



PERSHING GENERAL HOSPITAL & NURSING HOME BOARD OF TRUSTEES
Regular Board Meeting Minutes
Thursday, July 23, 2020

ENTITY: Pershing General Hospital
DATE: July 23, 2020
TIME: 5:30 P.M. – Regular Meeting

PLACE: Pershing General Hospital
850 6th Street, Suite 103 – Conference Room

ATTENDING: Board: Chair Carolyn Hultgren, Vice Chair Charles Safford, Secretary Ted Bendure, Trustee Joe Pierce
Board via Zoom: Trustee Dana Tueller
Absent: No board members were absent.
Staff: Cynthia Hixenbaugh, Lynn Broyles, Christina Dickerman, Lola Montes, Pam Weeldreyer.
Other: Phillip Dickerman
Other by Zoom: Bryce Shields (Board Counsel), Carol Shank (County Commissioner-Liaison), Debbie Mock, Jayce Montes

- 1) **REGULAR MEETING CALL TO ORDER – Chair Hultgren called the meeting to order at 5:30 P.M.**
- 2) **PUBLIC COMMENT –** Vice Chair Safford welcomed Phillip Dickerman to the meeting and congratulated him on his election to the Board.
- 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 June 25, 2020.
 - b. Warrants (Check Register).
 - c. Acknowledgement of Renown deactivated providers Drs. Aikawa, Clarke, Vargo, Engbretson, Lengle, Goel, Liou, Morrison, Ram, Whetsell, and Lombardi.
 - d. Acknowledgement of VRad reappointed provider Dr. Zwerdinger and Dr. Kaplan
 - e. Acknowledgement of VRad deactivated providers Dr. Welte and Dr. Rachakonda

ACTION

A motion to approve the Consent Agenda as presented was made by Vice Chair Safford. Seconded by Secretary Bendure. Motion approved unanimously.

4) REPORTS

- a. **Risk Manager: KayDawn Hughes was excused. No Report.**
 - i. Patient Safety Committee, Complaints, and Quality Improvement Report
- b. **Chief Nursing Officer: Update given by Christina Dickerman**
 - i. Critical Access Hospital and Skilled Nursing Facility Utilization
 - Admissions – PGH had two acute admits in June. There was one swing admit and there were 125 Emergency visits.
 - Transfers – Of ten transfers in June, six were medical, two were mental health, and two were trauma.
 - Acute/E.D. – There were five “Return within 72 Hours Same Diagnosis” and two “AMA/Left Without Being Seen.”
 - Long-Term Care – The current census is 23. We are expecting one admission on July 28.
 - Referrals – Out of 14 referrals for Long-Term Care (LTC) and Swing, we were unable to accept any. We declined eight and there were six withdrawals due to no payer source, care exceeds capacity, or no open beds. Care exceeds capacity includes severe behavioral issues or medically complicated.
 - ii. COVID-19 Update and discussion
 - We are unsure about the testing procedures that the state will be requiring in order to reopen our Long-Term Care unit for visitors. We are awaiting further guidance from state and federal entities. The staff is doing an amazing job trying to keep the residents feeling connected to family and friends; however, it is still difficult for the residents to not see their loved ones in person.
 - After an inquiry from Chair Hultgren, Cynthia replied that there have been 13 positive cases in the county, three recovered and zero deaths. There have been 2,955 tested as of 7-23-2020.
- c. **Chief Procurement Officer: Update given by Administrator Hixenbaugh**
 - Helen completed her inventory at the end of June and is trying to locate PPE through our regular vendors.
 - Our current struggle is locating vent circuits for the AutoVent, batteries for respirators, and disposable gowns. Discussion regarding disposable gowns and masks took place.
- d. **Chief Financial Officer: Update given by Lynn Broyles**
 - i. Read-review unadjusted and unaudited draft of the Financial Statement for the period ended June 30, 2020 – **For Possible Action – No action taken. Item tabled.**

- CFO Broyles reviewed, discussed, and answered Board inquiries on the unadjusted and unaudited draft of the Financial Statement with the Board and did not submit the draft for their approval but asked them to table this item for next board meeting. She will provide a final document for them as soon as she has it ready.
 - The audit will be starting, but it will not be on-site due to COVID precautions. We may need to do the auditor's report by ZOOM.
- ii. Revenue Cycle Dashboard June 2020
- There is no dashboard available tonight. Lynn will forward it to the board as soon as she receives it.
- e. **Revenue Cycle Manager: Update with discussion given by Debbie Mock**
- i. Patient Account Write-Offs for June 2020 – **For Possible Action**
Debbie explained the write-off for June.
ACTION
A motion to approve the Patient Account Write-Offs for June 2020 in the amount of \$160.00 was made by Trustee Pierce. Second made by Vice Chair Safford. Motion approved unanimously.
- ii. TruBridge Financial Analysis for June 2020
Debbie reviewed and discussed the TruBridge analysis with the Board.
- f. **Administrator/CEO: Update with discussion given by Cynthia Hixenbaugh**
- NNEMSC
 - Cindy provided the Board with information and a discussion took place regarding the Northern Nevada EMS Consortium (NNEMSC) no longer needing to seek donations for the MedX AirOne flight membership program. In the past, MedX AirOne had to balance-bill patients and the sought-after donations covered our tri-county residents so they would not incur the balance due after their insurance paid. MedX AirOne has become self-sustaining and no longer needs to balance-bill patients.
 - Because the NNEMSC will no longer need to expend funds on MedX AirOne membership for tri-county residents, there will be more funds to spend on other projects. Other possible projects include grants for rural EMS, Fire, and health systems. Grants will be available for equipment, furniture, training, turnouts, etc. The consortium will create an informational letter and members will get these out to businesses and entities who want to request support. Lola will provide additional information to the Board.
 - Harry Norsworthy, RPh, ACE, president of Komplete 340B Solutions, helped PGH set up our 340B program and now that we are seeing funding come through, he has provided his proposal to manage the program. Harry's plan includes helping us prepare for audits; leveraging new pharmacies to contract with for the program; ensuring we are receiving the correct funds from our current contract with the Lovelock Pharmacy; and helping us determine if we should add medications and Medicaid to our program. We have received in \$33,000.00 so far for the 340B program. Funds that come out of that would be the meds that we have to purchase to resupply Lovelock Pharmacy or other expense. Cynthia will bring the proposal before the Board at the next meeting for their consideration.
 - We have received five fraudulent unemployment claims for current employees and one claim for an ex-employee. HR is working with Equifax and DETR to report the claims as fraudulent and notifying employees of the claim. We are seeking identity theft protection coverage for affected employees.
- i. Rural Health Clinic Utilization
- There were 673 visits for the month of June, 37 were new patients, 21 were telemed visits, and 17 were phone visits.
 - Our providers have rolled with all of our changes and demands and we are really proud of them.
 - If a patient arrives at the clinic without a mask, they are being directed to wait in their car. We don't have the supply to keep handing out masks.
- ii. HICS COVID-19 2020 Update – **For Possible Action**
- The hospital currently has an Abbott ID Now and an Alere I (tests take about 15 minutes for each test to run); both are machines that the rapid COVID test control can be added to. As an LTC facility, we are on the list to receive another machine to perform rapid testing for our LTC residents to mitigate spread should someone become sick.
 - Cynthia will bring a proposal next month to the Board to purchase a BioFire test machine which has a 94% and a 97% rating as far as providing accurate readings. It has a higher sensitivity and specificity rating on PCR (Polymerase Chain Reaction) tests. The BioFire performs panel testing in 45 minutes. We could have a respiratory panel that includes flu, strep, RSV, and COVID. There is also a GI panel and a blood culture panel. The machine is about \$45,000.00; however, we received a CSHIP grant in the amount of \$84,000.00. The BioFire could take 90 days to receive and then our lab would have to run validations and finally, the state would have to do an inspection. So, for right now; we have the Alere and the Abbott machines; two control kits

from the state that were given to Dr. Van Guilder; Cindy will get online and add the COVID test to our testing list and pay \$300.00; Lisa will prepare her policies and procedures and start validation of negative and positive tests for COVID; the state would then come in and inspect her lab; and finally, we would be able to start using it. Medical staff have determined that priority for rapid tests will be as follows: SNF residents, those we have to transfer to another facility that requires a negative test, and then those going in for surgery.

- Testing systems are going to “hotspots.” Las Vegas is currently a “hotspot” and is at surge capacity. They are calling rural facilities to transfer out recovering patients because they need the beds. Currently, the BioFire reimbursement rate is \$325.00. Christina asked if this could increase revenue. Cindy replied that it would and it would also add to our in-house test menu. Cindy added that we would like to move forward with this by using the grant funds and stimulus funds not only to cover COVID...but in the long-run we look at what else we can use it for.
- Vice Chair Safford asked if there was a way to test the whole school with this device. Cindy replied that we only have enough for our residents. Cindy added that the test kits given to Dr. Van Guilder by the state will do a total of 48 tests and that the tests would only be replaced if they had them available or if we became a hotspot.
- Cynthia explained that PGH is not a drive-up testing site for COVID. Our focus continues to be on symptomatic patients, those who have been contacted for direct exposure, and protecting our residents’ health. If a person is experiencing symptoms, they should call the clinic and make an appointment. If they are in respiratory distress or suffering severe symptoms, they should come to the E.R. – calling ahead if possible. We are allotted only the number of tests we use in a week by the state. Employers who wish to test their employees should contact the County Health Nurse to arrange for testing.
- We are allowing one visitor with a Clinic patient, if necessary, and no visitors in the E.R. We are still not able to allow visitors in the facility for our Skilled Nursing patients and will expect another inspection before the state will allow us to have visitors.
- We have started Wellness Tuesdays by appointment only. The patient must be symptom-free. If they have symptoms upon screening, we will reschedule their appointment asking them to come back when they are symptom-free.
- All visitors and patients must wear a mask when they come in for any services. We are looking into plexiglass partitions for safety.
- The state has directed facilities to purchase PPE through regular vendors as supply chains return. The county and state are no longer taking requests for PPE.

5) CRITICAL ACCESS HOSPITAL (CAH) ITEMS

- a. UNFINISHED BUSINESS – **None**
- b. NEW BUSINESS – **For Possible Action**
 - i. Approval of Locum Tenens Agreement for Tyler Peterson, D.O., E.R. Physician – **For Possible Action**
ACTION
A motion to approve the Locum Tenens Agreement for Tyler Peterson, D.O., E.R. Physician was made by Secretary Bendure. Second by Vice Chair Safford. Motion approved unanimously.
 - ii. Approval of initial appointment and emergency room privileges for Tyler Peterson, D.O. – **For Possible Action**
ACTION
A motion to approve initial appointment and emergency room privileges for Tyler Peterson, D.O. was made by Secretary Bendure. Second by Trustee Pierce. Motion approved unanimously.
 - iii. Review and approve the Debt Management Statement FY21– **For Possible Action**
Lynn presented the Debt Management Statement FY21 to the Board.
ACTION
A motion to approve the Debt Management Statement FY21 as presented pending changes, if any, was made by Secretary Bendure. Second by Trustee Pierce. Motion approved unanimously.
 - iv. Review and approve the Capital Improvement Plan (CIP) FY21 – **For Possible Action**
ACTION
A motion to approve the Capital Improvement Plan (CIP) FY21 as presented was made by Secretary Bendure. Second by Trustee Pierce. Motion approved unanimously.

- v. Discuss and approve the purchase of Alliant Cyber Excess Insurance coverage, \$2MM aggregate, \$2,250 annual premium in addition to the hospital district's current property coverage to guard against shared limit erosion by covered LiCON members. **For Possible Action**
- vi. Discuss and approve the purchase of a deductible buy-down from \$50,000 to \$5,000 for Cyber/Privacy insurance for an additional \$2,500 annual premium. – **For Possible Action**

ACTION

Combining 5) b. v. and vi. - A motion to approve the purchase of Alliant Cyber Excess Insurance coverage, \$2MM aggregate, \$2,250 annual premium in addition to the hospital district's current property coverage to guard against shared limit erosion by covered LiCON members as presented and to approve the purchase of a deductible buy-down from \$50,000 to \$5,000 for Cyber/Privacy Insurance for an additional \$2,500 annual premium as presented was made by Vice Chair Safford. Second by Secretary Bendure. Motion approved unanimously.

- vii. Discuss and approve the annual update of hospital district personnel policy manual – **For Possible Action**
- viii. Discuss and approve revision to Employee Compliance with Regulatory Requirements for Licensure and Health and Safety Policy – **For Possible Action**
- ix. Discuss and approve Employee Identification Badge Policy – **For Possible Action**
- x. Discuss and approve Remote Access Policy – **For Possible Action**
- xi. Discuss and approve Teleworking for Emergency Provisions Policy – **For Possible Action**
- xii. Discuss and approve Student Rotation/Placement Policy – **For Possible Action**

Human Resources Director Lola Montes presented agenda items 5) b. vii through 5) b. xii to the Board

ACTION

A motion to approve items 5) b. vii through 5) b. xii as presented was made by Vice Chair Safford. Second made by Secretary Bendure. Motion approved unanimously.

6) PERSHING HEALTHCARE FOUNDATION: UPDATE given by Cynthia Hixenbaugh

- Cindy is Chair, Lola is Vice Chair, Carol Shank will remain Secretary, and Dave Skoglie will remain Treasurer.
- The annual dinner was canceled due to the COVID pandemic but is still accepting donations.
- Tonya Tull Leonard previously received a grant that helped her complete her Associate Degree and is now going to earn a Bachelor of Science degree in Nursing. The Foundation granted her \$6,000.00 towards meeting her expenses.

7) OTHER ITEMS

- a. CORRESPONDENCE – **None**
- b. LEGAL – **For Possible Action**
Bryce informed the Board about other local and statewide issues with the fraudulent unemployment claims. Advise to report to the local law enforcement and DETR.
- c. OPEN SESSION – **None**
 - i. Action regarding litigation or potential litigation.
- d. OTHER – **For Possible Action**
 - i. Acknowledge the donations Melissa Washabaugh, PMHNP-BC accepted from the State of Nevada Children's Rural Mental Health Consortium on behalf of the Mental Health Cabinet. Donations were as follows: 80 leather-bound journals, two white noise machines, two sleep aide lights, two CalmiGo devices, two puzzle mats, two weighted dolphin shoulder wraps, and one weighted blanket – **For Possible Action.**

8) PUBLIC COMMENT

- Phillip Dickerman commented that he looks forward to sitting on the Board.
- An additional short discussion took place regarding the recent rash of unemployment insurance fraud.

9) ADJOURN: Chair Hultgren adjourned the meeting at 7:32 P.M.

Respectfully submitted,

Pam Weeldreyer
PGH Executive Assistant