

**River's Edge Hospital**  
**HOSPITAL COMMISSION MEETING**

Wednesday, May 22, 2019

12:30 p.m.

**Mission**

To provide quality health services.

**Vision**

To improve the health of all individuals we serve.

- 1. CALL TO ORDER**
- 2. APPROVE AGENDA – pg 1**
- 3. VISITORS**
  - A. Scheduling of Visitor Comments on Agenda Items
  - B. General Visitor Comments
- 4. APPROVE HOSPITAL COMMISSION MEETING MINUTES**  
(Mot) A. April 24, 2019 Regular Meeting – pg 2
- 5. APPROVE CONSENT AGENDA**
  - A. Accept May 15, 2019 Finance Committee Meeting Minutes – pg 7
  - B. Accept May 15, 2019 Quality Committee Meeting Minutes – pg 16
  - C. Accept May 16, 2019 Building Committee Meeting Minutes – pg 24
  - D. Accept May 7, 2019 Medical Staff Meeting Minutes – pg 26
- 6. COMMISSION DEVELOPMENT**  
(Info) A. QHR Webinar: Compliance
- 7. ANNUAL BENEFITS REPORT**  
(Info) A. QHR Contract Benefits – Dave Yackell
- 8. MEDICAL STAFF**  
(Mot) A. Approve Membership Recommendation – pg 32  
(Mot) B. Approve Privileges Recommendation
- 9. QUALITY COMMITTEE**  
(Info) A. Quality Dashboard – pg 33
- 10. ADMINISTRATIVE REPORTS**  
(Info) A. Executive Summary – pg 34  
(Info) B. Statistical & Strategic Plan Dashboards – pg 35
- 11. FINANCE COMMITTEE**  
(Info) A. Financial Summary – pg 37  
(Mot) B. Approve Write Off to Collection Recommendation – pg 38  
(Mot) C. Approve Accounts Payable Recommendation – pg 40  
(Mot) D. Capital Purchase Requests – pg 42
- 12. BUILDING COMMITTEE**  
(Info) A. Monthly Status & Budget Report – pg 52  
(Mot) B. Change Orders Recommendation – pg 58
- 13. ADJOURN**

## **RIVER'S EDGE HOSPITAL & CLINIC COMMISSION MEETING**

River's Edge Hospital & Clinic – Helen G. White Conference Center

Wednesday, April 24, 2019

**Present:** Margie Nelsen, Chairperson; John Lammert, Vice Chairperson; Blake Combellick, Secretary. Trustees: Jerry Pfeifer, MaryAnn Harty, Laura Hulsebus, Gary Swedberg, Stephen Grams; Kyle Swanson, Chief of Medical Staff; George Rohrich, CEO; Lori Zook, CFO; Jackie Kimmet, Chief Human Resources Officer; Janelle Rauchman, Chief Quality Officer; Stephanie Holden, Chief Marketing Officer; Paula Meskan, Chief Nursing Officer; Todd Prafke, St. Peter City Administrator; Samantha Pherson, Recorder.

**Absent:** None

### **CALL TO ORDER**

The regular meeting of the Hospital Commission was called to order at 12:31 p.m. by Chairperson Margie Nelsen.

### **APPROVAL OF AGENDA**

The April 24, 2019 Agenda was reviewed.

**ACTION:** A motion was made by Jerry Pfeifer to approve the April 24, 2019 agenda. The motion was seconded by MaryAnn Harty and carried with all members voting in favor.

### **APPROVAL OF MINUTES**

The March 27, 2019 Hospital Commission Minutes were reviewed.

**ACTION:** A motion was made by Blake Combellick to approve the March 27, 2019 Hospital Commission Minutes. The motion was seconded by John Lammert and carried with all members voting in favor.

### **APPROVAL OF CONSENT AGENDA**

The consent agenda includes the following:

- Acceptance of the April 17, 2019 Finance Committee Meeting Minutes.
- Acceptance of the April 17, 2019 Quality Committee Meeting Minutes.
- Acceptance of the April 18, 2019 Building Committee Meeting Minutes.

**ACTION:** A motion was made by MaryAnn Harty to approve the consent agenda. The motion was seconded by Laura Hulsebus and carried with all members voting in favor.

### **GENERAL VISITOR COMMENTS**

Visitors: Chuck Zieman, Mayor of Saint Peter; Sally Vogel, City of Saint Peter; Mark Dale, Eide Bailly.

### **ANNUAL AUDIT REPORT**

Mark Dale from Eide Bailly presented the Annual Audit Report to the Hospital Commission. A handout was presented and reviewed with the Hospital Commission.

**ACTION:** A motion was made by Jerry Pfeifer to accept the Eide Bailly Annual Audit Report. The motions was seconded by Blake Combellick and carried with all members voting in favor.

## **COMMISSION EDUCATION REPORT**

### **A. QHR Webinar:**

On April 9, 2019 the Hospital Commission was invited to attend a QHR Webinar titled: Reimbursement & Regulatory Updates.

### **B. Commission Self Evaluation:**

The Hospital Commission discussed adding an action plan to go along with the evaluation. The commission discussed adding the evaluation into the Hospital Commission Bylaws.

## **MEDICAL STAFF**

**Medical Staff Credentialing** - A report from the Executive/Credentials Committee of the Medical Staff was presented for review. A recommendation was made by the Credentials Committee to approve medical staff membership and granting of privileges to the physicians and allied health professionals as listed on the report:

### **Initial Appointment to the Medical Staff:**

Jennifer L. Hillestad, CNP  
Madhuresh Kumar, MD

Courtesy Staff/AHP, Urgent Care  
Active Staff, IM/Hospitalist

### **Reappointment to the Medical Staff:**

David A. Bryce, MD  
Seth A. Consoer, MD  
Alison M. Huber, PA-C  
Richard L. Lowry, OPA-C  
Mitchell N. Palmer, MD  
Stephen H. Pearson, MD

Courtesy Staff, Pain Management  
Courtesy Staff, Ophthalmology  
Active Staff/AHP, Orthopaedic PA  
Courtesy Staff/AHP, Orthopaedic PA  
Courtesy Staff, Emergency Medicine  
Courtesy Staff, Radiology

### **Change in Category – Provisional to Full Membership:**

Brett J. Baldwin, DO  
Timothy N. Christiansen, MD

Active Staff, ENT  
Active Staff, ENT

### **Provisional Membership:** None

### **Change in Clinical Privileges:**

Stephen H. Pearson

Courtesy Staff, Radiology

### **Withdrawn from Medical Staff:**

Holly Gisi-York, CNP  
Hassan Salameh, MD

Courtesy Staff/AHP, Urgent Care  
Active Staff, IM/Hospitalist

## **ACTION:**

- 1) A motion was made by MaryAnn Harty to accept the recommendation of the Credentials Committee and grant appointment, reappointment or change in status for each of the practitioners listed above. The motion was seconded by John Lammert and carried with all members voting in favor.
- 2) A motion was made by Gary Swedberg to accept the recommendation of the Credentials Committee and grant clinical privileges to each of the practitioners as listed above as requested and approved by the Credentials Committee. The motion was seconded by Blake Combellick and carried with all members voting in favor.

## **Hospital Commission Meeting Minutes**

River's Edge Hospital & Clinic

April 24, 2019 Page 3

### **QUALITY REPORT**

The Quality Management Committee minutes from the April 17, 2019 meeting were reviewed. The Quality Dashboard was reviewed by Janelle Rauchman. The dashboard contains results from a number of measurable and reportable quality measures.

### **ADMINISTRATIVE REPORT**

#### **A. Executive Summary.**

The written report submitted by George Rohrich was reviewed.

- River's Edge is showing a month-to-date bottom line for the month of March of approximately \$302,000 versus a month-to-date budget of (\$3,800).
- Net Operating Revenue MTD is \$254,000 vs MTD budget of (\$47,000).
- March results show an increase of cash on hand of \$328,000 resulting in balance of \$11,847,000 million. The 2019 Year End Budget goal is \$10.4M.

#### **B. Statistical Dashboard.**

The statistical report for March, 2019, was reviewed. Of the 17 measured activities, 7 are green. The monthly strategic report was also reviewed.

### **FINANCIAL REPORT**

#### **A. March Financial Summary.**

Lori Zook presented the financial reports for March. The month of March had a Net Operating Income of \$302,249 and a year-to-date stand at \$723,742. Total Patient Revenue stands at \$5,980,530. Year-to-date Total Patient Revenue stands at \$18,490,456, over an YTD budget of \$20,842,502. March Net Patient Revenue stands at \$3,277,263 with a budget of \$3,158,739. Monthly Net Operating Revenue stands at \$3,287,941, versus a budget of \$3,164,289. Monthly Operating Expenses stands at \$2,985,692 over budget of \$3,168,116

Cash flow for March was positive at \$328,031. Days Cash On Hand is 125.97 days, and Days Revenue in Accounts Receivable stands at 41.84 days. Debt coverage is 3.11 for the month of March.

#### **B. Write-Off to Collection.**

Community Care grants totaled \$7,083.72, covering 9 accounts. Presumptive community care grants totaled \$1,898.99 covering 14 accounts. Year-to-Date Community Care grants total \$120,268. Collection activity approval totaled \$87,099.06. Year-to-Date collection activity stands at \$187,165. Year-to-Date \$111,215 of gross bad debts have been recovered. The Revenue Recapture program through the State of Minnesota resulted in receipt of \$35,887.12, year-to-date recovery total of \$90,037.

**ACTION:** A motion was made by John Lammert to accept the recommendation made by the Finance Committee for approval of \$7,083.72 in Community Care grants, \$1,898.99 in Presumptive Community Care grants and \$87,099.06 in write-offs to collection for March. The motion was seconded by Blake Combellick and carried with all members voting in favor.



## **Hospital Commission Meeting Minutes**

River's Edge Hospital & Clinic

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### **C. Accounts Payable Review.**

Accounts Payable review for March included a total of \$2,153,896 paid via check.

**ACTION:** A motion was made by Stephen Grams to recommend approval of checks totaling \$2,153,896. The motion was seconded by Laura Hulsebus and carried with all voting in favor.

### **BUILDING COMMITTEE**

George Rohrich presented information on the overall project, cash flow, and an update on the work that has been completed.

#### **Project Highlights**

- Endo construction punch-list progress.
- Finishes in East patient wing are in progress.
- Emergency department concrete has been poured.

#### **Construction Update:**

- Endo is complete, punch-list in progress.
- North addition slab is complete.
- Carpet is complete at South wing.
- Finishes are complete at South wing.
- Painting complete at South wing.

#### **Upcoming Work**

- Exterior framing and sheathing in North addition.
- Interior framing in North addition.
- MEP rough-in North addition.
- Roofing in north addition.
- Finishes in East patient wing.

#### **Change Orders:**

George Rohrich reviewed the change orders numbers:

105. Final Surgery integration changes.

115. Integration of patient room overbed light control with nurse call.

118. Add electrical disconnects safety drain valves, heat trace and building automation system integration to 4 RTU humidifiers.

122. Double size of linen hampers in Surgery lockers and add storage cabinet.

124. Add 10 access panels in soffits over patient room doors and ER(T&M).

126. Add VAV and duct for outboard S/R rooms and toilets in SDS.

128. Change power voltage for flash sterilizer from 120 to 480.

134. Delete window film and add blinds.

137. Add hallway lighting control switches and delete clock outlets.

Total amount for change orders is \$83,157.

**ACTION:** A motion was made by John Lammert to approval of change orders 105, 115, 118, 122, 124, 126, 128, 134, & 137 for a total of \$83,157. The motion was seconded by Jerry Pfeifer and carried with all members voting in favor.

## **Hospital Commission Meeting Minutes**

River's Edge Hospital & Clinic

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### **ROUNDTABLE COMMENTS**

#### **Jackie Kimmet:**

1. Hospital Week May 12<sup>th</sup> – 18<sup>th</sup>.
2. Employee Years of Service Pins during Hospital week lunch on May 15<sup>th</sup> at Noon.

#### **Stephanie Holden:**

1. New patient wing tours in June.
2. Highway clean-up has been postponed because of the weather.

### **ADJOURNMENT**

**ACTION:** A motion was made by Jerry Pfeifer to adjourn the meeting. Motion seconded by MaryAnn Harty and carried with all voting in favor. Meeting was adjourned at 2:10 p.m.

### **NEXT MEETING**

The next regular meeting of the Hospital Commission will be Wednesday, May 22, 2019, at 12:30 p.m. This meeting will convene in the River's Edge Hospital Helen G. White Conference Center. The Finance Committee meeting will be held on Wednesday, May 15, 2019, at 12:30 p.m. This meeting will convene in the River's Edge Hospital Helen G. White Conference Center.

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Chairperson

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Secretary

## **RIVER'S EDGE HOSPITAL & CLINIC FINANCE COMMITTEE MEETING**

River's Edge Hospital & Clinic

Wednesday, May 15, 2019

<i>Present:</i>	<input checked="" type="checkbox"/>	Margie Nelsen, Chairperson; Finance	<input checked="" type="checkbox"/>	George Rohrich, CEO
	<input type="checkbox"/>	Stephen Grams, Trustee, Finance	<input checked="" type="checkbox"/>	Tricia Bauer Finance Manager
	<input checked="" type="checkbox"/>	John Lammert Trustee, Finance	<input checked="" type="checkbox"/>	Samantha Pherson, Executive Assistant/Recorder
	<input checked="" type="checkbox"/>	Lori Zook CFO	<input type="checkbox"/>	

### **CALL TO ORDER**

The Finance Committee meeting was called to order at 12:29 p.m. by Margie Nelsen.

### **APPROVAL OF AGENDA**

The agenda for the May 15, 2019 Finance Committee meeting was reviewed. An item was added to the agenda to discuss the Quorum Health Resources contract renewal.

**ACTION:** A motion was made by John Lammert to approve the May 15, 2019 agenda with the added item to discuss the Quorum Health Resources Contract Renewal. The motion was seconded by George Rohrich and carried with all members voting in favor.

### **GENERAL VISITOR COMMENTS**

None

### **REVENUE AND EXPENSES**

Lori Zook presented the financial reports for April. The month of April had a Net Operating Income of \$234,517 and a year-to-date stand at \$958,262. Total Patient Revenue stands at \$6,172,853. Year-to-date Total Patient Revenue stands at \$24,663,309, over an YTD budget of \$27,366,441. April Net Patient Revenue stands at \$3,299,702 with a budget of \$3,158,723. Monthly Net Operating Revenue stands at \$3,311,820, versus a budget of \$3,164,273. Monthly Operating Expenses stands at \$3,077,303 over budget of \$3,088,761.

**ACTION:** A motion was made by George Rohrich to recommend the approval of the financial statements to the Commission, knowing there may be changes made to the figures and presented at the next Finance Meeting. The motion was seconded by John Lammert and carried with all members voting in favor.

### **CASH FLOW**

Cash Flow for the month of April increased by \$667,586.

### **BALANCE SHEETS**

Balance Sheets were reviewed. Net Patient Receivables shows an increase of \$116,606 for the month of April and accounts payable increased \$390,062.

### **YEAR-TO-DATE REVENUES AND EXPENSES**

Year-to-date Gross Revenue is \$24,663,309 versus a budget of \$27,366,441 which is (\$2,703,132) under budget. Year-to-date Net Patient Revenue is \$13,378,862 versus a budget of \$13,905,577 or (\$526,715) under budget. Year-to-date Total Operating Expenses are \$12,491,740 a budget of \$12,421,649 or \$70,091 over budget.

### **DASHBOARD**

Days Cash (All Sources) On Hand is 125.75 and Days Revenue in Accounts Receivable stands at 42.68 days. Debt coverage is 3.17 for the month of April.

### **CHECK REVIEW**

The Check Review list was given to the Finance Committee and reviewed. The total amount for the month of April is \$1,591,836.

**ACTION:** A motion was made by John Lammert to recommend the acceptance of checks, in the amount of \$1,591,836 to the Commission. The motion was seconded by George Rohrich and carried with all members voting in favor.

### **COMMUNITY CARE AND COLLECTIONS**

Community Care grants totaled \$6,719.57, covering 13 accounts. Presumptive community care grants totaled \$178,326.84 covering 118 accounts. Year-to-Date Community Care grants total \$305,315. Collection activity approval totaled \$123,221.42. Year-to-Date collection activity stands at \$310,386. Year-to-Date \$150,377 of gross bad debts have been recovered. The Revenue Recapture program through the State of Minnesota resulted in receipt of \$39,162.05, year-to-date recovery total of \$122,099.

**ACTION:** A motion was made by John Lammert to recommend approval of Community Care grants in the amount of \$6,719.57, Presumptive Community Care grants in the amount of \$178,326.84 and \$123,221.42 in write-offs to collection for April. The motion was seconded by George Rohrich and carried with all members voting in favor.

### **ITEMS for APPROVAL**

#### **BoardDocs Document Management System:**

The current system of e-mailing documents and communicating with the Commission is inefficient, as the documents are often over the e-mail limits and are difficult to adapt to follow guidelines. BoardDocs will allow a central depository of documents accessible to Commission Members as well as staff to provide updated information and to be able to archive documents as necessary. The cost of the BoardDocs Documents Management System is \$10,000 per year and a \$1,000 installation fee.

**ACTION:** A motion was made by John Lammert to recommend approval to purchase BoardDocs Document Management System for the amount of \$10,000 per year plus a \$1,000 to the Hospital Commission. The motion was seconded by George Rohrich and carried with all members voting in favor.

#### **Fujitsu fi-7700 Scanner:**

The current scanner used is HIMS is a least 12 years old and has scanned several million documents. It is working well, but service is no longer available if it breaks down. The scanner is used to scan documents into the electronic medical record. These are records from systems that don't work with our current electronic health record such as pre-surgery clinical information on out patients, EKG's, Ambulance documents, etc. These are vital to the appropriate care of our patients. The recommendation is to purchase the Fujitsu fi-7700 document scanner with a three extended service agreement for \$9,056.22 from CDW-G.

**ACTION:** A motion was made by George Rohrich to recommend approval to purchase the Fujitsu fi-7700 document scanner from CDW-G for the amount \$9,056.22 to the Hospital Commission. The motion was seconded by John Lammert and carried with all members voting in favor.

## **Finance Committee Meeting Minutes**

River's Edge Hospital & Clinic

May 15, 2019 Page 3

### **Zero Turn Lawnmower:**

The Hospital recommends purchase a new Zero turn lawnmower for \$7,200 plus taxes from John-Deere-Kibble Equipment. After bringing a mower on-site to test, we can reduce the man-hours by 50% and still keep the campus looking nice. This, combined with other changes, will allow out maintenance employees to do other work, and will hopefully reduce the total FTE's needed to maintain the new campus.

**ACTION:** A motion was made by George Rohrich to recommend approval to purchase a Zero Turn Lawnmower from John Deere-Kibble Equipment for the amount of \$7,200 plus taxes to the Hospital Commission. The motion was seconded by John Lammert and carried with all members voting in favor.

### **Cisco 9400 Network Switch:**

The Hospital recommends purchasing a Cisco 9400 Network Switch for \$64,532.40 from Marco. This new switch is needed in the server room because the current switch does not have the capacity to handle the two current data closets as well as the two new data closets. The existing switch will be repurposed to the data closet in the Emergency Department area, which will save the cost of purchasing a new one for that area.

**ACTION:** A motion was made by Lori Zook to recommend approval to purchase a Cisco 9400 Network Switch for the amount of \$64,532.40 from Marco to the Hospital Commission. The motion was seconded by John Lammert and carried with all members voting in favor.

### **Quorum Health Resources:**

The Hospital is recommending authorizing approval of the Third Amendment to the Advisory Services Agreement with Quorum Health Resources for the amount of \$136,000 for the year beginning on July 1, 2019. River's Edge Hospital had had this agreement in-place for the past three years. This agreement provides leadership support, financial best practices support, and two focused consultation engagements. In 1028, these services provided River's Edge \$467,000 in operational expense savings at a cost of \$130,000.

**ACTION:** A motion was made by John Lammert to recommend approval of the Third Amendment to the Quorum Health Resources Service Agreement for the amount of \$136,000 to the Hospital Commission. The motion was seconded by Lori Zook and carried with all members voting in favor.

### **ADJOURNMENT**

**ACTION:** The meeting was adjourned by mutual consent at 1:50 p.m.

### **NEXT MEETING**

The next Finance Committee meeting will be held on Wednesday, June 19, 2019, at 12:30 p.m. in Helen White Conference Room 1.

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Chairperson

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Vice-Chairperson

**RIVER'S EDGE HOSPITAL & CLINIC**  
**Balance Sheet for the Period Ending**  
**April 30, 2019**

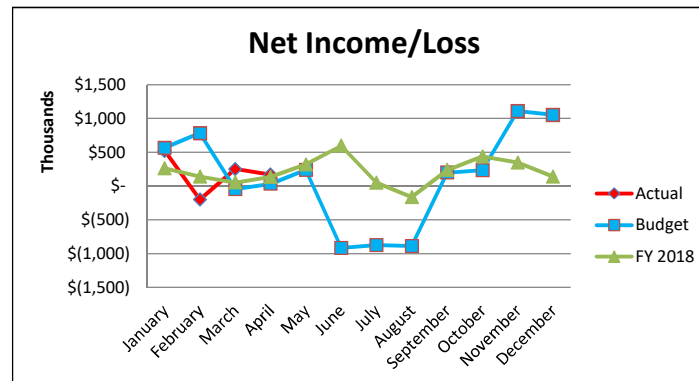
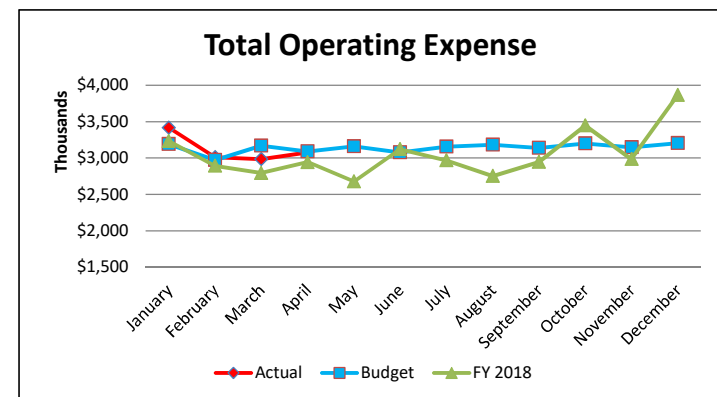
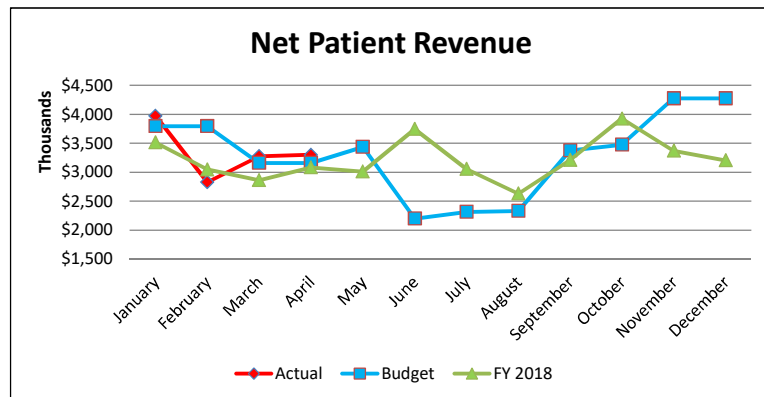
	<u>Current Period</u>	<u>Prior Period</u>	<u>Last Year</u>		<u>Current Period</u>	<u>Prior Period</u>	<u>Last Year</u>
	<u>Assets</u>				<u>Liabilities &amp; Fund Balances</u>		
<b>Current Assets:</b>				<b>Current Liabilities:</b>			
Cash	\$ 9,534,261	\$ 8,875,909	\$ 7,531,989	Accounts Payable	\$ 2,034,979	\$ 1,644,917	\$ 1,599,443
				Construction Payable	51,702	2,211,587	-
Patient Receivables	8,433,198	8,128,678	8,661,553	3rd Party Payers	2,826,092	2,826,092	326,000
Less: Allow for Uncollectible	(3,797,473)	(3,609,559)	(4,206,467)	Accrued Payroll	308,553	241,636	279,516
Total Patient Receivables	4,635,725	4,519,119	4,455,086	Accrued PTO	812,574	783,428	778,669
				Self Insurance	14,730	19,402	18,178
3rd Party Payers	-	-	-	Payroll Taxes & Deductions	280,866	279,441	(263,180)
Other Receivables	90,076	82,416	68,710	Accrued Int Payable Bond	19,292	1,529	70,759
Inventories	609,884	618,078	665,237	Current Portion Long Term Debt	697,989	697,989	682,989
Prepaid Expenses	348,227	337,925	242,418				
Total Current Assets	15,218,173	14,433,447	12,963,440	Total Current Liabilities	7,046,777	8,706,021	3,492,374
<b>Other Assets</b>				<b>Long Term Debt</b>			
Board Designated Funds	2,829,918	2,829,493	3,817,973	Bonds Payable	9,889,385	9,889,385	10,697,374
Dedicated Cash	424,081	453,026	135,471	PERA	8,794,234	8,737,967	8,679,221
Investments	421,450	413,450	409,457	Construction Payable	11,285,670	8,161,968	
Total Other Assets	3,675,449	3,695,969	4,362,901	Total Long Term Debt	29,969,289	26,789,320	19,376,595
<b>Intangible Assets:</b>				Total Liabilities	37,016,066	35,495,341	22,868,969
Unamortized Loan Costs	42,033	42,811	51,373				
<b>Plant, Property and Equipment</b>				<b>Fund Balances</b>			
Land & Land Improvements	1,702,797	1,702,797	1,702,797	Current Year	748,145	577,844	586,549
Building and Improvements	9,788,080	8,453,194	7,260,686	Prior Year	6,132,772	6,132,772	3,370,936
Fixed Equipment	3,846,182	3,848,480	3,982,136	Capital Restricted Funds	-	-	-
Major Moveable Equipment	9,063,187	9,738,784	9,726,796				
Total Plant, Property & Equip.	24,400,246	23,743,255	22,672,415	Total Fund Balance	6,880,917	6,710,616	3,957,485
Less: Accum Depreciation	(15,361,387)	(15,915,941)	(15,299,027)				
Total PP&E less depreciation	9,038,859	7,827,314	7,373,388				
Construction in Progress	15,922,469	16,206,416	2,075,352				
Total Fixed Assets	24,961,328	24,033,730	9,448,740				
<b>Total Assets</b>	<u><u>\$ 43,896,983</u></u>	<u><u>\$ 42,205,957</u></u>	<u><u>\$ 26,826,454</u></u>	<b>Total Liabilities &amp; Fund Balances</b>	<u><u>\$ 43,896,983</u></u>	<u><u>\$ 42,205,957</u></u>	<u><u>\$ 26,826,454</u></u>

**RIVER'S EDGE HOSPITAL AND CLINIC**  
**STATEMENT OF REVENUES AND EXPENSES**  
**April 30, 2019**

Current Month				Year to Date				
Actual	Budget	Variance	Prior Year		Actual	Budget	Variance	Prior Year
\$ 3,775,950	\$ 4,385,871	\$ (609,921)	\$ 3,917,009	Inpatient Revenue	\$ 15,798,993	\$ 18,573,866	\$ (2,774,873)	\$ 15,121,697
2,396,903	2,138,068	258,835	2,223,584	Outpatient	8,864,316	8,792,575	71,741	9,095,808
6,172,853	6,523,939	(351,086)	6,140,593	Total Patient Revenue	24,663,309	27,366,441	(2,703,132)	24,217,505
-	-	-	-	Physician Clinic Revenue	-	-	-	-
6,172,853	6,523,939	(351,086)	6,140,593	Hospital Patient Revenue	24,663,309	27,366,441	(2,703,132)	24,217,505
				Revenue Deductions				
2,559,815	3,205,884	(646,069)	2,907,435	Contractual- Current YR	10,510,979	12,823,536	(2,312,557)	11,103,749
-	-	-	-	Contractual - Prior Year	-	-	-	-
94,788	92,500	2,288	85,762	Bad Debt	389,413	370,000	19,413	334,806
192,195	50,582	141,613	35,395	Charity Discounts	300,829	202,328	98,501	195,129
26,345	16,250	10,095	24,750	Self pay Discounts	82,007	65,000	17,007	76,075
8	-	8	7,231	Other	1,219	-	1,219	7,728
2,873,151	3,365,216	(492,065)	3,060,573	Total Revenue Deductions	11,284,447	13,460,864	(2,176,417)	11,717,487
3,299,702	3,158,723	140,979	3,080,020	Net Patient Revenue	13,378,862	13,905,577	(526,715)	12,500,018
8,000	2,478	5,522	8,000	Co-op Inc.	32,000	10,426	21,574	32,310
2,057	2,551	(494)	6,410	Live Well Fitness	8,252	10,204	(1,952)	12,418
2,061	521	1,540	(2,723)	Other Revenue	30,888	2,077	28,811	2,761
-	-	-	8,400	Grants	-	-	-	8,400
12,118	5,550	6,568	20,087	Total Other Operating Revenue	71,140	22,707	48,433	55,889
3,311,820	3,164,273	147,547	3,100,107	Net Operating Revenue	13,450,002	13,928,284	(478,282)	12,555,907
				Operating Costs				
786,617	823,032	(36,415)	794,859	Salaries & Wages	3,186,900	3,292,122	(105,222)	3,140,503
250,381	275,662	(25,281)	244,372	Benefits	1,031,758	1,102,653	(70,895)	892,750
495,815	483,246	12,569	448,973	Fees-Professional	2,215,184	1,983,298	231,886	2,047,485
219,266	180,411	38,855	218,126	Fees-Other	872,774	728,726	144,048	747,007
1,450	8,748	(7,298)	6,439	Recruitment	4,825	34,990	(30,165)	19,953
816,430	865,241	(48,811)	779,670	Supplies	3,209,825	3,476,443	(266,618)	3,387,841
46,837	41,121	5,716	28,854	Utilities	157,643	164,486	(6,843)	114,986
78,625	88,661	(10,036)	95,093	Repairs & Maintenance	317,481	354,643	(37,162)	303,977
90,626	57,487	33,139	40,661	Lease, Rent, Minor Equip	384,468	216,144	168,324	177,764
4,952	8,914	(3,962)	6,939	Dues & Subscriptions	21,043	39,464	(18,421)	26,075
18,101	30,173	(12,072)	42,963	Prof. Develop/Education	60,833	122,366	(61,533)	90,325
14,564	19,232	(4,668)	20,118	Marketing, Public Relations	56,303	78,063	(21,760)	64,781
8,903	8,749	154	8,218	Insurance	42,694	34,996	7,698	35,670
33,002	34,227	(1,225)	34,571	Interest Expense	132,501	136,908	(4,407)	138,777
75,080	61,665	13,415	64,426	Tax Expense	333,555	246,660	86,895	259,174
11,817	6,034	5,783	6,417	Other Expenses	25,967	25,055	912	15,055
124,837	96,158	28,679	101,237	Depreciation/Amortization	437,986	384,632	53,354	397,355
3,077,303	3,088,761	(11,458)	2,941,936	Total Operating Expenses	12,491,740	12,421,649	70,091	11,859,478
234,517	75,512	159,005	158,171	Net Operating Income	958,262	1,506,635	(548,373)	696,429
7.08%	2.39%	4.69	5.10%		7.12%	10.82%	-3.69	5.55%
				NonOperating Income(Expense)				
7,381	3,582	3,799	10,367	Interest Income-General	30,239	14,328	15,911	27,630
(71,599)	(47,147)	(24,452)	(34,479)	Other Income/ (Expense)	(240,353)	(188,588)	(51,765)	(137,510)
(64,218)	(43,565)	(20,653)	(24,112)	Total Non Operating	(210,114)	(174,260)	(35,854)	(109,880)
\$ 170,299	\$ 31,947	\$ 138,352	\$ 134,059	Excess Revenue over Expenses	\$ 748,148	\$ 1,332,375	\$ (584,227)	\$ 586,549
5.14%	1.01%		4.32%		5.56%	9.57%		4.67%

**RIVER'S EDGE HOSPITAL and CLINIC**  
**STATEMENT OF REVENUES AND EXPENSES**  
**April 30, 2019**

	January	February	March	April	May	June	July	August	September	October	November	December	Total
<b>Total Patient Revenue</b>	6,898,742	5,611,184	5,980,530	6,172,853									24,663,309
<b>Net Patient Revenue</b>	3,974,962	2,826,933	3,277,263	3,299,702									13,378,860
<b>Net Operating Revenue</b>	3,989,504	2,860,734	3,287,941	3,311,820									13,449,999
<b>Operating Costs</b>													
<b>Total Operating Expenses</b>	3,417,778	3,010,972	2,985,692	3,077,303									12,491,745
<b>Net Operating Income</b>	571,726	(150,238)	302,249	234,517									958,254
	14.33%	-5.25%	9.19%	7.08%									7.12%
<b>NonOperating Income(Expense)</b>													
<b>Total Non Operating</b>	(48,111)	(49,451)	(48,335)	(64,218)									(210,115)
<b>Excess Revenue over Expenses</b>	\$ 523,615	\$ (199,689)	\$ 253,914	\$ 170,299									748,140
	13.12%	-6.98%	7.72%	5.14%									5.56%





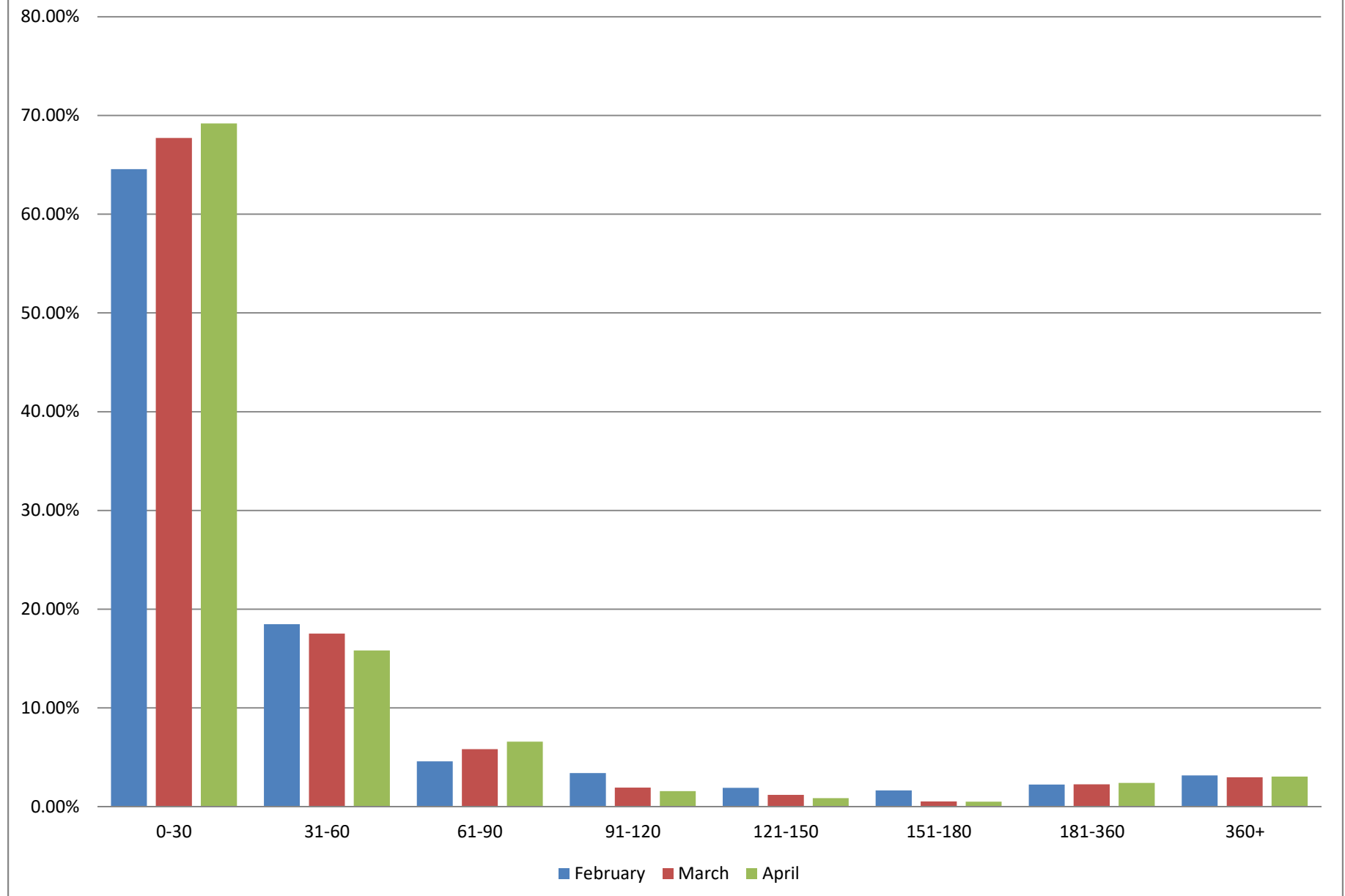
**River's Edge Hospital and Clinic**  
**Cash Flow Report at**  
**April 30, 2019**

	<u>MONTH</u>	<u>YEAR</u>
<b>Operating Activities and NonOperating Revenue:</b>		
Excess of Revenue over Expenses	\$ 170,301	\$ 748,145
<b>Adj to reconcile excess of Revenue over Expenses to Net Cash</b>		
Depreciation & Amortization	(553,776)	(247,627)
Noncash gifts & bequests	-	-
Increase (Decrease) Amt. Due 3rd Parties	-	(72,778)
(Increase) Decrease in Accounts Receivable	(124,266)	375,356
(Increase) Decrease in Prepaids	(10,302)	(142,154)
(Increase) Decrease in Inventories	8,194	(8,653)
Increase (Decrease) in Accounts Payable & Accrued Liabilities	(1,620,737)	(902,692)
<b>Net Cash provided by Operations</b>	<u><b>(2,130,586)</b></u>	<u><b>(250,403)</b></u>
<b>Investing Activities:</b>		
Purchase/Disposals of Property & Equipment	(373,045)	(5,307,831)
Purchase of Investments	(8,000)	(32,000)
Construction Escrow	37,753	1,568,089
Bremer Construction	3,134,107	6,315,048
<b>Cash provided by Investments</b>	<u><b>2,790,815</b></u>	<u><b>2,543,306</b></u>
<b>Financing Activities:</b>		
Repayment of Long-Term Debt	(10,406)	(139,378)
Payment of Interest - LT Debt	17,763	(112,293)
Capital Grants		
<b>Cash provided by Financing</b>	<u><b>7,357</b></u>	<u><b>(251,671)</b></u>
<b>INCREASE (DECREASE) IN CASH &amp; CASH Equivalents</b>	<b>667,586</b>	<b>2,041,232</b>
<b>CASH BEGINNING OF PERIOD</b>	<b>11,846,845</b>	<b>10,473,199</b>
<b>CASH END OF PERIOD</b>	<u><b>\$ 12,514,431</b></u>	<u><b>\$ 12,514,431</b></u>
<b>CHANGE &amp; BALANCE OF CASH</b>		
Operating Cash	658,351	9,534,261
Non-Current Cash	9,234	2,980,170
<b>TOTAL CHANGE &amp; BALANCE OF CASH</b>	<u><b>\$ 667,585</b></u>	<u><b>\$ 12,514,431</b></u>

**River's Edge Hospital and Clinic**  
**Cash Flow Report at**  
**Year to Date**

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	YEAR
<b>Operating Activities and NonOperating Revenue:</b>													
Excess of Revenue over Expenses	\$ 523,615	\$ (199,688)	\$ 253,917	\$ 170,301									\$ 748,145
<b>Adj to reconcile excess of Revenue over Expenses to Net Cash</b>													
Depreciation & Amortization	103,737	99,057	103,355	(553,776)									(247,627)
Noncash gifts & bequests	-	-	-	-									-
(Increase) Decrease Amt. Due 3rd Parties	(222,778)	-	150,000	-									(72,778)
(Increase) Decrease in Accounts Receivable	322,983	128,377	48,262	(124,266)									375,356
(Increase) Decrease in Prepaids	17,428	(128,592)	(20,687)	(10,302)									(142,153)
(Increase) Decrease in Inventories	(6,544)	(1,454)	(8,848)	8,194									(8,652)
Increase (Decrease) in Accts Pay. & Accrued Liab.	153,478	52,898	511,668	(1,620,737)									(902,693)
<b>Net Cash provided by Operations</b>	<b>891,919</b>	<b>(49,402)</b>	<b>1,037,667</b>	<b>(2,130,586)</b>	-	-	-	-	-	-	-	-	<b>(250,402)</b>
<b>Investing Activities:</b>													
Purchases/Disposals of Property & Equipment	(1,633,286)	(1,232,262)	(2,069,238)	(373,045)									(5,307,831)
Purchase of Investments	(8,000)	(8,000)	(8,000)	(8,000)									(32,000)
Construction Escrow	1,907,340	1,333,704	(1,710,708)	37,753									1,568,089
Bremer Construction			3,180,941	3,134,107									6,315,048
<b>Cash provided by Investments</b>	<b>266,054</b>	<b>93,442</b>	<b>(607,005)</b>	<b>2,790,815</b>	-	-	-	-	-	-	-	-	<b>2,543,306</b>
<b>Financing Activities:</b>													
Repayment of Long-Term Debt	-	(9,106)	(119,866)	(10,406)									(139,378)
Payment of Interest - LT Debt	(163,745)	16,464	17,224	17,763									(112,294)
Capital Grants													-
<b>Cash provided by Financing</b>	<b>(163,745)</b>	<b>7,358</b>	<b>(102,642)</b>	<b>7,357</b>	-	-	-	-	-	-	-	-	<b>(251,672)</b>
<b>INCREASE (DECREASE) IN CASH &amp; CASH Equivalents</b>	<b>994,228</b>	<b>51,398</b>	<b>328,020</b>	<b>667,586</b>	-	-	-	-	-	-	-	-	<b>2,041,232</b>
<b>CASH BEGINNING OF PERIOD</b>	<b>10,473,199</b>	<b>11,467,427</b>	<b>11,518,825</b>	<b>11,846,845</b>									<b>10,473,199</b>
<b>CASH END OF PERIOD</b>	<b>\$ 11,467,427</b>	<b>\$ 11,518,825</b>	<b>\$ 11,846,845</b>	<b>\$ 12,514,431</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 12,514,431</b>
<b>CHANGE &amp; BALANCE OF CASH</b>													
Operating Cash	992,779	48,873	329,193	658,351									9,534,261
Non-Current Cash	1,450	2,525	(1,173)	9,234									2,980,170
Investments													
<b>TOTAL CHANGE &amp; BALANCE OF CASH</b>	<b>\$ 994,229</b>	<b>\$ 51,398</b>	<b>\$ 328,020</b>	<b>\$ 667,585</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 12,514,431</b>

## Accounts Receivable Aging 2019-rolling



## QUALITY MANAGEMENT COMMITTEE MEETING MINUTES

River's Edge Hospital & Clinic, St. Peter, Minnesota  
Wednesday, May 15, 2019

The Quality Management Committee meeting was held on Wednesday, May 15, 2019, at 8:30 a.m. in the Helen G. White Conference Room.

Present were: Maryann Harty, Gary Swedberg, and John Lammert, Hospital Commission; Dr. Bogonko, George Rohrich, Kevin Schaefer, Stephanie Holden, Janelle Rauchman, Sheri Schmidt, Lori Zook, Jackie Kimmet, Mark Ehlers, Paulette Redman, and Ashlie Baker, Recorder.  
Absent: Paula Meskan.

AGENDA ITEM	DISCUSSION	ANALYSIS / CONCLUSIONS / ACTION	FOLLOW-UP / RESPONSIBLE PARTY
<b>1. Review of Minutes.</b>	The minutes of the April 17, 2019, meeting was distributed electronically prior to the meeting for review.	A motion was made by Stephanie Holden to approve the minutes as presented. The motion was seconded by Lori Zook and carried with all voting in favor.	
<b>2. Quality Department</b>			
	<b>Audits, Internal Audits, Tracers.</b> <ul style="list-style-type: none"> <li>None to report at this time.</li> </ul> <b>DNV Survey.</b> <ul style="list-style-type: none"> <li>DNV was here May 8-10, 2019. <ul style="list-style-type: none"> <li>Received certification as an Orthopedic Center of Excellence.</li> </ul> </li> </ul> <b>Baldrige.</b> <ul style="list-style-type: none"> <li>Received the Baldrige Advancement Level Award at the PENWorks Conference on May 3, 2019.</li> </ul> <b>Falls Risk.</b> <ul style="list-style-type: none"> <li>The current falls rate through April 2019 was 1.4.</li> </ul> <b>Adverse Events.</b> <ul style="list-style-type: none"> <li>No adverse events to report.</li> </ul>	Review and develop an action plan based on feedback report - re-apply in 2020.	Janelle Rauchman
<b>3. Departmental Goal Reports and Quality / Patient Safety Core Functions Reports</b>			
<b>a. Marketing.</b>	Stephanie Holden reported. <b>Measurement for Marketing Plan.</b> <ul style="list-style-type: none"> <li>Social Media. Facebook page - number of "likes" currently at 1,606, up from 1602 likes in February. There was one organic Facebook post on the Bike Rodeo that reached 2,700 people and was shared 23 times. The new digital marketing company is also posting "sponsored" posts from River's Edge on Facebook.</li> </ul>		Stephanie Holden

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	<ul style="list-style-type: none"> <li>Website. Noted an increase in website sessions at 11,706, down a little from 11,926 in February, with the Urgent Care page having most page views. The second highest page views is for Services; followed by Careers and Contact.</li> <li>Digital Marketing Campaign. In January 2019 REHC changed digital marketing companies, due to poor customer service. Google AdWords campaign shows an increased number of impressions (number of views) and clicks, with a click-through rate of 0.02%, doing very well. This compares to a national click-through rate of 0.01%.</li> <li>The “GeoFencing” campaign for Urgent Care has resulted in over 109,000 performance impressions. GeoFencing is focused on mobile devices – REHC ads will show up on the mobile device whenever the device enters a designated “fenced area.” Fenced areas identified in this campaign are geographical areas surrounding other urgent care clinics in this region (Ridgeview Belle Plaine, Ridgeview Le Sueur, Mankato Clinic @ Adams Street, and McDonalds – St. Peter).</li> </ul> <p><b>Patient Satisfaction:</b></p> <ul style="list-style-type: none"> <li>Inpatient: Top Box score for overall patient satisfaction with inpatient services shows a score of 87.7% in the 1<sup>st</sup> Quarter of 2019.</li> <li>Emergency Department: Top Box score for Likelihood to Recommend – score of 79% in the 1<sup>st</sup> Quarter of 2019.</li> <li>Urgent Care: Top Box scores for Likelihood to Recommend – 1<sup>st</sup> Quarter 2019 score of 75%.</li> <li>Outpatient Surgery: Top Box scores for Rate the Facility 0-10 – 1<sup>st</sup> Quarter 2019 was 83.5%.</li> </ul> <p><b>Vocera Care Rounds</b></p> <ul style="list-style-type: none"> <li>In November 2018, Linda Prah, RN, Med/Surg Manager and Stephanie Holden, Chief Marketing Officer, began using Vocera Care Rounds, a tool to assist in getting real-time patient satisfaction/experience feedback to help in improving patient survey results.</li> <li>Linda rounds on all patients daily using the Care Rounds tool.</li> </ul>	<p>Goal of 88% inpatient satisfaction reached.</p> <p>Goal for ED Likelihood to Recommend is 79%.</p> <p>Goal for UC adjusted down to 75%.</p> <p>Goal for Outpatient Surgery 87.7%.</p> <p>2018 goal for Outpatient Surgery set at 87.7%.</p>	<p>Stephanie Holden</p>
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	<ul style="list-style-type: none"> <li>Stephanie rounds on patients who are on day 2 of their admission.</li> <li>There are separate questions for nurse rounding and executive rounding.</li> <li>The questions will change every 3-4 months.</li> </ul> <p><i>***Please refer to slide deck for more details surrounding the Vocera Care Rounds. ***</i></p> <p><b>Community Outreach Events from Q1 2019 include:</b></p> <ul style="list-style-type: none"> <li>Physical Therapy Presentation on Women's Pelvic Health in March.</li> <li>Food Shelf Participation.</li> <li>Adopt-a-Highway clean-up day in April – postponed due to flooding.</li> <li>PEN Award</li> </ul> <p><b>Upcoming Events</b></p> <ul style="list-style-type: none"> <li>Bike Rodeo – May 18</li> <li>OrthoEdge Presentation with Dr. Swanson – May 20, 2019.</li> <li>Participating in GAC Wellness Fair on May 16, 2019.</li> </ul>		
<b>b. Business Services / Finance.</b>	<p>Sheri Schmidt reported.</p> <p><b>OTI's, CAPs, PAPs</b></p> <ul style="list-style-type: none"> <li>An OTI surrounding the \$59 fee in Urgent Care for certain conditions, such as UTI's, Pink Eye, and Strep Throat. This has not been going as smoothly as anticipated. Currently this service is only being used twice a month. Investigating to determine the cause of such a low number of patients utilizing this service package.</li> </ul> <p><b>Department Goals / Benchmarks.</b></p> <p>a) Monitor / measure denials. The denial amount for January was \$86,328.00, February at \$114,765.00, and March was \$100,721.00. The percentage of denials still remains under 3%.</p> <p>b) Accounts Receivable Days. The goal for Accounts Receivable days is to be below 50. January was at 43 days, February was at 42 days, and March was at 41 days. Best indicators nationally are in the 40-day range.</p> <p><b>Revenue Cycle Steering Committee</b></p> <ul style="list-style-type: none"> <li>A Revenue Cycle Steering Committee was implemented in 2018, which members include Lori Zook, Janelle Rauchman, Paulette Redman, and Sheri Schmidt.</li> <li>Review of Revenue Cycle Scorecard</li> </ul> <p><i>***Please refer to the slide deck for a detailed listing of focus areas. ***</i></p>	<p>Revenue Cycle Management committee established, meeting monthly.</p>	Sheri Schmidt.

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	<p><b>Price Estimator</b> The price estimator which outlines our top 75 procedures and the cost associated is now <i>live</i> on the website.</p>		
c. Registration / Collections.	<p>Sheri Schmidt reported.</p> <p><b>OTI, CAPs, PAPs</b> There is was an OTI for registration surrounding the entering of an incorrect birthdate. This has now been completed.</p> <p><b>Patient Satisfaction – Press Ganey Survey Data.</b> --Emergency Department: Looking at Top Box Trends. Courtesy of Registration Staff - ER = Goal is 80%.  <ul style="list-style-type: none"> <li>January – 78.4%</li> <li>February – 78.6%</li> </ul> --Inpatient: Top Box trends for Courtesy of Registration Staff. Goal is 88%.  <ul style="list-style-type: none"> <li>January – 83.4%</li> <li>February – 82.5%</li> </ul> </p>	Negative feedback has been related to staff noise levels in the patient wings.	Sheri Schmidt
d. Health Information Management	<p>Paulette Redman reported.</p> <p><b>OTI's, CAPs, PAPs</b>  <ul style="list-style-type: none"> <li>Open OTI for use of EM999 code by ED/UC providers, and open OTI for charging issues for ED/UC. Both of these will be tied into upcoming coding/charging project with Nordic Consulting.</li> </ul> </p> <p><b>Equipment/Process Improvement.</b>  <ul style="list-style-type: none"> <li>Requested a new high-volume scanner. This is a replacement, as the current scanner, used full-time has outlived its support services.</li> <li>Looking at voice recognition systems – proposals for 2 different systems. Working with Allina to determine their level of support (or not) for preferred system.</li> <li>Process Improvement – participation in project with Nordic Consulting to look at ED charging/coding processes.</li> </ul> </p> <p><b>Department Goals / Benchmarks.</b>  a) Incomplete Records &gt;30 Days: In February, the number of incomplete records was 17 charts, with the majority being in Surgery. As of May 15, 2019, the number of incomplete records remains at 11; the majority of these being Nursing. It has been challenging to complete the records in &lt;30 days due to the fact that some of the surgeons are only here on an occasional basis.</p>	<p>Weekly notices sent to providers regarding deficiency status. Report on delinquent records addressed with Executive Committee monthly.</p> <p>Monitor work queues on daily</p>	<p>Paulette Redman / HIM Staff</p> <p>Paulette Redman / Coders</p> <p>Paulette Redman</p>

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	<p>b) Coding Work Queue days: The 2019 goal of coding work queue days &lt;6 not met for 1<sup>st</sup> quarter. Improvement was seen in February, but rose again in March and April.</p> <p>c) Accurate Assignment of E&amp;M Codes for ED/UC. Bell curve graphs were shown reflecting code assignments for January through March, 2019.</p> <ul style="list-style-type: none"> <li>Bell curves continue to show expected patterns of code assignment and did not change significantly from the previous quarter, although overall numbers of new patients has slightly decreased. Documentation components used for code assignment were reviewed (New vs. Established Patient Criteria).</li> </ul> <p><b>Meaningful Use Measures</b> REHC is currently meeting all Meaningful Use measures, except for Patient Access Health Information. The goal to meet the measure is <math>\geq 10\%</math>, currently at 6.8%.</p> <p><b>HIPAA Compliance</b></p> <ul style="list-style-type: none"> <li>HIPAA Help Center software includes monthly training sessions, different topic each month, assigned to all members of REHC workforce. Each session generally takes &lt;15 minutes to complete.</li> <li>Training has been optional.</li> <li>Completion of training ties to improved Privacy Risk Assessment Scores. Current Risk Score is 78/100.</li> </ul>	<p>basis; analyze trends to look for areas of improvement.</p> <p>Review of urgent care E&amp;M level coding to ensure accuracy of codes.</p> <p>Work to determine how to encourage patients to access their health information online.</p>	
<b>e. Medical Staff Liaison / Credentialing.</b>	To be reported at June meeting.		
<b>f. IT / IS.</b>	<p>Kevin Schaefer reported.</p> <p><b>Departmental Goals/Benchmarks</b></p> <p>a) User Satisfaction Survey – New survey process implemented with use of online Survey Monkey. Response to the question of “Overall IT/IS meets the needs of my department” shows 90% rating of “Always,” with 10% “Usually”. The goal was set at 70% based on the former survey process, so current results were below goal.</p>		Kevin Schaefer



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	<p>b) Respond to Urgent and High Priority Tickets Within 30 Minutes, Goal to maintain 85% or higher:</p> <p>January, 2019– 10 tickets – 100%  February, 2019 – 13 tickets – 92%  March, 2019 – 15 tickets – 73%  April, 2019 – 18 tickets – 83%</p> <p>Primary reason for missing 30-minute response time correlates with tickets submitted during the night without a follow-up phone call to IT.  Tickets show up in the e-mail of all members of the IT staff.</p> <p>c) Server / System Downtime for January through March 31, 2019.  File Server – 0.10% downtime.  E-mail Server – 0.10% downtime.  Excellian – 0.47% downtime.</p> <p>Excellian downtime primarily due to upgrades and installation of patches and updates. File server downtime occurs when putting Windows patches in.</p> <p>d) Viruses/Spyware and Adware/PUA (potential unwanted applications). Computer systems continuously scanned for viruses, spyware and adware. Program in place to quarantine and remove malicious software identified. Slight decrease in Adware/PUA in the 1<sup>st</sup> quarter with 23 instances found, instances of viruses and spyware also decreased to 246.</p> <p>e) Password Strength. Another new program looks at password strength throughout the facility. Of 673 passwords, 671 were deemed to be strong, 2 were noted as weak.</p> <p><b>HIPAA Help Center Risk Assessment.</b></p> <ul style="list-style-type: none"> <li>HIPAA Help Center Risk Assessment – Security Risk Score is at 62% Completion.</li> </ul>	<p>Overall system up-time exceeds 99%.</p> <p>Viruses and adware are caught and quarantined prior to getting into the computer. No issues with viruses actually getting into the system. Firewall successfully catching intrusion events.</p> <p>Follow-up with individuals with weak passwords, education provided recommendations to improve passwords.</p>	
<b>g. Human Resources</b>	<p>Jackie Kimmel reported.</p> <p><b>OTI's, CAPs, PAPs</b></p> <ul style="list-style-type: none"> <li>None to report at this time.</li> </ul> <p><b>Equipment/Process Improvement.</b></p> <ul style="list-style-type: none"> <li>Transferring over completely to the ICIMS employment application tracking program.</li> </ul>	<p>Leadership training in July.</p>	Jackie Kimmel

## Quality Management Meeting Minutes

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	<p><b>NIAHO.</b></p> <p>a) SM.3 Staff Evaluations: Completion rate at 100% for February, 100% for March, and 92% for April. Three evaluations came back with a score of 2 or lower in Q1. Manager included action plan of correction with evaluation.</p> <p><b>Hip and Knee Certification Survey Changes – Nonconformities.</b></p> <p>a) SM.4 CR.1 Job Descriptions: Updated all job descriptions of positions that work with Hip and Knee patients to include duties required for the HKRP (Completed June/July 2018).</p> <p>b) SM.6 CR.1-2h Staff Evaluations: Updated all evaluations to match changes made to the job descriptions (Completed June/July 2018).</p> <p>c) Updated all job descriptions, performance evaluations and orientation checklist to include Spine and Shoulder (Completed April/May 2019).</p> <p><b>Department Goal(s)/Core Function Reports</b></p> <p>a) Relias Course Compliance.</p> <ul style="list-style-type: none"> <li>• 100% complete November 2018.</li> <li>• Next courses due November 1, 2019.</li> </ul> <p>b) Quality –Reduce overall REHC turnover rate. The goal for 2019 is set at 18%. Goal 33 employees or less out of a total of 183 employees. The turnover rate for 2018 was 19%. Thus far in 2019 we are at 8%. Below is a detailed listing of employee turnover by month.</p> <p>2019 Turnover by Month:</p> <ul style="list-style-type: none"> <li>○ January – 3</li> <li>○ February – 3</li> <li>○ March – 2</li> <li>○ April – 4</li> <li>○ May – 3</li> </ul> <p>c) Customer Satisfaction.</p> <ul style="list-style-type: none"> <li>• Goal to complete exit interviews on 70% of exiting staff. <ul style="list-style-type: none"> <li>○ 2019 Goal – average of 70% <ul style="list-style-type: none"> <li>--January, 2019 – 1/3 - 33%</li> <li>--February, 2019 – 2/3 - 67%</li> <li>--March, 2019 – 2/2 - 100%</li> </ul> </li> </ul> </li> </ul>	<p>Per DNV, start reporting out the good and poor evaluations in each department, along with action plans.</p>	
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## Quality Management Meeting Minutes

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	<p>--April, 2019 – 2/4 – 50%</p> <p>Results of interviews are summarized with feedback given to the department manager.</p> <p>d) Customer Satisfaction – Employee Participation in Gallup Q12 Survey. 2019 Goal – 85%.</p> <ul style="list-style-type: none"> <li>Survey response in November was 82%.</li> <li>Next Survey in June 2019.</li> </ul>		
<b>h. Materials Management</b>	<p>Reported by Mark Ehlers</p> <p><b>OTI's, CAPs, PAPs and Contracted Services</b></p> <ul style="list-style-type: none"> <li>None to report. Contracted services are up to date.</li> </ul> <p><b>Purchasing Process</b></p> <p>a) Materials Management has moved to a new purchasing organization, HealthTrust. Goals per department are as follows:</p> <ul style="list-style-type: none"> <li>Laboratory – 85%; Actual 68.9% - goal not met;</li> <li>Med/Surg – 85%; Actual 78.3% - goal not met;</li> <li>Office Supplies – 100.0%; Actual 100.0% - goal met;</li> <li>Pharmacy – 98.5%; Actual 100.0% - goal met.</li> </ul> <p><b>Department Goals/Benchmarks</b></p> <p>a) Inventory Days Stock On Hand</p> <ul style="list-style-type: none"> <li>QHR benchmark for hospitals our size is 47 days. <ul style="list-style-type: none"> <li>As of the end of Q1 2019, we were at 22.4 days.</li> </ul> </li> </ul> <p>b) Quality. Goal: Write off &lt;= \$7,000 due to expired products for 2019.</p> <ul style="list-style-type: none"> <li>2019 YTD total is \$330.47.</li> </ul>		Mark Ehlers
<b>6. Quality Recognitions.</b>	<p><b>PEN Conference Presentation</b></p> <ul style="list-style-type: none"> <li>Jackie and Janelle for their astounding presentation at the PENWorks conference on May 2<sup>nd</sup> at Mystic Lake Casino.</li> </ul>		Janelle Rauchman
<b>7. Adjournment.</b>	The next Quality Management Committee meeting will be held on Wednesday, June 19, 2019, at 8:30 a.m.	Meeting adjourned by general consensus at 10:12 a.m.	

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Janelle Rauchman, RN, CIC, Chair

## Building Committee Minutes

May 16, 2019

<i>Present:</i>	<input checked="" type="checkbox"/>	Margie Nelsen Hospital Commission	<input checked="" type="checkbox"/>	George Rohrich CEO	<input checked="" type="checkbox"/>	John Albert AHFD
	<input checked="" type="checkbox"/>	MaryAnn Harty Hospital Commission	<input checked="" type="checkbox"/>	Lori Zook CFO	<input checked="" type="checkbox"/>	Stephanie Pielich JJCA
	<input checked="" type="checkbox"/>	Jerry Pfeifer City Council	<input checked="" type="checkbox"/>	Samantha Pherson Executive Asst.	<input checked="" type="checkbox"/>	Kate Freier McGough
	<input checked="" type="checkbox"/>	Chuck Zieman Saint Peter Mayor	<input type="checkbox"/>	Tricia Bauer	<input checked="" type="checkbox"/>	Paul Biason McGough

### **CALL TO ORDER**

The Building Committee meeting was called to order at 11:05 a.m. by Margie Nelsen.

### **APPROVAL OF AGENDA**

The May 16, 2019 Building Committee Agenda was reviewed.

**ACTION:** A motion was made by Jerry Pfeifer to approve the May 16, 2019 Building Committee Agenda. The motion was seconded by Chuck Zieman and carried with all members voting in favor.

### **PROJECT UPDATES**

Paul Biason and Kate Freier presented information on the overall project, cash flow, and an update on the work that has been completed.

#### Project Highlights

- South Patient Wing punch-list is in progress.
- East patient Wing punch-list is in progress.
- Emergency department framing is in progress.
- Emergency Department roofing is in progress.

#### Construction Update:

- South patient wing is complete, punch-list in progress.
- East patient wing is complete, punch-list in progress.
- Temporary hallways complete for patient wing access to existing hospital.

#### Upcoming Work

- Exterior finishes at North addition.
- Sitework around patient wings.
- Demolition of existing patient rooms.
- Steel installation in Courtyard.

John Albert presented information on the overall budget. The project is currently on budget.

### **REQUESTED DECISIONS**

The proposal request log was reviewed.

#### **1. Change Orders:**

John Albert reviewed the change orders numbers:

138. Move floor drain in Endo Decontam Room.

142. Add sink and air in Decontam.

143. Change soiled utility door hardware to classroom function.

146. Thicken concrete sidewalk at emergency exit sidewalks.

**ACTION:** A motion was made by Chuck Zieman to recommend approval of change orders 138, 142, 143, and 146 for the amount of \$27,455 to the Hospital Commission. The motion was seconded by Jerry Pfeifer and carried with all members voting in favor.

### **ADJOURNMENT**

**ACTION:** The meeting was adjourned by mutual consent at 11:26 a.m.

### **NEXT MEETING**

The next Building Committee meeting will be held on Thursday, June 20, 2019, at 11:00 p.m. in the Helen White Conference Room 1.

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Chairperson

## MINUTES OF THE MEDICAL STAFF MEETING

River's Edge Hospital & Clinic, St. Peter, Minnesota  
Tuesday, May 7, 2019

The Medical Staff of River's Edge Hospital & Clinic met on Tuesday, May 7, 2019, at 4:00 p.m. in the Helen G. White Conference Center.

**ATTENDING:** Doctors Ereth and Tilton, Jane Peterson, CNP; Jennifer Donkin, Stacey Johnson, Tracie Lafata, Paula Meskan, Shirley Miller, Linda Prah, Janelle Rauchman, Paulette Redman, George Rohrich, and Paulette Redman (Recorder)

**Excused:** Doctors Bogonko, Hockenberry, Long, Kalsi, P. Kumar, Rotilie, and Swanson;

**Absent:** Doctors Baldwin, Botker, Christiansen, Curtis, Gauthier, Gazzola, Gujer, Janiga, Jones, Klenk, Lundquist, Matson, McCabe, McNamara, Springer, Stevens, and Zents; Jennifer Cousins, PA-C, Kenneth Fisher, CRNA, Alison Huber, PA-C, Linda Lentz, CRNA, April Quigley, PA-C, Justin Schulte, PA-C, JoAnn Tran, CRNA, and Jeffrey Weideman, PA-C.

TOPIC	DISCUSSION	ACTION
<b>1. Review of Minutes</b>	The minutes of the March 12, 2019 Medical Staff Meeting were distributed electronically prior to this meeting for review. There were no corrections or additions to the minutes.	A motion was made by Dr. Tilton to approve the minutes as presented. Motion seconded by Dr. Ereth, and carried with all members voting in favor.
<b>2. Consent Agenda</b>	The consent agenda includes the following: A. Acceptance of the March and April 2019 Quality Committee Meeting Minutes B. Acceptance of the April 2019 ITP Committee Meeting Minutes	A motion was made by Dr. Tilton to approve the consent agenda as presented. Motion seconded by Dr. Ereth, and carried with all members voting in favor.
<b>3. Credentialing Committee</b>	<p>The Executive/Credentials Committee made the following recommendations:</p> <p><b>Initial Appointment to the Medical Staff:</b>  <u>April 2019</u>  Jennifer Hillestad, CNP                      Courtesy Staff/AHP, Urgent Care  Madhuresh Kumar, MD                      Active Staff, IM/Hospitalist</p> <p><u>May 2019</u>  None.</p> <p><b>Reappointment to the Medical Staff:</b>  <u>April 2019</u>  David A. Bryce, MD                      Courtesy Staff, Pain Management  Seth Consoer, MD                      Courtesy Staff, Ophthalmology  Alison M. Huber, PA-C                      Active Staff/AHP, Orthopedic Physician Assistant  Richard Lowry, OPA-C                      Courtesy Staff/AHP, Orthopedic Physician Assistant  Mitchell Palmer, MD                      Courtesy Staff, Emergency Medicine  Stephen Pearson, MD                      Courtesy Staff, Radiology</p>	<p>The Credential Committees recommendations for appointment, reappointment, and change in privileges, were presented to the Medical Staff for review.</p> <p>The recommendations will be forwarded to the Hospital Commission.</p>

	<p><b><u>May 2019</u></b>  David Durand, MD                      Courtesy Staff, Teleradiology  Matthew Sondag, MD                  Courtesy Staff, Teleradiology  Adam Wallace, MD                    Courtesy Staff, Teleradiology</p> <p><b>Change in Staff Category – Provisional to Full Membership:</b>  <b><u>April 2019</u></b>  Brent J. Baldwin, DO                  Active Staff, ENT  Timothy N. Christiansen, MD        Active Staff, ENT</p> <p><b><u>May 2019</u></b>  Kristina Davis, CNP                    Courtesy Staff/AHP, Emergency Medicine  David Gross, MD                        Courtesy Staff, Teleradiology  Gregory Haines, MD                   Courtesy Staff, Teleradiology  Geoffrey Rake, MD                     Courtesy Staff, Teleradiology</p> <p><b>Change in Privileges:</b>  <b><u>April 2019</u></b>  Stephen Pearson, MD                  Courtesy Staff, Radiology</p> <p><b><u>May 2019</u></b>  None.</p> <p><b>Withdrawal from Medical Staff:</b> The following practitioners have declined to continue membership and privileges at River's Edge Hospital and Clinic and requested voluntary withdrawal from the Medical Staff:  <b><u>April 2019</u></b>  Holly Gisi-York, CNP                    Courtesy Staff/AHP, Urgent Care  Hassan Salameh, MD                    Active Staff, IM/Hospitalist</p> <p><b><u>May 2019</u></b>  Susan Austin, MD                        Courtesy Staff/AHP, Teleradiology  Ashley Brenden, PA-C                   Courtesy Staff/AHP, Surgical physician assistant  Robert Christensen, MD                Active Staff, Emergency Medicine  Elizabeth Osborne, MD                  Courtesy Staff, Family Medicine</p>	
<p><b>4. Administrative update and Report from Hospital Commission Meetings</b></p>	<p><i>March &amp; April 2019:</i></p> <ul style="list-style-type: none"> <li>• Audit results presented – the 2018 audit was clean.</li> <li>• DNV is in the house performing their survey for hips/knees, shoulder and spine certifications.</li> <li>• River's Edge received an award last week at the PENworks conference for achieving an Advancement Award based on results of the recent Baldrige survey.</li> </ul>	

	<ul style="list-style-type: none"> <li>• REH will be receiving a quality award from the Minnesota Hospital Association in recognition of the work done by the Falls Prevention Team.</li> <li>• Hospital Week will be celebrated next week.</li> <li>• The builders will turn the new hospital wings over to River's Edge on May 28. Patients will begin using the new rooms on June 3.</li> <li>• Flow of patients throughout the building will be changing once the new wings open up and remodeling work begins in the OR area. New signage will be posted.</li> </ul>	
5. Medical Staff Practices, Policies, Procedures, Guidelines, Requirements and Business	Nothing to report.	
6. Nursing Updates	<p>Equipment/Programs/Staffing/Patient Satisfaction</p> <p>a) Med Surg</p> <ol style="list-style-type: none"> <li>1. Preparing for the move to the new wings beginning May 20. Surgical admissions on June 3 will be admitted to the new east wing. Patients who will be remaining in the facility overnight on June 3 will be moved from the old rooms into the new rooms.</li> <li>2. <u>DNV Non-conformity Audits</u> – <b>Therapeutic Duplication</b>- This issue was closed by DNV. Orders sets have been updated with correct language and are more descriptive and medications are ranked 1<sup>st</sup> choice, 2<sup>nd</sup> choice, etc. Orders will continue to be audited.</li> <li>3. <u>Staffing</u> – All RN positions are full, with two new RNs starting on May 14. There are open PCA positions – one is a replacement position, two are new positions based on the bed expansion. One Med-Surg RN is close to completing the New Graduate RN residency program, three nurses have completed their first session as part of a new group going through the program. Currently planning for 10 Med-Surg nurses to complete the program.</li> <li>4. <u>Quality Improvement</u> – <b>Discharge Process</b> – In process. Have identified work flow and barriers and have developed a list of solutions, including team rounding. <b>Medication Education</b> – improving. <b>Wound Vac process</b> – In control. <b>IV Start Skills</b> – In process. Dr. Ereth will be doing education with nurses. New practice arm is being ordered. Chris Taylor, education specialist, will be setting up training. Anticipate all nurses will be able to go through training and validation within two months.</li> <li>5. <u>Statistics</u> – <b>Length of Stay</b> - YTD is 2.76. January 2018 had the longest stay of 3.18. Length of Stay by Procedure: Arthroplasty Knee 2.6 to 3 days – Arthroplasty Knee Bilateral 3 days – Arthroplasty Revision Knee 3 days – Arthroplasty Hip 2.2 to 3 days. (length of stay by Procedure by Provider is</li> </ol>	



- available upon request) Monthly average daily census is trending upward.
6. Patient Satisfaction – HCAHPS Percentile Ranking (12 months rolling scores) remains at the 94<sup>th</sup> percentile; although the overall score has dropped below the goal of 88. HCAHPS Discharge Composite - Press Ganey Discharge Composite remains at 90<sup>th</sup> percentile. Looking at the month-to-month scores, there are some months where the goal of a score of 70 has been met, so the goal may be set higher.
  7. Capacity – Review of data when the department is “Red” shows the following:
    - Closed due to volume 81%
    - Closed due to staffing 6%
    - Closed due to acuity 13%

Med-Surg has worked with ED on a new improvement project and have initiated a new communication pattern between Med-Surg and ED regarding potential admissions. ED is also holding some patient for admission pending discharges. Surgery patients are occasionally held in PACU during patient overlap times.

b) Surgical Services

1. DNV 2018 Accreditation Survey – reporting for the final time on measures that have been closed. Documentation of H&P prior to surgery – improved, but not yet at 100%; will be continuing to monitor. Documentation of nausea and vomiting in post-anesthesia note – documentation now based on structured notes, last audit showed 100% compliance; will continue with random audits. Post-Operative notes containing required elements – currently at 80%, will be continuing to monitor.
2. Surgical Volumes – Trending Upward.
3. DNV Survey for Orthopedics. DNV currently in-house to survey for Hips and Knees certification, additionally for certification of spine and shoulder programs. If all three programs pass the survey, River's Edge will have achieved a certification for Orthopedic Center of Excellence.
4. A new surgery manager has been hired and will begin work on June 6.

c) ED / Urgent Care / Trauma

1. Patient Satisfaction – ED likelihood to recommend (rolling score) 2019 Goal: 80% or better. Closed to meeting this goal. Scores have dropped somewhat due to the temporary waiting room and registration areas. Changes have been made to waiting room lighting; process implemented for patients to write down their chief complaint rather than stating it out loud. UC likelihood to recommend (rolling score) 2019 Goal: 72% from previous 75%. Currently, at 72%. Number of surveys returned tends to be low.
2. Transfer Statistics and Data – Highest number of transfers from ED to other acute facilities for first quarter 2019 were due to the need for a higher level of care, followed by capacity, GI and behavioral health. During the month of April,

	<p>most transfers were for cardiology, followed by need for higher level of care and behavioral health. Total transfers were 36 in March, 44 in April.</p> <p>3. <u>Admissions</u>- Acute Admissions (ED to Med/Surg) February and March each had six acute admissions. This increased to 12 acute admissions in April. Observational Care admissions from the ED showed 11 in February, 14 in March and 10 in April.</p> <p>4. <u>Staffing</u> – <b>Emergency Department</b>- One open RN/Paramedic position. Current Contract Nurse until July, 2019. <b>Urgent Care</b>- Fully staffed.</p> <p>d) <u>EMS Services</u> – Number of total calls and transfers has remained stable.</p>	
<p><b>7. Ancillary Departmental Updates / Equipment / Programs / Staffing</b></p>	<p>a) Imaging</p> <p>1) <u>Echo</u> – Looking at options for provision of Echo services. Will be reaching out to Minneapolis Heart to see if they have the capacity now to bring River's Edge back on board.</p> <p>b) Laboratory</p> <p>1) <u>Staffing</u> – One tech will be leaving in August, but may wish to remain on a casual basis. One tech will be decreasing hours from 1.0 to 0.8 FTE in June.</p> <p>2) <u>Blood Gas Analyzer</u> – Looking at replacing current blood gas analyzer by end of summer.</p> <p>c) Physical Medicine</p> <p>1) Preparing for move to new therapy area in the new Med-Surg wing.</p> <p>2) New PT starting in June, replacing 1 position due to retirement.</p> <p>3) One physical therapist currently pursuing certification in women's health; second therapist pursuing certification for treatment of concussion; third therapist pursuing education in chronic pain and chronic pain neurosciences, alternatives for treating patients with chronic pain.</p> <p>d) Cardiac Rehab – No updates</p> <p>e) Pharmacy –</p> <p>1) <u>Patient Satisfaction</u> – (HCAHPS Inpatient) <i>Communication about Medications (patient told what new medicine was for and staff described medicine side effects)</i> – 2019 Goal of patients answering “always” is 74%. January 2019, goal exceeded, score increased in February to over 80%.</p> <p>2) <u>Biosimilars</u> – Looking to utilize biosimilar drug for Remicade based on patient's specific insurance requirements. Biosimilars would provide a lower cost for the drug therapy compared to Remicade. Discussed and approved by ITP Committee.</p> <p>3) <u>Use of Home Meds for Custodial Patients</u> – Pharmacy will be changing current policy to require that all patients receive their medications through the hospital pharmacy, rather than bringing in their home medications for use. This would include hospice patients. A letter detailing the change will be sent to the Hospice program.</p> <p>f) Health Information Management</p> <p>1) <u>Incomplete Medical Records &gt; 30 days</u> – 14 charts, which include a variety of</p>	

	<p>deficiencies.</p> <p>2) <b><u>Incomplete Medical Records &lt; 30 days post discharge</u></b> – 46 charts which include 66 deficiencies, a significant drop from two months ago.</p> <p>3) <b><u>Meaningful Use: Clinical Information Reconciliation</u></b> – 2018 Measure Results for Clinical Information Reconciliation is 21.1%. Passing Threshold for 2019 will be 80%. Currently at 82.8% as of March 18, 2019. <b><u>Stage 3 EH Objectives</u></b> (Eligible Hospital) – of the 12 measures, 8 are green, 4 are red with 3 of the red being discontinued. Red remaining is Send Summaries of Care. There are a number of components to this measure, including maintaining correct physician addresses in the Excellian database.</p>	
<b>8. Dietary</b>	Nothing to report.	
<b>9. Adjourn</b>	<p>Meeting adjourned at 4:48 p.m. The next Medical Staff meeting will be held on Tuesday, July 16, 2019.</p> <p>Trauma Review Committee met immediately following the Medical Staff meeting.</p>	<p>It was by mutual consensus to adjourn the meeting.</p> <p>Meeting adjourned at 4:48 p.m.</p>

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 Laura Tilton, MD, Secretary-Treasurer

# APPLICANTS FOR MEDICAL STAFF MEMBERSHIP AND CLINICAL PRIVILEGES

## River's Edge Hospital & Clinic












May 2019

These applicants have met the core criteria by offering evidence of these items:

Initial Appointment	Provisional Status to Full Membership	Reappointment	Change in Privileges	Staff Category	Name/License	Specialty	Facility	Verification of Medical School Graduation	Verification of Residency	Current Minnesota Medical Licensure	Narcotics Registration Certificate (DEA) Drug Enforcement Agency	National Practitioner Data Bank Queried – Favorable Status	Peer References (3 initial/2 reappointment)	Board Certification	Clinical Privileges specific to River's Edge Hospital & Clinic	Primary Hospital Reference by Chief of Staff or Service	Credentials Committee Appointment Checklist	Current Liability Insurance with Limits as set by law	Orientation Packet Received
		√		C	David A. Durand, MD	Teleradiology	CRL	√	√	√	√	√	√	√	√	√	√	√	NA
		√		C	Matthew J. Sondag, MD	Teleradiology	CRL	√	√	√	√	√	√	√	√	√	√	√	NA
		√		C	Adam N. Wallace, MD	Teleradiology	CRL	√	√	√	√	√	√	√	√	√	√	√	NA
	√			C	Kristina A. Davis, CNP	Emergency Medicine	Premier Staffing	√	NA	√	√	√	√	√	√	√	√	√	NA
	√			C	David A. Gross, MD	Teleradiology	CRL	√	√	√	√	√	√	√	√	√	√	√	NA
	√			C	Gregory A. Haines, MD	Teleradiology	CRL	√	√	√	√	√	√	√	√	√	√	√	NA
	√			C	Geoffrey D. Raile, MD	Teleradiology	CRL	√	√	√	√	√	√	√	√	√	√	√	NA

### Physicians who declined to continue privileges and membership at River's Edge Hospital and requested release from Medical Staff:

Susan J. Austin, MD	Courtesy, Teleradiology
Ashley Brenden, PA-C	Courtesy Staff/AHP, Surgical Physician Assistant
Robert Christensen, MD	Active Staff, Emergency Medicine
Elizabeth Osborne, MD	Courtesy Staff, Family Medicine

Quality Dashboard															
River's Edge Hospital															
Category/Metric	12/31/2018	1/31/2019	2/28/2019	3/31/2019	4/30/2019	5/30/2019	6/30/2019	7/31/2019	8/31/2019	9/30/2019	10/31/2019	11/30/2019	12/31/2019	Trend	Benchmark/goal
Readmissions	1.93%	2.01%	1.81%	1.80%	1.30%										2.7% Internal Benchmark
Falls Risk	1.9	1.7	1.9	1.8	1.4										State Average <3.5 Falls per 1000 patient days
SSI	0.23%	0.20%	0.19%	0.18%	0.16%										2.0% Internal Benchmark
SSI - Knees		0	0	0	0										10.3 #SSI/#Surgeries x 1000 per MHA
SSI - Hips		0	0	0	0										9.1 #SSI/#Surgeries x 1000 per MHA
CAUTI	0.00%	0.00%	0.00%	0.00%	0.00%										0.73% State Average
Surgical Complications	0.17%	0.15%	0.14%	0.19%	0.21%										2.7% Internal Benchmark
ED Transfer Communication	75%	80%	79%	21%	67%										>70 Internal Benchmark
HAI	0.00%	0.00%	0.00%	0.00%	0.00%										0.00% Internal Benchmark
Staff Influenza Immunization	96.0%	97.0%	97.0%	97.0%	N/A										95.0% Internal Benchmark
Pressure Ulcer Rate	0.00%	0.00%	0.00%	0.00%	0.00%										0.47% State Average

**River's Edge Hospital & Clinic**  
**Executive Summary**  
**George Rohrich, CEO**  
**May 16, 2019**

**Comments about April & Looking Forward:**

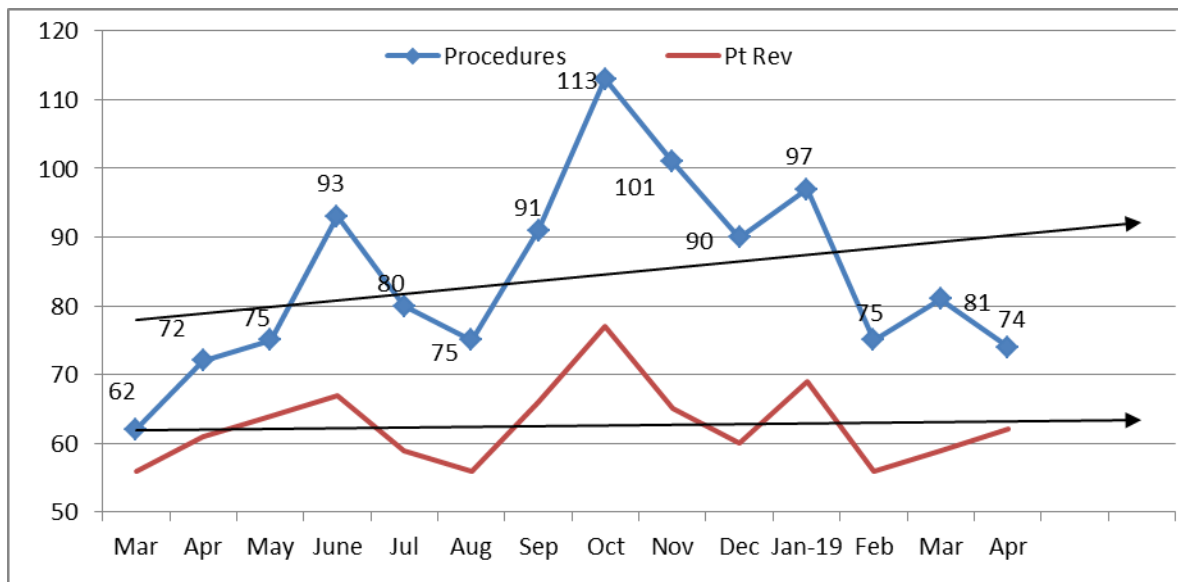
**Operations: April has a positive bottom line**

- MTD had a bottom line of \$170,000 vs MTD budget of \$33,000.
- YTD Actual is \$748,000 vs YTD budget \$1,332,000.
- Net Operating Revenue MTD was \$235,000 vs MTD budget of \$75,000.
- Net Operating Revenue YTD was \$958,000 vs YTD budget of \$1,500,000.
- Looking Forward: May is trending to be below budget.

**Cash: Cash increased**

- MTD Cash increased by \$667,000 resulting in balance of \$12,514,000.
- YTD Cash has increased \$2.041 million.
- Our 2019 Year End Cash budget goal is \$10.4M.

**Statistics: Inpatient Surgery procedures were below budget**



These procedures are a Key Indicator budgeted at 81 inpatient procedures per month.

**Significant Decisions this Month:**

- Renewal of QHR Services Agreement
- Several Capital Requests.

# River's Edge Hospital Statistics Dashboard

Department/Service Monthly	2012 Actual	2013 Actual	2014 Actual	2015 Actual	2016 Actual	2017 Actual	2018 Actual	YOY Trend	2019 Budget	Jan	Feb	March	April	YTD Trend
<b>Lab</b>														
Lab Procedures Inpatient	334	423	317	657	754	800	865		874	1014	883	743	978	
Lab Procedures Outpatient	2898	2992	2241	3144	2470	2717	2903		2951	3057	2440	2956	2747	
<b>Radiology Procedures</b>														
Radiology Procedures Inpatient	16	24	26	73	114	106	106		99	131	98	100	101	
Radiology Procedures Outpatient	456	368	337	330	285	296	268		259	262	228	267	273	
CT Procedures Outpatient	83	92	105	147	130	156	151		158	132	143	163	192	
Ultrasound Procedures Outpatient	33	31	28	35	35	35	33		35	25	14	24	24	
<b>ED &amp; UC</b>														
Urgent Care	166	127	154	200	343	397	360		369	353	308	332	288	
Emergency Department	336	330	367	388	367	343	352		392	285	256	349	322	
<b>Surgery</b>														
Surgical Procedures Inpatient	1	5	10	46	73	81	85		81	97	75	81	74	
Surgical Procedures Outpatient	54	55	46	53	61	59	66		67	56	58	50	60	
<b>Physical Therapy</b>														
PT Modalities Inpatient	270	306	353	627	857	862	843		970	990	759	826	751	
PT Modalities Outpatient	1108	1113	1056	1030	983	1129	1286		1310	1290	1060	1178	1356	
<b>Admissions</b>														
Admissions from ED + UC	24	24	26	23	20	8	9		na	13	6	6	12	
Transferred to Acute Hospital	na	na	na	na	29	31	33		na	36	31	36	44	
Admissions Medical	20	27	31	16	12	10	13		na	14	10	7	16	
Admissions Surgical	0	0	0	37	63	71	73		na	82	67	71	66	
Med Surg Patient Days	52	78	88	143	206	221	236		270	270	219	208	239	
Average Daily Census (ADC) IP	1.71	2.56	2.88	4.70	6.75	7.30	7.73		8.86	8.71	7.06	6.71	7.71	
Average Daily Census Swing	2.67	1.94	1.82	0.82	0.42	0.31	0.30		0.15	0.32	0.23	0.74	0.26	
<b>Total ADC</b>														
Total ADC	4.38	4.50	4.70	5.53	7.17	7.60	8.08		9.01	9.03	7.29	7.45	7.97	
<b>Adjusted Patient Days</b>														
Adjusted Patient Days					341	358	366		400	401	341	330	391	

Less than Budget  
 90% of Budget  
 Equal or Greater than Budget





# April 2019 Financial Report

## Statement of Revenues and Expenses

### SUMMARY OF MONTH AND YTD

	Apr-19	Budget	Variance	%
Gross Patient Revenue	\$ 6,172,853	\$ 6,523,939	\$ (351,086)	-5.4%
Net Patient Revenue	\$ 3,299,702	\$ 3,158,723	\$ 140,979	4.5%
Operating Expenses	\$ 3,077,303	\$ 3,088,761	\$ (11,458)	-0.4%
Net Operating Income	\$ 234,517	\$ 75,512	\$ 159,005	7.1%

YTD 2019	Budget	Variance	%
\$ 24,663,309	\$ 27,366,441	\$ (2,703,132)	-9.9%
\$ 13,378,862	\$ 13,905,577	\$ (526,715)	-3.8%
\$ 12,491,740	\$ 12,421,649	\$ 70,091	0.6%
\$ 958,262	\$ 1,506,635	\$ (548,373)	7.2%

## Balance Sheet

Net Patient Receivables	Increased	\$ 116,606
Accounts Payable	Increased	\$ 390,062

	Apr-19	Mar-19	Difference
Cash (all sources)	\$ 12,514,431	\$ 11,846,856	\$ 667,575
Accounts Receivable	\$ 4,635,725	\$ 4,519,119	\$ 116,606
Accounts Payable	\$ 2,034,979	\$ 1,644,917	\$ 390,062
Check Run	\$ 1,591,836	\$ 2,153,896	\$ (562,060)

	Covenants	Apr-19	Mar-19
Days in Cash	>60	125.75	125.97
Days in AR		42.68	41.84
Debt Coverage	>1.25	3.17	3.11

## Community Care and Collections

		Accounts
Community Care	\$ 6,719.57	13
Presumptive Care	\$ 178,326.84	118
Total	\$ 185,046.41	131
Collection Activity for Board Approval	\$ 123,221.42	
Bad Debt Recovery	\$ 39,162.05	
Revenue Recapture	\$ 32,062.48	

## Community Care and Collections

For the month of: **Apr-19**

	<u>Total</u>	<u>100% write off</u>	<u>50% write-off</u>	<u>Not eligible</u>
Community care grants for the month	\$ 6,719.57	6,460.82	258.75	
- number of patient accounts		11	2	0
		0 previous in bad debt status		
Presumptive community care grants	<u>Total</u>	<u>Patients</u>	<u>Accounts</u>	<u>Uninsured</u>
	\$ 178,326.84		118	-
Collection activity for Board Approval is:	<u>Total</u>	<u>Insured</u>	<u>Uninsured</u>	\$ - HMS
- number of patient accounts	\$ 123,221.42	-	-	123,221.42 Excellian
	-	-	-	123,221.42
Revenue recapture for the month	<u>\$ 32,062.48</u>			

### Community and Presumptive Care Grants - YTD

2019	\$ 305,315
2018	\$ 573,648
2017	\$ 532,153
2016	\$ 351,783
2015	\$ 86,713
2014	\$ 152,079
2013	\$ 239,465

### Revenue Recapture experience

2019	\$ 122,099
2018	\$ 196,664
2017	\$ 233,972
2016	\$ 196,887
2015	\$ 199,340
2014	\$ 193,899
2013	\$ 178,823

### Collections YTD Activity

2019	\$ 310,386
2018	\$ 1,097,294
2017	\$ 1,012,481
2016	\$ 1,297,499
2015	\$ 906,627
2014	\$ 885,568
2013	\$ 830,210

### Gross Bad Debt Recovery

2019	\$ 150,377
2018	\$ 317,947
2017	\$ 367,518
2016	\$ 294,106
2015	\$ 275,788
2014	\$ 324,569
2013	\$ 271,225

Bad Debts are written off in the following month from the month they are approved. (Example: November bad debts post to December books.)

Community Care and Collections  
Detail by Month

Community & Presumptive Grants			Collection Activity for Board			Revenue Recapture			Bad Debt Recovery		
	2018	2019		2018	2019		2018	2019		2018	2019
Jan	56,161.70	101,590.79	Jan	74,001.32	84,635.35	Jan	2,890.20	1,243.74	Jan	8,973.14	9,682.49
Feb	67,794.84	9,694.97	Feb	64,578.32	15,430.33	Feb	61,539.72	52,908.77	Feb	68,007.81	60,715.13
Mar	34,803.08	8,982.71	Mar	69,468.82	87,099.06	Mar	43,808.35	35,884.12	Mar	52,160.83	40,817.56
Apr	30,963.30	185,046.41	Apr	74,120.82	123,221.42	Apr	29,854.33	32,062.48	Apr	35,131.23	39,162.05
May	22,912.78		May	66,819.95		May	14,116.15		May	26,794.34	
Jun	47,761.90		Jun	109,721.03		Jun	4,210.26		Jun	12,898.01	
Jul	60,840.98		Jul	109,620.10		Jul	4,186.70		Jul	14,607.91	
Aug	77,114.78		Aug	101,425.70		Aug	17,873.61		Aug	25,795.13	
Sep	26,585.39		Sep	128,950.50		Sep	10,676.80		Sep	17,875.83	
Oct	49,376.70		Oct	109,710.30		Oct	3,854.98		Oct	16,870.69	
Nov	57,544.20		Nov	67,437.90		Nov	2,032.55		Nov	18,035.71	
Dec	41,787.19		Dec	121,439.05		Dec	1,620.52		Dec	20,796.34	
	<u>\$ 573,646.84</u>	<u>\$305,314.88</u>		<u>\$ 1,097,293.81</u>	<u>\$ 310,386.16</u>		<u>\$ 196,664.17</u>	<u>\$ 122,099.11</u>		<u>\$317,946.97</u>	<u>\$ 150,377.23</u>

River's Edge Hospital and Clinic  
April 2019

**Top 5 Vendors Paid**

	<u>Vendor</u>	<u>Amount</u>	<u>Description</u>
1 Check	ORTHOPAEDIC & FRACTURE CLI Total	230,406.23	Professional Services Agreement
2 Checks	STRYKER ORTHOPAEDICS Total	145,565.02	Implantables
2 Checks	RURAL PHYSICIANS GROUP Total	128,346.24	Monthly Hospitalist Invoice-February 19
2 Checks	PREMIER STAFFING INC Total	103,994.00	ED/UC Providers
4 Checks	CARDINAL HEALTH 110, LLC Total	97,738.88	Pharmacy

**Top 5 Checks Paid**

<u>Check</u>	<u>Vendor</u>	<u>Amount</u>	<u>Description</u>
70900	ORTHOPAEDIC & FRACTURE CLI	230,406.23	Professional Services Agreement
70855	ALLINA HEALTH SYSTEM	94,128.71	ED/UC Providers, Training, Support
70823	STRYKER ORTHOPAEDICS	82,852.56	Implantables
70669	RURAL PHYSICIANS GROUP	64,173.12	Monthly Hospitalist Invoice-February 19
70757	RURAL PHYSICIANS GROUP	64,173.12	Monthly Hospitalist Invoice-March 19

**Total Check Register \$ 1,591,836.24**

## River's Edge Hospital

Critical Access Hospitals

Top 10 Key Financial Indicators

INDICATOR	Formula	Desired Trend	NRH MEDIAN	Jan	Feb	Mar	Apr	May	Jun	Trend
Days Cash on Hand	Cash + Short Term Investments + Unrestricted Long Term investments / (Total Expenses - Depreciation) / 365	↑	68.83	106.19	109.78	125.97	125.75			
Days in Net AR	Net Patient AR(Including Adj and Settlements) / Net Patient Services Revenue / 365	↓	54.2	43.86	42.87	41.84	42.68			
Days in Gross AR	Gross Patient AR(Excludes Settlements) / Gross Patient Service Revenue / 365	↓		38.14	40.85	42.13	40.99			
Total Margin	(Excess of Revenue Over Expenses / Total Revenue)*100	↑	2.51%	13.12%	-6.98%	7.72%	5.14%			
Operating Margin	(income from Operations / Total Revenue) * 100	↑	0.99%	14.33%	-5.25%	9.19%	7.08%			
Debt Service Coverage	Excess of Revenue Over Expenses + Depreciation + Interest Expense / Principle Payments + Interest Expense	↑	2.73X	3.06	3.07	3.11	3.17			
Long Term Debt to Capitalization	Long Term Debt / (Long Term Debt + Assets) *100	↓	17.02%	38.12%	38.25%	38.83%	40.57%			
Average Age of Plant	Accumulated Depreciation / Depreciation Expense	↓	9.77 yrs	11.96	12.03	12.11	11.69			
Salaries to Net Patient Revenue	Salary Expense / Net Patient Revenue *100	↓	45.57%	20.56%	26.86%	25.13%	23.84%			
Medicare Inpatient Mix	Total Inpatient Days - Swing Bed Days	↓	73.01%	64.07%	59.82%	63.46%				
Medicare Outpatient Mix	Oupatient Charges for Payor / Total Outpatient Charges	↓	37.90%	41.84%	39.53%	44.78%	38.58%			

## Summary of Capital Expenditures - 2019

Approved Capital Amount - Budget 2019	\$ 750,000.00
Stryker System 8 Saws and Drills	\$ 88,152.75
UPS for Computer System	15,302.95
Scanner - HIMIS	9,056.22
Zero Turn Lawnmower	7,200.00
Cisco 9400 Switch	64,532.04

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Requests through 5/15/2019	\$ 184,243.96
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Remaining Balance	<u><u>\$ 565,756.04</u></u>
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To: REHC Hospital Commission

Date: 5/15/2019

From: Lori Zook, CFO

RE: BoardDocs

### **Action/Recommendation**

The Hospital recommends purchasing the BoardDocs Pro Document Management System for \$10,000 per year plus \$1,000 start-up fee.

### **Background**

The current system of e-mailing documents and communicating with the Commission is inefficient, as the documents are often over the e-mail limits and are difficult to adapt to follow guidelines. BoardDocs will allow a central depository of documents accessible to Commission members as well as staff to provide updated information and to be able to archive documents as necessary.

### **Fiscal Impact**

Vendor	Price
BoardDocs	\$10,000 per year \$1,000 installation fee

### **Community Impact**

This enhances the ability to efficiently use the time of those governing the hospital.

## **Alternatives/Variations**

Do Not Act: We will continue to have issues properly providing information for governance.

Negative Vote: Same as not acting.

Modification: This is always an option of the Commission.





To: REHC Hospital Commission

Date: 5/15/2019

From: Lori Zook, CFO

RE: Fujitsu fi-7700 Scanner

### **Action/Recommendation**

The Hospital recommends purchasing a new Fujitsu fi-7700 document scanner with a 3 year extended service agreement for \$9,056.22.

### **Background**

The current scanner used in HIMS is a least 12 years old and has scanned several million documents. It is working well, but service is no longer available if it breaks down. The scanner is used to scan documents into the electronic medical record. These are records from systems that don't work with our current electronic health record such as pre-surgery clinical information on our patients, EKG's, Ambulance documents, etc. These are vital to the appropriate care of our patients.

### **Fiscal Impact**

Vendor	Price
CDW-G	\$9,056.22
ITsavvy	\$9,290.00

### **Community Impact**

This enhances the ability to efficiently and effectively care for our patients using all information available.

## **Alternatives/Variations**

Do Not Act: We will be missing results necessary for decision making or will need to maintain paper records.

Negative Vote: Same as not acting.

Modification: This is always an option of the Commission.

# RIVER'S EDGE

## HOSPITAL • ST. PETER



To: REHC Hospital Commission

Date: 5/15/2019

From: Lori Zook, CFO

RE: Zero Turn lawnmower

### Action/Recommendation

The Hospital recommends purchasing a new Zero turn lawnmower for \$7,200 plus taxes.

### Background

After bringing a mower on-site to test, we can reduce the man-hours by 50% and still keep the campus looking nice. This, combined with other changes, will allow our maintenance men to do other work, and will hopefully reduce the total FTE's needed to maintain the new campus. We are utilizing the City contract to purchase this item.

### Fiscal Impact

Vendor	Price
John Deere –Kibble Equipment	\$7,200 plus taxes

### Community Impact

This enhances the ability to efficiently and effectively care for our campus and facility.

## **Alternatives/Variations**

Do Not Act: We will potentially need to add more FTE's to maintain the campus.

Negative Vote: Same as not acting.

Modification: This is always an option of the Commission.



To: REHC Hospital Commission

Date: 5/15/2019

From: Lori Zook, CFO

RE: Cisco 9400 Network Switch

### **Action/Recommendation**

The Hospital recommends purchasing a Cisco 9400 Network Switch for \$64,532.40.

### **Background**

This new switch is needed in the Server Room because the current switch does not have the capacity to handle the two current data closets as well as the two new data closets. The existing switch will be repurposed to the data closet in the Emergency Department area, which will save the cost of purchasing a new one for that area.

### **Fiscal Impact**

Vendor	Price
Marco	\$64,532.04
CDW	\$66,356.99

### **Community Impact**

This will properly establish the network for the new building, enabling us to use all of the new equipment and space to its full capacity.

## **Alternatives/Variations**

Do Not Act: We will be unable to support IT needs for the new space.

Negative Vote: Same as not acting.

Modification: This is always an option of the Commission.

# RIVER'S EDGE

## HOSPITAL • ST. PETER



To: REHC Hospital Commission  
REHC Finance Committee

Date: 5/10/2019

From: George Rohrich, CEO

RE: Recommend Approval of Third Amendment to Advisory Services Agreement with Quorum Health Resources, (QHR).

### **Action/Recommendation**

Authorize Approval of Third Amendment to Advisory Services Agreement costing:

- \$136,000 for the year beginning July 1, 2019.

### **Background**

REHC has had this agreement in-place for the past 3 years. This agreement provides leadership support, financial best practices support, and two focused consultation engagements. In 2018, these services provided REHC \$467,000 in operational expense savings at a cost of \$130,000.

### **Fiscal Impact**

The fiscal impact is a total cost of \$136,000 which will be paid with operation funds. This expense was anticipated and included in our 2019 budget.

### **Community Impact**

This agreement reduces costs which enables REHC to use these savings for other services.

### **Alternatives/Variations**

Do Not Act: Would result in a delay of potential future savings.

Negative Vote: Denial would make these savings unavailable.

Modification: This is always an option of the Committee/Commission.

# Rivers Edge Hospital Expansion and Renovation



Monthly Status Report #13 • 5-16-2019





# EXECUTIVE SUMMARY



## Project Highlights:

South Patient Wing punch-list is in progress  
East Patient Wing punch-list is in progress  
Emergency Department framing is in progress  
Emergency Department roofing is in progress

**SCOPE**



**SCHEDULE**



**BUDGET**



**QA/QC**



**SAFETY**



# PAY APPLICATIONS



Pay Application number #12 has been submitted through May 31<sup>st</sup>

Total billing for pay app #12 is \$415,378

Total billed to date is \$15,153,342 or 60%

# CONSTRUCTION UPDATE



- **Work Completed Last month**
  - » South Patient wing is complete, punch-list in progress
  - » East Patient Wing is complete, punch-list in progress
  - » Temporary hallways complete for Patient Wing access to existing hospital.
  
- **Upcoming Work**
  - » Exterior finishes at North addition
  - » Sitework around Patient Wings
  - » Demolition of existing Patient Rooms
  - » Steel installation in Courtyard





## SCHEDULE

### ■ KEY MILESTONE DATES:

- » New Patient Wings Complete – May 2019
- » New Patient Wings Move-In - June 2019
- » Kitchen and Pharmacy Begins – June 2019
- » OR-4 Begins – June 2019
- » PACU Begins - June 2019
- » Central Sterile Processing Begins – June 2019
- » Front Dining/Waiting Begins – June 2019
- » Decontamination Begins – June 2019

River's Edge Hospital				AHFD	
Saint Peter, MN		4/19/18	5/16/19		5/16/19
Budg. Code	Item	Approved GMP Bud	Working Budget	Cost To Date	Difference Apvd vs Wk
100	Development Costs	104,030	118,112	54,392	14,082
200	Building Construction	25,000,711	25,726,549	14,615,457	1,021,625
300	Professional Fees/Reimburs.	2,811,295	2,869,916	2,226,806	88,232
400	Administrative & Legal	106,000	170,291	132,846	64,291
500	Equipment	2,532,602	2,913,923	365,333	(55,277)
600	Furnishings	711,122	471,510	18,884	(239,612)
700	Telecomm. Systems	1,079,217	1,129,720	231,350	50,503
800	Financing	By Owner	By Owner	-	-
900	Project Contingency	1,031,479	399,978	-	(943,844)
	<b>TOTAL</b>	<b>33,376,456</b>	<b>33,800,000</b>	<b>17,645,070</b>	<b>-</b>
Notes:	Excludes Financing and Inflation				
	% Design+Bid+Const Cont -	4.22%	4.3%		
	New S.F. -	38,258	38,258		
	Renovation S.F. -	39,458	39,458		
	Gross Squar Footage -	77,716	77,716		
	Bldg \$ / GSF -	314.56	314.57		
	Proj \$ / GSF -	429.47	434.92		
	Bid Date -	3/2/18	3/2/18		
	Duration (Months) -	26.0	26.0		

River's Edge Hospital			<u>PROPOSAL REQUEST LOG</u>				AHFD, Inc.			
Saint Peter, MN							USDA			
No.	Date	Alt / ASI	Description	Low	to	High	Rec Appvl	CO	Time	Approved
138	4/17/19		Move floor drain in Endo Decontam Room				3,934			
142	4/26/19	ASI-73	Add sink & air in Decontam				19,442			
143	4/26/19		Change soiled utility door hardware to classroom function				2,020			
146	5/15/19	ASI-81	Thicken concrete sidewalk at emergency exit sidewalks				2,059			
Total							27,455			

Printed 5/16/2019

REH&C GMP-Working Bud -190514.xls-COR Log