

River's Edge Hospital
HOSPITAL COMMISSION MEETING

Wednesday, August 28, 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. July 24, 2019 Regular Meeting - pg 2
- 5. APPROVE CONSENT AGENDA**
 - A. Accept July 16, 2019 Patient & Community Advisory Council Meeting - pg 7
 - B. Accept August 21, 2019 Finance Committee Meeting Minutes - pg 8
 - C. Accept August 21, 2019 Quality Committee Meeting Minutes - pg 17
 - D. Accept August 22, 2019 Building Committee Meeting Minutes - pg 25
- 6. COMMISSION DEVELOPMENT**
(Info)
 - A. MHA QHR Webinar: Fostering a Culture of Care
- 7. QHR PRESENTATION: AFFILIATION**
(Info)
 - A. Presented by Dave Yackell - pg 27
- 8. MEDICAL STAFF**
(Mot)
 - A. Approve Membership Recommendation - pg 31
(Mot)
 - B. Approve Privileges Recommendation
- 9. QUALITY COMMITTEE**
(Info)
 - A. Quality Dashboard - pg 32
- 10. ADMINISTRATIVE REPORTS**
(Info)
 - A. Executive Summary - pg 33
(Info)
 - B. Statistical & Strategic Plan Dashboards - pg 34
- 11. FINANCE COMMITTEE**
(Info)
 - A. Financial Summary - pg 36
(Mot)
 - B. Approve Write Off to Collection Recommendation - pg 38
(Mot)
 - C. Approve Accounts Payable Recommendation - pg 40
(Mot)
 - D. Approve Capital Purchases - pg 41
- 12. BUILDING COMMITTEE**
(Info)
 - A. Monthly Status & Budget Report - pg 45
(Mot)
 - B. Change Orders Recommendation
- 13. ADJOURN**

RIVER'S EDGE HOSPITAL & CLINIC COMMISSION MEETING

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

Wednesday, July 24, 2019

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

Absent: Stephen Grams, Trustee; Todd Prafke, City Administrator.

CALL TO ORDER

The regular meeting of the Hospital Commission was called to order at 12:35 p.m. by Chairperson Margie Nelsen.

APPROVAL OF AGENDA

The July 24, 2019 Agenda was reviewed.

ACTION: A motion was made by Gary Swedberg to approve the July 24, 2019 agenda. The motion was seconded by Jerry Pfeifer and carried with all members voting in favor.

APPROVAL OF MINUTES

The June 26, 2019 Hospital Commission Minutes were reviewed.

ACTION: A motion was made by MaryAnn Harty to approve the June 26, 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 July 16, 2019 Medical Staff Minutes.
- Acceptance of the July 17, 2019 Finance Committee Meeting Minutes.
- Acceptance of the July 17, 2019 Quality Committee Meeting Minutes.
- Acceptance of the July 18, 2019 Building Committee Meeting Minutes.

ACTION: A motion was made by Blake Combellick 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.

COMMISSION EDUCATION REPORT

MHA Trustee Conference:

On July 12 – 14, 2019 the Minnesota Hospital Association hosted their annual summer trustee conference. The Hospital Commission had two trustees attend; Margie Nelsen and MaryAnn Harty. Ms. Nelsen and Ms. Harty were recognized for earning certification through the Minnesota Hospital Association trustee certification program. The comprehensive certification process prepares hospital trustees to effectively meet the growing demands of serving on a hospital board and to be strong health care and community leaders.

Hospital Commission Meeting Minutes

River's Edge Hospital & Clinic

July 24, 2019 Page 2

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:

Christopher J. Church, PA-C

Courtesy Staff, Emergency Management

Reappointment to the Medical Staff:

Robert A. Kessler, MD

Courtesy Staff, Telemedicine Infectious Disease

Tom D. Larson, MD

Courtesy Staff, Teleradiology

James D. Nack, DPM

Courtesy Staff, Podiatry

Brian S. Pepito, MD

Courtesy Staff, Telemedicine Infectious Disease

Damon D. Shearer, MD

Courtesy Staff, Teleradiology

Asma S. Syed, MD

Courtesy Staff, Telemedicine Infectious Disease

Michele M. Whaylen, PA-C

Courtesy Staff, Emergency Medicine

Change in Category – Provisional to Full Membership:

Carol Y. Lu, MD

Courtesy Staff, IM/Hospitalist

Alexander Y. Zubkov, MD

Courtesy Staff, Telemedicine-Neuro

Provisional Membership: None

Change in Clinical Privileges: None

Withdrawn from Medical Staff:

Christopher P. Peck, MD

Courtesy Staff, Emergency Medicine

ACTION:

- 1) A motion was made by John Lammert 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 Blake Combellick and carried with all members voting in favor.
- 2) A motion was made by MaryAnn Harty 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 Jerry Pfeifer and carried with all members voting in favor.

QUALITY REPORT

Quality Dashboard was reviewed by Janelle Rauchman. The dashboard contains results from a number of measurable and reportable quality measures. ED transfer communication was low in March but the number has rebounded to 90% in June. This is the highest it has been since River's Edge has been reporting on this.

Janelle presented a draft version of the compliance report that will be reported on quarterly in the Hospital Commission meeting.

ADMINISTRATIVE REPORT

A. Executive Summary.

The written report submitted by George Rohrich was reviewed.

- River's Edge is showing a negative bottom line for the month of June.
- Net Operating Revenue MTD is (\$102,000) vs MTD budget of (\$874,000).
- June results show an increase of cash on hand of \$289,000 resulting in balance of \$10,490,000 million. The 2019 Year End Budget goal is \$10.4M.

B. Statistical Dashboard.

The statistical report for June, 2019, was reviewed. Of the 17 measured activities, 3 are green. The monthly strategic report was also reviewed.

FINANCIAL REPORT

A. June Financial Summary.

Lori Zook presented the financial reports for June. The month of June had a Net Operating Income of (\$102,241) and a year-to-date stand at \$656,550. Total Patient Revenue stands at \$5,747,223. Year-to-date Total Patient Revenue stands at \$36,224,449, over an YTD budget of \$39,728,727. June Net Patient Revenue stands at \$3,168,556 with a budget of \$2,197,897. Monthly Net Operating Revenue stands at \$3,193,767, versus a budget of \$2,203,173. Monthly Operating Expenses stands at \$3,296,008 over budget of \$3,077,024

Cash flow for June was positive at \$289,448 Days Cash On Hand is 97.63 days, and Days Revenue in Accounts Receivable stands at 39.19 days. Debt coverage is 3.10 for the month of June.

B. Write-Off to Collection.

Community Care grants totaled \$18,141.18, covering 8 accounts. Presumptive community care grants totaled \$94,679.60 covering 16 accounts. Year-to-Date Community Care grants total \$551,609. Collection activity approval totaled \$103,721.10. Year-to-Date collection activity stands at \$491,266. Year-to-Date \$182,349 of gross bad debts have been recovered. The Revenue Recapture program through the State of Minnesota resulted in receipt of \$5,601.10, year-to-date recovery total of \$141,411.

ACTION: A motion was made by Blake Combellick to accept the recommendation made by the Finance Committee for approval of \$18,141.18 in Community Care grants, \$94,679.60 in Presumptive Community Care grants and \$103,721.10 in write-offs to collection for June. The motion was seconded by Jerry Pfeifer and carried with all members voting in favor.

C. Accounts Payable Review.

Accounts Payable review for June included a total of \$1,832,166 paid via check.

ACTION: A motion was made by John Lammert to recommend approval of checks totaling \$1,832,166. The motion was seconded by Blake Combellick and carried with all voting in favor.

Hospital Commission Meeting Minutes

River's Edge Hospital & Clinic

July 24, 2019 Page 4

BUILDING COMMITTEE

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

Work Complete Last Month:

- Emergency Department MEP Rough in is complete.
- Phase 6 demo is complete.
- Endoscopy is complete.
- Connection corridor is complete.

Upcoming Work:

- Painting at the Emergency department.
- Underground plumbing in the kitchen/pharmacy area.
- Framing at the kitchen/pharmacy area.
- MEP rough in at the kitchen/pharmacy area.
- OR04 Framing and MEP rough in.

Key Milestone Dates:

- PACU drywall complete- August 2019.
- Courtyard concrete complete – July 2019.
- Dining and waiting glass complete – August 2019.
- Department Ceiling complete – August 2019.

Change Orders:

Lori Zook reviewed the change orders numbers:

- 157. Trane to add HEPA Filter section back to Surgery RTU#7.
- 160. Remove south window in ER Exam E12 to accommodate light.
- 163. Modify rated wall between dining and pharmacy and bulkhead over banquettes.
- 164. Add str steel to front dining wall to support stone lintel.
- 168. Reroute expansion joint at ED to match existing conditions.
- 169. WON door – request for additional welding.
- 170. Add circuits for decontam annunciator panel.
- 171. Add str support to relocate garage light fixtures.
- 172. Adding plaster trap to sink in trauma.
- 173. Change Crabapple tree from 3” diameter to 2” diameter.
- 174. Revise str steel and metal framing around towers.
- 175. Change HM frames to 4” headers for doors P07A, Q91, W01 in interior CMU walls.
- 177. Change sprinkler pipe label type.

ACTION: A motion was made by MaryAnn Harty to approval of change orders 157, 160, 163, 164, 168, 169, 170, 171, 172, 173, 174, 175, and 177 for the amount of \$41,614. The motion was seconded by Laura Hulsebus and carried with all members voting in favor.

57. Snow melt mech. equipment – system operational by Nov. 1, 2019. This item would be paid for out of the Hospitals Capital Expenditures and would need approval from the City Council. The estimated amount is \$70,518.

ACTION: A motion was made by Blake Combellick to recommend purchasing the Snow Melt Mech. Equipment to the Saint Peter City Council for the estimated amount of \$70,518. The motion was seconded by Jerry Pfeifer and carried with all members voting in favor.

Hospital Commission Meeting Minutes

River's Edge Hospital & Clinic

July 24, 2019 Page 5

ROUNDTABLE COMMENTS

Stephanie Holden:

1. Strategic Planning – August 6th at Gustavus.
2. July 27th – Gilling for Good, proceeds go to the Saint Peter Food Shelf.
3. August 5th – Night to Unite
4. August 23rd – Fresh Food Friday.

ADJOURNMENT

ACTION: A motion was made by John Lammert to adjourn the meeting. Motion seconded by Jerry Pfeifer and carried with all voting in favor. Meeting was adjourned at 1:58 p.m.

NEXT MEETING

The next regular meeting of the Hospital Commission will be Wednesday, August 28, 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, August 21, 2019, at 12:30 p.m. This meeting will convene in the River's Edge Hospital Helen G. White Conference Center.

Chairperson

Secretary

RIVER'S EDGE

HOSPITAL • ST. PETER



X Margie Nelsen

X Mary Ann Harty

X Cheryl Olson

X Lois Braun

X Carol Clark

X Lorraine Edwards

X Matt Tuggle

X Stephanie Holden

X Ginny Miller

X Ken Rossow

X Bonnie Jaster

X Arnie Jaster

X Keith Keogh

Minutes –July 16, 2019 Patient & Community Advisory Council Meeting

Bonnie Jaster, Arnie Jaster, and Keith Keogh were introduced as the newest members to the council. The council membership is now full.

Jackie Kimmet, Chief Human Resources Officer, gave a presentation and answered questions about the recruitment and retention process at River's Edge Hospital.

Stacey Johnson, RN, Urgent Care and Emergency Department Manager, gave a presentation and answered questions about when it's appropriate to go to Urgent Care, the Emergency Room or go to one's primary care provider.

Stephanie Holden gave an update to the council about strategic planning and how the feedback from the council will be used in the development of the strategic plan.

Stephanie Holden gave an update on the construction project.

The Council shared their healthcare/hospital experiences (River's Edge and others) with the group to help the group start thinking about patient care at River's Edge.

Stephanie Holden distributed the Patient and Visitor Guide to the Council to read through and review for clarity and to provide feedback on the level of understandability and if items needed to be added to the guide. The due date to return feedback is Friday, Aug. 2.

The next PCAC meeting was set for Tuesday, October 15 at 6 p.m.

The meeting was adjourned at 8:02 p.m.

RIVER'S EDGE HOSPITAL & CLINIC FINANCE COMMITTEE MEETING

River's Edge Hospital & Clinic

Wednesday, August 21, 2019

<i>Present:</i>	<input checked="" type="checkbox"/>	Margie Nelsen, Chairperson; Finance	<input checked="" type="checkbox"/>	George Rohrich, CEO
	<input checked="" 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 type="checkbox"/>	Lori Zook CFO	<input type="checkbox"/>	

CALL TO ORDER

The Finance Committee meeting was called to order at 12:35 p.m. by Margie Nelsen.

APPROVAL OF AGENDA

The agenda for the August 21, 2019 Finance Committee meeting was reviewed. An item was added to agenda: Item 3C – Plasma Freezer.

ACTION: A motion was made by John Lammert to approve the amended August 21, 2019 agenda with item 3C- Plasma Freezer added. The motion was seconded by Stephen Grams and carried with all members voting in favor.

GENERAL VISITOR COMMENTS

None

REVENUE AND EXPENSES

Tricia Bauer presented the financial reports for July. The month of July had a Net Operating Income of \$286,230 and a year-to-date stand at \$942,782. Total Patient Revenue stands at \$6,494,547. Year-to-date Total Patient Revenue stands at \$42,720,952, over an YTD budget of \$45,406,980. July Net Patient Revenue stands at \$3,247,320 with a budget of \$2,313,037. Monthly Net Operating Revenue stands at \$3,262,785, versus a budget of \$2,324,819. Monthly Operating Expenses stands at \$2,976,555 over budget of \$3,157,270.

ACTION: A motion was made by Stephen Grams to approve 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 July decreased by (\$260,993).

BALANCE SHEETS

Balance Sheets were reviewed. Net Patient Receivables shows an increase of \$435,491 for the month of July and accounts payable increased \$35,519.

YEAR-TO-DATE REVENUES AND EXPENSES

Year-to-date Gross Revenue is \$42,720,956 versus a budget of \$45,406,980 which is (\$2,686,024) under budget. Year-to-date Net Patient Revenue is \$22,357,258 versus a budget of \$21,850,468, or \$506,790 over budget. Year-to-date Total Operating Expenses are \$21,561,653 a budget of \$21,814,426 or (\$252,773) under budget.

DASHBOARD

Days Cash (All Sources) On Hand is 190.27 and Days Revenue in Accounts Receivable stands at 43.02 days. Debt coverage is 5.80 for the month of July.

CHECK REVIEW

The Check Review list was given to the Finance Committee and reviewed. The total amount for the month of July is \$1,990,810.

ACTION: A motion was made by Stephen Grams to recommend the acceptance of checks, in the amount of \$1,990,810 to the Commission. The motion was seconded by John Lammert and carried with all members voting in favor.

COMMUNITY CARE AND COLLECTIONS

Community Care grants totaled \$13,381.46, covering 18 accounts. Presumptive community care grants totaled \$60,843.83 covering 16 accounts. Year-to-Date Community Care grants total \$625,835. Collection activity approval totaled \$128,938.43. Year-to-Date collection activity stands at \$620,204. Year-to-Date \$195,780 of gross bad debts have been recovered. The Revenue Recapture program through the State of Minnesota resulted in receipt of \$3,045.86, year-to-date recovery total of \$144,457.

ACTION: A motion was made by Stephen Grams to recommend approval of Community Care grants in the amount of \$13,381.46, Presumptive Community Care grants in the amount of \$60,843.83 and \$128,938.43 in write-offs to collection for June. The motion was seconded by John Lammert and carried with all members voting in favor.

ITEMS FOR APPROVAL

1. Stryker Beds:

The Hospital recommends purchasing ten Stryker S3 beds with ComfortGel Mattresses to match the seven beds purchased for the new rooms added in construction. River's Edge did not elect to replace all of the existing beds with the construction project, choosing to stagger the purchase dates and/or purchase from capital dollars. At this time, it would be prudent to replace ten of the old beds. The old beds at 14 years old and are starting to have significant repair histories. They also do not have all the same features that the new beds have, such as in-bed scales and some of the monitoring functions. Other beds were not considered because it would be most functional to have them all match. The cost for the ten Stryker S3 beds would be \$77,739.50.

ACTION: A motion was made by John Lammert to recommend purchasing ten Stryker S3 beds with Comfort Gel Matresses for the total amount of \$77,739.50 to the Hospital Commission. The motion was seconded by Stephen Grams and carried with all members voting in favor.

2. EchoNous Signostic Bladder Scanner with two Ultrasound probes for IV Starts:

The Hospital recommends purchasing one EchoNous Signostic Bladder Scanner with two ultrasound probes for IV starts. In 2018, River's Edge purchased an EchoNous Signostic Bladder scanner. A bladder scanner is used to care for patients on Med/Surg and helps prevent infections. Because the hospital now has two patient wings, a second bladder scanner is requested. In addition, two probes for finding veins for IV starts are requested – one for the new scanner and one for the existing scanner. Other models were not considered because his process was completed just last year and we wish the probes to be interchangeable. The cost of the EchoNous Bladder Scanner is \$21,230 and the cost for the two EchoNous Ultrasound Probes is \$19,900 for a total of \$41,630.

Finance Committee Meeting Minutes

River's Edge Hospital & Clinic

August 21, 2019 Page 3

ACTION: A motion was made by Stephen Grams to recommend purchasing a EchoNous Signostic Bladder Scanner with two ultrasound probes for IV starts for the total amount of \$41,630 to the Hospital Commission. The motion was seconded by John Lammert and carried with all members voting in favor.

3. Plasma Freezer

The Hospital requests approval of the emergency purchase of a plasma freezer. The existing plasma freeze stopped functioning and needed immediate replacement. This freezer stores frozen blood products which are typically used for surgery or trauma. This is a critical piece of equipment and required immediate replacement. The cost of purchasing the plasma freezer was \$10,325.46.

ACTION: A motion was made by John Lammert to recommend approval for the emergency purchase of a plasma freezer for the amount of \$10,325.46 to the Hospital Commission. The motion was seconded by Stephen grams and carried with all members voting in favor.

ADJOURNMENT

ACTION: The meeting was adjourned by mutual consent at 1:20 p.m.

NEXT MEETING

The next Finance Committee meeting will be held on Wednesday, September 18, 2019, at 12:30 p.m. in Helen White Conference Room 1.

Chairperson

Vice-Chairperson

RIVER'S EDGE HOSPITAL & CLINIC
Balance Sheet for the Period Ending
July 31, 2019

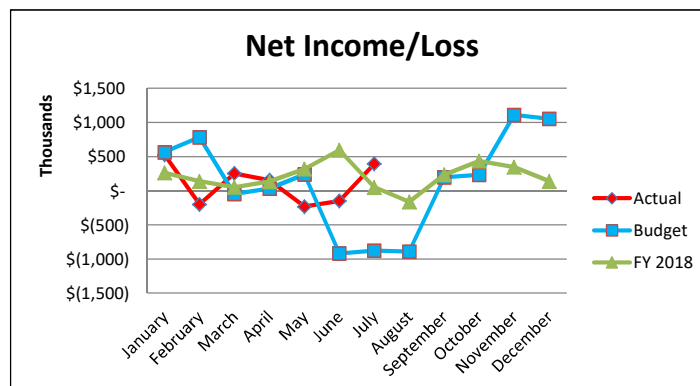
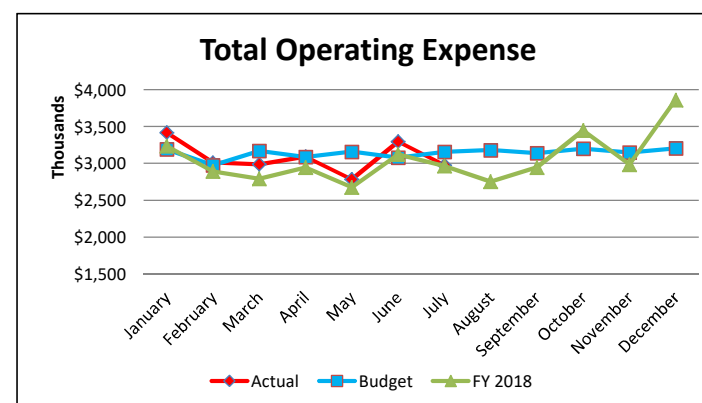
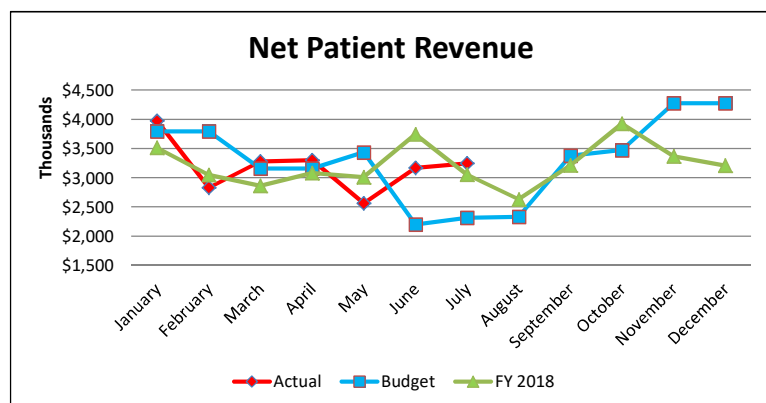
	<u>Current Period</u>	<u>Prior Period</u>	<u>Last Year</u>		<u>Current Period</u>	<u>Prior Period</u>	<u>Last Year</u>
	<u>Assets</u>			<u>Liabilities & Fund Balances</u>			
Current Assets:				Current Liabilities:			
Cash	\$ 7,258,637	\$ 7,523,188	\$ 7,350,900	Accounts Payable	\$ 2,305,776	\$ 2,270,257	\$ 2,282,553
				Construction Payable	23,608	1,800,702	-
Patient Receivables	8,579,421	7,502,744	9,123,763	3rd Party Payers	976,311	1,037,912	326,000
Less: Allow for Uncollectible	(3,917,878)	(3,276,692)	(4,099,280)	Accrued Payroll	267,875	184,270	164,165
Total Patient Receivables	4,661,543	4,226,052	5,024,483	Accrued PTO	820,031	841,695	752,388
				Self Insurance	17,765	13,613	10,710
3rd Party Payers	-	-	-	Payroll Taxes & Deductions	136,907	239,066	119,978
Other Receivables	111,913	92,685	68,876	Accrued Int Payable Bond	71,755	54,403	(30,525)
Inventories	628,409	641,551	700,117	Current Portion Long Term Debt	799,789	799,789	132,989
Prepaid Expenses	250,553	272,820	257,316				
Total Current Assets	12,911,055	12,756,296	13,401,692	Total Current Liabilities	5,419,817	7,241,707	3,758,258
Other Assets				Long Term Debt			
Board Designated Funds	2,831,242	2,830,811	2,825,763	Bonds Payable	9,889,385	9,889,385	10,697,374
Dedicated Cash	356,978	391,212	134,888	PERA	7,992,398	8,092,351	8,287,831
Investments	400,644	392,644	390,904	Construction Payable	14,832,508	11,719,947	
Total Other Assets	3,588,864	3,614,667	3,351,555	Total Long Term Debt	32,714,291	29,701,683	18,985,205
Intangible Assets:				Total Liabilities	38,134,108	36,943,390	22,743,463
Unamortized Loan Costs	39,698	40,476	49,038				
Plant, Property and Equipment				Fund Balances			
Land & Land Improvements	1,702,797	1,702,797	1,702,797	Current Year	743,727	350,706	1,549,713
Building and Improvements	9,788,080	9,788,080	7,260,686	Prior Year	5,913,419	5,913,419	3,370,936
Fixed Equipment	3,910,868	3,910,868	3,982,136	Capital Restricted Funds	-	-	-
Major Moveable Equipment	9,420,089	9,243,354	9,798,045				
Total Plant, Property & Equip.	24,821,834	24,645,099	22,743,664	Total Fund Balance	6,657,146	6,264,125	4,920,649
Less: Accum Depreciation	(15,676,385)	(15,569,510)	(15,564,598)				
Total PP&E less depreciation	9,145,449	9,075,589	7,179,066				
Construction in Progress	19,106,188	17,720,487	3,682,761				
Total Fixed Assets	28,251,637	26,796,076	10,861,827				
Total Assets	<u><u>\$ 44,791,254</u></u>	<u><u>\$ 43,207,515</u></u>	<u><u>\$ 27,664,112</u></u>	Total Liabilities & Fund Balances	<u><u>\$ 44,791,254</u></u>	<u><u>\$ 43,207,515</u></u>	<u><u>\$ 27,664,112</u></u>

RIVER'S EDGE HOSPITAL and CLINIC
STATEMENT OF REVENUES AND EXPENSES
July 31, 2019

Current Month				Year to Date				
Actual	Budget	Variance	Prior Year		Actual	Budget	Variance	Prior Year
\$ 4,238,060	\$ 3,810,495	\$ 427,565	\$ 3,809,163	Inpatient Revenue	\$ 27,270,683	\$ 30,706,306	\$ (3,435,623)	\$ 27,364,676
2,258,397	1,867,758	390,639	2,155,583	Outpatient	15,450,273	14,700,674	749,599	15,841,264
6,496,457	5,678,253	818,204	5,964,746	Total Patient Revenue	42,720,956	45,406,980	(2,686,024)	43,205,940
-	-	-	-	Physician Clinic Revenue	-	-	-	-
6,496,457	5,678,253	818,204	5,964,746	Hospital Patient Revenue	42,720,956	45,406,980	(2,686,024)	43,205,940
				Revenue Deductions				
3,016,912	3,205,884	(188,972)	2,715,466	Contractual- Current YR	18,840,251	22,441,188	(3,600,937)	19,761,998
-	-	-	-	Contractual - Prior Year	-	-	-	-
125,446	92,500	32,946	117,104	Bad Debt	729,915	647,500	82,415	679,454
74,275	50,582	23,693	60,841	Charity Discounts	621,837	354,074	267,763	328,672
30,949	16,250	14,699	11,341	Self pay Discounts	152,464	113,750	38,714	112,469
1,555	-	1,555	4,619	Other	19,231	-	19,231	12,347
3,249,137	3,365,216	(116,079)	2,909,371	Total Revenue Deductions	20,363,698	23,556,512	(3,192,814)	20,894,940
3,247,320	2,313,037	934,283	3,055,375	Net Patient Revenue	22,357,258	21,850,468	506,790	22,311,000
8,000	2,221	5,779	9,816	Co-op Inc.	56,000	17,346	38,654	58,126
2,835	2,551	284	2,616	Live Well Fitness	17,934	17,857	77	19,972
611	510	101	640	Other Revenue	53,007	3,587	49,420	14,982
4,019	6,500	(2,481)	-	Grants	20,236	6,500	13,736	12,900
15,465	11,782	3,683	13,072	Total Other Operating Revenue	147,177	45,290	101,887	105,980
3,262,785	2,324,819	937,966	3,068,447	Net Operating Revenue	22,504,435	21,895,758	608,677	22,416,980
				Operating Costs				
815,279	847,562	(32,283)	699,779	Salaries & Wages	5,614,837	5,810,278	(195,441)	5,425,747
237,865	281,902	(44,037)	294,228	Benefits	1,779,415	1,942,119	(162,704)	1,653,662
466,870	493,474	(26,604)	473,777	Fees-Professional	3,526,057	3,451,623	74,434	3,285,602
183,834	192,037	(8,203)	199,471	Fees-Other	1,534,865	1,293,684	241,181	1,362,138
811	8,750	(7,939)	6,461	Recruitment	8,081	61,238	(53,157)	39,845
863,903	881,141	(17,238)	885,739	Supplies	5,553,026	6,104,491	(551,465)	5,973,628
33,807	41,122	(7,315)	33,005	Utilities	259,658	287,851	(28,193)	206,135
98,744	89,100	9,644	95,412	Repairs & Maintenance	568,989	621,504	(52,515)	562,600
32,361	53,126	(20,765)	47,401	Lease, Rent, Minor Equip	804,568	380,546	424,022	354,046
5,318	13,005	(7,687)	8,431	Dues & Subscriptions	45,799	70,423	(24,624)	50,345
21,610	30,203	(8,593)	13,919	Prof. Develop/Education	130,278	206,620	(76,342)	134,307
20,157	19,232	925	16,656	Marketing, Public Relations	102,660	135,859	(33,199)	117,857
9,520	8,749	771	8,218	Insurance	71,253	61,243	10,010	60,837
33,002	34,227	(1,225)	34,571	Interest Expense	231,506	239,589	(8,083)	242,489
39,916	61,665	(21,749)	42,776	Tax Expense	533,496	431,655	101,841	423,762
5,905	5,817	88	4,412	Other Expenses	41,846	42,597	(751)	28,037
107,653	96,158	11,495	102,458	Depreciation/Amortization	755,319	673,106	82,213	703,096
2,976,555	3,157,270	(180,715)	2,966,714	Total Operating Expenses	21,561,653	21,814,426	(252,773)	20,624,133
286,230	(832,451)	1,118,681	101,733	Net Operating Income	942,782	81,332	861,450	1,792,847
8.77%	-35.81%	44.58	3.32%		4.19%	0.37%	3.82	8.00%
				NonOperating Income(Expense)				
6,837	3,582	3,255	3,962	Interest Income-General	53,878	25,074	28,804	39,626
99,953	(47,147)	147,100	(56,267)	Other Income/ (Expense)	(252,929)	(330,029)	77,100	(282,762)
106,790	(43,565)	150,355	(52,305)	Total Non Operating	(199,051)	(304,955)	105,904	(243,136)
\$ 393,020	\$ (876,016)	\$ 1,269,036	\$ 49,428	Excess Revenue over Expenses	\$ 743,731	\$ (223,623)	\$ 967,354	\$ 1,549,711
12.05%	-37.68%		1.61%		3.30%	-1.02%		6.91%

RIVER'S EDGE HOSPITAL and CLINIC
STATEMENT OF REVENUES AND EXPENSES
July 31, 2019

	January	February	March	April	May	June	July	August	September	October	November	December	Total
Total Patient Revenue	6,898,742	5,611,184	5,980,530	6,172,853	5,813,968	5,747,223	6,496,457						42,720,957
Net Patient Revenue	3,974,962	2,826,933	3,277,263	3,299,702	2,562,519	3,168,556	3,247,320						22,357,255
Net Operating Revenue	3,989,504	2,860,734	3,287,941	3,311,820	2,597,880	3,193,767	3,262,785						22,504,431
Operating Costs													
Total Operating Expenses	3,417,778	3,010,972	2,985,692	3,091,678	2,782,976	3,296,008	2,976,555						21,561,659
Net Operating Income	571,726	(150,238)	302,249	220,142	(185,096)	(102,241)	286,230						942,772
	14.33%	-5.25%	9.19%	6.65%	-7.12%	-3.20%	8.77%						4.19%
NonOperating Income(Expense)													
Total Non Operating	(48,111)	(49,451)	(48,335)	(64,218)	(46,797)	(48,931)	106,790						(199,053)
Excess Revenue over Expenses	\$ 523,615	\$ (199,689)	\$ 253,914	\$ 155,924	\$ (231,893)	\$ (151,172)	\$ 393,020						743,720
	13.12%	-6.98%	7.72%	4.71%	-8.93%	-4.73%	12.05%						3.30%



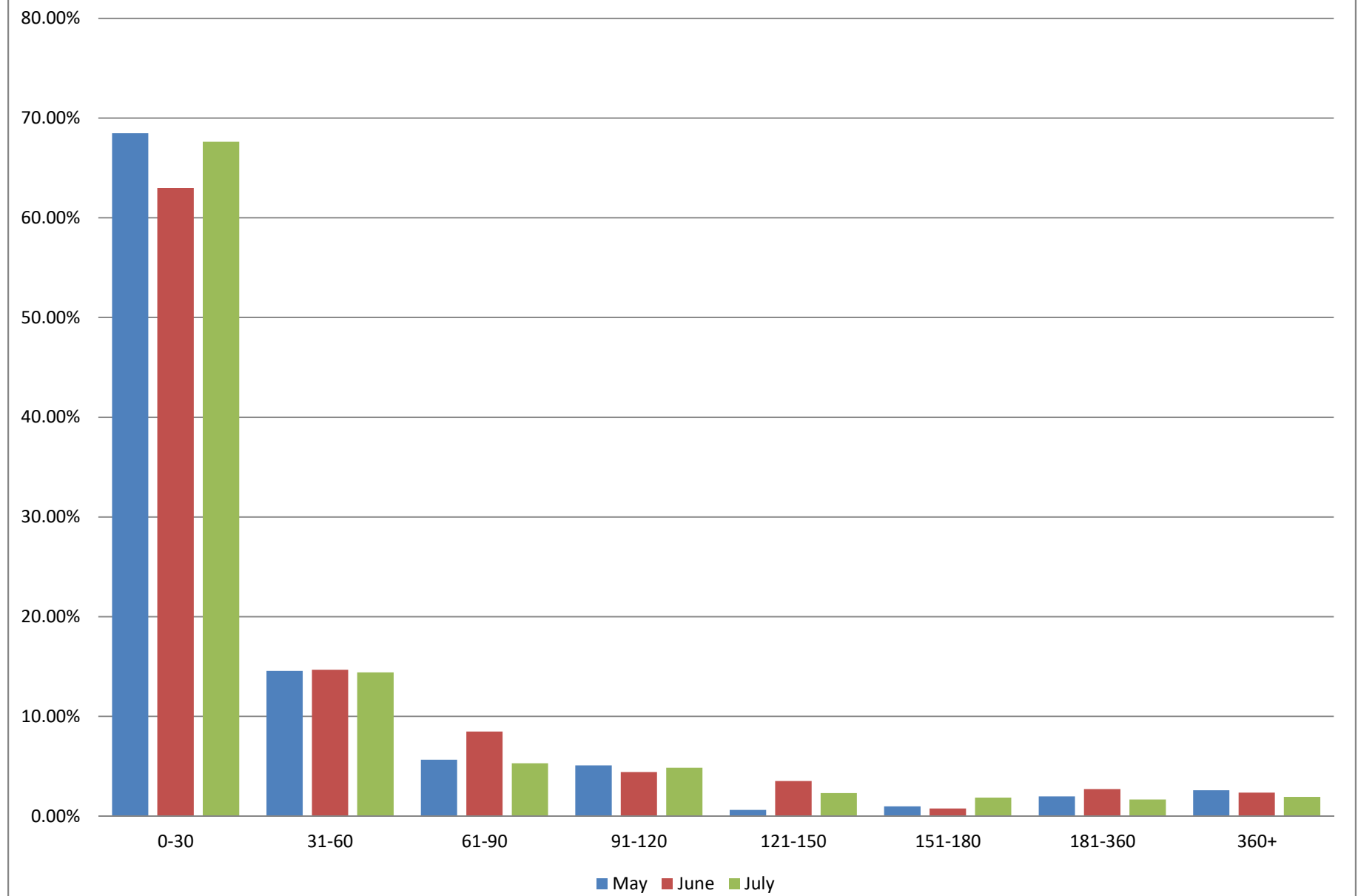
River's Edge Hospital and Clinic
Cash Flow Report at
July 31, 2019

	<u>MONTH</u>	<u>YEAR</u>
Operating Activities and NonOperating Revenue:		
Excess of Revenue over Expenses	\$ 393,021	\$ 743,727
Adj to reconcile excess of Revenue over Expenses to Net Cash		
Depreciation & Amortization	107,653	69,706
Noncash gifts & bequests	-	-
Increase (Decrease) Amt. Due 3rd Parties	(61,601)	(2,137,577)
(Increase) Decrease in Accounts Receivable	(454,719)	321,872
(Increase) Decrease in Prepaids	22,267	(44,480)
(Increase) Decrease in Inventories	13,142	(27,178)
Increase (Decrease) in Accounts Payable & Accrued Liabilities	(1,877,595)	(2,585,867)
Net Cash provided by Operations	<u>(1,857,832)</u>	<u>(3,659,797)</u>
Investing Activities:		
Purchase/Disposals of Property & Equipment	(1,562,437)	(7,911,749)
Purchase of Investments	(8,000)	(11,194)
Construction Escrow	37,362	1,624,215
Bremer Construction	3,122,556	9,944,075
Cash provided by Investments	<u>1,589,481</u>	<u>3,645,347</u>
Financing Activities:		
Repayment of Long-Term Debt	(9,995)	(169,767)
Payment of Interest - LT Debt	17,353	(59,830)
Capital Grants		
Cash provided by Financing	<u>7,358</u>	<u>(229,597)</u>
INCREASE (DECREASE) IN CASH & CASH Equivalentents	<u>(260,993)</u>	<u>(244,047)</u>
CASH BEGINNING OF PERIOD	10,490,145	10,473,199
CASH END OF PERIOD	<u><u>\$ 10,229,152</u></u>	<u><u>\$ 10,229,152</u></u>
CHANGE & BALANCE OF CASH		
Operating Cash	290,457	7,258,637
Non-Current Cash	(1,009)	2,970,515
TOTAL CHANGE & BALANCE OF CASH	<u><u>\$ 289,448</u></u>	<u><u>\$ 10,229,152</u></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
Operating Activities and NonOperating Revenue:													
Excess of Revenue over Expenses	\$ 523,615	\$ (199,688)	\$ 253,917	\$ 170,301	\$ (231,893)	\$ (151,171)	\$ 393,021						\$ 758,102
Adj to reconcile excess of Revenue over Expenses to Net Cash													
Depreciation & Amortization	103,737	99,057	103,355	(553,776)	103,266	106,414	107,653						69,706
Noncash gifts & bequests	-	-	-	-	-	-	-						-
(Increase) Decrease Amt. Due 3rd Parties	(222,778)	-	150,000	-	(2,003,197)	-	(61,601)						(2,137,576)
(Increase) Decrease in Accounts Receivable	322,983	128,377	48,262	(124,266)	409,864	(76,487)	(454,719)						254,014
(Increase) Decrease in Prepaids	17,428	(128,592)	(20,687)	(10,302)	34,954	40,453	22,267						(44,479)
(Increase) Decrease in Inventories	(6,544)	(1,454)	(8,848)	8,194	(17,186)	(14,482)	13,142						(27,178)
Increase (Decrease) in Accts Pay. & Accrued Liab.	153,478	52,898	511,668	(1,620,737)	301,308	1,113,179	(1,877,595)						(1,365,801)
Net Cash provided by Operations	891,919	(49,402)	1,037,667	(2,130,586)	(1,402,884)	1,017,906	(1,857,832)	-	-	-	-	-	(2,493,212)
Investing Activities:													
Purchases/Disposals of Property & Equipment	(1,633,286)	(1,232,262)	(2,069,238)	(373,045)	(955,013)	(1,253,051)	(1,562,437)						(9,078,332)
Purchase of Investments	(8,000)	(8,000)	(8,000)	(8,000)	36,806	(8,000)	(8,000)						(11,194)
Construction Escrow	1,907,340	1,333,704	(1,710,708)	37,753	-	18,764	37,362						1,624,215
Bremer Construction			3,180,941	3,134,107	-	506,471	3,122,556						9,944,075
Cash provided by Investments	266,054	93,442	(607,005)	2,790,815	(918,207)	(735,816)	1,589,481	-	-	-	-	-	2,478,764
Financing Activities:													
Repayment of Long-Term Debt	-	(9,106)	(119,866)	(10,406)	(9,928)	(10,466)	(9,995)						(169,767)
Payment of Interest - LT Debt	(163,745)	16,464	17,224	17,763	17,286	17,824	17,353						(59,831)
Capital Grants													-
Cash provided by Financing	(163,745)	7,358	(102,642)	7,357	7,358	7,358	7,358	-	-	-	-	-	(229,598)
INCREASE (DECREASE) IN CASH & CASH Equivalents	994,228	51,398	328,020	667,586	(2,313,733)	289,448	(260,993)	-	-	-	-	-	(244,046)
CASH BEGINNING OF PERIOD	10,473,199	11,467,427	11,518,825	11,846,845	12,514,430	10,200,697	10,490,145						10,473,198
CASH END OF PERIOD	\$ 11,467,427	\$ 11,518,825	\$ 11,846,845	\$ 12,514,431	\$ 10,200,697	\$ 10,490,145	\$ 10,229,152	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10,229,152
CHANGE & BALANCE OF CASH													
Operating Cash	992,779	48,873	329,193	658,351	(2,301,529)	290,457	290,457						7,258,637
Non-Current Cash	1,450	2,525	(1,173)	9,234	(12,204)	(1,009)	(1,009)						2,970,515
Investments													
TOTAL CHANGE & BALANCE OF CASH	\$ 994,229	\$ 51,398	\$ 328,020	\$ 667,585	\$ (2,313,733)	\$ 289,448	\$ 289,448	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10,229,152

Accounts Receivable Aging 2019-rolling



QUALITY MANAGEMENT COMMITTEE MEETING MINUTES

River's Edge Hospital & Clinic, St. Peter, Minnesota
Wednesday, August 21, 2019

The Quality Management Committee meeting was held on Wednesday, August 21, 2019, at 8:30 a.m. in the Helen G. White Conference Room.

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

Absent: Lori Zook, Dr. Bogonko, and Paulette Redman.

AGENDA ITEM	DISCUSSION	ANALYSIS / CONCLUSIONS / ACTION	FOLLOW-UP / RESPONSIBLE PARTY
1. Review of Minutes.	The minutes of the July 17, 2019, meeting was distributed electronically prior to the meeting for review.	A motion was made by Maryann Harty to approve the minutes as presented. The motion was seconded by John Lammert and carried with all voting in favor.	
2. Quality Department			
	Audits, Internal Audits, Tracers. <ul style="list-style-type: none"> None to report at this time. DNV Survey. <ul style="list-style-type: none"> Final approval documents for the Orthopedic Center of Excellence award will be submitted this week. Baldrige <ul style="list-style-type: none"> Received Baldrige Feedback Report – reapply in 2020. 		Janelle Rauchman
3. Departmental Goal Reports and Quality / Patient Safety Core Functions Reports			
a. Marketing.	Stephanie Holden reported. Measurement for Marketing Plan. <ul style="list-style-type: none"> Social Media. Facebook page - number of “likes” currently at 1,633, up from 1,606 likes in May. There was one boosted Facebook post in July regarding open positions at River’s Edge that reached 28,123 people, 2,425 people clicked on the post, and 1,265 clicked on the link to the website. Website. Noted an increase in website sessions at 13,059, up from 11,706 in May, with the Urgent Care page having most page views. The second highest page views is for Services; followed by Contact and Ortho Edge. 		Stephanie Holden

Quality Management Meeting Minutes

August 21, 2019 Page 2

	<ul style="list-style-type: none"> 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%. <p>Patient Satisfaction:</p> <ul style="list-style-type: none"> Inpatient: Top Box score for overall patient satisfaction with inpatient services shows a score of 88.2% in the 2nd Quarter of 2019. Emergency Department: Top Box score for Likelihood to Recommend – score of 76% in the 2nd Quarter of 2019. Urgent Care: Top Box scores for Likelihood to Recommend – 2nd Quarter 2019 score of 73.4%. Outpatient Surgery: Top Box scores for Rate the Facility 0-10 – 2nd Quarter 2019 was 85.4%. <p>Community Outreach Events from Q2 2019 include:</p> <ul style="list-style-type: none"> May 18 – Bike Rodeo May 20 – OrthoEdge presentation with Dr. Swanson June 1 – Patient Wing Open House June 29 – Highway Clean-up Day July 4 – St. Peter 4th of July July 27 – Grillin' for Good July – AED Donation to American Legion August 5 – St. Peter Night to Unite and Summer Celebration August 6 – OrthoEdge presentation with Dr. Botker <p>Upcoming Events</p> <ul style="list-style-type: none"> August 21 – Community Appreciation Picnic August 22 – St. Peter Resource Fair August 27 – Women's Pelvic Health with Kaylen Margotta PT, DPT 	<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>	Stephanie Holden
b. Business Services / Finance.	<p>Sheri Schmidt reported.</p> <p>OTI's, CAPs, PAPs</p> <ul style="list-style-type: none"> Nothing to report at this time. 		Sheri Schmidt.

Quality Management Meeting Minutes

August 21, 2019 Page 3

	<p>Department Goals / Benchmarks.</p> <p>a) Monitor / measure denials. The denial amount for April was \$48,749.00, May at \$158,619.00, and June was \$62,736.00. 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. April was at 43 days, May was at 43 days, and June was at 39 days. Best indicators nationally are in the 40-day range.</p> <p>Price Estimator 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>OTI, CAPs, PAPs There is was an OTI for registration surrounding the entering of an incorrect birthdate. This has now been completed.</p> <p>Patient Satisfaction – Press Ganey Survey Data. --Emergency Department: Looking at Top Box Trends. Courtesy of Registration Staff - ER = Goal is 80%.</p> <ul style="list-style-type: none"> • April – 78% • May – 79.7% • June – 80.3% <p>--Inpatient: Top Box trends for Courtesy of Registration Staff. Goal is 88%.</p> <ul style="list-style-type: none"> • April – 83.6% • May – 84.7% • June – 84.7% 		Sheri Schmidt
d. Health Information Management	To be reported in September.		
e. Medical Staff Liaison / Credentialing.	<p>Terri Winter reported.</p> <p>1) Opportunities to Improve, Corrective Action Plans, Preventive Action Plans, and Contracted Services.</p> <ul style="list-style-type: none"> • All up to date. Nothing to report at this time. <p>2) Equipment/Process Improvement.</p> <ul style="list-style-type: none"> • Credentialing software. <ul style="list-style-type: none"> ○ Demonstration of product/software 		

Quality Management Meeting Minutes

August 21, 2019 Page 4

	<ul style="list-style-type: none"> ○ Software program modules ○ Estimate of costs ○ Submission of Request – October 1st ○ Budget Approval <p>3) Credentialing Process.</p> <ul style="list-style-type: none"> • Appointment and reappointment checklists are completed with each new and renewed medical staff application. Currently all complete and up to date. <p>4) Departmental Goals / Benchmarks.</p> <p>a) Provider On-Boarding</p> <p>--DNV requires members of the medical staff as well as contracted services staff to receive an orientation developed and approved by the organization that includes general safety practices, emergency procedures, infection control, confidentiality and other issues as required by our organization. Effective March 12, 2018, book entitled "Orientation Information for New Providers & Annual Provider Education" was placed on all units (ED/UC, Med/Surg, and Surgery). New providers will review on hire and it is expected that all providers and/or contracted staff will review this annually to meet our DNV requirements.</p> <p>A total of 118 providers and staff are required to complete the orientation and education training. Our goal is to be at 100% completion.</p> <ul style="list-style-type: none"> • Attestation 2018 (initial) – 3/118 not complete (97.46% completion rate) • EMTALA Attestation – 4/118 not complete (96.61% completion rate) • New Provider Attestation – 23/23 (100% completion rate) <p>(b)New goal – Review/Revise Medical Staff Quality Profiles</p> <p>Streamline a process, particularly specifics pertaining to each individual provider.</p>		
f. IT / IS.	<p>Kevin Schaefer reported.</p> <p>1) Opportunities to Improve, Corrective Action Plans, Preventive Action Plans, and Contracted Services.</p> <ul style="list-style-type: none"> • All up to date. Nothing to report at this time. 		Kevin Schaefer

Quality Management Meeting Minutes

August 21, 2019 Page 5

	<p>2) Equipment/Process Improvement.</p> <ul style="list-style-type: none"> • Cisco Catalyst 9400 Switch <p>Departmental Goals/Benchmarks</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 62% rating of “Usually” with 38% “Always”. The goal was set at 70% based on the former survey process, so current results were below goal.</p> <p>b) Respond to Urgent and High Priority Tickets Within 30 Minutes, Goal to maintain 85% or higher:</p> <p>April, 2019– 18 tickets – 83% May, 2019 – 13 tickets – 92% June, 2019 – 20 tickets – 80% July, 2019 – 25 tickets – 88%</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 June 30, 2019. File Server – 0.04% downtime. E-mail Server – 0.04% downtime. Excellian – 0.18% 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 2nd quarter with 40 instances found, instances of viruses and spyware also decreased to 301.</p> <p>e) Password Strength. Another new program looks at password strength throughout the facility. Of 666 passwords, 662 were deemed to be strong, 4 were noted as weak.</p>	<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>	
--	--	---	--

Quality Management Meeting Minutes

August 21, 2019 Page 6

	<p>HIPAA Help Center Risk Assessment.</p> <ul style="list-style-type: none"> HIPAA Help Center Risk Assessment – Security Risk Score is at 62% Completion. 		
g. Human Resources	<p>Jackie Kimmet reported.</p> <p>OTI's, CAPs, PAPs</p> <ul style="list-style-type: none"> None to report at this time. <p>Equipment/Process Improvement.</p> <ul style="list-style-type: none"> Transferring over completely to the ICIMS employment application tracking program. <p>NIAHO.</p> <p>a) SM.3 Staff Evaluations: Completion rate at 88% for May, 80% for June, and 100% for July. Four evaluations came back with a score of 2 or lower in Q1. Manager included action plan of correction with evaluation.</p> <p>Hip and Knee Certification Survey Changes – Nonconformities.</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>d) DNV made changes to the job description/performance review requirements. Goal: to have updated by the end of September.</p> <p>Department Goal(s)/Core Function Reports</p> <p>a) Relias Course Compliance.</p> <ul style="list-style-type: none"> 100% complete November 2018. Next courses due November 1, 2019. <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"> January – 3 	<p>Leadership training in July.</p> <p>Per DNV, start reporting out the good and poor evaluations in each department, along with action plans.</p>	Jackie Kimmet

Quality Management Meeting Minutes

August 21, 2019 Page 7

	<ul style="list-style-type: none"> ○ February – 3 ○ March – 2 ○ April – 4 ○ May – 3 ○ June – 3 ○ July - 3 <p>c) Customer Satisfaction.</p> <ul style="list-style-type: none"> • Goal to complete exit interviews on 70% of exiting staff. <ul style="list-style-type: none"> ○ 2019 Goal – average of 70% <ul style="list-style-type: none"> --January, 2019 – 1/3 - 33% --February, 2019 – 2/3 - 67% --March, 2019 – 2/2 - 100% --April, 2019 – 2/4 – 50% --May, 2019 – 4/4 100% --June, 2019 – 3/3 100% --July, 2019 – 3/3 100% <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"> • June participation – 84% 		
h. Materials Management	<p>Reported by Mark Ehlers</p> <p>OTI's, CAPs, PAPs and Contracted Services</p> <ul style="list-style-type: none"> • None to report. Contracted services are up to date. <p>Purchasing Process</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"> • Laboratory – 85%; Actual 68.5% - goal not met; • Med/Surg – 85%; Actual 74.2% - goal not met; • Office Supplies – 100.0%; Actual 100.0% - goal met; • Pharmacy – 98.5%; Actual 100.0% - goal met. 		Mark Ehlers

Quality Management Meeting Minutes

August 21, 2019 Page 8

	Department Goals/Benchmarks a) Inventory Days Stock On Hand <ul style="list-style-type: none">QHR benchmark for hospitals our size is 47 days.<ul style="list-style-type: none">As of July 31, 2019, we were at 23.66 days. b) Quality. Goal: Write off <= \$7,000 due to expired products for 2019. <ul style="list-style-type: none">2019 YTD total is \$754.51.		
6. Quality Recognitions.	Business Services/Finance. <ul style="list-style-type: none">Sheri's team for keeping the AR days low.		Janelle Rauchman
7. Adjournment.	The next Quality Management Committee meeting will be held on Wednesday, September 18, 2019, at 8:30 a.m.	Meeting adjourned by general consensus at 9:25 a.m.	

Janelle Rauchman, RN, CIC, Chair

Building Committee Minutes

August 22, 2019

<i>Present:</i>	<input checked="" type="checkbox"/>	Margie Nelsen Hospital Commission	<input type="checkbox"/>	George Rohrich CEO	<input checked="" type="checkbox"/>	John Albert AHFD
	<input checked="" type="checkbox"/>	MaryAnn Harty Hospital Commission	<input 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"/>	Janelle Rauchman CQO	<input type="checkbox"/>	

CALL TO ORDER

The Building Committee meeting was called to order at 11:01 a.m. by Margie Nelsen.

APPROVAL OF AGENDA

The August 22, 2019 Building Committee Agenda was reviewed.

ACTION: A motion was made by Chuck Zieman to approve the August 22, 2019 Building Committee Agenda. The motion was seconded by Jerry Pfeifer and carried with all members voting in favor.

PROJECT UPDATES

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

Work Completed Last Month:

- Emergency Department painting.
- New patient hallway opened.
- Roofing complete, except canopy.
- Interior framing in 6B, 6E, 6F, 6G (central sterile, OR4, Decontamination, PACU).

Upcoming Work:

- Flooring at the Emergency Department.
- Underground plumbing in the kitchen/pharmacy area.
- Framing at the kitchen/pharmacy area.
- Drywall in OR4/Decontamination.
- Drywall in PACU.

Key Milestone Dates:

- PACU Complete – October 2019
- Emergency Department Complete – November 2019
- Central Sterile – November 2019
- Kitchen/Pharmacy – January 2020

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:

- 140. Add structure steel to support expansion jt at existing building.
- 177. Change sprinkler pope label type.
- 178. Relocate switches and provide tamper-proof outlets.
- 179. Electrical roughin for kitchen hood to accept Marvel system.
- 180. Delete two crabapple and two Honeylocust trees.
- 181. Add power for patient lift in E17 trauma.
- 182. Front entry canopy modification for roof drain slope.
- 183. CM Reserve
- 184. Temporary wiring of panel EHP2 from HP2 for Patient wings.
- 186. Temporary and permanent connection of existing structure at Courtyard.
- 187. Increase thickness of north wall of Toilet E32 for RWL.
- 188. Change two outlets to GFI for sterilizers.
- 191. Modify helipad lighting control at ED Nurse station.

ACTION: A motion was made by Chuck Zieman to recommend approval of change orders 140, 177, 178, 179, 180, 181, 182, 183, 184, 186, 187, 188, and 188 for the amount of \$56,696 to the Hospital Commission. The motion was seconded by MaryAnn Harty and carried with all members voting in favor.

ADJOURNMENT

ACTION: The meeting was adjourned by mutual consent at 11:34 a.m.

NEXT MEETING

The next Building Committee meeting will be held on Thursday, September 19, 2019, at 11:00 p.m. in the Helen White Conference Room 1.

Chairperson

The image is a composite graphic. The top left section is a green banner with the text "RIVER'S EDGE" in large, dark purple serif font, and "HOSPITAL - ST. PETER" in a smaller, dark purple serif font below it. A stylized blue and white wave graphic is positioned below the text. To the right of the banner is a photograph of the River's Edge Hospital building, a modern structure with stone and concrete walls, a large overhanging entrance, and a tall, thin tower. The sky is blue with white clouds. At the bottom right is a large, stylized blue and green "Q" logo for Quorum Health Resources, with the text "QUORUM | HEALTH RESOURCES™" and the tagline "Creating a Sustainable Future for Healthcare Organizations" below it.

[illegible]

AGENDA	
Factors Resulting in Market Consolidation	
Disciplined Approach & Options	
Discussion & Questions	

[illegible]

**Factors Resulting in
Market Consolidation**

Proprietary & Confidential

River's Edge Hospital & Clinic

[illegible]



FACTORS CONTRIBUTING TO COMMUNITY HOSPITAL STRUGGLES

1. Challenging **demographic, social, and economic pressures** of rural and small community areas
2. Higher percentage of **privately insured patients seeking care elsewhere**, hurting the local hospital's revenue base
3. Ongoing **competition** from hospitals in neighboring communities for limited patients, federal dollars, and health care resources
4. Changes in **Medicare and Medicaid** payment over the past few years having an adverse effect on rural hospitals—plus lack of Medicaid expansion
5. Difficulty in adapting to **new models of payment and service delivery** that emphasize preventive and primary care provided in outpatient settings
6. Large Systems – being more **predatory** to increase their market share & referrals

Source: A Look at Rural Hospital Closures and Implications for Access to Care, Kaiser Commission on Medicaid and the Uninsured, July 2018
Proprietary & Confidential River's Edge Hospital & Clinic





STRUGGLES RESULT IN MARKET CONSOLIDATION

- Rationale can be summarized in organizations needing support:
 - In bearing the financial risk in emerging value-based payment systems,
 - Cost of infrastructure - clinical standardization, quality, etc.,
 - To attract, retain and support hospital - employed physicians, and other medical professionals,
 - To invest in:
 - Innovative technological equipment,
 - Replace existing equipment, and
 - Upgrades to the aging plant
 - To retain healthcare in the community for the longer-term, and
 - Need to Enhance Market Reputation - Name Brand that results with affiliation with a Large Healthcare System

Proprietary & Confidential

River's Edge Hospital & Clinic

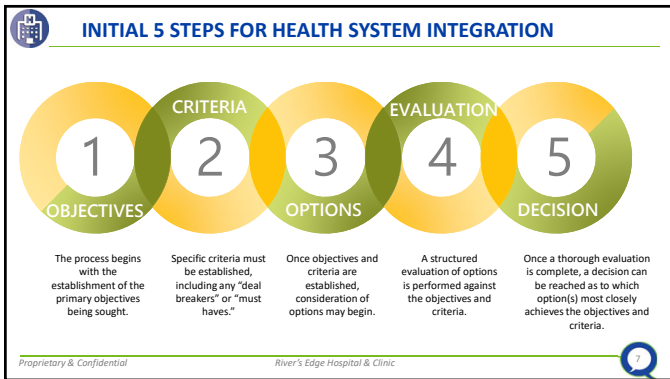


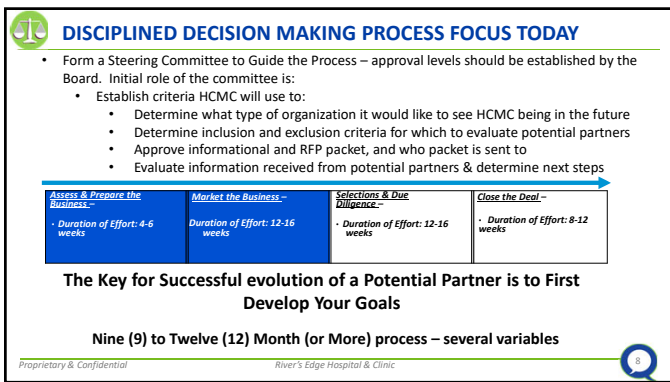
**Disciplined
Approach & Options**

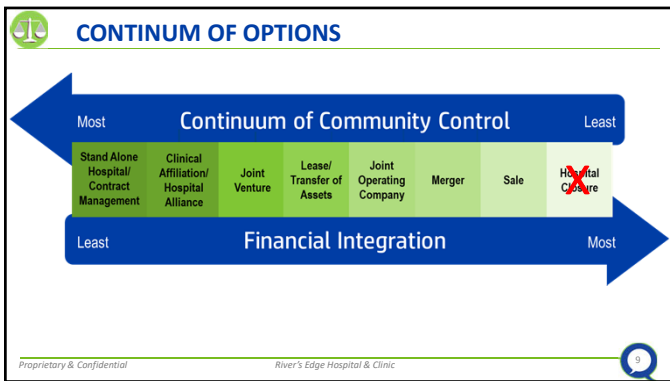
Proprietary & Confidential

River's Edge Hospital & Clinic











Discussion
& Questions

Proprietary & Confidential

River's Edge Hospital & Clinic



THANK YOU

Creating a Sustainable Future for Healthcare Organizations



QUORUM | HEALTH RESOURCES®

APPLICANTS FOR MEDICAL STAFF MEMBERSHIP AND CLINICAL PRIVILEGES

River's Edge Hospital & Clinic

August 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
√				A	Peter J. Boosalis, MD	Anesthesiology	AMS	√	√	√	√	√	√	√	√	√	√	√	√
√				C	Angela L. Reu, PA-C	Urgent Care	Premier Staffing	√	NA	√	√	√	√	√	√	√	√	√	√
√				C	Mingzhu Xu, MD	IM/Hospitalist	Fusion Healthcare	√	√	√	√	√	√	√	√	√	√	√	√
		√		C	Alan P. Johnson, PA-C	Emergency Medicine	Premier Staffing	√	NA	√	√	√	√	√	√	√	√	√	NA
		√		C	William D Paige-Evans, MA, LP	Psychology	Behavioral Health Services	√	NA	√	√	√	√	√	√	√	√	√	NA
		√		C	Amin M. Yousuf, PA-C	Emergency Medicine	Premier Staffing	√	NA	√	√	√	√	√	√	√	√	√	NA
	√			C	Gilda Boroumand, MD	Teleradiology	CRL	√	√	√	√	√	√	√	√	√	√	√	NA
	√			C	Willis C. Chung, MD	Teleradiology	CRL	√	√	√	√	√	√	√	√	√	√	√	NA
	√			C	Samuel J. Hauck, MD	Teleradiology	CRL	√	√	√	√	√	√	√	√	√	√	√	NA
	√			C	Jillian A. Karow, MD	Teleradiology	CRL	√	√	√	√	√	√	√	√	√	√	√	NA

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

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	Benchmark/ Goal	Trend	Comments/Analysis
Readmissions	1.93%	2.10%	2.00%	1.80%	1.80%	1.70%	1.50%	1.60%	2.7%		Internal Benchmark
Falls Risk	1.9	1.8	1.8	1.5	1.2	1.8	1.8	2	<3.5		State Average
SSI	0.23%	0.21%	0.22%	0.16%	0.16%	0.17%	0.17%	0.22%	2.0%		Internal Benchmark
CAUTI	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.73%		State Average
Surgical Complications	0.16%	0.16%	0.16%	0.16%	0.22%	0.17%	0.17%	0.22%	2.7%		Internal Benchmark
ED Transfer Communication	75%	80%	79%	21%	67%	69%	90%	94%	>70		Internal Benchmark
HAI	0.00%	0.00%	0.00%	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	N/A	N/A	N/A	95.0%		Internal Benchmark
Pressure Ulcer Rate	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.47%		State Average

River's Edge Hospital & Clinic
Executive Summary
George Rohrich, CEO
August 21, 2019

Comments about July & Looking Forward:

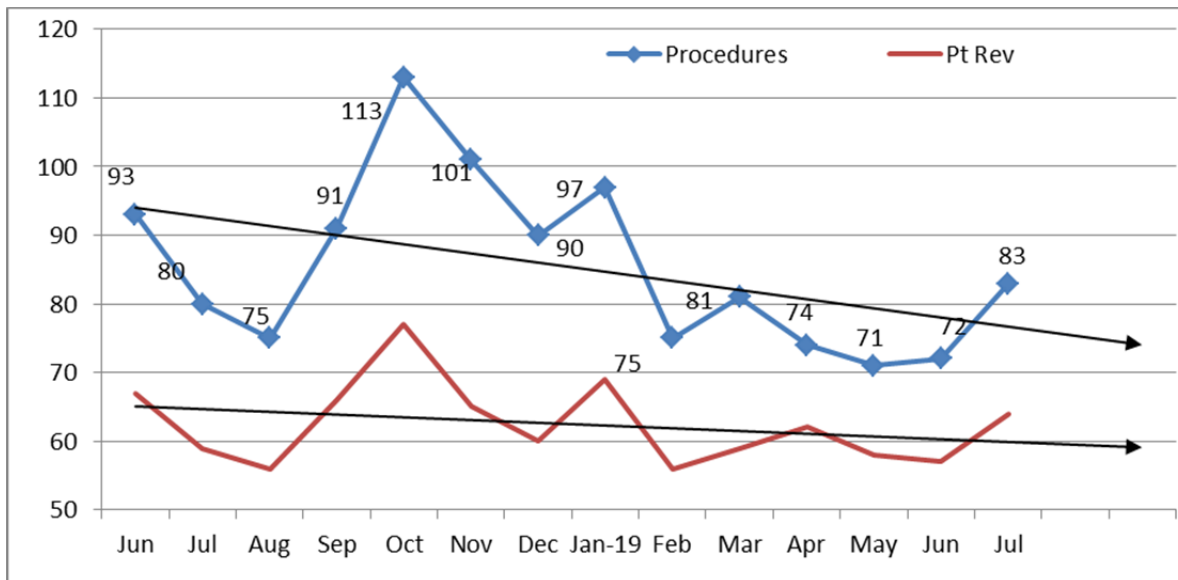
Operations: July has a positive bottom line

- Net Operating Income MTD was \$286,000 vs MTD budget of \$(832,000).
- Net Operating Income YTD was \$943,000 vs YTD budget of \$81,000.
- Looking Forward: August is trending near budget.

Cash: Cash decreased

- MTD Cash decreased by \$261,000 resulting in balance of \$10,229,000.
- YTD Cash has decreased \$244,000.
- Our 2019 Year End Cash budget goal is \$10.4M.

Statistics: Inpatient Surgery procedures were above budget













































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

Significant Decisions this Month:

- Lab Freezer \$10,325 Emergency Replacement
- Bladder Scanner \$41,630
- Beds \$78,739

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	May	June	July	YTD Trend
Lab																	
Lab Procedures Inpatient	334	423	317	657	754	800	865		874	1014	883	743	978	826	761	1047	
Lab Procedures Outpatient	2898	2992	2241	3144	2470	2717	2903		2951	3057	2440	2956	2747	2831	2435	2440	
Radiology Procedures																	
Radiology Procedures Inpatient	16	24	26	73	114	106	106		99	131	98	100	101	95	94	114	
Radiology Procedures Outpatient	456	368	337	330	285	296	268		259	262	228	267	273	269	254	217	
CT Procedures Outpatient	83	92	105	147	130	156	151		158	132	143	163	192	161	133	157	
Ultrasound Procedures Outpatient	33	31	28	35	35	35	33		35	29	14	26	33	28	31	36	
ED & UC																	
Urgent Care	166	127	154	200	343	397	360		369	353	308	332	288	282	247	262	
Emergency Department	336	330	367	388	367	343	352		392	285	256	349	322	351	311	341	
Surgery																	
Surgical Procedures Inpatient	1	5	10	46	73	81	85		81	97	75	81	74	71	72	83	
Surgical Procedures Outpatient	54	55	46	53	61	59	66		67	56	58	50	60	61	54	62	
Physical Therapy																	
PT Modalities Inpatient	270	306	353	627	857	862	843		970	990	759	826	751	701	765	944	
PT Modalities Outpatient	1108	1113	1056	1030	983	1129	1286		1310	1290	1060	1178	1356	1378	1101	1388	
Admissions																	
Admissions from ED + UC	24	24	26	23	20	8	9		na	13	6	6	12	9	8	10	
Transferred to Acute Hospital	na	na	na	na	29	31	33		na	36	31	36	44	30	35	35	
Admissions Medical	20	27	31	16	12	10	13		na	14	10	7	16	12	11	12	
Admissions Surgical	0	0	0	37	63	71	73		na	82	67	71	66	66	62	71	
Med Surg Patient Days	52	78	88	143	206	221	236		270	270	219	208	239	218	203	262	
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	7.03	6.55	8.45	
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	0.13	0.90	1.03	
Total ADC																	
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	7.16	7.45	9.48	
Adjusted Patient Days																	
Adjusted Patient Days					341	358	366		400	401	341	330	391	359	315	402	

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

	REHC Strategic Plan											
	2019 Dashboard											
		2016	2017	2018	2019							
	GROWTH - George	Actual	Actual	Actual	Goal	Jan	Feb	Mar	Apr	May	Jun	Jul
G1	Increase Total Adjusted Patient Days (APDs) => 400	341	358	336	400	401	341	330	391	359	315	402
		2016	2017	2018	2019							
	SERVICE - Paula & Stephanie	Actual	Actual	Actual	Goal	Jan	Feb	Mar	Apr	May	Jun	Jul
S1	HCAHPs Summary "Rate hospital 0 - 10" maintain 90th percentile or higher	86.8	88%	93%	90%	93%	94%	94%	94%	94%	94%	92%
S2	Emergency Department Survey "Likelihood of recommending this ED" Top Box score ≥ 85%	71.4	80%	80%	85%	79%	79%	78%	77%	78%	77%	78%
S3	Urgent Care Survey "Likelihood of Recommending this Urgent Care" Top Box score ≥ 77%	72.2	72%	71%	75%	72%	72%	72%	73%	71%	72%	74%
S4	Outpatient Surgery "Rate the Facility" ≥ 87%			83%	87%	83%	85%	84%	82%	82%	83%	84%
		2016	2017	2018	2019							
	QUALITY - Janelle	Actual	Actual	Actual	Goal	Jan	Feb	Mar	Apr	May	Jun	Jul
Q1	Falls Achieve ≤ 3.5 per 1000 patient days	na		1.9	3.5	1.8	1.8	1.5	1.2	1.5	1.8	2.0
Q2	Transfer Measures Benchmark ≥ 70%	na	57%	76%	65%	80%	80%	21%	67.3%	69%	90.0%	94%
		2016	2017	2018	2019							
	PEOPLE - Jackie	Actual	Actual	Actual	Goal	Jan	Feb	Mar	Apr	May	Jun	Jul
P1	Employee Satisfaction Survey Participation Rate > 85%	90%	84%	82%	85%						84%	
P2	Reduce Overall Turnover rate to ≤ 18%	28%	15%	19%	18%	1%	3%	4%	8%	9%	10%	12%
P3	Gallup Q12 Survey Grandmean Score ≤ 4.36		97%	4.29	4.36						4.26	
		2016	2017	2018	2019							
	FINANCE - Lori	Actual	Actual	Actual	Goal	Jan	Feb	Mar	Apr	May	Jun	Jul
F1	Days Cash All Sources ≥ 112 days	123	125	107	112	106	110	126	126	117	117	109
F2	Operating Margin ≥ 4%	13%	8%	8%	4%	14%	6.2%	9%	7%	-7%	-3%	8.80%
F3	Net AR Days ≤ 50 days	49	45	48	50	44	43	42	43	43	39	43
		2016	2017	2018	2019							
	COMMUNITY - Stephanie	Actual	Actual	Actual	Goal	Jan	Feb	Mar	Apr	May	Jun	July
C1	Community Education Events = 12 annually	na	13	14	12	0	2	1	0	3	1	2
	GOVERNANCE					Jan	Feb	Mar	Apr	May	Jun	Jul
G1	Commissioner attending education event					4	3	2	3	2	2	2
G2	Commission participating in hospital event						2			9		3
G3	Complete annual evaluation											
										3 Penworks Webinar		
										3 MHA Awards		2 MHA Conf
										3 Hosp Week		

July 2019 Financial Report

Statement of Revenues and Expenses

SUMMARY OF MONTH AND YTD

	Jul-19	Budget	Variance	%
Gross Patient Revenue	\$ 6,496,457	\$ 5,678,253	\$ 818,204	14.4%
Net Patient Revenue	\$ 3,247,320	\$ 2,313,037	\$ 934,283	40.4%
Operating Expenses	\$ 2,976,555	\$ 3,157,270	\$ (180,715)	-5.7%
Net Operating Income	\$ 286,230	\$ (832,451)	\$ 1,118,681	8.8%

YTD 2019	Budget	Variance	%
\$ 42,720,956	\$ 45,406,980	\$ (2,686,024)	-5.9%
\$ 22,357,258	\$ 21,850,468	\$ 506,790	2.3%
\$ 21,561,653	\$ 21,814,426	\$ (252,773)	-1.2%
\$ 942,782	\$ 81,332	\$ 861,450	4.2%

Balance Sheet

Net Patient Receivables	Increased	\$ 435,491
Accounts Payable	Increased	\$ 35,519

	Jul-19	Jun-19	Difference
Cash (all sources)	\$ 10,229,152	\$ 10,490,145	\$ (260,993)
Accounts Receivable	\$ 4,661,543	\$ 4,226,052	\$ 435,491
Accounts Payable	\$ 2,305,776	\$ 2,270,257	\$ 35,519
Check Run	\$ 1,990,810	\$ 1,832,166	\$ 158,643

	Covenants	Jul-19	Jun-19
Days in Cash	>60	109.27	97.63
Days in AR		43.02	39.19
Debt Coverage	>1.25	5.80	3.10

Community Care and Collections

		Accounts
Community Care	\$ 13,381.46	18
Presumptive Care	\$ 60,843.83	16
Total	\$ 74,225.29	34
Collection Activity for Board Approval	\$ 128,938.43	
Bad Debt Recovery	\$ 13,430.78	
Revenue Recapture	\$ 3,045.86	

River's Edge Hospital

Critical Access Hospitals

Top Key Financial Indicators

INDICATOR	Formula	Desired Trend	NRH MEDIAN	Jan	Feb	Mar	Apr	May	Jun	Jul	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	116.57	97.63	109.27	
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	43.17	39.19	43.02	
Days in Gross AR	Gross Patient AR(Excludes Settlements) / Gross Patient Service Revenue / 365	↓	46	38.14	40.85	42.13	40.99	38.58	39.16	40.94	
Days in AP	Accounts Payable/Daily Operating Expense	↓	30-45	19.85	18.47	17.08	19.75	26.99	20.66	24.01	
Total Margin	(Excess of Revenue Over Expenses / Total Revenue)*100	↑	2.51%	13.12%	-6.98%	7.72%	5.14%	-8.93%	-4.73%	12.05%	
Operating Margin	(income from Operations / Total Revenue) * 100	↑	0.99%	14.33%	-5.25%	9.19%	7.08%	-7.12%	-3.20%	8.77%	
Debt Service Coverage	Excess of Revenue Over Expenses + Depreciation + Interest Expense / Principle Payments + Interest Expense	↑	2.73X	3.80	4.40	3.80	3.9	3.8	3.1	5.8	
Long Term Debt to Capitalization	Long Term Debt / (Long Term Debt + Assets) *100	↓	17.02%	38.12%	38.25%	38.83%	40.57%	41.12%	40.74%	42.21%	
Average Age of Plant	Accumulated Depreciation / Depreciation Expense	↓	9.77 yrs	11.96	12.03	12.11	11.69	11.77	11.85	11.93	
Salaries to Net Patient Revenue	Salary Expense / Net Patient Revenue *100	↓	45.57%	20.56%	26.86%	25.13%	23.84%	31.20%	25.66%	25.11%	

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	133,473.55	May	66,819.95	77,158.28	May	14,116.15	13,711.13	May	26,794.34	24,116.96
Jun	47,761.90	112,820.78	Jun	109,721.03	103,721.10	Jun	4,210.26	5,601.10	Jun	12,898.01	7,854.76
Jul	60,840.98	74,225.29	Jul	109,620.10	128,938.43	Jul	4,186.70	3,045.86	Jul	14,607.91	13,430.78
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>\$625,834.50</u>		<u>\$ 1,097,293.81</u>	<u>\$ 620,203.97</u>		<u>\$196,664.17</u>	<u>\$144,457.20</u>		<u>\$317,946.97</u>	<u>\$195,779.73</u>

Community Care and Collections

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

1. Community care grants for the month	<u>Total</u>	<u>100% write off</u>	<u>50% write-off</u>	<u>Not eligible</u>
- number of patient accounts	\$ 13,381.46	13,381.46	-	
		18		0
		0 previous in bad debt status		
Presumptive community care grants	<u>Total</u>	<u>Patients</u>	<u>Accounts</u>	<u>Uninsured</u>
	\$ 60,843.83		16	-
2. Collection activity for Board Approval is:	<u>Total</u>	<u>Insured</u>	<u>Uninsured</u>	\$ - HMS
- number of patient accounts	\$ 128,938.43	-	-	128,938.43 Excellian
	-	-	-	128,938.43
3. Revenue recapture for the month	<u>\$ 3,045.86</u>			

Community and Presumptive Care Grants - YTD

2019	\$ 625,835
2018	\$ 573,648
2017	\$ 532,153
2016	\$ 351,783
2015	\$ 86,713
2014	\$ 152,079
2013	\$ 239,465

Revenue Recapture experience

2019	\$ 144,457
2018	\$ 196,664
2017	\$ 233,972
2016	\$ 196,887
2015	\$ 199,340
2014	\$ 193,899
2013	\$ 178,823

Collections YTD Activity

2019	\$ 620,204
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	\$ 195,780
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.)

River's Edge Hospital and Clinic
July 2019

Top 5 Vendors Paid

	<u>Vendor</u>	<u>Amount</u>	<u>Description</u>
2 Checks	ORTHOPAEDIC & FRACTURE CLI Total	213,584.65	Professional Services Agreement
5 Checks	DEPUY SYNTHES SALES INC Total	173,438.77	ED/UC Providers
5 Checks	ZIMMER US INC Total	155,342.40	Implantables
5 Checks	CARDINAL HEALTH 110, LLC Total	144,357.88	Implantables
1 Check	ALLINA HEALTH SYSTEM Total	137,885.62	Implantables

Top 5 Checks Paid

<u>Check</u>	<u>Vendor</u>	<u>Amount</u>	<u>Description</u>
71800	ORTHOPAEDIC & FRACTURE CLI	207,084.65	Professional Services Agreement
71816	ALLINA HEALTH SYSTEM	137,885.62	ED/UC Providers, Training, Support
71700	EXACTECH, INC,	80,653.00	Implantables
71863	PREMIER STAFFING INC	73,217.00	ED/UC Providers
71728	ZIMMER US INC	68,256.00	Implantables

Total Check Register \$ 1,990,809.55

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 - HIMMS	9,056.22
Zero Turn Lawnmower	7,200.00
Cisco 9400 Switch	64,532.04
Alternate RRP-4 Snow Melt Mech Equip	70,520.00
10 Stryker S3 Beds with Mattresses	78,739.50
EchoNous signostic bladder Scanner with 2 Probes	41,630.00

Requests through 8/31/2019	\$ 375,133.46
----------------------------	---------------

Remaining Balance	<u><u>\$ 374,866.54</u></u>
-------------------	-----------------------------



To: River's Edge Commission

Date: 8/21/2019

From: Lori Zook, CFO

RE: Stryker S3 beds with ComfortGel Mattress

Action/Recommendation

The Hospital recommends purchasing 10 Stryker S3 beds with ComfortGel Mattresses to match the 7 beds purchased for the new rooms added in construction.

Background

River's Edge did not elect to replace all of the existing beds with the construction project, choosing to stagger the purchase dates and/or purchase from capital dollars. At this time, it would be prudent to replace 10 of the old beds. The old beds are 14 years old and are starting to have significant repair histories. They also do not have all of the same features that the new beds have, such as in-bed scales and some of the monitoring functions. Other beds were not considered because it would be most functional to have them all match.

Fiscal Impact

Vendor	Price
Stryker	\$78,739.50

Community Impact

This helps provide safe patient care.

Alternatives/Variations

Do Not Act: We will be short beds and unable to fill the additional room capacity.

Negative Vote: Same as not acting.

Modification: This is always an option of the Commission.



To: River's Edge Commission

Date: 8/21/2019

From: Lori Zook, CFO

RE: EchoNous Signostic Bladder Scanner with Ultrasound Probes for IV Start

Action/Recommendation

The Hospital recommends purchasing 1 EchoNous Signostic Bladder Scanner with 2 ultrasound probes for IV starts.

Background

In 2018, River's Edge purchased an EchoNous Signostic Bladder Scanner. A bladder scanner is used to care for patients on Med/Surg and helps prevent infections. Because the hospital now has two patient wings, a second bladder scanner is requested. In addition, two probes for finding veins for IV starts are requested – one for the new scanner and one for the existing scanner. Other models were not considered because this process was completed just last year and we wish the probes to be interchangeable.

Fiscal Impact

Vendor	Price
EchoNous Bladder Scanner	\$21,730
EchoNous Ultrasound Probe	\$ 9,950 x 2
	Total: \$41,630

Community Impact

This helps provide safe patient care.

Alternatives/Variations

Do Not Act: We will provide substandard care.

Negative Vote: Same as not acting.

Modification: This is always an option of the Commission.



To: REHC Hospital Commission

Date: 8/21/2019

From: George Rohrich, CEO

RE: Approve request to purchase Plasma Freezer from Cardinal Health, Chicago IL.

Action/Recommendation

Request approval of emergency purchase of Plasma Freezer for \$10,625.46.

Background

Our existing Plasma Freezer stopped functioning and needed immediate replacement. This freezer stores frozen blood products which are typically used for surgery or trauma. This is a critical piece of equipment and requires immediate replacement.

I authorized an emergency purchase of a replacement freezer for \$10,325.46. Lab requested the same manufacturer and series as our other laboratory refrigerators & freezers

Fiscal Impact

The fiscal impact is a total cost of \$10,325.46 for the equipment. These funds will be expenses to our capital budget.

Community Impact

This equipment allows River's Edge to continue to provide surgical and emergency services that require blood and frozen blood.

Rivers Edge Hospital Expansion and Renovation



Monthly Status Report #16 • 8-22-2019





TABLE OF CONTENTS

- EXECUTIVE SUMMARY
- CASH FLOW
 - » PAY APPLICATION REPORT
- SCHEDULE
- SAFETY

EXECUTIVE SUMMARY



Project Highlights:

Emergency Department ceiling grid is in progress

Glass at the new Dining/Waiting is in progress

Kitchen/ Pharmacy MEP rough-in is in progress



SCOPE



SCHEDULE



BUDGET



QA/QC



SAFETY



Lost Days

In Last 30

Days

2

PAY APPLICATIONS



Pay Application number #15 has been submitted through July 31st
Total billing for pay app #15 is \$948,296

Total billed to date is \$18,736,644 or 73%

CONSTRUCTION UPDATE

- **Work Completed Last month**
 - » Emergency Department painting
 - » New patient hallway opened
 - » Roofing complete, except canopy
 - » Interior framing in 6B, 6E, 6F, 6G (Central sterile, OR 4, Decontamination, PACU)
- **Upcoming Work**
 - » Flooring at the Emergency Department
 - » Underground Plumbing in the Kitchen/Pharmacy Area
 - » Framing at the Kitchen/Pharmacy Area
 - » Drywall in OR 4/Decontamination
 - » Drywall in PACU





■ KEY MILESTONE DATES:

- » PACU Complete – October 2019
- » Emergency Department Complete – November 2019
- » Central Sterile – November 2019
- » Kitchen/Pharmacy Complete – January 2020

SCHEDULE