



LAKE CHELAN HEALTH

BOARD PACKET

Chelan County Public Hospital District No. 2

/2024



Chelan County Public Hospital District No. 2
 Regular Meeting of the Board of Commissioners
 November 19, 2024, at 1:30 am via TEAMS

Agenda

Mission- “To provide the highest quality healthcare with compassion and respect to the community we serve.”

FI – For Information; FD – For Discussion; FM – For Motion; FA – For Acceptance; FR-For Resolution

| <i>Time</i> | <i>Agenda Item</i> | <i>Facilitator</i> | <i>Topic/Action</i> |
|-------------|--|--|---|
| 1:30 | <ul style="list-style-type: none"> Call to Order | J. LaPorte | |
| 1:35 | <ul style="list-style-type: none"> Chair Report | | |
| 1:40 | <ul style="list-style-type: none"> Public Comment | | |
| 1:45 | <ul style="list-style-type: none"> Consent Agenda | Commission | A. Regular Board Meeting Minutes 10/22/2024 (FA) B. Warrants & Vouchers (FM) C. Bad Debt & Charity Care (FM) D. Finance Committee Minutes 11/15/2024 (FA) E. Governance Meeting Minutes 10/29/2024 (FA) F. Governance Meeting Minutes 11/11/2024 (FA) |
| 1:50 | <ul style="list-style-type: none"> Executive Session | | A. RCW 42.30.110(1)(o) to consider information regarding staff privileges or quality improvement committees under RCW 70.41.205 |
| 2:00 | <ul style="list-style-type: none"> Reports | M. Hillman DO/L. Sahlinger B. Truman A. Edwards S. Ottley Commission | A. Med Staff Report & Credentialing (FM) B. Financial Committee Report (FA) <ul style="list-style-type: none"> Finance Update/Resolution 2024-11 Capital Expenditures C. CEO Report (FI) D. Strat Plan KPI Discussion (FD) E. Board Advocacy (FD) |
| 3:15 | <ul style="list-style-type: none"> Old Business | S. Ottley Commission | A. Specialty Clinic Project Update (FI) B. EMS Building Presentation and Discussion (FD) C. Change Order Process Discussion (FD) D. Board <ul style="list-style-type: none"> Self-Evaluations Year-End Planning/Scheduling 2025 Meeting Schedule Year End Letter CHNA Education Dates Board Officer Elections/Committee Assignments |
| 4:15 | <ul style="list-style-type: none"> New Business | Commission L. Sahlinger | A. Policies <ul style="list-style-type: none"> Board Involvement in Policy Process (FD) Charity Care Policy (FM) Board Member Code of Conduct Policy (FD) Public Participation in Board Meetings Policy (FD) B. Quality <ul style="list-style-type: none"> Wet Procedure Locations: NFPA 99.6.2.2.8.4 & NFPA 99.6.2.2.8.7 (FM) |
| 5:00 | <ul style="list-style-type: none"> Roundtable /Action Items | Commission | |
| 5:10 | <ul style="list-style-type: none"> Public Comment | | |

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| 5:20 | <ul style="list-style-type: none"> Executive Session | | A. RCW 42.30.110(1)(g) to evaluate the performance of a public employee. |
| 5:45 | <ul style="list-style-type: none"> Adjournment | | |

Board Calendar Reminders:

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|------------|---------------------------------------|----------------------|----------------|
| 12/4/2024 | Compliance, Privacy, & Risk Committee | 1212 Conference Room | 10 am – 11 am |
| 12/9/2024 | TBA | Bragg Room/ TEAMS | 9 am |
| 12/12/2024 | Med Staff/Peer Review | Bragg Room/ TEAMS | 7:15 am – 9 am |
| TBA | Quality Committee | Bragg Room/ TEAMS | 1 pm – 3 pm |
| 12/13/2024 | Finance Committee | Bragg Room/ TEAMS | 11 am |
| 12/17/2024 | Regular Board Meeting | Bragg Room/ TEAMS | 1:30 pm |

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|------------|---------------------------------------|----------------------|----------------|
| TBD | Compliance, Privacy, & Risk Committee | 1212 Conference Room | 10 am – 11 am |
| 11/11/2024 | TBA | Bragg Room/ TEAMS | 9 am |
| TBD | Med Staff/Peer Review | Bragg Room/ TEAMS | 7:15 am – 9 am |
| 1/16/2025 | DEI Committee | 1212 Conference Room | 1 pm – 2 pm |
| TBD | Quality Committee | Bragg Room/ TEAMS | 1 pm – 3 pm |
| 1/15/2025 | Finance Committee | Bragg Room/ TEAMS | 11 am |
| TBD | Regular Board Meeting | Bragg Room/ TEAMS | 1:30 pm |



**Chelan County Public Hospital District No. 2
Regular Meeting of the Board of Commissioners
Meeting Minutes October 22, 2024 1:30 pm
in person and via Microsoft TEAMS**

Commission Attendance:

(not present present)

Jordana LaPorte, Chair
 Lori Withrow, Vice Chair

Mary Murphy,
Secretary
 Doug Gibson

Len England (Online)

Staff Participants: A. Edwards, B. Truman, S. Ottley, R. Montgomery, L. Sahlinger, M. Miller, A. Benegas, A. Temes, B. Kipp, C. Onda, H. Didra, J. England, L. Marshall, S. Nau, T. Lautiki, B. Brodigan, R. McCracken, K. Brown, L. Stone, Sarah

Guests:

Community Members: M. Navarro, D. Griggs, A. Moroz, L. Slapnicka, E. Freed

Recorder: Wendy Kenck

| Agenda Item | Topic/Action |
|----------------------|---|
| 1. Call to Order | <ul style="list-style-type: none"> J. LaPorte called the meeting to order at 1:36 pm and recited the mission statement. |
| 2. Public Comment | <ul style="list-style-type: none"> No public comment |
| 3. Chair's Report | <ul style="list-style-type: none"> J. LaPorte emphasized the Board Chair's role in keeping the meeting on track and clarified that public comments are allowed at the beginning and end of the meeting. After working with the organization for 7-8 years, she stressed that the public and employees need to understand that while CVCH and LCH are aligned by similar mission statements, they are not partners. Both organizations aim to work together but must make independent business decisions with their missions in mind. LCH's focus is on providing the best quality healthcare for the community, not on what is best for each individual employee, what will make the most money, or what is easiest. By prioritizing the community's healthcare needs, they can and do make difficult but necessary decisions. |
| 4. Consent Agenda | <ul style="list-style-type: none"> <i>L. Withrow motioned to approve Consent Agenda, seconded, motion passed</i> |
| 5. Executive Session | <ul style="list-style-type: none"> J. LaPorte announced Executive Session at 1:47 pm for 10 minutes to consider information regarding staff privileges or quality improvement committees under RCW 70.41.205 and RCW 42.30.110(1)(o) Executive session ended at 1:57 pm |
| 6. Reports | <ul style="list-style-type: none"> <i>M. Murphy verified all credential files are complete for the proposed list of providers and motioned to approve the appointments and removals as presented, seconded, motion passed.</i> Finance: <ul style="list-style-type: none"> B. Truman presented the unaudited September 2024 Finance. <ul style="list-style-type: none"> Discussion on the \$175K L&D Grant <i>M. Murphy motioned to accept the September 2024 Finance Report, seconded, motion passed.</i> B. Truman reviewed the 2025 Budget Statement S. Nau presented a quarterly review of OB/Surgery/ER. |

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| | <ul style="list-style-type: none"> • A. Edwards shared the CEO Report with additional notes: <ul style="list-style-type: none"> ▪ LCH received a patient letter of thanks to EMS and staff at Lake Chelan Health. ▪ Expressed gratitude to Dr. Wasz and the community for celebrating his retirement. ▪ Announced the clinic extended hours starting in November (7am-6pm). ▪ Thanked Guild B for promoting the “Paint the Town Pink!” event. ▪ Aaron will be joining the AWPHD Board and will serve as Rural Collaborative Chair • S. Ottley presented an overview of Septembers Key Performance Indicator (KPI) dashboard. <ul style="list-style-type: none"> • L. Sahlinger stated the significant decrease in the Aggregate Quality score was due to lack of event reporting and patient satisfaction. • Board Advocacy: <ul style="list-style-type: none"> • M. Murphy and J. LaPorte attended the Chelan Valley Non-Profit meeting this month. • Upcoming Event: Nov 14 - Ruby U: Round the Clock Healthcare and Emergency Services @ 7pm • Board members to sign up (2 months each) to present Board education topics monthly in 2025. L Withrow shared MRSC article “Harassment of Public Officials and Employees” |
| 7. Old Business | <ul style="list-style-type: none"> • S. Ottley reviewed the Strat Plan KPI’s <ul style="list-style-type: none"> ○ Discussion regarding KPI report out to the Board. • Project Update: <ul style="list-style-type: none"> ○ Specialty Clinic: <ul style="list-style-type: none"> ▪ The bid process concluded this week, with Cascade winning at \$1.643 million. ▪ Background checks are complete with excellent references. ▪ AIA Resolution contract reviewed by legal. ▪ Pre-construction meeting with the city scheduled for next Wednesday, aiming to start work by 11/4. ▪ Awaiting a response from the Department of Health (DOH). ○ EMS: <ul style="list-style-type: none"> ▪ Graham Construction submitted the winning bid and their pre-construction and finance documents. ▪ AAI documents are with legal. ▪ Seeking approval for pre-construction services via Resolution, with a second resolution for construction costs to follow. • CHNA Update: <ul style="list-style-type: none"> ○ Aaron received four recommendations, and Agustin will be reaching out to them. ○ AWPHD may match funds to assist with the CHNA costs. |
| 8. New Business | <ul style="list-style-type: none"> • M. Murphy motioned to approve Resolution 2024-4 GC EMS/Admin Project, seconded, motion approved. • D. Gibson motioned to approve Resolution 2024-6 Specialty Clinic, seconded, motion approved. • L. England motioned to approve Resolution 2024-7 2025 Budget, seconded, motion approved. • L. Withrow motioned to approve Resolution 2024-8 Regular Hospital Levy, Resolution 2024-9 EMS Levy, Resolution 2024-10 GO Bonds, seconded, motion approved. • M Murphy motioned to approve Donor Stewardship & Recognition Policy, BOC Policy and Procedure Regarding Ethical and Legal Matters and Gift Policy, seconded, motion approved. |
| 9. Roundtable/Action Items | <ul style="list-style-type: none"> • B. Truman: Compile a year-to-date vs. purchased Capital Budget report and email the 2025 Capital Budget Spreadsheet. • Self-Evaluation: Board to send to Jordana for review by the end of this week. |

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| | <ul style="list-style-type: none"> • Board Members: Send Wendy your preferred two months for Education Topic Dates for 2025. Add to Board calendar. • S. Ottley: Create a Change Order Policy for the Specialty Clinic to be reviewed by the Finance Committee and approved at the Board Meeting. • W. Kenck: Draft a calendar for 2025 Board Meetings, scheduling them for the last Tuesday of each month, unless occurs on a holiday or WSHA conference week. • Board Members: Send your top 10 KPIs for monthly reporting at the Board Meeting to Shawn by November 10. • Governance: Compile an outline for the board's end-of-year letter to present at the next Board Meeting. • Compliance Meeting: Schedule every other month, starting in November. • Quality Rounding: Board members to reschedule with Louise. |
| 10. Public Comment | <ul style="list-style-type: none"> • A. Moroz raised questions after reading the Mirror regarding the Hospitalist program. The administration identified 80 patients and questioned what percentage could have been treated locally and inquired about the metrics used to evaluate the decision to move to this model? <ul style="list-style-type: none"> ○ The Administration and the Board clarified that all 80 patients who were sent to other facilities could have been treated locally if a Hospitalist had been available on-site 24/7. This decision was informed by metrics such as Length of Stay, increased Emergency Department volumes, staff rounding, and feedback on additional training needs. Jordana invited A. Moroz to discuss her concerns further with her or any other Board member. |
| 11. Executive Session | <ul style="list-style-type: none"> • L. Withrow announced Executive Session at 4:30 pm for 45 minutes for <ul style="list-style-type: none"> ○ RCW 42.30.110(1)(g) Evaluate the performance of a public employee. ○ RCW 70.41.205 To consider the minimum price at which real estate will be offered for sale or lease when public knowledge regarding such consideration would cause a likelihood of increased price. <ul style="list-style-type: none"> ▪ L. Withrow extended the Executive Session 15 minutes ▪ Executive Session ended at 5:30 pm |
| 12. Adjournment | <ul style="list-style-type: none"> • No action was taken as a result of the Executive Session • J. LaPorte adjourned the meeting at 5:31 pm |

Attest:

M. Murphy, Secretary

Aaron Edwards, CEO

W. Kenck, Executive Assistant

| WARRANT #'S A/P | AMOUNT | CAPITAL | BOARD MTG - NOV 2024 | WARRANTH'S PAYROLL | AMOUNT | pay period |
|-------------------|-----------------|--------------------|-------------------------|-----------------------|-----------------|----------------|
| 237641-237664 | \$ 540,432.19 | | | Direct Deposit | \$ 543,994.83 | 10/5/2024 |
| 237665-237747 | \$ 357,100.16 | | | PAYROLL TAXES | \$ 205,095.19 | 10/5/2024 |
| AP DIRECT DEPOSIT | \$ 49,157.55 | | | CHILD SUPPORT | \$ 320.37 | 10/5/2024 |
| RETIREMENT | \$ 42,673.28 | | | 77524 | \$ 2,215.71 | 10/5/24 RUN #2 |
| DOR | \$ 15,261.37 | | | PAYROLL TAXES | \$ 595.55 | 10/5/24 RUN #2 |
| AP DIRECT DEPOSIT | \$ 1,250.00 | | | Direct Deposit | \$ 546,261.10 | 10/19/2024 |
| 237851-237910 | \$ 355,811.94 | 237899 miss fed ck | | PAYROLL TAXES | \$ 200,693.33 | 10/19/2024 |
| 237911-237941 | \$ 10,730.26 | | | CHILD SUPPORT | \$ 320.37 | 10/19/2024 |
| IDAHO TAXES | \$ 765.00 | | | | | |
| UNCLAIMED PROP. | \$ 3,867.25 | | | | | |
| FPL<C | \$ 62,264.99 | | | | | |
| | \$ 1,439,313.99 | | | | \$ 1,499,496.45 | |

| WARRANT #'S A/P | AMOUNT | CAPITAL | BOARD MTG - Dec 2023 | NEW HOSPT AMNT FROM CKRN | WARRANT#'S PAYROLL | AMOUNT | |
|-----------------|------------------------|---------------------|-------------------------|--------------------------------|-----------------------|----------------|--------------------------|
| 233718-233795 | \$ 340,793.59 | \$ 16,803.88 | 11/2/2023 | | | | |
| 233796-233890 | \$ 212,808.29 | \$ 13,618.05 | | | 220374.46 | DIRECT DEPOSIT | \$ 498,907.23 11/18/2023 |
| 233891-233997 | \$ 432,587.89 | | 11/16/2023 | | | DIRECT DEPOSIT | \$ 492,077.01 12/2/2023 |
| 233998-233999 | \$ 73,883.22 | | 11/21/2023 | | | | |
| 234000-234003 | \$ 1,733.88 | | 11/22/2023 | | | | |
| 234004-234092 | \$ 479,872.93 | | 11/30/2023 | | | | |
| 234093 | \$ 12,950.00 | | 12/1/2023 | | | | |
| 234094-234096 | \$ 25,803.00 | | 12/4/2023 | | | | |
| 234097-234171 | \$ 125,590.87 | | 12/8/2023 | | | | |
| | \$ 1,706,023.67 | \$ 30,421.93 | | | 220374.46 | | \$ 990,984.24 |

| WARRANT #'S A/P | AMOUNT | CAPITAL | BOARD MTG - Jan 2024 | NEW HOSPT AMNT FROM CKRN | WARRANT#'S PAYROLL | AMOUNT | pay period |
|-----------------|----------------------|---------------------|-------------------------|--------------------------------|-----------------------|----------------|--------------------------|
| 234172-234277 | \$ 234,487.12 | \$ 38,152.19 | 12/14/2023 | | | Direct Deposit | \$ 496,118.44 12/16/2023 |
| 234278 | | | 12/15/2023 | | 26316.15 | | |
| 234279-234352 | \$ 298,824.30 | | 12/21/2023 | | | | |
| 234353-234387 | \$ 314,405.51 | | 12/27/2023 | | | | |
| 234388-234389 | \$ 160.00 | | 12/28/2023 | | | | |
| | \$ 847,876.93 | \$ 38,152.19 | | | 26316.15 | | \$ 496,118.44 |

| WARRANT #'S A/P | AMOUNT | CAPITAL | BOARD MTG - FEB 2024 | NEW HOSPT AMNT FROM CKRN | WARRANT#'S PAYROLL | AMOUNT | pay period |
|-----------------|------------------------|----------------------|-------------------------|--------------------------------|-----------------------|---------------|------------------------|
| 234390-234391 | \$ 8,010.05 | | 1/4/2024 | | Direct Deposit | \$ 489,629.05 | 12/30/2023 |
| 234392-234450 | \$ 181,661.51 | \$ 131,008.12 | 1/5/2024 | | Direct Deposit | \$ 499,173.71 | 1/13/2024 |
| 234451 | \$ 3,855.24 | | 1/10/2024 | | Direct Deposit | \$ 494,102.81 | 1/27/2024 |
| 234452-234548 | \$ 305,417.66 | | 1/11/2024 | | | | |
| 234549-234628 | \$ 347,635.52 | | 1/18/2024 | | | | |
| 234629-234771 | \$ 428,718.71 | | 1/25/2024 | | | | |
| 234772-234837 | \$ 271,150.46 | | 2/1/2024 | | | | |
| | \$ 1,546,449.15 | \$ 131,008.12 | | | | | \$ 1,482,905.57 |

| WARRANT #'S A/P | AMOUNT | CAPITAL | BOARD MTG - MARCH 2024 | NEW HOSPT AMNT FROM CKRN | WARRANT#'S PAYROLL | AMOUNT | pay period |
|---------------------|------------------------|---------------------|---------------------------|--------------------------------|-----------------------|---------------|------------------------|
| Retirement | \$ 40,650.33 | | 1/10/2024 | | PAYROLL TAXES | \$ 184,817.98 | 12/30/2023 |
| DOR | \$ 16,573.51 | | 1/16/2024 | | CHILD SUPPORT | \$ 430.68 | 12/30/2023 |
| Unclaimed Property | \$ 214.07 | | 1/23/2024 | | PAYROLL TAXES | \$ 193,091.60 | 1/13/2024 |
| Retirement | \$ 44,485.01 | | 1/24/2024 | | CHILD SUPPORT | \$ 430.68 | 1/13/2024 |
| Family Paid Leave | \$ 28,415.27 | | 1/29/2024 | | PAYROLL TAXES | \$ 187,737.79 | 1/27/2024 |
| Long term care | \$ 21,964.41 | | 1/29/2024 | | CHILD SUPPORT | \$ 430.68 | 1/27/2024 |
| Retirement | \$ 48,957.40 | | 2/6/2024 | | Direct Deposit | \$ 473,376.24 | 2/10/2024 |
| JANUARY DEPT OF REV | \$ 12,992.21 | | 2/13/2024 | | PAYROLL TAXES | \$ 179,018.98 | 2/10/2024 |
| Retirement | \$ 40,399.23 | | 2/16/2024 | | CHILD SUPPORT | \$ 430.68 | 2/10/2024 |
| 234838-234840 | \$ 24,163.00 | | 2/5/2024 | | Direct Deposit | \$ 498,886.85 | 2/24/2024 |
| 234841-234916 | \$ 240,362.45 | | 2/8/2024 | | PAYROLL TAXES | \$ 189,990.15 | 2/24/2024 |
| 234917-234984 | \$ 280,520.66 | \$ 44,007.22 | 2/15/2024 | | CHILD SUPPORT | \$ 430.68 | 2/24/2024 |
| 234985-235065 | \$ 398,902.29 | | 2/22/2024 | | Payroll Warrant | \$ 80.68 | 2/10/2024 |
| 235066-235122 | \$ 430,341.02 | | 2/29/2024 | | | | |
| 235123 | \$ 2,800.00 | | 3/1/2024 | | | | |
| Retirement | \$ 49,201.17 | | | | | | |
| | \$ 1,680,942.03 | \$ 44,007.22 | | | | | \$ 1,909,153.67 |

| WARRANT #'S A/P | AMOUNT | CAPITAL | BOARD MTG - april 2024 | NEW HOSPT AMNT FROM CKRN | WARRANT#'S PAYROLL | AMOUNT | pay period |
|-----------------|------------------------|---------|---------------------------|--------------------------------|-----------------------|------------------------|------------|
| 235124-235255 | \$ 197,325.22 | | | | Direct Deposit | \$ 511,099.82 | 3/9/2024 |
| DOR ACH AMOUNT | \$ 13,935.42 | | | | PAYROLL TAXES | \$ 205,948.53 | 3/9/2024 |
| 235256-235261 | \$ 9,899.10 | | | | CHILD SUPPORT | \$ 430.68 | 3/9/2024 |
| 235262-235331 | \$ 285,016.19 | | | | Payroll warrant | \$ 13,121.83 | 3/9/2024 |
| RETIREMENT | \$ 48,381.03 | | | | Direct Deposit | \$ 506,878.95 | 3/23/2024 |
| 235332-235402 | \$ 253,620.52 | | | | PAYROLL TAXES | \$ 197,388.99 | 3/23/2024 |
| 235403-235448 | \$ 387,552.54 | | | | CHILD SUPPORT | \$ 430.68 | 3/23/2024 |
| 235449-235518 | \$ 327,015.86 | | | | | | |
| RETIREMENT | \$ 45,998.36 | | | | | | |
| | \$ 1,568,744.24 | | | | | \$ 1,435,299.48 | |

| WARRANT #'S A/P | AMOUNT | CAPITAL | BOARD MTG - MAY 2024 | NEW HOSPT AMNT FROM CKRN | WARRANT#'S PAYROLL | AMOUNT | pay period |
|-----------------------|------------------------|---------|-------------------------|--------------------------------|-----------------------|------------------------|---------------|
| 235519-235606 | \$ 196,320.56 | | | | Direct Deposit | \$ 509,316.76 | 4/6/2024 |
| Retirement | \$ 43,968.59 | | | | PAYROLL TAXES | \$ 197,802.05 | 4/6/2024 |
| 235607 | \$ 738.47 | | | | CHILD SUPPORT | \$ 430.68 | 4/6/2024 |
| 235608-235688 | \$ 306,204.31 | | | | 77515-77417 | \$ 12,538.01 | 4/6/2024 |
| MARCH DOR | \$ 12,518.09 | | | | Direct Deposit | \$ 513,583.38 | 4/20/2024 |
| FAMILY PAID LEAVE | \$ 36,500.75 | | | | PAYROLL TAXES | \$ 208,326.73 | 4/20/2024 |
| LONG TERM CARE | \$ 26,270.07 | | | | CHILD SUPPORT | \$ 430.68 | 4/20/2024 |
| 235689-235747 | \$ 472,930.60 | | | | Direct Deposit | \$ 502,358.88 | 5/4/2024 |
| 235748 miss feed-VOID | | | | | PAYROLL TAXES | \$ 190,409.85 | 5/4/2024 |
| 235749 | \$ 115,400.00 | | | | CHILD SUPPORT | \$ 430.68 | 5/4/2024 |
| 235750-235787 | \$ 68,988.46 | | | | \$ 77,513.00 | \$ 5,057.34 | 5/4/24 run #: |
| 235788-235802 | \$ 59,753.64 | | | | PAYROLL TAXES | \$ 2,330.01 | 5/4/24 run #: |
| 235803-235875 | \$ 213,817.51 | | | | | | |
| 235821 | VOIDED CK | | | | | | |
| 235876 | \$ 943.44 | | | | | | |
| | \$ 1,554,354.49 | | | | | \$ 2,143,015.05 | |

| WARRANT #'S A/P | AMOUNT | CAPITAL | BOARD MTG - JUNE 2024 | WARRANT#'S PAYROLL | AMOUNT | pay period |
|-----------------|------------------------|---------|--------------------------|-----------------------|----------------------|------------|
| Retirement | \$ 43,322.24 | | | Direct Deposit | \$ 520,616.21 | 5/18/2024 |
| 235877-235958 | \$ 249,758.68 | | | PAYROLL TAXES | \$ 193,247.82 | 5/18/2024 |
| DEPT OF REV | \$ 17,858.97 | | | CHILD SUPPORT | \$ 430.68 | 5/18/2024 |
| 235959-236046 | \$ 353,999.08 | | | | | |
| 236047-236098 | \$ 25,522.22 | | | | | |
| 236099-236151 | \$ 449,224.44 | | | | | |
| Retirement | \$ 41,569.73 | | | | | |
| 236152-236157 | \$ 4,778.75 | | | | | |
| | \$ 1,186,034.11 | | | | \$ 714,294.71 | |

| WARRANT #'S A/P | AMOUNT | CAPITAL | BOARD MTG - JULY 2024 | WARRANT#'S PAYROLL | AMOUNT | pay period |
|-----------------|---------------|----------------------|--------------------------|-----------------------|---------------|------------|
| 236158-236229 | \$ 217,376.51 | | | Direct Deposit | \$ 531,904.84 | 6/1/2024 |
| 236230-236259 | \$ 12,076.71 | | | PAYROLL TAXES | \$ 206,747.45 | 6/1/2024 |
| RETIREMENT | \$ 41,852.74 | | | CHILD SUPPORT | \$ 430.68 | 6/1/2024 |
| 236260-236335 | \$ 298,840.34 | | | 77518-77519 | \$ 217.32 | 6/1/2024 |
| 236336-236379 | \$ 10,527.37 | | | Direct Deposit | \$ 502,687.45 | 6/15/2024 |
| 236380-236454 | \$ 371,021.23 | 236398-236399 voided | | PAYROLL TAXES | \$ 184,438.92 | 6/15/2024 |
| DOR | \$ 28,070.63 | | | CHILD SUPPORT | \$ 430.68 | 6/15/2024 |
| RETIREMENT | \$ 45,660.70 | | | PAYROLL CK 77520 | \$ 23,740.40 | 6/15/2024 |
| 236455-236509 | \$ 404,069.24 | | | PAYROLL TAXES | \$ 16,259.60 | 6/15/2024 |
| 236510-236577 | \$ 164,538.48 | | | Direct Deposit | \$ 528,727.15 | 6/29/2024 |
| 236578-236585 | \$ 19,149.99 | | | PAYROLL TAXES | \$ 197,124.93 | 6/29/2024 |

| | | | | | | |
|---------------|----|---------------------|---------------|----|---------------------|-----------|
| RETIREMENT | \$ | 43,247.82 | CHILD SUPPORT | \$ | 430.68 | 6/29/2024 |
| 236586-236675 | \$ | 339,515.71 | | | | |
| | \$ | 1,995,947.47 | | \$ | 2,193,140.10 | |

| WARRANT #'S A/P | AMOUNT | CAPITAL | BOARD MTG - AUGUST 2024 | WARRANT#'S PAYROLL | AMOUNT | pay period |
|-----------------|--------|---------------------|----------------------------|-----------------------|------------------------|------------|
| 236676-236685 | \$ | 11,939.78 | | Direct Deposit | \$ 551,603.41 | 7/13/2024 |
| 236686-236774 | \$ | 379,316.61 | | PAYROLL TAXES | \$ 203,070.36 | 7/13/2024 |
| DOR | \$ | 16,931.15 | | CHILD SUPPORT | \$ 486.34 | 7/13/2024 |
| FPL | \$ | 29,903.28 | | Direct Deposit | \$ 600,616.52 | 7/27/2024 |
| LTC | \$ | 23,002.59 | | PAYROLL TAXES | \$ 233,627.89 | 7/27/2024 |
| 236775 | \$ | 738.47 | | CHILD SUPPORT | \$ 337.57 | 7/27/2024 |
| RETIREMENT | \$ | 40,815.11 | | | | |
| 236776-236846 | \$ | 439,180.92 | | | | |
| 236847 | \$ | 9,990.00 | | | | |
| 236848-236922 | \$ | 446,187.57 | | | | |
| | \$ | 1,398,005.48 | | | \$ 1,589,742.09 | |

| WARRANT #'S A/P | AMOUNT | CAPITAL | BOARD MTG - SEPTEMBER 2024 | WARRANT#'S PAYROLL | AMOUNT | pay period |
|--------------------|--------|---------------------|----------------------------------|-----------------------|------------------------|------------|
| 236923-236924 | \$ | 87,499.99 | | 77521 | \$ 466.00 | 7/27/2024 |
| RETIREMENT | \$ | 46,352.55 | | Direct Deposit | \$ 568,080.11 | 8/10/2024 |
| New House | \$ | 633,934.48 | | PAYROLL TAXES | \$ 220,184.77 | 8/10/2024 |
| 236925-236996 | \$ | 517,979.92 | | CHILD SUPPORT | \$ 320.37 | 8/10/2024 |
| 236997 | \$ | 4,020.44 | | Direct Deposit | \$ 552,115.40 | 8/24/2024 |
| 236998-237070 | \$ | 247,553.35 | | 77523 | \$ 976.82 | 8/24/2024 |
| RETIREMENT | \$ | 44,377.97 | | PAYROLL TAXES | \$ 206,686.04 | 8/24/2024 |
| DOR | \$ | 27,677.53 | | CHILD SUPPORT | \$ 320.37 | 8/24/2024 |
| 237071-237123 | \$ | 24,482.45 | | | | |
| DIRECT DEPOSIT A/P | \$ | 66,983.34 | | | | |
| 237124-237193 | \$ | 373,868.40 | | | | |
| 237194-237245 | \$ | 386,145.84 | | | | |
| RETIREMENT | \$ | 45,842.87 | | | | |
| AP ACH | \$ | <u>1,583.21</u> | | | | |
| | \$ | 2,508,302.34 | | | \$ 1,549,149.88 | |

| WARRANT #'S A/P | AMOUNT | CAPITAL | BOARD MTG - OCT 2024 | WARRANT#'S PAYROLL | AMOUNT | pay period |
|-------------------|--------|---------------------|-------------------------|-----------------------|------------------------|------------|
| 237246-237310 | \$ | 300,583.02 | | Direct Deposit | \$ 524,453.05 | 9/7/2024 |
| 237311-237379 | \$ | 306,084.88 | | PAYROLL TAXES | \$ 192,232.71 | 9/7/2024 |
| AP DIRECT DEPOSIT | \$ | 8,068.29 | | CHILD SUPPORT | \$ 320.37 | 9/7/2024 |
| RETIREMENT | \$ | 43,734.17 | | Direct Deposit | \$ 511,024.20 | 9/21/2024 |
| DOR | \$ | 11,953.47 | | PAYROLL TAXES | \$ 185,773.89 | 9/21/2024 |
| 237380-237462 | \$ | 465,752.35 | | CHILD SUPPORT | \$ 320.37 | 9/21/2024 |
| AP DIRECT DEPOSIT | \$ | 1,583.21 | | | | |
| 237463-237484 | \$ | 5,057.34 | | | | |
| 237485-237553 | \$ | 392,268.88 | | | | |
| AP DIRECT DEPOSIT | \$ | 58,333.34 | | | | |
| RETIREMENT | \$ | 41,175.00 | | | | |
| 237554-237640 | \$ | 337,798.65 | | | | |
| AP DIRECT DEPOSIT | \$ | 7,180.08 | | | | |
| | \$ | 1,979,572.68 | | | \$ 1,414,124.59 | |

| WARRANT #'S A/P | AMOUNT | CAPITAL | BOARD MTG - NOV 2024 | WARRANT#'S PAYROLL | AMOUNT | pay period |
|-------------------|--------|------------|-------------------------|-----------------------|---------------|------------|
| 237641-237664 | \$ | 540,432.19 | | Direct Deposit | \$ 543,994.83 | 10/5/2024 |
| 237665-237747 | \$ | 357,100.16 | | PAYROLL TAXES | \$ 205,095.19 | 10/5/2024 |
| AP DIRECT DEPOSIT | \$ | 49,157.55 | | CHILD SUPPORT | \$ 320.37 | 10/5/2024 |



MINUTES

| | | |
|---|---|--|
| Group: Finance Committee 11/15/24, 11AM in person and via Teams | | |
| Facilitator: Jordana Laporte | | Recorder: W. Kenck |
| Member Attendance: | | |
| <input checked="" type="checkbox"/> Jordana Laporte, BOC <input checked="" type="checkbox"/> Lori Withrow, BOC | <input checked="" type="checkbox"/> Shawn Ottley, COO (TEAMS) <input checked="" type="checkbox"/> Brant Truman, CFO | <input checked="" type="checkbox"/> Aaron Edwards, CEO |
| Participants: V. Bodle Guests: R. Montgomery, T. Lautiki | | |

FI – For Information; FD – For Discussion; FR – For Recommendation

| <i>Agenda Item</i> | <i>Topic/Action</i> |
|---|---|
| 1. Call to Order | <ul style="list-style-type: none"> • J. Laporte called meeting to order 9 am |
| <ul style="list-style-type: none"> • New Business | <ul style="list-style-type: none"> • B. Truman reviewed the Sources and Uses of Cash, explaining how cash is utilized within the facility. • B. Truman discussed the current Project Sources and Uses document, highlighting the hospital's position on accessing additional funding through a loan for planned purchases. • B. Truman presented a PowerPoint on the 2025 Price Increase Proposal. |
| <ul style="list-style-type: none"> • <i>Old Business</i> | <ul style="list-style-type: none"> • B. Truman updated the committee stating all documents have been submitted to the USDA. Awaiting documents from Bouten confirming all subcontractors have been paid. Expecting to receive \$800K next year. • A proposal is being sent to three underwriters to see what can be provided based on the requirements sent. |
| <ul style="list-style-type: none"> • Reports | <ul style="list-style-type: none"> • V. Bodle presented the unaudited August 2024 Financial Statement |
| <ul style="list-style-type: none"> • Adjournment | <ul style="list-style-type: none"> • J. LaPorte adjourned the meeting at 11:25am |



LAKE CHELAN HEALTH

MEETING AGENDA

| | | |
|---|-------------------------------------|-------------------------------------|
| Name of Group: Governance Committee | Date of Meeting: 10/29/24 | Time of Meeting: 2:00 pm |
| Facilitator: Mary Murphy | | Location: Zoom |
| Recorder: Mary Murphy | | |
| Members present: | | |
| X BOC Representative (Mary Murphy) | | X BOC Representative (Lori Withrow) |
| Other: {other attendees or guests} | | |
| Meeting Objectives(s)/Purpose: Develop outline for Commission annual letter to community. | | |

FI – For Information; FD – For Discussion; FM – For Motion

| Time | Agenda Item | Topic/Action |
|--------------------------|---|---|
| 2 pm | 1. Call to Order | |
| 2 pm | 2. Develop outline for Commission Annual Letter | 2. Developed outline for Commission Annual Letter- reflecting the past and looking forward. Recommend to the Board at November 19 meeting. a) 2024 Recap: Thank you to Waz and Simons, In memory Dr Diehl Statistics and Achievements Clinic: New docs etc Tissue Donation Standards of Excellence Award Staff Recognition More? b) What's ahead for 2025: EMS Ground Breaking Specialty Clinic New Services Launch Derm Cardio Speech Therapy Hospitalists Program (Maybe an education point on the difference between a Primary Care Physician and a Hospitalist) c) Give the Gift of Health: Philanthropy is crucial to our ability to grow, adapt, and improve. We rely on the generosity of the community to elevate the health and well-being of Chelan Valley. Please join the Hospital and Foundation and give the gift of health (link to donate). 3. Lori will track Board calendar and policy reviews that will go to Governance Committee. Mary will learn LCH policy template to format policies as recommend to the Board. |
| | 3. Governance Committee anticipated activities next few months. | |
| 2:55pm | 3. Adjournment | |
| Next meeting: TBD | | |



LAKE CHELAN HEALTH

MEETING AGENDA

| | | |
|--|-------------------------------------|-------------------------------------|
| Name of Group: Governance Committee | Date of Meeting: 11/11/24 | Time of Meeting: 8:00 am |
| Facilitator: Mary Murphy | | Location: Zoom |
| Recorder: Mary Murphy | | |
| Members present: | | |
| X BOC Representative (Mary Murphy) | | X BOC Representative (Lori Withrow) |
| Other: {other attendees or guests} | | |
| | | |
| Meeting Objectives(s)/Purpose: Revise specific Board policies to meet new LCH policy guidelines. | | |

FI – For Information; FD – For Discussion; FM – For Motion

| Time | Agenda Item | Topic/Action |
|-------------|---|--|
| 8:00 am | 1. Call to Order | |
| 8:00 am | 2. Revise Board Policies | 2. Revised board policies to meet new LCH Policy Writing Guidelines and Formatting Rules-2024: Board Code of Conduct Public Participation Board bylaws Recommend approval by Board in November 19, 2024 Board meeting. |
| | 3. Clarify Board role in Policy Management System | 3. Recommend November 19, 2024 Board meeting agenda item: Board to define Board role and responsibilities in new Policy Management System. Next meeting: Update CEO and Board Matrix policy |
| 9:53 am | 4. Adjournment | |

Next meeting: TBD



LAKE CHELAN HEALTH

Unaudited Financial Statements

for

For the month ended October 31, 2024

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Balance Sheet
Lake Chelan Health

| | Current Month 10/31/2024 unaudited | Prior Year 12/31/2023 AUDITED | Prior Year 10/31/2023 Unaudited | |
|--|---|--|--|---------------------------------|
| ASSETS: | | | | |
| CASH | 1,855,272 | \$ 858,781 | \$ 285,271 | |
| PATIENT RECEIVABLES | 13,019,524 | 9,941,632 | \$ 9,509,435 | september 2024 was 13.1m |
| LESS: RESERVES FOR ALLOWANCES | <u>(6,970,071)</u> | <u>(5,504,105)</u> | <u>\$ (5,063,407)</u> | |
| NET PATIENT ACCOUNTS RECEIVABLES | 6,049,453 | 4,437,527 | 4,446,028 | |
| ESTIMATED THIRD-PARTY PAYOR SETTLEMENTS | (469,999) | 961,911 | (400,790) | |
| OTHER RECEIVABLES | (117,717) | 157,502 | (301,217) | property taxes are accrued over |
| INVENTORIES | 323,062 | 336,059 | 222,459 | 12 months. Pmts received are |
| PREPAID EXPENSES | 343,096 | 353,146 | 314,659 | currently more than accrued |
| TOTAL CURRENT ASSETS | <u>\$ 7,983,168</u> | <u>\$ 7,104,927</u> | <u>\$ 4,566,411</u> | |
| GENERAL RESERVES | \$ 3,057,080 | 1,541,164 | \$ 2,269,973 | |
| Unrestricted Reserves | \$ 5,336,592 | 3,395,024 | \$ 3,327,380 | |
| Internally Restricted Reserves | \$ 4,139,524 | 4,139,524 | \$ 4,139,524 | |
| 2018 BONDS | 0 | 0 | \$ - | |
| USDA 2023 | 273,600 | 273,600 | \$ 136,800 | |
| Coastal Bank | 50,000 | 0 | \$ - | |
| TOTAL LIMITED USE ASSETS | <u>\$ 12,856,796</u> | <u>\$ 9,349,312</u> | <u>\$ 9,873,676</u> | |
| LAND | \$ 4,133,845 | 4,620,195 | \$ 4,787,901 | |
| LAND IMPROVEMENTS | 0 | 5,222,565 | \$ 5,543,846 | |
| BUILDINGS & IMPROVEMENTS | 10,390 | 986,252 | \$ 986,252 | |
| EQUIPMENT | 9,937,257 | 9,589,003 | \$ 10,592,080 | |
| SOFTWARE | 2,166,371 | 2,146,019 | \$ 2,185,697 | |
| NEW HOSPITAL | 44,763,709 | 44,718,237 | \$ 43,901,486 | |
| LOCUM HOUSING | 635,484 | 0 | \$ - | |
| GASB 87 BUILDINGS AND EQUIPMENT | 1,742,567 | 1,642,567 | \$ - | |
| CONSTRUCTION-IN-PROGRESS - PROJECTS | 600,664 | 67,113 | \$ 700,172 | |
| CONSTRUCTION-IN-PROGRESS - HOSPITAL | 541,692 | 11,490 | \$ 15,378 | |
| GROSS PROPERTY, PLANT, & EQUIPMENT | 64,531,979 | 69,003,440 | 68,712,811 | |
| LESS: ACCUMULATED DEPRECIATION | <u>(14,210,942)</u> | <u>(17,553,759)</u> | <u>\$ (17,881,931)</u> | |
| GASB 87 AMORTIZATION | <u>(534,946)</u> | <u>(522,446)</u> | | |
| NET PROPERTY, PLANT, & EQUIPMENT | <u>\$ 49,786,091</u> | <u>\$ 50,927,235</u> | <u>\$ 50,830,881</u> | |
| DEFERRED ITEMS | \$ 1,538,942 | 1,554,995 | \$ 2,484,008 | |
| TOTAL ASSETS | <u>\$ 72,164,997</u> | <u>\$ 68,936,469</u> | <u>\$ 67,754,976</u> | |
| LIABILITIES: | | | | |
| ACCOUNTS PAYABLE | \$ 489,746 | 979,973 | 1,065,217 | |
| ACCRUED PAYROLL | 600,196 | 685,983 | 439,083 | |
| ACCRUED VACATION/HOLIDAY/SICK PAY | 968,433 | 701,299 | 488,302 | |
| PAYROLL TAXES PAYABLE | 44,565 | 55,324 | 33,414 | |
| ESTIMATED THIRD-PARTY PAYOR SETTLEMENTS | 0 | 0 | 0 | |
| OTHER CURRENT LIABILITIES | 830,785 | 1,077,236 | 1,110,333 | jan 2024 867,440 |
| INTEREST PAYABLE | 458,350 | 93,697 | 467,166 | accr vac/sick |
| CURRENT PORTION OF LTD (BONDS/MORTGAGES) | 1,046,831 | 1,046,831 | 1,001,831 | as of 1/31 793,882 |
| LINE OF CREDIT | 0 | 0 | 0 | as of 10/31 988,433 |
| TOTAL CURRENT LIABILITIES | <u>\$ 4,438,905</u> | <u>\$ 4,640,343</u> | <u>\$ 4,605,346</u> | Int on 2018 bonds |
| CAPITALIZED LEASES | \$ - | \$ - | \$ - | as of 1/31 147,917 |
| 2018 BONDS | \$ 18,709,618 | 18,717,246 | 19,018,771 | as of 10/31 389,342 |
| 2013 BONDS | 4,662,576 | 4,658,279 | 5,022,420 | bond pmt due on 12/1 |
| USDA LOANS | 17,782,270 | 18,136,999 | 18,206,352 | int LTGO bonds |
| LEASES | 2,115,179 | 2,091,679 | 1,827,965 | as of 1/31 37,205 |
| PAID LEAVE - LT PORTION | 200,959 | 200,959 | 304,376 | as of 10/31 89,008 |
| TOTAL LONG TERM LIABILITIES | <u>\$ 43,470,603</u> | <u>\$ 43,805,163</u> | <u>\$ 44,379,884</u> | bond pmt due on 12/1 |
| DEFERRED ITEMS | \$ 4,301,582 | 3,364,205 | 3,922,975 | |
| TOTAL LIABILITIES | <u>\$ 52,211,090</u> | <u>\$ 51,809,711</u> | <u>\$ 52,908,205</u> | |
| FUND BALANCE: | | | | |
| UNRESTRICTED FUND BALANCE | \$ 17,126,755 | 15,036,656 | 15,036,657 | |
| TEMPORARY RESTRICTED FUND BALANCE | \$ - | 0 | 0 | |
| YTD Net Revenue/(Expenses) | <u>2,827,152</u> | <u>2,090,102</u> | <u>(189,885)</u> | |
| TOTAL NET ASSETS | <u>\$ 19,953,907</u> | <u>\$ 17,126,758</u> | <u>\$ 14,846,771</u> | |
| TOTAL LIABILITIES AND NET ASSETS | <u>\$ 72,164,997</u> | <u>\$ 68,936,469</u> | <u>\$ 67,754,976</u> | |

Statement of Revenue and Expense
Lake Chelan Health

For the month ended October 31, 2024

| | CURRENT MONTH | | | | Prior Year 10/31/23 |
|-------------------------------------|-----------------------------|-----------------------------|------------------------------------|--------------|-----------------------------|
| | Actual 10/31/24 | Budget 10/31/24 | Positive (Negative) Variance | | |
| GROSS PATIENT SERVICE REVENUES | | | | | |
| INPATIENT | \$ 663,599 | \$ 5,314,983 | (4,651,384) | -88% | \$ 859,265 |
| OUTPATIENT | 5,145,368 | 0 | 5,145,368 | 0.00% | 4,038,815 |
| TOTAL PATIENT SERVICE REVENUES | <u>5,808,967</u> | <u>5,314,983</u> | <u>493,984</u> | <u>9%</u> | <u>4,898,079</u> |
| DEDUCTIONS FROM REVENUE | | | | | |
| CONTRACTUAL ALLOWANCES | (1,694,470) | (2,104,793) | 410,323 | -19% | (1,968,687) |
| BAD DEBT | (164,570) | 0 | (164,570) | 0.00% | (61,997) |
| CHARITY | (60,110) | 0 | (60,110) | 0.00% | (34,036) |
| TOTAL DEDUCTIONS FROM REVENUES | <u>(1,919,150)</u> 33.0% | <u>(2,104,793)</u> 39.6% | <u>185,643</u> | <u>9%</u> | <u>(2,064,720)</u> 42.2% |
| NET PATIENT SERVICE REVENUES | <u>3,889,817</u> | <u>3,210,190</u> | <u>679,627</u> | <u>21%</u> | <u>2,833,359</u> |
| OTHER OPERATING REVENUES | <u>21,076</u> | <u>19,402</u> | <u>1,674</u> | <u>9%</u> | <u>25,338</u> |
| TOTAL OPERATING REVENUES | <u>3,910,893</u> | <u>3,229,592</u> | <u>681,301</u> | | <u>2,858,697</u> |
| OPERATING EXPENSES | | | | | |
| SALARIES/WAGES | 1,782,931 | 1,693,600 | (89,331) | -5% | 1,510,028 |
| EMPLOYEE BENEFITS | 337,353 | 373,722 | 36,369 | 10% | 298,510 |
| PROFESSIONAL SERVICES | 174,484 | 91,897 | (82,587) | -90% | 79,485 |
| FOOD SUPPLIES | 20,314 | 15,044 | (5,270) | -35% | 17,364 |
| MINOR EQUIPMENT | 8,758 | 17,388 | 8,630 | 50% | 25,816 |
| SUPPLIES | 207,396 | 233,454 | 26,058 | 11% | 228,132 |
| PLANT UTILITIES | 26,977 | 29,741 | 2,764 | 9% | 34,375 |
| PURCHASED SERVICES | 384,263 | 298,636 | (85,627) | -29% | 311,984 |
| REPAIR/MAINTENANCE | 94,687 | 98,597 | 3,910 | 4% | 92,321 |
| PUBLIC RELATIONS/RECRUITM | 4,009 | 11,024 | 7,015 | 64% | 6,629 |
| RENT/LEASES | 87,153 | 40,833 | (46,320) | -113% | 67,553 |
| INSURANCE | 87,789 | 43,700 | (44,089) | -101% | 17,202 |
| LICENSES/TAXES | 24,064 | 19,888 | (4,176) | -21% | 15,554 |
| DUES/SUBSCRIPTIONS/OTHER | 56,156 | 62,327 | 6,171 | 10% | 54,234 |
| TRAVEL/TRAINING | 11,154 | 15,830 | 4,676 | 30% | 10,691 |
| DEPRECIATION | 312,967 | 383,900 | 70,933 | 18% | 336,396 |
| AMORTIZATION | 15,475 | | | | |
| TOTAL OPERATING EXPENSES | <u>3,635,930</u> | <u>3,429,581</u> | <u>(190,874)</u> | <u>-5.6%</u> | <u>3,106,275</u> |
| NET OPERATING SURPLUS (LOSS) | 274,964 | (199,989) | 474,953 | | (247,578) |
| NON-OPERATING REVENUES | 217,283 | 322,084 | (104,801) | | 209,590 |
| TAXES | | | | | |
| INTEREST | | | | | |
| GIFTS & GRANTS | 50,189 | | 50,189 | | |
| OTHER | (862,377) | 0 | (862,377) | | 0 |
| NET INCOME margin | <u>(319,941)</u> -8.2% | <u>122,095</u> 3.8% | <u>(442,036)</u> | | <u>(37,988)</u> -1.3% |
| TOTAL NET INCOME (LOSS) | \$ (319,941) | \$ 122,095 | (442,036) | | \$ (37,988) |

Statement of Revenue and Expense
Lake Chelan Health

For the month ended October 31, 2024

| | YEAR-TO-DATE | | | | Prior Year 10/31/23 |
|--|---------------------|---------------------|------------------------------------|-------|---------------------------|
| | Actual 10/31/24 | Budget 10/31/24 | Positive (Negative) Variance | | |
| GROSS PATIENT SERVICE REVENUES | | | | | |
| INPATIENT | \$ 6,048,767 | \$ 21,417,267 | (15,368,500) | -72% | \$ 5,981,938 |
| OUTPATIENT | 49,225,634 | 30,857,154 | 18,368,480 | 60% | 38,434,379 |
| TOTAL PATIENT SERVICE REVENUES | 55,274,400 | 52,274,421 | 2,999,980 | 6% | 44,416,316 |
| DEDUCTIONS FROM REVENUE | | | | | |
| TOTAL DEDUCTIONS FROM REVENUES | (19,947,815) | (20,701,259) | 753,444 | -4% | (17,126,647) |
| BAD DEBT | (1,303,729) | 0 | (1,303,729) | 0.00% | (839,376) |
| CHARITY | (850,196) | 0 | (850,196) | 0.00% | (367,002) |
| TOTAL DEDUCTIONS FROM REVENUES | (22,101,740) | (20,701,259) | (1,400,481) | -7% | (18,333,025) |
| | 40.0% | 39.6% | | | 41.3% |
| NET PATIENT SERVICE REVENUES | 33,172,661 | 31,573,162 | 1,599,499 | 5% | 26,083,291 |
| OTHER OPERATING REVENUES | 316,623 | 194,020 | 122,603 | 63% | 232,936 |
| TOTAL OPERATING REVENUES | 33,489,283 | 31,767,182 | 1,722,101 | 5% | 26,316,227 |
| OPERATING EXPENSES | | | | | |
| SALARIES/WAGES | 16,476,690 | 16,608,211 | 129,521 | 1% | 13,995,749 |
| EMPLOYEE BENEFITS | 3,238,494 | 3,664,885 | 426,391 | 12% | 2,919,296 |
| PROFESSIONAL SERVICES | 1,514,141 | 918,970 | (595,171) | -65% | 927,251 |
| FOOD SUPPLIES | 186,119 | 150,440 | (35,679) | -24% | 148,789 |
| MINOR EQUIPMENT SUPPLIES | 483,784 | 173,880 | (309,904) | -178% | 129,002 |
| PLANT UTILITIES | 2,122,412 | 2,150,633 | 28,221 | 1% | 1,851,865 |
| PURCHASED SERVICES | 3,246,969 | 2,986,360 | (260,609) | -9% | 3,069,763 |
| REPAIR/MAINTENANCE | 923,327 | 985,970 | 62,643 | 6% | 778,282 |
| PUBLIC RELATIONS/RECRUITMENT | 68,856 | 110,240 | 41,385 | 38% | 87,372 |
| RENT/LEASES | 730,361 | 408,330 | (322,031) | -79% | 556,451 |
| INSURANCE | 436,299 | 437,000 | 701 | 0% | 283,734 |
| LICENSES/TAXES | 220,812 | 198,880 | (21,932) | -11% | 160,985 |
| DUES/SUBSCRIPTIONS/OTHER TRAVEL/TRAINING | 489,777 | 623,270 | 133,493 | 21% | 375,962 |
| DEPRECIATION AMORTIZATION | 3,031,151 | 3,839,000 | 807,849 | 21% | 3,121,690 |
| AMORTIZATION | 154,750 | 0 | (154,750) | | |
| TOTAL OPERATING EXPENSES | 33,762,680 | 33,711,779 | (50,901) | -0.2% | 28,803,954 |
| NET OPERATING SURPLUS (LOSS) | (273,397) | (1,944,597) | 1,671,200 | | (2,487,727) |
| NON-OPERATING REVENUES | | 3,220,836 | | | |
| PROPERTY TAXES FOR OPERATIONS | 2,265,193 | | | | 2,174,661 |
| GRANTS/CONTRIBUTIONS | 791,038 | | | | 272,265 |
| INVESTMENT EARNINGS | 350,356 | | | | 328,975 |
| OTHER EXPENSE | | 0 | 0 | | |
| TAXES FOR DEBT SVC PMTS | 1,062,907 | | | | 1,034,599 |
| INTEREST EXPENSE | (1,505,374) | | | | (1,529,263) |
| GAIN / (LOSS) ON ASSET DISPOSAL | 136,428 | | | | 16,603 |
| NET INCOME margin | 2,827,151 8.4% | 1,276,239 4.0% | 1,550,912 | | (189,886) -0.7% |
| TOTAL NET INCOME (LOSS) | \$ 2,827,151 | \$ 1,276,239 | \$ 1,550,912 | | \$ (189,886) |

unaudited

Patient Statistics Lake Chelan Health

For the month ended October 31, 2024



| Actual vs Budget | Current Month | | STATISTICS | Actual vs Budget | Last Year Month | |
|--------------------------------------|---------------|--------|-------------------------|--------------------------------------|-----------------|--------|
| | 10/31/24 | BUDGET | | | 10/31/23 | BUDGET |
| ■ | 147 | 120 | Total Days Cash on Hand | ■ | 120 | 120 |
| ■ | 61 | 40 | Net AR Days | ■ | 47 | 40 |
| ■ | 0.11 | 1.25 | Debt Coverage Ratio | ■ | 2.06 | 1.25 |
| ■ | 199 | 175 | Payroll FTEs | ■ | 187 | 175 |

| Actual vs Budget | Current Month | | | STATISTICS | Actual vs Budget | Year-To-Date | | |
|-------------------|-----------------|---------------------|--------|------------------|------------------|-----------------|---------------------|--------|
| | Actual 10/31/24 | Prior Year 10/31/23 | BUDGET | | | Actual 10/31/24 | Prior Year 10/31/23 | BUDGET |
| Admissions | | | | | | | | |
| NA | 26 | 17 | NA | medical | NA | 180 | 172 | NA |
| NA | 0 | 0 | NA | surgical | NA | 0 | 0 | NA |
| NA | 2 | 5 | NA | OB | NA | 79 | 84 | NA |
| NA | 28 | 22 | NA | Acute | NA | 259 | 256 | NA |
| NA | 7 | 10 | NA | Swing Bed | NA | 56 | 65 | NA |
| NA | 2 | 5 | NA | Total Deliveries | NA | 79 | 84 | NA |

| Actual vs Budget | Current Month | | | STATISTICS | Actual vs Budget | Year-To-Date | | |
|---------------------------------------|-----------------|---------------------|--------|--------------------|---------------------------------------|-----------------|---------------------|--------|
| | Actual 10/31/24 | Prior Year 10/31/23 | BUDGET | | | Actual 10/31/24 | Prior Year 10/31/23 | BUDGET |
| Patient Days | | | | | | | | |
| ■ | 94 | 48 | 57 | medical | ■ | 531 | 473 | 556 |
| NA | 0 | 0 | NA | surgical | NA | 0 | 0 | NA |
| ■ | 5 | 9 | 18 | OB | ■ | 142 | 161 | 176 |
| ■ | 99 | 57 | 74 | Acute | ■ | 573 | 534 | 732 |
| ■ | 46 | 136 | 59 | Swing Bed | ■ | 581 | 620 | 577 |
| ■ | 5 | 7 | 14 | Total Newborn Days | ■ | 108 | 118 | 134 |
| ■ | 150 | 200 | 147 | TOTAL PATIENT DAYS | ■ | 1362 | 1372 | 1442 |

| Actual vs Budget | Current Month | | | STATISTICS | Actual vs Budget | Year-To-Date | | |
|---------------------------------------|-----------------|---------------------|--------|-----------------|--------------------------------------|-----------------|---------------------|--------|
| | Actual 10/31/24 | Prior Year 10/31/23 | BUDGET | | | Actual 10/31/24 | Prior Year 10/31/23 | BUDGET |
| Average Length of Stay | | | | | | | | |
| ■ | 3.5 | 2.6 | | Total Inpatient | ■ | 2.6 | 2.5 | |
| ■ | 6.6 | 13.6 | | Swing Bed | ■ | 10.4 | 9.5 | |

| Actual vs Budget | Current Month | | | STATISTICS | Actual vs Budget | Year-To-Date | | |
|------------------------------------|-----------------|---------------------|--------|-----------------|------------------|-----------------|---------------------|--------|
| | Actual 10/31/24 | Prior Year 10/31/23 | BUDGET | | | Actual 10/31/24 | Prior Year 10/31/23 | BUDGET |
| Avg Daily Census - Hospital | | | | | | | | |
| | 3.2 | 1.8 | | Total Inpatient | | 2.2 | 2.1 | |
| | 1.5 | 4.4 | | Swing Bed | | 1.9 | 2.0 | |
| | 4.7 | 6.2 | | Total | | 4.1 | 4.1 | |

| | | | | | | | | |
|---------------------------------------|------|------|------|---|---------------------------------------|-------|-------|-------|
| ■ | 524 | 524 | 634 | ED Visits | ■ | 5825 | 5759 | 6239 |
| ■ | 66 | 61 | 86 | Surgeries | ■ | 652 | 476 | 842 |
| ■ | 1350 | 1235 | 1119 | Imaging Procedures | ■ | 13175 | 11046 | 11005 |
| ■ | 3425 | 2785 | 3593 | Lab Tests | ■ | 32385 | 30490 | 35341 |
| ■ | 639 | 722 | 750 | Rehab Visits | ■ | 6914 | 5875 | 7372 |
| ■ | 134 | 111 | 136 | EMS Runs | ■ | 1381 | 1277 | 1336 |
| ■ | 734 | 806 | 1009 | Total Clinic Visits | ■ | 8386 | 7958 | 2993 |
| ■ | 100 | 168 | 74 | Specialty | ■ | 898 | 905 | 218 |
| | 157 | 109 | | Primary care | | 1570 | 1364 | 0 |
| ■ | 477 | 488 | 935 | Express Care (budget shows primary and express) | ■ | 5918 | 5689 | 2775 |
| | 0 | 22 | | working days | | 195 | 216 | |

Note #1 Contractuals

Contractuals do not include reimbursement that will happen when the cost report is filed.

AR decreased \$90k from September to October.

Charity care was \$60,110 for October. Bad Debt was \$164,570.

Charity and Bad Debt are 3.94% of gross charges ytd compared to 2.62% this same time last year and 1.96% in October 2023.

We received our 2023 cost report settlement in October. We recognized \$306k as we received more than was originally booked.

Note #2 PROFESSIONAL SERVICES

Radiology Pro Fees budget is \$463k vs expense of \$519k

UW Residency Program budget is \$167k vs expense of \$171k

ED Pro Fees budget \$125k vs expense of \$506k

Note #3 MINOR EQUIPMENT AND SUPPLIES

Surgery - Budget \$23k, Actual \$341k Stryker Orthopaedics \$194k for instruments for total knees and hips (this expense was not known at budget time) \$5k workpointe for desks

Note #4 SUPPLIES & FOOD

Revenue is over budget (\$3m). Complexity of surgeries = higher supply costs.

Food - Supplies is over \$36k and revenue is over \$29k

Note #5 PURCHASED SERVICES

HR is over budget \$25k, Radiology is over \$44k, Express Clinic is over \$61k

Med Surg \$116k and Surgery \$115k are also over due to the use of travelers. Lab is (\$226k) under budget.)

Anesthesia is over budget by \$121k due to the use of contracted employees for anesthesia and pain management.

Note #6 UTILITIES

LCH is still occupying the old hospital building. Winter utility bills were higher. PUD for old hospital was \$26,065 and water/garbage was \$35,092 through September. Roots does help offset some of these costs. The hospital sale is complete and costs have reduced.

Note #7 RENTS/LEASES

Chelan Business Center lease \$4,920 per month (49,200 ytd) not budgeted for Ortho and Gen Surg

Acute Care budget \$23k, expense \$74k (carefusion, pyxis, kelly copier)

The reclass to GASB 87 has not been done in 2024. The budget reflects the reclass.

This is why depreciation and amortization are under budget

Note #8 LICENSES/TAXES

Expense is higher due to increase in revenues and personal property taxes paid for leased assets

Note #9 NON OPERATING REVENUE

The sale of the old hospital resulted in a net gain of \$996,288

There were assets that had not been fully depreciated

Per GASB we are to recognize the gain over 24 months.

Current gain recognized is \$133,910.95

For the month ended October 31, 2024

| 9/30/2024 | GL ACCOUNT # | ACCT DESCRIPTION | 10/31/2024 | EXPLANATION | |
|--------------|--------------|--|--------------|--|--|
| \$100,416 | 10002000 | General Fund Cash in Bank (Wheatland) | \$287,246 | \$185,830 | |
| | | | | \$5,095,699 deposits dsh medicaid cost report (\$12,967) tsys/payplus fees (\$380) fees mckesson/cardinal (\$21) fees and interest rebates \$3,499 café sales (\$4,900,000) transfer to county | |
| \$980,422 | 10004000 | General Fund Cash w/ Treasurer | \$2,018,241 | \$1,037,819 | |
| | | | | (\$2,245,586) AP (\$2,163) Voids \$2,247,749 warrants issued (\$2,216,919) warrants redeemed \$4,900,000 Bank Transfers from 10002000 \$0 Bank Transfer to/from 10106000 (\$88,992) Bank Transfer for USDA pmt \$0 Bank Transfer to USDA reserve (\$1,856,345) Payroll/Benefits (\$15,261) B&O taxes \$315,287 Property Taxes \$50 Leasehold Taxes & Misc Taxes Fees | |
| \$17,579 | 10009000 | cash clearing | \$1,780 | (\$15,799) | pmts posted as remits received |
| (\$423,329) | 20070000 | warrants outstanding | (\$451,995) | (\$28,667) | |
| | | | | (\$1,090,256) remits (payroll/benefits/b&O) \$2,216,919 warrants redeemed (\$2,247,749) warrants issued ap \$1,090,256 remits redeemed \$2,163 voids | |
| \$1,471,030 | 10106000 | AMB RESERVE | \$2,049,985 | \$578,955 | |
| | | | | \$0 transfer to reserves transfer from reserves \$578,854 property taxes \$92 leasehold taxes \$9 interest | |
| \$586,456 | 10910000 | 2018 GO BOND | \$1,007,064 | \$420,608 | |
| | | | | \$420,607 property taxes \$44 bond pmt | |
| \$31 | 10911000 | 2018 CASH BOND | \$31 | \$0 | interest |
| \$213,600 | 10916000 | | \$213,600 | \$0 | funded year 2 per LOC |
| \$60,000 | 10917000 | | \$60,000 | \$0 | funded year 2 per LOC |
| \$273,600 | | | \$273,600 | | |
| \$0 | 10915000 | CASH/TREAS LTGO BOND | \$0 | \$0 | paid bond interest |
| \$9,443,401 | 10760000 | RESERVES | \$9,476,116 | \$32,715 | |
| | | | | \$32,715 interest | |
| | 10764000 | COASTAL BANK | \$50,000 | \$50,000 | |
| \$12,449,606 | | | \$14,712,089 | \$2,212,462 | 6 |
| | | | | | Days of Cash on Hand |
| | | | | | Cash: |
| | | | | | current assets 1,855,272 |
| | | | | | unrestricted reserves 3,057,080 |
| | | | | | unrestricted reserves 5,336,592 |
| | | | | | 10,248,944 |
| | | | | | USDA reserve 323,600 |
| | | | | | restricted reserves - pending covid ca 4,139,524 |
| | | | | | 4,463,124 |
| | | | | | Expenses: |
| | | | | | total YTD 33,762,680 |
| | | | | | less depreciation -3,185,901 |
| | | | | | 30,576,779 |
| | | | | | number of days YTD 4,167,506 |
| | | | | | Days of Cash on Hand 102.2 |
| | | | | | Restricted Days Cash on Hand 44.5 |
| | | | | | Total Days Cash on Hand 146.8 |

PUBLIC HOSPITAL DISTRICT NO. 2
Lake Chelan Health
Chelan County, WA

RESOLUTION No. 2024-11
Capital Expenditure

A RESOLUTION of the Board of Commissioners of Public Hospital District No. 2, Chelan County, Washington (the 'District'), expressing official intent regarding certain capital expenditures to be reimbursed with proceeds of an obligation.

RESOLVED, by the Board of Commissioners (the "Board") of Chelan County Public Hospital District No. 2 (the "District"), as follows:

WHEREAS, the District has developed a list of capital projects (the "Projects") described in Exhibit A hereto;

WHEREAS, all or a portion of the expenditures relating to the Projects (the "Expenditures") (i) have been paid within the sixty days prior to the passage of this resolution or (ii) will be paid on or after the passage of this resolution; and

WHEREAS, the District reasonably expects to reimburse itself for the Expenditures with the proceeds of an obligation the interest on which will be excluded from the gross income of the owner or owners of such obligation;

NOW, THEREFORE, it is hereby DECLARED and ORDERED, as follows:

Section 1. The District reasonably expects to reimburse all or a portion of the Expenditures with the proceeds of an obligation the interest on which will be excluded from the gross income of the owner or owners of such obligation.

Section 2. The maximum principal amount of the obligations expected to be issued for the Project is \$10,000,000.

Section 3. This resolution is a declaration of official intent to reimburse expenditures pursuant to Treasury Regulations Section 1.150-2.

Section 4. All actions of the officers, agents and employees of the District that are in conformity with the purposes and intent of this resolution, whether taken before or after the adoption hereof, are hereby ratified, confirmed and adopted.

Section 5. This resolution shall be in full force and effect immediately upon its adoption.

* * * * *

CERTIFICATION

This is to certify that the foregoing is a true copy of a resolution, as the resolution appears on the minute books of the District, adopted by the Board of Commissioners of Chelan County Public Hospital District No. 2 at a meeting of said Board held on November 19, 2024, which was called and held pursuant to and with all notice required by law and the Bylaws of the District and at which meeting a quorum was initially present and a majority of which was acting throughout.

ADOPTED and APPROVED by the Board of Commissioners of the Chelan County Public Hospital District No. 2, at a regular open public meeting that was held on this 19th Day of November 2024, where a quorum was present.

CHAIRPERSON OF THE BOARD

SECRETARY

VICE CHAIRPERSON

MEMBER

MEMBER

CEO

EXHIBIT A

DESCRIPTION OF PROJECT

The Project includes constructing, renovating, improving, and/or equipping certain health care facilities operated by the District, consisting of the following: (a) the purchase of equipment for an acute care hospital, an emergency medical center and a specialty clinic facility; (b) the construction of a new emergency medical center; and (c) the construction of leasehold improvements to, and equipment for, a new specialty clinic, all located in or to be located in the City of Chelan, Washington (the "Project"). The total cost of the Project is estimated to be approximately, but not to exceed, \$10,000,000 based on information currently available to the District.

DRAFT



CEO Board Report (as of 11/13/2024)

People:

- We have signed three new lead hospitalists (all internists) and three backups. Some of them will be in attendance for an onsite visit on 12/4.
- Dr. Goeser and PA Guadalupe Martinez-Vera are accepting new patients at the clinic and often have same day access to appointments! They have been receiving very positive feedback from community members.
- We have a signed offer for a new pediatrician with an expected start of summer '25.
- Continue to work on filling open positions for MA, CNA, nursing (surgical, OB, ED), PT/OT, Plant engineer, MRI and Lab Tech, patient access, family practice provider, internist (both MD/DO and APP), and our business office. Go to www.lakechelanhealth.org/careers/ to see what is available and apply and see which positions have additional incentives!

Community:

- New Express Care hours went into effect on 11/4 (M-F 7-6pm and Saturday 7-6, closed for lunch only on Saturday) and has been very well received. Seeing substantial volume in the early mornings.
- A new dermatology service line begins 11/15 with the next dermatology day scheduled for 12/9.
- Interviewed our new Office of Insurance Commissioner, Sen. Patty Kuderer with a group of CEO's and WSHA representatives. I discussed challenges we would like to see addressed and heard her ideas for when she takes office.
- Happy to participate in Ruby U on 11/14 focusing on Around the Clock Care and Emergency Services.

Quality:

- Patient satisfaction score (known as the net promotor score) is running at 88.2 which is quite high compared to our historical performance which averages around 75. The average net promotor score industry wide is between 38 and 58 depending on specialty.
- Met with my peers at the Rural Health Collaborative and Enterprise meetings in Centralia this past week. Great discussion around GPO's, Medicare Advantage, and payer negotiations.

Financial:

- No financial statements were ready at the time of this report. However, it does appear that we exceeded gross revenue expectations by roughly \$400K.
- LCH has contracted with Wellcare/Allwell Medicare Advantage plans and are therefore in network which gives patients an option for an in-network plan with Health Alliance departing the area. Contact George Rohrich, Statewide Health Insurance Benefits Advisor (SHIBA), if you would like help with Medicare enrollment (509-726-6052).

Building for the Future:

- We have started the process of vetting new EMR vendors. We received our first proposal from Epic and will be considering at least two more
- Met with a group wanting to help bring Ophthalmology to the hospital part time (mostly cataract surgery).
- The specialty clinic build will physically start on 11/18!
- Our EMS build planning is accelerating. You will see a presentation from Forte and Graham Construction during board.

Proposed 2025 Board Meeting Dates

| Date | Meeting Type | Education Assignment | Notes |
|-------------|-----------------------|-----------------------------|----------------------------------|
| Jan 13 | Special Board Meeting | | |
| Jan 28 | Regular Board Meeting | J. LaPorte | |
| Feb 10 | Special Board Meeting | | |
| Feb 25 | Regular Board Meeting | M. Murphy | |
| Mar 10 | Special Board Meeting | | |
| Mar 25 | Regular Board Meeting | M. Murphy | |
| Apr 14 | Special Board Meeting | | |
| Apr 29 | Regular Board Meeting | L. Withrow | |
| May 12 | Special Board Meeting | | |
| May 27 | Regular Board Meeting | L. Withrow | |
| Jun 9 | Special Board Meeting | | |
| Jun 24 | Regular Board Meeting | J. LaPorte | |
| Jul 14 | Special Board Meeting | | |
| Jul 29 | Regular Board Meeting | D. Gibson | |
| Aug 11 | Special Board Meeting | | |
| Aug 26 | Regular Board Meeting | L. England | |
| Sep 8 | Special Board Meeting | | |
| Sep 30 | Regular Board Meeting | D. Gibson | |
| Oct 13 | Special Board Meeting | | |
| Oct 28 | Regular Board Meeting | L. England | |
| Nov 10 | Special Board Meeting | | Budget Approval (if needed) |
| Nov 25 | Regular Board Meeting | | Thanksgiving Week |
| Dec 8 | Special Board Meeting | | |
| Dec 30 | Regular Board Meeting | | Week following Christmas (Thurs) |

Status **Pending** PolicyStat ID **17012265**



Origination 11/2/2023
Last Approved N/A
Effective 1 Days After Approval
Last Revised 11/6/2024
Next Review 1 year after approval

Owner Patti Peters:
Business Office/
Patient Access/
HIMS Manager
Area Patient Financial Services

Charity Care Policy

~~CHARITY CARE / FINANCIAL ASSISTANCE FOR THE UNINSURED AND UNDERINSURED~~

~~PURPOSE~~

~~This Financial Assistance Policy is intended to ensure that residents of Washington State who are at or near the federal~~

~~poverty level receive Appropriate Hospital-Based Medical Services and Appropriate Non-Hospital-Based Medical~~

~~Services at a cost that is based on their ability to pay for services up to and including care without charge. Financial~~

~~Assistance will be granted to all eligible persons regardless of age, race, color, religion, sex, sexual orientation or~~

~~national origin in accordance with WAC Chapter 246-453 and RCW 70.170.~~

~~The written policy includes: (a) eligibility criteria for Financial Assistance, (b) describes the basis for calculating amounts~~

~~charged to patients eligible Financial Assistance, (c) describes the method by which patients may apply for Financial~~

~~Assistance and (d) describes how the District will publicize the policy with the community services by the District.~~

~~POLICY~~

~~Financial Assistance may cover all appropriate hospital-based medical services, received in the hospital~~

~~inpatient or~~

~~outpatient/clinic setting. Services not qualifying under financial assistance may include elective or experimental~~

~~procedures or separately billable professional services provided by the hospital's medical staff. Non-residents of~~

~~Washington State are eligible for Financial Assistance consistent with Washington Administrative Code 246-453, which~~

~~includes emergent, non-scheduled services only. Financial Assistance will not be denied based on immigration status.~~

~~POLICY AVAILABILITY~~

~~Lake Chelan Health is required to provide notice of its Financial Assistance program and will make a good faith effort to~~

~~provide every patient with information regarding its availability. Lake Chelan Health (inpatient and hospital-based~~

~~outpatient clinics/facilities) will post signs in Patient Access, Business Office/Financial Counseling, Emergency~~

~~Department and Outpatient Registration that will notify the public of the Financial Assistance Policy. Eligibility for~~

~~Financial Assistance requires that patients must fulfill all requirements and expectations as outlined in the Financial~~

~~Assistance Policy. This Financial Assistance Policy and applications for Financial Assistance are available in any~~

~~language spoken by more than five percent of the population or 1,000 individuals in the applicable hospital's service~~

~~area. Additionally, interpreter services will be made available for other non-English speaking or limited-English speaking~~

~~or other patients who cannot read or understand the written application materials~~

~~1. ELIGIBILITY CRITERIA~~

PURPOSE

This Financial Assistance Policy is intended to ensure that residents of Washington State who are at or near the federal poverty level receive Appropriate Hospital-Based Medical Services and Appropriate Non-Hospital-Based Medical Services at a cost that is based on their ability to pay for services up to and including care without charge. Financial Assistance will be granted to all eligible persons regardless of age, race, color, religion, sex, sexual orientation or national origin in accordance with WAC Chapter

246-453 and RCW 70.170.

The written policy includes:

1. eligibility criteria for Financial Assistance,
2. describes the basis for calculating amounts charged to patients eligible Financial Assistance,
3. describes the method by which patients may apply for Financial Assistance and
4. describe how the District will publicize the policy with the community services by the District.

POLICY STATEMENT

Financial Assistance may cover all appropriate hospital-based medical services, received in the hospital inpatient or outpatient/clinic setting. Services not qualifying under financial assistance may include elective or experimental procedures or separately billable professional services provided by the hospital's medical staff. Non-residents of Washington State are eligible for Financial Assistance consistent with Washington Administrative Code 246-453, which includes emergent, non-scheduled services only. Financial Assistance will not be denied based on immigration status.

SCOPE

Lake Chelan Health (LCH) is required to provide notice of its Financial Assistance program and will make a good faith effort to provide every patient with information regarding its availability. Lake Chelan Health (inpatient and hospital-based outpatient clinics/facilities) will post signs in Patient Access, Business Office/Financial Counseling, Emergency Department and Outpatient Registration that will notify the public of the Financial Assistance Policy. Eligibility for Financial Assistance requires that patients must fulfill all requirements and expectations as outlined in the Financial Assistance Policy. This Financial Assistance Policy and applications for Financial Assistance are available in any language spoken by more than five percent of the population or 1,000 individuals in the applicable hospital's service area. Additionally, interpreter services will be made available for other non-English speaking or limited-English speaking or other patients who cannot read or understand the written application materials

ROLES & RESPONSIBILITIES

All LCH staff can provide a charity care application for LCH patients. The financial counselor will receive the charity care application and supporting documentation to support the determination of a discounted rate based on the FPL LCH accounting department and will review and validate the charity care application. Upon approval, the accounting department will provide the requested adjustment to the business office manager for the appropriate discount

DEFINITIONS

Residence and Scope of Services:

A person is not a Washington State resident and is not eligible for Financial Assistance when that person enters Washington State solely for the purpose of seeking medical care. Refugees, asylees, and those

seeking asylum are exempt from the Washington State residency requirement for Financial Assistance eligibility. Also exempt from the Washington State residency requirement are those patients who have an Emergency Medical Condition. Financial Assistance will not be denied based on immigration status. Exceptions to residence and scope of services requirements outlined in this paragraph may be made only in extraordinary circumstances and with the approval of the Lake Chelan Health Chief Financial Officer or designee. While not required by federal or state law, eligibility for Financial Assistance will be extended to individuals who receive Appropriate Non-Hospital Based Medical Services and meet the above criteria Financial Assistance: Medically necessary hospital health care rendered to indigent persons when Third-Party Coverage, if any, has been exhausted, to the extent that the persons are unable to pay for the care or to pay deductible or coinsurance amounts required by a third-party payer based on the criteria in this policy. Persons who have exhausted any third-party coverage, including Medicare and Medicaid, and whose income is at or below 300% of the federal poverty standards, adjusted for family size or is otherwise not sufficient to enable them to pay for the care or to pay deductibles or coinsurance amounts required by a third-party payer, may be eligible for Financial Assistance under this policy. Appropriate Hospital-Based Medical Services: Those Lake Chelan Health hospital services which are reasonably calculated to diagnose, correct, cure, alleviate, or prevent the worsening of conditions that endanger life, or cause suffering or pain, or result in illness or infirmity, or threaten to cause or aggravate a handicap, or cause physical deformity or malfunction, and there is no other equally effective, more conservative or substantially less costly course of treatment where appropriate, no treatment at all. Appropriate Non-Hospital Based Medical Services: Those services rendered at the clinic offices by LCH Members, which are reasonably calculated to diagnose, correct, cure, alleviate, or prevent the worsening of conditions that endanger life, or cause suffering or pain, or result in illness or infirmity, or threaten to cause or aggravate a handicap, or cause physical deformity or malfunction, and there is no other equally effective, more conservative or substantially less costly course of treatment available or suitable for the person requesting the service. A course of treatment may include mere observation or, where appropriate, no treatment at all. For purposes of this Financial Assistance Policy, preventive care services may be considered "Appropriate Non-Hospital-Based Medical Services". LCH Members: For purposes of this policy, a physician or other qualified healthcare professional who has executed a practice agreement with LCH, or has otherwise reassigned their services to LCH under a contractual arrangement, and provides services at approved LCH sites of practice.

PROCEDURE

Application

When a patient wishes to apply for Financial Assistance, the patient shall complete a Confidential Financial Information (CFI) Form (Attachment B) and provide necessary and reasonable supplementary financial documentation to support the entries on the CFI. Lake Chelan Health will make an initial determination of a patient's Financial Assistance status at the time of admission or as soon as possible following the initiation of services to the patient. Financial Assistance application procedures shall not place an unreasonable burden upon the patient, taking into account any barriers which may hinder the patient's capability of complying with the application procedures. Screening for eligibility for Medicaid or other relevant public assistance benefits will be coordinated through the Patient Access Department, Discharge Planning/Outcome Management (if not nursing home placement) or through Patient Financial

Services. Any one of the following documents shall be considered sufficient evidence upon which to base the final determination of Financial Assistance eligibility:

1. "W-2" withholding statement;
2. Current pay stubs (3 months);
3. Bank statements (3 months);
4. Last year's income tax return, including schedules, if applicable;
5. Written, signed statements from employers or others (letter of support) stating your current financial situation
6. and circumstances if you have no proof of income;
7. Forms approving or denying eligibility for Medicaid and/or state funded medical assistance;
8. Forms approving or denying unemployment compensation; or written statements from employers or welfare agencies.

~~Initial Determination~~**Initial Determination**

~~For the purpose of reaching an initial determination of eligibility, the District shall rely upon information provided orally or~~

~~in written form for Financial Assistance as outlined in the Financial Assistance Application Form Instructions. The~~

~~District may require the responsible party to sign a statement attesting to the accuracy of the information provided to the~~

~~District for purposes of the initial determination of eligibility.~~

~~Patients will be screened for other forms of coverage such as Medicaid and Health Benefits Exchange eligibility.~~

~~This application, along with full disclosure of their financial status with supporting documentation, will be considered in~~

~~the final determination of eligibility.~~

~~who do not have applicable Third-Party Coverage to assess whether such patients/families may be eligible for Medicaid~~

~~and/or health care coverage through Washington's Health Benefit Exchange (RCW 43.71). Staff will provide assistance~~

~~with Medicaid and Qualified Health Plan applications and including but not limited to providing the patient/family with~~

~~information about the application process, assisting patients through the application process, providing necessary forms~~

~~that must be completed, and/or connecting the patient/family with other agencies or resources who can~~

assist the

~~patient/family in completing such applications. Lake Chelan Health will not initiate collection efforts until an initial~~

~~determination of Financial Assistance eligibility status is made. Where Lake Chelan Health initially determines that a~~

~~patient may be eligible for Financial Assistance, any and all extraordinary collection actions (including civil actions,~~

~~garnishments, and reports to collections or credit agencies) shall cease pending a final determination of Financial~~

~~Assistance eligibility. However, as set forth in WAC 246-453-020 the failure of a patient or responsible party to~~

~~reasonably complete Financial Assistance application procedures under this policy shall be sufficient grounds for Lake~~

~~Chelan Health to initiate collection efforts directed at the patient. Accordingly, for purposes of this policy, a patient or~~

~~responsible party has failed to reasonably complete financial assistance application procedures when the patient or~~

~~responsible party does not submit application materials within 15 business days of the patient's or responsible party's~~

~~receipt of the materials. Any collection efforts will be halted if the patient or responsible party reengages in the~~

~~application process. Lake Chelan health excludes assets in the calculation of determining eligibility for financial~~

~~assistance.~~

For the purpose of reaching an initial determination of eligibility, the District shall rely upon information provided orally or in written form for Financial Assistance as outlined in the Financial Assistance Application Form Instructions. The District may require the responsible party to sign a statement attesting to the accuracy of the information provided to the District for purposes of the initial determination of eligibility. Patients will be screened for other forms of coverage such as Medicaid and Health Benefits Exchange eligibility. This application, along with full disclosure of their financial status with supporting documentation, will be considered in the final determination of eligibility. who do not have applicable Third-Party Coverage to assess whether such patients/families may be eligible for Medicaid and/or health care coverage through Washington's Health Benefit Exchange (RCW 43.71). Staff will provide assistance with Medicaid and Qualified Health Plan applications and including but not limited to providing the patient/family with information about the application process, assisting patients through the application process, providing necessary forms that must be completed, and/or connecting

the patient/family with other agencies or resources who can assist the patient/family in completing such applications. Lake Chelan Health will not initiate collection efforts until an initial determination of Financial Assistance eligibility status is made. Where Lake Chelan Health initially determines that a patient may be eligible for Financial Assistance, any and all extraordinary collection actions (including civil actions, garnishments, and reports to collections or credit agencies) shall cease pending a final determination of Financial Assistance eligibility. However, as set forth in WAC 246-453-020 the failure of a patient or responsible party to reasonably complete Financial Assistance application procedures under this policy shall be sufficient grounds for Lake Chelan Health to initiate collection efforts directed at the patient. Accordingly, for purposes of this policy, a patient or responsible party has failed to reasonably complete financial assistance application procedures when the patient or responsible party does not submit application materials within 15 business days of the patient's or responsible party's receipt of the materials. Any collection efforts will be halted if the patient or responsible party reengages in the application process. Lake Chelan health excludes assets in the calculation of determining eligibility for financial assistance.

~~Third-Party Coverage~~ Third-Party Coverage

Financial Assistance is generally secondary to all other third-party coverage resources available to the patient.

This includes:

1. Group or individual medical plans.
2. Workers' compensation programs.
3. Medicare, Medicaid or other medical assistance programs.
4. Other state, federal or military programs.
5. Third-party liability situations. (e.g.: auto accidents or personal injuries).
6. Tribal health benefits.
7. Health care sharing ministry as defined in 26 U.S.C. Sec. 5000A.
8. Other situations in which another person or entity may have legal responsibility to pay for the costs of medical services.

~~services.~~

~~The medically indigent patient will be granted Financial Assistance regardless of race, color, sex, religion, age, national~~

~~origin, or immigration status. In the event that the responsible party's identification as an indigent person is obvious to~~

~~District personnel, the District is not obligated to establish the exact income level or request the documentation~~

~~specified in the financial assistance application. Such individuals are determined to have presumptive eligibility (e.g.,~~

have qualified under the state Medicaid or Apple Health program).

The medically indigent patient will be granted Financial Assistance regardless of race, color, sex, religion, age, national origin, or immigration status. In the event that the responsible party's identification as an indigent person is obvious to District personnel, the District is not obligated to establish the exact income level or request the documentation specified in the financial assistance application. Such individuals are determined to have presumptive eligibility (e.g., have qualified under the state Medicaid or Apple Health program).

In those situations where appropriate primary payment sources are not available, patients shall be considered for Financial Assistance under this District policy based on the following criteria consistent with requirements of WAC 246453-040.

~~Financial Assistance under this District policy based on the following criteria consistent with requirements of WAC~~

~~246453-040.~~

~~Income~~**Income**

~~By policy, persons whose income is equal to or below 300% of the federal poverty standard may be eligible to receive~~

~~Financial Assistance. Lake Chelan Health will consider all sources of income in establishing income eligibility for~~

~~Financial Assistance. Income includes: total cash receipts before taxes derived from wages and salaries; welfare~~

~~payments; Social Security payments; strike benefits; unemployment or disability benefits; child support; alimony; and~~

~~net earnings from business and investment activities paid to the individual patient/guarantor.~~

~~gross family income is at or below 100% of the current federal poverty guidelines (consistent with WAC code~~

~~246453-050. These patients shall receive a 100% adjustment on their patient balance.~~

~~2. A sliding fee scale shall be used to determine the amount which shall be written off for patients with incomes~~

~~between 101% and 300% of the current federal poverty level. All resources of the family as defined by WAC~~

~~246453-050 are considered in determining the applicability of the sliding fee scale in Attachment A.~~

~~3. The sliding fee scale shall take into account the potential necessity for allowing the responsible party to satisfy the~~

~~maximum amount of charges for which the responsible party will be expected to provide payment over a~~

reasonable

period of time, without interest or late fees. In determining the maximum amount of charges, the District calculates

this by using the Amounts Generally Billed (AGB) look-back methodology. For the current year, the District's AGB

percentage is listed on Attachment A (enclosed). No individual qualifying under the Financial Assistance Policy

shall be charged more than the AGB for emergency care of other medically necessary services. See 26 USC

§501(r)(5)(A)

By policy, persons whose income is equal to or below 201% of the federal poverty standard may be eligible to receive Financial Assistance. Lake Chelan Health will consider all sources of income in establishing income eligibility for Financial Assistance. Income includes total cash receipts before taxes derived from wages and salaries; welfare payments; Social Security payments; strike benefits; unemployment or disability benefits; child support; alimony; and net earnings from business and investment activities paid to the individual patient/guarantor. gross family income is at or below 100% of the current federal poverty guidelines (consistent with WAC code 246453-050. These patients shall receive a 100% adjustment on their patient balance.

A sliding fee scale shall be used to determine the amount which shall be written off for patients with incomes at or below 200% of the current federal poverty level. All resources of the family as defined by WAC 246453-050 are considered in determining the applicability of the sliding fee scale in Attachment A.

The sliding fee scale shall take into account the potential necessity for allowing the responsible party to satisfy the maximum amount of charges for which the responsible party will be expected to provide payment over a reasonable period of time, without interest or late fees. In determining the maximum amount of charges, the District calculates this by using the Amounts Generally Billed (AGB) look-back methodology. For the current year, the District's AGB percentage is listed on Attachment A (enclosed). No individual qualifying under the Financial Assistance Policy shall be charged more than the AGB for emergency care of other medically necessary services. See 26 USC §501(r)(5)(A).

~~Catastrophic Financial Assistance~~**Catastrophic Financial Assistance**

~~The District may also write off, as Financial Assistance, amounts for patients with family income in excess of 400% of~~

~~the federal poverty level or at a higher percentage for those above 100% of the federal poverty guidelines, when~~

~~circumstances~~

~~indicate severe financial hardship or personal loss. This will be done only upon recommendation by~~

the business office manager with adequate justification and only upon approval by the Chief Financial Officer. These

adjustments shall be included in the Chief Financial Officer's regular financial assistance report to the Board of

Commissioners.

DEFINITIONS

Residence and Scope of Services:

A person is not a Washington State resident and is not eligible for Financial Assistance when that person enters

Washington State solely for the purpose of seeking medical care. Refugees, asylees, and those seeking asylum are

exempt from the Washington State residency requirement for Financial Assistance eligibility. Also exempt from the

Washington State residency requirement are those patients who have an Emergency Medical Condition. Financial

Assistance will not be denied based on immigration status. Exceptions to residence and scope of services requirements

outlined in this paragraph may be made only in extraordinary circumstances and with the approval of the Lake Chelan

Health Chief Financial Officer or designee. While not required by federal or state law, eligibility for Financial Assistance

will be extended to individuals who receive Appropriate Non-Hospital Based Medical Services and meet the above

criteria

Financial Assistance: Medically necessary hospital health care rendered to indigent persons when Third-Party

Coverage, if any, has been exhausted, to the extent that the persons are unable to pay for the care or to pay deductible

or coinsurance amounts required by a third-party payer based on the criteria in this policy. Persons who have exhausted

any third-party coverage, including Medicare and Medicaid, and whose income is equal to or below 300% of the federal

poverty standards, adjusted for family size or is otherwise not sufficient to enable them to pay for the care or to pay

~~deductibles or coinsurance amounts required by a third-party payer, may be eligible for Financial Assistance under this~~

~~policy.~~

~~Appropriate Hospital-Based Medical Services: Those Lake Chelan Health hospital services which are reasonably~~

~~calculated to diagnose, correct, cure, alleviate, or prevent the worsening of conditions that endanger life, or cause~~

~~suffering or pain, or result in illness or infirmity, or threaten to cause or aggravate a handicap, or cause physical deformity~~

~~or malfunction, and there is no other equally effective, more conservative or substantially less costly course of treatment~~

~~where appropriate, no treatment at all.~~

~~Appropriate Non-Hospital Based Medical Services: Those services rendered at the clinic offices by LCH Members.~~

~~which are reasonably calculated to diagnose, correct, cure, alleviate, or prevent the worsening of conditions that~~

~~endanger life, or cause suffering or pain, or result in illness or infirmity, or threaten to cause or aggravate a handicap,~~

~~or cause physical deformity or malfunction, and there is no other equally effective, more conservative or substantially~~

~~less costly course of treatment available or suitable for the person requesting the service. A course of treatment may~~

~~include mere observation or, where appropriate, no treatment at all. For purposes of this Financial Assistance Policy,~~

~~preventive care services may be considered "Appropriate Non-Hospital Based Medical Services".~~

~~LCH Members: For purposes of this policy, a physician or other qualified healthcare professional who has executed a~~

~~practice agreement with LCH, or has otherwise reassigned their services to LCH under a contractual arrangement, and~~

~~provides services at approved LCH sites of practice.~~

2) APPLICATION

~~When a patient wishes to apply for Financial Assistance, the patient shall complete a Confidential Financial Information~~

~~(CFI) Form (Attachment B) and provide necessary and reasonable supplementary financial documentation to support~~

~~the entries on the CFI. Lake Chelan Health will make an initial determination of a patient's Financial Assistance status~~

~~at the time of admission or as soon as possible following the initiation of services to the patient. Financial Assistance~~

~~application procedures shall not place an unreasonable burden upon the patient, taking into account any barriers which~~

~~may hinder the patient's capability of complying with the application procedures. Screening for eligibility for Medicaid or~~

~~other relevant public assistance benefits will be coordinated through the Patient Access Department, Discharge~~

~~Planning/Outcomes Management (if not nursing home placement) or through Patient Financial Services.~~

- ~~1. Any one of the following documents shall be considered sufficient evidence upon which to base the final~~

~~determination of Financial Assistance eligibility:~~

- ~~a. "W-2" withholding statement;~~
- ~~b. Current pay stubs (3 months);~~
- ~~c. Bank statements (3 months);~~
- ~~d. Last year's income tax return, including schedules, if applicable;~~
- ~~e. Written, signed statements from employers or others (letter of support) stating your current financial situation and circumstances if you have no proof of income;~~
- ~~f. Forms approving or denying eligibility for Medicaid and/or state funded medical assistance;~~
- ~~g. Forms approving or denying unemployment compensation; or written statements from employers or~~

~~welfare agencies.~~

~~2. In addition, in the event the patient is not able to provide any of the documents described above, Lake Chelan~~

~~Health shall rely upon written and signed statements from either the responsible party or another party describing the applicant's income. If none of the above is available, Lake Chelan Health may make a determination based on knowledge of a prior grant of financial assistance or based on verbal representation.~~

~~3. Income shall be annualized from the date of application based upon documentation provided and~~

verbal

information provided by the patient. This process will be determined by the District and will take into consideration seasonal employment and temporary increases and/or decreases of income.

4. Lake Chelan Health may waive income requirements, documentation and verification if Financial Assistance

eligibility is obvious. Lake Chelan Health staff discretion will be exercised in situations where factors such as

from the responsible party for making a final determination of eligibility.

5. Lake Chelan Health shall make a final determination within 14 days of receipt of financial assistance applications and supporting documentation. Supporting documentation includes items listed on the Confidential

Financial Information Form Instructions:

The District may also write off, as Financial Assistance, amounts for patients with family income in excess of 300% of the federal poverty level or at a higher percentage for those above 100% of the federal poverty guidelines, when circumstances indicate severe financial hardship or personal loss. This will be done only upon recommendation by the business office manager with adequate justification and only upon approval by the Chief Financial Officer. These adjustments shall be included in the Chief Financial Officer's regular financial assistance report to the Board of Commissioners

Notifications

Lake Chelan Health shall notify persons applying for Financial Assistance of its determination of eligibility for Financial

Assistance within 14 days of a receiving person's completed application for Financial Assistance and supporting

documentation. Approvals, Requests for More Information or Denials for Financial Assistance

applications shall be in writing and shall include instructions for appeal or reconsideration. In the event that Lake

Chelan Health denies Financial Assistance, Lake Chelan Health shall notify the person applying for Financial

Assistance of the basis for the denial. If denied the patient/guarantor may provide additional documentation to Lake

Chelan Health or request review by the Chief Financial Officer or their designee within 30 days of receipt of the

notification of denial. If this review affirms the previous denial of Financial Assistance, written notification will be sent

~~to the patient/guarantor and the Department of Health in accordance with state law.~~

Lake Chelan Health shall notify persons applying for Financial Assistance of its determination of eligibility for Financial Assistance within 14 days of a receiving person's completed application for Financial Assistance and supporting documentation. Approvals, Requests for More Information or Denials for Financial Assistance applications shall be in writing and shall include instructions for appeal or reconsideration. In the event that Lake Chelan Health denies Financial Assistance, Lake Chelan Health shall notify the person applying for Financial Assistance of the basis for the denial. If denied the patient/guarantor may provide additional documentation to Lake Chelan Health or request review by the Chief Financial Officer or their designee within 30 days of receipt of the notification of denial. If this review affirms the previous denial of Financial Assistance, written notification will be sent to the patient/guarantor and the Department of Health in accordance with state law.

~~Documentation of Records~~**Documentation of Records**

All information relating to the application will be kept confidential. Copies of documents that support the application will be kept with the financial assistance application form and retained for seven years.

~~be kept with the financial assistance application form and retained for seven years.~~

~~CROSS REFERENCE~~

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-
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COPY

~~Washington Administrative Code, Chapter 246-453, "Hospital Financial Assistance" with specific reference to~~

~~the following:~~

~~o~~

~~WAC 246-453-020 Uniform procedures for the identification of indigent persons o~~

~~WAC 246-453-030 Data requirements for the identification of indigent persons o~~

~~WAC 246-453-040 Uniform criteria for the identification of indigent persons~~

~~RCW 70.170.060 Financial Assistance — Prohibited and required hospital practices and policies~~

~~26 USC §501(r)(5)(A) and (B)~~

~~Lake Chelan Health Billing & Collection Policy~~

~~Lake Chelan Health (Policy Stat ID 8989696 – "Duty to Provide Appropriate Medical Screen Examination Policy (CAH) - Emergency Medical Treatment and Active Labor Act (EMTALA)"~~

~~ATTACHMENTS:~~

~~Attachment A: Federal Poverty Guidelines/Sliding Fee Scale~~

~~Attachment B: Financial Assistance Application / Confidential Financial Information (CFI) Form~~

~~REVIEW/REVISION DATES: 5/8/2017, 11/18/2021, 7/26/2023~~

REFERENCES

1. Washington Administrative Code, Chapter 246-453, "Hospital Financial Assistance" with specific reference to the following:
2. WAC 246-453-020 Uniform procedures for the identification of indigent persons
3. WAC 246-453-030 Data requirements for the identification of indigent persons
4. WAC 246-453-040 Uniform criteria for the identification of indigent persons
5. RCW 70.170.060 Financial Assistance – Prohibited and required hospital practices and policies
6. 26 USC §501(r)(5)(A) and (B)
7. Lake Chelan Health Billing & Collection Policy
8. Lake Chelan Health (Policy Stat ID 8989696 – "Duty to Provide Appropriate Medical Screen Examination Examination
9. Policy (CAH) - Emergency Medical Treatment and Active Labor Act (EMTALA)"

ATTACHMENTS

1. Attachment A: Federal Poverty Guidelines/Sliding Fee Scale
2. Attachment B: Financial Assistance Application / Confidential Financial Information (CFI) Form
3. REVIEW/REVISION DATES: 5/8/2017, 11/18/2021, 7/26/2023 11/5/2024

**This policy may be revised at any time without prior notice. All revisions supersede prior policy and are effective immediately upon approval.*

**Any printed policy is not valid past the print date and should not be relied on for official purposes. Current versions of all policies can be found in PolicyStat.*

Attachments

[charity care application.pdf](#)

[charity care fee schedule.pdf](#)

Approval Signatures

| Step Description | Approver | Date |
|-----------------------------|--|------------|
| Executive Admin | Wendy Kenck: Executive Assistant | Pending |
| Policy Management Committee | Committee Policy Management: Policy Management Committee | 11/11/2024 |
| | Patti Peters: Business Office/ Patient Access/HIMS Manager | 11/6/2024 |

COPY

Board Member Code of Conduct

Draft revision 11.11.24

Purpose

Board members are personally accountable to serve as leaders and role models of professional excellence. [This policy describes the conduct expected of all members of the Lake Chelan Health Board of Commissioners.](#)

Policy Statement

Board members ~~must~~^{shall} conduct themselves in accordance with all laws, including but not limited to Open Public Meetings Act, [Revised Code of Washington \(RCW\) 42.30](#) and the Code of Ethics for Municipal Officers - Contract Interest, [RCW 42.23](#), and [Lake Chelan Health Compliance Plan and policies](#). It is essential that Board members thoroughly review these laws [and the Compliance Plan](#) and make a commitment to uphold their requirements. Failure to read and/or acknowledge laws [and Compliance Plan and policies](#) does not exempt a Board member from the responsibility to comply with the applicable laws, rules and regulations, and District policies and procedures.

None of the principles and practices outlined in the laws and policies is intended to restrict any Board member from exercising their constitutional rights of free speech and to seek information to carry out Board member responsibilities, and should not be so construed. Furthermore, the exercise of such rights and duties ~~shall~~^{will} not subject any Board member to any sanctions under these laws, even if such exercise is otherwise inconsistent with a stated principle or practice of appropriate ethical conduct.

Scope

[The Lake Chelan Health Board of Commissioners must follow this policy when fulfilling the duties of a Board member.](#)

Roles and Responsibilities

Duty of Care

A Board member is required to exercise reasonable care that an ordinarily prudent person would exercise in a like position as steward of public assets, and under similar circumstances. Give full attention to meeting deliberations during all Board meetings, be attentive to the District's business, seek and study facts and information regarding decisions facing the Board, and present a rational basis for decisions.

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Duty of Loyalty

A Board member exercises undivided allegiance when making decisions affecting the organization.

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Duty of Obedience

A Board member is faithful to the organization's mission and keeps the public trust that the Board member will ensure management of organization assets to fulfill the mission. Board members will obey all laws and organizational policies and procedures. Not knowing laws and policies that govern Board actions does not exempt a Board member from responsibility to comply with laws and policies.

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Code of Ethics

In addition, Board members ~~sh~~~~must~~~~all~~ pledge to accept this Code of Ethics as a minimum guideline for ethical conduct and professional excellence.

Definitions:

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Procedure:

Board members must:

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1. ~~Ce~~ Conduct themselves with civility and respect at all times with one another, with employees and with members of the public. When interpersonal conflict interferes with Board and/or employee work, the Board member involved must endeavor to resolve the issue privately in order to preserve Board focus on District priorities and the decorum of the whole Board.
2. ~~Ee~~ Engage other Board members in open discussions and debates without being disrespectful. An effective member of the Board will not hesitate to ask the hard questions for the constituents that the Board member serves.
3. ~~Mm~~ Make a point without making things personal. Disparaging remarks about a person's age, sex, gender orientation, race, appearance, moral character, and other personal qualities are prohibited.
4. ~~Aa~~ Accept individual Board member votes without comment or rancor. A Board member may express their supporting and opposing views, and the basis for their views, regardless of the final majority action. ~~Once a vote is taken, a Board member must should express full Board support for the majority action.~~

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5. ~~Sign~~ a Conflict of Interest Form annually and inform the Board of any personal conflicting interest, such as business, advocacy of interest groups and memberships in other organizations.

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6. ~~Not~~ receive personal advantage due to relationships with the organization.

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7. ~~may Not~~ attempt to exercise individual authority over Chelan County Public Hospital District 2 employees or contractors except as explicitly set forth in Board policies.

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8. ~~respect~~ Respect the organizational structure and lines of authority in the organization. In their interactions with the public and other entities, Board members recognize that until formal action is taken by the Board as a whole, individual members do not speak for the whole Board.

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9. ~~comply~~ Comply with the District policies and procedures, including Health Insurance Portability and Accountability Act (HIPAA), Lake Chelan Health Compliance Plan, ~~workplace~~ Workplace harassment ~~Harassment~~, ~~whistleblower~~ Whistleblower protection ~~Protection~~, ~~T~~ Travel, and use of Hospital District resources.

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10. ~~prohibit~~ Prohibit use of public facilities or public time to support or oppose a candidate or ballot measure. It is a violation of RCW 42.17A.555 for a citizen to express support or opposition with respect to a candidate or ballot measure during the public comment portion of a public meeting or during the meeting.

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11. Not divulge or release any information of a proprietary nature including matters discussed in Executive Session as defined by RCW 42.30.110.

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12. Not use their individual Board position to engage the Hospital District's legal counsel for personal or Hospital District matters. Legal counsel works for the Hospital District and not any individual Board member or employee of the District. See "Board of Commissioners Policy and Procedure Regarding Ethical and Legal Matters".

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When a Board member identifies an action that increases a risk of a legal and/or ethical issue, or does not comply with law(s), Lake Chelan Health Compliance Plan or policies and procedures, the Board member must report this matter to the Compliance Officer.

Board members--

must not meet in groups with more than the number of Board members needed for a quorum for the purpose of discussing District business, and gathering information from professionals and others to inform Board decisions. In accordance with the Open Public Meetings Act RCW 42.30, a quorum of the Board meets only in publically-noticed meetings to take action.

Board members may request the records of the District as necessary to carry out their Board responsibilities and in conformance with Board policies. District personnel files other than the files of the Chief Executive Officer (CEO) are available to a Board member only to the extent the records would be available to a member of the public under the Public Records Act.

~~Board members should~~ are encouraged to refer questions and/or concerns by the public regarding District operations to the Chief Executive Officer or designee. If the concerns expressed by the public that the Board member believes require a different course of action, the Board member ~~must~~ is encouraged to appropriately inform or discuss the matter with the Board Chair.

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References:

Lake Chelan Health Compliance Plan

Revised Code of Washington

Open Public Meetings Act

Code of Ethics for Municipal Officers - Contract Interest

Board of Commissioners Policy and Procedure Regarding Ethical and Legal Matters

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Attachments:

N/A

This policy may be revised at any time without prior notice. All revisions supersede prior policy and are effective immediately upon approval.

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Board Policy regarding Public Participation during Board Meetings draft 11.12.24

Purpose:

Lake Chelan Health Board of Commissioners meetings are for the primary purpose of the Board to conduct Board business on behalf of the Hospital District. The Board complies with Washington State Open Public Meetings Act, Public Records Act and all other laws regarding public meetings when conducting Board meetings. State laws require that public agencies must allow for the public to orally comment at the meeting or submit written comment prior to or at all regular meetings. Guidance is necessary to assist the public to provide comments in the Board meetings in ways that meet all laws and Hospital District policies.

Policy Statement:

The Board of Commissioners of Lake Chelan Health values and encourages community input during the "Public Comment" period (s) of the Board meeting. Public comment is any comment provided by the public as part of a Board meeting. Public comment is not required in emergency situations and is not required (but is recommended) at special meetings, even when final action is taken. If oral comment is allowed and an individual who has difficulty attending the meeting in-person requests an opportunity to provide oral comment remotely, the agency must provide this opportunity when feasible.

Scope:

This policy provides guidance to the Lake Chelan Health Board of Commissioners and all who wish to provide public comment in the Public Comment period of a Board meeting.

Roles and Responsibilities:

The Lake Chelan Health Board of Commissioners or the Board's designee is responsible to enforce this policy.

Definitions:

Public Comment: The Public Comment period is not a time for dialogue. A meeting of a public board is not a meeting of the public. It is a meeting of the board that is held in public. The purpose of the Public Comment period is for the board to receive input from its community. It is, in fact, a one-way communication to the board. The public does not participate in making decisions. Instead, it provides input to the governing body, which will take that input into account in making its decisions.

Procedure:

Public comment addressed to the Board is to be provided in any of the following three ways: written, in-person, or remotely.

Written Public Comment

To be read at the next Board meeting in the Public Comment period and to become part of the official meeting record, written comments must be signed, addressed to the Lake Chelan Health Board of Commissioners and received at the office of the Hospital Administrator at 110 South

Apple Blossom Drive, Chelan, Washington 98816 or emailed to infor@lcch.net at least 24 hours prior to the Board meeting start time.

In-Person Comment

We request in-person speakers to sign their name on a form provided in the meeting room prior to the Board meeting so that during the Public Comment period of the meeting speakers can be called on to speak in the order of their signature on the form.

Remote Public Comment

Community members who attend virtually will be called on to speak during the Public Comment period by raising a hand during the meeting to let the Board Chair know they would like to speak. Speakers are requested to provide their name for the record.

Participation Guidelines for the Public:

1. Generally, the total “Public Comment” period will be no more than 30 minutes or at the discretion of the Board Chair.
2. Generally, each speaker has three minutes to address the Board. If more than 10 people have signed up to speak, speakers are limited to two minutes.
3. Please be advised that each speaker's public comment is being documented.
4. Please give your name when you provide comment.
5. All comments must be addressed to the whole Board, not individual members, staff or members of the audience.
6. Questions will not be answered during a speaker’s turn, but a speaker is encouraged to leave their contact information with the administrative assistant for staff to follow up.
7. Online "chat" feature will not be available during Board meetings.
8. During election season, no person is permitted to use the public comment portion of a meeting to promote or oppose any candidate for public office.

Notice of Disclosure to the Public

All emails, and attachments, sent to and from Lake Chelan Health are public records and can be subject to disclosure pursuant to the Public Records Act (RCW Chapter 42.56). Additionally, Lake Chelan Health can publish comments received that pertain to Board meeting agenda items, and/or to the Board’s meeting packet online. This includes any attachments or other supporting materials, including any business or personal information (name, email address, phone, etc.) provided.

References:

- Revised Code of Washington
- Washington State Open Public Meetings Act
- Washington State Public Records Act
- Municipal Research and Services Center (MRSC.org)

Attachments:

N/A

This policy may be revised at any time without prior notice. All revisions supersede prior policy and are effective immediately upon approval.