# FERRY COUNTY PUBLIC HOSPITAL DISTRICT #1

dba Ferry County Memorial Hospital (509) 775-3333 fax 775-3866
Republic Medical Clinic (509) 775-3153 fax 775-8929
Curlew Medical Clinic (509) 779-4049 fax 779-4004
Physical Rehab Therapy (509) 775-8400 fax 775-8401
Klondike Hills Assisted Living (509) 775-8228 fax 775-8402

*Improving Health - Saving Lives*


**BOARD OF COMMISSIONERS' MEETING**
September, 26, 2017, 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 | |
| Department of Energy and Apollo Heating | | | |

*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.*

| | | | |
|---|---|---|---|
| Approval of Consent Agenda<br>• Minutes 8/22/2017 Board Meeting<br>• Approval of Warrants<br>• Financial Write-Off Report | ACTION | Nancy Giddings | 1-2 |
| Correspondence | | Nancy Giddings | |
| Public Comments | | | |
| Quality Improvement and Compliance/Risk Management | | | |
| Medical Staff Report | | Dr. AlRashedy | |
| CNO Report | | Cherie Hanning | 3-15 |
| Financial Report | | Aaron Edwards | 16-34 |
| CEO Report | | Aaron Edwards | 35-36 |
| Old Business<br>• VA Services<br>• Strategic Plan<br>• Board QI Project<br>• CEO Evaluation<br>• Disaster Plan<br>• New Employee Handbook | ACTION | Nancy Giddings | |
| Board Representative Reports | | | |
| • Finance | | Ron Bacon/David Iverson | |
| • Quality Improvement | | Sarah Krausse | |
| • Compliance/Risk Management | | Ron Bacon/Sarah Krausse | |
| • Medical Staff | | Dave Iverson/ Nancy Giddings | |
| • Credentialing | | David Iverson/DiAnne Lundgren | |
| • EMS | | Nancy Giddings | |
| • ACH/HFCC | | David Iverson | |
| New Business<br>• Hot Topic<br>• View Extra Article Topic/Author – DUE 10/13/17 | | Nancy Giddings<br>Dave Iverson | |

- Lab Proposal — 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 scheduled meeting is October 24, 2017 @ 10:30 a.m. in the HUB Conference Room**

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# BOARD OF COMMISSIONERS' MEETING
## August 22, 2017

**CALL TO ORDER:** Chair Nancy Giddings called the meeting of the Board of Commissioners to order at 10:30a.m. on August 22, 2017 in the HUB Conference room of Ferry County Memorial Hospital. Commissioners in attendance were Nancy Giddings, Ronald Bacon, DiAnne Lundgren, and David Iverson. CEO Aaron Edwards and Talena Vangemert, Executive Assistant, were present.

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

**REVIEW, AMEND, ACCEPT AGENDA:** A motion to amend the Consent agenda was made by DiAnne to move the Quality Improvement and Compliance/Risk Management under Public Comments and before Medical Staff Report. Remove Credentialing under Board Representative Reports. Change the View Extra Article due date. Add the New Employee Handbook under New Business. Replace the TBD beside Medical Staff Report to Dr. AlRashedy. Nancy seconded the motion. The motion passed unanimously.

**VISITORS:** Nancy McIntyre, CNO Cherie Hanning, Leila Anasazi, and later in the meeting Dr. AlRashedy.

**APPROVAL OF CONSENT AGENDA:** A motion to approve the consent agenda was made by David and seconded by DiAnne. The motion passed unanimously.

**CORRESPONDENCE:** N/A

**PUBLIC COMMENTS:** Guest commented on billing.

**QUALITY IMPROVEMENT & COMPLIANCE/RISK MANAGEMENT:** N/A

**MEDICAL STAFF:** Discussed concerns for Bylaws.

**CHIEF NURSING OFFICER**: Cherie reviewed the attached report.

**FINANCIAL REPORT:** Discussed year-end financial report for 2016 and possibilities of electronic signature. Resolution on electronic signature will be next Board meeting.

**CHIEF EXECUTIVE OFFICER:** Aaron reviewed the attached report.

**OLD BUSINESS:**

- VA Services: N/A
- Strategic Plan: Rescheduled
- Board QI Project: Rescheduled

- CEO Evaluation: To be completed by Ron and DiAnne.
- Curlew Contract: N/A
- Disaster Plan: Almost completed.

Nancy called for a 10 minute break at 12:43 p.m. Open session continued at 12:54 p.m.

**BOARD REPRESENTATIVE REPORTS:**

- Finance: N/A except to change date. Will discuss during next Board meeting.
- Medical Staff: N/A
- EMS: Report by Nancy.
- ACH/HFCC: Dave updated.

**NEW BUSINESS:**

- Hot Topic: Discussed recent letter to editor.
- View Extra Article: Will be started by Dave and is due September 15th. The topic will be on Block Scheduling.

**ADJOURNMENT:** As there was no further business the meeting was adjourned at 1:43 p.m.

DRAFT

Nancy Giddings, Chair Date

DiAnne Lundgren, Secretary Date

Talena Vangemert, Recording Secretary Date

**TO:** Ferry County Public Hospital District #1 Board of Commissioners MEETING DATE: September 26, 2017

**FROM: Cherie Hanning, CNO**

**Subject:** Board Report

**As of September 21, 2017**

## 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.

- Current Clinical Staffing Needs:
  - 3 RNs and 1 CNA
    - We made offers extended to two full-time RNs. (1 has declined and taken a position in Spokane).
  - Contracted Labor (staffing agency)
    - 2 out of 4 RN staffing contracts have now been completed and concluded.
    - 2 out of 4 RN staffing contracts have been extended; each one for an additional 13 weeks.
    - We have 1 CNA contract labor ad listed for November-December.

- Recruitment
  - Marketing has targeted RN and CNA recruitment by posting job ads in local newspapers serving the Omak, Tonasket and Colville areas.
  - Aaron and I will be attending WSU Nursing Job Fair on October 12 with the expectation of recruiting nurses.
  - A comprehensive plan for recruitment of FCPHD clinical staff will be forthcoming.

- Contracted Labor (staffing agency)
  - We are now utilizing WA State Registry Program (WSRP) for clinical personnel needs. This is an organization which has 20+ staffing agencies in their registry; they help coordinate temporary personnel placements.

- Academic Partnerships
  - FCPHD received agreement on 9/21 from Wenatchee Valley College (WVC) for clinical experience placement site. We will provide clinical rotations for LPN, ADN, and RN-BSN students.

## 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.

- I am attending a conference; WSHA Rural Quality Safe Table Partnership for Patients on September 26. This conference is geared toward Quality with the main topic being Patient/Person and Family Engagement (See Attachment 1).

- Quality, Risk, and Compliance Updates
  - I have participated on calls and webinars with WSHA and DOH regarding quality metric status, requirements, and the latest QI data.
  - Other QI hospital-wide projects include participation in the Medicare Beneficiary

Quality Improvement Project (MBQIP) which is under the Federal Office of Rural Health Policy (FORHP). We track various measures under 4 core initiatives: Patient Safety, Patient Engagement, Care Transitions, and Outpatient. Some other CMS initiatives we track include: falls, adverse drug events, and antibiotic stewardship (See Attachment 2 - data from 2014-2017 [Fiscal Year 2016]).

- We will soon begin a new CMS driven QI project under the measure of Patient/Person and Family Engagement. We will continue our collaboration with WSHA as we implement this new program. This work will involve creation of a Patient and Family Advisory Council (PFAC) which focuses on patient-centered quality care. Establishing this group will help engage patients and family members as more active partners in healthcare (See Attached 3 -hospital survey).
- Sharon Gilmore (Risk Consultant with Coverys) will be out October 4. She'll be doing a teaching session for our nurses on patient documentation, HIPPA, and informed consent. You are welcome to attend if you'd like.
- I had a call on 9/21 with WHA on the peer review process for providers. I'll be taking this information back to the providers to make sure they are aware of any changes.
  - Dr. Kerr will be on-site mid-October for the quarterly provider peer review meeting.
- I am completing the annual review of nursing policies and procedures.

**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.

- I have completed 1:1 Meet and Greets with all the clinical staff. The feedback I received includes:
  - Positive
    - Employees like working at FCPHD because it is family oriented.
    - The teamwork between staff members is good.
    - There is a strong sense of community.
    - FCPHD is patient oriented.
  - Negative
    - Computers do not function well in ER.
    - There are no computers in the patient rooms for documentation purposes.
    - There is a need for more CNAs.
    - Concern with CNO turnover.
    - The need for a stable workforce - Nursing turnover is perceived to be high.
    - Call light system needs replacing.
    - LTC beds need to be replaced.

- Patient rounding: I continuously round on patients. They seem to be pleased with the nursing care we provide.

- Scheduled Training:
  - BLS, ACLS, and PALS training has been scheduled for October 25-26.
  - TNCC (Trauma Nursing Core Course) training has been scheduled for December 4-5.

## Financial

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

Hiring FCPHD employees is always more cost effective than using contracted labor. Filling the clinical positions is a high priority; it will go a long way to stabilize our workforce and reduce costs.

**Current Practices**

1. Nina posts job openings with national sites such as Indeed, Monster, LinkedIn, etc.
2. Jobs are posted to the FCPHD website.
3. Local advertising is used in newspapers in Omak, Tonasket, Kettle Falls, Colville, and Chewelah.
4. FCPHD offers incentives such as a free meal, overnight sleep room/lodging, and sign-on bonuses.

**Other Practices that we could implement:**

1. Establishing relationships with colleges with the intent of training and recruiting staff.
2. Partnership with local CNA schools/training facilities in all surrounding counties to recruit and hire.
3. Utilize Craigslist (Spokane and Wenatchee) to post employment ads for RNs and CNAs.
4. Talking with our staff to see if they know of RNs and CNAs that we can recruit.
5. Use of UW in Seattle; they send out a weekly email to all RN graduates with job openings.
6. Updating current staffing contracts with more favorable language allowing FCPHD to hire staffing agency personal if/when appropriate.
7. Utilize the Nurse Practice Committee (Union Contract Section 15.1) to help with scheduling and recruitment ideas.

We have identified various cost saving measures that are being implemented to reduce/control the cost of contracted labor. These measures include but are not limited to:

- Staffing contract renegotiation with more favorable terms to FCPHD.
- Resolving invoice discrepancies.
- Putting processes in place to better audit and verify billing invoices.

## Growth

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

- Increased growth opportunities of our Swing Bed program through marketing.
    - Aaron, Amanda, and I will be visiting hospital sites in the Spokane region to promote and market our Swing Bed program.
    - We need to rework/update SWB marketing pamphlets and other SWB documentation that goes out to physicians and/or hospitals.
    - I have spoken with Sacred Heart, Deaconess, and Holy Family hospital Case Management to promote our SWB program.
        - The goal is to return community members to FCPHD for SWB use. As a SWB patient, services are geared towards skilled needs such as Physical Therapy/Rehab after surgery, IV antibiotics, and wound care.

- Update on SANE Training

- Funding was approved from UWMC/HMC for RN SANE training in Omak. They are working on getting this scheduled. We'll be training 2 RNs for this community need.

- Potential for new services
  - Wound Care
  - Cardiac Stress Tests

Washington State Hospital Association

RURAL QUALITY

# SEPTEMBER 26, 2017

## RURAL QUALITY SAFE TABLE

Objectives:

- Dialogue with a national expert on strategies for implementing Patient and Family Advisory Councils in rural hospitals.
- Hear one rural hospital's journey toward implementing a Patient and Family Advisory Council.
- Recognize the many variables and challenges a diabetic patient faces in one day.
- Gain important insight on how to keep your diabetic communities healthier.
- Apply A3 problem solving.
- Hear from a diabetic regarding their personal story.

**To Register Click Here**

**And reply to Cindy Ferguson**

Provide your full name, organization, and lunch choice

## Partnership for Patients

ASHNHA ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Washington State Hospital Association

### Location

Holiday Inn

Downtown Yakima

Vineyard Ballroom

802 East Yakima Ave,
Yakima, WA. 98901
509-494-7000

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### Time

8:30 a.m. – 3:30 p.m.

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### Lunch

Box lunches are available for pre-order for $15

Lunch choices are:

Turkey Sandwich, Ham Sandwich and Grilled Veggie Sandwich

All include chips, apple and bottled water

Questions? Contact Cindy Ferguson at cindyf@wsha.org or 206-216-2537

## Featured Speakers:

**Dr. Thomas Workman**
American Institutes for Research

Dr. Workman is the Principal Researcher focusing on health policy and healthcare quality improvement through patient and family engagement. He has worked on a variety of projects related to involving stakeholders (including patients and caregivers) in health care research, service, and policy decisions. Dr. Workman has more than 15 years of experience in coordinating, facilitating, and evaluating stakeholder engagement in a variety of settings for health policy and program implementation. At AIR, he has led or contributed to multiple projects for the Centers for Medicare and Medicaid Services (CMS), the Patient-Centered Outcomes Research Institute (PCORI), and the Agency for Healthcare Research and Quality. He serves as an advisor to AIR's Center for Patient and Consumer Engagement.

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**Jackie Levin, RN, MS AHC-BC, NC-BC**
Jefferson Healthcare

Jackie Levin is a transformational nurse leader working to shift the culture of healthcare through leadership coaching, patient advocacy, consulting, public speaking, and educational programs. She currently works at Jefferson Healthcare in Port Townsend, WA leading the work on the Patient Care Experience and teaches staff and leadership Mindfulness. She is also faculty for the TeamSTEPPS and Treating Your Patients with C.A.R.E programs. As Chair of the Patient Family Advisory Council Jackie worked with leaders and community members from conception, through implementation, and now the successful growth of the Council.

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## Additional Speakers Include:

**Cat Mazzawy, RN**

Senior Director, Integrated Care
Washington State Hospital Association

**Tamara Glover,**

Director, Quality & Performance Improvement, Washington State Hospital Association

**Lisa Segerstrom**

Director, Quality & Performance Improvement, Washington State Hospital Association

**Alexandro Pow Sang,**

Health Service Consultant III, Diabetes Lead

**Luz Romero**

Personal Patient Experience

# Partnership for Patients

ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Washington State Hospital Association

## Ferry County Memorial Hospital
## Submission Summary Report - August 2017 Release

Submission Status
- ● Not Eligible
- ✕ Not Submitted
- ✓ Submitted

| | 2014 | | | | | | | | | | | | 2015 | | | | | | | | | | | | 2016 | | | | | | | | | | | | 2017 | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | January | February | March | April | May | June | July | August | September | October | November | December | January | February | March | April | May | June | July | August | September | October | November | December | January | February | March | April | May | June | July | August | September | October | November | December | January | February | March | April | May | June | July |
| CAUTI ICU | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | | |
| CLABSI ICU | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | | |
| Readmissions | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | | |
| Rapid Response Teams | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Diabetes | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✓ | | |
| Behavioral Health | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ✕ | ✕ | ✕ | ✕ | ✓ | ✓ | ✓ |
| SSI Cardiac | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | | |
| SSI Colon | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | | |
| SSI Hip | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | | |
| SSI Hysterectomy | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | | |
| SSI Knee | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | | |
| Diabetes_Process | | | | | | | | | | | | | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | |
| Ventilator-Associated Events | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | | |
| ADE Anticoagulants | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ✓ | | |
| ADE Hypoglycemic Agent | ✕ | ✕ | ✕ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| ADE Opioids | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Antimicrobial Stewardship | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✕ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
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| Clostridium difficile | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Falls With Injury | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Undue Exposure to Radiation | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✓ | ✓ | ✓ | ✓ | ✕ | ✕ | ✕ | ✕ | ✕ | ✕ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Flu Immunization | | | | | | | | | | | | | | | | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Pressure Ulcers | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Sepsis | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Venous Thromboembolism | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Worker Safety | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |

## CMS's Partnership for Patients: Persons and Family Engagement Data Submission: Q3 September 2017

Completing this survey counts as your hospital's PFE data submission to CMSon the progress that is being made in Patient/Person and Family Engagement as it relates to these metrics.
CMS has the expectation for all hospitals to respond and submit their PFE data.

This data request will be repeated on a quarterly basis and requires a response from each hospital. This will take only 5-10 minutes of your time.
Please ensure you submit your hospital's data regarding the five PFE metrics by September 15 2017.

The Washington State Hospital Association will lend support to hospitals as they implement Patient/Person and Family Engagement.

If you need assistance in submitting your PFE data or in implementing any of the PFE metrics, please feel free to contact us at PFE@wsha.org .

Thank you for your time.

If you have any questions, contact Tamara Glover at tamarag@wsha.org or 206-577-1820.

## CMS's Partnership for Patients: Persons and Family Engagement Data Submission: Q3 September 2017

### Information about you and your hospital (Systems - please submit for each hospital)

1. Contact information

**Hospital Name**

**Name of the person submitting data/completing survey**

**Title**

**Email Address**

**Phone Number**

* 2. Select State

3. Name of person responsible for Patient/Person and Family Engagement the hospital

◯ Same as above

If a different person, please enter name below.

## CMS's Partnership for Patients: Persons and Family Engagement Data Submission: Q3 September 2017

### PFE Metric #1: Planning Checklist for Scheduled Admissions

* 4. 1) Prior to admission, does your hospital staff provide and discuss a planning checklist with every patient that has a scheduled admission, allowing for questions or comments from the patient or family?

- Examples- **you meet this metric if** your hospitals use checklists with patients and/or family members regarding scheduled surgeries (i.e. knee/hip replacement), scheduled C-sections, scheduled admissions to a Long-Term Care areas of the hospital. The checklist could be sent prior to the admission or at the time of arrival at the hospital, the staff discusses the checklist with patient and family.

◯ Yes

◯ No

◯ My hospital does not have planned admissions of any kind, and should be excluded for PFE Metric #1.

Comments

## CMS's Partnership for Patients: Persons and Family Engagement Data Submission: Q3 September 2017

5. If no, what are the barriers?

◯ Do not know how to implement

◯ Insufficient resources (i.e. staff, time)

◯ Leadership buy-in

◯ Other (please specify)

CMS's Partnership for Patients: Persons and Family Engagement Data Submission: Q3 September 2017

## PFE Metric #2: Shift Change Huddles/Bedside Reporting with Patients and Families

* 6. 2) Does your hospital conduct shift change huddles*OR* bedside reporting with patients and family members, in all feasible cases?

- Example- **you meet this metric if**you have a minimum of at least one unit, nurse shift change huddles or clinician reports occur at the bedside and involves the patient and/or family members.

- ◯ Yes
- ◯ No

Comments

CMS's Partnership for Patients: Persons and Family Engagement Data Submission: Q3 September 2017

7. If no, what are the barriers?

- ◯ Do not know how to implement
- ◯ Insufficient resources (i.e. staff, time)
- ◯ Leadership buy-in
- ◯ Other (please specify)

CMS's Partnership for Patients: Persons and Family Engagement Data Submission: Q3 September 2017

## PFE Metric #3: PFE Leader or Functional Area for PFE, Exists in the Hospital

* 8. 3) Does your hospital have a person or functional area/department, who may have another role/title in the hospital, that is dedicated and proactively responsible for Patient and Family Engagement and regularly monitors PFE activities?

- Example- **you meet this metric if** you have a hospital employee who is responsible for PFE efforts at the hospital either full time or part time, AND if your hospital staff/clinicians can identify this person. OR if there is a functional department (i.e. Patient Advocacy, Patient Experience, Patient Engagement, Quality Improvement).

- ◯ Yes
- ◯ No

Comments

CMS's Partnership for Patients: Persons and Family Engagement Data Submission: Q3 September 2017

9. If no, what are the barriers?

- ◯ Do not know how to implement
- ◯ Insufficient resources (i.e. staff, time)
- ◯ Leadership buy-in
- ◯ Other (please specify)

CMS's Partnership for Patients: Persons and Family Engagement Data Submission: Q3 September 2017

**PFE Metric #4: PFEC or Patient Representative on Hospital Committee**

* 10. 4) Does your hospital have an active Patient and Family Engagement Committee (PFEC), OR Patient and Family Advisory Committee (PFAC) OR have at least one former patient that serves on a patient safety or quality improvement committee or team?

- Example- **you meet this metric if**you have patient/family representatives from the community that have been formally named as members of a PFAC/PFEC or hospital committee.

◯ Yes

◯ No

Comments

CMS's Partnership for Patients: Persons and Family Engagement Data Submission: Q3 September 2017

11. If no, what are the barriers?

◯ Do not know how to implement

◯ Insufficient resources (i.e. staff, time)

◯ Leadership buy-in

◯ Other (please specify)

CMS's Partnership for Patients: Persons and Family Engagement Data Submission: Q3 September 2017

**PFE Metric #5:Patient and Family on Hospital Governing and/or Leadership Board (hospital governance)**

* 12. 5) Does your hospital have at least one or more patient(s) who serve on a Governing and/or Leadership board and serves as a patient representative?

- Example- **you meet this metric if** you have at least one position on the Board designated for a patient or family member who is appointed to represent that perspective. If a specific board representative is not possible, other ways to include the patient and families when making hospital governance decisions are acceptable as well.
- Other examples include asking for the PFEC/PFAC input on matters before the Board and incorporating a PFEC/PFAC report into the Board agenda.
- For Public District Hospitals, one of the elected board members are involved in a patient and family focused committee or team.

◯ Yes

◯ No

Comments

CMS's Partnership for Patients: Persons and Family Engagement Data Submission: Q3 September 2017

13. If no, what are the barriers?

◯ Do not know how to implement

◯ Insufficient resources (i.e. staff, time)

◯ Leadership buy-in

◯ Other (please specify)

CMS's Partnership for Patients: Persons and Family Engagement Data Submission: Q3 September 2017

**Thank you for submitting your quarterly data on patient and family engagement.**

**If you have any questions contact Tamara Glover at tamarag@wsha.org or 206-577-1820.**

# Ferry County Public Hospital District No. 1
# d/b/a Ferry County Memorial Hospital
Republic, Washington

## Combined Financial Statements and Additional Information
Month Ended August 2017

## Key Ratios (Hospital Only, Excluding ALF)

## I). Liquidity Ratios

| | Ferry County Memorial Hospital (Excluding ALF) | | * Benchmark - Far West CAH | ^ Benchmark - Washington CAH | Desired Trend |
|---|---|---|---|---|---|
| | August YTD Ratios | Direction Compared to Bechmarks | Most Current Benchmark in 2017 | Most Current Benchmark in 2017 | |
| **Current Ratio** = Current Assets / Current Liabilities<br>Measures the ability to repay current liabilities with current assets. | **2.87** | **In between** | **2.85** | **3.07** | ↑ |
| **Days Cash on Hand** (Short-Term Sources Only) | **40** | ↓ | **46** | **Not available** | ↑ |
| **Days Cash on Hand** (All Sources including investments) = Cash & Investments / (Total Expenses (Less Depreciation & Amortization) / Number of Days)<br>The number of days of operating expenses that could be paid with current cash available. | **89** | **In between** | **87** | **70** | |
| **Days Net Revenue in Net A/R** Hospital and Clinics = Accounts Receivable / (Net Patient Revenue / Number of Days)<br>Days it takes to collect payments from A/R. | **68** | ↑ | **60** | **46** | ↓ |
| **Average Payment Period** = Total Current Liabilities / (Total Operating Expense + Interest Expense - Depreciation Expense)<br>Average period taken by the Hospital District to make payments to creditors. | **42** | ↓ | **47** | **Not available** | ↓ |

* BENCHMARKS: 2017 Almanac of Hospital Financial and Operating Indicators: CAH-Far We

^ BENCHMARKS: March 2017 Flex Monitoring Team CAH Financial Indicators Report: Summ

| Key Ratios (Hospital Only, Excluding ALF) | Ferry County Memorial Hospital (Excluding ALF) | | * Benchmark - Far West CAH | ^ Benchmark - Washington CAH | Desired Trend |
|---|---|---|---|---|---|
| **II). Capital Ratios** | August YTD Ratios | Direction Compared to Bechmarks | Most Current Benchmark in 2017 | Most Current Benchmark in 2017 | |
| **Long Term Debt to Capitalization** = Debt / Equity + Debt<br>Financial leverage of the Hospital District. | 62.00% | ↑ | 22.60% | 25.40% | ↓ |
| **Equity Financing** = Net Position / Total Assets<br>Amount of equity used to finance the Hospital District's assets. | 35.00% | ↓ | 56.80% | 53.64% | ↑ |
| **III). Profit Ratios** | | | | | |
| **Operating Margin** = Operating Income (Loss) / Net Revenue<br>Measure of operating efficiency. | -0.59% | In between | -3.99% | 1.89% | ↑ |
| **Total Margin** = Change in Net Position / Total Operating Revenues<br>Measures overall profitability of the Hospital District. | -0.70% | ↓ | 2.60% | 1.89% | ↑ |
| **Return on Total Assets** = Change in Net Position / Total Assets<br>Measures profitability relative to the Hospital District's total assets. | -0.46% | ↓ | 3.79% | Not available | ↑ |
| **Fixed Asset Turnover** = Total Operating Revenue / Net Plant, Property, and Equipment<br>Measures the Hospital District's ability to generate net operating revenue from fixed asset investments. | 105.00% | ↓ | 109.00% | Not available | ↑ |

* BENCHMARKS: 2017 Almanac of Hospital Financial and Operating Indicators: CAH-Far We

^ BENCHMARKS: March 2017 Flex Monitoring Team CAH Financial Indicators Report: Summ

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

Combined Statement of Net Position
Year to Date August 31, 2017

| *Assets* | YTD Balances August |
|---|---|
| Current assets: | |
| Cash and cash equivalents | $ 804,041 |
| Patient trust | 670 |
| Receivables: | |
| Patient AR - Net | 1,897,633 |
| Taxes | 26,435 |
| Estimated third-party payor settlements | 149,829 |
| Other | - |
| Inventories | 144,894 |
| Prepaid expenses | 88,984 |
| Total current assets | 3,112,486 |
| Noncurrent cash and cash equivalents: | |
| Restricted cash & cash equivalent, USDA reserve | 257,345 |
| Internally designated cash and cash equip, funded depreciation | 601,295 |
| Total noncurrent assets limited as to use | 858,640 |
| Capital assets: | |
| Nondepreciable capital assets | 27,282 |
| Depreciable capital assets - Net of accumulated depreciation | 6,344,258 |
| Total capital assets | 6,371,540 |
| TOTAL ASSETS | $ 10,342,666 |

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

Combined Statement of Net Position
Year to Date August 31, 2017

| *Liabilities and Net Position* | YTD Balances August |
|---|---|
| Current liabilities: | |
| Current maturities - Long term debt | $ 170,488 |
| Current maturities - Capital lease obligations | 154,597 |
| Accounts payable | 167,115 |
| Patient trust | 670 |
| Payroll and related expenses | 246,400 |
| Accrued vacation | 194,570 |
| Accrued interest payable | 131,670 |
| Estimated third-party payor settlements | 31,667 |
| Total current liabilities | 1,097,177 |
| Noncurrent liabilities: | |
| Long term debt - Less current maturities | 5,520,060 |
| Capital lease obligations - Less current portion | 249,838 |
| Total noncurrent liabilities | 5,769,898 |
| Total liabilities | 6,867,075 |
| Net position: | |
| Invested in capital assets | 144,887 |
| Restricted expendable | 257,345 |
| Unrestricted | 3,073,359 |
| Total net position | 3,475,591 |
| TOTAL LIABILITIES AND NET POSITION | $ 10,342,666 |

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

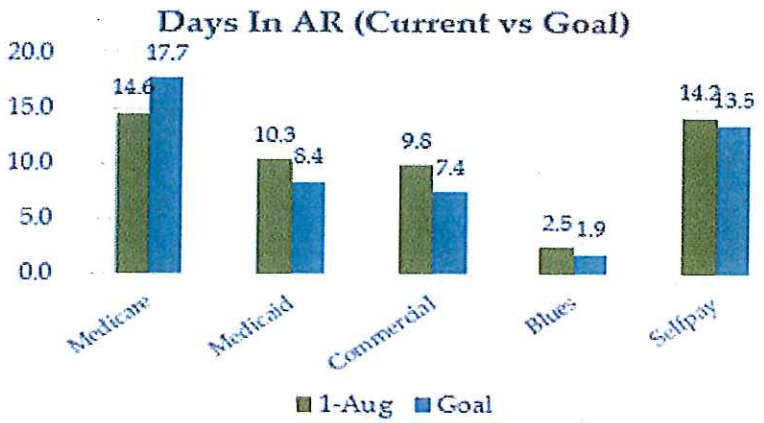
Combined Statements of Revenues, Expenses, and Changes in Net Position.
Year to Date August 31, 2017

| | January | February | March | April | May | June | July | August | YTD |
|---|---|---|---|---|---|---|---|---|---|
| Operating revenue: | | | | | | | | | |
| Patient service revenue - (Net contractual allowances) | $ 1,081,794 | $ 749,803 | $ 1,022,604 | $ 904,656 | $ 744,292 | $ 1,053,774 | $ 872,342 | $ 902,889 | $ 7,332,154 |
| Bad debt expense | (52,713) | (11,389) | (55,753) | (26,165) | (17,525) | (51,734) | (30,860) | (27,903) | (274,042) |
| Other operating revenue | 2,099 | 5,573 | 2,891 | 40,237 | 12,415 | 26,767 | 12,564 | (20,336) | 82,210 |
| Total operating revenue | 1,031,180 | 743,987 | 969,742 | 918,728 | 739,182 | 1,028,807 | 854,046 | 854,650 | 7,140,322 |
| Operating expenses: | | | | | | | | | |
| Salaries and wages | 409,888 | 387,520 | 440,667 | 378,242 | 480,698 | 453,931 | 372,254 | 408,671 | 3,331,871 |
| Employee benefits | 138,197 | 122,174 | 31,218 | 124,063 | 115,530 | 124,605 | 100,426 | 116,359 | 872,572 |
| Professional fees | 29,848 | 51,925 | 112,579 | 67,510 | 49,826 | 110,679 | 57,058 | 30,600 | 510,025 |
| Supplies | 69,944 | 55,321 | 66,372 | 66,843 | 59,202 | 64,046 | 68,409 | 30,930 | 481,067 |
| Purchased services - Utilities | 29,596 | 22,406 | 19,662 | 20,356 | 16,975 | 15,178 | 16,386 | 21,515 | 162,074 |
| Purchased services - Other | 200,076 | 103,412 | 170,649 | 95,515 | 91,071 | 172,158 | 112,761 | 146,176 | 1,091,818 |
| Insurance | 11,999 | 6,002 | 6,002 | 2,762 | - | 9,367 | 10,842 | 10,843 | 57,817 |
| Other | 36,734 | 27,306 | 27,471 | 8,749 | 31,333 | 30,944 | 47,941 | 2,185 | 212,663 |
| Rent | 11,481 | 20,333 | 537 | 11,127 | 11,291 | 11,527 | 11,298 | 11,299 | 88,893 |
| Depreciation | 54,892 | 54,892 | 54,892 | 54,892 | 54,892 | 54,892 | 60,195 | 51,496 | 441,043 |
| Total operating expenses | 992,655 | 851,291 | 930,049 | 830,059 | 910,818 | 1,047,327 | 857,570 | 830,074 | 7,249,843 |
| Gain (loss) from operations | 38,525 | (107,304) | 39,693 | 88,669 | (171,636) | (18,520) | (3,524) | 24,576 | (109,521) |
| Nonoperating revenues (expenses): | | | | | | | | | |
| Property taxes | 19,162 | 19,162 | 19,162 | 19,162 | 19,162 | 20,137 | 25,162 | 19,162 | 160,271 |
| Interest earnings | 400 | 400 | 400 | 400 | 400 | 400 | 442 | 520 | 3,362 |
| Interest expense | (20,010) | (20,046) | (20,061) | (20,144) | (19,407) | (20,445) | (16,487) | (19,948) | (156,548) |
| Grants and donations | - | - | - | 16,029 | 80 | 1,000 | 50 | 6,355 | 23,514 |
| Other | - | 845 | 450 | - | (10,000) | (10,000) | (10,000) | (10,060) | (38,765) |
| Total nonoperating revenues (expenses) - Net | (448) | 361 | (49) | 15,447 | (9,765) | (8,908) | (833) | (3,971) | (8,166) |
| Increase (decrease) in net position | $ 38,077 | $ (106,943) | $ 39,644 | $ 104,116 | $ (181,401) | $ (27,428) | $ (4,357) | $ 20,605 | $ (117,687) |

# Ferry County Public Hospital District

## August 2017

August's revenue of $1.4M was the highest we've seen in the past year, which presents the opportunity for increased cash collections in the coming months. AR days dropped from 55.4 to 52, meeting our goal; with 11.7 in DNFB, 26.1 in third party, and self pay days dropped to 14.2, also reaching their goal. Continued focus will be placed on timely and thorough billing and follow up, as well as achieving and maintaining best practice metrics.




### Top 5 Team Initiatives & Obstacles

- **Late Charges:** Volume decreased by half, dollars decreased by nearly half; 41 late charges totaling $6.6k
- **Denials:** Rate increased to 15%. Overall count increased, but dollar amount stayed roughly the same as July
- **DNFB:** Currently at 11.7 days; 7.4 days in DNFB and 4.3 days in unbilled "in-house" accounts
- **Cash:** Collections of $706.8k did not meet goal, however we now have two swingbed patients, and revenue was higher than average this month
- **Aging:** Third party aging over 90 days decreased by 1.3% or $19k, with just 12.5% of overall inventory aged

### Industry Update

**Outpatient Radiology—Anthem coverage limitations**

Anthem will no longer pay for MRIs or CT scans performed on an outpatient basis in hospitals, unless a review finds it was medically necessary for the scan to be performed at the hospital. Facilities are expected to refer patients to a free-standing imaging center due to the profoundly lower cost as compared to a hospital. This policy is effective in nine states as of September 1, 2017 and will be rolled out to 4 additional states by March 2018. More health insurers are expected to implement broad-based payment policies like Anthem's imaging program as they look for new ways to cut costs, hold down premiums, and make their margins.

Article with program details: http://www.modernhealthcare.com/article/20170826/NEWS/170829906

Thank you for your continued trust and partnership. If you have any questions, concerns, or points you wish to discuss after reviewing the enclosed information, please feel free to contact me.

Rachel Hayes | Revenue Cycle Director
**Healthcare Resource Group**
Office (509) 789-6040 | rhayes@hrgpros.com

# FERRY COUNTY PUBLIC HOSPITAL DISTRICT

## MONTH END FINANCE REPORT

# August 2017

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# FINANCE DASHBOARD

## Revenue Cycle Performance

| | Target | March-17 | April-17 | May-17 | June-17 | July-17 | August-17 |
|---|---|---|---|---|---|---|---|
| **REVENUE** | | | | | | | |
| Net Revenue | | $747,903 | $662,275 | $657,942 | $705,136 | $770,274 | $805,051 |
| Gross Revenue | | $1,325,503 | $1,206,806 | $1,190,524 | $1,205,999 | $1,272,372 | $1,455,746 |
| **CASH** | | | | | | | |
| Cash Collections as a % of Net Revenue | 100% | 133% | 108% | 118% | 148% | 98% | 92% |
| Cash Collections | | $814,692 | $805,370 | $784,712 | $975,440 | $692,365 | $706,830 |
| **ACCOUNTS RECEIVABLE** | | | | | | | |
| Net AR | | $1,351,707 | $1,301,909 | $1,254,851 | $1,256,985 | $1,255,396 | $1,132,096 |
| Gross AR | | $2,445,002 | $2,434,020 | $2,333,355 | $2,194,672 | $2,210,944 | $2,224,196 |
| Unbilled | 3 | 5.3 | 7.2 | 9.8 | 10.6 | 11.6 | 11.7 |
| Third Party | 35 | 35.4 | 36.3 | 30.7 | 28.3 | 28.9 | 26.1 |
| Self Pay | 14 | 17.8 | 16.9 | 17.2 | 16.5 | 15.0 | 14.2 |
| **Total Days in AR** | **52** | **58.5** | **60.4** | **57.7** | **55.4** | **55.4** | **52.0** |
| Days in AR - Credit Balances | < 1 | 1.3 | 1.4 | 1.2 | 0.6 | 0.4 | 0.6 |
| **UNBILLED** | | | | | | | |
| In-house | < 2 Days | 0.1 | 3.3 | 4.3 | 1.0 | 2.7 | 4.3 |
| DNFB | < 1 Day | 5.2 | 3.9 | 5.5 | 9.6 | 8.9 | 7.4 |
| **Total Unbilled** | **< 3 Days** | **5.3** | **7.2** | **9.8** | **10.6** | **11.6** | **11.7** |

## Third Party

| | Target | March-17 | April-17 | May-17 | June-17 | July-17 | August-17 |
|---|---|---|---|---|---|---|---|
| **AGING (excluding credits)** | | | | | | | |
| Medicare Aging > 90 Days | 11% | 10.2% $ 86,944 | 21.8% $ 185,963 | 7.0% $ 52,769 | 6.2% $ 41,693 | 9.4% $ 66,245 | 7.7% $ 48,327 |
| Medicaid Aging > 90 Days | 10% | 14.9% $ 70,224 | 18.8% $ 105,489 | 18.1% $ 82,694 | 18.2% $ 73,450 | 17.4% $ 64,120 | 16.9% $ 76,266 |
| Commercial Aging > 90 Days | 19% | 17.5% $ 53,273 | 19.1% $ 54,784 | 19.6% $ 66,173 | 17.3% $ 64,124 | 21.4% $ 84,001 | 17.9% $ 75,970 |
| Blues Aging > 90 Days | 11% | 4.8% $ 4,659 | 19.9% $ 16,960 | 13.2% $ 14,949 | 10.6% $ 9,639 | 6.0% $ 7,898 | 3.7% $ 3,978 |
| **Total Third Party Aging > 90 Days** | **12%** | **12.5% $ 217,582** | **20.3% $ 366,404** | **13.2% $ 222,624** | **12.3% $ 191,258** | **13.8% $ 224,046** | **12.5% $ 205,018** |
| **CLAIM SUBMISSION EFFECIENCY** | | | | | | | |
| Claims Submission | | 1,928 $ 1,530,661 | 1,736 $ 1,093,067 | 1,974 $ 1,231,831 | 1,878 $ 1,431,495 | 1,557 $ 1,111,797 | 1,873 $ 1,518,861 |
| Clean Claims | 85% | 47% | 56% | 57% | 56% | 62% | 62% |
| Denial Percent | 5% | 14% | 10% | 20% | 12% | 11% | 15% |
| Total Denial Rate | Count \| Amt | 286 $ 180,524 | 195 $ 146,815 | 288 $ 221,314 | 256 $ 151,292 | 171 $ 152,132 | 213 $ 162,311 |
| Late Charges | Count \| Amt | 67 $ 6,735 | 78 $ 12,625 | 126 $ 15,004 | 107 $ 8,448 | 91 $ 10,806 | 44 $ 6,613 |
| Communication Log Backlog | | 270 $ 335,511 | 55 $ 73,342 | 125 $ 150,210 | 168 $ 149,714 | 108 $ 79,816 | 97 $ 130,840 |

## Self Pay

| | Target | March-17 | April-17 | May-17 | June-17 | July-17 | August-17 |
|---|---|---|---|---|---|---|---|
| **INVENTORY & QUALITY** | | | | | | | |
| Total Inventory | | 2,325 $ 744,520 | 2,219 $ 681,076 | 2,268 $ 694,917 | 2,138 $ 654,722 | 2,246 $ 597,270 | 2,252 $ 606,323 |
| New | | 517 $ 108,138 | 486 $ 116,971 | 471 $ 124,678 | 518 $ 132,016 | 481 $ 132,304 | 479 $ 146,463 |
| Resolved | | 485 $ 80,642 | 539 $ 77,090 | 524 $ 23,436 | 563 $ 21,312 | 480 $ 72,113 | 502 $ 71,689 |
| Aged >120 days from Assignment | < 25% | 56.5% $ 420,672 | 46.8% $ 318,793 | 58.6% $ 406,945 | 62.6% $ 409,950 | 45.9% $ 274,357 | 44.4% $ 269,308 |
| Total Payment Plans over 120 days | | $87,439 | $80,332 | $104,840 | $111,050 | $108,251 | $0 |
| Average Speed to Answer | < 60 seconds | 47 | 12 | 33 | 23 | 17 | 19 |
| **STATEMENTS & LETTERS** | | | | | | | |
| Statements & Letters | | 747 | 572 | 660 | 674 | 600 | 509 |
| Inbound and Outbound Calls | In \| Out | 89 \| 262 | 77 \| 265 | 91 \| 259 | 69 \| 314 | 55 \| 280 | 86 \| 353 |
| **WRITE OFFS** | | | | | | | |
| Bad Debt as a % of Gross Revenue | < 2% | 4.9% $ 65,105 | 4.8% $ 57,919 | 2.1% $ 25,529 | 4.5% $ 53,827 | 5.7% $ 71,992 | 4.0% $ 57,628 |
| Charity as a % of Gross Revenue | < 2% | 1.7% $ 22,782 | 1.9% $ 22,803 | 0.3% $ 3,665 | 0.7% $ 7,905 | 3.3% $ 42,507 | 0.9% $ 13,053 |


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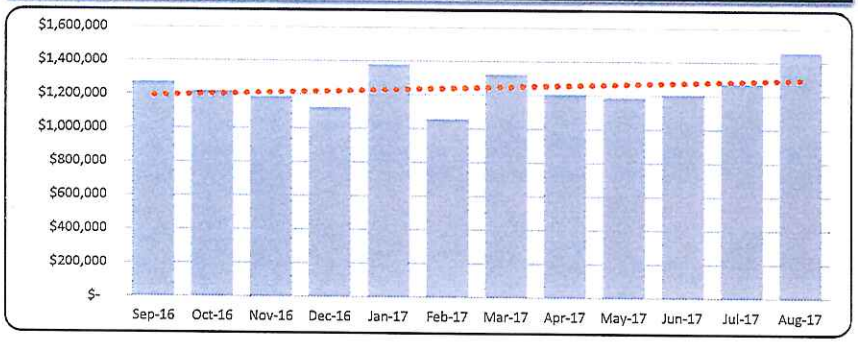
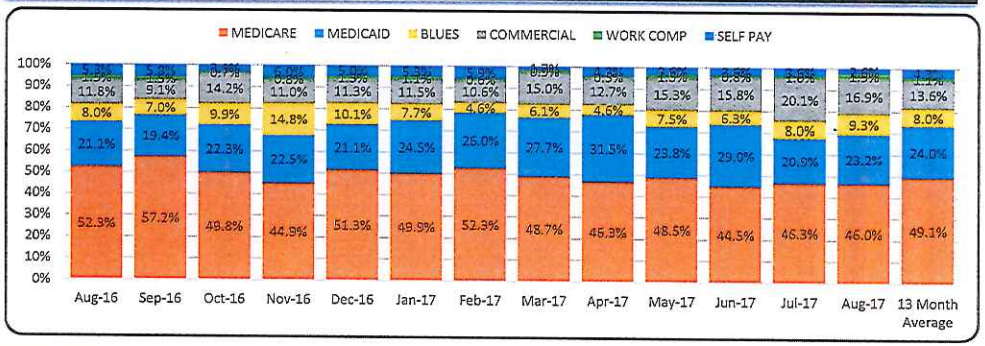
# GROSS REVENUE

| PAYER | Aug-16 | Sep-16 | Oct-16 | Nov-16 | Dec-16 | Jan-17 | Feb-17 | Mar-17 | Apr-17 | May-17 | Jun-17 | Jul-17 | Aug-17 | 13 Month Average |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| MEDICARE | $ 703,627 | $ 728,965 | $ 608,213 | $ 533,926 | $ 576,197 | $ 688,633 | $ 552,755 | $ 644,904 | $ 558,959 | $ 577,503 | $ 536,331 | $ 589,060 | $ 670,241 | $ 613,024 |
| MEDICAID | $ 284,603 | $ 247,497 | $ 272,028 | $ 267,135 | $ 236,954 | $ 338,593 | $ 274,706 | $ 367,264 | $ 380,194 | $ 283,779 | $ 349,350 | $ 266,370 | $ 338,337 | $ 300,524 |
| COMMERCIAL | $ 158,456 | $ 116,354 | $ 173,711 | $ 130,208 | $ 126,457 | $ 158,156 | $ 111,575 | $ 198,558 | $ 152,842 | $ 182,585 | $ 191,131 | $ 256,353 | $ 245,662 | $ 169,388 |
| BLUES | $ 107,650 | $ 89,320 | $ 120,753 | $ 175,336 | $ 113,291 | $ 105,941 | $ 48,842 | $ 80,956 | $ 56,018 | $ 89,320 | $ 76,347 | $ 101,815 | $ 135,555 | $ 100,088 |
| WORK COMP | $ 20,381 | $ 18,902 | $ 8,566 | $ 9,959 | $ 14,804 | $ 14,720 | $ 5,879 | $ 11,269 | $ 6,307 | $ 14,901 | $ 9,429 | $ 12,970 | $ 27,483 | $ 13,505 |
| SELF PAY | $ 71,815 | $ 73,747 | $ 38,394 | $ 71,524 | $ 55,889 | $ 73,286 | $ 62,400 | $ 22,552 | $ 52,486 | $ 42,437 | $ 43,411 | $ 45,804 | $ 38,468 | $ 53,247 |
| TOTAL | $ 1,346,532 | $ 1,274,784 | $ 1,221,666 | $ 1,188,087 | $ 1,123,592 | $ 1,379,328 | $ 1,056,158 | $ 1,325,503 | $ 1,206,806 | $ 1,190,524 | $ 1,205,999 | $ 1,272,372 | $ 1,455,746 | $ 1,249,777 |
| AVERAGE DAILY REVENUE | $ 45,431 | $ 43,451 | $ 41,772 | $ 40,489 | $ 38,406 | $ 40,120 | $ 39,545 | $ 41,789 | $ 40,320 | $ 40,466 | $ 39,597 | $ 39,879 | $ 42,762 | $ 41,079 |

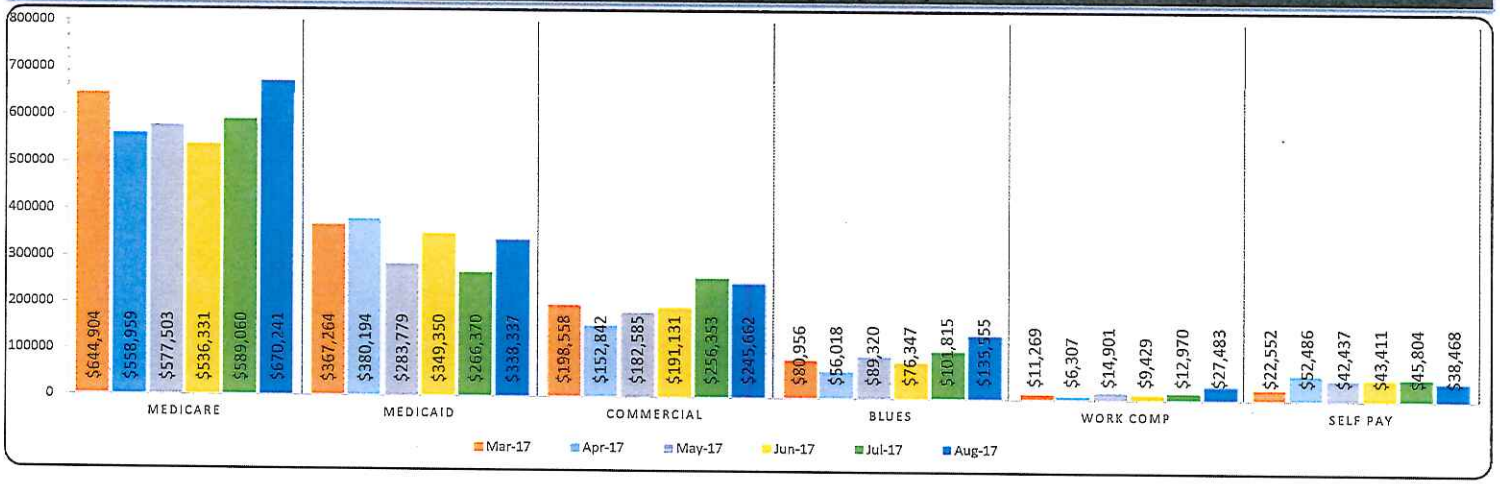
## Gross Revenue




## Payer Mix




## Revenue Trending By Payer





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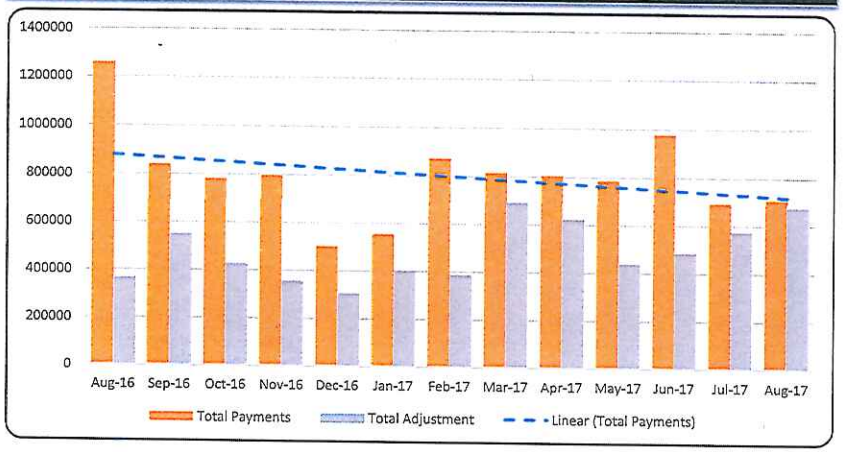
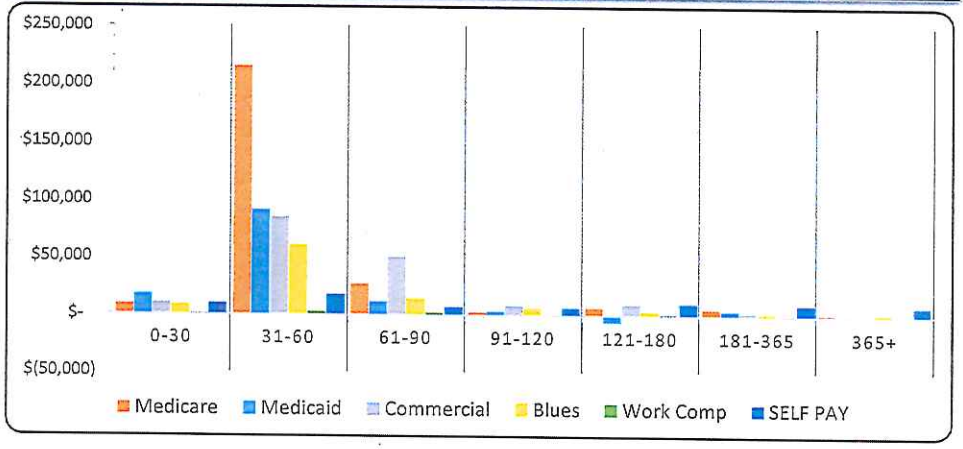
# CASH DETAIL

| PAYER | Aug-16 | Sep-16 | Oct-16 | Nov-16 | Dec-16 | Jan-17 | Feb-17 | Mar-17 | Apr-17 | May-17 | Jun-17 | Jul-17 | Aug-17 | 13 Month Average |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **MEDICARE** | | | | | | | | | | | | | | |
| Payments | $ 749,621 | $ 382,014 | $ 367,160 | $ 377,089 | $ 163,840 | $ 157,923 | $ 460,832 | $ 397,003 | $ 336,210 | $ 369,096 | $ 511,521 | $ 301,590 | $ 261,730 | $ 371,972 |
| Adjustments | $ 38,693 | $ 226,961 | $ 129,547 | $ 116,225 | $ 137,710 | $ 141,475 | $ 86,636 | $ 271,209 | $ 261,743 | $ 145,864 | $ 92,067 | $ 148,036 | $ 302,886 | $ 161,465 |
| Collection % | 95% | 63% | 74% | 76% | 54% | 53% | 84% | 59% | 56% | 72% | 85% | 67% | 46% | 68% |
| **MEDICAID** | | | | | | | | | | | | | | |
| Payments | $ 127,030 | $ 111,701 | $ 63,821 | $ 86,326 | $ 95,410 | $ 148,683 | $ 123,263 | $ 169,288 | $ 147,046 | $ 142,072 | $ 181,740 | $ 121,406 | $ 119,133 | $ 125,917 |
| Adjustments | $ 132,887 | $ 151,361 | $ 77,931 | $ 81,778 | $ 99,411 | $ 133,230 | $ 175,544 | $ 232,023 | $ 179,403 | $ 193,894 | $ 236,081 | $ 179,060 | $ 187,391 | $ 158,461 |
| Collection % | 49% | 42% | 45% | 51% | 49% | 53% | 41% | 42% | 45% | 42% | 43% | 40% | 39% | 45% |
| **COMMERCIAL** | | | | | | | | | | | | | | |
| Payments | $ 189,311 | $ 184,876 | $ 173,906 | $ 182,991 | $ 119,157 | $ 88,716 | $ 116,995 | $ 104,149 | $ 152,594 | $ 122,899 | $ 140,112 | $ 138,407 | $ 162,727 | $ 144,372 |
| Adjustments | $ 122,029 | $ 90,724 | $ 116,142 | $ 87,346 | $ 43,081 | $ 31,882 | $ 47,430 | $ 45,517 | $ 47,834 | $ 44,655 | $ 52,497 | $ 58,783 | $ 60,486 | $ 65,262 |
| Collection % | 61% | 67% | 60% | 68% | 73% | 74% | 71% | 70% | 76% | 73% | 73% | 70% | 73% | 70% |
| **BLUES** | | | | | | | | | | | | | | |
| Payments | $ 93,658 | $ 74,996 | $ 94,580 | $ 69,820 | $ 52,273 | $ 79,673 | $ 94,900 | $ 43,104 | $ 65,133 | $ 59,832 | $ 54,598 | $ 54,376 | $ 90,206 | $ 71,319 |
| Adjustments | $ 35,511 | $ 24,991 | $ 39,524 | $ 22,038 | $ 15,337 | $ 26,571 | $ 31,043 | $ 17,638 | $ 21,220 | $ 17,824 | $ 18,386 | $ 25,500 | $ 30,005 | $ 25,045 |
| Collection % | 73% | 75% | 71% | 76% | 77% | 75% | 75% | 71% | 75% | 77% | 75% | 68% | 75% | 74% |
| **WORK COMP** | | | | | | | | | | | | | | |
| Payments | $ 8,211 | $ 14,217 | $ 8,887 | $ 3,865 | $ 5,266 | $ 3,628 | $ 3,692 | $ 7,731 | $ 3,193 | $ 2,058 | $ 6,967 | $ 5,279 | $ 5,275 | $ 6,021 |
| Adjustments | $ 14,178 | $ 15,637 | $ 10,398 | $ 9,199 | $ 6,850 | $ 6,268 | $ 7,923 | $ 10,648 | $ 5,926 | $ 2,609 | $ 12,255 | $ 4,689 | $ 10,554 | $ 9,010 |
| Collection % | 37% | 48% | 46% | 30% | 43% | 37% | 32% | 42% | 35% | 44% | 36% | 53% | 33% | 40% |
| **SELF PAY** | | | | | | | | | | | | | | |
| Payments | $ 86,487 | $ 65,896 | $ 68,365 | $ 65,423 | $ 63,501 | $ 72,270 | $ 66,886 | $ 87,706 | $ 77,598 | $ 80,972 | $ 71,830 | $ 60,234 | $ 64,608 | $ 71,675 |
| Bad Debt Recoveries | $ 3,859 | $ 5,286 | $ 4,075 | $ 9,495 | $ 5,020 | $ 3,891 | $ 3,487 | $ 5,712 | $ 23,596 | $ 7,782 | $ 8,671 | $ 11,072 | $ 3,151 | $ 7,315 |
| Adjustments | $ (1,183) | $ 1,343 | $ 4,027 | $ 1,042 | $ 2,252 | $ 6,253 | $ 13,158 | $ 25,020 | $ 25,984 | $ 6,674 | $ 11,458 | $ 46,047 | $ 15,546 | $ 12,125 |
| Charity Care | $ 5,043 | $ 4,957 | $ 21,102 | $ 5,202 | $ 570 | $ - | $ 10,212 | $ 22,782 | $ 22,803 | $ 3,665 | $ 7,905 | $ 42,507 | $ 13,053 | $ 12,292 |
| Bad Debt | $ 18,510 | $ 34,790 | $ 29,154 | $ 33,046 | $ - | $ 56,696 | $ 14,913 | $ 65,105 | $ 57,919 | $ 25,529 | $ 53,827 | $ 71,992 | $ 57,628 | $ 39,932 |
| Total SP Adjustments | $ 22,370 | $ 41,090 | $ 54,283 | $ 39,291 | $ 2,822 | $ 62,949 | $ 38,284 | $ 112,907 | $ 106,706 | $ 35,868 | $ 73,191 | $ 160,547 | $ 86,227 | $ 64,349 |
| Collection % | 79% | 62% | 56% | 62% | 96% | 53% | 64% | 44% | 42% | 69% | 50% | 27% | 43% | 57% |
| **TOTAL** | | | | | | | | | | | | | | |
| Total Payments | $ 1,258,178 | $ 838,987 | $ 780,795 | $ 795,010 | $ 504,467 | $ 554,784 | $ 870,055 | $ 814,692 | $ 805,370 | $ 784,712 | $ 975,440 | $ 692,365 | $ 706,830 | $ 798,591 |
| Total Adjustment | $ 365,668 | $ 550,764 | $ 427,824 | $ 355,878 | $ 305,212 | $ 402,374 | $ 386,860 | $ 689,942 | $ 622,832 | $ 440,713 | $ 484,477 | $ 576,615 | $ 677,549 | $ 419,245 |
| Total Collection % | 77% | 60% | 65% | 69% | 62% | 58% | 69% | 54% | 56% | 64% | 67% | 55% | 51% | 62% |

## Cash & Adjustment Trending




## Cash Collections by Discharge Date





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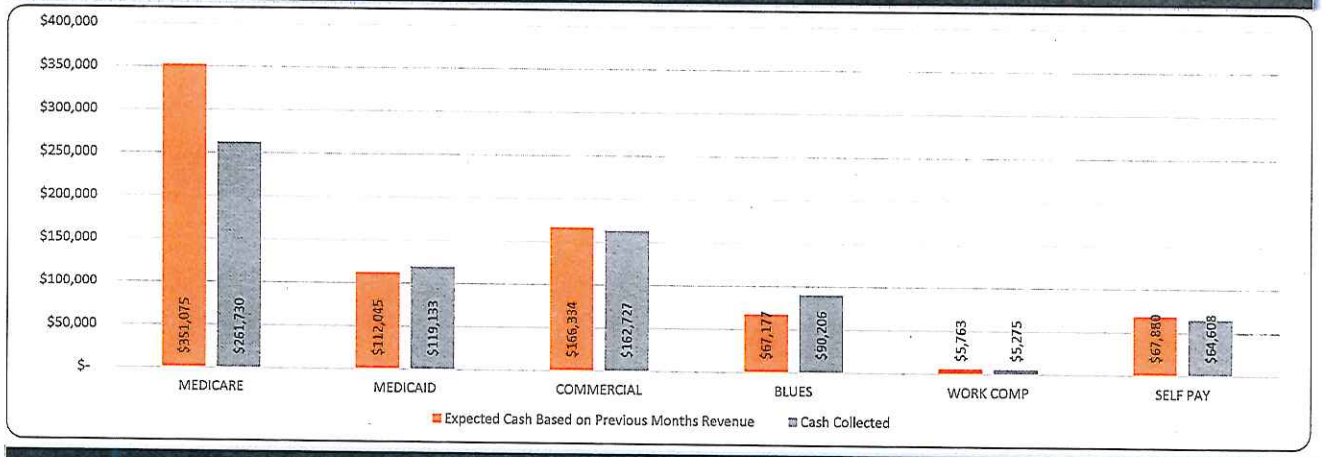
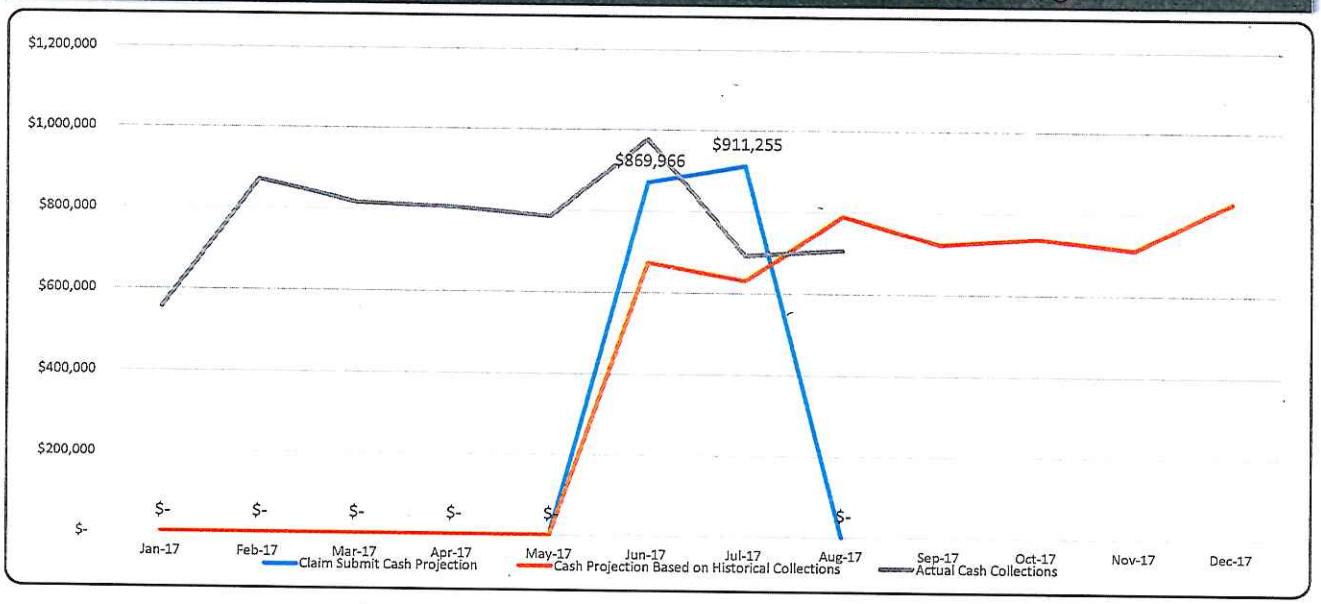
# CASH FORECASTING

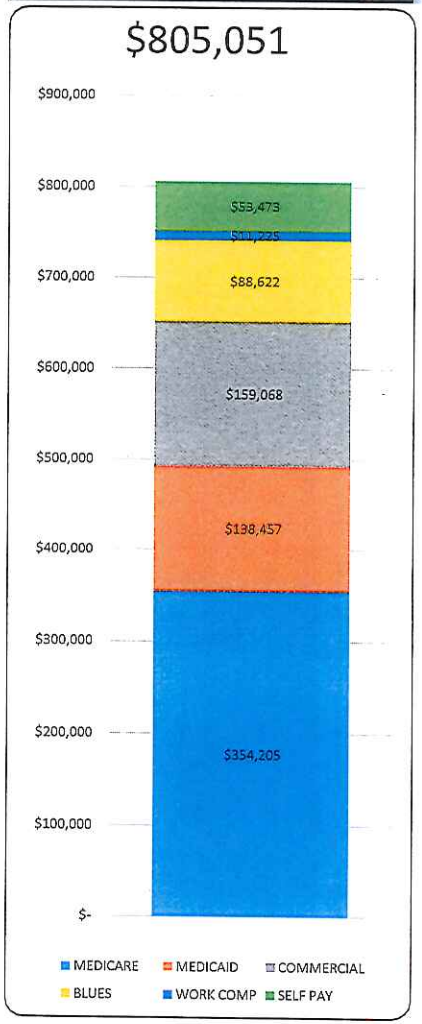
## Expected Last Month vs Cash Collected (Based on Previous Months Revenue)




## Expected Cash Next Month Based on Claim Submission Reporting




## Cash Expected Next Month (Based on this Months Revenue)





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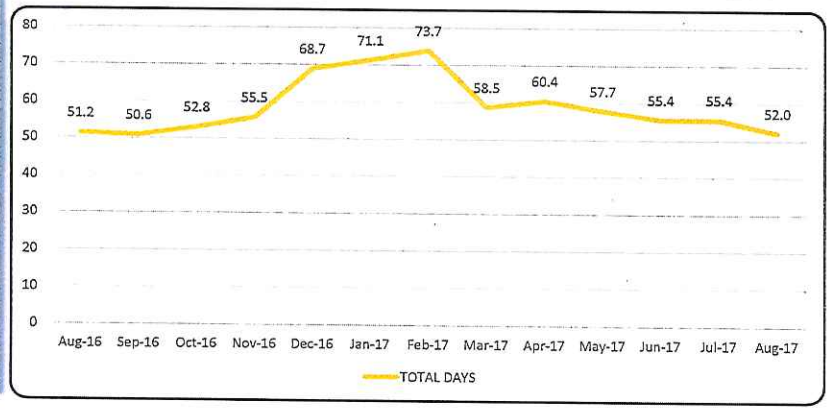
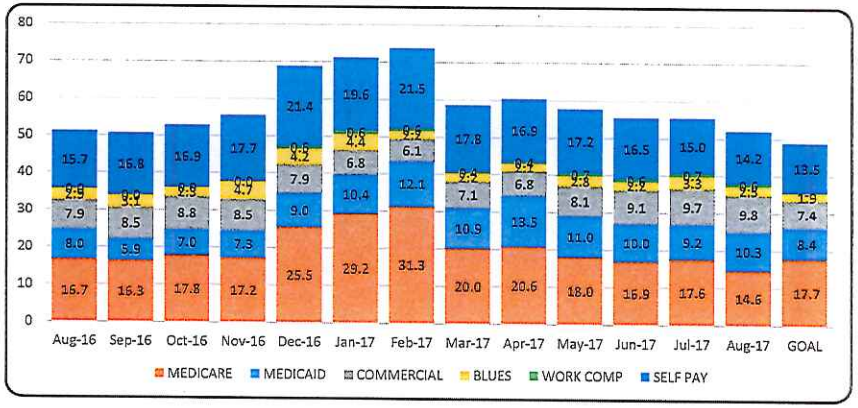
# ACCOUNTS RECEIVABLE

## AR Days

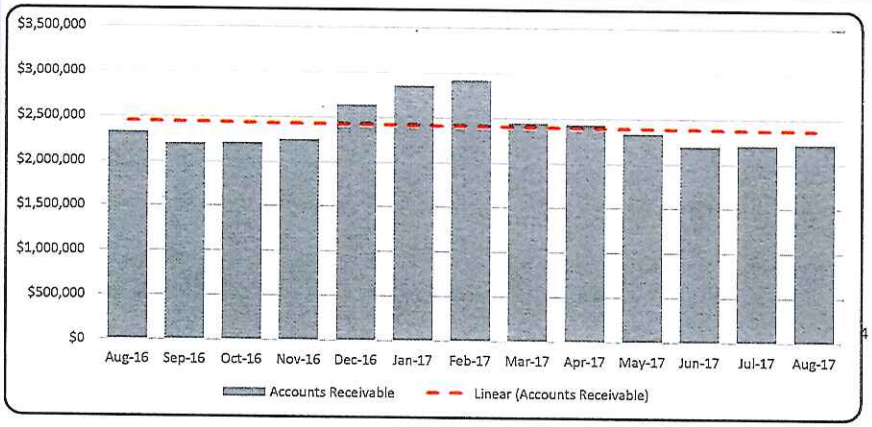
| PAYER | Aug-16 | Sep-16 | Oct-16 | Nov-16 | Dec-16 | Jan-17 | Feb-17 | Mar-17 | Apr-17 | May-17 | Jun-17 | Jul-17 | Aug-17 | 13 Month Average |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| MEDICARE | 16.7 | 16.3 | 17.8 | 17.2 | 25.5 | 29.2 | 31.3 | 20.0 | 20.6 | 18.0 | 16.9 | 17.6 | 14.6 | 20.1 |
| MEDICAID | 8.0 | 5.9 | 7.0 | 7.3 | 9.0 | 10.4 | 12.1 | 10.9 | 13.5 | 11.0 | 10.0 | 9.2 | 10.3 | 9.6 |
| COMMERCIAL | 7.9 | 8.5 | 8.8 | 8.5 | 7.9 | 6.8 | 6.1 | 7.1 | 6.8 | 8.1 | 9.1 | 9.7 | 9.8 | 8.1 |
| BLUES | 2.9 | 3.1 | 2.3 | 4.7 | 4.2 | 4.4 | 2.2 | 2.2 | 2.1 | 2.8 | 2.2 | 3.3 | 2.5 | 3.0 |
| WORK COMP | 0.0 | 0.0 | 0.0 | 0.0 | 0.6 | 0.6 | 0.6 | 0.4 | 0.4 | 0.7 | 0.6 | 0.7 | 0.6 | 0.4 |
| SELF PAY | 15.7 | 16.8 | 16.9 | 17.7 | 21.4 | 19.6 | 21.5 | 17.8 | 16.9 | 17.2 | 16.5 | 15.0 | 14.2 | 17.5 |
| TOTAL DAYS | 51.2 | 50.6 | 52.8 | 55.5 | 68.7 | 71.1 | 73.7 | 58.5 | 60.4 | 57.7 | 55.4 | 55.4 | 52.0 | 58.7 |

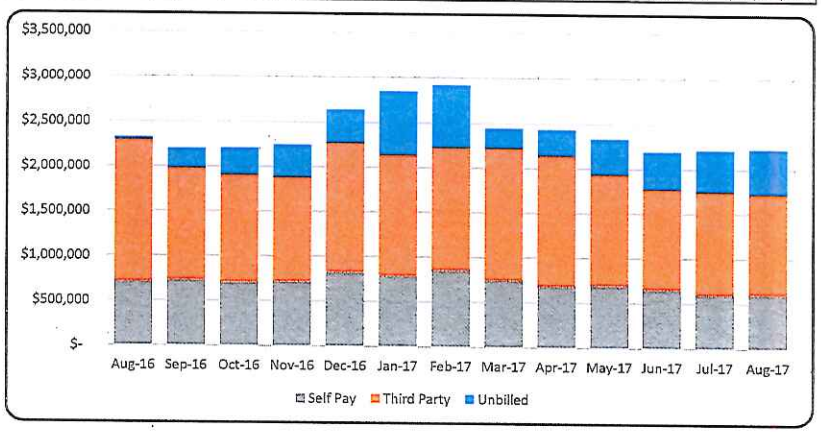



## AR Balance

| PAYER | Aug-16 | Sep-16 | Oct-16 | Nov-16 | Dec-16 | Jan-17 | Feb-17 | Mar-17 | Apr-17 | May-17 | Jun-17 | Jul-17 | Aug-17 | 13 Month Average |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| MEDICARE | $ 759,147 | $ 710,374 | $ 745,129 | $ 698,387 | $ 980,277 | $ 1,171,605 | $ 1,235,875 | $ 836,753 | $ 832,533 | $ 728,645 | $ 669,157 | $ 701,362 | $ 623,770 | $ 822,540 |
| MEDICAID | $ 365,419 | $ 256,708 | $ 290,527 | $ 295,120 | $ 344,960 | $ 416,519 | $ 479,020 | $ 457,452 | $ 545,656 | $ 443,540 | $ 397,655 | $ 366,503 | $ 440,839 | $ 392,301 |
| COMMERCIAL | $ 357,846 | $ 367,280 | $ 368,932 | $ 343,882 | $ 304,399 | $ 273,168 | $ 239,944 | $ 297,930 | $ 273,002 | $ 326,240 | $ 362,094 | $ 388,283 | $ 420,608 | $ 332,585 |
| BLUES | $ 130,930 | $ 134,480 | $ 97,895 | $ 192,173 | $ 161,580 | $ 176,859 | $ 87,333 | $ 92,150 | $ 84,326 | $ 112,528 | $ 88,976 | $ 130,096 | $ 106,159 | $ 122,730 |
| SELF PAY | $ 712,107 | $ 730,921 | $ 704,768 | $ 717,996 | $ 821,829 | $ 785,494 | $ 851,459 | $ 744,520 | $ 681,076 | $ 694,917 | $ 654,722 | $ 597,270 | $ 606,323 | $ 715,723 |
| TOTAL | $ 2,325,449 | $ 2,199,763 | $ 2,207,251 | $ 2,247,558 | $ 2,637,654 | $ 2,850,516 | $ 2,916,167 | $ 2,445,002 | $ 2,434,020 | $ 2,333,355 | $ 2,194,672 | $ 2,210,944 | $ 2,224,196 | $ 2,402,042 |





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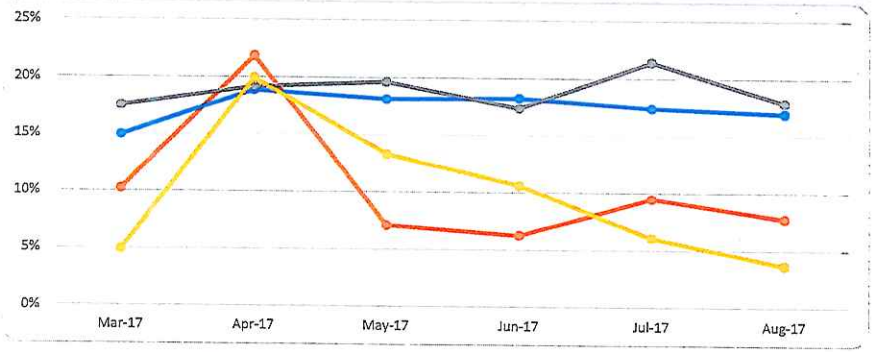
# ACCOUNTS RECEIVABLE AGING

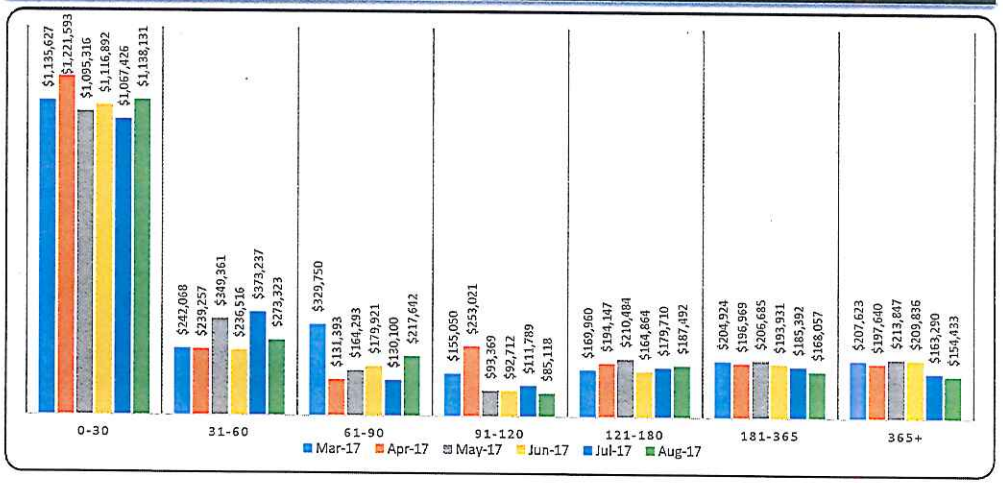
| | 0-30 Days | | 31-60 Days | | 61-90 Days | | 91-120 Days | | 121-180 Days | | 181-365 Days | | 366+ Days | | Grand Totals | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | # Acts | $ | # Acts | $ | # Acts | $ | # Acts | $ | # Acts | $ | # Acts | $ | # Acts | $ | # Acts | $ |
| **MEDICARE** | | | | | | | | | | | | | | | | |
| Non-Credit | 571 | $ 491,734 | 60 | $ 42,360 | 63 | $ 43,863 | 12 | $ 14,358 | 22 | $ 21,111 | 18 | $ 10,694 | 3 | $ 2,164 | 749 | $ 626,284 |
| Credit | 1 | $ (98) | 1 | $ (185) | 2 | $ (1,746) | 1 | $ (184) | 2 | $ (301) | 0 | $ - | 0 | $ - | 7 | $ (2,514) |
| TOTAL | 572 | $ 491,636 | 61 | $ 42,175 | 65 | $ 42,117 | 13 | $ 14,174 | 24 | $ 20,810 | 18 | $ 10,694 | 3 | $ 2,164 | 756 | $ 623,770 |
| **MEDICAID** | | | | | | | | | | | | | | | | |
| Non-Credit | 314 | $ 284,604 | 57 | $ 39,934 | 20 | $ 50,088 | 14 | $ 4,805 | 15 | $ 18,160 | 36 | $ 44,811 | 13 | $ 8,490 | 469 | $ 450,892 |
| Credit | 2 | $ (1,695) | 1 | $ (10) | 2 | $ (3,875) | 3 | $ (181) | 6 | $ (3,905) | 1 | $ (387) | 0 | $ - | 15 | $ (10,053) |
| TOTAL | 316 | $ 282,909 | 58 | $ 39,924 | 22 | $ 46,213 | 17 | $ 4,624 | 21 | $ 14,255 | 37 | $ 44,424 | 13 | $ 8,490 | 484 | $ 440,839 |
| **COMMERCIAL** | | | | | | | | | | | | | | | | |
| Non-Credit | 311 | $ 179,698 | 198 | $ 121,507 | 51 | $ 48,284 | 20 | $ 7,842 | 32 | $ 54,586 | 52 | $ 13,263 | 2 | $ 279 | 666 | $ 425,459 |
| Credit | 1 | $ (295) | 5 | $ (250) | 2 | $ (181) | 3 | $ (759) | 5 | $ (606) | 8 | $ (341) | 3 | $ (2,419) | 27 | $ (4,851) |
| TOTAL | 312 | $ 179,403 | 203 | $ 121,257 | 53 | $ 48,103 | 23 | $ 7,083 | 37 | $ 53,980 | 60 | $ 12,922 | 5 | $ (2,140) | 693 | $ 420,608 |
| **BLUES** | | | | | | | | | | | | | | | | |
| Non-Credit | 109 | $ 87,684 | 27 | $ 6,324 | 11 | $ 10,691 | 6 | $ 1,647 | 1 | $ 820 | 7 | $ 1,070 | 3 | $ 441 | 164 | $ 108,677 |
| Credit | 7 | $ (200) | 2 | $ (164) | 1 | $ (1,762) | 2 | $ (277) | 0 | $ - | 1 | $ (81) | 1 | $ (34) | 14 | $ (2,518) |
| TOTAL | 116 | $ 87,484 | 29 | $ 6,160 | 12 | $ 8,929 | 8 | $ 1,370 | 1 | $ 820 | 8 | $ 989 | 4 | $ 407 | 178 | $ 106,159 |
| **SELF PAY** | | | | | | | | | | | | | | | | |
| Non-Credit | 184 | $ 74,521 | 253 | $ 63,371 | 242 | $ 72,185 | 205 | $ 57,438 | 287 | $ 97,780 | 455 | $ 99,049 | 608 | $ 145,702 | 2234 | $ 610,046 |
| Credit | 6 | $ (2,189) | 2 | $ (118) | 3 | $ (1,004) | 3 | $ (48) | 2 | $ (153) | 1 | $ (21) | 1 | $ (190) | 18 | $ (3,723) |
| TOTAL | 190 | $ 72,332 | 255 | $ 63,253 | 245 | $ 71,181 | 208 | $ 57,390 | 289 | $ 97,627 | 456 | $ 99,028 | 609 | $ 145,512 | 2252 | $ 606,323 |
| **ACCOUNTS RECEIVABLE** | | | | | | | | | | | | | | | | |
| Non-Credit | 1531 | $ 1,145,268 | 597 | $ 274,050 | 390 | $ 226,210 | 258 | $ 86,567 | 357 | $ 192,457 | 568 | $ 168,887 | 629 | $ 157,076 | 4330 | $ 2,250,515 |
| Credit | 19 | $ (7,137) | 11 | $ (727) | 10 | $ (8,568) | 12 | $ (1,449) | 15 | $ (4,965) | 11 | $ (830) | 5 | $ (2,643) | 83 | $ (26,319) |
| GRAND TOTAL | 1550 | $ 1,138,131 | 608 | $ 273,323 | 400 | $ 217,642 | 270 | $ 85,118 | 372 | $ 187,492 | 579 | $ 168,057 | 634 | $ 154,433 | 4413 | $ 2,224,196 |

## Aged Over 90 Days Trending (excluding Credits)




| | Mar-17 | Apr-17 | May-17 | Jun-17 | Jul-17 | Aug-17 |
|---|---|---|---|---|---|---|
| Medicare | 10.2% | 21.8% | 7.0% | 6.2% | 9.4% | 7.7% |
| Medicaid | 14.9% | 18.8% | 18.1% | 18.2% | 17.4% | 16.9% |
| Commercial | 17.5% | 19.1% | 19.6% | 17.3% | 21.4% | 17.9% |
| Blues | 4.8% | 19.9% | 13.2% | 10.6% | 6.0% | 3.7% |

## 6 Month Aging





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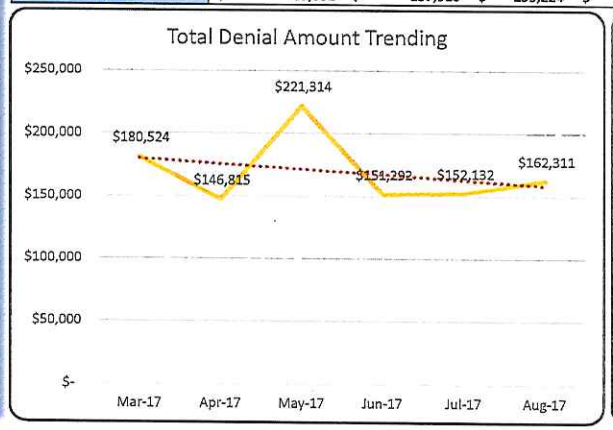
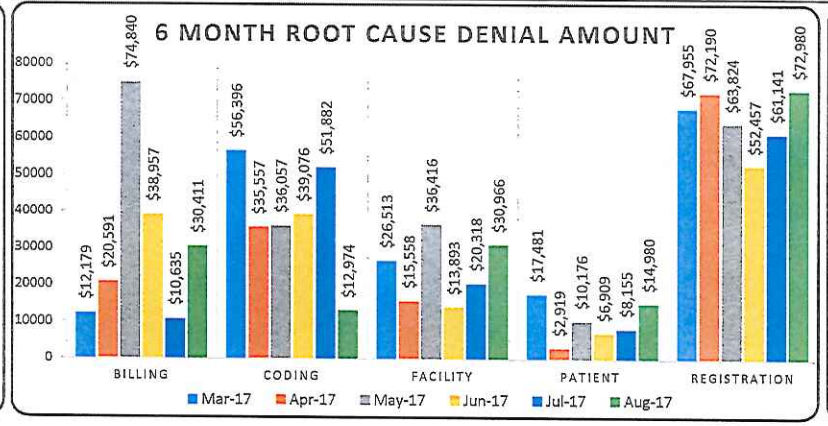
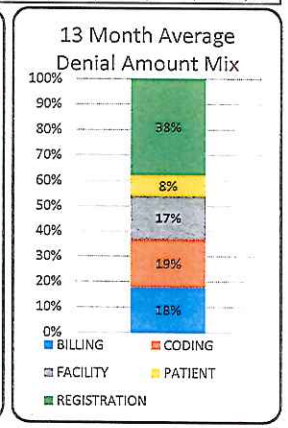
# DENIAL MANAGEMENT

## Denial Amount

| AMOUNT | Aug-16 | Sep-16 | Oct-16 | Nov-16 | Dec-16 | Jan-17 | Feb-17 | Mar-17 | Apr-17 | May-17 | Jun-17 | Jul-17 | Aug-17 | 13 Month Average |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| BILLING | $ 19,304 | $ 19,906 | $ 24,112 | $ 4,188 | $ 5,181 | $ 30,048 | $ 74,170 | $ 12,179 | $ 20,591 | $ 74,840 | $ 38,957 | $ 10,635 | $ 30,411 | $ 28,040 |
| CODING | $ 4,891 | $ 15,792 | $ 43,647 | $ 26,179 | $ 8,581 | $ 33,127 | $ 27,089 | $ 56,396 | $ 35,557 | $ 36,057 | $ 39,076 | $ 51,882 | $ 12,974 | $ 30,096 |
| FACILITY | $ 6,804 | $ 16,118 | $ 124,332 | $ 19,636 | $ 18,603 | $ 21,314 | $ 7,213 | $ 26,513 | $ 15,558 | $ 36,416 | $ 13,893 | $ 20,318 | $ 30,966 | $ 27,514 |
| PATIENT | $ 25,485 | $ 18,340 | $ 21,679 | $ 7,989 | $ 15,603 | $ 9,868 | $ 8,912 | $ 17,481 | $ 2,919 | $ 10,176 | $ 6,909 | $ 8,155 | $ 14,980 | $ 12,961 |
| REGISTRATION | $ 32,518 | $ 67,760 | $ 45,454 | $ 44,884 | $ 57,687 | $ 84,595 | $ 58,601 | $ 67,955 | $ 72,190 | $ 63,824 | $ 52,457 | $ 61,141 | $ 72,980 | $ 60,157 |
| TOTAL | $ 89,002 | $ 137,916 | $ 259,224 | $ 102,875 | $ 105,655 | $ 178,951 | $ 175,985 | $ 180,524 | $ 146,815 | $ 221,314 | $ 151,292 | $ 152,132 | $ 162,311 | $ 158,769 |

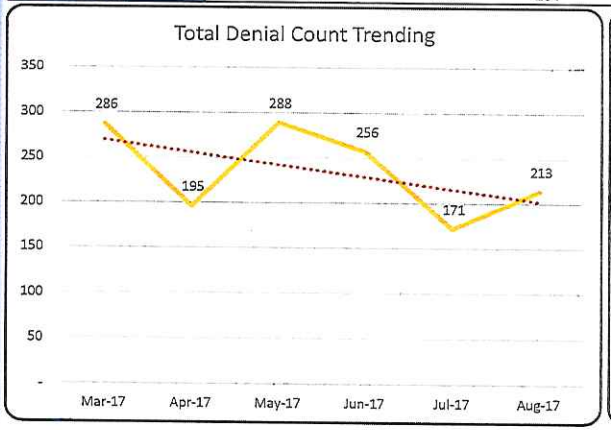


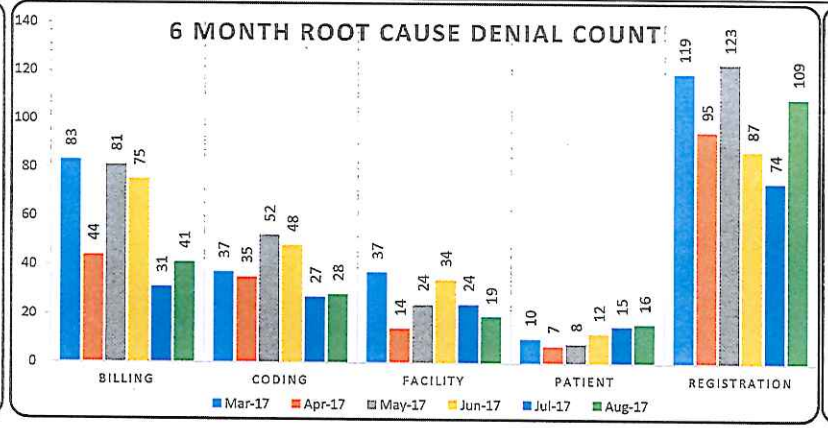



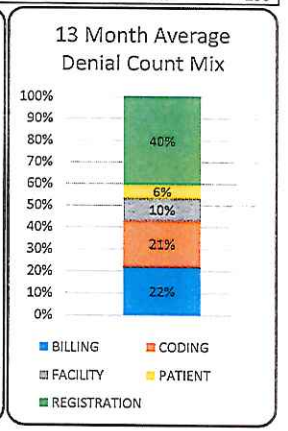




## Denial Count

| COUNT | Aug-16 | Sep-16 | Oct-16 | Nov-16 | Dec-16 | Jan-17 | Feb-17 | Mar-17 | Apr-17 | May-17 | Jun-17 | Jul-17 | Aug-17 | 13 Month Average |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| BILLING | 31 | 26 | 27 | 18 | 19 | 52 | 54 | 83 | 44 | 81 | 75 | 31 | 41 | 45 |
| CODING | 23 | 32 | 135 | 49 | 28 | 39 | 34 | 37 | 35 | 52 | 48 | 27 | 28 | 44 |
| FACILITY | 7 | 7 | 33 | 17 | 22 | 21 | 19 | 37 | 14 | 24 | 34 | 24 | 19 | 21 |
| PATIENT | 16 | 21 | 18 | 9 | 12 | 9 | 15 | 10 | 7 | 8 | 12 | 15 | 16 | 13 |
| REGISTRATION | 60 | 58 | 51 | 90 | 70 | 72 | 76 | 119 | 95 | 123 | 87 | 74 | 109 | 83 |
| TOTAL | 137 | 144 | 264 | 183 | 151 | 193 | 198 | 286 | 195 | 288 | 256 | 171 | 213 | 206 |





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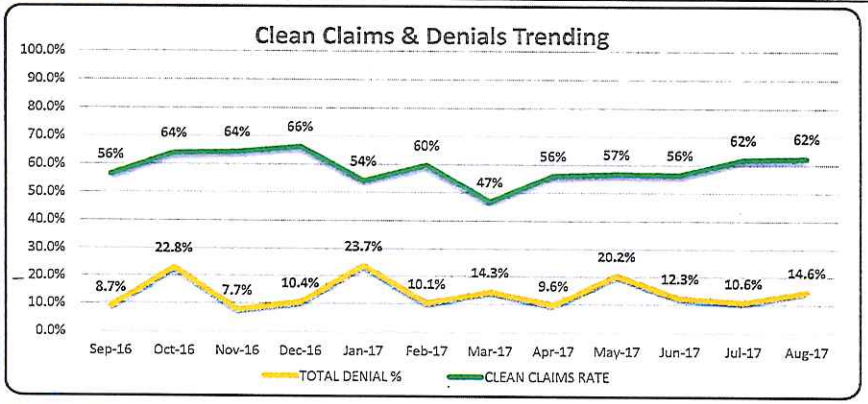
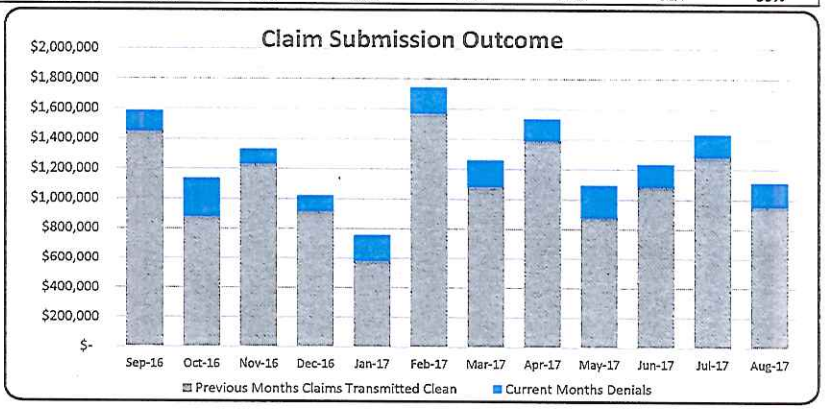
# CLAIM SUBMIT EFFICIENCY & DENIAL RESOLUTION

## Denial & Clean Claim Trending

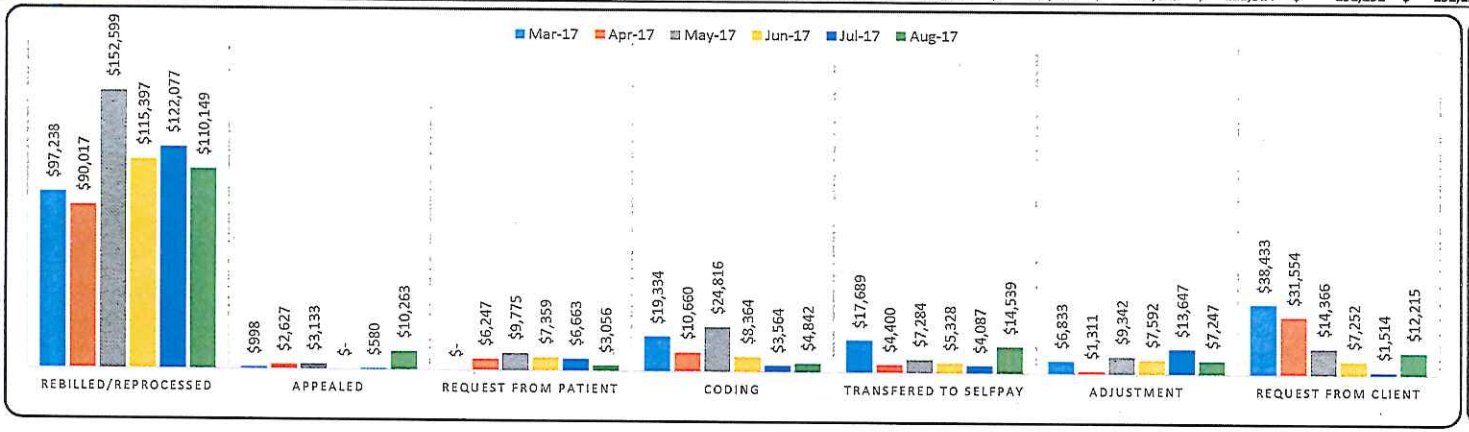
| | Aug-16 | Sep-16 | Oct-16 | Nov-16 | Dec-16 | Jan-17 | Feb-17 | Mar-17 | Apr-17 | May-17 | Jun-17 | Jul-17 | Aug-17 | 13 Month Average |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| DENIAL AMOUNT | $ 89,002 | $ 137,916 | $ 259,224 | $ 102,875 | $ 105,655 | $ 178,951 | $ 175,985 | $ 180,524 | $ 146,815 | $ 221,314 | $ 151,292 | $ 152,132 | $ 162,311 | $ 158,769 |
| PREVIOUS MONTH'S TRANSMITTED CLAIMS | $ 1,280,261 | $ 1,583,850 | $ 1,134,603 | $ 1,330,546 | $ 1,018,484 | $ 754,357 | $ 1,739,962 | $ 1,258,010 | $ 1,530,661 | $ 1,093,067 | $ 1,231,831 | $ 1,431,495 | $ 1,111,797 | $ 1,269,148 |
| TOTAL DENIAL % | 7.0% | 8.7% | 22.8% | 7.7% | 10.4% | 23.7% | 10.1% | 14.3% | 9.6% | 20.2% | 12.3% | 10.6% | 14.6% | 13.2% |
| CLEAN CLAIMS RATE | 64% | 56% | 64% | 64% | 66% | 54% | 60% | 47% | 56% | 57% | 56% | 62% | 62% | 59% |

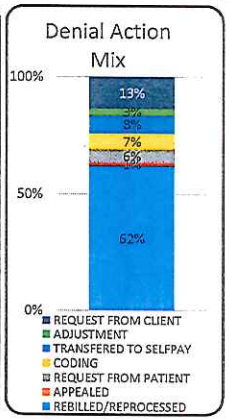



## Action Taken on Denials

| DENIAL ACTION | Aug-16 | Sep-16 | Oct-16 | Nov-16 | Dec-16 | Jan-17 | Feb-17 | Mar-17 | Apr-17 | May-17 | Jun-17 | Jul-17 | Aug-17 | 13 Month Average |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| REBILLED/REPROCESSED | $ 48,516 | $ 90,539 | $ 92,732 | $ 62,905 | $ 62,302 | $ 118,102 | $ 122,778 | $ 97,238 | $ 90,017 | $ 152,599 | $ 115,397 | $ 122,077 | $ 110,149 | $ 98,873 |
| APPEALED | $ 168 | $ 2,185 | $ 951 | $ 1,161 | $ 2,994 | $ 1,949 | $ 1,024 | $ 998 | $ 2,627 | $ 3,133 | $ - | $ 580 | $ 10,263 | $ 2,156 |
| REQUEST FROM PATIENT | $ 23,045 | $ 6,039 | $ 25,553 | $ 1,084 | $ 15,130 | $ 8,931 | $ 3,558 | $ - | $ 6,247 | $ 9,775 | $ 7,359 | $ 6,663 | $ 3,056 | $ 8,957 |
| CODING | $ 2,280 | $ 9,613 | $ 5,741 | $ 4,892 | $ 9,118 | $ 23,669 | $ 12,313 | $ 19,334 | $ 10,660 | $ 24,816 | $ 8,364 | $ 3,564 | $ 4,842 | $ 10,708 |
| TRANSFERED TO SELFPAY | $ 10,224 | $ 23,198 | $ 8,414 | $ 10,737 | $ 11,367 | $ 13,743 | $ 29,575 | $ 17,689 | $ 4,400 | $ 7,284 | $ 5,328 | $ 4,087 | $ 14,539 | $ 12,353 |
| ADJUSTMENT | $ 884 | $ 1,408 | $ 3,390 | $ 4,109 | $ 1,075 | $ 2,366 | $ 1,007 | $ 6,833 | $ 1,311 | $ 9,342 | $ 7,592 | $ 13,647 | $ 7,247 | $ 4,632 |
| REQUEST FROM CLIENT | $ 3,886 | $ 4,934 | $ 122,443 | $ 17,989 | $ 3,669 | $ 10,193 | $ 5,730 | $ 38,433 | $ 31,554 | $ 14,366 | $ 7,252 | $ 1,514 | $ 12,215 | $ 21,090 |
| TOTAL | $ 89,002 | $ 137,916 | $ 259,224 | $ 102,875 | $ 105,655 | $ 178,951 | $ 175,985 | $ 180,524 | $ 146,815 | $ 221,314 | $ 151,292 | $ 152,132 | $ 162,311 | $ 158,769 |





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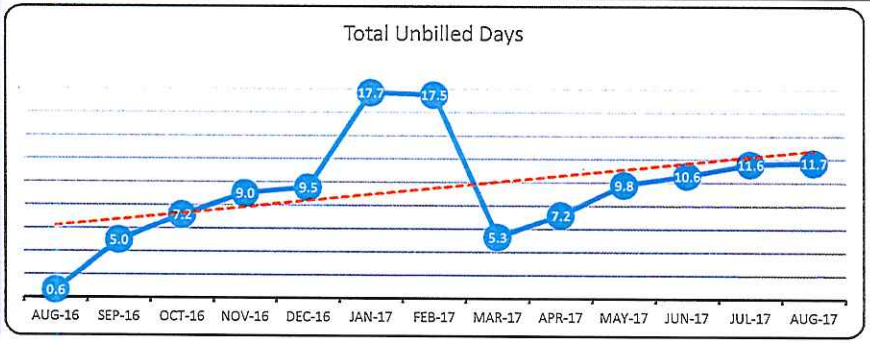
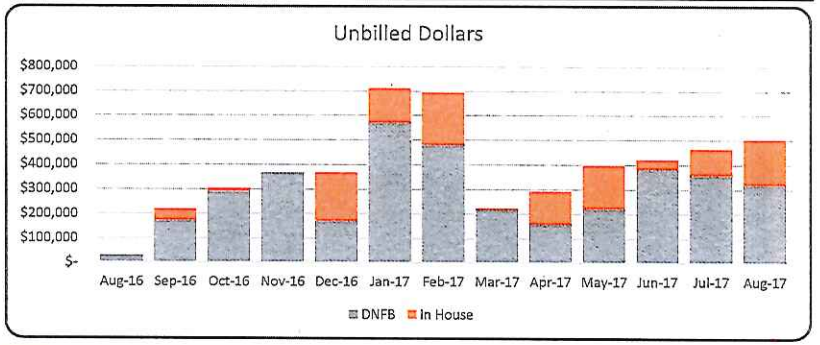
# UNBILLED & INVENTORY

## Unbilled

| | Aug-16 | Sep-16 | Oct-16 | Nov-16 | Dec-16 | Jan-17 | Feb-17 | Mar-17 | Apr-17 | May-17 | Jun-17 | Jul-17 | Aug-17 | 13 Month Average |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| In House | $ - | $ 45,897 | $ 10,059 | $ - | $ 197,308 | $ 142,013 | $ 214,985 | $ 4,846 | $ 131,340 | $ 174,856 | $ 37,629 | $ 105,995 | $ 182,948 | $ 95,990 |
| DNFB | $ 28,975 | $ 172,057 | $ 290,260 | $ 365,853 | $ 168,956 | $ 568,667 | $ 477,773 | $ 217,402 | $ 158,363 | $ 221,495 | $ 381,799 | $ 356,318 | $ 318,362 | $ 286,637 |
| **Total Unbilled** | **$ 28,975** | **$ 217,954** | **$ 300,319** | **$ 365,853** | **$ 366,264** | **$ 710,681** | **$ 692,758** | **$ 222,247** | **$ 289,703** | **$ 396,351** | **$ 419,428** | **$ 462,313** | **$ 501,310** | **$ 382,628** |
| Unbilled Days | 0.6 | 5.0 | 7.2 | 9.0 | 9.5 | 17.7 | 17.5 | 5.3 | 7.2 | 9.8 | 10.6 | 11.6 | 11.7 | 9.5 |

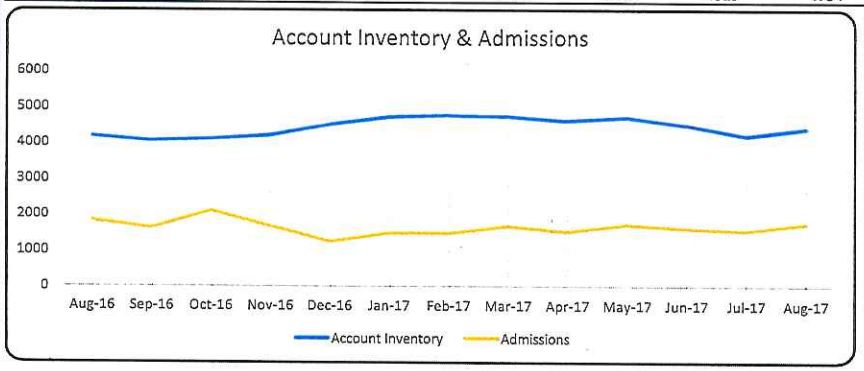


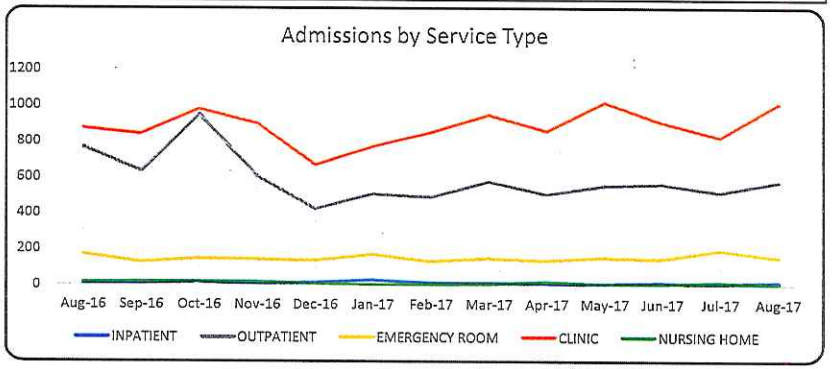




## Admissions & Account Inventory

| ADMISSIONS | Aug-16 | Sep-16 | Oct-16 | Nov-16 | Dec-16 | Jan-17 | Feb-17 | Mar-17 | Apr-17 | May-17 | Jun-17 | Jul-17 | Aug-17 | 13 Month Average |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| INPATIENT | 6 | 5 | 14 | 7 | 10 | 25 | 9 | 8 | 8 | 4 | 9 | 7 | 12 | 10 |
| OUTPATIENT | 768 | 634 | 948 | 604 | 422 | 508 | 489 | 577 | 505 | 554 | 563 | 516 | 573 | 589 |
| EMERGENCY ROOM | 169 | 124 | 145 | 141 | 135 | 168 | 129 | 147 | 135 | 152 | 144 | 192 | 153 | 149 |
| CLINIC | 872 | 840 | 978 | 897 | 668 | 770 | 849 | 946 | 857 | 1,016 | 905 | 824 | 1,010 | 879 |
| NURSING HOME | 11 | 14 | 15 | 15 | 6 | 2 | 0 | 2 | 16 | 4 | 4 | 12 | 4 | 8 |
| TOTAL | 1,826 | 1,617 | 2,100 | 1,664 | 1,241 | 1,473 | 1,476 | 1,680 | 1,521 | 1,730 | 1,625 | 1,551 | 1,752 | 1635 |

| ACCOUNT INVENTORY | Aug-16 | Sep-16 | Oct-16 | Nov-16 | Dec-16 | Jan-17 | Feb-17 | Mar-17 | Apr-17 | May-17 | Jun-17 | Jul-17 | Aug-17 | 13 Month Average |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| MEDICARE | 696 | 725 | 781 | 701 | 809 | 993 | 845 | 818 | 793 | 801 | 785 | 630 | 756 | 779 |
| MEDICAID | 432 | 361 | 398 | 436 | 486 | 551 | 693 | 686 | 718 | 672 | 555 | 438 | 484 | 532 |
| COMMERCIAL | 645 | 564 | 630 | 716 | 517 | 607 | 605 | 654 | 666 | 680 | 785 | 661 | 693 | 648 |
| BLUES | 226 | 232 | 232 | 270 | 305 | 295 | 244 | 242 | 199 | 256 | 203 | 202 | 178 | 237 |
| SELF PAY | 2,198 | 2,185 | 2,075 | 2,096 | 2,362 | 2,247 | 2,351 | 2,325 | 2,219 | 2,268 | 2,138 | 2,246 | 2,252 | 2228 |
| TOTAL | 4197 | 4067 | 4116 | 4219 | 4519 | 4734 | 4777 | 4753 | 4634 | 4729 | 4510 | 4219 | 4413 | 4453 |





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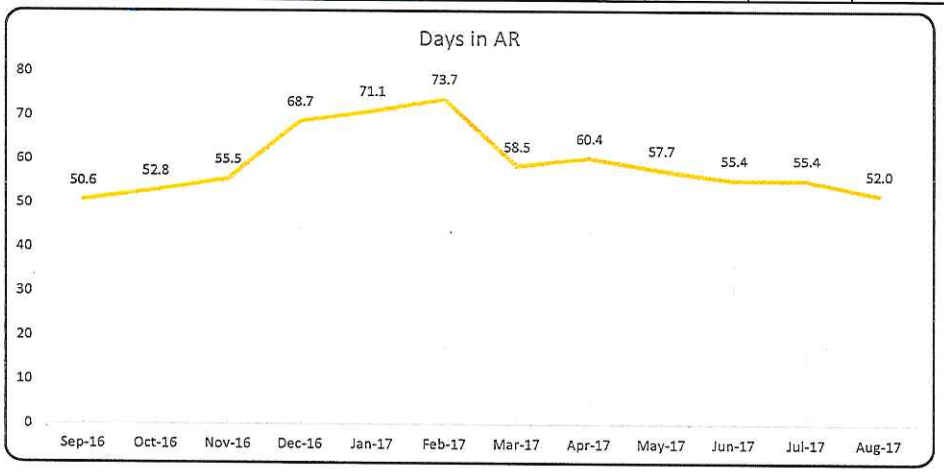
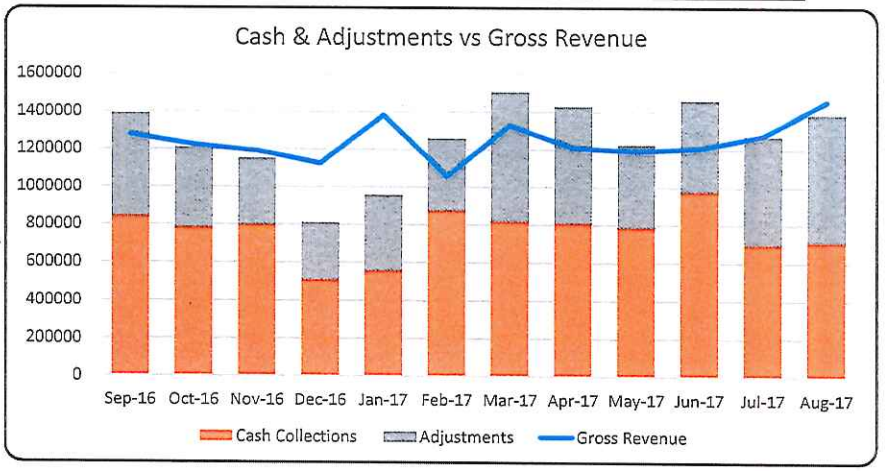
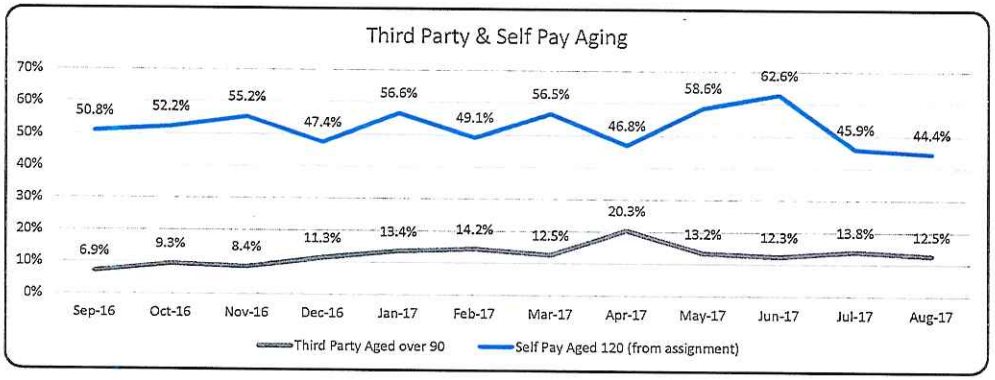
# FERRY COUNTY PUBLIC HOSPITAL DISTRICT

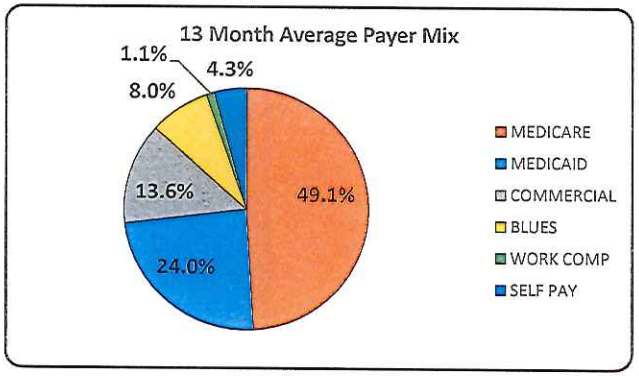
## Executive Dashboard

| | TARGET | Sep-16 | Oct-16 | Nov-16 | Dec-16 | Jan-17 | Feb-17 | Mar-17 | Apr-17 | May-17 | Jun-17 | Jul-17 | Aug-17 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Days in AR | 52.0 | 50.6 | 52.8 | 55.5 | 68.7 | 71.1 | 73.7 | 58.5 | 60.4 | 57.7 | 55.4 | 55.4 | 52.0 |
| Gross AR | | 2,199,763 | 2,207,251 | 2,247,558 | 2,637,654 | 2,850,516 | 2,916,167 | 2,445,002 | 2,434,020 | 2,333,355 | 2,194,672 | 2,210,944 | 2,224,196 |
| Gross Revenue | | 1,274,784 | 1,221,666 | 1,188,087 | 1,123,592 | 1,379,328 | 1,056,158 | 1,325,503 | 1,206,806 | 1,190,524 | 1,205,999 | 1,272,372 | 1,455,746 |
| Cash Collections | | 838,987 | 780,795 | 795,010 | 504,467 | 554,784 | 870,055 | 814,692 | 805,370 | 784,712 | 975,440 | 692,365 | 706,830 |
| Adjustments | | 550,764 | 427,824 | 355,878 | 305,212 | 402,374 | 386,860 | 689,942 | 622,832 | 440,713 | 484,477 | 576,615 | 677,549 |
| Collection % | | 60.4% | 64.6% | 69.1% | 62.3% | 58.0% | 69.2% | 54.1% | 56.4% | 64.0% | 66.8% | 54.6% | 51.1% |
| Late Charges | < 1% | 0.1% | 0.4% | 0.5% | 0.8% | 3.6% | 1.8% | 0.5% | 1.0% | 1.3% | 0.7% | 0.8% | 0.5% |
| Bad Debt | < 3% | 2.7% | 2.4% | 2.8% | 0.0% | 4.1% | 1.4% | 4.9% | 4.8% | 2.1% | 4.5% | 5.7% | 4.0% |
| Charity Care | < 3% | 0.4% | 1.7% | 0.4% | 0.1% | 0.0% | 1.0% | 1.7% | 1.9% | 0.3% | 0.7% | 3.3% | 0.9% |
| Third Party Aged over 90 | < 17% | 6.9% | 9.3% | 8.4% | 11.3% | 13.4% | 14.2% | 12.5% | 20.3% | 13.2% | 12.3% | 13.8% | 12.5% |
| Self Pay Aged 120 (from assignment) | < 25% | 50.8% | 52.2% | 55.2% | 47.4% | 56.6% | 49.1% | 56.5% | 46.8% | 58.6% | 62.6% | 45.9% | 44.4% |





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**TO:** Ferry County Public Hospital District #1 Board of Commissioners MEETING DATE: September 26, 2017

**FROM: Aaron Edwards, CEO**

**Subject:** CEO Report

| As of September 21, 2017 | |
|---|---|
| **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.<br>• All block schedule contracts are signed and we have three shifts complete with no major issues. Bylaws are almost completely amended in necessary areas.<br>• Had a good interview with a potential clinic ARNP who would like to come but is looking at options for her spouse.<br>• We have a former clinic provider possibly interested in coming back (they were in good standing upon departure and we would be happy to have them come back).<br>• Will be posting a COO/CFO position pending significant completion and understanding of the 2018 budget.<br>• Meeting with CEO of Mt. Carmel on 9/22 to discuss the possibly hosting 3rd year med students in our hospital/ED. |
| **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.<br>• Healthland has now come twice over the past 30 days to work towards making improvements with our EMR and training of our people.<br>• The DES is working diligently to resolve our heating issues with Hermanson and Apollo. Our local State Representatives (led by Shelly Short) have been very helpful in moving this process forward towards resolve. Hope to have a significantly finalized solution in the next week.<br>• A completed disaster plan is now on my desk for review and approval. |
| **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.<br>• Commissioner Iverson attended the WHRAP meeting in my place on 9/12. It appears we will be receiving a small amount of funding for care coordination and behavioral health 2018-2019 from the HCA.<br>• Meeting for final preparation for the October Region 9 disaster drills at Mt. Carmel on 9/22. |
| **Financial** | To be financially viable, to support advancing the mission and vision. To be operationally efficient. To offer value to payer and consumers.<br>• Attending Wipfli's financial training the week of 9/11 (centered on cost the cost report and financial compliance).<br>• We will be undertaking a time study with our providers to remain compliant with CMS and more accurately complete our cost report.<br>• We continue to work with Healthland to develop reports that will help us better understand our revenue and expense.<br>• 2015 Fire Insurance claim and the B&O appeals are still pending.<br>• Beginning to prepare for the 2018 budget. |
| **Growth** | To be the healthcare provider choice for our community. To identify service growth areas. To market service programs to community and constituents.<br>• Continue to evaluate ancillary revenue opportunities with various outside vendors. |

- 340B set up is underway.
- Have reached out to Confluence and Mid Valley to find a possible visiting Ortho doc both have expressed interest. Confluence may be interested in offering various Cardiology services.
- Would like to begin an extensive bonus plan for clinic, ED/Hospital, and PT/OT to drive growth in 2018.