CONCHO COUNTY HOSPITAL DISTRICT
MEETING MINUTES

STATE OF TEXAS
COUNTY OF CONCHO

I. **Call to Order**
The Concho County Hospital Board of Directors met in Eden, Texas at the Concho Medical Clinic, Lobby on February 27, 2024 at 6:00 p.m.

II. **Board of Directors:**

	Anita Aguilar	President
	Donna Magill	Secretary/Treasurer
	Elizabeth Eureste	Member
	Rosa Schreiber	Member
	Brandi Gloria	Member
Others Present:	Melissa Wilson	CEO
	Michelle Saucedo	Director of Nursing
	Melanie Lozano	Finance Manager

List of Public Attendees (Attached)

III. **Open Forum for Public Comments (limited to 5 minutes each)**
Antonio Aguilar spoke with several recommendations and concerns. He first recommended to rekindle severed relationships from the previous administration. His first concern was about his view that the hospital is not gaining anything from the clinic, and that the possible view should be looking into federally funded options. He then brought up a concern that there has been no audit since 2019, and that the district is in violation of its own bylaws where an audit is required annually. He stated the public needs to know where the money is going, that the previous administration gave the money away to schools and elsewhere, and that it was not his money to give away. He also stated his concern about how the previous administration spent money on the credit card, and that these things would never be forgotten. He stated his concern that the board is not moving forward with a forensic audit. Mr. Aguilar stated he had a lot of faith in the board when they first started, but lost faith in them during a circumvention of authority when calling a special or emergency meeting.

Lesa Grumbles spoke with several concerns about the pharmacy. She showed several pictures of items she is concerned about. She spoke about her concern about unprofessionalism in the pharmacy. She showed pictures of what she described as a small plastic thing in a prescription bottle, which had been seen again. She showed another picture of what she described as trash in the pharmacy. She showed a third picture of syringes in the pharmacy with one on the floor and stated it had been there for a week. She showed another picture of what she described as more trash. Ms. Grumbles spoke about her concern with

Express Scripts and how she was told she fell into that. Though when she waited to get her prescriptions elsewhere, she actually received the prescriptions from the hospital pharmacy. She then stated her concern for how people were answering the phone.

IV. **Approval of January 23, 2024 and February 13, 2024 Board Minutes**

Anita Aguilar mentioned that the Board minutes for January 29, 2024 were not listed on the agenda, so they will be available for approval next meeting. Elizabeth Eureste made a motion to approve the minutes for January 23, 2024 and February 13, 2024 as presented. Donna Magill seconded the motion. Motion carried 5 – 0.

V. **Discussion regarding debit card on file charged without notice**

Lesa Grumbles received permission to speak about this topic she requested. She discussed her concern that in possibly December 2023, that she was charged $5.86 for a prescription without knowing, since her card was on file. She stated that she's concerned for anyone who is charged without warning. She stated people leave their cards on file for a convenience. She stated that until recently she would receive a call for any charges that she would incur, and was concerned the lack of call showed unprofessionalism. She did state the charge went through, she received the prescription, and there was no harm done.

Ms. Wilson responded that the outpatient pharmacy handles debit or credit cards on file very much like any of the large known pharmacies. If a person has already provided a card to be on file that the expectation would be to use it automatically. She stated it is a fairly standard practice across pharmacies. She let Ms. Grumbles know that if she wishes to not be charged automatically then she's free to ask the pharmacy to remove the card.

VI. **Business Items:**

A. Monthly Performance Improvement/QA Monitors

Michelle Saucedo presented the Monthly Performance Improvement and QA Report to the Board. With no questions asked, the Board moved on to the next agenda item.

B. Billing & Revenue Cycle Management

Melissa Wilson presented the billing & revenue cycle management reports comparing current admission statistics to last year. She reminded everyone the report is as of end of January 2024, all year to date (YTD) is based on the fiscal year (FY), which is October 1 through September 30. She stated she does not have a comparison for same time last year. She stated she's looking at Lab, Radiology, and Therapy Service numbers a little differently to provide a better picture. The information presented was as follows:

1. Emergency Department visits were 130 for January, 505 for YTD based on our FY; versus last year 149 and 524, which is up slightly from December, but down slightly from last year and YTD. She stated a possible reason why is generally speaking, last year's numbers were affected by a spike of COVID.
2. Inpatient admissions were 3 for January, 15 for YTD based on our FY; versus last year 5 and 14, which is same as December, down from last year, but still up for YTD. She stated a possible reason why is more insurance providers are providing stricter protocols on what qualifies for an Admission versus an Observation; last year's numbers were affected by a spike of COVID; the hospital is using a new tracking tool for discharges and dispositions, and Dr. McFadden is working

harder with the Emergency Department (ED) providers to help ensure the hospital gets the right admissions.

3. Observations were 7 for January, 30 for YTD based on our FY; versus last year 6 and 19, which is same as December, but up from last year and for YTD. She stated possible reasons why are more insurance providers are providing stricter protocols on what qualifies for an Admission vs an Observation; it's easier to get an approval for observation; last year's numbers were affected by a spike of COVID.
4. Swing Bed was 1 for January, 5 for YTD based on our FY; versus last year 2 and 6, which is down from December, last year and even YTD; Swing Bed Days were 19 for December 2023, 0 for January 2024, which doesn't mean there were no swing bed days actually, because there was a swing bed patient in January, but the Electronic Health Record doesn't calculate it until discharge. Possible reasons why the decrease were last year's numbers were affected by a spike of COVID; more insurance providers are providing stricter protocols on what qualifies for a Swing Bed; the hospital had several patients who were on the docket to come but were not able to for several reasons.
5. Lab had 761 exams for January, 3086 for YTD based on our FY; versus last year 1109 and 4528. Possible reasons why were decreases in clinic visits will have an impact on ancillary services, and last year's numbers were affected by a spike in COVID; FY 22 had 6950 tests, FY 23 had 6936 tests, and FY 24 has 1459 tests so far for Quarter 1, and 809 for February so far).
6. Radiology had 118 exams, 89 patients for January, 53 for YTD based on our FY; versus last year 38 and 70. Possible reasons why are decreases in clinic visits will have an impact on ancillary services.
7. Physical Therapy had 97 visits for January versus last year 82 for December.
8. Clinic had 62 for January, 293 for YTD based on our FY; versus last year 112 and 498, which was up from December, but down compared to last year all together. Possible reason why is the hospital doesn't have a permanent fill.
9. Revenue Cycle Management: Critical Access Hospitals (CAH) and Rural Health Clinics are separate provider types with our their Medicare conditions of participation and separate payment methods, unlike Medicare dependent hospitals and sole community hospitals. Reasons for CAH payment and cost reporting methods are to advance health equity and eliminate health disparities in rural populations.
10. Payments, which are paid at 101% reasonable costs, pay according to Medicare Part A and Medicare Part B deductible and coinsurance amounts, are $314K+ for January, and $1.86M+ YTD, versus $330K+ and $1.45M+ last year.
11. Adjustments are downward payment adjustments for meaningful use of certified Electronic Health Record (EHR) technology, contractual adjustments or discounts applicable to services received compared to payments received, based on negotiated terms with payors, are $135K+ for January, and $987K+ YTD, versus $327K+ and $1.2M+ last year. Reasons for stops or decreases in receivables include coding errors, incomplete documentation, delayed, and denied claims.
12. January visits may be down from last year for a variety of reasons, but the gross revenue has continued to improve this FY despite everything else.

C. Financial Statement and Accounts Payable

Melanie Lozano presented the financial statement and accounts payable.

D. Review and Approval of Policies

Sunny Sifuentes presented the Lab policies for review, from pages 1 to 77. A few items were noted for revision. Ms. Aguilar stated for the next meeting the board would review pages 78 to 169.

Mackenzie Hopkins presented the pregnancy release form for patients for review and approval. The form was updated to reflect current needs and has the CCH information added.

Radiology corrections will be provided to Ms. Aguilar at a later date for final determination.

Ms. Wilson provided the Board with the Maintenance policy for future review and approval.

Donna Magill motioned to accept the first part of the Lab policies and the Radiology form. Brandi Gloria seconded the motion. Motion carried 5 – 0.

E. Staff Appointments

Two new radiologists were added to Radiology Partners. Elizabeth Eureste made a motion to approve the staff appointments for Radiology Partners. Donna Magill seconded the motion. Motion carried 5 – 0.

F. Rad Partners Contract

Ms. Wilson stated there are recent developments with Radiology Partners and their provision of reads to our institution. Historically, the hospital benefited from an unusually low rate, but entering this new contract year their rates have seen a substantial increase from approximately $1,000 per year to approximately $22,000 per year for the hospital based on the number of reads, which now aligns more closely with industry standards. These rates remain highly competitive compared to other service providers in the market. Ms. Wilson also reminded the board that the transition to another company would not only incur significant costs but also time-consuming processes, including granting privileges to new radiologists, software changes, interface fees, and more. One of the key strengths of Radiology Partners lies in their consistent delivery of timely reads, a factor that sets them apart from feedback we've received about other service providers. New contract term to start March 1, 2024. Donna Magill motioned to approve the Rad Partners contract updated terms. Brandi Gloria seconded the motion. Motioned carried 5 – 0.

G. Order of Election

Melanie Lozano spoke about the order of election. She stated Precincts 1 through 3 require elections, and Precinct 4 had only one application, overall ordering the election will be held. Rosa Schreiber moved to approve the Order of Elections. Brandi Gloria seconded the motion. Motion carried 5 – 0.

H. Approval of Joint Election Agreement

This item is tabled until the next meeting.

I. Review of Contracts

Ms. Wilson presented information regarding several existing contracts.

1. Flint: The addition of the clinic component worked well for the other week when the clinic was without a standard provider. There were several visits, and the clinic received great feedback about the provider.
2. 340B program: The 340B program is a federal initiative that allows certain hospitals and healthcare facilities, typically those serving low-income or rural populations, to purchase outpatient drugs at discounted prices. These savings enable these facilities to stretch their resources further and provide essential medications to underserved communities at more affordable rates. It's essentially a program aimed at increasing access to medications for vulnerable populations while helping healthcare providers manage their budgets more effectively. There is a recent 340B revision that Ms. Wilson will want to bring to the Board of Directors next month for official approval.
3. Alliant: Alliant serves as the hospital's current Group Purchasing Organization (GPO), providing purchasing power by negotiating with medical suppliers on the hospital's behalf, all without cost to the hospital. Their revenue model relies on fees from suppliers rather than from us directly. The hospital recently reaffirmed commitment to Alliant to maintain them as the GPO. This commitment ensures ongoing access to competitive pricing for the items procured and facilitates identification of potential areas for further cost savings. Obligations to Alliant include the agreement to consider acquiring goods or services available through their program in good faith during the contract term. Presently, approximately 90% of the hospital's procurement is conducted through vendors participating in Alliant's program. However, the hospital still remains committed to exploring opportunities for improved pricing and product quality, while also periodically evaluating alternative GPO services. This commitment to ongoing assessment and competition ensures that the hospital consistently obtains optimal value regardless of the GPO we engage with.

VII. Chief Executive Officer's Report

A. SHIP COVID Testing & Mitigation Grant: The hospital was originally granted up to $255,561 to spend on COVID mitigation and testing, which is reimbursed dollar for dollar. Through hard work and diligence, and reviewing purchases back to January 2021, so long as anything wasn't purchased with previous earmarked funds (i.e. other COVID dollars), plus purchasing up to end of December 2023, the hospital was notified to having received approval from the State Office of Rural Health for total reimbursement of $239,623.96. This means the hospital used almost all of the approved reimbursable funds, while additionally receiving Kudos from State Office of Rural Health (SORH), stating "I can not tell you how impressed I am with the way Concho County Hospital has utilized these funds. Well done!" Ms. Wilson thanked everyone again for their support.

B. The hospital has hired a new Human Resources Representative. Mrs. Sheri Lowe will be starting as soon as her background check, drug screening, and verification process are complete. Ms. Wilson stated excitement to have her come on-board.
C. The hospital has applied to CHIRP and RAPPS. The Comprehensive Hospital Increase Reimbursement Program (CHIRP) is a program that helps hospitals serving Medicaid patients receive additional funding to improve healthcare services. It replaces the Uniform Hospital Rate Increase Program (UHRIP) and offers two components: a standard rate increase for all hospital services and an optional extra increase based on commercial reimbursement rates. The Rural Access to Primary and Preventive Services (RAPPS) program encourages rural health clinics to provide important healthcare services to Medicaid patients. It offers financial incentives to these clinics to ensure better access to healthcare in rural areas and promote healthier outcomes for patients. Both of these programs are additional funding opportunities for programs the hospital already does, while also tracking specific quality measures to help ensure health equity for the community.
D. The hospital is reviewing the webpage design to provide a fresh look and ease of use. Staff will be taking and updating pictures of our buildings, equipment, and more importantly hospital staff to show a representative of what any potential patient will actually see and experience. Using actual team members with hospital owned facilities is very important to Ms. Wilson, versus using stock photos.
E. Ms. Wilson expressed gratitude for board and community continued patience as the hospital navigates through the various challenges identified within the organization. It's important to acknowledge that many of these issues are not easily resolved; in fact, most require extensive research and discovery before even beginning to address them effectively. Furthermore, the solutions implemented often demand several months of dedicated work, and even then, it may take additional time before witnessing tangible improvements. The board's and community's understanding and support during this process are invaluable as the hospital strives to overcome these obstacles and enhance the efficiency and effectiveness of our operations, and will help lead to our organization's success.

VIII. **Adjournment**

Elizabeth Eureste made a motion to adjourn the meeting at 7:43pm. Rosa Schreiber seconded the motion. Motion carried 5 – 0.

Anita Aguilar
President

Date 3-26-2024

SIGN UP SHEET
CCH BOARD MEETING

PLEASE PRINT YOUR NAME

2-27-24

1. Julie M. Jones
2. Hazel Medders
3. Brittany Bifuentes
4. Antonio Aguilar
5. Michelle Saucedo
6. Britt McFadden, MD
7. Mackenzie Hopkins
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