



**BOARD OF COMMISSIONERS' MEETING**  
November 26, 2019, 10:30 a.m., in the HUB Conference Room

Mission Statement

*"To strengthen the health and well-being of our community through partnership and trust."*

**AGENDA**

	Page(s)		
Call to Order		Nancy Giddings	
Quorum Established		Nancy Giddings	
Review, Amend, Accept Agenda		Nancy Giddings	
Introduction of Board, District Employees and Guests		Nancy Giddings	
Oath of Office for Jody Jannot		Ashley Venturo	
2020 Budget Public Review			3-15
• Motion to approve 2020 Levy Resolution 2019#8		ACTION	
• Motion to approve Levy Certification		ACTION	
• Motion to approve 2020 Klondike Hills Budget Resolution 2019#9		ACTION	
• Motion to approve 2020 Hospital Budget Resolution 2019#10		ACTION	
<i>Items listed under the consent agenda are considered routine board matters and will be approved by a single motion of the Board without separate discussion. If separate discussion is desired, that item will be removed from the consent agenda and placed on the regular business agenda.</i>			
Approval of Consent Agenda		ACTION Nancy Giddings	16-21
• Minutes 10/22/19 Board Meeting			
• Minutes 11/4/19 Budget Hearing Meeting			
• Minutes 11/21/19 Special Meeting			
• Resolution 2019#13 Ferry County Natural Hazard Mitigation Plan			
• Approval of Warrants			
• Financial Write-Off Report			
Correspondence		Nancy Giddings	
Public Comments			
CNO Report & Quality Improvement and Compliance/Risk Management		Cindy Chase	22-23
Clinic Report		JoAnn Ehlers	24-26
Medical Staff Report		Dr. Garcia	
Safety Report:		Brant Truman	
CFO/COO Report		Brant Truman	27
Financial Report		Brant Truman	28-37

CEO Report	Aaron Edwards	38
Old Business	Nancy Giddings	
<ul style="list-style-type: none"> <li>• Board QI Project</li> <li>• Facility Update</li> <li>• Health Foundation</li> <li>• Board Succession planning</li> <li>• Strategic Planning</li> </ul>		
Board Representative Reports		
<ul style="list-style-type: none"> <li>• Finance</li> <li>• Quality Improvement</li> <li>• Compliance/Risk Management</li> <li>• Medical Staff</li> <li>• Credentialing</li> <li>• EMS</li> </ul>	Ron Bacon/Sarah Krausse Jody Jannot/DiAnne Lundgren Ron Bacon/Jody Jannot Nancy Giddings/DiAnne Lundgren DiAnne Lundgren/Nancy Giddings Nancy Giddings	
New Business	Nancy Giddings	
<ul style="list-style-type: none"> <li>• Hot Topic</li> </ul>		
Executive Session	Nancy Giddings	
Open Session – Action, if applicable regarding executive session	Nancy Giddings	
Adjournment	Nancy Giddings	

**Board meetings are usually the fourth Tuesday of each month at 10:30 a.m. unless otherwise posted.  
The Public is encouraged to attend; Handicap access is available.**

**Next regularly scheduled meeting is December 19, 2019 @ 12:00 p.m. in the Hospital Conference Room**

# 2020 Budget



Ferry County Health

# Disclaimer

- Estimates were input by the managers and reviewed by Mena and myself (Mr. Brant) and adjusted accordingly.
- All numbers are estimates based on historical information and could vary depending on the current circumstances.



Ferry County Health

# Operating Revenue Highlights

- MRI Revenue \$430k increase
- Clinic Revenue \$200k increase
- 340B Expected Net Revenue of \$525K
- All other revenues held constant with a 2% increase



Ferry County Health

# Non-Operating Revenue

- Tax Revenues expected at:
  - \$.55 per \$1000 of assessed value = \$240K
- WHRAP Payments = \$201K
- SHIP/Grant = \$66K (\$16K/\$50K)



Ferry County Health

# Charge master Increase

<i>Payer</i>	<i>% of Revenue</i>	<i>Charge Increase Sensitivity %</i>	<i>TOTAL</i>
Medicare and Medicare Advantage	48.8%	0%	0.0%
Medicaid and MCO	25.3%	0%	0.0%
Other Government (Veterans, IHS)	2.6%	0%	0.0%
Blue Cross/ Blue Shield	7.5%	72%	5.4%
Commercial	12.1%	84%	10.2%
Self Pay	3.2%	70%	2.2%
<b>TOTAL ANTICIPATED CHANGE</b>		<b>Net Revenue Per \$1 charge increase</b>	<b>17.8%</b>

<b>Anticipated Increase in Charges</b>	<b>\$ 599,118</b>
<b>Anticipated Contractual Allowances</b>	<b>\$ 492,451</b>
<b>Anticipated Net Revenue Increase</b>	<b>\$ 106,667</b>
<b>ChargeMaster Increase</b>	<b>3.00%</b>



Ferry County Health

# Wage Increases

- Minimum Wage Increase
  - 2019- \$12.00 an hour
  - 2020- \$13.50 an hour
  - 2021 and beyond- cost-of-living adjustment to the minimum wage based on the CPI-W.
- Wage Increase Breakdown
  - Lowest wage earners receive the highest increase in wages.
  - 2019 Wage Earners making less than \$20 an hour
    - Cost to Facility \$137,000
  - 2% COLA for remaining employees (excludes contract employees)
    - Cost to Facility \$39,000



Ferry County Health



# Wage Increases

Greater Than	Less Than or Equal To	% Increase
\$12	\$13	12%
\$13	\$14	9%
\$14	\$15	8%
\$15	\$16	7%
\$16	\$17	6%
\$17	\$18	5%
\$18	\$19	4%
\$19	\$20	3%
\$20		2%



Ferry County Health

# Employee Medical Insurance

- A 6.7% increase to employer from last year. See below total run YTD...



## Ferry County Public Hospital District #1 - Total Medical

Self-Funded Medical Plan Experience  
Administered by Premera Blue Cross  
January 1, 2019 through December 31, 2019

	Premera Charges		Stop Loss
	Admin	Stop Loss	Level
Current Year	\$36.17	\$205.78	\$55k
Prior Year			

		Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	YTD
Budget	Employees	90	90	90	91	92	93	90	90	90				91
	Members	108	108	109	109	110	111	108	108	108				109
	<b>Budget</b>	<b>\$79,823</b>	<b>\$79,932</b>	<b>\$80,511</b>	<b>\$80,705</b>	<b>\$80,705</b>	<b>\$81,478</b>	<b>\$80,040</b>	<b>\$80,040</b>	<b>\$80,040</b>	<b>\$80,040</b>			
Claims Expenses	Med/Vis Inc & Paid Claims	\$8,482	\$48,662	\$88,533	\$67,864	\$84,318	\$115,739	\$29,276	\$142,758	\$133,585				\$719,217
	Less Claims Over Stop Loss	\$0	\$0	-\$11,194	-\$2,034	-\$5,001	-\$15,160	-\$5,027	-\$78,268	-\$95,029				-\$211,715
	Net Med/Vis Claims	\$8,482	\$48,662	\$77,339	\$65,829	\$79,317	\$100,578	\$24,249	\$64,490	\$38,556				\$507,502
	Rx Paid Claims	\$2,953	\$3,241	\$11,461	\$13,680	\$11,794	\$12,545	\$5,012	\$6,249	\$13,716				\$80,650
	<b>Total Paid Claims</b>	<b>\$11,435</b>	<b>\$51,903</b>	<b>\$88,800</b>	<b>\$79,510</b>	<b>\$91,111</b>	<b>\$113,123</b>	<b>\$29,260</b>	<b>\$70,739</b>	<b>\$52,272</b>				
Fixed Fees & Total Costs	Administration Fee	\$6,831	\$6,831	\$6,880	\$6,896	\$6,896	\$6,961	\$6,831	\$6,831	\$6,411				\$61,368
	Stop-Loss Charges	\$18,003	\$18,003	\$18,131	\$18,173	\$18,173	\$18,344	\$18,003	\$18,003	\$18,003				\$162,833
	<b>Total Fixed Costs</b>	<b>\$24,834</b>	<b>\$24,834</b>	<b>\$25,010</b>	<b>\$25,069</b>	<b>\$25,069</b>	<b>\$25,305</b>	<b>\$24,834</b>	<b>\$24,834</b>	<b>\$24,414</b>				<b>\$224,202</b>
	<b>Total Costs</b>	<b>\$36,268</b>	<b>\$76,737</b>	<b>\$113,810</b>	<b>\$104,579</b>	<b>\$116,180</b>	<b>\$138,428</b>	<b>\$54,094</b>	<b>\$95,572</b>	<b>\$76,686</b>				<b>\$812,354</b>
	Gain/Loss	\$43,555	\$3,195	-\$33,299	-\$23,874	-\$35,475	-\$56,950	\$25,946	-\$15,532	\$3,354				-\$89,081
	<b>Loss Ratio</b>	<b>45.4%</b>	<b>96.0%</b>	<b>141.4%</b>	<b>129.6%</b>	<b>144.0%</b>	<b>169.9%</b>	<b>67.6%</b>	<b>119.4%</b>	<b>95.8%</b>				<b>112.3%</b>
PMPM Claims Costs	CY Med/Vis Claims PMPM	\$78.54	\$450.58	\$709.53	\$603.94	\$721.06	\$906.11	\$224.52	\$597.13	\$357.00				\$518.39
	CY Rx Claims PMPM	\$27.34	\$30.01	\$105.14	\$125.51	\$107.22	\$113.02	\$46.40	\$57.86	\$127.00				\$82.38

CY = Current Year, PY = Prior Year, PMPM = Per Member Per Month  
This report does not include estimated changes to IBNR reserves or Rx rebates.



# Ferry County Health

# Employee Medical Insurance

- Employee Wellness
  - Optional biometrics for all employees
  - \$250 one time co-insurance offset for services rendered in our facility
  - Life Flight Insurance will be added as a benefit in 2020 for employees and families.



Ferry County Health

# Capital Purchases

Purchases valued \$5,000 or greater

Department	Project Description	Estimated Cost
Lab	ESR Analyzer	\$ 6,000.00
	GeneXpert	\$ 42,000.00
Nursing	Patient Beds (4)	\$ 40,000.00
	Cardiac Monitoring System	\$ 180,000.00
	Bladder Scanner	\$ 15,000.00
	Patient Room Chairs for Swingbed	\$ 12,500.00
Plant	Asphalt Seal Clinic and Alf	\$ 15,000.00
	O2 System Replacement	\$ 125,000.00
	Auto Push Button Locks Replacement (11?)	\$ 14,300.00
	Exterior Metal Doors and Jambs Replacement (5)	\$ 55,000.00
IT	Generator for HUB (plus Installation)	\$ 19,500.00
	Replacement Hyper-V server	\$ 7,500.00
	<b>TOTAL</b>	\$ 531,800.00



Ferry County Health

# Current Debt Load

- 2019 - \$5,392,126
- 2020 - \$4,064,401

Total Debt Paid in 2019 = \$1,327,725!!!

Debt to Cash Ratio of

- Fall of 2018 it would have taken 11.11 years to pay off all debt.
- Now we are at roughly 2.17 years.  
(national benchmark is 2.7 years)



Ferry County Health

# Other 2020 Costs

- Likely \$600K 2019 Medicare cost report adjustment payable (no good deed goes unpunished)
- Possible \$216K payable for a Noridian error on the 2017 desk review



Ferry County Health

Questions?





## Ferry County Health

### **BOARD OF COMMISSIONERS' MEETING**

**October 22, 2019**

**CALL TO ORDER:** Chair Nancy Giddings called the meeting of the Board of Commissioners to order at 10:32 a.m. on October 22, 2019, in the HUB Conference room at Ferry County Health. Commissioners in attendance were Nancy Giddings, Ronald Bacon, DiAnne Lundgren, Sarah Krausse and Jody Jannot. Aaron Edwards, CEO (via phone); Brant Truman, CFO/COO; Cindy Chase, CNO and Lacy Sharbono, Executive Assistant were present.

**QUORUM ESTABLISHED:** A quorum was present.

**REVIEW, AMEND, ACCEPT AGENDA:** A motion was made by Lundgren and seconded by Bacon to accept the agenda as written. The motion passed unanimously.

**VISITORS:** Jim Burnside, Nancy McIntyre, Ryan Berendsen, Brennan Pendleton and Shar Sheaffer.

**APPROVAL OF CONSENT AGENDA:** A motion was made by Bacon and seconded by Lundgren to accept consent agenda. The motion passed unanimously.

**RURAL RESOURCES:** Ryan Berendsen presented the attached property survey that shows what section of Thornton Drive will be property of the City of Republic and which section the hospital will own. Last night the City of Republic Council voted and approved to the plans. There will be a resolution drafted by FCH to grant Rural Resources an easement and will be approved at the November 4<sup>th</sup> Budget Hearing meeting.

**DZA:** Brennan presented the 2018 financial review.

**Giddings called for a break at 11:44 a.m. Open session continued at 11:56 a.m.**

**CORRESPONDENCE:** Krausse received a phone call from a patients son and he was very happy with the care his mother received at the hospital.

**PUBLIC COMMENTS:** Nancy McIntyre stated she was happy that the Keller position on the board was filled.

**CNO/QUALITY IMPROVEMENT AND COMPLIANCE/RISK MANAGEMENT:** Chase reviewed the attached report.

**CLINIC REPORT:** The Board reviewed the attached report.

**MEDICAL STAFF REPORT:** Dr. Garcia noted the following:

- New process for tracking outpatient orders as the volume is increasing and will likely need some revisions but is running smoothly.



- Swing Bed process is going well.
- Looking to expand wound care possibilities.
- Still looking for a LTC activities director.
- New OB order set in the works.

**SAFETY REPORT:** Truman noted the following:

- Placed order for the new fetal heart monitor.
- Signed agreement for review of medications in the hospital.
- Looking at purchasing a new cardiac heart monitoring system.
- Edwards and Truman are now HAM techs.

**CFO/COO REPORT:** Truman reviewed the attached report.

**FINANCIAL REPORT:** Truman reviewed the attached September financials.

**CEO REPORT:** Edwards reviewed the attached report.

**OLD BUSINESS:**

- Board QI Project: On hold
- Facility Update: Edwards noted 2 heat pumps on the roof are having issues.
- Health Foundation: Hoping to finish the bylaws by year's end. Also planning a Valentines event (dance, Maybe dinner), and maybe the Cigar Fest with the Eagles. Also received a nice donation of \$15K for the scholarship fund.
- Board Succession Planning: Updated committees. Jannot will now be on the QI and Risk/Compliance committees.
- Strategic Planning: The Board will have a Special Board Workshop meeting on 11/21/19 at 10:00 a.m. in the RMC Conference room.

**BOARD REPRESENTATIVE REPORTS:**

- Finance: No Board concerns.
- Quality Improvement: Next meeting is scheduled for 10/23/19.
- Compliance/Risk Management: Next meeting is scheduled for 11/8/19.
- Medical Staff: No Board Concerns.
- Credentialing:
  1. A motion was made by Lundgren and seconded by Krausse to approve the reappointment of Courtesy Medical Staff privileges by telemedicine proxy for Integra Imaging provider James Eaton, MD. The motion passed unanimously.
- EMS: Giddings noted they have signed the agreement to purchase the property.

**NEW BUSINESS:**

- Hot Topic: None
- Recap from WSHA: Giddings discussed the Health Equality Organizational Assessment from WSHA.

**EXECUTIVE SESSION:** Executive Session was called a 1:45 p.m. for 15 minutes regarding lease or purchase of real estate if there's a likelihood that disclosed would increase the price RCW 42.30.110(1)(b).

Open session resumed at 2:00 p.m. No action taken.

**ADJOURNMENT:** As there was no further business the meeting was adjourned at 2:00 p.m.

\_\_\_\_\_ Date  
Nancy Giddings, Chair

\_\_\_\_\_ Date  
DiAnne Lundgren, Secretary

\_\_\_\_\_ Date  
Lacy Sharbono, Recording Secretary



Ferry County Health

**BOARD OF COMMISSIONERS' BUDGET HEARING MEETING  
November 4, 2019**

**CALL TO ORDER:** Vice Chair Ronald Bacon called the meeting of the Board of Commissioners to order at 10:05 a.m. on November 4, 2019 in the Hospital conference room at Ferry County Health. Commissioners in attendance were Ronald Bacon, Sarah Krausse and DiAnne Lundgren. Aaron Edwards, CEO, Brant Truman, CFO/COO; Mena Cassell, Controller, Mike Jager, Maintenance Manager and Lacy Sharbono, Executive Assistant was also present.

**GUEST:** Ryan Berendsen, Ashley Venturo

**QUORUM ESTABLISHED:** A quorum was present.

**RESOLUTION 2019#11 Thornton Drive Dedication:** A motion was made by Krausse and seconded by Lundgren to approve the Resolution 2019#11 Thornton Drive Dedication. The motion passed unanimously.

**RESOLUTION 2019#12 Easement and Joint Maintenance agreement with Rural Resources:** A motion was made by Krausse and seconded by Lundgren to approve the Resolution 2019#12 Easement and Joint Maintenance agreement with Rural Resources. The motion passed unanimously.

**BUDGET HEARING:** Truman presented the 2020 Budget for Ferry County Public Hospital and Klondike Hills.

**ADJOURNMENT:** As there was no further business the meeting was adjourned at 11:00 a.m.

\_\_\_\_\_  
Ronald Bacon, Vice Chair                      Date

\_\_\_\_\_  
DiAnne Lundgren, Secretary                      Date

\_\_\_\_\_  
Lacy Sharbono, Recording Secretary                      Date



Ferry County Health

**BOARD OF COMMISSIONERS' SPECIAL WORKSHOP MEETING  
November 21, 2019**

**CALL TO ORDER:** Chair Nancy Giddings called the meeting of the Board of Commissioners to order at 10:15 a.m. on November 21, 2019 in the RMC conference room at Ferry County Health. Commissioners in attendance were Nancy Giddings, Ronald Bacon, Sarah Krausse and Jody Jannot. Aaron Edwards, CEO, Brant Truman, CFO/COO were also present. DiAnne Lundgren was absent.

**QUORUM ESTABLISHED:** A quorum was present.

**STRATEGIC PLANNING:** The survey to staff is complete and will be going out soon. At the next workshop meeting the results will be discussed.

**ADJOURNMENT:** As there was no further business the meeting was adjourned at 12:00 p.m.

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Nancy Giddings, Chair

Date

Ronald Bacon

Date



Ferry County Health  
**RESOLUTION 2019 #13**

A resolution of the Ferry County Health Board of Commissioners declaring county support and adoption of the Ferry County Natural Hazard Mitigation Plan.

Whereas, The Ferry County Health Board of Commissioners supports the Ferry County Natural Hazard Mitigation Plan, and

Whereas, The Ferry County Health Board of Commissioners has participated in the development of the Ferry County Natural Hazard Mitigation Plan, and

Whereas, The Ferry County Natural Hazard Mitigation Plan will be utilized as a guide for planning as related to FEMA Pre-Disaster Mitigation and other purposes as deemed appropriate.

Therefore be it resolved, that the Ferry County Health Board of Commissioners do hereby adopt, support, and will facilitate the Ferry County Natural Hazard Mitigation Plan's implementation as deemed appropriate.

RESOLVED, this 26th day of November 2019.

APPROVED at regular meeting of the Commissioners of Ferry County Health, Republic, Washington, this 26<sup>th</sup> day of November 2019.

\_\_\_\_\_  
Nancy Giddings, Chair                                  Date

\_\_\_\_\_  
Ronald Bacon, Vice Chair                                  Date

\_\_\_\_\_  
DiAnne Lundgren, Secretary                                  Date

\_\_\_\_\_  
Jody Jannot, Commissioner                                  Date

\_\_\_\_\_  
Sarah Krause, Commissioner                                  Date



TO: Ferry County Health Board of Commissioners  
 FROM: Cindy Chase, CNO  
 Subject: CNO Report

MEETING DATE: November 26, 2019

As of November 13, 2019

People	<p>To be the employer of choice. To develop and support a culturally diverse, competent, motivated and productive workforce. To recruit and retain highly competent staff to meet the District's patient and resident needs.</p> <ul style="list-style-type: none"> <li>• Nurse Staffing I am happy to report that Mike Martinoli has accepted the Nurse Management position. As I asked staff during my 1:1 interviews, who do you most admire here and Mike's name came up almost every time. Staffing is okay at the moment but there have been two resignations that we are working on filling. Staff helping out. NAC schedule is in good shape. Candace has accepted the LTC Coordinator position. She has done a great job in the interim.</li> <li>• Workflow Evaluation A new process is in effect where every ED patient will be called back by hospital staff. The process is spearheaded by the Unit Coordinators who have taken ownership. A new Unit clerk was hired and we are ready when one of the clerks goes out on an extensive lead.</li> </ul>
Quality	<p>To lead the community that improves community health status and access to care. To provide quality healthcare that can be defined, measured and published. To enforce and invest in a pervasive culture of safety.</p> <ul style="list-style-type: none"> <li>• Infection Control/ Employee Health. Katy's has managed to reach all but 4 people for flu shots. She is relentless and will catch up with them. Staff is aware that they will need to wear a mask when flu season officially hits Ferry County.</li> </ul>
Service	<p>To provide an environment in which patients, families, providers and employees are highly satisfied. To provide an experience for patients that exceeds expectations in all areas of the District. To identify areas for improvement.</p> <ul style="list-style-type: none"> <li>• Swing Beds. We continue to work out kinks in the new process but getting there. Amy is finishing the flier which will be sent to several hospitals and we will begin touching bases with discharge planners around the region. We do have an excellent program and we will get the word out.</li> <li>• Activities Coordinator. We continue to look for the right person.</li> <li>• New Equipment. We are just days away from selecting the new Telemetry System. FHM will arrive any day now and the bipap/ventilator will arrive in Feb. Lots of growth opportunities for the staff to learn to use new equipment and allow FCH to not have to transfer every complex patient. We are exploring Monitor Tech training and the UCs will learn how to watch telemetry screens freeing up the nurses to take care of patients. Mike will be leading an ER overhaul to utilize space for supplies and equipment more efficiently. OB revamp is not far behind as we gather up needed equipment. Still waiting on bids for an infant warmer.</li> </ul>
Financial	<p>To be financially viable, to support advancing the mission and vision. To be operationally efficient. To offer value to payer and consumers.</p> <ul style="list-style-type: none"> <li>• Mike and I are monitoring timecards to reduce OT. In 2020, bedside shift report will be introduced which is not only a great patient satisfier, it forces staff to be organized and ready to go at shift change OT can be significantly reduced.</li> </ul>
Growth	<p>To be the healthcare provider choice for our community. To identify service growth areas. To market service programs to community and constituents.</p> <p>CNO: With the help of Mike and Aleisha, we are joining forces to shore up our educational</p>

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tracking system. In order to ascertain who needs what certifications, we are putting together a plan for a better process. Will also track any CMEs that the staff attend including in-services and meetings. Will be handy to have as we assess learning needs. I am getting ready to be more effective in the QI world and become more familiar with the Compliance work. Working with James to get an electronic white board that would display who is on staff, their title and what rooms are their responsibilities. The current white board is VERY old and very unattractive! This board would be like a TV on the wall and information fed to it by the unit secretaries. It also would satisfy state mandate that we display RN to patient ratios.

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TO: Ferry County Public Hospital District #1 Board of Commissioner    MEETING DATE: November 26, 2019  
 FROM: JoAnn Ehlers  
 Subject: Clinic Report

As of 11/13/19

People

To be the employer of choice. To develop and support a culturally diverse, competent, motivated and productive workforce. To recruit and retain highly competent staff to meet the District's patient and resident needs.

- We have had a people shift and there may be more to come as we grow into what we hope to be. Home Grown and now returning to Republic – Brandi Gerken has joined the Clinic Front office and it already feels like she's been here for years. It has been a pleasure to see folks come in and they are greeted by name because usually Joy or Brandi already knows them!! LPN Shannon Fraser resigned and LPN Patty Maddalena started up this week.
- Approval has been received for the Clinic to seek a MA/Front Office Staff person that can work in all areas of the Clinic.
- Mari has returned to work and it is feeling good on the Provider side.

Quality

- Back office staff has started to work on a list of things (chores/services) that we need to work out. Our first meeting was during Med Staff and then at noon the same day, we caught the Providers up on what we discussed that morning and they were able to add some thoughts.
- Our goals are to staff all the things required of us in terms of "chores" and mainly to become all that our Providers need to maintain the best possible patient care/customer service that we can. Nursing Staff really did engage in this and it was exciting.
- Things discussed were much faster test results getting out to patients, improvements in the way we help Providers get their work done, more efficient Procedure Room layout. Small changes can help all staff with better access to what they need without disturbing anyone that might be working in there at the time. Nurse staff has stepped up to fill any needs that have come up along the way, especially the med room and immunizations. We have more work to do for a permanent fix but there are no doubts that we can get it all done.
- Front office will play a part in this continued goal to work better together and create efficiencies where we can. More information is being added to the Registration system to help us schedule in a more specific way as needed. Radiology is working with us to help us do a better job for them as well. Providers can give us differing timeframes for visits and we can adjust to those.
- We want to thank the Patients of this Community for their patience and loyalty during times of Provider illness and constant juggling of schedules. Even today we are juggling the schedules again. We thank Administration for the OK to call in ER Block Providers to help out; and we thank those ER Providers that gave the Clinic extra Clinic time. In times of struggle, it is always the small community areas that really stand by their Providers and this is very much noted and appreciated.
- We are still going to be discussing the idea of breaking nursing into Provider teams. This has several pros so far that outweigh any arguments. The nursing staff can rotate and get their breaks and a lunch is a big one. A patient having someone to speak with every day of the week is another one. This also takes a lot of pressure off of the front office in trying to find



help on a day a provider and their nurse are out. Nurses can do more covering of each other during illness and vacation time. The ratio is going to be 2 providers per a team of 3 nursing staff. Several of us have worked with this team approach in the past and found it works very well. (Example: one nurse needs a day off; the other two do some shuffling to cover it.) Clinic Manager does not even have to be involved.

To provide an environment in which patients, families, providers and employees are highly satisfied. To provide an experience for patients that exceeds expectations in all areas of the District. To identify areas for improvement.

- Flu Shots were finally all received at the very end of October and we called in everyone that was on our list for the High Dose as soon as it was ready to go. ALF and LTC patients were provided with their shots. The Clinic was certainly hopping with getting those shots done and we had a high of 32 in one day. At this time all patients are welcome to walk in for a flu shot any day; preferably between 9 am and 4 pm.
- We are starting to look at spring and summer dates to attempt to bring the Medical Teams Dental Van and the DSHS folks back to Republic in 2020. It is hoped we can do the same day each time and make it a big event. Vision Certificates will be applied for as well to be given out for these dates and maybe we can add some free testing from the lab, BP checks by nursing, something from P.T., and other health related entities.
- It is Open Enrollment for Medicare Parts C and D so anyone in the community that would like to have a review for 2020, which is recommended to happen yearly, is welcome to contact the Clinic and come in to see me. This ends on December 7<sup>th</sup>. I will be contacting the patients that I worked with last year. I do encourage people to call too, in case I miss them. The reason is it important to review each year is that the plans to NOT remain the same year to year. Even if you see the premium only goes up a few dollars, the out of pocket may be going up much more. I just did one where the premium is up from \$15 to \$18 which made the patient feel they could stay where they are until we saw that the out of pocket went up over \$2,000 for the year. We were able to find the best plan at \$13 per month with a much lower out of pocket.
- Dr. Garcia's injection days got moved to accommodate holidays and such and he has just one day left in 2019 which is Monday, December 9<sup>th</sup>.
- Dr. Kelley has added a couple days of Endo so that we can catch up some patient needs and so he is now scheduled for the 22<sup>nd</sup> of November and the 9<sup>th</sup> and 10<sup>th</sup> of December to end 2020.
- Dr. Kelley is also adding days to the Clinic schedule, approximately 6 to 9 so far each month and this has been very helpful in having a provider here for patients and also for an MD presence. The goal is to keep this going and we should be working into some regular days in 2020 if all goes as planned.
- Clinic staff will be meeting with Bright Heart to begin referring to them for Mental Health services for all types of insurances. This is something we have looked for and we thank Administration for their hard work in getting us someone to work with. We are working with the local New Alliance as well, but they are limited to Medicaid patients only.
- I know I say it every month but it will happen one day: Medicare Wellness, Chronic Care Management and Medicare Classes are still on my list. We will get there.
- One of my biggest chores this last month has been to update all the Policy and Procedure Manuals and get them reviewed and signed. This job is nearly done. Updated notices are being posted or provided in the clinic lobby as required by RHC rules. It was interesting to locate and post some in 15 of the most used languages in our state. I have help from nursing, fiscal, HR, and front office and I am grateful to all. I am sure I will get these notices all posted in time for Maintenance to decide it is time to paint!! (Using Velcro to hang things.)

## Financial

To be financially viable, to support advancing the mission and vision. To be operationally efficient. To offer value to payer and consumers.

- Clinic numbers continue to beat last year. In October we have 995 patients over 831 in 2018. 129 Walk-ins. We continue to attempt to give same day/would be walk-in callers a time to come in as much as possible, and this works well on some days and not so well on others because we just can't predict what time something will cause a delay.
- We are working harder to allow more slots in our daily schedules by asking providers to hold to what patients state they need when making an appointment. In cases of a patient that needs much more once they go back into the exam room, if it is not urgent, and time is not there, a patient may be asked to make a new appointment with an appropriate time allowed for their needs. We have high hopes that this will help us keep to what the schedules say and actually help providers to provide more attention to specific patient needs.
- We are also working harder to identify what a patient does need each visit both from the patient and the provider that is asking them to return. This helps providers in making any preparations for the day.
- Nurses are helping front office identify what might be scheduled as a quick 15 minute appointment as well and that will really help us to allow more patients to get seen each day as the cold and flu season is upon us.
- We will be handling no-show patients a little more gently than in the past. The policy is in process of being re-done. We will be limiting a consistent no show patient to the end of provider days on the schedule to reduce the impact it may have when they do not come in and we have a big open slot that we can't fill back in. Once a patient begins to show up on time we can release that limitation. If a patient persists in not showing up even with the limitation, they may then get limited to walk-in visits. So far, one patient has done a good job of coming in and "graduated" back to being allowed the morning visits preferred.
- The more control we have in patient flow, it is felt the more we can increase our ability to accommodate the local need each day.

## Growth

To be the healthcare provider choice for our community. To identify service growth areas. To market service programs to community and constituents.

- More than 10 "Establish Care" visits took place in October. These are new patients. We have actually seen more than 10 new folks, but they do not "establish care" until we have records from their previous healthcare provider. We do see a new person for other needs while we wait on records.
- A little while ago 30 New Patient Packets were made and we are down to 5 available at this time.
- In my own little office, I am still getting patients in to help with Medicare and Social Security retirement and disability paperwork. This continues to be super rewarding to me and I have definitely heard that the patients are happy with the help and information. The best comment I heard was "you have been very helpful, (pause) extraordinarily so."

I respectfully submit this with thanks. JoAnn Ehlers



TO: Ferry County Public Hospital District #1 Board of Commissioners  
 FROM: Brant Truman  
 Subject: COO/CFO Report

MEETING DATE: November 26, 2019

As of November 18, 2019

People	<p>To be the employer of choice. To develop and support a culturally diverse, competent, motivated and productive workforce. To recruit and retain highly competent staff to meet the District's patient and resident needs.</p> <ul style="list-style-type: none"> <li>• Cost Report Seminar this last week. Many attended and had the opportunity to learn.</li> <li>• New employee finding tool being introduced shortly, aggregates over 700 agency/hiring firms into one dashboard. Our hope is that it improves our ability to find candidates for vacant positions.</li> <li>• Able to offer additional incentives for employee insurance moving forward.</li> </ul>
Quality	<p>To lead the community that improves community health status and access to care. To provide quality healthcare that can be defined, measured and published. To enforce and invest in a pervasive culture of safety.</p> <ul style="list-style-type: none"> <li>• Starting prospective review of medications coming up in the next month.</li> <li>• New ALF bus arrives on Tuesday the 19<sup>th</sup> of November.</li> <li>• Working on billing ortho out of Ferry County to allow for patients to work directly with us.</li> <li>• Brite Heart health coming shortly to allow for additional telemedicine opportunities.</li> </ul>
Service	<p>To provide an environment in which patients, families, providers and employees are highly satisfied. To provide an experience for patients that exceeds expectations in all areas of the District. To identify areas for improvement.</p> <ul style="list-style-type: none"> <li>• NRC patient data being received and showing current trends of patient care, excited to use as a tool to help move organization forward.</li> </ul>
Financial	<p>To be financially viable, to support advancing the mission and vision. To be operationally efficient. To offer value to payer and consumers.</p> <ul style="list-style-type: none"> <li>• Labcorp pricing has adjusted pricing based on Collaborative net savings of approx. \$31k</li> <li>• Working on a review of Med Malpractice insurance to decrease overall spend.</li> <li>• Completion of 2020 Budget with a project net position gain of \$550k.</li> <li>• Made \$100k USDA loan payment towards principle with 2024 Goal to payoff.</li> <li>• Adjustment to wages in 2020, illustrated in PowerPoint presentation at board meeting.</li> <li>• Capital Budget of Approximately \$500k.</li> <li>• Financial Statement Review.</li> <li>• Identified Interim Cost Report Calculation working on a monthly completion to adjust accordingly.</li> </ul>
Growth	<p>To be the healthcare provider choice for our community. To identify service growth areas. To market service programs to community and constituents.</p> <ul style="list-style-type: none"> <li>• MRI bus is here 24/7 currently have seen about 70% of our average monthly demand in a two week period.</li> <li>• Many other opportunities are presenting themselves to further help the hospital.</li> </ul>

Ferry County Public Hospital District #1 Financial Statements  
Month Ending October 31, 2019



Ferry County Public Hospital District No. 1  
 doing business as  
 Ferry County Memorial Hospital  
**Combined Income Statement: Hospital and Klondike Hills**

Year to Date October 31, 2019

	Q1	Q2	July	August	September	October	% of Gross Rev	YTD	% of Gross Rev
<b>Operating revenue:</b>									
Gross patient service revenue	4,806,826	5,245,352	1,918,835	1,729,156	1,566,627	1,833,552	\$	17,100,349	
Contractual allowances and provisions for uncollectible accounts	(1,625,177)	(1,673,636)	(683,366)	5,440	(381,037)	(678,009)	-37%	(5,035,786)	-29%
Patient service revenue - (Net contractual allowances)	\$ 3,181,649	\$ 3,571,716	\$ 1,235,469	\$ 1,734,596	\$ 1,185,591	\$ 1,155,543	63%	\$ 12,064,564	71%
Bad debt expense	(123,940)	(87,011)	(31,725)	(12,209)	(19,940)	(54,660)	-3%	(329,485)	-2%
Other operating revenue	218,983	356,051	80,637	(62,852)	62,473	72,660	4%	\$ 727,953	4%
<b>Total operating revenue</b>	<b>3,276,692</b>	<b>3,840,757</b>	<b>1,284,381</b>	<b>1,659,535</b>	<b>1,228,124</b>	<b>1,173,543</b>	<b>64%</b>	<b>\$ 11,289,490</b>	<b>66%</b>
<b>Operating expenses:</b>									
Salaries and wages	1,478,978	1,467,164	501,290	521,640	479,740	533,194	29%	\$ 4,982,006	29%
Employee benefits	385,956	406,794	129,679	80,549	134,881	135,778	7%	\$ 1,273,636	7%
Professional fees	359,326	447,378	159,158	179,086	117,229	123,663	7%	\$ 1,385,841	8%
Supplies	236,119	262,731	107,094	85,866	92,103	89,055	5%	\$ 872,968	5%
Purchased services - Utilities	81,195	56,695	15,176	15,668	15,098	20,271	1%	\$ 204,104	1%
Purchased services - Other	221,411	220,296	16,735	145,217	74,672	137,304	7%	\$ 815,636	5%
Insurance	20,429	11,321	16,690	7,135	7,135	8,072	0%	\$ 70,782	0%
Other	77,876	78,761	39,277	19,064	18,710	41,878	2%	\$ 275,568	2%
Rent	32,125	33,324	11,357	13,642	10,743	19,538	1%	\$ 120,730	1%
Depreciation	145,926	179,774	57,296	91,741	59,473	103,533	6%	\$ 637,743	4%
<b>Total operating expenses</b>	<b>3,039,341</b>	<b>3,164,238</b>	<b>1,053,753</b>	<b>1,159,610</b>	<b>1,009,784</b>	<b>1,212,287</b>	<b>66%</b>	<b>\$ 10,639,014</b>	<b>62%</b>
<b>Gain (loss) from operations</b>	<b>237,351</b>	<b>676,519</b>	<b>230,629</b>	<b>499,925</b>	<b>218,340</b>	<b>(38,745)</b>	<b>-2%</b>	<b>\$ 1,824,018</b>	<b>11%</b>
<b>Nonoperating revenues (expenses):</b>									
Property taxes	68,497	75,143	22,300	22,336	22,300	22,301	1%	\$ 232,876	1%
Interest earnings	16,114	17,747	6,166	6,498	6,135	6,197	0%	\$ 58,857	0%
Interest expense	(58,821)	(53,640)	(17,595)	(8,525)	(15,250)	(21,375)	-1%	\$ (175,205)	-1%
Grants and donations	19,449	13,475	7,157	-	-	-	0%	\$ 40,081	0%
Other	59,921	58,060	69,512	(35,868)	17,885	17,717	1%	\$ 187,225	1%
<b>Total nonoperating revenues (expenses) - Net</b>	<b>105,160</b>	<b>110,784</b>	<b>87,539</b>	<b>(15,560)</b>	<b>31,070</b>	<b>24,840</b>	<b>1%</b>	<b>\$ 343,833</b>	<b>2%</b>
<b>Increase (decrease) in net position</b>	<b>\$ 342,511</b>	<b>\$ 787,303</b>	<b>\$ 318,168</b>	<b>\$ 484,365</b>	<b>\$ 249,410</b>	<b>\$ (13,905)</b>	<b>-1%</b>	<b>\$ 2,167,852</b>	<b>13%</b>

Ferry County Public Hospital District No. 1  
doing business as  
Ferry County Memorial Hospital

Hospital Income Statement  
Year to Date October 31, 2019

	Q1	Q2	July	August	September	October	YTD
<b>Operating revenue:</b>							
Gross patient service revenue	4,652,157	5,099,984	1,874,450	1,684,771	1,525,098	1,785,303	16,621,764
Contractual allowances and provisions for uncollected	(1,625,177)	(1,677,822)	(686,470)	5,440	(381,037)	(678,009)	(5,043,075)
Patient service revenue - (Net contractual allowances)	\$ 3,026,980	\$ 3,422,162	\$ 1,187,980	\$ 1,690,211	\$ 1,144,061	\$ 1,107,294	\$ 11,578,689
Bad debt expense	(123,940)	(87,011)	(31,725)	(12,209)	(19,940)	(54,660)	(329,485)
Other operating revenue	218,956	356,006	80,628	(62,866)	62,464	72,632	727,821
<b>Total operating revenue</b>	<b>3,121,996</b>	<b>3,691,158</b>	<b>1,236,883</b>	<b>1,615,137</b>	<b>1,186,586</b>	<b>1,125,265</b>	<b>11,977,025</b>
<b>Operating expenses:</b>							
Salaries and wages	1,375,562	1,374,657	470,731	489,887	450,475	500,809	4,662,121
Employee benefits	355,356	377,341	119,979	69,319	124,270	126,057	1,172,322
Professional fees	359,326	447,378	159,158	179,086	117,229	123,663	1,385,841
Supplies	230,665	256,858	105,788	84,035	90,927	87,512	855,786
Purchased services - Utilities	77,955	53,074	14,044	14,463	13,888	19,197	192,621
Purchased services - Other	201,257	198,118	9,590	138,038	67,319	129,858	744,180
Insurance	20,429	11,321	16,690	7,135	7,135	8,072	70,782
Other	77,515	78,115	39,049	18,980	18,626	36,081	268,366
Rent	-	1,199	649	2,899	-	8,795	13,542
Depreciation	145,926	179,774	57,296	91,741	59,473	103,533	637,743
<b>Total operating expenses</b>	<b>2,843,990</b>	<b>2,977,835</b>	<b>992,974</b>	<b>1,095,583</b>	<b>949,343</b>	<b>1,143,578</b>	<b>10,003,303</b>
Gain (loss) from operations	278,006	713,323	243,909	519,554	237,243	(18,313)	1,973,723
<b>Nonoperating revenues (expenses):</b>							
Property taxes	68,497	75,143	22,300	22,336	22,300	22,301	232,876
Interest earnings	15,821	17,438	6,066	6,395	6,040	6,108	57,869
Interest expense	(58,821)	(53,640)	(17,595)	(8,525)	(15,250)	(21,375)	(175,205)
Grants and donations	19,449	13,475	7,157	-	-	-	40,081
Other	59,921	58,060	69,512	(35,868)	17,885	17,717	187,225
<b>Total nonoperating revenues (expenses) - Net</b>	<b>104,868</b>	<b>110,476</b>	<b>87,439</b>	<b>(15,662)</b>	<b>30,975</b>	<b>24,751</b>	<b>342,846</b>
<b>Increase (decrease) in net position</b>	<b>\$ 382,873</b>	<b>\$ 823,799</b>	<b>\$ 331,348</b>	<b>\$ 503,892</b>	<b>\$ 268,218</b>	<b>\$ 6,438</b>	<b>\$ 2,316,568</b>

Ferry County Public Hospital District No. 1  
doing business as  
Ferry County Memorial Hospital

Klondike Hills Income Statement  
Year to Date October 31, 2019

	Q1	Q2	July	August	September	October	YTD
Operating revenue:							
Patient service revenue - (Net contractual allowances)	\$ 154,669	\$ 149,554	\$ 47,489	\$ 44,385	\$ 41,529	\$ 48,250	\$ 485,875
Other Operating Revenue	27	45	9	14	9	28	132
Total operating revenue	154,696	149,599	47,498	44,399	41,538	48,278	486,006
Operating expenses:							
Salaries and wages	103,416	92,507	30,559	31,753	29,265	32,385	319,886
Employee benefits	30,600	29,453	9,700	11,230	10,611	9,721	101,315
Supplies	5,454	5,873	1,306	1,831	1,176	1,542	17,182
Purchased services - Utilities	3,240	3,621	1,133	1,206	1,209	1,074	11,483
Purchased services - Other	20,154	22,178	7,144	7,180	7,352	7,447	71,455
Other	362	646	228	84	84	5,797	7,202
Rent	32,125	32,125	10,708	10,743	10,743	10,743	107,188
Total operating expenses	195,350	186,403	60,778	64,028	60,442	68,709	635,711
Gain (loss) from operations	(40,655)	(36,805)	(13,281)	(19,629)	(18,904)	(20,431)	(149,704)
Nonoperating revenues (expenses):							
Interest earnings	293	308	100	103	95	88	988
Total nonoperating revenues (expenses) - Net	293	308	100	103	95	88	988
Increase (decrease) in net position	\$ (40,362)	\$ (36,496)	\$ (13,180)	\$ (19,526)	\$ (18,808)	\$ (20,343)	\$ (148,717)

# Ferry County Public Hospital District No. 1

doing business as

## Ferry County Memorial Hospital

Balance Sheet (Combined Statement of Net Position: Hospital and Klondike Hills)

Year to Date October 31, 2019

<i>Assets</i>	YTD Balance Hospital	YTD Balances Klondike Hills	Eliminations	YTD Balances Totals
<b>Current assets:</b>				
Cash and cash equivalents	\$ 4,342,183	\$ 82,638	\$ -	\$ 4,424,821
Patient trust	500	-	-	500.00
Receivables:				-
Patient AR - Net	2,261,174	64,946	-	2,326,119.39
Gross AR	3,343,907	64,946	-	3,408,852.77
Contractual allowance	(1,082,733)	-	-	(1,082,733.38)
Taxes	62,040	-	-	62,040.19
Estimated third-party payor settlements	-	-	-	-
Interdivision receivables	1,534,082	-	(1,534,082)	-
Other	38,729	-	-	38,729.26
Inventories	154,200	-	-	154,200.37
Prepaid expenses	39,313	-	-	39,313.12
<b>Total current assets</b>	<b>8,432,222</b>	<b>147,584</b>	<b>(1,534,082)</b>	<b>7,045,724</b>
<b>Noncurrent cash and cash equivalents:</b>				
Restricted cash & cash equivalent, USDA reserve	-	-	-	-
Internally designated cash and cash equip, funded depreciation	-	-	-	-
<b>Total noncurrent assets limited as to use</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Capital assets:</b>				
Nondepreciable capital assets	27,282	-	-	27,282
Depreciable capital assets - Net of accumulated deprec	5,623,990	-	-	5,623,990
<b>Total capital assets</b>	<b>5,651,272</b>	<b>-</b>	<b>-</b>	<b>5,651,272</b>
<b>TOTAL ASSETS</b>	<b>\$ 14,083,494</b>	<b>\$ 147,584</b>	<b>\$ (1,534,082)</b>	<b>\$ 12,696,996</b>



# Ferry County Public Hospital District No. 1

doing business as

## Ferry County Memorial Hospital

Balance Sheet (Combined Statement of Net Position: Hospital and Klondike Hills)

Year to Date October 31, 2019

<i>Liabilities and Net Position</i>	YTD Balances August	YTD Balances September	YTD Balances October
<b>Current liabilities:</b>			
Current maturities - Long term debt	\$ 259,014	\$ 85,284	\$ 85,568
Current maturities - Capital lease obligations	97,772	134,750	114,638
Accounts payable	289,698	168,809	271,763
Warrants payable	177,740	345,477	246,078
Patient trust	500	500	500
Payroll and related expenses	134,059	166,844	225,430
Accrued vacation	278,212	286,195	293,265
Unearned tax revenue	89,198	66,899	44,599
Accrued interest payable	121,100	130,762	45,291
Estimated third-party payor settlements	236,854	236,854	248,741
<b>Total current liabilities</b>	<b>\$ 1,684,146</b>	<b>\$ 1,622,372</b>	<b>\$ 1,575,872</b>
<b>Noncurrent liabilities:</b>			
Long term debt - Less current maturities	\$ 4,141,989	\$ 4,141,369	\$ 4,141,085
Capital lease obligations - Less current portion	227,677	177,412	192,561
<b>Total noncurrent liabilities</b>	<b>4,369,666</b>	<b>4,318,781</b>	<b>4,333,646</b>
<b>Total liabilities</b>	<b>\$ 6,053,812</b>	<b>\$ 5,941,153</b>	<b>\$ 5,909,518</b>
<b>Net position:</b>			
Invested in capital assets	\$ 877,653	\$ 1,019,109	\$ 1,072,129
Restricted expendables	-	-	-
Unrestricted	5,674,320	5,782,273	5,715,349
<b>Total net position</b>	<b>\$ 6,551,973</b>	<b>\$ 6,801,383</b>	<b>\$ 6,787,478</b>
<b>TOTAL LIABILITIES AND NET POSITION</b>	<b>\$ 12,605,784</b>	<b>\$ 12,742,536</b>	<b>\$ 12,696,996</b>

Ferry County Public Hospital District No. 1  
 doing business as  
 Ferry County Memorial Hospital

Hospital Balance Sheet  
 Year to Date October 31, 2019

<i>Assets</i>	YTD Balances August	YTD Balances September	YTD Balances October
<b>Current assets:</b>			
Cash and cash equivalents	\$ 4,299,165	\$ 4,149,031	\$ 4,342,183
Patient trust	500	500.00	500
<b>Receivables:</b>			
Patient AR - Net	1,963,532	2,214,582	2,261,174
Gross AR	3,064,625	3,187,965	3,343,907
Contractual allowance	(1,101,093)	(973,384)	(1,082,733)
Taxes	121,970	114,411	62,040
Estimated third-party payor settlements	(50,340)	70,306	-
Interdivision Receivables	1,497,863	1,515,863	1,534,082
Other	201,152	149,920	38,729
Inventories	154,257	155,338	154,200
Prepaid expenses	45,125	48,446	39,313
<b>Total current assets</b>	<b>\$ 8,233,224</b>	<b>\$ 8,418,397</b>	<b>\$ 8,432,222</b>
<b>Noncurrent cash and cash equivalents:</b>			
Restricted cash & cash equivalent, USDA reserve	-	-	-
Internally designated cash and cash equip, funded depreciation	-	-	-
<b>Total noncurrent assets limited as to use</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Capital assets:</b>			
Nondepreciable capital assets	\$ 27,282	\$ 27,282	\$ 27,282
Depreciable capital assets - Net of accumulated depreciation	5,697,922	5,661,404	5,623,990
Gross depreciable capital assets	14,855,843	14,878,797	14,944,916
Depreciation	(9,157,921)	(9,217,394)	(9,320,927)
<b>Total capital assets</b>	<b>\$ 5,725,204</b>	<b>\$ 5,688,686</b>	<b>\$ 5,651,272</b>
<b>TOTAL ASSETS</b>	<b>\$ 13,958,429</b>	<b>\$ 14,107,083</b>	<b>\$ 14,083,494</b>

# Ferry County Public Hospital District No. 1

doing business as  
**Ferry County Memorial Hospital**

Hospital Balance Sheet  
 Year to Date October 31, 2019

<i>Liabilities and Net Position</i>	YTD Balances August	YTD Balances September	YTD Balances October
<b>Current liabilities:</b>			
Current maturities - Long term debt	\$ 259,014	\$ 85,284	\$ 85,568
Current maturities - Capital lease obligations	97,772	134,750	114,638
Accounts payable	287,456	172,909	271,106
Warrants payable	175,675	331,356	238,789
Nursing home trust	500	500	500
Payroll and related expenses	126,480	156,208	209,587
Accrued vacation	243,148	252,997	264,807
Unearned tax revenue	89,198	66,899	44,599
Accrued interest payable	121,100	130,762	45,291
Estimated third-party payor settlements	236,854	236,854	248,741
<b>Total current liabilities</b>	<b>\$ 1,637,197</b>	<b>\$ 1,568,517</b>	<b>\$ 1,523,626</b>
<b>Noncurrent liabilities:</b>			
Long term debt - Less current maturities	\$ 4,141,989	\$ 4,141,369	\$ 4,141,084
Capital lease obligations - Less current portion	227,677	177,412	192,561
<b>Total noncurrent liabilities</b>	<b>4,369,666</b>	<b>4,318,781</b>	<b>4,333,645</b>
<b>Total liabilities</b>	<b>\$ 6,006,863</b>	<b>\$ 5,887,298</b>	<b>\$ 5,857,271</b>
<b>Net position:</b>			
Invested in capital assets	\$ 877,653	\$ 1,019,109	\$ 1,072,129
Restricted expendables	-	-	-
Unrestricted	\$ 7,073,914	\$ 7,200,675	\$ 7,154,093
<b>Total net position</b>	<b>\$ 7,951,566</b>	<b>\$ 8,219,785</b>	<b>\$ 8,226,223</b>
<b>TOTAL LIABILITIES AND NET POSITION</b>	<b>\$ 13,958,429</b>	<b>\$ 14,107,083</b>	<b>\$ 14,083,494</b>

# Ferry County Public Hospital District No. 1

doing business as  
**Ferry County Memorial Hospital**

Klondike Hills Balance Sheet  
 Year to Date October 31, 2019

<i>Assets</i>	YTD Balances August	YTD Balances September	YTD Balances October
<b>Current assets:</b>			
Cash and cash equivalents	\$ 87,264	\$ 89,913	\$ 82,638
Patient trust	-	-	-
<b>Receivables:</b>			
Patient AR - Net	57,955	61,403	64,946
Gross AR	57,955	61,403	64,946
Contractual allowance	-	-	-
Taxes	-	-	-
Estimated third-party payor settlements	-	-	-
Other	-	-	-
Inventories	-	-	-
Prepaid expenses	-	-	-
<b>Total current assets</b>	<b>\$ 145,219</b>	<b>\$ 151,316</b>	<b>\$ 147,584</b>
<b>Noncurrent cash and cash equivalents:</b>			
Restricted cash & cash equivalent, USDA reserve	-	-	-
Internally designated cash and cash equip, fund	-	-	-
<b>Total noncurrent assets limited as to use</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Capital assets:</b>			
Nondepreciable capital assets	\$ -	\$ -	\$ -
Depreciable capital assets - Net of accumulated	-	-	-
<b>Gross depreciable capital assets</b>	<b>-</b>	<b>-</b>	<b>-</b>
Depreciation	-	-	-
<b>Total capital assets</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>TOTAL ASSETS</b>	<b>\$ 145,219</b>	<b>\$ 151,316</b>	<b>\$ 147,584</b>

# Ferry County Public Hospital District No. 1

doing business as  
**Ferry County Memorial Hospital**

Klondike Hills Balance Sheet  
 Year to Date October 31, 2019

<i>Liabilities and Net Position</i>	YTD Balances August	YTD Balances September	YTD Balances October
<b>Current liabilities:</b>			
Current maturities - Long term debt	\$ -	\$ -	\$ -
Current maturities - Capital lease obligations	-	-	-
Accounts payable	2,242	(4,100)	657
Warrants payable	2,064	14,121	7,289
Patient trust	-	-	-
Payroll and related expenses	7,579	10,636	15,843
Accrued vacation	35,064	33,198	28,458
Unearned tax revenue	-	-	-
Accrued interest payable	-	-	-
Estimated third-party payor settlements	-	-	-
Interdivision Payables	1,497,863	1,515,863	1,534,082
<b>Total current liabilities</b>	<b>\$ 1,544,813</b>	<b>\$ 1,569,718</b>	<b>\$ 1,586,329</b>
<b>Noncurrent liabilities:</b>			
Long term debt - Less current maturities	\$ -	\$ -	\$ -
Capital lease obligations - Less current portion	-	-	-
<b>Total noncurrent liabilities</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total liabilities</b>	<b>\$ 1,544,813</b>	<b>\$ 1,569,718</b>	<b>\$ 1,586,329</b>
<b>Net position:</b>			
Invested in capital assets	\$ -	\$ -	\$ -
Restricted expendables	-	-	-
Unrestricted	(1,399,594)	(1,418,402)	(1,438,745)
<b>Total net position</b>	<b>\$ (1,399,594)</b>	<b>\$ (1,418,402)</b>	<b>\$ (1,438,745)</b>
<b>TOTAL LIABILITIES AND NET POSITION</b>	<b>\$ 145,219</b>	<b>\$ 151,316</b>	<b>\$ 147,584</b>



TO: Ferry County Public Hospital District #1 Board of Commissioners  
 FROM: Aaron Edwards, CEO  
 Subject: CEO Report

MEETING DATE: November 26, 2019

As of November 20, 2019

People	<p>To be the employer of choice. To develop and support a culturally diverse, competent, motivated and productive workforce. To recruit and retain highly competent staff to meet the District's patient and resident needs.</p> <ul style="list-style-type: none"> <li>• Recruiting firm officially kicked off search for a new full time clinic doc.</li> <li>• Mike Martinoli has joined our management team in the role of nurse manager.</li> <li>• The ALF will lose a resident next week with a new one coming right in off the waiting list.</li> <li>• Will be having a town hall meeting for the District on Monday 12/2.</li> <li>• Dr. Artzis will join the District as a full time employee on the ED Block.</li> <li>• Dr. Kelley has solidified a part time clinic schedule along with limited ED time. He will also be a full time employee in 2020.</li> <li>• Jeannette Brauer, ARNP will be looking at taking on some additional duties with optimization of our EMR and work on revamping medical staff bylaws in 2020.</li> <li>• Working on finalizing 2020 benefits package and open enrollment time.</li> </ul>
Quality	<p>To lead the community that improves community health status and access to care. To provide quality healthcare that can be defined, measured and published. To enforce and invest in a pervasive culture of safety.</p> <ul style="list-style-type: none"> <li>• Continue to look for a new solution to replace our cardiac monitor, will be meeting with SHMC to discuss the possibility of remote monitoring from Spokane.</li> <li>• The ALF has a new bus.</li> <li>• Replacement fetal heart monitor has arrived.</li> </ul>
Service	<p>To provide an environment in which patients, families, providers and employees are highly satisfied. To provide an experience for patients that exceeds expectations in all areas of the District. To identify areas for improvement.</p> <ul style="list-style-type: none"> <li>• New Alliance will be attending our next med staff to chat about communication and how to better serve the public.</li> <li>• Planning meeting for a multi-agency emergency drill to convene here at the hospital on 11/27.</li> <li>• Continue to attend BAT meetings. Inland Cellular has some new towers up in the area that will be live soon (hopefully bringing new options and better coverage at the lake).</li> <li>• Headed to Seattle for a Rural Health Committee meeting on December 11<sup>th</sup>. I have been reappointed to the WSHA Rural Health Committee for 2020.</li> <li>• Working on scheduling additional providers into a rotation for job corps in 2020 to better serve them and give Mari more time in clinic as well as time off.</li> </ul>
Financial	<p>To be financially viable, to support advancing the mission and vision. To be operationally efficient. To offer value to payer and consumers.</p> <ul style="list-style-type: none"> <li>• M-F MRI services now available, marketing will begin soon.</li> </ul>
Growth	<p>To be the healthcare provider choice for our community. To identify service growth areas. To market service programs to community and constituents.</p> <ul style="list-style-type: none"> <li>• Planning a road trip with Dr. Kelley and possibly Dr. Artzis to Spokane to visit the residency as well as some gastro clinics to find a better referral path for our patients needing services beyond what we can provide here.</li> </ul>