

**CONCHO COUNTY HOSPITAL DISTRICT
MEETING MINUTES**

**STATE OF TEXAS
COUNTY OF CONCHO**

I. Call to Order

The Concho County Hospital District Board of Directors met in Eden, Texas at the Concho Medical Clinic Lobby, 551 Eaker Street, on Tuesday, April 24, 2024, at 5:30 p.m.

II. Board of Directors

Anita Aguilar, President
Brent Frazier, Vice President
Donna Magill, Secretary
Elizabeth Eureste, Member
James Rannefeld, Member
Rosa Schreiber, Member
Brandi Gloria, Member
Melissa Wilson, CEO

Others Present:

Trent Krienke, Concho County Hospital District Attorney
Michelle Saucedo, Director of Nursing
Melanie Lozano, Finance Manager
Dr. Brett McFadden, Medical Director
Deborah Fort, IT Liaison
Sheri Lowe, HR Manager
Mackenzie Hopkins, Radiology Manager
Sunny Sifuentes, Lab Manager
Antonio Aguilar, Guest
Chyna Allgood, Guest
Kathy Falcon, Guest
Layla Castleberry, Guest
Lesa Grumble, Guest
Julie Jones, Guest
Ruben Gloria, Guest
Emilio Perez, Deputy Sheriff
Jonathan Gaballo, Deputy Sheriff
Zoe Camarillo, Employee
Delfina Gonzales, Employee
Lori Nunn, Employee
Hasnain Hashmi, Pharmacist
Kelly Evens, Employee
Lee Taylor (Smokey), Pharmacist
Lacy Herrmann, Guest

III. Public Comments Regarding Agenda and Non-Agenda Items (limited to 5 minutes)

Kathy Falcon: Stated that she is a concerned citizen of Concho County. She stated how she is holding 16 forms of information that came from employee personnel files. What was sent was actual salary sheets of employees, she stated she knows that she shouldn't have access to this of past or present employees. She also stated she knows start dates of these 60 employees. She states she knows every raise they got, every bonus they received, and that is a violation of their privacy. She states this again points to poor training within the establishment. She goes on to state that this is 60 potential cases with the Attorney General Office, violations towards the hospital. She continues that is what keeps her coming to the board to prevent stuff like this from happening.

Layla Castleberry: Stated that she recently had an experience with a family member that was in the emergency room. She states that she asked for him by name. She says she has a document from Medicare that clearly says that you can provide basic information that would be in the hospital directory, such as patients phone and the room number. She stated that information about the patient's general condition or location to a family member, or anyone who is involved in the care, is acceptable. She states the next day she was told that it was violating his rights. She goes on to say that she has learned from coming to these meetings for the past several months that countless complaints have come in for the pharmacy and the poor financial state of the hospital. She stated concerns about the police being present. She stated patients getting their medicines is not a priority and that patient care is not a priority. She feels patients' families are not a priority, and the financial state of the hospital is not a priority. She states she has received the salaries of people working at the hospital and it that it pays to be the girlfriend of the CEO. She continues stating that recommendations from the CEO recommending keeping the billing company, keep the coding company, keep all the staff at the Business office, don't rearrange our resources, that the CEO should hire more people and go get a loan. That's what she carries as an observer. She states that she does not agree with that, that taxpayer do not agree with that.

IV. Approval of Minutes

Donna Magill made a motion to approve the minutes for January the 29th, 2024 and March the 26th, 2024. Corrections were made, we didn't change any of the contents, it was grammar. James Rannefeld seconded the motion. Motion carries 7-0.

V. Discussion regarding the pharmacy and how this customer was forced to transfer her prescriptions out to another pharmacy to have them filled, along with her concerns for pharmacy knowledge, and CCH customer service and patient care (Kathy Falcon)

Kathy Falcon's concern was regarding the answers in the pharmacy from the staff. She stated that they don't provide professional answers, and she does not understand why the people being trained are giving information. She feels if they don't have the answer, she feels like their supervisor should be giving out the information. She brought in her prescription. Everything was supposed to be taken care of. April 10th, she received another phone call from a staff member, who she stated had no idea what was going on and had no resolution to fix the problem. She states all they could say was "I don't know" and were helpless. She stated when she tried to walk them through the steps, she was told, the pharmacist told the staff to do it that way. With no resolution on how to get her prescription, she had no other choice but to transfer her prescriptions out. Within 20 minutes of getting my prescriptions she stated the pharmacy called and said her prescription was ready. They had no problem running them. She continued with stating there's a lack of training going on there and she doesn't feel like the CEO takes the concern seriously, and that she doesn't follow up. She stated the CEO sent her a long e-mail, with no resolution or a way to fix the problem. She states since then she had to transfer her medicine. She stated that week, \$6,000 walked out of pharmacy not just from her, but from people that other people know. She states that she is perfectly capable of going elsewhere to get her

prescription, but what about the people that aren't? That's what concerns her: The people that don't have a better option; They don't have anyone to pick up their medication; and What are they supposed to do? She continued that this is going to be a never-ending process.

VI. Business Items

A. Monthly Performance Improvement/QA monitors (M. Saucedo)

Mrs. Saucedo presented the report. She stated she continues to monitor the same measures. She stated nothing really has changed. Physical Therapy is doing measures, but besides that, that's all. With no questions asked, the Board moved to the next agenda item.

B. Billing and Revenue Cycle Management (M. Wilson)

Mrs. Wilson provided the report presenting data as of the end-of-month March. Inpatient days for March were 17, whereas last year at the same time was zero, and month prior was two. That is a substantial increase in inpatients. Inpatient and Swing Bed days are the number of days that we had the patients staying in our facility versus the number of patients total, because the number of patients doesn't necessarily give the board all of the more important information. Swing bed days were 45 for March, which is a substantial increase compared to last year which was 24 swing bed days, in addition to an increase compared to last month from 29. Compared to last year, that's greater than a 100% improvement. That says a lot for Dr. McFadden, Michelle and the nursing staff, as well as the ED

For receivables, presenting end-of-month March data, we had \$255,948, which puts us over \$2.4 million for year-to-date, which is an increase from last year. Adjustments went down to \$17,185. This downward trend is good for adjustments. That means that things are filed more accurately, and that puts us at one point a little over \$1.3 million total, which is down from last year as well.

Change Healthcare, as many people probably know, was breached near the end of February. That caused us to be completely shut down because they are our clearinghouse. Had Change Healthcare not been breached, we would have received much more. Where we received almost \$265K, we should have received closer to \$700,000 or \$800,000. They did fix part of their breach problem. enough to be able to get things back on track. However, they were breached again and there's not a lot of information out yet. It doesn't look like we've been impacted at this point.

C. Financial Statement/Accounts Payable (M. Lozano)

Melaine Lozano provided the report, presenting data as of the end-of-month March. We did receive the Ship COVID grant money that's in the other revenue. Meaning we collected \$573,000 in cash, and our expenses have gone down. That's this is the third month in a row they've gone down. We actually had a net profit of \$240,000, which is the first time we had an operating profit in years. I was able to mail out \$168,000 of checks. There were \$38,000 still outstanding, so it's close to \$200,000. I'm still holding from the ones we just paid \$312,000, but we are supposed to be receiving over \$300,000 from Medicare hopefully this week. The checks have been cut, they just haven't been moved. Once we have the money expected, the checks will be mailed out.

A board member stated concern about not having an updated budget.

D. Staff Appointments (Action Item)

None

E. Center for Improvement in Healthcare (CIHQ) approval (Action Item)

Currently, we hold CMS (Centers for Medicare & Medicaid Services) certification, obtained through unannounced surveys where our areas are reviewed and graded. Our last survey was in September 2021, meaning we are due for another soon.

However, there's another option for accreditation: CIHQ. They're approved by CMS and are among the nation's fastest-growing accreditation programs. Our commitment is to exceed minimum standards set by the government and improve care in our community.

CIHQ offers numerous benefits, including access to extensive resources and support services at no extra charge. While CMS surveys entail resource investment, CIHQ's annual fee of \$5750 covers initial and re-accreditation surveys, aiming to ensure quality care while meeting federal requirements.

Brandi Gloria made a motion to approve the expenditure for CIHQ accreditation, and Donna Magill seconded. Motion passed 4-3.

VII: Chief Executive Officer's report (M. Wilson)

- A. I'd like to start out stating that the hospital staff, our partners, and I continue to do our best with utmost integrity. Despite rumors and hearsay to the contrary, we work hard every day to serve our communities.
- B. Durbin Audit Report – Our representative was not available for tonight's meeting. The meeting will be scheduled mid-May, after the elections.
- C. We are very excited to announce that we have a new service – Ultrasound! Multiple exams are available, and our day is typically Wednesday. Orders from providers need to be pre-authorized before faxing the order. After receiving both the order and pre-authorization, the Radiology Department will call the patient to schedule a time and to provide the patient with any preparation instructions.
- D. As a reminder, the services we offer are: Emergency Department and designated Level IV Trauma facility, Observation, Inpatient & Swing Bed both with any necessary Therapy Services, a robust Clinical Lab (btw happy lab week, last week), Radiology with a 64-slice CT, Inpatient Pharmacy, Retail Pharmacy, Outpatient Therapy to include Physical Therapy and Occupational Therapy, and the Rural Health Clinic. All of these departments are open and staffed with the appropriate personnel.
- E. We continuously receive compliments and accolades by most patients with whom we have contact. Unfortunately, they are the *quiet majority*. As the CEO of our small hospital, I urge everyone to recognize the harm caused by rumors, hearsay, and half-truths. They undermine trust throughout the community, create unnecessary anxiety by patients/staff/and potential staff, and hinder our ability to serve the community effectively. Let's commit to open communication and fact-checking to ensure accurate information prevails. Thank you for your understanding and cooperation.
- F. Through my hard work, along with the efforts of those around me (like Michelle), numerous agencies have reached out and offered to help us through what we know are difficult times. These agencies include THA (Texas Hospital Association), TORCH (Texas Organization of Rural and Community Hospitals), State Office of Rural Health (SORH), NRHA (National Rural Health Association), Inquiseek, Texas A&M School of Medicine, C3HIE, and too many more to mention. If we can encourage the community to prioritize tasks that hold a greater significance with the big picture in mind, and towards more meaningful endeavors, we can foster a culture of productivity and selflessness, and

we can propel this system toward a trajectory far beyond our recent accomplishments. We continue to rely on your time and patience. Transforming this situation may require well over a year.

VIII: Pursuant to Texas Government Code Sections 551.071 and 551.085, the CCH Board entered into executive session

The board entered into Executive Session at 6:30 p.m. for Consultations with Attorney, as well as Deliberation by Governing Board of Certain Providers of Health Care Services. Executive Session ended at 9:43p.m.

IX: Action from Executive Session

Donna Magill made a motion to approve the Alpha Expense Management for the two year plan option. Brandi Gloria seconded the motion. Motion passed 7-0.

Anita Aguilar made a motion to give Concho County Hospital attorney Trent Krienke the authority to pursue legal action against Mr. Brian Lady for a breach of release and separation agreement, and have the attorney Trent Krienke entitled to recover all costs and expenses as a result of the employees' breach. Elizabeth Eureste seconded the motion. The motion fails 2-5.

X: Meeting Adjournment

Brent Frazier made a motion and Donna Magill seconded the motion to adjourn at 9:46 p.m. Motion passed 7 – 0.

The next board meeting will be May 28,2024 at 5:30 p.m.

Anita Aguilar

Concho County Hospital Board President

5-29-2024

Date