



**REGULAR MEETING OF THE BOARD OF DIRECTORS  
AGENDA**

**Thursday, March 28, 2024 at 5:00 p.m.  
Portola Medical Clinic Conference Room, Portola, CA**

The March 28, 2024 Board of Directors meeting will be held in both a virtual and an in-person setting for the general public. The Board meeting location at the Portola Medical Clinic Conference Room will be accessible to the public. The meeting is also accessible to the public via Zoom (See the connection information below). Public comment will be accepted on any item on the agenda as called for by the Board chair until the close of public comment for each item.

Any person with a disability may submit a request for reasonable modification or accommodation to the above-described means for accessing and offering comment at the meeting to Barbara Sokolov at [barbara.sokolov@ephc.org](mailto:barbara.sokolov@ephc.org) who will swiftly resolve such request.

The Board meeting is accessible to the public via Zoom:

**Meeting ID:** 863 9753 5882 **Passcode:** 932796 **Dial In:** +1 669 900 6833 US (San Jose)  
<https://us06web.zoom.us/j/86397535882?pwd=MtMvugrK08xORhG3zp5f5AsMI21D5Y.1>

	<u>Presenter(s)</u>	<u>I/D/A</u>	<u>Page(s)</u>
1. <b><u>Call to Order</u></b>	Augustine Corcoran	A	
2. <b><u>Roll Call</u></b>	Augustine Corcoran	I	
3. <b><u>Board Comments</u></b>	Board Members	I/D/A	
• Deletions/Corrections to the Posted Agenda			
4. <b><u>Public Comment</u></b>			
There will be an opportunity for public comment on each agenda item listed with an “A” for action. Comments will be limited to three minutes per individual.			
5. <b><u>Consent Calendar</u></b>	Augustine Corcoran	I/D/A	
A. Agenda			1-2
B. Meeting Minutes of 2.22.24 Regular Board Meeting			3-7
6. <b><u>Auxiliary Report</u></b>	Gail McGrath	I/D/A	
7. <b><u>Staff Reports</u></b>			
A. Chief Nursing Officer Report	Penny Holland	I/D	8
B. SNF Directors of Nursing Report	Lorraine Noble/Tamara Santella	I/D	9
C. Director of Clinics Report	Tracy Studer	I/D	10
D. Jim Burson	Director of Rehabilitation	I/D	11-12
E. Joanna Garneau	Program Manager	I/D	13-15
F. Chief Financial Officer	Katherine Pairish	I/D	16-20
8. <b><u>Chief Executive Officer Report</u></b>	Doug McCoy	I/D/A	21-22
9. <b><u>Policies</u></b>		I/D/A	23-24
Policy Review			

Regular Meeting of the Board of Directors of Eastern Plumas Health Care  
March 28, 2024 AGENDA – Continued

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The CAH Committee recommends the following for approval by the Board of Directors:

Annual Policy Review

Infection Prevention, Administration, Radiology, Dietary, Nursing, Human Resources, Ambulance, Rehabilitation, Clinic

- |  |                       |       |
|--|-----------------------|-------|
| <b>10. <u>Committee Reports</u></b>  | Board Members         | I/D/A |
| A. Finance Committee   |                       |       |
| <b>11. <u>Public Comment</u></b>   | Members of the Public | I     |
| This is an opportunity for members of the public to address the Board on items which are not on the agenda. Comments are limited to three minutes ordinarily, unless the Board Chair indicates a different amount will be allotted. Comments should be limited to matters within the jurisdiction of the Board. The Board Chair may choose to acknowledge the comment, or, where appropriate, briefly answer a question, refer the matter to staff, or set the item for discussion at a future meeting. Like any other member of the hospital district, an employee or a contracted employee can address the Board in the proper forum at the proper time. However, the Board will not hear personnel issues or grievances, or matters that affect the employees personally. |                       |       |
| <b>12. <u>Board Closing Remarks</u></b>  | Board Members         | I/D   |
| <b>13. <u>Closed Session</u></b>   | Augustine Corcoran    | I/D/A |
| A. Hearing (Health and Safety Code 32155)<br><i>Subject Matter: Staff Privileges</i>   |                       |       |
| <u>Clinic</u>  |                       |       |
| <ul style="list-style-type: none"><li>• Hibler, John D.O - 2 year appointment</li><li>• Potter, Christina FNP - 2 year appointment</li><li>• Hoffman, Daniel DDS - 2 year appointment</li><li>• Mannikko, Daniel DDS - 1 year appointment</li><li>• Fletcher, Sarah MD - <b>60 day extension of privileges to finish reappointment application</b></li></ul>   |                       |       |
| <u>Tele- Radiology</u>   |                       |       |
| <ul style="list-style-type: none"><li>• Jama, Abdullahi MD - 1 year appointment</li></ul>  |                       |       |
| <u>Tele-Psych</u>  |                       |       |
| <ul style="list-style-type: none"><li>• Adams, Ninos MD - 1 year appointment</li><li>• Brahmhatt, Hetal MD - 1 year appointment</li><li>• Mischiu, Radu MD - 1 year appointment</li><li>• Cole, Barry MD - 1 year appointment</li></ul>  |                       |       |
| B. Public Employee Performance Evaluation (Government Code Section 54957): <i>CEO</i>  |                       |       |
| C. Conference with Legal Counsel – Existing Litigation (Government Code Section 54956.9(d)(1)<br>Case Name Unspecified: (disclosure would jeopardize settlement negotiations)  |                       |       |
| <b>14. <u>Open Session Report of Actions</u></b>   | Augustine Corcoran    | I     |
| Taken in Closed Session  |                       |       |
| <b>15. <u>Adjournment</u></b>  | Augustine Corcoran    | A     |

*The next regularly scheduled meeting of the Board of Directors of Eastern Plumas Health Care is April 25, 2024 at the Portola Medical Clinic Conference Room, 480 1<sup>st</sup> Avenue, Portola, CA 96122*



**EASTERN PLUMAS HEALTH CARE DISTRICT  
REGULAR MEETING OF THE BOARD OF DIRECTORS  
MINUTES**

**Thursday, February 22, 2024 at 5:00 p.m.**

**1. Call to Order**

Meeting was called to order at 5:00 p.m.

**2. Roll Call**

Augustine Corcoran, Board Chair; Gail McGrath, Board Member; Paul Swanson, M.D., Board Member; Marcia Hughes, Board Member.

Not present: Linda Satchwell, Board Member

Staff in attendance: Doug McCoy, CEO; Lorraine Noble, Director of Nursing Portola; Tamara Santella, Director of Nursing Loyaltan; Penny Holland, Chief Nursing Officer; Tracy Studer, Director of Clinics; and Barbara Sokolov, Foundation Manager/Executive Assistant/Clerk of the Board.

**3. Board Comments**

None

**4. Public Comment**

None

**5. Consent Calendar**

- **ACTION:** Motion was made by Director McGrath, seconded by Director Hughes to approve the consent calendar.

**Roll Call Vote:** AYES: Directors Hughes, Swanson, McGrath, Corcoran.

Nays: None

Not present: Director Satchwell

- **Public Comment:** None

**6. Auxiliary Report**

None

**7. Foundation Report**

Patty Clawson, Foundation Board Chair & Barbara Sokolov, Foundation Manager, gave an update. Foundation Board Vice Chair, Pat McCarthy, was also in attendance. The Foundation will be presenting quarterly unless something pressing comes up.

Barbara gave a quick recap: The Foundation has a board of nine. In addition to Patty & Pat, also serving on the Foundation board are Linda Judge, Jeanne Tansey, and Paula Johnston plus Doug, Katherine, and Barbara as ex-officio members, and Gail McGrath as a non-voting member and representative from the hospital board. Full bios can be accessed on the EPHC website.

This board came together last spring and has been building from the ground up, since the Foundation had been inactive since 2019, and is working on several projects.

Regular Meeting of the Board of Directors of Eastern Plumas Health Care  
**February 22, 2024 MINUTES - Continued**

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Patty gave an update on the Foundation's recent campaign, since November, to fund the remount of one of EPHC's ambulances. Used newsletter, social media, mailing to vendors. Direct appeal to Firetrucks Unlimited, covered shipping costs of ambulance to and from Henderson, NV. Fundraising effort to associated vendors and community of EPHC has netted approximately \$35k in cash and in-kind contributions. We were delighted to receive \$5k from Plumas Bank and even more delighted that Rachelle Ramelli, VP, is leading a community effort for matching funds. We continue to drive this campaign for the ongoing maintenance and expansion of EPHC's ambulance program.

Barbara shared that the Foundation was currently exploring a dental grant to extend services to Loyalton and also exploring fundraising to support child and adult daycare as well as the establishment of a Grateful Patient Program and regular fundraising mailings to residents, property owners, and businesses in our community.

Patty and Barbara reminded everyone that the Foundation is here to serve EPHC. If you or your depts have fundraising ideas or specific needs that could benefit from our fundraising efforts, please let us know.

#### **8. Staff Reports**

- |   |                   |
|---|-------------------|
| A. Chief Nursing Officer Report   | Penny Holland     |
| See February BOD report. Penny also shared that Mike Duehring has accepted the lab manager position.  |                   |
| B. SNF Director of Nursing  | Tamara Santella   |
| See February BOD report.  |                   |
| C. Director of Clinics  | Tracy Studer      |
| See February BOD report. Tracy shared that the Clinics are prioritizing increasing the number of surveys and increasing provider availability. The official Loyalton Grand Opening celebration will be held on May 15 <sup>th</sup> . |                   |
| D. Chief Financial Officer  | Katherine Pairish |

#### **Summary**

We are seven months into the fiscal year. This report will cover year-to-date through January 31, 2024, compared to year-to-date through January 31, 2023.

Total Patient Revenues were higher than last year by \$1,617,237. This represents a 6% increase. Total Operating Expenses were higher than last year by \$182,634. This represents a 1% increase. Our bottom line improved over last year by \$1,610,335 or 47%.

#### **Revenues (Year-to-Date)**

Overall, total Inpatient Revenues were higher than last year by \$852,659, with Skilled Nursing Revenues higher than last year by \$816,156. Pro Fees were higher than last year by \$133,661. Total Outpatient Revenues were higher than last year by \$813,581 and Clinic Revenues were less than last year by \$192,664.

#### **Expenses (Year-to-Date Current Year Compared to Year-to Date Last Year)**

Salaries and Benefits: Combined Salaries and Benefits were higher by \$303,398.

Purchased Services: Purchased Services were less by \$432,710. This includes traveler expenses that were less than last year by \$646,377.

Professional Fees: Professional Fees were higher by \$75,952.

Repairs & Maintenance: Repairs & Maintenance were less by \$19,279.

Utilities: Utilities were higher by \$145,200.

Regular Meeting of the Board of Directors of Eastern Plumas Health Care  
**February 22, 2024 MINUTES - Continued**

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Supplies: Supplies were less by \$99,331.

Depreciation Expense: Depreciation Expense was higher by \$93,232.

Other Expenses: Other Expenses were higher by \$76,417. These include training, travel, and dues and subscriptions.

### **Revenue Cycle**

Gross Accounts Receivable as of January 31, 2024 was \$17 million. The business office made great strides in posting payments in Cerner. Gross Accounts Receivable at the end of November 2023 was \$19 million. December's balance was \$21 million.

### **Balance Sheet**

Total Cash decreased 18.65%. Net AR increased 56.83% and Net Fixed Assets increased 11.34%. Total Liabilities decreased 31.23%.

### **Additional Information**

Days cash on hand on January 31, 2024, was 132. January 31, 2023, days cash on hand was 163. We have spent \$1,325,035 on capital equipment so far this year. Included in the current year-to-date operating income is \$2,245,289 for the HQAF IGT that was returned to us in November. We will be funding the remaining IGT's in February and March for approximately \$2,695,200 and will net approximately \$5,692,200 in return. We expect to receive those funds before the end of the fiscal year. Our Fund Balance increased by \$4,697,387 or 18.6%.

## **9. Chief Executive Officer Report**

Doug McCoy

### **OPERATIONAL OVERVIEW:**

The first 6 weeks of 2024 have been busy and productive for EPHC with the opening of the new Loyaltan Clinic, Foundation funding efforts, grant submissions, and additions of new team members. This quarter we have or will be submitting grant applications for CalAim expansion funding, the Partnership HQIP program, safety and security programming, process improvement initiatives, dental services, and Equity Practice Transformation (EPT). Each of these grant programs offer improvement or expansion of existing EPHC services or quality performance incentive payments for organizational activities.

The census across all service lines continues to trend above the prior year as does the overall financial performance for the organization. In January, we developed several key strategic objectives for 2024. Updates for each through January are outlined below.

### **2024 STRATEGIC OBJECTIVES – UPDATE (Through January 31<sup>st</sup>)**

For the 2024 calendar year we have several strategic objectives to improve operations and our care delivery to the community. These will be monitored monthly with progress reports provided to the Board.

- Reduce annualized turnover by 7% with emphasis on the reduction of turnover within the first 12 months of employment.
  - For January we had 9 new hires and 9 terminations. Annualized this would be an increase of 6 new hires and 28 terminations over 2023, and an increase of 8% to our turnover rate. 8 of 9 terminations were within 12 months of employment which remains a focus area in our employee engagement. Department managers have created a specific QA measure for turnover improvement beginning in January and will monitor and report monthly. Organizational activities include increased communication with employees, ongoing improvement modifications to new hire orientation, and increased utilization of our HR consultant group for employee grievance resolution.
- Exceed the net income budget for the 2023/24 fiscal year and achieve positive net income performance.

Regular Meeting of the Board of Directors of Eastern Plumas Health Care  
**February 22, 2024 MINUTES - Continued**

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- Through January our net income performance is exceeding budget by \$863,000 and is 1.6m over the same period last year. The remaining IGT funding for the fiscal year is not expected to be received until May/June 2024 which will significantly add to this positive variance by year end.
- Increase days cash on hand to the June 2023 performance level (200) by July 1, 2024.
  - January days cash on hand is 132 which is a decrease of 5 days over the prior month. The lack of IGT payments and an increase in costs due to the two holidays included in the January payroll cycle caused the expected decrease over December. We will see an additional decrease in February with the funding of one of three IGTs, but forecast that the end of year days cash will increase to 200+ by fiscal year end.
- Implementation of our disaster recovery plan for all IT infrastructure systems.
  - A new wireless option for phone capabilities to ensure connectivity in the event of an internet failure is currently in testing mode. This would allow for incoming hospital/clinic calls if the phone system, which is internet based, were not functioning. We anticipate this trial to be completed in the next 60-90 days.
- Secure grant funding for CalAim program expansion to include additional office/client meeting areas.
  - A path-cited grant application was submitted on 2/15 for funding to create CalAim office space on the second floor of the Nifty Thrifty building owned by the EPHC Foundation. We anticipate a decision on our application in late summer of this year.
- Add additional provider/community services to the Loyalton Clinic campus. Explore grant opportunities for dental services.
  - The Loyalton Clinic started operations on 2/12 and we plan to request a CMS onsite licensure survey to occur within 6 weeks. The EPHC Foundation is leading the efforts to apply for a dental service grant due March 31<sup>st</sup> to generate funding for a dental expansion in that location.
- Increase patient experience survey responses over 2023 totals and meet 4-5 star national certification standards.
  - 55 total surveys were received in January across all lines of service. Our emergency department significantly outperformed national averages on all scoring categories including a 93.1% overall experience rate. This was the highest scoring performance month for the ED since EPHC initiated the EDCAHPS program. The clinic is also outperforming all national benchmarks for 2024.
- Complete key projects – X-ray room replacement, Loyalton flooring project, EMS use of current Loyalton Clinic, MindRay installation, badge reader/security system, SNF basement project.
  - The MindRay installation project started on 2/12 with a joint review of the EPHC wifi system which is fully compliant with their equipment. Additional milestone activities are scheduled through go-live in April. The fire panel project is in the final phases of completion and then the badge reader system for the hospital will be installed.
- Completion of all NPC/SPC seismic reporting requirements for 2024 and receipt of grant funding to offset costs through the SRHRP grant program.
  - All January reporting requirements were met. The legislature is considering a modification to the 2030 requirements for rural hospitals, but we will continue following our current timeline schedule.

**COMPLIANCE PROGRAM:**

There were no compliance reviews initiated for the period of January 23rd through February 16th.

Director Hughes asked Doug about the reasons for the 9 terminations. Doug said that taking a deep dive to figure out which were avoidable and which were out of EPHC's hands would be useful.

**10. Policies**

Public Comment: None.

**ACTION:** Motion was made by Director Hughes, seconded by Director McGrath to approve all policies.

Regular Meeting of the Board of Directors of Eastern Plumas Health Care  
February 22, 2024 MINUTES - Continued

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**Roll Call Vote:** AYES: Directors Hughes, Swanson, McGrath, Corcoran.  
Nays: None  
Not present: Director Satchwell

**11. Committee Reports** Board Members  
A. Finance Committee

Finance Committee did not meet due to absence of members. Director Swanson reported the figures looked good and the cash plan was also good.

**12. Public Comment**  
None.

**13. Board Closing Remark**

Doug informed the Board that the QA and Planning BOD subcommittee meetings would be held in compliance with the Brown Act. Gail and Marcie commended everyone for their good work!

**Open Session recessed at 5:42 p.m.**

**14. Closed Session**

A. Pursuant Hearing (Health and Safety Code 32155)  
*Subject Matter: Staff Privileges*

Active 2 Year Appointments

- |                            |            |
|----------------------------|------------|
| • Barnett Grier, MD        | Clinic     |
| • William Mills, MD        | ED         |
| • Yehonatan Borenstein, MD | Tele Psych |

B. Public Employee Performance Evaluation (Government Code Section 54957) Subject Matter: *CEO*

**15. Open Session Report of Actions Taken in Closed Session**

The Board returned at approximately 6:12 p.m.

**A: ACTION-** The Board unanimously approved a motion to provide staff privileges to all persons listed on agenda item 14.A.

**B: No Action taken**

**16. Adjournment**

Meeting adjourned at 6:14 p.m.

Eastern Plumas Health Care  
Board Report  
Penny Holland CNO

3/28/2024

Staffing stable. As spring and summer arise we are hiring a third nurse to work 1030am-11pm for our busy season ahead with increase visitors in our area.

Maintaining average of 2-3 swing patients a day.

Mindray, our central monitoring system, has been installed nurses are training on it this week. Going live April 8<sup>th</sup>.

Lab is stable with employees. Still validating new machine

11 employees took NRP(Neonatal Resuscitation Provider) certification course. ER techs, EMTs, nurses and one doctor took the course. It was provided by a Sutter Health in Roseville instructor Patricia Kelley. We wanted to enhance the knowledge of staff for difficult labor and delivery in the ER.



**Eastern Plumas Health Care  
Nursing Division  
Skilled Nursing Facilities  
Board Report 03/12/2024  
by Lorraine Noble RN & Tamara Santella RN**

**CENSUS**

**Portola Campus:**

February census was 27-100% full

**Loyalton Campus:**

February census was : 33.5- 85.9% capacity

1-discharge

1 admits

**STAFFING**

April 1<sup>st</sup> will be the start of our new Nursing Assistant Class in which we plan on training 7 students.

**Portola Campus:**

- Has 3 Full Time Nursing positions open at present
- 3- Traveler nurses now working.

**Loyalton Campus:**

- Has 1 Full time Nurse position open at present and 3 C.N.A. positions open
- 3 Travelers working, 1-LVN and 2-C.N.A.s

**FAMILY COUNCIL:**

This group is being formed to enhance the communication between the staff , residents, and family members.

- Portola's first meeting was March 14<sup>th</sup> at 2:30pm. Our Long Term Care Ombudsman was present.
- Loyalton is in the process of developing a Family Council.

**STATE ISSUES:**

- Annual survey is still due, last yearly survey was 5/2022.
- State Surveyor was here on 3/11/24 and investigated 3 self reported incidents in Portola and 4 in Loyalton and another anonymous complaint. No deficiencies for all.
- 2 new FRI for Loyalton as of 3/18/24 , fall with injury and sexual abuse- pending state

Eastern Plumas Health Care  
Board Report  
Tracy Studer Director of Clinics

Thursday, March 28, 2024

On Friday March 1, 2024, Ashley Cairnes became the first of three employees to pass the Medical Assistant certification test. With completion of many hours of online training through the US Career Institute under her belt, Ashley passed the exam on her first attempt. Passing this exam on the first try is extraordinary. Her co-workers and I are so excited for Ashley and proud of her accomplishment.

The new Loyaltan Medical Clinic continues to head in a positive direction for final licensure. On Monday, March 18, 2024, the RHC Onsite Ready Report was submitted to the Center for Medicare and Medicaid Services. The Loyaltan Medical Clinic is now within a six-week window for the unannounced survey that will be completed by CMS.

On March 21, 2024, Katie Gearhart, Kelsey Henson and I conducted interviews for Registration Clerks with the intention in making use of their skills for other projects as well as the important role of registering patients. These projects include assisting with referral coordination, and review and monitoring of insurance which has become more challenging with the introduction of Partnership Health on January 1, 2024. Additionally, the new Registration Clerks would be available in the future to assist in data collection for grants.

In accordance with EPHC policy and CMS guidelines, the Bi-Annual Evaluation of Clinics took place on Monday, March 25, 2024. Invitations were sent to Marci Hughes, Michael Plessas, Christina Potter, Brinley West, Katy Bynum, Katie Gearhart and Kelsey Henson. A detailed discussion focused on utilization of services provided, number of patients served in 2022 and 2023, a review of active and closed patient health records and a review of EPHC policies and procedures. Final thoughts and input from the group will be used to strengthen clinic services provided at EPHC.

# Eastern Plumas Health Care

## Board Report

Jim Burson- Director of Rehabilitation

Date: March 28, 2024

Reporting for December, January, February

1. **I'm very pleased to inform you that Shannon Luckovich-Alsup, CCC-SLP, will be holding monthly Speech Therapy clinics, starting in April!**

She is the founder of Sierra Swallow Solutions and has been contracted with us since October to perform Flexible Endoscopic Evaluation of Swallowing procedures. She is now available for evaluation and treatment of **all** other Speech, Language, Swallow and Cognitive needs our patients may have.

Shannon will see Outpatients, Skilled Nursing and Swing bed/Inpatients. With 11+ years of experience and a very warm, professional demeanor, Shannon is an excellent complement to the EPHC Rehab Services team!

2. Our Skilled Nursing and Inpatient/Swing bed therapists have kept busy since last report, thanks to the SNF census and Swing bed admissions. We have four P.T., three O.T. and now a Speech Pathologist on staff to serve these patients.
3. The Outpatient census over the last 3 months is up 1.5% year over year. New patient referrals are up 51.2% over the same time period. I anticipate these numbers will climb in the coming months with Speech and Pediatric therapy services coming onboard in April.
4. The opening of our Pediatric therapy clinic at the Loyalton SNF campus has been pushed to late April. Jennifer Weissensee, Occupational Therapist, has been working closely with Stan Peiler and his crew. We look forward to promoting her services!

5. Same Day Cancellations for December through February averaged 1.45 per day. This remains below our goal of no more than 2.0 per day. The other Quality Indicator I am tracking is the number of tablet surveys completed each month for our Therapy and Wellness Center. Our goal is 7 completed surveys per month and we are averaging 8.3 year to date.

Eastern Plumas Health Care  
Board Report  
Joanna Garneau, Program Manager

Thursday, March 28, 2024

- California Advancing and Innovating Medi-Cal (CalAIM) Enhanced Care Management (ECM)
  - Current populations served:
    - At Risk for Avoidable ED or Hospital Utilization
    - Pregnant and Postpartum
    - At Risk for Long Term Care
    - Nursing Facility Transition to Community
  - Currently serving 26 members, served 30 total since May 2023
  - Conducting outreach on 35 members
  - CalAIM Funding
    - \$608,014 through DHCS PATH CITED
      - \$299,530.77 received June 2023
      - \$50,065.64 received November 2023
      - \$127,967.61 requisitioned January 2024
        - ECM Supervisor and ECM Case Manager salary and benefits, second SUV, office supplies, BP cuffs, cell phones
      - Remaining amount to be requisitioned throughout 2024
    - Awarded \$36,000 through IPP for CalAIM billing and IT support
    - Application for \$1,763,453 for renovation of second floor Nifty Thrifty for CalAIM office space, and ECM salary and benefits for 3<sup>rd</sup> care manager
  - Anthem created a recognition program so they could recognize Venissa Irwin for her outstanding efforts providing ECM services



**Anthem Blue Cross Medi-Cal**

December 5 at 5:15 PM · 🌐

...

Anthem would like to recognize Venissa Irwin, Lead Care Manager (LCM) with Eastern Plumas Health Care, for going above and beyond with an Enhanced Care Management (ECM) member. Venissa proactively worked with the transportation team weeks before a medical consultation to ensure that the member met all his medical needs for a two-hour roundtrip ride to and from the medical facility.

Venissa is passionate about her work in the ECM program and indeed advocates for every member she cares for. Venissa's work as an LCM is genuinely inspiring. It exemplifies the whole-person, interdisciplinary approach to care that addresses members' clinical and non-clinical needs through systematic care coordination.

Thank you for all your great work, Venissa!

- COVID-19 Test to Treat Equity grant
  - Shelter deployment training scheduled for the last week of June
    - DeeDee and Stan coordinating a team: internal, city and county
  - Project Total Cost: \$487,756.66

- CDPH total funding \$456,766
  - EPHC to contribute \$30,990.66
  - EPHC's contribution 6.35%
- Equity and Practice Transformation (EPT) Direct Payment Program (Clinics)
    - EPHC's population focus: adults with preventative care needs
    - \$600,000 over a five year period
    - \$10,000 already received for completing organizational assessment
    - 29% of applicants were accepted or 211 of 719
    - 4% of applicants selected were large health systems
      - Most are small / independent practices and FQHCs
  - Partnership HealthPlan of California Programs
    - CalAIM QIP
    - PCP QIP (Clinics)
    - HQIP (Hospital)
    - Provider Recruitment
    - Provider Retention Initiative
  - Program Management Impact Report

<b>Program</b>	<b>Funding / Incentive / Grant Award (awarded)</b>	<b>Type (grant, direct payment, quality program)</b>	<b>Anticipated amount (upcoming)</b>
Behavioral Health Integration Incentive	\$110,000.00	quality program	
CalAIM PATH CITED R1	\$608,014.00	grant	
CalAIM PATH CITED R3		grant	\$1,763,452.53
CSNSGP (California State Non Profit Security Grant Program)		grant	\$253,683.00
EPT (Equity Practice and Transformation Grant)	\$600,000.00	direct payment	
EPT pre app tasks (PHC)	\$10,000.00	other	
Flex Care Conference / Training 2024	\$1,500.00	grant	
Flex Care Grant 2024	\$15,000.00	grant	
IPP R2	\$36,000.00	grant	
PI 2023 (Promoting Interoperability)	\$200,000.00	quality program	
PI 2024 (Promoting Interoperability)		quality program	\$200,000.00

QIP PY4	\$894,220.79	quality program	
QIP PY5	\$1,081,062.00	quality program	
QIP PY6		quality program	\$1,607,414.35
QIP PY7		quality program	\$975,933.31
SHIP 2022-2023	\$12,836.00	grant	
SHIP 2023-2024	\$13,011.00	grant	
SHIP 2024-2025		grant	\$13,011.00
SHIP ARP	\$258,376.00	grant	
Test To Treat COVID-19 Equity Grant	\$456,766.00	grant	
USDA 2023	\$50,000.00	grant	
USDA 2024		grant	\$50,000.00
<b>TOTAL</b>	<b>\$4,346,785.79</b>		<b>\$4,863,494.19</b>

- Supported \$4,346,785.79 June 2022 to current
  - does not include CalAIM program revenue anticipated \$463,000 over 5 years, and Anthem and California Health and Wellness incentive programs
- Currently supporting additional potential of \$4,863,494.19

**Eastern Plumas Health Care**  
**Financial Statements – Board Report**  
**February 2024**

**Summary**

This report will cover year-to-date financials through February 29, 2024, compared to year-to-date through February 28, 2023.

Total Patient Revenues were higher than last year by \$1,986,857. This represents a 6% increase. Total Operating Expenses were higher than last year by \$302,276. This represents a 1% increase. Our bottom line improved over last year by \$1,320,708 or 30%.

**Revenues (Year-to-Date)**

Overall, total Inpatient Revenues were higher than last year by \$875,745, with Skilled Nursing Revenues higher than last year by \$977,290. Pro Fees were higher than last year by \$171,196. Total Outpatient Revenues were higher than last year by \$1,104,848 and Clinic Revenues were less than last year by \$164,932.

**Expenses (Year-to-Date Current Year Compared to Year-to Date Last Year)**

**Salaries and Benefits:** Combined Salaries and Benefits were higher by \$317,068.

**Purchased Services:** Purchased Services were less by \$443,785.

**Professional Fees:** Professional Fees were higher by \$136,954

**Repairs & Maintenance:** Repairs & Maintenance were less by \$29,041.

**Utilities:** Utilities were higher by \$145,394.

**Supplies:** Supplies were less by \$85,275.

**Depreciation Expense:** Depreciation Expense was higher by \$96,254.

**Other Expenses:** Other Expenses were higher by \$111,232. These include training, travel, and dues and subscriptions.

**Revenue Cycle**

Gross Accounts Receivable as of February 29, 2024 was \$17 million. This is an 86% increase over last year. We are continuing to work towards reducing this balance.

**Balance Sheet**

Total Cash decreased 20.29%. Net AR increased 44.20% and Net Fixed Assets increased 10.02%. Total Liabilities decreased 33.25%.

**Additional Information**

Days cash on hand on February 29, 2024, was 111. February 28, 2023, days cash on hand was 133. We have spent \$1,829,448 on capital equipment so far this year. We funded \$1,883,653 in IGT's in February and another \$889,691 this month. We expect to receive \$8,657,566 funds before the end of the fiscal year. Our Fund Balance increased by \$4,457,681 or 20.07%.



**Eastern Plumas Health Care**  
**Income Statement**  
**DRAFT**  
**Year-to-Date Comparative**

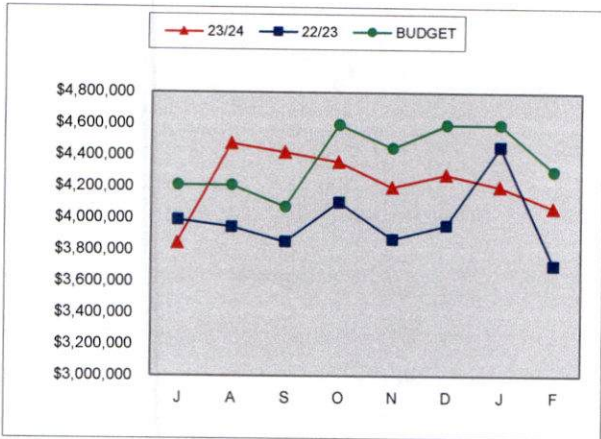
	% Net Pt Revenue	Year- to-Date 02/29/2024	Year- to-Date 02/28/2023	\$ Variance
<b>1 REVENUE</b>				
2 Inpatient Revenue		\$ 1,244,245	\$ 1,648,290	\$ (404,045)
3 Inpatient Revenue - Swing Bed		\$ 1,329,000	\$ 1,026,500	\$ 302,500
4 Inpatient Revenue - SNF		\$ 7,147,790	\$ 6,170,500	\$ 977,290
Inpatient Revenue		\$ 9,721,035	\$ 8,845,290	\$ 875,745
5 All Pro Fees		\$ 2,529,147	\$ 2,357,951	\$ 171,196
7 Outpatient Revenue		\$ 17,919,495	\$ 16,814,647	\$ 1,104,848
8 Clinics		\$ 3,683,650	\$ 3,848,582	\$ (164,932)
9 Total Patient Revenue		\$ 33,853,327	\$ 31,866,470	\$ 1,986,857
11 Contractual Allowances		\$ (12,735,927)	\$ (11,892,054)	\$ (843,873)
12 Charity Discounts		\$ (75,253)	\$ (86,191)	\$ 10,938
13 Other Allowances		\$ (244,008)	\$ (198,661)	\$ (45,347)
14 Bad Debt		\$ (491,291)	\$ (537,974)	\$ 46,683
15 Total Deductions		\$ (13,546,479)	\$ (12,714,880)	\$ (831,599)
16 Net Patient Revenue		\$ 20,306,848	\$ 19,151,590	\$ 1,155,258
17 % of Gross Revenue		59.98%	60.10%	-0.11%
18 Meaningful Use Revenue		\$ -	\$ -	\$ -
19 Quality Payments		\$ -	\$ 232,180	\$ (232,180)
20 IGT Payments		\$ 2,245,289	\$ 70,844	\$ 2,174,445
21 Other Operating Revenue		\$ 44,147	\$ 240,134	\$ (195,987)
22 Total Operating Revenue		\$ 22,596,284	\$ 19,694,748	\$ 2,901,536
<b>23 EXPENSES</b>				
24 Salaries and Wages	53.4%	\$ (10,851,132)	\$ (10,982,769)	\$ 131,637
25 Employee Benefits	23.0%	\$ (4,663,710)	\$ (4,215,005)	\$ (448,705)
26 Professional Fees - Medical	11.5%	\$ (2,345,247)	\$ (2,224,137)	\$ (121,110)
27 Professional Fees - Other	0.6%	\$ (120,627)	\$ (104,783)	\$ (15,844)
28 Supplies	9.2%	\$ (1,861,671)	\$ (1,946,946)	\$ 85,275
29 Purchased Services	17.6%	\$ (3,565,763)	\$ (4,009,548)	\$ 443,785
30 Insurance	1.7%	\$ (354,723)	\$ (304,628)	\$ (50,095)
31 Rental and Leases	0.2%	\$ (49,520)	\$ (46,138)	\$ (3,382)
32 Repairs and Maintenance	2.6%	\$ (520,379)	\$ (549,420)	\$ 29,041
33 Utilities and Telephone	4.3%	\$ (872,042)	\$ (726,648)	\$ (145,394)
34 Depreciation Amortization	4.2%	\$ (844,414)	\$ (748,160)	\$ (96,254)
35 Other Expenses	3.2%	\$ (640,017)	\$ (528,785)	\$ (111,232)
36 Total Operating Expenses	131.4%	\$ (26,689,243)	\$ (26,386,967)	\$ (302,276)
37 Income From Operations	-20.2%	\$ (4,092,959)	\$ (6,692,219)	\$ 2,599,260
38 Tax Revenue	-2.1%	\$ 433,600	\$ 395,931	\$ 37,669
39 Non Capital Grants and Donations	-0.9%	\$ 180,404	\$ -	\$ 180,404
40 Interest Income	-2.0%	\$ 407,365	\$ 227,149	\$ 180,216
41 Interest Expense	0.7%	\$ (139,407)	\$ (154,667)	\$ 15,260
42 Non-Operating Income (Expenses)	-0.4%	\$ 87,370	\$ 1,779,471	\$ (1,692,101)
43 Total Non-Operating Gain (Loss)	-4.8%	\$ 969,332	\$ 2,247,884	\$ (1,278,552)
44 Net Income	-15.4%	\$ (3,123,627)	\$ (4,444,335)	\$ 1,320,708
45 Operating Margin %		-18.11%	-33.98%	15.87%
46 Net Margin %		-13.82%	-22.57%	8.74%
47 Payroll as % of Operating Expense		58.13%	57.60%	

**Eastern Plumas Health Care**  
**Comparative Balance Sheets - Board Report**  
**DRAFT**  
**Dates as Indicated**

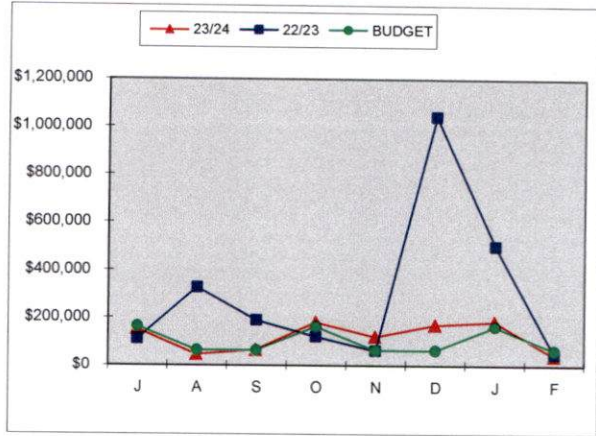
	FYE as of 2/29/24	FYE 2/28/2023	FYE 2/28/2022	FYE 2/28/2021	FYE 2024-2023	
					\$ Change	% Change
<b>Assets</b>						
<b>Current Assets</b>						
Cash	\$ 997,517	\$ 1,251,360	\$ 1,361,150	\$ 687,489	\$ (253,843)	-20.29%
Short-term Investments (LAIF)	\$ 10,859,002	\$ 12,872,845	\$ 27,375,475	\$ 19,908,959	\$ (2,013,843)	-15.64%
<b>Total Cash and Equivalents</b>	<b>\$ 11,856,519</b>	<b>\$ 14,124,205</b>	<b>\$ 28,736,626</b>	<b>\$ 20,596,448</b>	<b>\$ (2,267,686)</b>	<b>-16.06%</b>
Patient Accounts Receivable	\$ 17,352,646	\$ 9,338,523	\$ 5,867,729	\$ 5,336,358	\$ 8,014,123	85.82%
Accounts Receivable Reserves	\$ (9,286,045)	\$ (3,744,325)	\$ (2,138,587)	\$ (1,976,056)	\$ (5,541,720)	148.00%
<b>Net Accounts Receivable</b>	<b>\$ 8,066,601</b>	<b>\$ 5,594,199</b>	<b>\$ 3,729,142</b>	<b>\$ 3,360,302</b>	<b>\$ 2,472,402</b>	<b>44.20%</b>
<b>% of Gross Account Receivables</b>	<b>46.5%</b>	<b>59.9%</b>	<b>63.6%</b>	<b>63.0%</b>		
Inventory	\$ 590,702	\$ 481,936	\$ 450,850	\$ 262,207	\$ 108,766	22.57%
Other Assets	\$ 542,931	\$ 817,014	\$ 296,438	\$ 658,922	\$ (274,083)	-33.55%
<b>Total Other Assets</b>	<b>\$ 1,133,633</b>	<b>\$ 1,298,950</b>	<b>\$ 747,287</b>	<b>\$ 921,129</b>	<b>\$ (165,317)</b>	<b>-12.73%</b>
<b>Total Current Assets</b>	<b>\$ 21,056,753</b>	<b>\$ 21,017,353</b>	<b>\$ 33,213,055</b>	<b>\$ 24,877,879</b>	<b>\$ 39,400</b>	<b>0.19%</b>
<b>Fixed Assets</b>						
Land	\$ 1,166,344	\$ 1,166,344	\$ 1,123,344	\$ 1,123,344	\$ -	0.00%
Buildings	\$ 15,220,840	\$ 15,218,416	\$ 14,878,413	\$ 14,837,671	\$ 2,424	0.02%
Capital Equipment	\$ 16,411,290	\$ 15,320,049	\$ 14,839,189	\$ 14,372,618	\$ 1,091,241	7.12%
In Progress	\$ 3,385,744	\$ 2,394,949	\$ 493,703	\$ -	\$ 990,795	41.37%
<b>Total Plant &amp; Equipment</b>	<b>\$ 36,184,218</b>	<b>\$ 34,099,757</b>	<b>\$ 31,334,649</b>	<b>\$ 30,333,632</b>	<b>\$ 2,084,460</b>	<b>6.11%</b>
Accumulated Depreciation	\$ (23,938,454)	\$ (22,968,891)	\$ (22,081,321)	\$ (21,045,234)	\$ (969,563)	4.22%
<b>Net Fixed Assets</b>	<b>\$ 12,245,764</b>	<b>\$ 11,130,866</b>	<b>\$ 9,253,329</b>	<b>\$ 9,288,397</b>	<b>\$ 1,114,897</b>	<b>10.02%</b>
<b>Total Assets</b>	<b>\$ 33,302,517</b>	<b>\$ 32,148,220</b>	<b>\$ 42,466,384</b>	<b>\$ 34,166,277</b>	<b>\$ 1,154,297</b>	<b>3.59%</b>
<b>LIABILITIES AND RETAINED EARNINGS</b>						
<b>Current Liabilities</b>						
Accounts Payable	\$ 952,524	\$ 1,182,434	\$ 777,650	\$ 742,280	\$ (229,910)	-19.44%
Accrued Payroll & Benefits	\$ 1,406,593	\$ 2,208,726	\$ 1,297,751	\$ 1,060,803	\$ (802,133)	-36.32%
Other Current Liabilities	\$ 5,161	\$ 1,947,340	\$ 6,766,383	\$ 12,556,892	\$ (1,942,179)	-99.73%
<b>Total Current Liabilities</b>	<b>\$ 2,364,278</b>	<b>\$ 5,338,501</b>	<b>\$ 8,841,784</b>	<b>\$ 14,359,974</b>	<b>\$ (2,974,223)</b>	<b>-55.71%</b>
<b>Long-Term Liabilities</b>						
Loans	\$ 4,267,663	\$ 4,596,825	\$ 4,902,430	\$ 5,343,740	\$ (329,162)	-7.16%
Capitalized Leases	\$ -	\$ -	\$ -	\$ -	\$ -	0.00%
<b>Total Long Term Liabilities</b>	<b>\$ 4,267,663</b>	<b>\$ 4,596,825</b>	<b>\$ 4,902,430</b>	<b>\$ 5,343,740</b>	<b>\$ (329,162)</b>	<b>-7.16%</b>
Deferred Revenue	\$ -	\$ -	\$ -	\$ -	\$ -	0.00%
<b>TOTAL LIABILITIES</b>	<b>\$ 6,631,941</b>	<b>\$ 9,935,326</b>	<b>\$ 13,744,214</b>	<b>\$ 19,703,714</b>	<b>\$ (3,303,385)</b>	<b>-33.25%</b>
<b>Fund Balance</b>	<b>\$ 26,670,576</b>	<b>\$ 22,212,895</b>	<b>\$ 28,722,170</b>	<b>\$ 14,462,562</b>	<b>\$ 4,457,681</b>	<b>20.07%</b>
<b>TOTAL LIABILITIES AND FUND BALANCE</b>	<b>\$ 33,302,517</b>	<b>\$ 32,148,220</b>	<b>\$ 42,466,384</b>	<b>\$ 34,166,277</b>	<b>\$ 1,154,297</b>	<b>3.59%</b>

# EASTERN PLUMAS HEALTH CARE MONTHLY FINANCIAL GRAPHS FOR THE YEAR ENDED JUNE 30, 2024

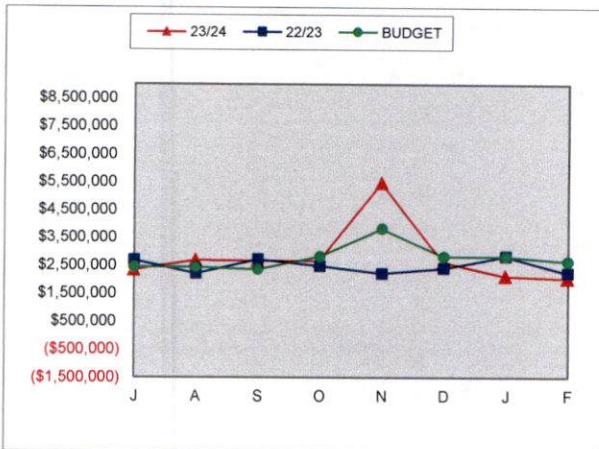
## 1. GROSS PATIENT REVENUE



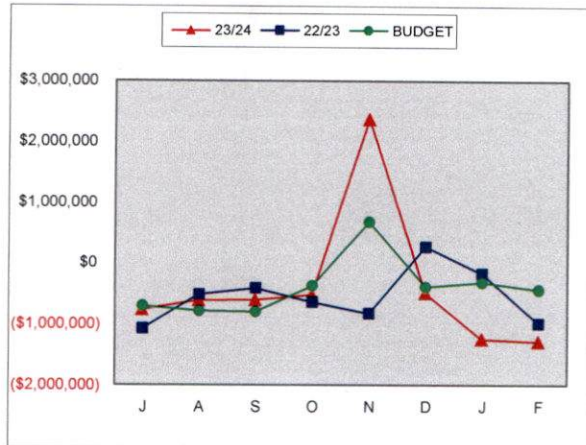
## 4. NON-OPERATING INCOME



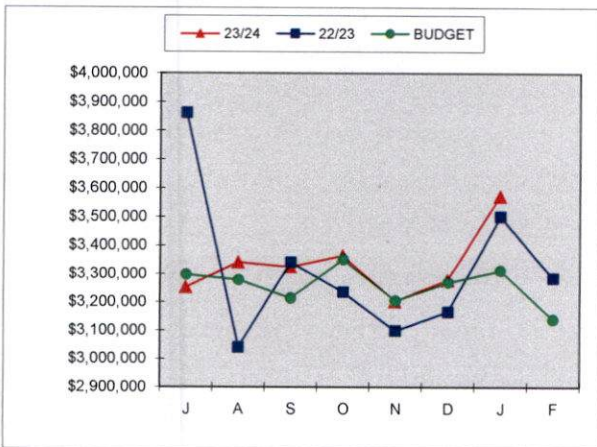
## 2. ESTIMATED NET REVENUE



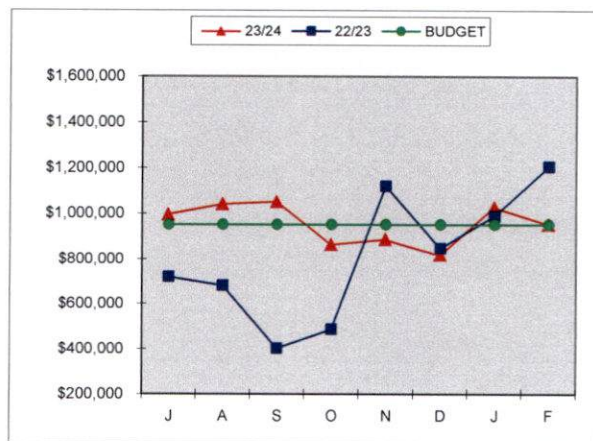
## 5. NET INCOME (LOSS)



## 3. OPERATING EXPENSES

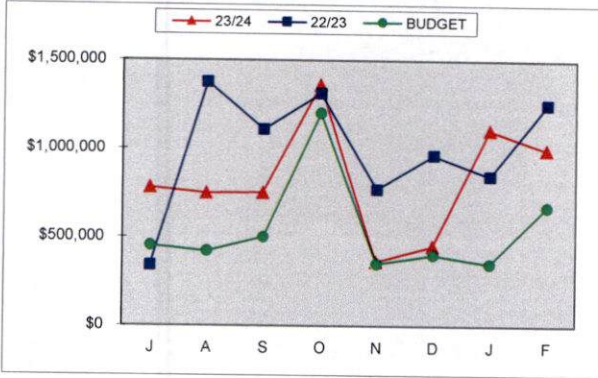


## 6. ACCOUNTS PAYABLE

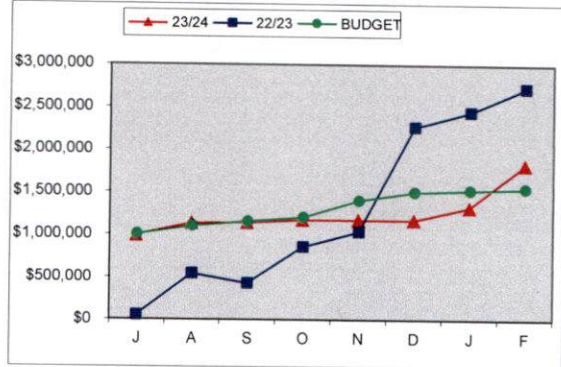


**EASTERN PLUMAS HEALTH CARE  
MONTHLY FINANCIAL GRAPHS  
FOR THE YEAR ENDED JUNE 30, 2024**

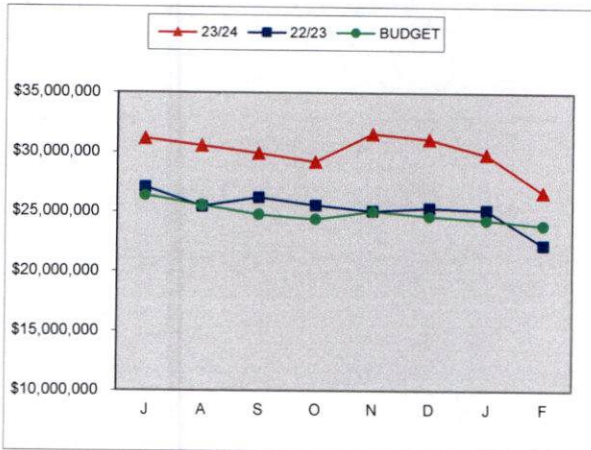
**7. OPERATING CASH**



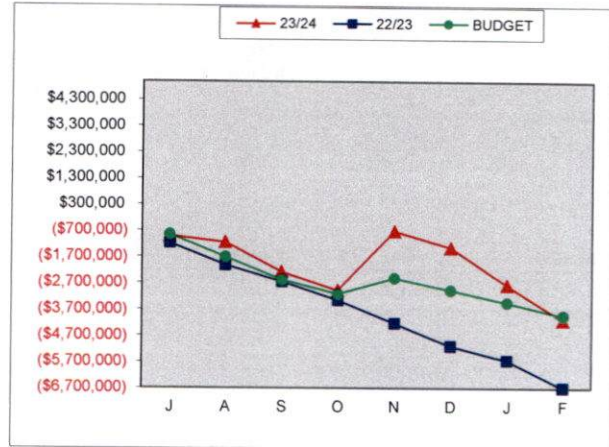
**10. CAPITAL EXPENDITURES-YTD**



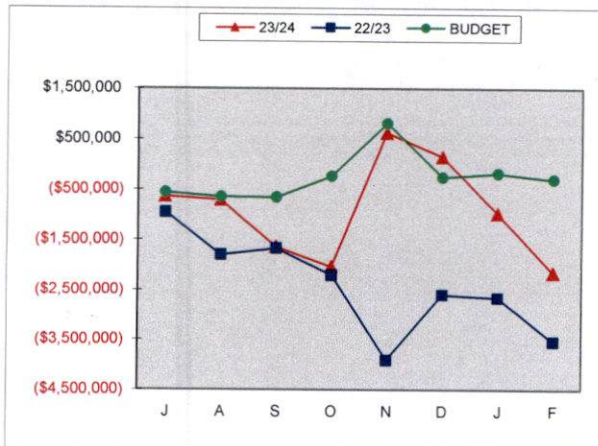
**8. FUND BALANCE + NET INCOME (LOSS)**



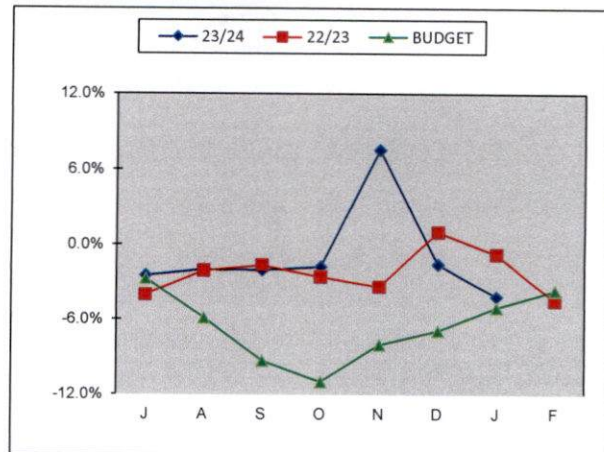
**11. YEAR TO DATE OPERATING INCOME (LOSS)**



**9. EARNINGS BEFORE INTEREST, DEPRECIATION & AMORTIZATION**



**12. RETURN ON EQUITY**





**Eastern Plumas Health Care  
Board Report  
Executive Summary**

**Date: March 28, 2024**

**OPERATIONAL OVERVIEW:**

EPHC is evaluating changing from the planned Cerner installation of the long-term care EMR module and moving to the Point Click Care platform this year. Point Click Care (PCC) has acquired our current LTC software provider (AHT) and will sunset that product at the end of 2024. A detailed vetting process has been in place since the announcement, and we are working with Cerner to extract the LTC services from our subscription.

From July-December 2023, EPHC has been providing financial compensation to the Beckwourth Fire District to support their ongoing volunteer response to all EMS medical calls. This funding has been used to provide an on-call stipend for BFD volunteers which has assisted with retention and recruitment for the department. Funding assistance was scheduled to end on December 31<sup>st</sup> based on the November election results for the new fire district. Although the ballot initiative was successful, the Fire District is not expected to receive additional funding until after the fiscal year. To ensure continued response by BFD for EMS medical calls, I have extended the MOU until the end of our fiscal year in order for both organizations to collaborate on future grant or County funding.

**2024 STRATEGIC OBJECTIVES – UPDATE (Through February 29th)**

For the 2024 calendar year we have several strategic objectives to improve operations and our care delivery to the community. These will be monitored monthly with progress reports provided to the Board.

- Reduce annualized turnover by 7% with emphasis on the reduction of turnover within the first 12 months of employment.
  - Through February YTD we have had 12 new hires which annualized represents a decrease of 30 hires over 2023. This is anticipated given a lower amount of open positions listed, but will increase in April with the initiation of our next CNA training program. We have had 13 terminations during the period which included a decrease of 50% from January to February and annualized is at the same level over 2023 results. We were awarded a \$15,000 flex care grant in March and will use the funding to provide leadership and communication training to managers, supervisors, and team lead staff. The onsite training sessions will be held June 3<sup>rd</sup>-5<sup>th</sup> and a follow up session in August.
- Exceed the net income budget for the 2023/24 fiscal year and achieve positive net income performance.
  - Through February our net income performance is exceeding budget and \$1,320,708 over the same period last year. The remaining IGTs were funded in February and March with receipt anticipated by May. The total IGT funding will be approximately 8.6m with a 5.5m increase to net income.

- Increase days cash on hand to the June 2023 performance level (200) by July 1, 2024.
  - February days cash on hand was expected to decrease due to the IGT funding (\$1.88m), and a similar decrease will occur in March with the second IGT funded for \$889,691. With the ongoing collection of A/R post Cerner implementation and the receipt of IGT funding before the fiscal year end, we continue to be on track to achieve our 200-day target.
- Secure grant funding for CalAim program expansion to include additional office/client meeting areas.
  - Grant information has been submitted and a funding decision is pending mid-year.
- Add additional provider/community services to the Loyalton Clinic campus. Explore grant opportunities for dental services.
  - The dental services grant application draft is currently under final review and will be submitted by 3/30. We have engaged an outside recruitment company for assistance with physician candidates for our Portola and Loyalton clinic locations.
- Increase patient experience survey responses over 2023 totals and meet 4-5 star national certification standards.
  - Through February we have received 112 surveys across all service lines. This represents an annualized total of 672 surveys which is under our goal of 1000. To increase the number of responses we have initiated two action plans. First, the admitting department will manage the survey tablets for lab and radiology and request feedback from patients upon conclusion of scheduled services. Second, additional signage and a raffle drawing program have been established in the Rehabilitation department and clinics to encourage patient feedback. We have seen a significant increase in responses in March for the clinics and anticipate an increase in overall responses in the following months.
- Complete key projects – X-ray room replacement, Loyalton flooring project, EMS use of current Loyalton Clinic, MindRay installation, badge reader/security system, SNF basement project.
  - The MindRay central monitoring system remains on target to be operational in early April.
  - The fire panel replacement which has had multiple completed delays will be fully installed by April 12<sup>th</sup>. The badge reader project which was to follow the installation of the fire panel will be completed by April 30<sup>th</sup>.
  - New handrails are being installed at the Loyalton SNF in advance of starting the flooring replacement and will be fully installed by April 15<sup>th</sup>.
- Completion of all NPC/SPC seismic reporting requirements for 2024 and receipt of grant funding to offset costs through the SRHRP grant program.
  - All February reporting requirements were met. There has not been any legislative modifications to the 2030 requirements for rural hospitals, but discussions continue with the Hospital Association.

**COMPLIANCE PROGRAM:**

There were no compliance reviews initiated for the period of February 17th through March 25th.

# AGENDA ITEM COVER SHEET

<b>ITEM</b>	CAH Committee Consent Agenda
<b>RESPONSIBLE PARTY</b>	Donna Dorsey, RN, BSN Emergency Room Manager
<b>ACTION REQUESTED?</b>	For Board Action
<b>BACKGROUND:</b> During the February 28, 2024 CAH Committee meeting, the committee made the following consent agenda item recommendations to the Board of Directors.	
<b>SUMMARY/OBJECTIVES:</b> Approval of the following consent agenda items: Annual Policy Review: <ul style="list-style-type: none"><li>• Infection Prevention</li><li>• Administration</li><li>• Radiology</li><li>• Dietary</li><li>• Nursing</li><li>• Human resources</li><li>• Ambulance</li><li>• Rehabilitation</li><li>• Clinic</li></ul>	
<b>SUGGESTED DISCUSSION POINTS:</b> None	
<b>SUGGESTED MOTION/ALTERNATIVES:</b> Move to approve CAH Committee Consent Agenda as presented.	
<b>LIST OF ATTACHMENTS:</b> List attached.	

**Policy List:**

<b>Title</b>	<b>Area</b>
Annual Employee Health Evaluation	IP
Call Off Policy	Admin
COVID-19 Guidelines	IP
Critical Radiology Results	Radiology
Dietary Services	Dietary
Dietitian Assessments on Acute Care Floor	Dietary
Emergency Department Log	Nursing
Hand Hygiene	IP
Hospital Clinical Staff Scheduling	Nursing
Influenza Prevention	IP
Interdepartmental Transfers	HR
Lead Apron Storage, Cleaning and Maintenance	Radiology
Mammography Compliance Requirements	Radiology
Mammography Patient Complaints	Radiology
Mammogram Scheduling Protocol	Radiology
Management of Contrast Extravasation in CT	Radiology
Patient Care Reports (PCR) and Proper Distribution	Ambulance
Patient Contact and Scene Authority	Ambulance
Patient Recall for Diagnostic Imaging	Radiology
Patient Shielding	Radiology
Pregnancy Testing for Imaging Patients	Radiology
Radiology Supervisor Responsibilities	Radiology
Rehabilitation Services Department Modalities	Rehab
Rehabilitation Services Department Staffing Requirements	Rehab
Repeat Films Magnification Views	Radiology
Rural Health Clinic Policy and Procedure Manual (Rev-All Clinics)	Clinic
Staffing and Radiology Call in Guidelines	Radiology
Staging of Ambulances	Ambulance
Staging (Pending Law Enforcement Clearance)	Ambulance