

Niobrara County Hospital District Board of Trustees

Board of Trustees Meeting Minutes

December 14, 2020 5:30 p.m.

The Niobrara County Hospital District Board of Trustees met in the Training room at Niobrara Community Hospital in Lusk, Wyoming. In attendance were Mr. Mark Groh, Chairman; Mr. Travis Krein, Vice-Chairman; Ms. Shelly Larson, Treasurer; Ms. Randi Ross, Secretary, JV Boldon, Member and Dan H. Hanson, Member-elect. Also, in attendance from RCI were Nick Doucette, CEO and Dana Gilleland, CFO.

Mr. Groh called the Public Session to order at 5:30 p.m.

A quorum was verified.

Acceptance of the Agenda

Mr. Krein moved to accept the agenda with the addition of “credentialing” under old business of the meeting. Ms. Larson seconded the motion. There was no discussion. Motion carried 4-0.

Acceptance of the Minutes

Ms. Ross moved to accept the minutes of the November 17, 2020 meeting. Mr. Bolden seconded the motion. There was no discussion. Motion carried 4-0.

Public Comments

There was discussion regarding the VA and their contracts & credentialing due to some changes on their end.

Executive Operation Summary - November

Copy of the report is attached to these minutes.

Financials

Balance Sheet Detail: transferred the \$350K back from WGIF including additional \$350K to account for COVID expense incurred through 9/30/2020. The total transfer was \$700K. There was negative contractual allowance booked due to increased inpatient and swing bed volumes in November.

Income Statement Detail: increase in revenue of approximately 30% due to increase in November admissions. There was nearly \$60K in additional SPET income collected in November.

Patient revenue, less adjustments, on November 30 was \$897,845.57; operating revenue was \$2,492.02; non-operating revenue was \$226,578.96 for total income of \$1,126,916.55. Operating expenses for the month were \$622,674.63; non-operating expenses were \$7.50. This results in a net income of \$504,234.42.

November was a good revenue month but a bad accounts receivable month. An Athena system issue is holding up \$600K.

Old Business

COVID-19 Updates – the positivity rates are trending down in the county which results in less risk in the ECF. Nick does expect to see more hospitalizations. The Pfizer vaccine has been shipped. Public Health is distributing and administering the vaccine. The Moderna vaccine does not have as many restrictions. Niobrara County will receive 25 doses initially which will be for healthcare workers and first responders. If there is any left ECF residents have the choice to receive the vaccine. The hospital does not have an opinion on the vaccine.

Various Funding Updates – we can't use CARES money for expenses that are reimbursed on cost. We are paid on cost. HHS has stated that we can now claim depreciation on what it cost but we have to come up with half of the money. State funding for travelers funded by WHA has been extended through March 31, 2021. We won't renew the contracts at the end of 13 weeks. If SLIB is extending the dates we will send invoice immediately. The deadline is tomorrow, December 15 at close of business to have SLIB requests in. Half of the cost of projects will be our net impact.

Ms. Ross moved to approve a resolution to apply for SLIB dollars. Mr. Boldon seconded the motion. There was no discussion. Motion carried 4-0.

Project Proposals –

A proposal from Long Mechanical Solutions in the amount of \$52,899.00 for the isolation room exhaust was presented. This will be completed by February or March 2021.

Mr. Krein moved to accept the bid from Long Mechanical Solutions. Mr. Boldon seconded the motion. SLIB funding will pay for part of the project and this is a need due to COVID. Motion carried 4-0.

Laundry room renovation proposal – the laundry will probably never go back to the prison. The board will like to see another bid with all the elements rolled into one amount without each piece being bid separately.

Security System – the proposal includes key cards and cameras. The board questioned the need and cost of this project. We upgraded the WanderGuard systems and our patients are safe.

Ultraviolet Room Sanitizer – a quote of \$49750.00 from UVDI was presented for an ultraviolet disinfection device.

Ms. Ross moved to accept the quote and purchase the sanitizer. Ms. Larson seconded the motion. We will continue doing everything we currently do for cleaning and disinfecting but will then add this as additional protection. Motion carried 4-0.

Audit and Cost report update - The audit will not be ready in January. Even though Dana had been told by Kelly at Casey Peterson that they had all they needed, she had to back into the fixed assets and get them more information. Nick is happy with the advice and guidance from Casey Peterson but not happy with the deliverable product. The square footage assessment is being done this week and Dana will be working on the cost report for the rest of the week.

Credentialing – We still have a PA that is not with Medicaid. Nick will present and re-privilege all of our providers in the future.

New Business

Board Email Addresses – it has been recommended by legal counsel that each board member set up an email account to be used only for Board correspondence.

Strategic Planning Consulting & Tool – we need to have a strategic planning session to develop a plan for the hospital. Nick presented a proposal from Cycle of Business, a firm that has expertise in developing strategic plans for hospitals. The board asked Nick to check references and thoroughly vet the business and then bring it back to the January meeting.

Staffing Updates –

Ms. Larson moved to approve the contractual arrangement with Delta Placement Services. Mr. Boldon seconded the motion. These are permanent placements. Motion carried 4-0.

Ms. Larson was thanked for her years of service on the board.

Next meeting is January 26, 2021 at 5:30 p.m.

Meeting adjourned at 8:00 p.m.

November 2020 Operational Summary

COVID-19 positivity rates increased significantly in the month of November. Most cases handled through the clinic were treated via outpatient treatments, however the facility admitted multiple COVID positive patients. Many were triaged through the emergency room and admitted, and the facility's inpatient census was high.

In expectation of the increased demand of hospital rooms, more beds were allocated to acute and swing bed instead of long-term care. Rooms 17, 18, and 19 were all converted to hospital rooms and hospital beds were procured to accommodate patients in these rooms. The highest concurrent inpatient and swing bed census was 6.

In order to adequately staff the new hospital beds, temporary staff were hired and subsidized through the State of Wyoming funding and the Wyoming Hospital Association. This subsidization will occur until 12/30, at which point the hospital will start incurring contract labor expense for these new staff members.

In order to coordinate care outside of the facility, administration started communicating daily with all hospitals in southeast Wyoming, including Cheyenne Regional Medical Center and Wyoming Medical Center. Bed capacity was a concern at many of these facilities, which limited transfer of NCHD's patients. As a result, the facility kept higher acuity patients and observed good outcomes for these more complicated patients. Additionally, this daily communication facilitated multiple referrals to NCHD's swing bed program.

Due to the immediate and prior impacts of COVID, it was deemed necessary to apply for a cost report extension and RHC productivity exemption. The cost report extension was granted, with a 1/30/2021 deadline, while the productivity exemption is still in progress.

HHS continually updated the guidance regarding use of CARES Act money. Projects were put on hold and reevaluated based on this updated guidance, as the updates generally negatively impact the allocation of HHS funds.

Health insurance open enrollment occurred through a 10-day period in November. All employees electing for health coverage were able to complete the enrollment prior to the deadline.

Employee evaluations were completed by all department heads. Administration, HR, and the department managers will review the evaluations prior to delivery to employees to ensure accuracy.