



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

Thursday, September 28, 2023 at 5:00 p.m.

1. **Call to Order**

Meeting was called to order at 5:00 p.m.

2. **Roll Call**

Present: Paul Swanson, M.D., Board Member; Marcia Hughes, Board Member; Augustine Corcoran, Board Chair; Gail McGrath, Board Member

Absent: Linda Satchwell, Board Member

Staff in attendance: Doug McCoy, CEO; Penny Holland, Chief Nursing Officer; Tamara Santella, Director of Nursing Loyalton; Tracy Studer, Director of Clinics; Jim Burson, Director of Rehabilitation; 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 Corcoran to approve the consent calendar.

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

Nays: None

Not present: Director Satchwell

- **Public Comment:** None

6. **Auxiliary Report**

Director McGrath reported that the August balance of Memorial Fund was close to \$5k. \$10k in scholarships given to EPHC staff. \$165k balance in checking account before committing to contribute \$100k for lab analyzer.

7. **Staff Reports**

A. Chief Nursing Officer Report

Penny Holland

See September BOD report. Penny also shared that Kathy Barter had come on as new lab manager and that the next QA meeting was scheduled for October.

B. SNF Directors of Nursing

Lorraine Noble/Tamara Santella

See September BOD report. Tamara reported. She shared that Covid cases in the Portola SNF were at 8 residents/6 staff.

C. Director of Clinics

Tracy Studer

See September BOD report. Tracy thanked Doug for inviting Congressman Kiley to view the Loyalton Clinic. She and Christina Potter met him there and received a plaque of appreciation for the Clinic. Director McGrath noted that Kiley's assistant remarked on the cleanliness of the facilities during their Portola tour. She also said that at the Dental Clinic yesterday for her husband's appointment they were missing a hygienist but the doctors stepped in and he had a

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great appointment. Tracy noted that she was working on the extension of Dr. Abate's contract for another year.

- D. Director of Rehabilitation Jim Burson  
See September BOD report.
- E. Chief Financial Officer Katherine Pairish

**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. Due to the Cerner transition, some accounting functions such as bank reconciliations and accounts receivable reconciliations were prepared manually. As a result, there may be some changes to accounts receivable and/or contractual adjustments, but we do not anticipate any material changes.

**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.

Doug reported for Katherine. He shared that the Cerner & Multiview interface continue to present challenges to financial reporting but improvements are underway. He also noted that we have been seeing lower Swing & ER volume. Doug also shared that changes to the Minimum Wage Bill are positive for rural hospitals with an initial raise across the board to \$18/hour (not \$25) with 3.5% increases annually until \$25/hour reach in 2034. Most EPHC employees are at or above \$18/hour.

Doug shared information about the Equity & Practice Transformation Payments Program through Medi-Cal, not a grant but has the potential to bring in about \$1 million per year. EPHC is applying in October.

Despite unexpected challenges with Cerner and Meal Break Penalties it's been a good year and Doug applauds all!

## **8. Chief Executive Officer Report**

Doug McCoy

### **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 Rehabilitation Services team.

The EPHC Foundation has decided to make securing funds for the ambulance remount its top priority along with continuing investigation into grants applicable to raising funds that align with EPHC's goals (e.g., capital grants, planning grants).

Doug also shared that he is working with Scott Coffin, former Anthem executive, to recoup monies owed to EPHC and that they are making headway with weekly meetings and accountability timetables. Discussion about how this happened (underpublicized form change and various delays in reprocessing) and assurance that it will be resolved.

Doug also reported that the night before, EPHC hosted the Community Supper at the Catholic Church. While there, a woman who was supporting the event shared with him how the hospital, and in particular Drs. Cox and Dhond, had saved her life. Doug also shared that EPHC had been commended by an out of state visitor/patient re: the care they received in the ED.

**COMPLIANCE PROGRAM:**

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

**9. Policies**

Public Comment: None.

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

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

Nays: None

Not present: Director Satchwell

**10. Committee Reports**

Board Members

I/D/A

**A. Finance Committee**

Director Swanson reported that income statement showed patient revenue at \$2.3 million less but that EPHC was still in the black for the year. Next year would be a stretch but still very doable.

**11. Public Comment**

None.

**12. Board Closing Remarks**

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Director Hughes noted that there was a date error in the agenda header and Barbara responded that it had been fixed. Director McGrath remarked that EPHC continues to provide excellent care for the community despite challenges with Cerner. Doug ended by saying that new ER docs who have come on board and recent hires of staff leaders and staff are all very high caliber and are contributing to the great performance of EPHC in delivering quality services to the community.

**Open Session recessed at 5:55 p.m.**

**13. Closed Session**

**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 Taken in Closed Session**

The Board returned at approximately 6:15

**A: ACTION-** The Board unanimously approved (with the exception of Director Satchwell who was not present) a motion to provide staff privileges to all persons listed on agenda item 13.A.

**B: No Action Taken.**

**15. Adjournment**

Meeting adjourned at 6:16 p.m.