

Campbell County Health Board of Trustees
Board Retreat – Fire Station #1 (106 Rohan Ave.)
October 26, 2023
8:00 AM

Members present:

Alan Stuber, Chair	Randy Hite, Treasurer	John Mansell, Trustee
Sara Hartsaw, Vice Chair	Mark Hoskinson, Trustee	Bill Rice, Trustee (Virtual)
Tom Murphy, Secretary		

Also present:

Matt Shahan, CEO	Matt Sabus, VP of IT	Dr. Hayden
Jerry Klein, COO	Brandi Miller, Exec Assistant	Dr. Stamato
Natalie Tucker, CNO	Bree Richardson, Marketing Dir.	Dr. Neuwirth, COS
Tom Lubnau, CCH Attorney	Norberto Orellana, Marketing	
Adam Popp, CFO	Diane Jackson, UCH	

Pledge of Allegiance

Call to Order – Chairman Stuber, called the meeting to order at 8:00 a.m.

Mission Statement – Trustee Stuber read Campbell County Health's Mission Statement.

Vision Statement – Trustee Stuber read Campbell County Health's Vision Statement.

Roll Call - Brandi Miller called the roll, all members present.

Approval of Agenda

TRUSTEE HARTSAW MOVED TO AMEND THE AGENDA, MOVING THE MEDICAL STAFF APPROVALS TO THE CONSENT AGENDA. TRUSTEE MURPHY SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

Consent Agenda

TRUSTEE HARTSAW MOVED TO APPROVE THE AMENDED CONSENT AGENDA. TRUSTEE HITE SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

The following items were approved as part of the Consent Agenda:

Approval of Minutes – 9/28/23 Regular Meeting

Finance Committee Minutes – 10/23/2023

Approval of Policies – Board Conduct and Ethics; Governing Body Ethics; Orientation and Continuing Education

Medical Staff Appointments – as presented

Policy Review and Approval – The Physician Recruitment policy was presented for review.

Trustee Hoskinson recused himself from the conversation.

Discussion about recruiting for the community and our competitors. CCH pays approximately \$145k in recruiting fees per physician. Additional information about how/if other hospitals in the region recruit for community, non-employed, physicians. Information on moving costs will also be evaluated to see if the amount included in the policy are sufficient. The policy will be reviewed/discussed at an upcoming PRRC meeting.

Trustee Hoskinson rejoined the group.

Healthcare Challenges for Veterans – Denton Knapp Colonel (Retired) US Army

Retired US Army Colonel, Denton Knapp, reported on healthcare challenges for Veterans and community programs for Veterans. Nationwide, military veterans constitute 6.4% of the civilian populations. Wyoming has the fourth largest share among the 50 states at 9.2% of the civilian population. Mr. Knapp gave a brief overview of the different levels of eligibility for VA healthcare. Some

of the important comments regarding the Gillette VA Clinic (Dr. Laura Anders, Retired Gillette VA Director) include:

- Providers at the Gillette VA Clinic have never received access to the CCH patient computer system to view results of veteran's labs, x-rays, treatment, etc.
- Veterans often have difficulty with the CCH billing department.
 - o Once veterans are enrolled into the CCH system, identifying VA Triwest Insurance as their primary insurance, they should not receive a bill from CCH billing.
 - o This has been a continuous problem, with a lack of understanding of VA insurance (Triwest), Dept. of Defense (Tricare), Medicare, and private insurance.
 - o Emergency Room, Walk-In Clinic, and referrals for special clinics should all be billed under VA if eligible, then Tricare, if eligible, or Medicare.

Mr. Knapp worked with other to form the Campbell County Veterans Council. The group is working to identify all veterans in Campbell County. The group meets on the 3rd Wednesday of the month in the George Amos building, an invitation was extended to CCH Administration and Board members. There is a Veterans breakfast at the Senior Center the last Tuesday of every month. Denton will send a list of all the working groups to Matt.

YTD September 2023 (Q1) Financials & Capital Requests

Capital Requests

- a. Stocktrail Building – Dry Fire Sprinkler System Repair (\$69,310.00) - During a routine fire inspection of the Stocktrail Building in September, a leak was identified in the fire suppression system located inside the canopy over the main drop-off area. The Facilities Planning Committee recommends moving forward with the proposed repair plan. This repair was not budgeted therefore it will come out of contingency funds.

TRUSTEE HITE MADE A MOTION TO APPROVE THE STOCKTRAIL BUILDING DRY FIRE SPRINKLER SYSTEM REPAIR CAPITAL REQUEST AS PRESENTED. TRUSTEE HARTSAW SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

- b. Hemodialysis Machines (Qty 2) (\$33,500.00) – The older machines used by CCH only utilize liquid bicarbonate while the newer 2008T units can utilize either liquid or powder bicarbonate. CCH was impacted by the national shortage of liquid bicarbonate and supply chain issues continue to be a concern. Standardization of the equipment will provide for safer patient care. Two hemodialysis units are budgeted for FY24. The Kate Weiss Foundation confirmed funding for one of the two machines. The Dialysis unit averages 325 treatments per month with reimbursement just under \$2k per treatment.

TRUSTEE HARTSAW MADE A MOTION TO APPROVE THE PURCHASE OF TWO HEMODIALYSIS MACHINES AS PRESENTED. TRUSTEE HITE SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

Finance Report Out and Approval – September 2023 bad debt and charity totaled \$3,986,960.64.

TRUSTEE HOSKINSON MOVED TO APPROVE THE SEPTEMBER BAD DEBT AND CHARITY CARE IN THE AMOUNT OF \$3,986,960.64 AS PRESENTED. TRUSTEE MANSSELL SECONDED. MOTION CARRIED UNANIMOUSLY.

Financial Discussion –

September reflected higher revenues in acute admissions, and patient days acute. The case mix was slightly less than August. Mental Health visits and Inpatient Surgeries held steady to the previous month. Outpatient surgery, and ED visits were slightly down for the month. HHH, WIC, Hulett Clinic and Urology visits were down for the month. One of the providers in Urology is out on FMLA. With the total number of clinic visits down for the month it makes sense that the productive FTEs were also down. Ambulance Services, Radiology and Med Surg all saw an increase in revenue over last month. The Board requested that capacity numbers (number of beds available) be included future reports. Recently

inpatient BHS has limited beds to 4 due to staffing. CCH has contracted to receive 6 international nurses. Interviews will be held next week. The international staffing company handles everything (work visa, housing, etc.) for the hired nurses.

Days cash on hand is 128. Total patient revenue for September was \$33.1M. While the payor mix for September was favorable compared to August, a Medicaid adjustment from prior months offset. The conservative adjustment to contractals last month was released. Gross AR will likely increase during the Rev Cycle vendor transition.

Total Operating Expenses were \$18.3M. Contract Services is included in Purchased Services. The Mill levy is now being trued up on a YTD basis. Operating income for September was (\$2.4M), YTD (\$5.99M), budgeted for (\$4.18M). Month ending revenue in excess of expenses was (\$1.04M).

Other updates provided by the CFO:

- September financials include estimate for Legacy. Working to get more detailed information and expense report to include in the packet.
- The accounting department is nearly fully staffed which will help with gathering accurate information to include in the packet, including payor mix information.
- Invoices being recorded in two expense categories has been corrected.
- Signature Performance (New RevCycle Vendor) was onsite and will be sending an action plan for transition soon.
- The Axiom Budget package is on track to go live in January.
- The new Controller will be announced soon.

TRUSTEE HOSKINSON MOVED TO APPROVE THE SEPTEMBER FINANCIALS AS PRESENTED. TRUSTEE HARTSAW SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

Strategic Plan Review with Sustainability Plan

Updates:

- Working to pull data from Marketware on leakage and referrals.
- Business Development continues to promote Occ Health and new providers.
- Radiology recently attended Newcastle's Health Fair promoting mammograms and diagnostic referrals.
- Various departments attended the Wellness Expo at the Complex
- Compensation Committee is meeting on a regular basis
- Employee engagement results are tied to LEM goals
- Employees expressed they would like to see the Executive team more often. A shared department meeting calendar has been created so the Executive team is aware of department meetings. The Treat Cart frequency has increased. Moving towards no scheduled meetings on Fridays to allow for catch up time and face-to-face interactions with departments
- Executive Leadership meetings have increased to 3 hours per week. Leadership Council meetings immediately follow Executive Leadership so decisions and information can be shared in a more timely manner with Leadership Council
- Department Managers have been asked to look at their departments and work to reduce their expenses by 5%.
- Working with UCH to ensure CCH is receiving UCH pricing when working with select vendors

FY22, FY23, FY24 financial projections and actuals were shared along with FY25 projections. All of the projections were estimated by the previous CFO in FY22. Revenues, deductions and the Mill Levy all

beat projections. Cath Lab numbers have decreased since FY20. Surgeries are on an upward trajectory since FY22. Radiology procedures had an uptick in FY22 and have since leveled off for FY23 and YTD FY24. Clinic visits have steadily increased since FY20. ER visits have had an increase since FY21. Income and expenses have increased over the past couple of years.

Adam Popp shared a cost reduction strategy tracking spreadsheet. The spreadsheet includes multiple initiatives that are in progress, completed and scheduled to begin. A Clinical Documentation Pilot program has been initiated. Four physicians were chosen to pilot a charging template. Additional physicians will be added to the process by the end of November. Completed items on the cost reduction tracking form include:

- Review of RevCycle Vendor “lift” calculations
- Identify a new RevCycle Vendor
- Revamp Capital Request process
- Capitalization of larger repair projects
- Reconstruct historical loads into InFor
- Reconstruct general ledger crosswalk for InFor
- Correction to InFor procession of credit card transactions (double posting)
- Formalized process for new product evaluation
- Postponed Epic go-live
- Adjust room rates, eliminate supply charging
- Update CDM
- Adjust discount codes to eliminate manual billing process for BHS – State/AWARE grant

The audit is progressing and will be presented at the December Board meeting.

UCH Updates

Kevin Unger, President and CEO, UCH Northern CO, gave a brief environmental overview. Approximately half of U.S. hospitals finished 2022 with a negative margin. Mr. Unger shared the four pillars that guides UCH's mission: Experience, Innovation, Accessibility, Performance. Key initiatives UCH continues to work on are Staff/Provider Safety, and Career Development for employees.

Lindsey Abdullah provided an update on the sustainability plan process. Objectives of the Sustainability Plan include:

- Serves as a base for a long-term strategic plan
- Establish initiatives to support financial performance
- Create accountability structure for performance
- Serves as evaluation criteria to aid in decision making

For the plan to be successful it must be actionable with prioritized initiatives, include attainable and measurable goals, and have support/commitment from leadership.

The timeline for the Sustainability Plan is as follows:

- November – Identify priorities and areas of focus; assess and prioritize opportunities to increase revenue and contain costs
- December/January – Define tactics, goals and metrics
- February – Update the Board on progress

Board Discussions

Wyoming Joint Replacement Center Presentation – Dr. Israelson gave a brief presentation on the proposed Wyoming Joint Replacement Center (WJR). The estimated financial need from CCH for WJR for the next 12 months is \$100k. The estimated \$100k would pay for the website, advertising, professionally printed education materials, branded items, and refreshments for joint classes. There has been an uptick of competitor advertisements in Gillette. Increased community advertising and

regional advertising needs to be increased. WYOS has expanded clinic hours in Sheridan. The Board requested that updated figures be presented at an upcoming meeting.

Performance Bonus Measures – Chairman Stuber shared the following bonus measures:

Service 20% - CCH will demonstrate a culture of Excellence Every Day as demonstrated by continuous, measurable improvement in patient and resident experience across the organization.

Service	10%	ED Patient Experience Scores	CCH Emergency Department "PG Overall will be at or above ___% Top Box Score as measured by Press Ganey Vendor Survey rolling 12 months.	FY23 Baseline: 63.8
Service	10%	Hospital Overall Rating	CCH HCAHPS "Rate the Hospital" will be at or above 71.8% Top Box Score as measured by Press Ganey Vendor Survey rolling 12.	FY23 Baseline: 68.3

People 20% - Achieve organization workforce development goal by recruiting, orienting, developing, and retaining highly engaged and accountable employees.

People	10%	Retention Rate	Improve CCH employee retention rate by ___%	FY23 Baseline:
People	10%	Retention Rate	Improve CCH Provider Retention Rate by ___%	FY 23 Baseline:

Care 15% - Achieve patient, resident, client, visitor, and staff safety while providing high quality healthcare services through continuous improvement processes as measured by DNV, State and Federal standards.

Care	5%	Workplace Violence	CCH will lower the workplace violence reported incidents by ___%.	FY23 Baseline:
Care	5%	Falls	CCH will decrease improve the fall rate from prior years as calculated by the number of inpatient falls per 1000/ACPD	FY23 Baseline: 4.23 Average
Care	5%	Specimen Labeling	CCH will decrease specimen labeling errors	FY23 Baseline: 25

Business 35% - Achieve financial stability and efficiency as an organization while fulfilling the responsibilities of stewardship over community funds and integrity and transparency in business relationships.

Business	7%	Operating Income	Increase Operating Income from prior year	FY23 Baseline: (\$32,068,666)
Business	7%	Days Cash on Hand	Increase days cash on hand by ___ days	FY23 Baseline: 129.8
Business	7%	AR Days	Improve AR Days by ___ days	FY 23 Baseline: 60.7
Business	7%	Bad Debt	Decrease Bad Debt	FY23 Baseline: 3.96
Business	7%	Outpatient Revenue Growth	CCH will improve outpatient revenue growth by 6% or greater	FY23 Baseline: \$309,489,402

Individual 10% - Personal Development, key projects, or other

Individual	5%	Strategic Plan	Will provide monthly strategic plan updates	
Individual	5%	Strategic Plan	Will provide consistent weekly Board reports and update the Board on C-Suite evaluations and succession planning.	

Per bylaws the Executive Committee establishes performance bonus measures. Chair Stuber requested input from all Trustees to create the above metrics. The committee will review the guidelines, add tiered metrics and bring a recommendation to the full Board for review.

Affiliation Benefits

Benefits to the UCH affiliation were discussed. Some of the benefits discussed include:

- Recruitment assistance – UCH assisted in filling three C-Suite positions. Often recruitment firms charge upwards of 30% if they place an executive candidate.
- They contributed people, time, and money to the EMS University.
- Constant access to UCH expertise, department, service line information, etc.

It is important that the community understands this is an affiliation, and UCH has no plans of buying out CCH.

EXECUTIVE SESSION

The regular meeting recessed at 2:09 PM to enter Executive Session.

TRUSTEE HOSKINSON MOVED TO ENTER INTO EXECUTIVE SESSION AT 2:09 PM TO DISCUSS CLASSIFIED CONFIDENTIAL ATTORNEY CLIENT PRIVILEGED MATTERS W.S. 16-4-405(a)(ix), AND LEGAL ADVICE W.S.16-4-405(a)(x). TRUSTEE MANSELL SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

TRUSTEE HOSKINSON MOVED TO COME OUT OF EXECUTIVE SESSION AT 3:24 PM. TRUSTEE MURPHY SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

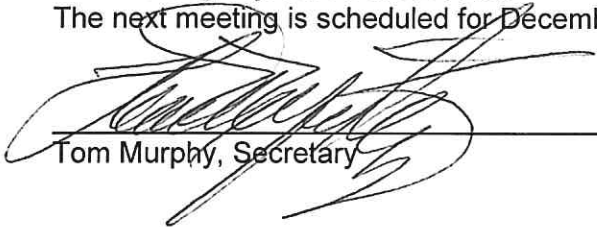
Returned to Open Session at 3:24 PM.

ADJOURNMENT

TRUSTEE HARTSAW MOVED TO ADJOURN AT 3:25 PM. TRUSTEE HITE SECONDED THE MOTION. MOTION CARRIED UNANIMOUSLY.

The meeting adjourned at 3:24 PM.

The next meeting is scheduled for December 7, 2023.


Tom Murphy, Secretary


Brandi Miller, Recorder