



BOARD OF COMMISSIONERS' MEETING

May 26, 2020, 10:30 a.m.

Join Zoom Meeting

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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	
 <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	3-7
<ul style="list-style-type: none"> • Minutes 4/28/20 Board Meeting • Approval of Warrants • Financial Write-Off Report • Resolution 2020#5 Surplus & Small Equipment 			
Correspondence		Nancy Giddings	
Public Comments			
CNO Report & Quality Improvement and Compliance/Risk Management		Cindy Chase	8-9
Clinic Report		JoAnn Ehlers	10-11
Medical Staff Report		Dr. Garcia	
Safety Report:		Brant Truman	
CFO/COO Report		Brant Truman	12
Financial Report		Brant Truman	13-20
CEO Report		Aaron Edwards	21
Old Business		Nancy Giddings	

- Board QI Project
- Facility Update
- Health Foundation
- Board Succession planning
- Strategic Planning
- Pharmacy
- Aaron's annual evaluation/contract

Board Representative Reports

- | | |
|--|--------------------------------|
| • Finance | Ron Bacon/Sarah Krausse |
| • Quality Improvement | Jody Jannot/DiAnne Lundgren |
| • Compliance/Risk Management | Ron Bacon/Jody Jannot |
| • Medical Staff | Nancy Giddings/DiAnne Lundgren |
| • Credentialing | DiAnne Lundgren/Nancy Giddings |
| 1. Request for appointment of Courtesy Medical Staff privileges for Sirikan Napan, MD | |
| 2. Request for reappointment of Courtesy Medical Staff privileges by telemedicine proxy for Integra providers: Jeffery Clarke, MD | |
| 3. Request for appointment of Courtesy Medical Staff privileges by telemedicine proxy for Integra providers: Jason Roth, MD, Elizabeth Joiner, MD, Phillip Smith, MD | |
| 4. Request for reappointment for Courtesy Medical Staff privileges for Romeo Pavlic, MD | |
| • EMS | Nancy Giddings |

New Business

-

Nancy Giddings

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 June 18, 2020 @ 12:00 p.m.



Ferry County Health

BOARD OF COMMISSIONERS' MEETING

April 28, 2020

CALL TO ORDER: Chair Nancy Giddings called the meeting of the Board of Commissioners to order at 10:31 a.m. on April 28, 2020, via Zoom. Commissioners in attendance were Nancy Giddings, Ronald Bacon, DiAnne Lundgren, Sarah Krausse and Jody Jannot. Aaron Edwards, CEO; 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 Bacon and seconded by Krausse to amend the agenda to add Resolution 2020#4 to New Business. The motion passed unanimously.

GUEST: Adam Volluz, Radiology Manager, Jeannette Bauer, ARNP, Mena Cassell, Controller, Jordan Leonard, CSW, James Davidson, IT Manager

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

CORRESPONDENCE: None

PUBLIC COMMENTS: None

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:

- Solid weekend admissions. Seeing a lot of traumas with the change in season.
- Finalizing our plans so as the state opens restrictions we can operate safely.
- Increase in imaging since we updated clinicians on the proclamation details.
- Will continue to maintain our high level of precautions with Covid as anticipation of rural areas being affected later and our need to protect our LTC.

SAFETY REPORT: Truman noted the following:

- Asked staff and departments to put together a plan for opening back up fully.

CFO/COO REPORT: Truman reviewed the attached report.

- Reviewed the Cares Act 3.0 updates,
- We are eligible for the Payment Protection Program. Working on that.
- Discussed stimulus 4.0.

- Discussed the FEMA program.

FINANCIAL REPORT: Truman reviewed the March financials. He also noted the following:

- Offered voluntary standby for staff. We had 12 staff take that option.

CEO REPORT: Edwards reviewed the attached report. He also noted the County Commissioners and Tri County Health to Inslee asking for consideration for services to open on the 4th. Edwards would also like to write a letter. The Board agreed to have Aaron write one as well. Tomorrow there will be a town hall meeting on the Hospital's Facebook page to discuss COVID and let the community ask questions.

OLD BUSINESS:

- Board QI Project: Tabled
- Facility Update: Installed sneeze guards up at all front desks in the district.
- Health Foundation: No update.
- Board Succession Planning: The Chelan conference has been canceled. There are a lot of great webinars that WSHA will be putting on.
- Strategic Planning: Tabled
- Pharmacy: Trying to see how we can move forward.

BOARD REPRESENTATIVE REPORTS:

- Finance: No Board concerns.
- Quality Improvement: No Board concerns.
- Compliance/Risk Management: Working on rescheduling.
- Medical Staff: No Board concerns.
- Credentialing: No Board concerns.
- EMS: No Board concerns.

NEW BUSINESS:

- Aaron's annual evaluation/Contract: Lacy will send out the 2020 CEO evaluation to all the Board members. They will review at next month's meeting.
- Resolution 2020#4 Cares Payment Protection:

A motion was made by Lundgren and seconded by Krause to accept Resolution 2020#4 Cares Payment Protection. The motion passed unanimously.

EXECUTIVE SESSION: Executive Session was called at 11:45 a.m. for 10 minutes regarding RCW 42.30.110(1)(g).

Open session resumed at 11:55 a.m. No action taken.

Dr. Garcia was able to give his medical staff report to the Board.

ADJOURNMENT: As there was no further business the meeting was adjourned at 12:06 p.m.

Asset Disposal Sheet (Quarterly Report)
 Disposal of Surplus Property other than Real Estate (Policy 25.01.001 - Exhibit A)
 For 2nd Quarter, 2020

DATE OF ACQUISITION	DESCRIPTION (Model/Serial #/ Quantity/Current Location)	REASON FOR DISPOSAL	DISPOSITION PROCESS		DISPOSAL TIMELINE		COMMENTS
2007	Rolling File Racks 4 Double units, 2 Ends with Track	no longer need	sell/donate to community		asap		
2012	Maytag Commercial wash machine MAT35MNAWW	worn out	Recycle		asap		

APPROVED BY:

Facilities Mgr _____ Date: _____

CFO _____ Date: _____

CEO _____ Date: _____

BOD _____ Date: _____

Resolution 2020#5
 Date Approved by BOC: 5/26/20



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

MEETING DATE: May 26, 2020

As of May 15, 2020

<p>People</p>	<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"> • Nurse Staffing This has settled a bit. We have an open position on nightshift and actually have applications to review for other nursing position. One applicant is moving here (family in the area) and is looking for property. She is a certified wound nurse! Hot Dog!! She is slated to come on board sometime in June. We have a couple of nurses coming off of orientation so in reality, we will be able to start reducing agency. • Workflow Evaluation We continue to thrive in our covid surroundings. So far, no further sickness of staff and LTC has been in lock down and has had no illness issues during this time. I believe the staff is totally used to the work flow and doing well. We are going to remain in Covid lockdown for the time being. Using SARs has really improved workflow throughout the district.
<p>Quality</p>	<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"> • Infection Control/ Employee Health. The ever vigilant Katy is on high alert and watching for masking by the staff and handwashing. Still no further cases in Ferry County but she is watching our surrounding counties daily and we keep our fingers crossed that those residents don't visit Ferry County at this time. Our PPE appears to be in good shape and we are all mindful of not wasting it!! The triage trailer has really decreased in testing but will continue to man it until after we open for a while just in case a surge does occur. I believe we are ready for whatever comes our way.
<p>Service</p>	<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"> • Swing Beds. We do continue to have 1-2 SWB patients fairly routinely. Austin and Jordan have their eye on a couple down the pike that they are following and working with Spokane hospitals to ensure they come back to Ferry County. Austin continues to work so well with our staff and the patients are receiving excellent PT care and attention. • New Equipment. Spacelabs is very close to being fully implemented. The complex work with IT is moving along. Staff looking forward when the Spacelabs and Centriq are consistently talking to one another. Will save nurses time when it comes to charting. I need to find some other things to spend money on! 😊 • QI/RISK/QMM. There was a QMM for a fax that went to a wrong place outside the facility that I am still investigating. There have been a couple of falls in the ALF and some minor medication events. Compliance meets May 21. QI will meet up on the 27th for the first time in a couple of months.
<p>Financial</p>	<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"> • Staffing has led us use more agency staff, but there is a light at the end of the tunnel. Reducing staff OT helps stave off burn out. Mike working hard at keeping OT under control

Growth

heavily asserting clocking in and out for lunches. We are staffed well enough now that this should fix itself, but we are still riding herd!

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

Mike somehow got his hands on a greenhouse for the ALF and checking out flowers etc. Many of our educational moments have been directly with the schools but with the schools done for the year, we will be focusing on safety in the fall as hopefully schools will be back open. Jordan is wanting to work with the school age kids to assess if there are issues that she can help with. I am hoping to see a concussion awareness education for athletes. We continue to entertain calls from the community regarding Covid 19.

CNO It is official, we have been awarded a Trauma Designation level V. It is provisional for 2 years but I have homework to complete that will bump it up to a 3 year designation. These items are a bit complex but definitely doable. I currently completed my TNCC, PALS and ACLS certifications. I am getting so smart!!! We take Covid 19 day by day as it comes, but I am enjoying getting back into some normalcy. I am taking this opportunity to really shore up our Trauma Process to ensure that when MIKE does the application next time, it will be much easier. Plus this involves a big education push for the staff. This is a major upgrade from what we have been doing and I am focusing much more on why we are doing such and such. The staff is more engaged than what I have seen. Many mini group huddles are working well. We are just at the baby step level, but I truly believe the staff can give excellent care and we can reach the many goals that are involved with the program. Summer is coming and I am hopeful we will be prepared for any trauma that comes our way.

I have one more Coverys risk class to complete in June and then can wrap up the course. It has been a really good learning experience. Mike and Katy have been very helpful with Trauma as we forge ahead. We have many "team" sports here in our hospital.



TO: Ferry County Health Board of Commissioners
 FROM: JoAnn Ehlers
 Subject: Clinic Report

MEETING DATE: May 26th, 2020

As of May 18th, 2020

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.

- The tiny crew we had learned some things and we became quite an organized and efficient team. Now that the whole crew is back we are attempting to bring the rest into the new processes we came up with. This is not as easy as it sounds.... But we have the opportunity and we are jumping on it.
- I was down one Front Office FTE when we went onto furlough so I hope to gain that back as soon as I can. I am first getting my returning Front office staff up to speed.

Quality

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.

- Some of the things we changed made a difference in our quality of care. For one, all phone calls are being sent to the front office. Anything that is not an appointment is being Qliq'd out to all nursing staff and anyone free is being asked to take it and close it. This is working mostly well.
- Mondays have been very busy for calls. Most other days have been more manageable with the staff we have. We have had help from the PT staff and an EMS Volunteer.
- All calls are to be returned asap. I ask that calls are returned even if just to say we got the message and will get back to the patient.
- We still have issues with calls that are not understandable – we can't hear them, people talk too fast, or the call is garbled and we can't catch the words. Many folks simply leave a name and phone number and those are sometimes the ones we can hear well.
- The message on the phones is including wording of "if we do not call back in an appropriate time, to please try again." I had one guy who said "if my message to you was as garbled as your message to me; I understand why you did not call me back right away."
- All RX refills will be done the same way by every nurse as soon as we can get them all on board.
- The goal is that no matter who does the job, it will be done in the same correct way.
- I have the same goal for the front office. We will be checking patient's demographics and insurances at the time we make the appointment from now on. Only those we know very well will be allowed to pass and we will still recheck their insurances anyway. I now have a three check process and the goal is 100% accuracy. (There is always a glitch but we will get through them one at a time.)
- Many times a front office person needs to run into a certain thing to actually understand it: Example, if you have not ever seen a Medicare Advantage Plan, you may not recognize it when you do see it for the first time in a real situation.
- The biggest insurance issue is those HMO's where we are not the PCP at the time of the visit and we have to hold things up to fix it. Catching these at the time of the appointment will be a definite improvement. There is an understanding between the Clinic and HCA rep in our town at this time to get the whole job of Medicaid/Apple Health done for all patients.

Service

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.

- The ISO/Respiratory area has been moved back to the Visiting Provider side with sealed walls. Providers will be able to see any of their own patients back there as needed. There are separate PPE Donn and Doff areas.
- We will continue to screen all patients at the front entrance to the Clinic. Any patient with any symptom will be moved to the ISO side and their provider will be notified.
- A new process was written up and approved by Infection Control and Dr. Kelley.
- We are bringing back diagnostic Endo procedures. Screening ones will continue to wait. We have a list of 40 patients for Dr. Kelley to go through and two dates in June are set.
- We started Dr. Garcia back with 3 US guided injections on the 12th, he will restart in June.
- We have seen an increase in US orders with the re-opening of imaging.
- Bill Hartman will continue to come in. He was here on May 8th.
- Laura Karg had 10 patient visits in April and more referrals are coming in. I am in contact with a few of the insurances to make sure we are ok to see patients and what might be required. There have already been a couple of "warm hand-offs" and this feels right.
- I do not have return dates for Dr. Pavlic or Dr. Hsu.

Financial

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

- 625 total patients in April of 2020 (Down from 965 April of 2019)
- 13 walk-ins at 2% of total (Have had space to make appointments for all that call in, these are true walk-ins.)
- Average patient per provider is down to 9. (Simple lack of patients. Still down two provider days from normal.)
- Phone visits: 152
- Telehealth Zoom: 31
- Drive up: 10
- Equals: 30% Total Telemed.
- Same Day From Covid Trailer: 6
- Molina has offered us \$1,000 to help make a nice counseling room for Laura. I have asked Amerigroup for the same and their representative is checking. I will be asking CHPW as well.
- The Behavioral Health Program we were applying for has delayed until at least July for now.

Growth

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

- There is not a lot to share for growth. I am asking all to get the word out that we continue to be open for business.
- We do continue to see new and returning patients in a slow but steady chug along.
- The goal now is to get back to where we were and go from there.

Once again, I respectfully submit this with huge thanks. JoAnn Ehlers



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

MEETING DATE: May 26, 2020

As of May 19, 2020

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"> • Central Supply, Occupational Therapy currently looking for staff to help meet needs.
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"> • Sneeze Guards have been placed in high traffic areas to maintain a safe and working environment for staff and patients. • Search and Rescue continues to do a great job supporting our facility. • Spacelabs continues to go well and we are glad to have the new cardiac monitoring equipment. • PPE has maintains approx. 180 days in high use categories. Especially related to Gowns (20k), Masks (30K), gloves (100K). We are sufficiently covered. • Have returned mostly to face to face visits.
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"> • Continue to offer a COVID clinic in our visiting provider area. • All services are up and running with Rehab opening Thursday, May 21 • Update to our Emergency COVID plan to adjust for current situations. • Project started to expand lab.
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"> • Total Fiscal Support from the Federal Government • CARES ACT: \$3,752,874 (Potential Grant) PPP LOAN: \$1,280,000 (Potential Grant) ACCELERATED PAYMENT: \$2,080,000 (LOAN MUST PAY BACK) • Money above can only be used for COVID-19 related expenses and revenues. • 26 week cash flow projection presented. • Total of \$560,033 missed revenue for the months of March and April booked. • Financial Audit/Cost Report completed for June board meeting. • May continues to see decreased revenue by approx. 25% due to COVID related shortages. • April saw a 28% decrease in total revenue. • Review of Financials presented.
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"> • I believe an expansion of Telehealth visits will provide a great opportunity in the long run for the community.

Ferry County Public Hospital District #1 Financial Statements
Month Ending April 30, 2020



Ferry County Public Hospital District No. 1
doing business as

Ferry County Memorial Hospital

Combined Income Statement: Hospital and Klondike Hills

Year to Date April 30, 2020

	January	February	March	Q1	April	April % of Gross	YTD	% of Gross Rev
Operating revenue:								
Gross patient service revenue	1,710,915	1,489,612	1,621,788	4,822,315	1,462,044		\$ 6,284,360	
Contractual allowances and provisions for uncollectible accounts	(665,331)	(448,659)	(642,669)	(1,756,659)	(508,258)	-35%	\$ (2,264,917)	-36%
Patient service revenue - (Net contractual allowances)	\$ 1,045,584	\$ 1,040,954	\$ 979,119	\$ 3,065,656	\$ 953,786	65%	\$ 4,019,442	64%
Bad debt expense	18,209	35,579	1,902	55,690.05	17,073	1%	\$ 72,763	1%
Other operating revenue	81,814	69,163	70,779	221,755	84,819	6%	\$ 306,574	5%
Total operating revenue	1,145,607	1,145,695	1,051,799	3,343,101	1,055,678	72%	4,398,780	70%
Operating expenses:								
Salaries and wages	567,489	518,333	572,097	1,657,919	570,665	39%	\$ 2,228,584	35%
Employee benefits	154,413	170,424	134,946	459,783	154,348	11%	\$ 614,131	10%
Professional fees	112,596	108,235	137,918	358,749	154,369	11%	\$ 513,118	8%
Supplies	92,119	67,987	105,701	265,807	77,571	5%	\$ 343,378	5%
Purchased services - Utilities	24,883	31,012	23,102	78,997	25,399	2%	\$ 104,396	2%
Purchased services - Other	86,392	108,389	157,758	352,538	80,931	6%	\$ 433,469	7%
Insurance	7,135	7,135	7,135	21,405	8,240	1%	\$ 29,646	0%
Other	28,371	21,186	47,393	96,950	12,193	1%	\$ 109,143	2%
Rent	11,573	11,573	11,673	34,819	11,573	1%	\$ 46,392	1%
Depreciation	62,559	74,447	66,827	203,832	66,697	5%	\$ 270,530	4%
Total operating expenses	1,147,529	1,118,721	1,264,549	3,530,800	1,161,988	79%	4,692,787	75%
Gain (loss) from operations	(1,922)	26,974	(212,750)	(187,698)	(106,309)	(0)	\$ (294,008)	-5%
Nonoperating revenues (expenses):								
Property taxes	21,876	21,952	21,876	65,704	23,473	2%	\$ 89,177	1%
Interest earnings	5,484	4,700	4,438	14,622	3,346	0%	\$ 17,969	0%
Interest expense	(15,457)	(15,439)	(14,997)	(45,893)	(15,284)	-1%	\$ (61,177)	-1%
Grants and donations	-	-	-	-	1,200	0%	\$ 1,200	0%
Other	20,757	18,095	16,799	55,651	598,970	41%	\$ 654,621	10%
Total nonoperating revenues (expenses) - Net	32,660	29,308	28,117	90,085	611,705	42%	701,790	11%
Increase (decrease) in net position	\$ 30,738	\$ 56,282	\$ (184,633)	\$ (97,614)	\$ 505,396	35%	\$ 407,782	6%

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 April 30, 2020

<i>Assets</i>	YTD Balances January	YTD Balances February	YTD Balances March	YTD Balances April
Current assets:				
Cash and cash equivalents	\$ 3,503,022	\$ 3,485,192	\$ 3,393,365	\$ 7,360,683
Patient trust	500	500	500	500
Receivables:				
Patient AR - Net	2,187,915	2,310,242	2,322,352	2,221,162
Gross AR	3,204,454	3,389,735	3,472,075	3,336,493
Contractual allowance	(1,016,539)	(1,079,494)	(1,149,723)	(1,115,331)
Taxes	280,664	267,440	238,966	179,754
Estimated third-party payor settlements	2,054	2,054	-	-
Other	286,755	167,313	191,197	(1,203,156)
Inventories	178,696	179,730	199,863	217,876
Prepaid expenses	35,750	52,322	44,120	35,917
Total current assets	\$ 6,475,355	\$ 6,464,792	\$ 6,390,363	\$ 8,812,737
Noncurrent cash and cash equivalents:				
Restricted cash & cash equivalent, USDA reserve	-	-	-	-
Internally designated cash and cash equip, funded depreciation	-	-	-	-
Total noncurrent assets limited as to use	-	-	-	-
Capital assets:				
Nondepreciable capital assets	\$ 27,282	27,282	27,282	27,282
Depreciable capital assets - Net of accumulated depreciation	5,996,007	5,928,669	5,896,328	5,829,630
Total capital assets	\$ 6,023,290	\$ 5,955,951	\$ 5,923,610	\$ 5,856,912
TOTAL ASSETS	\$ 12,498,644	\$ 12,420,744	\$ 12,313,973	\$ 14,669,649

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 April 30, 2020

<i>Liabilities and Net Position</i>	YTD Balances January	YTD Balances February	YTD Balances March	YTD Balances April
Current liabilities:				
Current maturities - Long term debt	\$ 92,962	\$ 92,939	\$ 91,847	\$ 93,456
Current maturities - Capital lease obligations	113,248	112,786	112,326	111,959
Accounts payable	652,942	404,096	747,619	424,259
Warrants payable	299,940	415,110	143,564	138,269
Patient trust	500	500	500	500
Payroll and related expenses	12,986	146,083	189,976	244,863
Accrued vacation	300,457	321,242	342,219	357,658
Unearned tax revenue	240,635	218,759	196,884	175,008
Accrued interest payable	13,699	27,402	40,685	54,246
CARES ACT FEDERAL FUNDING				(184,717)
Estimated third-party payor settlements	352,819	216,167	13,514	2,101,220
Total current liabilities	\$ 2,080,187	\$ 1,955,084	\$ 1,879,133	\$ 3,516,721
Noncurrent liabilities:				
Long term debt - Less current maturities	3,801,049	3,801,072	3,752,164	3,750,555
Capital lease obligations - Less current portion	102,580	93,477	84,350	298,651
Total noncurrent liabilities	3,903,629	3,894,549	3,836,514	4,049,206
Total liabilities	\$ 5,983,816	\$ 5,849,633	\$ 5,715,647	\$ 7,565,927
Net position:				
Invested in capital assets	1,899,752	1,828,275	1,842,238	\$ 1,548,045
Restricted expendables	-	-	-	-
Unrestricted	4,615,076	4,742,835	4,756,088	5,555,677
Total net position	6,514,828	6,571,110	6,598,326	\$ 7,103,722
TOTAL LIABILITIES AND NET POSITION	\$ 12,498,644	\$ 12,420,744	\$ 12,313,973	\$ 14,669,649

FINANCE DASHBOARD
Ferry County Public Hospital District #1
April 30, 2020

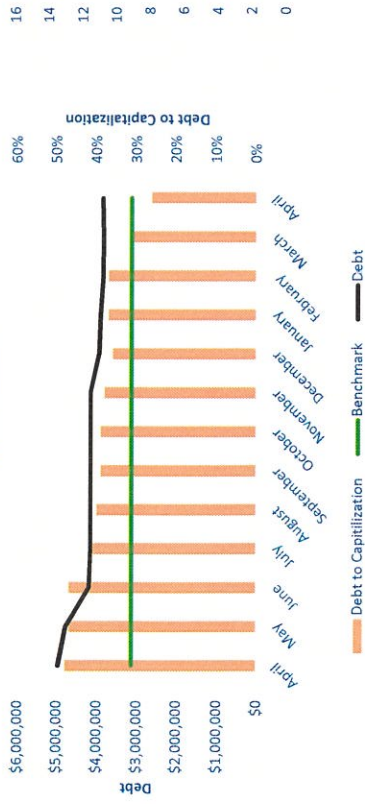
Stats	Year To Date			Current Month		
	Current Total	Target	Prior Year	Current Total	Target	Prior Year
1 Acute Care Days	112	16	106	28	16	26
2 Skilled Swing Bed Days	179	151	129	43	38	5
3 Long Term Swing Bed Days	1107	1448	1736	243	362	447
4 Observation Hours	723	789	956	312	197	227
5 Admissions (Acute)	29	25	30	13	6	7
6 Average Length of Stay (Acute)	2.88	3.00	2.85	2.12	4.00	2.35
7 Outpatient Visits	2719	3326	3343	329	832	831
8 ED Visits	533	571	604	126	143	156
9 Emergency Admit to Inpatient	5.44%	3.00%	4.97%	7.94%	2.80%	5.77%
10 Procedures	46	78	44	1	20	13
11 Clinic Visits	3172	3509	3591	625	877	965
12 Rehab Treatments	2767	3452	4350	159	863	868
13 Imaging Visits	1175	1400	1272	230	350	331
14 Lab Visits	8104	9074	8952	2,112	2,268	2,356
Profitability						
14 Revenue Deductions % of Gross Revenue	36%	30%	30%	34%	30%	17%
15 Salaries % Gross Patient Revenue	35%	45%	31%	39%	45%	31%
16 Benefits % of Salary Expense	28%	26%	26%	27%	26%	26%
17 Bad Debt % Gross Patient Revenue	0.89%	1.78%	2.63%	0.00%	1.78%	2.77%
18 Charity % Gross Patient Revenue	0.38%	1%		0.72%	1%	0.86%
19 Total Salary Expense	\$ 2,228,584	\$ 1,502,770	\$ 1,992,268	\$ 570,665	\$ 500,923	\$ 513,289

Key

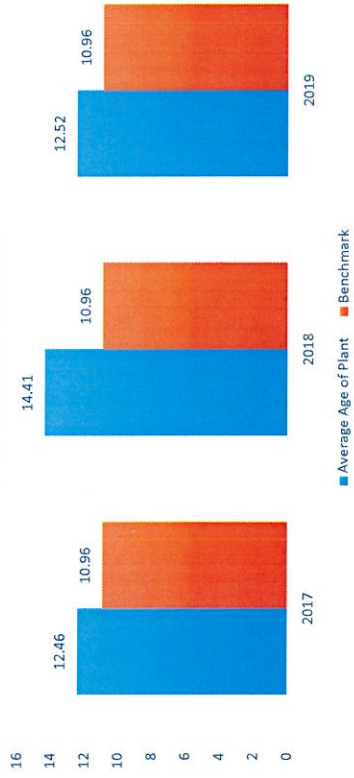
- Meets or exceeds budget/target
- Does not meet budget/target expectations by 5% or less
- Does not meet budget/target expectations by greater than 5%

2020 Liquidity

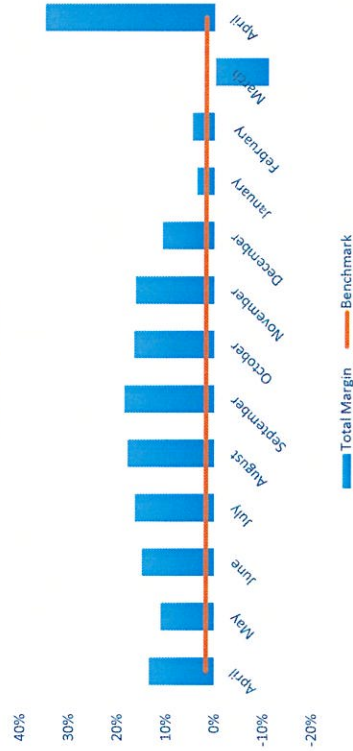
Debt to Capitalization



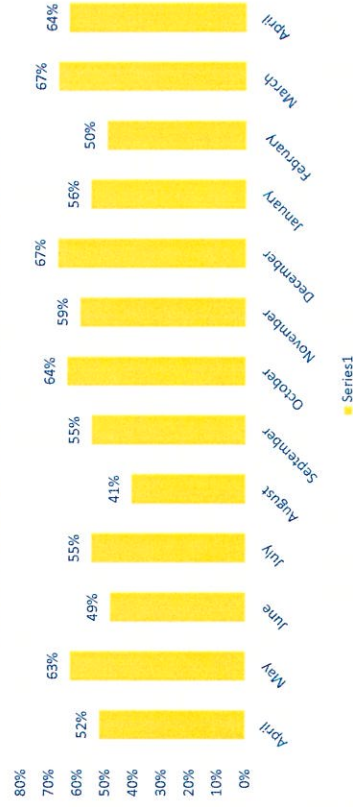
Average Age of Plant



Total Margin

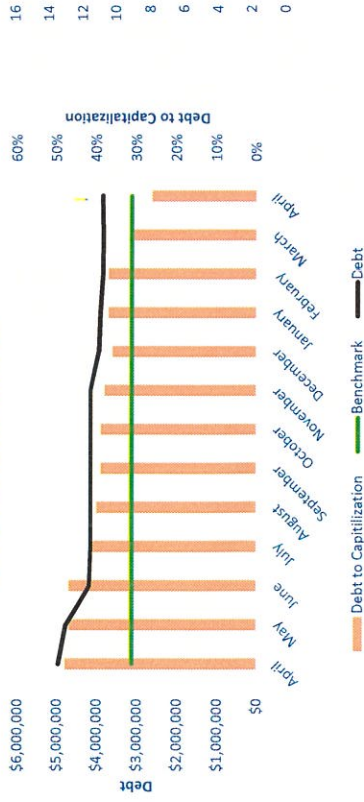


Labor Expense as a % of Operating Revenue

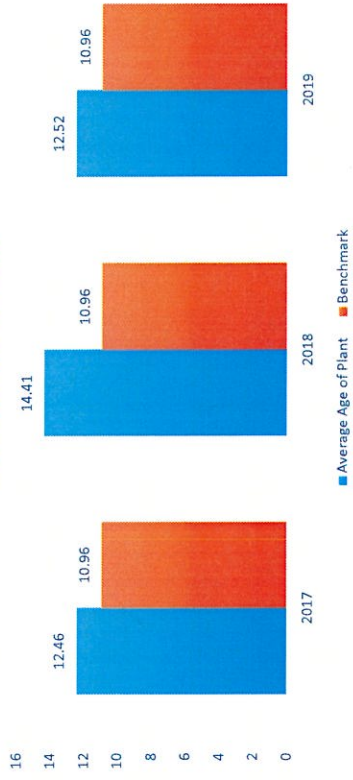


2020 Liquidity

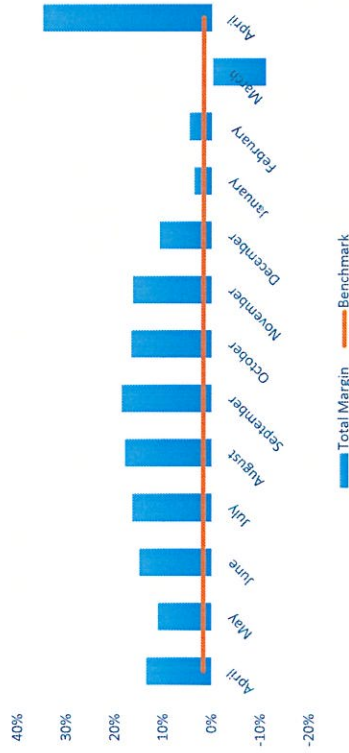
Debt to Capitalization



Average Age of Plant



Total Margin

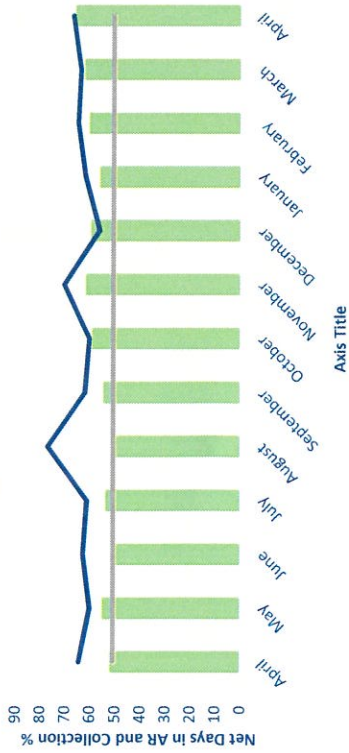


Labor Expense as a % of Operating Revenue

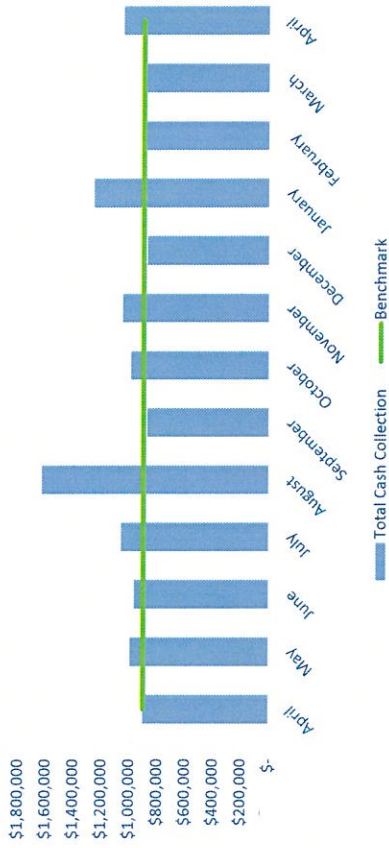


2020 Revenue Cycle

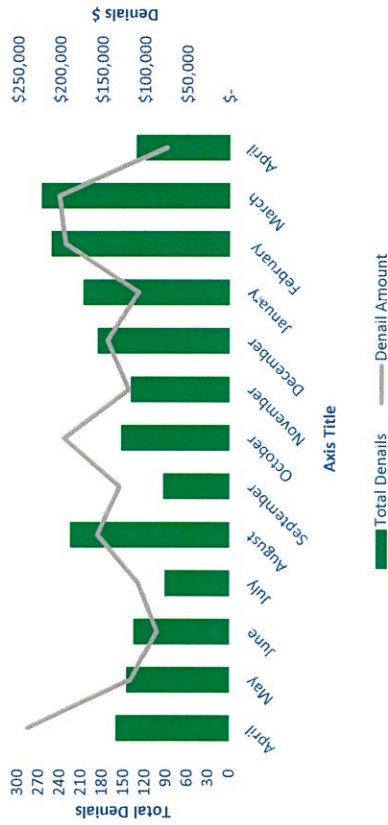
Net Days in Accounts Receivable



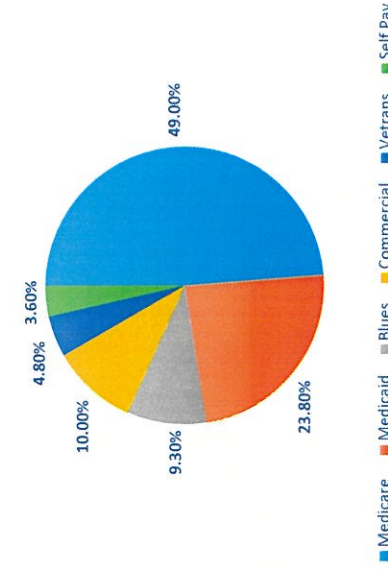
Cash Collections- Patient Accounts



Total Avoidable Denials



Payer Mix- 13 Month Average





TO: Ferry County Health Board of Commissioners MEETING DATE: May 26, 2020
 FROM: Aaron Edwards, CEO
 Subject: CEO Report

As of May 18, 2020

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.

- Dr. Kelley has assumed the duties of Clinic Medical Director.
- Happy to see success with recruiting a few new nurses (see Cindy's report of course).
- Visited with Gov. Inslee's Healthcare advisory group and gave feedback on rough spots moving to phase 2 for the county as well as frustration over the State's lack of priority for long term care residents (60% of the State's COVID deaths have occurred in long term care yet most facilities are not feeling support from the State). More advocacy needed here (please ask me about this during our meeting).
- There will be no summer party due to COVID
- Sent out Wash Your Hands shirts and \$10 GC's to Sparky's for Hospital week.

Quality

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.

- Started weekly meetings designed to trouble shoot and plan for returning to "normal".
- Attended the NCW Hospital Council via Zoom, many good ideas about resuming services safely. Was amazing to see that in many areas our staff is ahead of facilities in the region (clinic, hospital and testing especially).
- Keeping most precautions in place + testing trailer for COVID (Employee temp checkpoint, isolation in hospital and clinic, sneeze guards at front desks, no visitors in hospital or ALF, SAR check point).

Service

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.

- Town hall meeting on 4/29 with Dr. Garcia, Dr. Artzis, Jane Jacobson, Amanda Chilvers, and Mike Martinoli was successful. Had roughly 40 live viewers with many more views of the recording after.
- Met with New Alliance Counseling to work out past issues. Have an all-day meeting with nursing and New Alliance to build synergies and work trouble spots.
- Started a new ad campaign designed by WSHA that encourages folks to not put off their care.
- Attended the Healthy Ferry County Coalition meeting (Zoom). Laura Karg led a very good discussion on how we improve our response to suicide prevention in the county.
- Had a discussion of suicide prevention at Med Staff, more discussions coming.
- Continue to be active as a Board member with Innovia; SAR and the People's pantry received grant money a few weeks back. More soon.
- Continue to have weekly meetings with V.A. Bono and State Physician K. Lofy MD.

Financial

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

- Received \$3.3M in CARES money (likely much of it will need to be returned)
- Received \$1.2M in PPP (payroll protection plan) money from the SBA (Via WaFed).
- With CARES and PPP money it does not look like we will be able to apply for FEMA \$.

Growth

- 340B revenue has remained steady through the COVID slow down.
- To be the healthcare provider choice for our community. To identify service growth areas. To market service programs to community and constituents.
- PT beginning to see patients face to face this week.
 - Ultrasound guided injections resumed last week.
 - Dr. Kelley did an EGD and Colonoscopy last week.