

**CHELAN COUNTY PUBLIC HOSPITAL DISTRICT NO. 2  
LAKE CHELAN COMMUNITY HOSPITAL & CLINICS  
MEETING OF THE GOVERNING BOARD**

**APRIL 23 – LCCH BOARD ROOM  
1:30 PM – 3:36 PM**

**MEETING MINUTES**

**CALL TO ORDER:**

Phyllis Gleasman called the meeting to order at 1:30 P.M.

**Members Present:**

Phyllis Gleasman, Chair  
Mary Murphy, Vice Chair  
Fred Miller, Secretary  
Jordana LaPorte, Commissioner  
Mary Signorelli, Commissioner (by phone 2:05-3:36.)

**Others in Attendance:**

Steve Patonai, CEO  
Vickie Bodle, CFO  
Brad Hankins, Clinic Administrator  
Kris Haasl, CNO  
Lisa Greenlee  
List of attendees

**REVIEW OF MISSION:**

Our Mission is to provide patient-centered, quality healthcare with compassion and respect.

**PUBLIC COMMENTS:**

The mailed Annual Report was well received with dates of Board Meeting included.

**CHAIR'S REPORT:**

Phyllis Gleasman announced the District Forum on the Hospital will be held May 8, 5:30 at the Senior Center. Based on discussions at the Board Workshop last week, P. Gleasman and M. Murphy are working on a Board policy to improve communication with the community and a Board performance improvement plan. The EMS department was recognized as one of the highest performers in the nation by RQI.

**CONSENT AGENDA:**

- A. Regular Board Meeting Minutes, March 26, 2019
- B. Board Workshop Meeting Minutes, April 16, 2019
- C. Affiliation/Partnership Minutes, February 19, 2019
- D. Affiliation/Partnership Minutes, March 26, 2019
- E. Affiliation/Partnership Minutes, April 15, 2019
- F. Community Committee Minutes, April 17, 2019
- G. Facilities Steering Committee Minutes, April 8, 2019
- H. Vouchers / Warrants \$539,574.15; payroll direct deposit \$464,621.30
- I. Write-Offs & Charity: Bad Debt-Hospital \$108,681.73; Bad Debt-Clinic \$3,474.13; Charity Care-Hospital \$52,725.28; Charity Care-Clinic \$1,086.06; Bankruptcy \$0; Total \$165,967.20
- J. Credentialing
  - Rachel M. Godfred MD Student
  - Megan Mayer MD Student
  - Sofia Infante MD Student

|                            |                        |      |
|----------------------------|------------------------|------|
| Peter Sumner MD            | Tele-Neurology         |      |
| Norma Karp, MD             | Initial Appt           | VRAD |
| Kristi Morris, PA-C        | Re-appointment         | CVCH |
| Donald Nicell, MD          | Re-appointment         | VRAD |
| Jeffrey Zorn, MD           | Re-appointment         | VRAD |
| Joey Victoria-LKopez, PA-C | Temporary Privileges   |      |
| Darren Wardle, DPM         | Delineation Privileges |      |
| Trent Lyman, PA-C          | Delineation Privileges |      |

*A motion was made by M. Murphy to approve the consent agenda without credentialing, seconded by F. Miller, and approved by the Board of Commissioners.*

*A motion was made by F. Miller to approve the credentialing, seconded by J. LaPorte, and approved by the Board of Commissioners.*

#### **OLD BUSINESS:**

Nothing reported at this time

#### **NEW BUSINESS:**

##### **Finance Committee Report – Fred Miller & Vickie Bodle, CFO**

Vickie Bodle reported financials are completed for March. Cash on hand was approximately \$1.9M. Net Operating Revenue was over budget and salaries/benefits expense was under budget for the month. Net Income was \$72,591 versus a budget of \$66,553. HRG and North Valley Hospital are making progress on the coding backlog. AR through March at 88 days, dropping in April. Goal is to be less than 60.

##### **Business Plan Progress Report – Steve Patonai**

- Growth/Innovation Pillar Goals
  - Achieve 2019 Physician Recruitment goals: Yellow
    - Holding off on Internal Medicine recruitment for now
    - Nurse Practitioner hired Friday, starts May 13
  - Explore Affiliation/Partnership opportunities: Green
    - Have had discussions with four different entities to explore options
  - Complete new Hospital construction project by 2Q2021: Yellow
- Finance Pillar
  - Achieve/Exceed 2019 budgeted Income from Operations: Red
    - Implement the DPRS: Yellow
    - Implement RVU-based compensation model in clinic: Red
    - Conduct comprehensive Revenue Cycle analysis: Green
    - Conduct in-depth review of all contracts and terms: Yellow
    - Establish a formalized Contracts Management system: Green

##### **Revenue Cycle Improvement Update - J. Sweeney, K. Haasl, V. Bodle, J. Dion**

- Patient Access (presented by J. Sweeney)
  - Improving registration processes at Clinic and Hospital
  - Errors/Omissions are corrected within one working day
  - Standardized onboarding/orientation process
  - Advanced Beneficiary Notices
- Charge Capture (presented by K. Haasl)
  - Reviewing charts for all charges
  - Verifying charge master codes are correct
  - Materials management keeping track of expenses
  - J. Minnock focused on daily charges

- HIM (presented by V. Bodle)
  - Coding backlog is reducing
  - Items dropping off the unbilled report
  - Hired another person in HIM
  - IT enhancements – 3M Encoder upgrade will help with payable diagnosis
- Business Office (presented by J. Dion)
  - Aged Trial Balance/AR between 30-120 days
  - Rycan will modernize claims from manual to electronic process
  - Segregated staff duties more and streamlined processes
  - Payor credentialing – all physicians are now on PECOS
  - Placing a Financial Counselor in the hospital

*A motion was made by M. Murphy to have a Revenue Cycle assessment completed every 3-5 years, seconded by J. LaPorte, and approved by the Board of Commissioners.*

### **Facilities Steering Committee Update – Steve Patonai**

Hospital estimate at \$44.32M under the \$44.5M cap. Current plan is to build 54,000 sq. ft. hospital. Projected space will meet the needs for next 5+ years post-project completion with growth areas designed for expansion. Clinic, EMS and Business Office are not currently included. May use local contractor to build these areas. Larger Operating Rooms gives the Hospital the ability to handle more complex cases.

M. Signorelli stated that waiting for the USDA approval took eight months longer than expected and costs increased during that time. The team is working to create an efficient and top-quality hospital.

A Special Board Meeting will be scheduled next week to review the space plan and meet with architects and general contractor.

*A motion was made by M. Signorelli to approve the approximate square footage and overall space plan, and proceed to the schematic design phase, seconded by F. Miller, and approved by the Board of Commissioners.*

### **STATE OF THE HOSPITAL REPORTS**

#### **Clinic Updates – Brad Hankins, RN, Clinic Administrator**

Gave out 80 bike helmets at the bike rodeo this past weekend. April 29<sup>th</sup> partnering with the Chelan schools to offer a parent night for awareness and education on drug, alcohol and suicide issues.

Clinic is up 250 encounters from 2018. The 4<sup>th</sup> quarter Press Ganey CGCHAPS patient satisfaction scores were above the state scores.

#### **Patient Care Update –Kris Haasl, CNO**

Courtney Wallace worked with Press Ganey to implement new surveys with electronic submission. Transition plan in place for Clinic. Meeting with all the teams and keeping them involved in process. Standardization of the onboarding process was finalized in April. Using new process in May with providers and with new hires in June.

#### **CEO Report – Steve Patonai, CEO**

Mike Ellis, CFO has been hired - starts May 20. He will be a great addition to the team. Interviewing HR Director candidates this week.

### **OTHER BUSINESS:**

M. Murphy requested to begin process of planning the Strategic Planning Board Retreat. P. Gleasman suggested a two-day format in the second week of July. Submit ideas for retreat in writing to L. Greenlee.

**PUBLIC COMMENTS:**

A community member was pleased a decision was reached to move forward with building the hospital and the next step is being taken. Individuals thanked B. Hankins for his tenure at the Hospital and Clinic.

**MEETING ADJOURNED:**

Meeting adjourned at 3:36 P.M.

**Submitted:**

*Phyllis L. Gleason*  
\_\_\_\_\_  
**Board Secretary Chair**

*06/03/2019*  
\_\_\_\_\_  
**Date**

**Attest:**

\_\_\_\_\_  
**CEO**

\_\_\_\_\_  
**Date**

*[Signature]*  
*5/28/19*