

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
REGULAR MEETING OF THE BOARD OF TRUSTEES**

**March 4, 2024**

**2:00 p.m.**

**Classrooms 1, 2 & 3**

**AGENDA**

- |       |  |   |
|-------|--|---|
| I.    | Call to Order  | Barbara Sowada  |
|       | A. Roll Call   |   |
|       | B. Pledge of Allegiance  |   |
|       | C. <a href="#">Mission and Vision</a>  | Craig Rood  |
|       | D. Mission Moment  | Irene Richardson, <i>Chief Executive Officer</i>                                  |
| II.   | Agenda <i>(For Action)</i>   | Barbara Sowada  |
| III.  | <a href="#">Minutes</a> <i>(For Action)</i>  | Barbara Sowada  |
| IV.   | Community Communication  | Barbara Sowada  |
| V.    | Old Business   | Barbara Sowada  |
|       | A. Employee Policy–Non-Discrimination & Anti-Harassment <i>(Remains under review/development, no request for action)</i> |   |
|       | B. <a href="#">Emergency Operations Plan</a> <i>(For Action)</i>   | Stevie Nosich, <i>Emergency Management &amp; Environmental Safety Coordinator</i> |
| VI.   | New Business <i>(Review and Questions/Comments)</i>  | Barbara Sowada  |
|       | A. <a href="#">Employee Policy – Consensual Relationships</a> <i>(For Review)</i>  | Amber Fisk, <i>Human Resources Director</i>                                       |
|       | B. <a href="#">Strategic Plan</a> <i>(For Review)</i>  | Irene Richardson  |
|       | C. <a href="#">Medical Staff Bylaws</a> <i>(For Review)</i>  | Dr. Brianne Crofts, <i>Medical Staff President</i>                                |
| VII.  | Chief Executive Officer Report   | Irene Richardson  |
| VIII. | Committee Reports  |   |
|       | A. Finance & Audit Committee   | Marty Kelsey  |
|       | 1. <a href="#">I.S. Report</a>   |   |
|       | 2. Bad Debt <i>(For Action)</i>  |   |
|       | 3. <a href="#">Finance &amp; Audit Committee Meeting Information</a>   |   |
|       | B. Foundation Board  | Craig Rood  |
|       | C. Executive Oversight and Compensation Committee  | Barbara Sowada  |
|       | D. Joint Conference Committee  | Barbara Sowada  |
|       | E. <a href="#">Building &amp; Grounds Committee</a>  | Marty Kelsey  |
|       | F. Compliance Committee  | Kandi Pendleton   |
|       | G. <a href="#">Governance Committee</a>  | Barbara Sowada  |
|       | H. Quality Committee   | Kandi Pendleton   |
|       | I. Human Resources Committee   | Kandi Pendleton   |
| IX.   | Board Education  | Barbara Sowada  |
|       | A. Vision and Talent by Kaufman Hall   |   |

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|-------|---|--------------------|
| X.    | Medical Staff Report                          | Dr. Brianne Crofts |
| XI.   | Good of the Order                             | Barbara Sowada     |
| XII.  | Executive Session (W.S. §16-4-405(a)(ix))     | Barbara Sowada     |
| XIII. | Action Following Executive Session            | Barbara Sowada     |
|       | A. Request for Privileges <i>(For Action)</i> |                    |
|       | B. Legal Agreement <i>(For Action)</i>        |                    |
| XIV.  | Adjourn                                       | Barbara Sowada     |



# Memorial Hospital

OF SWEETWATER COUNTY

## 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**

**February 7, 2024**

The Board of Trustees of Memorial Hospital of Sweetwater County met in regular session via Zoom on February 7, 2024, at 2:00 p.m. with Dr. Barbara Sowada, President, presiding.

**CALL TO ORDER**

Dr. Sowada welcomed everyone and called the meeting to order.

Dr. Sowada requested a roll call and announced there was a quorum. The following Trustees were present: Judge Nena James, Mr. Marty Kelsey, Ms. Kandi Pendleton, Mr. Craig Rood, and Dr. Barbara Sowada.

Officially present during the meeting: Ms. Irene Richardson, Chief Executive Officer; Dr. Brianne Crofts, Medical Staff President; Mr. Taylor Jones, Sweetwater County Commissioner Liaison; and Mr. Geoff Phillips, Legal Counsel.

**Pledge of Allegiance**

Dr. Sowada led the attendees in the Pledge of Allegiance.

**Our Mission and Vision**

Dr. Sowada read aloud the mission and vision statements.

**Mission Moment**

Ms. Richardson announced Dr. Banu Symington was recently invited to join the editorial board of *CA: A Cancer Journal for Clinicians*, the flagship journal of the American Cancer Society, as an Associate Editor. Ms. Richardson said this is wonderful for Dr. Symington to receive this recognition. Ms. Richardson said at the recent Red Tie Gala, a gentleman approached Ms. Richardson and said he would not be here without the Hospital. He said he supports the Hospital, is very grateful to everyone, and was very complimentary to the physicians and staff.

**AGENDA**

The motion to approve the agenda as presented was made by Ms. Pendleton; second by Mr. Rood. Motion carried.

**APPROVAL OF MINUTES**

The motion to approve the minutes of the January 3, 2024, regular meeting as presented was made by Mr. Rood; second by Mr. Kelsey. Motion carried.



## COMMUNITY COMMUNICATION

There were no comments.

## OLD BUSINESS

### **Employee Policy – Non-Discrimination & Anti-Harassment**

Dr. Sowada said we continue work on employee policies. Ms. Pendleton suggested calling a special HR Committee meeting in February to move forward anything that is ready for full Board review in March.

## NEW BUSINESS

### **Joint Conference Committee Charter**

Dr. Sowada reported the last time the information was reviewed was 2017. She and Mr. Kelsey said the changes were minor. The motion to approve the updated Joint Conference Committee Charter as presented was made by Mr. Kelsey; second by Ms. Pendleton. Motion carried.

### **Emergency Operations Plan**

Ms. Stevie Nosich, Emergency Management and Environmental Safety Coordinator, reviewed the Emergency Operations Plan (EOP) information. She said there were slight changes due to Joint Commission updates. Dr. Sowada requested a minor change in capitalization and said the document will return to the March meeting agenda for a second review.

## CHIEF EXECUTIVE OFFICER REPORT

Ms. Richardson thanked staff for embracing our person-centered care culture. She said the work started with our current strategic plan. Ms. Richardson said when The Joint Commission was here in December, during introductions, she took the opportunity to talk about our culture. They asked if we thought they would see and feel the culture when they were conducting the survey. At the exit meeting, they said they could feel our culture and recognized it as something they do not always see. Ms. Richardson said we want to make sure we take care of our patients and take care of the staff who take care of the patients and each other. She said we have an amazing group of trainers for our person-centered-care workshops. Ms. Richardson said we continue to meet with new physicians, locums physicians, and University of Utah emergency room physicians to review our culture and expectations. Ms. Richardson said our Patient and Family Advisory Council continues to meet monthly. She said it is an excellent group of community members, the meetings are well-attended, and the group is committed to helping the Hospital move healthcare forward in Sweetwater County. Ms. Richardson said we continue to look at the specifics around Critical Access Hospital status to make sure we have everything structured the way we want. We are working on our responses to the recent Joint Commission survey. We will need to be surveyed again following submitting our Critical Access Hospital application. Ms. Richardson said we have been working on the updated strategic plan. She apologized for not bringing it forward yet and said she has been working on it with her senior leaders to make sure we do our due diligence to

create and present a valuable plan. The update will be on the March meeting agenda and will include goals and initiatives. Ms. Richardson said our responses to The Joint Commission following their December onsite survey are due February 12. She said we are one of only 20% of hospitals in the nation not receiving a repeat survey. Ms. Richardson thanked everyone involved in the work to achieve a good survey. A group toured our locations for master plan work and staff were very receptive and helpful. Ms. Richardson said we are watching for their final report. Ms. Richardson reported she had been doing regular radio spots and invited Trustees to join her. She said the American Hospital Association Rural Healthcare Conference will be held in February and she is happy Dr. Sowada and Mr. Rood are able to participate. Dr. Sowada has been invited to participate in a podcast and will address some of the challenges we have been facing in rural hospitals. Ms. Richardson said it is impressive Dr. Sowada was asked to do this and it speaks to her good work over the years and valuable board experience. Dr. Sowada noted the importance of hiring a good CEO and having a good, trusting relationship which she said we have done here. Ms. Richardson reported the Red Tie Gala was an amazing event and thanked the Foundation for a wonderful event and the support they give us. She said departments donated creative baskets and the live auction items were great. Ms. Richardson said she heard many positive comments and is so grateful to the community for their support. Ms. Richardson said she spoke at the Young at Heart Senior Center in January and has been invited back so she plans to return often. She is speaking at the Green River Chamber of Commerce luncheon in February. She said she looks for opportunities to talk about all the great things happening at the Hospital and give people the opportunity to ask questions. Ms. Richardson said we have been very busy at the Hospital and thanked staff for taking care of our patients and our community. Dr. Sowada said that, as always, everyone has been very busy doing very good work.

## **COMMITTEE REPORTS**

### **Governance Committee**

Dr. Sowada said the meeting minutes are in the packet. She said the Board Bylaws need to be reviewed every three years and the last review was in May 2021. The Committee is going to form an Ad Hoc Committee to work on the Bylaws.

### **Quality Committee**

Ms. Pendelton said Dr. Sowada chaired the meeting and asked her to cover anything specific. Dr. Sowada asked everyone to pay attention to the summary provided by the Quality Department. She said there are some outstanding performance improvement initiatives in the works. Dr. Sowada noted the full Quality Committee packet with all the details is in the board portal for Trustee reference.

### **Human Resources Committee**

Ms. Pendelton said the Committee did not meet and will conduct a special meeting in February.

## **Finance and Audit Committee**

**Capital Expenditure Request:** Mr. Kelsey said Ms. Richardson approached the Committee with a request to purchase an item in a timely manner and she utilized her delegated expenditure authority to purchase a DEXA scanner with the understanding she would request ratification from the Board at this meeting. The motion to approve the purchase of a DEXA scanner for \$57,695.50 as presented was made by Mr. Kelsey; second by Judge James. Motion carried. Ms. Richardson thanked everyone for their support of her using her emergency privileges and thanked Dr. Sowada and Mr. Kelsey for their quick responses. She said it is wonderful to get the equipment here for the care of our patients.

**Bad Debt:** The motion to approve the potential bad debt of \$1,342,402.42 as presented was made by Mr. Kelsey; second by Ms. Pendleton. Motion carried.

**Finance & Audit Committee Meeting Information:** Dr. Sowada noted a record high revenue month. Ms. Tami Love, Chief Financial Officer, agreed and provided a brief overview of financial highlights. Mr. Kelsey noted contract labor went down and he shared some comparison information from a review of statistics he made for December 2022 and December 2023. He explained what causes our margins and noted revenues were up almost 19% and expenditures were up only 4%.

## **Foundation Board**

Ms. Tiffany Marshall, Foundation Director, provided a brief update of the Master Plan Project, Guardian Angel Program, Waldner House usage, ultrasound equipment grants, Donor Wall updates, and the success of the Red Tie Gala. Mr. Rood, Judge James, and Commissioner Jones said it was a great event.

## **Executive Oversight and Compensation Committee**

Dr. Sowada said the Committee has not met.

## **Joint Conference Committee**

Dr. Sowada said the Committee has not met.

## **Building and Grounds**

Mr. Kelsey said his report is in the packet.

## **Compliance Committee**

Dr. Sowada said the information is in the meeting packet.

## **CONTRACT REVIEW**

### **Cardinal Pharmacy Agreement**

Ms. Richardson reviewed the agreement. She said the relationship we have had with Cardinal has been very good. It has been a long standing relationship and she said we are grateful for the services they provide to us. They are wonderful to work with and are very knowledgeable. The motion to approve the agreement as presented was made by Mr. Rood; second by Ms. Pendleton. Motion carried.

## **BOARD EDUCATION**

Dr. Sowada said she thought the short videos were a nice overview.

## **MEDICAL STAFF REPORT**

Dr. Crofts said the Medical Staff has been reviewing their bylaws. The plan is for changes to come to the full Board in March for review.

## **GOOD OF THE ORDER**

There were no comments.

## **EXECUTIVE SESSION**

The motion to go into executive session at 3:00 p.m. was made by Mr. Kelsey; second by Mr. Rood. Motion carried. Dr. Sowada said there would be a 10-minute break.

## **RECONVENE INTO REGULAR SESSION**

The motion to leave executive session and return to regular session at 3:57 p.m. was made by Mr. Kelsey; second by Mr. Rood. Motion carried.

## **ACTION FOLLOWING EXECUTIVE SESSION**

### **Approval of Privileges**

The motion to grant clinical privileges and appointments to the Medical Staff as discussed in executive session was made by Ms. Pendleton; second by Mr. Rood. Motion carried.

Credentials Committee Recommendations to the Board of Trustees for Granting Clinical Privileges and Granting Appointment to the Medical Staff from January 9, 2024

1. Initial Appointment to Associate Staff (1 year)
  - Dr. Rami Ibrahim, Radiology
2. Reappointment to Active Staff (2 years)
  - Dr. Brandon Shelley, Podiatry

3. Reappointment to Consulting Staff (2 years)
  - Dr. Sarah Lombardo, Tele-ICU
  - Dr. Sudha Jayaraman, Tele-ICU
  - Dr. Shaden Mohammad, Tele-Radiology
4. Reappointment to Non-Physician Staff (2 years)
  - Leete, Starla Certified Nurse Midwife

The motion to approve physician and staff contracts and authorize the CEO to execute the contracts as discussed in executive session was made by Ms. Pendleton; second by Mr. Rood. Motion carried.

### **ADJOURNMENT**

There being no further business to discuss, the meeting adjourned at 4:01 p.m.

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Dr. Barbara Sowada, President

Attest:

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Ms. Kandi Pendleton, Secretary

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

**February 28, 2024**

The Board of Trustees of Memorial Hospital of Sweetwater County met in a special workshop meeting via Zoom on February 28, 2024, at 2:00 p.m. with Dr. Barbara Sowada, President, presiding.

**CALL TO ORDER**

Dr. Sowada called the meeting to order and announced there was a quorum. The following Trustees were present online during the meeting: Judge Nena James, Mr. Marty Kelsey, Mr. Craig Rood, and Dr. Barbara Sowada. Excused: Ms. Kandi Pendleton.

Officially present during the meeting: Ms. Irene Richardson, Chief Executive Officer; Mr. Taylor Jones, Sweetwater County Commission Liaison; and Mr. Geoff Phillips, Legal Counsel.

**MISSION MOMENT**

Ms. Richardson said Dr. Fred Matti, Radiologist, shared a conversation with her he had with someone in our community. The person told him they had called the Hospital to talk about a concern and said we helped them and everyone was amazing. The person told Dr. Matti they work in the service industry and has heard many people say the Hospital is amazing and they trust the Hospital. Dr. Matti said we have been very busy and this person told him they believe it is because people are trusting the Hospital. Dr. Matti told Ms. Richardson this made him feel very good about all we are doing.

**FINANCE & AUDIT COMMITTEE UPDATE**

Mr. Kelsey announced a quorum of the Finance & Audit Committee. He welcomed Commissioner Jones to the meeting. The motion to approve the committee agenda was made by Ms. Richardson; second by Ms. Tami Love, Chief Financial Officer. Motion carried. The motion to approve the January 21, 2024, committee meeting minutes was made by Ms. Layne, Controller; second by Ms. Richardson. Motion carried. Mr. Kelsey said there was no need to take any action on any business items. In reference to the narrative, Mr. Kelsey said he has been on the Board almost seven years and he doesn't remember a margin like this before and he said he thinks it is awesome. Ms. Love highlighted some information in the financial narrative. Ms. Richardson provided a Critical Access Hospital (CAH) update. She said we have been very busy and we are limited by the number of patients we can see due to staffing. We met with the Medical Staff and we are going to trial a separate 10-bed observation unit so we can see what that would look like. Observation beds are not counted in the 25-bed count required with CAH. Ms. Richardson said everyone agrees patients come first. If patients want to stay here and the physicians want them to stay here, we need to find a way to make that happen. We are able to keep more patients here due to the telemedicine options in place. It is becoming harder and harder to transfer patients because other facilities have staffing issues of their own. Ms. Love said CliftonLarsonAllen is onsite this week. They have been doing

some training sessions with the patient access teams. We will be able to start to track some things like eligibility and point of service collections better. We have some baseline information and can run some reports to track going forward. They also met with the patient finance team to continue their work on their policies and procedures. They are still doing the documentation training with the providers. We have received great feedback on that process. It is going very well. Dr. Sowada said we have much to celebrate with the highest revenue month ever.

### **EXECUTIVE SESSION**

The motion to go into executive session at 2:17 p.m. was made by Mr. Kelsey; second by Mr. Rood. Motion carried.

### **RECONVENE INTO REGULAR SESSION**

The motion to leave executive session and return to regular session at 3:54 p.m. was made by Judge James; second by Mr. Rood. Motion carried.

### **ADJOURNMENT**

There being no further business to discuss, the meeting was adjourned at 3:55 p.m.

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Dr. Barbara Sowada, President

Attest:

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Ms. Kandi Pendleton, Secretary

Board Meeting Date:3/4/2024

Topic for Old & New Business Items:

The EOP Plan – The Emergency Management chapter standards from The Joint Commission have been reformatted. They have updated the standard numbers and EP's, therefore the policy needed updated. While going through the policy, our Committee noticed that a few titles were not accurate, they have been updated as well.

And on the hospital incident command structure there were some items that were not in the right place that have also been updated.

The overall updates were standard numbers, title corrections, and correct location of specific information.

Policy or Other Document:

- ☒ Revision  
☐ New

Brief Senior Leadership Comments:

Recommendation to approve.

Board Committee Action:

N/A

Policy or Other Document:

- ☐ For Review Only  
☒ For Board Action

Legal Counsel Review: N/A

- ☐ In House      Comments:  
☐ Board          Comments:

Senior Leadership Recommendation:

Recommendation for approval.



Approved N/A  
Review Due N/ADocument Area Emergency Operations  
Reg. TJC EM  
Standards 12.01.01, TJC  
EM.09.01.01, TJC  
EM.10.01.01  
+ 12 more

## Emergency Operations Plan (EOP)

### STATEMENT OF PURPOSE

Conforming to TJC EM.09.01.01, (MHSC) Emergency Operations Plan provides an organized process to initiate, manage, and recover from a variety of emergencies or incidents, both external and internal, which could confront the Hospital and the surrounding community based upon the annual Hazard Vulnerability Assessment (HVA).

The Emergency Operations Plan describes a comprehensive "all hazards" **continuity of operation plans (COOP)** with command structure that uses the Hospital Incident Command System (HICS) for coordinating six (6) critical areas: communications, resources and assets, safety and security, staffing, utilities, and clinical activities. The overall response procedures include emergencies that can temporarily affect demand for services, along with emergencies that can occur concurrently or sequentially that can adversely impact patient safety and the ability to provide care, treatment, and services for an extended length of time.

MHSC frequently reviews and updates emergency plans to establish the necessary policies and procedures to achieve preparedness for, response to and recovery from an incident. These plans and procedures are exercised and reviewed to determine and measure functional capability.

### EMERGENCY RESPONSE PLANS (links)

In Alphabetic order:

- Link to 1135 Waiver Request Procedure <https://sweetwatermemorial.policystat.com/policy/9548773/latest/>
- Link to Active Shooter Response <http://sweetwatermemorial.policystat.com/policy/3674995/latest/>
- Link to Boiler Failure Protocol <http://sweetwatermemorial.policystat.com/policy/3674718/latest/>
- Link to Bomb Threat Protocol <http://sweetwatermemorial.policystat.com/policy/3674829/latest/>
- Link to Call-Tree Phone List <http://sweetwatermemorial.policystat.com/policy/4000707/latest/>

- **Link to Code Pink: Infant/Child Abduction Response** <http://sweetwatermemorial.policystat.com/policy/3972423/latest/>
- **Link to Code Red: Fire Response** <http://sweetwatermemorial.policystat.com/policy/3674716/latest/>
- **Link to Continuing of Operation Plan (COOP)** <https://sweetwatermemorial.policystat.com/policy/12054147/latest/>
- **Link to Decontamination Response** <http://sweetwatermemorial.policystat.com/policy/3615387/latest/>
- **Link to Delegation of Authority & Succession Protocol** <https://sweetwatermemorial.policystat.com/policy/9357259/latest/>
- **Link to Evacuation Protocol** <http://sweetwatermemorial.policystat.com/policy/3674819/latest/>
- **Link to Hazardous Spill and Exposure Response** <http://sweetwatermemorial.policystat.com/policy/3674797/latest/>
- **Link to Information Technology Disaster Recovery Response** <https://sweetwatermemorial.policystat.com/policy/10761636/latest/>
- **Link to Loss of Air Handling Units** <http://sweetwatermemorial.policystat.com/policy/3674796/latest/>
- **Link to Loss of Elevators** <http://sweetwatermemorial.policystat.com/policy/3674787/latest/>
- **Link to Loss of Medical Gas or Vacuum** <http://sweetwatermemorial.policystat.com/policy/3674740/latest/>
- **Link to Mass Casualty Response** <http://sweetwatermemorial.policystat.com/policy/3674815/latest/>
- **Link to Medical Staff Policy for Granting Privileges in Disasters** <http://sweetwatermemorial.policystat.com/policy/3844658/latest/>
- **Link to Natural Disaster Response** <http://sweetwatermemorial.policystat.com/policy/3674812/latest/>
- **Link to Pandemic Response** <https://sweetwatermemorial.policystat.com/policy/7761435/latest/>
- **Link to Patient Upsurge: Internal Response** <http://sweetwatermemorial.policystat.com/policy/3674824/latest/>
- **Link to Physical Altercation Response** <http://sweetwatermemorial.policystat.com/policy/3674813/latest/>
- **Link to Plumbing Failure** <http://sweetwatermemorial.policystat.com/policy/3674792/latest/>
- **Link to Power Failure** <http://sweetwatermemorial.policystat.com/policy/3674737/latest/>
- **Link to Severe Weather Response** <http://sweetwatermemorial.policystat.com/policy/3674808/latest/>
- **Link to Tornado Watch And/Or Warning Response Plan** <http://sweetwatermemorial.policystat.com/policy/5035899/latest/>
- **Link to Water Failure** <http://sweetwatermemorial.policystat.com/policy/3674802/latest/>
- **Link to Radioactive Spill** <https://sweetwatermemorial.policystat.com/policy/12570163/latest/>

## **Link to Hospital Incident Command System Forms (see also attached)**

<https://emsa.ca.gov/hospital-incident-command-system-forms-2014/>

# EMERGENCY OPERATIONS PLAN (EOP)

## I. HOSPITAL LEADERSHIP RESPONSIBILITIES - TJC EM.10.01.01

### A. Leadership

The Hospital's leaders, including the medical staff, are involved in the planning activities of the Emergency Operations Plan. The medical staff, Senior Leadership, and department leaders are represented in the Emergency Management Committee. The final copy of the EOP is approved by the Emergency Management Committee, Senior Leadership, the Medical Executive Committee (MEC), and MHSC's Board of Trustees.

### B. Emergency Program Managers

Per senior leadership delegation the Emergency management Coordinator (EM Coordinator) and the Emergency Department Director (ED Director) or designee work together as the Emergency Program (EP) Managers. The EP Managers provide overall management of the hospital's preparedness efforts, including developing needed procedures, coordinating production or revision of the Emergency Operations Plan (EOP), planning and executing training and exercises, and writing After Action Reports (AAR). The EP Managers or their designee represent the Hospital at various preparedness meetings at the local, regional, and state levels. The desired background for an Emergency Program Manager includes formal and informal training, education, and/or experience in emergency management, National Incident Management System (NIMS), Hospital Incident Command, hospital operations and familiarity with local, regional, and state healthcare-system design and emergency response procedures.

### C. The Emergency Management Committee

The Hospital's EM Committee is a multidisciplinary group of Hospital representatives involved in planning for potential disasters based upon the HVA. Local agencies such as police, fire/emergency medical services, city and county emergency management and public health, through committee deliberations, help clarify the Hospital's roles and responsibilities to support community response to incidents. These multi-agency collaboration encourage familiarity and networking between community partners as well as promote much needed priority setting, information-sharing, and joint decision-making during a true incident.

**The Hospital's EM Committee** meets regularly and consists of clinical and non-clinical representatives from key Hospital departments and functioning units of the facility. The EM Coordinator is the EM Committee chairperson. The chairperson will set each meeting's agenda and facilitate the Committee's work to achieve an annually established set of objectives. Minutes of each meeting will be published and disseminated to Committee members.

To ensure overall readiness and support, the chairperson will report to the Performance Improvement Patient Safety (PIPS) Committee twice per year and present the evaluation/ review of the scope and objectives of the Emergency Operations Plan to the Quality

Committee of the Board biennially.

## II. **PLANNING ACTIVITIES – TJC EM.11.01.01**

### A. **HAZARD VULNERABILITY ANALYSIS**

MHSC identifies potential emergencies that could affect demand for the Hospital's services or its ability to provide those services, the likelihood of those incidents occurring, and the consequences of those incidents.

1. The assessment is the *Hazard Vulnerability Analysis (HVA)* attached to this Plan, it is designed to assist the EM Committee in gaining a realistic understanding of the vulnerabilities and to help focus the resources and planning efforts.
2. The Hospital prioritizes hazards identified on annual review of the HVA.
3. The community and region's HVA assessments are also an aid in the assessment by the Hospital.
4. A list of priority concerns are developed from the HVA and are evaluated annually to determine what exercises are to be conducted, along with any additional planning.

### B. **COMMUNITY INVOLVEMENT**

MHSC has established a relationship with community partners. Potential emergencies are identified in the MHSC Hazard Vulnerability Analysis and prioritized, in conjunction with HVA's from community partners. The HVA aids in establishing the needs and vulnerabilities of the Hospital. The Hospital communicates its needs and vulnerabilities to community emergency response agencies and identifies the community's capability to meet its needs. This communication and identification occur at the time of the hospital's review of its Emergency Operations Plan, which occurs at least every two years and whenever its needs or vulnerabilities change.

During a disaster, the Hospital's role within the community is to care for sick and/or wounded individuals who may present for treatment. The facility and community are involved through:

- Local emergency management meetings
- State emergency management meetings

### C. **MITIGATION, PREPAREDNESS, RESPONSE AND RECOVERY**

The Emergency Program Managers and the EM Committee develop appropriate specific emergency response plans based on priorities established as part of the Hazard Vulnerability Analysis. Each Emergency Response Plan addresses the four (4) phases of emergency management activities:

**Mitigation** - Activities designed to reduce the risk of and potential damage due to an emergency (i. e., the installation of stand-by or redundant equipment, training).

**Preparedness** - Activities that organize and mobilize essential resources such as plan-

writing, employee education, preparation with outside agencies, acquiring and maintaining critical supplies.

**Response** - Activities the Hospital undertakes to respond to disruptive incidents. The actions are designed with strategies and actions to be activated during the emergency (i.e., control, warnings, and evacuations).

**Recovery** - Activities the Hospital undertakes to return the facility to complete business operations. Short-term actions assess damage and return vital life-support operations to minimum safe operating standards. Long-term focus is on returning all Hospital operations back to normal or an improved state of affairs.

**D. Hospital Command Center (HCC) and Delegation of Authority**

1. The HCC will be set up immediately in the Physician Lounge. If the Physician Lounge is not available, the Incident Commander (IC) will identify an alternate site. The alternate HCC location will be announced overhead by the PBX Operator. The Incident Commander will initiate the Hospital Incident Command System (HICS).
2. **Order of succession:** Due to rural nature and limited resources, the organization establishes and maintains orders of succession for key positions in the event Leadership is incapable of performing authorized duties. (See MHSC policy "Delegation of Authority and Secession Protocol", and "COOP"). Designation as a "successor" enables the selected individual to serve in the same position as the principal in the event of principals death, incapacity, or resignation. Order of succession is determined with each incident as selection of individuals for key positions may vary based on type of incident. Please see attached templates.
3. **Designation/delegation of authority:** Due to rural nature and limited resources, designation/delegation of authority is determined with each incident as designation/delegation of authority may vary based on type of incident. Designation/delegation of authority specify the actions individuals are authorized to implement. The organization establishes designation/delegation of authority to provide successors the legal authority to act on behalf of the organization and to carry out specified duties. Designation/delegation of authority will take effect when normal channels of direction are disrupted and will terminate when these channels are reestablished. Please see attached templates.
4. Per TJC EM.15.01.01, EM Committee and all leaders to fill the HCC positions will have to complete these HICS trainings and are met annually through MHSC's on line education program and initial orientation.
5. Once the type of the emergency is determined, the appropriate Emergency Response Plan will be initiated. (See section VII "Communication Management" for emergency response plans/codes)

**E. Hospital Incident Command System (HICS)**

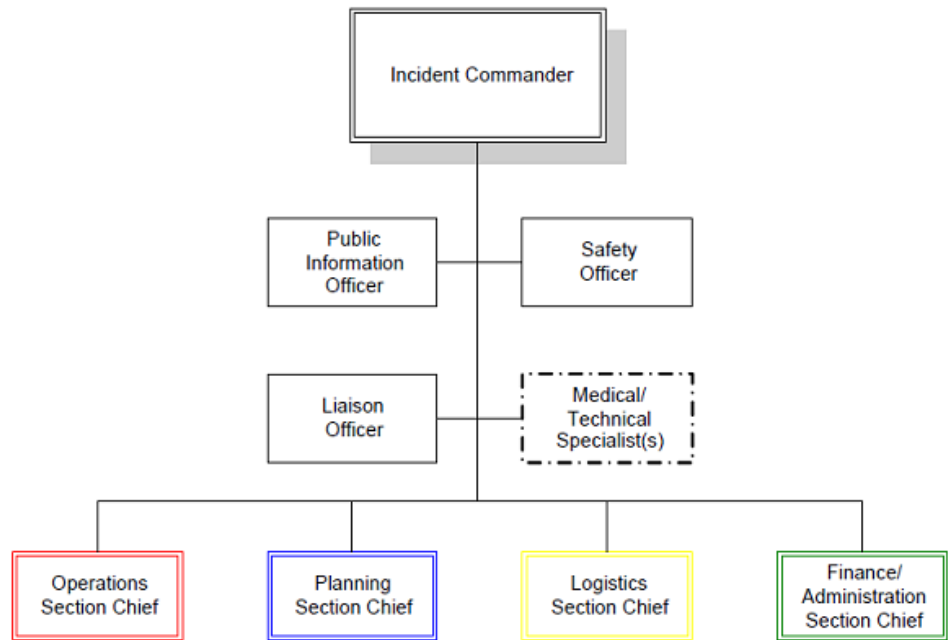
The Hospital has implemented the Hospital Incident Command System (HICS) developed by the Emergency Medical Services Authority (EMSA) of California as a revision from the

previous Hospital Emergency Incident Command System (HEICS).

HICS is an incident management system based on the Incident Command System (ICS) that assists hospitals to improve their emergency management planning, response, and recovery capabilities for unplanned and planned incidents. HICS is consistent with ICS and the National Incident Management System (NIMS) principles. The new HICS has been restructured to be consistent with ICS and NIMS principles and will provide greater flexibility/adaptability for the hospital setting.

- The Command staff will report to the Hospital Command Center. Command Staff may include a Public Information Officer, a Safety Officer, a Liaison Officer, one or more Medical Specialist and administrative support to assist with the phones and documentation.
- The Incident Commander (IC) will organize and direct the HCC and give overall direction for hospital operations and if needed, authorize evacuation.
- The IC in concert with the Command Staff, have the delegated authority to implement the appropriate emergency operations plans.
- The Safety Officer, if assigned, assists the IC to ensure that the Emergency Operations Plan is implemented and identify any hazards or unsafe conditions.
- The Public Information Officer (PIO), if assigned, provides information to the news media as directed or approved by the IC.
- The Liaison Officer if assigned, coordinates with community partners and assist the IC as directed.
- Administrative support will provide phone support and documentation support for the IC, along with receiving various information/tracking lists and messages.
- The Section Chiefs for Operations, Planning, Finance, and Logistics, if assigned establish their functions as directed by the Incident Commander. They then report to their designated meeting place to receive further instructions.
- The IC or Liaison Officer, if assigned, initiates communication with local emergency response groups, as needed.
- The proper HICS identification apparel will be issued to the Command Center Staff and Section Chiefs and other designated personnel as required by the incident and HICS structure established.
- The IC directs Security Department personnel to the appropriate location, as necessary, in preparation for securing the facility (lock-down).

#### **Command Staff**

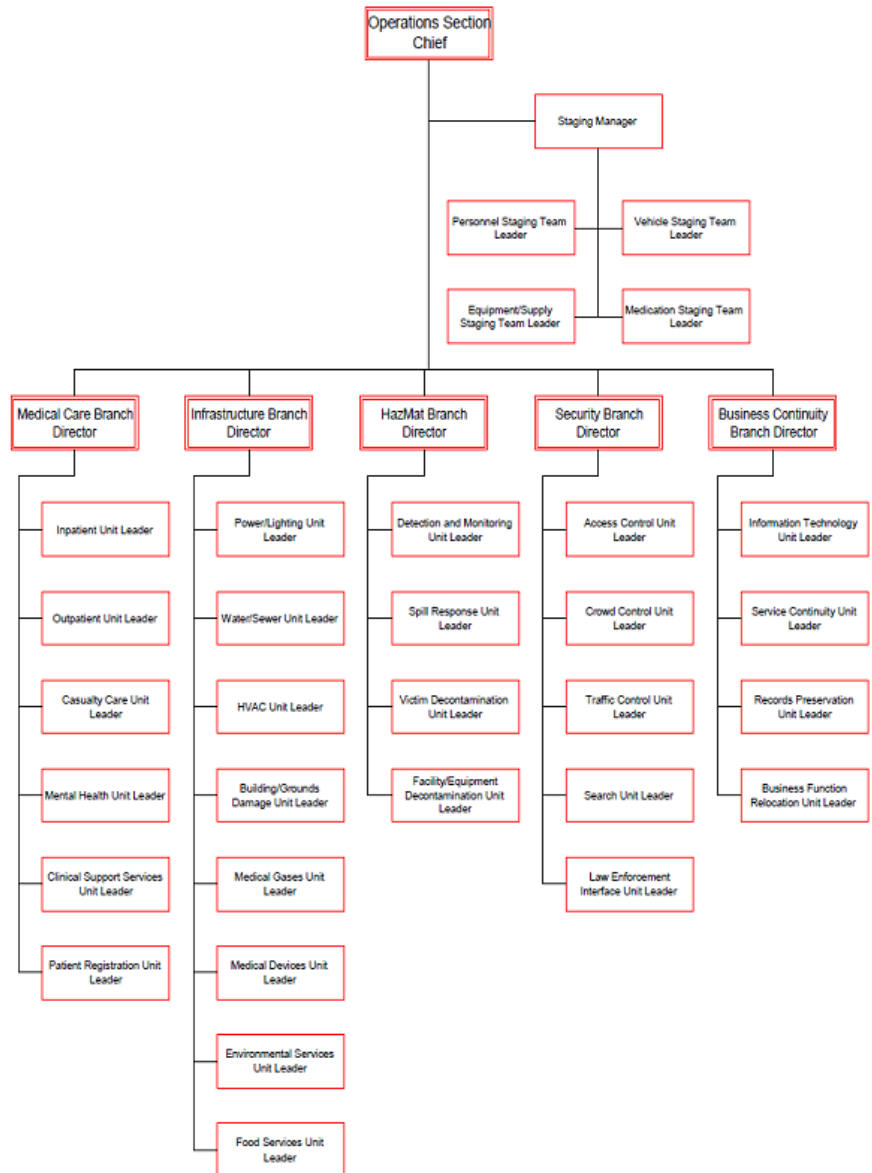


#### F. Operations Section

- The Operations Section conducts the tactical operations (e.g., patient care, clean up) to carry out the plan using defined objectives and directing all needed resources. Many incidents that are likely to occur involve injured or ill patients. The Operations Section Chief will be responsible for managing the tactical objectives outlined by the Incident Commander. This section is typically the largest in terms of resources to marshal and coordinate. To maintain a manageable span of control and streamline the organizational management, Branches, Divisions, and Units are implemented as needed. The degree to which command positions are activated depends on the situational needs and the availability of qualified command officers.
- **Operations Staff**



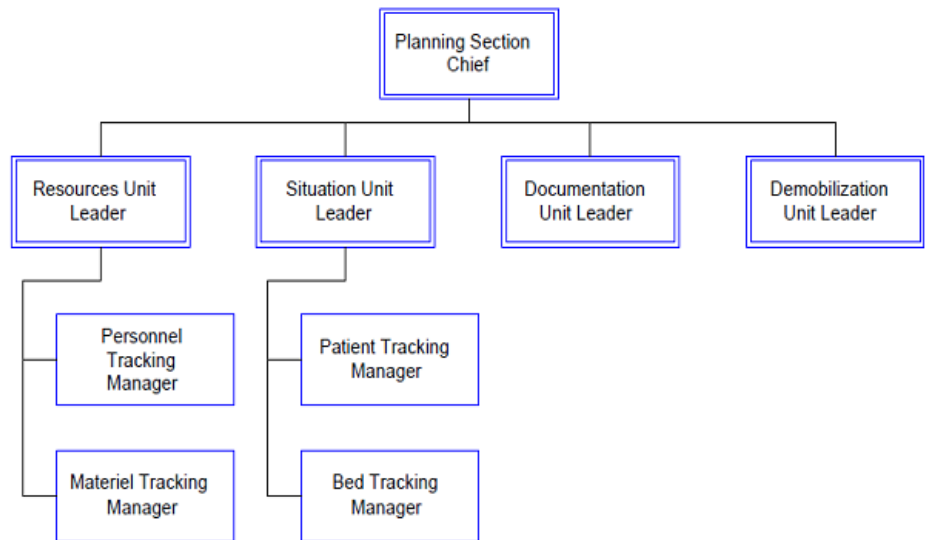
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## G. Planning Section

- The Planning Section collects and evaluates information for decision support, maintains resource status information, prepares documents, and maintains documentation for incident reports. It will also be responsible for preparing status reports, displaying various types of information, and developing the Incident Action Plan (IAP). The effectiveness of the Planning Section has a direct impact on the availability of information needed for the critical, strategic decision-making done by the Incident Commander and the other General Staff positions.
- **Planning Section**

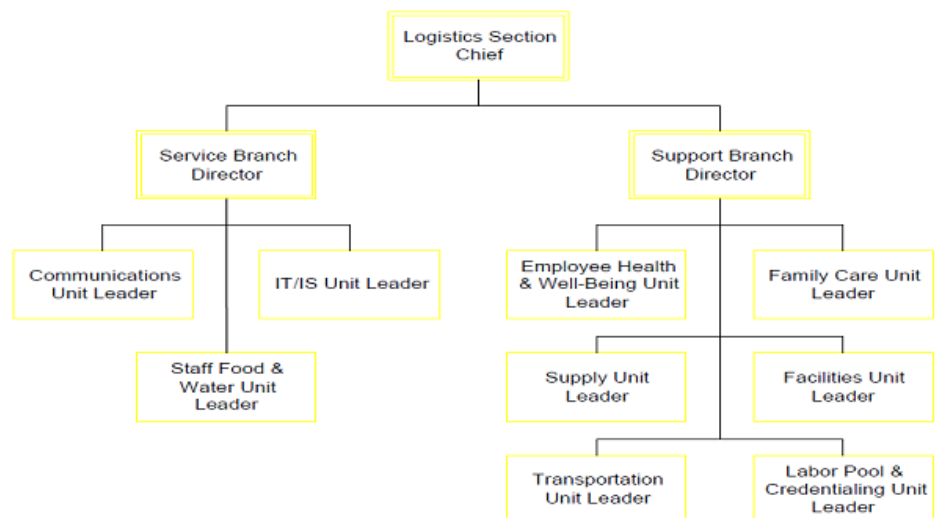




## H. Logistics Section

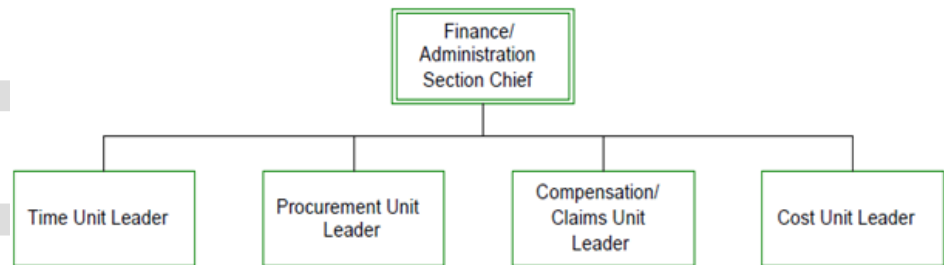
- The Logistics Section provides support, resources, and other essential services to meet the operational objectives set by Incident Commander. For the Hospital to respond effectively to the demands associated with a disaster, the Logistics Section will coordinate support requirements. These responsibilities include acquiring resources from internal and external sources using standard and emergency acquisition procedures and requests to the local EOC (Emergency Operation Center). When requesting resources from outside sources, it will be important that the hospital specify exactly what is needed and not try to identify how that need can be met: that will be done at the local EOC. In addition, it is important for the hospital to know how the requests are to be made (electronically, fax, phone): **HICS form #254 - EOP Manual Flash drive**

- **Logistics Section**



## I. Finance Section

- The Finance/Administration Section monitors costs related to the incident while providing accounting, procurement, time recording, and cost analyses. The costs associated with the response must be accounted for from the outset of the incident. These costs can come from multiple sources such as overtime; loss of revenue-generating activities; and repair, replacement, and/or rebuild expenses. Daily financial reporting requirements are likely to be modified and, in select situations, new requirements outlined by state and federal officials.
- Preplanning efforts should identify what state and federal financial aid documents must be completed for receiving reimbursement. In addition to patient costs being tracked, vendor expenses, mutual aid financial remuneration, and personnel claims must also be accounted for and processed. The Finance/Administration Section coordinates personnel time (Time Unit), orders items and initiates contracts (Procurement Unit), arranges personnel-related payments and Worker's Compensation (Compensation/Claims Unit), and tracks response and recovery costs and payment of invoices (Cost Unit).
- **Finance Section**



### III. **INVENTORY & MONITORING OF ASSETS & RESOURCES**

- IV. MHSC has identified and documented the resources and assets that are available on-site and/or elsewhere prior to an incident. **The Inventory and Sustainability Tool** includes the assets and resources such as:

- Personal protective equipment (PPE)
- Water
- Fuel
- Medical supplies
- Surgical supplies
- Medications

## V. **EMERGENCY OPERATIONS PLAN – TJC**

### **EM.12.01.01**

#### A. **Response**

Each emergency response plan has procedures to direct the immediate and long term response to the emergency. The "all hazards" **Continuity of Operation Plan (COOP)** command structure is used to manage the response to the incident and assure adequate staffing for patient care and safety. A response to an emergency can include any of the following: maintaining or expanding services, conserving resources, curtailing services, supplementing resources from outside the local community, closing the hospital to new patients, staged evacuation, and total evacuation.

- B. **Continuity of Operation Plan (COOP)** is included with the essential functions/service, orders of succession, designation/delegation of authority, continuity, and communications.

Memorial Hospital of Sweetwater County has one or more emergency management response plans based on the emergency plan, risk assessment, and communication plan. Procedures guiding implementation are defined in this emergency management plan, continuity of operations plan, and other preparedness and response protocols. Response plans, procedures and documents are reviewed by the EM Committee and updated at least every two years. The format of these documents is at the discretion of the hospital.

#### C. **Staff Response**

1. All on-duty Staff will report to their department, reporting to their supervisor or Director and STAND-BY for further instructions (i.e., being ready, willing and able to perform assigned duties). Unit leaders will complete a Disaster Readiness Response form (attached) reporting current staffing levels and unit patient care activity to HCC. Staff will continue their assigned patient care activities until directed otherwise by the HCC.
2. Departments with excess personnel will advise HCC of the number of available staff to support the Labor Pool. Labor pool personnel will stay at their home department until called upon by HCC.
3. Labor pool personnel will be assigned by the HCC as needed to support the hospital's incident response.
4. Patients and Staff away from their assigned treatment area will return to the appropriate area as soon as practical or receive instructions to secure the patient in an ancillary location if necessary.
5. Staff unable to return to their assigned area will notify their department leader of the location of the patient and Staff member. Department leaders will report this to the HCC for patient tracking.
6. All Staff requesting to go off duty must obtain the approval from HCC through their department leaders. The department leaders may not give this approval without prior clearance from the Incident Commander. Staff must not leave their workstations until relief has arrived or until dismissed by the department leaders.

#### D. Departmental Response

Each department leader, for both clinical and non-clinical operations, will assess the status of their Staff's ability to maintain normal operations.

1. Each department leader, or designee, will identify available resources, such as beds, personnel, and equipment, which could be allocated to the emergency response.
2. The department leader will complete the Disaster Readiness Report and relay the information to the HCC, on status of the department.
3. When the departments receive the notification of the specific emergency, the department leaders will initiate the appropriate departmental response plan for the emergency.
4. The department leaders will report any problems or concerns to the appropriate Section Leader or the HCC.
5. No department should reduce its hours of operation without prior approval from the HCC.

#### E. SUSTAINABILITY

The importance of sustainability on supplies is crucial to determine if services can still be rendered during an emergency incident. The Hospital plans for sustainability without the support of the community for the required 96 hours. This planning is a coordinated effort by the Emergency Management Committee and all Hospital departments by reviewing the six critical areas before an incident has occurred. Where supplies and alternative means are required to sustain 96 hours of operation, alternative resources and assets, must be identified by the Incident Commander. The ***Inventory and Sustainability Tool*** (see attached) has identified those resources and assets and the sustainability indicated in hours.

#### F. RECOVERY PROCEDURES - TJC EM.14.01.01

Recovery after an incident response defines the activities the Hospital will take to restore the systems that are critical to resuming normal care, treatment and services. Short-term recovery actions assess damage and return vital life-support operations to minimum safe operating standards. Long-term recovery focuses on returning all hospital operations back to normal or an improved state. MHSC will follow the following recovery protocol:

1. When deemed appropriate, the Incident Commander will initiate the recovery phase by announcing an **"All Clear"**.
2. The Incident Commander will notify the PBX Operator to alert the staff of the end of the incident by announcing **"All Clear"** by normal code announcement methods.
3. Labor Pool personnel will be released by the HCC Command Staff or a Section Chief.
4. The Incident Commander notifies community Emergency Management Services of the **"All Clear"** action.

**Note: Upon announcement of the "All Clear", all information concerning the emergency will be recorded and properly filed for later reference using the noted HICS forms (EOP Manual Flash drive).**

5. Section Leaders and HCC staff will contact Unit leaders to receive information and critiques concerning the response to the emergency.
6. Form #252, #256: All expenses and overtime information will be provided to the Finance Section for documentation. Evidence of the damage or abnormalities caused by the emergency, or response to the emergency, should be documented through photographs or descriptive writings.
7. The EM Coordinator and/or Security Personnel will collect and inspect all communication equipment, data processing systems, and other equipment used during the emergency. Equipment will be evaluated for appropriate use in the next emergency and consumable supplies documented for restocking.- The IC or designee will collect all HICS identification apparel and ensure that it is repackaged. EM Coordinator will be notified if materials need to be replaced for the next emergency. The IC or designee will ensure that the physical surrounding of the HCC is cleaned and furniture repositioned for normal operations. All documents used for the incident will be gathered and replacement copies of forms and documentation sheets will be replenished.
8. The Hospital Command Center staff and appropriate designees will conduct the evaluation of the emergency and the response. The EM Coordinator will take notes, collect HICS forms and write the after action report (AAR). All reports shared and reviewed by the EM Committee and then are stored in the EM Coordinator office.
9. The Public Information Officer will communicate to the local media relevant information concerning the **"All Clear"** as directed and approved by the IC.
10. Facilities Management will ensure all utilities are back to normal operation. In the event there is a need to contact outside agencies to assist with this process, Logistics will contact the appropriate vendors or contractors to assist with the recovery process.
11. The HVA will help us in identifying the critical systems, such as all utilities, communication and IT information, needed to return to full operation. Contractor and vendors will be contacted to assist our recovery process if needed.
12. **COMMUNICATION WITH FAMILY MEMBERS** is part of the recovery process, this is addressed under communications.

#### **G. PLAN INITIATION AND TERMINATION**

To facilitate the orderly initiation of the response to an incident, the following steps of the Emergency Operations Plan will be initiated:

1. Creditable information received by MHSC Emergency Department or to other MHSC leaders concerning an external incident facing the community or if an internal incident adversely affecting the function of the Hospital, the information will be passed directly to Administration or the Administrator on Call.

2. When notified of a potential disaster, the Administration/ Administrator on Call, House Supervisor, Emergency Department (ED) Physician, ED Director and/or ED Nursing staff will:
  - a. Evaluate the issues such as location of incident (internal, external), the distance from the Hospital, the scope of the incident (single individual, mass casualty), and weather conditions (seasonal and current).
  - b. Based upon the severity of the incident, the decision will be made whether or not to implement HICS.
  - c. Plan the care of casualty and non-casualty patients arriving in the Emergency Department during the incident.
  - d. Once it has been determined to activate HICS, the individual who takes the role of Incident Commander will notify the hospital staff and executives as soon as possible.
3. **Note:** During work hours it is unknown which senior leader might be available. It may be the determination of administration to contact the EM Coordinator or other staff well trained in HICS methodology to assume the position of Incident Commander.

## VI. INCIDENT PHASES

### A. Phase I

When the hospital is notified by EMS and/or other sources of an incident that has occurred that may involve multiple casualties or a small incident with no casualties has occurred within the facility:

1. A Phase I incident is a situation that can most likely be managed with the staff already on duty.
2. Staff should remain on their assigned unit and review their department specific procedures as applicable, to be prepared to respond to the next Phase if the incident requires an upgrade.
3. The Department Supervisor or Charge Nurse will have a bed count and expected discharges ready to report to HCC.
4. The Hospital Incident Command System (HICS) will be initiated. Potentially, only selected or affected departments may be notified depending upon expected or actual severity of the incident.

### B. Phase II

When the hospital will be receiving a large number of patients or a major incident occurs within the facility and additional support staff will be required:

1. Situation requires additional staff to be called into the hospital – activate Emergency Hospital Alert System as needed.
2. All on duty staff will remain at their assigned units and will follow the department specific procedures.

3. The HCC will be initiated to coordinate incident operations.

**C. Phase III**

When the facility will be receiving large numbers of patients that is likely to overwhelm normal and emergency patient care services and/or significant issues have occurred within the facility that has or will disrupt continued operation and results in the need for extensive internal and/or external support:

1. The HCC will be initiated to coordinate emergency operations.
2. This major incident will require mobilization of most aspects of the HICS as detailed in the EOP, including initiation of the Hospital Emergency Alert System for staff relief over an extended period of time.

## **VII. ALTERNATE CARE SITES -TJC EM.13.01.01**

- A. MHSC is prepared for the possibility that the buildings or spaces in which patient care is normally provided will be rendered unusable. In this type of incident, a pre-designated alternate care site may be activated. Other facilities such as hospitals, community location, etc. have been assessed and identified as alternate site locations. The Memorandum of Understanding with alternative care sites are available from In House Counsel.
1. Holiday Inn - 307-382-9200
  2. Aspen Mountain Medical Center 307-352-8900
  3. Homewood Suites - 307-382-0764
- B. MHSC's decision to use an ACS in an emergency response will be decided by the Incident Commander. Any equipment and supplies that may be needed at the ACS will be provided by the Hospital, and will be transported by designees assigned through Hospital Incident Command team.
- C. The HCC will determine collectively if a request for an 1135 waiver needs to be completed. IC will delegate this task to the appropriate individual.

## **VIII. COMMUNICATION MANAGEMENT – TJC EM.12.02.01**

**A. INTERNAL & STAFF NOTIFICATION LEVELS**

1. The Incident Commander will notify the PBX Operator to alert the Staff of the incident by announcing the applicable Code via the overhead paging system.
2. **During an emergency all staff may announce overhead the following emergencies by dialing 700:**
  - Hostage Situation
  - Active Shooter
  - Physical Altercation

**Note: Any inappropriate use of the overhead paging will be subject**



to the corrective action process.

3. The Staff may also be notified through alternate means and methods such as Intranet messages and personal communication devices (e. g., email, text messaging, pagers, walkie-talkies, satellite phone and cellular telephones) via the Mass Notification Messaging System, a.k.a. **RAVE**.
4. In case of **RAVE**/Mass Notification system failure (i.e. Internet down) public radio announcements will be made and we will begin a manual phone call process:
  - a. Use the Call-Tree Phone lists kept on the Hospital's shared drive: [http://T:\Administration\\_Public\Call-Tree Phone Lists](http://T:\Administration_Public\Call-Tree Phone Lists) Hard copies of the Call-Tree are updated and kept in the EOP Binders in the Administration and Security Offices.
  - b. Designate "Callers" within each department and divide the list to expedite notification.
  - c. Begin a Disaster Response Report (DRR), to list each person contacted.
  - d. Begin calling: notify staff of the type of Emergency Code.
  - e. If contact cannot be made, leave a detailed message (if possible), and inform staff to call Hospital Command Center (HCC) at 352-8579 if/when available.
  - f. When the end of the call list is reached, deliver DRR to department leader or designee.
  - g. department leader or designee will complete the DRR and deliver to HCC via a runner.
5. Call-Tree Phone lists are maintained by Human Resources.
  - a. Each Director is responsible for notifying Human Resources of staff phone number changes.
  - b. Each Department should print and keep a current hard copy of their phone list readily available within their department.

**Note:** Hard copy sets of the Call-Tree Phone list in the EOP Binders are kept in Administration, the Security offices and the Mobile Command Cabinet. Human resources updates the Call-Tree phone list every three months.

6. Communications systems may include the following:
  - Internal telephone system: Internal communications will be limited to disaster-related issues once HICS has been initiated. **THE OPERATOR SHOULD NOT BE CALLED FOR INFORMATION.**
  - Radios: Communications Unit Leader will determine location and availability of radios and report to the Logistics Chief so distribution of radios can be determined.
  - RAVE, MHSC's emergency alert system, can send out text email and voice text to staff. In addition the public address system, inter-



departmental radios, fax, cellular telephones, and runners can be utilized.

- Cell phones: for Text messaging and/or in the event of Internet failure/internal phones down.
- The hospital has three (3) non-internet, direct dial hard line phones. They are located in three (3) locations: the Administration Office, the Physician Lounge and in the Emergency Department in the event the Internet fails. These phones are easily identified by their red housings.

## B. EMERGENCY RESPONSE PLANS-CODES

1.	INCIDENT	OVERHEAD ANNOUNCEMENT	Emergency #
	Hostage Incident	Hostage Situation	700 - all staff
	Use of a Weapon	Active Shooter	700 - all staff
	Disturbance or Altercation	Physical Altercation	700 - all staff
	External Incident/Mass Casualty	Mass Casualty	300
	Radiation/Biological/Chemical/ Incident	HERT	300
	Bomb Threat	Bomb Threat	300
	Fire	CODE Red	300
	Infant/Pediatric Abduction	CODE Pink	300
	Cardiac/Respiratory Arrest	Code Blue	300
	Deterioration in Patient health	Rapid Response	300
	Tornado Warning	Tornado Warning	300
	Tornado Watch	Tornado Watch	300

## C. NOTIFICATION & COMMUNICATION WITH EXTERNAL AUTHORITIES

All appropriate external authorities will be notified to facilitate effective response, continuing operations, and recovery from an emergency that disrupts the normal patient care and/or business operations of the organization. When an emergency plan is initiated, the appropriate external authorities and community resources will be notified by telephone, cell phone, radio, or pager, whichever is functioning and available during an incident.

## D. COMMUNICATION WITH FAMILY

In the event of a mass casualty incident, a temporary Family Support Center (FSC) may be established at the direction of the Incident Commander to facilitate in the relay of crucial information to family members regarding the status of patients and provide incident briefings as directed by the IC. Only immediate family members of victims/

patients will be allowed access to the Hospital. All family members will be directed to either the classrooms or cafeteria in the basement to the chosen site for the FSC. In a situation where a patient's emergency contact is not present with the patient, the emergency contact will be advised of the location of the patient if the patient is moved or evacuated

#### **E. COMMUNICATION WITH MEDIA**

The Public Information Officer (PIO) if assigned, has the responsibility for media and public information as it pertains to an incident that involves the Hospital and as directed by the Incident Commander. The PIO has established working relationships with local media, the local emergency management office, and public health prior to an incident. The PIO regularly attends meetings with the external agencies who in the event of a community-wide incident will establish a Joint Information Center (JIC). The information provided to the community will come from the JIC as a unified message to the residents of the area. If the Hospital is solely involved during an incident, the PIO in the Hospital Command Center will communicate with the community or local media as directed by the IC.

#### **F. COMMUNICATION WITH PURVEYORS**

MHSC has developed a list of purveyors, including vendors, contractors, and consultants that can provide specific services before, during, and after an incident. The list will be kept in the HCC and maintained by the EM Coordinator and updated as needed. Memorandum of Understandings (MOUs) have been developed to help facilitate services during the time of a community-wide incident.

#### **G. COMMUNICATION WITH OTHER HEALTHCARE ORGANIZATIONS**

1. The Healthcare organizations that are located within the geographical area to the facility have a working relationship with MHSC. These hospitals are members, as is MHSC, of the **Western Wyoming Healthcare Coalition**:
  - St. John's Medical Center, Jackson, WY
  - Star Valley Medical Center, Afton, WY
  - South Lincoln Medical Center, Kemmerer, WY
  - Evanston Regional Hospital, Evanston, WY
  - Aspen Mountain Medical Center, Rock Springs, WY
2. The key information to share with the other Healthcare organizations:
  - Names & roles of Hospital Incident Command team
  - Resources & assets to be potentially shared
  - Process for the dissemination of patient & deceased individual names for tracking purposes
  - Communication with third parties
3. The patient information that may be shared with the other healthcare organizations, local or state health departments, or other law enforcement authorities on the whereabouts of patients during an incident may include patient's name and location. The information shared about the patients will be

in accordance with applicable HIPAA laws and regulations.

#### **H. COMMUNICATION WITH ALTERNATE CARE SITE**

The Hospital Command Center (HCC) will maintain communications with the Alternate Care Site (ACS). Once the ACS has been established, an Alternate Care Command Center (ACCC) will be initiated using the HICS format. The site will initiate contact with the HCC via the Hospital Liaison Officer through the ACS Liaison Officer to ensure that continuous communication, leadership and documentation will occur. The available communication will be the following: phones, fax, and radios.

#### **I. BACKUP COMMUNICATIONS**

MHSC will maintain a current listing of backup communication systems or devices. The communication devices or systems will be tested on a regular basis and be included in exercises.

A listing of all communication of primary or secondary communication systems or devices is listed below:

- Email will be available if the infrastructure is working.
- Inter-departmental radios or inter-hospital radio networks may be used as backup communication. Training must be achieved along with an instruction card attached for those that do not use the equipment often.
- Fax machines may be used as backup as long as some are on the emergency power and land line telephone lines are functional.
- Ham radios may be used either with internal or external operators.
- Cellular telephones have proven to shut down quickly during a natural or large-scale disaster and may not be reliable.
- The Hospital has satellite telephones for back up communications.
- Runners will be used as a last resort when all other communications fail.

Mass Notification authority is granted to the Director of Security and appointed designees, PBX operators, and house supervisors.

### **IX. RESOURCE AND ASSET MANAGEMENT - TJC EM 12.02.09**

#### **A. OBTAINING & REPLENISHING MEDICAL, NON-MEDICAL & MEDICATION SUPPLIES**

The amounts, locations, processes for obtaining and replenishing of medical and non-medical pharmaceutical supplies, including personal protective equipment, has been established. The process will need to go from mitigation to recovery stages. Medical supplies include anything used in the care of patients. Non-medical supplies include food, linen, water, fuel, and transportation vehicles. (see attached 96-hour sustainability grid).

The amounts and locations of current supplies will be evaluated annually to determine

how many hours the facility can sustain before replenishing. This will give the facility a par level on supplies and aid in the projection of sustainability before terminating services or evacuating if during an incident supplies are unable to get to the facility. The inventory of resources and assets that were discussed earlier in the Planning Activities Section is the starting point of par levels.

Memorandums of Understanding for each applicable emergency operations plans are available from the In House Counsel once the par level has decreased.

**B. SHARING OF RESOURCES**

The process of sharing resources with other healthcare organizations outside of the community during a regional incident will be coordinated through the County Emergency Operations Center (EOC). The Western Wyoming Healthcare Coalition identifies five (5) Medical Facilities in our region that could provide staffing support, supplies and other essential resources if needed in a disaster. The local community EOC will be contacted and support requested, with essential supplies, as needed and will be responsible for delivery of the needed resources.

**C. MONITORING RESOURCES AND ASSETS**

During the emergency, a process has been put into place under the Logistics Chief that will monitor the overall quantities of assets and resources. This information will be communicated through HICS within the facility and to those within the community who have a need to know.

**X. SECURITY AND SAFETY MANAGEMENT – TJC  
EM.12.02.07**

**A. SECURITY WITH COMMUNITY**

Upon activation the Emergency Operations Plan, all available Security personnel will be called in to report to the Security Branch Director and standby for further direction from the HCC. Security issues will be handled according to Security Department policies and procedures. In the event that MHSC's Security Department becomes overwhelmed, they will contact the Joint Combined Communications Center to request support from local law enforcement and state law enforcement agencies. Local law enforcement or Western Wyoming Community College security if available, may be utilized to assist with outside traffic control and crowd control as well as external security for the facility. Contact information is on resource list.

**B. ACCESS & EGRESS CONTROL**

Due to the limited amount of Security personnel in the facility at any given time, there may be a time when the facility is locked down. Secure Operations or a "lock down" refers to the locking of all entrance and exit doors to buildings and the posting of personnel at these doors to assure that only authorized persons enter or exit. The decision to "lockdown" the facility will be made by the Incident Commander in HCC.

**C. TRAFFIC CONTROL**

Security Branch Director if assigned, initiate the organization's Traffic Control Plan to manage the movement of personnel, vehicles, and patients both inside and on the grounds of the facility if the need arises during an incident. Security personnel will support the movement of patients and staff inside the facility. If advisable, the Security staff will also assist in the movement of vehicles, both emergency and commercial, on the grounds. When appropriate, local law enforcement will assist in the management of traffic on the grounds of facility.

## **XI. STAFF MANAGEMENT – TJC EM.12.02.03**

### **A. ROLES AND RESPONSIBILITIES**

MHSC will provide staff training to ensure that critical staff functions will be performed for the rapid, effective implementation of any incident response.

When the Hospital Incident Command System (HICS) is established, the HICS Organization Chart and Job Action Sheets are used to assist Command Staff and Section Chiefs to assign staff to HICS positions as situational conditions dictate.

The Section Chiefs are responsible for assuring that the critical tasks they manage are filled by the most appropriate available staff member and to assure that the tasks are performed as quickly and effectively as possible.

If staff is not available for handling critical tasks defined by the Job Actions Sheets, staff will be drawn from the appropriate departments or from the Labor pool. Human Resources will function as the Personnel Tracking Manager.

As staff is recalled, they may replace personnel in task assignments for which they are better qualified to perform. Staff can only perform activities that they are capable of safely performing or for which they are allowed based on certification/license. If questions arise concerning assignments, the appropriate Section Chief will determine who will perform the task. The tasks are evaluated frequently to ensure the most appropriate staff members available are being used, burnout or incident stress problems are identified, and staff members in these jobs are rotated as staff levels allow.

### **B. MANAGING STAFF SUPPORT ACTIVITIES**

During activations of HICS, various modifications and accommodations are made for hospital staff to assist them in coming to the hospital to provide needed services. The following accommodations are authorized:

- When there is a Mass Notification and it is difficult or impossible because of weather conditions, the hospital will work with law enforcement that possess the appropriate type of vehicles to assist staff and extended family members in getting to and from the hospital or alternate care site(s).
- Where necessary because of conditions, the hospital will accommodate staff that need to sleep, eat, and/or other services in order to be at the hospital to provide needed services.
- The Hospital will facilitate incident stress debriefings. Debriefing areas may be staffed by available staff from either Southwest Counseling, available clergy,

and others in the community or state(s) trained in incident stress debriefing.

## **C. MANAGING STAFF FAMILY SUPPORT ACTIVITIES**

During activations of the EOP, various accommodations may be made for staff family members. The accommodations are to ensure that staff is available to provide their services to the Hospital and community. Family accommodations will be made available in those unusual situations where entire families must come to enable staff to be present for emergency services coverage. These will normally be arranged prior to families arriving at the hospital. Staff should notify HCC of their need for childcare, elder care or animal care before reporting to the Hospital. Staff should exhaust all other resources for care.

### **1. Child Care Center:**

A Child Care Center will be established if deemed necessary and appropriate by the Incident Commander. The Childcare area will be set up at the Family, Internal & Occupational Medicine Clinic (3000 College Dr.) as determined by availability; an alternate care site may be necessary. Staffing for the Child Care Center will be assigned from the Labor Pool. The following requirements regarding the Child Care Center will be followed:

- A Childcare tracking form will be filled out upon admittance and discharge of child from the daycare
- An ID band will be attached to each child
- Food and or snacks may be provided by Nutritional Services, depending on length of disaster
- Parents will need to provide the necessary essentials for their child; materials management will assist with additional supplies needed
- Individuals designated to pick up children from Childcare will enter through the main entrance and be escorted to the Child Care Center
- Parents or designee will sign out the child on the same tracking form the child was signed in on
- Complete Child - Elder Care Registration-Tracking Form

### **2. Elder Care:**

- In the event that elder care is needed, the hospital can utilize any available space in the Hospital. In the event the Hospital does not have space readily available, then an alternate care site can be utilized. It would be the responsibility of HCC to assess the needs and designate caregivers to the alternate site from the Labor Pool.
- Complete Child - Elder Care Registration-Tracking Form

### **3. Pet Care:**

- If staff or patients arrive with their pets, the Sweetwater County Emergency Management Office (SCEMO) (307-922-5370) or Sweetwater County Sheriff's Office (SCSO) (after hours at

307-922-5300) will be contacted by HCC. SCEMO) or SCSO will contact Sweetwater County Animal Response Team to assist with the temporary placement of animals.

- Complete Small Animal Intake Form

#### D. TRAINING AND IDENTIFICATION OF STAFF - TJC EM.15.01.01

1. EM Committee and all leaders will receive the appropriate training in HICS and NIMS prior to an incident. This training will also be made available to the staff, LIP and authorized volunteers.
2. Hospital Incident Command System identification vests are issued for the appropriate roles in the HICS organization chart. Vests identify the HICS title/role and are color coded by branch for easy recognition.
3. All employees will wear their Hospital identification badges at all times during the incident.
4. All EM committee members have continuing education annually on the Hospital's learning system as an extensive continuing education training program for disaster response and emergency preparedness. Bi-annually the EM Coordinator has an instructor provide HICS training to all leadership staff that want to attend. Certificate of training is provided.

## XII. MANAGING ESSENTIAL or CRITICAL UTILITIES – TJC EM.12.02.11

- A. During an incident, the organization will ensure alternate means for providing essential utility systems are available as identified in the EOP. The organization will assess the requirements needed to support and maintain essential systems such as fuel, water, exterior storm drains and supplies for a period of time identified in the ***Inventory and Sustainability Tool***.
- B. This assessment shall include the requirements for 96 hours without community support. The alternative means for these sources are located in the ***Inventory and Sustainability Tool***.
- C. The alternative utility systems and supplies networks are identified in the Facilities Support Policies and are included in the ***Alternate Utilities***, on alternate means of essential utility systems. The list of essential utility systems includes:
  - Boilers
  - Air Handlers
  - Elevators
  - Medical gas systems/Vacuum systems
  - Plumbing
  - Normal power supply system
  - Emergency power supply system
  - Natural gas



- Diesel fuel
- Water supply
- Maintaining Storm Drainage

### XIII. **MANAGING PATIENT CLINICAL AND SUPPORT ACTIVITIES – TJC EM.12.02.05**

#### A. **TRIAGE AND CASUALTY LOCATIONS**

Anyone seeking medical care in the Emergency Department during an Incident will be triaged. The area by the ambulance entrance doors will be the primary triage location. The Emergency Department waiting area can be used for triage if additional space is needed. Patients will initially be triaged by a physician or nurse and will be tagged for identification. All patients will be sorted as follows:

The following locations have been identified as the locations for **Provision of Care** for casualties and **fatalities**:

LOCATION	DESCRIPTION
<b>Morgue</b>	Deceased victims will go to the basement morgue. Additional morgue space may be obtained by contacting the local mortuaries
<b>PACU Area</b>	Victims classified as walking wounded will be sent to the PACU (Post Anesthesia Care Unit) Area for evaluation
<b>Ambulance Garage/ Triage Area</b>	Triage will be conducted at the entrance to the ambulance garage. ED waiting area can be used if more space is needed.
<b>Same Day Surgery/ Patient Dying Area</b>	Patients expected to die (Black tagged) will be sent to an assigned room on Same Day Surgery for palliative care
<b>Nursing Care Units</b>	All patients requiring surgery will be held in the appropriate nursing care unit until they can be treated in the OR.

CATEGORY	DESCRIPTION
<b>Immediate Care Patients (Red Tag)</b>	Victims survival is dependent upon immediate medical intervention
<b>Delayed Care Patients (Yellow Tag)</b>	Victims whose injuries require intervention but whose condition allows treatment to be delayed for up to 1 hour without further deterioration
<b>Minor Care Patients (Green Tag)</b>	Victims whose injuries can wait an undetermined amount of time (greater than 1 hour) without risk of significant deterioration
<b>No Injury</b>	Victims who do not require medical attention, but may require emotional support



<b>Morgue (Black Tag)</b>	Victims who are Deceased on Arrival or who will expire regardless of treatment will receive Palliative care. Clergy will be assigned
<b>Classrooms/ Discharge Area</b>	Inpatients and Outpatients who can be discharged, will be escorted to the classrooms or cafeteria in the basement if "Shelter in Place" conditions exist, otherwise patients can be discharged with the intention of leaving the facility

## **B. PATIENT CARE AND DOCUMENTATION**

In the event of a situation, i.e. power loss, that impacts MHSC's electronic medical record; all departments will refer to the IT Downtime policy and/or their department specific Downtime policy for guidance.

## **C. CLINICAL ACTIVITIES**

Depending on the nature of the incident, HCC will make the decisions regarding if and when the Hospital will temporarily close to new admissions, transfers, elective surgeries and procedures.

## **D. EVACUATION ACTIVITIES**

MHSC realizes that a severe or catastrophic incident may force the evacuation of part or all of the Hospital. In the event that the Hospital needs to be evacuated the Incident Commander will give the evacuation order.

## **E. PERSONAL HYGIENE AND SANITATION REQUIREMENTS**

In situations where hygiene may be compromised by lack of water for bathing and normal bathroom accommodations, the following guidelines will be followed:

- The alternative means to personal hygiene can be baby wipes, personal wipes, or alcohol-based rubs.
- Family members may be supplied with cleaning materials and be used to help clean the patient during an incident.
- The alternative means to sanitation, if toilets are inoperable toilets may be manually flushed using bottled or reclaimed water.
- Environmental Services use of water will be curtailed to the extent of one change of water per day for mopping except in surgery, delivery rooms, and isolation areas or if deemed necessary by the Environmental Services Director.
- Limit changes of bed linen to those patients who have gross soiling from draining wounds, catheters, etc.
- The Verna Care system will not be used during this time.

## **F. MENTAL HEALTH SERVICES**

Due to limited availability, mental health services during an incident will be limited to the availability of staff from Southwest Counseling and/or the availability of Chaplin services.

## **G. MORTUARY SERVICES**

In the event of an incident involving deceased patients, MHSC will contact the County Coroner for the appropriate clearance and procedures. If necessary, the "mobile morgue" owned by the County should be requested for securing bodies not able to be contained in facility's existing morgue. The Coroner's office will be notified when the refrigerated trailer is full or the disaster has been cleared.

- H. **PATIENT TRACKING: INTERNAL AND EXTERNAL** For the departments that will be receiving disaster patients such as the Emergency Room and patient care units, the units will have patient trackers assigned to track the patients entering and leaving the areas. The patient tracking information will be given to the Patient Tracking Manager who will track all the patients within the facility during an incident. The form to use for patient tracking will be the **HICS 254 – Disaster Victim Patient Tracking Form**.

If patients are evacuated, the process will be the same except for the forms. The individual patient tracking for evacuation will be the **HICS 260 – Patient Evacuation Tracking Form**.

When more than two patients are being evacuated, the **HICS 255 – Master Patient Evacuation Tracking Form** will be used as a master list of all those patients who were evacuated.

#### XIV. **DISASTER PRIVILEGES-VOLUNTEER LICENSED INDEPENDENT PRACTITIONERS (LIP)/OTHER LICENSED VOLUNTEERS – TJC EM.12.02.03**

- A. The Hospital grants disaster privileges to volunteer licensed independent practitioners (LIP) and other volunteers that are licensed, certified and/or registered in a skilled health care position.
- B. Disaster privileges are extended when the Emergency Operations Plan has been activated in response to an incident and the Hospital is unable to meet immediate patient needs. The Medical Staff policy for granting privileges in the event of a disaster has identified the Hospital's process for granting disaster privileges

#### XV. **SPECIAL NEEDS/VULNERABLE PATIENTS DURING EMERGENT TIMES RESPONSE**

- A. Anyone seeking medical care in the Emergency Department during an emergency response will be triaged, including those with special needs.
1. The staff at MHSC will be trained to identify the special clinical needs of the population of patients that are considered to be vulnerable during an emergency.
  2. Patient registration and medical records may be used to help identify the special needs/vulnerable population.
- B. Clinical management decisions regarding the special needs/ vulnerable patients will be

made on an individual basis and will take into account the medical needs of the patient and the current status of the emergency situation.

1. In the event that the patient is treated at MHSC, clinical procedures provided will be documented in the patient's medical record.
2. All Hospital departments are responsible for the tracking of the patient, both inside and outside the facility.
3. If the patient needs specialized care not provided by MHSC, special provisions will be made and the patient will be transferred to an appropriate specialized care center.
  - Pediatric patients- Primary Children's Hospital, Salt Lake City, UT
  - Denver's Children's Hospital, Denver, CO
  - Geriatric and disabled patients- Transferred to specialty hospital depending on condition and availability
  - Mental health/ addiction patients- Wyoming Behavioral Institute, Casper, WY
  - Wyoming State Hospital, Evanston, WY
4. Clinical management analysis will be made at the conclusion of the emergency response and revisions will be made as necessary in preparation for the next emergency.

**Reviewed and Approved:**

Emergency Management Committee: 07/14/2023

MEC: 01/24/2024

Board of Trustees:

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## Attachments

[2020 - 96 hour sustainability grid-9.20.pdf](#)

[2022 Hazard Vulnerability Analysis.pdf](#)

[802673 - Small Animal Intake Form.pdf](#)

[802675 - Child - Elder Care Registration-Tracking Form.pdf](#)

[802676 - Decon Response Team.pdf](#)

[802736 - Disaster Readiness Report.pdf](#)

[803088 - Leadership Order Succession form 10.20.pdf](#)

[HICS IV Forms and Instru#24.docx](#)

[Hospital Resource Directory- HICS 258 Directory 2019.pdf](#)

[Medical Staff Policy for Granting Privileges in the event of a Disaster](#)

[Small-Rural Hospital Job Action Sheets.doc](#)

## Approval Signatures

Step Description	Approver	Date
	Irene Richardson: CEO	12/2022
	Tami Love: CFO	12/2022
	Kari Quickenden: Chief Clinical Officer	12/2022
	Ann Clevenger: CNO	11/2022
	Suzan Campbell: General Legal Counsel	11/2022
Emergency Management	David Beltran: Security Director/ Emergency Management	11/2022

## Reg. Standards

TJC EM 12.01.01, TJC EM.09.01.01, TJC EM.10.01.01, TJC EM.11.01.01, TJC EM.12.02.01, TJC EM.12.02.03, TJC EM.12.02.05, TJC EM.12.02.07, TJC EM.12.02.09, TJC EM.12.09.11, TJC EM.13.01.01, TJC EM.14.01.01, TJC EM.15.01.01, TJC EM.16.01.01, TJC EM.17.01.01



Board Meeting Date:3/4/2024

Topic for Old & New Business Items:  
HR Committee – New Employee Policy

Policy or Other Document:

- ☐ Revision  
☒ New

Brief Senior Leadership Comments:

The Human Resources Committee held a special meeting on 02/26/2024 to discuss the above mentioned (and attached) policy. In House Counsel, along with Board counsel, Geoff Phillips have worked on this policy and presented it to the Committee members for review. The Committee agreed unanimously that the policy is accurate and recommends a do pass to the Board once they have had a chance to review. It is well written and is imperative to have active .

Board Committee Action:

Please review as a first read at the March 2024 Board Meeting.

Policy or Other Document:

- ☒ For Review Only  
☐ For Board Action

Legal Counsel Review:

- ☒ In House      Comments:Suzan Campbell has been sent the policy  
☒ Board            Comments:Geoff Phillips drafted the policy

Senior Leadership Recommendation:

Leadership recommends that this policy pass as to better serve our employees and the interests of the hospital.

## **CONSENSUAL RELATIONSHIP POLICY**

**PURPOSE:** The objective of this policy is to minimize the risk of conflicts of interest, promote fairness, and reduce instances of real or perceived sexual harassment in the workplace.

**SCOPE:** This policy applies to employees, physicians, contractors, or other individuals working at Memorial Hospital of Sweetwater County (the “Hospital”).

### **POLICY:**

#### **I. Definitions.**

“Consensual Romantic, Dating or Sexual Relationship:” For purposes of this policy, consensual romantic relationships exist when individuals mutually and consensually understand a relationship to be romantic, intimate and/or sexual in nature, whether casual or serious, short-term or long-term, past or present. “Consensual Romantic, Dating or Sexual Relationships” may include incidents or occurrences in the form of electronic, physical or verbal conduct. Non-consensual sexual or romantic conduct is always prohibited by Hospital policy and may be in violation of applicable law.

“Employee(s)” means all at-will employee(s) and non-at-will employee(s) as defined in Hospital Employee Policy – Termination, Suspension without Pay and Appeal; and, all employees, including nurses, doctors, other medical staff and any other employees who have entered into a contract of employment with the Hospital.

“Contractor[s],” or “Independent Contractor[s]” mean any and all contractors; subcontractors; employees of contractors and subcontractors; and, any other independent contractors and their employees that are contracted by or on behalf of the Hospital to provide any work, materials, labor or services to the Hospital.

#### **II. No romantic or sexual relationships between those persons in inherently unequal positions.**

Consensual romantic or dating relationships that might be appropriate in other circumstances are prohibited when they occur between (1) persons in inherently unequal positions where one party has real or perceived authority, influence, or power over the other’s conditions of employment or has the ability to directly impact the other’s career progression, which includes formal and informal supervisory relationships. This includes, but is not limited to, a person in a management or supervisory position with an employee, physician, contractor, or other individual whom he or she directly supervises or whose terms or conditions of employment or contract he or she may influence (examples of terms or conditions of employment or contract include promotion, termination, discipline and compensation), or (2) an employee of the

Hospital and another employee over whom the employee has or potentially will have supervisory, advisory, evaluative, or other authority or influence.

There are no prohibitions or reporting requirements for consensual social interactions between employees and/or contractors, regardless of supervisory relationships, that are not romantic in nature.

Even where negative consequences to the participants do not result, such relationships create an environment charged with potential or perceived conflicts of interest and possible use of supervisory leverage to maintain or promote the relationship. Romantic or sexual relationships that the parties may view as consensual may still raise questions of favoritism, as well as of an exploitative abuse of trust and power.

Romantic or dating relationships between Hospital employees, physicians, nurses, medical staff, and/or contractors are permitted, subject to the requirements of this policy.

### **III. Reporting Requirements.**

Individuals involved in a relationship at the Hospital who are subject to this policy must immediately disclose the relationship to Human Resources. All employees and contractors are required to report violations of this policy to Human Resources.

Individuals involved in a relationship at the Hospital who are subject to this policy may be asked to sign a document acknowledging that the relationship is free from coercion and harassment.

A supervisor or manager who has had a previous romantic or dating relationship with an employee, physician, contractor, or other individual whom he or she directly supervises or whose terms or conditions of employment or contract he or she may influence must disclose the previous relationship to Human Resources and will not be involved in decisions relating to that individual's promotions, raises, termination or other terms and conditions of employment. With respect to those involved in a previous relationship as described in this paragraph, Hospital management, in its sole discretion, may (1) remove or transfer one or all of the individuals involved, or (2) Remove the supervisor or individual in the position of authority or perceived authority from all official matters affecting, or appearing to affect, the subordinate.

If a prohibited consensual romantic relationship is reported to Human Resources involving a contractor, Human Resources shall immediately contact the involved individual's supervisor and coordinate the enforcement of this policy with the contractor's supervisor.

Retaliation for making a report or participating in a process under this policy is prohibited. The Hospital prohibits an individual from knowingly filing a false complaint or making misrepresentations of a violation of this policy. A complaint made in good faith is not considered false merely because the evidence does not ultimately support the allegation of a violation of this policy. If an investigation results in a finding that a person who has accused another of violating this policy has acted maliciously or has recklessly made false accusations, the reporting party will be subject to appropriate Corrective Action in accordance with Hospital policy. It is important to note that due process considerations may limit the ability to investigate or resolve anonymous complaints.

#### **IV. Professionalism.**

Physicians, nurses, medical staff, contractors and Employees are expected to conduct themselves in a professional manner at all times. Workplace dating, romantic or sexual relationships must not interfere with any contractor's or employee's professionalism, including treating others with respect and refraining from behavior that may make others feel uncomfortable (for example, overt physical displays of affection and using sexual language). Sexual relations or sexual contact of any kind or with anyone is strictly prohibited in Hospital facilities.

Management personnel are expected to set a high standard of professional conduct both at work and in any social setting at events sponsored by the Hospital. For this reason, management personnel are prohibited from social interaction with subordinates that is or might be perceived as inappropriate (for example, unwanted flirting, touching or other behavior that may be regarded as sexual harassment).

#### **V. Discretion and Non-discrimination,**

The organization retains discretion in its enforcement of this policy. Decisions made under this policy will be made based on operational and business reasons and without regard to sex, race, color, religion, creed, age (40 and over), national origin, citizenship, physical or mental disability, military service or application, sexual orientation, gender identity or any other protected characteristic under federal, state or local laws.

#### **VI. Consequences.**

Although one or more corrective action measures may be taken in connection with a violation of this policy, no formal order will be followed. Corrective action may include any of a variety of actions depending on the circumstances and severity of the violation. A violation of this policy may result in one or more of the following consequences at the discretion of Hospital management:



- A. The removal or transfer of one or all of the individuals in violation of the policy to sever the supervisory relationship.
- B. The removal of the supervisor or individual in the position of authority or perceived authority from all official matters affecting, or appearing to affect, the subordinate.
- C. An administrative inquiry into the matter to determine if any inappropriate action(s) occurred as a result of the relationship, which could result in administrative action, including corrective action in accordance with the Hospital Corrective Action Policy up to and including termination from employment. Such findings may also be considered when making administrative decisions to include funding, staff, and resources.

**RELATED POLICIES:**

NON-DISCRIMINATION AND ANTIHARASSMENT

## ORIENTATION MEMO

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Board Meeting Date: March 4<sup>th</sup>, 2024

Topic for Old & New Business Items: 2024-2027 Strategic Plan

Policy or Other Document:

<input type="checkbox"/>	Revision
<input checked="" type="checkbox"/>	New

Brief Senior Leadership Comments: This is our 2024-2027 Strategic Plan. We have been working on this since November, with input from the Board of Trustees, Senior Leadership, Medical Staff and Directors. This is a comprehensive plan that includes objectives, initiatives, and strategies for the next three years.

Board Committee Action: The Strategic Plan has been presented to the Governance Committee and has been brought forward to the full Board of Trustees for first review.

Policy or Other Document:

<input checked="" type="checkbox"/>	For Review Only
<input type="checkbox"/>	For Board Action

Legal Counsel Review:

<input type="checkbox"/> N/A	In House	Comments:
<input type="checkbox"/> N/A	Board	Comments:

Senior Leadership Recommendation: The CEO worked closely with Senior Leadership to create this plan and it is my recommendation that the Board of Trustees consider this plan for first review.



# MEMORIAL HOSPITAL OF SWEETWATER COUNTY

## 2024 – 2027 STRATEGIC PLAN

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*Irene Richardson, CEO*

# MESSAGE FROM THE CEO

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- Memorial Hospital of Sweetwater County is proud to provide excellent healthcare to Sweetwater County and beyond, with a strong belief in our mission: Compassionate care for every life we touch. Our commitment to our person-centered care culture is what helps us serve our mission for every patient, every time.
- Our person-centered care culture has helped us create an environment where our patients will receive quality healthcare that is safe and compassionate, accessible, and affordable, all of which allows for an excellent patient experience.
- This strategic plan will guide us in achieving our vision of being your community's trusted healthcare leader, by providing high quality and safe healthcare, with compassion, for every life we touch.

# TABLE OF CONTENTS

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- Mission, Vision, Values
- Strategic Priorities
- Strategic goals and initiatives





# INTRODUCTION

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Our strategic pillars demonstrate what we do here at MHSC daily. We provide our patients with an excellent experience by offering a wide array of accessible quality services in a safe and compassionate environment. We are fortunate to have such caring and kind people working here, and their desire is to help our patients heal. Here at MHSC, our stakeholders are our patients, our amazing people who work here, and our community. This plan will help us achieve our mission and vision and help us to advance healthcare in Sweetwater County and beyond.



# 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 STRATEGIC PRIORITIES





# PATIENT EXPERIENCE



*Offering a person-centered culture that  
provides kind and compassionate care to  
every patient, every time*



# QUALITY AND SAFETY



*Providing patient centered care that is evidence-based, reliable, timely, and strives for zero preventable harm, while keeping our patients and employees safe*





# COMMUNITY, SERVICES AND GROWTH



*Cultivating strong community partnerships and exploring, developing, and offering sustainable and easily accessible services, as we continue to meet and advance healthcare in Southwest Wyoming*



# EMPLOYEE EXPERIENCE



*Creating an environment where employees feel appreciated, safe, and supported and providing education and opportunities that will help them grow both personally and professionally*





# FINANCIAL STEWARDSHIP



*Managing financial resources that will provide for the reinvestment in our people, services, physical facility buildings and grounds and our community*



# OUR VALUES





BE KIND



*Demonstrating compassion, consideration,  
and thoughtfulness*



# BE RESPECTFUL



*Being mindful of individual perspectives,  
priorities and needs*





# BE ACCOUNTABLE



*Taking responsibility for our commitments,  
behaviors, and actions*



# WORK COLLABORATIVELY



*Cooperating with and encouraging each other  
to achieve a common goal*





# EMBRACE EXCELLENCE



*Dedicated to setting standards that meet and exceed expectations*



# STRATEGIC GOALS AND INITIATIVES



# PATIENT EXPERIENCE

## □ *Overall Goal*

- *Continue to utilize our person-centered care culture to improve the patient experience and improve the satisfaction of our patients*

# PATIENT EXPERIENCE

- **Objective:** *Provide compassionate care for every life we touch for every patient, every time, aligning with the Mission, Vision and Values of MHSC*
- **Measurement:** *“Degree to which all staff showed compassion” - Improve HCAHPS score by 3 percentage points per year*



# PATIENT EXPERIENCE

- **Objective:** *Improve patient experience and patient satisfaction scores*
- **Measurement:** *Improve HCAHPS scores by 3 percentage points per year in the following measures:*
  - *Hospital Environment*
  - *Discharge Information*
  - *Care Transitions*

# PATIENT EXPERIENCE

## ➤ **Strategic Initiatives**

- *Build the capacity of our Directors through a formal training program. This will help create staff accountability to consistently live our mission, vision and values and utilize our service standards across the entire hospital. It will also help increase the engagement of the staff they manage. This will allow the senior leaders to have more time to focus on the strategic priorities of the organization*
- *Dedicate one Senior Leadership meeting per month to the implementation and management of the 3-year strategic plan and working more strategically to communicate, coach, and lead the organization to achieve our overall goal*

# QUALITY AND SAFETY

## ***Overall Goal***

-  *Improve CMS Star rating*

# QUALITY AND SAFETY

➤ **Objective:** *Improve safety of care and timeliness of care*

➤ **Measurement:** *To be within the top 10% in three measures in the Timeliness of Care domain.*

# QUALITY AND SAFETY

## ➤ ***Strategic Initiatives***

- *Create a Process Improvement position that will require Lean training and will be responsible for leading efforts to improve patient safety, facilitate projects in and within departments that can guide continuous process improvement*
- *Create a Patient and Staff Education Program*
- *100% of clinical staff will complete TeamSTEPPS Training by the end of three years*
- *In-house legal counsel will provide a “risk management minute” quarterly each year and provide a recording for all staff to ensure validation that it has been reviewed*
- *Develop method that will allow Synergi to categorize reports and create ability to track and trend data*
- *Utilize the Health Equity plan to promote the highest quality outcomes and safest care for all people.*

# COMMUNITY, SERVICES AND GROWTH

## □ *Overall Goal*

- *Maintain and improve our community presence, and enhance existing services as well as develop new services*

# COMMUNITY, SERVICES AND GROWTH

- **Objective:** *Advance key areas identified in our community needs assessment*
- **Measurement:** *Improve and establish outreach to community and outlying areas in the following areas:*
  - *Community education*
  - *Diabetes education*
  - *Care for the caregiver*
  - *Mental health*

# COMMUNITY, SERVICES AND GROWTH

- **Objective:** *Improve our reputation in the community and outlying areas*
- **Measurement:** *Improve from a Google 2-star rating to a Google 3-star rating by the end of three years*



# COMMUNITY, SERVICES AND GROWTH

## ➤ **Strategic Initiatives**

- *Utilize master plan to identify areas where we can provide outreach to outlying areas*
- *Develop a strategic communication/marketing plan that will increase the number of presentations for community education, nutrition management, sharing our successes more consistently and effectively and increasing the number of testimonials.*
- *Increase the number of presentations that are made to the community and outlying areas*

# EMPLOYEE EXPERIENCE

## □ *Overall Goal*

- *Improve employee retention and employee satisfaction for a happier, healthier staff*

# EMPLOYEE EXPERIENCE

- **Objective:** *Weave our culture through our Human Resources and management practices to recruit, reward, and retain staff committed to carrying out our mission*
- **Measurement:**
  - *Reduce staff turnover by 10% per year, using the current turnover rate*
  - *Improve our employee engagement scores by 3% per year*

# EMPLOYEE EXPERIENCE

## ➤ **Strategic Initiatives**

- *Hire a consultant to help us evaluate and review salaries at a minimum of every three years*
- *Directors will attend a comprehensive program to further develop relationships across departments and support each other. Training will also include best practices for hiring, evaluating and mentoring staff. Senior Leaders and Human Resources will also learn to model, support and address performance gaps. The training will also include hiring, onboarding, evaluations, recognition, ect.) Training will be complete by the end of 2024.*
- *Develop plan for success sharing bonus for employees if goals are reached*

# FINANCIAL STEWARDSHIP

## ***Overall Goal***

-  *Improve the organization's overall financial performance*

# FINANCIAL STEWARDSHIP

➤ **Objective:** *Improve Revenue Cycle using CliftonLarsenAllen recommendations*

➤ **Measurement:**

- *Improve Days of Cash on Hand by 10% each year for three years*
- *Reduce and maintain Days in A/R to 45 days by the end of 2024*
- *Maintain level of claims denials at state and national benchmarks*
- *Reduce and maintain Days Not Final Billed (DNFB) at five days by the end of 2024*

# FINANCIAL STEWARDSHIP

➤ **Objective:** *Work with County Commissioners to build County Maintenance Fund*

➤ **Measurement:**

➤ *Build the MHSC County Maintenance Fund to \$2,000,000 by the end of three years*

# FINANCIAL STEWARDSHIP

- **Objective:** *Create and maintain (sinking fund, funded depreciation, building fund?)*
- **Measurement:**
  - *Build and maintain the building fund to the amount of depreciation expense by the end of three years*



# FINANCIAL STEWARDSHIP

➤ **Objective:** *Reduce the number of traveler staff and hire permanent staff*

➤ **Measurement:**

➤ *Decrease the number of Nursing and Respiratory Therapy travel staff by 30%, per year for three years*

# FINANCIAL STEWARDSHIP

## ➤ ***Strategic Initiatives***

- *Work with the County Commissioners to set annual budget to achieve \$2,000,000 goal over three-year strategic plan and still allow for adequate funds in annual budget for routine maintenance*
- *Supplement the building fund from monthly, quarterly or annual contributions from cash flow from operations to achieve the total amount of depreciation expense by the end of three-year strategic plan*
- *Nursing leadership will work with Human Resources to recruit and retain permanent staff and reduce travel staff by 30% per year*



THE WAY TO GET STARTED IS TO  
QUIT TALKING AND BEGIN DOING.

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*Walt Disney*



# SUMMARY

This Strategic Plan will help us continue to provide excellent healthcare in Sweetwater County and beyond as well as guide us in advancing healthcare into the future





THANK YOU



*Irene Richardson, CEO*

*MHSC*

*[sweetwatermemorial.com](https://sweetwatermemorial.com)*





Board Meeting Date:3/4/2024

Topic for Old & New Business Items:  
Medical Staff Bylaws

Policy or Other Document:

- ☒ Revision  
☐ New

Brief Senior Leadership Comments:

The bylaws committee/MEC have worked to make many changes to the bylaws. They have consulted bylaws attorney, Nick Healey. The changes were approved by MEC on 1/24/24 and by the General Medical Staff on 2/21/24. I am sending the red-line copy that shows all of the changes. If you would prefer a final draft, I can send that, as well.

Board Committee Action:

Click or tap here to enter text.

Policy or Other Document:

- ☒ For Review Only  
☐ For Board Action

Legal Counsel Review:

- ☐ In House      Comments:Click or tap here to enter text.  
☐ Board          Comments:Click or tap here to enter text.

Senior Leadership Recommendation:  
Recommend Approval.



# IS Report January 2024

By Terry (TJ) Thompson, IS Director

## MHSC IS service environment:

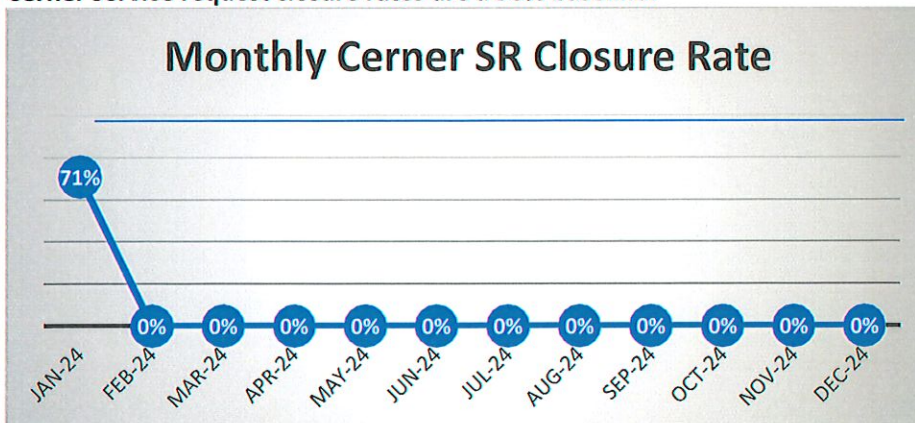
- 1158 computer user accounts
- 100 portable devices, Cell Phones, and iPads
- 790 Desktop systems, Laptops, and Desktops
- 562 VoIP Telephony devices
- 164 Servers, 158 being virtual systems.
- 86 Networking Nodes
- 103 Wireless devices
- 18 UPS

## MHSC IS Service Request closure rates at a 95% baseline:



Service Desk 98% of our new 95% weekly meantime to restore baseline.  
The service desk closed 952 of the 978 service requests last month.

## Cerner service request closure rates are a 90% baseline:



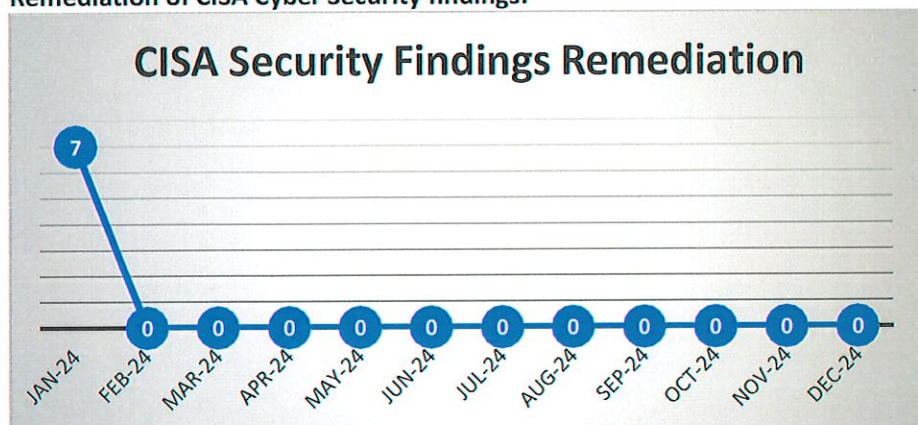
Cerner is at 71% of the weekly meantime to restore of the 90% baseline.

### MHSC Project Completion:

Projects being of different sizes and magnitude we decided to break them down into project stories, where they are an hour to two-hour duration. These are included within our service tickets and fall under the same baseline.

1. Next month we will begin our new Inet Edge project where we will move to the Hospital's new subnet.
2. Next month we have our UPS replacement project for the Hospital Data Center.

### Remediation of CISA Cyber Security findings:



The CISA Security Findings are down to 7, a reduction of 24 of the original 31 findings.

The remaining seven CISA security findings are known as heavy lift issues where we must make infrastructure changes without outages. We will continue to monitor the remaining CISA issues this year with an ETA by the third quarter of 2024.

Below is the latest CISA Cyber Hygiene Report Card, which is performed weekly. CISA is scanning MHSC 44 external public IP addresses for vulnerabilities. We have 44 scanned addresses, with 8 hosts and 14 services on these hosts. Where two hosts have 4 medium vulnerabilities. AllWest Communications has provided routing information to set up our Internet Edge project, which will remove the last three vulnerabilities. We will begin system migration to this new network subnet next month and hope to remove this vulnerability soon.



2024-01-27

## CYBER HYGIENE

# REPORT CARD

Memorial Hospital of  
Sweetwater County



0

Hosts with  
unsupported  
software



0

Potentially Risky  
Open Services



50%

Increase in  
Vulnerable  
Hosts



**CISA**  
CYBER INFRASTRUCTURE

## HIGH LEVEL FINDINGS

### LATEST SCANS

**December 12, 2023 — January 28, 2024**

Completed host scan on all assets

**January 23, 2024 — January 28, 2024**

Last vulnerability scan on all hosts

### ASSETS OWNED

44

No Change

### HOSTS

9

No Change

### VULNERABLE HOSTS

3

Increase of 1  
33% of hosts vulnerable

### ASSETS SCANNED

44

No Change  
100% of assets scanned

### SERVICES

15

No Change

### VULNERABILITIES

5

Increase of 1

## VULNERABILITIES

### SEVERITY BY PROMINENCE



### VULNERABILITY RESPONSE TIME

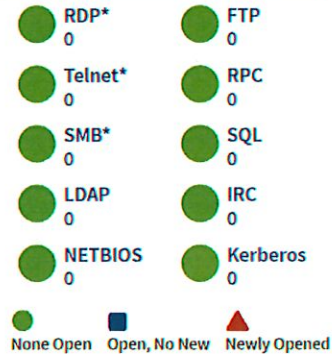


MAX AGE OF ACTIVE CRITICALS



MAX AGE OF ACTIVE HIGHS

## POTENTIALLY RISKY OPEN SERVICES



Service counts are best guesses and may not be 100% accurate. Details can be found in "potentially-risky-services.csv" in Appendix G.

\* Denotes the possibility of a network management interface.

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
FINANCE & AUDIT COMMITTEE AGENDA**

**Wednesday~ February 28, 2024    2:00 p.m.    Teleconference**

**Voting Members:**

Marty Kelsey, Chair  
Craig Rood, Trustee  
Irene Richardson  
Tami Love  
Jan Layne

**Non-Voting Members:**

Ron Cheese                      Terry Thompson  
Angel Bennett                Kari Quickenden  
Ann Clevenger

**Guests:**

Leslie Taylor                      Barbara Sowada                      Carrie Canestorp  
Taylor Jones,  
Commissioner

- |       |  |                  |
|-------|--|------------------|
| I.    | Call Meeting to Order                                    | Marty Kelsey     |
| II.   | Mission Moment   | Irene Richardson |
| III.  | Approve Agenda   | Marty Kelsey     |
| IV.   | <a href="#">Approve January 21, 2024 Meeting Minutes</a> | Marty Kelsey     |
| V.    | <a href="#">Capital Requests FY24</a>                    | Marty Kelsey     |
| VI.   | Financial Report   |                  |
|       | A. Monthly Financial Statements & Statistical Data       |                  |
|       | 1. <a href="#">Narrative</a>                             | Tami Love        |
|       | 2. <a href="#">Financial Information</a>                 | Tami Love        |
|       | 3. <a href="#">Financial Goals</a>                       | Tami Love        |
|       | 4. Self-Pay Report                                       | Ron Cheese       |
|       | 5. <a href="#">Preliminary Bad Debt</a>                  | Ron Cheese       |
| VII.  | Old Business   |                  |
|       | A. Critical Access Update                                | Tami Love        |
|       | B. CLA Project – PIPS Financial Goals                    | Tami Love        |
| VIII. | New Business   |                  |
|       | A. Financial Forum Discussion                            | Marty Kelsey     |
| IX.   | Next Meeting – March 28, 2024                            | Tami Love        |
| X.    | Adjournment  | Marty Kelsey     |

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
Finance & Audit Committee Meeting  
January 31, 2024

Voting Members Present: Mr. Marty Kelsey, *Trustee - Chairman*  
Ms. Irene Richardson, *CEO*  
Ms. Tami Love, *CFO*  
Ms. Jan Layne, *Controller*

Voting Members Absent: Mr. Craig Rood, *Trustee*

Non-Voting Members Present: Mr. Ron Cheese, *Director of Patient Financial Services*  
Ms. Angel Bennett, *Director of Materials*  
Dr. Ann Clevenger, *CNO*  
Dr. Augusto Jamias

Non-Voting Members Absent: Dr. Kari Quickenden, *CCO*  
Mr. Terry Thompson, *Director of IT*

Guests: Dr. Barbara Sowada, *Trustee*  
Mr. Taylor Jones, *County Commissioner*  
Ms. Carrie Canestorp, *Director of HIM*  
Ms. Tracie Soller, *Director of Medical Imaging*  
Ms. Leslie Taylor, *Clinic Director*

**Call Meeting to Order**

Mr. Kelsey called the meeting to order via teleconference at 2:00 PM.

**Approve Agenda**

A motion to approve the agenda was made by Ms. Richardson; second by Ms. Love. Motion carried.

**Approve Meeting Minutes**

A motion to approve the meeting minutes from December 27, 2023 was made by Ms. Love; second by Ms. Layne. Motion carried.

**Capital Requests**

FY24-33 for a DXA Scanner for Medical Imaging was brought before the committee for ratification. This was an emergency purchase as the current machine is no longer working and we had no service for our patients. We do 8-10 of these tests per week and are the only facility in Rock Springs that has this service. It was a budgeted item. We did receive a loyalty discount

on this purchase that brought the price much lower than the second quote. A motion was made to approve to send to the board for ratification by Ms. Love; second by Ms. Richardson. Motion approved.

### **Financial Report**

Ms. Love reviewed the financial information for December. We had an operating gain in December of \$861,029, compared to a budgeted gain of \$508,293. Gross revenue came in at a high of \$23.6 million, over budget by \$1.8 million. Reductions of revenue were 53.7%, over the budget of 52.5%. Accounts Receivable increased in December. Collections were at \$9.7 million, under budget by \$300,000. The annual debt service coverage ratio was 4.79 and days of cash on hand increased to 113.1 due to the receipt of the QRA funds. Net days in AR increased to 54.2. Expenses for December were \$10.1 million, over the budget by \$158,642. The clinic's revenue came in under budget, at \$2.4 million. The Clinic loss for December was \$662,500.

The revenue projection for January is projected to \$24 million. Inpatient volumes remained higher in January. Collections should be around \$10 million. Expenses are expected to be close to budget in January. The estimated gain for January is \$700,000-\$800,000.

Ms. Richardson asked if we will see results from the CLA project helping to reduce the reduction of revenue. Ms. Love said that we should. She also said that every time we think we are getting ahead we have another problem with Cerner that hinders improvement. Last week a requested change made to Medicare A impacted all Medicare claims and now we have \$2 million in claims that are sitting at the clearing house we can't get out the door. We are also having struggles with Medicare Advantage. We are hoping legislation will help put more rules on Medicare Advantage. Mr. Kelsey asked if more people are now on Advantage plans. Mr. Cheese said he recently read that 52% of Medicare patients are on Advantage plans.

### **Financial Goals**

Ms. Love reviewed the financial goals included in the packet. She said we are still working on being able to pull the information to start tracking denials. DNFB saw an increase to 11.5 days in December. We were a little behind on coding due to time away for coding education and the holidays. We are also still struggling with timely documentation from providers.

### **Self-Pay Report**

Mr. Cheese reviewed the self-pay report included in the packet. He said the savings so far are \$2.1 million this year.

### **Preliminary Bad Debt**

The preliminary bad debt, less recovery, is \$1,574,444.30. This will be updated to present at the February Board meeting.

## **Old Business**

### Critical Access

Ms. Love provided a critical access update. We received notice from the State that our application has been accepted. We need to finish our current survey with the Joint Commission before we submit to have another survey for critical access. We will also be surveyed by the State Department of Health. We will then have to do a closing cost report as a PPS hospital.

### PIPS Financial Goals

Reports were provided in the packet with updates on the different projects with CLA.

## **New Business**

### Financial Forum Discussion

There was no new business brought forward for the financial forum discussion this month.

### **Next Meeting**

The next meeting is February 28, 2024 at 2:00 pm.

Meeting adjourned at 2:51pm.

*Submitted by Jan Layne*



## MEMORIAL HOSPITAL OF SWEETWATER COUNTY

### NARRATIVE TO JANUARY 2024 FINANCIAL STATEMENTS

**THE BOTTOM LINE.** The bottom line from operations for January is a gain of \$1,003,721, compared to a gain of \$27,250 in the budget. This yields a 8.75% operating margin for the month compared to 1.08% in the budget. The year-to-date gain is \$3,528,278 compared to a loss of \$510,592 in the budget. The year-to-date operating margin is 4.78%, compared to -.61% in the budget.

Year-to-date, the total net gain is \$3,465,224, compared to a total net gain of \$1,040,510 in the budget. This represents a profit margin of 4.70% compared to 1.60% in the budget.

**REVENUE.** Revenue in January came in very high again at \$24,700,776, up from the prior month and over budget by \$3,533,473. Inpatient revenue is \$5,338,888, over budget by \$897,066 and outpatient revenue is \$19,361,888, over budget by \$2,636,407. Year-to-date, gross revenue remains over budget by \$10,035,992. Gross revenue has increased 18% from the same period last fiscal year, recognizing 5% comes from the annual rate increase. The largest percentage variances for revenue to budget comparison came from the following hospital departments:

Behavioral Health – 111%	Mammography – 29%
Outpatient Services – 45%	Nuclear Medicine – 40%
Obstetrics/Nursery – 53%	CT Scan – 26%
ICU – 26%	Echocardiography – 28%
Radiation Oncology – 71%	Cardiac Rehab – 68%
Medical Oncology – 21%	Physical Therapy – (26%)
Laboratory Services – 21%	Pet Scan – (40%)
Histology – 190%	Respiratory Therapy – (33%)
Blood Bank – 51%	

**REDUCTION OF REVENUE.** Deductions from revenue are estimated at 53.7% for the month, higher due to the increase in total AR and Medicare, and over the 52.5% budget. Year-to-date reductions of revenue are 52.8%. Total AR increased from December, up by about \$4.5 million:

<i>Medicare – increase \$3.3 million</i>	<i>Government – decrease \$390,000</i>
<i>Medicaid - increase \$370,000</i>	<i>Self Pay – increase \$300,000</i>
<i>Blue Cross - increase \$600,000</i>	<i>Worker's Comp – increase \$70,000</i>
<i>Commercial - increase \$100,000</i>	

Accounts receivable were most impacted by the high revenue month. With most of the increase coming from Medicare, the estimated reserves for January were also affected. Lower collections in January also kept AR higher than anticipated. Total collections for the month came in at \$9.5 million, under budget by \$1,200,000. We remain about 6%



below budget year to date. Budgeted cash collections are calculated as 47.5% of the average gross revenue of the two prior months.

**NET OPERATING REVENUE.** Total net operating revenue was \$11,476,852 in January and \$73,782,347 year-to-date. Other operating revenue in January includes occupational medicine revenue, county maintenance funds and cafeteria revenue.

**RATIOS.** Annual Debt Service Coverage came in at 5.10. Days of Cash on Hand decreased by 2 days to 110.9 days due to lower cash collections and higher expenses increasing the daily cash expense. Daily cash expenses increased to \$300,500 year-to-date. Net days in AR increased to 55.58 days.

**VOLUME.** Inpatient admissions, discharges and patient days for January came in over budget. The average daily census (ADC) increased to 17.7, over budget, and average length of stay (LOS) came in at 3.1 slightly under budget. Births, Surgeries, Emergency Room visits, Outpatient visits, and Clinic visits came in over budget.

**EXPENSES.** Total expenses came in higher in January at \$10,473,131, over budget by \$292,346. Total expenses have increased by 5% from the same period last fiscal year but remain under budget by \$488,653 year-to-date. The following line items were over budget in January:

**Benefits** – Group health and FICA taxes came in over budget for January. Group health, disability, and other employee benefits are over budget year-to-date.

**Contract Labor** – There was unbudgeted contract labor expense in Medical Floor and Radiology. Emergency department contract expenses are over budget.

**Other Physician Fees** – Locum physician expenses were over budget for pediatrics, urology, and obstetrics as we continue to recruit for these positions.

**Purchased Services** – Expenses over budget for the month include sponsorships, legal fees, collection agency, management fees, behavior health transportation, surgical services, send out lab tests, and other professional services.

**Supplies** – Expenses over budget for January include lab supplies, instruments, patient chargeables, implants, medical supplies, contrast, minor equipment, food, and office supplies. Total supply expense under budget year-to-date by \$48,397.

**Repairs and Maintenance** – Facility maintenance & repair and BioMed repairs were both over budget in January. County maintenance fund request for January was \$100,432.

**Insurance** – Professional liability insurance came in over budget due to changes in how locum tenens physicians are calculated. This expense will continue to be over budget for the fiscal year.



**PROVIDER CLINICS.** Revenue for the Clinics came in at \$3,067,826, over budget by \$220,084, and the highest revenue month in history. The bottom line for the Clinics in January is a loss of \$129,778 compared to a loss of \$354,084 in the budget. The year-to-date loss for the Clinics is \$2,622,615, compared to a loss of \$2,476,048 in the budget. Clinic volumes were up in January, at 7,288 visits. Total Clinic expenses for the month are \$2,072,203, over budget by \$82,790. Year-to-date expenses are over budget by \$47,686. Fringe benefits, physician fees, and depreciation are over budget for January.

**OUTLOOK FOR FEBRUARY.** Gross patient revenue for February is projected to be close to \$22 million, over the budget of \$18.4 million. Inpatient admissions have remained high during the month and are projecting over budget. LOS is currently at 3.1 days and average daily census is currently at 15.5. Births, ER visits, Surgeries, Clinic visits and most Outpatient departments are currently projecting over budget.

Collections are projected to be \$9 million, under budget. Deductions of revenue are expected to be stable with continued high revenue month and collections. Expenses are expected to be close to the budget in February. If the projection for revenue remains high and expenses come in at budget, the estimated bottom line for February is breakeven.

**Critical Access.** We have been notified by the Wyoming Department of Health of their readiness to issue our Critical Access license. We are working through some final items in preparation for the surveys, including policies and bed counts and will then accept the new license. Once the license is issued, we will be surveyed by both the State licensing division and Joint Commission. We will need to finalize our December Joint Commission survey before submitting for the CAH survey. We continue to meet with the consultant, our auditors, and cost report preparer as we work through the process.

**Financial PIPS.** Our revenue cycle team meets weekly with Clifton Larsen Allen on the revenue cycle paired advisory support project. The most recent executive summary of the engagement actions and plans are included in the packet. The work of these groups will be reported monthly, through this committee, as part of the Financial PIPS priorities for FY2024.

For the fiscal year 2024, we have chosen to continue to focus on two main financial metrics: Days Cash on Hand and Days in Accounts Receivable. In addition to these main goals, we have set additional goals for corresponding financial metrics impacting the revenue cycle:

- DNFB Days – Discharged Not Final Billed Days
- Total Accounts Receivable aging
- Days in AR by Payer
- Denials
- Cash Collections



**MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
ROCK SPRINGS, WY**

**Unaudited Financial Statements**

**for**

**Seven months ended January 31, 2024**

**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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ROCK SPRINGS, WY**

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**Seven months ended January 31, 2024**

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# MEMORIAL HOSPITAL OF SWEETWATER COUNTY

## EXECUTIVE FINANCIAL SUMMARY

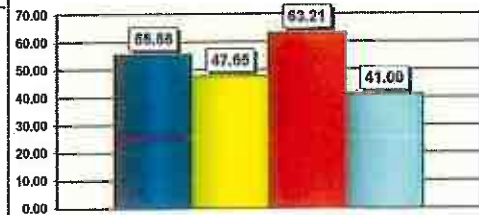
Seven months ended January 31, 2024

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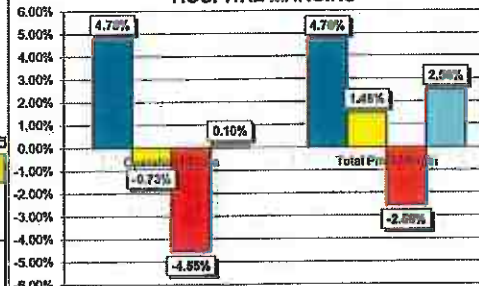
### BALANCE SHEET

	YTD 1/31/2024	Prior FYE 6/30/2023
<b>ASSETS</b>		
Current Assets	\$43,738,665	\$38,972,749
Assets Whose Use is Limited	19,503,344	19,968,483
Property, Plant & Equipment (Net)	76,295,719	79,366,421
Other Assets	927,995	930,753
<b>Total Unrestricted Assets</b>	<b>140,465,723</b>	<b>139,238,406</b>
Restricted Assets	476,628	469,827
<b>Total Assets</b>	<b>\$140,942,351</b>	<b>\$139,708,233</b>
<b>LIABILITIES AND NET ASSETS</b>		
Current Liabilities	\$16,766,514	\$17,193,366
Long-Term Debt	24,195,757	25,114,116
Other Long-Term Liabilities	12,023,331	12,916,028
<b>Total Liabilities</b>	<b>52,985,602</b>	<b>55,223,510</b>
Net Assets	87,956,749	84,484,723
<b>Total Liabilities and Net Assets</b>	<b>\$140,942,351</b>	<b>\$139,708,233</b>

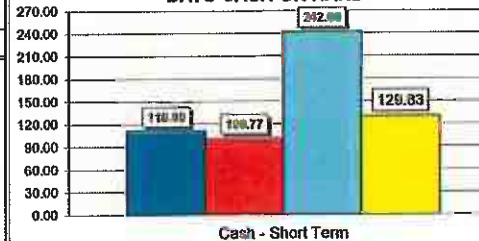
### NET DAYS IN ACCOUNTS RECEIVABLE



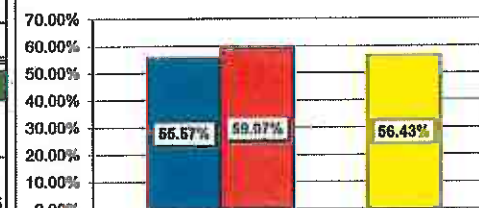
### HOSPITAL MARGINS



### DAYS CASH ON HAND



### SALARY AND BENEFITS AS A PERCENTAGE OF TOTAL EXPENSES



### KEY STATISTICS AND RATIOS

	01/31/24 ACTUAL	01/31/24 BUDGET	YTD ACTUAL	YTD BUDGET
Total Acute Patient Days	548	467	2,907	2,943
Average Acute Length of Stay	3.1	4.0	3.1	3.6
Total Emergency Room Visits	1,515	1,228	9,585	9,093
Outpatient Visits	9,569	8,188	58,210	52,714
Total Surgeries	187	180	1,225	1,087
Total Worked FTE's	481.90	491.43	458.13	491.43
Total Paid FTE's	519.96	540.03	510.35	540.03
Net Revenue Change from Prior Yr	17.63%	4.62%	14.08%	8.59%
EBIDA - 12 Month Rolling Average			8.35%	8.06%
Current Ratio			2.61	
Days Expense in Accounts Payable			42.49	

MEMORIAL HOSPITAL OF SWEETWATER COUNTY	
Budget	01/31/24
Prior Fiscal Year End	06/30/23
CLA \$50-\$100M Net Revenue	6/30/2020

<b>FINANCIAL STRENGTH INDEX - 0.50</b>	
Excellent - Greater than 3.0	Good - 3.0 to 0.0
Fair - 0.0 to (2.0)	Poor - Less than (2.0)

## Key Financial Ratios

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY**  
**ROCK SPRINGS, WY**

**PAGE 3**

**Seven months ended January 31, 2024**



- DESIRED POSITION IN RELATION TO BENCHMARKS AND BUDGET

		Year to Date 1/31/2024	Budget 6/30/2023	Prior Fiscal Year End 06/30/23	CLA \$50-\$100 MM Net Revenue (See Note 1)
<b>Profitability:</b>					
Operating Margin	↑	4.78%	0.24%	-4.55%	0.10%
Total Profit Margin	↑	4.70%	0.31%	-2.56%	2.50%
<b>Liquidity:</b>					
Days Cash, All Sources **	↑	110.90	129.83	100.77	242.00
Net Days in Accounts Receivable	↓	55.58	45.02	63.21	41.00
<b>Capital Structure:</b>					
Average Age of Plant (Annualized)	↓	11.88	11.32	13.79	12.00
Long Term Debt to Capitalization	↓	22.05%	19.87%	23.77%	27.00%
Debt Service Coverage Ratio **	↑	5.10	2.42	2.41	2.80
<b>Productivity and Efficiency:</b>					
Paid FTE's per Adjusted Occupied Bed	↓	6.89	8.43	7.36	NA
Salary Expense per Paid FTE		\$102,632	\$86,892	\$103,824	NA
Salary and Benefits as a % of Total Operating Exp		55.57%	56.43%	59.07%	NA

**Note 1 - 2020 CLA Benchmark-\$50M-\$100M net patient service revenue**

**\*\*Bond Covenant ratio is 65 Days Cash on Hand and 1.0-1.25 Debt Service Coverage**



# Balance Sheet - Assets

## MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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### ROCK SPRINGS, WY

Seven months ended January 31, 2024

	Current Month 1/31/2024	Prior Month 12/31/2023	ASSETS Positive/ (Negative) Variance	Percentage Variance	Prior Year End 6/30/2023
<b>Current Assets</b>					
Cash and Cash Equivalents	\$14,785,995	\$15,254,786	(\$468,791)	-3.07%	\$10,941,766
Gross Patient Accounts Receivable	45,579,764	41,078,941	4,500,823	10.96%	36,590,061
Less: Bad Debt and Allowance Reserves	(25,937,859)	(22,584,092)	(3,353,767)	-14.85%	(20,161,785)
Net Patient Accounts Receivable	19,641,905	18,494,849	1,147,056	6.20%	16,428,276
Interest Receivable	0	0	0	0.00%	0
Other Receivables	3,473,510	2,908,209	565,302	19.44%	5,920,310
Inventories	3,935,506	3,933,921	1,585	0.04%	3,831,105
Prepaid Expenses	1,901,749	1,926,183	(24,434)	-1.27%	1,851,292
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
<b>Total Current Assets</b>	<b>43,738,665</b>	<b>42,517,947</b>	<b>1,220,718</b>	<b>2.87%</b>	<b>38,972,749</b>
<b>Assets Whose Use is Limited</b>					
Cash	91,259	89,686	1,573	1.75%	84,123
Investments	0	0	0	0.00%	0
Bond Reserve/Debt Retirement Fund	0	0	0	0.00%	0
Trustee Held Funds - Project	960,798	783,435	177,363	22.64%	1,515,814
Trustee Held Funds - SPT	0	0	0	0.00%	0
Board Designated Funds	4,426,410	4,418,028	8,382	0.19%	4,343,674
Other Limited Use Assets	14,024,877	14,024,876	1	0.00%	14,024,873
<b>Total Limited Use Assets</b>	<b>19,503,344</b>	<b>19,316,025</b>	<b>187,319</b>	<b>0.97%</b>	<b>19,968,483</b>
<b>Property, Plant, and Equipment</b>					
Land and Land Improvements	4,583,118	4,242,294	340,824	8.03%	4,242,294
Building and Building Improvements	51,086,741	50,936,649	150,092	0.29%	49,931,920
Equipment	137,490,727	137,260,071	230,656	0.17%	135,715,602
Construction In Progress	1,098,110	1,468,199	(370,089)	-25.21%	1,531,105
Capitalized Interest	0	0	0	0.00%	0
Gross Property, Plant, and Equipment	194,258,697	193,907,214	351,483	0.18%	191,420,921
Less: Accumulated Depreciation	(117,962,978)	(117,082,716)	(880,262)	-0.75%	(112,054,500)
<b>Net Property, Plant, and Equipment</b>	<b>76,295,719</b>	<b>76,824,498</b>	<b>(528,780)</b>	<b>-0.69%</b>	<b>79,366,421</b>
<b>Other Assets</b>					
Unamortized Loan Costs	927,995	933,982	(5,987)	-0.64%	930,753
Other	0	0	0	0.00%	0
<b>Total Other Assets</b>	<b>927,995</b>	<b>933,982</b>	<b>(5,987)</b>	<b>-0.64%</b>	<b>930,753</b>
<b>TOTAL UNRESTRICTED ASSETS</b>	<b>140,465,723</b>	<b>139,592,453</b>	<b>873,270</b>	<b>0.63%</b>	<b>139,238,406</b>
<b>Restricted Assets</b>	<b>476,628</b>	<b>472,878</b>	<b>3,750</b>	<b>0.79%</b>	<b>469,827</b>
<b>TOTAL ASSETS</b>	<b>\$140,942,351</b>	<b>\$140,065,330</b>	<b>\$877,020</b>	<b>0.63%</b>	<b>\$139,708,233</b>

# Balance Sheet - Liabilities and Net Assets

## MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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### ROCK SPRINGS, WY

Seven months ended January 31, 2024

	LIABILITIES AND FUND BALANCE				Prior Year End 6/30/2023
	Current Month 1/31/2024	Prior Month 12/31/2023	Positive/ (Negative) Variance	Percentage Variance	
<b>Current Liabilities</b>					
Accounts Payable	\$7,222,502	\$7,423,151	\$200,648	2.70%	\$7,322,373
Notes and Loans Payable	0	0	0	0.00%	0
Accrued Payroll	2,589,578	2,365,988	(223,590)	-9.45%	2,077,791
Accrued Payroll Taxes	0	0	0	0.00%	0
Accrued Benefits	2,757,452	2,683,404	(74,048)	-2.76%	3,014,608
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	3,295,462	3,295,462	0	0.00%	3,295,462
Other Current Liabilities	901,519	727,193	(174,326)	-23.97%	1,483,132
<b>Total Current Liabilities</b>	<b>16,766,514</b>	<b>16,495,198</b>	<b>(271,316)</b>	<b>-1.64%</b>	<b>17,193,366</b>
<b>Long Term Debt</b>					
Bonds/Mortgages Payable	27,491,220	27,627,053	135,833	0.49%	28,409,579
Leases Payable	0	0	0	0.00%	0
Less: Current Portion Of Long Term Debt	3,295,462	3,295,462	0	0.00%	3,295,462
<b>Total Long Term Debt (Net of Current)</b>	<b>24,195,757</b>	<b>24,331,591</b>	<b>135,833</b>	<b>0.56%</b>	<b>25,114,116</b>
<b>Other Long Term Liabilities</b>					
Deferred Revenue	0	0	0	0.00%	0
Accrued Pension Expense (Net of Current)	0	0	0	0.00%	0
Other	12,023,331	12,302,645	279,314	2.27%	12,916,028
<b>Total Other Long Term Liabilities</b>	<b>12,023,331</b>	<b>12,302,645</b>	<b>279,314</b>	<b>2.27%</b>	<b>12,916,028</b>
<b>TOTAL LIABILITIES</b>	<b>52,985,602</b>	<b>53,129,434</b>	<b>143,832</b>	<b>0.27%</b>	<b>55,223,510</b>
<b>Net Assets:</b>					
Unrestricted Fund Balance	82,059,650	82,059,650	0	0.00%	84,787,454
Temporarily Restricted Fund Balance	1,959,119	1,959,119	0	0.00%	1,959,119
Restricted Fund Balance	472,755	469,005	(3,750)	-0.80%	465,954
Net Revenue/(Expenses)	3,465,224	2,448,123	N/A	N/A	(2,727,804)
<b>TOTAL NET ASSETS</b>	<b>87,956,749</b>	<b>86,935,897</b>	<b>(1,020,852)</b>	<b>-1.17%</b>	<b>84,484,723</b>
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<b>\$140,942,351</b>	<b>\$140,065,330</b>	<b>(\$877,020)</b>	<b>-0.63%</b>	<b>\$139,708,233</b>

# Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Seven months ended January 31, 2024

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	CURRENT MONTH				Prior Year 01/31/23
	Actual 01/31/24	Budget 01/31/24	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Inpatient Revenue	\$5,004,383	\$4,107,343	\$897,040	21.84%	\$3,973,549
Outpatient Revenue	16,628,567	14,212,218	2,416,349	17.00%	13,732,106
Clinic Revenue	3,067,826	2,847,742	220,084	7.73%	2,443,375
Specialty Clinic Revenue	0	0	0	0.00%	0
Total Gross Patient Revenue	24,700,776	21,167,303	3,533,473	16.69%	20,149,031
Deductions From Revenue					
Discounts and Allowances	(12,184,470)	(9,504,756)	(2,679,714)	-28.19%	(8,989,064)
Bad Debt Expense (Governmental Providers Only)	(1,320,206)	(1,394,165)	73,959	5.30%	(1,546,276)
Medical Assistance	(5,763)	(214,487)	208,724	97.31%	4,178
Total Deductions From Revenue	(13,510,439)	(11,113,408)	(2,397,031)	-21.57%	(10,531,162)
Net Patient Revenue	11,190,337	10,053,895	1,136,442	11.30%	9,617,869
Other Operating Revenue	286,515	154,140	132,374	85.88%	139,146
Total Operating Revenue	11,476,852	10,208,035	1,268,817	12.43%	9,757,014
Operating Expenses					
Salaries and Wages	4,262,641	4,341,045	78,404	1.81%	3,898,131
Fringe Benefits	1,307,203	1,213,134	(94,069)	-7.75%	1,138,657
Contract Labor	306,448	292,952	(13,496)	-4.61%	383,999
Physicians Fees	322,799	231,326	(91,472)	-39.54%	255,802
Purchased Services	688,536	634,715	(53,821)	-8.48%	512,049
Drug Expense	844,768	905,859	61,092	6.74%	854,270
Supply Expense	997,801	795,950	(201,851)	-25.36%	960,108
Utilities	128,505	131,250	2,745	2.09%	139,663
Repairs and Maintenance	460,691	416,656	(44,035)	-10.57%	412,868
Insurance Expense	70,566	65,684	(4,881)	-7.43%	64,081
All Other Operating Expenses	182,091	255,622	73,531	28.77%	213,795
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	20,820	17,723	(3,097)	-17.47%	29,248
Depreciation and Amortization	880,262	878,869	(1,394)	-0.16%	854,529
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	10,473,131	10,180,785	(292,346)	-2.87%	9,717,199
Net Operating Surplus/(Loss)	1,003,721	27,250	976,471	3583.35%	39,815
Non-Operating Revenue:					
Contributions	0	0	0	0.00%	0
Investment Income	54,241	19,357	34,884	180.22%	28,271
Tax Subsidies (Except for GO Bond Subsidies)	0	0	0	0.00%	41
Tax Subsidies for GO Bonds	0	0	0	0.00%	0
Interest Expense (Governmental Providers Only)	(66,478)	(80,742)	(24,264)	30.05%	(93,180)
Other Non-Operating Revenue/(Expenses)	15,618	84,012	(68,393)	-81.41%	26,472
Total Non Operating Revenue/(Expense)	13,381	22,626	(9,245)	-40.86%	(28,397)
Total Net Surplus/(Loss)	\$1,017,102	\$49,876	\$967,226	1939.25%	\$11,418
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease in Unrestricted Net Assets	\$1,017,102	\$49,876	\$967,226	1939.25%	\$11,418
Operating Margin	8.75%	0.27%			0.41%
Total Profit Margin	8.86%	0.49%			0.12%
EBIDA	16.42%	8.88%			9.17%

# Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Seven months ended January 31, 2024

	YEAR-TO-DATE				
	Actual 01/31/24	Budget 01/31/24	Positive (Negative) Variance	Percentage Variance	Prior Year 01/31/23
Gross Patient Revenue					
Inpatient Revenue	\$28,344,198	\$28,759,651	(\$415,453)	-1.44%	\$27,211,786
Outpatient Revenue	108,665,719	98,068,168	10,597,552	10.81%	89,013,768
Clinic Revenue	18,290,857	18,436,964	(146,107)	-0.79%	15,893,657
Specialty Clinic Revenue	0	0	0	0.00%	0
Total Gross Patient Revenue	155,300,774	145,264,782	10,035,992	6.91%	132,119,211
Deductions From Revenue					
Discounts and Allowances	(72,200,368)	(65,373,193)	(6,827,175)	-10.44%	(60,967,373)
Bad Debt Expense (Governmental Providers Only)	(9,582,632)	(9,442,707)	(139,924)	-1.48%	(6,550,913)
Medical Assistance	(770,374)	(1,452,724)	682,350	46.97%	(1,139,229)
Total Deductions From Revenue	(82,553,374)	(76,268,624)	(6,284,749)	-8.24%	(68,657,509)
Net Patient Revenue	72,747,400	68,996,158	3,751,243	5.44%	63,461,701
Other Operating Revenue	1,034,946	1,235,972	(201,026)	-16.26%	1,216,720
Total Operating Revenue	73,782,347	70,232,130	3,550,217	5.05%	64,678,421
Operating Expenses					
Salaries and Wages	28,458,121	28,816,884	358,763	1.24%	26,679,124
Fringe Benefits	8,186,873	8,204,164	17,291	0.21%	7,772,585
Contract Labor	2,394,678	2,333,664	(61,014)	-2.61%	3,370,543
Physicians Fees	2,076,728	2,179,184	102,456	4.70%	1,954,286
Purchased Services	4,392,293	4,179,919	(212,374)	-5.08%	3,814,209
Drug Expense	6,805,852	7,241,807	435,955	6.02%	6,018,836
Supply Expense	5,789,923	5,402,366	(387,558)	-7.17%	5,199,739
Utilities	829,139	806,397	(22,742)	-2.82%	779,325
Repairs and Maintenance	2,821,790	2,963,808	142,016	4.79%	3,118,270
Insurance Expense	480,945	447,032	(33,913)	-7.59%	445,964
All Other Operating Expenses	1,727,009	1,817,449	90,440	4.98%	1,663,903
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	223,353	177,084	(46,270)	-26.13%	186,423
Depreciation and Amortization	6,067,363	6,172,966	105,602	1.71%	6,026,172
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	70,254,068	70,742,722	488,654	0.69%	67,029,378
Net Operating Surplus/(Loss)	3,528,279	(510,592)	4,038,871	-791.02%	(2,350,957)
Non-Operating Revenue:					
Contributions	0	0	0	0.00%	0
Investment Income	245,916	135,496	110,421	81.49%	133,828
Tax Subsidies (Except for GO Bond Subsidies)	0	0	0	0.00%	11,945
Tax Subsidies for GO Bonds	0	0	0	0.00%	0
Interest Expense (Governmental Providers Only)	(428,412)	(583,955)	155,543	-26.64%	(629,204)
Other Non-Operating Revenue/(Expense)	119,441	1,999,561	(1,880,120)	-94.03%	316,708
Total Non Operating Revenue/(Expense)	(63,065)	1,551,102	(1,614,157)	-104.07%	(166,724)
Total Net Surplus/(Loss)	\$3,465,224	\$1,040,510	\$2,424,714	233.03%	(\$2,517,681)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease) in Unrestricted Net Assets	\$3,465,224	\$1,040,510	\$2,424,714	233.03%	(\$2,517,681)
Operating Margin	4.78%	-0.73%			-3.63%
Total Profit Margin	4.70%	1.48%			-3.89%
EBIDA	13.01%	8.06%			5.70%



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

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	Actual 1/31/2024	Actual 12/31/2023	Actual 11/30/2023	Actual 10/31/2023	Actual 9/30/2023	Actual 8/31/2023
<b>Gross Patient Revenue</b>						
Inpatient Revenue	\$5,004,383	\$4,119,968	\$3,552,335	\$3,746,654	\$4,938,243	\$3,931,335
Inpatient Psych/Rehab Revenue						
Outpatient Revenue	\$18,628,567	\$17,109,573	\$15,816,757	\$14,463,990	\$14,487,978	\$15,726,763
Clinic Revenue	\$3,067,826	\$2,429,711	\$2,567,917	\$2,888,662	\$2,531,474	\$2,624,096
Specialty Clinic Revenue	\$0	\$0	\$0	\$0	\$0	\$0
<b>Total Gross Patient Revenue</b>	<b>\$24,700,776</b>	<b>\$23,659,252</b>	<b>\$21,937,009</b>	<b>\$20,879,205</b>	<b>\$21,057,695</b>	<b>\$22,282,184</b>
<b>Deductions From Revenue</b>						
Discounts and Allowances	\$12,184,470	\$11,030,342	\$10,060,276	\$9,186,702	\$9,424,162	\$10,876,186
Bad Debt Expense (Governmental Providers Only)	\$1,320,206	\$1,300,315	\$1,134,520	\$1,410,631	\$1,400,918	\$1,282,727
Charity Care	\$5,783	\$311,923	\$73,754	\$188,565	(\$1,270)	\$90,013
<b>Total Deductions From Revenue</b>	<b>13,510,438</b>	<b>12,702,579</b>	<b>11,268,550</b>	<b>10,785,897</b>	<b>10,882,911</b>	<b>12,218,926</b>
<b>Net Patient Revenue</b>	<b>\$11,190,337</b>	<b>\$10,956,673</b>	<b>\$10,368,459</b>	<b>\$10,113,308</b>	<b>\$10,174,785</b>	<b>\$10,063,258</b>
<b>Other Operating Revenue</b>	<b>286,515</b>	<b>71,274</b>	<b>\$1,333</b>	<b>118,681</b>	<b>76,424</b>	<b>281,510</b>
<b>Total Operating Revenue</b>	<b>11,476,852</b>	<b>11,027,947</b>	<b>10,469,793</b>	<b>10,231,889</b>	<b>10,251,208</b>	<b>10,344,868</b>
<b>Operating Expenses</b>						
Salaries and Wages	\$4,282,841	\$4,134,172	\$4,106,842	\$4,180,542	\$3,826,537	\$3,963,441
Fringe Benefits	\$1,307,203	\$1,293,653	\$1,186,780	\$1,280,515	\$1,004,543	\$1,054,117
Contract Labor	\$306,448	\$327,326	\$420,165	\$322,974	\$285,363	\$410,651
Physicians Fees	\$322,799	\$264,825	\$303,047	\$282,515	\$252,623	\$271,892
Purchased Services	\$688,536	\$681,342	\$582,899	\$679,295	\$620,426	\$586,786
Drug Expense	\$844,768	\$864,876	\$1,056,487	\$987,515	\$1,057,312	\$974,764
Supply Expense	\$997,801	\$911,134	\$789,388	\$867,552	\$764,805	\$838,743
Utilities	\$126,505	\$139,792	\$126,552	\$112,585	\$109,851	\$106,628
Repairs and Maintenance	\$460,891	\$356,186	\$421,619	\$374,630	\$416,782	\$405,279
Insurance Expense	\$70,566	\$70,566	\$70,566	\$67,728	\$67,728	\$67,728
All Other Operating Expenses	\$182,091	\$238,412	\$186,495	\$298,563	\$316,879	\$244,956
Bad Debt Expense (Non-Governmental Providers)						
Leases and Rentals	\$20,820	\$17,677	\$17,833	\$44,102	\$39,636	\$40,578
Depreciation and Amortization	\$880,282	\$867,058	\$841,307	\$868,707	\$862,144	\$870,730
Interest Expense (Non-Governmental Providers)						
<b>Total Operating Expenses</b>	<b>\$10,473,131</b>	<b>\$10,166,918</b>	<b>\$10,088,970</b>	<b>\$10,345,220</b>	<b>\$9,623,627</b>	<b>\$9,839,321</b>
<b>Net Operating Surplus/(Loss)</b>	<b>\$1,003,721</b>	<b>\$861,029</b>	<b>\$370,822</b>	<b>(\$113,331)</b>	<b>\$627,582</b>	<b>\$505,547</b>
<b>Non-Operating Revenue:</b>						
Contributions						
Investment Income	\$4,241	\$3,953	\$5,927	\$6,367	\$3,135	\$5,470
Tax Subsidies (Except for GO Bond Subsidies)						
Tax Subsidies for GO Bonds	0	0	0	0	0	0
Interest Expense (Governmental Providers Only)	(\$6,478)	(\$3,173)	(\$8,393)	(\$8,684)	(\$9,321)	(\$3,939)
Other Non-Operating Revenue/(Expenses)	\$5,016	\$5,618	\$10,543	\$3,222	\$19,095	\$16,549
<b>Total Non Operating Revenue/(Expense)</b>	<b>\$13,381</b>	<b>(\$23,682)</b>	<b>(\$22,412)</b>	<b>\$3,024</b>	<b>(\$7,091)</b>	<b>\$11,089</b>
<b>Total Net Surplus/(Loss)</b>	<b>\$1,017,102</b>	<b>\$837,427</b>	<b>\$348,411</b>	<b>(\$110,307)</b>	<b>\$620,491</b>	<b>\$516,636</b>
<b>Change in Unrealized Gains/(Losses) on Investment</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Increase/(Decrease in Unrestricted Net Assets)</b>	<b>\$1,017,102</b>	<b>\$837,427</b>	<b>\$348,411</b>	<b>(\$110,307)</b>	<b>\$620,491</b>	<b>\$516,636</b>
<b>Operating Margin</b>	<b>8.75%</b>	<b>7.81%</b>	<b>3.55%</b>	<b>-1.11%</b>	<b>6.12%</b>	<b>4.89%</b>
<b>Total Profit Margin</b>	<b>8.86%</b>	<b>7.59%</b>	<b>3.33%</b>	<b>-1.08%</b>	<b>6.05%</b>	<b>4.99%</b>
<b>EBIDA</b>	<b>16.42%</b>	<b>15.67%</b>	<b>11.58%</b>	<b>7.36%</b>	<b>14.53%</b>	<b>13.30%</b>

Actual 7/31/2023	Actual 6/30/2023	Actual 5/31/2023	Actual 4/30/2023	Actual 3/31/2023	Actual 2/28/2023
\$3,951,380	\$3,536,764	\$4,358,327	\$2,991,123	\$4,216,653	\$3,485,436
\$14,732,101	\$14,165,133	\$13,726,852	\$13,141,671	\$14,677,971	\$11,663,453
\$2,401,171	\$2,370,337	\$2,429,167	\$2,139,802	\$2,519,030	\$2,025,043
\$0	\$0	\$0	\$0	\$0	\$0
\$21,084,652	\$20,072,234	\$20,514,346	\$18,272,396	\$21,413,654	\$17,173,931
\$9,458,230	\$9,010,157	\$9,644,283	\$8,523,654	\$10,285,189	\$8,000,115
\$1,644,215	\$1,422,556	\$1,426,492	\$1,077,723	\$1,358,895	\$1,009,559
\$101,628	\$531,325	\$138,943	\$101,840	\$548,297	\$105,022
11,204,072	10,984,039	11,209,718	9,702,917	12,192,391	9,114,695
\$9,880,580	\$9,088,195	\$9,304,628	\$8,569,479	\$9,221,274	\$8,059,235
102,219	100,075	107,599	144,855	282,498	144,273
9,989,789	8,188,271	9,412,227	8,714,334	9,503,742	8,203,508
\$3,983,946	\$3,871,776	\$3,950,361	\$3,888,530	\$3,906,184	\$3,804,999
\$1,080,181	\$1,208,615	\$1,435,397	\$1,389,964	\$1,134,999	\$1,083,678
\$321,761	\$477,181	\$447,220	\$454,168	\$547,722	\$412,714
\$379,227	\$312,753	\$302,718	\$283,149	\$263,670	\$301,283
\$553,011	\$602,444	\$545,825	\$519,259	\$550,837	\$518,213
\$1,020,181	\$1,318,367	\$808,470	\$827,453	\$1,124,257	\$831,530
\$640,500	\$881,133	\$642,063	\$637,278	\$813,502	\$687,626
\$103,225	\$96,330	\$101,596	\$101,324	\$132,036	\$129,351
\$387,603	\$191,167	\$305,197	\$471,430	\$389,765	\$404,388
\$86,071	\$96,244	\$67,790	\$63,281	\$64,245	\$64,245
\$258,612	\$197,353	\$262,044	\$183,485	\$263,420	\$230,705
\$42,507	\$50,618	\$33,506	\$37,330	\$13,433	\$18,048
\$879,156	\$983,897	\$882,532	\$824,151	\$844,640	\$861,503
\$9,716,881	\$10,257,979	\$9,785,689	\$9,760,801	\$10,050,710	\$9,343,282
\$272,909	(\$1,069,708)	(\$373,382)	(\$1,846,468)	(\$548,988)	(\$1,138,774)
31,795	243,819	34,230	27,547	38,410	18,900
0	110	(579)	214	33	10
(88,534)	(113,407)	(84,131)	(82,122)	(89,788)	(82,309)
21,186	401,927	728,019	668,576	284,277	6,976
(\$35,543)	\$632,449	\$677,545	\$514,215	\$232,932	(\$58,422)
\$237,365	(\$537,269)	\$304,183	(\$632,253)	(\$314,037)	(\$1,195,195)
0	(158,659)	0	0	0	0
\$237,365	(\$695,918)	\$304,183	(\$632,253)	(\$314,037)	(\$1,195,195)
2.73%	-11.64%	-3.97%	-12.01%	-5.76%	-13.89%
2.38%	-5.85%	3.23%	-6.11%	-3.30%	-14.57%
11.53%	-0.93%	5.41%	-1.40%	3.13%	-3.39%



## Statement of Cash Flows

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
ROCK SPRINGS, WY

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Seven months ended January 31, 2024

	CASH FLOW	
	Current Month 1/31/2024	Current Year-To-Date 1/31/2024
<b>CASH FLOWS FROM OPERATING ACTIVITIES:</b>		
Net Income (Loss)	\$1,017,102	\$3,465,224
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities:		
Depreciation	880,262	6,067,363
(Increase)/Decrease in Net Patient Accounts Receivable	(1,147,056)	(3,213,629)
(Increase)/Decrease in Other Receivables	(565,302)	2,446,800
(Increase)/Decrease in Inventories	(1,585)	(104,401)
(Increase)/Decrease in Pre-Paid Expenses	24,434	(50,457)
(Increase)/Decrease in Other Current Assets	0	0
Increase/(Decrease) in Accounts Payable	(200,648)	(99,870)
Increase/(Decrease) in Notes and Loans Payable	0	0
Increase/(Decrease) in Accrued Payroll and Benefits	297,638	254,631
Increase/(Decrease) in Accrued Expenses	0	0
Increase/(Decrease) in Patient Refunds Payable	0	0
Increase/(Decrease) in Third Party Advances/Liabilities	0	0
Increase/(Decrease) in Other Current Liabilities	174,326	(581,613)
<b>Net Cash Provided by Operating Activities:</b>	<b>479,171</b>	<b>8,184,049</b>
<b>CASH FLOWS FROM INVESTING ACTIVITIES:</b>		
Purchase of Property, Plant and Equipment	(351,483)	(2,996,661)
(Increase)/Decrease in Limited Use Cash and Investments	(185,746)	472,276
(Increase)/Decrease in Other Limited Use Assets	(1,573)	(7,137)
(Increase)/Decrease in Other Assets	5,987	2,758
<b>Net Cash Used by Investing Activities</b>	<b>(532,815)</b>	<b>(2,528,764)</b>
<b>CASH FLOWS FROM FINANCING ACTIVITIES:</b>		
Increase/(Decrease) in Bond/Mortgage Debt	(135,833)	(918,359)
Increase/(Decrease) in Capital Lease Debt	0	0
Increase/(Decrease) in Other Long Term Liabilities	(279,314)	(892,697)
<b>Net Cash Used for Financing Activities</b>	<b>(415,147)</b>	<b>(1,811,056)</b>
<b>(INCREASE)/DECREASE IN RESTRICTED ASSETS</b>	<b>(0)</b>	<b>(0)</b>
<b>Net Increase/(Decrease) in Cash</b>	<b>(468,791)</b>	<b>3,844,229</b>
Cash, Beginning of Period	15,254,786	10,941,766
<b>Cash, End of Period</b>	<b>\$14,785,995</b>	<b>\$14,785,995</b>

# Patient Statistics

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY**  
**ROCK SPRINGS, WY**  
**Seven months ended January 31, 2024**

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Current Month				STATISTICS	Year-To-Date			
Actual 01/31/24	Budget 01/31/24	Positive/ (Negative) Variance	Prior Year 01/31/23		Actual 01/31/24	Budget 01/31/24	Positive/ (Negative) Variance	Prior Year 01/31/23
				<b>Discharges</b>				
174	116	58	112	Acute	933	829	104	854
174	116	58	112	Total Adult Discharges	933	829	104	854
44	27	17	27	Newborn	261	235	26	229
218	143	75	139	Total Discharges	1,194	1,064	130	1,083
				<b>Patient Days:</b>				
548	467	81	395	Acute	2,907	2,943	(36)	3,228
548	467	81	395	Total Adult Patient Days	2,907	2,943	(36)	3,228
61	43	18	42	Newborn	427	395	32	359
609	510	99	437	Total Patient Days	3,334	3,338	(4)	3,587
				<b>Average Length of Stay (ALOS)</b>				
3.1	4.0	(0.9)	3.5	Acute	3.1	3.6	(0.4)	3.8
3.1	4.0	(0.9)	3.5	Total Adult ALOS	3.1	3.6	(0.4)	3.8
1.4	1.6	(0.2)	1.6	Newborn ALOS	1.6	1.7	(0.0)	1.6
				<b>Average Daily Census (ADC)</b>				
17.7	15.1	2.6	12.7	Acute	13.5	13.7	(0.2)	15.0
17.7	15.1	2.6	12.7	Total Adult ADC	13.5	13.7	(0.2)	15.0
2.0	1.4	0.6	1.4	Newborn	2.0	1.8	0.1	1.7
				<b>Emergency Room Statistics</b>				
177	120	57	130	ER Visits - Admitted	985	824	161	886
1,338	1,108	230	1,270	ER Visits - Discharged	8,600	8,269	331	8,260
1,515	1,228	287	1,400	Total ER Visits	9,585	9,093	492	9,146
11.68%	9.77%		9.29%	% of ER Visits Admitted	10.28%	9.06%		9.69%
101.72%	103.45%		116.07%	ER Admissions as a % of Total	105.57%	99.40%		103.75%
				<b>Outpatient Statistics:</b>				
9,569	8,188	1,381	10,841	Total Outpatients Visits	58,210	52,714	5,496	67,264
173	126	47	157	Observation Bed Days	993	896	97	919
6,776	5,753	1,023	5,384	Clinic Visits - Primary Care	41,911	36,936	4,975	35,570
512	609	(97)	426	Clinic Visits - Specialty Clinics	3,700	3,637	63	3,323
55	60	(5)	25	IP Surgeries	361	306	55	157
132	120	12	126	OP Surgeries	864	781	83	760
				<b>Productivity Statistics:</b>				
481.90	491.43	(9.53)	448.08	FTE's - Worked	458.13	491.43	(33.30)	447.23
519.96	540.03	(20.07)	489.98	FTE's - Paid	510.35	540.03	(29.68)	498.34
1.3900	1.4700	(0.08)	1.5280	Case Mix Index - Medicare	1.4057	1.4896	(0.08)	1.6930
1.1300	1.3200	(0.19)	0.7089	Case Mix Index - All payers	1.1943	0.6731	0.52	0.9111

# Accounts Receivable Tracking Report

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
ROCK SPRINGS, WY

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01/31/24

	<u>Current Month Actual</u>	<u>Current Month Target</u>
Gross Days in Accounts Receivable - All Services	59.91	56.57
Net Days in Accounts Receivable	55.58	55.45
Number of Gross Days in Unbilled Revenue	18.57	3.0 or <
Number of Days Gross Revenue in Credit Balances	0.00	< 1.0
Self Pay as a Percentage of Total Receivables	24.58%	N/A
Charity Care as a % of Gross Patient Revenue - Current Month	0.02%	1.01%
Charity Care as a % of Gross Patient Revenue - Year-To-Date	0.50%	1.00%
Bad Debts as a % of Gross Patient Revenue - Current Month	5.34%	6.59%
Bad Debts as a % of Gross Patient Revenue - Year-To-Date	6.17%	6.50%
Collections as a Percentage of Net Revenue - Current Month	84.98%	100% or >
Collections as a Percentage of Net Revenue - Year-To-Date	92.12%	100% or >
Percentage of Blue Cross Receivable > 90 Days	4.65%	< 10%
Percentage of Insurance Receivable > 90 Days	28.73%	< 15%
Percentage of Medicaid Receivable > 90 Days	20.61%	< 20%
Percentage of Medicare Receivable > 60 Days	15.72%	< 6%

## Variance Analysis

### MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WYOMING

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Seven months ended January 31, 2024

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	%
Gross Patient Revenue	3,533,473	16.69%	10,035,992	6.91%
<p>Gross patient revenue is over budget for the month and over budget year to date. Patient statistics under budget in January were patient days. Average Daily Census is 17.7 in January which is over budget by 2.6</p>				
Deductions from Revenue	(2,397,031)	-21.57%	(6,284,749)	-8.24%
<p>Deductions from revenue are over budget for January and over budget year to date. They are currently booked at 53.6% for January and 52.9% year to date. This number is monitored closely each month and fluctuates based on historical write-offs and current collection percentages. More detail included in the narrative.</p>				
Bad Debt Expense	73,959	5.30%	(139,924)	-1.48%
<p>Bad debt expense is booked at 5.7% for January and 6.3% year to date.</p>				
Charity Care	208,724	97.31%	682,350	46.97%
<p>Charity care yields a high degree of variability month over month and is dependent on patient needs. Patient Financial Services evaluates accounts consistently to determine when charity adjustments are appropriate in accordance with our Charity Care Policy.</p>				
Other Operating Revenue	132,374	85.88%	(201,826)	-16.26%
<p>Other Operating Revenue is over budget for the month and is under budget year to date because of less county maintenance invoiced.</p>				
Salaries and Wages	78,404	1.81%	358,763	1.24%
<p>Salary and Wages are under budget in January and are under budget year to date. Paid FTEs are under budget by 20.07FTEs for the month and under 29.68 FTEs year to date.</p>				
Fringe Benefits	(94,069)	-7.75%	17,291	0.21%
<p>Fringe benefits are over budget in January and under budget year to date.</p>				
Contract Labor	(13,496)	-4.61%	(61,014)	-2.61%
<p>Contract labor is over budget for January and over budget year to date. Med/Surg, ER and X-ray are over budget for the month.</p>				

## Variance Analysis

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WYOMING

Seven months ended January 31, 2024

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	%
Physician Fees	(91,472)	-39.54%	102,456	4.70%
Physician fees over budget in January and under budget year to date. ER, Locum Ped's and clinic locums are over budget in January.				
Purchased Services	(53,821)	-8.48%	(212,374)	-5.08%
Purchased services are over budget for January and over budget year to date. Expenses over budget are sponsorships, legal fee's, collection fee's and other purchased services.				
Supply Expense	(201,851)	-25.36%	(387,558)	-7.17%
Supplies are over budget for January and under budget year to date. Line items over budget include lab supplies, instruments, chargables, implants, other med/surg supplies, minor equipment and food.				
Repairs & Maintenance	(44,035)	-10.57%	142,016	4.79%
Repairs and Maintenance are over budget for January and under budget year to date.				
All Other Operating Expenses	73,531	28.77%	90,440	4.98%
This expense is under budget in January and under budget year to date. Other expenses over budget are freight and committee meeting meals.				
Leases and Rentals	(3,097)	-17.47%	(46,270)	-26.13%
This expense is over budget for January and is over budget year to date				
Depreciation and Amortization	(1,384)	-0.16%	105,602	1.71%
Depreciation is over budget for January and is under budget year to date				
<b>BALANCE SHEET</b>				
Cash and Cash Equivalents	(\$468,791)	-3.07%		
Cash increased in January. Cash collections for January were \$9.5 million. Days Cash on Hand decreased to 111 days due to the QRA payment.				
Gross Patient Accounts Receivable	\$4,500,823	10.96%		
This receivable increased in January due to higher revenue.				



## Variance Analysis

### MEMORIAL HOSPITAL OF SWEETWATER COUNTY ROCK SPRINGS, WYOMING Seven months ended January 31, 2024

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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	%
Bad Debt and Allowance Reserves	(3,353,767)	-14.85%		
Bad Debt and Allowances increased.				
Other Receivables	565,302	19.44%		
Other Receivables increased in January due to the QRA accrual				
Prepaid Expenses	(24,434)	-1.27%		
Prepaid expenses decreased due to the normal activity in this account.				
Limited Use Assets	187,319	0.97%		
These assets increased due to debt service fund accrual				
Plant Property and Equipment	(528,780)	-0.69%		
The decrease in these assets is due to the the normal increase in accumulated depreciation.				
Accounts Payable	200,648	2.70%		
This liability decreased due to the normal activity in this account.				
Accrued Payroll	(223,598)	-9.45%		
This liability increased in January. The payroll accrual for January was 17 days.				
Accrued Benefits	(74,848)	-2.76%		
This liability increased in January with the normal accrual and usage of PTO.				
Other Current Liabilities	(174,326)	-23.97%		
This liability increased for January due to the accrual on the bonds				
Other Long Term Liabilities	279,314	2.27%		
This liability decreased with the payment on the leases				
Total Net Assets	370,822	-1.17%		
The net gain from operations for January is \$1,003,721				



**MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
ROCK SPRINGS, WY**

**PROVIDER CLINICS**

**Unaudited Financial Statements**

**for**

**Seven months ended January 31, 2024**

**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

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ROCK SPRINGS, WY

Seven months ended January 31, 2024

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## Key Financial Ratios

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY**  
**ROCK SPRINGS, WY**  
**Seven months ended January 31, 2024**

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### - DESIRED POSITION IN RELATION TO BENCHMARKS AND BUDGET

	Month to Date 1/31/2024	Year to Date 1/31/2024	Prior Fiscal Year End 06/30/23	MGMA Hospital Owned Rural
<b>Profitability:</b>				
Operating Margin	-6.68%	-24.72%	-30.52%	-36.58%
Total Profit Margin	-6.68%	-24.72%	-30.52%	-36.58%
Contractual Allowance %	38.02%	43.70%	44.16%	
<b>Liquidity:</b>				
Net Days in Accounts Receivable	44.64	54.82	37.74	39.58
Gross Days in Accounts Receivable	39.82	44.95	56.57	72.82
<b>Productivity and Efficiency:</b>				
Patient Visits Per Day	218.58	194.93	193.53	
Total Net Revenue per FTE	N/A	\$203,593	\$219,823	
Salary Expense per Paid FTE	N/A	\$177,978	\$103,824	
Salary and Benefits as a % of Net Revenue	89.89%	103.73%	56.63%	91.26%
Employee Benefits %	24.59%	18.66%	30.38%	6.10%

# Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Seven months ended January 31, 2024

## CURRENT MONTH

	Actual 01/31/24	Budget 01/31/24	Positive (Negative) Variance	Percentage Variance	Prior Year 01/31/23
Gross Patient Revenue					
Clinic Revenue	3,067,826	2,847,742	220,084	7.73%	2,443,375
Specialty Clinic Revenue	0	0	0	0.00%	0
Total Gross Patient Revenue	3,067,826	2,847,742	220,084	7.73%	2,443,375
Deductions From Revenue					
Discounts and Allowances	(1,166,358)	(1,250,659)	84,200	6.73%	(1,096,382)
Total Deductions From Revenue	(1,166,358)	(1,250,659)	84,200	6.73%	(1,096,382)
Net Patient Revenue	1,901,467	1,597,183	304,284	19.05%	1,346,993
Other Operating Revenue	40,957	38,145	2,812	7.37%	40,919
Total Operating Revenue	1,942,425	1,635,328	307,097	18.78%	1,387,912
Operating Expenses					
Salaries and Wages	1,401,458	1,410,475	9,017	0.64%	1,236,970
Fringe Benefits	344,600	294,929	(49,671)	-16.84%	267,208
Contract Labor	0	0	0	0.00%	0
Physicians Fees	142,870	76,667	(66,204)	-86.35%	67,806
Purchased Services	4,971	4,006	(965)	-24.10%	10,005
Supply Expense	35,784	25,226	(10,557)	-41.85%	19,705
Utilities	1,016	1,691	676	39.95%	986
Repairs and Maintenance	3,991	7,208	3,217	44.63%	4,118
Insurance Expense	22,391	24,124	1,733	7.18%	16,238
All Other Operating Expenses	103,364	136,245	32,881	24.13%	108,716
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	4,426	3,794	(632)	-16.65%	3,660
Depreciation and Amortization	7,332	5,047	(2,285)	-45.26%	8,091
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	2,072,203	1,989,412	(82,790)	-4.16%	1,743,302
Net Operating Surplus/(Loss)	(129,778)	(354,084)	224,306	-63.35%	(355,390)
Total Net Surplus/(Loss)	(129,778)	(354,084)	\$224,306	-63.35%	(355,390)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease in Unrestricted Net Assets	(129,778)	(354,084)	\$224,306	-63.35%	(355,390)
Operating Margin	-6.68%	-21.65%			-25.61%
Total Profit Margin	-6.68%	-21.65%			-25.61%
EBIDA	-6.30%	-21.34%			-25.02%



# Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Seven months ended January 31, 2024

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	YEAR-TO-DATE				Prior Year 01/31/23
	Actual 01/31/24	Budget 01/31/24	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Clinic Revenue	18,290,857	18,436,964	(146,107)	-0.79%	15,893,657
Specialty Clinic Revenue	0	0	0	0.00%	0
Total Gross Patient Revenue	18,290,857	18,436,964	(146,107)	-0.79%	15,893,657
Deductions From Revenue					
Discounts and Allowances	(7,993,226)	(7,997,765)	4,538	0.06%	(7,060,597)
Total Deductions From Revenue	(7,993,226)	(7,997,765)	4,538	0.06%	(7,060,597)
Net Patient Revenue	10,297,631	10,439,199	(141,569)	-1.36%	8,833,059
Other Operating Revenue	309,703	267,015	42,688	15.99%	271,609
Total Operating Revenue	10,607,333	10,706,214	(98,881)	-0.92%	9,104,668
Operating Expenses					
Salaries and Wages	9,272,756	9,257,627	(15,129)	-0.16%	8,489,555
Fringe Benefits	1,729,918	1,666,566	(63,352)	-3.80%	1,463,794
Contract Labor	0	0	0	0.00%	0
Physicians Fees	815,730	858,067	42,337	4.93%	454,908
Purchased Services	45,413	27,514	(17,899)	-65.05%	62,844
Supply Expense	172,531	154,822	(17,709)	-11.44%	142,042
Utilities	7,641	11,477	3,836	33.42%	8,791
Repairs and Maintenance	36,431	51,025	14,594	28.60%	86,489
Insurance Expense	152,365	156,109	3,744	2.40%	116,103
All Other Operating Expenses	917,834	935,239	17,405	1.86%	896,289
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	29,868	26,136	(3,732)	-14.28%	22,246
Depreciation and Amortization	49,462	37,680	(11,782)	-31.27%	56,751
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	13,229,948	13,182,262	(47,686)	-0.36%	11,799,811
Net Operating Surplus/(Loss)	(2,622,615)	(2,476,048)	(146,567)	5.92%	(2,695,143)
Total Net Surplus/(Loss)	(2,622,615)	(2,476,048)	(146,567)	5.92%	(2,695,143)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease) in Unrestricted Net Assets	(2,622,615)	(2,476,048)	(146,567)	5.92%	(2,695,143)
Operating Margin	-24.72%	-23.13%			-29.60%
Total Profit Margin	-24.72%	-23.13%			-29.60%
EBIDA	-24.26%	-22.78%			-28.98%

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

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	Actual 1/31/2024	Actual 12/31/2023	Actual 11/30/2023	Actual 10/31/2023	Actual 9/30/2023
Gross Patient Revenue					
Clinic Revenue	\$3,067,926	\$2,429,711	\$2,567,917	\$2,668,662	\$2,531,474
Specialty Clinic Revenue	\$0	\$0	\$0	\$0	\$0
Total Gross Patient Revenue	\$3,067,926	\$2,429,711	\$2,567,917	\$2,668,662	\$2,531,474
Deductions From Revenue					
Discounts and Allowances	(\$1,166,368)	(\$1,175,631)	(\$1,127,929)	(\$1,203,232)	(\$1,097,845)
Total Deductions From Revenue	(\$1,166,368)	(\$1,175,631)	(\$1,127,929)	(\$1,203,232)	(\$1,097,845)
Net Patient Revenue	\$1,901,467	\$1,254,080	\$1,439,988	\$1,465,429	\$1,433,629
Other Operating Revenue	\$40,957	\$39,646	\$44,519	\$40,763	\$40,709
Total Operating Revenue	1,942,425	1,293,727	1,484,508	1,506,193	1,474,338
Operating Expenses					
Salaries and Wages	\$1,401,458	\$1,401,351	\$1,379,054	\$1,406,800	\$1,268,262
Fringe Benefits	\$344,600	\$265,866	\$246,824	\$253,428	\$191,356
Contract Labor	\$0	\$0	\$0	\$0	\$0
Physicians Fees	\$142,870	\$104,507	\$141,747	\$122,560	\$48,223
Purchased Services	\$4,971	\$3,976	\$6,143	\$8,953	\$7,449
Supply Expense	\$35,784	\$18,050	\$22,062	\$25,675	\$32,976
Utilities	\$1,016	\$957	\$957	\$954	\$1,866
Repairs and Maintenance	\$3,991	\$6,565	\$8,071	\$3,411	\$7,881
Insurance Expense	\$22,391	\$22,391	\$22,391	\$22,391	\$22,391
All Other Operating Expenses	\$103,364	\$122,279	\$94,799	\$172,653	\$153,968
Bad Debt Expense (Non-Governmental Providers)					
Leases and Rentals	\$4,426	\$3,528	\$4,556	\$4,912	\$3,828
Depreciation and Amortization	\$7,332	\$6,757	\$6,757	\$6,757	\$6,791
Interest Expense (Non-Governmental Providers)					
Total Operating Expenses	\$2,072,203	\$1,956,227	\$1,933,361	\$2,028,495	\$1,744,991
Net Operating Surplus/(Loss)	(\$129,778)	(\$662,500)	(\$448,853)	(\$522,302)	(\$270,653)
Total Net Surplus/(Loss)	(\$129,778)	(\$662,500)	(\$448,853)	(\$522,302)	(\$270,653)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0	0
Increase/(Decrease in Unrestricted Net Assets	(\$129,778)	(\$662,500)	(\$448,853)	(\$522,302)	(\$270,653)
Operating Margin	-6.68%	-51.21%	-30.24%	-34.68%	-18.36%
Total Profit Margin	-6.68%	-51.21%	-30.24%	-34.68%	-18.36%
EBIDA	-6.30%	-50.69%	-29.78%	-34.23%	-17.90%

Actual 8/31/2023	Actual 7/31/2023	Actual 6/30/2023	Actual 5/31/2023	Actual 4/30/2023	Actual 3/31/2023	Actual 2/28/2023	Actual 1/31/2023
\$2,624,096	\$2,401,171	\$2,370,337	\$2,429,167	\$2,139,602	\$2,519,030	\$2,025,043	\$2,443,375
\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$2,624,096	\$2,401,171	\$2,370,337	\$2,429,167	\$2,139,602	\$2,519,030	\$2,025,043	\$2,443,375
(\$1,132,244)	(\$1,089,987)	(\$966,079)	(\$1,078,791)	(\$929,422)	(\$1,409,620)	(\$948,497)	(\$1,096,382)
(\$1,132,244)	(\$1,089,987)	(\$966,079)	(\$1,078,791)	(\$929,422)	(\$1,409,620)	(\$948,497)	(\$1,096,382)
\$1,491,852	\$1,311,184	\$1,404,258	\$1,350,377	\$1,210,180	\$1,413,410	\$1,076,545	\$1,346,993
\$56,677	\$46,430	\$45,558	\$43,934	\$39,958	\$40,995	\$35,492	\$40,919
1,548,529	1,357,614	1,449,816	1,394,310	1,250,137	1,454,405	1,112,037	1,387,912
\$1,189,449	\$1,226,382	\$1,313,328	\$1,256,318	\$1,250,382	\$1,221,400	\$1,221,608	\$1,236,970
\$211,574	\$216,269	\$240,597	\$278,825	\$277,921	\$264,654	\$248,570	\$267,208
\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$124,956	\$130,867	\$87,845	\$62,293	\$78,330	\$62,578	\$52,162	\$67,606
\$11,119	\$2,801	\$10,728	\$1,912	\$1,797	\$7,333	\$7,966	\$10,005
\$20,843	\$17,142	\$23,512	\$14,520	\$9,471	\$18,138	\$19,188	\$19,705
\$946	\$946	\$946	\$914	\$972	\$1,876	\$1,221	\$986
\$3,298	\$3,213	\$4,762	\$2,745	\$3,984	\$3,056	\$5,842	\$4,118
\$20,205	\$20,205	\$20,205	\$20,205	\$16,284	\$16,284	\$16,237	\$16,238
\$97,070	\$173,700	\$89,444	\$162,897	\$81,612	\$115,468	\$122,180	\$108,716
\$2,886	\$5,754	\$3,154	\$3,588	\$3,608	\$3,310	\$3,432	\$3,680
\$7,097	\$7,971	\$8,480	\$8,360	\$8,433	\$8,433	\$8,091	\$8,091
\$1,689,421	\$1,805,250	\$1,803,001	\$1,812,574	\$1,732,794	\$1,722,529	\$1,706,485	\$1,743,302
(\$140,892)	(\$447,637)	(\$353,185)	(\$418,264)	(\$482,657)	(\$268,124)	(\$594,448)	(\$355,390)
(\$140,892)	(\$447,637)	(\$353,185)	(\$418,264)	(\$482,657)	(\$268,124)	(\$594,448)	(\$355,390)
0	0	0	0	0	0	0	0
(\$140,892)	(\$447,637)	(\$353,185)	(\$418,264)	(\$482,657)	(\$268,124)	(\$594,448)	(\$355,390)
-9.10%	-32.97%	-24.36%	-30.00%	-38.61%	-18.44%	-53.46%	-25.61%
-9.10%	-32.97%	-24.36%	-30.00%	-38.61%	-18.44%	-53.46%	-25.61%
-8.64%	-32.39%	-23.78%	-29.40%	-37.93%	-17.86%	-52.73%	-25.02%

# Patient Statistics

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY**  
**ROCK SPRINGS, WY**  
**Seven months ended January 31, 2024**

**PAGE 7**

Current Month				STATISTICS	Year-To-Date			
Actual 01/31/24	Budget 01/31/24	Positive/ (Negative) Variance	Prior Year 01/31/23		Actual 01/31/24	Budget 01/31/24	Positive/ (Negative) Variance	Prior Year 01/31/23
Outpatient Statistics:								
6,776	5,753	1,023	5,753	Clinic Visits - Primary Care	41,911	36,936	4,975	36,936
512	609	(97)	609	Clinic Visits - Specialty Clinics	3,700	3,637	63	3,637
Productivity Statistics:								
92.76	80.17	12.59	68.05	FTE's - Worked	77.54	80.17	(2.63)	66.11
103.43	88.10	15.33	75.80	FTE's - Paid	88.45	88.10	0.35	75.07

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
CASH DISBURSEMENT SUMMARY FOR JANUARY 24**

PAYMENT SOURCE	NO. OF DISBURSEMENTS	AMOUNT
OPERATIONS (GENERAL FUND/KEYBANK)	631	9,934,697.61
CAPITAL EQUIPMENT (PLANT FUND)	5	136,241.81
CONSTRUCTION IN PROGRESS (BUILDING FUND)	4	243,261.92
PAYROLL JANUARY 04, 2024		1,895,121.34
PAYROLL JANUARY 18, 2024		1,756,166.24
TOTAL CASH OUTFLOW		<u>\$10,314,201.34</u>
CASH COLLECTIONS		9,509,867.59
INCREASE/DECREASE IN CASH		-\$804,333.75

**PLANT FUND CASH DISBURSEMENTS  
FISCAL YEAR 2024**

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002596	7/6/2023	FISHER HEALTHCARE	6,264.08	TWO DOOR REFRIGERATOR		
002597	7/20/2023	CSESCO INC	7,507.50	CERNER MYDINE SOFTWARE		
<b>JULY TOTALS</b>					<b>13,771.58</b>	<b>13,771.58</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002598	8/3/2023	CERNER CORPORATION	14,250.00	CERNER CLINIC MEDICATION INTEGRATION		
002599	8/17/2023	DELL COMPUTER CORPORATION	14,920.80	DELL LAPTOP MONITOR DOCKING STATION		
002600	8/24/2023	DELL COMPUTER CORPORATION	18,749.90	DELL LAPTOP MONITOR DOCKING STATION		
002601	8/24/2023	STRYKER MEDICAL	44,982.95	GURNEYS		
002602	8/31/2023	HELMER SCIENTIFIC, LLC	8,883.67	PHARMACY REFRIGERATOR		
<b>AUGUST TOTALS</b>					<b>101,787.32</b>	<b>115,558.90</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002603	9/14/2023	STERIS CORPORATION	4,379.58	INNOWAVE SONIC IRRIGATOR		
002604	9/21/2023	BOBCAT OF ROCK SPRINGS (PETE	6,778.65	BOBCAT BRUSH		
002605	9/28/2023	CERNER CORPORATION	22,000.00	PROVIDER BASED BILLING		
<b>SEPTEMBER TOTALS</b>					<b>33,158.23</b>	<b>148,717.13</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002606	10/2/2023	INTERMOUNTAIN TRIMLIGHT (W)	18,000.00	PERMANENT LIGHTING		
002607	10/12/2023	WYOELCTRIC, INC	63,137.75	LIGHTNING PROTECTION		
002608	10/13/2023	BIG SKY PLUMBING LLC	2,000.00	CENTRAL SCHEDULING WALL		
002609	10/19/2023	THE BAKER COMPANY	12,038.57	STERIL COMPOUNDING HOOD		
002610	10/26/2023	COMPUNET, INC.	96,437.69	PURE STORAGE DEVICE EXPANSION		
002611	10/26/2023	FISHER HEALTHCARE	288.16	REFRIGERATOR		
002612	10/26/2023	WYOELCTRIC, INC	63,137.75	LIGHTNING PROTECTION		
<b>OCTOBER TOTALS</b>					<b>255,039.92</b>	<b>403,757.05</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002613	11/2/2023	BRADEN SHIELDING SYSTEMS	17,915.00	SHIELDING VENDOR INSPECT FOR MRI UPGRADE		
002614	11/9/2023	AXON ENTERPRISES, INC.	24,400.84	BODY CAMERAS		
002615	11/9/2023	STERIS CORPORATION	79,698.33	INNOWAVE SONIC IRRIGATOR		
002616	11/9/2023	UL VERIFICATION SERVICES INC	25,700.00	PURE OHS ELECTRONIS EMP HEALTH RECORD		
002617	11/9/2023	WYOELCTRIC, INC	9,890.00	MRI UPGRADE BREAKER & ELECTRICAL		
002618	11/16/2023	BRADEN SHIELDING SYSTEMS	3,085.00	SHIELDING VENDOR INSPECT FOR MRI UPGRADE		
002619	11/16/2023	COMPUNET, INC.	13,310.00	VOIP B911 UPGRADE		
002620	11/22/2023	CDW GOVERNMENT LLC	10,762.14	NETWORK ANALYZER		
002621	11/22/2023	WYOELCTRIC, INC	63,137.75	LIGHTNING PROTECTION		
002622	11/30/2023	FISHER HEALTHCARE	9,662.60	PLATLET INCUBATOR AND AGITATOR		
002622	11/30/2023	FISHER HEALTHCARE	228.78	NEGATIVE 30 DEGREE C FREEZER		
002623	11/30/2023	INTERMOUNTAIN TRIMLIGHT (W)	7,500.00	PERMANENT LIGHTING		
<b>NOVEMBER TOTALS</b>					<b>265,290.44</b>	<b>669,047.49</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002624	12/14/2023	PRONK TECHNOLOGIES	12,385.00	BIOMED TEST EQUIPMENT		
002625	12/21/2023	CODALE BLECTRIC SUPPLY, INC	7,807.35	HEATER FOR MAINT HOSPITAL ENTRANCE		
002626	12/21/2023	DELL COMPUTER CORPORATION	17,586.00	DELL LAPTOP MONITOR DOCKING STATION		
002627	12/21/2023	WYOELCTRIC, INC	64,042.54	LIGHTNING PROTECTION		
002628	12/22/2023	INTERMOUNTAIN TRIMLIGHT (W)	10,500.00	PERMANENT LIGHTING		
<b>DECEMBER TOTALS</b>					<b>112,320.89</b>	<b>781,368.38</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002629	1/5/2024	CERNER CORPORATION	14,250.00	CLINIC MEDICATION INTEGRATION		
002629	1/5/2024	CERNER CORPORATION	7,027.50	MYDINE SOFTWARE		
002630	1/11/2024	DATX-OHMBDA, INC.	33,133.11	PHOTOTHERAPY SYSTEM-BILI LIGHTS & BLANKETS		
002631	1/18/2024	FISHER HEALTHCARE	9,391.20	NEGATIVE 30 DEGREE C FREEZER		
002632	1/18/2024	TENACORE	72,440.00	ALARIS PUMPS (12) - ASSET NUMBERS 13350-13361		
<b>JANUARY TOTALS</b>					<b>136,241.81</b>	<b>917,610.19</b>



**CONSTRUCTION IN PROGRESS (BUILDING FUND) CASH DISBURSEMENTS  
FISCAL YEAR 2024**

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001197	7/13/2023	JC JACOBS CARPET ONE	3,593.96	CENTRAL SCHEDULING WALL		
001198	7/13/2023	PLAN ONE/ARCHITECTS	23,704.50	LAB EXPANSION		
001198	7/13/2023	PLAN ONE/ARCHITECTS	2,340.38	ONCOLOGY SUITE RENOVATION		
001199	7/13/2023	WASATCH CONTROLS (HARRIS .	19,000.00	BUILDING AUTOMATION		
001200	7/13/2023	WESTERN ENGINEERS & GEOLO	2,546.75	BUILDING AUTOMATION		
001201	7/20/2023	HAGER INDUSTRIES, LLC	8,276.78	BULK OXYGEN		
001202	7/20/2023	WESTERN ENGINEERS & GEOLO	3,480.75	BULK OXYGEN		
WF DEBT	7/18/2023	WF DEBT SERVICE	189,475.58	WF DEBT SERVICE		
<b>JULY TOTALS</b>					<b>252,418.70</b>	<b>252,418.70</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001203	8/3/2023	WYLIE CONSTRUCTION INC.	44,438.87	BULK OXYGEN		
001204	8/10/2023	PLAN ONE/ARCHITECTS	28,445.40	LAB EXPANSION		
001204	8/10/2023	PLAN ONE/ARCHITECTS	2,875.00	U OF U EXAM ROOM UPGRADES		
001204	8/10/2023	PLAN ONE/ARCHITECTS	2,340.37	ONCOLOGY SUITE RENOVATION		
001205	8/10/2023	WASATCH CONTROLS (HARRIS .	60,990.00	BUILDING AUTOMATION		
001206	8/31/2023	INSULATION INC.	581.16	LAB EXPANSION		
001207	8/31/2023	WASATCH CONTROLS (HARRIS .	45,273.05	BUILDING AUTOMATION		
001208	8/31/2023	WESTERN ENGINEERS & GEOLO	1,967.75	LAB EXPANSION		
001209	8/31/2023	WYLIE CONSTRUCTION INC.	43,412.07	BULK OXYGEN		
WF DEBT	8/17/2023	WF DEBT SERVICE	189,475.58	WF DEBT SERVICE		
<b>AUGUST TOTALS</b>					<b>419,799.25</b>	<b>672,217.95</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001210	8/3/2023	PLAN ONE/ARCHITECTS	60,581.98	LAB EXPANSION		
WF DEBT	8/17/2023	WF DEBT SERVICE	174,330.58	WF DEBT SERVICE		
<b>SEPTEMBER TOTALS</b>					<b>234,912.56</b>	<b>907,130.51</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001211	10/5/2023	WESTERN ENGINEERS & GEOLO	6,366.25	BULK OXYGEN		
001212	10/12/2023	BIG SKY PLUMBING LLC	7,570.00	BULK OXYGEN		
001213	10/12/2023	PLAN ONE/ARCHITECTS	39,748.37	CENTRAL SCHEDULING WALL		
001214	10/12/2023	WYOBLLECTRIC, INC	13,402.51	CENTRAL SCHEDULING WALL		
001215	10/19/2023	A & B HOME IMPROVEMENTS	12,460.00	CENTRAL SCHEDULING WALL		
001216	10/26/2023	WESTERN ENGINEERS & GEOLO	468.50	BULK OXYGEN		
WF DEBT	10/16/2023	WF DEBT SERVICE	174,330.58	WF DEBT SERVICE		
<b>OCTOBER TOTALS</b>					<b>254,346.21</b>	<b>1,161,476.72</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001217	11/2/2023	VAUGHNS PLUMBING & HEATIN	8,000.00	CENTRAL SCHEDULING WALL		
001218	11/2/2023	WYLIE CONSTRUCTION INC.	138,153.30	BULK OXYGEN		
001219	11/9/2023	PLAN ONE/ARCHITECTS	960.00	MRI AND XRAY ROOMS RENO		
001219	11/9/2023	PLAN ONE/ARCHITECTS	2,340.38	ONCOLOGY SUITE RENOVATION		
001219	11/9/2023	PLAN ONE/ARCHITECTS	21,841.80	LAB EXPANSION		
001220	11/30/2023	WESTERN ENGINEERS & GEOLO	367.50	MRI AND XRAY ROOMS RENO		
WF DEBT	11/16/2023	WF DEBT SERVICE	174,330.58	WF DEBT SERVICE		
<b>NOVEMBER TOTALS</b>					<b>345,993.56</b>	<b>1,507,470.28</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001221	12/8/2023	A. PLEASANT CONSTRUCTION, I	92,292.50	ONCOLOGY SUITE RENOVATION		
001222	12/14/2023	PLAN ONE/ARCHITECTS	21,841.80	LAB EXPANSION		
001223	12/21/2023	WESTERN ENGINEERS & GEOLO	475.16	LAB EXPANSION		
WF DEBT	12/14/2023	WF DEBT SERVICE	174,330.58	WF DEBT SERVICE		
<b>DECEMBER TOTALS</b>					<b>288,940.04</b>	<b>1,796,410.32</b>

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001224	1/11/2024	PLAN ONE/ARCHITECTS	13,470.00	BH UNIT		
001224	1/11/2024	PLAN ONE/ARCHITECTS	14,561.20	LAB EXPANSION		
001225	1/18/2024	WYLIE CONSTRUCTION INC.	40,900.14	BULK OXYGEN		
WF DEBT	1/17/2024	WF DEBT SERVICE	174,330.58	WF DEBT SERVICE		
<b>JANUARY TOTALS</b>					<b>243,261.92</b>	<b>2,039,672.24</b>

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
GENERAL FUND DISBURSEMENTS  
1/31/2024

Amount	Description
60,273.94	<b>Advertising Total</b>
4,270.77	<b>Billing Services Total</b>
16,775.46	<b>Blood Total</b>
3,500.00	<b>Building Lease Total</b>
122,764.58	<b>Café Management Total</b>
3,636.45	<b>Cellular Telephone Total</b>
61,497.58	<b>Collection Agency Total</b>
25,725.40	<b>Computer Equipment Total</b>
414,874.83	<b>Contract Maintenance Total</b>
346,936.00	<b>Contract Personnel Total</b>
7,560.55	<b>Credit Card Payment Total</b>
27,837.56	<b>Dental Insurance Total</b>
16,780.40	<b>Dialysis Supplies Total</b>
80,080.00	<b>Education &amp; Travel Total</b>
1,890.80	<b>Employee Recruitment Total</b>
7,130.56	<b>Employee Vision Plan Total</b>
192,701.65	<b>Equipment Lease Total</b>
7,521.75	<b>Food Total</b>
12,728.12	<b>Freight Total</b>
531.46	<b>Fuel Total</b>
3,455.54	<b>Garbage Collection Total</b>
887,752.08	<b>Group Health Total</b>
434,269.42	<b>Hospital Supplies Total</b>
41,494.50	<b>Implant Supplies Total</b>
31,540.21	<b>Insurance Premiums Total</b>
46,430.85	<b>Insurance Refund Total</b>
92,016.61	<b>Laboratory Services Total</b>
107,413.53	<b>Laboratory Supplies Total</b>
243.29	<b>Laundry Supplies Total</b>
11,562.50	<b>Legal Fees Total</b>
2,297.32	<b>Licenses &amp; Taxes Total</b>
1,057.56	<b>Life Insurance Total</b>
5,552.34	<b>Linen Total</b>
22,935.40	<b>Maintenance &amp; Repair Total</b>
8,073.54	<b>Maintenance Supplies Total</b>
6,831.90	<b>Marketing &amp; Promotional Supplies Total</b>
2,195.00	<b>Membership Fee Total</b>
5,081.78	<b>MHSC Foundation Total</b>
388.10	<b>Minor Equipment Total</b>
511.00	<b>Monthly Pest Control Total</b>
3,310.00	<b>Non Medical Supplies Total</b>
13,964.48	<b>Office Supplies Total</b>
3,478.20	<b>Other Employee Benefits Total</b>
8,182.60	<b>Other Purchased Services Total</b>
7,292.63	<b>Oxygen Rental Total</b>
12,031.53	<b>Patient Refund Total</b>
1,202.04	<b>Payroll Deduction Total</b>

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
GENERAL FUND DISBURSEMENTS

1/31/2024

[illegible]

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
GENERAL FUND DISBURSEMENTS  
1/31/2024

Check Number	Date	Vendor Check Name	Amount	Description
196324	1/5/2024	LAMAR ADVERTISING	1,273.00	Advertising
196353	1/5/2024	PILOT BUTTE BROADCASTING	650.00	Advertising
196354	1/5/2024	PUBLISHING CONCEPTS, INC.	1,050.00	Advertising
196532	1/11/2024	ROCKET MINER	467.02	Advertising
196365	1/5/2024	SCORPION HEALTHCARE LLC	2,849.00	Advertising
196535	1/11/2024	SCORPION HEALTHCARE LLC	5,437.46	Advertising
196548	1/11/2024	SWEETWATER NOW, LLC	2,900.00	Advertising
196550	1/11/2024	THE RADIO NETWORK	3,365.65	Advertising
196385	1/5/2024	UPSLOPE MEDIA LLC	25,670.00	Advertising
196719	1/25/2024	BIG THICKET BROADCASTING	3,277.45	Advertising
196722	1/25/2024	BRIDGER VALLEY PIONEER	895.00	Advertising
196757	1/25/2024	KEMMERER GAZETTE	685.30	Advertising
196622	1/18/2024	LAMAR ADVERTISING	424.00	Advertising
196786	1/25/2024	FINEDALE ROUNDUP	1,000.00	Advertising
196649	1/18/2024	ROCKET MINER	19.56	Advertising
196795	1/25/2024	ROCKET MINER	126.50	Advertising
196653	1/18/2024	ROYAL FLUSH ADVERTISING	755.00	Advertising
196656	1/18/2024	SCORPION HEALTHCARE LLC	2,849.00	Advertising
196808	1/25/2024	SWEETWATER NOW, LLC	3,900.00	Advertising
196663	1/18/2024	THE RADIO NETWORK	1,000.00	Advertising
EFT000000008489	1/5/2024	ROCK SPRINGS SWEETWATER COUNTY AIRPORT	280.00	Advertising
EFT000000008500	1/11/2024	GREEN RIVER STAR	1,400.00	Advertising
196605	1/18/2024	EXPRESS MEDICAID BILLING SERV	4,270.77	Billing Services
196558	1/11/2024	VITALANT	10,658.64	Blood
196818	1/25/2024	VITALANT	6,116.82	Blood
196732	1/25/2024	CURRENT PROPERTIES, LLC	3,500.00	Building Lease
196667	1/18/2024	UNIDINE CORPORATION	14,293.33	Cafe Management
196812	1/25/2024	UNIDINE CORPORATION	106,531.25	Cafe Management
196388	1/5/2024	VERIZON WIRELESS, LLC	3,636.45	Cellular Telephone
196481	1/11/2024	EXPRESS RECOVERY SERVICES	19,713.59	Collection Agency
196391	1/5/2024	WAKEFIELD & ASSOCIATES, INC.	21,542.28	Collection Agency
196559	1/11/2024	WAKEFIELD & ASSOCIATES, INC.	20,241.71	Collection Agency
196466	1/11/2024	CDW GOVERNMENT LLC	338.20	Computer Equipment
196476	1/11/2024	DELL COMPUTER CORPORATION	1,989.80	Computer Equipment
196595	1/18/2024	CDW GOVERNMENT LLC	5,724.86	Computer Equipment
196725	1/25/2024	CDW GOVERNMENT LLC	338.54	Computer Equipment
196733	1/25/2024	DELL COMPUTER CORPORATION	17,334.00	Computer Equipment
196292	1/5/2024	CERNER CORPORATION	2,821.89	Contract Maintenance
196469	1/11/2024	CERNER CORPORATION	210,456.63	Contract Maintenance
196295	1/5/2024	CLOUDU COMMUNICATIONS INC.	53.35	Contract Maintenance
196467	1/11/2024	CSG, LLC	3,601.57	Contract Maintenance
196486	1/11/2024	FORWARD GOVERNANCE CONSULTING, LLC	3,000.00	Contract Maintenance
196489	1/11/2024	FRONT RANGE MOBILE IMAGING, INC.	11,528.00	Contract Maintenance
196490	1/11/2024	GE HEALTHCARE	26,110.96	Contract Maintenance
196495	1/11/2024	GREENSHADES SOFTWARE	179.03	Contract Maintenance
196496	1/11/2024	HARMONY HEALTHCARE IT	7,727.00	Contract Maintenance
196500	1/11/2024	INOVALON PROVIDER INC.	995.70	Contract Maintenance
196501	1/11/2024	INTOUCH HEALTH	2,350.00	Contract Maintenance

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196342	1/5/2024	NETDAIS	2,100.00	Contract Maintenance
196349	1/5/2024	NEUROMONITORING TECHNOLOGIES	1,500.00	Contract Maintenance
196346	1/5/2024	NUANCE COMMUNICATIONS, INC	105.00	Contract Maintenance
196352	1/5/2024	PHILIPS HEALTHCARE	550.00	Contract Maintenance
196528	1/11/2024	REMI CORPORATION	3,022.46	Contract Maintenance
196529	1/11/2024	RL DATIX	421.00	Contract Maintenance
196367	1/5/2024	SIEMENS MEDICAL SOLUTIONS USA	3,713.53	Contract Maintenance
196537	1/11/2024	SIEMENS MEDICAL SOLUTIONS USA	9,543.33	Contract Maintenance
196403	1/5/2024	STATE FIRE DC SPECIALTIES	75.00	Contract Maintenance
196383	1/5/2024	UNITED AUDIT SYSTEMS, INC.	19,120.25	Contract Maintenance
196567	1/12/2024	WASATCH CONTROLS	1,766.00	Contract Maintenance
196398	1/5/2024	WYODATA SECURITY INC.	3,800.00	Contract Maintenance
196561	1/11/2024	WYODATA SECURITY INC.	2,005.00	Contract Maintenance
196597	1/18/2024	CERNER CORPORATION	1,276.52	Contract Maintenance
196728	1/25/2024	CONSUMER FUSION INC.	1,750.00	Contract Maintenance
196745	1/25/2024	GE HEALTHCARE	29,281.63	Contract Maintenance
196612	1/18/2024	HEALTHCARESOURCE HR, INC.	1,296.00	Contract Maintenance
196753	1/25/2024	ISI WATER CHEMISTRIES	7,784.48	Contract Maintenance
196771	1/25/2024	MERGE HEALTHCARE SOLUTIONS, INC	2,125.00	Contract Maintenance
196779	1/25/2024	NEUROMONITORING TECHNOLOGIES	600.00	Contract Maintenance
196782	1/25/2024	OTIS ELEVATOR COMPANY	20,541.84	Contract Maintenance
196785	1/25/2024	PHILIPS HEALTHCARE	1,433.00	Contract Maintenance
196793	1/25/2024	RED FLAG REPORTING	1,290.00	Contract Maintenance
196791	1/25/2024	REMI CORPORATION	2,729.36	Contract Maintenance
196799	1/25/2024	SIEMENS MEDICAL SOLUTIONS USA	3,683.69	Contract Maintenance
196668	1/18/2024	UNITED AUDIT SYSTEMS, INC.	8,908.00	Contract Maintenance
196817	1/25/2024	VISONEX, LLC	2,772.00	Contract Maintenance
196671	1/18/2024	WYOMING DEPT OF HEALTH	500.00	Contract Maintenance
EFT000000008492	1/5/2024	STATE FIRE DC SPECIALTIES	2,038.00	Contract Maintenance
EFT000000008515	1/18/2024	STATE FIRE DC SPECIALTIES	2,431.25	Contract Maintenance
EFT000000008525	1/25/2024	STATE FIRE DC SPECIALTIES	1,494.70	Contract Maintenance
W/T	1/22/2024	TRIZETTO FEE	237.00	Contract Maintenance
W/T	1/22/2024	TRIZETTO FEE	6,164.66	Contract Maintenance
196304	1/5/2024	FOCUSONE SOLUTIONS LLC	98,047.00	Contract Personnel
196485	1/11/2024	FOCUSONE SOLUTIONS LLC	97,051.25	Contract Personnel
196534	1/11/2024	SARAH ROTH	720.00	Contract Personnel
196608	1/18/2024	FOCUSONE SOLUTIONS LLC	81,096.50	Contract Personnel
196743	1/25/2024	FOCUSONE SOLUTIONS LLC	69,661.25	Contract Personnel
196655	1/18/2024	SARAH ROTH	360.00	Contract Personnel
W/T	1/30/2024	UMB BANK CREDIT CARD	7,560.55	Credit Card Payment
196300	1/5/2024	DELTA DENTAL	27,837.56	Dental Insurance
196305	1/5/2024	FRESENIUS USA MARKETING, INC.	4,546.61	Dialysis Supplies
196488	1/11/2024	FRESENIUS USA MARKETING, INC.	7,399.69	Dialysis Supplies
196310	1/5/2024	HENRY SCHEIN INC	54.76	Dialysis Supplies
196609	1/18/2024	FRESENIUS USA MARKETING, INC.	4,302.60	Dialysis Supplies
196744	1/25/2024	FRESENIUS USA MARKETING, INC.	100.00	Dialysis Supplies
196613	1/18/2024	HENRY SCHEIN INC	355.20	Dialysis Supplies
196750	1/25/2024	HENRY SCHEIN INC	21.54	Dialysis Supplies
196299	1/5/2024	COPE2THRIVE, LLC	605.00	Education & Travel



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196562	1/11/2024	WYOMING HOSPITAL ASSOCIATION	75,120.00	Education & Travel
196401	1/5/2024	WYOMING MEDICAL SOCIETY	4,355.00	Education & Travel
196312	1/5/2024	HOLIDAY INN - ROCK SPRINGS	250.00	Employee Recruitment
196316	1/5/2024	INSIGHT SCREENING LLC	870.80	Employee Recruitment
EFT00000000491	1/5/2024	SAFE SECURE TESTING INC.	770.00	Employee Recruitment
196309	1/5/2024	VISION SERVICE PLAN - WY	7,130.56	Employee Vision Plan
196306	1/5/2024	GE HEALTHCARE FINANCIAL SERVICES	48,900.21	Equipment Lease
196492	1/11/2024	GE HEALTHCARE FINANCIAL SERVICES	7,472.32	Equipment Lease
196344	1/5/2024	NEULANE FINANCE COMPANY	114.57	Equipment Lease
196366	1/5/2024	SHADOW MOUNTAIN WATER CO. WY	369.27	Equipment Lease
196536	1/11/2024	SHADOW MOUNTAIN WATER CO. WY	135.38	Equipment Lease
196368	1/5/2024	SIEMENS FINANCIAL SERVICES, INC	33,243.34	Equipment Lease
196386	1/5/2024	US BANK EQUIPMENT FINANCE	1,175.46	Equipment Lease
196399	1/5/2024	WYOMING RENTS, LLC	353.46	Equipment Lease
196593	1/18/2024	CAREFUSION SOLUTIONS, LLC	21,706.00	Equipment Lease
196602	1/18/2024	COPIER & SUPPLY COMPANY	1,973.96	Equipment Lease
196730	1/25/2024	COPIER & SUPPLY COMPANY	9,810.72	Equipment Lease
196746	1/25/2024	GE HEALTHCARE FINANCIAL SERVICES	47,164.93	Equipment Lease
196642	1/18/2024	PITNEY BOWES INC	798.77	Equipment Lease
196798	1/25/2024	SHADOW MOUNTAIN WATER CO. WY	1,902.90	Equipment Lease
196800	1/25/2024	SIEMENS FINANCIAL SERVICES, INC	15,777.96	Equipment Lease
196814	1/25/2024	US BANK EQUIPMENT FINANCE	1,317.38	Equipment Lease
196821	1/25/2024	WYOMING RENTS, LLC	485.00	Equipment Lease
196301	1/5/2024	F B MCFADDEN WHOLESAL	2,028.25	Food
196606	1/18/2024	F B MCFADDEN WHOLESAL	3,435.80	Food
196741	1/25/2024	F B MCFADDEN WHOLESAL	2,018.70	Food
196626	1/18/2024	LLORENS PHARMACEUTICAL INTERNATIONAL DIVISION INC	39.00	Food
196302	1/5/2024	FED EX	447.68	Freight
196482	1/11/2024	FED EX	75.84	Freight
196382	1/5/2024	TRIOSE, INC	5,724.58	Freight
196554	1/11/2024	TRIOSE, INC	2,883.95	Freight
196664	1/18/2024	TRIOSE, INC	1,332.60	Freight
196811	1/25/2024	TRIOSE, INC	2,263.47	Freight
196527	1/11/2024	BAILEY ENTERPRISES	531.46	Fuel
196375	1/5/2024	SWEETWATER COUNTY SOLID WASTE	20.00	Garbage Collection
EFT00000000506	1/11/2024	WWS - ROCK SPRINGS	3,435.54	Garbage Collection
W/T	1/23/2024	FURTHER ADMIN FEE	328.25	Group Health
W/T	1/4/2024	FURTHER FLEX 1/3/24	5,620.86	Group Health
W/T	1/25/2024	FURTHER FLEX 1/24/24	7,130.38	Group Health
W/T	1/18/2024	FURTHER FLEX 1/16/24	7,647.05	Group Health
W/T	1/11/2024	FURTHER FLEX 1/11/24	8,553.09	Group Health
W/T	1/12/2024	BLUE CROSS BLUE SHIELD 1/5/24	106,408.05	Group Health
W/T	1/19/2024	BLUE CROSS BLUE SHIELD 1/12/24	162,951.76	Group Health
W/T	1/26/2024	BLUE CROSS BLUE SHIELD 1/19/24	269,953.66	Group Health
W/T	1/26/2024	BLUE CROSS BLUE SHIELD 12/29/23	319,158.98	Group Health
196363	1/5/2024	ABBOTT NUTRITION	24.45	Hospital Supplies
196273	1/5/2024	AESCULAP INC	76.56	Hospital Supplies
196449	1/11/2024	AESCULAP INC	899.78	Hospital Supplies
196279	1/5/2024	ARTHREX INC.	275.00	Hospital Supplies



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196452	1/11/2024	ARTHREX INC.	554.40	Hospital Supplies
196284	1/5/2024	BARD MEDICAL	444.00	Hospital Supplies
196457	1/11/2024	BAXTER HEALTHCARE CORP/IV	5,851.49	Hospital Supplies
196459	1/11/2024	BIOMET SPORTS MEDICINE	3,000.00	Hospital Supplies
196286	1/5/2024	BOSTON SCIENTIFIC CORP	3,614.26	Hospital Supplies
196460	1/11/2024	BOSTON SCIENTIFIC CORP	2,820.39	Hospital Supplies
196288	1/5/2024	CARDINAL HEALTH/V. MUELLER	42,572.05	Hospital Supplies
196464	1/11/2024	CARDINAL HEALTH/V. MUELLER	28,296.87	Hospital Supplies
196478	1/11/2024	DIAGNOSTICA STAGO INC	7,158.93	Hospital Supplies
196493	1/11/2024	GENERAL HOSPITAL SUPPLY CORPORATION	235.00	Hospital Supplies
196497	1/11/2024	HEALTHCARE LOGISTICS INC	136.32	Hospital Supplies
196314	1/5/2024	HOLOGIC, INC.	1,649.00	Hospital Supplies
196498	1/11/2024	HOLOGIC, INC.	137.00	Hospital Supplies
196315	1/5/2024	HULL ANESTHESIA INC	201.00	Hospital Supplies
196499	1/11/2024	HULL ANESTHESIA INC	103.00	Hospital Supplies
196503	1/11/2024	J & J HEALTH CARE SYSTEMS INC	2,469.51	Hospital Supplies
196323	1/5/2024	KARL STORZ ENDOSCOPY-AMERICA	20,176.43	Hospital Supplies
196507	1/11/2024	KARL STORZ ENDOSCOPY-AMERICA	7,427.81	Hospital Supplies
196339	1/5/2024	M V A P MEDICAL SUPPLIES, INC.	11.55	Hospital Supplies
196329	1/5/2024	MARK COSTELLO COMPANY	1,179.66	Hospital Supplies
196330	1/5/2024	MASIMO AMERICAS, INC.	1,090.00	Hospital Supplies
196512	1/11/2024	MASIMO AMERICAS, INC.	1,330.00	Hospital Supplies
196331	1/5/2024	MCKESSON MEDICAL-SURGICAL	1,102.93	Hospital Supplies
196513	1/11/2024	MEDELA LLC	569.60	Hospital Supplies
196332	1/5/2024	MEDLINE INDUSTRIES INC	46,962.99	Hospital Supplies
196515	1/11/2024	MEDLINE INDUSTRIES INC	20,322.54	Hospital Supplies
196333	1/5/2024	MEDTRONIC, USA	5,333.34	Hospital Supplies
196516	1/11/2024	MEDTRONIC, USA	972.98	Hospital Supplies
196521	1/11/2024	NATUS MEDICAL INC	427.00	Hospital Supplies
196349	1/5/2024	OWENS & MINOR 90005430	692.36	Hospital Supplies
196351	1/5/2024	PERFORMANCE HEALTH SUPPLY INC	50.59	Hospital Supplies
196358	1/5/2024	RADIOMETER AMERICA INC	2,779.05	Hospital Supplies
196538	1/11/2024	SIEMENS HEALTHCARE DIAGNOSTICS, INC.	161.25	Hospital Supplies
196371	1/5/2024	STERIS CORPORATION	791.13	Hospital Supplies
196543	1/11/2024	STERIS CORPORATION	2,256.17	Hospital Supplies
196380	1/5/2024	TRI-ANIM HEALTH SERVICES INC	3,489.16	Hospital Supplies
196553	1/11/2024	TRI-ANIM HEALTH SERVICES INC	1,107.77	Hospital Supplies
196387	1/5/2024	VERATHON INC.	466.21	Hospital Supplies
196557	1/11/2024	VERATHON INC.	434.00	Hospital Supplies
196392	1/5/2024	WAXIE SANITARY SUPPLY	5,622.74	Hospital Supplies
196652	1/18/2024	ABBOTT NUTRITION	14.74	Hospital Supplies
196797	1/25/2024	ABBOTT NUTRITION	30.55	Hospital Supplies
196712	1/25/2024	APPLIED MEDICAL	260.50	Hospital Supplies
196583	1/18/2024	ARTHREX INC.	290.40	Hospital Supplies
196713	1/25/2024	ARTHREX INC.	7,095.00	Hospital Supplies
196717	1/25/2024	B BRAUN MEDICAL INC.	361.12	Hospital Supplies
196586	1/18/2024	BARD MEDICAL	888.00	Hospital Supplies
196714	1/25/2024	BARD MEDICAL	222.00	Hospital Supplies
196715	1/25/2024	BARD PERIPHERAL VASCULAR INC	1,975.00	Hospital Supplies

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196716	1/25/2024	BAYER HEALTHCARE LLC	866.25	Hospital Supplies
196603	1/18/2024	C R BARD INC	190.99	Hospital Supplies
196591	1/18/2024	CARDINAL HEALTH/V. MUELLER	90,367.56	Hospital Supplies
196724	1/25/2024	CARDINAL HEALTH/V. MUELLER	28,735.52	Hospital Supplies
196601	1/18/2024	COOK MEDICAL INCORPORATED	222.78	Hospital Supplies
196729	1/25/2024	COOK MEDICAL INCORPORATED	200.00	Hospital Supplies
196749	1/25/2024	HEALTHCARE LOGISTICS INC	88.64	Hospital Supplies
196751	1/25/2024	HOLGIC, INC.	4,769.00	Hospital Supplies
196616	1/18/2024	J & J HEALTH CARE SYSTEMS INC	1,672.00	Hospital Supplies
196754	1/25/2024	J & J HEALTH CARE SYSTEMS INC	8,160.70	Hospital Supplies
196620	1/18/2024	KCI USA	193.83	Hospital Supplies
196756	1/25/2024	KCI USA	1,353.61	Hospital Supplies
196807	1/25/2024	LEICA BIOSYSTEMS RICHMOND	151.00	Hospital Supplies
196777	1/25/2024	M V A P MEDICAL SUPPLIES, INC.	328.50	Hospital Supplies
196627	1/18/2024	MARKET LAB, INC	1,165.90	Hospital Supplies
196628	1/18/2024	MASIMO AMERICAS, INC.	2,660.00	Hospital Supplies
196764	1/25/2024	MASIMO AMERICAS, INC.	660.00	Hospital Supplies
196629	1/18/2024	MCKESSON MEDICAL-SURGICAL	1,373.31	Hospital Supplies
196766	1/25/2024	MCKESSON MEDICAL-SURGICAL	245.69	Hospital Supplies
196630	1/18/2024	MEDLINE INDUSTRIES INC	20,030.65	Hospital Supplies
196769	1/25/2024	MEDLINE INDUSTRIES INC	4,466.93	Hospital Supplies
196638	1/18/2024	OWENS & MINOR 90005430	312.40	Hospital Supplies
196783	1/25/2024	OWENS & MINOR 90005430	7.68	Hospital Supplies
196546	1/18/2024	RADIOMETER AMERICA INC	280.41	Hospital Supplies
196789	1/25/2024	RADIOMETER AMERICA INC	1,782.09	Hospital Supplies
196647	1/18/2024	RESPIRONICS	70.84	Hospital Supplies
196792	1/25/2024	RESPIRONICS	165.00	Hospital Supplies
196805	1/25/2024	STERIS CORPORATION	232.28	Hospital Supplies
196810	1/25/2024	TRI-ANIM HEALTH SERVICES INC	966.06	Hospital Supplies
196819	1/25/2024	WAXIE SANITARY SUPPLY	5,965.68	Hospital Supplies
EFT00000008485	1/5/2024	HARDY DIAGNOSTICS	190.27	Hospital Supplies
EFT00000008487	1/5/2024	Ovation MEDICAL	179.80	Hospital Supplies
EFT00000008493	1/5/2024	STRYKER INSTRUMENTS	593.60	Hospital Supplies
EFT00000008498	1/11/2024	BREG INC	804.01	Hospital Supplies
EFT00000008502	1/11/2024	HARDY DIAGNOSTICS	707.84	Hospital Supplies
EFT00000008512	1/18/2024	HARDY DIAGNOSTICS	5,018.44	Hospital Supplies
EFT00000008516	1/18/2024	STRYKER INSTRUMENTS	215.76	Hospital Supplies
EFT00000008520	1/25/2024	BREG INC	79.38	Hospital Supplies
EFT00000008522	1/25/2024	HARDY DIAGNOSTICS	543.86	Hospital Supplies
EFT00000008526	1/25/2024	STRYKER INSTRUMENTS	8,922.90	Hospital Supplies
196361	1/5/2024	ROCK SPRINGS IV, CENTER	2,894.68	Hospital Supplies
196473	1/11/2024	CTM BIOMEDICAL, LLC	5,091.50	Implant Supplies
196348	1/5/2024	OSSIO, INC.	15,370.00	Implant Supplies
196552	1/11/2024	TREACE MEDICAL CONCEPTS, INC.	7,028.00	Implant Supplies
196781	1/25/2024	OSSIO, INC.	3,995.00	Implant Supplies
196640	1/18/2024	PARAGON 28 INC.	6,506.00	Implant Supplies
EFT00000008486	1/5/2024	LIFENET HEALTH	3,504.00	Implant Supplies
196384	1/5/2024	PROVIDENT LIFE & ACCIDENT	31,540.21	Insurance Premiums
196412	1/6/2024	INSURANCE REFUND	20.41	Insurance Refund

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196419	1/8/2024	INSURANCE REFUND	6.13	Insurance Refund
196408	1/8/2024	INSURANCE REFUND	331.55	Insurance Refund
196407	1/8/2024	INSURANCE REFUND	730.26	Insurance Refund
196413	1/8/2024	INSURANCE REFUND	163.10	Insurance Refund
196418	1/8/2024	INSURANCE REFUND	1,575.35	Insurance Refund
196426	1/8/2024	INSURANCE REFUND	393.16	Insurance Refund
196427	1/8/2024	INSURANCE REFUND	413.19	Insurance Refund
196430	1/8/2024	INSURANCE REFUND	158.36	Insurance Refund
196431	1/8/2024	INSURANCE REFUND	136.52	Insurance Refund
196432	1/8/2024	INSURANCE REFUND	158.55	Insurance Refund
196435	1/8/2024	INSURANCE REFUND	226.10	Insurance Refund
196436	1/8/2024	INSURANCE REFUND	155.64	Insurance Refund
196437	1/8/2024	INSURANCE REFUND	71.60	Insurance Refund
196439	1/8/2024	INSURANCE REFUND	1,501.66	Insurance Refund
196440	1/8/2024	INSURANCE REFUND	321.27	Insurance Refund
196442	1/8/2024	INSURANCE REFUND	60.80	Insurance Refund
196443	1/8/2024	INSURANCE REFUND	721.41	Insurance Refund
196444	1/8/2024	INSURANCE REFUND	58.90	Insurance Refund
196445	1/8/2024	INSURANCE REFUND	1,304.52	Insurance Refund
196446	1/8/2024	INSURANCE REFUND	967.45	Insurance Refund
196447	1/8/2024	INSURANCE REFUND	90.60	Insurance Refund
196448	1/8/2024	INSURANCE REFUND	14,680.88	Insurance Refund
196415	1/8/2024	INSURANCE REFUND	51.31	Insurance Refund
196416	1/8/2024	INSURANCE REFUND	133.83	Insurance Refund
196423	1/8/2024	INSURANCE REFUND	375.19	Insurance Refund
196428	1/8/2024	INSURANCE REFUND	560.85	Insurance Refund
196429	1/8/2024	INSURANCE REFUND	239.40	Insurance Refund
196433	1/8/2024	INSURANCE REFUND	61.75	Insurance Refund
196434	1/8/2024	INSURANCE REFUND	113.20	Insurance Refund
196438	1/8/2024	INSURANCE REFUND	140.60	Insurance Refund
196441	1/8/2024	INSURANCE REFUND	56.47	Insurance Refund
196420	1/8/2024	INSURANCE REFUND	1,527.54	Insurance Refund
196409	1/8/2024	INSURANCE REFUND	19.66	Insurance Refund
196410	1/8/2024	INSURANCE REFUND	16.71	Insurance Refund
196411	1/8/2024	INSURANCE REFUND	29.18	Insurance Refund
196404	1/8/2024	INSURANCE REFUND	18.86	Insurance Refund
196414	1/8/2024	INSURANCE REFUND	7.47	Insurance Refund
196424	1/8/2024	INSURANCE REFUND	54.35	Insurance Refund
196417	1/8/2024	INSURANCE REFUND	163.47	Insurance Refund
196406	1/8/2024	INSURANCE REFUND	930.53	Insurance Refund
196421	1/8/2024	INSURANCE REFUND	1,039.69	Insurance Refund
196422	1/8/2024	INSURANCE REFUND	3,486.45	Insurance Refund
196405	1/8/2024	INSURANCE REFUND	15.32	Insurance Refund
196691	1/25/2024	INSURANCE REFUND	639.28	Insurance Refund
196676	1/25/2024	INSURANCE REFUND	155.71	Insurance Refund
196690	1/25/2024	INSURANCE REFUND	454.17	Insurance Refund
196699	1/25/2024	INSURANCE REFUND	1,190.35	Insurance Refund
196705	1/25/2024	INSURANCE REFUND	2,915.45	Insurance Refund
196672	1/18/2024	INSURANCE REFUND	790.00	Insurance Refund

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196697	1/25/2024	INSURANCE REFUND	12.89	Insurance Refund
196698	1/25/2024	INSURANCE REFUND	1,274.59	Insurance Refund
196674	1/25/2024	INSURANCE REFUND	2,377.43	Insurance Refund
196693	1/25/2024	INSURANCE REFUND	959.45	Insurance Refund
196677	1/25/2024	INSURANCE REFUND	695.18	Insurance Refund
196689	1/25/2024	INSURANCE REFUND	1,576.41	Insurance Refund
196696	1/25/2024	INSURANCE REFUND	93.10	Insurance Refund
196692	1/25/2024	INSURANCE REFUND	7.60	Insurance Refund
196336	1/5/2024	METABOLIC NEWBORN SCREENING	4,123.00	Laboratory Services
196765	1/25/2024	MAYO COLLABORATIVE SERVICES, INC.	505.88	Laboratory Services
196772	1/25/2024	METABOLIC NEWBORN SCREENING	5,388.88	Laboratory Services
196661	1/18/2024	SUMMIT PATHOLOGY	31,326.08	Laboratory Services
EFT000000008518	1/25/2024	ARUP LABORATORIES, INC.	50,672.77	Laboratory Services
196453	1/11/2024	ASSOCIATES OF CAPE COD INC	395.00	Laboratory Supplies
196288	1/5/2024	CANCER DIAGNOSTICS, INC	111.95	Laboratory Supplies
196465	1/11/2024	CARESHIELD LLC	141.64	Laboratory Supplies
196291	1/5/2024	CEPHEID	5,959.76	Laboratory Supplies
196468	1/11/2024	CEPHEID	6,800.00	Laboratory Supplies
196303	1/5/2024	FISHER HEALTHCARE	1,617.54	Laboratory Supplies
196484	1/11/2024	FISHER HEALTHCARE	3,502.29	Laboratory Supplies
196508	1/11/2024	KURIN INC.	3,500.00	Laboratory Supplies
196539	1/11/2024	SIGMA-ALDRICH INC	351.00	Laboratory Supplies
196555	1/11/2024	TYPENEX MEDICAL, LLC	366.06	Laboratory Supplies
196711	1/25/2024	ANAEROBE SYSTEMS	28.80	Laboratory Supplies
196720	1/25/2024	BIOMERIEUX, INC.	21,230.69	Laboratory Supplies
196723	1/25/2024	CANCER DIAGNOSTICS, INC	111.95	Laboratory Supplies
196396	1/18/2024	CEPHEID	15,995.00	Laboratory Supplies
196726	1/25/2024	CEPHEID	13,600.00	Laboratory Supplies
196607	1/18/2024	FISHER HEALTHCARE	4,912.80	Laboratory Supplies
196742	1/25/2024	FISHER HEALTHCARE	3,922.81	Laboratory Supplies
196762	1/25/2024	LIFELOC TECHNOLOGIES	50.00	Laboratory Supplies
196767	1/25/2024	MEDI BADGE INC.	373.89	Laboratory Supplies
196632	1/18/2024	MERCEDES MEDICAL	110.40	Laboratory Supplies
196804	1/25/2024	STATLAB MEDICAL PRODUCTS	773.31	Laboratory Supplies
EFT000000008484	1/5/2024	BIO-RAD LABORATORIES	113.79	Laboratory Supplies
EFT000000008488	1/5/2024	IDENTICARD	72.99	Laboratory Supplies
EFT000000008497	1/11/2024	BIO-RAD LABORATORIES	4,864.67	Laboratory Supplies
EFT000000008501	1/11/2024	GREER LABORATORIES, INC	230.13	Laboratory Supplies
EFT000000008503	1/11/2024	ORTHO-CLINICAL DIAGNOSTICS INC	1,201.85	Laboratory Supplies
EFT000000008509	1/18/2024	BIO-RAD LABORATORIES	295.74	Laboratory Supplies
EFT000000008519	1/25/2024	BIO-RAD LABORATORIES	3,063.00	Laboratory Supplies
EFT000000008523	1/25/2024	ORTHO-CLINICAL DIAGNOSTICS INC	13,000.00	Laboratory Supplies
196763	1/25/2024	MARTIN-RAY LAUNDRY SYSTEMS	716.47	Laundry Supplies
196456	1/11/2024	BARRY J. WALKER	243.29	Legal Fees
196393	1/5/2024	WELBORN SULLIVAN MECK & TOOLEY, P.C.	11,537.50	Legal Fees
196400	1/5/2024	WY DEPARTMENT OF AUDIT	25.00	Licenses & Taxes
196345	1/5/2024	NEW YORK LIFE INSURANCE COMPANY	2,297.32	Life Insurance
196802	1/25/2024	STANDARD TEXTILE	1,057.56	Linen
196450	1/11/2024	AGILITY SURGICAL EQUIPMENT REPAIR INC.	5,552.34	Maintenance & Repair



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196474	1/11/2024	CUMMINS ROCKY MOUNTAIN, LLC	1,793.60	Maintenance & Repair
196487	1/11/2024	FREMONT MOTORS	832.79	Maintenance & Repair
196311	1/5/2024	HIGH SECURITY LOCK & ALARM	15.00	Maintenance & Repair
196320	1/5/2024	JIN'S UPHOLSTERY	1,050.00	Maintenance & Repair
196325	1/5/2024	LEAF	2,670.00	Maintenance & Repair
196350	1/5/2024	PARTSSOURCE	516.14	Maintenance & Repair
196360	1/5/2024	RICHARD WOLF MEDICAL INST CORP	936.87	Maintenance & Repair
196542	1/11/2024	STEALTH TECHNOLOGIES	1,238.24	Maintenance & Repair
196546	1/11/2024	SURFACES	499.00	Maintenance & Repair
196376	1/5/2024	SWEETWATER PLUMBING & HEATING	142.55	Maintenance & Repair
196394	1/5/2024	WELCH ALLYN, INC	200.00	Maintenance & Repair
196624	1/18/2024	LEAF	2,670.00	Maintenance & Repair
196780	1/25/2024	CHLIN SALES INC.	163.58	Maintenance & Repair
196643	1/18/2024	P M AUTO GLASS, INC.	35.00	Maintenance & Repair
196641	1/18/2024	PARTSSOURCE	1,175.85	Maintenance & Repair
196666	1/18/2024	UNETIXS VASCULAR INC.	1,040.36	Maintenance & Repair
196816	1/25/2024	VAUGHNS PLUMBING & HEATING	267.50	Maintenance & Repair
EFT00000008490	1/5/2024	SERVCO	4,950.00	Maintenance & Repair
EFT00000008499	1/11/2024	COLORADO DOORWAYS, INC	2,064.92	Maintenance & Repair
EFT00000008504	1/11/2024	SERVCO	674.00	Maintenance & Repair
196296	1/5/2024	CODALE ELECTRIC SUPPLY, INC	38.92	Maintenance Supplies
196307	1/5/2024	GRAINGER	1,281.18	Maintenance Supplies
196494	1/11/2024	GRAINGER	392.43	Maintenance Supplies
196533	1/11/2024	ROCK SPRINGS WINNELSON CO	1,280.40	Maintenance Supplies
196556	1/11/2024	US PLASTIC PALLETS & HANDLING, INC	975.00	Maintenance Supplies
196727	1/25/2024	CODALE ELECTRIC SUPPLY, INC	150.34	Maintenance Supplies
196611	1/18/2024	GRAINGER	91.43	Maintenance Supplies
196614	1/18/2024	HOME DEPOT	581.80	Maintenance Supplies
196752	1/25/2024	HOME DEPOT	869.99	Maintenance Supplies
196758	1/25/2024	KIMBALL MIDWEST	1,091.00	Maintenance supplies
196650	1/18/2024	ROCK SPRINGS WINNELSON CO	418.53	Maintenance Supplies
196796	1/25/2024	ROCK SPRINGS WINNELSON CO	588.14	Maintenance Supplies
EFT00000008507	1/18/2024	ACE HARDWARE	254.70	Maintenance Supplies
EFT00000008524	1/25/2024	SHERWIN WILLIAMS CO	59.68	Maintenance Supplies
196523	1/11/2024	PURPLE LIZARDS, LLC	3,017.00	Marketing & Promotional Supplies
196787	1/25/2024	PURPLE LIZARDS, LLC	632.50	Marketing & Promotional Supplies
EFT00000008511	1/18/2024	DANIEL'S JEWELRY, INC	3,182.40	Marketing & Promotional Supplies
196308	1/5/2024	GREEN RIVER CHAMBER OF COMMERCE	1,865.00	Membership Fee
196374	1/5/2024	SUBLETTE COUNTY CHAMBER OF COMMERCE	330.00	Membership Fee
196265	1/2/2024	MHSC-FOUNDATION	1,542.80	MHSC Foundation
196570	1/16/2024	MHSC-FOUNDATION	1,520.30	MHSC Foundation
196773	1/25/2024	MHSC-FOUNDATION	500.00	MHSC Foundation
196828	1/30/2024	MHSC-FOUNDATION	1,518.68	MHSC Foundation
196282	1/5/2024	AXON ENTERPRISES, INC.	31.30	Minor Equipment
196470	1/11/2024	COLORID, LLC	310.00	Minor Equipment
196669	1/18/2024	WORLDPOINT ECC, INC.	46.80	Minor Equipment
196379	1/5/2024	TERMINIX OF WYOMING	511.00	Monthly Pest Control
196281	1/5/2024	A TOUCH OF CLASS	135.95	Non Medical Supplies
196321	1/5/2024	JJ. KELLER & ASSOCIATES, INC.	265.62	Non Medical Supplies

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196347	1/5/2024	OPTUM360 LLC	487.40	Non Medical Supplies
196522	1/11/2024	OPTUM360 LLC	289.85	Non Medical Supplies
196584	1/18/2024	A TOUCH OF CLASS	163.00	Non Medical Supplies
196589	1/18/2024	BROWN INDUSTRIES INC	61.08	Non Medical Supplies
196610	1/18/2024	GLOBAL EQUIPMENT COMPANY	559.90	Non Medical Supplies
196637	1/18/2024	OPTUM360 LLC	829.65	Non Medical Supplies
196657	1/18/2024	SMILEMAKERS	517.55	Non Medical Supplies
196479	1/11/2024	ENCOMPASS GROUP, LLC	358.56	Office Supplies
196509	1/11/2024	LABELMATCH	200.88	Office Supplies
196540	1/11/2024	STANDARD REGISTER COMPANY	1,398.29	Office Supplies
196370	1/5/2024	STAPLES BUSINESS ADVANTAGE	3,885.02	Office Supplies
196541	1/11/2024	STAPLES BUSINESS ADVANTAGE	963.56	Office Supplies
196738	1/25/2024	ENCOMPASS GROUP, LLC	1,290.00	Office Supplies
196621	1/18/2024	LABELMATCH	256.48	Office Supplies
196659	1/18/2024	STAPLES BUSINESS ADVANTAGE	1,538.55	Office Supplies
196803	1/25/2024	STAPLES BUSINESS ADVANTAGE	1,006.39	Office Supplies
EFT00000008505	1/11/2024	SMYTH PRINTING	378.00	Office Supplies
EFT00000008514	1/18/2024	SMYTH PRINTING	2,608.75	Office Supplies
EFT00000008495	1/11/2024	4IMPRINT, INC.	3,478.20	Other Employee Benefits
EFT00000008521	1/25/2024	CASTLE ROCK HSP DIST	4,134.60	Other Purchased Services
196395	1/5/2024	COMPUTERSHARE TRUST COMPANY	3,000.00	Other Purchased Services
196293	1/5/2024	CJ SIGNS	150.00	Other Purchased Services
196326	1/5/2024	QUICK RESPONSE TAXI	264.00	Other Purchased Services
196511	1/11/2024	QUICK RESPONSE TAXI	76.00	Other Purchased Services
196625	1/18/2024	QUICK RESPONSE TAXI	379.00	Other Purchased Services
196760	1/25/2024	QUICK RESPONSE TAXI	179.00	Other Purchased Services
EFT00000008483	1/5/2024	AIRGAS INTERMOUNTAIN INC	6,441.29	Oxygen Rental
EFT00000008496	1/11/2024	AIRGAS INTERMOUNTAIN INC	268.59	Oxygen Rental
EFT00000008508	1/18/2024	AIRGAS INTERMOUNTAIN INC	408.59	Oxygen Rental
EFT00000008517	1/25/2024	AIRGAS INTERMOUNTAIN INC	174.16	Oxygen Rental
196425	1/5/2024	PATIENT REFUND	493.19	Patient Refund
196565	1/11/2024	PATIENT REFUND	25.24	Patient Refund
196402	1/5/2024	PATIENT REFUND	51.91	Patient Refund
196675	1/25/2024	PATIENT REFUND	100.00	Patient Refund
196686	1/25/2024	PATIENT REFUND	475.00	Patient Refund
196687	1/25/2024	PATIENT REFUND	50.00	Patient Refund
196673	1/25/2024	PATIENT REFUND	1,284.56	Patient Refund
196694	1/25/2024	PATIENT REFUND	1,500.00	Patient Refund
196683	1/25/2024	PATIENT REFUND	100.00	Patient Refund
196702	1/25/2024	PATIENT REFUND	200.14	Patient Refund
196703	1/25/2024	PATIENT REFUND	194.48	Patient Refund
196684	1/25/2024	PATIENT REFUND	780.85	Patient Refund
196688	1/25/2024	PATIENT REFUND	400.00	Patient Refund
196704	1/25/2024	PATIENT REFUND	159.61	Patient Refund
196695	1/25/2024	PATIENT REFUND	375.00	Patient Refund
196685	1/25/2024	PATIENT REFUND	628.50	Patient Refund
196679	1/25/2024	PATIENT REFUND	1,095.00	Patient Refund
196680	1/25/2024	PATIENT REFUND	877.00	Patient Refund
196681	1/25/2024	PATIENT REFUND	870.00	Patient Refund



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196701	1/25/2024	PATIENT REFUND	506.40	Patient Refund
196706	1/25/2024	PATIENT REFUND	25.00	Patient Refund
196682	1/25/2024	PATIENT REFUND	204.87	Patient Refund
196678	1/25/2024	PATIENT REFUND	1,634.78	Patient Refund
196268	1/2/2024	UNITED WAY OF SWEETWATER COUNTY	648.68	Payroll Deduction
196573	1/16/2024	UNITED WAY OF SWEETWATER COUNTY	276.68	Payroll Deduction
196831	1/30/2024	UNITED WAY OF SWEETWATER COUNTY	276.68	Payroll Deduction
196261	1/2/2024	CIRCUIT COURT 3RD JUDICIAL	174.55	Payroll Garnishment
196262	1/2/2024	CIRCUIT COURT 3RD JUDICIAL	302.25	Payroll Garnishment
196263	1/2/2024	CIRCUIT COURT 3RD JUDICIAL	240.85	Payroll Garnishment
196568	1/16/2024	CIRCUIT COURT 3RD JUDICIAL	348.51	Payroll Garnishment
196569	1/16/2024	CIRCUIT COURT 3RD JUDICIAL	646.79	Payroll Garnishment
196266	1/2/2024	STATE OF WYOMING DFS/CSES	1,272.78	Payroll Garnishment
196571	1/16/2024	STATE OF WYOMING DFS/CSES	1,884.78	Payroll Garnishment
196269	1/2/2024	SWEETWATER CIRCUIT COURT-RS	428.40	Payroll Garnishment
196270	1/2/2024	SWEETWATER CIRCUIT COURT-RS	323.03	Payroll Garnishment
196271	1/2/2024	SWEETWATER CIRCUIT COURT-RS	355.53	Payroll Garnishment
196574	1/16/2024	SWEETWATER CIRCUIT COURT-RS	611.40	Payroll Garnishment
196575	1/16/2024	SWEETWATER CIRCUIT COURT-RS	336.62	Payroll Garnishment
196576	1/16/2024	SWEETWATER CIRCUIT COURT-RS	366.53	Payroll Garnishment
196267	1/2/2024	TX CHILD SUPPORT SDU	461.54	Payroll Garnishment
196572	1/16/2024	TX CHILD SUPPORT SDU	461.54	Payroll Garnishment
196822	1/30/2024	CIRCUIT COURT 3RD JUDICIAL	326.12	Payroll Garnishment
196823	1/30/2024	CIRCUIT COURT 3RD JUDICIAL	280.04	Payroll Garnishment
196824	1/30/2024	CIRCUIT COURT 3RD JUDICIAL	646.95	Payroll Garnishment
196829	1/30/2024	STATE OF WYOMING DFS/CSES	2,039.39	Payroll Garnishment
196825	1/30/2024	SWEETWATER CIRCUIT COURT-RS	26.21	Payroll Garnishment
196826	1/30/2024	SWEETWATER CIRCUIT COURT-RS	311.96	Payroll Garnishment
196827	1/30/2024	SWEETWATER CIRCUIT COURT-RS	345.67	Payroll Garnishment
196830	1/30/2024	TX CHILD SUPPORT SDU	461.54	Payroll Garnishment
W/T	1/16/2024	PAYROLL 1	1,800,000.00	Payroll Transfer
W/T	1/29/2024	PAYROLL 2	1,800,000.00	Payroll Transfer
196774	1/25/2024	MHSC - PETTY CASH	52.50	Petty Cash
196290	1/5/2024	CARDINAL HEALTH PHARMACY MGMT	1,237,131.53	Pharmacy Management
196592	1/18/2024	CARDINAL HEALTH PHARMACY MGMT	7,491.12	Pharmacy Management
196313	1/5/2024	HOLIDAY INN EXPRESS - LONE TREE HOSPITALITY, LLC	5,324.96	Physician Recruitment
196272	1/5/2024	ADVANCED MEDICAL IMAGING, LLC	20,018.00	Physician Services
196297	1/5/2024	COMPHEALTH, INC.	15,270.58	Physician Services
196397	1/5/2024	DR. W. MARCUS BRANN	10,662.00	Physician Services
196390	1/5/2024	DR. WAGNER VERONESE	14,000.00	Physician Services
196309	1/5/2024	HAYES LOCUMS, LLC	43,821.83	Physician Services
196327	1/5/2024	LOCUM TENENS.COM	54,378.00	Physician Services
196519	1/11/2024	MOUNTAIN STATES MEDICAL PHYSICS	12,207.46	Physician Services
196338	1/5/2024	MPLT HEALTHCARE, LLC	15,000.00	Physician Services
196809	1/25/2024	THE SLEEP SPECIALISTS	7,350.00	Physician Services
196813	1/25/2024	UNIVERSITY OF UTAH (UJHC OUTREACH)	118,983.06	Physician Services
196707	1/25/2024	AIDVANTAGE	2,500.00	Physician Student Loan
196747	1/25/2024	GREAT LAKES	1,666.67	Physician Student Loan
196748	1/25/2024	GREAT LAKES EDUCATION LOAN SERVICES	1,666.67	Physician Student Loan

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196734	1/25/2024	MOHELA	3,333.34	Physician Student Loan
196735	1/25/2024	MOHELA	1,666.67	Physician Student Loan
196778	1/25/2024	US DEPARTMENT OF EDUCATION	1,666.67	Physician Student Loan
196815	1/25/2024	US DEPARTMENT OF EDUCATION	4,166.67	Physician Student Loan
196566	1/12/2024	POSTMASTER	1,580.00	Postage
196665	1/18/2024	UMIA INSURANCE, INC	133,428.00	Professional Liability Insurance
196274	1/5/2024	ALSCO AMERICAN LINEN	85.12	Professional Service
196294	1/5/2024	CLEANIQUE PROFESSIONAL SERVICES	6,450.00	Professional Service
196322	1/5/2024	JOINT COMMISSION RESOURCES	16,175.00	Professional Service
196505	1/11/2024	JOINT COMMISSION RESOURCES	10,000.00	Professional Service
196514	1/11/2024	MEDICAL PHYSICS CONSULTANTS, INC	2,250.00	Professional Service
196369	1/5/2024	ST+B ENGINEERING	15,974.89	Professional Service
196710	1/25/2024	ALSCO AMERICAN LINEN	85.12	Professional Service
196581	1/18/2024	AMERICAN COLLEGE OF RADIOLOGY	500.00	Professional Service
196740	1/25/2024	CE BROKER	304.78	Professional Service
196599	1/18/2024	CLEANIQUE PROFESSIONAL SERVICES	5,600.00	Professional Service
196623	1/18/2024	CLIFTON LARSON ALLEN LLP	56,664.99	Professional Service
196639	1/18/2024	P3 CONSULTING LLC	4,140.00	Professional Service
196790	1/25/2024	RAVE WIRELESS, INC	4,698.67	Professional Service
196670	1/18/2024	WYOMING DEPARTMENT OF HEALTH	282.00	Professional Service
EFT000000008494	1/5/2024	WESTERN STAR COMMUNICATIONS	678.00	Professional Service
196600	1/18/2024	COLLEGE OF AMERICAN PATHOLOGY	27,782.31	Proficiency Testing
EFT000000008513	1/18/2024	LANDAUER INC	119.90	Radiation Monitoring
196335	1/5/2024	MERRY X-RAY	207.15	Radiology Film
196517	1/11/2024	MERRY X-RAY	33.69	Radiology Film
196634	1/18/2024	MERRY X-RAY	57.38	Radiology Film
196461	1/11/2024	BRACCO DIAGNOSTICS INC	1,102.14	Radiology Material
196491	1/11/2024	GE HEALTHCARE INC	2,782.20	Radiology Material
196510	1/11/2024	LANTHEUS MEDICAL IMAGING, INC	4,251.04	Radiology Material
196721	1/25/2024	BRACCO DIAGNOSTICS INC	265.25	Radiology Material
196784	1/25/2024	PHARMALOGIC WY, LTD	5,428.62	Radiology Material
196364	1/5/2024	DR SAMER KATTAN	800.00	Reimbursement - CME
196283	1/5/2024	DR. BANU SYMINGTON	826.14	Reimbursement - CME
196287	1/5/2024	DR. BRIANNE CROFTS	1,825.00	Reimbursement - CME
196463	1/11/2024	DR. BRYTON LONG	1,500.00	Reimbursement - CME
196475	1/11/2024	DR. DAVID DANSIE	593.00	Reimbursement - CME
196506	1/11/2024	DR. JOSHUA BINIKS	3,331.24	Reimbursement - CME
196560	1/11/2024	DR. WILLIAM SARETTE	1,380.82	Reimbursement - CME
196377	1/5/2024	TAMARA WALKER, FNP	3,778.85	Reimbursement - CME
196378	1/5/2024	TENNY HANSON	233.18	Reimbursement - CME
196654	1/18/2024	DR SAMER KATTAN	160.78	Reimbursement - CME
196585	1/18/2024	DR. BANU SYMINGTON	199.42	Reimbursement - CME
196604	1/18/2024	EMILY JAMES	357.00	Reimbursement - CME
196618	1/18/2024	JULIANNE FORRESTER	6,382.11	Reimbursement - CME
196619	1/18/2024	KATHERINE MOCZULSKI	1,883.00	Reimbursement - CME
196631	1/18/2024	MELISSA JEWELL	4,955.99	Reimbursement - CME
196276	1/5/2024	AMELIA CUEVAS	260.00	Reimbursement - Education & Travel
196318	1/5/2024	DR. JANENE GLYN	157.37	Reimbursement - Education & Travel
196504	1/11/2024	DR. JANENE GLYN	1,924.67	Reimbursement - Education & Travel

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196359	1/5/2024	DR. RASHEEL CHOWDHARY	1,746.48	Reimbursement - Education & Travel
196526	1/11/2024	DR. RAZVAN DUCU	1,260.84	Reimbursement - Education & Travel
196396	1/5/2024	DR. WILLIAM SARETTE	600.00	Reimbursement - Education & Travel
196530	1/11/2024	ROBIN SNOWBERGER	72.06	Reimbursement - Education & Travel
196588	1/18/2024	BRITTANY SOLTIS	293.73	Reimbursement - Education & Travel
196594	1/18/2024	CARRIE CAMESTORP	2,000.00	Reimbursement - Education & Travel
196598	1/18/2024	CHRISTIAN RODDA	79.80	Reimbursement - Education & Travel
196636	1/18/2024	MINDY BYRD	90.06	Reimbursement - Education & Travel
196662	1/18/2024	TAMMIE HENDERSON	27.36	Reimbursement - Education & Travel
196452	1/11/2024	BRITTANY YARBER	286.02	Reimbursement - Insurance Premiums
196319	1/5/2024	JANICE VARLEY	86.88	Reimbursement - Insurance Premiums
196617	1/18/2024	JOSEPH J. OLIVER, M.D.	1,010.72	Reimbursement - Insurance Premiums
196275	1/5/2024	AMBER FISK	22.20	Reimbursement - Non Hospital Supplies
196577	1/18/2024	AIMEE URBIN	131.45	Reimbursement - Non Hospital Supplies
196755	1/25/2024	JULIA KERSHISNIK SWEEDLER	42.29	Reimbursement - Non Hospital Supplies
196761	1/25/2024	LESUE TAYLOR	189.93	Reimbursement - Non Hospital Supplies
196775	1/25/2024	MISTY COZAD	241.41	Reimbursement - Non Hospital Supplies
196794	1/25/2024	ROBIN SNOWBERGER	42.00	Reimbursement - Payroll
196477	1/11/2024	DENISE LONG	3.03	Reimbursement - Payroll
196776	1/25/2024	MONTE GARRETT	63.59	Reimbursement - Uniforms
W/T	1/12/2024	PCS 12/21/23	165,352.74	Retirement
W/T	1/16/2024	PCS 1/4/24	219,100.68	Retirement
W/T	1/29/2024	PCS 1/18/24	244,810.12	Retirement
196337	1/5/2024	MHSC MEDICAL STAFF	550.00	Scholarship
196518	1/11/2024	MHSC MEDICAL STAFF	308.00	Scholarship
196635	1/18/2024	MHSC MEDICAL STAFF	450.00	Scholarship
196551	1/11/2024	VITASCRIPITUM LLC	1,961.85	Scribe Services
196277	1/5/2024	APPLIED STATISTICS & MANAGEMENT, INC.	16,000.00	Software
196328	1/5/2024	MAIN ST. PINE DALE	1,000.00	Sponsorship
196278	1/5/2024	ARMSTRONG MEDICAL INDUSTRIES	90.00	Surgery Supplies
196451	1/11/2024	ARMSTRONG MEDICAL INDUSTRIES	114.00	Surgery Supplies
196285	1/5/2024	BECTON DICKINSON	5,423.50	Surgery Supplies
196458	1/11/2024	BECTON DICKINSON	533.00	Surgery Supplies
196298	1/5/2024	CONMED LINVATEC	126.65	Surgery Supplies
196471	1/11/2024	CONMED LINVATEC	441.03	Surgery Supplies
196472	1/11/2024	COVIDIEN SALES LLC, DBA GIVEN IMAGING	1,522.82	Surgery Supplies
196480	1/11/2024	EQUASHIELD LLC	1,127.36	Surgery Supplies
196317	1/5/2024	INTUITIVE SURGICAL INC.	8,745.95	Surgery Supplies
196502	1/11/2024	INTUITIVE SURGICAL INC.	24,398.04	Surgery Supplies
196334	1/5/2024	MERCURY MEDICAL	210.24	Surgery Supplies
196520	1/11/2024	MUSCULOSKELETAL TRANSPLANT FOUNDATION	970.20	Surgery Supplies
196340	1/5/2024	NANOSONICS, INC	20.00	Surgery Supplies
196341	1/5/2024	NEOGEN CORPORATION	1,590.00	Surgery Supplies
196544	1/11/2024	STRYKER ENDOSCOPY	454.97	Surgery Supplies
196373	1/5/2024	STRYKER ORTHOPAEDICS	53,466.12	Surgery Supplies
196545	1/11/2024	STRYKER ORTHOPAEDICS	24,182.61	Surgery Supplies
196547	1/11/2024	SURGISHOP	2,700.00	Surgery Supplies
196549	1/11/2024	TELEFLEX LLC	739.00	Surgery Supplies
196381	1/5/2024	TRICOR SYSTEMS INC.	670.00	Surgery Supplies

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
GENERAL FUND DISBURSEMENTS  
1/31/2024

196563	1/11/2024	XODUS MEDICAL, INC.	1,423.00	Surgery Supplies
196564	1/11/2024	ZIMMER BIOMET	3,192.00	Surgery Supplies
196708	1/25/2024	ALI MED INC	530.37	Surgery Supplies
196709	1/25/2024	ALK ABELLO, INC.	343.32	Surgery Supplies
196580	1/18/2024	ALTA MEDICAL SPECIALTIES	247.11	Surgery Supplies
196582	1/18/2024	ARMSTRONG MEDICAL INDUSTRIES	770.00	Surgery Supplies
196587	1/18/2024	BECTON DICKINSON	3,767.98	Surgery Supplies
196718	1/25/2024	BECTON DICKINSON	2,881.86	Surgery Supplies
196590	1/18/2024	BSN MEDICAL, INC.	136.00	Surgery Supplies
196731	1/25/2024	COVIDIEN SALES LLC, DBA GIVEN IMAGING	10,448.64	Surgery Supplies
196736	1/25/2024	DIRECT SUPPLY	870.93	Surgery Supplies
196739	1/25/2024	EQUASHIELD LLC	1,606.56	Surgery Supplies
196768	1/25/2024	MEDICAL PACKAGING LLC	109.65	Surgery Supplies
196770	1/25/2024	MERCURY MEDICAL	424.62	Surgery Supplies
196633	1/18/2024	MERIT MEDICAL SYSTEMS, INC	287.40	Surgery Supplies
196648	1/18/2024	RHYTHMLINK INTERNATIONAL LLC	84.00	Surgery Supplies
196658	1/18/2024	SMITH & NEPHEW ENDOSCOPY INC	498.58	Surgery Supplies
196801	1/25/2024	SMITH & NEPHEW ENDOSCOPY INC	1,007.96	Surgery Supplies
196660	1/18/2024	STRYKER ORTHOPAEDICS	40,868.98	Surgery Supplies
196806	1/25/2024	STRYKER ORTHOPAEDICS	33,085.10	Surgery Supplies
EFT000000008510	1/18/2024	COOPER SURGICAL	1,040.78	Surgery Supplies
196644	1/18/2024	PRESS GANEY ASSOCIATES, INC	4,789.33	Surveys
196615	1/18/2024	INSYNC	8.50	Translation Services
196759	1/25/2024	LANGUAGE LINE SERVICES	2,636.64	Translation Services
196355	1/5/2024	QUARTERMASTER	128.11	Uniforms
196524	1/11/2024	QUARTERMASTER	1,501.95	Uniforms
196280	1/5/2024	AT&T	42.80	Utilities
196454	1/11/2024	AT&T	49.69	Utilities
196455	1/11/2024	AT&T	240.67	Utilities
196357	1/5/2024	CENTURY LINK	6,339.74	Utilities
196525	1/11/2024	CENTURY LINK	1,394.44	Utilities
196356	1/5/2024	DOMINION ENERGY WYOMING	56,437.34	Utilities
196531	1/11/2024	ROCK SPRINGS MUNICIPAL UTILITY	11,740.63	Utilities
196362	1/5/2024	ROCKY MOUNTAIN POWER	42,852.87	Utilities
196579	1/18/2024	ALL WEST COMMUNICATIONS	6,009.93	Utilities
196788	1/25/2024	CENTURY LINK	380.87	Utilities
196737	1/25/2024	DISH NETWORK LLC	102.64	Utilities
196645	1/18/2024	DOMINION ENERGY WYOMING	64,005.86	Utilities
196651	1/18/2024	ROCKY MOUNTAIN POWER	42,253.06	Utilities
196820	1/25/2024	WHITE MOUNTAIN WATER & SEWER DISTRICT	63.25	Utilities
196372	1/5/2024	STERICYCLE, INC.	1,669.14	Waste Disposal
196483	1/11/2024	FIBERTECH	2,117.00	Window Cleaning
W/T	1/10/2024	DEPT OF WORKFORCE SERVICES	102,960.22	Workman's Comp
			9,934,697.61	

**Memorial Hospital of Sweetwater County  
County Voucher Summary  
as of month ending January 31, 2024**

<b>Vouchers Submitted by MHSC at agreed discounted rate</b>	
July 2023	\$0.00
August 2023	\$49,254.59
September 2023	\$0.00
October 2023	\$27,913.61
November 2023	\$7,018.05
December 2023	\$0.00
January 2024	\$0.00
February 2024	
March 2024	
April 2024	
May 2024	
June 2024	
<b>County Requested Total Vouchers Submitted</b>	<b>\$84,186.25</b>
<b>Total Vouchers Submitted FY 24</b>	<b>\$84,186.25</b>
<b>Less: Total Approved by County and Received by MHSC FY 24</b>	<b>\$84,186.25</b>
<b>Total Vouchers Pending Approval by County</b>	<b>\$0.00</b>

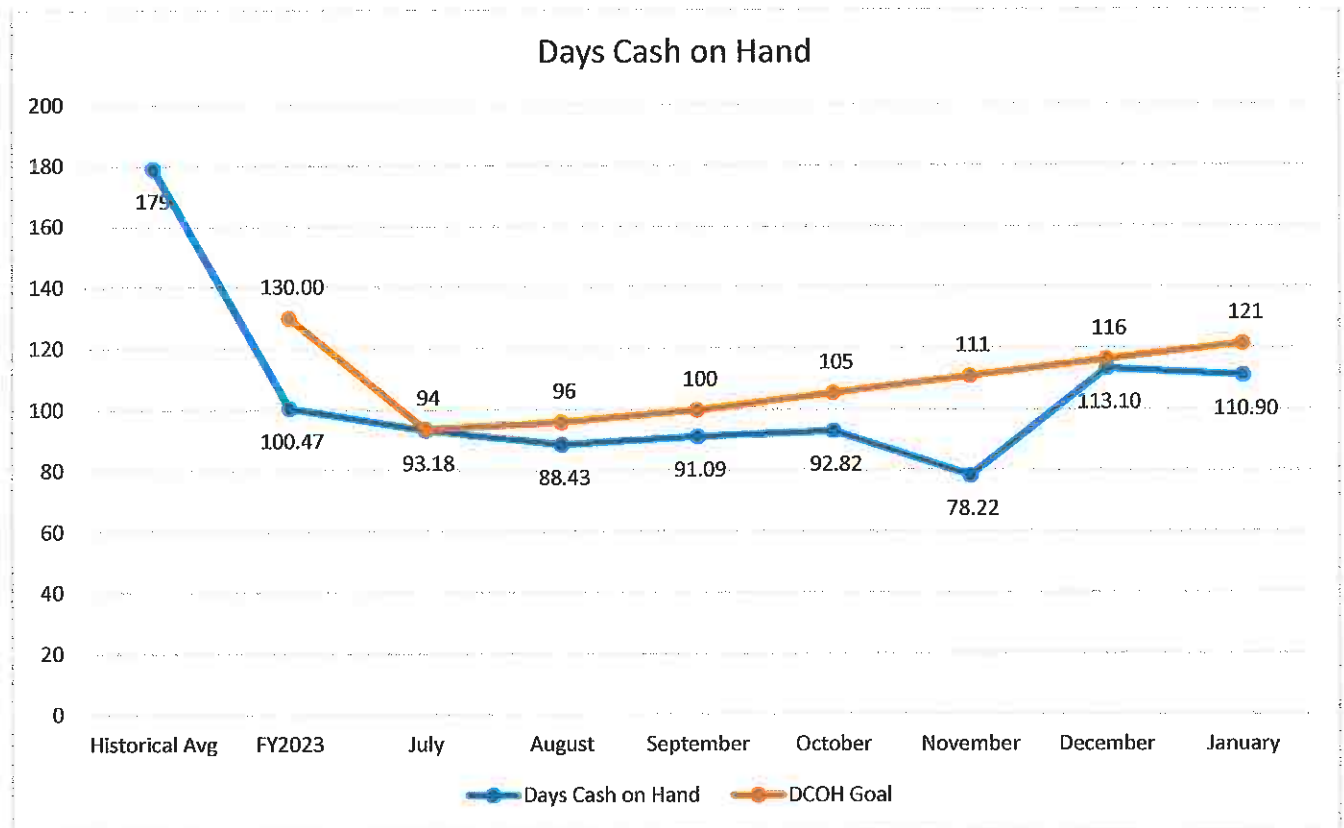
<b>FY24 Title 25 Fund Budget from Sweetwater County</b>	<b>\$471,488.00</b>
<b>Funds Received From Sweetwater County</b>	<b>\$84,186.25</b>
<b>FY24 Title 25 Fund Budget Remaining</b>	<b>\$387,301.75</b>
<b>Total Budgeted Vouchers Pending Submittal to County</b>	<b>\$0.00</b>

<b>FY24 Maintenance Fund Budget from Sweetwater County</b>	<b>\$1,448,215.00</b>
County Maintenance FY24 - July	\$0.00
County Maintenance FY24 - August	\$197,516.66
County Maintenance FY24 - September	\$0.00
County Maintenance FY24 - October	\$21,575.13
County Maintenance FY24 - November	\$20,665.42
County Maintenance FY24 - December	\$0.00
County Maintenance FY24 - January	\$100,431.64
County Maintenance FY24 - February	
County Maintenance FY24 - March	
County Maintenance FY24 - April	
County Maintenance FY24 - May	
County Maintenance FY24 - June	
	<b>\$340,188.85</b>
<b>FY24 Maintenance Fund Budget Remaining</b>	<b>\$1,108,026.15</b>

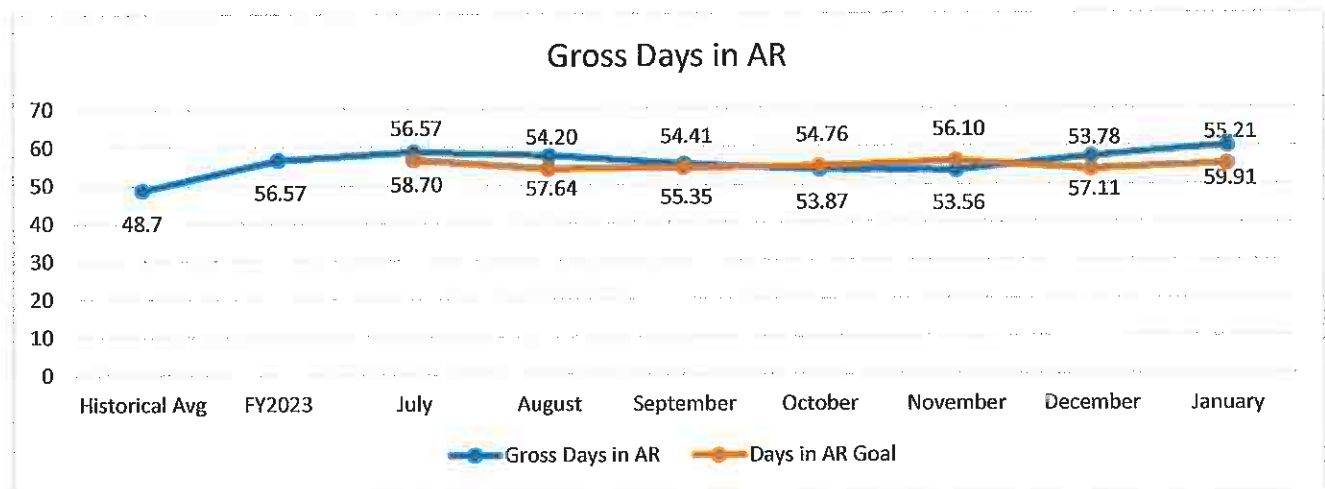


**Financial Goals – Fiscal Year 2024.** We have chosen four financial metrics to focus on for the current fiscal year: Days Cash on Hand (DCOH), Days in Accounts Receivable (AR), Cash Collections and Claims Denial Rate. We have included the historical average of 18 months prior to Cerner implementation, if available, and FYE 2023 for reference.

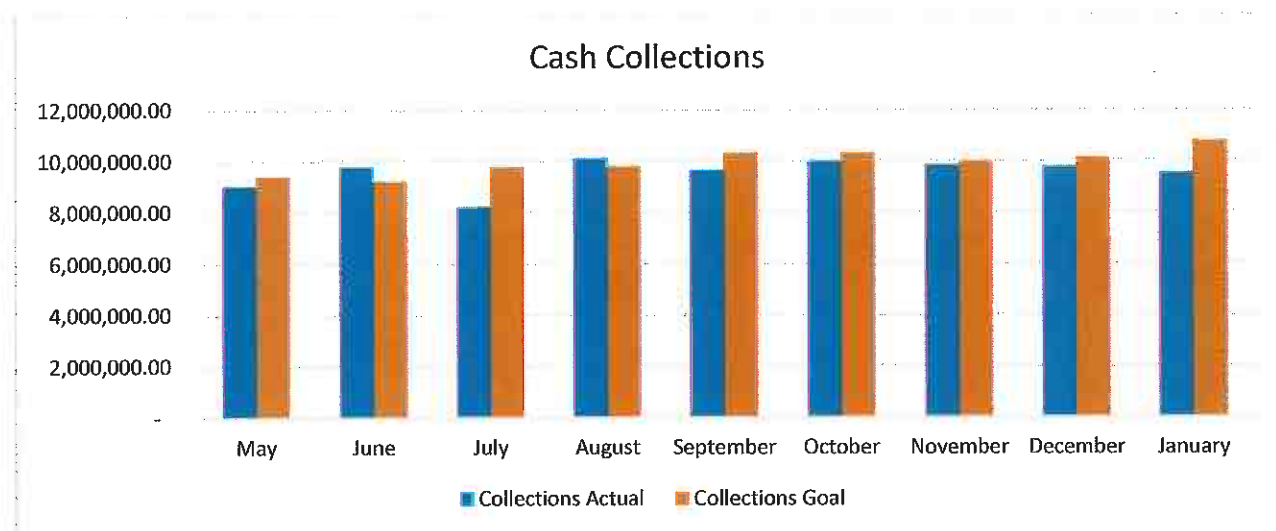
- **Days Cash on Hand** represents the number of days the hospital can operate without cash receipts utilizing all sources of cash available. We have set interim goals of 100 days for September, 116 days for December, 132 days for March and 139 days for year end.
  - We saw a decrease in DCOH of 2 days with the lower collection month and slight increase in our daily cash expense. Cash collections came in under budget, at \$9.5 million. Daily cash expense increased to \$300,500 in January.



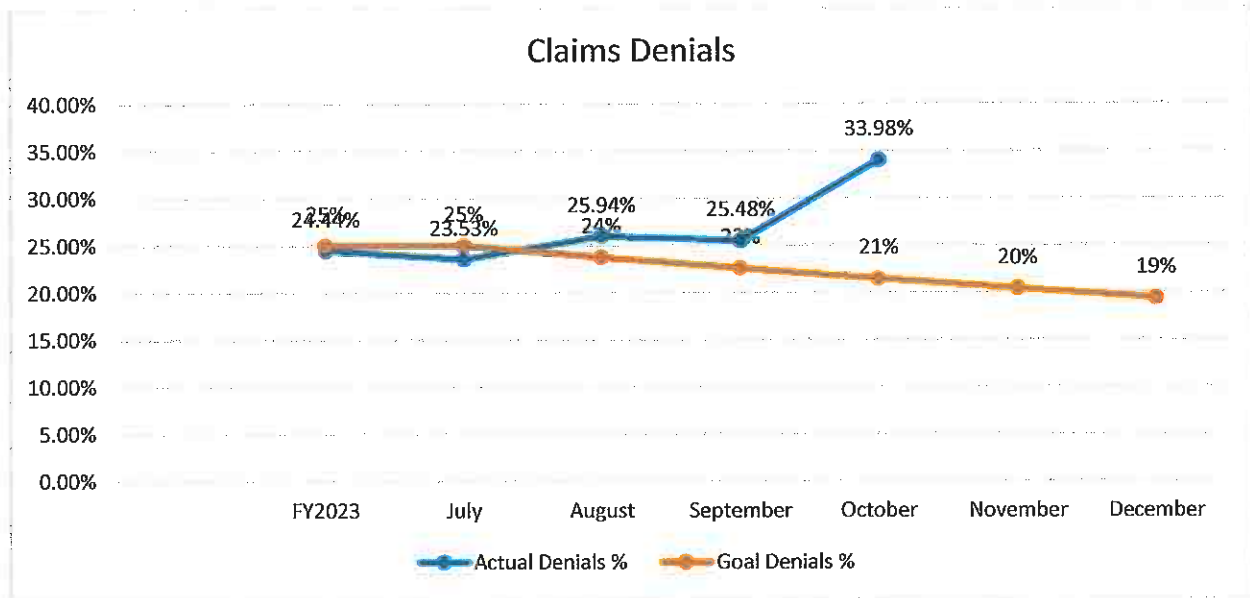
- **Days in Accounts Receivable** represents the number of days of patient charges tied up in unpaid patient accounts. We have set interim goals of 54.4 days for September, 53.8 days for December, 48.6 for March and 47.7 by year end.
  - We use a 3-month average calculation in the financial statements for this metric. Days in AR for January increased due to the increase in AR and came in at 59.9, missing the goal for the month.



- **Cash Collections** – The goal for cash collections is 47.5% of the average gross revenue of the two prior months. This is the inverse ratio of budgeted reductions of revenue.
  - Cash collections for January were \$9.51 million, under budget by \$1,200,000.

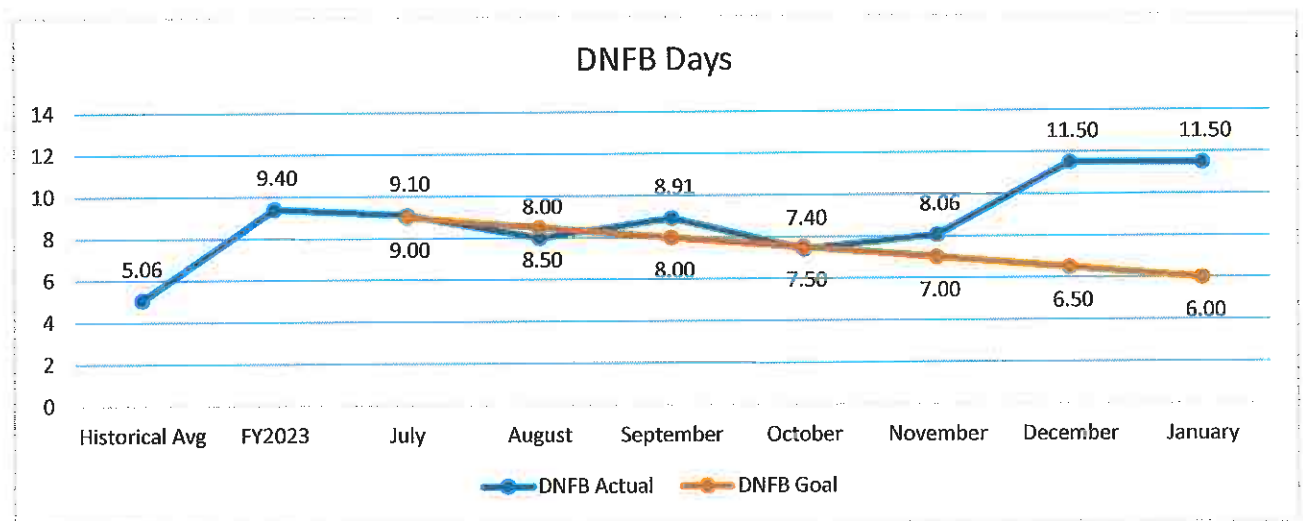


- **Denial Rate** – The denial rate is the percentage of all submitted claims denied by payers. A lower denial rate means improved cash flow. Current state and national benchmarks are at 15%.
  - At the end of FY2023, our denial rate was 24.4%. We are working with CLA to track our denial rate through their BI dashboard using actual claims information. We continue to work with CLA on action plans around denials management and will report monthly.



**Revenue Cycle Goals – Fiscal Year 2024** - We have also set goals for specific financial metrics impacting the revenue cycle, DNFB Days, Total AR Aging and Payer Specific Aging.

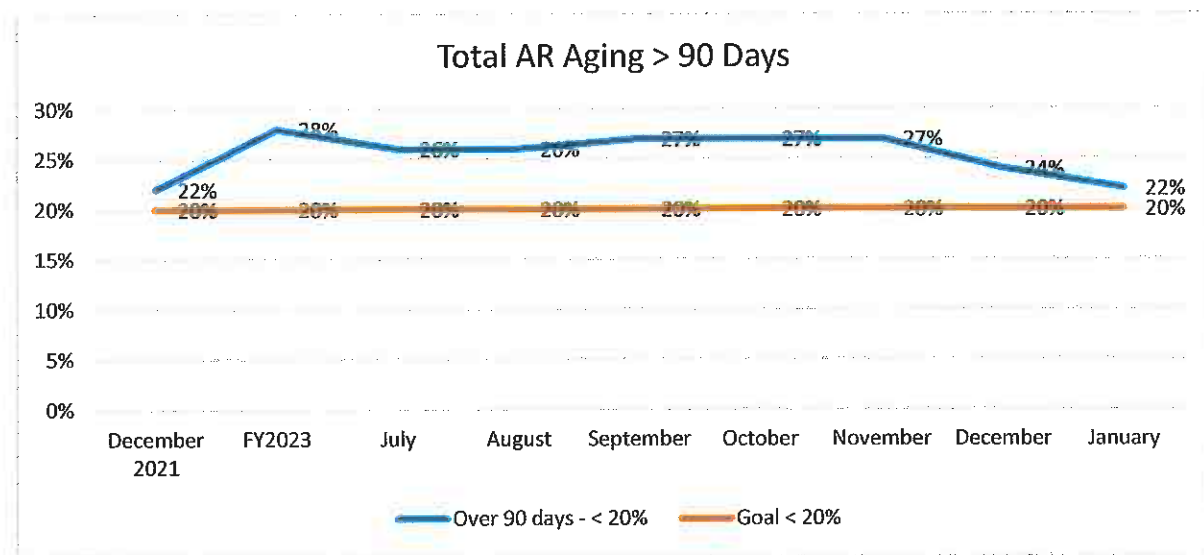
- **DNFB Days – Discharged Not Final Billed days.** These are patient accounts where the patient has been discharged but the account has not been billed. Several categories fall under DNFB, including billing holds, corrections required, credit balances, waiting for coding, ready to bill and the standard delay. The standard delay are accounts held automatically for 5 days before being released for billing. This allows for all charges to be posted, charts documented and coding to be completed. We have set the goal for DNFB days at 5 days by the end of the fiscal year, equal to our 5-day standard delay for billing accounts.
  - DNFB Days remained the same, at 11.50, in January. We continue to work through the details in bringing our DNFB days down.



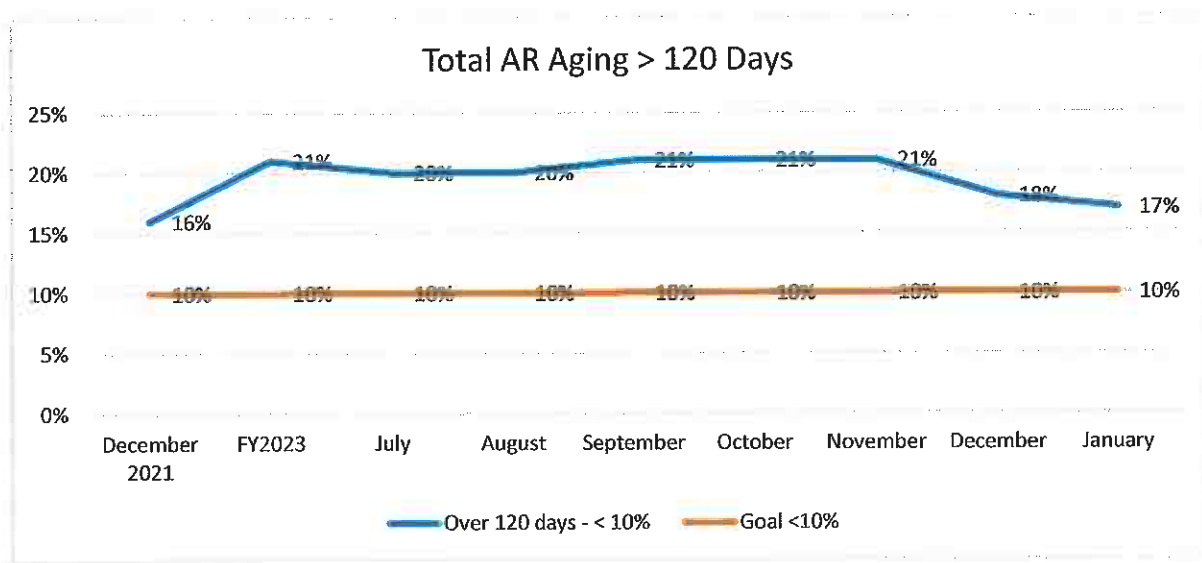
- **Total Accounts Receivable aging** – These goals were set based on national benchmarks received from CLA and are set as follows:

- Days over 90 days set be < 20% of total AR.
- Days over 120 days set at < 10% of total AR.
- Days over 180 days set at < 3% of total AR.

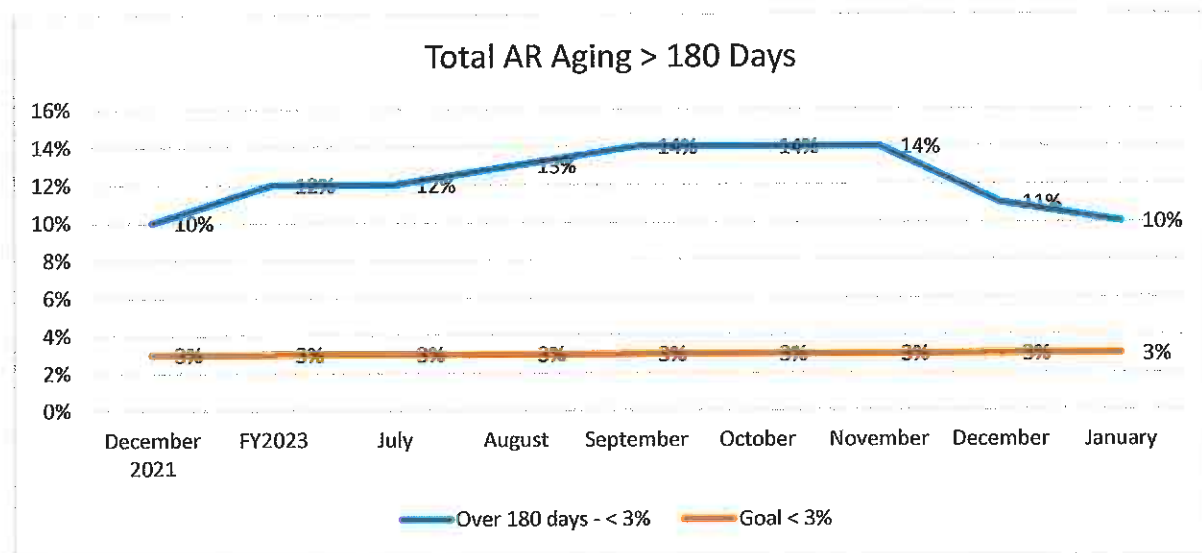
In January, overall AR increased by \$4.5 million resulting in our aging over 90 days improving.



- Days over 90 days are at 22% for January.



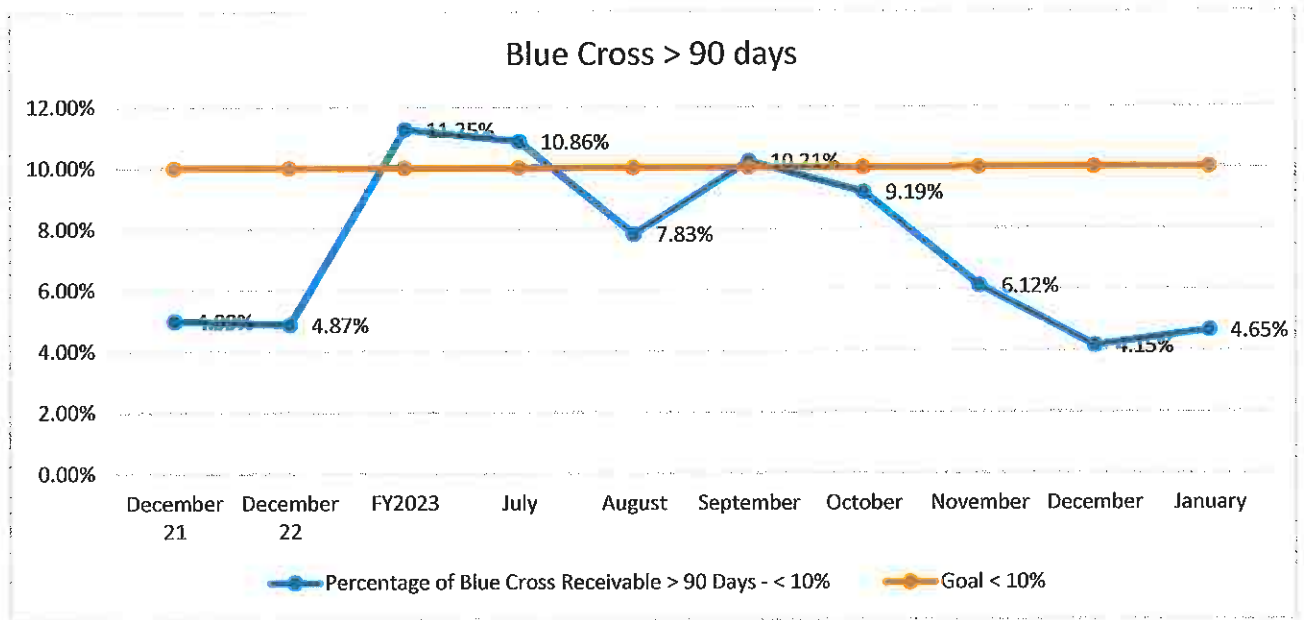
- Days over 120 days are at 17% for January.



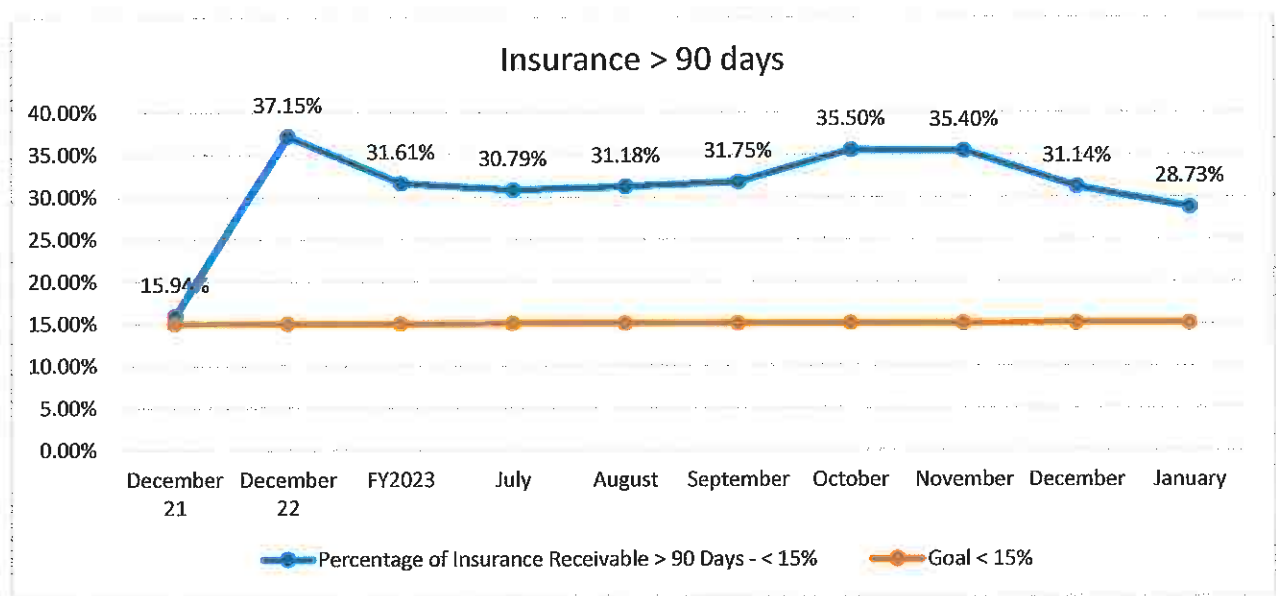
- Days over 180 days are at 10% for January.

- **Days in AR by Payer** – These metrics show more detail of the aging AR by payer. We saw a decrease in the aging AR for Blue Cross, Commercial and Medicare with Medicaid staying right at the goal. These goals are as follows:
  - BCBS Days in AR > 90 days less than 10%
  - Insurance Days in AR > 90 days less than 15%
  - Medicaid Days in AR > 90 days less than 20%
  - Medicare Days in AR > **60 days** less than 6%

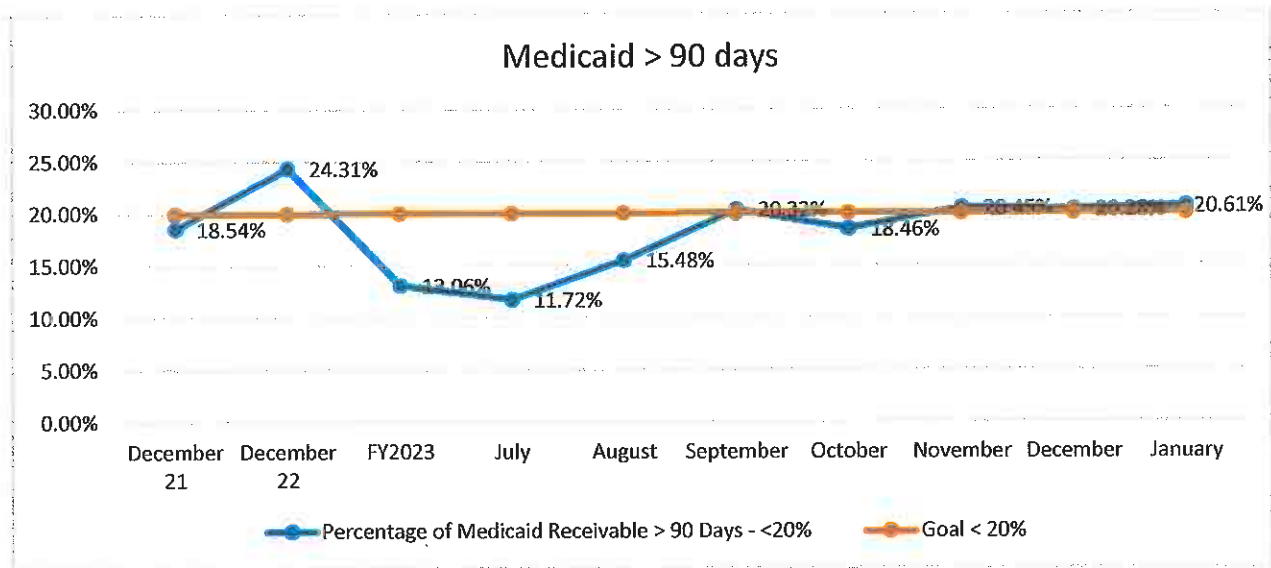




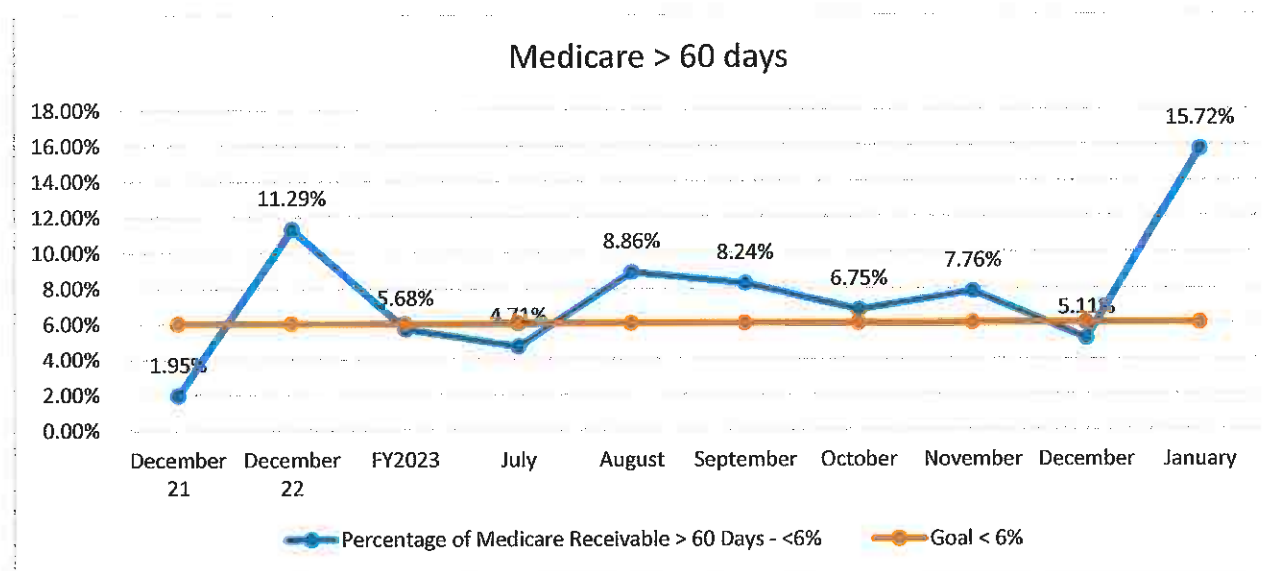
- Blue Cross aging remains under the goal of 10% in January.



- Commercial aging has slowly started to decrease as we continue to close out the legacy systems and work on denials management.




- Medicaid aging is staying right around the 20% goal.



- Medicare saw a significant increase in aging > 60 days. We have seen Medicare AR increase by \$5.4 million over the last two months.

MEMO: January 30, 2024

TO: Finance Committee 

FROM: Ronald L. Cheese – Director Patient Financial Services

SUBJECT: Preliminary January, 2024 Potential Bad Debts Eligible for Board Certification

Potential Bad Debts Eligible for Board Certification

Cerner Accounts	\$ 1,785,752.12
Hospital Accounts Affinity	\$ 14,247.88
Hospital Payment Plans Affinity	\$ 00.00
Medical Clinic Accounts EMD's	\$ 00.00
Ortho Clinic Accounts EMD's	\$ 00.00
Total Potential Bad Debt	\$ 1,800,000.00

Accounts Returned	\$ - 45,702.92
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Net Bad Debt Turned	\$ 1,754,297.08
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Recoveries Collection Agency Cerner	\$ - 83,536.24
Recoveries Collection Agency Affinity	\$ - 86,192.32
Recoveries Payment Plans Affinity	\$ - 3,176.34
Medical Clinic Recoveries EMD's	\$ - 5,698.12
Ortho Clinic Recoveries EMD's	\$ - 1,249.76

Total Bad Debt Recoveries	\$- 179,852.78
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Net Bad Debt Less Recoveries	\$ 1,574,444.30
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Projected Bad Debt by Financial Class

Blue Cross and Commercial	\$ 509,145.91
Medicare	\$ 19,838.81
Medicare Advantage	\$ 6,248.00
Self Pay	\$ 1,239,267.94

## MEMORANDUM

To: Board of Trustees  
From: Wm. Marty Kelsey  
Subject: Chair's Report...February Buildings and Grounds Committee Meeting  
Date: 23 February, 2023

Oncology Suite Renovation...Phase I has started. Work should be done with this Phase about the middle of March. The Department of Health and the Department of Pharmacy will need to inspect...then on to Phase II.

Medical Imaging Core and X-Ray...MHSC staff is reviewing the drawings. Siemens engineers and the electrical contractor are meeting soon to finalize the plans for the ER X-Ray room. This is the first Phase and it is anticipated it should be done about May 1<sup>st</sup>. Then, the other two X-Ray rooms will be started.

Laboratory Expansion Project...meetings have been held between Plan One Architects and Groathouse, the CMAR contractor. It is anticipated that groundbreaking should occur by early June. Irene mentioned that there might be additional ARPA funds available according to the Wyoming Hospital Association.

Master Plan...the master planning consultant has been meeting with MHSC staff. Staff seems to be happy with the consultant's work. There are, not surprisingly, considerable opinions among staff members as to how to best use space that will be re-purposed and how existing space can be improved. Staff will present to the B & G Committee a summary of the master planning work once ready. I asked for a Board workshop on this topic when the time is right.

U of U Suite Renovation...this project is tabled for now.

Taylor Jones updated the Committee on funding status. Because it is projected by CREG that assessed valuation will be down for FY 2025, the message is..."hold the line" on spending. Additional discussion ensued about possibly reserving some of the FY 2024 county maintenance funds to be carried over to ultimately provide, within 2-3 years, about a \$2,000,000 nest egg for future projects.

NOTE: After the meeting concluded, Tami reported that the Board should receive the Guaranteed Maximum Price (GMP) proposal from Groathouse in late March so that the Board can approve same at its April meeting.

For more information, please refer to the minutes of the meeting in the packet.

MEMORIAL HOSPITAL OF SWEETWATER COUNTY  
Building and Grounds Committee Meeting  
February 20, 2024

The Building and Grounds Committee met in regular session via Zoom on February 20, 2024,  
at 2:30 PM with Mr. Marty Kelsey presiding.

In Attendance:       Mr. Marty Kelsey, *Trustee - Chair*  
                              Mr. Craig Rood – *Trustee*  
                              Ms. Irene Richardson, *CEO*  
                              Ms. Tami Love, *CFO*  
                              Mr. James Horan, *Director of Facilities*  
                              Mr. Gerry Johnston, *Maintenance Supervisor/ Project Manager*  
                              Ms. Michele Schmidt, *PlanOne Architects*  
                              Mr. Taylor Jones, *County Commissioner*

Mr. Kelsey called the meeting to order and asked for a mission moment to be shared.

Mr. Kelsey asked for a motion to approve the agenda. Mr. Rood made a motion to approve the agenda. Ms. Richardson seconded; motion passed.

Mr. Kelsey asked for a motion to approve the minutes from the January 16, 2024 meeting. Mr. Horan made a motion to approve the minutes. Mr. Rood seconded; motion passed.

**Maintenance Metrics**

Mr. Johnston said 228 work orders were completed in January. This report doesn't show the whole story as some work orders roll over from the previous month depending on the scheduling of tasks. The percentage completed is on track. Mr. Kelsey asked what the toughest work orders are related to. Mr. Johnston the ones dealing with cooling and heating are the most difficult as it is hard to keep everyone comfortable.

**Old Business – Project Review**

**Oncology Suite renovation**

Mr. Johnston gave an update on Phase 1 of the project. The area has been framed out, plumbing completed and the electrical has passed inspection. They will start double sheet rocking next week. It will be double since it is the new ante room. The contractor estimates Phase 1 to be completed in about 3 weeks. The Department of Health and the Department of Pharmacy will need to inspect. They will then start on Phase II.

**Medical Imaging Core and X-ray**

Ms. Schmidt believes this project is waiting on hospital staff to respond to drawing review. Mr. Johnston said Siemens engineers and our electrical contractor are meeting this week to finalize the plan for the ER x-ray room. He estimated we are still 6-8 weeks out to complete the ER room. Once this project gets closer to completion, we will focus on the other two x-ray rooms.



### SLIB Laboratory Expansion project

Ms. Schmidt said there has been preliminary meetings with Groathouse, the general contractor, working through questions on final drawings and scheduling. There were modifications needed to add a second egress from the second floor. Breaking ground is now expected at the end of May or beginning of June. Mr. Kelsey asked when we can anticipate the GMP as it needs to have Board approval before moving forward. Mr. Johnston said he would let Groathouse know of our Board schedule and ask if it can be ready for the March 4 meeting. Mr. Kelsey asked if it was close to the original architectural bid. Ms. Schmidt said the GMP did come in close to the original budget but now needs to be updated with the secondary exit from the second floor. Ms. Richardson said the Wyoming Hospital Association let her know there may be additional ARPA funds available for projects coming in over budget or different projects. As soon as we get a GMP we can look at applying for more funds if needed. Mr. Kelsey said we will plan on taking the GMP to the Board for approval at the March meeting or we can have a special Board meeting if needed so we don't hold up the project. He would like to see the comparison to the architectural estimate and the details for any variance and then an ongoing tracking of costs to keep any overages minimal.

### Master Plan

Ms. Richardson we just received the notes back from the PACT group regarding their onsite tours and interviews with staff. We are meeting on Friday to review. We are also meeting later this week to look at the prioritized project list and compare it to the results of the master plan notes. Mr. Kelsey asked for a summary of the Master Plan after the reviews are complete. He asked if we were happy with the consultant. Ms. Richardson said there were 3 onsite and they were very detailed, responsive, and timely. She said we are dealing with 45+ year old buildings and it will need some infrastructure done. Mr. Kelsey said he had been through the master planning process several times and asked about the difference of opinions on how to use space. Ms. Richardson said everyone wants something done with their space. There was a lot of discussion about the different ideas that were brought up during the onsite visits. Mr. Kelsey said as we get further into the Master Plan, he would like to see this presented as a Board workshop.

### U of U suite renovation

Ms. Love said this project remains tabled.

### **New Business**

Mr. Jones gave an update on the budget discussion from the Commissioner meeting earlier in the day. He said the assessed value is estimated to be down about 10% and expects the budget requests to follow suit. There was discussion regarding the new county depreciation fund for capital projects. We will ask that any funds left from our maintenance fund for FY2024 be carried over to open this fund. For FY2025 budget, we will request a split between routine funds for normal reimbursement and capital funds to be kept in the new fund for future projects.

### Other

The next meeting is scheduled for Tuesday, March 19, 2024; 2:30P – 3:30P. This may be rescheduled based on information from the Master Plan review and what we are ready to present to the committee.

Mr. Kelsey adjourned the meeting at 3:14 pm.

*Submitted by Tami Love*

DRAFT

Minutes  
Governance Committee  
February 19, 2024

Present: Irene Richardson, Marty Kelsey, and Barbara Sowada  
Zoom meeting called to order at 2:00 pm  
Minutes had been previously approved  
Agenda created during meeting

**Meeting called to order** at 2:00 pm by Barbara Sowada; all members present.

**Old Business**

None

**New Business**

1. Suggestions from the Rural AHA Conference for best practices for boards were discussed. Action: review and modify the templates from The Governance Institute for BOT chair and BOT chair evaluation. Members will discuss modified templates at March Governance meeting to determine whether either are worthy of being adopted by the Board.
2. Suggestion from the Rural AHA Conference regarding a bylaw change to include non-board members in select Board Committees was discussed. Action: Marty will take this discussion to Bylaw Ad Hoc Committee for further review.
3. Suggestion from the Rural AHA Conference regarding an annual Board calendar of work. Action: Barbara will draft calendar for review at March Governance meeting.
4. Irene gave status update of strategic plan. Action: Strategic plan will be presented to Board at March meeting. Recommended that status updates are provided quarterly.
5. Date changes for future Board meetings were discussed and will be brought to March Board for approval. Dates changes are: 1) Board Finance workshop February 28<sup>th</sup> as part of F&A meeting; 2) Move June BOT meeting to May 29<sup>th</sup>, May F&A meeting moved to May 28<sup>th</sup>; and 3) since regular July BOT meeting is July 3 should it be changed?

Meeting adjourned at 3:00 pm.

Next meeting is tentatively scheduled for March 18<sup>th</sup> at 2:00 pm.

Respectfully submitted,

Barbara J. Sowada, Ph.D.