



Sublette County Hospital District

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

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Sublette County Hospital District Board Meeting Minutes April 27, 2022 at 5:30pm Marbleton Town Hall Marbleton, WY

Meeting Call to Order 5:30 p.m.

Board Members in Attendance

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

Meeting Call to Order 5:30pm

Public Meeting - public input on the Hospital project

Tonia stated that we've called a special public hearing as we end the near of the USDA process in applying for funding for a Critical Access Hospital. We would ask, as there are so many people, if everyone could come up to the microphone and state their name and affiliation if you have one.

Representative Albert Sommers – In my capacity as a legislator I have worked hard to serve our community. I think it's important that Sublette County have advanced health care to the extent possible, especially as we are so remote. He supports the project and wants to wish us the best of luck in completing this funding process.

Joan Mitchell, Director of Southwest Pioneers Retirement Center for 20 years - She's excited for this project to come and looks forward to it. She can't tell us the number of times that seniors in Sublette County have moved away to be closer to healthcare and closer to hospitals. So she would like to thank the board for all the work that has been done, particularly looking a care for seniors and memory care. She hopes this project will make it possible that the citizens of Sublette County CAN stay here and not feel like they need to move to be closer to healthcare.

Sam Bixler, Economic Development consultant and Municipal Judge – Thank you for having me. He thinks this community has proven that they want this project by voting to create the Hospital district and increasing their taxes. He hopes this USDA sees this and continues to move the project forward.

Cindy Van –Cora, Wyoming and a retired nurse – She is 100% supportive of the hospital and has been supportive of this since the project started. The majority of Sublette County voted in 2020 to create a hospital district and have a one mil tax increase. This is huge for Sublette County and there is resounding support for having a hospital and a new long term care facility. She feels like people are getting tired of waiting. Sublette County is geographically the size of Connecticut and we are the only county in Wyoming without a hospital. The needs are great. The hospital will elevate care because the better reimbursement will be there. Right now, we get reimbursement as an office visit. There is not proper reimbursement for trauma care, intubations, and all the things that happen in an emergency. That's not fair to the citizens of this county. Once the hospital is built, my husband and I will not hesitate to use the services. It's critical to have it. This hospital

project is right sized, and at the right time. All the major players are on board, the Commissioners, all three mayors, the Sublette Center, really everyone. Everyone is moving in one direction and it's time.

Bettina Sparrowe, Daniel WY - My father passed away two years ago at 97 and we have been supportive of the hospital ever since the idea began. I am hopeful because we are on a really good strong path. We don't like to have to travel for emergency situations and healthcare. We had to travel often with my father when he was with us. As me and my husband age, we are considering if they can live in Sublette County without healthcare services. Having a critical access hospital would give us great peace of mind.

Mayor Matt Murdock, Mayor of Pinedale – The Town of Pinedale has been very supportive of the hospital and the work being done by the Hospital district. The Town supports this. It's been on the list of town priorities for the past six years. We are willing to help anyway we can on this project. This will make a significant impact on our community, both on the health side and the economic impact. The citizens have voted and shown support for this project and the USDA. The Town of Pinedale and all five council members heartily support this work.

Tom Noble, Sublette County Commissioner - I want to state my support for this project. The Commissioners have already made at least three motions in support of this project throughout the years. We've also pledged up to \$20 million for the nursing facility. I don't think the Commissioners can show any more support for this project. (laughs). The community has also shown support through the formation of a hospital district. It's been a complete reset for healthcare in Sublette County and it moves us into the future.

Peter Scherbel – Sublette County Chamber of Commerce. Back in 2020 the Directors of the Chamber of Commerce supported the vote for creation of a hospital district mainly for economic diversity and job creation that this hospital will bring. Our board makeup has changed since 2020 and we still have the same board support that we had before. It continues to serve the mission of the Chamber of Commerce, which is to create and foster a sustainable business climate in Sublette County Wyoming. We're excited for the progress this is making. We are grateful for the Hospital Board and the transparency throughout this process. We appreciate the weekly updates on Facebook and the recent mixer to help the community become more familiar with our Providers and the members of the Board. We are also grateful for the partnership with Star Valley Health, because this is new ground for all of us and it's great to have a partner along for the ride who has been through a similar process to what we are going through. Being a rural area with a Critical Access Hospital, they have shown how it can succeed. The Chamber board, in light of the economic development and job creation, stands firmly in favor of this.

Tami Crosson – I feel horrible being the first person to oppose this critical access hospital and USDA loan. I am still trying to figure out how we are going to financially support it. I'm still waiting to hear back from the board, because I specifically sent you an email, asking how we are going to do this when we still have three years before we are a hospital. How are we going to support such a thing when we are having a hard time supporting a clinic? I also want to say, and I've said this to the USDA, I don't think we understand the needs for healthcare for our community. And I don't think a CAH addresses those needs. I think we can look at other things, Urgent Care, emergency room, contract out with another hospital. I don't think we have to be burdened with a Critical Access Hospital and the burden that goes along with that. I do appreciate that you guys are open to hearing the comments from everyone. Those in favor or and those not in favor of. I appreciate that time.

Lynn Bernard, past Chair of Sublette Center, Boulder WY – My comments might sound anti-CAH, but they are not. I believe a CAH is needed, but not at the magnitude of what is being planned. The reason for that is this. If I were to invest my money, it would be done with much more caution if I was spending Dr. Burnett's

money than my own. If I was spending mine, I would be much more cautious. We are spending everyone else's money except our own, except on the tax rolls. If a business owner wanted to start a business and wanted to expand a business, they wouldn't jump in and spend \$20 million on a business they could do for \$2 million. Most businesses would start at the small end of the scale and grow from there. Back in 2016 when Dr. Kappenman started this, we were talking about a small add-on to the existing clinic that could be done for \$8 million. Trying to meet the benefits of the Medicare flowback monies. But from there it grew. At the end of it, Ms. Warner (sic) said at that point and time the project is too much money. We need to revamp it and get more community involvement. We need to create a plan. Some of those have been done, but we struggle to support clinics today. Pinedale struggles and Marbleton / Big Piney really struggles. We need to create something viable before we can do something new. This clinic could become an urgent care. We need 24/7 availability on the healthcare district. When we start a new project or have development, we need a need-based study. Do we need it or are we only acting on our sense of entitlement? We haven't had a vote on the creation of a CAH. We had a vote yes, but on the formation of a hospital district. It had nothing to do with a CAH. The Eide Bailly report in 2015 was started and completed in 5 months. The one today took over two years. As a taxpayer, I look at it as someone was pushing and trying to get Eide Bailly to adjust the numbers. When we look at today's economy, it's worse than it was in 2016 and Lorraine Werner said that it was too much money then. What we are asking today, that dollar amount doesn't work in my mind. When we look at the CAH, it was only to form a hospital district and use the assets of the Sublette Center as collateral for the liability of a CAH. Sublette Center is composed of four cash components: Aspen Grove apartments, Heritage apartments, Medicare and the Commissioners income. Commissioners is \$400,000 a year. Medicare is \$300,000. Heritage is \$360,000 and Aspen Grove is \$280,000. It barely breaks even today. If we take any one of those components and move it away from the Sublette Center, it loses money. When we take two of them away, because we losing the Commissioners' money and the Aspen Grove and Heritage monies, Sublette Center is upside down from the onset. It won't fly. When that happens, it's going to roll back to us to pay it on our tax rolls. Bottom line is, and my last conversation with Lorraine Werner was not acceptable to me. She's a wonderful lady, but her conversation was well Lynn if you don't do it now, when you do it in 10 years it's going to be \$100 million dollars. Bottom line is, if we can't afford it today, does it afford it in 10 years from now? And it doesn't. The business model is to start small and grow into it

Trena Eiden, Big Piney WY (wouldn't come to the microphone. Hard to hear)– 181 rural hospitals across America closing. 9 of them in California. CAH's have closed since 2009. The Gillette hospital is to be insolvent in 2026. How would you answer that? How would you answer any of that? Tonia responded that we are in a very different situation with our tax revenue. Tonia's easy answer would be we are working very hard to complete this project so we can become self sufficient and not rely so much on taxpayer dollars. Trena: 181 CAH's closing. This county should go, woah. Tonia: I think there are so many factors involved in that. How they are managed and what the local economies and how much healthcare is available and competition. We are kinda in a healthcare desert here. It's comparing apples to oranges. Trena: We aren't in a desert. We all go to Jackson. Tonia replied we are working at it daily. One of our primary goals.

Louann Heydt, Big Piney WY – I support this project. I don't think it's a frivolous want. I think it's a critical need. For me, I'll say the same thing I've said for seven years, emergency services is paramount. We have got to get a critical access hospital to get the cost-based reimbursement. We have to look to the future, not only for the seniors who are going to really need this long-term care facility. Also having a CAH will help our seniors save a ton of money. I've worked with a lot of senior people who have taken care of two parents, and we were always having to travel. That's a huge cost. For me, as Sublette County, we need this, we need our services. An Urgent Care is not what we need in Big Piney Wyoming. We need real services, emergency services and we need to get our Emergency Room back in the future, which I believe will happen. I here that

other places are closing and I agree there are a lot of unknowns, but I think it has a lot to do with how something is operated. We have good people behind this. I believe the USDA is a lot smarter people than I am. If the USDA says it is viable, then it is viable. The majority of the people of Sublette County support it, and those are who we need to listen to. I hope the USDA approval comes quickly.

Dr. David Burnett – Physician in Sublette County for 33 years I have a lot to say on this topic and not sure if I have enough time to say it. I will say that the process of moving towards a CAH was started with the intent to be able to provide care for the people of this County. Whether its senior care, or public health or clinical care or emergency medicine. The journey has been exhausting. Also amazing at the people who have worked together and set aside their differences to move forward with the goal of improving quality of care in health services. I would like to address a few things that have been said. #1, Urgent Care is not an answer because urgent care does not encompass any emergency medicine. It's not the same thing as is required under state law, nor it is allowed under the licensure of those people providing the care. Fortunately, Sublette County has been unique enough that we have had a number of dedicated nursing, physician, lab, etc. that have carried this task on for many year. They wear the hat of all things that are necessary, whether it is emergency care or routine care. #2: While there are 181 rural hospitals closing around the nation is a true statement, how many of those are within 5-10 miles of another hospital? I don't know. I don't know that this pertains to us at this moment. #3: Lorraine Werner's comments from 2016 were totally appropriate at the time, but this moment is a totally different moment in time. At that time, we did not have widespread community support, we did not have all the entities coming together, the towns, commissioners, Sublette Center, etc. At that time, we didn't have the assets committed on the part of the County, which is now \$20 million for a new nursing facility as well as over \$40 million in facilities. The County owns those and is willing to donate them. The County has gone above and beyond in my mind. None of has a crystal ball. None of us knows what the future holds, but if we don't try, we aren't going to have anything. The take home point in terms of healthcare, if you don't have a hospital designation and you can't get those reimbursement rates, you can't afford to keep your doors open. Will the hospital guarantee us that? No, but it gives us that opportunity. I don't think it's possible, feasible, or even legal to have another Hospital come in and quote "rent or lease" our buildings to provide medical care. CMS does not work that way. You have to provide medical care as a hospital – so we have to start at that point. I was skeptical of this project and I've looked at it from many angles. I'm fully supportive now because I've exhausted looking at other option. In my opinion this is the only chance we have moving forward to sustain healthcare in Sublette County. Thank you.

Ashli Tatro, mom of three kids, Boulder WY – Thank you for allowing me to speak. I would just like to express my support as a community member. I experienced an incident several years ago where I had a uterine hemorrhage and was experiencing massive blood loss. I was given excellent care at the Clinic here, but they were limited in what they could do. Because they are not a hospital, they don't have blood. They couldn't give blood. I was unable to get on a life flight quickly due to weather. It took about 6 hours from the time the incident began to when they could get me to a hospital to receive blood. I just feel like the emergency care, even though they do what they can, they are limited. We need to have a hospital designation to expand the emergency care they can provide. For me and my family, that's something that is very very important and that I'm very passionate about to ensure that we have this for our community. Mine was one incident for me, but who's next? What can we do to help ensure the safety of our community and that we can get them emergency care when they need it? I'm in support and wanted to take the time to express that.

Mike Pompey, former Rural Healthcare Board Member – I want to express my support for the Hospital. I have been a part of the healthcare district and in the process of getting it moving on. I was part of the election and that was a strong indication, not only for the hospital. The need for the hospital district was to be able to create the hospital itself. There is strong support in the County for this. This thing has been looked at four

different ways to Sunday to see if it's viable. USDA has looked at it. We've seen at least three different financial analyses for this and all have said, yes it can happen. I want to express my appreciation for Star Valley being involved in this. I spent several days in Star Valley Hospital on March 10th having back surgery and the staff was awesome; fully supportive and fully wonderful. It's the type of staff we can draw on in terms of training our staff to be in a hospital and do their new job. I don't want to take a lot of time, but I am involved in this. I've invested in this and want to see it go.

Tonia wants to say thank you. Thanks for all of your comment. That's the great thing about America. We appreciate you being here and sharing. We know this has been an exhaustive process, we are well aware, and as Dr. Burnett said we feel like we have exhausted every other option that is out there and we do feel confident in moving forward with the plan we have. I personally feel confident. I was against this plan to begin with, but it has evolved and changed. We've looked at every other option and nothing else seems to work. I would also like to share that we feel very confident with the leadership in Star Valley Health. They been through things that we are familiar with, the growing pains. I feel very confident that they will be able to lead us through this process and what it entails. I feel very confident in them. I know that this is a risk and there are people who feel like this isn't something we should be doing. But I truly believe that there isn't reward without some risk and we're at the point in time where we have to do something. Those are my personal comments and I would invite the board to share any comments.

Dave Bell added that the Board agreed with Tonia's comments. With no one else having anything else to say, we transitioned into the regular meeting.

Pledge of Allegiance – 6:09pm

Set Agenda – Dave Bell moved and Wendy seconded. Motion passed unanimously.

Department Reports:

Administrator's Report: Dave Doorn/Mike Hunsaker

(Nursing, Lab, EMS, Public Relation reports will be in Board Docs)

Dave Doorn - Tonight we are going to do things a little differently. I will give overviews of the staff reports. They are all here if you would like to ask questions.

Dr. Hastey, an Internal Medicine doctor we've hired, is ready to start on June 1. He's from Wisconsin and has his Wyoming License. We are looking at the Rural Healthcare Clinic designation for the Pinedale Clinic and Marbleton Clinic. It looks like we could improve our Medicare / Medicaid reimbursements rates significantly. NOSORH (National Organization of State Offices of Rural Health) gave us their projections based on our data. We want to get one more opinion from either Eide Bailly or DMZ to see if they agree it would significantly improve revenues.

It's lab week, and they've been doing some fun things. The number of lab tests has doubled in the past year. That's quite a statistic. It's been 36 days without a COVID positive. We are fully staffed in nursing. Vicky got creative, so we don't have to have a nurse on call for the weekends. Rather, we use a paramedic to cover the ER for the weekends. It's really going well. Kari and Dave attended the Marbleton Senior Center lunch this month and passed out Community Health Needs Assessment forms and annual reports. Dave has been regularly attending the County Commissioners meetings this year. They are working on how the transfer will look once we have USDA approval.



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Bill's EMS report is that they are continuing ACLS and PALS. We have an EMT – I class that just has 3 weeks left, which will graduate this group as Intermediates. We continue to educate our staff. We had a stand by at the State Fairgrounds. Bill's on Zoom if you have any questions.

Vicky's report: Molly Landers and Shelbi Streiff completed a emergency pediatric class. They continue to work on protocols and work flows. And it's great being fully staffed again in Nursing.

Sharon's report: It's lab week. The Med Tech program is progressing. St. John's opened their blood bank to further their training. One of the big projects Sharon is doing is looking at every test we do, what the reimbursement is and what we charge. She's making sure that each test is financially viable.

Dave will let Kari cover Public Relations and Grant writing herself.

Dr. Burnett: Wants everyone to know we are improving and increasing our chart review process. We are sending a handful of charts to Star Valley Health every month for an unbiased outside chart review. It's been a great process.

Mike Hunsaker: Wanted to take one minute, since we have a good audience tonight, and share the significance of the recruitment of an Internal Medicine physician to Sublette County. An Internal Medicine Physician, if you aren't aware, is someone who does adult medicine. They take care of adults – those who have diabetes or congestive heart failure or other needs that happen in adults. Dr. Hastey is going to be able to take care of those things, and take care of your medical needs locally. We're going to have him in Marbleton / Big Piney and Pinedale seeing patients five days a week. We are thrilled about the opportunity to have this type of medicine. It's a really good thing for the senior population to not have to travel to seek medical care.

Dave Bell asked Vicky, when Shelbi and Molly do great things like they have done do we reward them in any way? Vicky said it is written into the job description. They aren't rewarded monetarily, but they are always rewarded by Vicky personally.

Dave Bell asked what motivated changing to Dave Doorn summarizing the Department reports. Dave reported that we are trying to streamline the meetings as we make the transition to being a Hospital. This is more typical of other hospital board meetings. Dave Doorn said that they will have the Department reports in Board Docs the Friday before the Board meeting. Dave Bell asked if this is the permanent report format. He said he missed heading the direct contact with the staff. Tonia said they will take that under consideration.

Dr. Burnett just wanted to expound on something. We are starting the process of looking at pain management in our patient population. We have added a position of Pain Coordinator. It's going to help the providers to give consistent care. Opioids are a problem in our country, in our county and our state, so we need to show we are making the right treatment decisions as we move forward. Giving proper care and consideration to this will help improve patient care.

Executive Session: Wendy moved and Kenda seconded. Motion passed unanimously at 6:25pm.

Personnel and Legal

7:46pm. Wendy moved and Kenda seconded to come out of Executive Session. No action was taken in ES.

Tonia noted that they had inadvertently skipping the PR / Grant Report.

Kari DeWitt reported that the “Name the new Hospital” competition is complete and Sublette County Health has won. We are working on getting logo and will get that to both the Joint Planning Committee and the board. Continue to do FB Live updates, KPIN radio interviews, newspaper articles, website, email newsletter and Pinedale Online articles. The DAISY award for nurses is coming up. Nominations are due Friday, April 29th. We are going to host a dinner at Leslie Hagenstein’s house on May 6th for all nurses in Sublette County, including clinic nurses, Sublette Center, Public Health nurses and school nurses. For PR, it’s a great opportunity to get everyone together across the county. The Museum of the Mountain Man opens Sunday, and will have a display “100 years of healthcare.” Kari helped create the exhibit.

Kari reported that Grant Writing continues to go well. The state of Wyoming is preparing to release the guidelines for the ARPA funds – which includes \$10 million for healthcare infrastructure. We would be eligible (and are very well positioned) to receive that \$10 million in ARPA funding. In Kari’s mind, this makes getting an answer from the USDA more urgent than ever. We’ve been told we cannot apply for those funds without an answer from the USDA. Our most recent FEMA grant was received, for \$78,575. And Kari and Michelle are completing an application for \$89,000 for the first quarter of 2022. The feds extended the FEMA emergency reimbursement to Dec 31, 2022, so we can continue to apply for FEMA grants. To date, Kari has raised \$1.29 million in grants since last July.

Committee Reports:

Finance Committee-Kenda Tanner/Dave Bell Clinic visits were up on both ends of the county, as were Ultrasound visits. Kayla from Radiology came to the Finance Committee meeting and asked that we consider purchasing a cariac echo attachment that would go with our new ultrasound machine. It would provide a new revenue stream and we would be able to utilize it a great deal. We currently have Karen Noble who is certified to do echoes on our staff. Dr. Mullen, our visiting cardiologist, has requested it. They have been able to demo the attachment and everyone loved it. The amount is \$40,500 and that includes the table that it sits on. If we decide to make this purchase, it is 10 weeks out to order the equipment and the payment will occur in next fiscal year. Dave Bell moved to authorize a PO to purchase the echo cardiogram attachment and Jamison seconded. Motion passed unanimously.

Kelli came to the Finance Committee meeting and said that there are certain procedures that we are charging LESS than insurance is willing to pay. If we don’t implement regular fee adjustments, we can’t expect to keep up with inflation. The Finance Committee is asking the board to consider a moderate fee increase of 2.3% on ONLY the procedures that we are currently charging below the going rate. Kelli did an impact study and found that it would generate an average increase of \$5 per patient per encounter. Dave Bell moved and Jamison Ziegler seconded that we implement this rate increase only on the procedures presented. Dave Bell added that we move to do this particular rate increase, but that we study payment options for the uninsured and under-insured. Dave Doorn noted that we have help available and have a Financial Aid process in place. There is help right now. The number of the uninsured in the County is pretty high right now. Dave Doorn and Mike Hunsaker are going to look at that and come back next month with options to further help the under insured and un-insured. Mike added a point of information: this is not an across the board 2.3% increase. This is a select number of services that we are below the amount that insurance is willing to pay. That’s an important distinction. With no further discussion, the motion passed unanimously.

Building Committee- Jamison Ziegler/Tonia Hoffman Nothing to report. Dave Bell asked if we have had contact with Layton Construction about potential issues when we start to move forward and any increased costs. Tonia reports that Layton Construction is on our weekly standing meeting. Jamison added that the architect was asked if the plans were still feasible and they stood by them. They are still feasible.

Mike added that we talk quite a bit about value engineering. The USDA also questions that regularly, as the USDA requires that we build a “modest” building. When we value engineer, the more “extravagant” (for lack of a better word), might have to be cut. For example, quartz countertops: while they would be nice, those are the type of item that might have to be cut. The goal continues to be to stay on budget. Dave Doorn added that when we get the real bids we will know where we land and then we can figure out how to stay on budget. That is dependent on an answer from the USDA.

Merger Committee-Merger Status Update -Tonia Hoffman/Kenda Tanner Merge Committee is in the same boat – unable to take action until we get an answer from the USDA. The attorneys for the SCHD and the Sublette Center continue to work on what the merger will look like. Dave Doorn added that he has been invited to attend the Sublette Center Board meetings monthly and is doing so to answer questions.

Quality Committee-Wendy Boman - For the patient satisfaction surveys we continue to wait on University of Utah to be able to get patient records to the survey company, Press Ganey. They are very close. Reading the internal comment box comments at the staff meetings was a great idea and it is helping to raise moral. External chart reviews with Star Valley Health continue. Dr. Kirk with Star Valley Health has been fantastic to work with. We are looking forward to some reports next month on patient satisfaction with scheduling (are there ways to make scheduling easier for patients?) and a Lab / Radiology delay of service log (are there better procedures we can use?). We continue to look for places to improve. The new ultrasound is in Pinedale and the older one has been moved to the Marbleton / Big Piney. Both are being actively used. Dr. Wallace, our new Medical Director of Emergency Services, is working on updating protocols. He’s starting with stroke and chest pain protocols.

Mike added that we will be taking comments from the Community Health Needs Assessment and condensing it into a final report. We will use this data from the community to guide our strategic planning. We really appreciate the community stepping up and helping shape the future of healthcare. 485 people responded, which is a great response. Tonia thanked Kari for doing all the work on collecting the data.

New Business

- **USDA Application Updates-Dave Doorn** – We were surprised with more questions from the USDA. We received an approval on our Environmental report in September 2021 from the USDA office. Evidentially, it wasn’t the final approval we had thought it was. After Monday’s meeting, we were presented with a litany of new environmental questions, but we have been working through them. Representative Albert Sommers helped us with the DEQ. Commissioner Tom Noble helped with the state corps of engineers. Jorgensen Engineering helped a bunch and Abe Pearce with the Town of Pinedale. Everyone has jumped in to try and help get answers quickly. For example, we have to prove that we are above a 500 year flood plain, which shouldn’t be hard but there are no flood maps here. We have Myra Peaks, our Environmental Report writer, who did a report for us in September continuing to work on this. This next level of review is a complete surprise. We have to work on an endangered species question and a traffic report. We are hoping to have these questions done by the end of the week. Stroudwater had a few things to clean up, but those forms are done. Mike Hunsaker pointed out that this is positive because the people asking the questions now are the ones making the decision in Washington. It is great to be on a call when with the decision makers. We are talking to the right people finally. Dave Bell asked how we document that we had this meeting, per USDA requirements. Kari stated that she has all the Public Notice documented and will send the minutes of this meeting to the USDA.
- **RHC designation for the Pinedale Clinic and Marbleton Clinic** – We are investigating the potential of becoming a Rural Health Clinic designation. Dave Doorn mentioned this in his report.

This would offer a better rate for Medicare and Medicaid reimbursement. We are getting a second opinion on the numbers.

- Non-profit Foundation – Dave Bell made a motion to table this item till the May meeting and Kenda seconded it. Motion passed unanimously.

Old Business

- Big Piney / Marbleton Clinic updates – Dave Doorn reported that we had thought it would be possible to split the lobby to accommodate a reception area for the Marbleton / Big Piney clinic ER. The state is not asking for a completely separate reception area for the Marbleton ER. There is a possibility we have to move the lab to make room for this. It's going to be more work than we thought. This is to meet the requirements of a free standing Emergency Room, which are required to be complete by 2025.
- RFP for Owner's Representative – We received four proposals back from all very well qualified Owner's Rep companies. The price range was surprising from \$700,000 to \$149,000. Dave and Mike went through a scoring matrix and almost scored them the same. They all have USDA experience. Two things stood out: price and that the company that stood out has worked with Star Valley Health for the past three years. It's a small company, but being in the area there is some travel savings. Mike asked Jamison and Tonia if they had read the proposals and done the scoring matrix. Jamison said the most expensive group was impressive and all four were well qualified, but relationships matter. If SVH knows one of the groups, then that's a strong recommendation. Jamison was disappointed that none of the firms recommended more than one site visit a month, but technology can cross many barriers. Riverton got their USDA approval and will be busting out of the gates. It will be good to have two projects going in the area. Dave Bell asked if we had any local bids and we did not. Tonia said that many of the more expensive bids had services that we could have benefited in the past, in the design process and application process, but as we are past those stages, then the smaller company would suit our needs. Dave Bell asked if it is a fixed price for services. It's a fixed price plus travel expenses. This is part of the project costs. Dave Doorn asked that they make the recommendation to tell Karl Lueschow that he has the winning bid and that we wouldn't be signing a contract until USDA approval. Jamison moved to approve Karl Lueschow as the Owner's Representative contingent on USDA approval. Kenda seconded. Tonia, Kenda and Jamison voted yes. Wendy and Dave voted no, wanting to see the full proposal. Mike Hunsaker emailed them the full proposal from his phone, as only pages 1-3 were loaded on Board Docs.
- Community Health Needs Assessment Survey – 485 surveys completed. People want more services and want to see mental health in Sublette County. People feel strongly about their community healthcare and want to see services offered locally. Tonia added that people seemed grateful to be asked for their opinions. This will be required when we are a hospital, but we needed this information for our strategic plan so we jumped ahead and did it this year. Future CHNA's will involve all the community partners, including Public Health, mental health and others.

Jamison asked after reading the feedback, where do we go in terms of the request for mental health services. Mike answered from the standpoint of future CHNA we would invite behavioral health providers and other partners to participate in the next survey. SVH did this in their most recent CHNA and they ended up hiring more licensed counselors. This means the Physicians can walk patients right down the hall and lead them to someone who can help with their mental health needs. SVH can address mental health in house. Mike sees the future for Sublette County to work very closely with the current mental health providers or we would see if there is more need. Tonia also added that we've taken a big step in planning a Title 25 bed. Dave Doorn let the board know that



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we've been providing a room for High Country Behavioral health in Marbleton Clinic so they can provide services to that end of the County.

- Strategic Planning – Dave and Mike worked on it today have a good start on it. They want to layer in the needs outlined in the CHNA. They hope to have a solid draft for the May meeting and give the Board time to chew on it before having to approve is at a June meeting for the upcoming fiscal year. Mike said we will try not to make it too lengthy. We know that a strategic plan with 40 items rarely gets accomplished, but one with 10-12 can be achieved. Mike thinks they'll be pleased to see what they have to offer. Tonia said it's difficult to narrow down when you are drinking through a firehose.
- Approval of meeting minutes March 23, 2022 and April 6, 2022 and the 3/23 and 4/6 ES meeting minutes. Dave moved and Kenda seconded to approve all four sets of minutes. Motion passed unanimously.
- Approval of Payroll and Bills Kenda motioned and Dave seconded to approve payroll and bills in the amount of \$1,039,021.86. Motion passed unanimously.

Public Comment - Bettina Sparrowe asked why she is getting life flight membership letters in the mail. As of this year, legislature has passed a bill that air ambulance cannot balance bill you. If you have insurance and you do get a flight, then they can only bill you what the insurance will pay. You can get a membership, but they wouldn't be allowed to bill you further. Bettina asked if Medicare would pay for any potential flight that she needed to took. Bill said for example, if you took a flight and it cost you \$50,000. And they bill the insurance \$50,000 and your insurance says they will only pay \$25,000. Then that's all they can collect. They can't come bill you for the other \$25,000. So, with this new law in Wyoming, life flight memberships really aren't necessary. Great question Bettina. Thank you.

Adjournment - 8:33pm Wendy motioned and Kenda seconded. Motion passed unanimously.

Minutes taken by Kari DeWitt

Tonia Hoffman, Board Chair

Date

Dave Doorn, Administrator

Date