

A meeting of the McAlester Regional Health Center Authority was held at 4:00 PM, on Wednesday July 10, 2019 at McAlester Regional Health Center in the Administration Board Room. Public notice, setting forth there on the day, time and place for this regular meeting had been delivered to the office of the City Clerk at 01:20 PM on Tuesday July 09, 2019.

TRUSTEES PRESENT:

Susan Kanard ~ Brent Grilliot ~ Weldon Smith, Chairman ~ Kevin Priddle ~ Marti Fields ~ Mary Shannon ~ Evans McBride ~ James Bland

TRUSTEES ABSENT:

Mark Sehgal, MD

HOSPITAL STAFF:

David Keith, Sonya Stone, Recording Secretary, Jim Fraser, Tim Cathey, M.D., Lucy Muller, Heather French, Kim Stout, Chris Plunkett, Shawn Howard

OTHER ATTENDEES:

Karen Rieger, Legal Counsel, Pete Stasiak, City Manager, Kenneth Miller, MD, Sharon Addicks,

CALL TO ORDER:

Chairman Smith called the meeting to order at 4:00 PM.

Public Comment: None

Consent Agenda:

1. MRHCA Board of Trustees minutes for June 05, 2019 and June 18, 2019
2. Credentialing & Privileging List

A. Approval of appointment for Provisional Credentialing and Privileges for one year per the recommendation of the Medical Executive Committee:

1. Stephen Judd Orgill, DO ~ Provisional Active Staff ~ Psychiatry

B. Approval of appointments for Reappointment (Advancement) credentialing and privileges for two years per the recommendation of the Medical Executive Committee:

1. Chelsea Berges, DO ~ Active Staff ~ Family Medicine
2. Pedro Cardich, MD ~ Active Staff ~ Neurology/Physical Medicine & Rehabilitation
3. Sejong Lee, MD ~ Active Staff ~ Radiology
4. Bob Burlison, PA-C ~ Affiliate Staff ~ Physician Assistant/Urgent Care (Supervising: Dr. Gerald Rana)
5. Rachele Bradford, APRN ~ Affiliate Staff ~ Nurse Practitioner/Urgent Care (Supervising: Dr. Karen Siren)

C. Approval of appointments for Additional Items for one year per the recommendation of the Medical Executive Committee

1. Jonathan Rohloff, DO ~ Provisional Active Staff ~ Hospitalist

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D. Approval of Voluntary Resignations as follows:

1. Rabeep Grewal, MD ~ Physical Medicine & Rehabilitation ~ 06/05/2019 ~ Locums
- 2 David Li, MD ~ Tele Radiologist ~ 10/21/2018 ~ Envision

3. June 7 2019 MRHC Agreement Log

A Motion was made (Fields) and seconded (Kanard) to approve consent agenda items one (1), two (2) and three (3) as presented. The vote was taken as follows: Aye: Marti Fields, Susan Kanard, Evans McBride, James Bland, Mary Shannon, Kevin Priddle, Brent Grilliot and Weldon Smith.

Nay: None. Absent: Mark Sehgal, MD. Abstain: None. Chairman Smith declared the motion carried.

MRHC Board of Trustees Education & Discussion - Module 6 – Nursing and Allied Health Professionals: Ms.

Lucy Muller reported the educational presentation was distributed to the Board prior to the meeting therefore she will only provide a brief overview. She reported nurses are the largest single component of the hospital, the primary providers for hospital inpatient care and they deliver most of the nation's long term care. The massive reductions in nursing budgets has resulted in fewer nurses and working longer hours while caring for sicker patients. Nursing retention is directly tied to stability in the patient care environment and nursing and patient care excellence. Ms. Muller reported that MRHC has placed a focus on nursing by contacting nurse applicants within two hours of application, team interviewing, "growing our own", evaluating wages, increasing staff and evaluating safety concerns daily. Ms. Muller shared areas where the Board can actively participate in supporting the nursing staff. She reported the Board can work with the CEO to ensure safe working conditions, competitive wages, attractive benefits and focus on being the employer of choice. She added the Board can offer support in their area of expertise, being a true advocate for healthcare employees and help celebrate employee successes.

Transition of Care update: Ms. Kim Stout reported every patient discharged from the hospital is asked to complete a patient satisfaction survey. Transition of Care is an area on the survey that is a focus for improvement. She stated a Transition of Care Team reviewed the strengths, weaknesses, opportunities and threats regarding the low Transition of Care survey scores. Ms. Stout briefly described details of the strengths, weaknesses, opportunities and threats that were identified by the Transition of Care Team.

The team also established goals to improve patient satisfaction as it relates to the discharge process, transition of care and communication from the MRHC health care team. The goals include decreasing emergent care visits and readmission rates, improving communication within and outside the organization and improving the community image. Ms. Stout reported the plan of corrective action to improve the Transition of Care process includes the following; Review and determine feasibility of re-structuring of service lines; Hospice Social Worker to begin working Saturdays to assist with discharges on weekends; Re-engage bedside nurses on discharge planning upon admission and to be discussed regularly with patient and family members; and a Capital Budget proposal for a web based patient education system. Additional plan of corrective actions include Home Health and Hospice to begin marketing and educating the Emergency Department on appropriate patient referrals and processes; Consider clinical lead nurses to do follow up discharge phone calls; Implement 24 hour nurse call system; Conduct a tracer of a patient stay to observe discharge processes; and Collaborate with nursing homes to provide education, reduce readmission rates and returns to the Emergency Department, improve relationships and keep MRHC patients within the health care system.

CEO Report: Mr. David Keith provided a brief overview of the CEO Report provided in the preliminary meeting packet. He reported the Oklahoma State Supreme Court ruled in favor of the petition to acquire 178,000 signatures to put the Medicaid Expansion question on the ballot for a vote of the people. The debate on surprise billing is heating up with bi-partisan support. MRHC will review internal policies on surprise billing and price transparency. He reported the BKD group will review MRHC's market designation as medically

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underserved and a healthcare professional shortage area to determine the need to convert to rural health clinics and take advantage of 340B pricing. He shared Meditech education and training is underway and tasks are on track and on budget. Mr. Keith reported corrective actions have been submitted in response to a DNV survey and the Quality Department is awaiting an acceptance response to the plan. The Ambulatory Surgery Center was recently audited by the State mostly due to the change in ownership. The survey findings will be shared with the Board when they become available. Mr. Keith reported Dr. Vanessa Meuniot joined McAlester Medical Services as our newest Family Medicine physician. She will have her own practice and help support the Family Medicine Residency program. MRHC welcomes new Family Medicine Resident Interns to include Dr. Scott Cook, Dr. Mai Murphy, Dr. Brooks Smallwood and Dr. Mitch Steckbeck. He reported MRHC was awarded the Stroke Honor Roll Elite "Gold Plus Quality Achievement Award" from the American Heart/Stroke Association. This is an improvement over last year's "Silver" award. Mr. Keith recognized Ms. Megan Monks for passing her certification in obstetric care and Mr. Tyus Blankenship for passing his certification exam as a Central Sterile Processing Technician. Mr. Keith provided an update regarding radiology equipment. He reported the PET CT is not functioning and has exceeded its lifespan. Efforts to repair the PET CT are underway; however there is a strategic plan in place to replace the PET CT as well as the MRI and CT. He reported Vision Philanthropy is onsite to do preliminary work in advance of kicking off the Cancer Center Project Capital Campaign. In closing, Mr. Keith reported MRHC will have to make a decision on an Accountable Care Organization in the very near future; opportunities are being considered.

Audit and Corporate Compliance Report: Ms. Julie Powell provided an update on a recent Audit and Corporate Compliance Meeting. She reported the HIM Director provided the results of a Coding Audit. The audit was a favorable report that was within the designated benchmarks. She stated the possibility of raising the benchmark is being considered. Some concerns of the audit were related to standardization of the ED acuity levels. Corrective actions, coding engagement and training have been implemented. Ms. Powell reported the HIPPA Privacy Report and the OIG Audit Activity report were also discussed. She stated there appears to be a lot of OIG activity with Home Health agencies to include MRHC Home Health who is currently under review. She reported the Compliance Activity Log was reviewed to include an update on recent DNV and CMS surveys. Ms. Powell reported efforts to improve the Credentialing Process have proved to be successful and now Payer Credentialing is a focus. In closing, Ms. Powell reported Job Scope of Practices are being evaluated throughout the organization and MRHC is awaiting legislative decisions on Best Practice for Medical Marijuana before developing policies.

Chief of Staff Report: Chairman Weldon Smith introduced Dr. Kenneth Miller the newly elected Medical Chief of Staff. Dr. Miller stated he will represent the Medical Staff of this organization. He stated he has only been in this position for one week but plans to interview the majority of physicians to determine any concerns and hear suggestions. Dr. Miller reported he intends to bring a short presentation regarding medical issues to the Board each month as informative education. Dr. Miller reported he is available 24 hours a day by phone if needed and is available to the Board if they have questions.

Finance Committee Report:

1. Consideration and approval of May 2019 Financial Reports:

Mr. Fraser presented the May 2019 Financial report to the Board for Consideration and approval. He stated for the month ending May 2019 McAlester Regional Health Center reported a net operating income of \$293k, as compared to a budgeted net operating loss of \$19k and a prior year net operating loss of \$145k. From an EBIDA (earnings before interest, depreciation and amortization) standpoint, MRHC reported a positive of \$731, compared with a budgeted income EBIDA of \$425k and a prior year income EBIDA of \$239k. Year-to-date, MRHC reported a net operating income of \$955k, as compare to a budgeted net operating income of \$947k and a prior year net operating loss of \$500k. From an EBIDA (earnings before interest, depreciation and amortization) standpoint. MRHC reported a

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positive \$5,460k, compared with a budgeted \$5,739k and a prior year positive EBIDA of \$3457k. Volumes were mixed, with inpatient discharges are up 392 from 330 prior year, outpatient registrations are up 7,158 from 6,683 prior year, emergency department visits are up 2,114 from 1,985 prior year, total surgeries are up 298 from 219 prior year. Unrestricted cash balances have decreased to 126.9 days from 143.1 days from prior year. Labor management resulted in paid FTEs running 670, this is up 37 FTEs from prior year. A **Motion** was made (Priddle) and seconded (Grilliot) to approve the May 2019 Financial report as presented The vote was taken as follows: Aye: Kevin Priddle, Brent Grilliot, James Bland, Susan Kanard, Evans McBride, Marti Fields, Mary Shannon and Weldon Smith. Nay: None. Absent: Mark Sehgal, MD. Abstain: None. Chairperson Smith declared the **motion** carried.

2. **2020 Budget Assumptions:**

Mr. Jim Fraser provided an overview of the 2020 Basic Budget Assumptions. He discussed Volumes, Revenues, Expenses and Budget risks. He reported a finalized budget will be presented to the Board upon completion.

New Business: None

Executive Session (25 O.S. § 307(B)) – Discussion and Action – Weldon Smith, Chairman

25 O.S. § 307(B)(3): “Confidential communications between a public body and its attorney concerning a pending investigation, claim, or action if the public body, with the advice of its attorney, determines that disclosure will seriously impair the ability of the public body to process the claim or conduct a pending investigation, litigation, or proceeding in the public interest.”

1. Annual Claims Review ~ Sharon Addicks, Western Litigation

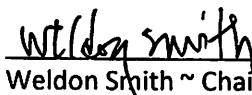
A **motion** was made 5:43 PM by (Shannon) and seconded (Kanard) to enter into Executive Session. The vote was taken as follows: Aye: Mary Shannon, Susan Kanard, Marti Fields, Evans McBride, Kevin Priddle, Brent Grilliot, James Bland and Weldon Smith. Nay: None. Absent: Mark Sehgal, MD. Abstain: None. Chairperson Smith declared the **motion** carried unanimously.

A **motion** was made 6:48 PM by (Priddle) and seconded (Fields) to come out of Executive Session. The vote was taken as follows: Aye: Kevin Priddle, Marti Fields, Susan Kanard, Brent Grilliot, James Bland, Mary Shannon, Evans McBride and Weldon Smith. Nay: None. Absent: Mark Sehgal, MD. Abstain: None. Chairperson Smith declared the **motion** carried unanimously.

No action was taken during Executive Session

Adjournment:

A **Motion** was made (Grilliot) and seconded (Shannon) to adjourn at 6:51 PM. The vote was taken as follows: Aye: Brent Grilliot, Mary Shannon, Susan Kanard, Kevin Priddle, Marti Fields, Evans McBride and Weldon Smith. Nay: None. Absent: Mark Sehgal, MD,. Abstain: None. Chairperson Smith declared the **motion** carried.



Weldon Smith ~ Chairperson

/sds



Mary Shannon ~ Secretary

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