MINUTES BOARD OF DIRECTORS MEDINA COUNTY HOSPITAL DISTRICT

October 26, 2020

TIME AND PLACE:

THIS MEETING WILL BE HELD VIRTUALLY DUE TO GOVERNOR'S Proclamation 41-3746. At least a quorum of the board will be participating in accordance with the provisions of Sections 551.125 of the Texas Government Code that have not been suspended by order of the governor. Any person may join the meeting via GoToMeeting: https://global.gotomeeting.com/join/498401533 Access Code: 498-401-533 or by phone by calling: (571) 317-3122 Access Code: 498-401-533

PRESENT:

Tim Hardt, President
Dr. Carlton "Corky" E. Young, Vice President
Tony Johnson, Secretary
William "Bill" Bain, Director
Lori Krieger, Director
Zachary Windrow, MD, Director
Judy Winkler, Director

Janice Simons, Chief Executive Officer
Kevin Frosch, Chief Financial Officer
Billie Bell, Chief Nursing Officer
Geoff Crabtree, Methodist Healthcare System
Louisa Cuellar, Recording Secretary
Randi Davis, Executive Administrative Assistant

ABSENT:

GUESTS:

None.

1. CALL TO ORDER
AND RECORD OF
ATTENDANCE

Mr. Hardt called the meeting of the Medina County Hospital District Board of Directors to order at 6:02 p.m. He stated for the record that the Board of Directors has seven members with six members being present at that time and representing a quorum. Mr. Johnson joined the meeting at 6:08 p.m.

2. PUBLIC COMMENT

None.

3. BOARD EDUCATION
Refresher HIPAA and
Physician

Engagement
Compliance Training

The Board Education was deferred to the November 23, 2020 meeting.

4. <u>CONSENT AGENDA</u> Consider Approval of Minutes

A. Regular session of September 28, 2020

The Minutes from the Regular Session of September 28, 2020 were approved as presented in the packet.

5. Consider Approval of CNO Report

Ms. Bell reported June McCaleb, L&D Director, submitted her resignation, effective November 5, 2020. Ms. Bell reported Monica Lesley, RN, was hired as the new OB/L&D Director; she was previously at St Luke's Hospital. Ms. Lesley has over twenty years of obstetrical experience and

comes highly recommended by Dr. Dawn Mayo. Ms. Bell mentioned the Emergency Department Throughput Communication and stated Medina Regional Hospital is in the top decile for performance in the ED metric. Ms. Bell informed the Board that Medina Regional Hospital submitted the Level 1 Neonatal Re-Designation and the initial Level 1 Maternal Designation packets to the state on October 16th.

6. Consider Approval of Rural Health Clinics Report

Ms. Simons reported this year looks the same as, this time, last year. The Telemedicine helped maintain volume, considering the pandemic; this is a win.

Mr. Frosch reported clinic volumes were above budget in the month of September with total visits of 4,564 (including 682 telemedicine visits) versus a budget of 4,479. Gross revenue increased for the period, coming in 7.9% above budget. Net Revenue for the period was a \$98,000 loss, and expenses were \$30,100 above budget. The clinics finished the fiscal year with 52,595 visits, and a net loss of \$142,500. As compared to FY 2019, this was a 1,155 decrease in visits and a \$331,300 decrease in net revenue.

There were no other changes to the Rural Health Clinics report presented in the Board packet.

7. Consider Medical Staff Report

Dr. Windrow reported the clinic numbers are look good; the clinic has not had to test too many people for COVID.

MOTION

Mr. Bain made a motion to approve the Consent Agenda. Dr. Windrow seconded.

VOTE

The motion passed unanimously.

8. CONSIDER PUBLIC CORRESPONDENCE REPORT

Mr. Johnson presented the public correspondence report in the Board packet. Mr. Johnson reported there were 25 questionnaires returned after care at MHS. There were NO NEGATIVE COMMENTS. There was a comment that they would definitely recommend the hospital to family and friends. Mr. Johnson stated this goes to show we have a tremendous staff.

MOTION

Mr. Bain made a motion to approve the Public Correspondence Report as presented. Dr. Young seconded.

VOTE

The motion passed unanimously.

9. CONSIDER CHIEF EXECUTIVE OFFICER'S REPORT

Ms. Simons mentioned that it has been a year since the expansion of the Hondo Clinic and opening of the Castroville Specialty Clinic.

Ms. Simons reported that Dr. McGehee has joined MHS and will be practicing at the Devine and Castroville Clinics. Ms. Simons stated that Cheryl Fore has accepted the role of Clinic Manager for the Hondo Clinic, effective October 12th. Cheryl most recently was Assistant Clinical Director for Hospice of San Angelo. Ms. Simons mentioned the Imaging Department was granted ACR Accreditation in CT and MRI for the next three years; and the Texas EMS, Trauma & Acute Care Foundation will be resurveying the Emergency Department in January or February of 2021. The Emergency Department is designated as a Level IV Trauma Center and is surveyed for redesignation every three years. Ms. Simons announced MRH was awarded the "Top Workplace" for FOUR Years in a row. Ms. Simons informed the Board that MRH recently purchased four sleeper chairs for the Labor & Delivery Department at a cost of \$5,748. Ms. Simons reported that in October MRH completed an Evident/Healthland application and data migration. Ms. Simons stated that much like with any upgrade, there have been some bugs and disruptions following the transition, but overall, the transition was successful and that project is behind us. Ms. Simons provided the following Congressional Updates:

• BILL TO EXTEND RHC TELEMEDICINE AND FIX PAYMENT RATE:

Working closely with TORCH, Texas U.S. Congressman Roger Williams has filed a bill (<u>HR8156</u>) to extend the use of telemedicine in Rural Health Clinics (RHC) and Federally Qualified Health Centers (FQHC) from the expiration date on December 31, 2020 until December 31, 2024. The bill also reverts the payment rate to the same as face-to-face encounters.

PRICE POSTING REQUIREMENT STILL ON TRACK

Despite pleas for a delay, a lawsuit, and the COVID19 outbreak, the Centers for Medicare and Medicaid Services (CMS) isn't budging an inch on its requirement for hospitals to post prices on their website by January 1, 2021.

Requirements are:

- 1. Annually, hospitals must provide a machine-readable file containing negotiated charges (rates) for ALL items and services.
- For 300 shoppable items and services, including 70 defined by CMS, hospitals must provide a consumer-friendly display of gross charge and negotiated charges (rates).

The solution is complex. Many hospitals are turning to vendors for a solution but most are finding the solution to be costly.

Ms. Simons announced that MHS has registered to become a COVID vaccine provider. Initially supplies will most certainly be limited with distribution coming from the federal government and then through the states. Details are included in the packet.

The Community Relations Board report was presented.

There were no changes to the CEO report presented in the board packet.

MOTION

Ms. Winkler made a motion to approve the CEO report as presented. Mr. Johnson seconded.

VOTE

The motion passed unanimously.

10. CONSIDER FINANCIAL REPORT

A. Consider approval of the September 2020 Financial Report Dr. Young asked the Board to look at the last page of the Finance report that is a review of the outstanding notes. Dr. Young mentioned that at the next Board meeting there will be a recommendation to pay down some debt. Dr. Young asked Mr. Frosch to highlight the items impacting this month's finances.

Mr. Frosch stated there were two major items that impacted this month's finances. There was a Waiver Funds revenue adjustment (\$1.4 million in total) in the period due to earning a prior year carryforward DSRIP project, more UC dollars, and a better return with the FMAP rate increased as part of the COVID response. On the flip side, there was a large Negative Grant Proceeds revenue adjustment (over \$2 million) to roll-back recognition of CARES Act Provider Relief Funds following issuance of new guidance relating to qualifying conditions for retaining funds.

Dr. Young asked the Board of Directors to review the summary report Mr. Frosch has provided for the month of September. Dr. Young asked that the Board of Directors to direct any questions to Mr. Frosch. Mr. Frosch reviewed September financials and highlighted the following:

- September gross revenue was below budget for the month. For the year-to-date, gross revenue is below budgeted levels.
- Net Revenue for September was above budget by a large margin, primarily due to a Waiver funds revenue pick up. On a year-to-date basis, net revenue remained ahead of budget.
- Expenses were above budget for September, but are below budget on a year-to-date basis.
- MRH volumes were below budget in most metrics this period.

There were no changes to the report presented in the board packet.

MOTION

Dr. Young made a motion to approve the Financial Report for September 2020 as presented during the Finance Committee meeting. Ms. Krieger seconded.

VOTE

The motion passed unanimously.

11. ETHICS AND COMPLIANCE HCA AUDIT REPORT AND RESULTS

Ms. Simons reported that about six or seven months ago HCA auditors were at MHS to ascertain compliance with the management agreement with Methodist. A copy of the audit report was provided. In 2016 Lori Allesee, Ethics and Compliance attorney for Methodist, came to MHS and completed her assessment. She will be visiting MHS December 3rd to assist with a more in depth assessment and educate employees even more. Mr. Crabtree commented that it was a first of its kind for Methodist Healthcare System; we all want to make sure that not only is the hospital in compliance, but Methodist is also in compliance, with our management services agreement. This was an excellent report.

12. REVIEW, CONSIDER,

AND APPROVE

MEDINA

HEALTHCARE

SYSTEM

PERFORMANCE

IMPROVEMENT

PLAN FY 2020

EVALUATION

Mr. Johnson made a motion to approve the MHS Performance Improvement Plan Evaluation FY 2020 as presented. Dr. Young seconded.

VOTE

The motion passed unanimously

13. REVIEW, CONSIDER,

AND APPROVE

MEDINA

HEALTHCARE

SYSTEM

PERFORMANCE

IMPROVEMENT

PLAN FY 2021

Mr. Bain made a motion to approve the MHS Performance Improvement Plan FY 2021 as presented. Dr. Windrow seconded.

VOTE

The motion passed unanimously

14. REVIEW, CONSIDER,

AND APPROVE

MEDICAL STAFF

BYLAWS

Ms. Bell reported there was one minor change to the Med Staff Bylaws, verbiage was change from

October 1st to just stating October.

Dr. Young made a motion to approve the Medical Staff Bylaws as presented. Ms. Winkler

seconded.

VOTE

The motion passed unanimously

15. REVIEW, CONSIDER, AND APPROVE THE

MEDICAL STAFF

RULES AND REGULATIONS

Dr. Young made a motion to approve the Medical Staff Rules and Regulations as presented. Mr. Johnson seconded.

VOTE

The motion passed unanimously

16. REVIEW, CONSIDER, AND APPROVE THE MEDICAL STAFF COMMITTEE CHART Mr. Johnson made a motion to approve the Medical Staff Committee Chart as presented. Mr. Bain seconded.

VOTE

The motion passed unanimously

17. REVIEW, CONSIDER,
AND APPROVE OB
REGISTERED NURSE
MEDICAL
SCREENING
AUTHORIZATION

Dr. Young made a motion to approve the Registered Nurse Medical Screening Authorization as presented. Ms. Winkler seconded.

VOTE

The motion passed unanimously

18. COVID-19 UPDATES

Handout was provided.

Ms. Simons reported that MHS has applied to provide COVID vaccinations. Ms. Simons mentioned MHS will test patients being admitted to the hospital, if semi-private rooms are being used. Ms. Simons reported there have been some surges in West Texas and El Paso area. MHS has 900 Antigen test available. We are awaiting the tests that can do the Flu & Covid test at the same time.

19. EXECUTIVE SESSION

Hold an executive session, pursuant to Sec. 551.071 et. Seq., Texas Government Code, for review of Physician Chart Reports and Sentinel Events; Performance Improvement Committee Report-Code 551.074 & 551.078; Patient Safety Committee Report-Code 551.074 & 551.078; consider Personnel Matters-Code 551.075; consider Deliberations about Real Property 551.072; and Litigation Matters-Code 551.071, Performance Excellence Program.

 Consider approval of the Credentialing Committees Appointments/Reappointments made by the Medical Staff.

The Board of Directors of Medina Regional Hospital District now adjourns its Closed Session at 6:42 p.m., and returned to Open Session at 6:46 pm.

Upon returning to regular session at 6:46 p.m., the Board took the following action.

MOTION

Ms. Winkler made a motion to approve the Credentialing Committee Appointments/ Reappointments made by the Medical Staff. Mr. Bain seconded. Please see attached document for approved list.

VOTE

The motion passed unanimously

ADJOURNMENT

There being no further business to come before the Board, the meeting was adjourned at 6:48 p.m.

Tim Hardt, President

Tony Johnson, Secretary