



**GOVERNING BOARD  
REGULAR MEETING**

The Campbell County Hospital District Board of Trustees met in the Hospital's Fifth Floor Classrooms on Thursday, February 27, 2020.

Members present:

Dr. Ian Swift  
Ms. Ronda Boller  
Mr. Alan Stuber  
Mr. Adrian Gerrits  
Dr. Sara Hartsaw  
Ms. Lisa Harry  
Mr. Dustin Martinson

Also present:

Ms. Colleen Heeter, COO  
Dr. Nick Stamato, Chief of Staff  
Dr. Attila Barabas, CMO  
Ms. Misty Robertson, CNO  
Ms. Mary Lou Tate, CFO  
Ms. Noamie Niemitalo, Vice President of Human Resources  
Mr. Bill Stangl, Vice President of Physician Services  
Mr. Steve Crichton, Vice President of Plant and Facilities  
Ms. Jonni Belden, Vice President of Continuing Health Services  
Ms. Ellen Rehard, Recorder  
Public

**OPENING**

Call to Order

Dr. Swift, Chair, called the meeting to order at 5:00 p.m.

Invocation

Chaplain Caleb Nelson led those present in an opening prayer.

Mission Statement

Ms. Harry read Campbell County Health's Mission Statement.

Vision Statement

Ms. Boller 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. Dr. Swift, Ms. Boller, Mr. Stuber, Mr. Gerrits, Ms. Harry and Mr. Martinson are present. Dr. Hartsaw will be arriving shortly.

Approval of Agenda

**Ms. Boller moved, seconded by Mr. Gerrits, to approve the agenda as presented. Dr. Swift, Ms. Boller, Mr. Stuber, Mr. Gerrits, Ms. Harry and Mr. Martinson voted aye.**



**Motion carried.**

Consent Agenda

Mr. Martinson would like to thank Patient Financial Services and Health Information Management for all of their hard work. AR days have dropped over the last three months.

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

Approval of Minutes

Minutes from January 16, 2020 Board meeting (copy appended to minutes).

Administrative Policy Review

Four Administrative policies, Communication with Health Officials, Corporate Compliance Program and Education, Inter-Office Mail, and Law Enforcement Patient Investigation (copies appended to minutes). **No motion required.**

Administrative Policy Approval

One Administrative policy, Medical Staff Retention – Adherence To Stark (copy appended to minutes). **No motion required.**

Finance Meeting

Items requiring Board Action from the February 24, 2020 Finance Committee Meeting (copy appended to minutes).

Committee Reports

- Healthcare Foundation
- Legacy Advisory Board
- Physician Recruitment and Retention Committee
- Quality Committee
- Facilities Planning Committee

**Mr. Gerrits moved, seconded by Ms. Boller to approve the Consent Agenda as presented. Dr. Swift, Ms. Boller, Mr. Stuber, Mr. Gerrits, Ms. Harry and Mr. Martinson voted aye. Motion carried.**

**RECOGNITION ITEMS**

Employee Recognition

- |                         |                      |
|-------------------------|----------------------|
| Heather Ash             | Walk In Clinic       |
| Devyn Brinkerhoff-Olson | Cancer Center        |
| Jamie Black             | Human Resources      |
| Diana Quinones          | Legacy               |
| Denise Yvonne           | Administration       |
| Crystal Peterson        | Quality Care Manager |

Department Discoveries

- Pain Committee

**PUBLIC QUESTIONS OR COMMENTS**

Dr. Swift asked if there were any comments or questions from the public at this time.



Brandy Johnson had questions on the RFP proposal that was sent to the private practice physical therapy clinics on January 14. Questions include:

- Did the Board approve the request for proposal to be sent out?
- Does the Board get to review or have input on decisions or is it strictly a CEO matter?
- Why does the hospital need to partner with an “equally strong rehab services management company”?
- Have the Board members reviewed the request for the RFP?
- How is this proposed to be beneficial to the community, patient care and the hospital?
- The hospital rehabilitation department has the ability and equipment to offer programs and services to the community that private practice cannot. Why is the focus to try to compete or take the same piece of pie that currently employs seven successful outpatient clinics in Gillette, Wyoming, directly employing 100 people in this community?

Dr. Swift confirmed that with Board approval CCH sent out an RFP. CCH has an excellent physical therapy program. The goal is to provide excellence every day and to look and think outside of the box to offer a more comprehensive program. CCH does not know what will occur, if anything at this time.

## **EDUCATION**

### **VIP Project**

Ms. Karen Clarke, Campbell County Healthcare Foundation representative, and Jane Glaser, Director of Campbell County Public Health, provided the Board with education on the Vaccines for Influenza Prevention Project. In 2015 the Campbell County Healthcare Foundation, Campbell County Health, Campbell County Government & Public Health and the Campbell County School District became partners in the VIP Project, which provides free influenza vaccination for school-age children in Campbell County. Of the 8,864 children enrolled in Campbell County School District, 2656 children were vaccinated through the VIP project in 2019-2020. School absences have decreased from influenza and influenza like symptoms. CCH supports the VIP program through direct funding, group purchase pricing for vaccines, and donation of supplies.

## **ACTION ITEMS**

### **Medical Staff Appointments**

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

### **Reappointments:**

#### **Active:**

Department of Medicine	
<b>Mark Walter, M.D.</b> (March)	Psychiatry
Department of Maternal Child	
<b>Amber Cohn, M.D.</b> (February)	OB/GYN
Departments of Surgery AND Powder River Surgery Center	



**Lora Rigsby, D.O.** (February) Anesthesiology

Department of Surgery

**Jon Kerr, M.D.** (February) Emergency Medicine

**Courtesy:**

Department of Medicine

**Mark Dowell, M.D.** (February) Infectious Disease  
**Kent Katz, M.D.** (February) IM/Gastroenterology  
**Robert Novick, M.D.** (March) Cardiology

Department of Maternal Child

**Shelly Shepard, M.D.** (February) Gynecology (Orders Only)

**Limited Health Care Practitioner (Dependent):**

Department of Medicine

**Sylvia (Darlene) Shafer, PA-C** (February) Family Medicine – Ambulatory

Departments of Surgery AND Powder River Surgery Center

**Rebecca Edwards, CRNA** (February) Anesthesia  
**Joel Tuckett, CRNA** (February) Anesthesia

**ADDITIONAL PRIVILEGES REQUESTS**

**Jason Higgs, PA-C** Orthopedics To perform ultrasound-guided joint and musculoskeletal injections

**EXTENSION REQUESTS**

**Samuel Brescia, M.D.**

**WITHDRAWAL OIF PRIVILEGES – To Note**

Department of Surgery

**Katharin Yoler, M.D., TeleRadiology** Effective December 17, 2019  
**Michael Rozenfeld, M.D., TeleRadiology** Effective January 22, 2020

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

Financial Assistance Policy

Ms. Tate explained that she discovered that Campbell County Health is on the bottom half of the list of healthcare facilities in the state for financial assistance generosity for indigent care. Her investigation found that most of the patient's at CCH, who apply for financial assistance and are denied due to the current financial assistance requirements, end up as bad debt. Ms. Tate recommends modifying the existing financial assistance levels. The new policy changes financial assistance levels to:

- 100% write-off: at or below 200% of Federal Poverty Level (FPL)
- 75% write-off: between 201-225% FPL
- 50% write-off: between 226-250% FPL



- 25% write off: between 251-275% FPL
- True self-pay patients who do not qualify for financial assistance will have an automatic 5% taken off their bill with an additional 20% taken off if paid within 20 days of the 1<sup>st</sup> statement.

**Mr. Gerrits moved, seconded by Ms. Boller, to approve the Governing Board policy, Financial Assistance, as presented. Dr. Swift, Ms. Boller, Mr. Stuber, Mr. Gerrits, Dr. Hartsaw, Ms. Harry and Mr. Martinson voted aye. Motion carried.**

#### Wellness Relocation/Building remodel

Mr. Crichton explained that the Facilities Planning Committee and the Finance Committee recommend reallocation of \$200,000 from the inpatient room project to remodel the building at 1405 W. 4<sup>th</sup> Street (the former offsite IT). This will move the Wellness department from rental space in the “Energy Building”. The current building lease is up in 2021. This is an opportunity to stop paying rent and move the department to the hospital campus.

**Mr. Gerrits moved, seconded by Mr. Stuber, to approve the recommendation from Facilities Committee and Finance Committee to reallocate \$200,000 from the inpatient room project to remodel the building at 1405 W. 4<sup>th</sup> Street in order to move the Wellness department from rental space. Dr. Swift, Ms. Boller, Mr. Stuber, Mr. Gerrits, Dr. Hartsaw, Ms. Harry and Mr. Martinson voted aye. Motion carried.**

#### Pioneer Building – I.T. Wing

Mr. Crichton explained that the Facilities Planning Committee recommends reallocation of \$495,000 from the Facilities Capital budgeted amount submitted for a retail pharmacy for construction to allow the relocation of the I.T. offices to Wing 3 of Pioneer Building. Mr. Gerrits stated that he does not see an urgent need and would like to see the request in next year’s budget. Ms. Tate stated that CCH is looking at capital dollars very tightly for next year. If the funds are not used this year, they expire.

**Ms. Harry moved, seconded by Dr. Hartsaw, to table the issue until the Board retreat. Dr. Swift, Ms. Boller, Mr. Stuber, Mr. Gerrits, Dr. Hartsaw, Ms. Harry and Mr. Martinson voted aye. Motion carried.**

### **INFORMATIONAL ITEMS**

#### Chairman’s Report

Dr. Swift reported that the entire Board attended the AHA Rural Health Care Conference this month. Dr. Swift thanked everyone for attending. Dr. Swift explained that Coronavirus is an RNA virus that is spreading. Coronavirus presents as a flu like upper respiratory or lower respiratory virus. Dr. Swift asked Ms. Robertson to talk about how CCH is prepared. Ms. Robertson reported that at the current time Wyoming does not have any reported cases and is still at very low risk. CCH has an infection preventionist, Kimberly Lindeman, RN. Ms. Lindeman helps prepare every day for infections and infectious disease and reports to Natalie Tucker, who leads the CCH emergency preparedness committee. CCH has been working closely with Public Health, senior care facilities in the area, is conducting education about how to handle this type of emergency and is ensuring that adequate supplies are available.



### Chief of Staff Report

Dr. Stamato reported that the medical staff would like to thank the Board and Administration for hosting the medical staff dinner. Dr. Stamato recognized Dr. James Naramore for his 40 years of service to the medical staff.

### CEO Report

Ms. Heeter reported on these CCH events:

### **Events in February**

- February 6 Medical Staff Recognition Dinner at the Gillette College Tech Center. The event begins at 6 pm, with dinner, and medical staff service and committee recognition to follow.
- February 11 Healthy U program begins through March 17 at the Campbell County Senior Center. The program is free and helps participants who have chronic health conditions learn to play a more active role in their health.
- February 25 CCH receives the Blue Distinction+ designation for hip and knee replacement from Blue Cross Blue Shield.  
*Facilities designated as Blue Distinction Centers for Knee and Hip Replacement demonstrate expertise in total knee and total hip replacement surgeries, resulting in fewer patient complications and readmissions. Designated facilities include hospitals (with and without an onsite Intensive Care Unit) and Ambulatory Surgery Centers (ASC). All designated facilities must maintain national accreditation, and ASCs are also required to have an advanced orthopedic certification. In addition to meeting these quality thresholds, facilities designated as Blue Distinction Centers+ are on average 20 percent more cost-efficient in an episode of care compared to other facilities.*
- February 28 Blood drive in the 5<sup>th</sup> floor classrooms from 10 am-3 pm. Make an appointment online at [www.bloodhero.com](http://www.bloodhero.com), code ccmemorial, or call 688-1580.

### **Upcoming events in March**

- March 26-27 CCH Board of Trustees retreat at Spearfish Canyon Lodge, Spearfish, SD.
- March 27 Chair Affair at 6 pm, Wyoming Center. Business casual dinner party and auction to benefit the Cancer Care Committee of the Campbell County Healthcare Foundation. Tickets are \$50 pp and available online at [cchcf.com/chair-affair](http://cchcf.com/chair-affair).

### **Other CCH News**

Members of the CCH Medical Staff were honored for their years of service at the Medical Staff Recognition Dinner on February 6.

- 10 Years of Service: Attila Barabas, MD, Urology; Kris Canfield, MD, General Surgery; Mark Kellam, MD, Emergency Medicine; Kelly McMillin, MD, Family Medicine
- 15 Years of Service: Angela Biggs, MD, Obstetrics and Gynecology; Rodney Biggs, MD, General Surgery
- 20 Years of Service: Nathan Simpson, MD, Spine Surgery; Jennifer Thomas, MD, Family Medicine
- 25 Years of Service: Stan Lawson, MD, Emergency Medicine



- 35 Years of Service: Erik Johnsrud, MD, Anesthesiology
- 40 Years of Service: James Naramore, MD, Family Medicine

## Strategic Focus

### **People**

#### Leadership Training

Ms. Natalie Tucker explained that the goals of Leadership Development Institutes are to give leaders tools to do their jobs, improve employee satisfaction and retention, to keep leaders up to date, help leaders remain engaged and give less experienced leaders dedicated time with more experienced leaders to role play and ask questions.

### **Care**

#### Care Strategy Team Update

Ms. Robertson and Ms. Ullrich reported on the Care Strategy team. The Care Strategy team focuses on care coordination between acute care and outpatient continuum of care. The team is working on a group of three-year goals that include:

- Year 1 – Patient Navigator Go-Live; Select EMR/documentation option; develop and budget a director position to oversee the continuum.
- Year 2 – Integrated BHS model, community paramedicine go live, select and hire a director.
- Year 3 – Pilot a population health model.

Ms. Robertson explained that the Patient Navigator in the ED started in January 2020 and shared a success story from that program.

### **Service**

#### MedSurg/ICU HCAHPS

Mr. Sherry Bailey and Ms. Tanya Allee reported on HCAHPS score from Med/Surg. The most recent overall rating is 74.2, which is up from the previous rating of 65.5. Ms. Bailey shared that MedSurg/ICU staff are working on nurses listening carefully and making sure that patients understand the purpose of their medications. Ms. Bailey explained the importance of patient rounding. An inpatient charter team was created in November 2019, which include the CNO, staff nurses, nurse supervisors, a hospitalist, pharmacist, care manager and EVS. The charter is working on the following:

- Monthly validations/skills labs for leader rounding, bedside shift report and hourly rounding.
- Breaking down AIDET on letter at a time.
- KWKT – Key Words at Key Times – focusing on “explanation”.

### **Business**

#### Second Floor Inpatient Room Replacement Project Update

Mr. Crichton explained that the second floor project is right on schedule. The intended substantial completion date remains at April 20, 2020. A schedule of inspections and testing will run from March 31 through May 20. Karen Clarke is working to plan a full open house prior to moving in patients. The intended move date for Med/Surg and ICU is May 28. The project is estimated to come in \$1.2M under budget.

#### Business

Ms. Mary Lou Tate provided the following financial report:

**January 2020:**

- Inpatient admissions were above budget for the month of January. BHS admits were 1 over budget. OB admits were 7 under budget and acute admits were 13 over budget.
- Outpatient visits were above budget.
- Clinic visits were well above budget. WIC was the driving factor.
- Hospital based surgeries were slightly below budget for the month. YTD are two over budget.
- PRSC surgeries were slightly below budget for the month. YTD are well over budget.
- Net patient revenue was \$1.4M over budget and continue an upward trend.
- Payor mix remains stable, but are seeing a shift to more Medicare patients.
- Bad debt and charity care were under budget by \$185k.
- Operating expenses were \$550k over budget which include \$290k pay in of employee benefits.
- Excess revenue over expenses was more than budget by \$1.1M.
- EBIDA was \$1.08M over budget and increase \$2.36M compared to last year.
- Days cash on hand remained at 123.
- Cash balances increased by \$14.8k.
- Accounts receivable days decreased to 79 days.

**EXECUTIVE SESSION**

The regular meeting recessed into Executive Session at 6:43 p.m.

The regular meeting reconvened at 9:20 p.m.

**ADJOURNMENT**

There being no further business, the meeting adjourned at 9:20 p.m.

The next regularly scheduled Board meeting and retreat is March 26 & 27, 2020 at 10:00 a.m. at Spearfish Canyon Lodge.

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Alan Stuber, Secretary

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Ellen Rehard, Recorder