

investigate 3 options included in attorney email. Passed unanimously. Motion by Ms. Evans/Second by Mr. Weisenbach that we pursue RHC analysis to be conducted by Tommy Barnhart, from Colorado Rural Health Association. Passed unanimously. Laboratory services (HRRMC will pay for courier & interfaces) & radiology are actively being researched so that HRRMC can be our reference lab & HRRMC can read films.

2) Clinical Operations Update:

- a. Panic buttons – Will get bids for front office and nurses’ station area.
- b. Clinic active shooter tabletop was completed 11/27, 6 clinic staff attended.
- c. Training for staff on 11/13, including emergency preparedness training. Top takeaway from Walter van Woudenburg led team building are:
 - a. PR Marketing Team ideas - need a plan.
 1. Expected to meet w/potential local PR/Mktg goals next week.
 2. Have communicated with Mary Makowsky, website developer whom Bob Tomlinson recommended. Current platform will not support upgrades. New platform will be WordPress. Total cost for CCMC website is \$1000.
 3. Clinic staff will be a clinic ambassador, & have local participation (parades, festivals, etc.)
 4. weekly columns in papers will continue with updates
 5. survey patients on care (already started)
 6. Mr. Tobin will be board member lead to this team
- d. Inventory update – McKesson is now up and running, should be in full use 1/1/19
- e. New Timeclock+ is up and running
- f. Western States Fire Protection Company repairs completed 11/28, from estimate 2016
- g. Storage unit now empty so savings each month is there
- h. RHC representative here 11/16/2018- worked on priorities, annual review, P&P and Emergency Management Plan. Also provided contacts for board education, bylaw review and funding information.
- i. Guns discussion regarding open carry & concealed carry gun policy for patients & staff. Result is Mr. Weisenbach will assist with obtaining information to develop policy w/Ms. Drew
- j. Board Education-Bill Charney from Charney Associates, his organization provides strategic consulting services in board governance and leadership (RHC recommended) – COPIC does not have this service, Ms. Drew will pursue
- k. HIPPA- all board members signed updated HIPPA agreements, as past documents were not located
- l. Bylaws- Ms. Drew requested all members review bylaws prior to next meeting and that board review bylaws at the next meeting as it appears they have not been reviewed in quite some time.

- m. Policy & Procedure Review – committee, same as below. We need to have this established in collaboration with annual evaluation review team. Meets 12/4/18
- n. Annual Evaluation Review –Committee- Dr. Riley, Charlotte Stark, FNP/Maria Duran-Shy, FNP, Ms. Drew, Mr. van Woudenberg, Ms. Kennedy, Ms. Evans Meets 12/4/2018

3) EMS Update

- a. Stairs completed
- b. AMR- has not provided subsidy request to us yet. They have provided hourly service proposal but not one lump sum proposal.
- c. 4 Drivers have been hired from EMT-B class, so providers are split up to work with drivers, we anticipate them being EMTs for CCEMS when they graduate.
- d. Discussion regarding if board member should have & monitor EMS radio. Ann states board needs to move away from being an operational board, to a governing board. Result is after EMT-B class is over no need for board member to have radio.

4) IT Update:

- a. Internet/Phone: CenturyLink/CTN – We continue to pursue fiber options. Discussion regarding CTN & Century Link past issue with bill from CenturyLink for \$10,000 outstanding. Theresa worked diligently to assist these entities to find this money that was already paid. Outcome is we will have to wait until mid Feb/Mar to have an answer regarding CTN/ USAC grant monies to assist. We will pursue redundancy capabilities with this funding.
- b. EHR meetings on hold until fiber resolved

CFO Report/Finance Committee Report

Ms. Kennedy presented the October 2018 financial statements starting with the Clinic Ops reports. The lower patient trend continues as compared to 2017. Ms. Kennedy also included an ops report that shows a five year trend, which mirrors the downward cycle. The payer mix has shifted to larger Medicare and Medicaid claims with those two insurance accounting for 86.6% of claims submitted in the last 12 months. This is potentially why our collection rate has declined since commercial is a better payer and is down to 10.26% of our claim pool. The AR reports were reviewed, no questions from the board. Collection rates YTD for 2018 are Clinic 47.6%; Physical Therapy 40.8% and EMS at 30.82%

On the Profit and Loss, Ms. Kennedy reported net Income before capital grants and donations for the year of \$14,709.99 for Clinic and \$40,902.83 for EMS with a total Net income before capital grants and donations of \$149,595.42. EMS has had capital grants and donations totaling \$93,987.60 which brings the YTD net income of the hospital district to \$149,595.42.

Ms. Kennedy then presented the 2019 Budget and highlighted the changes made since presented in October. Ms. Kennedy stated that this is a negative budget which shows a realistic picture of the challenge we are facing and is something that would not be sustainable if it were to continue.

Those highlights are:

- Pharmacy collection rate changed to 30% to reflect the average between what is provided thru the back and what goes thru the Instymed Machine.
- Informed the board that property tax values will not be reassessed until late 2019, and that is when we will see a potential reduction in property tax revenue for 2020.
- EMS budget changed to reflect 4 benefited positions to allow for enough shifts to be available for our future EMT graduates to work and maintain their skills. On call pay will stay at \$1 hour.
- Medical benefits included in the budget was set at all that were eligible instead of those that had participated in the past.

Resolutions: Ms. Evans made a motion to adopt as presented the 2019 Budget and the following Budget Resolutions pending final property tax valuations from Fremont County; 2018-4 Resolution to Adopt Budget; 2018-5 Resolution to Set Mill Levies; 2018-6 Resolution to Appropriate Sums of Money. Mr. Weisenbach seconded. Motion passed unanimously.

Grants:

Ms. Ripley-Williams reporting:

- still looking into grants for things like carpeting & will talk with Ms. Kennedy
- Fiber optics—grant dollars may be available via USAC and CTN, with some matching by us. Ms. Drew & Ms. Kennedy continue to research
- Check with HRRMC about their grant process

Advisors to the Board: None

Business Marketing/Public Relations: None

Unfinished Business: Mr. Weisenbach wanted to know about the signs for clinic. Per Ms. Drew, she contacted the CDOT; this was too expensive, so we will not add this expense at this time. The banner was purchased for the building and will be hung on the building.

Public Comments: Mr. Keene wanted to know if the clinic dealt with stitches or staples? Per Mr. Tobin, yes we do handle that and more. This information will be in the local paper in one of the weekly updates.

New business: Phone call from Bob Morasko, CEO, HRRMC.

- Option #3 -Salida Hospital District, merging the two districts. Open rural health clinic within our clinic, hire family MD. Minimal risk, favorable, lease receptionist, mid-level provider, clinics together as one.
- Financial analysis needs to be done.
- Legal documents being sent to Ms. Drew to distribute to the board members.
- Aprima Program will offer 50-60 % off for us which isolates from hospital information.

Schedule next Board Meeting: December 27, 2018.

Adjourn:

Ms. Evans made a motion to adjourn the meeting. Mr. Weisenbach seconded, the motion passed unanimously and the meeting was adjourned at 5:23.

Respectfully submitted,

A handwritten signature in cursive script that reads "Janny Candelaria".

Janny Candelaria
Secretary to the District Board