

### REGULAR MEETING OF THE BOARD OF DIRECTORS AGENDA Thursday, February 4, 2021 at 3:30 p.m.

Portola Medical Clinic Conference Room, Portola, CA

\*This is the rescheduled meeting from January 28, 2021 canceled due to inclement weather.

ATTENTION: As permitted by Governor Newsom's Executive Order N-29-20 proclaiming a State of Emergency in the State of California, the February 4, 2021 Board of Directors meeting will be held in a virtual setting. The Board meeting location at the EPHC Clinic Conference Room will not be accessible to the public. The meeting is accessible to the public via Hangouts Meet (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 Jessica Folchi at jessica.folchi@ephc.org who will swiftly resolve such request.

The Board meeting is accessible to the public via live streaming at: <u>meet.google.com/wii-fpej-upu</u> Or by phone at: 1.407.440.0269 PIN: 720 083 054#

		Presenter(s)	I/D/A	Page(s)
1.	<u>Call to Order</u>	Gail McGrath	А	
2.	<u>Roll Call</u>	Gail McGrath	Ι	
3.	Board Comments	Board Members	I/D	
	• Deletions/Corrections to the Posted	Agenda		

4. <u>Public Comment</u> 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. Under Government Code Section 54954.2 – Brown Act, the Board cannot take action on any item not on the agenda. 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.

5.	<u>Consent Calendar</u>	Gail McGrath	I/D/A	
	A. Agenda			1-2
	B. Meeting Minutes of 10.27.20 Ad-I	Hoc Meeting		3
	C. Meeting Minutes of 12.3.20 Board	l Meeting		4-7
	D. Meeting Minutes of 12.3.20 Orga	nizational Meeting		8
	E. Meeting Minutes of 12.3.20 Finan	ce Committee		9-10
	F. Meeting Minutes of 1.18.20 Speci	al Board Meeting		11-25
6.	<u>Auxiliary Report</u>	Gail McGrath	I/D	
7.	Staff Reports			
	A. Infection Control/COVID-19	Michelle Romero	I/D	
	<b>B.</b> Chief Nursing Officer Report	Penny Holland	I/D	
	C. Clinic Director Report	Rhonda Grandi	I/D	
	<b>D.</b> HR Director Report	Lori Tange	I/D	

J	,			
<ul><li>E. Chief Financial Officer Report</li><li>F. SNF Director of Nursing Report</li><li>G. EPHC 12 Days of Cheer</li></ul>	Katherine Pai Lorraine Nob Jessica Folchi	le	I/D I/D I/D	26-37
8. <u>Chief Executive Officer Report</u>	Doug McCoy		I/D/A	38-39
9. <u>Policies</u> A. Policy Review	4 6 11 . 6	11 (1 D	I/D/A	40-41
The CAH Committee recommends <u>Annual Policy Review</u> • Administration • Radiology • Clinic	the following fo	r approval by the Boa	rd of Directo	)TS:
10. Audit Presentation	Jerrel Tucker,	JWT & Associates	I/D/A	42-46
<ul> <li>11. <u>Committee Reports</u></li> <li>A. Finance Committee - proposal to pa</li> <li>B. QA Committee</li> </ul>	Board Membe ay off Plumas B		I/D/A at 6% interes	st rate
<ul><li>12. <u>Board Member Vacancy</u></li><li>A. Appointment of New Board Memb</li></ul>	Gail McGrath er		I/D/A	
13. <u>Board Closing Remarks</u>	Board Membe	ers	I/D	
<ul> <li>14. <u>Closed Session</u></li> <li>A. Public Employee Performance Eval</li> <li><i>CEO</i></li> <li>D. Harring (Harlth and Safeta Code 2)</li> </ul>	× ×		I/D/A 957)	
<b>B.</b> Hearing (Health and Safety Code 3 Subject Matter: Staff Privileges	2155)			
<ul> <li>Provisional 1 Year Appointm</li> </ul>	ent			
<ul> <li>Dr. Walter Luchsinger I</li> </ul>	De Obarrio	Telemedicine, Psych	iatry	
• Dr. Darcy Trenkle		Telemedicine, Psych	•	
• Dr. Archana Lucchesi		Telemedicine, Radio	logy	
Courtesy 2 Year Re-Appointr				
<ul><li>Dr. Mindy Cooper-Smit</li><li>Dr. Daniel Stoll</li></ul>	ĥ	Pathology Family Medicine		
• Dr. Rob Adams		Family Medicine		
• Dr. Charles Cox		Internal Medicine		
<ul> <li>Allison O'Brien, PA</li> </ul>		Physicians Assistant		
15. <u>Open Session Report of Actions</u> Taken in Closed Session	Gail McGrath		Ι	
16. <u>Adjournment</u>	Gail McGrath		А	

The next regularly scheduled meeting of the Board of Directors of Eastern Plumas Health Care is February 25, 2021 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 Tuesday, October 27, 2020 Electronic Ad-Hoc Meeting

## 1. <u>Proposed Changes to MEC By-Laws:</u>

Email was sent via Doug McCoy, CEO, at 11:55am.

- Per our board meeting last week, we are proposing the following changes to our current bylaws regarding our MEC (Medical Executive Committee):
  - Current bylaws have the MEC consisting of the following members
    - Chief of Staff (currently open)
    - Vice Chief of Staff (currently open)
    - o CEO
    - o Medical Director for Emergency Services (Dr. Swanson)
    - Medical Director for In-patient Services (Dr. Swanson)
    - CNO (non-voting member)
    - Clinic Director (non-voting member)
  - We proposed the following additions to MEC
    - Medical Director for Clinics voting member
    - Medical Director for SNFs voting member
    - $\circ$  Nurse Practitioner Representative non-voting member

## 2. Action Taken via Email:

AYES: Director McGrath, Director Johnson, Director Whitfield, Director West, and Director Swanson Abstention: None NAYS: None

## 3. Board Comments

No Board comment was received.

### EASTERN PLUMAS HEALTH CARE DISTRICT REGULAR MEETING OF THE BOARD OF DIRECTORS MINUTES Thursday, December 3, 2020 at 9:30 a.m.

## 1. Call to Order

Meeting was called to order at 9:35 a.m.

## 2. <u>Roll Call</u>

Board: Gail McGrath, Board Chair; Paul Swanson, M.D., Vice Chair; Teresa Whitfield, Board Member; Harvey West, Board Member

Staff in attendance: Doug McCoy, CEO; Katherine Pairish, CFO; Lori Tange, Human Resources Director; Rhonda Grandi, Director of Clinics; Donna Dorsey, ER Manager; Penny Holland, CNO; Lorraine Noble, SNF DON; and Jessica Folchi, Executive Assistant

Absent: Nichole Johnson, Board Member

### 3. Board Comments

No Board comment was received.

### 4. Public Comment

No comment was received.

### 5. Consent Calendar

ACTION: Motion was made by Director McGrath, seconded by Director Swanson to approve all items on the consent calendar.

AYES: Directors Swanson and Whitfield Abstention: Director Johnson NAYS: None

### 6. Auxiliary Report

Nothing to report.

### 7. Staff Reports

Staff reported on COVID-19 response and actions being taken.

- Chief Nursing Officer Report
  - Penny Holland reported that there will be no elective procedures at the hospital in December due to COVID. Average of 2 swing patients per week and the traffic in the ER is picking up due to potential COVID. Beginning on December 14<sup>th</sup>, all patient care employees will be COVID tested due to a new state mandate. EPHC will be receiving 2 rounds of vaccines this month from Plumas County Public Health.
- Clinic Director Report
  - Rhonda Grandi expressed concerns that the new Clinic Restructure is detrimental to patient care. The clinics are still averaging 1.9 new patients per day and resuming telehealth visits with the raise in COVID cases. Mrs. Grandi has been exploring new funding sources that hinge on the currently vacant Patient Care Coordinator position.

### • HR Director Report

### Lori Tange

• Lori Tange reported that there were 6 full time hires in October and November and another 6 set to start in December. This quarter has had a 3% turnover rate: 18% annualized.

# Penny Holland

Rhonda Grandi

Market wage scale review is in process and incentives have been added for hard to schedule shifts on the nights and weekends.

• Chief Financial Officer Report

Katherine Pairish

- See attached October financial reports.
- SNF Director of Nursing Report
  - Lorraine Noble reported that no residents have contracted COVID and weekly testing remains for everyone. Only compassionate care visits are allowed currently once family has a negative COVID test. Visits are being conducted via Skype, Facetime, and as the glass doors. Debbie Gilmer is retiring from the Activities Assistant position after 35 years. Dr. Phen is also retiring this month.

# 8. <u>Chief Executive Officer Report</u>

Overall operations for October we off plan for the first time during the fiscal year due to higher than anticipated labor costs for traveler positions/overtime resulting from increased employee COVID cases and costs for COVID testing. Overall revenue met October projections to include the receipt of IGT revenue which had also been budgeted for the month. EPHC continues to operate with a positive net income for the fiscal year and is exceeding budgeted expectations by 1.06M year to date. COVID case rates both locally and in the surrounding counties increased significantly during November. While testing continues on a weekly basis for all SNF employees, weekly testing will be initiated for all hospital employees beginning in December per CDC guidelines. We are having continued challenges in accessing testing kits for our lab equipment, and continue to send most tests to PDH or Lab Corp. To date we continue to prevent any positive results for SNF residents and have increased additional PPE utilization to include N95 and face mask use in patient care areas starting in December. Hospital, SNF, and outpatient service access has been modified to increase screening and restrict visitation in all areas. All EPHC staff and management meetings will be held virtually until case rates decrease to acceptable levels.

Due to the increased rates in both Plumas and Washoe County, our scheduled 'Ignite the Patient Experience' training session scheduled for 12/8-12/10 has been rescheduled for 3/3-3/4. QUALITY/REGUALATORY:

A COVID compliance review of the SNF campuses by CDPH was completed on 11/10. No deficiencies were identified. QA data has been included in the Board packet for tracking/trending results for Q1 of the fiscal year (July-September). HCAHPS scores for overall hospital rating are 80% versus the state average of 69%. ER metrics are at or above both state and national averages with a 96% recommendation rate. Our key improvement metric is quietness in the hospital area. A visual decibel monitor has been installed in the nursing area to identify and remind staff to properly manage noise levels to improve patient satisfaction.

# CAPTIAL PROJECTS:

Ongoing campus improvement projects have been either completed or initiated to improve our customer presentation and service delivery.

- Replacement of Portola SNF windows Bid approved
- Remodel of the lobby/entrance carpet installation to be completed the week of 11/30.
- Loyalton ambulance building roof replacement Bid approved
- Graeagle and Loyalton clinic generators Bid approved and a grant was submitted 10/30 for funding coverage.
- Repair of all acute patient room wall heating units Bid approved
- SNF boiler repair project completed
- Central supply remodel project completed pending flooring replacement.
- Loyalton wander guard replacement system ordered with installation anticipated by mid-December.

# Lorraine Noble

Doug McCoy

• Employee access badge readers installed at four locations to prevent unauthorized access (COVID prevention)

# MEDICAL STAFF CONTRACT VALUATIONS (FMV)

EPHC has initiated an agreement through our District Counsel with ECG Management Consulting to provide a contract review and ongoing fair market valuation (FMV) for all independent physician contracts. This process will ensure our corporate compliance with payment rates, contract language, and terms for both new and existing independent contractor agreements. FMV and contract reviews will begin December 1, 2020.

# VERIZON TOWER PROJECT

Due to community concerns raised during the City Council public hearings, EPHC has initiated monthly RF testing across the campus to monitor levels prior to and after the installation of the proposed cell tower. RF levels from multiple locations will be logged and reported monthly through EOCC. November results reported in the safe range for the five locations tested. To decrease community exposure, EPHC initiated a full replacement of fluorescent lighting to LED. Through November 35% of the campus had been completed. Due to cost and labor, the remaining fixtures will be changed over the next 90 days and reported through EOCC.

Safety issues regarding helicopter landing have been reviewed with REMSA/Care Flight leadership. They have reported that the tower proposal does not present a current risk. However, EPHC has contacted a FAA consulting group recommended by Care Flight to review our landing area and provide recommendations. We will be coordinating with Care Flight during this review process to ensure the highest level of safety is maintained.

## 9. Policies

Discussion was held, approved with minor changes.

**ACTION:** Motion was made by Director Whitfield, seconded by Director McGrath to approve the policies as submitted with minor changes.

AYES: Directors Swanson and West NAYS: None

ABSENT: Director Johnson

# 10. Committee Reports

- A. QA Committee: Director McGrath reported that she is impressed with how robust the information and participation is in the QA Committee.
- B. Finance Committee: Director Swanson reported that revenue is up and indicators are looking good.

# 11. Board Closing Remarks

Director West announced is his resignation from the Board due to personal issues effective immediately. Direction McGrath asked Director West as his final act to look into the issues with the parking and snow removal at the Graeagle Clinic.

# Open Session recessed at 10:30 a.m.

# 12. Closed Session

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

Discussion was held on a privileged item.

## 13. Open Session Report of Actions Taken in Closed Session

The Board returned at approximately 11:26. No action taken during closed session.

## 14. Adjournment

Meeting adjourned at 11:28 a.m.

### EASTERN PLUMAS HEALTH CARE DISTRICT REGULAR MEETING OF THE BOARD OF DIRECTORS MINUTES Thursday, December 3, 2020 Organizational Meeting

### 1. Call to Order

Meeting was called to order at 9:32 am.

## 2. Roll Call

Board: Gail McGrath, Board Chair; Paul Swanson, M.D., Vice Chair; Teresa Whitfield, Board Member; and Harvey West, Board Member

Staff in attendance: Doug McCoy, CEO; Katherine Pairish, CFO; Lori Tange, Human Resources Director; Rhonda Grandi, Director of Clinics; Donna Dorsey, ER Manager; Penny Holland, CNO; Lorraine Noble, SNF DON; and Jessica Folchi, Executive Assistant

Absent: Nicole Johnson, Board Member

## 3. Consent Calendar

ACTION: Motion was made by Director Swanson, seconded by Director Whitfield to approve all items on the consent calendar.

AYES: Directors McGrath and West Abstention: Director Johnson NAYS: None

## 4. <u>Board Chair Comments</u> No Chair comment was received.

- 5. <u>Board Comments</u> No Board comment was received.
- 6. <u>Public Comment</u>

No comment was received.

### 7. Annual Organizational Meeting

**a.** Resolution 288: Meeting Dates for 2021 **ACTION**: Motion was made by Director Swanson, seconded by Director West to approve Resolution 288:

AYES: Directors McGrath and Whitfiled Abstention: Director Johnson NAYS: None

### 8. Adjournment

Meeting adjourned at 9:34 a.m.

### EASTERN PLUMAS HEALTH CARE DISTRICT MEETING OF THE STANDING FINANCE COMMITTEE OF THE BOARD OF DIRECTORS MINUTES Thursday, December 3, 2020 at 8:30 a.m.

## 1. Call to Order

Meeting was called to order at 8:38 a.m.

## 2. Roll Call

Present: Paul Swanson, M.D., Board Member; Harvey West, Board Member

Staff in attendance: Doug McCoy, CEO; Katherine Pairish, CFO; Penny Holland, CNO; Jessica Folchi Executive Assistant

### 3. Consent Calendar

The consent calendar was approved as submitted.

Motion: Director West, Seconded by: Director Swanson

## 4. Board Comments

Director Harvey West submitted his resignation due to personal reasons effective immediately.

## 5. Public Comments

No comment was received.

## 6. CFO Report

### **Report of October and Year to Date Financials**

**Summary:** The month of October 2020 was another productive month with regard to Gross Patient Revenue. We exceeded budget by \$194,793. However, Operating Expenses for the month were over budget by \$142,877. This was due mainly to the uptick in Purchased Services, Salaries and Wages and Professional Fees. We received \$540,000 in PRIME IGT from the Clinics, which contributed to the Net Income in the amount of \$41,520.

**Revenues:** Year-to-Date Inpatient Revenue was over budget by \$45,232. Outpatient Revenue was over budget by \$782,476. Cardiology, Emergency, Lab, Nursing, Pharmacy, Radiology and Rehab all posted revenues over budget. Clinic Revenue posted over budget by \$37,332. Year-to-date Ambulance revenue was under budget by \$107,739 with billable runs dropping in October to 53. **Expenses:** Total Operating Expenses for the four months ended October 31, 2020 were under budget by \$55,824.

Salaries and Benefits: Year-to-Date Combined Salaries and Benefits were under budget by \$88,754.

Professional Fees: Year-to-Date Professional Fees were under budget by \$23,736.

<u>Repairs & Maintenance:</u> Year-to-Date Repairs & Maintenance were under budget by \$82,061 <u>Supplies</u>: Year-to-Date Supplies were under budget by \$7,691.

<u>Purchased Services:</u> Year-to-Date Purchased Services were over budget by \$195,005. This included architectural fees, payments to our outside lab for COVID testing and travelers for Lab, SNF and Respiratory.

<u>Depreciation Expense</u>: Year-to-Date Depreciation Expense was under budget by \$10,030. <u>Other Expenses</u>: Other expenses were under budget by \$31,311. These include training, travel, and dues and subscriptions. **Revenue Cycle**: Gross Accounts Receivable ended the month at \$5.7M. Gross Accounts Receivable days at October 31, 2020 were 53. We budgeted 46 and best practice is 55. The uptick in AR days was mainly due to claims processing issues with one of our payers. Last month days in AR was 56, so we are seeing an improvement as the Business Office has been working with the payer.

**Balance Sheet**: Total Assets at October 31, 2020 were \$34,534,234 - An increase of \$13,983,203 over last year. As mentioned previously, included in total cash and current liabilities is \$12,520,291 total funding for Medicare Advance Payments, HHS Stimulus, and PPP loan. Additional Information: Days cash on hand at October 31, 2020 was 280. Without the Medicare Advance, HHS Stimulus and PPP funds, days cash on hand would be 109. October 31, 2019 days cash on hand was 83. We funded another PRIME IGT in the amount of \$552,886 on October 23rd and expect to receive returned funds in the amount of \$1,262,250 very soon.

## 7. Discussion Debt Pay Down

Approve paying off Plumas Bank loan of \$383,000 at 6% interest rate - will be added to the agenda next month for BOD approval.

Motion: Director West, Seconded by: Director Swanson.

## 8. Adjournment

Meeting adjourned at 9:09 a.m.

### EASTERN PLUMAS HEALTH CARE DISTRICT SPECIAL MEETING OF THE BOARD OF DIRECTORS MINUTES Monday January 18, 2021 at 1:00 p.m. EPHC Clinic Conference Room, Portola Campus, Portola, CA

## 1. Call to Order

Meeting was called to order at 1:00 p.m.

## 2. Roll Call

Board: Gail McGrath, Board Chair; Paul Swanson, M.D., Vice Chair; Teresa Whitfield, Board Member; and Linda Satchwell, Board Member.

Staff in attendance: Doug McCoy, CEO; Jessica Folchi, Executive Assistant

## 3. **Board Comments**

None.

4. <u>Public Comment</u> None.

## 5. Oath of Office

a. Gail McGrath swore in Linda Satchwell as the newest Director on the Board.

## 6. Interviews for Board Member

- a. 3 members of the community had submitted letters and resumes to be considered for the vacancy on the Board. (see attached to packet)
  - Augustine Corcoran
  - Dr. Edward Hughes
  - Dr. Robert Adams
- b. Each candidate was given the opportunity to introduce themselves. Each candidate was then asked the same questions from the Board around community involvement, relationship with EPHC, and their long term goals for the organization
- c. After the interview section, Board members held a discussion on the strengths and opportunities of having each candidate on the Board. Chairman McGrath expressed her gratitude in having a difficult decision with 3 very qualified candidates.

ACTION: Teresa Whitfield motioned to have a roll call vote at the next regularly scheduled Board meeting (January 28, 2021) to appoint a candidate. Dr. Swanson seconded the motion. AYES: Directors McGrath and Satchwell NAYS: None.

## 7. Adjournment

Meeting adjourned at 2:50 p.m.

To the Board of Directors,

I want to express my desire for consideration to the open board position at Eastern Plumas Hospital District. I have been working at the emergency department at Eastern Plumas Health Care (EPHC) for over a year now and have enjoyed the beautiful area, friendly community and the fantastic staff. This work has developed into an opportunity for me to start working at the clinic as a family practice provider in January and broaden my connection with EPHC as well as the community.

My wife and 5 children have had a chance to come with me during my shifts in the emergency department. They have had a chance to explore the area and have fallen in love with it as well and have made several friends.

Currently, we are renting a place in Calpine and looking for a place to buy in Plumas or Sierra county. With the mountains, trees, lakes and streams it is the kind of area that my wife and I have wanted to raise our children in.

I have had past experience working in a rural medical setting. This occured in Dimmitt, TX. While in Dimmitt I was asked several times by the CEO to attend board meetings and give information from a medical practitioner's view on items the board was considering such as electronic medical record systems and nursing home construction. I have seen some of the considerations and decisions that have to be made in these meetings. As a member of the board I feel like I would be able to give helpful perspectives in multiple areas, particularly on clinical items that are being considered.

I know what a treasure it is to find a facility with good people. My experience is that EPHC has this, in addition to being in a beautiful setting and, in our experience, a wonderful, welcoming community. I would love to be able to participate more in helping the hospital district serve the community better through the contributions I could add.

Thank you for your consideration,

Robert Adams DO

# Robert Hess Adams, D.O.

104 Coates Ave.. Calpine, CA 801-722-9030 roberthessadams@gmail.com

# **Professional Experience**

### Talent Society, Plano, TX Family Practice Physician

- Rapid Response physician staffed in a COVID-19 ward of 30-120 patients.
- Intubating and initial vent settings, placing central venous access lines, arterial lines, chest tubes as well as responding to patients with cardiac arrest or deterioration in respiratory or cardiac status.

## Eastern Plumas Hospital, Portola, CA Family Practice Physician

- 24 hour and 48 hour staffing of the Emergency Department (ED) in a critical access hospital setting.
- Patients suitable for care in rural hospital setting were admitted and covered by ED physicians. Transfer arranged for those needing higher levels of care.
- Clinical management of admitted inpatients and Swing bed patients.

### Mayers Memorial Hospital, Fall River Mills, CA December 2018 - Present Family Practice Physician

- 24 hour and 48 hour staffing of the Emergency Department in a critical access hospital setting.
- Patients suitable for care in rural hospital were admitted to be followed by House Staff. Transfer arranged for those needing higher levels of care.

### Robert Hess Adams DO Inc., Auburn, CA Functional Medicine Clinic

• Evaluation and treatment of chronic medical conditions using functional/integrative medicine modalities

# GeissMed, Orange, CA

- Spearhead expansion of mobile geriatric company based in Southern California to the Sacramento area including the marketing and promotion to Independent Living, Assisted Living and skilled nursing facilities.
- Visit the residence of patients and provide clinical services to geriatric patients for management of acute and chronic conditions.

# Comphealth, Midvale, UT

• Staffed at the University of California, Davis clinic in Auburn and Rocklin California.

July 2020 - Present

September 2017 – Present

October 2019 - Present

September 2019 - June 2020

October 2018 - September 2019

• Provided care for urgent visits and long chronic medical conditions for all ages not able to be seen by primary provider.

## MED7 Urgent Care, Roseville, CA

September 2017 - September 2018

- Sole physician staffing Urgent care and overseeing a midlevel provider.
- Provide care for minor trauma, workers compensation and basic medical care. Patients were sent home or transferred to the hospital ED depending on their status.

## Plains Memorial Hospital Dimmitt, TX August 2013 – September 2017 Family Practice Physician

- Chief of Staff 2014 January 2018
- Medical care provided in clinic during the week.
- 24 hours once a week and 72 hours over the weekend one weekend a month coverage for the Emergency Department. Patients suitable for care in rural hospital admitted and followed as Inpatients.
- Nursing home census also maintained

## Chino Valley Medical Center, Chino, CA Family Practice Resident Physician

# Co-Chief Resident

• Voted 2010 Intern of the Year

## Penn State Hershey Medical Center, Hershey, PA July 2008 - June 2009 Pediatric Resident Physician

July 2010 - July 2013

• In the intern year I realized I would not be happy with a career in pediatrics.

# Education

## Touro College of Osteopathic Medicine – California, Vallejo, CA

 Doctor of Osteopathic Medicine degree Conferred June 2008

## Brigham Young University, Provo, UT

• B. S. degree in Exercise Science Conferred April 2003

# Certifications

Institute for Functional Medicine - Certified Practitioner	June 2018-Present
Kalish Institute - Mentorship (In process)	July 2018-Present
American Board of Osteopathic Family Physicians	2013-Present
Advanced Trauma Life Support	June 2014-June 2018
Advanced Cardiovascular Life Support	Sept 2016-Sept 2018
Professional Memberships	

Institute for Functional Medicine - Member Dec 2015 - Present

# Publications

Adams, R. (2015, October 29). Insights on Health. The Castro County News, pp. 6.

Adams, Robert. Matt Townsend. The Matt Townsend Show. byuradio, KBYU, 08-18-15, 09-01-15, 09-05-15. (rebroadcast on KDHN)

Adams D.O., R., Hager PhD., R. (2015). Cardiovascular Disease. Huntsman World Senior Games 2015 Program. 1 (11-14).

Wu Liu OMS IV, S. Tseng OMS IV, R. Adams D.O., Dr. I. Lopes D.O., B. Heller D.O., Lally, J. D.O., A. Lin Ph.D. "High Yield of Doppler Ultrasound Arteriogram of Lower Extremity in Diabetics Suggests New Screening Modality and Criteria for PAD Surveillance". The Journal of the American Osteopathic Association, January 2014, Vol. 114, S5.

Krachenfels J, Adams R H, Kim S, Hsiao V, Sheppard J, Buenaflor G - Editors. Graduate Medical Education Survival Guide-Chino Valley Medical Center 2012-2013.

Keith Elliott, MD, Timothy Holmberg, MD, David Morgan, MD, Kyle Wright, MD, Robert Adams, DO, Tyler Sudweeks, MS3, Randall Dull, MD, PhD. Inter-observer Variability in Identifying Lung Comets with Ultrasonography. Western Anesthesia Residents Conference (WARC). Anaheim, CA April 30-May 2, 2010.

Adams, Robert, Conlee, Robert, (2001, January 1). Journal of Undergraduate Research- Brigham Young University. http://orca.byu.edu/Reports/Journals/2001journal.pdf.

# **Research Activities**

Chino Valley Medical Center- Chino, California Role: Administrative support

May 2013 - June 2013

Principal Investigator - A. Lin PhD

Description- Use of doppler ultrasound arteriography for lower extremity evaluation in diabetic at ages younger than 50 found peripheral arterial disease already present. Earlier monitoring age recommendations may help catch the disease earlier.

\*Abstract Accepted for Annual Research Conference and Publication by Journal of American Osteopathic Association

University of Utah- Salt Lake City, Utah Role: Research Assistant

July 2009 - June 2010

Principal Investigator- Randall Dull MD, PhD

Description: Pilot study to evaluate the measurement of perioperative expired nitric oxide (NO) in patients that undergo major surgery in an effort to predict heart failure postoperatively. My role was to search literature and begin the IRB proposal.

University of Utah- Salt Lake City, Utah January 2010 - June 2010 Role: Research Assistant Principal Investigator- Randall Dull MD, PhD Description: Recruit patients with risk factors for heart failure who are undergoing major surgery for pre and postoperative pulmonary ultrasound. The goal was to detect early onset of postoperative heart failure.

Touro University College of Osteopathic Medicine- Vallejo, California Summer 2005 Role: Research Assistant

Principal Investigator - Alan Miller PhD

**Description**: Investigate the influence of quinidine and cisapride on cardiac muscle HERG channels under varying concentrations of Na, K, and Mg. Our research was preliminary, investigating the possible adverse cardiac effect electrolyte imbalances may present in the presence of quinidine and cisapride.

Brigham Young University- Provo, UtahJan 2003 - April 2003Role: Research AssistantPrincipal Investigator - Ron Hager, PhD

**Description**: Assess the thickness of the tunica media and correlate these measurements with other risk factors for cardiovascular disease.

Utah Valley State College- Orem, Utah

Aug 2000 - Nov 2000

Role: Research Assistant

Principal investigator - Mark Bracken, PhD

Description: I coordinated a project between Utah Valley State College and Brigham Young University (BYU) to assess variance between individuals

Respiratory Rate and O2 saturation at 4,000 feet and 10,000 feet in an effort to determine susceptibility to acute mountain sickness.

\*I received funding for the project and the results were published in the undergraduate journal at BYU.

# **Experiences**

Guest lecturer, Brigham Young University, Provo, UT June 2016 Introduction to allied health profession lecture: Basic principles of functional medicine

Certified Coding Specialist TrainingJune 2012Overview of the coding procedures for assigning ICD-9 and CPT codesJune 2012

Biology Seminar, Utah Valley University, Orem, Utah

March 2010

Perioperative heart failure evaluation in at risk patients using ultrasound. Utility of intraoperative exhaled Nitric Oxide measurements in the evaluation of patients at risk for heart failure

Guest lecturer, Brigham Young University, Provo, UT Jan 2005, Jan 2006 Introduction to allied health profession lecture: Medical school application-Pitfalls to be aware of. What is Osteopathic medical school?

# **Volunteer Service**

## Plains Memorial Hospital, Dimmitt, TX Clinical Advisor, Castro County Hospital District (CCHD) Wellness Program

• Founding member and sole clinician providing educational lectures for the hospital based community outreach program to promote wellness for the community.

## The Church of Jesus Christ of Latter-day Saints Branch President, Hereford Branch

- Preside over congregation of 140 members
- Monitor physical and spiritual needs of congregation
- Focus efforts of the women's organization (Relief Society), men's organization (Elder's Quorum), Young Men's and Young Women's as well as the children's organization (Primary) to address needs.
- Regularly meet with congregation members as needed and offer encouragement/support

# Dimmitt & Nazareth Independent School District Concussion Oversight Team

• Evaluate athletes and monitor symptom resolution prior to their ability to enter the return to play protocol for 2 school districts in the county

# The Church of Jesus Christ of Latter-day Saints

# Elder's Quorum

- Served as secretary, councilor to the president and president of the men's organization
- Organize efforts of men in the congregation to provide service to all members of the congregation

# Montclair Clinic, Montclair, CA

# Family Practice Resident Physician

- Volunteer medical services in the evening one to three times a month
- Sole provider instructing medical students providing care to indigent population

# Chino Boxing Club, Chino, CA

# Family Practice Resident Physician

- Screening physical for youth participating in boxing tournament
- Provided medical coverage at tournament for athletes
- Directed efforts of other students and residents to provide coverage for tournament

## Special Olympics, Long Beach & Fountain Valley, CA June 2012, Dec 2012 Family Practice Resident Physician

May 2014 - April 2016 August 2001 - July 2012

June 2010 – July 2013

April 2016 - Present

Oct 2015 – Present

Aug 2012, Nov 2012, March 2013

May 2015 - Present

• Medical support staff to athletes and attendees at the events

## Montclair Health Fair, Montclair, CA Family Practice Resident Physician

- Screening BP, blood sugar, visual exam/structural exams and flu vaccination provided to low income population
- Oversaw efforts of interns/medical students participating

## San Bernadino County High Schools, Chino, CA Family Practice Resident Physician

• Perform physicals for students and athletes rotating in Ayala, Chino, Chino Hills and Don Lugo High Schools and functioned as supervising physician at high school football games

## The Church of Jesus Christ of Latter-day Saints Missionary, Canada Halifax Mission

- Proselyte by contacting people on the street or knocking on doors and provide service
- Last 5 months, served as Zone Leader organizing and encouraging the efforts of 10 missionaries in Dartmouth, Nova Scotia

October 2011 & 2012

July 1995 – July 1997

July 2011, 2012, 2013

# Edward C. Hughes, M.D.

P.O. Box 112 1575 Dream Maker Clio, California 96106 707-486-6551 echughesmd@gmail.com

December 14, 2020

Board of Directors Eastern Plumas Health Care 500 First Avenue Portola, California 96122

Dear Board members,

I am writing this letter to be considered for the current available board position. My name is Edward Hughes, known by family and friends as Ned. My wife of 37 years, Marcie, and I moved here in August of 2019. We have two married children.

My hospital experience began when I was a surgical tech in high school in Upstate New York. After attending medical school at New York Medical College, internship at Cleveland Clinic, orthopedic residency at University of Pennsylvania and a hand fellowship Wayne State University in Detroit, I started my private practice in Syracuse, New York. I did extensive reconstruction and hand surgery, as well as, associate professor at Upstate Medical Center for 15 years.

Marcie and I moved to California in 1985, where I had a successful private practice at Sutter Hospital in Vallejo performing reconstruction, total joint arthroplasties, hand surgery and lumbar spine surgery.

I have been on numerous boards throughout my career including New York State Board of Regents, president of the New York State Orthopedic Society, Onondaga County Medical Society and, most recently, Chief of Surgery at Sutter Hospital, Vallejo, CA. I am still an active practicing physician as a consultant in medical legal affairs for California Workers' Compensation. I am very familiar with the current state of affairs in medicine and the challenges ahead regarding provider availability and quality of care. I recently campaigned for the board of directors of Tahoe Forest Hospital in Truckee, an experience that was both challenging and enlightening. I believe these challenges to providing excellent healthcare in a rural community such as ours, should include someone who has devoted his life to quality care and a commitment to the patient.

Sincerely yours,

Ned Hughes

# EDWARD C. HUGHES JR., M.D.

### **PERSONAL DATA**

Birth Date: March 16,1939

Birthplace: Syracuse, New York

### PRIVATE PRACTICE

Orthopedic Spine and Reconstructive Surgery

### EDUCATION

College:	Hamilton College, Clinton, N.Y.
	Bachelor of Arts, 1960
Medical School:	New York Medical School, New York City, N.Y.
	M.D. 1964
Internship:	Cleveland Clinic, Cleveland, Ohio
	Surgery, 1964-65
Residency:	Hospital of the University of Pennsylvania, Philadelphia
	Orthopedic Surgery, 1967-70
Fellowship:	Grace Hospital, Detroit, Michigan
	Hand Surgery, July 1970-December 1970

### **MILITARY SERVICE**

United States Army July 1965- July 1967

### CLINICAL EXPERIENCE

Private Practice 1971 - 1985, Syracuse, New York Private Practice 1985 - 2007, Vallejo, California Qualified Medical Examiner 2009 - present

### PROFESSIONAL SOCIETY MEMBERSHIPS

Diplomat, American Academy of Orthopedic Surgery Fellow, American College of Surgeons American Medical Association American Board of Orthopedic Surgeons American Association of Hand Surgeons California Orthopedic Association Bay Area Knee Society Solano Medical Society North American Spine Society Eastern Orthopedic Association New York State Society of Orthopedic Surgeons, President 1982-83 Medical Society of the State of New York Board of Regents of New York State State Representative on Emergency Medical Services Senator Lombardi Task Force on Medical Liability Onondaga County Medical Society, President 1983-84

### HOSPITAL AFFILIATIONS

Sutter Solano Medical Center, Active Staff 1990 - 2007 North Bay Medical Center, Courtesy Staff, 1990 - 2007 North Bay Medical Center, Active Staff, 1985-1990 Upstate Medical Center, Associate Professor Hand Surgery,1971 - 1985 Crouse -Irving Memorial Hospital, Active Staff, 1971 - 1985 St. Joseph's Hospital, Courtesy Staff, 1975 - 1985 BOARD CERTIFICATIONS

American Board of Orthopedic Surgeons, 1975

PUBLICATIONS

"Bilateral Avascular Necrosis of the Hip following Leriche Syndrome", Journal of Bone and Joint Surgery, 53A, 1971

"Adamantinoma of the Ischium", Journal of Bone and Joint Syndrome, 61A, 1980

"Bony Entrapment of the Superficial Nerve", Clinical Orthopedics, 185, 1984

# **AUGUSTINE CORCORAN**

# **Letter of Interest**

# **EPHC Board:**

I present this Letter of Interest because I wish to serve the community while assisting the board in its efforts to fulfill its mandate and goals. The advertisement that was sent out called for a willing Sierra County resident to fill the vacant Board Position. Knowing there is often a shortage of candidates and volunteers I decided to offer my time. My reasons for applying are really no more complicated than that. I profess no specialized knowledge of Health Care Systems nor do I possess specialized experience or qualifications in the field to speak of.

I am a 12 year resident of Sierra County and a 12 year employee of the Sierra Plumas School District. I own a home in Sierra Brooks where I live with my wife and two young boys. Currently I am the Social Studies Instructor and Teacher in Charge at Loyalton High School. I have coached Football, Basketball and Volleyball for the local High Schools and volunteer as a Little League Baseball Coach and Board Member.

To provide a more general idea of my life experience I have attached a basic resume which may help give you an idea of any skills or experience I may posses which could be of value while serving the board. A more detailed CV may be provided if you wish. Questions of course are welcome and I look forward to those and meeting you all at the 18 January Board Meeting.

Regards,

Augustine Corcoran Board Candidate

# AUGUSTINE CORCORAN HOME: 1 (530) 993-4633

CELL: 1 (530) 414-6945

EMAIL: guscorcoran68@gmail.com

# **EDUCATION**

- MA Business-Columbus IBS of Spain-ESENI Bolivia S.A.
- BA History-University of the Pacific-USA
- CTC Education Credential-CSU Monterey Bay-USA
- BTSA Clear Teaching Credential-SPJUSD-USA
- College Prep.-Admiral Farragut Naval Academy-USA

# **ADMINISTRATIVE EXPERIENCE**

- Principal AISB Cochabamba, Bolivia 2006-9
- Vice Principal AISB Bolivia 2005-6
- Lead Teacher-Downieville School K-12 USA 2013-16
- Coordinator RTI, TECH, CELDT, SACS, WASC -2001-21
- Vice Principal Longoipulotu College-Samoa 1994-5
- Teacher in Charge-Loyalton High School 2020-21

# **EDUCATION EXPERIENCE**

- 20 Years in *education* as a teacher, coach and administrator.
- Coached Varsity Football, Volleyball, Basketball and Tennis.
- Social Studies, English, Spanish, PE and Health.
- Nominated Young Teacher of the Year. Monterey Ca.
- Catholic Charities Citizenship Instructor.

# ADDITIONAL DATA POINTS, SKILLS AND EXPERIENCE

- 20 years overseas; Bolivia, S. Korea, Philippines and Samoa.
- Spanish Fluency: US State Dept. ACTFL score-Advanced High
- Peace Corps Bolivia 1997-2000
- Black Belt-Tae Kwon Do
- PADI Scuba License
- Certified Red Cross CPR, First Aid, AED

References, Recommendations and CV Available Upon Request.

# Eastern Plumas Health Care Financial Statements – Board Report December 2020

### <u>Summary</u>

We are half way through the 20/21 fiscal year. Year-to-date total Patient Revenue was \$19,733,147. This was \$235,862 over budget. Total Operating Expenses were \$14,527,690 and over budget by \$171,355. Year-to-date Net Income was \$133,881. Included in Other Operating Revenue was \$1,802,250 in PRIME IGT payments. Also included in Other Operating Revenue was \$130,471 in QA Fees and \$84,317 for COVID SHIP grant. Included in Total Operating Expenses was \$184,204 for COVID supplies and \$177,000 for COVID testing.

### **Revenues**

Year-to-Date Inpatient Revenue was under budget by \$113,810. Outpatient Revenue was over budget by \$378,347. Clinic Revenue was under budget by \$28,675. Ambulance revenue picked up in December. That department posted revenue for the month in the amount of \$296,108. This was under budget by \$36,992. Billable runs in December were 77. We budgeted 84.

### **Expenses**

Salaries and Benefits: Year-to-Date Combined Salaries and Benefits were over budget by \$8,807. Professional Fees: Year-to-Date Professional Fees were under budget by \$73,056. Repairs & Maintenance: Year-to-Date Repairs & Maintenance were under budget by \$128,430. Supplies: Year-to-Date Supplies were over budget by \$71,110. Purchased Services: Year-to-Date Purchased Services were over budget by \$325,821. This included architectural fees, payments to our outside lab for COVID testing and travelers. Depreciation Expense: Year-to-Date Depreciation Expense was under budget by \$6,926. Other Expenses: Other expenses were under budget by \$48,253. These include training, travel, and dues and subscriptions.

### Revenue Cycle

Gross Accounts Receivable ended the month at \$5.4M. Gross Accounts Receivable days at December 31, 2020 were 50. We budgeted 45 and best practice is 55.

### **Balance Sheet**

Total Assets at December 31, 2020 were \$33,868,093 - An increase of \$13,926,331 over last year. Included in total cash and current liabilities is \$12,522,049 total funding for Medicare Advance Payments, HHS Stimulus, and PPP loan.

### **Additional Information**

As mentioned, included in Other Operating Revenue for the month of December was \$84,317 for a COVID SHIP grant. We used these monies to purchase our COVID testing machine and screens for separation of patients in the various waiting areas. Days cash on hand at December 31, 2020 was 263. Without the Medicare Advance, HHS Stimulus and PPP funds, days cash on hand would be 100. December 31, 2019 days cash on hand was 78. We funded \$1,060,994 for HQAF6 IGT and will receive returned funds of approximately \$2,121,988 in March, 2021.

#### Eastern Plumas Health Care Income Statement For the Month of December 2020

		% Net Pt		Month-to-Date		% Net Pt			
<u> </u>		Revenue	Actual	Budget	\$ Variance	Revenue	Actual	Year-to-Date Budget	\$ Variance
	REVENUE		¢ 455.044	A 442 525	¢ 44.606		6 537.433	Å 400.40C	¢ 00.000
2	Inpatient Revenue - Acute Inpatient Revenue - Acute Pro Fees		\$ 155,211 \$ 13,751	\$ 113,525 \$ 14,215	. ,		\$ 527,122 \$ 42.120	\$ 428,126 \$ 46,455	
4	Inpatient Revenue - Swing Bed		\$ 72,000	\$ 104,620			\$ 662,000	\$ 570,480	, ,,,,,
5	Inpatient Revenue - SNF		\$ 626,800	\$ 681,332	\$ (54,532)		\$ 3,898,800	\$ 4,088,002	
6	Inpatient Revenue - Ancillary		\$ 160,632	\$ 177,147	\$ (16,515)		\$ 772,631	\$ 883,420	\$ (110,789)
	· · ·								
7	Inpatient Revenue		\$ 1,028,394	\$ 1,090,839	\$ (62,445)		\$ 5,902,673	\$ 6,016,483	\$ (113,810)
8	Outpatient		\$ 1,651,561	\$ 1,856,529	\$ (204,968)		\$ 11,330,041	\$ 10,951,694	\$ 378,347
9	Clinics		\$ 388,242	\$ 421,518	\$ (33,276)		\$ 2,500,433	\$ 2,529,108	
10	Total Patient Revenue		\$ 3.068.197	¢ 3,360,000	Ś (300.689)		\$ 19,733,147	ć 10.407.305	\$ 235.862
10	Total Patient Revenue		\$ 3,068,197	\$ 3,368,886	\$ (300,689)		\$ 19,733,147	\$ 19,497,285	\$ 235,862
11	Contractual Allowances		\$ (1,127,945)	\$ (1,265,112)	\$ 137,167		\$ (6,897,385)	\$ (7,234,414)	\$ 337,029
12	Charity Discounts		\$ 340	\$ (8,501)	\$ 8,841		\$ (22,218)	\$ (48,444)	\$ 26,226
13	Other Allowances		\$ (22,283)				\$ (91,233)		
14	Bad Debt		\$ (64,925)	\$ (56,629)	\$ (8,296)		\$ (429,646)	\$ (351,947)	\$ (77,699)
15	Total Deductions		\$ (1,214,813)	\$ (1,343,417)	\$ 128,604		\$ (7,440,482)	\$ (7,710,882)	\$ 270,400
							,		
16	Net Patient Revenue		\$ 1,853,384	\$ 2,025,469	\$ (172,085)		\$ 12,292,665	\$ 11,786,403	\$ 506,262
17	% of Gross Revenue		60.41%	60.12%	0.28%		62.29%	60.45%	1.84%
18	Meaningful Use Revenue		\$-	\$ -	\$-		\$-	\$-	\$-
19	Quality Payments		\$ -	\$ -	\$ -		\$ 130,471	\$ 68,970	\$ 61,501
20	IGT Payments		\$-	\$-	\$-		\$ 1,802,250	\$ 540,000	\$ 1,262,250
21	Other Operating Revenue		\$ 94,931	\$ 5,582	\$ 89,349		\$ 126,422	\$ 33,492	\$ 92,930
22	Total Operating Revenue		\$ 1,948,315	\$ 2,031,051	\$ (82,736)		\$ 14,351,808	\$ 12,428,865	\$ 1,922,943
22	Total Operating Revenue		\$ 1,946,515	\$ 2,031,031	\$ (82,730)		\$ 14,551,606	\$ 12,428,805	\$ 1,922,945
	EXPENSES								
24	Salaries and Wages	57.6%	\$ (1,068,440)		. ()===)	51.6%	\$ (6,341,698)	\$ (6,332,414)	\$ (9,284)
25	Employee Benefits	26.8%	\$ (497,099)	, ,		20.6%	\$ (2,535,672)		
26	Professional Fees - Medical	9.9%	\$ (183,832)		1	9.5%	\$ (1,170,290)	\$ (1,225,092)	
27	Professional Fees - Other	0.2%	\$ (3,937)		. ,	0.3%	\$ (36,334)		
28	Supplies	12.2%	\$ (226,299) \$ (245,778)		, ,	10.0%	\$ (1,233,347)		
29 30	Purchased Services Insurance	13.3% 1.7%	\$ (245,778) \$ (31,357)	, ,		10.5% 1.5%	\$ (1,292,021) \$ (187,303)		, , ,
31	Rental and Leases	0.3%	\$ (5,122)			0.3%	\$ (30,732)		
32	Repairs and Maintenance	2.8%	\$ (52,642)			3.1%	\$ (379,918)		
33	Utilities and Telephone	4.5%	\$ (84.068)		. ,	3.2%	\$ (393,313)		
34	Depreciation Amortization	6.2%	\$ (114,772)	\$ (112,715)	\$ (2,057)	5.4%	\$ (667,754)	\$ (674,680)	\$ 6,926
35	Other Expenses	2.1%	\$ (38,524)	\$ (42,931)	\$ 4,407	2.1%	\$ (259,308)	\$ (307,561)	\$ 48,253
36	Total Occurting Frances	137.7%	\$ (2,551,870)	\$ (2,425,502)	\$ (126,368)	118.2%	\$ (14,527,690)	¢ (44.256.225)	¢ (474.255)
30	Total Operating Expenses	157.7%	\$ (2,551,870)	\$ (2,425,502)	\$ (126,368)	116.2%	\$ (14,527,690)	\$ (14,356,335)	\$ (171,355)
37	Income From Operations	-32.6%	\$ (603,555)	\$ (394,451)	\$ (209,104)	-1.4%	\$ (175,882)	\$ (1,927,470)	\$ 1,751,588
38	Tax Revenue	-3.0%	\$ 55,875	\$ 50,417	\$ 5,458	-2.7%	\$ 329,790	\$ 302,502	\$ 27,288
39	Non Capital Grants and Donations	-0.3%	\$ 5,000		\$ 5,000	0.0%	\$ 6,000		
40	Interest Income	0.0%	\$ -	\$ -	\$ -	-0.7%	\$ 88,033	\$ 80,000	
41	Interest Expense	1.1%	\$ (21,275)	\$ (21,209)	\$ (66)	1.1%	\$ (131,014)		
42	Non-Operating Income (Expenses)	-0.2%	\$ 3,125	\$ 2,625	\$ 500	-0.1%	\$ 16,954	\$ 15,750	\$ 1,204
43	Total Non-Operating Gain (Loss	-2.3%	\$ 42,725	\$ 31,833	\$ 10,892	-2.5%	\$ 309,763	\$ 272,491	\$ 37,272
							÷ ••••/·•••		
44	Net Income	-30.3%	\$ (560,830)	\$ (362,618)	\$ (198,212)	1.1%	\$ 133,881	\$ (1,654,979)	\$ 1,788,860
45 (	Operating Margin %		-30.98%	-19.42%	-11.56%		-1.23%	-15.51%	14.28%
	Net Margin %		-28.79%	-17.85%	-10.93%		0.93%	-13.32%	14.25%
47			CA 0=0	64 F004				CA 770	
47	Payroll as % of Operating Expense		61.35%	61.58%		I I	61.11%	61.77%	

#### Eastern Plumas Health Care Income Statement 13-Month Trend Ended December 31, 2020

		Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
1	REVENUE													
2	Inpatient Revenue - Acute	\$ 190,994	\$ 171,236	\$ 125,134	\$ 85,618	\$ 95,497	\$ 144,892	\$ 26,344	\$ 30,231	\$ 60,895	\$ 128,427	\$ 79,032	\$ 73,326	\$ 155,211
3	Inpatient Revenue - Acute Pro Fees	\$ 12,964	\$ 13,523	\$ 8,439	\$ 6,682	\$ 7,643	\$ 13,599	\$ 2,313	\$ 2,261	\$ 5,676	\$ 8,106	\$ 6,251	\$ 6,075	\$ 13,751
4	Inpatient Revenue - Swing Bed	\$ 64,000	\$ 82,000	\$ 144,000	\$ 142,000	\$ 26,000	\$ 76,000	\$ 106,000	\$ 72,000	\$ 64,000	\$ 116,000	\$ 214,000	\$ 124,000	\$ 72,000
5	Inpatient Revenue - SNF	\$ 563,195	\$ 580,715	\$ 564,290	\$ 702,000	\$ 685,481	\$ 702,400	\$ 665,600	\$ 675,200	\$ 658,000	\$ 649,200	\$ 666,800	\$ 622,800	\$ 626,800
6	Inpatient Revenue - Ancillary	\$ 141,645	\$ 249,633	\$ 216,529	\$ 158,777	\$ 88,350	\$ 121,483	\$ 103,581	\$ 43,453	\$ 61,668	\$ 164,986	\$ 196,554	\$ 145,340	\$ 160,632
7	Inpatient Revenue	\$ 972,798	\$ 1,097,107	\$ 1,058,392	\$ 1,095,077	\$ 902,971	\$ 1,058,374	\$ 903,838	\$ 823,145	\$ 850,239	\$ 1,066,719	\$ 1,162,637	\$ 971,541	\$ 1,028,394
8	Outpatient	\$ 1,823,273	\$ 2,074,128	\$ 1,745,624	\$ 1.522.040	\$ 1,056,061	\$ 1,630,764	\$ 1.782.275	\$ 2.120.138	\$ 2,124,611	\$ 1,891,075	\$ 1.885.289	\$ 1,657,368	\$ 1,651,561
9		\$ 406,833	\$ 482,947	\$ 401,216	\$ 366,644	\$ 190,902	\$ 262,399	\$ 400,119	1 , , .,	\$ 395,680	\$ 441,672	\$ 466,443	\$ 388,798	\$ 388,242
		+,	+ .c_/c .:	+,	<i>+ ••••</i> ,•••	+	+,	+,===	Ţ	+,	+	<i>+</i> ,	+,	+
10	Total Patient Revenue	\$ 3,202,904	\$ 3,654,182	\$ 3,205,232	\$ 2,983,761	\$ 2,149,934	\$ 2,951,537	\$ 3,086,232	\$ 3,362,880	\$ 3,370,530	\$ 3,399,466	\$ 3,514,369	\$ 3,017,707	\$ 3,068,197
11	Contractual Allowances	\$ (1,135,671)	\$ (1,282,191)	\$ (1,222,002)	\$ (701,666)	\$ (1,266,196)	\$ (594,082)	\$ (1,005,169)	\$ (1,142,215)	\$ (937,672)	\$ (1,117,578)	\$ (1,404,731)	\$ (1,207,637)	\$ (1,127,945)
12	Charity Discounts	\$-	\$ (17,173)	\$ (21,867)	\$ (19,909)	\$ 316	\$ (37,472)	\$ (9,302)	\$ 52	\$ 5,618	\$ (387)	\$ (17,460)	\$ (10,381)	\$ 340
13	Other Allowances	\$ (24,822)	\$ 195	\$ (19,450)	\$ (20,579)	\$ (36,818)	\$ (32,604)	\$ (10,376)	\$ (9,799)	\$ (20,517)	\$ (18,670)	\$ (9,611)	\$ (10,349)	\$ (22,283)
14	Bad Debt	\$ (46,563)	\$ (68,011)	\$ (128,749)	\$ (73,472)	\$ 9,850	\$ (11,610)	\$ (38,433)	\$ (60,875)	\$ (97,443)	\$ (68,022)	\$ (97,996)	\$ (40,383)	\$ (64,925)
15	Total Deductions	\$ (1,207,056)	\$ (1,367,180)	\$ (1,392,068)	\$ (815,626)	\$ (1,292,848)	\$ (675,768)	\$ (1,063,280)	\$ (1,212,837)	\$ (1,050,014)	\$ (1,204,657)	\$ (1,529,798)	\$ (1,268,750)	\$ (1,214,813)
16	Net Patient Revenue	\$ 1,995,848	\$ 2,287,002	\$ 1,813,164	\$ 2,168,135	\$ 857,086	\$ 2,275,769	\$ 2,022,952	\$ 2,150,043	\$ 2,320,516	\$ 2,194,809	\$ 1,984,571	\$ 1,748,957	\$ 1,853,384
17	% of Gross Revenue	62.31%	62.59%	56.57%	72.66%	39.87%	77.10%	65.55%	63.93%	68.85%	64.56%	56.47%	57.96%	60.41%
- 10		<u> </u>	<u> </u>	<u>^</u>	<u>,</u>	<u>^</u>	<i>^</i>		<u>^</u>	<u>^</u>	<u>,</u>	<u> </u>	<u> </u>	<u> </u>
18 19	0	\$ - \$ -	<u>\$</u> - \$-	\$ - \$ -	\$ -	\$ - \$ 50.221	Ş -	Ś 218.130	Ş -	\$ -	\$ - \$ 108.036	\$ - \$ 321	Ş -	\$ -
20		\$ - \$ -	<u> -</u> 5 -	\$ - \$ -	ş - \$ -	\$ 50,221 \$ 3,814,192	\$ 4,014,605	\$ 218,130	Ş -	\$ - \$ -	\$ 108,036	\$ <u>321</u> \$ <u>523,267</u>	\$ 1,262,250	\$ -
20	,	\$ - \$ 7,838	\$ 87,337	\$	\$ 23,753	\$ 3,814,192	\$ 4,014,605	\$ 4,310	\$ 2,466	\$ 72,275	\$ 12,288	\$ 523,267 \$ 11,284	\$ 1,262,250 \$ 5,193	\$ <u>-</u> \$94.931
		<i>+</i> .,	\$ 87,337	\$ 7,257	\$ 23,753	\$ 4,205	\$ 11,080	\$ 4,310	, ,	\$ 12,215	\$ 7,239	\$ 11,284	\$ 5,193	\$ 94,931
22	Total Operating Revenue	\$ 2,003,686	\$ 2,374,339	\$ 1,820,421	\$ 2,191,888	\$ 4,725,704	\$ 6,302,060	\$ 2,245,392	\$ 2,152,509	\$ 2,392,791	\$ 2,322,352	\$ 2,519,443	\$ 3,016,400	\$ 1,948,315
23	EXPENSES													
24	Salaries & Wages	\$ (1,058,026)	\$ (1,097,449)	\$ (1,016,424)	\$ (1,075,743)	\$ (998,179)	\$ (1,016,136)	\$ (995,825)	\$ (1,035,560)	\$ (1,054,164)	\$ (1,016,621)	\$ (1,116,843)	\$ (1,050,070)	\$ (1,068,440)
25	Employee Benefits	\$ (397,887)	\$ (480,361)	\$ (409,547)	\$ (411,107)	\$ (380,632)	\$ (370,086)	\$ (370,344)	\$ (447,500)	\$ (394,504)	\$ (355,947)	\$ (422,165)	\$ (418,457)	\$ (497,099)
26	Professional Fees - Medical	\$ (201,211)	\$ (215,399)	\$ (177,198)	\$ (180,813)	\$ (137,063)	\$ (180,277)	\$ (202,588)	\$ (191,796)	\$ (198,153)	\$ (189,821)	\$ (212,565)	\$ (184,524)	\$ (183,832)
27	Professional Fees - Other	\$ (27,472)	\$ (23,302)	\$ (6,787)	\$ (13,418)	\$ (14,813)	\$ (15,440)	\$ (7,839)	\$ (5,249)	\$ (17,370)	\$ (6,578)	\$ (4,945)	\$ (7,855)	\$ (3,937)
28	Supplies	\$ (198,232)	\$ (201,587)	\$ (178,750)	\$ (199,522)	\$ (151,729)	\$ (148,196)	\$ (68,715)	\$ (188,428)	\$ (179,795)	\$ (201,692)	\$ (197,269)	\$ (239,863)	\$ (226,299)
29	Purchased Services	\$ (135,358)	\$ (129,258)	\$ (122,930)	\$ (178,158)	\$ (143,265)	\$ (127,556)	\$ (300,736)	\$ (164,166)	\$ (194,035)	\$ (192,446)	\$ (281,199)	\$ (214,397)	\$ (245,778)
30	Insurance	\$ (31,831)	\$ (29,409)	\$ (29,409)	\$ 39,081	\$ (29,409)	\$ (29,409)	\$ (29,073)	\$ (31,217)	\$ (31,217)	\$ (31,217)	\$ (31,217)	\$ (31,078)	\$ (31,357)
31	Rental and Leases	\$ (6,572)	\$ (6,572)	\$ (6,572)	\$ (6,572)	\$ (6,572)	\$ (8,236)	\$ (5,122)	\$ (5,122)	\$ (5,122)	\$ (5,122)	\$ (5,122)	\$ (5,122)	\$ (5,122)
32		\$ (58,351)	\$ (79,176)	\$ (118,832)	\$ (60,726)	\$ (77,954)	\$ (66,261)	\$ (59,178)	\$ (61,400)	\$ (83,704)	\$ (43,013)	\$ (63,115)	\$ (76,045)	\$ (52,642)
33		\$ (65,881)	\$ (70,304)	\$ (53,351)	\$ (56,319)	\$ (61,926)	\$ (72,718)	\$ (84,492)	\$ (39,007)	\$ (77,351)	\$ (48,639)	\$ (67,242)	\$ (77,007)	\$ (84,068)
34	Depreciation Amortization	\$ (93,816)	\$ (92,104)	\$ (92,414)	\$ (92,896)	\$ (89,455)	\$ (90,127)	\$ (187,118)	1 ( 1 )	\$ (107,956)	\$ (108,633)	\$ (113,490)	\$ (113,761)	\$ (114,772)
35	Other Expenses	\$ (87,393)	\$ (36,159)	\$ (19,374)	\$ (70,938)	\$ (22,667)	\$ (28,402)	\$ (184,222)	\$ (32,616)	\$ (91,542)	\$ (31,347)	\$ (34,884)	\$ (30,394)	\$ (38,524)
36	Total Operating Expenses	\$ (2,362,030)	\$ (2,461,080)	\$ (2,231,588)	\$ (2,307,131)	\$ (2,113,664)	\$ (2,152,844)	\$ (2,495,252)	\$ (2,311,203)	\$ (2,434,913)	\$ (2,231,076)	\$ (2,550,056)	\$ (2,448,573)	\$ (2,551,870)
37	Income From Operations	\$ (358,344)	\$ (86,741)	\$ (411,167)	\$ (115,243)	\$ 2,612,040	\$ 4,149,216	\$ (249,860)	\$ (158,694)	\$ (42,122)	\$ 91,276	\$ (30,613)	\$ 567,827	\$ (603,555)
38	Tax Revenue	\$ 50,417	\$ 50,417	\$ 50,417	\$ 50,417	\$ 50,417	\$ 50,417	\$ 50,417	\$ 50,417	\$ 55,875	\$ 55,875	\$ 55,875	\$ 55,875	\$ 55,875
39	Non Capital Grants and Donations	\$ 100	\$ 205,200	\$ 7,038	\$ -	\$ 786	\$ 62,038		\$ 1,000	\$ 5,000	\$ -	\$ -	\$ -	\$ 5,000
40	Interest Income	\$ -	\$ 32,244	\$ 1	\$-	\$ 18,890	\$ -		\$ 50,064	\$ -	\$ -	\$ 37,921	\$ -	\$ -
41	Interest Expense	\$ (11,646)	\$ (26,280)	\$ (26,223)	\$ (26,264)	\$ (29,891)	\$ (27,418)	\$ (6,387)	\$ (22,044)	\$ (22,139)	\$ (22,078)	\$ (21,663)	\$ (21,817)	\$ (21,275)
42	· · · · · · · · · · · · · · · · · · ·	\$ 926	\$ 425	\$ -	\$ 376	\$ 21,100	\$ 2,844	\$ 2,801	\$ 3,325	\$ 2,653	\$ 20	\$ -	\$ 7,880	\$ 3,125
43	Total Non-Operating Gain (Lo	\$ 39,797	\$ 262,006	\$ 31,233	\$ 24,529	\$ 61,302	\$ 87,881	\$ 46,831	\$ 82,762	\$ 41,389	\$ 33,817	\$ 72,133	\$ 41,938	\$ 42,725
44	Net Income	\$ (318,547)	\$ 175,265	\$ (379,934)	\$ (90,714)	\$ 2,673,342	\$ 4,237,097	\$ (203,029)	\$ (75,932)	\$ (733)	\$ 125,093	\$ 41,520	\$ 609,765	\$ (560,830)
45	Operating Margin %	-17.88%	-3.65%	-22.59%	-5.26%	55.27%	65.84%	-11.13%	-7.37%	-1.76%	3.93%	-1.22%	18.82%	-30.98%
-	Net Margin %	-15.90%	7.38%	-20.87%	-4.14%	56.57%	67.23%	-9.04%	-3.53%	-24.00%	5.39%	1.65%	20.21%	-28.79%
	Payroll as % of Operating Expense	61.64%	64.11%	63.90%	64.45%	65.23%	64.39%	54.75%	64.17%	59.50%	61.52%	60.35%	59.97%	61.35%
	arian as /o or operating Expense	01.04/0	07.11/0	05.50/0	04.43/0	05.23/0	04.33/0	54.7570	07.1//0	55.5070	01.52/6	00.3376	55.57/8	51.5576

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

		FYE FYE			FYE		FYE		FYE 2021-20	020	
	as o	of 12/31/20		as of 12/31/19		as of 12/31/18		as of 12/31/17		\$ Change	% Change
Assets											
Current Assets											
Cash	\$	976,578	\$	1,860,332			\$	972,573	\$	(883,754)	-47.51%
Short-term Investments (LAIF)	\$	19,029,412	\$	4,190,335	\$	3,002,070	\$	1,915,094	\$	14,839,077	354.13%
Total Cash and Equivalents	\$	20,005,990	\$	6,050,667	\$	3,456,319	\$	2,887,667	\$	13,955,323	230.64%
	Ŷ	20,003,550	Ŷ	0,000,007	Ý	3,430,313	Ý	2,007,007	Ŷ	13,333,323	230.0476
Patient Accounts Receivable	\$	5,361,920	\$	5,186,478	\$	5,215,460	\$	5,918,622	\$	175,442	3.38%
Accounts Receivable Reserves	\$	(2,052,928)	\$	(1,917,824)	\$	(2,221,457)	\$	(2,101,749)	\$	(135,104)	7.04%
Net Accounts Receivable	\$	3,308,991	\$	3,268,654	\$	2,994,003	\$	3,816,873	\$	40 227	1.23%
% of Gross Account Receivables	Ş	<b>5,508,991</b> 61.7%	Ş	<b>5,208,054</b> 63.0%	Ş	5 <b>2,594,003</b> 57.4%		<b>5,610,873</b> 64.5%	Ş	40,337	1.25%
Inventory	\$	256,399	\$	213,568			\$	200,598	\$	42,831	20.06%
Other Assets	\$	920,303	\$	364,788	\$		\$	749,608	\$	555,516	152.28%
Total Other Assets	\$	1,176,702	\$	578,355	\$	598,044	\$	950,206	\$	598,347	103.46%
Total Current Assets	\$	24,491,684	\$	9,897,676	\$	7,048,365	\$	7,654,746	\$	14,594,008	147.45%
Fixed Assets											
Land	÷	1 1 2 2 4 4	ć	1,120,209	<u>ہ</u>	048 686	ć	048 686	ć	2 125	0.28%
Land Buildings	\$ \$	1,123,344 14,811,132	\$ \$	14,143,123	· ·		\$ \$	948,686 10,400,251	\$ \$	3,135 668,009	4.72%
Capital Equipment	\$	14,281,888	\$	13,388,939	\$		\$	12,398,475	\$	892,949	6.67%
In Progress	\$	-	\$	919,953	\$		\$	1,927,872	\$	(919,953)	-100.00%
Total Plant & Equipment	\$	30,216,364	\$	29,572,224	-		\$	25,675,284	\$	644,140	2.18%
Accumulated Depreciation	\$	(20,839,955)	\$	(19,528,138)	Ş	6 (18,286,986)	\$	(17,329,411)	\$	(1,311,817)	6.72%
Net Fixed Assets	\$	9,376,409	\$	10,044,086	\$	9,698,940	\$	8,345,873	\$	(667,677)	-6.65%
Total Assets	\$	33,868,093	\$	19,941,762	\$	16,747,305	\$	16,000,619	\$	13,926,331	69.84%
LIABILITIES AND RETAINED EARNINGS											
Current Liabilities											
Accounts Payable	\$ \$	663,120	\$ \$	706,715		-	\$ \$	677,745	\$ \$	(43,595)	-6.17%
Accrued Payroll & Benefits Other Current Liabilities		889,131 12,528,095	\$ \$	1,225,757 310,062		, ,		1,197,725 1,065,020	\$ \$	(336,626) 12,218,033	-27.46% 3940.52%
		,,	,	,				,,-		, _,	
Total Current Liabilities	\$	14,080,346	\$	2,242,534	\$	1,971,367	\$	2,940,490	\$	11,837,812	527.88%
Long-Term Liabilities											
Loans	\$	5,784,249	\$	6,194,623	\$	6,524,090	\$	3,569,542	\$	(410,374)	-6.62%
Capitalized Leases	\$	-	\$	-	\$	50,156	\$	160,803	\$	-	0.00%
				<i></i>		6 574 946				(440.074)	6.620/
Total Long Term Liabilities	\$	5,784,249	\$	6,194,623	\$	6,574,246	\$	3,730,345	\$	(410,374)	-6.62%
Deferred Revenue	\$	-	\$	-	\$	303,429	\$	660,195	\$	-	0.00%
	Ι.										
TOTAL LIABILITIES	\$	19,864,596	\$	8,437,157	\$	8,849,042	\$	7,331,029	\$	11,427,439	135.44%
Fund Balance	\$	14,003,497	\$	11,504,605	\$	7,898,263	\$	8,669,590	\$	2,498,893	21.72%
	<sup>*</sup>	.,,,,	Ŧ		ľ	.,000,200	ľ	2,233,030	٠	_,,	
TOTAL LIABILITIES AND FUND BALANCE	\$	33,868,093	\$	19,941,762	\$	16,747,305	\$	16,000,619	\$	13,926,331	69.84%

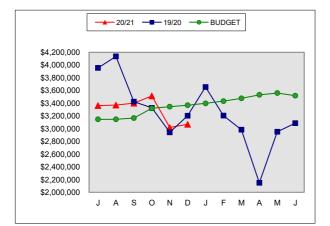
## EASTERN PLUMAS HEALTH CARE ACTIVITY SUMMARY FOR THE MONTH OF DECEMBER 2020

		MONTH TO	) DATE	YEAR TO D	ATE	
		CURRENT	PRIOR	PRIOR YEAR	Jul-20	Jul-19
		MONTH	MONTH	MONTH	-	-
		Dec-20	Nov-20	Dec-19	Jun-21	Jun-20
1	Acute Inpatient					
	Admissions	12	8	16	52	79
	Discharges	11	7	15	50	79
2	Observations Admissions	5	3	9	34	65
3	Endoscopy	0	31	18	92	119
4	Ambulatory Services	170	38	62	275	397
5	Ambulance	77	54	87	412	509
6	Emergency Visits	228	203	294	1540	1961
7	Lab Procedures	2467	3636	2698	21672	17783
8	Diagnostic Imaging					
	CT Scan	115	139	132	871	980
	Mammography	29	56	45	255	293
	MRI	9	18	11	99	110
	Radiology Procedures	206	192	269	1432	1818
	Ultrasound	58	69	53	455	466
9	Respiratory	55	73	245	385	1201
10	Cardiology	111	73	101	700	606
11	Physical Therapy	1059	1036	847	6533	3811
12	Occupational Therapy	441	375	372	2588	2284
13	ACUTE CARE					
14	Acute Patient Days	45	23	58	165	300
15	Acute ADC	1.45	0.77	1.87	0.90	1.63
16	% Occupancy Acute	16.13%	8.52%	20.79%	9.96%	18.12%
17	Avg Length of Stay	3.5	3.1	3.7	3.2	3.8
18	Swing Bed Days	36	62	32	331	424
19	Swing Bed ADC	1.16	2.07	1.03	1.80	2.30
20	Avg Length of Stay	20.50	28.00	6.90	22.10	14.50
21	Observations Hours		51			
22	Observations ADC	0.00	0.07	0.00	0.00	0.00
23	Total ADC	2.61	2.90	2.90	2.70	3.93
	SKILLED NURSING UNIT					
24	Patient Days	1567	1557	1537	9741	9910
25	SNF Average Census	50.55	51.90	49.58	52.94	53.86
26	% Occupancy SNF	76.59%	78.64%	75.12%	80.21%	81.60%
	TOTAL					
27	Patient Days	1648	1642	1627	10237	10634
28	Average Daily Census	53.16	54.73	52.48	55.64	57.79

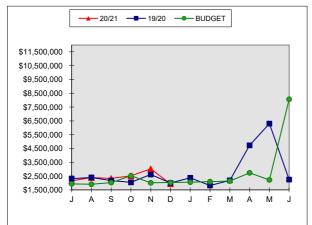
### EASTERN PLUMAS HEALTH CARE ACTIVITY SUMMARY FOR THE MONTH OF DECEMBER 2020

	MONTH TO	DATE		YEAR TO DA	TE
	CURRENT	PRIOR	PRIOR YEAR	Jul-20	Jul-19
	MONTH	MONTH	MONTH	-	-
	Dec-20	Nov-20	Dec-19	Jun-21	Jun-20
Provider Visits		0	2		2
Adams. Robert	0	0 76	2 94	2 456	3 555
Adkins, Stacia Aggarwal, Shruti	53 0	76	94 141	456	794
Ball, Donald	0	0	25	0	186
Brooks, Michael	66	74	69	448	438
Bugna, Eric	46	41	32	310	296
Coll, Shawni	14	0	11	29	27
Corvera, Amanda	0	0	0	1	0
Cox, Charles	0	1	9	8	47
Dhond, Milind	42	28	44	313	302
Dupuis, William	82	63	0	357	0
Ettinger, Victor	13	17	10	91	82
Farias, Ginger	1	2	4	26	30
Feil, Frederick	0	0	24	69	112
Flapan, Wendy	0	0	0	0	294
Foley, Trish	75	69	64	423	389
Freitas, Paul	1	1	3	3	10
Gould, Roxanne	15	13	47	99	215
Grier, Barnett	170	143	158	1097	1050
Hibler, John	64	68	94	406	626
Hill, Beth	0	76	184	658	915
Hoffman, Daniel	184	184	242	1070	1496
Hunt, Ben	8	5	13	80	121
Jaquez, Robin Mills, William	27	27 2	51 1	191 6	353
Morrison, Mary	130	128	0	782	3 525
Muto-Isolani, Antonio	2	128	0	782	525
Nielsen, Marc	1	0	0	5	14
Ouyang, Debra	0	0	2	0	29
Phen, Lovsho	105	147	155	773	816
Potter, Christina	238	246	179	1470	1327
Prichard, Gail	0	0	1	0	1
Printz, Richard	7	7	8	38	49
Robinson, Ken	2	6	1	23	35
Sapir, Leora	160	123	107	712	500
Scott, John	0	0	0	0	64
Skiles, Sunny	6	7	10	30	50
Spencer, Christine	95	82	82	477	449
Stoll, Daniel	119	118	131	688	742
Streit, Cara	0	0	0	18	14
Sturgis, Cristy	0	0	9	0	63
Swanson, Paul	6	3	2	14	17
Taylor, Peter	0	12	0	22	23
Thompson, Steven	0	0	0	17	14
Vo, Quang	8	4	/	42	49
Walters, Marc	1	0	1	12	/
Williams, Anne	0	0	0	0	34
Wojek, Irene	112	90	80	608 11881	495
Total	1855	1863	2097	11881	13661
Clinics			]		
Graeagle Medical Clinic	211	203	270	1315	1666
Loyalton Medical Clinic	306	294	260	1821	1769
Pine Street Dental Clinic	0	0	0	0	0
Pine Street Medical Clinic	0	0	0	0	103
Portola Dental Clinic	334	336	392	1982	2329
Portola Medical Clinic	742	834	1007	5450	6498
Behavioral Health					0.05
	176	150	145	947	885
Telemed	176 86	150 46	145 23	947 366	411

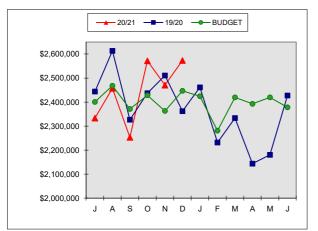
### 1. GROSS PATIENT REVENUE



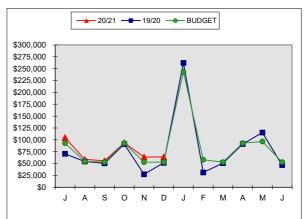
### 2. ESTIMATED NET REVENUE



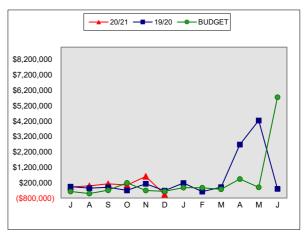
### 3. OPERATING EXPENSES



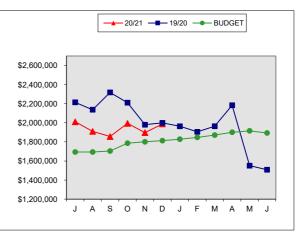
### 4. NON-OPERATING INCOME



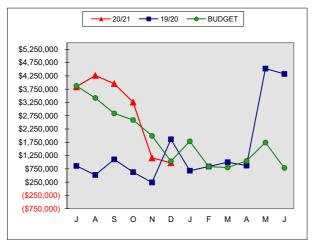
### 5. NET INCOME (LOSS)



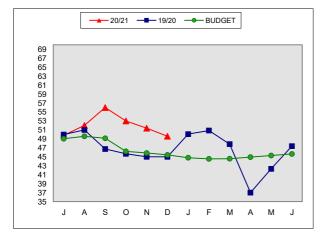
### 6. CASH RECEIPTS



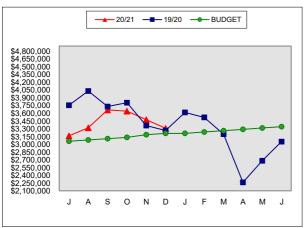
### 7. OPERATING CASH



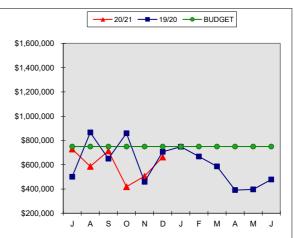
### 8. ACCOUNTS RECEIVABLE-DAYS



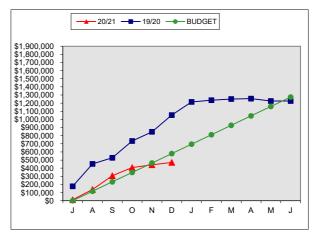
### 9. ACCOUNTS RECEIVABLE, NET



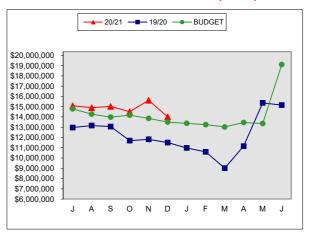
### **10. ACCOUNTS PAYABLE**



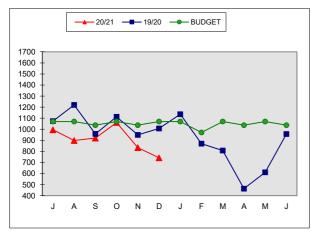
### **11. CAPITAL EXPENDITURES-YTD**



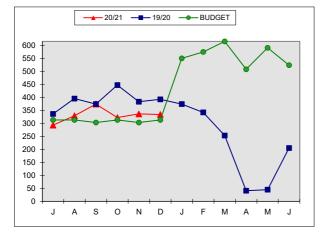
### 12. FUND BALANCE + NET INCOME (LOSS)



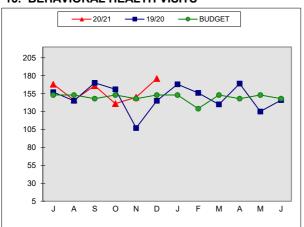
### **13. PORTOLA MEDICAL CLINIC VISITS**



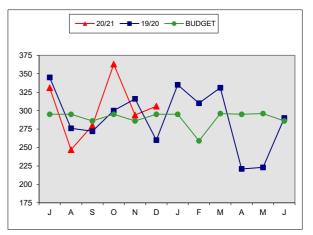
### 14. PORTOLA DENTAL CLINIC VISITS



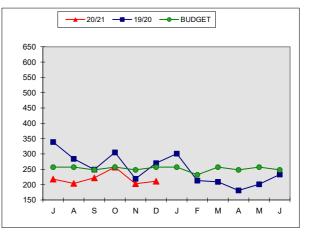
### 15. BEHAVIORAL HEALTH VISITS



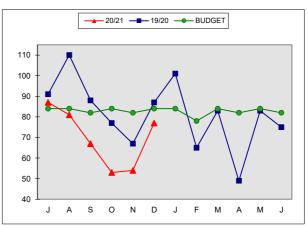
### **16. LOYALTON MEDICAL CLINIC VISITS**



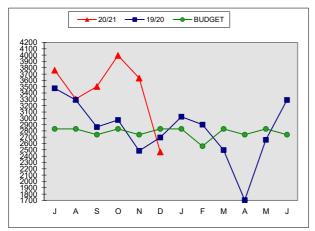
### 17. GRAEAGLE MEDICAL CLINIC VISITS



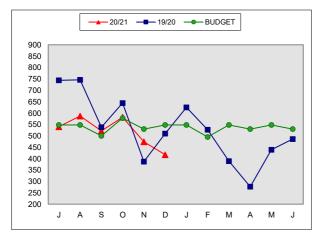
#### **18. AMBULANCE RUNS**



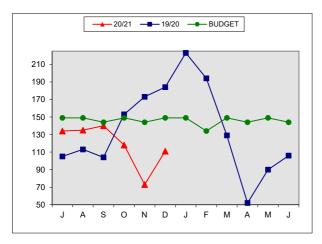
### **19. LABORATORY PROCEDURES**



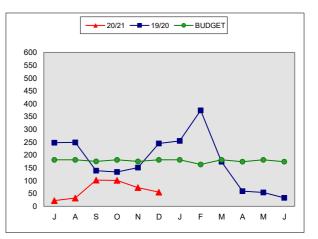
### 20. RADIOLOGY PROCEDURES



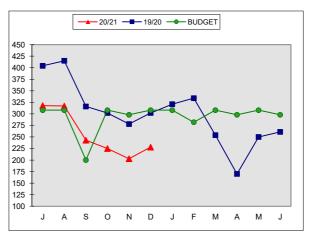




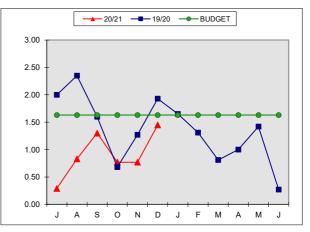
### 22. RESPIRATORY PROCEDURES



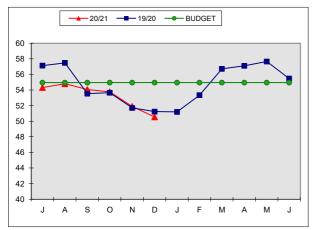
#### 23. EMERGENCY ROOM VISITS



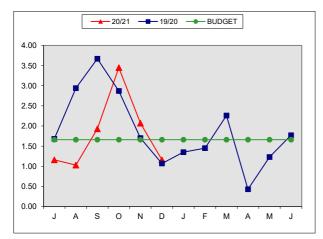
#### 24. AVERAGE DAILY CENSUS - ACUTE



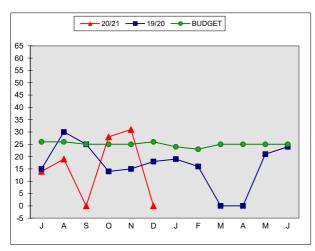
### 25. AVERAGE DAILY CENSUS - SNF



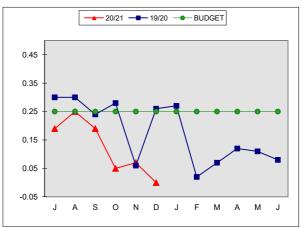
### 26. AVERAGE DAILY CENSUS-SWING



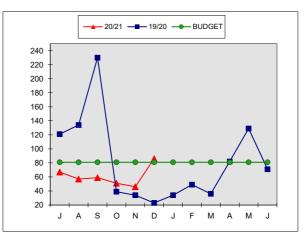
### 27. ENDOSCOPY PROCEDURES



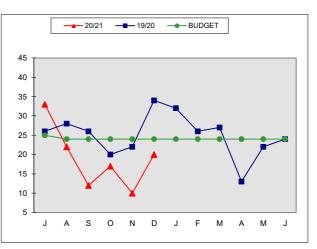


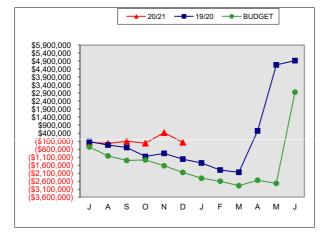


#### **29. TELEMEDICINE VISITS**



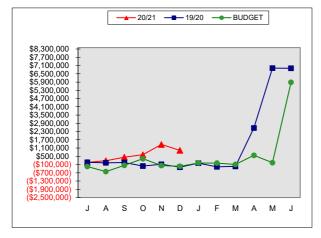
### **30. EMERGENCY DEPARTMENT TRANSFERS**



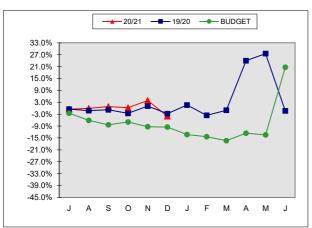


### 31. YEAR TO DATE OPERATING INCOME (LOSS)

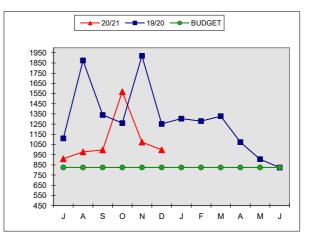
#### 32. EARNINGS BEFORE INTEREST, DEPRECIATION & AMORTIZATION



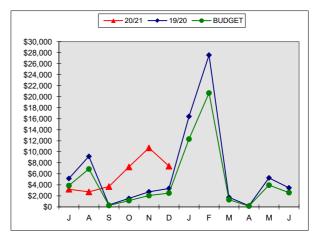
#### 33. RETURN ON EQUITY



#### 34. OVERTIME HOURS









## Eastern Plumas Health Care Board Report Executive Summary

Date: January 28, 2021

## **EXECUTIVE OVERVIEW:**

Overall operations for Q4 were off plan due to lower SNF and inpatient volume, higher labor costs for traveler positions/overtime resulting from increased employee COVID cases and costs for COVID testing. YTD COVID testing and related supplies through December were \$372,000 which was unexpected during the budgeting process. However, we continue to exceed both budgeted revenues and net income YTD.

A strategic plan for the remainder of the fiscal year is under development with scheduled completion on 2/3/21. A second strategic plan will be developed for both FY 21/22 and a 3-year plan in April. This plan and associated dashboards will be provided to the Board as well as presented in subsequent monthly Board meetings beginning in February. Strategies under development for the remaining two quarters of this fiscal year will include:

- SNF census and inpatient revenue growth strategies.
- New program development and addition of specialty services/providers.
- Capital spending plans for additional revenue providing equipment, property acquisitions, and renovations.
- Labor recruitment and retention.
- Staff education and certification programs.
- Development of a Community Advisory Committee and recruitment of new Foundation Board members.
- Expense reductions and efficiency opportunities
- Implementation strategies for our 'Ignite the Patient Experience' customer service program scheduled for 3/2-3/3.

The COVID vaccine program was initiated with initial and booster vaccines provided to over 100 direct care employees. 100% of vaccines received were provided to staff and residents, with an additional 50 employees scheduled to receive vaccine once it is provided by the County. The first community vaccination event was held on 1/21 with 60 doses administered to the tier 1-B group (75+ years of age). We have the capability to administer vaccines weekly to community members but continue to see supply chain delays for delivery of vaccine to Plumas County. Currently both the County and State are unable to accurately predict when additional vaccine will be available for distribution, and we continue to be in communication with the County daily for updates.

## **QUALITY/REGUALATORY:**

A COVID compliance review of the SNF campuses by CDPH was completed on 12/8 for the third consecutive month. No deficiencies were identified, and we continue to avoid any transmissions to residents of either SNF campus. QA data for Q4 was reviewed on 1/20/21. Our key improvement metrics include quietness in the hospital area, several inpatient documentation areas, admission checklists, and SNF fall rates. A replacement wander guard system has been installed at the Loyalton SNF campus to assist with resident safety. Ongoing SNF documentation reviews by our consultant continue in advance of our annual survey.

## **CAPTIAL PROJECTS:**

Ongoing campus improvement projects have been either completed or initiated to improve our customer presentation and service delivery.

- Addition of emergency generators to both the Loyalton and Graeagle Clinics.
- Architectural design proposals are in process for an ED expansion project.
- Loyalton ambulance building roof replacement has been completed.
- SNF telemedicine units have been installed for behavioral health visits.
- Hospital nurses station refurbishment project.
- Replacement of oxygen room flooring.
- Replacement of SNF boiler burner system.
- Repairs and certification of the outpatient therapy building HVAC system.
- Exterior security camera bid for both Portola and Loyalton campuses.

## MEDICAL STAFF UPDATES

Dr. Robert Adams will be joining EPHC as a fulltime employee on February 8<sup>th</sup> adding clinic coverage to his ED schedule as well as a planned appointment as Vice Chief of Staff. Dr. Dan Stoll has accepted the position of Clinic Medical Director on January 1<sup>st</sup> and joined the Medical Executive Committee (MEC). Christina Potter is now providing clinical leadership to all three clinics and was added as a member to MEC representing the mid-levels.

## **COMPLIANCE PROGRAM**

EPHC is working with VanRein Compliance on a proposal to provide third party consultation and documentation to meet our compliance program/policy requirements. Support would include HIPAA risk assessments, assessment reports and remediation plans, employee education on Stark, HIPAA, and anti-kickback regulations, development of required evidence binders for business associate agreements, and other compliance related consultation. In addition, EPHC has contracted with ECG to provide fair market valuations for provider contracting and current contract reviews to ensure compliance with all agreements.

# AGENDA ITEM COVER SHEET

ITEM	CAH Committee Consent Agenda
RESPONSIBLE PARTY	Donna Dorsey, RN, BSN Emergency Room Manager
ACTION REQUESTED?	For Board Action

### BACKGROUND:

During the December , 2020 CAH Committee meeting, the committee made the following consent agenda item recommendations to the Board of Directors.

## SUMMARY/OBJECTIVES:

Approval of the following consent agenda items:

Annual Policy Review:

- Administration
- Clinic
- Radiology

# SUGGESTED DISCUSSION POINTS:

None

## SUGGESTED MOTION/ALTERNATIVES:

Move to approve CAH Committee Consent Agenda as presented.

# LIST OF ATTACHMENTS:

List attached.

PolicyStat ID	Title	Area
7438057	Disclosure of Sentinel/Adverse Event	Administration
5668297	Guidelines for Appropriate Health Care Decision-Making	Administration
9090260	Sentinel/Adverse Event policy	Administration
8837470	Nurse Practitioner and Physician Assistant Supervision and Scope of Practice	Clinic
7932240	Outpatient Quality Assurance & Program Evaluation	Clinic
8836773	Patient Appointment Failure	Clinic
7438238	Safety Rules or Code of Safe Practices	Environment of Care Committee
6854591	Use of Personal Handheld Electronic Computing Device and Media Control	Information Technology
9088392	Mammography Compliance Requirements	Radiology
7438166	Mammography Patient Complaints	Radiology
7438242	Radiologist Availability	Radiology
7438253	Rules of Good Practice for Mammography	Radiology
7298054	Quality Assessment and Performance Improvement Program	Skilled Nursing

# Eastern Plumas Health Care

June 30, 2020

Audit Presentation

JWT & Associates, LLP Advisory Assurance Tax

# Eastern Plumas Health Care June 30, 2020

# **Financial Audit Results:**

- > Received an unmodified opinion.
- > There were no material weaknesses or significant deficiencies identified relating to the Hospital's internal controls and there were no reportable findings.
- > There were no audit adjustments and 1 late client entry. Total P&L impact was \$504k increase. Cost report settlement \$504k.
- > There were no difficulties encountered with Management in performing our audit and we had no disputes or disagreements with management during the course of our audit.
- > Significant Accounting/Auditing Issues
  - > Continuing IGT Programs
  - > COVID-19 Supplemental Funding
  - > PPP Loan

# Eastern Plumas Health Care District

# Statement of Operations

D		2020	<u>2019</u>		<u>2018</u>	
Revenue:	Φ	21.024.672	¢	20 (20 (21	¢	07 1 40 710
Net patient service revenue	\$	31,824,672	\$	30,628,631	\$	27,142,712
Other operating revenue		1,884,826		2,386,791		2,603,923
District tax revenue		670,496		636,240		591,374
Other non-operating rev		419,508		360,876		107,979
Total revenue		34,799,502		34,012,538		30,445,988
Expenses:						
Labor and benefits		17,601,289		16,662,100		15,255,952
Prof fees and purchased services		4,593,668		6,634,991		4,771,327
Supplies		2,369,466		2,118,418		1,611,672
Depreciation		1,204,458		1,232,789		1,029,978
Interest expense		271,847		288,798		212,853
IGT		3,045,321		3,188,274		3,739,387
All other		2,787,600		464,085		2,429,789
Total expenses		31,873,649		30,589,455		29,050,958
1		- ))		) )		- ) )
Net income	\$	2,925,853	\$	3,423,083	\$	1,395,030
Net income margin		8%		10%		5%
Deductions from revenue %		36%		42%		46%
Bad debt as % of gross revenue		3%		2%		3%
Labor and benefits as % of expenses		62%		61%		61%
Labor and benefits as % of net patient rev	i	55%		54%		56%
Supplies as % of net patient rev		7%		7%		6%

# Eastern Plumas Health Care District

# Balance Sheet

		<u>2020</u>	<u>2019</u>	<u>Change</u>
Assets:				
Cash	\$	22,545,393	\$ 7,961,309	\$ 14,584,084
Patient A/R net		3,052,108	3,716,746	(664,638)
Other receivables		52,597	53,734	(1,137)
Property and equipment		9,573,249	9,551,666	21,583
All other assets		339,586	327,240	12,346
Total assets	\$	35,562,933	\$ 21,610,695	\$ 13,952,238
Liabilities:				
Accounts payable	\$	457,640	\$ 525,780	\$ (68,140)
Payroll and related accrual	·	1,353,338	1,212,620	140,718
Third-party settlements		8,873,626	611,161	8,262,465
Long-term debt		9,124,055	6,432,713	2,691,342
Total liabilities		19,808,659	 8,782,274	 11,026,385
Net assets		15,754,274	12,828,421	2,925,853
Total liabilities and net assets	\$	35,562,933	\$ 21,610,695	\$ 13,952,238
Current ratio		2.31	4.32	-2.01
Debt service coverage		8.86	11.14	-2.28
Days cash on hand		301	112	189
Days in A/R, net		35	44	-9
Average pay period		17	21	-4

# Eastern Plumas Health Care District

# Comparisons and Benchmarks

		Peer Hosp				
	<u>2019</u>	<u>2020</u>	Avg	Benchmark		
Net income margin	18%	8%	12%	5%		
Deductions from revenue %	42%	36%	47%	N/A		
Bad debt as % of gross revenue	2%	3%	4%	5%		
Labor and benefits as % of expenses	61%	62%	56%	60%		
Labor and benefits as % of net patient rev	54%	55%	54%	60%		
Supplies as % of net patient rev	7%	7%	8%	10%		
Current ratio	4.32	2.31	4.45	1.50		
Debt service coverage	11.14	8.86	9.7	1.50		
Days cash on hand	112	301	96	90		
Days in A/R	44	35	44	45		
Average pay period	21	17	35	45		