

BOARD OF COMMISSIONERS' MEETING

April 22, 2025 @ 10:30 AM in the old Outfitters Building and via Zoom https://us06web.zoom.us/j/89584329356?pwd=Y0dZT1VIdmNkV2JMZ09MRVROalZvQT09

Meeting ID: 895 8432 9356 (Audio Only)
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

Call to Order DiAnne Lundgren
Quorum Established DiAnne Lundgren
Review, Amend, Accept Agenda DiAnne Lundgren
Introduction of Board, District Employees, and Guests DiAnne Lundgren

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 a separate discussion is desired, that item will be removed from the consent agenda and placed on the regular business agenda.

Approval of Consent Agenda ACTION DiAnne Lundgren

- Minutes 04.01.25 Board Meeting
- Approval of Warrants
- Financial Write-Off Report
- Approval of Surplus Resolution 2025 #8

Correspondence DiAnne Lundgren

Public Comments DiAnne Lundgren

Environment of Care/Safety Update Adam Volluz

Compliance Report Spencer Hargett

Department Spotlight - Selection

CNO Report Zane Gibbons

COO Report Debbie DeCorde

CFO Report Lance Spindler

Medical Staff Report Silas Wiefelspuett, MD

CEO Reoport Emmett Schuster

Board of Commissioners 36 Klondike Rd, Republic, WA 99166 P. (509) 775-8242 F. (509) 775-3866 On-going Business

Project HOME

- Rural Resources Building
- Board Self-Assessment
- Public Comment Policy
- New Hire Orientation Schedule
 - 05/05 -
 - 05/19 -

Board Representative Reports

Finance

Quality Improvement

Compliance/Risk Management

Medical Staff

EMS

PFAC

Building Committee

Credentialing Committee

Ron Bacon/Sarah Krausse

DiAnne Lundgren/Nancy Giddings

DiAnne Lundgren

Ron Bacon/Sarah Krausse

DiAnne Lundgren/Susan Solomon-Hopkins

Nancy Giddings

Sarah Krausse/Ron Bacon

DiAnne Lundgren. Nancy Giddings DiAnne Lundgren/Nancy Giddings

Request for Re Appointment of Courtesy Medical Staff Privileges by Proxy for the following Integra Imaging

Provider(s):

Gruprett Dhillon, MD Oksana Prychyna, MD Tyson Finlinson, DO Paige Flett, MD David Thayer, MD Jace Hilton, DO Robert Frost, MD

Request for New Appointment of Courtesy Medical Staff Privileges by Proxy for the following Omnicure Inc Provider(s):

Jeremy Pamplin, MD Sanjay Subramanian, MD

• CEO Selection Committee

Sarah Krausse/Susan Solomon-Hopkins

New Business

- Tort Agent Resolution 2025 #6
- Public Records Resolution 2025 #7

Executive Session(s)

 Performance of a Public Employee – Pursuant to RCW §42.30.110(1)(g) DiAnne Lundgren

 Quality Improvement Committee Report – Pursuant to RCW §42.30.110(1)(o)

Open Session - Action, if applicable regarding executive session

Adjournment

DiAnne Lundgren

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.

The next regularly scheduled meeting is May 27, 2025 @ 10:30 am in the HUB Conference Room



BOARD OF COMMISSIONERS' MEETING March 1, 2025

CALL TO ORDER: Board Chair DiAnne Lundgren called the meeting of the Board of Commissioners to order at 10:31 a.m., on February 25, 2025 in the HUB and via Zoom.

Commissioners in attendance were DiAnne Lundgren, Nancy Giddings, Sarah Krausse, Susan Solomon-Hopkins and Ron Bacon.

Emmett Schuster, Interim CEO; Zane Gibbons, CNO; Amber Gangon, Executive Coordinator; Adam Volluz, Facilities Manager; Melinda Michaels, Revenue Cycle Manager, Rosh Moore, Patient Access Supervisor; and Colton Myers, Care Coordinator/MIH Supervisor were also present.

Zoom participants: Spencer Hargett, Compliance Officer; Debbie DeCorde, COO; James Davidson, IT Manager; Wendy Johnson, RN; Mena Cassell, Controller; Lacy Sharbono, HR Coordinator; HarmonJI (Julie Twamley, ALF Manager); Matt Barnett, Patient Account Rep; Christina Beckwith, Lab Manager; and Mila Polevoy, Payroll/AP Clerk were present.

GUESTS: Carmen Peterson, Melissa Rose, Charlotte Coombes, Randy Sage, Debbie Almquist, Sarah Lawrence (Zoom), and Greg Sheffield (Zoom) were present.

QUORUM ESTABLISHED: A quorum was present.

REVIEW, AMEND, ACCEPT AGENDA: A motion was made by Giddings and was seconded by Krausse to approve the agenda as presented. The motion passed unanimously.

INTRODUCTION OF THE BOARD AND GUESTS: Introductions were made

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

CORRESPONDENCE: No correspondence was received.

PUBLIC COMMENTS: Public Comments were shared: Debbie Almquist shared her concern about issues with her mother's care after a fall. Carmen Peterson asked about our current days cash on hand. Giddings responded that today the District has 23 days cash on hand. Charlotte Coombes asked if anyone had followed up with the Ultrasonographer who resigned. She also shared that she believed we were out of compliance with the Open Public Meetings Act and that anything with the building of the new facility should be open to the public. She also asked what would happen to the MRI if the building did not move forward. Randy Sage stated that he was at the meeting simply to observe. Melissa Rose shared information about her family's care and issues with our referral process. She also asked about the Outfitters building lease and if we would be renewing it after the May 31st termination date.

ENVIRONMENT OF CARE/ SAFETY UPDATE: Volluz gave his report: Alarms have been added to the front doors which is closed 5 pm - 8 am. Employees will need to enter the building through the emergency doors during those hours. This change should help alert staff at the nurses' station and prevent unknown access in and out

COMPLIANCE REPORT: Hargett gave his report: The committee met last Friday and discussed Policy and Procedure reviews, the creation of a Management of Portable Devices policy, review of any open HIPPA/Compliance Events and preparation of any updates coming out of the most recent legislative session.

DEPARTMENT SPOTLIGHT: Colton Myers, gave his MIH program report (see MIH handouts at www.fcphd.org). Waiting to find out if grant that will fund the program for four (4) additional years is secured. Short-term program goals are transportation and specialty medical services. Working closely with other state programs on creating a model that resembles Home Health Care or being able to take over the Certificate of Need (CON) for Ferry County.

Lundgren called for a break in session at 11:35 a.m. Open session resumed at 11:41 a.m.

Board of Commissioners 36 Klondike Rd, Republic, WA 99166 P. (509) 775-8242 F. (509) 775-3866 CNO: Gibbons gave his report: New beds on loan from the DOH have arrived and we were able to swap out 10 beds in LTC/NSS and then re-bed the Acute Care Unit so that we are now able to provide care at full capacity. We have 10 beds to store and the Facilities Manager will be reaching out to our local Emergency Management team to inquire if storage of the beds is possible there. Gibbons shared our Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) scores (see CNO slides in the board packet at www.fcphd.org). We are doing better than the state/benchmarks in some areas and definitely have areas for improvement. Gibbons shared that RN, Jamie Marin, has been promoted to Nurse Manager and that RN, Teresa D'Lerma begin her new position as Clinical Coordinator next week. Gibbons shared that his team is working with HR on staffing additional Temp RNs so that we have a pool of staff ready when we need coverage and utilizing the Rural Health Enterprise staffing agency to reduce staffing costs. He also shared that his team was working on updating their staffing plans and orientation so that they were more in-line with the staffing changes set to take effect July 1. Gibbons announced that the Omni-Cure Telehealth Intensivist services will go live 4/7. Gibbons shared that his team is working to improve marketing and utilization of our swing bed unit and he asked for board approval to add a RN Utilization Review position to take up the Care Coordination duties left open when the current staff member is promoted to MIH Supervisor and to assist with authorizations and referrals. (see the CNO slides in the board packet at www.fcphd.org for additional information)

A motion was made by Giddings and was seconded by Krausse to approve the addition of the RN Utilization Review position as presented by the CNO. The motion passed unanimously.

Lundgren called for a break in session at 12:03 a.m. Open session resumed at 12:25 p.m.

COO: DeCorde gave her report: DeCorde shared that the Radiology candidate they had originally decided to extend an offer to, declined to move forward in the process so the search is still on-going. Steve Bradshaw, Radiology Manager from Snoqualmie Hospital will be assisting with oversight until a manager is hired. Mr. Bradshaw was on-site March 17-18 and he checked in with the team, reviewed policies, looked at equipment and spoke with the CEO. DeCorde reported that Laboratory employee and community respiratory testing shows that t COVID and Flu testing show a decrease and a small spike in RSV cases. DeCorde notified the board of staffing changes at the Republic Drug Store. Elizabeth Monnin has moved into the HIM department to take over for a retiring staff member. This move will help gain valuable experience as she works through her healthcare administrative school program. The RDS welcomed Jen Duprie as a PRN Pharmacy Assistant who once trained, will be able to assist the store both in the pharmacy and retail areas. The drug store and hospital pharmacy are also working on cross-training pharmacists across both locations to allow for better balance when staff are out or on vacation. DeCorde also welcomed Teresa D'Lerma into her new role as Clinical Coordinator at the Republic Medical Clinic. For the HR department, DeCorde reported that staff licensing audits have been done and that there were four (4) renewals in April that they were monitoring to avoid any lapses. She also reported that the Shift differential issue had been resolved to the UFCWs satisfaction. DeCorde congratulated Julie Twamley on her promotion to ALF Administrator and shared that they had recently remodeled a couple of units, they had a full house of residents and the new Administrator and staff were working through annual assessments and updated paperwork in preparation for their yearly audit. (see the COO slides in the board packet at www.fcphd.org for additional information)

Interim CFO: Spindler gave his report: Spindler reported that the District ended February with 23.98 days cash on hand. He indicated there was a payer settlement coming which will add about five (5) days to that so we should be closer to 30 days. He stated the District is in a good position right now and hopes to improve that position once our Revenue Cycle Consultant, Nichole Hunt, is on-site and can help to improve processes. Spindler also reported that the billing office is re-billing \$750,000 in previously denied Long Term Care (LTC) claims as Extended Skill Nursing per DSHS. Spindler informed the board that he was holding our billing company, TruBridge/HRG to contract standards, and if they were unable to satisfy contractual obligations, that moving to another billing company is absolutely possible. He is currently meeting with other vendors as he works through the issues with TruBridge/HRG. Spindler requested board approval for a services rate increase of 9% in 2025. He shared that because the hospital had not adjusted its rates since before 2022, the 9% is a catch-up rate and that he would hope to see the District create a process for smaller annual increases to keep up with the yearly costs of services and supplies. (see the CFO slides in the board packet at www.fcphd.org)

A motion was made by Giddings and was seconded by Solomon-Hopkins to approve the hospital services rate increase of 9% as presented for 2025. The motion passed unanimously.

MEDICAL STAFF REPORT: No report was given by Chief of Staff, Dr. Weifelspuett.

CEO: CEO gave his report: Schuster reported that the CEO/CFO Taskforce had met and had reviewed all of the applicants for the CEO position so far received. They had it narrowed to eight (8) and would review any additional candidates received until the posting closes Friday, April 4, to find top three to present to the Board for their vetting process. Schuster notified the board that he is working with Compliance/Risk Consultant Spencer Hargett

and Amber Gangon on a process for public comments and once finalized would bring to the board for review. Schuster provided an update on Project HOME: The project continues to move forward at this point in Phase 1. Cardboard mock-ups will be assembled in the rented Outfitters building downtown which will allow for staff to view the area and suggest any changes they thing would make providing services more efficient. The mock-ups will be up until the lease expires at 11:59 pm May 31, 2025. Information is also being shared with the community via Facebook. Schuster shared with the board concerns from The Rural Collaborative that were expressed at the Northwest Rural Health Conference he recently attended in Spokane: Capital Funding – with grants and loans frozen, hospitals are worried about necessary projects and equipment needs, the need for increase Revenue Cycle education to keep up with the changes in healthcare billing, payers selling plans in areas with no contracted providers, and medical transport – this is big for us because Stevens and Okanogan counties will no longer come here to transport patients for us. We are working on setting up a program for our Nurses to receive EMT training so they can transport patients when needed. (see the CEO slides in the board packet at www.fcphd.org)

ON-GOING BUSINESS:

- Board QI: Board provided pizza to the IT department and it was very appreciated by the staff.
- Project HOME: The current Phase of the project ends in June and at that time, the financials should be
 clear and a decision made about continuing to move forward with the build or putting it on pause without
 losing any of the work done to date.
- Rural Resources Building: There was a discussion about signage for the building/campus and an Open House.
- Board Self-Assessment: The Board requested additional time and will add this to the agenda for the next meeting.
- New Hire Orientation Schedule:
 - o 04/07 Susan Solomon-Hopkins
 - o 04/21 DiAnne Lundgren

BOARD REPRESENTATIVE REPORTS:

- Finance: No concerns to report at this time. Krausse is excited for the Revenue Cycle Consultant to come on board and help clean up our billing processes so we can get more out of the door and hopefully increase our reimbursement.
- Quality Improvement: Giddings reported the next meeting is April 9th. Gibbons reported that the DOH trainer that was here for Trauma OB Training in March stated that inspectors are starting to directly ask board members about QI.
- Compliance/Risk Management: No concerns. Bacon reported that Hargett runs a great meeting with clear action items. Spindler reported his one assignment from the Committee was to update required Financials with the state. Krausse thanked Hargett for the Board Public Disclosure deadline reminders.
- Medical Staff: Solomon-Hopkins reported on the Demo with OmniCure telehealth Intensivists 4/7. Providers are excited for the new services. Gibbons shared that the initial intensivist services will be a huge assist when we are unable to transport patients. Gibbons will have the MIH referral process and available at the next meeting. Gibbons reported if the initial services go well, the next specialty could be orthopedics. Solomon-Hopkins shared that there is a new traveling OT at Republic Rehab who will also assist with rehab services in the hospital.
- EMS: Giddings was unable to attend the last meeting due to a scheduling conflict.
- **PFAC:** Gibbons reported that after the break between the recent staffing changes, the meetings will resume 4/14 and hope to continue to have 5-7 community members included with Gibbons, Rebecca Thompson and board representatives Krausse and Bacon.
- Building Committee: No concerns to report at this time. Mock-up construction is currently taking place
 at the Outfitters building and information has been shared with the community via Facebook.
- Credentialing Committee: No concerns.

A motion was made by Giddings and was seconded by Krausse to approve the request for Re-Appointment of Courtesy Medical Staff Privileges by Proxy for the following Integra Imaging Provider(s):

David Holznagel, MD David Keaton, MD Douglas Murrey, MD Logan Bebee, DO

Marc Bruce, MD James Buratto, MD Terry Chun, MD Patrick Davis, MD

Board of Commissioners 36 Klondike Rd, Republic, WA 99166 P. (509) 775-8242 F. (509) 775-3866 Seth Gillham, MD Eric Graham, MD David Holt, MD Ben LeCheminant, DO

Rupinder Penna, DO

The motion passed unanimously.

NEW BUSINESS:

TREASURER APPOINTMENT: A motion was made by Bacon and was seconded by Giddings to appoint Lance Spindler, Interim CFO, as Treasurer of the District. The motion passed unanimously.

COMMUNITY SPONSORSHIP: A motion was made by Krausse and was seconded by Bacon to approve an allowance of \$2250.00 for 2025 community event sponsorship use. The motion passed unanimously.

DISTRICT AUDITOR(S) APPOINTMENT: A motion was made by Krausse and was seconded by Solomon-Hopkins to appoint Lance Spindler, Interim CFO and Mena Cassell, Controller as auditors for the District. The motion passed unanimously.

MEETING DOCUMENTATION AND EMAIL CORRESPONDENCE: Krausse presented a draft Board Public Comment policy for review. The board will review the policy and it will be added for continued discussion during next month's meeting.

ORGANIZAITONAL UPDATES: Lundgren called for this topic to be discussed during Executive Session.

EXECUTIVE SESSION: The Chair called for an executive session Pursuant to RCW §42.30.110(1)(g)-Performance of a Public Employee at 2:15 p.m. The Chair requested thirty (30) minutes with open session to resume at 2:45 p.m. The CEO and CNO were invited to attend.

OPEN SESSION: Open session resumed at 2:45 p.m. No decisions were made and no actions taken.

ADJOURNMENT: As there was no further business, the meeting was adjourned at 2:46 p.m.

DiAnne Lundgren, Chair	Date	Nancy Giddings, Secretary	Date
Amber Gangon, Recording Secretary	Date		



RESOLUTION 2025 #8

A RESOLUTION OF THE FERRY COUNTY HEALTH BOARD OF COMMISSIONERS, REPUBLIC WASHINGTON, AUTHORIZING THE DISPOSAL OF SURPLUS SMALL EQUIPMENT AND SUPPLIES.

WHEREAS, the District purchased and/or was donated several pieces of small equipment and supplies several years ago for multiple uses in different departments.

WHEREAS, the small equipment and supplies listed on attached Exhibit A are no longer in use and are in poor shape or obsolete,

WHEREAS, Exhibit A list of items are no longer necessary for the District's use and it would be an inefficient use of resources to move or continue to store them,

THEREFORE, the Ferry County Health Commissioners hereby resolve the aforementioned small equipment and supplies listed on Exhibit A shall be deemed surplus and disposed of by the District Policy, at the discretion of the Plant Manager.

RESOLVED, this 22nd day of April 2025.

APPROVED at regular meeting of the Commissioners of Ferry County Health, Republic, Washington, this 22nd day of April 2025.

DiAnne Lundgren, Chair	Date	Sarah Krausse, Vice Chair	Date
Nancy Giddings, Secretary	Date	Ron Bacon, Commissioner	Date
Susan Solomon-Hopkins Commi	ssioner	Date	

Board of Commissioners

36 Klondike Rd, Republic, WA 99166 P. (509) 775-8242 F. (509) 775-3866

Asset Disposal Sheet Disposal of Surplus Property other than Real Estate (Policy 25.01.001 - Exhibit A)

DATE OF	DESCRIPTION (Model/Serial #/				
ACQUISITION	Quantity/Current Location)	REASON FOR DISPOSAL	DISPOSITION PROCESS	DISPOSAL TIMELINE	COMMENTS
2015	Dell Optiplex s/n GDBL5J1	Wore out	Dump/Recycle		Mature Dell Desktop
2015	Dell Optiplex s/n CDZM9F1	Wore out	Dump/Recycle		Mature Dell Desktop
2015	Dell Optiplex s/n 9G80CK1	Wore out	Dump/Recycle		Mature Dell Desktop
2015	Dell Optiplex s/n 5ZHM7M1	Wore out	Dump/Recycle		Mature Dell Desktop
2015	Dell Optiplex s/n 86Y9BK1	Wore out	Dump/Recycle		Mature Dell Desktop
2015	Dell Optiplex s/n 4Z2DN81	Wore out	Dump/Recycle		Mature Dell Desktop
2015	Dell optiplex s/n D58GDK1	Wore out	Dump/Recycle		Mature Dell Desktop
2015	Dell Optiplex s/n XXXXX6N	Wore out	Dump/Recycle		Mature Dell Desktop
2015	Dell Optiplex s/n BZZ3FK1	Wore out	Dump/Recycle		Mature Dell Desktop
2015	Dell Optiplex s/n 7CYCNH1	Wore out	Dump/Recycle		Mature Dell Desktop
2020	Dell Optiplex s/n J1G93M1	Busted	Dump/Recycle		Popped capacitors
Unknown	Hill-Rom P1600 SN F147AB6789	Broken	Dump/Recycle		Patiet bed. No parts available to fix.
Unknown	Hill-Rom P1600 SN F147AB6789	Broken	Dump/Recycle		Patiet bed. No parts available to fix.
Unknown	Hill-Rom P1600 SN F147AB6789	Replaced	Donated		Patiet bed. No parts available to fix.
Unknown	Hill-Rom P1600 SN F147AB6789	Replaced	Donated		Patiet bed. No parts available to fix.

Policy 25.01.001 Exhibit A Fiscal Services/Asset Mgmt Form

CNO Report

OmniCure- Our telehealth Intensivist service has gone live. All of our providers and our charge nurses have been trained in the service. Dr. Wiefelspuett used the service for the first time on 4/14 with success.

QI Committee- We made changes to the 2025 plan. We will be bringing managers back into the QI Committee to participate and work toward improved organizational quality. Julia has made contact with other collaborative hospitals that use Meditech. She gained valuable insight and tools that we can use with parts of Meditech we already pay to use. We need board approval of our new QI plan

Shift change- We implemented a shift change "huddle" for the entire nursing staff at 0600 and 1800 each day. This was a nurse driven process that will increase patient safety and continuity of care. With this new huddle we have also returned to bedside reporting that will involve the patient and their family. We went live with this on 4/14.

Workflow- We have educated our nursing staff and providers on the workload function in Meditech. The clinic has successfully used this function since the implementation of Meditech. The intent of this is to make sure everyone at the hospital is using this feature to increase communication between staff.

Outpatients- Our nurse manager Jamie is working through our outpatient workflow to close the lapses in documentation that lead to problems with billing and reimbursement.

Orientation to the nursing units- To meet the new state laws for staffing and orientation we have started the process of updating our orientation process. We will be building our orientations to be specific to each unit that someone will work instead of a one size fits all approach. Our traveling staff will also complete the same orientation.

Staffing Plans- To meet new staffing laws we are working on a new staffing workflow. Our charge nurses will be filling our staffing plans that will be posted at the nurse's station each shift. Each shift sheet will have a QR code that anyone can scan that will take us to our hospital staffing plan. The sheets will have the expected number of staff versus the actual number of staff for each shift. We will then track our staffing and our patient load to ensure that we meet the state required 80% of compliance. This will be tracked monthly.

Timecards- we have been actively working with staff on timecard education and breaks to meet the new laws. We have been focusing on break times and proper timecard use. We have made two major changes over the past month. We have given staff the power to make edits to their timecards with proper documentation. We have eliminated timecard rounding that was causing issues with actual hours worked.

Staffing- We currently have 2 NAC travelers and 4 nurse travelers. We will be losing two of our nurse travelers but have 3 new nurse travelers on the way. We have had our first applicants to our new Temp PRN positions.

Nurse transport- we met again with our county EMS department to continue the process of coming up with transportation and staffing alternatives. The desire is there by both the county and hospital to figure out a way to provide transportation services to our patients when no other transportation is available. Also, this plan is to use our local EMT's to come to the hospital and help during an emergency. Chelan is also working on a similar project.

Utilization RN- as of this report we are still waiting for the union to approve this new position.

CNO Roundtable- I will be attending the CNO roundtable on 4/15-4/16.

Community- The nursing department will help to represent the hospital will at the job fair on 4/24 and at the Conservation Fair on 4/26.

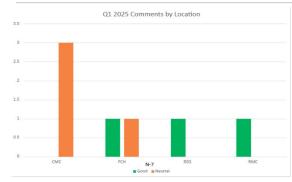
COO Report

Overall, Quarterly graphs and Monthly Dashboard

 UFCW 3000 updates – JDds being reviewed for approval and any movement on open issues.

Quarterly Comment Feedback

Comment Cards - Q1 2025



People that work here are awesome. Guy at front desk brought my paperwork to me because of my boot. Radiologist was awesome trying to not cause pain! Girl at front desk <u>went and got</u> me water, super sweet. - FCH

Please remind staff that politics/Trump don't belong at ED station. - FCH

Todd from radiology is amazing and extremely helpful. - FCH

Pleased with Matt Short and the care I am getting at our small medical Clinic. - RMC

More clinic days. - CMC

Ferry County Health

CMC = Curlew Medical Clinic CRC = Curlew Rehab Center FCH = Ferry County Hospital RDS = Republic Drug Store RMC = Republic Medical Clinic RRC = Republic Rehab Center

Ferry County Public Hospital District #1 March 31, 2025

Outpatient	and Ancillary Services	Jan	Feb	Mar	YTD	Target	YTD Target
11	Medical Clinic #Visits	839	806	871	2,516	10,338	2,585
12	PT/OT Visits	233	294	440	967	4,692	1,173
13	Imaging Exams	387	311	369	1,067	4,706	1,177
14	Lab # Billable Tests	2703	2691	2928	8,322	34,631	8,658
15	Drugstore Prescriptions Filled	4170	3864	3921	11,955	51,389	12,847

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%

DEPARTMENTAL DATA

<u>ALF</u>

Rm 2 is ready to clean for the new resident.

One resident is on hospice.

Staff are working on gardening ideas for the residents, many have been walking and starting to use electric chairs to exercise across the campus.

Staff are working on the IT classes, anticipate full completion soon.

<u>HR</u>

License Audit:

April: 2 employees had licenses due; reminded via Bamboo and Qliq and are now current. May: 8 employees have licenses due – the next due is May 9th, remainder are at EoM.

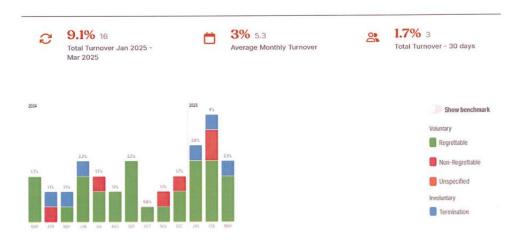
Total Employees: 176 **FCH** 157 **KH** 11 **RDS** 8 = 176

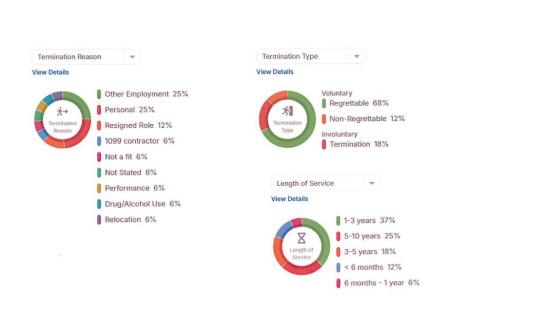




Employee Turnover

Dates 2025-01-01 - 2025-03-31

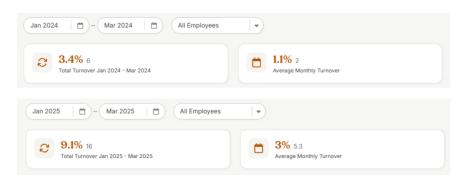




Exit Interview Data January 1, 2025 to March 31, 2025



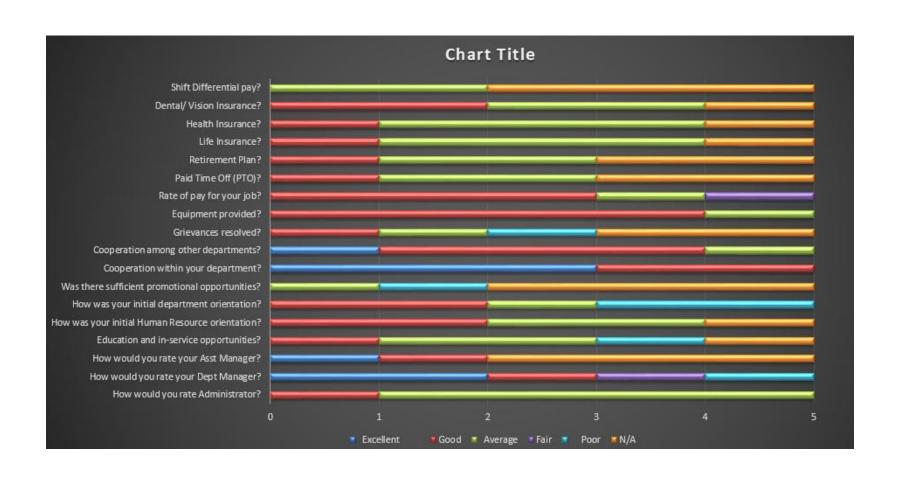
Exit Interview Data Q1 2024 compared to Q1 2025



Exit Interview Data Employee Turnover by department, reason and type Q1 2025



Exit Interview Data January 1, 2025 to March 31, 2025



Exit Interview Data January 1, 2025 to March 31, 2025



Laboratory

- We have seen a strong decline in Flu A cases in the month of March-we are down to 5% positivity. Flu B is now more common with 10% positivity. RSV is still circulating and is at 5% positivity.
- The lab staff are wrapping up yearly reviews as well as yearly competencies. This
 includes direct observation of all procedures performed in the lab, testing samples in a
 quiz like fashion (also called blind samples or blind testing), and a small paper quiz.
 Competencies are a regulatory requirement and they ensure that all lab staff are
 performing their duties safely, correctly, and accurately.
- Lab and nursing have collaborated to create a new procedure for therapeutic
 phlebotomy collections. Laboratory staff perform the collection and nursing staff perform
 a pre- and post-procedure assessment to make sure the patient can safely receive the
 procedure. Tools and an assessment were built in Meditech for ease of use and to
 ensure that all required documentation is captured. This will ensure our ability to collect
 revenue for offering this service to patients.
- Worked on position justification for mid-shift MLT. Strong case was made.

March Billable Tests: 2,928

Radiology

369 total exams, bone density 6, CT 101, MRI 34, US 52, XR 176. April 10th the physicist was here. He was pleased and deemed all equipment in good order.

Republic Drug Store

Staffing changes – recruiting for a Full Time Pharmacist. The position is posted.

CLARK	ORUG STO AVE WA 99166		F	Produ	ctivity	& Prof	fit Repo	ort		April 8	3, 2025 4:32 Pag
AC				otals			AWP 1	Totals			
		ACQ	Profit	GM	Total	AWP	Profit	GM	Total	Pat Pay	Ins Pay
Grand To	tals										
New	2016	108010.93	13873.12	11.38%	121884.05	403999.52	-282115.47	-231.46%	121884.05	21550.40	100333.65
Refill	1905	161680.43	13268.00	7.58%	174948.43	526784.05	-351835.62	-201.11%	174948.43	22862.20	152086.23
Total	3921	269691.36	27141.12	9.14%	296832.48	930783.57	-633951.09	-213.57%	296832.48	44412.60	252419.88

Republic and Curlew Medical and Therapy Clinics

Republic Medical Clinic

Statistics

- Total of 871 patient encounters for February 2025.
- Increase of 65 patient encounters compared with February 2025.

Overview:

- 1. Pulse Cardiology
 - a. Contract review and final negotiation to be completed in early April
 - b. Currently, cardiology services rendered ~\$40,000.00 in income in 2024

2. NP Student Update

a. In discussion with an NP Student regarding potential long term employment.

Curlew Medical Clinic

The Curlew Medical Clinic had 4 treatment days (Wednesdays).

Statistics

- 30 patient encounters at Curlew Medical Clinic over 4 days (Wednesdays)
- Increase in 7 patient encounters compared with February 2025 (23 visits)
- Currently, provider wait time at Curlew Clinic is 4 weeks
 - Review of statistics indicated necessity for additional treatment day at Curlew Clinic

Update: Lab Services at the Curlew Clinic:

- Discussion with Christina Beckwith and Jodi Blackwell on specific lab services was completed in March.
- Approval obtained for purchase of iStat blood analyzer with order placed

Republic Therapy Clinic

<u>Stats</u>

- Total of 440 encounters in March, 2025.
- Increase of 146 patient encounters compared with February (294)
- Increase in billed units in March (Feb = 798, March = 833)

Month	January	February	March
Total	305	294	440

Overview

- Marked increase in patient encounters attributed to additional staff and patient census.

Curlew Therapy Clinic

Stats

- 47 Patient encounters in March 2025
- Decrease from 54 encounters in February 2025.
- Decrease largely due to unplanned therapist illness and planned vacation

CFO Report

Ferry County Public Hospital District No. 1 Consolidated Income Statement - Draft Year to Date March 31, 2025

-				real to bate March 31, 2023					
Current	t Month	Varian	ce		Year to	Date	Variand	e	
Actual	<u>Budget</u>	<u>Amount</u>	Var %	Operating Revenue:	Actual	Budget	<u>Amount</u>	Var %	
2,627,219	2,738,513	(111,294)	-4% (Gross Patient Service Revenue	7,918,413	8,215,538	(297,125)	-4%	
			(Contractual Allowances & Provisions for					
(1,333,552)	(1,168,506)	(165,046)	14% (Uncollectible Accounts	(3,763,013)	(3,505,519)	(257,494)	7%	
1,293,667	1,570,006	(276,339)	-18% I	Patient Service Revenue (Net of Contractuals)	4,155,400	4,710,019	(554,619)	-12%	
264,117	307,000	(42,883)	-14% I	Pharmacy Gross Revenue	782,456	921,000	(138,544)	-15%	
104,019	108,583	(4,564)	-4% (Other Operating Revenue	228,972	325,749	(96,777)	-30%	
1,661,803	1,985,589	(323,786)	-16%	Total Operating Revenue	5,166,828	5,956,768	(789,940)	-13%	
Operating Expense:									
1,223,880	1,158,862	65,018	6%	Salaries & Wages	3,176,632	3,476,586	(299,954)	-9%	
132,501	261,258	(128,757)	-49%	Employee Benefits	521,620	783,775	(262,155)	-33%	
152,579	116,682	35,897	31%	Professional Fees	156,782	350,047	(193,265)	-55%	
285,353	277,083	8,270	3%	Supplies	849,080	831,250	17,830	2%	
26,892	28,495	(1,603)	-6%	Purchased Services - Utilities	74,552	85,485	(10,933)	-13%	
178,300	146,671	31,629	22%	Purchased Services - Other	402,435	440,013	(37,578)	-9%	
13,580	14,000	(420)	-3%	Insurance	41,159	42,000	(841)	-2%	
46,640	71,244	(24,604)	-35%	Other	94,192	213,733	(119,541)	-56%	
18,987	19,000	(13)	0%	Rents & Leases	56,959	57,000	(41)	0%	
72,997	116,916	(43,919)	-38%	Depreciation	219,109	350,749	(131,640)	-38%	
2,151,709	2,210,212	(58,503)	-3%	Total Operating Expenses	5,592,520	6,630,636	(1,038,116)	-16%	
(489,906)	(224,623)	(265,283)	118% (Gain (Loss) from Operations	(425,692)	(673,868)	248,176	-37%	
99,799	139,988	(40,189)		Total Non-Operating Revenues (Expenses)	165,851	419,964	(254,113)	-61%	
(390,107)	(84,635)	(305,472)	361%	Increase (Decrease in Net Position	(259,841)	(253,904)	(5,937)	2%	
-23%	-4%	-19%	-15%	Operating Margin	-5%	-4%	-1%	3%	
(281,221)				EBITDA	59,018				

Ferry County Public Hospital District No. 1 Consolidated Balance Sheet - Draft March 31, 2025

	Dec 24	Jan 25	Feb 25	Mar 25
<u>Assets</u>				
Current Assets				
Cash & Cash Equivalents	1,334,091	1,079,070	1,588,071	1,257,919
Receivables				
Centriq Receivables, Net	772,872	753,700	756,892	742,156
Gross Accounts Receivables	7,283,892	7,806,546	7,340,139	7,772,101
Contractual Allowance	(2,845,446)	(2,685,594)	(2,876,831)	(3,161,062)
Bad Debt Allowance	(1,115,098)	(970,278)	(1,119,630)	(1,108,627)
Net Patient Accounts Receivable	4,096,220	4,904,374	4,100,570	4,244,568
Tax Levy Receivable	24,608	403,568	381,774	333,599
Estimated Third-Party Settlements	1,012,895	1,210,281	13,895	114
Other Receivables	325,419	330,113	328,958	355,626
Inventories	579,852	580,098	582,896	584,322
Pre-paid Expenses	83,634	110,883	103,083	88,886
Total Current Assets	7,456,719	8,618,387	7,099,247	6,865,034
Capital Assets				
Non-Depreciable Assets	49,282	49,282	49,282	49,282
Fixed Assets, net of Depreciation	5,765,698	5,703,728	5,630,731	5,557,734
Construction In Progress	1,286,164	971,405	1,310,182	1,477,778
Total Capital Assets	7,101,144	6,724,415	6,990,195	7,084,794
Total Assets	14,557,863	15,342,802	14,089,442	13,949,828
<u>Liabilities and Net Position</u>				
Current Liabilities				
Accounts Payable	2,113,008	1,293,694	1,153,446	1,366,937
Payroll Liabilities	877,107	927,432	970,066	1,085,175
Unearned Tax Revenue	(6,072)	347,175	295,432	233,483
Other Current Liabilities	2,057,071	2,014,891	1,973,500	1,931,504
Total Current Liabilities	5,041,114	4,583,192	4,392,444	4,617,099
Long Term Liabilities				
Long Term Debt	410,704	410,704	410,704	410,704
Capital Lease Obligations	171,624	171,671	171,716	171,761
Total Long Term Liabilities	582,328	582,375	582,420	582,465
Total Liabilities	5,623,442	5,165,567	4,974,864	5,199,564
Current Year Earnings	803,959	2,046,773	984,116	619,802
Equity Accounts	8,130,462	8,130,462	8,130,462	8,130,462
Total Net Position	8,934,421	10,177,235	9,114,578	8,750,264
Total Liabilities and Net Position	14,557,863	15,342,802	14,089,442	13,949,828

Ferry County Public Hospital District No. 1 Cash Detail Worksheet														Deposit in Transit 10.12000.01000					
	Gen	eral Operating											Ī	KH Depisit in Transit					
	10	.10000.0000												20.12000.01000					
	Fu	nded Deprec	Р	etty Cash	Mer	rchant Account		CMS EFT	KH	Gen Operating	General Operating			RD Depisit in Transit	R	tegister Cash			
	10.	10000.62000	10.1	0000.20000	10.	.10000.10000	10	0.10000.30000	20	.10000.00000	30.10000.00000			30.12000.01000	30	.11000.10000			Days Cash
		34		65		17		25		45	16	Total in Bank	:S	Transit	Ca	sh Register	Total Cash	GL Balance	on Hand
December 2024	\$	355,263.94	\$	4,615.27	\$	2,398.27	\$	116,548.60	\$	9,499.63	\$ 810,183.59	\$ 1,298,509.	30	\$ 34,645.10	\$	936.09	\$ 1,334,090.49	\$ 1,334,090.49	22.23
January 2025	\$	134,427.43	\$	5,614.19	\$	13,375.54	\$	118,066.79	\$	6,596.70	\$ 811,097.21	\$ 1,089,177.	36	\$ (11,043.83)	\$	936.09	\$ 1,079,070.12	\$ 1,079,070.12	17.98
February 2025	\$	565,906.35	\$	4,492.59	\$	7,442.63	\$	113,663.02	\$	5,520.02	\$ 823,989.16	\$ 1,521,013.	77	\$ 66,120.64	\$	936.09	\$ 1,588,070.50	\$ 1,588,070.50	26.47
March 2025	\$	347,971.79	\$	5,350.86	\$	9,951.04	\$	46,950.48	\$	7,545.34	\$ 892,548.81	\$ 1,310,318.	32	\$ (53,335.09)	\$	936.09	\$ 1,257,919.32	\$ 1,257,919.32	21.07

Collections on Self Pay Accounts

		Monthly	
		Average	<u>Comments</u>
2023 Total	\$ 426,831.80	\$ 35,569.32	Trubridge Collected Self Pay
2024 Total	\$ 805,427.33	\$ 67,118.94	Moved Self Pay Inhouse
Jan	\$ 69,701.63		
Feb	\$ 57,513.67		
Mar	\$ 62,786.99		
2025 Total	\$ 190,002,29	\$ 63.334.10	

Deposits from Trubridge Billing Activities

Date	Deposits	Month	Deposits
4/1/2025	\$32,807.31	Jan	\$ 1,327,933.21
4/2/2025	\$32,285.95	Feb	\$ 1,306,389.26
4/3/2025	\$29,050.35	Mar	\$ 1,053,485.59
4/4/2025	\$49,517.63	Total	\$ 3,687,808.06
4/5/2025	\$0.00		
4/6/2025	\$0.00		
4/7/2025	\$221,330.24		
4/8/2025	\$43,836.17		
4/9/2025	\$108,685.48		
4/10/2025	\$96,179.16		
4/11/2025	\$34,250.16		
4/12/2025	\$0.00		
4/13/2025	\$0.00		
4/14/2025	\$59,624.16		
4/15/2025	\$63,291.57		
MTD Total	\$770,858.18		
Projection	\$1,541,716.36		
4/8/2025 4/9/2025 4/10/2025 4/11/2025 4/12/2025 4/13/2025 4/14/2025 4/15/2025 MTD Total	\$43,836.17 \$108,685.48 \$96,179.16 \$34,250.16 \$0.00 \$0.00 \$59,624.16 \$63,291.57 \$770,858.18		

Other Updates

\$350k settlement approved by Wellcare, finalizing settlement documents
Rebilling \$800k+ as Extended Skilled Nursing (originally billed as LTC)
Narrowed replacement billing agency to top 2 options
Corro Health - currently does coding for us
InlandRCM - I've worked with them before and they do a good job
Working with Net-Revenue about a one-time clean up of old AR, including Centriq
Working with Trubridge daily and seeing improving results (see Deposits page)
Preparing rate increase to be effective 5/1/2025 (\$44k/month improvement)
Referral wait times coming down
Pre-authorization wait times coming down

Dr. Wiefelspuett's Medical Staff Report

- Staffing: No gaps in the schedule; all physicians have been diligent and consistently available.
- **Collaboration:** Strong and effective collaboration across all departments continues to support patient care.
- Patient Volume & Complexity: We are experiencing sustained high patient volumes and increasing case complexity.
- Nursing Support: Complex cases are being managed effectively, thanks in part to the consistent presence of nurses with acute care backgrounds, particularly due to Zane's contributions to scheduling.
- **Transfers & Transport:** Transfers remain challenging, particularly due to weather. We are actively exploring using EMT-trained nurses to assist with transport logistics.
- Education & Recruitment: We are initiating discussions to develop a relationship with the Colville Residency Program to host medical residents and introduce them to our site.

CEO Board Report

4/22/2025

On 11 April the CEO Search Committee has the final decision to call candidates down to 6 candidates. The Committee identified 10 questions to ask the candidates. Our first call will be this Friday the 18th. Teena of the HR Department is working hard with the candidates and Committee to schedule the times for calling.

Lance continues to facilitate improved financial tracking and revenue recovery. This will support decisions on construction planning and various operational improvements in the organization. The Budget reconstruction is near completion.

Everyone is looking at recent Federal actions which may impact the cost of equipment, supplies and potentially building costs. WSHA is providing their thoughts on state and federal budgets. We continue to watch the Medicaid / Medicare reimbursement movement. The Advantage plans are creating issues of coverage for the patient by providing plans in areas that do not have contracts with the providers.

JJCA was setting up a cardboard mockup of the hospital this past week. This week starting 15 April, our Teams will be walking through the building and reviewing the building in 3-D. This should be an exciting time to see the drawings come to life.

We have a booth for the Conservation Fair on Saturday 26th and trying to get into the Health Fair on the 17th. There is a job at the High School 0800-1500 for seniors and 1500-1700 for the community. We have various volunteers at the locations and times.

Respectfully submitted,

Emmett C. Schuster MHSA, ACHE