

A meeting of the McAlester Regional Health Center Authority was held at 4:00 PM, on Wednesday December 01, 2021 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 09:58 AM on Tuesday November 30, 2021.

TRUSTEES PRESENT:

Mary Shannon, Chairwoman ~ Weldon Smith ~ Marti Fields ~ Susan Kanard ~ James Bland ~ Johnny Zellmer, MD ~ Damon Mascoto, Brent Grilliot, Sayer Brenner

TRUSTEES ABSENT:**HOSPITAL STAFF:**

David Keith, Sonya Stone, Recording Secretary, Shawn Howard, Kim Stout, Cheryl Perry, Whitney Hull, Lucy Muller, Scott Yoder

OTHER ATTENDEES

Karen Rieger, Legal Counsel, (via conference phone), Pete Stasiak, McAlester City Manager

CALL TO ORDER: Chairwoman Shannon called the meeting to order at 4:00 PM.

Public Comment: None

Consent Agenda:

1. MRHCA Board of Trustees minutes for November 03, 2021
2. Credentialing & Privileging Appointments as follows:

A. Consideration and approval of appointment for credentialing & privileging for provisional for one year as follows:

1. Arthur Maduabia, DO ~ Provisional ~ Emergency Medicine ~ One year.
2. James Luth, DO ~ Provisional ~ Emergency Medicine ~ One year
3. Shujahat Shah, MD ~ Provisional ~ Interventional Cardiology ~ One Year
4. Derek Norman, MD ~ Provisional ~ Interventional Cardiology ~ One year

B. Consideration and approval of appointment for credentialing & privileging for Distant Site: Credentialing by Proxy StatRad for One year as follows:

1. Neil Anand, MD ~ Provisional ~ Teleradiology ~ One year
2. Shannon Bownds, MD ~ Provisional ~ Teleradiology ~ One year
3. Abbas Chamsuddin, MD ~ Provisional ~ Teleradiology ~ One year
4. Jonathan Coll, MD ~ Provisional ~ Teleradiology ~ One year
5. Ryan Frederiksen, MD ~ Provisional ~ Teleradiology ~ One year
6. Jill Furubayashi, MD ~ Provisional ~ Teleradiology ~ One year
7. Xavier Garcia-Rojas, MD ~ Provisional ~ Teleradiology ~ One year
8. Howard Heller, MD ~ Provisional ~ Teleradiology ~ One year
9. Michael Karacholios, MD ~ Provisional ~ Teleradiology ~ One year
10. David Karlin, MD ~ Provisional ~ Teleradiology ~ One year
11. Kambrie Kato, MD ~ Provisional ~ Teleradiology ~ One year
12. Fatima Kazen, MD ~ Provisional ~ Teleradiology ~ One year
13. Evelyn Lorents, MD ~ Provisional ~ Teleradiology ~ One year
14. Roi Lotan, MD ~ Provisional ~ Teleradiology ~ One year
15. Robert Maxey, MD ~ Provisional ~ Teleradiology ~ One year
16. Shareef Riad, MD ~ Provisional ~ Teleradiology ~ One year
17. Ravinder Sohal, MD ~ Provisional ~ Teleradiology ~ One year
18. Gregory Thalken, MD ~ Provisional ~ Teleradiology ~ One year

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19. Nelson Uzquiano, MD ~ Provisional ~ Teleradiology ~ One year
20. James Wolff, MD ~ Provisional ~ Teleradiology ~ One year
21. Shota Yamamoto, MD ~ Provisional ~ Teleradiology ~ One year
22. Theresa Yuh, MD ~ Provisional ~ Teleradiology ~ One year
23. Leonard Morneau, MD ~ Provisional ~ Teleradiology ~ One year

C. Temporary Privileges Granted (Informational Purposes only)

1. Jinok Chung, DO ~ Cardiovascular, Critical Care, Internal Med ~ 11/01/21 – 12/01/21

D. Resignations (Informational Purposes Only)

1. Justin Plaxico, DO ~ General Surgery ~ 10/18/2021
2. Sang Lee, DO ~ Emergency Medicine (Premier) ~ 10/27/2021
3. Clarence "Dallas" Tarp ~ CRNA (Blue Sky) ~ 10/31/2021
4. Tanya Rennie, APRN ~ APRN (Forefront Telehealth) Psychiatry ~ 11/05/2021

3. November 2021 Agreement Log

A **motion** was made (Grilliot) and seconded (Zellmer) to approve items 1,2, and 3 of the Consent Agenda as presented. The vote was taken as follows: Aye: Brent Grilliot, Johnny Zellmer, MD, Sayer Brenner, Susan Kanard, James Bland, Marti Fields, Weldon Smith, Damon Mascoto, and Mary Shannon. Nay: None. Absent: None. Abstain: None. Chairwoman Shannon declared the **motion** carried.

Finance Committee Report:

1. **Discussion and Consideration of October 2021 Financial Reports:** Ms. Cheryl Perry reported that Hospital volumes were slower in October than the prior three months. Days and Discharges were down 6% and 3% respectively. Average length of stay was 3.88 on the acute side as there were fewer vented and COVID patients, but this also brought the Case Mix Index (CMI) down to 1.42 which is slightly low for MRHC. Outpatient Registrations were down 8% from run rate driven by the CT being down for 6 days in the month. Outpatient Surgeries were down 12% with the loss of general surgeon. Only 15 catherizations were done in the Cath lab, the lowest number since February. The Sleep Lab had 21 visits before closing for the remainder of the month due to lack of staffing. The Hospital Gross Patient Revenue was down from run rate. Fluctuations in revenue were tied to volumes and Case Mix Index (CMI.) The largest impact to Gross Revenue came from the loss of the general surgeon at the beginning of the month and the CT issues. The estimated impact of these two items alone could be up to \$700k Gross Revenue and approaching \$260k Net Revenue. The payer mix also shifted in October from Medicare, Blue Cross and Self Pay to Medicaid which ultimately hurt overall collections around \$85k. The biggest note in expenses for the hospital was the continued staffing issues across all areas of the organization. In October over \$226k was paid in pandemic pay as well as \$295k for Contract Labor. Both types of pay were highest in the ED, ICU, nursing floors and respiratory areas but in other areas like environmental services and dietary where the pay wasn't as high, the need was just as dire. Management is discussing the next steps of retention in these essential areas. Volumes in MMS were down 5% in October from the three-month run rate. The Eufaula Urgent Care was closed several days during the month due to staffing issues. The Surgery Clinic visits were down with the departure of the General Surgeon. Gross revenue per clinic day for MMS was down 2% for the month of October compared to run rate. There was nothing of out of the ordinary in the MMS expenses. Ambulatory Surgery Center had good volumes month with 116 surgeries. Gross Revenue increased approximately 5% from run rate. Costs were in line with prior months however at this level and type of surgery the ASC will not break even. A **motion** was made (Bland) and seconded (Zellmer) to approve the Financial Reports for October 2021 as presented. The vote was taken as follows: Aye: James Bland, Johnny Zellmer, MD, Brent Grilliot, Susan Kanard, Damon Mascoto, Sayer Brenner, Marti Fields, Weldon Smith, and Mary Shannon. Nay: None. Absent: None. Abstain: None. Chairwoman Shannon declared the **motion** carried.
2. **Discussion and Consideration of Bid for Network Infrastructure:** Ms. Cheryl Perry reported on October 15 and 22, 2021, McAlester Regional Health Center published an RFP for its Network Infrastructure. This project is an update/revision to our physical network throughout the facility, which includes fiber optic cabling from the Main

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Server Room to each network closet. VIP Technology Solutions Group, LLC provided a budgetary proposal exceeding \$50,000, and led to the public bid. MRHC received sealed bids from VIP Technology Solutions Group LLC (VIP) for \$64,820.10 and Stryker Integrated Solutions (Stryker) for \$30,255.00, which the bids were opened at 10:00 am on Monday November 15, 2021. Both proposals were elevated based on the bid specifications, and both providers were able to accommodate the specifications. Further, post bid-opening consultation with Stryker confirmed that the bid price was a true, all-encompassing amount, given the drastic disparity between quoted amounts. After that consultation, the Bid Review Committee recommended awarding this initiative to Stryker Integrated Solutions. A **motion** was made (Brenner) and seconded (Mascoto) to approve the lowest bid for Network Infrastructure from Stryker in the amount of \$30,255.00 as presented. Aye: Sayer Brenner, Damon Mascoto, Susan Kanard, Brent Grilliot, James Bland, Johnny Zellmer, MD, Marti Fields, Weldon Smith, and Mary Shannon. Nay: None. Absent: None. Abstain: None. Chairwoman Shannon declared the **motion** carried.

Discussion and consideration of Strategic Plan for FY 2022 - 2025: Tabled

A motion was made (Shannon) and seconded (Bland) to table the Strategic Plan for FY 2022 - 2025 pending additional consideration as presented. The vote was taken as follows: Aye: Mary Shannon, James Bland, Susan Kanard, Brent Grilliot, Johnny Zellmer, MD, Damon Mascoto, Marti Fields, and Weldon Smith and Mary Shannon. Nay: None. Absent: None. Abstain: None. Chairwoman Shannon declared the motion carried.

Board QI Report: Ms. Whitney Hull stated the Board QI Committee met on November 23, 2021. She reported that all data collected and presented on a quarterly basis is "real time" data from MRHC. Publicly reported data can be found on the Medicare website, but that data is behind. Ms. Hull presented a power point detailing Infection Control Data for Q2 2021, Stroke Data for Q3 2021, Quality Data for Q3 2021, Clinic Quality Data for Q3 2021, and Quality Management System Data for Q3 2021. Discussion occurred regarding topics that were presented. (See power point)

Chief of Staff Report: None

Chief Administration Officer (CAO) Report: Mr. Shawn Howard provided a verbal Chief Administration Officer report. He opened the floor to Ms. Kim Stout who reported as of 11/15/2021, MRHC added a second Tablo Dialysis Machine that passed its series of culture testing and is ready for use. This date also marked the completion of training for a Renal Tech. Now that our RN has someone to assist her in the monitoring treatments, we can offset start times and provide dialysis to two patients at once! We still have one RN opening to fill before we can expand our hours of operation. Fortunately, we have not turned down patients unless at capacity. Since rolling out this program in the last week of August, our treatment volume has continued to experience a great deal of growth. We have also seen a tremendous decrease in the number of nephrology patients transferred out of MRHC. Ms. Stout reported an MRHC employee Ms. Pam Cunningham was reelected to Chair the Regional Trauma Board for our region. Ms. Cunningham's presence on this Board will help build relationships with outlying hospitals and EMS providers in our region. Ms. Cunningham will also serve on the quality team for the Regional Trauma Board allowing her to have insight on quality issues that could impact our hospital. Ms. Stout reported MRHC has a Transitional Care Team that includes Social Workers and Case Managers whose job is to help transition patients from one level to another. MRHC recently placed a Social Worker in the ER five days a week during high volume times to help with communication between patients and ER staff and streamline the discharge process. The goal is to see a decline in patient complaints due to wait times. If the initiative is successful, MRHC may increase the time Social Workers spend in the ER. In addition, the Transitional Care Team leaders are watching the Surgery Tracker and calling patients in advance of surgery to determine what their needs will be following surgery to assure everything is in place for their discharge. Mr. Shawn Howard reported November was a busy month. He participated in Lifecare Strategic Planning meetings, favorable recruitment for a General Surgeon, and contract negotiations for the new CT replacement. He reported he is in discussions with a sleep study management group to manage the sleep study service line. He stated MRHC is considering several management options that best fits the need of MRHC. Mr. Howard reported Oklahoma Heart Hospital Cardiology service line is ramping up quickly with one physician currently onsite and two more to follow soon. The MRHC Emergency Room was recently awarded the American Institute of Architecture People's Choice Design Award for Healthcare Architecture for the entire Nation. Mr. Howard was presented a plaque and a copy of the published magazine. He added it is wonderful to still be recognized for something MRHC is very proud of. Mr. Howard updated the Board regarding employee wage increases to maintain employee retention. Mr. Sayer Brenner requested regular updates on cost savings efforts that will offset the impact of the wage increases. Mr. Damon Mascoto stated human capital is our greatest resource and continuity is needed in that area. He added he agreed with the wage increases as long as the hospital has funding and can track the process. Ms. Cheryl Perry

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reported part of the plan to fund the increases is to decrease the number of agency staff. She stated the Hospital's management staff has been challenged to make this happen. Discussion occurred regarding other cost saving initiatives.

Chief Executive Officer (CEO) Report: Mr. David Keith provided a verbal Chief Executive Officer report. He shared an educational opportunity for Board members. He provided a brief update on Belfair of McAlester. Mr. Keith reported funding opportunities and discussions are still occurring regarding efforts to place a water tower on or near the MRHC campus. He showed his appreciation to Mr. Pete Stasiak and the City of McAlester for working with MRHC on this project and anticipates having more information to share after the first of the year. In closing, Mr. Keith recognized Ms. Lucy Muller for receiving the Rural Health Advocate of Oklahoma award from the Rural Health Association of Oklahoma.

New Business: None

Adjournment: A Motion was made (Fields) and seconded (Smith) to adjourn 5:34 PM. The vote was taken as follows: Aye: Marti Fields, Weldon Smith, Johnny Zellmer, MD, Sayer Brenner, Susan Kanard, James Bland, Damon Mascoto, Brent Grilliot, and Mary Shannon. Nay: None. Absent: None. Abstain: None. Chairwoman Shannon declared the motion carried.


Mary Shannon, Chairwoman
/sds


James Bland ~ Vice-Chairman