



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, JUNE 09, 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 2:00 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. TRADE SECRETS: Pursuant to Health and Safety Code Section 32106, and Civil Code Section 3426.1

- (1) JWT & Associates Service Agreement

4. 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 6/09/21)

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. 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 (Summary Attached)

(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) Laboratory: Microbiology

(9) Pharmacy

F. Committee Meeting Minutes:

(1) December 03, 2020 Planning & Facilities Committee Meeting Minutes

(2) May 04, 2021 Finance Committee Meeting Minutes

10. OLD BUSINESS*

- None

11. NEW BUSINESS*

- A.** Discussion and Potential Approval of JWT & Associates Service Agreement
- B.** Discussion and Potential Approval of the Following:
 - (1) Fiscal Year 2022 Operating Budget
 - (2) Fiscal Year 2022 Capital Budget

12. ACTION ITEMS*

- A. Acceptance of QHR Health Report**
Woody White, QHR Health
 - (1) June 2021 QHR Health Report
- B. Acceptance of CNO Report**
Kerri Jex, Chief Nursing Officer
 - (1) May 2021 CNO Report
- C. Acceptance of the CEO Report**
John Friel, Chief Executive Officer
 - (1) June 2021 CEO Report
- D. Acceptance of the Finance Report & CFO Report**
Garth Hamblin, Chief Financial Officer
 - (1) April 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 Kaliher led flag salute and all present participated.

4. ADOPTION OF AGENDA:

President Boss called for a motion to adopt the May 12, 2021 agenda as presented. Motion by Board Member Melnick to adopt the May 12, 2021 agenda as presented. Second by Board Member Briner to adopt the May 12, 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:
 - David Aufrichtig, MD- Renaissance Radiology
 - Re-Appointment
 - Dawn Sampson, LCSW- Licensed Clinical Social Worker
 - Bradley Register, PA- Emergency Medicine
 - Vartan Vartanians, MD- Renaissance Radiology
 - Sameer Mohammed, MD- Tele-Psychiatry
 - Yehonatan Borenstein, MD- Tele-Psychiatry
 - Paula Nornes-Lebby, MD- OB/Gyn
 - Melinda Mueller, PsyD- Psychologist
 - Bernhard Tagwerker, MD- Emergency Medicine
- Voluntary Resignation
 - Alison Perez, DDS- Center for Oral Health
- 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 2:00 p.m. Hearing no request to make public comment. President Boss closed Public Forum for Closed Session at 2:00 p.m.

7. DIRECTORS COMMENTS

- Board Member Baker stated that he is hearing a lot of advertisement on the radio and staff sounds great.
- Board Member Melnick great to be back in the conference room.

8. INFORMATION REPORTS

A. Foundation Report:

- Mr. Friel reported the following information:
 - Annual meeting later this month and voting on new board members
 - Requesting a list of items/equipment that the hospital would like to purchase

B. Auxiliary Report:

- Ms. Dick reported the following information:
 - Volunteering at the vaccination clinics
 - Screening patients
 - Will be returning May 24
 - Meet & greet patients and escort them

9. CONSENT AGENDA:

A. April 14, 2021 Business Board Meeting Minutes: Shelly Egerer, Executive Assistant

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

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

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

E. Family Health Center / Rural Health Clinic Annual Evaluation for 2020

F. Committee Meeting Minutes:

(1) April 06, 2020 Finance 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 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 Resolution No. 21-464: Special Tax Levies Within the District:

- Mr. Friel reported this is an annual requirement in order to receive the tax funds.

President Boss called for a motion to approve Resolution No. 21-464: Special Tax Levies as presented. Motion by Board Member Kaliher to approve Resolution No. 21-464: Special Tax Levies as presented. Second by Board Member Melnick to approve Resolution No. 21-464: Special Tax Levies 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) April 2021 QHR Health Report:

- Mr. White reported the following:
 - Provided a briefing of the color coating on the report
 - Provided an update on the project process/update QHR is working on
 - Three regional conferences are being scheduled
 - Medical Stabilization Program is doing very well

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 Melnick 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) April 2021 CNO Report:

- Ms. Jex reported the following information
 - Medical Stabilization Program is going very well
 - Score Survey Results
 - Overview is in the report
 - High burn out rate due to COVID

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 Kaliher 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) May 2021 CEO Report:

- Mr. Friel reported the following information:
 - Dental van will be reviewed by CDPH to obtain licensure
 - Hospital Week is continuing through May 14.

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) March 2021 Financials:

- Mr. Hamblin reported the following information:
 - Cash position is 500 days cash on hand
 - Revenues are coming back
 - SNF down
 - Clinic increase
 - YTD revenue is close to budget
 - Expenses are over budget

(2) **CFO Report:**

- Mr. Hamblin reported the following:
 - Centrica Energy Efficiency
 - Status update has been provided
 - Blue Shield / State of California Vaccination Third Party Administrator
 - Continuing to provide the vaccination to our community members
 - FY 2022 Budget Preparation
 - Met with managers to review budget
 - Special Finance Meeting will be scheduled
 - COVID 19
 - Continue to monitor expenses

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 Briner 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 2:48 p.m. Motion by Board Member Briner 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

May 2021

Staffing	Active: 229 – FT: 154 PT: 13 PD: 62 New Hires: 4 Terms: 2 (2 Voluntary 0 Involuntary) Open Positions: 10
Employee Performance Evaluations	DELINQUENT: See attachment 30 days: 12 60 days: 7 90 days: 2 90+ days: 3 – (RT, Acute, ER) See Attachment
Work Comp	NEW CLAIMS: 0 OPEN: 8 Indemnity (Wage Replacement, attempts to make the employee financially whole) – 6 Future Medical Care – 0 Medical Only – 2
Employee Morale	Ongoing Culture of Ownership Initiatives Birthday Celebration Summer cookouts
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.

Bear Valley Community Healthcare District Construction Projects 2021

Department / Project	Details	Vendor and all associated costs	Comments	Date
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
Facilities- Forklift	Purchase forklift for to assist with numerous manual procedures performed	United Rentals	Waiting on Board approval	
Facilities- New Toolbox & Tool Set	Replace the old broken toolbox and replace the old handtool set	Northern Tools	Purchased	

Bear Valley Community Healthcare District Repairs Maintenance

Department / Project	Details	Vendor and all associated costs	Comments	Date <i>Complete</i>
Main Conference Room	Remodel the room and install a new TV	Facilities, Kenny's Painting, John Egerer	Completed	
Covid Partition Removal	Start to break down all of the plastic partitions from Covid	Facilities	In Progress	
FHC Lighting	Located the power issues that have a section of lighting off.	Facilities/Centrica	Completed	



Infection Prevention Monthly Report

May 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. ▪ 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 • April – 3 positive COVID-19, 1 Gonorrhea 	<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 	<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 % ▪ April 81% 	<ul style="list-style-type: none"> • Continue monitoring hand hygiene compliance.
4. Outbreaks/ Surveillance	<ul style="list-style-type: none"> ▪ May 2 MRSA. No C-diff ▪ April – 0 MRSA, no C-diff 	<ul style="list-style-type: none"> ▪ Informational
5. Policy Updates	<ul style="list-style-type: none"> ▪ Airborne Isolation Room – annual review 	<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. 	<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. ▪ IP to do ongoing education at EVS staff meetings. 	<ul style="list-style-type: none"> ▪ ICP to share information at appropriate committees.

9. Informational	<p>Immediate Use Steam Sterilization</p> <ul style="list-style-type: none"> ▪ May – 3 surgeries, 0 IUSS ▪ April – 7 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</i>	<i>Infection Preventionist</i>	<i>Date: June 3, 2021</i>

Acute Nursing	Action
(Documentation On) Medication Administration Record (MAR)	Annual review. Revised Policy Statement
Acute Scope of Service	Annual review. No changes.
Drug-Alcohol Abuse During Hospitalization	New policy.
Nursing Process; Care Plan/Problem List	Annual review. No changes.
Patient Classification - Acuity System and Nursing Assignment for Care of Patient	Annual review. No changes.
Patient Education	Annual review. No changes.
Patient Room Assignment	Annual review. Revised Policy Statement
Voluntary Admissions for Medical Stabilization	New policy.
Weighing Patients	Annual review. No changes.
Acute Nursing - Medical Stabilization	Action
Clinical Institute Withdrawal Assessment Scale (CIWAS)	New policy.
Clinical Opiate Withdrawal Scale (COWS)	New policy.
Skilled Nursing Facility	Action
Abuse of a Resident by Another Resident	Annual review. No changes.
Adult/Elder Abuse Policy - SNF	Annual review. Formatted and Revised #9
Antipsychotic Medications in the SNF	Annual review. No changes.
Nursing Services - Sufficient Staff	Annual review. Formatted. Removed #4.
Resident Grievances	Annual review. Added verbiage to #5
Resident Rights	Annual review. Changed verbiage on #11
Resident's Personal Belongings	Annual review. Revised Policy Statement
Restorative Nursing Program	Annual review. No changes.
Room Changes In the Skilled Nursing Facility	Annual review. Formatted.
Skilled Nursing Facility Committee (IDCP)	Annual review. No changes.
Skilled Nursing Facility-Distinct Part Scope of Services	Annual review. Revised verbiage to reflect current process.
SNF Resident Transfer and Medication Reconciliation	Annual review. Formatted.
Theft and Loss Program-SNF	Annual review. Formatted and added verbiage to #8
Urinary Incontinence Management	Annual review. References removed from policy body
Use of Hoyer Lifts in Public Hallways	Annual review. Added general Policy Statement
Skilled Nursing Facility - Staff Development	Action
CNA Continuing Education Units	Annual review. Formatted. Revised verbiage to reflect current process.
Hospital Wide Mandatory Elder Abuse Training	Annual review. Formatted. Revised verbiage.
Surgery	Action
Aseptic Barrier Material	Annual review. Formatted. Revised Policy Statement and verbiage in #7
Aseptic Technique	Annual review. Formatted
Biological Indicator Use - Surgery	Annual review. Revised to reflect current process
Surgery - Anesthesia	Action
Anesthesia Responsibilities	Annual review. Formatted. Name change in Policy Statement
ASA Classification System	Annual review. Formatted. Name change in Policy Statement
Infection Control	Action
Airborne Infectious Isolation Room (AIIR). Negative Pressure Room	Annual review. Formatted. Added verbiage to #12
Laboratory - Microbiology	Action
C. DIFF QUIK CHEK COMPLETE®	New policy.
OraQuick ADVANCE® Rapid HIV-1/2 Antibody Test	New policy.
Pharmacy	Action
Pharmacy Technician	New Policy.

**BEAR VALLEY COMMUNITY HEALTHCARE DISTRICT
PLANNING & FACILITIES COMMITTEE
MEETING MINUTES
DECEMBER 03, 2020**

MEMBERS	Peter Boss, President	Shelly Egerer, Exec. Assistant
PRESENT:	Steven Baker, 1 st Vice President John Friel, CEO	Michael Mursick, Plant Manager
STAFF:	Garth Hamblin	Kerri Jex
ABSENT:	None	
COMMUNITY MEMBERS:	None	

OPEN SESSION

1. CALL TO ORDER

President Boss called the meeting to order at 12:00 p.m.

2. ROLL CALL

Peter Boss, MD and Steven Baker were present. Also present were John Friel, CEO, Michael Mursick, Plant Manager and Shelly Egerer, Executive Assistant.

3. ADOPTION OF AGENDA*

Board Member Baker motioned to adopt the December 03, 2020 Planning & Facilities Committee Meeting Agenda as presented. Second by President Boss to adopt the December 03, 2020 Planning & Facilities Committee Meeting Agenda as presented. President Boss called for the vote. A vote in favor of the motion was unanimously approved.

- Board Member Baker- yes
- President Boss - yes

CLOSED SESSION

1. PUBLIC FORUM FOR CLOSED SESSION

President Boss opened the Hearing Section for Public Comment on Closed Session items at 12:00 p.m. Hearing no request to address the Planning & Facilities Committee, President Boss closed the Hearing Section at 12:01 p.m.

2. ADJOURN TO CLOSED SESSION*

Board Member Baker motioned to adjourn to Closed Session at 12:01 p.m. Second by President Boss to adjourn to Closed Session. President Boss called for the vote. A vote in favor of the motion was unanimously approved.

- Board Member Baker- yes
- President Boss- yes

OPEN SESSION

1. CALL TO ORDER:

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

2. RESULTS OF CLOSED SESSION:

President Boss stated there was no reportable action taken in Closed Session.

3. PUBLIC FORUM FOR OPEN SESSION:

President Boss opened the Hearing Section for Public Comment on Open Session items at 1:00 p.m. Hearing no request to address the Planning & Facilities Committee, President Boss closed the Hearing Section at 1:00 p.m.

4. DIRECTOR'S COMMENTS:

- None

5. APPROVAL OF MINUTES:

A. December 04, 2019

Board Member Baker motioned to approve the December 04, 2019 Planning & Facilities Committee Meeting Minutes as presented. Second by President Boss to approve the December 04, 2019 Planning & Facilities Committee Meeting Minutes as presented. President Boss called for a vote. A vote in favor of the motion was unanimously approved.

- Board Member Baker - yes
- President Boss - yes

6. OLD BUSINESS*

- None

7. NEW BUSINESS*

- None

9. ADJOURNMENT*

President Boss motioned to adjourn the meeting at 1:02 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 Baker- yes
- President Boss - yes

**BEAR VALLEY COMMUNITY HEALTHCARE DISTRICT
BOARD OF DIRECTORS
FINANCE COMMITTEE MEETING MINUTES
41870 GARSTIN DR., BIG BEAR LAKE, CA 92315
MAY 04, 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 May 04, 2021 Finance Committee Meeting Agenda as presented. Second by Board Member Baker to adopt the May 04, 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. April 06, 2021

Board Member Melnick motioned to approve April 06, 2021 minutes as presented. Second by Board Member Baker to approve the April 06, 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:

- None

7. NEW BUSINESS*

A. Discussion and Update on FY 2022 Budget Preparation:

- Mr. Hamblin reported that the budget is being reviewed; we will have a draft form of the budget within the next few weeks. Potential to have a Special Finance Meeting to review the budget prior to approval.
 - We use 7 months of data to build the budget
 - District Insurance will increase 8% to 15%
 - Potential to schedule a workshop budget meeting with in two weeks

8. PRESENTATION AND REVIEW OF FINANCIAL STATEMENTS*

A. March 2021 Finances:

- Mr. Hamblin reported the following information:
 - Good cash month
 - 510 days cash on hand
 - \$2.5 million was transferred from our bank to LAIF
 - Expenses continue to be high
 - PPP loan forgiveness needed to go to Small Business Association
 - 90-day turnaround time
 - Increase in expenses
 - Travelers are decreasing

B. CFO Report:

- Mr. Hamblin reported the following:
 - **Status of Energy Efficiency Project**
 - Letter has been provided from Centrica
 - Will follow up with the updated schedule
 - **Blue Shield / State of California Vaccination Third Party Administrator:**
 - Continuing vaccination clinics
 - Advertise the clinics via radio and newspaper
 - Provided 51 vaccinations today
 - **COVID-19 Expenses / Funding:**
 - Continuing to monitor expenses

Board Member Baker motioned to approve the March 2021 Finance Report and CFO Report as presented. Second by Board Member Melnick to approve the March 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 2:22 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



Recommendation for Action

Date: 26 May 2021
To: BVCHD Finance Committee
From: Garth M Hamblin, CFO
Re: JWT & Associates, FY 2021 & 2022 Independent Auditor

Recommended Action

Approve JWT & Associates, to conduct FY 2021 & 2022 Audits. Cost per year is \$26,000 plus travel and other out of pocket expenses.

Background

Jerrel Tucker, CPA, of JWT & Associates, has conducted our independent audit for a number of years. Our recommendation it that his firm conduct our audits for fiscal years ending June 30, 2021 (July 1, 2020 through June 30, 2021) and the year ending June 30, 2022 (July 1, 2021 through June 30, 2022)

Costs would be \$26,000 per year. In our previous engagement letter, he agreed to hold audit fee costs at \$25,000 per year (no increase from the previous year) for both years. We would continue to reimburse of out-of-pocket expenses.

JWT & Associates, LLP

Advisory Assurance Tax

1111 E. Herndon Avenue, Suite 211, Fresno, CA 93720

Voice: (559) 431-7708 Fax: (559) 431-7685

May 18, 2021

Garth Hamblin, CFO
Bear Valley Community Healthcare District
PO Box 1649
Big Bear Lake, CA 92315

We are pleased to confirm our understanding of the services we are to provide for Bear Valley Community Healthcare District (the District) for the years ended June 30, 2021 and 2022. We will audit the financial statements of the District, which comprise the statement of net position as of June 30, 2021 and 2022, the related statements of revenues, expenses, and changes in net position, and cash flows for the years then ended, and the related notes to the financial statements. Accounting standards generally accepted in the United States of America provide for certain required supplementary information (RSI), such as management's discussion and analysis (MD&A), to supplement the District's basic financial statements. Such information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. As part of our engagement, we will apply certain limited procedures to the District's RSI in accordance with auditing standards generally accepted in the United States of America. These limited procedures will consist of inquiries of management regarding the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audit of the financial statements. We will not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

Audit Objective

The objective of our audits is the expression of opinions as to whether your financial statements are fairly presented, in all material respects, in conformity with generally accepted accounting principles and to report on the fairness of the supplementary information referred to in the second paragraph when considered in relation to the financial statements as a whole. Our audits will be conducted in accordance with auditing standards generally accepted in the United States of America and will include tests of the accounting records and other procedures we consider necessary to enable us to express such opinions. We will issue a written report upon completion of our audits of the District's financial statements. Our reports will be addressed to the board of directors of the District. We cannot provide assurance that unmodified opinions will be expressed. Circumstances may arise in which it is necessary for us to modify our opinions or add emphasis-of-matter or other-matter paragraphs. If our opinions on the financial statements are other than unmodified, we will discuss the reasons with you in advance. If, for any reason, we are unable to complete the audits or are unable to form or have not formed opinions, we may decline to express opinions or we may withdraw from this engagement.

Audit Procedures—General

An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements; therefore, our audit will involve judgment about the number of transactions to be examined and the areas to be tested. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements. We will plan and perform the audit to obtain reasonable rather than absolute assurance about whether the financial statements are free of material misstatement, whether from (1) errors, (2) fraudulent financial reporting, (3) misappropriation of assets, or (4) violations of laws or governmental regulations that are attributable to the entity or to acts by management or employees acting on behalf of the entity.

Because of the inherent limitations of an audit, combined with the inherent limitations of internal control, and because we will not perform a detailed examination of all transactions, there is a risk that material misstatements may exist and not be detected by us, even though the audit is properly planned and performed in accordance with U.S. generally accepted auditing standards. In addition, an audit is not designed to detect immaterial misstatements, or violations of laws or governmental regulations that do not have a direct and material effect on the financial statements. However, we will inform the appropriate level of management of any material errors, any fraudulent financial reporting, or misappropriation of assets that come to our attention. We will also inform the appropriate level of management of any violations of laws or governmental regulations that come to our attention, unless clearly inconsequential. Our responsibility as auditors is limited to the period covered by our audit and does not extend to any later periods for which we are not engaged as auditors.

Our procedures will include tests of documentary evidence supporting the transactions recorded in the accounts, and may include tests of the physical existence of inventories, and direct confirmation of receivables and certain other assets and liabilities by correspondence with selected individuals, funding sources, creditors, and financial institutions. We will request written representations from your attorneys as part of the engagement, and they may bill you for responding to this inquiry. At the conclusion of our audits, we will require certain written representations from you about the financial statements and related matters.

Audit Procedures—Internal Control

Our audits will include obtaining an understanding of the entity and its environment, including internal control, sufficient to assess the risks of material misstatement of the financial statements and to design the nature, timing, and extent of further audit procedures. An audit is not designed to provide assurance on internal control or to identify deficiencies in internal control. However, during the audits, we will communicate to management and those charged with governance internal control related matters that are required to be communicated under AICPA professional standards.

Audit Procedures—Compliance

As part of obtaining reasonable assurance about whether the financial statements are free of material misstatement, we will perform tests of the District's compliance with the provisions of applicable laws, regulations, contracts, and agreements. However, the objective of our audit will not be to provide an opinion on overall compliance and we will not express such an opinion.

The auditors' procedures do not include testing compliance with laws and regulations in any jurisdiction related to Medicare and Medicaid antifraud and abuse. It is the responsibility of management of the entity, with the oversight of those charged with governance, to ensure that the entity's operations are conducted in accordance with the provisions of laws and regulations, including compliance with the provision of laws and regulations that determine the reported amounts and disclosures in the entity's financial statements. Therefore, management's responsibilities for compliance with laws and regulations applicable to its operations, include, but are not limited to, those related to Medicare and Medicaid antifraud and abuse statutes.

Other Services

We will also assist in preparing the financial statements of the District in conformity with U.S. generally accepted accounting principles based on information provided by you.

Management Responsibilities

Management is responsible for establishing and maintaining effective internal controls, including monitoring ongoing activities; for the selection and application of accounting principles; and for the preparation and fair presentation of the financial statements in conformity with U.S. generally accepted accounting principles.

Management is also responsible for making all financial records and related information available to us and for the accuracy and completeness of that information. You are also responsible for providing us with (1) access to all information of which you are aware that is relevant to the preparation and fair presentation of the financial statements, (2) additional information that we may request for the purpose of the audit, and (3) unrestricted access to persons within the entity from whom we determine it necessary to obtain audit evidence.

Your responsibilities include adjusting the financial statements to correct material misstatements and confirming to us in the management representation letter that the effects of any uncorrected misstatements aggregated by us during the current engagement and pertaining to the latest period presented are immaterial, both individually and in the aggregate, to the financial statements taken as a whole.

You are responsible for the design and implementation of programs and controls to prevent and detect fraud, and for informing us about all known or suspected fraud affecting the entity involving (1) management, (2) employees who have significant roles in internal control, and (3) others where the fraud could have a material effect on the financial statements. Your responsibilities include informing us of your knowledge of any allegations of fraud or suspected fraud affecting the entity received in communications from employees, former employees, regulators, or others. In addition, you are responsible for identifying and ensuring that the entity complies with applicable laws and regulations.

You are responsible for the preparation of the supplementary information in conformity with U.S. generally accepted accounting principles. You agree to include our report on the supplementary information in any document that contains and indicates that we have reported on the supplementary information. You also agree to include the audited financial statements with any presentation of the supplementary information that includes our report thereon OR make the audited financial statements readily available to users of the supplementary information no later than the date the supplementary information is issued with our report thereon.

Your responsibilities include acknowledging to us in the representation letter that (1) you are responsible for presentation of the supplementary information in accordance with GAAP; (2) you believe the supplementary information, including its form and content, is fairly presented in accordance with GAAP; (3) the methods of measurement or presentation have not changed from those used in the prior period (or, if they have changed, the reasons for such changes); and (4) you have disclosed to us any significant assumptions or interpretations underlying the measurement or presentation of the supplementary information.

You agree to assume all management responsibilities for financial statement preparation services and any other non-attest services we provide; oversee the services by designating an individual, preferably from senior management, with suitable skill, knowledge, or experience; evaluate the adequacy and results of the services; and accept responsibility for them.

HIPAA Business Associate Agreement

You agree that you are solely responsible for the accuracy, completeness, and reliability of all data and information you provide us for our engagement. You agree to provide any requested information on or before the date we commence performance of the services. To protect the privacy and provide for the security of any protected health information, as such is defined by the Health Insurance Portability and Accountability Act of 1996, as amended from time to time, and the regulations and policy guidance thereunder (HIPAA), we shall enter into a HIPAA Business Associate Agreement.

Engagement Administration, Fees, and Other

We may from time to time, and depending on the circumstances, use third-party service providers in serving your account. We may share confidential information about you with these service providers, but remain committed to maintaining the confidentiality and security of your information. Accordingly, we maintain internal policies, procedures, and safeguards to protect the confidentiality of your personal information. In addition, we will secure confidentiality agreements with all service providers to maintain the confidentiality of your information and we will take reasonable precautions to determine that they have appropriate procedures in place to prevent the unauthorized release of your confidential information to others. In the event that we are unable to secure an appropriate confidentiality agreement, you will be asked to provide your consent prior to the sharing of your confidential information with the third-party service provider. Furthermore, we will remain responsible for the work provided by any such third-party service providers. We understand that your employees will prepare all cash or other confirmations we request and will locate any documents selected by us for testing.

The audit documentation for this engagement is the property of JWT & Associates, LLP (JWT) and constitutes confidential information. However, subject to applicable laws and regulations, audit documentation and appropriate individuals will be made available upon request and in a timely manner to authorized regulators or their designee. We will notify you of any such request. If requested, access to such audit documentation will be provided under the supervision of JWT personnel. Furthermore, upon request, we may provide copies of selected audit documentation to regulators or their designee. The regulators or their designee may intend or decide to distribute the copies or information contained therein to others, including other governmental agencies.

Our fee for the financial audit for the years ended June 30, 2021 and 2022 will be \$26,000 per year. Fees do not include any travel or out-of-pocket expenses advanced for you, such as mileage, administrative charges, telephone calls, postage, etc. These will be billed to you separately. Our invoices for these fees will be rendered periodically as work progresses and are payable on presentation. In accordance with our firm policies, work may be suspended if your account becomes 90 days or more overdue and may not be resumed until your account is paid in full. If we elect to terminate our services for nonpayment, our engagement will be deemed to have been completed upon written notification of termination, even if we have not completed our report. You will be obligated to compensate us for all time expended and to reimburse us for all out-of-pocket costs through the date of termination. The above fee is based on anticipated cooperation from your personnel and the assumption that unexpected circumstances will not be encountered during the audit. If significant additional time is necessary, we will discuss it with you and arrive at a new fee estimate before we incur the additional costs.

We appreciate the opportunity to be of service to the District and believe this letter accurately summarizes the significant terms of our engagement. If you have any questions, please let us know. If you agree with the terms of our engagement as described in this letter, please sign the enclosed copy and return it to us.

Very truly yours,

JW7 & Associates, LLP

RESPONSE:

This letter correctly sets forth the understanding of Bear Valley Community Healthcare District.

Signature: _____

Name: _____

Title: _____

Date: _____



FY 2022 Budget (July 1, 2021 through June 30, 2022)

Overview of Process - Heads of each Department received budget worksheets containing historical information - statistics, staffing, revenue, and expenses. The worksheets also included information for the first 7 months of the current fiscal year with a projection through the end of the current fiscal year. Managers reviewed these and updated for FY 2022 budget request which was submitted to the Accounting staff. After input into the budget model, the member of the Administrative Team that the Manager reports to, the CFO, and the Controller met with each department head to review and discuss their budget proposal. This included a review of Capital requests, Statistics (including discussion of any changes seen or projected - which drives the revenue budget), detailed review of FTE (Full Time Equivalent) employees by individual and position, and review of Expenses by account code.

The first 7 months of FY 2022 brought the challenge of a surge in COVID 19 patients in November & December 2020 and January and even into February 2021. This saw an increase in Operating Expenses particularly Salaries and Wages, Supplies, and Purchase Services. Much of the work with Department Managers was to review these expenditures and “normalize” for the budget year.

Overall Summary -

Margins –

Operating Margin is Income from Operations over Total Patient Revenue.

Total Margin is “Surplus” (Net Income) over Total Patient Revenue

Margin Comparisons –

	Actual FY 2015	Actual FY 2016	Actual FY 2017	Actual FY 2018	Actual FY 2019	Actual FY 2020	Estimate * FY 2021	Budget FY 2022
Operating Margin	-1.80%	0.40%	4.00%	2.80%	7.90%	5.00%	-3.8%	0.6%
Total Margin	4.20%	6.20%	8.90%	8.00%	13.70%	16.80%	2.0%	5.5%

(* Margin Estimate FY 2021 - with the surge in COVID 19 patients that we saw during the first 7 months of the current fiscal year, we see Operating Expenses higher - particularly in Salaries Wages and Benefits, Supplies, and Purchase Services. We have not yet brought any CARES Act or other stimulus funds onto our Profit and Loss statement for the current Fiscal Year.)

Overall budget P & L for the budget year with Prior and Current year comparisons follow on the next page –

BEAR VALLEY COMMUNITY HOSPITAL
FY 6/30/22 BUDGET

	ACTUAL FY 6/30/20	ESTIMATE FY 6/30/21	BUDGET FY 6/30/22	VARIANCE FROM CURR EST	PERCENT CHANGE
GROSS PATIENT REVENUE					
INPATIENT REVENUE	1,327,739	2,591,592	2,238,731	(352,861)	-13.6%
OUTPATIENT REVENUE	46,301,048	48,860,647	51,967,299	3,106,652	6.4%
LONG TERM CARE	2,275,447	2,222,725	2,267,303	44,578	2.0%
TOTAL PATIENT REVENUE	49,904,234	53,674,963	56,473,333	2,798,370	5.2%
REVENUE DEDUCTIONS					
CONTR. ADJ.-CURR.	20,337,439	25,496,460	25,675,887	179,427	0.7%
PROV.FOR BAD DEBTS	1,619,494	2,736,235	2,834,259	98,024	3.6%
TOTAL REVENUE DEDUCTIONS	21,956,933	28,232,695	28,510,146	277,451	1.0%
NET PATIENT REVENUE	27,947,301	25,442,268	27,963,187	2,520,918	9.9%
OTHER OPERATING INCOME	644,336	658,317	943,099	284,782	43.3%
NET OPERATING REVENUE	28,591,637	26,100,585	28,906,286	2,805,701	10.7%
OPERATING EXPENSES					
SALARY & WAGES	10,867,245	12,151,561	12,059,622	(91,939)	-0.8%
EMPLOYEE BENEFITS	3,724,864	3,846,698	4,699,373	852,675	22.2%
PROFESSIONAL FEES	2,049,493	1,995,367	2,051,440	56,073	2.8%
SUPPLIES	1,785,403	2,257,492	1,792,658	(464,834)	-20.6%
UTILITIES	476,148	416,099	426,121	10,022	2.4%
REPAIR	719,957	592,317	639,088	46,770	7.9%
PURCHASED SERVICES	3,898,190	4,374,137	3,968,870	(405,267)	-9.3%
INSURANCE	381,178	446,817	520,266	73,448	16.4%
DEPRECIATION & AMORT	1,050,652	1,095,540	1,167,873	72,333	6.6%
RENTAL EXPENSE	195,712	216,520	325,216	108,696	50.2%
INTEREST	90,014	89,672	88,000	(1,672)	-1.9%
DUES & SUBSC	71,526	78,375	79,201	827	1.1%
OTHER EXPENSE	770,162	594,870	727,648	132,779	22.3%
TOTAL OPERATING EXPENSE	26,080,543	28,155,464	28,545,377	389,912	1.4%
INCOME (LOSS) FROM OPERATIONS	2,511,094	(2,054,879)	360,909	2,415,788	117.6%
NON-OPERATING INCOME					
TAX REVENUE	2,451,636	2,450,004	2,450,000	(4)	0.0%
OTHER NON-OPERATING	3,426,214	677,280	313,037	(364,244)	-53.8%
NET NON-OPERATING	5,877,851	3,127,284	2,763,037	(364,248)	-11.6%
NET INCOME (LOSS)	8,388,944	1,072,405	3,123,946	2,051,541	-191.3%
operating margin	5.0%	-3.8%	0.6%		
total margin	16.8%	2.0%	5.5%		
revenue deduction %	44.0%	52.6%	50.5%		
sw&b % operating exp	56.0%	56.8%	58.7%		
s&w % operating exp	41.7%	43.2%	42.2%		

Statistics

The following is a comparison of key statistics used in the budget along with historical information.

Statistics for FY 2022 Budget

	FY 2013 Actual	FY 2014 Actual	FY 2015 Actual	FY 2016 Actual	FY 2017 Actual	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual	FY 2021 Projected	FY 2021 Budget	FY 2022 Budget
Inpatient	459	444	652	880	861	547	530	501	598	872	949
Acute Days	459	444	398	468	414	347	345	231			
Swing Days			254	412	447	200	185	270			
SNF Days	7,074	6,600	5,620	5,289	6,667	6,797	5,779	5,128	5,531	5,110	5,110
Emergency Room	9,672	9,373	10,593	11,184	11,315	11,485	11,849	10,879	12,222	10,729	11,500
OR	290	270	233	105	101	137	145	86	104	104	204
Lab	59,512	61,188	73,339	78,916	71,870	74,732	76,432	67,787	76,492	76,492	75,000
EKG	2,558	2,701	3,473	3,655	3,344	3,721	3,467	3,278	3,648	3,648	3,467
Radiology	10,195	9,947	10,334	10,380	9,959	9,645	10,678	9,534	11,369	11,369	9,500
Mammography			771	633	414	743	586	493			
Radiology incl Mammo			11,105	11,013	10,373	10,388	11,264	10,027	11,369	11,369	9,500
Ultrasound	1,734	1,883	1,967	2,366	2,488	2,823	2,611	2,167	2,375	2,375	2,228
CT	2,894	3,045	3,362	3,575	3,081	3,137	3,360	3,559	3,908	3,708	4,100
Pharmacy	41,816	39,320	47,850	60,181	58,802	45,960	44,875		55,971	55,971	52,000
RT	1,542	2,037	2,084	1,684	1,501	1,645	1,338	1,178	1,360	1,360	1,200
PT	8,016	12,086	14,245	13,406	18,914	16,487	19,342	17,288	18,389	18,389	17,000
Urgent Care										1,829	1,829
FHC	8,699	12,730	17,420	17,939	18,518	19,937	19,195	18,628	21,903	21,903	18,476
RHC Medical	5,200	3,501	667	-	593	1,272	2,009	1,904			4,500
RHC Dental	806	962	464	-	1,339	2,611	4,156	2,507			
RHC (incl Dental)	6,006	4,463	1,131	-	1,932	3,883	6,165	4,411	3,243	3,243	4,500
combined clinics	14,705	17,193	18,551	17,939	20,450	23,820	25,360	23,039	25,146	25,146	22,976
adc snf	19.38	18.08	15.40	14.49	18.27	18.62	15.83	14.05	15.15	14.00	14.00

Inpatient Census (Acute and Swing patient days) has decreased over the past several years. The FY 2021 budget reflected adding Medical Stabilization Program. That service has now begun. The Budget for FY 2022 also includes budgeted days for the Medical Stabilization Program.

After we saw an increase in average daily census on the Skilled Nursing Facility in FYs 2017 and 2018, we have seen decreases since FY 2019. We have budgeted SNF Average Daily Census at the same level as the budget for FY 2021.

We have seen slow but steady growth in ER Visits since FY 2014. During FY 2020, the first year of the pandemic, we saw a decrease in ER visits. We have seen some rebound during the current fiscal year, FY 2021. For the budget year we have budgeted a slight decrease from the current year projection.

The budget again includes 1,829 for Urgent Care Clinic visits.

OR / Surgery volume increases with a projection for Wound Care service.

FTE / Salaries and Wages

The table below summarizes FTE by Department for several previous years and the FY 2022 budget.

												decrease in red	
	Dept	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2019 Budget	FY 2020	FY 2021 YTD as of Jan 2021	FY 2021 Budget	FY 2022 Budget	FY 2022 Budget vs YTD FY 2021	FY 2022 Budget vs FY 2021 Budget
Acute	006170	5.6	6.1	6.0	5.2	5.0	7.1	5.2	5.9	6.6	6.6	0.6	(0.0)
SNF	006582	22.0	21.0	21.9	22.6	22.4	22.4	21.3	16.7	21.2	18.2	1.5	(3.0)
ER	007010	18.0	20.0	19.7	20.1	19.9	21.3	21.8	26.0	19.4	24.6	(1.4)	5.2
Risk / Compl	008754			0.4	1.0	1.0	1.0	1.0	0.9	1.0	1.0	0.1	0.0
RHC	007181	1.2	-	0.7	1.7	2.0	2.3	2.1	2.3	3.1	3.3	1.0	0.2
Urgent Care										5.2	5.2	5.2	(0.0)
OR	007420	1.4	1.2	1.3	1.8	2.1	2.1	2.0	2.4	2.3	2.7	0.3	0.4
DISASTER	008490	0.4	0.5	0.4	0.2	0.2	0.2	1.0	2.6	0.4	1.3	(1.4)	0.9
LAB	007500	8.3	8.6	8.2	9.0	10.3	8.9	10.0	10.7	9.3	9.6	(1.2)	0.3
XRAY	007630	8.2	7.2	6.6	6.9	6.8	6.6	6.8	6.9	6.6	6.6	(0.3)	0.1
US	007670	-	1.2	1.2	1.3	1.4	1.3	1.4	1.5	1.3	2.0	0.5	0.7
PHARM	007710	1.0	1.2	1.3	1.2	1.2	1.2	1.1	1.2	1.2	1.3	0.1	0.1
RT	007720	2.7	3.1	2.7	2.6	2.7	2.3	2.6	3.3	2.5	3.3	0.0	0.8
PT	007770	4.6	4.8	5.5	5.3	5.2	6.0	5.6	5.9	6.1	6.1	0.2	0.0
DIETARY	008340	8.6	8.6	8.9	9.2	9.0	8.7	7.7	8.5	7.3	8.6	0.1	1.3
PURCH	008400	1.0	1.5	1.6	1.1	1.3	1.4	1.4	1.7	1.5	2.0	0.3	0.5
HSKPG	008440	8.3	8.3	9.6	9.9	9.6	9.5	9.3	9.9	11.5	16.7	6.8	5.2
PLANT	008460	2.7	2.8	3.2	3.3	3.2	3.0	3.3	3.5	3.7	4.0	0.5	0.3
IS	008480	3.2	2.5	3.4	4.1	4.0	4.0	4.4	4.9	4.5	4.5	(0.4)	0.0
ACCTG	008510	3.2	2.8	3.0	2.9	3.1	3.0	2.6	2.8	3.0	3.0	0.2	0.0
PT.ACCTG	008530	4.9	2.8	3.2	4.0	4.2	4.0	3.8	3.2	4.0	3.0	(0.2)	(1.0)
ADMTG	008560	9.5	10.2	10.6	10.2	10.4	9.8	10.0	10.5	9.1	10.0	(0.5)	0.9
ADMIN	008610	2.2	1.4	1.5	1.7	1.8	1.7	1.5	1.7	1.7	2.2	0.5	0.5
DISTRICT	008620		-									0.0	0.0
HR	008650	1.9	1.9	2.1	2.4	3.1	3.1	2.5	2.2	2.3	3.4	1.2	1.1
HIM	008700	5.6	6.1	6.7	5.9	5.9	6.3	4.7	4.8	4.8	5.2	0.4	0.4
MD.STAFF	008710	1.0	0.8	1.0	0.9	0.8	0.8	0.8	0.8	0.8	0.8	0.0	0.0
N.ADMN	008720	3.5	3.2	3.4	3.2	3.3	3.4	2.8	3.0	3.0	4.6	1.6	1.6
FHC	008760	20.5	24.9	22.4	19.8	17.6	19.4	17.4	16.4	16.5	16.5	0.1	0.0
MOMS	008770	4.9	4.1	4.2	5.0	4.5	5.3	4.8	6.1	5.3	8.5	2.4	3.2
PRIME				1.2	1.9	1.8	3.2	2.8	2.7	3.2	3.2	0.5	0.0
total		154.4	156.9	160.7	164.4	163.8	169.3	161.7	169.0	168.3	187.6	18.6	19.3

Changes in FTE include the following –

- Emergency Department – 3rd nurse at night 2.4 FTEs, Substance Use Navigators 1.8 FTE
- Housekeeping / Environmental Services (EVS) - Security become district employees 24/7 comes to 4.2 FTE, 1.0 FTE Lead for coverage and training
- Nursing Administration - Employee Health 1.0 FTE, Staff Educator 0.6 FTE
- Mom and Dad's – counseling and training add-on from First 5 replace with 2.0 FTEs / employees
- HR – light-duty .5 FTE, additional staff 0.8 FTE
- Administration – Business Development 0.5 FTE
- RHC – coverage by employee not physician

Major changes in P & L

Total Patient Revenue budget reflects budgeted statistics and NO budgeted charge or rate increase. The budget “performs” without a rate increase. Depending on how the year progresses, we may want to consider an increase at mid-year or slowing increase in FTE.

Total Revenue Deductions as a % of Total Patient Revenue are budgeted at 50.5%. During the current year we are recording a revenue deduction percentage of 52.6%, but we expect this percentage will be lower by year end with recording of IGT (Intergovernmental Transfer) money and some prior year settlements from Medicare and Medi-Cal. For FY 2020 Revenue Deductions were 44.0%.

Total Operating Expense increases by 1.4% or \$389,912 over the current year estimate. Below is more detail about some of the changes in this year’s budget –

- **Salaries, Wages, and Benefits**

Slight decrease over the current year estimate but a large increase over FY 2020. As noted earlier, several departments have increases in FTE. The budget also includes an across-the-board increase.

Budgeted FTEs of 187.6.

Benefits increase significantly with increases projected in Workers Comp insurance, Insurance, and PTO accruals.

- **Supplies** are budgeted to decrease over the current year estimate / projection as during the current fiscal year we have significant expenditures for PPE (Personal Protective Equipment), pharmaceuticals, Disaster supplies, and supplies for Respiratory Therapy.
- **Professional / Physician Fees** are budgeted to increase slightly from the current year projection and are about the same as we experienced in FY 2020.
- **Purchased Services** are budgeted at a significant decrease over FY 2021 estimate due to expenditures for the pandemic we have experienced this fiscal year. The transfer of expenditure for Security from Purchase Services to Salaries, Wages, and Benefits (District employment) represents a shift of some \$200,000. The transfer of expenditures for the grant funded Mom and Dad’s / First 5 counseling and training program reduces purchased services but increases salaries, wages, and benefits expense. We have also included expenses related to the Medical Stabilization Program.
- **Depreciation and Amortization** increases as a result of capital expenditures.
- **Rental Expense** increases with Lab equipment and rental of Urgent Care space.
- **“Other Expense” includes the following:**
 - Minor Equipment of \$73,821
 - Taxes and Licenses of \$40,410
 - Outside Training of \$48,035
 - Travel of \$46,552
 - Marketing of \$180,885

- Telephone of \$27,260

As in the past, we have included funds for employee appreciation (Christmas party, Hospital Week, Thanksgiving gift certificates and the like), employee health, and employee wellness.

Tax Revenue is budgeted at the same amount as we are expecting for this year.

Mom & Dad's – as part of our commitment with First 5, BVCHD funds \$50,000 each year.

Capital Budget

Summary of Capital Budget and recent Capital Expenditures / Additions:

FY 2022	\$835,161 (budget)
FY 2021	\$1,113,058 (through April 2021)
FY 2020	\$3,162,136
FY 2019	\$1,099,165
FY 2018	\$1,625,342
FY 2017	\$2,063,800
FY 2016	\$812,000

For FY 2021 expenditures (so far) include \$358,330 for Surgery (autoclaves, scopes and processors, arthroscopic shoulder Instrument set, and upgraded Phaco machine for cataract surgeries); EKG machines and bipap machine for Respiratory Therapy; replacement of HVAC system in Physical Therapy; server refresh, switches, and computers / notebooks for Information Technology; and equipment for COVID-19 screening.

For FY 2020 major expenditure was \$2,451,759 for land. Other expenditures included Laboratory point-of-care testing, OR gurneys, SNF TVs, and SNF tub and tile replacement.

Detail 3 year Capital plan update is attached

Dept No.	Department	CER	Request Description	FY 2019	FY 2020	FY 2021	FY 2022	Total Budget	Donations	Total Paid Prior	Total Paid FY 2022	Budget Remaining
001/005	Med-Surg/SNF		4 WOW x3-4 Computers		6,400.00			6,400.00				6,400.00
			Total Med-Surg/SNF	-	6,400.00	-	-	6,400.00		-	-	6,400.00
005	SNF		None									
			Total SNF	-	-	-	-	-	-	-	-	-
010	ER		Replace Big Wheel Gurney w 1 motorized Electric Gurney				29,969.85	29,969.85				29,969.85
010	ER		Semi-permanent modular wall system (Isolation rooms)				54,500.00	54,500.00				54,500.00
			Total Emergency Room	-	-	-	84,469.85	84,469.85	-	-	-	84,469.85
015	FHC		replace fetal monitor w/ Corometrics 170 Fetal Monitor				6,000.00	6,000.00				6,000.00
			Total FHC	-	-	-	6,000.00	6,000.00	-	-	-	6,000.00
025	Surgery		OR LIM Removal	5,200.00				5,200.00				5,200.00
025	Surgery		OR Lim Replacement	18,000.00				18,000.00				18,000.00
025	Surgery		New baseboards, flooring, wall repairs	50,000.00	30,000.00			80,000.00				80,000.00
025	Surgery		Blanket/fluid warming cabinet			11,000.00		11,000.00				11,000.00
025	Surgery		Overhead surgical spotlights			20,000.00		20,000.00				20,000.00
025	Surgery		New set of surgical instruments for doing orthoscopic shoulder cases,			25,000.00		25,000.00				25,000.00
025	Surgery		New sterilization system to replace disposable wraps				26,174.58	26,174.58				26,174.58
025	Surgery		Two full sets of scopes to ensure back to back surgeries				68,633.20	68,633.20				68,633.20
025	Surgery		Replace Meditronic Electrosurgical Energy Platform				27,000.00	27,000.00				27,000.00
025	Surgery		LuxOR Revalia Ophthalmic Microscope for cataract surgeries				80,000.00	80,000.00				80,000.00
025	Surgery		New patient monitor for anesthesia machine				13,500.00	13,500.00				13,500.00
025	Surgery		Second set of laparoscopic instruments				35,236.70	35,236.70				35,236.70
			Total Surgery	73,200.00	30,000.00	56,000.00	250,544.48	409,744.48	-	-	-	409,744.48
040	Lab		Freezezer for new analyzer and controls				5,334.06	5,334.06				5,334.06
040	Lab		Cell Stainer per Dr Tadnos, Pathologist				9,076.89	9,076.89				9,076.89
040	Lab		CO2 incubator for microbiology				7,302.60	7,302.60				7,302.60
			Total Laboratory	-	-	-	21,713.55	21,713.55	-	-	-	21,713.55
050	Radiology		Avreo Server upgrade				6,000.00	6,000.00				6,000.00
050	Radiology		Replace existing generators in Rm 1 w/ smaller footprint				55,100.00	55,100.00				55,100.00
050	Radiology		Upgrade current DR panel workstation (replace workstation)				22,000.00	22,000.00				22,000.00
			Total Radiology	-	-	-	83,100.00	83,100.00	-	-	-	83,100.00
070	Respiratory Therapy	2005	Point-of-Care Testing hand held i-STAT interface for T-System Blood Gas		6,000.00			6,000.00				6,000.00
070	Respiratory Therapy		Add another ventilator w/ APRV mode				18,081.52	18,081.52				18,081.52
070	Respiratory Therapy		V60 bipap machine with bipap or Hi Flow mode				14,061.16	14,061.16				14,061.16
			Total Respiratory Therapy	-	6,000.00	-	32,142.68	38,142.68	-	-	-	38,142.68
075	Physical Therapy		Leander Variable Height Flexion/Distratation Table		5,731.60			5,731.60				5,731.60
075	Physical Therapy		Tri W-G Deluxe Hi-Lo Mat Platform			9,479.92		9,479.92				9,479.92
075	Physical Therapy	2119	Replace the old cabinets to modern case work - PT			41,224.28		41,224.28				41,224.28
			Total Physical Therapy	-	5,731.60	50,704.20	-	56,435.80	-	-	-	56,435.80
115	Plant Maint.		Parking Lot seal coat & repairs				25,000.00	25,000.00				25,000.00
115	Plant Maint.		Build new trash hamper for cardboard bins				10,000.00	10,000.00				10,000.00
115	Plant Maint.		Purchase a snow melt thrower for work truck				6,000.00	6,000.00				6,000.00
115	Plant Maint.		Replace and re-key the entire hospital				35,000.00	35,000.00				35,000.00
115	Plant Maint.		Renovate the hospital's Dr's Quarters				20,000.00	20,000.00				20,000.00
115	Plant Maint.		Misc repairs to the BVCHD parking lots (curbing at PT)				11,000.00	11,000.00				11,000.00
115	Plant Maint.		Replace HAVC unit in Facility Managers office				8,000.00	8,000.00				8,000.00
115	Plant Maint.		Purchase a forklift for misc lifting				20,000.00	20,000.00				20,000.00
115	Plant Maint.		Replace all old fire extinguishers with new modern equipment				8,000.00	8,000.00				8,000.00
115	Plant Maint.		Refresh wood chips around the facility				20,000.00	20,000.00				20,000.00
115	Plant Maint.		Repair plumbing under the SNF & Acute showers				50,000.00	50,000.00				50,000.00
115	Plant Maint.		Replace/add new raingutters to the buildings				17,840.00	17,840.00				17,840.00
			Total Plant Maintenance	-	-	-	230,840.00	230,840.00	-	-	-	230,840.00
125	Info Technology	2128	Upgrade licenses-Microsoft		50,976.42			50,976.42		5,194.00		45,782.42
125	Info Technology		Environ monitoring and alerting system servers and network storage closets		9,000.00			9,000.00				9,000.00
125	Info Technology	2125	Cisco replacement switches to replace existing switches			36,000.00		36,000.00		7,396.98		28,603.02
125	Info Technology	2108	30 Lenovo T10 computer systems and 12 Lenovo E585 laptops					36,600.00		14,621.38		21,978.62
125	Info Technology		Windows server, Office 2016, Windows and RD client access licensing			15,000.00		15,000.00				15,000.00
125	Info Technology		24/7 Managed Detection and Response service/software				47,481.00	47,481.00				47,481.00

Dept No.	Department	CER	Request Description	FY 2019	FY 2020	FY 2021	FY 2022	Total Budget	Donations	Total Paid Prior	Total Paid FY 2022	Budget Remaining
125	Info Technology		Microsoft 2019 Server Datacenter licensing and required Client Access Licensing				25,033.85	25,033.85				25,033.85
125	Info Technology		Fortinet Fortigate 100F firewall and software. Replaces failing equipment				6,827.82	6,827.82				6,827.82
125	Info Technology		Lenovo ThinkCenter Tiny In One Computers and Monitors. Replaces old machines				20,066.72	20,066.72				20,066.72
125	Info Technology		Lenovo ThinkBook laptops. Replaces old machines that are not serviceable				9,941.34	9,941.34				9,941.34
			Total Info Technology	-	59,976.42	87,600.00	109,350.73	256,927.15	-	27,212.36	-	229,714.79
165	Admitting		Replace Microphone System				7,000.00	7,000.00				7,000.00
			Total Admitting	-	-	-	7,000.00	7,000.00	-	-	-	7,000.00
130	Disaster	2011	Replace expired hazmat equipment			33,500.00		33,500.00				33,500.00
			Total Disaster	-	-	33,500.00	-	33,500.00	-	-	-	33,500.00
175	Nursing Admin		New ACLS/PALS Sys (software,ed mat, AHA cards and test station) 3yrs A 10,000/yr				10,000.00	10,000.00				10,000.00
			Total Nursing Admin	-	-	-	10,000.00	10,000.00	-	-	-	10,000.00
205	Urgent Care		Add more cameras Urgent Care	9,800.00				9,800.00				9,800.00
			Total Urgent Care	9,800.00	-	-	-	9,800.00	-	-	-	9,800.00
Total for Hospital:				83,000.00	108,108.02	227,804.20	835,161.29	1,254,073.51	0.00	27,212.36	-	1,226,861.15
<u>Other Capital Purchases</u>												
150	Administration	2018	Urgent Care Center - 247 Sandalwood Dr., BBL		78,976.62	234,080.29		313,056.91		313,056.91		0.00
150	Administration	1823	Master Plan		70,443.10	1,137.50		71,580.60		71,580.60		-
				-	149,419.72	235,217.79	-	384,637.51	-	384,637.51	-	0.00
<u>Emergency Additions to Budget:</u>												
205	Urgent Care	2103	Xray Equipment			100,000.00		100,000.00		35,506.48		64,493.52
125	Info Technology	2112	CPSI Interface for Manifest Medex Participation			17,200.00		17,200.00		6,200.00		11,000.00
010	Emergency Room	2117	Tsystem interface to BD Pyxis for Meds			8,750.00		8,750.00				8,750.00
				-	-	125,950.00	-	125,950.00	-	41,706.48	-	84,243.52
				83,000.00	257,527.74	588,971.99	835,161.29	1,764,661.02	-	453,556.35	-	1,311,104.67

going away

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 Nestrick	WIC	Ongoing support for the Strategic Plan. Quarterly check-ups with the Board/Hospital.	First quarterly "check-in" complete in April.
	Strategic Plan	Ryan Nestrick	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.
	Medical Stabilization Program	Keith Jackson	Add-on	IP Medical Stabilization Program evaluated, discussed, and proposed in fall 2020.	Contract approved Dec 2020. Unit opened Feb 2021.
	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	Analyst reviewing information.
	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	Reported being 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	
	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 N'ville
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 Nestrick - Senior Director Strategy		847.533.0759	rnestrick@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		
	2020	2021
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	\$8,597	
J & J QPA Rebate	\$47	
Consulting (Region Team)	See Hours	
Consulting Engagements	See Hours	
Total:	\$18,644	
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	118
Internal Consultants	286	117
Total:	626	235

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



CNO Monthly Report

TOPIC	UPDATE
1. Regulatory	<ul style="list-style-type: none"> ▪ CDPH investigation for food handling self-report still open ▪ CDPH to resume L&C surveys 4/1/21, we are due for SNF and CAH surveys. ▪ CDPH issued AFL- all space conversions for COVID need to be returned to previous state by July 17th. We will leave the COVID wing up until July 1st. We will submit a program flex to continue seeing COVID ED patients in the parking lot and to keep the plastic isolation rooms for ED 1, 4, 5, 7 & 8. Any COVID admissions will stay in beds 7/8. ▪ CHA expects AFL updates regarding routine testing of vaccinated employees.
2. Budget/Staffing	<ul style="list-style-type: none"> ▪ Staffing moving towards budgeted FTEs. ▪ FY22 budget proposals have been finalized.
3. Departmental Reports	
<ul style="list-style-type: none"> ▪ Emergency Department 	<ul style="list-style-type: none"> ▪ BETA Quest for Zero Program validation has been completed. We were validated for Tier 1 and 2. ▪ April has been asked to serve on the Emergency Medicine Collaborative committee. ▪ Policies in review
<ul style="list-style-type: none"> ▪ Acute 	<ul style="list-style-type: none"> ▪ Nurse training for medical stabilization was held at the Acute staff meeting. ▪ Medical stabilization quarterly program review was held. QHR was onsite for the review. ▪ Wound program is implemented, we are seeing patients every Wednesday. Work still needs to be done with contracting so that providers are in network to expand our patient base. ▪ One FT RN resignation ▪ One FT RN hired ▪ One FT RN position open
<ul style="list-style-type: none"> ▪ Skilled Nursing 	<ul style="list-style-type: none"> ▪ Completed participation in the project Echo grant program, 6000.00 grant to follow.

	<ul style="list-style-type: none"> ▪ SNF residents continue to be closely monitored for COVID. Any positives move over to the COVID unit to be cared for by separate staff ▪ Currently no positive residents.
<ul style="list-style-type: none"> ▪ Surgical Services 	<ul style="list-style-type: none"> ▪ Elective surgical cases have resumed ▪ OR staff working on scope cleaning program & policies.
<ul style="list-style-type: none"> ▪ Case Management 	<ul style="list-style-type: none"> ▪ Working with Service Coordinator to improve admission process for Medical Stabilization program.
<ul style="list-style-type: none"> ▪ Respiratory Therapy 	<ul style="list-style-type: none"> ▪ Alternative measures being implemented including disposable vents, and COVID compatible CPAP. ▪ RT has moved back into their original location, EKGs are still being done in the gift shop area until July 1st.
<ul style="list-style-type: none"> ▪ Physical Therapy 	<ul style="list-style-type: none"> ▪ Volumes returning to normal, expect to be back to regular appointment times June 15th when COVID restrictions are lifted.
<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 BBQ(s)/ Holiday events ▪ Self- report to CDPH regarding kitchen food handling- variation from policy. Staff in servicing and POC in place ▪ Working on purchase of food vending machine for afterhours/ night staff ▪ Hosted brown bag day, and hospital week/ birthday celebrations. ▪ 1 FT cook position filled, 1 PD cook position open, 1 PD dietary aid position open, RD has been working cook shifts in addition to regular duties ▪ Dining room is open again for in person dining.
4. Infection Prevention	<ul style="list-style-type: none"> ▪ Planning, research and education regarding COVID-19 ▪ Educating staff on PPE standards and guidelines for re-use ▪ Reporting COVID cases to Public Health and CDPH L&C ▪ Signed up for Antimicrobial Stewardship Honor Roll program
5. Quality Improvement	<ul style="list-style-type: none"> ▪ 2 BHPP Grant Substance Use/ Behavioral Health Navigators hired for the Emergency Department. This program has already benefited several patients and has been successful. ▪ BHPP coordinators working with QHR Service Coordinator on integration of medical stabilization service line. ▪ SCORE Survey closed at 98% staff participation- results and debriefing to start the week of 5/31.

	<ul style="list-style-type: none"> ▪ Participated in BETA HEART virtual training sessions. ▪ BETA HEART validation survey scheduled for June 3rd. ▪ Working on vaccine confidence HRSA grant.
6. Policy Updates	<ul style="list-style-type: none"> ▪ Cal OSHA COVID prevention plan in place ▪ Emergency preparedness policies in review ▪ ED Policies in review ▪ Nursing Admin Policies in review ▪ SNF policies in review
7. Safety & Products	<ul style="list-style-type: none"> ▪ Implementing COVID prevention plan
8. Education	<ul style="list-style-type: none"> ▪ 2021 Skills days will be held in August and November.
9. Information Items/Concerns	<ul style="list-style-type: none"> ▪ Attending many calls related to COVID with BBFD, HASC, CHA, CDPH. ▪ Closely monitoring COVID trends/ hospital & ventilator utilization throughout the state. ▪ Contract with Blue Shield TPA agreement signed for continuation of vaccination clinics and allocations. ▪ Completed onboarding process for BlueShield MyTurn- will be transitioning to the new model. ▪ COVID Vaccines are being offered as they are allocated to BVCHD. ▪ We continue to receive positive feedback from community members who have attended the vaccination clinics. ▪ Now offering home visits for vaccines for homebound residents. ▪ Auxiliary helping at vaccination clinics. ▪ Working on job description project.
Respectfully Submitted by: <i>Kerri Jex, CNO</i> <i>Date: May 28th , 2021</i>	



CHIEF EXECUTIVE OFFICER REPORT

CEO Information:

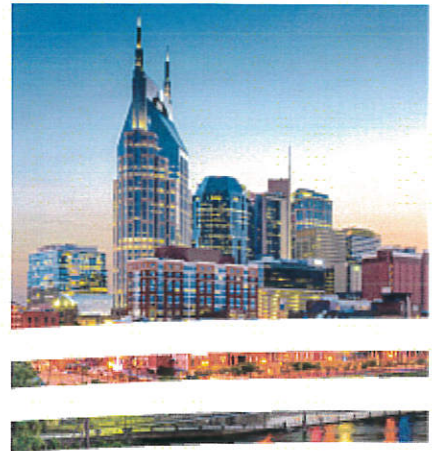
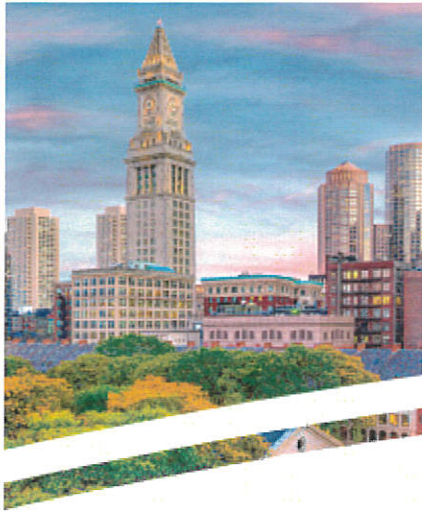
Hospital Week was conducted May 10th. We celebrated five days with food and games. Staff appreciated the week and events that were scheduled.

We continue back to our pre-COVID 19 activities and patient services and appreciate the Boards support and encouragement during the past year.

The Auxiliary has resumed its patient welcoming services in the lobby and the SNF unit. Only vaccinated Auxiliary members are providing services at this time. The Auxiliary is also continuing their fund-raising efforts with the sales of See's candy until COVID restrictions are lifted.

QHR has provided a schedule for the 2021 Regional Meeting designed for Board Leaders and Executive Teams. The schedule is attached. Please contact Administration with the dates you would like to attend.

Middle Management Training is scheduled for August 4 and August 5. QHR representatives will be on site to assist Senior Management in the training.



Save the Date for Your
2021 Regional Meeting

Designed for Board Leaders & Executive Teams

- Same meeting agenda at all three locations
- Three unique regional experiences
- Save the date for the one experience (city) you would like in 2021!

More info and registration coming soon!



Fairmont Copley Plaza
Boston, Massachusetts

July 21-22, 2021



Cheyenne Mountain
Colorado Springs, Colorado

August 4-5, 2021



JW Marriott Nashville
Nashville, TN

August 18-19, 2021

© 2021 Quorum Health Resources

Our Mailing Address is: 1573 Mallory Lane, Suite 200 | Brentwood, TN | 37027

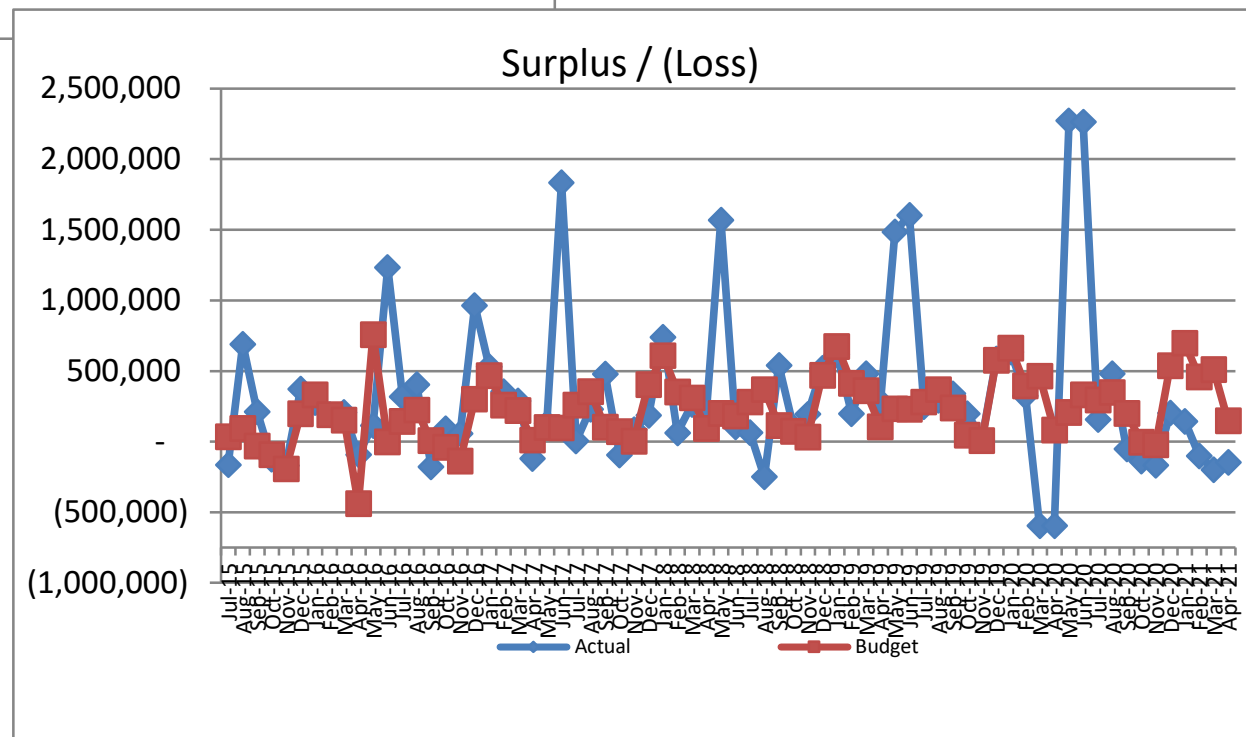
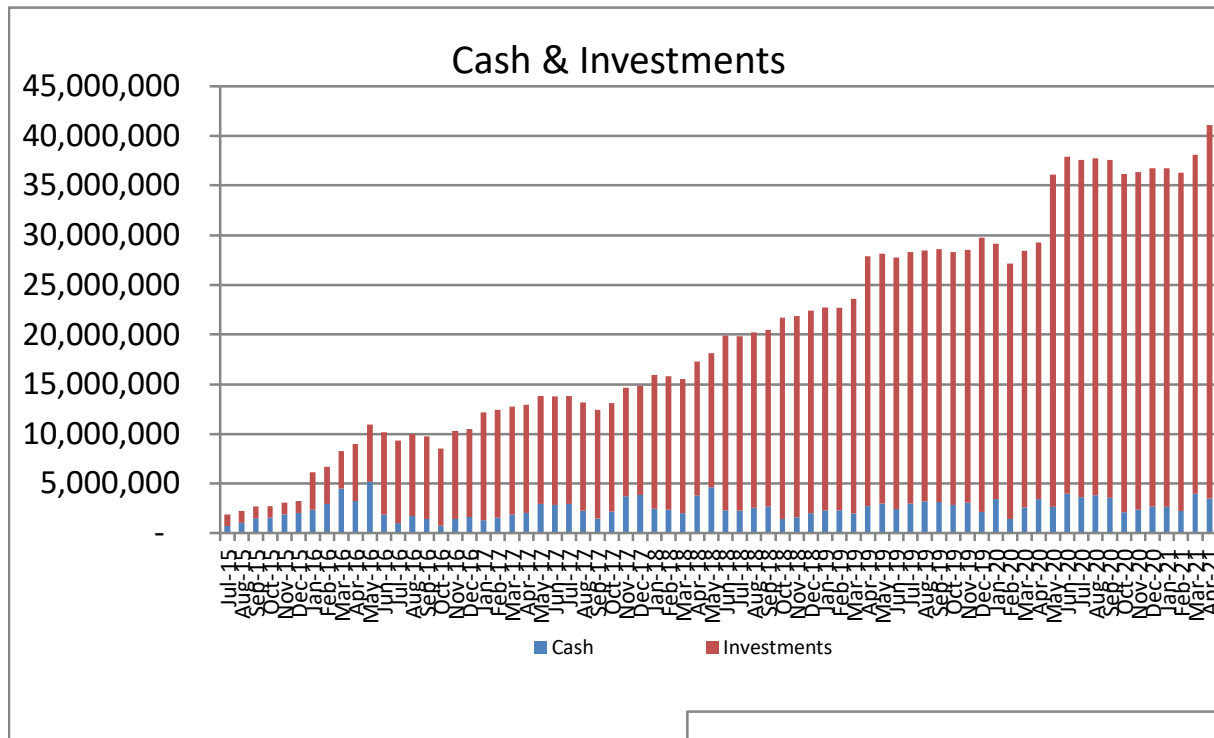
[Click Here](#) to manage your subscriptions.



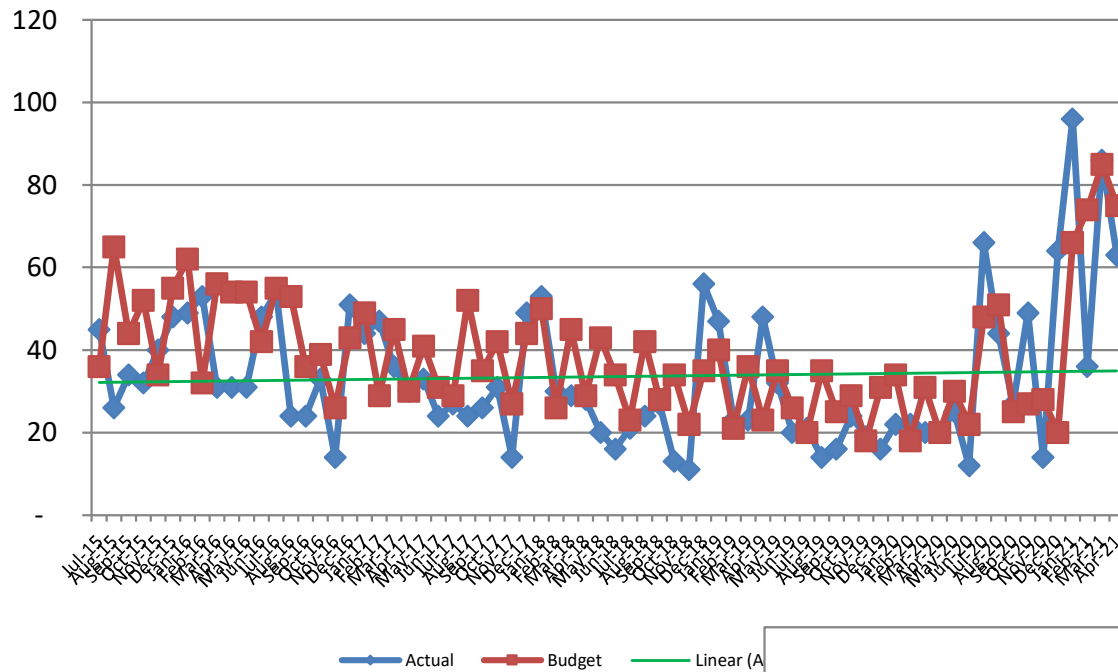
Finance Report
April 2021 Results

Summary for April 2021

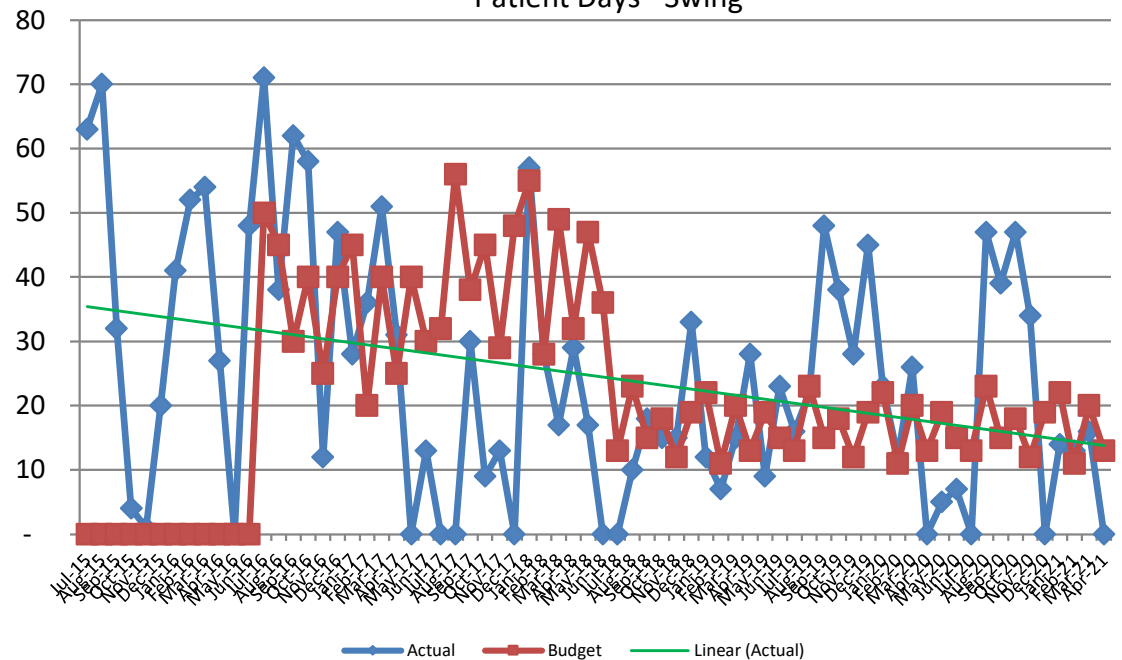
- Cash on hand \$ 3,501,483
Investments \$34,105,746
- Days Cash on hand, including investments with LAIF – 503
- (Loss) of \$145,701 was \$291,871 lower than budget
- Total Patient Revenue was 3.6% higher than Budget for the month
- Net Patient Revenue was 3.4% lower than budget
- Total Expenses were 8.2% more than budget

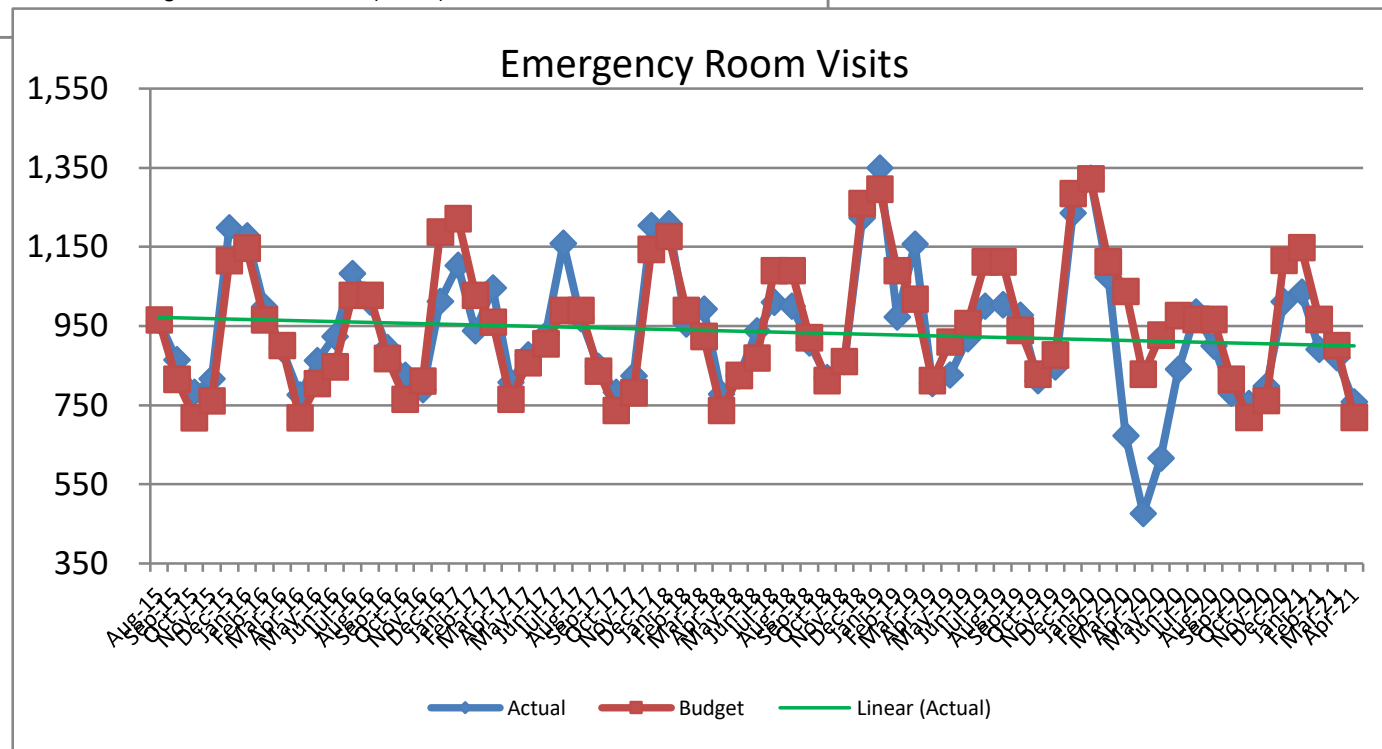
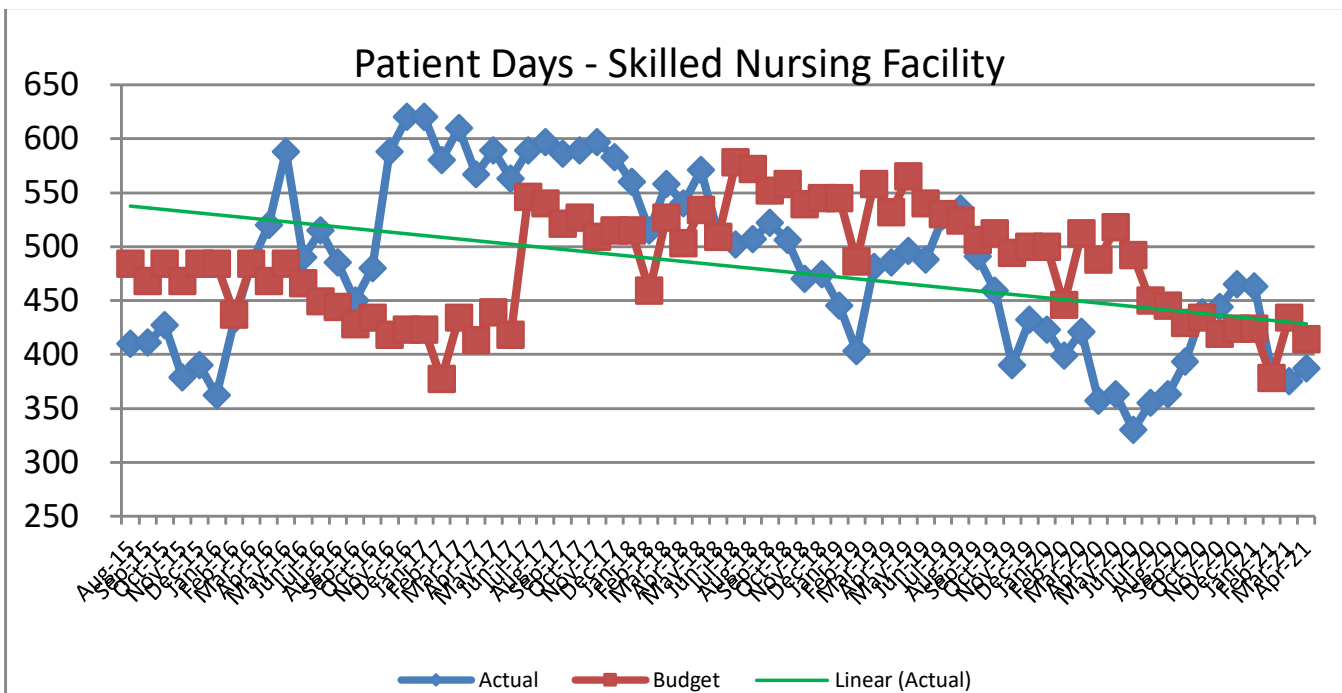


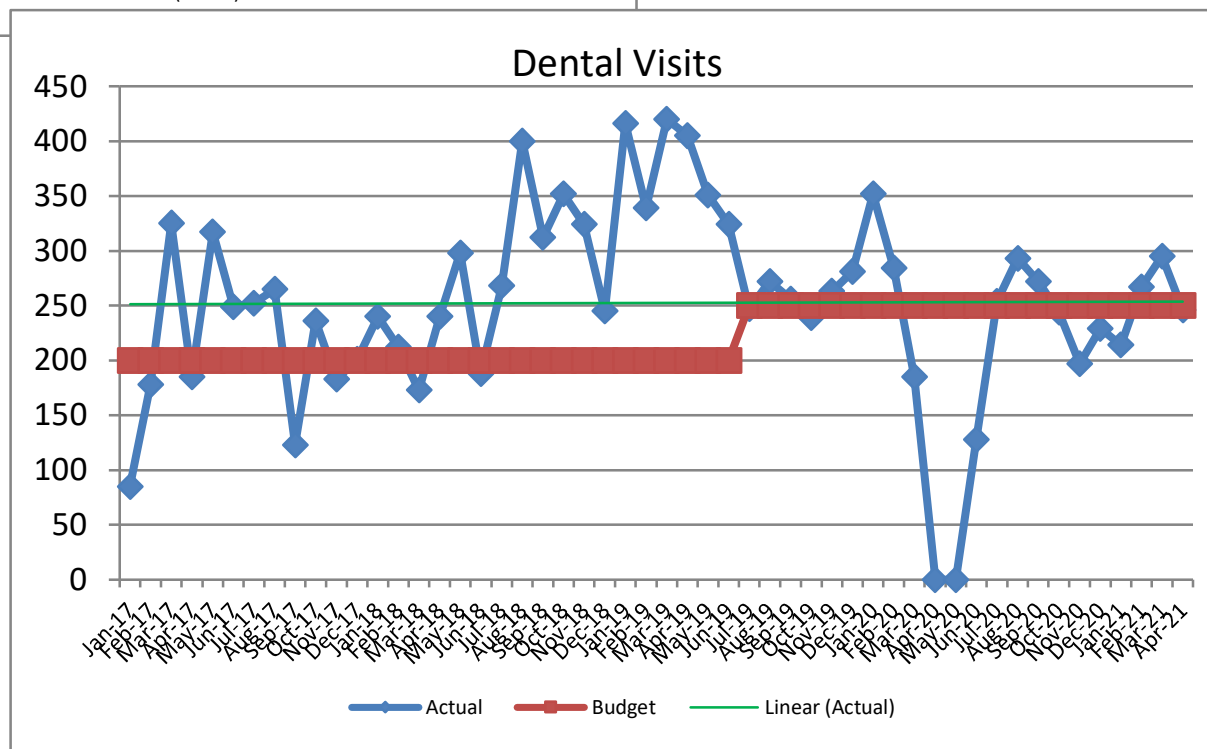
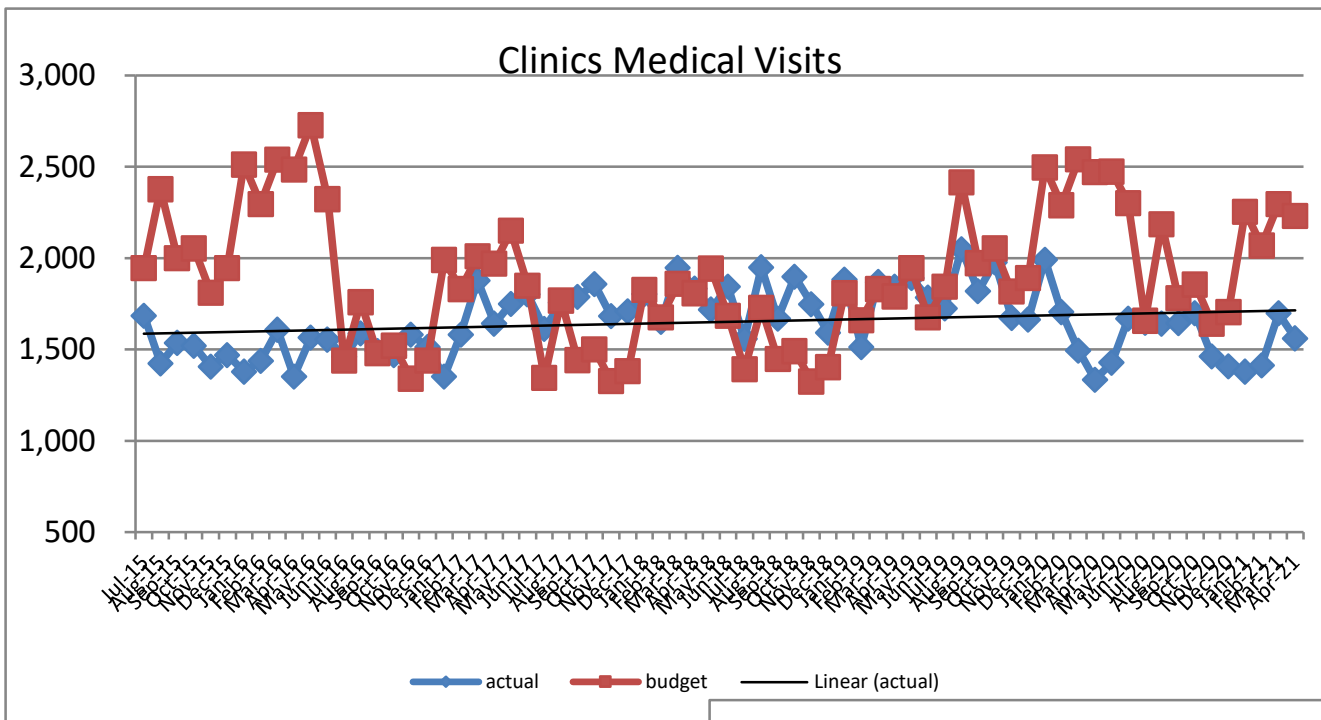
Patient Days - Acute

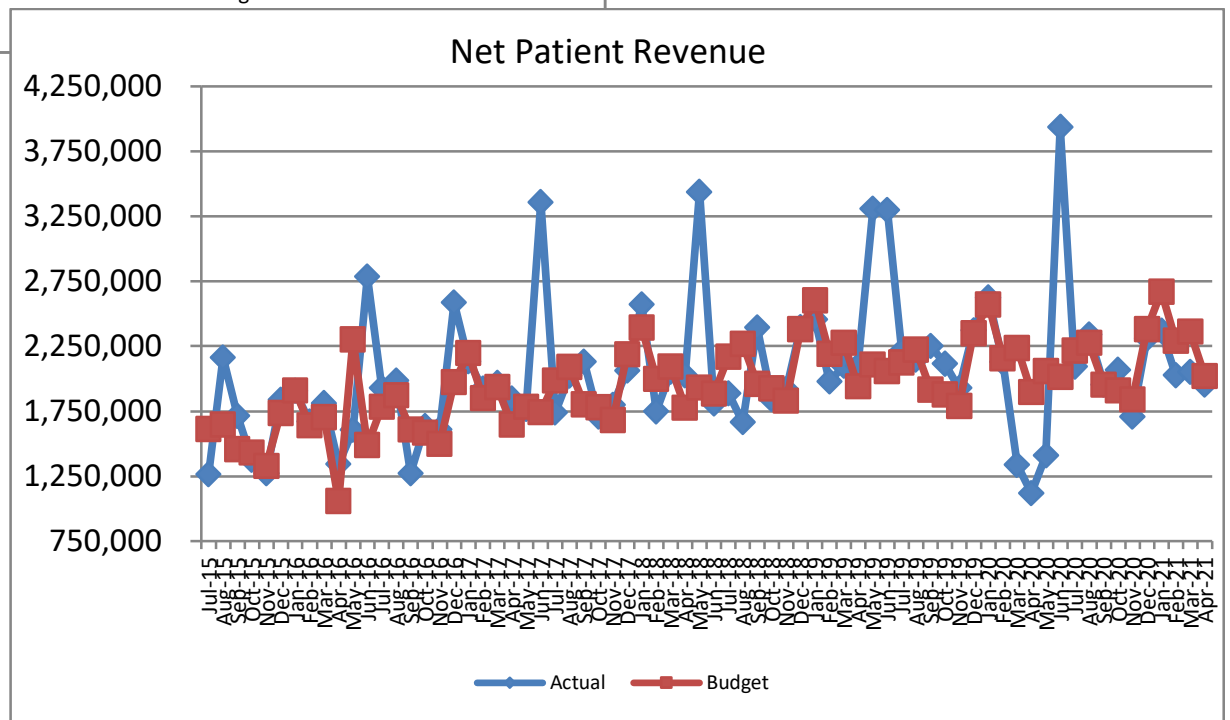
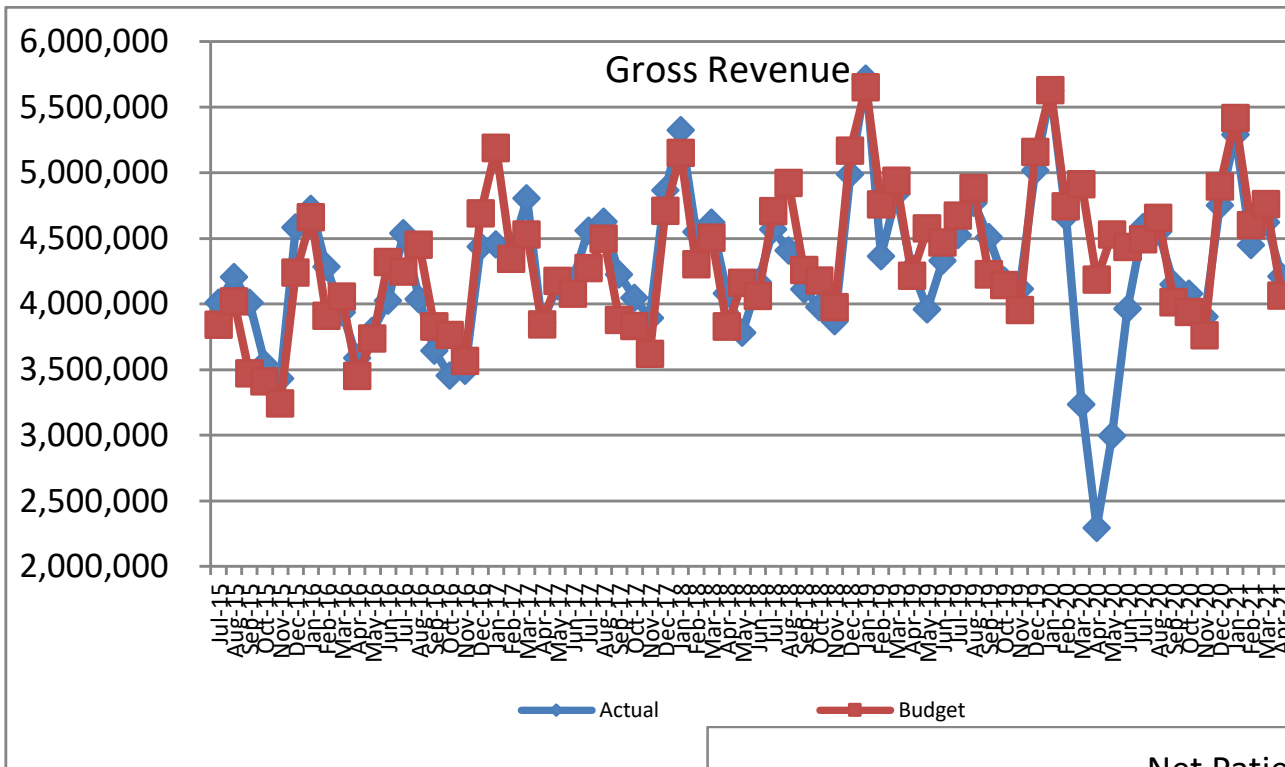


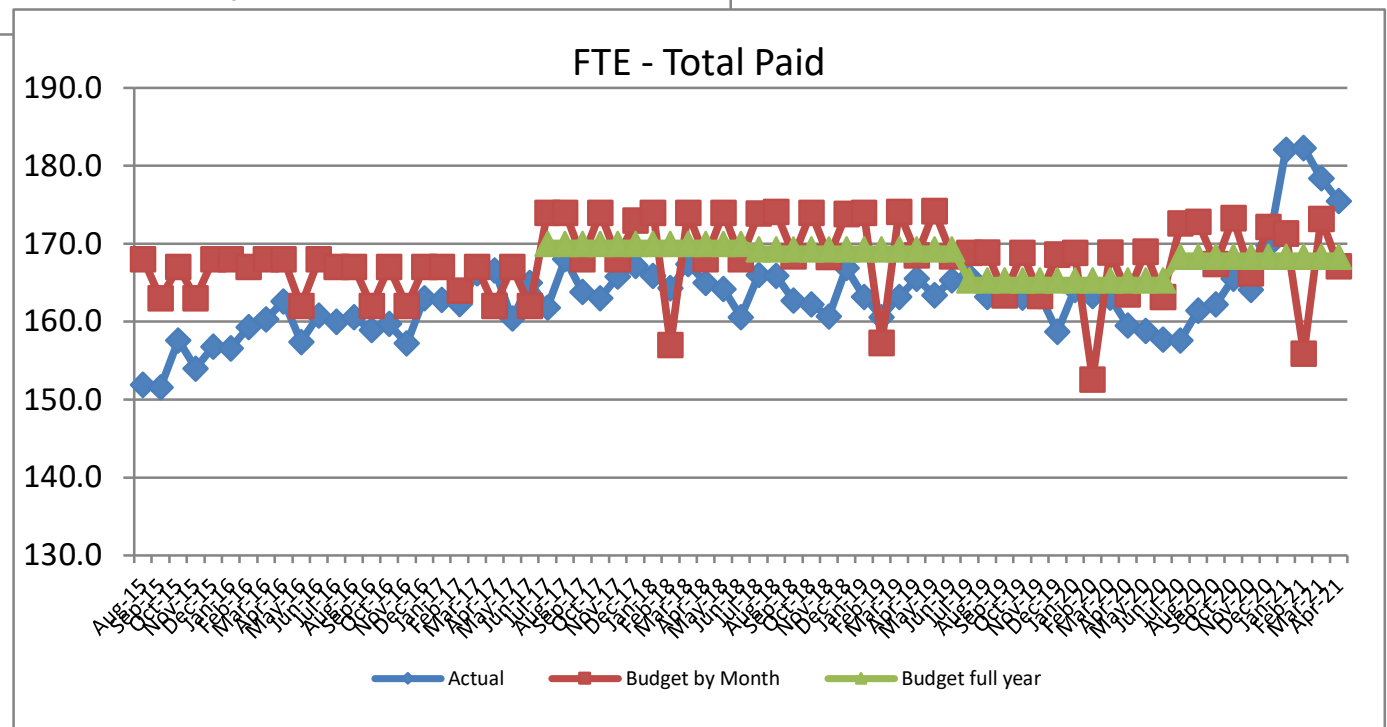
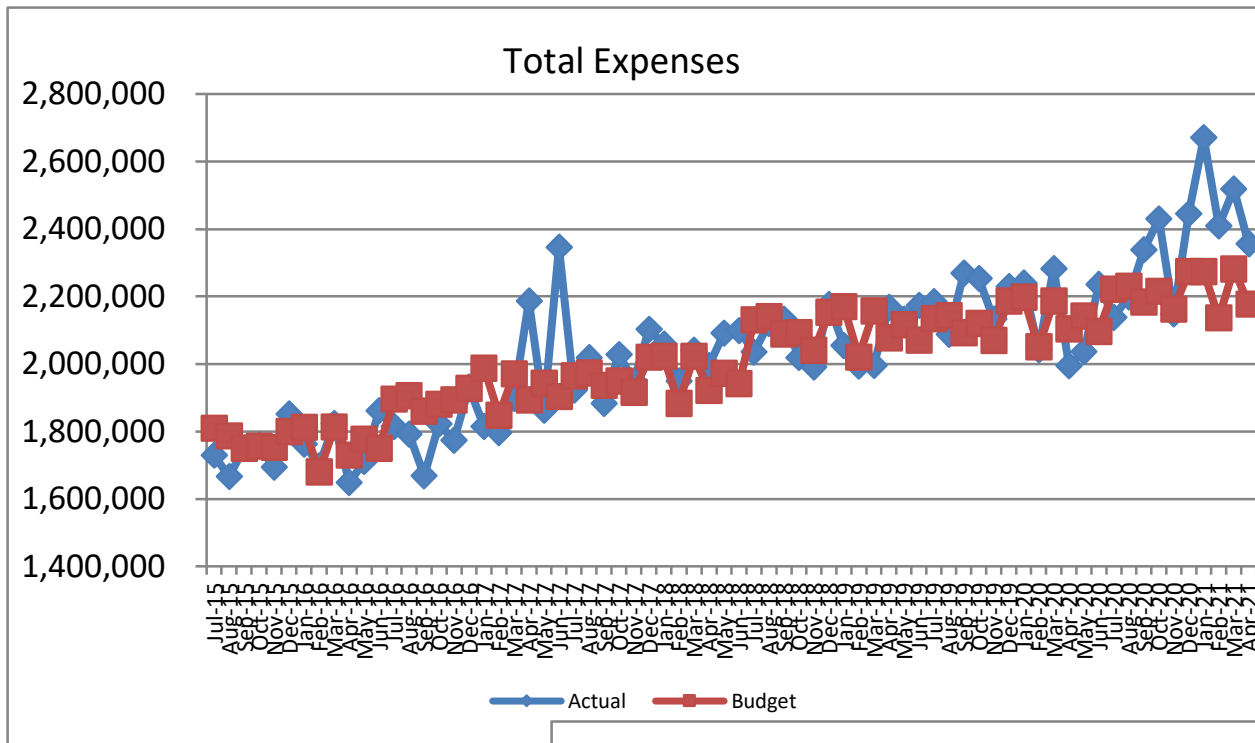
Patient Days - Swing

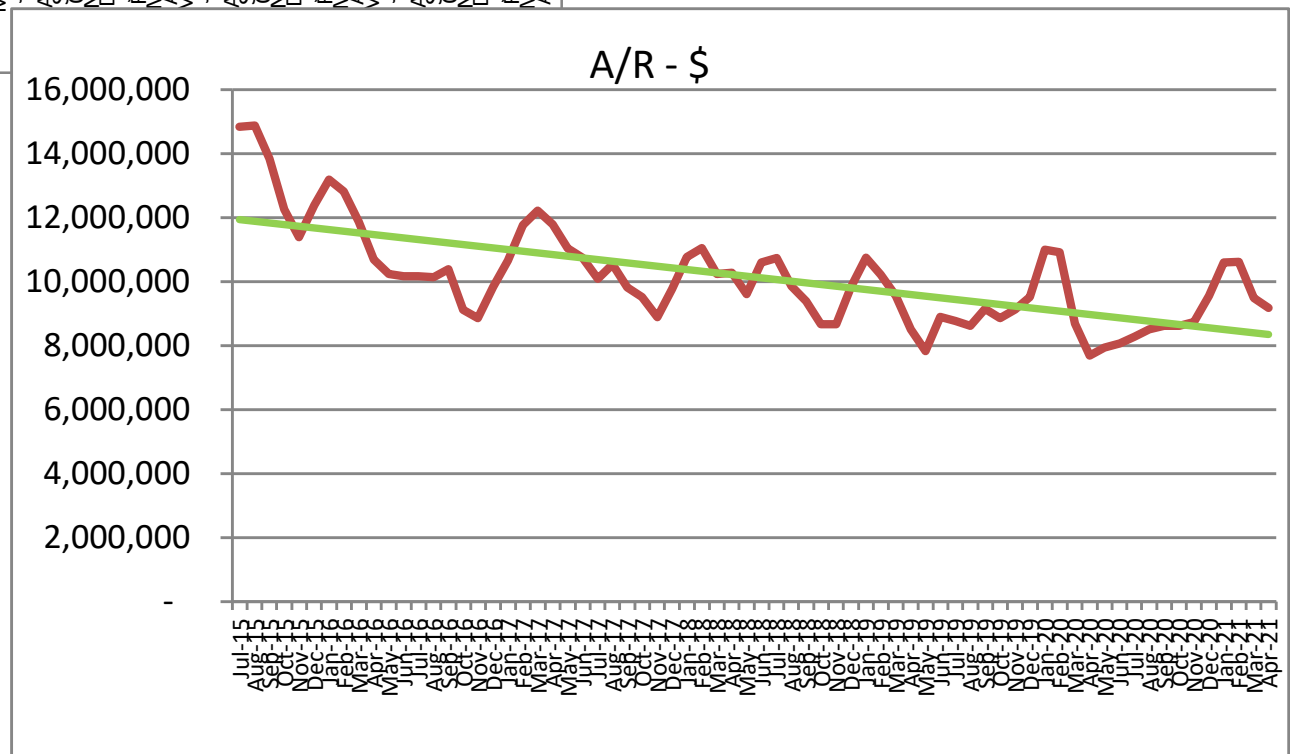
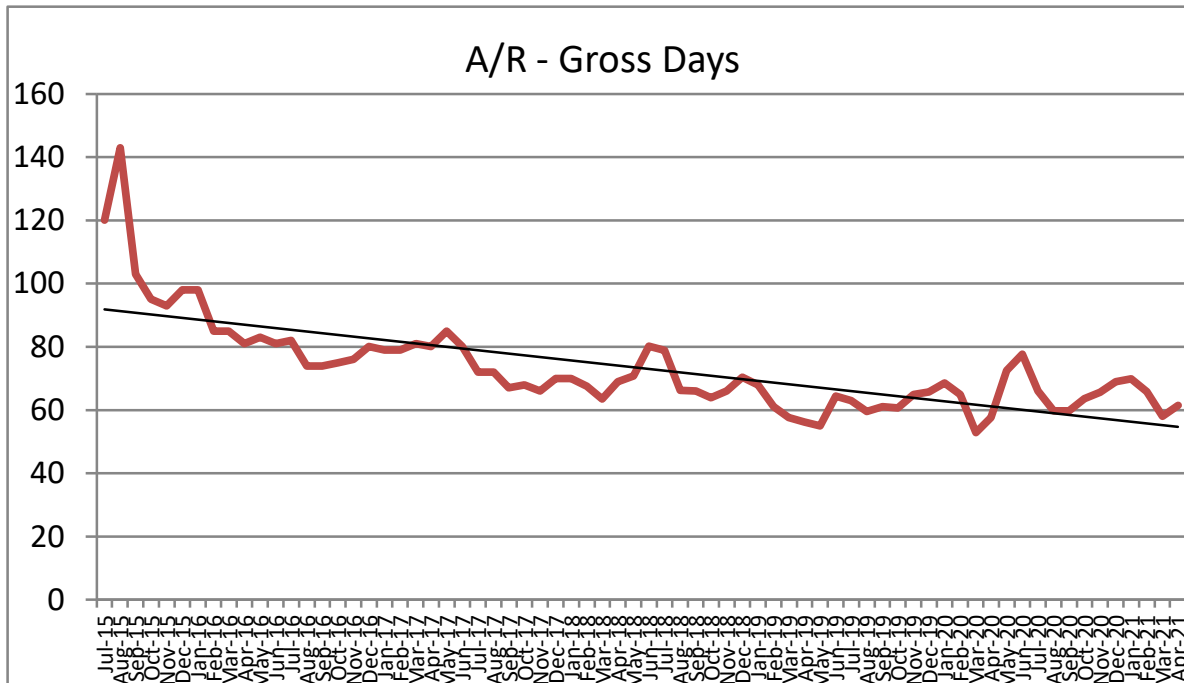














April 2021 Financial Results

For the month . . .

Total Patient Revenue for April 2021 was \$4,210,010. This was 3.6% or \$147,049 higher than budget. Inpatient revenue was 31.6% more than budget for the month. Outpatient revenue was 1.1% lower than budget. Clinic revenue was 19.1% under budget. ER revenue was 7.7% more than budget. Skilled Nursing Facility revenue was 7.6% lower than budget.

Total Revenue deductions of \$2,256,380 were 10.6% more than budget.

Total Operating Revenue of \$2,004,981 was 5.5% under our budgeted amount.

Total Expenses of \$2,356,530 were 8.2% more than budget. Salaries and Benefits were 13.8% more than budget as we continued higher staffing related to COVID 19. Supplies were 17.1% under budget.

Our Operating Cash and Investments total \$37,607,229 as of the end of month. Total days cash on hand as of the end of April 2021 were 503. Cash collections - \$1,897,419- were again strong for the month.

Key Statistics

Acute patient days of 63 were 16% below our budgeted number. We had no Swing Patient days for the month. Skilled Nursing Facility days of 387 were 7% under budget – our Average Daily Census was 12.9. ER Visits of 758 were 5.4% more than budget. Clinics Medical visits continue under budget. Dental visits were very close to budget for the month.

FTE (Full Time Equivalents) for the month were 175.5.

Year-to-Date (through 10 months of our Fiscal year)

Total patient revenue is right at the budgeted level

Total Operating Revenue is 6.5% lower than budget

Total Expenses are 6.8% more than budget

Our Surplus of \$178,686 is \$2,987,339 under budget

Bear Valley Community Healthcare District
Financial Statements April 30, 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	2,294,415	4,210,010	4,062,961	147,049	3.6%	42,943,826	44,591,627	44,607,169	(15,542)	0.0%
2 Total revenue deductions	1,173,250	2,256,380	2,040,983	215,397	10.6%	22,707,394	23,715,927	22,687,906	1,028,021	4.5%
3 % Deductions	51%	54%	50%			53%	53%	51%		
4 Net Patient Revenue	1,121,165	1,953,630	2,021,978	(68,348)	-3.4%	20,236,432	20,875,700	21,919,263	(1,043,563)	-4.8%
5 % Net to Gross	49%	46%	50%			47%	47%	49%		
6 Other Revenue	81,185	51,351	98,934	(47,583)	-48.1%	372,711	545,102	990,337	(445,235)	-45.0%
7 Total Operating Revenue	1,202,350	2,004,981	2,120,912	(115,931)	-5.5%	20,609,144	21,420,803	22,909,600	(1,488,797)	-6.5%
8 Total Expenses	1,995,640	2,356,530	2,177,280	179,250	8.2%	21,671,929	23,655,810	22,158,955	1,496,855	6.8%
9 % Expenses	87%	56%	54%			50%	53%	50%		
10 Surplus (Loss) from Operations	(793,289)	(351,549)	(56,368)	(295,181)	-523.7%	(1,062,786)	(2,235,008)	750,645	(2,985,653)	397.7%
11 % Operating margin	-35%	-8%	-1%			-2%	-5%	2%		
12 Total Non-operating	195,719	205,848	202,538	3,310	1.6%	2,552,383	2,413,693	2,415,380	(1,687)	-0.1%
13 Surplus/(Loss)	(597,570)	(145,701)	146,170	(291,871)	199.7%	1,489,597	178,686	3,166,025	(2,987,339)	94.4%
14 % Total margin	-26%	-3%	4%			3%	0%	7%		

BALANCE SHEET

	A	B	C	D	E
	April	April	March		
	FY 19/20	FY 20/21	FY 20/21	VARIANCE	
				Amount	%
15 Gross Accounts Receivables	7,695,961	9,169,968	9,490,339	(320,371)	-3.4%
16 Net Accounts Receivables	2,022,044	2,885,354	3,003,416	(118,062)	-3.9%
17 % Net AR to Gross AR	26%	31%	32%		
18 Days Gross AR	67.9	61.4	58.1	3.3	5.7%
19 Cash Collections	1,474,744	1,897,419	2,419,887	(522,468)	-21.6%
20 Settlements/IGT Transactions	871,483	75,773	1,720,513	(1,644,740)	-95.6%
Stimulus Receipts	-	-	-	-	#DIV/0!
21 Investments	25,834,716	34,105,746	34,105,746	-	0.0%
22 Cash on hand	3,448,025	3,501,483	3,975,199	(473,716)	-11.9%
23 Total Cash & Invest	29,282,741	37,607,229	38,080,945	(473,716)	-1.2%
24 Days Cash & Invest	429	503	510	(6)	-1.2%
Total Cash and Investments	29,282,741	37,607,229			
Increase Current Year vs. Prior Year		8,324,488			

Bear Valley Community Healthcare District
Financial Statements April 30, 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	81,398	225,258	171,119	54,139	31.6%	1,175,280	2,219,818	1,420,791	799,027	56.2%
2 Outpatient	337,744	818,519	828,034	(9,515)	-1.1%	7,797,005	8,379,063	8,430,730	(51,667)	-0.6%
3 Clinic Revenue	229,803	319,634	395,311	(75,677)	-19.1%	3,526,827	3,114,761	3,621,052	(506,291)	-14.0%
4 Emergency Room	1,487,044	2,674,571	2,482,358	192,213	7.7%	28,474,883	29,065,334	29,248,392	(183,058)	-0.6%
5 Skilled Nursing Facility	158,427	172,028	186,139	(14,111)	-7.6%	1,969,831	1,812,651	1,886,204	(73,553)	-3.9%
6 Total patient revenue	2,294,415	4,210,010	4,062,961	147,049	3.6%	42,943,826	44,591,627	44,607,169	(15,542)	0.0%
Revenue Deductions										
7 Contractual Allow	1,026,743	2,323,468	1,803,216	520,252	28.9%	21,115,731	21,797,311	20,040,716	1,756,595	8.8%
8 Contractual Allow PY	(175,000)	(150,000)	-	(150,000)	#DIV/0!	(1,724,101)	(1,695,781)	-	(1,695,781)	#DIV/0!
9 Charity Care	15,559	6,715	12,520	(5,805)	-46.4%	142,323	180,090	139,393	40,697	29.2%
10 Administrative	1,839	1,881	5,858	(3,977)	-67.9%	61,149	47,120	65,219	(18,099)	-27.8%
11 Policy Discount	10,022	17,613	14,603	3,010	20.6%	157,871	156,851	162,578	(5,727)	-3.5%
12 Employee Discount	3,638	16,357	4,046	12,311	304.3%	44,608	100,440	45,052	55,388	122.9%
13 Bad Debts	160,364	(24,971)	200,740	(225,711)	-112.4%	2,068,650	2,265,197	2,234,948	30,249	1.4%
14 Denials	58,918	65,318	-	65,318	#DIV/0!	841,163	864,699	-	864,699	#DIV/0!
15 Total revenue deductions	1,173,250	2,256,380	2,040,983	215,397	10.6%	22,707,394	23,715,927	22,687,906	1,028,021	4.5%
Net Patient Revenue	1,121,165	1,953,630	2,021,978	(68,348)	-3.4%	20,236,432	20,875,700	21,919,263	(1,043,563)	-4.8%
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	81,185	51,351	98,934	(47,583)	-48.1%	372,711	545,102	990,337	(445,235)	-45.0%
18 Total Operating Revenue	1,202,350	2,004,981	2,120,912	(115,931)	-5.5%	20,609,144	21,420,803	22,909,600	(1,488,797)	-6.5%
Expenses										
19 Salaries	852,964	987,947	868,414	119,533	13.8%	9,109,439	10,210,674	8,789,930	1,420,744	16.2%
20 Employee Benefits	301,532	334,760	317,555	17,205	5.4%	3,065,611	3,262,881	3,166,212	96,669	3.1%
21 Registry	-	26,730	-	26,730	#DIV/0!	8,250	297,335	-	297,335	#DIV/0!
22 Salaries and Benefits	1,154,496	1,349,437	1,185,969	163,468	13.8%	12,183,299	13,770,891	11,956,142	1,814,749	15.2%
23 Professional fees	152,025	162,508	178,637	(16,129)	-9.0%	1,725,084	1,641,167	1,861,426	(220,259)	-11.8%
24 Supplies	90,336	130,080	156,944	(26,864)	-17.1%	1,480,120	1,866,598	1,621,176	245,422	15.1%
25 Utilities	36,266	42,606	40,017	2,589	6.5%	410,108	368,051	466,635	(98,584)	-21.1%
26 Repairs and Maintenance	53,447	45,723	49,954	(4,231)	-8.5%	620,224	469,008	500,855	(31,847)	-6.4%
27 Purchased Services	275,536	385,560	351,679	33,881	9.6%	3,195,063	3,469,787	3,611,433	(141,646)	-3.9%
28 Insurance	51,373	37,712	37,371	341	0.9%	336,509	374,931	373,710	1,221	0.3%
29 Depreciation	88,025	118,291	80,156	38,135	47.6%	842,693	939,946	801,560	138,386	17.3%
30 Rental and Leases	24,132	25,551	27,607	(2,056)	-7.4%	140,763	190,029	275,854	(85,825)	-31.1%
32 Dues and Subscriptions	5,499	13,651	6,318	7,333	116.1%	59,514	71,861	63,180	8,681	13.7%
33 Other Expense	64,505	45,411	62,628	(17,217)	-27.5%	678,553	493,541	626,984	(133,443)	-21.3%
34 Total Expenses	1,995,640	2,356,530	2,177,280	179,250	8.2%	21,671,929	23,655,810	22,158,955	1,496,855	6.8%
35 Surplus (Loss) from Operations	(793,289)	(351,549)	(56,368)	(295,181)	-523.7%	(1,062,786)	(2,235,008)	750,645	(2,985,653)	397.7%
Non-Operating Income										
37 Tax Revenue	201,917	204,167	204,167	-	0.0%	2,019,170	2,041,670	2,041,670	-	0.0%
38 Other non-operating	20	7,207	5,750	1,457	25.3%	167,803	267,437	57,500	209,937	365.1%
Interest Income	1,190	1,704	100	1,604	1603.5%	440,596	179,210	391,000	(211,790)	-54.2%
Interest Expense	(7,408)	(7,230)	(7,479)	249	-3.3%	(75,187)	(74,624)	(74,790)	166	-0.2%
IGT Expense	-	-	-	-	#DIV/0!	-	-	-	-	#DIV/0!
39 Total Non-operating	195,719	205,848	202,538	3,310	1.6%	2,552,383	2,413,693	2,415,380	(1,687)	-0.1%
40 Surplus/(Loss)	(597,570)	(145,701)	146,170	(291,871)	199.7%	1,489,597	1,788,666	3,166,023	(2,984,339)	94.4%

**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		2,219,818
2	Outpatient	759,975	752,158	750,715	801,463	624,126	972,010	1,087,803	899,363	912,932	818,519		8,379,063
3	Clinic	329,815	343,539	335,783	317,785	289,299	284,301	267,256	293,223	334,126	319,634		3,114,761
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		29,065,334
5	Skilled Nursing Facility	158,091	161,978	175,237	194,783	198,304	206,578	205,851	171,894	167,907	172,028		1,812,651
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	-	44,591,627
Revenue Deductions													
C/A	0.49	0.48	0.50	0.48	0.46	0.45	0.51	0.47	0.48	0.55	#DIV/0!	#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		21,797,311
8	Contractual Allow PY	(100,000)	(396,823)	(150,000)	(236,579)	(150,000)	(150,000)	-	(173,542)	(188,836)	(150,000)		(1,695,781)
9	Charity Care	25,028	30,141	26,357	11,798	12,356	1,748	15,701	13,627	36,620	6,715		180,090
10	Administrative	(3,946)	9,457	8,699	(1,853)	1,439	5,530	3,610	9,162	13,140	1,881		47,120
11	Policy Discount	17,491	11,862	11,554	16,004	11,637	15,336	20,719	16,334	18,301	17,613		156,851
12	Employee Discount	7,661	5,909	6,791	1,305	8,195	5,918	15,294	19,553	13,458	16,357		100,440
13	Bad Debts	256,673	240,011	132,574	178,790	389,713	334,477	63,899	333,629	360,402	(24,971)		2,265,197
14	Denials	29,487	109,385	76,018	77,928	125,677	76,754	87,739	113,837	102,557	65,318		864,699
	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	-	23,715,927
		0.54	0.49	0.53	0.49	0.56	0.51	0.55	0.54	0.56	0.54	#DIV/0!	#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	-	20,875,700
	net / tot pat rev	45.6%	51.4%	47.1%	50.7%	43.7%	48.6%	44.7%	45.6%	44.4%	46.4%	#DIV/0!	46.8%
Other Revenue													
17		5,722	137,886	44,163	27,253	74,691	67,363	26,941	81,009	28,724	51,351		545,102
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	-	21,420,803
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		10,210,674
20	Employee Benefits	320,367	271,080	397,159	311,730	283,861	350,869	308,840	367,581	316,634	334,760		3,262,881
21	Registry	-	11,553	50,270	31,930	5,425	6,696	40,390	34,600	89,742	26,730		297,335
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	-	13,770,891
23	Professional fees	165,124	162,933	161,100	163,056	157,606	178,669	175,476	145,510	169,184	162,508		1,641,167
24	Supplies	108,268	154,942	169,080	177,583	128,781	237,684	340,533	238,374	181,273	130,080		1,866,598
25	Utilities	33,935	34,590	34,797	33,317	32,071	34,994	39,020	41,070	41,650	42,606		368,051
26	Repairs and Maintenance	57,780	48,999	46,434	61,619	44,387	50,897	35,404	42,847	34,920	45,723		469,008
27	Purchased Services	332,918	353,033	373,584	337,780	310,335	349,372	348,295	320,730	358,181	385,560		3,469,787
28	Insurance	60,863	11,090	37,712	37,843	37,712	37,712	37,712	38,863	37,712	37,712		374,931
29	Depreciation	91,295	91,295	91,295	91,295	91,295	91,295	91,295	91,295	91,295	118,291		939,946
30	Rental and Leases	19,149	16,590	16,141	17,078	16,455	16,655	24,236	18,371	19,804	25,551		190,029
32	Dues and Subscriptions	7,269	6,659	8,205	5,676	3,874	5,231	8,805	5,981	6,511	13,651		71,861
33	Other Expense.	16,461	80,579	51,138	38,177	60,309	64,228	36,115	52,636	48,488	45,411		493,541
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	-	23,655,810
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)	-	(2,235,008)
Non-Operating Income													
37	Tax Revenue	204,167	204,167	204,167	204,167	204,167	204,167	204,167	204,167	204,167	204,167		2,041,670
38	Other non-operating	(1,680)	4,102	17,020	1,270	20	10,020	231,420	320	(2,262)	7,207		267,437
	Interest Income	214	726	73,547	957	1,156	55,390	918	1,319	43,279	1,704		179,210
	Interest Expense	(7,381)	(7,340)	(7,302)	(7,296)	(7,645)	(225)	(15,119)	(7,691)	(7,394)	(7,230)		(74,624)
	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	-	2,413,693
Surplus/(Loss)													
40		154,638	480,624	(51,788)	(136,426)	(168,386)	202,215	144,693	(101,827)	(199,355)	(145,701)	-	178,686

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	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	3,981,146
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	8,079,622
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	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	2,318,898
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	52,606
Other Receivables	-871,228	-858,343	-14,296	309,602	-316,447	79,061	-8,914	-2,722	-1,315	555,020	87,734
Inventories	195,677	206,729	222,028	237,616	244,545	265,070	283,177	285,218	283,129	288,202	178,033
Prepaid Expenses	513,673	474,367	511,153	549,299	505,105	447,001	461,013	468,360	382,841	357,258	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	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	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
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	34,087,039
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
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	10,157,771
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	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	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	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	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	10,807,758
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	51,827,033
Restricted Assets	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	51,827,033

2020-2021 Actual BS

BALANCE SHEET

PY Includes final AJES

LIABILITIES:

Current Liabilities

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	June
Accounts Payable	996,145	982,173	1,175,157	961,118	814,623	894,939	916,758	978,179	816,415	721,634	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	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	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	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
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	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	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	2,815,000
Leases Payable	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
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	2,815,000

Other Long Term Liabilities

Deferred Revenue	0	0	0	0	0	0	0	0	0	0	0
Other	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

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 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	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	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 39,042,608

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 51,827,033

Units of Service												
For the period ending April 30, 2021												
30						304						
Current Month						Bear Valley Community Hospital						
						Year-To-Date						
Apr-21	Apr-20	Actual -Budget		Act.-Act.		Apr-21	Apr-20	Actual -Budget		Act.-Act.		
Actual	Budget	Actual	Variance	Var %	Var %	Actual	Budget	Actual	Variance	Var %	Var %	
63	75	48	(12)	-16.0%	31.3%	Med Surg Patient Days	545	499	293	46	9.2%	86.0%
-	13	28	(13)	0.0%	-100.0%	Swing Patient Days	210	166	153	44	26.5%	37.3%
387	414	485	(27)	-6.5%	-20.2%	SNF Patient Days	4,069	4,251	4,795	(182)	-4.3%	-15.1%
450	502	561	(52)	-10.4%	-19.8%	Total Patient Days	4,824	4,916	5,241	(92)	-1.9%	-8.0%
19	17	12	2	11.8%	58.3%	Acute Admissions	137	146	115	(9)	-6.2%	19.1%
22	17	12	5	29.4%	83.3%	Acute Discharges	135	146	114	(11)	-7.5%	18.4%
2.9	4.4	4.0	(2.4)	-54.4%	-28.4%	Acute Average Length of Stay	4.0	3.4	2.6	(4.2)	-122.4%	57.1%
2.1	2.5	1.60	(0.40)	-16.0%	31.3%	Acute Average Daily Census	1.8	2	1.0	0.2	9.2%	86.0%
12.9	14.2	17.1	(1.3)	-9.4%	-24.6%	SNF/Swing Avg Daily Census	14.1	15	16.3	(0.5)	-3.1%	-13.5%
15.0	16.7	18.7	(1.7)	-10.4%	-19.8%	Total Avg. Daily Census	15.9	16	17.2	(0.3)	-1.9%	-8.0%
33%	37%	42%	-4%	-10.4%	-19.8%	% Occupancy	35%	36%	38%	-1%	-1.9%	-8.0%
6	12	12	(6)	-50.0%	-50.0%	Emergency Room Admitted	56	120	99	(64)	-53.3%	-43.4%
752	707	10,006	45	6.4%	-92.5%	Emergency Room Discharged	8,726	8,958	10,006	(232)	-2.6%	-12.8%
758	719	10,018	39	5.4%	-92.4%	Emergency Room Total	8,782	9,078	10,105	(296)	-3.3%	-13.1%
25	24	334	1	5.4%	-92.4%	ER visits per calendar day	29	30	33	(1)	-3.3%	-13.1%
32%	71%	100%	-33%	-47.2%	-68.4%	% Admits from ER	41%	82%	86%	14%	17.1%	-52.5%
-	-	-	-	0.0%	#DIV/0!	Surgical Procedures I/P	1	-	-	1	0.0%	#DIV/0!
7	9	13	(2)	-22.2%	-46.2%	Surgical Procedures O/P	51	87	124	(36)	-41.4%	-58.9%
7	9	13	(2)	-22.2%	-46.2%	TOTAL Procedures	52	87	124	(35)	-40.2%	-58.1%
334	749	806	(415)	-55.4%	-58.6%	Surgical Minutes Total	3,836	7,590	8,469	(3,754)	-49.5%	-54.7%

Units of Service
For the period ending April 30, 2021

Bear Valley Community Hospital												
Current Month						Year-To-Date						
Apr-21 Actual	Budget	Apr-20 Actual	Actual -Budget Variance	Var %	Act.-Act. Var %		Apr-21 Actual	Budget	Apr-20 Actual	Actual -Budget Variance	Var %	Act.-Act. Var %
6,367	6,578	6,639	(211)	-3.2%	-4.1%	Lab Procedures	61,900	62,953	9,061	(1,053)	-1.7%	583.1%
698	799	798	(101)	-12.6%	-12.5%	X-Ray Procedures	7,580	9,067	8,032	(1,487)	-16.4%	-5.6%
335	267	234	68	25.5%	43.2%	C.T. Scan Procedures	3,417	3,155	2,877	262	8.3%	18.8%
175	204	216	(29)	-14.2%	-19.0%	Ultrasound Procedures	1,805	1,950	2,199	(145)	-7.4%	-17.9%
44	54	52	(10)	-18.5%	-15.4%	Mammography Procedures	423	540	497	(117)	-21.7%	-14.9%
345	299	328	46	15.4%	5.2%	EKG Procedures	2,742	2,984	2,877	(242)	-8.1%	-4.7%
89	122	124	(33)	-27.0%	-28.2%	Respiratory Procedures	853	1,151	1,116	(298)	-25.9%	-23.6%
1,439	1,655	2,538	(216)	-13.1%	-43.3%	Physical Therapy Procedures	14,394	15,114	14,975	(720)	-4.8%	-3.9%
1,560	2,232	1,845	(672)	-30.1%	-15.4%	Primary Care Clinic Visits	15,554	19,681	17,529	(4,127)	-21.0%	-11.3%
246	250	405	(4)	-1.6%	-39.3%	Specialty Clinic Visits	2,511	2,500	3,481	11	0.4%	-27.9%
1,806	2,482	2,250	(676)	-27.2%	-19.7%	Clinic	18,065	22,181	21,010	(4,116)	-18.6%	-14.0%
69	95	87	(26)	-27.2%	-19.7%	Clinic visits per work day	99	122	115	(23)	-18.6%	-14.0%
15.2%	19.00%	21.00%	-3.80%	-20.00%	-27.62%	% Medicare Revenue	15.59%	19.00%	18.36%	-3.41%	-17.95%	-15.09%
41.40%	37.00%	37.40%	4.40%	11.89%	10.70%	% Medi-Cal Revenue	35.49%	37.00%	37.02%	-1.51%	-4.08%	-4.13%
39.20%	39.00%	37.40%	0.20%	0.51%	4.81%	% Insurance Revenue	43.24%	39.00%	39.59%	4.24%	10.87%	9.22%
4.20%	5.00%	4.20%	-0.80%	-16.00%	0.00%	% Self-Pay Revenue	5.68%	5.00%	5.03%	0.68%	13.60%	12.92%
155.2	151.4	146.6	3.8	2.5%	5.9%	Productive FTE's	149.59	153.3	143.1	(3.7)	-2.4%	4.6%
175.5	167.1	163.7	8.4	5.0%	7.2%	Total FTE's	169.89	169.2	163.7	0.7	0.4%	3.8%



CFO REPORT for

June 2021 Finance Committee and Board Meetings

PPP Loan Forgiveness Status

Things seem to be progressing. We recently had a request for one item of additional information.

CARES Act funding

We still have 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)

The state of California has made available (at no charge) and we have applied for a 30 day supply of PPE (Personal Protective Equipment).

Urgent Care proformas

Below is a summary comparison two options that have been considered for Urgent Care Center -

	Acquisition of Existing Practice First Year	Without Acquisition First Year
Statistics		
Projected Increase in Cases	3,650	1,829
Projected Charge per Case	215	215
Projected Payor Utilization		
<i>Medicare</i>	14%	25%
<i>Medicaid</i>	77%	0%
<i>HMO/PPO</i>	6%	74%
<i>Other</i>	4%	0%
Revenue		
Gross Revenue (line 1 x 2)	784,750	393,301
Total Contractual Adjustments	443,501	165,483
Net Revenue	341,249	227,818
<i>Per Case</i>	93.49	124.54
<i>% Gross Revenue</i>	43.5%	57.9%
Expenses		
Total Operating Expense	796,950	692,848
Operating Margin (line 6 - line 13)	(455,702)	(465,030)
Operating Margin %	-133.5%	-204.1%
Depreciation	33,748	61,873
Total expenses (line 13 + line 14)	830,698	754,721
Net Income (Loss)	(491,449)	(526,902)

COVID-19 Expenses / Funding

Again in March 2021, we continued to see increased expenditures as a result of the Pandemic – mainly salaries, wages, and contract staff.

As we have discussed, we have some reserves to meet additional costs. We will work with wipfli (firm that prepares Cost Report) on reporting of CARES Act funds. We have applied for forgiveness of Paycheck Protection Program. We do not yet have word on the status of these funds.