



MISSION

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

VISION

To be the premier provider of emergency medical and healthcare services in our Big Bear Valley.

**NOTICE AND CALL OF A
SPECIAL MEETING OF THE
BOARD OF DIRECTORS**

Monday, July 19, 2021 @ 1:00 p.m.

Closed Session @ 1:00 p.m. – Hospital Conference Room

Open Session @ approximately 2:30 p.m. – Hospital Conference Room

41870 Garstin Drive, Big Bear Lake, CA. 92315

NOTICE IS HEREBY GIVEN that a Special Meeting of the Board of Directors for the Bear Valley Community Healthcare District will be held on Monday, July 19, 2021 @ 1:00 p.m. at the Bear Valley Community Healthcare District 41870 Garstin Drive, Big Bear Lake, CA. 92315. A copy of the agenda is attached hereto.

Dated: July 13, 2021



John Friel
CEO



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SPECIAL BOARD OF DIRECTORS BUSINESS MEETING AGENDA

WEDNESDAY, JULY 19, 2021 @ 1:00 PM

CLOSED SESSION 1:00 PM HOSPITAL CONFERENCE ROOM

OPEN SESSION @ APPROXIMATELY 2:30 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 2:30 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 7/19/21)

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

Holly Elmer, 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. June 09, 2021 Business Board Meeting Minutes: Shelly Egerer, Executive Assistant

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

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

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

E. Policies & Procedures (Summary Attached)

(1) Administration

(2) Emergency Department

(3) Environmental Services

(4) Human Resource

(5) Information Technology

(6) Laboratory

(7) Materials Management

(8) Nursing Administration

(9) Respiratory Therapy

(10) Risk Management

(11) Safety

F. Committee Meeting Minutes:

(1) June 01, 2021 Finance Committee Meeting Minutes

10. OLD BUSINESS*

- None

11. NEW BUSINESS*

- None

12. ACTION ITEMS*

A. Acceptance of QHR Health Report

Woody White, QHR Health

(1) July 2021 QHR Health Report

B. Acceptance of CNO Report

Kerri Jex, Chief Nursing Officer

(1) June 2021 CNO Report

C. Acceptance of the CEO Report

John Friel, Chief Executive Officer

(1) July 2021 CEO Report

D. Acceptance of the Finance Report & CFO Report

Garth Hamblin, Chief Financial Officer

(1) May 2021

(2) CFO Report

13. ADJOURNMENT*

*** Denotes Possible Action Items**

2. ROLL CALL:

Peter Boss, Mark Kaliher, Perri Melnick, Steven Baker and Jack Briner were present. Also present was John Friel, 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 June 09, 2021 agenda as presented. Motion by Board Member Melnick to adopt the June 09, 2021 agenda as presented. Second by Board Member Briner to adopt the June 09, 2021 agenda as presented. President Boss called for a vote. A vote in favor of the motion was 5/0.

- Board Member Melnick - yes
- Board Member Kaliher - yes
- President Boss - yes
- Board Member Baker - yes
- Board Member Briner - yes

5. RESULTS OF CLOSED SESSION:

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

- Chief of Staff Report:
 - Initial Appointment:
 - Sarah Sayre, NP- Emergency Medicine
 - James Puckett, MD- Emergency Medicine
 - Joseph Kallini, MD- Renaissance Radiology
 - Request for Reappointment:
 - Tzyy Chao, MD- Renaissance Radiology
 - Anik Patel, DO- Renaissance Radiology
 - Joshua Marshall, LCSW- FHC
 - Michelle Rossell, RDH- COH
- Voluntary Resignation:
 - Derek Stadie, MD- Emergency Medicine
- Risk Report/Compliance Report
- QI Report

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

- Board Member Melnick - yes
- Board Member Kaliher - yes
- President Boss - yes
- Board Member Baker - yes
- Board Member Briner - yes

6. PUBLIC FORUM FOR OPEN SESSION:

President Boss opened the Hearing Section for Public Comment on Open Session items at 2:30 p.m. Hearing no request to make public comment. President Boss closed Public Forum for Closed Session at 2:30 p.m.

7. DIRECTORS COMMENTS

- Board Member Baker stated that he would like to move the July board meeting date since President Boss will be out of town.
- Board Member Kaliher reported that the district will be losing a good nurse; Collen Weaver is leaving, the district is losing a fantastic med surge nurse.

8. INFORMATION REPORTS

A. Foundation Report:

- Ms. Elmer reported the following information:
 - Tree of Lights is the main fundraising event
 - Marsha Oskey will be Foundation President in July
 - Invitation to Board of Directors for BBQ

B. Auxiliary Report:

- Mr. Friel reported the following information:
 - Volunteering at the hospital
 - Very active at the vaccination clinic
 - Meet & greet patients and escort them
 - See's candy is for sale

9. CONSENT AGENDA:

- A.** May 12, 2021 Business Board Meeting Minutes: Shelly Egerer, Executive Assistant
- B.** May 2021 Human Resource Report: Erin Wilson; Human Resource Director
- C.** May 2021 Plant and Maintenance Report: Michael Mursick, Plant & Maint. Manager
- D.** May 2021 Infection Control Report: Heather Loose, Infection Preventionist
- E.** Policies & Procedures:
 - (1) Acute Nursing
 - (2) Acute Nursing: Medical Stabilization
 - (3) Skilled Nursing Facility
 - (4) Skilled Nursing Facility: Staff Development
 - (5) Surgery
 - (6) Surgery: Anesthesia
 - (7) Infection Control
 - (8) Lab
- F.** Committee Meeting Minutes:
 - (1) December 03, 2020 Planning & Facilities Committee Meeting Minutes
 - (2) May 04, 2021 Finance Committee Meeting Minutes

President Boss called for a motion to approve the Consent Agenda as presented. Motion by Board Member Melnick 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 Melnick - yes
- Board Member Kaliher - yes
- President Boss - yes
- Board Member Baker - yes
- Board Member Briner - yes

10. OLD BUSINESS*

- None

11. NEW BUSINESS*

A. Discussion and Potential Approval of JWT & Associates Service Agreement:

President Boss called for a motion to approve JWT & Associates Service Agreement as presented. Motion by Board Member Kaliher to approve JWT & Associates Service Agreement as presented. Second by Board Member Melnick to approve JWT & Associates Service Agreement as presented. President Boss called for the vote. A vote in favor of the motion was 5/0.

- Board Member Melnick - yes
- Board Member Kaliher - yes
- President Boss - yes
- Board Member Baker - yes
- Board Member Briner - yes

B. Discussion and Potential Approval of the Following:

- (1) Fiscal Year 2022 Operating Budget
- (2) Fiscal Year 2022 Capital Budget
 - Mr. Hamblin reported that the Finance Committee and Planning Committee have we reviewed the budget and gave a positive recommendation to the Board of Directors.
 - Met with department managers
 - Budget is based off of seven months of history
 - Very challenging year
 - Monies in reserve from the CARES Act
 - Increase in staffing
 - Board travel and education is added to the budget
 - .6 staff educator
 - Board Member Melnick reported that there is some additional staff hired, this has been a very challenging year but feels the budget is thoughtful and a good budget.

President Boss called for a motion to approve the FY 2022 Operating and Capital Budget as presented. Motion by Board Member Melnick to approve the FY 2022 Operating and Capital Budget as presented. Second by Board Member Briner to approve the FY 2022 Operating and Capital Budget as presented President Boss called for the vote. A vote in favor of the motion was 5/0.

- Board Member Melnick - yes
- Board Member Kaliher - yes
- President Boss - yes
- Board Member Baker - yes
- Board Member Briner - yes

12. ACTION ITEMS*

A. QHR Health Report:

(1) June 2021 QHR Health Report:

- Mr. White reported the following:
 - National issue on housing
 - This report provides you all what we are working on
 - Spending comparison on HPG
 - Last two years of history/report
 - First week of August we will be doing middle management training
 - Three regional meetings have been finalized invitations is to all board members
 - Continue to provide QHR webinars to the hospital at no charge
 - July 13 Compliance Update
 - June 01 finalized a deal with Grant Avenue that invest in healthcare entities

President Boss motioned to approve the QHR Report as presented. Motion by Board Member Baker to approve the QHR Report as Presented. Second by Board Member Briner 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 Melnick - yes
- Board Member Kaliher - yes
- President Boss - yes
- Board Member Baker - yes
- Board Member Briner - yes

B. CNO Report:

(1) May 2021 CNO Report:

- Ms. Jex reported the following information
 - BETA Validation survey went well
 - Staffing issues are being addressed
 - Housing is an issue
- Mr. Friel reported that housing is being looked at since this is becoming an issue, continue to look at property and at this time we are looking at duplexes.

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 Melnick - yes
- Board Member Kaliher - yes
- President Boss - yes
- Board Member Baker - yes
- Board Member Briner - yes

C. Acceptance of the CEO Report:

(1) June 2021 CEO Report:

- Mr. Friel reported the following information:
 - Auxiliary is back providing customer services
 - Beginning to dismantle COVID area's
 - Continue to vaccinate
 - Continue to wear masks
 - Providing vaccinations to children
 - June 21 Summer Celebration
 - Lunch will be served/catered
 - Center for Oral Health Dental Agreement extended for 90 days so that we can work out details on an agreement
 - Will be retiring October 30

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

- Board Member Melnick - yes
- Board Member Kaliher - yes
- President Boss - yes
- Board Member Baker - yes
- Board Member Briner - yes

D. Acceptance of the Finance Report:

(1) April 2021 Financials:

- Mr. Hamblin reported the following information:
 - Cash position is strong
 - 503 days cash on hand
 - Experienced a loss
 - Money in reserves
 - YTD surplus is under budget
 - Expenses over budget

(2) CFO Report:

- Mr. Hamblin reported the following:
 - PPP Loan Forgiveness Status
 - Making progress
 - Provided some additional information
 - CARES Act Funding
 - Tracking the funding

- PPE
 - 30 day supply of PPE
 - Applied for a 2nd order of PPE at no cost
- Urgent Care Proformas:
 - To update proforma with current situation, will provide at a later time
- COVID 19 Expenses / Funding:
 - Continue to monitor

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

- Board Member Melnick - yes
- Board Member Kaliher - yes
- President Boss - yes
- Board Member Baker - yes
- Board Member Briner -yes

13. ADJOURNMENT:

President Boss called for a motion to adjourn the meeting at 3:11 p.m. Motion by Board Member Baker to adjourn the meeting. Second by Board Member Melnick to adjourn the meeting. President Boss called for the vote. A vote in favor of the motion was unanimously approved 5/0.

- Board Member Melnick- yes
- Board Member Kaliher - yes
- President Boss - yes
- Board Member Baker - yes
- Board Member Briner - yes

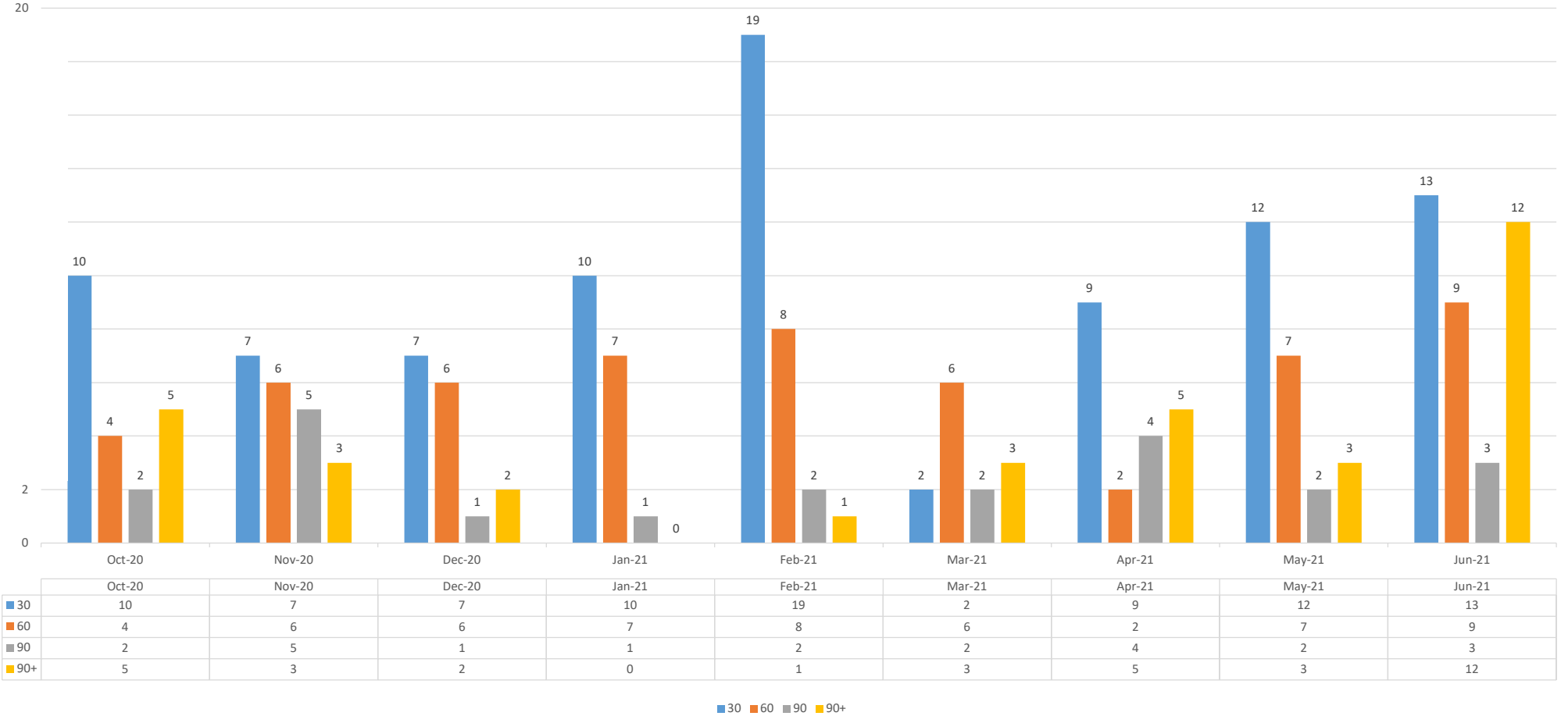


Board Report

June 2021

Staffing	Active: 227 – FT: 153 PT: 12 PD: 62 New Hires: 3 Terms: 6 (5 Voluntary 1 Involuntary) Open Positions: 10
Employee Performance Evaluations	DELINQUENT: See attachment 30 days: 13 60 days: 9 90 days: 3 90+ days: 12 – (RT, Acute, ER) See Attachment
Work Comp	NEW CLAIMS: 1 OPEN: 9 Indemnity (Wage Replacement, attempts to make the employee financially whole) – 7 Future Medical Care – 0 Medical Only – 2
Employee Morale	Ongoing Culture of Ownership Initiatives Birthday Celebration Summer Party August 28 th
Beta HEART	Opted into the domain “Workplace Violence” and “Slip Trip and Fall”. When validated we are entitled to 2% work comp premium discount per domain up to 4% per year.

Past Due Evaluations



Bear Valley Community Healthcare District Construction Projects 2021

Department / Project	Details	Vendor and all associated costs	Comments	Date Complete
Urgent Care	Working with design professionals to finalize drawings	Moon & Mayoras	In Progress	
Pyxis Replacement	Pyxis equipment is in place and seismic anchors will be installed soon.	Facilities	Nearly complete, waiting for Pyxis to send last mount that was not received during original delivery.	

Bear Valley Community Healthcare District Potential Equipment Requirements

Department / Project	Details	Vendor and all associated costs	Comments	Date Complete
Facilities- Forklift	Purchase forklift for to assist with numerous manual procedures performed	United Rentals	Will be purchased in July 2021	
Facilities- New Toolbox & Tool Set	Replace the old broken toolbox and replace the old handtool set	Northern Tools	Purchased	
Salt Spreader	Purchase a salt spreader for the work truck, to eliminate using a walk behind for the entire	Northern Tools	In Progress	

Bear Valley Community Healthcare District

Repairs Maintenance

Department / Project	Details	Vendor and all associated costs	Comments	Date
Covid Partition Removal	Start to break down all of the plastic partitions from Covid	Facilities	Completed	
Annual Backflow Device Inspection		Martin Fire & Backflow	Completed	
Purchasing Remodel	Replaced all the desk, flooring, painted and replaced all of the bathroom accessories	Facilities/Mike's Custom Flooring	Completed	



Infection Prevention Monthly Report

June 2021

TOPIC	UPDATE	ACTION/FOLLOW UP
1. Regulatory	<ul style="list-style-type: none"> ▪ Continue to receive updates from APIC. Meetings are being conducted through Zoom. ▪ AFL (All Facility Letters) from CDPH have been reviewed. AFL 21-18 Notice of discontinuation of reporting requirements for 2 measures. <ol style="list-style-type: none"> 1. Central Line Insertion Practices (CLIP) reporting requirements to the California Department of Public Health (CDPH) via the National Healthcare Safety Network (NHSN) 2. Surgical Antimicrobial Prophylaxis Measures reporting ▪ Continue NHSN surveillance reporting. <ul style="list-style-type: none"> • No Hospital Acquired Infections to report. • No surgical site infections. ▪ Completion of CMR reports to Public Health per Title 17 and CDPH regulations <ul style="list-style-type: none"> • May -3 positive COVID-19, 1 gonorrhea • June – 10 positive COVID-19 1 gonorrhea 1 syphilis 	<ul style="list-style-type: none"> • Continue reporting as required.

2. Construction	<ul style="list-style-type: none"> ▪ ICRA for new flooring in Respiratory Therapy- complete ▪ New flooring in the Surgery Department – will take place soon. 	<ul style="list-style-type: none"> ▪ Work with Maintenance and contractors to ensure compliance.
3. QI	<ul style="list-style-type: none"> ▪ Continue to work towards increased compliance with Hand Hygiene <ul style="list-style-type: none"> ▪ May 78 % ▪ June 76% 	<ul style="list-style-type: none"> • Continue monitoring hand hygiene compliance.
4. Outbreaks/ Surveillance	<ul style="list-style-type: none"> ▪ May - 2 MRSA, 0 C-diff ▪ June - 1 MRSA, 0 C-diff 	<ul style="list-style-type: none"> ▪ Informational
5. Policy Updates	<ul style="list-style-type: none"> ▪ No infection control policies this month. 	<ul style="list-style-type: none"> ▪ Clinical Policy and Procedure Committee to review and update Infection Prevention policies.
6. Safety/Product	<ul style="list-style-type: none"> ▪ IP will be continuing to monitor environmental cleaning practices. 	<ul style="list-style-type: none"> ▪ Continue to monitor compliance with infection control practices.
7. Antibiotic Stewardship	<ul style="list-style-type: none"> ▪ Pharmacist continues to monitor antibiotic usage. ▪ BVCHD was awarded Bronze status in CDPH's Antimicrobial Stewardship Honor Roll Program 	<ul style="list-style-type: none"> ▪ Informational.
8. Education	<ul style="list-style-type: none"> ▪ Infection Preventionist keeping up to date on latest COVID-19 and other infectious disease information. 	<ul style="list-style-type: none"> ▪ ICP to share information at appropriate

	<ul style="list-style-type: none"> ▪ IP to do ongoing education at EVS staff meetings. 	committees.
9. Informational	<p>Immediate Use Steam Sterilization</p> <ul style="list-style-type: none"> ▪ May – 3 surgeries, 0 IUSS ▪ June– 9 surgeries, 0 IUSS <p>Covid -19 Vaccine</p> <ul style="list-style-type: none"> ▪ 74% of staff have been vaccinated. <p>We are still screening patients and visitors for symptoms of Covid-19.</p>	
<i>Heather Loose, BSN, RN Infection Preventionist Date: July 6, 2021</i>		

JULY

Department	Title	Summary
Administration	Administrator On Call	Annual review. Formatted. Revised 1.2.
Administration	Board Members Code of Conduct	Annual review. Formatted.
Administration	Board Policy on Receipt of Correspondence Regarding Personnel Matters	Annual review. Formatted. Removed 7-9.
Administration	Board/CEO Operating Governance Protocols	Annual review. Formatted.
Administration	Charge Nurse Authority Statement	Annual review. No changes.
Administration	Contracts and Agreements	Annual review. Formatted. Revised 12.
Administration	Contracts and Agreements with Physicians and Other Referral Sources	Annual review. Removed "Policy" from title.
Administration	Critical Access Agreements	Annual review. No changes.
Administration	Critical Access Compliance with Federal, State, and Local Laws and Regulations	Annual review. No changes.
Administration	Critical Access Emergency Services	Annual review. Formatted.
Administration	Critical Access Number of Beds and Length of Stay	Annual review. No changes.
Administration	Critical Access Organizational Structure	Annual review. No changes.
Administration	Critical Access Staff and Staffing Responsibility	Annual review. No changes.
Administration	Critical Access Status and Location	Annual review. No changes.
Administration	Gifts to Hospital and Staff	Annual review. Formatted.
Administration	Guidelines to Planning New Programs or Services	Annual review. No changes.
Administration	Hospital Plan for Provision of Patient Care Services	Annual review. Formatted. Revised Definition Section & Updated Contractual Relationships List.
Administration	Interpreter - Use Of	Annual review. No changes.
Administration	Policy Review and Approval Process	Annual review. Formatted. Revised 1 & 4.1.
Administration	Public Participation at Board of Directors Meetings	Annual review. No changes.
Administration	Notary Public Services	Annual review. Formatted. Revised Policy Statement.
Administration	Physician on Call Coverage	Annual review. Revised to reflect current process.
Administration	Reimbursement for Training and Travel	Annual review. Formatted.
Administration	Subpoenas	Annual review. No Changes.
Emergency Department	5150 Intervention	Annual review. Formatted. Revised to reflect current process.
Emergency Department	Code Heart	Annual review. Formatted. Revised to reflect current process.
Emergency Department	Code Sepsis	Annual review. Formatted. Revised to reflect current process.
Emergency Department	Code Stroke	Annual review. Revised verbiage to reflect current process.
Emergency Department	Continuous Infusion of Critical Care Medications	Moved from N. Admin. Changed policy title. Formatted. Revised to reflect
Emergency Department	Discharging Patients	Annual review. Revised verbiage to reflect current process.
Emergency Department	Disposition of Foreign Objects from Patients	Annual review. Formatted. Revised policy statement and #5
Emergency Department	Emergency Department Scope of Service	Annual review. Formatted. Revised to reflect current process.
Emergency Department	Expiration Dating of Warmed Intravenous Solutions	Annual review. Formatted.
Emergency Department	Intraosseous Infusion	Moved from N. Admin. Formatted. Revised to reflect current process.
Emergency Department	Recording of Vital Signs on Pediatric Patients	Annual review. Formatted. Revised to reflect current process.
Emergency Department	Safe Opioid Prescribing	Annual review. Formatted. Revised verbiage to reflect current process.
Emergency Department	Spine Injuries, Cervical	Annual review. Formatted. Revised to reflect current process.
Emergency Department	Surge Beds in the Emergency Department During Increased Census	Annual review. Formatted. Revised verbiage to reflect current process.
Emergency Department	Triage - ESI	Annual review. Formatted. Revised to reflect current process.
Emergency Department	Use of Antipyretics in Triage	Annual review. Formatted. Revised to reflect current process.
Environmental Services	Bedside Commode Cleaning	Annual review. Formatted.
Environmental Services	Carpet Care	Annual review. No Changes.
Environmental Services	Carpet Extraction	Annual review. No Changes.
Environmental Services	Ceiling Cleaning	Annual review. No Changes.
Environmental Services	Damp Mopping Hard Surface Floors	Annual review. Revised #1.1.
Environmental Services	Drinking Fountains	Annual review. No Changes.
Environmental Services	Floor Burnishing	Annual review. No Changes.
Human Resources	District Owned Vehicles Approved Driver Responsibilities	Annual review. Formatted. Changed policy name from "SNF Van". Changed department from SNF to Human Resources. Revised 2.1.1, 10.1, 11.1. Added 11.1.1-11.1.3. Removed 2.1.5 and all of 5.
Information Technology	Computer Use Policy	New Policy. Replacing Computer Use Agreement Policy.
Information Technology	Encryption Policy	Annual review. Formatted. Revised Policy Statement.

Laboratory - Blood Bank	ABO/RH Typing of Red Cells and Serum	Annual review. Formatted. Revised to reflect current process.
Laboratory - Blood Bank	Antibody Screening/Indirect Antiglobulin Test	Annual review. Formatted. Revised to reflect current process.
Laboratory - Blood Bank	Autologous/Directed Donor Blood Transfusion	Annual review. Formatted. Revised to reflect current process.
Laboratory - Blood Bank	Blood Components and Use	Annual review. Formatted. Revised to reflect current process.
Laboratory - Blood Bank	Compatibility Testing	Annual review. Formatted. Revised to reflect current process.
Laboratory - Blood Bank	Direct Antiglobulin Test	Annual review. Formatted. Revised to reflect current process.
Materials Management	Assembly Bill 2537, 90 day PPE Requirement	New Policy.
Nursing Admin.	Blood/Blood Product Transfusion	Annual review. Formatted.
Nursing Admin.	BRN Continuing Education Units by BVCHD	Annual review. Formatted.
Nursing Admin.	Chain of Command-Patient Care Related	Annual review. Formatted. Removed Related from policy title.
Nursing Admin.	Chaperone Use By Providers	Annual review. Formatted.
Nursing Admin.	Code Blue Code White	Annual review. Formatted.
Nursing Admin.	Crash Cart	Annual review. Formatted.
Nursing Admin.	Death, Notification to Coroner/One Legacy	Annual review. Formatted.
Nursing Admin.	Diagnostic Variance Follow-Up	Annual review. Formatted. Added 1.2.
Nursing Admin.	Do Not Resuscitate (DNR)	Annual review. Formatted. Revised 12.
Nursing Admin.	End of Life Care	Annual review. Formatted.
Nursing Admin.	Hand Off Communication	Annual review. Formatted.
Nursing Admin.	Hoyer-Ultralift Policy	Annual review. Formatted.
Nursing Admin.	Lippincott Procedure Manual	Annual review. No changes.
Nursing Admin.	Medication Administration Reference	Annual review. No changes.
Nursing Admin.	Nursing Cell Phone	Annual review. No changes.
Nursing Admin.	Nursing Scope of Service	Annual review. Formatted.
Nursing Admin.	Pain Management	Annual review. Formatted.
Nursing Admin.	Patient Safety Attendant/Sitter	Annual review. Formatted.
Nursing Admin.	Poison Control	Annual review. No changes.
Nursing Admin.	Postmortem Care - Removal of Remains	Annual review. Formatted.
Nursing Admin.	Procedure for Accessing Implanted Port	Annual review. Formatted.
Nursing Admin.	Rapid Response Protocol	Annual review. Formatted. Added 1.13 and 1.14, revised 3.1.3
Nursing Admin.	Reporting of Critical Test Results	Annual review. Formatted.
Nursing Admin.	Staffing Plan	Annual review. Formatted. Updated verbiage on #4
Nursing Admin.	Staffing Registry Nursing Personnel	Annual review. No changes.
Nursing Admin.	Supply Management - Clinical Areas	Annual review. No changes.
Nursing Admin.	Telephone and Verbal Orders	Annual review. Formatted. Revised 2 and 3.
Nursing Admin.	Telephone Triage	Annual review. Formatted.
Nursing Admin.	Time Out	Annual review. Formatted.
Nursing Admin.	Transfers – Bed to Stretcher, Bed to Wheelchair, Using a Hydraulic lift, Using a Slider	Annual review. Formatted.
Nursing Admin.	Venous Access Guide	Annual review. Formatted.
Nursing Admin.	Withholding and Withdrawing Life-Sustaining Treatment	Annual review. Formatted.
Respiratory Therapy	Arterial Blood Gas Quality Assessment and Maintenance	Annual review. Formatted. Revised to reflect current process.
Respiratory Therapy	Blood Gas Analyzer Procedure Manual	Annual review. Formatted. Added i-Stat analyzer to policy.
Respiratory Therapy	Electrocardiogram (EKG)	Annual review. Formatted. Revised to reflect current process.
Risk Management	Identifying Patients	Annual review. Formatted. Moved From N. Admin.
Safety	Patient Safety Plan	Annual review. Formatted. Added definition of HEART Event. Deleted Qualitick Patient Satisfaction Survey. Added "Plan" to title.

**BEAR VALLEY COMMUNITY HEALTHCARE DISTRICT
BOARD OF DIRECTORS
FINANCE COMMITTEE MEETING MINUTES
41870 GARSTIN DR., BIG BEAR LAKE, CA 92315
JUNE 01, 2021**

MEMBERS Perri Melnick, Treasurer Garth Hamblin, CFO
PRESENT: Steven Baker, 2nd Vice President Shelly Egerer, Exec. Asst.
John Friel, CEO

STAFF: Kerri Jex Mary Norman

OTHER: None

**COMMUNITY
MEMBERS:** None

ABSENT: None

OPEN SESSION

1. CALL TO ORDER:

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

2. ROLL CALL:

Perri Melnick and Steven Baker were present. Also present were John Friel, CEO, Garth Hamblin, CFO and Shelly Egerer, Executive Assistant.

3. ADOPTION OF AGENDA:

Board Member Melnick motioned to adopt the June 01, 2021 Finance Committee Meeting Agenda as presented. Second by Board Member Baker to adopt the June 01, 2021 Finance Committee Meeting Agenda as presented. Board Member Melnick called for a vote. A vote in favor of the motion was unanimously approved.

- Board Member Melnick - yes
- Board Member Baker- yes

CLOSED SESSION

1. PUBLIC FORUM FOR CLOSED SESSION:

Board Member Melnick 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 Melnick closed the Hearing Section at 1:00 p.m.

2. ADJOURN TO CLOSED SESSION:

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

- Board Member Melnick - yes
- Board Member Baker- yes

OPEN SESSION

1. CALL TO ORDER:

Board Member Melnick called the meeting to order at 1:45 p.m.

2. RESULTS OF CLOSED SESSION:

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

3. PUBLIC FORUM FOR OPEN SESSION:

Board Member Melnick opened the Hearing Section for Public Comment on Open Session items at 1:45 p.m. Hearing no request to address the Finance Committee, Board Member Melnick closed the Hearing Section at 1:45 p.m.

4. DIRECTOR'S COMMENTS:

- None

5. APPROVAL OF MINUTES:

A. May 04, 2021

Board Member Melnick motioned to approve May 04, 2021 minutes as presented. Second by Board Member Baker to approve the May 04, 2021 minutes as presented. Board Member Melnick called for a vote. A vote in favor of the motion was unanimously approved.

- Board Member Melnick - yes
- Board Member Baker- yes

6. OLD BUSINESS:

A. Discussion and Potential Recommendation to the Board of Directors of the Following:

- (1) Fiscal Year 2022 Operating Budget
- (2) Fiscal Year 2022 Operating Budget
 - Mr. Hamblin reported that he reached out to QHR in regard to rate changes and also shared the discussion with Human Resources in regard to the minimum pay increase and asked the HR Director to see what other facilities are doing for the minimum wage increase.

Board Member Melnick motioned to approve a positive recommendation to the Board of Directors the FY 2022 Operating & FY 2022 Capital Budget. Second by Board Member Baker motioned to approve a positive recommendation to the Board of Directors the FY 2022 Operating & FY 2022 Capital Budget. Board Member Melnick called for a vote. A vote in favor of the motion was unanimously approved.

- Board Member Melnick - yes
- Board Member Baker- yes

7. NEW BUSINESS*

A. **Discussion and Potential Recommendation to the Board of Directors of JWT & Associates Service Agreement:**

- Mr. Hamblin reported this is for auditing purposes.
 - Mr. Tucker has done a good job for the last several years. The agreement is for FY 2021 & 2022, \$26,000 per year, this is a two-year agreement.

- Mr. Tucker usually presents the financial audited statement in person to the board of directors

Board Member Melnick motioned to provide a positive recommendation to the Board of Directors for JWT Service Agreement. Second by Board Member Baker to approve a positive recommendation to the Board of Directors for JWT service agreement. Board Member Melnick called for a vote. A vote in favor of the motion was unanimously approved.

- Board Member Melnick - yes
- Board Member Baker- yes

8. PRESENTATION AND REVIEW OF FINANCIAL STATEMENTS*

A. April 2021 Finances:

- Mr. Hamblin reported the following information:
 - Days cash on hand 503 days
 - Still have strong cash position
 - Experienced a loss for the month
 - Patent revenue was higher than budget
 - Net patient revenue was 3.4% lower than budget
 - Clinic visits are running below budget
 - Physicians have not been on site, several providers have not seen patients (podiatrist, Dr. Paja, Dr. Kondal)

B. CFO Report:

- Mr. Hamblin reported the following:
 - **PPP Loan Status:**
 - Things are progressing at a slow pace
 - Received a request for one additional item
 - \$2.7 million is the loan received
 - **CARES Act Funding:**
 - No clear direction or timeframe for submission of information for CARES Act Funding
 - \$3.6 million
 - **PPE (Personal Protective Equipment):**
 - State made a 30-day supply available for free
 - There is potential to receive another 30-day free supply
 - **Urgent Care Proformas:**
 - Provided a summary comparison of two options that have been considered for the Urgent Care
 - Employees are budgeted for the UC
 - **COVID-19 Expenses / Funding:**
 - We continue to see an increase in patients

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

- Board Member Melnick - yes
- Board Member Baker- yes

9. ADJOURNMENT*

Board Member Melnick motioned to adjourn the meeting at 2:15 p.m. Second by Board Member Baker to adjourn the meeting. Board Member Melnick called for a vote. A vote in favor of the motion was unanimously approved.

- Board Member Melnick - yes
- Board Member Baker- yes

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Thank you Bear Valley Family for our Partnership

	QHR Solution	Leader	Coverage	2021	Comments
Key	Focus Items This Month	Focus Items This Year	Completed This Year	Updated This Month	
Coverage	WIC - Within Contract				
Strategy & Positioning	Ongoing Strategy Advisement	Ryan Nestrack	WIC	Ongoing support for the Strategic Plan. Quarterly check-ups with the Board/Hospital.	First quarterly "check-in" complete in April.
	Recruitment for new CEO	Region VP	WIC	Begin search for new CEO. John leaving at end of October 2021.	
	Strategic Plan	Ryan Nestrack	WIC	Process started in May 2020. Covid caused delays in finalization.	Plan completed, Board retreat in November 2020, adopted by Board in January 2021.
Clinical & Compliance	Urgent Care Analysis/Proforma	Region Team	WIC	Project begun August 2019.	LOI in process with Attorney. Present to Combs in June. Still waiting on signed LOI to update proforma.
	Medical Stabilization Program	Keith Jackson	Add-on	Contract approved Dec 2020. Unit opened Feb 2021.	Monthly discussions on operations and potential expansion.
	Environmental Services Assessment	Terry Norris	WIC	Project approved	Project completed October 2020.

	QHR Solution	Leader	Coverage	2021	Comments
Financial & Operations	COVID-19 Supply Focus	David Winchester	WIC	QHR PLUS Warehouse Operating	Three orders requested/completed FY to date.
	Monthly Operations Review	Region Team	WIC	Held Monthly on 2nd Monday	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.
	Managed Care Contract Review	Wanda Wright	WIC	Project started March 2021	Extensive negotiations going on with Heritage. Reviewing contract with Kaiser.
	Financial Ops Review (FOR)	Region Team	WIC	Information received in April	Information reviewed, letter sent to CFO. No findings noted.
	QPA/GPO Review	PLUS Team	WIC	Project performed on an annual basis.	Analysis and information gathered at June 30th. Letter sent to Board Chair at completion.
	Price Transparency	CPSI	WIC	Project started October 2020	Finalized and implemented in January 2021.
	Contractual Accounting Review	David Perry	WIC	Review started January 2021	Report completed. No findings noted.
	Cost Report Review	David Perry	WIC	Review begun November 2020.	Project completed December 2020 with no execeptions or recommendations found.

	QHR Solution	Leader	Coverage	2021	Comments
Trustee Education	Governance Webinars	QLI	WIC	Second Tuesday each month	See monthly listing below.
	National Trustee Conference with Trustee Essentials	QLI	WIC	Q1 2022-Wigwam Resort Phoenix, AZ	
	Board Self-Assessment	Region Team	WIC	Schedule Q4 2021	
	Regional Conferences	QLI	WIC	Three regional conferences being developed	Seminar Dates: July 21-23 Boston Aug 4-6 Denver/Co Springs Aug 18-20 Nashville
Leadership Education & Development	Director Leadership Series	QLI	Add-on	Board approved QHR onsite program in Feb 2021.	"Leading From the Middle" scheduled August 2021
	QLI Webinars and Leadership Development	QLI	WIC	Various Throughout The Year	
	CEO Evaluation	Region VP	WIC	Completed September 2020	
	CFO Evaluation	Region VP	WIC	Completed October 2020	

QHR Regional Team			
Team Member & Position	Hours to Date	Phone	Email
Regional Team			
Woody White, CPA - 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 Nestruck - Senior Director Strategy		847.533.0759	rnestruck@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

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 Learning Institute (QLI) Education Information Section		
2021 Trustee Webinars - 2nd Tuesday @ 12 PM CST		BVCHD Participants
Jan 12	COVID-19 Vaccine Update	
Feb 9	ASC Ownership Benefits	
Mar 9	Case Management	
Apr 13	Behavioral Health	
May 11	Supply Chain	
June 8	Intro to Medicare Reimbursements & Hot Topics	
Jul 13	Compliance Update	
Aug 10	Quality Update - Care Transformation	
Sept 14	Technology Services	
Oct 12	Aligning Marketing Strategies with Hospital Business Objectives	
Nov 9	Revenue Cycle	
Check out all Webinars through the link below Be sure to add these dates to you calendar! Visit https://qhr.com/learning-institute/ to register		

Estimated Annual Benefits & Savings 12 Month Totals	
QHR Business Partnership Benefits	
HPG Discounts	\$205,147
HPS Rebates	\$7,442
GPO Group Savings	\$6,661
Strategic Service Partner	\$45,825
Total:	\$265,075
Other QHR Business Partnership Benefits	
MD Buyline	\$10,000
AHA Dues Discounts	\$3,931
J & J QPA Rebate	\$47
Consulting (Region Team)	See Hours
Consulting Engagements	See Hours
Total:	\$13,978
Partnership Education Benefit	
Employee Education and Training	Trustee Quick Reference Guide
Monthly Board Education Webinars	
National QHR Trustee Conference	
Regional Education Conferences	
Other Benefits	
New Compliance Director Support	Contractual Accounting & Bad Debt Analysis
Urgent Care Assessment & Pro Forma	Strategic Plan
Managed Care Payor Yield Assessment	
Community Health Needs Assessment	

QHR Region Team and Internal Consulting Hours (based on Fiscal Year)		
	2020	2021 YTD
Region Team	340	160
Internal Consultants	286	126
Total:	626	286

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

QHR Health Vision 2021



QHR PLUS - Shared Services

Support independence through QHR PLUS—including financial management, supply chain, physician management services, outreach and CRM, and technology services



Create Revenue

Create revenue for hospitals by driving market share, promoting digital touch to consumers, supporting referral management, expanding marketing, and growing technology



Technology beyond EHR

Prepare for technology beyond EHR by bolstering infrastructure and developing the QHR platform for referral management, care coordination, reporting, analytics, and more



Influence Policy

Influence policy by engaging leaders and advocating for policy changes that advance access and new revenue opportunities for independent rural healthcare organizations



Develop Leaders

Develop the next generation of hospital leadership thinking through training, coaching, networking, and support from QHR Health's client account management (CAM) team



CHIEF EXECUTIVE OFFICER REPORT

CEO Information:

The Event Committee conducted a R.E.D. T-shirt sale to support all our deployed service men and women. The t-shirt fundraiser raised \$1,580.00

We continue back to our pre-COVID 19 activities and patient services and we are continuing to provide the COVID 19 vaccination clinics.

“Save the Date”, August 28 at 12:00 pm we will be conducting our Summer Hospital Party. It will be conducted at the Erwin Lake Ranch.

Senator Rosilicie Bogh will be on site August 2 to have a meet and greet and a tour of our facility.

We have received an invitation to attend the “Ribbon Cutting Ceremony for the new medical campus at LLUMC on August 6. \$1.2 billion medical center. If you are interested in in seeing million-dollar stare of the art hospital, please join me on that day. Please contact Shelly for details.

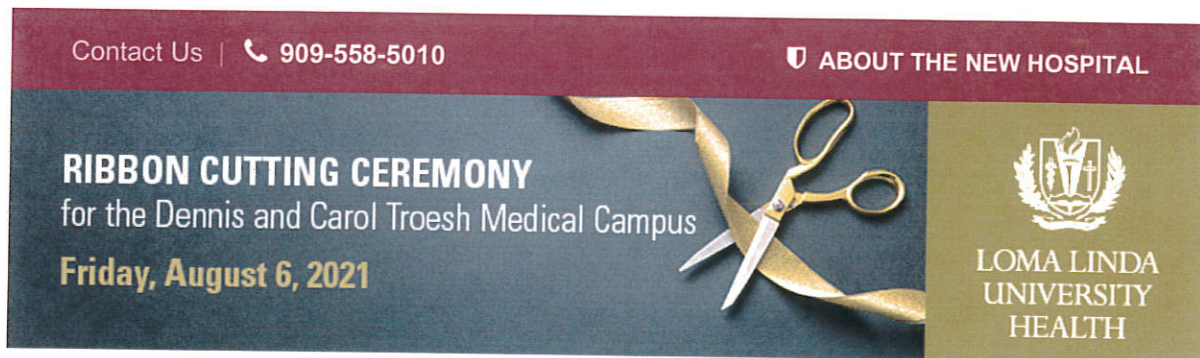
BVCHD sent Gail McCarthy a vase thanking her for her many years of service to the district as a Board Member.

Shelly Egerer

From: John Friel
Sent: Monday, July 12, 2021 11:19 AM
To: Shelly Egerer
Subject: FW: You're Invited to the Ribbon Cutting Ceremony on August 6

Pease RSVP for Connie and I and I've notified the Board
John

From: Richard Hart <president@llu.edu>
Sent: Friday, July 9, 2021 3:37 PM
To: John Friel <John.Friel@bvchd.com>
Subject: You're Invited to the Ribbon Cutting Ceremony on August 6



You are invited to the Ribbon Cutting Ceremony for the Dennis and Carol Troesh Medical Campus.

It has been an incredible journey to complete the building of our new adult and children's hospital towers; thanks to the many donors, community members and staff who contributed and supported this project. Over the coming years, lives will be touched as patients are cared for and the next generation of healthcare professionals are taught.

We look forward to seeing you in the new outdoor amphitheater on August 6 as we celebrate together. Loma Linda University Health is excited to share this momentous occasion with you, the community, and the world.

Join us Friday, August 6 at 10:00 a.m. for the Ribbon Cutting Ceremony.

[RSVP TODAY ↻](#)

Sincerely,



Richard Hart, MD, DrPH

President

Loma Linda University Health



Kerry Heinrich

CEO

Loma Linda University Health Hospitals



RIBBON CUTTING CEREMONY

Less than a decade ago, we stood on the threshold of this project and it seemed impossible. Your support has made it a success, and from the bottom of our hearts, we say thank you.

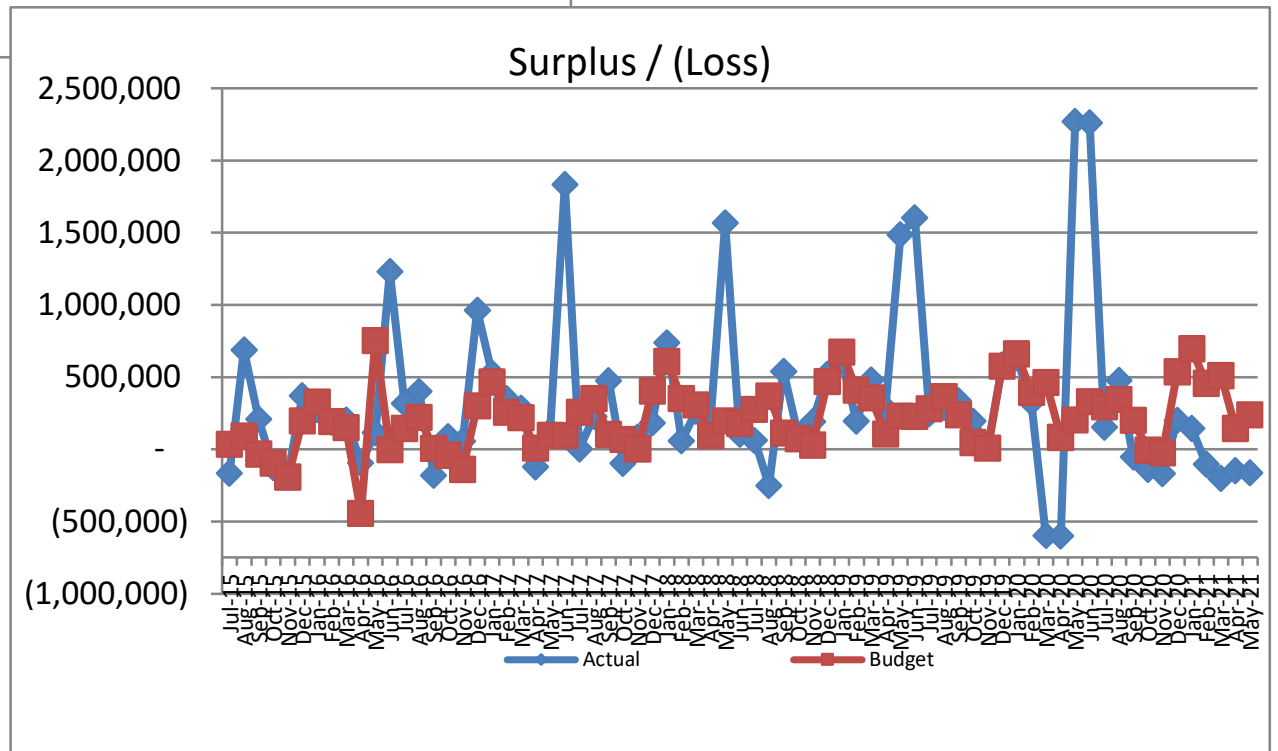
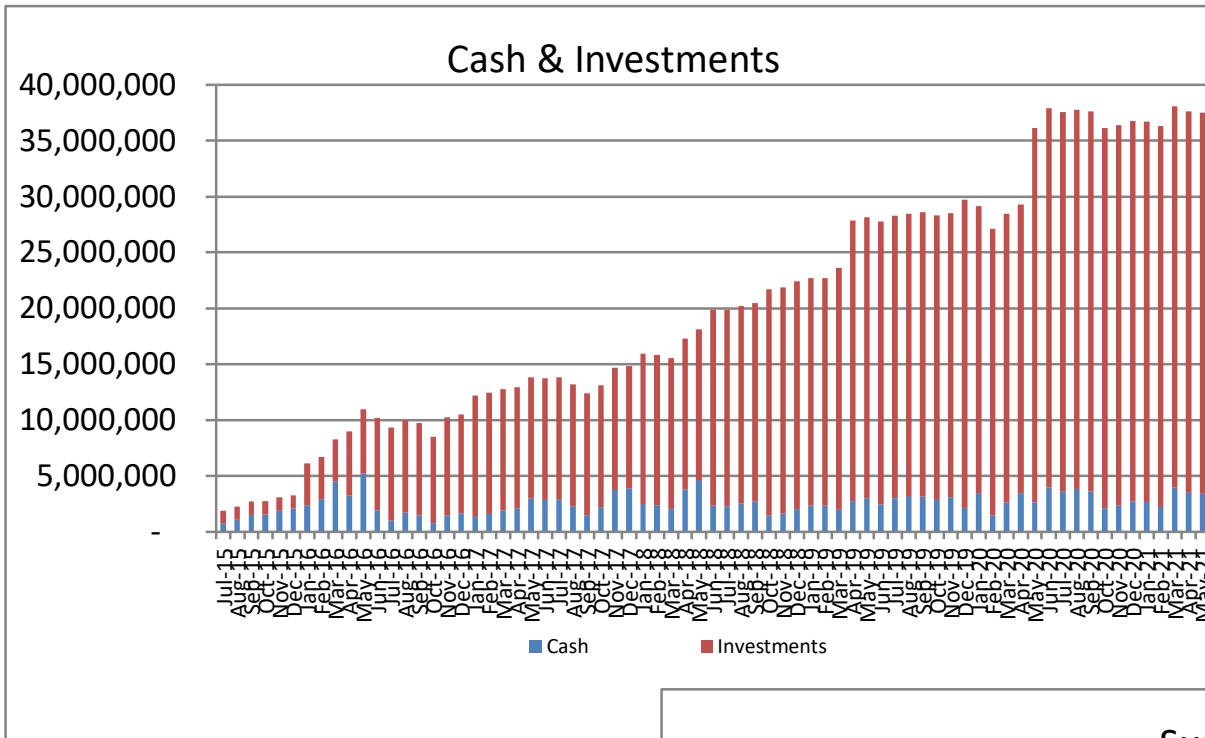
[RSVP TODAY ↻](#)



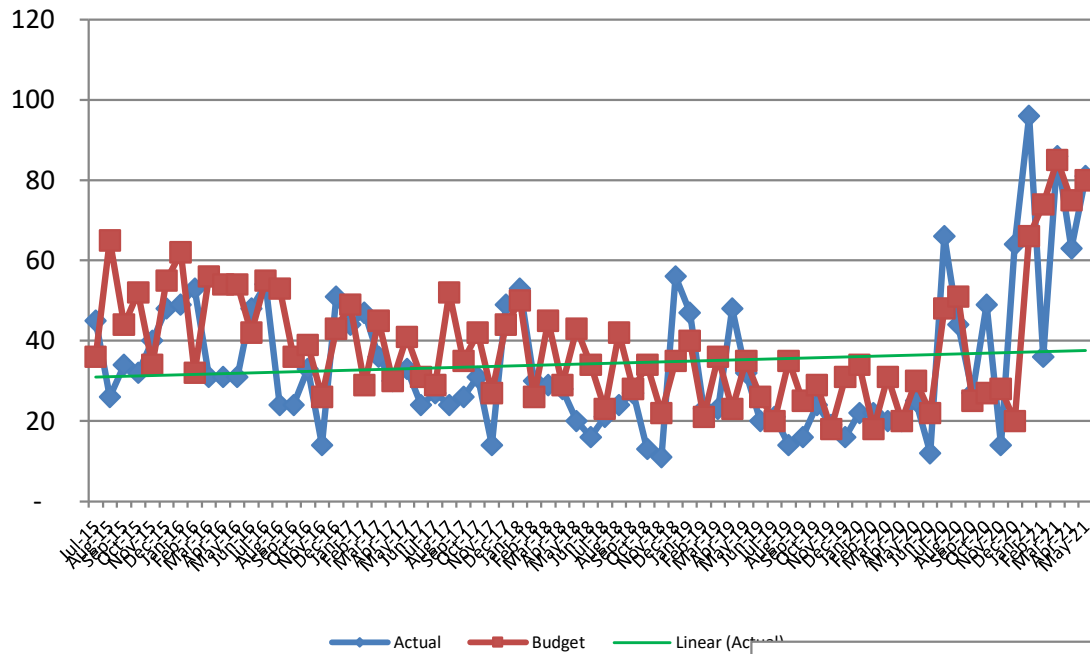
Finance Report
May 2021 Results

Summary for May 2021

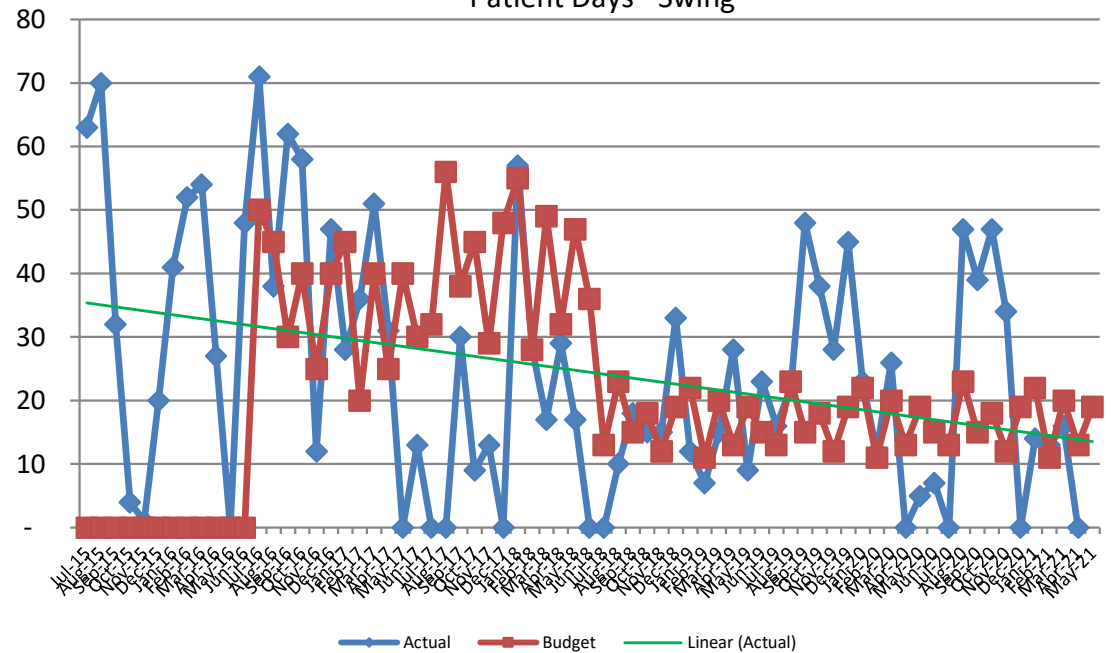
- Cash on hand \$ 3,391,511
Investments \$34,105,746
- Days Cash on hand, including investments with LAIF – 504
- (Loss) of \$161,544 was \$400,909 lower than budget
- Total Patient Revenue was 5.2% lower than Budget for the month
- Net Patient Revenue was 16.8% lower than budget
- Total Expenses were 5.0% more than budget

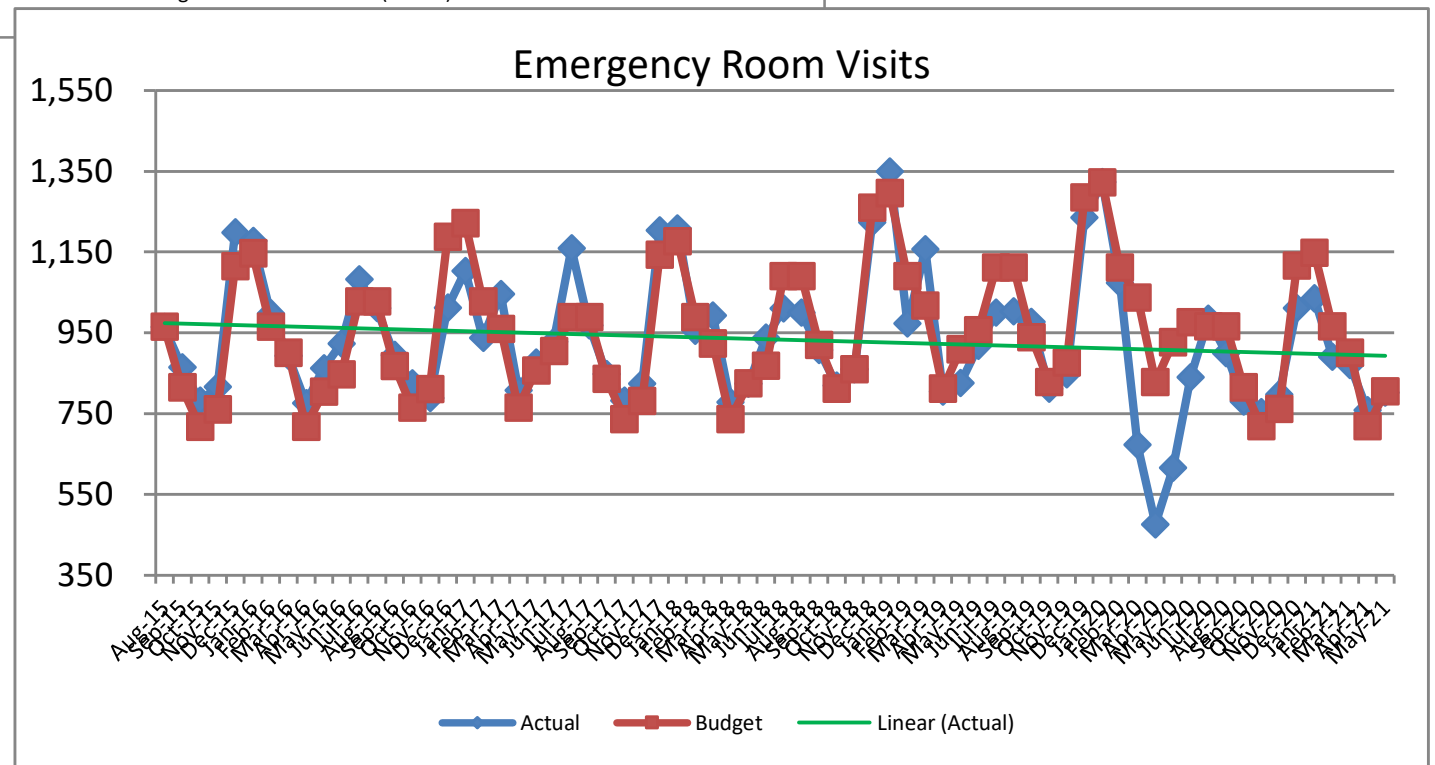
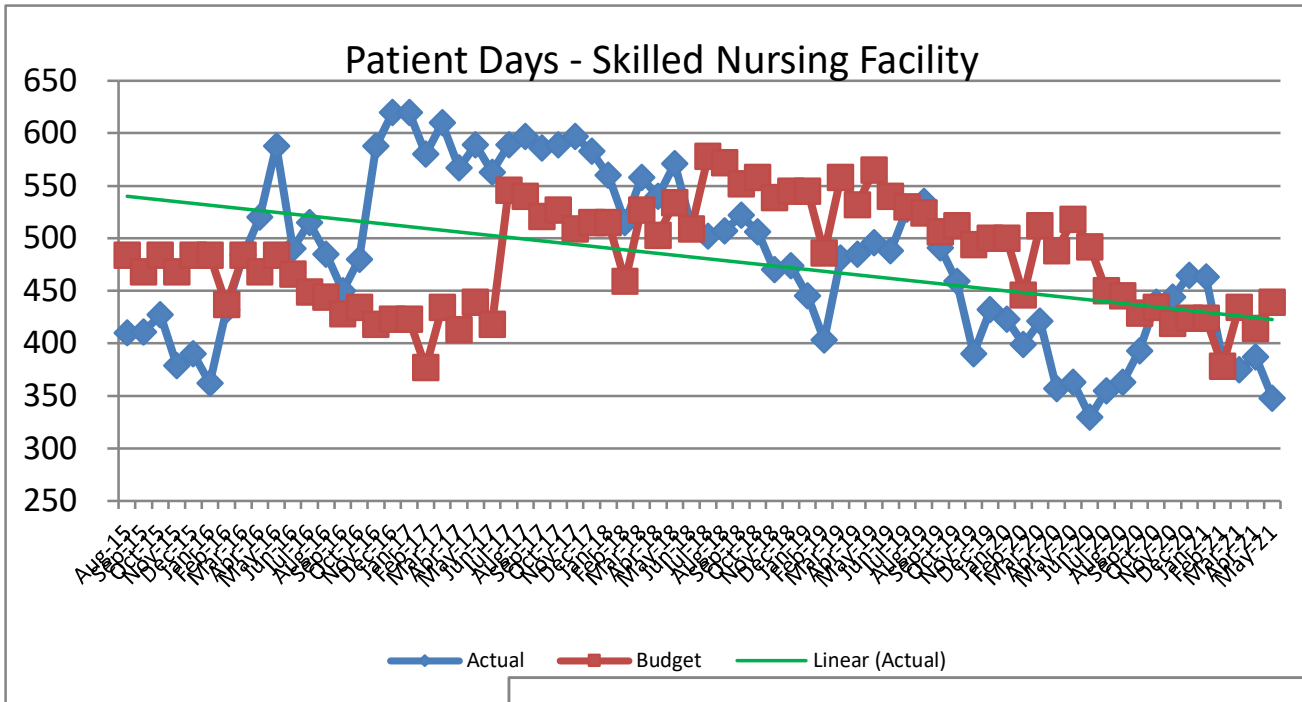


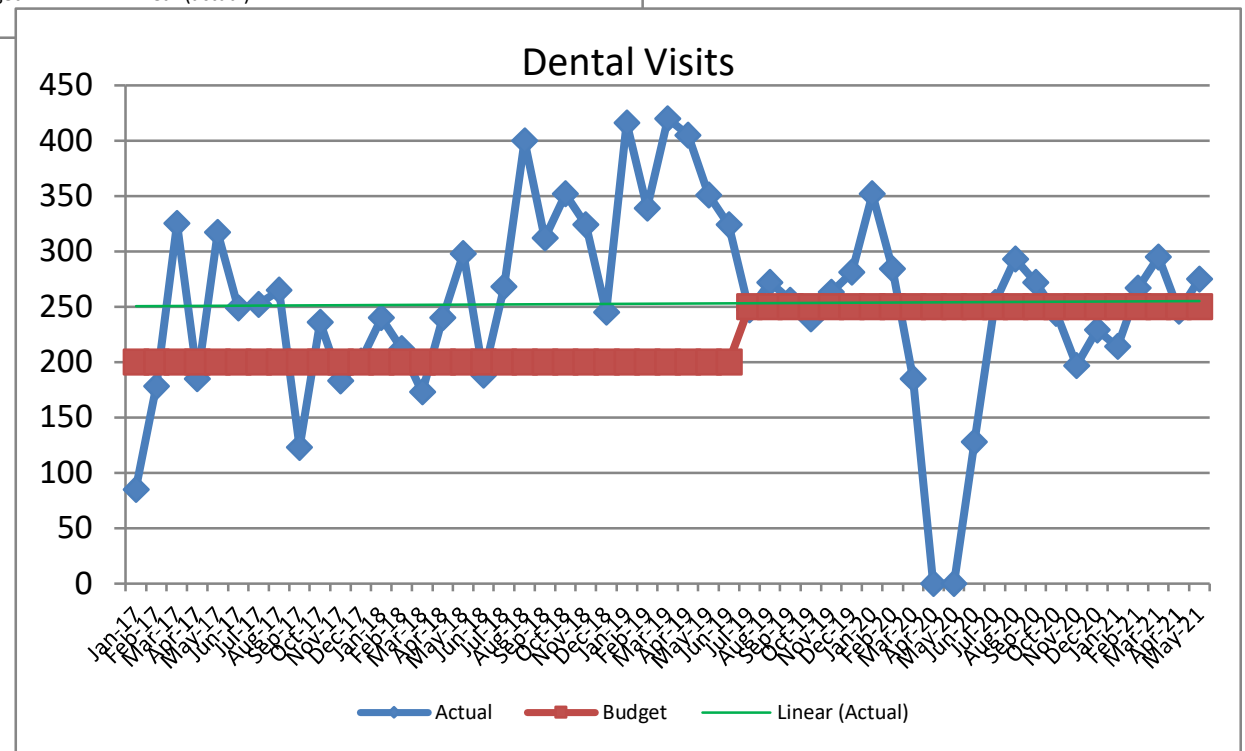
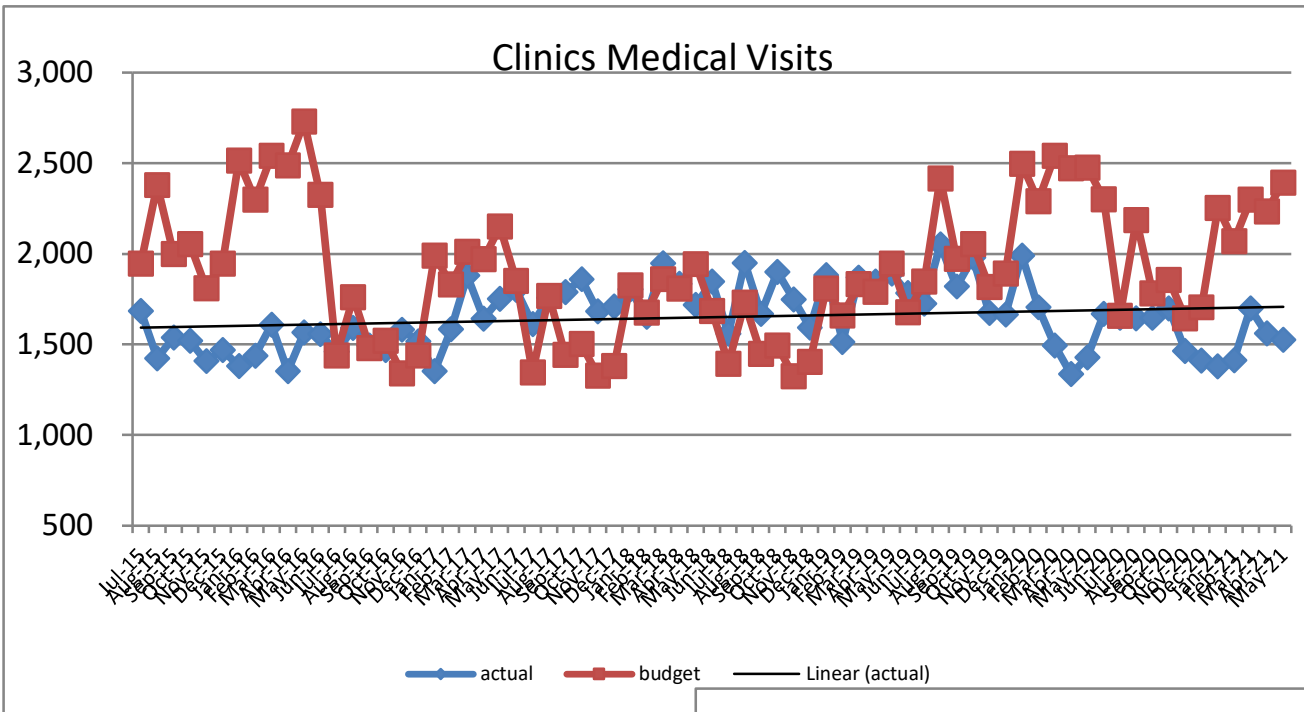
Patient Days - Acute

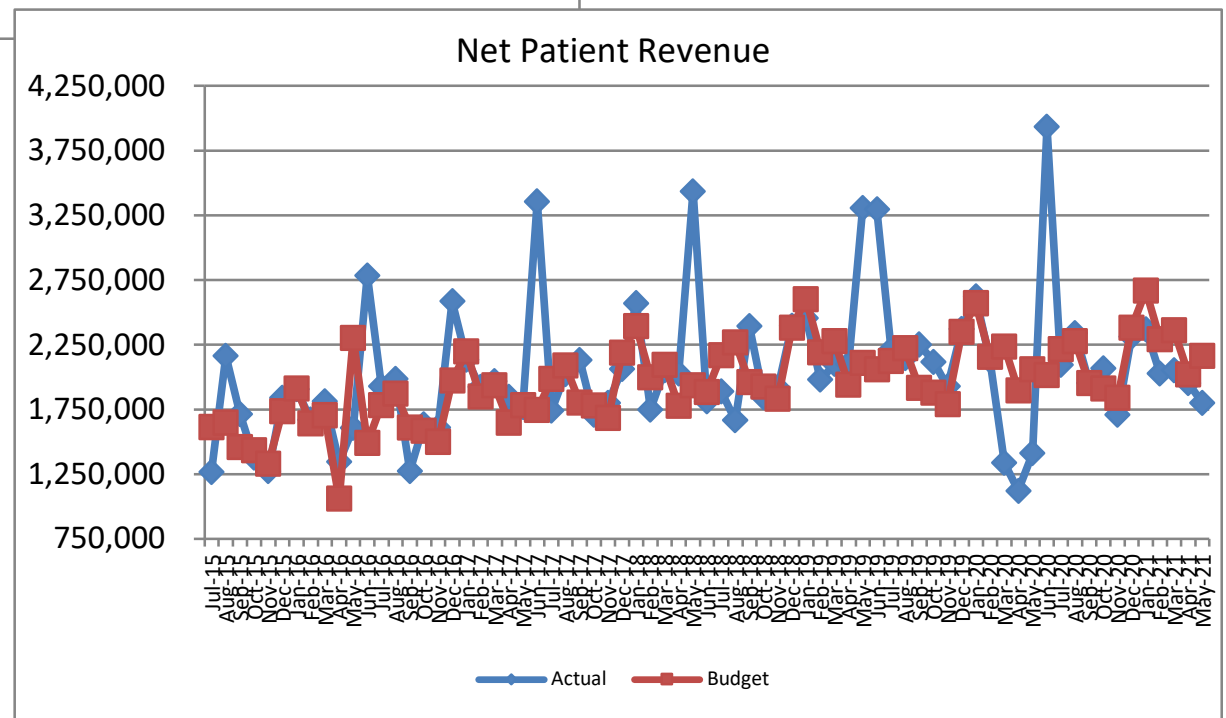
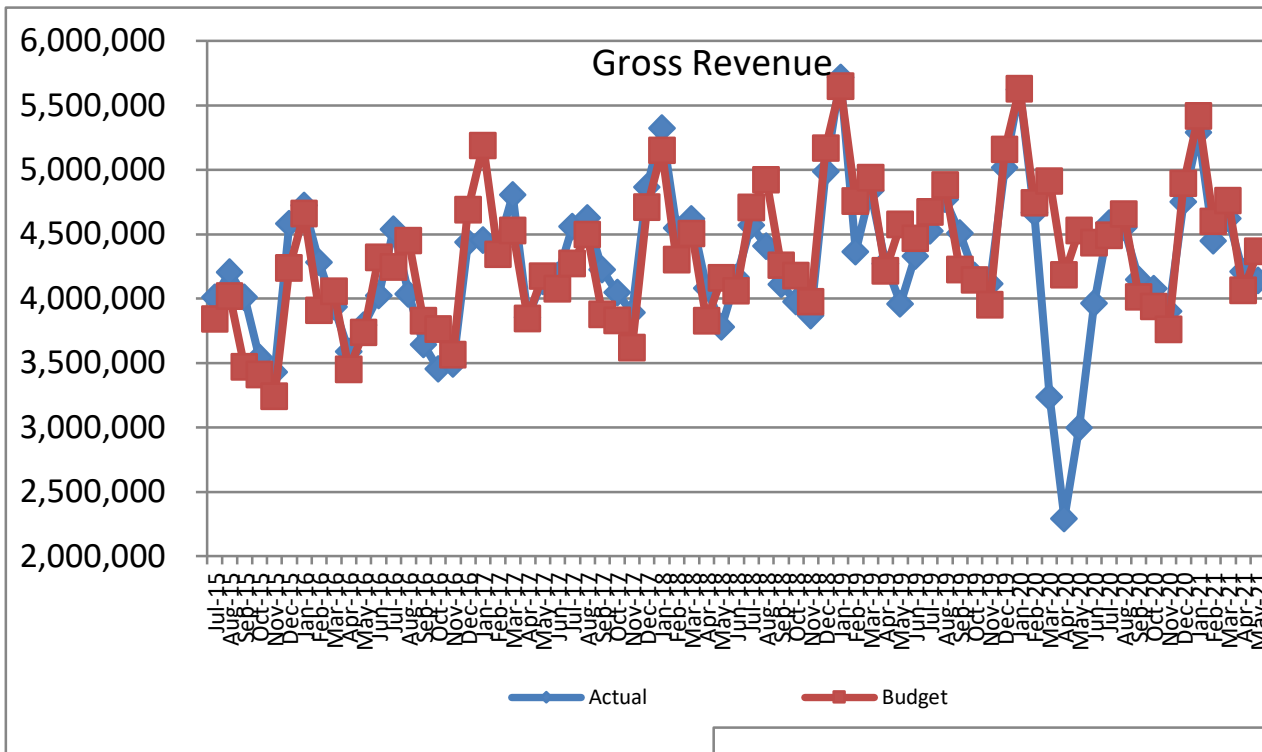


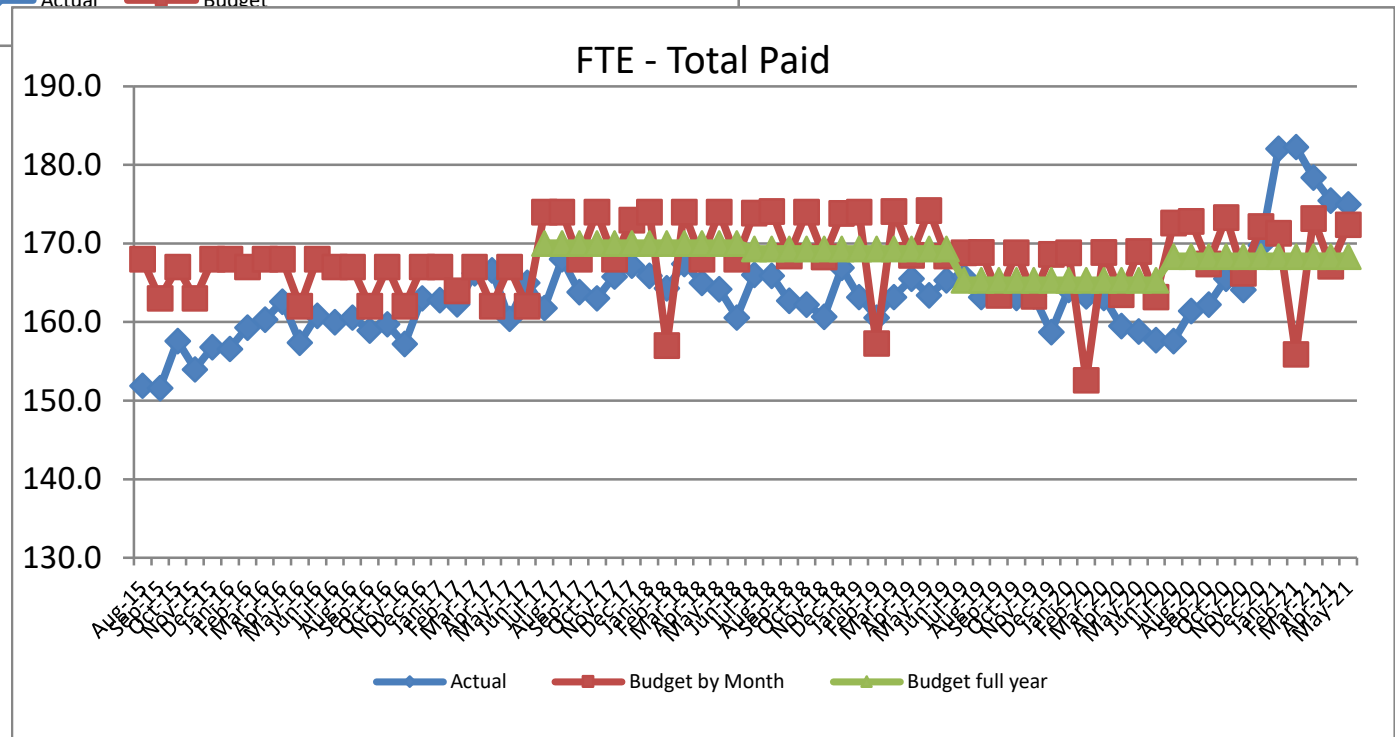
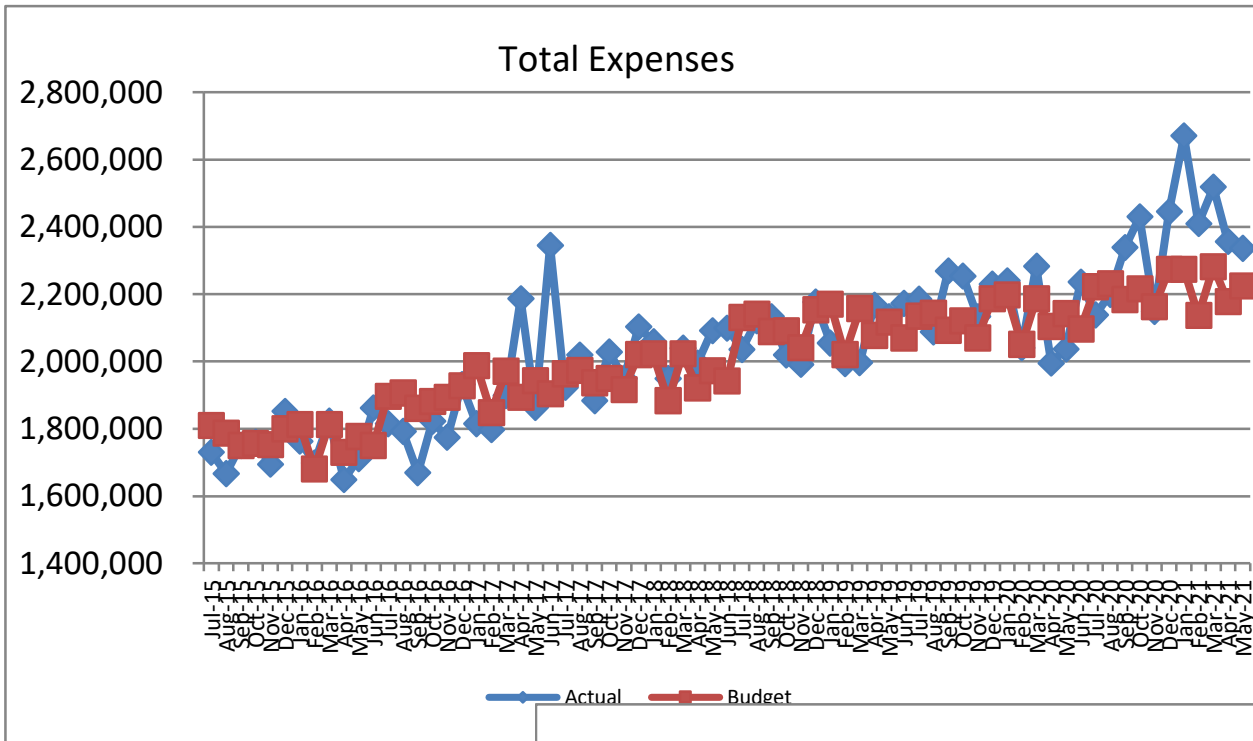
Patient Days - Swing

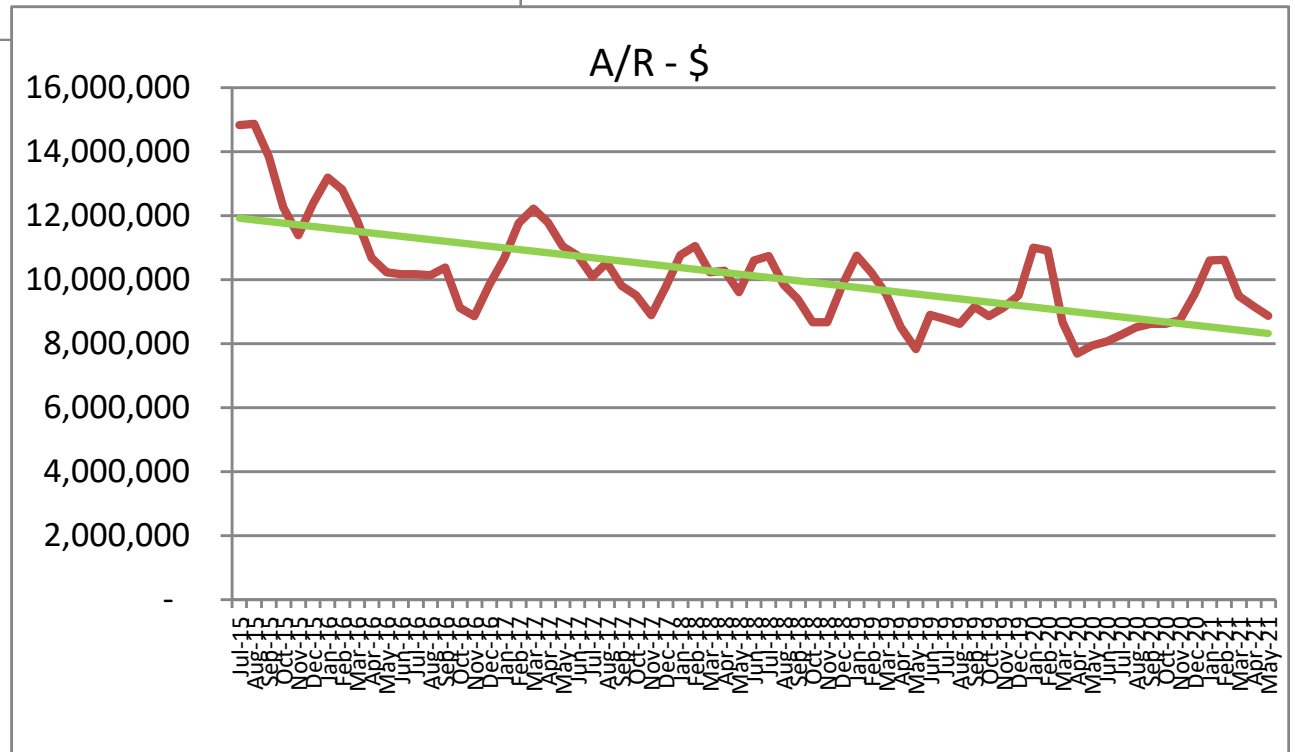
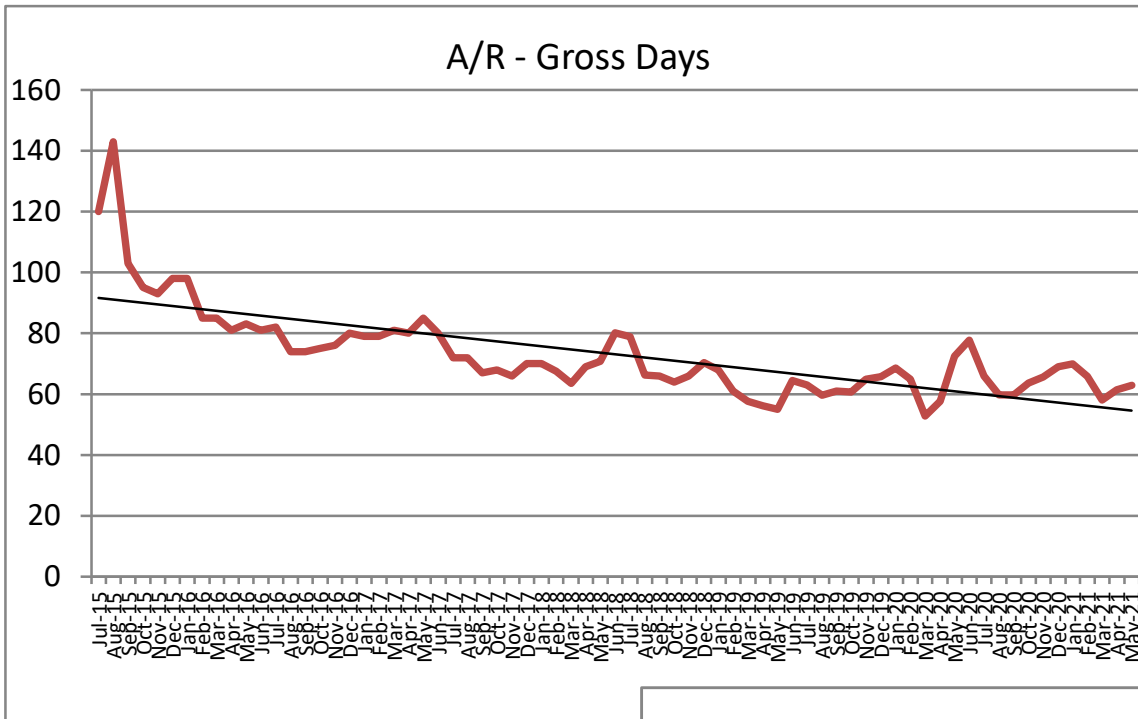














May 2021 Financial Results

For the month . . .

Total Patient Revenue for May 2021 was \$4,142,693. This was 5.2% or \$226,220 lower than budget. Inpatient revenue was 42.5% more than budget for the month. Outpatient revenue was 7.4% lower than budget. Clinic revenue was 22.4% under budget. ER revenue was 4.2% less than budget. Skilled Nursing Facility revenue was 18.9% lower than budget.

Total Revenue deductions of \$2,342,890 were 6.2% more than budget.

Total Operating Revenue of \$1,894,293 was 16.3% under our budgeted amount.

Total Expenses of \$2,336,424 were 5.0% more than budget. Salaries and Benefits were 6.2% more than budget.

Our Operating Cash and Investments total \$37,497,257 as of the end of month. Total days cash on hand as of the end of May 2021 were 504. Cash collections - \$1,815,074- were strong for the month.

Key Statistics

Acute patient days of 81 were 1% over our budgeted number. We had no Swing Patient days for the month. Skilled Nursing Facility days of 348 were 21% under budget – our Average Daily Census was 11.2. ER Visits of 802 were 0.4% fewer than budget. Clinics Medical visits continue significantly under budget. Dental visits of 275 were 10% more than budget for the month.

FTE (Full Time Equivalents) for the month were 175.0.

Year-to-Date (through 11 months of our Fiscal year)

Total patient revenue is 0.5% lower than the budgeted

Total Operating Revenue is 7.4% lower than budget

Total Expenses are 6.6% more than budget

Our Surplus of \$17,142 is \$3,388,248 under budget

Bear Valley Community Healthcare District
Financial Statements May 31, 2021

Financial Highlights—Hospital
STATEMENT OF OPERATIONS

	A	B	C	D	E	F	G	H	I	J
	Current Month					Year-to-Date				
	FY 19/20	FY 20/21		VARIANCE		FY 19/20	FY 20/21		VARIANCE	
	Actual	Actual	Budget	Amount	%	Actual	Actual	Budget	Amount	%
1 Total patient revenue	2,998,449	4,142,693	4,368,913	(226,220)	-5.2%	45,942,275	48,734,320	48,976,082	(241,762)	-0.5%
2 Total revenue deductions	1,588,868	2,342,890	2,206,189	136,701	6.2%	24,296,262	26,058,817	24,894,095	1,164,722	4.7%
3 % Deductions	53%	57%	50%			53%	53%	51%		
4 Net Patient Revenue	1,409,581	1,799,803	2,162,724	(362,921)	-16.8%	21,646,013	22,675,503	24,081,987	(1,406,484)	-5.8%
5 % Net to Gross	47%	43%	50%			47%	47%	49%		
6 Other Revenue	3,783	94,490	99,183	(4,693)	-4.7%	376,494	639,593	1,089,520	(449,927)	-41.3%
7 Total Operating Revenue	1,413,363	1,894,293	2,261,907	(367,614)	-16.3%	22,022,507	23,315,096	25,171,507	(1,856,411)	-7.4%
8 Total Expenses	2,037,082	2,336,424	2,225,080	111,344	5.0%	23,709,011	25,992,234	24,384,035	1,608,199	6.6%
9 % Expenses	68%	56%	51%			52%	53%	50%		
10 Surplus (Loss) from Operations	(623,718)	(442,131)	36,827	(478,958)	1300.6%	(1,686,504)	(2,677,139)	787,472	(3,464,611)	440.0%
11 % Operating margin	-21%	-11%	1%			-4%	-5%	2%		
12 Total Non-operating	2,895,410	280,587	202,538	78,049	38.5%	5,447,792	2,694,280	2,617,918	76,362	2.9%
13 Surplus/(Loss)	2,271,691	(161,544)	239,365	(400,909)	167.5%	3,761,288	17,142	3,405,390	(3,388,248)	99.5%
14 % Total margin	76%	-4%	5%			8%	0%	7%		

BALANCE SHEET

	A	B	C	D	E
	May	May	April		
	FY 19/20	FY 20/21	FY 20/21	VARIANCE	
				Amount	%
15 Gross Accounts Receivables	7,938,183	8,872,869	9,169,968	(297,109)	-3.2%
16 Net Accounts Receivables	2,003,416	2,687,391	2,885,354	(197,963)	-6.9%
17 % Net AR to Gross AR	25%	30%	31%		
18 Days Gross AR	85.6	62.9	61.4	1.5	2.4%
19 Cash Collections	1,422,347	1,815,074	1,897,419	(82,345)	-4.3%
20 Settlements/IGT Transactions	1,339,451	21,055	75,773	(54,718)	-72.2%
21 Stimulus Receipts	3,811,778	-	-	-	#DIV/0!
22 Investments	30,834,716	34,105,746	34,105,746	-	0.0%
23 Cash on hand	2,635,978	3,391,511	3,501,483	(109,972)	-3.1%
24 Total Cash & Invest	33,470,694	37,497,257	37,607,229	(109,972)	-0.3%
Days Cash & Invest	494	504	503	1	0.1%
Total Cash and Investments	33,470,694	37,497,257			
Increase Current Year vs. Prior Year		4,026,563			

Bear Valley Community Healthcare District
Financial Statements May 31, 2021

Statement of Operations

	A	B	C	D	E	F	G	H	I	J
	Current Month					Year-to-Date				
	FY 19/20	FY 20/21		VARIANCE		FY 19/20	FY 20/21		VARIANCE	
	Actual	Actual	Budget	Amount	%	Actual	Actual	Budget	Amount	%
Gross Patient Revenue										
1 Inpatient	104,722	276,670	194,099	82,571	42.5%	1,280,002	2,496,488	1,614,890	881,598	54.6%
2 Outpatient	551,733	806,119	870,412	(64,293)	-7.4%	8,348,738	9,185,182	9,301,142	(115,960)	-1.2%
3 Clinic Revenue	243,802	331,766	427,629	(95,863)	-22.4%	3,770,628	3,446,528	4,048,681	(602,154)	-14.9%
4 Emergency Room	1,936,617	2,572,087	2,684,430	(112,343)	-4.2%	30,411,500	31,637,420	31,932,822	(295,402)	-0.9%
5 Skilled Nursing Facility	161,575	156,051	192,343	(36,292)	-18.9%	2,131,406	1,968,702	2,078,547	(109,845)	-5.3%
6 Total patient revenue	2,998,449	4,142,693	4,368,913	(226,220)	-5.2%	45,942,275	48,734,320	48,976,082	(241,762)	-0.5%
Revenue Deductions										
7 Contractual Allow	1,350,419	2,034,429	1,948,877	85,552	4.4%	22,466,150	23,831,740	21,989,593	1,842,147	8.4%
8 Contractual Allow PY	-	(150,000)	-	(150,000)	#DIV/0!	(1,724,101)	(1,845,781)	-	(1,845,781)	#DIV/0!
9 Charity Care	10,183	54,986	13,549	41,437	305.8%	152,506	235,077	152,942	82,135	53.7%
10 Administrative	13,469	35,199	6,339	28,860	455.3%	74,618	82,318	71,558	10,760	15.0%
11 Policy Discount	9,672	14,532	15,803	(1,271)	-8.0%	167,543	171,383	178,381	(6,998)	-3.9%
12 Employee Discount	3,175	10,317	4,379	5,938	135.6%	47,782	110,757	49,431	61,326	124.1%
13 Bad Debts	114,878	228,137	217,242	10,895	5.0%	2,183,528	2,493,333	2,452,190	41,143	1.7%
14 Denials	58,918	115,290	-	115,290	#DIV/0!	928,236	979,989	-	979,989	#DIV/0!
15 Total revenue deductions	1,588,868	2,342,890	2,206,189	136,701	6.2%	24,296,262	26,058,817	24,894,095	1,164,722	4.7%
16 Net Patient Revenue	1,409,581	1,799,803	2,162,724	(362,921)	-16.8%	21,646,013	22,675,503	24,081,987	(1,406,484)	-5.8%
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	3,783	94,490	99,183	(4,693)	-4.7%	376,494	639,593	1,089,520	(449,927)	-41.3%
18 Total Operating Revenue	1,413,363	1,894,293	2,261,907	(367,614)	-16.3%	22,022,507	23,315,096	25,171,507	(1,856,411)	-7.4%
Expenses										
19 Salaries	847,082	919,624	895,734	23,890	2.7%	9,956,521	11,130,298	9,685,664	1,444,634	14.9%
20 Employee Benefits	302,434	347,628	324,243	23,385	7.2%	3,368,044	3,610,509	3,490,455	120,054	3.4%
21 Registry	-	28,200	-	28,200	#DIV/0!	8,250	325,535	-	325,535	#DIV/0!
22 Salaries and Benefits	1,149,516	1,295,452	1,219,977	75,475	6.2%	13,332,815	15,066,343	13,176,119	1,890,224	14.3%
23 Professional fees	158,274	160,653	182,095	(21,442)	-11.8%	1,883,358	1,801,819	2,043,521	(241,702)	-11.8%
24 Supplies	149,611	139,834	164,469	(24,635)	-15.0%	1,629,730	2,006,432	1,785,645	220,787	12.4%
25 Utilities	32,589	48,851	40,715	8,136	20.0%	442,696	416,902	507,350	(90,448)	-17.8%
26 Repairs and Maintenance	38,303	68,127	50,283	17,844	35.5%	658,527	537,135	551,138	(14,003)	-2.5%
27 Purchased Services	311,541	380,111	354,147	25,964	7.3%	3,506,604	3,849,898	3,965,580	(115,682)	-2.9%
28 Insurance	31,990	37,850	37,371	479	1.3%	368,499	412,781	411,081	1,700	0.4%
29 Depreciation	88,025	118,446	80,156	38,290	47.8%	930,718	1,058,391	881,716	176,675	20.0%
30 Rental and Leases	27,656	33,742	27,067	6,675	24.7%	168,419	223,771	302,921	(79,150)	-26.1%
32 Dues and Subscriptions	5,348	1,218	6,318	(5,100)	-80.7%	64,862	73,078	69,498	3,580	5.2%
33 Other Expense	44,229	52,142	62,482	(10,340)	-16.5%	722,783	545,683	689,466	(143,783)	-20.9%
34 Total Expenses	2,037,082	2,336,424	2,225,080	111,344	5.0%	23,709,011	25,992,234	24,384,035	1,608,199	6.6%
35 Surplus (Loss) from Operations	(623,718)	(442,131)	36,827	(478,958)	1300.6%	(1,686,504)	(2,677,139)	787,472	(3,464,611)	440.0%
Non-Operating Income										
36 Tax Revenue	201,917	283,397	204,167	79,230	38.8%	2,221,087	2,325,067	2,245,837	79,230	3.5%
38 Other non-operating	2,700,020	4,220	5,750	(1,530)	-26.6%	2,867,823	271,657	63,250	208,407	329.5%
Interest Income	768	(29)	100	(129)	-128.7%	441,364	179,181	391,100	(211,919)	-54.2%
Interest Expense	(7,295)	(7,002)	(7,479)	477	-6.4%	(82,482)	(81,625)	(82,269)	644	-0.8%
IGT Expense	-	-	-	-	#DIV/0!	-	-	-	-	#DIV/0!
39 Total Non-operating	2,895,410	280,587	202,538	78,049	38.5%	5,447,792	2,694,280	2,617,918	76,362	2.9%
40 Surplus/(Loss)	2,271,691	(161,544)	239,365	(400,909)	167.5%	3,761,285	17,142	3,405,390	(3,388,248)	99.8%

**Bear Valley Community Healthcare District
Financial Statements**

Current Year Trending Statement of Operations

A Statement of Operations—CURRENT YEAR 2021

	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	215,249	249,801	164,188	244,798	102,379	186,971	343,818	190,620	296,734	225,258	276,670		2,496,488
2	Outpatient	759,975	752,158	750,715	801,463	624,126	972,010	1,087,803	899,363	912,932	818,519	806,119		9,185,182
3	Clinic	329,815	343,539	335,783	317,785	289,299	284,301	267,256	293,223	334,126	319,634	331,766		3,446,528
4	Emergency Room	3,121,968	3,044,910	2,722,837	2,519,139	2,688,725	3,102,541	3,386,219	2,891,851	2,912,572	2,674,571	2,572,087		31,637,420
5	Skilled Nursing Facility	158,091	161,978	175,237	194,783	198,304	206,578	205,851	171,894	167,907	172,028	156,051		1,968,702
6	Total patient revenue	4,585,098	4,552,387	4,148,760	4,077,968	3,902,835	4,752,401	5,290,947	4,446,951	4,624,271	4,210,010	4,142,693	-	48,734,320
Revenue Deductions														
C/A	0.49	0.48	0.50	0.48	0.46	0.45	0.51	0.47	0.48	0.55	0.49	#DIV/0!	0.49	
7	Contractual Allow	2,260,273	2,201,802	2,080,903	1,963,358	1,796,607	2,151,875	2,716,791	2,085,989	2,216,245	2,323,468	2,034,429		23,831,740
8	Contractual Allow PY	(100,000)	(396,823)	(150,000)	(236,579)	(150,000)	(150,000)	-	(173,542)	(188,836)	(150,000)	(150,000)		(1,845,781)
9	Charity Care	25,028	30,141	26,357	11,798	12,356	1,748	15,701	13,627	36,620	6,715	54,986		235,077
10	Administrative	(3,946)	9,457	8,699	(1,853)	1,439	5,530	3,610	9,162	13,140	1,881	35,199		82,318
11	Policy Discount	17,491	11,862	11,554	16,004	11,637	15,336	20,719	16,334	18,301	17,613	14,532		171,383
12	Employee Discount	7,661	5,909	6,791	1,305	8,195	5,918	15,294	19,553	13,458	16,357	10,317		110,757
13	Bad Debts	256,673	240,011	132,574	178,790	389,713	334,477	63,899	333,629	360,402	(24,971)	228,137		2,493,333
14	Denials	29,487	109,385	76,018	77,928	125,677	76,754	87,739	113,837	102,557	65,318	115,290		979,989
15	Total revenue deductions	2,492,666	2,211,743	2,192,896	2,010,751	2,195,625	2,441,637	2,923,753	2,418,589	2,571,886	2,256,380	2,342,890	-	26,058,817
	0.54	0.49	0.53	0.49	0.56	0.51	0.55	0.54	0.56	0.54	0.57	#DIV/0!		
16	Net Patient Revenue	2,092,432	2,340,643	1,955,865	2,067,217	1,707,209	2,310,763	2,367,194	2,028,362	2,052,385	1,953,630	1,799,803	-	22,675,503
	net / tot pat rev	45.6%	51.4%	47.1%	50.7%	43.7%	48.6%	44.7%	45.6%	44.4%	46.4%	43.4%	#DIV/0!	46.5%
17	Other Revenue	5,722	137,886	44,163	27,253	74,691	67,363	26,941	81,009	28,724	51,351	94,490		639,593
18	Total Operating Revenue	2,098,154	2,478,529	2,000,027	2,094,469	1,781,900	2,378,127	2,394,135	2,109,371	2,081,109	2,004,981	1,894,293	-	23,315,096
Expenses														
19	Salaries	925,406	956,216	902,333	1,122,909	975,875	1,020,963	1,184,708	1,011,456	1,122,861	987,947	919,624		11,130,298
20	Employee Benefits	320,367	271,080	397,159	311,730	283,861	350,869	308,840	367,581	316,634	334,760	347,628		3,610,509
21	Registry	-	11,553	50,270	31,930	5,425	6,696	40,390	34,600	89,742	26,730	28,200		325,535
22	Salaries and Benefits	1,245,773	1,238,850	1,349,762	1,466,569	1,265,160	1,378,528	1,533,939	1,413,636	1,529,237	1,349,437	1,295,452	-	15,066,343
23	Professional fees	165,124	162,933	161,100	163,056	157,606	178,669	175,476	145,510	169,184	162,508	160,653		1,801,819
24	Supplies	108,268	154,942	169,080	177,583	128,781	237,684	340,533	238,374	181,273	130,080	139,834		2,006,432
25	Utilities	33,935	34,590	34,797	33,317	32,071	34,994	39,020	41,070	41,650	42,606	48,851		416,902
26	Repairs and Maintenance	57,780	48,999	46,434	61,619	44,387	50,897	35,404	42,847	34,920	45,723	68,127		537,135
27	Purchased Services	332,918	353,033	373,584	337,780	310,335	349,372	348,295	320,730	358,181	385,560	380,111		3,849,898
28	Insurance	60,863	11,090	37,712	37,843	37,712	37,712	37,712	38,863	37,712	37,712	37,850		412,781
29	Depreciation	91,295	91,295	91,295	91,295	91,295	91,295	91,295	91,295	91,295	118,446			1,058,391
30	Rental and Leases	19,149	16,590	16,141	17,078	16,455	16,655	24,236	18,371	19,804	25,551	33,742		223,771
32	Dues and Subscriptions	7,269	6,659	8,205	5,676	3,874	5,231	8,805	5,981	6,511	13,651	1,218		73,078
33	Other Expense.	16,461	80,579	51,138	38,177	60,309	64,228	36,115	52,636	48,488	45,411	52,142		545,683
34	Total Expenses	2,138,836	2,199,560	2,339,247	2,429,993	2,147,984	2,445,264	2,670,828	2,409,313	2,518,255	2,356,530	2,336,424	-	25,992,234
Surplus (Loss) from Operations														
35		(40,683)	278,969	(339,220)	(335,524)	(366,084)	(67,137)	(276,693)	(299,942)	(437,146)	(351,549)	(442,131)	-	(2,677,139)
Non-Operating Income														
37	Tax Revenue	204,167	204,167	204,167	204,167	204,167	204,167	204,167	204,167	204,167	283,397			2,325,067
38	Other non-operating	(1,680)	4,102	17,020	1,270	20	10,020	231,420	320	(2,262)	7,207	4,220		271,657
	Interest Income	214	726	73,547	957	1,156	55,390	918	1,319	43,279	1,704	(29)		179,181
	Interest Expense	(7,381)	(7,340)	(7,302)	(7,296)	(7,645)	(225)	(15,119)	(7,691)	(7,394)	(7,230)	(7,002)		(81,625)
	IGT Expense	-	-	-	-	-	-	-	-	-	-	-		-
39	Total Non-operating	195,320	201,655	287,432	199,098	197,698	269,352	421,386	198,115	237,790	205,848	280,587	-	2,694,280
40	Surplus/(Loss)	154,638	480,624	(51,788)	(136,426)	(168,386)	202,215	144,693	(101,827)	(199,355)	(145,701)	(161,544)	-	17,142

2020-2021 Actual BS

BALANCE SHEET

PY Includes final AJES

BALANCE SHEET												PY
PY Includes final AJES												
	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June
ASSETS:												
Current Assets												
Cash and Cash Equivalents (Includes CD's)	3,615,780	3,808,255	3,576,588	1,705,263	2,351,238	2,691,025	2,658,467	2,222,422	3,975,199	3,501,483	3,391,511	3,981,146
Gross Patient Accounts Receivable	8,283,966	8,504,189	8,619,147	8,834,307	8,737,594	9,553,454	10,600,810	10,612,091	9,489,172	9,168,800	8,871,435	8,079,622
Less: Reserves for Allowances & Bad Debt	5,780,164	5,794,514	5,864,331	6,010,743	5,967,168	6,567,531	7,007,101	7,024,584	6,485,756	6,283,446	6,184,045	5,761,024
Net Patient Accounts Receivable	2,503,802	2,709,676	2,754,817	2,823,564	2,770,426	2,985,923	3,593,708	3,587,506	3,003,416	2,885,354	2,687,391	2,318,898
Tax Revenue Receivable	2,450,000	2,450,000	2,450,000	2,450,000	1,993,217	1,082,860	1,013,280	964,596	915,625	65,099	0	52,606
Other Receivables	-871,228	-858,343	-14,296	309,602	-316,447	79,061	-8,914	-2,722	-1,315	555,020	574,952	87,734
Inventories	195,677	206,729	222,028	237,616	244,545	265,070	283,177	285,218	283,129	288,202	272,863	178,033
Prepaid Expenses	513,673	474,367	511,153	549,299	505,105	447,001	461,013	468,360	382,841	357,258	373,460	313,818
Due From Third Party Payers	0	0										
Due From Affiliates/Related Organizations	0	0										
Other Current Assets	0	0										
Total Current Assets	8,407,704	8,790,683	9,500,289	8,075,343	7,548,084	7,550,941	8,000,732	7,525,381	8,558,895	7,652,416	7,300,177	6,932,236
Assets Whose Use is Limited												
Investments	33,942,664	33,942,664	34,014,745	34,014,745	34,014,745	34,068,527	34,068,527	34,068,527	34,105,746	34,105,746	34,105,746	33,942,664
Other Limited Use Assets	144,375	144,375	144,375	144,375	144,375	144,375	144,375	144,375	144,375	144,375	144,375	144,375
Total Limited Use Assets	34,087,039	34,087,039	34,159,120	34,159,120	34,159,120	34,212,902	34,212,902	34,212,902	34,250,121	34,250,121	34,250,121	34,087,039
Property, Plant, and Equipment												
Land and Land Improvements	3,063,051	3,063,051	3,061,292	3,061,292	3,061,292	3,061,292	3,061,292	3,061,292	3,061,292	3,061,292	3,061,292	3,061,292
Building and Building Improvements	10,157,771	10,157,771	10,157,771	10,157,771	10,157,771	10,157,771	10,157,771	10,157,771	10,157,771	10,182,628	10,194,722	10,157,771
Equipment	13,039,965	13,118,413	13,390,453	13,624,695	13,659,968	13,706,167	13,735,555	13,773,142	13,833,196	13,867,084	13,867,084	12,998,413
Construction In Progress	299,400	350,846	378,326	418,059	418,059	480,237	543,606	548,960	560,682	501,624	514,961	216,365
Capitalized Interest												
Gross Property, Plant, and Equipment	26,560,187	26,690,082	26,987,842	27,261,817	27,297,090	27,405,467	27,498,224	27,541,165	27,612,941	27,612,628	27,638,059	26,433,841
Less: Accumulated Depreciation	15,717,377	15,808,672	15,899,967	15,991,262	16,082,557	16,173,852	16,265,147	16,356,442	16,447,737	16,566,028	16,684,474	15,626,082
Net Property, Plant, and Equipment	10,842,809	10,881,409	11,087,874	11,270,555	11,214,533	11,231,615	11,233,077	11,184,723	11,165,204	11,046,600	10,953,585	10,807,758
TOTAL UNRESTRICTED ASSETS	53,337,552	53,759,131	54,747,283	53,505,018	52,921,737	52,995,458	53,446,710	52,923,005	53,974,220	52,949,137	52,503,883	51,827,033
Restricted Assets	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL ASSETS	53,337,552	53,759,131	54,747,283	53,505,018	52,921,737	52,995,458	53,446,710	52,923,005	53,974,220	52,949,137	52,503,883	51,827,033

2020-2021 Actual BS

BALANCE SHEET

PY Includes final AJES

LIABILITIES:

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	PY June
Current Liabilities												
Accounts Payable	996,145	982,173	1,175,157	961,118	814,623	894,939	916,758	978,179	816,415	721,634	761,421	1,099,470
Notes and Loans Payable												
Accrued Payroll	1,038,708	1,113,869	1,260,632	748,959	817,961	958,794	1,211,573	1,054,537	1,132,002	667,664	670,279	905,115
Patient Refunds Payable												
Due to Third Party Payers (Settlements)	7,832,693	7,909,286	7,963,471	7,780,215	7,639,334	7,578,242	7,799,361	7,669,863	9,201,540	9,078,232	8,949,287	7,917,421
Advances From Third Party Payers												
Current Portion of Def Rev - Txs,	2,245,833	2,041,666	1,837,499	1,633,332	1,429,165	1,224,998	1,020,831	816,664	612,497	408,330	204,163	0
Current Portion - LT Debt	40,000	40,000	40,000	40,000	40,000	40,000	40,000	40,000	40,000	40,000	40,000	40,000
Current Portion of AB915												
Other Current Liabilities (Accrued Interest & Accrued Other)	14,801	22,141	29,443	36,739	44,384	0	15,009	22,412	29,772	36,983	43,984	7,420
Total Current Liabilities	12,168,180	12,109,135	12,306,202	11,200,362	10,785,467	10,696,973	11,003,533	10,581,655	11,832,226	10,952,843	10,669,134	9,969,425
Long Term Debt												
USDA Loan	2,815,000	2,815,000	2,815,000	2,815,000	2,815,000	2,775,000	2,775,000	2,775,000	2,775,000	2,775,000	2,775,000	2,815,000
Leases Payable	0	0	0	0	0	0	0	0	0	0	0	0
Less: Current Portion Of Long Term Debt	0	0	0	0	0	0	0	0	0	0	0	0
Total Long Term Debt (Net of Current)	2,815,000	2,815,000	2,815,000	2,815,000	2,815,000	2,775,000	2,775,000	2,775,000	2,775,000	2,775,000	2,775,000	2,815,000
Other Long Term Liabilities												
Deferred Revenue	0	0	0	0	0	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0	0	0	0	0	0
Total Other Long Term Liabilities	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL LIABILITIES	14,983,180	14,924,135	15,121,202	14,015,362	13,600,467	13,471,973	13,778,533	13,356,655	14,607,226	13,727,843	13,444,134	12,784,425
Fund Balance												
Unrestricted Fund Balance	38,199,734	38,199,734	39,042,608	39,042,608	39,042,608	39,042,608	39,042,608	39,042,608	39,042,608	39,042,608	39,042,608	32,182,080
Temporarily Restricted Fund Balance	0	0				0						
Equity Transfer from FRHG	0	0				0						
Net Revenue/(Expenses)	154,638	635,262	583,474	447,048	278,662	480,877	625,570	523,742	324,387	178,686	17,142	6,860,528
TOTAL FUND BALANCE	38,354,372	38,834,996	39,626,081	39,489,656	39,321,270	39,523,485	39,668,178	39,566,350	39,366,995	39,221,293	39,059,749	39,042,608
TOTAL LIABILITIES & FUND BALANCE	53,337,552	53,759,131	54,747,283	53,505,018	52,921,737	52,995,458	53,446,710	52,923,005	53,974,220	52,949,137	52,503,883	51,827,033

Units of Service For the period ending May 31, 2021												
31						335						
Current Month						Bear Valley Community Hospital		Year-To-Date				
May-21		May-20 Actual	Actual -Budget		Act.-Act. Var %		May-21		May-20 Actual	Actual -Budget		Act.-Act. Var %
Actual	Budget		Variance	Var %			Actual	Budget		Variance	Var %	
81	80	32	1	1.3%	153.1%	Med Surg Patient Days	626	579	325	47	8.1%	92.6%
-	19	9	(19)	0.0%	-100.0%	Swing Patient Days	210	185	162	25	13.5%	29.6%
348	439	496	(91)	-20.7%	-29.8%	SNF Patient Days	4,417	4,690	5,291	(273)	-5.8%	-16.5%
429	538	537	(109)	-20.3%	-20.1%	Total Patient Days	5,253	5,454	5,778	(201)	-3.7%	-9.1%
21	17	12	4	23.5%	75.0%	Acute Admissions	158	163	127	(5)	-3.1%	24.4%
23	17	13	6	35.3%	76.9%	Acute Discharges	158	163	127	(5)	-3.1%	24.4%
3.5	4.7	2.5	0.2	3.5%	43.1%	Acute Average Length of Stay	4.0	3.6	2.6	(9.4)	-264.6%	54.8%
2.6	2.6	1.03	0.03	1.3%	153.1%	Acute Average Daily Census	1.9	2	1.0	0.1	8.1%	92.6%
11.2	14.8	16.3	(3.5)	-24.0%	-31.1%	SNF/Swing Avg Daily Census	13.8	15	16.3	(0.7)	-5.1%	-15.1%
13.8	17.4	17.3	(3.5)	-20.3%	-20.1%	Total Avg. Daily Census	15.7	16	17.2	(0.6)	-3.7%	-9.1%
31%	39%	38%	-8%	-20.3%	-20.1%	% Occupancy	35%	36%	38%	-1%	-3.7%	-9.1%
7	12	10	(5)	-41.7%	-30.0%	Emergency Room Admitted	63	132	109	(69)	-52.3%	-42.2%
795	793	10,822	2	0.3%	-92.7%	Emergency Room Discharged	9,521	9,751	10,822	(230)	-2.4%	-12.0%
802	805	10,832	(3)	-0.4%	-92.6%	Emergency Room Total	9,584	9,883	10,931	(299)	-3.0%	-12.3%
26	26	349	(0)	-0.4%	-92.6%	ER visits per calendar day	29	30	33	(1)	-3.0%	-12.3%
33%	71%	83%	-80%	-113.3%	-60.0%	% Admits from ER	40%	81%	86%	7%	8.9%	-53.5%
-	-	-	-	0.0%	#DIV/0!	Surgical Procedures I/P	1	-	-	1	0.0%	#DIV/0!
3	8	3	(5)	-62.5%	0.0%	Surgical Procedures O/P	54	95	127	(41)	-43.2%	-57.5%
3	8	3	(5)	-62.5%	0.0%	TOTAL Procedures	55	95	127	(40)	-42.1%	-56.7%
235	774	569	(539)	-69.6%	-58.7%	Surgical Minutes Total	4,071	8,364	9,038	(4,293)	-51.3%	-55.0%

Units of Service
For the period ending May 31, 2021

Bear Valley Community Hospital												
Current Month						Year-To-Date						
May-21 Actual	Budget	May-20 Actual	Actual -Budget Variance	Var %	Act.-Act. Var %		May-21 Actual	Budget	May-20 Actual	Actual -Budget Variance	Var %	Act.-Act. Var %
5,877	7,114	6,524	(1,237)	-17.4%	-9.9%	Lab Procedures	67,777	70,067	9,841	(2,290)	-3.3%	588.7%
663	856	780	(193)	-22.5%	-15.0%	X-Ray Procedures	8,243	9,923	8,825	(1,680)	-16.9%	-6.6%
308	267	199	41	15.4%	54.8%	C.T. Scan Procedures	3,725	3,422	3,076	303	8.9%	21.1%
181	232	214	(51)	-22.0%	-15.4%	Ultrasound Procedures	1,986	2,182	2,413	(196)	-9.0%	-17.7%
52	54	45	(2)	-3.7%	15.6%	Mammography Procedures	475	594	542	(119)	-20.0%	-12.4%
304	335	263	(31)	-9.3%	15.6%	EKG Procedures	3,046	3,319	3,140	(273)	-8.2%	-3.0%
58	116	169	(58)	-50.0%	-65.7%	Respiratory Procedures	911	1,267	1,285	(356)	-28.1%	-29.1%
1,479	1,618	1,736	(139)	-8.6%	-14.8%	Physical Therapy Procedures	15,873	16,732	16,711	(859)	-5.1%	-5.0%
1,525	2,393	1,892	(868)	-36.3%	-19.4%	Primary Care Clinic Visits	17,079	22,074	19,421	(4,995)	-22.6%	-12.1%
275	250	351	25	10.0%	-21.7%	Specialty Clinic Visits	2,786	2,750	3,832	36	1.3%	-27.3%
1,800	2,643	2,243	(843)	-31.9%	-19.8%	Clinic	19,865	24,824	23,253	(4,959)	-20.0%	-14.6%
69	102	86	(32)	-31.9%	-19.8%	Clinic visits per work day	109	136	128	(27)	-20.0%	-14.6%
13.2%	19.00%	21.70%	-5.80%	-30.53%	-39.17%	% Medicare Revenue	15.37%	19.00%	18.66%	-3.63%	-19.09%	-17.63%
39.50%	37.00%	42.00%	2.50%	6.76%	-5.95%	% Medi-Cal Revenue	35.85%	37.00%	37.47%	-1.15%	-3.10%	-4.32%
43.70%	39.00%	33.90%	4.70%	12.05%	28.91%	% Insurance Revenue	43.28%	39.00%	39.07%	4.28%	10.98%	10.77%
3.60%	5.00%	2.40%	-1.40%	-28.00%	50.00%	% Self-Pay Revenue	5.49%	5.00%	4.79%	0.49%	9.82%	14.61%
155.3	156.0	143.8	(0.7)	-0.5%	8.0%	Productive FTE's	150.11	153.5	143.1	(3.4)	-2.2%	4.9%
175.0	172.4	163.7	2.6	1.5%	6.9%	Total FTE's	170.35	169.5	163.7	0.9	0.5%	4.1%



CFO REPORT for

July 2021 Finance Committee and Board Meetings

Critical Access Hospital (CAH) Status

Here is some summary information, provided after a recent webinar, from John Waltco of QHR Health regarding CAH status

Compare/Contrast to PPS Hospital

Description	CAH	PPS Hospital	Comments
Costs for treating Medicare Patients	500,000	500,000	From Previous Slide. Assumption here is that same services provided by a CAH and hospital subject to PPS with like cost structure
Gross Reimbursement Due to Provider	500,000	400,000	See Note 1 and Note 2 below
Medicare Patient Co-Payments	400,000	80,000	Co Payment under Outpatient PPS is 20% of APC Reimbursement Amount
Medicare Program Payment to CAH	100,000	320,000	Net reimbursement/payment to providers by the Medicare Program

Note 1: Medicare Costs as determined through Medicare Cost Report equals reimbursement due to CAH

Note 2: Hospitals that are not CAH are reimbursed under the Outpatient Prospective Payment System. Under OPSS, Operating Room Procedures are reimbursed a fixed payment amount, called an APC. APCs vary depending upon what type of procedure is performed

Take Away: Patients that receive services at a CAH are subjected to higher co payment than patients that go to hospital that is not a CAH. Depending on location, many Medicare patients may have supplemental insurance policies which cover co-payments. Medicare patient might qualify for Medicaid who will reimburse the CAH / hospital for unpaid Medicare co-payment. Failing that the Medicare patient is obligated to pay CAH a much higher co-payment amount. Congress should fix this inequity.

During Tuesday's webinar, one of the attendees asked a very good question on Critical Access Hospitals and wanted clarification on a comment I had made to the effect that CAHs did have some downside.

A hospital would convert to a Critical Access Hospital designation to obtain much higher reimbursement from the Medicare program. In addition, some state Medicaid programs also reimburse on a cost basis, yielding additional reimbursements to a CAH. This is due to CAHs being reimbursed by Medicare based on their own operating and capital costs. Hospitals subject to the inpatient and outpatient PPS, on the other hand, are effectively reimbursed on CMS determined reimbursement rates. These reimbursement rates are in effect the “national average cost of services”. How CMS determines these national averages is somewhat complex; but the long and short of it is these rates are based on all of the Medicare Cost Reports filed by all the hospitals in the USA. So, if you’re a CAH, then your costs of operation are greater than the national average.

There are a couple of reasons smaller hospitals have higher costs than larger hospitals. First, as with any smaller business, economies of scale cannot be achieved. Concurrently, due to location, hospitals in rural areas cannot generate the volume of business to compensate for inherent fixed overhead costs incurred by hospitals. A good example here is the OB/GYN services. There are not as many childbearing mothers in many rural areas, compared to large urban centers. Another example is that under state licensure requirements, hospitals must be open 24 hours a day, 7 days a week regardless of expected volumes during the evening and late hours.

One downside I discussed in the presentations was Medicare patient co-insurance requirements. On the revised slide 21, I have attempted to illustrate what can be called a patient co-insurance differential. Generally speaking, whenever a Medicare beneficiary receives a service at a CAH, they would incur a higher co-insurance than if they obtained the same service at a hospital that is not a CAH: a hospital

reimbursed under the Medicare Inpatient and Outpatient Prospective Payment Systems. This occurs because co-insurance is determined differently under the cost-based reimbursement system than under the outpatient prospective payment system. Under the cost-based reimbursement, co-insurance is equal to 20% of the CAH billed price for the services rendered. Under the outpatient prospective payment system, the co-insurance is set at 20% of the gross reimbursement amount. In contrast, beneficiary co-insurance has zero correlation to prices in the non-CAH setting.

As illustrated on slide 21, there is an inequity in treatment of senior citizens who reside in rural areas and obtain services at a nearby CAH. The CAH still receives the reimbursement due to them, which is a greater amount than if the CAH was not a CAH, with services reimbursed under the outpatient prospective payment system; assuming the beneficiary, or Medicare supplemental plan or the state Medicaid program pays the beneficiaries co-insurance obligation. If the co-insurance due to the CAH is not paid, then there is a decrease in payment to the CAH. At a minimum, CAHs must chase the reimbursement a bit more via their billing and collection processes. But more important and critical: beneficiaries do receive the bills and co-insurance obligation, and this can (and has) caused public relations issues at some CAHs.

As illustrated on slide 21, the patient co-insurance is \$400,000 in the CAH and only \$80,000 in the hospital reimbursed under the outpatient prospective payment system. In addition, whenever a Medicare patient does not pay a deductible or co-insurance amount to a hospital or CAH, such amount is claimed on the Medicare cost report and reimbursed at 65%. As such, unpaid copayments are not a 100% loss.

We hope you enjoyed the webinar and encourage you to reach out to learning_institute@qhr.com with additional questions.

John Waltko, CPA

Vice President, Regulatory & Financial Reporting
QHR Health

PPP Loan Forgiveness Status

No new news.

CARES Act funding

Still no clear direction or timeframe for submission of information for CARES Act funding. So, we do not know how much of the money we have received (reserved on Balance Sheet) we can keep and therefore record on our P & L statement.

PPE (Personal Protective Equipment)

In addition to the initial 30 day supply of PPE (Personal Protective Equipment) through the State of California, we obtained a second 30 day supply.