CASCADE MEDICAL
PARTNERS IN YOUR HEALTH

Minutes of the Board of Commissioners Meeting
Chelan County Public Hospital District No. 1
Arleen Blackburn Conference Room & Video Conference Connection
May 22, 2024

Present: Bruce Williams, President; Tom Baranouskas, Vice President; Jessica Kendall, Commissioner; Gustavo Montoya, Commissioner; Diane Blake, Chief Executive Officer; Pat Songer, Chief Operations Officer; Marianne Vincent, Chief Financial Officer; Melissa Grimm, Chief Human Resources Officer; Clint Strand, Director of Public Relations; Megan Baker, Executive Assistant
Via Zoom: Chad Schmitt, Virtual Fractional Chief Information Officer
Excused: Mall Boyd, Commissioner
Guests: Natasha Piestrup, Director of Nursing; Jason Satterfield, EMT; Bob Jennings, CM Foundation; Norma Gallegos, Community Member; Deb Williams, Clinic Consultant

Topics	Actions/Discussions
Call to Order	• President Bruce Williams called the meeting to order at 5:33 pm. Tom then led the pledge of allegiance.
Consent Agenda	• Tom moved to approve the consent agenda. Gustavo seconded the motion and the group unanimously approved.
Community Input	• None

Foundation Report	Bob Jennings provided the Foundation Report.
	• Annual Golf Tournament, Monday June 17th
	  ○ There is space for 120 golfers, but only 85 have signed up so far.
	  ○ Sponsorships are $35,000, which is ahead of last year's numbers.
	• CMF reached their $70,000 hematology analyzer goal and will now work on a stretch goal of $65,000 for a Mobile Integrated Health program vehicle.
	• The Cardiac Rehab program currently serves four patients. Kudos to Katie and Erin for their passion and dedication to this important work.
	• CMF is actively recruiting new members to replace those that will retire at the end of the year.

CM Values	Diane Blake provided the report. • Diane shared a short story titled "All the Difference in the World," which describes an encounter between a woman who catches, cleans, and releases turtles and a jogger who observes her actions. They discuss the significance of her efforts, with the woman emphasizing that while her actions may seem small, they have a profound impact on each turtle she helps. The story highlights how small, consistent efforts can create meaningful change and illustrated the humanity in the woman's actions. Diane connected the story to our Shared Values by reinforcing the idea that our actions, whether large or small, can impact patients, staff, and the community. • Last week, CM celebrated Healthcare Week with bingo cards, daily activities, and treats, and wrapped up with a street fair event on

	Saturday. Kudos to Melissa for her exceptional leadership, planning, and passion for celebrating others. Her thoughtfulness made CM's team feel truly valued, creating ripples that positively impacted both our internal and external communities.
Public Relations Report	Clint Strand provided the report. **Outreach** • CM attended the Community Engagement Night on May 7th which was held at the Leavenworth Festhalle and hosted more than 125 community members. Thanks to Bruce for attending! • This weekend through the month of June, CM will provide outreach at different events. A few upcoming opportunities include: o Saturdays beginning June 1st at the Leavenworth Farmer's Market o June 8th: Annual Health & Safety Fair @ Alpine Lakes Elementary. o June 22nd: Wenatchee PRIDE Event **Social Media** • CM's Facebook page reached nearly 5,000 accounts in May with over 1,400 post engagements. CM's Instagram reached around 1,360 accounts. Thanks to Lester and Andrya for sharing their story of Betty which yielded the greatest reach on CM's social media platforms. Clint is currently working to develop a Spanish language Facebook page.
Discussions & Reports	**A. IT Security/System Update** Chad Schmitt provided the update. • Ascension Health System was breached recently, similar to the Change HealthCare incident, highlighting the trend of large systems being targeted. • Chad expressed his pride in CM staff for effectively identifying suspicious emails. The results of recurring education assessments will help the team identify and prioritize future topics. • Chad concluded his report by highlighting the importance of cybersecurity investments and commending CM's dedication to implementing safety mechanisms that strive to prevent data breaches. **B. EMS Levy Education** Brad Berg provided the presentation. • Diane introduced Brad Berg, noting that CM has collaborated with him for many years on projects including bonds, bond refinancing, and levy preparation. **<u>District's Existing EMS Levy</u>** o The District's existing EMS levy was approved at a rate of fifty (50) cents in 2019 for a six-year period beginning in 2020 and ending in 2025. As of 2024, the levy rate has declined to thirty-three (33) cents, producing a levy amount of $1,743,703. o Initial authorization requires voter approval by super majority (60%) and validation (40% turnout or approval by 60% of 40%), however **renewal requires a simple majority approval and no validation requirement.** o Based on the District's current assessed value, a levy rate of fifty (50) cents would produce a levy amount of $2,595,836. **Election Dates + Ballot Proposition Deadlines**

- Ballot propositions for the EMS levy can be proposed by public hospital districts four times a year at elections held in February, May, August, and November.
  - December 13, 2024: last day to file for February 11, 2025 special election.
  - February 21, 2025: last day to file for April 22, 2025 special election.
  - May 3, 2025: last day to file for August 5, 2025 primary election.
  - August 6, 2025: last day to file for November 4, 2025 general election.

Process + Requirements for Submitting Ballot Proposition

- A public hospital district's (PHD) request for a ballot proposition must be made in the form of a resolution adopted by the board of commissioners.
- Ballot title must include: an identification of enacting legislative body and a statement of the subject matter (10 words maximum), a concise description of the measure (75 words maximum), and a question.

Voter Pamphlets

- County auditors are required to publish voter pamphlets for all elections, including information on ballot measures. The PHD board is required to appoint pro and con committees to prepare statements regarding the ballot proposition. If the PHD board fails to make the appointments, the county auditor is required to make them.
- The cost of producing the voter pamphlet is treated as an election cost.
- The previous EMS levy may have totaled around $25,000 in election costs.

Use of Public Resources in Elections

- RCW 42.17A.555 prohibits the use of any of the facilities of the PHD, directly or indirectly, for the purpose of assisting a ballot proposition campaign. Facilities include use of stationary, postage, machines, and equipment, use of employees of PHD during work hours, vehicles, office space, publications of the office or agency, and clientele lists of persons served by PHD.

Strategic Question:
What information would be helpful to review at future meetings to best inform the Board's decision-making regarding the levy?

- The Commissioners discussed the importance of acquiring additional information regarding timing and the levy amount to facilitate the most informed decision-making process.

Amount

- The Commissioners asked for the following information:
  - A better understanding of EMS financial position and desired amount.
  - Historical levy and approval rates.
  - A menu-like representation of scenarios and outcomes regarding specific amounts in relation to financial position.

	Timing ○ The Commissioners discussed an early in the year vote, which aligns with Diane's preference. CM will connect with all partner agencies to determine their levy plans for next year, which will be shared with Commissioners. ○ Commissioners expressed the desire for multiple future discussions on this topic. **Levy Period** ○ Historically, a 6-year period has been ideal. CM aims to avoid opting for a permanent solution, as over time, it fails to keep pace with inflation and does not allow for regular community input **C. Meditech Update** Pat Songer provided the update. • CM is currently in the optimization phase which includes education and training. • The informatics team received a visit from Dr. Burchett and Pam Ruhoff, both with Meditech, who initiated discussions, training sessions, and problem identification efforts aimed at fostering provider-to-provider collaboration. • The vendor issues with Rehab statements are not yet resolved. • There is a high volume of items on hold waiting for Meditech response or completion. • The Informatics team will be at the MUSE (Medical Users Software Exchange) Conference next week with a goal of identifying resources that can help support CM's Meditech optimization. **D. Clinic Construction Update** Pat Songer provided the update. • Preliminary construction plans have received approval from Dr. Kendall, Clinic Medical Director; Deb Williams, Clinic Consultant; Whitney Lak; Clinic Director, and the Senior Team. The architect is now finalizing construction documents, which will then be forwarded to CM's attorney for review of the Clinic Remodel Request for Proposal.
Committee Reports	**Medical Staff Meeting** Jessica Kendall provided the report. • The meeting began with a presentation from Catholic Charities which outlined Designated Crisis Responder (DCR) services and the criteria for voluntary and involuntary holds. The purpose of the presentation was to inform providers of how best to connect patients with behavioral health services. The group also engaged in discussions around the Credentialing and Professional Practice Evaluation policies. There were only about half of the medical staff in attendance at the meeting. **Quality Oversight Committee** Jessica Kendall provided the report. • Kudos to Rachel and Sarah for their incredible work, consistently enhancing processes, right down to the organization and efficiency of meetings. • The group discussed committee reports which have a standardized reporting structure, reviewed data such as Door to EKG and Door to CT Read and evaluated the board quality rounding event from April.

	• The Quality team plans to expand patient survey questions to include feedback about appointment accessibility and availability.
	• Future board quality rounding events will include background context with examples of clinical processes. At the end of the year, there will be an annual review of all department quality goals.
	
	Board Quality Rounding
	Jessica Kendall & Tom Baranouskas provided the report.
	• The Commissioners rounded on the Emergency and Radiology Departments.
	  ○ Emergency Department goal: 90% or more of ED patients and medications are scanned upon medication administration by 7/1/24.
	  ○ Radiology goal: 85% of mammograms will meet all three quality criteria by the end of 2024.
	  ○ Both goals were developed by the departments, not initiated in a top-down process.
	• The Quality team will create a progress sheet to document updates on departmental goals.
	
	WSHA Board Meeting
	Bruce Williams provided the report.
	• The committee discussed WSHA's compliance efforts, the recent repeal of the state's capital gains tax, and provided feedback on the strategic plan. They also acted on a motion to fill a vacancy on the American Hospital Association (AHA) Regional Policy Board Delegate, appointing Diane to the position. Although Diane planned to roll off the WSHA board at the next cycle, she will now stay on to fulfill this need.
	• Washington Hospital Services (WHS) has continued to grow, provide new services to members, and substantially increase donations to the Washington Hospital PAC (Political Action Committee). Bruce described the value of utilizing WHS contacts and vendors.
	• Jilma Meneses, Secretary of Washington State Department of Social and Health Services gave a presentation about complex discharge, state mental health hospitals, and children in the foster care or child welfare system who are stick in hospitals.

Action Items	**Motion: Authorize CEO to sign IAFF Contract** • The International Association of Fire Fighters (IAFF) represents CM's emergency medical services team. Throughout the negotiations, CM and the IAFF maintained collaborative efforts. • The contract changes include aligning the wage scale closer to industry standards by moving to a 12-step scale and adjusting the scheduling to 48 hours per week. Additionally, the PTO schedule has been compressed to four steps, IV certification pay increased to $1.50 per hour, and the education allowance now rolls over. Jason S. reported the team is happy with the proposed contract. • Tom moved to approve; Gustavo seconded. Motion unanimously approved. **Motion: Approve Credentialing** • Bruce moved to approve; Gustavo seconded. Motion unanimously approved. **Motion: Approve Ambulance Purchase**

	• Purchasing an ambulance is in our year capital budget. CM plans to invest in a demo ambulance that includes a power load system and stretcher. While the ambulance does not come with a bariatric stretcher, it can lift to 700 lbs. • Jessica moved to approve; Tom seconded. Motion unanimously approved. **Motion: Appoint Jessica Kendall as Quality Oversight Committee Chair** • Tom moved to approve; Gustavo seconded. Motion unanimously approved.
April Financial Report	**Marianne Vincent provided the financial report.** • April gross patient revenue of $3,148,000 exceeded the budgeted amount of $2,777,000 by $371,000. The contractual allowance of $846,000 for April was less than the budgeted amount of $882,000 by $36,000. The April net margin of ($87) was greater than the budgeted net margin of ($69,000) by $69,000. Cash receipts totaling $3,825,000 in April were greater than the budgeted cash receipts total of $3,228,000. The April month end cash balance of $14,922,000 is greater than the budgeted cash balance of $14,469,000 by $453,000. • Purchased Services for April were over budget by ($92,000) due to Business Office Support expenses ($51), HIM Coding expenses and plant expenses for heater repairs. • Professional fees were over budget in April by ($73,000) due to Acute nurse registry expense, Hospitalist expense, Clinic practice share consulting and expense for an EMS staffing study. • Collections on patient accounts of $2,464,000 in April were above budgeted patient account collections of $1,973,000 by $491,000. • CM's Balance Sheet shows an increase in cash balances in April of $1,139,000 reflecting that CM's cash receipts are strong. • Days in Net Accounts Receivable decreased from 55.7 days in March to 53.7 days in April, which is just below our target budget amount. Gross Accounts Receivable has decreased by $91,000 from March. • CM is still working with a third party billing statement vendor and EMR vendor to correct the problem with Rehab billing. Patients have been notified and will not be receiving billing statements for the patient balance until the issue is resolved. CM is working to separate patients on installment plans from remaining self-pay patients so that we can report the patient balances greater than 90 days. • CM's annual financial audit is nearly complete, and our Medicare Cost Report currently is in its final review with our audit firm. We have had no updates from the state auditor on the 2019-2022 State Accountability Audit, with our last communication with them being in mid-April.
Administrator Report	Diane Blake provided the administrator report. **Rural Payment Reform** • A group of rural hospital CEOs, and representatives from Washington State Healthcare Association (WSHA), Health Care Authority (HCA), and The Center for Medicare and Medicaid Innovation (CMMI) met to discuss rural payment reform. CMMI also known as the "Innovation Center," was authorized under the Affordable Care Act (ACA) and tasked with designing, implementing, and testing new health care payment models to address growing concerns about rising costs, quality of care, and inefficient spending.

	By statute, CMMI is required to maintain budget neutrality. During a six-year pilot program in Pennsylvania, the Centers for Medicare and Medicaid (CMS) ended up spending more money instead of reporting savings which did not meet budget neutrality parameters. • The discussion touched on the unique challenges of rural hospitals, originally established to maintain local access to care in rural areas. An open question remains on whether critical access hospital regulations can be federally updated to provide more sustainable reimbursement and flexibility to support changes in care delivery. **Staffing/Recruitment** • CM interviewed two great candidates for hospitalist and made an offer to one. The individual declined due to other personal reasons but may be interested in per diem work. CM's recruiter will not charge if the candidate moves forward with a per diem contract. There are a few additional candidates who have expressed interest in the hospital role to the recruiter. • Locums are scheduled through July and will continue until CM permanently fills the hospitalist role. **Open Forums** • Open Forums are being held this week with topics including an update about the Living Well program, annual refresher on HIPAA, a program spotlight on Cardiac Rehab, and celebrating employee milestones. **Kudos** • Natasha and the Charge Nurse (CRN) team are holding a retreat next week to address various education and process topics they have collaboratively developed. Kudos to Natasha and her leadership!
Board Action Items	• Please assist in recruitment efforts for CMF's Annual Golf Tournament, CMF Board members, and Patient and Family Advisory (PFAC) Council members. • Please check your emails.
Meeting Evaluation/ Commissioner Comments	• The Commissioners appreciated the EMS Levy presentation and the thoroughness of Diane's update on the IAFF contract. • Norma expressed her gratitude for CM's care, patience, and thoughtfulness during Gustavo's recovery, noting that he has achieved many milestones.
Adjournment	• Tom a motion to adjourn the meeting at 8:31 PM. Jessica seconded the motion and the commissioners unanimously approved.

Bruce Williams, President

Secretary