



Sublette County Hospital District

Mission: To excel at providing comprehensive health services in Sublette County through efficient, high quality, patient centered care.

Excellence | Compassion | Partnership
Trustworthiness | Stewardship | Communication

Sublette County Hospital District Board Meeting Minutes November 30th at 5:30pm Pinedale, County Building

Board Members in Attendance

Tonia Hoffman – Board Chair
Jamison Ziegler – Vice Chair
Kenda Tanner – Secretary / Treasurer
Dave Bell – Trustee
Ashli Tatro – Trustee

5:30pm: Carrie Long swore in Dave Bell, Kenda Tanner and Ashli Tatro as newly elected board members.

Gary Wingrove – President of Paramedic Foundation – to discuss Community EMS.

Gary Wingrove from the Paramedic Foundation came to talk about Community EMS, which is using Paramedics in a Primary Care role to care for the community. It started with four countries adopting it, Canada, US, Australia, and the United Kingdom. It started in 2005, and wasn't as understood as it is now. It's not brand new and we wouldn't be the first to do it. In 2020 they launched a Doctorate of Paramedicine in the UK. Existing programs have seen the numbers of their Community EMS visits grow while the number of 911 calls reduces. The same employee will work both in the ambulance and the Community EMS calls. In Minnesota the state paid out what they saved by having insured savings. The first year, the Community EMS program received \$800,000 back and the state kept \$800,000 for themselves. It increased to over a \$1 million for each the following year.

The State of Wyoming EMS office has funded this visit by the Paramedic Foundation. They came to do Phase 1, which is talking with the community. Once the CAH is operational, you need to legally put the Ambulance service under the CAH. It has to be owned and operated by the Hospital. If you do this, the Ambulance service can get cost based reimbursement, which is the best. Other services have seen their reimbursement go up 3x to 5x higher.

There are two things required by the state: an ambulance business license endorsement and an EMS practitioner license for the employees.

Gary gave the District options: to start the training in January with the staff and start the service before the Hospital. Or there are some things we might want to wait to start till the Hospital is built. Or we might decide not to do this at all. We gave you 6 opportunities: Medical Clinic at Home, Supporting Home Health, Longitude Care of High Utilizers and Vulnerable Patients, Community EMS facilitated Urgent Care, Supporting Public Health, Post Hospitalization followup.

The report listed the 6 opportunities and the key stakeholders, services and billing strategies. We did not provide any operational details. That will have to be developed locally. The Paramedic Foundation is contracted through June of

2023 to provide support and help. There is a chance the state will renew the contract further. The key suggestion is to start small. The larger communities have been doing it for a decade, so start small and scale up later.

Kenda mentioned that the community was very excited when they presented at the Marbleton Senior Center. They were excited to receive care in their homes and not have to leave the house, whether for follow up visits or vaccinations. Bill mentioned that when a patient is sick, they are grateful to have care at home with antibiotics or whatever they need. Bill suggests to start with people who are more home bound and perhaps focus on diabetes, to stop the emergency before it happens and help keep this population healthier.

Meeting Call to Order 6:12 p.m.

Pledge of Allegiance

Set Agenda - Welcome to Ashli and thank you for being willing to serve! She reports she is looking forward to it.

Dave moved to set the agenda and Kenda seconded. Motion carried unanimously.

Department Reports: *Administrator's Report: Dave Doorn/Mike Hunsaker*

(Nursing, Lab, Radiology, EMS, Business office, PR, Grants and Medical Directors' reports)

Thank you to all the board members who take your personal time to run this organization. We know what a sacrifice it is and we appreciate you. And a warm welcome to Ashli.

Bill reports that the EMS class is full! We have 21 students enrolled and a waiting list, and a great thank you to Sublette BOCES who will reimburse the cost of the class if the student passes. That was key to helping fill the class. We also joined the Wyoming EMS Association (WEMSA) which is the lobby for EMS needs and help liaison with all the state directors. They are working to get EMS as an essential service.

Dave gave a big thank you to Sue and Bill, who put a lot of work into this community EMS process. Tonia asked what next steps might be. Bill said that now that they have figured out there is a real community need for it, the next steps will be to have the Board's support to get it off the ground. It will take financial support to start. The first part will be finding grants for the educational portion. Then while the students are getting credentialled, we can set the model for what we want this to look like. For example, we could focus on diabetics who have A1C's over 8, or people that are home bound. We can plan to start small and specific. The next step will be those logistics. Dave Bell asked if there were capital needs for vehicles or equipment for the community EMS program. Bill said that they have a vehicle and just got a grant for a \$38,000 Zoll monitor. Ashli asked if he could start with the staff he has, and Bill said yes. To start we will use the staff we have. Bill said he will also take the class, and has four other people interested, who are in both Marbleton and Pinedale. Dave Bell asked if we might need a second truck for the Marbleton portion of this. Bill said that's a good point. Kenda asked how appointments are made, and Bill said they would be ordered by our Providers who will say who and what needs to be done. Dave Bell asked how it gets billed. Bill answered that right now only Medicaid reimburses, but they are working on getting Medicare. Furthermore, because our EMS is part of the District, there is more potential for revenue. For example, when they take a blood sample back to the Clinic, the Clinic can bill for the lab work. At the beginning it is not the greatest reimbursement, but it will get better over time. Tonia thanked Bill and Sue for getting all the stakeholders at the table to talk this over. Dave Doorn said that what they are seeing is that there will be a lot of demand for it.

Sue said that we are waiting for the board's approval to keep moving forward because students could potentially start as early as January at Casper College. Most of the work could be done remotely. It's 180 hours of education. It's a 14 hour credit class. Tonia asked if they could have some time to study the report and get some numbers. Mike suggested having the financial committee involved and doing an analysis of the cost. Mike said we know it's good for the community, but we also want to make sure we can cover the costs. There will be staff available that are being paid anyway, and this will help keep the staff busy and feel needed on their shifts. The board agreed to have Mike and Dave work with Michelle and Kelli to explore the potential revenue and expense and come back with a report.

Lab numbers have held steady and the Med Tech students are completing their semester and heading to Casper for finals. In January they will do non-degree classes and then Fall of 2023 they will have more clinical classes. They will start rotations in Spring of 2024, and then graduate. Dave explained to Ashli that Sharon set up a program to develop home-grown talent for Med Techs and send our current employees to Med Tech school at Casper College remotely.

Sharon pointed out that the grants that cover her Med Tech students would also cover the potential Community EMS students, but those grants are due 30 days before class starts. Vicky Marshall sent her nursing report from California as she is there for a Healthcare Coalition conference. Matt Strong, our weekend Nursing Paramedic, completed additional training. Finally, Radiology reports that we have found CT contrast after the national supply chain worries.

Public Relations continue to promote Dr. Hastey in Marbleton. Promoting Pediatrics with both Juli Forrester FNP doing Tuesday in Marbleton and Wed in Pinedale plus Jackson Pediatrics becoming our newest Visiting Provider starting in January. Finally, stressing the Pinedale urgent care is open 7am to 7pm.

ARPA Grants submitted include the \$10 million grant for healthcare infrastructure, a \$500,000 grant for the Marbleton ER remodel, and \$162,500 for EMS staffing stabilization which we have received. Kari is currently writing an Electronic Medical Records (EMR) grant for \$400,000 for hardware for the new hospital and another grant for \$50,000 for a module to connect to the WylR (Wyoming Immunization Records). Besides ARPA, she is working with the Helmsley Charitable Trust to get them a list of radiology equipment we need (valued at about \$1.8 million). Continues Wyoming Department of Workforce Training Grant for many employees. And received \$91,000 from FEMA for the past quarter. The FEMA emergency ends on Dec 31 this year.

Dave asked Kari to give more detail on the ARPA Infrastructure grant. Kari reports that at the Nov 9th meeting, the OSLI office asked everyone to go back to the drawing board and tie their grants more closely to COVID. They were worried that if their grants weren't tied closely to COVID, they could be clawed back by the Federal Treasury department in the event of an audit. Kari rewrote the grant and resubmitted for the Nov 16th meeting. However, Sublette wasn't yet on the agenda. Rather, Riverton had made the agenda and received the full \$10 million for their project. They only scored a 3, but that was due to not having any history of financials and the fact there is indeed another hospital in Riverton. Kari expects to keep working with the OSLI office and get on the agenda for Dec 15th. Dave Bell asked if we needed to go to that meeting in Cheyenne and Kari said absolutely. We will be there.

To date, since July, Kari has submitted \$12,865,600 in grants. The board congratulated her.

Kelli reports her team is working comfortably in the Sublette Center. The offices have turned out well. Shout out to Brett from IT, who made everything work really well and transferred all the phone numbers. She's working on getting insurance on the buildings we were deeded from the County. Dave Bell asked if the numbers we are insuring match what was discussed at the Finance Committee? Michelle said yes. Our Cash Revenue collections are the highest they've been in the past 15 years since Kelli has been here. We are projecting collecting \$4.1 million, nearly \$1 million more than last year. Charge entry dropped this month due to being short staffed. Going to see some dropped revenue this month, but it's due to not having enough staff.

Dr. Burnett attended two presentations on Mammo machines. Some of these companies have long leads times, so decisions will need to be made sooner rather than later. He met with Dr. Gonzalez, Cardiologist from Star Valley Health, Dr. Green General Surgeon and Dr. Galvin who handles sleep studies. Dr. Burnett is also looking at becoming the medical director for Sublette County Fire to replace Dr. Demetriou who is moving.

Dr. Wallace has been working on optimizing patient results reporting now that we have 24 hour shifts. The provider orders a test, which doesn't come back till the next day, so another provider has to relay the results. Working on that line of communication to assure the patient gets the best information. Also working with Star Valley Health to have Dr. Gonzalez read cardiology charts. Also, Dr. Wallace is doing an informal review of his experience with head injuries.

Dave reports that recruitment is going well. Dr. Andras Eder is interested in coming here. He's a former Marine with a lot of field medic experience. He's a Family Medicine Physician who has our contract in hand and is planning on starting in July. Dr. Hagge from Kemmerer is also very interested in coming. He would be like to be here sooner than July. Both are interested in doing mainly primary care with some ER. Dave says that with the timing, this is great. We need the coverage in the ER. Both would be great additions.

Public Health is moved and we think they are happy. The exterior doors are coming from Idaho Falls at last, so we can get those replaced. The front one will have a handicapped entrance button. We got concrete poured for the last parking spaces. Mike and Dave have been doing interviews for the Assistant Administrator position. They have had five applicants, and three are very strong. Ashli asked if anyone was local, and all are from outside the area.

Dave reports that we had an initial meeting with Chartis and they asked for three pieces of information, that we returned. This is the start of a very big process.

They will meet Dec 5th about the DZA recommendation on the Rural Health Clinic RHC designation. They will have more information next month.

Committee Reports:

Finance Committee-Kenda Tanner/Dave Bell

Dave Bell reports that they had a great meeting and covered a lot of ground. The highlights are we studied the stats report, as the stats were slow for the month. Everything is down a bit for the month on visits, and activity. Nothing alarming, but we need to keep our eye on that. Tonia said it was an unusual time of year to have visits down, with cold and flu season. Dave Doorn adds that total visits in Pinedale were up, due to Urgent Care going up. Marbleton visits are down a bit. Michelle has completed her task of providing us an accrual number for discounts that are provided for Medicare / Medicaid. I put in the memo that it includes bad debt write offs, which it doesn't, so you should cross that off on the memo. This will really help, as we may do \$1 million in business in Billing, but we have to discount that 40% due to insurance discounts, Medicare payment, etc. It's a big step for our financials to be accurate. A big thank you to Michelle for doing that. We had a small loss of \$24,000, but we spent \$100,000 on capital. The Public Health remodel cost about \$105,000 when it was all said and done. We got a good tax receipt for November, getting about \$580,000 for the month in tax revenue. When we see our financials net month, we will be back on track with our goal for cash on hand. Hats off to the business office, who did a heck of a job with collections.

We asked at our October meeting for a snapshot of how we are running next to our budget. Michelle and Dave put together a projection of our budget vs our actuals. I put it in the notes, and it looks solid. If we keep operating how we planned, we will beat our expenses by \$1 million. Of course, there are some unexpected charges, such as the Chartis contract and some other things. But we are doing well expense wise. All the staff are operating on thin margins and

being very careful with their spending. The Org is being very careful with their budgets, and we should feel good about how we are spending the taxpayers' dollars. Thanks to Michelle for tracking it so carefully.

We renewed our health insurance with a 0% increase from last year. Tegelers did a great job! Our group is doing so well we are going to have a \$200,000 surplus in our account, which we can claim 66% of by the month of March. So, we'll have a big billing credit in March which will help cash flow. Tonia asked if that would be impacted with the merger of the Sublette Center. Dave Bell said we don't really have any idea how they are performing. Dave Doorn said that Tiffany Monk with Tegelers has said that it will help us to have more members. Right now, their expense for insurance is so high that most employees don't have their families insured. When we merge, they will probably all want to get their families (spouses and children) insured.

We need approval to increase the employer contribution into our employee HSA account. We have always mirrored our HSA contribution to the employee deductible, which went up \$200. We need to increase the HSA contribution from \$2800 to \$3000 effective January 1, 2023. Dave suggested that they pass that tonight, to put that into place as soon as possible. Dave motioned and Kenda seconded. Motion passed unanimously.

Dave Bell said that we need to start wrapping our heads around how our causality insurance is purchased. We will need to have this in place before the Hospital opens, which could be Sept 2024. We need to start to look at a big change in the way our property casualty insurance is purchased. They set some goals date wise – which are in the memo. They are planning how to gather the information, get it out to bid, and analyzing the bids in advance of the 2024 opening date.

Finally, Dave asked Michelle to give us a report on charge revenue by quarter for each department and each clinic. Look at Radiology. It has just exploded revenue-wise. It's good to see we are trending upwards in most categories. We have some challenges in Big Piney /Marbleton. Ashli asked what's the cause of the increase in Radiology and Dave said we purchased some new equipment and have been able to offer some new services. Tonia asked if we could note how many referrals are coming out of the Big Piney / Marbleton Clinic that go to the Pinedale clinic for Radiology. Jamison said a big thank you to the Finance Committee. They are doing what they are born to do. It takes a special kind of person. 😊

Building Committee- Jamison Ziegler/Tonia Hoffman

We gave approval for the asbestos abatement, the ditch work and the demolition of the old public health building. They are working hard on getting the ledgers and the pay apps. They are diligently working on those things right now. We met as a construction committee two weeks ago, and the contractor Layton is working very hard to get bids to bring this thing into a reasonable budget. The architects have worked on the scope of a lots of things, and the words "value engineering" are all over the place. They are doing their best to keep the project intact. The biggest problem right now is the Mechanical bid for HVAC and plumbing. The other big problem that we are seeing is that each bid has a huge allowance for housing. We are tossing around solutions to try and deal with that. Dave Doorn added that the HVAC / mechanical side has been the challenge. They just need more time to find a good solution.

Jamison added that we have the break apart in the budget that shows what dollar value is the portion that is Sublette Center and the portion that is CAH. It's slightly over 50% Sublette Center and slightly under 50% Hospital. It will be critical in some of the conversations that we have to have moving forward. Dave Bell said this is surprising, but important information.

We had requested some changes to the Membership Substitution agreement and sent them to the Sublette Center attorney well over a month ago. We had hoped they would sign the agreement today at their Board meeting, but they had not. Kenda added that Dawn at the board meeting forwarded them a copy of the agreement at the board meeting, but Dawn had not sent it earlier as she was waiting to hear from their attorney if he had approved it. As of today, they still have not heard from him.

Lena added that she would like to back up give some background. They have worked so hard on this. We chose to do the Membership Substitution because we thought it would save time, and they gave some good ground this summer. But here we are and that isn't what has played out. Mr. Healy and our attorneys went through the agreement and had no disagreements on November 1. They walked away thinking this is great. Mr. Healy didn't revise the document, so Lena stepped in and did so. Lena gave them to Mr. Healy on the 18th. The ongoing delay is very frustrating. Kenda said it was discussed that the Sublette Center board will have a special meeting as soon as they hear from Nick Healy. Nick told Lena that the special meeting would be Dec 20th and it would be considered. At the September 6th meeting with the County Commissioners, it was indicated by the Sublette Center that the agreement was drafted and ready to go. We are going on three months later, so the delay is puzzling.

Dave Bell noted this is really frustrating. Tonia noted we will keep forging ahead. Dave noted that the time delays have cost the tax payers of Sublette County millions of dollars. Dave asked if he was incorrect in that? Tonia wasn't sure we could assign a cost, but Tonia said that the time they have cost us and the slowdown of the entire process is significant. We've been at it for 4 years, since the MOU. Dave Bell asked if there is a deadline that we have and Tonia said that there was a hopeful closing date of Dec 9th. Abbi said, "is there a deadline?" no. But the elephant in the room is that the Hospital has an obligation to build a Long Term Care facility. If we keep kicking this can down the road, then at some point we will have to look at what our what our obligations are. Abbi hopes that this isn't needed. She had no idea there had even been that much discussion around the agreement. Eventually, though, if this keeps rolling down the hill and we don't have the Sublette Center participation then the Hospital has obligations. We have a USDA loan and commitments.

Dave Bell asked if we could plan a signing ceremony. Ashli asked what the disconnect is on our sense of urgency and the lack of urgency on the other side. Tonia said we haven't been able to identify that, which is the problem. She said we made commitments to the voters that this takes place and we have everything ready to go, but we can't get the formal agreement from the Sublette Center.

Abbi said that when they first sat down and the Membership Substitution was discussed, the Sublette Center board's attorney indicated that they wanted to ensure continuity of care for the residents of the Sublette Center. They were worried that when the Hospital board stepped in there would be no oversight or control from the former board members. They wanted to ensure their vision continues. Giving all benefit of the doubt to Sublette Center, they're lack of urgency comes from that thought. They're doing what they've always done, so it's not a big deal to continue to do it. But for us, it is a really big deal. We have commitments, and loans, and grants that are all riding on our commitment to provide a Long Term Care facility. Lena and Abbi continue to stress that in discussions. We do have a LOT riding on this. We need to get this going. Tonia ended starting, in the end it's our intent to bring these two organizations together and our intent has never changed or wavered. Tonia is hopeful for the next few weeks and that we will have action very soon. Abbi says that the board will be the first to know if anything shakes loose.

Ashli asked about the Merger Committee. Tonia said that Kenda and herself serve for SCHD and they have two members from the Sublette Center board: Patty Racich and Marilyn Jensen. We formed a joint planning committee when these discussions started and that's been vitally important. But we're at a standstill as we can't do any business as that Committee until our Merger is formalized – so we are stuck giving monthly reports that we are working on it.

Quality Committee

The Quality Committee was served by Wendy Boman, and they would appreciate Ashli taking that on. It's an important part of looking at the Quality of Care that we are providing. Dave reported that we have patient responses from Press Ganey and we finally have enough responses to start to have data. We look at what we are doing wrong and what we are doing right. We want to dig through that information and put processes in place that improve care. We've had this committee for over 6 months, and we are getting better and better at it. A big part of what we do is just identifying what needs to be fixed.

Dave Bell asked about the Press Ganey and there are some numbers that seem lower than others. Moving through your visit and the arrival seem to have lower numbers. Dave Doorn said we don't have base-lines yet really, but are starting to get a sense on areas we need work on. We have 80% positive reviews. Mike Hunsaker added that finding out what peer group is going to be key to finding the right peer group. Especially as we aren't really a hospital yet. It would be great to compare with the region and make sure that we are being compared with other organizations that match ours as closely as possible. Which might be hard, because as Mike points out we are a Clinic trying to become a hospital offering ER care. So finding our peers is tricky, but important.

Dave Bell said, not to beat a dead horse, but for example in the category called Arrival, only 75% like it. What does that mean? Kari pointed out that some of the questions are tricky, for example "Does the staff value your safety?" Mike has encouraged us to address specific things such as actually saying, "Because I value your safety I'm going to . . ." to use those specific words to remind the patient what we value. But again, we have started this now to figure it out as we move forward. Dave said we'll have to learn how the game is played and the more data we get the better the information will be. It will be great to have Ashli helping tackle this.

Dave Doorn added that we did an employee satisfaction survey. We just received the results and that is something we will be covering in Quality next meeting. This is yet another example of something we haven't done in the past, and are glad we have done it. SCHD had a 97% response rate, so we got almost every employee. Kenda added that the Sublette Center reviewed their results, which were done separately from SCHD though we paid for both. The Sublette Center results were great. We will get both onto Board Docs for the Dec meeting.

New Business

Sublette County Health Foundation

Last month we made a motion to offer a merger with the Green River Valley Health Foundation. They declined to do so. We have the basis for a Foundation in place and have applied for our own 501c3 number and are going to start going full steam ahead with our own Foundation. It is time to start raising some money for this hospital. The Foundation had a first board meeting a week and a half ago and discussed a bank account and formed Bylaws. We talked about the make-up of the board and what that would look like. We came up with some good ideas to move forward. We had some applications for Executive Director and some interviews for that. Dave moved to approve the Foundation Bylaws as presented. Kenda seconded. Motion passed. Ashli abstained as she had not yet reviewed them.

Sharon said she has finished the Foundation Director job description, and will be emailing it to the Foundation Board for approval, which are Tonia Hoffman, Dave Bell, Jamison Ziegler.

Approval of 2023 Board meeting dates - Fourth Wed is working great. Dave Bell motioned to approve the 2023 Board meetings as presented. Kenda seconded. Motion passed unanimously.

Old Business

- Policies – Chartis - already discussed above
- SLIB – already discussed above
- Marbleton Services – Mike reported that Eric Boley with the Wyoming Hospital Association had some communication 10 days ago about the Marbleton Clinic. He wanted more information on what we were trying to accomplish. He was going to the national Hospital Association conference and was going to see if anyone else in the country was doing what we needed. Perhaps we could find a role model.
- Approval of meeting minutes Oct 26, 2022 - Kenda moved to approve the regular meeting minutes and the ES meeting minutes from Oct 26, 2022. Dave seconded. Motion passed unanimously.
- Approval of Payroll and Bills - Dave motioned that we approve payroll and bills in the amount of \$1,059,106.66. Kenda seconded. Motion passed unanimously.

Public Comment - Robert asked if the GMP (the Gross Maximum Price) is still in question. Tonia answered yes, we haven't nailed it down yet. That's what the building committee report references: the ongoing exercise of getting the GMP set by trying to lower costs.

Executive Session: *Personnel and Legal* – 7:47pm – Dave motioned and Kenda seconded to go into ES.

8:51pm – Out of Executive Session.

Adjournment- Dave motioned and Ashli seconded to adjourn. Motion passed unanimously.

Minutes taken by Kari DeWitt

Tonia Hoffman, Board Chair

Date

Dave Doorn, Administrator

Date