



PERSHING GENERAL HOSPITAL & NURSING HOME BOARD OF TRUSTEES
REGULAR BOARD MEETING MINUTES
August 22, 2019

ENTITY: Pershing General Hospital
DATE: August 22, 2019
TIME: 5:30 pm
PLACE: Pershing General Hospital
Conference Room
850 6th Street, Suite 103

PLACES POSTED: Pershing General Hospital
Pershing County Courthouse
US Post Office
Pershing County Library
www.pershinghospital.org

ATTENDING: Board: Joe Pierce, Charles Safford, Carolyn Hultgren, Ted Bendure, Dana Tueller
Staff: Cynthia Hixenbaugh, Lynn Broyles, Debora Mock, Helen Joubert, Carol Shank(County Liaison), KayDawn Hughes, Christina Dickerman, Pam Weeldreyer.

- 1) CALL TO ORDER – By Chair Joe Pierce at 5:30 P.M.
- 2) PUBLIC COMMENT – No Public Comment.
- 3) CONSENT AGENDA - The Board will consider, for possible action, these items in their entirety, without discussion – For Possible Action
 - a. Meeting minutes for Regular Board Meeting July 25, 2019.
 - b. Warrants (Check Register).
 - c. Patient Account Write-Offs for July 2019.

Motion to approve the consent agenda as presented by Ted Bendure. Seconded by Charlie Safford. Motion passed unanimously.

4) REPORTS

a. Administrator/Chief Executive Officer Cynthia Hixenbaugh: Update

- The new phone system is up and running. You will find extension and phone tree sheets in your board packet materials. The most important change is that when calling the clinic, we need to use 273-2621 and press 1. Also, the main phone is answered in the business office because of a change in staff in the registration area.
- We are currently in contract negotiations with PA Tyson McBride. Tyson’s two years is up and we will bring his renewal contract and renewal credentialing to next month’s meeting.
- Cynthia met with Bill Welch who is the Nevada Health Association President and he informed her of their services and advocacy for hospitals in Nevada.
- Cynthia attended the annual LiCON/NRHP Board meetings.
 - There was a presentation from the Transgender Allies Group. We will have to meet an assembly and a senate bill that require us to facilitate cultural diversity trainings for our staff in regards to transgender and gender identity issues; Cynthia will bring the training to the board as well.
 - Intermountain Health Telehealth Services and Renown Telehealth Services gave presentations.
 - There was a rousing discussion regarding the UPL/IGT payments and the eligibility of CAHs to even be participating in the program.
 - We had an opioid discussion and the EHR (Electronic Health Records) requirement of access to the PDMP (Prescription Drug Medication Portal) portal. As of January 2, 2020, our current CPSI system needs to have a button that the providers click on that is linked to the PDMP portal so it can track the providers prescribing habits. Our provider then has access to the opioid medication history for a particular patient.
 - There is a new system coming called Open Beds for mental health crisis patients. Soon our nurses will be able to set up an account and access the portal to see where beds are available. By accessing the portal, we can enter our patient’s information and receive feedback from any of the open beds fitting our patients’ needs. This is intended to save staff from having to make numerous phone calls and place the patient faster.
- Project ECHO staff stopped by on Monday to talk to our providers about Project ECHO. Others present included from UNR John Packham, Gerald Ackerman, and Keith Clark; from Renown Gary Beck, Rural Outreach Director; and Blayne Osborne from NRHP. Project ECHO is a group of specialists who get together via teleconference where a provider can present a case to them and receive feedback from the specialists in

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the form of interventions. PA McBride gave them a lot of information about what he would like to see, i.e. a rheumatology clinic and cardiac clinic; the Project ECHO staff were appreciative of PA McBride's input.

- We will participate in the state Seismic Wave Full Scale Exercise in October either as our own tabletop for our required drills for Emergency Preparedness requirements or as part of a countywide drill if they decide to do one.
- Cynthia met with managers to discuss low statistics, overtime, and strategies to help increase our numbers. Community connection was a popular idea which included going out to meetings again; reinstating the open bed email to facilities; the health fair; and public education regarding resources for those caring for elderly parents and /or what you need to do prior to considering an LTC facility.
- NRHP held a meeting regarding the MRI machine.
 - We are not meeting our goal of 7 scans per month; July had none. We pay for the MRI regardless of how many scheduled patients we have. NRHP is overbudget on the MRI machine. There could be a possibility that we lose the MRI due to the rising costs of repair for the trailer. (NRHP owns it.) Five member-hospitals contract with the service and payment is based on volume averages. We made \$207K over the last year, but we need to meet the 7 scans per month, otherwise we still have to pay the fee. NRHP is considering increasing the costs due to their underestimation of the cost in maintaining the trailer. Ted Bendure asked if any other hospitals are having the same issues and Cindy replied that Battle Mountain also is in jeopardy of losing the machine due to under-utilization.
 - We will be discussing the situation at the next medical staff meeting. Part of the problem is that insurance companies don't just authorize an MRI. A patient has to have been through other treatments, i.e. physical therapy, before an MRI can be authorized.

b. Chief Financial Officer Lynn Broyles: Update

i. Financial Statements for the period ended June 30, 2019.

- The auditors will be here next week and Lynn is turning over the trial balance to them in order for them to start their review on Monday.
- Lynn spoke to the board and led them through the documents she prepared regarding the end-of-year financials. She described the process involved in putting together the financials, showed the board what the documents look like coming out of our CPSI system, and explained what she must do to be able to present the financials to the board.
- Lynn will be doing some reformatting of the financial statement report in order to match how the auditors want it. It will not affect the bottom-line, but it will have an effect on how the board sees it.
- The narrative form of the non-audited financials for the year ended June 30, 2019 was presented and began with an explanation of the statement of expenses and revenue. We are still waiting for some numbers that should be coming soon, but they aren't available at this time.
- The cost report is the Medicare settlement. They give us our expected costs and we did not do an interim settlement with them this year, so we may have received more than our costs on what they paid us for. It is a very complex and involved calculation to determine if we owe them money back. Ted Bendure asked when we would know that number and Cindy replied that it is submitted at the end of November. Secretary Charlie Safford asked if we needed to have a hefty sum of cash ready in order to pay it and Cindy replied that it is either a lump sum or they take payments at the interest rate of 10%. The worry of having to borrow money to pay it off was expressed by Charlie, and Lynn offered that currently we have a cash reserve.

ii. Financial Statements for the period ended July 31, 2019.

- Preparation of the year-end financials has been a time-consuming task, and as such Lynn does not have the statements available yet for July 2019.

iii. Revenue Cycle Dashboard June and July 2019.

- Debbie Mock discussed the problems with Blue Cross Blue Shield payments and how it negatively impacts how our dashboard looks.

Motion to accept the unaudited draft financial statements as presented for the year ending June 30, 2019 by Ted Bendure. Second by Carolyn Hultgren. Motion passed unanimously.

c. Chief Nursing Officer Christina Dickerman: Update

i. Utilization Review Report

- Admissions for the month of July: Acute – one Medicaid, Swing – two Medicare, Emergency – six for LTC.
- There were 16 referrals. Of those, we were able to accept one long-term care and two swing. The declines were due to no payer source or the care exceeded the capacity of our facility.
- There were eleven transfers. Seven medical, two trauma, and two mental health.
- In Acute/ED we had a patient satisfaction of 97% and verbal kudos from a swing patient. There were five returns within 72 hours with the same diagnosis and one patient left against medical advice.
- The current census in Long Term Care is 23 and there is a new admission expected next week.
- Christina announced that there will be a Heart Health Fair, but it will be a little more interactive than in previous years.

d. **USDA Project Update – Loren Bianchi: Given by Administrator Hixenbaugh.**

- The project is nearing completion. The pipefitters worked over the weekend to complete their last project and should be done tomorrow. The final pay application should be approved by the end of this month. We will have some overages, but Patty and Cindy had set aside about \$150,000.00 to cover these.
- The fire alarm works very well.
- The roof is very efficient.
- Ted asked if there is a date for grand opening of our remodel? It is not set, but Christina and Cindy suggest it coincide with the Heart Health Fair.

e. **Risk Management Report – KayDawn Hughes**

- Two sentinel events were reported in quarter two, no in-house acquired infections, and 10 patient complaints.
- Two complaints regarding wellness visit billing in the clinic. A form is being developed by KayDawn and Dr. VanGuilder that will help educate the patients.
- KayDawn presented the quarter information as distributed in the board packet.
- There were 499 ER visits, seven acute patients admitted, and 9 left against medical advice.
- KayDawn explained how provider documentation has an effect on percentages reported when a narcotic is prescribed.

f. **Chief Procurement Officer Helen Joubert: Update**

- This has been a busy month. Dietary has been short-staffed and the dietary manager has had to pick up about four shifts a week in order to cover staffing needs.
- LTC rooms are being cleaned now that the plumbers are getting done with the heating and cooling.
- Looking at solution to latching system on several windows. Secretary Safford asked for further explanation about the latch system on the windows. The windows are so old that they do not latch properly so they are not closing completely. Since we are not allowed to open the windows, we are looking at screwing them shut.

5) **CRITICAL ACCESS HOSPITAL (CAH) ITEMS**

a. **UNFINISHED BUSINESS - None**

b. **NEW BUSINESS**

i. **Review and Approve Employment Agreement for Melissa Washabaugh, Mental Health Nurse Practitioner.**

- Melissa is an active prescribing mental Health Nurse Practitioner; however, she cannot currently prescribe schedule II drugs. She will begin on September 16, 2019 and be a revenue generator on her own. We look forward to her providing services to our community and surrounding areas.

Motion to approve the employment agreement for Melissa Washabaugh, Mental Health Nurse Practitioner as presented by Ted Bendure. Second by Secretary Safford. Motion passed unanimously.

ii. **Approve Delineation of Privileges for Melissa Washabaugh, Mental Health Nurse Practitioner.**

- The medical staff approved the Delineation of Privileges for Melissa this morning to practice as a Psychiatric Mental Health Nurse Practitioner. Dr. Vacek will be working with Melissa.

Motion to approve the Delineation of Privileges for Melissa Washabaugh, Mental Health Nurse Practitioner made by Carolyn Hultgren. Second by Ted Bendure. Motion passed unanimously.

- iii. **Approve Meaningful Use Stage 3 software purchase through Evident in the amount of \$62,825 to meet the requirements of the CMS Promoting Inoperability Program.**
 - Cynthia provided an explanation of the Meaningful Use Stages and the reason we need to purchase software to meet the requirements. Cynthia spoke with CPSI and they agreed to reduce their price from over \$100,000.00 to \$62,825.00 and include the button we need for opioid documentation. They also offered a no finance charge payment plan.

Motion to approve the Meaningful Use Stage 3 software purchase in the amount of \$62,825.00 made by Carolyn Hultgren. Second by Ted Bendure. Motion passed unanimously.

- 6) **PERSHING HEALTHCARE FOUNDATION: UPDATE – given by Carolyn Hultgren.**
 - Carolyn showed everyone the article in the newspaper detailing the recent foundation fundraising dinner. And added that the Basque people tell us that this was the best Basque meal they have ever had so you know it had to be good! They do not yet know how much money they made.
 - The Masonic Lodge said they will make an annual contribution.
 - Cynthia added a thank you to the Wells Fargo volunteers.
 - PCHS National Honor Society students helped serve the meal.
- 7) **OTHER ITEMS**
 - a. **CORRESPONDENCE** – no correspondence.
 - b. **LEGAL**
 - c. **OPEN SESSION**
 - i. **Action regarding litigation or potential litigation** – no action.
 - d. **OTHER** - none.
- 8) **PUBLIC COMMENT-** Carolyn took the public comment time to say that at the foundation dinner Tyson's wife bought the PCHS Mustang's afghan that she knitted. Because those children are still very young she thinks they will stay until the kids are in high school!
- 9) **ADJOURN:** Chair Joe Pierce adjourned the meeting at 7:30 P.M.