



MISSION

It is our mission to deliver quality healthcare to the residents of and visitors to BigBearValley through the most effective use of available resources.

VISION

To be the premier provider of emergency medical and healthcare services in our BigBearValley.

BOARD OF DIRECTORS BUSINESS MEETING AGENDA

WEDNESDAY, JANUARY 12, 2022 @ 1:00 PM

CLOSED SESSION 1:00 PM HOSPITAL CONFERENCE ROOM

OPEN SESSION @ APPROXIMATELY 2:00 PM HOSPITAL CONFERENCE ROOM

41870 GARSTIN DRIVE, BIG BEAR LAKE, CA 92315

(Closed Session will be held upon adjournment of Open Session as noted below. Open Session will reconvene @ approximately 2:00 p.m. –Hospital Conference Room 41870 Garstin Drive,

Big Bear Lake, CA 92315)

Copies of staff reports or other written documentation relating to each item of business referred to on this agenda are on file in the Chief Executive Officer's Office and are available for public inspection or purchase at 10 cents per page with advance written notice. In compliance with the Americans with Disabilities Act and Government Code Section 54954.2, if you need special assistance to participate in a District meeting or other services offered by the District, please contact Administration (909) 878-8214. Notification at least 48 hours prior to the meeting or time when services are needed will assist the District staff in assuring that reasonable arrangements can be made to provide accessibility to the meeting or service. **DOCUMENTS RELATED TO OPEN SESSION AGENDAS (SB 343)** -- Any public record, relating to an open session agenda item, that is distributed within 72 hours prior to the meeting is available for public inspection at the public counter located in the Administration Office, located at 41870 Garstin Drive, Big Bear Lake, CA 92315. For questions regarding any agenda item, contact Administration at (909) 878-8214.

OPEN SESSION

1. CALL TO ORDER

Peter Boss, President

2. PUBLIC FORUM FOR CLOSED SESSION

This is the opportunity for members of the public to address the Board on Closed Session items.

(Government Code Section 54954.3, there will be a three (3) minute limit per speaker. Any report or data required at this time must be requested in writing, signed and turned in to Administration. Please state your name and city of residence.)

3. ADJOURN TO CLOSED SESSION*

CLOSED SESSION

1. CHIEF OF STAFF REPORT/QUALITY IMPROVEMENT: *Pursuant to Health & Safety Code Section 32155

- (1) Chief of Staff Report

2. HOSPITAL QUALITY/RISK/COMPLIANCE REPORTS: *Pursuant to Health & Safety Code Section 32155

- (1) Risk / Compliance Management Report
- (2) QI Management Report

3. REAL PROPERTY NEGOTIATIONS: *Government Code Section 54956.8/TRADE SECRETS: *Pursuant to Health and Safety Code Section 32106 and Civil Code Section 34266.1

- (1) Property Acquisition/Lease/Tentative Improvement (Anticipated Disclosure 1/12/22)

4. TRADE SECRETS: *Pursuant to Health and Safety Code Section 32106, and Civil Code Section 3426.1

- (1) Brent Beaird, MD BBUC Service Agreement (Anticipated Disclosure 1/12/22)
- (2) Third Party Payor Contract Negotiations (Anticipated Disclosure 1/12/22)

OPEN SESSION

1. CALL TO ORDER

Peter Boss, President

2. ROLL CALL

Shelly Egerer, Executive Assistant

3. FLAG SALUTE

4. ADOPTION OF AGENDA*

5. RESULTS OF CLOSED SESSION

Peter Boss, President

6. PUBLIC FORUM FOR OPEN SESSION

This is the opportunity for persons to speak on items of interest to the public within subject matter jurisdiction of the District, but which are not on the agenda. Any person may, in addition to this public forum, address the Board regarding any item listed on the Board agenda at the time the item is being considered by the Board of Directors. (*Government Code Section 54954.3, there will be a three (3) minute limit per speaker. Any report or data required at this time must be requested in writing, signed and turned in to Administration. Please state your name and city of residence.*)

***PUBLIC RESPONSE IS ENCOURAGED AFTER MOTION, SECOND AND
PRIOR TO VOTE ON ANY ACTION ITEM***

7. DIRECTORS' COMMENTS

8. INFORMATION REPORTS

A. Foundation Report

Marsha Oskey, Foundation President

B. Auxiliary Report

Gail Dick, Auxiliary President

9. CONSENT AGENDA*

Notice to the Public:

Background information has been provided to the Board on all matters listed under the Consent Agenda, and the items are considered to be routine by the Board. All items under the Consent Agenda are normally approved by one (1) motion. If discussion is requested by any Board Member on any item; that item will be removed from the Consent Agenda if separate action other than that as stated is required.

A. December 08, 2021 Business Board Meeting Minutes: Shelly Egerer, Executive Assistant

B. December 2021 Human Resource Report: Erin Wilson, Human Resource Director

C. December 2021 Plant and Maintenance Report: Michael Mursick, Plant & Maint. Manager

D. December 2021 Infection Control Report: Heather Loose, Infection Preventionist

E. Policies & Procedures (Summary Attached)

(1) Diagnostic Imaging

(2) Employee Health

(3) HIM

(4) Infection Control

(5) Information Technology

(6) Laboratory

(7) Medical Staff

(8) Surgery

F. Committee Meeting Minutes:

(1) December 07, 2021 Finance Committee Meeting Minutes

10. OLD BUSINESS*

- None

11. NEW BUSINESS*

- A.** Discussion and Potential Approval of the Following Service Agreements:
 - (1) Brent Beaird, MD BBUC Service Agreement
- B.** Discussion and Potential Approval of BVCHD Board of Directors Board Stipend Modification/Frequency
- C.** Discussion and Update on QHR Board Leadership Conference February 22 – February 24
- D.** Discussion and Potential Approval of Travel Expenses for BVCHD Board of Directors to Attend the QHR Board of Directors Conference not to exceed \$1,700.00
- E.** Discussion, Review and Update on BVCHD Strategic Plan
- F.** Discussion and Potential Approval of the Board of Directors Big Bear Urgent Care Inc. Board Meeting Schedule
- G.** Discussion and Potential Approval of Resolution No. 22-467 Big Bear Urgent Care Inc. Company Credit Card

12. ACTION ITEMS*

- A. Acceptance of QHR Health Report**
Woody White, QHR Health
 - (1) January 2022 QHR Health Report
- B. Acceptance of CNO Report**
Kerri Jex, Chief Nursing Officer
 - (1) December 2021 CNO Report
- C. Acceptance of the CEO Report**
Evan Rayner, Chief Executive Officer
 - (1) January 2022 CEO Report
- D. Acceptance of the Finance Report & CFO Report**
Garth Hamblin, Chief Financial Officer
 - (1) November 2021
 - (2) CFO Report

13. ADJOURNMENT*

*** Denotes Possible Action Items**

**BEAR VALLEY COMMUNITY HEALTHCARE DISTRICT
BUSINESS BOARD MEETING MINUTES
41870 GARSTIN DRIVE, BIG BEAR LAKE, CA 92315
DECEMBER 08, 2021**

PRESENT: Peter Boss, MD, President Steven Baker, Treasurer
Ellen Clarke, 1st Vice President Evan Rayner, CEO
Jack Briner, 2nd Vice President Shelly Egerer, Exec. Assistant
Mark Kaliher, RN, Secretary

ABSENT: Gail Dick, Auxiliary Woody White w/ QHR via phone
Marsha Oskey w/Foundation

STAFF: Kerri Jex Mary Norman Sheri Mursick Erin Wilson

OTHER: None

COMMUNITY

MEMBERS: Babette Jergens

OPEN SESSION

1. CALL TO ORDER:

President Boss called the meeting to order at 1:00 p.m.

CLOSED SESSION

1. PUBLIC FORUM FOR CLOSED SESSION:

President Boss opened the Hearing Section for Public Comment on Closed Session items at 1:00 p.m. Hearing no request to make public comment. President Boss closed Public Forum for Closed Session at 1:00 p.m.

2. ADJOURNED TO CLOSED SESSION:

President Boss called for a motion to adjourn to Closed Session at 1:01 p.m. Motion by Board Member Clarke to adjourn to Closed Session. Second by Board Member Kaliher to adjourn to Closed Session. President Boss called for a vote. A vote in favor of the motion was 5/0.

- Board Member Clarke – yes
- Board Member Briner – yes
- President Boss - yes
- Board Member Baker – yes
- Board Member Kaliher - yes

RECONVENE TO OPEN SESSION

1. CALL TO ORDER:

President Boss called the meeting to Open Session at 2:30 p.m.

2. ROLL CALL:

Peter Boss, Steven Baker, Jack Briner, Mark Kaliher, and Ellen Clarke were present. Also present was Evan Rayner, CEO, and Shelly Egerer, Executive Assistant.

3. FLAG SALUTE:

Board Member Baker led flag salute and all present participated.

4. ADOPTION OF AGENDA:

President Boss called for a motion to adopt the December 08, 2021 Board Meeting Agenda as presented. Motion by Board Member Briner to adopt the December 08, 2021 Board Meeting Agenda as presented. Second by Board Member Clarke to adopt the December 08, 2021 agenda as presented. President Boss called for a vote. A vote in favor of the motion was 5/0.

- Board Member Clarke – yes
- Board Member Briner – yes
- President Boss - yes
- Board Member Baker – yes
- Board Member Kaliher - yes

5. RESULTS OF CLOSED SESSION:

President Boss reported that the following action was taken in Closed Session:

- Chief of Staff Report:
 - Initial Appointment:
 - Alex Wurm, MD
 - Royce Molick, MD
 - Sophia Fong, PA
 - Re-Appointment:
 - Sheila Thomas, NP
 - Request for Change of Status:
 - Michael Chin, MD- Active
 - Voluntary Resignation:
 - Audrey McCarron, MD
 - Nisha Warikoo, MD
 - Brian Tzung, MD
- Risk Report/Compliance Report
- QI Report

President Boss called for a vote. A vote in favor of the motion was 5/0.

- Board Member Clarke – yes
- Board Member Briner – yes
- President Boss - yes
- Board Member Baker – yes
- Board Member Kaliher - yes

6. PUBLIC FORUM FOR OPEN SESSION:

President Boss opened the Hearing Section for Public Comment on Open Session items at 2:32 p.m. Hearing no request to make public comment, President Boss closed Public Forum for Open Session at 2:32 p.m.

7. DIRECTORS COMMENTS

- Board of Directors thanked all staff for their hard work and glad to be a part of the hospital.

8. INFORMATION REPORTS

A. Foundation Report:

- Ms. Oskey was not present to provide a report

B. Auxiliary Report:

- Ms. Dick was not present to provide a report

9. CONSENT AGENDA:

A. November 10, 2021 Business Board Meeting Minutes: Shelly Egerer, Executive Assistant

B. November 2021 Human Resource Report: Erin Wilson; Human Resource Director

C. November 2021 Plant and Maintenance Report: Michael Mursick, Plant & Maint. Manager

D. November 2021 Infection Control Report: Heather Loose, Infection Preventionist

E. Policies & Procedures:

- (1) Food & Nutrition Services
- (2) Employee Health
- (3) Laboratory
- (4) Compliance
- (5) HIM
- (6) Materials Management
- (7) Patient Access
- (8) Mandatory Vaccines for Employees Addendum: COVID Vaccination Policy

F. Committee Meeting Minutes:

- (1) November 02, 2021 Finance Committee Meeting
- (2) June 02, 2021 Planning & Facilities Committee Meeting Minutes

President Boss called for a motion to approve the Consent Agenda as presented. Motion by Board Member Briner to approve the Consent Agenda as presented. Second by Board Member Baker to approve the Consent Agenda as presented. President Boss called for the vote. A vote in favor of the motion was 5/0.

- Board Member Clarke – yes
- Board Member Briner – yes
- President Boss - yes
- Board Member Baker – yes
- Board Member Kaliher - yes

10. OLD BUSINESS*

- None

11. NEW BUSINESS*

A. Discussion and Potential Approval of the Following Service Agreements:

- (1) Pacific Companies Service Agreement
- (2) Steven Groke, MD BBUCI Service Agreement
- (3) Jeffrey Orr, MD Chief of Staff Service Agreement

President Boss called for a motion to approve the agreements one through three as presented. Motion by Board Member Baker to approve the agreements one through three as presented. Second by Board Member Briner to approve the agreements one through three as presented. President Boss called for the vote. A vote in favor of the motion was 5/0.

- Board Member Clarke – yes
- Board Member Briner – yes
- President Boss - yes
- Board Member Baker – yes
- Board Member Kaliher - yes

B. Discussion and Potential Approval of Evan Rayner, CEO being the Check Signer for the Big Bear Urgent Care Inc.:

- Mr. Rayner informed the Board of Directors that the bank requested Board approval for he to be the check signer for the Urgent Care Inc.

President Boss called for a motion to approve Evan Rayner, CEO as the authorized check signer for the Big Bear Urgent Care Inc. Motion by Board Member Clarke to approve Evan Rayner, CEO as the authorized check signer for the Big Bear Urgent Care Inc. Second by Board Member Kaliher to approve Evan Rayner, CEO as the authorized check signer for the Big Bear Urgent Care Inc. President Boss called for the vote. A vote in favor of the motion was 5/0.

- Board Member Clarke – yes
- Board Member Briner – yes
- President Boss - yes
- Board Member Baker – yes
- Board Member Kaliher - yes

C. Discussion and Potential Approval of Resolution No. 21-466 Nondesignated Public Hospital Bridge:

- Mr. Hamblin reported that we participated in the PRIME Program; will now be called QIP; up to two-year delay in timing bridge loan will pay up to 40%. This will assist other facilities loan of \$83,000 no interest and two year loan program. Finance committee gave a positive recommendation.

President Boss called for a motion to approve Resolution No. 21-466 Nondesignated Public Hospital Bridge as presented. Motion by Board Member Clarke to approve Resolution No. 21-466 Nondesignated Public Hospital Bridge as presented. Second by Board Member Briner approve Resolution No. 21-466 Nondesignated Public Hospital Bridge as presented. President Boss called for the vote. A vote in favor of the motion was 5/0.

- Board Member Clarke – yes
- Board Member Briner – yes
- President Boss - yes
- Board Member Baker – yes
- Board Member Kaliher - yes

D. Discussion and Potential Approval of the 2021 Medicare Cost Report:

- Mr. Hamblin reported he worked with WIPFLI and David Perry w/ QHR also reviewed. The district has a \$242,000 receivable and requires Board approval.

President Boss called for a motion to approve the 2021 Medicare cost report as presented. Motion by Board Member Baker to approve the 2021 Medicare cost report as presented. Second by Board Member Kaliher to approve the 2021 Medicare cost report as presented. President Boss called for the vote. A vote in favor of the motion was 5/0.

- Board Member Clarke – yes
- Board Member Briner – yes
- President Boss - yes
- Board Member Baker – yes
- Board Member Kaliher - yes

E. Discussion and Potential Approval of Bear Valley Community Healthcare District Election of Officers

- (1) **President**
- (2) **1st Vice President**
- (3) **2nd Vice President**
- (4) **Secretary**
- (5) **Treasurer**

Motion by Board Member Baker to leave all officers as is. Second by Board Member Briner Baker to leave all officers as is. President Boss called for a vote. A vote in favor of the motion was 5/0. President Boss called for the vote. A vote in favor of the motion was 5/0.

- Board Member Clarke – yes
- Board Member Briner – yes
- President Boss - yes
- Board Member Baker – yes
- Board Member Kaliher - yes

F. Discussion and Potential Approval of Bear Valley Community Healthcare District Committee Members:

- (1) **Planning & Facilities Committee Meeting**
- (2) **Finance Committee Meeting (Treasurer and Committee Member)**
- (3) **Human Resource Committee Meeting**

Motion by Board Member Kaliher to keep same committee assignments as they are now. Second by Board Member Clarke to keep same committee assignments as they are now. President Boss called for the vote. A vote in favor of the motion was 5/0.

- Board Member Clarke – yes
- Board Member Briner – yes

- President Boss - yes
- Board Member Baker – yes
- Board Member Kaliher - yes

12. ACTION ITEMS*

A. QHR Health Report:

- (1) November 2021 QHR Health Report:
 - Mr. White was not present

President Boss motioned to approve the QHR Report as presented. Motion by Board Member Briner to approve the QHR Report as Presented. Second by Board Member Baker to approve the QHR Report as presented. President Boss called for the vote. A vote in favor of the motion was 5/0.

- Board Member Clarke – yes
- Board Member Briner – yes
- President Boss - yes
- Board Member Baker – yes
- Board Member Kaliher - yes

B. Acceptance of CNO Report:

- Ms. Jex reported the following information:
 - Self-report to CDPH – State was on site for review
 - Nurse staffing is still a concern
 - \$5,000 referral signing bonus in place for RN's
 - Medical Stabilization Program intake December 15th
- Board Member Kaliher would like to have LVN's go back to school and become RN's; employment placement, current staff and community members that are committed to school at the district expense.

President Boss called for a motion to approve the CNO Report as presented. Motion by Board Member Baker to approve the CNO Report as presented. Second by Board Member Briner to approve the CNO Report as presented. President Boss called for the vote. A vote in favor of the motion was 5/0.

- Board Member Clarke – yes
- Board Member Briner – yes
- President Boss - yes
- Board Member Baker – yes
- Board Member Kaliher - yes

C. Acceptance of CEO Report

- Mr. Rayner reported the following information:
 - CMS has put in place the mandate on vaccination or religious/ medical exemption. The District has worked well to obtain all exemptions required.
 - Laboratory Department has need for staff; we are looking into a CLS program
 - Potential vehicle for staffing issues in the future for various departments
 - Agreement will be potentially presented at the January Board Meeting

President Boss motioned to approve the CNO Report as presented. Motion by Board Member Briner to approve the CNO Report as Presented. Second by Board Member Baker to approve the CNO Report as presented. President Boss called for the vote. A vote in favor of the motion was 5/0.

- Board Member Clarke – yes
- Board Member Briner – yes
- President Boss - yes
- Board Member Baker – yes
- Board Member Kaliher - yes

D. Acceptance of the CFO Report:

(1) October 2021:

- Mr. Hamblin reported the following:
 - Expenses increased 22%
 - Census is low during this time
 - Days cash on hand decreased

President Boss called for a motion to approve the CEO Report as presented. Motion by Board Member Briner to approve the CEO Report as presented. Second by Board Member Baker to approve the CEO Report as presented. President Boss called for the vote. A vote in favor was unanimously approved 5/0.

- Board Member Clarke – yes
- Board Member Briner – yes
- President Boss - yes
- Board Member Baker – yes
- Board Member Kaliher - yes

(2) CFO Report:

- Mr. Hamblin provided the following:
 - CARES Act Funding:
 - We have reported through the portal.
 - American Rescue Plan (ARP):
 - Submitted documents through portal
 - \$525,000 received for rural providers
 - PPP Loan Forgiveness Status:
 - \$2.5 forgiveness
 - FY 2021 Audited Financial Statements:
 - Work is being completed to get the audited finances completed
 - Urgent Care:
 - Painting and floors are updated

President Boss called for a motion to approve the October 2021 Finance Report and CFO Report as presented. Motion by Board Member Briner to approve the October 2021 Finance Report and CFO Report as presented. Second by Board Member Clarke to approve the October 2021 Finance Report as presented. President Boss called for the vote. A vote in favor was unanimously approved 5/0.

- Board Member Clarke – yes
- Board Member Briner – yes
- President Boss - yes
- Board Member Baker – yes
- Board Member Kaliher - yes

13. ADJOURNMENT:

President Boss called for a motion to adjourn the meeting at 3:07 p.m. Motion by Board Member Briner to adjourn the meeting. Second by Board Member Baker to adjourn the meeting. President Boss called for the vote. A vote in favor of the motion was unanimously approved 5/0.

- Board Member Clarke – yes
- Board Member Briner – yes
- President Boss - yes
- Board Member Baker – yes
- Board Member Kaliher - yes



Board Report
December 2021

Staffing	Active: 235 – FT: 162 PT: 11 PD: 62 New Hires: 5 Terms: 4 (3 Voluntary 1 Involuntary) Open Positions: 22
Employee Performance Evaluations	DELINQUENT: 30 days: 12 60 days: 9 90 days: 17 90+ days: 18 – (RT, ER, Dietary, Accounting, Admitting)
Work Comp	NEW CLAIMS: 0 OPEN: 8 Indemnity (Wage Replacement, attempts to make the employee financially whole) – 8 Future Medical Care – 0 Medical Only – 0
Employee Morale	Culture of Ownership team is working on updating BVCHD values Birthday Celebration January 18 th
Beta HEART	Care for the Caregiver up and Running CPI (Workplace Violence) classes have resumed
Teamsters Negotiations	BVCHD began negotiations for Radiology Technicians, Respiratory Therapists, Phlebotomists/Lab Assistants, ER Technicians, and Nursing Staffing Coordinator/Surgical Techs. Recently Admitting Clerks added.

Bear Valley Community Healthcare District Construction Projects 2021

Department / Project	Details	Vendor and all associated costs	Comments	Date Completed
Urgent Care- Patient Records	Planning the removal of excessive patient record boxes from the facility	Facilities	In Progress	
EVS Storage Drywall Repair	Replace old damaged drywall	Facilities	In Progress	
Plumbing Repair SNF/ACute	Repair the bad plumbing under the showers in the SNF & Acute Departments	Pride Plumbing	In Progress	
Hospital/FHC	Electrical equipment modernization	Centrica	In Progress	
Hospital/Cardboard Stall	Build a new stall for the cardboard hoppers and bring the old trash bin to code.	Bear Valley Paving	Completed	
Hospital- OR Renovations	Replace wall coverings and flooring	TBD	In Progress	
Fawnskin Lodge	Install new handrails, install new door access, install alarm system	Facilities	In Progress	
RHC Storage Conversion	Framing, flooring, lighting etc..	Facilities	In Progress	

Bear Valley Community Healthcare District Potential Equipment Requirements

Facilities- New Toolbox & Tool Set	Replace the old broken toolbox and replace the old handtool set	Northern Tools	On Backorder	
Hospital- Water treatment equipment	Our water treatment system is having issues that need to be addressed and replaced	Facilities/C.C.I	In Progress	

Policies for Approval by BOD

Department	Title	Summary
Acute Nursing	Voluntary Admissions for Medical Stabilization	Formatted. Removed Med Stabilization Sub-dept. from header. Revised statement. Removed verbiage regarding minors in #1. Added 2.1.2.1.1. and everything past 3.
Diagnostic Imaging - Mammography	Advisory for Women with Implants –PF-MAM-1	Annual review. Formatted.
Diagnostic Imaging - Mammography	Anatomy of the Breast – PF-MAM-8	Annual review. Formatted.
Diagnostic Imaging - Radiology	Diagnostic Imaging Patient Preparation	Annual review. Formatted.
Diagnostic Imaging - Radiology	Emergency Department Patient Procedure and Preparation for Imaging	Annual review. Formatted. Removed 2. - pregnancy line. Simplified new Sect. 2.
Diagnostic Imaging - Radiology	Fluoroscopy Procedures	Annual review. Formatted. Revised 3.
Diagnostic Imaging - Radiology	Fluoroscopy Weekly Check Procedure	Annual review. Formatted. Revised statement and section 1. Removed section 2.
Diagnostic Imaging - Radiology	Imaging Department Infection Control	Annual review. Formatted. Revised Section 5 & 6. Added Section 7.
Diagnostic Imaging - Radiology	Outpatient Imaging Procedure	Annual review. Formatted. Revised 1, 3 & 6.4. Added 2.
Employee Health	Communicable Disease Exposure and Post-Exposure Prophylaxis	Annual review. Formatted.
Employee Health	Employee Injury & Blood/ Body Fluid Exposure	Annual review. Formatted.
Employee Health	Fit for Duty Examination	Annual review. Formatted.
Employee Health	Healthcare District Personnel Vaccine Recommendations	Annual review. Formatted. Added 1.6 and 3.1.1.
Employee Health	Infectious Disease - Personnel	Annual review. Formatted.
Employee Health	Physical Therapy Intervention - Work Injury	Annual review. Formatted.
Employee Health	Safe Patient Handling Plan	Annual review. Formatted. Removed policy referenced in 1.3.1.
Employee Health	Tuberculosis Screening Policy and Treatment Plan - Personnel Specific	Annual review. Formatted. Revised 5.1.4.
HIM	Abbreviations in Medical Documentation	Annual review. Formatted. Updated URL and moved to 1.1.
HIM	Amendment To Protected Health Information (PHI)	Annual review. Formatted., Revised 2.1-2.3.
HIM	Incidental Disclosures	Annual review. Formatted.
HIM	Minimum Necessary	Annual review. Formatted.
Infection Control	COVID 19 Specimen Collection	Annual review. Formatted. Moved from ED Dept. Change title from "Specimen Collection ED Covid 19". Revised to reflect hospital wide process.
Information Technology	IT Security Incident Response Plan	New policy.
Laboratory - Blood Bank	ABO/RH Typing of Red Cells and Serum	Annual review. Formatted. Revised to reflect current process.
Laboratory - Blood Bank	Blood Bank Maintenance	Annual review. Formatted. Removed specific date on 7.1.1. & 8.1.1.
Laboratory - Blood Bank	Crossmatch - Immediate Spin	Annual review. Formatted. Revised to reflect current process.
Laboratory - Blood Bank	Lookback Program - Blood Bank	Annual review. Formatted.
Laboratory - Chemistry	Hemosure® Immunochemical Fecal Occult Blood Test (iFOB)	Annual review. Formatted. Revised to reflect current process.
Laboratory - Coag	Activated Partial Thrombolastin Time (APTT)	Annual Review. Formatted. Moved from Hema Sub-dept. Revised to reflect current process.
Laboratory - Microbiology	CSF Cultures	Annual review. Formatted. Revised to reflect current process. Took from 6pgs to 2pgs.
Laboratory - Microbiology	Culture Ear	Annual review. Formatted. Revised to reflect current process. Took from 4pgs to 2pgs.
Laboratory - Microbiology	Culture Eye	Annual review. Formatted. Revised to reflect current process. Took from 4pgs to 2pgs.
Laboratory - Microbiology	Lower Respiratory Cultures	Annual review. Formatted. Revised to reflect current process. Took from 10pgs to 3pgs.
Laboratory - Microbiology	Oxidase Test	Annual review. Formatted. Revised to reflect current process.
Laboratory - Microbiology	Staph Latex Kit	Annual review. Formatted. Removed Purpose, Materials list and Limitations section.
Laboratory - Microbiology	Tissue Cultures	Annual review. Formatted. Revised to reflect current process. Took from 8pgs to 2pgs.
Laboratory - Microbiology	Wet Mount Testing	Annual review. Formatted. Revised to reflect current process. Took from 3pgs to 1pg.
Laboratory - Phlebotomy	HIV - Testing and Reporting	Annual review. Formatted.
Med Staff	Right of Self-Governance	New policy.
Med Staff	Use of Scribes	Annual review. Formatted. Revised Statement moving portions into 1. & 2.
Surgery	Flexible Endoscope Processing	New policy.
Surgery	Implantation of Medical Devices	Annual review. Formatted. Revised to reflect current process.
Surgery	Monitoring of Sterilizers	Annual review. Formatted. Revised to reflect current process.
Surgery	Skin Preparation of Surgical Site	Annual review. Formatted. Revised to reflect current process.
Surgery	Storage of Flexible Endoscopes	Annual review. Formatted. Removed 2.1. Added 3, 4.2.1 & 4.2.2
Surgery	Verification of Cleaning Efficacy for Flexible Endoscopes	New policy.

**BEAR VALLEY COMMUNITY HEALTHCARE DISTRICT
BOARD OF DIRECTORS
FINANCE COMMITTEE MEETING MINUTES
41870 GARSTIN DR., BIG BEAR LAKE, CA 92315
DECEMBER 07, 2021**

MEMBERS Steven Baker, Treasurer Evan Rayner, CFO
PRESENT: Jack Briner, 2nd Vice President
Garth Hamblin, CFO

STAFF: Kerri Jex Erin Wilson

OTHER: None

**COMMUNITY
MEMBERS:** None

ABSENT: Woody White w/ QHR

OPEN SESSION

1. CALL TO ORDER:

Board Member Baker called the meeting to order at 1:00 p.m.

2. ROLL CALL:

Steven Baker and Jack Briner were present. Also present were Evan Rayner, CEO, Garth Hamblin, CFO and Shelly Egerer, Executive Assistant.

3. ADOPTION OF AGENDA:

Board Member Briner motioned to adopt the December 07, 2021 Finance Committee Meeting Agenda as presented. Second by Board Member Baker to adopt the December 07, 2021 Finance Committee Meeting Agenda as presented. Board Member Baker called for a vote. A vote in favor of the motion was unanimously approved.

- Board Member Baker - yes
- Board Member Briner- yes

CLOSED SESSION

1. PUBLIC FORUM FOR CLOSED SESSION:

Board Member Baker opened the Hearing Section for Public Comment on Closed Session items at 1:00 p.m. Hearing no request to address the Finance Committee, Board Member Baker closed the Hearing Section at 1:00 p.m.

2. ADJOURN TO CLOSED SESSION:

Board Member Baker motioned to adjourn to Closed Session at 1:00 p.m. Second by Board Member Briner to adjourn to Closed Session at 1:00 p.m. Board Member Baker called for a vote. A vote in favor of the motion was unanimously approved.

- Board Member Baker - yes
- Board Member Briner- yes

OPEN SESSION

1. CALL TO ORDER:

Board Member Baker called the meeting to order at 2:00 p.m.

2. RESULTS OF CLOSED SESSION:

Board Member Baker stated there was no reportable action from Closed Session.

3. PUBLIC FORUM FOR OPEN SESSION:

Board Member Baker opened the Hearing Section for Public Comment on Open Session items at 2:00 p.m. Hearing no request to address the Finance Committee, Board Member Baker closed the Hearing Section at 2:00 p.m.

4. DIRECTOR'S COMMENTS:

- None

5. APPROVAL OF MINUTES:

A. November 2, 2021

Board Member Briner motioned to approve the November 02, 2021 minutes as presented. Second by Board Member Baker to approve the November 02, 2021 minutes as presented. Board Member Baker called for a vote. A vote in favor of the motion was unanimously approved.

- Board Member Baker - yes
- Board Member Briner- yes

6. OLD BUSINESS:

- None

7. NEW BUSINESS*

A. Discussion and Potential Recommendation to the Board of Directors the 2021 Medicare Cost Report:

- Mr. Hamblin reported that the results of the cost report show a receivable of \$242,000. A summary of the report has been provided. We are asking the Finance Committee for a positive recommendation to the Board of Directors

Board Member Briner motioned to provide a positive recommendation to the Board of Directors of the 2021 Medicare Cost Report. Second by Board Member Baker to provide a positive recommendation to the Board of Directors of the 2021 Medicare Cost Report. Board Member Baker called for a vote. A vote in favor of the motion was unanimously approved.

- Board Member Baker - yes
- Board Member Briner- yes

B. Discussion and Potential Recommendation to the Board of Directors Resolution No. 21-466

- Mr. Hamblin reported that we began participation in the PRIME Program; as the State transitions from PRIME to QIP there will be a delay in payments; the \$83,852.00 loan is to bridge the plan; the funds go to support other facilities; request is to provide a positive recommendation to the Board of Directors.

Board Member Briner motioned to provide a positive recommendation to the Board of Directors for Resolution No. 21-466 as presented. Second by Board Member Baker to provide a positive recommendation to the Board of Directors for Resolution No. 21-466 as presented. Board Member Baker called for a vote. A vote in favor of the motion was unanimously approved.

- Board Member Baker - yes
- Board Member Briner- yes

8. PRESENTATION AND REVIEW OF FINANCIAL STATEMENTS*

A. October 2021 Finances:

- Mr. Hamblin reported the following information:
 - Decrease in days cash on hand due to purchase of UC
 - Significant loss for the month of October \$892,871
 - Expenses are higher
 - COVID continues to play a part in cost
 - Two COVID patients per day
 - Majority are not vaccinated
 - Large local population

B. CFO Report:

- Mr. Hamblin reported the following:
 - **CARES Act funding:**
 - Submitted documents to portal
 - Looks like we will have this money as cash flow
 - **American Rescue Plan (ARP) Rural Payments:**
 - Received \$525,000; based on rural facilities have a lot of challenges
 - Expenses will be related to the pandemic
 - Potential phase 4 has additional money to be distributed
 - **PPP Loan Forgiveness Status**
 - Received notice of forgiveness of \$2.5 million
 - Final shows we owe \$191,000
 - **FY 2021 Audited financial Statements:**
 - We will finalize the audited financial statements. There are some issues that needs to be incorporated
 - **Urgent Care:**
 - Cabinets are an estimated price at this time
 - Painting and flooring are completed
 - Schedule an open house once we have our mid-level

Board Member Briner motioned to approve the October 2021 Finance Report and CFO Report as presented. Second by Board Member Baker to approve the October 2021 Finance Report and CFO Report as presented. Board Member Baker called for a vote. A vote in favor of the motion was unanimously approved.

- Board Member Baker - yes
- Board Member Briner- yes

9. ADJOURNMENT*

Board Member Baker motioned to adjourn the meeting at 2:25 p.m. Second by Board Member Briner to adjourn the meeting. Board Member Baker called for a vote. A vote in favor of the motion was unanimously approved.

- Board Member Baker - yes
- Board Member Briner- yes



Recommendation for Action

Date: January 07, 2022

To: Board of Directors

From: Evan Rayner, CEO

A handwritten signature in black ink, appearing to be "ER", is written over the text "Evan Rayner, CEO".

Re: Brent Beard, MD Big Bear Urgent Care Inc. Service Agreement

Recommendation:

To approve Brent Beard, MD Big Bear Urgent Care Service Agreements as presented.

Discussion:

Brent Beard, MD Service Agreement; Dr. Beard has agreed to provide temporary physician services at Big Bear Urgent Care Inc. as needed. This is a two-year agreement at \$145.00 per hour and malpractice coverage. Termination is 45 days without cause.



Contract Cover Sheet

Contract Name: BRENT BEARD, MD
Purpose of Contract: Urgent Care Agreement
Contract # / Effective Date / Term/ Cost: 1/14/22 - 1/13/24 \$145⁰⁰ per day
Originating Dept. Name / Number: _____

Department Manager Signature: _____ Date: _____

BAA: ☒ Yes ☐ No

W-9: ☒ Yes ☐ No

<u>Administrative Officer</u>	Signature: <u>NA</u>	Date: <u>NA</u>
<u>HIPAA/Security Officer</u> (Software/EHR Related)	Signature: <u>NA</u>	Date: <u>NA</u>
<u>HIPAA Privacy Officer</u> (BAA applicable)	Signature: <u>NA</u>	Date: <u>NA</u>
<u>Legal Counsel</u>	Signature: <u>OIA EMAIL</u>	Date: <u>1/3/2022</u>
<u>Compliance Officer</u>	Signature: <u>Mary Noeman</u>	Date: <u>1/3/2022</u>
<u>Chief Financial Officer</u>	Signature: _____	Date: _____
<u>Chief Executive Officer</u>	Signature: _____	Date: _____
<u>Board of Directors</u> When Applicable	Signature: _____	Date: _____

1. Final Signatures on Contract, BAA & W-9: Date: _____
2. Copy of BAA forwarded to HIPAA Privacy Officer Date: _____
3. Copy of Contract/BAA/W-9 forwarded to Department Manager: Date: _____
4. Copy of Contract/BAA/W-9 forwarded to Contractor (if applicable): Date: _____
5. Copy of Contract/BAA/W-9 scanned/emailed to Controller: Date: _____

Contract Cover Sheet

CONFIDENTIAL NOTICE:

Note: This document and attachments are covered by CA Evidence Code 1157 and CA Health and Safety Code 1370.

NOTICE TO RECIPIENT: If you are not the intended recipient of this, you are prohibited from sharing, copying or otherwise using or disclosing its contents. If you have received this document in error, please notify the sender immediately by reply email and permanently delete this document and any attachments without reading, forwarding or saving them. Thank you
Updated 07/2019

**URGENT CARE AGREEMENT
BETWEEN
BIG BEAR URGENT CARE, INC AND
BRENT BEAIRD, M.D.**

THIS PHYSICIAN AGREEMENT ("Agreement") is made and entered into as of the 14th day of January 2022 by and between Big Bear Urgent Care, Inc., a California Corporation("BBUC"), and Brent Beaird, M.D. ("Physician").

RECITALS

WHEREAS, BBUC owns and operates an urgent care clinic located at 41947 Big Bear Boulevard, Big Bear Lake, California 92315 and commonly known as "Big Bear Urgent Care (the "Urgent Care Clinic") and may contract with physicians and physician extenders to provide healthcare services to the Urgent Care Clinic's patients.

WHEREAS, Physician is licensed by the Medical Board of California to practice medicine and is Bord Certified in Family Medicine. Physician is qualified to perform physician services for the Urgent Care patients.

WHEREAS, BBUC desires to retain the services of Physician to provide professional medical services, and Physician desires to so contract with BBUC to furnish those services.

NOW THEREFORE, in consideration of the mutual covenants, undertakings and promises contained herein, as well as other good and valuable consideration, the receipt and adequacy of which is hereby acknowledged, and intending to be legally bound hereby, the parties hereto agree as follows:

AGREEMENTS

SECTION I. RESPONSIBILITIES OF PHYSICIAN.

- A. SERVICES. During the term of this Agreement, Physician agrees to the following:
1. Physician shall provide Family Medicine services at BBUC on an as needed basis as agreed upon by Urgent Care and Physician.
 2. Physician will supply all instruments or other items needed to carry out the physician services. Physician agrees to only use instruments and supplies that comply with industry standards, any and all applicable regulations including, but not limited to, California Code of Regulations, Title 16, Section 1399.454, and to purchase such instruments and supplies from reputable sources.
 3. Physician shall be responsible for disposing of any supplies or instruments used as required by any and all applicable rules and regulations governing the practice of Family Medicine.
 4. Physician shall maintain records for all patients consistent with standard industry practices and shall provide such other record keeping and administrative services as may be reasonably requested by BBUC. All medical records remain the property of BBUC.
 5. Physician shall cooperate with any quality management and utilization management programs instituted by BBUC.
- B. ACCESS TO BOOKS AND RECORDS. If the value or cost of Services rendered to BBUC pursuant to this Agreement is Ten Thousand Dollars (\$10,000.00) or more over a twelve-month period, Physician agrees as follows:

1. Until the expiration of four (4) years after the furnishing of such Services, Physician shall, upon written request, make available to the Secretary of the Department of Health and Human Services (the "Secretary"), the Secretary's duly authorized representative, the Comptroller General, or the Comptroller General's duly authorized representative, such books, documents and records as may be necessary to certify the nature and extent of the cost of such Services; and
2. If any such Services are performed by way of subcontract with another organization and the value or cost of such subcontracted services is Ten Thousand Dollars (\$10,000.00) or more over a twelve (12) month period, such subcontract shall contain, and Physician shall enforce, a clause to the same effect as subparagraph 1. immediately above.

The availability of Physician's books, documents, and records shall be subject at all times to all applicable legal requirements, including without limitation, such criteria and procedures for seeking and obtaining access that may be promulgated by the Secretary by regulation. The provisions of subparagraphs 1. and 2. of Section I.B. shall survive expiration or other termination of this Agreement, regardless of the cause of such termination.

- C. Physician will not carry out any of the duties of the Agreement through a subcontract.
- D. **ETHICS.** In performing services under this Agreement, Physician shall use his/her best and most diligent efforts and professional skills; perform professional supervisory services; render care to patients in accordance with and in a manner consistent with the high standards of medicine; and comply with the Urgent Care 's rules and regulations.
- E. In respect to Physician's performance of Physician's professional duties, BBUC shall neither have nor exercise control or direction over the specific methods by which Physician performs Physician's professional clinical duties at BBUC. BBUC's sole interest shall be to ensure that such duties are rendered in a competent, efficient and satisfactory manner.
- F. Physician recognizes that the professional reputation of BBUC is a unique and valuable asset. Physician shall not make any negative, disparaging or unfavorable comments regarding BBUC or any of its owners, officers and/or employees to any person, either during the term of this Agreement or following termination of this Agreement.
- G. **NOTIFICATION OF CERTAIN EVENTS.** Physician shall notify BBUC in writing within three (3) business days after the occurrence of any one or more of the following events:
 1. Physician's clinical privileges at any healthcare facility are denied, suspended, restricted, revoked or voluntarily relinquished;
 2. Physician becomes the subject of any suit, action or other legal proceeding arising out of Physician's professional services;
 3. Physician is required to pay damages or any other amount in any malpractice action by way of judgment or settlement;
 4. Physician becomes the subject of any disciplinary proceeding or action before any state's acupuncture board or similar agency responsible for professional standards or behavior;
 5. Physician becomes incapacitated or disabled from practicing medicine;
 6. Any act of nature or any other event occurs which has a material adverse effect on Physician's ability to perform the Services under this Agreement;
 7. Physician changes the location of his/her offices;
 8. Physician is charged with or convicted of a criminal offense; or

9. Physician is debarred, suspended, or otherwise excluded from any federal and/or state health care payment program by action of the Office of Inspector General of the Department of Health and Human Services or Medi-Cal Office, or by any equivalent or coordinating governmental agencies.

H. COORDINATION OF SERVICES. Physician shall cooperate with BBUC, through its Medical Director, in connection with providing the Services.

SECTION II. REPRESENTATIONS AND WARRANTIES

Physician represents and warrants to BBUC, upon execution and throughout the term of this Agreement as follows:

- A. Physician is not bound by any agreement or arrangement which would preclude Physician from entering into, or from fully performing the services required under this Agreement;
- B. Physician's license to practice Family Medicine in the State of California or in any other jurisdiction has never been denied, suspended, revoked, terminated, voluntarily relinquished under threat of disciplinary action, or made subject to terms of probation or any other restriction;
- C. Physician's privileges at any health care facility have never been denied, suspended, revoked, terminated, voluntarily relinquished under threat of disciplinary action, or restricted in any way;
- D. Physician shall perform the services required hereunder in accordance with: (1) all applicable federal, state, and local laws, rules and regulations; (2) all applicable standards of care of the Department of Public Health, the Department of Health Care Services or other relevant accrediting organizations; and (3) participate in continuing education as necessary to maintain licensure, maintain board certification, maintain professional competence and skills commensurate with the standards of the medical community and as otherwise required by the medical profession; and (4) all applicable Bylaws, Rules and Regulations of BBUC;
- E. Physician has not in the past conducted, and is not presently conducting, Physician's practice in such a manner as to cause Physician to be suspended, excluded, barred or sanctioned under the Medicare or Medi-Cal Programs or any government licensing agency, and has never been convicted of an offense related to health care, or listed by a federal agency as debarred, excluded or otherwise ineligible for federal program participation;
- F. Physician has, and shall maintain throughout the term of this Agreement, an unrestricted license to practice medicine in the State of California and staff membership privileges at BBUC;
- G. Physician has disclosed and will at all times during the term of this Agreement promptly disclose to the Urgent Care : (1) the existence and basis of any legal, regulatory, professional or other proceeding against Physician instituted by any person, organization, governmental agency, health care facility, peer review organization, or professional society which involves any allegation of substandard care or professional misconduct raised against Physician; and (2) any allegation of substandard care or professional misconduct raised against Physician by any person, organization, governmental agency, health care facility, peer review organization or professional society.

- H. Physician agrees to promptly disclose any change to the status of his/her license or any changes the status of any privileges Physician may have at any other health care facility;
- I. Physician shall deliver to the Urgent Care promptly upon request copies of all certificates, registrations, certificates of insurance and other evidence of Physician's compliance with the foregoing as reasonably requested by the Urgent Care; and
- J. Physician shall participate in all government and third-party payment or managed care programs in which Urgent Care participates, render services to patients covered by such programs, and accept the payment amounts provided for under these programs as payment in full for services of Physician to Urgent Care's patients. If Urgent Care deems it advisable for Physician to contract with a payer with which Urgent Care has a contract, Physician agrees in good faith to negotiate a contractual agreement equal to the reasonable prevailing reimbursement rates for Physicians within the geographic area of Urgent Care.

SECTION III. INDEMNIFICATION OF LIABILITY.

Physician agrees to indemnify, defend and hold harmless Urgent Care and its governing board, officers, employees and agents from and against any and all liabilities, costs, penalties, fines, forfeitures, demands, claims, causes of action, suits, and costs and expenses related thereto (including reasonable attorney's fees) which any or all of them may thereafter suffer, incur, be responsible for or pay out as a result of bodily injuries (including death) to any person or damage to any property (public or private), alleged to be caused by or arising from: (1) any acts or omissions of Physician; (2) any violations of federal, state, or local statutes or regulations arising out of or resulting from any act, error or omission of Physician; (3) the use of any copyrighted materials or patented inventions by Physician; or (4) Physician's breach of its warranties or obligations under this Agreement. The rights and obligations created by this indemnification provision shall survive termination or expiration of this Agreement.

SECTION IV. INDEPENDENT CONTRACTOR.

In performing the services herein specified, Physician is acting as an independent contractor, and shall not be considered an employee of BBUC. In no event shall this Agreement be construed as establishing a partnership or joint venture or similar relationship between the parties hereto, and nothing herein contained shall be construed to authorize either party to act as agent for the other. Physician shall be liable for Physician's own debts, obligations, acts and omissions, including the payment of all withholding, social security and other taxes and benefits. As an independent contractor, Physician is responsible for filing such tax returns and paying such self-employment taxes as may be required by law or regulations.

SECTION V. COMPENSATION.

At the end of each month, Physician shall submit to BBUC a completed and signed time sheet of time spent in the BBUC seeing patients. Upon receipt of completed and signed provider time sheet for services rendered under this Agreement, BBUC shall pay Physician, as for sole compensation hereunder, on an hourly basis at \$145.00 (One-Hundred Forty-Five Dollars) per hour. A billable visit is a face to face encounter where services are rendered at a level that justifies a Urgent Care charge of 99201 or higher for a new patient, or 99212 or higher for an established patient, or 99381 or higher for a preventative medicine visit. "No charge/courtesy" visits are not eligible for provider payment. BBUC will provide Physician a list of patients seen per BBUC records that supports the payment made to Physician. All patient billings for Physician services

remain the property of BBUC. Monthly payments to Physician shall be made on or before the 10th (tenth) day of the month, following the month in which services are rendered.

SECTION VI. COMPLIANCE.

- A. BBUC is committed to compliance with all billing and claims submission, fraud and abuse laws and regulations. In contracting with BBUC, Physician agrees to act in compliance with all laws and regulations. BBUC has completed a Compliance Program to assure compliance with laws and regulations. Physician is therefore expected to comply with the policies of the BBUC Compliance Program.

At a minimum, Physician is expected to:

1. Be aware of those procedures which affect the Physician, and which are necessary to implement the Compliance Program, including the mandatory duty of Physician to report actual or possible violations of fraud and abuse laws and regulations; and
2. Understand and adhere to standards, especially those which relate to the Physician's functions for or on behalf of the BBUC.

- B. Failure to follow the standards of BBUC's Compliance Programs (including the duty to report misconduct) may be considered to be a violation of the Physician's arrangement with the BBUC and may be grounds for action by BBUC, including termination of the relationship.

SECTION VII. TERM.

This Agreement is effective from January 14, 2022 to January 13, 2024; however, this Agreement is subject to early termination as provided in Section. VIII. below.

SECTION VIII. EARLY TERMINATION.

- A. BBUC may terminate this Agreement immediately upon written notice to Physician based on the occurrence of any of the following events:
1. Physician's license to practice medicine is suspended, revoked, terminated, or otherwise restricted;
 2. Physician's privileges at BBUC, or any other healthcare facility, are in any way suspended, revoked, or otherwise restricted;
 3. Medicare and/or Medi-Cal significantly changes the RHC program;
 4. BBUC suspends operations;
 5. Physician Services Agreement is terminated or expires;
 6. Physician's failure to comply with the standards of BBUC's Compliance Program, to the extent that such failure results in material fine and or sanction from Medicare or Medi-Cal Program;
 7. Physician fails to complete patient records in a timely fashion;
 8. Physician fails to maintain the minimum professional liability insurance coverage;
 9. Physician inefficiently manages patients, and such inefficient management has not been cured after 30 days written notice from BBUC;
 10. Physician's inability to work with and relate to others, including, but not limited to patients and ancillary staff, in a respectful, cooperative and professional manner and such inability has not been cured after 30 days written notice from BBUC ;
 11. Physician is unable to provide services under the terms of this Agreement due to a physical or mental disability;

12. Physician becomes impaired by the use of alcohol or the abuse of drugs;
13. Physician is convicted of any criminal offense, regardless of whether such action arose out of Physician's provision of professional services;
14. Physician commits any act of fraud as determined by reasonable discretion of the Board whether related to the Physician's provision of services or not; or
15. A mutual written agreement terminating this Agreement is entered into between BBUC and Physician.

B. Either party may terminate this Agreement for material breach; provided that the non-defaulting party shall give written notice of the claimed default, and the other party shall have 30 days to cure such performance, failing which, this Agreement may thereafter be immediately terminated by the non-defaulting party.

C. Either party may terminate this Agreement, without cause, by providing the other party forty-five (45) days prior written notice.

D. **EFFECT OF TERMINATION.** In the event that this Agreement is terminated for any reason, Physician shall be entitled to receive only the amount of compensation earned prior to the date of termination.

E. **TERMINATION WITHIN FIRST TWELVE (12) MONTHS.** If this Agreement is terminated, with or without cause, during the first twelve (12) months of the term, the parties shall not enter into any new agreement or arrangement during the remainder of such twelve (12) month period.

SECTION IX. CONFIDENTIALITY.

Physician shall not disclose to any third party, except where permitted or required by law or where such disclosure is expressly approved by the patient in writing, any patient or medical record information regarding BBUC patients, and Physician shall comply with all federal and state laws and regulations, and all rules, regulations, and policies of BBUC and its Medical Staff, regarding the confidentiality of such information from BBUC patients receiving treatment of any kind, including treatment for alcohol and drug abuse. Physician is fully bound by the provisions of the federal regulations governing Confidentiality of Alcohol and Drug Abuse Patient Records as codified at 42 C.F.R. Chapter 1, Part 2, enacted pursuant to 42 U.S.C. 290ee, and agrees to be separately bound by a Business Associate Agreement drafted pursuant to HIPAA as set forth in Public Law 104-191, as codified at 42 U.S.C. 1301 et. seq.

SECTION X. INSURANCE.

PROFESSIONAL LIABILITY. Physician shall maintain, at BBUC's sole expense, a policy or policies of professional liability insurance as required by this Section. Such insurance shall provide coverage for Physician as the named insured, and such policy shall cover any acts of Physician's professional negligence which may have occurred during the relevant term and said policies of insurance shall be written with limits of liability of at least the minimum coverage required from time to time by the Medical Staff bylaws, but in any event no less than One Million Dollars (\$1,000,000.00) per claim/Three Million Dollars (\$3,000,000.00) annual aggregate for "claims made" insurance coverage. Physician will provide BBUC with no less than 30 days advance written notice of any coverage changes or cancellation of the policy. The coverage required by this section shall be either on an occurrence basis or on a claims made basis. If the coverage is on a claims made basis, not less than 30 days prior to the termination of Physician's claims made coverage, Physician shall be obligated to provide evidence to District of continued coverage for claims which arise from Physician's services either by (1) evidence of continued effect of a claims made policy which provides coverage for all claims arising out of

incidents occurring prior to the termination of such coverage, or (2) evidence of an extended reporting period endorsement or "tail insurance" for all claims arising out of incidents occurring prior to termination of such coverage, and shall provide BBUC with a certificate evidencing such tail or retroactive coverage.

The obligations set forth in this Section shall survive the termination of this Agreement.

SECTION XI. ASSIGNMENT.

Physician shall not assign, sell, or otherwise transfer his/her Agreement or any interest in it without written consent of BBUC.

SECTION XII. NOTICES.

The notice required by this Agreement shall be effective if mailed, one (1) business day after the day on which the notice was sent via overnight mail, addressed as follows:

BBUC: Evan Rayner, Chief Executive Officer
Big Bear Urgent Care
P. O. Box 1829
Big Bear Lake, CA 92315

Physician: Brent Beaird, MD
PO Box 6691
Big Bear Lake, CA 92315

SECTION XIII. PRE EXISTING AGREEMENT.

This Contract replaces and supersedes any and all prior arrangements or understandings by and between Urgent Care and Physician with regard to the subject matter hereof.

SECTION XIV. URGENT CARE NOT PRACTICING MEDICINE.

This Agreement shall in no way be construed to mean or suggest that BBUC is engaged in the practice of Family Medicine and/or medicine.

SECTION XV. ENTIRE AGREEMENT.

This Agreement constitutes the entire Agreement, both written and oral, between the parties, and all prior or contemporaneous agreements respecting the subject matter hereof, whether written or oral, express or implied, are suppressed. This Agreement may be modified only by written agreement signed by both of the parties.

SECTION XVI. SEVERABILITY.

The non-enforceability, invalidity, or illegality of any provision to this Agreement shall not render the other provisions unenforceable, invalid or illegal.

SECTION XVII. GOVERNING LAW.

This Agreement shall be governed under the laws of the State of California. In the event of any dispute arising between the parties arising out of or related to this Agreement, the parties agree that such dispute shall be settled by binding arbitration, pursuant to the rules of the American Arbitration Association, San Bernardino County.

SECTION XVIII. REFERRALS.

The parties acknowledge that none of the benefits granted Physician is conditioned on any requirement that Physician make referrals to, be in a position to make or influence referrals to, or otherwise generate business for BBUC. The parties further acknowledge that Physician is not restricted from establishing staff privileges at, referring any service to, or otherwise generating any business for any other facility of Physician's choosing.

SECTION XIX. ANTI-HARASSMENT/DISCRIMINATION/RETALIATION

The parties are prohibited from engaging in any discriminatory, harassing, or retaliatory conduct, and Physician agrees to fully comply with all applicable local, state and federal anti-discrimination and employment-related regulations and laws.

SECTION XXI. HIPAA BUSINESS ASSOCIATE AGREEMENT.

The parties have concurrently with the execution of this Agreement, executed Exhibit A entitled HIPAA Business Associates Agreement, which Exhibit is attached hereto and incorporated herein by reference.

In Witness Whereof, the parties have executed this Agreement as of the first date written above.

Dated: _____ By: _____
Evan Rayner, Chief Executive Officer
Big Bear Urgent Care, Inc.
P. O. Box 1829
Big Bear Lake, CA 92315

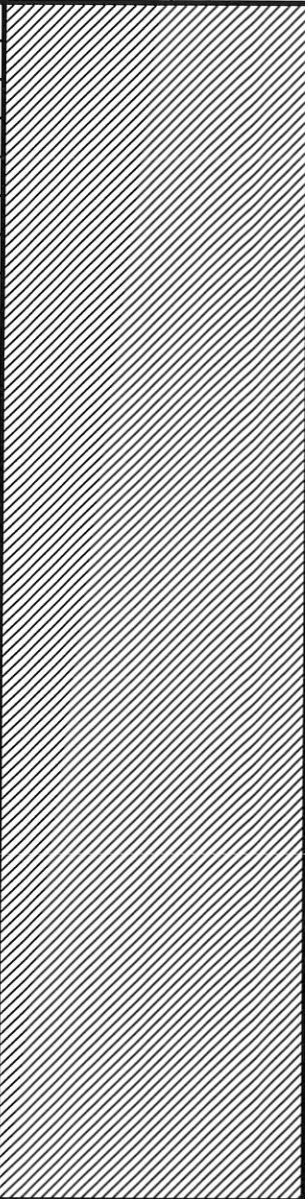
Dated: _____ By: _____
Peter Boss, President, BOD
Big Bear Urgent Care, Inc.
P. O. Box 1829
Big Bear Lake, CA 92315

Dated: _____ By: _____
Brent Beaird, MD
PO Box 6691
Big Bear Lake, CA 92315

Big Bear Urgent Care, Inc.
Contract Physician Monthly Report

Provider Name: _____

Month: _____

Date	# Patients Scheduled	Cancelled	No Shows	Walk Ins	Total Pts. Seen		Total \$ Due	Total Hrs.Wrkd.
1					0			
2					0			
3					0			
4					0			
5					0			
6					0			
7					0			
8					0			
9					0			
10					0			
11					0			
12					0			
13					0			
14					0			
15					0			
16					0			
17					0			
18					0			
19					0			
20					0			
21					0			
22					0			
23					0			
24					0			
25					0			
26					0			
27					0			
28					0			
29					0			
30					0			
31					0			
Totals:	0	0	0	0	0	X	\$ -	0

Physician Signature: _____

Date: _____

Manager Signature: _____

Date: _____

Administration Signature: _____

Date: _____

- m) To approve negotiated agreements with representative labor organizations.
- n) To provide for resources and support systems for the quality improvement functions and risk management functions related to patient care and safety.
- o) To regularly monitor, through information provided by appropriate persons and entities, such as designed committees of the Medical Staff, the quality and appropriateness of services provided.
- p) To do any and all other acts and things necessary to carry out the provisions of these bylaws or the Local Health Care District Law.

SECTION 4 COMPENSATION

The Board of Directors shall serve without compensation, except that the Board of Directors, by a resolution adopted by a majority vote of the members of the Board, may authorize payment not to exceed one hundred dollars (\$100.00) per Brown Act meeting and not to exceed five (5) Brown Act meetings per month as compensation to each member of the Board of Directors unless a resolution establishing the need for up to six (6) meetings per month for effective operation of the District is adopted pursuant to California Health and Safety Code section 32103. Board Members shall not be compensated for any month in which the member does not attend any Brown Act meetings.

Effective January 1, 2019, pursuant to California Health and Safety Code section 32103, Director compensation per Brown Act meeting may be increased by no more than five percent (5%) for each calendar year following the operative date of the last adjustment pursuant to ordinance adopted by the Board of Directors. Any such increase after January 1, 2019 requires majority vote of the Board of Directors at a Brown Act meeting.

Each Member of the Board of Directors shall be allowed his or her actual necessary travel and incidental expenses incurred in the performance of official business of the district as approved by the Board. Should any member of the Board of Directors request compensation for any activity other than a meeting, as defined by the Brown Act, a majority vote of the Board is required prior to attending such activity. A Board Member shall be compensated with a stipend not to exceed one hundred dollars (\$100.00) for attending educational seminars related to the official business of the District. This \$100.00 will not count towards the monthly compensation limit for attendance at Brown Act meetings, it is separate and in addition thereto.

SECTION 5 VACANCIES


Any vacancy on the Board shall be filled by appointment by a majority vote of the remaining members of the Board. Any person appointed to fill such vacancy shall hold office for such term and under such conditions as specified by California Government Code Section 1780.

SECTION 6 ABSENCES FROM REGULAR MEETINGS

All Board members shall notify the President or designee no later than 24 hours prior to any regular meeting of their intent not to attend said meeting. If any member of the Board is absent, with or without excuse, from meetings of the Board for three consecutive regular meetings or from three of any five consecutive meetings of the Board (Local Health Care



Recommendation for Action

Date: January 06, 2022
To: Board of Directors
From: Evan Rayner, CEO 
Re: QHR Annual Board Essential Conference

QHR is conducting the 2022 Health Board Essentials February 22 through February 24, 2022 in Litchfield Park, Az.

Attached is the agenda for the QHR Board Essential Conference; our hope is that all Board Members attend the annual conference. Please take a moment to review the agenda and contact the Administration Office if you would like to attend.

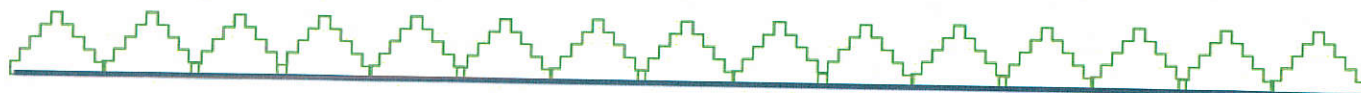


2022 QHR Health Board Essentials

The Wigwam | Litchfield Park, AZ | February 22, 2022


Tuesday, February 22, 2022

7:00 am – 7:45 am	BREAKFAST
7:45 am – 8:00 am	Welcome & Introductions John Turner, COO, QHR Health
8:00 am – 8:45 am	The Role of a Board Member and Servant Leadership Chip Holmes, Senior Vice President, QHR Health Lisa Boston, Associate Vice President, Compliance Consulting/Corporate Compliance Officer, QHR Health
8:45 am – 9:30 am	Quality & Continuum of Care Erika Sundrud, Vice President, Care Transformation, QHR Health
9:30 am – 9:45 am	BREAK
9:45 am – 10:45 am	Board Member Ethics: Can You Answer the Uncomfortable Questions? Lisa Boston, Associate Vice President, Compliance, QHR Health
10:45 am – 11:45 am	Physician and Nursing Oversight Wes Brown, Physician Services, QHR Health Shelley Riser, Chief Clinical Officer, QHR Health
11:45 am – 12:45 pm	LUNCH
12:45 pm – 1:30 pm	Financial Oversight Jody Pigg, Vice President, QHR Health
1:30 pm – 2:15 pm	Strategic Planning and Accountability Ryan Nestruck, Associate Vice President, Strategy, QHR Health
2:15 pm – 2:30 pm	Wrap Up
2:30 pm – 4:00 pm	FREE TIME
4:00 pm – 7:00 pm	PLUS™ Expo & Welcome Reception





Recommendation for Action

Date: January 06, 2022
To: Board of Directors
From: Evan Rayner, CEO 
Re: Travel Expenses for QHR Board Leadership Conference

Recommendation:

To approve travel expenses not to exceed \$1,700.00 for any BVCHD Board of Director to attend QHR Board Leadership Conference

Discussion:

According to BVCHD District Bylaws Article III; Section 7 Compensation:

Each Member of the Board of Directors shall be allowed his or her actual necessary travel and incidental expenses incurred in the performance of official business of the district as approved by the Board. Should any member of the Board of Directors request compensation for any activity other than a meeting, as defined by the Brown Act, a majority vote of the Board is required prior to attending such activity. A Board Member shall be compensated with a stipend not to exceed one hundred dollars (\$105.00) for attending educational seminars related to the official business of the District. This \$105.00 will not count towards the monthly compensation limit for attendance at Brown Act meetings, it is separate and in addition thereto.

RESOLUTION NO. 22-467

**RESOLUTION OF BEAR VALLEY COMMUNITY HEALTHCARE DISTRICT
BOARD OF DIRECTORS
RELATING TO “URGENT CARE INC. COMPANY” CREDIT CARD**

WHERE AS, the Board of Directors of the Big Bear Urgent Care, Incorporated obtaining a "Company" credit card through First Mountain Bank, and that this "Company" credit card was in the name of Big Bear Urgent Care, Incorporated, authorization in the names of Chief Executive Officer, Controller, and Board Recording Secretary, and that the credit limit maximum of \$5,000.

BE IT RESOLVED that the credit limit will be established at a maximum of \$5,000.

Peter Boss, President
Big Bear Urgent Care, Inc Board of Directors

Date

Mark Kaliher, Secretary
Big Bear Urgent Care, Inc Board of Directors

Date

VOTE:

AYES _____

NOES _____

ABSTAIN _____

ABSENT _____

Thank you Bear Valley Family for our Partnership					
	QHR Solution	Leader	Coverage	2021 - 2022	Comments
Key	Focus Items This Month	Focus Items This Year	Completed This Year	Updated This Month	
Coverage	WIC - Within Contract				
Return On Investment					
			2020	2021	
Direct QHR Business Partner Benefits			\$ 297,272	\$ 309,632	
Indirect QHR Business Partner Benefits			\$ 143,797	\$ 157,252	
			\$ 441,069	\$ 466,884	
Professional Fees			\$ 243,652	\$ 304,565	
Return On Investment-Dollars			\$ 197,417	\$ 162,319	
Return On Investment-Percentage			81.0%	53.3%	
	QHR Solution	Leader	Coverage	2021	Comments
Strategy & Positioning	Ongoing Strategy Advisement	Strategy Team	WIC	Ongoing support for the Strategic and Business plans. Quarterly check-ups with the Board/Hospital.	Business Plan and Strategy review to be updated and presented to Board quarterly. QHR to be involved throughout the year.
	Construction and Design Project	David Anton	WIC	Initial discussions/meetings for the construction of new Hospital to meet CA codes.	Process to begin Q2 2022.
	Vantage Productivity Refresh/Modeling	Jennifer Stephens	WIC	Review/update staffing models, FTE's.	Review to begin in Q2 2022.
	Recruitment for new CEO	Region VP	WIC	Begin search for new CEO. John leaving at end of October 2021.	New CEO hired-Evan Rayner. Start date Nov 15th.
	Strategic Plan	Strategy Team	WIC	Process started in May 2020. Covid caused delays in finalization.	Plan completed, Board retreat in November 2020, adopted by Board in January 2021.

	QHR Solution	Leader	Coverage	2021	Comments
Clinical & Compliance	Compliance/Risk Assessment	Erika Sundred	WIC	Assessment of Hospital Compliance and Risk programs	Review to begin in Q3 2022.
	Community Health Needs Assessment	Strategy Team	WIC	Assessment of community needs and sentiment, hospital needs, provider needs.	Review to begin in Q3 2022.
	Medical Stabilization Program	Shelley Riser	Add-on	Ongoing support for Medical Stabilization program	Physician coverage being finalized. Operational issues being addressed by QHR with Administration.
	Urgent Care Transisiton/Start-up	Region Team	WIC	Transition begun Oct 1, 2021.	UCC transaction has been completed. Renovations completed. Provider staffing being addressed. Weekly calls were held to aid with start-up.
	Urgent Care Analysis/Proforma	Region Team	WIC	Project begun August 2019.	Analysis completed. Contracts reviewed. Purchase completed October 1, 2021.
Financial & Operations	Monthly Operations Review	Region Team	WIC	Held Monthly on 2nd Monday	Monthly calls with BVCHD admin, QHR Region Team, Support Team
	Comparative Data Analysis	Leslie Roney	WIC	Perfomed Monthly	Results are reported in rankings report distributed to hospital monthly. See graphs below.
	Managed Care Assessment and Contract Review	Wanda Wright	WIC	Project started March 2021	Negotiations with Heritage ongoing. Call held to coordinate efforts with Hospital's CA representative. Revised contract close.
	Financial Ops Review (FOR)	Region Team	WIC	Information request to go out in February.	
	Contractual Accounting Review	David Perry	WIC	Information request to go out in February.	
	QPA/GPO Review	PLUS Team	WIC	Project performed on an annual basis.	Annual report completed and sent to Hospital Q4 2021.
	COVID-19 Supply Focus	PLUS Team	WIC	QHR PLUS Warehouse Operating	Three orders requested/completed FY to date.
	Price Transparency	CPSI	WIC	Project started October 2020	Finalized and implemented in January 2021.
	Cost Report Review	David Perry	WIC	Review to begin when cost report completed by accounting firm.	Review completed with no changes. Report submitted.

	QHR Solution	Leader	Coverage	2021	Comments
Trustee Education	National Trustee Conference with Trustee Essentials	QLI	WIC	Q1 2022-Wigwam Resort Phoenix, AZ	
	Board Self-Assessment	Region Team	WIC	Schedule Q1 2022	
	Governance Webinars	QLI	WIC	Second Tuesday each month	See monthly listing below.
	Regional Conferences	QLI	WIC	Three regional conferences being developed	John and Connie attended the Boston conference.
Leadership Education & Development	CEO Evaluation	Region VP	WIC	Initial 90-day evaluation to be held in February.	
	QLI Webinars and Leadership Development	QLI	WIC	Monthly webinars held throughout the year.	
	HFR Regulatory Updates	HFR	WIC	Updates sent daily/monthly as dictates.	
	Director Leadership Series	QLI	Add-on	Board approved QHR onsite program in Feb 2021.	"Leading From the Middle" completed August 2021
	CFO Evaluation	Region VP	WIC	Annual evaluation to begin August 2021	Evaluation completed. Presented at Oct Board meeting.

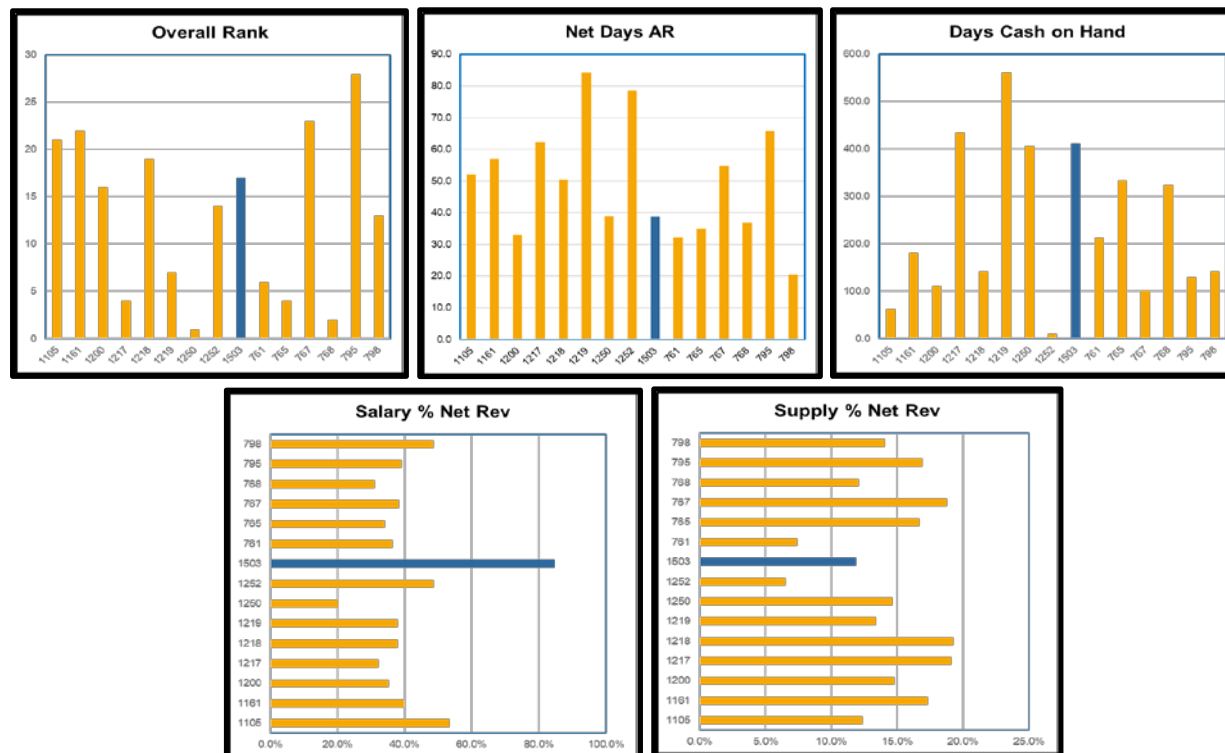
QHR Region Team and Internal Consulting Hours		
	2020	2021 YTD
Region Team	340	428
Internal Consultants	286	285
Total:	626	713

Key Contract Items
Hospital Annual Professional Fee = \$320,488 Current Contract November 1, 2020 - October 31, 2026 Mutual 90-day window to terminate October 31, 2024 Original Contract Date: June 25, 2015
Medical Stabilization Unit Annual Professional Fee = \$183,600 Current Contract January 1, 2021 - December 31, 2025 Mutual 90-day window to terminate December 31, 2023 Original Contract Date: January 1, 2021

Estimated Annual Benefits & Savings 12 Month Totals		
QHR Business Partnership Benefits		
	2020	2021 YTD
HPG Discounts	\$ 218,188	\$ 225,951
HPS Rebates	\$ 10,917	\$ 9,211
GPO Group Savings	\$ 6,922	\$ 7,018
Strategic Service Partner	\$ 61,245	\$ 67,452
Total:	\$ 297,272	\$ 309,632
Other QHR Business Partnership Benefits		
MD Buyline	\$ 10,000	\$ 10,000
AHA Dues Discounts	\$ 8,597	\$ 4,605
J & J QPA Rebate	-	\$ 47
Consulting (Region Team)	\$ 68,000	\$ 85,600
Consulting Engagements	\$ 57,200	\$ 57,000
Total:	\$ 143,797	\$ 157,252
Partnership Education Benefit		
Direct Employee Education	Trustee Quick Reference Guide	
QLI Monthly Education Offerings	Board Essestial Workshop	
Regional Education Conferences	Monthly Trustee Education Webinars	
Board Specific Education Action Plan	Monthly/Daily Regulatory Updates	
National QHR Trustee Conference	HealthTrust University	
Other Benefits		
New Compliance Director Support	Cost Report Review and Analysis	
Urgent Care Assessment, Structure, Planning	QHR Best Practices	
Managed Care Payor Yield Assessment	Accounts Receivable Review and Analysis	
Contractual Allowance & Bad Debt Analysis	Strategic Plan and Quarterly Updates	
Community Health Needs Assessment	CEO Recruitment	

Bear Valley QHR QPA/Plus Summary									
Desc	Spend			Savings \$\$s			QHR AF		
	2019	2020	Variance	2019	2020	Variance	2019	2020	Variance
SSP	\$2,440,068.00	\$2,694,883.21	\$254,815.21	\$54,447.00	\$61,244.91	\$6,797.91	\$8,976.00	\$36,602.13	\$27,626.13
HPG	\$1,533,998.00	\$2,280,772.29	\$746,774.29	\$136,988.00	\$297,918.57	\$160,930.57	\$22,438.00	\$10,291.70	-\$12,146.30
Total:	\$3,974,066	\$4,975,656	\$1,001,590	\$191,435	\$359,163	\$167,728	\$31,414	\$46,894	\$15,480
SSP - Strategic Service Partners									
Notes:	HPG - Healthcare Purchasing Group - HPG savings do not include savings from capital equipment & services purchases. These saving are not included due to the complex & custom nature of those contracts.								
QPA Administrative Fees - A formal disclosure letter is sent out annually to the Board Chair and CEO (these AF are industry standard paid by Vendors to QHR QPA/PLUS).									

Critical Access Hospitals: Comparison Ranking Charts - November 2021 Data



QHR Learning Institute (QLI) Education Information Section		
2022 Trustee Webinars - 2nd Tuesday @ 12 PM CST		BVCHD Participants
Jan 11	Cybersecurity 2022	
Feb 8	Outreach & Engagement	
Check out all Webinars through the link below Be sure to add these dates to your calendar! Visit https://qhr.com/learning-institute/ to register		



QHR Health COVID-19 ASSISTANCE

- Developed a **COVID-19 Task Force** with Resources Website
[QHR Health COVID-19 Online Resource Center.](#)
Or <https://qhrcovid19.com/>
 - Taskforce providing support & guidance on:
 - Finance & Reimbursement
 - FEMA Assistance
 - Supply Chain & Pharmacy
 - Clinical Care & Survey Readiness
 - Includes Podcasts on key areas of focus
- Set up **PPE Warehouse & Distribution Program**
 - For QHR Health Hospital Families *only*
 - Actively working with Supply Chain Leaders at all Facilities
 - Assisting an average of 38 Hospital Families a week
 - Up and running since April 1, 2020
 - **BVCHD received support 3 times (N95 Masks, Isolation Gowns, Nitrile Gloves)**
- Published **QHR Health Post-COVID Operational Playbook Vols. 1 & 2**
 - Covers US Government's guidelines for reopening our Country's healthcare system complemented with QHR suggested best practices focused on:
 - Restart Readiness
 - Capacity & Utilization
 - Service Changes
 - Revenue Integrity & Reimbursement Due Diligence
 - Regulatory & Compliance
 - Communications & Strategy
- **Financial, Funding & Reimbursement Options Federal & State**
 - Monitoring, developing & recommending plans for all three phases of Government response for financial support (i.e.: Accelerated Payments, Grants, Loans, Future Cost Reporting)
- Established **Shared Service Centers**
 - COVID-19 Patient Triage
 - CARES Act / Federal & State Funding Options - Identification, Application & Tracking

QHR Regional Team		
Team Member & Position	Phone	Email
Regional Team		
Woody White, CPA - Senior Vice President	561.644.5391	wwhite@qhr.com
Leslie Roney - Regional Financial Analyst	615.400.7220	lroney@qhr.com
Support Team		
David Perry - VP Healthcare Finance & Reimbursement	615.371.4703	dperry@qhr.com
John Waltko - VP Regulatory & Financial Reporting	615.371.4678	jwaltko@qhr.com
Wanda Wright - AVP Managed Care	704.999.8890	wwright@qhr.com
Lisa Boston - AVP Compliance Consulting	225.337.3155	lboston@qhr.com
Jo Piland - Manager QHR Health Learning Institute	615.371.4842	jpiland@qhr.com
Sue Dorsey - Director SSP, QHR PLUS Services	615.427.3631	sdorsey@myplusnow.com
Peter Miessner - VP ResolutionRCM	281.415.8388	pmiessner@qhr.com
Ryan Nestricks - Senior Director Strategy	847.533.0759	rnestricks@qhr.com
Jonathan Boatwright - Manager SSP, QHR PLUS Services	615.371.4932	jboatwright@myplusnow.com
Scott Nation - VP ASC Services	423.653.6620	snation@qhr.com
Erika Sundrud - VP Care Transformation	617.838.2496	esundrud@qhr.com



CNO Monthly Report

TOPIC	UPDATE
1. Regulatory	<ul style="list-style-type: none"> ▪ Program Flexibilities sent to CDPH for annual review process. ▪ Working on CMS/ CDPH Vaccine Mandates for Healthcare workers, including booster shots. ▪ No deficiencies were issued for SNF self-report visit.
2. Budget/Staffing	<ul style="list-style-type: none"> ▪ We are experiencing difficulties in recruiting Registered Nurses. ▪ 5,000.00 referral bonus in place ▪ 10,000.00 signing bonus in place
3. Departmental Reports	
<ul style="list-style-type: none"> ▪ Emergency Department 	<ul style="list-style-type: none"> ▪ Staffing is a concern as RN positions have not been filled. ▪ Travelers have become difficult to recruit ▪ COVID volume and ski volume have been very high
<ul style="list-style-type: none"> ▪ Acute 	<ul style="list-style-type: none"> ▪ Medical stabilization program has been on hold due to change in Medical Director. First 2 patients were successfully detoxed. Program may be on hold again due to COVID surge. ▪ QHR on site for MS program trial roll out. ▪ Continuing weekly calls with QHR staff for MS implementation plan.
<ul style="list-style-type: none"> ▪ Skilled Nursing 	<ul style="list-style-type: none"> ▪ New DON and ADON have assumed their new positions. ▪ SNF residents continue to be closely monitored for COVID. ▪ SNF unit on high infection control precautions due to recent COVID activity. ▪ Currently no positive residents. ▪ Several vacant positions CNA/ LVN
<ul style="list-style-type: none"> ▪ Surgical Services 	<ul style="list-style-type: none"> ▪ Cataract and Pain management cases are currently being performed. ▪ Working with Dr. Chin to resume general surgery.
<ul style="list-style-type: none"> ▪ Case Management 	<ul style="list-style-type: none"> ▪ Acute nurse covering while case manager on FMLA.

<ul style="list-style-type: none"> ▪ Respiratory Therapy 	<ul style="list-style-type: none"> ▪ Ventilators are updated for COVID capability. ▪ Updating RT policies. ▪ PFT services on hold. ▪ COVID volume affecting RT department
<ul style="list-style-type: none"> ▪ Physical Therapy 	<ul style="list-style-type: none"> ▪ Volumes exceeding normal. ▪ FTEs may exceed budgeted amounts relative to increase in volume.
<ul style="list-style-type: none"> ▪ Food and Nutritional Services 	<ul style="list-style-type: none"> ▪ Working with Culture of Ownership committee to host employee appreciation Holiday events ▪ Food vending machine for afterhours/ night staff has been delivered. Working with IT to get the machine ready for credit card processing. ▪ Volumes of sales continue to increase each month. ▪ Planning chili cook off. ▪ Pizza now offered to staff all day on demand, a full pizza costs less than \$10.
4. Infection Prevention	<ul style="list-style-type: none"> ▪ Planning, research and education regarding COVID-19 planning ▪ Reporting COVID cases to Public Health and CDPH L&C ▪ Completing mandatory reporting for COVID-19 for SNF and the District
5. Quality Improvement	<ul style="list-style-type: none"> ▪ SCORE Survey department action plans have implemented and reviewed at the QI meeting. ▪ Care for the Caregiver program continues to be a BETA HEART focus. ▪ Culture of Safety Newsletter being developed.
6. Policy Updates	<ul style="list-style-type: none"> ▪ Cal OSHA COVID prevention plan in place ▪ New Policy developed for mandatory vaccine plan- updating to include mandatory booster shots.
7. Safety & Products	<ul style="list-style-type: none"> ▪ Workplace Violence committee continues to make progress on BETA ESWI projects.
8. Education	<ul style="list-style-type: none"> ▪ Several trainings taking place developed for staff education. ▪ Working on RQI program implementation ▪ Working with maintenance to rain on new fire extinguisher process. ▪ Working closely with Acute nurses to implement Medical Stabilization program.
9. Information Items/Concerns	<ul style="list-style-type: none"> ▪ Received \$100,000 HRSA grant for vaccine confidence. First Federal Financial Report completed Oct. 29th. Next Report due 1/30/22 ▪ Attending many calls related to COVID with HASC, CHA, CDPH.

	<ul style="list-style-type: none"> ▪ Closely monitoring COVID trends/ hospital bed utilization throughout the state. ▪ COVID volume affecting multiple departments in the hospital. Staffing resources are limited. Staff are doing an exceptional job at handling the stress and workload. ▪ Continuing to provide public vaccination clinics for initial and booster vaccines. ▪
Respectfully Submitted by: <i>Kerri Jex, CNO</i> <i>Date: January 3rd, 2022</i>	

2021 Surgery Report

Nov-21		
Physician	# of Cases	Procedures
Chin - MD	0	
Busch - Podiatrist	0	
Critel - CRNA	2	LESI
Critel - CRNA	1	Hip Injection
Tayani	0	Cataracts
Total	3	
Dec-21		
Physician	# of Cases	Procedures
Chin - MD	0	
Busch - Podiatrist	0	
Critel - CRNA	3	LESI
Tayani	4	Cataracts
Total	7	

Annual Total

63

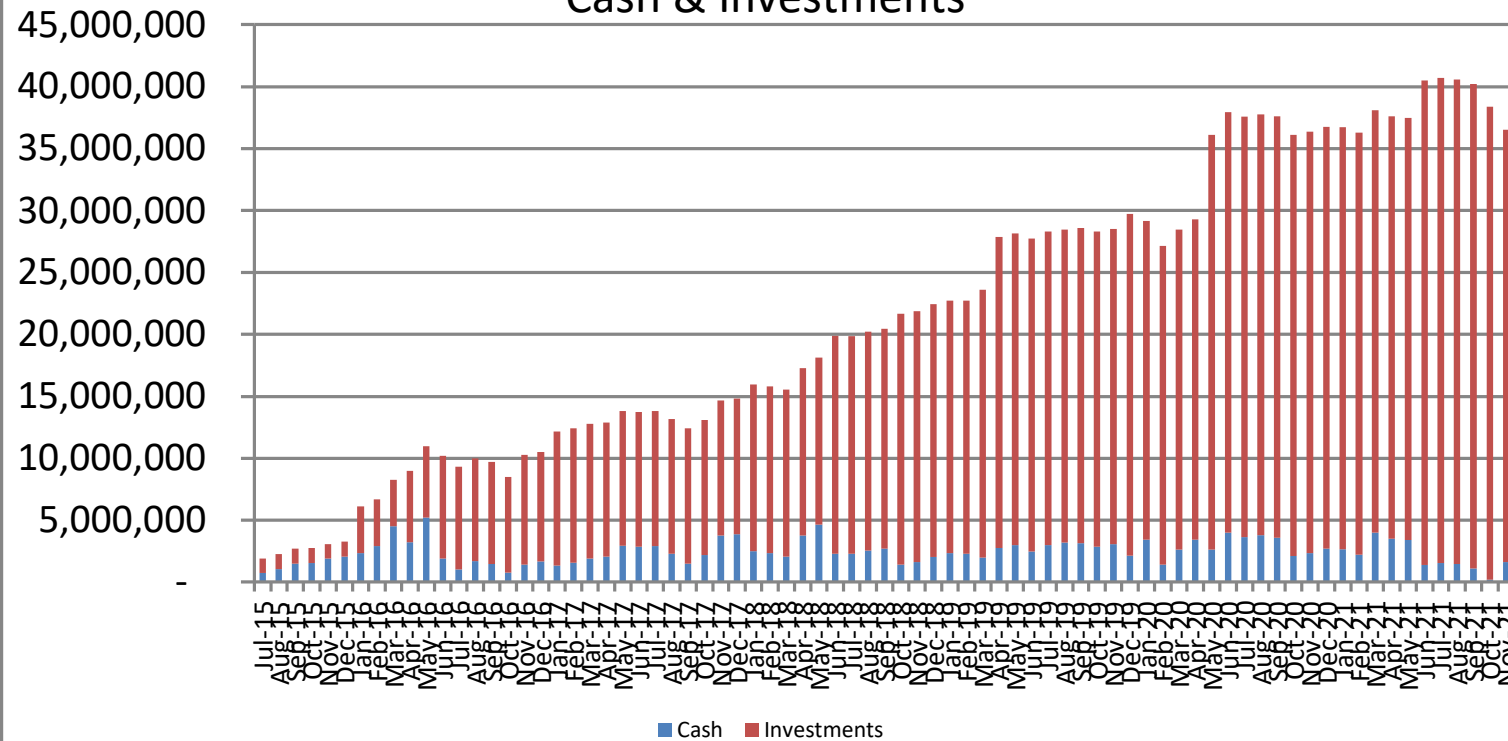


Finance Report
November 2021 Results

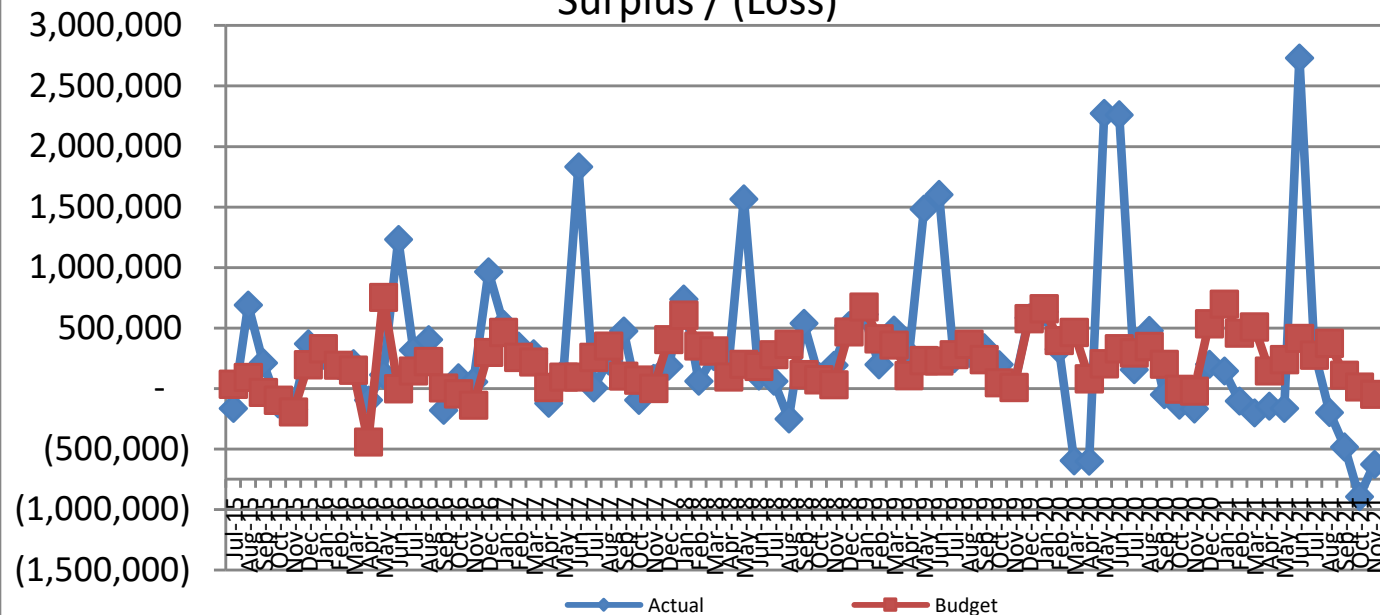
Summary for November 2021

- Cash on hand \$ 1,616,814
Investments \$36,526,347
- Days Cash on hand, including investments with LAIF – 433
- Loss of \$624,839 was lower than budgeted loss
- Total Patient Revenue was 3.5% higher than Budget for the month
- Net Patient Revenue was 0.5% higher than budget
- Total Expenses were 23.6% more than budget

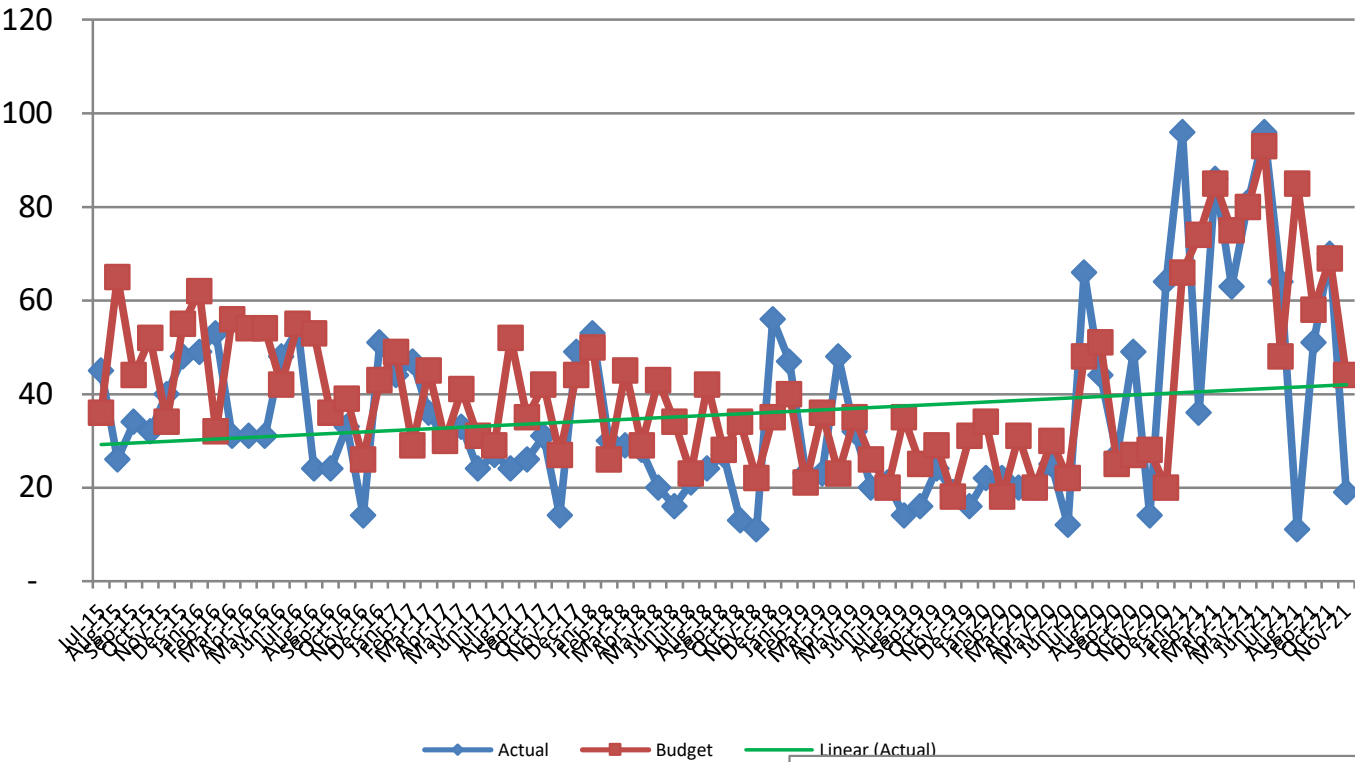
Cash & Investments



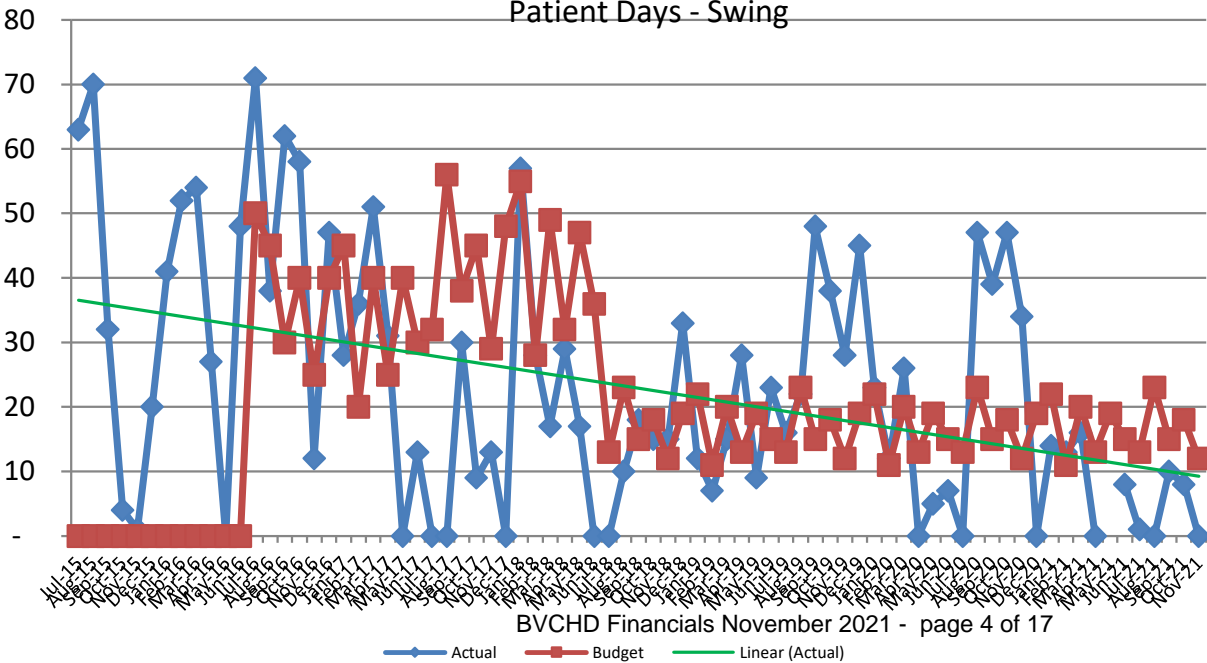
Surplus / (Loss)



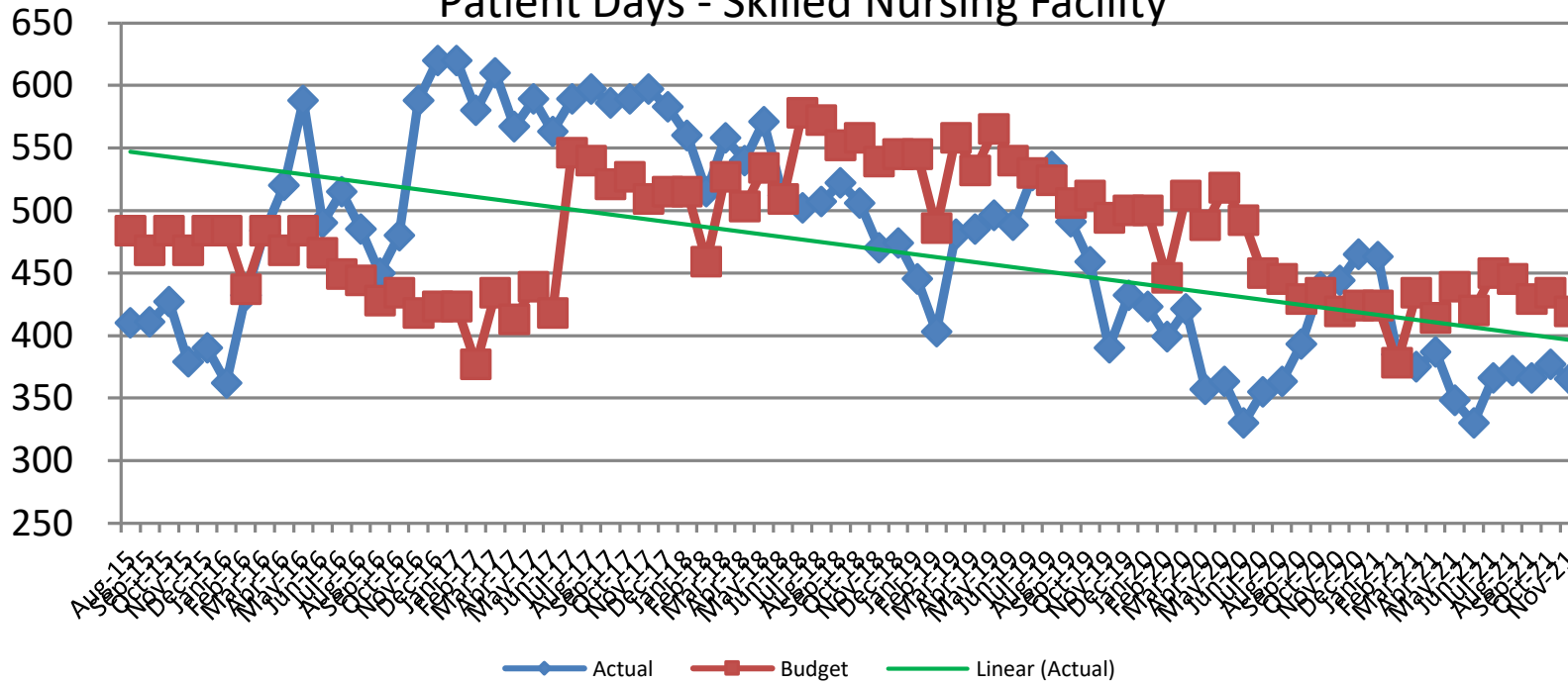
Patient Days - Acute



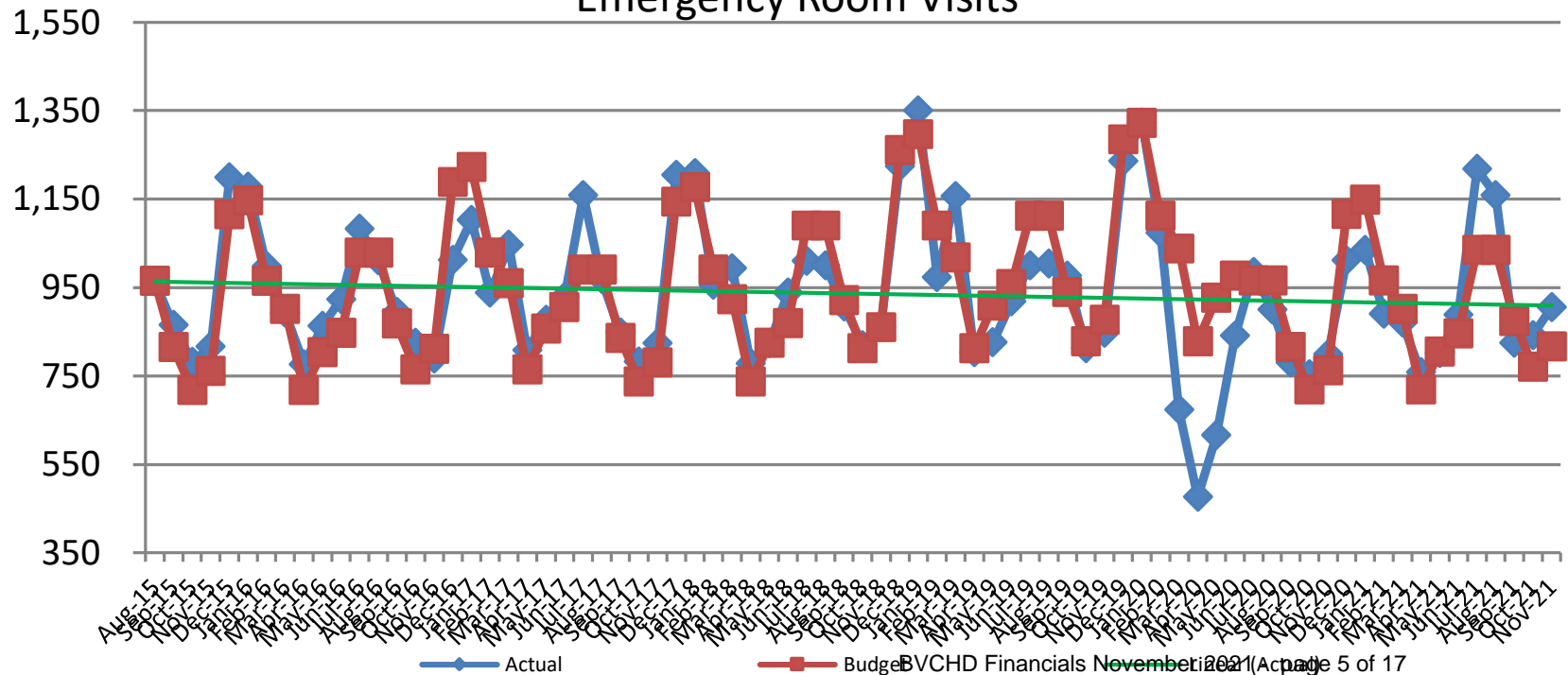
Patient Days - Swing



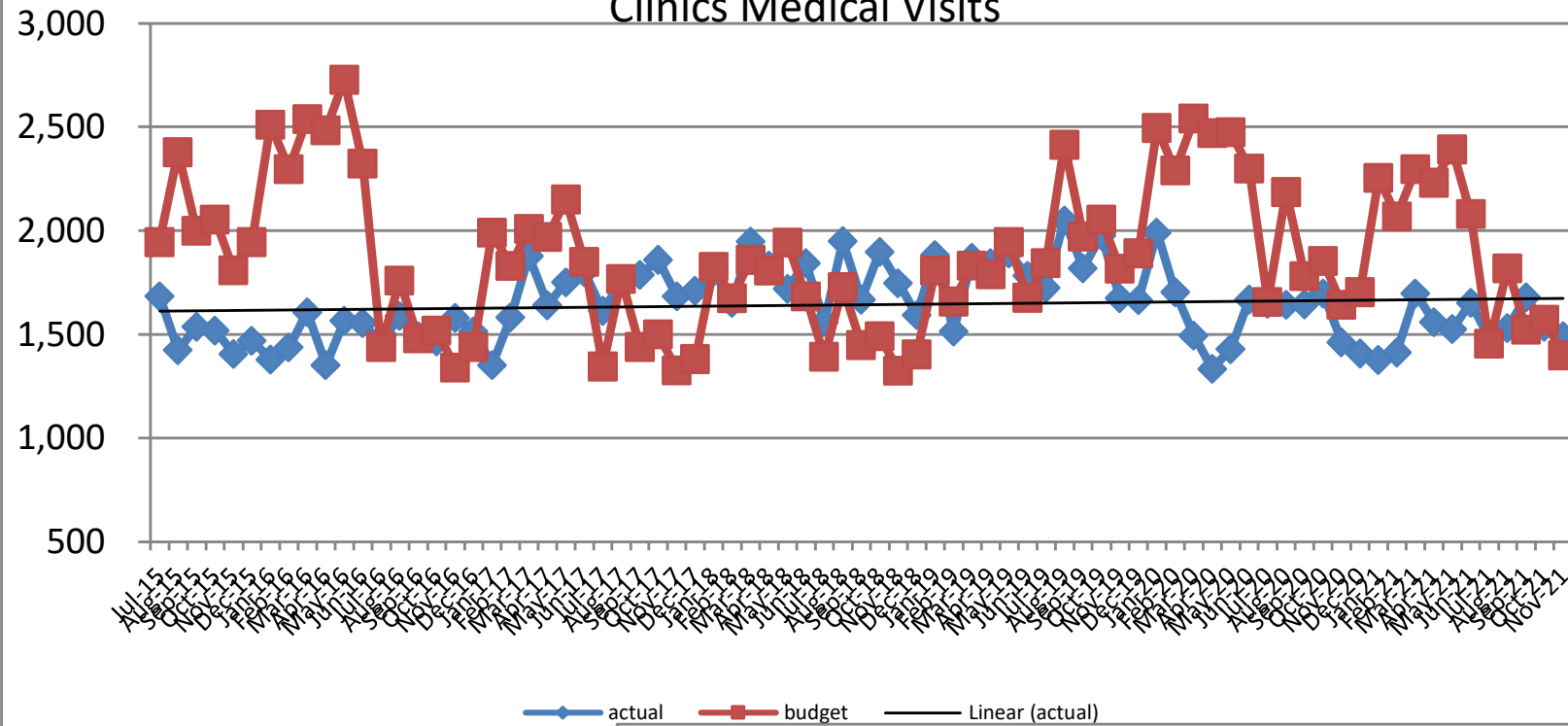
Patient Days - Skilled Nursing Facility



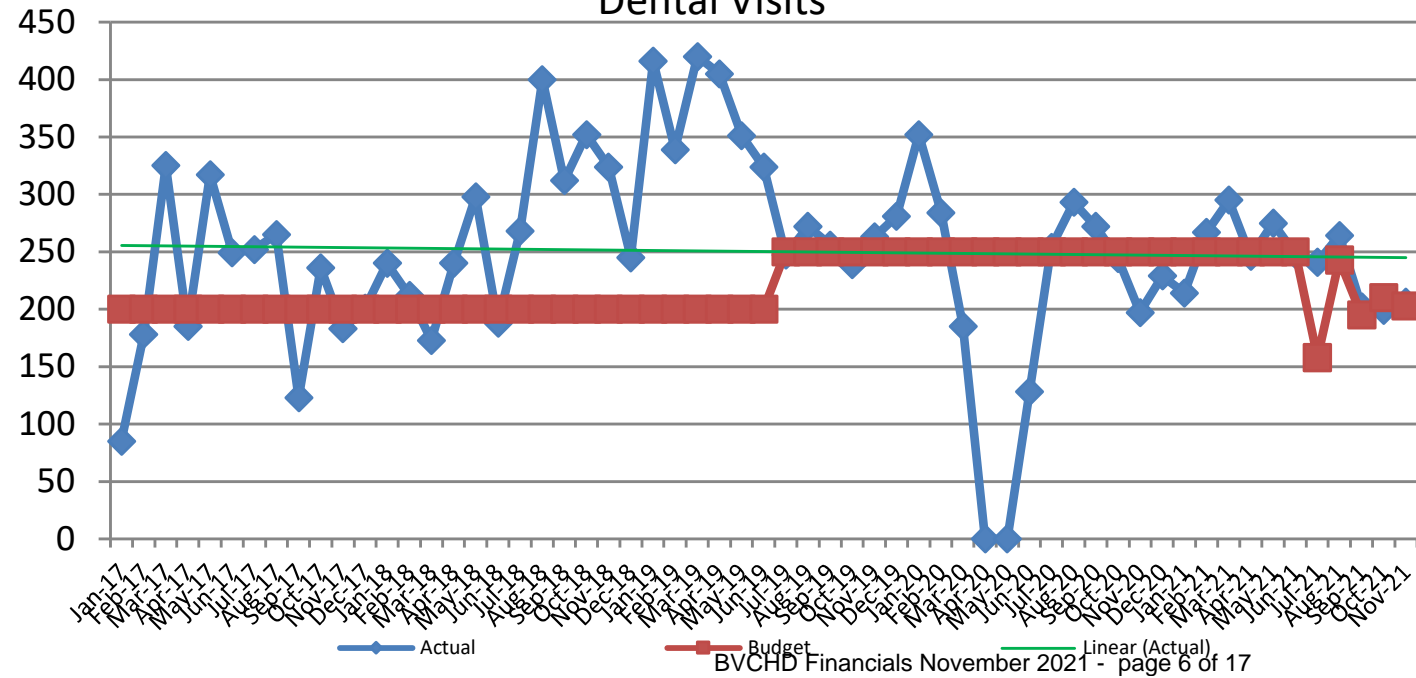
Emergency Room Visits



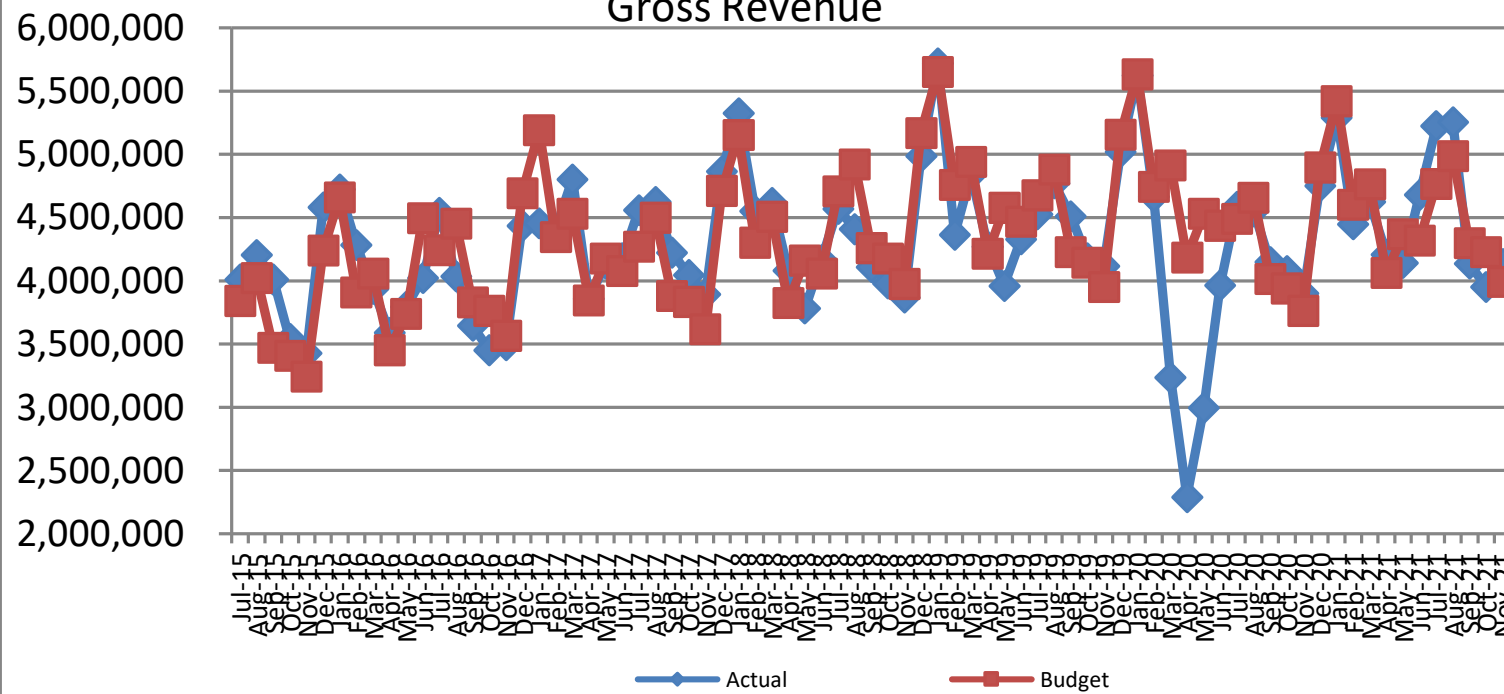
Clinics Medical Visits



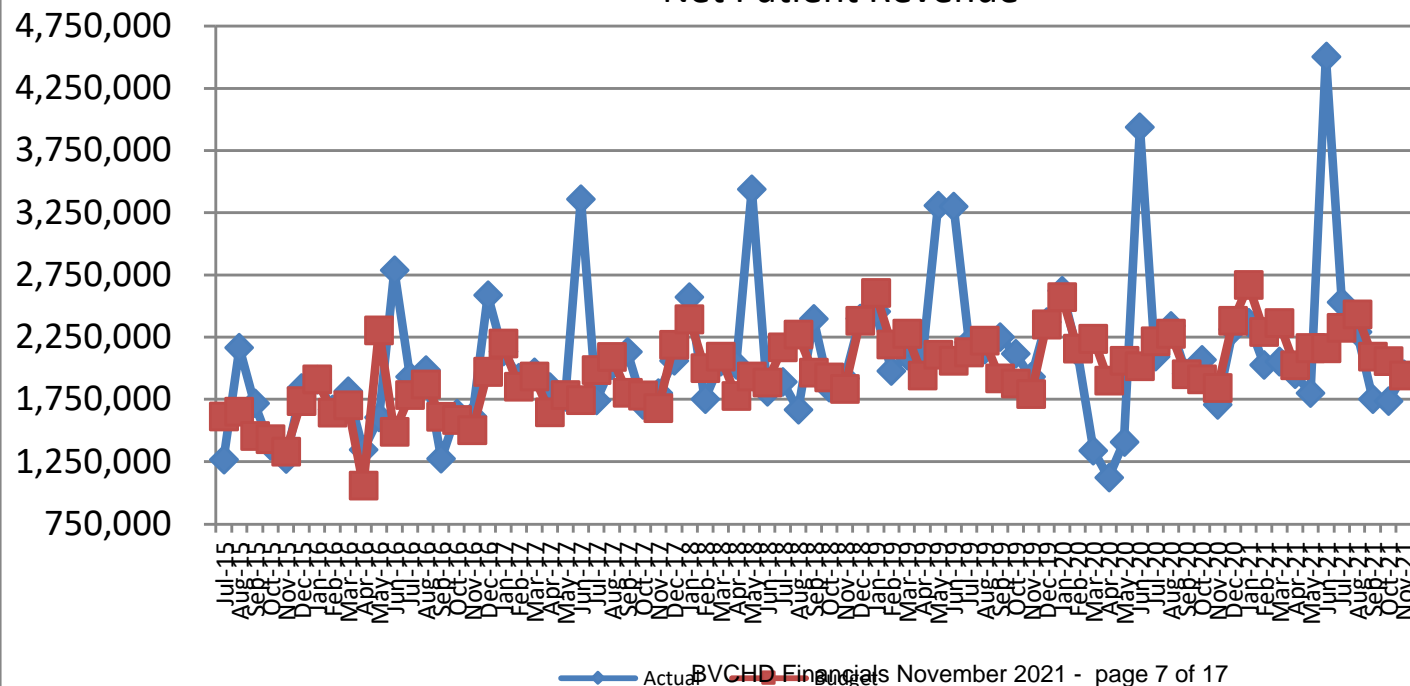
Dental Visits



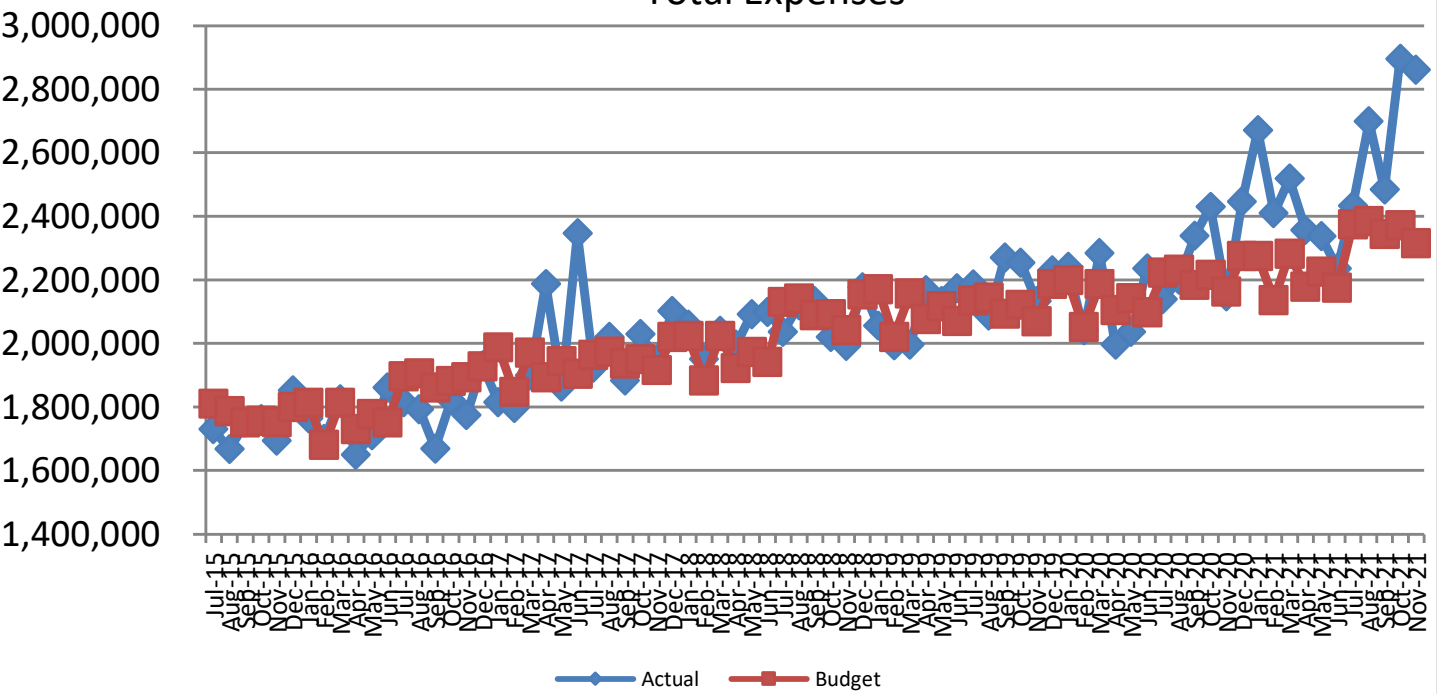
Gross Revenue



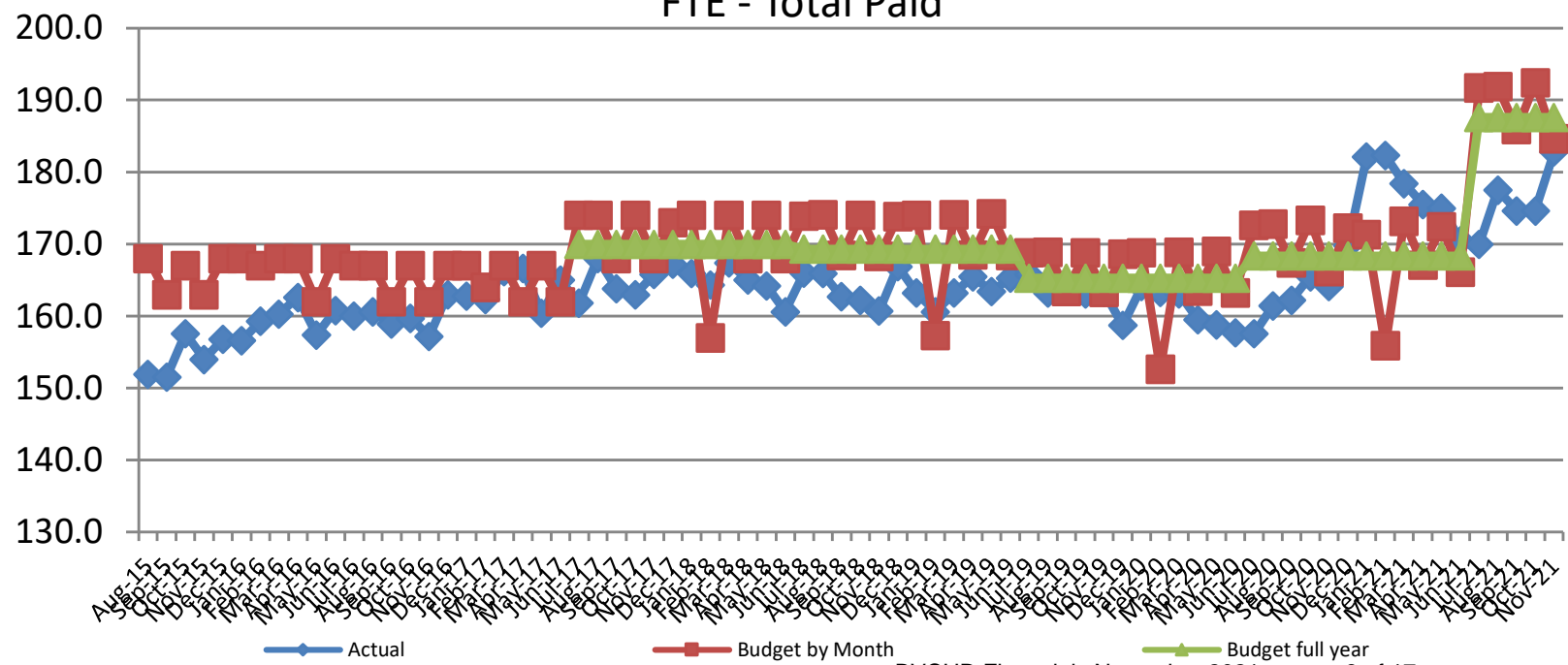
Net Patient Revenue



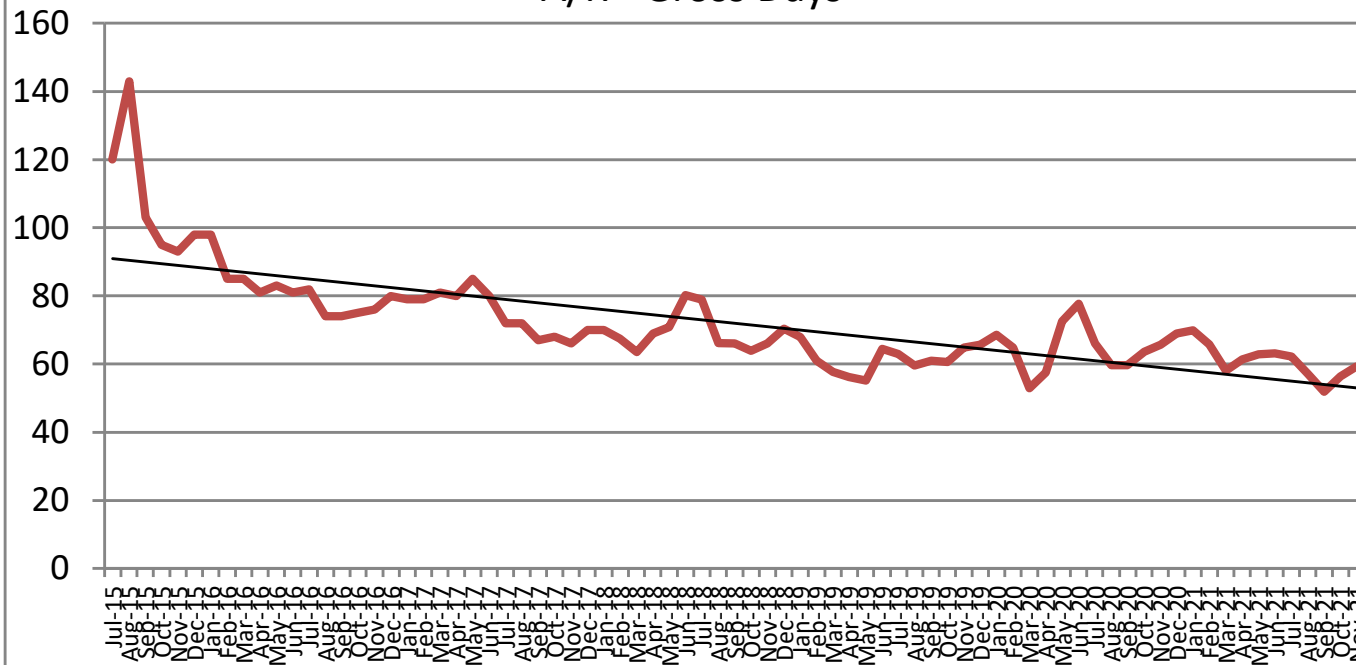
Total Expenses



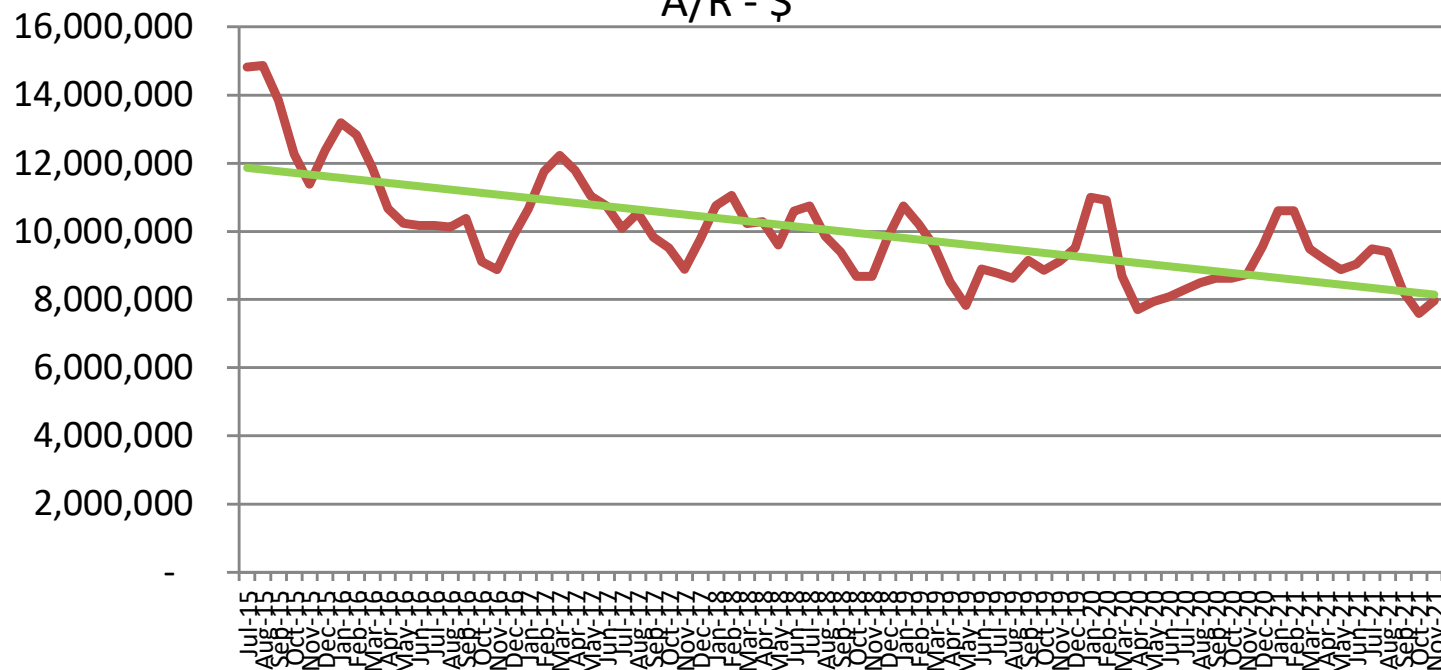
FTE - Total Paid



A/R - Gross Days



A/R - \$





November 2021 Financial Results

For the month . . .

Total Patient Revenue for November 2021 was \$4,131,650. This was 3.5% or \$138,867 higher than budget. Inpatient revenue was 56.2% less than budget for the month. Outpatient revenue was 13.8% lower than budget. Clinic revenue was 2.0% more than budget. ER revenue was 11.3% higher than budget. Skilled Nursing Facility revenue was 9.0% more than budget.

Total Revenue deductions of \$2,180,924 were more than budget by 6.3% for the month.

Total Operating Revenue was 0.5% higher than our budgeted amount for the month.

Total Expenses of \$2,861,187 were 23.6% more than budget. We continue to see expenses for nursing for Registry / Travelers. Supplies expenses continue over budget. Purchased Services were more than budget with contract staffing for SNF, Lab, Radiology, PT, and Security. Insurance expense continues over budget in Property and D & O insurance.

Our Operating Cash and Investments total \$36,526,347 as of the end of month. Total days cash on hand as of the end of November 2021 were 433. The decrease in Cash / Days Cash on Hand are a result of purchase of Fawnskin property. Cash collections - \$1,616,814- were down from previous months.

Key Statistics

Acute patient days were 19 for the month, 57% under budget. We had no Swing Patient days for the month. Skilled Nursing Facility days of 365 were 13% under budget – our Average Daily Census was 12.17. ER Visits of 905 were 10.8% higher than budget. Clinics Medical visits were 6.6% more than budget. Dental visits were 206 for month.

FTE (Full Time Equivalents) for the month were 182.8. We did utilize Registry / Traveler / Contract staff which are not in FTE count.

Year-to-Date (through our first 3 months)

Total Patient Revenue – 1.9% more than budget

Total Revenue Deductions – 8.9% more than budget

Total Operating Revenue – 8.5% under budget

Total Expenses – 13.4% more than budget

Bear Valley Community Healthcare District
Financial Statements November 30, 2021

Financial Highlights—Hospital
STATEMENT OF OPERATIONS

	A	B	C	D	E	F	G	H	I	J
	Current Month					Year-to-Date				
	FY 20/21	FY 21/22		VARIANCE		FY 20/21	FY 21/22		VARIANCE	
	Actual	Actual	Budget	Amount	%	Actual	Actual	Budget	Amount	%
1 Total patient revenue	3,902,835	4,131,650	3,992,763	138,887	3.5%	21,267,047	22,698,535	22,275,494	423,041	1.9%
2 Total revenue deductions	2,195,625	2,180,924	2,051,795	129,129	6.3%	11,103,681	12,439,241	11,425,989	1,013,252	8.9%
3 % Deductions	56%	53%	51%			52%	55%	51%		
4 Net Patient Revenue	1,707,209	1,950,726	1,940,968	9,758	0.5%	10,163,366	10,259,293	10,849,505	(590,212)	-5.4%
5 % Net to Gross	44%	47%	49%			48%	45%	49%		
6 Other Revenue	74,691	87,920	114,573	(26,653)	-23.3%	289,714	189,528	573,780	(384,252)	-67.0%
7 Total Operating Revenue	1,781,900	2,038,646	2,055,541	(16,895)	-0.8%	10,453,080	10,448,821	11,423,285	(974,464)	-8.5%
8 Total Expenses	2,147,984	2,861,186	2,314,245	546,941	23.6%	11,255,620	13,371,431	11,788,721	1,582,710	13.4%
9 % Expenses	55%	69%	58%			53%	59%	53%		
10 Surplus (Loss) from Operations	(366,084)	(822,540)	(258,704)	(563,836)	-217.9%	(802,541)	(2,922,610)	(365,436)	(2,557,174)	-699.8%
11 % Operating margin	-9%	-20%	-6%			-4%	-13%	-2%		
12 Total Non-operating	197,698	197,701	210,254	(12,553)	-6.0%	1,081,203	1,027,861	1,089,270	(61,409)	-5.6%
13 Surplus/(Loss)	(168,386)	(624,839)	(48,450)	(576,389)	-1189.7%	278,662	(1,894,749)	723,834	(2,618,583)	361.8%
14 % Total margin	-4%	-15%	-1%			1%	-8%	3%		

BALANCE SHEET

	A	B	C	D	E
	November	November	October	VARIANCE	
	FY 20/21	FY 21/22	FY 21/22	Amount	%
15 Gross Accounts Receivables	8,738,738	7,969,758	8,161,306	(191,548)	-2.3%
16 Net Accounts Receivables	2,770,426	2,312,866	2,266,353	46,513	2.1%
17 % Net AR to Gross AR	32%	29%	28%		
18 Days Gross AR	65.6	59.3	56.3	3.0	5.3%
19 Cash Collections	1,580,054	1,657,029	1,780,002	(122,973)	-6.9%
20 Settlements/IGT Transactions	719,332	110,780	67,315	43,465	64.6%
21 Stimulus Receipts	6,527	524,616	-	524,616	#DIV/0!
22 Investments	34,014,745	34,909,533	36,159,533	(1,250,000)	-3.5%
23 Cash on hand	2,351,238	1,616,814	2,218,655	(601,841)	-27.1%
24 Total Cash & Invest	36,365,983	36,526,347	38,378,188	(1,851,841)	-4.8%
Days Cash & Invest	515	433	465	(33)	-7.0%
Total Cash and Investments	36,365,983	36,526,347			
Increase Current Year vs. Prior Year		160,364			

*October corrected for LAIF transfer 2M

Bear Valley Community Healthcare District
Financial Statements November 30, 2021

Statement of Operations

	A	B	C	D	E	F	G	H	I	J
	Current Month					Year-to-Date				
	FY 20/21	FY 21/22		VARIANCE		FY 20/21	FY 21/22		VARIANCE	
	Actual	Actual	Budget	Amount	%	Actual	Actual	Budget	Amount	%
Gross Patient Revenue										
1 Inpatient	102,379	60,476	138,011	(77,535)	-56.2%	976,416	629,892	906,081	(276,189)	-30.5%
2 Outpatient	624,126	646,865	750,061	(103,196)	-13.8%	3,688,436	3,928,767	4,107,929	(179,162)	-4.4%
3 Clinic Revenue	289,299	295,014	289,228	5,786	2.0%	1,616,222	1,526,606	1,575,768	(49,162)	-3.1%
4 Emergency Room	2,688,725	2,926,079	2,629,109	296,970	11.3%	14,097,580	15,621,474	14,735,313	886,161	6.0%
5 Skilled Nursing Facility	198,304	203,217	186,354	16,863	9.0%	888,394	991,795	950,403	41,392	4.4%
6 Total patient revenue	3,902,835	4,131,650	3,992,763	138,887	3.5%	21,267,047	22,698,535	22,275,494	423,041	1.9%
Revenue Deductions										
7 Contractual Allow	1,796,607	2,068,222	1,807,741	260,481	14.4%	10,302,944	11,627,212	10,064,424	1,562,788	15.5%
8 Contractual Allow PY	(150,000)	(239,980)	-	(239,980)	#DIV/0!	(1,033,402)	(718,294)	-	(718,294)	#DIV/0!
9 Charity Care	12,356	26,998	17,143	9,855	57.5%	105,680	83,838	95,637	(11,799)	-12.3%
10 Administrative	1,439	22,039	4,473	17,566	392.7%	13,796	102,968	24,955	78,013	312.6%
11 Policy Discount	11,637	14,924	13,767	1,157	8.4%	68,548	96,769	76,807	19,962	26.0%
12 Employee Discount	8,195	27,122	8,314	18,808	226.2%	29,861	75,232	46,382	28,850	62.2%
13 Bad Debts	389,713	178,698	200,357	(21,659)	-10.8%	1,197,761	753,312	1,117,784	(364,472)	-32.6%
14 Denials	109,385	82,900	-	82,900	#DIV/0!	418,494	418,205	-	418,205	#DIV/0!
15 Total revenue deductions	2,195,625	2,180,924	2,051,795	129,129	6.3%	11,103,681	12,439,241	11,425,989	1,013,252	8.9%
16 Net Patient Revenue	1,707,209	1,950,726	1,940,968	9,758	0.5%	10,163,366	10,259,293	10,849,505	(590,212)	-5.4%
gross revenue including Prior Year Contractual Allowances as a percent to gross revenue WO PY and Other CA	40.2%	40.2%		40.2%		40.2%	447.4%	447.4%	0.0%	
	39.2%	39.2%		39.2%		39.2%	437.2%	437.2%	0.0%	
17 Other Revenue	74,691	87,920	114,573	(26,653)	-23.3%	289,714	189,528	573,780	(384,252)	-67.0%
18 Total Operating Revenue	1,781,900	2,038,646	2,055,541	(16,895)	-0.8%	10,453,080	10,448,821	11,423,285	(974,464)	-8.5%
Expenses										
19 Salaries	975,875	1,180,530	986,715	193,815	19.6%	4,882,739	5,557,128	5,060,188	496,940	9.8%
20 Employee Benefits	283,861	324,130	372,291	(48,161)	-12.9%	1,584,198	1,643,159	1,918,741	(275,582)	-14.4%
21 Registry	5,425	274,156	-	274,156	#DIV/0!	99,177	759,221	-	759,221	#DIV/0!
22 Salaries and Benefits	1,265,160	1,778,816	1,359,006	419,810	30.9%	6,566,114	7,959,508	6,978,929	980,579	14.1%
23 Professional fees	157,606	165,629	164,079	1,550	0.9%	809,820	802,720	828,648	(25,928)	-3.1%
24 Supplies	128,781	206,287	132,315	73,972	55.9%	738,654	971,081	726,172	244,909	33.7%
25 Utilities	32,071	44,915	36,512	8,403	23.0%	168,711	209,620	181,996	27,624	15.2%
26 Repairs and Maintenance	44,387	40,075	53,136	(13,061)	-24.6%	259,218	219,075	266,562	(47,487)	-17.8%
27 Purchased Services	310,335	361,055	321,167	39,888	12.4%	1,707,650	1,907,064	1,552,141	354,923	22.9%
28 Insurance	37,712	71,283	43,103	28,180	65.4%	185,220	404,349	217,251	187,098	86.1%
29 Depreciation	91,295	91,901	96,622	(4,721)	-4.9%	456,475	459,503	487,935	(28,432)	-5.8%
30 Rental and Leases	16,455	25,116	27,103	(1,987)	-7.3%	85,413	117,856	135,515	(17,659)	-13.0%
32 Dues and Subscriptions	3,874	7,840	6,599	1,241	18.8%	31,683	34,997	32,995	2,002	6.1%
33 Other Expense	60,309	68,269	74,603	(6,334)	-8.5%	246,664	285,657	380,577	(94,920)	-24.9%
34 Total Expenses	2,147,984	2,861,186	2,314,245	546,941	23.6%	11,255,620	13,371,431	11,788,721	1,582,710	13.4%
35 Surplus (Loss) from Operations	(366,084)	(822,540)	(258,704)	(563,836)	-217.9%	(802,541)	(2,922,610)	(365,436)	(2,557,174)	-699.8%
Non-Operating Income										
36 Tax Revenue	204,167	204,163	204,167	(4)	0.0%	1,020,835	1,020,823	1,020,835	(12)	0.0%
37 Other non-operating	20	220	13,320	(13,100)	-98.3%	20,732	18,199	66,600	(48,401)	-72.7%
Interest Income	1,156	320	100	220	219.8%	76,600	25,623	38,500	(12,877)	-33.4%
Interest Expense	(7,645)	(7,002)	(7,333)	331	-4.5%	(36,964)	(36,784)	(36,665)	(119)	0.3%
IGT Expense	-	-	-	-	#DIV/0!	-	-	-	-	#DIV/0!
39 Total Non-operating	197,698	197,701	210,254	(12,553)	-6.0%	1,081,203	1,027,861	1,089,270	(61,409)	-5.6%
40 Surplus/(Loss)	(168,386)	(624,839)	(48,450)	(576,389)	-1189.7%	278,662	(1,894,749)	723,834	(2,618,583)	361.8%

**Bear Valley Community Healthcare District
Financial Statements**

Current Year Trending Statement of Operations

A Statement of Operations—CURRENT YEAR 2022

		1	2	3	4	5	6	7	8	9	10	11	12	
		July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	YTD
Gross Patient Revenue														
1	Inpatient	205,183	68,218	158,880	137,136	60,476								629,892
2	Outpatient	711,151	1,107,243	748,528	714,979	646,865								3,928,767
3	Clinic	286,746	319,875	317,058	307,913	295,014								1,526,606
4	Emergency Room	3,855,619	3,551,235	2,705,755	2,582,787	2,926,079								15,621,474
5	Skilled Nursing Facility	162,677	208,828	205,420	211,653	203,217								991,795
6	Total patient revenue	5,221,376	5,255,400	4,135,641	3,954,468	4,131,650	-	-	-	-	-	-	-	22,698,535
Revenue Deductions		C/A	0.50	0.50	0.51	0.55	0.50	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0.51
7	Contractual Allow	2,633,241	2,641,433	2,123,304	2,161,012	2,068,222								11,627,212
8	Contractual Allow PY	-	(166,414)	(150,000)	(161,900)	(239,980)								(718,294)
9	Charity Care	13,835	10,821	29,173	3,011	26,998								83,838
10	Administrative	13,068	65,243	2,149	470	22,039								102,968
11	Policy Discount	11,886	25,978	22,294	21,686	14,924								96,769
12	Employee Discount	3,477	8,688	21,685	14,258	27,122								75,232
13	Bad Debts	(20,228)	286,419	213,959	94,463	178,698								753,312
14	Denials	36,893	90,512	122,409	85,491	82,900								418,205
15	Total revenue deductions	2,692,172	2,962,680	2,384,974	2,218,491	2,180,924	-	-	-	-	-	-	-	12,439,241
16	Net Patient Revenue	2,529,203	2,292,719	1,750,667	1,735,978	1,950,726	-	-	-	-	-	-	-	10,259,293
	net / tot pat rev	48.4%	43.6%	42.3%	43.9%	47.2%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	45.2%
17	Other Revenue	7,903	12,423	12,179	69,102	87,920								189,528
18	Total Operating Revenue	2,537,106	2,305,142	1,762,847	1,805,080	2,038,646	-	-	-	-	-	-	-	10,448,821
Expenses														
19	Salaries	1,031,745	1,186,235	1,128,310	1,030,308	1,180,530								5,557,128
20	Employee Benefits	328,024	322,710	327,131	341,164	324,130								1,643,159
21	Registry	18,220	19,970	20,190	426,685	274,156								759,221
22	Salaries and Benefits	1,377,989	1,528,915	1,475,631	1,798,157	1,778,816	-	-	-	-	-	-	-	7,959,508
23	Professional fees	158,025	158,753	160,727	159,587	165,629								802,720
24	Supplies	161,829	250,136	164,872	187,956	206,287								971,081
25	Utilities	41,897	42,700	40,028	40,081	44,915								209,620
26	Repairs and Maintenance	45,118	36,613	40,799	56,470	40,075								219,075
27	Purchased Services	390,217	395,513	354,590	405,689	361,055								1,907,064
28	Insurance	94,188	90,303	77,166	71,409	71,283								404,349
29	Depreciation	91,901	91,901	91,901	91,901	91,901								459,503
30	Rental and Leases	17,852	32,492	20,979	21,417	25,116								117,856
32	Dues and Subscriptions	8,330	6,022	6,214	6,592	7,840								34,997
33	Other Expense.	45,482	64,915	51,030	55,961	68,269								285,657
34	Total Expenses	2,432,828	2,698,263	2,483,936	2,895,219	2,861,186	-	-	-	-	-	-	-	13,371,431
35	Surplus (Loss) from Operations	104,279	(393,120)	(721,089)	(1,090,139)	(822,540)	-	-	-	-	-	-	-	(2,922,610)
36	Non-Operating Income													
37	Tax Revenue	204,167	204,167	204,163	204,163	204,163								1,020,823
38	Other non-operating	20	120	17,719	120	220								18,199
	Interest Income	623	403	24,114	163	320								25,623
	Interest Expense	(7,507)	(7,594)	(7,504)	(7,177)	(7,002)								(36,784)
	IGT Expense													-
39	Total Non-operating	197,304	197,095	238,492	197,269	197,701	-	-	-	-	-	-	-	1,027,861
40	Surplus/(Loss)	301,582	(196,025)	(482,597)	(892,871)	(624,839)	-	-	-	-	-	-	-	(1,894,749)

2021-2022 Actual BS

BALANCE SHEET

						PY
	July	Aug	Sept	Oct	Nov	June
ASSETS:						
Current Assets						
Cash and Cash Equivalents (Includes CD's)	1,511,284	1,403,907	1,085,094	2,218,655	1,616,814	1,376,886
Gross Patient Accounts Receivable	9,485,223	9,407,701	8,231,530	7,586,726	7,968,263	9,034,356
Less: Reserves for Allowances & Bad Debt	6,448,695	6,374,389	5,757,999	5,320,373	5,655,397	6,223,775
Net Patient Accounts Receivable	3,036,527	3,033,312	2,473,531	2,266,353	2,312,866	2,810,581
Tax Revenue Receivable	2,450,000	2,450,000	2,450,000	2,450,000	1,948,524	32,320
Other Receivables	-3,899	4,389	-33,265	295,202	481,488	-1,475,460
Inventories	278,346	277,571	273,934	274,099	282,701	277,827
Prepaid Expenses	780,163	813,857	766,194	727,526	665,682	582,099
Due From Third Party Payers	0	0				
Due From Affiliates/Related Organizations	0	0				
Other Current Assets	0	0				
Total Current Assets	8,052,421	7,983,036	7,015,487	8,231,835	7,308,075	3,604,253
Assets Whose Use is Limited						
Investments	39,135,702	39,135,702	39,159,533	36,159,533	34,909,533	39,135,702
Other Limited Use Assets	144,375	144,375	144,375	144,375	144,375	144,375
Total Limited Use Assets	39,280,077	39,280,077	39,303,908	36,303,908	35,053,908	39,280,077
Property, Plant, and Equipment						
Land and Land Improvements	3,061,292	3,061,292	3,061,292	3,061,292	3,071,192	3,061,292
Building and Building Improvements	10,194,722	10,194,722	10,194,722	10,194,722	10,533,054	10,194,722
Equipment	13,874,411	14,013,046	14,058,598	14,100,865	14,100,865	13,850,497
Construction In Progress	376,228	627,178	627,878	1,191,715	2,798,223	374,181
Capitalized Interest						
Gross Property, Plant, and Equipment	27,506,653	27,896,238	27,942,490	28,548,594	30,503,334	27,480,692
Less: Accumulated Depreciation	16,894,511	16,986,412	17,078,313	17,170,213	17,262,114	16,802,765
Net Property, Plant, and Equipment	10,612,142	10,909,826	10,864,178	11,378,381	13,241,220	10,677,927
TOTAL UNRESTRICTED ASSETS	57,944,639	58,172,939	57,183,572	55,914,124	55,603,204	53,562,257
Restricted Assets	0	0	0	0	0	0
TOTAL ASSETS	57,944,639	58,172,939	57,183,572	55,914,124	55,603,204	53,562,257

2021-2022 Actual BS

BALANCE SHEET

	PY					
	July	Aug	Sept	Oct	Nov	June
LIABILITIES:						
Current Liabilities						
Accounts Payable	984,394	1,139,575	716,325	1,180,820	1,162,266	1,062,491
Notes and Loans Payable						
Accrued Payroll	968,095	1,101,911	1,218,912	669,378	803,595	834,286
Patient Refunds Payable						
Due to Third Party Payers (Settlements)	7,071,004	7,403,095	7,443,361	7,348,776	7,744,192	7,007,330
Advances From Third Party Payers						
Current Portion of Def Rev - Txs,	2,245,833	2,041,666	1,837,503	1,633,340	1,429,177	0
Current Portion - LT Debt	40,000	40,000	40,000	40,000	40,000	40,000
Current Portion of AB915						
Other Current Liabilities (Accrued Interest & Accrued Other)	58,993	66,396	29,772	36,983	43,984	51,495
Total Current Liabilities	11,368,319	11,792,644	11,285,874	10,909,296	11,223,215	8,995,602
Long Term Debt						
USDA Loan	2,775,000	2,775,000	2,775,000	2,775,000	2,775,000	2,775,000
Leases Payable	0	0	0	0	0	0
Less: Current Portion Of Long Term Debt	0	0	0	0	0	0
Total Long Term Debt (Net of Current)	2,775,000	2,775,000	2,775,000	2,775,000	2,775,000	2,775,000
Other Long Term Liabilities						
Deferred Revenue	0	0	0	0	0	0
Other	0	0	0	0	0	0
Total Other Long Term Liabilities	0	0	0	0	0	0
TOTAL LIABILITIES	14,143,319	14,567,644	14,060,874	13,684,296	13,998,215	11,770,602
Fund Balance						
Unrestricted Fund Balance	43,499,738	43,499,738	43,499,738	43,499,738	43,499,738	39,042,608
Temporarily Restricted Fund Balance	0	0				
Equity Transfer from FRHG	0	0				
Net Revenue/(Expenses)	301,582	105,557	-377,040	-1,269,910	-1,894,749	2,749,048
TOTAL FUND BALANCE	43,801,320	43,605,295	43,122,699	42,229,828	41,604,989	41,791,655
TOTAL LIABILITIES & FUND BALANCE	57,944,640	58,172,939	57,183,572	55,914,124	55,603,204	53,562,257

Units of Service													
For the period ending November 30, 2021													
30						153							
Current Month						Bear Valley Community Hospital			Year-To-Date				
Nov-21		Nov-20		Actual -Budget		Act.-Act. Var %	Nov-21		Nov-20		Actual -Budget		Act.-Act. Var %
Actual	Budget	Actual	Variance	Var %	Actual		Budget	Actual	Variance	Var %			
19	44	14	(25)	-56.8%	35.7%	Med Surg Patient Days	215	304	200	(89)	-29.3%	7.5%	
-	12	34	(12)	0.0%	-100.0%	Swing Patient Days	19	81	167	(62)	-76.5%	-88.6%	
365	419	444	(54)	-12.9%	-17.8%	SNF Patient Days	1,846	2,177	1,994	(331)	-15.2%	-7.4%	
384	475	492	(91)	-19.2%	-22.0%	Total Patient Days	2,080	2,562	2,361	(482)	-18.8%	-11.9%	
-	13	3	(13)	-100.0%	-100.0%	Acute Admissions	42	65	53	(23)	-35.4%	-20.8%	
6	13	4	(7)	-53.8%	50.0%	Acute Discharges	52	65	52	(13)	-20.0%	0.0%	
3.2	3.4	3.5	3.6	105.5%	-9.5%	Acute Average Length of Stay	4.1	4.7	3.8	6.8	146.4%	7.5%	
0.6	1.5	0.47	(0.83)	-56.8%	35.7%	Acute Average Daily Census	1.4	2	1.3	(0.6)	-29.3%	7.5%	
12.2	14.4	15.9	(2.2)	-15.3%	-23.6%	SNF/Swing Avg Daily Census	12.2	15	14.1	(2.6)	-17.4%	-13.7%	
12.8	15.8	16.4	(3.0)	-19.2%	-22.0%	Total Avg. Daily Census	13.6	17	15.4	(3.2)	-18.8%	-11.9%	
28%	35%	36%	-7%	-19.2%	-22.0%	% Occupancy	30%	37%	34%	-7%	-18.8%	-11.9%	
4	10	2	(6)	-60.0%	100.0%	Emergency Room Admitted	19	50	26	(31)	-62.0%	-26.9%	
901	808	4,191	93	11.5%	-78.5%	Emergency Room Discharged	4,930	4,483	4,191	447	10.0%	17.6%	
905	817	4,193	88	10.8%	-78.4%	Emergency Room Total	4,949	4,532	4,217	417	9.2%	17.4%	
30	27	140	3	10.8%	-78.4%	ER visits per calendar day	32	30	28	3	9.2%	17.4%	
#DIV/0!	77%	67%	217%	281.7%	#DIV/0!	% Admits from ER	45%	77%	49%	74%	96.5%	-7.8%	
-	-	-	-	0.0%	#DIV/0!	Surgical Procedures I/P	-	-	1	-	#DIV/0!	-100.0%	
-	15	5	(15)	-100.0%	-100.0%	Surgical Procedures O/P	5	90	30	(85)	-94.4%	-83.3%	
-	15	5	(15)	-100.0%	-100.0%	TOTAL Procedures	5	90	31	(85)	-94.4%	-83.9%	
557	822	366	(265)	-32.2%	52.2%	Surgical Minutes Total	2,427	4,191	3,267	(1,764)	-42.1%	-25.7%	

Units of Service
For the period ending November 30, 2021

Current Month						Bear Valley Community Hospital						Year-To-Date			
Nov-21		Nov-20		Actual -Budget		Act.-Act.		Nov-21		Nov-20		Actual -Budget		Act.-Act.	
Actual	Budget	Actual	Variance	Var %	Var %			Actual	Budget	Actual	Variance	Var %	Var %		
5,956	5,400	5,616	556	10.3%	6.1%	Lab Procedures		31,773	30,450	29,578	1,323	4.3%	7.4%		
632	675	652	(43)	-6.4%	-3.1%	X-Ray Procedures		3,461	3,544	3,457	(83)	-2.3%	0.1%		
329	267	287	62	23.2%	14.6%	C.T. Scan Procedures		1,762	1,550	1,638	212	13.7%	7.6%		
165	169	155	(4)	-2.4%	6.5%	Ultrasound Procedures		878	919	970	(41)	-4.5%	-9.5%		
48	39	57	9	23.1%	-15.8%	Mammography Procedures		237	205	221	32	15.6%	7.2%		
289	249	254	40	16.1%	13.8%	EKG Procedures		1,492	1,399	1,277	93	6.6%	16.8%		
113	71	79	42	59.2%	43.0%	Respiratory Procedures		600	409	325	191	46.7%	84.6%		
1,501	1,598	1,212	(97)	-6.1%	23.8%	Physical Therapy Procedures		9,894	7,242	7,195	2,652	36.6%	37.5%		
1,492	1,400	1,463	92	6.6%	2.0%	Primary Care Clinic Visits		7,724	7,771	8,096	(47)	-0.6%	-4.6%		
206	203	197	3	1.5%	4.6%	Specialty Clinic Visits		1,112	1,009	1,260	103	10.2%	-11.7%		
1,698	1,603	1,660	95	5.9%	2.3%	Clinic		8,836	8,780	9,356	56	0.6%	-5.6%		
65	62	64	4	5.9%	2.3%	Clinic visits per work day		49	48	51	0	0.6%	-5.6%		
17.0%	19.00%	14.00%	-2.00%	-10.53%	21.43%	% Medicare Revenue		15.42%	19.00%	16.28%	-3.58%	-18.84%	-5.28%		
37.40%	37.00%	35.70%	0.40%	1.08%	4.76%	% Medi-Cal Revenue		36.54%	37.00%	35.68%	-0.46%	-1.24%	2.41%		
41.90%	39.00%	42.30%	2.90%	7.44%	-0.95%	% Insurance Revenue		43.26%	39.00%	42.22%	4.26%	10.92%	2.46%		
3.70%	5.00%	8.00%	-1.30%	-26.00%	-53.75%	% Self-Pay Revenue		4.78%	5.00%	5.82%	-0.22%	-4.40%	-17.87%		
160.1	166.0	148.3	(5.9)	-3.5%	8.0%	Productive FTE's		155.22	170.1	143.4	(14.9)	-8.8%	8.2%		
182.8	184.6	164.1	(1.8)	-1.0%	11.3%	Total FTE's		184.74	189.3	162.2	(4.6)	-2.4%	13.9%		



CFO REPORT for

January 2022 Finance Committee and Board

CARES Act funding

We have reported to the Provider Relief Portal through June 2021. The information we reported on was lost revenue by quarter, additional payroll expenses, and other expenses. It appears that we qualify for forgiveness (no return of funds). We have already received funds (reserved on Balance Sheet).

We have received notice of \$641,505.03 Phase 4 Provider Relief Funds.



Much has been accomplished. The following is a list of expenditures and needed items –

Big Bear Urgent Care, Inc

Security Cameras	8,812.93	
Cabling	4,950.00	
computers and server and wap and scanner	8,000.00	est
firewall	900.00	approx
voip phones		we own
paintng	11,000.00	
flooring	20,000.00	
cabinets	34,000.00	prioritize needed - lab, ee sink, lab bathroom
signage	4,000.00	
furniture	13,000.00	
all protection alarm		
	<hr/>	
	104,662.93	

records storage

iron mountain