MEMORIAL HOSPITAL OF SWEETWATER COUNTY REGULAR MEETING OF THE BOARD OF TRUSTEES September 2, 2020 2:00 p.m. Dial: 301-715-8592 Meeting ID: 854 3971 8404 Password: 268668

AGENDA

I.	Са	Il to Order		Taylor Jones
	Α.	Roll Call		
	В.	Pledge of Allegiance		
	C.	Our Mission and Vision		Richard Mathey
	D.	Mission Moment	Irene Richardson, Chie	ef Executive Officer
II.	Ag	enda (For Action)		Taylor Jones
III.	Mir	nutes (For Action)		Taylor Jones
IV.	Со	mmunity Communication		Taylor Jones
V.	Olo	d Business		Taylor Jones
	Α.	COVID-19 Preparation and Recovery		
		1. Incident Command Team Update	Kim White, Inc	cident Commander
	В.	Employee Policy (from the Human Resources	Committee) (For Action)	Ed Tardoni
		1. Employee Policy-Cultural Diversity		
	C.	Board Policy (from the Governance Committee	e) (For Action)	Barbara Sowada
		1. Attendance of Board Committee Meetin	<u>igs</u>	
	D.	Termination and Appeal Policy Update		Richard Mathey
	E.	Outstanding – Not Ready for Board Consid uncompleted business)	leration (Placed on the agend	a as a reminder of
		1. Credentialing Criteria (presented following	g approval of new medical staff	bylaws)
		2. Employee Policies (from the Human Rese	ources Committee)	
		a. Employee Corrective Action		
		b. Introductory Period		
VI.	Ne	w Business		Taylor Jones
	Α.	Board Policy (from the Governance Committee	e) (For Review)	Barbara Sowada
		1. Contracts Requiring Board Approval Po	<u>olicy</u>	
	В.	Letters of Appointment (For Action)		
		1. Antimicrobial Stewardship Program (AS	<u>SP)</u> Kari Quickenden, C	hief Clinical Officer
		2. Infection Prevention Program (IP)	Kristy Nielson, Ch	nief Nursing Officer
	C.	Utilization Management Plan (For Action)		Kristy Nielson
	D.	Performance Improvement and Patient Saf	ety Plan Priorities (For Action)	Kara Jackson,
			Director of Quality, Accreditat	· · · ·
	E.	CARES Act Lab Project, Construction Man and Contract from the Architect Approval (#		Irene Richardson

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AGENDA

VII.	Chief Executive Officer Report	Irene Richardson
VIII.	Committee Reports	
	A. Quality Committee	Marty Kelsey
	B. Human Resources Committee	Ed Tardoni
	C. Finance & Audit Committee	Richard Mathey
	1. <u>Cerner Electronic Medical Record</u> Presentation and Request (For Action	Tami Love, <i>Chief Financial Officer</i>
	2. Capital Expenditure Requests (For A	ction)
	3. Bad Debt (For Action)	
	August Committee Meeting Information	
	D. Building & Grounds Committee	Marty Kelsey
	E. Foundation Board	Taylor Jones
	F. Compliance Committee	Ed Tardoni
	G. Governance Committee	Barbara Sowada
	H. Executive Oversight and Compensation	Committee Taylor Jones
	I. Joint Conference Committee	Richard Mathey
IX.	Contract Review	Suzan Campbell, In-House Counsel
	A. Contract Consent Agenda (For Action)	
	1. Cerner Business Agreement	
	2. HVAC Upgrade Project Engineering	<u>Services</u>
	3. Plan 1 Professional Design Services	for MOB Entrance Reconfiguration
	4. UVC Upgrade Project Engineering S	ervices
Х.	Medical Staff Report	Dr. Lawrence Lauridsen, Medical Staff President
XI.	Good of the Order	Taylor Jones
XII.	Executive Session (W.S. §16-4-405(a)(ix))	Taylor Jones
XIII.	Action Following Executive Session	Taylor Jones

XIV. Adjourn

Taylor Jones



OUR MISSION

Compassionate care for every life we touch.

OUR VISION

To be our community's trusted healthcare leader.

OUR VALUES

Be Kind Be Respectful Be Accountable Work Collaboratively Embrace Excellence

OUR STRATEGIES

Patient Experience Quality & Safety Workplace Experience Growth, Opportunity & Community Financial Stewardship

MINUTES FROM THE REGULAR MEETING MEMORIAL HOSPITAL OF SWEETWATER COUNTY BOARD OF TRUSTEES

August 5, 2020

The Board of Trustees of Memorial Hospital of Sweetwater County met via Zoom in regular session on August 5, 2020, at 2:00 PM with Mr. Taylor Jones, President, presiding.

CALL TO ORDER

Mr. Jones called the meeting to order and announced there was a quorum. The following Trustees were present online: Mr. Taylor Jones, Mr. Marty Kelsey, Mr. Richard Mathey, Dr. Barbara Sowada, and Mr. Ed Tardoni.

Officially present: Ms. Irene Richardson, Chief Executive Officer, and Mr. Jeff Smith, Sweetwater County Board of County Commissioners Liaison.

Pledge of Allegiance

Mr. Jones led the attendees in the Pledge of Allegiance.

Our Mission and Vision

Mr. Tardoni read aloud the mission and vision statements.

Mission Moment

Ms. Richardson shared a story brought to her by Ms. Patty O'Lexey, RN, Education. A family member of a patient wanted to reach out and express gratitude to the amazing team at the Hospital. One of Ms. O'Lexey's dear friends was brought in and family were concerned they could not be with her. Ms. O'Lexey said she was told Dr. Michael Neyman, Dr. Alicia Gray, and Ms. Melissa Anderson were amazing in the care they provided. Everyone went above and beyond to comfort the family. We know these are difficult times for everyone. Ms. O'Lexey spoke with family the following day and they were so pleased. They told her it takes a village and we live in an amazing village.

APPROVAL OF AGENDA

The motion to approve the agenda as presented was made by Dr. Sowada; second by Mr. Kelsey. Motion carried.

APPROVAL OF MINUTES

The motion to approve the minutes of the July 1, 2020, regular meeting as presented was made by Mr. Mathey; second by Dr. Sowada. Motion carried. The motion to approve the minutes of the June 29, 2020, special meeting as presented was made by Mr. Mathey; second by Mr. Tardoni.

Motion carried. The motion to approve the minutes of the July 23, 2020, special meeting as presented was made by Mr. Mathey; second by Mr. Tardoni. Motion carried.

COMMUNITY COMMUNICATION

There were no comments.

OLD BUSINESS

<u>COVID-19 Preparation and Recovery - Incident Command Team Update</u>

Ms. Kim White, Incident Command, reported 4,999 tests have been completed with 213 positives, which is a 4.5% positive rate. She said this is where we have been for the past couple of weeks. She said we had some issues with some tests. The State is doing a courier service every day. Last week there were 38 tests that were left in the car and we are having to contact people to re-test. Ms. White said we are also offering a rapid test thru the swabbing station. The test requires the patient to be experiencing symptoms and have a doctor's order. We are working with the schools to be able to get testing more readily available to hopefully keep schools open and keep kids and the community safe. Ms. White said we have had 14 employees test positive. All have recovered and are back at work. Ms. White said Sheriff Grossnickle has donated the use of the vehicle outside the front entrance for the swabbing team. It is working really well and we appreciate him offering that to us. Ms. White said we hope to continue using it until we get our own mobile center. We are still unable to get our regular supply of disposable N95 masks. We have purchased more of the reusable masks and filters. Disposable gowns are still difficult to obtain. If we are able to get personal protective equipment (PPE), the prices are up dramatically between 100-500% increases. Ms. White said that will be a financial concern moving forward. She said we continue to be successful in that any employees who have tested positive have been due to outside exposure and not exposure within the Hospital. She said the staff has done a phenomenal job with the different rules and restrictions put into place. Ms. White thanked the staff for all they are doing. Mr. Jones asked if the increase on the price of the PPE is just because they can. Ms. White said that is the consensus and he said that is unfortunate if that is the case. Mr. Tardoni shared an observation that the outside exposure is people are traveling all over the country and not paying much attention and then coming back home. He said he sees cars from other states all throughout our community. Mr. Jones thanked Ms. White and said we appreciate her report.

Mental Health Conditions – Application Forms

Mr. Jones reported Dr. Lauridsen was unavailable to be on the meeting call yet and asked if anyone else could speak to the form. Dr. Sowada said she was confused on some of the wording on some of the forms and asked for more information. Ms. Kerry Downs, Medical Staff Services Director, said the reason behind this is because we received notification from The Joint Commission (TJC) and asked if she could come back to this later in the meeting. Later in the meeting, Ms. Downs shared her screen to review the former version of the form and the new form. She said the update has been approved by the Medical Staff and is in compliance with TJC requirements. Dr. Sowada thanked her for the clarification. Motion to approve the revised form was made by Dr. Sowada; second by Mr. Mathey. Motion carried.

NEW BUSINESS

Employee Policies

Mr. Jones said the employee policies are for review.

Cultural Diversity: No discussion.

Communication Systems: Mr. Tardoni said the wrong copy got in the packet. He said it is the one presented to the Human Resources Committee and the changes are not showing on that. He said when it comes back to the Board, we will make sure those modifications get in there. Mr. Jones said it will be in for review again and not for a vote. Mr. Tardoni said "employee" should say "users". Mr. Kelsey said he has some comments and wants to send out a short memo addressing the comments he has and he said he can have them out in the next few days.

Board Policy

Attendance of Board Committee Meetings: No discussion.

Contracts Requiring Board Approval: Mr. Kelsey asked if, on items three thru eight, are those entries contemplated as examples of the contracts the Board would consider approving. Mr. Mathey said those are examples of contracts the Board would approve if greater than \$25,000. He said the purpose is to describe the contracts that must be approved before they are signed and he reviewed the list. Mr. Kelsey said before starting Roman numeral three maybe make an introductory sentence or two clarifying that because it would be helpful to the reader. Mr. Mathey said they will review again at the Governance Committee meeting on Friday.

CHIEF EXECUTIVE OFFICER REPORT

Ms. Richardson commended the Incident Command (IC) Team and Ms. White for steering that committee and doing such a great job. Ms. Richardson said IC sends out their daily information and work with the staff to help them understand we need to wear our masks and stay socially distant from each other and it is working well. The staff has done a tremendous job with that and she again thanked the IC Team for their tireless work to keep each other and our patients safe. Ms. Richardson said she continually reminds people when you are out and about to wear your face mask, practice good hand hygiene, stay socially distant, and make sure our community understands how to stay safe. She said this is new for all of us and she thinks we are doing an excellent job over the past six months. We have to keep this up and keep each other safe. Ms. Richardson said we continue offering person-centered care workshops with smaller groups because we do not want to lose momentum. Ms. Mella Grainger from Healthcare Strategies has been here this week. She is helping us with some Quality and Joint Commission work. She will send us a report with recommendations and observations. Ms. Richardson reported Dr. Sowada, Mr. Jones and Ms. Richardson thought it would be a good idea to create a plan and an ad hoc revenue & consumer steering committee to enhance and bring new services to the Hospital. She said there is a lot of potential there. The group has created several initiatives and are still working on those plans. Ms. Richardson said we want to have project managers and formally roll out the plans in the very near future. Ms. Richardson said we have seen some ways to provide different and new services to our patients and we want to make sure our patients get the healthcare they need. Ms. Richardson said

> Minutes of the August 5, 2020 Board of Trustees Meeting Page 3

the auditors were here remotely last week. They also performed their interim audit remotely. Ms. Richardson said Ms. Tami Love, Chief Financial Officer, Mr. Ron Cheese, Director of Patient Financial Services, Ms. Jan Layne, Controller, Ms. Erika Taylor, Staff Accountant, and their teams did a great job getting all of the required information to the auditors electronically. Ms. Richardson referenced a recent Government Accounting Standards Board (GASB) accounting rule on how to account for the CARES Act money e-mail. She said there is another meeting August 17 to obtain more information on accounting for the CARES Act money. Ms. Richardson cautioned things are always changing. She said if anyone gets an e-mail from her that looks suspicious, she asks that you treat it like that and please let her know so she is aware but do not respond to the message and do not do what it asks you to do. Ms. Richardson announced Ms. Ann Clevenger accepted the position of Chief Nursing Officer (CNO). Ms. Clevenger is excited to return to MHSC following her work at Western Wyoming Community College (WWCC). Ms. Richardson said we had some excellent candidates and want to thank them. She said we are excited to have Ms. Clevenger join us and we wish Dr. Kristy Nielson, CNO, well and thank her for all the years of service she has given us. Dr. Nielson is willing to stay on as long as needed to help us with the transition. Mr. Kelsey said maybe not all the Board members know that Dr. Nielson also came from WWCC. Ms. Richardson announced Dr. Lex Auguiste OB/GYN, will join us in September and Dr. Prachi Pawar, Neurologist, in October. Dr. Joshua Binks, Radiation Oncology, joined us in July. We welcome them and are excited to have them join us. Ms. Richardson reported on the Wyoming State Loan and Investment Board (SLIB) grant money. She thanked Ms. Tiffany Marshall, Foundation Director, for writing these grants. Ms. Marshall worked with Ms. Mary Fischer, Lab Director, Ms. Love, and Mr. Jim Horan, Facilities Director, to get the information and submit our applications. Based on what we heard from SLIB, we looked at other opportunities for applications. The HVAC system project will help us tremendously. Ms. Richardson listed several other projects that would help greatly. She said the SLIB meets the following day and we will be available to answer any questions on our new applications. Ms. Richardson thanked staff, leaders, physicians, the Trustees, and Commissioners, and said she thinks everyone has done an excellent job working together. We continue working together to keep our community safe. She said July 31, 2021, is the spend-by date for CARES Act money. Mr. Jones said a ton of work is going into the ad hoc committee and said Dr. Sowada has been doing a great amount of work and thinks it will be a great work when rolled out. Mr. Jones said if you see a suspicious e-mail, you can always hover over the name and see that it isn't Ms. Richardson's real e-mail address. Mr. Jones thanked Ms. Richardson and Ms. Love for another clean audit. He said we have them year after year after year and that does not happen by accident.

COMMITTEE REPORTS

Mr. Jones thanked everyone for the reports and information in the meeting packet. He said the chair reports really help the people who don't attend those committee meetings.

Quality Committee

Mr. Kelsey said the time he and Mr. Mathey had with Ms. Grainger was very interesting and they are looking forward to her report. Mr. Kelsey said he thinks Quality is doing really well and there are probably some things we need to focus on. He said they will share the consultant report with the Board.

Human Resources Committee

Mr. Tardoni said the information is in the packet and he nothing to add.

Finance and Audit Committee

Mr. Mathey said the Committee did not meet in July. He asked Ms. Love to review a narrative. Ms. Love said the biggest change with the auditors is the GASB and CARES Act. She said we will have a loss for June due to the accounting change, however our total gain will remain unchanged. She said we have seen our volumes come back. Ms. Love said we must use the CARES Act money by July 31, 2021. We will carry over \$9M of CARES Act money into FY21. Ms. Love said \$7.4M of accelerated Medicare payments will begin. We are still working to close July. Dr. Sowada asked for the average daily census for July. Ms. Love said it looks like it was 10.7 in July. We budgeted at 9.9. Dr. Sowada asked if Emergency Department visits are coming up. Ms. Love said we are still down about 15% in July. We had 1,200 visits this July and 1,400 last July. Ms. Love said the clinic should see one of their highest revenue and collections months. She said we can use CARES money to offset increased expenses due to Covid and higher costs for PPE. Mr. Jones thanked Ms. Love, Mr. Cheese, and their staff. Ms. Love thanked Ms. Layne, Ms. Taylor, and Mr. Cheese for all of their hard work with the auditors.

Bad Debt: The motion to approve the net potential bad debt of \$782,425.38 as presented was made by Mr. Mathey; second by Mr. Kelsey. Motion carried. Mr. Cheese said he expects the next several months should be down to around this number as long as we can keep the self-pay piece of the accounts receivable where it is right now.

Building & Grounds Committee

Mr. Kelsey said the chair report and draft minutes are in the packet. He said we will likely need a special meeting before too long. Mr. Jake Blevins, ST&B, is trying to decide between a traditional build bid process or a construction manager at risk process as we figure out how to install the equipment. Mr. Kelsey said we, as a hospital, will be buying a significant amount of equipment and we need to figure out how to install it.

Foundation Board

Mr. Jones asked Ms. Marshall to provide an update. Ms. Marshall said the Foundation Board met the prior week and have some cool things going on. Mr. Matt Jackman and Mr. Craig Rood are new members on the Board and are excited to get their feet wet. She said they typically have an election of officers in July. The Board voted to postpone the election until October. Ms. Marshall said they are trying to build some committees to get out in the community. They chose to adopt the annual giving committee and all Board members are serving on that and have been meeting regularly. She said once that one is working well, we will work on identifying what the next committee will be. Mr. Jones thanked Ms. Marshall for her report.

Compliance Committee

Mr. Tardoni said the comments are in the board packet.

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Governance Committee

Dr. Sowada said she did not have anything to add.

Executive Oversight and Compensation Committee

Mr. Jones said the Board would discuss in executive session.

Joint Conference Committee

Mr. Mathey said there was nothing new to report. He said he thinks we are making good progress. Mr. Tardoni said the policies held up in Human Resources can be worded accordingly after the Med Staff Bylaws are complete and then we can move forward.

Mr. Jones said it looks like everyone has jumped in to their new assignments and he appreciates everyone.

CONTRACT REVIEW

The motion to authorize the CEO to execute the Sweetwater Now contract on the consent agenda was made by Mr. Mathey; second by Mr. Tardoni. Motion carried.

MEDICAL STAFF REPORT

Ms. Downs said the Wyoming Board of Nursing changed their requirements for continuing medical education (CME) for practitioners. It is now tied to their board certification so they don't really track the CME's, the certifying board does. Ms. Downs said we updated the form to reflect what is being done. Both the old and new versions are included in the meeting packet. Mr. Jones read aloud a text message from Dr. Lauridsen for his report. Dr. Banu Symington, Hematology Oncology, was published in the Journal of Clinics Oncology. The Medical Executive Committee met July 28. Bylaws met July 13. The bylaws finalized for distribution to the General Medical Staff in the near term.

GOOD OF THE ORDER

Mr. Jones said there was talk of a Quality Workshop in October. We would have October regular meeting, then the workshop, and no November regular meeting.

EXECUTIVE SESSION

Mr. Jones said there would be an executive session for personnel. The motion to go into executive session was made by Mr. Mathey; second by Dr. Sowada. Motion carried. Mr. Jones said the Board would reconvene in 10 minutes.

RECONVENE INTO REGULAR SESSION

At 4:57 PM, the Board came out of executive session and the motion to resume regular session was made by Dr. Sowada; second by Mr. Tardoni. Motion carried.

ACTION FOLLOWING EXECUTIVE SESSION

Approval of Privileges

The motion to approve hospital privileges for healthcare professionals as discussed in executive session was made by Dr. Sowada; second by Mr. Tardoni.

Credentials Committee Recommendations from July 14, 2020

- 1. Initial Appointment to Active Staff (2 years)
 - Dr. Christopher Hunnicutt, Radiology
- 2. Initial Appointment to Consulting Staff (1 year)
 - Dr. Bethany Lewis, Dermatology (U of U)
 - Dr. Eric Goldstein, Tele Stroke (U of U)
 - Dr. Justin Ly, Tele Radiology (VRC)
- 3. Initial Appointment to Locum Tenens Staff (1 year)
 - Dr. Johol Chan, OB/GYN
 - Dr. Neil Krulewitz, Emergency Medicine (U of U)
 - Dr. Jeffrey Lane, Emergency Medicine (U of U)
 - Dr. Wesley Pedicini, Emergency Medicine (U of U)
- 4. Reappointment to Active Staff (2 years)
 - Dr. Cody Christensen, Urology
- 5. Reappointment to Consulting Staff (2 years)
 - Dr. Frederick Welt, Cardiovascular Disease (U of U)
- 6. Reappointment to Locum Tenens Staff (1 years)
 - Dr. James Rao, Hospitalist
 - Dr. Jamal Jones, Emergency Medicine (U of U)
 - Dr. Jane Yee, Emergency Medicine (U of U)
 - Dr. Graham Brant-Zawadzki, Emergency Medicine (U of U)
- 7. New Business
 - AHP CME Statement update Nurse Practitioner requirements

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The motion to approve the CEO to execute and sign the contract discussed executive session was made by Dr. Sowada; second by Mr. Kelsey. Motion carried.

ADJOURNMENT

There being no further business to discuss, the meeting adjourned at 4:59 PM.

	Mr. Taylor Jones, President
Attest:	
Mr. Marty Kelsey, Secretary	

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MINUTES FROM THE SPECIAL MEETING MEMORIAL HOSPITAL OF SWEETWATER COUNTY BOARD OF TRUSTEES

August 12, 2020

The Board of Trustees of Memorial Hospital of Sweetwater County met in a special meeting via Zoom on August 12, 2020, at 2:00 PM with Mr. Taylor Jones, President, presiding.

CALL TO ORDER

Mr. Jones called the meeting to order. The following Trustees were present online: Mr. Taylor Jones, Mr. Marty Kelsey, Mr. Richard Mathey, Dr. Barbara Sowada, and Mr. Ed Tardoni.

Officially present: Ms. Irene Richardson, Chief Executive Officer.

Mr. Jones said the purpose of the meeting is to give the CEO authorization for the projects the Board already gave her authorization for. He said there were legal reasons to have the meeting and asked Ms. Suzan Campbell, In-House Counsel, to give an overview of the purpose of the meeting. Ms. Campbell said we have decided we do need a project manager and decided to use the construction manager at risk (CMAR) method. In order to do that we need to give Ms. Richardson the authority to get bids and identify the CMAR. Ms. Campbell cited W.S. 16-6-701 and 16-6-707. She said this will be authorization for the HVAC, UV lights for HVAC, and front entrance of the medical office building. Mr. Kelsey said his understanding is Mr. Jake Blevins of ST&B has recommended to Mr. Jim Horan, Facilities Director, to use the CMAR option. Mr. Blevins confirmed that was correct. He said it is based on time limits for incurring expenses by the deadline that are then eligible for reimbursement. He said we hope to see two to three pay application cycles by the deadline. Mr. Tardoni said we are in a unique situation. He asked what ST&B and the Board of Trustees can do, radical as it may be, to not leave any money on the table. He said we need to do what is legal and correct. Mr. Todd Spacek, ST&B, outlined the process. There was discussion of statutory requirements. Mr. Blevins reported on their progress to date. The motion to authorize the CEO of the Hospital to solicit proposals for CMAR for three projects identified as appropriate for this alternative delivery method and authorize the CEO to select the CMAR for the three projects presented was made by Mr. Kelsey; second by Mr. Tardoni. Mr. Kelsey said he has done a couple of these types of projects. He asked if it would be appropriate to approve the project when we have the guaranteed maximum price (GMP). He said right now the Board doesn't know what the total cost will be. Mr. Spacek said that is what they are doing at the University of Wyoming for their project and said that is typically the process. Mr. Kelsey amended his motion to include what he said before and add to provide that the CEO is given the authority to approve the CMAR project all the way through and including once we have received the GMP; second by Mr. Tardoni. Motion carried. The motion to authorize the CEO to solicit bids and to further authorize the CEO to select the successful bidder and award a bid for the mobile lab equipment, walk in lab equipment, PAPRs, and proning beds made by Mr. Kelsey; second by Dr. Sowada. Motion carried.

ADJOURNMENT

There being no further business to discuss, the meeting adjourned at 2:37 PM.

	Mr. Taylor Jones, President
Attest:	
Mr. Marty Kelsey, Secretary	

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PolicyStat ID: 8007197

Current Status: Draft



Approved: Review Due: Document Area: Reg. Standards:

N/A N/A Employee Policies

EMPLOYEE POLICIES-CULTURAL DIVERSITY

EMPLOYEE POLICIES-Cultural Diversity

Memorial Hospital of Sweetwater County (MHSC) is committed to providing an environment that encourages the talents and recognizes the uniqueness of each employee regardless of race, gender, age, cultural background, ethnicity, sexual orientation, disability, religion and other types of diversity. We believe a diverse workforce will help MHSC employees interact effectively and compassionately with our patients and in our community. MHSC Mission, Values and Vision operate on the fundamental belief that individual and cultural differences are a reality, and that such differences will produce better idea, quality services and genuine compassionate care for all.

Attachments

No Attachments



Board Policy

Board of Trustees Policy Manual

NO. 10

Category: Governance Title: Attendance of Board Committee Meetings Original adoption: September 2, 2020 Revision:

Purpose

Standing Committees are an important part of the governance structure of the Board of Trustees (Board) of Memorial Hospital of Sweetwater County. Although most of the detailed work of the Board is performed by its Committees, the Committees have no expressed or implied power or authority. Therefore, it is permissible for a Trustee, who is not an appointed member, to attend meetings of Committees of which s/he is not a member.

Policy

- 1. In the absence of an appointed **trustee** member, the President may appoint a **trustee to be a** temporary member of the Committee, who shall have voting privileges.
- 2. For educational/informational purposes, Trustees may attend the meetings of Committees of which they are not appointed members. They shall not have voting privileges. Their attendance neither triggers a quorum nor indicates a public meeting.
- 3. The Board President is an ex-officio member of all committees and may attend any Committee meeting without being in conflict of open meeting laws.
- 4. All Board and Committee meeting shall comply with the Wyoming Open Meetings Act.¹
- 5. Under Wyoming's Open Meetings Act notice of regularly scheduled committee meetings need not be given.
- 6. Committees may meet in executive session provided that all executive sessions are in compliance with the Wyoming Open Meetings Act.

¹ Wyoming Open Meetings Act which is statutes 16-4-401 to 16-4-408.

Current Status: Draft



Approved: Review Due: Document Area: Reg. Standards:

N/A N/A General - Housewide

CONTRACTS REQUIRING BOARD APPROVAL POLICY

CONTRACTS REQUIRING BOARD APPROVAL POLICY

PURPOSE:

This Hospital wide policy describes the contracts that require Board approval before they become effective. Once approved the Board may direct the CEO to sign on behalf of the Board. **This policy does not apply to the hiring of Hospital employees other than Physicians and Non-Physician Providers.**

I. Agreements requiring County Commission approval - as defined by Wyoming Statute § 18-8-301. This statute states that a contract in which the county hospital "engages in shared services and other cooperative ventures; enters into partnerships; either alone or in conjunction with any other entity, form or be an interest owner of corporations, partnership, limited partnership, cooperative... or any other trust or association organized under the laws of this state" must be approved by the Board of Trustees and the County Commissioners before such an agreement is binding on any of the parties. Contracts anticipated by Wyoming Statutes §18-8-108 and 109 can only be negotiated, executed and agreed to by the Board of Trustees in conjunction with the Board of County Commissioners.

II. *Any contract equal to or greater than \$25,000.00* This excludes service agreements (regardless of the dollar amount) attached to Board approved capital equipment. The service agreements attached to this equipment can be signed and approved by the CEO and reported to the Board at the next Board meeting after approval.

III. All Physician and Non-Physician Provider Employment Contracts

- IV. All Hospital Consultant contracts
- V. All Hospital Management contracts

VI. All Real estate transactions and any real property leases over \$2000.00 month.

VII. All Legal settlements

VIII. Any other contract the CEO or In-House Counsel wish to present to the Board for discussion and approval.

A list of other contracts that have been approved by In-House Counsel and signed by the CEO will be provided to the Board at the Board meeting following internal approval of these contracts.

16/226

Process After Contract is Approved and Signed

All executed contracts, excluding Physician and Non-Physician Provider contracts, shall be submitted to In House Counsel when finalized. Physician and Non-Physician Provider contracts are housed in the Administration office. All other contracts shall be entered into the contract database and tracked for renewal and/or expiration dates by In House Counsel. Notice of contract renewal or expiration shall be provided to the CEO and responsible staff member for the contract by In House Counsel at least 90 days prior to the date required to terminate or renew the contract. For example, if contract requires 180 days notice to terminate, the contract will be flagged for notice to responsible party and CEO 90 days prior to the start of the 180 day's required for notice of termination.

Attachments

No Attachments

DRAFT



September 2, 2020

Memorial Hospital of Sweetwater County 1200 College Drive, Rock Springs, WY 82901

Governing Board,

This letter is to acknowledge that I, Irene Richardson (CEO) of Memorial Hospital of Sweetwater (MHSC) give my full support for the Antimicrobial Stewardship Program (ASP) at MHSC. MHSC is committed to actively promoting and implementing principles of antibiotic stewardship and advancing the objectives set forth by the Centers for Disease Control and Prevention, Centers for Medicare and Medicaid, and The Joint Commission.

MHSC is committed to provide the following:

- 1. Support for ensuring participation and compliance by all prescribers.
- 2. Support for inclusion of stewardship-related duties in job descriptions and annual performance reviews.
- 3. Support for training and education.
- 4. Financial support in the terms of:
 - a. Physician participation
 - b. Computer equipment or software to enhance the stewardship program (i.e. surveillance software, pharmacy hardware/software, etc.)
 - c. Sponsorship for any educational programs provided by MHSC.

I respectfully request the MHSC Board of Trustees join me in appointing Sarah Romero, PharmD, RPh. the Antimicrobial Stewardship Program leader. Sarah has been a MHSC hospital pharmacist for 10 years and is active in the ASP program at MHSC. She has completed a Cardinal Health Antimicrobial Stewardship Curriculum consisting of 8 education courses and has completed an additional 5 courses focused on antimicrobial stewardship. In total, these programs represent approximately 16 hours of ACPE education and training in antimicrobial stewardship. Based upon her training and enthusiasm, I believe Sarah is the ideal leader for the MHSC Antimicrobial Stewardship Program. This appointment is based on recommendations of medical staff leadership and pharmacy leadership.

Sincerely,

Irene Richardson, Chief Executive Officer

MM.09.01.01 EP9 Retrieved 08/14/2020

For hospitals that use Joint Commission accreditation for deemed status purposes: An individual(s) who is qualified through education, training, or experience in infectious diseases and/or antibiotic stewardship, is appointed by the governing body as the leader(s) of the antibiotic stewardship program. The appointment is based on recommendations of medical staff leadership and pharmacy leadership.



September 02, 2020

Memorial Hospital of Sweetwater County 1200 College Drive, Rock Springs, WY 82901

MHSC Board of Trustees,

This letter is to acknowledge that I, Irene Richardson (CEO) of Memorial Hospital of Sweetwater (MHSC), give my full support for the Infection Prevention (IP) Program at MHSC. MHSC is committed to actively promoting and implementing principles of infection prevention and control and advancing the objectives set forth by the Centers for Disease Control and Prevention, Centers for Medicare and Medicaid, and The Joint Commission.

MHSC is committed to ensuring an effective, well managed infection prevention and control program. To achieve this outcome, Noreen Hove, MSN, RN, CNOR has been deemed as the person at MHSC with clinical authority over the infection prevention and control program based on the recommendations of medical staff leadership and nursing leadership. Noreen's experience spans 25 years as a clinical nurse and nurse leader in the Operating Room as well as experience in infection prevention and control in facilities outside the MHSC.

I respectfully request the MHSC Board of Trustees to join me in the appointment of Noreen Hove, MSN, RN, CNOR as the individual responsible for the infection prevention and control program at the MHSC.

Sincerely,

Irene Richardson, Chief Executive Officer

Joint Commission IC. 01.01.01: For hospitals that use Joint Commission accreditation for deemed status purposes: An individual(s) who is qualified through education, training, experience, or certification in infection prevention and control is appointed by the governing body to be responsible for the infection prevention and control program. The appointment is based on recommendations of medical staff leadership and nursing leadership.

PolicyStat ID: 8266872



Approved:	N/A
Review Due:	1 year after approval
Document Area:	Case Management & Utilization
	Management
Reg. Standards:	CMS §482.30, TJC LD.04.02.05

Utilization Management Plan

STATEMENT OF PURPOSE

Memorial Hospital of Sweetwater County (MHSC) is professionally and ethically responsible for providing care, treatment and services within its capability, law and regulation. The Utilization Management Plan defines how MHSC reviews the services furnished by the organization and by members of the medical staff to patients entitled to, but not limited to, benefits under Medicare and Medicaid programs.

There are times such care, treatment and services are denied because of payment limitations. In these situations the decisions to continue providing care, treatment and services or to discharge the patient is based solely on the patient's identified needs, the capacity of the organization to provide the care, and governing laws. This document will outline the process for decision making and care discussion for providing services within the capability, laws, and regulations governing Memorial Hospital of Sweetwater County. This document, which is reviewed annually by appropriate committees and organization leaders, also outlines practices to identify and act upon opportunities for improvement to maximize efficiency of services provided.

TEXT:

I. Definitions

- A. <u>Clinical Documentation Improvement</u>: Improvement efforts focused on documentation of patient care activities that accurately and appropriately translates the care provided and clinical status to coded data (American Health Information Management Association [AHIMA], 2019).
- B. <u>KEPRO</u>: KEPRO is the Beneficiary and Family Centered Care Quality Improvement Organization (BFCC-QIO) representing the state of Wyoming, therefore representing MHSC. KEPRO is a branch of the Quality Improvement Organization working with Medicare beneficiaries to improve the quality of care. The function of KEPRO is to support improved quality delivery of care, protect the integrity and the Medicare Trust Fund, and to protect beneficiaries by addressing complaints from beneficiaries in a timely manner. KEPRO performs medical record reviews as requested by the beneficiary or appropriate representative (KEPRO, 2017).
- C. <u>Recovery Audit Contractors (RAC)</u>: Recovery audit contractors function under the Centers for Medicare & Medicaid Services (CMS) to detect and correct improper payments that have been made in efforts to identify and correct future improper payments from occurring (CMS, 2018). The RAC process impacts MHSC as the organization bills fee-for-service programs for services delivered at MHSC to Medicare & Medicaid.



D. <u>Quality Improvement Organization (QIO)</u>: Under direction of the Centers for Medicare & Medicaid Services, Quality Improvement Organizations function to partner with care providers, stakeholders, patients and their families to improve the delivery of care, enhance quality of life within communities, and decrease unnecessary health care spending. They function as resources to assist organizations in improving care. Mountain Pacific Quality Health is the Quality Innovation Network-Quality Improvement Organization (QIN-QIO) for Memorial Hospital of Sweetwater County. They represent the state of Wyoming (Mountain Pacific Quality Health, 2018).

II. Authority

The Governing Board, as the Memorial Hospital of Sweetwater County Board of Trustees, has ultimate accountability for the management of the quality, appropriateness, and clinical necessity of services. The Board of Trustees delegates the utilization management function to the Chief Executive Officer and the medical staff. The utilization management function is the responsibility of the Utilization Management Committee (UM Committee) that has been established as a standing committee of the medical staff. Utilization management responsibilities will be delegated by the president of the Medical Executive Committee who appoints physician members. The Utilization Management Plan is written and reviewed by the Utilization Management Committee and approved for adoption by the Medical Executive Committee and the Board of Trustees.

III. Purpose

The purpose of utilization management at MHSC is to:

- A. Assist in driving value in health care through collaboration, promotion of transparency, and the balance of quality, service, and cost (refer to <u>MHSC's Performance Improvement and Patient Safety</u> <u>Plan [PIPS]</u>).
- B. Evaluate the effectiveness of the electronic medical record (EMR) in meeting the needs of quality and utilization services.
- C. Identify patterns of overuse, underuse, misuse and inefficient scheduling of services with recommended plans of corrective action.
- D. Assure effective and efficient utilization of hospital resources.
- E. Provide a mechanism for concurrent review of appropriateness of services.
- F. Comply with CMS guidelines/standards for utilization review.
- G. Assist in organizational improvement strategies based on identified opportunities.

IV. Organization of the Utilization Management Committee

- A. Membership
 - 1. Physician members
 - a. Physician members will be appointed annually by the president of the medical staff
 - b. Committee will consist of at least two (2) physicians
 - c. One (1) physician member must be present at each meeting
 - d. The president of the Medical Staff will appoint the Physician Chair
 - 2. Non-physician members may include, but are not limited to:
 - a. Administration

- b. Health Information Management
- c. Nursing
- d. Quality
- e. Case Management
- f. Clinical Documentation Improvement
- g. Patient Financial Services
- h. Other health care practitioners and professionals as necessary
- B. No person holding any direct financial interest in the hospital will be eligible for appointment to the Committee. No physician will participate in review of any case in which he/she has been professionally involved. Cases under review in which both physician members have provided care will be deferred to another active physician of the medical staff for objective review and asked to present the information to the UM Committee members.
- C. The UM Committee will meet a minimum of at least three (3) times per year. The Committee may meet more frequently if needed as concurrent issues arise.
 - 1. A meeting may be called by any member of the Committee.
 - 2. The UM Physician Chair will be notified, as he/she may need to coordinate the meeting.
- D. A summary of UM activities and recommendations for any action believed to contribute to the improvement of patient care or appropriate use of resources will be reported to the Medical Executive Committee and to the Quality Committee of the Board.
- E. Recommendations for action requiring system and/or process changes will be referred to the PIPS committee or other appropriate committee/work team to carry out process change for improvement per the PIPS Plan.
- F. Recommendations for action or follow-up regarding individual provider performance or care delivery will be referred to MHSC's peer review/provider performance review process.
- G. Functions
 - 1. Concurrent review of outlier cases not meeting appropriateness and medical necessity of services.
 - 2. Retrospective outliers, as defined by the UM Committee, will be reviewed and identified through use of, but not limited to, the following data resources:
 - a. Reports from the hospital's data systems
 - b. Results of review by the Quality Improvement Organization (QIO)
 - c. Recovery Audit Contractor (RAC) audit result letters
 - d. Medicare denials
 - e. PEPPER Report

V. Methods of Review

- A. Referral of Reviews
 - 1. Any staff member at MHSC can initiate an inquiry for review as it pertains to utilization of resources and services.

- a. Staff can begin the inquiry by following the appropriate chain of command within their respected department.
- b. The department leader will communicate the issue in question and provide supporting information to Case Management.
- c. Case Management to determine the appropriate course of action for additional referral to the Committee, escalation for review, or follow-up.
- 2. In situations identified as needing immediate intervention as it relates to utilization of resources and services rendered, it is the expectation that identified issues will be communicated and discussed in the moment with the attending and/or ordering physician of services. If concerns are unable to be resolved, and if Case Management (CM) is unavailable to pursue immediate case review through the process outlined through the MHSC CM Physician Escalation Process (see attached flow process), an active UM physician may be contacted to initiate and assist with the concurrent review necessity.
- B. Concurrent Review
 - Concurrent review includes review of the encounter for medical necessity for admission, necessity for continued hospital stay and utilization of resources by case management processes (see Appendices: MHSC Utilization Management Process Flow & MHSC CM Physician Escalation Process).
 - a. If the patient does not meet criteria for admission, continued stay or medical necessity, the case is referred to the UM Committee Physician Chair for review.
 - b. If necessary, the attending physician will be contacted for additional information. All information used for determining medical necessity must be evident and documented in the medical record by the attending physician.
 - c. If the UM Committee Physician Chair has reason to believe the admission is not necessary, he/she will confer with the attending physician and afford him/her the opportunity to present his/her views. If the attending physician concurs medical necessity is not met, he/she will discharge the patient or correct the admission status following appropriate <u>Condition Code</u> <u>44 Procedures</u> per Medicare guidelines.
 - d. If the attending physician does not concur with the determination made by the UM Committee Physician Chair, the case will be referred to a second (2nd) physician. If this additional review indicates justification for admission, the admission will be approved and Case Management will assign the next review date within three (3) days.
 - e. If the UM Committee Physician Chair and the additional physician adviser determine that an admission is not medically necessary, they will complete a written hospital-issued notice of non-coverage (HINN letter), see attached. This notification will be distributed as soon as possible (preferably prior to or at the time of admission) to the patient and/or patient representative, the hospital, the attending physician and, as appropriate, the state agency for Medicaid patients and any other appropriate reviewing organization. The letter will be distributed by Case Management or other designated party.
 - f. An attending physician or patient who disagrees with the decision of both physician advisers with respect to notice of non-coverage may request a reconsideration of the decision from the UM Committee physician members.
 - g. For Medicare Patients Only: If the attending physician disagrees with the decision of the

UM Committee Physician Chair and the second physician adviser, the attending physician will contact KEPRO, a function of the Quality Improvement Organization (QIO), for an immediate review of the case. If the QIO agrees with the physician advisers a written notice of non-coverage will be given to the patient and/or patient representative, the attending physician, the hospital, and the QIO. If the QIO does not agree with the UM Committee Physician Chair and the second physician adviser, the admission will be approved. A physician/patient who disagrees with the QIO decision may request reconsideration of the decision from the QIO. The time frame and appeals process shall be followed as defined by the QIO guidelines.

- h. In all cases, <u>only</u> a physician will make a decision regarding appropriateness of admission.
- i. Actions taken during admission review will be documented by the UM physician within the hospital's data analytic system.
- 2. On weekends and on days when the physician members of the Utilization Management Committee are unavailable, review decisions will be made by the hospital-employed hospitalist, general surgeon, pediatrician, obstetrician, orthopedist, or emergency medicine physician on call. Reviews must be conducted by a physician from a specialty that is different from the specialty that is being reviewed.
- C. Retrospective Review
 - 1. Retrospective review is performed under the following circumstances after the patient has been discharged:
 - a. To address cases with issues that were not identified or sufficiently handled during concurrent review.
 - b. To address trends in overuse, underuse or misuse of medical services.
 - c. To review cases for which third party payers question or deny care.
 - d. When required by third party payers.
 - e. To respond to issues referred by other departments or committees.

VI. Relationship with Fiscal Intermediary, State Agencies, Department of Health and Human Services and the QIO

A. The procedures and minutes of the UM Committee will be made available for confidential review as required by the fiscal intermediary, authorized state agencies, the Department of Health and Human Services and, as appropriate, the QIO.

VII. Confidentiality

A. WY Stat § 35-2-910 "Each licensee [hospital, health care facility and health services] shall implement a quality management function to evaluate and improve patient and resident care and services in accordance with the rules and regulations promulgated by the division. Quality management information relating to the evaluation or improvement of the quality of health care services is confidential. Any person who in good faith and within the scope of the functions of a quality management program participates in the reporting, collection, evaluation, or use of quality management information or performs other functions as part of a quality management program with regards to a specific circumstance shall be immune from suit in any civil action based on such functions brought by a health care provider or person to whom the quality information pertains. In no event shall this immunity apply to any negligent or intentional act or omission in the provision of care"

(Justia US Law, 2019).

B. Confidentiality shall be maintained, based on full respect of the patient's right to privacy and in keeping with hospital policy and state and federal regulations governing the confidentiality of quality and patient safety work. All quality and patient safety data and information shall be considered the property of Memorial Hospital of Sweetwater County.

Approval: UM Committee, 7/29/2020; Quality Committee 8/19/ 2020; MEC 7/28/2020; Board of Trustees

REFERENCES

American Health Information Management Association [AHIMA]. (2019). *Clinical documentation improvement*. Retrieved from <u>http://www.ahima.org/topics/cdi</u>

Centers for Medicare & Medicaid Services [CMS]. (2018, October 12 [revised]; 2015, March 27). §482.30 *Condition of participation: Utilization review.* State operations manual: Appendix A- survey protocol, regulations and interpretive guidelines for hospitals. Retrieved from <u>https://www.cms.gov/Regulations-and-Guidance/</u> <u>Guidance/Manuals/downloads/som107ap_a_hospitals.pdf</u>

Centers for Medicare & Medicaid Services [CMS]. (2017). *Medicare fee for service recovery audit program*. Retrieved from <u>https://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/Medicare-FFS-Compliance-Programs/Recovery-Audit-Program/index.html</u>

Federal Register. (Up to date as of 8/18/2020). Title 42 Part 482 - Conditions of Participation for Hospitals: §482.30 Utilization Review, pp. 35 - 37. Retrieved 8/20/2020 from <u>https://ecfr.federalregister.gov/current/</u> <u>title-42/chapter-IV/subchapter-G/part-482</u>

Justia US Law. (2019). WY Stat § 35-2-910. *Quality management functions for health care facilities; confidentiality; immunity; whistle blowing; peer review.* Retrieved from <u>https://law.justia.com/codes/wyoming/</u>2017/title-35/chapter-2/article-9/section-35-2-910/

KEPRO. (2017). KEPRO service areas. Retrieved from https://www.keprogio.com/

Mountain Pacific Quality Health. (2018). *Mountain pacific quality health quality improvement organization*. Retrieved from <u>http://mpqhf.com/QIO/</u>

Date of Origin: 2008

Attachments

HINN-1 - Preadmission or Admission Hospital -Issued Notice of Noncoverage (HINN) 6.20.docx MHSC CM Physician Escalation Process.pdf MHSC Utilization Management Process Flow 6.20.pdf

Approval Signatures

Approver	Date
Kristy Nielson: Chief Nursing Officer	pending
Irene Richardson: CEO	08/2020
Tami Love: CFO	07/2020
Kari Quickenden: Chief Clinical Officer	07/2020
Kristy Nielson: Chief Nursing Officer	07/2020



Performance Improvement and Patient Safety (PIPS) FY 2021 Priorities

The PIPS Committee thoroughly evaluated priorities for improvement for the current fiscal year. To assist and guide in the setting of priorities, the PIPS Committee utilized the prioritization matrix (found within appendices on PIPS Plan), evaluated trends in our data, determined if each topic was in support of MHSC's Strategic Plan, and evaluated if the topic was a CMS and/or Joint Commission Standard. The following three distinct improvement projects were identified by the PIPS Committee, and approved by the Quality Committee of the Board and MEC as priorities for FY 2021.

- 1. HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems)
- 2. Culture of Safety Survey Action Plans
- 3. High Level Disinfection and Sterilization

The methods and strategies for improvement, along with the measurement and setting of goals, are in development. Previous areas of focus such as Sepsis, OP 10 – Abdomen CT with and without contrast, and Patient Flow will continue to be worked on through committees and project teams. As the year progresses, the organization may identify additional/other priorities, or identify concerning data trends. Should the need arise, the PIPS Committee will utilize the tools described above as needed for the purpose of adjusting the priorities selected for FY 2021.



Project: MEMORIAL HOSPITAL SWEETWATER COUNTY

Project No: 1753

CARES Act (Covid-19) 08/26/20

Lab Renovation & Addition

Project Phase: Documents Dated:

CONCEPTUAL COST	ESTIMATE - LAB REN	OVATIC)N &	ADDIT	ON	
		Pricing				
	Quantity	Unit	Un	it Price		Total Cost
Division 1 - General Conditions						
Mobilization	1	ls	\$	3,000	\$	3,000
Demobilization	1	ls	\$	3,000	\$	3,000
Supervision	12	mo	\$	5,000	\$	60,000
General Conditions	12	mo	\$	3,000	\$	36,000
Waste Disposal Services	12	mo	\$	1,000	\$	12,000
Dust and Infection Control	12	mo	\$	3,500	\$	42,000
Overhead and Profit	3,022,875	%		0.080	\$	241,830
Bonds & Insurance	3,022,875	%		0.020	\$	60,458
Subtotal General Conditions					\$	458,287.50

Heavy Renovation					
Reconfigure Space to Include:	825	sf	\$	295	\$ 243,375
- Secure clean room for case identification upon arrival					
- Dedicated patient room					
- Update HVAC for isolated sanitary					
- Renovate walls and ceilings for pressurized hvac systems	s and clean roo	m syster	ns		
- Dedicated signage, security, and room identification					
- New Ceiling Finishes					
- New Resilient Wall Finish					
- New Resilient Floor Coverings & Floor Repairs					
- Upgrade power/data, and lighting					
- Renovated Pneumatic Tubing System					
Subtotal Heavy Renovation					\$ 243,375

Light Renovation				
Upgrade Finishes in Existing Patient Areas	1,200	sf	\$ 185	\$ 222,000
- New Ceiling Tiles				
- New Resilient Wall Finish				
- New Resilient Floor Coverings				
Subtotal Light Renovation				\$ 222,000

Proposed Lab Addition				
Increased Area for Upgraded Lab Equipment & Services	4,500	sf	\$ 495	\$ 2,227,500
- New Construction, inlcuding utilities, mechnical, electrical,	, and technolog	ду		
- Negative Pressure Testing Rooms				
- Lab Administration Specialists				
- Additional Pneumatic Tubing				
Subtotal Lab Addition				\$ 2,227,500



Project No: 1753

Project: MEMORIAL HOSPITAL SWEETWATER COUNTY

Documents Dated: 08/26/20

Project Phase: CARES Act (Covid-19) Lab Renovation & Addition

\$

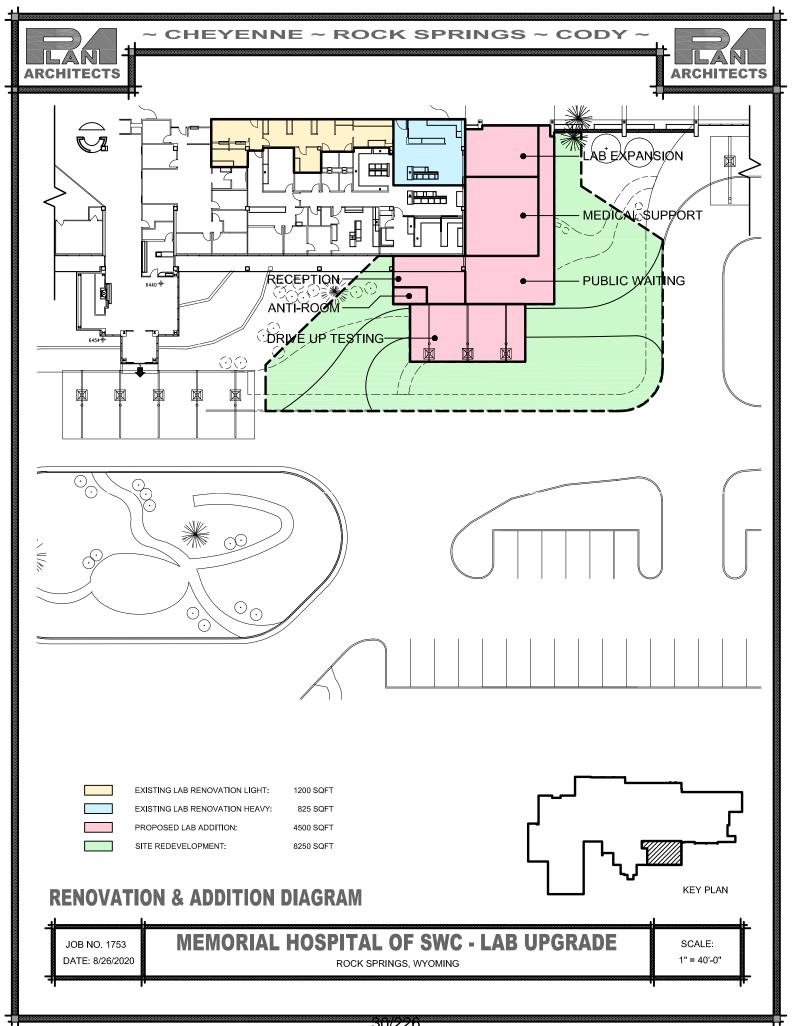
4,468,368

Boounients Butea.	00/20/20									
CONCEPTUAL COST ESTIMATE - LAB RENOVATION & ADDITION										
		Pricing								
	Quantity	Unit	Unit Price		Total Cost					
Site Redevelopment										
Site Redevelopment due to addition	8,250	sf	\$ 40	\$	330,000					
- Drive Up testing with covered canopy										
- Landscape Retaining Walls & Drainage Modifications										
- Landscaping and Irrigation										
Subtotal Site Redevelopment				\$	330,000					
Project Soft Costs										
Architectural / Engineering Fees	3,022,875	%	0.115	\$	347,631					

Architectural / Engineering Fees	3,022,875	%	0.115	\$	347,631
Reimbursables	1	ls	\$ 20,000	\$	20,000
Permits	1	ls	\$ 15,000	\$	15,000
Furniture, Fixtures, and Equipment	3,022,875	%	0.100	\$	302,288
Owner Contingency	3,022,875	%	0.100	\$	302,288
Subtotal Project Soft Costs				\$	987,206
				Ψ	507,20

Total Project Cost - Hard & Soft Costs Combined

Notes:



MEMORANDUM

To:Board of TrusteesFrom:Wm. Marty KelseySubject:Chair's Report...August Quality Committee MeetingDate:August 24, 2020

Ms. Kara Jackson reviewed the "Prioritization Matrix Tool" to provide the Committee with some context as to how the PIPS Committee determined to prioritize the work going forward. The three topics determined to be of highest priority were: HCAHPS, Culture of Safety Action Plans, and HLD (High Level Disinfection) and Sterilization. The Committee voted to approve the PIPS plan and the associated prioritization list and to forward the Plan and the prioritization list to the Board for approval at its September meeting.

Ms. Kari Quickenden reported that the Continual Readiness Committee has been meeting often to get ready for the **The Joint Commission** visit which should occur any time now. The Committee is now meeting weekly. The Hospital's three year anniversary is August 21, 2020.

MHSC case managers presented the Utilization Management Plan for approval with Ms. Robin Jenkins as spokesperson. This area of management at MHSC involves, among other things, level of care, use of resources, and medical necessity and how the Hospital performs in these matters. This Plan must be approved by the Board and is scheduled to be presented at the September meeting.

Ms. Noreen Hove gave a Power Point presentation on infection prevention. Some things were learned by staff over time and additional education for nurses and doctors is needed in this area. In 2017 MHSC had onset Clostridioides Difficile (CDI) higher than predicted resulting in a loss of revenue.

Ms. Jackson went over the "From the Director" part of the agenda. She went over some areas of achievement and concern that have occurred over the past several months.

A Quality presentation to the Board is scheduled for sometime in late October. No specific date has been established at this time.

The Board will receive a report by the consultant (Ms. Mella Grainger with Healthcare Strategies) brought in to review the Hospital's Quality Program. The staff is reviewing the report at this time.



Quality Committee Meeting Memorial Hospital of Sweetwater County August 19, 2020

Present:	Voting Members: Kara Jackson (Quality Director), Irene Richardson (CEO), Leslie Taylor (Clinic Director), Tami Love (CFO), Marty Kelsey (Quality Board Chair), Richard Mathey (Board Member), Dr. Cielette Karn, Dr. Kristy Nielson (CNO), Dr. Melinda Poyer (CMO), Dr. Kari Quickenden (CCO),
	Non-voting Members: Noreen Hove, Cindy Nelson, Robin Jenkins, Jeanne West, Deb Davis-Richardson, Gabrielle Seilbach, Karali Plonsky
Absent/Excused:	Voting Members: Dr. Banu Symington,
	Non-voting Members: Corey Worden, Kalpana Pokhrel,
Chairt	Mar Marthy Kalaasy

Chair: Mr. Marty Kelsey

Mission Moment

Dr. Poyer shared a story about a Covid-19 diagnosis related patient that sent a wonderful letter regarding their care.

Approval of Agenda

Mr. Kelsey presented the Agenda for approval. Dr. Poyer motioned for approval and Mr. Mathey seconded the motion. Motion was unanimously approved.

Approval of Minutes

Mr. Kelsey presented the July 15, 2020 Quality Committee Minutes for approval. Dr. Poyer motioned for approval and Dr. Quickenden seconded the motion. Motion was unanimously approved.

Old Business

PIPS update was presented by Ms. Jackson, who explained the changes in layout for ease of reading. She further explained that the stats help to identify areas for priority focus. Ms. Jackson requested approval of the chosen priorities from the Committee. Mr. Mathey motioned to approve and Dr. Poyer seconded. Motion approved

Ms. Jackson further requested approval of the PIPS prioritization list as an attachment to the PIPS plan. Motion to approve by Mr. Mathey, seconded by Ms. Richardson. Motion approved.

Ms. Quickenden stated Continual Survey Readiness (CSR) Committee has been meeting every two (2) weeks, but are moving to once a week. They are having departments present action items that they return to for review, plus they have been doing weekly rounding in different departments each time. We expect The Joint Commission (TJC) any day, our 3-year anniversary is August 21, 2020.

New Business

Ms. Robin Jenkins, Ms. Jeanne West and Ms. Deb Davis-Richardson as MHSC Case Managers presented the Utilization Management Plan for approval to the Quality Committee. Ms. Jenkins

acted as the spokesman, explaining the process and its importance to patients and our facility. It's about finding appropriate resources, giving appropriate level of care, meeting medical necessity and receiving reimbursement. Dr. Nielson noted that this plan was actually created a few years ago, but we have updated it, basically paraphrasing CMS standards. Our charter follows CoPs guideliines. Mr. Kelsey questioned the multiple dates of approval. Dr. Nielson explained that the approvals have been added to the body of the document, for ease of tracking, and the multiple dates indicate each time it was approved. Mr. Mathey motioned to approve the plan, and Dr. Karn seconded. Motion approved unanimously. Plan will be presented to the Board of Trustees.

Medical Staff Update

Dr. Karn gave the Medical Staff update, noting that COVID-19 consumes everything we do. Blood culture drawing has been problematic in the ED and we have worked to have lab staff available, but their time has been consumed with COVID-19 swabbing, so we continue to work with this issue.

Informational Agenda

Ms. Jackson requested any questions on the Informational Agenda, then presented Ms. Noreen Hove, Infection Preventionist for presentation of the Infection Prevention Clostridioides Difficile (CDI) PowerPoint presentation. Ms. Hove presented a PowerPoint on CDI which is transmitted through direct contact and can be fatal. PowerPoint will be attached to Quality Committee Packet. In 2017 they predicted we would have 1.5 hospital onset CDI, we actually had 2. We received a reduction in pay. It is because our numbers are so low to non-existent in other areas that could offset this number, that all focus is on this one point. Most if not all of the CDI tests should not have been sent in, since they did not meet requirements. Better education for our nurses and doctors will help in the decision process, but calling the Infection Preventionist can also be instituted on all tests.

Ms. Jackson explained the new section "From the Director". This new section will show significant improvements and achievements through the Quality program. Ms. Jackson further explained the PIPS revamp – points she will further expand on next month. Ms. Jackson explained Rounds and Tracers. Rounds are walk through where floor to ceiling is inspected – looking at physical area, documentation, staff compliance and questions. Tracers help you focus in on one specific area tracing a patient's path through the organization, with example questions, allowing us to prep our staff for TJC. Ms. Jackson further covered Areas of Concern to be Addressed.

Quality Committee will be presenting to the Board in October.

Meeting Adjourned Mr. Mathey motioned to adjourn, Ms. Richardson seconded the motion. The meeting adjourned at 9:44 am

33/226

Next Meeting

September 16, 2020 at 08:15 am via ZOOM

Respectfully Submitted,

Confidential

Robin Fife, Recording Secretary

Confidential

Page 3 of 3 8/24/2020

Quality Committee Consent Agenda Quality Summary August 2020

Four Priority/Focus Areas (Bolded in Summary Below)

- 1. ED Patient Flow
- 2. HCAHPS/Patient Experience
- 3. Sepsis
- 4. Hand Off
- 1) Star Rating
 - a. There are seven categories within the Star Rating and they are as follows: mortality, readmission, safety of care, efficient use of medical imaging, timeliness of care, patient experience (see next bullet) and effectiveness of care. Each of these seven categories contain several data metrics. Data within the following categories continues to trend in right direction: mortality. Opportunities for improvement exist within the efficient use of medical imaging category. OP-10 Abdomen CT with and without Contrast Project Team is working on improvements of process at this time, will continue to monitor. Current month's data within the readmission category has increased, an in-depth analysis of the data is being conducted to ensure this will not become a trend in the wrong direction. An opportunity for improvement exists within the safety of care category, specifically for the CDI (Clostridioides difficile infection) measure.
 - b. Within the Timeliness of Care category, Ed-2b: ED Median Admit Decision Time to ED Departure Time has seen an increase in the data this month. The project team is aware and is working on implementing improvements. Within the Effectiveness of Care category, we are seeing fluctuations with the data for Core Sep1 Early Management Bundle, Severe Sepsis/Septic Shock. Scorecards are sent out to physicians and nurses with specific opportunities for improvement and the sepsis project team met this month with a new goal related to improving compliance with ordering blood cultures. Core OP-23 Head CT/MRI Results for Stroke Pts within 45 minutes of Arrival data has decreased over the past few months. A team has evaluated this data and is working with ED physicians, Radiologists, ED Department and Medical Imaging Department to review current process, identify any barriers, and work on improvements.
 - c. **Patient Experience-HCAHPS:** The "Overall Inpatient HCAHPS Dashboard" is the survey data that affects our Star Rating and Value Based Purchasing reimbursement program. This survey includes OB, ICU, and Med-Surg.
 - i. Data for Overall Quality of Care by Department
 - 1. ED
 - a. Goal 42.2%
 - b. Q2 2020* 42%
 - 2. ICU
 - a. Goal 59%

- b. Q2 2020*-66.7%
- 3. Med/Surg
 - a. Goal 60.6%
 - b. Q2 2020* 59.5%
- 4. OB
 - a. Goal 71.9%
 - b. Q2 2020*-65.4%
- 5. Surgery:
 - a. Goal 73.1%
 - b. Q2 2020* 72.1%
- ii. *data not yet complete
- 2) Risk/Safety
 - a. Occurrence reporting is about average. The trending for medication errors have raised the question if we are reporting information that means anything. It is being discussed. The other occurrences reported did not rend into any known issues. No Falls were reported in Midas. There were three occurrence related issues. All issues were corrected within an appropriate time.
 - b. Safety An interdisciplinary team is working to create a new safety committee. Discussions are taking place as to what the safety committee will address in terms of data and subcommittees reporting into the safety committee, and a patient safety plan is also being written for our organization. The patient safety plan will come to Quality Committee of the Board for approval.
- 3) PI Standards
 - a. Our PI Standards within the dashboard include data metrics defined by Centers for Medicare and Medicaid Services (CMS) and The Joint Commission (TJC), as well as priorities identified by MHSC on the Performance Improvement and Patient Safety (PIPS) plan.
- 4) Accreditation
 - a. We are currently in our Joint Commission triennial survey window. Joint Commission has resumed surveys with some changes to the survey process due to COVID 19. Our CSR Committee has had several meetings and reviewed four Joint Commission Chapters. There are a few standards that need work to come into compliance and this work is underway. We will review a chapter during each meeting and beginning in September, we will hold weekly meetings. Tracers, rounds, and COVID 19 specific rounds are completed each week. "Joint Points" are shared with the hospital and clinics three times per week. These include tips and reminders about Joint Commission Standards and will be reviewed with staff on rounds.

Summary:

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HUMAN RESOURCES COMMITTEE CHAIR REPORT TO THE BOARD AUGUST 2020

Ed Tardoni

The Human Resources Committee met in a Zoom format this month.

HR DATA FOR THE MONTH

The usual HR reports are included in the Board packet. Your attention is directed to a new entry in the report. HR staff noted that 15% of hiring consists of individuals that previously worked at MHSC. In most cases it involves individuals who leave the area for other states or countries. Then, for many reasons, years later they return to Sweetwater County and seek employment at MHSC. This is considered to be of benefit to MHSC as they return as experienced employees with perspectives from outside the area.

POLICY ACTIVITY

The HR Committee continued activity on the following policies:

CULTURAL DIVERSITY POLICY

A comment concerning one word was received from a Board Member. The committee, after consulting a dictionary, selected a replacement word. This policy is very short and the committee has decided to move it to the action section of the Board agenda rather than leaving it under New Business. The policy is ready for a vote by the Board.

COMMUNICATIONS SYSTEMS POLICY

It should be noted that the wrong copy of this policy was in the August Board Packet. That copy attracted a substantial amount of comments from a Board Member. The committee considered the comments and other issues related to communications systems. A committee approved copy has been included in the September Board Packet under New Business. The committee recommends placement under New Business because of the nature and amount of changes that were made to the document.

Social Media Policy

This is a new policy. The first draft was presented to the committee. Committee members will submit their comments to Suzan Campbell who will compile same for consideration at the next committee meeting.

ADDITONAL POLICY DISCUSSIONS

The HR Committee wishes to continue the hold on the following until finalization of the Medical Staff Bylaws. To summarize the following items are linked and language dependent on each other:

- Termination and Appeals
- Introductory Period
- Corrective Action
- Medical Staff Bylaws
- Board Appeals Procedure

DISCUSSION TOPICS

The committee continued the practice of discussing two topics at each meeting. For July the topics were as follows:

Supplementing Hospital Salaries

The committee came to the conclusion that what an employee does when off the job is their choice; as long as it does not interfere with performance while on duty at MHSC. If such activity is carried out while on duty, then that constitutes a performance issue. Such performance issues are already covered by existing policies.

Political Activities

Discussion entailed about what type of activities may fall under this heading. Three central existing standards govern this. Policies exist that state an employee must take care not to represent that they are speaking, or writing, for MHSC; unless they have been formally and specifically delegated to do so. Another consideration is found in the provisions of the dress code that would impact apparel of a political nature. Cautions in other policies make it clear to employees that attempts to achieve resolution of any conflict or issue should be handled under the policies and procedures of MHSC rather than by venting on social media.

NEXT MEETING

The HR Committee meets the third Monday of the month. The next meeting will be September 21, 2020 at 3:00 P.M most likely by Zoom

0Human Resources Committee Meeting Monday, August 17, 2020 3:00 PM – Zoom meeting AGENDA

Old Business

- I. Approval of minutes
- II. Turnover Report Amber
- III. Open Positions Amy
- IV. Employee policies with updated language Suzan
 - a. Social Media
 - b. Cultural Diversity
 - c. Communication Systems
- V. Employee policy review/discussion Suzan
 - a. Supplementing hospital salaries
 - b. Political Activities

New Business

- VI. Voluntary Employee Benefits Review/Comparison Allstate presented by National Enrollment Services Amber and Irene
- VII. Committee member reports, other discussion(s) as needed
- VIII. Determination of Next Meeting Date (Auto-Scheduled for 09/21/20)

MEMORIAL HOSPITAL OF SWEETWATER COUNTY Human Resources Committee Meeting- <u>Minutes Draft</u> Monday, August 17, 2020 Zoom

Trustee Members Attending by Zoom: Barbara Sowada & Ed Tardoni Members Present by Zoom: Amber Fisk, Irene Richardson, Suzan Campbell Guests by Zoom: Amy Lucy, Ruthann Wolfe, Kristy Nielson, Kari Quickenden, Tami Love.

Ed Tardoni called the meeting to order at 3:02 pm by asking for a motion to approve the agenda. Irene motioned to approve, a second was made by Barbara; agenda was passed.

I. <u>MINUTES APPROVED:</u>

The minutes for the July 20, 2020 meeting were passed after a change should be made to the first sentence on page two – Change "Marty motioned" to "Ed motioned". Minutes approved with change to first sentence on page 2.

OLD BUSINESS:

II. <u>Turnover Report - Amber</u>:

Amber went over the turnover report which showed that the overall turnover had decreased to 18% from the usual 20%. Amber also discussed that the re-hire rate is high at 16%.

III. Open Positions - Amy:

This agenda item was passed over erroneously and never discussed.

IV. <u>Other Employee policies requiring new language - Suzan:</u> a. Social Media Policy

Suzan discussed making changes to this policy by adding to the current one. The changes stemmed from a conversation between Suzan and Amber from an HR perspective, specifically to help navigate employee corrective action and counseling. Suzan wanted to capture the broader scope of social media. Irene asked if this policy addresses employee performance in regards to utilizing phone or other personal devices during work hours to post and/or view social media sites. Suzan and Amber explained that both this policy and other employee policies address the use of phones on work time. Barbara brought up the use and attachment to personal phones by many people in this day and age. Suzan will make changes and resend for further comment. No changes at this time.

a) Cultural Diversity

Previous Board/Committee member, Marty Kelsey had suggested a change to the language within the first paragraph. Instead of it reading "irrespective of" the change would be to have it read to say "regardless of". Barbara motioned for the change to be made, Amber seconded. Motion passed. Suzan will make the change and send to Cindy for inclusion in the board packet with a due pass recommendation. Ed noted that Suzan will send the policies out when finished and ask that any revisions, comments and suggestions are returned to Suzan prior to the next meeting on September 14th, 2020.

a) Communication Systems

Ed discussed the process to go through suggested changes one by one for approvals.

Purpose:

May or shall regarding corrective action. Amber suggested the language should read "may" instead of "shall". Motioned, seconded. Passed to make change.

Section III:

Delete entirely. Motioned, seconded and passed to make deletion. This policy as modified by the committee will be sent to the board with a due pass recommendation.

Amber added two policies to the agenda to invoke discussion if needed.

a) Supplementing hospital salaries:

Ed asked if issues were ever brought to the attention of senior leadership and/or Human Resources regarding this. Members and guests discussed that a policy is not necessarily needed as a policy exists about additional positions or second jobs outside of the hospital if they interfere with their primary hospital jobs.

a) Political Activities:

Ed asked Amber to speak a little bit about this. Amber mentioned that there are mentions of political activities in other employee policies. Amber talked about an incident at the hospital where a department that made t0-shirts with sensitive "slogans" written on them stemming from a racially charged incident that happened in the nation. Amber explained that an employee was offended by the t-shirts, and that she asked the employee to remove the shirts and all was fine at that point. Suzan said that she would draft something in policy and bring back to the committee at a future date.

NEW BUSINESS:

I. Voluntary benefit proposals with Allstate:

a. This will be reviewed by members to invoke thought and further discussion at a future committee meeting. Irene talked about the vendor bringing a proposal to help employees with a tax credit during the pandemic. Discussions halted pending member review of the proposals and inclusion of tax credit information sent by Amber.

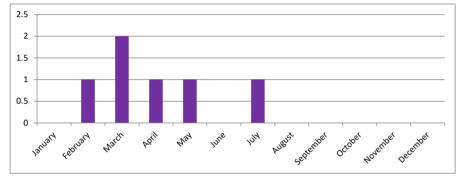
II <u>Next Meeting</u>

Next meeting will be held on 9/14/2020 at 3:00 p.m.

-Meeting adjourned.

2020 Separations - Clinic

	Separations	New Employees	Total Employees
January	0	0	110
February	1	1	110
March	2	2	110
April	1	0	109
Мау	1	0	108
June	0	0	108
July	1	1	108
August			
September			
October			
November			
December			
Total			



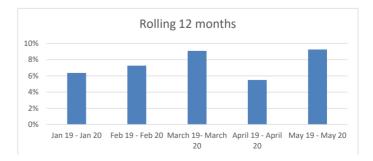
	<u>Separations</u>
Involuntary	4
Voluntary	2
Total	6

	<u>Classifications</u>
RN	1
Classified	5
Total	5

	Overall Turnover	
2014	20	26%
2015	11	18%
2016	16	14%
2017	26	23%
2018	13	12%
2019	6	5%

110



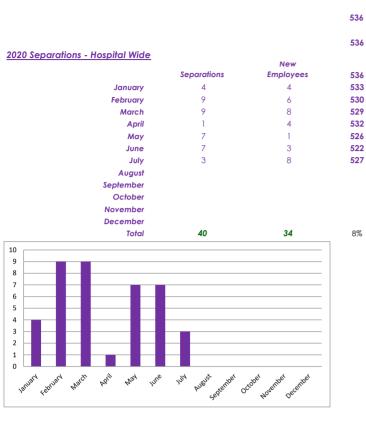


Rolling 12 Months		
Jan 19 - Jan 20	7	6%
Feb 19 - Feb 20	8	7%
March 19- March 20	10	9%
April 19 - April 20	6	6%
May 19 - May 20	10	9%
June 19 - June 20	9	8%
July 19 - July 20	10	9%

MEMORIAL HOSPITAL OF SWEETWATER COUNTY - CLINIC DATA 2020 Clinic Turnover Data (as of 07/31/2020)



Total Employees





RN

Classified







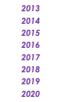






4

36



2009

2010 2011

2012



Rolling 12	Separations	%
Jan 19 - Jan 20	109	20%
Feb 19 - Feb 20	107	20%
March 19 - March 20	107	20%
April 19 - April 20	103	19%
May 19 - May 20	105	20%
June 19 - June 20	105	20%
July 19 - July 20	94	18%
Rehire Rate	Rehires	%
July 19 - July 20	14	15%

Overall Turnover
96
98
79
104
113
88
97
86
116
96
93

13

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MEMORIAL HOSPITAL OF SWEETWATER COUNTY 2020 Overall Turnover Data (As of 07/31/2020)

Г

Top Position(s) / Turnover Clinic Collections Clerk/Recp. EVS TECH Registered Nurse	2020 5 4 4	% 4% 16% 3%	Clinic Collections Clerk/Recp. EVS TECH Registered Nurse
Top Department(s) / Turnover Clinic EVS Nutrition Services	2020 6 5 4	% 15% 13% 10%	Nutrition Services % % % % % % % % % % % % % % % % % % %
Top Reasons / Turnover Other Employment Discharged Moving Out of Area/Relocation Resigned Retired	2020 4 15 4 9 2	% 10% 38% 10% 23% 5%	20 0 Other. Discharged North Resigned Resided
Length of Service Less than 90 days 91 - 365 days 1-2 Yrs. 3-5 Yrs. 6-10 Yrs. 11-20 Yrs.	2020 7 12 7 7 3	<mark>%</mark> 18% 30% 18% 18%	15 10 5 0 10 5 0 10 5 0 10 5 0 10 5 0 10 5 0 10 5 0 10 5 0 10 5 0 10 5 0 10 5 0 10 5 0 10 5 0 10 5 0 10 10 5 0 10 10 10 10 10 10 10 10 10 10 10 10 1
21-41Yrs. Total Corrective Action Counseling Verbal Warning Written Warning Final Written Warning Administrative Leave	4 40 23%	10% % Discharged 100%	25% 20% 15% 5% 0% 5% 0%

EMPLOYEE POLICY--SOCIAL MEDIA AND BEHAVIOR POLICY

PURPOSE

The purpose of this policy is to establish clear expectations for the use of online networking or "social media" and staff behavior at Memorial Hospital of Sweetwater County (Hospital) in the social media environment. All of the people served and employed by Hospital deserve to be treated with dignity and respect. This Policy is meant to ensure that these values will be upheld through Employees' professional and personal use of social media.

This policy establishes fundamental rules of appropriate business decorum that apply to all social media use at Hospital, by its Employees whether this is done as part of work or for personal reasons. However, when an Employee uses social media as part of his/her work for Hospital, more stringent rules apply (see Policy). Ultimately, each Employee is solely responsible for what he/she posts online and will be subject to corrective action for violations of this or related Employee Policies.

DEFINITIONS

"Material" means any words, comments, photographs, video, audio or other content, images or sound that is posted, published or transferred to any Social Media.

"Social Media" means the use of web-based or other electronic technology for the purpose of interacting and communication with people, companies and communities through the use of an electronic identity. Examples of social media include but are not limited to: Social network sites such as Facebook, Linkedin Video, photo and audio sharing sites such as YouTube, TikTok Blogs and blogging tools Micro blogging tools such as Twitter Collaborative forums (open or closed) Interactive encyclopedias Comment-enables online tools Personal web mail accounts such as Yahoo or gmail Any other web sites or electronic media that allow individual users or companies to publish or post material

"Staff" or "Employee" means any person who works for or represents MHSC. This includes, but is not limited to employees, medical staff, residents, students, volunteers, contractors, consultants and board members.

POLICY

In general, Hospital does not prohibit the use of Social Media at work and as part of work. In fact, there may be times when some Employees will be encouraged to use Social Media as part of their jobs. But, in order to protect the privacy of Employees, patients and visitors; to preserve the reputation of MHSC and to promote a respectful and productive work environment there are important rules that must be followed when using Social Media.

A. Social Media in General

- **Protect Patient Privacy.** All uses and disclosures of protected heath information (PHI) shall be carried out in a manner compliant with applicable patient privacy laws, polices, regulations, and standards. In accordance with federal and state laws regarding patient privacy, Employees are prohibited from posting any content that is considered PHI, including patient names, images, and diagnoses, without a written authorization for the use and disclosure of the information from the patient/patients legal representative. Note that information about a patient may be individually identifiable, even if the Employee does not refer to the patient by name.
- Keep Confidential Information Confidential. Employees must not post or disclose any confidential or protected information obtained from the records of the Hospital that is not necessary for the Employee to perform his/her duties. Employees must not post internal reports, policies, complaints, grievances, or other internal business-related confidential communications.
- **Respect Employers' Property Rights.** Employees must maintain the confidentiality and integrity of the Hospital's reputations and legal rights. To that end, Employees must not use any logos, signage or trademarks of MHSC that infringe on the intellectual property interests of MHSC, unless Hospital has specifically authorized that use.
- Be Safe and Respectful. Hospital encourages Employees to be fair and courteous with their online posts and comments. Employees may be more likely to resolve work-related concerns by speaking directly with their leaders and/or co-workers, rather than posting complaints to a social media outlet. Nevertheless, Employees who decide to post complaints, criticism, or negative commentary about Hospital or its services via social media must avoid using statements, photographs, video or audio that reasonably could be viewed as unlawful, obscene, profane, malicious, abusive, coercive, threatening, offensive, intimidating, bullying, harassing, sexist, racist or discriminatory. Some examples of such conduct might include false and malicious posts meant to intentionally harm someone's' reputation or offensive posts that could contribute to a hospital work environment on the basis of race, sex, disability, religion or any other status protected by law or Hospital policies.

Employees must also avoid posting content that could compromise the safety and security of Hospital premises or systems or those who have access to them.

- **Be Honest and Accurate**. Never post information or rumors that are known or should be known to be false about MHSC, its employees, contractors, patients or persons working on behalf of Hospital.
- **Do Not Represent Yourself as Hospital's Spokesperson**. Employees must not claim or imply, in any way, that they speak for MHSC unless they have been expressly authorized by the CEO to do so. Employees shall not speak to the media on the Hospital's behalf without first contacting the Hospitals Public Relations Department.

The forgoing rules apply regardless of when or where the Employee is using social media, and regardless of whether the internet connection, computer or other device (such as a smart phone) that the Employee is using is provided by the Hospital or is the Employees.

B. Using Social Media for Personal Purposes

Hospital recognizes that many of its Employees will choose to use social media for personal reasons.

If using Social Media while at work, on work time or using a device or system that belongs to MHSC, employees must:

- Limit their use to occasional and incidental personal use
- Make sure that their use does not interfere with the Hospitals business and patient activities and responsibilities or the Employees job performance or productivity
- Not perform outside employment, operate or promote the Employees own business or purpose or promote similar persona commercial ventures. Not engage in gaming. Not post or respond to personal ads.
- Make sure that the Employee's use does not violate the Hospital's Code of Conduct, this policy or any other Hospital policy.
- The computers, email system, internet connection and other technological devices and systems are the property of the Hospital and intended for work purposes. Accordingly, if Employees use social media while using Hospital internet or while using a device or system that belongs to MHSC, Employees must comply with the Hospitals policies regarding Communication Systems, Computer Use or other applicable hospital policies.
- Employees who implicitly or explicitly refer to MHSC in their Social Media posts must disclose that they are employed by MHSC and should also include a disclaimer that their comments and opinions are their own and not those of MHSC or its employees.

MHSC reserves the right to monitor and review Employee's use of Social Media on any Hospital owned or issued device or system. MHSC reserves the right to access publically available internet content as permitted by law. In the event MHSC identifies any Material posted by an Employee or by an Employee at the request of another person that it deems inappropriate under this Policy, Hospital may demand the removal of such content.

Failure to comply with this Policy may result in Corrective Action, up to and including termination. Failure to comply may also result in the removal of internet or email privileges at work.



Approved: Review Due: Document Area: Reg. Standards:

N/A N/A Employee Policies

EMPLOYEE POLICIES- COMMUNICATION SYSTEMS

PURPOSE

To inform MHSC employees and Other Users (students, contractors, contract employees and non-employed providers) of MHSC communication systems of the expectations and responsibilities of using Hospital communication systems. MHSC employees and **Other Users** should have no expectation of a right to privacy on MHSC computers, phones, voice mail or other MHSC communication systems. **Employee violation of this Policy may or shall ? result in corrective action.**

POLICY

- I. The Hospital's network, access to Internet, e-mail and voice mail systems are business tools intended for employees and Other Users to use in performing their job duties. All information regarding access to the Hospital's computer resources, such as user identifications, access codes, and passwords are confidential Hospital information and may not be disclosed to non-MHSC personnel. Computer equipment should not be removed from the Hospital premises without written approval from IT and/or employee's supervisor. Upon separation of employment, all Hospital issued computers or cell phones shall be returned to the Hospital's IT or HR department.
- II. The electronic communication systems such as computers, phone system, etc. are the property of MHSC and are intended for Hospital business use. All computer files, documents, and software created or stored on MHSC's computer systems are subject to review and inspection at any time as all electronic documents and files are the property of MHSC. This includes web-based email employees and Other Users may access through MHSC systems, whether password protected or not. Employees and Other Users should not assume that any such information is confidential, including e-mail either sent or received. Employees and Other Users should not have an expectation of privacy as MHSC owns all the information sent or received within the Hospital's network and has the right to search the information without employee knowledge or consent.
- III. <u>(Users of MHSC's internal email system should never assume emails sent or received through the Hospital system network are in any way private and /or confidential).</u> Delete this sentence I think it is stated above

IV. Unauthorized Use

Employees may not attempt to gain access to another employee's personal file of e-mail messages or send a message under someone else's name without the latter's express permission. Employees are

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strictly prohibited from using the Hospital's communication systems in ways that management deems to be inappropriate. If an employee has questions as to whether their behavior would constitute unauthorized use, contact your immediate supervisor before engaging in such conduct.

V. Telephones/Cell Phones/Mobile Devices

Employee work hours are valuable and are to be used for Hospital business. Excessive personal phone calls can significantly disrupt hospital operations. Employees should use their break or lunch period for personal phone calls.

VI. Confidential information should not be discussed on a cell phone or via any mobile device. Phones and mobile devices with cameras should not be used in a way that violates other MHSC guidelines such as, but not limited to, Non-Discrimination and Anti-Harassment, Confidentiality and HIPAA Policies. Employees' or other Users access to the Hospital systems through a cell phone or mobile device is restricted/prohibited without prior authorization. (Such access, once authorized, may subject the employee's personal device to discovery requests or MHSC corrective action.) Marty suggested a rewrite of this sentence but I think this sentence should be deleted. Employees authorized to access MHSC systems and information using a cell phone or personal device must immediately inform the Hospital if the device is lost or stolen.

Employees are prohibited from using a cell phone while operating a motor vehicle unless the phone is operated through a hands free system. Texting is permitted only when the vehicle is at rest and lawfully parked.

VII. New employees are required to read and sign the Computer Account User Access Agreement.

Link to Form #802563 Computer Account User Access Agreement https://sweetwatermemorial.policystat.com/policy/4985147/latest/

Approved: computer usage policy 6.6.18 revised presented to Bd of Trustees 8.5.20

Attachments

No Attachments

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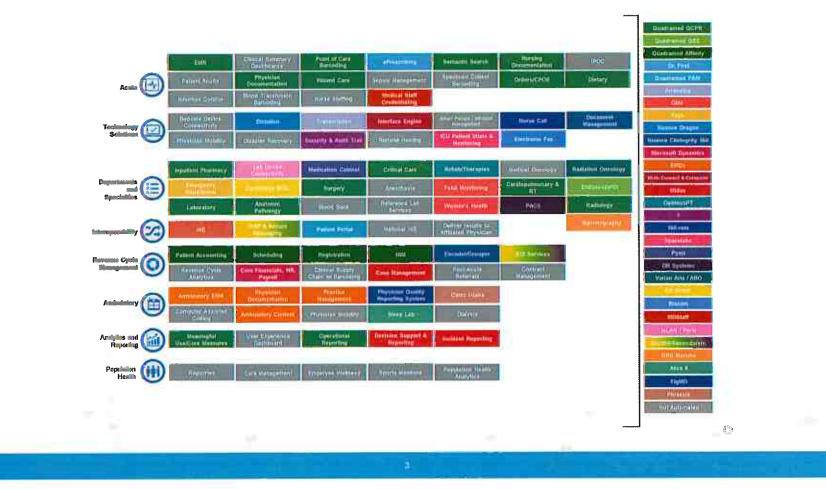
MHSC ELECTRONIC MEDICAL RECORD (EMR) SEARCH 2019-2020

EMR Steering Committee Purpose

The primary goal is for the organization to select and implement an EMR solution that will allow each patient across MHSC to have one integrated health record.

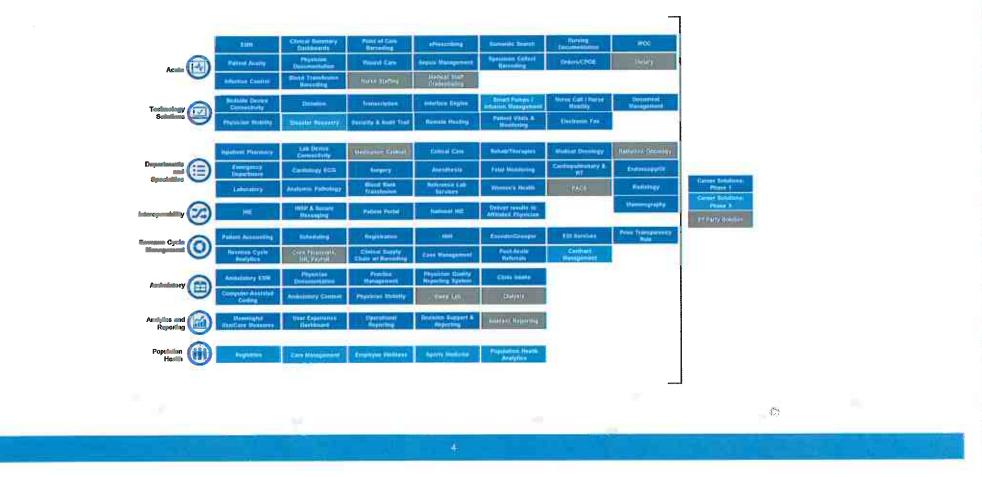
The team consists of an interdisciplinary group of physicians, patient care, informatics, IT and finance members.

Current state



.

Future state



What an integrated EMR can do for MHSC

- One Source of Truth for Clinical and Financial Data
- Consolidation (Billing/Financial Clearance/Scheduling)
- Improved Data Integrity
- Standardize Operations and Workflows
- Reduce IT Complexity -Interfaces, Systems, etc.
- Ability to reach more patients telehealth
- Integrated reporting

What an integrated EMR can do for Patient Care and Quality

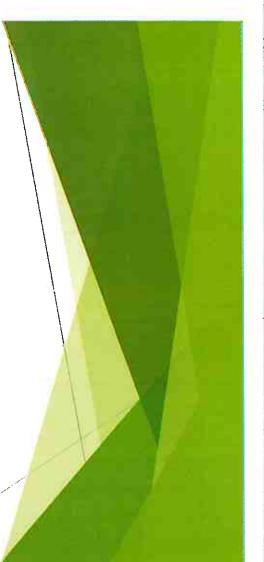
- Patient Safety
 - Integrated system all patient information in one place, not multiple systems, i.e. QCPR, T-System, eMDs, Obix, Affinity, etc.
 - Medication reconciliation in one system as patient moves through service areas
 - Surveillance tools for high risk protocols, i.e. sepsis
- Patient Friendly Portal
 - Discharge instructions
 - Video visits
- Expediate discharge planning
 - Patient satisfaction
- Documentation standardization
 - Reduce charting time
- Integrated Quality reporting

What an integrated EMR can do for Revenue Cycle

- Centralized business office for patient billing, coding & collections
 - ONE billing statement for hospital and clinic patients
- Potential growth in charge capture
 - Eliminate manual work with automated charging based on documentation
- Automate transaction services i.e. pre-authorizations, cash posting, insurance verification, point of service estimates
 - Staff efficiencies
- Unified acute case management and clinical documentation
 - Increased collections and decreased days in AR
- Integrated Financial reporting

Due Diligence & Timeline Alignment

Event	Location	Target Date
Introduction to CommunityWorks	Rock Springs, WY	September 25, 2019
Scope Metrics & Current Environment Validation	Rock Springs, WY	October 4, 2019
Corporate Visit - CommunityWorks Open House	Kansas City, MO	October 24, 2019
Facility Walkthrough & Department Interviews	Rock Springs, WY	November 12, 2019
Initial Proposal Review	Rock Springs, WY	November 12, 2019
System Demonstrations	Rock Springs, WY	Decemberr 10-11, 2019
Scope & Pricing Review	Rock Springs, WY	January 13, 2020
Scope & Pricing Review 2	Rock Springs, WY	February 1, 2020
Scope & Pricing Review 3	Rock Springs, WY	February 12, 2020
Reference Calls Completed by Department (Oncology, Pharmacy, Supply Chain, Patient Access, Rehab, Lab, Patient Portal, Quality, Respiratory, HIM, etc.)	Web	March-April 2020
System Demonstrations #2	Web	March 31-April 1, 2020
Scope & Pricing Review 4	Web	April 8, 2020
Budget Consideration for Board	Web	June 3, 2020
Supplier of Choice Announcement	Rock Springs, WY	June 5, 2020
Device Connectivity Validation	Rock Springs, WY	June-July, 2020
ECG Demonstration & Validation with GE	Web	July 1, 2020
Initial Schedule Review	Web	July 15, 2020
Scope of Use Validation & Proposal Updates	Rock Springs, WY	July 21, 2020
Master Agreement - Red Line Review with MHSC Legal	Rock Springs, WY	August 13, 2020
Final Schedule Review	Rock Springs, WY	August 18, 2020
Finance Committee Approval	Rock Springs, WY	August 27, 2020
Final Board Approval	Rock Springs, WY	September 2, 2020
Contract Execution	Rock Springs, WY	September 11, 202
Virtual Project Preparation & Staffing Prep	Web	October - November, 2020
Project Management Bootcamp	Web	Dec-20
Project Kickoff	Rock Springs, WY	January 15, 202
Go-Live	Rock Springs, WY	October 15, 202



After almost a year of demonstrations, both on site, off site and virtually, multiple reference calls, and extensive hours of information exchange......

On June 4th, our EMR Steering Committee met and made the final decision

CERNER CommunityWorks

Why CommunityWorks-?

Benefits and value to Memorial Hospital of Sweetwater County



Remain autonomous

 Continue operating independently in Sweetwater community

Implementation methodology

- Cerner associates leading each week
- Predictable, fixedfee implementation
- Leverage lessons learned from 250+ community hospital implementations

Cerner manages the heavy lifting

- Cloud hosting
- 99.9 percent guaranteed uptime
- Application management services
- High-volume quick service support phone line
- System upgrades and enhancements — 24x7x365 support

Ability to grow and scale alongside MHSC

Patient engagement

Revenue cycle

service lines

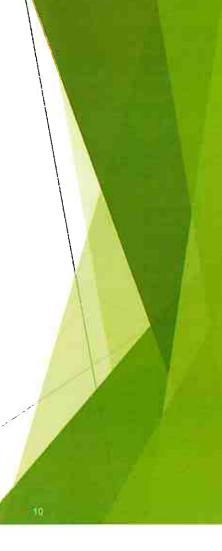
Solutions for new

services

- One patient, one chart, fewer clicks
 - Better transfer information regionally and across the U.S.

Physician

Satisfaction



Financial Impact

Financial proposals for both vendors were very similar. Both contained a capital portion and continuing annual support costs.

Current annual operating costs for multiple systems \$1.9 million

Sweetwater County Cerner's Custom Proposal

Capital Investment & Year 1 Operational Cost	
ltem	Cost
Licensed Software	\$ 794,075
Implementation Services - Build, Training, Testing, Go-Live & Optimization	2,992,209
Sublicensed Software	278,945
Hardware	219,896
Subscription Technology Setup	389,463
Cloud Hosting Services During Impletmentation	356,033
Total	\$ 5,030,622

Monthly Operational Investment After Y	'ear 1	
ltem		Cost
Application Management Services	\$	13,310
Cloud Hosting Services & Upgrades		23,620
Billing and Claims Management - Transaction Services		14,300
Technology Content & Subscriptions		61,199
Domain Management Strategy & Services		2,016
Total		114,445

				Sweet	twate	r Cou	nty				
				Con	ter's Custon	Proposal					
					Payment T						
	Copirat	Operating	Total		Capital	Operating	Total		Capital	Operating	Total
0/1/2028	76,633	27,789	104,422	5/1/2024	76,633	114,445	191,078	12/1/2027	1.00	114,445	114,445
1/1/2020	76,633	27,789	104,422	6/1/2024	76,633	114,445	191,078	1/1/2028	1.00	114,445	114,445
2/1/2020	76,633	27,789	104,422	7/1/2024	76,633	114,445	191,078	2/1/2028		114,445	114,445
1/1/2021	76,633	27,789	104,422	8/1/2024	76,633	114,445	191,078	3/1/2028		114,445	114,445
2/1/2021	76,633	27,789	104,422	9/1/2024	76,633	114,445	101,078	4/1/2020		114,445	114,445
3/1/2021	76,633	27,789	104,422	10/1/2024	76,633	114,445	191,078	5/1/2028	1	114,445	110,445
4/1/2021	76,633	27,789	104,422	11/1/2074	76,633	114,445	191,078	6/1/2029		114,445	114,445
5/1/2021	76,633	27,789	104,422	12/1/2024	76,633	114,445	191,078	7/1/2028	141	114,445	114,445
6/1/2071	76,633	27,789	104,472	1/1/2025	76,633	114,445	191,078	8/1/2029	1.4.0	114,445	114,445
7/1/2021	76,633	27,789	104,422	2/1/2025	76,633	114,445	191,078	9/1/7028	147	114,445	114,445
A/1/2021	76,633	27,789	104,422	3/1/2025	76,633	114,445	191,078	10/1/2028	145	114,445	114,445
9/1/2021	76,633	27,789	104,422	4/1/2025	76,633	114,445	191,078	11/1/2028		114,445	114,445
0/1/2021	76,633	114,445	191,078	\$/1/2025	76,633	114,445	191,078	12/1/2028	141	114,445	110,445
1/1/2021	76,633	114,445	191,078	6/1/2025	76,633	114,445	191,078	1/1/2029		114,445	114,445
2/1/2021	76,633	114,445	191,078	7/1/2025	76,633	114,445	191,078	2/1/2029	141	114,445	114,445
1/1/2072	76,633	114,445	191,078	8/1/2025	76,633	114,445	191,078	3/1/2029		114,445	114,445
2/1/2022	76,633	116,445	191,078	9/1/2025	76,633	114,445	191,078	A/1/2029		114,445	114,445
1/1/2022	76,633	114,445	191,070	10/1/2025	10,033	114,445	214,445	5/1/2029		114,445	114,445
4/1/2022	76,633	114,445	191,078	11/1/2025		114,445	114,445	6/1/2029		114,445	114,445
5/1/2022	76,633	114,445	151,078	12/1/2025		114,445	114,445	7/1/2029		114,445	114,445
6/1/2022	76,633	114,445	191,078	1/1/2026		114,445	114,445	#/1/2029		114,445	114,445
7/1/2022	76,633	114,445	191,078	2/1/2026	-	114,445	114,445	9/1/2029		114,445	114,445
		114,445	191,078	3/1/2026		114,445	114,445	10/1/2029		114,445	114,445
8/1/2022	76,633	Concerns of the state of the st	the second second second second	4/1/2026		114,445	114,445	11/1/2029		114,445	114,445
9/1/2022	76,633	114,445	191.078	5/1/2026	:*	114,445	114,445	12/1/2029	- E	114,445	114,445
0/1/2022	76,633	the second s	191,078	6/1/2026	-		114,445	1/1/2030		114,445	114,445
11/1/2022	76,633	114,445	151,078			114,445	114,445	the second se		Contraction of the second s	114,445
2/1/2022	76,633	314,445		7/1/2026		114,445	114,445	2/1/2030		114,445	114,445
1/1/2023	76,633	114,445	191,078	8/1/2026	1	114,445		3/1/2010	-	114,445	
2/1/2023	76,633	114,445	191,078	9/1/2026		114,445	114,445	4/1/2010	(63	114,445	314,445
3/1/2023	76,633	114,445	191,078	10/1/2025		114,445	114,445	3/1/2630	1.6	114,445	114,445
4/1/2021	76,633	114,445	191.078	11/1/2026		114,445	114,445	6/1/2030		114,445	114,445
5/1/2021	76,693	114,445	191,078	12/1/2026	-	114,445	114,445	7/1/2030	4	114,445	114,445
6/1/2073	76,633	114,445	191,078	1/1/2027		114,445	114,445	8/1/2010		114,445	114,445
7/1/2023	76,633	114,445	191,078	2/1/2027		114,445	114,445	9/1/2030	1.00	154,445	114,445
8/1/2021	76,633	114,445	191,078	3/1/2027		114,445	114,445				_
9/1/2023	76,633	114,445	191,078	4/1/2027	- 14 - I	114,445	114,445				
10/1/2023	76,633	114,445	191.078	5/1/2027		114,445	114,445				-
1/1/2033	76,633	114,445	191,078	6/1/2027		114,445	114,445				
2/1/2023	76,633.	114,445	191,078	7/1/2027		114,445	114,445				
1/1/2024	76,633	114,445	191,078	8/1/2027	1 10	114,445	114,445				
2/1/2024	76,633	114,445	191,078	9/1/2027		114,445	114,445				
1/1/2024	76,633	134,445	191,078	10/1/2027	1.1	114,445	114,445				
4/1/2024	76,633	114,445	191,078	11/1/2027		114,445	114,445				

Financial Impact - project expected to kick off November/December 2020

FY2021 Cash impact - budgeted

- Operational expenses = \$207,683 Cloud hosting starts at implementation
- Capital = \$623,278 plus Travel costs = \$270,000 (can be capitalized with project)
- FY2022 Cash impact
 - Operational expenses = \$1,026,000
 - Capital = \$919,000 plus Travel costs = \$270,000 (can be capitalized with project)
- FY2023 FY2026 Cash impact
 - Operational expenses = \$1.3 million per year
 - Capital = \$3.7 million (\$919,000 per year)
- FY2027 FY2030 Cash impact
 - Operational expenses = \$1.3 million per year
 - Savings of \$550,000 per year

Other expected financial impacts to coincide with GO LIVE!

FY2022 Capital

- Upgrade of hardware needs estimated at \$50,000 (printers, scanners, etc.)
- Cardiac Monitoring System up to \$1.3 million
- Compatible Stress & Holter Machines \$114,000
- Dialysis EMR \$30,000
- Operations
 - Archival solution for legacy systems \$90,000 annually for first 5 years

Timeline

June – notify vendors of choice June/July – prepare financial analysis July/August – prepare Board proposal for capital request August/September – present capital request to Finance & Audit Committee and Board of Trustees October – contract preparation, legal review, finalize implementation plan November/December – Implementation begins

October/November 2021 – GO LIVE!

*Please note any changes due to COVID-19 or other unforeseen circumstances could require an adjustment to this timeline.



		# Assigned: FY 21 - 15
	Conital Degrant	# Assigned: F1 21 - 75
Instructions, VOILMIET HE THE TAT	Capital Request KEY to navigate around this form to maint	ain the form's intervity
Note: When appropriate, attach additional	information such as justification, underlying penditure. Print out form and attach quotes ar	assumptions, multi-year projections and
Department: Administration	Submitted by: Tami Love	Date: 08/26/2020
Provide a detailed description of the cap		
	•	is a capital loase and will be
capitalized after implementation,	onic medical record system. This November 2021.	
Preferred Vendor:		
Total estimated cost of project (Check al	l required components and list related expen	se)
1. Renovation		<u>\$</u>
2. Equipment		<u>\$</u>
3. Installation		<u>\$</u> 4,597,980.00
4. Shipping		<u>\$</u>
5. Accessories		<u> </u>
6. Training		<u>\$</u>
7. Travel costs		<u>\$</u>
8. Other e.g. interfaces		<u>▼</u> 540,000.00
0. Other 6.g. Interfaces	Total Costs (add 1-8)	\$ \$5,137,980.00
Dans the upgranted items	Total Costs (aut 1-6)	<u>a</u> 40,101,000.00
Does the requested item: Require annual contract renewal? Set YES		
Fit into existing space?		
YES INO	Explain:	
Attach to a new service?	Explain:	
Require physical plan modifications?	Electrical	<u>\$</u>
If yes, list to the right:	HVAC	<u>\$</u>
🗆 YES 🔳 NO	Safety	<u>\$</u>
- and - A	Plumbing	<u>\$</u>
	Infrastructure (I/S cabling, software, etc.)	<u>\$</u>
Annualized impact on operations (if app		*
Increases	Budgeted Item:	
Projected Annual Procedures (NEW not ex		
Revenue per procedure	\$	# of hide obtained 2
Projected gross revenue	<u>\$</u>	# of bids obtained? 2
Projected net revenue	<u>\$</u>	Copies and/or Summary attached.
Projected Additional FTE's		If no other bids obtained, reason:
Salaries	<u>\$</u>	4 1
Benefits	<u>\$</u>	4
Maintenance	\$	4 1
Supplies	\$	4
		4
Tedal Assess Deserves	¢	4 1
Total Annual Expenses	<u>\$</u> \$	4
Net Income/(loss) from new service	Review and Approvals	L
Submitted by:	Verified enough Capital to purchase	7 8
Executive Leader	■ YES □ NO	Watter million
Executive Leader		Kowaludend 81271202
Chief Financial Officer		
		Cydre 8-26-2020
Chief Executive Officer		8-26-2020
Board of Trustees Representative	🗆 YES 🗖 NO	

OTHER CONSIDERATIONS

The primary goal of the EMR Steering Committee is to select and implement an EMR solution that will allow each patient across MHSC to have one integrated health record. The team consists of an interdisciplinary group of physicians, patient care, informatics, IT and finance members. Benefits of an integrated EMR include: One Source of Truth for Clinical and Financial Data Consolidation (Billing/Financial Clearance/Scheduling) Improved Data Integrity Standardize Operations and Workflows Reduce IT Complexity -Interfaces, Systems, etc. Ability to reach more patients - telehealth and patient portal Integrated reporting After almost a year of demonstrations, both on site, off site and virtually, multiple reference calls, and extensive hours of information exchange the Committee made the choice of Cerner CommunityWorks. Financial Impact - project expected to kick off November/December 2020 with expected Go Live of November 2021. FY2021 Cash impact - budgeted Operational expenses = \$207,683 Cloud hosting starts at implementation Capital = \$623,278 plus Travel costs = \$270,000 (can be capitalized with project) FY2022 Cash impact Operational expenses = \$1,026,000 Capital = \$919,000 plus Travel costs = \$270,000 (can be capitalized with project) FY2023 - FY2026 Cash impact Operational expenses = \$1.3 million per year Capital = \$3.7 million (\$919,000 per year) FY2027 - FY2030 Cash impact Operational expenses = \$1.3 million per year Savings of \$550,000 per year as our current annual support on multiple systems is \$1.9 million The Cerner CommunityWorks project will not be capitalized until FY2022, after Go Live expected in November 2021. Total Capital Lease - \$4,597,980 to be paid and capitalized over 5 years Travel Costs estimated at \$540,000 to be capitalized with project Cloud hosting and annual support after year 1 - \$1,373,340 26-2020

Submitted by: Signature

Date



This Cerner System Schedule is made on August 03, 2020 ("Effective Date"), between				
Memorial Hospital of Sweetwater County ("Client")	and	Cerner Corporation ("Cerner")		
with its principal place of business at:		a Delaware corporation with its principal place of business at:		
1200 College Blvd Rock Springs, WY 82901, USA Telephone: (307) 362-3711		2800 Rockcreek Parkway Kansas City, MO 64117, U.S.A. Telephone: (816) 221-1024		
This Cerner System Schedule includes the sections noted below. Cerner agrees to furnish such products and services, upon the term Agreement, dated https://www.enclinet.and.cerner Agreement, dated https://www.enclinet.and.cerner	s and cond	tions of this Cerner System Schedule and the Cerner Business		
 Facilities Scope of Use Payment Terms Term and Termination Solution Descriptions Pass-Through Provisions Assignment of Payments Solutions and Services Additional Terms and Provisions Scope of Services Equipment Delivery Event Activity Report Execution Invoice 	CE	RNER CORPORATION		
By:(signature)	Ву			
		Teresa Waller		
(type or print) Title:	Tit	e: Senior Director, Contract Management		
Purchase Order #:(if applicable)				
Project Kick-off requested the week of:				
Client will complete the following upon execution of this Gerner	System So	hedulo:		
Client Invoice Contact:				
Contact Phone #:		_		
Contact E-mail Address:		_		

Client's account can be managed online at cerner.com by registering for Cerner eBill. To gain access to eBill, contact the Cerner Client Care Contact Center at 866-221-8877 or e-mail ClientCareCenter@cerner.com.



PERMITTED FACILITIES

For use and access by these facilities:

Cerner

Name	Address	City	State/ Province	Zip/Postal Code	Country
Memorial Hospital of Sweetwater County	1200 College Blvd	Rock Springs	WY	82901	USA

The parties may add or substitute Permitted Facilities by amending this section, provided Client pays any relevant scope of use expansion fees in the section below.

SCOPE OF USE

Scope of Use Limits. Client will use the following solutions in accordance with the Solution Descriptions and subject to the scope of use limits set forth below.

Solution Description	Scope of Use Metric	Scope of Use Limit	Scope of Use Metric Description
CareAware MultiMedia	DICOM Procedure		Any exam or course of action that generates DICOM objects.
CareAware MultiMedia	Gigabyte	50	A multiple of the unit byte for digital information storage.
CommunityWorks	Operating Expense (\$M)	90	Total annual facility expenses excluding bad debt, expressed in millions.
CommunityWorks, GI Management	Endoscopy Procedure Carts	4	those installed into Surgical Operating Rooms, Endoscopy Lab Rooms, or Mobile Carts
Content360 Document Imaging, Cerner CMT (CommunityWorks), CAP SNOMED International (III) for Pathology, AORN Syntegrity Content (CommunityWorks), AORN Syntegrity Content Subscription (CommunityWorks), Cerner Direct HISP - CommunityWorks	Facilities	1	Total number of sites (physical locations) to use a specific application.
Content360 Document Imaging, CommunityWorks, PowerNote Content for Ambulatory - CommWx, Multum Patient Specific (Ambulatory) - CommWx, Cerner CMT (Ambulatory), Enhanced Medical Necessity Content for Ambulatory Care, Intelligent Medical Objects (IMO) - Ambulatory, Cerner Ambulatory, Connect to CommonWell - Ambulatory, Discern nCode for Ambulatory, Preventive Care Advisor, Scheduled Video Visits	Providers	31	A health professional legally able to write prescriptions - physicians (M.D., D.O.), physicians' assistants, or other advanced practitioners.
CV Net	ECG Procedures	600	Total number of annual orderable ECG procedures
Öncology	Oncology Providers	3	Prescribing Medical Oncology Providers practicing in the field of Medical Oncology (including physicians, fellows, nurse practitioners and physicians assistants).
Open Port Interfaces, Care Management	Full Time Equivalents (FTEs)	500	Each part-time personnel is counted as 0.5; therefore, two part-time personnel equate to one full-time personnel.
Womens Health 😑 🔗 🚽	Births	500	Total annual births excluding fetal deaths.
Womens Health	Providers	4	physicians (M.D., D.O.), physicians' assistants, or other advanced practitioners.
APCfinder Software, Codefinder Software, Coding Reference Software, Connections Software Basic, HCPCS/CPTfinder Software, DRGfinder Software, Reimbursement Calculation Software Medicare, Health Facts	Each	1	Every one considered separately.

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CERNER SYSTEM SCHEDULE NO. 1

Reporting, SSI Test System, eCare NEXT HL7 + touchless processing (Per Instance), Passport eCare NEXT - Document Imaging Interface, Passport eCare NEXT - Batch File Interface, Patient Estimates - Document Imaging Interface			
CPT for Clinical EMR, Intelligent Medical Objects (IMO) - Acute Care, CW Electronic Lab Results and Syndromic Surveillance Bundle, PowerNote Content for Acute Care – CommunityWorks, Multum Patient Specific - CommunityWorks, Hospital Quality Reporting - CommunityWorks, CPT for Integrated Ambulatory EMR, External Rx History - Acute, Immunization Reporting & Query Bundle - CommWx, CareSelect Imaging - Integ with CommWx (51-100 beds), CareSelect Benchmarking and Analytics Reporting (51- 100), Enhanced Medical Necessity Content for Acute Care, CPT for Patient Billing, Power Point of Care, Foundation Analytics: Revenue Cycle, Infection Control Regulatory Reporting Content, Sepsis Management – CommunityWorks	Beds	25	license.
Eligible Provider Quality Reporting (CommunityWorks), ExitCare - Physician/Ambulatory	Physicians	31	physician office or group.
eQualityCheck to The Joint Commission: Stroke Cert, eQualityCheck to The Joint Commission: Chart Abstracted	Accredited Health Care Org	1	Accredited Healthcare Organizations are client facilities that are distinctly licensed at a health system for an accreditation program that The Joint Commission administers
ExitCare - ED (CommunityWorks), ED Physician Documentation Content (CommunityWorks), ED Coding Subscription (CommunityWorks)	ED Visits	17,000	emergency room visit is defined as a visit to the emergency unit.
ExitCare - Inpatient (CommunityWorks), Antimicrobial Usage and Resistance Reporting, Connect to CommonWell - Acute, Interdisciplinary Plans of Care	Admissions	2,100	Total number of annual facility admissions.
Outpatient Rehabilitation	Rehab Outpatient Visits	5,000	Total MONTHLY outpatient rehabilitation service visits to include occupational, vocational, speech therapies etc.
Patient Estimates (Includes 10 Payers), Patient Facing Payment Estimator	Annual Encounters	140,000	Total number of annual interactions with a health care provider, where the patient receives any type of service.
SkyBox Mobility Workspace One Std, CareAware Connect, Cerner Carnera Capture	Devices	25	Total number of instruments, PCs, handheld devices, or other type of devices applicable to the application being licensed.
CareAware Connect Messenger	Active User	50	Total number of unique users that actively use the application under the terms of the license agreement per month
CareAware iBus for Bedside Medical Device Integration, CareAware VitalsLink	Beds		Maximum number of beds for which a hospital holds a license.
CareAware iBus for Laboratory Medical Device Integration, CommunityWorks	Devices		Total number of instruments, PCs, handheld devices, or other type of devices applicable to the application being licensed.
Cerner ePrescribe Package, Electronic Prior Authorization, PDMP Connection for Wyoming	Providers	55	A health professional legally able to write prescriptions - physicians (M.D., D.O.), physicians' assistants, or other advanced practitioners.
Cerner PDMP Support - CommWx	States	1	defined or sovereign territory within the United States of America.
Cerner Workflow Authentication, Cerner Soft Token	Users	55	Total number of individuals authorized by Client to use the Licensed Software under the Agreement, regardless of whether the user is actively using the Licensed Software at any given time. The user is registered in the System and has a unique sign-on.



Memorial Hospital of Sweetwater County 1-6URTCN7 June 17, 2020



CERNER SYSTEM SCHEDULE NO. 1

	Decelusion	- 4	Specific to a single Cerner environment onto which
Chart Search - CommunityWorks, St. John Sepsis agent - CommunityWorks	Production Environments	. 1	Cerner licensed software is loaded.
HealtheLife for CommunityWorks	Admissions + Outpatient Visits	152,100	Sum of annual admissions plus the annual outpatient visits, whereas an outpatient visit is defined as a visit by a patient who either receives ambulatory services or is lodged in the hospital less than 24 hours while receiving medical, dental, or other services.
Ignite Millennium API for Consumer - CommunityWorks	API Calls	8,750,000	An individual call to a unique service endpoint in a consecutive twelve (12) month period. In the case that a result set is broken into pages, each page is considered a unique transaction.
Mobile Patient eSignature	Devices	35	Total number of instruments, PCs, handheld devices, or other type of devices applicable to the application being licensed.
Mobility Extension for Physician	Active User	10	Total number of unique users that actively use the application under the terms of the license agreement per month
P2Sentinel Security as a Service	Gigabyte Per Day	1	Total number of gigabytes utilized per day.
Reference Lab Network for CommunityWorks, Data Acquisition - Cerner Source	Connection	1	Enabling the discovery of patients and clinical data between two disparate sources, (EMR, PHR, state networks, regional networks and other communities etc).
Automated Messaging - Min Chg	Notifications	6,250	Monthly volume of scheduled appointments in which a reminder notification is sent.
Cerner Address Verification	Address Verifications	3,000	transactions
Cerner Electronic Payment Services	Patient Payments	1,000	error free, whether reversed or not, through the transaction partner and successfully charge the payer's card
Cerner Eligibility and Benefits Verification	Eligibility Requests	13,000	Monthly volume of inquiries regarding patient insurance and benefit coverage verification.
Payment Plan Advisor with Propensity to Pay	Credit Search	1,000	Monthly count of all credit searches to determine a patient's unique likelihood of payment.
Premium Eligibility Verification Service	Each		Every one considered separately.
SSI 837 Institutional Full ClaimHospital	Claims	5,500	Monthly volume of claims for payment by a medical provider for a given medical service or item.
SSI 837 Professional Full ClaimPhysician	Claims	5,150	provider for a given medical service or item.
SSI Medicare Direct Data Entry Claims	Claims		Monthly volume of claims for payment by a medical provider for a given medical service or item.
Statements and Letters - Min Chg	Patient Statements		Monthly volume of statements distributed to patients.
Managed Services ("RHO")	Peak Concurrent Logons Hosted Solutions	175	The highest number of concurrent front-end systems logons (e.g. Citrix® servers ¹ , web servers, PowerChart Touch systems, and thick client installations, etc.) measured each day throughout each month, with the highest day being used to determine the Peak Concurrent Logons. Peak Concurrent Logons shall include all User sessions accessing production and non-production domains, Client-specific servers, as well as cloud "shared" infrastructure and servers. A User syncing a PDA, or a User accessing via a PDA or other wireless device will be counted as part of the Peak Concurrent Logons. ¹ <i>Citrix is a trademark of Citrix Systems, Inc. and/or one or more of its subsidiaries.</i>
			set forth in the "Solutions and Services" section of this Cerner System Schedule.
Application Management Services ("AMS")	Managed Solutions		Licensed Software to be managed is set forth in the CommunityWorks Application Management Services Scope, incorporated into the "Scope of Services" section of this Cerner System Schedule.
	Beds	25	Total facility beds set up and staffed.



PAYMENT TERMS

FIXED TECHNOLOGY FEE

Cerner

All of the fees set forth in this Cerner System Schedule shall collectively be referred to as the "Fixed Technology Fee" or "FTF". The FTF shall be payable as set forth in the table below. Cerner will invoice Client for such fees on a quarterly basis on the first day of each month, and payment for invoices shall be made within 45 days following Client's receipt of invoice.

	Simplified Payme	ent Term Proposa	
	Capital	Operating	Total
Execution	76,633	22,561	99,193
10/1/2020	76,633	27,789	104,422
11/1/2020	76,633	27,789	104,422
12/1/2020	76,633	27,789	104,422
1/1/2021	76,633	27,789	104,422
2/1/2021	76,633	27,789	104,422
3/1/2021	76,633	27,789	104,422
4/1/2021	76,633	27,789	104,422
5/1/2021	76,633	27,789	104,422
6/1/2021	76,633	27,789	104,422
7/1/2021	76,633	27,789	104,422
8/1/2021	76,633	27,789	104,422
9/1/2021	76,633	114,445	191,078
10/1/2021	76,633	114,445	191,078
11/1/2021	76,633	114,445	191,078
12/1/2021	76,633	114,445	191.078
1/1/2022	76,633	114,445	191,078
2/1/2022	76,633	114,445	191,078
3/1/2022	76,633	114,445	191,078
4/1/2022	76,633	114,445	191,078
5/1/2022	76,633	114,445	191,078
6/1/2022	76,633	114,445	191,078
7/1/2022	76,633	114,445	191,078
8/1/2022	76,633	114,445	191,078
9/1/2022	76,633	114,445	191,078
10/1/2022	76,633	114,445	191,078
11/1/2022	76,633	114,445	191,078
12/1/2022	76,633	114,445	191,078
1/1/2023	76,633	114,445	191,078
2/1/2023	76,633	114,445	191,078
3/1/2023	76,633	114,445	191,078
4/1/2023	76,633	114,445	191,078
5/1/2023	76,633	114,445	191,078
6/1/2023	76,633	114,445	191,078
7/1/2023	76,633	114,445	191,078
8/1/2023	76,633	114,445	191,078
9/1/2023	76,633	114,445	191,078
10/1/2023	76,633	114,445	191.078



CERNER SYSTEM SCHEDULE NO. 1

11/1/2023	76,633	114,445	191,078
12/1/2023	76,633	114,445	191,078
1/1/2024	76,633	114,445	191,078
2/1/2024	76,633	114,445	191,078
3/1/2024	76,633	114,445	191,078
	76,633	114,445	191,078
4/1/2024			191,078
5/1/2024	76,633	114,445	191,078
6/1/2024	76,633	<u>114,445</u> 114,445	
7/1/2024	76,633	· · · · · · · · · · · · · · · · · · ·	191,078
8/1/2024	76,633	114,445	191,078
9/1/2024	76,633	114,445	191,078
10/1/2024	76,633	114,445	191,078
11/1/2024	76,633	114,445	191.078
12/1/2024	76,633	114,445	191,078
1/1/2025	76,633	114,445	191,078
2/1/2025	76,633	114,445	191,078
3/1/2025	76,633	114,445	191,078
4/1/2025	76,633	114,445	191,078
5/1/2025	76,633	114,445	191,078
6/1/2025	76,633	114,445	191,078
7/1/2025	76,633	114,445	191,078
8/1/2025	76,633	114,445	191,078
9/1/2025	76,633	114,445	191,078
10/1/2025	-	114,445	114,445
11/1/2025	-	114,445	114,445
12/1/2025	· ·	114,445	114,445
1/1/2026		114,445	114,445
2/1/2026	-	114,445	114,445
3/1/2026	-	114,445	114,445
4/1/2026	-	114,445	114,445
5/1/2026	· ·	114,445	114,445
6/1/2026		114,445	114,445
7/1/2026	-	114,445	114,445
8/1/2026		114,445	114,445
9/1/2026	-	114,445	114,445
10/1/2026	s -	114,445	114,445
11/1/2026	-	114,445	114,445
12/1/2026		114,445	114,445
1/1/2027		114,445	114,445
2/1/2027	u -	114,445	114,445
3/1/2027	-	114,445	114,445
4/1/2027	-	114,445	114,445
5/1/2027	-	114,445	114,445
6/1/2027		114,445	114,445
7/1/2027		114,445	114,445
8/1/2027	-	114,445	114,445
9/1/2027	-	114,445	114,445
10/1/2027	-	114,445	114,445



11/1/2027	-	114,445	114,445
12/1/2027	-	114,445	114,445
1/1/2028	-	114,445	114,445
2/1/2028	-	114,445	114,445
3/1/2028	-	114,445	114,445
4/1/2028	-	114,445	114,445
5/1/2028	-	114,445	114,445
6/1/2028		114,445	114,445
7/1/2028	-	114,445	114,445
8/1/2028		114,445	114,445
9/1/2028	-	114,445	114,445
10/1/2028	-	114,445	114,445
11/1/2028		114,445	114,445
12/1/2028	-	114,445	114,445
1/1/2029	-	114,445	114,445
2/1/2029		114,445	114,445
3/1/2029	-	114,445	114,445
4/1/2029	-	114,445	114,445
5/1/2029	-	114,445	114,445
6/1/2029	-	114,445	114,445
7/1/2029		114,445	114,445
8/1/2029	-	114,445	114,445
9/1/2029	-	114,445	114,445
10/1/2029	-	114,445	114,445
11/1/2029	_	114,445	114.445
12/1/2029		114,445	114,445
1/1/2030	-	114,445	114,445
2/1/2030	-	114,445	114,445
3/1/2030	-	114,445	114,445
4/1/2030		114,445	114,445
5/1/2030	-	114,445	114,445
6/1/2030		114,445	114,445
7/1/2030		114,445	114,445
8/1/2030	-	114,445	114,445
9/1/2030		114,445	114,445
•			17,390,692

Transaction Services. Cerner may, at any time without prior notice, pass through any postal increases, and direct or indirect access fees and/or increase in communications tariffs related to the Transaction Services, including, without limitation, government imposed access fees, fees resulting from changes in regulation or statute, any third party imposed access fees, or any other fees assessed against Cerner in connection with the Transaction Services and outside of Cerner's reasonable control. Cerner shall provide documentation relating to these pass-through fees to Client upon request. Cerner may suspend the Transaction Services if past due invoices are not paid within twenty (20) days following notice by Cerner of such past due amounts.

<u>Monthly Overage Fees</u>. In the event Client's transaction volume in any given month exceeds the scope of use limit(s) for the transaction services as set forth in the "Scope of Use" section, the additional transaction overage fee(s) set forth in the "Solutions and Services" section will apply. Additional transaction fees may also apply as set forth therein. Any additional



fees due under this paragraph shall be invoiced in arrears, and shall be payable within 30 days following Client's receipt of an invoice for such fees.

PROFESSIONAL SERVICES

Cerner

<u>Fee for Service</u>. Professional services provided on a "time and materials" basis will be billed monthly at the rates set forth in the "Solutions and Services" section.

<u>Renewal</u>. If the managed services (RHO), Licensed Software Support, AMS, application services, monthly Maintenance, Shared Computing Services, transaction services, recurring professional services, or subscription services are renewed in month 121, Client shall pay the amounts listed in the table below, or as adjusted, on an annual basis upon the anniversary of the Effective Date of this Cerner System Schedule. The fees may increase on an annual basis for scope of use increases and pursuant to the Annual Increases section below. Cerner will invoice Client for fees on the first day of each month, and payment for such fees shall be due upon receipt of an invoice.

Renewal Terms	Monthly Fees
Application Management Services	13,310
Managed Services	23,620
Equipment and Sublicensed Software Maintenance *	5,822
Application Services/ Shared Computing Services	25,525
Subscription Services	19,265
Licensed Software Support	10,588
Transaction Services	14,300
Recurring Professional Services	2,016
Total	114,445

* Extended Maintenance is a budgetary estimate

<u>Annual Increases.</u> Cerner may revise the monthly fees for managed services (RHO), subscription services, AMS, application services, Shared Computing Services, transaction services, recurring professional services, and Licensed Software Support any time following the initial 12 month period after such fees begin (but no more frequently than once in any 12 month period) by giving Client 60 days' prior written notice. The amount of any increase in the fees shall not exceed the previous calendar year's percentage increase in CPI, plus 3% per annum. Cerner may also increase the fees at any time during the term if a Cerner third party increases the fees to be paid by Cerner, with such increase being limited to the amount of increase in Cerner's fee to the third party.

TERM AND TERMINATION

Software Support. Support services begin on the Effective Date, and continue until terminated pursuant to the Agreement.

Equipment and Sublicensed Software Maintenance. Maintenance warranties, if any, begin on the earlier of installation, or 30 days after shipment of the equipment and/or sublicensed software. Maintenance services will continue for an initial term of twelve (12) months, or such longer period as set forth in the "Solutions and Services" section of this Cerner System Schedule. Maintenance will automatically renew for additional periods of the same duration, unless either party provides the other party with written notification of its intent to terminate maintenance no less than sixty (60) days prior to the expiration of the then-current period. Cerner may terminate maintenance services if Client fails to pay invoices for maintenance. All unpaid charges for maintenance will be immediately due and payable upon such termination. Client will pay all applicable penalties or fees if maintenance services are terminated, then later reinstated.

<u>Managed Services</u>. Managed services begin on the Effective Date, and continue for the term set forth in the "Solutions and Services" section. At the end of the applicable term, each service will automatically renew for additional 12 month periods at the rate charged in the final period of the then-current term, unless either party provides the other party with written notification of its intent to terminate the relevant service no less than 60 days prior to the expiration of the applicable term.

/8/



<u>Other Services</u>. All recurring services (such as application services, subscription services, application management services, recurring professional services, transaction services, and Shared Computing Services) begin on the earlier of 12 months following the Effective Date or First Productive Use, and continue for the term set forth in the "Solutions and Services" section. At the end of the applicable term, each service will automatically renew for additional 12 month periods at the rate charged in the final period of the then-current term, unless either party provides the other party with written notification of its intent to terminate the relevant service no less than 60 days prior to the expiration of the applicable then-current term.

SOLUTION DESCRIPTIONS

Cerner

Each solution with a Solution Description has a code noted in the "Solutions and Services" section of this Cerner System Schedule, and that code can be entered at <u>https://solutiondescriptions.cerner.com</u> to view the Solution Description. These Solution Descriptions are incorporated into this Cerner System Schedule by reference. In the event a Solution Description is not published on Cerner's website, it may be attached to this Cerner System Schedule.

PASS-THROUGH PROVISIONS

Where pass-through provisions are applicable to third-party products and services, these provisions are referenced by a passthrough code in the "Solutions and Services" section of this Cerner System Schedule, and that code can be entered at <u>https://passthroughprovisions.cerner.com/</u> to view the pass-through provisions. These pass-through provisions are incorporated into this Cerner System Schedule by reference.

ASSIGNMENT OF PAYMENTS

Client agrees that Cerner may assign its interest in or otherwise grant a security interest in payments due pursuant to this Cerner System Schedule in whole or in part to an assignee. Client will promptly acknowledge each assignment or granting of a security interest. Cerner will continue to perform its obligations under the Agreement following such assignment or granting of a security interest.



Cerner EXECUTION INVOICE

Client: Memorial Hospital of Sweetwater County 1200 College Blvd Rock Springs, WY 82901

Invoice No: Invoice Date: Due Date: EXEC CSS No. 1 August 3, 2020 Effective Date

 Remit:
 Via FedEx:
 OR
 Via Wire Transfer:

 Cerner Corporation
 ABA Routing Numb

 Attn:
 Accounts Receivable, 5th Floor
 Bank:

 2800 Rockcreek Parkway
 For Further Deposit

 Kansas City, MO 64117
 For Further Deposit

Via Wire Transfer: ABA Routing Number: 101000187 Bank: US Bank For Further Deposit to Bank Account: 5290000743

TOTAL AMOUNT DUE: \$99,193

Sales tax, if applicable, will be invoiced separately.

Description	Total Solution Amount	Percent Payable	Net Amount
Execution Payment	\$99,193	100%	\$99,193
		Grand Total:	\$99,193



Capital Request Summary

Capital Request #

Name of Capital Request:

FY21-2

LUMENIS MOSES PULSED HOLMIUM LASER

Requestor/Department:

DR. CODY CHRISTENSEN & ALISHA MACKIE/SURGICAL SERVICES

Sole Source Purchase: (Yes) or No

Reason: PHYSICIAN PREFERENCE

This Quote/Bid/Proposal contains discount pricing which parties agree not to disclose other than is required by law or court order.

Quotes/Bids/ Proposals received:

	Vendor	City	Amount
1.	Lumenis Inc	San Jose, CA	200,900.00
2.			
3.			

Recommendation:

Lumenis Inc - \$200,900.00



		# Assigned: FY 21 - 2
	Capital Request	
Note: When appropriate, attach additions anything else that will help support this e	AB KEY to navigate around this form to maint i information such as justification, underlying sponditure. Print out form and attach quotes an	assumptions, multi-year projections and d supporting documentation.
Department: Surgical Services	Submitted by: Alina Mania	Date: 7/20/2020
Provide a detailed description of the ca	pital expenditure requested:	
Luments Moses Pulsed Holmiu	m Laser	
Preferred Vender: unnin	all required components and list related expen	
1. Renovation		2.
2. Equipment		199,000.00
3. Installation		S
4. Shipping		\$ 1,900.00
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		* \$
6. Training		第
7. Travel costs		年 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
8. Other c.g. interfaces	man franks for the state of the state	\$ 200,900.00
	Total Costs (add 1-8)	T environment
Does the requested item:		
Require annual contract renewai? E YE		
Fit into existing space?	Explain:	
Attach to a new service?	Explain;	
Require physical plan modifications?	Electrical	<u>*</u>
If yes, list to the right:	HVAC	<u>\$</u>
🗆 YES 🗮 NO	Safety	<u>*</u>
	Plumbing	<u>\$</u>
	Infrastructure (I/S cabling, software, etc.)	<u>\$</u>
Annualized impact on operations (if ap	oplicable): en/Decreases	Budgeted Item:
Projected Annual Procedures (NEW not	existing)	YES INO
Revenue per procedure	15	
Projected gross revenue	\$	# of bids obtained? 1
Projected net revenue	\$ 53	ECopies and/or Summary attached.
Projected Additional FTE's		If no other bids obtained, reason:
Salaries	2	sole source
Benefits .		
Maintenance		-
Supplies	\$	-
		-
		-
Total Annual Expense	es <u>\$</u>	-
Net Income/(lass) from new service	Review and Approvata	
Submitted by: Dasharmachic	Verified enough Capital to purchase	
Department Leader Allah Mul		
Executive Lender	YES D NO	Thirty Malin 8-19-20
Chief Financial Officer	S(YES I NO	Leyme 7:30-2020
Chief Executive Officer	YES INO	An Janow
Board of Trustees Representative	I YES INO	

The Lumenis laser (MOSES) is the newest and most efficient endoscopic treatment for renal and ureteral stones. It uses a combination of holmium lasers and fibers that optimize holmium energy transmission using a unique pulse modulation. Studies have shown procedures conducted with the MOSES technology result in 20% faster procedures, 25% more efficient fragmentation, and 60% reduction in stone retropulsion. This would be a very beneficial to the community where a large volume of kidney stones are treated.

Benefits of Moses and High hz lasers below.

Lumenis Moses Pulse 120H holmium laser is the urologist's all in one platform providing the best outcomes for flexible ureteroscopy, BPH and PCNL.

Benefits of Lumenis Pulse 120H laser

- · High Hz Dusting- 44% reduction in ureteroscopy procedure time vs standard holmium
- · Reduces cost case by \$1,343 (dusting vs fragmentation/basketing)
- Increases zero fragment rate by 46%
- · Reduces staged procedures by 66%
- · BPH- provides an outpatient procedure. No gland size restrictions for anticoagulated patients.
- · BPH- allows for both enucleation and vaporization of prostates

Benefits of Moses Technology on the Lumenis Pulse 120H laser

- · Moses optimizes energy transmission
- · Resulting in 2.6x more energy per pulse
- 60% less retropulsion
- · Reduces case time by 23% vs high hertz dusting
- · Reduces case time by 25% vs fragmenting
- · BPH- Moses provides superior vaporization rate (124% vs Pulse 120H in non Moses mode)
- BPH- Moses provides superior hemostasis vs Pulse 120H

Capital \$199,000 Freight \$1,900 Total \$200,900

n Muit

Submitted by: Signature

7/21/2020

Date



Quote No

202007-00926

QUOTE

· · · · · ·				
Account Name	Memorial Hospital of Sweetwater County	Created Date	7/15/2020	
Elli To	1200 College Dr	Expiration Date	9/30/2020	
	Rock Springs, Wyoming 82901	SAP ID	-0010054703	
	United States	Sales Person	Brooke Clyde	
Ship To	1200 Cállege Dr, PO Bóx 1359 Réck Springs, Wyoming 82001	Sales Person Mobile+1 4100529575		
	United States	Sales Person Ema	il <u>brocke.clyde@lumenie.com</u>	
FOB Point	ORG	National Account	Vizient Tier 2	

Predict Code	Product Resonation	Quantity	Standard Prise	(contract Plice	Estended Traico
GA-9006902	Lemenis Pulse 120H MOSES 2.0 Pulsed holmium laser at 2,100 µm at an operation range of 5 to 120 Hz, and 0,2-6.0 joules for a total power of up to 120 Watts. Fiberoptic point for unology, lithothipsy, gastroenterology, pulmonology, orthopsidics, general eargiery and other surgical procedures using liber delivery systems Includes: ⁴ Moses technology 2.0 - With dedicated and enhanced MOSES modes for Stones and BFH and Soft Tieuse ⁶ Green aloning beam with adjustable intensity and fidiniding mode ⁶ Color touch acreen with an advanced user interface to allows for easy adjustment of all laser settings and includes presents, reports and additional advanced functions. ⁹ Dual Foot Pedal – capabite of lasing in 2 predefined laser settings and a Ready/Standby toggle buildon ⁹ 2 apare Debris Shields (in the storage compartment at the back of the system) ⁹ 3 pair of setely glasses ⁹ Operator manual CD ⁹ Laser safety alignage In-hospital laser training program for the O.R: nursing shaft by a Lumenis Regional Education Manager (qualities for up to 4.0 contact hours by ANA), must be used within 1 year of shipment. SYSTEM DOES NOT INCLUDIE 220V PLUG, Customer is responsible to supply ths 220 voit plus. A Lumenis field service engineer with altach the plug to the system at the time of installation at your facility. ONE YEAR WARRANTY ON PARTS, LABOR, AND TRAVEL (Requires 206 volt, single phase, 45 and power) • SIS ther recognition technology.	1.00	USD 275,000.00	USD 215,000.00	USD 199,000.00
TRADE_IN_ALLOW	The trade in reflected on this quote will be valid only upon receipt of the equipment to Lumenis Inc. Trade in equipment must be received by Lumenis within 15 days. Your signature on this quote indicates that this trade in is free and clear of all liens and that you have clear title of said equipment. Model:	1.00	USD 0.00	USD 0.00	USD 0.00

Luminis Inc., 2077 Galaxiay Place, Suile 300, San Jose, CA 85110, USA Tel: 1-877-LUMENIS | Fax: 1-408-764-3930



202007-00926 **Quiple No** Serial Number: **Total Contract** USD 215,000.00 USD 16,000,00 **Total Discount** USD 199,000.00 **Total w/o Freight** USD 1.900.00 Tolei Freichi: USD 200,900.00 Grand Total: This Sales Quotation does not include laxes. Buyer is responsible for paying Lumenis all applicable taxes. All orders are subject to Credit Approval. Luments is required by tew to collect applicable state sales tax. Any prices below list price may constitute 'discounts' in accordance with the provisions of 42 C.F.R. § 1001.952(h) (the discount safe harbor to the Anti-Kickback Law). If requested by governmental authorities, Customer is required to accurately report and provide information concerning any discounts, rebates or other price reductions provided by Luments pursuant to this sale. This purchase order will be governed solely by the terms and conditions of the Agreement for Laser and Light-Based Equipment Contract Number CE2940 between Lumen's, Inc., and Vizient dated as of May 1st, 2016, and all other terms and conditions contained in the following purchase order (other than the description of the equipment to be purchased as shown on the face of the purchase order) shell not apply and have no force or effect. To Be Completed by Customer FURNISH EXEMPTION CERTIFICATE. PLEASE INDICATE TAX EXEMPT NUMBER IF APPLICABLE __ To place an order a minimum of a 20% non-refundable deposit is required. This Sales Quotation does not include taxes. Buyer is responsible for paying Lumenis all applicable taxes. Exact Name On Cradit Card: Credit Cardit: _____. Deposit in the amount of \$: ____ Credit Card Excitation Date: _

To Luments: We hereby authorize you or your agents to investigate our linancial responsibility and credit worthiness and we will provide any linancial information you deem necessary. If applicable, we authorize Luments to charge the referenced credit card. All orders are subject to Credit Approval. Luments is required by law to collect applicable state sales tax. Any prices below list price may constitute 'discounts' in accordance with the provisions of 42.C.F.R. § 1001,952(h) (the discount safe harbor to the Anti-Kickback Law). If requested by governmental authorities, Customer is required to accurately report and provide information concerning any discounts, rebates or other price reductions provided by Luments pursuant to this sele.

Certifications and Authorizations. Federal (USA) law restricts (and state law may reatrict) the Equipment to safe by or on the order of a physician, dentist, veterinarian or other practitioner licensed in the state in which the Equipment is used or ordered (a "Prescribing Practitioner"). Buyer and Buyer's Prescribing Practitioner are solely responsible for the use and operation of the Equipment is adequately trained and qualified to use and operate the Equipment selely and property and to perform medical procedures in accordance with such laws, regulations and guidelines. Luments makes no representations or warranties regarding federal, state or local laws or regulations, or medical or treatment guidelines instrument guidelines in a solely responsible for ensuring that each operator of the Equipment is adequately trained and guidelines in guidelines. Luments makes no representations or warranties regarding federal, state or local laws or regulations, or medical or treatment guidelines that may apply to the use and operation of the Equipment. Use of the Equipment may involve certain risks of injury to patients. Buyer and Buyer's Prescribing Practitioner are solely responsible for ensuring that patients are informed of these risks. Improper use of the Equipment may increase the risk of injury to patients. Buyer and Buyer's Prescribing Practitioner are solely responsible for ensuring that patients are informed of these risks. Improper use of the Equipment may increase the risk of injury to patients. Buyer and Buyer's Prescribing Practitioner are solely responsible for contacting state and local licensing agencies regarding requirements applicable to the use and operation of the Equipment. Buyer is responsible for timely obtaining all necessary certifications, authorizations; permits, licenses, approvals and consents required in connection with the purchase and

Lumenis Inc., 2077 Galeway Place, Suite 300, San Jose, CA 95110, USA Tel: 1-877-LUMENUS | Fax: 1-409-764-3930



202007-88926

Guote No

use of the Equipment in the State in which Customer is located and in the State in which the Equipment is used. Lumen's relies on Buyer's, commitment to fulfill such obligations, including any special certifications that may be required by the FDA.

Buyer or Buyer's Representative:		Lumenis Sales Representative:		
	(Signatuvė)		(Signature)	
Name:		Luments Sales Representative:		<u> </u>
	(Printed Name)		(Printed Name)	
Title:		Requested Delivery Date;	<u></u>	-
Date:	· · · · · · · · · · · · · · · ·			

Buyer signature above agrees to the purchase of the Luments Sales Quotation (the "Quote") then this Purchase Agreement (this "Agreement") shell the a binding contract for the purchase and sale of the products and/or services described in the Quote (collectively, the "Equipment").

Legeri Bushares Many				Places Eluideer	
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filling Address (C. Mineral than chirolo)	Chr	State	Tie Code	Presilen Questally	
Milling: Contact Home (Accounts Powifie)	Bindi Address	FinneM	i n	Place (Street of Parinte)	sir:
Elanteris Standiuma: a Limbed Lishity Conservation a Proprietorstic	scipatio	c Non-pulit		c Patterskip	a-Clivir
Ship to incediation Address (i) different these above)	Cin.	finte:	Zip Codo	Install Countries News	Techning Contract Name
Privary Office Contest Name	Email Address	Cellen	ne Humber	luciti Context Écul	Training Contact Beall
Contractor Planta Marine	Emil Addres	Photos		listil Contait Plans #	This is a Contrast Place a

Lumenis

Financial Solutions

Winnning your purchase, please complete the below section

Represent Payment Tainin:	Phonischug Puljmärik Priogratiscy:	Phinting Pr	init Tim:			
a Coole (Heli 20 a Flainsting	citionity a Controly a Saint-Animal a Other (opecily)	s 12Menit ia	s 24 Manthia	is 106 Manufilis	d' Montha	ci 80 Months
The insticing, should you the the 20% demographents applied to the democratic	Ciliur:					
contentt?		1				

Notice the federal equal credit opportunity act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin,

Sex, Mantal status, age (provided the applicant has the capacity to enter into a binding contract) because all or part of the applicant's income derives from any public Assistance program; or because the applicant has in good faith exercised any right under the consumer credit protection act. The federal agencies that administer Compliance with this law concerning the lessor are the bureau of consumer financial protection, 1700 g street NW, Washington d.c. 20006 and the federal trade commission, Equal credit opportunity, Washington d.c. 20580.

> Lumenis Inc., 2077 Geteway Place, Suite 300, San Jose, CA 95110, USA Tel: 1-877-LUMENIS | Fax: 1-408-764-3930



Quote No 20

202007-88926

Applicant hereby authorize luments inc. And/ or lessor or any credit bureau or other investigative agency employed by lessor to investigate the references herein listed or Statements or other data obtained from me or from any other person pertaining to my credit and linencial responsibility. All orders are subject to credit approval.

Authorized Signor: _	 	
Name:		
Title:		
Date:		<u> </u>

Capital Request Summary

FY21-3	NATUS ERGO EEG MACHINE						
		NATUS ERGO EEG MACHINE					
Requestor/Department:							
CRYSTAL HAMBLIN/RES	PIRATORY THERAPY						
Sole Source Purchase:	Yes or No						
Reason: PHYSICIAN PR	EFERENCE						

This Quote/Bid/Proposal contains discount pricing which parties agree not to disclose other than is required by law or court order.

Quotes/Bids/ Proposals received:

Vendor	City	Amount
Natus Medical Incorporated	Middleton, WI	47,651.40
	Vendor Natus Medical Incorporated	Vendor

Recommendation:

Natus Medical Incorporated - \$47,651.40



		Assigned: FY 213
· · · · · · · · · · · · · · · · · · ·	Capital Request	
NY	B KEY to navigate around this form to maintain information such as justification, underlying a penditure. Print out form and attach quotes and	ssumptions, multi-year projections and
Department: Casilophanery	Submitted by: Crystal Hamblin	Date: 7/24/2020
Provide a detailed description of the cap	ital expenditure requested:	
Electroencephalograms (EEG)	go Just Cart EEG machine request a NEW service line for MHSC patie	by Dr. Prachi Pawar to provide ants.
Preferred Vender: Haus	11 1 1 I want and Bet with the descent	la)
Total estimated cost of project (Check a	il required components and list related expension	2 2
1. Renovation		\$ 47,651,40
2. Equipment		8
3. Installation		e.
4. Shipping		<u>e</u>
5. Accessories		
6. Training		· •
7. Travel costs		
8. Other e.g. interfaces	Total Costs (add 1-8)	\$ 47 651 40
	gent Ceas (and 1-6)	2 H,007.H0.
Does the requested item:		
Require annual contract renewai? E YES		
Fit into existing space?	Explain:	
Attach to a new service?	Explain: EEG services	
YES INO		\$ /
Require physical plan modifications?	Electrical	<u>\$</u>
If yes, list to the right:	HVAC	\$
D YES NO	Safety	2
	Plumbing	1
	Infrastructure (I/S cabling, software, etc.)	24
Annualized impact on operations (if ap	plicable):	Budgeted Item:
	os/Decreases	VES INO
Projected Annual Procedures (NEW not e		
Revenue per procedure	\$1,405	# of bids obtained? 1
Projected gross revenue	\$ 103,000	Copies and/or Summary attached.
Projected net revenue	\$ 50,565	If no other bids obtained, reason:
Projected Additional FTE's	1	
Salaries		This specific manufacturer was
Benefits Maintenance		requested by Dr. Pawar.
Supplies	\$ 2,500	
		-
Total Annual Expense	\$ \$2500	
Net Income/(loss) from new service	\$ 46,008	
1144 THEOREM TRANSA STORE THAT I BOLL 1990	Review and Approvals	
Submitted by: Crystal Histolin	Verified enough Capital to purchase	
Department Leader	YES INO	11 - A Care Contract
Executive Leader	T YES INO	Kar aujacand 8-17-2000
Chief Financial Officer	YES DINO	Centre 8-17-2020
Chief Executive Officer	YES LINO	8-17-2020
Board of Trustees Representative	I YES I NO	

Ł

Electroencephalography (EEG) is a diagnostic test that measures the electrical activity of the brain. It is used to diagnose neurological conditions.

Providing EEG service is essential for a neurology practice.

Dr Pawar has been using the Natus products in her fellowship and is familiar with the equipment and software.

Natus Neuroworks is a market leader known for quality support and customer service. Providing EEG services will be a NEW revenue generating procedure.

Potential technical gross revenue per year based on 5 commercial and 5 medicare patients a month would be \$103,080/year.

The product has a one year warranty.

Recommend moving forward with purchase of Ergo Just EEG Cart by Natus.

Submitted by: Signature

7/23/2020

Date

natus.

System Proposal

Juste for:			
Account:	8884 MEMORIAL HOSPITAL	Quată Diste: Quată Number:	
	SWEETWATER COUNTY 1200 COLLEGE DRIVE ROCK SPRINGS WY 82901	Quete Expiration:	09/11/2020
Contact:	PRACHI FAWAR 3074487732		
Then: Email:	30/496/732	SolesRep:	Brandon Light brandon.light@natus.com
Contract Name:	NATUS MEDICAL'S TERMS AND CONDITIONS APPLY TO THIS QUOTATION		
Payment Termis:	NET 30		

SYS 1: LTM Porta Part Number	Description	Qiy	List Price	Extended List Price	Quote / Contracted Price	Ext. Quoto / Contracted Price
PK1204	EEGIStoop Acq Daditop with IP PTZ Color/DW Country on Ergo/Last Cart	1	\$14,289.00	\$14,200.00	\$13,127.48	\$13,127.48
	2411 FP Monitor	1	\$905.00	\$905.00	\$832.60	\$832.00
10507634	Inclution Transformer - 110V Ergodust cert	1	\$640.00	\$640.00	\$688.00	\$566,80
SO-NA-EJ			\$16,059.00	\$16,059,00	\$14,774.28	\$14,774.20
PK1274 LC101-9	Holus Brain Monitor Amplition Neuro/Moles 9.x Acquisition Software with	4	\$9,273.00	\$9,273.00	\$9,631.16	\$8,531.16
	Splins / Event and High Res Video	1	\$7,503.00	\$7,603.00	\$6,902.78	\$5,902.70
10193	Extended Video Monthering Controllers		\$2,480.00	\$2,499.00	\$2,299.08	\$2,209.00
PK1102 REPORT-EDITOR	LED Photo Stiwidator. MS Word Report Editor for Meuromoto/Stiogworks	1	\$254.00	\$254.00	\$233,88	\$233.00
ENCRYPTED	Computer Provided with Encrypted Hard Drive	1	\$393.00	\$993.00	\$361.56	\$351.50
	Totals for this a	waters	\$51,795.00	\$51,795.00	\$47,651.40	\$47,851.40
	Total Discount for this a					\$4,143.00
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SYS 27 Installatio	n Included		4 1.4 Midan	Extended List	Quote /	Ext. Quote / Contracted

Part Number	Description	Qly	List Price	Extended List Price	Contracted Price	Contracted Price
SVC000INSTALL_	Installation included	1	\$0.03	\$0.00	\$0.00	\$0.00
SVCCOOTRAIN_	Training Included	1	\$0.00	\$0.00	00.00	\$0,00
INC		for this system	\$0.00	\$0.00	\$0.00	\$0.00



System Proposal

MEMORIAL HOSPITAL SWEETWATER COUNTY 1-BFQRRU R3 00/11/2020

System To	tals				
Reference Number	Description	List Price	Extended List Price	Quote / Contracted Price	Ext. Quote / Contracted Price
SYST 1	LTM Portable Model BORI	\$51,795.00	\$51,795.00	\$47,651.40	\$47,651.40
SYST 2	Installation Included Training Included	\$0.00	\$0.00	\$8.89	\$9.00
Total Pricing		\$51,795.90	\$51,795.00	\$47,851.49	\$47,651.40
Discounts on this	order			8.00%	\$4,143.00
Jotal System Prop		19.35°		USD	\$47,651,40

All taxes extra, if applicable. Include Tax Exemption documentation with purchase order.



System Proposal

MEMORIAL HOSPITAL SWEETWATER COUNTY 1-BFORRU R3 08/11/2020

SUBMIT THIS ORDER TO:

Natus Medical Incorporated 3150 Pleasant View Road Middleton, WI 53562

FAX TO: 698-829-8775

Terms: Net 30 days unless specified FOB: Origin (Prepay Freight and Add)

Delivery: HARDWARE: Maximum of 4-6 Weeks after Receipt of Purchase Order SUPPLIES: 7 days After Receipt of Purchase Order

All taxes extra, if applicable, Include Tax Exemption documentation with purchase order

CUSTOMER PURCHASE ORDER MUST SPECIFY THE PRECEDING NATUS TERMS AND CONDITIONS OF SALE

Please note that Natus does not perform contracting services (cabling within wells, electrical wiring, installation of permanent fixtures) outside of those specifically enumerated in the applicable quote or order. However, as a courtesy to our customers, Natus may arrange for such services from a third party for an additional charge.

Unless specified on this quote, installation and training is not included with purchase. On-site installation and training can be purchased separately, if needed. A purchase order for additional installation or training services is required.

Please note this quotation includes benefits and/or promotional programs that may constitute a "discount or other reduction in price" for purposes of the federal anti-kickback statute, 42 USC §1320a-7a(b). To the extent required by the statute or by the discount safe harbor regulations at 42 CFR §1041.052(h), you will be responsible for fully and accurately reperting in applicable cost reports and providing information upon request to Medicare, Nedicard and other federal health care programs on all discounts or other price reductions provided under this Program.

By signing below Customer eignifies acceptance of Natur' Standard Terms and Conditions of Sale and Service unless Customer and Natur have separate written terms, or if Natur has an agreement with the Customer's designated Group Purchasing Organization. Any additional or different terms, including but not limited to those on Customer's purchase order or other forms, are hereby objected to by Nature.

Signature:	Date:

Natus Medical's Terms and Conditions can be found at: https://natus.com/terms-conditions



Required Customer Information For Order Processing

Upon acceptance of our proposal, we require the following information to process your order. Please complete and fax to the Capital Sales Department at 1-608-829-8775.

Name of Organization:					_
Bill To Address:					
Ship To Address:		-4			
(Same As Above)					
Is it a residential delivery?	T YES	D NO			
Key Contact:					
Email:					<u> </u>
Telephone:			Fax:	······································	
Federal Tax ID number require	d for singpl	ing address:			
				(Customs Will Verify Prior To Releasing Order)	
Accounting Contact Name:				سىسىرى بىرى بىرى بىرى يىرى يىرى يىرى	
Telephone:			Email:		
Do you have a loading dock?			T YES		
to there a loading dock with a fu	willin?		T YES	EI NO	
Is a lift gate required for deliver			TYES	CI NO	
Is the clover required for inside					
is the driver required to breakd		id?	T YES	EI NO	
Can the receivers building acco			T YES	EI NO	

I IF EXEMPT FROM STATE SALES TAX, PLEASE ATTACH AND FORWARD A CERTIFICATE OF EXEMPTION

www.ustus.com

natus.

General Site Readiness Terms and Conditions

In conjunction with the attached quote, the customer agrees to ensure that the installation site is prepared in advance of the mutually agreed upon installation date: Three weeks before the install, the Natus Site Planner will review the following points with the customer's Project Manager. Please note that Natus may require rescheduling of the installation if the site does not meet the minimum requirements listed below. If Natus arrives at the customer site and is required to extend the installation time due to the site not meeting these requirements, there will be a charge for rescheduling or returning for completion.

Physical Infrastructure	Installed areas are necessible and available at 8am on the first day of the planned installation. Access to review stations if required.	
Requirements Note: Notes presented not not important nor will perform my	Natus equipment oasite and placed in installation area by 8am on the first day of the planned installation. Site responsible for the disposal of all packaging material associated with their order.	
manforesting of maile floint or	Electrical outlets in place and tested	
cellings, the contener agrees to have accounces available during.	Placement of station PC's and monitors clearly marked and the area clear of obstructions	
the installation to complete	All wiring (video/audio and network) run and terminated	
these tasks	Site has provided a floor plan drawings and measurements of all areas	
and the second second	Alarm relays wired in and tested	
Additional requirements	C bi sta mounted	
if applicable to quote	Ladder available if justabling wall or ceiling mounted cameras	
	Biomed/IT resources available during installation	
Network Infrastructure	IP addresses assigned/provided	
Requirements	Network drops run and active	
Additional requirements	Data, SQL or Citrix server installed	
if applicable to quote	HL7 requirements defined	
Data Requirements Studies from existing equipment archived and/or backed up		
	Training time reserved for:	
	• Users	
	Physicians	
	Nucles	
Training	Traising main or space reserved	
	Montage/Photic/HV settings available for EEG installations	
	Report formats sent to Natus for Sleep installations	
	Customer Project Manager (required)	
	IT	
	EEG Tech	
	Physician	
Contact Information	Nurse Manager (for all patient affected areas)	
	Facilities	
	Biomedical Engineers	
	Electrical/Carpentry	

If deemed necessary by Natus, a walkthrough will be performed via a site visit to confirm, explain and clarify equipment placement and verify contact information.

Please note that Natus cannot and does not perform contracting services outside of those specifically enumerated in the applicable quote or order. However, as a courtesy to our customers, Natus may arrange for such services from a third party for an additional charge.

Acceptance of the quote constitutes agreement to these site readiness terms and conditions

DCOII5293

www.natus.com

Capital Request Summary

Capital Request #	Name of Capital Request:	
FY21-4	DOMESTIC HOT WATER HEAT EXCHANGER	
Requestor/Departm	ent:	
JIM HORAN/FACILI	ΠΕS	
Sole Source Purcha Reason: Uniformity	se: Yes or No y of current equipment	
		a • • • • • • • • • • • • • • • • • • •

This Quote/Bid/Proposal contains discount pricing which parties agree not to disclose other than is required by law or court order.

Quotes/Bids/ Proposals received:

 \Box

	Vendor	City	Amount
1.	Winnelson Company	Rock Springs, WY	27,110.98
2.			
3.			

Recommendation:

Winnelson Company - \$27,110.98



Capital Request Instructions: YOU MUST USE THE TAB KEY to marked accound the form to match the form to integrity. Nets: When appropriate, status additional information such as instituction, underlying assumptions, multi-generation. Department: Foreins. Department: Foreins. Is the training of the capital expenditure requested: Date: Taking documentation. Dormestic Hot Water Heat Exchanger for 180 degree hot water. Preferred Vendar: Winteen \$			# Assigned: FY 2021 - 4
Instructions YOU MUST USE THE TAB KEY to maigate account this form to maintain the form a histograph. Note: When appropriate, sinted additional informations such as justification, underlying assumptions, multi-year projections and mything documentation. mything documentations of the application of the caphel expenditure requested: Department rules Department rules Department rules Provide a description of the caphel expenditure requested: Demestic Hot Water Heat Exchanger for 180 degree hot water. Profile a deslined description of the caphel expenditure requested: Demestic Hot Water Heat Exchanger for 180 degree hot water. Profile a deslined description of the caphel expenditure requested: Demestic Hot Water Heat Exchanger for 180 degree hot water. Profile a deslined description & £ 27, 110.96 3. Installation & £ 5. Accessories & £ 6. Training & £ 7. Travid costs & £ 8. Other cg., interfinees & £ 7. Travid costs & £ 8. Other cg., interfinees & £ 9. Travid costs & £ 9. Travid costs & £ 9. Cost of the requested Hens: Require annual control renormain? □ YES ■ NO Pit is to excling space? Explain: □ YES ■ NO Pit is to excling space? Explain: □ YES ■ NO Projected Annual Procedures (NE aphila: 1. Breament December (NE aphila: 1. Breament December (NE aphila: 1. Travid costs & £ 3. Annualized Impact on operations (R aphilae) (S abhilag, software, etc.) & £ 3. Annualized Impact on operations (R aphilae) (S abhilag, software, etc.) & £ 4. Other require modifications? Blooticiad 1. BreamentDecreasies Blooticiad 1. Projected Annual Procedures (NEW not exclising) 1. Projected Annual Procedures (NEW not exclising) 1. Projected Annual Explanes & Company atteched. 3. Solutions Demented Spaces & £ 3. Copies mader Spaces & £ 3. Copies mader Spaces & £ 3. Copies mader Coperations & Breames & Copies mader Spaces & Copies mader Spaces & Breames & Copies mader Spaces & £ 3. Copie		Capital Request	•
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Domestic Hot Water Heat Exchanger for 180 degree hot water. Preferred Vendor: Windom Total estimated cest of project (Check all required components and list related expanse) I. Removation Support L. Removation L. Removatio	Department: Facilian		Date: 7/28/2009
Preferred Vender: Winnahen Total estimated cost of project (Check all required components and Hst related expense) 1. Renovation \$ Renovation \$ 27,110.90 Installation \$ 27,110.90 Installation \$ 21, description Secondary State \$ 21, firstallation \$ 21, firstallation \$ 22, 110.90 \$ 5, Accessories \$ 21, Travel costs \$ 21, firstallation \$ 21, Travel costs \$ 21, Total Costs (add 1-8) \$ 27,140.90			
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Vice President of Operations YES INO Chief Financial Officer YYES INO			
Chief Financial Officer YYES INO 8-5-2020			
			8-5-202
Board of Trustees Representative			The second second

Replacement for our 180 degree hot water heat exchanger (HX).

We are buying this HX from a "sole source" in order to keep uniformity of parts and to minimize service issues that arise from multiple diverse products of the same item.

Submitted by: Signature

Date

ROCK SPRINGS DESCRIPTIONS P O BOX 2127 1000 ELK ST ROCK SPRINGS, WY 82902 PHONE (307) 362-5730 FAX (307) 362-3914 SWEETWATER MEMORIAL HOSPITAL 1200 COLLEGE DR ROCK SPRINGS, WY 82901-5860 Phone (307) 362-3711 Fax (307) 362-8391		Heat exchanger Heat exchanger 0010791 4/14/20 Expiration Date Revised Date Bid Due Date Dete Frullo pafrullo@winnelson.com (307) 382-5730	Page 1 4/25/20 4/03/20 3/26/20	
COBLEMAX Payment Terms 000120 2% 10TH NET 30 1.0 1 SINGLE WALL FLO-RIT INSTANTANEOUS WATE TO INCLUDE LEAD FRE SHELL & TUBE HEAT E STEAM TRAP AND % TS ANGLE THERMOSTAT AI TRAP AND AIR VENT S LOOSE OTHER OPTIONS ARE: HEAT EXC FOR TEMP > 2 WEEKS OUT ARO FOB SHIP POINT	R HEATER 5 CONTROL XCHANGER 2 R VENT HIPPED 160 DEG		M Price	
 This quotation is it has been made to ind rily a complete list This quotation is for posal only. Prices are subject t all Federal, State, We are not responsib accidents, and delay This quotation is not 	lude all materials or immediate accept to change without n City and/or other ole for damages res to be considered to be considered this quotation at the ulty items are subj	uses beyond our control a contract and we rese any time for any reaso	cessa- s pro- to pply. erve	
	<u>Tax Area Id</u> 510370150	Net Sales Freight Tax Quotation Total	27,110.98 .00 .00 27,110.98	

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Capital Request Summary

Capital Request #	Name of Capital Request: UPGRADE TO OS SYSTEM FOR PACS		
FY21-10			
Requestor/Departm			
TRACIE SOLLER/ME	EDICAL IMAGING		
Sole Source Purcha	ase: Yes) or No		
Reason: VENDOR S	SPECIFIC		

This Quote/Bid/Proposal contains discount pricing which parties agree not to disclose other than is required by law or court order.

Quotes/Bids/ Proposals received:

	Vendor	City	Amount
1.	MERGE HEALTHCARE	CHICAGO, IL	\$214,013.02 CAPITAL \$2,219.57 FREIGHT <u>\$92.52 SUPPORT</u> \$216,325.11 TOTAL
2.			
3.			

Recommendation:

MERGE HEALTHCARE - \$216,325.11



		# Assigned: FY 21 - /O
	Capital Request	
Note: When appropriate, attach additional i	KEY to navigate around this form to mainten nformation such as justification, underlying a enditure. Print out form and attach quotes an	assumptions, multi-year projections and d supporting documentation:
Department: Modical Integling	Submitted by: Tracis Sellar	Date: 4/24/2020
Provide a detailed description of the capi	tal expenditure requested:	
Upgrade to the OS system for the PAC center and server software licenses up	S system and add addition archive and grade, Microsoft word upgrade. Convert	Primary Storage. Includes a data PACS from ZDA to Connect Access.
Preferred Vendor: Maps		
	required components and list related expen	ke)
1. Renovation		<u>></u>
2. Equipment		<u>\$ 214013.02</u>
3. Installation		
4. Shipping		<u>\$</u> 2219.57
5. Accessories		\$
6. Training		\$
7. Travel costs		8
8. Other e.g. interfaces		§ 92.52 ennuel support services fee
	Total Costs (add 1-5)	<u>\$</u> 216325.11
Does the requested item:		
Require annual contract renewal?	EI NO	
Fit into existing space?	Explain:	
YES INO		
Attach to a new service?	Explain:	
Require physical plan modifications?	Electrical	\$
If yes, list to the right:	HVAC	\$
E YES ENO	Safety	5
	Plumbing	5
	Infrastructure (I/S cabling, software, etc.)	5
Annualized impact on operations (if appl		
Increases	Decreases	Budgeted Item:
Projected Annual Procedures (NEW not ex		TYES INO
Revenue per procedure	2	# of bids obtained? 1
Projected gross revenue	\$ 	
Projected net revenue	8	Copies and/or Summary attached.
Projected Additional FTB's	6	If no other bids obtained, reason:
Salarics		Vendor Specific
Benefits Maintenance	\$	
Supplies	\$	
Total Annual Expenses	S	1
Net Income/(loss) from new service	\$	1
A Loss Addressed (Louisey an User server low two)	Review and Approvals	
Submitted by: Tracio Salar	Verified enough Capital to purchase	
Department Leader	TYES INO	
Executive Leader	XI YES INO	Kow Anickend: 8-17-2020
Chief Financial Officer	SI YES INO	11. Fre 8-17-2020
Chief Executive Officer	YES INO	8-17-2010
Board of Trustees Representative	I YES I NO	

FY 21 - The operating system on the current server is R2008 which will no longer be supported and needs to be updated to R2012. The newer code being written for the PACS software is written in the R2012 format. Without the upgrade the PACS software will not run correctly. The addition of 3D mammography will quickly use up all of the memory for image storage due to the size of the 3D files. This quote includes the hardware needed for the archive and primary storage as well as the memory module hardware, and data migration from the old system to the new.

Physicians are able to access images and reports off-site through Adobe Flash. Adobe Flash is going out of service and will be completely shut off December 31, 2020 at 2359 hours. Without Adobe Flash the physicians will no longer have remote access. Due to this, we are required to replace the software for the ZDA completely. This is the iConnect portion of this quote; iConnect will replace the ZDA services.

The original request was for \$259,213.02; current quote is a savings of \$42,887.91.

Tracie A Soller Digitally signed by Tracle A Soller Date: 2020.03.13 13:59:37 -06'00'

8/17/2020

Date

Submitted by: Signature

An IBM Company

Merge Healthcare | 71 South Wacker Drive, 20th Floor | Chicago, IL | 60606 | 877.446.3743

SALES ORDER

Memorial Hospital of Sweetweter County 1200 College Drive Rock Springs, WY 82901-5866, US

Quoted By: Price Valid Until: Document Date: Document timber: Jim Woods 9/30/2020 7/9/2020 Q-20794-4

1. PROJECT SUMMARY \$168,402.00 Unity Infrastructure - Memorial Hospital of Sweetwater County \$45,611.02 Connect Access - Nemorial Hospital of Sweetwater County USD 214,013.02 Balance Due **Shipping and Handling** USD 2,219.57 USD 92.52 Annual Support Services Fass for 1st Renoval Term Taxee will be reflected on Tank **Journice** Note: Refer to Exhibit A for Product List. and the sector to a sector of an address of the sector of the

www.merge.com

Right W

Payment achedule for the balance due is as follows:

Softwareliferdware/Third Party Products/ Bundled Solutions/Professional Services

100% due spon Effective Date.

Support

Billed annually in advance, due and payable first day of the Support Services Renewal Term:

The psymient terms set forth above shall apply to this Sales Order, regardless of terms in any other agreement between parties.

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2. EXECUTION

This Sales Order is governed by and subject to the Terms and Conditions of Sales Order ellached hereio as Exhibit 13 and made part hereof.

It is the matual latent of both Portice that this Sales Order constitutes a project separate and independent from any other executed or contemplated order(s). The fees due Merge Healthcare for this Sales Order are separate from any other executed or contemplated order(s), and the psyment terms hereof are not intended to be dependent upon or attenuise coincide with performance citients of any other executed or pending order(s). There are no products or services in this Sales Order that are interview coincide with performance citients of any other executed or pending order(s). There are no products or services in this Sales Order that are interview coincide with performance of design, technology or function of are essential to the functionality of a product in any other executed or contemplated order(s).

Morge Healthcare Solutions inc. and Memorial Hospital of Sweetwater County have caused this Sales Order to be executed by its authorized representatives, effective as of the latter date below ("Effective Data").

Norgo Healthcare Solutions Inc.:		atemorial Hospital of Sweetwater County		
Signature:		Signatura:		
Print Name:		Pvint Name:		
Title:		Tille:		
Date:		Date:		

Unless otherwise set forth as a line flam on this Seles Order, knowl and living expanses relative to Services will be involced in accordance with applicable provisions of the Agreement gevening this Seles Order; or in the absence of such provision, in accordance with 1984 travel policy.

Please submit executed proposal via email to whists@is.lbm.com

Customer Billing Address:	Memorie) Hospital of Sweetwater County
	1200 College Drive
	Rock Springs, Wyoming 82901
Customer Shipping Address:	Memorial Hospital of Supervisior County
	1200 College Drive
	Flock Savings, WY 82801-5865

Customer: By signing above, you are admostedging that the above-listed billing and shipping addresses are correct for this order. If any changes are necessary please indicate below:

	and the second second		
Please indicate whether this address change should be made		to the Customer account or	for this order only

If you have an existing Marge Support contract, adding new applications or upgrading software or equipment may change your orgoing Support pricing.

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			Effectual stat
TEM #	QITY	PART#	DESCRIPTION # NET PR
THE OWNER OF	Selection of the	e - Menconal Hospital of S	weetwater County
	1	HW-MISC	ENC XT 388 for Archive Storage
2	1	HWMISC	EMC XT 380 for Printery Storage
1	8	HW-UPAX-00205	MERGE LINITY, HP DL300/300 GO 16GB MEMORY MODULE - RDIMM 2400MHZ
Ļ	.8	CSP-ALL-00001-00095	MERGE UNITY, CUSTOMER SUPPLIED PER MERGE SPECIFICATIONS - SERVER
5	î	S3-UPAX-00054	MERGE UNITY, VMWARE VSPHERE ESSENTIALS PLUS LICENSE (Third Party Product)
8	3	S3-UPAX-00065	MERGE UNITY, THIRD PARTY SERVER SOFTWARE LICENSES (Third Party Product)
r	30	PS-UPAX-00002	MERGE UNITY, PROFESSIONAL SERVICE DAY - ACUTE Travel and Wing, If applicable, is billed separately
B	50	PS-UPAX-00009	MERGE UNITY, PROJECT MANAGEMENT HOUR
9	6	PS-UPAX-00008	MERGE UNITY, PROJECT MANAGEMENT HOUR
10	10	PS-RDLG-00002	LINENCE TO INTERGE DATA MIGRATION (CHARGE PER TB) The inflowing responsibilities define the score of this particular type of data migration: Marge Responsibilities - Work collaboratively with customer to determine details of what data is to be migrated, who is going to provide the lat of objects to be moved, what criteria will be used to determine what is to be migrated if the list is to be gathered by Marge - Work collaboratively with customer to determine details of units criteria will be used to determine what is to be migrated if the list is to be gathered by Marge - Work collaboratively with customer to determine whether or not migrated sticles should be excluded from routing effer they reach their intended target. Install and configure any required migration activers Manitor the progress of the wigrated customer Responsibilities: Provision of details of what data he relevent and should be migrated effer by providing a list of objects up front or collaborating with Marge to determine what criteria should be used to generate the list Provision of desired migration acheduiting (Example: Daty from 3:00 FM to 7:00 AM)
			Total Unity Infrastructure - Memorial Hespital of Sweetwater County \$168,402.00
Gomhr	nt Aizma	Memorial Henpital 01.5w	ietweiler County
11	1	SD-ICA-00014	ICONNECT ACCESS, UNIVERSAL VIEWER BASE SOFTWARE - 34000 ANNUAL PROCEDURE VOLUME License to use IConnect Access software for Universal Viewing of exame that are in an Institutions PACS and VNA archives and associated priore.
12	1	-SN-ICA-00117	ICONNECT ACCESS, TEST SOFTWARE
	ial Hospital (of Sweebrater County	Salas Order Number: Q-2974 Price Valid Until 0/30



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13	1	SN-ICA-00/38	ICONNECT ACCESS, DATA SOURCE CONNECTION TO MERGE - UNITY PACS			
14	1	SN-ICA-00141	ICONNECT ACCESS, CONVERSION FROM UNITY ZDA LOYALTY CREDIT APPLIED			
15	1	SNICA-00005	ICONNECT ACCERS, REPORTS			
16	1	SN-ICA-00008	ICONNECT ACCESS, ADDITIONAL RENDERING SERVER IN FEDERATED DEPLOYMENT			
17	1	SN-ICA-00053	ICONNECT ACCESS, EMR VIEWER INTEGRATION TO CERNER CORPORATION			
18	1	CSP-ALL-00001-00062	ICONNECT ACCESS, WEB SERVER - CUSTOMER SUPPLIED VIRTUAL ENVIRONMENT PER MERGE SPECIFICATIONS - VNIWARE			
19	1	CSP-ALL-00001-00085	ICONNECT ACCESS, SERVER - CUSTOMER SUPPLIED VIRTUAL ENVIRONMENT PER MERGE SPECIFICATIONS - VMWARE			
20	t	CSP-ALL-00001-00059	ICONNECT ACCESS, TEST SERVER - CUSTOMER SUPPLIED VIRTUAL ENVIRONMENT PER MERGE SPECIFICATIONS - VMWARE			
21	1	CSP-ALL-00001-00076	INTEROPERABILITY, MIRTH SERVER - CUSTOMER SUPPLIED VIRTUAL ENVIRONMENT PER MERGE SPECIFICATIONS - VMWARE			
22	1	CSP-ALL-00001-00128	MERGE UNITY, 2K12R2 CORE APP SERVER - CUSTOMER SUPPLIED VIRTUAL PER MERGE SPECIFICATIONS			
23	1	S3-NTP-00001	MERGE INTEROPERABILITY, MIRTH CONNECT INTERFACE ENGINE (Third Party Product) Mirth Connect is an open cource standards-based heatingers integration angles. Mirth Connect facilitates the routing, fillering, and transformation of messages between health information systems over a variety of protocols.			
24	1	S3-UPAX-00055	MERGE UNITY, THIRD PARTY SERVER SOFTWARE LICENSES (Third Party Product)			
25	21	PS-1CA-00015	ICONNECT ACCESS, PROFESSIONAL SERVICE DAY - ACUTE			
26	9	PS-ICA-00009	ICONNECT ACCESS, PROJECT MANAGEMENT AND WORKFLOW CONSULTING DAY - ACUTE			
27	3	PS-ICA-00011	ICONNECT ACCESS, ONSITE AND REMOTE TRAINING DAY - ACUTE			
Memorial Hospital of Sweethinder County Sales Order Number: Q-20704 Sales Order Price Valid Until 9/30/200 Page 4 of 9						



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28 2 PS-UPAX-00002

MERGE UNITY, PROFESSIONAL SERVICE DAY - ACUTE

Total IConnect Access - Nemorial Hospital of Sweetwater County \$15,611.02

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Capital Request Summary

Capital Request

Name of Capital Request:

FY21-14

CO2 CONDITIONING INSUFFLATOR KIT (3)

Requestor/Department:

ALISHA MACKIE/SURGICAL SERVICES

Sole Source Purchase: Yes or No

Reason: COMPATIBLE WITH CURRENT EQUIPMENT

This Quote/Bid/Proposal contains discount pricing which parties agree not to disclose other than is required by law or court order.

Quotes/Bids/ Proposals received:

	Vendor	City	Amount
1.	STRYKER ENDOSCOPY	SAN JOSE, CA	\$43,303.76
2.			
3.			

Recommendation:

STRYKER ENDOSCOPY - \$43,303.76



· · · · · · · · · · · · · · · · · · ·		# Assigned: FY 21 - /4
	Capital Request	
Note: When appropriate, attach additional i anything else that will help support this exp	KEY to navigate around this form to mainte nformation such as justification, underlying a enditure. Print out form and attach quotes an	assumptions, multi-year projections and d supporting documentation.
Department: Surgical Services	Submitted by: Alisha Machine	Date: #/18/2020
Provide a detailed description of the capit	tal expenditure requested:	
CO2 CONDITIONING INSUFFL	ATOR KIT (3)	
Preferred Vendor: Sivier		
Total estimated cost of project (Chack all	required components and list related expen	
1. Renovation		
2. Equipment		£ 43,303.76
3. Installation		<u>\$</u>
4. Shipping		<u>*</u>
5. Accessories		<u>£</u>
6. Training		<u>.</u>
7. Travel costs		\$.
8. Other e.g. interfaces		<u>£</u>
	Total Costs (add 1-8)	<u>\$</u> 43,303.76
Does the requested itom:		
Require annual contract renewal? [] YES		
Fit into existing space?	Explain:	
YES INO		
Attach to a new service?	Exploia:	
Require physical plan modifications?	Electrical	â
If yes, list to the right:	HVAC	
I YES INO	Safety	<u>×</u>
	Plumbing	3
	Infrastructure (I/S cabling, software, ctc.)	8
Annualized impact on operations (if app	icable):	
Increases	Decreases	Budgeted Item:
Projected Annual Procedures (NEW not ex		I YES INO
Revenue per procedure	\$	# of bids obtained? 1
Projected gross revenue	1	Copies and/or Summary attached.
Projected net revenue	\$	If no other bids obtained, reason:
Projected Additional FTE's	\$	
Solaries Benefits	\$	We already have Stryker
Maintennace	\$	Laparoscopic equipment so 3
Supplies	ŝ	machines would be an upgrade
Total Annual Expenses	\$	-
Net Income/(loss) from new service	5	
THE BRENNELLENDED IN MILE MENT DER TREP.	Review and Approvals	
Submitted by: Attana Machine	Verified enough Capital to purchase	
Department Leader	I YES I NO	1 1
Executive Leader	YES INO	Thereton kalson
Chief Financial Officer	YES INO	Jul- 8252020
Chief Executive Officer	DOYES EI NO	8-25-2020
Board of Trustees Representative	TYES INO	

The CDC has issued recommendations to hospital staff to ensure patient and staff safety, specifically, guidelines regarding the implementation of additional environmental infection control protocols. Within the scope, the CDC recommends that dedicated medical equipment should be used when caring for patients with known or suspected Covid-19.

One recommendation notes that facilities should not resume elective surgical procedures until they have adequate PPE and medical surgical supplies appropriate to the number and type of procedures to be performed. The American College of Surgeons has listed specific operative risks and has also issued some guidelines to minimize risks to staff when performing surgery on a presumptive or positive Covid-19 patient. These include:

Have minimum number of personnel in the operating room, including during intubation, as well as throughout. No visitors or observers.

· Use smoke evacuator when electrocautery is used.

· Tracheostomy considerations are important because of the high risk for aerosolization.

- These guidelines are important to minimize the risk of spreading Covid-19 for the following reasons:
- · Aerosolization and droplet transmission of the COVID-19 virus are important hazards for surgical personnel.

 Aerosolization and droplet transmission hazard increases with procedures such as endotracheal intubation, tracheostomy, gastrointestinal endoscopy and during the evacuation of pneumoperitoneum and aspiration of body fluids during laparoscopic procedures.

To meet the specific needs as recommended, the hospital is looking to purchase a Smoke Evacuation System. This system is essential as Surgical smoke plume from cautery devices contains 150 chemicals including 16 EPA priority pollutants. Surgical smoke can contain viruses such as Covid-19, HIV, HPV, HepB and other viral particles.

To properly protect the surgical services team, the hospital is looking to purchase a Smoke Evacuation System which includes a Pneumoclear Insufflator, Pneumoclear CO2 Conditioning Insufflator kit and tube set with additional essential accessories, and ULPA filters.

PneumoClear Insufflator- This equipment provides CO2 to the abdomen and also removes or sucks out smoke generated by cautery devices through the special tubing set. This is the key feature for ideal smoke removal. This equipment will not only help the surgeon keep a clear visual field of the surgery site, but will manage the evacuated smoke to ensure bacteria and viruses are not exposed to the staff in the operating room. Currently, the process to remove this smoke is to release it through a laparoscopic port which then blows the smoke that is full of chemicals, human tissue, and bacteria or viruses into the OR room where the staff then breath into their lungs.

Pneumoclear CO2 Conditioning Insufflator kit - These machines are necessary for all laparoscopic procedures as they provide the insufflation (to fill with air or CO2 gas) into the patient's abdomen. This provides space in the abdominal cavity for the surgeon to clearly visualize their operating site (like laparoscopic removal of gallbladder and hysterectomies). Currently, the operating rooms have two different Stryker insufflation machines on 3 laparoscopic towers, so going to 1 type of machine on all 3 towers will also cut down on the need for 2 different tubing sets.

We will use CARES Act funds to purchase this equipment.

Submitted by: Signature

Date

stryker

Quote Number:	10005381
Queie Name:	Memorial ParamoClear
Prepared For:	19990 : MEMORIAL HOSP OF SWEETWATER CTY
Quote Date:	05/19/2020

Ship to		From		
Name:	MEMORIAL HOSP OF SWEETWATER CTY	Rep:	Elliot Billings	
Address:	1200 COLLEGE DR	Rep Phone:	208-403-6042	
	ROCK SPRINGS, WYOMING \$2901	Emnil:	elliet.billings@stryker.com	
Phone:		GPO Name:	INTALÈRE	

Standard/Sat	npie			-		and the second second second
Product	Description	Product Image	U/M	Qty	List Price	List Total
0620050001	PHEUMOCLEAR CO2 CONDITIONING INSUPPLATOR KIT (BOTTLE GAS)		ËA	3	\$29,452.33	\$88,356.99

Total List Price:	\$88,356.99
Total Discount Amount:	\$45,053.23
Total Discount %:	50.99 %
Total Quoto Price:	\$43,303.76
Grand Total:	\$43,303.76

stryker

F.O.B.: Shipping Point Prices: In effect for 60 days Terms: Net 30 Days Ask your Stryker Sales Rep about our flexible financing options.

Comments

Elliot Billings and Stryker Endoscopy are able to offer a 50.57% discount on new Stryker PneumoClear "Smoke Evacuation" Insufflators beating Intelere GPO contact price. All discount pricing is awarded on both the Insufflator and insufflator Disposables

-Loyalty Customer Discount

Proposal expires 11/17/2020

MEDICAL WHEO I PERSENTLA ADDISINGUCOPY AND ADDISINGLA INSTRUMENTS FOR A NUMBER OF AND A PAROSCOPY (INCLAPAROSCOPY)

The Solution of the Ender Annual Street Conversion of Sources Science 140 Street Stree

Stryker Endoscopy, 5900 Optical Ct, San Jose, CA 95138 For Customer Service Call: 800-624-4422

MHSC Capital Budget for FYE 6/30/2021

Department	ITEM	Approved	Purch/Amt	Variance	FY#
Facilities	Generator Interface Touch Monitor	20,076			FY21-1
LABORATORY	MOBILE LAB, CLINIC, SWABBING STATION - 37 FT	262,000			FY21-5
EMERGENCY MANAGEMENT	SKYTRON MODEL 2280 DISINFECTION ROBOT (2)	141,889			FY21-6
EMERGENCY MANAGEMENT	SKYTRON MODEL 3200 DISINFECTION ROBOT	101,600			FY21-7
ABORATORY	BIOFIRE TORCH SYSTEM MODULE (2)	45,000			FY21-8
ABORATORY	CEPHEID GENEXPERT MOLECULAR TESTING PLATFORM	182,331			FY21-9
Facilities	MOB FRONT ENTRANCE REMODEL	289,900			FY21-11
Facilities	ULTRAVIOLET GERMICIDAL IRRADIATION	463,875		1	FY21-12
Facilities	HVAC UPGRADE IN RESPONSE TO COVID-19	2,314,000			FY21-13
Total Budgeted	2,000,000	3,820,671	-	-	

Capital Expenditure Dollars Authorized		3,820,671
Less Donated Capital		
MOBILE LAB, CLINIC, SWABBING STATION - 37 FT	SLIB	262,000
SKYTRON MODEL 2280 DISINFECTION ROBOT (2)	SLIB	141,889
SKYTRON MODEL 3200 DISINFECTION ROBOT	SLIB	101,600
BIOFIRE TORCH SYSTEM MODULE (2)	SLIB	45,000
CEPHEID GENEXPERT MOLECULAR TESTING PLATFORM	SLIB	182,331
MOB FRONT ENTRANCE REMODEL	SLIB	289,900
ULTRAVIOLET GERMICIDAL IRRADIATION	SLIB	463,875
HVAC UPGRADE IN RESPONSE TO COVID-19	SLIB	2,314,000
		3,800,595
Net Capital Outlay FYTD 2021		20,076
Remaining Balance FY2021 Capital Budget		1.979.924

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

Finance & Audit Committee Meeting August 26, 2020

Voting Members Present:	Mr. Richard Mathey, <i>Trustee – Chair</i> Mr. Ed Tardoni, <i>Trustee</i> Ms. Irene Richardson, <i>CEO</i> Ms. Tami Love, <i>CFO</i> Ms. Jan Layne, <i>Controller</i>
Voting Members Absent:	None
Non-Voting Members Present:	Mr. Ron Cheese, <i>Director of Patient Financial Services</i> Ms. Angel Bennett, <i>Director of Materials</i> Dr. Kristy Nielson, <i>CNO</i> Ms. Kari Quickenden, <i>CCO</i> Dr. Lawrence Lauridsen
Non-Voting Members Absent:	Dr. Augusto Jamias
Guests:	Tracie Soller, Director of Medical Imaging Crystal Hamblin, Director of Cardiopulmonary Alisha Mackie, Director of Surgical Services Dr. Cody Christensen Megan Gilbert, Nursing Informatics Bethany Bettolo, Nursing Informatics Brooke Fandrich, Nursing Informatics Jodi Corley, Nursing Informatics Stacey Nutt, Network Administrator Nicole Manus, PACS Administrator Gerry Johnston, Maintenance Supervisor Leslie Taylor, Clinic Director

Call Meeting to Order

Mr. Mathey called the meeting to order via teleconference.

Approve Meeting Minutes

A motion to approve the meeting minutes of June 24, 2020 as presented was made by Ms. Love; second by Ms. Richardson. Motion carried. Mr. Tardoni abstained from voting because he was not a member of the Finance & Audit Committee in June.

Capital Requests

Ms. Love gave a presentation on a new Electronic Medical Record. She explained the advantages of upgrading to a new medical record and the challenges we currently face with the

many systems we currently use. She presented the financial impact and the annual savings in service costs. The program that was chosen is Cerner CommunityWorks. The motion to approve the request to forward to the full Board was made by Mr. Tardoni; second by Ms. Richardson. Motion carried.

Dr. Christensen presented FY21-2 for the Lumenis Laser. He explained that this is a laser used for kidney stones. Our current laser is about 4-5 years. This new laser would be faster, safer and allow for more complex procedures. It would allow more procedures to stay in our hospital rather than transferring them to another location. It is top of the line technology and would help with recruiting another urologist. Ms. Mackie said they would be able to add more patients to their caseload with this faster laser. Mr. Tardoni asked if it would also be used for BPH. Dr. Christensen said that he would also use it for BPH and not have to transfer those patients. The motion to approve the request to forward to the full Board was made by Ms. Richardson; second by Mr. Tardoni. Motion carried.

Ms. Hamblin presented FY21-3 for the Natus EEG Machine. She is explained this machine is needed for our new neurologist, Dr. Prachi Pawar, starting in October. This machine looks at brain waves. She explained the procedure will be performed in Respiratory and then read by Dr. Pawar. This particular machine was requested by Dr. Pawar because she has had experience with using it. The motion to approve the request to forward to the full Board was made by Ms. Richardson; second by Mr. Tardoni. Motion carried.

Gerry Johnston presented FY 21-4 for the Heat Exchanger. Gerry said that this will replace our 180-degree hot water heat exchanger. This is a sole source purchase to keep uniformity with the current equipment. The motion to approve the request to forward to the full Board was made by Mr. Tardoni; second by Ms. Richardson. Motion carried.

Nicole Manus presented FY 21-10 for the PACS System Upgrade. Ms. Manus explained PACS stores all medical imaging. We are unable to buy more storage and need to upgrade the system. The current system uses adobe flash and will no longer be supported by the end of 2020. Additional storage will also be needed with the addition of the new 3D Mammography Machine. Mr. Tardoni asked if this is stored on or off-site. Ms. Manus said PACS is stored on-site in the server room. He asked if this would add to the heat issues in the storage room. Ms. Nutt said this should not impact the server room as it will replace current equipment. The motion to approve the request to forward to the full Board was made by Ms. Richardson; second by Mr. Tardoni. Motion carried.

Ms. Mackie presented FY21-14 for the CO2 Conditioning Insufflator Kits. She explained this equipment will filter the smoke created during surgery while using a cautery. The smoke can put bacteria into the air if is not filtered. This would help with COVID safety for the OR teams. Currently, the smoke is released into the air and stays there until a port is opened in the room. Ms. Love said this item was requested as a SLIB grant, but was denied. She thinks they did not understand what it was. She added we can use our CARES funds for this purchase. The motion to approve the request to forward to the full Board was made by Ms. Richardson; second by Mr. Tardoni. Motion carried.

Financial Report

Monthly Finance Statements & Statistical Data

Ms. Love reviewed highlights of the July financial statements. She said we closed with a \$46,174 net gain. Gross revenue was \$16.6 million which was \$2.6 million over budget. She said we did not see the decreased volumes we expected when budgeting due to COVID. We did not use any CARES funds for July for lost revenue. We are looking at a different method for using the lost revenue for future months. She also reported that the clinic had a record high month in revenue for July. Reduction of revenue was booked at \$1.2% for July, under budget by 1.7%

Ms. Love said August revenue is projecting to come in at \$14.3 million. We are projecting to a loss around \$200k-\$300k.

Mr. Tardoni asked if we thought the increase in the clinic was due to catching up from those that delayed appointments due to COVID. Ms. Taylor said they are probably seeing some catch-up. She also thinks the addition of the walk-in clinic has helped the numbers. Word is getting around and the walk-in clinic is busy. She also thinks providers didn't take as much time off this summer because of the pandemic. She also said we have added tele-health for those patients that do not want to come into the clinic. At this point, they are not able to take vitals on tele-health.

Mr. Cheese presented the preliminary bad debt to the committee. He said as of now the bad debt is \$1,099,457.95. He said this number will change before the board meeting next week. The motion to approve the preliminary bad debt was made by Ms. Richardson; second by Mr. Tardoni. Motion carried.

Old Business

Ms. Love said the FY20 Audit is not finalized. We are waiting on some items from external sources. The QRA is not available until September. The auditors are still planning to call in for the September Finance Meeting and the October Board Meeting to present the audit.

Ms. Love said she is struggling to get confirmation from the University of Utah that the helipad is covered under the U of U policy. She said they are still working on this.

Ms. Love gave an update on the SLIB grants. She said we have put a down payment down on the mobile lab and have submitted a request for reimbursement. She said the state is working on alternative options to get the money distributed faster. The current process is taking too long and the money needs to be spent by the 12/15/20 deadline. Ms. Love thought there was around \$100 million left to allocate to healthcare. There is hope that the deadline might get extended as the other CARES funds must be spent by 7/31/2021.

Ms. Love said we are moving forward with the cyber penetration testing. This was postponed due to COVID. Phase 1 is scheduled for 9/14/20 and Phase 2 9/28/20. Both phases will be performed remotely.

New Business

Ms. Richardson explained we have around \$7 million left in CARES funds to spend by 7/31/21. She presented a proposal to remodel and extend the lab. We currently have outpatient lab services moved over to the Foundation building due to COVID. The outside entrance has been a patient satisfier. We would like to add something similar off the lab and give the Foundation their space back. The current lab does not allow for social distancing. We have worked with an architect firm for a proposal and they have pared it down to around \$4.5 million. This would allow for reserves for lost revenue for the unknown of how COVID could change and the possibility of elective surgeries getting cancelled again. Mr. Mathey agreed with this plan and said that time is of the essence. Mr. Tardoni also agreed to move this forward to the board.

Mr. Mathey asked about enterprise revenue and where the numbers come from. Ms. Love explained that the numbers come from a system report. It is the hospital revenue generated from labs, scans, etc. that are ordered by physicians. They are tracked in the system by the provider ordering the test. Mr. Tardoni is concerned that reporting this gives the wrong expectations to the physicians. We do not want them to feel influenced or pressured by these numbers. Their expectation should always be to do what is best for the patient. Ms. Taylor said the patient has the option to decide where they want to go for services whether they are referred to the hospital or not. Mr. Mathey said we will continue this discussion in the next meeting.

Financial Forum Discussion

Ms. Love asked the committee if there is anything in the packet they would like to change. She asked if they still wanted the clinic financials broken out since they are not all inclusive. The clinic financials are not allocated overhead costs. Mr. Tardoni thought we have a good accounting package. He has looked at other hospital packets and ours looks good. He said that he is okay with leaving the clinic in the packet, but he does fear that people will not realize they are not allocated all overhead costs.

With no further business, the meeting adjourned at 6:00 PM.

Submitted by Jan Layne

MEMORIAL HOSPITAL OF SWEETWATER COUNTY FINANCE & AUDIT COMMITTEE AGENDA

	FINANCE & AUDIT	COMMITTEE AGEN	DA
	Wednesday~ August 26, 2020	4:00 p.m.	Teleconference
V	/oting Members: Richard Mathey, Chairman Ed Tardoni Irene Richardson Tami Love Jan Layne	Non-Voting Members Ron Cheese Angel Bennett Kristy Nielson	:: Kari Quickenden Dr. Larry Lauridsen Dr. Augusto Jamias
G	uests:	_	
	Jeff Smith, Commission Tracie Soller Dr. Cody Christensen Megan Gilbert Stacey Nutt	Gerry Johnston Alisha Mackie Bethany Bettolo Brooke Fandrich	Leslie Taylor Crystal Hamblin Jodi Corley Vanessa Jamias
Call M	leeting to Order	Ric	hard Mathey
Appro	ove June 22, 2020 Meeting Minutes	Ric	hard Mathey
Capita	al Requests FY 21	Ric	hard Mathey
A.	Electronic Medical Record		-
Finan	cial Report		
A.	Monthly Financial Statements & Stati	stical Data	
	1. Narratives		ni Love
	2. Financial Information	Tar	ni Love
B.	Other Business		
	1. Preliminary Bad Debt	Rot	n Cheese
Old Bi	usiness		
A.	FY2020 Financial Audit update	Tar	ni Love
В.	Helipad insurance coverage	Tar	ni Love
C.	SLIB grants	Tar	ni Love
D.	CLA Penetration Testing	Tar	ni Love
New H	Business		
А.	The Enterprise Revenue Statement in the $(10 - 15 \text{ minute discussion})$		Assumptions hard Mathey
В.	Financial Forum Discussion	Ric	hard Mathey
Adjou	rnment	Ric	hard Mathey

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IV.

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VI.

VII.

MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WY

NARRATIVE TO JULY 2020 FINANCIAL STATEMENTS

THE BOTTOM LINE. The bottom line from operations for July was a gain of \$846,174, compared to a loss of \$394,009 in the budget. This yields a 10.16% operating margin for the month compared to -5.43% in the budget.

The total net gain for July is \$791,181, compared to a loss of \$398,572 in the budget. This represents a YTD profit margin of 9.50% compared to -5.50% in the budget.

REVENUE. Revenue for the month was \$16,636,529, over budget by \$2,617,724. Inpatient revenue was over budget by \$520,897, outpatient revenue was over budget by \$1,567,771 and the employed Provider Clinic was over budget by \$529,057. We saw a 19% increase in hospital gross revenue compared to budget as we did not see the lower volumes budgeted due to the COVID19 pandemic.

CARES Act - We did not use any of the CARES Act funds to balance lost revenue. We have \$9,282,616 in grant reserves. We are using prior year net patient revenue to figure the amount of lost revenue for reconciliation purposes.

Annual Debt Service Coverage came in at 6.74. Days of Cash on Hand are 222 in July, up twenty-seven days from last month due to receipt of an additional CARES Act funds distributed to hospitals. Daily cash expense is down for July at \$223,000.

REDUCTION OF REVENUE. Deductions from revenue were booked at 51.2% for July, under budget by 1.7%. Total collections for the month came in at \$6,730,354.

The table below shows the July variance of expected to actual collections by payer for the Hospital only. The total collection variance is minimal this month as collections came in as expected. Blue Cross and Commercial were under the expected amount but have caught up through the first few weeks of August. Overall collections were 48% compared to our goal of 48%.

Payer	Avg prior 2 months	Collection %	Expected Collections	Actual	Act Variance	Act Coll %
BLUE CROSS	2,425,011.00	83%	2,012,759.13	1,782,949.00	(229,810.13)	74%
COMMERCIAL	1,639,224.00	83%	1,360,555.92	1,216,059.00	(144,496.92)	74%
GOVERNMENT	609,715.50	20%	121,943,10	264,364.00	142,420.90	43%
MEDICAID	1,049,203.00	24%	251,808.72	302,279.00	50,470.28	29%
MEDICARE - IP	1,019,952.66	55%	560,973.96	288,877.13	(272,096.83)	28%
MEDICARE - OP	3,979,792.84	22%	875,554.43	1,127,180.87	251,626.45	28%
SELF PAY	1,046,136.00	47%	491,683.92	724,640.00	232,956.08	69%
WORKERS COMP	151,997.50	40%	60,799.00	34,350.00	(26,449.00)	23%
TOTAL HOSPITAL	11,921,032.50	48.1%	5,736,078.18	5,740,699.00	4,620.82	48%

EXPENSES. Total expenses in July were \$7,484,808, under budget by \$160,103. The following line items were over budget:

Salary and Wage – Overtime hours increased in July due to the higher volumes and the continued need for COVID related positions such as door monitors and lab swabbers.

Contract Labor - There are currently contract labor positions in Behavioral Health, Surgical Services and Ultrasound.

Other Physician Fees - Locum physician costs are over budget due to locum expenses in OB/Gyn and Radiation Oncology.

PROVIDER CLINIC. Volumes increased again for July with a record high revenue month. Revenue for the Clinic in July was \$1,779,986, over budget by \$529,057. The bottom line for the Clinic in July was a loss of \$358,963 compared to a loss of \$681,287 in the budget. Total visits were 4,633 for July. The Clinic providers also generate hospital enterprise revenue, including Lab, Imaging and Surgery. Gross enterprise revenue year to date is \$4,913,501 which is 29.5% of total Hospital revenue year to date. Net patient revenue for the Clinic for July was \$980,930, over budget by \$308,461. Deductions from revenue for the Clinic were booked at 44.9% for July. The payer mix was as follows; Commercial Insurance and Blue Cross is 55% of revenue, Medicare and Medicaid is 38% of revenue and Self Pay is 6.5% of revenue. There has been increases in Commercial and Medicaid and decreases in Blue Cross and Medicare compared to prior year. Total expenses for the month were \$1,412,545, under budget \$8,998. The majority of the expenses consist of Salaries and Benefits; at 83% of total expenses. Salary and wage and Supplies were over budget for July.

OUTLOOK FOR AUGUST. Gross patient revenue is projecting to be at budget of \$14 million. Compared to last August, surgeries are down 15% and ER visits are still down by 9%. Lab visits are up by 44%, Sleep Lab is up by 16% and Births are up by 6%. Imaging and Inpatient days are at the same level as the prior year. Collections are projecting as expected at \$6.9 million in August. We estimate we will use approximately \$400 - \$500k of the CARES Act for August due to the method of reconciliation which compares prior year net patient revenue. This will leave \$9 million in grant reserves. We expect the loss for August to be around \$400k - \$500k.

Payer	Avg prior 2 months	Collection %	Expected Collections	Actual	Act Variance	Act Coll %	Projected	Prj Variance	Prj Coll Si
BLUE CROSS	2,776,494.50		2,304,415.74	1,585,532.00	(718,883.74)	57%	2,891,264,24	586,848.50	104%
COMMERCIAL	1,904,811.50		1,580,993.55	967,350.00	(613,643.55)	51%	1,763,991.18	182,997.63	93%
GOVERNMENT	634,185.00	20%	126,837.00	257,259.00	130,422.00	41%	469,119,35	342,282.35	74%
MEDICAID	1,219,487.50		292,677.00	95,454.00	(196,223.00)	8%	175,886.71	(116,790.29)	14%
MEDICARE - IP	1,171,412.70	100.50	644,276.99	137,935.59	(506,341.40)	12%	251,529.60	(392,747.39)	21%
MEDICARE - OP	4,570,782.30	1.010	A REAL PROPERTY AND A REAL	538,216,41	(467,355.69)	1235	981,453,45	(24, 118, 55)	2156
SELF PAY	1,188,579.00		and a second state of the second	206,424.00	(352,208.13)	17%	376,420,24	(182,211,89)	32%
WORKERS COMP	192,978.00	1.00		20,040,00	(57,151.20)	10%	36,543.53	(40,647.67)	19%
TOTAL HOSPITAL	13,658,640.50		6,590,595.70	3,809,211.00	(2,781,384.70)	28%	6,946,208,29	355,612.59	51%

Variances - Collections are projecting to come in higher than expected this month, at 51% compared to the expected 48% rate. We are still seeing some delays from insurance companies as their staff is working from home and have lost some efficiencies of processing claims.

Reduction of revenue – August payer mix is showing increases in Blue Cross, Government and Self Pay compared to the prior two months. Medicare and Commercial are showing decreases. This will result in reductions of revenue staying around 51% for August.



MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WY

Unaudited Financial Statements

for

One month ended July 31, 2020

Certification Statement:

To the best of my knowledge, I certify for the hospital that the attached financial statements do not contain any untrue statement of a material fact or omit to state a material fact that would make the financial statements misleading. I further certify that the financial statements present in all material respects the financial condition and results of operation of the hospital and all related organizations reported herein.

Certified by:

Tami Love

Chief Financial Officer

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MEMORIAL HOSPITAL OF SWEETWATER COUNTY EXECUTIVE FINANCIAL SUMMARY One month ended July 31, 2020

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		One mor	ith ended July	31, 2020	
BALAN	ICE SHEET			Designment of the Party of the	NET DAYS IN ACCOUNTS RECEIVABLE
	and a local division of the	YTD	Prior FYE		
		7/31/2020	6/30/2020		70.00 60.90
ASSETS					60.00 67.20
current Assets		\$30,650,270	\$29,379,960		50.00 47.56 47.65
	1	42,002,759	41,885,879		40.90
ssets Whose Use is Limited		62,644,198	62,796,433	l.	30,00
roperty, Plaint & Equipment (Net)		221,326	222,356		20.00
other Assets	ŀ	135,518,554	134,284,628		19.00
Total Unrestricted Assets		352,079	354,288		0,00
testricted Assets	ŀ	\$135,870,632	\$134,638,915		8,00
Total Assets	ŀ	\$100,010,00x	VIC-ICCOLO IC	ļ	a polyter and a second state of the second sta
LIABILITIES AND NET ASSETS			** *** ***		HOSPITAL MARGINS
Current Liabilities	ļ	\$8,868,557	\$8,393,553	1	10.00% 10.10% 9.80% 3
ong-Term Debt		27,795,686	27,800,498		9.00%
Other Long-Term Liabilities		17,156,662	17,184,109		7,00%
Total Liabilities		53,820,905	53,378,160		6.00%
Vet Assets		82,049,727	81,260,755		4,00% 2,60% 2,60%
Total Liabilities and Net Assets		\$135,870,632	\$134,638,915		2.00%
		C AND EVERAL	SES - YTD		
STATEMEN	T OF REVENU	E AND EXPENS	YTD	YTD	2 00%
	07/31/20	07/31/20		BUDGET	-3.00%
	ACTUAL	BUDGET	ACTUAL	DUDGET	-3.00% -3.00% -3.00% -3.00% -3.00% -3.00% -3.00%
Revenue:					-7.00%
Gross Patient Revenues	\$16,636,529	\$14,018,804	\$16,636,529	\$14,018,804	
Deductions From Revenue	(8:525,752)	(7,421 153)	(8,525,752)	(7,421,153)	DAYS CASH ON HAND
Net Patient Revenues	8,110,777	6,597,651	8,110,777		240.00 2222.04 218.17
Other Operating Revenue	220,205	653,251	220,205		210.00
Total Operating Revenues	8,330,982	7,250,902	8,330,982	7,250,902	160.00
e -	The second second				150.00
Expenses:	4 000 400	4 945 999	4,233,496	4,245,322	120.00
Salaries, Benefits & Contract Labor	4,233,496	4,245,322	729,626	728,245	90.00
Purchased Serv. & Physician Fees	729,626	728,245		1,259,623	60.00
Supply Expenses	1,242,081	1,259,623	1,242,081	837,849	
Other Operating Expenses	723,765	837,849	723,765	037,049	Cash - Short Term
Bad Debt Expense	0	0	0		
Depreciation & Interest Expense	555,840	573,872	555,840	573,872	SALARY AND BENEFITS AS A
Total Expenses	7,484,808	7,644,912	7,484,808	7,644,912	PERCENTAGE OF TOTAL
NET OPERATING SURPLUS	846,174	(394,009)	846,174	(394,809)	EXPENSES
Non-Operating Revenue/(Exp.)	(54,993)	(4,563)	(54,993)	(4,568)	60.00%
	the second se	(\$398,572)	\$791,181	(\$396,572)	50.00%
TOTAL NET SURPLUS					
	KEY STATISTI	CS AND RATIO	8		
	07/31/20	07/31/20	YTD	YTD	30.00% 55,553 58,553 58,653 56,08%
	ACTUAL	BUDGET	ACTUAL	BUDGET	20,00 %
Total Acute Patient Days	332	306	332	306	
Average Acute Length of Stay	2.8			2.6	0.00%
	1,213			1,299	
Total Emergency Room Visits	9,075			6,795	MEMORIAL HOSPITAL OF SWEETWATER COUN
Outpatient Visits	9,075			162	
Total Surgeries				432.61	g
Total Worked FTE's	413.73	432.0		475.40	a WYOMING All Hospita
Total Paid FTE's	457.43	475.40	407,40	10.40	************************************
			04 4004	5.72%	
Net Revenue Change from Prior Yr	21.46%	5.72%			FINANCIAL STRENGTH INDEX - 2.1
EBIDA - 12 Month Rolling Average		ALC: NO	6.76%	the second se	
Current Ratio		WHIT IN WHIT	3.46		
Days Expense in Accounts Payable	A COLUMN TWO IS NOT THE	10 10 35	33.26	and and a second se	Fair + 0.0 to (2.0) Poor - Less than (2

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Key Financial Ratios MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WY One month ended July 31, 2020

- DESIRED POSITION IN RELATION TO BENCHMARKS AND BUDGET 4.4

	Year to Date 7/31/2020	Budget 6/30/2020	BB+ Credit Rating	BBB- Credit Rating	Prior Fiscal Year End 06/30/20	WYONHNG All Hospitals	National Rural < \$9011 Not Rov.
	113 112020	UI COMBUNIC	a land and the second	12000		(See Note 1)	(See Note 2)
Operating Matrin	* 10.16%	1.90%	0.10%	0.30%	-2.10%	2.64%	-0.73%
	* 9.50%	0.76%	0.80%	1.00%	0.73%	6.11%	0.21%
Down Coeft, All Solution **	* 222.04	129.76	91.30	129.00	218.17	62.00	37.80
	• 47,96	50.02	52.40	51.80	47.65	66.90	57,20
Average Age of Plant (Annualized)	* 15.20	12.58	15.10	11.20	14.33	9,50	12.40
	* 25.85%	25.75%	48.20%	41.60%	26.04%	16.80%	10.00%
	* 6.74	3.97	1.80	2,30	3,42	N/A	2.64
Productivity and Efficiency: Peld FTE's per Adjusted Occupied Bed Setary Expense per Paid FTE Satary and Benefits as a % of Total Operating Exp	• 8.36 \$85,953 p 56,58%	8.43 \$88,892 58.43%			8.36 \$87,488 56.06%	6.60 \$62,436 43.60%	4,63 \$48,150 42.40%

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Note 1 - 2017 Ingenix report (2013 median data), for all hospitals within the state regardless of size. Note 2 - 2017 Ingenix report (2015 median data), for all U. S. hospitals that match this type and size. **Bond Covenant ratio is 75 Days Cash on Hand and 1.25 Debt Service Coverage

Balance Sheet - Assets

MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WY One month ended July 31, 2020

	Current	Prior	ASSETS Positive/		Prior
	Month 7/31/2020	Month 6/30/2020	(Negative) Variance	Percentage Variance	Year End 6/30/2020
Current Assets					
Cash and Cash Equivalents	\$11,547,994	\$12,052,717	(\$504,723)	-4.19%	\$12,052,717
Gross Patient Accounts Receivable	24,946,530	22,601,743	2,344,787	10.37%	22,601,743
Less: Bad Debt and Allowance Reserves	(13,745,084)	(12,704,325)	(1,040,769)	-8.19%	(12,764,325)
Net Patient Accounts Receivable	11,201,446	9,897,418	1,304,028	13.18%	9,897,418
Interest Receivable	0	0	0	0.00%	0
Other Receivables	2,271,193	2,085,869	185,324	8.88%	2,085,869
Inventories	3,209,717	3,208,539	1,179	0.04%	3,208,539
Prepaid Expenses	2,419,919	2,135,417	284,502	13.32%	2,135,417
Due From Third Party Payers	0	0	0	0.00%	0
Due From Affiliates/Related Organizations	0	0	0	0.00%	0
Other Current Assets	0	0	0	0.00%	0
Total Current Assets	30,650,270	29,379,960	1,270,310	4.32%	29,379,960
Assets Whose Use is Limited					
Cash	27,178	23,688	3,489	14.73%	23,688
Investments	0	0	0	0.00%	0
Bond Reserve/Debt Retirement Fund	0	0	0	0.00%	0
Trustee Held Funds - Project	3,134,989	3,030,616	104,373	3.44%	3,030,616
Trustee Held Funds - SPT	14,909	14,345	564	3.93%	14,345
Board Designated Funds	23,851,522	23,843,068	8,454	0.04%	23,843,068
Other Limited Use Assets	14,974,161	14,974,161	0	0.00%	14,974,161
Total Limited Use Assets	42,002,759	41,885,879	116,880	0.28%	41,885,879
Property, Plant, and Equipment					
Land and Land Improvements	3,527,687	3,527,687	0	0.00%	3,527,687
Building and Building Improvements	38,783,761	38,771,352	12,409	0.03%	38,771,352
	110,620,231	110,464,497	155,733	0.14%	110,464,497
Equipment	3,192,516	2,957,578	234,938	7.94%	2,957,578
Construction In Progress	0,102,010	2,001,010	0	0.00%	0
Capitalized Interest	156,124,194	155,721,114	403,081	0.26%	155,721,114
Gross Property, Plant, and Equipment	(93,479,996)	(92,924)681)	(955,315)	-0.60%	(82,924,681)
Less: Accumulated Depreciation Net Property, Plant, and Equipment	62,644,198	62,796,433	(152,234)	-0.24%	62,796,433
Other Assets	221,326	222,356	(1,029)	-0.46%	222,356
Unamortized Loan Costs	221,020	0	0	0.00%	0
Other Total Other Accord	221,326	222,356	(1,028)	-0.46%	222,356
Total Other Assets	221,520				
TOTAL UNRESTRICTED ASSETS	135,518,554	134,284,628	1,233,926	0.92%	134,284,628
Restricted Assets	352,079	354,288	(2,209)	-0.62%	354,288
TOTAL ASSETS	\$135,870,632	\$134,638,915	\$1,231,717	0.91%	\$134,638,915
					A DECISION OF THE OWNER OF

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Balance Sheet - Liabilities and Net Assets

MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WY One month ended July 31, 2020

	Current Month 7/31/2020	Prior Month 6/30/2020	Positive/ (Negative) Variance	Percentage Variance	Prior Year End 6/30/2020
Current Liabilities					
Accounts Payable	\$3,862,075	\$3,776,951	(\$85,124)	-2.25%	\$3,776,951
Notes and Loans Payable	0	0	0	0.00%	0
Accrued Payroll	1,635,678	1,377,654	(258,925)	-18.73%	1,377,654
Accrued Payroll Taxes	0	0	0	0.00%	0
Accrued Benefits	2,503,860	2,483,630	(29;230)	-0.81%	2,483,630
Accrued Pension Expense (Current Portion)	0	0	0	0.00%	0
Other Accrued Expenses	0	0	0	0.00%	0
Patient Refunds Payable	0	0	0	0.00%	0
Property Tax Payable	0	0	0	0.00%	0
Due to Third Party Payers	0	0	0	0.00%	0
Advances From Third Party Payers	0	0	0	0.00%	0
Current Portion of LTD (Bonds/Mortgages)	308,044	308,044	0	0.00%	308,044
Current Portion of LTD (Leases)	0	0	0	0.00%	0
Other Current Liabilities	558,900	447,275	(111,625)	-24.96%	447,275
Total Current Liabilities	8,868,557	8,393,553	(475,084)	-5.66%	8,393,553
Long Term Debt					
Bonds/Mortgages Payable	28,103,730	28,108,542	4,812	0.02%	28,108,542
Leases Payable	0	0	0	0.00%	0
Less: Current Portion Of Long Term Debt	308,044	308,044	0	0.00%	308,044
Total Long Term Debt (Net of Current)	27,795,686	27,800,498	4,812	0.02%	27,800,498
Other Long Term Liabilities					
Deferred Revenue	16,718,637	16,718,637	0	0.00%	16,718,637
Accrued Pension Expense (Net of Current)	0	0	0	0.00%	0
Other	438,025	465,472	27,447	5.90%	465,472
Total Other Long Term Liabilities	17,156,662	17,184,109	27,447	0.16%	17,184,109
TOTAL LIABILITIES	53,820,905	53,378,160	(442,745)	-0.83%	53,378,160
N. & Assessed					
Net Assets:	78,951,221	78,299,323	(651,898)	-0.83%	78,299,323
Unrestricted Fund Balance Temporarily Restricted Fund Balance	1,959,119	1,959,119	0	0.00%	1,959,119
Restricted Fund Balance	348,206	350,415	2,209	0.63%	350,415
Net Revenue/(Expenses)	791,181	651,898	N/A	N/A	651,898
		······			
TOTAL NET ASSETS	82,049,727	81,260,755	(708,972)	-0.97%	81,260,755
TOTAL LIABILITIES AND NET ASSETS	\$135,870,632	\$134,638,915	(\$1,231,747)	-0.91%	\$134,638,915

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Statement of Revenue and Expense MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WY

One month ended July 31, 2020

		CL	JRRENT MONTH		Delan
	Actual 07/31/20	Budget 07/31/20	Positive (Negative) Variance	Percentage Variance	Prior Year 07/31/19
Gross Patient Revenue	\$3,256,010	\$2,735,114	\$520,897	19.04%	\$2,923,619
Inpatient Revenue	11,600,532	10,032,761	1,567,771	15.63%	10,734,465
Outpatient Revenue Clinic Revenue	1,365,508	988,792	376,716	38.10%	1,191,478
Specialty Clinic Revenue	414,478	262,137	152,341	58.11%	157,931
Total Gross Patient Revenue	16,636,529	14,018,804	2,617,724	18.67%	15,007,493
Deductions From Revenue		(6,158,121)	(1,699,607)	-27.60%	(7.139(232)
Discounts and Allowances	(7,857,728)	(4,068,107)	484,905	45.40%	(1,016,938)
Bad Debt Expense (Governmental Providers Only)	(583,202) (84,822)	(194,925)	110,103	56.48%	(200,053)
Medical Assistance Total Deductions From Revenue	(8,525,752)	(7,421,153)	(1,104,599)	-14.88%	(8.356:223)
Net Patient Revenue	8,110,777	6,597,651	1,513,125	22.93%	6,651,270
Other Operating Revenue	220,205	653,251	(483,046)	-66.29%	207,641
Total Operating Revenue	8,330,982	7,250,902	1,080,080	14,90%	6,858,911
Operating Expenses	0.000.400	0.040 507	(72:589)	-2.26%	3,024,639
Salaries and Wages	3,283,126	3,210,537 1,003,599	109,387	10.90%	695,692
Fringe Benefits	894,212 56,158	31,186	(24,972)	-80.08%	146,497
Contract Labor	281,292	273,964	(7 328)	-2.67%	365,232
Physicians Fees Purchased Services	448,335	454,281	5,946	1.31%	411,362
Supply Expense	1,242,081	1,259,623	17,543	1.39%	1,221,496
Utilities	103,746	103,268	(478)	-0.46%	98,218
Repairs and Maintenance	399,565	455,337	55,772	12.25%	409,417
Insurance Expense	16,263	43,360	27,097	62.49%	58,574 196,139
All Other Operating Expenses	140,863	173,886 0	33,023 0	18.99% 0.00%	190,139
Bad Debt Expense (Non-Governmental Providers)	0 63,328	61,998	(1,330)	-2.15%	91,340
Leases and Rentals	555,840	573,872	18,032	3.14%	561,039
Depreciation and Amortization Interest Expense (Non-Governmental Providers)	0,040	0	0	0.00%	0
Total Operating Expenses	7,484,808	7,644,912	160,103	2.09%	7,279,646
Net Operating Surplus/(Loss)	846,174	(394,000)	1,240,183	-314.76%	(4207/65
Non-Operating Revenue:		_	à	0.00%	0
Contributions	0	0 23,667	0 (7;311)	-30.89%	19,116
Investment Income	16,355 564	23,007	564	0.00%	1,429
Tax Subsidies (Except for GO Bond Subsidies) Tax Subsidies for GO Bonds	0	õ	0	0.00%	C
Interest Expense (Governmental Providers Only)	(407,848)	(99,633)	8,185	-8.22%	(09)633
Other Non-Operating Revenue/(Expenses)	35,906	71,404	(35.498)	-49.71%	28,255
Total Non Operating Revenue/(Expense)	(54,993)	(4,593)	(50,430)	1105.29%	(50,834
Total Net Surplus/(Loss)	\$791,181	(\$398;572)	\$1,189,752	-298.50%	(5474) 569
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease in Unrestricted Net Assets	\$791,181	(\$398,572)	\$1,189,752	-298.50%	(\$474,569
	40.400/	-5.43%			-6.139
Operating Margin Total Profit Margin	10.16% 9.50%	-5.50%			-6.88

Statement of Revenue and Expense MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WY One month ended July 31, 2020

		١	EAR-TO-DATE		
	Áctual 07/31/20	Budget 07/31/20	Positive (Nagative) Variance	Percentage Variance	Prior Year 07/31/19
Gross Patient Revenue	#2 DEC 040	\$2,735,114	\$520,897	19.04%	\$2,923,619
Inpatient Revenue	\$3,256,010 11,600,532	10,032,761	1,567,771	15.63%	10,734,465
Outpatient Revenue	1,365,508	988,792	376,716	38.10%	1,191,478
Clinic Revenue Specialty Clinic Revenue	414,478	262,137	152,341	58.11%	157,931
Total Gross Patient Revenue	16,636,529	14,018,804	2,617,724	18.67%	15,007,493
Deductions From Revenue		10 400 60.0	(1,689;687)	-27.60%	(7,139,232)
Discounts and Allowances	(7.857,728) (563,202)	(6,158,124) (4,068,107)	484,905	45.40%	(1.018;938)
Bad Debt Expense (Governmental Providers Only)	(84.822)	(194,925)	110,103	56.48%	(200:053)
Medical Assistance Total Deductions From Revenue	(8.525,752)	(7.421.153)	(1-104;599)	-14.88%	(8,356,223)
Net Patient Revenue	8,110,777	6,597,651	1,513,125	22.93%	6,651,270
Other Operating Revenue	220,205	653,251	(433,046)	-66.29%	207,641
Total Operating Revenue	8,330,982	7,250,902	1,080,080	14.90%	6,850,911
Operating Expenses			(70 COO)	0.000/	2 024 620
Salaries and Wages	3,283,126	3,210,537	(72,569) 109,387	-2,26% 10,90%	3,024,639 695,692
Fringe Benefits	894,212 56,158	1,003,599 31,186	(24,972)	-80.08%	146,497
Contract Labor	281,292	273,964	(7,328)	-2.67%	365,232
Physicians Fees Purchased Services	448,335	454,281	5,946	1.31%	411,362
Supply Expense	1,242,081	1,259,623	17,543	1.39%	1,221,496
Utilities	103,746	103,268	(478)	-0.46%	98,218
Repairs and Maintenance	399,565	455,337	55,772	12.25%	409,417
Insurance Expense	16,263	43,360	27,097	62.49%	58,574
All Other Operating Expenses	140,863	173,886	33,023 0	18.99% 0.00%	196,139 0
Bad Debt Expense (Non-Governmental Providers)	0	0 61,998	(1,330)	-2.15%	91,340
Leases and Rentals	63,328 555,840	573,872	18,032	3.14%	561,039
Depreciation and Amortization Interest Expense (Non-Governmental Providers)	000,040	0	0.	0.00%	0
Total Operating Expenses	7,484,808	7,644,912	160,103	2.09%	7,279,646
Net Operating Surplus/(Loss)	846,174	(394,009)	1,240,183	-314.76%	(420,735)
Non-Operating Revenue:	_			0.000/	0
Contributions	0	0	(7,3(1)	0.00% -30.89%	19,116
investment income	16,355	23,667	564	0.00%	1,429
Tax Subsidies (Except for GO Bond Subsidies) Tax Subsidies for GO Bonds	564	0	0	0.00%	0
I ax Subsidies for GO Bonds Interest Expense (Governmental Providers Only)	(107,818)	(99,683)	(8, 185)	8.22%	(89;633)
Other Non-Operating Revenue/(Expense)	35,906	71,404	(35,498)	-49.71%	28,255
Total Non Operating Revenue/(Expense)	(54;993)	(4,563)	(50,430)	1105.29%	(50,834)
Total Net Surplus/(Loss)	\$791,181	(7,91,55 2)	\$1,189,752	-298.50%	(\$471,569)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease) in Unrestricted Net Assets	\$791,181	(\$398,572)	\$1,189,752	-298.50%	(\$471,589)
Operating Margin	10.16% 9.50%	-5.43% -5.50%			-6.13 % -6.88%
Total Profit Margin	16.83%	2.48%			2.07%
EBIDA	10:00 /	2.70 /0		MARINE INC.	

Statement of Revenue and Expense - 13 Month Trend MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WY

	Actual 7/31/2020	Actual 6/30/2020	Actual 5/31/2020	Actual 4/30/2020	Actual 3/31/2020	Actual 2/20/2020
Gross Patient Revenue				40.704.840	en 177 290	\$2,722,882
Inpatient Revenue	\$3,256,010	\$2,923,872	\$2,863,837	\$2,794,519	\$2,777,538	\$2,122,00A
Inpatient Psych/Rehab Revenue	\$11,600,532	\$9,853,590	\$8,485,713	\$8,104,600	\$10,336,977	\$10,746,705
Outpatient Revenue Clinic Revenue	\$1,365,508	\$1,291,506	\$1,116,816	\$1,146,806	\$984,201	\$1,161,210
Specialty Clinic Revenue	\$414,478	\$281,911	\$314,858	\$288,932	\$244,806	\$262,865
Total Gross Patient Revenue	\$16,636,529	\$14,350,879	\$12,781,224	\$12,334,856	\$14,343,521	\$14,893,661
Deductions From Revenue						
Discounts and Allowances	\$7,857,728	\$5,960,628	\$5,186,139	\$5,565,060	\$6;081,660 \$813,846	\$6,619,613 \$837,619
Bad Debi Expense (Governmental Providers Only)	\$583,202	\$1,101,340	\$1,256,071	\$1 158,759 \$87,459	\$264,093	\$182,758
Charity Care	\$84,822 8,525,752	\$194,709 7,256,676	\$55,091 6,497,301	6,811,278	7,159,605	7,639,991
Total Deductions From Revenue	6,929,792	7,200,070	0,497,001		S.	
Net Patient Revenue	\$8,110,777	\$7,094,203	\$6,283,923	\$5,523,578	\$7,183,916	\$7,253,671
Other Operating Revenue	220,205	(1,616,586)	1,046,148	2,076,262	231,037	125,899
Total Operating Revenue	8,330,982	5,477,615	7,330,071	7,599,840	7,414,953	7,379,569
Operating Expenses Salaries and Wages	\$3,283,126	\$3,165,695	\$3,315,414	\$3,149,585	\$3,411,912	\$3,348,166
Fringe Benefits	\$894,212	\$854,214	\$855,042	\$920,695	\$933,298	\$895,130
Contract Labor	\$56,158	\$10,676	\$26,130	\$46,076	\$49,063	\$41,291
Physicians Fees	\$281,292	\$334.073	\$316,372	\$338,295	\$366,453	\$411,317 \$322,523
Purchased Services	\$448,335	\$603,898	\$385,944 \$1.008,570	\$361.426 \$1,158,916	\$485,887 \$1,321,818	\$1,176,617
Supply Expense	\$1,242,081	\$1,138,393 \$68,251	\$102,274	\$89,337	\$84,093	\$87,382
Utilities	\$103,746 \$399,565	\$428,595	\$462,934	\$444,766	\$446,244	\$420,693
Repairs and Maintenance	\$16,263	\$44,527	\$43,428	\$47,455	\$54,964	\$59,739
Insurance Expense All Other Operating Expenses	\$140,863	\$211,587	\$91,828	\$149,189	\$208,356	\$141,853
Bad Debt Expense (Non-Governmental Providers)						
Leases and Rentals	\$63,328	\$49,303	\$49,189	\$84,204	\$66,908	\$67,609
Depreciation and Amortization	\$555,840	\$568,459	\$546,931	\$549,855	\$552,321	\$554,019
Interest Expense (Non-Governmental Providers) Total Operating Expenses	\$7,484,806	\$7,395,571	\$7,237,058	\$7,319,780	\$7,981,317	\$7,626,339
			\$93,015	\$280,060	(\$\$600,364))	(\$145.770)
Net Operating Surplus/(Loss)	\$846,174	(\$7,947(965)	\$991010	9203,000		
Non-Operating Revenue:						
Contributions	16,355	35,221	175,009	18.515	21 491	21,076
Investment Income Tax Subsidies (Except for GO Bond Subsidies)	. esta a constante					
Tax Subsidies for GO Bonds	504	(1:068)	651	968	(416)	373
Interest Expense (Governmental Providers Only)	(107,818)	(224.170)	(100,543)	(99,489)	(105,292)	(100;209)
Other Non-Operating Revenue/(Expenses)	35,905	2,594,222	10,804	1,422	91,220	158,344
Total Non Operating Revenue/(Expense)	(\$54,993)	\$2,407,206	\$85,921	(\$78,584)	\$7,003	\$79,583
Total Net Surplue/(Loss)	\$791,181	\$489,251	\$178,935	\$201,476	(\$659,361)	(\$67,187)
- Change in Unrealized Gains/(Losses) on Investments						
Increase/(Decrease In Unrestricted Net Assets	\$791,181	\$489,251	\$178,938	\$201,476	(\$550,351)	(\$67,187)
Operating Margin	10.16%	-35.01%	1.27%	3.69%	-7.64%	-1.99%
Total Profit Margin	9.60%	8.93%	2.44%	2.65%	-7.54%	-0.91%
EBIDA	16.83%	-24.64%	8.73%	10.92%	-0.19%	5.52%

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Actual 1/31/2020	Actual 12/31/2019	Actual 11/30/2019	Actual 10/31/2019	Actual 9/30/2019	Actual 8/31/2019	Actual 7/31/2019
\$3,543,613	\$2,709,104	\$2,982,847	\$3,144,192	\$2,730,901	\$2,726,154	\$2,923,619
\$10,775,879	\$10,812,548	\$9,944,805	\$10,345,137	\$10,230,467	\$10,859,314	\$10,734,465
\$1,485,917	\$1,143,776	\$1,063,719	\$1,354,373	\$1,165,206	\$1,275,579	\$1,191.478
\$247,493	\$269,431	\$809,619	\$313,861	\$204,888	\$202,768	\$15,007,493
\$16,052,901	\$14,934,858	\$14,300,990	\$15,157,564	\$14,331,462	\$15,063,815	\$10,007,493
\$7,065,871	\$5,867,948	\$5,637,701	\$6,692,232	\$6,032,602	\$6,515,178	\$7,139,232
\$746,898	\$857,280	\$724,785	\$797,098	\$1,180/264	\$992,458	\$1,016,936
(\$48,587)	\$453,298	\$492,120 6.854.586	\$166,667 7,655,997	3114,653 7,327,518	\$173,200 7,680,836	\$200,053 8,356,223
7,764,182	7,178,528	0,034,000	1,000,001	7,021,010	1,000,000	olocatione
\$8,288,719	\$7,756,331	\$7,446,403	\$7,501,567	\$7,003,944	\$7,382,978	\$6,651,270
274,722	321,846	168,314	286,120	195,787	196,885	207,641
8,563,441	8,078,178	7,614,717	7,787,687	7,199,731	7,679,864	6,858,911
Checkland				p-		
		00 000 740	P9 204 907	\$3,189,351	\$3,150,410	\$3,024,639
\$3,210,137	\$3,353,001 \$935,213	\$3,302,746 \$982,139	\$3,394,397 \$1,014,021	\$879,652	\$970,094	\$695.692
\$1.012,357 \$75,137	\$52,546	\$115,454	\$65,915	\$121.333	\$131,399	\$146,497
\$297,440	\$377.567	\$277,808	\$442,922	\$336,815	\$341,822	\$365,232
\$450,562	\$389,987	\$420,497	\$408,071	\$430;288	\$382,855	\$411,362
\$1,171,456	\$1,299,752	\$992,804	\$1,260,326	\$1,072,316	\$1,280,524	\$1,221,495
\$91,522	\$98,722	\$105,485	\$96,172	\$101,061	\$95,614	\$98,218
\$504,386	\$427,780	\$434,367	\$428,532	\$461,821	\$403,366	\$409,417
\$56,143	\$52,652	\$52,682	\$53,986	\$54,483 \$151,438	\$52;027 \$175,292	\$58,574 \$196,139
\$77;309	\$231,240	\$178,692	\$210,413	a.ta 17650	4370,40L	101001000
\$76,381	\$72,943	\$63;881	\$83,781	\$46,560	\$88,974	\$91,340
\$559,141	\$559,157	\$564,202	\$563,653	\$565,315	\$567,122	\$561,039
\$7,532,059	\$7,850,560	\$7,508,757	\$8,020,168	\$7,410,433	\$7,638,101	\$7,279,846
	4407 040	P408 (010)	(78 × 18)	(6210,703)	(\$58,237)	(\$4/28)7(35)
\$991,382	\$227,618	\$105,960	(0202;401)	(Weinerine)	A second s	
19,081	17,625	39,088	32,300	20,296	22,692	19,116
10014.0.1				1000	6 840	1 200
249	1,148	9,170	(2.103)	265 (107:630)	3,51 3 (99,323)	(99,633)
(400,275) 26,889	(408,725) 156,527	(99,688) 50,253	(99,514) 56,224	101,757	114,858	28,255
(\$54;057)	\$66,675	(\$1,377)	(\$13,693)	\$14,687	\$41,738	(\$50,834)
					(\$15,499)	(\$471,669)
\$927,325	\$294,193	\$104,583	(\$245,674);	(\$186;016)	(Provide)	No. 10. 10. 10. 10.
			100120070	R. B. M.	#VALUE!	(\$4147,369)
\$927,325	\$294,193	\$104,583	(\$245,5(4)	(\$496;018)	#VALUE!	fauts: 48thingk
11.46%	2.82%	1.39%	-2.99%	-2.93%	-0.77%	-6.13%
10.83%	3.64%	1.37%	-3.15%	-2.72%	-0.22%	-6.88%
17.99%	9.74%	8.80%	4.25%	4.93%	6.71%	2.05%

Statement of Revenue and Expense - 13 Month Trend MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WY

	Actual 7/31/2020	Actual 6/30/2020	Actual 5/31/2020	Actual 4/30/2020	Actual 3/31/2020	Actual 2/29/2020
Gross Patient Revenue						
Inpatient Revenue	\$3,256,010	\$2,923,872	\$2,863,837	\$2,794,519	\$2,777,538	\$2,722,682
Inpatient Psych/Rehab Revenue		A0.000 000	00.400 749	69 404 000	\$10,336,977	\$10,746,705
Outpatient Revenue	\$1,305,508	\$9;853;890 \$1,291,505	\$8,483,713 \$1,146,816	\$8,104,600 \$1,146,806	\$984,201	\$1,181,210
Clinic Revenue	\$414,478	\$281,911	\$314,858	\$288,932	\$244,806	\$262,865
Specially Clinic Revenue Total Gross Patient Revenue	\$16,636,529	\$14,350,879	\$12,781,224	\$12,334,856	\$14,343,521	\$14,893,661
Deductions From Revenue	\$7,857,728	\$5,980,628	\$5,186,139	\$5,565,060	\$6,081,666	\$6,619,613
Discounts and Allowances Bed Debt Expense (Governmental Providers Only)	\$583,202	\$1,101,340	\$1,256,071	\$1,158,759	\$813,846	\$837,619
Charity Care	\$84,822	\$194,709	\$55,091	\$87,459	\$264,093	\$182,758
Total Deductions From Revenue	8,525,752	7,253,676	6,497,301	6,811,278	7,159,605	7,639,991
Net Patient Revenue	\$8,110,777	\$7,094,203	\$6,283,923	\$5,523,578	\$7,183,916	\$7,253,671
Other Operating Revenue	220,205	(1.616,588)	1,046,148	2,076,262	231,037	125,809
Total Operating Revenue	8,330,982	5,477,815	7,330,071	7,699,840	7,414,953	7,379,569
Operating Expenses						
Selaries and Wages	\$3,283,126	\$3,165,595	\$3,315,414	\$3,149,585	\$3,411,912	\$3,348,166
Fringe Benefils	\$894,212	\$854,214	\$888,042	\$920,695	\$933,298	\$895,130
Contract Labor	\$56,158	\$10,676	\$26,130	\$46,076	\$49,003	\$41,291 \$411,317
Physicians Fees	\$281,292	\$334,073	\$316,372 \$385,944	\$338,295 \$361,428	\$366,453 \$485,887	\$322,523
Purchased Services	\$448,335 \$1,242,081	\$503,898 \$1,138,393	\$1,008,570	\$1,156,916	\$1,321,818	\$1,176,617
Supply Expense	\$103,746	\$88,251	\$102.274	\$89,337	\$84,093	\$87,382
Utilities Repairs and Maintenance	\$399,665	\$426,595	\$462,934	\$444,768	\$446,244	\$420,693
Insurance Expense	\$16,263	\$44,527	\$43,428	\$47,455	\$54,984	\$59,739
All Other Operating Expenses	\$140,868	\$211,587	\$91,828	\$149,169	\$208,356	\$141,853
Bad Debt Expense (Non-Governmental Providers)					600.000	007 000
Leases and Rentals	\$63,328	\$49,303	\$49,189	\$64,204	\$66,908 \$552,321	\$67,609 \$554,019
Depreciation and Amortization	\$555,840	\$568,459	\$546,931	\$549,855	4004.04	40049010
Interest Expense (Non-Governmental Providers) Total Operating Expenses	\$7,484,808	\$7,395,571	\$7,237,056	\$7,319,780	\$7,981,317	\$7,526,339
			600 04F	\$280,060	(\$566,364)	(6136.770)
Net Operating Surplus/(Loss)	\$846,174	(\$1,917,958)	\$92,015	9200,000	(anno port	An Island a set
Non-Operating Revenue:						
Contributions				10.010	54 484	21.976
Investment income	16,355	35,221	175,009	18,515	21,491	61,575
Tax Subsidies (Except for GO Bond Subsidies)	564	(1.068)	651	965	((16)	373
Tax Subsidies for GO Bonds Interest Expanse (Governmental Providers Only)	(107,816)	(221,170)	(109,543)	965 (99,489)	(105,292)	(100-209)
Other Non-Operating Revenue/(Expenses)	30,905	2,594,222	10,804	1 422	91,220	158,344
Total Non Operating Revenue/(Expense)	(\$54,993)	\$2,407,208	\$85,921	(\$7.8,684)	\$7,003	\$79,583
Total Net Surplus/(Loas)	\$791,181	\$489,251	\$178,936	\$201,476	(\$659,361)	(\$67,187)
Change in Unrealized Gains/(Losses) on Investments						
Increase/Decrease in Unrestricted Net Assets	\$791,181	\$489,251	\$178,936	\$201,476	(\$868,361)	(\$67,187)
Operating Margin Total Profit Margin EBIDA	10.16% 9.50% 16.83%	-35.01% 8.93% -24.64%	1.27% 2.44% 8.73%	3.69% 2.65% 10.92%	-7.64% -7.54% -0.19%	-1.99% -0.91% 5.52%

Actual 1/31/2020	Actual 12/31/2019	Actual 11/30/2019	Actual 19/31/2019	Actual 9/30/2019	Actual 8/31/2019	Actual 7/31/2019
\$3,543,813	\$2,709,104	\$2,982;847	\$3,144,192	\$2,730,901	\$2,726,154	\$2,923,619
\$10,775,879	\$10,812,548	\$9,944,805	\$10;345,137	\$10,230,467	\$10,859,314	\$10,734,465
\$1,485,917	\$1,143,776	\$1,063,719	\$1,354,373	\$1,185,206	\$1,275,579	\$1,191,476
\$247,493	\$269,431	\$309,619	\$315,861 \$15,157,564	\$204,888 \$14,331,462	\$202,768 \$15,063,815	\$15,007,493
\$16,052,901	\$14,934,858	\$14,300,990	\$10,107,004	919,001,402	\$10,000,010	010/001/100
\$7.065.871	\$5,867,948	\$5,637,701	\$6,692,232	\$6,032,602	\$6,515,178	\$7,139,232
\$746,898	\$857,280	\$724,765	\$797,098	\$1,180,264	\$992,458	\$1,016,93
(\$48,587)	\$453,298	\$492,120	\$168,667	\$114;653	\$173,200	\$200.05
7,764,182	7,178,526	6,854,586	7,655,997	7,327,518	7,680,836	8,356,223
\$8,288,719	\$7,756,331	\$7,446,403	\$7,501,567	\$7,003,944	\$7,382,978	\$6,651,270
274,722	321,846	168,314	286,120	195,787	196,885	207,64
8,663,441	8,078,178	7,814,717	7,787,087	7,199,731	7,579,864	6,858,91
\$3,210,137	\$3,353,001	\$3.302.746	\$3,394,397	\$3,189,351	\$3,150,410	\$3,024,63
\$1,012,357	\$935,213	\$982,139	\$1,014,021	\$879,652	\$970,094	\$695,69
\$75,137	\$52,546	\$115,454	\$65,915	\$121,333	\$131,399	\$146,49
\$297,440	\$377,567	\$277,808	\$442,922	\$336,815 \$430,288	\$341,822 \$382,855	\$365,23 \$411,36
\$450,562	\$369,987	\$420,497	\$408;071 \$1,260,326	\$1,072,318	\$1,280,524	\$1,221,49
\$1,171,456	\$1,299,752 \$98,722	\$992,804 \$105,485	\$96,172	\$101.081	\$95,614	\$98,21
\$91,522 \$504,386	\$427,780	\$434,387	\$428,532	\$461,821	\$403,366	\$409,41
\$56,143	\$52,652	\$52,682	\$53,986	\$54,483	\$52,627	\$58,57
\$77,399	\$231,240	\$176,692	\$210,413	\$151,438	\$175,292	\$196,13
\$76,381	\$72.943	\$83,881	\$83,761	\$46,560	\$86,974	\$91,34
\$559,141	\$559,157	\$564,202	\$563,653	\$565,315	\$567,122	\$561,03
\$7,582,059	\$7,850,560	\$7,505,767	\$8,020,108	\$7,410,433	\$7,638,101	\$7,279,64
\$951,382	\$227,618	\$105,980	(\$201,401)	(\$230,303)	(\$58,237)	(\$32978
19,081	17,625	39,088	32,300	20,296	22,692	19,11
249	1,148	9,170	(2,103)	265	3,513	142
(100,275)	(108,725)	(886;69)	(99,514) 56,224	(107;630) 101,767	(99,323) 114,656	(09,63
26,889 (\$54,057)	156,527 \$66,575	<u>50,253</u> (\$1,377)	(\$13,093)	\$14,687	\$41,738	(\$50,85
\$927,325	\$294,193	\$104,583	(\$245.574)	·(\$199;01 <u>5)</u> .	(616,499)	(\$471,6)

-	\$927,326	\$294,193	\$104,583	(\$245:574)	(\$196,016)	#VALUE!	(\$474,569)
	11.46%	2.82%	1.39%	-2.99%	-2.93%	-0.77%	-6.13%
	10.83%	3.64%	1.37%	-3.15%	-2.72%	-0.22%	-6.88%
	17.99%	9.74%	8.80%	4.25%	4.93%	6.71%	2.05%

Statement of Cash Flows

MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WY

One month ended July 31, 2020

CASH FLOWS FROM OPERATING ACTIVITIES: Net Income (Loss) Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities: Depreciation (Increase)/Decrease in Net Patient Accounts Receivable (Increase)/Decrease in Other Receivables (Increase)/Decrease in Inventories (Increase)/Decrease in Inventories (Increase)/Decrease in Other Current Assets Increase/(Decrease) in Accounts Payable Increase/(Decrease) in Accrued Payroll and Benefits Increase/(Decrease) in Accrued Expenses Increase/(Decrease) in Accrued Expenses Increase/(Decrease) in Patient Refunds Payable Increase/(Decrease) in Third Party Advances/Liabilities Increase/(Decrease) in Other Current Liabilities Increase/(Decrease) in Other Current Liabilities	urrent Ionth 1/2020 \$791,181	Current Year-To-Date 7/31/2020
Net Income (Loss) Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities: Depreciation (Increase)/Decrease in Net Patient Accounts Receivable (Increase)/Decrease in Other Receivables (Increase)/Decrease in Other Receivables (Increase)/Decrease in Inventories (Increase)/Decrease in Pre-Paid Expenses (Increase)/Decrease in Other Current Assets Increase/(Decrease) in Accounts Payable Increase/(Decrease) in Accrued Payroll and Benefits Increase/(Decrease) in Accrued Expenses Increase/(Decrease) in Patient Refunds Payable Increase/(Decrease) in Patient Refunds Payable Increase/(Decrease) in Other Current Liabilities Increase/(Decrease) in Other Current Liabilities Increase/(Decrease) in Other Current Liabilities	\$791,181	
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities: Depreciation (Increase)/Decrease in Net Patient Accounts Receivable (Increase)/Decrease in Other Receivables (Increase)/Decrease in Inventories (Increase)/Decrease in Pre-Paid Expenses (Increase)/Decrease in Other Current Assets Increase/(Decrease) in Accounts Payable Increase/(Decrease) in Accounts Payable Increase/(Decrease) in Accrued Payroll and Benefits Increase/(Decrease) in Accrued Expenses Increase/(Decrease) in Patient Refunds Payable Increase/(Decrease) in Patient Refunds Payable Increase/(Decrease) in Other Current Liabilities Increase/(Decrease) in Other Current Liabilities Increase/(Decrease) in Other Current Liabilities		\$791,181
Depreciation (Increase)/Decrease in Net Patient Accounts Receivable (Increase)/Decrease in Other Receivables (Increase)/Decrease in Inventories (Increase)/Decrease in Pre-Paid Expenses (Increase)/Decrease in Other Current Assets Increase/(Decrease) in Accounts Payable Increase/(Decrease) in Notes and Loans Payable Increase/(Decrease) in Accrued Payroll and Benefits Increase/(Decrease) in Accrued Expenses Increase/(Decrease) in Patient Refunds Payable Increase/(Decrease) in Third Party Advances/Liabilities Increase/(Decrease) in Other Current Liabilities Increase/(Decrease) in Other Current Liabilities		
(Increase)/Decrease in Net Patient Accounts Receivable (Increase)/Decrease in Other Receivables (Increase)/Decrease in Inventories (Increase)/Decrease in Pre-Paid Expenses (Increase)/Decrease in Other Current Assets Increase/(Decrease) in Accounts Payable Increase/(Decrease) in Notes and Loans Payable Increase/(Decrease) in Accrued Payroll and Benefits Increase/(Decrease) in Accrued Expenses Increase/(Decrease) in Patient Refunds Payable Increase/(Decrease) in Third Party Advances/Liabilities Increase/(Decrease) in Other Current Liabilities Increase/(Decrease) in Other Current Liabilities		FFF 040
(Increase)/Decrease in Other Receivables (Increase)/Decrease in Inventories (Increase)/Decrease in Pre-Paid Expenses (Increase)/Decrease in Other Current Assets Increase/(Decrease) in Accounts Payable Increase/(Decrease) in Notes and Loans Payable Increase/(Decrease) in Accrued Payroll and Benefits Increase/(Decrease) in Accrued Expenses Increase/(Decrease) in Accrued Expenses Increase/(Decrease) in Patient Refunds Payable Increase/(Decrease) in Third Party Advances/Liabilities Increase/(Decrease) in Other Current Liabilities Increase/(Decrease) in Other Current Liabilities	555,840	555,840
(Increase)/Decrease in Inventories (Increase)/Decrease in Pre-Paid Expenses (Increase)/Decrease in Other Current Assets Increase/(Decrease) in Accounts Payable Increase/(Decrease) in Notes and Loans Payable Increase/(Decrease) in Accrued Payroll and Benefits Increase/(Decrease) in Accrued Expenses Increase/(Decrease) in Accrued Expenses Increase/(Decrease) in Patient Refunds Payable Increase/(Decrease) in Third Party Advances/Liabilities Increase/(Decrease) in Other Current Liabilities Increase/(Decrease) in Other Current Liabilities	1,304,028)	(1,304,028)
(Increase)/Decrease in Pre-Paid Expenses (Increase)/Decrease in Other Current Assets Increase/(Decrease) in Accounts Payable Increase/(Decrease) in Notes and Loans Payable Increase/(Decrease) in Accrued Payroll and Benefits Increase/(Decrease) in Accrued Expenses Increase/(Decrease) in Patient Refunds Payable Increase/(Decrease) in Third Party Advances/Liabilities Increase/(Decrease) in Other Current Liabilities Increase/(Decrease) in Other Current Liabilities	(185,324)	(185,324)
(Increase)/Decrease in Other Current Assets Increase/(Decrease) in Accounts Payable Increase/(Decrease) in Notes and Loans Payable Increase/(Decrease) in Accrued Payroll and Benefits Increase/(Decrease) in Accrued Expenses Increase/(Decrease) in Patient Refunds Payable Increase/(Decrease) in Third Party Advances/Liabilities Increase/(Decrease) in Other Current Liabilities Increase/(Decrease) in Other Current Liabilities	(1,179)	(1,179) (284,502)
Increase/(Decrease) in Accounts Payable Increase/(Decrease) in Notes and Loans Payable Increase/(Decrease) in Accrued Payroll and Benefits Increase/(Decrease) in Accrued Expenses Increase/(Decrease) in Patient Refunds Payable Increase/(Decrease) in Third Party Advances/Liabilities Increase/(Decrease) in Other Current Liabilities Increase/(Decrease) in Other Current Liabilities	(284,502)	(204,002)
Increase/(Decrease) in Notes and Loans Payable Increase/(Decrease) in Accrued Payroll and Benefits Increase/(Decrease) in Accrued Expenses Increase/(Decrease) in Patient Refunds Payable Increase/(Decrease) in Third Party Advances/Liabilities Increase/(Decrease) in Other Current Liabilities Net Cash Provided by Operating Activities:	85,124	85,124
Increase/(Decrease) in Accrued Payroll and Benefits Increase/(Decrease) in Accrued Expenses Increase/(Decrease) in Patient Refunds Payable Increase/(Decrease) in Third Party Advances/Liabilities Increase/(Decrease) in Other Current Liabilities Net Cash Provided by Operating Activities:	00,124	00,124
Increase/(Decrease) in Accrued Expenses Increase/(Decrease) in Patient Refunds Payable Increase/(Decrease) in Third Party Advances/Liabilities Increase/(Decrease) in Other Current Liabilities Net Cash Provided by Operating Activities:	278,255	278,255
Increase/(Decrease) in Patient Refunds Payable Increase/(Decrease) in Third Party Advances/Liabilities Increase/(Decrease) in Other Current Liabilities Net Cash Provided by Operating Activities:	210,200	210,200
Increase/(Decrease) in Third Party Advances/Liabilities Increase/(Decrease) in Other Current Liabilities Net Cash Provided by Operating Activities:	0	Û Û
Increase/(Decrease) in Other Current Liabilities Net Cash Provided by Operating Activities:	Ő	Õ
Net Cash Provided by Operating Activities:	111,625	111,625
	46,992	46,992
CASH FLOWS FROM INVESTING ACTIVITIES:		
Purchase of Property, Plant and Equipment	(403,906)	(403,606)
(Increase)/Decrease in Limited Use Cash and Investments	(113,391)	(113,391)
(Increase)/Decrease in Other Limited Use Assets	(3,489)	(3,489)
(Increase)/Decrease in Other Assets	1,029	1,029
Net Cash Used by Investing Activities	(519,456)	(519,456)
CASH FLOWS FROM FINANCING ACTIVITIES: Increase/(Decrease) in Bond/Mortgage Debt	(4,812)	(4,812)
Increase/(Decrease) in Capital Lease Debt	0	0
Increase/(Decrease) in Other Long Term Liabilities	(27.447)	(27,447)
Net Cash Used for Financing Activities	(32,259)	(32,259)
(INCREASE)/DECREASE IN RESTRICTED ASSETS	0	0
Net Increase/(Decrease) in Cash		(504,723)
Cash, Beginning of Period1	(504,723)	
Cash, End of Period \$1	(504,723) 2,052,717	12,052,717

Patient Statistics MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WY One month ended July 31, 2020

	Curren	t Month				Year-Te	o-Date	
	Guilton	Positive/	Prior				Positive/	Prior
Actual 07/31/20	Budget 07/31/20	(Negative) Variance	Year 07/31/19	STATISTICS	Actual 07/31/20	Budget 07/31/20	(Negative) Variance	Year 07/31/19
				Discharges				
120	119	1	132	Acute	120	119	1	132
120	119	1	132	Total Adult Discharges	120	119	1	132
46	32	14	36	Newborn	46	32	14	36
166	151	15	168	Total Discharges	166	151	15	168
100	101		100	Patient Days:				
332	306	26	340	Acute	332	306	26	340
332	306	26	340	Total Adult Patient Days	332	306	26	340
58	53	5	59	Newborn	58	53	5	59
390	359	31	399	Total Patient Days	390	359	31	399
000	000			Average Length of Stay (ALOS)				
2.8	2.6	0.2	2.6	Acute	2.8	2.6	0.2	2.6
2.8	2.6	0.2	2.6	Total Adult ALOS	2.8	2.6	0.2	2.6
1:3	1.6	(0:4)	1.6	Newborn ALOS	1.3	1.6	10:4)	1.6
1.9	1.0	for it		Average Daily Census (ADC)				
10.7	9,9	0.8	11.0	Acute	10.7	9.9	0.8	11.0
10.7	9.9	0.8	11.0	Total Adult ADC	10.7	9.9	0.8	11.0
1.9	9.5 1.7	0.2	1.9	Newborn	1.9	1.7	0.2	1.9
,				Emergency Room Statistics				
125	138	(13)	153	ER Visits - Admitted	125	138	(13)	153
1,088	1,161	(73)	1,290	ER Visits - Discharged	1,088	1,161	(73)	1,290
1,213	1,299	(86)	1,443	Total ER Visits	1,213	1,299	(86)	1,443
10.31%	10.60%	(00)	10.60%	% of ER Visits Admitted	10.31%	10.60%		10.60%
104.17%	115.91%		115.91%	ER Admissions as a % of Total	104.17%	115.91%		115.91%
1011111				Outpatient Statistics:				
9,075	6,795	2,280	7,550	Total Outpatients Visits	9,075	6,795	2,280	7,550
113	122	(9)	135	Observation Bed Days	113	122	(9)	135
3,996	4,593	(597)	4,060	Clinic Visits - Primary Care	3,996	4,593	(597)	4,060
637	545	92	428	Clinic Visits - Specialty Clinics	637	545	92	428
26	27	(1)	30	IP Surgeries	26	27	(1)	30
152	135	17	150	OP Surgeries	152	135	17	150
				Productivity Statistics:				
413.73	432.61	(18.88)	402.74	FTE's - Worked	413.73	432.61	(18.88)	402.74
457.43	475.40	(17.97)	460.51	FTE's - Paid	457.43	475.40	(17:97)	460.51
1.5081	1.5081	0.00	1.2903	Case Mix Index -Medicare	1,5081	1.5081	0.00	1.2903
1.0809	0.6876	0.39	0.7640	Case Mix Index - All payers	1.0809	0.6876	0.39	0.7640

Accounts Receivable Tracking Report MEMORIAL HOSPITAL OF SWEETWATER COUNTY PAGE 12 ROCK SPRINGS, WY 07/31/20

	Current Month <u>Actual</u>	Current Month <u>Target</u>
Gross Days in Accounts Receivable - All Services	52.44	52.1 1
Net Days in Accounts Receivable	47.96	47.65
Number of Gross Days in Unbilled Revenue	2.52	3.0 or <
Number of Days Gross Revenue in Credit Balances	0.00	< 1.0
Self Pay as a Percentage of Total Receivables	31.73%	N/A
Charity Care as a % of Gross Patient Revenue - Current Month Charity Care as a % of Gross Patient Revenue - Year-To-Date	0.51% 0.51%	1.39% 1.39%
Bad Debts as a % of Gross Patient Revenue - Current Month Bad Debts as a % of Gross Patient Revenue - Year-To-Date	3.51% 3.51%	7.62% 7.62%
Collections as a Percentage of Net Revenue - Current Month Collections as a Percentage of Net Revenue - Year-To-Date	82.98% 82.98%	100% or > 100% or >
Percentage of Blue Cross Receivable > 90 Days	10.22%	< 10%
Percentage of Insurance Receivable > 90 Days	10.56%	< 15%
Percentage of Medicaid Receivable > 90 Days	13.34%	< 20%
Percentage of Medicare Receivable > 60 Days	3.35%	< 6%

Variance Analysis MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WYOMING One month ended July 31, 2020

Monthly Variances in excess of \$10,000 as well as in excess of 10% explained below. Year-To-Date Variances in excess of \$30,000 as well as in excess of 5% explained below.

	Current	Current Month		te
	Amount	%	Amount	%
Gross Patient Revenue	2,617,724	18.67%	2,617,724	18.67%
Gross patient revenue is over budge budget include ER visits. Average Daily Census is 10.7 in July			ate. Patient statistics	under
Deductions from Revenue	(1,104,599)	-44:88%	(1,104,599)	-14.88%
Deductions from revenue are over be They are currently booked at 51.2% closely each month and fluctuates b	for July and 51.2% year to	date. This nu	mber is monitored	s.
Bad Debt Expense	484,905	45.40%	484,905	45.40%
Bad debt expense is booked at 3.5%	for July and 3.5% year to	date.		
Charlty Care	110,103	56.48%	110,103	56.48%
Charity care yields a high degree of Patient Financial Services evaluates appropriate in accordance with our C	accounts consistently to d	h and is deper etermine when	ndent on patient need charity adjustments	ds. are
Patient Financial Services evaluates appropriate in accordance with our C	accounts consistently to d	h and is deper etermine when -65.29%	ident on patient need charity adjustments (433,048)	ds. are -66.29%
Patient Financial Services evaluates appropriate in accordance with our C	accounts consistently to d Charity Care Policy. (433;046) budget for the month and is	etermine when -66.29%: under budget	(433,046) year to date.	are
Patient Financial Services evaluates appropriate in accordance with our C Other Operating Revenue Other Operating Revenue is under b This is due to the CARES funds bud	accounts consistently to d Charity Care Policy. (433;046) budget for the month and is	etermine when -66.29%: under budget	(433,046) year to date.	are
Patient Financial Services evaluates appropriate in accordance with our C Other Operating Revenue Other Operating Revenue is under b This is due to the CARES funds bud	accounts consistently to d Charity Care Policy. (433,046) oudget for the month and is geted here, but now have t (72,589)	etermine when -66.29% under budget o be reported i -2.26%	(433,046) year to date.	are
Patient Financial Services evaluates appropriate in accordance with our C Other Operating Revenue Other Operating Revenue is under b This is due to the CARES funds bud Salaries and Wages	accounts consistently to d Charity Care Policy. (433,046) oudget for the month and is geted here, but now have t (72,589) and remain over budget yea	-66.29% -66.29% under budget o be reported i -2.26% ar to date.	(433,646) year to date. in non-operating.	are
Patient Financial Services evaluates appropriate in accordance with our C Other Operating Revenue Other Operating Revenue is under b This is due to the CARES funds bud Salaries and Wages Salary and Wages are over budget of Paid FTEs are under budget by 17.5	accounts consistently to d Charity Care Policy. (433,046) oudget for the month and is geted here, but now have t (72,589) and remain over budget yea	-66.29% -66.29% under budget o be reported i -2.26% ar to date.	(433,646) year to date. in non-operating.	are
Patient Financial Services evaluates appropriate in accordance with our C Other Operating Revenue Other Operating Revenue is under b This is due to the CARES funds bud Salaries and Wages Salary and Wages are over budget a	accounts consistently to d Charity Care Policy. (433;046) budget for the month and is geted here, but now have t (72;569) and remain over budget yes 07 FTEs for the month and 109,387	etermine when -66.29% under budget o be reported i -2.26% ar to date. under 17.97 F 10.90%	(433,046) year to date. in non-operating. (72,569) TEs year to date. 109,387	are -66.29%

Behavioral Health, OR and Ultrasound are over budget for the month.

Variance Analysis MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WYOMING One month ended July 31, 2020

Monthly Variances in excess of \$10,000 as well as in excess of 10% explained below. Year-To-Date Variances in excess of \$30,000 as well as in excess of 5% explained below.

	Current Month		Year-to-Date Amount	•/	
	Amount	/8	Amount	59	
Physician Fees	(7,328)	-2:67%	(7,328)	-2.67%	
Physician fees are over budget in July and Rad Onc, Locums and Locums Clinic are ov	over budget year to c ver budget in July.	late.			
Purchased Services	5,946	1.31%	5,946	1.31%	
Purchased services are under budget for Ju Expenses over budget are other purchased	ly and under budget services	year to date.			
Supply Expense	17,543	1.39%	17,543	1.39%	
Supplies are under budget for July and und Other med/surg supplies and other non me	er budget year to da d/surg supplies	te. Line items	over budget include		
Repairs & Maintenance	55,772	12.25%	55,772	12.25%	
Repairs and Maintenance are under budge	t for July and under I	oudget year to	date.		
All Other Operating Expenses	33,023	18.99%	33,023	18.99%	
This expense is under budget in July and u License & Taxes, Freight and Pharmacy Fi	nder budget year to por Direct.	date. Other ex	penses over budget :	are	
Leases and Rentals	(4,330)	-2.45%	(1,330)	-2:15%	
This expense is over budget for July and is	over budget year to	date.			
Depreciation and Amortization	18,032	3.14%	18,032	3.14%	
Depreciation is under budget for July and it	s under budget year	to date.			
BALANCE SHEET Cash and Cash Equivalents	(\$504;723)	-4.19%			
Cash decreased in July. Cash collections f increased to 222.04 days.	or July were \$6.7 mi	llion. Days Ca	sh on Hand		
Gross Patient Accounts Receivable	\$2,344,787	10.37%			
This receivable increased in July due high	revenue in July.				

Variance Analysis MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WYOMING One month ended July 31, 2020

Monthly Variances in excess of \$10,000 as well as in excess of 10% explained below. Year-To-Date Variances in excess of \$30,000 as well as in excess of 5% explained below.

	Current Amount	Month %	Year-to-Da Amount	te %
Physician Fees	(7, 328)	-2.67%	(7,328)	-2.67%
Physician fees are over budget in July and o Rad Onc, Locums and Locums Clinic are ov	over budget year to o er budget in July.	date.		
Purchased Services	5,946	1.31%	5,946	1.31%
Purchased services are under budget for Ju Expenses over budget are other purchased	ly and under budgel services	t year to date.		
Supply Expense	17,543	1.39%	17,543	1.39%
Supplies are under budget for July and under Other med/surg supplies and other non med	er b udge t year to da I/surg supplies	te. Line items	over budget include	
Repairs & Maintenance	55,772	12.25%	55,772	12.25%
Repairs and Maintenance are under budget	for July and under I	budget year to	date.	
All Other Operating Expenses	33,023	18.99%	33,023	18.99%
This expense is under budget in July and ur License & Taxes, Freight and Pharmacy Flo	nder budget year to o or Direct.	date. Other ex	penses over budge	t are
Leases and Rentais	(1,330)	-2.45%	(1,330)	-2.45%
This expense is over budget for July and is	over budget year to	date.		
Depreciation and Amortization	18,032	3.14%	18,032	3.14%
Depreciation is under budget for July and is	under budget year	to date.		
BALANCE SHEET Cash and Cash Equivalents	(\$504,723)	-4:19%		
Cash decreased in July. Cash collections fo increased to 222.04 days.	or July were \$6.7 mil	llion. Days Ca	sh on Hand	
Gross Patient Accounts Receivable	\$2,344,787	10.37%		
This receivable increased in July due high r	evenue in July.			



MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WY

PHYSICIAN CLINICS

Unaudited Financial Statements

for

One month ended July 31, 2020

Certification Statement:

To the best of my knowledge, I certify for the hospital that the attached financial statements do not contain any untrue statement of a material fact or omit to state a material fact that would make the financial statements misleading. I further certify that the financial statements present in all material respects the financial condition and results of operation of the hospital and all related organizations reported herein.

Certified by:

Tami Love

Chief Financial Officer

Table of ContentsMEMORIAL HOSPITAL OF SWEETWATER COUNTYPAGE 1ROCK SPRINGS, WYOne month ended July 31, 2020

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Key Financial Ratios MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WY One month ended July 31, 2020

PAGE 2

- DESIRED POSITION IN RELATION TO BENCHMARKS AND BUDGET

		Month to Date 7/31/2020	Year to Date 7/31/2020	Prior Fiscal Year End 06/30/20	MGMA Hospital Owned Rural
Profitability: Operating Margin Total Profit Margin Contractual Allowance %	1 1 1 1	-34.07% -34.07% 44.89%	-34.07% -34.07% 44.89%	-68.15% -68.15% 46.02%	-36.58% -36.58%
Liquidity: Net Days in Accounts Receivable Gross Days in Accounts Receivable	Ф Ф	39.52 45.85	44.05 50.61	50.83 54.32	39.58 72.82
Productivity and Efficiency: Patient Visits Per Day Total Net Revenue per FTE Salary Expense per Paid FTE Salary and Benefits as a % of Net Revenue Employee Benefits %	£	128.90 N/A N/A 111.31% 16.51%	128.90 \$174,744 \$166,945 111.31% 16.51%	132.42 \$141,843 \$162,294 134.65% 17.69%	91.26% 6.10%

Statement of Revenue and Expense MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WY One month ended July 31, 2020

	CURRENT MONTH						
	Actual 07/31/20	Budget 07/31/20	Positive (Negetive) Variance	Percentage Variance	Prior Year 07/31/19		
Gross Patient Revenue	4 965 500	988,792	376,716	38.10%	1,191,478		
Clinic Revenue	1,365,508		152,341	58.11%	157,931		
Specialty Clinic Revenue Total Gross Patient Revenue	414,478	262,137 1,250,929	529,057	42.29%	1,349,408		
		657					
Deductions From Revenue	(799,056)	(578,460)	(220,597)	-38,14%	(607,658)		
Discounts and Allowances	(799,056)	(578,460)	(220,697)	-38.14%	(607,658)		
Total Deductions From Revenue		.131.0,460	(decta, el d'A.)	-00.1476			
Net Patient Revenue	980,930	672,469	308,461	45.87%	741,750		
Other Operating Revenue	72,653	67,787	4,865	7.18%	73,791		
Total Operating Revenue	1,053,583	740,257	313,326	42.33%	815,541		
Operating Expenses							
Salaries and Wages	1,006,558	958,290	(48,268)	-5.04%	950,020		
Fringe Benefits	166,187	223,306	57,119	25.58%	132,895		
Contract Labor	0	0	0	0.00%	0		
Physicians Fees	76,774	86,067	9,292	10.80%	35,025		
Purchased Services	10,752	10,328	(424)	-4.10%	8,118		
Supply Expense	18,937	17,144	(1,793)	-10.46%	28,401		
Utilities	1,288	1,747	459	26.26%	838		
Repairs and Maintenance	20,741	23,235	2,494	10.73%	21,102		
insurance Expense	11,873	18,855	6,981	37.03%	19,281		
All Other Operating Expenses	77,807	61,438	(16,368)	-26.64%	79,997		
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0		
Leases and Rentals	3,141	2,980	(161)	- <u>5</u> .40%	2,526		
Depreciation and Amortization	18,488	18,155	(383)	-1.84%	22,019		
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0		
Total Operating Expenses	1,412,545	1,421,543	8,998	0.63%	1,300,222		
Net Operating Surplus/(Loss)	(358,963)	(681,287)	322,324	-47.31%	(484,681)		
	·						
Total Net Surplus/(Loss)	(\$388,963)	(\$601,287)	\$322,324	-47.31%	(\$494,681)		

Total Net Surplus/(Loss)	(stoot aas)	(app.124er)	\$J66,564	-41 10 1 /0	A STATE OF A
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease in Unrestricted Net Assets	(\$358;963)	(\$661;287)	\$322,324	-47.31%	(* 484 ,681)
Operating Margin	-34.07% -34.07%	-92.03% -92.03%			-59.43% -59.43%
Total Profit Margin EBIDA	-34.07%	-89.58%			-56.73%

Statement of Revenue and Expense MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WY One month ended July 31, 2020

	YEAR-TO-DATE						
	Actual 07/31/20	Budget 07/31/20	Positive (Negative) Variance	Percentage Variance	Prior Year 07/31/19		
Gross Patient Revenue	4 005 500	988,792	376,716	38.10%	1,191,478		
Clinic Revenue	1,365,508	· · ·	152,341	58.11%	157,931		
Specialty Clinic Revenue	414,478	262,137	529,057	42.29%	1,349,408		
Total Gross Patient Revenue	1,779,986	1,200,929	528,007		1,010,100		
Deductions From Revenue		Therefore a subscription	and an inclusion	00.4.494	(april are)		
Discounts and Allowances	(7.99,056)	(578,460)	(220,597)	-38.14%	(607;658)		
/ Total Deductions From Revenue	(799:056)	(578,460)	(220,597)	-38.14%	(607,658)		
Net Patient Revenue	980,930	672,469	308,461	45.87%	741,750		
Other Operating Revenue	72,653	67,787	4,865	7,18%	73,791		
Total Operating Revenue	1,053,583	740,257	313,326	42.33%	815,541		
Operating Expenses							
Salaries and Wages	1,006,558	958,290	(46,268)	-5.04%	950,020		
Fringe Benefits	166,187	223,306	57,119	25.58%	132,895		
Contract Labor	0	0	0	0.00%	0		
Physicians Fees	76,774	86,067	9,292	10.80%	35,025		
Purchased Services	10,752	10,328	(424)	-4.10%	8,118		
Supply Expense	18,937	17,144	(1,793)	-10.46%	28,401		
Utilities	1,288	1,747	459	26.26%	838		
Repairs and Maintenance	20,741	23,235	2,494	10.73%	21,102		
Insurance Expense	11,873	18,855	6,981	37.03%	19,281		
All Other Operating Expenses	77,807	61,438	(16,368)	-26.64%	79,997		
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0		
Leases and Rentals	3,141	2,980	(164)	-5.40%	2,526		
Depreciation and Amortization	18,488	18,155	(333)	-1.84%	22,019		
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0		
Total Operating Expenses	1,412,545	1,421,543	8,998	0.63%	1,300,222		
Net Operating Surplus/(Loss)	(358.963)	(681,287)	322,324	-47.31%	484;681		

Total Net Surplus/(Loss)	(\$356,963)	(\$681;287)	\$322,324	-47.31%	(\$484.0B1)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	.0
Increase/(Decrease) in Unrestricted Net Assets	(\$356,968)	(\$881,287)	\$322,324	-47.31%	(\$464,581)
Operating Margin Total Profit Margin EBIDA	-34.07% -34.07% -32.32%	-92.03% -92.03% -89.58%			-59.43% -59.43% -56.73%

Statement of Revenue and Expense - 13 Month Trend MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WY

_	Actual 7/31/2020	Actual 6/30/2020	Actual 5/31/2020	Actual 4/30/2020	Actual 3/30/2020
Gross Patient Revenue					0004-004
Clinic Revenue	\$1,365,508	\$1:291.506	\$1,116,816	\$1,146,806	\$984,201 \$244,806
Specially Clinic Revenue	\$414,478	\$281,911	\$314,858	\$288,932 \$1,435,737	\$1,229,007
Total Gross Patient Revenue	\$1,779,986	\$1,573,417	\$1,431,674	91,433,757	\$1,220,001
Deductions From Revenue					ACTO 000
Discounts and Allowances	\$799,066	\$736,720	\$837,461	\$713,510	\$556,603
Total Deductions From Revenue	799,056	736,720	637,461	713,510	556,603
Net Patient Revenue	\$980,930	\$836,697	\$794,213	\$722,227	\$672,404
Other Operating Revenue	\$72,653	\$77,628	\$66,375	\$32,189	\$43,725
Total Operating Revenue	1,053,583	914,325	860,588	754,416	716,129
Operating Expenses					
Salaries and Wages	\$1,006,558	\$983,977	\$979,724	\$886,494	\$1,031,014
Fringe Benefits	\$166,187	\$170,998	\$162,005	\$171,434	\$216,704
Contract Labor	50	\$0	\$9	\$0	\$0
Physicians Fees	\$76,774	\$125,801	\$119,793	\$141,169	\$180,415
Purchased Services	\$10,752	\$9,098	\$10,144	\$8,138	\$13,433
Supply Expense	\$18,937	\$10,722	\$10,730	\$7,125	\$25,468
Utilities	\$1,288	\$1,861	\$1,804	\$1,803	\$1,818
Repairs and Maintenance	\$20,741	\$24,187	\$26,489	\$23,772	\$23,881
Insurance Expense	\$11,873	\$11,873	\$17,874	\$17,874	\$17,874
All Other Operating Expenses	\$77,807	\$45,948	\$53,551	\$47,258	\$96,350
Bad Debt Expense (Non-Governmental Providers)			40.400	00 470	\$4,976
Leases and Rentals	\$3,141	\$3,083	\$2,405	\$2,476	\$21,436
Depreciation and Amortization	\$18,488	\$18,487	\$18,498	\$21,166	44 1,400
Interest Expense (Non-Governmental Providers)	A1 11A 510	A4 400 080	\$1,403,007	\$1,328,709	\$1,613,368
Total Operating Expenses	\$1,412,545	\$1,406,033	\$1,403,007	91,020,109	φ1,010,000
Net Operating Surplus/(Loss)	(\$358,903)	(\$491.708)	(\$542(419)	13.57 8.485	(5857,235)

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Total Net Surplus/(Loss)	(\$358,963)	(\$491,700)	(\$642,439)	(\$574,293)	(\$097,209)"
Change in Unrealized Gains/(Losses) on Investment	0	0	Ø	0	0
Increase/(Decrease in Unrestricted Net Assets	(\$358,963)	(\$491,708)	(\$542,419)	(\$574,298)	(\$897,239)
Operating Margin Total Profit Margin EBIDA	-34.07% -34.07% -32.32%	-53.78% -53.78% -51.76%	-63.03% -63.03% -60.88%	-76.12% -76.12% -73.32%	-125.29% -125.29% -122.30%

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Actual 2/29/2020	Actual 1/31/2020	Actual 12/31/2019	Actual 11/30/2019	Actual 10/31/2019	Actual 9/30/2019	Actual 8/31/2019	Actual 7/31/2019
104 4D4 D4D	#4 (DE 047	\$1,143,777	\$1,063,719	\$1,354,373	\$1,165,206	\$1,275,579	\$1,191,478
\$1,161,210	\$1,485,917 \$247,493	\$269,430	\$309,619	\$313,861	\$204,888	\$202.768	\$157,931
\$262,865 \$1,424,074	\$1,733,410	\$1,413,207	\$1,373,338	\$1,668,235	\$1,370,094	\$1,478,347	\$1,349,408
		6067 088	\$657,305	8768,291	\$658,181	\$637,953	\$607,650
675,312 675,312	\$757,358 757,358	\$637,085 637,085	657,305	768,291	658,181	637,953	607,658
\$748,762	\$976,052	\$776,122	\$716,033	\$899,944	\$711,913	\$840,394	\$741,750
\$64,550	\$68.061	\$64,399	\$58,298	\$79,576	\$67,413	\$68,365	\$73,791
813,312	1.044,113	840,521	774,331	979,519	779,326	908,759	815,641
		- 1651 (1650					
\$1,032,181	\$938,454	\$1,032,409	\$976,184	\$963,743	\$986,089	\$911,293	\$950,02
\$189,196	\$208,849	\$161,562	\$165,925	\$179,354	\$142,365	\$163,131	\$132,89
\$0	30	\$0	\$0	\$0	\$0	\$0	\$
\$206,558	\$118,284	\$147,283	\$72,557	\$177,148	\$46,927	\$53,872	\$35,02
\$11,304	\$12,082	\$8,426	\$10,650	\$10,397	\$10,324	\$9,505	\$8,11
\$14,825	\$19,220	\$12,817	\$20,632	\$22,796	\$27,662	\$13,686	\$28,40
\$1,891	\$1,704	\$1,713	\$877	\$910	\$1,672	\$514	\$83
\$22,274	\$20,942	\$25,840	\$17,344	\$22,617	\$20,680	\$21,820	\$21,10
\$17.874	\$17,812	\$17,812	\$17,368	\$20,493	\$19,281	\$19,281	\$19,28
\$59,801	\$75,204	\$65,983	\$88,337	\$101,086	\$70,188	\$84,732	\$79,99
\$4,642	\$6,363	\$4,857	\$4,699	\$4,079	\$4,804	\$5,815	\$2,52
\$21,436	\$21,436	\$21,754	\$21,755	\$21,983	\$21,983	\$21,983	\$22,01
\$1,581,982	\$1,440,322	\$1,500,455	\$1,396,328	\$1,524,507	\$1,351,974	\$1,305,631	\$1,300,22
(\$768;670).	(\$395,209)	(\$659,933)	(\$621,997)	(\$544,008)	(157/2,648)	(\$395,572)	(\$484,68
1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1				CERT AL	1777A 12 403.	(\$3:0.472)	(\$484;68
(\$765,670)	(6996,209)	(\$659,933)	(562(,997)	(\$544,988)	(\$572,648)	193307012)	(\$404)00
D.	Ô	0	Ĩ	0	10	0	

0	0	0	Ũ	0	10	0	0
(\$768,\$79)	(5100,208)	(\$650,033)	(\$621,997)	(6544;988)		(\$1017.72)	(\$484,681)
-94.51% -94.51% -91.88%	-37.95% -37.95% -35.89%	-78.51% -78.51% -75.93%	-80.33% -80.33% -77.52%	-55.64% -55.64% -53.39%	-73.48% -73.48% -70.66%	-43.67% -43.67% -41.25%	-59.43% -59.43% -56.73%

Patient Statistics MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WY One month ended July 31, 2020

Current Month			Year-To-Date					
Actual 07/31/20	Budget 07/31/20	Positive/ (Negative) Variance	Prior Year 07/31/19	STATISTICS	Actual 07/31/20	Budget 07/31/20	Positive/ (Negative) Variance	Prior Year 07/31/19
3,996 637	4,593 545	(897) 92	4,060 428	Outpatient Statistics: Clinic Visits - Primary Care Clinic Visits - Specialty Clinics	3,996 637	4,593 545	(597) 92	4,060 428
65.14 70.99	70.76 77.76	(5:62) (6.77)	63.04 73.27	Productivity Statistics: FTE's - Worked FTE's - Paid	65.14 70.99	70.76 77.76	(5:62) (6:77)	63.03 73.27
	- Charles and a state	00000						

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MEMORIAL HOSPITAL OF SWEETWATER COUNTY CASH DISBURSEMENT SUMMARY FOR JULY 20

PAYMENT SOURCE	NO. OF DISBURSEMENTS	AMOUNT
OPERATIONS (GENERAL FUND/KEYBANK)	620	7,041,237.57
CAPITAL EQUIPMENT (PLANT FUND)	5	144,252.23
CONSTRUCTION IN PROGRESS (BUILDING FUND)	3	272,654.54
PAYROLL JULY 05, 2020 PAYROLL JULY 19, 2020	N/A N/A	1,372,314.07 1,433,766.42
TOTAL CASH OUTFLOW		\$7,458,144.34
CASH COLLECTIONS		\$6,730,353.58
INCREASE/DECREASE IN CASH		-\$727,790.76

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CONSTRUCTION IN PROGRESS (BUILDING FUND) CASH DISBURSEMENTS FISCAL YEAR 2021

				MONTHLY	FYID
CHECK		4	DESCRIPTION	TOTAL	TOTAL
NUMBER	DATE PAYES	AMOUNT			
001057	7/9/2020 CLARK'S QUALITY ROOFING, IN	132,270.67	CENTRAL PLANT UPGRAL	25	
	7/17/2020 ROOFTOF ANCHOR, INC.	26.025.60	CENTRAL FLANT UPGRAL	叱	
001068	WIW2020 ROUPIOT ANGRON, INC.	-			
W/T	7/16/2020 WELLS FARGO	104,348.1	WF DEBT SERVICE		
	JULY TOTALS			272,654.54	272,654.54

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PLANT FUND CASH DISBURSEMENTS FISCAL YEAR 2021

-	NA WING	AMOUNT	DEUCRIPTION	TOTAL	FYTD TOTAL
	17140	4,343.78	INJECTOR CABLES FOR WIRELESS SYSTEM	t	
		12,600.00	DELL WORKSTATIONS AND MONITORS		
		13,040.57	CONDENSATE FUMPS		
		51,063,00	OSI RADIOLUCENT OR TABLE		
		-			
114312323	JULY TOTALS	220		144,252.23	144,252.23
	7/9/2020 7/17/2020 7/17/2020 7/17/2020 7/17/2020	7/9/2020 CONVERGEONE, INC. 7/17/2020 COW GOVERNMENT LLC 7/17/2020 FOLSUM ASSOCIATES (HA FOLSOM & A 7/17/2020 MIZUHO ORTHOPEDIC SYSTEMS, INC 7/23/2020 CONMED LINVATEC	BATE PAXE 7/9/2020 CONVERGEONE, INC. 4,343.78 7/17/2020 CDW GOVERNMENT LLC 12,600.00 7/17/2020 FOLSUM ASSOCIATES (HA FOLSOM & A 13,040.57 7/17/2020 MIZUHO ORTHOPEDIC SYSTEMS, INC 51,063.00 7/23/2020 CONMED LINVATEC 39,382.76	INTE INTEL 7/9/2020 CONVERGEONE, INC. 4,343.78 7/17/2020 CONVERGEONE, INC. 12,600.00 7/17/2020 CDW GOVERNMENT LLC 12,600.00 7/17/2020 FOLSUM ASSOCIATES (HA FOLSOM & A 13,040.57 7/17/2020 MIZUHO ORTHOPEDIC SYSTEMS, INC 51,063.00 OSI RADIOLUCENT OR TABLE 7/23/2020 CONMED LINVATEC 39,382.76 COMMED POWER SYSTEM	PAYEE AMOUNT DEBUGRIPTION TOTAL 7/9/2020 CONVERGEONE, INC. 4,343.78 INJECTOR CABLES FOR WIRELESS SYSTEM 7/17/2020 COW GOVERNMENT LLC 12,600.00 DELL WORKSTATIONS AND MONITORS 7/17/2020 FOLSUM ASSOCIATES (HA FOLSOM & A 13,040.57 CONDENSATE PUMPS 7/17/2020 MIZUHD ORTHOPEDIC SYSTEMS, INC 51,063.00 OSI RADIOLUCENT OR TABLE 7/23/2020 CONMED LINVATEC 39,382.76 COMMED POWER SYSTEM

Amount	Description
	4 Advertising Total
	7 Billing Services Total
	3 Blood Total
and the second	0 Building Lease Total
	7 Cellular Telephone Total
	0 Collection Agency Total
	9 Contract Maintenance Total
	1 Contract Personnel Total
	2 Credit Card Payment Total
	1 Dental Insurance Total
	0 Dialysis Supplies Total
	5 Education & Travel Total
	0 Employee Recruitment Total
6,512.1	4 Employee Vision Plan Total
	2 Equipment Lease Total
	2 Food Total
4,901.4	1 Freight Total
409.3	36 Fuel Total
3,052.7	71 Garbage Collection Total
547,209.3	29 Group Health Total
273,709.0	05 Hospital Supplies Total
12,830.	48 Implant Supplies Total
27,973.	95 Insurance Premium Total
20.	00 Internet Services Total
397,294.	21 Laboratory Supplies Total
1,010.	17 Laundry Supplies Total
20,691.	00 Legal Fees Total
31,449.	60 Liability Insurance Total
502.	00 Licenses & Taxes Total
2,598.	08 Life Insurance Total
344.	16 Linen Total
15,500.	00 Lithortripsy Service Total
132,236.	97 Locum Tenens Total
	11 Maintenance & Repair Total
24,278	24 Maintenance Supplies Total
	00 Marketing & Promotional Supplies Total
	89 Medical Surgical Supplies Total
115,376	46 MHSC-Foundation Total
	12 Minor Equipment Total
	00 Monthly Pest Control Total
	68 Non Medical Supplies Total
and the second se	83 Office Supplies Total
	.00 Other Employee Benefits Total
15,607	89 Other Medical Surgical Supplies Total
	77 Other Non Medical Surgical Supplies Total
	.00 Other Purchased Services Total
8.321	.22 Oxygen Rental Total

3,190.04	Patient Refund Total
645.74	Payroll Deduction Total
13,246.30	Payroll Garnishment Total
2,800,000.00	Payroli Transfer Total
	Pharmacy Management Total
	Physician Recruitment Total
	Physician Services Total
	Physician Student Loan Total
	Professional Service Total
and the second se	Q4 941 Taxes Total
	Radiology Monitoring Total
	Radiology Film Total
and the second se	Radiology Material Total
	Radiology Supplies Total
	Reimbursement - CME Total
	Reimbursement - Education & Travel Total
	Reimbursement - Hospital Supplies Total
	Reimbursement - Insurance Premiums Total
and the second sec	Reimbursement - Liscence Total
and the second s	Reimbursement - Office Supplies Total
	Reimbursement - Uniforms Total
	Retention Bonus Total
	Retirement Total
the second se	Sales Tax Payment Total
and an and a second sec	Scholarship Total
	Software Total
	Surgery Equipment Total
	Surgery Supplies Total
	Survey Expenses Total
No. of Concession, Name of Street, or other Designation, Name of Street, October	Taxes Total
and the second se	Transcription Services Total
	Utilites Total
	Waste Disposal Total
	Window Cleaning Total
	Workman's Comp Total
05,100,01	
7.041.237.57	Grand Total
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ock Nember	Della	Vendor Cluck Name	Agoust	Description	4
2433	7/5/2020	SWEETWATER MOW, LLC	99.00	Adynaticing	
2414		PILOT BUTTE INDADCASTING	300,000	Advertising	
2601		EIG THICKET ENDADICASTING	3,193.75	Advertising	4
2645		KEMMERER GAZETTE	395.00	Advertising	_
2648		LITURGICAL FURLICATIONS, INC	867.00	Advertising	4
2675		SUBLETTE EXAMINER	219.25	Advortsing	_
2677		THE RADIO NETWORK	2,916.66	Advertising	
2711		CHECKED IN MEDIA, LLC	725.00	Advertising	
	1	PILOT MUTTE BROADCASTING	309,00	Advertising	
2762 T00000005981		LAMAR ADVERTISING	400.00	Advertising	_
		RICKET MINER	4,000.0	Advariating	
T00000005984		NOCK SPRINGS SWEETWATER COUNTY AIRPORT	280,00	Advertising	
100000006009		GREEN RIVER STAR	1,200.0	Adverticing	
T000000005021			1,200.00	Advertising	7
700000000023		LAMAR ADVERTISING	and the second se	Advertising	7
1000000005027		NOCKET MINER		Diffing Services	
12574		TRUE COMMERCE, INC.		1 Milling Services	
12727		EXPRESS MEDICARD BILLING SERV	10.652.0		1
72447		VITALANT) filead	-1
72686		SVITALANT .		theiking Leroe	
72619		CUMMENT PROPERTIES, LLC	and the second s	Building Letter	-1
72638		CHILLTOP PROPERTIES, LLC		7 Ceihiar Telephone	
72445		VERIZON WIRELESS, LLC	and the second s	Di Collinction Agency	
72339		OWAKEFIELD & ASSOCIATES, INC.		D Contract Molnienance	
72425		O SOUTHWESTERN MOMEDICAL ELECT.			
72336	7/2/20	UNITED AUDIT SYSTEMS, DIC.		Contract Maintenence	
72449	7/3/202	WAYSTAR HEALTH		O Contract Maintenance	
72453		WYQDATA SECURITY INC.	and the second s	Contract Mointenance	
72510	7/16/20	HEALTHCARE SOLUTIONS OF NC		Citation desirements	-
72542		R FHILIPS HEALTHCARE		7 Contract Meinlestance	- 10
72543	7/16/20	PROVIDER ADVANTAGE NW INC	and the second se	Contract Methionence	
172556	7/16/20	IN SIEMENS MEDICAL SOLUTIONS USA	and the second s	ID Contract Maintenance	
172559	7/16/20	IN SOUTHWESTERN NOMEDICAL ELECT.		ID Contract Maintenance	and the second second
172457	7/16/20	O ADULTY HETWORK INC		is Contract Maintenance	
172535	7/16/20	ID NEXTGEN HEALTHCARE, INC.	2003 - 200 -	10 Contract Maintenance	
172544	7/16/20	CIMADIMAMED		10 Contract Mainteners	_
172553		RU SCORFION HEALTHCARE LLC		00 Contract Maintenance	
172668	1	20 SIEMENS MEDICAL SCILUTIONS USA	6,902.	75 Contract Maintenance	 }.
172669		20 SOUTHWESTERN MOMEDICAL ELECT.	2,285	00 Constract Maintenance	_
172600		20 TRACTMANAGER INC	1,004	Contract Maintenance	
172592		20 ACCRUENT LLC	7,743	12 Contract Maintenance	
172667		20 SARAH NOTH	750	CO Contract Maintenance	
172090		20 WYODATA SECURITY INC.	1,235	00 Centract Maintanance	
172612		20 CONVENSEONE, INC.	4,566	05 Contract Maintenance	<u></u>)
		20 CONTRACTS	401	CC Contract Maintenance	
172640		20 ISL WATER CHEMISTRIES	2,454	35 Covingct Maintenvence	
172643			18,62	29 Contract Maintenance	
			Contraction of the second s	33 Contract Maintenance	
				.00 Contract Mointeinance	
			and the second s		20
172763			and the second	Contraction of the Contraction o	
172765					
172769	Luna and an and a second				
		THE REAL PROPERTY AND ADDRESS OF THE PARTY		A REAL PROPERTY AND A REAL PROPERTY AND A REAL PROPERTY A REAL	
172765	7/30/2 7/30/2 7/30/2 7/30/2 7/30/2 7/30/2	IND KRIDNOS INCORPORATED IZO NUANCE COMMUNICATIONS, INC IZO PHILIPS HEALTHCARE IZO PLAYNETWORK, INC. IZO REMI CORPORATION IZO SIEMENS MEDICAL SCILITIONS USA IZO SOLITHWESTERN INOMEDICAL ELECT.	18,313 4,297 175 2,735 63	33 Contract Maintennerse	

		11.00	Contract Maintenance
			Contract Maintenance
7/21/2020 0	OPTIMIS		Contract Minimizer
7/7/2020	CENITH	the second state of the second	Contract Minimienance
7/21/2020	CARE CLOUD		
7/20/2020	GATEWAY EDI		Contract Mainterence
			Contract Mainteneuce
7/5/2020	ARTERIDALE ASSOCIATES, INC		Contrast Maintenance
7/9/2020	T-SYSTEM, INC		Contract Mainterance
7/17/2020	GE HEALTHCARE		Contract Meintersonce
7/17/2020	MENGE HEALTHCARE SOLUTIONS, INC		Contract Maintenance
7/23/2020	UP TO DATE		Contract Maintenance
7/30/2020	GE HEALTHCARE		Contract Maintenonce
7/30/2020	STATE FINE DC SPECIALTIES	1,394.75	Contract Maintenance
7/30/2020	UP TO DATE	22,823.00	Contract Maintennerse
7/9/2020	ELWOOD STAFFING SERVICES, INC	3,852.99	Contract Personnel
7/9/2020	JIM LANE	2,728.0	Contract Personnal
7/9/2020	SARAH ROTH	210.00	Contract Personnel
7/9/2020	HAMPTON INN-RS	501.4	Contract Personnel
7/16/2020	FOICUSONE SOLUTIONS LLC	3,061.5	Contract Personnal
		3,166.6	Contract Personnel
		2,587.7	3 Contract Personnel
		3,390,6	3 Contract Personnel
· · · · · ·		660.0	BConiract Personnal
		4,814.2	2 Credit: Card Payment
		1,614.5	ti Dental Insurance
		21/63.2	1 Denial insurance
		249.9	Chelysis Supplies
		hier	7 Cialysis Supplies
			S Dialysis Supplies
		1	5 Distysis Supplies
		4	3 Distysis Supplies
			ID Education & Travel
			5 Education & Traval
Contraction of the local division of the loc			I Education & Travel
			10 Education & Travel
		0.000.0	A DECEMBER OF THE OWNER OWN
			10 Education & Travel
			00 Employee Recruitment
7/9/2020	DINISIGHT INVESTIGATIONS, INC		20 Employee Recruitment
7/2/202	DWESTERN WY COLLEGE		DO Employee Recruitment
7/9/202	SST TESTING +, INC		20 Employee Roccultment
7/20/202	O TAMMARA A. HAUTALA		60 Employee Recruitment
7,3/202	D VISION SERVICE FLAN - WY		14 Employee Vision Pinn
7/9/202	OGE HEALTHCARE FINANCIAL SERVICES		03 Equipment Lette
7/9/202	D NON'S ACE RENTALS & EQUIP.SALE	50.	00 Equipment Lease
7/2/202	O SIEMENS FINANCIAL SERVICES, INC	18,429,	63 Equipment Losse
7/9/202	US BANK EQUIPMENT FILLANCE	801.	22 Equipment Longe
7/16/202	0 COMER & SUTTLY COMPANY	329.	78 Equipment Lesse
7/16/202	SHADOW MOUNTAIN WATER CO WY	75	00 Equipment Lause
7/16/202	IO US BANK EQUIPMENT FINANCE	2,283	09 Equipment Loose
		10,494	17 Explorment Lense
		64	99 Equipment Lause
1 .1		4 100	
7/23/241	IN US DANK EQUIPMENT FINANCE	ZAIU	.76 Equipment Lesse
	ID US BANK EQUIPMENT FINANCE 20 SHADOW MOUNTAIN WATER CO ,WY		,25 Equipment Losse
	7/21/2020 7/7/2020 7/20/202 7/20/20	7/16/2020 CRTHID PHREESIA FEES 7/21/2020 CARE CLOUD 7/21/2020 CARE CLOUD 7/20/2020 CARE ASSOCIATES, INC 7/20/2020 CE HEALTH-CARE 7/17/2020 GE HEALTH-CARE 7/20/2020 SARAH INOTH 7/20/2020 SARAH INOTH 7/20/2020 SARAH INOTH 7/20/2020 GARAH INOTH 7/20/2020 SARAH INOTH 7/20/2020 GARAH INOTH 7/20/2020 GARAH INOTH 7/20/2020 GARAH INOTH 7/20/2020 GARAH INOTH 7/20/2020 GUETA DENTAL	7/11/2003 CHIND THREES 280.00 7/21/2003 CARE CLOUD 344.00 7/72/2003 CARE CLOUD 546.60 7/72/2003 CARE CLOUD 566.60 7/72/2004 CARE CLOUD 566.60 7/71/2005 CHIRALTHICARE SCULTIONS, INC 68.150.45 7/71/2004 CHIRALTHICARE SCULTIONS, INC 68.150.45 7/71/2005 CHIRALTHICARE SCULTIONS, INC 84.26.00 7/71/2004 CHIRALTHICARE 52.26.20 7/71/2005 CHIRALTHICARE 52.26.20 7/71/2004 CHIRALTHICARE 52.26.20 7/71/2005 CHIRALTHICARE 52.26.20 7/71/2005 CHIRALTHICARE 52.26.20 7/71/2004 CHIRALTHICARE 52.26.20 7/71/2005 CHIRALTHICARE 52.26.20 7/71/2006 CHIRALTHICARE 52.2

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			1,903.52	Fand
72375		B MCFACIDEN WHICLESALE		
72411		ICHOLAS & CO INC	7,141.54	
72435		SCO INTERMOLINITAIN FOOD		
72501	7/16/2020 F	B MCFADDEN WHICLESALE	2,155.54	
72522	7/16/2020	EADOW GOLD DAIRY	34,87	and the second sec
72536		ICHOLAS & CO INC	2,176.53	
72569		YSCO INTERMOUNTAIN FOOD	785.45	
172581	7/15/2020	AISTERN WYCHENG REVERAGES INC	1,900.36	
72628	7/23/2020 F	8 MCFADDEN WHOLESALE	1,950,03	
172728	7/30/2020 F	B MCFADDEN WHOLESALE	1,065.00	
172777	7/30/2020 S	YSCO INTERMOLINTAIN FOOD	405.17	
EFTODOIDX0005995	7/17/2020	OCA-COLA BOTTLING COMPANY HIGH COUNTRY	575.50	Food
172502	7/16/2020 F	ED EX	182.08	Freight
172576	7/16/2010 1	IN'S STORE	28.34	Fixight
172725	7/30/2020 F	ED EX	242.0	Feelght
172785	7/30/20201	RIDSE, INC	4,441.93	Freight
172420	7/9/2020	LED FIDRSE OR. COMPANIES INC	409.36	Field
EFTODIXINCO05909		NWS - ROCK SPRINGS	3,052.71	Garbage Collection
W/T		UNTHER ADMIN FEES	185.25	Group Health
W/T	4	FUNITHER FLEX 7/22/20	604,80	Group Haaith
w/T		FURTHER FLEX 7/29/20	1,108.64	Group Health
W/T		FUILTHER FLEX 7/7/20	1,452.31	Group Health
		FURTHER FLEX 7/1/20	2,958.76	George Hentlin
W/T		FUNCTHER FLEX 7/15/20	3,624.35	Group Health
W/T		BLUE CROSS INUE SHIELD 7/3/20	68,585,80	Group Health
W/T		III.UE CHOSS BILLE SHIELD 7/10/20	10,386.84	Group Hasilih
W/T		BLUE CROSS BLUE SHIELD 7/17/20	109,304.70	Group Health
W/T		BLUE CROSS INVE SHIELD 6/26/20	135,229.3	Group Heilth
W/T		BLUE CROSS BLUE SHELD 7/24	and the second s	Group Hastin
w/r		ALLEN MEDICAL SYSTEMS INC	- internet	Henpital Supplits
172350		BG MEDICALLIC		0) Hospital Supplies
172357		BOSTICIN SCIENTIFIC CONP	the second se	7 Hospital Supplies
172360				4 Hospital Supplies
172362		CARCINIAL HEALTH/V. MUELLER		5 Hospital Supplies
172367		COOK MEDICAL INCORPORATED		4 Houpital Supplies
172372		DIAGNOSTIGA STAED INC		6 Hospital Supplies
172373		DJ OKTHOPEDICS, LLC		O Hospital Supplies
172361		HCLOGIC, INC.	and the second data was not second data and the se	Ci Hospital Supplies
172591	7/9/2020			2 Hospital Supplies
172431		LEICA INDSYSTEMS RICHMOND		D Hospital Supplies
172403		MEDTRONIC, USA		i4 Homital Supplies
172333		OWENS & MINOR 90085430		A REAL PROPERTY AND A REAL
172412		OWENS & MINOR 90005430	Come in the second s	D Hospital Supplies
172423	7/9/2020	SHEPPERT MEDICAL TECHNOLOGIES		O Hospital Supplies
172428	the second second	STERIS CORPORATION		19 Hospital Supplies
172456	7/16/2020	ANNOTT LANORATONIES		77 Hospital Supplies
172551	7/16/2020	ARROTT NUTRITION		Al Hospital Supplies
17245B		AESCULAP INC		37 Houpitel Supplies
172461		ALLEN MEDICAL SYSTEMS INC	and a second	22 Hospital Supplies
172462	7/16/2020	AMAZON.COM CREDIT PLAN	transfer and the second se	22 Hospital Supplies
172464	7/16/2020	APPLIED MEDICAL	3,334.	tit Hospital Supplies
172466	7/16/202	ARTHREX INC.	480/	00 Hospital Supplies
172471	7/16/202	B BRAUN MEDICAL INC.	478,	10 Housing Supplies
172409		BARD PERIMERIAL VASCULAR INC	1,524.	00 Hospital Supplies
5 * 1 *** *****				NG Hospital Supplies

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			2.120.00	Hospital Supplies
172475		NOMET SPORTS MEDICINE		Hospitel Supplies
172477		IOSTON SCIENTIFIC CORP		Hospital Supplies
172493		C.R. BARD, INC.		Hospital Supplies
172482		CANDINAL HEALTH/V, MUELLER		Hospital Sapplies
172484		CAREFUSION 2200 INC		
172489		CONE INSTITUTENTS		Hospital Supplies
172491	7/16/2020	COOK MEDICAL INCORPORATED		Hospital Supplies
172497	7/16/2020	DIAGNOSTIGA STAGO INC		Hospital Supplies
172498	7/16/2020	DJ ORTHOPEDICS, LLC		Heapital Stapplies
172500		EXPAND-A-RAND,LLC		Hospital Sapplies
172507	7/16/2020	GEM MEDICAL SUPPLIES, LLC		Haspital Supplies
172509	7/16/2020	HEALTHCARE LOGISTICS INC		Hexpitel Supplies
172512	7/16/2020	HOLOGIC, INC.		Hospital Supplies
172517	7/16/2020	KARL STORZ ENDOSCOPY-AMERICA		Hospital Supplies
172566	7/16/2020	LEICA BIOSYSTEMS RICHMOND		Hospital Supplies
172533	7/16/2020	M V A P MEDICAL SUPPLIES, INC.	181.75	Hospital Supplies
172521	7/16/2020	MICKESSON MEDICAL-SUNGICAL		Hospital Supplies
172523	7/16/2020	MEDI-DIOSE INCORPORATED	123.2	Hospitel Supplies
172531	7/16/2020	MINDRAY DS USA, INC.		Hospital Supplies
172537	7/16/2020	OLYMPUS AMERICA INC	364.00	Hospital Supplies
172539	7/16/2020	OWENS & MINOR 90005430	15,406.0	Hospital Supplies
172540	7/16/2020	PATTERSON DENTAL - 408	16.25	Hospital Supplies
172541		PERFORMANCE HEALTH SUPPLY INC	36,3	Hospital Supplies
172552		S & W HEALTHCARE CORPORATION	197.0	Haspital Supplies
172563		STERUS CORPORATION	4/105,8	D Hospital Supplies
172565		SLIREMARK CO	258.5	Hospital Supplies
172570		TELEFLEX MEDICAL INC.	1,050.0	P Hexpital Supplies
172572		TICH PRODUCTS, LC	500.0	B Hospital Supplies
172573		THU-ANDM HEALTH SERVICES INC	810.0	6 Hospital Supplies
172579		UTAH MEDICAL PRODUCTS INC	567.1	2 Hospitel Supplies
172580		WAXIE SANITARY SUPPLY	674.5	6 Hospitel Supplins
172594		AESCULAPINC	969.7	2 Flospital Supplies
		AMAZON.COM CREDIT PLAN	1,769.9	6 Hospital Supplies
172595		B BRALIN MEDICAL INC.	380.0	di Hespital Supplies
172599		BAND PERIPHERIAL VASCULAR INC	1,044.0	BiHospitel Supplies
172597		DAVER HEALTHCARE LLC	1,858.0	6 Hospital Supplies
172598	and a second		636/	G Haupited Supplies
172604			189.1	0 Hospital Supplies
172614		C R BARD INC	and the second se	10 Hospital Supplies
172608		CAREFUSION 2200 INC		19 Floopital Supplies
172610		COASTAL LIFE SYSTEMS,INC.	the second se	K Homital Supplies
172623		D) ORTHOPEDICS, LLC		00 Haupital Supplies
172633	and the second s	GENERAL HOSPITAL SUPPLY CORPORATION		25 Hospitel Supplies
172650		D MCKESSON MEDICAL-SURGICAL		57 Haspital Supplies
172651		D MEDI-DOSE INCORPORATED		DO Hospital Supplier
172656		CINSPIRE HEALTH, INC		Se Hospital Supplies
172657		O CLYMPUS AMERICA INC		51 Hospital Supplies
172658		D OWENS & MINOR 90005430		ni Hospital Supplies
172660		D PERFORMANCE HEALTH SUPPLY INC		
172672		d STERIS CORPORATION	and a second sec	20 Hospital Supplies
172681		D TRI-ANIM HEALTH SERVICES INC		10 Hospital Supplies
172688	7/23/20	D WAXE SANITARY SUPPLY		49 Hospital Supplies
172615		CR BARD, INC	the second se	60 Hospital Supplies
172695	7/30/20	MAESCULAP INC		56 Hospital Supplies
172700	7/30/20	ID APPLIED MEDICAL	2,767	CO Hospital Supplies

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2705	7/30/2020	BRAUN MEDICAL INC.	556.00	tospital Seppins
72704		AXTER HEALTHCARE CORPORATION	2,723.01	Hospital Supplies
72706		DSTON SCIENTIFIC CORP	2,568.94	Hospital Supplies
72709	7/30/202010	ARDINAL HEALTH/V. MUELLER	41,840,45	Hospital Supplies
72715		CONE INSTRUMENTS	299.53	Hospital Supplies
72716		CONMED CORPORATION	492.50	Hospital Supplies
72718		COCK MEDICAL INCORPORATED	879,00	Hospital Supplies
72790		DOUTHOPEDICS, LLC	94,68	Hospital Supplies
72725		PIMED INTERNATIONAL	219.00	Hospital Supplies
72735		REALTHCANE LOGISTICS INC	101,65	Hospital Supplies
72743		CARL STORZ ENDOSCOPY-AMERICA	5,021.00	Hospital Supplim
72776		EICA BIOSYSTEMS RICHMOND	331.12	Hospital Supplies
		MEDTINCIPIIC, USA	13,630.00	Hempital Supplies
72751		PERFORMANCE FEALTH SUPPLY INC	181.67	Hospital Supplies
72760		STERIS CONPORTION	1,305.22	Huspital Supplies
72775		TEGEFLEX MEDICAL INC.	908.00	Hospital Supplies
72778		TRI-ANIM HEALTH SERVICES INC	437.41	Hospital Supplies
72784		EDGE PHARMACEUTICALS, LLC		Hospital Supplies
72723			608.60	Hexpital Supplies
FT000000005978	7/3/2020		56,95	Huspital Supplies
FT000000005979		ESN MEDICAL INC		Hospital Supplies
FT11000 010005993	7/17/2020			Hospital Supplies
FT00000005994		BSN MEDICAL INC		Hospital Supplies
FT000000005555		HARDY DIAGNOSTICS		Hospital Supplies
FT000000006011		SIEMENS HEALTHCARE DIAGNOSTICS, INC.		Hospital Supplies
EFT000000000012		STRYKER INSTRUMENTS		Hexpital Supplies
FT000000006016		BREKLEY CORPORATION		Hospital Supplies
FT600600006617		akeg inc		Hospital Supplies
EFT000000000022		HARDY DIAGNOSTICS		Hospital Supplies
EFT000000000028		STRYKER INSTRUMENTS	contrast in the second	5 Hospital Supplier
EFTODOOD00000034	7/30/2020		E	Hospital Supplies
EFTODOD00006038	and the second se	HARDY DIAGNOSTICS	and the local data	Construction of the second sec
EFT00000006039		MARSHALL INDUSTRIES		5 Hospital Supplies
EFTODOCIDOOD6041		OVATION MEDICAL		Hospital Supplies
EFT00000000015	7/30/2020	SIEMENS HEALTHCARE DIAGNOSTICS, INC.		Hospital Supplies
EFT00000000007	7/30/2020	STRYKER INSTRUMENTS		8 Histophial Scopplins
172659		PARAĞON 28 MC.		0 Imptant Supplies
172603	7/23/2020	INCIVENTUS LLC		B Insplant Supplies
EFT000000006002	7/17/2020	LIFENET HEALTH		0 Implant Supplies
172337	7/2/2020	PROVIDENT LIFE & ACCIDENT		2 Insurance Presilium
172441	7/9/2020	PROVIDENT LIFE & ACCIDENT		3 Insurance Premium
172454	7/9/2020	WYOMING.COM		finternet Services
172530	7/16/202	METABOLIC NEWBORN SCREENING		Ot Laboratory Services
172649	7/23/2020	MAYO COLLABORATIVE SERVICES, INC.	No. of Concession, Name	C Laboratory Services
EFT0000000000015	7/23/202	ARUP LABORATORIES, INC.	and a second sec	7 Laboratory Services
172361	7/9/2020	CARDINAL HEALTH		19 Laboratory Supplies
172377	7/9/202	I FISHER HEALTHCARE		& Laboratory Supplies
172402		MEENVATORS REPROCESSING SYSTEM	204.0	10 Laboratory Supplies
172384		PLATINUM CODE		16 Laboratory Supplies
172358		DIRIOFIRE DIAGNOSTICS, LLC	16,200.0	10 Laboratory Stappiles
172463		AMAERODE SYSTEMS	36.	55 Laborationy Supplies
172472		DIRECKMAN COULTER, NC	4,390/	(2 Laboratory Supplies
172481		D CANDINAL HEALTH	21,143.	12 Laboratory Sapplies
172405	and a second		3,920/	00 Luborniory Supplies
	and the second se	OFISHER HEALTHCARE	9,067.	Status Supplies

and real concerns.

		//31/20		and the second sec
2525	7/16/20201	MEDIVATORS REPROCESSING SYSTEM	75.00	Laboratory Supplies
2528		FRCEDES MEDICAL	105.62	Laboratory Supplies
2515		LATINUM CODE	393.66	Lakonaka y Supplies
2575		TYPENEX MEDICAL, LLC		Laboratory Supplies
		RIOFIRE DIAGNOSTICS, LLC	8,180.00	Laboratory Supplies
2474	7/16/2020		3,000,60	Laboratory Supplies
2518		SERACARE LIFE SCIENCES, INC.	783.00	Luboratory Supplies
2554		STATLAB MEDICAL PRODUCTS	27,500.00	Laboratory Supplies
/2562 ·		CARDINAL HEALTH	273,02	Laboratory Supplies
72606	7/23/2020		1,028.50	Laboratory Supplies
72600		FISHER HEALTHCARE	4,453.93	Laboratory Supplies
72630		MEDI BADGE INC.	71,85	Laisonatory Supplies
72652		TYPENEX MEDICAL LLC	64.00	Laboratory Supplies
72682			4,489.02	Laboratory Sapplins
72602		BIOMARKIEUX, THC.	360.04	Laboratory Supplies
72662		PIPETTE.COM	\$23,84	Laboratory Supplian
72708		CAREIMAL HEALTH	115.00	Laboratory Supplies
72710	7/30/2020			Laboratory Supplies
72731		FISHER HEALTHCARE		Luboratory Supplies
72755		MOMECINC		Laboratory Supplies
72786	and the second se	TYPENEX MEDICAL, LLC		Laboratory Supplies
72774		STATLAB MEDICAL PRODUCTS		Luboratory Supplies
FT00000005977		IND-RAD LABORATORIES		2 Laboratory Supplier
EFT000000005983		PDC HEALTHCARE		E Laboratory Supplies
EF%000000005992		HUD-RAD LABORATOPHES		Luboratory Supplies
Franciscos		CIRTHO-CLINICAL DIAGNOSITCS INC		D Luboratory Supplies
EFTODOCOCOCIÓCOO	-	PACE ANALYTICAL SERVICES, LLC		4 Laboratory Supplies
EFT000000006026	And the second second	PDC HEALTHCARE		3 Luburatory Supplies
EFTCONDOCUDE033		HID-RAD LABORATORIES		
EFT000800006040	7/30/202	ORTHD-CLINICAL DIAGNOSITCS INC		9 Laboratory Stepplics
EF1080000006043		PIDC HEALTHCARE		1) Laboratory Supplies
EFT00000000003		MARTIN-RAY LAUNDRY SYSTEMS		3 Laundry Stepping
EFT000000000024		MARTIN-RAY LAUNDRY SYSTEMS		4 Laundry Supplies
172494	7/16/202	CROWLEY FLECK ATTORNEYS		Cilegal Fees
172661	7/23/202	PHILLIPS LAW, LLC		Ollogei Fots
172637	7/23/202	D HATHAWAY & KUNZ, P.C.		ta Legel Form
W/T	7/23/202	D HUNTINGTOM BANK		20 Legal Fees
172443	7/9/202	O USI INSURANCE SERVICES WYOMING		In Linking Insurance
172783	7/30/202	UTREASURER, STATE OF WYOMING		10 License & Taxes
172452	7/9/202	OWY DEPT OF ENVIRONMENT, QUALITY		CO Licenses & Tamps
172691	7/23/201	WYCHING SECRETARY OF STATE		00 Licenses & Texas
172992	7/23/202	ID WYOMING DEPT OF AGRICULTURE		(ID) Licernos & Timos
172332	7/2/202	RO NEW YORK LIFE INSURANCE COMPANY	and the second s	di Lie inserance
172670	7/23/20	20 STANDARD TEXTILE		16 Linen
172793		RUWYCHING UROLOGICAL SERVICES, LP		OCILIkartripsy Service
172366		20 COMPHEALTH MIC	34,341.	74 Locun Tensu
172450		20 WEATHERBY LOCUMS, INC	30,164	81 Locum Tentro
172386		20 JIHHR MEDICAL ASSOCIATES		12 Locarn Tenens
172791		20 WEATHERBY LOCUMS, INC	The second se	27 Locum Teman
172790	and the second sec	20 DR. WAGNER VERDNESE	16,572	.91 Locam Tenens
172739		RO JUHIR MEDICAL ASSOCIATES	20,811	,12 Locum Tenens
		20 P M AUTO GLASS, INC.	403	.00 Maintenance & Repair
172415		20 SWEETWATER PLUMMING & HEATING	301	.30 Maintenance & Repair
172432		20 UTAH CONTROLS INC	1,013	1,01 Maintenance & Repair
172444		20 CLARK'S QUALITY ROOFING, INC	10 Million	1,00 Mointenance & Repair

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72567	7/16/2020 5	NEETWATER FLUMBING & HEATING		Maintennee & Repoir
72578	7/16/2020 0	TAH CONTROLS INC		Maintennice & Repair
72538	7/16/2020 0	VERNHEAD DOOR CO.	11-12-12-12-12-12-12-12-12-12-12-12-12-1	Mainiesence & Repair
72546	7/16/2020 R	& D SWEEPING AND ASPHALT MAINTENANCE, LC		Maintenance & Repair
72737		IGH SECURITY LOCK & MARM		Muintenance & Repair
72759		ACIFIC STEEL HIDES FURS RECYC	79.09	Mointenarice & Rispiir
FT0000000000000		ARTSSOURCE		Maintenuté & Repair
FT0000000000018		CLCIRADO DICIONINAYS, INC	240.08	Maintenance & Repeir
FT00000000042	7/30/2020 P			Maintenance & Repair
FT000000006044	7/30/2020 5		4,950.00	Maintennet & Repair
72359		LOEDORN LUMBER	2,272.22	Maintenance Supplies
172329		ODALE ELECTRIC SUPPLY, INC	428,60	Maintenance Supplies
172365		CODALE ELECTRIC SUPPLY, INC	125,24	Maintenance Supplies
172468		ARD ACCESS SYSTEMS	3,145.55	atsintegence Supplies
		CODALE ELECTRIC SUPPLY, INC	796.54	Maintenance Supplies
172488	7/16/2020		1,597.50	Maintenance Supplies
172508		IOME DEPOT	948,77	Maintenence Sopplies
172513		NSC INDUSTRIAL SUPPLY CO	3,102.34	Maintenance Supplies
172487	7/23/2020		774.7	Maintenance Supplies
172635		TATTERY SYSTEMS	82.2	S Maintenance Supplies
172703			330.3	Mulatenance Supplies
172734	7/30/2020	ROCK SMUNGS WINNELSON CO	7,657.9	5 Maintenance Supplier
EFT00000005985		WHITE MOUNTAIN LUMBER	177.5	Maintenance Supplies
EFTCCCCD0005905			44.9	9 Maintenance Supplies
EFT000000005990		ACE HARUWARE ROCK SPRINGS WIRHIELSON CO	2,732.8	9 Maintanance Supplies
EFTODUCTODUCCION				ii Mainimunce Supplies
EFT000000006010		SHERWIN WILLIAMS CO		8 Maintenance Supplies
EFT000000000031	A commenter of the second	ACE HARDWARE		Optimizating & Promotional Supplies
172440		TIP TOP CLEANERS & EMBRCUMERY	the second se	DiMarkeling & Premotional Supplies
172641		IMPACT MELANOMA INC	the second se	O Medical Surgical Supplies
172465	_	ARMSTRONG MEDICAL INDUSTRIES		C Medical Surplical Supplies
172616	7/23/2020			9 Medical Surgicel Supplies
172699		APPLIED MEDICAL TECHNOLOGY	in the second	n Medical Surgical Supplies
172701		ARMSTRONG MEDICAL INDUSTRIES		55 Mit ISC Foundation
172404		MHSC-FOUNDATION		All ISC Foundation
172587		MHSC-FOUNDATION		tal Minor Equipment
172620		DIRECT SUPPLY		00 Minor Equipment
172745	and the second se	LABREPCO LLC		12 Minor Equipment
₩/ Т		SIGNIENS EDI		00 Monthly Pest Control
172437		TERMINEX OF WWOMING		00 Monthly Pest Control
172781	4.497	TERMONIX OF WYONING		
172459	and an and an	ALADOIN TEMP-NITE LLC		90 Non Medical Supplies
172479		BROWN INDUSTRIES INC		99 Non Medical Supplies
172505		FOILETT COMPORATION		94 Non Medical Supplies
172526		MEDLINE MUUSTRIES INC	the second se	#5 Non Madical Supplies
172634		GLOBAL EQUIPMENT COMPANY		98 Non Medical Supplies
172539	7/23/2020	HITACHI HEALTHCARE AMERICAS CORPORATION		00 Non Medical Supplies
172653	7/23/2020	MEDLINIE INIDUSTRIES INC		95 Non Medical Supplies
172750		D MEDLINE INDUSTRIES INC		.03 Non Medical Supplies
172426	7/9/202	STAPLES JUSINESS ADVANTAGE		42 Office Supplies
172499	7/16/202	ENCOMPASS GROUP, LLC		92 Office Supplies
172524		DIMEORCAL ARTS PRESS	and the second s	90 Office Supplies
172560		STANDARD REGISTER COMPANY	19	76 Office Supplies
172561	the second se	O STAPLES INJEINESS ADVANTAGE		0.34 Office Supplies
172625		O ENCOMPASS GROUP, LLC	2,123	0.04 Office Supplies

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2671	7/23/2010 ST	APLES UUSINESS ADVANTAGE		Office Supplini
2772	7/30/2020 ST	ANDARD REGISTER COMPANY		Office Supplier
2773	7/30/2020 ST	APLES BUSINESS ADVANTAGE		Office Supplies
2787	7/30/2020 U	NTED AD LANEL	ł	Office Supplies
2455	7/9/2020 YC	UDING AT HEART SENIOR CITIZENS CENTER		Other Employee Danolits
2328		ICTON DICKINSON		Other Medical Surgical Supplies
2409		AND/SONICS, INC		Other Medical Surgical Supplies
2548		DICK SPUINISS I.V. CENTER		Other Medical Surgical Supplies
2473	Contraction of the local division of the loc	ECTON DICKINSON	2,011.03	Other Medical Surgical Supplies
2476	7/16/2020		200.51	Other Medical Surgical Supplies
2534		ANDSOHICS, INC		Other Medical Surgical Supplies
2571	7/16/2020 1		2,357.50	Other Medical Surgical Supplies
2600		ECTON DICKINSON	567.40	Other Medical Surgical Supplies
2626		QUASHIELD LLC	1,634.23	Other Medical Surgicel Supplies
		LTA MEDICAL SPECIALTIES	126,50	Other Medical Surgical Supplies
12698		QUASHIELD LLC	3,757.48	Other Medical Surgical Supplies
12725	7/30/2020 T			Other Medical Surgical Supplies
12779		LTA MEDICAL SPECIALTIES	195.77	Other Non Mulicel Surgical Supplies
72352		AMISTINONG MEDICAL INCLUSTINES	300.00	Other Hen Medical Surgical Supplies
72353		CONTROL SOLUTIONS, INC	45.00	Other Non Medical Surgical Supplies
72490	the second se		625,00	Other Putchassal Services
72364	7/9/2020	2UICK NESPONSE TAXI	190.00	Other Purchased Services
72397	1	DUICK RESPONSE TAXI	275.00	Other Purchased Services
72520		ACE COPWRITING AND EDITING	300,5	Other Panchased Services
72593	1		50,00	Other Purchased Services
72647		QUICK RESPONSE TAXI	80.00	Other Purchased Services
72747	and the second se	QUICK RESPONSE TAXI	7,932.9	i Caygen Rostal
FT00000005991	and the second sec	AIRGAS INTERMOLINTAIN INC		9 Cuygen Rental
EFT00000000000014	1.1.17	AINGAS INTERMICUMTAIN INC		7 Choygen Rental
FTG0000006032		AIRGAS INTERMICIUNTAIN INC		Pailent Refund
172755		PATIENT REFUND		0 Patient Refund
172796		PATEENT REFUND		D Pullant Reland
172797		PATIENT REFUND		OPatient Refund
1727:0	and the second se	PATHENT AFFUND		D Patient Roland
172799		PATIENT REFLIND		C Petient Refund
172000		PATIENT REFUND		0 Pailant Refertd
172001		PATIENT REFUND		C Patient Refund
172802		PATIENT REFUND		D Putlent Reland
172803	7/30/2020	PATIENT REFUND		Of Petient Refund
172804	7/30/2020	PATENT REFUND		V Pailent Refund
172805	7/30/2020	PATIENT REFUND		
172806	7/30/2020	PATIENT REFUND		00 Patient Referd
172007	7/30/2020	PATIENT REFUND		00 Patient Refund
172808	7/30/2020	PATIENT REFUND		10 Paijent Referd
172009	7/30/2020	PATIENT REFUND		CO Patient Reland
172810	7/30/2020	PATIENT REFUND		64 Pallert Valuat
172811	7/30/2020	PATIENT REFUND		00 Patient Refund
172812	7/30/2020	PATIENT REFUND		18 Pationt Refund
172013	7/30/2020	PATIENT REFUND		OC Putient Refund
172814	7/30/2020	PATIENT REFUND		00 Patient Finand
172815	7/30/202	PATIENT REFUND		00 Panierii Roland
172816		PATIENT REFUND		00 Pallent Reford
172017	and the second s	PATIENT REFUND		81 Pailont Referred
172618		D PATIENT REFUND		.00 Patient Refand
172819		PATIENT REFUNID	5	.00 Pedent Rafund

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72820	7/30/2020 P	ATIENT REFUND		Patient Refund
72821	7/90/2020 P	ATIENT REFUND		Patient Reland
72822	7/30/2020 F	ATIENT REFUND		Pailent Refund
2423	7/30/2020 F	ATIENT REFUND		Patient Raland
2824	7/30/2020 1	ATIENT REFLINID	35.00	Patient Refert
72825	7/30/2020 F	PATIENT REFUND	2 2,44	Patient Reford
72875	7/30/2020 F	PATIENT REFUND	35.00	Patient Netund
72027	7/30/20201	ATHENT REFUND	585/40	Pallent Refund
72828	7/30/20201	PATIENT REFUND	171.00	Patient Rolland
72829	7/30/20201	PATHENT REFLIND	25,00	Patient Refund
72830		PATIENT REFUND	24,20	Patient Refund
72831		PATIENT REFUND	370.27	Patjant Nefend
72832		PATIENT REFUND	15,40	Patient Refered
72833		PATIENT REFUND	10.00	Patjest Refund
72834		PATIENT REFUND	20.00	Patlent Refand
		PATIENT REFUND	21.9	Publicrift Reducted
72835		PATIENT REFUND	20.00	Patient Rolund
72836		PATIENT REFUND	70.00	Patient Refaul
72837		PATIENT REFUND		Pablent Refend
72838			40.00	Patient Reland
72839		PATIENT REFUND	10.00	Petjerit Roland
72840		PATIENT REFUND	10.00	Paliant Refund
72841	100 m	PATIENT NEFUND		Patient Roland
72842		PATIENT REFUND	A DECEMBER OF A	Patient Rained
72043		PATIENT REFUND		Patient Refert
72844		PATIENT REFUND		Patient Befind
72045		PATIENT REFUND		Patient Palistel
72346		PATIENT REFUND		Patient Refined
72047		PATIENT REFUND		Patient Refert
72846		PATIENT REFUND		
72346		UNITED WAY OF SWEETWATER COUNTY		2 Payroll Deduction
172591	7/22/2020	UNITED WAY OF SWEETWATER COLINITY		2 Payroll Dadaction
172344	7/7/2020	FAMILY SUPPORT REGISTRY		4 Payroll Gamishment
172345	7/7/2020	STATE OF WYOMING DIFS/CSES		4 Payroll Garrishment
172342	7/7/2020	CIRCUIT COURT 3RD JUDICIAL-GIL		2 Payroll Garnishmetri
172343	7/7/2020	DAVID G, FEAKE		2 Paproli Gamishmenik
172346	and the second se	SWEETWATER CINCUIT COURT-RS		4 Payvoll Gemisturent
172347	7/7/2020	TREASURER STATE OF MAINE	_[C Payroll Gamishment
172566	7/22/2020	FAMILY SUPPORT REGISTRY		4 Peyroll Garrishmerit
172568	7/22/2020	STATE OF WYOMING DIS/CSES		4 Payvall Gumisinnevit
172584	7/22/2020	CINCUIT COURT BID JUDICIAL-GR		S Peyroll Gazalahment
172555	7/22/2020	DAVID G. PEAKE	3,484.6	2 Payroll Gamisivaant
172589	7/22/2020	SWEETWATER CIRCUIT COURT-RS		B Payroll Gumishurent
172590	7/22/2020	THEASURER STATE OF MAINE	172.0	0 Payroll Gamichmant
W/T	7/7/2010	PAYROLL 14		0 Poyvall Transfer
W/T	7/21/202	PAYROL 15	1,400,0003	0 Payroll Transfer
172483	7/16/2020	CANDINAL HEALTH FHAIMACY MGMT	733,160.2	N Pharmacy Menegement
172607		CARDINAL HEALTH PHARMACY MEMT	5,042.7	10 Fhennecy Management
172438		THE PRESERVE AT NOCK SPRINGS	2,103.1	ro Physician Recruitment
172578		THE PRESERVE AT ROCK SPIRINGS	1,349.	30 Physician Recruitment
172327		ADVANCED MEDICAL IMAGING, LLC	67,112	10 Physician Services
172398		LUICLIM TENENS,COM	40,274 .	70 Physician Services
172335		THE SLEEP SPECIALISTS	6,875.	00 Mysician Services
172448	and the second second	ODR. WAGNER VENCHESE	15,666.	80 Physician Services
116-940		DICHN A. LIYA. M.D.		DD Physician Services

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172683		UNIVERSITY OF UTAK HEALTH CARE		Physician Services
172749		LOCUM TENENS.COM		Physician Services
172782		DHE SLEEP SPECIALISTS		Physician Services
172621	7/23/2020	DISCOVER STUDENT LOANS		Plysician Student Loan
172624	7/23/2020	LING EDUCATION FINANCE		Physician Studiust Loss
172629	7/23/2020	FEDLOAN SERVICING	1	Physician Student Lonn
172636	7/23/2020	GREAT LAKES		Physician Student Lotu
172654	7/23/2020	NAVIENT		Physician Student Loon
172655	7/23/2020	NAVENT		Physician Student Loon
172685	7/23/2020	US DEPARTMENT OF EDUCATION	2,500,00	Physician Student Loan
172644	7/23/2010	DIR. JACQUES DENKER	-	Physician Similant Loan
172396	7/9/2020	CLIFTONLARSONALLEN LLP		Professional Service
172392	7/9/2020	KEITH WILLIAMS & ASSOCIATES, INC.	4,750.00	Professional Service
172401	7/9/2020	NIEDICAL PHYSICS CONSULTANTS, INC	1,750.00	Professional Samice
172407	7/3 /2 Mai	NILE HIGH MORILE FIET	3,360.00	Professional Service
172413	7/3/2020	P3 CONSULTING LLC	175.00	Professional Service
172400	7/9/2020	MICHINIFAIN STATES MEDICAL PHYSICS	7,237.15	Professional Sayvice
172627	7/23/2020	CE BINCKER	296.74	Prolessional Sarvice
172713		CLEANIQUE PROFESSIONAL SERVICES	3,900,00	Pecilianiumii Service
172789	7/30/2020	VERUSYS INC.	36.00	Professional Service
EFTERCORDODCD30		WESTERN STAR COMMUNICATIONS	783.20	Projessional Service
172383		UNITED STATES THEASUNY	1,979.9	Q4 941 Tamu
172419		RADIATION DETECTION COMPANY	437.50	Radiation Monitoring
EFT00000000000			161.30	Rediction Manilaring
172529		MERKY X-RAY	52.3	Radiology Film
172369		CURTUM US LLC	365.66	Particingy Material
			183.66	Radiology Material
172478		INTERMOUNTAIN RADIOPHARMACY - UNIVERSITY OF UTAH		Rediciogy Material
172514		LANTHEUS MEDICAL MAGING, INC		Waddology Moturial
172519		CUNUM US LLC		Rediciogy Material
172496		HINACCO DIAGNOSTICS INC		5 Radiology Material
172605		INTERMOLINITARY RACIOPHARMACY - UNIVERSITY OF UTAH		Padiclogy Material
172542				3 Ratiology Material
172646		LANTHEUS MEDICAL IMAGING, INC		S Redicingy Material
172707		BRACCO DIAGNOSTICS INC		3 Radiology Material
172746		LANTHEUS MEDICAL IMAGING, INC		2 Radiciogy Material
EFTGROODD05980		GE HEALTHCARE INC		1 Hadiclogy Meterial
EFT00000005998		GE HEALTHCARE INC		0 Rediciogy Malazial
EFT00000006007		PHARMALUCENCE, INC		P Padiciogy Material
EFTERNORDONUGERED		GE HEALTHCARE INC		
EFT00000006025		PHAIDALUCENCE, INC		0 Radiology Meteria)
EFT000000006037	7/30/2020	GE HEALTHCARE INC		5 Redicingy Meterial
17261B	7/23/202	CUMUM US LLC		C Radiciogy Supplies
172356	7,	DR. BANU SYMINGTON		D Parindarsement - CME
172371	7/9/202	DR. DAVID DANSIE		U Reinibursemerit - CME
172367	7/9/202	D DR. JANIEHE GLYN		O Relinkussment - CME
172388	7/3/202	DIR, JEFFREY WHEELER		13 Heimburgemant - CME
172399	7/9/202	DIRL LUCY RYAN		Dikeinknesement - CME
172406	7/5/202	DR. MICHAEL NEYMAN		B Reimbursenant - CME
172419	7/9/202	D DR. RAHLIL PAWAR	1,828.6	55 Perinchussement - CME
172451	7/9/203	DR, WILLIAM SARETTE	796.7	/5 Reinduarannant - Chilé
172410	7/5/202	DIVEAL ASPER, MD	2,252.0	00 Balanizursement - CME
172430	7/9/202	STEVEN CROFT, M.D.	2,746.0	33 Reinfourgement - CME
172702	7/30/202	DR. BANU SYMINGTON	and the supervised states in the second states and the second stat	00 Rejentoernerent - CME
172712	7/30/202	D DR. CIELETTE KARN	322,0	10 Reiministrativit - CME

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72720	7/30/2020	DR. DAVID DANSIE		Bahabarasmant - Chili:
72754	7/30/2020	EN, RAHUL PAWAR	240.08	Reinbursenert – Chifi
72792	7/30/2020	DR. WILLIAM SARETTE	50.00	Reiningsemerik - CME
72736	7/30/2020	ISRAEL STEWART, DO	1,025,00	Reinstansement - CME
72757	7/30/2020	MEALASPER, MD	1,471.53	Selectorsement - CME
72753	7/30/2020	DR MICHAEL ICHNERS	2,476.20	Reindursement - CME
72331	7/2/2020	JACQUELYN LINDSEY	232,60	Neimbursement - Education & Travel
72390	7/9/2020	KAYLA PETERSON	240.41	Reiniursement - Education & Travel
172395	7/9/2020	KRISTIE CARSON	13.77	Reindonstraent - Education & Travel
72341	7/2/20:00	DOB FAIR	357.00	Reinioursement - Education & Travel
172480	7/16/2020	DIK. BRYTTON LONG	248.90	Reiningsement - Education & Travel
172516		DR. JACOB JOHNSON	1,240.32	Reindursement - Education & Travel
172547	7/16/2020		357.00	Reindoursement - Education & Travel
172665		ROMM SNOWHENGER	96.99	Relationserviers - Education & Travel
172740		DR. JONATHAN SCHWARTZ	2,006.86	Neimburgentent - Education & Travel
72754		DI, MICHAEL NEYMAN	1,214.58	Reimburgement - Education & Travel
172741		JONCI USON	312.77	Heimbursonient - Education & Travel
72766	7/30/2020			Reindoursement - Education & Travel
172780		TENINY HANSON		Heimburgement - Echaration & Travel
		MARY FISCHER		Reindursement - Hospital Supplies
172400		CRYSTAL HANNUN		Heimistansmerit - Hospital Supplies
172495		CRYSTAL HAMILIN		Reinikussment - Hingitzi Supplies
172617				Reinikumment - Insurance Promiums
172742		JOSEPHI J. OLIVER, M.D.		Reinfoursement - Liscence
172436		TENNY HANSON		Prinkursement - Office Supplies
172370		CYNDI MCQUILLAN		Relationsoment - Office Supplies
172435		THA FRULLO		
172527		MEGAN IACOBSEN		Heindoursernovit - Office Supplies
172679		TEFFANY URANKER		Reinitursement - Office Supplies
172673		STEVIE NOSICH		Reimbursement - Uniforma
172753		DR MICHAEL BOWERS		Plainstion Extens
172714		DIL CODY CHINISTENSEN		Retaritor Bunus
172748	7/30/203	DIL LEX AUGUISTE		Retention Pones
172697	7/30/2020	ALLIANCE INSNEFT GROUP - ROCKY MOUNTAIN		Petirevant
W/T	7/6/2020	LABG 6/26/20		Definerant
W/T	7/23/2020	ABG 7/3/20		Retirement
172427		STATE OF WYOLDEPT.OF REVENUE	806,60	Soles Tan Paynoent
172405	7/9/202	MHSC MEDICAL STAFF		1 Schularship
172752	7/30/2020	MHSC MEDICAL STAFF	50.01	Scholarship
172687	7/23/202	VINCER LLC	12,000.00	Software
172532	7/16/2020	MOBILE INSTRUMENT SERVICE		l Surgery Equipment
172349	7/9/2020	ALI MED INC	1,055.61	Surgery Supplies
172368	7/9/202	COVIDIEN SALES ELC, DIIA GIVEN IMAGING	8,007.51	Surgary Supplies
172393	7/3/202	KEY SUTIGICAL INC	111.5	Surgary Supplies
172424	7/9/202	SMITH & NEPHEW ENDOSCOPY INC	863.7	1 Surgery Supplies
172434	7/9/202	SYNTHES LTD	33,044.8	B Surgery Supplies
172460	7/16/201	ALI MED INC	· 334.4	1 Stugery Steppins
172557	7/16/202	SMITH & NEPHEW ENDOSCOPY INC	1,512,0	û Surgery Supplies
172558	7/16/202	SMITH & MEPHEW INC.	440,6	1 Surgery Supplier
172564		STRVKER ENDORDOFY	2,881.4	D Surgery Supplies
172568		I SYNTHES LTD		6 Surgery Supplies
172582		ZIMMER DIOMET		B Surgery Supplies
172611		CONMED LINVATEC		3 Surgary Supplies
172674		STRYKER ENDOSCOPY		Or Songery Supplies
112014	ITCOLOUC	Construction of the second sec	1	1

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172693	7/23/2020	ZIMMER		Surgery Supplies
172696	7/30/2020	ALI MED INC	278,79	Stagery Supplies
172717	7/30/2020	CONMED LINVATEC	589.10	Surgery Supplier
172719	7/30/2020	CR BARD INC	1,249.00	Surgery Supplies
172770	7/30/2020	SMITH & NEPHEW INC.	1,521.72	Surgery Supplies
172794	7/30/2020	21MMER BIOMET		Surgery Stupplies
EFT000000005996	7/17/2020	COOPER SUNGICAL	1,015.15	Surgery Supplies
EFT000000000013	7/17/2020			Stargary Supplies
EFT000000000019		COOPER SUNGICAL		Stargery Supplies
EFTD0000000035		COOPER SUNGICAL	The second s	Surgery Supplies
172663		PRESS GAINEY ASSOCIATES, INC		Survey Exponents
172338		US DEVARTMENT OF TREASURY-FMS	1,952,93	
172363	7/9/2020		1	Transcription Services
172351	· · · · · · · · · · · · · · · · · · ·	ALL WEST COMMUNICATIONS	4,162.13	
172355				Utilities
	7/3/2020			The state of the s
172417		CENTURY LINK		Utilities
172416		DOMINION ENERGY WYOMING	19,705.82	
172467	7/16/2020			Utilities
172545		CENTURY LINK	2,250,61	Veilles
172549		HOCK SPRINGS MUNICIPAL UTILITY	15,254.10	
172550	7/16/2020	NDCKY MOUNTAIN POWER	43,846.92	Utilities:
172654	7/23/2020	CENTLIKY LINK	4,365,18	Unities
172622	7/23/2020	DISH NETWORK LLC	70.49	Utilijies
172689	7/23/2020	WHITE MOUNTAIN WATER & SEWER DISTRICT	57,50	Litilities
172429	7/9/2020	STERICYCLE,INC.	935,00	Waste Disposal
172375	7/3/2020	FINERTECH	2,055.00	Window Cleaning
W/T	7/7/2020	WURKMAN'S COMP	89,765.81	Workman's Comp
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Memorial Hospital of Sweetwater County County Voucher Summary as of month ending July 31, 2020

Vouchers Submitted by MHSC at agreed discounted rate	
July 2020 \$	60.00
County Requested Total Vouchers Submitted	60.00
Total Vouchers Submitted FY 21	\$0.00
Less: Total Approved by County and Received by MHSC FY 21	
Total Vouchers Pending Approval by County	\$0.00
FY21 Title 25 Fund Budget from Sweetwater County	\$273,488.00
Funds Received From Sweetwater County	\$0.00
FY20 Title 25 Fund Budget Remaining	\$273,488.00
Total Budgeted Vouchers Pending Submittal to County	\$0.00
FY21 Maintenance Fund Budget from Sweetwater County	\$1,448,215.00
County Maintenance FY21- July	\$71,821.34
	\$71,821.34
FY21 Maintenance Fund Budget Remaining	\$1,376,393.66

August 25,	2020
	August 25,

TO: Finance Committee

FROM: Ronald L. Cheese - Director Patient Financial Services

SUBJECT: Preliminary August, 2020 Potential Bad Debts Eligible for Board Certification

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Potential Bad Debts Eligible for Board Certification

Hospital Accounts Hospital Payment Plans Medical Clinic Accounts Ortho Clinic Accounts Total Potential Bad Debt	\$ 1,180,000.00 \$ 120,000.00 \$ 53,871.29 <u>\$ 00.00</u> \$ 1,353,871.29	
Hospital Accounts Returned Net Bad Debt Turned	<u>- 75,000.00</u>	\$1,278,871.29
Hospital Recoveries Collection Agency Hospital Recoveries Payment Plans Medical Clinic Recoveries Ortho Clinic Recoveries Total Bad Debt Recoveries	\$ 120,000.00 \$ 55,000.00 \$ 2,723.11 \$	\$ 179,413.34
Net Bad Debt Less Recoveries		\$ 1,099,457.95

MEMORANDUM

To:Board of TrusteesFrom:Wm. Marty KelseyDate:August 24, 2020Subject:Chair's Report...August Buildings and Grounds Committee Meeting

At the August Building and Grounds Committee meeting, Jim Horan reviewed the current maintenance metrics. Nothing to note by way of issues.

Regarding the Central Plant project, the project is lagging behind schedule expectations. There is no liquidated damages provision in the contract for failing to meet the contract completion deadline, so the Hospital has little leverage. Jake wishes now he would have included this in the contract. At the last meeting, it was reported that the project would be completed by mid-September. Now, it looks like substantial completion will miss that timeline but hopefully will be completed by early October. This is unfortunate as it is best to test the chillers out in warm weather. Jake will be providing a schedule update in the next several days.

Regarding the SLIB work, the CMAR proposals are due back to ST & B by August 31st. Jake will recommend a CMAR General Contractor to the Hospital's CEO ASAP after then. ST & B has been working hard on other plans & specifications packages which need to be prepared. The UV piece of the project will be under the CMAR. Irene reported that there is no further word from SLIB on the expenses vs. encumbered issue.

The pharmacy project, approved several months ago, has been on hold due to COVID-19 but will be restarted within the next month.

Regarding the Grounds Lean-to structure, some concrete still needs to be poured. This work should be completed shortly.

There is a long-standing issue regarding the Chemo Mixing Room in the Oncology Department which needs to be addressed. It has to do with negative and positive air flow and air exhaust matters. Jim has been discussing the matter with Jake. More information will be provided at a later date.

Discussions are continuing regarding bulk oxygen. The Hospital's multi-year contract with Air Gas, and The Joint Commission's concerns regarding bulk oxygen were discussed. The Board will be updated in the future regarding this matter.

Jim Horan may be submitting a request for replacement roofing over the Power House sometime in the late winter or spring.

Irene reported that the Hospital has roughly \$9,000,000 in CARES funds that need to be spent. She is unsure at this time how much of this money will be needed to support the Hospital's finances. It appears, however, that not all of these funds will be needed for this purpose and it may well be prudent for the Hospital to consider committing some CARES funds for additional capital projects. Any unused CARES funds need to be returned by July 31, 2021.

MEMORIAL HOSPITAL OF SWEETWATER COUNTY Building and Grounds Committee Meeting August 18, 2020

The Building and Grounds Committee met in regular session via Zoom on August 18, 2020, at 3:30 PM with Mr. Marty Kelsey presiding.

In Attendance: Mr. Marty Kelsey, <i>Trustee - Chair</i> Dr. Barbara Sowada, <i>Trustee</i>	
Ms. Irene Richardson, CEO	
Ms. Tami Love, CFO	
Mr. Jim Horan, Facilities Director	
Mr. Gerry Johnston, Facilities Super	viso
Mr. Jake Blevins, ST&B Engineering	

Mr. Kelsey called the meeting to order.

Dr. Sowada made a motion to approve the agenda. Ms. Richardson seconded; motion passed.

Dr. Sowada made a motion to approve the minutes from the July 22, 2020 meeting, Mr. Horan seconded; motion passed.

Maintenance Metrics

Mr. Horan presented the maintenance metrics. Total work orders and open work orders are both down as Mr. Johnston has been diligently cleaning up older work orders. Overtime will be up slightly due to additional shutdowns pertaining to the Central Plant project and they expect to be on budget for the month. Mr. Blevins brought up his concerns over allowable shutdowns per the contract. He asked we track the shutdowns as there is the possibility of liquidated damages for more or longer shutdowns allowed in the contract.

Project Review

Central Plant Expansion

Mr. Blevins gave an update on the progress of the project. The old towers are out and they had started opening the room and doing some under slab work. Mr. Johnston added the paving is complete, doors and framing are being done, the last cooling tower is in the building and the new chiller is in place. They are currently working on the piping. Mr. Blevins said he had expected to be testing the new chillers by now but because they are behind schedule. We won't be able to test under peak summer conditions but not concerned. Mr. Johnston estimates substantial completion mid to late September. Mr. Kelsey asked Mr. Blevins to send a memo with status updates in the next few weeks so we don't have to wait until the next scheduled meeting for updates.

Projects for SLIB Funding

Mr. Blevins said the Air Handler Procurement package and the CMAR went out earlier this week. They are hoping to roll the other 3-4 bid packages to the general contractor. Mr. Blevins will send a copy of the CMAR to hospital staff. He explained the delay to getting it released was due to the timing requirement of legal advertisements. The CMAR proposals will be due August 31st and authority was given to Hospital administration to make the final choice. Mr. Kelsey asked what the sense is for interest in the project. Mr. Blevins said he did reach out to some contractors to let them know the project is out there. Mr. Kelsey asked Ms. Richardson if there has been any conversation regarding changing the "expensed vs. encumbered" requirements of SLIB. She responded there has not been any updates on changing the requirement. Ms. Richardson said we packaged the projects as HVAC as one and the UV lights as one. Mr. Blevins said they will be packaged under the General Contractor as that would align with the Board vote last week. They would be included in the CMAR. The lead time is 6 - 8 weeks on the lights so he is not worried as much as the other schedules. He will run some more budget exercises to make sure we don't leave any of the approved SLIB funds on the table. Mr. Kelsey asked about the level of confidence in using CARES Act funds for construction projects related to COVID-19. Ms. Richardson said we are working with our auditors, CLA, to help decipher the HHS requirements. Mr. Kelsey said we should get legal advice to weigh in on this decision.

Chemo Mixing Room

Mr. Blevins, Mr. Horan and Mr. Johnston have met with the Pharmacy Director regarding the rules for this space and the State Board of Pharmacy requirements. Dr. Sowada suggested the State rules be reviewed before making any decisions. Mr. Blevins left the meeting.

Pharmacy Compounding Room

This project was approved months ago and has been held up due to COVID. Mr. Johnston said they are waiting on quotes on the required doors which could cost between \$12,000 - \$14,000 each. Once they get the doors ordered they can start the project. Mr. Kelsey asked if this project was being done inhouse. Mr. Johnston said yes, we are acting as general contractor and subbing out to Harris for mechanical. The electrical can be done by our staff.

Grounds Lean To

Mr. Horan reported they are working on dates to schedule the final flat work and burying of conduits. This project should be completed by the next meeting.

Bulk Oxygen

Mr. Horan explained the situation with Air Gas, our current contracted vendor for bulk oxygen. They have requested an increase in the monthly tank rental to help pay for the removal and replacement of the tank and new concrete under the new tank. The condition of the concrete was mentioned during the last Joint Commission survey in relation to other issues with the tank. All of the other issues have been taken care of with the exception of bollard placement. This will be done depending on the decision of the concrete replacement. Dr. Sowada asked about the seriousness of a JC finding on this and it was decided it would be minimal.

Powerhouse Roof

Mr. Horan explained the need for a new roof on the powerhouse as it is 40+ years old and there has been some leakage. He would also like to include fall protection on this new roof. He is estimating the project at \$80,000 - \$100,000. Mr. Kelsey recommended waiting until the Spring to complete due to weather.

OB Bathtubs to Showers

Mr. Horan said he would be taking a capital request to Finance next month for the replacement of bathtubs in OB with showers. Bathtubs are an infection control issue and are not used. Most of the work will be tiling and plumbing and is estimated at about \$100,000.

ER Outside Drainage

Mr. Horan explained the problems we are having with heaving concrete outside the ER entrance. This project will be minimal and will not require Board approval. Mr. Kelsey asked if the engineers tested for bentonite. Mr. Horan said they had tested for this.

New Business

Ms. Richardson said we probably wouldn't be asking for SLIB grants for any more construction projects but maybe some equipment. She said we do have about \$9 million that needs to be expended by July 31, 2021. We need to think about any COVID related construction projects we can complete in the timeframe and get started as soon as possible. She is getting a group together to brainstorm more ideas. One project could be the remodel of the lab/ER area for social distancing. Mr. Kelsey added that we need to make sure these projects are legally permissible through the CARES Act rules. Ms. Richardson said Dr. Pawar has also talked to her about moving Dialysis to the basement and how that could be COVID related. Dr. Sowada mentioned the remodel of Medical Imaging as a possible project if we can relate to COVID.

Mr. Horan asked about the type of minutes for this committee. Mr. Kelsey responded he would like to have regular minutes kept for these meetings.

With no further business, the meeting adjourned.

Submitted by Tami Love

Agenda Board Compliance Committee August 27, 2020 3:30 PM Zoom

3:30 Call to order	E. Tardoni
3:35 Mission Moment	
3:45 Approve Agenda	E. Tardoni
3:50 Approve Minutes	E. Tardoni
4:00 Old Business	
A. <u>Code of Conduct</u>	
4:15 New Business	
Α.	N. Hove
4:20 Reports	N. Hove
4:30 Adjourn	E. Tardoni



Board Compliance Committee Meeting Memorial Hospital of Sweetwater County July 22nd, 2020

Present via Zoom: Irene Richardson, Suzan Campbell, Noreen Hove, Ed Tardoni, Marty Kelsey, April Prado

Minutes

The meeting was called to order at 1:00pm by Ed Tardoni. New committee member Marty Kelsey was introduced.

Two "Mission Minutes" were shared. One by Ed who said one of his friends had told him that he had given the hospital high marks on the survey he had received. The other moment was shared by Irene. She received a note from a patient that had been to the Foundation lab. The patient said that the staff was nice and competent and her experience was good. Comments were also made about how great the Sheriff's Department is for borrowing us their Command Center for COVID-19 testing.

The agenda and meeting minutes from June were approved as written.

Old Business

1. Code of Conduct-Noreen Hove

Noreen asked Suzan to speak to this. Suzan stated that this original policy was done years ago and that the hospital needed a more encompassing policy, something that included all areas of the hospital and the new one does. Ed brought up that this was just a draft and our chance to take a look at it. This will further be reviewed by this group and will be brought back to our next meeting for review. Suzan pointed out that she is in the process of working with Amber in HR on page 4 of the policy. Amber has the exact verbiage that will be used in this. This section will be sent out as a separate document for review. Marty will review this draft and will send his comments to Suzan, as will Ed. Ed spoke to the fact that any comments about this policy should be from a compliance standpoint. Ed asked Marty to submit any HR comments to him so that they may be passed on to the correct committee to prevent committees from stumbling on each other.

2. Compliance Risk Assessment- Noreen Hove

Noreen stated that this assessment was done last year without her being present. Ed stated that this plan has been reviewed and approved by the Hospital Board and questioned if it needed to go again. Noreen relied that it did not need to go to the Board and that assessment was being presented as education for Marty. Noreen further explained that this assessment was developed by a large group of staff, including Directors and employees from each department that was evaluated. The risk plan was developed by assigning a number, 1-5, to different risk questions (listed in the attachments). The higher the number, the greater the risk in those areas. After reviewing the submitted attachments, most members found the "pre-audit heat map" to be confusing. Noreen noted that this was a report pulled from Healthicity and that she would review it. Ed stated that "sheet 1" of the attachments is this committees guiding document. This document does not need to be brought to the Hospital Board again. and should be noted that the Compliance Plan was approved, by this committee on June 24th, 2020.

3. Compliance Plan-Noreen Hove

This was brought to the meeting for Marty's information. It does not need to go to the Board but needs to note that it was reviewed today (7/22/20). Marty asked why it was called "Corporate Compliance Plan". Suzan stated that the word corporate needs to be taken out. Noreen made a motion to remove the word "corporate" from the title and Marty seconded the motion. This document will now be called "Compliance Plan". This title was voted on

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and approved by this committee, today, July 22nd, 2020. It should be noted that the Compliance Plan itself was voted on and approved by this committee on June 24th, 2020.

4. Compliance Work Plan FY 20-21-Noreen Hove

The dates have been changed to reflect the new fiscal year. This document was also brought as education for new member, Marty. Marty asked what RAC was an acronym for. Recovery Audit Contractor and it was explained that this is an outside agency. Irene further explained that RAC can come at any time and can perform a large-scale or small-scale audit. She further explained that CMS decides what these audits will consist of and then sends that information out. Marty then asked for clarification on #15, Contract Staff vs Employed Staff. Noreen clarified that this is set up to make sure all contract staff and all employed staff are held to the same standards in any given area of employment.

New Business

1. Check List- Noreen Hove

Noreen stated that this is a checklist for us. There are 7 elements that are part of our Compliance program. It is a fairly large list and we need to make sure that we are referring to it on a regular basis. Ed added that this list is what we refer to, to make sure we are doing what we should. Marty questioned where this list came from. Noreen said it was put out by the OIG and encompasses their standards. Marty then asked if we could clarify some acronyms for him; OIG, HCCA, and CMS. The clarifications follow;

OIG- Office of Inspector General, oversees all hospitals and healthcare in general.

HCCA-Health Care Compliance Association, paired with the OIG to create the guidelines and checklists that make up our Compliance Plan.

CMS-Centers for Medicare & Medicaid Services, over anything that involves Medicare or Medicaid.

Reports

<u>Behavioral Health-</u> 3 patients for the month of June with no fall outs. Noreen reported that they are currently looking at the Joint Commission for different ways to monitor these patients. They want to make sure that they are capturing everything that Joint Commission is requesting. Marty brought up that the wording "no fall outs" is confusing and could be changed to reflect what it really means, such as; an audit was done on these patients and we are compliant. Noreen said that she could do that.

<u>HIPAA-</u>3 total alleged violations were reported in June. 2 were from Fair Warning and 1 was from HIM. Ed clarified what Fair Warning was for Marty and Noreen explained that HIM investigates high risk cases in their department. High risk right now is any COVID-19 patient.

<u>Grievances-</u> All grievances received in the month of June were resolved in a timely manner. Ed questioned what was a timely manner. Noreen said that it is per the policy that is set forth. Marty asked where grievances come from. Irene explained that parents of adult children would call and want to complain about the care and we cannot accept these or share information on these types of concerns. Irene continued that they typically like to get them from the patient themselves. The patient would file the grievance with Cindy N. who would type it up and sends it to Noreen and April to investigate. Ed stated that having the grievances discussed weekly has greatly improved this process for patients.

<u>Audits-</u> April spoke on the two ongoing audits; Professional Services Billing and Denial Management. COVID-19 has delayed these audits as well as the lack of training on Healthicity. April stated that she is getting further training next week and that all the information is in the system. She continued that it appeared that the Professional Services Billing audit would receive a passing grade. These audits will be presented to this committee when they are complete.

Additional Discussion

Ed recapped the meeting-Code of Conduct will be reviewed and brought back to next months meeting. This meeting will now be held on the 4th Thursday of every month at 3:30pm. Ed discussed what reports need to be in

Confidential

Page 2 of 3 8/26/2020

The Board meeting packet. These items are; the draft of the meeting minutes from that month, the agenda, and the reports section of this meeting. All other items are not needed.

Adjournment

The meeting adjourned at 2:46p.m.

Next Meeting

Thursday, August 28th, 2020 @ 3:30p.m.

Respectfully Submitted,

April Prado, Recording Secretary

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Current Status: Draft

PolicyStat ID: 6652067

N/A

N/A



Approved: Review Due: Document Area: Reg. Standards:

Corporate Compliance

Code of Conduct

STATEMENT OF PURPOSE

It is the policy of Memorial Hospital of Sweetwater County (MHSC) that all of its business be conducted according to high ethical standards, including compliance with applicable laws, rules, and regulations. This Code of Conduct (henceforth referred to as Code) is integral to the MHSC Compliance Plan and the provision of care and services that is consistent with the mission and vision of MHSC. This Code applies to any and all members of the workforce operating for or within MHSC. This includes employees, providers, volunteers and contractors.

Our Vision

To be our community's trusted healthcare leader.

Our Values

Be kind. Be respectful. Be accountable. Work collaboratively. Embrace excellence.

Our Mission

Compassionate care for every life we touch.

TEXT

Our Commitment to Stakeholders

We affirm the following commitments to MHSC stakeholders (stakeholders refers to those groups of individuals to whom MHSC sees itself as having obligations):

- To our patients: We are committed to providing quality care that is sensitive, compassionate, promptly delivered and cost effective.
- To MHSC employees: We are committed to a work setting which treats all employees with fairness, dignity and respect and provides an opportunity to grow, to develop professionally and to work in a team environment where all ideas are heard.
- To the community: We are committed to understanding the needs of the communities we serve and provide quality, cost-effective healthcare. As an organization we have a responsibility to help those in need. We proudly support charitable contributions and events in the community in an effort to promote

Code of Conduct. Retrieved 08/26/2020. Official copy at http://sweetwatermemorial.policystat.com/policy/6652067/. Copyright © 2020 Memorial Hospital of Sweetwater County

good will and further community benefit.

- To our affiliated physicians: We are committed to providing a work environment that provides excellent facilities, modern equipment and outstanding professional support.
- To our volunteers: We are committed to ensuring that our volunteers feel a sense of meaningfulness
 from their volunteer work and receive recognition for their efforts.
- To our business partners: We are committed to fully performing our responsibilities to manage our business relationships in an ethical manner that reflects the mission, vision, and values of our organization.
- To our third-party payers: We are committed to doing business in a way that demonstrates our commitment to quality healthcare, efficiency and cost effectiveness.
- To our regulators: We are committed to an environment in which compliance with rules, regulations and sound business practices is part of our corporate culture. We accept the responsibility to self-govern and monitor adherence to the requirements of law and this code.
- To our vendors: We are committed to fair competition among prospective vendors and the sense of responsibility required of a good customer. We encourage our vendors to adopt their own set of comparable ethical principles.

Build Trust and Credibility

The success of MHSC is dependent on the trust and confidence we earn from our employees, patients and community. We gain credibility by adhering to our commitments, displaying honesty and integrity and reaching our strategic goals through honorable conduct.

When considering any action, it is wise to ask: Will this build trust and credibility for MHSC? Will it help create a culture and working environment in which MHSC can succeed over the long term? Is the commitment I am making one I can follow through with? The only way we will maximize trust and credibility is by answering "yes" to those questions and by working every day to build trust and credibility.

Respect for the Individual

We all deserve to work in an environment where we are treated with dignity and respect. MHSC is committed to creating such an environment because it brings out the full potential in each of us. This, in turn, contributes to our success. We cannot afford to let anyone's talents go to waste.

MHSC is an equal employment/affirmative action employer and is committed to providing a workplace that is free of discrimination of all types from abusive, offensive or harassing behavior. Any employee who feels harassed or discriminated against should report the incident to his or her manager or to human resources. (Refer to Employee-Policies on anti-discrimination and anti-harassment)

Create a Culture of Open and Honest Communication

At MHSC everyone should feel comfortable to speak his or her mind, particularly with respect to ethics concerns. Directors have a responsibility to create an open and supportive environment where employees feel comfortable raising such questions. We all benefit tremendously when employees exercise their power to prevent mistakes or wrongdoing by asking the right questions at the right time.

MHSC will investigate all reported instances of questionable or unethical behavior. In every instance where improper behavior is found to have occurred, MHSC will take appropriate action. We will not tolerated retaliation against employees who raise genuine ethics concerns in good faith.

For more information, please refer to the Employee Polices: Non-Discrimination and Anti-Harassment policy.

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Employees are encouraged, in the first instance, to address such issues with their Directors or supervisors, HR Director, or the Compliance Officer, as most problems can be resolved swiftly. If the employee is not comfortable raising the issue with his or her Director and/or would like to remain anonymous, a Compliance Hot line has been established to receive such concerns. Employees should provide enough information to the hot line for the concern to be adequately investigated. Each of us as the responsibility to report any activity that appears to violate laws, rules, regulations, standards, federal healthcare conditions of participation or this code. This reporting contributes to the ethical culture of MHSC.

Compliance Hotline: (307) 362-5291

Corrective Action

Where an internal investigation proves or supports a reported violation of this Code of Conduct has occurred, MHSC will begin corrective action. This corrective action may include making prompt repayment of overpayment amounts, notifying the correct governmental agency, providing an employee corrective action if necessary and fulfilling organizational changes to prevent a similar situation from happening again in the future. This Code of Conduct replaces Code of Caring.

Any employee corrective action will be provided as prescribed in the Employee Policies: <u>Employee Corrective</u> <u>Action policy</u> and relevant Human Resources practices.

Set Tone at the Top

Leadership has the added responsibility for demonstrating, through their actions, the importance of this Code. In any business, ethical behavior does not simply happen; it is the product of clear and direct communication of behavioral expectations, modeled from the top and demonstrated by example.

To make our Code work, leadership must be responsible for promptly addressing ethical questions or concerns raised by employees and for taking the appropriate steps to deal with such issues. Leaders should not consider employees' ethics concerns as threats or challenges to their authority, but rather as another encouraged form of business communication. At MHSC, we want ethics dialogue to become part of daily work.

Legal and Regulatory Compliance

Our organization's commitment to integrity begins with complying with laws, rules and regulations where we do business. Further, each of us must have an understanding of the company policies, laws, rules and regulations that apply to our specific roles. If we are unsure of whether a contemplated action is permitted by law or MHSC policy, we should seek the advise from the resource expert. We are responsible for preventing violations of law and for speaking up if we see possible violations.

Competition

We are dedicated to ethical, fair and vigorous competition. MHSC we will provide healthcare and services based on their merit, superior quality, safety and functionality, and competitive pricing. We will not improperly cooperate or coordinate our activities with vendors or competitors. We will not offer or solicit improper payments or gratuities in connection with the purchase of goods or services for MHSC.

Proprietary Information

It is important that we respect the property rights of others. We will not acquire or seek to acquire improper

means of a competitor's trade secrets or other proprietary or confidential information. We will not engage in unauthorized use, copying, distribution or alteration of software or other intellectual property.

Selective Disclosure

We will not selectively disclose (whether in one-on-one or small discussions, meetings, presentions, proposals or otherwise) any material non-public information with respect to MHSC, its securities, business operations, plans, financial condition, results of operations or any development plan.

Workplace Standards

Harassment and Workplace Violence

All employees have the right to work in an environment free of harassment and disruptive behavior. MHSC does not accept harassment by anyone based on the diverse individuality or cultural backgrounds of those who work with us. Hurtful or embarrassing jokes, slurs, bullying, or other harassing conduct is not acceptable in our workplace.

Sexual harassment is not allowed. This includes unwelcome sexual attention or requests for sexual favors in relation with employment decisions. Verbal or physical conduct of a sexual nature gets in the way of an individual's work performance or creates a fearful, uncomfortable, or unpleasant work place is not allowed at MHSC.

Harassment also includes events of workplace violence, which includes roberry and other crimes like stalking, violence directed at the employer, terrorism and hate crimes committed by current or former employees. Employees who observe or experience any form of harassment or violence should report the event immediately. For more information, please refer to the Employee Polices: Non-Discrimination and Anti-Harassment policy.

Health and Safety

MHSC facilities fulfill all government regulations and rules through policies that promote the protection of workplace health and safety. We are all responsible to be familiar with and understand how these policies apply to our job duties and to seek advice when we have a question or concern. We ave a responsibility to quickly report any serious workplace injury or any situation presenting a danger of injury For further guidance see (insert policy name here)

Behavior Standards

Get with Amber regarding verbiage

Controlled Substances

Some of our co-workers routinely have access to prescription drugs, controlled substances and other medical supplies. Many of these substances are governed and monitored by specific regulatory organizations and must be administered by physician order only. Prescription and controlled medications and supplies must be handled properly and only by approved individuals to reduce risks to us and to patients. If anyone becomes aware of poor security for drugs or controlled substances for the diverting of drugs from the organization, the event must be reported immediately to the Compliance Officer. MHSC facilities strictly enforce reporting of any and all violations of diverting medications by facility staff or privileged practitioners.

Alcohol and Drug Use

To protect the interests of our co-workers and patients, MHSC is committed to an alcohol and drug-free work place. We must all report for work free of the effects of alcohol and illegal drugs. Reporting to work under the effects of or having in your system any illegal drug or alcohol; or using, possessing, or selling illegal drugs while on MHSC work time or property may result in immediate termination. MHSC may use drug testing as a means of enforcing this policy.

Individuals may be taking prescription or over-the-counter drugs, which may impair judgment or other skills required in job performance. Employees with questions about the effect of such medication on their performance or who observe an individual who appears to be impaired in the performance of his or her job must immediately consult with their supervisor or risk manager. For further information see the EMPLOYEE POLICIES - DRUG AND ALCOHOL FREE WORKPLACE AND TESTING POLICY.

Use of MHSC Resources

Our assets should only be used for valid business purposes. Minor personal use of computers is permitted provided such use is not for personal financial benefit or gain and does not interfere with our job or the ability of others to do their jobs. If you have any questions regarding permitted uses of resources, please reach out to your supervisor/director.

Environmental Compliance

MHSC will comply with all environmental laws and regulations as they relate to our organization's operations. We act to preserve our natural resources to the full extent reasonably possible. We operate each of our facilities with the necessary permits, approvals and controls. We carefully follow the proper actions to provide a good environment of care and to prevent pollution.

In helping MHSC comply with these laws and regulations, all MHSC employees must understand how job duties may impact the environment, adhere to all requirements for the proper handling of hazardous materials and immediately alert supervisors to any situation regarding the discharge or improper disposal of a hazardous substance. For further guidance see the Hazardous Materials/Waste Management Plan.

Avoid Conflicts of Interest

Conflicts of Interest

We must avoid any relationship or activity that might impair, or even appear to impair, our ability to make objective and fair decisions when performing our jobs. At times, we may be faced with situations where the business actions we take on behalf of MHSC may conflict with our own personal or family interests. We owe a duty to MHSC to advance its legitimate interests when the opportunity to do so arises. We must never use MHSC property or information for personal gain or personally take for ourselves any opportunity that is discovered through our position with MHSC.

Possible Conflict of Interest Scenarios

- Being employed (you or a close family member) by, or acting as a consultant to, a competitor or potential competitor, supplier or contractor, regardless of the nature of the employment, while you are employed with MHSC.
- II. Hiring or supervising family members or closely related persons.
- III. Serving as a board member for an outside commercial company or organization.

- IV. Owning or having interest in a competitor, supplier or contractor.
- V. Having a personal interest, financial interest or potential gain in any MHSC transaction.
- VI. Placing company business with a firm owned or controlled by an MHSC employee or his or her family.
- VII. Accepting gifts, discounts, favors or services from a customer/potential customer, competitor or supplier, unless equally available to all MHSC employees.

Determining whether a conflict of interest exists is not always easy to do. Employees with a conflict of interest questions should seek advice from leadership. Before engaging in any activity, transaction or relationship that might give rise to a conflict of interest, employees must seek review from their supervisors or the Compliance Department.

MHSC Giving Gifts, Gratuities and Business Courtesies

MHSC is committed to conducting business in an ethical manner. We should avoid any actions that create a perception that MHSC is giving favorable treatment to outside entities through the exchange of gifts, gratuities or business courtesies from MHSC to outside entities. Business courtesies include gifts, gratuities, meals, refreshments, entertainment or other benefits MHSC and its employees ill neither give nor accept business courtesies that constitute, or could reasonably be perceived as constituting, unfair business inducements that would violate law, regulation or policies of MHSC.

Accepting Business Courtesies

Most business courtesies offered to staff are offered because of our positions at MHSC. We should not feel any entitlement to accept and keep a business courtesy. Staff may not use their position at MHSC to obtain business courtesies, and also must never ask for them. However, we may accept unsolicited business courtesies that promote successful working relationships and good will with the firms that MHSC maintains or may establish a business relationship with.

Employees who award contracts or who can influence the allocation of business; who create specifications that result in the placement of business; or who participate in negotiation of contracts must be particularly careful to avoid actions that create the appearance of favoritism or that may adversely affect the company's reputation for impartiality or fair dealing. The prudent course is to refuse a courtesy from a vendor when MHSC is involved in choosing or reconfirming a vendor or under circumstances that would create an impression that offering courtesies is the way to obtain MHSC business.

Meals, Refreshments and Entertainment

We may accept occasional meals, refreshments, entertainment and similar business courtesies that are shared with the person who has offered to pay for the meal or entertainment, provided that:

- · They are not inappropriately lavish or excessive.
- The courtesies are not frequent and do not reflect a pattern of frequent acceptance of courtesies from the same person or entity.
- The courtesy does not create the appearance of an attempt to influence business decisions, such as
 accepting courtesies or entertainment from a vendor whose contract is expiring in the near future.
- The employee accepting the business courtesy would not feel uncomfortable discussing the courtesy with his or her leader or co-worker or having courtesies known by the public.

Gifts

Employees may accept unsolicited gifts, other than money, that conform to the reasonable ethical practices of the marketplace and this Code, including:

Code of Conduct. Retrieved 08/26/2020. Official copy at http://sweetwatermemorial.policystat.com/policy/6652067/. Copyright © 2020 Memorial Hospital of Sweetwater County

- Flowers, fruit baskets and other modest presents that commemorate a special occasion.
- Gifts of nominal value, such as calendars, pens, mugs, caps and t-shirts (or other novelty, advertising or promotional items).

Generally, employees may not accept compensation, honoraria or money of any amount from entities with whom MHSC does or may do business. Tangible gifts (including tickets to a sporting or entertainment event) may not be accepted unless approved by the Compliance Department.

Employees with questions about accepting business courtesies are welcome to reach out to their leaders or to the Compliance Department.

Offering Business Courtesies

MHSC will not provide business courtesies with the intent to induce business or referrals, and which otherwise reflect negatively upon the organization. An employee may never use personal funds or resources to do something that cannot be done with MHSC resources. Accounting for business courtesies must be done in accordance with approved company procedures. Any business courtesies provided by MHSC must follow federal regulations.

Patient Standards

Quality of Care and Patient Safety

We are committed to the deliver of safe, effective, efficient, compassionate and satisfying patient care. We treat all patients with warmth, respect and dignity, and provide care that is both necessary and appropriate. As a general practice, MHSC aspires to a standard of excellence for all caregivers within our facilities. This commitment to quality of care and patient safety is a responsibility of every MHSC employee. Any time an MHSC employee has a question about the quality or safety of care, we are required to raise this concern with our leader or the Risk Manager.

Each of us is responsible for being aware of the following guidelines for the quality of patient care. These include:

- Conditions of Participation of the Centers for Medicare and Medicaid Services (CMS)
- Rules and regulations of The Joint Commission accrediting agency
- Rules and regulations of The Department of Health
- Consensus measures of the National Quality Forum

For further information regarding these regulations, contact the Compliance and Risk Departments, or the Quality Department.

Patient Rights

We offer no difference in the availability of services; admission, transfer or discharge of patients; r in the care we provide based on age, gender, disability, race, color, religion, sex, sexual orientation, gender identity, national origin or payer source.

Our facility respects the patient's rights for communication. We try to make sure our patients and/or their representatives have the information necessary to exercise their rights.

Each patient is provided with a written statement of patient rights and a notice of privacy practices. These statements include the following rights:

· Rights of the patient to make decisions regarding their care;

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- the right to refuse or accept treatment;
- the right to informed decision-making; and
- rights related to patient health information maintained by MHSC.
- Patient's Rights and Responsibilities

Emergency Treatment

We follow the <u>Emergency Medical Treatment and Active Labor Act (EMTALA)</u> in providing an emergency medical screening examination and necessary stabilization to all patients, regardless of ability to pay. In an emergency or if the patient is in labor, we will not delay the medical screening and stabilizing treatment in order to seek financial and personal information.

Patients with emergency medical conditions are only transferred to another facility at the patient's request or if the patient's medical needs cannot be met at MHSC, and suitable care is knowingly available at another facility.

Patient Information

We collect information about our patient's medical condition, history, medication, and family illnesses in order to provide quality care. The following federal laws/regulations protect privacy and security of a patient's information:

- The Health Insurance Portability and Accountability Act of 1996 (HIPAA)
- The Health Information Technology for Economic and Clinica Act (HITECH)
- Substance Abuse and Mental Health Administration (SAMSHA) Regulations

Following these laws, we do not use, disclose or discuss patient-specific information, including financial information, with others unless it is necessary to serve the patient or required by law.

No MHSC employee, affiliated physician, or other healthcare partner has a right to any patient information other than what is necessary to perform his or her job. For further information please see the HIPAA Privacy and Security Policy.

Referrals

Two overarching principles govern our interactions with physicians:

- We do not pay for referrals We accept patient referrals and admissions based solely on the patient's medical needs and our ability to render the needed services.
- We do not accept payments for referrals we make No MHSC employee or any other person acting on the behalf of the organization is permitted to solicit or receive anything of value, directly or indirectly, in exchange for the referral of patients. Similarly, when making patient referrals to another healthcare provider, we do not take into account the volume or value of referrals that the provider has made (or may make) to us.

Federal and state Anti-Kickback Statute and federal Stark Law apply to relationships between hospitals and physicians. Any arrangement with a physician must be structured to ensure compliance with legal requirements, and this Code. Failure to meet all requirements of these laws and regulations can result in serious consequences for our organization.

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Accurate Reporting, Claims and Record Keeping

Accurate Public Disclosures

We will make certain that all disclosures made in financial reports and public documents are full, fair, accurate, timely, and understandable. This obligation applies to all employees, including all financial executives, with any responsibility for the preparation for such reports. No business goal of any kind is ever an excuse for misrepresenting facts or falsifying records.

Employees should inform leadership and the Compliance department if they learn that information in any filing or public communication was untrue or misleading at the time it was made, or if subsequent information would affect a similar future filing or public communication.

False Claims Act and Fraud, Waste and Abuse

The services provided MHSC are governed by a variety of federal and state laws and regulations. Thee laws and regulations cover subjects such as false claims, illegal patient referrals providing medically unnecessary services, violations of CMS Conditions of Participation and submitting inaccurate cost reports. MHSC is committed to full compliance with these laws and regulations.

MHSC expects all workforce members who create and submit claims for payment to any payer to ensure the submitted claims are accurate, complete and represent the true services actually provided by the organization. This pertains to each department who enters procedure charges, codes or bills. MHSC monitors charge entry, billing, coding and cost reporting to detect errors and inaccuracies.

Record keeping

We create, retain and dispose of our company records as part of our normal course of business in compliance with all legal, regulatory, and facility requirements.

All corporate records must be true, accurate and complete. Company data must be promptly and accurately entered in our books in accordance with standard accounting principles. We must not improperly influence, manipulate or mislead any unauthorized audit, or interfere iwth any auditor engaged to perform an internal independent audit of MHSC books, records, processes or internal controls.

Media Inquiries

MHSC is a high-profile organization within our community, and from time to time, employees may be approached by the media. In order to ensure that we speak with one voice and provide accurate information about the company, we should direct all media inquires to the Director of Marketing and Public Relations. No one may issue a press release without first consulting with the Director of Marketing and Public Relations.

Accountability

Each of us is responsible for knowing and adhering to the values and standards set forth by the organization and this code. If we are concerned whether the standards are being met or are aware of violations of the Code, we must contact leadership or the Compliance department.

MHSC takes seriously the standards set forth in this Code and violations are cause for disciplinary action up to and including termination of employment.

Do the right thing

Several key questions can help identify situations that my be unethical, inappropriate or illegal. Ask yourself:

- Does what I am doing comply with the MHSC guiding principles (Mission/Vision/Values), Code of Conduct, and company policies?
- Have I been asked to misrepresent information or deviate from normal procedure?
- Would I feel comfortable describing my situation at a staff meeting?
- How would it look if it made headlines?
- Am I being loyal to my family, my company and myself?
- What would I tell my child/loved one to do?
- Is this the right thing to do?

REFERENCES

If there are any questions regarding anything discussed in this Code or another company policy, inquiries can be made to the following people:

- Noreen Hove (Ext. 8561) Director of Compliance and Risk Management
- Amber Fisk (Ext. 8403) Director of Human Resources
- Suzan Campbell (Ext. 8162) In-House Counsel
- Irene Richardson (Ext. 8411) Chief Executive Officer.

Attachments

No Attachments

Reports for Board Compliance Committee 8-27-2020

- 1. 9 behavioral patients. 4 were in seclusion with 2 document issues. Education has been completed and will continue to monitor.
- 2. There is not a HIPAA report at this time for July. With the passing of Richard Tyler, this task has been reassigned to Stacey Nutt. I will meet with her in the upcoming month.
- 3. The Grievance Committee reviewed 10 cases. Each of the cases were reviewed and resolved in a timely manner.
 - a. 2 were sent to MEC for review.
 - b. 1 was sent to HR for review for a possible HIPAA
 - c. 1 case was referred to legal for review.
- 4. Ongoing Audits
 - a. Professional Services Billing
 - b. Denial management



Board Compliance Committee Meeting Memorial Hospital of Sweetwater County August 27th, 2020

Present via Zoom: Irene Richardson, Suzan Campbell, Noreen Hove, Ed Tardoni, April Prado Excused: Marty Kelsey

Minutes

The meeting was called to order at 3:45pm by Ed Tardoni.

Noreen shared the "Mission Moment". She shared that she had received an email from a couple that were visiting the area and had to use our ED. The couple relayed that they were so glad that they had stopped here instead of traveling the extra 90 miles to go elsewhere. They stated that the everything about the visit was great.

The August agenda and meeting minutes from July were approved as written. Irene made the motion and Suzan seconded it.

Old Business

1. Code of Conduct-Noreen Hove

Ed had several questions about this document and stated that he and Noreen had been corresponding via email regularly. After further review of the document, it was found that this draft policy is not one that was needing to be reviewed. Suzan stated this and Noreen found the policy in PolicyStat that actually needs reviewed but was unable to send it to everyone due to our email server being down. Suzan reported that the policy in our system is active and has been active for a year. It is the one that we will be moving forward with. The draft policy that had been emailed out will continue to be worked on by the designated group and is not ready for review at this time. There was discussion from Ed about the draft policy specifically about the Compliance Plan and the Code of Conduct referencing each other. After discussion, Noreen stated that she could add the links to each policy that would reference the other policy i.e. the Compliance Plan would have a link to the Code of Caring policy and vice versa. Ed further questioned what would be done with the draft policy and Noreen clarified that right now we would be using the Code of Conduct currently in PolicyStat ans Suzan added that this policy currently covers everything and has been active for a year. Noreen added that the draft would continue to be worked on behind the scenes and when it was ready, it would be presented in this meeting. Ed also brought up two cautions that he found in the draft policy. Number one was the specifics in the policy. He cautioned that when a policy is too specific, loop holes are easier to find. He stated that with this policy, generalizations might be more helpful. Second, he felt that the draft "crosses borders" or dictates what other parts of the organization does. He recommended taking the statements and asking, for example, "I'm going to break every environmental law" or "I'm going to comply with every environmental law" when writing the policy. Irene agreed with the comments about generalizations and this information will utilized as the policy is worked on.

New Business

There was no new business discussed.

Reports

<u>Behavioral Health- 9</u> patients for the month of July, four were in seclusion and two had documentation issues. Education has been completed and will continue to monitor.

<u>HIPAA-</u> There was no HIPAA to report at this time for July. With the passing of Richard Tyler, this task has been reassigned to Stacey Nutt and Noreen will be following up.

<u>Grievances-</u> The Grievance Committee reviewed 10 cases. Each of the cases were reviewed and resolved in a timely manner.

- a. 2 were sent to MEC for review.
- b. 1 was sent to HR for review for a possible HIPAA
- c. 1 case was referred to legal for review.

<u>Audits-</u> April spoke on the three ongoing audits; Professional Services Billing, Denial Management and Guest Relations. 44 patient charts were reviewed using the "internal chart audit" template in Healthicity. This audit consists of 42 questions for each chart. The information is entered and the report is being generated. This audit should receive a passing grade. The Denial Management audit is still waiting for Ron's information. The Guest Relations audit consists of 30 events from our MIDAS system with 9 questions specific to compliancy with the MHSC policy. The data has been entered but it was reported that it was too early to know the outcome. These audits will be presented to this committee when they are complete.

Additional Discussion

No additional discussion.

 Adjournment
 The meeting adjourned at 4:10p.m.

 Next Meeting
 Thursday, September 24th, 2020 @ 3:30p.m.

 Respectfully Submitted,

April Prado, Recording Secretary

Contract Check List

This check list summarizes the purpose, cost and other contract provisions contained in the contract and assures that the contract has been reviewed by both the CEO and In-House Legal Counsel.

- 1. Name of Contract: CERNER BUSINESS AGREEMENT
- Purpose of contract, including scope and description: This is the master agreement for the new EMR (electronic medical record) software system. This software system will replace Quadramed and other EMR's in the hospital. Installation to begin in late 2020.
- Effective Date: September 4, 2020
- 4. Expiration Date: This Business Agreement will be in place as the Master Agreement as long as we have Cerner as our EMR.

5. Termination provisions: There is a distinction between Termination of Services (software) and Termination of the Agreement. Hospital cannot terminate Support (software) before the end of the 12 months after First productive use. After the first year, we can terminate Support for an item of software upon 180 days prior written notice to Cerner. Agreement may be terminated for cause after opportunity to cure (see sections 6.1 and 6.2 Master Agreement) Is this auto-renew? No

6. Monetary cost of the contract: Finance and Audit has submitted for Board approval this new EMR and its funding process (See F&A approval and funding/financing plan) Budgeted? Yes

7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. Yes, Cerner agreed to change to Wyoming (section 6.13) and they agreed to add governmental immunity (section 5.6) Also of note- Arbitration provision was not negotiable but I did get them to agree to add language so that isn't binding and that legal action can still be pursued (Section 6.3) 8. Any confidentiality provisions? Yes Sections 6.8- 6.9 also BAA

9. Indemnification clause present? Yes Section 5.4 and 5.5

10. Is this contract appropriate for other bids? EMR working group went through in-depth and detailed selection process with at least three EMR vendors on site for demonstrations.

11. Is County Attorney review required? NO



CERNER BUSINESS AGREEMENT

This Cerner Business Agreement (the "Agreement") is made on September 4, 2020 ("Effective Date"), between

Memorial Hospital of Sweetwater County ("Client")	and	Cerner Corporation ("Cerner")
with its principal place of business at:		a Delaware corporation with its principal place of business at:
1200 College Drive Rock Springs, WY 82901, USA Telephone: (307) 362-3711		2800 Rockcreek Parkway Kansas City, MO 64117, U.S.A. Telephone: (816) 221-1024

Client wishes to implement a System pursuant to the terms and conditions of this Agreement. Cerner agrees to provide and assist in implementing certain Licensed Software, Sublicensed Software and Equipment. This Agreement will cover all of the licenses, solutions, hardware and services provided by Cerner to Client, and consists of the following documents:

- Basic Terms and Conditions
- Exhibit A Support Services
- Exhibit B -- Business Associate Provisions

Cerner and Client may execute additional Ordering Documents for any additional licenses, solutions, hardware, and services in the future, which will be subject to the terms and conditions of this Agreement. Each capitalized term used in the Agreement has the meaning set forth in Section 7 of the Basic Terms and Conditions.

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CONTRACTOR OF THE PARTY OF THE				

(signature)

(type or print)

By:

Title:

CERNER	CORPORATION
Ву:	
	Teresa Waller
Title:	Senior Director, Contract Management



Memorial Hospital of Sweetwater County 1-6URTCN7 June 16, 2020

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applicable pass-through provisions, Cerner grants to Client a non-exclusive, non-transferable sublicense to use the Sublicensed Software on the terms for end users in the license granted to Cerner by the applicable Sublicensed Software supplier.

3.2 Equipment. The Equipment is priced FOB the supplier's point of origin. Cerner will arrange, pre-pay, and invoice Client for shipping and in-transit insurance for the Equipment. If Client has agreed in writing to a shipment date, Client agrees to pay all cancellation, re-stocking, storage and additional transportation fees due to the return or re-routing of Equipment. Cerner retains a security interest in each item of Equipment until Client pays for the Equipment.

4. PAYMENTS

- 4.1 <u>Payment</u>. Client will pay all invoices within thirty (30) days after receipt. Client will pay a finance charge on all undisputed amounts that are more than sixty (60) days past due at a rate of interest equal to the lesser of 1.5% per month or the maximum permissible legal rate. Client will reimburse Cerner for reasonable collection costs, including attorneys' fees, for past due amounts.
- 4.2 <u>Taxes</u>. Client will pay all taxes imposed in conjunction with this Agreement, including, but not limited to, sales, use, excise, and similar taxes based on or measured by charges payable under this Agreement and imposed under authority of federal, state, or local taxing jurisdictions, but excluding foreign, federal, state, and local taxes on Cerner's net income or corporate existence. If tax exempt, Client will provide Cerner a copy of its sales tax exemption certificate.
- 4.3 <u>Reimbursable Expenses</u>. Client agrees to reimburse Cerner for the following travel expenses incurred by Cerner in its performance of Services: (a) air travel, not to exceed the coach class rate; (b) auto rentals; (c) lodging and miscellaneous expenses, such as parking, taxi fares, and fuel; and (d) a per diem rate for meals, as published and updated by the U.S. General Services Administration.
- 4.4 <u>Assignment of Payments</u>. Client agrees that Cerner may assign its interest in or otherwise grant a security interest in payments due pursuant to this Agreement in whole or in part to an assignee. Client will promptly acknowledge each assignment or granting of a security interest. Cerner will continue to perform its obligations under this Agreement following an assignment of payments or granting of a security interest.

5. WARRANTY, INDEMNITY, AND LIABILITY LIMITATION

- 5.1 <u>Functionality Warranty</u>. Cerner warrants that, as long as Client (a) remains continuously on Support and (b) is operating the most current or next to most current New Release, the Licensed Software will, without Material Error, perform the functions implemented by Client set forth in the Solution Descriptions when operated in accordance with the Documentation. In the event of a breach of this warranty, Cerner will repair or replace the failing item of Licensed Software so that it performs in accordance with such warranty. If, after repeated efforts (not to exceed 6 months from the date Cerner receives written notice of the warranty breach), Cerner is unable to repair or replace the failing item of Licensed Software so that it performs in accordance with such warranty. Client may, at Cerner's expense, return the failing item of Licensed Software so that it performs in accordance with such warranty, Client may, at Cerner's expense, return the failing item of Licensed Software and receive a refund of the item's license fee (calculated on a 5-year straight line depreciated basis), as well as the item's Support fees paid since the failure was first reported to Cerner. CLIENT'S RIGHTS UNDER THIS SECTION CONSTITUTE ITS SOLE AND EXCLUSIVE REMEDY AND CERNER'S SOLE AND EXCLUSIVE OBLIGATIONS WITH RESPECT TO ANY BREACH OF THIS WARRANTY.
- 5.2 <u>Services Warranty</u>. Cerner warrants that it will perform the Cerner Services in a professional manner in accordance with the applicable Solution Description.
- 5.3 Disclaimer of All Other Warranties. Cerner makes no representations or warranties concerning the Equipment, Sublicensed Software or Third-Party Services. THE FOREGOING WARRANTIES ARE IN LIEU OF, AND CERNER DISCLAIMS, ALL OTHER WARRANTIES, BOTH EXPRESS AND IMPLIED, INCLUDING BUT NOT LIMITED TO, THE IMPLIED WARRANTIES OF MERCHANTABILITY AND OF FITNESS FOR A PARTICULAR PURPOSE, ANY WARRANTY ARISING FROM A COURSE OF DEALING, USAGE OR TRADE PRACTICE AND ANY IMPLIED WARRANTY OF NON-INFRINGEMENT OF INTELLECTUAL PROPERTY RIGHTS. CERNER DOES NOT WARRANT THAT THE SERVICES WILL BE ERROR-FREE OR UNINTERRUPTED, THAT ALL DEFECTS WILL BE CORRECTED, OR WILL MEET CLIENT'S REQUIREMENTS. CERNER DOES NOT WARRANT THAT ANY ALERTS OR OTHER INFORMATION PROVIDED THROUGH THE SERVICES HAVE THE ABILITY TO IMPROVE THE HEALTH STATUS



OF A PATIENT OR SAVE PATIENT LIVES. THE SERVICES AND CONTENT ARE PROVIDED ON AN AS-IS AND AS-AVAILABLE BASIS AND ARE SUBJECT TO TIME DELAYS.

- Cerner Indemnity. Cerner will defend, indemnify, and hold Client and its officers, directors, employees, and agents 5.4 harmless from and against third-party claims, liabilities, obligations, judgments, and causes of actions ("Third-Party Claims") and associated costs and expenses (including reasonable attorneys' fees) to the extent arising out of (a) Cerner's negligence or willful misconduct in providing the Cerner Services, or (b) an allegation that the Licensed Software or Cerner Services infringe a third party's U.S. patent, trademark, or copyright. Cerner's indemnification obligation will not apply to the extent that the Third-Party Claim is based upon: (i) the use of any item of Licensed Software or Cerner Services in combination with any product, service or activity (or any part thereof) not furnished, performed or recommended in writing by Cerner; or (ii) the use of Licensed Software or Cerner Services in violation of this Agreement; (iii) the use of Licensed Software not updated to the latest version offered by Cerner, where the latest version incorporates modifications that, in Cemer's opinion, avoid the infringement claim; or (iv) third-party content supplied or transmitted by Client or Users. If there is a Third-Party Claim relating to Client's use of the Licensed Software or Cerner Services due to an infringement, or if, in Cerner's opinion, any of the Licensed Software or Cerner Services are likely to become the subject of a Third-Party Claim of infringement, Cerner will at its option and expense, and as Client's sole and exclusive remedy, use reasonable efforts to procure the right for Client to use the Licensed Software or Cerner Services that are the subject of the infringement Third-Party Claim, replace or modify the Licensed Software or Cerner Services so that they become non-infringing, or terminate the Licensed Software or Cerner Services and provide Client with a refund of the item's license fee (calculated on a 5-year straight line depreciated basis) and any prepaid amounts for Cerner Services not yet performed.
- 5.5 <u>Client Indemnity</u>. Client will defend, indemnify, and hold Cerner and its officers, directors, employees, and agents harmless from and against Third-Party Claims and associated costs and expenses (including reasonable attorneys' fees) arising out of the use of the System or Services by Client; provided however, that the foregoing indemnity will not apply to the extent Client has used the System and Services in accordance with the Documentation and applicable standards of good clinical practice and the proximate and direct cause of the Third-Party Claim is Cerner's negligence or willful misconduct in providing the Licensed Software or Cerner Services.
- 5.6 <u>Governmental Immunity Reservation</u>. Client is a Wyoming governmental entity and hereby expressly reserves its governmental immunity, pursuant to W.S. 1-39-101 et. Seq (W.S. 2014).
- 5.7 Indemnification Process. To be indemnified, the party seeking indemnification must: (i) give the other party timely written notice of the Third-Party Claim (unless the other party already has notice of the Third-Party Claim); (ii) give the indemnifying party authority, information, and assistance for the Third-Party Claim's defense and settlement; and (iii) not materially prejudice the indemnifying party's ability to satisfactorily defend or settle the Third-Party Claim. The indemnifying party has the right, at its option, to defend the Third-Party Claim at its own expense and with its own counsel. The indemnifying party has the right to settle the claim without the indemnified party's consent so long as the settlement does not require the indemnified party to pay any money or admit fault. The indemnified party will have the right, at its option, to participate in the defense of the Third-Party Claim, with its own counsel and at its own expense, but the indemnifying party will retain control of the Third-Party Claim's defense.
- 5.8 Limitation of Liability. EXCEPT FOR INDEMNIFICATION OBLIGATIONS, PAYMENT OF FEES DUE UNDER THIS AGREEMENT, AND FOR CLIENT'S BREACH OF SECTION 1.1, NEITHER PARTY IS LIABLE FOR ANY SPECIAL, INDIRECT, INCIDENTAL, PUNITIVE, OR CONSEQUENTIAL DAMAGES BASED UPON BREACH OF WARRANTY, BREACH OF CONTRACT, NEGLIGENCE, STRICT LIABILITY, OR ANY OTHER LEGAL THEORY. THE EXCLUDED DAMAGES INCLUDE, BUT ARE NOT LIMITED TO, LOSS OF PROFITS; LOSS OF SAVINGS OR REVENUE; LOSS OF USE OF THE EQUIPMENT, SUBLICENSED SOFTWARE, LICENSED SOFTWARE, SERVICES, OR DATA; COST OF CAPITAL; COST OF ANY SUBSTITUTE EQUIPMENT, FACILITIES OR SERVICES; THIRD PARTY CONSEQUENTIAL DAMAGES; AND INJURY TO PROPERTY. Cerner is not liable for any damages of any kind or nature related to or arising from the Sublicensed Software, Equipment, or Third-Party Services. Any liability limitations set forth in the third-party pass-through provisions state the maximum liability of the applicable supplier with respect to that product or service. Notwithstanding any other provision herein, Cerner's maximum liability for any claim or series of related claims arising under this Agreement is limited to the amount paid by Client to Cerner for the affected solution or Cerner Services during the 12 months preceding the event giving rise to the claim.



- 5.9 Force Majeure. Except for obligations to pay for Services performed and products delivered, neither party will be responsible for failing to perform due to causes beyond its reasonable control, including, but not limited to, failures by Cerner's suppliers or subcontractors, war, sabotage, riots, civil disobedience, acts of governments and government agencies, labor disputes, accidents, fires, acts of terrorism, or natural disasters. The delayed party will perform its obligations within a reasonable time after the cause of the failure has been remedied, and the other party will accept the delayed performance.
- 5.10 <u>Limitation on Actions</u>. Client may not bring any action arising out of any transaction under this Agreement more than one year after the cause of action accrues. Cerner may not bring any action arising out of any transaction (other than failures to pay, to the extent permitted by applicable law) more than two years after the cause of action accrues.

6. GENERAL PROVISIONS

- 6.1 <u>Termination of Services</u>. Client may not terminate Support before the end of twelve (12) months after First Productive Use of the applicable Licensed Software, after which time it may terminate Support for an item of Licensed Software upon 180 days' prior written notice to Cerner. If Client terminates Support and later elects to re-start Support, Client will pay a catch-up payment equal to the amount of Support fees that would have been due during the suspension period. Cerner may not terminate Support for an item of Licensed Software for a period of 2 years after First Productive Use of such item; however, Cerner may suspend Support or other services if Client (a) fails to pay invoices, (b) attempts to modify the Licensed Software, or (c) creates and uses programs that write to Cerner databases.
- 6.2 <u>Termination of the Agreement</u>. This Agreement remains effective until all Services expire or are terminated in accordance with this Agreement.
 - A. <u>Termination of Agreement</u>. Either party may terminate this Agreement if the other party materially breaches this Agreement by sending a notice specifying each breach with reasonable detail and this Agreement will be terminated, unless (i) the breaching party cures the breach within 30 days following receipt of the notice, or (ii) with respect to a breach which may not reasonably be cured within a 30-day period, the breaching party commences, is diligently pursuing cure of, and cures the breach as soon as practical.
 - B. <u>Termination of Ordering Documents</u>. Either party may terminate an Ordering Document if the other party materially breaches any provision of the Ordering Document (including any terms of this Agreement applicable to the Ordering Document) so long as the terminating party sends a notice of termination to the other party specifying each breach. The applicable Ordering Document (and any associated Services) will be terminated 30 days following delivery of the notice unless the breach is cured within the 30-day period.
 - C. <u>Transition and Termination</u>. If this Agreement expires or either party has a right to terminate this Agreement, Cerner will, upon request by Client, provide reasonable assistance on a time-and-materials basis for up to 24 months after notice of termination to allow Client to transfer to another vendor. Upon termination, Client will pay for all Services provided up to the date of termination and all other amounts owed under this Agreement including, but not limited to, fees due for the remaining contracted term (or renewal term) for the applicable Services. In addition, Client will immediately cease all use of the Licensed Software, Sublicensed Software and Services, and each party will promptly destroy all copies of the other party's Confidential Information.
- 6.3 Arbitration and Injunctive Relief. Cerner and Client will work cooperatively to resolve any dispute arising out of or relating to this Agreement (including claims relating to the negotiations and the inducement to enter into the Agreement) ("Dispute") amicably at appropriate management levels. If a Dispute remains unresolved and a party wishes to escalate to a formal dispute resolution forum the party will submit the Dispute to binding arbitration at a site in the Salt Lake City, Utah metropolitan area under the Federal Arbitration Act ("FAA") and under the then-current Commercial Arbitration Rules of the American Arbitration Association, Inc. ("AAA"), or in the alternative, the parties may mutually agree in writing that the Dispute shall be brought in a federal court of competent jurisdiction. The arbitration. The parties will share equally in the fees and expenses of the arbitrator(s) and the cost of the facilities used for the arbitration hearing, but will otherwise bear their respective fees, expenses, and costs incurred in connection with the arbitration. Judgment on any arbitration award, including damages, may be entered and enforced in any U.S. court having jurisdiction. Each party acknowledges that any breach of its obligations with respect to the other party's intellectual property rights will result in



an irreparable injury for which money damages will not be an adequate remedy and that the non-breaching party is entitled to injunctive relief in addition to any other relief a court may deem proper.

6.4 <u>Availability of Records</u>. Until 4 years after the furnishing of services hereunder, Cerner will make available to the Secretary of the Department of Health and Human Services and the U.S. Comptroller General, or their representatives, its books, documents, and records necessary to verify the nature and extent of the costs of those services, in accordance with Section 952 of the Omnibus Reconciliation Act of 1980.

Cerner CERNER BUSINESS AGREEMENT

- 6.5 FDA. Client and Cerner agree to promptly notify the other party of, and cooperate fully in responding to, inquiries and inspections by the U.S. Food and Drug Administration (the "FDA") and other regulatory bodies with respect to the System. Client agrees that prior to First Productive Use of the System, it will perform whatever tests it deems necessary to verify that the System, as used by Client, complies with all FDA and other governmental, accrediting, and professional regulatory requirements applicable to Client's use of the System in Client's environment.
- 6.6 Information Management Tools. Client acknowledges and agrees that the Licensed Software and Services are information management tools, many of which contemplate and require the involvement of professional medical personnel, and because medical information changes rapidly, some of the medical information and formulas may be out of date. Information provided is not intended to be a substitute for the advice and professional judgment of a physician or other professional medical personnel. Client acknowledges and agrees that physicians and other medical personnel should never delay treatment or make a treatment decision based solely upon information provided through the Licensed Software or Services. Client further acknowledges and agrees that the Licensed Software and Services are not intended to diagnose disease, prescribe treatment, or perform any other tasks that constitute or may constitute the practice of medicine or of other professional or academic disciplines.
- 6.7 <u>Intellectual Property</u>. Cerner retains all right, title, and interest, including intellectual property rights and all other rights, in the Licensed Software, Services, and Work Product. Cerner grants to Client a non-exclusive, non-transferable license to use Work Product for Client's own internal purposes in conjunction with the Services and for no other purpose.
- 6.8 Confidentiality. Except as permitted under this Agreement or as otherwise necessary to perform its obligations hereunder, Cerner and Client will not, nor will they permit their respective employees, agents, attomeys, or independent contractors to, disclose, use, distribute, sell, license, publish, or otherwise make available Confidential Information of the other party. Cerner and Client will each (a) secure and protect the other party's Confidential Information using the same or greater level of care that it uses to protect its own confidential and proprietary information of like kind, but no less than a reasonable degree of care, and (b) require their respective employees, agents, attorneys, and independent contractors who have a need to access Confidential Information to be bound by confidentiality obligations sufficient to protect the Confidential Information. Client will use Cerner Confidential Information accessed on restricted portions of Cerner.com only for the purpose of supporting its permitted use of the System or Services. Either party may disclose the other party's Confidential Information to the extent required by applicable law or regulation, including without limitation any applicable Freedom of Information Act or sunshine law, or by order of a court or other governmental entity, in which case the disclosing party will notify the other party as soon as practicable prior to such disclosure and no later than 5 business days after receipt of the order or request.
- 6.9 <u>HIPAA</u>. For Services requiring Cerner's use or disclosure of "protected health information" as defined under HIPAA, the parties agree to comply with the Business Associate Agreement attached as Exhibit B, which is incorporated herein by reference.
- 6.10 Access to Data. Cerner may use and disclose the Data for purposes permitted by HIPAA, and as necessary to perform and improve the Services or as agreed upon in an Ordering Document. Client agrees that Cerner may use and disclose performance and usage data for any purpose permitted by law so long as the data does not contain protected health information (as defined under HIPAA) or Client-specific identifiable information. In addition, Cerner may de-identify Data in accordance with the standards set forth in 45 C.F.R. 164.514(b) and may use and disclose such Data unless prohibited by applicable law.
- 6.11 <u>Notices</u>. All notices, requests, demands, or other communications relating to the other party's failure to perform or which otherwise affect either party's rights under this Agreement will be deemed properly given when furnished by receipted hand-delivery to the other party, deposited with an express courier, or deposited with the U.S. Postal Service (postage prepaid, certified mail, return receipt requested). The sender will address all notices, requests, demands, or other



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communications to the recipient's address as set forth on the signature page, and in the case of Cerner, to the attention of President; in the case of Client, to the attention of Chief Executive Officer.

- 6.12 <u>Change of Product Line</u>. Cerner may add, delete, or change the specifications with respect to products comprising Cerner's product line (but in no case reduce the overall functionality of same), and neither Client nor any third party will have a claim against Cerner regarding such modification.
- 6.13 <u>Governing Law</u>. This Agreement will be governed by, interpreted, and enforced in accordance with the laws of the State of Wyoming, excluding Wyoming's conflict of laws rules that would apply the substantive law of another jurisdiction.
- 6.14 <u>Severability</u>. This Agreement obligates the parties only to the extent that its provisions are lawful. Any provision prohibited by law will be ineffective (but only to the extent that, and in the locations where, the prohibition is applicable). The remainder of the Agreement will remain in full force and effect if the Agreement can continue to be performed in furtherance of the Agreement's objectives.
- 6.15 <u>Assignment</u>. Neither party may assign this Agreement or any Ordering Document, in whole or in part, without the prior written consent of the other party, except to an affiliate or pursuant to a merger, acquisition or the purchase of all or substantially all of the party's assets; provided, however, any assignment to a competitor of the other party will be void unless the other party provides its prior written consent. Any assignment of this Agreement or any Ordering Document in violation of this section is void.
- 6.16 <u>Entire Agreement</u>. This Agreement constitutes the entire agreement of the parties for the subject matter of the Agreement. This Agreement supersedes and terminates any prior and contemporaneous agreements, understandings, representations, claims, statements, or negotiations with respect to the subject matter of this Agreement. This Agreement may not be amended or qualified except by a writing executed by authorized officers of each party.
- 6.17 Survival. The following sections survive termination of this Agreement: 1 (Licensed Software), with respect to Cerner proprietary rights; 3.1 (Pass Through Provisions); 5.4 (Cerner Indemnity) with respect to any Third-Party Claims arising prior to termination; 5.5 (Client Indemnity); with respect to any Claims arising prior to termination and any use of the Licensed Software or Services following termination; 5.7 (Limitation of Liability); 5.9 (Limitation on Actions); 6.3 (Arbitration and Injunctive Relief); 6.6 (Information Management Tools); 6.7 (Intellectual Property); 6.8 (Confidentiality); 6.11 (Notices); 6.13 (Governing Law); and 6.18 (No Hire).
- 6.18 No Hire. Cerner and Client agree that, without the prior consent of the other party, neither will offer employment to or discuss employment with any of the other party's employees until one year after this Agreement is terminated; provided, the foregoing does not prohibit a general non-targeted solicitation of employment in the ordinary course of business or prohibit a party from hiring a person who contacts the hiring party at his or her own initiative without any direct or indirect solicitation by or encouragement from the hiring party.
- 6.19 <u>Waiver</u>. Waivers of and consents to any term, condition, right or remedy under this Agreement must be in writing to be effective. No waiver or consent granted for one matter or incident will be a waiver or consent for any different or subsequent matter or incident.
- 6.20 <u>Purchase Orders</u>. If Client submits its own form of purchase order to request products or Services from Cerner, any terms and conditions on the purchase order are of no force or effect and are superseded by this Agreement.
- 6.21 <u>Independent Contractor</u>. Cerner is an independent contractor, and none of Cerner's employees or agents will be deemed employees or agents of Client. None of the terms in this Agreement will be construed as creating a partnership, joint venture, agency, master-servant, employment, trust, or any other relationship between Client and Cerner or any of their employees.
- 6.22 <u>Allocation of Risk</u>. The parties are both sophisticated entities. The prices paid, the warranties, warranty disclaimers, limitations of liability, remedy limitations, and all other provisions of this Agreement, were negotiated to reflect and support an informed and voluntary allocation of risks between Client and Cerner, and both parties waive all protections of any trade practices statutes.
- 6.23 <u>Compliance with Laws</u>. Each party agrees to comply with all applicable laws, rules, and regulations.



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7. DEFINITIONS

- 7.1 Cerner Services means the services provided by Cerner and set forth in an Ordering Document.
- **7.2** Communications Rule means the requirements set forth in 45 CFR § 170.403, *Communications*, of the 21st Century Cures Act.
- 7.3 Confidential Information means all technical, business, financial, and other information that is disclosed by either party to the other, whether orally or in writing, any disputes between the parties, the terms of this Agreement, pricing, Services, Work Product, Data (other than Protected Health Information, as defined by the Health Insurance Portability and Accountability Act, which is protected in accordance with the Business Associate Agreement), Documentation, all information and materials accessible on Cerner.com "Client-only" access, and all non-public information related to Cerner products, services and/or methodologies. "Confidential Information" does not include (a) information publicly available through no breach of this Agreement, (b) information independently developed or previously known by Client or Cerner, (c) information rightfully acquired from a third party not under an obligation of confidentiality, or (d) Protected Communications.
- 7.4 Data means data that is collected, stored, processed or generated through Client's use of the System or Services.
- 7.5 Documentation means the printed and on-line materials that assist Users, as updated from time to time.
- 7.6 Equipment means all equipment components provided by Cerner under an Ordering Document.
- 7.7 First Productive Use means Client's first use of an item of Licensed Software or a service to send patient, health plan, or materials information for clinical, financial, or operational use.
- 7.8 Licensed Software means the machine-readable form of software programs developed by Cerner and identified in an Ordering Document and all items of applicable Documentation. It also includes New Releases, as well as any Cerner-developed content. "Licensed Software" does not include source code, Sublicensed Software, or any third-party program.
- 7.9 Material Error means either an error that materially, adversely affects operation of the entire System or that creates a serious loss of functionality important in the daily operation of a single module and for which a work around is not available.
- 7.10 New Release means the distinctly identified (e.g. Release HNAM.20XX.01), comprehensive collection of updates and enhancements to the Licensed Software that Cerner makes generally commercially available.
- 7.11 Ordering Document means the document (such as a schedule or sales order) setting forth the items being purchased by Client, scope of use, pricing, payment terms, and any other relevant terms, which will be a part of and be governed by the terms and conditions of this Agreement.
- 7.12 Permitted Facility means an entity identified as such in an Ordering Document and for whom Client (a) owns at least 50%, or (b) has the right to determine management direction.
- 7.13 Protected Communications means those communications protected by the Communications Rule which include: (i) the usability, interoperability, or security of the Licensed Software or Cerner Services, (ii) relevant information regarding Users' experiences when using the Licensed Software or Cerner Services, (iii) Cerner's business practices related to exchanging electronic health information, and (iv) the manner in which a User uses the Licensed Software or Cerner Services.

Client may only engage in Protected Communication involving the use of screenshots or videos if Client (i) does not alter the screenshot or video other than to annotate or resize it; and (ii) limits the sharing of the screenshot or video to the number and length needed to accomplish the purpose of the Protected Communication. Client may only engage in Protected Communications involving videos to the extent the video addresses temporal matters that cannot be communicated through screenshots or other forms of communication.

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Protected Communications do not include the following: (i) non-user-facing aspects of the Licensed Software or Cerner Services (such as source and object code, software documentation, design specifications, flowcharts, algorithms, file and data formats, and security vulnerabilities that are not public knowledge), (ii) communication that involves the use or disclosure of intellectual property within the Licensed Software or Cerner Services (other than those communications which would reasonably constitute "fair use" under applicable intellectual property law), and (iii) information or knowledge solely acquired in the course of Client's participation in pre-market development and testing activities. Notwithstanding the foregoing, Protected Communications may not be restricted to the extent the communication is required by law or is about:

- adverse events, hazards, and other unsafe conditions and is made to government agencies, health care (a) accreditation organizations, and patient safety organizations;
- cybersecurity threats and incidents and is made to government agencies; (b)
- information blocking and other unlawful practices and is made to government agencies; or (c)
- Cerner's failure to comply with a Condition of Certification requirement under the 21st Century Cures Act, or with any other requirement of this part and is made to the Office of the National Coordinator or an ONC-Authorized (d) Certification Body.

Client recognizes that Cerner has a legitimate interest in the Protected Communications, and that if Cerner is not made aware of the issues detailed in a Protected Communication, Cerner is not able to resolve, correct, or explain them. As such, Cerner encourages Client to report all such issues and Protected Communications through Cerner's standard support process. This definition shall be construed to enable full compliance with the Communications Rule.

- Services mean the Cerner Services and Third-Party Services, as modified and enhanced from time to time. 7.14
- Solution Description means the document provided by Cerner describing the applicable Licensed Software or Service. 7.15
- Sublicensed Software means all third-party software and content listed on an Ordering Document. 7.16
- Support means Cemer's ongoing effort to keep the Licensed Software in working order and to sustain the useful life of 7.17 the Licensed Software, including New Releases.
- System means the Equipment, Sublicensed Software, and Licensed Software listed on an Ordering Document. 7.18
- Third-Party Services means the services provided by a third party and described in an Ordering Document. 7.19
- User means an individual person to whom Client provides a unique password and sign-on ID for access to the Licensed 7.20 Software or Services.
- Work Product means any documentation, techniques, methodologies, inventions, analysis frameworks, software, or procedures developed, conceived, or introduced by Cerner in the course of Cerner performing Services, whether acting 7.21 alone or in conjunction with Client or its employees, Users, affiliates or others. Work Product does not include any Confidential Information of Client.



EXHIBIT A SUPPORT SERVICES

Following is a high-level description of the benefits received through the payment of Support fees:

1)	Immediate Response Center ("IRC")	Cerner's support center that is staffed 24 hours per day, 7 days per week to resolve client mission-critical issues
2)	Call Center	Cerner's support center that is available for non-mission critical problem determination, resolution, or identification of alternatives through consultative assistance on solution functionality.
3)	Client Care Team	Cerner's support center that is available for training, Cerner events, financial and quote information.
4)	Secured Communication	A data communications mechanism that facilitates problem resolution at the client site (secure and efficient method for service and support).
5)	New Releases	Licensed Software updates that deliver increased functionality over time and allow the software to remain current with various technologies.
6)	Knowledge transfer during service events	Education provided to Client's personnel during problem resolution leading to greater Client self-sufficiency.
7)	Service Escalation Process	Defined process for any client to escalate an issue (whenever the client feels a service or support issue is not being addressed) to receive executive management focus.
8)	Complete Service Record	Complete client service record identifying service issues, history, trends, and patterns.
9)	On-Line Demographic Profile (Solution/technical attributes)	Knowledge of client technical environment, supporting an efficient and effective problem resolution process (assumes hardware and Sublicensed Software Maintenance through Cerner).
10)	Telephone, e-mail, Internet	For the convenience of Client, Cerner offers multiple avenues of communication for support requests and for support services.
11)	Cerner.com	Internet access to solution documentation, communities of interest, announcements, on- line service request entry and the ability to review service activity.
12)	Proactive Solution and Service Flashes	Advance information concerning new solutions, upcoming corrections, patches, etc.
13)	Access To Cerner Direct	Access to a direct channel for ordering technology with 24-hour turnaround with discounted or competitive pricing through Cerner.com or the Cerner Direct Order Desk.

Cerner periodically improves and revises the content and delivery of its Support services to better meet the needs of clients; therefore, more specific details concerning the above services are available on Cerner.com.



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EXHIBIT B BUSINESS ASSOCIATE PROVISIONS

 <u>Definitions</u>. Capitalized terms used in this Exhibit, but not otherwise defined, shall have the same meanings set forth in the Privacy Rule, the Security Rule, and the HIPAA Omnibus Final Rule (the "Final Rule"), which definitions are incorporated into this Exhibit by reference.

Electronic PHI has the same meaning given to such term under the Privacy Rule and the Security Rule, including, but not limited to, 45 C.F.R. § 160.103, as applied to the information that Cerner creates, receives, maintains or transmits from or on behalf of Covered Entity.

PHI has the same meaning as the term "protected health information" in 45 C.F.R. § 160.103, as applied to the information created, received, maintained or transmitted by Cerner from or on behalf of Covered Entity.

Individual has the same meaning as the term "Individual" in 45 C.F.R. § 164.501 and includes a person who qualifies as a personal representative in accordance with 45 C.F.R. § 164.502(g).

Privacy Rule means the Standards for Privacy of Individually Identifiable Health Information at 45 C.F.R. Part 160 and Part 164, Subparts A and E.

Security Incident has the same meaning given to such term in 45 C.F.R. § 164.304.

Security Rule means the Security Standards at 45 C.F.R. Part 160 and Part 164, Subparts A and C.

- 2. <u>Term</u>. This Exhibit commences on the Effective Date and will terminate when all of the PHI provided by Covered Entity to Cerner, or created or received by Cerner on behalf of Covered Entity, is destroyed or returned to Covered Entity, or if it is infeasible to return or destroy PHI, protections are extended to such information, in accordance with Section 19(b) below.
- 3. Uses and Disclosures of PHI Pursuant to Cerner Business Agreement. Cerner may use or disclose PHI to perform functions, activities or services for, or on behalf of, Covered Entity as specified in the Cerner Business Agreement, provided that such use or disclosure would not violate the Privacy Rule if done by Covered Entity. Except as expressly provided in the Cerner Business Agreement or this Exhibit, Cerner will not assume any obligations of Covered Entity under the Final Rule. To the extent that Cerner is to carry out any of Covered Entity's obligations under the Privacy Rule pursuant to the terms of the Cerner Business Agreement or this Exhibit, Cerner will comply with the requirements of the Privacy Rule that apply to Covered Entity in the performance of such obligation(s).
- 4. Use of PHI for Management, Administration, and Legal Responsibilities. Cerner may use PHI as necessary for the proper management and administration of Cerner or to carry out legal responsibilities of Cerner.
- 5. <u>Disclosure of PHI for Management, Administration, and Legal Responsibilities</u>. Cerner may disclose PHI received from Covered Entity for the proper management and administration of Cerner or to carry out legal responsibilities of Cerner, provided: (i) the disclosure is Required by Law; or (ii) Cerner obtains reasonable assurances from the person to whom the PHI is disclosed that it will be held confidentially and used or further disclosed only as Required by Law or for the purposes for which it was disclosed to the person, the person will use appropriate safeguards to prevent use or disclosure of the PHI, and the person notifies Cerner of any instance of which it is aware in which the confidentiality of the PHI has been breached.
- 6. <u>Data Aggregation</u>. Cerner may use or disclose PHI to provide data aggregation services for the Health Care Operations of the Covered Entity as permitted by 45 C.F.R. § 164.504(e)(2)(i)(B), including use for statistical compilations, reports and all other purposes allowed under applicable law.
- 7. <u>De-Identified Data</u>. Cerner may de-identify PHI in accordance with the standards set forth in 45 C.F.R. § 164.514(b) and may use or disclose such data for any purpose. The Parties agree that any PHI provided to Cerner hereunder which is later de-identified and therefore no longer identifies an Individual (i.e., is no longer "protected health information" as defined by 45 C.F.R. § 160.103) will no longer be subject to the provisions set forth in this Exhibit.

- 8. <u>Appropriate Safeguards</u>. Cerner will establish and maintain appropriate safeguards and will, after the compliance date of the Final Rule, comply with the Security Rule with respect to Electronic PHI, to prevent use or disclosure of such Electronic PHI other than as provided for by the Cerner Business Agreement and this Exhibit.
- 9. Reports of Improper Use or Disclosure, Security Incident or Breach. Cerner will report to Covered Entity any use or disclosure of PHI not permitted under this Exhibit, Breach of Unsecured PHI or Security Incident, without unreasonable delay, and in any event no more than thirty (30) days following discovery; provided, however, that the Parties acknowledge and agree that this Section constitutes notice by Cerner to Covered Entity of the ongoing existence and occurrence of attempted but Unsuccessful Security Incidents (as defined below). "Unsuccessful Security Incidents" include, but are not limited to, pings and other broadcast attacks on Cerner's firewall, port scans, unsuccessful log-on attempts, denials of service and any combination of the above, so long as no such incident results in unauthorized access, use or disclosure of PHI. Cerner's notification to Covered Entity of a Breach include: (i) the identification of each individual whose Unsecured PHI has been, or is reasonably believed by Cerner to have been, accessed, acquired or disclosed during the Breach; and (ii) any particulars regarding the Breach that Covered Entity would need to include in its notification, as such particulars are identified in 45 C.F.R. § 164.404.
- 10. <u>Subcontractors and Agents</u>. In accordance with 45 C.F.R. § 164.502(e)(1)(ii) and 45 C.F.R. § 164.308(b)(2), as applicable, Cerner will enter into a written agreement with any agent or subcontractor that creates, receives, maintains or transmits PHI on behalf of Cerner for services provided to Covered Entity, providing that the agent agrees to restrictions and conditions that are substantially similar to those that apply through this Exhibit to Cerner with respect to such PHI.
- 11. Designated Record Set. To the extent Cerner maintains PHI in a Designated Record Set, Cerner shall:
 - A. To the extent applicable, make available PHI in accordance with 45 C.F.R. § 164.524. If an Individual makes a request for access pursuant to 45 C.F.R. § 164.524 directly to Cerner, or inquires about his or her right to access, Cerner will either, at Cerner's discretion, respond to such request, forward such request to Covered Entity, or direct the Individual to Covered Entity.
 - B. To the extent applicable, make available PHI for amendment and incorporate any amendments to PHI in accordance with 45 C.F.R. § 164.526. The evaluation of and requests for amendment of PHI maintained by Cerner will be the responsibility of Covered Entity. If an Individual submits a written request for amendment pursuant to 45 C.F.R. § 164.526 directly to Cerner, or inquires about his or her right to amendment, Cerner will either forward such request to Covered Entity or direct the Individual to Covered Entity.
- 12. Documentation of Disclosures. Cerner agrees to document such disclosures of PHI and information related to such disclosures as would be required for Covered Entity to respond to a request by an Individual for an accounting of disclosures of PHI in accordance with 45 C.F.R. § 164.528. Cerner will document, at a minimum, the following information ("Disclosure Information"): (i) the date of the disclosure, (ii) the name and, if known, the address of the recipient of the PHI, (iii) a brief description of the PHI disclosed, (iv) the purpose of the disclosure that includes an explanation of the basis for such disclosure, and (v) any additional information required under the HITECH Act and any implementing regulations.
- 13. <u>Provide Accounting of Disclosures</u>. Cerner agrees to provide to Covered Entity, information collected in accordance with Section 12 of this Exhibit, to permit Covered Entity to respond to a request by an Individual for an accounting of disclosures of PHI in accordance with 45 C.F.R. § 164.528. If an Individual makes a request for an accounting of disclosures of PHI pursuant to 45 C.F.R. § 164.528 directly to Cerner, or inquires about his or her right to an accounting of disclosures of PHI, Cerner will either forward such request to Covered Entity or direct the Individual to Covered Entity.
- 14. <u>Mitigation</u>. To the extent practicable, Cerner will reasonably cooperate with Covered Entity's efforts to mitigate a harmful effect that is known to Cerner of a use or disclosure of PHI that is not permitted by this Exhibit.
- 15. <u>Minimum Necessary</u>. Cerner may use and disclose PHI provided or made available from Covered Entity to the minimum extent necessary to accomplish the intended purpose of the use, disclosure, or request, in accordance with 45 C.F.R. § 164.514(d), and any amendments thereto.
- Access to Books and Records. Cerner agrees to make its internal practices, books, and records relating to the use or disclosure of PHI received from, or created or received by Cerner on behalf of, Covered Entity available to the Secretary



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of the Department of Health and Human Services or the Secretary's designee for purposes of determining Covered Entity's compliance with the Privacy Rule.

- HIPAA Final Rule Applicability. Cerner acknowledges that enactment of the HITECH Act, as implemented by the Final 17. Rule, amended certain provisions of HIPAA in ways that now directly regulate, or will on future dates directly regulate, Cerner under the Privacy Rule and the Security Rule. Cerner agrees, as of the compliance date of the Final Rule, to comply with applicable requirements imposed under the Final Rule.
- Responsibilities of Covered Entity. Covered Entity will: 18.
 - A. Promptly notify Cerner of any limitation(s) in its Notice of Privacy Practices in accordance with 45 C.F.R. §164.520, to the extent that such limitation may affect Cerner's use or disclosure of PHI. Covered Entity will provide such notice no later than fifteen (15) days prior to the effective date of the limitation;
 - B. Promptly notify Cerner of any changes in, or revocation of, permission by an Individual to use or disclose his or her PHI, to the extent that such changes may affect Cerner's use or disclosure of PHI. Covered Entity will provide such notice no later than fifteen (15) days prior to the effective date of the change. Covered Entity will obtain any consent or authorization that may be required by the Privacy Rule, or applicable state law, prior to furnishing Cerner with PHI:
 - C. Promptly notify Cerner of any restriction on the use or disclosure of PHI that Covered Entity has agreed to or is required to abide by under 45 C.F.R. §164.522, to the extent that such restriction may affect Cerner's use or disclosure of PHI. Covered Entity will provide such notification no later than fifteen (15) days prior to the effective date of the restriction. If Cerner reasonably believes that any restriction agreed to by Covered Entity pursuant to this Section may materially impair Cerner's ability to perform its obligations under the Cerner Business Agreement or this Exhibit, the Parties will mutually agree upon any necessary modification of Cerner's obligations under such agreements; and
 - Not request Cerner to use or disclose PHI in any manner that would not be permissible under the Privacy Rule. the D. Security Rule or the Final Rule if done by Covered Entity, except as permitted pursuant to the provisions of Sections 4-7 of this Exhibit.

Effect of Termination. 19.

- Except as provided in Paragraph B of this Section 19, upon termination of the Cerner Business Agreement or this Α. Exhibit for any reason, Cerner will return or destroy all PHI received from Covered Entity, or created or received by Cerner on behalf of Covered Entity, and will retain no copies of the PHI.
- If it is infeasible for Cerner to return or destroy the PHI upon termination of the Cerner Business Agreement or this В. Exhibit, Cerner will: (i) extend the protections of this Exhibit to such PHI; and (ii) limit further uses and disclosures of such PHI to those purposes that make the return or destruction infeasible, for so long as Cerner maintains such PHI.
- Termination for Cause. Upon either Party's knowledge of a material breach by the other Party of this Exhibit, such 20. Party will provide written notice to the breaching Party stating the nature of the breach and providing an opportunity to cure the breach within sixty (60) days. Upon the expiration of such 60-day cure period, the non-breaching Party may terminate this Exhibit and, at its election, the Cerner Business Agreement, if cure is not possible.
- Cooperation in Investigations. The Parties acknowledge that certain breaches or violations of this Exhibit may result 21. in litigation or investigations pursued by federal or state governmental authorities of the United States resulting in civil liability or criminal penalties. Each Party will cooperate in good faith in all respects with the other Party in connection with any request by a federal or state governmental authority for additional information and documents or any governmental investigation, complaint, action or other inquiry.
- No Third-Party Beneficiaries. Nothing herein, express or implied, is intended to or confers upon any other person or 22. entity, any legal or equitable right, benefit or remedy of any nature whatsoever under or by reason of this Exhibit.



Cerner Confidential Information



Effect of Contract. In the event of inconsistency between the provisions of this Exhibit and mandatory provisions of the 23. Privacy Rule, the Security Rule or the Final Rule, or their interpretation by any court or regulatory agency with authority over Cerner or Covered Entity, such interpretation will control; provided, however, that if any relevant provision of the Privacy Rule, the Security Rule or the Final Rule is amended in a manner that changes the obligations of Cerner or Covered Entity that are embodied in terms of this Exhibit, then the Parties agree to negotiate in good faith appropriate non-financial terms or amendments to this Exhibit to give effect to such revised obligations. Where provisions of this Exhibit are different from those mandated in the Privacy Rule, the Security Rule or the Final Rule, but are nonetheless permitted by such rules as interpreted by courts or agencies, the provisions of this Exhibit will control.



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Contract Check List

This check list summarizes the purpose, cost and other contract provisions contained in the contract and assures that the contract has been reviewed by both the CEO and In-House Legal Counsel.

- 1. Name of Contract: HVAC Upgrade Project Engineering Services
- Purpose of contract, including scope and description: ST+B has provided MHSC with proposal for engineering services for HVAC Upgrade Project. Project will provide new central station air handling unit with ventilation. Design will include all architectural drawings and Fast Track Delivery so that grant funds can be expended by December 15, 2020 (See attached Proposal for specifics)
- 3. Effective Date: Services will begin upon approval of the Proposal by MHSC Board of Trustees
- Expiration Date: Unless terminated (as outlined in Termination provision of the Terms and Conditions) prior to completion of the project the proposal will expire upon completion of the project.
- 5. Termination provisions: Yes section 9 of Terms and Conditions (attached) 7 day notice by client to ST+B but must pay for all services provided up to date of termination Is this auto-renew? No

6. Monetary cost of the contract: HVAC Upgrades Fees \$210,330.00 based on Professional Design Services budget of approx. 9.0% of the approved grant cost of \$2,314,000.00. Concept design phase \$52,582.50 Bid packages and contract procurement \$94,648.50 Construction contract administration \$63,099.00 = \$210,330.00 Budgeted? NA being funded by SLIB through Corona Virus Relief Fund. These funds have to be expended and invoiced to SLIB by December 15th 2020 with a project completion date of December 30, 2020. 7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. State of Wyoming Section 33 Terms and Conditions

- 8. Any confidentiality provisions? NO
- 9. Indemnification clause present? Yes Section 32
- 10. Is this contract appropriate for other bids? NO
- 11. Is County Attorney review required? NO



August 12th, 2020

James Horan, Director Facilities Support Services Memorial Hospital of Sweetwater County 1200 College Drive Rock Springs, WY 82901

RE: Memorial Hospital of Sweetwater County (MHSC) HVAC Upgrade Project in Response to Covid Proposal for MEP Engineering Services

Dear Mr. Horan:

Spacek Timble and Blevins Engineering, Inc. ("ST+B") is pleased to submit a proposal for engineering services for the above referenced project.

SCOPE OF SERVICES:

Professional services for the Design, Bidding & Procurement and Construction Contract Administration of the HVAC Upgrade project recently approved the State Lands & Investment Board and previously described in various correspondence. Proposal includes Professional Engineering and Architectural services to complete the project which is described briefly as follows:

HVAC Upgrades

- 1. Provide new central station air handling unit with accompanying energy recovery ventilation system to support the decommissioning of aged HVAC assets S-3, S-4, and S-6. Design of new equipment to accommodate future backfeed of building areas served by S-1 on the main level only.
- 2. Design to include Architectural, Structural, Mechanical, Electrical, Plumbing and Fire Protection drawings as needed to depict the required scope. Drawings to be accompanied with Project Manual (Specifications)
- 3. Fast Track Delivery The project grant stipulates it will only reimburse expenses incurred in advance of December 15th, 2020. To that end, we anticipate an expedited delivery method with multiple packages currently conceived as follows:
 - a. Bid Package #1: Equipment Procurement (Wednesday 8/12/2020) Drawings & Specs (ST+B only) to facilitate vendor bidding & likely Owner direct purchase of the AHU and OA unit to get these items in the manufacturing queue.
 - b. Bid Package #2: CMAR RFP, pending Board approval (Friday 8/14/2020). We recommend targeting CMAR selection and authorization to proceed no later than August 31.
 - c. Bid Package #3: Controls (Friday 8/14/2020). Package for procurement of controls scope. Contract to be assigned to the successful CMAR.
 - d. Bid Package #4: MEP Build out (Wednesday 8/26/2020). This package to include

drawings and specifications for the MEP infrastructure required to support the new equipment including ductwork, piping, roof drain, power and lighting scope. CMAR to lead bidding and procurement of MEP subcontracts.

e. Bid Package #5: Structural and Architectural Package (mid September, 2020). CMAR to lead bidding and procurement of Building Systems subcontractors.

UVC Upgrades

1. Provide professional design services to add Ultraviolet Germicidal Irradiation capability to existing Air Handling Units not being scheduled to be replaced. A single bid package, with conventional bidding process is anticipated.

Professional Services Description:

- 1. Review existing conditions and document.
- 2. Provide Drawings and Specifications as needed to support the permitting, bidding & negotiation, contractor procurement.
- 3. Participate in Fast Track procurement packages.
- 4. Provide Permitting Phase services as required to submit for required Permits with the local Authority Having Jurisdiction (City of Rock Springs, Electrical and Fire Safety Only), the State Department of Health Office of Licensing and Survey, and the State Department of Environmental Quality, Air Quality Control Division, Asbestos Program
- 5. Provide Multiple Bid Packages and Bidding Phase services as required to support Contract Procurement including Conducting Pre-Bid conference, Answer Bidder Questions, producing Addenda as needed, and participation in Bid Opening, Evaluation of Bids and Contractor selection.
- 6. Perform Construction Administration Services including review and approval of Application for Payment, Submittals, Shop Drawings and Change Order request.
- 7. Respond to requests for information and provide clarification of the Contract Documents as necessary.
- 8. Perform Construction Observation visits to review the Installed Work for consistency with Design Intent and provide follow up report.
- 9. Perform Construction Closeout visit for Final Punch.
- 10. Perform Final Inspection.

PROPOSED FEE:

HVAC Upgrades - Estimated at Two Hundred Ten Thousand Three Hundred Thirty Dollars (\$210,330.⁰⁰) based on a Professional Design Services budget of approximately Nine Percent (9.0%) of the Approved Grant Cost Estimate of Two Million Three Hundred Fourteen Thousand Dollars (\$2,314,000.⁰⁰) and in accordance with the attached schedule.

Phase	Fee		% of Fee 25 %	
Concept Design Phase		52,582.50		
Bid Packages & Contract Procurement	\$	94,648.50	45 %	
Construction Contract Administration	\$	63,099.00	30 %	
Total	\$	210,330.00	100 %	



FEE BASIS:

Owner agrees to pay ST+B's fee as invoiced for this project based on ST+B's fees set forth above and all, incurred interest, REIMBURSABLE EXPENSES and SUPPLEMENTARY SERVICES.

TERMS AND CONDITIONS: We propose to utilize existing agreed upon terms & conditions that remain in full force and effect with the Plant Major Maintenance Project (PMMP) currently underway that were negotiated at that time and edited to mutually agreeable conditions between ST+B and MHSC Legal Counsel.

Thank you for the opportunity to provide this proposal. We sincerely hope to work with you on this project, and we are available to begin these services immediately upon receiving written authorization to proceed.

If you have any questions or need any additional information, please do not hesitate to contact me.

Best Redards, Jacob & Blevins, PE

Principal | Mechanical Engineer

Attachments: Terms and Conditions

Please sign below as an indication of your acceptance of the terms of this proposal and return a signed copy for our records.

Signature

Approval Name

Approval Date





1. GENERAL-

- 1.1. These Terms and Conditions accompany, and are an integral part of, the attached *Proposal* dated August 12th, 2020 between Spacek Timbie and Blevins Engineering, Inc ("ST+B") and Memorial Hospital of Sweetwater County (the "Client"). The Terms and Conditions herein are identical to those previously negotiated and agreed upon in accordance with the Plant Major Maintenance Project (PMMP) currently underway.
- 1.2. The accompanying Proposal and these Terms and Conditions shall remain valid for thirty (30) calendar days from the date set forth at the top of the proposal. Upon execution of the Proposal by Client or ST+B's commencement of the work without Client's objection to these Terms and Conditions, Client shall be bound by the Proposal and all of these Terms and Conditions (collectively the "Agreement"). Any additions, deletions or changes to the Proposal or these Terms and Conditions shall be in writing and executed by both Parties.

2. DEFINITIONS-

- 2.1. Agreement The attached Proposal document and these Terms and Conditions which collectively represent a formal offer by ST+B and subsequent acceptance by the Client.
- 2.2. Client The Contracting Party including its owners, directors, and employees.
- 2.3. Instruments of Service Any report, plans or specifications published by ST+B as part of the Scope of Services, any authorized Complementary Services, and any authorized or necessary Supplementary Services. ST+B accepts no liability for any Instruments of Service provided under this Agreement, until such documents are sealed and submitted for approval by all relevant authorities having jurisdiction and permit to perform the work is granted by those authorities.
- 2.4. Proposal including Project Description, Scope of Services, Fee Basis, suggested and authorized Complementary Services.
- 2.6. Reimbursable Expenses Costs incurred by ST+B and/or ST+B's subconsultants performing Scope of Services, Complementary Services, or Supplementary Services directly relating to the Project.
- 2.6. Scope of Services Defined in the attached Proposal portion of this document. Services not set forth in the Proposal are specifically excluded from the Scope of ST+B's services. ST+B assumes no responsibility to perform any services not specifically listed in the Proposal.
- 2.7. Supplementary Services Services beyond those defined in the Base Scope of Services or the agreed upon Complementary Services.
- 2.8. Terms and Conditions This document, providing details not defined or described in the Proposal.
- 2.9. Titles- Clauses in the Proposal and these Terms and Conditions are provided with TITLES for ease of document use in bold, italicized, all capital font. Titles are provided for general reference only and are not part of the Agreement.
- 2.10. Value Engineering The process of Project Scope and Value reduction and decision making resulting in redesign to reduce project cost.
- 3. REIMBURSABLE EXPENSES ST+B will invoice Reimbursable Expenses incurred directly relating to providing Scope of Services to the Project. Reimbursable Expenses shall be in addition to the Fee and invoiced at cost plus fifteen percent (15%). Supporting documentation, including copies of bills or receipts will not be provided under these Terms and Conditions. Should supporting documentation be requested by Owner or Client, ST+B will charge an administrative fee of \$100 (One Hundred Dollars) per monthly invoice requiring verification, plus \$1.00 (One Dollar) per page of supporting documentation provided in accordance with that request. Expenses considered reimbursable for this Project are as follows:
- 3.1. Large format printing, reproductions, and digital scans.
- 3.2. Postage, handling and delivery.
- 8.3. Mileage, not subject to 15% mark up, shall be invoiced at the current Standard Mileage Rate for Business as defined by the Internal Revenue Service.
- 3.4. Lodging, meals, airfare, rental car and rental car fuel costs for Travel required by the Project for Design or Construction Phase Meetings or Site Visits.
- 3.5. Travel time, not subject to 15% mark up, in accordance with Standard Hourly Rates schedule at 50% discount.
- 4. SUPPLEMENTARY SERVICES (As Required) Supplementary Services may be provided after execution of the Agreement, without invalidating the Agreement. With the exception of services required as a result of negligent act of omission of ST+B, Supplementary Services provided in accordance with this Section shall entitle ST+B to compensation and an appropriate adjustment in ST+B's Instruments of Service delivery schedule.
- 4.1. Authorization Required: ST+B shall notify the Client if it deems that Supplementary Services are necessary due to circumstances of the project related 7. to ST+B's Scope of Services. ST+B shall not proceed with the Supplementary Services until Client has provided written authorization:
- 4.1.1. Unique, experimental, prototype, or alternative system designs.
- 4.1.2. In-depth alternative materials or methods research.

- 4.1.3. Services resulting decisions or direction of the Owner or Client not being rendered in a timely manner or any other failure on the part of the Owner or Client or Clients consultants or contractors.
- 4.1.4. Preparation of design and documentation for alternate bid or proposal requests proposed by the Owner or Client
- 4.1.5. Services resulting from enactment or revision of Codes, Laws or Regulations or Authorities' interpretation thereof after preparation of the *Instruments of Service*.
- 4.1.6. Preparation for, attendance of, and follow up effort relating to any public presentation, meeting or hearing.
- 4.1.7. Preparation for, attendance of, and follow up effort relating any dispute resolution except where ST+B is a named party thereto.
- 4.1.8. Consultation concerning replacement of Work resulting from fire or other cause of damage during construction such as flood, exposure to weather, natural disaster or negligence or malicious acts by others.
- 4.1.9. Services resulting from the work of additional consultants retained by the Owner, including without limitation, Construction Managers, Value Engineers, Commissioning Agents, or Energy Efficiency Consultants.
- 4.1.10. Services relating to future facilities, systems, equipment or portions thereof and/or planning for tenant or rental spaces with yet to be determined use.
- 4.1.11. Services relating to coordination of design and construction performed by separate contractors or Work performed by Owner's own forces, or coordination of services required for equipment supplied by or construction performed by the Owner.
- 4.1.12. Providing services in connection with a change in the Owner and/or *Client's* representative during the course of the project.
- 4.2. Supplementary Services Fees: Any of the above services either requested by the Owner or Client or deemed necessary and vital to the Project by ST+B shall be invoiced in accordance with Standard Hourly Rates and Reimbursable Expenses.
- 5. BILLING AND PAYMENT The Client hereby acknowledges that prompt payment of ST+B's invoices is an essential component of ST+B's continued providing of service to the Client. In accordance with this acknowledgement, Client agrees to coordinate with ST+B preferred billing cycle, recipient of invoice, format of invoice, and other pertinent details to help Client expedite payment to ST+B.
- 5.1. ST+B will submit monthly invoices which shall be due upon receipt and shall be considered past due if not received within thirty (30) calendar days of the invoice.
- 5.2. If payment is not received by ST+B within forty five (45) calendar days of the invoice date, *Client* shall pay as interest an additional charge of 1.5% (One and One-half percent) of the Past Due Amount per month from the date of original invoice. Payment thereafter shall first be applied to accrued interest and then to unpaid principal.
- 5.3. Remit all payments to: ST+B Engineering, PO Box 3699; Evergreen, Colorado 80437 Attn: Todd Spacek
- 5.4. Standard Hourly Rates Calendar Year 2019. Services not defined with fixed fee shall be invoiced accordance with the Schedule as follows: Administrative Assistant, \$95; BIM Modeler/Drafting, \$120; BIM Coordinator/Manager, Junior Design Engineer, \$180; Design Engineer, \$155; Project Engineer/Commissioning Agent, \$165; Senior Project Engineer/Project Manager/Senior Commissioning Agent, \$180; Principal/Associate /Senior Project Manager, \$195.
- 6. DISPUTED INVOICES If the Client takes exception to any portion of an invoice, Client shall notify ST+B in writing within ten (10) business days of receipt of invoice. The Client shall indicate specific reason for exception taken, note the amount in dispute, and pay the portion of the invoice not in dispute in accordance with Billing and Payment. Any dispute over invoiced amounts due which cannot be resolved by direct negotiation between parties within ten (10) business days of dispute notification shall be resolved within thirty (30) calendar days in accordance with Mediation. Beginning on the due date of the disputed invoice, interest shall accrue and be paid by the Client on all disputed invoice amounts that are resolved in favor of ST+B.

Payments shall not be withheld, postponed or made contingent upon the completion, construction, or success of the Project or upon receipt of funds by the *Client* of credit or offsetting reimbursable from other parties who may have caused need for *Supplementary Services* or *Reimbursable Expenses*. No withholdings, deductions or offsets shall be made from ST+B's compensation for any reason unless ST+B has been found to be legally liable for such amounts.

COLLECTIONS COSTS - In the event legal action must be taken to enforce the payment terms of this Agreement, ST+B shall be entitled to collect from the Client all fees and Reimbursable Expenses due, plus reasonable attorney's fees, court costs, and other expenses incurred by ST+B for such collection action, and additionally, the reasonable value of ST+B's employees' time and ST+B's expense spent for



such collection action, computed according to ST+B's prevailing fee schedule and expense policies.

- 8. SUSPENSION OF SERVICES Full payment is expected within forty-five (45) calendar days of invoice date. If payment is not received within sixty (60) calendar days of the invoice date, ST+B reserves the right to suspend all services until all outstanding invoices are paid in full. If the Client fails to pay in accordance with Billing and Payment or is otherwise in breach of this Agreement, ST+B reserves the right to suspend performance of services upon seven (7) calendar days' notice to the Client. If default is not resolved within seven (7) calendar days, the Agreement may be terminated at ST+B's discretion.
- 9. TERMINATION In the event of Termination of this Agreement by either party, the Client shall within fifteen (15) calendar days of Termination pay ST+B for all services rendered and all reimbursable costs incurred by ST+B up to the date of Termination, in accordance with the Payment provisions of this Agreement.

The Client may terminate this Agreement for the Client's convenience and without cause upon giving ST+B not less than seven (7) calendar days' written notice.

Either party may terminate this Agreement for cause upon giving the other party not less than seven (7) days written notice for any of the following reasons:

- 9.1. Substantial failure by the other party to perform in accordance with the terms of this Agreement and through no fault of the terminating party.
- other entity without the prior written consent of the other party.
- 9.3. Suspension of the Project or ST+B's services by the Client for more than ninety (90) calendar days, consecutive or aggregate.
- 9.4. Material changes in the conditions under which this Agreement was entered into, the Scope of Services or the nature of the Project, and the failure of the parties to reach agreement on the compensation and schedule adjustments necessitated by such changes.

In the event of any Termination that is not the fault of ST+B, the Client shall pay ST+B, in addition to payment for services rendered and reimbursable costs incurred, for all expenses reasonably incurred by ST+B in connection with the orderly Termination of this Agreement, including but not limited to demobilization, reassignment of personnel, associated overhead costs, and all other expenses directly resulting from the Termination.

- 10. SCHEDULING/COORDINATION Client shall provide the necessary scheduling and coordination of its own forces and of other project consultants and subconsultants to permit the orderly and efficient completion of ST+B's services without delay, interference or interruption. ST+B will use reasonable efforts to meet schedules agreed to in advance by ST+B, and will perform services in a typical five-day, forty-hour work week with the exception of holidays, and without any premium time. If extended hours are required, ST+B and Client shall negotiate the terms of compensation for additional overhead, premium time costs, and productivity loss.
- 11. EXTENSION OF TIME/ADDITIONAL COSTS -- If ST+B is delayed in the performance of the services for any reason beyond its control, including delays caused in whole or in part by Project Owner, General Contractor, or any other contractor, subcontractor, Client or any other persons, entities or events, ST+B shall be entitled to reasonable additional costs incurred as a result of such delay, and to reasonable extension of agreed upon time in which to complete its services.
- 12. OWNERSHIP OF DOCUMENTS All reports, drawings, specifications, computer files, calculations, field data, notes and all other documents prepared by ST+B as Instruments of Service shall remain the property of ST+B. ST+B shall retain all common law, statutory and other reserved rights, including, without limitation, the copyrights thereto.
- 13. UNAUTHORIZED CHANGES In the event the Client, the Client's consultants, contractors or subcontractors or anyone for whom the Client is legally liable consents to, allows, authorizes or approves changes to any Instruments of Service, and these changes are not acknowledged in writing by ST+B, the Client recognizes that such changes and the results thereof are not the responsibility of ST+B. Therefore, the Client agrees to release ST+B from any liability arising from the construction, use or result of such changes. In addition, the Client agrees, to the fullest extent permitted by law, to indemnify and hold ST+B harmless from any damage, liability or cost (including reasonable attorneys' fees and costs of defense) arising from such changes, except only those damages liabilities and costs arising from the sole negligence or willful misconduct of ST+B.
- 14. THIRD PARTY BENEFICIARIES- Nothing contained in the Agreement shall create a contractual relationship with or cause action in favor of a third party against either the Client or ST+B. Services rendered by ST+B under this Agreement are performed solely for the Client's benefit, and no other party or entity

shall have any claim against ST+B because of this Agreement of the performance or nonperformance of services thereunder. The Client and ST+B agree to require similar provision in all contacts with contractors, subcontractors, subconsultants, vendors and other entities involved in this project to carry out the intent of this provision.

- 15. STANDARD OF CARE Services and Instruments of Service provided by ST+B under this Agreement will be performed in a manner consistent with that degree of care and skill ordinarily exercised by members of the same profession currently practicing under similar circumstances. Any expectation of perfection or performing services to the highest standard in the industry is specifically excluded, and Client therefore acknowledges there will be errors and omissions in the Instruments of Service. Consequently, both parties agree to recommend the Project Owner and/or General Contractor to establish a contingency amount within the total project budget or funding allocation to cover the costs of any errors or omissions. Upon receipt of notice, ST+B will correct services not meeting such a standard of care without additional compensation in accordance with the Agreement. ST+B's liability for services not meeting standard of care shall be limited to providing the services required to correct the condition and shall not include liability for any materials, equipment, labor, delay or acceleration costs, impact and sequencing costs, coordination costs, extended overhead and/or cost of deferred or lost profit by any or all parties associated with the Project.
- 9.2. Assignment of this Agreement or transfer of the Project by either party to any 16. OPINIONS OF PROBABLE COST In providing opinions of probable construction cost, the Client understands that ST+B has no control over the costs or the price of labor, equipment or materials, or over the Contractor's method of pricing, and that the opinions of probable construction costs provided herein are to be made on the basis of ST+B's qualifications and experience. ST+B makes no warranty, expressed or implied, as to the accuracy of such opinions as compared to bid or actual costs.
 - 17. SUBMITTAL AND SHOP DRAWINGS REVIEW ST+B shall review Contractor's submittals, such as shop drawings, product data, samples and other data, as required by ST+B, but only for the limited purpose of checking for general conformance with design concept and the information expressed in the Contract Documents. This review shall not include review of the accuracy or completeness of details, such as quantities, dimensions, weights or gauges, fabrications processes or finishes, construction means or methods, coordination with the work of other trades or construction safety precautions, all of which are the sole responsibility of the Contractor. ST+B's review shall be conducted with reasonable promptness while allowing sufficient time in ST+B's judgment to perform appropriate review. Review of a specific item shall not indicate that ST+B has reviewed the entire assembly of which the item is a component. ST+B shall not be responsible for any deviations from the Contract Documents not brought to the attention of ST+B in writing by the submitting Contractor at time of submittal. ST+B shall not be required to review partial submittals or those for which submittals of correlated items have not been received.
 - 18. CONSTRUCTION OBSERVATION In order to observe and become generally familiar with the progress and quality of the Work completed by the Contractor which falls within ST+B's Scope of Services, ST+B shall visit the site at intervals as defined in the Scope of Services, Complementary or Supplementary Services to determine if the Work is proceeding in general accordance with the Contract Documents. The Client has not retained ST+B to make detailed inspections or to provide exhaustive or continuous project review and observation services. ST+B does not guarantee the performance of, and shall have no responsibility for, the acts or omissions of any contractor, subcontractor, supplier or any other entity furnishing material or performing any work on the project.
 - 19. JOBSITE SAFETY Neither the services of ST+B, nor the presence of ST+B or its employees and subconsultants at a project site, shall relieve the Contractor and any other entity of their obligations, duties and responsibilities including, but not limited to, construction means, methods, sequences, techniques or procedures necessary for performing, superintending or coordinating all portions of the Work of construction in accordance with the contract documents and any health or safety cautions required by any regulatory agencies. ST+B and its personnel have no authority to exercise any control over any construction contractor or other entity or their employees in connection with their work or any health or safety precautions.
 - 20. HAZARDOUS MATERIALS It is acknowledged by both parties that ST+B's Scope of Services does not include any services related to asbestos, hazardous or toxic materials. ST+B shall have no responsibility for the identification, discovery, presence, handling, removal, disposal of, or exposure of, persons to hazardous materials in any form at the Project site. Should it become known in any way that such materials may be present at the Project site or any adjacent areas that may affect the performance of ST+B services, ST+B may, at its option and without liability for consequential or any other damages, suspend



or contractor to identify, abate and/or remove the hazardous material and warrant that the Project site is in full compliance with applicable laws and regulations.

- 21. CODES, STANDARDS AND REGULATORY COMPLIANCE ST+B shall put forth reasonable professional efforts to comply with applicable Codes, 29. WAIVER OF CONSEQUENTIAL DAMAGES - Notwithstanding any other Standards and Regulations in effect as of the date of submission of its Instruments of Service to building authorities. Changes necessitated by newly enacted or adopted Codes, Standards or Regulations after this date shall be considered Supplementary Services requiring additional compensation in accordance with this Agreement.
- 22. ASSIGNMENT OF CONTRACT Neither party to this Agreement shall transfer, sublet or assign any rights under or interest in this Agreement, including but not limited to monies that are due or monies that may be due without prior written consent to the other party. Subcontracting to subconsultants, normally contemplated by ST+B as a generally accepted business practice, shall not be considered an assignment for the purposes of this Agreement.
- 23. CHANGED CONDITIONS The Client shall rely on ST+B's judgment as to the continued adequacy of this Agreement in light of occurrences or discoveries that were not originally contemplated by or known by ST+B at the time of negotiating this Agreement. Should ST+B call for contract renegotiation, ST+B shall identify the changed conditions necessitating renegotiation and ST+B and the Client shall promptly and in good faith entre into renegotiation of this Agreement. If terms cannot be agreed to, the parties agree that either party has the absolute right to terminate this Agreement
- 24. CERTIFICATIONS, GUARANTEES AND WARRANTIES ST+B does not have full control over the completed Project and therefore cannot guarantee or warrant the services ST+B provides in association with the Project, or any aspect of the completed Project itself. Furthermore, ST+B shall not be required to sign any document, no matter by whom requested, that would result in ST+B providing certification, guarantee, or warranty of existing conditions or conditions constructed in accordance with ST+B's Instruments of Services provided in accordance with this Agreement. Resolution of any dispute shall not be contingent in any way upon ST+B providing any such certification.
- 25. MEDIATION In an effort to resolve any conflicts that arise during the design or construction of the Project or following completion of the Project, the Client and ST+B agree to cooperate in good faith, and if possible, resolve the issues without arbitration or litigation. Should the parties be unable to reach agreement themselves, the Parties shall mutually select an independent mediator and engage in nonbinding Mediation to assist in further effort to resolve the dispute. Costs of Mediation shall be shared equally between the parties, unless the parties mutually agree otherwise.

The Client and ST+B further agree to include a similar mediation provision in all agreements with independent contractors and consultants retained for the project and to require all independent contractors and consultants also to include a similar mediation provision in all agreements with subcontractors, subconsultants, 33. GOVERNING LAW AND JURISDICTION- The Client and ST+B agree that suppliers or fabricators so retained, thereby providing for Mediation as the primary method for dispute resolution between the parties to those agreements.

- 26. CERTIFICATE OF MERIT The Client shall make no claim for professional negligence, either directly or in a third party claim, against ST+B unless the Client has first attempted Mediation, and only thereafter, provided ST+B with a written certification executed by an independent design professional currently practicing in the same discipline, industry, and geographical markets as ST+B and licensed to practice in the State of the Project. Certification shall:
- 26.1. Contain name and license number of certifier, with listing of qualifications exhibiting current practice in same industry and geographical markets as ST+B and the Project:
- 26.2. Specify each and every act or omission that the certifier contends is a violation of the Standard of Care expected of a design professional performing services under similar circumstances; and
- 26.3. State in complete detail the basis for the certifier's opinion that each such act or omission constitutes a violation.

This certificate shall be provided to ST+B not less than thirty (30) calendar days prior to the presentation of any claim or the institution of any arbitration or judicial proceeding.

27. BETTERMENT - If, due to ST+B's error, any required item or component of the project is omitted from the Instruments of Service, ST+B shall not be responsible for paying the cost to add such item or component to the extent that such item or component would have been otherwise necessary to the Project or otherwise adds value or Betterment to the Project. In no event shall ST+B be responsible for any cost or expense that provides Betterment, upgrade or enhancement to the Project.

- performance of services on the project until an appropriate specialist consultant 28. ATTORNEY'S FEES In the event any arbitration or litigation arising from or related to the services provided under this Agreement, the prevailing party shall be entitled to recovery of all reasonable costs incurred, including staff time, court costs, attorneys' fees and other related expenses.
 - provisions of the Agreement, and to the fullest extent permitted by law, neither the Client nor ST+B, their respective officers, directors, partners, employees, contractors or subconsultants shall be liable to the other or shall make any claim for any incidental, indirect or consequential damages arising out of or connected in any way to the Project or to this Agreement. This mutual waiver of consequential damages shall include, but is not limited to, loss of use, loss of profit, loss of business, loss of income, loss of reputation and any other consequential damages that either party may have incurred from any cause of action including negligence, strict liability, breach of contract, and breach of strict or implied warranty. Both parties shall require similar Waiver of Consequential Damages protecting all the entities named herein in all contracts and subcontracts with others involved in the Project.
 - 30. LIMITATION OF LIABILITY In recognition of the relative risks and benefits of the Project to both the Client and ST+B, the risks have been allocated such that the Client agrees, to the fullest extent permitted by law, to limit the liability of ST+B and ST+B's officers, directors, partners, employees, shareholders, owners and subconsultants for any and all claims, losses, costs, damages of any nature whatsoever or claims expenses from any cause or causes, including attorneys' fees and costs and expert-witness fees and costs, so that the total aggregate liability of ST+B and ST+B's officers, directors, partners, employees, shareholders, owners and subconsultants shall not exceed \$ 1,000,000 (One Million Dollars), or the Consultant's total fee for services rendered on this Project, whichever is greater. It is intended that this limitation apply to limitation apply to any and all liability or cause of action however alleged or arising, unless otherwise prohibited by law.
 - 31. CORPORATE PROTECTION -- It is intended by the parties to this Agreement that ST+B's services in connection with the Project shall not subject ST+B's individual employees, officers or directors to any personal legal exposure for the risks associated with this Project. Therefore, and notwithstanding anything to the contrary contained herein, the Client agrees that as the Client's sole and exclusive remedy, any claim, demand or suit shall be directed and/or asserted only against ST+B, a Colorado corporation, and not against any of ST+B's individual employees, officers or directors.
 - 32. INDEMNIFICATION ST+B agrees, to the fullest extent permitted by law, to indemnify and hold harmless the Client against damages, liabilities and costs arising from negligent acts of ST+B in the performance of professional services under this Agreement, to the extent that ST+B is responsible for such damages, liabilities and costs on a comparative basis of fault between ST+B and the Client. ST+B shall not be obligated to indemnify the Client or the Client's own negligence or for the negligence of others.
 - this Agreement and any legal actions concerning its validity, interpretation and performance shall be governed by the laws of the State of Wyoming without regard to any conflict of laws provisions, which may apply the laws of other jurisdictions. It is further agreed that any legal action between the Client and ST+B arising out of this Agreement or the performance of services shall be brought in a court of competent jurisdiction in the State of Wyoming.
 - 34. ACCEPTANCE These Terms and Conditions and the attached proposal constitute the entire offer from ST+B, has been mutually negotiated, and supersedes all prior negotiations, representations or agreements, whether written or oral except as specifically incorporated into this Agreement by reference. This Agreement may not be amended after Acceptance except by written instrument signed by both the Client and ST+B.

Contract Check List

This check list summarizes the purpose, cost and other contract provisions contained in the contract and assures that the contract has been reviewed by both the CEO and In-House Legal Counsel.

- 1. Name of Contract: PLAN 1 PROFESSIONAL DESIGN SERVICES FOR MOB ENTRANCE RECONFIGURATION
- 2. Purpose of contract, including scope and description: Proposal from Plan 1 for professional design services to MOB entrance. The reconfiguration will 1) minimize cross breeze between entrance doors 2) redefine main entry into building and 3) revise mechanical and electrical systems to accommodate new revolving door. The project will have 4 phases. Phase 1-Design Services Phase 2-Bidding Services Phase 3-Construction Admin Services and Phase 4 Project Close out. The proposal is made up of 3 documents: Proposal for Professional Design Services, Design Schedule and Completion and blueprints (all attached).
- 3. Effective Date: As soon as approved by MHSC Board of Trustees
- 4. Expiration Date: Completion of project

Termination provisions: None related to Proposal. Is this auto-renew?
 NA

6. Monetary cost of the contract: Entrance reconfiguration construction cost \$265,000.00. Proposal Design Fees of \$23,400.00 + reimbursables of \$1500.00 (project engineering and architectural costs such as printing) for total project design fees of \$24,900.00 TOTAL FOR PROJECT \$289,900.00 Budgeted? NA being funded by SLIB through Corona Virus Relief Fund. These funds have to be expended and invoiced to SLIB by December 15th 2020 with a project completion date of December 30, 2020. 7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. Not provided in Proposal

8. Any confidentiality provisions? NA

9. Indemnification clause present? Not in Proposal

10. Is this contract appropriate for other bids? Time is of the essence with these funds and Plan 1 had designs for this project dating back to 11/19/2018.

11. Is County Attorney review required? NO



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August 7, 2020

Mr. James Horan **Director of Facilities Support Services** Memorial Hospital of Sweetwater County 1200 College Drive Rock Springs, WY 82901

Re: Memorial Hospital of Sweetwater County Medical Office Building Entrance Reconfiguration Professional Services Proposal

Dear Mr. Horan,

Thank you for allowing Plan One/Architects to propose professional design services for your Entrance Reconfiguration Project. The intent of this letter is to outline the scope of work for the project, the design services we propose to provide, and the associated professional design fees.

Project Description: This proposal is for professional design services related to the following scope of work using Scheme 1 Developed November 19, 2018:

- Minimize cross breeze between entrance doors. .
- Redefine main entry into building. 60
- ш. Revise mechanical and electrical systems to accommodate new revolving door.

Professional Design Services: Plan One/Architects will provide professional design services for your project. This fee proposal includes:

- 1. Phase One: Design Services
 - Field visit and document existing conditions including identification of existing conditions related to the scope of work.
 - Conduct design meetings with Owner during design stage.
 - Produce final project plans. The plans will include all necessary architectural, structural, mechanical, electrical, and plumbing related scope of work to complete the projects.
 - Generate incremental progress sets of construction documents that will allow the following Owner reviews: 65% Construction Documents.
- 2. Phase Two: Bidding Services
 - Submit drawings to City of Rock Springs Building Department and OHLS. . Make any required revisions requested.
 - Costs for final plans are included in the proposal.
 - Produce addenda as necessary.
 - Answer questions during construction and provide clarifications.

3. Phase Three: Construction Administration Services

- Organize and conduct pre-construction meeting.
- Perform contractor pay application reviews and approvals.
- Answer questions during construction and provide clarifications.
- Submittal and shop drawing reviews.
- Regular site visits and construction observation reports.
- 4. Phase Four: Project Close Out
 - Review contractor provided record drawings.
 - Perform final punch list inspection for the project.
 - Prepare the final 41-Day Advertisement.
 - Perform an 11 Month Walk-through of the Project.

Conceptual Cost Estimate: Based on the scope of work as we understand it, we are providing the following conceptual cost estimate for your budgeting purposes.

Entrance Reconfiguration Construction Cost \$265,000

Fee Proposal: Based on the scope of work as described above, we are providing the following fee proposal for the Entrance Reconfiguration:

Total fee proposal	=	\$23,400
Estimated Reimbursables	=	\$ 1,500
Total Project Cost	=	\$24,900

Base professional design fees will be considered a lump sum and be billed on a percentage complete of the services provided.

Reimbursables are estimated to be \$1,500 and include project engineering and architectural costs such as printing.

If this proposal is acceptable to you, please sign both copies of this agreement, and return one signed copy to Plan One/Architects.

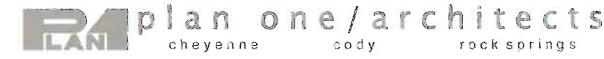
Sincerely,

William W. Wheatley, AIA Vice President

Mr. James Horan Director of Facilities Support Services

Attachments:

Proposed MOB Entry Revision Proposed MOB Design Schedule



July 21, 2020

Mrs. Tiffany Marshall Foundation Director Memorial Hospital of Sweetwater County 1200 College Drive Rock Springs, WY 82901

Re: Memorial Hospital of Sweetwater County Medical Office Building Entrance Reconfiguration – Design Schedule and Completion

Dear Tiffany,

Thank you for coordinating with Plan One/Architects, the timeline related to the design, bidding, and construction efforts required for the Medical Office Building – Entrance Reconfiguration project.

Plan One previously provided a fee proposal which identified a potential construction cost of \$265,000, our proposal also identified a design fee of \$24,900, for a total anticipated project cost of \$289,900. The scope of work outlined in that proposal, identified the removal of the existing fireplace and reconfiguration of the main entry. Also anticipated in that scope of work, is to provide wayfinding/information furnishings which will help mitigate unnecessary travel of patrons through a large waiting area in an effort to help prevent the spread of Covid-19 or similar viruses. This project also provides added square footage to that waiting area to increase social distancing efforts.

In review of the time allotted for SLIB provided funds to be expensed, I provide you with the following schedule related info.

- Project Approval and Design:
 - August 6th Approval and commencement, September 4th completion of design.
 - Upon approval and timely notice, Plan One and our consultants can commence design documents in a timely fashion.
 - Anticipated time in design 29 days.
- Submittal to Wyoming HLS and Jurisdictional Review
 - September 4th submission, October 2nd potential approval to construct.
 - Upon completion of documents, Plan One can submit documents for review to various Authorities Having Jurisdiction (AHJ), including the Wyoming Dept. of Health.
 - Anticipated review period of 28 days.
- Bidding and Negotiation:
 - September 11th release to bid, bids opened October 2nd:
 - Bidding will parallel plan review for completion at the same time, any impacts resulting of review will be addressed by addendum.
- Contract Execution, Material Procurement, and Construction:
 - Award Contract on October 5th, complete Construction by December 31st:
 - Upon timely completion of all tasks, a potential construction window of 87 days is provided. Procurement of equipment and door systems is expected to take approximately 6-8 weeks based on availability of materials.

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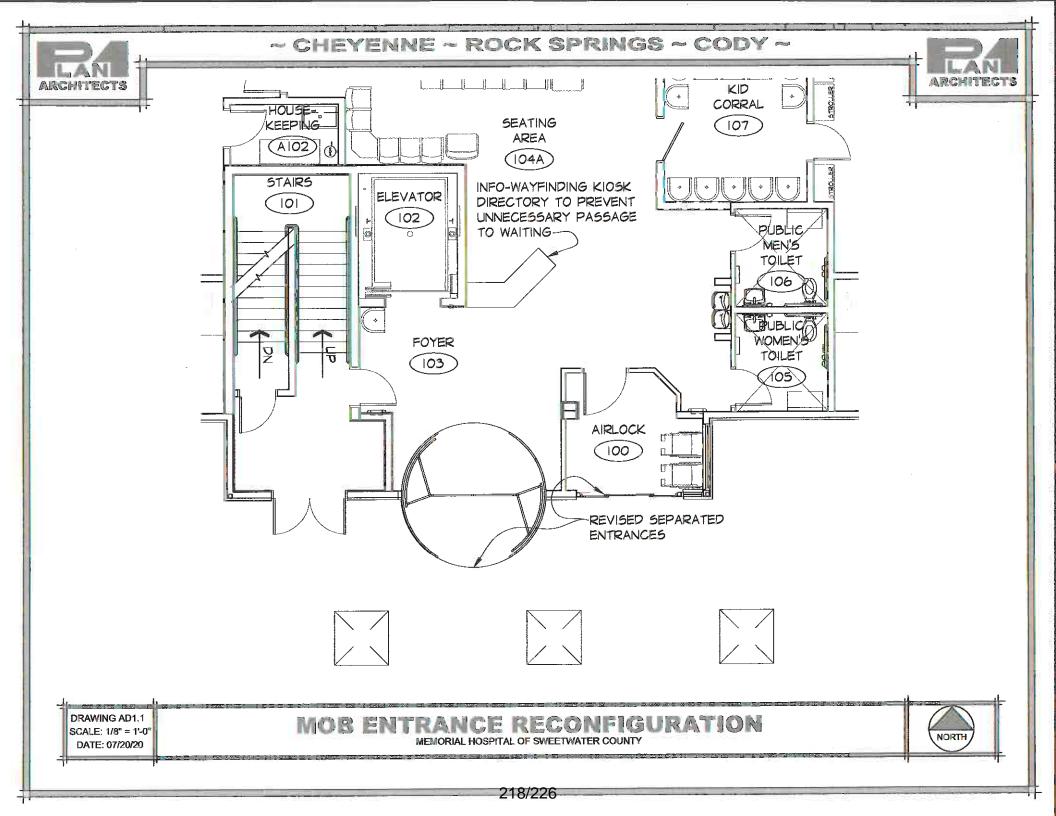
Page 2 of 2 July 21, 2020

Based on the above schedule, it is believed that the funding and expense timeline identified by the Wyoming Office of State Lands and Investments (SLIB) can be met, however there are various impacting items which must be accounted for with little error to meet that deadline. Variables such as AHJ review, Contract Execution for Bonding and Insurances, and the time required to procure certain materials are all items which can adversely impact the schedule. Plan One would provide necessary assistance to the Hospital to help mitigate any potential delays.

Should you have any questions related to this, please do not hesitate to contact me.

Sincerely,

William W. Wheatley, AIA Vice President



Contract Check List

This check list summarizes the purpose, cost and other contract provisions contained in the contract and assures that the contract has been reviewed by both the CEO and In-House Legal Counsel.

- 1. Name of Contract: UVC Upgrade Project Engineering Services
- Purpose of contract, including scope and description: ST+B has provided MHSC with proposal for engineering services for UVC (Ultraviolet Germicidal Irradiation) Upgrade Project. Professional design services to add UVC capability to existing Air Handling Units not being scheduled to be replaced. A single bid package, with conventional bidding process is anticipated.
- 3. Effective Date: Services will begin upon approval of the Proposal by MHSC Board of Trustees
- Expiration Date: Unless terminated (as outlined in termination provision of the Terms and Conditions) prior to completion of the project the proposal will expire upon completion of the project.

 Termination provisions: Yes section 9 of Terms and Conditions (attached)
 7 day notice by client to ST+B but must pay for all services provided up to date of termination Is this auto-renew? No

6. Monetary cost of the contract: UVC Upgrades Fees \$42,170.00 based on Professional Design Services budget of approx. 9.0% of the approved grant cost of \$463,875.00. Design documents \$29,519.00 Bidding and procurement \$2,108.50 Construction contract administration \$10,542.50 = \$42,170.00 Budgeted? being funded by SLIB through Corona Virus Relief Fund. These funds have to be expended and invoiced to SLIB by December 15th 2020 with a project completion date of December 30, 2020. 7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. State of Wyoming Section 33 Terms and Conditions

- 8. Any confidentiality provisions? NO
- 9. Indemnification clause present? Yes Section 32
- 10. Is this contract appropriate for other bids? NO
- 11. Is County Attorney review required? NO



August 12th, 2020

James Horan, Director Facilities Support Services Memorial Hospital of Sweetwater County 1200 College Drive Rock Springs, WY 82901

RE: Memorial Hospital of Sweetwater County (MHSC) UVC Upgrade Project in Response to Covid Proposal for MEP Engineering Services

Dear Mr. Horan:

Spacek Timble and Blevins Engineering, Inc. ("ST+B") is pleased to submit a proposal for engineering services for the above referenced project.

SCOPE OF SERVICES:

Professional services for the Design, Bidding & Procurement and Construction Contract Administration of the HVAC Upgrade project recently approved the State Lands & Investment Board and previously described in various correspondence. Proposal includes Professional Engineering and Architectural services to complete the project which is described briefly as follows:

UVC Upgrades

 Provide professional design services to add Ultraviolet Germicidal Irradiation capability to existing Air Handling Units not being scheduled to be replaced. A single bid package, with conventional bidding process is anticipated.

Professional Services Description:

- 1. Review existing conditions and document.
- 2. Provide Drawings and Specifications as needed to support the permitting, bidding & negotiation, contractor procurement.
- 3. Participate in Fast Track procurement packages.
- 4. Provide Permitting Phase services as required to submit for required Permits with the local Authority Having Jurisdiction (City of Rock Springs, Electrical and Fire Safety Only), the State Department of Health Office of Licensing and Survey, and the State Department of Environmental Quality, Air Quality Control Division, Asbestos Program
- Provide Multiple Bid Packages and Bidding Phase services as required to support Contract Procurement including Conducting Pre-Bid conference, Answer Bidder Questions, producing Addenda as needed, and participation in Bid Opening, Evaluation of Bids and Contractor selection.
- 6. Perform Construction Administration Services including review and approval of Application

for Payment, Submittais, Shop Drawings and Change Order request.

- Respond to requests for information and provide clarification of the Contract Documents as necessary.
- Perform Construction Observation visits to review the Installed Work for consistency with Design Intent and provide follow up report.
- 9. Perform Construction Closeout visit for Final Punch.
- 10. Perform Final Inspection.

PROPOSED FEE:

UVC Upgrades – Estimated at Forty Two Thousand One Hundred Seventy Dollar (\$42,170.¹⁰) based on a professional design services budget of approximately Nine Percent (9.0%) of the Approved Grant Cost Estimate of Four Hundred Sixty Three Thousand Dollars (\$463,875.¹⁰) and in accordance with the attached schedule

Phase	Fee	% of Fee
Design Documents	\$ 29,519.00	70 %
Bidding & Procurement	\$ 2,108.50	5 %
Construction Contract Administration	\$ 10,542.50	25 %
Total	\$ 42,170.00	100 %

FEE BASIS:

Owner agrees to pay ST+B's fee as invoiced for this project based on ST+B's fees set forth above and all, incurred interest, REIMBURSABLE EXPENSES and SUPPLEMENTARY SERVICES.

TERMS AND CONDITIONS: We propose to utilize existing agreed upon terms & conditions that remain in full force and effect with the Plant Major Maintenance Project (PMMP) currently underway that were negotiated at that time and edited to mutually agreeable conditions between ST+B and MHSC Legal Counsel.

Thank you for the opportunity to provide this proposal. We sincerely hope to work with you on this project, and we are available to begin these services immediately upon receiving written authorization to proceed.

If you have any questions or need any additional information, please do not hesitate to contact me.

Best Recards Jacob \$ Blevins, PE Principal | Mechanical Engineer

Attachments: Terms and Conditions



August 12th, 2020 Page 2 of 3

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Please sign below as an indication of your acceptance of the terms of this proposal and return a signed copy for our records.

Signature

Approval Name

Approval Date



223/226



1. GENERAL-

- 1.1. These Terms and Conditions accompany, and are an integral part of, the attached Proposal dated August 12th, 2020 between Spacek Timbie and Blevins Engineering, Inc ("ST+B") and Memorial Hospital of Sweetwater County (the "Client"). The Terms and Conditions herein are identical to those previously negotiated and agreed upon in accordance with the Plant Major Maintenance Project (PMMP) currently underway.
- 1.2. The accompanying Proposal and these Terms and Conditions shall remain valid for thirty (30) calendar days from the date set forth at the top of the proposal. Upon execution of the Proposal by Client or ST+B's commencement of the work without Client's objection to these Terms and Conditions, Client shall be bound by the Proposal and all of these Terms and Conditions (collectively the "Agreement"). Any additions, deletions or changes to the Proposal or these Terms and Conditions shall be in writing and executed by both Parties.

2. DEFINITIONS-

- 2.1. Agreement The attached Proposal document and these Terms and Conditions which collectively represent a formal offer by ST+B and subsequent acceptance by the Client.
- 2.2. Client The Contracting Party including its owners, directors, and employees.
- 2.3. Instruments of Service Any report, plans or specifications published by ST+B as part of the Scope of Services, any authorized Complementary Services, and any authorized or necessary Supplementary Service. ST+B accepts no liability for any Instruments of Service provided under this Agreement, until such documents are sealed and submitted for approval by all relevant authorities having jurisdiction and permit to perform the work is granted by those authorities.
- Proposal including Project Description, Scope of Services, Fee Basis, suggested and authorized Complementary Services.
- 2.5. Reinbursable Expenses Costs incurred by ST+B and/or ST+B's subconsultants performing Scope of Services, Complementary Services, or Supplementary Services directly relating to the Project.
- 2.6. Scope of Services Defined in the attached Proposal portion of this document. Services not set forth in the Proposal are specifically excluded from the Scope of ST+B's services. ST+B assumes no responsibility to perform any services not specifically listed in the Proposal.
- 2.7. Supplementary Services Services beyond those defined in the Base Scope of Services or the agreed upon Complementary Services.
- 2.8. Terms and Conditions This document, providing details not defined or described in the Proposal.
- 2.9. Titles-Clauses in the Proposal and these Terms and Conditions are provided with TITLES for ease of document use in bold, italicized, all capital font. Titles are provided for general reference only and are not part of the Agreement.
- Palue Engineering The process of Project Scope and Value reduction and decision making resulting in redesign to reduce project cost.
- 3. REIMBURSABLE EXPENSES ST+B will invoice Reimbursable Expenses incurred directly relating to providing Scope of Services to the Project. Reimbursable Expenses shall be in addition to the Fee and invoiced at cost plus fifteen percent (15%). Supporting documentation, including copies of bills or receipts will not be provided under these Terms and Conditions. Should supporting documentation be requested by Owner or Chient, ST+B will charge an administrative fee of \$100 (One Hundred Dollars) per monthly invoice requiring verification, plus \$1.00 (One Dollar) per page of supporting documentation provided in accordance with that request. Expenses considered reimbursable for this Project are as follows:
- 8.1. Large format printing, reproductions, and digital scans.
- 3.2. Postage, handling and delivery.
- 9.3. Mileage, not subject to 15% mark up, shall be invoiced at the current Standard Mileage Rate for Business as defined by the Internal Revenue Service.
- 3.4. Lodging, meals, airfare, reutal car and rental car fuel costs for Travel required by the Project for Design or Construction Phase Meetings or Site Visits.
- 8.5. Travel time, not subject to 15% mark up, in accordance with Standard Hearly Rates schedule at 50% discount.
- 4. SUPPLEMENTARY SERVICES (As Required) Supplementary Services may be provided after execution of the Agreement, without invalidating the Agreement. With the exception of services required as a result of negligent act of omission of ST+B, Supplementary Services provided in accordance with this Section shall entitle ST+B to compensation and an appropriate adjustment in ST+B's Instruments of Service delivery schedule.
- 4.1. Authorization Required. ST+B shall notify the Client if it deems that Supplementary Services are necessary due to circumstances of the project related 7. to ST+B's Scope of Services. ST+B shall not proceed with the Supplementary Services until Client has provided written authorization:
- 4.1.1. Unique, experimental, prototype, or alternative system designs.
- 4.1.2. In-depth alternative materials or methods research.

- 4.1.3. Services resulting decisions or direction of the Owner or Client not being rendered in a timely manner or any other failure on the part of the Owner or Client or Clients consultants or contractors.
- 4.1.4. Preparation of design and documentation for alternate bid or proposal requests proposed by the Owner or Client
- 4.1.5. Services resulting from enactment or revision of Codes, Laws or Regulations or Authorities' interpretation thereof after preparation of the Instruments of Service.
- 4.1.6. Preparation for, attendance of and follow up effort relating to any public presentation, meeting or hearing.
- 4.1.7. Preparation for, attendance of, and follow up effort relating any dispute resolution except where ST+B is a named party thereto.
- 4.1.8. Consultation concerning replacement of Work resulting from fire or other cause of damage during construction such as flood, exposure to weather, natural disaster or negligence or malicious acts by others.
- 4.1.9. Services resulting from the work of additional consultants retained by the Owner, including without limitation, Construction Managers, Value Engineers, Commissioning Agents, or Energy Efficiency Consultants.
- 4.1.10. Services relating to future facilities, systems, equipment or portions thereof and/or planning for tenant or rental spaces with yet to be determined use.
- 4.1.11. Services relating to coordination of design and construction performed by separate contractors or Work performed by Owner's own forces, or coordination of services required for equipment supplied by or construction performed by the Owner.
- 4.1.12. Providing services in connection with a change in the Owner and/or Client's representative during the course of the project.
- 4.2. Supplementary Services Fees: Any of the above services either requested by the Owner or Client or deemed necessary and vital to the Project by ST+B shall be invoiced in accordance with Standard Hourly Rates and Reinforceable Expense:
- 5. BILLING AND PAYMENT The Client hereby acknowledges that prompt payment of ST+B's invoices is an essential component of ST+B's continued providing of service to the Client. In accordance with this acknowledgement, Client agrees to coordinate with ST+B preferred billing cycle, recipient of invoice, format of invoice, and other pertinent details to help Client expedite payment to ST+B.
- 5.1. ST+B will submit monthly invoices which shall be due upon receipt and shall be considered past due if not received within thirty (30) calendar days of the invoice.
- 5.9. If payment is not received by ST+B within forty five (46) calendar days of the invoice date, *Client* shall pay as interest an additional charge of 1.5% (One and One-half percent) of the Past Due Amount per month from the date of original invoice. Payment thereafter shall first be applied to accrued interest and then to unpaid principal.
- 5.3. Remit all payments to: ST+B Engineering, PO Box 3699; Evergreen, Colorado 80437 Attn: Todd Spacek
- 5.4. Standard Hourly Rates Calendar Year 2019. Services not defined with fixed fee shall be invoiced accordance with the Schedule as follows: Administrative Assistant, 395; BIM Modeler/Drafting, \$120; BIM Coordinator/Manager, Junior Design Engineer, \$150; Design Engineer, \$156; Project Engineer/Commissioning Agent, \$165; Senior Project Engineer/Project Manager/Senior Commissioning Agent, \$180; Principal/Associate /Senior Project Manager, \$195.
- 6. DISPUTED INVOICES If the Client takes exception to any portion of an invoice, Client shall notify ST+B in writing within ten (10) business days of receipt of invoice. The Client shall indicate specific reason for exception taken, note the amount in dispute, and pay the portion of the invoice not in dispute in accordance with Billing and Payment. Any dispute over invoiced amounts due which cannot be resolved by direct negotiation between parties within ten (10) business days of dispute notification shall be resolved within thirty (30) calendar days in accordance with Mediation. Beginning on the due date of the disputed invoice, interest shall accrue and be paid by the Clienton all disputed invoice amounts that are resolved in favor of ST+B.

Payments shall not be withheld, postponed or made contingent upon the completion, construction, or success of the Project or upon receipt of funds by the *Client* of credit or offsetting reimbursable from other parties who may have caused need for *Supplementary Services* or *Reimbursable Expenses*. No withholdings, deductions or offsets shall be made from ST+B's compensation for any reason unless ST+B has been found to be legally liable for such amounts.

 COLLECTIONS COSTS - In the event legal action must be taken to enforce the payment terms of this Agreament, ST+B shall be entitled to collect from the Client all fees and Reimbursable Expenses due, plus reasonable attorney's fees, court costs, and other expenses incurred by ST+B for such collection action, and additionally, the reasonable value of ST+B's employees' time and ST+B's expense spent for



such collection action, computed according to ST+B's prevailing fee schedule and expense policies.

- 8. SUSPENSION OF SERVICES -- Full payment is expected within forty-five (45) calendar days of invoice date. If payment is not received within sixty (60) calendar days of the invoice date, ST+B reserves the right to suspend all services until all outstanding invoices are paid in full. If the *Client* fails to pay in accordance with *Billing and Payment* or is otherwise in breach of this *Agreement*, ST+B reserves the right to suspend performance of services upon seven (7) calendar days' notice to the *Client*. If default is not resolved within seven (7) calendar days, the *Agreement* may be terminated at ST+B's discretion.
- TERMINATION In the event of Termination of this Agreement by either party, the Client shall within fifteen (15) calendar days of Termination pay ST+B for all services rendered and all reimbursable costs incurred by ST+B up to the date of Termination, in accordance with the Permant provisions of this Agreement.

The *Client* may terminate this *Agreement* for the *Client's* convenience and without cause upon giving ST+B not less than seven (7) calendar days' written notice.

Either party may terminate this *Agreement* for cause upon giving the other party not less than seven (7) days written notice for any of the following reasons:

- 9.1. Substantial failure by the other party to perform in accordance with the terms of this *Agreement* and through no fault of the terminating party.
- 9.2. Assignment of this Agreement or transfer of the Project by either party to any 16. OPINIONS OF PROBABLE COST In providing opinions of probable construction cost, the Client understands that ST+B has no control over the costs.
- 9.3. Suspension of the Project or ST+B's services by the Client for more than ninety (90) calendar days, consecutive or aggregate.
- 9.4. Material changes in the conditions under which this *Agreement* was entered into, the *Scope of Services* or the nature of the Project, and the failure of the parties to reach agreement on the compensation and schedule adjustments necessitated by such changes.

In the event of any Termination that is not the fault of ST+B, the Chent shall pay ST+B, in addition to payment for services rendered and reimbursable costs incurred, for all expenses reasonably incurred by ST+B in connection with the orderly Termination of this Agreement, including but not limited to demobilization, reassignment of personnel, associated overhead costs, and all other expenses directly resulting from the Termination.

- 10. SCHEDULING/COORDINATION Client shall provide the necessary scheduling and coordination of its own forces and of other project consultants and subconsultants to permit the orderly and efficient completion of ST+B's services without delay, interference or interruption. ST+B will use reasonable efforts to meet schedules agreed to in advance by ST+B, and will perform services in a typical five-day, forty-hour work week with the exception of holidays, and without any premium time. If extended hours are required, ST+B and Client shall negotiate the terms of compensation for additional overhead, premium time costs, and productivity loss.
- 11. EXTENSION OF TIME/ADDITIONAL COSTS If ST+B is delayed in the performance of the services for any reason beyond its control, including delays caused in whole or in part by Project Owner, General Contractor, or any other contractor, subcontractor, *Chient* or any other persons, entities or events, ST+B shall be entitled to reasonable additional costs incurred as a result of such delay, and to reasonable extension of agreed upon time in which to complete its services.
- 12. OWNERSHIP OF DOCUMENTS All reports, drawings, specifications, computer files, calculations, field data, notes and all other documents prepared by ST+B as *Instruments of Service* shall remain the property of ST+B. ST+B shall retain all common law, statutory and other reserved rights, including, without limitation, the copyrights thereto.
- 13. UNAUTHORIZED CHANGES In the event the Client, the Client's consultants, contractors or subcontractors or anyone for whom the Client is legally liable consents to, allows, authorizes or approves changes to any Instruments of Service, and these changes are not acknowledged in writing by ST+B, the Client recognizes that such changes and the results thereof are not the responsibility of ST+B. Therefore, the Client agrees to release ST+B from any liability arising from the construction, use or result of such changes. In addition, the Client agrees, to the fullest extent permitted by law, to indemnify and hold ST+B harmless from any damage, liability or cost (including reasonable attorneys' fees and costs of defense) arising from such changes, except only those damages liabilities and costs arising from the sole negligence or willful misconduct of ST+B.
- 14. THIRD PARTY BENEFICIARIES Nothing contained in the Agreement shall create a contractual relationship with or cause action in favor of a third party against either the Client or ST+B. Services rendered by ST+B under this Agreement are performed solely for the Client's benefit, and no other party or entity

shall have any claim against ST+B because of this Agreement of the performance or nonperformance of services thereunder. The *Client* and ST+B agree to require a similar provision in all contacts with contractors, subcontractors, subconsultants, vendors and other entities involved in this project to carry out the intent of this provision.

- 15. STANDARD OF CARE Services and Instruments of Service provided by ST+B under this Agreement will be performed in a manner consistent with that degree of care and skill ordinarily exercised by members of the same profession currently practicing under similar circumstances. Any expectation of perfection or performing services to the highest standard in the industry is specifically excluded, and Client therefore acknowledges there will be errors and omissions in the Instruments of Service. Consequently, both parties agree to recommend the Project Owner and/or General Contractor to establish a contingency amount within the total project budget or funding allocation to cover the costs of any errors or omissions. Upon receipt of notice, ST+B will correct services not meeting such a standard of care without additional compensation in accordance with the Agricament, ST+B's liability for services not meeting standard of care shall be limited to providing the services required to correct the condition and shall not include liability for any materials, equipment, labor, delay or acceleration costs, impact and sequencing costs, coordination costs, extended overhead and/or cost of deferred or lost profit by any or all parties associated with the Project.
- 16. OPINIONS OF PROBABLE COST In providing opinions of probable construction cost, the Client understands that ST+B has no control over the costs or the price of labor, equipment or materials, or over the Contractor's method of pricing, and that the opinions of probable construction costs provided herein are to be made on the basis of ST+B's qualifications and experience. ST+B makes no warranty, expressed or implied, as to the accuracy of such opinions as compared to bid or actual costs.
- 17. SUBMITTAL AND SHOP DRAWINGS REVIEW ST+B shall review Contractor's submittals, such as shop drawings, product data, samples and other data, as required by ST+B, but only for the limited purpose of checking for general conformance with design concept and the information expressed in the Contract Documents. This review shall not include review of the accuracy or completeness of details, such as quantities, dimensions, weights or gauges, fabrications processes or finishes, construction means or methods, coordination with the work of other trades or construction safety precautions, all of which are the sole responsibility of the Contractor. ST+B's review shall be conducted with reasonable promptness while allowing sufficient time in ST+B's judgment to perform appropriate review. Review of a specific item shall not indicate that ST+B has reviewed the entire assembly of which the item is a component. ST+B shall not be responsible for any deviations from the Contract Documents not brought to the attention of ST+B in writing by the submitting Contractor at time of submittal. ST+B shall not be required to review partial submittals or those for which submittals of correlated items have not been received.
- 18. CONSTRUCTION OBSERVATION In order to observe and become generally familiar with the progress and quality of the Work completed by the Contractor which falls within ST+B's Scope of Service, ST+B shall visit the site at intervals as defined in the Scope of Service, Complementary or Supplementary Services to determine if the Work is proceeding in general accordance with the Contract Documents. The Client has not retained ST+B to make detailed inspections or to provide exhaustive or continuous project review and observation services. ST+B does not guarantee the performance of, and shall have no responsibility for, the acts or omissions of any contractor, supplier or any other entity furnishing material or performing any work on the project.
- 19. JOBSITE SAFETY Neither the services of ST+B, nor the presence of ST+B or its employees and subconsultants at a project site, shall relieve the Contractor and any other entity of their obligations, duties and responsibilities including, but not limited to, construction means, methods, sequences, techniques or procedures necessary for performing, superintending or coordinating all portions of the Work of construction in accordance with the contract documents and any health or safety cautions required by any regulatory agencies. ST+B and its personnel have no authority to exercise any control over any construction contractor or other entity or their employees in connection with their work or any health or safety precautions.
- 20. HAZARDOUS MATERUALS It is acknowledged by both parties that ST+B's Scope of Services does not include any services related to asbestos, hazardous or toxic materials. ST+B shall have no responsibility for the identification, discovery, presence, handling, removal, disposal of, or exposure of, persons to hazardous materials in any form at the Project site. Should it become known in any way that such materials may be present at the Project site or any adjacent areas that may affect the performance of ST+B services, ST+B may, at its option and without liability for consequential or any other damages, suspend



performance of services on the project until an appropriate specialist consultant 28. ATTORNEY'S FEES - In the event any arbitration or litigation arising from or or contractor to identify, abate and/or remove the hazardous material and warrant that the Project site is in full compliance with applicable laws and regulations.

- 21. CODES, STANDARDS AND REGULATORY COMPLIANCE ST+B shall put forth reasonable professional efforts to comply with applicable Codes, 29. WAIVER OF CONSEQUENTIAL DAMAGES - Notwithstanding any other Standards and Regulations in effect as of the date of submission of its Instruments of Service to building authorities. Changes necessitated by newly enacted or adopted Codes, Standards or Regulations after this date shall be considered Supplementary Services requiring additional compensation in accordance with this Agreement.
- 22. ASSIGNMENT OF CONTRACT Neither party to this Agreement shall transfer, sublet or assign any rights under or interest in this Agreement, including but not limited to monies that are due or monies that may be due without prior written consent to the other party. Subcontracting to subconsultants, normally contemplated by ST+B as a generally accepted business practice, shall not be considered an assignment for the purposes of this Agreement.
- 23. CHANGED CONDITIONS The Client shall rely on ST+B's judgment as to the continued adequacy of this Agreement in light of occurrences or discoveries that were not originally contemplated by or known by ST+B at the time of negotiating this Agreement. Should ST+B call for contract renegotiation, ST+B shall identify the changed conditions necessitating renegotiation and ST+B and the Client shall promptly and in good faith entre into renegotiation of this Agreement. If terms cannot be agreed to, the parties agree that either party has the absolute right to terminate this Agreement
- 24. CERTIFICATIONS , GUARANTEES AND WARRANTIES ST+B does not have full control over the completed Project and therefore cannot guarantee or warrant the services ST+B provides in association with the Project, or any aspect of the completed Project itself. Furthermore, ST+B shall not be required to sign any document, no matter by whom requested, that would result in ST+B providing certification, guarantee, or warranty of existing conditions or conditions constructed in accordance with ST+B's Instruments of Services provided in accordance with this Agreement. Resolution of any dispute shall not be contingent in any way upon ST+B providing any such certification.
- 25. MEDIATION In an effort to resolve any conflicts that arise during the design or construction of the Project or following completion of the Project, the Client and ST+B agree to cooperate in good faith, and if possible, resolve the issues without arbitration or litigation. Should the parties be unable to reach agreement themselves, the Parties shall mutually select an independent mediator and engage in nonbinding Madiation to assist in further effort to resolve the dispute. Costs of Mediation shall be shared equally between the parties, unless the parties mutually agree otherwise.

The Client and ST+B further agree to include a similar mediation provision in all agreements with independent contractors and consultants retained for the project and to require all independent contractors and consultants also to include a similar mediation provision in all agreements with subcontractors, subconsultants, 33. GOVERNING LAW AND JURISDICTION- The Client and ST+B agree that suppliers or fabricators so retained, thereby providing for Mediation as the primary method for dispute resolution between the parties to those agreements.

- 26. CERTIFICATE OF MERIT The Client shall make no claim for professional negligence, either directly or in a third party claim, against ST+B unless the Client has first attempted Mediation, and only thereafter, provided ST+B with a written certification executed by an independent design professional currently practicing to practice in the State of the Project. Certification shall:
- 26.1. Contain name and license number of certifier, with listing of qualifications exhibiting current practice in same industry and geographical markets as ST+B and the Project;
- 26.2. Specify each and every act or omission that the certifier contends is a violation of the Standard of Care expected of a design professional performing services under similar circumstances; and
- 26.3. State in complete detail the basis for the certifier's opinion that each such act or omission constitutes a violation.

This certificate shall be provided to ST+B not less than thirty (30) calendar days prior to the presentation of any claim or the institution of any arbitration or judicial proceeding.

27. BETTERMENT - If, due to ST+B's error, any required item or component of the project is omitted from the Instruments of Service, ST+B shall not be responsible for paying the cost to add such item or component to the extent that such item or component would have been otherwise necessary to the Project or otherwise adds value or Batterment to the Project. In no event shall ST+B be responsible for any cost or expense that provides Betterment, upgrade or enhancement to the Project.

- related to the services provided under this Agrament, the prevailing party shall be entitled to recovery of all reasonable costs incurred, including staff time, court costs, attorneys' fees and other related expenses.
- provisions of the Agreement, and to the fullest extent permitted by law, neither the Client nor ST+B, their respective officers, directors, partners, employees, contractors or subconsultants shall be liable to the other or shall make any claim for any incidental, indirect or consequential damages arising out of or connected in any way to the Project or to this Agrament. This mutual waiver of consequential damages shall include, but is not limited to, loss of use, loss of profit, loss of business, loss of income, loss of reputation and any other consequential damages that either party may have incurred from any cause of action including negligence, strict liability, breach of contract, and breach of strict or implied warranty. Both parties shall require similar Waiver of Consequential Damages protecting all the entities named herein in all contracts and subcontracts with others involved in the Project.
- 30. LIMITATION OF LIABILITY In recognition of the relative risks and benefits of the Project to both the Chant and ST+B, the risks have been allocated such that the Client agrees, to the fullest extent permitted by law, to limit the liability of ST+B and ST+B's officers, directors, partners, employees, shareholders, owners and subconsultants for any and all claims, losses, costs, damages of any nature whatsoever or claims expenses from any cause or causes, including attorneys' fees and costs and expert-witness fees and costs, so that the total aggregate liability of ST+B and ST+B's officers, directors, partners, employees, shareholders, owners and subconsultants shall not exceed \$ 1,000,000 (One Million Dollars), or the Consultant's total fee for services rendered on this Project, whichever is greater. It is intended that this limitation apply to limitation apply to any and all liability or cause of action however alleged or arising, unless otherwise prohibited by law.
- 31. CORPORATE PROTECTION It is intended by the parties to this Agreement that ST+B's services in connection with the Project shall not subject ST+B's individual employees, officers or directors to any personal legal exposure for the risks associated with this Project. Therefore, and notwithstanding anything to the contrary contained herein, the Client agrees that as the Client's sole and exclusive remedy, any claim, demand or suit shall be directed and/or asserted only against ST+B, a Colorado corporation, and not against any of ST+B's individual employees, officers or directors.
- 32. DNDEMNIFICATION ST+B agrees, to the fullest extent permitted by law, to indemnify and hold harmless the Client against damages, liabilities and costs arising from negligent acts of ST+B in the performance of professional services under this Agreement, to the extent that ST+B is responsible for such damages, liabilities and costs on a comparative basis of fault between ST+B and the Client. ST+B shall not be obligated to indemnify the Client or the Client's own negligence or for the negligence of others.
- this Agreement and any legal actions concerning its validity, interpretation and performance shall be governed by the laws of the State of Wyoming without regard to any conflict of laws provisions, which may apply the laws of other jurisdictions. It is further agreed that any legal action between the Client and ST+B arising out of this Agreement or the performance of services shall be brought in a court of competent jurisdiction in the State of Wyoming.
- in the same discipline, industry, and geographical markets as ST+B and licensed 34. ACCEPTANCE These Terms and Conditions and the attached proposal constitute the entire offer from ST+B, has been mutually negotiated, and supersedes all prior negotiations, representations or agreements, whether written or oral except as specifically incorporated into this Agreement by reference. This Agreement may not be amended after Acceptance except by written instrument signed by both the Client and ST+B.