</b>	<b>\$ 30,958,442</b>	<b>\$ 29,745,451</b>	<b>\$ 2,980,947</b>	<b>9.50%</b>
Accumulated Depreciation	\$ (22,741,282)	\$ (22,298,728)	\$ (21,344,073)	\$ (20,172,201)	\$ (442,554)	1.98%
<b>Net Fixed Assets</b>	<b>\$ 11,613,487</b>	<b>\$ 9,075,094</b>	<b>\$ 9,614,369</b>	<b>\$ 9,573,249</b>	<b>\$ 2,538,394</b>	<b>27.97%</b>
<b>Total Assets</b>	<b>\$ 37,596,798</b>	<b>\$ 40,324,200</b>	<b>\$ 40,775,615</b>	<b>\$ 36,067,375</b>	<b>\$ (2,727,402)</b>	<b>-6.76%</b>
<b>LIABILITIES AND RETAINED EARNINGS</b>						
<b>Current Liabilities</b>						
Accounts Payable	\$ 632,467	\$ 663,700	\$ 879,257	\$ 457,639	\$ (31,233)	-4.71%
Accrued Payroll & Benefits	\$ 1,032,440	\$ 1,139,613	\$ 1,064,653	\$ 1,353,338	\$ (107,173)	-9.40%
Other Current Liabilities	\$ 5,198	\$ 5,133,900	\$ 8,859,118	\$ 12,517,351	\$ (5,128,702)	-99.90%
<b>Total Current Liabilities</b>	<b>\$ 1,670,105</b>	<b>\$ 6,937,213</b>	<b>\$ 10,803,028</b>	<b>\$ 14,328,328</b>	<b>\$ (5,267,108)</b>	<b>-75.93%</b>
<b>Long-Term Liabilities</b>						
Loans	\$ 4,483,448	\$ 4,796,184	\$ 5,207,354	\$ 5,984,773	\$ (312,736)	-6.52%
Capitalized Leases	\$ -	\$ -	\$ -	\$ -	\$ -	0.00%
<b>Total Long Term Liabilities</b>	<b>\$ 4,483,448</b>	<b>\$ 4,796,184</b>	<b>\$ 5,207,354</b>	<b>\$ 5,984,773</b>	<b>\$ (312,736)</b>	<b>-6.52%</b>
Deferred Revenue	\$ -	\$ -	\$ -	\$ -	\$ -	0.00%
<b>TOTAL LIABILITIES</b>	<b>\$ 6,153,553</b>	<b>\$ 11,733,398</b>	<b>\$ 16,010,382</b>	<b>\$ 20,313,101</b>	<b>\$ (5,579,845)</b>	<b>-47.56%</b>
<b>Fund Balance</b>	<b>\$ 31,443,245</b>	<b>\$ 28,590,802</b>	<b>\$ 24,765,233</b>	<b>\$ 15,754,274</b>	<b>\$ 2,852,443</b>	<b>9.98%</b>
<b>TOTAL LIABILITIES AND FUND BALANCE</b>	<b>\$ 37,596,798</b>	<b>\$ 40,324,200</b>	<b>\$ 40,775,615</b>	<b>\$ 36,067,375</b>	<b>\$ (2,727,402)</b>	<b>-6.76%</b>

Eastern Plumas Health Care  
Income Statement  
DRAFT  
For the Year Ended June 30, 2023

	% Net Pt Revenue	Actual	Year-to-Date Budget	\$ Variance
<b>1 REVENUE</b>				
2 Inpatient Revenue		\$ 2,592,876	\$ 4,111,126	\$ (1,518,250)
3 Inpatient Revenue - Swing Bed		\$ 1,443,500	\$ 1,872,000	\$ (428,500)
4 Inpatient Revenue - SNF		\$ 8,776,699	\$ 9,490,000	\$ (713,301)
5 Inpatient Revenue		\$ 12,813,075	\$ 15,473,126	\$ (2,660,051)
6 All Pro Fees		\$ 3,646,902	\$ 3,702,305	\$ (55,403)
7 Outpatient Revenue		\$ 24,321,854	\$ 26,441,447	\$ (2,119,593)
8 Clinics		\$ 5,579,431	\$ 5,635,235	\$ (55,804)
9 Total Patient Revenue		\$ 46,361,262	\$ 51,252,113	\$ (4,890,851)
10 Contractual Allowances		\$ (14,970,730)	\$ (17,336,584)	\$ 2,365,854
11 Charity Discounts		\$ (153,983)	\$ (129,990)	\$ (23,993)
12 Other Allowances		\$ (289,150)	\$ (421,479)	\$ 132,329
13 Bad Debt		\$ (753,916)	\$ (848,624)	\$ 94,708
14 Total Deductions		\$ (16,167,781)	\$ (18,736,677)	\$ 2,568,896
15 Net Patient Revenue		\$ 30,193,481	\$ 32,515,436	\$ (2,321,955)
16 % of Gross Revenue	65.13%		63.44%	1.68%
17 Meaningful Use Revenue		\$ -	\$ -	\$ -
18 Quality Payments		\$ 320,762	\$ 3,200	\$ 317,562
19 IGT Payments		\$ 6,882,848	\$ 5,779,803	\$ 1,103,045
20 Other Operating Revenue		\$ 215,486	\$ 92,200	\$ 123,286
21 Total Operating Revenue		\$ 37,612,577	\$ 38,390,639	\$ (778,062)
<b>22 EXPENSES</b>				
23 Salaries and Wages	51.3%	\$ (15,488,602)	\$ (15,850,720)	\$ 362,118
24 Employee Benefits	21.2%	\$ (6,388,691)	\$ (6,199,629)	\$ (189,062)
25 Professional Fees - Medical	10.7%	\$ (3,230,751)	\$ (3,170,649)	\$ (60,102)
26 Professional Fees - Other	0.7%	\$ (224,692)	\$ (92,200)	\$ (132,492)
27 Supplies	8.9%	\$ (2,700,214)	\$ (3,004,986)	\$ 304,772
28 Purchased Services	19.1%	\$ (5,755,785)	\$ (3,935,642)	\$ (1,820,143)
29 Insurance	1.3%	\$ (403,885)	\$ (480,466)	\$ 76,581
30 Rental and Leases	0.2%	\$ (74,415)	\$ (63,812)	\$ (10,603)
31 Repairs and Maintenance	2.5%	\$ (748,474)	\$ (491,738)	\$ (256,736)
32 Utilities and Telephone	3.5%	\$ (1,065,765)	\$ (1,284,120)	\$ 218,355
33 Depreciation Amortization	3.8%	\$ (1,150,158)	\$ (1,614,489)	\$ 464,331
34 Other Expenses	2.2%	\$ (671,421)	\$ (800,552)	\$ 129,131
35 Total Operating Expenses	125.5%	\$ (37,902,853)	\$ (36,989,003)	\$ (913,850)
36 Income From Operations	-1.0%	\$ (290,276)	\$ 1,401,636	\$ (1,691,912)
37 Tax Revenue	-2.6%	\$ 785,562	\$ 665,000	\$ 120,562
38 Non Capital Grants and Donations	0.0%	\$ -	\$ 408,000	\$ (408,000)
39 Interest Income	-1.1%	\$ 324,768	\$ 175,000	\$ 149,768
40 Interest Expense	0.7%	\$ (218,722)	\$ (207,742)	\$ (10,980)
41 Non-Operating Income (Expenses)	-14.1%	\$ 4,251,627	\$ 69,940	\$ 4,181,687
42 Total Non-Operating Gain (Loss)	-17.0%	\$ 5,143,235	\$ 1,110,198	\$ 4,033,037
43 Net Income	16.1%	\$ 4,852,959	\$ 2,511,834	\$ 2,341,125
44 Operating Margin %		-0.77%	3.65%	-4.42%
45 Net Margin %		12.90%	6.54%	6.36%
46 Payroll as % of Operating Expense		57.72%	59.61%	



**Eastern Plumas Health Care  
Board Report  
Executive Summary**

**Date: September 28, 2023**

**OPERATIONAL OVERVIEW:**

Congressman Kevin Kiley visited the Portola and Loyalton campuses on September 5<sup>th</sup> as part of his Plumas and Sierra County tour. The Congressman presented congressional recognition certificates to both the hospital and new Loyalton clinic, followed by a tour of both campuses. Included in the tour were discussions on pending federal legislation for Medicare and Medicaid funding bills, and a tour of the Portola Courthouse. We discussed potential community-based programs including multi-generational day care and CalAim initiatives which could be operationalized if a site location, such as the courthouse, could be obtained by EPHC. Congressman Kiley also participated in a Loyalton town hall meeting to review the planned use of the appropriations funding request to make significant repairs to the city's water infrastructure. The Congressman plans to return for the Loyalton clinic ribbon cutting event and continued discussions on support for ongoing health care initiatives.

The EPHC Auxiliary has committed \$100,000 in funding to replace the hospital lab analyzer unit which will improve lab testing services. The Auxiliary also funded \$9,000 in scholarships this year for EPHC staff members to continue advanced education or certification programs. We appreciate the ongoing support from the EPHC Auxiliary to fund these important initiatives to benefit the community and our staff.

EPHC has received \$50,000 in funding from a USDA grant to assist with the cost for a new patient transportation van. We also received the final payment of the test-to-treat grant funding which will be applied to a new truck for towing of our disaster tent trailers which were also part of the grant funding program.

EPHC has enlisted the consultation support of Scott Coffin, President of Serrano Advisors, to assist with the collection of outstanding A/R from Anthem. Mr. Coffin had been an executive with Anthem, and we expect his involvement will expedite payment for outstanding claims dating back to January of 2022. His firm is providing this service at no charge to EPHC.

Our Cerner transition continues to be the top operational priority, but we are seeing consistent improvement in workflows and system utilization. Fiscal year 2022/23 draft financial statements have been completed, and statements for July and August are pending completion of cash posting. We have utilized a third-party consulting firm since early August, which has helped with process improvement and revenue cycle management.

We have completed the contracting process with Partnership Health Plan which will begin January 1, 2024. All MediCal recipients currently under California Health and Wellness and Anthem will convert to this plan as will our CalAim ECM program.

**PATIENT EXPERIENCE/EMPLOYEE ENGAGEMENT:**

Through Q3 2023 our performance metrics include:

- Emergency Department: Recommendation rating – 65% top box, 85% favorable
- HCAHPS (Hospital): Hospital rating 67% top box with 100% favorable. Top scores include 100% top box rating for treatment by staff and assistance with call light response.
- CGCAHPS (Clinics): Recommendation rating 88% top box, 98% favorable
- Outpatient Therapy: Recommendation rating – 100% top box
- Skilled Nursing: Recommendation rating – 91% top box

EPHC employee engagement activities for the past 30 days have included the implementation of a revised new hire orientation program, two appreciation activities, and recognition of the Housekeeping/EVS and Rehabilitation Services teams.

**COMPLIANCE PROGRAM:**

There were no compliance reviews initiated for the period of August 24th through September 22<sup>nd</sup>.



## AGENDA ITEM COVER SHEET

<b>ITEM</b>	CAH Committee Consent Agenda
<b>RESPONSIBLE PARTY</b>	Donna Dorsey, RN, BSN Emergency Room Manager
<b>ACTION REQUESTED?</b>	For Board Action
<b>BACKGROUND:</b> During the August 23, 2023 CAH Committee meeting, the committee made the following consent agenda item recommendations to the Board of Directors.	
<b>SUMMARY/OBJECTIVES:</b> Approval of the following consent agenda items: Annual Policy Review: <ul style="list-style-type: none"><li>• EOCC</li><li>• Nursing</li><li>• Pharmacy</li><li>• Infection Prevention</li><li>• SNF</li><li>• Admitting</li><li>• Ambulance</li><li>• Acute</li></ul>	
<b>SUGGESTED DISCUSSION POINTS:</b> None	
<b>SUGGESTED MOTION/ALTERNATIVES:</b> Move to approve CAH Committee Consent Agenda as presented.	
<b>LIST OF ATTACHMENTS:</b> List attached.	

***Policy List:*****Title****Area**

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Code Silver: Person with a Weapon and/or Hostage Situation	EOCC
Disaster Emergency Operations Plan (EOP)	EOCC
Discharge Planning for Homeless Patients Policy	Nursing
Emergency Room Triage and Registration	Nursing
The Formulary	Pharmacy
Hand-Off Communications	Nursing
High Level Disinfection of Flexible Scopes	Nursing
Infection Prevention and Control Plan	Infection Prevention
Management of Patients with Malignant Hyperthermia	Nursing
Medication Error Reduction Plan (MERP)	Pharmacy
Medication Reconciliation for Admission	Pharmacy
Nursing Care Plan – Skilled Nursing	SNF
On-Duty Injury/Illness	Infection Prevention
Pain Management in the Skilled Nursing Facility	SNF
Patient Identification Color-Coded Wristbands	Nursing
Patient Registration During Computer Down Time	Admitting
Psychotherapeutic Drug Management	SNF
Second Call Ambulance	Ambulance
Stroke Alert	Nursing
Surrogate Decision Makers	Admitting
Swing Bed Transfers and Discharges	Acute
Warming of IV and Irrigation Solution	Nursing