

**Granite County Hospital District
Board of Directors
Meeting Minutes
May 30, 2017**

Present:

- Mr. John Barbara
- Mr. Ken Burd
- Mrs. Judy Friede
- Mr. Chris Miller Esq.
- Mr. Jim Waldbillig (Board Chair)

A quorum of the Board was present.

The meeting was called to order by Jim Waldbillig on May 30, 2017 at 5:33 pm. The meeting was held in the Granite County Medical Center Conference Facility in Philipsburg, MT.

The minutes from the April 25, 2017 meeting were reviewed. Chris Miller made a motion to approve them as written. John Barbara seconded the motion. The motion passed unanimously.

New Business

The board moved to shift the new business of a GCMC Group Health Board Presentation to the beginning of the meeting. The presentation was given by Given Kutz and Bob Rowe of Rowe and Co. Health Insurance. It was noted that PacificSource continued to be a solid company to work with and remaining with PacificSource would mean a minimal impact to staff. Montana Health Co-op, for instance, only offered Gold level group health at a much increased premium and Blue Cross Blue Shield Montana was not competitive. Other markets were available, but this would require health statements and medical underwriting. It was stated that one concern was the prospect of change in the ACA. Dependent coverage had been removed from the group plan in favor of ObamaCare subsidies. If the law changes then the staff's dependents may need to be brought back into the discussion. John Barbara asked if - other than the big difference in the deductible- there was any other change in the plan with PacificSource going forward. Rowe said there was not. Maria Stoppler, CEO, asked if staff would have the same provider network. Kutz said they would. A dual option plan would also be available to staff who did not want to sign up. Chris Miller noted that the renewal option with PacificSource with the higher deductible would result in about a \$30 per employee reduction in premium, but at the same time it loads the employee with about \$2,100 in additional deductible that they have to pay. Kutz agreed. About 60 percent of the staff wouldn't notice - but the people who are impacted will certainly feel it. Barbara clarified that it wasn't all or nothing - that employees could opt out through the dual option plan. Rowe confirmed this. A decision on whether to continue with PacificSource would need to be made by June 10.

Ken Burd made motion to have a special meeting; this was seconded by Miller. A meeting is planned Monday, June 5 at 5 p.m.

Standing Items

Administrator's Report:

Maria Stoppler, CEO, DON, RN, presented her Administrator's Report.

(Please refer to the posted report for details.)

Stoppler noted that under medical staff, Frank Pawlak, nurse practitioner, has officially announced that he has taken a position in Texas. His final day will be July 5. The hospital is actively seeking a replacement. Pawlak is a well-loved and respected provider and will be missed, Stoppler said. Due to this lack of resource, Stoppler said there was currently no way to provide Thursday coverage at the Drummond Clinic, which was Pawlak's day. "I know that's not desirable, but I don't think it will impact as many people, because Frank averages about 1 to 2 patients on Thursday. So the impact volume is lower But it is going to be a hardship and it's not what we want but right now I don't see a way to keep that covered with the staff that we have. If we are able to replace him, then I can see that we could reinstitute that. But right now looking at the schedule effective July 6, there

just isn't enough hands on deck to cover that." Ashley Westphal would continue on Mondays – this could mean her Mondays would be more full. Monday visits to the clinic were higher than Thursday visits on average. She was also looking at what the nurse in Drummond could do on Thursdays without a provider on site. From the public seats, Carl Sundstrom noted that the cost of having Pawlak at the Drummond Clinic with a nurse, with an average of only 1 to 2 patients a day, meant that the hospital was losing a significant amount of money. Stoppler said this was true. "That's a hard one, because we feel a moral obligation." Burd said that because the hospital was supported by a county-wide mill levy it was their fiduciary responsibility to provide coverage to the entire county the best the hospital can. Sundstrom said the key phrase might be "the best we can." Waldbillig asked if Stoppler anticipated reinstating the Thursday clinic in Drummond once a new provider was hired. Stoppler said she did.

Financial Report:

Brenda Peyton, JCCS accountant, presented the financial report.

(Please refer to the posted report for details.)

Peyton said that April had been "a pretty grim month." Utilization was down compared to both the prior month and prior year. "When I take a look at the last several years it is definitely one of those anomalies – it is not on trend with the past few years at all." The clinic in Philipsburg was steady. The clinic in Drummond was down. Swing bed days were down as was PT, lab and the nursing home was still at 18. Under assets, the hospital had about \$49,000 in cash, which was a significant decrease. Accounts receivable did go down slightly, primarily because of low utilization. Under the nursing home: the private pay came in but Medicaid did not before the end of the month so that would be realized in May financials. Accounts payable held steady, ending the month with \$352,000. A new area under liabilities is the deferred revenue for the grants. This was a combination of smaller grants and the \$510,000 that came in for the CT Scanner. That will be there until they were ready to move forward with the project, then it would move over to recognized revenue. The hospital was over-budget under nursing, primarily because of travel expenses. Cash received is \$84,000 – in the nursing home there had been a significant drop but that has since come in in May. Burd asked if this was a billing issue. Stoppler said it wasn't – it was how the payments fell this month. Miller said if this had been received on time, then the cash on hand would be higher. Burd asked what kind of snafus had been happening with billing. Stoppler said in one instance there had been some confusion in regards to a patient who had gone from swing then went to acute, left and then came back – the cycle or sequence was sent out incorrectly so they had to send back the money and then rebill. In another instance, corrections had been made and resent to Medicare and they still hadn't paid. Some of this was timing. There were four or five bills that were a good amount that were just hanging there, Stoppler said, adding when asked, that the fault was probably split. Burd asked when billing would be available through Athena, with the go-live date set for June 6. Stoppler said this would be available, in theory, immediately. Monida's involvement would still be needed for coding.

Committee Reports:

Finance Committee - Burd said that several months ago, the new cost report tool indicated that the hospital would owe about \$40,000, given the projection capabilities of the tool. The clinic rate had been increased quite a bit, he said. It was recommended that they contact Meridian and ask to keep the clinic rate the same. The fear was that this would put the hospital into the position of owing more to CMS come cost report time. Last month, it was looking that rather than owing \$40,000, it was coming down to about \$15,000. If Meridian did not respond favorably to this request, the chances were that the hospital district would owe more than \$40,000. But they were assuming that they would keep the rate the same. Waldbillig noted that it was the first time during his tenure on the board that there was a tool to anticipate the cost report. Burd said the proof would be in the pudding.

Policy Committee - Nothing to report

Quality and Safety Committee - Nothing to report

Facilities - Waldbillig said that in regards to the Kessel property, he had met with the mayor. The town was looking into the property and they would get back to the board.

Marketing Committee - Miller wondered if pamphlets could be distributed in local campgrounds to increase awareness of the GCMC ER's presence. Judy Friede said there were still brochures that could go out.

Technology Committee - Barbara said the hospital was still good to go live for Athena on June 6.

Professional Affairs - Burd moved to credential Dr Hunter Crose at the recommendation of the medical staff. Miller seconded. Burd moved to re-credential Gregory Christensen, DMD. This was seconded by Friede. Stoppler commented favorably on both providers.

Medical Staff Report:

It was relayed by Dr Jones that Pawlak would be missed and was a great asset to the community.

Foundation Report:

The next meeting of the foundation would be on June 6.

Approval of Warrants:

Warrants will be approved at the June 5 special meeting.

New Business

New Business Topic:

Grant writer Maureen Connor noted that the Murdoch grant application was now in, and the hospital would know in several weeks if they had made it to the next tier of the application process.

Open Comment

From the public seats, KD Graham said that she had a complaint regarding a recent visit to the hospital's ER and said that her daughter was waiting outside the ER, and was unable to gain entry, despite notifying 911. The dispatcher was also unable to reach staff. Board members noted that this was unacceptable. Stoppler, who had also spoken to Graham before the meeting, said that she would look into this, and said there was a pager that should have gone off, alerting staff on duty. Miller recommended that board authorize Stoppler to investigate the matter further and report back.

Adjournment

A motion was made by Burd to adjourn. This was seconded by Friede. The motion passed unanimously and the meeting was adjourned at 6:46 PM.

These minutes have been reviewed and approved by motion of the board:

Jim Waldbillig (Chairman of GCHD Board of Trustees)

Date