



Ferry County Health

BOARD OF COMMISSIONERS' MEETING

December 20, 2023 @ 10:30AM in the HUB

<https://us06web.zoom.us/j/89584329356?pwd=Y0dZT1VldmNkV2JMZ09MRVROalZvQT09>

Meeting ID: 895 8432 9356

Passcode: 260559

One tap mobile

+12532158782, 89584329356# US (Tacoma)

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	
<ul style="list-style-type: none"> • Minutes 12.04.23 Special Board Meeting • Approval of Warrants • Financial Write-Off Report 		
Correspondence	Nancy Giddings	
Public Comments	Nancy Giddings	
Clinical Comments	Mari Hunter	
EHR Report	Karen Quinnell	
Environment of Care/ Safety Update	Adam Volluz	
Compliance Report	Spencer Hargett	
Department Spotlight – HR	Lacy Sharbono	
CNO Report/ Quality Improvement	Mike Martinoli	9-15
COO Report	Debbie DeCorde	16-23

Medical Staff Report
CEO/CFO Report

Richard Garcia, MD 24
Jennifer Reed 25-34

On-going Business

Nancy Giddings

- Board QI Project
- Health Foundation
- Republic Drug Store - Reader board
- Facility Update/Master Plan
- New Hire Orientation Schedule
 - 01/03 -
 - 01/16 -
 - 01/30 -
- 2024 BOC Calendar Review and Approval

Board Representative Reports

- Finance
- Quality Improvement
- Compliance/Risk Management
- Medical Staff
- Credentialing

Ron Bacon/Sarah Krausse
DiAnne Lundgren
Ron Bacon/Sarah Krausse
Nancy Giddings/DiAnne Lundgren
DiAnne Lundgren/Nancy Giddings

- Request for Appointment of Active Advanced Practice Practitioner for the following provider(s):
Melissa Stringer, FNP
Annette Byrd, ARNP
- Request for Re Appointment of Courtesy Medical Staff for the following Integra provider(s):
Wendy Ehieli, MD
Scott Bruschwein, MD

EMS

Nancy Giddings

New Business
Turkey donations

Nancy Giddings

Executive Session

Performance of a Public Employee - *Pursuant to RCW §42.30.110(1)(g)*

Nancy Giddings

Open Session -Action, if applicable regarding executive session

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 January 23, 2023 @ 10:30 am in the HUB Conference Room

DECISION MATRIX

Type of Decision	Board	Chair	Task Forces	CEO	Note	Source
Board of Directors - District Policies						
1 Bylaw Changes	D		A	A		
2 Evaluation of Board Performance	D	A		A		
3 Develop and Approve Board Policies	D		A	A	Define what is a board policy We don't have too many finance policies - We can take this on at Finance	
4 Finance Policy	D		A	A		
5 Operations Policies	I			D		
6 Board Meeting Agenda	A	D		A		
7 Regular Meeting Schedule	D			A		
8 Special Board Meetings (ET or Compliance call?)	D	D		A		
9 Provider appointment and credentials	D		A	A	Board required decision	
10 Approve Formation of volunteer groups	D			A		
11 Acquire Construction, maintain, operate, sell real property	D		A	A	Board required decision	
12 Contracts with US and State	D		A	A		
13 Equipment Lease over \$25,000	D			A	Emergency Exception	
14 Capital Equipment over \$25,000	D			A	Emergency Exception	
Administrative Processes						
15 Organizational Chart (Executive Postions)	D			A		
16 Pillars of excellence & Strategic plan	D		A	A		
17 Appoint Auditors	D		A	A		
18 Approve Annual budget	D		A	A	Board required decision	
19 Corporate Indebtedness and borrowing	D		A	A	Board required decision	
20 Physician hire/contract if compensation over budget	D			A		
21 Unbudgeted compensation increases	D		A	A		
22 Pay legal claims over policy limits	D			A		
Board Specific Processes						
23 Approve Organizational Structure (see 18)	D			A		
24 Approve Strategic Plan	D			A		
25 Approve Quality Plan	D		A	A		
26 Develop, implement and evaluate quality plan			A	D		
27 Annual Operational and Capital Budget	D		A	A		
28 CEO Title/job description	D		A	A	Board required decision	
29 CEO appointment/contract/compensation	D			A	Board required decision	
30 Board Officer Election	D					
31 CEO performance evaluation	D		A	A		
32 Board self evaluation/performance improvement plan	D		A			
33 Board-level committee/task force assignments	D					
34 Select candidates to fill vacant board positions	D		A			
Board Committees						
35 Approve Board committee/task force charters	D		A	A		
36 Approve Recommendations from committee	D		A	A		
Staff Processes						
37 Develop the strategic plan objectives	I		A	D		
38 Implement the strategic plan	I			D		
39 Development, imlement and evaluate quality plan			A	D		
40 Develop operating and capital budgets	I			D		
41 Hire and manage Executive Team, managers, staff	I			D		
42 Regulator relationships	I			D		
43 Legal issues	D			D		
44 Facilities maintenance issues	I		A	D		
45 Establishing culture	D		A	D		

LEGEND:

- D - Decision Making authority/responsibility to act
- A - Advisor to the decision maker, advice from this group/individual may be sought prior to making decision
- I - Will be informed of the decision, perhaps after the decision is made



To: Compliance Committee
From: Spencer Hargett, Compliance Officer
Date: 12/14/2023
Subject: 2024 Proposed Compliance Workplan

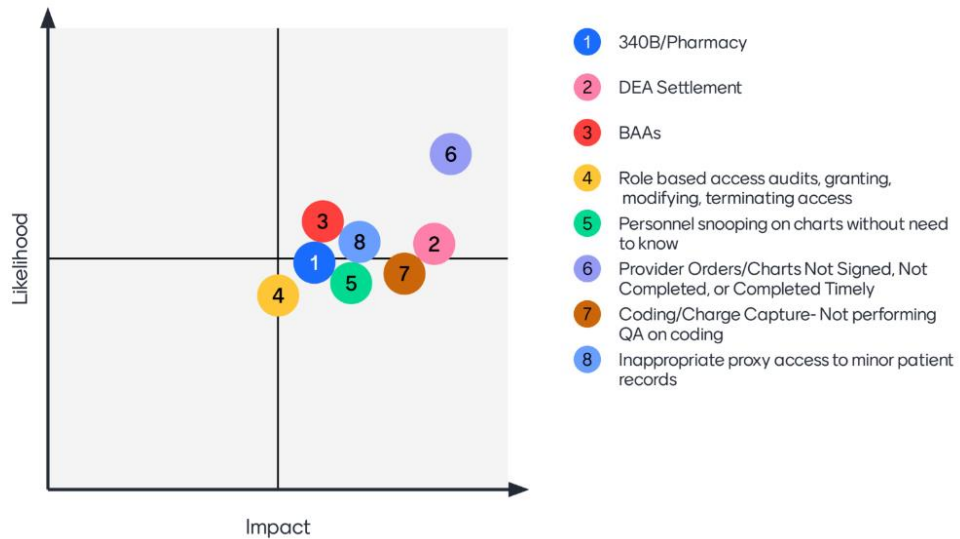
Overview

The objective of Ferry County Health’s (FCH) Compliance Program (Compliance) is to continuously re-assess risk areas, re-prioritize compliance projects that are most critical to the mission of FCH, and report compliance developments and compliance audit findings to the Compliance Committee, the Chief Executive Officer, and the Board of Commissioners.

2023 Year End Risk Assessment

We conducted a year end risk assessment. Risk areas were identified by scanning multiple internal and external sources. Some external sources include United States Department of Health and Human Services, Office of Inspector General (HHS OIG) Work Plan and annual Health Care Fraud and Abuse Control Program Report, etc. Below are the results of our year end risk assessment:

Compliance Risk Assessment



Proposed 2024 Compliance Workplan

The proposed 2024 Compliance Work Plan outlines the various project areas that we perceive as critical to the mission of FCH. The planning process is ongoing and dynamic; therefore the focus and timing of many of these projects may be altered in response to new information, new issues, and shifting priorities of FCH.

Proposed 2024 Compliance Workplan Key Initiatives:

Key Initiatives	Q1	Q2	Q3	Q4



1	340B Review	X	X		
2	Provider Orders/Charts Not Signed, Not Completed, or Completed Timely	X	X		
3	DEA Settlement	X	X		
4	Coding/Charge Capture- Not performing QA on coding			X	X
5	BAA's			X	X
6	Personnel snooping on charts without need to know			X	X

Proposed 2024 Audit & Monitoring Activities:

Activity	Q1	Q2	Q3	Q4
1 Security Risk Assessment			X	
2 PEPPER		X		
3 340B Review			X	
4 CDM External Audit	X			
5 P&P 2 Year Review Audit			X	
6 ED E&M Levels			X	
7 Annual Conflicts of Interest Disclosures				X
8 Swing Bed/Long term care requirements		X		X
9 OIG LEIE Checks	X	X	X	X
10 EMR Activity Log Review	X	X	X	X

2024

BOARD OF COMMISSIONERS Calendar of Events



January						
S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

February						
S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29		

March						
S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

- 1/1 New Year's Holiday
- 1/4 Medical Staff Meeting
- 1/18 Finance Committee
- 1/18 QI Committee
- 1/23 Board Meeting

- 2/11 Medical Staff Meeting
- 2/15 Finance Committee
- 2/15 QI Committee
- 2/27 Board Meeting

- 3/7 Medical Staff Meeting
- 3/21 Finance Committee
- 3/21 QI Committee
- 3/26 Board Meeting

April						
S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

May						
S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

June						
S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

- 4/14 Medical Staff Meeting
- 4/18 Finance Committee
- 4/18 QI Committee
- 4/23 Board Meeting

- 5/2 Medical Staff Meeting
- 5/16 Finance Committee
- 5/16 QI Committee
- 5/27 Memorial Day Holiday
- 5/28 Board Meeting

- 6/6 Medical Staff Meeting
- 6/20 Finance Committee
- 6/20 QI Committee
- 6/24-6/26 Board Retreat

July						
S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

August						
S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

September						
S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

- 7/4 Independence Day Holiday
- 7/11 Medical Staff Meeting
- 7/18 Finance Committee
- 7/18 QI Committee
- 7/23 Board Meeting

- 8/1 Medical Staff Meeting
- 8/15 Finance Committee
- 8/15 QI Committee
- 8/27 Board Meeting

- 9/2 Labor Day Holiday
- 9/5 Medical Staff Meeting
- 9/19 Finance Committee
- 9/19 QI Committee
- 9/24 Board Meeting

October						
S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

November						
S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

December						
S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

- 10/13 Medical Staff Meeting
- 10/17 Finance Committee
- 10/17 Medical Staff Meeting
- 10/22 Board Meeting

- 11/6 Budget Hearing
- 11/7 Medical Staff Meeting
- 11/21 Finance Committee
- 11/21 QI Committee
- 11/26 Board Meeting

- 12/5 Medical Staff Meeting
- 12/17 Finance Committee
- 12/19 QI Committee
- 12/24 Board Meeting
- 12/25 Christmas Day Holiday

- QI COMMITTEE MEETING
- FINANCE MEETING
- HOLIDAY
- BOARD MEETING
- SPECIAL BOARD MEETING
- BOARD CONFERENCE
- BUDGET HEARING
- MED STAFF MEETING
- REVENUE INTEGRITY MTG

Board Report

December 20, 2023



CNO Report

Mike Martinoli

December 20, 2023



CNO

➤ Follow-up

- NAC class recruitment
- Nurse Skills Day—Education Room and Simulation Man use

Safe patient handling, PICC lines, Port lines, lab information, Auto compressor use, CAPR use, scavenger hunt, glucometers, restraints, EKG, chest tubes, hospital codes, infection control, dementia training, blood transfusions, blood warmer, aseptic medication prep, IV pumps, IV care, IO simulation, pain recognition.



CNO

➤ Coming Up

- Holiday Resident activities
- Winterfest community engagement
- Joint Injection service—teamwork and transition to hospital unit
- Charge capture audits—nursing ownership
 - ❖ Infusion stop times, wound care orders



CNO-Volume

Inpatient and Emergency Department	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	YTD	YTD Target	2022
Acute Care Patient Days ●	10	17.00	20.00	28.00	11.00	13.00	29.00	24.00	35.00	28.00	47.00	252	110	226
OBS Patients ●	7.78	6.00	2.00	4.00	5.00	4.00	5.00	5.00	3.00	3.00	2.00	47	33	68
Skilled Swingbed patient days ●	117.00	88.00	119.00	116.00	113.00	116.00	122.00	129.00	126.00	136.00	129.00	1311	1320	605
Average SSB Census ●	3.77	3.14	3.84	3.74	3.65	3.74	3.94	4.16	4.06	4.39	4.30	4	6	5
Admissions ●	4.00	3.00	8.00	9.00	4.00	2.00	10.00	5.00	7.00	8.00	9.00	69	66	67
Average Length of Stay ●	2.50	5.67	2.50	3.11	2.75	6.50	2.90	4.80	5.00	3.50	5.22	4	3	2
ED Visits ●	152.00	148.00	210.00	184.00	215.00	201.00	219.00	214.00	202.00	201.00	279.00	2225	2024	1471
Same Day Surgery ●	5.00	11.00	11.00	13.00	15.00	19.00	12.00	18.00	13.00	16.00	7.00	140	264	158
Outpatient Procedures ●	-	64.00	78.00	56.00	66.00	93.00	101.00	98.00	78.00	124.00	70.00	828	825	188

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%

November Stats:

ED Transfers: 14

(increase by 3)

AMA: 2

CNO

➤ Need to Know

- Winter patient transport barriers
- Recent collaboration with neighboring hospital—patient admission support
- CHIP update (Community Health Improvement Plan)
- Experience review—patient and family centered care moment
- Collaboration with Hospice of Spokane
- Rapid Response Policy



CNO-November Volume

- Emergency Department: Average Length of Stay
 - ❖ September data review

Most Common Chief Complaints:

- Extremity Injury-lower
- Nausea/vomiting/diarrhea
- Extremity Injury-upper
- Abdominal pain
- Shortness of breath
- Upper respiratory infection

Month	Time
Jun 2023	4 hrs. 6 mins.
Jul 2023	3 hrs. 30 mins.
Aug 2023	4 hrs. 3 mins.
Sep 2023	8 hrs. 41 mins.
Oct 2023	3 hrs. 31 mins.
Nov 2023	3 hrs. 56 mins.

QI Committee Report

➤ Upcoming:

- Peer Review—Q4 Provider change
- Q3 peer review chart summary:
 - ❖ ED: 33
 - ❖ IP: 7
 - ❖ AMA: 2
 - ❖ Deaths: 2
- Clinic and Hospital EKG monitoring project
- AMA audits and tracking
 - ❖ "left before being seen" documentation project



COO Report

Debbie DeCorde

December 20, 2023



COO

➤ Follow-up

- Republic Medical Clinic
 - ❖ Provider panel project; each provider reviewing their identified panels now. The first step was determining who patients last saw and if the patient had established care with that provider.
 - ❖ Provider and support staff numbers and goals. When the panels are finalized, it will be easier to evaluate the support to provider ratio.
- Radiology
 - ❖ MRI generator flushed, new part in, and operational. This is great news although it took a couple months to procure everything needed. (Supply chain issues.)



COO

➤ Coming Up

- Republic Drug Store
 - ❖ Prescription fills and Revenue trends – both on a steady uptick and exceeding the annual goal. Setting new goals for 2024 including time to fill prescriptions.
- Republic Medical Clinic
 - ❖ DOT Examiner training is 40% complete for Matthew Johnson, ARNP. The training is more arduous and time-intensive than predicted. The revised goal completion date is Jan. 31, 2024.
- Assisted Living Facility (ALF)
 - ❖ Residents appreciating the holiday décor and opportunities to get outside for Winterfest and possibly a lights tour.



COO

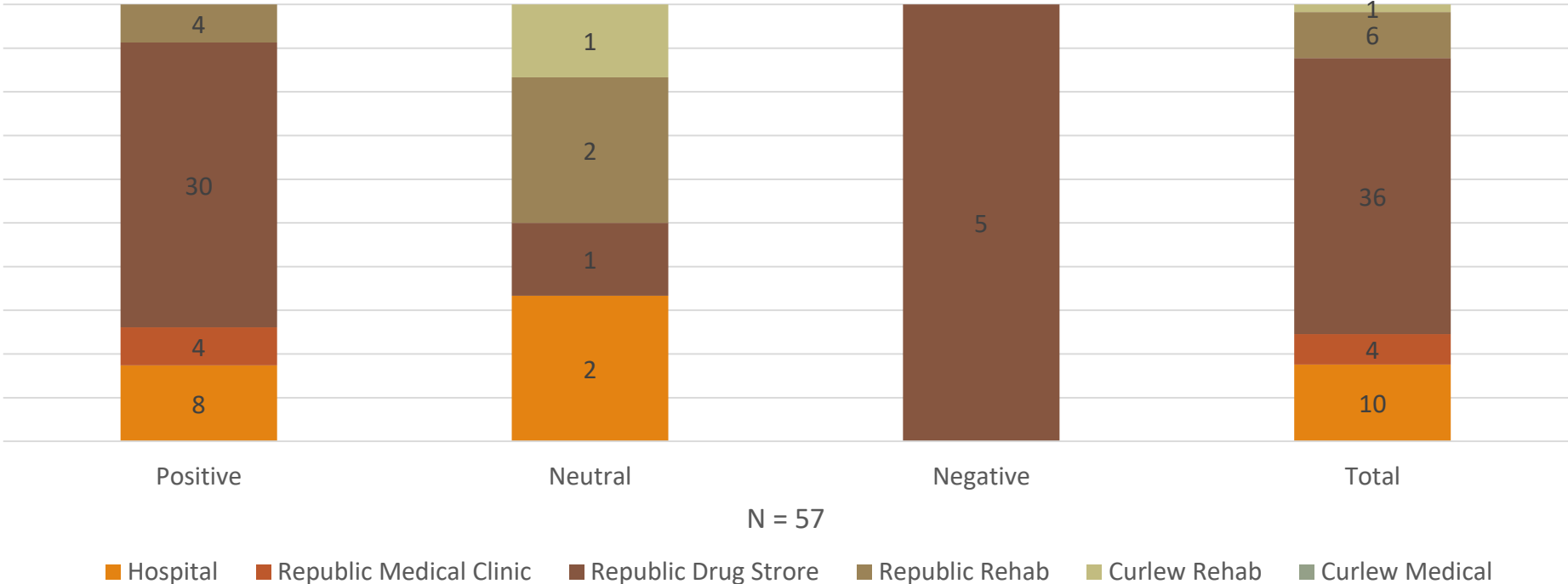
➤ Need to Know

- Republic Drug Store
 - ❖ Tyler Wirt passed the national Pharmacist Assistant exam on Dec. 5th! Tyler participated in our on-the-job Pharmacy Technician training and certification program. His success supports our career development mindset and retention. We would do this again.
- Across Ferry County Health
 - ❖ Community giving; Rural Resources – blankets, gloves, pajamas, slippers, hats and socks for 23 people.
 - ❖ Long Term Care – blankets for each resident.
 - ❖ Republic School District – 4 families and 19 school kids



COO – Comment Cards

2023 Comment Card Results



COO - Dashboard

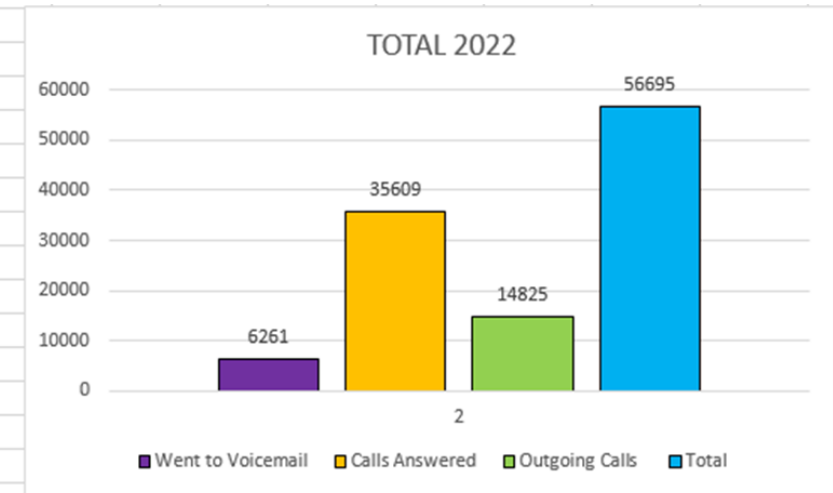
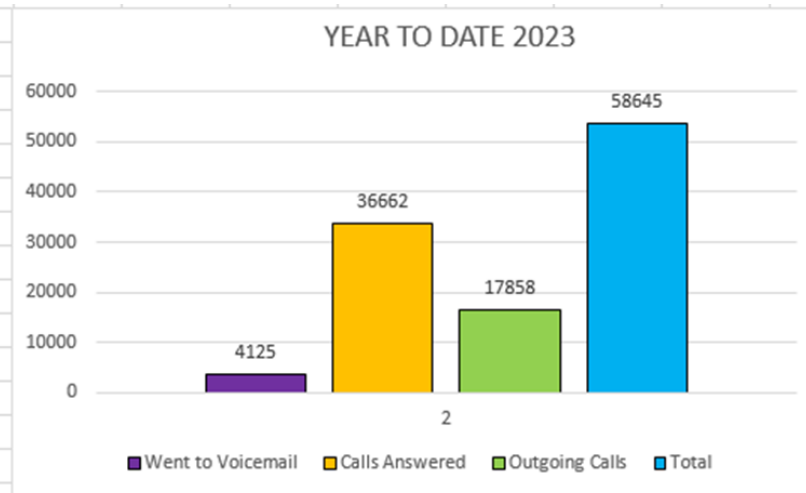
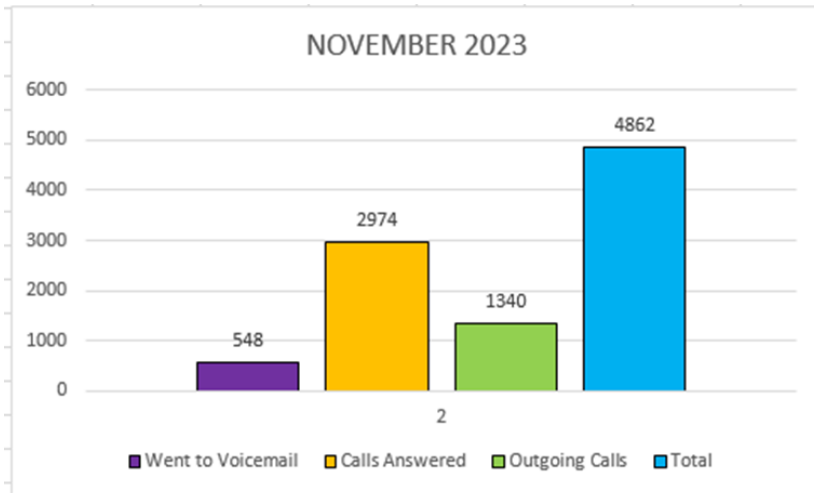
Outpatient and Ancillary Services		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	YTD	YTD Target	2022
11 Republic Clinic #Visits	●	796	580	916	681	830	762	740	806	648	775	797	8,331	8,360	6,663
12 Physical Therapy Visits	●	506	476	553	550	539	574	418	497	423	452	333	5,321	5,500	2,756
13 Imaging Exams	●	321	320	406	388	432	451	454	475	410	411	377	4,445	3,850	2,991
14 Lab # Billable Tests	●	2628	1929	2902	2525	2896	2839	2912	2972	1356	2875	2,544	28,378	24,948	22,782
15 Drugstore Prescriptions Filled	●	4526	4223	4856	4315	4842	4537	4446	4741	4368	4563	4517	49,934	48,583	57,685

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%





COO -Republic Medical Clinic Calls Project

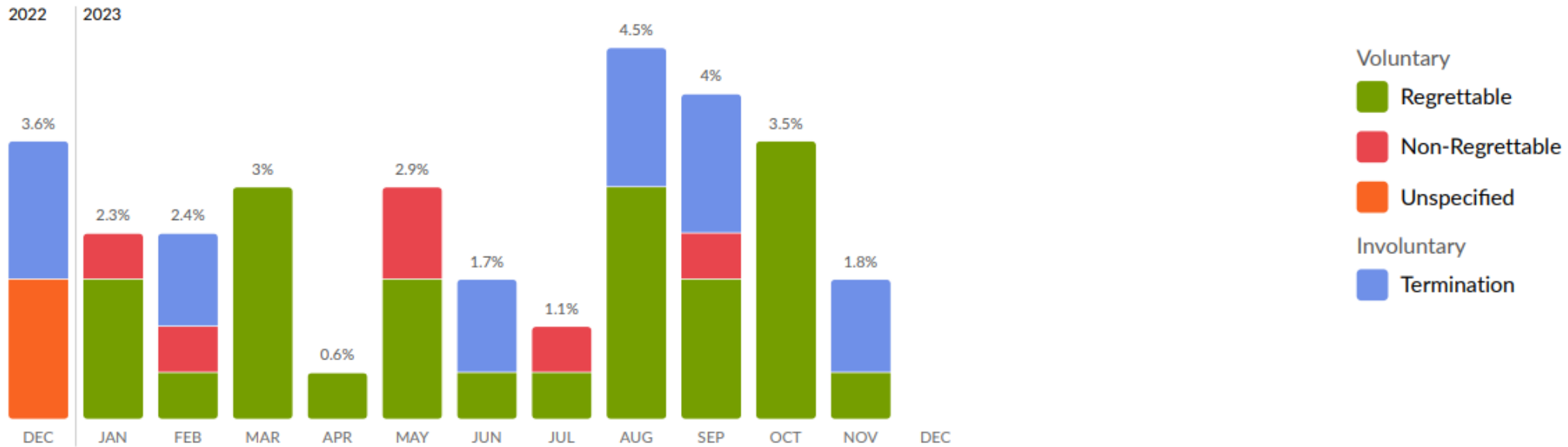


COO – Turnover Report YTD

 **28%** 48 people
Total Turnover Jan 2023 - Dec 2023

 **2.3%** 4 people
Average Monthly Turnover

 **1.2%** 2 people
Total Turnover - 30 days



Medical Staff Report

Dr. Garcia

December 20, 2023



CEO/CFO Report

Quality/Safety: by constantly holding ourselves to a higher standard.

Integrity: through honesty and respect.

Compassion: by providing a nurturing and caring environment

Stewardship: by utilizing our resources to their highest and best purpose.

Teamwork: by working together in a culture that promotes excellence.

Jennifer Reed

December 20, 2023



Follow-up

➤ Follow-up

- MIH – Equipment ordered, waiting on the perfect vehicle but agreement signed and ready.
- Provider engagement - update on project and satisfaction.
- Generator discussion – Apparently, Republic Schools has accepted a donation of generator from Kinross. Adam will reach out to Curlew Schools.
- Rural Resources update – They have found a building. We extended our lease at Klondike until December 31 at which time we should have access to building.
- NSS transfer policy. This policy was sent out to all users to understand that the NSS hallway and lunchroom are not to be used for the general public or to transport patients that are able to use the other two doorways.



CEO/CFO

➤ Coming Up

- 2024 Workplan – Priorities. We have identified priorities and initiatives that we feel further the initial goals of communication, ownership and facility.
- [Decision Matrix](#) (See attached, example from Chelan)

➤ Welcome

- Laura Karg LICSW
- Susan Solomon-Hopkins – Board Member
- Kody Knowlton – Registrar
- John Ehlers - Occupational Therapist – Coming January 16

❖ Congratulations on your new position: Jeanette Phillips, HIM Scanning to HIM Supervisor

➤ Q&As



CEO/CFO

➤ Need to Know

- Trauma Designation – Dawn spent countless hours working on recertification application for our trauma designation
- Unions are planning to educate members on hospital finance. We plan to make sure they have accurate information.
- New Reproductive rights legislation coming out. WSHA and Collaborative working through it.
- Partner Updates:
 - ❖ Healthy Ferry County – Grant funds for MIH purchase
 - ❖ Kinross – Grant funds to begin fundraising for Mammography
 - ❖ Coordinated Care – Grant funds toward MIH program
 - ❖ Better Health Together – waiting to hear from them regarding their donation for the mammography bus
- Payer Updates:
 - ❖ Pharmaceutical shenanigans and our Payers. If you talk with your legislators tell them no!
 - ❖ WellCare. I have been in contact with the Director of Pharmacy at WellCare to get this straightened out. The WellCare site has now been updated to include our drugstore for 2024.
 - ❖ Conduent – We do NOT refund commercial payers that overpay, as our stance is we excepted their payment in good faith.

➤ Q&As



NRC Scores

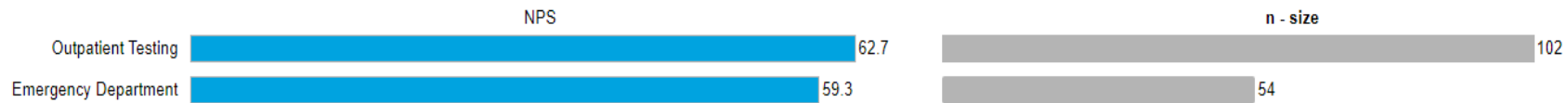
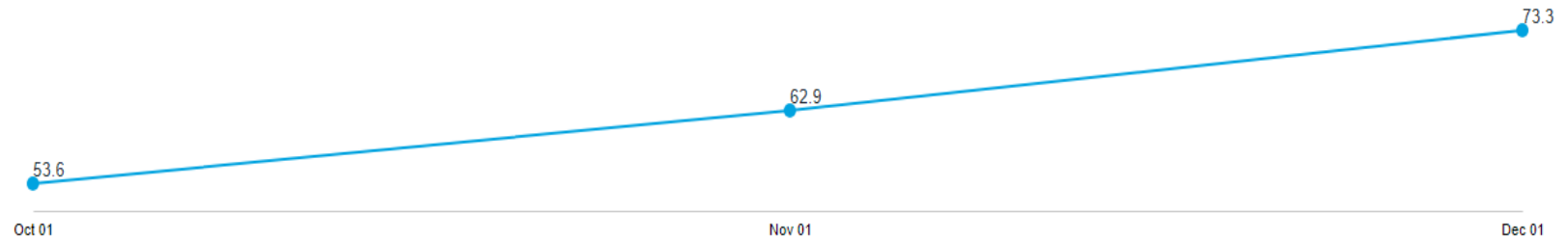
Working on increasing volumes of both surveys sent and results. To me, it doesn't feel very representative with N so low.

Experience Overview

☆ Favorite ▾ 📄 Subscribe ⬇️ Export ▾ Oct 01, 2023 - Dec 15, 2023 📅

NET PROMOTER SCORE

61.5 n-size: 156



Question Pod	Emergency Department
Net Promoter Score	59.3
n - size	54

CEO/CFO-Financials

- Income Statement and Balance Sheets

- Key Performance Metrics

- Need to know

- Coding for ED and Clinic has moved to new coders as of 11/13/23
- In house cash poster taking posting and Klondike Hills billing, statements are in process
- Cost Report desk reviews final for 2019, 2020 and 2021. Estimate \$103k receivable.



Ferry County Public Hospital District No. 1

doing business as

Ferry County Health

Combined Income Statement: Hospital, Klondike Hills and Republic Drug Store

Year to Date November, 2023

			Current Year - 2023			Prior Year - 2022		
MTD	Budget	Variance	YTD	YTD Budget	Variance	YTD	Variance	
			Operating revenue:					
\$ 2,065,987	\$ 2,466,423	\$ (400,436)	\$ 26,116,468	\$ 27,130,700	\$ (1,014,232)	a. \$ 25,800,178	\$ 316,290	
(444,888)	(813,321)	368,433	(9,199,684)	(8,946,531)	(253,153)	(10,582,347)	1,382,663	
1,621,099	1,653,102	(32,003)	16,916,783	18,184,169	(1,267,386)	15,217,831	1,698,953	
274,049	239,919	34,130	3,105,501	2,639,105	466,396	3,271,195	(165,694)	
66,978	54,062	12,916	992,680	594,670	398,010	602,709	389,971	
\$ 1,962,126	\$ 1,947,083	\$ 15,043	\$ 21,014,944	\$ 21,417,944	\$ (402,980)	\$ 19,091,735	\$ 1,923,209	
			Operating expenses:					
1,038,814	896,257	(142,557)	10,873,189	9,858,823	(1,014,366)	b. 8,195,405	(2,677,784)	
223,045	214,812	(8,233)	2,304,186	2,362,948	58,762	c. 1,930,982	(373,204)	
30,769	60,367	29,598	976,495	664,033	(312,462)	d. 1,683,398	706,903	
288,582	289,477	895	3,239,558	3,184,295	(55,263)	3,245,299	5,741	
7,111	24,318	17,207	241,660	267,491	25,831	262,657	20,997	
119,761	128,351	8,590	1,580,568	1,321,112	(259,456)	e. 1,492,658	(87,910)	
3,975	13,945	9,970	134,515	153,392	18,877	122,081	(12,434)	
31,857	51,618	19,761	488,913	567,806	78,893	448,807	(40,106)	
19,935	20,800	865	222,471	228,800	6,329	233,331	10,860	
82,293	81,820	(473)	903,919	900,039	(3,880)	873,639	(30,280)	
\$ 1,846,142	\$ 1,781,765	\$ (64,377)	\$ 20,965,474	\$ 19,508,739	\$ (1,456,735)	\$ 18,488,257	\$ (2,477,217)	
\$ 115,984	\$ 165,318	\$ (49,334)	\$ 49,471	\$ 1,909,205	\$ (1,859,734)	\$ 603,478	\$ 4,400,426	
61,225	32,218	29,007	465,252	354,387	110,865	519,601	(54,349)	
\$ 177,209	\$ 197,536	\$ (20,327)	\$ 514,723	\$ 2,263,592	\$ (1,748,869)	\$ 1,123,079	\$ (608,356)	

Notes to Financial Statements:

- a. See Revenue analysis for detail. Largest variances in SSB volumes, Primary care lower visits, and Lab
- b. Salaries are up due to traveler and temporary costs of over \$1.5 million. That plus the \$900k budgeted market adjustment approved.
- c. Employee benefits are under budget by almost \$60k and the approximately 7.2 FTE that remained in agency/temp status. Up over 2022 as anticipated.
- d. Professional fees saw unbudgeted amounts in legal for DEA challenges, and the 3rd party representation. Also saw higher pro fees during Meditech optimization. The savings over 2022 were simply a result of reclassing some staff to Salaries
- e. Purchased Services up do to deferred maintenance not budgeted prior year



Ferry County Public Hospital District No. 1

doing business as

Ferry County Health



Balance Sheet (Combined Statement of Net Position: Hospital, Klondike Hills and Republic Drug Store)

Year to Date November 30, 2023

	YTD Balances		
	November	October	Variance
Assets			
Current assets:			
Cash and cash equivalents	\$ 4,206,966	\$ 3,919,888	\$ 287,078
Patient AR - Net	6,072,167	6,497,050	(424,883)
Total Other Receivables	525,553	453,819	71,734
Other	2,254	25,578	(23,324)
Inventories	580,563	551,592	28,971
Prepaid expenses	171,137	148,508	22,629
Total current assets	\$ 11,558,640	\$ 11,596,435	\$ (37,795)
Total capital assets	\$ 6,381,837	\$ 6,406,068	\$ (24,231)
TOTAL ASSETS	\$ 17,940,477	\$ 18,002,503	\$ (62,026)
Liabilities and Net Position			
Total current liabilities	\$ 2,052,703	\$ 2,185,953	\$ (133,250)
Total noncurrent liabilities	1,496,996	1,501,350	(4,354)
Total liabilities	\$ 3,549,699	\$ 3,687,303	\$ (137,604)
Net position:			
Invested in capital assets	13,876,057	13,876,057	-
Current Year Earnings	514,723	439,143	75,580
Total net position	\$ 14,390,780	\$ 14,315,200	\$ 75,580
TOTAL LIABILITIES AND NET POSITION	\$ 17,940,477	\$ 18,002,503	\$ (62,025)

CEO/CFO-Key Performance Indicators

Profitability		YTD	Target	Variance	2022
Revenue Deductions % of Gross Revenue	●	36%	37%	1%	41%
Salaries % Gross Patient Revenue	●	36%	34%	-2%	28%
Benefits % of Salary Expense	●	21%	24%	3%	24%
Net Income					
Operating Margin	●	2.45%	7.09%	-5%	8.76%
Cash and Liquidity					
Days Cash on Hand	●	65	78	(13)	94
Days Cash in AR	●	89	53	(36)	51
Current Ratio	●	5	1	4	5
Claims Processing and Coding					
# Accounts in Account Check	●	465	500	35	-
Net AR Days	●	119	45	74	85
Unbilled AR		1,468,752	1,000,000	(468,752)	524,307



