



Campbell County Health

*Excellence Every Day***GOVERNING BOARD
REGULAR MEETING**

The Campbell County Hospital District Board of Trustees met in the Hospital's Fifth Floor Classrooms on Thursday, February 25, 2021.

Members present:

Mr. Adrian Gerrits
Mr. Alan Stuber
Ms. Lisa Harry
Mr. Randy Hite
Dr. Sara Hartsaw
Ms. Kristina Leslie
Mr. Tom Murphy

Also present:

Ms. Colleen Heeter, CEO
Dr. John Mansell, Chief of Staff
Mr. Jerry Klein, COO
Ms. Mary Lou Tate, CFO
Ms. Misty Robertson, CNO
Ms. Noamie Niemitalo, Vice President of Human Resources
Mr. Matt Sabus, Vice President of Information Technology
Ms. Karen Clarke, Community Relations Director
Mr. Tom Lubnau, CCH Attorney
Ms. Brandi Miller, Executive Assistant
Ms. Ellen Rehard, Recorder
Public

Call to Order

Mr. Gerrits, Chair, called the meeting to order at 5:00 p.m.

Invocation

Pastor Samara Jenkins, First United Methodist Church, led those present in an opening prayer.

Mission Statement

Mr. Stuber read Campbell County Health's Mission Statement.

Vision Statement

Mr. Stuber read Campbell County Health's Vision Statement.

Roll Call

Ms. Ellen Rehard called the roll of the Trustees of the Board of Campbell County Memorial Hospital District, Mr. Gerrits, Mr. Stuber, Ms. Harry, Mr. Hite, Dr. Hartsaw, Ms. Leslie and Mr. Murphy are present.

Approval of Agenda

Mr. Murphy moved, seconded by Ms. Harry, to approve the agenda as presented. Mr. Gerrits, Mr. Stuber, Ms. Harry, Mr. Hite, Dr. Hartsaw, Ms. Leslie and Mr. Murphy voted aye.

**Motion carried.**Consent Agenda

The following items were approved as part of the Consent Agenda.

Approval of Minutes

Minutes from January 28, 2021 Regular Board meeting. (copies appended to minutes).

Administrative Policy Review

Four Administrative policies, Alias Status Registration, CCH Housing, Meals for Visitors of Hospital Inpatients and Relocation of Equipment/Furniture. (copies appended to minutes). **No motion required.**

Finance Meeting

Items requiring Board Action from the February 22, 2021 Finance Committee Meeting as amended (copy appended to minutes).

Committee Reports

Healthcare Foundation

Quality Committee

Physician Recruitment and Retention

Legacy Advisory Board

Dr. Hartsaw moved, seconded by Mr. Murphy, to approve the Consent Agenda as presented. Mr. Gerrits, Mr. Stuber, Ms. Harry, Mr. Hite, Dr. Hartsaw, Ms. Leslie and Mr. Murphy voted aye. Motion carried.

RECOGNITION ITEMSEmployee RecognitionThanks for Working Here This Week

Amie Stirling

Oncology

Robin Ferguson

IT

Iva Howard

Cath Lab

Amanda Quick

Cardiology

PUBLIC QUESTIONS OR COMMENTS

Mr. Gerrits asked if there were any comments or questions from the public at this time. There were none.

DISCUSSION ITEMSHospice House

Hospice Advisors were at CCH on Monday and Tuesday. They met with the Healthcare Foundation Monday evening as well as some of the Board members, Ms. Ashley Montague, Home Health/Hospice Director, and Ms. Tate on Tuesday. Hospice Advisors will review the data they received and provide their recommendations to Ms. Heeter. The study should be complete by Mid-March and presented at the Strategic Planning retreat. Mr. Gerrits added that a feasibility study was not prepared when the hospice house was built.



Campbell County Health

Excellence Every Day

Visiting Policy

Board members agreed to move discussion of the Visiting policy to the Strategic Focus during the Care report.

ACTION ITEMS

Medical Staff Appointments

Dr. Mansell recommended approving the following medical staff appointments as recommended by the appropriate Department Chairman, Credentials Committee, and Executive Committee:

New Appointments:

Courtesy Staff:

Department of Medicine	
Jeffrey W. Cloud, M.D.	Gastroenterology

Courtesy Staff – Category Change Request from Temporary:

Department of Medicine	
Yewande "Wendy" O, Adeshina, M.D.	Family Medicine

Limited Health Care Practitioner (Independent):

Department of Surgery	
Nitan A. Bahnson, DDS	Dentistry

Limited Health Care Practitioner (Dependent) – Category Change Request from Temporary:

Department of Medicine	
Lyndsay M. McDonald, APRN	Internal Medicine

Reappointments:

Active Staff

Department of Maternal Child	
Michael Jones, M.D. (March)	OB / GYN

Department of Surgery	
Alan Mitchell, M.D. (March)	Radiology

Courtesy Staff

Department of Medicine	
Adrian Fluture, M.D. (March)	Cardiology
Mary Maymana, M.D. (February)	Psychiatry (Telemedicine)

ADDITIONAL PRIVILEGES REQUESTS

Department of Maternal Child	
Megan Sampson, D.O.	Ambulatory Pediatric Privileges



MEDICAL STAFF RESIGNATIONS

The following resignations from the Medical Staff were noted:

Active Staff:

Departments of Surgery and Powder River Surgery
 Shireen Haque, M.D. Anesthesiology Effective March 5, 2021

Dr. Hartsaw moved, seconded by Mr. Stuber, to approve the recommendation from Med Exec. for Medical Staff appointments as presented. Mr. Gerrits, Mr. Stuber, Ms. Harry, Mr. Hite, Dr. Hartsaw, Ms. Leslie and Mr. Murphy voted aye. Motion carried.

Resolution for Sale of Property on Hwy 59

Ms. Heeter reported that the sale of the property owned by CCH on Hwy 59 closed in February. The resolution for the sale is required to be formally approved.

Mr. Hite moved, seconded by Dr. Hartsaw, to approve the sale of the property located on Hwy 59 as presented. Mr. Gerrits, Mr. Stuber, Ms. Harry, Mr. Hite, Dr. Hartsaw, Ms. Leslie and Mr. Murphy voted aye. Motion carried.

INFORMATIONAL ITEMS

Chairman's Report

Mr. Gerrits pointed out that Board members should be careful when looking at the financial report. Because of COVID, CCH has received additional funds that will not be offered in the future. He thanked Ms. Tate who has been reporting transparent numbers to the Board.

Chief of Staff Report

Dr. Mansell reported one investigation is ongoing.

CEO Report

Events in February

February 2 CCH and the Gillette College Nursing program hosted a blood drive on Tuesday, February 2 from 10 am – 4 pm at the Health Science Education Center.

February 18 Visiting restrictions are eased at CCH, with the exception of the Legacy. New visitor/support person policies for Inpatients, Outpatients, Surgery and Emergency Department include:

- Up to two visitors/support persons per patient at one time
- Visitors/support persons must follow all PPE, handwashing and social distancing guidelines or they will be asked to leave
- No visitor/support persons under age 16 are allowed
- Visits to COVID-19 patients are restricted to end-of-life situations only

*Some departments or areas are restricted to one visitor/support person per patient, based on waiting room size or for therapeutic reasons. Screening staff have been trained on these exceptions.

- Ms. Heeter reported that the Zen Den usage has been fairly steady the last few months with almost 400 visits in January.
- Flags around Gillette began flying at half-staff this week. Gov. Gordon has ordered both



the U.S. and Wyoming flags be lowered statewide in honor of COVID deaths.

Strategic Focus

People

Minimum Wage

Ms. Niemitalo reported that the current Federal minimum wage is \$7.25/hr. The federal proposal right now is to raise the wage to \$15/hr. over a four-year period. The lowest wage at CCH is \$12.37/hr. CCH has 64 job titles that have a starting wage less than \$15/hr. Of the 403 employees within those job titles/paygrades, 249 are below \$15/hr. To raise only those employees to \$15/hr. would cost \$567,656/year. To raise all to a minimum of \$15/hr., to make an internal equity adjustment with those paygrades, and to raise employees that have a job that builds i.e. CNA, CNA II, and Medication aide, the cost would be a minimum of \$1,454,369. Ms. Niemitalo suggested the following proposal:

- FY 21/22
 - Raise to minimum of \$14.00 and internal equity
 - \$548,686.00
- FY 22/23
 - Raise to a minimum of \$14.50 and internal equity
 - \$402,276.00
- FY 23/24
 - Raise to a minimum of \$15.00 and internal equity
 -
 - \$503,407.00

Care

Visitor Policy

Ms. Natalie Tucker and Ms. Sherry Bailey reported that the Visitor policy went to the Policy Committee to review how the policy could be used for multiple situations where disease processes might limit visitors in the building. Guidelines from CMS, CDC, Banner Health and John Hopkins were used. The revised policy was approved by Leadership Council and final approval was made at a Command Center meeting. The new policy will follow green/yellow/orange/red indicators based on the State report of Campbell Counties percentage of positives for a specific disease. Each colored indicator allows a different visitation level. Dr. Hartsaw expressed that the policy deprives patients of what they need the most, which is family visits. Ms. Tucker explained that some of these restrictions come from CMS.

Utilization Review

Ms. Rosanna Knight-Parker explained that utilization review is the process of making sure health care services are being used appropriately and efficiently, which is a key component of a value-based approach to paying for health care. At CCH, utilization review is completed by nurses. Mr. Tom Galvin covers UR for BHS and Ms. Knight-Parker covers Med/Surg, ICU and OB/GYN. Every patient in the hospital is reviewed to confirm that the patient is in the right setting, receiving the correct treatment and is ready to be discharged to the next level of care (home, Home Health, Rehab, etc.). Utilization Review at CCH works closely with its insurance counterparts. When CCH receives a denial, Utilization Review completes a Peer to Peer review with the insurance medical director or can appeal the denial. Utilization Review also works closely with the Quality department, physicians, Care Management, Social Work, Patient



Financial Services, Home Medical Resources and Administration.

Service

Revenue Cycle Projects and Improvements

Ms. Tate explained that many improvements have been made to the revenue cycle. See below:

	Metrics as of Jun 2019	Metrics as of Jun 2020	Metrics as of Jan 2021	2020-2021 Diff
AR Days	82	90	69	(21)
DNFB (in days)	11	19	16	(3)
% AR over 90	50.8%	53.9%	42.7%	-11.2%
% AR over 120	40.1%	47.2%	35.1%	-12.1%
Net Collection Rate	93.4%	83.2%	92.9%	9.7%
Bad Debt % per FS	5.2%	5.8%	5.2%	-0.6%
Charity Care % Per FS	3.0%	1.7%	2.2%	0.4%
Days Cash	141	166	179	13
Clean Claim Rate	83.0%	90.0%	99.0%	9.0%
Denial %	8.9%	7.7%	6.7%	-0.9%

Current projects include:

- Completion of Proration Rules
- Payment lockbox
- Provider Based Billing
- Charge forwarding
- Late Charge policy
- Statement and billing process re-design

Business

Business

Ms. Mary Lou Tate provided the following financial report:

January 2021:

- BHS YTD inpatient admissions are 3.26% under budget.
- OB YTD inpatient admissions are 8.14% over budget.
- Acute Care YTD inpatient admissions are 4.46% over budget.
- Legacy is 18% under budget YTD.
- YTD Hospital Surgeries are 14.9% under budget.
- PRSC is 35.5% under budget YTD.
- YTD Outpatient Visits are 5.9% over budget.
- YTD Clinic Visits are 10.9% under budget.
- YTD Walk-in Visits are 14.7% under budget.
- YTD Emergency Room Visits are 12.2% under budget.
- Net Service Patient Revenues are under budget.
- Bad Debt and Charity Care are under budget by \$232K.
- Operating Expenses were \$402K under budget.
- Expense as % of Operating Revenues, without one time pickups, is 108.37% YTD.



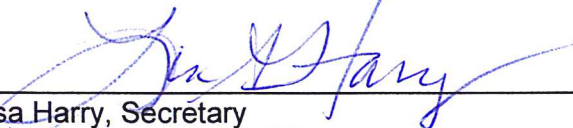
- Days cash on hand increased to 209.
- Day cash without MCR Advance payment is 179.
- Cash balances increased by \$4.1M.
- Accounts Receivable Days increase by 2 to 69 days.

EXECUTIVE SESSION


The regular meeting recessed into Executive Session at 6:26 p.m.

The regular meeting reconvened at 8:59 p.m.

The next regularly scheduled Board meeting and retreat is March 25 & 26, 2021.



Lisa Harry, Secretary



Ellen Rehard, Recorder