

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY
REGULAR MEETING OF THE BOARD OF TRUSTEES
February 1, 2023
2:00 p.m.
Classrooms 1, 2 & 3**

AGENDA

- | | | |
|-------|--|--|
| I. | Call to Order | Barbara Sowada |
| | A. Roll Call | |
| | B. Pledge of Allegiance | |
| | C. Our Mission and Vision | Barbara Sowada |
| | D. Mission Moment | Irene Richardson, <i>Chief Executive Officer</i> |
| II. | Agenda <i>(For Action)</i> | Barbara Sowada |
| III. | Minutes <i>(For Action)</i> | Barbara Sowada |
| IV. | Community Communication | Barbara Sowada |
| V. | Old Business | Barbara Sowada |
| | A. Employee Policies <i>(Remains under review/development, no request for action)</i> | |
| | 1. Workplace Violence Prevention Policy | |
| | 2. Workplace Violence Prevention Program | |
| | B. Finance and Audit Committee Charter <i>(For Action)</i> | Ed Tardoni |
| VI. | New Business <i>(Review and Questions/Comments)</i> | Barbara Sowada |
| | A. Patient Safety Plan <i>(For Review)</i> | Kara Jackson, <i>Director of Quality Accreditation, Patient Safety, & Risk</i> |
| | B. Credentials Committee Privilege Forms <i>(For Action)</i> | Kerry Downs,
<i>Director of Medical Staff Services</i> |
| | 1. Nephrology | |
| | 2. APRN Psychiatry | |
| | 3. Reappointment Timeframe | |
| VII. | Chief Executive Officer Report | Irene Richardson |
| VIII. | Committee Reports | |
| | A. Quality Committee | Taylor Jones |
| | B. Human Resources Committee | Kandi Pendleton |
| | C. Finance & Audit Committee | Ed Tardoni |
| | 1. Bad Debt <i>(For Action)</i> | |
| | 2. January Committee Meeting Information <i>(For Your Information)</i> | |
| | D. Building & Grounds Committee | Marty Kelsey |
| | E. Foundation Board | Taylor Jones |
| | F. Compliance Committee | Kandi Pendleton |
| | G. Governance Committee | Barbara Sowada |
| | H. Executive Oversight and Compensation Committee | Barbara Sowada |
| | I. Joint Conference Committee | Barbara Sowada |

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| IX. | Contract Review | Suzan Campbell, <i>In House Counsel</i> |
| | A. Consent Agenda <i>(For Action)</i> | |
| | 1. <u>First Amendment to Agreement for Physician Professional Services (Emergency Department)</u> | |
| | B. Contracts Approved by CEO since Last Board Meeting <i>(For Your Information)</i> | |
| | 1. <u>Amendment to License Agreement</u> | |
| | 2. <u>Amendment to Consulting Services Agreement between U of U and MHSC Cancer Center</u> | |
| X. | Education | Barbara Sowada |
| | A. MOAB | Stevie Nosich, <i>Environmental Safety Officer</i> |
| XI. | Medical Staff Report | Dr. Brianne Crofts, <i>Medical Staff President</i> |
| XII. | Good of the Order | Barbara Sowada |
| XIII. | Executive Session (W.S. §16-4-405(a)(ix)) | Barbara Sowada |
| XIV. | Action Following Executive Session | Barbara Sowada |
| XV. | 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**

January 4, 2023

The Board of Trustees of Memorial Hospital of Sweetwater County met in regular session on January 4, 2023, at 2:00 p.m. with Dr. Barbara Sowada, President, presiding.

CALL TO ORDER

Dr. Sowada welcomed everyone and called the meeting to order. She presented the Trustees, Ms. Richardson, Dr. Crofts, and Mr. Phillips with gifts for the new year and wished everyone an amazing 2023.

Dr. Sowada requested a roll call and announced there was a quorum. The following Trustees were present: Mr. Taylor Jones, Mr. Marty Kelsey, Ms. Kandi Pendleton, Dr. Barbara Sowada, and Mr. Ed Tardoni.

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

Pledge of Allegiance

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

Our Mission and Vision

Mr. Tardoni read aloud the mission and vision statements.

Mission Moment

Ms. Richardson shared a recent article in the local newspaper about Mr. Marlin Dillard who assists people at the front information desk. She said he is a wonderful ambassador for the Hospital and exemplifies our mission every day. Dr. Sowada referenced a front-page article about recent falls related to ice and said our community is glad our emergency department is here.

AGENDA

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

APPROVAL OF MINUTES

The motion to approve the minutes of the December 7, 2022, regular meeting as presented was made by Mr. Tardoni second by Mr. Jones. Ms. Pendleton abstained, and the motion carried.

COMMUNITY COMMUNICATION

There were no comments.

OLD BUSINESS

Employee Policies

Dr. Sowada said The Joint Commission is focusing on workplace violence. Following discussion, Ms. Richardson said we can take the information back to the Human Resources Committee for continued discussion. Mr. Kelsey requested highlighted changes when revisions are brought forward to the Board for review and approval. Dr. Sowada said it is important we get it right and she said we appreciate the work being done.

NEW BUSINESS

Finance and Audit Committee Charter

Mr. Tardoni noted a minor change needed in the draft presented and said the charter will be returned to the Finance and Audit Committee for discussion.

CHIEF EXECUTIVE OFFICER REPORT

Ms. Richardson wished everyone a happy new year and presented an update on the strategic plan areas of patient experience, quality and safety, community and growth, workplace experience, and financial stewardship. Mr. Kelsey said he would like to receive information on Medicaid expansion and how it may impact the Hospital.

COMMITTEE REPORTS

Quality Committee

Mr. Jones said the information is in the meeting packet.

Human Resources Committee

Ms. Pendleton said the information is in the meeting packet.

Finance and Audit Committee

Mr. Tardoni thanked staff for getting the financial information out even though the Committee did not meet in December.

Bad Debt: The motion to approve the net potential bad debt of \$930,918.65 as presented was made by Mr. Tardoni; second by Ms. Pendleton. Motion carried.

Dr. Sowada referenced the goals graphs and noted the improved days of cash on hand data.

Building and Grounds

Mr. Kelsey said the information is in the meeting packet.

Foundation

Ms. Tiffany Marshall, Executive Director for the Foundation, provided an update on the Red Tie Gala. She said she and Ms. Richardson are on the agenda for the next Sweetwater Board of County Commissioners meeting to review the Wyoming State Land and Investment Board approval for the Hospital's lab remodel grant submission. She provided an update on other grants the Hospital has received.

Compliance Committee, Governance Committee, Joint Conference Committee

Dr. Sowada said the Compliance, Governance, and Joint Conference Committees did not meet.

Executive Oversight and Compensation Committee

Dr. Sowada said the Committee met and topics are discussed during executive session.

CONTRACT REVIEW

Ms. Richardson reviewed the iProtean agreement and said she feels this education for the Board has been really good. She said we feel we will be with them for more than one year and there is a significant discount if we renew for three years. Ms. Richardson said we want to involve the Foundation Board so the agreement includes additional licenses. Dr. Sowada said she will be on a call with iProtean soon and asked everyone for input on content and useful topics moving forward. She said iProtean is good at listening and responding. Ms. Pendleton and Mr. Jones said they are interested in the usage to warrant the expense. Ms. Richardson said she feels it is worthwhile, good Board education, and utilized. The motion to approve the iProtean agreement as presented was made by Mr. Tardoni; second by Mr. Jones. Motion carried.

MEDICAL STAFF REPORT

Dr. Crofts said the Medical Executive Committee met the previous week. She encouraged everyone to continually wash your hands and stay home if you are sick. She said it has been very busy and we are seeing a big increase in RSV and flu cases. Dr. Sowada asked Dr. Crofts to please extend the Board's appreciation to the Medical Staff.

GOOD OF THE ORDER

Dr. Sowada said M.O.A.B. information will be presented at the February meeting. Mr. Tardoni distributed information to the Trustees and said that could be considered board education.

Mr. Tardoni said we have helped many patients out with our navigation and care transition services. He asked us to look at getting a group of people together to work on issues surrounding prescriptions, costs associated with them, and submitting or automating them in some way to make

the process better. He said between the pharmacy, physicians, and computer people, maybe we can give people some aid. Dr. Crofts said she feels his frustration and outlined how she tries to help in the process. Ms. Richardson introduced Ms. Melida Marin, Lead Patient Financial Navigator, and said she and her department have done some really great things. Mr. Ron Cheese, Director of Patient Financial Services, said the department goal was raised by 500% this year and this month they went over \$1M in savings to the patients and the Hospital. Mr. Cheese said we are working with Cerner to look into the prescription piece and will look at opportunities to see how we can help.

EXECUTIVE SESSION

The motion to go into executive session was made by Ms. Pendleton; second by Mr. Jones. Motion carried.

RECONVENE INTO REGULAR SESSION

At 5:03 p.m., the motion to leave executive session and return to regular session was made by Ms. Pendleton; second by Mr. Jones. Motion carried.

ACTION FOLLOWING EXECUTIVE SESSION

Approval of Privileges

The motion to approve the list of clinical privileges and granting appointments to the Medical Staff as reviewed in executive session was made by Ms. Pendleton; second by Mr. Jones. Motion carried.

Credentials Committee Recommendations to the Board of Trustees for Granting Clinical Privileges and Granting Appointment to the Medical Staff from December 13, 2022

1. Initial Appointment to Active Staff (2 years)
 - Dr. Mark Uhlman, Urology
2. Initial Appointment to Associate Staff (1 year)
 - Dr. Jason Kalan, Pediatrics
 - Dr. Holden Wagstaff, Emergency Medicine (U of U)
3. Reappointment to Active Staff (2 years)
 - Dr. Augusto Jamias, General Surgery
4. Reappointment to Consulting Staff (2 years)
 - Dr. Nathan Blue, Maternal/Fetal Medicine (U of U)
 - Dr. Edward Kimball, Tele ICU (U of U)
 - Dr. Lucy Dana DeWitt, Tele Stroke (U of U)
 - Dr. Muhammad Chauhan, Tele Stroke (U of U)
 - Dr. Jonathon Lee, Tele Radiology (VRC)

The motion to approve the contract presented by the CEO and authorize the CEO to sign the contract as discussed in executive session was made by Ms. Pendleton; second by Mr. Jones. Motion carried.

ADJOURNMENT

There being no further business to discuss, the meeting adjourned at 5:04 p.m.

Dr. Barbara Sowada, President

Attest:

Ms. Kandi Pendleton, Secretary

DRAFT

Board Charter for Finance & Audit Committee

Board of Trustees Orientation Resource Handbook

Category: Finance and Audit Committee

Title: Finance and Audit Committee

Original adoption: June 14, 2010

Revision: 2023, 2020

Purpose

The purpose of the Finance and Audit Committee is to assist the Board of Trustees (Board) in its fiduciary and oversight duties as set forth below.

Authority

The committee has no expressed or implied power or authority.

Responsibilities

In fulfilling its charge, the Finance and Audit Committee is responsible for the following activities and functions:

- Reviews, monthly, the financial status of the hospital and reports to the Board.
- Reviews the fiscal year operating and capital budgets of the hospital prepared by Senior Leadership; makes recommendations to the Board regarding approval of said budgets.
- Monitors the overall financial performance and risk of the hospital in light of approved budgets, long term trends, and industry standards.
- Reviews on a regular basis hospital financial statements.
- Reviews and recommends to Board all Capital purchases in excess of the CEO's approval limit.
- Recommends to the Board policies designed to strengthen the financial health of the hospital and clinics.
- Recommends to the Board key financial objectives to be established and monitored.
- Reviews hospital investments; makes recommendations to Senior Leadership as deemed desirable.
- Monitors the hospital's debt obligations; reviews borrowing initiatives proposed by Senior Leadership; makes recommendations to the Board as deemed necessary.
- Reviews the Board's policy regarding financial assistance for the poor and uninsured, in compliance with State statute 18-8-106.
- Provides oversight over external auditing matters by:
 - Reviews the Board's external auditing policy; recommends changes if deemed necessary.

- Recommends to the Board external auditors after reviewing the composition of the audit team, proposed compensation, and other relevant matters.
- May meet annually with the external auditors separate from Hospital management to review the annual audit and associated management letter.
- Reviews audit findings and recommends to the Board any action plans that should be taken to strengthen internal controls and to otherwise improve the hospital's accounting and management practices.
- Makes other related recommendations to the Board associated with the auditing function.

Composition

The Finance and Audit Committee consists of two (2) members of the Board, including the Board Treasurer, who functions as Chair, Chief Executive Officer, Chief Financial Officer and Controller serve as voting members of the committee. The Chief Nursing Officer, Chief Clinical Officer, Director of Patient Financial Services, Director of Information Technology, Director of Materials Management serve as non-voting members. Two (2) physicians, as appointed by the Board President, serve as non-voting members of the committee, and may attend as available.

Meeting Schedule

Monthly; additional meetings may be called by the Committee Chair in consultation with the Chief Executive Officer, or as needed.

Reports:

The committee will receive and review the following reports, and provide the Board with an executive summary:

- For Board approval:
 - ✓ Investment reports, as necessary
 - ✓ Bad Debt report
 - ✓ Annual operating and capital budget
 - ✓ Annual financial audit report and management letter
- For informational purpose:
 - ✓ Financial statements
 - ✓ Key financial ratios
 - ✓ Key operating benchmarks
 - ✓ Payer trend reports
 - ✓ Quarterly bond covenant compliance letter
 - ✓ Annual Standard & Poor's credit rating review
 - ✓ Chargemaster review summary every three years

Note: As used herein, the term "hospital" includes the "clinics" when such inclusion is appropriate.



Approved N/A

Review Due N/A

Document General -
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Patient Safety Plan

Introduction

Memorial Hospital of Sweetwater County (MHSC) is committed to providing compassionate, high-quality care with a strong culture of safety for the best patient outcomes. Our objective is to support a culture of safety for our patients and staff, as well as to support an unrelenting commitment to safety and to do no harm. This culture allows our organization to consistently identify opportunities to improve performance and safety, while maintaining a commitment to responsible stewardship of resources by aligning with MHSC's mission, vision, values, and strategic objectives. The Patient Safety Plan cultivates an organization-wide approach and provides a coordinated, collaborative effort to patient safety.

Purpose

MHSC strives for staff to feel supported, safe and empowered in speaking up about errors, Good Catches/near misses, and related opportunities for improvement. The Patient Safety Plan provides guidelines for collecting, analyzing, and using data to identify, address, and monitor performance to continually improve the quality and safety of care provided by the hospital, please see the [Performance Improvement and Patient Safety Plan](#) for more details.

The Patient Safety Plan provides a systematic, organization wide program that minimizes hazards and patient harm by improving processes of care. The purpose of MHSC's Patient Safety Plan is to build a framework for the delivery of safe care, perpetuate a culture of safety, improve patient safety and reduce risk to patients by reducing variability in care processes, increase reporting of occurrences, and reduce preventable adverse events.

Scope

The Patient Safety Plan is organization wide and encompasses patients, visitors, volunteers, medical staff, and staff. The plan integrates all services and departments impacting patient care including contracted services. The plan addresses maintenance and improvement of patient safety in all

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departments throughout the organization.

Objectives

- I. To promote patient safety through effective management of identified risks and prevention of adverse events
- II. To reduce the opportunity for harm and improve safety mechanisms and processes
- III. To encourage reporting of errors, occurrences, and risks to patient safety without judgment or placement of blame
- IV. To collect and analyze data to ensure proper prioritization of process improvements
- V. To identify risk through trending of confidential patient safety occurrence information from individual event reports and aggregate data reports
- VI. To investigate and analyze occurrences with a focus on process and system improvements to reduce risk
- VII. To integrate patient safety priorities into the design and redesign of all relevant organizational processes, functions, and services
- VIII. To provide open communication regarding patient safety risks, events, and system-based improvements
- IX. To facilitate organizational learning about patient safety occurrences
- X. To incorporate recognition of patient safety as an integral job responsibility
- XI. To use education as a key strategy for prevention of patient safety issues based on needs specific to the organization
- XII. To involve patients in decisions about their health care and promote open communication with patients and families about medical errors that occur
- XIII. To identify at least one high-risk patient safety process selected at a minimum of every 18 months for proactive risk assessment. The following may be considered, but not limited to, when selecting a proactive risk assessment:
 - A. The Joint Commission Sentinel Event alerts
 - B. Core Measure performance data
 - C. Occurrence reporting information
 - D. Information from external sources: state, federal and current literature
 - E. National Patient Safety Goals
- XIV. To support initiatives that promote person-centered care and involvement
- XV. To identify patient perception of safety issues using patient satisfaction survey data
- XVI. To regularly evaluate staffs' perception of the organizational culture of safety using a valid and reliable survey tool, and to implement improvements identified from survey results

Definitions

Adverse event: An occurrence with an unplanned, unexplained negative event that reaches the patient and results in no harm, harm (minimal to severe), or death

Good Catch/ near miss: An event that could have caused harm, but was prevented from reaching the patient

Hazard: A potential source of harm or adverse effect

Just Culture: A value supported system of accountability that allows the individual to report adverse events, Good Catches, and hazards in an atmosphere of trust. See also [Just Culture](#)

Occurrence: Any happening that is not consistent with routine operation of the facility. See also [Occurrence Reporting](#)

Patient harm: Unintended physical or psychological injury or damage resulting from or contributed to by medical care that requires additional monitoring, treatment, or hospitalization, or that results in death

Patient safety: The prevention of errors and adverse effects to patients that are associated with health care

Patient safety event: An event, occurrence, or condition that could have resulted or did result in harm to a patient

Performance improvement: The systematic process of detecting and analyzing performance problems, designing and developing interventions to address the problems, implementing the interventions, evaluating the results, and sustaining improvement

Safety culture: The product of individual and group beliefs, values, attitudes, perceptions, competencies, and patterns of behavior that determine the organization's commitment to quality and patient safety

For further definitions please refer to these documents: [Occurrence Reporting](#), [Adverse Drug Reactions](#), [Medication Errors](#), [Fall Prevention Program](#), [Just Culture](#), [Disclosure of Adverse Medical Event](#), [Performance Improvement and Patient Safety Plan](#), and [Sentinel Event Policy](#)

Organization and Accountability

MHSC recognizes that all staff have an impact on patient safety. All staff are expected to participate in patient safety activities and to offer suggestions and recommendations for improvement through their involvement in occurrence reports, patient safety initiatives, department meetings, and other formal and informal means.

Board of Trustees

- I. Hold CEO accountable for promoting and modeling behaviors consistent with a Just Culture, as well as overseeing actions to improve patient safety throughout the organization
- II. Review and approve Patient Safety Plan annually
- III. Review annual written report provided by Patient Safety Committee

- IV. Oversee that quality and safety are at the core of the organization's mission
- V. Oversee that quality and safety values are embedded in guiding the organization's strategic plan
- VI. Oversee that adequate resources (staff, time, information systems, and training) are allocated to data collection and performance improvement
- VII. Oversee the Hospital's ongoing monitoring, maintenance, and improvement efforts for safe, high quality, and efficient medical care

Senior Leadership Team

- I. Promote and model behaviors consistent with a Just Culture, as well as oversee actions to improve patient safety throughout the organization
- II. Create and maintain a culture of safety at the hospital that supports effective implementation of the Patient Safety Plan
- III. Provide the resources necessary for the effective implementation of the Patient Safety Plan
- IV. Define, in writing, the following terms:
 - A. Occurrence
 - B. Patient safety event
 - C. Adverse events
 - D. Adverse drug events
 - E. Medication errors
 - F. Sentinel events
 - G. Good Catch/ near miss
- V. Disseminate above definitions throughout the organization
- VI. Set expectations for improvement work based on results from the Culture of Safety survey and additional safety data
- VII. Prioritize and ensure that adequate resources (staff, time, information systems, and training) are allocated to data collection and performance improvement
- VIII. Participate in regular safety rounds
- IX. Encourage communication of ongoing efforts to improve safety in the organization

Leadership Team

- I. Create and maintain a culture of safety that supports effective implementation of the Patient Safety Plan
- II. Establish that safety occurrences are not commonly the result of individual misconduct, but rather a failure of the systems or processes of the organization, see the Just Culture policy for more information
- III. Inform staff of patient safety initiatives
- IV. Encourage participation in patient safety principles and initiatives, performance improvement,

and problem-solving processes

- V. Participate in the collection and analysis of relevant departmental data
- VI. Ensure completion of performance improvements and action plans
- VII. Foster a climate of continuous improvement through measurement, data analysis, identification, and implementation of changes needed to improve safety of care and ensure sustainment
- VIII. Provide the foundation for an environment that supports Just Culture and patient safety by:
 - A. Acknowledging that most safety events are process failures and monitoring processes to mitigate the risk of patient harm
 - B. Promoting learning
 - C. Motivating staff to uphold a fair and Just Culture of safety
 - D. Providing a transparent environment in which quality measures and patient harms are freely shared with staff
 - E. Modeling professional behavior by adopting and promoting the MHSC Code of Conduct that defines acceptable behavior as well as behaviors that undermine a culture of safety
 - F. Addressing intimidating behavior that undermines the safety culture so as not to inhibit others from reporting safety concerns
 - G. Educating staff and holding them accountable for professional behavior
- IX. When a patient safety event occurs, provide resources and mechanisms for support as necessary following a patient safety event
 - A. Examples include but are not limited to, debriefing, counseling, and resources provided through the employee assistance program
- X. Disseminate lessons learned from safety events

Medical Staff

- I. Provide effective mechanisms to measure, assess, and improve the quality and appropriateness of patient care, and the clinical performance of all individuals with delineated clinical privileges, accomplished through Ongoing Professional Practice Evaluations (OPPE), Focused Professional Practice Evaluations (FPPE), and Peer Review Process (refer to Professional Practice Review Process – Medical Staff Peer Review)
- II. Know and understand the culture of safety, the role of occurrence reporting in the culture of safety, and their responsibilities under the culture of safety
- III. Report occurrences (both events that do and do not reach the patient, and do or do not cause harm to the patient) immediately, and document events through the hospital's occurrence reporting platform
- IV. Participate in any investigative activities including but not limited to the following:
 - A. Describe, in writing, the situation and event
 - B. Any clinical data related to the event (for example, patient's vital signs, medication

- name and dosage, and so on)
- Identify any other staff members who were present during the event
- C. Answer questions from the individual(s) investigating the event
- D. Collaborate with Quality department, department directors and others as appropriate, to design and implement corrective actions and monitor the results
- V. Provide the foundation for an environment that supports a Just Culture and patient safety by:
 - A. Modeling professional behavior by adopting and promoting the Medical Staff Code of Conduct that defines acceptable behavior as well as behaviors that undermine a culture of safety.
 - B. Addressing intimidating behavior that undermines the safety culture so as not to inhibit others from reporting safety concerns
- VI. Act upon identified areas for improvement

Quality Department

- I. Facilitate education about patient safety principles to the Board of Trustees
- II. Coordinate and provide patient safety education at new employee orientation and to staff annually
- III. Collaborate with department directors to determine whether a reported patient safety event is likely to be repeated
- IV. Conduct Root Cause Analyses - see [Sentinel Event Policy](#) for more information
- V. Serve as a resource for performance improvement, patient safety, patient experience, and regulatory information
- VI. Educate MHSC staff about the performance improvement process, patient safety, and patient experience
- VII. Support staff, including Medical Staff, Leadership, and project leaders in the development and implementation of performance improvement activities, including team building and data analysis

Patient Safety Committee

The Patient Safety Committee is a standing interdisciplinary group that manages the Patient Safety Plan through a systematic, coordinated, continuous approach. Please see the Patient Safety Committee Charter for details on the responsibilities of the Patient Safety Committee (attached).

Staff and Volunteers

- I. Know and understand the organizational definitions of the following terms, as provided by leadership:
 - A. Occurrence
 - B. Patient safety event
 - C. Adverse events
 - D. Adverse drug events

- E. Medication errors
 - F. Sentinel events
 - G. Good Catch/near miss
- II. Comply with all hospital policies and procedures related to patient safety that apply to their position and job duties
 - III. Know and understand the culture of safety, the role of occurrence reporting in the culture of safety, and their responsibilities under the culture of safety
 - IV. Improve the culture of safety and accountability by employing a “see something, say something, do something” approach
 - V. Report occurrences (both events that do and do not reach the patient, and do or do not cause harm to the patient) to their department manager or supervisor immediately, and document events through the hospital's occurrence reporting platform
 - VI. Participate in any investigative activities including but not limited to the following:
 - A. Describe, in writing, the situation and event
 - B. Any clinical data related to the event (for example, patient’s vital signs, medication name and dosage, and so on)
 - C. Identify any other staff members who were present during the event
 - D. Answer questions from the individual(s) investigating the event
 - E. Collaborate with Quality department, department directors and others as appropriate, to design and implement corrective actions and monitor the results
 - VII. Participate in data collection and analysis activities as well as performance improvement activities
 - VIII. Identify and utilize approaches for improving processes and outcomes to continuously improve the quality and safety of patient care
 - IX. Participate in improvement activities related to the Patient Safety Plan
 - X. Constantly hold patient safety at the forefront and continue to advocate for changes where opportunities are identified
 - XI. Encourage patients and their family members to speak up when they observe or suspect a patient safety event or if they have questions about the safety of a system or process
 - XII. For further information, please refer to the following policies: [Occurrence Reporting](#), [Adverse Drug Reactions](#), [Medication Errors](#), [Fall Prevention Program](#), [Just Culture](#), [Disclosure of Adverse Medical Event](#), and [Sentinel Event Policy](#)

Data

The Patient Safety Committee will monitor data that is further specified and defined in the PIPS Plan and Patient Safety Committee Charter. Information from data analysis is used to make changes that improve performance and patient safety and reduce the risk of adverse and sentinel events. Please see Patient Safety Committee Charter "Data" heading for details.

Communication

Patient safety initiatives, lessons learned, and patient safety improvement work will be communicated as appropriate throughout the organization. Communication will occur through:

- I. Quality Committee of the Board
- II. PIPS Committee
- III. Patient Safety Committee
 - A. Monthly Patient Safety Newsletters
 - B. Monthly Key Takeaway Information
- IV. Leadership meetings
- V. Medical Staff meetings
- VI. Staff meetings
- VII. Department white boards, electronic communication, patient safety rounding, and communication books

Confidentiality

- I. WY Stat 35-2-910. Quality management function for health care facilities; confidentiality; immunity; whistle blowing; peer
- II. All quality and patient safety data, materials, and information are private and confidential, shall be considered the property of Memorial Hospital of Sweetwater County, and as such is protected by state and federal health care quality statutes.
- III. Confidentiality shall be maintained, based on full respect of the patient's right to privacy and in keeping with hospital policy and state and federal regulations governing the confidentiality of quality and patient safety work.
- IV. Information, data results, reports and minutes generated by all quality management activities will be handled in a manner ensuring strict confidentiality
- V. Confidential information may include but is not limited to: Medical Staff committee minutes, organizational quality improvement committee minutes, electronic data gathering and reporting, and incident/occurrence reporting
- VI. Quality improvement activities will occur in ways that preserve confidentiality of information consistent with policy and established law
- VII. The Joint Commission is an independent contractor. Any event reported to The Joint Commission is performed under the auspice of the Quality Committee.

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Reviewed and Approved:

Patient Safety Committee: October 27th, 2022

Medical Executive Committee: November 29th, 2022

Quality Committee of the Board: January 18th, 2023

Board of Trustees:

Attachments

[Patient Safety Committee Charter.docx](#)

Approval Signatures

Step Description	Approver	Date
Board of Trustees	Taylor Jones: Board Trustee	06/2022
	Suzan Campbell: General Legal Counsel	05/2022
	Irene Richardson: CEO	05/2022
	Tami Love: CFO	04/2022
	Kari Quickenden: Chief Clinical Officer	04/2022

DRAFT

Patient Safety Committee Charter

Statement of Purpose

The purpose of this committee is to work to reduce any and all harm to the patients, staff, and facility through a multidisciplinary proactive approach. This will be performed using an evidence-based comprehensive approach to safety/risk, using assessments, systemic reviews, event reports and staff/patient testimonials. The committee will work to create an environment to support and encourage the “see something, say something, do something” approach to bring awareness and focus to patient safety issues.

Type of Committee

- A. Standing committee to meet regularly for a specified purpose.
- B. Meeting Schedule
 - a. The committee shall meet monthly or as needed for special work projects

Membership

- A. The committee shall consist of a multidisciplinary and organization-wide approach that provides a coordinated and collaborative effort to patient safety
- B. Members shall include representatives from the following departments:
 - 1. Cardiopulmonary
 - 2. Clinical Informatics
 - 3. Environmental Services
 - 4. Medical Imaging
 - 5. Laboratory
 - 6. Pharmacy
 - 7. Quality
 - 8. Rehabilitation Services
 - 9. Emergency Department
 - 10. Women’s Health
 - 11. Surgical Services
 - 12. Medical Surgical & ICU
 - 13. Dialysis
 - 14. Compliance
 - 15. Infection Prevention
 - 16. Cancer Center
 - 17. Clinic
 - 18. Facilities
 - 19. Frontline staff
- C. Representatives for other departments may be asked to attend the meeting as an ad-hoc member

Chairperson

- A. Representative from Quality, Accreditation, Risk, Patient Safety Department

Reporting

- A. The committee may review and receive reports from various work groups
- B. Report high level patient safety summary to Performance Improvement and Patient Safety (PIPS) Committee quarterly
- C. Report results of Failure Mode Effects Analysis (FMEA) and Root Cause Analysis (RCA) to PIPS and Quality Committee of the Board as they occur
- D. Review and modify the objectives, scope, organization, and effectiveness of the Patient Safety Plan at least annually and revise as necessary. Report evaluation to PIPS Committee and Quality Committee of the Board

Data

- A. Critical Results and Values (Cardiopulmonary, Radiology, and Laboratory)
- B. Moderate & Deep Sedation
- C. Pressure Ulcer
- D. Staffing Adequacy
- E. Clinical Alarm Safety
- F. Occurrence Report trends (Patient safety events, adverse events, sentinel events, good catches, other events as necessary or by request from leadership)
- G. Restraint and Seclusion
- H. Suicide Prevention
- I. Falls
- J. Patient perception of safety and quality of care (HCAHPS)
- K. Culture of Safety Survey
- L. AHRQ Patient Safety Indicators (PSI)
- M. Workplace Violence
- N. Adverse drug events and medication errors are collected, aggregated, and improved upon by Safe Medication Practice Team

Activities, Duties, Responsibilities

- A. Foster and support a positive safety culture across MHSC
- B. Reinforce a non-punitive environment for reporting errors to increase the willingness to report
- C. Collaborate with providers and other support staff to effectively measure, assess, and improve patient safety
 - 1. Monitor, analyze, and collaborate on strategic goals, national patient safety initiatives, and National Patient Safety Goals
 - 2. Review and analyze event trends reported through the hospital's occurrence reporting platform, and identify opportunities for improvement
 - 3. Actively participate in patient safety event investigation or designate a group for the action item
- D. Administer a Culture of Safety Survey biennially to assess potential areas of concern
 - 1. Prioritize action items based on survey results

- 2. Develop action plans based on prioritization of survey results and assist with implementation efforts
- E. Appoint and oversee subcommittees or task forces as needed
- F. Review the progress of improvements monthly
- G. Review and disseminate Patient Safety policies
- H. Prioritize, communicate, and serve as a resource for patient safety initiatives
- I. Reinforce culture of safety during rounding activities
- J. Coordinate patient safety education programs
- K. Environment of care specific findings will be addressed by the Environment of Care Committee
- L. Share lessons learned from safety events

Policies/Procedures

- A. Patient Safety Plan
- B. Performance Improvement and Patient Safety (PIPS) Plan

Regulatory Bodies

It is the intent of this committee to follow the recommendations of the following agencies, to the best of our ability:

- A. CDC – Centers for Disease Control
- B. AHRQ – Agency for Healthcare Research and Quality
- C. IHI – Institute for Healthcare Improvement
- D. The Joint Commission
- E. OSHA – Occupational Safety and Health Administration
- F. ISMP – Institute for Safe Medication Practice
- G. Other applicable State and Federal agencies

Name: _____

Page 1

**Delineation of Privileges
NEPHROLOGY PRIVILEGES**

☐ Initial appointment

 ☐ Reappointment

 ☐ Modification of Privileges

Applicant

Check the “Requested” box for each privilege requested. Applicants have the burden of producing information deemed adequate by the hospital for a proper evaluation of current competence, current clinical activity, and other qualifications and for resolving any doubts related to qualifications for requested privileges.

To be eligible to request privileges in Nephrology, a practitioner must meet the following minimum threshold criteria:

LICENSURE / PROFESSIONAL LIABILITY INSURANCE	MD or DO Licensed to practice medicine in the State of Wyoming Current Wyoming designated DEA Registration and current Wyoming Controlled Substance Registration Professional liability insurance in the amounts of at least: Per Claim: \$1,000,000.00 Aggregate: \$3,000,000.00
EDUCATION / TRAINING	Completion of an approved residency in Internal Medicine by the Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA), and successful completion of an accredited fellowship in nephrology.
CERTIFICATION	Certification in nephrology by the applicable Internal Medicine board for any clinical privileges for which applicant has applied, or be eligible for certification by such board. Once physician is board certified, Maintenance of Board Certification is required.
CLINICAL EXPERIENCE (INITIAL)	Applicants for initial appointment must be able to demonstrate provision of inpatient or consultative services, reflective of the scope of privileges requested, for at least 24 patients during the past 12 months or demonstrate successful completion of an ACGME- or AOA-accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months. Applicants for initial appointment may be requested to provide documentation of the number and types of hospital cases during the past 24 months. Applicants have the burden of producing information deemed adequate by the Hospital for a proper evaluation of current competence, and other qualifications and for resolving any doubts.
CLINICAL EXPERIENCE (REAPPOINTMENT)	To be eligible to renew core privileges in Nephrology, the applicant must meet the following maintenance of privilege criteria: Current demonstrated competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current physical and mental ability to perform privileges requested is required of all applicants for renewal of privileges.
FPPE	FPPE criteria will be assigned by the Department Chair during the approval process.
OTHER REQUIREMENTS	<ul style="list-style-type: none"> Note that privileges granted may only be exercised at the site(s) and setting(s) that have the appropriate equipment, license, beds, staff, and other support required to provide the services defined in this document. Site-specific services may be defined in hospital or department policy. This document is focused on defining qualifications related to competency to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.



Name: _____

Page 2

Requested	CHECK ALL PRIVILEGES/PROCEDURES YOU ARE REQUESTING	Approved
<input type="checkbox"/>	Admit, evaluate, diagnose, treat, and provide consultation to adult patients presenting with illnesses and disorders of the kidney, high blood pressure, fluid and mineral balance, and dialysis. [May provide care to patients in the intensive care setting in conformance with unit policies.] Assess, stabilize, and determine disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services.	<input type="checkbox"/>
<input type="checkbox"/>	Acute and chronic hemodialysis	<input type="checkbox"/>
<input type="checkbox"/>	Continuous renal replacement therapy	<input type="checkbox"/>
<input type="checkbox"/>	Medical management of the kidney transplant patient	<input type="checkbox"/>
<input type="checkbox"/>	Perform history and physical exam	<input type="checkbox"/>
<input type="checkbox"/>	Peritoneal dialysis	<input type="checkbox"/>
<input type="checkbox"/>	Perform outpatient preadmission and history and physical, order non-invasive outpatient diagnostic tests and services, visit patient in hospital, review medical records, consult with attending physician, and observe diagnostic or surgical procedures with the approval of the attending physician or surgeon.	<input type="checkbox"/>
	Administration of Sedation and Analgesia <i>Must be requested separately. Contact Medical Staff Services for privilege form.</i>	

Name: _____

Page 3

ACKNOWLEDGEMENT OF APPLICANT

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and that I wish to exercise at Hospital, and I understand that:

- a. In exercising any clinical privileges granted, I am constrained by Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.

Applicant's Printed Name: _____

Applicant's Signature: _____

Date: _____

DEPARTMENT CHAIR REVIEW

I have reviewed the requested clinical privileges and supporting documentation and make the following recommendations:

- | | |
|--------------------------|---|
| <input type="checkbox"/> | Recommend all privileges as requested |
| <input type="checkbox"/> | Recommend privileges with conditions/modifications (describe): |
| <input type="checkbox"/> | Do not recommend the following requested privileges (rationale for recommendation): |
| <input type="checkbox"/> | I assign _____ to complete the initial FPPE evaluations on this Practitioner. |

Department Chair's Printed Name _____

Department Chair's Signature: _____

Date: _____

FOR MEDICAL STAFF OFFICE USE ONLY

Credentials Committee approval

Date: _____

Medical Executive Committee Approval

Date: _____

Board of Trustees approval

Date: _____

Privileges Effective From: _____ To: _____

Date Form Approved by Specialty: _____ 01/10/2023

Date Form Approved by Department Chair: _____ 01/10/2023

Date Form Approved by Credentials Committee: _____ 01/11/2023

Date Form Approved by MEC: _____ 01/24/2023

Date Form Approved by Board of Trustees: _____

Name: _____

Page 1

Delineation of Privileges

OUTPATIENT PSYCHIATRIC MENTAL HEALTH NURSE PRACTITIONER

☐ Initial appointment ☐ Reappointment ☐ Modification of Privileges

Applicant: Check the “Requested” box for each privilege requested. Applicants have the burden of producing information deemed adequate by the hospital for a proper evaluation of current competence, current clinical activity, and other qualifications and for resolving any doubts related to qualifications for requested privileges.

To be eligible to request privileges as a Psychiatric Mental Health Nurse Practitioner, the APRN meet the following minimum threshold criteria:

LICENSURE / PROFESSIONAL LIABILITY INSURANCE	<ul style="list-style-type: none"> • Current APRN Licensure in State of Wyoming • Current Wyoming designated DEA Registration and current Wyoming Controlled Substance Registration • Professional liability insurance in the amounts of; Per Claim: \$1,000,000.00 Aggregate: \$3,000,000.00
EDUCATION / TRAINING	<ul style="list-style-type: none"> • Completion of a Masters, post-masters, or doctorate from a Nurse Practitioner program accredited by the Commission on Collegiate Nursing Education (CONE), the Accreditation Commission for Education in Nursing (ACEN), or the National League for Nursing Accrediting Commissions (NLNAC).
CERTIFICATION	<ul style="list-style-type: none"> • Current Certification by the American Nurse Credentialing Center (ANCC) or an equivalent nationally recognized body.
CLINICAL EXPERIENCE (INITIAL)	<ul style="list-style-type: none"> • Demonstrated current competence and provision of care, treatment, or services for an adequate volume of patients in the past 12 months, or completion of masters/post master’s degree program in the past 12 months.
CLINICAL EXPERIENCE (REAPPOINTMENT)	<ul style="list-style-type: none"> • Current demonstrated competence and an adequate volume of experience with acceptable results in the privileges requested for the past 24 months based on results of quality assessment/improvement activities and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.
FPPE	<ul style="list-style-type: none"> • FPPE criteria will be assigned by the Department Chair during the approval process.
OTHER REQUIREMENTS	<ul style="list-style-type: none"> • Note that privileges granted may only be exercised at the site(s) and setting(s) that have the appropriate equipment, license, beds, staff, and other support required to provide the services defined in this document. Site-specific services may be defined in hospital or department policy. • This document is focused on defining qualifications related to competency to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.
SCOPE	<p>The PMHNP focuses on individuals across the lifespan (infancy through old age), families, and populations across the lifespan at risk for developing and/or having a diagnosis of psychiatric disorders or mental health problems. The PMHNP provides primary mental health care to patients seeking mental health services in a wide range of settings. Primary mental health care provided by the PMHNP involves relationship-based, continuous and comprehensive services, necessary for the promotion of optimal mental health, prevention, and treatment of psychiatric disorders and health maintenance. This includes assessment, diagnosis, and management of mental health and psychiatric disorders across the lifespan.” (WBON 2022).</p>

Name: _____

Page 2

OUTPATIENT PSYCHIATRIC MENTAL HEALTH NURSE PRACTITIONER		
Requested		Approved
<input type="checkbox"/>	Assess, evaluate, diagnose, treat, and provide consultation to patients of all ages presenting with mental, behavioral, addictive, or emotional disorders, e.g., psychoses, depression, anxiety disorders, substance abuse disorders, developmental disabilities, sexual dysfunctions, and adjustment disorders. Privileges include providing consultation with providers in other fields regarding mental, behavioral, or emotional disorders, pharmacotherapy, psychotherapy, family therapy, behavior modification, consultation to the courts; as well as the ordering of diagnostic, laboratory tests, and prescribing medications.	<input type="checkbox"/>
<input type="checkbox"/>	Conducts individual and group psychotherapy	<input type="checkbox"/>
<input type="checkbox"/>	Conducts preventive screening procedures based on age and history	<input type="checkbox"/>
<input type="checkbox"/>	Develops an age-appropriate treatment plan for mental health problems and psychiatric disorders based on biopsychosocial theories, evidence-based standards of care, and practice guidelines	<input type="checkbox"/>
<input type="checkbox"/>	Develops patient education plan	<input type="checkbox"/>
<input type="checkbox"/>	Formulates and records ongoing assessment of patient's medical, physical, and psychosocial status	<input type="checkbox"/>
<input type="checkbox"/>	Identifies and prescribes non-pharmacological interventions	<input type="checkbox"/>
<input type="checkbox"/>	Identifies medical risks, health risks, and needs	<input type="checkbox"/>
<input type="checkbox"/>	Identifies symptoms of psychiatric illness and analyzes data to determine if psychiatric illness is present	<input type="checkbox"/>
<input type="checkbox"/>	Implements the plan of care with modalities including patient education and case management as indicated, attends and participates in multidisciplinary treatment teams	<input type="checkbox"/>
<input type="checkbox"/>	May serve in a liaison role with other health care providers, health care team members, and family members to facilitate communication to optimize patient recovery	<input type="checkbox"/>
<input type="checkbox"/>	Manages acute and chronic psychiatric conditions in an outpatient setting	<input type="checkbox"/>
<input type="checkbox"/>	Obtains and documents relevant health and medical history	<input type="checkbox"/>
<input type="checkbox"/>	Orders and interprets diagnostic tests	<input type="checkbox"/>
<input type="checkbox"/>	Performs history and physical exam.	<input type="checkbox"/>
<input type="checkbox"/>	Performs preventive health care counseling and instructs patients and/or families on treatment plans.	<input type="checkbox"/>
<input type="checkbox"/>	Recognizes and appropriately responds to medical emergencies.	<input type="checkbox"/>
<input type="checkbox"/>	Safely prescribes pharmacologic agents for patients with mental health problems and psychiatric disorders	<input type="checkbox"/>
<input type="checkbox"/>	Treats acute psychiatric disorders and mental health problems	<input type="checkbox"/>
<input type="checkbox"/>	Treats chronic psychiatric disorders and mental health problems	<input type="checkbox"/>

Name: _____

Page 3

Outpatient Psychiatric Mental Health Nurse Practitioner privileges require mentorship from a physician with privileges at Memorial Hospital of Sweetwater County.

- The purpose of this document is to set clear expectations regarding NPP mentorship and to ensure the Non-Physician Provider is a successful member of the Medical Staff.
- It is the responsibility of the Non-Physician Provider (NPP) to seek out guidance, education, and consultation from their mentoring Physician in accordance with state law, organizational policies, and the Memorial Hospital of Sweetwater County Medical Staff Bylaws and Rules and Regulations.
- The Administrative team will manage the Non-Physician Provider in terms of pay, vacation and CME approval, performance appraisals, and other employee benefits. Under the guidance of the mentoring Physician, Administration will ensure that provider time, patient communication, scheduling, patient access, reception services, patient encounters, prescription processes, order and results processes, technology, revenue cycle, and other resources are properly managed.
- When the Non-Physician Provider is exercising his/her clinical privileges they shall do so in close collaboration with the mentoring Physician, but the mentoring Physician need not be on-site while the Non-Physician Provider is providing services. NPP's being mentored shall regularly and frequently check in with the Physician Staff member regarding his/her treatment of patients, and outcomes.

ACKNOWLEDGEMENT OF MENTORING PHYSICIAN

As mentoring physician, I will mentor the below named Non-Physician provider (NPP), in accordance with state law, organizational policies, and the Memorial Hospital of Sweetwater County Medical Staff Bylaws and Rules and Regulations. By signing as the mentoring Physician, below, I acknowledge that:

- I have reviewed the privilege request of the Non-Physician Provider and agree that the requested privileges are within the skill and scope of the Non-Physician Provider.
- I agree to be readily available by electronic communication or provide an alternate to provide consultation when requested, and to intervene when necessary;
- I agree to assist and/or intervene in the care of any patient when requested by the Non-Physician Provider.
- I agree to mentor the below named individual while they see patients at Memorial Hospital of Sweetwater County Clinics.
- I also agree to notify the Medical Staff Office when I am no longer mentoring this individual.

Non-Physician Provider Signature	Printed Name	Date
----------------------------------	--------------	------

Supervising Physician Signature	Printed Name	Date
---------------------------------	--------------	------

Supervising Physician Signature	Printed Name	Date
---------------------------------	--------------	------

Supervising Physician Signature	Printed Name	Date
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Name: _____

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ACKNOWLEDGEMENT OF APPLICANT

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and that I wish to exercise at Hospital, and I understand that:

- a. In exercising any clinical privileges granted, I am constrained by Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.

Applicant's Printed Name: _____

Applicant's Signature: _____ Date: _____

DEPARTMENT CHAIR REVIEW

I have reviewed the requested clinical privileges and supporting documentation and make the following recommendations:

<input type="checkbox"/>	Recommend all privileges as requested
<input type="checkbox"/>	Recommend privileges with conditions/modifications (describe):
<input type="checkbox"/>	Do not recommend the following requested privileges (rationale for recommendation):
<input checked="" type="checkbox"/>	I assign _____ to complete the initial FPPE evaluations on this Practitioner.

Department Chair's Printed Name _____

Department Chair's Signature: _____ Date: _____

FOR MEDICAL STAFF OFFICE USE ONLY

Credentials Committee approval

Date: _____

Medical Executive Committee Approval

Date: _____

Board of Trustees approval

Date: _____

Privileges Effective From: _____ To: _____

Date Form Approved by Specialty: _____ 01/11/2023

Date Form Approved by Department Chair: _____ 01/13/2023

Date Approved by Credentials Committee: _____ 01/11/2023

Date Approved by MEC: _____ 01/24/2023

Date Approved by Board of Trustees: _____



Name: _____

Page 5

References:

Wyoming Board of Nursing. (2022). APRN Scope of Practice Guidelines, Advisory Opinion. Retrieved from: [APRN Scope of Practice.pdf - Google Drive](#)

The National Organization of Nurse Practitioner Faculties. (2013). Population-Focused Nurse Practitioner Competencies. Retrieved from: <https://cdn.ymaws.com/www.nonpf.org/resource/resmgr/Competencies/CompilationPopFocusComps2013.pdf>.

January Quality Chair Report

New business included accreditations which do not receive any sort of grade or score, it's either pass or fail and both passed.

We had a fairly lengthy and detailed conversation regarding the January Care Compare Refresh. Discussion included comparing MHSC to both Wyoming and also the national numbers.

Discussion about Sepsis took place, control charts, star rating and the dashboard.

Chairs Report

Human Resources Committee Meeting – January 16, 2023

Items to take note of -

- ✓ In the packet is the employee count by department from 2017-2023. It's great information moving forward for budgeting and goal setting.

For detailed information please see the reports and minutes of the meeting.

Kandi Pendleton

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
Human Resources Committee Meeting Minutes - Draft
Monday – January 16, 2023
Zoom

Trustee Members Present by Zoom: Kandi Pendleton, Barbara Sowada

Voting Members Present by Zoom: Suzan Campbell, Amber Fisk, Irene Richardson

Non-Voting Members & Guests Present by Zoom: Tami Love, Kari Quickenden, Amy Lucy, Cindy Nelson

Kandi called the meeting to order and welcomed everyone.

APPROVAL OF AGENDA

The motion to approve the agenda as presented was made by Barbara, second by Irene. Motion carried.

APPROVAL OF MINUTES

The motion to approve the November meeting minutes as corrected was made by Barbara, second by Irene. Motion carried. Amber said she will make the correction to show Kandi was not in attendance and Barbara conducted the meeting. The motion to approve the December meeting minutes as presented was made by Barbara, second by Irene. Motion carried.

ROUTINE REPORTS

Turnover

Amber provided the 2022 turnover data and reviewed highlights. Kandi asked if Human Resources has a goal around the numbers. Amber said our focus is on retention. We want to stay below the national hospital average for turnover.

Open Positions

Amy reported we have 54 open positions and has 6 offers on her desk so there is a lot of movement going on. Amber said we continue to see the number of open positions go down.

Contract Staffing

Amber said we currently have contract staff in ED, ICU, Lab, Respiratory, and Surgical Services. The report shows the total number of contract staff. Kandi noted the numbers are going down. Amber talked about recruitment activities including contingent offers to current students, recruitment events, and sponsorship opportunities. She said we want to grow our own and our efforts will not be limited to nursing.

Employee Injury & Illness Reporting

Amber reviewed the reports she sent to the Committee.

Old Business

Workplace Violence Policy:

Suzan said she and Amber met with Ed Tardoni. She reviewed the changes in the update. Suzan said she will send out the original and what has changed with this current draft. The Committee discussed potential confusion and agreed we can always amend in the future as needed. The motion to send the policy to the Board for third reading and approval was made by Barbara, second by Irene. Motion carried.

Workplace Violence Plan:

Suzan reviewed the one change to the plan regarding leadership responsibilities. The motion to send the plan to the Board for approval was made by Barbara, second by Irene. Motion carried.

New Business

Staffing Levels Report:

Irene reviewed the report and said it starts with 2017. The group agreed this is a good starting point. Kandi thanked Tami for putting this together following her request and requested the report be included in the February board meeting packet.

Next Meeting

The next meeting is scheduled Monday, February 20 at 3:00 p.m.

Human Resources Committee Meeting

Monday, January 16, 2023 @ 3:00pm

Zoom meeting

AGENDA

1. Approval of Agenda
2. Approval of Minutes:
 - November 2022 meeting minutes
 - December 2022 meeting minutes
3. Routine Reports:
 - a. Turnover
 - b. Open Positions
 - c. Contract Staffing
 - d. Employee injury & illness reporting (OSHA 300 log for 2022 to be provided at meeting)
4. Old Business
 - Employee Policies – Workplace Violence Prevention Policy & Plan
5. New Business
6. Executive Session as needed
7. Next meeting—02/20/2023

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
Human Resources Committee Meeting Minutes - Draft
Wednesday – December 21, 2022
Zoom

Trustee Members Present by Zoom: Kandi Pendleton, Barbara Sowada
Voting Members Present by Zoom: Suzan Campbell, Amber Fisk, Irene Richardson
Non-Voting Members & Guests Present by Zoom: Tami Love, Shawn Bazzanella, Eddie Boggs, Ruthann Wolfe, Cindy Nelson

Kandi called the meeting to order and welcomed everyone.

APPROVAL OF AGENDA

The motion to approve the agenda as presented was made by Barbara, second by Irene. Motion carried.

APPROVAL OF MINUTES

Amber reported the November minutes were not available due to computer issues. The November and December minutes will be approved at the January meeting.

ROUTINE REPORTS

Turnover

Amber reviewed the turnover report and said we are at 25% for the rolling 12 months period which is still below the national average of 27-28%.

Open Positions

Amber reported we currently have 50 open positions and we are focusing recruitment efforts on critical positions.

Contract Staffing

We have seen a big drop off in contract staff numbers. Tami said we are still over budget with costs at \$335,000 for November but down significantly. Irene said we were over \$1M in May and April of last year and we knew we could not sustain those high numbers. Kandi said the numbers are moving in the right direction. Barbara said there have been impressive efforts in this area.

Employee Injury & Illness Reporting

Amber said there are no injuries/illnesses to report.

Old Business

Workplace Violence Policy:

Suzan submitted a written visitor policy for no weapons thinking that this is what Mary was looking for. After discussion it was decided that this policy would be more detrimental and be a burden on our security team. The committee decided that we don't need a visitor policy just employee policy. The employee policy will be submitted to the board.

New Business

Employee engagement Survey:

Waiting for review by senior leadership of results.

Next Meeting

The next meeting is scheduled – 1/16/2023

DRAFT

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
Human Resources Committee Meeting Minutes - Draft
Monday – November 28, 2022
Zoom

Trustee Members Present by Zoom: Ed Tardoni, for Kandi Pendleton, Barbara Sowada
Voting Members Present by Zoom: Suzan Campbell, Amber Fisk, Irene Richardson
Non-Voting Members & Guests Present by Zoom: Tami Love, Shawn Bazzanella, Eddie Boggs, Ruthann Wolfe

Kandi called the meeting to order at 3:04pm and welcomed everyone.

APPROVAL OF AGENDA

The motion to approve the agenda as presented was made by Suzan, second by Irene. Motion carried.

APPROVAL OF MINUTES

Amber made a motion to approve the October 2022 HR Committee Meeting minutes, Barbara seconded. Motion carried.

ROUTINE REPORTS

Turnover

Amber reviewed the turnover report and said we are at 26% for the rolling 12 months period which is still below the national average of 27-28%. However, it is higher than the 25% reported in September.

Open Positions

Amy reported we currently have 41 open positions; which is less than last month. The positions are broken down as follows:

- 31 - Full Time positions
- 3 - Part Time Positions
- 7 - PRN positions

Contract Staffing

We continue to see a decrease in contract staffing. These numbers correlate to the open positions report and Leaders as well as HR are continuing strong recruitment efforts and negotiation tactics when extending or requesting additional contracts.

Employee Injury & Illness Reporting

Amber shared the OSHA 300 log as reported by Employee Health. Amber stated that we will see in an increase in employee falls within the next month as the weather continues to bring snow and ice.

Old Business

Workplace Violence Policy:

Suzan submitted the Workplace Violence Policy & Plan once again with recent edits. Barbara asked to be sent both via email so that she may review closer. Barbara said she would email the committee as soon as possible with any suggestions or edits.

New Business

Employee engagement Survey:

Waiting for a more detailed review by senior leadership of results so that it may be shared with Leadership.

Next Meeting

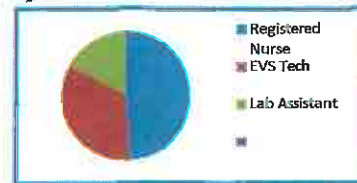
The next meeting is scheduled – 12/19/2022

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

2022 Turnover Data (as of 12/31/2022)

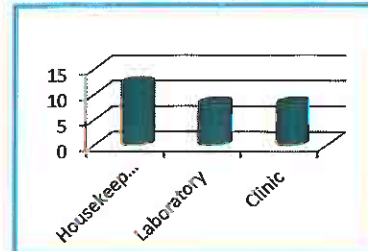
Top Position(s) / Turnover

	2022	% of All	% of Pos
Registered Nurse	20	19%	17%
EVS Tech	14	13%	54%
Lab Assistant	7	7%	28%



Top Department(s) / Turnover

	2022	% of All	% of Dept
Housekeeping	12	11%	75%
Laboratory	8	7%	18%
Clinic	8	7%	7%

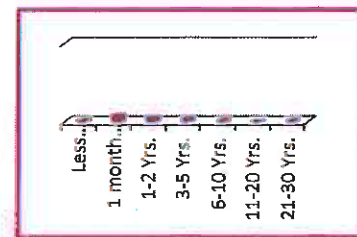


Top Reason(s) / Turnover

	2022	%
Other Employment	39	36%
Discharged	15	14%
Resigned	17	16%
Retired	10	9%

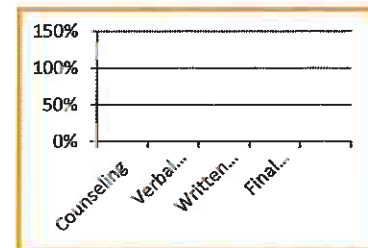


	2022	%
Length of Service		
Less than 30 days	8	7%
1 month - 1 Yr	43	40%
1-2 Yrs.	22	21%
3-5 Yrs.	15	14%
6-10 Yrs.	9	8%
11-20 Yrs.	2	2%
21-30 Yrs.	8	7%
Total	107	

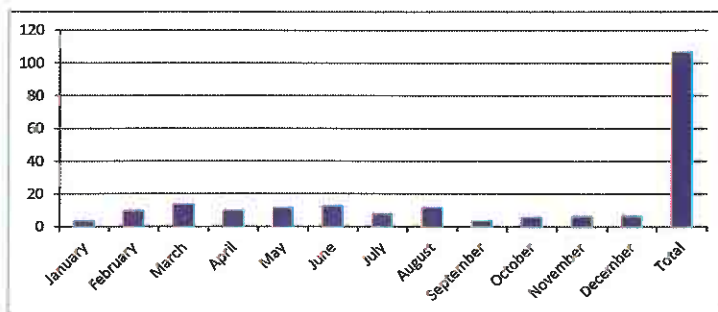


Corrective Action

Counseling
Verbal Warning
Written Warning
Final Written Warning



<u>2022 Separations</u>	<u>Separations</u>	<u>New Employees</u>	<u>Total Employees</u>		<u>Overall Turnover</u>
			534		
January	4	25	555	2009	96
February	10	10	555	2010	98
March	14	9	550	2011	79
April	10	8	548	2012	104
May	12	11	547	2013	113
June	13	10	544	2014	88
July	8	4	540	2015	97
August	12	16	554	2016	86
September	4	13	563	2017	116
October	6	9	566	2018	96
November	7	6	565	2019	93
December	7	4	562	2020	67
Total	107			2021	129
				2022	107



<u>Separations</u>	
Involuntary	26
Voluntary	81
Total	107

<u>Classifications</u>	
RN	20
Classified	87
Total	107

Rolling 12

Separations

Jan 21 - Jan 22	134	24%
Feb 21 - Feb 22	138	25%
March 21 - March 22	147	27%
April 21 - April 22	144	26%
May 21 - May 22	144	26%
June 21 - June 22	150	28%
July 21 - July 22	150	28%
Aug 21 - Aug 22	154	28%
Sept 21 - Sept 22	143	25%
Oct 21 - Oct 22	145	26%
Nov 21 - Nov 22	142	25%
Dec 21 - Dec 22	132	23%

Rehire Rate

Rehires

Jan 21 - Jan 22	13	2%
Feb 21 - Feb 22	15	3%
March 21 - March 22	15	3%
April 21 - April 22	13	2%
May 21 - May 22	16	3%
June 21 - June 22	13	3%
July 21 - July 22	13	2%
Aug 21 - Aug 22	11	1%
Sept 21 - Sept 22	14	2% 1 rehire from covid time frame
Oct 21 - Oct 22	13	2%
Nov 21 - Nov 22	17	3%
Dec 21 - Dec 22	15	3%

Requisition Number	Job Title	Schedule	Shift	Department
Clinical				
3161	BHT Coordinator	Regular Full Time	Days	BEHAVIORAL HEALTH
3175	C.N.A.	Regular Part Time	Days	MED/SURG
3067	C.N.A.	Regular Part Time	Nights	MED/SURG
3168	C.N.A.	PRN	Rotating	MED/SURG
3083	Central Sterile Tech	Regular Part Time	Variable	CENTRAL STERILE
3036	Med. Tech	Regular Full Time	Rotating	LABORATORY
2838	Med. Tech	Regular Full Time	Variable	LABORATORY
2689	Med. Tech	Regular Full Time	Variable	LABORATORY
3148	Medical Assistant	Regular Full Time	Variable	CLINIC
3156	Medical Assistant	Regular Full Time	Variable	CLINIC
3145	Medical Assistant	Regular Full Time	Variable	CLINIC
3159	Nurse Practitioner	Regular Full Time	Days	CLINIC
3021	Nurse Practitioner	Regular Full Time	Days	CLINIC
3176	Rad. Tech. I (ARRT)	Regular Full Time	Variable	MEDICAL IMAGING
3111	Rad. Tech. II (ARRT)	Regular Full Time	Days	MEDICAL IMAGING
2902	Reg. Resp. Therapist	Regular Full Time	Variable	CARDIOPULMONARY
2903	Reg. Resp. Therapist	Regular Full Time	Variable	CARDIOPULMONARY
2743	Reg. Resp. Therapist	Regular Part Time	Variable	RESPIRATORY THERAPY
2744	SLP Lab T-Gist/Rpsgt	Regular Full Time	Nights	SLEEP LAB
3061	Social Worker	Regular Full Time	Variable	CARE MANAGEMENT
2962	Student Radiographer - Medical Imaging	Regular Full Time	Variable	MEDICAL IMAGING
3180	Rad. Tech. I (ARRT)	PRN	Days	CLINIC

Filters

All Active Facility; All Active Department; All Active ; Recruiters:All; Hiring Manager:All; JobStatus:Active - Posted; Optimize To Print:No; Display Job Summary:No; Custom Fields:No Custom Fields; Dates:6/1/

Non-Clinical				
2958	Collections Clerk	Regular Full Time	Days	PATIENT FINANCIAL SERVICES
3151	EVS Technician	Regular Part Time	Variable	HOUSEKEEPING
3171	HIM Tech	Regular Full Time	Days	HEALTH INFORMATION MANAGEMENT
3172	Laundry Worker	Regular Part Time	Variable	LAUNDRY & LINEN
3081	Maint Mech/Groundskeeper	PRN	Days	MAINTENANCE
2796	Patient Access Specialist I	PRN	Variable	ADMITTING
2851	Patient Access Specialist I	PRN	Variable	ADMITTING
2861	Patient Access Specialist I	PRN	Variable	ADMITTING
3143	Patient Access Specialist I	Regular Full Time	Variable	ADMITTING
2832	Patient Access Specialist I	PRN	Variable	ADMITTING
3152	Security Officer	Regular Full Time	Variable	SECURITY
3153	Security Officer	Regular Full Time	Variable	SECURITY
Nursing				
2830	Clinical Coordinator	Regular Full Time	Days	SURGICAL SERVICES
2985	LPN - Hospital	PRN	Variable	MED/SURG
3146	Quality Analyst RN	Regular Full Time	Days	QUALITY
3137	Registered Nurse	Regular Full Time	Days	ICU
3068	Registered Nurse	Regular Full Time	Days	ICU
3105	Registered Nurse	Regular Full Time	Days	ICU
2887	Registered Nurse	Regular Full Time	Nights	ICU
3106	Registered Nurse	Regular Full Time	Nights	ICU

Filters

All Active Facility; All Active Department; All Active ; Recruiters:All; Hiring Manager:All; JobStatus:Active - Posted; Optimize To Print:No; Display Job Summary:No; Custom Fields:No Custom Fields; Dates:6/1/

2879	Registered Nurse	Regular Full Time	Nights	ICU
2880	Registered Nurse	Regular Full Time	Nights	ICU
3013	Registered Nurse	PRN	Variable	ICU
3169	Registered Nurse	PRN	Variable	MED/SURG
3107	Registered Nurse	Regular Full Time	Days	MED/SURG
3144	Registered Nurse	Regular Full Time	Nights	MED/SURG
2885	Registered Nurse	Regular Full Time	Nights	MED/SURG
3141	Registered Nurse	Regular Full Time	Variable	RECOVERY ROOM
3109	Registered Nurse	Regular Full Time	Days	SURGICAL SERVICES
3076	Registered Nurse	Regular Full Time	Variable	EMERGENCY DEPARTMENT
3077	Registered Nurse	Regular Full Time	Variable	EMERGENCY DEPARTMENT
3090	Registered Nurse	Regular Full Time	Nights	EMERGENCY DEPARTMENT
3092	Registered Nurse	Regular Full Time	Nights	EMERGENCY DEPARTMENT
3131	Registered Nurse - Clinic	Regular Full Time	Variable	CLINIC - WalkIn

Filters

All Active Facility; All Active Department; All Active ; Recruiters:All; Hiring Manager:All; JobStatus:Active - Posted; Optimize To Print:No; Display Job Summary:No; Custom Fields:No Custom Fields; Dates:6/1/

Department	Position	Shift	Start Date	End Date	Filled by Perm or Open	Guaranteed Hours	Hourly Rate \$	Neg. Rate
ED	RN	Nights	10/24/2022	4/22/2023	OPEN #3092	36	135.00	after 1/21 extend \$131
ED	RN	Nights	12/5/2022	3/4/2023	OPEN #3075	36	135.00	
ED	RN	Days	10/3/2022	4/1/2023	OPEN #3076	36	135.00	After 12/30 \$128
ED	RN		8/28/2022	2/12/2023	OPEN #3090	36	130.00	\$215 prior 7/22, 150 prior 11/7
ED	RN		10/11/2021	1/7/2023	Filled #2889 6/20	36	132.00	\$150 prior 7/9, 1/7 @ \$131
ED	RN	Mids	9/12/2022	3/18/2023	Filled #2916 9/12	36	135.00	
ICU	RN	Nights	10/17/2022	1/14/2023	OPEN #2879	36	125.00	
ICU	RN	Nights	10/17/2022	1/14/2023	OPEN #3106	36	125.00	
ICU	RN	Days	5/16/2022	4/8/2023	OPEN #2844	36	122.00	\$150 prior 8/6, \$130 prior 11/12
ICU	RN	Days	8/1/2022	4/29/2023	OPEN #2857	36	125.00	130 prior to 10/29
ICU	RN		1/3/2022	12/31/2022	OPEN #3137		115.00	
ICU	RN	Days	8/29/2022	4/8/2023	OPEN #3068		99.00	
Laboratory	MT		11/7/2022	2/11/2023	OPEN #2649	40	100.00	
Med/Surg	RN	changed to Days, 3144 will be switched to nights		12/3/2022	Filled #2919	36	120.00	
Med/Surg	RN	Variable	10/4/2022	12/31/2022	Filled #2902	36	120.00	
Med/Surg	RN	Nights	11/7/2022	2/11/2023	OPEN #2885	36	120.00	
Med/Surg	RN	Days	1/3/2023	4/1/2023	OPEN #3107	36	125.00	
Respiratory	RRT		11/14/2022	2/11/2023	OPEN #2902	36	115.00	
Respiratory	RRT		5/9/2022	2/18/2023	OPEN #2743 (PI)	36	115.00	\$140 prior to 8/5 - \$120 prior 11/5
Respiratory	RRT	Variable	1/1/2023	4/1/2023	OPEN #2903	36	115.00	
Surgical Services	RN-OR	Days	11/28/2022	2/15/2023	OPEN #3108	40	142	



Approved N/A
Review Due N/A

Document **Employee**
Area **Policies**

EMPLOYEE POLICIES - WORKPLACE VIOLENCE PREVENTION POLICY

PURPOSE

Memorial Hospital of Sweetwater County (MHSC) is committed to providing a safe, violence-free workplace for our employees. MHSC has a zero tolerance policy for violence, threats, intimidation, bullying, or any other acts of aggression or violence. This policy also applies to MHSC off-campus sponsored functions and events.

MHSC prohibits the possession of "dangerous or deadly weapons" by employees on Hospital property at all times, including Hospital parking lots and Hospital vehicles. A "dangerous or deadly weapon" is one that is likely to **may** cause death or great bodily harm. (delete underlined language replace with highlighted language)

However, Hospital security officers, who have been properly trained and certified to carry and use/discharge a Taser, may carry a Taser while on duty. Hospital employees may need or be required to use and/or possess a "weapon" as defined above, as part of their job duties and responsibilities. (delete underlined language and insert highlighted language)

The Hospital reserves the right to inspect all belongings of employees on its premises, including briefcases, purses and handbags, gym bags, and personal vehicles on Hospital property. (delete underlined language)

DEFINITIONS

Workplace Violence: Any threatening or aggressive behavior or verbal abuse that occurs in the work setting. This includes but is not limited to assault, battery, beatings, stabbing, suicide, shootings, rapes, near-suicides, psychological traumas, threats or obscene phone calls, being followed, sworn or shouted at, intimidation or harassment of any nature.

Workplace Violence Prevention Team: Members selected to assist with the Workplace Violence

Prevention Program including, but not limited to: employees from Clinical Leadership, Senior Leadership, Security, Facilities, Human Resources, Employee Health and front-line staff.

Zero Tolerance: Violence of any kind as defined above will not be tolerated in the workplace. Any occurrence will be taken seriously and responded to according to the following procedures:

POLICY

- I. Consistent with MHSC's Mission, Vision and Values, this Policy establishes the parameters of the Workplace Violence Prevention Program.
 - A. The MHSC Workplace Violence Prevention Program is made up of several components which include
 1. Workplace Violence Prevention Plan
 2. Workplace Violence Prevention Team and
 3. Workplace Violence Prevention Policy (this document).
 - B. MHSC is committed to the physical safety and emotional well-being of its employees, patients, families, contractors, vendors, customers, visitors and others who interact with its employees.
 - C. MHSC takes a zero-tolerance position to violence in the workplace. Jokes or offensive comments regarding violent acts will be taken seriously and will not be tolerated.
 - D. The Hospital Human Resources Director and Workplace Violence Prevention Team is responsible and has authority for the comprehensive plan for prevention of workplace violence.
 - E. Hospital leadership supports zero tolerance of workplace violence through a system of accountability for involved managers and employees.
 1. Any employee found in violation of this policy may be subject to disciplinary action up to and including termination of employment.
 2. Violations will be addressed by human resources, management, administration and/or security.

II. EMPLOYEE RESPONSIBILITIES

- A. Notify Security of any potentially threatening, aggressive or violent situations. Security personnel are authorized to respond and assist where necessary to de-escalate situations that are a threat to the safety of patients, staff, or visitors. Security personnel are authorized to contact law enforcement for assistance as Security believes is appropriate.
- B. Immediately report to their supervisor, Administration or Human Resources any direct or indirect threats, or any behavior that is intimidating, violent or potentially violent, or otherwise in violation of this policy, and complete an occurrence report within the Hospital's occurrence reporting system as soon as possible after the event.
- C. If the incident involves a patient's behavior towards an employee, the attending

physician will be notified.

- D. In cases of domestic violence involving the employee, the employee may report this to their supervisor and/or Human Resources so security options for the employee can be provided.
- E. Understand and comply with the workplace violence prevention program and other safety and security measures:
 - A. Depending on the severity of the situation, call 9-911.
 - B. If a weapon is involved, follow procedures for Code Silver.
 - C. Specific procedures for a physically aggressive patient are followed per Security procedures (or policy).

III. HOSPITAL RESPONSIBILITIES

- A. Require Staff with primary roles and responsibilities involving Behavioral Health, Security and Emergency Services to attend de-escalation training.
- B. Develop a comprehensive plan for prevention of workplace violence, under the direction of the Human Resources Director and the Workplace Safety Team.
- C. Disseminate a clear policy of zero tolerance for workplace violence in the orientation period and ongoing staff education.
- D. Disseminate a clear policy of zero tolerance for violence and that no weapons are allowed on Hospital property to visitors and patients. State clearly to patients, families and employees that any threatening or aggressive behavior or violence will not be tolerated or permitted. Staff should review the zero-tolerance policy with patients and or families as needed.
- E. Ensure there are no reprisals against employees who report occurrences, and keep information confidential, as appropriate.
- F. Educate employees to promptly report incidents and suggest ways to reduce or eliminate risks.
- G. Implement post violent incident procedures of employee support, debriefing, medical care for victims, referrals for care and reporting and filing claims, as appropriate.
- H. Ensure that environmental controls including the following are in place:
 - A. Alarm systems and other security devices
 - B. Closed circuit video recording for high risk areas
 - C. Door locking security systems
- I. Provide training and education to staff regarding workplace violence prevention:
 - A. Response to alarms and pages
 - B. Causes and early recognition of escalating violent behavior
 - C. Diffusion of volatile situations
 - D. Multi-cultural sensitivity
 - E. Methods for dealing with distraught patients, family members or friends of

patients.

F. Location and operation of safety devices.

G. How to call security and police department.

H. Review of the Workplace Violence Prevention policy.

J. Implement a record keeping/tracking system for violent incidents through:

- A. Monitoring of workplace violence will be done through the Workplace Violence Prevention Team including monitoring of the OSHA log, security reports and incident reports to determine overall effectiveness of workplace violence prevention team and to identify deficiencies or changes that should be made.
- B. Maintenance of recording and tracking of all training programs.
- C. Evaluation of events after the event to determine action steps to be taken to prevent further occurrences.
- D. Identifying trends which will be responded to by the Workplace Violence Prevention Team.

Approved: Board

Approval Signatures

Step Description

Approver

Date

Approved N/A

Review Due N/A



Document **Human**
Area **Resources**
Reg. **TJC**
Standards **EC.02.01.01**
EP1, TJC
EC.04.01.01
EP 6, TJC
HR.01.05.03,
TJC
LD.03.01.01

Workplace Violence Prevention Plan

PURPOSE

Consistent with Memorial Hospital of Sweetwater County's (MHSC) Mission, Vision and Values to provide compassionate, safe and quality treatment and services this Plan establishes the parameters of MHSC's Workplace Violence Prevention Program. The MHSC Workplace Violence Prevention Program is made up of several components which include 1) Workplace Violence Prevention Plan 2) Workplace Violence Prevention Policy and 3) Workplace Safety Team. The purpose of the Plan is to provide guidelines for conducting work-site analysis related to workplace violence, including physical and human factors; responding to identified risks to minimize the risk of violence occurring in the workplace; establishing and maintaining a safe, secure environment, and complying with law and regulation. This Plan applies to the entire MHSC organization, its medical clinics and all adjacent structures and grounds.

DEFINITIONS

Workplace Violence: Any threatening or aggressive behavior or verbal abuse that occurs in the work setting. This includes but is not limited to assault, battery, beatings, stabbing, suicide, shootings, rapes, near-suicides, psychological traumas, threats or obscene phone calls, being followed, sworn or shouted at; intimidation or harassment of any nature.

- **Zero Tolerance:** Violence of any kind as defined above will not be tolerated in the workplace. Any incidents will be taken seriously and responded to according to the following procedures.

OBJECTIVES

1. To establish processes for assessing the risk of workplace violence at the organization.

2. To describe processes for creating and maintaining policies and procedures that address workplace violence and mitigate identified risks.
3. To establish and maintain strong communication with identified community partners, with the purpose of addressing mutual concerns and goals.
4. To determine the feasibility and practicality of various detection equipment such as metal detectors.
5. To place personal panic alarms in high risk areas.

RESPONSIBILITIES AND REPORTING STRUCTURE

Staff responsibilities:

- I. Staff will report any Workplace Violence occurrences to Security and their immediate supervisor and document the occurrence within the Hospital's occurrence reporting system.
- II. Staff are encouraged to seek assistance following any Workplace Violence incident.
 - A. Assistance may include, but is not limited to: Seeking medical attention, debriefing, and use of the Employee Assistance Program (EAP).
- III. In the event injuries occur as a result of a physical altercation the employee's supervisor must investigate the event and file an accident/incident/injury report with Employee Health.
- IV. In the event patients or visitors are injured during a physical altercation, an occurrence report shall be completed in the occurrence reporting system.
- V. In the event of a Workplace Violence incident is perpetrated by a patient(s) and/or a visitor(s), a note will be added to their respective medical record (if applicable) to help staff recognize when heightened awareness is needed.

Leadership responsibilities: LD.03.01.01

- I. Name an individual accountable for oversight of the workplace violence prevention program. (delete sentence)
- II. The Workplace Violence Prevention Program will be led by the Human Resources Director or designee. (delete sentence)
- III. Maintain and implement this Plan and its associated policies and procedures.
- IV. Establish and maintain a culture of safety in which staff, patients, and others feel safe reporting occurrences or workplace violence.
- V. Establish the Workplace Safety Team. The Workplace Safety Team will include, at a minimum, the individual(s) accountable for the workplace violence prevention program; the Safety Officer; and representatives from leadership, legal, security, facilities, and front-line staff. Representatives from community organizations, government, law enforcement, government health departments and other authorities, and other health care organizations may participate in the Safety Team's activities, as appropriate.
- VI. The Workplace Safety Team will:
 - A. Design and implement the workplace violence prevention program.

- B. Report to leadership and the Board of Trustees (through committees) on the performance of the workplace violence prevention program and all related improvement activities.

VII. The individual(s) accountable for the workplace violence prevention program are:

- A. Human Resources Director
- B. Safety Officer
- C. Security Supervisor & Director

VIII. Those accountable for the program will:

- A. Participate in the activities of the Workplace Safety Team.
- B. Collect and analyze data for monitoring purposes and delegate mitigation responsibilities once risks are identified.
- C. Collaborate with relevant committees, departments, and teams to collect and analyze data associated with workplace violence risks. These groups may include but are not limited to the following:

1. Environment of Care Committee
2. Emergency Management Committee
3. Human Resources Committee
4. Security Team
5. Safety Officer
6. Human Resources
7. Facilities Department
8. Clinical Leaders
9. Quality Department

- IX. Collaborate with community partners, such as law enforcement, to collect and analyze data related to external factors that impact the risk of workplace violence at the organization.
- X. Ensure Hospital's compliance with the Workplace Violence Prevention Program and its associated policies and procedures.
- XI. Document and report to the Human Resources Committee any activities within the Workplace Violence Prevention Program.
- XII. Identify community partners to serve as resources and collaborators in the Workplace Violence Prevention Program.
- XIII. Communicate with community partners about the program and mutual concerns and interests.
- XIV. Document contacts and communication with community leaders and representatives.
- XV. Conduct drills to test facility response to Workplace Violence events.

PROCESSES

- I. Risk assessment and mitigation of identified risks is necessary in order to prevent workplace violence from occurring or re-occurring. Risk Assessment and mitigation includes evaluation of physical locations in which workplace violence may occur and a review of Hospital's organizational processes to determine if there are processes and systems in place that may increase the risk of workplace violence. The goal is for MHSC to be proactive, learning what may happen before it occurs, so protective or preventative measures can be taken.
- II. The individuals accountable for the Workplace Violence Plan performs the following activities:
 - A. Uses established data collection processes to collect data about the organization that relate to workplace violence.
 - B. Monitors data on workplace violence regarding the following factors:
 1. Environmental controls (including, but not limited to: lighting, exits and door locks)
 2. Exterior facilities (including, but not limited to: 911 service overhead paging systems and panic buttons)
 3. Communications (including, but not limited to: parking lots and garages, lighting and landscaping)
 4. Administrative controls (including, but not limited to: security badges, identification of security-sensitive areas, and forensic patient management)
 5. Medication management, including diversion risk
 6. Human Resources (including, but not limited to: hiring practices, background checks and complaints of unacceptable behavior)
 7. Security Department incident logs
 - C. Considers at least the following sources when collecting and monitoring data:
 1. Environmental tours or rounds (such as through use of environmental risks for workplace violence assessment checklist) at minimum quarterly
 2. Occurrence reports
 3. Sentinel event reports
 4. HVA reports
 5. Emergency preparedness drill report
 6. Reports of staff behavior that violate the culture of safety
 7. Reports from community partners
 8. Satisfaction surveys from patients, staff and others
 9. Collaborates with the security team and the Information Services department to establish and maintain a system for reporting occurrences of workplace violence and concerns related to potential workplace violence.

- D. Ensures that MHSC's occurrence reporting system meets the following criteria:
 - 1. Is accessible at all times, including outside normal operating hours
 - 2. Enable secure, confidential communication
 - 3. Establish a dedicated phone number for reporting
- E. Collects relevant details related to the occurrence, incident or concern, such as individual(s) involved, time and date, location within the organization and description of the occurrence or situation.
- F. Conducts an annual work-site analysis to assess risks related to workplace violence prevention.
- G. Identifies areas of actual or potential risk that can be prioritized for improvement.
- H. Uses the collected data to design and implement changes that address prioritized workplace violence risks.
- I. Monitors the results of implemented changes to determine their effectiveness, according to the organization's performance improvement policies and procedures.
- J. Provide patient and visitor education through the admission process.
- K. Place signage throughout all MHSC campuses indicating no weapons allowed.

III. POLICIES AND PROCEDURES:

- A. The Hospital's policies and procedures should reflect best practices and conform to laws and regulations that address workplace violence and its prevention. Leadership considers the impact of the organization's policies and procedures on workplace violence risks and supports changes to policies and procedures that reduce those risks.
- B. Leadership performs the following activities:
 - 1. Ensures that all relevant policies and procedures consider the impact on workplace violence risks.
 - 2. Ensures that the Hospital has policies and procedures in place that address workplace violence and its prevention.
 - 3. Ensures that the building and its physical components do not contribute to workplace violence risks.
 - 4. Includes workplace violence prevention in its performance improvement activities.
 - 5. Allocates resources necessary to establish and maintain the workplace violence prevention plan.

IV. EDUCATION AND ORIENTATION

- A. All employees will participate in orientation or educational activities related to the Workplace Violence Prevention Policy and Plan.
 - 1. New Employee Orientation:
 - a. Orientation shall include at least the following elements:

- i. General understanding and awareness of workplace violence prevention issues, policies and procedures.
- ii. Reporting procedures for actual or potential workplace violence occurrences.
- iii. Information on the organization's Code of Conduct and Culture of Safety.
- iv. Job-Specific Training:
 - a. Supervisors ensure that new employees are oriented to job-specific policies and procedures related to workplace violence prevention duties and responsibilities. The information provided may vary depending on the individual's job duties and responsibilities, the area in which the individual works, and other factors.

2. Annual Continuing Education:

- a. All employees are required to participate in annual education and periodic training activities related to workplace violence prevention, as appropriate to their job duties and responsibilities.
- b. The organization determines the required activities based on needs and available resources. Activities may include but are not limited to the following:
 - i. De-escalation training.
 - ii. Staff meetings.
 - iii. Outside classes.
 - iv. On-line learning modules.
 - v. Emergency Preparedness Drills. All employees are required to participate in emergency preparedness drills, including those that specifically address workplace violence. The individuals accountable for the Workplace Violence Prevention Plan and Program will collaborate with the Emergency Preparedness Committee to develop and conduct drills for workplace violence scenarios, such as active shooter drills.

V. PERFORMANCE IMPROVEMENT ACTIVITIES

A. PERFORMANCE MONITORING

- 1. The Workplace Safety Team oversees development of appropriate performance standards for the workplace violence prevention program. The Workplace Safety Team collects and documents data for the identified performance indicators and reports at least quarterly to senior leadership

and the Human Resources Committee.

B. EVALUATION

1. The Workplace Safety Team evaluates the workplace violence prevention policy and this Plan, including efficacy, continuous relevance, and potential areas for improvement. This evaluation process occurs at the following times:
 - a. At least annually.
 - b. Whenever there are changes to the organization, its services, or its policies and procedures that could impact workplace violence risks.
 - c. Whenever there are changes to the community or patient population that could impact workplace violence risks.
 - d. Whenever a significant workplace violence event has occurred.

Approval Signatures

Step Description

Approver

Date

	2017	2018	2019	2020	2021	2022	2023
Department/Position	# of positions	# of positions	# of positions	# of positions	# of positions	# of positions	# of positions
600MED/SURG	37	34	33	31	29	25	28
C.N.A.	7	7	7	7	6	10	10
Clinical Coordinator	1	1	1	1	1		1
Director Acute Care Svcs	1		1	1	1	1	1
N.U.S.	1		3	1	1	1	1
Registered Nurse	27	26	21	21	20	12	14
LPN						1	1
605BEHAVIORAL HEALTH	11	8	10	8	7	9	8
Behavior Health Tech	11	8	9	7	6	8	8
BHT Coordinator			1	1	1	1	
610POST PARTUM	7	7	6	7	9	9	9
C.N.A.	1	2	2	2	3	3	4
Director of OB	1	1			1		
N.U.S.	2	1	1	1	1	1	1
Registered Nurse	3	3	3	3	2	4	3
Clinical Coordinator				1	2	1	1
611NURSERY	9	8	8	8	6	9	8
Registered Nurse	9	8	7	8	6	9	8
Charge RN			1				
612LABOR AND DELIVERY	7	7	7	6	10	7	8
Director of OB		1	1	1		1	1
Registered Nurse	6	6	6	5	10	6	7
Clinical Coordinator	1						
615OUTPATIENT SERVICES			2	3	3	4	4
Registered Nurse			2	3	3	4	4
620ICU	16	16	13	14	17	10	11
C.N.A.	3	3	2	1	3	1	1
Clinical Coordinator	1	1		1			1
Dir of ICU, Infect, Prev, Emp. Health	1	1					
Registered Nurse	11	11	11	12	14	9	9
630SURGICAL SERVICES	13	16	14	12	12	13	14
Clinical Coordinator		1	1	1	1		
Director Surgical Svcs	1	2	1	1	1		1
O. R. Scrub Tech	3	1	2	3	1	1	1
O.R. Aide I	2	2	2	1	1	2	2
Registered Nurse	6	9	7	6	8	10	9
Surgical Services Buyer	1	1	1				1
631SAME DAY	10	8	7	8	7	6	9
OR Attendant	1	1	1	1	1	1	1
Registered Nurse	9	7	6	7	6	5	8
633RECOVERY ROOM	4	8	7	5	6	2	4
Registered Nurse	4	8	7	5	6	2	4
634CENTRAL STERILE	4	4	3	3	4	4	3
Central Sterile Tech	4	4	3	3	4	3	2
Lead Sterile Tech						1	1
640DIALYSIS	4	5	10	11	9	11	11
Certified Patient Care Tech				1	1	2	2
Charge RN	1	1	1	1		1	
Clinical Coordinator			1	1	1	1	1
Director Dialysis	1	1	1	1	1		1
Patient Care Tech			4	3	3	3	2
Registered Nurse	2	3	3	4	3	4	5
650EMERGENCY DEPARTMENT	28	30	29	26	31	23	24
CDI Specialist		1		1			
Charge Data Review Specialist	1	1	1	1	1		
Clinical Coordinator	2	1	2	1	1	1	1
Dir. Emerg. Svcs	1				1	1	1
Emergency Dept. Technician	4	2	3	1	2	2	1
N.U.S.	3	3	3	3	4	3	3
Paramedic		2	2		1	2	2
Registered Nurse	17	20	18	19	21	14	16
651TRAUMA	2	1	2		1	1	1
Trauma Coordinator	1		1		1	1	1
Trauma Data Registrar	1	1	1				
652SANE	2	1	1	1			
SANE Coordinator	1	1	1	1			
660RADIATION ONCOLOGY	8	6	7	7	7	8	7
Admin. Dir. & Cert. Dosimetrist	1	1	1	1	1	1	1
Cancer Resource Coordinator			1	1	1	1	1
Clin Collections Clerk/Recept	1	1	1				
Clinical Trials Facilitator				1	1	1	1
M. D. - Oncologist	1	1	1		1	1	1
Nurse Practitioner				1		1	
Radiation Therapist	4	2	2	2	2	2	2
Registered Nurse	1	1	1	1	1	1	1
661MEDICAL ONCOLOGY	6	7	8	7	7	9	9
Clin Collections Clerk/Recept	1	1	1	1			
Clinical Coordinator	1	1	1	1	1	1	1
Clinical Social Worker						1	1
M. D. - Oncologist	1	1	1	1	1	1	1

Medical Assistant II				1		1	1
Nurse Practitioner			1		1		
Registered Nurse - Chemo	3	4	4	3	4	5	5
700LABORATORY	34	36	37	39	41	41	38
Director Laboratory	1	1	1	1	1	1	1
Lab Assistant II			8	5	8	7	9
Lab Asst / Phlebotomist	15	17	10	14	14	17	13
Lab Supervisor	1	1	1	1	1	1	1
Lead Lab Assistant				1	1	1	1
Med. LabTech	9	9	10	8	9	7	6
Med. Tech	8	8	7	9	6	6	6
PoC Coordinator/Asst Lab Dir					1	1	1
701HISTOLOGY	1	2	3	3	3	2	2
Histology Aide	1	1	1	1	1		
Histology Tech.		1	1	1	1	1	1
M.D. - Pathologist			1	1	1	1	1
710MEDICAL IMAGING	24	22	21	24	24	23	26
Clinical Coordinator - Imaging	1	1	1	1	1	1	1
CT Tech	4	4	4	5	6	6	7
Director Medical imaging	1	1	1	1	1	1	1
Lead Rad. Tech.	1	1	1	1	1	1	1
Mammo Tech	2	2	2	2	2	2	2
Med. Imaging Aide	1	1	1	1	2	1	1
MRI Technologist	1	1	1	1	1	1	1
Nuc. Med. Tech.	2	1	1	1	1	1	
PACS Administrator	1	1	1	1	1	1	1
Rad. Tech. I (ARRT)	4	3	3	3	1	2	2
Rad. Tech. II (ARRT)	2	3	2	4	3	2	2
Ultrasound Tech.	4	3	3	3	3	3	5
Student - Radiographer					1		1
Lead Echo/Ultrasound Tech						1	1
720RESPIRATORY THERAPY	7	7	7	8	8	7	9
Certified Respiratory Therapists	1	1	1	2	1		
Director Cardiopulmonary	1	1	1	1	1	1	1
Reg. Resp. Therapist	5	4	5	5	5	6	5
Respiratory Technician/Aide		1					2
Lead Reg. Resp. Therapist					1		1
721SLEEP LAB	2	2	2	2	2	1	1
Sleep Lab Tech	1	1	1				
SLP Lab T-Gist/Rpsgt	1	1	1	2	2	1	1
722CARDIOPULMONARY	3	3	3	2	1	2	2
Cardiopulmonary Aid	1	1	1	1	1	1	
Certified Respiratory Therapists	1	1					
Reg. Resp. Therapist	1	1	2	1		1	1
EEG Technician							1
723CARDIAC REHAB	3	3	3	3	3	3	3
Exercise Specialist	1	1	1	1	1	1	1
Registered Nurse	2	2	2	2	2	2	2
730PHYS, OCC & SPEECH THERAPY	5	4	5	5	4	4	5
Director Rehab Services	1	1	1	1	1	1	1
N.U.S.	1	1	1	1	1	1	1
Occupational Therapist	1						
Physical Therapist	1	1	2	2	1	1	1
Speech Therapist	1	1	1	1	1	1	2
780EDUCATION	2	2	1	4	2	2	2
Director Education	1	1			1	1	1
Clinical Education IT Assist	1	1	1	1			1
Education Assistant & Comm Spe				1	1		
Education Supervisor				1			
Registered Nurse				1		1	
781SOCIAL SERVICES	1	1	1	1	1		1
Clinical Social Worker	1	1	1	1	1		1
782QUALITY	6	8	5	5	5	6	5
CDI Specialist	1	1					
Director Quality	1	1	1	1	1	1	1
Quality Analyst		3	3	3	3	3	2
Quality Analyst RN	3	3	1	1	1	2	2
Quality Coordinator	1						
783INFECTION CONTROL/EMPL. HEALT	1	2	2	2	3	3	3
Infection Prevention Coordinator	1	1	1	1	1	1	1
R.N. - Employee Health		1	1	1	1	1	1
Compliance Auditor					1		
N.U.S.						1	1
784Compliance & Risk Management	2	2	4	1			1
Director Regulatory Compliance	1	1	1	1			1
Guest Relations Specialist	1	1	1				
Translator/Interpreter			1				
Environmental Safety Officer			1				
786NURSING INFORMATICS	3	3	3	4	4	4	4
Clinical Systems Analyst				1	1	1	1
Nursing Informatics Specialist	3	3	3	3	3	3	3
790HEALTH INFORMATION MANAGEM	13	16	17	13	18	16	15

Director Health Info Mgmt	1	1	1	1	1	1	1
HIM Team Lead			1	1	1		
HIM Tech	4	7	8	4	6	5	5
Inpatient Coder (DRG)	1	1	1	1	1	1	1
Outpatient Coder	3	3	2	3	5	7	7
Transcriptionist	4	4	4	3	2		
CDI Specialist					1	1	1
Coder/CDI Tech					1	1	
791CARE MANAGEMENT	6	5	6	6	7	6	8
Case Manager Supervisor	1			1			
Case Manager	4	5	5	3	4	5	5
Care Transition Nurse	1			1	1		1
CDI Specialist			1				
Clinical Coordinator				1	1		
Care Management Director					1	1	1
Administrative Assistant							1
800MAINTENANCE	10	12	12	14	14	12	12
Apprentice Electrician		1	1	1	1		
Automation Technician	1	1	1	1	1	1	1
Carpenter/Drafter II	1	2	2	2	2	2	2
Director Facilities	1	1	1	1	1	1	1
Facilities Coordinator	1	1		1	1	1	1
Journeyman Electrician	1	1	1	1	1		1
Maint Mech/Groundskeeper	2	3	2	2	1		1
Maintenance Supervisor	1	1	1	1	1	1	1
Master Electrician	1						
Master Plumber	1	1	1	1	1	1	1
Maintenance Mechanic			2	2	3	4	3
Groundskeeper				1	1	1	
801HOUSEKEEPING	25	29	30	29	31	29	28
EVS Director	1	1	1	1	1	1	1
EVS Lead	1	1	1	2	1	1	2
Housekeeper	23	27	27	25	28	26	24
Housekeeping Supervisor			1	1	1	1	1
802LAUNDRY & LINEN	10	8	6	5	6	7	6
Laundry Worker	9	7	6	5	6	7	6
EVS Lead	1	1					
803BIO MEDICAL ENGINEERING	2	1	1	2	2	2	2
Bio Med Lead Tech	1	1	1	1	1	1	1
Biomed Equip Tech	1			1	1	1	1
810SECURITY	9	10	8	9	11	19	14
Director Security & Emerg Mgmt	1	1	1	1	1		
Safety and Security Officer	1	1					
Security Officer	6	7	5	6	6	12	9
Security Supervisor	1	1	1	1	1	1	1
Emergency Management Coordinat			1	1	1	1	1
Transporter					2	5	3
850MATERIALS MANAGEMENT	5	5	5	6	7	6	6
Buyer	2	2	3	4	5	4	4
Director Materials Mgmt	1	1	1	1	1	1	1
Purchasing Associate	1	1					
Receiving Clerk	1	1	1	1	1	1	1
855CENTRAL SUPPLY	3	3	3	3	3	2	3
Central Supply Aide	2	2	2	2	2	2	3
Lead Central Supply Aide	1	1	1	1	1		
870NUTRITION SERVICES	16	19	18	16	15	16	
Cook	6	5	5	6	5	5	
Dietary Aide	8	12	10	8	9	10	
Director Nutrition Svcs	1	1	1	1	1	1	
Nutr Svc Supervisor	1	1	1				
Room Service Attendant			1	1			
871DIETICIANS	2	1	2	3	3	3	3
Clinical Dietitian	2	1	2	3	3	3	3
900ADMINISTRATION	5	6	6	7	8	7	6
CEO		1	1	1	1	1	1
C.F.O.	1	1	1	1	1	1	1
CCO	1	1	1	1	1	1	1
Chief Comp Officer & In House Coun.	1	1	1	1	1	1	
CNO	1	1	1	1	2	1	1
Executive Assistant	1	1	1	1	1	1	1
Chief Medical Officer (CMO)				1	1	1	1
901MARKETING AND PUBLIC RELATION	2	1	1	1	1	1	1
Director Marketing & PR	2	1	1	1	1	1	1
902MEDICAL STAFF SERVICES	2	3	3	3	3	3	3
Credentialing Clerk	1	1	1	1	1	1	1
Medical Staff Services Spvsr	1	1	1	1	1	1	1
Prov. Enroll. Clerk/Admin Ass.		1	1	1	1	1	1
903FOUNDATION	1	1	2	2	1	2	2
Director Foundation	1	1	1	1	1	1	1
Foundation/Compliance Assoc			1	1		1	1
904COMMUNITY PARTNERSHIP	1	1	1	1	1	1	1
Dir. of Vol. Serv. & Comm. Outreach	1	1	1	1	1	1	1

905NURSING ADMINISTRATION	5	6	5	7	5	5	4
Admin. Asst	1	1	1	1	1	1	1
House Supervisor	2	3	4	5	4	4	3
Translator/Interpreter	2	1					
Trauma Coordinator		1					
907PHYSICIAN RECRUITMENT	1	1	1	1	1	1	1
Recruit. Spec.&Relations Man.	1	1	1	1	1	1	1
910INFORMATION TECHNOLOGY	7	8	8	5	4	6	5
Director Information Svcs	1	1	1	1		2	1
Hardware Analyst	1	1	1	1	1	1	2
Help Desk Analyst/PC Tech	2	3	2	1	1	1	1
Senior Network Administrator	1	1	1	1	1	1	
Senior Systems Administrator	1	1	1	1	1	1	1
Systems Administrator	1	1	1				
Report Writing Specialist			1				
920HUMAN RESOURCES	5	6	5	4	4	5	5
H.R. Assistant	1	3	2			1	1
Administrative Assistant				1	1	1	1
Human Resources Director	1	1	1	1	1	1	1
Human Resources Generalist	1	1	1	1	1	1	1
Human Resources Spec	2	1	1	1	1	1	1
930FISCAL SERVICES	5	5	5	5	5	5	5
Accounting Clerk		1	1	1	1	1	1
Acct Specialist - A/P	1	1	1	1	1	1	1
Acct Specialist - P/R	1	1	1	1	1	1	1
Controller	1	1	1	1	1	1	1
Staff Accountant	2	1	1	1	1	1	1
940PATIENT FINANCIAL SERVICES	14	18	14	15	20	19	20
Collections Clerk	11	14	10	10	12	11	12
Collections Spec. II		1	1	1	1	1	1
Collections Special	1	1	1	1	3	2	2
Director PT Financial Svcs	1	1	1	1	1	1	1
Patient Accounts Rep.	1	1	1	1	1	1	1
Patient Financial Navigator				1	1	1	1
Lead Pt. Financial Navigator					1	1	1
Translator/Interpreter						1	1
941ADMITTING	14	16	15	15	34	36	36
Admitting Specialist I	9	11	9	9	27	28	28
Admitting Specialist II	3	3	5	5	6	6	6
Lead Patient Reg Specialist	1	1				1	1
Patient Registration Superviso	1	1	1	1	1	1	1
942COMMUNICATIONS	3	3	2	1			1
Receptionist/Operator	3	3	2	1			1
943CENTRAL SCHEDULING	3	4	4	5	6	5	5
Lead Pre-Admissions Registrar	1	1	1	1	1	1	1
Pre-Admission Registrar	2	3	3	4	5	4	4
974CLINIC	55	47	54	58	44	50	50
Behavioral Health Manager				1	1	1	1
Care Transition Nurse		1	1	1	2	2	2
Charge RN			1	1	1	1	1
Clin Collections Clerk/Recept	13	9	13	16			
Clinic Certified Coder/Biller	3	2	1	1			1
Clinic Nurse Director	1	1	1	1	1	1	
Clinic/Coder Biller-Non-Cert.	3	3	3	3			
Clinical Admin Asst.	1	1	1	1			1
Registration Supervisor	1	1	1	1			
LPN Clinic	3	3	2	2	1	2	3
Medical Assistant	7	4	6	6	7	16	16
Medical Assistant II	3	8	7	7	8	5	6
Practice Coordinator	3	2	1			1	
Registered Nurse - Clinic	13	10	13	14	19	18	16
Lead RN/OB Patient Educator		1	1	1	1	1	1
Rad. Tech. I (ARRT)	2	1	1	1	1	1	1
Patient Navigator & Fin. Rep			1				
Translator/Interpreter				1	1		
Clinical Coordinator					1	1	1
C.N.A.	2						
ANESTHESIOLOGY	4	2	3	3	3	3	3
M.D. - Anesthesiologist	4	2	3	3	3	3	3
ENT	2	2	2	2	2	2	2
M. D. - Otolaryngologist	2	2	2	2	2	2	2
FAMILY MED/OCC MED	10	8	9	9	10	10	10
M.D. - Family Practice	6	5	5	5	5	5	5
Nurse Practitioner			2	2	3	3	3
P.A.	1	1	1	1	1	1	1
P.A.- Mid Level 1	3	2	1	1	1	1	1
GEN SURGERY	3	2	2	2	2	2	2
M.D. - Surgeon	3	2	2	2	2	2	2
HOSPITALIST	3	3	1	3	3	2	4
M.D. - Internist	2	3	1	3	3	2	4
P.A.	1						
INTERNAL MED	9	1	1	1	1	1	2

M.D. - Internist		1	1	1	1	1	1
P.A.							1
NEPHROLOGY	1	1	1	1	1	1	1
M.D. - Nephrologist	1	1	1	1	1	1	1
NEUROLOGY	0				1	1	1
M.D. Neurologist					1	1	1
OB/GYN	4	5	4	3	4	4	4
Certified Nurse Midwife		1	1	1	1	1	1
M.D. - OB/GYN	4	4	3	2	3	2	2
Nurse Practitioner						1	1
ORAL SURGERY	2						
M.D. - Oral Surgeon DDS	1						
ORTHOPEDICS	3	2	2	2	3	3	3
M.D. - Orthopedics	3	2	2	3	3	3	3
PEDIATRICS	2	2	1	4	4	4	4
M.D. - Pediatrician	2	2	1	3	3	3	3
Nurse Practitioner				1	1	1	1
PSYCH	3						
M.D. - Psychiatrist	2						
Social Services Specialist	1						
PULMONOLOGY	1	1				1	1
M. D. - Pulmonologist	1	1				1	1
UROLOGY	1	2	2	1	1	2	1
M.D. - Urologist	1	2	2	1	1	2	1
WALK-IN CLINIC	0			1	1	2	2
Nurse Practitioner				1	1	1	1
P.A.						1	1

Grand Total	525	529	526	528	556	550	542
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Salary & Wage Expense	41,489,640	37,358,881	37,637,273	39,015,354	44,544,751	44,570,952	45,561,986	Projected
Gross Revenue	156,251,483	157,748,263	164,916,540	173,553,224	187,003,639	207,720,393	223,940,360	Projected
SAW exp as a % of Gross Revenue	-27%	-24%	-23%	-22%	-24%	-21%	-20%	
Total Paid FTEs	486.86	451.1	456.36	454.78	486.87	507.96	499.34	Dec actual
Contract FTEs	14.31	8.58	6.14	5.9	10.66	21.98	20.01	Dec actual
Contract labor expense	1,432,609	2,400,566	881,515	1,021,278	1,874,887	7,316,914	4,164,000	Projected

600MED/SURG	0.28	1.65	2.51
605BEHAVIORAL HEALTH	1.36	1.13	0.80
612LABOR AND DELIVERY	0.42	1.00	0.57
620ICU	1.15	3.22	3.12
630OR	2.19	2.73	1.51
640DIALYSIS		0.10	0.22
650ER	1.56	5.80	5.57
700LABORATORY	1.53	2.11	1.66
710MEDICAL IMAGING	1.59	1.61	
720RESPIRATORY	0.11	2.46	3.30
730PHYSICAL THERAPY	0.47		
781SOCIAL SERVICES		0.15	0.10
802LAUNDRY			0.10
810SECURITY		0.02	0.55
TOTAL	10.66	21.88	20.01

	2017	2018	2019	2020	2021	2022	2023
Department/Position	# of positions	# of positions	# of positions	# of positions	# of positions	# of positions	# of positions
600MED/SURG	2	1	2	2	2	1	2
Clinical Coordinator	1	1	1	1	1		1
Director Acute Care Svcs	1		1	1	1	1	1
605BEHAVIORAL HEALTH	0	0	1	1	1	1	0
BHT Coordinator			1	1	1	1	
610POST PARTUM	1	1	0	1	3	1	1
Director of OB	1	1			1		
Clinical Coordinator				1	2	1	1
611NURSERY	0	0	1	0	0	0	0
Charge RN			1				
612LABOR AND DELIVERY	1	1	1	1	0	1	1
Director of OB		1	1	1		1	1
Clinical Coordinator	1						
620ICU	2	2	0	1	0	0	1
Clinical Coordinator	1	1		1			1
Dir of Infec.Prev.&Emp.Health	1	1					
630SURGICAL SERVICES	1	3	2	2	2	0	1
Clinical Coordinator		1	1	1	1		
Director Surgical Svcs	1	2	1	1	1		1
634CENTRAL STERILE	0	0	0	0	0	1	1
Lead Sterile Tech						1	1
640DIALYSIS	2	2	3	3	2	2	2
Charge RN	1	1	1	1		1	
Clinical Coordinator			1	1	1	1	1
Director Dialysis	1	1	1	1	1		1
650EMERGENCY DEPARTMENT	3	1	2	1	2	2	2
Clinical Coordinator	2	1	2	1	1	1	1
Dir. Emerg. Svcs&Patient Exp.	1				1	1	1
651TRAUMA	1	0	1	0	1	1	1
Trauma Coordinator	1		1		1	1	1
652SANE	1	1	1	1	0	0	0
SANE Coordinator	1	1	1	1			
660RADIATION ONCOLOGY	1	1	1	1	1	1	1
Admin. Dir.& Cert. Dosimetrist	1	1	1	1	1	1	1
661MEDICAL ONCOLOGY	1	1	1	1	1	1	1
Clinical Coordinator	1	1	1	1	1	1	1
700LABORATORY	2	2	2	2	3	3	3
Director Laboratory	1	1	1	1	1	1	1
Lab Supervisor	1	1	1	1	1	1	1
PoC Coordinator/Asst Lab Dir					1	1	1
710MEDICAL IMAGING	2	2	2	2	2	3	3
Director Medical Imaging	1	1	1	1	1	1	1
Lead Rad. Tech.	1	1	1	1	1	1	1
Lead Echo/Ultrasound Tech						1	1
720RESPIRATORY THERAPY	1	1	1	1	2	1	2
Director Cardiopulmonary	1	1	1	1	1	1	1
Lead Reg. Resp. Therapist					1		1
730PHYS, OCC & SPEECH THERAPY	1	1	1	1	1	1	1
Director Rehab Services	1	1	1	1	1	1	1
780EDUCATION	1	1	0	1	1	1	1
Director Education	1	1			1	1	1
Education Supervisor				1			
782QUALITY	2	1	1	1	1	1	1
Director Quality	1	1	1	1	1	1	1
Quality Coordinator	1						
783INFECTION CONTROL/EMPL. HEALTH	1	1	1	1	1	1	1
Infection Prevention Coordntr	1	1	1	1	1	1	1
784Compliance & Risk Management	1	1	1	1	0	0	1
Director Regulatory Compliance	1	1	1	1			1
790HEALTH INFORMATION MANAGEM	1	1	2	2	2	1	1
Director Health Info Mgmt	1	1	1	1	1	1	1
HIM Team Lead			1	1	1		
791CARE MANAGEMENT	1	0	0	2	2	1	1
Case Manager Supervisor	1			1			
Clinical Coordinator				1	1		
Care Management Director					1	1	1
800MAINTENANCE	2	2	2	2	2	2	2
Director Facilities	1	1	1	1	1	1	1
Maintenance Supervisor	1	1	1	1	1	1	1
801HOUSEKEEPING	2	2	3	4	3	3	4
EVS Director	1	1	1	1	1	1	1
EVS Lead	1	1	1	2	1	1	2
Housekeeping Supervisor			1	1	1	1	1
802LAUNDRY & LINEN	1	1	0	0	0	0	0

EVS Lead	1	1					
803BIO MEDICAL ENGINEERING	1	1	1	1	1	1	1
Bio Med Lead Tech	1	1	1	1	1	1	1
810SECURITY	2	2	3	3	3	2	2
Director Security & Emerg Mgmt	1	1	1	1	1		
Security Supervisor	1	1	1	1	1	1	1
Emergency Management Coordinat			1	1	1	1	1
850MATERIALS MANAGEMENT	1	1	1	1	1	1	1
Director Materials Mgmt	1	1	1	1	1	1	1
855CENTRAL SUPPLY	1	1	1	1	1	0	0
Lead Cental Supply Aide	1	1	1	1	1		
870NUTRITION SERVICES	2	2	2	1	1	1	0
Director Nutrition Svcs	1	1	1	1	1	1	
Nutr Svc Supervisor	1	1	1				
900ADMINISTRATION	4	5	5	6	7	6	5
CEO		1	1	1	1	1	1
C.F.O.	1	1	1	1	1	1	1
CCO	1	1	1	1	1	1	1
ChiefCompOfficerr&InHouseCoun.	1	1	1	1	1	1	
CNO	1	1	1	1	2	1	1
Chief Medical Officer (CMO)				1	1	1	1
901MARKETING AND PUBLIC RELATIO	2	1	1	1	1	1	1
Director Marketing & PR	2	1	1	1	1	1	1
902MEDICAL STAFF SERVICES	1	1	1	1	1	1	1
Medical Staff Services Spvsnr	1	1	1	1	1	1	1
903FOUNDATION	1	1	1	1	1	1	1
Director Foundation	1	1	1	1	1	1	1
904COMMUNITY PARTNERSHIP	1	1	1	1	1	1	1
Dir.ofVol.Serv.&Comm.Outreach	1	1	1	1	1	1	1
907PHYSICIAN RECRUITMENT	1	1	1	1	1	1	1
Recruit. Spec.&Relations Man.	1	1	1	1	1	1	1
910INFORMATION TECHNOLOGY	1	1	1	1	0	2	1
Director Information Svcs	1	1	1	1		2	1
920HUMAN RESOURCES	1	1	1	1	1	1	1
Human Resources Director	1	1	1	1	1	1	1
930FISCAL SERVICES	1	1	1	1	1	1	1
Controller	1	1	1	1	1	1	1
940PATIENT FINANCIAL SERVICES	1	1	1	1	2	2	2
Director PT Financial Svcs	1	1	1	1	1	1	1
Lead Pt. Financial Navigator					1	1	1
941ADMITTING	2	2	1	1	1	2	2
Lead Patient Reg Specialist	1	1				1	1
Patient Registration Supervisor	1	1	1	1	1	1	1
943CENTRAL SCHEDULING	1	1	1	1	1	1	1
Lead Pre-Admissions Registrar	1	1	1	1	1	1	1
974CLINIC	2	3	4	4	4	4	3
Charge RN			1	1	1	1	1
Clinic Nurse Director	1	1	1	1	1	1	
Registration Supervisor	1	1	1	1			
Lead RN/OB Patient Educator		1	1	1	1	1	1
Clinical Coordinator					1	1	1
Grand Total	60	57	60	63	64	59	60

F&A COMMITTEE CHAIR REPORT TO THE BOARD

January 2023 meeting

Chair – Ed Tardoni

The Finance and Audit Committee met in Zoom format this month. The CFO was excused all other members present.

F&A DATA FOR THE MONTH

The usual financial information is included in the Board Packet. It was noted that the Clinics posted the largest revenue month and lowest monthly loss in its history. Ron Cheese made a presentation of the goals, their relationship to the Cerner conversion, and the corrective efforts involved in recovery.

CAPITAL EXPENDITURES

There are no capital expenditures for consideration this month. Staff recommendation remains to be a freeze except for emergency or regulatory requirement related efforts

OTHER BUSINESS

SLIP Grant Update. The CEO reported that work is underway with the engineers on the lab expansion and staff has been looking at second story layouts. It was also reported that the County Commission had approved application of the full \$3,000,000 in county funds to the lab project. The CEO also mentioned that there is word that other government funding may become available for other projects and staff is monitoring that situation.

F&A Committee Charter. The Committee had previously approved a change in the charter that made attendance by physician member to be at their discretion. At this meeting a change was made relating to what expenditures would be reviewed by the Committee, A change from expenditures greater than \$25,000 to in excess of the CEO approval authority was approved to be sent to the Board for consideration.

Double Coverage Discussion. The CNO discussed the reasons for double coverage of nurses and how the system works. Depending on the unit, double coverage may last from three to six months. The reasons for that variation were explained.

February Meeting

The F&A Committee will meet by zoom at 1400 hours, Tuesday, February 28th.

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

Wednesday~ January 25, 2023 2:00 p.m. Teleconference

Voting Members:

Ed Tardoni, Chair
Marty Kelsey, 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

- | | | |
|-------|--|------------------|
| I. | Call Meeting to Order | Ed Tardoni |
| II. | Approve Agenda | Ed Tardoni |
| III. | <u>Approve November 30, 2022 Meeting Minutes</u> | Ed Tardoni |
| IV. | <u>Capital Requests FY 23</u> | |
| V. | Financial Report | |
| | A. Monthly Financial Statements & Statistical Data | |
| | 1. <u>Narrative</u> | Tami Love |
| | 2. <u>Financial Information</u> | |
| | 3. <u>Financial Goals</u> | Ron Cheese |
| | 4. <u>Self-Pay Report</u> | Ron Cheese |
| | 5. <u>Preliminary Bad Debt</u> | Ron Cheese |
| VI. | Old Business | |
| | A. SLIB project update | Irene Richardson |
| | B. <u>Review Charter</u> | Ed Tardoni |
| VII. | New Business | |
| | A. Financial Forum Discussion | Ed Tardoni |
| VIII. | Next Meeting | Tami Love |
| IX. | Adjournment | Ed Tardoni |

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

NARRATIVE TO DECEMBER 2022 FINANCIAL STATEMENTS

THE BOTTOM LINE. The bottom line from operations for December is a loss of \$188,830, compared to a gain of \$299,197 in the budget. This yields a -1.97% operating margin for the month compared to 3.23% in the budget. The year-to-date loss is \$2,390,772 compared to a loss of \$543,646 in the budget. The year-to-date operating margin is -4.35%, compared to -1.01% in the budget.

The total net loss for December is \$248,359, compared to a gain of \$304,043 in the budget. This represents a total profit margin of -2.59% compared to the budget of 3.28%. Year-to-date, the total net loss is \$2,529,099, compared to a total net loss of \$463,377 in the budget. This represents a YTD profit margin of -4.60% compared to -.86% in the budget.

REVENUE. Revenue increased in December, coming in at \$19,893,615, over budget by \$717,076. Inpatient revenue is over budget by \$456,167 and outpatient revenue is over budget by \$260,909. Year to date, revenue is over budget by \$3,740,257.

VOLUME. Inpatient discharges and patient days are over budget for December. The average daily census (ADC) increased to 15.9, over budget, and average length of stay (LOS) is at 3.7, slightly over budget. Emergency Room visits are over budget. Total Outpatient visits, Surgeries and Births are under budget in December. Clinic volumes are over budget.

Annual Debt Service Coverage came in at 2.37. Days of Cash on Hand increased to 102.6 days with the continued high collections. Daily cash expense is \$286,000 year to date.

REDUCTION OF REVENUE. Deductions from revenue are 52.8% in December, right at budget as our total accounts receivable decreased by \$1.5 million. Deductions of Revenue are 51.9% year-to-date, compared to the budget of 51.6%. Total collections for the month came in at \$10,644,730 as we continue to catch up on delayed coding and billing from the Cerner conversion.

Net days in AR fell to 60.2 days as we continue to catch up the delayed coding, billing and collections related to the Cerner conversion. With the delays in Cerner billing, we did see an increase in the aging percentages of all payers. In December, we saw these percentages increase slightly.

EXPENSES. Total expenses increased in December \$9,768,771, over budget by \$796,556. The following line items were over budget in December:

Salary and Wage – December was over budget as we continue to have double coverage for nursing as the new hires are oriented. We have also seen increased overtime to keep the departments staffed appropriately.

Fringe Benefits - Group Health and Other Employee Benefits were all over budget in December.

Contract Labor – We are starting to see this expense decrease from the prior year, down by 69% from a high in May 2022. Staffing shortages continue in some clinical areas with current contract labor staff in Med/Surg, ICU, Surgery, Emergency Room, Laboratory, Respiratory, and Behavioral Health. The year-to-date number of contract FTEs dropped to 20 in December, and we continue to see the impact of negotiating traveler rates.

Purchased Services – Consulting fees, professional services and department management services all came in over budget in December.

Supplies - Supply costs continue to be impacted by inflation and supply chain issues. Oxygen, laboratory supplies, blood products, implants, medical/surgical supplies, drugs, and food all came in over budget in December.

Utilities – Fuel expense came in over budget. We continue to see an increase in rates as well as dekatherm usage.

Other Operating Expenses – Physician recruitment and Pharmacy Floor expenses came in over budget in December.

Leases and Rentals – Equipment rent lease is over budget for the Nuclear Medicine equipment lease which did not qualify for the new GASB 87 rule.

Depreciation & Amortization – This expense is over budget with the reclass of operating leases to assets with the new GASB 87 rule.

PROVIDER CLINIC. Revenue for the Clinics came in over budget at \$2,582,451, over budget by \$560,680. The bottom line for the Clinics in December is a loss of \$257,001 compared to a loss of \$436,864 in the budget. The year-to-date loss is \$2,339,753, compared to a budgeted loss of \$2,826,765. Clinic volumes remained high in December, over budget at 6,044 visits. Total Clinic expenses for the month are \$1,732,546, over budget by \$130,650. Salary & Wage, Benefits, Purchased Services and Pharmacy Floor expenses are over budget for December.

OUTLOOK FOR JANUARY. Gross patient revenue for January is projecting similar to December, at \$19.7 million, which is over budget. Inpatient volumes are over budget in January. Our LOS has decreased to 3.2, slightly under the budget of 3.5. Births are projecting over budget in January. The average daily census is 16.2. Surgeries, Clinic

visits, Emergency room visits and most Outpatient departments are projecting higher than budget.

Collections are projecting to \$8.8 million. Deductions of revenue are expected to remain close to budget as AR continues to decrease. Expenses should decrease in January, but still be over budget with the increased cost of supplies and contract labor. The bottom line for January is estimated to be at breakeven.

We continue to watch all spending as we start the new fiscal year. We continue to see the impact of contract labor and increased cost of supplies due to inflation. We recommend continuing to limit capital purchases unless it is emergent or regulatory.

CLA Revenue Assessment. We continue to work on the action plans that resulted from the CLA charge capture assessment and claims review. There have been some delays in completion due to delays with Cerner getting new charges, codes and workflows built for us. We will continue to report on the progress of the plans going forward. We have also created short and long term goals aligned with the revenue cycle to track progress.

Legacy System and Archiving. The archival of our legacy systems is still in progress. T-System archival is complete and OBIX is currently being worked on. We have started data review to start on Clintegrity and the Ortho eMD database will be static in February so we can start on the archival process. The others, QCPR Flex, Affinity, and the other eMD database are still being coordinated as the data still needs to be live. The systems need to be completely static and read only before they can be archived. Affinity and eMDs still have active accounts receivable. We will start to see a decrease in costs as we complete the archiving process and can terminate the support contracts.

Financial Goals. We have chosen two financial metrics to focus on for the current fiscal year: Days Cash on Hand and Days in Accounts Receivable.

- 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 a short-term goal of 100 days by December 31 and long term goals of 115 days by March 31 and 130 days by June 30, the end of the fiscal year.
- Days in Accounts Receivable represents the number of days of patient charges tied up in unpaid patient accounts. We have set a short-term goal of 70 days by December 31, 60 days by March 31 and 51 days by year end.

In addition to these main goals, we have set goals for some corresponding financial metrics that are impacting the revenue cycle:

- DNFB Days – Discharged Not Final Billed days. There are several reasons for accounts to fall under DNFB including a standard delay, or abeyance period, of 5 days. This means all accounts are held automatically for 5 days before being released for billing. This allows for all charges to be posted,

charts documented and coded. We have set the goal for DNFB days at 5 days by the end of the year, equal to our 5-day abeyance period for billing accounts.

- Total Accounts Receivable aging – These goals were set based on national benchmarks received from CLA and the goals will be set as follows: Days over 90 days set be < 20% of total AR, days over 120 days set at < 5% of total AR and days over 180 days set at < 3%.
- Days in AR by Payer – These metrics show more detail of where our aging AR is allocated. These goals have always been reported in the monthly financial statements, but we will be showing the trends through the end of the fiscal year. These goals are as follows:
 - BCBS – Days in AR > 90 days should be less than 10%
 - Insurance Days in AR > 90 days should be less than 15%
 - Medicaid Days in AR > 90 days should be less than 20%
 - Medicare Days in AR > **60 days** should be less than 6%



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

Unaudited Financial Statements

for

Six months ended December 31, 2022

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

Six months ended December 31, 2022

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MEMORIAL HOSPITAL OF SWEETWATER COUNTY

EXECUTIVE FINANCIAL SUMMARY

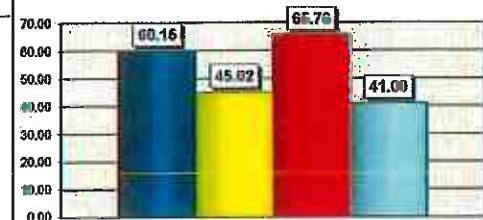
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Six months ended December 31, 2022

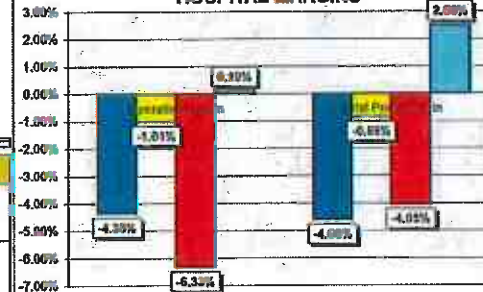
BALANCE SHEET

	YTD 12/31/2022	Prior FYE 6/30/2022
ASSETS		
Current Assets	\$36,855,069	\$34,112,369
Assets Whose Use is Limited	19,114,819	22,099,344
Property, Plant & Equipment (Net)	79,212,837	83,515,473
Other Assets	979,726	1,028,699
Total Unrestricted Assets	136,162,451	140,755,885
Restricted Assets	446,587	434,089
Total Assets	\$136,609,038	\$141,189,974
LIABILITIES AND NET ASSETS		
Current Liabilities	\$13,599,031	\$12,188,541
Long-Term Debt	25,835,000	26,491,667
Other Long-Term Liabilities	12,356,160	15,174,318
Total Liabilities	51,790,190	53,854,526
Net Assets	84,818,848	87,335,448
Total Liabilities and Net Assets	\$136,609,038	\$141,189,974

NET DAYS IN ACCOUNTS RECEIVABLE



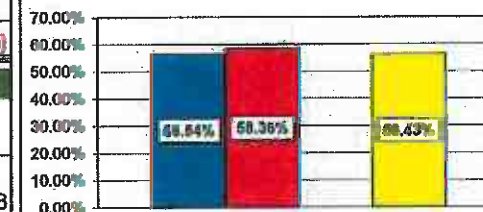
HOSPITAL MARGINS



DAYS CASH ON HAND



SALARY AND BENEFITS AS A PERCENTAGE OF TOTAL EXPENSES



STATEMENT OF REVENUE AND EXPENSES - YTD

	12/31/22 ACTUAL	12/31/22 BUDGET	YTD ACTUAL	YTD BUDGET
Revenue:				
Gross Patient Revenues	\$19,893,615	\$19,176,539	\$111,970,180	\$108,229,923
Deductions From Revenue	(10,498,808)	(10,129,733)	(58,126,348)	(55,891,917)
Net Patient Revenues	9,394,807	9,046,806	53,843,832	52,338,006
Other Operating Revenue	185,133	224,605	1,077,574	1,362,373
Total Operating Revenues	9,579,941	9,271,412	54,921,406	53,700,379
Expenses:				
Salaries, Benefits & Contract Labor	5,404,222	5,029,144	32,401,465	30,798,639
Purchased Serv. & Physician Fees	862,795	897,042	5,000,643	5,249,365
Supply Expenses	1,732,797	1,369,770	9,404,197	8,117,135
Other Operating Expenses	908,710	923,072	5,334,231	5,567,802
Bad Debt Expense	0	0	0	0
Depreciation & Interest Expense	860,247	753,185	5,171,642	4,511,084
Total Expenses	9,768,771	8,972,214	57,312,178	54,244,024
NET OPERATING SURPLUS	(188,830)	299,197	(2,390,772)	(543,646)
Non-Operating Revenue/(Exp.)	(59,529)	4,846	(138,327)	80,268
TOTAL NET SURPLUS	(\$248,359)	\$304,043	(\$2,529,099)	(\$463,377)

KEY STATISTICS AND RATIOS

	12/31/22 ACTUAL	12/31/22 BUDGET	YTD ACTUAL	YTD BUDGET
Total Acute Patient Days	492	424	2,476	2,833
Average Acute Length of Stay	3.7	3.5	3.5	3.8
Total Emergency Room Visits	1,435	1,327	7,865	7,746
Outpatient Visits	7,788	8,806	44,526	57,636
Total Surgeries	145	152	907	766
Total Worked FTE's	442.13	465.19	450.03	465.19
Total Paid FTE's	488.28	511.59	500.26	511.59
Net Revenue Change from Prior Yr	2.05%	-1.24%	1.79%	-0.47%
EBIDA - 12 Month Rolling Average			1.97%	7.39%
Current Ratio			2.71	
Days Expense in Accounts Payable			43.20	

MEMORIAL HOSPITAL OF SWEETWATER COUNTY	
Budget	12/31/22
Prior Fiscal Year End	06/30/22
CLA \$50-\$100M Net Revenue	6/30/2020

FINANCIAL STRENGTH INDEX - (1.32)	
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

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ROCK SPRINGS, WY

Six months ended December 31, 2022

↓ ↑ - DESIRED POSITION IN RELATION TO BENCHMARKS AND BUDGET

		Year to Date 12/31/2022	Budget 6/30/2023	Prior Fiscal Year End 06/30/22	CLA \$50-\$100 MM Net Revenue (See Note 1)
Profitability:					
Operating Margin	↑	-4.35%	0.24%	-6.33%	0.10%
Total Profit Margin	↑	-4.60%	0.31%	-4.05%	2.50%
Liquidity:					
Days Cash, All Sources **	↑	102.62	129.83	100.09	242.00
Net Days in Accounts Receivable	↓	60.15	45.02	65.76	41.00
Capital Structure:					
Average Age of Plant (Annualized)	↓	10.95	11.32	14.13	12.00
Long Term Debt to Capitalization	↓	23.87%	19.87%	24.14%	27.00%
Debt Service Coverage Ratio **	↑	2.37	2.42	1.14	2.80
Productivity and Efficiency:					
Paid FTE's per Adjusted Occupied Bed	↓	7.72	8.43	8.34	NA
Salary Expense per Paid FTE		\$102,177	\$86,892	\$102,150	NA
Salary and Benefits as a % of Total Operating Exp		56.54%	56.43%	58.36%	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

ROCK SPRINGS, WY

Six months ended December 31, 2022

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	Current Month 12/31/2022	Prior Month 11/30/2022	ASSETS Positive/ (Negative) Variance	Percentage Variance	Prior Year End 6/30/2022
Current Assets					
Cash and Cash Equivalents	\$11,045,870	\$12,805,116	(\$1,759,247)	-13.74%	\$7,173,928
Gross Patient Accounts Receivable	36,498,749	39,334,548	(2,835,799)	-7.21%	41,948,878
Less: Bad Debt and Allowance Reserves	(18,769,112)	(20,061,292)	1,292,090	6.44%	(23,879,694)
Net Patient Accounts Receivable	17,729,637	19,273,346	(1,543,709)	-8.01%	18,069,184
Interest Receivable	0	0	0	0.00%	0
Other Receivables	2,237,906	1,937,167	300,739	15.52%	2,832,976
Inventories	4,106,062	4,097,507	8,555	0.21%	4,054,218
Prepaid Expenses	1,735,594	1,621,085	114,509	7.06%	1,982,063
Due From Third Party Payers	0	0	0	0.00%	0
Due From Affiliates/Related Organizations	0	0	0	0.00%	0
Other Current Assets	0	0	0	0.00%	0
Total Current Assets	36,855,069	39,734,221	(2,879,151)	-7.25%	34,112,369
Assets Whose Use is Limited					
Cash	38,338	2,036	36,301	1782.70%	(37,762)
Investments	0	0	0	0.00%	0
Bond Reserve/Debt Retirement Fund	0	0	0	0.00%	0
Trustee Held Funds - Project	776,278	584,288	191,991	32.86%	637,426
Trustee Held Funds - SPT	172	165	7	4.13%	28,281
Board Designated Funds	4,264,493	1,453,688	2,810,805	193.36%	6,924,862
Other Limited Use Assets	14,035,539	14,035,538	0	0.00%	14,546,537
Total Limited Use Assets	19,114,819	16,075,715	3,039,104	18.90%	22,099,344
Property, Plant, and Equipment					
Land and Land Improvements	4,242,294	4,242,294	0	0.00%	4,242,294
Building and Building Improvements	49,613,983	49,613,983	0	0.00%	49,597,599
Equipment	131,279,751	131,196,778	82,973	0.06%	131,022,049
Construction in Progress	1,326,817	1,085,301	241,516	22.25%	731,897
Capitalized Interest	0	0	0	0.00%	0
Gross Property, Plant, and Equipment	186,462,845	186,138,356	324,489	0.17%	185,593,839
Less: Accumulated Depreciation	(107,250,009)	(106,389,761)	(860,247)	-0.81%	(102,078,385)
Net Property, Plant, and Equipment	79,212,837	79,748,595	(535,758)	-0.67%	83,515,473
Other Assets					
Unamortized Loan Costs	979,726	987,888	(8,162)	-0.83%	1,028,699
Other	0	0	0	0.00%	0
Total Other Assets	979,726	987,888	(8,162)	-0.83%	1,028,699
TOTAL UNRESTRICTED ASSETS	136,162,451	136,546,419	(383,968)	-0.28%	140,755,885
Restricted Assets	446,587	446,587	0	0.00%	434,089
TOTAL ASSETS	\$136,609,038	\$136,993,006	(\$383,968)	-0.28%	\$141,189,974

Balance Sheet - Liabilities and Net Assets

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Six months ended December 31, 2022

	LIABILITIES AND FUND BALANCE				Prior Year End 6/30/2022
	Current Month 12/31/2022	Prior Month 11/30/2022	Positive/ (Negative) Variance	Percentage Variance	
Current Liabilities					
Accounts Payable	\$6,697,444	\$7,077,673	\$380,230	5.37%	\$5,404,568
Notes and Loans Payable	0	0	0	0.00%	0
Accrued Payroll	2,106,821	1,706,579	(400,241)	-23.45%	1,787,856
Accrued Payroll Taxes	0	0	0	0.00%	0
Accrued Benefits	2,581,565	2,553,936	(27,628)	-1.08%	2,804,901
Accrued Pension Expense (Current Portion)	0	0	0	0.00%	0
Other Accrued Expenses	0	0	0	0.00%	0
Patient Refunds Payable	0	0	0	0.00%	0
Property Tax Payable	0	0	0	0.00%	0
Due to Third Party Payers	0	0	0	0.00%	0
Advances From Third Party Payers	0	0	0	0.00%	0
Current Portion of LTD (Bonds/Mortgages)	1,450,198	1,456,956	6,758	0.46%	1,562,895
Current Portion of LTD (Leases)	0	0	0	0.00%	0
Other Current Liabilities	763,004	572,252	(190,752)	-33.33%	628,321
Total Current Liabilities	13,699,031	13,367,397	(231,633)	-1.73%	12,188,541
Long Term Debt					
Bonds/Mortgages Payable	27,285,198	27,413,206	128,008	0.47%	28,054,562
Leases Payable	0	0	0	0.00%	0
Less: Current Portion Of Long Term Debt	1,450,198	1,456,956	6,758	0.46%	1,562,895
Total Long Term Debt (Net of Current)	25,835,000	25,956,250	121,250	0.47%	26,491,667
Other Long Term Liabilities					
Deferred Revenue	0	0	0	0.00%	1,255,068
Accrued Pension Expense (Net of Current)	0	0	0	0.00%	0
Other	12,356,160	12,602,152	245,993	1.95%	13,919,250
Total Other Long Term Liabilities	12,356,160	12,602,152	245,993	1.95%	15,174,318
TOTAL LIABILITIES	51,790,190	51,925,799	135,609	0.26%	53,854,526
Net Assets:					
Unrestricted Fund Balance	84,946,113	84,946,113	0	0.00%	87,636,023
Temporarily Restricted Fund Balance	1,959,119	1,959,119	0	0.00%	1,959,119
Restricted Fund Balance	442,714	442,714	(0)	0.00%	430,216
Net Revenue/(Expenses)	(2,529,099)	(2,280,740)	N/A	N/A	(2,688,910)
TOTAL NET ASSETS	84,818,848	85,067,206	248,358	0.29%	87,335,448
TOTAL LIABILITIES AND NET ASSETS	\$136,609,038	\$136,993,006	\$383,968	0.28%	\$141,189,974

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Six months ended December 31, 2022

	CURRENT MONTH				Prior Year 12/31/21
	Actual 12/31/22	Budget 12/31/22	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Inpatient Revenue	\$4,463,069	\$4,006,902	\$456,167	11.38%	\$3,901,947
Outpatient Revenue	12,848,096	13,147,867	(299,771)	-2.28%	12,775,161
Clinic Revenue	2,582,451	2,021,770	560,680	27.73%	1,967,053
Specialty Clinic Revenue	0	0	0	0.00%	357,797
Total Gross Patient Revenue	19,893,615	19,176,539	717,076	3.74%	19,001,956
Deductions From Revenue					
Discounts and Allowances	(9,136,379)	(8,636,965)	(499,394)	-5.78%	(8,555,249)
Bad Debt Expense (Governmental Providers Only)	(945,317)	(1,268,112)	314,795	24.96%	(1,000,888)
Medical Assistance	(417,112)	(252,636)	(164,476)	-79.30%	(235,484)
Total Deductions From Revenue	(10,498,808)	(10,129,733)	(369,075)	-3.64%	(9,790,791)
Net Patient Revenue	9,394,807	9,046,806	348,001	3.85%	9,211,166
Other Operating Revenue	185,133	224,605	(39,472)	-17.57%	176,624
Total Operating Revenue	9,579,941	9,271,412	308,529	3.33%	9,387,790
Operating Expenses					
Salaries and Wages	3,889,680	3,782,287	(107,392)	-2.84%	3,657,198
Fringe Benefits	1,119,832	988,649	(131,183)	-13.27%	973,861
Contract Labor	394,710	258,208	(136,502)	-52.86%	459,979
Physicians Fees	269,836	343,058	73,222	21.34%	408,140
Purchased Services	592,959	553,985	(38,974)	-7.04%	390,764
Supply Expense	1,732,797	1,369,770	(363,027)	-26.50%	1,685,780
Utilities	129,834	98,131	(31,703)	-32.31%	105,760
Repairs and Maintenance	432,826	507,620	74,794	14.73%	531,372
Insurance Expense	64,081	62,682	(1,398)	-2.23%	51,204
All Other Operating Expenses	255,979	236,702	(19,277)	-8.14%	188,727
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	25,990	17,937	(8,053)	-44.90%	50,397
Depreciation and Amortization	860,247	753,185	(107,062)	-14.21%	580,355
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	9,768,771	8,972,214	(796,556)	-8.86%	9,083,537
Net Operating Surplus/(Loss)	(188,830)	299,197	(488,027)	-163.11%	304,253
Non-Operating Revenue:					
Contributions	0	0	0	0.00%	0
Investment Income	22,675	9,794	12,881	131.53%	10,129
Tax Subsidies (Except for GO Bond Subsidies)	7	0	7	0.00%	13
Tax Subsidies for GO Bonds	0	0	0	0.00%	0
Interest Expense (Governmental Providers Only)	(91,608)	(96,400)	1,207	-1.34%	4,670
Other Non-Operating Revenue/(Expenses)	9,397	85,453	(76,056)	-89.00%	288,732
Total Non Operating Revenue/(Expense)	(59,529)	4,846	(64,375)	-1328.36%	303,544
Total Net Surplus/(Loss)	(\$248,358)	\$304,043	(\$552,402)	-181.69%	\$607,796
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease) in Unrestricted Net Assets	(\$248,358)	\$304,043	(\$552,402)	-181.69%	\$607,796
Operating Margin	-1.97%	3.23%			3.24%
Total Profit Margin	-2.59%	3.28%			6.47%
EBIDA	7.01%	11.35%			9.42%

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Six months ended December 31, 2022

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	YEAR-TO-DATE				Prior Year
	Actual 12/31/22	Budget 12/31/22	Positive (Negative) Variance	Percentage Variance	12/31/21
Gross Patient Revenue					
Inpatient Revenue	\$23,238,237	\$22,679,992	\$558,244	2.46%	\$26,111,600
Outpatient Revenue	75,281,662	73,735,995	1,545,666	2.10%	69,282,884
Clinic Revenue	13,450,282	11,813,935	1,636,347	13.85%	9,709,042
Specialty Clinic Revenue	0	0	0	0.00%	1,624,332
Total Gross Patient Revenue	111,970,180	108,229,923	3,740,257	3.46%	106,727,856
Deductions From Revenue					
Discounts and Allowances	(51,978,369)	(47,508,421)	(4,469,888)	-9.41%	(46,845,309)
Bad Debt Expense (Governmental Providers Only)	(5,804,638)	(7,075,977)	2,072,339	29.28%	(5,858,239)
Medical Assistance	(1,143,401)	(1,308,519)	163,117	12.48%	(784,241)
Total Deductions From Revenue	(58,126,348)	(55,891,917)	(2,234,431)	-4.00%	(53,487,789)
Net Patient Revenue	53,843,832	52,338,006	1,505,826	2.88%	53,240,067
Other Operating Revenue	1,077,574	1,362,373	(284,798)	-20.90%	716,530
Total Operating Revenue	54,921,406	53,700,379	1,221,028	2.27%	53,956,597
Operating Expenses					
Salaries and Wages	22,780,993	22,434,285	(346,708)	-1.55%	22,306,974
Fringe Benefits	6,633,927	6,183,104	(450,823)	-7.29%	6,212,928
Contract Labor	2,986,545	2,181,250	(805,295)	-36.92%	2,186,966
Physicians Fees	1,698,484	2,028,845	328,362	16.20%	2,082,898
Purchased Services	3,302,159	3,222,520	(79,640)	-2.47%	2,556,497
Supply Expense	9,404,197	8,117,135	(1,287,063)	-15.86%	9,052,005
Utilities	639,862	565,113	(74,550)	-13.19%	549,440
Repairs and Maintenance	2,705,402	3,153,686	448,283	14.21%	3,398,193
Insurance Expense	381,883	376,094	(5,789)	-1.54%	333,206
All Other Operating Expenses	1,450,108	1,364,909	(85,199)	-6.24%	1,261,093
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	157,175	108,001	(49,175)	-45.53%	333,310
Depreciation and Amortization	5,171,642	4,511,084	(660,559)	-14.64%	3,409,324
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	57,312,178	54,244,024	(3,068,154)	-5.66%	53,682,835
Net Operating Surplus/(Loss)	(2,390,772)	(543,645)	(1,847,126)	339.77%	273,761
Non-Operating Revenue:					
Contributions	0	0	0	0.00%	0
Investment Income	105,557	66,857	38,700	57.89%	69,488
Tax Subsidies (Except for GO Bond Subsidies)	11,904	0	11,904	0.00%	1,264
Tax Subsidies for GO Bonds	0	0	0	0.00%	0
Interest Expense (Governmental Providers Only)	(546,023)	(495,305)	(50,718)	10.24%	(541,279)
Other Non-Operating Revenue/(Expense)	290,236	508,717	(218,481)	-42.95%	1,186,055
Total Non Operating Revenue/(Expense)	(139,927)	80,268	(218,695)	-272.33%	716,628
Total Net Surplus/(Loss)	(\$2,529,999)	(\$463,377)	(\$2,066,721)	446.80%	\$989,289
Change in Unrealized Gains/(Losses) on Investments	0	(79,600)	79,600	-100.00%	0
Increase/(Decrease) in Unrestricted Net Assets	(\$2,529,999)	(\$542,977)	(\$1,988,121)	365.78%	\$989,289
Operating Margin	-4.35%	-1.01%			0.51%
Total Profit Margin	-4.60%	-0.86%			1.83%
EBIDA	5.08%	7.39%			6.83%

Statement of Revenue and Expense - 13 Month Trend

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
ROCK SPRINGS, WY

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	Actual 12/31/2022	Actual 11/30/2022	Actual 10/31/2022	Actual 9/30/2022	Actual 8/31/2022	Actual 7/31/2022
Gross Patient Revenue						
Inpatient Revenue	\$4,463,069	\$3,678,865	\$4,277,989	\$3,246,872	\$4,134,624	\$3,436,817
Inpatient Psych/Rehab Revenue						
Outpatient Revenue	\$12,848,095	\$12,675,454	\$12,884,251	\$12,045,141	\$12,931,953	\$10,996,767
Clinic Revenue	\$2,582,451	\$2,202,509	\$2,345,959	\$2,162,806	\$2,356,988	\$1,799,568
Specialty Clinic Revenue	\$0	\$0	\$0	\$0	\$0	\$0
Total Gross Patient Revenue	\$19,893,615	\$18,556,828	\$19,508,199	\$18,354,819	\$19,423,565	\$16,233,153
Deductions From Revenue						
Discounts and Allowances	\$9,136,379	\$8,380,016	\$8,628,111	\$9,331,432	\$9,741,452	\$6,780,917
Bad Debt Expense (Governmental Providers On Charity Care)	\$945,317	\$1,619,973	\$1,501,395	(\$126,524)	(\$31,929)	\$1,086,397
	\$417,112	\$43,394	\$189,646	\$275,776	\$158,493	\$75,890
Total Deductions From Revenue	10,498,808	10,043,376	10,299,152	9,480,685	9,868,024	7,938,303
Net Patient Revenue	\$9,394,807	\$8,513,453	\$9,209,047	\$8,874,134	\$9,555,541	\$8,298,850
Other Operating Revenue	165,133	132,734	169,063	115,962	154,077	320,975
Total Operating Revenue	9,559,941	8,646,187	9,378,110	8,990,096	9,709,618	8,619,825
Operating Expenses						
Salaries and Wages	\$3,889,680	\$3,857,380	\$3,946,792	\$3,761,912	\$3,647,165	\$3,678,095
Fringe Benefits	\$1,119,832	\$1,031,468	\$1,153,332	\$1,032,168	\$1,215,916	\$1,081,211
Contract Labor	\$394,710	\$334,759	\$494,776	\$802,847	\$527,616	\$631,838
Physicians Fees	\$209,836	\$279,170	\$240,218	\$271,035	\$308,888	\$326,337
Purchased Services	\$592,959	\$507,018	\$645,298	\$493,717	\$566,772	\$487,397
Supply Expense	\$1,732,797	\$1,422,646	\$1,519,557	\$1,728,154	\$1,715,201	\$1,285,843
Utilities	\$129,834	\$105,148	\$97,874	\$105,291	\$101,780	\$89,735
Repairs and Maintenance	\$432,828	\$466,178	\$197,810	\$513,654	\$548,033	\$546,902
Insurance Expense	\$64,081	\$84,081	\$64,293	\$93,788	\$63,788	\$61,854
All Other Operating Expenses	\$255,979	\$287,854	\$299,653	\$144,896	\$234,961	\$246,765
Bad Debt Expense (Non-Governmental Providers)						
Leases and Rentals	\$25,990	\$29,267	\$24,846	\$28,413	\$25,204	\$25,455
Depreciation and Amortization	\$660,247	\$965,302	\$1,089,478	\$787,028	\$750,061	\$739,526
Interest Expense (Non-Governmental Providers)						
Total Operating Expenses	\$9,769,771	\$8,330,288	\$9,763,924	\$9,530,904	\$9,705,394	\$9,222,928
Net Operating Surplus/(Loss)	(\$209,830)	(\$684,092)	(\$635,815)	(\$541,778)	\$4,235	(\$603,103)
Non-Operating Revenue:						
Contributions						
Investment Income	22,975	17,273	19,049	17,493	13,588	15,510
Tax Subsidies (Except for GO Bond Subsidies)						
Tax Subsidies for GO Bonds	7	58	41	14	11,745	9
Interest Expense (Governmental Providers Only)	(\$1,608)	(\$4,785)	(\$109,452)	(\$2,293)	(\$9,748)	(\$9,235)
Other Non-Operating Revenue/(Expenses)	\$,397	\$8,674	14,249	108,044	17,514	72,348
Total Non Operating Revenue/(Expense)	(\$59,628)	\$1,254	(\$76,112)	\$43,318	(\$35,900)	(\$11,368)
Total Net Surplus/(Loss)	(\$269,458)	(\$682,827)	(\$711,927)	(\$497,860)	(\$31,665)	(\$614,470)
Change in Unrealized Gains/(Losses) on Investm	0	0	0	0	0	0
Increase/(Decrease) in Unrestricted Net Assets	(\$269,458)	(\$682,827)	(\$711,927)	(\$497,860)	(\$31,665)	(\$614,470)
Operating Margin	-1.97%	-7.91%	-4.81%	-6.02%	0.04%	-7.02%
Total Profit Margin	-2.59%	-7.99%	-4.82%	-5.64%	-0.33%	-7.15%
EBIDA	7.01%	3.25%	7.40%	2.73%	7.77%	1.56%

Actual 6/30/2022	Actual 5/31/2022	Actual 4/30/2022	Actual 3/31/2022	Actual 2/28/2022	Actual 1/31/2022
\$3,777,323	\$4,251,353	\$3,329,718	\$3,977,177	\$3,576,754	\$3,553,344
\$11,110,377	\$11,073,942	\$11,034,842	\$11,545,845	\$11,321,452	\$11,144,237
\$1,679,271	\$1,564,143	\$1,511,759	\$1,701,127	\$1,734,823	\$1,482,429
\$282,105	\$142,760	\$278,440	\$433,499	\$170,366	\$315,895
\$16,849,077	\$17,032,197	\$16,144,564	\$17,657,638	\$16,803,394	\$16,505,665
\$6,166,834	\$7,535,089	\$6,674,512	\$8,147,341	\$7,528,996	\$7,688,958
\$708,218	\$765,156	\$1,126,374	\$813,526	\$1,205,992	\$1,242,529
\$657,759	\$40,157	\$216,239	\$311,522	(\$6,686)	\$27,295
7,552,609	8,440,432	8,019,124	9,272,389	8,827,400	9,158,782
\$9,295,468	\$8,591,766	\$8,125,441	\$8,385,250	\$7,975,904	\$7,346,883
101,833	133,870	198,584	438,179	158,985	227,298
9,398,301	8,726,436	8,324,024	8,821,419	8,132,982	7,574,181
\$3,742,411	\$3,734,120	\$3,824,834	\$3,730,770	\$3,546,337	\$3,679,506
\$1,094,816	\$971,272	\$1,090,848	\$1,083,304	\$1,458,793	\$1,052,865
\$886,061	\$1,085,022	\$1,073,901	\$816,922	\$832,212	\$823,830
\$327,771	\$331,092	\$331,304	\$443,520	\$377,123	\$402,704
\$541,244	\$445,141	\$449,586	\$420,057	\$819,589	\$548,353
\$1,191,337	\$1,167,763	\$1,271,366	\$1,581,159	\$1,282,845	\$1,116,687
\$98,423	\$105,411	\$108,551	\$116,195	\$91,746	\$197,027
(\$457,054)	\$853,592	\$639,594	\$558,833	\$627,377	\$543,950
\$61,854	\$68,440	\$52,260	\$53,274	\$49,545	\$51,700
\$242,792	\$232,000	\$226,221	\$196,212	\$204,287	\$188,182
(\$277,144)	\$81,782	\$72,847	\$82,298	\$59,614	\$47,850
\$1,234,061	\$737,864	\$802,622	\$624,984	\$581,401	\$580,596
\$8,878,823	\$9,584,040	\$9,742,343	\$9,717,527	\$9,427,992	\$8,943,989
\$721,878	(\$868,804)	(\$1,418,319)	(\$838,107)	(\$1,294,895)	(\$1,389,819)
118,125	17,153	11,223	11,574	7,177	8,304
16	255	6	26	28	189
(\$52,978)	(\$79,408)	(\$76,409)	(\$1,580)	(\$9,876)	(\$40,705)
10,606	18,933	301,537	195,183	13,084	1,760,576
(\$424,236)	(\$42,067)	\$233,352	\$85,293	(\$16,809)	\$1,537,305
\$287,442	(\$988,571)	(\$1,184,987)	(\$760,814)	(\$1,517,508)	\$167,546
(587,360)					
(\$288,938)	(\$900,671)	(\$1,184,987)	(\$760,814)	(\$1,517,508)	\$167,546
7.88%	-9.84%	-17.04%	-9.41%	-15.92%	-18.08%
3.16%	-10.32%	-14.24%	-8.45%	-16.13%	2.21%
26.81%	-1.35%	-9.81%	-2.38%	-8.77%	-10.42%

Statement of Cash Flows

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Six months ended December 31, 2022

CASH FLOW

	Current Month 12/31/2022	Current Year-To-Date 12/31/2022
CASH FLOWS FROM OPERATING ACTIVITIES:		
Net Income (Loss)	(\$248,359)	(\$2,529,099)
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities:		
Depreciation	860,247	5,171,642
(Increase)/Decrease in Net Patient Accounts Receivable	1,543,709	339,547
(Increase)/Decrease in Other Receivables	(300,739)	595,069
(Increase)/Decrease in Inventories	(8,555)	(51,844)
(Increase)/Decrease in Pre-Paid Expenses	(114,509)	246,469
(Increase)/Decrease in Other Current Assets	0	0
Increase/(Decrease) in Accounts Payable	(380,230)	1,292,876
Increase/(Decrease) in Notes and Loans Payable	0	0
Increase/(Decrease) in Accrued Payroll and Benefits	427,869	95,628
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	190,752	134,683
Net Cash Provided by Operating Activities:	1,970,184	5,294,971
CASH FLOWS FROM INVESTING ACTIVITIES:		
Purchase of Property, Plant and Equipment	(324,489)	(869,006)
(Increase)/Decrease in Limited Use Cash and Investments	(3,002,803)	3,060,625
(Increase)/Decrease in Other Limited Use Assets	(36,301)	(76,100)
(Increase)/Decrease in Other Assets	8,162	48,973
Net Cash Used by Investing Activities	(3,355,431)	2,164,492
CASH FLOWS FROM FINANCING ACTIVITIES:		
Increase/(Decrease) in Bond/Mortgage Debt	(128,008)	(769,364)
Increase/(Decrease) in Capital Lease Debt	0	0
Increase/(Decrease) in Other Long Term Liabilities	(245,993)	(2,818,158)
Net Cash Used for Financing Activities	(374,000)	(3,587,522)
(INCREASE)/DECREASE IN RESTRICTED ASSETS	0	0
Net Increase/(Decrease) in Cash	(1,759,247)	3,871,941
Cash, Beginning of Period	12,805,116	7,173,928
Cash, End of Period	\$11,045,870	\$11,045,870

Patient Statistics

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Six months ended December 31, 2022

Current Month				Year-To-Date				
Actual 12/31/22	Budget 12/31/22	Positive/ (Negative) Variance	Prior Year 12/31/21	STATISTICS	Actual 12/31/22	Budget 12/31/22	Positive/ (Negative) Variance	Prior Year 12/31/21
Discharges								
132	120	12	120	Acute	713	742	(29)	742
132	120	12	120	Total Adult Discharges	713	742	(29)	742
30	37	(7)	37	Newborn	208	202	6	202
162	157	5	157	Total Discharges	921	944	(23)	944
Patient Days:								
492	424	68	424	Acute	2,476	2,833	(357)	2,833
492	424	68	424	Total Adult Patient Days	2,476	2,833	(357)	2,833
61	70	(9)	70	Newborn	352	317	35	317
553	494	59	494	Total Patient Days	2,828	3,150	(322)	3,150
Average Length of Stay (ALOS)								
3.7	3.5	0.2	3.5	Acute	3.5	3.8	(0.3)	3.8
3.7	3.5	0.2	3.5	Total Adult ALOS	3.5	3.8	(0.3)	3.8
2.0	1.9	0.1	1.9	Newborn ALOS	1.7	1.6	0.1	1.6
Average Daily Census (ADC)								
15.9	13.7	2.2	13.7	Acute	13.5	15.4	(1.9)	15.4
15.9	13.7	2.2	13.7	Total Adult ADC	13.5	15.4	(1.9)	15.4
2.0	2.3	(0.3)	2.3	Newborn	1.9	1.7	0.2	1.7
Emergency Room Statistics								
130	130	0	130	ER Visits - Admitted	704	756	(52)	756
1,305	1,197	108	1,197	ER Visits - Discharged	7,161	6,990	171	6,990
1,435	1,327	108	1,327	Total ER Visits	7,865	7,746	119	7,746
9.06%	9.80%		9.80%	% of ER Visits Admitted	8.95%	9.76%		9.76%
98.48%	108.33%		108.33%	ER Admissions as a % of Total	98.74%	101.89%		101.89%
Outpatient Statistics:								
7,788	8,806	(1,018)	8,806	Total Outpatients Visits	44,526	57,636	(13,110)	56,423
0	181	(181)	181	Observation Bed Days	0	762	(762)	762
5,525	5,231	294	5,231	Clinic Visits - Primary Care	31,183	30,186	997	30,186
519	568	(49)	568	Clinic Visits - Specialty Clinics	3,028	2,897	131	2,897
55	22	33	22	IP Surgeries	246	132	114	132
90	130	(40)	130	OP Surgeries	661	634	27	634
Productivity Statistics:								
442.13	465.19	(23.06)	449.47	FTE's - Worked	450.03	465.19	(15.16)	458.76
488.28	511.59	(23.31)	498.29	FTE's - Paid	500.26	511.59	(11.33)	506.33
1.3200	1.6200	(0.30)	1.6206	Case Mix Index - Medicare	1.3750	0.0000	1.38	1.7206
1.2300	0.7200	0.51	0.7200	Case Mix Index - All payers	1.1733	0.0000	1.17	0.9448

Accounts Receivable Tracking Report

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

12/31/22

	<u>Current Month Actual</u>	<u>Current Month Target</u>
Gross Days in Accounts Receivable - All Services	57.94	76.31
Net Days in Accounts Receivable	60.15	65.76
Number of Gross Days in Unbilled Revenue	15.73	3.0 or <
Number of Days Gross Revenue in Credit Balances	0.00	< 1.0
Self Pay as a Percentage of Total Receivables	28.42%	N/A
Charity Care as a % of Gross Patient Revenue - Current Month	2.10%	1.21%
Charity Care as a % of Gross Patient Revenue - Year-To-Date	1.02%	1.21%
Bad Debts as a % of Gross Patient Revenue - Current Month	4.75%	6.57%
Bad Debts as a % of Gross Patient Revenue - Year-To-Date	4.47%	6.54%
Collections as a Percentage of Net Revenue - Current Month	113.30%	100% or >
Collections as a Percentage of Net Revenue - Year-To-Date	98.35%	100% or >
Percentage of Blue Cross Receivable > 90 Days	4.87%	< 10%
Percentage of Insurance Receivable > 90 Days	37.15%	< 15%
Percentage of Medicaid Receivable > 90 Days	24.31%	< 20%
Percentage of Medicare Receivable > 60 Days	11.29%	< 6%

Variance Analysis**MEMORIAL HOSPITAL OF SWEETWATER COUNTY****PAGE 13****ROCK SPRINGS, WYOMING****Six months ended December 31, 2022**

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	717,076	3.74%	3,740,257	3.46%

Gross patient revenue is over budget for the month and over budget year to date. Patient statistics under budget include Surgeries and Outpatient visits.

Average Daily Census is 15.9 in December which is over budget by 2.2

Deductions from Revenue	(369,075)	-3.64%	(2,234,431)	-4.00%
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Deductions from revenue are under budget for December and under budget year to date.

They are currently booked at 52.7% for December and 51.9% year to date. This number is monitored closely each month and fluctuates based on historical write-offs and current collection percentages.

Bad Debt Expense	314,795	24.98%	2,072,339	29.28%
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Bad debt expense is booked at 4.8% for December and 4.5% year to date.

Charity Care	(184,476)	-79.30%	163,117	12.48%
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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.

Other Operating Revenue	(39,472)	-17.57%	(284,798)	-20.90%
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Other Operating Revenue is under budget for the month and is under budget year to date.

Salaries and Wages	(107,392)	-2.84%	(346,708)	-1.55%
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Salary and Wages are over budget in December and are over budget year to date.

Paid FTEs are over budget by 23.31 FTEs for the month and under 11.33 FTEs year to date.

Fringe Benefits	(131,183)	-19.27%	(450,823)	-7.29%
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Fringe benefits are over budget in December and over budget year to date.

Contract Labor	(136,502)	-52.86%	(805,295)	-36.92%
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Contract labor is over budget for December and over budget year to date. Med/surg, ICU, ER and Security are over budget.

Variance Analysis**MEMORIAL HOSPITAL OF SWEETWATER COUNTY****PAGE 14****ROCK SPRINGS, WYOMING****Six months ended December 31, 2022**

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	73,222	21.34%	328,362	16.20%
Physician fees under budget in December and under budget year to date. ER and Rad Onc are over budget in December.				
Purchased Services	(30,974)	-7.04%	(79,640)	-2.47%
Purchased services are over budget for December and over budget year to date. Expenses over budget are Consulting fee's, Legal fee's and Dept Management Service.				
Supply Expense	(363,027)	-26.50%	(1,297,062)	-15.88%
Supplies are over budget for December and over budget year to date. Line items over budget include lab supplies blood, oxygen, drugs, inventory, implants and food.				
Repairs & Maintenance	74,794	14.73%	448,283	14.21%
Repairs and Maintenance are under budget for December and under budget year to date.				
All Other Operating Expenses	(19,277)	-8.14%	(85,199)	-6.24%
This expense is over budget in December and over budget year to date. Other expenses over budget are Physician recruitment, Other expenses, Employee recruitment and Pharmacy floor direct.				
Leases and Rentals	(8,053)	-44.90%	(49,175)	-45.53%
This expense is over budget for December and is over budget year to date				
Depreciation and Amortization	(107,062)	-14.21%	(660,559)	-14.64%
Depreciation is over budget for December and is over budget year to date				
BALANCE SHEET				
Cash and Cash Equivalents	(\$1,759,247)	-13.74%		
Cash increased in December. Cash collections for December were \$10.6 million. Days Cash on Hand increased to 103 days.				
Gross Patient Accounts Receivable	(\$2,835,789)	-7.21%		
This receivable decreased in December due to high collections				

Variance Analysis**MEMORIAL HOSPITAL OF SWEETWATER COUNTY
ROCK SPRINGS, WYOMING
Six months ended December 31, 2022****PAGE 15**

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 Amount	%	Year-to-Date Amount	%
Bad Debt and Allowance Reserves	1,292,090	6.44%		
Bad Debt and Allowances decreased.				
Other Receivables	300,739	15.52%		
Other Receivables decreased in December due to county and occ med invoices payments				
Prepaid Expenses	114,509	7.06%		
Prepaid expenses decreased due to the normal activity in this account.				
Limited Use Assets	3,039,104	18.90%		
These assets increased due funds moved into the Board Designated Funds account				
Plant Property and Equipment	(535,759)	-0.67%		
The decrease in these assets is due to the the normal increase in accumulated depreciation.				
Accounts Payable	380,230	5.37%		
This liability increased due to the normal activity in this account.				
Accrued Payroll	(400,241)	-23.45%		
This liability increased in December. The payroll accrual for December was 13 days.				
Accrued Benefits	(27,628)	-1.08%		
This liability decreased in December with the normal accrual and usage of PTO.				
Other Current Liabilities	(190,752)	-33.33%		
This liability increased for December due to the accrual on the bonds				
Other Long Term Liabilities	245,993	1.95%		
This liability decreased due the payments on the leases				
Total Net Assets	248,358	0.29%		
The net loss from operations for December is \$188,830				



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

PHYSICIAN CLINICS

Unaudited Financial Statements

for

Six months ended December 31, 2022

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

Six months ended December 31, 2022

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Key Financial Ratios**MEMORIAL HOSPITAL OF SWEETWATER COUNTY****PAGE 2****ROCK SPRINGS, WY****Six months ended December 31, 2022****- DESIRED POSITION IN RELATION TO BENCHMARKS AND BUDGET**

	Month to Date 12/31/2022	Year to Date 12/31/2022	Prior Fiscal Year End 06/30/22	MGMA Hospital Owned Rural
Profitability:				
Operating Margin	-17.42%	-30.32%	-6.33%	-36.58%
Total Profit Margin	-17.42%	-30.32%	-4.05%	-36.58%
Contractual Allowance %	43.94%	44.34%	44.30%	
Liquidity:				
Net Days in Accounts Receivable	24.77	27.59	65.76	39.58
Gross Days in Accounts Receivable	30.30	32.92	76.31	72.82
Productivity and Efficiency:				
Patient Visits Per Day	178.23	169.47	155.29	
Total Net Revenue per FTE	N/A	\$195,826	\$204,705	
Salary Expense per Paid FTE	N/A	\$184,047	\$102,150	
Salary and Benefits as a % of Net Revenue	98.90%	109.49%	58.36%	91.26%
Employee Benefits %	15.67%	16.50%	28.35%	6.10%

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Six months ended December 31, 2022

	CURRENT MONTH				Prior Year 12/31/21
	Actual 12/31/22	Budget 12/31/22	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Clinic Revenue	2,582,451	2,021,770	560,680	27.73%	1,967,053
Specialty Clinic Revenue	0	0	0	0.00%	357,797
Total Gross Patient Revenue	2,582,451	2,021,770	560,680	27.73%	2,324,849
Deductions From Revenue					
Discounts and Allowances	(1,134,681)	(909,327)	(225,355)	-24.78%	(1,025,029)
Total Deductions From Revenue	(1,134,681)	(909,327)	(225,355)	-24.78%	(1,025,029)
Net Patient Revenue	1,447,770	1,112,444	335,326	30.14%	1,299,820
Other Operating Revenue	27,776	52,588	(24,812)	-47.18%	55,210
Total Operating Revenue	1,475,546	1,165,032	310,513	26.65%	1,355,030
Operating Expenses					
Salaries and Wages	1,261,706	1,129,378	(132,328)	-11.72%	1,165,634
Fringe Benefits	197,865	178,296	(19,569)	-10.86%	155,260
Contract Labor	0	0	0	0.00%	0
Physicians Fees	45,281	102,090	56,809	55.65%	52,499
Purchased Services	9,136	7,427	(1,709)	-23.01%	13,553
Supply Expense	13,287	21,018	7,731	36.78%	16,630
Utilities	982	2,493	1,511	60.60%	985
Repairs and Maintenance	6,266	18,023	11,757	65.23%	14,375
Insurance Expense	16,625	16,709	84	0.50%	15,527
All Other Operating Expenses	170,453	116,073	(54,381)	-46.85%	119,107
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	3,035	3,541	506	14.30%	3,864
Depreciation and Amortization	8,110	6,849	(1,261)	-18.41%	9,763
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	1,732,546	1,601,896	(130,650)	-8.16%	1,567,196
Net Operating Surplus/(Loss)	(257,001)	(436,864)	179,863	-41.17%	(212,166)
Total Net Surplus/(Loss)	(257,001)	(436,864)	179,863	-41.17%	(212,166)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease in Unrestricted Net Assets	(257,001)	(436,864)	179,863	-41.17%	(212,166)
Operating Margin	-17.42%	-37.50%			-15.66%
Total Profit Margin	-17.42%	-37.50%			-15.66%
EBIDA	-16.87%	-36.91%			-14.94%

Statement of Revenue and Expense

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

ROCK SPRINGS, WY

Six months ended December 31, 2022

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	YEAR-TO-DATE				Prior Year 12/31/21
	Actual 12/31/22	Budget 12/31/22	Positive (Negative) Variance	Percentage Variance	
Gross Patient Revenue					
Clinic Revenue	13,450,282	11,813,935	1,636,347	13.85%	9,709,042
Specialty Clinic Revenue	0	0	0	0.00%	1,624,332
Total Gross Patient Revenue	13,450,282	11,813,935	1,636,347	13.85%	11,333,373
Deductions From Revenue					
Discounts and Allowances	(5,964,216)	(5,275,229)	(688,986)	-13.06%	(5,059,631)
Total Deductions From Revenue	(5,964,216)	(5,275,229)	(688,986)	-13.06%	(5,059,631)
Net Patient Revenue	7,486,066	6,538,706	947,360	14.49%	6,273,742
Other Operating Revenue	230,690	318,590	(87,901)	-27.59%	321,965
Total Operating Revenue	7,716,756	6,857,296	859,460	12.53%	6,595,707
Operating Expenses					
Salaries and Wages	7,252,584	6,712,345	(540,239)	-8.05%	6,937,352
Fringe Benefits	1,196,586	1,144,907	(51,679)	-4.51%	1,003,746
Contract Labor	0	0	0	0.00%	0
Physicians Fees	387,302	687,540	300,238	43.67%	320,153
Purchased Services	52,839	44,179	(8,660)	-19.60%	81,483
Supply Expense	122,337	136,347	14,010	10.28%	110,137
Utilities	7,805	14,965	7,160	47.84%	7,375
Repairs and Maintenance	82,371	114,085	31,714	27.80%	103,306
Insurance Expense	99,865	100,253	387	0.39%	91,112
All Other Operating Expenses	787,573	667,279	(120,294)	-18.03%	683,125
Bad Debt Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Leases and Rentals	18,586	21,064	2,478	11.77%	21,942
Depreciation and Amortization	48,659	41,098	(7,562)	-18.40%	63,952
Interest Expense (Non-Governmental Providers)	0	0	0	0.00%	0
Total Operating Expenses	10,056,509	9,604,061	(372,447)	-3.85%	9,423,685
Net Operating Surplus/(Loss)	(2,339,753)	(2,826,765)	487,012	-17.23%	(2,827,977)
Total Net Surplus/(Loss)	(2,339,753)	(2,826,765)	\$487,012	-17.23%	(\$2,827,977)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0.00%	0
Increase/(Decrease) in Unrestricted Net Assets	(2,339,753)	(2,826,765)	\$487,012	-17.23%	(\$2,827,977)
Operating Margin	-30.32%	-41.22%			-42.88%
Total Profit Margin	-30.32%	-41.22%			-42.88%
EBIDA	-29.69%	-40.62%			-41.91%

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

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	Actual 12/31/2022	Actual 11/30/2022	Actual 10/31/2022	Actual 9/30/2022	Actual 8/31/2022
Gross Patient Revenue					
Clinic Revenue	\$2,582,451	\$2,202,509	\$2,345,959	\$2,162,806	\$2,356,988
Specialty Clinic Revenue	\$0	\$0	\$0	\$0	\$0
Total Gross Patient Revenue	\$2,582,451	\$2,202,509	\$2,345,959	\$2,162,806	\$2,356,988
Deductions From Revenue					
Discounts and Allowances	(\$1,134,681)	(\$985,048)	(\$1,111,879)	(\$927,592)	(\$1,027,367)
Total Deductions From Revenue	(\$1,134,681)	(\$985,048)	(\$1,111,879)	(\$927,592)	(\$1,027,367)
Net Patient Revenue	\$1,447,770	\$1,217,461	\$1,233,981	\$1,235,214	\$1,329,621
Other Operating Revenue	\$27,776	\$37,200	\$41,354	\$39,391	\$42,453
Total Operating Revenue	1,475,546	1,254,662	1,275,335	1,274,605	1,372,073
Operating Expenses					
Salaries and Wages	\$1,261,706	\$1,212,758	\$1,240,750	\$1,263,961	\$1,042,504
Fringe Benefits	\$197,685	\$184,592	\$293,138	\$202,670	\$206,861
Contract Labor	\$0	\$0	\$0	\$0	\$0
Physicians Fees	\$45,281	\$70,437	\$80,401	\$87,448	\$59,970
Purchased Services	\$9,136	\$9,838	\$8,835	\$8,150	\$9,056
Supply Expense	\$13,287	\$23,429	\$24,210	\$24,164	\$19,379
Utilities	\$982	\$1,010	\$1,010	\$1,905	\$1,907
Repairs and Maintenance	\$6,266	\$22,234	\$12,337	\$14,326	\$13,311
Insurance Expense	\$16,625	\$16,625	\$16,625	\$16,625	\$16,625
All Other Operating Expenses	\$170,453	\$138,818	\$134,434	\$53,151	\$140,639
Bad Debt Expense (Non-Governmental Providers)					
Leases and Rentals	\$3,035	\$4,310	\$2,360	\$3,264	\$3,013
Depreciation and Amortization	\$8,110	\$8,110	\$8,110	\$8,110	\$8,110
Interest Expense (Non-Governmental Providers)					
Total Operating Expenses	\$1,732,546	\$1,692,162	\$1,712,211	\$1,663,774	\$1,521,195
Net Operating Surplus/(Loss)	(\$257,001)	(\$437,500)	(\$436,876)	(\$389,169)	(\$149,122)
Total Net Surplus/(Loss)	(\$257,001)	(\$437,500)	(\$436,876)	(\$389,169)	(\$149,122)
Change in Unrealized Gains/(Losses) on Investments	0	0	0	0	0
Increase/(Decrease) in Unrestricted Net Assets	(\$257,001)	(\$437,500)	(\$436,876)	(\$389,169)	(\$149,122)
Operating Margin	-17.42%	-34.87%	-34.26%	-30.63%	-10.87%
Total Profit Margin	-17.42%	-34.87%	-34.26%	-30.63%	-10.87%
EBIDA	-16.87%	-34.22%	-33.62%	-29.90%	-10.26%

Actual 7/31/2022	Actual 6/30/2022	Actual 5/31/2022	Actual 4/30/2022	Actual 3/31/2022	Actual 2/28/2022	Actual 1/31/2022	Actual 12/31/2021
\$1,799,568	\$1,448,630	\$1,308,880	\$1,588,815	\$1,451,105	\$1,300,086	\$1,410,642	\$1,374,626
\$0	\$343,674	\$161,892	\$298,088	\$342,042	\$281,294	\$311,512	\$321,541
\$1,799,568	\$1,792,304	\$1,470,752	\$1,886,871	\$1,793,147	\$1,581,380	\$1,722,154	\$1,696,166
(\$777,549)	(\$814,085)	(\$701,578)	(\$869,032)	(\$828,370)	(\$758,645)	(\$838,394)	(\$741,884)
(\$777,549)	(\$814,085)	(\$701,578)	(\$869,032)	(\$828,370)	(\$758,645)	(\$838,394)	(\$741,884)
\$1,022,019	\$978,219	\$769,173	\$1,017,838	\$964,777	\$822,735	\$885,759	\$954,482
\$42,516	\$46,757	\$59,125	\$58,845	\$59,103	\$65,776	\$70,558	\$67,749
1,064,536	1,024,977	828,298	1,076,684	1,023,880	888,510	956,317	1,022,231
\$1,230,905	\$1,061,614	\$940,167	\$1,037,659	\$1,142,213	\$1,104,879	\$1,132,930	\$1,137,133
\$201,840	\$149,134	\$184,159	\$206,715	\$216,355	\$240,814	\$263,026	\$188,192
\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$83,785	\$146,371	\$114,521	\$46,485	\$30,939	\$93,378	\$76,208	\$140,801
\$7,824	\$15,910	\$13,208	\$12,175	\$15,397	\$13,204	\$18,024	\$12,233
\$17,868	\$21,987	\$15,954	\$19,891	\$18,548	\$17,037	\$14,651	\$12,388
\$991	\$2,404	\$1,933	\$1,872	\$1,875	\$1,836	\$1,810	\$594
\$13,898	\$18,834	\$16,580	\$16,968	\$18,493	\$18,642	\$17,458	\$19,895
\$16,739	\$13,611	\$13,611	\$13,611	\$13,611	\$13,611	\$13,611	\$13,611
\$150,077	\$83,657	\$82,775	\$134,676	\$105,518	\$95,431	\$91,548	\$109,020
\$2,604	\$4,093	\$4,022	\$3,037	\$3,450	\$3,319	\$3,032	\$2,398
\$8,110	\$12,936	\$12,937	\$12,968	\$17,183	\$18,273	\$18,273	\$18,841
\$1,734,622	\$1,508,431	\$1,399,867	\$1,506,056	\$1,583,583	\$1,620,324	\$1,647,571	\$1,634,705
(\$670,986)	(\$483,454)	(\$571,568)	(\$429,373)	(\$559,703)	(\$731,814)	(\$691,254)	(\$612,474)
(\$670,986)	(\$483,454)	(\$571,568)	(\$429,373)	(\$559,703)	(\$731,814)	(\$691,254)	(\$612,474)
0	0	0	0	0	0	0	0
(\$670,986)	(\$483,454)	(\$571,568)	(\$429,373)	(\$559,703)	(\$731,814)	(\$691,254)	(\$612,474)
-47.17%	-69.01%	-39.85%	-54.86%	-82.36%	-72.26%	-59.92%	-56.63%
-47.17%	-69.01%	-39.85%	-54.86%	-82.36%	-72.26%	-59.92%	-56.63%
-45.91%	-67.44%	-38.67%	-52.89%	-80.31%	-70.37%	-58.09%	-54.86%

Patient Statistics

MEMORIAL HOSPITAL OF SWEETWATER COUNTY

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ROCK SPRINGS, WY

Six months ended December 31, 2022

Current Month				STATISTICS	Year-To-Date			
Actual 12/31/22	Budget 12/31/22	Positive/ (Negative) Variance	Prior Year 12/31/21		Actual 12/31/22	Budget 12/31/22	Positive/ (Negative) Variance	Prior Year 12/31/21
				Outpatient Statistics:				
5,525	5,231	294	3,978	Clinic Visits - Primary Care	31,183	30,186	997	24,513
519	568	(49)	454	Clinic Visits - Specialty Clinics	3,028	2,897	131	3,079
				Productivity Statistics:				
69.25	68.57	0.68	63.34	FTE's - Worked	68.82	68.57	0.25	62.85
76.93	75.35	1.58	70.23	FTE's - Paid	78.17	75.35	2.82	69.73

**MEMORIAL HOSPITAL OF SWEETWATER COUNTY
CASH DISBURSEMENT SUMMARY FOR DECEMBER 22**

PAYMENT SOURCE	NO. OF DISBURSEMENTS	AMOUNT
OPERATIONS (GENERAL FUND/KEYBANK)	683	9,342,163.89
CAPITAL EQUIPMENT (PLANT FUND)	11	205,165.14
CONSTRUCTION IN PROGRESS (BUILDING FUND)	3	197,539.66
PAYROLL DECEMBER 08, 2022		1,671,475.27
PAYROLL DECEMBER 22, 2022		1,680,494.31
TOTAL CASH OUTFLOW		<u>\$9,744,868.69</u>
CASH COLLECTIONS		10,644,729.94
INCREASE/DECREASE IN CASH		\$899,861.25

**CONSTRUCTION IN PROGRESS (BUILDING FUND) CASH DISBURSEMENTS
FISCAL YEAR 2023**

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001171	7/7/2022	WASATCH CONTROLS (HARRIS .	38,000.00			
001172	7/7/2022	WESTERN ENGINEERS & GEOLO	704.07			
001173	7/8/2022	CERNER CORPORATION	59,427.44			
WF DEBT	7/19/2022	WF DEBT SERVICE	157,080.26			
JULY TOTALS					255,211.77	255,211.77

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001174	8/4/2022	WESTERN ENGINEERS & GEOLO	200.75	BUILDING AUTOMATION		
001175	8/4/2022	WYLIE CONSTRUCTION INC.	61,978.36	BULK OXYGEN		
001176	8/12/2022	PLAN ONE/ARCHITECTS	2,025.00	MOB ENTRY		
WF DEBT	8/16/2022	WF DEBT SERVICE	157,080.26	WF DEBT SERVICE		
AUGUST TOTALS					221,284.37	476,496.14

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001177	9/9/2022	WESTERN ENGINEERS & GEOLO	144.75	BUILDING AUTOMATION		
001178	9/22/2022	WYLIE CONSTRUCTION INC.	13,532.04	BULK OXYGEN		
WF DEBT	9/19/2022	WF DEBT SERVICE	190,750.66	WF DEBT SERVICE		
SEPTEMBER TOTALS					204,427.45	680,923.59

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001179	9/9/2022	WESTERN ENGINEERS & GEOLO	419.25	BUILDING AUTOMATION		
WF DEBT	10/18/2022	WF DEBT SERVICE	190,750.66	WF DEBT SERVICE		
OCTOBER TOTALS					191,169.91	872,093.50

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001180	11/3/2022	WESTERN ENGINEERS & GEOLO	2,683.75	BUILDING AUTOMATION		
001181	11/3/2022	WYLIE CONSTRUCTION INC.	16,349.00	BULK OXYGEN		
001182	11/10/2022	PLAN ONE/ARCHITECTS	4,600.75	CHEMO MIXING ROOM		
001183	11/10/2022	WASATCH CONTROLS (HARRIS .	23,750.00	BUILDING AUTOMATION		
001184	11/18/2022	WASATCH CONTROLS (HARRIS .	40,850.00	BUILDING AUTOMATION		
WF DEBT	11/17/2022	WF DEBT SERVICE	190,750.66	WF DEBT SERVICE		
NOVEMBER TOTALS					279,064.16	1,151,157.66

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
001180	12/1/2022	WESTERN ENGINEERS & GEOLO	2,108.25	BUILDING AUTOMATION		
001181	12/8/2022	PLAN ONE/ARCHITECTS	4,600.75	CHEMO MIXING ROOM		
WF DEBT	12/19/2022	WF DEBT SERVICE	190,750.66	WF DEBT SERVICE		
DECEMBER TOTALS					197,539.66	1,348,697.32

**PLANT FUND CASH DISBURSEMENTS
FISCAL YEAR 2023**

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002534	7/15/2022	CERNER CORPORATION	24,262.00	CERNER ANESTHESIA CARTS		
JULY TOTALS					24,262.00	24,262.00

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002535	8/12/2022	EAGLE COMPACTION	18,250.00	TRASH COMPACTOR		
002536	8/12/2022	OLYMPUS AMERICA INC	10,755.50	URETERSCOPE		
002537	8/18/2022	ROBERT I MERRILL COMPANY	16,434.00	RATED DOOR FOR MED IMAGE & SURGERY		
AUGUST TOTALS					45,439.50	69,701.50

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002538	9/1/2022	OLYMPUS AMERICA INC	9,388.49	URETERSCOPE		
002539	9/9/2022	WASATCH CONTROLS (HARRIS A	71,250.00	BUILDING AUTOMATION		
002540	9/15/2022	WASATCH CONTROLS (HARRIS A	73,150.00	BUILDING AUTOMATION		
002541	9/22/2022	MITCHELL ACOUSTICS, INC	15,360.00	BUILDING AUTOMATION		
SEPTEMBER TOTALS					169,148.49	238,849.99

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002542	10/6/2022	DATBEX-OHMEDA, INC.	5,637.50	WIRELESS FETAL MONITOR		
002543	10/18/2022	FIRSTCHOICE FORD LINCOLN	59,910.87	PLOW TRUCK		
002544	10/20/2022	BIG SKY PLUMBING LLC	20,241.00	BULK OXYGEN		
OCTOBER TOTALS					85,789.37	324,639.36

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002545	11/22/2022	MD ANDERSON CANCER CENTER	1,150.00	SRS HEAD		
NOVEMBER TOTALS					1,150.00	325,789.36

CHECK NUMBER	DATE	PAYEE	AMOUNT	DESCRIPTION	MONTHLY TOTAL	FYTD TOTAL
002546	12/1/2022	GRAINGER	1,174.21	WATER LINE TIE IN		
002547	12/1/2022	ROCK SPRINGS WINNELSON CO	582.02	WATER LINE TIE IN		
002548	12/1/2022	SIMPLYGROUP II, LLC (SIMPLYNA	34,380.86	SYNOLOGY BACKUP SOLUTIONS		
002549	12/1/2022	HILL-ROM	8,860.50	VOLARA AIRWAY CLEARANCE DEVICE		
002550	12/2/2022	EAGLE COMPACTION	18,250.00	TRASH COMPACTOR		
002551	12/1/2022	ROCK SPRINGS WINNELSON CO	4,266.68	WATER LINE TIE IN		
002552	12/15/2022	CDW GOVERNMENT LLC	11,207.64	SCAN GUNS		
002553	12/22/2022	BELMONT MEDICAL TECHNOLOG	33,795.00	BELMONT RAPID INFUSERS (2)		
002554	12/22/2022	OLYMPUS AMERICA INC	10,976.38	UROLOGY CYSTOSCOPY EQUIPMENT		
002555	12/22/2022	ROCK SPRINGS WINNELSON CO	446.85	WATER LINE TIE IN		
002556	12/22/2022	WASATCH CONTROLS (HARRIS A	81,225.00	BUILDING AUTOMATION		
DECEMBER TOTALS					205,165.14	530,954.50

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
12/31/2022

Amount	Description
746.37	941 Taxes Total
54,312.68	Advertising Total
45.00	Bank Fees Total
1,635.85	Billing Services Total
14,458.95	Blood Total
3,500.00	Building Lease Total
97,043.17	Café Management Total
3,706.38	Cellular Telephone Total
394.00	Collection Agency Total
117,447.22	Computer Equipment Total
1,564.02	Consulting Fees Total
267,400.55	Contract Maintenance Total
472,609.91	Contract Personnel Total
772.64	Courier Services Total
5,784.47	Credit Card Payment Total
26,452.54	Dental Insurance Total
10,995.20	Dialysis Supplies Total
21,597.08	Education Material Total
10,377.50	Employee Recruitment Total
575.00	Employee Vision Plan Total
180,145.63	Equipment Lease Total
7,600.97	Freight Total
538.55	Fuel Total
5,855.58	Garbage Collection Total
725,627.91	Group Health Total
372,880.58	Hospital Supplies Total
18,020.00	Implant Supplies Total
29,140.43	Insurance Premiums Total
10,282.82	Insurance Refund Total
73,509.56	Laboratory Services Total
191,721.23	Laboratory Supplies Total
3,298.29	Laundry Supplies Total
8,219.00	Legal Fees Total
705.00	License & Taxes Total
2,289.84	Life Insurance Total
103.20	Linen Total
23,124.70	Maintenance & Repair Total
9,081.25	Maintenance Supplies Total
4,100.00	Membership Fee Total
3,250.54	MHSC Foundation Total
1,618.25	Minor Equipment Total
849.00	Monthly Pest Control Total
23,399.84	Non Medical Supplies Total
11,834.42	Office Supplies Total
4,120.00	Other Employee Benefits Total
2,968.00	Other Purchased Services Total
849.36	Oxygen Rental Total

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
12/31/2022

28,124.33	Patient Refund Total
489.24	Payroll Deduction Total
19,397.53	Payroll Garnishment Total
3,400,000.00	Payroll Transfer Total
2,036,266.17	Pharmacy Management Total
65,645.00	Physician Recruitment Total
349,445.39	Physician Services Total
12,500.02	Physician Student Loan Total
5,498.00	Postage Total
40,930.09	Professional Service Total
554.80	Radiation Monitoring Total
363.65	Radiology Film Total
12,376.90	Radiology Material Total
11,194.76	Reimbursement - CME Total
9,508.01	Reimbursement - Education & Travel Total
50.92	Reimbursement - Insurance Premium Total
4,038.92	Reimbursement - Non Hospital Supplies Total
350.00	Reimbursement - Payroll Total
150.00	Reimbursement - Uniforms Total
288,342.20	Retirement Total
2.01	Sales Tax Payment Total
50.00	Scholarship Total
4,457.14	Scrub Sale Deductions Total
16,621.00	Software Total
1,646.00	Sponsorship Total
85,099.79	Surgery Supplies Total
4,475.11	Surveys Total
801.80	Unclaimed Property Total
329.13	Unemployment Total
488.00	Uniforms Total
112,613.36	Utilities Total
1,509.14	Waste Disposal Total
2,293.00	Window Cleaning Total
9,342,163.89	Grand Total

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
12/31/2022

Check Number	Date	Vendor Check Name	Amount	Description
190085	12/21/2022	UNITED STATES TREASURY	746.37	941 Taxes
189961	12/15/2022	BIG THICKET BROADCASTING	6,384.00	Advertising
190101	12/22/2022	BRIDGER VALLEY PIONEER	270.00	Advertising
190141	12/22/2022	GRHS YEARBOOK	80.00	Advertising
190160	12/22/2022	KEMMERER GAZETTE	230.00	Advertising
189918	12/15/2022	PILOT BUTTE BROADCASTING	600.00	Advertising
190193	12/22/2022	PUBLISHING CONCEPTS, INC.	1,050.00	Advertising
189924	12/15/2022	ROCKET MINER	1,805.00	Advertising
190200	12/22/2022	ROCKET MINER	20.78	Advertising
190223	12/22/2022	SWEETWATER NOW, LLC	3,538.00	Advertising
190224	12/22/2022	THE RADIO NETWORK	3,115.65	Advertising
190229	12/22/2022	TRUE NORTH CUSTOM PUBLISHING	10,500.00	Advertising
189936	12/8/2022	UPSLOPE MEDIA LLC	25,270.00	Advertising
EFT000000007851	12/8/2022	LAMAR ADVERTISING	1,236.00	Advertising
EFT000000007854	12/8/2022	ROCK SPRINGS SWEETWATER COUNTY AIRPORT	280.00	Advertising
EFT000000007877	12/22/2022	GREEN RIVER STAR	741.25	Advertising
189998	12/1/2022	RSNB BANK	45.00	Bank Fees
190228	12/22/2022	TRUE COMMENCE, INC.	114.60	Billing Services
190231	12/22/2022	UNITED AUDIT SYSTEMS, INC.	1,521.25	Billing Services
189940	12/8/2022	VITALANT	8,089.78	Blood
190237	12/22/2022	VITALANT	6,369.17	Blood
190117	12/22/2022	CURRENT PROPERTIES, LLC	3,500.00	Building Lease
189945	12/15/2022	UNIDINE CORPORATION	13,201.42	Café Management
190230	12/22/2022	UNIDINE CORPORATION	83,841.75	Café Management
189948	12/15/2022	VERIZON WIRELESS, LLC	3,706.38	Cellular Telephone
189962	12/1/2022	COLLECTION PROFESSIONALS, INC.	394.00	Collection Agency
189949	12/15/2022	WAKEFIELD & ASSOCIATES, INC.	115,257.22	Collection Agency
189959	12/1/2022	CDW GOVERNMENT LLC	77.67	Computer Equipment
189755	12/8/2022	CDW GOVERNMENT LLC	297.20	Computer Equipment
190105	12/22/2022	CDW GOVERNMENT LLC	1,785.14	Computer Equipment
190119	12/22/2022	DELL COMPUTER CORPORATION	109.99	Computer Equipment
190149	12/22/2022	HOMEWOOD SUITES	934.08	Consulting Fees
189920	12/8/2022	ST+B ENGINEERING	629.94	Consulting Fees
189938	12/1/2022	AGILITY SURGICAL EQUIPMENT REPAIR INC.	10,718.42	Contract Maintenance
189949	12/15/2022	AGILITY SURGICAL EQUIPMENT REPAIR INC.	85.00	Contract Maintenance
189950	12/1/2022	BIOMERIEUX, INC.	19,740.00	Contract Maintenance
190098	12/22/2022	BIOMERIEUX, INC.	8,190.08	Contract Maintenance
190099	12/22/2022	BISCOM	1,679.90	Contract Maintenance
189968	12/15/2022	CERNER CORPORATION	82,659.84	Contract Maintenance
190107	12/22/2022	CERNER CORPORATION	11,415.41	Contract Maintenance
189758	12/8/2022	CLOUDIL COMMUNICATIONS INC.	54.53	Contract Maintenance
189971	12/15/2022	CONVERGEONE, INC.	9,152.44	Contract Maintenance
189770	12/8/2022	FRONT RANGE MOBILE IMAGING, INC.	7,750.00	Contract Maintenance
189983	12/15/2022	GE HEALTHCARE	24,986.60	Contract Maintenance
190142	12/22/2022	GREENSHADES SOFTWARE	199.00	Contract Maintenance
190152	12/22/2022	INTOUCH HEALTH	7,248.00	Contract Maintenance
189781	12/8/2022	ISI WATER CHEMISTRIES	805.51	Contract Maintenance
190153	12/22/2022	ISI WATER CHEMISTRIES	2,430.75	Contract Maintenance

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
12/31/2022

190179	12/22/2022	NAMSS	585.00	Contract Maintenance
189799	12/8/2022	NUANCE COMMUNICATIONS, INC	313.33	Contract Maintenance
190181	12/22/2022	NUANCE COMMUNICATIONS, INC	313.33	Contract Maintenance
189912	12/15/2022	ONE CAUSE, INC.	2,495.00	Contract Maintenance
189695	12/1/2022	PHILIPS HEALTHCARE	1,433.00	Contract Maintenance
190188	12/22/2022	PHILIPS HEALTHCARE	1,433.00	Contract Maintenance
189919	12/15/2022	PLANETREE	3,465.12	Contract Maintenance
190194	12/22/2022	QUADRAMED	17,750.00	Contract Maintenance
189927	12/15/2022	SCORPION HEALTHCARE LLC	2,849.00	Contract Maintenance
190206	12/22/2022	SECHRIST TECHNOLOGY GROUP	1,024.00	Contract Maintenance
189704	12/1/2022	SIEMENS MEDICAL SOLUTIONS USA	685.18	Contract Maintenance
189615	12/8/2022	SIEMENS MEDICAL SOLUTIONS USA	3,028.35	Contract Maintenance
189930	12/15/2022	SIEMENS MEDICAL SOLUTIONS USA	9,543.33	Contract Maintenance
190209	12/22/2022	SIEMENS MEDICAL SOLUTIONS USA	12,490.37	Contract Maintenance
190238	12/22/2022	VOIPARA SOLUTIONS, INC.	7,110.00	Contract Maintenance
189723	12/1/2022	WESTERN STATES FIRE PROTECTION	125.00	Contract Maintenance
189941	12/8/2022	WYODATA SECURITY INC.	1,375.00	Contract Maintenance
190245	12/22/2022	WYODATA SECURITY INC.	1,375.00	Contract Maintenance
EFT00000007847	12/8/2022	ARRENDALE ASSOCIATES, INC	1,435.00	Contract Maintenance
EFT00000007868	12/15/2022	STATE FIRE DC SPECIALTIES	1,315.38	Contract Maintenance
EFT00000007882	12/22/2022	STATE FIRE DC SPECIALTIES	2,610.00	Contract Maintenance
W/T	12/20/2022	ORTHO TRIZETTO FEE	237.00	Contract Maintenance
W/T	12/21/2022	CARECLOUD	349.00	Contract Maintenance
W/T	12/5/2022	ZENITH	420.42	Contract Maintenance
W/T	12/1/2022	CLINIC PHREESIA FEE	660.40	Contract Maintenance
W/T	12/20/2022	CLINIC TRIZETTO FEE	5,864.66	Contract Maintenance
W/T	12/2/2022	ORTHO PHREESIA FEE	0.20	Contract Maintenance
189762	12/8/2022	ELWOOD STAFFING SERVICES, INC	8,452.92	Contract Personnel
189875	12/15/2022	ELWOOD STAFFING SERVICES, INC	2,025.64	Contract Personnel
190126	12/22/2022	ELWOOD STAFFING SERVICES, INC	1,757.41	Contract Personnel
190255	12/29/2022	ELWOOD STAFFING SERVICES, INC	3,169.40	Contract Personnel
189764	12/8/2022	FAVORITE HEALTHCARE STAFFING, INC.	14,085.85	Contract Personnel
189877	12/15/2022	FAVORITE HEALTHCARE STAFFING, INC.	3,231.80	Contract Personnel
190129	12/22/2022	FAVORITE HEALTHCARE STAFFING, INC.	3,213.60	Contract Personnel
189673	12/1/2022	FOCUSONE SOLUTIONS LLC	83,481.38	Contract Personnel
189768	12/8/2022	FOCUSONE SOLUTIONS LLC	70,468.38	Contract Personnel
189881	12/15/2022	FOCUSONE SOLUTIONS LLC	60,630.13	Contract Personnel
190133	12/22/2022	FOCUSONE SOLUTIONS LLC	168,305.02	Contract Personnel
189701	12/1/2022	SARAH ROTH	180.00	Contract Personnel
190205	12/22/2022	SARAH ROTH	540.00	Contract Personnel
189619	12/8/2022	SOLANT HEALTH	44,918.38	Contract Personnel
189931	12/15/2022	SOLANT HEALTH	4,037.50	Contract Personnel
190213	12/22/2022	SOLANT HEALTH	4,112.50	Contract Personnel
189915	12/15/2022	PACKAGERUNNER LOGISTICS LLC	388.02	Courier Services
190184	12/22/2022	PACKAGERUNNER LOGISTICS LLC	384.62	Courier Services
W/T	12/28/2022	UMB BANK	5,784.47	Credit Card Payment
189673	12/15/2022	DELTA DENTAL	26,452.54	Dental Insurance
189674	12/1/2022	FRESENIUS USA MARKETING, INC.	3,945.52	Dialysis Supplies
189682	12/15/2022	FRESENIUS USA MARKETING, INC.	6,428.73	Dialysis Supplies

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
12/31/2022

190134	12/22/2022	FRESENIUS USA MARKETING, INC.	115.56	Dialysis Supplies
189776	12/8/2022	HENRY SCHEIN INC	140.50	Dialysis Supplies
189886	12/15/2022	HENRY SCHEIN INC	252.75	Dialysis Supplies
EFT000000007864	12/15/2022	HENRY SCHEIN INC	112.14	Dialysis Supplies
190143	12/22/2022	HEALTHCARESOURCE HR, INC.	6,697.08	Education Material
189828	12/8/2022	TECHNICAL SAFETY SERVICES, LLC	14,900.00	Education Material
189738	12/8/2022	ABBY POMRENKE	2,500.00	Employee Recruitment
189852	12/15/2022	ALTITUDE ANALYSIS	120.00	Employee Recruitment
190093	12/22/2022	ARTHUR L. DAVIS PUBLISHING AGENCY	515.00	Employee Recruitment
189988	12/15/2022	HOLIDAY INN - ROCK SPRINGS	1,657.00	Employee Recruitment
189780	12/8/2022	INSIGHT SCREENING LLC	585.50	Employee Recruitment
190185	12/22/2022	PATRICIA STRONG	5,000.00	Employee Recruitment
EFT000000007856	12/8/2022	SST TESTING +, INC.	575.00	Employee Recruitment
189839	12/8/2022	VISION SERVICE PLAN - WY	6,866.16	Employee Vision Plan
189754	12/8/2022	CAREFUSION SOLUTIONS, LLC	26,189.00	Equipment Lease
189664	12/1/2022	COPIER & SUPPLY COMPANY	3,350.00	Equipment Lease
189759	12/8/2022	COPIER & SUPPLY COMPANY	60.00	Equipment Lease
190115	12/22/2022	COPIER & SUPPLY COMPANY	9,261.31	Equipment Lease
189676	12/1/2022	GE HEALTHCARE FINANCIAL SERVICES	47,164.93	Equipment Lease
189884	12/15/2022	GE HEALTHCARE FINANCIAL SERVICES	10,692.03	Equipment Lease
190136	12/22/2022	GE HEALTHCARE FINANCIAL SERVICES	47,164.93	Equipment Lease
189702	12/1/2022	SHADOW MOUNTAIN WATER CO ,WY	879.04	Equipment Lease
189813	12/8/2022	SHADOW MOUNTAIN WATER CO ,WY	302.36	Equipment Lease
189928	12/15/2022	SHADOW MOUNTAIN WATER CO ,WY	135.38	Equipment Lease
190207	12/22/2022	SHADOW MOUNTAIN WATER CO ,WY	957.39	Equipment Lease
189816	12/8/2022	SIEMENS FINANCIAL SERVICES, INC	18,429.63	Equipment Lease
189831	12/8/2022	TIMEPAYMENT CORP	5,493.86	Equipment Lease
190225	12/22/2022	TIMEPAYMENT CORP	123.49	Equipment Lease
189720	12/1/2022	US BANK EQUIPMENT FINANCE	1,169.93	Equipment Lease
189837	12/8/2022	US BANK EQUIPMENT FINANCE	293.69	Equipment Lease
189946	12/15/2022	US BANK EQUIPMENT FINANCE	1,398.12	Equipment Lease
190234	12/22/2022	US BANK EQUIPMENT FINANCE	214.38	Equipment Lease
189727	12/2/2022	FED EX	205.72	Freight
189766	12/8/2022	FED EX	47.93	Freight
190131	12/22/2022	FED EX	214.04	Freight
189719	12/1/2022	TRIOSE, INC	1,339.12	Freight
189834	12/8/2022	TRIOSE, INC	1,689.43	Freight
189943	12/15/2022	TRIOSE, INC	989.05	Freight
190227	12/22/2022	TRIOSE, INC	3,115.68	Freight
189921	12/15/2022	RED HORSE OIL COMPANIES INC	538.55	Fuel
189939	12/15/2022	SWEETWATER COUNTY SOLID WASTE	33.00	Garbage Collection
EFT000000007870	12/15/2022	WWS - ROCK SPRINGS	5,822.58	Garbage Collection
W/T	12/21/2022	FURTHER FLEX ADMIN FEE	217.75	Group Health
W/T	12/29/2022	FURTHER FLEX 12/28/22	747.60	Group Health
W/T	12/22/2022	FURTHER FLEX 12/21/22	1,419.00	Group Health
W/T	12/2/2022	FURTHER FLEX 11/30/22	1,462.34	Group Health
W/T	12/15/2022	FURTHER FLEX 12/14/22	2,115.86	Group Health
W/T	12/30/2022	FURTHER FLEX 12/1/22	4,028.77	Group Health
W/T	12/9/2022	BLUE CROSS BLUE SHIELD 12/2/22	115,310.20	Group Health

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
12/31/2022

W/T	12/23/2022	BLUE CROSS BLUE SHIELD 12/16/22	120,318.46	Group Health
W/T	12/30/2022	BLUE CROSS BLUE SHIELD 12/23/22	138,740.22	Group Health
W/T	12/16/2022	BLUE CROSS BLUE SHIELD 12/9/22	162,660.68	Group Health
W/T	12/2/2022	BLUE CROSS BLUE SHIELD 11/28/22	178,607.03	Group Health
189700	12/1/2022	ABBOTT NUTRITION	149.60	Hospital Supplies
189811	12/8/2022	ABBOTT NUTRITION	79.90	Hospital Supplies
189926	12/15/2022	ABBOTT NUTRITION	38.13	Hospital Supplies
189637	12/1/2022	AESCLAP INC	461.40	Hospital Supplies
189739	12/8/2022	AESCLAP INC	1,325.85	Hospital Supplies
189848	12/15/2022	AESCLAP INC	1,682.20	Hospital Supplies
190087	12/22/2022	AESCLAP INC	46.32	Hospital Supplies
189740	12/8/2022	AIRCLEAR SYSTEMS	185.00	Hospital Supplies
189742	12/8/2022	ALLEN MEDICAL SYSTEMS INC	397.10	Hospital Supplies
189640	12/1/2022	ALTA MEDICAL SPECIALTIES	205.52	Hospital Supplies
189641	12/1/2022	APPLIED MEDICAL	1,110.00	Hospital Supplies
189744	12/8/2022	APPLIED MEDICAL	528.00	Hospital Supplies
189855	12/15/2022	APPLIED MEDICAL	2,374.00	Hospital Supplies
189642	12/1/2022	ARGON MEDICAL	514.00	Hospital Supplies
189643	12/1/2022	ARMSTRONG MEDICAL INDUSTRIES	240.00	Hospital Supplies
189644	12/1/2022	ARTHREX INC	1,495.00	Hospital Supplies
189745	12/8/2022	ARTHREX INC	125.00	Hospital Supplies
189856	12/15/2022	ARTHREX INC	5,089.00	Hospital Supplies
189647	12/1/2022	B BRAUN MEDICAL INC.	793.80	Hospital Supplies
189859	12/15/2022	B BRAUN MEDICAL INC.	1,307.38	Hospital Supplies
190096	12/22/2022	B BRAUN MEDICAL INC.	1,413.70	Hospital Supplies
189858	12/15/2022	BARD PERIPHERAL VASCULAR INC	1,912.05	Hospital Supplies
189746	12/8/2022	BAYER HEALTHCARE LLC	2,261.07	Hospital Supplies
190095	12/22/2022	BAYER HEALTHCARE LLC	2,261.07	Hospital Supplies
189862	12/15/2022	BIOMET SPORTS MEDICINE	1,020.00	Hospital Supplies
189652	12/1/2022	BLUE ENDO	285.25	Hospital Supplies
189654	12/1/2022	BOSTON SCIENTIFIC CORP	12,544.62	Hospital Supplies
189749	12/8/2022	BOSTON SCIENTIFIC CORP	1,417.48	Hospital Supplies
189863	12/15/2022	BOSTON SCIENTIFIC CORP	2,930.99	Hospital Supplies
189865	12/1/2022	C R BARD INC	381.98	Hospital Supplies
189657	12/1/2022	CARDINAL HEALTH/V. MUELLER	51,067.24	Hospital Supplies
189753	12/8/2022	CARDINAL HEALTH/V. MUELLER	31,706.27	Hospital Supplies
189866	12/15/2022	CARDINAL HEALTH/V. MUELLER	71,415.83	Hospital Supplies
190103	12/22/2022	CARDINAL HEALTH/V. MUELLER	22,978.13	Hospital Supplies
189670	12/15/2022	CONE INSTRUMENTS	115.07	Hospital Supplies
189663	12/1/2022	COOK MEDICAL INCORPORATED	950.66	Hospital Supplies
190114	12/22/2022	COOK MEDICAL INCORPORATED	476.66	Hospital Supplies
189666	12/1/2022	CURBELL MEDICAL	742.60	Hospital Supplies
189874	12/15/2022	DIAGNOSTICA STAGO INC	372.34	Hospital Supplies
189761	12/8/2022	DIRECT SUPPLY	1,069.90	Hospital Supplies
189667	12/1/2022	DJ ORTHOPEDICS, LLC	95.77	Hospital Supplies
190124	12/22/2022	DOCTOR EASY MEDICAL PRODUCTS	83.00	Hospital Supplies
189668	12/1/2022	EXPAND-A-BAND, LLC	86.00	Hospital Supplies
189772	12/8/2022	GENERAL HOSPITAL SUPPLY CORPORATION	235.00	Hospital Supplies
189677	12/1/2022	HEALTHCARE LOGISTICS INC	272.64	Hospital Supplies

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189885	12/15/2022	HEALTHCARE LOGISTICS INC	252.12	Hospital Supplies
189887	12/15/2022	HILL-ROM	1,306.56	Hospital Supplies
190148	12/22/2022	HOLOGIC, INC.	1,427.00	Hospital Supplies
190150	12/22/2022	HULL ANESTHESIA INC	180.00	Hospital Supplies
189681	12/1/2022	J & J HEALTH CARE SYSTEMS INC	3,239.34	Hospital Supplies
189782	12/8/2022	J & J HEALTH CARE SYSTEMS INC	10,000.39	Hospital Supplies
190154	12/22/2022	J & J HEALTH CARE SYSTEMS INC	9,317.81	Hospital Supplies
189784	12/8/2022	KARL STORZ ENDOSCOPY-AMERICA	7,154.03	Hospital Supplies
189894	12/15/2022	KARL STORZ ENDOSCOPY-AMERICA	165.92	Hospital Supplies
190159	12/22/2022	KARL STORZ ENDOSCOPY-AMERICA	192.30	Hospital Supplies
189785	12/8/2022	KCI USA	763.08	Hospital Supplies
189895	12/15/2022	KCI USA	2,130.53	Hospital Supplies
189710	12/1/2022	LEICA BIOSYSTEMS RICHMOND	261.65	Hospital Supplies
189937	12/15/2022	LEICA BIOSYSTEMS RICHMOND	771.33	Hospital Supplies
190221	12/22/2022	LEICA BIOSYSTEMS RICHMOND	441.32	Hospital Supplies
189688	12/1/2022	M V A P MEDICAL SUPPLIES, INC.	42.60	Hospital Supplies
189909	12/15/2022	M V A P MEDICAL SUPPLIES, INC.	220.00	Hospital Supplies
190178	12/22/2022	M V A P MEDICAL SUPPLIES, INC.	416.00	Hospital Supplies
189899	12/15/2022	MARKET LAB, INC	6,081.69	Hospital Supplies
190167	12/22/2022	MARKET LAB, INC	144.95	Hospital Supplies
189684	12/1/2022	MASIMO AMERICAS, INC.	220.00	Hospital Supplies
189792	12/8/2022	MASIMO AMERICAS, INC.	870.00	Hospital Supplies
189900	12/15/2022	MASIMO AMERICAS, INC.	1,970.00	Hospital Supplies
190168	12/22/2022	MASIMO AMERICAS, INC.	220.00	Hospital Supplies
189685	12/1/2022	MCKESSON MEDICAL-SURGICAL	1,254.99	Hospital Supplies
189793	12/8/2022	MCKESSON MEDICAL-SURGICAL	1,738.97	Hospital Supplies
189901	12/15/2022	MCKESSON MEDICAL-SURGICAL	612.51	Hospital Supplies
190170	12/22/2022	MCKESSON MEDICAL-SURGICAL	536.22	Hospital Supplies
189794	12/8/2022	MEDELA LLC	569.60	Hospital Supplies
189902	12/15/2022	MEDI-DOSE INCORPORATED	114.69	Hospital Supplies
189904	12/15/2022	MEDTRONIC, USA	146.00	Hospital Supplies
190173	12/22/2022	MEDTRONIC, USA	419.00	Hospital Supplies
190175	12/22/2022	MES	54.75	Hospital Supplies
189689	12/1/2022	NATUS MEDICAL INC	4,118.64	Hospital Supplies
190180	12/22/2022	NATUS MEDICAL INC	384.11	Hospital Supplies
189691	12/1/2022	OLYMPUS AMERICA INC	1,148.98	Hospital Supplies
189900	12/8/2022	OLYMPUS AMERICA INC	343.91	Hospital Supplies
189693	12/1/2022	OWENS & MINOR 90005430	9,587.51	Hospital Supplies
189903	12/8/2022	OWENS & MINOR 90005430	7,215.89	Hospital Supplies
189914	12/15/2022	OWENS & MINOR 90005430	11,792.33	Hospital Supplies
190183	12/22/2022	OWENS & MINOR 90005430	8,253.72	Hospital Supplies
190186	12/22/2022	PERFORMANCE HEALTH SUPPLY INC	585.22	Hospital Supplies
189906	12/8/2022	RADIOMETER AMERICA INC	9,696.00	Hospital Supplies
190197	12/22/2022	RADIOMETER AMERICA INC	1,943.16	Hospital Supplies
189696	12/1/2022	RESMED CORP	475.00	Hospital Supplies
189697	12/1/2022	RESPIRONICS	201.00	Hospital Supplies
190212	12/22/2022	SMITHS MEDICAL ASD INC	395.56	Hospital Supplies
189709	12/1/2022	STERIS CORPORATION	4,493.84	Hospital Supplies
189825	12/8/2022	STERIS CORPORATION	1,063.16	Hospital Supplies

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190216	12/22/2022	STERIS CORPORATION	321.79	Hospital Supplies
189714	12/1/2022	TELEFLEX LLC	487.00	Hospital Supplies
189829	12/8/2022	TELEFLEX LLC	18,792.00	Hospital Supplies
189713	12/1/2022	TELEFLEX MEDICAL INC.	584.00	Hospital Supplies
189717	12/1/2022	TRI-ANIM HEALTH SERVICES INC	686.41	Hospital Supplies
189833	12/8/2022	TRI-ANIM HEALTH SERVICES INC	353.71	Hospital Supplies
189842	12/15/2022	TRI-ANIM HEALTH SERVICES INC	1,096.18	Hospital Supplies
190226	12/22/2022	TRI-ANIM HEALTH SERVICES INC	268.58	Hospital Supplies
189722	12/1/2022	VYAIRE MEDICAL	144.00	Hospital Supplies
190239	12/22/2022	WAXIE SANITARY SUPPLY	251.87	Hospital Supplies
EFT00000007841	12/1/2022	BREG INC	345.40	Hospital Supplies
EFT00000007842	12/1/2022	HARDY DIAGNOSTICS	579.98	Hospital Supplies
EFT00000007845	12/1/2022	ZOLL MEDICAL CORPORATION	8,076.40	Hospital Supplies
EFT00000007848	12/8/2022	BREG INC	310.65	Hospital Supplies
EFT00000007850	12/8/2022	HARDY DIAGNOSTICS	49.15	Hospital Supplies
EFT00000007852	12/8/2022	MARSHALL INDUSTRIES	305.60	Hospital Supplies
EFT00000007857	12/8/2022	ZOLL MEDICAL CORPORATION	30.72	Hospital Supplies
EFT00000007861	12/15/2022	BREG INC	89.20	Hospital Supplies
EFT00000007863	12/15/2022	HARDY DIAGNOSTICS	708.69	Hospital Supplies
EFT00000007866	12/15/2022	OVATION MEDICAL	804.81	Hospital Supplies
EFT00000007871	12/15/2022	ZOLL MEDICAL CORPORATION	1,113.84	Hospital Supplies
EFT00000007875	12/22/2022	BREG INC	500.17	Hospital Supplies
EFT00000007876	12/22/2022	BSN MEDICAL INC	72.59	Hospital Supplies
EFT00000007879	12/22/2022	HARDY DIAGNOSTICS	1,015.24	Hospital Supplies
EFT00000007880	12/22/2022	OVATION MEDICAL	540.93	Hospital Supplies
EFT00000007883	12/22/2022	STRYKER INSTRUMENTS	215.76	Hospital Supplies
189801	12/8/2022	OSSIO, INC.	6,558.00	Implant Supplies
189716	12/1/2022	TREACE MEDICAL CONCEPTS, INC.	6,695.00	Implant Supplies
189718	12/1/2022	TRILLIANT SURGICAL, LLC	4,767.00	Implant Supplies
189835	12/8/2022	PROVIDENT LIFE & ACCIDENT	24,822.85	Insurance Premiums
190233	12/22/2022	PROVIDENT LIFE & ACCIDENT	4,317.58	Insurance Premiums
189963	12/15/2022	INSURANCE REFUND	56.93	Insurance Refund
189961	12/15/2022	INSURANCE REFUND	7,902.10	Insurance Refund
189952	12/15/2022	INSURANCE REFUND	195.57	Insurance Refund
190015	12/15/2022	INSURANCE REFUND	274.39	Insurance Refund
189985	12/15/2022	INSURANCE REFUND	246.00	Insurance Refund
189954	12/15/2022	INSURANCE REFUND	32.63	Insurance Refund
190064	12/15/2022	INSURANCE REFUND	50.06	Insurance Refund
189967	12/15/2022	INSURANCE REFUND	223.57	Insurance Refund
189965	12/15/2022	INSURANCE REFUND	510.90	Insurance Refund
189962	12/15/2022	INSURANCE REFUND	721.80	Insurance Refund
189956	12/15/2022	INSURANCE REFUND	68.87	Insurance Refund
190089	12/22/2022	ALLERMETRIX INC	1,952.00	Laboratory Services
190091	12/22/2022	AMERICAN ASSOCIATION OF BIOANALYSTS	1,698.00	Laboratory Services
190169	12/22/2022	MAYO COLLABORATIVE SERVICES, INC.	191.44	Laboratory Services
190176	12/22/2022	METABOLIC NEWBORN SCREENING	7,076.72	Laboratory Services
190220	12/22/2022	SUMMIT PATHOLOGY	418.53	Laboratory Services
EFT00000007872	12/22/2022	ARUP LABORATORIES, INC.	62,172.87	Laboratory Services
189853	12/15/2022	ANAERONE SYSTEMS	13.55	Laboratory Supplies

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190092	12/22/2022	ANAEROBE SYSTEMS	25.90	Laboratory Supplies
189065	12/15/2022	CANCER DIAGNOSTICS, INC	101.75	Laboratory Supplies
189656	12/1/2022	CARDINAL HEALTH	61,316.79	Laboratory Supplies
189752	12/8/2022	CARDINAL HEALTH	585.10	Laboratory Supplies
189957	12/15/2022	CARDINAL HEALTH	16,928.07	Laboratory Supplies
190102	12/22/2022	CARDINAL HEALTH	994.22	Laboratory Supplies
189660	12/1/2022	CEPHEID	3,077.20	Laboratory Supplies
189756	12/6/2022	CEPHEID	3,420.00	Laboratory Supplies
189667	12/15/2022	CEPHEID	27,545.00	Laboratory Supplies
190106	12/22/2022	CEPHEID	7,065.00	Laboratory Supplies
189672	12/1/2022	FISHER HEALTHCARE	9,746.58	Laboratory Supplies
189767	12/8/2022	FISHER HEALTHCARE	554.15	Laboratory Supplies
189880	12/15/2022	FISHER HEALTHCARE	32,894.26	Laboratory Supplies
190132	12/22/2022	FISHER HEALTHCARE	3,287.60	Laboratory Supplies
189955	12/15/2022	KURIN INC.	6,000.00	Laboratory Supplies
189905	12/15/2022	MERCEDES MEDICAL	735.79	Laboratory Supplies
189944	12/15/2022	TYPENEX MEDICAL, LLC	34.35	Laboratory Supplies
EFT000000007840	12/1/2022	BIO-RAD LABORATORIES	4,792.86	Laboratory Supplies
EFT000000007843	12/1/2022	PACE ANALYTICAL SERVICES, LLC	232.40	Laboratory Supplies
EFT000000007844	12/1/2022	SYSMEX AMERICA INC.	1,185.33	Laboratory Supplies
EFT000000007849	12/8/2022	GREER LABORATORIES, INC	696.20	Laboratory Supplies
EFT000000007860	12/15/2022	BIO-RAD LABORATORIES	5,414.39	Laboratory Supplies
EFT000000007869	12/15/2022	SYSMEX AMERICA INC.	2,027.35	Laboratory Supplies
EFT000000007874	12/22/2022	BIO-RAD LABORATORIES	2,783.06	Laboratory Supplies
EFT000000007878	12/22/2022	GREER LABORATORIES, INC	262.25	Laboratory Supplies
EFT000000007865	12/15/2022	MARTIN-RAY LAUNDRY SYSTEMS	3,298.29	Laundry Supplies
189872	12/15/2022	CROWLEY FLECK ATTORNEYS	390.00	Legal Fees
190116	12/22/2022	CROWLEY FLECK ATTORNEYS	1,635.00	Legal Fees
190189	12/22/2022	PHILLIPS LAW, LLC	6,194.00	Legal Fees
190110	12/22/2022	CLIA LABORATORY PROGRAM	180.00	License & Taxes
190108	12/22/2022	CITY OF ROCK SPRINGS	300.00	License & Taxes
190247	12/22/2022	WY DEPARTMENT OF AUDIT	25.00	Licenses & Taxes
190244	12/22/2022	WY DEPT OF ENVIRONMENT.QUALITY	200.00	Licenses & Taxes
189798	12/8/2022	NEW YORK LIFE INSURANCE COMPANY	2,289.84	Life Insurance
189932	12/15/2022	STANDARD TEXTILE	103.20	Linen
189649	12/1/2022	BIO-MED ENGINEERING INC	1,550.00	Maintenance & Repair
189750	12/8/2022	CACHE VALLEY ELECTRIC CO.	3,045.23	Maintenance & Repair
190113	12/22/2022	COMPRESSION LEASING SERVICES, INC	1,079.57	Maintenance & Repair
190146	12/22/2022	HIGH SECURITY LOCK & ALARM	50.00	Maintenance & Repair
189802	12/8/2022	OVERHEAD DOOR CO.	1,705.75	Maintenance & Repair
189694	12/1/2022	PARTSSOURCE	1,847.58	Maintenance & Repair
189916	12/15/2022	PARTSSOURCE	349.23	Maintenance & Repair
189806	12/8/2022	PLAN ONE/ARCHITECTS	490.00	Maintenance & Repair
189706	12/1/2022	STEALTH TECHNOLOGIES	755.60	Maintenance & Repair
189824	12/8/2022	STEALTH TECHNOLOGIES	3,128.91	Maintenance & Repair
190215	12/22/2022	STEALTH TECHNOLOGIES	469.00	Maintenance & Repair
189721	12/1/2022	VAUGHNS PLUMBING & HEATING	1,150.00	Maintenance & Repair
EFT000000007855	12/8/2022	SERVCO	2,119.67	Maintenance & Repair
EFT000000007861	12/22/2022	SERVCO	5,393.16	Maintenance & Repair

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190250	12/22/2022	ACE HARDWARE	38.18	Maintenance Supplies
190090	12/22/2022	ALPINE PURE SOFT WATER	970.20	Maintenance Supplies
189651	12/1/2022	BLOEDORN LUMBER	245.64	Maintenance Supplies
189661	12/1/2022	CODALE ELECTRIC SUPPLY, INC	792.93	Maintenance Supplies
189669	12/15/2022	CODALE ELECTRIC SUPPLY, INC	214.84	Maintenance Supplies
190111	12/22/2022	CODALE ELECTRIC SUPPLY, INC	331.38	Maintenance Supplies
189669	12/1/2022	FASTENAL COMPANY	47.08	Maintenance Supplies
189773	12/8/2022	GRAINGER	39.50	Maintenance Supplies
189679	12/1/2022	HOME DEPOT	1,283.68	Maintenance Supplies
189778	12/8/2022	HOME DEPOT	633.59	Maintenance Supplies
189809	12/15/2022	HOME DEPOT	783.37	Maintenance Supplies
190251	12/23/2022	HOME DEPOT	643.00	Maintenance Supplies
189699	12/1/2022	ROCK SPRINGS WINNELSON CO	1,437.93	Maintenance Supplies
189925	12/15/2022	ROCK SPRINGS WINNELSON CO	53.85	Maintenance Supplies
190201	12/22/2022	ROCK SPRINGS WINNELSON CO	468.34	Maintenance Supplies
EFT00000007858	12/15/2022	ACE HARDWARE	183.74	Maintenance Supplies
EFT00000007867	12/15/2022	ROBERT I MERRILL COMPANY	894.00	Maintenance Supplies
EFT00000007873	12/22/2022	BENNETT'S	20.00	Maintenance Supplies
190241	12/22/2022	COMPUTERSHARE TRUST COMPANY	3,000.00	Membership Fee
190140	12/22/2022	GREEN RIVER CHAMBER OF COMMERCE	865.00	Membership Fee
189814	12/8/2022	SHSMD ANNUAL CONFERENCE	235.00	Membership Fee
189733	12/8/2022	MHSC-FOUNDATION	1,218.92	MHSC Foundation
189906	12/15/2022	MHSC-FOUNDATION	804.80	MHSC Foundation
190075	12/20/2022	MHSC-FOUNDATION	1,226.82	MHSC Foundation
189678	12/1/2022	HEALTHMARK INDUSTRIES CO., INC.	296.03	Minor Equipment
190145	12/22/2022	HEALTHMARK INDUSTRIES CO., INC.	1,322.22	Minor Equipment
189715	12/1/2022	TERMINIX OF WYOMING	478.00	Monthly Pest Control
189830	12/8/2022	TERMINIX OF WYOMING	71.00	Monthly Pest Control
189940	12/15/2022	TERMINIX OF WYOMING	300.00	Monthly Pest Control
189670	12/1/2022	F B MCFADDEN WHOLESALE	1,814.45	Non Medical Supplies
189765	12/8/2022	F B MCFADDEN WHOLESALE	2,942.95	Non Medical Supplies
189878	12/15/2022	F B MCFADDEN WHOLESALE	86.60	Non Medical Supplies
190130	12/22/2022	F B MCFADDEN WHOLESALE	1,400.35	Non Medical Supplies
189686	12/1/2022	MEDLINE INDUSTRIES INC	3,779.39	Non Medical Supplies
189795	12/8/2022	MEDLINE INDUSTRIES INC	2,709.99	Non Medical Supplies
189903	12/15/2022	MEDLINE INDUSTRIES INC	2,613.43	Non Medical Supplies
190172	12/22/2022	MEDLINE INDUSTRIES INC	1,245.59	Non Medical Supplies
189692	12/1/2022	OPTUM360 LLC	104.96	Non Medical Supplies
189913	12/15/2022	OPTUM360 LLC	329.95	Non Medical Supplies
190182	12/22/2022	OPTUM360 LLC	161.17	Non Medical Supplies
189703	12/1/2022	SHARN ANESTHESIA INC	112.40	Non Medical Supplies
189712	12/1/2022	SWEETWATER TROPHIES	9.30	Non Medical Supplies
EFT00000007853	12/8/2022	POSITIVE PROMOTIONS	6,089.31	Non Medical Supplies
190127	12/22/2022	ENCOMPASS GROUP, LLC	1,976.16	Office Supplies
189779	12/8/2022	IDENTISYS INC	1,142.00	Office Supplies
190162	12/22/2022	LABELMATCH	128.24	Office Supplies
189821	12/8/2022	STANDARD REGISTER COMPANY	595.67	Office Supplies
189933	12/15/2022	STANDARD REGISTER COMPANY	272.00	Office Supplies
189707	12/1/2022	STAPLES BUSINESS ADVANTAGE	2,111.20	Office Supplies

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189822	12/8/2022	STAPLES BUSINESS ADVANTAGE	541.08	Office Supplies
189934	12/15/2022	STAPLES BUSINESS ADVANTAGE	4,972.17	Office Supplies
190214	12/22/2022	STAPLES BUSINESS ADVANTAGE	95.90	Office Supplies
189812	12/8/2022	R.S. CHAMBER OF COMMERCE	180.00	Other Employee Benefits
189844	12/8/2022	YOUNG AT HEART SENIOR CITIZENS CENTER	1,970.00	Other Employee Benefits
190248	12/22/2022	YOUNG AT HEART SENIOR CITIZENS CENTER	1,970.00	Other Employee Benefits
189769	12/8/2022	FOTOS BY JENNI	158.00	Other Purchased Services
189683	12/1/2022	QUICK RESPONSE TAXI	91.00	Other Purchased Services
189790	12/8/2022	QUICK RESPONSE TAXI	118.00	Other Purchased Services
189897	12/15/2022	QUICK RESPONSE TAXI	51.00	Other Purchased Services
190165	12/22/2022	QUICK RESPONSE TAXI	50.00	Other Purchased Services
189810	12/8/2022	HOCK SPRINGS KWANIS	2,500.00	Other Purchased Services
189832	12/8/2022	TOD BENNETT	200.00	Other Purchased Services
EFT000000007839	12/1/2022	AIRGAS INTERMOUNTAIN INC	236.53	Oxygen Rental
EFT000000007846	12/8/2022	AIRGAS INTERMOUNTAIN INC	120.03	Oxygen Rental
EFT000000007859	12/15/2022	AIRGAS INTERMOUNTAIN INC	292.80	Oxygen Rental
190016	12/15/2022	PATIENT REFUND	39.67	Patient Refund
190014	12/15/2022	PATIENT REFUND	595.68	Patient Refund
190013	12/15/2022	PATIENT REFUND	32.78	Patient Refund
190012	12/15/2022	PATIENT REFUND	270.00	Patient Refund
189985	12/15/2022	PATIENT REFUND	69.62	Patient Refund
190011	12/15/2022	PATIENT REFUND	50.00	Patient Refund
189984	12/15/2022	PATIENT REFUND	91.91	Patient Refund
189953	12/15/2022	PATIENT REFUND	539.20	Patient Refund
190010	12/15/2022	PATIENT REFUND	132.00	Patient Refund
190009	12/15/2022	PATIENT REFUND	16.00	Patient Refund
190007	12/15/2022	PATIENT REFUND	127.48	Patient Refund
189966	12/15/2022	PATIENT REFUND	308.04	Patient Refund
190020	12/15/2022	PATIENT REFUND	277.60	Patient Refund
189846	12/8/2022	PATIENT REFUND	55.00	Patient Refund
189955	12/15/2022	PATIENT REFUND	153.19	Patient Refund
189726	12/1/2022	PATIENT REFUND	465.90	Patient Refund
189958	12/15/2022	PATIENT REFUND	97.67	Patient Refund
190006	12/15/2022	PATIENT REFUND	33.56	Patient Refund
190005	12/15/2022	PATIENT REFUND	763.20	Patient Refund
190070	12/15/2022	PATIENT REFUND	337.80	Patient Refund
190018	12/15/2022	PATIENT REFUND	704.80	Patient Refund
190019	12/15/2022	PATIENT REFUND	798.95	Patient Refund
190004	12/15/2022	PATIENT REFUND	184.30	Patient Refund
190003	12/15/2022	PATIENT REFUND	835.05	Patient Refund
189975	12/15/2022	PATIENT REFUND	116.10	Patient Refund
190002	12/15/2022	PATIENT REFUND	74.18	Patient Refund
190021	12/15/2022	PATIENT REFUND	88.80	Patient Refund
190022	12/15/2022	PATIENT REFUND	627.07	Patient Refund
190065	12/15/2022	PATIENT REFUND	535.12	Patient Refund
190023	12/15/2022	PATIENT REFUND	141.00	Patient Refund
190024	12/15/2022	PATIENT REFUND	35.00	Patient Refund
190025	12/15/2022	PATIENT REFUND	349.85	Patient Refund
189991	12/15/2022	PATIENT REFUND	800.00	Patient Refund

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
12/31/2022

190026	12/15/2022	PATIENT REFUND	16.15	Patient Refund
190027	12/15/2022	PATIENT REFUND	201.94	Patient Refund
190071	12/15/2022	PATIENT REFUND	19.18	Patient Refund
189983	12/15/2022	PATIENT REFUND	108.80	Patient Refund
190028	12/15/2022	PATIENT REFUND	26.42	Patient Refund
190029	12/15/2022	PATIENT REFUND	172.00	Patient Refund
189982	12/15/2022	PATIENT REFUND	153.76	Patient Refund
189775	12/8/2022	PATIENT REFUND	64.45	Patient Refund
190068	12/15/2022	PATIENT REFUND	1,807.14	Patient Refund
190090	12/15/2022	PATIENT REFUND	399.45	Patient Refund
190031	12/15/2022	PATIENT REFUND	280.00	Patient Refund
189947	12/8/2022	PATIENT REFUND	113.25	Patient Refund
190032	12/15/2022	PATIENT REFUND	169.06	Patient Refund
190033	12/15/2022	PATIENT REFUND	1,040.34	Patient Refund
190034	12/15/2022	PATIENT REFUND	50.00	Patient Refund
190035	12/15/2022	PATIENT REFUND	8.81	Patient Refund
190063	12/15/2022	PATIENT REFUND	47.50	Patient Refund
189974	12/15/2022	PATIENT REFUND	64.00	Patient Refund
190036	12/15/2022	PATIENT REFUND	605.15	Patient Refund
190037	12/15/2022	PATIENT REFUND	13.11	Patient Refund
190038	12/15/2022	PATIENT REFUND	65.00	Patient Refund
190039	12/15/2022	PATIENT REFUND	133.78	Patient Refund
190040	12/15/2022	PATIENT REFUND	50.00	Patient Refund
190041	12/15/2022	PATIENT REFUND	45.00	Patient Refund
189981	12/15/2022	PATIENT REFUND	38.32	Patient Refund
190042	12/15/2022	PATIENT REFUND	60.00	Patient Refund
190055	12/15/2022	PATIENT REFUND	68.90	Patient Refund
190067	12/15/2022	PATIENT REFUND	23.40	Patient Refund
190043	12/15/2022	PATIENT REFUND	111.54	Patient Refund
190017	12/15/2022	PATIENT REFUND	162.85	Patient Refund
190044	12/15/2022	PATIENT REFUND	39.74	Patient Refund
190045	12/15/2022	PATIENT REFUND	57.42	Patient Refund
190062	12/15/2022	PATIENT REFUND	35.00	Patient Refund
190046	12/15/2022	PATIENT REFUND	36.81	Patient Refund
189907	12/15/2022	MHSC - GENERAL FUND	2,473.20	Patient Refund
190047	12/15/2022	PATIENT REFUND	26.60	Patient Refund
190048	12/15/2022	PATIENT REFUND	66.32	Patient Refund
190049	12/15/2022	PATIENT REFUND	267.55	Patient Refund
190050	12/15/2022	PATIENT REFUND	100.00	Patient Refund
190051	12/15/2022	PATIENT REFUND	1,508.68	Patient Refund
190052	12/15/2022	PATIENT REFUND	641.73	Patient Refund
189959	12/15/2022	PATIENT REFUND	438.52	Patient Refund
190053	12/15/2022	PATIENT REFUND	96.92	Patient Refund
190061	12/15/2022	PATIENT REFUND	64.40	Patient Refund
189980	12/15/2022	PATIENT REFUND	40.00	Patient Refund
189979	12/15/2022	PATIENT REFUND	30.98	Patient Refund
189972	12/15/2022	PATIENT REFUND	48.85	Patient Refund
189973	12/15/2022	PATIENT REFUND	569.63	Patient Refund
190054	12/15/2022	PATIENT REFUND	68.99	Patient Refund

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
12/31/2022

190056	12/15/2022	PATIENT REFUND	462.95	Patient Refund
190057	12/15/2022	PATIENT REFUND	35.26	Patient Refund
190058	12/15/2022	PATIENT REFUND	27.38	Patient Refund
190059	12/15/2022	PATIENT REFUND	25.18	Patient Refund
189960	12/15/2022	PATIENT REFUND	64.39	Patient Refund
190001	12/15/2022	PATIENT REFUND	50.00	Patient Refund
189976	12/15/2022	PATIENT REFUND	333.43	Patient Refund
190069	12/15/2022	PATIENT REFUND	401.92	Patient Refund
190000	12/15/2022	PATIENT REFUND	50.00	Patient Refund
189999	12/15/2022	PATIENT REFUND	250.00	Patient Refund
189998	12/15/2022	PATIENT REFUND	151.41	Patient Refund
189997	12/15/2022	PATIENT REFUND	215.81	Patient Refund
189964	12/15/2022	PATIENT REFUND	276.15	Patient Refund
189966	12/15/2022	PATIENT REFUND	223.76	Patient Refund
189995	12/15/2022	PATIENT REFUND	240.92	Patient Refund
189994	12/15/2022	PATIENT REFUND	91.20	Patient Refund
189993	12/15/2022	PATIENT REFUND	81.00	Patient Refund
189992	12/15/2022	PATIENT REFUND	361.00	Patient Refund
189990	12/15/2022	PATIENT REFUND	38.40	Patient Refund
189989	12/15/2022	PATIENT REFUND	159.00	Patient Refund
189988	12/15/2022	PATIENT REFUND	118.90	Patient Refund
190066	12/15/2022	PATIENT REFUND	23.16	Patient Refund
189977	12/15/2022	PATIENT REFUND	91.00	Patient Refund
189970	12/15/2022	PATIENT REFUND	48.78	Patient Refund
189969	12/15/2022	PATIENT REFUND	547.60	Patient Refund
189968	12/15/2022	PATIENT REFUND	37.46	Patient Refund
190008	12/15/2022	PATIENT REFUND	80.00	Patient Refund
190060	12/15/2022	PATIENT REFUND	1,034.71	Patient Refund
189971	12/15/2022	PATIENT REFUND	42.43	Patient Refund
189976	12/15/2022	PATIENT REFUND	50.00	Patient Refund
189987	12/15/2022	PATIENT REFUND	35.00	Patient Refund
189736	12/6/2022	UNITED WAY OF SWEETWATER COUNTY	244.62	Payroll Deduction
190077	12/20/2022	UNITED WAY OF SWEETWATER COUNTY	244.62	Payroll Deduction
189728	12/6/2022	CIRCUIT COURT 3RD JUDICIAL	146.50	Payroll Garnishment
189729	12/6/2022	CIRCUIT COURT 3RD JUDICIAL	344.25	Payroll Garnishment
189730	12/6/2022	CIRCUIT COURT 3RD JUDICIAL	200.59	Payroll Garnishment
190081	12/20/2022	CIRCUIT COURT 3RD JUDICIAL	169.48	Payroll Garnishment
190082	12/20/2022	CIRCUIT COURT 3RD JUDICIAL	209.60	Payroll Garnishment
189732	12/6/2022	CIRCUIT COURT SEVENTH JUDICIAL DISTRICT	501.45	Payroll Garnishment
190072	12/20/2022	CIRCUIT COURT SEVENTH JUDICIAL DISTRICT	268.95	Payroll Garnishment
189731	12/6/2022	DAVID G. PEAKE	3,484.62	Payroll Garnishment
190073	12/20/2022	DAVID G. PEAKE	3,484.62	Payroll Garnishment
190253	12/29/2022	DAVID G. PEAKE	3,484.62	Payroll Garnishment
189737	12/6/2022	DISTRICT COURT THIRD JUDICIAL DIST	945.67	Payroll Garnishment
190074	12/20/2022	DISTRICT COURT THIRD JUDICIAL DIST	945.56	Payroll Garnishment
189734	12/6/2022	STATE OF WYOMING DFS/CSES	2,278.93	Payroll Garnishment
190076	12/20/2022	STATE OF WYOMING DFS/CSES	2,278.93	Payroll Garnishment
190083	12/20/2022	SWEETWATER CIRCUIT COURT-RS	147.30	Payroll Garnishment
190084	12/20/2022	SWEETWATER CIRCUIT COURT-RS	162.46	Payroll Garnishment

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
12/31/2022

189735	12/6/2022	TREASURER STATE OF MAINE	172.00	Payroll Garnishment
190078	12/20/2022	TREASURER STATE OF MAINE	172.00	Payroll Garnishment
W/T	12/6/2022	PAYROLL 25	1,700,000.00	Payroll Transfer
W/T	12/20/2022	PAYROLL 26	1,700,000.00	Payroll Transfer
189658	12/1/2022	CARDINAL HEALTH PHARMACY MGMT	1,019,734.92	Pharmacy Management
190104	12/22/2022	CARDINAL HEALTH PHARMACY MGMT	5,715.50	Pharmacy Management
190254	12/29/2022	CARDINAL HEALTH PHARMACY MGMT	1,010,815.75	Pharmacy Management
189751	12/8/2022	DR. CAMERSON KESLER	50,000.00	Physician Recruitment
189777	12/8/2022	HOLIDAY INN EXPRESS - LONE TREE HOSPITALITY, LLC	516.00	Physician Recruitment
190147	12/22/2022	HOLIDAY INN EXPRESS - LONE TREE HOSPITALITY, LLC	129.00	Physician Recruitment
189880	12/15/2022	DR. JANENE GLYN	15,000.00	Physician Retention
190125	12/22/2022	DONALDSON MEDICAL CLINIC	12,000.00	Physician Services
190086	12/22/2022	ADVANCED MEDICAL IMAGING, LLC	19,248.00	Physician Services
190156	12/22/2022	JOHN A. ILIYA, M.D.	23,000.00	Physician Services
190166	12/22/2022	LOCUM TENENS.COM	43,604.37	Physician Services
189908	12/15/2022	MPLT HEALTHCARE, LLC	30,090.82	Physician Services
190177	12/22/2022	MPLT HEALTHCARE, LLC	14,760.00	Physician Services
190203	12/22/2022	ROCK SPRINGS MY PLACE, LLC	117.60	Physician Services
190256	12/29/2022	UNIVERSITY MEDICAL BILLING	2,556.48	Physician Services
190232	12/22/2022	UNIVERSITY OF UTAH (UJHC OUTREACH)	115,511.74	Physician Services
190112	12/22/2022	COMPHEALTH, INC.	28,625.76	Physician Services
189950	12/15/2022	WEATHERBY LOCUMS, INC	23,075.78	Physician Services
190240	12/22/2022	WEATHERBY LOCUMS, INC	36,854.34	Physician Services
190137	12/22/2022	GRANITE STATE MANAGEMENT & RESOURCES	666.67	Physician Student Loan
190138	12/22/2022	GREAT LAKES	1,666.67	Physician Student Loan
190139	12/22/2022	GREAT LAKES EDUCATION LOAN SERVICES	1,000.00	Physician Student Loan
190120	12/22/2022	MOHELA	1,666.67	Physician Student Loan
190121	12/22/2022	MOHELA	1,666.67	Physician Student Loan
190235	12/22/2022	US DEPARTMENT OF EDUCATION	5,833.34	Physician Student Loan
190191	12/22/2022	POSTMASTER	498.00	Postage
190198	12/22/2022	RESERVE ACCOUNT	5,000.00	Postage
189789	12/8/2022	LARRY D. MACY	1,350.00	Professional Service
190164	12/22/2022	LARRY D. MACY	900.00	Professional Service
189743	12/8/2022	AMERICAN COLLEGE OF RADIOLOGY	825.00	Professional Service
190128	12/22/2022	CE BROKER	252.94	Professional Service
189757	12/8/2022	CLEANIQUE PROFESSIONAL SERVICES	4,500.00	Professional Service
190109	12/22/2022	CLEANIQUE PROFESSIONAL SERVICES	3,900.00	Professional Service
189768	12/8/2022	CLIFTON LARSON ALLEN LLP	5,250.00	Professional Service
190171	12/22/2022	MEDICAL PHYSICS CONSULTANTS, INC	2,125.00	Professional Service
189796	12/8/2022	MOUNTAIN STATES MEDICAL PHYSICS	11,771.90	Professional Service
189910	12/15/2022	NETDAIS	4,950.00	Professional Service
189911	12/15/2022	NORTHWEST SOLUTIONS LLC	2,520.00	Professional Service
189804	12/8/2022	P3 CONSULTING LLC	2,266.25	Professional Service
189838	12/8/2022	VERSYS INC.	29.00	Professional Service
190236	12/22/2022	VERSYS INC.	37.00	Professional Service
190246	12/22/2022	WYOMING DEPARTMENT OF HEALTH	253.00	Professional Service
189807	12/8/2022	RADIATION DETECTION COMPANY	554.80	Radiation Monitoring
190174	12/22/2022	MERRY X-RAY	363.65	Radiology Film
189655	12/1/2022	BRACCO DIAGNOSTICS INC	1,365.30	Radiology Material

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
12/31/2022

189864	12/15/2022	BRACCO DIAGNOSTICS INC	734.64	Radiology Material
189882	12/1/2022	LANTHEUS MEDICAL IMAGING, INC	2,880.14	Radiology Material
189787	12/8/2022	LANTHEUS MEDICAL IMAGING, INC	1,926.76	Radiology Material
190163	12/22/2022	LANTHEUS MEDICAL IMAGING, INC	1,168.18	Radiology Material
189917	12/15/2022	PHARMALOGIC WY, LTD	3,188.01	Radiology Material
190187	12/22/2022	PHARMALOGIC WY, LTD	1,163.87	Radiology Material
190100	12/22/2022	BRIAN BARTON, PA-C	201.60	Reimbursement - CME
190122	12/22/2022	DIESEREE PADILLA	370.00	Reimbursement - CME
189646	12/1/2022	DR. BANU SYMINGTON	420.00	Reimbursement - CME
190094	12/22/2022	DR. BANU SYMINGTON	1,945.03	Reimbursement - CME
190118	12/22/2022	DR. DAVID DANSIE	475.00	Reimbursement - CME
189705	12/1/2022	DR. SIGSBEE DUCK	4,813.80	Reimbursement - CME
190210	12/22/2022	DR. SIGSBEE DUCK	435.00	Reimbursement - CME
189680	12/1/2022	ISRAEL STEWART, DO	373.33	Reimbursement - CME
190157	12/22/2022	JOSEPH J. OLIVER, M.D.	2,071.00	Reimbursement - CME
190208	12/22/2022	SHAWN ROCKEY, PA-C	90.00	Reimbursement - CME
189854	12/15/2022	ANGEL BENNETT	209.19	Reimbursement - Education & Travel
190155	12/22/2022	DR. JANENE GLYN	2,339.13	Reimbursement - Education & Travel
189809	12/8/2022	DR. RASHEEL CHOWDHARY	2,508.00	Reimbursement - Education & Travel
190243	12/22/2022	DR. WILLIAM SARETTE	600.00	Reimbursement - Education & Travel
189891	12/15/2022	JOSEPHINA IBARRA	278.43	Reimbursement - Education & Travel
189892	12/15/2022	KARA JACKSON	606.90	Reimbursement - Education & Travel
189893	12/15/2022	KARALI FLOINSKY	1,642.38	Reimbursement - Education & Travel
189805	12/8/2022	PATTY O'LEXY	406.32	Reimbursement - Education & Travel
190199	12/22/2022	ROBIN SNOWERGER	22.80	Reimbursement - Education & Travel
189938	12/15/2022	SUZAN CAMPBELL	446.66	Reimbursement - Education & Travel
189947	12/15/2022	VALERIE BOGGS	448.20	Reimbursement - Education & Travel
189786	12/8/2022	KEIRSTEN GARLOCK	50.92	Reimbursement - Insurance Premium
190158	12/22/2022	JULIA KERSHNIK SWEEDLER	511.37	Reimbursement - Non Hospital Supplies
190161	12/22/2022	KERRY DOWNS	45.00	Reimbursement - Non Hospital Supplies
189898	12/15/2022	LESLIE TAYLOR	1,386.70	Reimbursement - Non Hospital Supplies
189791	12/8/2022	MAHANNE SANDERS	1,714.16	Reimbursement - Non Hospital Supplies
189941	12/15/2022	TIFFANY MARSHALL	381.69	Reimbursement - Non Hospital Supplies
190252	12/23/2022	NATALIE MILLS	350.00	Reimbursement - Payroll
189690	12/1/2022	NEIL LEWIS	150.00	Reimbursement - Uniforms
W/T	12/29/2022	ABG 12/8/22	156,228.83	Retirement
W/T	12/9/2022	ABG 11/24/22	132,113.37	Retirement
189829	12/8/2022	STATE OF WYO.DEPT.OF REVENUE	2.01	Sales Tax Payment
189687	12/1/2022	MHSC MEDICAL STAFF	50.00	Scholarship
189653	12/1/2022	BOOKCLIFF SALES INC	4,457.14	Scrub Sale deductions
190144	12/22/2022	HEALTHICITY LLC	16,200.00	Software
189922	12/15/2022	RL DATIX	421.00	Software
189774	12/8/2022	GREEN RIVER ARTS COUNCIL COMM CHEST	300.00	Sponsorship
190180	12/22/2022	PMS SCREEN PRINTING	146.00	Sponsorship
190202	12/22/2022	RSHS GIRLS BASKETBALL	200.00	Sponsorship
190222	12/22/2022	SW 1 SCHOOL FOUNDATION	1,000.00	Sponsorship
189639	12/1/2022	ALI MED INC	821.43	Surgery Supplies
189850	12/15/2022	ALI MED INC	476.70	Surgery Supplies
190068	12/22/2022	ALI MED INC	327.03	Surgery Supplies

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
GENERAL FUND DISBURSEMENTS
12/31/2022

189741	12/8/2022	ALK ABELLO, INC.	605.38	Surgery Supplies
189648	12/1/2022	BECTON DICKINSON	1,845.90	Surgery Supplies
189747	12/8/2022	BECTON DICKINSON	2,367.43	Surgery Supplies
189860	12/15/2022	BECTON DICKINSON	822.40	Surgery Supplies
190097	12/22/2022	BECTON DICKINSON	120.00	Surgery Supplies
189748	12/8/2022	BEST SEAL SURGICAL DRAPES, LLC	160.00	Surgery Supplies
189760	12/8/2022	CR BARD INC	1,077.50	Surgery Supplies
189763	12/8/2022	EQUASHIELD LLC	5,572.72	Surgery Supplies
189876	12/15/2022	EQUASHIELD LLC	2,006.40	Surgery Supplies
189675	12/1/2022	GE HEALTHCARE INC	1,845.00	Surgery Supplies
189771	12/8/2022	GE HEALTHCARE INC	1,070.10	Surgery Supplies
190135	12/22/2022	GE HEALTHCARE INC	3,690.00	Surgery Supplies
190151	12/22/2022	INTERNATIONAL BIOMEDICAL	182.00	Surgery Supplies
189797	12/8/2022	NANOSONICS, INC.	130.00	Surgery Supplies
189829	12/15/2022	SHEATHING TECHNOLOGIES, INC.	162.35	Surgery Supplies
189706	12/1/2022	SMITH & NEPHEW ENDOSCOPY INC	437.70	Surgery Supplies
189817	12/8/2022	SMITH & NEPHEW ENDOSCOPY INC	864.60	Surgery Supplies
190211	12/22/2022	SMITH & NEPHEW ENDOSCOPY INC	1,083.20	Surgery Supplies
189818	12/8/2022	SMITH & NEPHEW INC.	394.42	Surgery Supplies
189935	12/15/2022	STRYKER ENDOSCOPY	2,132.57	Surgery Supplies
190218	12/22/2022	STRYKER ENDOSCOPY	866.60	Surgery Supplies
189826	12/8/2022	STRYKER ORTHOPAEDICS	8,550.00	Surgery Supplies
189936	12/15/2022	STRYKER ORTHOPAEDICS	12,524.00	Surgery Supplies
190219	12/22/2022	STRYKER ORTHOPAEDICS	16,145.00	Surgery Supplies
189827	12/8/2022	SURGICAL DIRECT	545.59	Surgery Supplies
189711	12/1/2022	SURGISHP	13,488.00	Surgery Supplies
189724	12/1/2022	XODUS MEDICAL, INC.	840.00	Surgery Supplies
189725	12/1/2022	ZIMMER BIOMET	2,930.00	Surgery Supplies
189951	12/15/2022	ZIMMER BIOMET	143.75	Surgery Supplies
190249	12/22/2022	ZIMMER BIOMET	798.00	Surgery Supplies
EFT00000007862	12/15/2022	COOPER SURGICAL	73.94	Surgery Supplies
190192	12/22/2022	PRESS GANNEY ASSOCIATES, INC	4,475.11	Surveys
189845	12/8/2022	UNCLAIMED PROPERTY	801.80	Unclaimed Property
189842	12/8/2022	WYOMING DEPT WORKFORCE SERVICES	329.13	Unemployment
189843	12/8/2022	WYOMING EMBROIDERY	488.00	Uniforms
189851	12/15/2022	ALL WEST COMMUNICATIONS	5,964.20	Utilities
189645	12/1/2022	AT&T	651.38	Utilities
189857	12/15/2022	AT&T	159.84	Utilities
189920	12/15/2022	CENTURY LINK	1,448.68	Utilities
190196	12/22/2022	CENTURY LINK	373.16	Utilities
190123	12/22/2022	DISH NETWORK LLC	85.54	Utilities
190195	12/22/2022	DOMINION ENERGY WYOMING	51,640.65	Utilities
189923	12/15/2022	ROCK SPRINGS MUNICIPAL UTILITY	11,921.48	Utilities
190204	12/22/2022	ROCKY MOUNTAIN POWER	40,307.48	Utilities
190242	12/22/2022	WHITE MOUNTAIN WATER & SEWER DISTRICT	60.95	Utilities
190217	12/22/2022	STERICYCLE INC.	1,509.14	Waste Disposal
189879	12/15/2022	FIBERTECH	2,293.00	Window Cleaning
			9,342,163.89	

**Memorial Hospital of Sweetwater County
County Voucher Summary
as of month ending December 31, 2022**

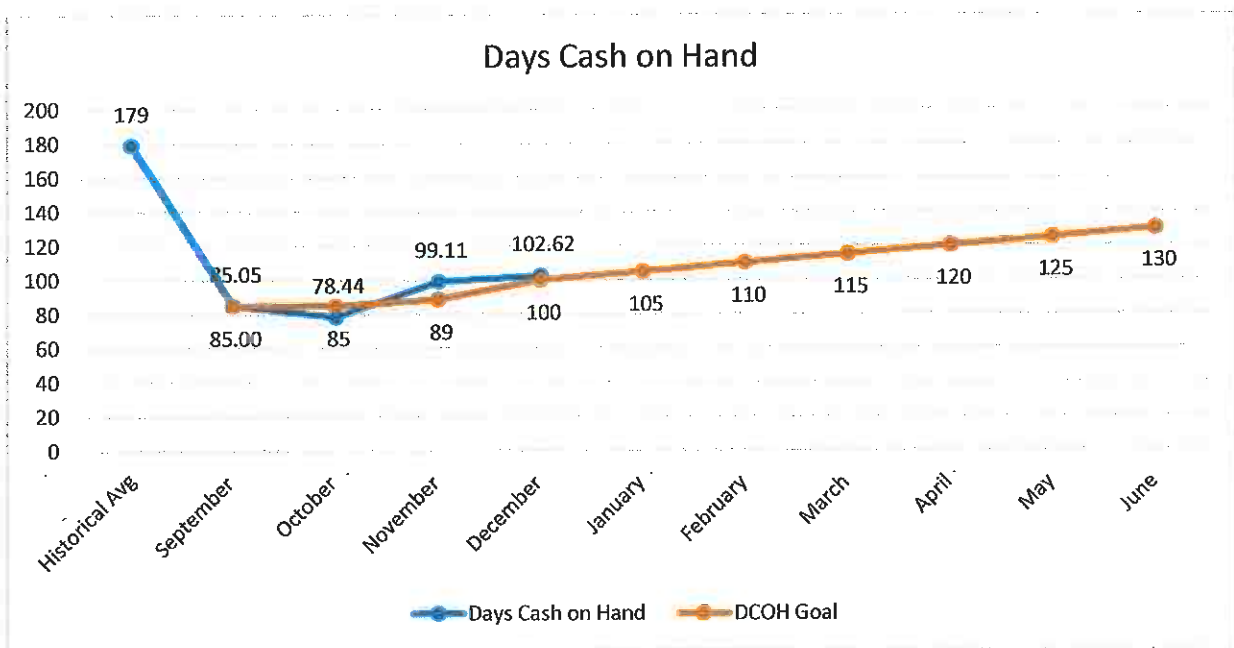
Vouchers Submitted by MHSC at agreed discounted rate	
July 2022	\$0.00
August 2022	\$168,183.03
September 2022	\$0.00
October 2022	\$63,176.34
November 2022	\$0.00
December 2022	\$53,248.26
January 2023	\$23,945.08
February 2023	\$0.00
March 2023	\$0.00
April 2023	\$0.00
May 2023	\$0.00
June 2023	\$0.00
County Requested Total Vouchers Submitted	<u>\$308,552.71</u>
Total Vouchers Submitted FY 23	\$308,552.71
Less: Total Approved by County and Received by MHSC FY 23	\$231,359.37
Total Vouchers Pending Approval by County	<u><u>\$77,193.34</u></u>

FY23 Title 25 Fund Budget from Sweetwater County	\$273,488.00
Funds Received From Sweetwater County	<u>\$231,359.37</u>
FY23 Title 25 Fund Budget Remaining	\$42,128.63
Total Budgeted Vouchers Pending Submittal to County	<u><u>\$0.00</u></u>

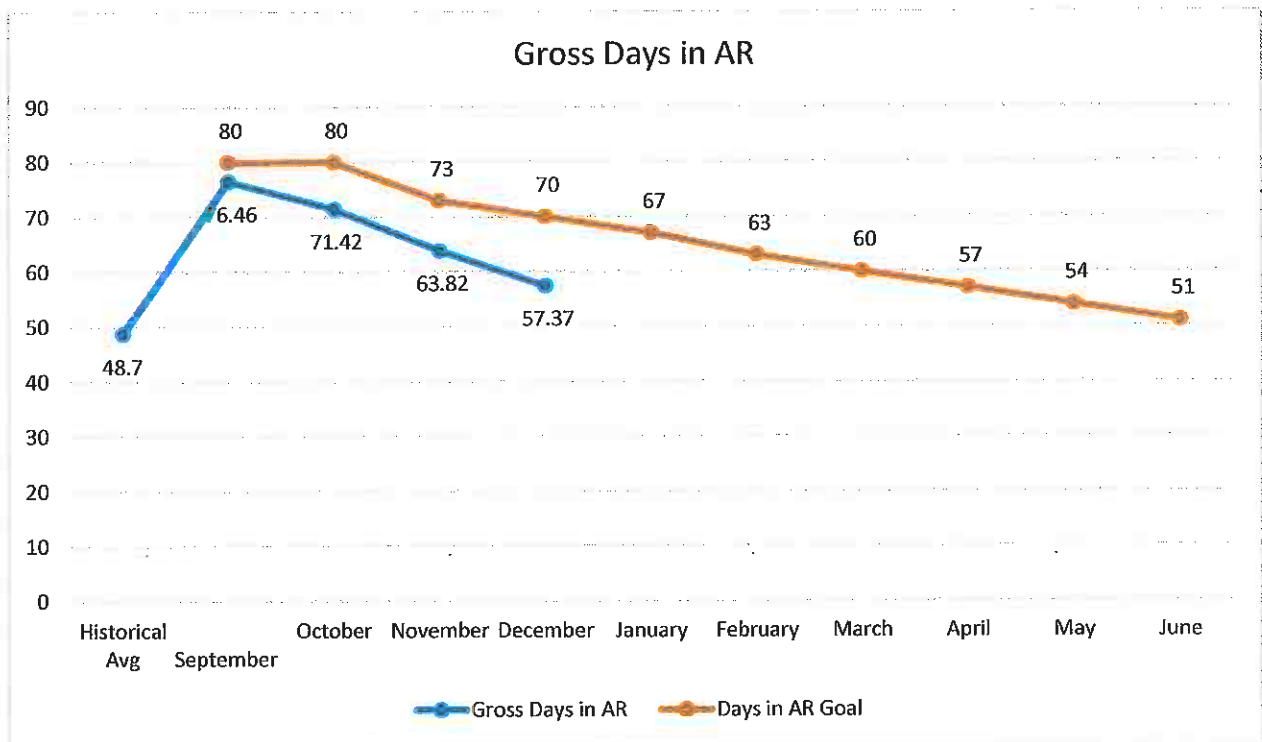
FY23 Maintenance Fund Budget from Sweetwater County	\$1,448,215.00
County Maintenance FY23 - July	\$258,289.40
County Maintenance FY23 - August	\$42,947.22
County Maintenance FY23 - September	\$114,358.00
County Maintenance FY23 - October	\$20,740.60
County Maintenance FY23 - November	\$47,844.61
County Maintenance FY23 - December	\$27,523.75
County Maintenance FY23 - January	\$0.00
County Maintenance FY23 - February	\$0.00
County Maintenance FY23 - March	\$0.00
County Maintenance FY23 - April	\$0.00
County Maintenance FY23 - May	\$0.00
County Maintenance FY23 - June	\$0.00
	<u>\$511,703.58</u>
FY23 Maintenance Fund Budget Remaining	<u><u>\$936,511.42</u></u>

Financial Goals – Fiscal Year 2023. We have chosen two financial metrics to focus on for the current fiscal year: Days Cash on Hand (DCOH) and Days in Accounts Receivable (AR). We have included the historical average of 18 months prior to Cerner implementation 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 a short-term goal of 100 days by December 31 and long-term goals of 115 days by March 31 and 130 days by June 30, the end of the fiscal year.
 - With the high collections in December, we saw an increase in DCOH of 3.5 days. We were successful at meeting the December goal of 100 days.

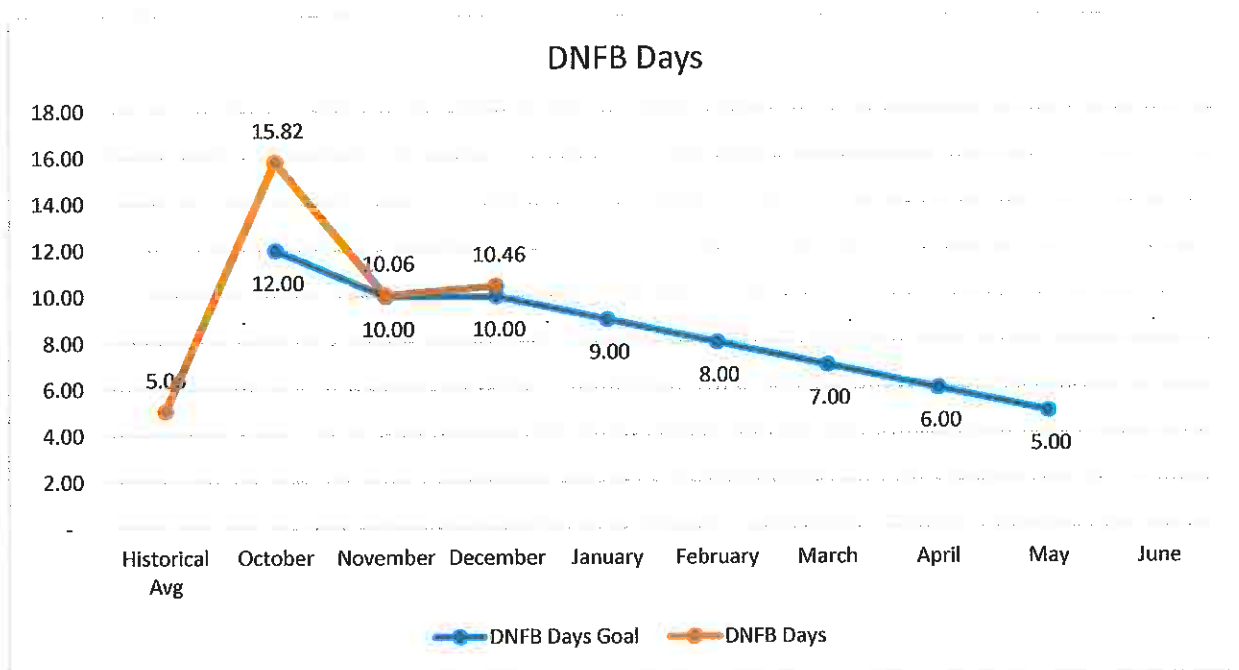


- Days in Accounts Receivable represents the number of days of patient charges tied up in unpaid patient accounts. We have set a short-term goal of 70 days by December 31, 60 days by March 31 and 51 days by year end.
 - We use a 3-month average calculation in the financial statements for this metric. Days in AR for December decreased by 6.5 days and came in at 57.37, exceeding our goal of 70 days. Gross accounts receivable decreased in December by \$2.8 million. We may look at changing the year-end goal as we continue to see it drop with the positive results in billing and coding.

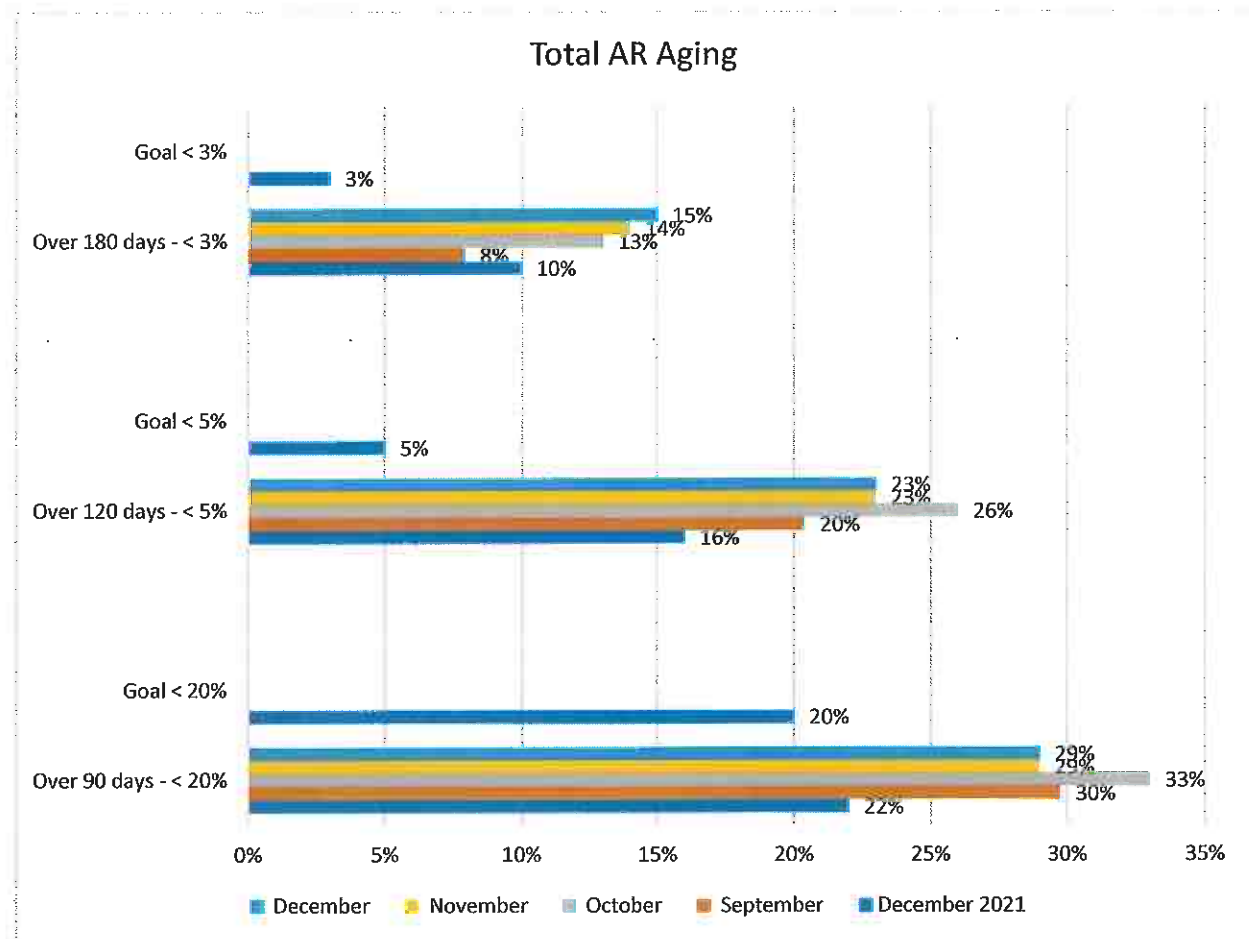


Revenue Cycle Goals – Fiscal Year 2023 - In addition to these main goals, we have set goals for some corresponding financial metrics that are impacting the revenue cycle:

- **DNFB Days – Discharged Not Final Billed days.** These are patient accounts where the patient has been discharged but the account has not been sent for billing. Several categories of accounts fall under DNFB including billing holds, corrections required, credit balances, waiting for coding, ready to bill and the standard delay. The standard delay, or abeyance period, 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 year, equal to our 5-day abeyance period for billing accounts.
 - DNFB Days are at 10.46 for December. We are slightly above the goal for December.

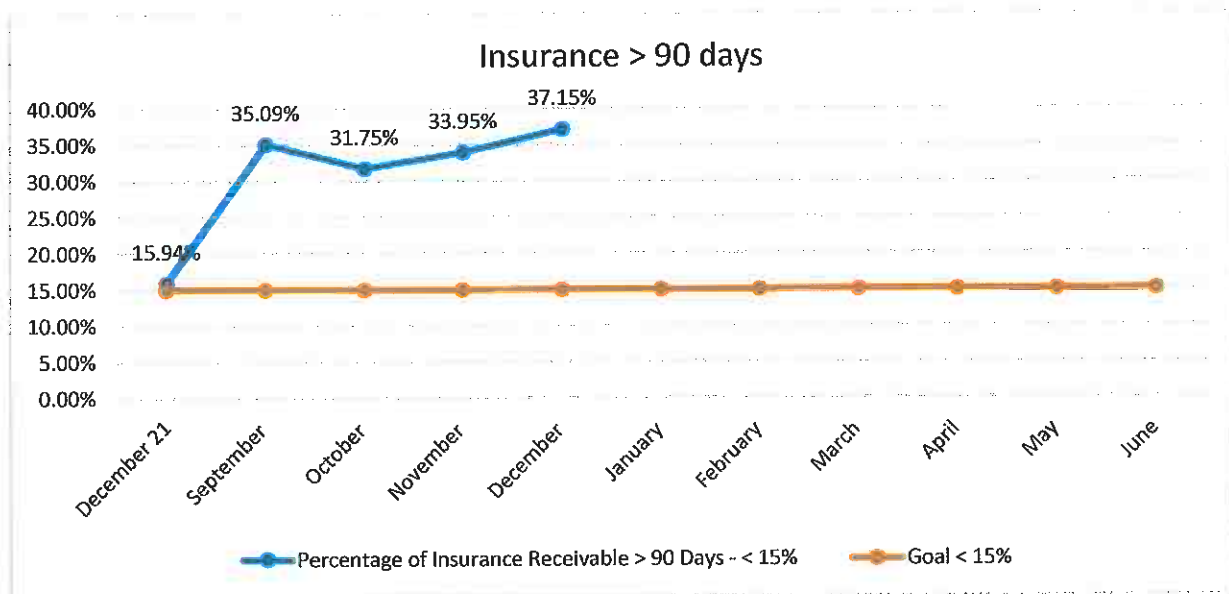
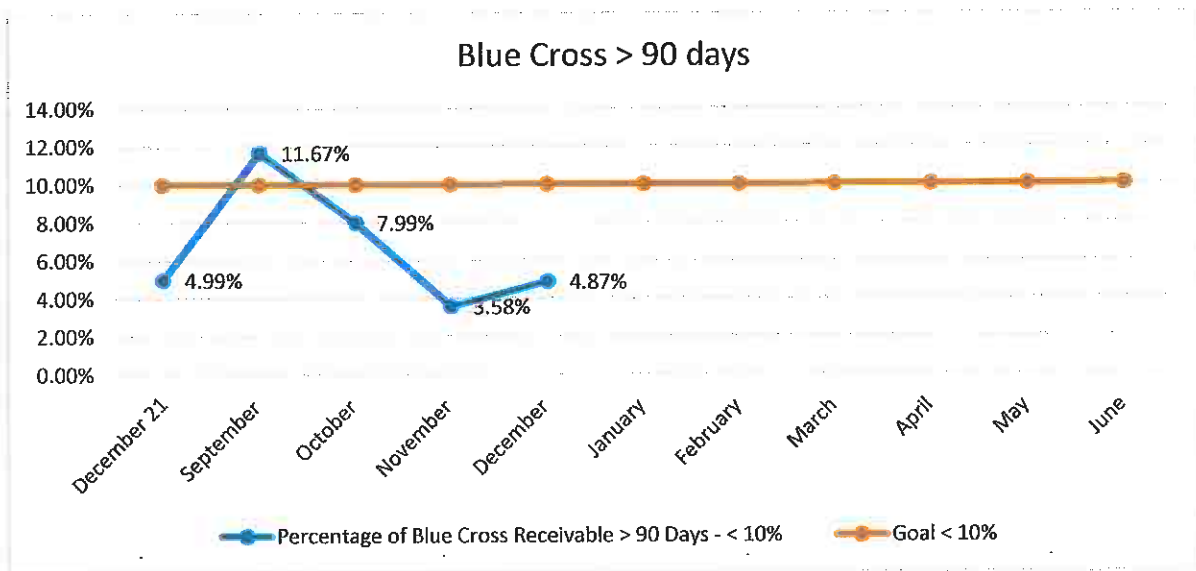


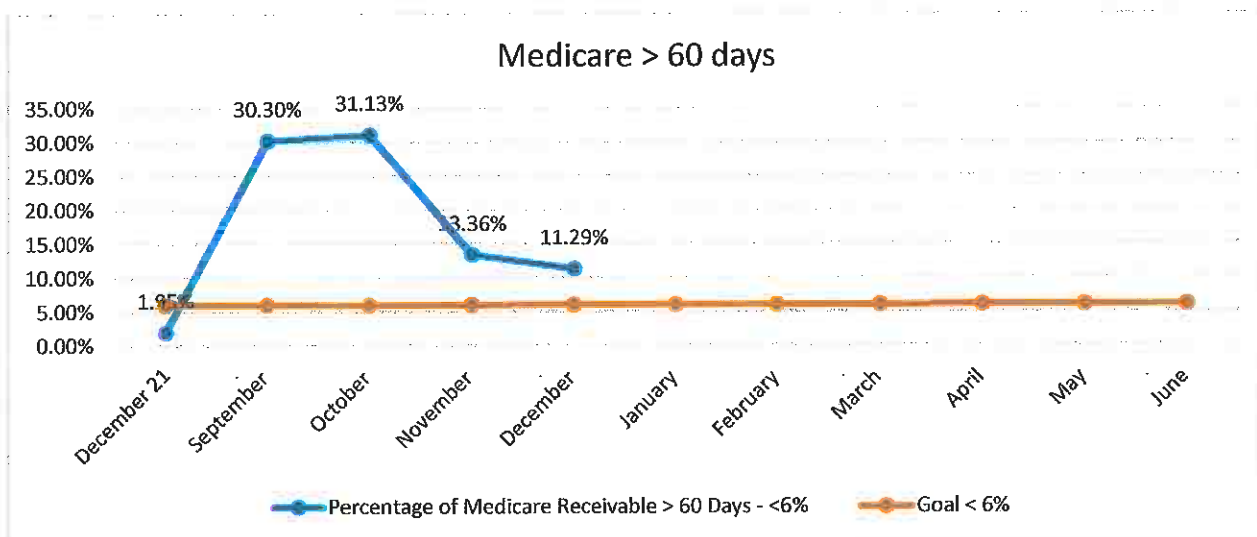
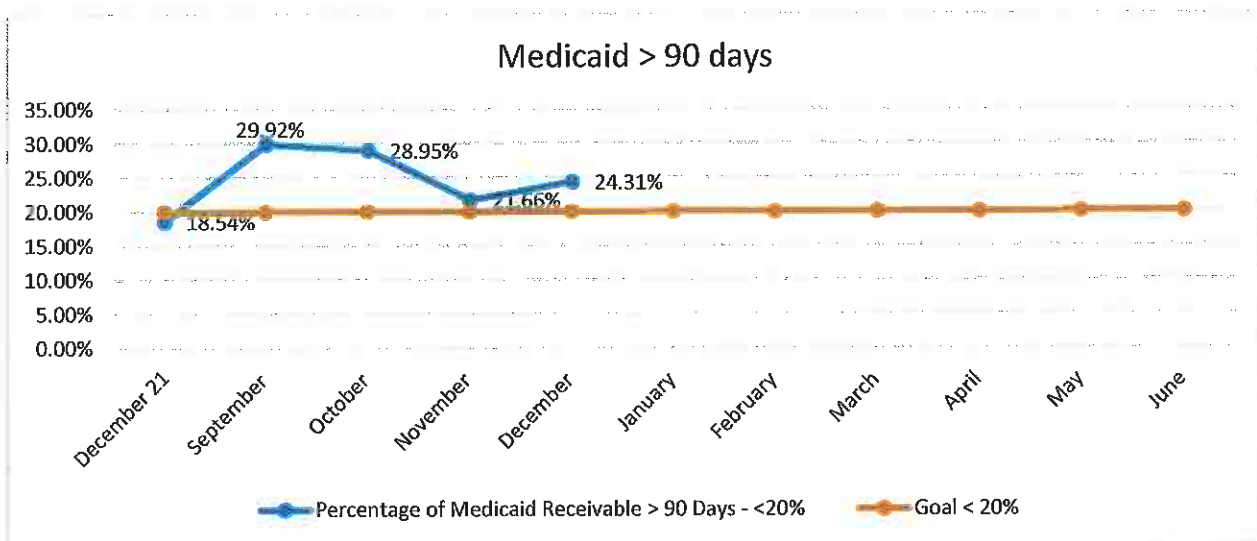
- Total Accounts Receivable aging – These goals were set based on national benchmarks received from CLA and are set as follows:
 - Days over 90 days set be < 20% of total AR
 - Days over 120 days set at < 5% of total AR
 - Days over 180 days set at < 3% of total AR
- We also show the metrics from December 31, 2021, as comparison data from pre-Cerner. Our total days in AR continue to decrease as we become more efficient in Cerner. However, we have identified the growth in our aging AR from prior to Cerner and the first few months after implementation.
 - Days over 90 days remained at 29% for December
 - Days over 120 days remained at 23% for December
 - Days over 180 days increased slightly to 15% for December



- Days in AR by Payer -- These metrics show more detail of where our aging AR is allocated. These goals have always been reported in the monthly financial statements, but we will be showing the trends through the end of the fiscal year. These goals are as follows:

- BCBS Days in AR > 90 days should be less than 10%
- Insurance Days in AR > 90 days should be less than 15%
- Medicaid Days in AR > 90 days should be less than 20%
- Medicare Days in AR > 60 days should be less than 6%





**Self Pay Plan
Information and Results
January, 2023**

	FY 20	FY21	FY22	FY23
SELF PAY DISCOUNTS	821,271.00	983,066.30	1,353,208.58	292,761.91
				585,523.82
				35,609.14

*This 20% discount is generated by sending the first private pay statement to the guarantor for a specific account. In addition we offer the discount to patients that call in reference to their account in an effort to allow them the opportunity to pay the account in full during the conversation.

		FY21	FY22	FY23
HARDSHIP PROGRAM	FY TOTAL	75,053.94	3,164.60	23,915.37
50% DISCOUNT	DEC TOTAL			4,953.62

*This 50% discount opportunity has been offered during conversation with patients after we have identified through conversation that the patient has no insurance and that the total balance of the account will be a hardship for the patient to pay.

TOTAL SELF PAY PAYMENTS

FY 19	7,931,404.51
FY 20	8,093,427.44
FY 21	7,763,867.42
FY 22	7,359,544.59
FY 23	2,013,199.06

TOTAL SELF PAY REVENUE

FY 19	12,651,794.61
FY 20	13,566,281.12
FY 21	14,306,425.74
FY22	14,129,092.76
FY 23	7,355,388.89

Self Pay Plan Information and Results

PAGE 2

MEDICAL ASSISTANCE

FY19	2,122,865.57
FY20	2,579,929.74
FY21	2,890,990.97
FY22	1,534,631.43
FY23	974,339.19

PAYMENT PLANS

FY19	1,838,325.22
FY20	1,926,052.70
FY21	1,727,454.11
FY22	1,025,407.18

FY23 CURRENT CERNER FORMAL PMT PLANS

CERNER UNABLE TO CALCULATE AT THIS TIME

PATIENT NAVIGATION


	FY 21	FY22	FY23
ACTUAL COST SAVINGS OF FREE OR REPLACEMENT MEDICATION	103,822.00	261,211.00	171,833.00
COPAY ASSISTANCE *ACTUAL COLLECTIONS	12,467.00	40,733.69	17,442.00
INSURANCE MAXIMUMIZATION *ACTUAL COLLECTIONS	216,951.00	1,015,657.00	502,256.00
PREMIUM ASSISTANCE *ACTUAL COLLECTIONS	284,777.00	798,050.00	487,033.00
TOTAL COST SAVINGS AND COLLECTED REVENUE	<u>618,017.00</u>	<u>2,115,651.69</u>	<u>1,178,564.00</u>

TOTAL EXPENSE TO RUN PATIENT NAVIGATION DEPT FY22	139,826.00	142,622.52	162,690.00
GOAL - TOTAL DEPT EXPENSE PLUS 500% FY 23	153,808.60	156,884.77	976,140.00
TOTAL AMOUNT WE HAVE EXCEEDED OUR GOAL BY	<u>464,208.40</u>	<u>1,958,766.92</u>	<u>202,424.00</u>

*NOTE: Cost savings of free and/or replacement drug is the actual MHSC cost of products that we acquired for the patient and would have been considered uncollectable.

* NOTE: FY 23 Goal Increased to Total Expense Plus 500%

MEMO: January 25, 2023

TO: Finance Committee 

FROM: Ronald L. Cheese – Director Patient Financial Services

SUBJECT: Preliminary January, 2023 Potential Bad Debts Eligible for Board Certification

Potential Bad Debts Eligible for Board Certification

Cerner Accounts	\$	1,437,002.28	
Hospital Accounts Affinity	\$	30,000.00	
Hospital Payment Plans Affinity	\$	0.00	
Medical Clinic Accounts	\$	232,000.00	
Ortho Clinic Accounts	\$	997.72	
Total Potential Bad Debt	\$	1,700,000.00	
Hospital Accounts Returned	\$ -	45,000.00	
Net Bad Debt Turned			\$ 1,655,000.00
Hospital Recoveries Collection Agency	\$	- 200,000.00	
Hospital Recoveries Payment Plans	\$	- 14,000.00	
Medical Clinic Recoveries	\$	- 10,724.85	
Ortho Clinic Recoveries	\$	- 2,588.16	
Total Bad Debt Recoveries			\$- 227,313.01
Net Bad Debt Less Recoveries			<u>\$ 1,427,686.99</u>

Cerner Accounts

Largest Account	\$	75,711.27
Primary Self Pay	\$	1,100,000.00
Commercial	\$	181,000.00
Medicare	\$	6,000.00
Medicaid	\$	192.00

MEMORANDUM

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

Pharmacy Chemo Mixing Room...Plan One Architects presented plans estimated to be 85% complete. A preliminary cost estimate was also presented. Various items associated with the plans were discussed. It was agreed that the Committee will discuss thoroughly this project, including an updated cost estimate, how the project fits into the priority list, funding, and how to proceed. By the February meeting, a cost estimate should be available based on more complete plans.

Dr. Sulentic Office...the State inspection should occur the week of January 23rd. Apparently, the project is virtually completed and has gone well.

Building Automation System...The HVAC system still needs to be balanced. There are the normal areas that are too hot or too cold. In a couple of months the system will be drained so some valves can be replaced.

Bulk Oxygen/Landscaping Project...No work will be done now until warmer weather. Concern was expressed that the Hospital is using the only temporary tank Air Gas has. Staff was asked by Trustee Tardoni to look into options in the event something happens to this temporary tank.

MOB Space Renovation...the renovated space is being used and no further work is planned in the area at this time.

Lightning Arrest System...no proposal yet.

Building and Grounds Annual Plan...Discussion occurred regarding using cost estimates in the planning document. It was agreed that the concept "Probable Cost Good Faith Estimate" would be used.

Laboratory Project...Irene related that the Commissioners approved the \$3,000,000 request for this project. Seemingly good support from the Commissioners. Conceptual design work is underway beginning with the second floor.

Other...Irene reported that the Hospital has received a grant in the amount of \$496,000 from the State for remodeling the Foundation/Lab area. Trustee Tardoni recommended that the staff look into the sewer issues in the area.

For further details...please consult the minutes of the Committee meeting.

MEMORIAL HOSPITAL OF SWEETWATER COUNTY
Building and Grounds Committee Meeting
January 17, 2023

The Building and Grounds Committee met in regular session via Zoom on January 17, 2023,
at 3:30 PM with Mr. Marty Kelsey presiding.

In Attendance: Mr. Marty Kelsey, *Trustee - Chair*
 Mr. Ed Tardoni – *Trustee*
 Ms. Irene Richardson, *CEO*
 Ms. Tami Love, *CFO*
 Mr. James Horan, *Director of Facilities*
 Mr. Gerry Johnston, *Facilities Supervisor*
 Ms. Michele Schmidt, *PlanOne Architects*

Mr. Kelsey called the meeting to order.

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

Mr. Kelsey asked for a motion to approve the minutes from the December 20, 2022 meeting. Mr. Horan made a motion to approve the minutes. Ms. Richardson seconded; motion passed.

Maintenance Metrics

Mr. Johnston presented the current maintenance metrics. He said they are right on par, but he will be looking at the number of overdue work orders. He said they are staying close to the trend.

Old Business – Project Review

Pharmacy Chemo Mixing Room

Ms. Love shared the updated cost estimate from Plan/One Architects. Ms. Schmidt said they are waiting for the review from OHLS to see if any changes need to be made after their review. Mr. Kelsey asked about any additional equipment that will be outside of this estimate. Ms. Love will talk to Jonathan Beattie regarding the new hood or any other equipment need. Mr. Tardoni pointed out an error on the elevation. Mr. Johnston said this had already been addressed with the engineer. Mr. Tardoni also asked about the type of chemotherapy we are mixing as he has concerns about the transport issues and duct size for powders versus liquids. Mr. Horan said we would discuss this with Mr. Beattie also. Mr. Kelsey recommends we wait until we have more complete design development before making a recommendation to move forward with this project. Ms. Richardson agreed, and Ms. Schmidt said they should have closer to 100% design development by the February meeting. Mr. Kelsey said we will wait until next month to have the discussion regarding financial needs, timeline, and next steps.

Dr. Sulentic Office

Ms. Schmidt met with the contractor today and they are scheduled for State inspection next week. They are down to finishes and everything is going well. Ms. Richardson said she had not heard anything from Dr. Sulentic regarding the project.

Building Automation System

Mr. Johnston said they are still trying to get the balancer here and are not sure if it is Harris or Vaughn's doing the balancing. Harris was here the last couple of weeks tweaking some trouble areas that are either too hot or too cold. They will be back in late March or early April to drain the system so they can replace some valves on the radiant heat systems. Mr. Kelsey asked if they have to wait to balance the system after the radiant heat is complete. Mr. Johnston was unsure as the radiant heat would be primary and the new VAV's would be secondary.

Bulk Oxygen

Mr. Johnston talked to Wylie Construction before the holidays and they agreed to hold off until warmer weather. There is still concern with Air Gas as we will continue to use their only available temporary tank until the project gets going again.

MOB Space Renovation

Ms. Love said the Medical Staff Services department has moved into their new space in the former MOB conference room. No other renovations are planned at this time.

Tabled Projects

Lightning Arrest System

Mr. Kelsey asked if we had received a proposal yet. Mr. Horan said he has it on his calendar to call them at the end of the month.

OB Shower Renovation

Mr. Kelsey confirmed this project is still tabled for after the new year.

Building and Grounds Annual Plan

Mr. Kelsey talked about the language we will want to include in the multi-year plan: "probable cost good faith estimate". Mr. Horan said we will use this plan to prioritize the capital projects for FY2024 as we start looking at the new budget year. He said we can start having that conversation at the next meeting.

New Business

SLIB Laboratory Renovation

Ms. Richardson reported we had a group attend the County Commissioner meeting this morning. We wanted to be transparent with the original allocation going to two projects and our request to have the whole \$3 million go towards the Lab project. They approved to still give us the full amount for our matching funds. Mr. Kelsey asked what the next steps are for this project. Ms. Love said we did have an initial meeting. Plan/One will be meeting with the departments impacted to finalize the plans. Ms. Schmidt said they are working on the conceptual design phase now and then will move into design development. We need to get the second floor design completed first to see how the structure and mechanical affects the first floor. They have sent a couple options for us to look at. Mr. Kelsey asked that we have a rough timeline for the project including when the project will go to the Board for approval. Mr. Tardoni asked if we can consider the parking area with this project as the patients do like the close proximity of the Foundation Laboratory now.

Other

Ms. Richardson reported we also received a grant of \$496,000 from the State for remodeling the Foundation Lab area. The grant is part of Provider Relief Funds for Capital Construction. Mr. Tardoni made some recommendations when looking at the sewer issues in that part of the building. Ms. Love said she would send the Committee Board members the information on that new grant and upload it to the Board portal. We will add this as new business to the next meeting agenda.

Mr. Tardoni asked about a backup plan for the bulk oxygen tank and the issue with the temporary tank. Mr. Horan and Mr. Johnston will discuss, and we will add this to the agenda for next month.

The next meeting is scheduled for Tuesday, February 21, 2023.

Mr. Kelsey adjourned the meeting at 3:45 pm.

Submitted by Tami Love

Chairs Report

Compliance Committee Meeting – January 23, 2023

- ✓ The 2023 compliance work plan will include an audit on Coding & Documentation. Something that falls in line well with other goals the board has set.
- ✓ With scheduling conflicts there will not be a compliance meeting in February.

For detailed information please see the reports and minutes of the meeting.

Kandi Pendleton



**Board Compliance Committee Meeting
Memorial Hospital of Sweetwater County
January 23rd, 2023**

Present via Zoom: Irene Richardson, *CEO*, Suzan Campbell, *In House Counsel*, Kandi Pendleton, *Trustee-Chair*, Barbara Sowada, *MHSC Board President**, April Prado, *Foundation & Compliance*.

Absent: Taylor Jones, *Trustee*.

*It should be noted that Barbara Sowada was a sub for Taylor Jones.

Minutes

Call to Order

The meeting was called to order at 9:00 am by Kandi Pendleton.

Agenda

The January agenda was approved as written, Irene made the motion and Barbara seconded it. Motion carried.

Meeting Minutes

The meeting minutes from the November 28th, 2022 were presented. Barbara made the motion to approve the minutes as written and Irene seconded. Motion carried.

Old Business

1. Cybersecurity Audit update. The committee received an updated copy of the draft audit via email in December 2022. Suzan reported that she had met with Terry and that a follow up meeting and final report been scheduled with the CISA team for this week and that April would be included in the meeting. April reported that the meeting was actually this morning and that she had attended. She further reported that CISA would have a final report to Terry in 7-10 business days. Suzan stated that the information related to this audit will be presented to this committee hopefully by the next meeting.

New Business

New Audits to begin after the Gala.

Coding and Documentation. Suzan reported that this was chosen because we want to make sure that coding is being done properly and that education is consistent among the departments. She continued that there should be parameters for all of these things and we may find that we don't have them. Kandi asked how we decide what is coded and billed. Irene answered that we use a "SOAP" note. SOAP=Subjective, Objective, Assessment, Plan. Irene emphasized how important it is that everything is accurate and noted. She added that this is not just for billing but includes any lawsuits or audits that may happen. The billing process is driven by the documentation and we need to make sure it is accurate. April added that documentation now uses "time with patient" for billing as well. The documentation and the actual time with the patient have to add up. Suzan added that we would be looking at all of these items as well as productivity. Barbara asked about productivity goals -how quickly is the turnaround, what are the benchmarks and how quick can we submit to insurance? Suzan answered yes and that all of this would be something that Irene, April and herself would sit down and discuss and come up with a timeline and benchmarks for the audits and then submit those to the committee for review before the audit started. Barbara also asked about Medicare fraud and upcoding. Barbara mentioned that Medicare is monitoring for upcoding and asked if we would also be looking at this area. Irene added that we would look at this area and noted that Clifton Larson had audited this previously and found that we were actually under-coding in the ER. She continued that that is why this audit will be so important. Barbara stated that she is glad that we are going to be doing this one and feels that it fits in with what we are doing in Quality and with Cerner.

1. HIPAA Compliance During Registration Process. Suzan reported that with our change to the Cerner program, the patient does not receive physical forms to sign-it is all done on an iPad. She continued that this is something that we need to review to make sure that all the information is there for patients and that they are aware of what they are signing and can get a copy if they would like. She added that we need to review what the patient is seeing, what they are signing and the whole process in general. The committee questioned the timeline of these audits and Suzan stated that it would probably take 3 months for the coding and documentation one-just depending on what is found and how much information we have to gather and probably less time for the HIPAA audit. She continued that these were just guestimates and that a timeline would be established and updated as we go.

Standing Items-Reports

The “Standing Items” report was presented and Suzan reported specifically on the following items;

- a. Physician exclusions from OIG. Suzan included a report that we get monthly with all our physicians on it. She stated that this report lets us know if any provider is excluded from providing care to Medicare patients for whatever reason. We use this to make sure our providers have no exclusions.
- b. Red Flag Reporting. Suzan reported that we received one report on 01/13/2023 that was reported anonymously. No contact info or follow up information was given. She stated that it appeared to be a personnel issue and the report has been forwarded to HR. She continued that HR will go to the department for follow up and review. Irene asked how we feel about anonymous reporting. Suzan stated that the person reporting has to purposely try to stay anonymous because they are given several opportunities to leave some kind of contact information. She also added that this is new and it is taking some people time to catch on to how it works and what it is for. April replied that this type of reporting was meant to be anonymous, that it was a place for employees that didn’t feel comfortable reporting to a supervisor, to report. She also talked about “Just Culture” and how employees will report more if they see that we are taking these seriously and that we try to solve them the best we can. Barbara asked what exactly is Red Flag? Suzan answered that it is the system that replaced the old “Hotline” we had. She continued that she and April looked at many different platforms that would allow employees to report via call and email, eventually choosing Red Flag. Barbara asked if this would allow for all reporting like Safety issues, OSHA, etc.? Suzan confirmed that this would allow for all types of reporting through out the hospital.
- c. HIPAA Monitoring/Fair Warning Report- Suzan reported that we are continuing to work with HR to get better with our process and it is getting better. She also explained that we will no longer be receiving reports from Fair Warning (our legacy system) and explained the difference between P2Sentinel and Synergy. April reported that we are still working out the kinks with P2Sentinel and hopefully, by year-end, their reporting will be more of what we want. She explained that it is currently more work to investigate the possible violations but it is getting easier. Suzan also reported on the open HIPAA cases and the closed ones from the previous meeting. Suzan asked if the new report for review, with added information was enough for the committee. Kandi stated that she liked the new report and that it gives her what she needs.

Additional Discussion

Kandi asked for any additional discussion. Suzan asked about the meeting next month as she will be out of town. After discussion it was decided that next months meeting will be canceled unless an emergency

meeting is needed. Suzan will email any updates to the committee. Barbara added that a timeline and benchmarks will be needed for the upcoming audit-basically a lay out of what it will look like and what will be audited. Suzan stated that this would be done and presented to the committee.

Next Meeting

The next meeting will be on March 27th, 2023 @ 9:00am

Adjournment

The meeting adjourned at 9:44am

Respectfully Submitted,

April Prado, Recording Secretary

DRAFT

Contract Check List

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

1. Name of Contract: **FIRST AMENDMENT TO AGREEMENT FOR PHYSICIAN PROFESSIONAL SERVICES (EMERGENCY DEPARTMENT)**
2. Purpose of contract, including scope and description: **Emergency Department physician contract with the U of U is amended to 1) provide for temporary coverage by mid-levels through March 31, 2023 2) reduce contract providers' costs to reflect lower rate of pay for mid-levels when mid-levels are providing services in place of physicians 3) added an EMS Medical Director for the Emergency Department and 4) replaced original COMPENSATION Administrative Services Fees with new fee schedule titled Clinical Services Fee.**
3. Effective Date: **When approved by the Board and signed by all parties**
4. Expiration Date: **June 30, 2026**
5. Termination provisions: **the mid-level coverage provision will expire March 31, 2023 the other amendment changes will be in effect through the end of the original contract or June 30, 2026** Is this auto-renew?
6. Monetary cost of the contract: **See new Clinical Services Fee listed in Amendment page 3** Budgeted? **YES**
7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. **NA**
8. Any confidentiality provisions? **NA**
9. Indemnification clause present? **NA**

10. Is this contract appropriate for other bids? **NA**

11. Is County Attorney review required?

FIRST AMENDMENT TO
AGREEMENT FOR PHYSICIAN PROFESSIONAL SERVICES

This First Amendment to Agreement for Physician Professional Services (the "Amendment") is entered into and effective as of the 1st day of July 2022, by and between Memorial Hospital of Sweetwater County, a Wyoming Hospital ("Hospital") and the University of Utah, a body politic and corporate of the State of Utah, on behalf of its School of Medicine,

Department of Emergency Medicine, with its principal place of business at 50 N. Medical Drive, Salt Lake City, Utah, 84132 ("Provider").

RECITALS

~~A.~~ A. Hospital and Provider entered into that certain Agreement for Physician Professional Services, dated July 1, 2021 (the "Agreement") with respect to the provision by Provider of certain clinical and administrative services; and

~~B.~~ B. Hospital desires Provider to provide emergency medical services medical director services and Provider desires to provide such services; and

~~C.~~ C. Hospital and Provider wish to ~~temporarily~~ amend the Agreement to memorialize their respective expectations and obligations in connection with the provision of the emergency medical services medical director services and certain other matters.

AGREEMENT

NOW THEREFORE, for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties agree as follows:

~~1. Temporary Amendment. (a) The amendments contemplated by this First Amendment to Agreement for Physician Professional Services shall expire, and be of no further force or effect, at 11:59 p.m. on March 31, 2022, and from and after that date the original terms of the Agreement for Physician Professional Services shall apply.~~

1. ~~2.~~ Section 1.3 of the Agreement is hereby deleted in its entirety and replaced with the following:

1.3 Services: Services include all Clinical Services, Medical Director Services, and EMS Medical Director Services (all as defined below) that Provider provides Hospital pursuant to this Agreement.

2. ~~3.~~ Section 2.2.1 is hereby added to the Agreement and shall read as follows:

2.2.1 EMS Medical Director Services: Provider shall provide EMS medical director services for the Hospital's Emergency Department (the "EMS Medical Director Services") through a qualified Member Physician approved by Hospital (the "EMS Medical Director"). The EMS Medical Director shall provide services as outlined in the

"MHSC Emergency Department Operational Standards and Initiatives" document, which is attached hereto as Exhibit A and incorporated into this Agreement by this reference.

3. Hospital and Provider desire to temporarily amend the Agreement to allow Provider to provide Services through the use of advanced practice providers. Accordingly the following Section 2.15 is hereby added to the Agreement but shall remain in effect only through March 31, 2023, at which point Section 2.15 shall expire and be of no further force or effect:

~~4. Section 2.15 is hereby added to the Agreement and shall read as follows:~~

2.15. Staffing Assurances:

- a. *Provider shall use commercially reasonable efforts to ensure that all Clinical Services will be provided by Member Physicians. In the event Provider is unable to secure the services of a sufficient number of Member Physicians to provide all Clinical Services covered by this Agreement, Provider will provide timely communication to the Hospital describing the circumstances and, subject to the prior written approval of Hospital, and notwithstanding anything to the contrary in this Agreement, Provider may utilize the services of advanced practice providers to perform Clinical Services for so long as is reasonably necessary to enable Provider to secure the services of additional Member Physicians. The following expectations apply with respect to Provider's use of advance practice providers to perform Clinical Services:*
 - (i) *Advance practice providers will be subject to all expectations outlined in Sections 2.1, 2.4, 2.5, 2.6, and 2.7 except those expectations which by their nature only apply to physicians;*
 - (ii) *Hospital will be obligated to treat advance practice providers as though they are Member Physicians with respect to the expectations of Sections 3.2 and 3.6;*
 - (iii) *All rights provided to Hospital under Sections 6.3 and 6.4(b)(1)-(3) will be exercisable by Hospital in the event an advance practice provider engages in actions described in such sections and such actions by their nature are applicable to the practice of advance practice providers;*
 - (iv) *Provider will ensure that at all times there is at least one Member Physician available to provide Clinical Services and will limit use of advance practice providers to the extent practicable;*
- b. *Hospital will be entitled to a discount of Five Hundred and Three Dollars (\$503) for every shift staffed by an advance practice provider instead of a Member Physician. Such discount will be reflected on invoices submitted by Provider.*
- c. *In the event Provider is unable to secure the services of a sufficient number of Member Physicians to provide all Clinical Services covered by this Agreement*

then, in addition to the ability to utilize the services of advance practice providers as described above, Provider will provide reasonable cooperation with Hospital to explore the utilization of locum tenens physicians. If the parties identify a

locum tenens physician who is available to Hospital under an existing or new agreement with Hospital, use of such physician is authorized under this Agreement with the mutual agreement of the parties as to the terms and conditions attendant to such use, which agreement shall not unreasonably be withheld. Use of locum tenens physicians will be prioritized over utilization of advance practice providers and Provider will be obligated to reimburse Hospital for all reasonable costs, actually incurred, by Hospital in connection with securing the services of any such physician pursuant to this Section.

~~4. 5.~~ Article V of the Agreement, titled "COMPENSATION," is removing all text following the heading "Administrative Services Fee," and replacing the same with the following text

immediately prior to the heading "Clinical Services Coverage Fee":

As compensation for the Medical Director Services, Hospital shall pay Provider a fixed sum of Sixty-Two Thousand Dollars (\$62,000) in equal monthly installments for the first twelve (12) months of the Term. Thereafter, Hospital shall pay Provider a fixed sum, paid in equal monthly installments, that shall increase by a rate of 3% at the conclusion of every twelve (12) month period as follows:

July 1, 2021—June 30, 2022: \$62,000

July 1, 2022—June 30, 2023: \$63,860

July 1, 2023—June 30, 2024: \$65,776

July 1, 2024—June 30, 2025: \$67,749

July 1, 2025—June 30, 2026: \$69,782

As compensation for the EMS Medical Director Services, Hospital shall pay Provider monthly. One Thousand Five Hundred Dollars (\$1,500). The foregoing rate shall remain in effect through June 30, 2026. Thereafter, Hospital shall pay Provider a fixed sum, paid in equal monthly installments, that shall increase by a rate of 3% at the conclusion of every twelve (12) month period as follows:

July 1, 2022—June 30, 2023: \$18,000

July 1, 2023—June 30, 2024: \$18,540

July 1, 2024—June 30, 2025: \$19,096

July 1, 2025—June 30, 2026: \$19,669

Together, the fee due for the Medical Director Services and the EMS Medical Director Services shall be referred to herein as the "Administrative Fee."

~~5. 6.~~ Exhibit A, attached hereto and incorporated herein by this reference is made part of the Agreement and replaces in its entirety the version of Exhibit A originally attached to the Agreement.

~~6. 7.~~ This Amendment shall not be deemed to amend or modify the Agreement in any manner except as specifically provided for herein. Each of the definitions set forth in the Agreement shall apply to the defined terms used in this Amendment. The Agreement,

as

~~temporarily~~ amended by this Amendment, shall be and remain in full force and effect, and enforceable in accordance with its terms.

7. 8. This Amendment may be executed in any number of counterparts, each of which will be considered an original, and which together will constitute one and the same instrument. This Amendment may be executed by facsimile signature, including electronic pdf, which will be treated as an original signature.

IN WITNESS WHEREOF, the parties have caused this Amendment to be executed by their duly authorized representatives effective as of the day and year first written above.

University of Utah

University of Utah Department of Emergency Medicine (~~“Provider”~~)
(“Provider”)

By: _____

Samuel R.G. Finlayson, MD, MPH, MBA
Associate Vice President for Clinical Affairs,
University of Utah Health Sciences
Chief Clinical Officer, University of Utah Health

By: _____

Christy Hopkins, MD
Chair, Department of Emergency Medicine

By: _____

Charlton Park
CFO, University of Utah Hospitals and Clinics

Memorial Hospital of Sweetwater County
(“Hospital”)

By: _____

Irene Richardson
Chief Executive Officer

7

Summary report:	
Litera Compare for Word 11.2.0.54 Document comparison done on 12/20/2022 4:53:09 PM	
Style name: Default Style	
Intelligent Table Comparison: Active	
Original filename: Sweetwater Emergency Services First Amendment.clean SW.docx	
Modified filename: Sweetwater Emergency Services First Amendment (OGC 122022).docx	
Changes:	
Add	23
Delete	28
Move From	0
Move To	0
Table Insert	0
Table Delete	0
Table moves to	0
Table moves from	0
Embedded Graphics (Visio, ChemDraw, Images etc.)	0
Embedded Excel	0
Format changes	0
Total Changes:	51

FIRST AMENDMENT TO
AGREEMENT FOR PHYSICIAN PROFESSIONAL SERVICES

This First Amendment to Agreement for Physician Professional Services (the "Amendment") is entered into and effective as of the 1st day of July 2022, by and between Memorial Hospital of Sweetwater County, a Wyoming Hospital ("Hospital") and the University of Utah, a body politic and corporate of the State of Utah, on behalf of its School of Medicine, Department of Emergency Medicine, with its principal place of business at 50 N. Medical Drive, Salt Lake City, Utah, 84132 ("Provider").

RECITALS

A. Hospital and Provider entered into that certain Agreement for Physician Professional Services, dated July 1, 2021 (the "Agreement") with respect to the provision by Provider of certain clinical and administrative services; and

B. Hospital desires Provider to provide emergency medical services medical director services and Provider desires to provide such services; and

C. Hospital and Provider wish to amend the Agreement to memorialize their respective expectations and obligations in connection with the provision of the emergency medical services medical director services and certain other matters.

AGREEMENT

NOW THEREFORE, for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties agree as follows:

1. Section 1.3 of the Agreement is hereby deleted in its entirety and replaced with the following:

1.3 Services: Services include all Clinical Services, Medical Director Services, and EMS Medical Director Services (all as defined below) that Provider provides Hospital pursuant to this Agreement.

2. Section 2.2.1 is hereby added to the Agreement and shall read as follows:

2.2.1 EMS Medical Director Services: Provider shall provide EMS medical director services for the Hospital's Emergency Department (the "EMS Medical Director Services") through a qualified Member Physician approved by Hospital (the "EMS Medical Director"). The EMS Medical Director shall provide services as outlined in the "MHSC Emergency Department Operational Standards and Initiatives" document, which is attached hereto as Exhibit A and incorporated into this Agreement by this reference.

3. Hospital and Provider desire to temporarily amend the Agreement to allow Provider to provide Services through the use of advanced practice providers. Accordingly the following

Section 2.15 is hereby added to the Agreement but shall remain in effect only through March 31, 2023, at which point Section 2.15 shall expire and be of no further force or effect:

2.15. Staffing Assurances:

- a. Provider shall use commercially reasonable efforts to ensure that all Clinical Services will be provided by Member Physicians. In the event Provider is unable to secure the services of a sufficient number of Member Physicians to provide all Clinical Services covered by this Agreement, Provider will provide timely communication to the Hospital describing the circumstances and, subject to the prior written approval of Hospital, and notwithstanding anything to the contrary in this Agreement, Provider may utilize the services of advanced practice providers to perform Clinical Services for so long as is reasonably necessary to enable Provider to secure the services of additional Member Physicians. The following expectations apply with respect to Provider's use of advance practice providers to perform Clinical Services:*
 - (i) Advance practice providers will be subject to all expectations outlined in Sections 2.1, 2.4, 2.5, 2.6, and 2.7 except those expectations which by their nature only apply to physicians;*
 - (ii) Hospital will be obligated to treat advance practice providers as though they are Member Physicians with respect to the expectations of Sections 3.2 and 3.6;*
 - (iii) All rights provided to Hospital under Sections 6.3 and 6.4(b)(1)-(3) will be exercisable by Hospital in the event an advance practice provider engages in actions described in such sections and such actions by their nature are applicable to the practice of advance practice providers;*
 - (iv) Provider will ensure that at all times there is at least one Member Physician available to provide Clinical Services and will limit use of advance practice providers to the extent practicable;*
- b. Hospital will be entitled to a discount of Five Hundred and Three Dollars (\$503) for every shift staffed by an advance practice provider instead of a Member Physician. Such discount will be reflected on invoices submitted by Provider.*
- c. In the event Provider is unable to secure the services of a sufficient number of Member Physicians to provide all Clinical Services covered by this Agreement then, in addition to the ability to utilize the services of advance practice providers as described above, Provider will provide reasonable cooperation with Hospital to explore the utilization of locum tenens physicians. If the parties identify a locum tenens physician who is available to Hospital under an existing or new agreement with Hospital, use of such physician is authorized under this Agreement with the mutual agreement of the parties as to the terms and*

conditions attendant to such use, which agreement shall not unreasonably be withheld. Use of locum tenens physicians will be prioritized over utilization of advance practice providers and Provider will be obligated to reimburse Hospital for all reasonable costs, actually incurred, by Hospital in connection with securing the services of any such physician pursuant to this Section.

4. Article V of the Agreement, titled "COMPENSATION," is removing all text following the heading "Administrative Services Fee," and replacing the same with the following text immediately prior to the heading "Clinical Services Coverage Fee":

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July 1, 2025—June 30, 2026: \$69,782

As compensation for the EMS Medical Director Services, Hospital shall pay Provider monthly. One Thousand Five Hundred Dollars (\$1,500). The foregoing rate shall remain in effect through June 30, 2026. Thereafter, Hospital shall pay Provider a fixed sum, paid in equal monthly installments, that shall increase by a rate of 3% at the conclusion of every twelve (12) month period as follows:

July 1, 2022—June 30, 2023: \$18,000

July 1, 2023—June 30, 2024: \$18,540

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Together, the fee due for the Medical Director Services and the EMS Medical Director Services shall be referred to herein as the "Administrative Fee."

5. Exhibit A, attached hereto and incorporated herein by this reference is made part of the Agreement and replaces in its entirety the version of Exhibit A originally attached to the Agreement.

6. This Amendment shall not be deemed to amend or modify the Agreement in any manner except as specifically provided for herein. Each of the definitions set forth in the Agreement shall apply to the defined terms used in this Amendment. The Agreement, as amended by this Amendment, shall be and remain in full force and effect, and enforceable in accordance with its terms.

7. This Amendment may be executed in any number of counterparts, each of which will be considered an original, and which together will constitute one and the same instrument. This Amendment may be executed by facsimile signature, including electronic pdf, which will be treated as an original signature.

IN WITNESS WHEREOF, the parties have caused this Amendment to be executed by their duly authorized representatives effective as of the day and year first written above.

University of Utah

University of Utah Department of Emergency Medicine
("Provider")

By: _____

Samuel R.G. Finlayson, MD, MPH, MBA
Associate Vice President for Clinical Affairs,
University of Utah Health Sciences
Chief Clinical Officer, University of Utah Health

By: _____

Christy Hopkins, MD
Chair, Department of Emergency Medicine

By: _____

Charlton Park
CFO, University of Utah Hospitals and Clinics

Memorial Hospital of Sweetwater County
("Hospital")

By: _____

Irene Richardson
Chief Executive Officer
Memorial Hospital of Sweetwater County

Contract Check List

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

1. Name of Contract: **AMENDMENT TO LICENSE AGREEMENT**
2. Purpose of contract, including scope and description: **Amends the license agreement between U of U and MHSC Cancer Center. The purpose of the original license agreement is to publicly identify services that are licensed through the use of U of U Marks. This amendment extends the effective date of the license agreement to January 1, 2028. The amendment also provides that the licensing fee of \$50,000.00 is now payable in monthly licensing fees of \$4166.67 instead of lump sum of \$50,000.00. Finally, the amendment deletes the original exhibits that outlined marketing requirements and replaced with updated exhibits.**
3. Effective Date: **When signed by both parties**
4. Expiration Date: **Extended to January 1, 2028 and then automatically renew for successive terms of one year.**
5. Termination provisions: **not included in amendment**
6. Monetary cost of the contract: **no change to cost the amendment just made the annual licensing fee payable monthly instead of lump sum.**
Budgeted? **Yes**
7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. **NA**
8. Any confidentiality provisions? **Not in amendment**
9. Indemnification clause present? **Not in amendment**
10. Is this contract appropriate for other bids? **No**

Contract Check List

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

1. Name of Contract: **Amendment to Consulting Services Agreement between U of U and MHSC Cancer Center.**
2. Purpose of contract, including scope and description: **The original consulting services agreement is amended to change the term of the agreement to January 1, 2028 and to cap the consulting fee at \$75,000.00.**
3. Effective Date: **January 23, 2023**
4. Expiration Date: **extended to January 1, 2028 and then auto renew for successive one-year terms until terminated.**
5. Termination provisions: **not addressed in amendment**
6. Monetary cost of the contract: **The consulting fee annual cost is reduced from \$100,000.00 to \$75,000.00** Budgeted? **Yes**
7. Jurisdiction/Choice of Law provision checked and changed to Wyoming if able to so. **NA**
8. Any confidentiality provisions? **NA**
9. Indemnification clause present? **NA**
10. Is this contract appropriate for other bids? **NO-**
11. Is County Attorney review required? **NO**